

MEMORIAL HOSPITAL OF SACKETT CATER COUNTY  
REGULAR MEETING OF THE BOARD OF TRUSTEES

October 2020

7:00 p.m.

Dial: 800-800-XXXX

Meeting ID: 888 8888 8888

Password: 888888

AGENDA

- 1. Call to Order Taylor Jones
  - A. Roll Call
  - B. Pledge of Allegiance
  - C. [Our Mission and Vision](#) Barbara Sowada
  - D. Mission Moment Trene Richardson, Chief Executive Officer
- 2. Agenda (For Approval) Taylor Jones
- 3. Minutes (For Approval) Taylor Jones
- 4. Community Communication Taylor Jones
- 5. Old Business Taylor Jones
  - A. COVID-19 Preparation and Recovery
    - B. Incident Command Team Update Jim Hite, Incident Commander
    - C. Outstanding – Not Ready for Board Consideration (Placed on the agenda as a reminder of uncompleted business)
      - D. Credentialing Criteria (presented following approval of new medical staff bylaws)
      - E. Employee Policies (from the Human Resources Committee)
        - a. Employee Corrective Action Richard Mathey
        - b. Introductory Period Richard Mathey
- 6. New Business Taylor Jones
  - A. [Financial Audit Report](#) (For Approval) Darryn McCarvey and Dan Deyle/CliftonLarsonAllen
  - B. Board Policy (from the Governance Committee) (For Review) Barbara Sowada
    - C. [Maintenance of Board and Board Committee Meeting Minutes](#)
  - C. Employee Policy (from the Human Resources Committee) (For Review) Ed Tardoni
    - D. [Political Activity](#)
- 7. Chief Executive Officer Report Trene Richardson
- 8. Committee Reports
  - A. [Quality Committee](#) Martyelsey
  - B. [Human Resources Committee](#) Ed Tardoni
  - C. [Finance & Audit Committee](#) Richard Mathey
    - D. [Capital Expenditure Requests](#) (For Approval)
    - E. [State Loan and Investment Board Capital Expenditure Requests](#) (For Ratification)
    - F. [Bad Debt](#) (For Approval)

MEMORIAL HOSPITAL OF SEETATER COUNTY  
REGULAR MEETING OF THE BOARD OF TRUSTEES

October 2020

2:00 p.m.

Dial: 800-800-XXXX

Meeting ID: 888 8888 8888

Password: 888888

AGENDA

September Committee Meeting Information

- |  |  |
|--|--|
| D. <a href="#">Building &amp; Grounds Committee</a>          | Marty Halsey   |
| E. Foundation Board  | Taylor Jones   |
| F. <a href="#">Compliance Committee</a>                      | Ed Tardoni   |
| G. <a href="#">Governance Committee</a>                      | Barbara Sowada   |
| H. Executive Oversight and Compensation Committee            | Taylor Jones   |
| I. <a href="#">Joint Conference Committee</a>                | Richard Mathey   |
| III. Contract Review   | Susan Campbell, <i>In-House Counsel</i>                |
| A. Contract Consent Agenda <i>(For Approval)</i>             |  |
| G. <a href="#">Experian Health Master Customer Agreement</a> |  |
| J. Medical Staff Report                                      | Dr. Lawrence Lauridsen, <i>Medical Staff President</i> |
| K. Good of the Order   | Taylor Jones   |
| L. Executive Session (N.J.S. 17:27(a)(ix))                   | Taylor Jones   |
| M. Action Following Executive Session                        | Taylor Jones   |
| N. Adjourn   | Taylor Jones   |



### **Our Mission**

*Compassionate care for every  
life we touch.*

### **Our Vision**

*To be our community's trusted  
healthcare leader.*

### **Our Values**

*Be Kind*

*Be Respectful*

*Be Accountable*

*Work Collaboratively*

*Embrace Excellence*

### **Our Strategies**

*Patient Experience*

*Workplace Experience*

*Quality & Safety*

*Growth, Opportunity & Community*

*Financial Stewardship*

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

**September 2, 2020**

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

**CALL TO ORDER**

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

Officially present: Ms. Irene Richardson, Chief Executive Officer, Mr. Lawrence Lauridsen, Medical Staff President and Mr. Jim Phillips, Legal Counsel.

**Pledge of Allegiance**

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

**Our Mission and Vision**

Mr. Mathey read aloud the mission and vision statements.

**Mission Moment**

Ms. Richardson said we received a call from the husband of a patient who called to say some very kind words about Dr. Janu Symington. The husband called to let us know that his wife is doing fantastic and how much they both love Dr. Symington and appreciate her. He said she is a “doctor” and emphasized the word doctor, said, “love her” and she has done amazing things for his wife. He said we are very lucky to have Dr. Symington here. Ms. Richardson said this story goes right along with our mission. Mr. Jones said he knows there are lots of good things going on and it is always good to hear about it.

**APPROVAL OF AGENDA**

The motion to approve the agenda as presented was made by Mr. Tardoni, second by Mr. Mathey. Motion carried.

**APPROVAL OF MINUTES**

The motion to approve the minutes of the August 2020 regular meeting as presented was made by Mr. Mathey, second by Mr. Sowada. Motion carried. The motion to approve the minutes of the August 12, 2020 special meeting as presented was made by Mr. Jelsey, second by Mr. Tardoni. Mr. Sowada said Mr. Mike Levins from ST Engineering was in attendance at the meeting and requested he be listed as a guest at the meeting. Mr. Jelsey amended his motion to include Mr.



Levins as a guest at the meeting and Mr. Tardoni amended his second. Motion carried. The minutes were approved as corrected.

## **COMMUNITY COMMUNICATION**

There were no comments.

## **OLD BUSINESS**

### **COVID-19 Preparation and Recovery - Incident Command Team Update**

Ms. Jim Hite Incident Command said we have some good news. She said we have not been able to purchase any of our normal 9 masks however we have been able to order reusable Envomasks and we have 20 in our supply. They have disposable filters and we feel good about having those. Ms. Hite said that so far we have performed 6440 tests with a 4.4% positive rate. In the last two weeks we have done 111 tests with only 16 positive. Our positive rate dropped to 2.2% in the past two weeks. She said this is great for our community especially with school starting. Ms. Hite gave a shout out to Mr. Cielette Barn who is working very hard with public health and school districts and that is working very well. Mr. Sowada asked if everyone saw in the Rocket-Miner last week that Ms. Hite and a couple of additional nurses received awards. Ms. Hite said the whole team received the Collaborative Practice Award. She said the rainpower on that team has been phenomenal and they have been working hard. Mr. Jones said we appreciate everything they are doing. Mr. Elsey said he spent the last couple of weeks at Rock Springs High School. He said the students and the staff are very obedient to the requirement of mask wearing there has been a lot of cooperation and he thinks that bodes well for our community. Ms. Hite said she has kids in school and they said they don't really mind wearing the masks. She said everyone wants everything to be open so they are willing to wear the masks.

### **Employee Policy – Cultural Diversity**

Mr. Tardoni said this policy originated with the hospital staff. The Human Resources Committee voted on it and it is up for approval by the board at this time. Motion to approve the policy was made by Mr. Tardoni second by Mr. Sowada. Motion carried.

### **Board Policy – Attendance at Board Committee Meetings**

Mr. Sowada said this policy basically speaks to our ability to attend other committee meetings as desired and to substitute for people who are not able to attend. The substitution is at the pleasure of the President of the board. She said she thinks the policy is straightforward and does comply with the Wyoming Meetings Act. She said this is the second reading. The motion to approve the policy as written was made by Mr. Sowada second by Mr. Mathey. Mr. Elsey said he thinks this is a big improvement over the way it was previously worded and thinks the changes made reflect the concerns he had so he is supportive of the new policy. Mr. Mathey noted a typo in paragraph 4 "all board and committee meetings." Dr. Sowada amended her motion to include the correction; Mr. Mathey amended his second. Motion carried. The policy was approved with the spelling correction.

## **Termination and Appeal Policy Update**

Mr. Mathey said the policy remains pretty much as it was the last time the Board looked at it. He said the Medical Staff bylaws are in the works and have been for quite some time. He said it is down to some narrow issues and one is how to treat non-physician practitioners and whether they should be members of the Medical Staff or not. Mr. Mathey said that has ramifications for the Termination and Appeal Policy. He said the other question has to do with complaints against employed physicians and whether those complaints fall under medical executive/HR/contract rights – that is a matter for the Medical Staff to decide. Mr. Mathey said he doesn't think that particular matter will make any difference on the Termination and Appeal Policy. The part this policy plays both under Medical Staff bylaws and under the case of employed physicians is if there is a defense inserted based on a constitutionally supported category. If a doctor has an action against his or her privileges taken there is a hearing and appeal process but that hearing and appeal process in the Medical Staff bylaws at no time is a constitutional defense asserted by the practitioner. Mr. Mathey said when the bylaws are finally adopted by the Board then this policy and several others corrective action/intro period/policies regarding physician and non contracting physician contract form/all of these things will have to be coordinated ultimately with the Medical Staff bylaws. He said the alternative is to take action on these now and then not wanting to send the wrong message to the Medical Staff/amend them to comply with the Medical Staff bylaws down the road. Mr. Mathey said we don't want to look like we are making decisions now that dictate to them how to amend the Medical Staff bylaws. Mr. Mathey said this same report is going to serve as his report in the Joint Conference Committee section in the committee reports section. Mr. Tardoni said he agreed and if we can get the language coordinated these things can move very quickly. Mr. Kelsey said he agrees with Mr. Mathey as well. Mr. Mathey said he will keep everyone advised.

## **NEW BUSINESS**

### **Board Policy – Contracts Requiring Board Approval Policy**

Mr. Sowada said this is the second or third time the policy has come before the Governance Committee. She said the changes are highlighted in yellow. The motion to approve the policy as presented was made by Mr. Sowada/second by Mr. Mathey. Mr. Jones asked in paragraph four and five why would all consultant and management contracts from Ms. Richardson come to the Board when all along we have been saying in paragraph 2 that anything over \$2,000 would come to the Board. Mr. Mathey said the policy was amended from how it appeared last month based on Mr. Kelsey's questioning whether the \$2,000 limit applied to some of these classes of contracts. Mr. Mathey said it was tested out in Governance and he was not the only one confused therefore the "all's" were added. He said the hospital consultant contracts and hospital management contracts were inserted in this policy in direct response to the previous CEO's behavior. Mr. Mathey said perhaps that is no longer appropriate. He said we have a new CEO and we don't have the same issues as we did with the previous one. He said it was the intent to say what it says when enacted. Whether we want to continue with that that is open to debate. Mr. Jones said he would say no because it's conflicting to him in his mind. He said one of the things we have to remember

is Ms. Richardson is our CEO—she runs things—steers the ship—is in charge of it—and has to have some flexibility. Mr. Jones said she is running a business and needs to have some flexibility and needs to react and if it's for the good of the Hospital—we are hindering her ability to do her job. He said the flipside is we have already said we trust her to spend up to \$200,000 on her own and we should do that. Mr. Sowada said she agrees with what Mr. Jones has put forward. Mr. Mathey asked for an example of a management contract. Ms. Richardson said previously we did have contracts to manage the clinic and that would be an example. For her—an example of a potential agreement would be in April of this year when Covid hit and our volume had decreased. We talked with CliftonLarsonAllen and they had a model and met with us quite regularly to discuss projections and their model helped us make plans to how we were going to move into the future financially. Ms. Richardson said she thought she had the authority to enter into that agreement. Mr. Jones said that is her job—and what the Board hired her for. Mr. Tardoni said our procedures are already set up. Anything under \$200,000 that Ms. Richardson approves is what she shares with the Board at meetings. He said he would support removing that language from the policy. Mr. Sowada said “all” is a new addition. Those that are highlighted are new language. In the original document with the exception of real estate “all” was not included. Mr. Kelsey said in the spirit of compromise here he would like to make a motion roman numerals four and five be eliminated from the policy and suggested the other items remain. He said he thinks the Board ought to be aware of those and approve those other items. Mr. Sowada rescinded her motion that we approve the policy as written. Mr. Mathey rescinded his second to Dr. Sowada's motion and provided the second to Mr. Kelsey's motion. Mr. Mathey said what it will say to him with those two items deleted is that hospital consultant contracts and employment contracts in excess of \$200,000 will be brought to the Board. Motion carried.

### **Letters of Appointment**

Mr. Jones said these items are new and did not come through the typical process of two readings.

**Antimicrobial Stewardship Program (ASP):** Ms. Mari Quisenberry—Chief Clinical Officer—said we recently had a quality program review. A consultant reviewed our program and accreditation standards. The applicable standard is included on the bottom of the letter. The Joint Commission TCC standard says the governing body must appoint the ASP. Ms. Quisenberry said we are asking the Board to join us in appointing Ms. Sarah Romero as the ASP. She heads our committee—has obtained training—and communicates well with staff. We were reached out to from TCC on the Covid outreach call list. We responded to TCC earlier in the day and we expect they will be coming for survey anytime from the next couple of weeks to the next month. Ms. Quisenberry said we are asking the Board to take action at this time. The motion to approve the ASP Letter of Appointment as presented was made by Mr. Sowada—second by Mr. Mathey. Motion carried.

**Infection Prevention Program (IP):** Mr. Kristy Nielson—Chief Nursing Officer—said we have a similar request for formal appointment of Ms. Mureen Hove as the professional preventionist. The motion to approve the IP Letter of Appointment as presented was made by Mr. Sowada—second by Mr. Mathey. Motion carried.

### **Utilization Management Plan**

Mr. Nielson said the Plan is up for annual review. She said it is a Centers for Medicare and Medicaid Services (CMS) regulation. She said we use Utilization Management and the Plan as the way to evaluate the appropriateness, necessity, and effectiveness of medical care. Mr. Nielson said we have a committee which is actually not required by CMS. She said the Plan is something the Board will see every year and it has been reviewed by everyone else in need of review. Mr. Elsey reported the Plan was discussed at the Quality Committee meeting in August. The motion to approve the Utilization Management Plan as presented was made by Mr. Elsey, second by Mr. Mathey. Motion carried.

### **Performance Improvement and Patient Safety (PIPS) Plan Priorities**

Ms. MacLachlan, Director of Quality, Accreditation, and Patient Safety, said the PIPS Committee is tasked with the role of evaluating opportunities for improvement and trying to prioritize those opportunities for improvement. The group ran through the matrix and looked at trends in data. They looked at the strategic plan as well as CMS and TJC standards. The Committee talked about several different topics for improvement. We are recommending three distinct priorities: HCAHPS, culture of safety action plans, and high-level sterilization. Ms. MacLachlan said the methods and goal setting are in development. She said if data is trending in the wrong way or if something is identified as higher priority, we can run through the matrix during the year. This will help suffice TJC standard. The Hospital chooses a distinct number of improvement projects for the year. Our consultant recommended that for our organization size we stick with two or three. The plan priorities have been approved by PIPS, the Quality Committee of the Board, and the Medical Executive Committee. Ms. MacLachlan said it is a requirement that it be approved by the Board. She said just because something was not identified as a priority does not mean that work on efforts stops. The motion to approve the PIPS Plan Priorities as presented was made by Mr. Mathey, second by Mr. Elsey. Motion carried.

### **CARES Act Lab Project, Construction Manager at Risk, and Contract from the Architect Approval**

Ms. Richardson said she wanted to talk a little bit about the CARES Act funding we received. We have received CARES Act funds. The money must be used and spent by July 1, 2021. Ms. Richardson said we have done a lot of research and met frequently to come up with a good project. The criteria with CARES is similar to the State Loan and Investment Board (SLIB) process. Our current lab waiting area does not allow for much social distancing so when Covid first hit we needed to offer outpatient lab services in an area where proper social distancing could occur. We identified the Foundation as that area and it is only a temporary solution. Ms. Richardson said patients like that location. We serve 200-300 lab patients per day. We like the idea of patients being able to receive their services in an area that would allow for social distancing and be convenient. We worked with Plan 1 for plans to give the Foundation space back to them and look at new lab space. We looked at a SLIB grant but the deadline to use those funds is December 31, 2020. Ms. Richardson said we could not have the project complete by then. We asked Plan 1 to send us a lab remodel project within a certain range. It is projected to take 8-12 months to complete. We feel time is of the essence. Ms. Richardson asked the Board for their approval to use the CARES act money to move forward with this project. She said we hope for approval for a

Construction Manager at Risk (CMAR) and receive approval for the contract with the architect so we can start the project as soon as possible. Alternatively, when we did receive the contract from Plan 1 we would have to come back to the board for approval. Ms. Richardson said we are asking for approval now so we can start moving forward. She said that leaves us with some funds in the CARES Act money. We don't know what our volume will look like. Our rebound was good for July but August was not as much as July. Ms. Richardson said we want to keep some funds available just in case we have to off-set expenses. She said she would like the authority to move forward with the project for \$4M-4.5M for a large remodel and to use CARES Act money for that project. She requested the authority to approve a CMAR and the authority to approve the contract with the architect to move forward with the project. She said the approval would be to not exceed \$4.5M. She said if it does then she would bring it back to the board for further review. Mr. Tardoni noted the drive-thru vaccination area in the plans. Mr. Belsey asked if we will have somewhat of a contingency in case we need funds for the SLI projects. Ms. Richardson said he is absolutely right and we do have a contingency for that as well. She said we talked about the potential that may be \$1.2M that we may have to fund. Ms. Richardson said she knows Mr. Levins is trying very hard to expedite that project so we can have finished by December 30 but if not we do have that built in. She said she can bring architect plans to the October meeting for review. The motion to approve Ms. Richardson's procurement of a CMAR was made by Mr. Belsey, second by Mr. Tardoni. Motion carried. The motion to approve a budget for this large renovation and addition to fall between \$4-4.5M of CARES Act funds knowing there are contingency plans in the background was made by Mr. Belsey, second by Mr. Tardoni. Motion carried. The motion to give Ms. Richardson the authority to contract with Plan 1 Architects regarding plans for the large renovation was made by Mr. Belsey, second by Mr. Tardoni. Motion carried.

Mr. Jones said the whole new business section was a little unorthodox of how we do things but he appreciates everyone's flexibility to get things done.

### CHIEF EXECUTIVE OFFICER REPORT

Ms. Richardson thanked the board for approval of the project and said we will work very hard to get it going as soon as possible. She reported 412 staff, trustees and physicians have attended the Person-Centered Care (PCC) training workshops. We are trying to accommodate staff, physicians and trustees by offering Friday afternoons and Saturdays. She said our goal is to have everyone trained by June 2021. Ms. Richardson said as soon as everyone is trained we can move forward with other modules of the PCC training and we are excited about that. In Quality & Safety we are preparing for TIC to be here anytime. Ms. Richardson commended leaders and staff in preparing for the survey. We have been rounding on staff. Several of our grants have been approved by SLI and they are projects that will help us tremendously with the treatment of Covid and we are very grateful. Our projects have all been separate and specific. Ms. Tiffany Marshall, Foundation Director, has done a great job with organizing everything. SLI is looking at a better process to get this money out to different groups. They have passed the allocation model for some of the remainder of the \$2.5M received. We calculated our allocation was going to be \$18M. We have received \$1.5M in grants. The stipulation is nothing previously approved would be taken back. We are moving forward with the \$1.5M approved. Ms. Richardson said this is kind of a wait-and-see-what-happens with how this process goes. People continue to apply for grants. We do not have any grants we will be requesting at their next meeting on September 1. We may submit some requests in October based on how things go with the allocation process. One project is for some

IT equipment—one for vents in Respiratory Therapy—and one is for new furniture that would be easier to maintain through a pandemic. At that point—we would probably move away from the grants and focus on CARES Act monies. Ms. Ann Clevenger will be joining us as Chief Nursing Officer on September 14. Mr. Nielson is staying on until September 30 and we are trying to see if she will be available to us depending on when TCC comes to help us with that transition. Mr. LeAuguste OBY started yesterday. We welcome him to our hospital family. He is so excited to be here and said he already has patients scheduled. Ms. Richardson said we have an annual quality workshop scheduled Thursday October 29 pending a couple of responses back from the board to confirm an acceptable date and time. This workshop will be in lieu of the November regular board meeting. Ms. Richardson thanked the board for all of their support. She said she really appreciates the board being available to us at a moment's notice and available to us for board meetings to help us move forward with projects. She thanked them for their help and guidance. She gave a shout out to staff—physicians—and everyone helping to keep our patients and staff safe. Mr. Jones said Ms. Richardson always keeps the board informed and that is appreciated.

## **COMMITTEE REPORTS**

### **Quality Committee**

Mr. Elsey said the chair report and minutes are in the packet. He said he and Mr. Mathey will soon be receiving a briefing on the consultant—Ms. Mella Grainger's—report. Mr. Elsey said Ms. Jackson is doing a great job.

### **Human Resources Committee**

Mr. Tardoni said everything is in the packet. After he submitted his chair report—staff asked that the communication system policy be removed from the packet at this time so staff could re-examine the policy.

### **Finance and Audit Committee**

Mr. Mathey said he deferred to the packet and draft minutes.

***Cerner Electronic Medical Record:*** Ms. Tami Love—Chief Financial Officer—reviewed a short presentation. She said members of the Electronic Medical Record (EMR) Steering Committee are on the call to help answer questions. Mr. Lauridsen said he is so excited for this new EMR. Ms. Megan Gilbert from Informatics said she cannot stress enough about the importance of data collection. She said we cannot improve the care we are giving until we know where we have been and this will be a huge improvement. Mr. Tardoni said our current system will not be supported in the future. Mr. Brianne Crofts—Surgery—said we spent a lot of time looking at systems and did a very good job of making a very good decision. She thinks Cerner will give what we need as physicians—patients—and staff—and said she thinks we have longevity. Mr. Crofts said we know it's a lot of money but thinks it will make everybody's experience better here from the patient to the provider to the billing provider and said she thinks it's very important. She thanked the board for their time and consideration. Ms. Bethany Bettolo from Informatics added the EMR Steering Committee wanted to focus on end users. She said staff have had input on this. It was a facility-wide decision. She said it is exciting that adoption is from the floor all the way up. Mr. Nielson

said the nursing and clinical staff cannot thank the board enough. Mr. Jones thanked everyone for their comments. The motion to approve the capital request for the Cerner EMR was made by Mr. Mathey second by Mr. Tardoni. Motion carried. Mr. Jones thanked everyone for their work and endless hours.

**Capital Expenditure Requests:** Mr. Mathey reviewed capital expenditure request FY21-2 from Mr. Cody Christensen, neurologist. The motion to approve FY21-2 as presented was made by Mr. Mathey second by Mr. Tardoni. Motion carried. Mr. Mathey reviewed capital expenditure request FY21-3 from Mr. Prachi Pawar, neurologist. Ms. Richardson said she joins us at the end of October or early November. The motion to approve FY21-3 as presented was made by Mr. Mathey second by Mr. Tardoni. Motion carried. Mr. Mathey reviewed capital expenditure request FY21-4 from Facilities. The motion to approve FY21-4 as presented was made by Mr. Mathey second by Mr. Tardoni. Motion carried. Mr. Mathey reviewed capital expenditure request FY21-10 from Medical Imaging. The motion to approve FY21-10 as presented was made by Mr. Mathey second by Mr. Tardoni. Motion carried. Mr. Mathey reviewed capital expenditure request FY21-14 from Surgical Services. The motion to approve FY21-14 as presented was made by Mr. Mathey second by Mr. Tardoni. Motion carried.

**Bad Debt:** The motion to approve the net potential bad debt of \$1,042,680.09 as presented was made by Mr. Mathey second by Mr. Tardoni. Motion carried. Mr. Ron Cheese, Director of Patient Financial Services, said we expect to see self-pay grow in the month of November or December. Mr. Tardoni said he is wondering if our Dialysis Clinic will have any impact on the amount showing from the Emergency Department. Mr. Cheese said it will really curtail our losses if we can push patients through the Dialysis Clinic instead of the ED. He said we as a team need to work on this together and focus on this. Mr. Tardoni said it is probably more convenient for patients as well. Ms. Leslie Taylor, Clinic Director, said we have seen an increase in the Dialysis Clinic and she thinks it will increase in October and November.

### **Building & Grounds Committee**

Mr. Elsey said he did not have anything to add. He said he thinks everything that needs to be brought forward is in the chair report or minutes in the packet. He offered to answer any questions.

### **Foundation Board**

Ms. Marshall said the Foundation Board has two new board members and we are excited to have them. The board met and will move forward with the Red Tie Gala. Ms. Marshall said we will make adjustments as needed to do whatever we can to have a gala next year. The board is brainstorming ideas for the Christmas event. Ms. Marshall lost the connection to the call and the report ended.

### **Compliance Committee**

Mr. Tardoni said he did not file a chair report because the information in the packet is pretty self-explanatory.

## **Governance Committee**

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

## **Executive Oversight and Compensation Committee**

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

## **Joint Conference Committee**

Mr. Mathey said his report previously given is the Committee report as well as the Governance report. He said the Medical Staff Bylaws as drafted do include non-physician practitioners included in the Medical Staff and is contrary to the Board of Trustees Bylaws. He said we will deal with that when it comes up.

## **CONTRACT REVIEW**

Mr. Jones said Ms. Susan Campbell, Legal Counsel, was unable to attend the meeting and asked Ms. Richardson to review. The motion to approve the contracts on the consent agenda and authorize the CEO to sign the contracts was made by Mr. Tardoni, second by Mr. Sowada. Motion carried.

## **MEDICAL STAFF REPORT**

Mr. Lauridsen said most of what he was going to say has already been said. The Medical Executive Committee met and discussion was mostly regulatory. He said one of our doctors was published in the Journal of Clinical Oncology. Mr. Lauridsen said it is exciting to see our doctors' names out there. He welcomed Mr. LeAuguste and Mr. Prachi Pawar.

## **GOOD OF THE ORDER**

Mr. Tardoni said he is the rep to the State Miners Board. They have been meeting by Zoom. They have a new Director, Ms. Angela Oailey. Mr. Tardoni said Gillette has remained the main office for the time. They still have a Rock Springs office. He said there are over 8,000 miners in the state part of this insurance program. They spent about \$1M in payments last year. He said they are looking at some advertisements to make sure the community understands this insurance program so those who qualify can take advantage.

Mr. Sowada acknowledged Ms. White for the Collaborative Practice Award, Ms. Alisha Macfie, Director of Surgical Services, and the staff in Surgery for their award, and Ms. Rachel Harris in the operating room for receiving a Faces of Our Future nursing award. Mr. Sowada said there was a really wonderful article about Ms. Tamara Walker and her COPE program for stress management for kids 6-18. Mr. Sowada said in this day of multiple stresses and Covid, it sounds like Ms. Walker has a waiting list for this program. She said "hats off" to all of them.



Ms. Richardson said Mr. Auguiste was on the call, welcomed him, thanked him for joining us, and said we are excited he is here. She said Ms. Stacey Nutt has accepted the Interim IT Director position and we welcome her as well.

Mr. Jones said Ms. Marshall tested the rest of her report to him. The Foundation Board is starting to plan Christmas with something in the Healing Garden with Santa so they can drive through and get a gift. We are still trying to have some events and social distance. The Annual Gifts Committee has built their structure. We are working on building our donor wall. We want to recognize hospital staff so we will be doing something for staff in the next month or so.

## EXECUTIVE SESSION

Mr. Jones said there would be an executive session for personnel. He said the Board would jump off the current call and be on their executive session call. The motion to go into executive session was made by Mr. Mathey, second by Mr. Sowada. Motion carried. Mr. Jones said the Board would take a seven-minute break and convene at 4:00 PM.

## RECONVENE INTO REGULAR SESSION

At 4:00 PM, the Board came out of executive session and the motion to go back in to regular session was made by Mr. Mathey, second by Mr. Sowada. Motion carried.

## ACTION FOLLOWING EXECUTIVE SESSION

### Approval of Privileges

The motion to approve privileges for healthcare professionals as discussed in executive session was made by Mr. Mathey, second by Mr. Sowada.

### Credentials Committee Recommendations from August 11, 2020

1. Initial Appointment to Associate Staff 1 year
  - Mr. LeAuguiste, MD/PhD
2. Initial Appointment to Locum Tenens Staff 1 year
  - Mr. David Crockett, Emergency Medicine MD of MD
3. Reappointment to Active Staff 2 years
  - Mr. Joseph Oliver, Orthopaedic Surgery
  - Mr. Sigbee, MD, Otolaryngology
  - Mr. Israel Stewart, Internal Medicine
  - Mr. Sean Stachon, Public Health/Family Medicine
4. Reappointment to Consulting Staff 2 years
  - Mr. Anna Catino, Cardiovascular Disease MD of MD
  - Mr. Gavin Arnett, Tele Radiology, VRC
5. Reappointment to Locum Tenens Staff 1 years
  - Mr. Samran Khan, Pulmonary Medicine
  - Mr. Astrid Haaland, Emergency Medicine MD of MD

The motion to approve the CEO to execute doctor contracts and doctor contract extensions as discussed in executive session was made by Mr. Mathey second by Mr. Tardoni. Motion carried.

The motion for board approval of the yet unnamed steering committee as discussed in executive session was made by Mr. Mathey second by Mr. Sowada. Motion carried.

### ADJOURNMENT

There being no further business to discuss the meeting adjourned at 8:00 PM.

\_\_\_\_\_

Mr. Taylor Jones President

Attest:

\_\_\_\_\_

Mr. Marty Selby Secretary

# Memorial Hospital of Sweetwater County

## 2020 Audit Results and Report to the Board of Trustees

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# Executive Summary

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# Results of Professional Services

## Significant Transactions

- COVID-19 Provider Relief Funds

## Audit Adjustments

- One proposed audit adjustment resulting in a decrease to net position of approximately \$114,000

## Material Weaknesses

- No Material Weaknesses Identified

## Upcoming Accounting Standards

- Leases
- Capitalized Interest





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# Your Business

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# Industry Benchmark Data

## Memorial Hospital of Sweetwater County (MHSC)

- \$85.7 Million Net Patient Service Revenue
- 2017 –2020 Data, Based on Audited Financial Statements

 2017-2020

## CLA Benchmark (CLA)

- Hospital's between \$25M and \$100M in Net Patient Service Revenue

 2017-2019

## Standard & Poor's (BBB+ to BBB-)

- Median indicators from a sample of 73 non-profit hospitals in the United States

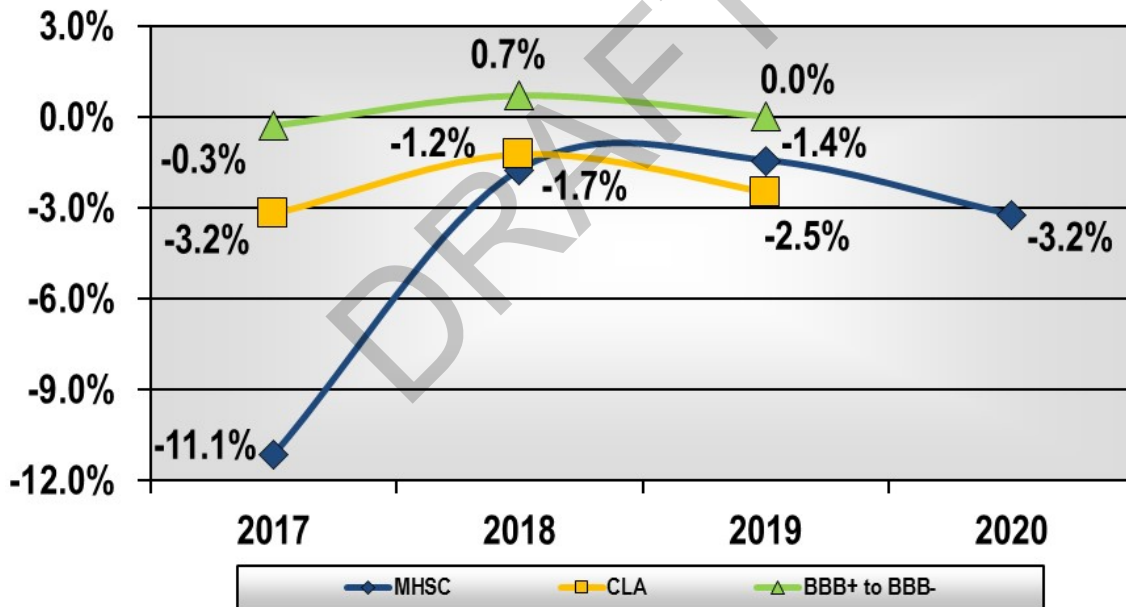
 2017-2019



## Operating Margin

### Definition:

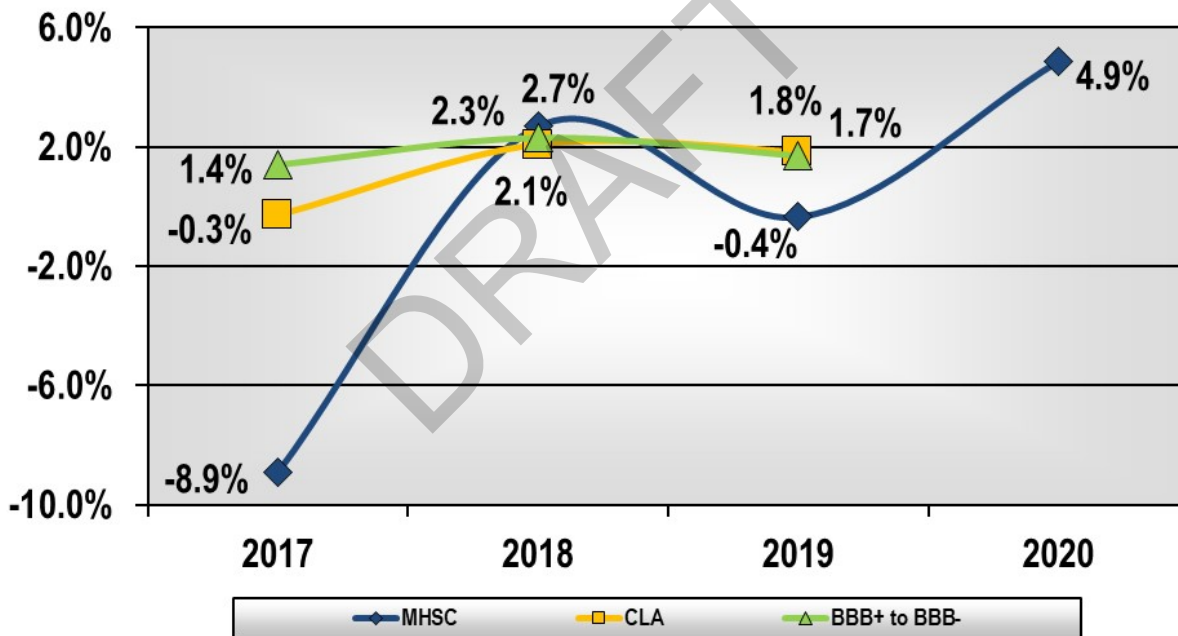
This ratio is operating income as a percentage of net patient service revenue plus other operating revenues. It is used to report the facility's return on revenues which relate to the main purpose of operations.



## Total Margin

### Definition:

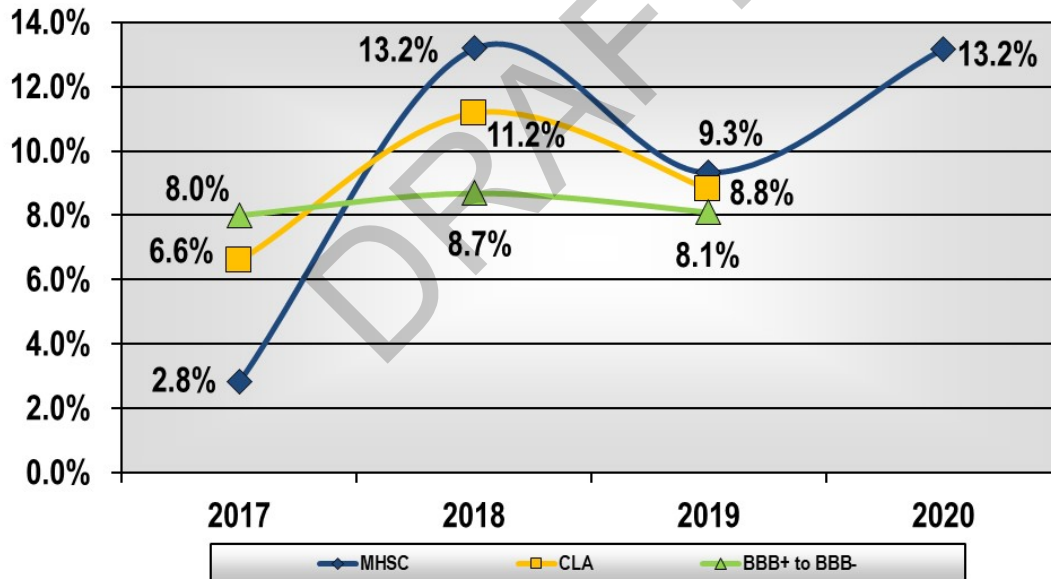
Total margin reflects excess of revenue over expenses as a percentage of total revenues, including non-operating revenues.



## Total EBIDA

### Definition:

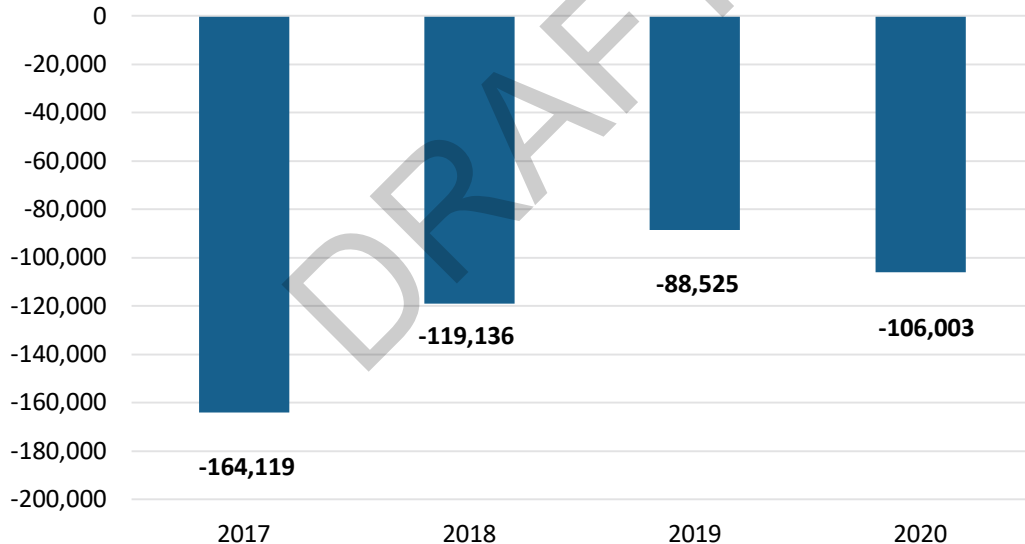
Total EBIDA represents Earnings Before Interest, Depreciation, and Amortization divided by total revenues. It is used as a rough measure of cash flow in a facility. This ratio is often used when evaluating debt capacity.



# Operating Loss per Provider FTE

## Definition:

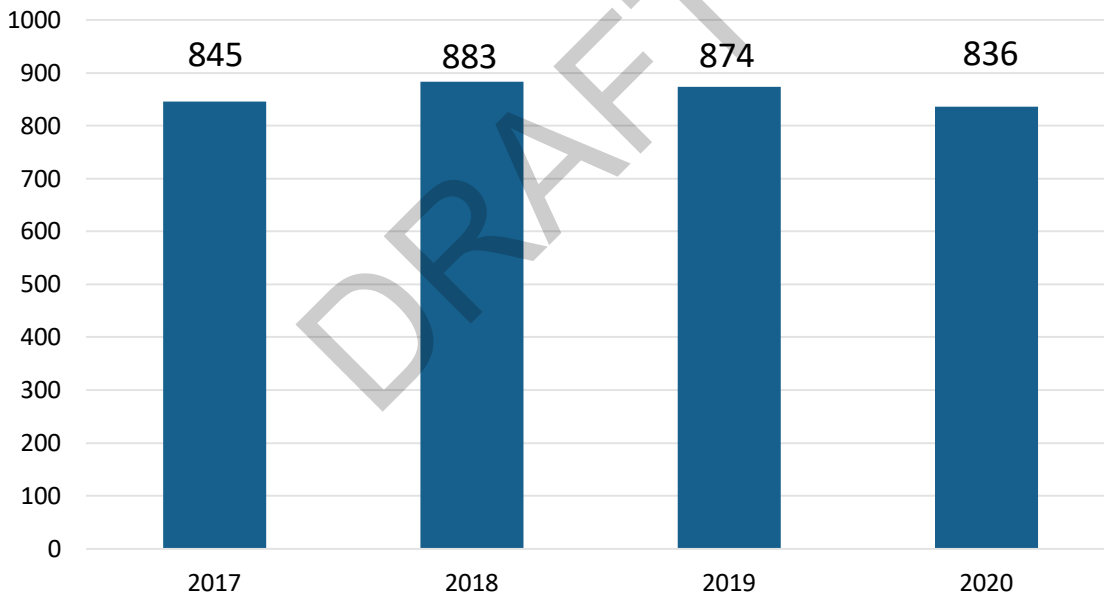
This is measured by dividing the amount of operating losses in the physician practices by the Provider FTE's worked. We would recommend not focusing necessarily on the loss position of the practice but more the trend over a four year time horizon.



## Visits per Provider FTE

**Definition:**

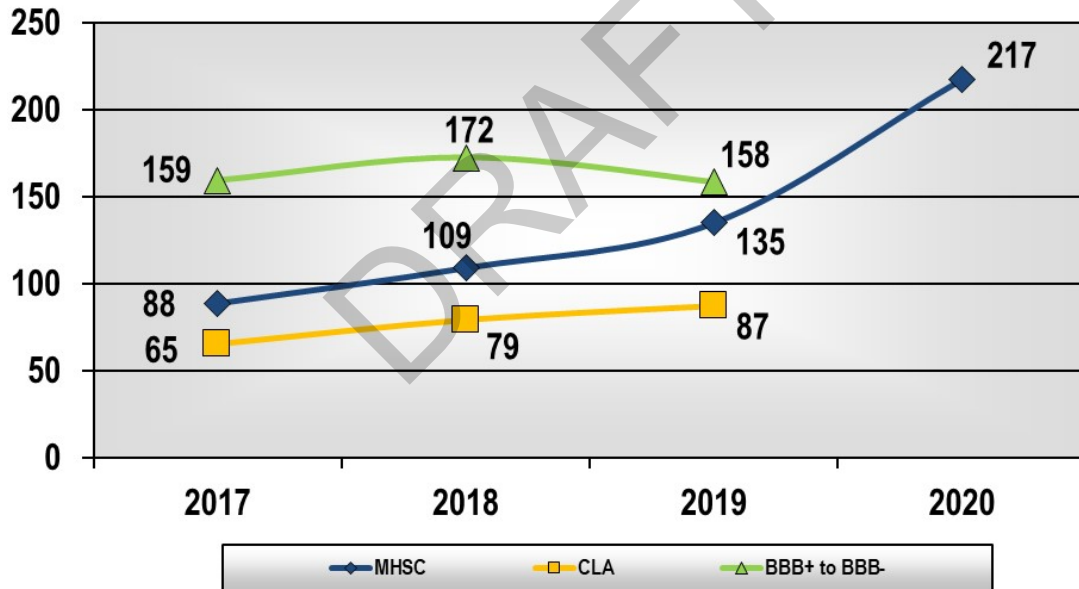
This is measured by dividing the amount of visits (primary care and specialty care) in the physician practices by the Provider FTE's worked.



## Days Cash on Hand (All Sources)

### Definition:

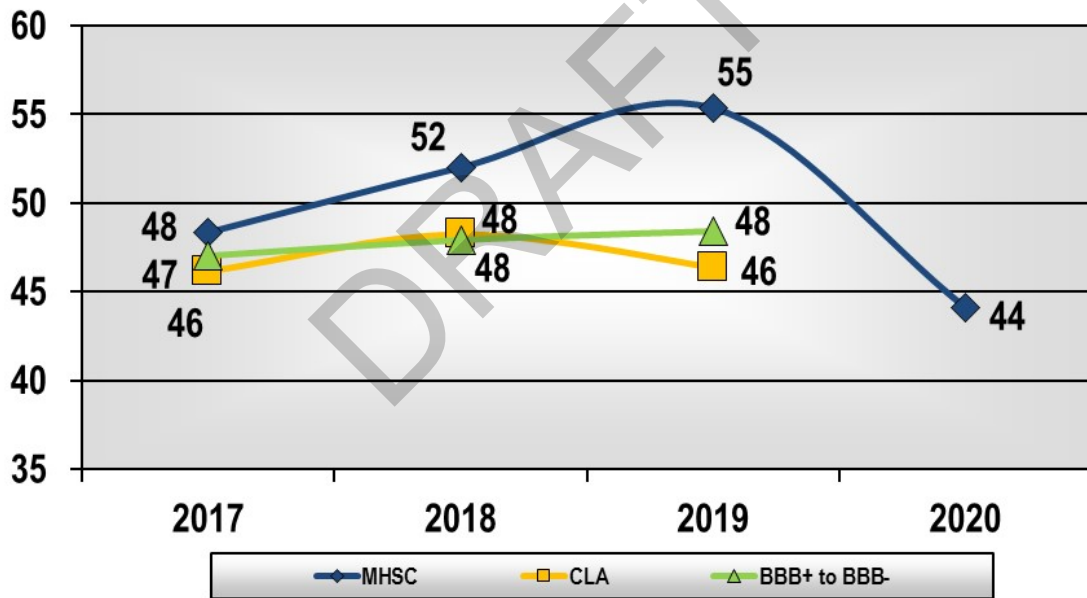
Days Cash on Hand measures the number of days of average cash expenses that the facility maintains in cash and amounts reserved for capital improvements. High values usually imply a greater ability to meet both short-term obligations and long-term capital replacement needs.



## Net Days in Accounts Receivable

### Definition:

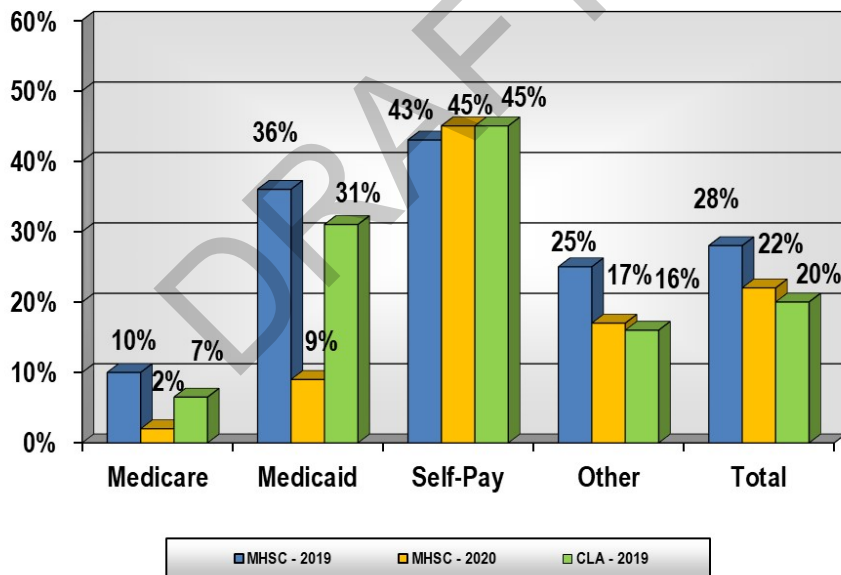
Days in patient accounts receivable is defined as the average time that receivables are outstanding, or the average collection period.



## Percentage of A/R over 90 Days Old

### Definition:

This is measured by dividing the amount of patient accounts receivable over 90 days by the total receivables in that payor category. Generally the lower this percentage is, the shorter turn around time the facility experiences for collecting receivables.

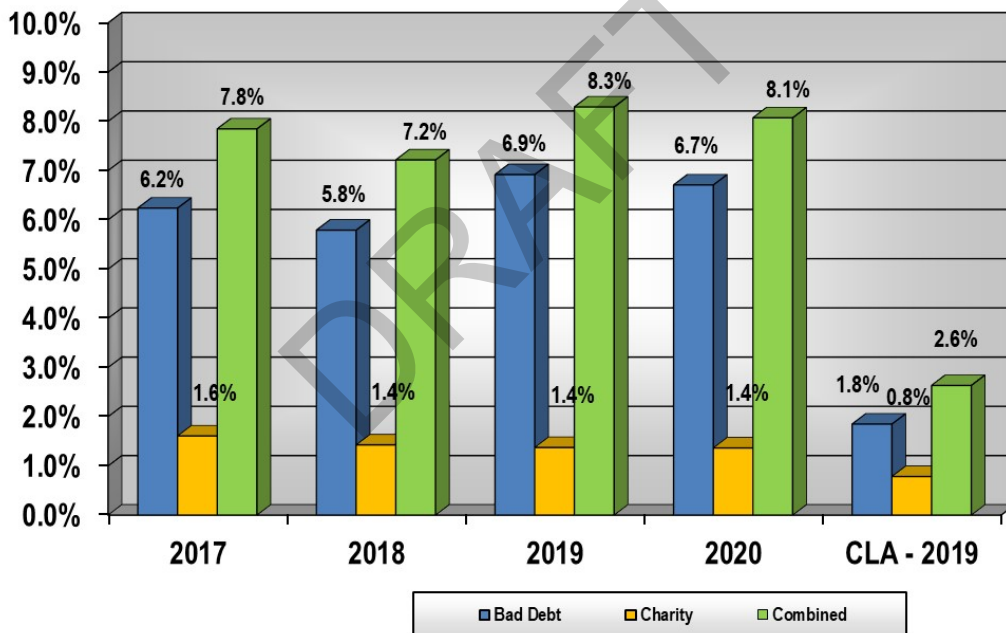




## Bad Debt and Charity Care as a Percent of Gross Patient Service Revenue

### Definition:

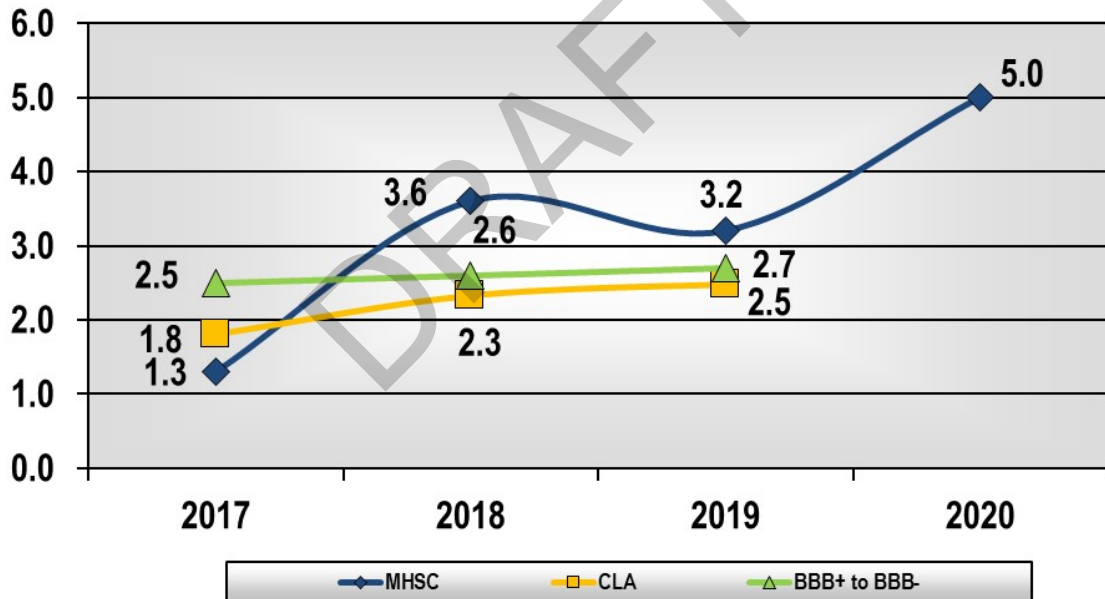
This ratio is calculated by dividing the bad debt and charity care by gross patient service revenue.



## Debt Service Coverage

### Definition:

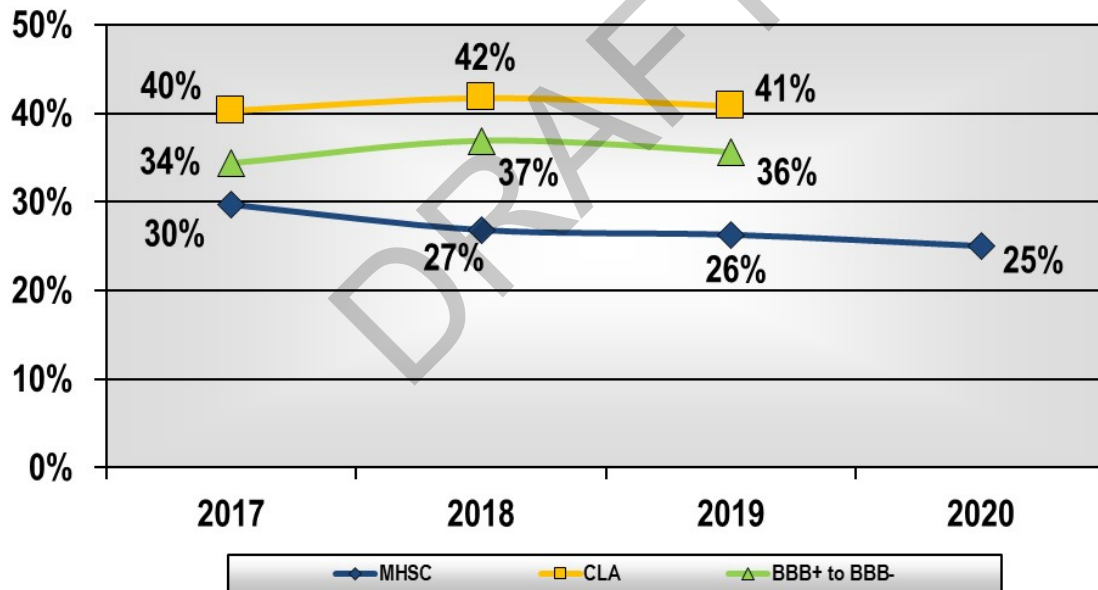
Debt service coverage is calculated as income available for debt service (net income + depreciation and amortization + interest expense) divided by the annual debt service requirements (principal payments made + interest expense).



## Debt to Capitalization

### Definition:

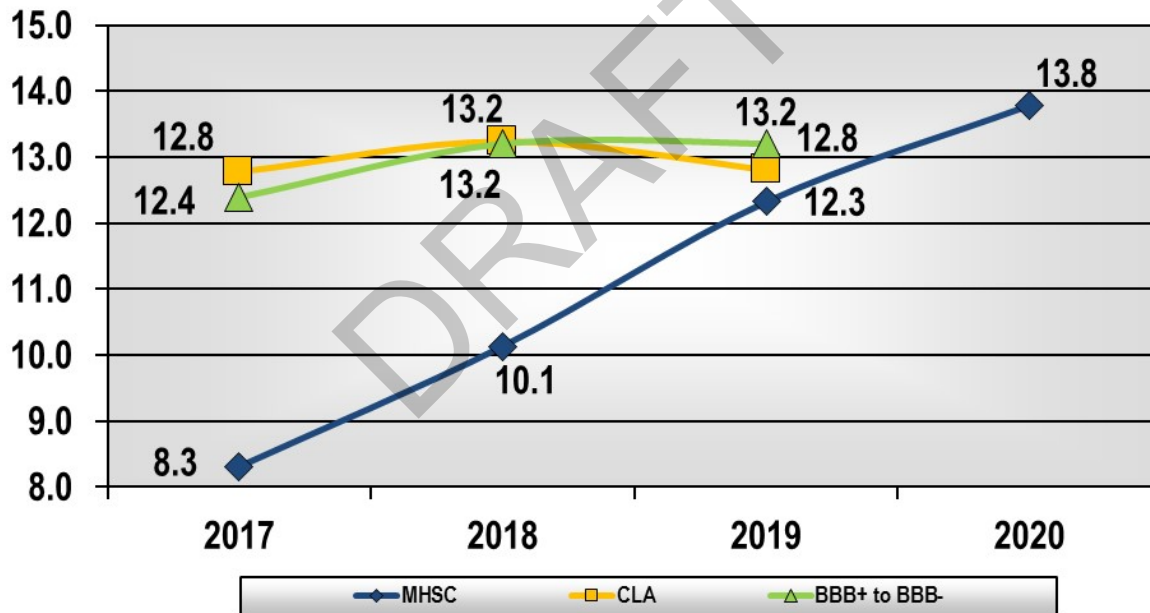
This ratio is defined as the proportion of long-term debt divided by long-term debt plus total net assets. Higher values for this ratio imply a greater reliance on debt financing and may imply reduced ability to carry additional debt.



## Average Age of Plant

### Definition:

Average age of plant attempts to approximate the average age of an organization's fixed assets. A low value is considered to be desirable as it indicates a newer facility.





# Industry Trends: COVID-19 Impact on Hospitals and Health Systems

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# COVID-19 Timeline & Key Events

- January 31<sup>st</sup>: Secretary of HHS declares a public health emergency under Section 319 of the Public Health Services Act in response to COVID-19.
- March 13<sup>th</sup>: President Trump declares COVID-19 a National Emergency.
- The vast majority of surgeries and procedures performed by health systems are considered to be “elective”, but are medically necessary.
- Cancellation of these procedures has equated to lost revenues ranging from 40% to 65% for health systems across the country, causing liquidity challenges for many.

# Federal Response to Liquidity Concerns

- CARES Act enacted March 27, 2020 included \$2T+ economic support.
- Policies aimed at providing assistances business, individuals, states, municipalities.
- Specifically for health care providers:
  - \$100 billion in financial aid
  - \$50 billion for “General Distributions”
  - Remaining paid out through “Targeted Distributions”
    - ◇ \$10B for rural providers
    - ◇ \$12B for COVID “hot spots”
    - ◇ \$4.9B for certified nursing homes
    - ◇ ~\$30 billion for uninsured care
  - Additional \$75 billion in Paycheck Protection & Health Care Enhancement Act



# CARES Act: Funds Targeted for Allocation To Date

(Aug 3, 2020)

## Provider Relief Fund (Allocations as of August 3, 2020)

General \$50B	Medicaid/CHIP \$15B	Uninsured ~\$30B	Targeted Distributions ~\$57B+
<p>First \$30 billion – went to providers/suppliers who received Medicare FFS reimbursement in 2019. Allocation formula: <math>(2019\ FFS/\\$484\ B) \times \\$30\ B =</math> expected distribution.</p> <p>Additional \$20 billion to these providers/suppliers based on revenues from cost report data on file with HHS.</p> <p>Combined these two distributions (Tranche 1 &amp; 2) are designed to add up to 2% of 2018 net revenues.</p> <p>Reopening applications Aug. 10-28 in two situations.</p>	<p>On June 9, HHS announced the release of \$15 billion to those that participate in Medicaid/CHIP, including managed care organizations.</p> <p>Providers had to submit annual patient revenue details to be considered for a distribution equal to at least 2% of reported gross revenues from patient care</p> <p>\$15 billion designated. Application deadline of August 28, 2020</p>	<p>These are claims-based reimbursements for dates of service or admittance on or after Feb. 4, 2020. Reimbursements will be made for qualifying testing for COVID-19 and treatment and services with a primary COVID-19 diagnosis. Full details at <a href="http://www.hrsa.gov/coviduninsuredclaim">www.hrsa.gov/coviduninsuredclaim</a></p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> <b>Rural Distributions (\$12B).</b> Rural hospitals (CAHs, rural PPS), Rural Health Clinics (RHC), &amp; Community Health Centers (CHC or FQHC) in rural areas received a distribution on May 10. Another \$1 billion was released on July 10 to 500 other special rural Medicare designation hospitals in urban areas and in small but nonrural communities.</li> <li><input type="checkbox"/> <b>High Impact (\$22B – Round 1, 2).</b> Targeted at hospitals in areas heavily impacted by COVID. Using hospital-submitted data, HHS awarded Round 1 on May 1 to 395 hospitals that provided inpatient care for 100 or more COVID-19 patients through April 10. The distribution formula was based on a fixed amount per COVID-19 inpatient admission, with an additional amount (\$2 B total) distributed by taking into account those hospital's Medicare and Medicaid disproportionate share and uncompensated care payments. Round 2 was released on July 17 to 969 hospitals that had 161 COVID patients by June 10 and received \$50,000/patient</li> <li><input type="checkbox"/> <b>Skilled Nursing Facilities (\$9.9B).</b> On May 21, HHS released \$4.9 billion to SNFs with at least six or more beds. Each SNF received \$50,000 plus \$2,500 per bed. On July 22, HHS announced an additional \$5 billion will be released, but eligible nursing homes must complete a 23-module training program</li> <li><input type="checkbox"/> <b>Indian Health Services (\$500M).</b> On May 22, Indian Health Services, tribal, and urban Indian health programs, including IHS and Tribal hospitals received funds</li> <li><input type="checkbox"/> <b>Safety Net Hospitals (\$12.8B).</b> On June 9, HHS announcing the release of \$10 billion to certain hospitals and on July 10, another \$3 billion was distributed. All total, 958 hospital received these funds.</li> <li><input type="checkbox"/> <b>Dentists.</b> July 10, HHS announced dentists would be eligible for 2% of their annual reported patient revenue. Apply by August 28 using the Enhanced Provider Portal</li> </ul>

Each release of funds requires attesting/certifying to a set of terms and conditions





# Funding Subject to Single Audit Requirements

- Specific programs impacting health care (not comprehensive)
  - Provider Relief Fund (HHS) - CFDA 93.498
  - Disaster Assistance Loans (Economic Injury Disaster Loans, SBA) CFDA 59.008
  - Uninsured COVID Testing and Treatment (HHS) – CFDA 93.461
  - Grants for New and Expanded Services Under the Health Center Program (HHA) – CFDA 93.527
  - Emergency Grants to Address Mental and Substance Use Disorders During COVID-19 (HHS) CFDSA 93.665
  - Rural Health Clinic Testing (HHS) – CFDA 93.697
- Organizations with \$750,000 or more in Federal Expenditures during a single fiscal year will be required to have a single audit.



# Additional Reporting Requirements

- On July 20, HHS released information that provides additional reporting requirements.
- Any recipient that receives **one or more payments exceeding \$10,000 (aggregate)** will need to file reports demonstrating compliance terms/conditions.
- The requirement applies to all the PRF distributions.
- Detailed PRF reporting instructions and a data collection template with the necessary data elements will be available soon.
  - All recipients must report within 45 days of end of CY 2020 on expenditures through period ending Dec. 31, 2020.
  - Recipients who have expended funds in full prior to December 31, 2020 may submit a single final report at any time during the window that begins Oct. 1, 2020, but no later than Feb. 15, 2021.
  - Recipients with funds unexpended after Dec. 31, 2020, must submit a second and final report no later than July 31, 2021.





# Understanding Your Industry: Despite COVID-19, Reform Measures Continue

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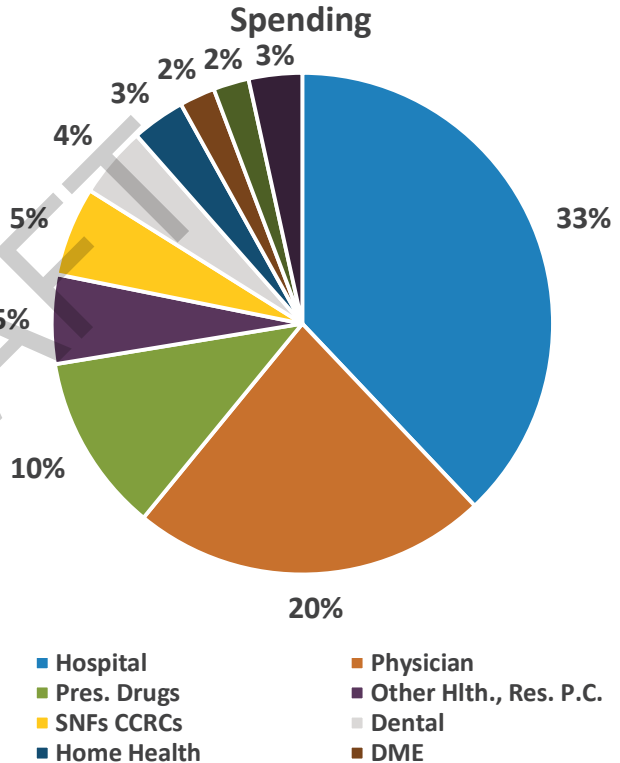
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# Nat'l Health Expenditures Continue to Rise \*

- In 2017, U.S. Health Care spending grew 3.9%, reaching \$3.5 Trillion
- Spending Increase by Service Type:
  - Hospital Care 4.6%
  - Physician & Clinical Services 4.2%
  - Retail Prescription Drug .4%
  - Other Health, Residential & Personal Care 5.6%
  - Nursing Care Facilities and CCRC's 2.0%
  - Dental Services 3.2%
  - Home Health 4.3%
  - Other Professional Services 4.6%
  - Nondurable Medical Products 2.2%
  - Durable Medical Equipment 6.8%

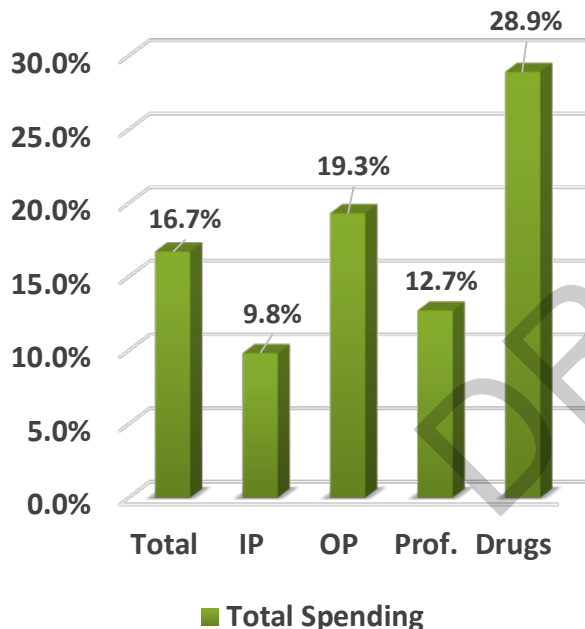
2017 Distribution of Health Care



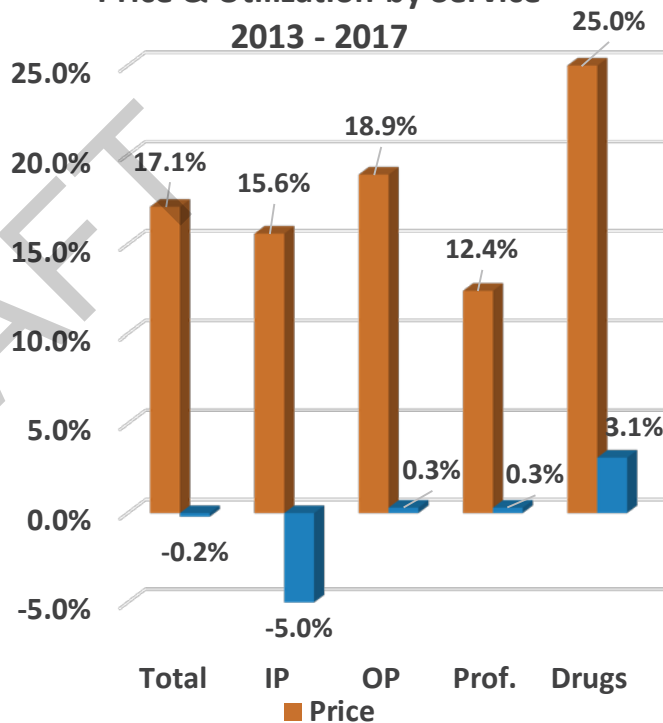
\* Source: National Health Care Expenditures 2017 Fact Sheet released by The CMS on 4/26/19;  
<https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/NationalHealthExpendData/NHE-Fact-Sheet.html>

# Price Drives Aggregate Spending Increase\*

**Total Spending  
2013 - 2017**



**Price & Utilization by Service  
2013 - 2017**



\* Source: Health Care Cost Institute 2017 Annual Health Care Cost and Utilization Report; an analysis of spending, price, and utilization for individuals under 65 covered by employer-sponsored insurance (ESI). Dated February 2019



# Pricing Transparency: Effective 1/1/21

- Hospitals must make public online all standard charges
  - Gross charges
  - Payer specific negotiated charges
  - De-identified min. & max. negotiated charges & discounted cash prices
- Add'l Requirement to Post “Shoppable Services”
  - Display separately charge information for 300 “shoppable services”
    - ◇ 70 services are identified by CMS and consist of E&M services, laboratory & pathology services, medicine and surgery services
    - ◇ Remaining 230 can be identified by the hospital
  - “Shoppable” defined as: Services that can be scheduled by a health care consumer in advance.

*“We.....continue to believe that price transparency will lead to lower costs for consumers and better quality of care.”*

*CMS Final Transparency Rule (CMS 1717-F2)*





# New Accounting & Reporting Standards

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# Accounting Standards Update

## Leases - GASB 87

- Addresses accounting and financial reporting for leases by state and local governments.
- The Statement establishes a single model for lease accounting based on the foundational principle that leases are financings of the right to use an underlying asset.
- Requires the recognition of certain right to use lease assets and related liabilities for leases that were previously classified as operating leases.
- Effective for years **beginning after** June 15, 2021, with earlier application permitted.

## Capitalized Interest - GASB 89

- Addresses accounting requirements for interest cost incurred before the end of a construction period.
- The Statement requires that interest cost incurred before the end of a construction period be recognized as an expense in the period in which the cost is incurred.
- Effective for years **beginning after** December 15, 2020, with earlier application permitted.





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## Appendix

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# Required Communications

Topic	Communication
Our responsibility under Generally Accepted Auditing Standards	<ul style="list-style-type: none"> <li><input type="checkbox"/> Express an opinion on the fair presentation of the combined financial statements in conformity with GAAP</li> <li><input type="checkbox"/> Plan and perform the audit to obtain reasonable, non absolute assurance that the combined financial statements are free of material misstatement</li> <li><input type="checkbox"/> Evaluate internal control over financial reporting</li> <li><input type="checkbox"/> Utilize a risk based audit approach</li> <li><input type="checkbox"/> Communicate significant matters to appropriate parties</li> </ul>
Planned Scope and Timing of the Audit	<ul style="list-style-type: none"> <li><input type="checkbox"/> Performed the audit according to the planned scope and timing previously communicated</li> </ul>
Other Information in Documents Containing the Audited Financial Statements	<ul style="list-style-type: none"> <li><input type="checkbox"/> Financial statements may only be used in their entirety</li> <li><input type="checkbox"/> Our approval is required to use our audit report in a client prepared document</li> <li><input type="checkbox"/> We have no responsibility to perform procedures beyond those related to the combined financial statements</li> </ul>



# Required Communications

Topic	Communication
Significant Accounting Policies	<input type="checkbox"/> Management is responsible for the accounting policies of the organization <input type="checkbox"/> Accounting policies are outlined in Note 1 to the combined financial statements <input type="checkbox"/> No significant changes to the accounting policies during the year <input type="checkbox"/> Accounting policies deemed appropriate <input type="checkbox"/> No unusual transactions occurred
Significant Accounting Estimates	<input type="checkbox"/> An area of focus under a risk based audit approach <input type="checkbox"/> Significant estimates include: allowance for bad debts, contractual allowances, depreciable lives of fixed assets, self funded health insurance reserves, and third-party payor settlement estimates <input type="checkbox"/> Estimates determined by management based on their knowledge and experience <input type="checkbox"/> No management bias indicated <input type="checkbox"/> Estimates were deemed reasonable <input type="checkbox"/> Estimate uncertainty is disclosed in the combined financial statements
Significant Financial Statement Disclosures	Note 3 – Net Patient Service Revenue Note 8 – Long-Term Debt



# Required Communications

Topic	Communication
Management Representation Letter	<input type="checkbox"/> Management will provide signed representation letters prior to finalization of the audit reports
Other	<input type="checkbox"/> No difficulties encountered in performing the audit <input type="checkbox"/> No issues discussed prior to retention as independent auditors <input type="checkbox"/> No disagreements with management regarding accounting, reporting, or other matters <input type="checkbox"/> No Consultations with other independent auditors <input type="checkbox"/> No other findings or issues were discussed with, or communicated to, management



# Internal Control Matters

Topic	Communication
Purpose	<input type="checkbox"/> Express an opinion on the financial statements, not on the effectiveness of internal controls. <input type="checkbox"/> Our consideration of internal controls was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies and therefore material weaknesses or significant deficiencies may exist that were not identified. In addition, because of inherent limitations in internal control, including the possibility of management override of controls, misstatements due to fraud or error may occur and not be detected by such controls.
Material Weakness	<input type="checkbox"/> Reasonable possibility that a material misstatement would not be prevented, or detected and corrected on a timely basis.
Significant Deficiencies	<input type="checkbox"/> Less significant than a material weakness, yet important enough to merit the attention of governance.
Restricted Use	<input type="checkbox"/> This communication is intended solely for the information and use of management, the audit committee, and others within the Organization, and is not intended to be, and should not be, used by anyone other than these specified parties.
Results	<input type="checkbox"/> No material weaknesses identified



# Deliverables

Report on the Financial  
Statements

Board Packet including  
Required  
Communications and  
Internal Control  
Communications





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**MEMORIAL HOSPITAL OF SOUTHERN CALIFORNIA  
COMBINED FINANCIAL STATEMENTS  
YEARS ENDED JUNE 30, 2011 AND 2010**

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MEMORIAL HOSPITAL OF SEETATER COUNTY  
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YEARS ENDED JUNE 2010 AND 2011

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## INDEPENDENT AUDITORS' REPORT

Board of Trustees  
Memorial Hospital of Sweetwater County  
Rock Springs, Wyoming

### Report on the Combined Financial Statements

We have audited the accompanying combined financial statements of Memorial Hospital of Sweetwater County (the Hospital), which comprise the combined statements of net position as of June 30, 2020 and 2019, and the related combined statements of revenues, expenses, and changes in net position, and cash flows for the years then ended, and the related notes to the combined financial statements.

### Management's Responsibility for the Combined Financial Statements

Management is responsible for the preparation and fair presentation of these combined financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of combined financial statements that are free from material misstatement, whether due to fraud or error.

### Auditors' Responsibility

Our responsibility is to express an opinion on these combined financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the combined financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the combined financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the combined financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the combined financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the combined financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

### **Opinion**

In our opinion, the combined financial statements referred to above present fairly, in all material respects, the financial position of Memorial Hospital of Sweetwater County as of June 30, 2020 and 2019, and the changes in its net position and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

### **Other Matters**

#### **Required Supplementary Information**

Our audit was conducted for the purpose of forming an opinion on the combined financial statements as a whole. Accounting principles generally accepted in the United States of America require that the management's discussion and analysis information on pages 1 through 4 be presented to supplement the basic combined financial statements. Such information, although not a part of the combined financial statements, is required by the Governmental Accounting Standards Board, who considers it to be an essential part of financial reporting for placing the combined financial statements in an appropriate operational, economic, or historical context. We have applied certain limited procedures to the required supplementary information in accordance with auditing standards generally accepted in the United States of America, which consisted of inquiries of management about the methods of preparing the information and comparing the information for consistency with management's responses to our inquiries, the combined financial statements, and other knowledge we obtained during our audit of the combined financial statements. We do not express an opinion or provide any assurance on the information because the limited procedures do not provide us with sufficient evidence to express an opinion or provide any assurance.

#### **Other Reporting Required by Government Auditing Standards**

In accordance with *Government Auditing Standards*, we have also issued our report dated REPORT DATE, on our consideration of Memorial Hospital of Sweetwater County's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is to describe the scope of our testing of internal control over financial reporting and compliance and the result of that testing, and not to provide an opinion on internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering Memorial Hospital of Sweetwater County's internal control over financial reporting and compliance.

**ClintonLarsonAllen LLP**

Minneapolis, Minnesota  
REPORT DATE

**MEMORIAL HOSPITAL OF SWEETWATER COUNTY**  
**MANAGEMENT'S DISCUSSION AND ANALYSIS**  
**YEARS ENDED JUNE 30, 2019 AND 2018**

## INTRODUCTION

This is management's discussion and analysis of Memorial Hospital of Sweetwater County's (the Hospital) financial performance and provides an overview of the Hospital's financial activities for the years ended June 30, 2019 and 2018. It should be read in conjunction with the Hospital's combined financial statements, which begin on page 10.

Memorial Hospital of Sweetwater County is a Joint Commission accredited, 100-bed rural acute-care facility located in Southwest Wyoming, which services a region exceeding 22,000 square miles. The Hospital serves a population in excess of 22,000 in Sweetwater County alone as well as surrounding areas. The Hospital provides a vast array of inpatient and outpatient services, emergent care, dialysis, occupational medicine, radiation oncology, and hematology oncology services. In addition, the Hospital employs over thirty physicians and mid-level providers successfully building a vibrant list of family, internal and specialty medicine clinics. Memorial Hospital of Sweetwater County continues to maintain a strong, viable presence in the community. Recognizing the need to create a collaborative focus for the future and by identifying the opportunity and accountability in the delivery of healthcare for the communities the Hospital serves, the following goals and objectives continue to serve as our roadmap to guide the Hospital into the future:

Regional Referral Center: Continue efforts to increase presence in Sweetwater County and surrounding areas and becoming a regional referral center.

Growth in Services and Programs: Being responsive to the needs of the community by maintaining care locally whenever possible by growing service lines and offering new programs, which include:

- Radiation and Hematology Oncology
- Enhanced Orthopedic Surgery
- Pulmonology
- Occupational Medicine
- Telemedicine
- Neurology
- Onsite visiting specialty clinics

Medical Staff Development Plan: Work to meet the needs of the community by developing a medical staff that will enhance current programs and effectively deliver new services and programs. The facility continues to invest in new physicians and analyze replacement positions as they become vacant. In 2018 we opened our Pediatric practice with a new Pediatrician and Mid-level and we added a new Orthopedic surgeon to enhance our surgery services. We also filled our Hospitalist program with employed physicians in order to cut the higher cost of locum coverage. We continued with locum coverage for OB/Gynecology and Pulmonology while looking at the feasibility of full-time providers in these areas. Recognizing the need to balance growth with financial stability, the Hospital continues to streamline operations by researching new service lines. In fiscal year 2019, we will be adding Neurology to our services offered and will be enhancing our cancer center with a fulltime Radiation Oncologist.

Information Technology: Continued adoption of health information technology to improve quality, enhance security and meet required measurements while lowering costs.

**MEMORIAL HOSPITAL OF SWEETWATER COUNTY**  
**MANAGEMENT'S DISCUSSION AND ANALYSIS**  
**YEARS ENDED JUNE 30, 2019 AND 2018**

**INTRODUCTION (CONTINUED)**

Joint Board/Medical Staff Decision Making: Create a culture with the board of trustees and the Medical Staff that is collaborative and will allow the Hospital to move forward with partnerships and/or affiliations that will provide the most comprehensive care for Sweetwater County and its surrounding areas.

Strategic Plan: The Hospital implemented its 5-year strategic plan in 2014. The plan includes strategic pillars in Patient Experience, Workplace Experience, Quality & Safety, Growth & Community and Financial Stewardship. These are the drivers that deliver value to the patient. The dynamics of health care is changing to focus more on improving the quality of health care rather than on the cost of health care. The benefit of delivering quality health care and better customer service helps to drive costs down, which creates more value for the patient. Providing the highest value of care to the patient through improved quality and better customer service, all at a lower cost, is our number one priority. We will begin working on another 5-year strategic plan in early fiscal year 2019.

Patient Experience: The Hospital has been diligent in striving to provide our patients with excellent customer service. We have begun implementing the Planetree initiatives surrounding patient centered care and are working on training all 100% of our employees over the next two years. Our patient satisfaction scores continue to increase with the ongoing efforts of improvement.

Workplace Experience: Through improved communication, professional development and the new patient-based culture program, the Hospital strives to be the employer of choice in Sweetwater County.

Quality & Safety: The Hospital continues to meet the increasing quality initiatives. Recognizing that reimbursement is driven by these efforts, we have created a specialized team to ensure our quality measures meet and exceed the standards. We have started implementing LEAN process improvements across the house to help with efficiencies and identify waste.

Community & Growth: The Hospital is building on community partnerships by implementing clinic improvements, including better access to care. A Community Health Needs Assessment was completed in February 2018 which will be considered in making decisions on new service lines and specialties and potential new community relationships.

Financial Stewardship: The Hospital strives to provide quality health care at a lower cost by managing expenses and maximizing reimbursement.

These strategies will serve as a compass to help guide us to achieve our Mission, Vision and Values newly adopted in 2018:

Mission: Compassionate care for every life we touch.

Vision: To be our community's trusted health care leader.

Values: We kind. We respectful. We accountable. Work collaboratively. Embrace excellence.

**MEMORIAL HOSPITAL OF SWEETWATER COUNTY  
MANAGEMENT'S DISCUSSION AND ANALYSIS  
YEARS ENDED JUNE 30, 2019 AND 2018**

**INTRODUCTION (CONTINUED)**

The affiliation with the University of Utah allows the Hospital to expand its service line without investment into full time staff, facilities and equipment for highly specialized procedures and services that would not be economically justifiable given the population size of the primary service area. In addition, the affiliation limits outmigration of patients by keeping them close to home, provides a high level of specialty care and allows the Hospital to retain revenue that might have otherwise gone to other hospitals. Presently, the Hospital is providing telemedicine services for stroke, burn, and ICU services to the community as a result of the University of Utah affiliation. The affiliation was renewed in 2018 and has added services including Maternal Fetal Medicine and expanded Cardiology and Vascular services. Dermatology services through the affiliation began in July 2018. The Hospital staff have been able to gain knowledge and skills through education and shadowing at the University of Utah. Specialty physicians continue to hold visiting clinics onsite in our Hospital so our patients do not need to travel out of state for services. The Hospital plans to expand these services in the next year by adding additional services like Endocrinology. The Hospital continues our affiliations with the Huntsman Cancer Center through the University of Utah and the Shriner's Hospital.

Fiscal year 2019 continued to focus on growing our existing providers and continuing to stabilize our financial position. The Hospital's employed physicians can be found in three different locations including the Hospital, the attached medical office building (MOB) and offsite at the Family and Occupational Medicine Clinic. The Hospital continues to grow its services to local industry in Sweetwater County through our Occupational Health service line established in 2018. We opened a Walk-in Clinic at the Family Practice building and have seen it steadily grow as we offer this new option to our Community.

The current Electronic Medical Record (EMR), provides patients with a secure, confidential medical record that will work with other systems to share information. We spent most of the current year researching and exploring the purchase of a new electronic medical record. The primary goal was for the organization to select and implement an EMR solution that will allow each patient across the Hospital and Clinics to have one integrated health record. We hope to make a final decision in early fiscal year 2020.

Quality and patient satisfaction will continue to play a role in hospital reimbursement in the future. The Executive Team has been proactive in ensuring that quality outcomes are the best they can be and that patient satisfaction scores are in the top percentile.

The Hospital is striving to realize our vision for the future of providing exceptional patient care by focusing on quality and safety of patient care, providing excellent customer service through teamwork and a positive culture, increasing market share and service growth and enhanced medical staff development.

Memorial Hospital of Sweetwater County Foundation (Foundation) was created to help support the Hospital. The Foundation's financial statements are included in the combined financial statements. The Hospital and the Foundation are collectively referred to as the Hospital throughout the combined financial statements.

**MEMORIAL HOSPITAL OF SWEETWATER COUNTY**  
**MANAGEMENT'S DISCUSSION AND ANALYSIS**  
**YEARS ENDED JUNE 30, 2020 AND 2019**

### **COVID-19 PANDEMIC**

Memorial Hospital of Sweetwater County was not isolated from the COVID-19 pandemic. While we didn't see much of an increase of inpatients and positive patients, we did see our laboratory services increase immensely as one of the only testing facilities in the County. However, we did experience a decrease in overall outpatient visits, including emergency room, imaging, surgery and clinic visits, as our community stayed home and social distanced. We also cancelled elective surgeries in an attempt to preserve personal protective equipment (PPE) for our staff to remain safe. Revenues were decreased by as much as 10% for the last four months of the fiscal year. We applied for and received Accelerated Medicare payments to insure our cash flow was stable. We also received CARES Act funds to offset lost revenue and our COVID related expenses.

### **USE OF THIS ANNUAL REPORT**

The Hospital's combined financial statements consist of three statements – a combined statement of net position, a combined statement of revenues, expenses, and changes in net position, and a combined statement of cash flows. These combined financial statements and related notes provide information about the activities of the Hospital, including resources held by the Hospital, but restricted for specific purposes by contributors, grantors, or enabling legislation.

### **FINANCIAL AND OPERATIONAL HIGHLIGHTS**

- The Hospital recorded an operating loss of \$1,000,000 and an operating gain of \$200,000 in 2019 and 2018, respectively.
- The Hospital recorded an increase in overall net position of \$1,000,000 and \$200,000 in 2019 and 2018, respectively.
- The days in net patient accounts receivable are 30 and 30 in 2019 and 2018, respectively.
- The Hospital has experienced significant growth and change since 2014. The investment in hiring physicians resulted in accelerated startup costs that significantly increased total expenses. Typically, providers do not realize their full income potential until their practice matures, which may take several years. In 2019, the Hospital continued to concentrate on stabilizing the business. Operations were streamlined by eliminating unprofitable service lines and right sizing provider practices.
- The Hospital's payer mix remained stable due to a decline in the statewide economy and the aging population. We have seen a growth in Medicare, Medicaid and uninsured patients with a corresponding decrease in commercial insurance patients.
- In mid-March, the COVID-19 pandemic caused revenues to decrease and expenses to increase. We received CARES Act funds to assist with the lost revenue and higher costs. This resulted in an increase in our days cash on hand and is also reflected in the variance between operating and total margin.

**MEMORIAL HOSPITAL OF SEETATER COUNTY  
MANAGEMENT'S DISCUSSION AND ANALYSIS  
YEARS ENDED JUNE 30, 2017 AND 2016**

**THE COMBINED STATEMENTS OF NET POSITION AND COMBINED STATEMENTS OF REVENUES, EXPENSES, AND CHANGES IN NET POSITION**

One of the most important questions asked about the Hospital's finances is "Is the Hospital as a whole better or worse off as a result of the year's activities?" The combined statements of net position and the combined statements of revenues, expenses, and changes in net position report information about the Hospital's resources and its activities in a way that helps answer this question. These combined statements include all restricted and unrestricted assets and all liabilities using the accrual basis of accounting. All of the current year's revenues and expenses are taken into account regardless of when cash is received or paid.

These two combined statements report the Hospital's net position and changes in them. You can think of the Hospital's net position as the difference between assets and liabilities as one way to measure the Hospital's financial health, or financial position. Over time, increases or decreases in the Hospital's net position are one indicator of whether its financial health is improving or deteriorating. You will need to consider other nonfinancial factors, however, such as changes in the Hospital's patient base and measures of the quality of service it provides to the community, as well as local economic factors to assess the overall health of the Hospital.

**THE COMBINED STATEMENTS OF CASH FLOWS**

The final required statement is the combined statement of cash flows. The combined statement reports cash receipts, cash payments, and net changes in cash resulting from operations, investing, and financing activities. It provides answers to such questions as "Where did cash come from?", "What was cash used for?", and "What was the change in cash balance during the reporting period?"



**MEMORIAL HOSPITAL OF SEETATER COUNTY**  
**MANAGEMENT'S DISCUSSION AND ANALYSIS**  
**YEARS ENDED JUNE 30, 2019 AND 2018**

**THE HOSPITAL'S COMBINED NET POSITION**

The Hospital's combined net position is the difference between its assets and liabilities reported in the statement of net position. The Hospital's net position has increased by \$1,000,000 and \$1,000,000 in 2019 and 2018, respectively, as shown in Table 1.

**TABLE 1: COMBINED ASSETS, DEFERRED OUTFLOWS, LIABILITIES AND NET POSITION**

	2019	2018	2017
<b>ASSETS</b>			
Current Assets	\$ 1,000,000	\$ 1,000,000	\$ 1,000,000
Noncurrent Cash and Investments and Other Capital Assets, Net of Accumulated Depreciation	\$ 1,000,000	\$ 1,000,000	\$ 1,000,000
<b>Total Assets</b>	<b>\$ 2,000,000</b>	<b>\$ 2,000,000</b>	<b>\$ 2,000,000</b>
Deferred Outflow from Long-Term Debt Refinancing	\$ 1,000,000	\$ 1,000,000	\$ 1,000,000
<b>Total Assets and Deferred Outflows</b>	<b>\$ 3,000,000</b>	<b>\$ 3,000,000</b>	<b>\$ 3,000,000</b>
<b>LIABILITIES</b>			
Current Liabilities	\$ 1,000,000	\$ 1,000,000	\$ 1,000,000
Long-Term Debt	\$ 1,000,000	\$ 1,000,000	\$ 1,000,000
<b>Total Liabilities</b>	<b>\$ 2,000,000</b>	<b>\$ 2,000,000</b>	<b>\$ 2,000,000</b>
<b>NET POSITION</b>			
Net Investment in Capital Assets	\$ 1,000,000	\$ 1,000,000	\$ 1,000,000
Restricted for Debt Service Reserve	\$ 1,000,000	\$ 1,000,000	\$ 1,000,000
Restricted by Contributions and Grants for Capital Acquisition	\$ 1,000,000	\$ 1,000,000	\$ 1,000,000
Unrestricted	\$ 1,000,000	\$ 1,000,000	\$ 1,000,000
<b>Total Net Position</b>	<b>\$ 4,000,000</b>	<b>\$ 4,000,000</b>	<b>\$ 4,000,000</b>
<b>Total Liabilities and Net Position</b>	<b>\$ 6,000,000</b>	<b>\$ 6,000,000</b>	<b>\$ 6,000,000</b>

**MEMORIAL HOSPITAL OF SWEETWATER COUNTY  
MANAGEMENT'S DISCUSSION AND ANALYSIS  
YEARS ENDED JUNE 30, 2019 AND 2018**

**COMBINED OPERATING RESULTS AND CHANGES IN NET POSITION**

In 2019, the Hospital's net position increased by \$1,000,000 as shown in Table 1. This increase is made up of the following components:

**TABLE 1: OPERATING RESULTS AND CHANGES IN NET POSITION**

	2019	2018	2017
<b>OPERATING REVENUE</b>			
Operating Revenues	\$ 10,000,000	\$ 10,000,000	\$ 10,000,000
<b>OPERATING EXPENSES</b>			
Operating Expenses	\$ 9,000,000	\$ 9,000,000	\$ 9,000,000
<b>OPERATING GAIN (LOSS)</b>			
	(\$ 1,000,000)	\$ 1,000,000	(\$ 1,000,000)
Nonoperating Revenues and Expenses, Net	\$ 1,000,000	(\$ 1,000,000)	\$ 1,000,000
<b>EXCESS (DEFICIT) OF REVENUES OVER EXPENSES</b>			
	\$ 1,000,000	(\$ 1,000,000)	\$ 1,000,000
Other Changes in Net Position	\$ 1,000,000	\$ 1,000,000	\$ 1,000,000
<b>INCREASE IN NET POSITION</b>			
	\$ 1,000,000	\$ 1,000,000	\$ 1,000,000
Net Position Beginning of Year	\$ 1,000,000	\$ 1,000,000	\$ 1,000,000
<b>NET POSITION - END OF YEAR</b>			
	\$ 2,000,000	\$ 2,000,000	\$ 2,000,000

**OPERATING INCOME**

The first component of the overall change in the Hospital's net assets is its operating income, generally, the difference between net patient service revenue and other operating revenues and the expenses incurred to perform those services. In fiscal year 2019 the Hospital reported an operating loss of \$1,000,000 and in fiscal year 2018 the Hospital reported an operating gain of \$1,000,000.

The Hospital provides charity care to the patients who meet Hospital set guidelines. Charges foregone for charity care of \$1,000,000 and \$1,000,000 were provided in 2019 and 2018, respectively. Because there is no expectation of payment, charity care is not reported as patient service revenues of the Hospital. In 2019 and 2018, assistance funds of \$1,000,000 and \$1,000,000, respectively, were received from Sweetwater County to help offset the cost of maintenance in the Hospital.

**NONOPERATING REVENUES AND EXPENSES**

Nonoperating revenues and expenses consist primarily of CARES Act funds, rental revenue and expenses from Hospital property, investment income, interest expense and residual amounts still collected from the special purpose sales tax. The sales tax revenues make up approximately 10% and 10% of the total nonoperating revenue for the years ended June 30, 2019 and 2018, respectively.

**MEMORIAL HOSPITAL OF SWEETWATER COUNTY  
MANAGEMENT'S DISCUSSION AND ANALYSIS  
YEARS ENDED JUNE 30, 2019 AND 2018**

**THE HOSPITAL'S CASH FLOWS**

Changes in the Hospital's cash flows are consistent with changes in operating gains, nonoperating revenues and expenses, discussed earlier. The Hospital's cash and cash equivalents, including restricted and designated cash and investments, increased from \$1,000,000 in 2018 to \$1,000,000 in 2019.

**CAPITAL ASSETS AND DEBT ADMINISTRATION**

**Capital Assets**

At the end of 2019, the Hospital had \$1,000,000 invested in capital assets, net of accumulated depreciation. In 2019 and 2018, the Hospital had disbursements of approximately \$1,000,000 and \$1,000,000, respectively, for new equipment and construction-related costs.

**Long-Term Debt**

**Refinancing:** The Hospital had two Variable Rate Demand Notes (VRDNs) outstanding in the amount of \$1,000,000. These bonds were originally issued in 2018 and 2019 in the aggregate amount of \$1.0 million for the purpose of the Hospital's major renovation and expansion which was completed in 2019. A portion of the proceeds of the Series 2019 bonds were used to refinance the remaining bonds and convert them to fixed rate bonds.

**Financing Plan:** The Series 2019 bonds are comprised of two components: The first is financing the construction and equipping of a medical office building adjacent to the Hospital and the second portion was refinancing the Hospital's approximately \$1 million of Variable Rate Demand Notes outstanding, backed by a letter of credit from Key Bank, to a fixed rate.

The financing for the MOP was issued as privately placed variable rate bonds to one or more commercial banks (the Bank Bonds). While on a parity with other indebtedness, these bonds will largely be paid from the recently voter approved Specific Purpose Tax. In November 2019, authorized voters in Sweetwater County approved the enactment of a .00% Specific Purpose Tax (SPT) in the aggregate amount of \$1.0 million for qualifying projects. The portion allocable to the Hospital is \$1.0 million. As part of the structure of the Bank Bonds, the County Treasurer will enter into an agreement to send the monthly SPT receipts directly to the Bond Trustee with instructions to pay interest due and to redeem as much principal of outstanding bonds as such collected receipts permit until the bonds are paid in full. The 2019 bonds were paid in full as of September 2019. There have been some minimal amounts received from the County from late tax collection that remains on the books as a receivable.

**MEMORIAL HOSPITAL OF SWEETWATER COUNTY  
MANAGEMENT'S DISCUSSION AND ANALYSIS  
YEARS ENDED JUNE 30, 2020 AND 2019**

**OUTLOOK**

The outlook for 2020 remains stable. The Hospital experienced significant growth in fiscal years 2017 and 2018 and was successful in decreasing expenses and growing cash in 2017 and 2018. The Executive Team of the Hospital has established a physician recruitment plan to sustain both needed specialties and an adequate number of practices in our area. The plan for 2020 is to remain vigilant of the effects of the pandemic. The fiscal year budget reflects a 10% decrease in gross revenue, similar to the last four months of 2020. Through the first couple months of 2020, we have exceeded the reduced budget and are optimistic this will continue. Despite the pandemic, we will continue to focus on growing new and established physician practices, physician retention, increasing revenue through new and expanded services and adapting to the change in payer mix by focusing on the revenue cycle.

The Hospital continues to adjust to the changing landscape of the health care industry. The transition from inpatient care to outpatient care will affect reimbursement which will require continued monitoring and adjusting of expenses and resources. Opportunities to increase outpatient market share and new service lines will be the focus in 2020. The Hospital's goal is to capitalize on the growth in the existing physician practices, while expanding health care services that have been absent in Sweetwater County and Southwest Wyoming. Depending on the ongoing pandemic, the hospital is in the position to deliver quality patient care, excellent patient satisfaction and continue to increase market share while striving to be fiscally responsible in order to achieve a positive operating margin in fiscal year 2020.

**CONTACTING THE HOSPITAL'S FINANCIAL MANAGEMENT**

This financial report is designed to provide our patients, suppliers, taxpayers, and creditors with a general overview of the Hospital's finances and to the Hospital's accountability for the money it receives. If you have questions about this report or need additional financial information, contact the Hospital's Chief Financial Officer at Memorial Hospital of Sweetwater County, 1000 College Drive, Rock Springs, Wyoming 82901.

**MEMORIAL HOSPITAL OF SOUTHERN CALIFORNIA  
COMBINED STATEMENTS OF NET POSITION  
JUNE 30, 2019 AND 2018**

<b>ASSETS</b>	<u>2019</u>	<u>2018</u>
<b>CURRENT ASSETS</b>		
Cash and Cash Equivalents	\$ 1,000,000	\$ 1,000,000
Restricted by Bond Indenture Agreements	100,000	100,000
Receivables:		
Patients, Net of Estimated Uncollectibles of Approximately \$1,000,000 in 2019 and \$1,000,000 in 2018	100,000	100,000
Current Maturities of Notes Receivable	100,000	100,000
Other	1,000,000	1,000,000
Supplies	1,000,000	1,000,000
Prepaid Expenses	1,000,000	1,000,000
Total Current Assets	<u>3,200,000</u>	<u>3,200,000</u>
<b>NONCURRENT CASH AND INVESTMENTS</b>		
Restricted by Contributors and Lenders	100,000	100,000
Restricted by Bond Indenture Agreements	1,000,000	1,000,000
Designated by Board for Capital Improvements	1,000,000	1,000,000
Total Noncurrent Cash and Investments	<u>2,100,000</u>	<u>2,100,000</u>
<b>CAPITAL ASSETS, NET</b>	1,000,000	1,000,000
<b>OTHER ASSETS</b>		
Rental Property, Net	100,000	100,000
Notes Receivable, Less Current Maturities	100,000	100,000
Other Assets	100,000	100,000
Total Other Assets	<u>300,000</u>	<u>300,000</u>
Total Assets	<u>6,600,000</u>	<u>6,600,000</u>
<b>DEFERRED OUTFLOW FROM LONG-TERM DEBT REFINANCING</b>	<u>100,000</u>	<u>100,000</u>
Total Assets and Deferred Outflows	<u><u>6,700,000</u></u>	<u><u>6,700,000</u></u>

See accompanying Notes to Combined Financial Statements.

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**MEMORIAL HOSPITAL OF SOUTHERN ALABAMA  
COMBINED STATEMENTS OF NET POSITION (CONTINUED)  
JUNE 30, 2019 AND 2018**

LIABILITIES AND NET POSITION	2019	2018
<b>CURRENT LIABILITIES</b>		
Current Maturities of Long-Term Debt	\$ 1,000,000	\$ 1,000,000
Accounts Payable	2,000,000	2,000,000
Construction Payables	100,000	100,000
Estimated Third-Party Payor Settlements	100,000	100,000
Other Current Liabilities	2,000,000	0
Earned Revenue	2,000,000	0
Accrued Expenses:		
Salaries, Wages and Payroll Taxes	2,000,000	2,000,000
Vacation	2,000,000	2,000,000
Health Insurance Claims	100,000	100,000
Interest	100,000	100,000
Total Current Liabilities	<u>15,100,000</u>	<u>4,300,000</u>
<b>LONG-TERM DEBT LESS CURRENT MATURITIES</b>	<u>2,000,000</u>	<u>2,000,000</u>
Total Liabilities	17,100,000	6,300,000
<b>NET POSITION</b>		
Net Investment in Capital Assets	2,000,000	2,000,000
Restricted for Debt Service Reserve	2,000,000	2,000,000
Restricted by Contributors and Grantors	100,000	100,000
Unrestricted	<u>2,000,000</u>	<u>2,000,000</u>
Total Net Position	<u>6,000,000</u>	<u>4,100,000</u>
Total Liabilities and Net Position	<u><u>23,100,000</u></u>	<u><u>10,400,000</u></u>

See accompanying Notes to Combined Financial Statements.

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**MEMORIAL HOSPITAL OF SOUTHERN CALIFORNIA  
COMBINED STATEMENTS OF REVENUES AND EXPENSES AND  
CHANGES IN NET POSITION  
YEARS ENDED JUNE 30, 2019 AND 2018**

	2019	2018
<b>OPERATING REVENUES</b>		
Net Patient Service Revenue (Net of Provision for Bad Debts of Approximately \$1,000,000 in 2019 and \$1,000,000 in 2018)	\$ 1,000,000	\$ 1,000,000
Other Operating Revenues	\$ 1,000,000	\$ 1,000,000
Total Operating Revenues	<u>\$2,000,000</u>	<u>\$2,000,000</u>
<b>OPERATING EXPENSES</b>		
Salaries and Wages	\$1,000,000	\$1,000,000
Employee Benefits	\$1,000,000	\$1,000,000
Professional Fees - Physicians	\$1,000,000	\$1,000,000
Purchased Services	\$1,000,000	\$1,000,000
Supplies	\$1,000,000	\$1,000,000
Repairs and Maintenance	\$1,000,000	\$1,000,000
Insurance	\$1,000,000	\$1,000,000
Utilities	\$1,000,000	\$1,000,000
Leases and Rental	\$1,000,000	\$1,000,000
Depreciation	\$1,000,000	\$1,000,000
Other Expenses	\$1,000,000	\$1,000,000
Total Operating Expenses	<u>\$10,000,000</u>	<u>\$10,000,000</u>
<b>OPERATING LOSS</b>	( \$8,000,000 )	\$0
<b>NONOPERATING REVENUES AND EXPENSES</b>		
Interest Income	\$1,000,000	\$1,000,000
Interest Expense	( \$1,000,000 )	( \$1,000,000 )
Rent and Other	\$1,000,000	\$1,000,000
Gain on Disposal of Capital Assets	\$1,000,000	\$1,000,000
Sales Tax Revenues	\$1,000,000	\$1,000,000
Unrealized Gain on Investments	\$1,000,000	\$1,000,000
Grant Revenue	\$1,000,000	\$0
Restricted Gifts and Grants	\$1,000,000	\$1,000,000
Expended for Operations	( \$1,000,000 )	( \$1,000,000 )
Nonoperating Revenues and Expenses, Net	<u>\$1,000,000</u>	<u>( \$1,000,000 )</u>
<b>EXCESS (DEFICIT) OF REVENUE OVER EXPENSES</b>	\$1,000,000	( \$1,000,000 )
Capital Grants and Contributions	<u>\$1,000,000</u>	<u>\$1,000,000</u>
<b>INCREASE IN NET POSITION</b>	\$2,000,000	\$0
Net Position Beginning of Year	<u>\$1,000,000</u>	<u>\$1,000,000</u>
<b>NET POSITION - END OF YEAR</b>	<u><u>\$3,000,000</u></u>	<u><u>\$1,000,000</u></u>

See accompanying Notes to Combined Financial Statements.

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**MEMORIAL HOSPITAL OF SEETATER COUNTY**  
**COMBINED STATEMENTS OF CASH FLOWS**  
**YEARS ENDED JUNE 30, 2019 AND 2018**

	2019	2018
<b>CASH FLOWS FROM OPERATING ACTIVITIES</b>		
Receipts from and on behalf of Patients	\$ 1,000,000	\$ 1,000,000
Other Receipts	100,000	100,000
Cash Paid to Employees	(100,000)	(100,000)
Cash Paid to Suppliers and Others	(100,000)	(100,000)
Net Cash Provided by Operating Activities	\$ 900,000	\$ 900,000
<b>CASH FLOWS FROM NONCAPITAL FINANCING ACTIVITIES</b>		
Restricted, Gifts, Grants, and Other Changes, Net of Expended for Operations	1,000,000	(100,000)
<b>CASH FLOWS FROM CAPITAL AND CAPITAL RELATED FINANCING ACTIVITIES</b>		
Construction and Purchase of Capital Assets	(1,000,000)	(1,000,000)
Capital Grants and Contributions	100,000	100,000
Sales Tax Revenue	100,000	100,000
Principal Paid on Long-Term Debt	(100,000)	(100,000)
Interest Paid on Long-Term Debt	(100,000)	(100,000)
Net Cash Used by Capital and Capital Related Financing Activities	(900,000)	(900,000)
<b>CASH FLOWS FROM INVESTING ACTIVITIES</b>		
Investment Income	100,000	100,000
Rent and Other	100,000	100,000
(Increase) Decrease of Notes Receivable	(100,000)	100,000
Purchases of Investments	(100,000)	(100,000)
Proceeds from Sale of Investments	100,000	100,000
Net Cash Provided (Used) by Investing Activities	100,000	(100,000)
<b>INCREASE IN CASH AND CASH EQUIVALENTS</b>	\$ 1,000,000	\$ 100,000
Cash and Cash Equivalents Beginning of Year	\$ 1,000,000	\$ 900,000
<b>CASH AND CASH EQUIVALENTS - END OF YEAR</b>	<u>\$ 2,000,000</u>	<u>\$ 1,000,000</u>

See accompanying Notes to Combined Financial Statements.

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**MEMORIAL HOSPITAL OF SOUTHERN CALIFORNIA  
COMBINED STATEMENTS OF CASH FLOWS (CONTINUED)  
YEARS ENDED JUNE 30, 2017 AND 2016**

	2017	2016
<b>RECONCILIATION OF CASH AND CASH EQUIVALENTS TO THE STATEMENTS OF NET POSITION</b>		
Cash and Cash Equivalents in Current Assets	\$ 1,000,000	\$ 1,000,000
Cash and Cash Equivalents in Restricted by Bond Indenture Agreements (Current and Noncurrent)	\$ 1,000,000	\$ 1,000,000
Cash and Cash Equivalents in Designated by Board for Capital Improvements	\$ 1,000,000	\$ 1,000,000
Cash and Cash Equivalents Restricted by Contributors and Grantors	\$ 1,000,000	\$ 1,000,000
Total Cash and Cash Equivalents	<u>\$ 4,000,000</u>	<u>\$ 4,000,000</u>
Total Noncurrent Cash and Investments Included Above	<u>\$ 1,000,000</u>	<u>\$ 1,000,000</u>
<b>RECONCILIATION OF OPERATING INCOME (LOSS) TO NET CASH PROVIDED BY OPERATING ACTIVITIES</b>		
Operating Income (Loss)	\$ (1,000,000)	\$ 1,000,000
Adjustments to Reconcile Operating Income (Loss) to Net Cash Provided by Operating Activities:		
Depreciation	\$ 1,000,000	\$ 1,000,000
Provision for Bad Debts	\$ 1,000,000	\$ 1,000,000
Changes in Operating Assets and Liabilities:		
Receivables	(1,000,000)	(1,000,000)
Supplies	(100,000)	(100,000)
Prepaid Expenses	100,000	(100,000)
Accounts Payable	100,000	(1,000,000)
Accrued Expenses	100,000	100,000
Other Current Liabilities	\$ 1,000,000	\$ 1,000,000
Earned Revenue	\$ 1,000,000	\$ 1,000,000
Estimated Third-Party Payor Settlements	\$ 1,000,000	(1,000,000)
Net Cash Provided by Operating Activities	<u>\$ 1,000,000</u>	<u>\$ 1,000,000</u>
<b>SUPPLEMENTAL DISCLOSURE OF NONCASH FINANCING ACTIVITIES</b>		
Fixed Assets Included in Accounts Payable	<u>\$ 1,000,000</u>	<u>\$ 1,000,000</u>

See accompanying Notes to Combined Financial Statements.

(11)

**MEMORIAL HOSPITAL OF SWEETWATER COUNTY**  
**NOTES TO COMBINED FINANCIAL STATEMENTS**  
**JUNE 30, 2019 AND 2018**

**NOTE 1 ORGANIZATION AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES**

**Memorial Hospital of Sweetwater County**

Memorial Hospital of Sweetwater County (Hospital) is a bonded general acute care facility located in Rock Springs, Wyoming. The Hospital's primary mission is to provide health care to the residents of Sweetwater County through its acute care services. The Hospital is a component unit of Sweetwater County, Wyoming (County) and participates in the County's tax levies. The Hospital, as a component unit of the County, is exempt from income taxes under current regulations.

The Hospital is governed by a board of trustees, which has all of the powers necessary and convenient to provide for the acquisition, betterment, operation, maintenance, and administration of the facilities as the board of trustees determines to be necessary and expedient.

Memorial Hospital of Sweetwater County Foundation (Foundation) is a Wyoming nonprofit corporation that is reported as a blended component unit of the Hospital. The Foundation's sole purpose is to support the Hospital. The Foundation is a nonprofit corporation as described in Section 501(c)(3) of the Internal Revenue Code (IRC) and is exempt from federal income taxes on related income pursuant to Section 501(c)(3) of the IRC. The Foundation has \$1,000,000 and \$1,000,000 of assets and \$100,000 and \$100,000 of revenue for the years ended June 30, 2019 and 2018, respectively.

Collectively, Memorial Hospital of Sweetwater County and Memorial Hospital of Sweetwater County Foundation are referred to as the Hospital in the combined financial statements.

**Measurement Focus and Basis of Accounting**

Basis of accounting refers to when revenues and expenses are recognized in the accounts and reported in the combined financial statements. Basis of accounting relates to the timing of the measurements made, regardless of the measurement focus applied. The Hospital's combined financial statements are prepared in conformity with accounting principles generally accepted in the United States of America as prescribed by the Governmental Accounting Standards Board (GASB). The accompanying combined financial statements have been prepared on the accrual basis of accounting. Revenues are recognized when earned and expenses are recorded when the liability is incurred.

The Hospital uses enterprise fund accounting. Revenues and expenses are recognized on the accrual basis, using the economic resources measurement focus, based on GASB Codification Topic 2600, *Accounting and Financial Reporting for Proprietary Funds and Other Governmental Entities That Use Proprietary Fund Accounting*, as amended.

**MEMORIAL HOSPITAL OF SOUTHERN CALIFORNIA COUNTY**  
**NOTES TO COMBINED FINANCIAL STATEMENTS**  
**UNE 2010 AND 2009**

**NOTE 1 ORGANIZATION AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES**  
**CONTINUED**

**Use of Estimates**

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements. Estimates also affect the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

**Cash and Cash Equivalents**

Cash and cash equivalents include deposits and highly liquid investments with an original maturity of three months or less, unless otherwise designated or restricted.

**Patient Receivables**

Patient receivables are uncollateralized patient and third-party payor obligations. Payments of patient receivables are allocated to the specific claims identified in the remittance advice or, if unspecified, are applied to the earliest unpaid claim.

The carrying amount of patient receivables is reduced by a valuation allowance that reflects management's estimate of amounts that will not be collected from patients and third-party payors. Management reviews patient receivables by payor class and applies percentages to determine estimated amounts that will not be collected from third parties under contractual agreements and amounts that will not be collected from patients due to bad debts. Management considers historical write-off and recovery information in determining the estimated bad debt provision.

**Supplies**

Supplies are stated at lower of cost (first-in, first-out) or market.

**Noncurrent Cash and Investments**

Interest and dividends are included in nonoperating revenues when earned. Interest earnings on borrowed proceeds for capital acquisition are capitalized.

The Hospital's investments are maintained in accordance with Wyoming Statute 17-1-101. This statute limits the types of investments the Hospital may invest in as listed in Section 17-1-101(a). The Hospital has adopted an investment policy as directed under Section 17-1-101(h).

Restricted investments consist of funds restricted in accordance with bond indenture agreements, funds restricted by donor for an endowment and purchase of equipment, and funds restricted by the board for capital improvements. Restricted investments that are available for obligations classified as current liabilities are reported in current assets. All investments are carried at fair value. Fair value is determined using quoted market prices.

**MEMORIAL HOSPITAL OF SWEETWATER COUNTY**  
**NOTES TO COMBINED FINANCIAL STATEMENTS**  
**FUNE 2019 AND 2018**

**NOTE 1 ORGANIZATION AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES**  
**(CONTINUED)**

**Capital Assets**

Capital assets acquisitions in excess of \$5,000 are capitalized and recorded at historical cost. Contributed capital assets are reported at their estimated fair value at the time of their donation. All capital assets other than land are depreciated or amortized (in the case of capital leases) using the straight-line method of depreciation using these asset lives:

Land and improvements	5 to 10 years
Buildings	5 to 10 years
Moveable Equipment	5 to 10 years

**Notes Receivable**

Notes receivable are stated at principal amounts and are uncollateralized. Payments on notes receivable are allocated to the outstanding principal and accrued interest balances. Management reviews all notes receivable periodically and estimates a portion, if any, of the balance that will not be collected.

**Trust Funds**

The Hospital acts as custodian for the funds of Memorial Hospital of Sweetwater County Auxiliary. Trust funds and the related liability are included in cash and accounts payable in the combined financial statements. The balance of these funds was \$100,000 and \$100,000 at June 30, 2019 and 2018, respectively.

**Compensated Absences**

The Hospital's employees earn paid time off and sick leave at varying rates depending on years of service. Paid time off and sick leave accumulate up to a specified maximum depending upon length of service. Employees are paid for accumulated paid time off upon termination. Sick leave accumulated is forfeited upon termination.

**Self-Funded Health Insurance**

The provision for estimated health insurance claims includes estimates of the ultimate costs for both reported claims and claims incurred but not reported.

**Restricted Resources**

When the Hospital has both restricted and unrestricted resources available to finance a particular program, it is the Hospital's policy to use restricted resources before unrestricted resources.

**Net Position**

Net position of the Hospital is classified in four components. *Net position invested in capital assets* consist of capital assets net of accumulated depreciation and reduced by the current balances of any outstanding borrowings used to finance the purchase or construction of those assets. *Restricted for debt service reserve* and *restricted by contributors and grantors* is the noncapital net position that must be used for a particular purpose, as specified by creditors, grantors, or contributors external to the Hospital. *Unrestricted net position* is the remaining net position that does not meet the definition of *invested in capital assets or restricted*.

**MEMORIAL HOSPITAL OF SOUTHERN ALABAMA COUNTY**  
**NOTES TO COMBINED FINANCIAL STATEMENTS**  
**JUNE 30, 2020 AND 2019**

**NOTE 1 ORGANIZATION AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES**  
**CONTINUED**

**Operating Revenues and Expenses**

The Hospital's combined statement of revenues, expenses, and changes in net position distinguishes between operating and nonoperating revenues and expenses. Operating revenues result from exchange transactions associated with providing health care services the Hospital's principal activity. Nonexchange revenues, including taxes, grants, and contributions received for purposes other than capital asset acquisition, are reported as nonoperating revenues. Operating expenses are all expenses incurred to provide health care services, other than financing costs.

**Net Patient Service Revenue**

The Hospital has agreements with third-party payors that provide for payments to the Hospital at amounts different from its established rates. Payment arrangements include prospectively determined rates, reimbursed costs, discounted charges, and per diem payments. Net patient service revenue is reported at the estimated net realizable amounts from patients, third-party payors, and others for services rendered, including estimated retroactive adjustments under reimbursement agreements with third-party payors. Retroactive adjustments are accrued on an estimated basis in the period the related services are rendered and adjusted in future periods as final settlements are determined.

**Charity Care**

To fulfill its mission of community service, the Hospital provides care to patients who meet certain criteria under its charity care policy without charge or at amounts less than its established rates. Because the Hospital does not pursue collection of amounts determined to qualify as charity care, they are not reported as net patient service revenue.

**Sales and Use Tax**

The County imposed a 1% Sales and Use Tax beginning April 1, 2000 to provide support for capital infrastructure projects in the County. The Hospital's portion of the proceeds was designated for payment of the principal on the Hospital Revenue Bonds, Series 2000. Sales and use tax proceeds are recognized as revenue by the Hospital on the accrual basis as dictated by GASB Statement No. 34. For the years ended June 30, 2020 and 2019, the Hospital recorded nonoperating revenue related to the Sales and Use tax of \$10,000 and \$10,000, respectively. The Sales and Use Tax ended during fiscal year 2020.

**Unearned Revenue**

In March 2020, the World Health Organization declared the spread of Coronavirus Disease (COVID-19) a worldwide pandemic. Given the significant impact the pandemic had on global markets, supply chains, businesses and communities, the U.S. Department of Health and Human Services (HHS) made available emergency relief grant funds to health care providers. Total grant funds approved and received by the Hospital from these grants was \$10,000,000. The HHS grant funds are subject to certain restrictions on eligible expenses or uses, and reporting requirements. Of the total amount received, \$1,000,000 is reported as Grant Revenue in the combined statements of revenues, expenses, and changes in net position and the remaining \$9,000,000 is reported as Unearned Revenue in the combined statements of net position.

**MEMORIAL HOSPITAL OF SEETATER COUNTY**  
**NOTES TO COMBINED FINANCIAL STATEMENTS**  
**JUNE 30, 2020 AND 2019**

**NOTE 1 ORGANIZATION AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES**  
**(CONTINUED)**

**Other Current Liabilities**

As part of the Coronavirus Aid, Relief and Economic Security (CARES) Act the Centers for Medicare & Medicaid Services (CMS) administered an Accelerated and Advanced Payment Program to provide additional relief funds to providers. During the year ended June 30, 2020 the Hospital received total advanced funds through the Accelerated and Advanced Payment Program of \$1,000,000, which is to be recouped by CMS starting 180 days from the date the funds were received, all of which is to be paid back within one year of receipt of the funds. These amounts are reflected as Other Current Liabilities on the combined statements of net position.

**County Support**

The Hospital received approximately \$1,000,000 and \$1,000,000 or 1.0% and 1.0% of total operating and nonoperating revenue in direct financial support from the County, for the years ended June 30, 2020 and 2019, respectively. The primary source of the funds is from the general funds of the County. The Hospital applies to the County for these funds, which the County distributes through resolution. For both years ended June 30, 2020 and 2019, these funds were used to reimburse the Hospital for maintenance expenses.

**Grants and Contributions**

From time to time, the Hospital receives grants and contributions from individuals and private organizations. Revenues from grants and contributions (including contributions of capital assets) are recognized when all eligibility requirements, including time requirements, are met. Grants and contributions may be restricted for either specific operating purposes or for capital purposes. Amounts that are unrestricted or that are restricted to a specific operating purpose are reported as nonoperating revenues. Amounts restricted for capital acquisitions are reported after nonoperating revenues and expenses.

**Advertising Costs**

The Hospital expenses advertising costs as incurred.

**Risk Management**

The Hospital is exposed to various risks of loss from torts, theft of, and damage to, and destruction of assets, business interruption, errors and omissions, employee injuries and illnesses, natural disasters, medical malpractice, and employee health, dental, and accident benefits. Commercial insurance coverage is purchased for claims arising from such matters. Settled claims have not exceeded this commercial coverage in any of the three preceding years.

**MEMORIAL HOSPITAL OF SEETATER COUNTY**  
**NOTES TO COMBINED FINANCIAL STATEMENTS**  
**UNE 2019 AND 2018**

**NOTE 1 ORGANIZATION AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES**  
**CONTINUED**

**Fair Value Measurements**

To the extent available, the Hospital's investments are recorded at fair value. ASB Statement No. 1 defines fair value as the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. This statement establishes a hierarchy of valuation inputs based on the extent to which inputs are observable in the marketplace. Inputs are used in applying the various valuation techniques and take in to account the assumptions that market participants use to make valuation decisions. Inputs may include price information, credit data, interest and yield curve data, and other factors specific to the financial instrument. Observable inputs reflect market data obtained from independent sources.

In contrast, unobservable inputs reflect an entity's assumptions about how market participants would value the financial instrument. Valuation techniques should maximize the use of observable inputs to the extent available. A financial instrument's level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement.

The following describes the hierarchy of inputs used to measure fair value and the primary valuation methodologies used for financial instruments measured at fair value on a recurring basis:

*Level 1* Inputs that utilize quoted prices (unadjusted) in active markets for identical assets or liabilities that the Hospital has the ability to access.

*Level 2* Inputs that include quoted prices for similar assets and liabilities in active markets and inputs that are observable for the asset or liability, either directly or indirectly, for substantially the full term of the financial instrument. Fair values for these instruments are estimated using pricing models, quoted prices of securities with similar characteristics, or discounted cash flows.

*Level 3* Inputs that are unobservable inputs for the asset or liability, which are typically based on an entity's own assumptions, as there is little, if any, related market activity.

**MEMORIAL HOSPITAL OF SEETATER COUNTY**  
**NOTES TO COMBINED FINANCIAL STATEMENTS**  
**UNE 2020 AND 2019**

**NOTE 1 CHARITY CARE**

The Hospital maintains records to identify and monitor the level of charity care it provides. These records include the amount of charges foregone for services and supplies furnished under its charity care policy, and an estimated cost (based on cost to charge ratio) of those services and supplies. The estimated costs and expenses incurred to provide charity care for the years ended June 30, 2020 and 2019, was approximately \$1,000,000 and \$1,000,000, respectively.

**NOTE 2 NET PATIENT SERVICE REVENUE**

The Hospital has agreements with third-party payors that provide for payments to the Hospital at amounts different from its established rates. A summary of the payment arrangements with major third-party payors follows:

**Medicare**

Acute care services provided to Medicare program beneficiaries were paid at prospectively determined rates per visit. These rates varied according to a patient classification system that was based on clinical, diagnostic, and other factors. The Hospital is entitled to certain additional payments on a sole community provider. The Hospital is reimbursed for these payments after submission of annual cost reports by the Hospital and audits thereof by the Medicare fiscal intermediary. The Hospital's Medicare cost reports have been finalized by the Medicare fiscal intermediary through the year ended June 30, 2020. The Hospital's classification of patients under the Medicare program and the appropriateness of their admission are subject to an independent review by a peer review organization under contract with the Hospital.

**Medicaid**

Acute care services provided to Medicaid program beneficiaries are paid at prospectively determined rates per discharge. These rates vary according to a patient classification system that is based on clinical, diagnostic, and other factors.

**Blue Cross**

Inpatient and outpatient services provided to Blue Cross subscribers are paid at established charges except for physician services that are reimbursed based on fee screens.

Revenue from the Medicare and Medicaid programs accounted for approximately 10% and 10%, respectively, of the Hospital's net patient service revenue for the year ended June 30, 2020 and 2019 and 10% and 10%, respectively, of the Hospital's net service patient revenue for the year ended June 30, 2020. Laws and regulations governing the Medicare and Medicaid programs are extremely complex and subject to interpretation. As a result, there is at least a reasonable possibility that recorded estimates will change by a material amount in the near term.



**MEMORIAL HOSPITAL OF SOUTHEAST ALABAMA COUNTY**  
**NOTES TO COMBINED FINANCIAL STATEMENTS**  
**JUNE 30, 2014 AND 2013**

**NOTE 1 NET PATIENT SERVICE REVENUE (CONTINUED)**

The Hospital has also entered into payment agreements with certain commercial insurance carriers and other organizations. The basis for payment to the Hospital under these agreements includes charges, prospectively determined rates per discharge, and prospectively determined daily rates.

A summary of patient service revenue, contractual adjustments, and provision for bad debts for the years ended June 30, 2014 and 2013 is as follows:

	2014	2013
Gross Patient Service Revenue	\$ 100,000,000	\$ 90,000,000
Adjustments and Discounts:		
Medicare	(10,000,000)	(10,000,000)
Medicaid	(5,000,000)	(5,000,000)
Other Third-Party Payors	(5,000,000)	(5,000,000)
Provision for Bad Debts	(5,000,000)	(5,000,000)
Total Adjustments and Discounts	(25,000,000)	(25,000,000)
Net Patient Service Revenue	<u>\$ 75,000,000</u>	<u>\$ 65,000,000</u>

**NOTE 2 DEPOSITS AND INVESTMENTS**

**Deposits**

The Hospital's deposits are subject to, and in accordance with, Alabama State Statutes. Under these statutes, all uninsured deposits are fully collateralized. The eligible collateral pledged shall be held in custody of any Federal Reserve Bank, or branch thereof, or held in escrow by some other bank in a manner as the banking commissioner shall prescribe by rules and regulations, or may be segregated from the other assets of the eligible public depository and held in its own trust department. All collateral so held shall be clearly identified as being security maintained or pledged for the aggregate amount of public deposits accepted and held on deposit by the eligible public depository. The depository has the right at any time to make substitutions of eligible collateral maintained or pledged and shall at all times be entitled to collect and retain all income derived from those investments with restrictions. The Hospital may legally invest in direct obligations of and other obligations guaranteed as to principal by the U.S. Treasury and U.S. agencies and instrumentalities.

The Hospital's investments are recorded at fair value and consist of cash and cash equivalents and U.S. agency obligations. As of June 30, 2014 and 2013, management believes the investments were in compliance with the defined rating and risk criteria set forth under Alabama regulations.

**MEMORIAL HOSPITAL OF SEETATER COUNTY**  
**NOTES TO COMBINED FINANCIAL STATEMENTS**  
**SUNE 2019 AND 2018**

**NOTE 1 DEPOSITS AND INVESTMENTS (CONTINUED)**

**Deposits (Continued)**

The Hospital provides for investment in a variety of investment funds. In general, investments are exposed to various risks, such as interest rate, credit, and overall market volatility risk. Due to the level of risk associated with certain investments, it is reasonably possible that changes in the values of the investments will occur in the near term and that such changes could materially affect the Hospital's account balances.

**Investments**

The Hospital's investments are reported at fair value as discussed in Note 1. At June 30, 2019 and 2018, the Hospital had the following investments and maturities, all of which were held in the Hospital's name by a custodial bank that is an agent of the Hospital.

2019		Investment Maturity (in Years)				Credit Rating
Investment Type	Fair Value	Less than 1	1 to 5	5 to 10	10 or more	
Money Market	\$ 1,000,000	\$ 1,000,000	\$ -	\$ -	\$ -	N/A
Brokered Certificates of Deposit	\$ 1,000,000	\$ -	\$ 1,000,000	\$ -	\$ -	AA or AAA
Federal Farm Credit Bank Loan	\$ 1,000,000	\$ -	\$ 1,000,000	\$ -	\$ -	AA or AAA
Federal Home Loan Bank	\$ 1,000,000	\$ -	\$ 1,000,000	\$ -	\$ -	AA or AAA
Federal National Mortgage	\$ 1,000,000	\$ -	\$ 1,000,000	\$ -	\$ -	AA or AAA
Total Investments	\$ 4,000,000	\$ 1,000,000	\$ 3,000,000	\$ -	\$ -	

2018		Investment Maturity (in Years)				Credit Rating
Investment Type	Fair Value	Less than 1	1 to 5	5 to 10	10 or more	
Money Market	\$ 1,000,000	\$ 1,000,000	\$ -	\$ -	\$ -	N/A
Brokered Certificates of Deposit	\$ 1,000,000	\$ -	\$ 1,000,000	\$ -	\$ -	AA or AAA
Federal Farm Credit Bank Loan	\$ 1,000,000	\$ -	\$ 1,000,000	\$ 1,000,000	\$ -	AA or AAA
Federal Home Loan Bank	\$ 1,000,000	\$ -	\$ 1,000,000	\$ -	\$ -	AA or AAA
Federal National Mortgage	\$ 1,000,000	\$ -	\$ 1,000,000	\$ -	\$ -	AA or AAA
Total Investments	\$ 4,000,000	\$ 1,000,000	\$ 3,000,000	\$ 1,000,000	\$ -	

The carrying values of deposits shown above are included in the combined statements of net position as follows:

**Carrying Value:**

**Deposits**

\$ 1,000,000 STAR State Pooled Funds

**Investments**

Total Deposits and Investments

2019	2018
\$ 1,000,000	\$ 1,000,000
\$ 1,000,000	\$ 1,000,000
\$ 1,000,000	\$ 1,000,000
\$ 4,000,000	\$ 4,000,000

**Included in the Following Balance Sheet Captions:**

Cash and Cash Equivalents

Restricted by Contributors and Grantors

Restricted by Bond Indenture Agreements

Designated by Board for Capital Improvements

Total Deposits and Investments

\$ 1,000,000	\$ 1,000,000
\$ 1,000,000	\$ 1,000,000
\$ 1,000,000	\$ 1,000,000
\$ 1,000,000	\$ 1,000,000
\$ 4,000,000	\$ 4,000,000

**MEMORIAL HOSPITAL OF SEETATER COUNTY**  
**NOTES TO COMBINED FINANCIAL STATEMENTS**  
**JUNE 30, 2019 AND 2018**

**NOTE 1 DEPOSITS AND INVESTMENTS (CONTINUED)**

**Fair Value Measurements**

The Hospital uses fair value measurements to record fair value adjustments to certain assets and liabilities and to determine fair value disclosures. For additional information on how the Hospital measures fair value refer to Note 2 Organization and Summary of Significant Accounting Policies. The following table presents the fair value hierarchy for the balances of the assets and liabilities of the Hospital measured at fair value on a recurring basis as of June 30, 2019 and 2018:

2019			
Investment Type	Level 1	Level 2	Level 3
Brokered Certificates of Deposit	\$ 1,000,000	\$ 0	\$ 0
U.S. Government Agencies	\$ 0	\$ 1,000,000	\$ 0
Total	\$ 1,000,000	\$ 1,000,000	\$ 0

2018			
Investment Type	Level 1	Level 2	Level 3
Brokered Certificates of Deposit	\$ 1,000,000	\$ 0	\$ 0
U.S. Government Agencies	\$ 0	\$ 1,000,000	\$ 0
Total	\$ 1,000,000	\$ 1,000,000	\$ 0

**Interest Income**

Interest income of \$100,000 and \$100,000 for the years ended June 30, 2019 and 2018, respectively, is made up entirely of interest income from deposits and patient accounts at collection.

**NOTE 2 PATIENT ACCOUNTS RECEIVABLE**

Patient accounts receivable for the years ended June 30, 2019 and 2018 consists of the following:

	2019	2018
Receivable from Patients and Their Insurance Carriers	\$ 1,000,000	\$ 1,000,000
Receivable from Medicare	\$ 1,000,000	\$ 1,000,000
Receivable from Medicaid	\$ 100,000	\$ 100,000
Total Patient Accounts Receivable	\$ 2,100,000	\$ 2,100,000
Less: Estimated Allowance for Uncollectible Amounts	(1,000,000)	(1,000,000)
Net Patient Accounts Receivable	\$ 1,100,000	\$ 1,100,000

**NOTE 3 DESIGNATED NET POSITION**

Of the \$1,100,000 and \$1,100,000 of unrestricted net position reported in 2019 and 2018, \$1,100,000 and \$1,100,000, respectively, has been designated by the Hospital's board of trustees for capital acquisitions. Designated funds remain under the control of the board of trustees, which may at its discretion later use the funds for other purposes.

**MEMORIAL HOSPITAL OF SEETATER COUNTY**  
**NOTES TO COMBINED FINANCIAL STATEMENTS**  
**JUNE 30, 2019 AND 2018**

**NOTE 1 CAPITAL ASSETS**

Capital assets additions, retirements, and balances for the years ended June 30, 2019 and 2018 are as follows:

	Balance June 30, 2018	Additions	Transfers Retirements	Balance June 30, 2019
Land	\$ 1,000,000			\$ 1,000,000
Land Improvements	\$ 1,000,000			\$ 1,000,000
Buildings	\$ 1,000,000			\$ 1,000,000
Equipment	\$ 1,000,000	\$ 1,000,000	(1,000,000)	\$ 1,000,000
Totals at Historical Cost	\$ 4,000,000	\$ 1,000,000		\$ 5,000,000
Less: Accumulated Depreciation for:				
Land Improvements	(1,000,000)	(1,000,000)		(2,000,000)
Buildings	(1,000,000)	(1,000,000)		(2,000,000)
Equipment	(1,000,000)	(1,000,000)	1,000,000	(1,000,000)
Total Accumulated Depreciation	(3,000,000)	(2,000,000)	1,000,000	(4,000,000)
Capital Assets, Net before Construction in Progress	\$ 1,000,000	(1,000,000)	\$ 1,000,000	\$ 1,000,000
Construction in Progress	\$ 1,000,000	\$ 1,000,000	(1,000,000)	\$ 1,000,000
Capital Assets, Net	\$ 2,000,000	\$ (1,000,000)	\$ (1,000,000)	\$ 1,000,000

	Balance June 30, 2017	Additions	Transfers Retirements	Balance June 30, 2018
Land	\$ 1,000,000			\$ 1,000,000
Land Improvements	\$ 1,000,000			\$ 1,000,000
Buildings	\$ 1,000,000			\$ 1,000,000
Equipment	\$ 1,000,000	\$ 1,000,000	1,000,000	\$ 3,000,000
Totals at Historical Cost	\$ 4,000,000	\$ 1,000,000	\$ 1,000,000	\$ 6,000,000
Less: Accumulated Depreciation for:				
Land Improvements	(1,000,000)	(1,000,000)		(2,000,000)
Buildings	(1,000,000)	(1,000,000)		(2,000,000)
Equipment	(1,000,000)	(1,000,000)	1,000,000	(1,000,000)
Total Accumulated Depreciation	(3,000,000)	(2,000,000)	1,000,000	(4,000,000)
Capital Assets, Net before Construction in Progress	\$ 1,000,000	(1,000,000)	\$ 1,000,000	\$ 1,000,000
Construction in Progress	\$ 1,000,000	\$ 1,000,000	(1,000,000)	\$ 1,000,000
Capital Assets, Net	\$ 2,000,000	\$ (1,000,000)	\$ (1,000,000)	\$ 1,000,000

Construction in progress at June 30, 2018 is related to the Central Plant Upgrade. The Central Plant Upgrade has an estimated total cost of \$1.0 million and will be financed with internal funds. The project is expected to be completed in October 2019.

Assets held under capital leases were as follows as of June 30, 2018 and 2017:

	2018	2017
Equipment	\$ 1,000,000	\$ 1,000,000
Less: Accumulated Amortization	(1,000,000)	(1,000,000)
Total	\$ 0	\$ 0

**MEMORIAL HOSPITAL OF SWEETWATER COUNTY**  
**NOTES TO COMBINED FINANCIAL STATEMENTS**  
**JUNE 30, 2019 AND 2018**

**NOTE 3 LONG-TERM DEBT**

Long-term debt at June 30, 2019 and 2018 consists of the following:

	Balance June 30, 2019	Additions	Reductions	Balance June 30, 2018	Amount Due Within One Year
Hospital Revenue Bonds:					
Series 2008A	\$ 1,000,000			\$ 1,000,000	
Siemen's Note Payable	100,000		(100,000)	100,000	100,000
Capital Lease Obligations	100,000		(100,000)	100,000	100,000
Series 2008A Bond Premium	1,000,000		(100,000)	1,000,000	
Total	<u>\$ 3,100,000</u>	<u>\$ 0</u>	<u>\$ (200,000)</u>	<u>\$ 3,100,000</u>	<u>\$ 200,000</u>
	Balance June 30, 2018	Additions	Reductions	Balance June 30, 2017	Amount Due Within One Year
Hospital Revenue Bonds:					
Series 2008A	\$ 1,000,000			\$ 1,000,000	
Series 2008B	1,000,000		(1,000,000)		
Siemen's Note Payable	100,000		(100,000)	100,000	100,000
Capital Lease Obligations	1,000,000		(100,000)	1,000,000	100,000
Series 2008A Bond Premium	1,000,000		(100,000)	1,000,000	
Total	<u>\$ 4,100,000</u>	<u>\$ 0</u>	<u>\$ (200,000)</u>	<u>\$ 3,100,000</u>	<u>\$ 200,000</u>

The terms and due dates of the Hospital's long-term debt at June 30, 2019 are as follows:

- Sweetwater County, Wyoming (Memorial Hospital) Hospital Revenue Refunding Bonds Series 2008A, dated June 30, 2008. Interest is due annually to September 2019 at a 5% rate. Bonds are secured by Hospital revenues.
- Sweetwater County, Wyoming (Memorial Hospital) Hospital Revenue Bonds Series 2008B, dated June 30, 2008. Interest was due annually at a 5% rate. Bonds were secured by Hospital revenues. Bonds were paid off in fiscal year 2018.
- Siemen's Note Payable, payable in monthly installments of \$1,000, including interest at 5%, through January 2019.
- Capital Lease Obligation, payable in monthly installments of \$1,000, including interest at 5%, through October 2018.
- Capital Lease Obligation, payable in monthly installments of \$1,000, including interest at 5%, through April 2018.
- Capital Lease Obligation, payable in monthly installments of \$1,000, including interest at 5%, through May 2018.
- Capital Lease Obligation, payable in monthly installments of \$1,000, including interest at 5%, through February 2018.

**Restrictive Covenants**

The Hospital is required to meet certain financial and nonfinancial covenants. Management believes the Hospital was in compliance with the restrictive covenants as of June 30, 2019 and 2018, respectively.

**MEMORIAL HOSPITAL OF SOUTHERN ALABAMA COUNTY**  
**NOTES TO COMBINED FINANCIAL STATEMENTS**  
**June 30, 2019 AND 2018**

**NOTE 10 LONG-TERM DEBT (CONTINUED)**

Scheduled principal and interest payments on long-term debt and capital leases are as follows:

<u>Year Ending June 30</u>	<u>Principal</u>	<u>Interest</u>	<u>Total</u>
2019	\$ 1,000,000	\$ 1,000,000	\$ 2,000,000
2020	1,000,000	1,000,000	2,000,000
2021	1,000,000	1,000,000	2,000,000
2022	1,000,000	1,000,000	2,000,000
2023	1,000,000	1,000,000	2,000,000
2024 to 2025	1,000,000	1,000,000	2,000,000
2026 to 2027	1,000,000	1,000,000	2,000,000
2028 to 2029	1,000,000	1,000,000	2,000,000
<b>Total</b>	<b>\$ 10,000,000</b>	<b>\$ 10,000,000</b>	<b>\$ 20,000,000</b>

**NOTE 11 PENSION PLANS**

The Hospital has a Section 408(a) defined contribution pension plan that is available to all qualified Hospital employees. Employees are eligible to participate in the plan upon completion of three months of service. The Hospital's matching contributions are deposited into the 408(a) plan described below.

The Hospital has a Section 408(a) defined contribution pension plan that is available to all qualified Hospital employees. The Hospital's contribution is based on a 50% match of employee contributions up to a maximum of 5% of participant salaries. Employees are eligible to participate in the plan upon completion of one year of service.

The pension expense for the years ended June 30, 2019, 2018, and 2017 was \$1,000,000, \$1,000,000, and \$1,000,000, respectively.

**NOTE 12 CONCENTRATION OF CREDIT RISK**

The Hospital grants credit without collateral to its patients, most of who are insured under third-party payor agreements. The mix of patient receivables from third-party payors and patients at June 30, 2019 and 2018 was as follows:

	<u>2019</u>	<u>2018</u>
Medicare	\$ 1,000,000	\$ 1,000,000
Medicaid	1,000,000	1,000,000
Blue Cross	1,000,000	1,000,000
Other Third-Party Payors	1,000,000	1,000,000
Patients	1,000,000	1,000,000
<b>Total</b>	<b>\$ 5,000,000</b>	<b>\$ 5,000,000</b>

**MEMORIAL HOSPITAL OF SEETATER COUNTY**  
**NOTES TO COMBINED FINANCIAL STATEMENTS**  
**SUNE 2019 AND 2018**

**NOTE 00 COMMITMENTS AND CONTINGENCIES**

**Operating Leases**

The Hospital leases certain facilities and equipment under long-term operating lease agreements for the year ended June 30, 2019. Total lease expense for all operating leases for the years ended June 30, 2019 and 2018 was approximately \$1,000,000 and \$1,000,000, respectively.

Minimum future lease payments for these operating leases are as follows:

<u>Year Ending June 30</u>	<u>Operating Leases</u>
2019	\$ 1,000,000

**Malpractice Insurance**

The Hospital has malpractice insurance coverage to provide protection for professional liability losses on a claims-made basis subject to a limit of \$1 million per claim and an annual aggregate limit of \$1 million. There is additional excess coverage above this limit up to \$1 million. Effective May 1, 2018 this excess coverage was decreased to \$1 million. Should the claims-made policy not be renewed or replaced with equivalent insurance, claims based on occurrences during its term, but reported subsequently, would be uninsured.

**Self-Funded Health Insurance**

The Hospital self-funds health benefits for eligible employees and their dependents. Health insurance expense is recorded on an accrual basis. An accrued liability is recorded in the combined financial statements, which estimates the claims incurred but not yet reported and claims reported but not yet paid. The Hospital has stop loss insurance to cover catastrophic claims. The Hospital expensed amounts representing the employer's portion of actual claims paid, adjusted for the actuarially determined estimates of liabilities relating to claims resulting from services provided prior to the respective fiscal period-end. The Hospital recognized approximately \$1,000,000 and \$1,000,000 of expense during the years ended June 30, 2019 and 2018, respectively. The estimated liability relating to self-funded health insurance was \$1,000,000 as of June 30, 2019 and 2018.

**Litigations, Claims and Disputes**

The Hospital is subject to the usual contingencies in the normal course of operations relating to the performance of its tasks under its various programs. In the opinion of management, the ultimate settlement of litigation, claims, and disputes in process will not be material to the combined financial position of the Hospital.

MEMORIAL HOSPITAL OF SEETATER COUNTY  
NOTES TO COMBINED FINANCIAL STATEMENTS  
UNE AND

NOTE COMMITMENTS AND CONTINGENCIES CONTINUED

Litigations, Claims, and Disputes Continued

The health care industry is subject to numerous laws and regulations of federal, state, and local governments. Compliance with these laws and regulations, specifically those relating to the Medicare and Medicaid programs, can be subject to government review and interpretation, as well as regulatory actions unknown and unasserted at this time. Federal government activity has increased with respect to investigations and allegations concerning possible violations by health care providers of regulations, which could result in the imposition of significant fines and penalties, as well as significant repayments of previously billed and collected revenues from patient services. Management believes that the Hospital is in substantial compliance with current laws and regulations.





**INDEPENDENT AUDITORS' REPORT ON INTERNAL CONTROL OVER  
FINANCIAL REPORTING AND ON COMPLIANCE AND OTHER MATTERS  
BASED ON AN AUDIT OF COMBINED FINANCIAL STATEMENTS PERFORMED IN  
ACCORDANCE WITH GOVERNMENT AUDITING STANDARDS**

Board of Trustees  
Memorial Hospital of Sweetwater County  
Rock Springs, Wyoming

We have audited, in accordance with the auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States, the combined financial statements of Memorial Hospital of Sweetwater County (the Hospital), which comprise the combined statement of net position as of June 30, 2014, and the related combined statement of revenues, expenses, and changes in net position, and cash flows for the year then ended, and the related notes to the combined financial statements, and have issued our report thereon dated REPORT DATE.

**Internal Control Over Financial Reporting**

In planning and performing our audit of the combined financial statements, we considered the Hospital's internal control over financial reporting (internal control) to determine the audit procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the combined financial statements, but not for the purpose of expressing an opinion on the effectiveness of the Hospital's internal control. Accordingly, we do not express an opinion on the effectiveness of the Hospital's internal control.

A *deficiency in internal control* exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, misstatements on a timely basis. A *material weakness* is a deficiency, or a combination of deficiencies, in internal control, such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented, or detected and corrected on a timely basis. A *significant deficiency* is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies. Given these limitations, during our audit we did not identify any deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

### Compliance and Other Matters

As part of obtaining reasonable assurance about whether the Hospital's combined financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the determination of financial statement amounts. However, providing an opinion on compliance with those provisions was not an objective of our audit, and accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

### Purpose of this Report

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the result of that testing, and not to provide an opinion on the effectiveness of the Hospital's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the Hospital's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

ClintonLarsonAllen LLP

Minneapolis, Minnesota  
REPORT DATE

# Maintenance of Board and Board Committee Meeting Minutes

## Statement of Purpose

By law and regulatory requirements, the Board of Trustees of Memorial Hospital of Sweetwater County (Hospital) is responsible for the maintenance and retention of their records. Effective records management includes timely access to accurate and reliable information, assures transparency and accountability to the public, preserves the Hospital's history, and preserves essential information.

## Definitions

**Board** means Board of Trustees of Memorial Hospital of Sweetwater County

**Committee** means any standing or ad hoc committee of the Board

**Custodian** means the executive assistant of the CEO, who is responsible for the maintenance, care, and keeping of the public records.

**Meeting** means any meeting duly convened, constituted and held by the Board; meetings convened by another entity to which the Board has been invited; and any meeting by one of the Board's Committees.

**Minutes** means the written record of the proceedings of the meeting, including actions, decisions, commitments and major discussion points

**Maintenance** means the permanent and orderly preservation of minutes in either physical or digital mode

**Retention** means the time period the minutes are required to be maintained.

## Policy

Meeting minutes of the Board are the legal and official record of the Board's actions and provide evidence of the Board's interactions. Meeting minutes of Board Committees also provide a lasting record of actions and decisions by these Committees.

It is the policy of the Board that its meeting minutes and those of its Committees shall be recorded and maintained in a manner that complies with Wyoming State statute and other regulatory requirements pertinent to governmental hospitals.<sup>1</sup>

## Procedure

1. There shall be an official record, or minutes, of the proceedings of every meeting.
2. Meeting minutes should include:
  - a. Date of the meeting
  - b. Time the meeting was called to order
  - c. Names of the meeting participants and absentees
  - d. Corrections and amendments to previous meeting minutes

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<sup>1</sup> W.S. 16-4-401 to 16-4-408 (2011)

- e. Additions to the current agenda
  - f. Whether a quorum is present
  - g. Motions taken or rejected
  - h. Voting-that there was a motion and second, and the outcome of the vote
  - i. Actions taken or agreed to be taken
  - j. Next steps
  - k. Items to be held over
  - l. New business
  - m. Open discussion or public participation
  - n. Next meeting date and time
  - o. Time of adjournment
3. The Board Secretary shall delegate the recording and drafting of Board meeting minutes to the executive assistant of the Chief Executive Officer (CEO).
  4. For committees where someone other than the executive assistant of the CEO takes the minutes, the Committee chair is responsible for assuring that the CEO's executive assistant has all the Committee meeting material for the upcoming Board meeting packet.
  5. Board meeting minutes are official once they have been approved by the Board and signed by the Board Secretary. Committee meeting minutes are official once they have been approved by Committee members.
  6. The minutes of executive sessions are confidential and are in the custody of the executive assistant of the CEO.
  7. Public meeting notice, as well as the meeting agenda, handouts and documents that were referred to during the meeting shall be attached to the official copy of the minutes.
  8. Storage and retention of all official records of the Board shall comply with Wyoming State statutes<sup>2</sup> and are delegated to the executive assistant of the CEO.
    - a. Minutes of all Board meetings shall be permanently retained in physical form.
      - i. To protect from damage and destruction, physical copies of the minutes and their attached documents shall be retained in a safe, secure file cabinet in the office of the Hospital's administration.
      - ii. Digital copies of the minutes and their attached documents shall be uploaded and retained in the board portal.
    - b. Minutes of all Committee meetings shall be retained for three years.
      - i. Digital copies of the minutes and their attached documents shall be uploaded and retained in the appropriate Committee section of the board portal.
      - ii. The administrative staff associated with the Committee shall be responsible for uploading each month's meeting material into the board portal for storage.
  9. Board and Committee minutes are controlled from unauthorized access.
    - a. Digital minutes are protected from unauthorized access through passwords.
    - b. Access to paper minutes is under the purview of the executive assistant of the CEO.
    - c. Minutes that are in the public domain shall be provided for public review without charge on equipment made available by the Hospital in its office. Copies of the minutes may be requested; the Hospital may set a fee to cover costs of copying.

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<sup>2</sup> W.S. 17-16-1601 and 17-19-1601 (2011)

10. Official minutes of all Board meetings will be part of the public material on the Board of Trustee's section of the Hospital's website.

DRAFT



Approved:

N/A

Review Due:

N/A

Document Area:

*Administration*

Reg. Standards:

## EMPLOYEE POLICIES-POLITICAL ACTIVITY

### STATEMENT OF PURPOSE

To provide guidelines for Memorial Hospital of Sweetwater County (MHSC) employees as to political activity.

### Policy

Every MHSC employee has the right to register and vote on all political issues. As employees of a Memorial Hospital which receives federal and state funds there are certain limits on employees political rights. Those limits include but are not limited to:

A Hospital employee may not engage in, nor may Supervisors or Directors allow employees to engage in campaign activities of any sort, including solicitation of political contributions while on any of the Hospital's campuses.

Employees are not permitted to use Hospital property, such as copiers, printers, fax machines, computers or telephones for political activities.

An employee may not campaign or participate in political activities while wearing Hospital apparel. This includes wearing of political buttons or signs when at work and/or on duty, and placing signs on any of the Hospital campuses. However, this does not exclude an employee's right to display a bumper sticker on an employee's personal vehicle.

Political activity is to be kept separate and apart from the job and away from the workplace.

### REFERENCES

#### Attachments

No Attachments

## MEMORANDUM

To: Board of Trustees  
From: Wm. Marty Kelsey  
Date: September 29, 2020  
Subject: Quality Committee...Chair's Report...September, 2020

Kari Quickenden reported that the Joint Commission Survey Readiness team is meeting weekly to prepare for the Joint Commission visit expected soon.

The Culture of Safety survey was administered in June. After analysis, it will be presented to the PIPS (Performance Improvement & Patient Safety) Committee and the Quality Committee in October.

The Patient Safety Plan is being worked on. Again, this Plan will be presented to the PIPS Committee and the Quality Committee in October. It will come to the Board soon.

Kara Jackson reported on the Quality Reporting Program results. Regarding the Readmission Reduction Program and the Hospital-Acquired Condition Program results, MHSC will experience a slight reduction of revenues in 2020 (less than \$16,000 total) based on CMS criteria. Nothing for the Board to be alarmed about as these reductions are quite common. Regarding the Hospital Value Based Purchasing Program results, MHSC performed well enough to earn a bonus payment estimated to be about \$28,000 in 2020. Performance has decreased somewhat since 2018, but still positive.

Regarding progress in the Star Rating domain, an opportunity exists within the safety of care category, specifically for the CDI (Clostridioides difficile infection) measure. The Hospital's Infection Preventionist is working on improvements.

An interdisciplinary team is working to create a new safety committee, which hopefully will be kicked off in October or November.

CMS is proposing some major methodology changes for 2021 regarding the Star Rating system. Under the proposal, significant changes are: (1) Hospitals will be placed into one of three peer groups; (2) The calculation of group scores will be simplified; (3) Mortality and Safety measures will be emphasized more; (4) The Timely and Effective Care measure will consolidate three separate measure groups and will be weighted at 12%. It is estimated that if and when implemented, 51% of hospitals would receive the same rating; 45% of hospitals would shift by one star (almost twice as many hospitals will go up one star as will go down one star); 5% of hospitals would shift by two stars (almost four times as many hospitals in this category would go up two stars as would go down two stars.)

The new Quality Committee agenda section called "From the Director" will be addressed at each Quality Committee meeting every other month commencing in October.



Present: **Voting Members:** Kara Jackson (Quality Director), Irene Richardson (CEO), Leslie Taylor (Clinic Director), Tami Love (CFO), Marty Kelsey (Quality Board Chair), Dr. Kristy Nielson (CNO), Dr. Melinda Poyer (CMO), Dr. Kari Quickenden (CCO),

**Non-voting Members:** Noreen Hove, Karali Plonsky, Corey Worden, Jodi Corley

Absent/Excused: **Voting Members:** Dr. Banu Symington

**Non-voting Members:** Kalpana Pokhrel, Gabrielle Seilbach

Chair: Mr. Marty Kelsey

### **Mission Moment**

Ms. Richardson shared a wonderful email from a school nurse thanking MHSC for their help in providing personal protective equipment for school nurses and for an efficient swabbing station.

### **Approval of Agenda**

Mr. Kelsey presented the Agenda for approval. Ms. Richardson motioned for approval and Dr. Nielson seconded the motion. Motion was unanimously approved.

### **Approval of Minutes**

Mr. Kelsey presented the August 19, 2020 Quality Committee Minutes for approval. Dr. Quickenden motioned for approval and Dr. Nielson seconded the motion. Motion was unanimously approved.

### **Old Business**

Update was presented by Dr. Quickenden, who explained that MHSC has not yet been surveyed by the Joint Commission (TJC). Dr. Quickenden expects that TJC will be onsite next week to conduct their triannual survey. In preparation for the impending survey, the Continual Survey Readiness (CSR) committee is meeting weekly. Departments present action items that they return to for review. In addition, Dr. Quickenden, Dr. Nielson, Ms. Jackson, Ms. Hoove, and additional staff are rounding daily in various departments.

Ms. Jackson presented an update on the Culture of Safety survey, which was administered in June 2020. MHSC received a 58% response rate from staff. In August Ms. Plonsky and Ms. Seilbach compiled the data and entered into a tool provided by the Agency for Healthcare Research and Quality(AHRQ). They are analyzing the data, creating a PowerPoint presentation, and developing an executive summary. These items will be presented to the Performance Improvement and Patient Safety (PIPS) committee and the Quality Committee of the Board meeting in October.

Ms. Jackson presented an update on the Patient Safety Plan. The new plan is almost complete and will be brought to PIPS and the Quality Committee of the Board in October for approval. It will then be taken to the Board and Medical Executive Committee (MEC). Ms. Jackson explained that they are working to develop a Culture of Safety committee, committee charter, and identify meaningful data.

### **New Business**

Ms. Jackson presented the most recent Quality Reporting Program Results. Ms. Jackson explained that MHSC is moving towards a value-based organization from a volume-based program.

Hospital Readmission Reduction Program 2020 Performance: .11% penalty (~\$3,400) due to pneumonia. Hospital-Acquired Condition Reduction Program 2020 performance: 1% penalty (~\$12,000), due to Clostridioides difficile Infection (CDI). Value Based Purchasing 2020 performance: 2.33% bonus (~28,000), trending down due to pneumonia mortality, HCAHPS domains, MHSC did not have enough cases for Hospital Acquired Conditions (HAC)/Safety. Medicare Spending per Beneficiary performed slightly worse.

Ms. Corley presented an updated for MHSC's Merit-Based Incentive Payment System (MIPS) results. MHSC received a score of 78.8/100 overall. MHSC will receive a positive adjustment of 0.35%. MHSC scored lower this year due to EMDs as much of the reporting piece of EMDs was broken. Ms. Corley has put together packets for providers showing them exactly where they need to document for MIPS. A very small, if any, payment adjustment is expected for next year due to all of the hardships MIPS will allow. Next year the threshold to receive an incentive payment is increasing to 85%. We will need to increase our score to achieve this.

### **Medical Staff Update**

Dr. Poyer gave the Medical Staff update, noting that physician meetings are held bi-weekly. Dr. Poyer reported that transfer data is reviewed on a monthly basis. 170 transfers were reviewed from last month and only 2 – 3 were identified as possible cases that could have stayed at MHSC.

Dr. Poyer reported that MHSC currently has one staff member out on quarantine. Rock Springs has had zero positive COVID students from school districts one and two. Sweetwater County continues to have very low COVID number, with hopes that this trend continues. MHSC is working diligently with community organizations to ensure a seamless back-to-school process.

### **Informational Agenda**

There were no questions on the informational agenda.

Quality Committee will be presenting to the Board in October.

### **From the Director**

Mr. Kelsey presented that moving forward Ms. Jackson and Dr. Quickenden will provide a report of significant achievements and progress every other month to the Quality Committee of the Board, starting in October.

Dr. Quickenden briefly discussed future changes to the Hospital Star Rating program. The Centers for Medicare and Medicaid (CMS) are looking to simplify the Star Rating calculations. Hospitals have asked them to look into placing hospitals into peer groups along with adjusting the way the averages are calculated. With the proposed changes, if they are all implemented, 51% of hospitals would receive the same rating (1,743 hospitals), 45% of hospitals would shift up or down one star (1,477 hospitals), 5% would shift by two stars (143 up two stars, 37 down two stars), .2% would shift by three stars (1 go up, 7 go down), 1 hospital would go from 5 to 1 star.

Dr. Quickenden also mentioned that the National Quality Forum is proposing 8-10 standards hospitals would attest to that state they are doing things to keep patients safe from COVID.

### **Meeting Adjourned**

Mr. Kelsey adjourned the meeting at 9:08 am

### **Next Meeting**

October 21, 2020 at 08:15 am via ZOOM

Respectfully Submitted,

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Robin Fife, Recording Secretary

Quality Committee of the Board  
Quality Risk Safety Accreditation Summary  
September 2020

Three Priorities FY 2021

1. HCAHPS/Patient Experience
2. High Level Infection
3. Culture of Safety Survey Results and Action Plans

1. Star Rating

- a. There are seven categories within the Star Rating and they are as follows: mortality, readmission, safety of care, efficient use of medical imaging, timeliness of care, patient experience, and effectiveness of care. Each of these seven categories contain several data metrics. Data within the following categories continues to trend in right direction: mortality. Opportunities for improvement exist within the efficient use of medical imaging category. OP-10 Abdomen CT with and without Contrast – Project Team is working on improvements of process at this time, will continue to monitor. June and July's data within the readmission category has increased, an in-depth analysis of the data is being conducted to identify potential gaps. An opportunity for improvement exists within the safety of care category, specifically for the C. diff (Clostridioides difficile) infection measure. Infection Preventionist working on improvements with nursing departments.
- b. Within the Timeliness of Care category, ED-2 ED Median Admit Decision Time to ED Departure Time has seen an increase in the data over the past few months. The project team is aware and is identifying and developing thresholds for each part of the part of the Patient Flow process. Once thresholds are developed and expectations of meeting this threshold are set, will analyze data and further identify opportunities for improvement. Within the Effectiveness of Care category, we are seeing fluctuations with the data for Core Sep1 – Early Management Bundle, Severe Sepsis/Septic Shock Scorecards identifying opportunities for improvement continue to be sent to physicians and nurses. Sepsis team developed new visual tool to ensure all elements of Bundle are met in a timely manner and rounding and education have taken place. The sepsis project team continues to work towards their new goal related to improving compliance with ordering and obtaining blood cultures within specified timeframe. Improvement work continues for Core OP-2 – Head CT/MRI Results for Stroke Pts within 45 minutes of Arrival.
- c. Patient Experience-HCAHPS: The “Overall Inpatient HCAHPS Dashboard” is the survey data that affects our Star Rating and Value Based Purchasing reimbursement program. This survey includes OIIC and Med-Surg. Data will look different beginning next month as the data strategy and improvement strategy has changed with switching to new vendor, Press Ganey.
  - i. Med Surg increased their scores in each domain from Q1 to Q2 2020. IC and OI ended Q2 2020 with lower scores overall.

## 2 Risk/Safety

- a. There were 20 occurrence reports for August. 12 were medication related of which 2 were also weight related. One medication related event should also be counted as a good catch. There were 2 falls and 2 possible areas in sterile field. The other 4 occurrence reports were miscellaneous events.
- Safety – An interdisciplinary team is working to create a new safety committee with hopes that meetings will kick off in October or November. The Patient Safety Plan is close to being finished and will likely come to Quality Committee of the Board in October for review and approval. The Culture of Safety Survey was administered in June and results from the survey were entered into Agency for Healthcare Research in Quality (AHRQ) Data Analysis Tool in July and first part of August. Members of Quality and Senior Leadership are analyzing the data as well as putting together a presentation and an executive summary. This presentation will likely be ready in October as well. After presentation of this information the next step is to develop initiatives related to our opportunities for improvement.

## □ PI Standards

- a. Our PI Standards within the dashboard include data metrics defined by Centers for Medicare and Medicaid Services (CMS) and The Joint Commission (TJC) as well as priorities identified by MHSC on the Performance Improvement and Patient Safety (PIPS) plan.

## 4 Accreditation

- a. We are currently in our Joint Commission triennial survey window and a survey will likely occur in the next two weeks. CSR Committee continues to meet weekly in order to prepare. Joint Commission rounding and tracers have increased in frequency. There are some standards that need work to come into compliance and this work is underway. “Joint Points” continue to be shared with the hospital and clinics and we have increased the frequency of these as well to five times per week.

## **HUMAN RESOURCES COMMITTEE CHAIR REPORT TO THE BOARD SEPTEMBER 2020**

**Ed Tardoni**

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

### **HR DATA FOR THE MONTH**

The usual HR reports are included in the Board packet. The turnover and rehire rates continue to be better than national averages.

### **POLICY ACTIVITY**

The HR Committee continued activity on the following policies:

#### **POLITICAL ACTIVITY POLICY**

The committee considered a new policy on political activity. By unanimous vote, the committee sends the policy to the Board for consideration with a due pass recommendation.

### **ADDITIONAL POLICY DISCUSSIONS**

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

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

The committee was updated on progress related to making all of these policies consistent. The intent is to have a package of revised wording available for presentation to the board upon release of the above for consideration.

### **ADDITIONAL DISCUSSIONS**

An unsolicited proposal was brought before the committee for discussion. It involved a no cost service for employees related to the IRS Earned Income Tax Credit. Upon investigation and discussion, the committee concluded that the same service could be obtained from the IRS at no cost. The brochure language demonstrated that only about forty employees had a possibility of being helped. However, it would result in about half of the employees winding up on a list for solicitation for insurance products. In short, the program was a marketing tool for insurance products that would compete with our benefit package. The program was rejected for consideration.

### **NEXT MEETING**

The HR Committee meets the third Monday of the month. The next meeting will be October 19, 2020 at 3:00 P.M. most likely by Zoom

**MEMORIAL HOSPITAL OF SWEETWATER COUNTY**  
**Human Resources Committee Meeting – Minutes Draft**  
**Monday, September 28, 2020**  
*Zoom*

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

Ed called the meeting to order. Amber said she had an additional item for the agenda. Suzan sent out a political activity policy. The motion to amend the agenda to include the policy was made by Barbara, second by Irene. Motion carried.

**OLD BUSINESS**

I. **MINUTES APPROVED:**

The motion to approve the minutes for the August 17, 2020, meeting was made by Barbara, second by Amber. Motion carried.

II. **TURNOVER REPORT:**

Amber said the packet shows the overall hospital turnover as of the end of August 2020. The top turnover is reception. Barbara asked for clarification of some numbers. Amber said there could be an error in some of the numbers and said it may be due to some formulas in the Excel spreadsheet. Amy will check the numbers, verify the calculations, and provide an update. Ed said the update should be included in the packet. Amber said the 18% rehire rate is incredible. Amber asked if the Barbara and Ed want to see the clinic numbers shown separately. They said they do want that information broken out. Amber said she is happy to provide the information in the way that is most helpful. There was discussion around why we report length of service for separations. Amber said typically supervisors figure out the fit isn't right. Amber said separations are typically due to performance (on time, schedule, work ethic, etc.). That is why the intro periods are so important. Irene said that is why we are looking at an extension of the intro period policy.

III. **OPEN POSITIONS:**

Amy reviewed openings and the current status.

IV. **EMPLOYEE POLICIES:**

a. **Workplace Violence Prevention Policy** – Amber sent out Suzan's e-mail and draft. Ed asked for the intent. Suzan said we currently have a policy called Workplace Violence. This will replace that one. She said this has a focus on prevention. Barbara asked if there is any language about patients and initiating workplace safety. She also asked if there is information included in the patient's bill of rights. She asked Suzan to review and make the language match. Barbara said there was mention of a written workplace plan. She asked if the policy and plan should be ready to go at the same time. Suzan said she just wanted to know if the Committee wants to replace the plan. Suzan will review and said the bill of rights needs some work for The Joint Commission anyway. Ed clarified and said this draft takes a

different viewpoint and set up for prevention. There was discussion of Tami's highlighted comments. The copy in the packet is not the latest thing Suzan sent out. Tami included wording from David Beltran in Security. The motion to adopt the security response language as presented by Tami was made by Amber, second by Barbara. Motion carried. Ed said he wanted to discuss the definition of weapons. The original policy had a definition by OSHA. Ed sent comments to everyone that everything would qualify as a weapon under that definition. Ed suggested using the language in the current policy. He said it is consistent with the OSHA definition of violence. The motion to approve the format in front of the Committee right now was made by Suzan, second by Barbara. Motion carried. Barbara asked when the policy will go to the Board. Suzan said we are not in a big hurry. Ed said the hospital staff will check the patient's bill of rights, generate a workplace violence prevention plan, and make two changes as discussed. The Committee will review again at the October meeting.

b. **Political Activity Policy** – Ed said the group sent something out at the last minute. Suzan said she sent it out the prior Thursday and then sent again earlier in the day to make sure it was seen. Suzan said we did not have a policy. Marty Kelsey asked for it so Suzan found information from other hospitals. She asked if the Committee thinks we need it or if this is what they were looking for. Barbara asked if it is needed. Amber said there was an incident and it was addressed. Amber thinks it is a good idea to have it. Suzan feels it is ready. The motion to approve the political activity policy and forward to the Board for review was made by Barbara, second by Irene. Motion carried. Ed said there are to be no changes made to it before it goes in the board meeting packet. If there are changes, it comes back to the Committee to review.

## **NEW BUSINESS**

### **V. EITC TAX CREDIT PROGRAM FOLR EMPLOYEES:**

Irene said the Wyoming Hospital Association (WHA) is always looking for new vendors. She said it is very important we support the vendors because they support the WHA. A company offers an opportunity to see if any employees have earned income benefits. Irene wanted to bring this by the Committee to see if there is something we should offer to our employees. There is no charge to the employee. Amber said we are not at a place where we are interested in offering additional benefits. She thinks offering a professional expert to staff is a good thing. Ed shared his thoughts. He said the IRS offers this for free. He said he sees some downside to it. Ed expressed concern of board members in these committee meetings being too influential. Barbara said Ed shared comments she was thinking about. Ed thanked Irene and Amber for bringing it forward. The Committee agreed this is not something we want to pursue at this time.

### **VI. COMMITTEE MEMBER REPORTS:**

Ed welcomed Ann and asked if she had any questions. He reviewed the process and said staff is in charge. He said Board members are here to ask questions.

### **VII. NEXT MEETING DATE:**

The next meeting is Monday, October 19, 2020.

Ed thanked everyone for participating. The meeting adjourned at 4:19 PM.



**Human Resources Committee Meeting**  
**Monday, September 28, 2020**  
**Amended**  
**3:00 PM – Zoom meeting**  
**AGENDA**

**Old Business**

- I. Approval of minutes
- II. Turnover Report - Amber
- III. Open Positions –Amy
- IV. Employee policies– Suzan
  - a. Workplace Violence Prevention policy
  - b. Others needing discussion – Political Activity (sent 9/24/20)

**New Business**

- V. EITC Tax Credit Program for Employees - Amber and Irene
- VI. Committee member reports, other discussion(s) – as needed
- VII. Determination of Next Meeting Date (Auto-Scheduled for (10/19/20)

## MEMORIAL HOSPITAL OF SWEETWATER COUNTY

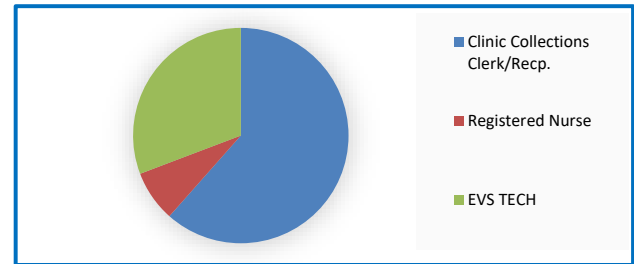
### 2020 Overall Turnover Data (As of 08/31/2020)

#### Top Position(s) / Turnover

Clinic Collections Clerk/Recp.	6	40%
Registered Nurse	6	5%
EVS TECH	5	20%

2020

%

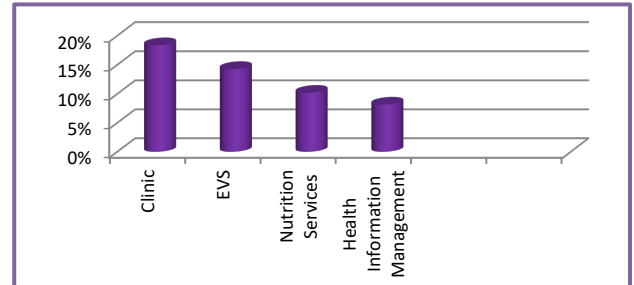


#### Top Department(s) / Turnover

Clinic	9	18%
EVS	7	14%
Nutrition Services	5	10%
Health Information Management	4	8%

2020

%

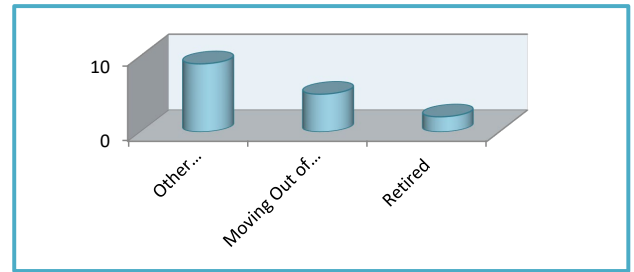


#### Top Reasons / Turnover

Discharged	16	33%
Resigned	9	18%
Other Employment	9	18%
Moving Out of Area/Relocation	5	10%
Retired	2	4%

2020

%

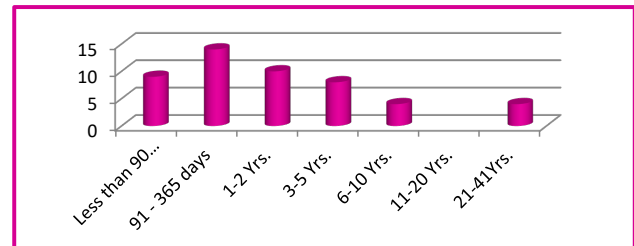


#### Length of Service

Less than 90 days	9	18%
91 - 365 days	14	29%
1-2 Yrs.	10	20%
3-5 Yrs.	8	16%
6-10 Yrs.	4	
11-20 Yrs.		
21-41Yrs.	4	8%

2020

%



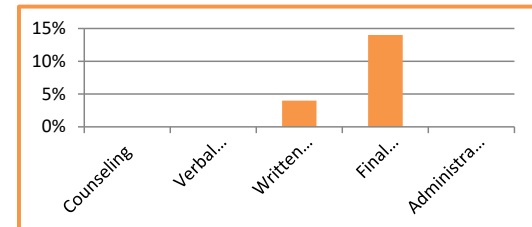
Total

49

#### Corrective Action

Counseling		
Verbal Warning		
Written Warning	4%	100%
Final Written Warning	14%	100%
Administrative Leave		

% Discharged

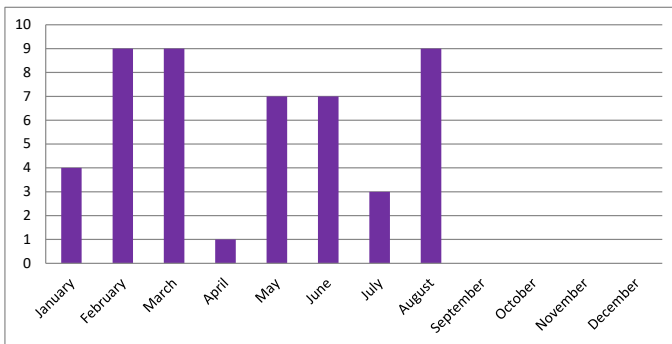


Total  
Employees 536

536

### 2020 Separations - Hospital Wide

	Separations	New Employees	536
January	4	4	533
February	9	6	530
March	9	8	529
April	1	4	532
May	7	1	526
June	7	3	522
July	3	8	527
August	9	8	526
September			
October			
November			
December			
Total	49	42	9%

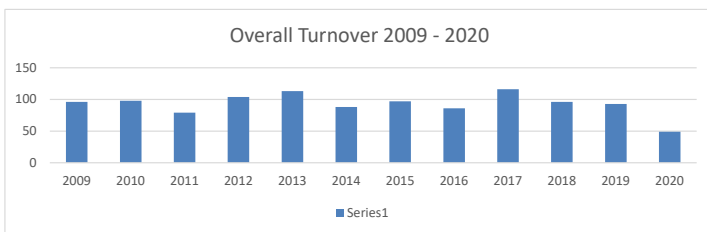


	Separations
Involuntary	16
Voluntary	33
Total	49

	Classifications
RN	6
Classified	43
Total	49

### Overall Turnover

2009	96
2010	98
2011	79
2012	104
2013	113
2014	88
2015	97
2016	86
2017	116
2018	96
2019	93
2020	49



### Rolling 12

	Separations	%
Jan 19 - Jan 20	109	20%
Feb 19 - Feb 20	107	20%
March 19 - March 20	107	20%
April 19 - April 20	103	19%
May 19 - May 20	105	20%
June 19 - June 20	105	20%
July 19 - July 20	94	18%
Aug 19 - Aug 20	92	17%

### Rehire Rate

	Rehires	%
July 19 - July 20	14	15%
Aug 19 - Aug 20	17	18%

## MEMORIAL HOSPITAL OF SWEETWATER COUNTY - CLINIC DATA

### 2020 **Clinic** Turnover Data (as of 08/31/2020)

#### Top Position(s) / Turnover

Clinic Collections Clerk/Recep  
Registered Nurse

2020

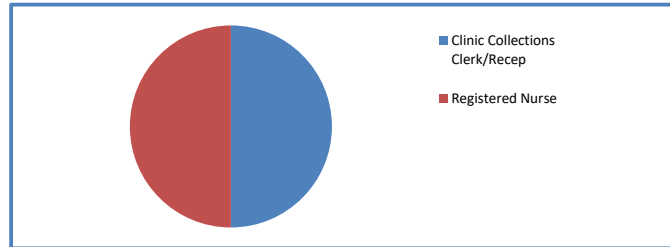
%

6

5%

1

5%



#### Top Reason(s) / Turnover

Discharged  
Resignation

2020

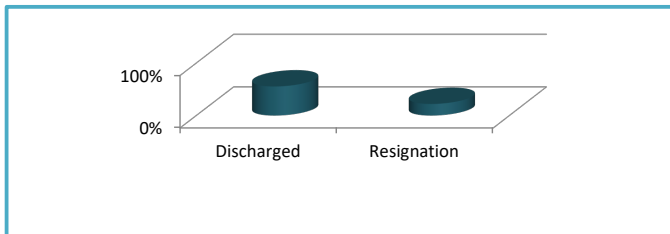
%

5

56%

2

22%



#### Length of Service

Less than 90 days  
91 - 365 days  
1-2 Yrs.  
3-5 Yrs.  
6-10 Yrs.  
11-20 Yrs.  
21-30 Yrs.

2020

%

3

33%

1

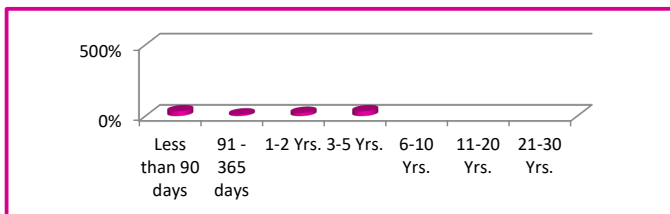
11%

2

22%

3

33%



#### Total

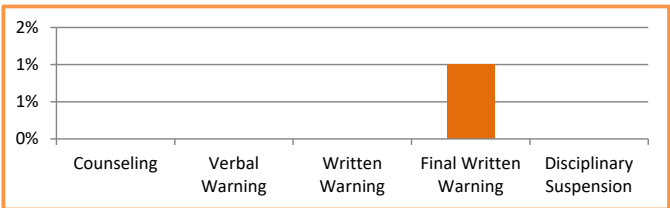
9

#### Corrective Action

Counseling  
Verbal Warning  
Written Warning  
Final Written Warning  
Disciplinary Suspension

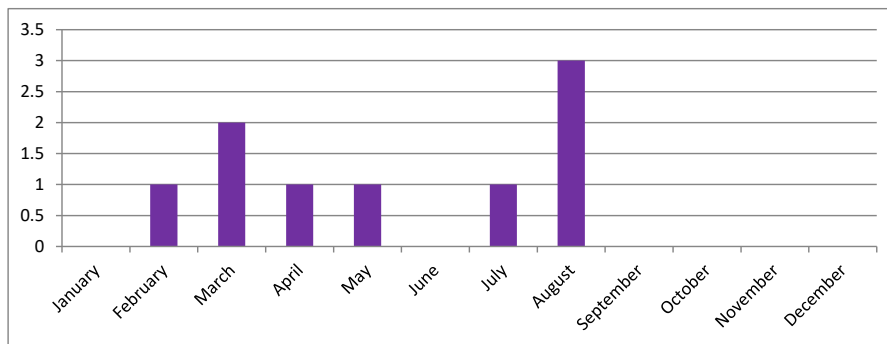
1%

100%



## 2020 Separations - Clinic

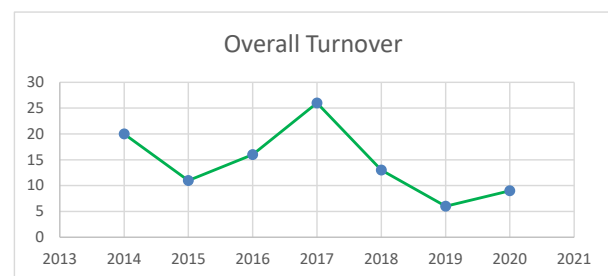
	Separations	New Employees	Total Employees	110
January	0	0	110	
February	1	1	110	
March	2	2	110	
April	1	0	109	
May	1	0	108	
June	0	0	108	
July	1	1	108	
August	3	3	108	
September				
October				
November				
December				
Total				



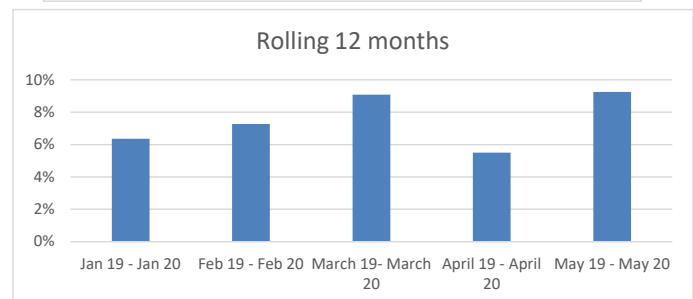
	Separations
Involuntary	5
Voluntary	4
Total	9

	Classifications
RN	1
Classified	8
Total	9

	Overall Turnover	
2014	20	26%
2015	11	18%
2016	16	14%
2017	26	23%
2018	13	12%
2019	6	5%
2020	9	8%



Rolling 12 Months		
Jan 19 - Jan 20	7	6%
Feb 19 - Feb 20	8	7%
March 19- March 20	10	9%
April 19 - April 20	6	6%
May 19 - May 20	10	9%
June 19 - June 20	9	8%
July 19 - July 20	10	9%
Aug 19- - Aug 20	13	12%



Job Title	Requisition Number	Hiring Manager	Department	Department Status	Schedule	Shift	Hours
<b>Clinical</b>							
Lab Asst / Phlebotomist	0000	Mary Fischer	RADIATION	Active	Regular Full Time	variable	variable
Lab Asst / Phlebotomist	0000	Mary Fischer	RADIATION	Active	Regular Part Time	variable	variable
Medical Assistant	0000	Leslie Taylor	CENT	Active	Regular Full Time	variable	
Medical Assistant	0000	Leslie Taylor	CENT	Active	Regular Full Time	variable	
Reg. Resp. Therapist	0000	Crystal Hamblin	CARDIOPULMONARY	Active	Regular Full Time	variable	
Ultrasound Tech.	0000	Tracie Soller	ECHOCARDIOGRAPHY	Active	Regular Full Time	Days	M-F
<b>Non-Clinical</b>							
Central Supply Aide	0000	Angel Bennett	CENTRAL SUPPLY	Active	Regular Full Time	Days	Rotating
Clin Collections Clerk/Recept	0000	Tasha Harris	RADIATION NON	Active	Regular Full Time	Days	
Collections Clerk	0000	Ron Cheese	PATIENT FINANCIAL SERVICES	Active	Regular Full Time	Days	M-F 08:00
Director Information Svcs	0000	Tami Love	INFORMATION TECHNOLOGY	Active	Regular Full Time	Days	
Door Monitor	0000	Amber Fisk	HUMAN RESOURCES	Active	Temporary	variable	
EIS Technician	0000	Corinna Rogers	HUMAN RESOURCES	Active	Regular Part Time	variable	variable
<b>Nursing</b>							
Registered Nurse -Chemo	0000	Tasha Harris	MEDICAL NON	Active	PRN	Days	

**From:** [Suzan Campbell](#)  
**To:** [Ed Tardoni](#); [Barbara Sowada](#); [Irene Richardson](#); [Tami Love](#); [Kristy Nielson](#); [Kari Quickenden](#); [Amber Fisk](#)  
**Subject:** New Workplace Violence Prevention policy DRAFT  
**Date:** Tuesday, September 15, 2020 12:14:10 PM  
**Attachments:** [new workplace violence policy.docx](#)

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Good morning, attached is a draft of the Employee Policies-Workplace Violence Prevention. If approved this policy will replace the current Employee Policies-Workplace Anti-violence. Violence against healthcare workers is a huge concern across the country and it is rising at alarming rates. I have attached a couple of documents from OSHA regarding workplace violence and healthcare workers and I have asked RM, HR and Security to look the documents over and then work through the guidelines, checklist and assessments as a group to assess the hospital and see what other steps we need to take to make the hospital a safe environment for our staff. I have highlighted a section of the workplace violence prevention policy I need assistance with so I would request that we work through the draft policy at the HR Committee meeting Monday the 21<sup>st</sup>.  
Suzan

***Suzan Campbell, JD***

WSB # 5-2644

In House Counsel MHSC

1200 College Drive

Rock Springs, WY 82901

307-352-8162

[sucampbell@sweetwatermemorial.com](mailto:sucampbell@sweetwatermemorial.com)

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## EMPLOYEE POLICIES-WORKPLACE VIOLENCE PREVENTION

### PURPOSE

Memorial Hospital of Sweetwater County (MHSC) is committed to preventing workplace violence and to maintaining a safe work environment for our employees, contractors, students, and volunteers.

**Notices will be posted throughout the hospital which will state that “threats of or actual violence directed toward staff is not permitted and will not be tolerated. Assaults on healthcare workers is unacceptable behavior and Hospital Security will be called if a staff member is threatened with violence or is intimidated, coerced or mistreated.”**

### POLICY

MHSC has adopted the following guidelines to deal with workplace violence which has been defined by OSHA as “any act or threat of force against an employee that could result in a physical injury, psychological trauma, or stress.” MHSC will also implement a Workplace Violence Prevention Plan to further address workplace violence against healthcare workers.

#### Patients or Visitors

All patients, visitors, community members and business associates should be treated with courtesy and respect at all times. However, intimidation, threats of violence and incidents of actual violence by patients or visitors to staff will not be permitted and is not acceptable behavior and will be reported as soon as possible to a supervisor and/or security personnel. Security will take action to protect the staff member which may include ????. Is this what we do? How should we handle it? ED will be different than other departments

#### Employees

All employees, customers, vendors and business associates should be treated with courtesy and respect at all times. Employees are expected to refrain from fighting, "horseplay" or other conduct that may be dangerous to others. Conduct that threatens, intimidates or coerces another employee, customer, vendor or business associate will not be tolerated. MHSC resources may not be used to threaten, stalk or harass anyone at or outside the workplace. MHSC treats threats coming from a patient as it does other forms of violence.

Indirect or direct threats of violence, incidents of actual violence, and suspicious individuals or activities should be reported as soon as possible to a supervisor, security personnel, human resources (HR), Risk Management or any member of senior management. When reporting a threat or incident of violence, the employee should be as specific and detailed as possible. Employees should not place themselves in peril, nor should they attempt to intercede during an incident.



Employees should promptly inform the HR department of any protective or restraining order that they have obtained that lists the workplace as a protected area. Employees are encouraged to report safety concerns with regard to intimate partner violence. MHSC will not retaliate against employees making good-faith reports. MHSC is committed to supporting victims of intimate partner violence by providing referrals to the company's employee assistance program and community resources and providing time off for reasons related to intimate partner violence.

### *Weapons*

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 cause death or great bodily harm.

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.

### **Investigations and Enforcement**

MHSC will promptly and thoroughly investigate all reports of threats of violence or incidents of actual violence and of suspicious individuals or activities. The identity of the individual making a report will be protected as much as possible. MHSC will not retaliate against employees making good-faith reports of violence, threats, or suspicious individuals or activities. To maintain workplace safety and the integrity of its investigation, MHSC may suspend employees suspected of workplace violence or threats of violence, either with or without pay, pending investigation.

Any employee found to be responsible for threats of or actual violence or other conduct that is in violation of these guidelines will be subject to prompt disciplinary action up to and including termination of employment.

### **Workplace Violence Prevention Plan**

To further provide a safe working environment for our staff, MHSC will draft and implement a written program for workplace violence prevention, which will be incorporated into our employee safety and health program. The building blocks for developing an effective workplace **violence prevention program include:**

- (1) Management commitment and employee participation,
- (2) Worksite analysis,
- (3) Hazard prevention and control,
- (4) Safety and health training, and
- (5) Recordkeeping and program evaluation.

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#### Employees

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- (4) Safety and health training, and
- (5) Recordkeeping and program evaluation.

Submitted by Wyoming Hospital Association – Josh Hannes and Howard Labow

*Founded in 1979 and headquartered in Chicago, with bi-lingual enrollment representatives throughout the U.S., NES is the nation's premier provider of Government Tax Credits/Voluntary Benefits to the healthcare industry (see attached flyer). NES currently services over 1900 healthcare facilities and hospitals from coast to coast and we are in partnership with several state healthcare associations. Though not alone, the healthcare industry is constantly challenged by the impact of employee turnover. We recognize you are always exploring new ways to retain your valued employees. In furtherance of this objective, our efforts are focused on placing more money in your employees' pockets by educating them and providing hands-on guidance about claiming the Earned Income Tax Credit. This can mean thousands of dollars each year for a large percentage of the employees. Providing information on the credits from the Government will go a long way to help employees improve their lives while they are living on the low end of the wage scale... ultimately enhancing employee satisfaction and stabilizing retention...all at no cost to the hospital.*

*The Federal Government will also REFUND any earned income credit that was not claimed on an employee's tax returns for the past three years.*

*Below are links regarding this employee tax credit program:*

*<https://www.fool.com/retirement/2018/03/16/this-valuable-tax-break-could-put-6431-back-in-you.aspx>*

*[https://www.huffingtonpost.com/sally-greenberg/eitc-awareness-day-millio\\_b\\_14420300.html](https://www.huffingtonpost.com/sally-greenberg/eitc-awareness-day-millio_b_14420300.html)*

*NES also offers voluntary benefits, underwritten by Allstate, which have been designed to be of great benefit for lower paid healthcare employees (aides, dietary, housekeeping) who often live paycheck to paycheck. Employees are offered an opportunity to purchase various low cost insurance benefits on a voluntary basis, with no cost to the hospital. These benefits will provide protection/coverage for the substantial out of pocket high deductible expenses that are included in both employer group plans and the Government exchange policies.*

*We have actually replaced Colonial Life with Allstate in countless facilities across the U.S. for the following important reasons:*

*\*\*\* Allstate offers the employee more bang for their dollar than Colonial Life.*

*\*\*\* NES/Allstate provides the employee education/assistance with the Earned Income Credit current and "previous years" monies...whereby we are able to help secure valuable found money for many lower paid employees, who often live paycheck to paycheck. This service is provided at no cost to the facility. Numerous employees over the years have been very grateful for the assistance in recovering past years' IRS monies due them.*

If someone told you that you may be one of the more than five million Americans missing out on as much as \$6,269 in your year-end paycheck, you'd almost certainly dismiss it as a fantasy or fraud, right? What if I said that you could get that boost from the IRS just for doing your job? It definitely sounds too good to be true, I know.

Fortunately, millions of working families actually can get a significant check from the federal government, thanks to the Federal Earned Income Tax Credit (EITC). For more than 40 years, the EITC has been, by many accounts, the nation's most successful anti-poverty program. Last year, it lifted 6.5 million Americans out of poverty, including 3.3 million children, and reduced the severity of poverty for another 21.2 million qualifying workers. Studies show that the tax credit is used by working families to pay for necessary expenses like home and auto repairs and to boost earning power by getting more education. This in turn allows large numbers of single parents to leave welfare for work, saving taxpayers money.

Despite these benefits, more than 20 percent of people who qualify for the EITC fail to claim it. We think that's because many consumers are never made aware of the EITC due to a lack of reliable, affordable tax preparation resources in their communities.

January 27 is EITC Awareness Day, which is a perfect time to make sure that every American who qualifies for the EITC knows about it. That's why the National Consumers League is working to promote free tax preparation services like Baltimore's CASH Campaign, whose volunteers are ready to help educate the one in five workers who are

missing out on this benefit. The Baltimore CASH Campaign is one of the 12,000 [Volunteer Income Tax Assistance \(VITA\)](#) programs that the IRS relies on to help qualifying individuals prepare and file their taxes, free of charge.

Working families making less than \$64,000 per year can also take advantage of free name-brand tax preparation software offered through the IRS's [Free File program](#). An added benefit of using resources like VITAs and Free File is that they can help taxpayers navigate a new wrinkle this tax season. Because of a new law designed to protect consumers from tax identity fraud, the IRS will hold refund checks until February 15 for consumers claiming the EITC. This is important, because there are likely to be unscrupulous tax preparers who promise they can get EITC-qualified taxpayers their refunds sooner than February 15. In reality, any money a consumer gets before February 15 will probably be in the form of a refund anticipation loan, which comes loaded with predatory fees.

On EITC Awareness Day and throughout this tax season, let's make sure that the Earned Income Tax Credit gets the credit it's due. Working families should be able to keep 100 percent of the money they've earned. Thanks to programs like VITAs and IRS Free File, they can.

## **F&A COMMITTEE CHAIR REPORT TO THE BOARD SEPTEMBER 2020**

**Ed Tardoni (filled in as chair for Richard Mathey ) Marty Kelsey was invited to set in.**

The Finance and Audit Committee met in a Zoom format this month.

### **F&A DATA FOR THE MONTH**

The usual F&A reports are included in the Board packet.

### **AUDIT REPORT**

The auditors reviewed this year's draft audit report with the committee. They complimented hospital staff both on their cooperation and accuracy. They recognized that the Covid situation presented accounting challenges. They stated that hospital staff met those challenges successfully.

The auditors will present to the Board at the October meeting.

### **CAPITAL EXPENDITURES FOR BOARD CONSIDERATION.**

#### **FY 21-17**

##### **Unbudgeted expenditure in the amount of \$113,890**

Tasha Harris and Dr. Binks presented on this. There is a strong positive revenue stream associated with the expenditure. It also will allow patients to be treated at home instead of traveling to Salt Lake City for treatment. The committee, by unanimous vote, sends FY 21-23 to the Board with a due pass recommendation.

#### **FY 21-23**

##### **Budgeted expenditure in the amount of \$35,936**

Leslie Taylor presented on this. It is an item of equipment necessary for the MHSC Neurologist who is scheduled to be on board on November 9, 2020. There is a slight positive revenue stream associated with the equipment. It is estimated that one hundred and fifty procedures per year will be done using this equipment. The committee, by unanimous vote sends FY 21-23 to the Board with a due pass recommendation

### **STATE LAND INVESTMENT BOARD CAPITAL PROJECTS**

A considerable amount of capital has been approved by the Board related to awarded SLIB grants. The CEO has been authorized, by board vote, to proceed with the purchases and has done so. The committee discussed how to best document these expenditures and keep them consistent with standard procedures. Accordingly, an extensive package of capital forms using an SLIB extensions have been included in the October Board packet. The committee consensus is that the Board should consider a vote acknowledging receipt of the details of these purchases.

### **NEXT MEETING**

The next meeting will be October 25, 2020 at 1600 hours. Meeting will be by Zoom

## Capital Request Summary

Capital Request #

FY21-17

Name of Capital Request:

STEREOTACTIC CONE SYSTEM

Requestor/Department:

DR. JOSHUA BINKS, TASHA HARRIS/RADIATION ONCOLOGY

Sole Source Purchase: Yes or No

Reason: Compatible with current equipment

☐

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

Quotes/Bids/ Proposals received:

	Vendor	City	Amount
1.	VARIAN MEDICAL SYSTEMS	PALO ALTO, CA	\$102,890.00
2.	MOUNTAIN STATES MEDICAL PHYSICS	SANDY, UT	\$11,000.00
3.			

Recommendation:

VARIAN MEDICAL SYSTEMS - \$102,890.00

MOUNTAIN STATES - \$11,000.00



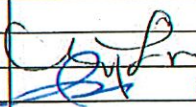
# Memorial Hospital

OF SWEETWATER COUNTY

<b># Assigned: FY 21 - 17</b>	
<b>Capital Request</b>	
<b>Instructions:</b> YOU MUST USE THE TAB KEY to navigate around this form to maintain the form's integrity. <b>Note:</b> When appropriate, attach additional information such as justification, underlying assumptions, multi-year projections and anything else that will help support this expenditure. Print out form and attach quotes and supporting documentation.	
<b>Department:</b> Radiation Oncology	<b>Submitted by:</b> Tasha Harris
<b>Date:</b> 8-10-2020	
<b>Provide a detailed description of the capital expenditure requested:</b> Stereotactic cone system, cone planning and cone commissioning.	
<b>Preferred Vendor:</b> Varian and Mountain States Medical Physics	
<b>Total estimated cost of project</b> (Check all required components and list related expense)	
1. Renovation 2. Equipment 3. Installation 4. Shipping 5. Accessories 6. Training 7. Travel costs 8. Other e.g. interfaces	\$ \$ 102,890 \$ 10,000 \$ \$ 1000 (Dose phantom rental) \$ Included \$ \$ \$ <b>Total Costs (add 1-8)</b> \$ 113,890
<b>Does the requested item:</b>	
Require annual contract renewal? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
Fit into existing space? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Explain:
Attach to a new service? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Explain:
Require physical plan modifications? If yes, list to the right: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Electrical HVAC Safety Plumbing Infrastructure (I/S cabling, software, etc.)
<b>Annualized impact on operations (if applicable):</b>	
<b>Increases/Decreases</b>	<b>Budgeted Item:</b>
Projected Annual Procedures (NEW not existing) 5-10	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
Revenue per procedure	\$ 75,000
Projected gross revenue	\$ 525,000 (based on 7 procedures)
Projected net revenue	\$ 262,500
Projected Additional FTE's	
Salaries	\$
Benefits	\$
Maintenance	\$
Supplies	\$
<b>Total Annual Expenses</b>	\$ 1000
<b>Net Income/(loss) from new service</b>	\$ 261,500
<b>Review and Approvals</b>	
Submitted by: Tasha Harris	Verified enough Capital to purchase
Department Leader	<input type="checkbox"/> YES <input type="checkbox"/> NO
Vice President of Operations	<input type="checkbox"/> YES <input type="checkbox"/> NO
Chief Financial Officer	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Chief Executive Officer	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Board of Trustees Representative	<input type="checkbox"/> YES <input type="checkbox"/> NO

# of bids obtained? 2

☒ Copies and/or Summary attached.  
 If no other bids obtained, reason:

 9-17-2020  
 9-23-2020



## OTHER CONSIDERATIONS

This equipment would enable us to treat very small lesions in the brain using a very high dose in fewer treatments. SRS/SRT treatment is a higher quality treatment as less normal brain receives the treatment dose providing the patient a higher quality of life after the treatment. A very high dose is delivered in 1-5 fractions to the tumor, resulting in more cell kill and higher probability of control over conventional whole brain treatments.

Within less than one year of purchasing and using this system to treat SRS patients it would pay for itself and generate revenue. Being able to offer SRS treatments to patients is the direction that things are going in the field of Radiation Oncology. If we want to stay on top of offering the best treatment options to patients and giving our Radiation Oncologist the opportunity to keep up with this advanced treatment technique, which will mean higher job satisfaction for him, then it would be a wise investment for us to make. Also, we have numerous patients who have to travel to Huntsman to receive this kind of treatment. Once we can offer that here, it will relieve a lot of burden off of our patients to be able to receive this cutting edge treatment close to home.

We got another bid from another company that sells cone systems and then found out that their cone system is not compatible with our treatment planning system. We are very limited to our main vendor because not a lot of companies make this specific system that is compatible with other systems. For the commissioning we are going with our physics group because it is best practice to have the physicists that will be working with the equipment be the same ones to commission it.

Varian - \$102,890.00

Mountain States - \$11,000.00

Total Capital - \$113,890.00

**Tasha Harris** Digitally signed by Tasha Harris  
Date: 2018.03.08 14:21:07 -07'00'

Submitted by: Signature

**8-10-2020**

Date



## Cones and Eclipse Cone Planning

Quotation Number - 2020-273803

All pricing and configurations contained within quotations supplied to Sweetwater Memorial Hospital by Varian Medical Systems are confidential and only intended for Sweetwater Memorial Hospital. Disclosure or release to others outside of Sweetwater Memorial Hospital's network, either manually or electronically, without the prior written consent of Varian Medical Systems, is strictly prohibited.





## Memorial Hospital of Sweetwater County ("Customer")

Tasha Harris  
1200 COLLEGE DR  
ROCK SPRINGS, Wyoming 82901 United States  
Tel : 307-352-8381  
Email : tharris@sweetwatermemorial.com

## Varian Medical Systems, Inc.

Jesse Kruser  
US Product Sales Support Rep  
3100 Hansen Way  
Palo Alto, CA 1028 US  
Tel : +1 650 424 6102  
Email : jesse.kruser@varian.com

\*\*\* Confidential - Proposal is intended for Recipient and Recipient's Site Representatives Only \*\*\*

## Quote Information

Quotation Number :	2020-273803	Sales PO Required :	Yes
Quotation Valid Until :	December 18, 2020	Customer Procurement Contact	Needed
Customer Requested Delivery Date :	March 26, 2021	Name :	
Quotation Date :	August 24, 2020		

## Sales

Incoterms :	US1: FOB: Origin
Payment Terms :	30 days net
Down Payment :	30.00%
Shipment :	65.00%
Acceptance :	5.00%

For orders equal or less than \$75K, 100% upon shipment, net 30.

## Quotation Total

Quotation Total : US \$102,890.00

Finance support available: For lease and finance plans, call Toby Wann, Director Varian Customer Finance - 408.221.4294 / Toby.Wann@varian.com

## Terms and Conditions

**Products and Services:** Customer's access to and use of the Products, Support Services and Services (except Software-as-a-Service or Subscription Services) as indicated in this Quotation are subject to and governed by: (a) the Varian Terms and Conditions of Sale (Form RAD 1652) at: [https://www.varian.com/1652V\\_OCT\\_2018](https://www.varian.com/1652V_OCT_2018) and (b) any Schedules, Exhibits and/or additional terms (including third party terms) contained, attached, referenced or otherwise indicated in this Quotation. All terms and conditions provided in the website link listed in item (a) above are incorporated by reference and form part of the contract between Varian and Customer.

If there is a separate written agreement (e.g. master agreement) in effect between the parties that expressly provides for and governs the purchase and sale of the specific Products, Support Services, Services, Software-as-a-Service and/or SubscriptionService set forth in this Quotation, such written agreement shall govern. Hard copies of the referenced terms and conditions and any additional terms indicated will be provided to Customer upon request.

## For and on behalf of Customer

Authorized Representative :

Title :

Date

## Varian Medical Systems, Inc.

Authorized Representative :

Title :

Date

## Quotation Summary

**varian**

### Offered Products (Sales)

ICVI Upgrade for H295878 (H295878)

Included

Eclipse Cone Planning

Included



Item	Description	Qty
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## Section 1 ICVI Upgrade for H295878 (H295878)

### 1.1 UPG Integrated Collimator Verification & Interlock System (ICVI) for Clinac® 1

The Integrated Collimator Verification & Interlock (ICVI) system upgrade provides electronically verified conical collimators for use in radiosurgical treatment delivery.

**Features:**

- Conical collimator mounting system with integrated mount verification
- Set of 7 conical collimators with integrated verification
- Conical collimator set (in mm diameter): 4, 5, 7.5, 10, 12.5, 15 and 17.5
- ICVI QA Toolkit

**Prerequisites:**

- Clinac® v9.1 or higher
- ARIA® oncology information systems for radiation oncology v11.0 or higher or compatible third-party oncology information system
- Eclipse™ Cone Planning v11.0 or higher or compatible third-party treatment planning system
- Custom Coding
- 4DITC v11.0 or higher
- PortalVision™ aS1000
- One of the following: Millennium™ MLC or HD120™ MLC

**Customer Responsibilities:**

- Verify compatibility with third-party treatment planning systems if applicable
- Verify compatibility with third-party oncology information systems if applicable

### 1.2 Custom Coding for HE Clinac (verified) 1

Verified Custom Coding for the high energy Clinac is a beam-shaping accessory management option to be used with C-series Clinac and ARIA Information System. Verified Custom Coding with ARIA provides system-level recognition of the requirement for a beam-shaping accessory in treatment planning and verification of the presence of the required accessory at the time of treatment in ARIA. Accessory recognition is enhanced with verification of the presence of one of more standard or custom accessories, identification of each type of accessory, the accessory slot position, and the orientation of the accessory in the slot as defined by the treatment plan. Appropriate external communication and automated verification software included with Custom Coding upgrade.

**Features:**

- Unique labels for each beam-shaping device
- Treatment initiated by matching labels at Clinac and control console
- Accessory interlock to ensure proper system setup and configuration

**Prerequisites:**

- High Energy C-Series Clinac
- C-series Clinac Type III Accessories
- C-Series Clinac s/w 6.2 or above
- ARIA 8.6 & above, OR
- Customer must verify MOSAIQ compatibility with Elekta For ARIA sites with multiple C-Series machines, if one machine is upgraded to custom coding, all plans containing, applicators, etc. must specify the custom codes. If patients are transferred to a non-custom-coded machine, the plans would need to be modified to remove the custom coded accessories.

It is strongly recommended that custom coding be purchase and installed on all machines within the department

4-day upgrade time; 90-day warranty beginning on day of acceptance.

## Section 2 Eclipse Cone Planning

### 2.1 Eclipse Cone Planning Package 1

Eclipse™ Cone Planning.

**Features:**

- Eclipse Cone Planning for one (1) user
- Treatment prescription entry
- Predefined arc set templates
- MR Pre-Planning

Item	Description	Qty
	Prerequisites:	
	• Eclipse Planner Desktop	
2.2	<b>INCL ED:EC222 Eclipse Cone Planning</b>	1
	The Eclipse Cone Planning course is included with the purchase of Eclipse Cone Planning.	
	• Includes Tuition and Materials for ONE person	
	• Customer is responsible for all travel expenses (airfare, hotel, rental car, meals and travel Incidentals)	
	• Training is non-refundable and non-transferable	
	• Offer is valid for 18 months after installation of product The Eclipse Cone Planning training program covers stereotactic radiosurgery and/or stereotactic radiotherapy for treatment of intracranial tumors and/or lesions, SRS components and workflow, Eclipse SRS localization, QA and Eclipse Cone Dose Calculation algorithm and Beam data requirements. Designed For Medical Physicist, Radiation Oncologist and Dosimetrist	
	Location: Las Vegas, NV	
	Software Version V11 - for other versions please contact your training coordinator.	
2.3	<b>Non-Clinical Eclipse Cone Planning Packa</b>	1
	Non-Clinical Eclipse™ Cone Planning	
	Features:	
	• Non-Clinical Eclipse Cone Planning for one (1) user	
	• Non-Clinical Treatment prescription entry	
	• Non-Clinical Predefined arc set templates	
	• Non-Clinical MR Pre-Planning	

varian

Quotation Total

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Quotation Total

US \$102,890.00

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## **MOUNTAIN STATES MEDICAL PHYSICS, LLC**

3019 E Hiddenwood Dr.  
Sandy, UT 84092  
Phone: 804-691-7682

### **SRS Commissioning Services**

TO: Tasha Harris, Director

FROM: Joshua Bryant MS DABR

RE: Quote for cone based SRS Commissioning for Sweetwater Memorial Hospital.

DATE: August 31st, 2020

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With decades of combined experience and expertise, Mountain States Medical Physics, LLC is positioning to become the premier medical physics group in the mountain west.

#### **Offered Terms**

- \$10,000 to satisfy the physics requirements for SRS Commissioning.
- SRS Commissioning will include mechanical and dosimetric testing of cone system, and verification of the treatment planning and record and verify systems. E2E testing will be performed and staff trained where applicable. Commissioning report to be provided upon completion.
- Sun Nuclear Stereophan SRS Phantom, for output and alignment verification, is available to rent for \$1000.
- Rates inclusive of travel expenses.
- Hospital to be invoiced upon completion, payable in 10 business days.

Joshua Bryant MS DABR Physicist  
Mountain States Medical Physics  
Managing Partner

## Capital Request Summary

**Capital Request #**

FY21-23

**Name of Capital Request:**

Natus Electromyography (EMG) cart

**Requestor/Department:**

Leslie Taylor/Clinic

**Sole Source Purchase: Yes or No**

**Reason:** Physician preferred



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

**Quotes/Bids/ Proposals received:**

	Vendor	City	Amount
1.	Natus Medical	Middleton, WI	\$35,936.00
2.			
3.			

**Recommendation:**

Natus Medical - \$35,936.00





<b># Assigned: FY 21 - 23</b>	
<b>Capital Request</b>	
<b>Instructions:</b> YOU MUST USE THE TAB KEY to navigate around this form to maintain the form's integrity. <b>Note:</b> When appropriate, attach additional information such as justification, underlying assumptions, multi-year projections and anything else that will help support this expenditure. Print out form and attach quotes and supporting documentation.	
<b>Department:</b> Neurology-P. Pawar	<b>Submitted by:</b> Ltaylor
<b>Date:</b> 9-23-2020	
<b>Provide a detailed description of the capital expenditure requested:</b>  The request is for the Natus EMG cart machine request by Dr. Prachi Pawar to provide Electromyography procedures to assess the health of muscle and nerve cells.	
<b>Preferred Vendor:</b> Natus Medical	
<b>Total estimated cost of project</b> (Check all required components and list related expense)	
1. Renovation 2. Equipment 3. Installation 4. Shipping 5. Accessories 6. Training 7. Travel costs 8. Other e.g. interfaces	\$ \$ 35,936.00 \$ \$ \$ \$ \$ \$ <b>Total Costs (add 1-8)</b> \$ 35,936.00
<b>Does the requested item:</b>	
Require annual contract renewal? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Fit into existing space? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Explain:
Attach to a new service? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Explain: <b>EMG Services</b>
Require physical plan modifications? If yes, list to the right: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Electrical HVAC Safety Plumbing Infrastructure (I/S cabling, software, etc.)
<b>Annualized impact on operations (if applicable):</b> <b>Increases/Decreases</b>	
Projected Annual Procedures (NEW not existing) 150	<b>Budgeted Item:</b> <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Revenue per procedure \$ 310.00	# of bids obtained? 1
Projected gross revenue \$ 46,500.00	<input checked="" type="checkbox"/> Copies and/or Summary attached. <b>If no other bids obtained, reason:</b> Physician preference
Projected net revenue \$ 26,505.00	
Projected Additional FTE's	
Salaries \$	
Benefits \$	
Maintenance \$	
Supplies \$ 1800.00	
<b>Total Annual Expenses</b> \$ 1800.00	
<b>Net Income/(loss) from new service</b> \$ 24,705.00	
<b>Review and Approvals</b>	
Submitted by: Ltaylor/Prachi Pawar	Verified enough Capital to purchase
Department Leader	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Executive Leader	<input type="checkbox"/> YES <input type="checkbox"/> NO
Chief Financial Officer	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Chief Executive Officer	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Board of Trustees Representative	<input type="checkbox"/> YES <input type="checkbox"/> NO

#### OTHER CONSIDERATIONS

Electromyography (EMG) is a diagnostic test that assesses the health of muscles and the nerve cells that control them (motor neurons). The EMG results can reveal nerve dysfunction, muscle dysfunction or problems with nerve to muscle signal transmission.

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

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

Potential net revenue per year is based on 150 procedures per month and would be \$24,705/year.

The product has a one year warranty that can be extended annually for up to 6 years thereafter.

Capital - \$35,936.00

Submitted by: Signature

Date





# System Proposal

<b>Quote for:</b>		<b>Quote Date:</b> 09/23/2020 <b>Quote Number:</b> 1-BFQZQX <b>Rev:</b> 4  <b>Quote Expiration:</b> 09/30/2020  <b>SalesRep:</b> Brandon Light brandon.light@natus.com
<b>Account:</b> 8884	MEMORIAL HOSPITAL SWEETWATER COUNTY 1200 COLLEGE DRIVE ROCK SPRINGS WY 82901	
<b>Contact:</b> PRACHI PAWAR		
<b>Phone:</b> 3074487732		
<b>Email:</b>		
<b>Contract Name:</b>	NATUS MEDICAL'S TERMS AND CONDITIONS APPLY TO THIS QUOTATION	
<b>Payment Terms:</b>	NET 30	

SYS 1: MOD EDX						
Part Number	Description	Qty	List Price	Extended List Price	Quote / Contracted Price	Ext. Quote / Contracted Price
US-CONFIG	US Configuration	1	\$0.00	\$0.00	\$0.00	\$0.00
982A0597	EDX US / Canada + Base Unit	1	\$11,450.00	\$11,450.00	\$11,450.00	\$11,450.00
842-689700	EDX Windows 10 Desktop PC	1	\$1,911.00	\$1,911.00	\$1,911.00	\$1,911.00
021223	MS Office Pro Plus 2016	1	\$318.00	\$318.00	\$318.00	\$318.00
842-678300	North AMERICAN POWER CORD	1	\$0.00	\$0.00	\$0.00	\$0.00
828-069400	Viking Master Software	1	\$3,335.00	\$3,335.00	\$3,335.00	\$3,335.00
842-689400	Viking EDX Control Panel	1	\$1,476.00	\$1,476.00	\$1,476.00	\$1,476.00
842-691800	EDX 3 channel Amplifier	1	\$6,777.00	\$6,777.00	\$6,777.00	\$6,777.00
515-018800	WR50 Comfort Plus Probe Kit	1	\$1,137.00	\$1,137.00	\$1,137.00	\$1,137.00
071-423500	Adult Straight Stimulus Head for Comfort Probes	1	\$128.00	\$128.00	\$128.00	\$128.00
071-423700	Pediatric Straight Stimulus Head for Comfort Probes	1	\$128.00	\$128.00	\$128.00	\$128.00
071-423800	Pediatric Angled Stimulus Head for Comfort Probes	1	\$128.00	\$128.00	\$128.00	\$128.00
828-060900	NCS	1	\$1,148.00	\$1,148.00	\$1,148.00	\$1,148.00
828-060800	EMG	1	\$1,148.00	\$1,148.00	\$1,148.00	\$1,148.00
828-060700	Reference Help	1	\$1,148.00	\$1,148.00	\$1,148.00	\$1,148.00
842-690100	UB4 Cart	1	\$1,923.00	\$1,923.00	\$1,923.00	\$1,923.00
842-691200	UB4 Cart Monitor Arm Option	1	\$492.00	\$492.00	\$492.00	\$492.00
515-018500	EDX Amplifier Holder & Arm	1	\$410.00	\$410.00	\$410.00	\$410.00
842-670400	Nicolet 115V Isobox	1	\$655.00	\$655.00	\$655.00	\$655.00
842-677300	24 Inch LCD Monitor - with Speaker	1	\$1,542.00	\$1,542.00	\$1,542.00	\$1,542.00
842-671600	Ink Jet Printer	1	\$257.00	\$257.00	\$257.00	\$257.00
222-448101	Single Footswitch (Nicolet EMG)	1	\$147.00	\$147.00	\$147.00	\$147.00
268-411800	EMG Surface Temperature Probe	1	\$278.00	\$278.00	\$278.00	\$278.00
<b>Totals for this system</b>			<b>\$35,936.00</b>	<b>\$35,936.00</b>	<b>\$35,936.00</b>	<b>\$35,936.00</b>
SYS 2: Training Included						
Part Number	Description	Qty	List Price	Extended List Price	Quote / Contracted Price	Ext. Quote / Contracted Price
SVC800TRAIN_INC	Training Included	1	\$0.00	\$0.00	\$0.00	\$0.00
SVC800INSTALL_INC	Installation Included	1	\$0.00	\$0.00	\$0.00	\$0.00
<b>Totals for this system</b>			<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>



## System Proposal

MEMORIAL HOSPITAL SWEETWATER COUNTY  
1-BFQZQX R4  
09/30/2020

System Totals					
Reference Number	Description	List Price	Extended List Price	Quote / Contracted Price	Ext. Quote / Contracted Price
SYST 1	MOD EDX	\$35,936.00	\$35,936.00	\$35,936.00	\$35,936.00
SYST 2	Training Included Installation Included	\$0.00	\$0.00	\$0.00	\$0.00
Total Pricing		\$35,936.00	\$35,936.00	\$35,936.00	\$35,936.00
Total System Proposal				USD	\$35,936.00

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





## System Proposal

MEMORIAL HOSPITAL SWEETWATER COUNTY  
1-BFQZQX R4  
09/30/2020

### SUBMIT THIS ORDER TO:

Natus Medical Incorporated  
3150 Pleasant View Road  
Middleton, WI 53562

FAX TO: 608-829-8775

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

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

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

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

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

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

Please note this quotation includes benefits and/or promotional programs that may constitute a "discount or other reduction in price" for purposes of the federal anti-kickback statute, 42 USC §1320a-7b(b). To the extent required by the statute or by the discount safe harbor regulations at 42 CFR §1001.952(h), you will be responsible for fully and accurately reporting in applicable cost reports and providing information upon request to Medicare, Medicaid and other federal health care programs on all discounts or other price reductions provided under this Program.

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

Signature:	Date:
------------	-------

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

## Required Customer Information For Order Processing

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

Name of Organization: \_\_\_\_\_

Bill To Address: \_\_\_\_\_

Ship To Address: \_\_\_\_\_

(☐ Same As Above) \_\_\_\_\_

Is it a residential delivery? ☐ YES ☐ NO

Key Contact: \_\_\_\_\_

Email: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Federal Tax ID number required for shipping address: \_\_\_\_\_

(Customs Will Verify Prior To Releasing Order)

Accounting Contact Name: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Do you have a loading dock? ☐ YES ☐ NO

Is there a loading dock with a forklift? ☐ YES ☐ NO

Is a lift gate required for delivery? ☐ YES ☐ NO

Is the driver required for inside delivery? ☐ YES ☐ NO

Is the driver required to breakdown the skid? ☐ YES ☐ NO

Can the receivers building accommodate a 53ft trailer? ☐ YES ☐ NO

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



## General Site Readiness Terms and Conditions

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

<b>Physical Infrastructure Requirements</b> Note: Natus personnel are not authorized nor will perform any perforation of walls, floors or ceilings, the customer agrees to have resources available during the installation to complete these tasks	Installed areas are accessible and available at 8am on the first day of the planned installation. Access to review stations if required.
	Natus equipment onsite and placed in installation area by 8am on the first day of the planned installation. Site responsible for the disposal of all packaging material associated with their order.
	Electrical outlets in place and tested
	Placement of station PC's and monitors clearly marked and the area clear of obstructions
	All wiring (video/audio and network) run and terminated
<b>Additional requirements if applicable to quote</b>	Site has provided a floor plan drawings and measurements of all areas
	Alarm relays wired in and tested
	Cabinets mounted
	Ladder available if installing wall or ceiling mounted cameras
	Biomed/IT resources available during installation
<b>Network Infrastructure Requirements</b>	IP addresses assigned/provided
	Network drops run and active
	Data, SQL or Citrix server installed
<b>Additional requirements if applicable to quote</b>	HL7 requirements defined
	Studies from existing equipment archived and/or backed up
<b>Data Requirements</b>	Training time reserved for:
	<ul style="list-style-type: none"> <li>• Users</li> <li>• Physicians</li> <li>• Nurses</li> </ul>
	Training room or space reserved
	Montage/Photoc/HV settings available for EEG installations
	Report formats sent to Natus for Sleep installations
<b>Training</b>	Customer Project Manager (required)
	IT
	EEG Tech
	Physician
	Nurse Manager (for all patient affected areas)
	Facilities
	Biomedical Engineers
<b>Additional requirements if applicable to quote</b>	Electrical/Carpentry

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

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

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

FY#	GRANT	DESCRIPTION	AMOUNT
FY21-5	CRF-01	MOBILE LAB 37FT	\$ 278,250.00
FY21-6, FY21-7	CRF-10	UVC ROBOTS	\$ 248,594.00
FY21-8, FY21-9	CRF-05	LABORATORY EQUIPMENT	\$ 227,531.00
FY21-11	CRF-61	MOB ENTRANCE	\$ 289,900.00
FY21-12	CRF-59	UVG	\$ 463,875.00
FY21-13	CRF-77	HVAC	\$ 2,314,000.00
FY21-18	CRF-58	MOBILE LAB 26FT	\$ 197,250.00
FY21-19	CRF-62	LAB ANALYZERS (2)	\$ 366,000.00
FY21-20, FY21-21, FY21-22	CRF-64	WALK-IN CLINIC LAB EQUIPMENT	\$ 311,304.00
not capital	CRF-20	PAYROLL	\$ 672,894.00
not capital	CRF-63	PAPRS (50)	\$ 77,155.00
waiting on request	CRF-60	PRONING BEDS	\$ 79,000.00
			\$ 5,525,753.00





<b># Assigned: FY 2021 - 5</b>	
<b>Capital Request</b>	
<b>Instructions:</b> YOU MUST USE THE TAB KEY to navigate around this form to maintain the form's integrity. <b>Note:</b> When appropriate, attach additional information such as justification, underlying assumptions, multi-year projections and anything else that will help support this expenditure. Print out form and attach quotes and supporting documentation.	
<b>Department:</b> Microbiology - 700	<b>Submitted by:</b> Mary Fischer MT(ASCP)
<b>Date:</b> 7/26/2020	
<b>Provide a detailed description of the capital expenditure requested:</b> A 37 ft mobile unit to be used as a mobile lab, mobile clinic or swabbing station.	
<b>Preferred Vendor:</b> Magnum Mobile	
<b>Total estimated cost of project</b> (Check all required components and list related expense)	
1. Renovation 2. Equipment 3. Installation 4. Shipping 5. Accessories 6. Training 7. Travel costs 8. Other e.g. interfaces	\$ \$ 219,500 \$ \$ \$ 42,700. \$ \$ \$ <b>Total Costs (add 1-8)</b> \$ 262,000.
<b>Does the requested item:</b>	
Require annual contract renewal? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
Fit into existing space? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Explain:
Attach to a new service? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Explain: Potentially, as the mobile unit can be used as a mobile clinic or mobile laboratory serving remote sites.
Require physical plan modifications? If yes, list to the right: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Electrical \$ HVAC \$ Safety \$ Plumbing \$ Infrastructure (I/S cabling, software, etc.) \$
<b>Annualized impact on operations (if applicable):</b>	
<b>Increases/Decreases</b>	
Projected Annual Procedures (NEW not existing)	
Revenue per procedure	\$
Projected gross revenue	\$
Projected net revenue	\$
Projected Additional FTE's	
Salaries	\$
Benefits	\$
Maintenance	\$
Supplies	\$
<b>Total Annual Expenses</b>	\$
<b>Net Income/(loss) from new service</b>	\$
<b>Budgeted Item:</b>	
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
# of bids obtained? _____	
<input type="checkbox"/> Copies and/or Summary attached. <b>If no other bids obtained, reason:</b> Preferred vendor.  approved SLIB Grant 07/16/2020	
<b>Review and Approvals</b>	
Submitted by:	Verified enough Capital to purchase
Department Leader	<input type="checkbox"/> YES <input type="checkbox"/> NO
Executive Leader	<input type="checkbox"/> YES <input type="checkbox"/> NO
Chief Financial Officer	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Chief Executive Officer	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Board of Trustees Representative	<input type="checkbox"/> YES <input type="checkbox"/> NO

#### OTHER CONSIDERATIONS

This 37 foot mobile unit was awarded to MHSC through the State Loan and Investment Board (SLIB) grant in July 2020. This mobile unit was requested to assist in providing a safe, social distancing environment for staff and patients during the COVID-19 pandemic. Prior to the pandemic, the laboratory met the needs of the community. The waiting room/reception area was deemed adequate for our patient population. When the COVID-19 pandemic was announced, all areas of the hospital were scrutinized with social distancing of paramount importance. The outpatient laboratory was moved to an off-site location on the hospital campus displacing other important functions. Also, the swabbing station was moved to the main entrance of the hospital, deemed the safest place for collection of these specimens. The mobile unit can be used either as a swabbing station or a mobile outpatient lab and allow the current locations to be occupied as originally intended.

Currently, the hospital has collected close to 4,000 specimens for SARS-Co-V testing. Most testing is sent out to the reference laboratory, seriously impeding the ability to provide rapid turnaround time for this test. The ability to rapidly and accurately perform testing for COVID-19 assists with public health initiatives and may prevent the spreading of the virus.

Submitted by Mary Fischer, MT(ASCP)  
7/26/2020

  
Submitted by: Signature

  
Date





<b># Assigned: FY 21 - 6</b>	
<b>Capital Request</b>	
<b>Instructions:</b> YOU MUST USE THE TAB KEY to navigate around this form to maintain the form's integrity. <b>Note:</b> When appropriate, attach additional information such as justification, underlying assumptions, multi-year projections and anything else that will help support this expenditure. Print out form and attach quotes and supporting documentation.	
<b>Department:</b> Emergency Management	<b>Submitted by:</b> Tami Love
<b>Date:</b> 07/22/2020	
<b>Provide a detailed description of the capital expenditure requested:</b>	
Skytron Model 2280 (2) Disinfection Robot w/ SmartDosage UV & Steri-Trak Digital Documentation (120V)	
<b>Preferred Vendor:</b> Johnson's Medical	
<b>Total estimated cost of project</b> (Check all required components and list related expense)	
1. Renovation	\$
2. Equipment	\$ 140,800.00
3. Installation	\$
4. Shipping	\$ 1,088.58
5. Accessories	\$ 4,343.00
6. Training	\$
7. Travel costs	\$
8. Other e.g. interfaces	\$
<b>Total Costs (add 1-8)</b>	<b>\$ 146,231.58</b>
<b>Does the requested item:</b>	
Require annual contract renewal? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
Fit into existing space? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Explain:
Attach to a new service? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Explain:
Require physical plan modifications? If yes, list to the right: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Electrical \$ HVAC \$ Safety \$ Plumbing \$ Infrastructure (I/S cabling, software, etc.) \$
<b>Annualized impact on operations (if applicable):</b>	
<b>Increases/Decreases</b>	<b>Budgeted Item:</b>
Projected Annual Procedures (NEW not existing)	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
Revenue per procedure \$	# of bids obtained? 1
Projected gross revenue \$	<input type="checkbox"/> Copies and/or Summary attached.
Projected net revenue \$	<b>If no other bids obtained, reason:</b>
Projected Additional FTE's	approved SLIB Grant
Salaries \$	07/16/2020
Benefits \$	
Maintenance \$	
Supplies \$	
<b>Total Annual Expenses</b> \$	
<b>Net Income/(loss) from new service</b> \$	
<b>Review and Approvals</b>	
<b>Submitted by:</b>	<b>Verified enough Capital to purchase</b>
Department Leader	<input type="checkbox"/> YES <input type="checkbox"/> NO
Executive Leader	<input type="checkbox"/> YES <input type="checkbox"/> NO
Chief Financial Officer	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Chief Executive Officer	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Board of Trustees Representative	<input type="checkbox"/> YES <input type="checkbox"/> NO



## OTHER CONSIDERATIONS

Based on the current HVAC system and the air output variations of patient rooms, the policy for RTC with potential airborne diseases with infectious particles is up to two hours. After this time has elapsed, EVS staff may enter the room, wearing necessary PPE including N95 masks, to perform decontamination cleaning. Because of the two hour wait time and the recommendations from the CDC, the hospital has been looking for additional ways to decontaminate patient rooms that is quicker, more efficient, and provides better safety measures for the EVS staff.

The hospital would like to purchase three UVC disinfecting robots to assist the EVS staff in disinfecting patient rooms. These robots have been tested against the SARS-CoV (the virus strand causing Covid-19) with a successful decontamination time of up to 10 minutes. To disinfect, the robots will be sent into a patient room once it's been vacated and will be activated wirelessly via a mobile control system. Once in motion, the robot's technology scans the room to deliver the proper treatment duration to deactivate pathogens, delivering the highest UV dose over the shortest period based on the room size, layout, robot placement, and output. It will digitally document treatment data in real time and can execute a whole-room treatment without needing to be repositioned. In addition to disinfecting the room, the robots also have a sensor to automatically shut off the UV light in case of accidental room entry.

Implementing the UVC disinfecting robots into the hospital's RTC policy will provide an additional layer of necessary decontamination to prevent the spread of Covid-19 and other airborne pathogens while decreasing the room turnover time. The hospital is looking to purchase two 1140 Sentry Units and one 3200 Max Unit to be utilized in the Emergency Department, ICU, and Operating Rooms.

The 1140 Sentry Unit- This smaller unit is a flexible option that can be utilized in various areas of the hospital. In addition to decontaminating patient rooms, the robot includes a removable emitter to allow UVC decontamination and disinfection in smaller areas including ambulances and life-flight helicopters. This feature is unique and desirable as the hospital may have to transport Covid-19 patients to other hospitals if the hospital doesn't have the capacity to effectively treat Covid-19 patients.

Using the whole-room UVC disinfecting system to fight the Covid-19 pandemic will prevent the spread of the virus while protecting the staff in the process. In addition to staff safety, these robots will significantly decrease room turnover time as the 1140 Sentry Unit thoroughly decontaminates a room in as little as 10 minutes and the 3200 Max Unit thoroughly decontaminates a room in as little as 5 minutes. With the quick turnaround times, EVS staff will be able to enter the patient rooms quicker, while decreasing the need for PPE, resulting in more room availability for potential and positive Covid-19 patients.

Submitted by: Signature

Date



<b># Assigned: FY 21 - 7</b>	
<b>Capital Request</b>	
<b>Instructions:</b> YOU MUST USE THE TAB KEY to navigate around this form to maintain the form's integrity. <b>Note:</b> When appropriate, attach additional information such as justification, underlying assumptions, multi-year projections and anything else that will help support this expenditure. Print out form and attach quotes and supporting documentation.	
<b>Department:</b> Emergency Management	<b>Submitted by:</b> Tami Love
<b>Date:</b> 07/22/2020	
<b>Provide a detailed description of the capital expenditure requested:</b>	
Skytron Model 3200 Disinfection Robot w/ SmartDosage UV & Steri-Trak Digital Documentation (120V)	
<b>Preferred Vendor:</b> Johnson's Medical	
<b>Total estimated cost of project (Check all required components and list related expense)</b>	
1. Renovation 2. Equipment 3. Installation 4. Shipping 5. Accessories 6. Training 7. Travel costs 8. Other e.g. interfaces	\$ \$ 101,600.00 \$ \$ 762.00 \$ \$ \$ \$ <b>Total Costs (add 1-8)</b> \$ 102,362.00
<b>Does the requested item:</b>	
Require annual contract renewal? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
Fit into existing space? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Explain:
Attach to a new service? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Explain:
Require physical plan modifications? If yes, list to the right: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Electrical HVAC Safety Plumbing Infrastructure (I/S cabling, software, etc.)
<b>Annualized impact on operations (if applicable):</b>	
<b>Increases/Decreases</b>	
<b>Budgeted Item:</b>	
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
<b>Projected Annual Procedures (NEW not existing)</b>	
Revenue per procedure	\$
Projected gross revenue	\$
Projected net revenue	\$
Projected Additional FTE's	
Salaries	\$
Benefits	\$
Maintenance	\$
Supplies	\$
<b>Total Annual Expenses</b>	\$
<b>Net Income/(loss) from new service</b>	\$
<b># of bids obtained?</b> 1	
<input type="checkbox"/> Copies and/or Summary attached. <b>If no other bids obtained, reason:</b> approved SLIB Grant 07/16/2020	
<b>Review and Approvals</b>	
<b>Submitted by:</b>	<b>Verified enough Capital to purchase</b>
Department Leader	<input type="checkbox"/> YES <input type="checkbox"/> NO
Executive Leader	<input type="checkbox"/> YES <input type="checkbox"/> NO
Chief Financial Officer	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Chief Executive Officer	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Board of Trustees Representative	<input type="checkbox"/> YES <input type="checkbox"/> NO



## OTHER CONSIDERATIONS

Based on the current HVAC system and the air output variations of patient rooms, the policy for RTC with potential airborne diseases with infectious particles is up to two hours. After this time has elapsed, EVS staff may enter the room, wearing necessary PPE including N95 masks, to perform decontamination cleaning. Because of the two hour wait time and the recommendations from the CDC, the hospital has been looking for additional ways to decontaminate patient rooms that is quicker, more efficient, and provides better safety measures for the EVS staff.

The hospital would like to purchase three UVC disinfecting robots to assist the EVS staff in disinfecting patient rooms. These robots have been tested against the SARS-CoV (the virus strand causing Covid-19) with a successful decontamination time of up to 10 minutes. To disinfect, the robots will be sent into a patient room once it's been vacated and will be activated wirelessly via a mobile control system. Once in motion, the robot's technology scans the room to deliver the proper treatment duration to deactivate pathogens, delivering the highest UV dose over the shortest period based on the room size, layout, robot placement, and output. It will digitally document treatment data in real time and can execute a whole-room treatment without needing to be repositioned. In addition to disinfecting the room, the robots also have a sensor to automatically shut off the UV light in case of accidental room entry.

Implementing the UVC disinfecting robots into the hospital's RTC policy will provide an additional layer of necessary decontamination to prevent the spread of Covid-19 and other airborne pathogens while decreasing the room turnover time. The hospital is looking to purchase two 1140 Sentry Units and one 3200 Max Unit to be utilized in the Emergency Department, ICU, and Operating Rooms.

The 3200 Max Unit- This larger unit is more of a stationary option that will be predominately left in the Emergency Department. It has the highest single emitter UVC dose and the fastest decontamination cycles.

Using the whole-room UVC disinfecting system to fight the Covid-19 pandemic will prevent the spread of the virus while protecting the staff in the process. In addition to staff safety, these robots will significantly decrease room turnover time as the 1140 Sentry Unit thoroughly decontaminates a room in as little as 10 minutes and the 3200 Max Unit thoroughly decontaminates a room in as little as 5 minutes. With the quick turnaround times, EVS staff will be able to enter the patient rooms quicker, while decreasing the need for PPE, resulting in more room availability for potential and positive Covid-19 patients.

Submitted by: Signature

Date





<b># Assigned: FY 2021 - 8</b>	
<b>Capital Request</b>	
<b>Instructions:</b> YOU MUST USE THE TAB KEY to navigate around this form to maintain the form's integrity. <b>Note:</b> When appropriate, attach additional information such as justification, underlying assumptions, multi-year projections and anything else that will help support this expenditure. Print out form and attach quotes and supporting documentation.	
<b>Department:</b> Microbiology - 700	<b>Submitted by:</b> Mary Fischer MT(ASCP)
<b>Date:</b> 7/26/2020	
<b>Provide a detailed description of the capital expenditure requested:</b>	
The request is for the addition of two additional modules to be added to our existing BioFire Torch system. With the addition of the two additional torch modules, our laboratory will have a total of four modules available for testing.	
<b>Preferred Vendor:</b> BioFireDX	
<b>Total estimated cost of project</b> (Check all required components and list related expense)	
1. Renovation	\$
2. Equipment	\$ 45,000.00
3. Installation	\$
4. Shipping	\$
5. Accessories	\$
6. Training	\$
7. Travel costs	\$
8. Other e.g. interfaces	\$
<b>Total Costs (add 1-8)</b>	\$ 45,000.00
<b>Does the requested item:</b>	
Require annual contract renewal? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Fit into existing space?	Explain:
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Attach to a new service?	Explain:
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
Require physical plan modifications?	Electrical
If yes, list to the right:	HVAC
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Safety
	Plumbing
	Infrastructure (I/S cabling, software, etc.)
	\$
	\$
	\$
	\$
	\$
	\$
<b>Annualized impact on operations (if applicable):</b>	
<b>Increases/Decreases</b>	
<b>Projected Annual Procedures (NEW not existing)</b>	
Revenue per procedure	\$
Projected gross revenue	\$
Projected net revenue	\$
Projected Additional FTE's	
Salaries	\$
Benefits	\$
Maintenance	\$
Supplies	\$
<b>Total Annual Expenses</b>	\$
<b>Net Income/(loss) from new service</b>	\$
<b>Review and Approvals</b>	
<b>Submitted by:</b>	<b>Verified enough Capital to purchase</b>
Department Leader	<input type="checkbox"/> YES <input type="checkbox"/> NO
Executive Leader	<input type="checkbox"/> YES <input type="checkbox"/> NO
Chief Financial Officer	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Chief Executive Officer	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Board of Trustees Representative	<input type="checkbox"/> YES <input type="checkbox"/> NO
<b>Budgeted Item:</b> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO  # of bids obtained? _____  <input type="checkbox"/> Copies and/or Summary attached. <b>If no other bids obtained, reason:</b> Preferred vendor. Modules purchased to add to existing testing platform.  approved SLIB Grant 07/16/2020	

#### OTHER CONSIDERATIONS

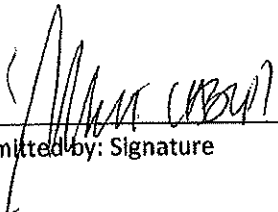
This analyzer was awarded to MHSC through the State Loan and Investment Board (SLIB) grant in July 2020. The primary reason this analyzer was awarded is it's ability to test for SARS-CoV-2, the causative virus implicated in the COVID-19 pandemic. The BioFire Torch analyzer tests SARS-CoV-2 at a high sensitivity and specificity, providing accurate results in about an hour. The addition of the two modules will enhance rapid testing capabilities, effectively doubling testing capacity and minimizing delays.


Currently, the hospital has collected close to 4,000 specimens for SARS-CoV testing. Most testing is sent out to the reference laboratory, seriously impeding the ability to provide rapid turnaround time for this test. The ability to rapidly and accurately perform testing for COVID-19 assists with public health initiatives and may prevent the spreading of the virus.

In addition to SARS-CoV-2 testing, this analyzer performs rapid identification of numerous organisms in a variety of specimens. Current testing includes the following;

- \* Identification of organisms in positive blood cultures, assisting with sepsis diagnosis
- \* Identification of organisms in Cerebral Spinal Fluid, important in the diagnosis of meningitis, a life threatening condition.
- \* Identification of organisms in stool specimens
- \* The respiratory panel currently performed in house also tests for the SARS-CoV 2 virus under FDA Emergency Use Authorization.

Submitted by Mary Fischer, MT(ASCP)  
7/26/2020

  
Submitted by: Signature

  
Date





<b># Assigned: FY 2021 - 9</b>	
<b>Capital Request</b>	
<b>Instructions:</b> YOU MUST USE THE TAB KEY to navigate around this form to maintain the form's integrity. <b>Note:</b> When appropriate, attach additional information such as justification, underlying assumptions, multi-year projections and anything else that will help support this expenditure. Print out form and attach quotes and supporting documentation.	
<b>Department:</b> Laboratory 700	<b>Submitted by:</b> Mary Fischer, MT(ASCP)
<b>Date:</b> 7/26/2020	
<b>Provide a detailed description of the capital expenditure requested:</b> GeneXpert 16/16 molecular testing platform.	
<b>Preferred Vendor:</b> Cepheid	
<b>Total estimated cost of project</b> (Check all required components and list related expense)	
1. Renovation	\$ 162,996.00
2. Equipment	\$ 200.00
3. Installation	\$ 995.00 (UPS back-up)
4. Shipping	\$
5. Accessories	\$
6. Training	\$
7. Travel costs	\$
8. Other e.g. interfaces	\$
<b>Total Costs (add 1-8)</b> \$ 182,531.00	
<b>Does the requested item:</b>	
Require annual contract renewal? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
Fit into existing space?	Explain:
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Attach to a new service?	Explain:
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
Require physical plan modifications?	Electrical
If yes, list to the right:	HVAC
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Safety
	Plumbing
	Infrastructure (I/S cabling, software, etc.)
<b>Annualized impact on operations (if applicable):</b>	
<b>Increases/Decreases</b>	
Projected Annual Procedures (NEW not existing)	
Revenue per procedure	\$
Projected gross revenue	\$
Projected net revenue	\$
Projected Additional FTE's	
Salaries	\$
Benefits	\$
Maintenance	\$
Supplies	\$
<b>Total Annual Expenses</b>	\$
<b>Net Income/(loss) from new service</b>	\$
<b>Review and Approvals</b>	
Submitted by:	Verified enough Capital to purchase
Department Leader	<input type="checkbox"/> YES <input type="checkbox"/> NO
Executive Leader	<input type="checkbox"/> YES <input type="checkbox"/> NO
Chief Financial Officer	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Chief Executive Officer	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Board of Trustees Representative	<input type="checkbox"/> YES <input type="checkbox"/> NO
<b>Budgeted Item:</b> YES <input checked="" type="checkbox"/> NO # of bids obtained? _____ <input type="checkbox"/> Copies and/or Summary attached. <b>If no other bids obtained, reason:</b> Preferred vendor approved SLIB Grant 07/16/2020	

#### OTHER CONSIDERATIONS

This analyzer was awarded to MHSC through the State Loan and Investment Board (SLIB) grant in July 2020. The primary reason this analyzer was awarded is it's ability to test for SARS-CoV-2, the causative virus implicated in the COVID-19 pandemic. The Cepheid analyzer tests SARS-CoV-2 at a high sensitivity and specificity, providing accurate results in about an hour. The first year is covered under warranty. Included in the grant was one year of service coverage at \$17,340.00.

Currently, the hospital has collected close to 4,000 specimens for SARS-CoV testing. Most testing is sent out to the reference laboratory, seriously impeding the ability to provide rapid turnaround time for this test. The ability to rapidly and accurately perform testing for COVID-19 assists with public health initiatives and may prevent the spreading of the virus.

In addition to SARS-CoV-2 testing, this analyzer performs molecular testing on a variety of specimens. Current testing performed on this analyzer includes CT/NG testing, Clostridioides difficile testing and MRSA nasal testing. There is consideration for adding GBS and Trichomonas testing.

Submitted by Mary Fischer, MT(ASCP)  
7/26/2020

Submitted by: Signature

Date



# Assigned: FY 21 - 11

## Capital Request

**Instructions:** YOU MUST USE THE TAB KEY to navigate around this form to maintain the form's integrity.

**Note:** When appropriate, attach additional information such as justification, underlying assumptions, multi-year projections and anything else that will help support this expenditure. Print out form and attach quotes and supporting documentation.

**Department:** FACILITIES

**Submitted by:** Tami Love

**Date:** 08/17/2020

**Provide a detailed description of the capital expenditure requested:**

MOB Front entrance remodel

**Preferred Vendor:** Plan One/Architects and general contractor to be chosen

**Total estimated cost of project** (Check all required components and list related expense)

- |                          |               |
|--------------------------|---------------|
| 1. Renovation            | \$ 265,000.00 |
| 2. Equipment             | \$            |
| 3. Installation          | \$            |
| 4. Shipping              | \$            |
| 5. Accessories           | \$            |
| 6. Training              | \$            |
| 7. Travel costs          | \$            |
| 8. Other e.g. interfaces | \$ 24,900.00  |

**Total Costs (add 1-8)** \$ 289,900.00

**Does the requested item:**

Require annual contract renewal? ☐ YES ☒ NO

Fit into existing space?

☒ YES ☐ NO

Explain:

Attach to a new service?

☐ YES ☐ NO

Explain:

Require physical plan modifications?

If yes, list to the right:

☒ YES ☐ NO

Electrical

HVAC

Safety

Plumbing

Infrastructure (I/S cabling, software, etc.)

\$

\$

\$

\$

\$

**Annualized impact on operations (if applicable):**

**Increases/Decreases**

Projected Annual Procedures (NEW not existing)

Revenue per procedure

\$

Projected gross revenue

\$

Projected net revenue

\$

Projected Additional FTE's

Salaries

\$

Benefits

\$

Maintenance

\$

Supplies

\$

**Total Annual Expenses**

\$

**Net Income/(loss) from new service**

\$

**Budgeted Item:**

☐ YES ☒ NO

# of bids obtained? 1

☐ Copies and/or Summary attached.

**If no other bids obtained, reason:**

SLIB grant funding

## Review and Approvals

Submitted by:

Verified enough Capital to purchase

Department Leader

☐ YES ☐ NO

Executive Leader

☐ YES ☐ NO

Chief Financial Officer

☒ YES ☐ NO

Chief Executive Officer

☒ YES ☐ NO

Board of Trustees Representative

☐ YES ☐ NO

*C. Love*  
10-1-2020

## OTHER CONSIDERATIONS

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

Submitted by: Signature

Date

<b># Assigned: FY 21 - 12</b>	
<b>Capital Request</b>	
<b>Instructions:</b> YOU MUST USE THE TAB KEY to navigate around this form to maintain the form's integrity. <b>Note:</b> When appropriate, attach additional information such as justification, underlying assumptions, multi-year projections and anything else that will help support this expenditure. Print out form and attach quotes and supporting documentation.	
<b>Department:</b> FACILITIES	<b>Submitted by:</b> Tami Love
<b>Date:</b> 08/17/2020	
<b>Provide a detailed description of the capital expenditure requested:</b> Ultraviolet Germicidal Irradiation for air handling units	
<b>Preferred Vendor:</b> Plan One/Architects and general contractor to be chosen	
<b>Total estimated cost of project</b> (Check all required components and list related expense)	
1. Renovation	\$ 421,705.00
2. Equipment	\$
3. Installation	\$
4. Shipping	\$
5. Accessories	\$
6. Training	\$
7. Travel costs	\$
8. Other e.g. interfaces	\$ 42,170.00
<b>Total Costs (add 1-8)</b>	<b>\$ 463,875.00</b>
<b>Does the requested item:</b>	
Require annual contract renewal? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
Fit into existing space? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Explain:
Attach to a new service? <input type="checkbox"/> YES <input type="checkbox"/> NO	Explain:
Require physical plan modifications? If yes, list to the right: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Electrical \$ HVAC \$ Safety \$ Plumbing \$ Infrastructure (I/S cabling, software, etc.) \$
<b>Annualized impact on operations (if applicable):</b>	
<b>Increases/Decreases</b>	
Projected Annual Procedures (NEW not existing)	
Revenue per procedure	\$
Projected gross revenue	\$
Projected net revenue	\$
Projected Additional FTE's	
Salaries	\$
Benefits	\$
Maintenance	\$
Supplies	\$
<b>Total Annual Expenses</b>	<b>\$</b>
<b>Net Income/(loss) from new service</b>	<b>\$</b>
<b>Budgeted Item:</b>	
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
# of bids obtained? <u>1</u>	
<input type="checkbox"/> Copies and/or Summary attached. <b>If no other bids obtained, reason:</b> SLIB grant funding	
<b>Review and Approvals</b>	
Submitted by:	Verified enough Capital to purchase
Department Leader	<input type="checkbox"/> YES <input type="checkbox"/> NO
Executive Leader	<input type="checkbox"/> YES <input type="checkbox"/> NO
Chief Financial Officer	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Chief Executive Officer	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Board of Trustees Representative	<input type="checkbox"/> YES <input type="checkbox"/> NO

## OTHER CONSIDERATIONS

### OVERVIEW

1. The air handling systems, associated ductwork, terminal units, and controls components, commonly referred to as the Heating, Ventilation and Air-Conditioning (HVAC) systems, function as the "lungs" of the facility to provide air change rates, filtration, pressure relationships and baseline infection control for the breathing air within the entire facility.
2. The Building HVAC systems provide an essential feature in combating airborne communicable disease.
3. Air Filtration equipment currently deployed in the units meet the required levels for both pre-filters and final filters.
4. Additional pathogen control technology is available that can enhance the ability of the air handling systems to manage and minimize circulation of airborne pathogens within the building. The facility is requesting funding to implement enhanced features.

Submitted by: Signature

Date



		<b># Assigned: FY 21 - 13</b>
<b>Capital Request</b>		
<b>Instructions:</b> YOU MUST USE THE TAB KEY to navigate around this form to maintain the form's integrity. <b>Note:</b> When appropriate, attach additional information such as justification, underlying assumptions, multi-year projections and anything else that will help support this expenditure. Print out form and attach quotes and supporting documentation.		
<b>Department:</b> FACILITIES	<b>Submitted by:</b> Tami Love	<b>Date:</b> 08/17/2020
<b>Provide a detailed description of the capital expenditure requested:</b> HVAC upgrade project in response to COVID-19		
<b>Preferred Vendor:</b> Plan One/Architects and general contractor to be chosen		
<b>Total estimated cost of project</b> (Check all required components and list related expense)		
1. Renovation		\$ 2,103,670.00
2. Equipment		\$
3. Installation		\$
4. Shipping		\$
5. Accessories		\$
6. Training		\$
7. Travel costs		\$
8. Other e.g. interfaces		\$ 210,330.00
<b>Total Costs (add 1-8)</b>		<b>\$ 2,314,000.00</b>
<b>Does the requested item:</b>		
Require annual contract renewal? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		
Fit into existing space?	Explain:	
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
Attach to a new service?	Explain:	
<input type="checkbox"/> YES <input type="checkbox"/> NO		
Require physical plan modifications?	Electrical	\$
If yes, list to the right:	HVAC	\$
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Safety	\$
	Plumbing	\$
	Infrastructure (I/S cabling, software, etc.)	\$
<b>Annualized impact on operations (if applicable):</b>		<b>Budgeted Item:</b>
<b>Increases/Decreases</b>		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
Projected Annual Procedures (NEW not existing)		
Revenue per procedure	\$	# of bids obtained? <u>1</u>
Projected gross revenue	\$	
Projected net revenue	\$	<input type="checkbox"/> Copies and/or Summary attached. <b>If no other bids obtained, reason:</b> SLIB grant funding
Projected Additional FTE's		
Salaries	\$	
Benefits	\$	
Maintenance	\$	
Supplies	\$	
<b>Total Annual Expenses</b>	<b>\$</b>	
<b>Net Income/(loss) from new service</b>	<b>\$</b>	
<b>Review and Approvals</b>		
Submitted by:	Verified enough Capital to purchase	
Department Leader	<input type="checkbox"/> YES <input type="checkbox"/> NO	
Executive Leader	<input type="checkbox"/> YES <input type="checkbox"/> NO	
Chief Financial Officer	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Chief Executive Officer	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Board of Trustees Representative	<input type="checkbox"/> YES <input type="checkbox"/> NO	

## OTHER CONSIDERATIONS

### OVERVIEW

1. The Building HVAC systems provide an essential feature in combating airborne communicable disease but can also transport pathogens within the building.
2. In response to the pandemic, ASHRAE, the industry group that leads research, development, and authors standards related to HVAC system design, has engaged in and recently released study information confirming that HVAC systems can transmit the Covid-19 virus within the building through the return duct systems. Associated guidance recommends minimizing air recirculation to the greatest extent possible by increasing delivered outdoor air quantities.
3. The facility contains five (5) air handlers dating from 1975 to 1985 that are due for replacement. Two of these units were originally configured as 100% outdoor air units to provide replacement air for kitchen and laundry spaces. The remaining three (3) AHU's are 'recirculation' units that can currently accommodate outdoor air delivery rates based on Code required ratios of approximately 30-40% of total supply air volumes. The recirculation units cannot accommodate the latest recommendations from ASHRAE.
4. Replacement of all three units is recommended to improve the hospital's ability to operate with minimum recirculation; however, the relief funds available to support expenses directly related to Covid must be expensed by 12/15/2020.
5. The MHSC Covid Taskforce has developed a strategy to tackle two of the five air handlers within the above timeframe.

Submitted by: Signature

Date

# Memorial Hospital

OF SWEETWATER COUNTY

<b># Assigned: FY 2021 - 18</b>	
<b>Capital Request</b>	
<b>Instructions:</b> YOU MUST USE THE TAB KEY to navigate around this form to maintain the form's integrity. <b>Note:</b> When appropriate, attach additional information such as justification, underlying assumptions, multi-year projections and anything else that will help support this expenditure. Print out form and attach quotes and supporting documentation.	
<b>Department:</b> Laboratory	<b>Submitted by:</b> Mary Fischer MT(ASCP)
<b>Date:</b> 9/14/2020	
<b>Provide a detailed description of the capital expenditure requested:</b> A 26 ft mobile unit to be used as a mobile lab, mobile clinic or swabbing station.	
<b>Preferred Vendor:</b> Magnum Mobile	
<b>Total estimated cost of project</b> (Check all required components and list related expense)	
1. Renovation	\$
2. Equipment	\$ 138,500
3. Installation	\$
4. Shipping	\$
5. Accessories	\$ 36,750
6. Training	\$
7. Travel costs	\$
8. Other e.g. interfaces	\$
<b>Total Costs (add 1-8)</b> \$ 175,250	
<b>Does the requested item:</b>	
Require annual contract renewal? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
Fit into existing space?	Explain:
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Attach to a new service?	Explain:
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Potentially, as the mobile unit can be used as a mobile clinic or mobile laboratory serving remote sites.
Require physical plan modifications?	Electrical
If yes, list to the right:	HVAC
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Safety
	Plumbing
	Infrastructure (I/S cabling, software, etc.)
	\$
	\$
	\$
	\$
	\$
<b>Annualized impact on operations (if applicable):</b>	
<b>Increases/Decreases</b>	
<b>Budgeted Item:</b>	
<input type="checkbox"/> YES <input type="checkbox"/> NO	
<b>Projected Annual Procedures (NEW not existing)</b>	
Revenue per procedure	\$
Projected gross revenue	\$
Projected net revenue	\$
Projected Additional FTE's	
Salaries	\$
Benefits	\$
Maintenance	\$
Supplies	\$
<b>Total Annual Expenses</b>	\$
<b>Net Income/(loss) from new service</b>	\$
<b>Review and Approvals</b>	
<b>Submitted by:</b>	<b>Verified enough Capital to purchase</b>
Department Leader	<input type="checkbox"/> YES <input type="checkbox"/> NO
Executive Leader	<input type="checkbox"/> YES <input type="checkbox"/> NO
Chief Financial Officer	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Chief Executive Officer	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Board of Trustees Representative	<input type="checkbox"/> YES <input type="checkbox"/> NO
# of bids obtained? _____ <input type="checkbox"/> Copies and/or Summary attached. If no other bids obtained, reason: Awarded by the SLIB board to our hospital. Preferred vendor. SLIB CRF-58	

## OTHER CONSIDERATIONS

This 26 foot mobile unit was awarded to MHSC through the State Loan and Investment Board (SLIB) grant in August 2020. This mobile unit was requested to assist in providing a safe, social distancing environment for staff and patients during the COVID-19 pandemic. Prior to the pandemic, the laboratory met the needs of the community. The waiting room/reception area was deemed adequate for our patient population. When the COVID-19 pandemic was announced, all areas of the hospital were scrutinized with social distancing of paramount importance. The outpatient laboratory was moved to an off-site location on the hospital campus displacing other important functions. Also, the swabbing station was moved to the main entrance of the hospital, deemed the safest place for collection of these specimens. The mobile unit can be used either as a swabbing station or a mobile outpatient lab and allow the current locations to be occupied as originally intended.

Currently, the hospital has collected over 6,800 specimens for SARS-Co-V testing. Testing is currently performed in house on the Abbott and Cepheid platforms in addition to sending out to the state lab and reference laboratory. The ability to rapidly and accurately perform testing for COVID-19 assists with public health initiatives and may prevent the spreading of the virus.

Submitted by Mary Fischer, MT(ASCP)  
9/14/2020

Submitted by: Signature

Date

# Memorial Hospital

OF SWEETWATER COUNTY

<b># Assigned: FY 2021 - 19</b>	
<b>Capital Request</b>	
<b>Instructions:</b> YOU MUST USE THE TAB KEY to navigate around this form to maintain the form's integrity. <b>Note:</b> When appropriate, attach additional information such as justification, underlying assumptions, multi-year projections and anything else that will help support this expenditure. Print out form and attach quotes and supporting documentation.	
<b>Department:</b> Laboratory 700	<b>Submitted by:</b> Mary Fischer, MT(ASCP)
<b>Date:</b> 9/14/2020	
<b>Provide a detailed description of the capital expenditure requested:</b> 2 Vitros XT 7600 analyzers as replacement for our two chemistry analyzers originally purchased in 2015. One serves as a primary analyzer and the other serves as the secondary analyzer or backup during downtime.	
<b>Preferred Vendor:</b> Ortho Clinical Diagnostics	
<b>Total estimated cost of project</b> (Check all required components and list related expense)	
1. Renovation	\$
2. Equipment	\$ 471,000
3. Installation	\$
4. Shipping	\$ 5,000
5. Accessories	\$
6. Training	\$
7. Travel costs	\$
8. Other e.g. interfaces	\$ (-110,000 trade in for current 5600's and
<b>Total Costs (add 1-8)</b> \$ 366,000	
<b>Does the requested item:</b>	
Require annual contract renewal? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
Fit into existing space?	Explain:
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Attach to a new service?	Explain:
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
Require physical plan modifications?	Electrical
If yes, list to the right:	HVAC
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Safety
	Plumbing
	Infrastructure (I/S cabling, software, etc.)
<b>Annualized impact on operations (if applicable):</b>	
<b>Increases/Decreases</b>	
<b>Projected Annual Procedures (NEW not existing)</b>	
Revenue per procedure	\$
Projected gross revenue	\$
Projected net revenue	\$
Projected Additional FTE's	
Salaries	\$
Benefits	\$
Maintenance	\$
Supplies	\$
<b>Total Annual Expenses</b>	\$
<b>Net Income/(loss) from new service</b>	\$
<b>Budgeted Item:</b>	
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
# of bids obtained? _____	
<input type="checkbox"/> Copies and/or Summary attached. <b>If no other bids obtained, reason:</b> Preferred vendor SLIB ORF-42	
<b>Review and Approvals</b>	
<b>Submitted by:</b>	<b>Verified enough Capital to purchase</b>
Department Leader	<input type="checkbox"/> YES <input type="checkbox"/> NO
Executive Leader	<input type="checkbox"/> YES <input type="checkbox"/> NO
Chief Financial Officer	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Chief Executive Officer	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Board of Trustees Representative	<input type="checkbox"/> YES <input type="checkbox"/> NO

#### OTHER CONSIDERATIONS

These chemistry analyzers used in the analysis of blood and body fluid specimens to assist providers in the diagnosis of disease. These analyzers use state of the art technology to perform routine and esoteric blood chemistry analysis including glucose, liver function, kidney function, cardiac function, thyroid function and other important tests. These analyzers perform COVID-19 Antibody testing (IgG and IgM), important in the management of the current pandemic. This testing assists public health entities with contact tracing and public health functions. This request was part of the SLIB grant process in August 2020.

Submitted by Mary Fischer, MT(ASCP)  
9/14/2020

Submitted by: Signature

Date

# Memorial Hospital

OF SWEETWATER COUNTY

<b># Assigned: FY 2021 - 20</b>	
<b>Capital Request</b>	
<b>Instructions:</b> YOU MUST USE THE TAB KEY to navigate around this form to maintain the form's integrity. <b>Note:</b> When appropriate, attach additional information such as justification, underlying assumptions, multi-year projections and anything else that will help support this expenditure. Print out form and attach quotes and supporting documentation.	
<b>Department:</b> Laboratory	<b>Submitted by:</b> Mary Fischer, MT(ASCP) <b>Date:</b> 9/15/2020
<b>Provide a detailed description of the capital expenditure requested:</b> Requesting a chemistry analyzer for the College Hill Family, Occupational Medicine and Extended Hours Clinic. This analyzer will perform routine and stat blood chemistry test including enzymes, electrolytes, blood sugar, proteins, kidney function and liver function testing at that location.	
<b>Preferred Vendor:</b> Ortho Clinical Diagnostics	
<b>Total estimated cost of project</b> (Check all required components and list related expense)	
1. Renovation	\$
2. Equipment	\$ 75,000
3. Installation	\$
4. Shipping	\$
5. Accessories	\$ 3,000
6. Training	\$
7. Travel costs	\$
8. Other e.g. interfaces	\$
<b>Total Costs (add 1-8)</b> \$ 78,000	
<b>Does the requested item:</b>	
Require annual contract renewal? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Fit into existing space? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<b>Explain:</b> The floor model analyzer will fit at the College Hill location in a room adjacent to the lab.
Attach to a new service? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<b>Explain:</b>
Require physical plan modifications? If yes, list to the right: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Electrical \$ HVAC \$ Safety \$ Plumbing \$ Infrastructure (I/S cabling, software, etc.) \$
Potential modifications to electrical.	
<b>Annualized impact on operations (if applicable):</b>	
<b>Increases/Decreases</b>	
Projected Annual Procedures (NEW not existing)	
Revenue per procedure	\$
Projected gross revenue	\$
Projected net revenue	\$
Projected Additional FTE's	
Salaries	\$
Benefits	\$
Maintenance	\$
Supplies	\$
<b>Total Annual Expenses</b>	\$
<b>Net Income/(loss) from new service</b>	\$
<b>Budgeted Item:</b>	
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
# of bids obtained? 1	
<input type="checkbox"/> Copies and/or Summary attached. <b>If no other bids obtained, reason:</b> Same manufacturer as the main lab, an advantage for reagent/inventory management, training and operation. SUB CRF-064	
<b>Review and Approvals</b>	
Submitted by:	Verified enough Capital to purchase
Department Leader	<input type="checkbox"/> YES <input type="checkbox"/> NO
Executive Leader	<input type="checkbox"/> YES <input type="checkbox"/> NO
Chief Financial Officer	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Chief Executive Officer	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Board of Trustees Representative	<input type="checkbox"/> YES <input type="checkbox"/> NO

#### OTHER CONSIDERATIONS

The Ortho XT 3400 offers state of the art technology and can perform routine and stat chemistry testing including liver function, kidney function, blood sugar, electrolytes and proteins. Features include;

Reduced patient sample size, as low as 2.7  $\mu$ L

Improved Interference detection

Covers 90% of typical chemistry lab tests in a compact footprint

Increased reliability, requiring calibration every six months or with a lot change

No water source is required for this analyzer.

Ortho will provide a technical specialist to assist our staff with implementation. Current analyzers at the hospital are made by the same preferred manufacturer. This allows for consistency in training, patient testing, correlations and reagent management.

Current volume for chemistry testing is approximately 200 chemistry panels per month. Estimated annual reagent cost for performing testing on this analyzer is \$6,600.

The analyzer is covered under warranty for year 1. After that, there will be an annual commitment for a service agreement of \$16,975 per year for years 2-5. The service agreement allows for any preventative maintenance, replacement parts and other unexpected maintenance at a fixed cost.

This analyzer purchase was made possible by utilizing the SLIB grant process and approved by the SLIB board in August 2020.

submitted by Mary Fischer, MT(ASCP)  
9/15/2020

  
Submitted by: Signature

  
Date



# Memorial Hospital

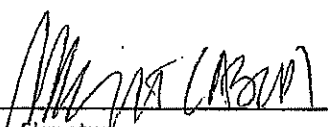
OF SWEETWATER COUNTY

<b># Assigned: FY 2021 - 21</b>	
<b>Capital Request</b>	
<b>Instructions:</b> YOU MUST USE THE TAB KEY to navigate around this form to maintain the form's integrity. <b>Note:</b> When appropriate, attach additional information such as justification, underlying assumptions, multi-year projections and anything else that will help support this expenditure. Print out form and attach quotes and supporting documentation.	
<b>Department:</b> Laboratory 700	<b>Submitted by:</b> Mary Fischer, MT(ASCP)
<b>Date:</b> 8/27/2020	
<b>Provide a detailed description of the capital expenditure requested:</b>  The microscope is used to review blood cells and count white blood cell differentials for blood smears and urine sediments.	
<b>Preferred Vendor:</b> Olympus	
<b>Total estimated cost of project</b> (Check all required components and list related expense)	
1. Renovation	\$
2. Equipment	\$ 10,217.18
3. Installation	\$
4. Shipping	\$
5. Accessories	\$
6. Training	\$
7. Travel costs	\$
8. Other e.g. interfaces	\$
<b>Total Costs (add 1-8)</b> \$ 10,217.18	
<b>Does the requested item:</b>	
Require annual contract renewal? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
Fit into existing space?	Explain:
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Attach to a new service?	Explain:
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
Require physical plan modifications?	Electrical
If yes, list to the right:	HVAC
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Safety
	Plumbing
	Infrastructure (I/S cabling, software, etc.)
<b>Annualized impact on operations (if applicable):</b>	
<b>Increases/Decreases</b>	
<b>Projected Annual Procedures (NEW not existing)</b>	
Revenue per procedure	\$
Projected gross revenue	\$
Projected net revenue	\$
Projected Additional FTE's	
Salaries	\$
Benefits	\$
Maintenance	\$
Supplies	\$
<b>Total Annual Expenses</b>	\$
<b>Net Income/(loss) from new service</b>	\$
<b>Budgeted Item:</b>	
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
# of bids obtained? 1	
<input checked="" type="checkbox"/> Copies and/or Summary attached. If no other bids obtained, reason: Preferred vendor per Medical Director.  <div style="font-family: cursive; font-size: 1.2em;">SLIB CRF-064</div>	
<b>Review and Approvals</b>	
Submitted by:	Verified enough Capital to purchase
Department Leader	<input type="checkbox"/> YES <input type="checkbox"/> NO
Vice President of Operations	<input type="checkbox"/> YES <input type="checkbox"/> NO
Chief Financial Officer	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Chief Executive Officer	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Board of Trustees Representative	<input type="checkbox"/> YES <input type="checkbox"/> NO

#### OTHER CONSIDERATIONS

The microscope is used by the techs on a daily basis to perform white blood cell differentials, smear reviews and red blood cell morphology, platelet review, microscopic urine sediment analysis, post vasectomy studies and body fluid analysis. This microscope will have phase and polarization capabilities, useful for identification of crystals in body fluids and urine. It is an essential piece of equipment in day to day laboratory testing.

submitted by Mary Fischer, MT(ASCP)  
8/27/2020

Submitted by:  Signature

  
Date



# Memorial Hospital

OF SWEETWATER COUNTY

		<b># Assigned: FY 2021 - 22</b>
<b>Capital Request</b>		
<b>Instructions:</b> YOU MUST USE THE TAB KEY to navigate around this form to maintain the form's integrity. <b>Note:</b> When appropriate, attach additional information such as justification, underlying assumptions, multi-year projections and anything else that will help support this expenditure. Print out form and attach quotes and supporting documentation.		
<b>Department:</b> Laboratory	<b>Submitted by:</b> Mary Fischer, MT(ASCP)	<b>Date:</b> 9/15/2020
<b>Provide a detailed description of the capital expenditure requested:</b> Sysmex XN 1000- Requesting a hematology analyzer for the College Hill Family, Occupational Medicine and Extended Hours Clinic. This analyzer will perform complete blood counts, automated differentials and body fluid analysis at that location.		
<b>Preferred Vendor:</b> Sysmex		
<b>Total estimated cost of project</b> (Check all required components and list related expense)		
1. Renovation	\$	
2. Equipment	\$ 77,367.00	
3. Installation	\$	
4. Shipping	\$	
5. Accessories	\$	
6. Training	\$	
7. Travel costs	\$	
8. Other e.g. interfaces	\$	
<b>Total Costs (add 1-8)</b>		<b>\$ 77,367.00</b>
<b>Does the requested item:</b>		
Require annual contract renewal? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
Fit into existing space?	Explain:	
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
Attach to a new service?	Explain:	
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Purchasing analyzer to service all patients at the College Hill location, but consideration initially began as a service to the patients at the extended hours clinic.	
Require physical plan modifications?	Electrical	\$
If yes, list to the right:	HVAC	\$
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Safety	\$
	Plumbing	\$
Potential modifications to electrical.	Infrastructure (I/S cabling, software, etc.)	\$
<b>Annualized impact on operations (if applicable):</b>		<b>Budgeted Item:</b>
<b>Increases/Decreases</b>		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
Projected Annual Procedures (NEW not existing)		
Revenue per procedure	\$	# of bids obtained? 1
Projected gross revenue	\$	
Projected net revenue	\$	<input checked="" type="checkbox"/> Copies and/or Summary attached.
Projected Additional FTE's		<b>If no other bids obtained, reason:</b>
Salaries	\$	Preferred vendor
Benefits	\$	
Maintenance	\$	
Supplies	\$	
<b>Total Annual Expenses</b>	\$	
<b>Net Income/(loss) from new service</b>	\$	
<b>Review and Approvals</b>		
<b>Submitted by:</b>	<b>Verified enough Capital to purchase</b>	
Department Leader	<input type="checkbox"/> YES <input type="checkbox"/> NO	
Executive Leader	<input type="checkbox"/> YES <input type="checkbox"/> NO	
Chief Financial Officer	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Chief Executive Officer	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Board of Trustees Representative	<input type="checkbox"/> YES <input type="checkbox"/> NO	

#### OTHER CONSIDERATIONS

The Sysmex XN 1000 offers a complete CBC with a 6-part differential, body fluid capabilities and a compact foot print. It is ideal for the lab at the College Hill location. Testing on this analyzer includes WBC, RBC, hemoglobin, hematocrit, platelet counts.

Sysmex provides a field service engineer for implementation. Current analyzers at the hospital are made by the same preferred manufacturer. This allows for consistency in training, patient testing, correlations and reagent management.

This purchase made possible by the SLIB grant award in August 2020

submitted by Mary Fischer, MT(ASCP) 9/15/2020

\_\_\_\_\_  
Submitted by: Signature

\_\_\_\_\_  
Date

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

**Wednesday~ September 30, 2020**

**4:00 p.m.**

**Teleconference**

**Voting Members:**

Richard Mathey, Chairman  
Ed Tardoni  
Irene Richardson  
Tami Love  
Jan Layne

**Non-Voting Members:**

Ron Cheese  
Angel Bennett  
Kristy Nielson  
Ann Clevenger

Kari Quickenden  
Dr. Larry Lauridsen  
Dr. Augusto Jamias

**Guests:**

Jeff Smith, Commission  
Dr. Joshua Binks  
Dan Deyle, CLA

Stacey Nutt  
Tasha Harris

Leslie Taylor  
Darryn McGarvey, CLA

- I. Call Meeting to Order Richard Mathey
- II. [Approve August 26, 2020 Meeting Minutes](#) Richard Mathey
- III. [Capital Requests FY 21](#)
- IV. FY2020 Financial Audit - CLA Darryn McGarvey, CLA
- V. Financial Report
  - A. Monthly Financial Statements & Statistical Data
    - 1. [Narratives](#) Tami Love
    - 2. [Financial Information](#) Tami Love
  - B. Other Business
    - 1. [Preliminary Bad Debt](#) Ron Cheese
- VI. Old Business
  - A. SLIB grants Tami Love
  - B. Enterprise revenue reports Richard Mathey
- VII. New Business
  - A. Financial Forum Discussion Richard Mathey
- VIII. Adjournment Richard Mathey

MEMORIAL HOSPITAL OF SWEETWATER COUNTY  
Finance & Audit Committee Meeting  
August 26, 2020

Voting Members Present: Mr. Richard Mathey, *Trustee – Chair*  
Mr. Ed Tardoni, *Trustee*  
Ms. Irene Richardson, *CEO*  
Ms. Tami Love, *CFO*  
Ms. Jan Layne, *Controller*

Voting Members Absent: None

Non-Voting Members Present: Mr. Ron Cheese, *Director of Patient Financial Services*  
Ms. Angel Bennett, *Director of Materials*  
Dr. Kristy Nielson, *CNO*  
Ms. Kari Quickenden, *CCO*  
Dr. Lawrence Lauridsen

Non-Voting Members Absent: Dr. Augusto Jamias

Guests: Tracie Soller, *Director of Medical Imaging*  
Crystal Hamblin, *Director of Cardiopulmonary*  
Alisha Mackie, *Director of Surgical Services*  
Dr. Cody Christensen  
Megan Gilbert, *Nursing Informatics*  
Bethany Bettolo, *Nursing Informatics*  
Brooke Fandrich, *Nursing Informatics*  
Jodi Corley, *Nursing Informatics*  
Stacey Nutt, *Network Administrator*  
Nicole Manus, *PACS Administrator*  
Gerry Johnston, *Maintenance Supervisor*  
Leslie Taylor, *Clinic Director*

**Call Meeting to Order**

Mr. Mathey called the meeting to order via teleconference.

**Approve Meeting Minutes**

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

**Capital Requests**

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

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

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

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

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

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

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



## **Financial Report**

### Monthly Finance Statements & Statistical Data

Ms. Love reviewed highlights of the July financial statements. She said we closed with a \$846,174 net gain. Gross revenue was \$16.6 million which was \$2.6 million over budget. She said we did not see the decreased volumes we expected when budgeting due to COVID. We did not use any CARES funds for July for lost revenue. We are looking at a different method for using the lost revenue for future months. She also reported that the clinic had a record high month in revenue for July. Reduction of revenue was booked at 51.2% for July, under budget by 1.7%

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

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

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

### **Old Business**

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

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

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

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

## **New Business**

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

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

## **Financial Forum Discussion**

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

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

*Submitted by Jan Layne*

**MEMORIAL HOSPITAL OF SWEETWATER COUNTY  
FINANCE & AUDIT COMMITTEE  
CAPITAL EXPENDITURE REQUESTS**

WEDNESDAY~ September 30, 2020

		YTD CAPITAL APPROVED	GRANT OR DONATION REIMBURSED	2020 APPROVED BUDGET	REMAINING YTD BALANCE
As of August 2020		339,042.00	-	2,000,000.00	1,660,958.00

CAPITAL REQUEST #	REQUESTED ITEM/REQUESTOR	CAPITAL AMOUNT TO BE APPROVED	MAINTENANCE SUPPORT COSTS	FREIGHT COSTS	TOTAL AMOUNT	COMMENTS
FY21-17	Stereotactic Cone System Dr. Binks/Tasha Harris	113,890.00			113,890.00	
FY21-23	Natus Electromyography (EMG) cart Leslie Taylor	35,936.00			35,936.00	
TOTAL AMOUNT REQUESTED		149,826.00	-	-	149,826.00	

## MHSC Capital Budget for FYE 6/30/2021

Department	ITEM	Approved	Purch/Amt	Variance	FY#
FACILITIES	GENERATOR INTERFACE TOUCH MONITOR	20,076	20,076	(0)	FY21-01
SURGERY	LUMINES MOSES PULSED HOLMIUM LASER	200,900		200,900	FY21-02
CARDIOPULMONARY	NATUS EEG MACHINE	47,651		47,651	FY21-03
FACILITIES	HEAT EXCHANGER	27,111		27,111	FY21-04
LABORATORY	MOBILE LAB, CLINIC, SWABBING STATION - 37 FT	262,000		262,000	FY21-05
EMERGENCY MANAGEMENT	SKYTTRON MODEL 2280 DISINFECTION ROBOT (2)	141,889	145,143	(3,254)	FY21-06
EMERGENCY MANAGEMENT	SKYTTRON MODEL 3200 DISINFECTION ROBOT	101,600	101,600	-	FY21-07
LABORATORY	BIOFIRE TORCH SYSTEM MODULE (2)	45,000		45,000	FY21-08
LABORATORY	CEPHEID GENEXPERT MOLECULAR TESTING PLATFORM	182,331		182,331	FY21-09
FACILITIES	MOB FRONT ENTRANCE REMODEL	289,900		289,900	FY21-11
FACILITIES	ULTRAVIOLET GERMICIDAL IRRADIATION	463,875		463,875	FY21-12
FACILITIES	HVAC UPGRADE IN RESPONSE TO COVID-19	2,314,000		2,314,000	FY21-13
SURGERY	CO2 CONDITIONING INSUFFLATOR KIT (3)	43,304		43,304	FY21-14
				-	
				-	
				-	
				-	
				-	
				-	
				-	
				-	
				-	
Total Budgeted	2,000,000	4,139,637	266,819	3,872,818	

### Capital Expenditure Dollars Authorized

4,139,637

### Less Donated Capital

MOBILE LAB, CLINIC, SWABBING STATION - 37 FT	SLIB	262,000
SKYTRON MODEL 2280 DISINFECTION ROBOT (2)	SLIB	141,889
SKYTRON MODEL 3200 DISINFECTION ROBOT	SLIB	101,600
BIOFIRE TORCH SYSTEM MODULE (2)	SLIB	45,000
CEPHEID GENEXPERT MOLECULAR TESTING PLATFORM	SLIB	182,331
MOB FRONT ENTRANCE REMODEL	SLIB	289,900
ULTRAVIOLET GERMICIDAL IRRADIATION	SLIB	463,875
HVAC UPGRADE IN RESPONSE TO COVID-19	SLIB	2,314,000

3,800,595

**Net Capital Outlay FYTD 2021**

339,042

### Remaining Balance FY2021 Capital Budget

1,660,958

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

**NARRATIVE TO AUGUST 2020 FINANCIAL STATEMENTS**

**THE BOTTOM LINE.** The bottom line from operations for August was a gain of \$282,924, compared to a loss of \$205,668 in the budget. This yields a 3.7% operating margin for the month compared to -2.8 in the budget. The YTD net operating gain is \$1,129,098, compared to a loss of \$599,677 in the budget. This represents a YTD operating margin of 7.1% compared with -4.1% in the budget.

The total net gain for August is \$488,081, compared to a loss of \$211,452 in the budget. The YTD total net gain is \$1,279,262, compared to a loss of \$610,024 in the budget. This represents a YTD profit margin of 8% compared to -4.2% in the budget.

**REVENUE.** Revenue for the month was \$15,796,628, over budget by \$1,702,354. Inpatient revenue was over budget by \$412,034, outpatient revenue was over budget by \$1,144,670 and the employed Provider Clinic was over budget by \$145,650. We saw a 12% increase in hospital gross revenue compared to budget and a 7.8% increase over the prior year. We have not seen the lower volumes budgeted due to the COVID19 pandemic.

**CARES Act -** We used \$279,900 of the CARES Act funds for COVID-19 related expenses. We have \$9,002,716 in grant reserves. We are reviewing the most recent requirements to figure the amount of lost revenue and expenses for reconciliation purposes.

Annual Debt Service Coverage came in at 6.04. Days of Cash on Hand are 229 in August, up seven days from last month. Daily cash expense is \$226,000 for August, up slightly from the prior month.

**REDUCTION OF REVENUE.** Deductions from revenue were booked at 52.6% for August, slightly over budget and are under budget at 51.9% year-to-date. Total collections for the month came in at \$8,160,592. Net days in AR are at 42.5 days. The percentage of AR greater than 90 days decreased to 21%.



The table below shows the August variance of expected to actual collections by payer for the Hospital only. The total collections came in higher than expected, at 53% compared to our goal of 48%.

AUGUST						
Payer	Avg prior 2 months	Collection %	Expected Collections	Actual	Act Variance	Act Coll %
BLUE CROSS	2,776,404.50	83%	2,304,415.74	2,631,354.00	326,938.27	95%
COMMERCIAL	1,904,811.50	83%	1,580,993.55	1,773,959.00	192,965.46	93%
GOVERNMENT	634,185.00	20%	126,837.00	546,079.00	419,242.00	86%
MEDICAID	1,219,487.50	24%	292,677.00	327,185.00	34,508.00	27%
MEDICARE - IP	1,171,412.70	55%	644,276.99	290,816.07	(353,460.91)	25%
MEDICARE - OP	4,570,782.30	22%	1,005,572.11	1,134,746.93	129,174.82	25%
SELF PAY	1,188,579.00	47%	558,632.13	553,245.00	(5,387.13)	47%
WORKERS COMP	192,978.00	40%	77,191.20	40,040.00	(37,151.20)	21%
TOTAL HOSPITAL	13,658,640.50	48.3%	6,590,595.70	7,297,425.00	706,829.30	53%

**EXPENSES.** Total expenses in August were \$7,412,435, under budget by \$255,587. The following line items were over budget:

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

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

**Supplies** – Expenses over budget in August include Drugs, Oxygen, Patient chargeables, Implants and Other Med/Surge supplies which include COVID related PPE.

**PROVIDER CLINIC.** Revenue for the Clinic in August was \$1,498,813, over budget by \$145,650. The bottom line for the Clinic in August was a loss of \$462,618 compared to a loss of \$675,914 in the budget. Volumes were back down in August. Total visits were 4,323 for August. The Clinic providers also generate hospital enterprise revenue, including Lab, Imaging and Surgery. Gross enterprise revenue year to date is \$9,262,748 which is 28.6% of total Hospital revenue year to date. Net patient revenue for the Clinic for August was \$795,627, over budget by \$61,161.

Deductions from revenue for the Clinic were booked at 46.9% for August. The payer mix is as follows; Commercial Insurance and Blue Cross is 53.9% of revenue, Medicare and Medicaid is 38.9% of revenue and Self Pay is 6.7% of revenue. There has been increases in Commercial and Medicaid and decreases in Blue Cross and Medicare compared to prior year. Total expenses for the month were \$1,333,588, under budget \$144,578. The majority of the expenses consist of Salaries and Benefits; at 83.8% of total expenses year-to-date. Salary and wage and Contract maintenance were over budget for August.

**OUTLOOK FOR SEPTEMBER.** Gross patient revenue is projecting to be lower in September but over budget at \$14.5 million. Compared to last September, ER visits are down by 24% and Births are down by 22%. Lab visits are up by 43%, Sleep Lab is up by 8%, Surgeries are up by 14% and Outpatient visits are up 28%. Collections are projecting lower at \$6 million in September. We expect the loss for September to be around \$300k - \$400k.

SEPTEMBER						days	23		
Payer	Avg prior 2 months	Collection %	Expected Collections	Actual	Act Variance	Act Coll %	Projected	Prj Variance	Prj Coll %
BLUE CROSS	3,085,508.50	83%	2,560,972.06	1,492,799.00	(1,068,173.06)	48%	1,947,129.13	(613,842.92)	63%
COMMERCIAL	2,020,884.50	83%	1,677,334.14	975,052.00	(702,284.14)	48%	1,271,804.35	(405,529.79)	63%
GOVERNMENT	749,468.50	20%	149,893.70	217,528.00	67,634.30	29%	283,732.17	133,838.47	38%
MEDICAID	1,263,287.00	24%	303,188.88	137,425.00	(165,763.88)	11%	179,250.00	(123,938.88)	14%
MEDICARE - IP	1,184,493.24	55%	651,471.28	141,368.51	(510,102.77)	12%	184,393.71	(467,077.57)	16%
MEDICARE - OP	4,621,821.75	22%	1,016,800.73	551,611.49	(465,189.30)	12%	719,493.24	(297,307.54)	16%
SELF PAY	1,350,337.00	40%	540,134.80	502,752.00	(37,382.80)	37%	655,763.48	115,628.68	49%
WORKERS COMP	231,110.50	40%	92,444.20	39,204.00	(53,240.20)	17%	51,135.65	(41,308.55)	22%
TOTAL HOSPITAL	14,505,911.00	48.2%	6,992,239.84	4,057,738.00	(2,934,501.84)	28%	5,292,701.74	(1,699,538.10)	36%

**Variances** - Collections are projecting to come in lower than expected this month, at 36% compared to the expected 48% rate. We are still seeing some delays from insurance companies as their staff is working from home and have lost some efficiencies of processing claims. We are currently down several positions in the billing office and are working on getting interviews and orientation dates scheduled.

**Reduction of revenue** – September payer mix is showing decreases in Blue Cross, Government, Medicare and Medicaid compared to the prior two months. Commercial and Self Pay are showing increases. This will result in reductions of revenue staying around 52% for September.





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

**Unaudited Financial Statements**

**for**

**Two months ended August 31, 2020**

**Certification Statement:**

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

**Certified by:**

**Tami Love**

**Chief Financial Officer**

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ROCK SPRINGS, WY**

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**Two months ended August 31, 2020**

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# MEMORIAL HOSPITAL OF SWEETWATER COUNTY

## EXECUTIVE FINANCIAL SUMMARY

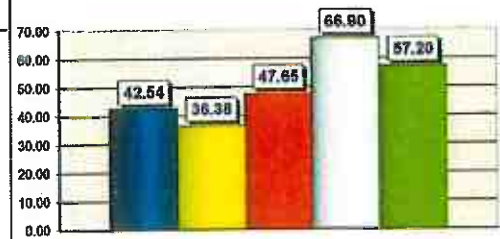
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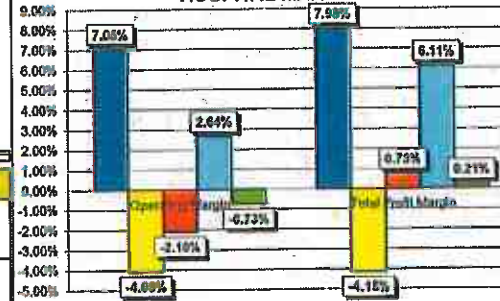
### BALANCE SHEET

	YTD 8/31/2020	Prior FYE 6/30/2020
<b>ASSETS</b>		
Current Assets	\$31,564,929	\$29,710,616
Assets Whose Use Is Limited	42,123,165	41,885,879
Property, Plant & Equipment (Net)	62,698,373	62,796,433
Other Assets	220,297	222,356
<b>Total Unrestricted Assets</b>	<b>136,606,764</b>	<b>134,615,283</b>
Restricted Assets	352,679	354,288
<b>Total Assets</b>	<b>\$136,959,442</b>	<b>\$134,969,571</b>
<b>LIABILITIES AND NET ASSETS</b>		
Current Liabilities	\$9,450,190	\$8,393,554
Long-Term Debt	27,790,874	27,800,498
Other Long-Term Liabilities	16,849,315	17,184,109
<b>Total Liabilities</b>	<b>54,090,379</b>	<b>53,378,160</b>
Net Assets	82,869,064	81,591,411
<b>Total Liabilities and Net Assets</b>	<b>\$136,959,442</b>	<b>\$134,969,571</b>

### NET DAYS IN ACCOUNTS RECEIVABLE



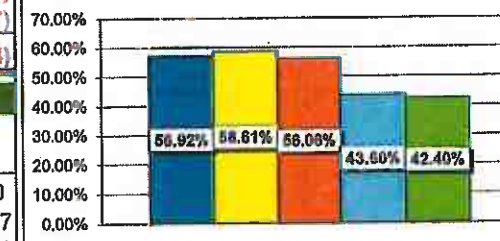
### HOSPITAL MARGINS



### DAYS CASH ON HAND



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



### KEY STATISTICS AND RATIOS

	08/31/20 ACTUAL	08/31/20 BUDGET	YTD ACTUAL	YTD BUDGET
Total Acute Patient Days	302	284	634	590
Average Acute Length of Stay	2.9	2.8	2.8	2.7
Total Emergency Room Visits	1,241	1,233	2,454	2,532
Outpatient Visits	8,210	7,107	17,285	13,902
Total Surgeries	166	147	344	309
Total Worked FTE's	427.18	432.61	424.94	432.61
Total Paid FTE's	476.28	475.40	471.72	475.40
Net Revenue Change from Prior Yr	1.52%	-1.55%	11.00%	1.90%
EBIDA - 12 Month Rolling Average			7.11%	3.71%
Current Ratio			3.34	
Days Expense in Accounts Payable			35.06	

MEMORIAL HOSPITAL OF SWEETWATER COUNTY	
Budget	08/31/20
Prior Fiscal Year End	06/30/20
WYOMING	All Hospitals
< \$90M Net Rev.	Rural

<b>FINANCIAL STRENGTH INDEX -</b>	<b>3.26</b>
Excellent - Greater than 3.0	Good - 3.0 to 0.0
Fair - 0.0 to (2.0)	Poor - Less than (2.0)

# Key Financial Ratios

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

ROCK SPRINGS, WY

Two months ended August 31, 2020

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📊 📈 - DESIRED POSITION IN RELATION TO BENCHMARKS AND BUDGET

		Year to Date 8/31/2020	Budget 6/30/2020	BB+ Credit Rating	BBB- Credit Rating	Prior Fiscal Year End 06/30/20	WYOMING All Hospitals (See Note 1)	National Rural < \$90M Net Rev. (See Note 2)
<b>Profitability:</b>								
Operating Margin	📈	7.05%	1.90%	0.10%	0.30%	-2.10%	2.64%	-0.73%
Total Profit Margin	📈	7.98%	0.76%	0.80%	1.00%	0.73%	6.11%	0.21%
<b>Liquidity:</b>								
Days Cash, All Sources **	📈	229.23	129.76	91.30	129.00	218.17	62.00	37.80
Net Days in Accounts Receivable	📊	42.54	50.02	52.40	51.80	47.65	66.90	57.20
<b>Capital Structure:</b>								
Average Age of Plant (Annualized)	📊	15.22	12.58	15.10	11.20	14.33	9.50	12.40
Long Term Debt to Capitalization	📊	25.65%	25.75%	48.20%	41.80%	26.04%	16.80%	10.00%
Debt Service Coverage Ratio **	📈	6.04	3.97	1.80	2.30	3.42	N/A	2.64
<b>Productivity and Efficiency:</b>								
Paid FTE's per Adjusted Occupied Bed	📊	8.84	8.43			8.36	6.60	4.63
Salary Expense per Paid FTE		\$83,819	\$86,892			\$87,488	\$82,436	\$48,150
Salary and Benefits as a % of Total Operating Exp		56.92%	56.43%			56.08%	43.60%	42.40%

Note 1 - 2017 Ingenix report (2016 median data), for all hospitals within the state regardless of size.

Note 2 - 2017 Ingenix report (2016 median data), for all U. S. hospitals that match this type and size.

\*\*Bond Covenant ratio is 75 Days Cash on Hand and 1.25 Debt Service Coverage



# Balance Sheet - Assets

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

ROCK SPRINGS, WY

Two months ended August 31, 2020

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	Current Month 8/31/2020	Prior Month 7/31/2020	ASSETS Positive/ (Negative) Variance	Percentage Variance	Prior Year End 6/30/2020
<b>Current Assets</b>					
Cash and Cash Equivalents	\$12,904,694	\$11,547,994	\$1,356,700	11.75%	\$12,052,717
Gross Patient Accounts Receivable	23,837,874	24,946,530	(1,108,656)	-4.44%	22,601,743
Less: Bad Debt and Allowance Reserves	(13,344,988)	(13,745,084)	400,086	2.91%	(12,704,325)
Net Patient Accounts Receivable	10,492,876	11,201,446	(708,570)	-6.33%	9,897,418
Interest Receivable	0	0	0	0.00%	0
Other Receivables	2,698,329	2,601,849	96,480	3.71%	2,416,525
Inventories	3,217,959	3,209,717	8,242	0.26%	3,208,539
Prepaid Expenses	2,251,071	2,419,919	(168,849)	-6.98%	2,135,417
Due From Third Party Payers	0	0	0	0.00%	0
Due From Affiliates/Related Organizations	0	0	0	0.00%	0
Other Current Assets	0	0	0	0.00%	0
<b>Total Current Assets</b>	<b>31,564,929</b>	<b>30,980,926</b>	<b>584,003</b>	<b>1.89%</b>	<b>29,710,616</b>
<b>Assets Whose Use Is Limited</b>					
Cash	28,197	27,178	1,020	3.75%	23,688
Investments	0	0	0	0.00%	0
Bond Reserve/Debt Retirement Fund	0	0	0	0.00%	0
Trustee Held Funds - Project	3,239,363	3,134,989	104,374	3.33%	3,030,616
Trustee Held Funds - SPT	15,283	14,909	374	2.51%	14,345
Board Designated Funds	23,866,160	23,851,522	14,638	0.06%	23,843,068
Other Limited Use Assets	14,974,161	14,974,161	0	0.00%	14,974,161
<b>Total Limited Use Assets</b>	<b>42,123,165</b>	<b>42,002,759</b>	<b>120,406</b>	<b>0.29%</b>	<b>41,885,879</b>
<b>Property, Plant, and Equipment</b>					
Land and Land Improvements	3,527,687	3,527,687	0	0.00%	3,527,687
Building and Building Improvements	38,783,761	38,783,761	0	0.00%	38,771,352
Equipment	110,737,444	110,620,231	117,213	0.11%	110,464,497
Construction In Progress	3,675,140	3,192,516	482,624	15.12%	2,957,578
Capitalized Interest	0	0	0	0.00%	0
Gross Property, Plant, and Equipment	156,724,032	156,124,194	599,837	0.38%	155,721,114
Less: Accumulated Depreciation	(94,025,659)	(93,479,996)	(545,663)	-0.58%	(92,924,681)
<b>Net Property, Plant, and Equipment</b>	<b>62,698,373</b>	<b>62,644,198</b>	<b>54,174</b>	<b>0.09%</b>	<b>62,796,433</b>
<b>Other Assets</b>					
Unamortized Loan Costs	220,297	221,326	(1,029)	-0.47%	222,356
Other	0	0	0	0.00%	0
<b>Total Other Assets</b>	<b>220,297</b>	<b>221,326</b>	<b>(1,029)</b>	<b>-0.47%</b>	<b>222,356</b>
<b>TOTAL UNRESTRICTED ASSETS</b>	<b>136,606,764</b>	<b>135,849,209</b>	<b>757,555</b>	<b>0.56%</b>	<b>134,615,283</b>
<b>Restricted Assets</b>	<b>352,679</b>	<b>352,079</b>	<b>600</b>	<b>0.17%</b>	<b>354,288</b>
<b>TOTAL ASSETS</b>	<b>\$136,959,442</b>	<b>\$136,201,288</b>	<b>\$758,155</b>	<b>0.56%</b>	<b>\$134,969,571</b>

# Balance Sheet - Liabilities and Net Assets

## MEMORIAL HOSPITAL OF SWEETWATER COUNTY

### ROCK SPRINGS, WY

Two months ended August 31, 2020

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	LIABILITIES AND FUND BALANCE				Prior Year End 6/30/2020
	Current Month 8/31/2020	Prior Month 7/31/2020	Positive/ (Negative) Variance	Percentage Variance	
<b>Current Liabilities</b>					
Accounts Payable	\$4,128,156	\$3,862,075	(\$266,081)	-6.89%	\$3,776,951
Notes and Loans Payable	0	0	0	0.00%	0
Accrued Payroll	1,948,662	1,635,678	(312,983)	-19.13%	1,377,654
Accrued Payroll Taxes	0	0	0	0.00%	0
Accrued Benefits	2,394,803	2,503,860	109,057	4.36%	2,483,630
Accrued Pension Expense (Current Portion)	0	0	0	0.00%	0
Other Accrued Expenses	0	0	0	0.00%	0
Patient Refunds Payable	0	0	0	0.00%	0
Property Tax Payable	0	0	0	0.00%	0
Due to Third Party Payers	0	0	0	0.00%	0
Advances From Third Party Payers	0	0	0	0.00%	0
Current Portion of LTD (Bonds/Mortgages)	308,044	308,044	0	0.00%	308,044
Current Portion of LTD (Leases)	0	0	0	0.00%	0
Other Current Liabilities	670,525	558,900	(111,625)	-19.97%	447,275
<b>Total Current Liabilities</b>	<b>9,450,190</b>	<b>8,868,557</b>	<b>(581,632)</b>	<b>-6.56%</b>	<b>8,393,554</b>
<b>Long Term Debt</b>					
Bonds/Mortgages Payable	28,098,918	28,103,730	4,812	0.02%	28,108,542
Leases Payable	0	0	0	0.00%	0
Less: Current Portion Of Long Term Debt	308,044	308,044	0	0.00%	308,044
<b>Total Long Term Debt (Net of Current)</b>	<b>27,790,874</b>	<b>27,795,686</b>	<b>4,812</b>	<b>0.02%</b>	<b>27,800,498</b>
<b>Other Long Term Liabilities</b>					
Deferred Revenue	16,438,737	16,718,637	279,900	1.67%	16,718,637
Accrued Pension Expense (Net of Current)	0	0	0	0.00%	0
Other	410,579	438,025	27,447	6.27%	465,472
<b>Total Other Long Term Liabilities</b>	<b>16,849,315</b>	<b>17,156,662</b>	<b>307,347</b>	<b>1.79%</b>	<b>17,184,109</b>
<b>TOTAL LIABILITIES</b>	<b>54,090,379</b>	<b>53,820,905</b>	<b>(269,473)</b>	<b>-0.50%</b>	<b>53,378,160</b>
<b>Net Assets:</b>					
Unrestricted Fund Balance	79,281,877	79,281,877	0	0.00%	78,299,323
Temporarily Restricted Fund Balance	1,959,119	1,959,119	0	0.00%	1,959,119
Restricted Fund Balance	348,806	348,206	(600)	-0.17%	350,415
Net Revenue/(Expenses)	1,279,262	791,181	N/A	N/A	982,553
<b>TOTAL NET ASSETS</b>	<b>82,869,064</b>	<b>82,380,383</b>	<b>(488,681)</b>	<b>-0.59%</b>	<b>81,591,411</b>
<b>TOTAL LIABILITIES AND NET ASSETS</b>	<b>\$136,959,442</b>	<b>\$136,201,288</b>	<b>(\$758,155)</b>	<b>-0.56%</b>	<b>\$134,969,571</b>

# Statement of Revenue and Expense

## MEMORIAL HOSPITAL OF SWEETWATER COUNTY

### ROCK SPRINGS, WY

Two months ended August 31, 2020

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	CURRENT MONTH				Prior Year 08/31/19
	Actual 08/31/20	Budget 08/31/20	Positive (Negative) Variance	Percentage Variance	
Gross Patient Revenue					
Inpatient Revenue	\$2,958,360	\$2,546,326	\$412,034	16.18%	\$2,726,154
Outpatient Revenue	11,339,455	10,194,785	1,144,670	11.23%	10,859,314
Clinic Revenue	1,333,361	1,050,671	282,690	26.91%	1,275,579
Specialty Clinic Revenue	165,452	302,491	(137,040)	-45.30%	202,768
Total Gross Patient Revenue	15,796,628	14,094,274	1,702,354	12.08%	15,063,815
Deductions From Revenue					
Discounts and Allowances	(7,239,901)	(6,181,398)	(1,058,503)	-17.12%	(6,515,178)
Bad Debt Expense (Governmental Providers Only)	(1,042,687)	(1,043,628)	940	0.09%	(992,458)
Medical Assistance	(26,185)	(168,072)	141,886	84.42%	(173,200)
Total Deductions From Revenue	(8,308,774)	(7,393,097)	(915,677)	-12.39%	(7,680,836)
Net Patient Revenue	7,487,854	6,701,176	786,678	11.74%	7,382,978
Other Operating Revenue	207,505	761,178	(553,673)	-72.74%	196,885
Total Operating Revenue	7,695,359	7,462,354	233,005	3.12%	7,579,864
Operating Expenses					
Salaries and Wages	3,333,426	3,252,295	(81,131)	-2.49%	3,150,410
Fringe Benefits	869,467	1,094,391	224,924	20.55%	970,094
Contract Labor	43,538	31,186	(12,352)	-39.61%	131,399
Physicians Fees	203,217	226,464	23,247	10.27%	341,822
Purchased Services	395,658	451,239	55,581	12.32%	382,855
Supply Expense	1,316,845	1,166,687	(150,158)	-12.87%	1,280,524
Utilities	81,449	97,336	15,887	16.32%	95,614
Repairs and Maintenance	365,930	469,443	103,512	22.05%	403,366
Insurance Expense	41,794	43,360	1,566	3.61%	52,627
All Other Operating Expenses	145,095	200,877	55,782	27.77%	175,292
Bad Debt Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Leases and Rentals	62,114	62,605	491	0.78%	86,974
Depreciation and Amortization	553,903	572,141	18,237	3.19%	567,122
Interest Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Total Operating Expenses	7,412,435	7,668,022	255,587	3.33%	7,638,101
Net Operating Surplus/(Loss)	282,924	(205,668)	488,592	-237.56%	(58,237)
Non-Operating Revenue:					
Contributions	0	0	0	0.00%	0
Investment Income	21,540	23,667	(2,126)	-8.98%	22,692
Tax Subsidies (Except for GO Bond Subsidies)	374	0	374	0.00%	3,513
Tax Subsidies for GO Bonds	0	0	0	0.00%	0
Interest Expense (Governmental Providers Only)	(107,816)	(99,324)	8,493	-8.55%	(99,323)
Other Non-Operating Revenue/(Expenses)	291,059	69,873	221,186	316.55%	114,856
Total Non Operating Revenue/(Expense)	205,157	(5,784)	210,941	-3646.82%	41,738
Total Net Surplus/(Loss)	\$488,081	(\$211,452)	\$699,533	-330.82%	(\$18,499)
Change in Unrealized Gains/(Losses) on Investments	0	0	0	0.00%	0
Increase/(Decrease in Unrestricted Net Assets	\$488,081	(\$211,452)	\$699,533	-330.82%	(\$18,499)
Operating Margin	3.68%	-2.76%			-0.77%
Total Profit Margin	6.34%	-2.83%			-0.22%
EBIDA	10.88%	4.91%			6.76%



## Statement of Revenue and Expense

## MEMORIAL HOSPITAL OF SWEETWATER COUNTY

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## ROCK SPRINGS, WY

Two months ended August 31, 2020

	YEAR-TO-DATE				Prior Year 08/31/19
	Actual 08/31/20	Budget 08/31/20	Positive (Negative) Variance	Percentage Variance	
Gross Patient Revenue					
Inpatient Revenue	\$6,214,370	\$5,281,440	\$932,930	17.66%	\$5,649,773
Outpatient Revenue	22,939,987	20,227,546	2,712,441	13.41%	21,593,779
Clinic Revenue	2,698,869	2,039,463	659,406	32.33%	2,467,057
Specialty Clinic Revenue	579,930	564,629	15,301	2.71%	360,699
Total Gross Patient Revenue	<u>32,433,157</u>	<u>28,113,078</u>	<u>4,320,079</u>	<u>15.37%</u>	<u>30,071,308</u>
Deductions From Revenue					
Discounts and Allowances	(15,097,629)	(12,339,518)	(2,758,111)	-22.35%	(13,654,411)
Bad Debt Expense (Governmental Providers Only)	(1,625,889)	(2,111,735)	485,846	23.01%	(2,009,396)
Medical Assistance	(111,007)	(362,997)	251,989	69.42%	(373,253)
Total Deductions From Revenue	<u>(16,834,526)</u>	<u>(14,814,250)</u>	<u>(2,020,276)</u>	<u>-13.64%</u>	<u>(16,037,059)</u>
Net Patient Revenue	<u>15,598,631</u>	<u>13,298,828</u>	<u>2,299,803</u>	<u>17.29%</u>	<u>14,034,248</u>
Other Operating Revenue	<u>427,710</u>	<u>1,414,429</u>	<u>(986,718)</u>	<u>-69.76%</u>	<u>404,526</u>
Total Operating Revenue	<u>16,026,341</u>	<u>14,713,257</u>	<u>1,313,085</u>	<u>8.92%</u>	<u>14,438,774</u>
Operating Expenses					
Salaries and Wages	6,616,552	6,462,832	(153,720)	-2.38%	6,175,050
Fringe Benefits	1,763,679	2,097,990	334,311	15.93%	1,665,786
Contract Labor	99,695	62,371	(37,324)	-59.84%	277,896
Physicians Fees	484,509	500,428	15,919	3.18%	707,055
Purchased Services	843,992	905,519	61,527	6.79%	794,217
Supply Expense	2,558,925	2,426,310	(132,615)	-5.47%	2,502,020
Utilities	185,194	200,604	15,410	7.68%	193,832
Repairs and Maintenance	765,496	924,780	159,284	17.22%	812,783
Insurance Expense	58,057	86,720	28,663	33.05%	111,201
All Other Operating Expenses	285,958	374,763	88,805	23.70%	371,432
Bad Debt Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Leases and Rentals	125,442	124,602	(840)	-0.67%	178,314
Depreciation and Amortization	1,109,744	1,146,013	36,270	3.16%	1,128,161
Interest Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Total Operating Expenses	<u>14,897,244</u>	<u>15,312,933</u>	<u>415,690</u>	<u>2.71%</u>	<u>14,917,746</u>
Net Operating Surplus/(Loss)	<u>1,129,098</u>	<u>(599,677)</u>	<u>1,728,775</u>	<u>-288.28%</u>	<u>(478,972)</u>
Non-Operating Revenue:					
Contributions	0	0	0	0.00%	0
Investment Income	37,896	47,333	(9,438)	-19.94%	41,808
Tax Subsidies (Except for GO Bond Subsidies)	938	0	938	0.00%	4,942
Tax Subsidies for GO Bonds	0	0	0	0.00%	0
Interest Expense (Governmental Providers Only)	(215,635)	(198,957)	(16,678)	8.38%	(198,956)
Other Non-Operating Revenue/(Expense)	326,985	141,277	185,688	131.44%	143,111
Total Non Operating Revenue/(Expense)	<u>160,164</u>	<u>(10,347)</u>	<u>160,511</u>	<u>-1551.30%</u>	<u>(9,095)</u>
Total Net Surplus/(Loss)	<u>\$1,279,262</u>	<u>(\$610,024)</u>	<u>\$1,889,285</u>	<u>-309.71%</u>	<u>(\$488,069)</u>
Change in Unrealized Gains/(Losses) on Investments	0	0	0	0.00%	0
Increase/(Decrease) in Unrestricted Net Assets	<u>\$1,279,262</u>	<u>(\$610,024)</u>	<u>\$1,889,285</u>	<u>-309.71%</u>	<u>(\$488,069)</u>
Operating Margin	7.05%	-4.08%			-3.32%
Total Profit Margin	7.98%	-4.15%			-3.38%
EBIDA	13.97%	3.71%			4.53%

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

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	Actual 8/31/2020	Actual 7/31/2020	Actual 6/30/2020	Actual 5/31/2020	Actual 4/30/2020	Actual 3/31/2020
Gross Patient Revenue	\$2,958,360	\$3,256,010	\$2,923,872	\$2,863,837	\$2,784,519	\$2,777,538
Inpatient Revenue						
Inpatient Psych/Rehab Revenue						
Outpatient Revenue	\$11,339,455	\$11,600,532	\$9,853,590	\$8,485,713	\$8,104,600	\$10,336,977
Clinic Revenue	\$1,333,361	\$1,365,508	\$1,291,506	\$1,116,816	\$1,146,806	\$984,201
Specialty Clinic Revenue	\$165,452	\$414,478	\$281,911	\$314,858	\$288,932	\$244,806
Total Gross Patient Revenue	\$15,796,628	\$16,636,529	\$14,350,879	\$12,781,224	\$12,334,856	\$14,343,521
Deductions From Revenue						
Discounts and Allowances	\$7,239,901	\$7,857,728	\$5,960,628	\$5,186,139	\$5,565,060	\$6,081,666
Bad Debt Expense (Governmental Providers Only)	\$1,042,687	\$583,202	\$1,101,340	\$1,256,071	\$1,158,759	\$813,846
Charity Care	\$26,185	\$84,822	\$194,709	\$55,091	\$87,459	\$284,093
Total Deductions From Revenue	8,308,774	8,525,752	7,256,676	6,497,301	6,811,278	7,159,605
Net Patient Revenue	\$7,487,854	\$8,110,777	\$7,094,203	\$6,283,923	\$5,523,578	\$7,183,916
Other Operating Revenue	207,505	220,205	(1,616,588)	1,046,148	2,676,262	231,037
Total Operating Revenue	7,695,359	8,330,982	5,477,615	7,330,071	7,599,840	7,414,953
Operating Expenses						
Salaries and Wages	\$3,333,426	\$3,283,126	\$3,165,595	\$3,315,414	\$3,149,585	\$3,411,912
Fringe Benefits	\$869,467	\$894,212	\$854,214	\$888,042	\$920,695	\$933,298
Contract Labor	\$43,536	\$56,158	\$10,676	\$26,130	\$46,076	\$49,063
Physicians Fees	\$203,217	\$281,292	\$334,073	\$316,372	\$338,295	\$366,453
Purchased Services	\$395,858	\$448,335	\$503,898	\$385,944	\$361,426	\$485,887
Supply Expense	\$1,316,845	\$1,242,081	\$1,138,393	\$1,008,570	\$1,158,916	\$1,321,818
Utilities	\$81,449	\$103,746	\$88,251	\$102,274	\$89,337	\$84,093
Repairs and Maintenance	\$365,930	\$399,565	\$426,595	\$462,934	\$444,766	\$446,244
Insurance Expense	\$41,794	\$16,263	\$44,527	\$43,428	\$47,455	\$54,984
All Other Operating Expenses	\$145,095	\$140,863	\$211,587	\$91,828	\$149,169	\$208,356
Bad Debt Expense (Non-Governmental Providers)						
Leases and Rentals	\$62,114	\$63,328	\$49,303	\$49,189	\$64,204	\$66,908
Depreciation and Amortization	\$553,903	\$555,840	\$568,459	\$546,931	\$549,855	\$552,321
Interest Expense (Non-Governmental Providers)						
Total Operating Expenses	\$7,412,435	\$7,484,808	\$7,395,571	\$7,237,056	\$7,319,780	\$7,981,317
Net Operating Surplus/(Loss)	\$282,924	\$846,174	(\$1,917,955)	\$93,015	\$280,060	(\$566,364)
Non-Operating Revenue:						
Contributions						
Investment Income	21,540	16,355	35,221	175,009	18,515	21,491
Tax Subsidies (Except for GO Bond Subsidies)						
Tax Subsidies for GO Bonds	374	564	(1,068)	651	968	(416)
Interest Expense (Governmental Providers Only)	(187,818)	(107,818)	(221,170)	(108,543)	(99,489)	(105,292)
Other Non-Operating Revenue/(Expense)	291,319	35,908	2,594,222	10,604	1,422	91,220
Total Non Operating Revenue/(Expense)	\$205,917	(\$54,993)	\$2,407,206	\$85,921	(\$78,584)	\$7,003
Total Net Surplus/(Loss)	\$488,842	\$791,181	\$489,251	\$178,936	\$201,476	(\$559,361)
Change in Unrealized Gains/(Losses) on Investments						
Increase/(Decrease in Unrestricted Net Assets)	\$488,842	\$791,181	\$489,251	\$178,936	\$201,476	(\$559,361)
Operating Margin	3.68%	10.16%	-35.01%	1.27%	3.69%	-7.64%
Total Profit Margin	6.35%	9.60%	8.93%	2.44%	2.65%	-7.54%
EBIDA	10.87%	16.83%	-24.64%	8.73%	10.92%	-0.19%

Actual 2/29/2020	Actual 1/31/2020	Actual 12/31/2019	Actual 11/30/2019	Actual 10/31/2019	Actual 9/30/2019	Actual 8/31/2019
\$2,722,882	\$3,543,613	\$2,709,104	\$2,982,847	\$3,144,192	\$2,730,901	\$2,726,154
\$10,746,705	\$10,775,879	\$10,812,548	\$9,944,805	\$10,345,137	\$10,230,467	\$10,859,314
\$1,161,210	\$1,485,917	\$1,143,776	\$1,063,719	\$1,354,373	\$1,165,206	\$1,275,579
\$262,885	\$247,493	\$269,431	\$309,619	\$313,861	\$204,888	\$202,768
\$14,893,661	\$16,052,901	\$14,934,858	\$14,300,990	\$15,157,564	\$14,331,462	\$15,063,815
\$6,619,613	\$7,065,871	\$5,867,948	\$5,637,701	\$6,892,232	\$6,032,602	\$6,515,178
\$837,619	\$746,898	\$857,280	\$724,765	\$797,098	\$1,180,264	\$992,456
\$182,758	(\$48,587)	\$453,298	\$492,120	\$166,667	\$114,653	\$173,200
7,639,991	7,764,182	7,178,528	6,854,586	7,665,997	7,327,518	7,680,836
\$7,253,671	\$8,288,719	\$7,756,331	\$7,446,403	\$7,501,567	\$7,003,944	\$7,382,978
125,899	274,722	321,846	168,314	286,120	195,787	196,865
7,379,569	8,563,441	8,078,178	7,614,717	7,787,687	7,199,731	7,579,864
\$3,348,186	\$3,210,137	\$3,353,001	\$3,302,746	\$3,394,397	\$3,189,351	\$3,150,410
\$895,130	\$1,012,367	\$935,213	\$982,139	\$1,014,021	\$879,652	\$970,094
\$41,291	\$75,137	\$52,546	\$115,454	\$85,916	\$121,333	\$131,399
\$411,317	\$297,440	\$377,567	\$277,808	\$442,922	\$336,615	\$341,622
\$322,623	\$450,562	\$389,887	\$420,497	\$406,071	\$430,288	\$382,855
\$1,176,617	\$1,171,456	\$1,299,752	\$992,804	\$1,260,326	\$1,072,316	\$1,280,524
\$67,382	\$91,522	\$98,722	\$105,485	\$96,172	\$101,061	\$95,614
\$420,693	\$504,386	\$427,780	\$434,367	\$428,532	\$461,821	\$403,366
\$59,739	\$66,143	\$52,652	\$52,682	\$53,986	\$54,483	\$52,627
\$141,853	\$77,399	\$231,240	\$176,692	\$210,413	\$151,438	\$175,292
\$67,609	\$76,381	\$72,943	\$83,881	\$83,761	\$46,560	\$86,974
\$654,018	\$559,141	\$559,157	\$564,202	\$563,653	\$565,316	\$567,122
\$7,626,339	\$7,582,059	\$7,850,560	\$7,508,757	\$8,020,168	\$7,410,433	\$7,638,101
(\$146,770)	\$981,382	\$227,618	\$105,960	(\$232,481)	(\$210,703)	(\$58,297)
21,076	19,081	17,625	39,086	32,300	20,290	22,692
373	249	1,148	9,170	(2,103)	265	3,513
(100,209)	(100,275)	(108,725)	(99,888)	(99,514)	(107,630)	(99,323)
158,344	26,889	156,527	50,253	56,224	101,757	114,856
\$79,583	(\$64,057)	\$66,575	(\$1,377)	(\$13,093)	\$14,687	\$41,738
(\$67,187)	\$927,325	\$294,193	\$104,583	(\$245,674)	(\$196,016)	(\$16,489)
(\$67,187)	\$927,325	\$294,193	\$104,583	(\$245,674)	(\$196,016)	#VALUE!
-1.99%	11.46%	2.82%	1.39%	-2.99%	-2.93%	-0.77%
-0.91%	10.83%	3.64%	1.37%	-3.15%	-2.72%	-0.22%
5.52%	17.99%	9.74%	8.80%	4.25%	4.93%	6.71%



Statement of Cash Flows

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

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ROCK SPRINGS, WY

Two months ended August 31, 2020

	CASH FLOW	
	Current Month 8/31/2020	Current Year-To-Date 8/31/2020
<b>CASH FLOWS FROM OPERATING ACTIVITIES:</b>		
Net Income (Loss)	\$488,081	\$1,279,262
Adjustments to Reconcile Net Income to Net Cash Provided by Operating Activities:		
Depreciation	553,903	1,109,744
(Increase)/Decrease in Net Patient Accounts Receivable	708,570	(595,458)
(Increase)/Decrease in Other Receivables	(96,480)	(281,804)
(Increase)/Decrease in Inventories	(8,242)	(9,420)
(Increase)/Decrease in Pre-Paid Expenses	168,849	(115,654)
(Increase)/Decrease in Other Current Assets	0	0
Increase/(Decrease) in Accounts Payable	266,081	351,205
Increase/(Decrease) in Notes and Loans Payable	0	0
Increase/(Decrease) in Accrued Payroll and Benefits	203,926	482,181
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	111,625	223,250
<b>Net Cash Provided by Operating Activities:</b>	<b>2,396,313</b>	<b>2,443,305</b>
<b>CASH FLOWS FROM INVESTING ACTIVITIES:</b>		
Purchase of Property, Plant and Equipment	(608,078)	(1,011,683)
(Increase)/Decrease in Limited Use Cash and Investments	(119,387)	(232,777)
(Increase)/Decrease in Other Limited Use Assets	(1,020)	(4,509)
(Increase)/Decrease in Other Assets	1,029	2,059
<b>Net Cash Used by Investing Activities</b>	<b>(727,455)</b>	<b>(1,246,911)</b>
<b>CASH FLOWS FROM FINANCING ACTIVITIES:</b>		
Increase/(Decrease) in Bond/Mortgage Debt	(4,812)	(9,624)
Increase/(Decrease) in Capital Lease Debt	0	0
Increase/(Decrease) in Other Long Term Liabilities	(307,347)	(334,794)
<b>Net Cash Used for Financing Activities</b>	<b>(312,159)</b>	<b>(344,417)</b>
<b>(INCREASE)/DECREASE IN RESTRICTED ASSETS</b>	<b>0</b>	<b>0</b>
<b>Net Increase/(Decrease) in Cash</b>	<b>1,356,700</b>	<b>851,977</b>
Cash, Beginning of Period	11,547,994	12,052,717
<b>Cash, End of Period</b>	<b>\$12,904,694</b>	<b>\$12,904,694</b>

# Patient Statistics

## MEMORIAL HOSPITAL OF SWEETWATER COUNTY

### ROCK SPRINGS, WY

Two months ended August 31, 2020

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Current Month				Year-To-Date				
Actual	Budget	Positive/ (Negative) Variance	Prior Year 08/31/19	STATISTICS	Actual 08/31/20	Budget 08/31/20	Positive/ (Negative) Variance	Prior Year 08/31/19
<b>Discharges</b>								
103	101	2	112	Acute	223	220	3	244
103	101	2	112	Total Adult Discharges	223	220	3	244
32	33	(1)	37	Newborn	78	66	12	73
135	134	1	149	Total Discharges	301	285	16	317
<b>Patient Days:</b>								
302	284	18	316	Acute	634	590	44	656
302	284	18	316	Total Adult Patient Days	634	590	44	656
48	59	(11)	66	Newborn	106	113	(7)	125
350	344	6	382	Total Patient Days	740	703	37	781
<b>Average Length of Stay (ALOS)</b>								
2.9	2.8	0.1	2.8	Acute	2.8	2.7	0.2	2.7
2.9	2.8	0.1	2.8	Total Adult ALOS	2.8	2.7	0.2	2.7
1.5	1.8	(0.3)	1.8	Newborn ALOS	1.4	1.7	(0.4)	1.7
<b>Average Daily Census (ADC)</b>								
9.7	9.2	0.6	10.2	Acute	10.2	9.5	0.7	10.6
9.7	9.2	0.6	10.2	Total Adult ADC	10.2	9.5	0.7	10.6
1.5	1.9	(0.4)	2.1	Newborn	1.7	1.8	(0.1)	2.0
<b>Emergency Room Statistics</b>								
113	119	(6)	132	ER Visits - Admitted	238	257	(19)	285
1,128	1,114	14	1,238	ER Visits - Discharged	2,216	2,275	(59)	2,528
1,241	1,233	8	1,370	Total ER Visits	2,454	2,532	(78)	2,813
9.11%	9.64%		9.64%	% of ER Visits Admitted	9.70%	10.13%		10.13%
109.71%	117.86%		117.86%	ER Admissions as a % of Total	106.73%	116.80%		116.80%
<b>Outpatient Statistics:</b>								
8,210	7,107	1,103	7,897	Total Outpatients Visits	17,285	13,902	3,383	15,447
118	86	32	96	Observation Bed Days	231	208	23	231
3,824	5,409	(1,585)	4,220	Clinic Visits - Primary Care	7,820	10,002	(2,182)	8,280
499	621	(122)	470	Clinic Visits - Specialty Clinics	1,136	1,166	(30)	898
26	25	1	28	IP Surgeries	52	52	(0)	58
140	122	19	135	OP Surgeries	292	257	36	285
<b>Productivity Statistics:</b>								
427.18	432.61	(5.43)	428.30	FTE's - Worked	424.94	432.61	(7.67)	57.88
476.28	475.40	0.88	466.65	FTE's - Paid	471.72	475.40	(3.68)	465.78
1.4620	1.2598	0.20	1.3998	Case Mix Index - Medicare	1.4851	2.7679	(1.28)	1.3451
1.2238	0.6417	0.58	0.7130	Case Mix Index - All payers	1.1524	1.3293	(0.18)	0.7385

# Accounts Receivable Tracking Report

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

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ROCK SPRINGS, WY

08/31/20

	<u>Current Month Actual</u>	<u>Current Month Target</u>
Gross Days in Accounts Receivable - All Services	46.88	52.11
Net Days in Accounts Receivable	42.54	47.65
Number of Gross Days in Unbilled Revenue	2.94	3.0 or <
Number of Days Gross Revenue in Credit Balances	0.00	< 1.0
Self Pay as a Percentage of Total Receivables	34.95%	N/A
Charity Care as a % of Gross Patient Revenue - Current Month	0.17%	1.19%
Charity Care as a % of Gross Patient Revenue - Year-To-Date	0.34%	1.29%
Bad Debts as a % of Gross Patient Revenue - Current Month	6.60%	7.40%
Bad Debts as a % of Gross Patient Revenue - Year-To-Date	5.01%	7.51%
Collections as a Percentage of Net Revenue - Current Month	108.98%	100% or >
Collections as a Percentage of Net Revenue - Year-To-Date	95.46%	100% or >
Percentage of Blue Cross Receivable > 90 Days	8.76%	< 10%
Percentage of Insurance Receivable > 90 Days	10.36%	< 15%
Percentage of Medicaid Receivable > 90 Days	16.47%	< 20%
Percentage of Medicare Receivable > 60 Days	2.41%	< 6%

## Variance Analysis

### MEMORIAL HOSPITAL OF SWEETWATER COUNTY ROCK SPRINGS, WYOMING Two months ended August 31, 2020

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

	Current Month		Year-to-Date	
	Amount	%	Amount	%
Gross Patient Revenue	1,702,354	12.08%	4,320,079	15.37%
Gross patient revenue is over budget for the month and over budget year to date. Patient statistics under budget include Clinic visits. Average Daily Census is 9.7 in August which is over budget by 0.6				
Deductions from Revenue	(915,677)	-12.39%	(2,020,276)	-13.64%
Deductions from revenue are over budget for August and over budget year to date. They are currently booked at 52.6% for August 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	940	0.09%	485,846	23.01%
Bad debt expense is booked at 36.6% for August and 5.0% year to date.				
Charity Care	141,886	84.42%	251,989	69.42%
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	(553,673)	-72.74%	(986,718)	-69.76%
Other Operating Revenue is under budget for the month and is under budget year to date. This is due to the CARES funds budgeted here, but now has to be reported in non-operating.				
Salaries and Wages	(81,131)	-2.49%	(153,720)	-2.38%
Salary and Wages are over budget and remain over budget year to date.  Paid FTEs are under budget by .88 FTEs for the month and under 3.68 FTEs year to date.				
Fringe Benefits	224,924	20.55%	334,311	15.93%
Fringe benefits are under budget in August and remain under budget year to date.				
Contract Labor	(12,352)	-39.61%	(37,324)	-59.84%
Contract labor is over budget for August and over budget year to date. ER and Behavioral Health, OR and Ultrasound are over budget for the month.				



**Variance Analysis****MEMORIAL HOSPITAL OF SWEETWATER COUNTY  
ROCK SPRINGS, WYOMING  
Two months ended August 31, 2020****PAGE 14**

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	%
<b>Physician Fees</b>	<b>23,247</b>	<b>10.27%</b>	<b>15,919</b>	<b>3.18%</b>
Physician fees are under budget in August and under budget year to date. ED and Hospitalists are over budget in August.				
<b>Purchased Services</b>	<b>55,581</b>	<b>12.32%</b>	<b>61,527</b>	<b>6.79%</b>
Purchased services are under budget for August and under budget year to date. Expenses over budget are other purchased services				
<b>Supply Expense</b>	<b>(150,158)</b>	<b>-12.87%</b>	<b>(132,615)</b>	<b>-5.47%</b>
Supplies are over budget for August and over budget year to date. Line items over budget include Other med/surg supplies, oxygen, chargeables, drugs and outdated supplies				
<b>Repairs &amp; Maintenance</b>	<b>103,512</b>	<b>22.05%</b>	<b>159,284</b>	<b>17.22%</b>
Repairs and Maintenance are under budget for August and under budget year to date.				
<b>All Other Operating Expenses</b>	<b>55,782</b>	<b>27.77%</b>	<b>88,805</b>	<b>23.70%</b>
This expense is under budget in August and under budget year to date. Other expenses over budget are Freight and Other expenses.				
<b>Leases and Rentals</b>	<b>491</b>	<b>0.78%</b>	<b>(840)</b>	<b>-0.67%</b>
This expense is under budget for August and is over budget year to date.				
<b>Depreciation and Amortization</b>	<b>18,237</b>	<b>3.19%</b>	<b>36,270</b>	<b>3.16%</b>
Depreciation is under budget for August and is under budget year to date.				
<b>BALANCE SHEET</b>				
<b>Cash and Cash Equivalents</b>	<b>\$1,356,700</b>	<b>11.75%</b>		
Cash increased in August. Cash collections for August were \$8.1million. Days Cash on Hand increased to 229 days.				
<b>Gross Patient Accounts Receivable</b>	<b>(\$1,108,656)</b>	<b>-4.44%</b>		
This receivable decreased in August due high collections in August.				

**Variance Analysis****MEMORIAL HOSPITAL OF SWEETWATER COUNTY  
ROCK SPRINGS, WYOMING  
Two months ended August 31, 2020****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		Year-to-Date	
	Amount	%	Amount	%
Bad Debt and Allowance Reserves	400,086	2.91%		
Bad Debt and Allowances increased.				
Other Receivables	96,480	3.71%		
Other Receivables increased in August due to county and occ med invoices, retention bonus'				
Prepaid Expenses	(168,849)	-6.96%		
Prepaid expenses decreased due to the normal activity in this account.				
Limited Use Assets	120,406	0.29%		
These assets increased due to the debt service payment				
Plant Property and Equipment	54,174	0.09%		
The increase in these assets is due to the decrease in Capital equipment and the normal increase in accumulated depreciation.				
Accounts Payable	(266,081)	-6.89%		
This liability increased due to the normal activity in this account.				
Accrued Payroll	(312,983)	-19.13%		
This liability increased in August. The payroll accrual for August was 15 days.				
Accrued Benefits	109,057	4.36%		
This liability decreased in August with the normal accrual and usage of PTO .				
Other Current Liabilities	(111,625)	-19.97%		
This liability increased due to the accrual on the bonds				
Other Long Term Liabilities	307,347	1.79%		
This liability decreased due to the payments on leases				
Total Net Assets	(488,661)	-0.59%		
The net gain from operations for August is \$282,924				



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

**PHYSICIAN CLINICS**

**Unaudited Financial Statements**

**for**

**Two months ended August 31, 2020**

**Certification Statement:**

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

**Certified by:**

**Tami Love**

**Chief Financial Officer**

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**MEMORIAL HOSPITAL OF SWEETWATER COUNTY**

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**ROCK SPRINGS, WY**

**Two months ended August 31, 2020**

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## Key Financial Ratios

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

PAGE 2

ROCK SPRINGS, WY

Two months ended August 31, 2020

 - DESIRED POSITION IN RELATION TO BENCHMARKS AND BUDGET

		Month to Date 8/31/2020	Year to Date 8/31/2020	Prior Fiscal Year End 06/30/20	MGMA Hospital Owned Rural
<b>Profitability:</b>					
Operating Margin	↑	-53.12%	-42.69%	-68.15%	-36.58%
Total Profit Margin	↑	-53.12%	-42.69%	-68.15%	-36.58%
Contractual Allowance %	↓	46.92%	45.82%	46.02%	
<b>Liquidity:</b>					
Net Days in Accounts Receivable	↓	47.39	42.82	50.83	39.58
Gross Days in Accounts Receivable	↓	53.61	49.15	54.32	72.82
<b>Productivity and Efficiency:</b>					
Patient Visits Per Day	↓	123.35	126.13	132.42	
Total Net Revenue per FTE	↑	N/A	\$154,951	\$141,843	
Salary Expense per Paid FTE		N/A	\$160,285	\$162,294	
Salary and Benefits as a % of Net Revenue		129.63%	119.60%	134.65%	91.26%
Employee Benefits %		14.71%	15.62%	17.69%	6.10%

# Statement of Revenue and Expense

## MEMORIAL HOSPITAL OF SWEETWATER COUNTY

ROCK SPRINGS, WY

Two months ended August 31, 2020

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	CURRENT MONTH				Prior Year 08/31/19
	Actual 08/31/20	Budget 08/31/20	Positive (Negative) Variance	Percentage Variance	
Gross Patient Revenue					
Clinic Revenue	1,333,361	1,050,671	282,690	26.91%	1,275,579
Specialty Clinic Revenue	165,452	302,491	(137,040)	-45.30%	202,768
Total Gross Patient Revenue	1,498,813	1,353,162	145,650	10.76%	1,478,347
Deductions From Revenue					
Discounts and Allowances	(703,186)	(618,697)	(84,489)	-13.66%	(637,953)
Total Deductions From Revenue	(703,186)	(618,697)	(84,489)	-13.66%	(637,953)
Net Patient Revenue	795,627	734,466	61,161	8.33%	840,394
Other Operating Revenue	75,344	67,787	7,557	11.15%	68,365
Total Operating Revenue	870,971	802,253	68,718	8.57%	908,759
Operating Expenses					
Salaries and Wages	984,249	980,037	(4,212)	-0.43%	911,293
Fringe Benefits	144,807	229,097	84,289	36.79%	163,131
Contract Labor	0	0	0	0.00%	0
Physicians Fees	64,083	86,067	21,984	25.54%	53,872
Purchased Services	8,196	10,328	2,131	20.64%	9,505
Supply Expense	9,216	17,289	8,073	46.69%	13,686
Utilities	979	1,747	769	43.99%	514
Repairs and Maintenance	25,877	23,235	(2,642)	-11.37%	21,820
Insurance Expense	11,873	18,855	6,981	37.03%	19,281
All Other Operating Expenses	62,041	90,215	28,173	31.23%	84,732
Bad Debt Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Leases and Rentals	3,652	3,143	(509)	-16.19%	5,815
Depreciation and Amortization	18,615	18,155	(460)	-2.53%	21,983
Interest Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Total Operating Expenses	1,333,588	1,478,167	144,578	9.78%	1,305,631
Net Operating Surplus/(Loss)	(462,618)	(675,914)	213,296	-31.56%	(396,872)
Total Net Surplus/(Loss)	(\$462,618)	(\$675,914)	\$213,296	-31.56%	(\$396,872)
Change In Unrealized Gains/(Losses) on Investments	0	0	0	0.00%	0
Increase/(Decrease in Unrestricted Net Assets	(\$462,618)	(\$675,914)	\$213,296	-31.56%	(\$396,872)
Operating Margin	-53.12%	-84.25%			-43.67%
Total Profit Margin	-53.12%	-84.25%			-43.67%
EBIDA	-50.98%	-81.99%			-41.25%



# Statement of Revenue and Expense

## MEMORIAL HOSPITAL OF SWEETWATER COUNTY

### ROCK SPRINGS, WY

Two months ended August 31, 2020

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	YEAR-TO-DATE				Prior Year 08/31/19
	Actual 08/31/20	Budget 08/31/20	Positive (Negative) Variance	Percentage Variance	
Gross Patient Revenue					
Clinic Revenue	2,698,869	2,039,463	659,406	32.33%	2,467,057
Specialty Clinic Revenue	579,930	564,629	15,301	2.71%	360,699
Total Gross Patient Revenue	<u>3,278,799</u>	<u>2,604,092</u>	<u>674,707</u>	<u>25.91%</u>	<u>2,827,755</u>
Deductions From Revenue					
Discounts and Allowances	(1,502,242)	(1,197,157)	(305,085)	-25.48%	(1,245,611)
Total Deductions From Revenue	<u>(1,502,242)</u>	<u>(1,197,157)</u>	<u>(305,085)</u>	<u>-25.48%</u>	<u>(1,245,611)</u>
Net Patient Revenue	<u>1,776,557</u>	<u>1,406,935</u>	<u>369,622</u>	<u>26.27%</u>	<u>1,582,144</u>
Other Operating Revenue	<u>147,997</u>	<u>135,575</u>	<u>12,422</u>	<u>9.16%</u>	<u>142,156</u>
Total Operating Revenue	<u>1,924,554</u>	<u>1,542,510</u>	<u>382,044</u>	<u>24.77%</u>	<u>1,724,300</u>
Operating Expenses					
Salaries and Wages	1,990,807	1,938,327	(52,480)	-2.71%	1,861,312
Fringe Benefits	310,984	452,402	141,408	31.26%	296,026
Contract Labor	0	0	0	0.00%	0
Physicians Fees	140,857	172,133	31,276	18.17%	88,897
Purchased Services	18,948	20,655	1,708	8.27%	17,623
Supply Expense	28,153	34,432	6,280	18.24%	42,086
Utilities	2,267	3,494	1,227	35.12%	1,352
Repairs and Maintenance	46,617	46,469	(148)	-0.32%	42,922
Insurance Expense	23,747	37,710	13,963	37.03%	38,561
All Other Operating Expenses	139,848	151,653	11,805	7.78%	164,729
Bad Debt Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Leases and Rentals	6,793	6,123	(670)	-10.94%	8,342
Depreciation and Amortization	37,103	36,309	(793)	-2.18%	44,002
Interest Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Total Operating Expenses	<u>2,746,134</u>	<u>2,899,710</u>	<u>153,576</u>	<u>5.30%</u>	<u>2,605,852</u>
Net Operating Surplus/(Loss)	<u>(821,580)</u>	<u>(1,357,200)</u>	<u>535,620</u>	<u>-39.47%</u>	<u>(881,552)</u>
Total Net Surplus/(Loss)	<u>(821,580)</u>	<u>(1,357,200)</u>	<u>\$535,620</u>	<u>-39.47%</u>	<u>(\$881,552)</u>
Change in Unrealized Gains/(Losses) on Investments	0	0	0	0.00%	0
Increase/(Decrease) in Unrestricted Net Assets	<u>(821,580)</u>	<u>(1,357,200)</u>	<u>\$535,620</u>	<u>-39.47%</u>	<u>(881,552)</u>
Operating Margin	-42.69%	-87.99%			-51.13%
Total Profit Margin	-42.69%	-87.99%			-51.13%
EBIDA	-40.76%	-85.63%			-48.57%



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

**PAGE 6**

	Actual 8/31/2020	Actual 7/31/2020	Actual 6/30/2020	Actual 5/31/2020	Actual 4/30/2020
Gross Patient Revenue					
Clinic Revenue	\$1,333,361	\$1,365,508	\$1,291,506	\$1,116,816	\$1,146,806
Specialty Clinic Revenue	\$165,452	\$414,478	\$281,911	\$314,858	\$288,932
Total Gross Patient Revenue	\$1,498,813	\$1,779,986	\$1,573,417	\$1,431,674	\$1,435,737
Deductions From Revenue					
Discounts and Allowances	\$703,186	\$799,056	\$736,720	\$637,461	\$713,510
Total Deductions From Revenue	703,186	799,056	736,720	637,461	713,510
Net Patient Revenue	\$795,627	\$980,930	\$836,697	\$794,213	\$722,227
Other Operating Revenue	\$75,344	\$72,653	\$77,628	\$86,375	\$32,189
Total Operating Revenue	870,971	1,053,583	914,325	880,588	754,416
Operating Expenses					
Salaries and Wages	\$984,249	\$1,006,558	\$983,977	\$979,724	\$986,494
Fringe Benefits	\$144,807	\$166,187	\$170,996	\$162,005	\$171,434
Contract Labor	\$0	\$0	\$0	\$0	\$0
Physicians Fees	\$64,083	\$78,774	\$125,801	\$119,793	\$141,169
Purchased Services	\$8,196	\$10,752	\$9,098	\$10,144	\$8,138
Supply Expense	\$9,216	\$18,937	\$10,722	\$10,730	\$7,125
Utilities	\$979	\$1,288	\$1,861	\$1,804	\$1,803
Repairs and Maintenance	\$25,877	\$20,741	\$24,187	\$26,489	\$23,772
Insurance Expense	\$11,873	\$11,873	\$11,873	\$17,874	\$17,874
All Other Operating Expenses	\$62,041	\$77,807	\$45,948	\$53,551	\$47,258
Bad Debt Expense (Non-Governmental Providers)					
Leases and Rentals	\$3,652	\$3,141	\$3,083	\$2,405	\$2,476
Depreciation and Amortization	\$18,615	\$18,488	\$18,487	\$18,488	\$21,166
Interest Expense (Non-Governmental Providers)					
Total Operating Expenses	\$1,333,588	\$1,412,545	\$1,406,033	\$1,403,007	\$1,328,709
Net Operating Surplus/(Loss)	(\$462,618)	(\$358,963)	(\$491,708)	(\$542,419)	(\$574,293)
Total Net Surplus/(Loss)	(\$462,618)	(\$358,963)	(\$491,708)	(\$542,419)	(\$574,293)
Change in Unrealized Gains/(Losses) on Investr	0	0	0	0	0
Increase/(Decrease in Unrestricted Net Assets	(\$462,618)	(\$358,963)	(\$491,708)	(\$542,419)	(\$574,293)
Operating Margin	-53.12%	-34.07%	-53.78%	-63.03%	-76.12%
Total Profit Margin	-53.12%	-34.07%	-53.78%	-63.03%	-76.12%
EBIDA	-50.98%	-32.32%	-51.76%	-60.88%	-73.32%

Actual 3/30/2020	Actual 2/29/2020	Actual 1/31/2020	Actual 12/31/2019	Actual 11/30/2019	Actual 10/31/2019	Actual 9/30/2019	Actual 8/31/2019
\$884,201	\$1,161,210	\$1,485,917	\$1,143,777	\$1,063,719	\$1,354,373	\$1,165,206	\$1,275,579
\$244,806	\$262,865	\$247,493	\$269,430	\$309,819	\$313,861	\$204,888	\$202,768
\$1,229,007	\$1,424,074	\$1,733,410	\$1,413,207	\$1,373,338	\$1,668,235	\$1,370,094	\$1,478,347
\$556,603	\$675,312	\$757,358	\$637,085	\$657,305	\$768,291	\$658,181	\$637,953
556,603	675,312	757,358	637,085	657,305	768,291	658,181	637,953
\$672,404	\$748,762	\$976,052	\$776,122	\$716,033	\$899,944	\$711,913	\$840,394
\$43,725	\$64,550	\$68,061	\$64,399	\$58,298	\$79,575	\$67,413	\$68,365
716,129	813,312	1,044,113	840,521	774,331	979,519	779,326	908,759
\$1,031,014	\$1,032,181	\$938,454	\$1,032,409	\$976,184	\$963,743	\$986,089	\$911,293
\$216,704	\$189,196	\$208,849	\$161,562	\$165,925	\$179,354	\$142,365	\$163,131
\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
\$180,415	\$206,558	\$118,254	\$147,283	\$72,557	\$177,148	\$48,927	\$53,872
\$18,433	\$11,304	\$12,082	\$8,426	\$10,650	\$10,397	\$10,324	\$9,505
\$25,468	\$14,825	\$19,220	\$12,817	\$20,632	\$22,796	\$27,662	\$13,886
\$1,818	\$1,891	\$1,704	\$1,713	\$877	\$910	\$1,672	\$514
\$23,881	\$22,274	\$20,942	\$26,840	\$17,344	\$22,517	\$20,680	\$21,820
\$17,874	\$17,874	\$17,812	\$17,812	\$17,368	\$20,493	\$19,281	\$19,281
\$96,350	\$59,801	\$75,204	\$65,983	\$88,337	\$101,086	\$70,188	\$84,732
\$4,976	\$4,842	\$6,363	\$4,857	\$4,899	\$4,078	\$4,804	\$5,815
\$21,436	\$21,436	\$21,436	\$21,754	\$21,755	\$21,983	\$21,983	\$21,983
\$1,613,368	\$1,581,982	\$1,440,322	\$1,500,455	\$1,396,328	\$1,524,507	\$1,351,974	\$1,305,631
(\$897,239)	(\$768,670)	(\$396,209)	(\$659,933)	(\$621,997)	(\$544,988)	(\$572,648)	(\$396,872)
(\$897,239)	(\$768,670)	(\$396,209)	(\$659,933)	(\$621,997)	(\$544,988)	(\$572,648)	(\$396,872)
0	0	0	0	0	0	0	0
(\$897,239)	(\$768,670)	(\$396,209)	(\$659,933)	(\$621,997)	(\$544,988)	(\$572,648)	(\$396,872)
-125.29%	-94.51%	-37.95%	-78.51%	-80.33%	-55.64%	-73.48%	-43.67%
-125.29%	-94.51%	-37.95%	-78.51%	-80.33%	-55.64%	-73.48%	-43.67%
-122.30%	-91.88%	-35.89%	-75.93%	-77.52%	-53.39%	-70.66%	-41.25%

Patient Statistics

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

ROCK SPRINGS, WY

Two months ended August 31, 2020

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Current Month				STATISTICS	Year-To-Date			
Actual	Budget	Positive/ (Negative) Variance	Prior Year		Actual	Budget	Positive/ (Negative) Variance	Prior Year
08/31/20	08/31/20		08/31/19		08/31/20	08/31/20		08/31/19
Outpatient Statistics:								
3,824	5,409	(1,585)	4,220	Clinic Visits - Primary Care	7,820	10,002	(2,182)	8,280
499	621	(122)	470	Clinic Visits - Specialty Clinics	1,136	1,166	(30)	898
Productivity Statistics:								
65.86	70.76	(4.90)	66.67	FTE's - Worked	65.14	70.76	(5.62)	64.36
75.44	77.76	(2.32)	72.42	FTE's - Paid	73.12	77.76	(4.64)	72.75

**MEMORIAL HOSPITAL OF SWEETWATER COUNTY  
CASH DISBURSEMENT SUMMARY FOR AUGUST 20**

PAYMENT SOURCE	NO. OF DISBURSEMENTS	AMOUNT
OPERATIONS (GENERAL FUND/KEYBANK)	695	6,339,453.62
CAPITAL EQUIPMENT (PLANT FUND)	9	169,900.75
CONSTRUCTION IN PROGRESS (BUILDING FUND)	2	339,286.60
PAYROLL AUGUST 2, 2020	N/A	1,449,702.91
PAYROLL AUGUST 16, 2020	N/A	1,507,175.38
PAYROLL AUGUST 30, 2020	N/A	1,486,915.78
TOTAL CASH OUTFLOW		<u>\$6,848,640.97</u>
CASH COLLECTIONS		\$8,160,591.83
INCREASE/DECREASE IN CASH		<u>\$1,311,950.86</u>

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

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
001067	7/9/2020	CLARK'S QUALITY ROOFING, INC.	132,270.67	CENTRAL PLANT UPGRADE		
001068	7/17/2020	ROOFTOP ANCHOR, INC.	36,035.69	CENTRAL PLANT UPGRADE		
W/T	7/16/2020	WELLS FARGO	104,348.18	WF DEBT SERVICE		
<b>JULY TOTALS</b>					272,654.54	272,654.54

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
001069	8/14/2020	BH INC	234,938.42	CENTRAL PLANT UPGRADE		
W/T	8/16/2020		104,348.18	WF DEBT SERVICE		
<b>AUGUST TOTALS</b>					339,286.60	611,941.14

**PLANT FUND CASH DISBURSEMENTS  
FISCAL YEAR 2021**

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
002340	7/9/2020	CONVERGEONE, INC.	4,343.78	INJECTOR CABLES FOR WIRELESS SYSTEM		
002341	7/17/2020	CDW GOVERNMENT LLC	12,600.00	DELL WORKSTATIONS AND MONITORS		
002342	7/17/2020	FOLSOM ASSOCIATES (HA FOLSOM & A	13,040.57	CONDENSATE PUMPS		
002343	7/17/2020	MIZUHO ORTHOPEDIC SYSTEMS, INC	51,063.00	OSI RADIO LUCENT OR TABLE		
002344	7/23/2020	CONMED LINVATEC	39,382.76	CONMED POWER SYSTEM		
002345	7/23/2020	OLYMPUS AMERICA INC	23,822.12	LONG CYSTOSCOPY RESECTION TRAY		
<b>JULY TOTALS</b>					<b>144,252.23</b>	<b>144,252.23</b>

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
002346	8/6/2020	MOPEC INC	6,568.97	BODY TRAYS-MORGUE		
002347	8/6/2020	MAGNUM MOBILE SPECIALTY VEHICL	91,770.00	MOBILE LAB, CLINIC, SWABBING STATION - 37 FT		
002348	8/14/2020	CONVERGEONE, INC.	8,194.80	CISCO VOIP PHONE LICENSES (30)		
002348	8/14/2020	CONVERGEONE, INC.	19,029.00	REPLACE WIRELESS NETWORK		
002349	8/14/2020	NANOSONICS, INC	10,625.00	TROPHON FOR UROLOGY		
002350	8/14/2020	P3 CONSULTING LLC	15,000.00	DYNAMICS GP UPGRADE		
002351	8/18/2020	CONMED LINVATEC	7,810.80	CONMED POWER SYSTEM		
002352	8/18/2020	INNOVATION WIRELESS	685.00	SYNCHRONIZED CLOCKS		
002353	8/27/2020	OLYMPUS AMERICA INC.-LIFESCIENCE	10,217.18	MICROSCOPE		
<b>AUGUST TOTALS</b>					<b>169,900.75</b>	<b>314,152.98</b>



## MEMORIAL HOSPITAL OF SWEETWATER COUNTY

## GENERAL FUND DISBURSEMENTS

8/31/20

Amount	Description
32,379.71	<b>Advertising Total</b>
3,529.94	<b>Billing Services Total</b>
14,323.95	<b>Blood Total</b>
10,400.00	<b>Building Lease Total</b>
3,476.53	<b>Cellular Telephone Total</b>
39,329.07	<b>Collection Agency Total</b>
8,135.04	<b>Computer Equipment Total</b>
687.99	<b>Consulting Fees Total</b>
330,019.94	<b>Contract Maintenance Total</b>
48,477.16	<b>Contract Personnel Total</b>
589.32	<b>Courier Services Total</b>
24,713.80	<b>Dental Insurance Total</b>
10,489.75	<b>Dialysis Supplies Total</b>
6,999.00	<b>Dues &amp; Subscriptions Total</b>
5,042.03	<b>Education &amp; Travel Total</b>
1,776.50	<b>Employee Recruitment Total</b>
6,620.74	<b>Employee Vision Plan Total</b>
89,731.52	<b>Equipment Lease Total</b>
34,862.39	<b>Food Total</b>
6,324.28	<b>Freight Total</b>
596.27	<b>Fuel Total</b>
2,576.02	<b>Garbage Collection Total</b>
479,395.57	<b>Group Health Total</b>
181,460.91	<b>Hospital Supplies Total</b>
5,590.00	<b>Implant Supplies Total</b>
43,752.41	<b>Insurance Premiums Total</b>
10,059.52	<b>Insurance Refund Total</b>
140,778.96	<b>Laboratory Services Total</b>
50,162.59	<b>Laboratory Supplies Total</b>
12,437.50	<b>Legal Fees Total</b>
4,500.00	<b>License &amp; Taxes Total</b>
5,136.16	<b>Life Insurance Total</b>
45,050.75	<b>Locum Tenens Total</b>
17,590.70	<b>Maintenance &amp; Repair Total</b>
18,970.67	<b>Maintenance Supplies Total</b>
1,211.75	<b>Marketing &amp; Promotional Supplies Total</b>
3,530.98	<b>Medical Surgical Supplies Total</b>
884.00	<b>Memberships Total</b>
2,166.22	<b>MHSC Foundation Total</b>
10,146.43	<b>Minor Equipment Total</b>
175.00	<b>Monthly Pest Control Total</b>
4,862.41	<b>Non Medical Supplies Total</b>
752.00	<b>Notary Bond Total</b>
12,165.15	<b>Office Supplies Total</b>
3,641.49	<b>Other Employee Benefits Total</b>
20,739.52	<b>Other Medical Surgical Supplies Total</b>
1,255.05	<b>Other Non Medical Surgical Supplies Total</b>

8/31/20

[illegible]

MEMORIAL HOSPITAL OF SWEETWATER COUNTY  
GENERAL FUND DISBURSEMENTS  
8/31/20

Check Number	Date	Vendor Check Name	Amount	Description
173021	8/14/2020	LITURGICAL PUBLICATIONS, INC	867.00	Advertising
173081	8/14/2020	ROCKET MINER	4,000.00	Advertising
173065	8/14/2020	THE RADIO NETWORK	2,916.65	Advertising
173053	8/14/2020	SCORPION HEALTHCARE LLC	7,348.55	Advertising
173157	8/18/2020	ROCKET MINER	5,521.66	Advertising
173160	8/18/2020	SCORPION HEALTHCARE LLC	2,849.00	Advertising
173304	8/27/2020	BIG THICKET BROADCASTING	3,189.00	Advertising
173308	8/27/2020	BRIDGER VALLEY PIONEER	169.20	Advertising
173351	8/27/2020	KEMMERER GAZETTE	133.40	Advertising
173399	8/27/2020	SUBLETTE EXAMINER	279.25	Advertising
173383	8/27/2020	PINEDALE ROUNDUP	20.00	Advertising
EFT000000006058	8/6/2020	LAMAR ADVERTISING	400.00	Advertising
EFT000000006078	8/14/2020	GREEN RIVER STAR	1,806.00	Advertising
EFT000000006081	8/14/2020	LAMAR ADVERTISING	700.00	Advertising
EFT000000006088	8/14/2020	ROCK SPRINGS SWEETWATER COUNTY AIRPORT	280.00	Advertising
EFT000000006100	8/18/2020	LAMAR ADVERTISING	1,200.00	Advertising
EFT000000006114	8/27/2020	LAMAR ADVERTISING	700.00	Advertising
173329	8/27/2020	EXPRESS MEDICAID BILLING SERV	3,529.94	Billing Services
173071	8/14/2020	VITALANT	9,581.98	Blood
173422	8/27/2020	VITALANT	4,741.97	Blood
173319	8/27/2020	CURRENT PROPERTIES, LLC	3,500.00	Building Lease
173342	8/27/2020	HILLTOP PROPERTIES, LLC	6,900.00	Building Lease
172946	8/6/2020	VERIZON WIRELESS, LLC	3,476.53	Cellular Telephone
173072	8/14/2020	WAKEFIELD & ASSOCIATES, INC.	38,843.24	Collection Agency
173112	8/18/2020	COLLECTION PROFESSIONALS, INC	485.83	Collection Agency
172978	8/14/2020	CDW GOVERNMENT LLC	675.55	Computer Equipment
173108	8/18/2020	CDW GOVERNMENT LLC	7,459.49	Computer Equipment
173076	8/14/2020	WOODARD & CURRAN INC.	687.99	Consulting Fees
172876	8/6/2020	CHANGE HEALTHCARE SOLUTIONS, LLC	4,032.94	Contract Maintenance
172880	8/6/2020	CONDUENT BUSINESS SERVICES, LLC	2,500.00	Contract Maintenance
172918	8/6/2020	PHILIPS HEALTHCARE	289.87	Contract Maintenance
172949	8/6/2020	WORLDWASH LLC	1,450.00	Contract Maintenance
172881	8/6/2020	CONVERGEONE, INC.	3,637.50	Contract Maintenance
172920	8/6/2020	QUADRAMED	56,657.50	Contract Maintenance
172948	8/6/2020	WAYSTAR HEALTH	4,250.00	Contract Maintenance
172983	8/14/2020	CONDUENT BUSINESS SERVICES, LLC	35,700.00	Contract Maintenance
172999	8/14/2020	GE HEALTHCARE	50,871.97	Contract Maintenance
173040	8/14/2020	PHILIPS HEALTHCARE	1,133.00	Contract Maintenance
173007	8/14/2020	CONTRACTS	401.00	Contract Maintenance
173034	8/14/2020	NEXTGEN HEALTHCARE, INC.	587.00	Contract Maintenance
173044	8/14/2020	QUADRAMED	14,292.19	Contract Maintenance
173077	8/14/2020	WYODATA SECURITY INC.	1,431.00	Contract Maintenance
173113	8/18/2020	CONDUENT BUSINESS SERVICES, LLC	34,835.00	Contract Maintenance
173133	8/18/2020	HEALTHCARE SOLUTIONS OF NC	1,024.00	Contract Maintenance
173135	8/18/2020	HENRY SCHEIN PRACTICE SOLUTIONS	841.50	Contract Maintenance
173155	8/18/2020	PHILIPS HEALTHCARE	2,864.00	Contract Maintenance
173161	8/18/2020	SIEMENS MEDICAL SOLUTIONS USA	18,446.08	Contract Maintenance
173092	8/18/2020	ABILITY NETWORK INC	769.65	Contract Maintenance
173162	8/18/2020	SITEIMPROVE, INC.	2,048.00	Contract Maintenance
173312	8/27/2020	CHANGE HEALTHCARE SOLUTIONS, LLC	4,155.58	Contract Maintenance
173334	8/27/2020	GE HEALTHCARE	23,125.58	Contract Maintenance
173362	8/27/2020	MCKESSON HEALTH SOLUTIONS	1,534.40	Contract Maintenance
173367	8/27/2020	MEDINET	80.00	Contract Maintenance

MEMORIAL HOSPITAL OF SWEETWATER COUNTY  
GENERAL FUND DISBURSEMENTS  
8/31/20

173379	8/27/2020	NUANCE COMMUNICATIONS, INC	105.00	Contract Maintenance
173381	8/27/2020	PHILIPS HEALTHCARE	1,433.00	Contract Maintenance
173393	8/27/2020	SIEMENS MEDICAL SOLUTIONS USA	632.67	Contract Maintenance
173413	8/27/2020	THOMSON REUTERS	1,145.74	Contract Maintenance
173335	8/27/2020	GE MEDICAL SYSTEMS INFO TECH	35,590.66	Contract Maintenance
173346	8/27/2020	ISI WATER CHEMISTRIES	2,315.00	Contract Maintenance
EFT000000006091	8/14/2020	T-SYSTEM, INC	8,882.67	Contract Maintenance
W/T	8/18/2020	ORTHO PHREESIA FEES	10.80	Contract Maintenance
W/T	8/6/2020	OPTIMIS	200.00	Contract Maintenance
W/T	8/6/2020	ZENITH	209.49	Contract Maintenance
W/T	8/6/2020	ZENITH	347.75	Contract Maintenance
W/T	8/17/2020	CARE CLOUD	349.00	Contract Maintenance
W/T	8/21/2020	TRIZETTO FEES	5,319.30	Contract Maintenance
W/T	8/18/2020	CLINIC PHREESIA FEES	5,521.10	Contract Maintenance
172893	8/6/2020	FOCUSONE SOLUTIONS LLC	4,510.50	Contract Personnel
172901	8/6/2020	JIM LANE	2,046.00	Contract Personnel
172990	8/14/2020	ELWOOD STAFFING SERVICES, INC	2,591.15	Contract Personnel
172997	8/14/2020	FOCUSONE SOLUTIONS LLC	13,368.88	Contract Personnel
173123	8/18/2020	ELWOOD STAFFING SERVICES, INC	1,973.25	Contract Personnel
173128	8/18/2020	FOCUSONE SOLUTIONS LLC	11,340.25	Contract Personnel
173159	8/18/2020	SARAH ROTH	720.00	Contract Personnel
173333	8/27/2020	FOCUSONE SOLUTIONS LLC	11,927.13	Contract Personnel
173060	8/14/2020	SUSAN K CROFUTT	589.32	Courier Services
173119	8/18/2020	DELTA DENTAL	24,713.80	Dental Insurance
172898	8/6/2020	HENRY SCHEIN INC	209.21	Dialysis Supplies
172894	8/6/2020	FRESENIUS USA MARKETING, INC.	8,608.14	Dialysis Supplies
172998	8/14/2020	FRESENIUS USA MARKETING, INC.	1,245.66	Dialysis Supplies
173134	8/18/2020	HENRY SCHEIN INC	220.00	Dialysis Supplies
173339	8/27/2020	HACH COMPANY	28.94	Dialysis Supplies
173340	8/27/2020	HENRY SCHEIN INC	124.95	Dialysis Supplies
EFT000000006080	8/14/2020	HENRY SCHEIN INC	52.85	Dialysis Supplies
172911	8/6/2020	MSDS ONLINE, INC	6,959.00	Dues & Subscriptions
173082	8/14/2020	DEPARTMENT OF HOMELAND SECURITY/USCIS	500.00	Education & Travel
173083	8/14/2020	DEPARTMENT OF HOMELAND SECURITY/USCIS	460.00	Education & Travel
173084	8/14/2020	DEPARTMENT OF HOMELAND SECURITY/USCIS	1,440.00	Education & Travel
173100	8/18/2020	ASHE	150.00	Education & Travel
173183	8/18/2020	WYOMING HOSPITAL ASSOCIATION	1,765.53	Education & Travel
173116	8/18/2020	COPE2THRIVE, LLC	326.50	Education & Travel
EFT000000006059	8/6/2020	MY EDUCATIONAL RESOURCES	350.00	Education & Travel
173027	8/14/2020	MHSC MEDICAL STAFF	50.00	Education & Travel
173005	8/14/2020	HOLIDAY INN - ROCK SPRINGS	693.00	Employee Recruitment
173008	8/14/2020	INSIGHT INVESTIGATIONS, INC	593.50	Employee Recruitment
EFT000000006104	8/18/2020	SST TESTING +, INC.	490.00	Employee Recruitment
173070	8/14/2020	VISION SERVICE PLAN - WY	6,620.74	Employee Vision Plan
172940	8/6/2020	US BANK EQUIPMENT FINANCE	801.22	Equipment Lease
172977	8/14/2020	CAREFUSION SOLUTIONS, LLC	21,293.00	Equipment Lease
173000	8/14/2020	GE HEALTHCARE FINANCIAL SERVICES	10,692.03	Equipment Lease
173054	8/14/2020	SIEMENS FINANCIAL SERVICES, INC	18,429.63	Equipment Lease
173067	8/14/2020	US BANK EQUIPMENT FINANCE	1,832.24	Equipment Lease
173177	8/18/2020	US BANK EQUIPMENT FINANCE	773.98	Equipment Lease
173316	8/27/2020	COPIER & SUPPLY COMPANY	9,269.65	Equipment Lease
173384	8/27/2020	PITNEY BOWES GLOBAL FINANCIAL SERVICES, LLC	1,149.48	Equipment Lease
173392	8/27/2020	SHADOW MOUNTAIN WATER CO. WY	607.60	Equipment Lease
173394	8/27/2020	SIEMENS FINANCIAL SERVICES, INC	18,429.63	Equipment Lease

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173417	8/27/2020	US BANK EQUIPMENT FINANCE	801.22	Equipment Lease
EFT000000006066	8/6/2020	TIMEPAYMENT CORP	5,250.53	Equipment Lease
EFT000000006105	8/18/2020	TIMEPAYMENT CORP	401.31	Equipment Lease
172891	8/6/2020	F B MCFADDEN WHOLESALE	320.35	Food
172905	8/6/2020	LLORENS PHARMACEUTICAL INTERNATIONAL DIVISION INC	341.10	Food
172935	8/6/2020	SYSCO INTERMOUNTAIN FOOD	124.31	Food
172886	8/6/2020	DFA DAIRY BRANDS CORP., LLC	305.65	Food
172995	8/14/2020	F B MCFADDEN WHOLESALE	3,797.16	Food
172994	8/14/2020	FARMER BROS CO	1,456.50	Food
173035	8/14/2020	NICHOLAS & CO INC	12,854.55	Food
173062	8/14/2020	SYSCO INTERMOUNTAIN FOOD	4,844.76	Food
173074	8/14/2020	WESTERN WYOMING BEVERAGES INC	2,199.59	Food
172908	8/14/2020	DFA DAIRY BRANDS CORP., LLC	576.80	Food
173125	8/18/2020	F B MCFADDEN WHOLESALE	1,985.95	Food
173118	8/18/2020	DFA DAIRY BRANDS CORP., LLC	160.64	Food
173378	8/27/2020	NICHOLAS & CO INC	2,739.34	Food
173404	8/27/2020	SYSCO INTERMOUNTAIN FOOD	1,027.39	Food
173423	8/27/2020	WESTERN WYOMING BEVERAGES INC	474.80	Food
173320	8/27/2020	DFA DAIRY BRANDS CORP., LLC	304.00	Food
EFT000000006074	8/14/2020	COCA-COLA BOTTLING COMPANY HIGH COUNTRY	953.50	Food
EFT000000006111	8/27/2020	COCA-COLA BOTTLING COMPANY HIGH COUNTRY	396.00	Food
173126	8/18/2020	FED EX	93.46	Freight
173173	8/18/2020	TRIOSE, INC	6,206.87	Freight
173176	8/18/2020	UPS STORE	23.95	Freight
172923	8/6/2020	RED HORSE OIL COMPANIES INC	596.27	Fuel
EFT000000006092	8/14/2020	WWS - ROCK SPRINGS	2,576.02	Garbage Collection
W/T	8/22/2020	FURTHER ADMIN FEES	191.75	Group Health
W/T	8/26/2020	FURTHER FLEX 8/26/20	349.68	Group Health
W/T	8/7/2020	FURTHER FLEX 8/5/20	1,082.29	Group Health
W/T	8/14/2020	FURTHER FLEX 8/12/20	2,820.58	Group Health
W/T	8/14/2020	FURTHER FLEX 8/19/20	2,842.94	Group Health
W/T	8/21/2020	BCBS 8/14/20	95,153.53	Group Health
W/T	8/14/2020	BCBS 8/7/20	96,220.07	Group Health
W/T	8/28/2020	BCBS 8/21/20	116,169.92	Group Health
W/T	8/7/2020	BCBS 7/31/20	164,564.81	Group Health
172856	8/6/2020	ABBOFT LABORATORIES	2,371.77	Hospital Supplies
172860	8/6/2020	APPLIED MEDICAL	756.00	Hospital Supplies
172861	8/6/2020	ARTHREX INC.	1,765.00	Hospital Supplies
172863	8/6/2020	ASPEN SURGICAL	392.74	Hospital Supplies
172867	8/6/2020	BARD PERIPHERAL VASCULAR INC	1,044.00	Hospital Supplies
172868	8/6/2020	BAXTER HEALTHCARE CORP/IV	3,542.52	Hospital Supplies
172869	8/6/2020	BAYER HEALTHCARE LLC	2,646.39	Hospital Supplies
172882	8/6/2020	COOK MEDICAL INCORPORATED	597.32	Hospital Supplies
172885	8/6/2020	CURBELL MEDICAL	499.18	Hospital Supplies
172887	8/6/2020	DOCTOR EASY MEDICAL PRODUCTS	83.45	Hospital Supplies
172890	8/6/2020	EXPAND-A-BAND, LLC	66.00	Hospital Supplies
172897	8/6/2020	GYNEX CORP	115.40	Hospital Supplies
172899	8/6/2020	HULL ANESTHESIA INC	185.00	Hospital Supplies
172902	8/6/2020	KARL STORZ ENDOSCOPY-AMERICA	9,679.32	Hospital Supplies
172934	8/6/2020	LEICA BIOSYSTEMS RICHMOND	282.24	Hospital Supplies
172913	8/6/2020	M V A P MEDICAL SUPPLIES, INC.	1,714.10	Hospital Supplies
172907	8/6/2020	MEDTRONIC USA INC	272.00	Hospital Supplies
172910	8/6/2020	MINDRAY DS USA, INC.	352.00	Hospital Supplies
172914	8/6/2020	OLYMPUS AMERICA INC	106.52	Hospital Supplies



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172915	8/6/2020	OWENS & MINOR 90005430	6,360.22	Hospital Supplies
172917	8/6/2020	PERFORMANCE HEALTH SUPPLY INC	179.09	Hospital Supplies
172924	8/6/2020	RESMED CORP	170.00	Hospital Supplies
172925	8/6/2020	RESPIRONICS	498.00	Hospital Supplies
172931	8/6/2020	STERIS CORPORATION	4,581.14	Hospital Supplies
172937	8/6/2020	TRI-ANIM HEALTH SERVICES INC	1,510.35	Hospital Supplies
172944	8/6/2020	UTAH MEDICAL PRODUCTS INC	567.12	Hospital Supplies
172945	8/6/2020	VAPOTHERM INC.	532.00	Hospital Supplies
172947	8/6/2020	WAXIE SANITARY SUPPLY	456.41	Hospital Supplies
172930	8/6/2020	STATLAB MEDICAL PRODUCTS	14,958.75	Hospital Supplies
172954	8/14/2020	ABBOTT LABORATORIES	1,480.87	Hospital Supplies
173052	8/14/2020	ABBOTT NUTRITION	19.70	Hospital Supplies
172956	8/14/2020	AESCULAP INC	453.90	Hospital Supplies
172962	8/14/2020	APPLIED MEDICAL	2,250.00	Hospital Supplies
172963	8/14/2020	ARGON MEDICAL	284.00	Hospital Supplies
172964	8/14/2020	ARTHREX INC.	389.00	Hospital Supplies
172967	8/14/2020	B BRAUN MEDICAL INC.	340.00	Hospital Supplies
172966	8/14/2020	BAYER HEALTHCARE LLC	787.53	Hospital Supplies
172969	8/14/2020	BIOMET SPORTS MEDICINE	1,960.00	Hospital Supplies
172970	8/14/2020	BOSTON SCIENTIFIC CORP	1,292.77	Hospital Supplies
172975	8/14/2020	CARDINAL HEALTH/V. MUELLER	13,803.17	Hospital Supplies
172984	8/14/2020	CONMED CORPORATION	389.95	Hospital Supplies
172985	8/14/2020	COOK MEDICAL INCORPORATED	861.00	Hospital Supplies
172989	8/14/2020	DJ ORTHOPEDICS, LLC	182.43	Hospital Supplies
172993	8/14/2020	EXPAND-A-BAND, LLC	66.00	Hospital Supplies
173001	8/14/2020	GENERAL HOSPITAL SUPPLY CORPORATION	222.00	Hospital Supplies
173003	8/14/2020	GYNEX CORP	92.45	Hospital Supplies
173004	8/14/2020	HEALTHCARE LOGISTICS INC	63.29	Hospital Supplies
173059	8/14/2020	LEICA BIOSYSTEMS RICHMOND	289.39	Hospital Supplies
173023	8/14/2020	MEDI-DOSE INCORPORATED	74.20	Hospital Supplies
173030	8/14/2020	MINDRAY DS USA, INC.	231.00	Hospital Supplies
173036	8/14/2020	OLYMPUS AMERICA INC	3,665.00	Hospital Supplies
173037	8/14/2020	OWENS & MINOR 90005430	5,164.12	Hospital Supplies
173039	8/14/2020	PERFORMANCE HEALTH SUPPLY INC	32.30	Hospital Supplies
173057	8/14/2020	STERIS CORPORATION	4,045.39	Hospital Supplies
173063	8/14/2020	TELEFLEX MEDICAL INC.	348.00	Hospital Supplies
173069	8/14/2020	VERATHON INC.	360.00	Hospital Supplies
173073	8/14/2020	WAXIE SANITARY SUPPLY	396.13	Hospital Supplies
173095	8/18/2020	AMAZON.COM CREDIT PLAN	3,400.54	Hospital Supplies
173098	8/18/2020	APPLIED MEDICAL	796.00	Hospital Supplies
173099	8/18/2020	ARTHREX INC.	240.00	Hospital Supplies
173103	8/18/2020	B BRAUN MEDICAL INC.	1,634.08	Hospital Supplies
173101	8/18/2020	BAXTER HEALTHCARE CORPORATION	399.20	Hospital Supplies
173102	8/18/2020	BAYER HEALTHCARE LLC	1,858.86	Hospital Supplies
173104	8/18/2020	BOSTON SCIENTIFIC CORP	927.03	Hospital Supplies
173106	8/18/2020	CARDINAL HEALTH/V. MUELLER	6,827.75	Hospital Supplies
173114	8/18/2020	CONE INSTRUMENTS	407.78	Hospital Supplies
173115	8/18/2020	COOK MEDICAL INC.	1,866.90	Hospital Supplies
173120	8/18/2020	DIAGNOSTICA STAGO INC	709.13	Hospital Supplies
173129	8/18/2020	GEM MEDICAL SUPPLIES, LLC	47.58	Hospital Supplies
173130	8/18/2020	GENERAL HOSPITAL SUPPLY CORPORATION	254.00	Hospital Supplies
173132	8/18/2020	HEALTHCARE LOGISTICS INC	104.43	Hospital Supplies
173150	8/18/2020	M V A P MEDICAL SUPPLIES, INC.	582.00	Hospital Supplies
173142	8/18/2020	MARKET LAB, INC	143.44	Hospital Supplies



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173143	8/18/2020	MCKESSON MEDICAL-SURGICAL	417.49	Hospital Supplies
173148	8/18/2020	MICROTEK MEDICAL INC.	429.18	Hospital Supplies
173151	8/18/2020	OLYMPUS AMERICA INC	1,005.37	Hospital Supplies
173153	8/18/2020	OWENS & MINOR 90005430	14,350.39	Hospital Supplies
173154	8/18/2020	PERFORMANCE HEALTH SUPPLY INC	243.15	Hospital Supplies
173165	8/18/2020	SPACELABS MEDICAL	36.57	Hospital Supplies
173167	8/18/2020	STERIS CORPORATION	1,065.07	Hospital Supplies
173172	8/18/2020	TRI-ANIM HEALTH SERVICES INC	1,595.30	Hospital Supplies
173179	8/18/2020	VERATHON INC.	458.00	Hospital Supplies
173180	8/18/2020	WAXIE SANITARY SUPPLY	267.91	Hospital Supplies
173122	8/18/2020	EDGE PHARMACEUTICALS, LLC	472.19	Hospital Supplies
173299	8/27/2020	APPLIED MEDICAL	2,682.00	Hospital Supplies
173302	8/27/2020	B BRAUN MEDICAL INC.	662.96	Hospital Supplies
173301	8/27/2020	BARD PERIPHERAL VASCULAR INC	1,044.00	Hospital Supplies
173305	8/27/2020	BIOMET SPORTS MEDICINE	1,100.00	Hospital Supplies
173306	8/27/2020	BOSTON SCIENTIFIC CORP	166.30	Hospital Supplies
173310	8/27/2020	CARDINAL HEALTH/V. MUELLER	10,303.61	Hospital Supplies
173311	8/27/2020	CAREFUSION 2200 INC	1,200.00	Hospital Supplies
173315	8/27/2020	CONE INSTRUMENTS	359.01	Hospital Supplies
173321	8/27/2020	DIAGNOSTICA STAGO INC	408.12	Hospital Supplies
173323	8/27/2020	DJ ORTHOPEDICS, LLC	58.01	Hospital Supplies
173336	8/27/2020	GENERAL HOSPITAL SUPPLY CORPORATION	739.00	Hospital Supplies
173341	8/27/2020	HILL-ROM	70.00	Hospital Supplies
173344	8/27/2020	HULL ANESTHESIA INC	180.00	Hospital Supplies
173400	8/27/2020	LEICA BIOSYSTEMS RICHMOND	719.85	Hospital Supplies
173360	8/27/2020	MARKET LAB, INC	1,187.65	Hospital Supplies
173363	8/27/2020	MCKESSON MEDICAL-SURGICAL	1,248.42	Hospital Supplies
173368	8/27/2020	MEDTRONIC, USA	307.00	Hospital Supplies
173380	8/27/2020	OLYMPUS AMERICA INC	8,663.47	Hospital Supplies
173390	8/27/2020	RESPIRONICS	668.00	Hospital Supplies
173397	8/27/2020	STERIS CORPORATION	445.86	Hospital Supplies
173407	8/27/2020	TELEFLEX MEDICAL INC.	1,800.00	Hospital Supplies
173419	8/27/2020	UTAH MEDICAL PRODUCTS INC	567.12	Hospital Supplies
173420	8/27/2020	VERATHON INC.	360.00	Hospital Supplies
173325	8/27/2020	EDGE PHARMACEUTICALS, LLC	1,251.92	Hospital Supplies
EFT00000006051	8/6/2020	BREG INC	287.02	Hospital Supplies
EFT00000006052	8/6/2020	BSN MEDICAL INC	253.62	Hospital Supplies
EFT00000006057	8/6/2020	HARDY DIAGNOSTICS	398.02	Hospital Supplies
EFT00000006063	8/6/2020	SIEMENS HEALTHCARE DIAGNOSTICS, INC.	188.12	Hospital Supplies
EFT00000006065	8/6/2020	STRYKER INSTRUMENTS	467.83	Hospital Supplies
EFT00000006067	8/6/2020	ZOLL MEDICAL CORPORATION	483.10	Hospital Supplies
EFT00000006071	8/14/2020	BREG INC	429.67	Hospital Supplies
EFT00000006072	8/14/2020	BSN MEDICAL INC	191.73	Hospital Supplies
EFT00000006079	8/14/2020	HARDY DIAGNOSTICS	866.95	Hospital Supplies
EFT00000006090	8/14/2020	STRYKER INSTRUMENTS	1,432.40	Hospital Supplies
EFT00000006093	8/14/2020	ZOLL MEDICAL CORPORATION	1,115.20	Hospital Supplies
EFT00000006096	8/18/2020	BREG INC	106.50	Hospital Supplies
EFT00000006098	8/18/2020	HARDY DIAGNOSTICS	997.43	Hospital Supplies
EFT00000006103	8/18/2020	SIEMENS HEALTHCARE DIAGNOSTICS, INC.	194.06	Hospital Supplies
EFT00000006106	8/18/2020	ZOLL MEDICAL CORPORATION	61.50	Hospital Supplies
EFT00000006110	8/27/2020	BREG INC	383.72	Hospital Supplies
EFT00000006113	8/27/2020	HARDY DIAGNOSTICS	605.78	Hospital Supplies
EFT00000006120	8/27/2020	SIEMENS HEALTHCARE DIAGNOSTICS, INC.	194.06	Hospital Supplies
EFT00000006121	8/27/2020	STRYKER INSTRUMENTS	244.86	Hospital Supplies

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173414	8/27/2020	TREACE MEDICAL CONCEPTS, INC.	5,590.00	Implant Supplies
173066	8/14/2020	PROVIDENT LIFE & ACCIDENT	28,121.27	Insurance Premiums
173416	8/27/2020	PROVIDENT LIFE & ACCIDENT	15,631.14	Insurance Premiums
173222	8/27/2020	INSURANCE REFUND	709.30	Insurance Refund
173425	8/27/2020	INSURANCE REFUND	289.16	Insurance Refund
173233	8/27/2020	INSURANCE REFUND	11.37	Insurance Refund
173268	8/27/2020	INSURANCE REFUND	29.34	Insurance Refund
173287	8/27/2020	INSURANCE REFUND	10.64	Insurance Refund
173237	8/27/2020	INSURANCE REFUND	271.81	Insurance Refund
173238	8/27/2020	INSURANCE REFUND	123.20	Insurance Refund
173239	8/27/2020	INSURANCE REFUND	136.60	Insurance Refund
173251	8/27/2020	INSURANCE REFUND	228.00	Insurance Refund
173241	8/27/2020	INSURANCE REFUND	40.09	Insurance Refund
173267	8/27/2020	INSURANCE REFUND	179.02	Insurance Refund
173215	8/27/2020	INSURANCE REFUND	261.47	Insurance Refund
173286	8/27/2020	INSURANCE REFUND	20.28	Insurance Refund
173217	8/27/2020	INSURANCE REFUND	127.19	Insurance Refund
173219	8/27/2020	INSURANCE REFUND	25.47	Insurance Refund
173230	8/27/2020	INSURANCE REFUND	27.03	Insurance Refund
173252	8/27/2020	INSURANCE REFUND	22.07	Insurance Refund
173191	8/27/2020	INSURANCE REFUND	60.80	Insurance Refund
173211	8/27/2020	INSURANCE REFUND	108.66	Insurance Refund
173274	8/27/2020	INSURANCE REFUND	33.00	Insurance Refund
173275	8/27/2020	INSURANCE REFUND	62.00	Insurance Refund
173276	8/27/2020	INSURANCE REFUND	217.00	Insurance Refund
173243	8/27/2020	INSURANCE REFUND	450.00	Insurance Refund
173186	8/27/2020	INSURANCE REFUND	313.50	Insurance Refund
173269	8/27/2020	INSURANCE REFUND	60.04	Insurance Refund
173279	8/27/2020	INSURANCE REFUND	1,996.66	Insurance Refund
173448	8/27/2020	INSURANCE REFUND	167.96	Insurance Refund
173195	8/27/2020	INSURANCE REFUND	392.28	Insurance Refund
173196	8/27/2020	INSURANCE REFUND	33.25	Insurance Refund
173216	8/27/2020	INSURANCE REFUND	90.00	Insurance Refund
173264	8/27/2020	INSURANCE REFUND	2,368.44	Insurance Refund
173270	8/27/2020	INSURANCE REFUND	1,193.89	Insurance Refund
173026	8/14/2020	METABOLIC NEWBORN SCREENING	2,184.00	Laboratory Services
172958	8/14/2020	ALLERMATRIX INC	1,679.00	Laboratory Services
173146	8/18/2020	METABOLIC NEWBORN SCREENING	1,500.00	Laboratory Services
173361	8/27/2020	MAYO COLLABORATIVE SERVICES, INC.	325.60	Laboratory Services
173296	8/27/2020	ALLERMATRIX INC	1,492.00	Laboratory Services
EFT00000006108	8/27/2020	ARUP LABORATORIES, INC.	133,598.36	Laboratory Services
172859	8/6/2020	ANAEROBE SYSTEMS	36.00	Laboratory Supplies
172864	8/6/2020	ASSOCIATES OF CAPE COD INC	57.65	Laboratory Supplies
172870	8/6/2020	BECKMAN COULTER, INC	275.84	Laboratory Supplies
172873	8/6/2020	CANCER DIAGNOSTICS, INC	90.75	Laboratory Supplies
172874	8/6/2020	CARDINAL HEALTH	2,349.02	Laboratory Supplies
172875	8/6/2020	CEPHEID	4,878.50	Laboratory Supplies
172892	8/6/2020	FISHER HEALTHCARE	6,168.10	Laboratory Supplies
172938	8/6/2020	TYPENEX MEDICAL, LLC	291.49	Laboratory Supplies
172968	8/14/2020	BECKMAN COULTER, INC	333.80	Laboratory Supplies
172974	8/14/2020	CARDINAL HEALTH	6,980.51	Laboratory Supplies
172980	8/14/2020	CEPHEID	3,850.00	Laboratory Supplies
172996	8/14/2020	FISHER HEALTHCARE	3,056.05	Laboratory Supplies
173105	8/18/2020	CANCER DIAGNOSTICS, INC	114.25	Laboratory Supplies

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173109	8/18/2020	CEPHEID	1,060.20	Laboratory Supplies
173127	8/18/2020	FISHER HEALTHCARE	416.73	Laboratory Supplies
173141	8/18/2020	LIFELOC TECHNOLOGIES	50.00	Laboratory Supplies
173137	8/18/2020	PLATINUM CODE	191.42	Laboratory Supplies
173174	8/18/2020	TYMEX MEDICAL, LLC	94.00	Laboratory Supplies
173303	8/27/2020	BECKMAN COULTER, INC	821.95	Laboratory Supplies
173309	8/27/2020	CARDINAL HEALTH	1,584.37	Laboratory Supplies
173332	8/27/2020	FISHER HEALTHCARE	4,086.83	Laboratory Supplies
173356	8/27/2020	LIFELOC TECHNOLOGIES	149.00	Laboratory Supplies
173365	8/27/2020	MEDIVATORS REPROCESSING SYSTEM	59.30	Laboratory Supplies
173345	8/27/2020	PLATINUM CODE	173.71	Laboratory Supplies
EFT00000006050	8/6/2020	BIO-RAD LABORATORIES	6,619.44	Laboratory Supplies
EFT00000006060	8/6/2020	ORTHO-CLINICAL DIAGNOSTICS INC	335.42	Laboratory Supplies
EFT00000006061	8/6/2020	PDC HEALTHCARE	333.87	Laboratory Supplies
EFT00000006070	8/14/2020	BIO-RAD LABORATORIES	83.79	Laboratory Supplies
EFT00000006082	8/14/2020	ORTHO-CLINICAL DIAGNOSTICS INC	959.86	Laboratory Supplies
EFT00000006095	8/18/2020	BIO-RAD LABORATORIES	2,665.00	Laboratory Supplies
EFT00000006101	8/18/2020	ORTHO-CLINICAL DIAGNOSTICS INC	1,331.00	Laboratory Supplies
EFT00000006115	8/27/2020	ORTHO-CLINICAL DIAGNOSTICS INC	497.34	Laboratory Supplies
EFT00000006118	8/27/2020	PDC HEALTHCARE	167.40	Laboratory Supplies
173382	8/27/2020	PHILLIPS LAW, LLC	2,437.50	Legal Fees
W/T	8/26/2020	HUNTINGTON BANK	10,000.00	Legal Fees
172941	8/6/2020	U S NUCLEAR REGULATORY COMM	4,500.00	License & Taxes
173033	8/14/2020	NEW YORK LIFE INSURANCE COMPANY	2,578.08	Life Insurance
173377	8/27/2020	NEW YORK LIFE INSURANCE COMPANY	2,558.08	Life Insurance
172879	8/6/2020	COMPHEALTH, INC.	27,671.25	Locum Tenens
172982	8/14/2020	COMPHEALTH, INC.	17,379.50	Locum Tenens
172884	8/6/2020	CRUM ELECTRIC SUPPLY COMPANY	83.01	Maintenance & Repair
172943	8/6/2020	UTAH CONTROLS INC	1,800.00	Maintenance & Repair
172919	8/6/2020	PLAN ONE/ARCHITECTS	1,490.00	Maintenance & Repair
173061	8/14/2020	SWEETWATER PLUMBING & HEATING	337.90	Maintenance & Repair
173068	8/14/2020	UTAH CONTROLS INC	52.50	Maintenance & Repair
173075	8/14/2020	WHISLER CHEVROLET	109.93	Maintenance & Repair
172991	8/14/2020	ENTRY SYSTEMS INC.	9,571.00	Maintenance & Repair
173178	8/18/2020	UTAH CONTROLS INC	52.50	Maintenance & Repair
173184	8/18/2020	WYOMING TRUCKS AND CARS INC	75.00	Maintenance & Repair
173152	8/18/2020	OVERHEAD DODR CO.	961.00	Maintenance & Repair
173164	8/18/2020	SOLERAN INC	400.00	Maintenance & Repair
173403	8/27/2020	SWEETWATER PLUMBING & HEATING	181.55	Maintenance & Repair
EFT00000006053	8/6/2020	COLORADO DOORWAYS, INC	720.00	Maintenance & Repair
EFT00000006075	8/14/2020	COLORADO DOORWAYS, INC	894.40	Maintenance & Repair
EFT00000006083	8/14/2020	PARTSSOURCE	69.96	Maintenance & Repair
EFT00000006116	8/27/2020	PARTSSOURCE	791.95	Maintenance & Repair
172866	8/6/2020	BARD ACCESS SYSTEMS	2,042.44	Maintenance Supplies
172878	8/6/2020	CODALE ELECTRIC SUPPLY, INC	1,609.11	Maintenance Supplies
172896	8/6/2020	GRAINGER	1,114.60	Maintenance Supplies
172942	8/6/2020	US PLASTIC PALLETS & HANDLING, INC	960.00	Maintenance Supplies
172926	8/6/2020	ROCK SPRINGS WINLECTRIC CO	27.79	Maintenance Supplies
172960	8/14/2020	ALPINE PURE SOFT WATER	676.20	Maintenance Supplies
172981	8/14/2020	CODALE ELECTRIC SUPPLY, INC	742.55	Maintenance Supplies
173002	8/14/2020	GRAINGER	435.59	Maintenance Supplies
173006	8/14/2020	HOME DEPOT	1,272.53	Maintenance Supplies
173050	8/14/2020	ROCK SPRINGS WINLECTRIC CO	37.11	Maintenance Supplies
173111	8/18/2020	CODALE ELECTRIC SUPPLY, INC	469.52	Maintenance Supplies

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173131	8/18/2020	GRAINGER	3,058.67	Maintenance Supplies
173136	8/18/2020	HOME DEPOT	1,297.41	Maintenance Supplies
173297	8/27/2020	ALPINE PURE SOFT WATER	676.20	Maintenance Supplies
173300	8/27/2020	BARD ACCESS SYSTEMS	927.03	Maintenance Supplies
173330	8/27/2020	FASTENAL COMPANY	124.76	Maintenance Supplies
173337	8/27/2020	GRAINGER	504.00	Maintenance Supplies
173343	8/27/2020	HOME DEPOT	139.86	Maintenance Supplies
REMIT000000000000004	8/27/2020	ROCK SPRINGS WINNELSON CO	0.00	Maintenance Supplies
173386	8/27/2020	PRAXAIR DISTRIBUTION, INC.	120.20	Maintenance Supplies
EFT000000006062	8/6/2020	ROCK SPRINGS WINNELSON CO	633.95	Maintenance Supplies
EFT000000006068	8/14/2020	ACE HARDWARE	30.94	Maintenance Supplies
EFT000000006085	8/14/2020	ROBERT I MERRILL COMPANY	27.00	Maintenance Supplies
EFT000000006087	8/14/2020	ROCK SPRINGS WINNELSON CO	1,875.48	Maintenance Supplies
EFT000000006102	8/18/2020	SHERWIN WILLIAMS CO	111.55	Maintenance Supplies
EFT000000006109	8/27/2020	BENNETT'S	22.40	Maintenance Supplies
EFT000000006119	8/27/2020	SHERWIN WILLIAMS CO	33.78	Maintenance Supplies
173043	8/14/2020	PURPLE LIZARDS, LLC	1,211.75	Marketing & Promotional Supplies
172877	8/6/2020	CIVCO RADIOTHERAPY	530.00	Medical Surgical Supplies
172900	8/6/2020	MERIT MEDICAL SYSTEMS, INC	848.62	Medical Surgical Supplies
172912	8/6/2020	MUSCULOSKELETAL TRANSPLANT FOUNDATION	385.00	Medical Surgical Supplies
173149	8/18/2020	MUSCULOSKELETAL TRANSPLANT FOUNDATION	1,050.00	Medical Surgical Supplies
173313	8/27/2020	CIVCO RADIOTHERAPY	225.00	Medical Surgical Supplies
173373	8/27/2020	MERIT MEDICAL SYSTEMS, INC	312.36	Medical Surgical Supplies
173401	8/27/2020	SURGICAL PRODUCT SOLUTIONS	100.00	Medical Surgical Supplies
173096	8/18/2020	AMERICAN PHYSICAL THERAPY ASSN	385.00	Memberships
173298	8/27/2020	AMERICAN HEALTH LAWYERS ASSOCIATION	499.00	Memberships
172909	8/6/2020	MHSC-FOUNDATION	1,095.81	MHSC Foundation
173147	8/18/2020	MHSC-FOUNDATION	1,070.41	MHSC Foundation
173409	8/27/2020	TELEHEALTH SERVICES	1,129.31	Minor Equipment
W/T	8/10/2020	SIEMENS EDI	9,017.12	Minor Equipment
173410	8/27/2020	TERMINIX OF WYOMING	175.00	Monthly Pest Control
172895	8/6/2020	GLOBAL EQUIPMENT COMPANY	646.35	Non Medical Supplies
172906	8/6/2020	MEDLINE INDUSTRIES INC	986.06	Non Medical Supplies
173024	8/14/2020	MEDLINE INDUSTRIES INC	1,349.82	Non Medical Supplies
173144	8/18/2020	MEDLINE INDUSTRIES INC	133.62	Non Medical Supplies
173366	8/27/2020	MEDLINE INDUSTRIES INC	1,496.56	Non Medical Supplies
173406	8/27/2020	TEGELER & ASSOCIATES-RS	250.00	Notary Band
172888	8/6/2020	ENCOMPASS GROUP, LLC	752.00	Office Supplies
172900	8/6/2020	IDENTISYS INC	340.00	Office Supplies
172928	8/6/2020	STANDARD REGISTER COMPANY	1,168.36	Office Supplies
172929	8/6/2020	STAPLES BUSINESS ADVANTAGE	238.52	Office Supplies
172862	8/6/2020	ASI BUSINESS GROUP	1,446.02	Office Supplies
173055	8/14/2020	STAPLES BUSINESS ADVANTAGE	445.96	Office Supplies
173166	8/18/2020	STAPLES BUSINESS ADVANTAGE	381.13	Office Supplies
173327	8/27/2020	ENCOMPASS GROUP, LLC	1,542.48	Office Supplies
173359	8/27/2020	MARK AND MEND INC.	187.88	Office Supplies
173364	8/27/2020	MEDICAL ARTS PRESS	199.95	Office Supplies
173396	8/27/2020	STAPLES BUSINESS ADVANTAGE	4,176.60	Office Supplies
EFT000000006064	8/6/2020	SMYTH PRINTING	278.25	Office Supplies
EFT000000006089	8/14/2020	SMYTH PRINTING	1,760.00	Office Supplies
173078	8/14/2020	YOUNG AT HEART SENIOR CITIZENS CENTER	1,970.00	Other Employee Benefits
EFT000000006099	8/18/2020	LAGOON CORPORATION	1,671.49	Other Employee Benefits
172871	8/6/2020	BECTON DICKINSON	1,169.20	Other Medical Surgical Supplies
172889	8/6/2020	EQUASHIELD LLC	2,145.60	Other Medical Surgical Supplies



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172936	8/6/2020	TELEFLEX LLC	139.50	Other Medical Surgical Supplies
173048	8/14/2020	ROCK SPRINGS IV. CENTER	5,975.63	Other Medical Surgical Supplies
172953	8/14/2020	3M COMPANY	750.01	Other Medical Surgical Supplies
172992	8/14/2020	EQUASHIELD LLC	1,722.56	Other Medical Surgical Supplies
173032	8/14/2020	NANOSONICS, INC	610.50	Other Medical Surgical Supplies
173064	8/14/2020	TELEFLEX LLC	139.50	Other Medical Surgical Supplies
173124	8/18/2020	EQUASHIELD LLC	1,710.08	Other Medical Surgical Supplies
173170	8/18/2020	TELEFLEX LLC	1,420.00	Other Medical Surgical Supplies
173326	8/27/2020	EMERSON HEALTHCARE, LLC	685.00	Other Medical Surgical Supplies
173328	8/27/2020	EQUASHIELD LLC	1,163.68	Other Medical Surgical Supplies
173372	8/27/2020	MERCURY MEDICAL	178.71	Other Medical Surgical Supplies
173294	8/27/2020	MIADERM	624.00	Other Medical Surgical Supplies
173408	8/27/2020	TELEFLEX LLC	2,305.55	Other Medical Surgical Supplies
172858	8/6/2020	ALTA MEDICAL SPECIALTIES	195.61	Other Non Medical Surgical Supplies
173041	8/14/2020	PRAXAIR DISTRIBUTION, INC.	89.04	Other Non Medical Surgical Supplies
173094	8/18/2020	ALTA MEDICAL SPECIALTIES	392.04	Other Non Medical Surgical Supplies
173097	8/18/2020	AMERICAN FLOOR MATS, LLC	578.36	Other Non Medical Surgical Supplies
172904	8/6/2020	QUICK RESPONSE TAXI	90.00	Other Purchased Services
173020	8/14/2020	QUICK RESPONSE TAXI	30.00	Other Purchased Services
173110	8/18/2020	CJ SIGNS	394.36	Other Purchased Services
173140	8/18/2020	QUICK RESPONSE TAXI	180.00	Other Purchased Services
173355	8/27/2020	QUICK RESPONSE TAXI	120.00	Other Purchased Services
EFT000000006049	8/6/2020	AIRGAS INTERMOUNTAIN INC	409.66	Oxygen Rental
EFT000000006069	8/14/2020	AIRGAS INTERMOUNTAIN INC	4,028.08	Oxygen Rental
EFT000000006094	8/18/2020	AIRGAS INTERMOUNTAIN INC	140.00	Oxygen Rental
EFT000000006107	8/27/2020	AIRGAS INTERMOUNTAIN INC	4,005.91	Oxygen Rental
173187	8/27/2020	PATIENT REFUND	21.13	Patient Refund
173426	8/27/2020	PATIENT REFUND	20.00	Patient Refund
173188	8/27/2020	PATIENT REFUND	23.98	Patient Refund
173189	8/27/2020	PATIENT REFUND	414.96	Patient Refund
173190	8/27/2020	PATIENT REFUND	60.69	Patient Refund
173192	8/27/2020	PATIENT REFUND	24.01	Patient Refund
173193	8/27/2020	PATIENT REFUND	202.65	Patient Refund
173194	8/27/2020	PATIENT REFUND	43.42	Patient Refund
173427	8/27/2020	PATIENT REFUND	11.06	Patient Refund
173197	8/27/2020	PATIENT REFUND	154.40	Patient Refund
173198	8/27/2020	PATIENT REFUND	118.40	Patient Refund
173428	8/27/2020	PATIENT REFUND	25.00	Patient Refund
173199	8/27/2020	PATIENT REFUND	36.00	Patient Refund
173200	8/27/2020	PATIENT REFUND	70.40	Patient Refund
173201	8/27/2020	PATIENT REFUND	50.00	Patient Refund
173293	8/27/2020	PATIENT REFUND	96.80	Patient Refund
173205	8/27/2020	PATIENT REFUND	345.08	Patient Refund
173204	8/27/2020	PATIENT REFUND	274.55	Patient Refund
173206	8/27/2020	PATIENT REFUND	174.40	Patient Refund
173208	8/27/2020	PATIENT REFUND	139.53	Patient Refund
173207	8/27/2020	PATIENT REFUND	712.00	Patient Refund
173209	8/27/2020	PATIENT REFUND	97.88	Patient Refund
173210	8/27/2020	PATIENT REFUND	86.42	Patient Refund
173429	8/27/2020	PATIENT REFUND	40.00	Patient Refund
173291	8/27/2020	PATIENT REFUND	37.92	Patient Refund
173212	8/27/2020	PATIENT REFUND	70.40	Patient Refund
173213	8/27/2020	PATIENT REFUND	105.60	Patient Refund
173214	8/27/2020	PATIENT REFUND	25.59	Patient Refund

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173202	8/27/2020	PATIENT REFUND	80.70	Patient Refund
173430	8/27/2020	PATIENT REFUND	25.00	Patient Refund
173218	8/27/2020	PATIENT REFUND	57.27	Patient Refund
173280	8/27/2020	PATIENT REFUND	34.68	Patient Refund
173220	8/27/2020	PATIENT REFUND	66.40	Patient Refund
173221	8/27/2020	PATIENT REFUND	145.20	Patient Refund
173223	8/27/2020	PATIENT REFUND	64.00	Patient Refund
173224	8/27/2020	PATIENT REFUND	1,863.53	Patient Refund
173225	8/27/2020	PATIENT REFUND	217.36	Patient Refund
173226	8/27/2020	PATIENT REFUND	23.05	Patient Refund
173227	8/27/2020	PATIENT REFUND	234.50	Patient Refund
173228	8/27/2020	PATIENT REFUND	72.28	Patient Refund
173229	8/27/2020	PATIENT REFUND	129.90	Patient Refund
173431	8/27/2020	PATIENT REFUND	44.20	Patient Refund
173231	8/27/2020	PATIENT REFUND	64.60	Patient Refund
173232	8/27/2020	PATIENT REFUND	32.51	Patient Refund
173234	8/27/2020	PATIENT REFUND	32.00	Patient Refund
173235	8/27/2020	PATIENT REFUND	32.00	Patient Refund
173236	8/27/2020	PATIENT REFUND	788.00	Patient Refund
173432	8/27/2020	PATIENT REFUND	277.20	Patient Refund
173433	8/27/2020	PATIENT REFUND	44.88	Patient Refund
173434	8/27/2020	PATIENT REFUND	40.00	Patient Refund
173435	8/27/2020	PATIENT REFUND	35.00	Patient Refund
173240	8/27/2020	PATIENT REFUND	145.36	Patient Refund
173436	8/27/2020	PATIENT REFUND	75.00	Patient Refund
173242	8/27/2020	PATIENT REFUND	126.24	Patient Refund
173244	8/27/2020	PATIENT REFUND	404.45	Patient Refund
173245	8/27/2020	PATIENT REFUND	54.38	Patient Refund
173246	8/27/2020	PATIENT REFUND	208.43	Patient Refund
173247	8/27/2020	PATIENT REFUND	94.05	Patient Refund
173248	8/27/2020	PATIENT REFUND	66.40	Patient Refund
173249	8/27/2020	PATIENT REFUND	121.60	Patient Refund
173250	8/27/2020	PATIENT REFUND	9.00	Patient Refund
173253	8/27/2020	PATIENT REFUND	227.20	Patient Refund
173254	8/27/2020	PATIENT REFUND	50.00	Patient Refund
173437	8/27/2020	PATIENT REFUND	39.00	Patient Refund
173255	8/27/2020	PATIENT REFUND	289.56	Patient Refund
173256	8/27/2020	PATIENT REFUND	151.85	Patient Refund
173438	8/27/2020	PATIENT REFUND	40.00	Patient Refund
173257	8/27/2020	PATIENT REFUND	70.40	Patient Refund
173439	8/27/2020	PATIENT REFUND	55.00	Patient Refund
173258	8/27/2020	PATIENT REFUND	125.60	Patient Refund
173259	8/27/2020	PATIENT REFUND	62.39	Patient Refund
173292	8/27/2020	PATIENT REFUND	58.90	Patient Refund
173441	8/27/2020	PATIENT REFUND	35.00	Patient Refund
173440	8/27/2020	PATIENT REFUND	20.00	Patient Refund
173260	8/27/2020	PATIENT REFUND	57.92	Patient Refund
173261	8/27/2020	PATIENT REFUND	80.00	Patient Refund
173262	8/27/2020	PATIENT REFUND	160.80	Patient Refund
173442	8/27/2020	PATIENT REFUND	40.00	Patient Refund
173263	8/27/2020	PATIENT REFUND	125.60	Patient Refund
173443	8/27/2020	PATIENT REFUND	30.00	Patient Refund
173265	8/27/2020	PATIENT REFUND	66.40	Patient Refund
173266	8/27/2020	PATIENT REFUND	66.40	Patient Refund



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173444	8/27/2020	PATIENT REFUND	10.00	Patient Refund
173271	8/27/2020	PATIENT REFUND	96.80	Patient Refund
173445	8/27/2020	PATIENT REFUND	20.00	Patient Refund
173272	8/27/2020	PATIENT REFUND	20.00	Patient Refund
173273	8/27/2020	PATIENT REFUND	160.79	Patient Refund
173446	8/27/2020	PATIENT REFUND	30.00	Patient Refund
173277	8/27/2020	PATIENT REFUND	639.50	Patient Refund
173278	8/27/2020	PATIENT REFUND	118.40	Patient Refund
173447	8/27/2020	PATIENT REFUND	409.00	Patient Refund
173281	8/27/2020	PATIENT REFUND	70.40	Patient Refund
173282	8/27/2020	PATIENT REFUND	114.00	Patient Refund
173283	8/27/2020	PATIENT REFUND	66.40	Patient Refund
173284	8/27/2020	PATIENT REFUND	49.80	Patient Refund
173285	8/27/2020	PATIENT REFUND	100.00	Patient Refund
173449	8/27/2020	PATIENT REFUND	80.00	Patient Refund
173450	8/27/2020	PATIENT REFUND	55.67	Patient Refund
173288	8/27/2020	PATIENT REFUND	111.84	Patient Refund
173289	8/27/2020	PATIENT REFUND	765.60	Patient Refund
173290	8/27/2020	PATIENT REFUND	83.00	Patient Refund
172855	8/5/2020	UNITED WAY OF SWEETWATER COUNTY	313.72	Payroll Deduction
173091	8/18/2020	UNITED WAY OF SWEETWATER COUNTY	311.22	Payroll Deduction
172851	8/5/2020	FAMILY SUPPORT REGISTRY	403.84	Payroll Garnishment
172852	8/5/2020	STATE OF WYOMING DFS/CSES	1,313.74	Payroll Garnishment
172849	8/5/2020	CIRCUIT COURT 3RD JUDICIAL-GR	238.34	Payroll Garnishment
172850	8/5/2020	DAVID G. PEAKE	3,484.62	Payroll Garnishment
172854	8/5/2020	TREASURER STATE OF MAINE	172.00	Payroll Garnishment
173087	8/18/2020	FAMILY SUPPORT REGISTRY	403.84	Payroll Garnishment
173088	8/18/2020	STATE OF WYOMING DFS/CSES	1,313.74	Payroll Garnishment
173085	8/18/2020	CIRCUIT COURT 3RD JUDICIAL-GR	235.20	Payroll Garnishment
173086	8/18/2020	DAVID G. PEAKE	3,484.62	Payroll Garnishment
173089	8/18/2020	SWEETWATER CIRCUIT COURT-RS	89.47	Payroll Garnishment
173169	8/18/2020	SWEETWATER CIRCUIT COURT-RS	55.49	Payroll Garnishment
173090	8/18/2020	TREASURER STATE OF MAINE	172.00	Payroll Garnishment
W/T	8/4/2020	PAYROLL 16	1,400,000.00	Payroll Transfer
W/T	8/17/2020	PAYROLL 17	1,400,000.00	Payroll Transfer
172976	8/14/2020	CARDINAL HEALTH PHARMACY MGMT	5,331.30	Pharmacy Management
173107	8/18/2020	CARDINAL HEALTH PHARMACY MGMT	738,612.62	Pharmacy Management
173411	8/27/2020	THE PRESERVE AT ROCK SPRINGS	1,349.00	Physician Recruitment
EFT00000006073	8/14/2020	CASE RECRUITERS, INC.	17,000.00	Physician Recruitment
173385	8/27/2020	DR. PRACHI PAWAR	35,000.00	Physician Recruitment
173354	8/27/2020	DR. LAWRENCE LAURIDSEN	25,000.00	Physician Retention
172955	8/14/2020	ADVANCED MEDICAL IMAGING, LLC	18,116.50	Physician Services
173022	8/14/2020	LOCUM TENENS.COM	19,467.82	Physician Services
173011	8/14/2020	JOHN A. ILIYA, M.D.	22,200.00	Physician Services
173175	8/18/2020	UNIVERSITY OF UTAH	7,600.95	Physician Services
173357	8/27/2020	LOCUM TENENS.COM	14,908.30	Physician Services
173412	8/27/2020	THE SLEEP SPECIALISTS	10,475.00	Physician Services
173415	8/27/2020	UNIVERSITY OF UTAH HEALTH CARE	94,748.54	Physician Services
173349	8/27/2020	JHHR MEDICAL ASSOCIATES	4,623.12	Physician Services
173322	8/27/2020	DISCOVER STUDENT LOANS	519.64	Physician Student Loan
173324	8/27/2020	DRB EDUCATION FINANCE	5,833.33	Physician Student Loan
173331	8/27/2020	FEDLOAN SERVICING	20,625.00	Physician Student Loan
173338	8/27/2020	GREAT LAKES	1,666.67	Physician Student Loan
173375	8/27/2020	NAVIENT	1,147.03	Physician Student Loan

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173376	8/27/2020	NAVIENT	18,334.77	Physician Student Loan
173418	8/27/2020	US DEPARTMENT OF EDUCATION	2,500.00	Physician Student Loan
173348	8/27/2020	DR. JACQUES DENKER	8,231.33	Physician Student Loan
173389	8/27/2020	RESERVE ACCOUNT	5,000.00	Postage
172939	8/6/2020	UMIA INSURANCE, INC	83,591.00	Professional Liability Insurance
172950	8/6/2020	WYOMING DEPARTMENT OF HEALTH	54.00	Professional Service
173018	8/14/2020	CLIFTON LARSON ALLEN LLP	27,595.40	Professional Service
173029	8/14/2020	MILE HIGH MOBILE PET	7,260.00	Professional Service
173038	8/14/2020	P3 CONSULTING LLC	656.25	Professional Service
173031	8/14/2020	MOUNTAIN STATES MEDICAL PHYSICS	7,237.15	Professional Service
173182	8/18/2020	WYOMING DEPARTMENT OF HEALTH	60.00	Professional Service
173314	8/27/2020	CLEANIQUE PROFESSIONAL SERVICES	4,180.00	Professional Service
173421	8/27/2020	VERISYS INC.	28.00	Professional Service
173025	8/14/2020	MERRY X-RAY	280.40	Radiology Film
172872	8/6/2020	BRACCO DIAGNOSTICS INC	2,256.52	Radiology Material
172903	8/6/2020	LANTHEUS MEDICAL IMAGING, INC	3,463.33	Radiology Material
172971	8/14/2020	BRACCO DIAGNOSTICS INC	3,085.23	Radiology Material
173017	8/14/2020	LANTHEUS MEDICAL IMAGING, INC	3,463.33	Radiology Material
173139	8/18/2020	LANTHEUS MEDICAL IMAGING, INC	3,463.33	Radiology Material
173353	8/27/2020	LANTHEUS MEDICAL IMAGING, INC	3,463.33	Radiology Material
EFT000000006056	8/6/2020	GE HEALTHCARE INC	1,191.01	Radiology Material
EFT000000006077	8/14/2020	GE HEALTHCARE INC	221.32	Radiology Material
EFT000000006084	8/14/2020	PHARMALUCENCE, INC	2,503.00	Radiology Material
EFT000000006097	8/18/2020	GE HEALTHCARE INC	1,694.06	Radiology Material
EFT000000006112	8/27/2020	GE HEALTHCARE INC	544.55	Radiology Material
EFT000000006117	8/27/2020	PHARMALUCENCE, INC	2,503.00	Radiology Material
172972	8/14/2020	DR. BRIANNE CROFTS	1,516.00	Reimbursement - CME
173014	8/14/2020	DR. JOSHUA BINKS	811.00	Reimbursement - CME
173370	8/27/2020	DR. MELINDA POYER	775.00	Reimbursement - CME
173395	8/27/2020	DR. SIGSBEE DUCK	322.00	Reimbursement - CME
173347	8/27/2020	ISRAEL STEWART, DO	2,000.00	Reimbursement - CME
173398	8/27/2020	STEVEN CROFT, M.D.	731.00	Reimbursement - CME
172916	8/6/2020	PATTY O'LEXY	68.00	Reimbursement - Education & Travel
172961	8/14/2020	ANEDA HAZELETT	14.58	Reimbursement - Education & Travel
172973	8/14/2020	DR. BRYTTON LONG	249.90	Reimbursement - Education & Travel
173009	8/14/2020	DR. JANENE GLYN	2,648.61	Reimbursement - Education & Travel
173012	8/14/2020	DR. JONATHAN SCHWARTZ	1,155.85	Reimbursement - Education & Travel
173019	8/14/2020	DR. LAWRENCE LAURIDSEN	214.20	Reimbursement - Education & Travel
173028	8/14/2020	DR. MICHAEL NEYMAN	1,317.89	Reimbursement - Education & Travel
173013	8/14/2020	JONCI LISON	3,033.00	Reimbursement - Education & Travel
173015	8/14/2020	KELLY SUGIHARA	239.52	Reimbursement - Education & Travel
173046	8/14/2020	RAMONA K BEACH	15.90	Reimbursement - Education & Travel
173047	8/14/2020	ROB FAIR	357.00	Reimbursement - Education & Travel
173138	8/18/2020	JONCI LISON	304.25	Reimbursement - Education & Travel
173307	8/27/2020	BRANDI WENGERT	181.65	Reimbursement - Education & Travel
173350	8/27/2020	DR. JONATHAN SCHWARTZ	1,722.71	Reimbursement - Education & Travel
173374	8/27/2020	DR. MICHAEL NEYMAN	3,120.67	Reimbursement - Education & Travel
173371	8/27/2020	MELISSA MUNOZ	594.00	Reimbursement - Education & Travel
173391	8/27/2020	ROB FAIR	360.06	Reimbursement - Education & Travel
173171	8/18/2020	TIFFANY MARSHALL	37.89	Reimbursement - Food
173010	8/14/2020	JENNIFER MITCHELL	74.56	Reimbursement - Insurance Premiums
173402	8/27/2020	SUZAN CAMPBELL	249.00	Reimbursement - Memberships
173156	8/18/2020	RAELYNN RUSSELL	138.94	Reimbursement - Notary
173369	8/27/2020	MEGAN JACOBSEN	84.21	Reimbursement - Office Supplies

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GENERAL FUND DISBURSEMENTS  
8/31/20

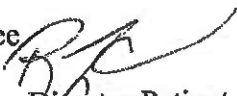
173158	8/18/2020	SARAH WAGNER	368.41	Reimbursement - Payroll Deduction
173145	8/18/2020	MEGAN JACOBSEN	60.15	Reimbursement - Postage
173405	8/27/2020	TAWNIA FLUID	10.48	Reimbursement - Uniforms
173358	8/27/2020	MARIANNE SANDERS	132.85	Reimbursement - Zoom
W/T	8/14/2020	ABG	4,055.91	Retirement
W/T	8/14/2020	ABG	149,158.50	Retirement
W/T	8/3/2020	ABG	158,554.35	Retirement
173056	8/14/2020	STATE OF WYO.DEPT.OF REVENUE	776.31	Sales Tax Payment
172952	8/10/2020	MOBILE INSTRUMENT SERVICE	90.00	Surgery Equipment
172857	8/6/2020	ALI MED INC	38.43	Surgery Supplies
172883	8/6/2020	CR BARD INC	728.10	Surgery Supplies
172927	8/6/2020	SMITH & NEPHEW INC.	614.88	Surgery Supplies
172933	8/6/2020	STRYKER ENDOSCOPY	2,099.10	Surgery Supplies
172951	8/6/2020	ZIMMER BIOMET	8,243.25	Surgery Supplies
172957	8/14/2020	ALI MED INC	674.81	Surgery Supplies
172966	8/14/2020	COVIDIEN SALES LLC, DBA GIVEN IMAGING	5,318.17	Surgery Supplies
172987	8/14/2020	CR BARD INC	172.80	Surgery Supplies
173016	8/14/2020	KEY SURGICAL INC	111.50	Surgery Supplies
173058	8/14/2020	STRYKER ENDOSCOPY	1,575.36	Surgery Supplies
173079	8/14/2020	ZIMMER	390.00	Surgery Supplies
173080	8/14/2020	ZIMMER BIOMET	4,589.00	Surgery Supplies
173093	8/18/2020	ALI MED INC	322.35	Surgery Supplies
173117	8/18/2020	COVIDIEN SALES LLC, DBA GIVEN IMAGING	720.00	Surgery Supplies
173163	8/18/2020	SMITH & NEPHEW ENDOSCOPY INC	1,694.23	Surgery Supplies
173168	8/18/2020	STRYKER ENDOSCOPY	1,979.72	Surgery Supplies
173185	8/18/2020	Z & Z MEDICAL, INC.	440.00	Surgery Supplies
173295	8/27/2020	ALI MED INC	102.92	Surgery Supplies
173317	8/27/2020	COVIDIEN SALES LLC, DBA GIVEN IMAGING	726.94	Surgery Supplies
173318	8/27/2020	CR BARD INC	259.60	Surgery Supplies
173424	8/27/2020	ZIMMER BIOMET	27,973.10	Surgery Supplies
EFT000000006054	8/6/2020	COOPER SURGICAL	702.02	Surgery Supplies
EFT000000006076	8/14/2020	COOPER SURGICAL	2,092.51	Surgery Supplies
173387	8/27/2020	PRESS GANEY ASSOCIATES, INC	2,060.01	Survey Expenses
173042	8/14/2020	PROFESSIONAL RESEARCH CONSULTANTS	16,202.50	Surveys
172979	8/14/2020	CSG, LLC	1,085.84	Transcription Services
173352	8/27/2020	LANGUAGE LINE SERVICES	1,241.84	Translation Services
172865	8/6/2020	AT&T	234.73	Utilities
172922	8/6/2020	CENTURY LINK	2,250.81	Utilities
172921	8/6/2020	DOMINION ENERGY WYOMING	17,993.51	Utilities
172965	8/14/2020	AT&T	132.46	Utilities
173045	8/14/2020	CENTURY LINK	3,569.45	Utilities
173049	8/14/2020	ROCK SPRINGS MUNICIPAL UTILITY	14,565.53	Utilities
173051	8/14/2020	ROCKY MOUNTAIN POWER	43,633.31	Utilities
172959	8/14/2020	ALL WEST COMMUNICATIONS	4,162.13	Utilities
173121	8/18/2020	DISH NETWORK LLC	70.49	Utilities
173181	8/18/2020	WHITE MOUNTAIN WATER & SEWER DISTRICT	57.50	Utilities
173388	8/27/2020	CENTURY LINK	4,225.74	Utilities
172932	8/6/2020	STERICYCLE, INC.	838.21	Waste Disposal
			6,339,453.62	

**Memorial Hospital of Sweetwater County  
County Voucher Summary  
as of month ending August 31, 2020**

<b>Vouchers Submitted by MHSC at agreed discounted rate</b>	
July 2020	\$0.00
August 2020	\$0.00
County Requested Total Vouchers Submitted	<u>\$0.00</u>
Total Vouchers Submitted FY 21	\$0.00
Less: Total Approved by County and Received by MHSC FY 21	
Total Vouchers Pending Approval by County	<u><u>\$0.00</u></u>

<b>FY21 Title 25 Fund Budget from Sweetwater County</b>	<b>\$262,548.00</b>
Funds Received From Sweetwater County	<u>\$0.00</u>
FY20 Title 25 Fund Budget Remaining	\$262,548.00
Total Budgeted Vouchers Pending Submittal to County	<u><u>\$0.00</u></u>

<b>FY21 Maintenance Fund Budget from Sweetwater County</b>	<b>\$2,150,456.00</b>
County Maintenance FY21- July	\$71,821.34
County Maintenance FY21- August	\$14,923.47
	<u>\$86,744.81</u>
FY21 Maintenance Fund Budget Remaining	<u><u>\$2,063,711.19</u></u>

MEMO: September 29, 2020  
TO: Finance Committee   
FROM: Ronald L. Cheese – Director Patient Financial Services  
SUBJECT: Preliminary September, 2020 Potential Bad Debts Eligible for Board Certification

Potential Bad Debts Eligible for Board Certification

Hospital Accounts	\$ 1,183,500.00	
Hospital Payment Plans	\$ 116,500.00	
Medical Clinic Accounts	\$ 43,219.00	
Ortho Clinic Accounts	\$ 00.00	
Total Potential Bad Debt	\$ 1,343,219.00	
Hospital Accounts Returned	\$ - 88,866.00	
Net Bad Debt Turned		\$1,254,353.00
Hospital Recoveries Collection Agency	\$ 144,776.00	
Hospital Recoveries Payment Plans	\$ 83,184.00	
Medical Clinic Recoveries	\$ 7,210.00	
Ortho Clinic Recoveries	\$ 1,031.00	
Total Bad Debt Recoveries		\$ 236,201.00
Net Bad Debt Less Recoveries		<u>\$ 1,018,152.00</u>

## MEMORANDUM

To: Board of Trustees  
From: Wm. Marty Kelsey  
Date: September 29, 2020  
Subject: Chair's Report...September Building and Grounds Committee Meeting

Jim Horan reviewed the current maintenance metrics. No identifiable issues were presented.

Central Plant Project...Jake reported that the key contractors were meeting with the goal of coming up with a plan to complete this project (which is way behind schedule). Jake said he believes they can adequately test the chillers even with the late completion date. It was suggested that perhaps the bonding company should be contacted to put some pressure on the contractor to complete this project ASAP. The Committee approved a change order in the approximate magnitude of \$12,000 to have a chain link fence constructed around the cooling towers for security reasons. This will be forwarded to the full Board for approval.

HVAC and UVC Project...Groathouse Construction Company has been retained to serve as the Construction Manager at Risk for this project. Bid packages are in good shape. MHSC should receive a GMP (Guaranteed Maximum Price) before the end of September.

MOB Entrance Project...This is a design/bid project, rather than a CMAR project. Bids are scheduled to be opened on October 1<sup>st</sup>.

Laboratory Renovation and Addition Project...Irene and Tammy reviewed the rules regarding whether or not this is an eligible project. The "go-no go" decision date is October 1<sup>st</sup>. They believe at this point that it is very likely an eligible project. At the September Board meeting, the estimated cost was presented at \$4.47 million.

Pharmacy Chemo Mixing Room Issue...Some discussion took place regarding whether or not the air pressures/fumes poses a health and safety risk. Jake opined that perhaps an Industrial Hygienist could be retained to provide an opinion. Irene will decide whether or not it is necessary to retain an Industrial Hygienist.

Status reports were given on the Pharmacy Compounding Room Project, the OB Bathtubs Renovation Project, the Grounds Lean-To Project, and the Emergency Room Outside Drainage Project. Also, the Bulk Oxygen issue was briefly re-visited.



MEMORIAL HOSPITAL OF SWEETWATER COUNTY  
Building and Grounds Committee Meeting  
September 15, 2020

The Building and Grounds Committee met in regular session via Zoom on September 15, 2020, at 3:30 PM with Mr. Marty Kelsey presiding.

In Attendance:      Mr. Marty Kelsey, *Trustee - Chair*  
                             Dr. Barbara Sowada, *Trustee*  
                             Ms. Irene Richardson, *CEO*  
                             Ms. Tami Love, *CFO*  
                             Mr. Jim Horan, *Facilities Director*  
                             Mr. Gerry Johnston, *Facilities Supervisor*  
                             Mr. Jake Blevins, *ST&B Engineering*  
                             Mr. Will Wheatley, *Plan One Architects*

Mr. Kelsey called the meeting to order.

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

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

**Maintenance Metrics**

Mr. Horan presented the maintenance metrics. All metrics are normal for the month with active work orders being down slightly for the month.

**Old Business – Project Review**

Central Plant Expansion

Mr. Blevins said he was onsite one week ago and also three weeks ago. He said the answer from the contractor three weeks ago was “three weeks out” which would put them done today. He said he had a pointed conversation with them this week and the answer was the owners of BHI and KK had a “good conference call.” Mr. Blevins said he believes BHI got attorneys involved and put a demand letter out. The answer as of this week is KK is supposed to be done September 30 and want us out for a walk-thru on September 25. Mr. Blevins is unclear of the status of controls. Jarvis is full tilt on the project. Mr. Blevins asked Mr. Johnston and Mr. Horan if they have seen Jarvis and his staff onsite. Mr. Johnston said he has not seen them here for 1½ weeks. The Committee discussed the completion of the side stream and Mr. Blevins said the owner training piece is part of the close out process. ST&B will be doing the functional testing and assisting Jarvis and the installation guys with that. The commissioning process helps them understand if they have what they are looking for as they run them through those tests. He said he is just trying to report back to Mr. Kelsey for something to take back to the Board. Mr. Kelsey said we should wait a little bit until we are closer to the end of the month. He asked about efficacy of testing the chillers. Mr. Blevins reviewed another option and said he thinks we can work thru the functional testing of the

other opposite end of the spectrum of the winter season. Mr. Kelsey asked about feelings of odds of having substantial completion by September 30. Mr. Blevins said he is not going to go 90% or better. He said he feels the owners of BHI want their staff off this project. He wants to do more Q&A with Jarvis on status of completion on his portion. Mr. Kelsey asked him to send a memo to the senior leadership team before the 30<sup>th</sup> and copy Dr. Sowada and Mr. Kelsey with the status of the project. Mr. Kelsey said obviously we have little if any leverage. He suggested giving the bond company a call. Mr. Blevins said there is not added cost they are looking to come after the Hospital for and there are not actual damages at this point. Mr. Kelsey said that was good to hear and thanked Mr. Blevins for his report.

### CARES Act Projects

HVAC & UVC – Mr. Blevins provided an update. The general contractor, Groathouse, walked last week. Bid packages 1, 2 and 3 are behind us. Bid package 4 is essentially out for bid and responses are due today. Mr. Blevins said we may have a GMP by the end of the week. He said this is also inclusive of the UV project scope. If we need to separately track those costs for grant reporting, we need to give that direction to him. Ms. Richardson asked Mr. Blevins to send the GMP info to her and she will forward to the Board. Mr. Blevins said we should be able to present the contract for legal review by the end of the week, too.

MOB Entrance – Mr. Wheatley said that project got final approval from the State today and the public bid is out with scheduled opening October 1. He said the City will start review for electrical only and the State will issue a final letter to construct. He said it was record timing for review by the State. Mr. Wheatley will get some asbestos testing done and results should be back sometime next week. Mr. Kelsey said he was under the understanding this would be under a CMAR project. Mr. Wheatley said, for the scale of this one, we could or could not, but it wouldn't influence much on this project. Mr. Kelsey asked for confirmation we have a liquidated damages clause in the contract if going past the completion date. Mr. Wheatley said we do.

Laboratory – Ms. Richardson said even though we got Board approval to move forward, we are being cautious with things changing with the way SLIB is administering money. We don't want to be on the hook for something we can't use CARES Act money for. She said she reached out to our auditors and asked what their thought was and they are very cautious and conservative. She said Ms. Love and the HFMA group were on a call with another accounting firm less conservative that said these type of capital projects would qualify. Ms. Richardson said she also reached out to Senator Barrasso and the WHA and she thinks we are okay. She said we also had Ms. Suzan Campbell review the HHS guidelines. She said there is language for use to "prevent, prepare for, and respond to coronavirus." She said she thinks that based on Ms. Campbell's opinion we can legitimately use the money for a lab remodel. The auditors said if we can have our legal counsel give us an opinion on this and justify it, then we can feel better about this. The HHS guideline will be coming out by October 1 and we may get more guidance there. Ms. Richardson said she just wanted to make sure we do our due diligence. She feels that this is a Covid project. Mr. Horan said if you look at the plan, you definitely see it is definitely coronavirus-gear. Mr. Kelsey asked if we are moving ahead with the design. Mr. Wheatley confirmed and said he feels the CMAR process would help with keeping the process moving. He reviewed some of the other project processes going on currently around the state. We said we would wait until October 1 to see if we would get any further guidance. Right now, she said she feels comfortable enough moving forward with the project. If there is anything different that comes up or if she gets conflicting information,

she will bring that forward. She said this would be a good, legitimate project that would be good for us. Mr. Wheatley said it is estimated to be about \$4.4M for the project.

Pharmacy Chemo Mixing Room – Mr. Horan said this is the one that is in the MOB. He said we discovered there were some issues with the air pressurization and some of the ductwork. He said Mr. Kelsey asked him about a month ago if this is a real safety concern and asked if it should be fast-tracked. Mr. Blevins understands our concerns are around odors and managing pressure. He said there was some discussion about establishing a completely new space and commandeering space immediately above to vent to the roof. Mr. Kelsey said his main concern was health and safety but he was wondering if it was Covid-related or something we really needed to jump on. Mr. Blevins said he could not speak to the severity and we would have to get an industrial hygienist involved to answer some of those questions. Dr. Sowada asked if this is something The Joint Commission will weigh in on when they visit. Mr. Horan said the pressurization is monitored by gauges that are readily observable and it could raise a question if they walk by at the right time. Mr. Kelsey said health and safety is a critical component of this discussion. He said he would be interested in having an industrial hygienist take a look at this. He asked senior leadership to weigh in on this. Ms. Richardson said we will work with Mr. Blevins to see if we can find an industrial hygienist. She said she will provide a recommendation to the Committee.

Pharmacy Compounding Room – Mr. Johnston said the project will start in the next two to three weeks. We have prices for the doors, just not for the controls for the doors.

Grounds Lean-To – Mr. Horan said it's almost completed. The only thing left to be done is the concrete apron and they are pouring at this time. He said that hopefully, by the next time we meet, the concrete will be cured and all will be in order.

Bulk Oxygen Renovation and Grading – Mr. Horan said Airgas had a change to the project that was substantial. He asked if we can revisit this after TJC visit. He likes to have some questions to float to TJC to engage them and this may be one of those he is going to draw their attention to and ask if it is an issue and what do they think about it.

Replacement Roofing for Power House – Mr. Kelsey said he recalled Mr. Horan saying that he might consider asking for board authorization in late winter to maybe get that project bid out. Mr. Horan said that is correct and he asked to table this at this time.

OB Bathtubs to Showers – Mr. Horan said Mr. Wheatley gave us a proposal for the design. The State requires stamped drawings for anything that has anything to do with egress pathways and patient use. It is an infection issue and usage issue. Ms. Love said her concern is we are up to our neck in projects and we would like to put this off for a little while longer. She said this has been on our radar for a couple of years now and asked if it would hurt to put it off right now to take care of other issues that are related to Cares Act money. Mr. Kelsey said everyone has a lot on their plate and the Committee agreed to wait.

Emergency Room Outside Drainage – Mr. Horan said because of the nature of the project he had a little engineering done to make sure we are doing it correctly. It will be a very small concrete project and Mr. Johnston will be managing this. We will put it out to bid. He said it will probably be about \$8K-10K. Mr. Horan will get back to the Committee on how it turned out.

### **New Business**

Mr. Kelsey said he did not have any new business and asked if anyone else wanted to add anything. He asked if there was anything for the good of the order. Mr. Blevins said there is an open change order request on the central plant on whether or not we want to add fencing. He said it is for a fence to enclose the cooling towers with a barb strand on top of it and he understands it is in response to security concerns. Mr. Blevins said there is egress from the plant into this yard. Mr. Wheatley said some panic based hardware is available that would assist with safe egress from the building. Mr. Blevins said it sounds like there is some refinement we need to do and he requested approval of the project contingent on some assistance from Mr. Wheatley on the life-safety aspects and awareness it may require some additional funds of approximately \$2,000. Mr. Kelsey asked for a recommendation from senior leadership. The motion to move forward with the fence and adding the additional dollars as discussed to move the change order to the Board was made by Ms. Richardson; second by Dr. Sowada. Motion carried.

With no further business, the meeting adjourned.

*Submitted by Tami Love*

## **COMPLIANCE COMMITTEE CHAIR REPORT TO THE BOARD SEPTEMBER 2020**

**Ed Tardoni**

The Compliance Committee met in a Zoom format this month.

### **REVIEW OF DOCUMENTS**

The usual compliance reports were reviewed and may be found in the board packet.

#### **A Compliance Probe Audit of Professional Billing Services**

April Prado presented documentation of this recently completed audit. Forty-four patient charts from twenty-two providers were audited. The audit was conducted based on published standards and methods. All forty-four charts were found to be 100% compliant.

#### **Additional Comments**

The passing of Rich Tyler resulted in the need for some catching up by staff with computer-based tracking and monitoring software. The committee was updated on progress in this area.

### **NEXT MEETING**

The next meeting of the committee will be held October 22, 2020 at 1530 hours by Zoom.



**Board Compliance Committee Meeting  
Memorial Hospital of Sweetwater County  
September 24th, 2020**

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

**Minutes**

The meeting was called to order at 3:30pm by Ed Tardoni.

Two "Mission Moments" were shared. The first by Irene who shared a story that Nicole Halstead RN had shared with her. Nicole was shopping in Wal-Mart and had a shirt with RN on it. Another customer came and asked her if she worked in the ER or Med Floor and she no, she worked in Dialysis. The customer went on to say that Dr. Grey had saved his mom's life and that his mom would not be here if not for her. He also said that an RN named Dani was also amazing and that they were more than happy with the care his mom received. Ed shared that his friend was just in Lab and Urology and everything went smoothly and they had nothing to complain about.

The September agenda was approved as written, Noreen made the motion and Suzan seconded it. The meeting minutes from August were approved as written. Marty made the motion and Irene seconded it.

**Old Business**

Noreen stated that there was no old business to discuss.

**New Business**

Noreen reported that since the passing of our IT Director, she has not been receiving regular reports. Stacy Nutt will be the interim director and Noreen was able to meet with her and Kim Gunderson to discuss Fair Warning and HIPAA violations. Noreen said that they have a game plan for these reports and she should start receiving them now. Suzan noted that she also hasn't been receiving reports and Noreen said that they would fix this.

**Reports**

**Behavioral Health**- Noreen reported that we had 14 titled behavioral health patients. 2 were in seclusion and both of them had documentation issues. A flow sheet has been created for documentation and Noreen is hoping for an improvement in September's reporting. Ed had a question about Behavioral Health patients; With the pandemic, are we seeing an increase in BH patients? Noreen said that that we are but she doesn't know if it is directly related to COVID-19 or not.

**HIPAA**- Noreen stated there were no HIPAA violations reportable for the month of July. August there were two that were referred to Human Resources for investigation. Ed asked if there was anything that could be released about the two HIPAA violations and Noreen answered no, only that they required further investigation with H.R.. She also added that our Fair Warning program works amazingly well at looking at who was in charts and catching possible breaches.

**Grievances**- Noreen shared that the Grievance Committee reviewed 2 cases. Each of the cases were reviewed and resolved in a timely manner.



Audits- The committee was given the audit report on “Professional Billing Services” for review. April reported that the Grievance Audit was finished and would be sent for their review as well. Ed asked about the attitude of the people that we are meeting with towards the audit. He wanted to know how they view this process. April reported that for the most part, the attitude has been positive. The employees seem to view these as a good thing and seem to know that if a mistake is found, they are not in trouble and it will be an area of improvement. April did report that she has been struggling to get an outstanding audit done as the Director will not respond to meeting with her. Overall though, the attitude has been positive.

### **Additional Discussion**

Marty asked if The Joint Commission had been onsite yet. It was reported that they have not made their visit yet. Irene added that they usually come on a Monday, Tuesday or Wednesday because they stay for three days. We are currently just waiting and preparing for them to come. Marty mentioned that he would like to know when they are here and Irene will make sure that they are notified.

### **Adjournment**

The meeting adjourned at 3:50p.m.

### **Next Meeting**

The next meeting was not announced.

Respectfully Submitted,

---

April Prado, Recording Secretary

## Reports for Board Compliance Committee 9-24-2020

1. 14 titled behavioral patients. 2 were in seclusion both had document issues. A flow sheet has been created to follow to help with these documentation issues.
2. There were no HIPPA violations reportable for the month of July. August there were two that were referred to Human Resources for investigation.
3. The Grievance Committee reviewed 2 cases. Each of the cases were reviewed and resolved in a timely manner.
4. Ongoing Audits by April Prado
  - a.

# Compliance Probe Audit of Professional Services Billing

## **Purpose:**

Ensure the accuracy of professional services billing for MHSC.

## **Introduction:**

A probe audit has been conducted to review MHSC's professional services billing in several areas. Those areas will be outlined below.

## **Method and Sample:**

Data for this audit was collected from MHSC's eMDs program. 44 patient charts were selected at random from 22 hospital employed providers that met the following requirements; employed by MHSC and actively seeing patients for at least six months in the calendar year 2019. The randomly selected charts included two patients from each provider. After selection, the charts were audited using the "Internal Chart Audit Checklist" found in our compliance manager system, **Healthicity**. This checklist includes 44 billing, coding, and payment questions. Some questions are set to establish the diversity of our sampling while others have desired answers for compliance. These questions and our scores appear later in this report (see pages 3-7). Information from the CMS Standards for Evaluation and Management Services (E/M) was also studied and reviewed in preparation for this audit. That information can be found on the CMS website; [www.cms.gov](http://www.cms.gov)

## **Objective:**

1. Provide a diverse sample of patient charts for review.
2. Show compliance with professional services billing in the following areas;
  - a. Patient name and date of service (DOS) appear on every page of the chart.
  - b. The medical history supports the selected diagnosis.
  - c. The treatment plan is documented.
  - d. The documentation supports the level of services billed.
  - e. Services were billed with the correct date of service.
  - f. The providers signature appears on all clinic notes.
  - g. A signed HIPAA form was in the chart.

## **Results:**

To show diversity in sampling, 25% of the patient charts were "problem focused" with 1-5 areas being evaluated by the provider, 31.8% were "expanded focused" with 6-8 areas being evaluated by the physician, 40.9% were "detailed expanded" with 9-12 areas being evaluated by the physician and 2.3% were "complex expanded" with 13 or more areas being evaluated by the physician.

For compliance in the areas stated above (#2, a-g); MHSC received 100%, in all areas, for all 44 charts reviewed.

**Findings:**

Based on the results of this audit, MHSC is compliant in the reviewed areas of professional services billing. This audit will be marked a passing grade with no further recommendations at this time.

DRAFT

## Internal Chart Audit

### Answer Summary

ID	Question
80	Did the HPI include less than 3 elements? 13.6% Yes
81	Did the HPI include 3 elements? 31.8% Yes
82	Did the HPI include 4 elements? 43.2% Yes
83	Did the HPI include more than 4 elements? 18.2% Yes
84	Was there a ROS? 90.9%Yes
85	Was 1 system reviewed? 2.3%Yes
86	Were 2-9 systems reviewed? 52.3%Yes
87	Were 10 or more systems reviewed? 38.6%Yes
88	Was patient's personal, family & social history (PFSH) verified? 70.5%Yes

ID	Question
90	Were all 3 histories reviewed? 75% Yes
91	Was the exam Problem Focused (1-5 elements)? 25% Yes
92	Was the exam Expanded Problem Focused (6-8 elements)? 31.8% Yes
93	Was the exam Detailed (more than or equal to 9 elements)? 40.9%Yes
94	Was the exam Comprehensive (13 plus elements)? 2.3% Yes
95	Was the decision- making Straight Forward (one self -limiting or minor problem)? 20.5% Yes
96	Was the decision -making Low Complexity (two or more problems or one stable chronic illness)? 34.1% Yes
97	Was the decision- making Moderate Complexity (one or more chronic illness worsening, two or more stable chronic illnesses, or an acute problem with systemic symptoms)? 43.2% Yes
98	Was the decision- making High Complexity (one or more chronic illnesses with severe worsening, a threat to life or bodily function)? 2.3% Yes



ID	Question
99	Does the medical history support the selected diagnosis? 100% Yes
100	Was the treatment plan documented? 100% Yes
101	Was the interpretation/report of diagnostic tests completed? 34.1% Yes
102	Was the HPI completed by the physician? 95.5% Yes
103	Does the documentation support the level of service billed? 100% Yes
104	Were services billed with the correct date of service (DOS)? 100% Yes
105	Was Form A completed on time? 100% Not Applicable
106	Was Form A updated within the last 6 months? 100% Not Applicable
107	Was the Form A updated within the last 6 months? 100% Not Applicable
108	Was Form B completed on time? 100% Not Applicable

ID	Question
109	Was Form B updated with the last visit? 100% Not Applicable
110	Was Form C completed on time? 100%Not Applicable
111	Was Form C updated with the last visit? 100% Not Applicable
112	Was the patient insurance information up to date? 97.7% Yes
113	Was the HIPAA form signed? 100% Yes
114	Were the clinical records in chronological order? 100% Yes
115	Was the physician's signature on all clinic notes? 100%Yes
116	Was the (Medical Assistant, Technician or Nurse's) signature on all clinic notes? 100% Yes
117	Was the date of service (DOS) on the clinic notes? 100% Yes
118	Was the patient's name on the clinic notes? 100% Yes

ID	Question
119	Were the corrections in the chart initialed and crossed out properly? 2.3% Yes, 97.7% Not Applicable
120	Was there an addendum attached to the clinic note? 20.5% Yes, 79.5% Not Applicable
121	Was there a late entry attached to the clinic note? 9.1% Yes, 90.9% Not Applicable

DRAFT

Memorial Hospital of Sweetwater County  
Governance Committee Meeting  
September 3, 2020  
Zoom Meeting

Voting Members Present: Richard Mathey, Irene Richardson, and Barbara Sowada

**Call Meeting to Order**

Richard Mathey called meeting to order at 9:10 pm.

**Discussion**

**Agenda** was created during the meeting.

**Minutes** of last month's meeting had previously been approved.

**Old business:**

1. The following policies were discussed.
  - a. **Guidelines for Negotiation of Physician Employment Agreements/Contracts** and **Guidelines for Negotiation of Non-Physician Providers Employment Agreements/Contracts** were discussed. Both policies have been preliminarily approved by the Governance Committee and are waiting to make sure they are in alignment with the *Termination and Appeals* policy, which has yet to be completed.
  - b. **Maintenance of Board and Board Committee Meeting Minutes** policy. Committee recommends this policy is ready for its first reading by the Board of Trustees at its October meeting.

**New Business**

1. Hospital policies were discussed. Questions were raised as to whether all the policies are current and needed or whether some are out of date, duplicates, not followed, etc. and does this create risk to the organization. Irene will ask Suzan to begin a review of policies. It is to be determined whether the policy review and reorganization will become a Governance or Compliance function.
2. Board Bylaws will be reviewed/revised in October. Will start with medical staff section.

With no further business, the meeting was adjourned at 10:30 pm.

*Submitted by Barbara J. Sowada, Ph.D.*

# Maintenance of Board and Board Committee Meeting Minutes

## Statement of Purpose

By law and regulatory requirements, the Board of Trustees of Memorial Hospital of Sweetwater County (Hospital) is responsible for the maintenance and retention of their records. Effective records management includes timely access to accurate and reliable information, assures transparency and accountability to the public, preserves the Hospital's history, and preserves essential information.

## Definitions

**Board** means Board of Trustees of Memorial Hospital of Sweetwater County

**Committee** means any standing or ad hoc committee of the Board

**Custodian** means the executive assistant of the CEO, who is responsible for the maintenance, care, and keeping of the public records.

**Meeting** means any meeting duly convened, constituted and held by the Board; meetings convened by another entity to which the Board has been invited; and any meeting by one of the Board's Committees.

**Minutes** means the written record of the proceedings of the meeting, including actions, decisions, commitments and major discussion points

**Maintenance** means the permanent and orderly preservation of minutes in either physical or digital mode

**Retention** means the time period the minutes are required to be maintained.

## Policy

Meeting minutes of the Board are the legal and official record of the Board's actions and provide evidence of the Board's interactions. Meeting minutes of Board Committees also provide a lasting record of actions and decisions by these Committees.

It is the policy of the Board that its meeting minutes and those of its Committees shall be recorded and maintained in a manner that complies with Wyoming State statute and other regulatory requirements pertinent to governmental hospitals.<sup>1</sup>

## Procedure

1. There shall be an official record, or minutes, of the proceedings of every meeting.
2. Meeting minutes should include:
  - a. Date of the meeting
  - b. Time the meeting was called to order
  - c. Names of the meeting participants and absentees
  - d. Corrections and amendments to previous meeting minutes

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<sup>1</sup> W.S. 16-4-401 to 16-4-408 (2011)

- e. Additions to the current agenda
  - f. Whether a quorum is present
  - g. Motions taken or rejected
  - h. Voting-that there was a motion and second, and the outcome of the vote
  - i. Actions taken or agreed to be taken
  - j. Next steps
  - k. Items to be held over
  - l. New business
  - m. Open discussion or public participation
  - n. Next meeting date and time
  - o. Time of adjournment
3. The Board Secretary shall delegate the recording and drafting of Board meeting minutes to the executive assistant of the Chief Executive Officer (CEO).
  4. For committees where someone other than the executive assistant of the CEO takes the minutes, the Committee chair is responsible for assuring that the CEO's executive assistant has all the Committee meeting material for the upcoming Board meeting packet.
  5. Board meeting minutes are official once they have been approved by the Board and signed by the Board Secretary. Committee meeting minutes are official once they have been approved by Committee members.
  6. The minutes of executive sessions are confidential and are in the custody of the executive assistant of the CEO.
  7. Public meeting notice, as well as the meeting agenda, handouts and documents that were referred to during the meeting shall be attached to the official copy of the minutes.
  8. Storage and retention of all official records of the Board shall comply with Wyoming State statutes<sup>2</sup> and are delegated to the executive assistant of the CEO.
    - a. Minutes of all Board meetings shall be permanently retained in physical form.
      - i. To protect from damage and destruction, physical copies of the minutes and their attached documents shall be retained in a safe, secure file cabinet in the office of the Hospital's administration.
      - ii. Digital copies of the minutes and their attached documents shall be uploaded and retained in the board portal.
    - b. Minutes of all Committee meetings shall be retained for three years.
      - i. Digital copies of the minutes and their attached documents shall be uploaded and retained in the appropriate Committee section of the board portal.
      - ii. The administrative staff associated with the Committee shall be responsible for uploading each month's meeting material into the board portal for storage.
  9. Board and Committee minutes are controlled from unauthorized access.
    - a. Digital minutes are protected from unauthorized access through passwords.
    - b. Access to paper minutes is under the purview of the executive assistant of the CEO.
    - c. Minutes that are in the public domain shall be provided for public review without charge on equipment made available by the Hospital in its office. Copies of the minutes may be requested; the Hospital may set a fee to cover costs of copying.

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<sup>2</sup> W.S. 17-16-1601 and 17-19-1601 (2011)

10. Official minutes of all Board meetings will be part of the public material on the Board of Trustee's section of the Hospital's website.

DRAFT



## Cindy Nelson

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**From:** Richard Mathey  
**Sent:** Sunday, October 04, 2020 5:52 PM  
**To:** Cindy Nelson  
**Subject:** Joint Conference Committee Report—BOT 10-7-20 Meeting

On September 21 the Medical Staff Bylaws Committee unanimously approved a draft of the new Medical Staff Bylaws. The draft is a quality product, to the credit of all involved and as a result of genuine effort put in by all involved. From approval by the Medical Staff Bylaws Committee the draft goes to the Medical Executive Committee, and from there to a vote by the MHSC Medical Staff. A calendar for presentation to and action by the Medical Staff will probably be established by the Oct. 7 board meeting.///Medical Staff Bylaws are the means by which the Medical Staff self governs the complicated matters of medical staff credentials and MHSC hospital privileges. The procedural step following Medical Staff approval is board approval. Key provisions of the draft approved by the Medical Staff Bylaws Committee are: 1)Issues pertaining to the credentialing of and privileges for Non Physician Providers are covered in the draft bylaws. The status of NPPs in the bylaws is members without voting privileges. These are statements of fact. On behalf of the Joint Conference Committee, I have consented to this structure. Also on behalf of the JCC, I will be recommending approval and adoption of it to the board. 2) The draft bylaws contain an appeals process by which a Medical Staff member may appeal adverse credentialing and privileges determinations. NPPs are specifically excluded from this process. NPPs who are the subject of adverse credentials and privileges determinations, which in turn affect their ability to discharge their job duties, may avail themselves of such mechanisms as are afforded under MHSC personnel policies. 3) There is no procedure available in the draft bylaws for hearing a defense to an adverse credentials determination or an adverse privileges determination based on membership in a constitutionally protected category.///Provided that the draft bylaws become the new bylaws, several policies that are currently waiting board or HR Committee approval will be able to move forward. Primary among these is the Termination and Appeals Policy, the highly specific purpose of which is to state how defenses to adverse job actions will proceed, when the defenses are discrimination based on membership in a constitutionally protected category. The anticipated time line for presentation of them to the board is introduction in the New Business agenda item at the October 27 special meeting; vote on them at the December meeting. Respectfully Submitted, Richard Mathey

Sent from my iPad

## 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: **EXPERIAN MASTER CUSTOMER AGREEMENT**
2. Purpose of contract, including scope and description: **Experian will build and support a patient estimator tool for our website that will allow the public to identify an estimated cost for a procedure. This will meet one of the requirements of the CMS Price Transparency rule going into effect January 1, 2021. This will be the vendor we will use with Cerner.**
3. Effective Date: **When executed by Experian Health (final signature)**
4. Expiration Date: **24 months after effective date but will auto-renew for 12 months periods**
5. Termination provisions: **by either party with 90-day notice at the end of the 24 months (initial term) or renewal term. Experian has added a termination clause that will allow us to terminate this agreement once we go-live with Cerner. Is this auto-renew? Yes 12-month terms after the first 24 months.**
6. Monetary cost of the contract: **First year \$51,600.00 + \$15,000.00 implementation for total cost of \$66,600.00. This figure does not include transaction fees which are estimated to be \$150.00 per month or \$1800.00 per year. Year two of the contract costs will be \$51,600.00 + \$1800.00 total of \$53,400.00 Budgeted? No**
7. Jurisdiction/Choice of Law provision checked and changed to Wyoming if able to so. **No jurisdiction is in Delaware**
8. Any confidentiality provisions? **Yes Section VIII**



9. Indemnification clause present? **Yes Section IX for patent trademark or copyright infringement and Section X for intellectual property indemnification**

10. Is this contract appropriate for other bids? **Yes, we chose Experian as this is the vendor we will be using once we implement with Cerner.**

11. Is County Attorney review required? No

Supplier	Customer	
Experian Health, Inc. 720 Cool Springs Blvd., Suite 200 Franklin, TN 37067 (615) 661-5657 or (888) 661-5657	Memorial Hospital of Sweetwater County 1200 College Drive Rock Springs, WY 82901-5868	

## Master Customer Agreement

This Master Customer Agreement (as amended, supplemented or modified from time to time, the "Agreement") covers the products and services listed below ("Products and Services") and is between Experian Health, Inc. ("Experian Health") and Memorial Hospital of Sweetwater County ("Customer," and together with Experian Health, the "Parties"). This Agreement shall be effective as of the date of signature by Experian Health ("Effective Date").

THIS AGREEMENT IS SUBJECT TO EXPERIAN HEALTH'S STANDARD TERMS & CONDITIONS OF SALE, AS REVISED OR AMENDED FROM TIME TO TIME (THE "TERMS & CONDITIONS"), AND ITS BUSINESS ASSOCIATE AGREEMENT, ATTACHED AS SCHEDULE A HERETO AS REVISED OR AMENDED FROM TIME TO TIME. The Terms & Conditions, which are incorporated by reference into this Agreement, are attached as Exhibit B hereto and Customer acknowledges receipt, review and acceptance thereof. Customer agrees to and intends to be bound by the Terms & Conditions. Capitalized terms used herein and not otherwise defined shall have the meanings given to them in the Terms & Conditions.

### PRODUCT OFFERINGS AND FEES

**PRODUCT OFFERINGS AND FEES.** Product offerings and fees specified herein apply to a single facility installation. Experian Health agrees to provide the products and services selected below for the facility/facilities listed on Exhibit A hereto. Customer agrees to provide further details specified in the facility list and administration section in Exhibit A. HIS/PMS system(s) applicable to this Agreement include QuadraMed Affinity.

Product Description	Qty	Fees (Unit Price)		
		Implementation	Subscription	Transaction
<b>Patient Estimates (Combined Estimates) With Touchless Estimates</b> uses information from a provider's chargemaster physicians' fee schedule and payer contracted rates by procedure and applies eligibility and benefits information from the patient's health insurance plan. Fees are per installation, per connection to a single patient database and two chargemasters and physician fee schedule with up to 40 payers, 10 plans per payer. Additional payers can be purchased at an additional charge. Includes set up of Touchless Estimates (50 templates); which will be completed after full implementation of base Patient Estimates product. Additional templates can be purchased if necessary.	1	\$0.00	\$40,800	Estimates may run an Eligibility Verification Transaction to incorporate benefit data when there is not an existing eligibility transaction available for use. These transactions will be billed as set forth in the Agreement.
<b>Additional location or chargemaster integration for Patient Estimates.</b>	1	\$5,000	\$3,600	
<b>Self-Service Patient Estimates</b> provides the ability for consumers to access real-time estimates which extract information from a provider's chargemaster and payer contracted rates by procedure and applies eligibility and benefits information from the patient's health insurance plan.	1	\$0.00	\$7,200	
<b>eCare NEXT Eligibility Set-Up for Patient Estimates Only</b> provides an eCare NEXT platform set-up with eligibility data to be used with the Patient Estimates tool.	1	\$0.00	\$0.00	The Eligibility Verification Transaction Fee shall be billed as provided below.
<b>Patient Estimates HIS Migration</b>	1	\$10,000	\$0.00	\$0.00
<b>Product-Level Analytics</b> allows users to access analytical reporting for multiple Experian Health products on demand in an easy-to-read, user friendly format. This analytics offering is included with the purchase of the product and provides additional insight into a variety of KPI's and metrics to assist with optimal use of the product to drive operational and financial outcomes.	1	\$0.00	\$0.00	\$0.00

**Fees referenced above are stated at unit cost value. Totals presented below contain extended costs.**

<b>Total 1st Year Fees (excluding transaction fees)</b>	<b>\$15,000</b>	<b>\$51,600</b>
<b>Future Recurring Fees (excluding transaction fees)</b>	<b>N/A</b>	<b>\$51,600</b>

**PASS-THROUGH FEES.** Fees exclude pass-through fees ("Pass-Through Fees") from state and federal governmental entities ("Governmental Entities"), Medicaid and Medicare Managed Care Organizations ("MCOs"), third-party payers, communication tariffs, and/or other similar fees. Without prior notice, Pass-Through Fees will be billed monthly in addition to all other Fees at the cost that Experian Health pays to obtain transaction data. Notwithstanding any other provision of this Agreement to the contrary, Experian Health shall have the right to increase the Pass-Through Fees to offset any increases in rates, changes, or other costs from Governmental Entities, MCOs and other third parties, including without limitation Medicaid and Medicare administrators,

or any increase in the cost of providing services hereunder resulting from rules, regulations and operating procedures of any federal, state or local agency or regulatory authority. The Pass-Through Fees are not subject to approval by Experian Health.

**IMPLEMENTATION FEES.** Implementation fees relate to the initial implementation and delivery of the product offering(s). These fees represent a one-time cost billed at contract execution.

**SUBSCRIPTION FEES.** Subscription fees relate to the ongoing availability of the product offering(s) to Customer. These fees are presented on an annual basis but billed on a monthly basis for the duration of this Agreement. Billing begins the earlier of: i) Customer's first productive use or ii) the ninth full calendar month following the Effective Date.

**TRAINING AND CUSTOM PROGRAMMING FEES.** Experian Health shall provide on-site training for all of the products selected above at the rate of \$2,000 per trainer per eight-hour day. Online training, to the extent available for a given Product, shall be provided at no cost to Customer. The training shall be scheduled at such dates and times that are acceptable to Experian Health and Customer. Further, custom programming is available, to the extent requested in writing by Customer, for a fee set forth in an amendment to this Agreement.

**TRANSACTION FEES.** Transaction Fees are billed per each successful transaction processed. A "successful" transaction shall be defined as an electronic transaction that returns a valid payer, data source, or business associate response to Customer from Experian Health as an inquiry sent to Experian Health from Customer's HIS/PMS system(s). Transactions become billable to Customer, once Customer is eligible for training and will be billed on a monthly basis for the duration of this Agreement.

**ELIGIBILITY VERIFICATION TRANSACTION FEES.** The Eligibility Verification transaction fee ("Eligibility Transaction Fee") includes eligibility verification transactions across all product platforms, including eCare NEXT®, IntelliSource, EDI, OneSource, BatchSource and Claims as well as any other transactions triggered by another Product, including Patient Estimates and ClaimSource. The Eligibility Transaction Fee shall be equal to the sum of the Monthly Base Rate plus the Excess Usage Fee, if any, and shall be billed based on Customer's selection below. These fees are billed on a monthly basis beginning the earlier of: i) Customer's first productive use or ii) nine (9) months following the Effective Date ("EV Billing Date"). The Eligibility Transaction Fee does not include Pass-Through Fees. In no event will the Eligibility Transaction Fee be less than the Monthly Base Rate for Customer's selected pricing tier. Prior to the EV Billing Date, Customer shall be billed at the Excess Usage Rate corresponding to Customer's selection below.

Beginning on the first anniversary of the Effective Date, Customer may change pricing tiers to a lower tier ("Downward Price Change") once per calendar quarter by providing written notice to Experian Health ("Price Change Notice"). Customer may change pricing tiers to a higher tier at any time ("Upward Price Change") by providing a Price Change Notice. Any Price Change shall be effective the first day of the calendar month following Experian Health's receipt of the Price Change Notice.

Eligibility Verification Transaction Fee			
Pricing Tier (Select One)	Monthly Base Rate	Monthly Max Transactions	Excess Usage Fees
1 <input type="checkbox"/>	\$150 per month	1,000 transactions per month	\$0.17 per transaction in excess of 1,000 transactions per month
2 <input type="checkbox"/>	\$280 per month	2,000 transactions per month	\$0.16 per transaction in excess of 2,000 transactions per month
3 <input type="checkbox"/>	\$390 per month	3,000 transactions per month	\$0.15 per transaction in excess of 3,000 transactions per month

#### **MISCELLANEOUS**

**BILLING TERMS.** Customer agrees to the following billing terms: Net 30 from date of invoice.

**STATEMENT OF WORK.** The Statement of Work ("SOW") attached hereto as Schedule B is incorporated herein by reference and made a part of this Agreement.

**TERM OF AGREEMENT AND RENEWAL.** Experian Health reserves the right to rescind the fee structure and terms if this Agreement is not executed within 45 days of the date this Agreement was submitted to Customer. This Agreement shall continue for a term of 24 months from the Effective Date ("Initial Term") and will automatically renew for an unlimited number of 12-month periods ("Renewal Term"). This Agreement may be terminated by either Party effective at the end of the Initial Term or at the end of any Renewal Term (if applicable) with a 90-day written termination notice. Notwithstanding anything to the contrary in the Agreement, Customer may terminate this Agreement with written notice to Experian Health effective as of, or any time after, Customer's go-live date with Experian Health as governed by the Cerner Sales Order between Cerner and Customer pursuant to which Customer will purchase Experian Health's PE product from Cerner.

This Agreement may be executed by digital signature and in any number of counterparts, each of which is an original, but all counterparts of which constitute the same instrument.

{signatures on next page}

**IN WITNESS WHEREOF**, an authorized representative of each of the Parties has executed this Agreement as of the dates written below.

**EXPERIAN HEALTH, INC.**

**MEMORIAL HOSPITAL OF SWEETWATER COUNTY**

Signed By: \_\_\_\_\_

Signed By: \_\_\_\_\_

Print Name: Jeff Corley

Print Name: \_\_\_\_\_

Title: Senior Director - Operations

Title: \_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_



**EXHIBIT A**  
**FACILITY LIST AND ADMINISTRATION**

**Primary Facility Information**

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**Name:** Memorial Hospital of Sweetwater County  
**Address:** 1200 College Drive, Rock Springs, WY, 82901-5868  
**NPI #:**  
**Tax ID#:**  
**Tax Exempt:** No  
*(If yes, please attach a copy of your certificate of exemption.)*  
**Facility Main Phone Number:**  
**Company Website:**  
**Type of Ownership:** Partnership \_\_\_ Sole Owner \_\_\_ Nonprofit \_\_\_ Corporation \_\_\_ LLC \_\_\_  
**Years in Business:**

**Contact Information**

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**Product Admin./Superuser**

**Contact:**

**Phone:**

**Email:**

**Onboarding/Implementation**

**Contact:**

**Phone:**

**Email:**

**Billing**

**Contact:**

**Phone:**

**Email:**

**Training**

**Contact:**

**Phone:**

**Email:**

**ADDITIONAL FACILITY INFORMATION**

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**1. Name & Address:**

**Tax ID:**

**NPI Number:**

**2. Name & Address:**

**Tax ID:**

**NPI Number:**

**3. Name & Address:**

**Tax ID:**

**NPI Number:**



**EXHIBIT B**  
**STANDARD TERMS & CONDITIONS OF SALE**

**I. SCOPE, TERMINATION AND SURVIVAL.**

- 1.1 Scope.** The Terms and Conditions contained herein shall apply to the Master Customer Agreement between Customer and Experian Health ("Agreement") and all addendums and amendments to the Agreement and all quotations and offers. These Terms and Conditions apply in lieu of any course of dealings between the parties or usage of trade in the industry. Acceptance of the Agreement is conditioned on Customer's acceptance of the Terms and Conditions, irrespective of whether the Customer accepts these conditions by a written acknowledgement, by implication, or acceptance and payment for Products and Services ordered hereunder. Capitalized terms used herein and not otherwise defined shall have the meanings given to them in the Agreement.
- 1.2 Termination.** This Agreement may be terminated as follows:
- A. **For Cause.**
- **Breach.** In the event of a material breach of any term, condition, obligation or covenant under this Agreement, other than the obligation to pay the fees, the non-breaching Party shall give the breaching Party written notice describing the breach. The Party receiving the notice shall have thirty (30) days (the "Cure Period") in which to cure the breach. If the breach is not cured within the Cure Period, the non-breaching party may terminate this Agreement upon written notice to the breaching Party stating the effective date of termination. This remedy shall be in addition to any other remedy available at law or in equity.
  - **Non-payment.** Customer is fully responsible for the payments of any charges not disputed in accordance with Section 2.2 ("Undisputed Fees") for the period during which Products and Services are provided. If Customer fails to pay Undisputed Fees when due, Experian Health reserves the right to suspend the Products and Services without further notice to Customer. Additionally, if Customer fails to pay Undisputed Fees when due, Experian Health may terminate the Agreement immediately without notice to Customer.
  - Furthermore, either Party shall have the right to terminate the Agreement immediately upon written notice to the other Party if either Party or its direct or indirect parent company (i) ceases to conduct its business in the ordinary course, (ii) becomes legally insolvent, suffers or permits the appointment of a receiver for its business or assets or (iii) avails itself to or becomes subject to any proceeding under any bankruptcy, insolvency or debtor's relief law of any applicable jurisdiction.
  - **Change in Circumstance.** Experian Health shall have the right to terminate the Agreement and/or any Product or Service offered hereunder upon reasonable advance notice if Experian Health is no longer offering or providing support for such particular Product or Service.
  - **Calculation of Early Termination Charges.** If Customer terminates this Agreement other than for cause prior to the end of the applicable term, Customer will pay an early termination fee, which represents Experian Health's reasonable liquidated damages and not a penalty, in a lump sum equal to the remaining contractually committed fees, including any unbilled or unpaid fees, for the remainder of the then-current term.
- 1.3 Survival.** Those provisions of this Agreement that, by their nature, are intended to survive termination or expiration of this Agreement will remain in force and effect, including without limitation Sections 2.5, 8, 9, 10, 24, 25 and 26.

**II. BILLING AND PAYMENT TERMS.**

- 2.1 Fees:** Customer agrees to pay all fees (including without limitation, monthly fees, implementation fees, license fees, subscription fees and transaction fees), for the Products and Services as set forth in the Agreement.
- 2.2 Billing:** Customer agrees that payment is due net thirty (30) days from the date of invoice. In the event any dispute arises involving any of the items contained on Experian Health's invoice, Customer agrees to notify Experian Health of said dispute within fifteen (15) days of receipt of the invoice in question but will not withhold payment on undisputed charges.
- 2.3 Fee Increases:** Notwithstanding any other provision of this Agreement to the contrary, Experian Health shall have the right to increase or modify the fees, other charges and financial terms of the Agreement. Experian Health agrees that any such increase will not exceed the lesser of (i) the Consumer Price Index for All Urban Consumers, Medical Sector for the calendar year preceding the date of the increase as stated at <http://www.stats.bls.gov/cpi> or (ii) four percent (4%). Notwithstanding any other provision of this Agreement to the contrary, Experian Health shall have the right to at any time without prior notice to pass through any fees from state and federal governmental entities ("Governmental Entities"), Medicaid and Medicare Managed Care Organizations ("MCOs"), third-party payers, communication tariffs, and/or other similar fees.
- 2.4 Late Payment:** If Customer fails to make payment with respect to any invoice by its due date such invoice shall be deemed delinquent and a finance charge equal to 1.5% per month totaling 18% per year), or the maximum rate permitted by applicable law, if less, of all outstanding balances shall be payable for each month, or portion thereof, during which the delinquency remains outstanding. Customer agrees to pay promptly all costs and expenses, including but not limited to reasonable attorneys' fees and costs of settlement incurred by Experian Health to collect any outstanding balances due hereunder.
- 2.5 Taxes:** Unless Customer provides Experian Health proof of exemption from taxation, Customer shall be responsible for any taxes imposed by federal, state, local or regulatory authority, taxes payable as a matter of law with respect to Customer's purchase of the Products and Services whether such tax is imposed now or later by the applicable authority, including but not limited to assessments, personal property, ad valorem, excise, telecommunications and sales and use. Customer shall not be responsible for other taxes, including federal or state income or similar taxes, based on Experian Health's income or assets, unemployment compensation, worker's compensation, Federal Insurance Contributions Act, Federal Unemployment Tax Act or other taxes, costs, or expenses incurred by Experian Health in providing the Products and Services. Experian Health shall calculate the taxes payable by Customer and include those taxes on the invoices delivered to Customer. Customer will promptly pay, and indemnify Experian Health against, all such taxes and duties, unless Customer provides Experian Health satisfactory evidence of an applicable tax exemption prior to the Effective Date.
- 2.6 Multi-Facility Installation.** Implementation fees shall apply as provided in the Agreement. Implementation fees cover initial installation of the applicable Products and Services at the facilities and/or locations listed on Exhibit A attached hereto. Customer hereby acknowledges and agrees that any additional facilities, locations and/or affiliate organizations shall execute an addendum or amendment to this Agreement and additional implementation fees may apply.

### III. LICENSED RIGHTS.

- 3.1 Grant:** Subject to the terms and conditions of this Agreement, and for so long as Customer is not in breach of the terms and conditions, Experian Health grants Customer a limited, nonexclusive, non-assignable, and non-transferable license to use the Products and Services, including any corresponding documentation, at the location(s) designated on Exhibit A for Customer's internal purposes for the Initial Term and any Renewal Term ("License Term"). The License Term will remain in effect until the Agreement is terminated. These license grants also apply to any user documentation provided by Experian Health ("Documentation").
- 3.2 Limitation:** The Customer may not: (1) reverse engineer the Products; (2) use the Products to provide time-sharing or service-bureau services, either for profit or not, except as stated above; (3) allow third-parties to access or use the Products or Test Data ("Test Data" shall refer to any data to which Customer has access through Experian Health's test databases); (4) give copies of the Products or Test Data to any other party including parent or sister company(ies), subsidiaries, or contractors; and (5) reproduce the Products, Test Data, or user Documentation except as stated above. Customer will not copy or modify the Products except as expressly permitted in this Agreement. Customer will not alter any trademark, copyright notice, or other proprietary notice on the Products or Documentation, and will duplicate each such trademark or notice on each copy of the Products and Documentation. All Products used to provide the Services and all Test Data are herein identified as proprietary to Experian Health, its licensors or vendors as applicable, and may not be copied, reproduced, modified, reverse engineered, translated, decompiled, disassembled, emulated, sublicensed, rented, leased, conveyed, assigned or used in any way other than as specifically authorized in this Agreement except to the extent and for the express purposes authorized by applicable law notwithstanding this limitation. All copies and partial copies of the Products and Test Data will remain the property of Experian Health.
- 3.3 Changes to Services:** Experian Health reserves the right at any time to (i) change, add, or modify any Product or Service or the manner in which such Product or Service is delivered or (ii) withdraw any Product or Service.

### IV. SYSTEM REQUIREMENTS.

Customer acknowledges and agrees that certain Products require high speed Internet connectivity and personal computers capable of running Microsoft Internet Explorer (9.0 or higher) ("System Requirements"), which System Requirements Experian Health may change from time to time upon notice through its website, and that the procurement and maintenance of such System Requirements are the responsibility of the Customer.

### V. DATA.

- 5.1 ID(s) and Passwords.** Upon execution of this Agreement, Experian Health will assign unique logon ID(s) and passwords(s) ("Account Data") to Customer to allow Experian Health to authenticate user identity and transmit data electronically. Experian Health shall retain title to the Account Data and reserves the right to change any Account Data at any time, for any reason. Customer agrees to i) keep confidential and not to disclose any Account Data to third parties, and ii) use only Account Data that was issued to Customer by Experian Health. Customer assumes full responsibility for selection and use of any Account Data as may be permitted or required by any Product. Customer shall be responsible to ensure that each user granted access to Account Data: (i) is fully aware of all of its obligations under this Agreement (ii) maintains the secrecy and security of the Account Data assigned to such user and iii) does not disclose Account Data to any other party. Customer shall be responsible for any use or access of the Products through its Account Data, whether such access was authorized or not. The use of the Account Data assigned to any user shall be deemed to constitute the acts of such person, and Experian Health shall be entitled to rely upon the data input without any obligation to identify or otherwise verify any person who gains access to the Products by means of such Account Data. Customer agrees that terminated users will be immediately removed from Customer's system, including but not limited to removal from access through the single log-in. Experian Health is responsible for obtaining, disseminating, and using beneficiary's data according to HIPAA and CMS guidelines. Experian Health agrees that the password is hidden from the user by the single-login solution and that a password-expiration policy is in place and electronically enforced with a 90-day or less expiration timeframe. Experian Health agrees at all times to ensure sufficient security measures to associate each Experian Health transaction with a specific user. If Customer accesses Experian Health via a single log-in solution, Customer shall have the ability to associate each transaction to a particular end-user. Upon request by Experian Health or any payer, governmental or commercial, Customer agrees to provide the name and NPI number of any end-user associated with any transaction and any other details, as requested. If Customer violates any provision of this Section 5.1 and/or other CMS data privacy and security rules Experian Health may, in its sole discretion, immediately revoke access to Experian Health data. Experian Health reserves the right to periodically audit, but no more than once per month, Customer's ability to associate each transaction to a particular end-user.
- 5.2 Data Authority.** The state or federal government, commercial payer and/or various data source's records are the final authority on eligibility, benefits, claims or other patient data. The data Customer and Experian Health may exchange pursuant to this Agreement may change as a result of changes in law or regulation, or actions taken in accordance with the terms and conditions of certain health care benefits contracts, or changes made to those contracts.
- 5.3 Non-Guarantee of Reimbursement.** Experian Health does not warrant the accuracy or completeness of the data it sends to Customer as it is returned directly from a payer or data source. Acceptance by Customer of the data Experian Health sends electronically does not constitute guarantee of reimbursement. Experian Health exercises no control whatsoever over any third-party content, data and information entered into or displayed by the Products or any third-party content, data and information passing to/from Customer via the Products. Customer's use of any third-party content, data and information obtained via the Products is at Customer's own risk and Experian Health specifically disclaims any warranty or responsibility for the accuracy or quality of third-party content, data and information obtained or provided through such use. Experian Health shall have no responsibility or liability with regard to actions of third parties, including but not limited to disputes concerning payment of claims, eligibility status of a patient, or any other payer-submitted information. Information submitted by a payer through Experian Health is no guarantee of payment and does not constitute a promise to pay; eligibility information is subject to change and waiting periods may apply. Experian Health does not warrant the accuracy or completeness of Test Data.
- 5.4 Medicaid Eligibility.** Medicaid eligibility information is restricted to an approved Medicaid provider having a valid Medicaid provider number for the sole purpose of verification of Medicaid eligibility status and data for Medicaid recipients requiring medical service(s). The Medicaid providers have the ability to contract for Medicaid eligibility verification without regard to other network services available from the contractor. Medicaid eligibility and other verification information may be available from the state via telephone or personal computer dial-up at no cost. Medicaid eligibility and other verification information in the state of Georgia may be available from the state of Georgia via telephone or personal computer dial-up at no cost.

### VI. SYSTEM TESTING.

Experian Health reserves the right to process test system inquiries on Customer's behalf in order to monitor service performance and quality assurance, but Customer shall not be responsible for any fees associated with such monitoring.

- VII. DATA RETENTION.** Experian Health stores response data within Experian Health OneSource® for up to seven (7) days and within Experian Health BatchSource® and Experian Health IntelliSource® for up to three (3) months, provided, however, in no event shall Medicare data be stored online in excess of thirty (30) days. Experian Health shall have no liability or responsibility to deliver stored data to Customer.
- VIII. PROPRIETARY RIGHTS AND CONFIDENTIALITY.** Customer, and on behalf of its employees, agents, vendors and clients, recognizes, acknowledges, and hereby agrees that Experian Health and its licensors and vendors, as applicable, retain a proprietary interest in the Products and Services provided hereunder, including Test Data, and also to any and all copies, versions and derivative works of the same. Customer, and on behalf of its employees, agents, vendors and clients, shall not use or disclose the Products and Services, Test Data, or any equipment, provided hereunder except for purposes consistent with this Agreement. To the extent that Experian Health's employees or agents obtain access to Customer's proprietary information (i.e., a patient's Protected Health Information), Experian Health shall use the information for the sole purpose of providing the Products and Services offered under this Agreement. Experian Health shall not disclose such proprietary information to any third party except where the third party is contractually obligated to Experian Health to facilitate the delivery of Products and Services. Customer acknowledges that Experian Health has no obligation to disclose any of its payer edits to Customer and that Experian Health retains a proprietary interest in any payer edits provided hereunder. Customer also acknowledges and agrees that certain payers, fiscal intermediaries, government entities, and other third-party information suppliers may require compliance with obligations involving confidentiality, liability, and scope of use, as a condition of accessing their information. In the event such compliance obligations are directed to Experian Health then Experian Health will convey such written obligations to Customer as a requirement to access data. Customer also acknowledges and agrees that this Agreement and all pricing information and performance standards contained within and any of its related amendments, addendums, exhibits and schedules is considered confidential, competitive health care information and trade secrets and shall not be disclosed to any third party without the prior written consent of Experian Health. Customer agrees that if it has access to Test Data, then Customer will treat the Test Data with the same standard of care, which shall be no less than a reasonable degree of care, as Customer normally uses to protect its own confidential or proprietary information to avoid disclosure of such data to third parties. Customer further acknowledges that in order to facilitate the performance of this Agreement and the relationship between the Parties, Experian Health may disclose to Customer other "Confidential Information," including without limitation, software (source code and object code), hardware, designs, inventions, ideas, applications, data, trade secrets, processes, techniques, work in process, "know-how," product plans, consulting materials, company plans, business policies and financial information, all derivative improvements and enhancements to any of the above, and information of third parties as to which Experian Health has an obligation of confidentiality. Customer agrees that it shall not use such Confidential Information except for purposes consistent with this Agreement and will not disclose such Confidential Information to any third party without the prior written consent of Experian Health. This entire section shall survive the termination of this Agreement and Customer's obligations of confidentiality as to trade secrets shall survive until such trade secret is no longer deemed a trade secret under law.
- IX. WARRANTIES, REMEDIES, INDEMNITIES AND LIABILITIES.** Experian Health warrants that it has the authority to provide the Products and Services to Customer under this Agreement, and as of the Effective Date and to the best of Experian Health's knowledge, the use of the Products and Services by Customer in accordance with the terms of this Agreement shall not infringe upon the United States patent, trademark or copyrights of any third party. Customer's sole and exclusive remedy and Experian Health's sole and exclusive liability in the event of a breach of the foregoing representation or warranty is the indemnification set forth in Section 10 below. Experian Health warrants that the Products will perform in all material respects in accordance with the functional specifications set forth in the Documentation. In the event of a breach of the foregoing warranty, Experian Health shall use commercially reasonable efforts to repair or replace the affected Product. Such effort shall be Customer's sole and exclusive remedy and Experian Health's sole and exclusive liability in the event of a breach of the foregoing warranty. EXCEPT AS OTHERWISE PROVIDED HEREIN, THE SERVICES AND PRODUCTS, INCLUDING TEST DATA, ARE PROVIDED "AS IS" WITHOUT WARRANTY OF ANY KIND, WHETHER EXPRESS, IMPLIED OR STATUTORY, INCLUDING WITHOUT LIMITATION ANY IMPLIED WARRANTY OF MERCHANTABILITY, NONINFRINGEMENT OR FITNESS FOR A PARTICULAR PURPOSE, ALL OF WHICH ARE EXPRESSLY DISCLAIMED. CUSTOMER AGREES THAT EXPERIAN HEALTH WILL NOT BE LIABLE FOR ANY CLAIM OR DEMAND AGAINST CUSTOMER BY ANY OTHER PARTY. DUE TO THE NATURE OF THE SERVICES BEING PERFORMED BY EXPERIAN HEALTH, IT IS AGREED THAT IN NO EVENT WILL EXPERIAN HEALTH BE LIABLE FOR ANY CLAIM, LOSS, LIABILITY, CORRECTION, COST, DAMAGE, OR EXPENSE CAUSED BY EXPERIAN HEALTH'S PERFORMANCE OR FAILURE TO PERFORM HEREUNDER WHICH IS NOT REPORTED BY CUSTOMER WITHIN THIRTY (30) DAYS OF SUCH FAILURE TO PERFORM. CUSTOMER ACKNOWLEDGES THAT, IN CONNECTION WITH THE SERVICES PROVIDED UNDER THIS AGREEMENT, INFORMATION SHALL BE TRANSMITTED OVER LOCAL EXCHANGE, INTEREXCHANGE AND INTERNET BACKBONE CARRIER LINES AND THROUGH ROUTERS, SWITCHES AND OTHER DEVICES OWNED, MAINTAINED AND SERVICED BY THIRD PARTY LOCAL EXCHANGE AND LONG-DISTANCE CARRIERS, UTILITIES, INTERNET SERVICE PROVIDERS, AND OTHERS, ALL OF WHICH ARE BEYOND THE CONTROL AND JURISDICTION OF EXPERIAN HEALTH. ACCORDINGLY, EXPERIAN HEALTH ASSUMES NO LIABILITY FOR OR RELATING TO THE DELAY, FAILURE, INTERRUPTION OR CORRUPTION OF ANY DATA OR OTHER INFORMATION TRANSMITTED IN CONNECTION WITH THE PRODUCTS OR SERVICES PROVIDED UNDER THIS AGREEMENT. Each party shall indemnify and hold the other party harmless from any and all losses and liability for damages, including court costs and reasonable attorney fees, sustained by the other party to the extent such losses and liabilities arise out of the negligent acts or omissions of the indemnifying party. The remedies set forth in this agreement constitute the sole and exclusive remedies for Customer at law and in equity. Experian Health's maximum liability for the damages to Customer, from any cause whatsoever, and regardless of the form of action, whether in contract or in tort, including negligence, will be limited to the lesser of: (1) the total amount payable for the Products and Services during the twelve (12) months before the cause of actions arose or (2) the damages incurred. IN NO EVENT SHALL EITHER PARTY, ITS LICENSORS, SUPPLIERS AND/OR SUBCONTRACTORS BE LIABLE TO THE OTHER PARTY FOR ANY INCIDENTAL, CONSEQUENTIAL, INDIRECT OR SPECIAL DAMAGES, INCLUDING, WITHOUT LIMITATION, DAMAGES FOR LOSS OF REVENUE OR PROFITS, COST OF CAPITAL, CLAIMS OF CUSTOMERS FOR SERVICE INTERRUPTIONS OR FAILURE OF SUPPLY, AND COSTS AND EXPENSES INCURRED IN CONNECTION WITH LABOR, OVERHEAD, TRANSPORTATION, INSTALLATION, OR REMOVAL OF EQUIPMENT OR PROGRAMMING OR SUBSTITUTE FACILITIES OR SUPPLY RESOURCES, EVEN IF SUCH PARTY HAS BEEN ADVISED OF THE POSSIBILITY OF SUCH DAMAGES. The obligations under this section shall survive termination of this Agreement.
- X. INTELLECTUAL PROPERTY INDEMNIFICATION.** Experian Health will indemnify, defend and hold harmless Customer from any action or other proceeding brought against Customer to the extent that it is based on a claim that the use of the Products or Services delivered under this Agreement infringes any U.S. copyright or U.S. patent of a third party; provided that Customer gives Experian Health immediate notice in writing of a complaint, gives Experian Health sole authority to defend the same and gives Experian Health all available information assistance and authority in connection therewith. Experian Health will have control of the defense of such proceeding including appeals and of all negotiations for, including the right to effect the settlement or compromise thereof. In the event of such a complaint or if in Experian Health's reasonable opinion such a complaint is likely to be successfully made, Experian Health shall, at its option and expense, to the extent necessary to provide substantially equivalent and compatible Product and/or Service, procure for Customer the right to continue using the Product and/or Service,

replace the same with non-infringing Product and/or Service, or modify the same so that it becomes non-infringing and conforms in all material respects. In the event that the infringing Product and/or Service cannot be replaced or modified as set forth herein in a commercially reasonable manner, Experian Health may discontinue the Product and/or Service, or that portion of the Product and/or Service, and the access granted hereunder will terminate. Experian Health will not have any liability to Customer if any such infringement, or complaint thereof, is based upon or arises out of (a) non-compliance with the design, plans or specifications furnished by or on behalf of Experian Health or the Documentation or this Agreement; (b) the use of the Product and/or Service in a manner for which the same was neither designated nor contemplated; (c) modifications made to the Products or Services by or on behalf of Customer; or (d) the claimed infringement of any patent in which Customer or any subsidiary or affiliate of Customer has any direct or indirect interest, by license or otherwise; or (e) if such claim or infringement or complaint arises out of the actions of or is brought by a non-practicing entity or other such "patent troll." THE FOREGOING ARE EXPERIAN HEALTH'S SOLE AND EXCLUSIVE OBLIGATIONS, AND CUSTOMER'S SOLE AND EXCLUSIVE REMEDIES, WITH RESPECT TO INTELLECTUAL PROPERTY INFRINGEMENT.

- XI. INSURANCE.** Unless otherwise agreed, during the term of this Agreement, Experian Health agrees to maintain, at Experian Health's expense, (i) Comprehensive General Liability Insurance in an amount not less than \$1,000,000 per occurrence and \$2,000,000 general aggregate, for bodily injury or property damage, (ii) Worker's Compensation at statutory limits and Employer's Liability in an amount not less than \$1,000,000 each accident, disease employee and policy limit and (iii) Automobile Liability insurance in an amount not less than \$1,000,000 combined single limit. Prior to performing any Services on Customer's premises, upon request, Experian Health shall furnish Customer with a certificate of insurance which evidence the minimum levels of insurance set forth herein.
- XII. BINDING EFFECT; NO ASSIGNMENT.** This Agreement shall be binding upon and inure to the benefit of the Parties and their respective successors, assigns and legal representatives, whether by merger, consolidation or otherwise. This Agreement may not be assigned by any Party hereto without the prior written consent of the other Party hereto; however, Experian Health may collaterally assign its rights under this Agreement to one or more lenders providing debt financing to Experian Health and Experian Health may assign this Agreement to a successor entity in the event of a sale of all or substantially all of its assets without notice to or consent of Customer.
- XIII. FORCE MAJEURE.** Experian Health shall not be liable for delays in performance under this Agreement or for failure to perform hereunder by reason of any third-party's failure to provide Experian Health with the data necessary for complete and proper transmission of the Services. Experian Health will not be liable to Customer for any failure or delay caused by any cause beyond the reasonable control of Experian Health, including but not limited to acts of God, acts of war, terrorism, riots, embargoes, acts of civil or military authorities, denial of or delays in processing of export license applications, fire, floods, earthquakes, internet outages, accidents, or strikes, whether or not such matters were foreseeable, and such failure or delay will not constitute a material breach of this Agreement.
- XIV. NOTICES.** Any notices or communications required by this Agreement must be provided in writing and signed by an authorized representative of the notifying Party and delivered by United States mail or courier service, telefacsimile or electronic mail to such Party's address as set forth below. Notice shall be deemed effective when delivered.

To Experian Health: Contract & Setup  
720 Cool Springs Blvd., Suite 200  
Franklin, Tennessee 37067  
Fax: 877-442-2150  
Email: contract&setup@experianhealth.com

To Customer: [Address & Contact Information listed on Customer Agreement Exhibit A]

**XV. COMPLIANCE WITH LAWS.**

- 15.1 Applicable Laws.** Customer represents and warrants that it shall comply with all applicable local, state and national laws and regulations pertaining to its performance and obligations under the Agreement. Customer's failure to comply with any applicable law or regulations shall constitute a material breach of this Agreement.
- 15.2 Participation in Federally Funded Healthcare Programs.** Experian Health warrants that neither it nor any of its employees assigned to perform material Services under this Agreement have been convicted of a criminal offense related to health care or been listed as debarred, excluded, or otherwise ineligible for participation in a federal health care program. Experian Health will notify Customer if Experian Health becomes aware that it or any of its employees assigned to perform material Services under this Agreement have been excluded or is otherwise ineligible for participation in a federal health care program.
- 15.3 Affirmative Action and Nondiscrimination.** Experian Health warrants that it will not discriminate against any employee because of race, color, religion, sex, national origin, ancestry, age, marital status, handicap, unfavorable discharge from the military, or status as a disabled veteran as required for compliance with federal and state law.
- 15.4 Books and Records.** Experian Health shall allow the Secretary of the Department of Health and Human Services and the Comptroller General, or their duly authorized representatives, access upon written request to this Agreement and to the books, documents and records of Experian Health that are necessary to verify the nature and extent of costs of Services furnished under this Agreement. Experian Health also agrees that if either Experian Health or any entity under common control or ownership as Experian Health carry out any duties of this Agreement through a subcontract, with a value or cost of Ten Thousand Dollars (\$10,000.00) or more over a twelve (12) month period with a related organization, the subcontract must contain a clause to the effect that the related organization must make available, upon written request, to the Secretary, or upon request to the Comptroller General, or their duly authorized representatives, the subcontract and the books, documents and records of the related organization that are necessary to verify the nature and extent of the costs. Such access shall be until the expiration of four (4) years after the Services are furnished under this Agreement.
- 15.5 Business Associate Agreement.** The Parties shall enter into a Business Associate Agreement substantially in the form attached hereto as Schedule A.

**XVI. RELATIONSHIP OF PARTIES.** Experian Health and Customer are separate and independent entities. Both Parties are acting as independent contractors and none of the provisions of this Agreement is intended to create any partnership or joint venture.

**XVII. COUNTERPARTS.** This Agreement may be executed in one or more counterparts, each of which shall be deemed an original, but all of which together shall constitute one and the same instrument.

- XVIII. TITLES AND CAPTIONS.** All section titles or captions contained in this Agreement are for convenience only and shall not be deemed part of the context nor effect the interpretation of this Agreement.
- XIX. TRADE SECRETS.** Nothing contained in this Agreement shall be construed as conferring by implication, estoppel or otherwise upon Customer, any rights under any trade secrets, or know how of Experian Health and no such rights shall arise from this Agreement or from any acts, statements or dealings resulting in the execution of this Agreement.
- XX. PRESUMPTION.** This Agreement or any section thereof shall not be construed against any Party due to the fact that this Agreement or any section thereof was drafted by said Party.
- XXI. SEVERABILITY.** If any provision of this Agreement is held to be unenforceable by a court of competent jurisdiction, the remaining provisions shall continue to be of full force and effect.
- XXII. FURTHER ACTION.** The Parties hereto shall execute and deliver all documents, provide all information and take or forbear from all such action as may be necessary or appropriate to achieve the purposes of the Agreement and Amendments and Addendums, as applicable.
- XXIII. PARTIES IN INTEREST.** Nothing herein shall be construed to be to the benefit of any third party, nor is it intended that any provision shall be for the benefit of any third party.
- XXIV. CHOICE OF LAW.** This Agreement and all disputes will be governed by and construed in accordance with the laws of the state of Delaware without regard to its conflict of law provisions. Exclusive venue and jurisdiction for any litigation arising out of this Agreement shall be subject to the local, state or federal courts in New Castle County, Delaware.
- XXV. DISPUTE RESOLUTION.** No action regardless of form, arising out of this Agreement, may be brought by either Party hereto more than twelve (12) months after the event giving rise to the cause of action.
- XXVI. ENTIRE AGREEMENT; AMENDMENTS.** The Agreement and the Terms and Conditions together with any attachments, exhibits and other information, whether physically attached, incorporated by reference or referenced to a website contain the complete and exclusive understanding between the Parties regarding the subject matter herein and supersede any prior or contemporaneous agreements, oral or written. No provision of the Agreement shall be modified or amended except in a writing signed by the Parties.
- XXVII. WAIVER.** Failure to exercise or enforce any right under this Agreement will not act as a waiver of such rights.
- XXVIII. COLLABORATION WITH EXPERIAN HEALTH MARKETING:** Customer shall i) Participate in the marketing reference program with potential Experian Health customers via telephone and onsite meetings (no more frequently than twice per calendar month); ii) Collaborate with Experian Health Marketing team on press releases to promote new product adoption, and collaborate on product webinars, articles, case studies and potential conference speaking proposals/presentations to illustrate functionality, customer service and return on investment ("ROI").

**SCHEDULE A**  
**BUSINESS ASSOCIATE AGREEMENT**

**THIS BUSINESS ASSOCIATE AGREEMENT** (this "BAA") is made part of the agreement between Experian Health, Inc. ("Experian Health") and Memorial Hospital of Sweetwater County ("Customer," and together with Experian Health, the "Parties"), pursuant to which Experian Health provides certain products and services (the "Products and Services") to Customer (the "Agreement"), and will be effective upon the Effective Date, as defined in the Agreement.

**WHEREAS**, Customer will provide patient health and financial information to Experian Health under the Agreement; and

**WHEREAS**, Customer and Experian Health wish to amend the Agreement to comply with the requirements of the HIPAA Rules (as defined herein).

**NOW, THEREFORE**, in consideration of the mutual promises contained herein and for other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, the Parties agree as follow:

1. **DEFINITIONS.** The below terms shall have the meaning indicated when capitalized and used in this BAA. Customer and Experian Health understand that unless otherwise provided in this BAA, capitalized terms have the same meanings as set forth in the HIPAA Rules.
  - 1.1 **Designated Record Set** shall mean "designated record set" as such terms is defined in 45 CFR 164.501, which is stored on the system operated and maintained by Experian Health under the Agreement or otherwise in the possession of Experian Health or its subcontractors.
  - 1.2 **De-Identified Data** means protected health information that has been de-identified in accordance with 45 CFR 164.514.
  - 1.3 **Electronic Protected Health Information or "ePHI"** shall mean PHI that is maintained or transmitted by Electronic Media.
  - 1.4 **HIPAA** means the administrative simplification section of the Health Insurance Portability and Accountability Act of 1996, as codified at 42 U.S.C. §1320d through 42 U.S.C. §1320d-8.
  - 1.5 **HITECH Act** means the Health Information Technology for Economic and Clinical Health Act (Title XIII, Subtitle D) and any applicable regulations promulgated thereunder.
  - 1.6 **HIPAA Rules** mean the Privacy Rule, Security Rule, Transaction Rule and applicable amendments by the HITECH Act.
  - 1.7 **Individual** shall have the same meaning as the term "individual" in 45 CFR § 160.103 and shall include a person who qualifies as a personal representative in accordance with 45 CFR § 164.502(g).
  - 1.8 **Privacy Rule** shall mean the Standards of Privacy of Individually Identifiable Health Information at 45 CFR Part 160 and 164, Subparts A and E, as amended by the HITECH Act and as may otherwise be amended from time to time.
  - 1.9 **Protected Health Information or "PHI"** shall have the same meaning as the term "Protected Health Information" in 45 CFR § 160.103, limited to the information created or received by Experian Health from or on behalf of Customer. All references to PHI herein shall be construed to include ePHI.
  - 1.10 **Secretary** shall mean the Secretary of the U.S. Department of Health and Human Services or his designee.
  - 1.11 **Security Rule** means the Security Standards for the Protection of ePHI contained in 45 CFR 160, 162 and 164, as amended.
  - 1.12 **Successful Security Incident** means a Security Incident that results in unauthorized access, use, disclosure, modification or destruction of ePHI.
  - 1.13 **Transaction Rule** means the regulations contained in 45 CFR 160 and 162, as amended.
  - 1.14 **Unsuccessful Security Incident** means activities, including but not limited to, pings and other broadcast attacks on firewalls, port scans, unsuccessful log-on attempts, denials of service and any combination of the above, so long as no such incident results in unauthorized access, use or disclosure of ePHI.
2. **HIPAA COMPLIANCE.** Experian Health agrees to comply with the following:
  - 2.1 **Use of Protected Health Information:** Experian Health shall not use any PHI other than as permitted by this BAA and: (i) as required to perform Experian Health's obligations under the Agreement, (ii) as required for Experian Health's proper management and administration or (iii) as permitted or Required by Law, including, without limitation, the requirements of the HIPAA Rules.
  - 2.2 **Obligations and Activities:**
    - 2.2.1 **Appropriate Safeguards.** Experian Health shall use appropriate safeguards to prevent the use or disclosure of PHI, other than as permitted by the Agreement or this BAA and will comply, where applicable, with the requirements of the Security Rule.
    - 2.2.2 **Experian Health's Agents.** Experian Health agrees to ensure that any agent, including a subcontractor, to whom it provides PHI received from, or created or received by Experian Health on behalf of Customer, agrees to the same or substantially similar restrictions and conditions that apply to Experian Health under this BAA.
    - 2.2.3 **Data Aggregation Services.** Experian Health may use PHI to provide Data Aggregation Services as permitted by the HIPAA Rules.



- 2.2.4 **De-Identified Data.** Experian Health may use De-Identified Data for any purpose.
- 2.2.5 **Reporting to Customer.** Experian Health shall report to Customer, within the time period required by the HIPAA Rules and applicable state law, any use or disclosure of PHI not provided for by this BAA of which it becomes aware, including all breaches of Unsecured PHI.
- 2.3 **Disclosures of Protected Health Information:**
- 2.3.1 **Disclosure to Workforce.** Experian Health may disclose PHI to members of its "Workforce" (as such terms is defined under HIPAA at 45 CFR 160.103, as amended), solely for the purposes of performing its obligations under the Agreement, this BAA, and as necessary for Experian Health's proper management and administration.
- 2.3.2 **Disclosure to Subcontractors.** If Experian Health carries out any of its duties under the Agreement through a subcontractor whose duties, by their nature, involve use, custody, disclosure, or creation of, or afford access to, PHI, there shall be a written contract for such work and the contract shall contain substantially the same restrictions and conditions that apply to Experian Health as a business associate under the HIPAA Rules.
- 2.3.3 **Disclosure to Third Parties.** Experian Health shall not disclose PHI to any other person or entity except as provided herein, as permitted by the Agreement, as permitted or Required by Law, or as approved by Customer.
- 2.4 **Access to Protected Health Information and Designated Record Sets.** If Customer does not already have in its possession a patient's PHI in a Designated Record Set, Experian Health shall provide copies to Customer of all or a portion of the PHI in the Designated Record Set then in Experian Health's possession without unreasonable delay following receipt of Customer's written request in order for Customer to: (a) make the PHI in the Designated Record Set available in accordance with 45 CFR Part 164.524 and (b) amend the PHI in the Designated Record Set in accordance with 45 CFR Part 164.526. If an Individual requests access to, or an amendment of, the PHI in a Designated Record Set such request shall be the responsibility of Customer. Experian Health may charge Customer additional fees for any requests made under this Section 2.4.
- 2.5 **Accounting of Disclosures.** Upon written notice by Customer to Experian Health that it has received a request for an accounting of disclosures of PHI regarding an Individual during the six (6) years prior to the date on which the accounting was requested, Experian Health shall make available, without unreasonable delay, to Customer such information then in Experian Health's possession, custody or control (including such information, if any, in the possession, custody or control of Experian Health's subcontractors) that is required for Customer to make the accounting required by 45 CFR Section 164.528. Experian Health may charge Customer additional fees for any requests made under this Section 2.5.
- 2.6 **Security Rule.** Experian Health shall implement Administrative, Physical and Technical Safeguards that reasonably and appropriately protect the confidentiality, integrity and availability of ePHI that Experian Health creates, receives, maintains or transmits on behalf of Customer as more fully set forth in the Experian Health OneSource Security Guide and policies published on Experian Health's website. Experian Health shall report to Customer any Successful Security Incident involving Customer's ePHI of which it becomes aware to the extent required by HIPAA Rules and as set forth at Section 2.10 below. To the extent required by the HITECH Act, Experian Health shall implement the safeguards, policies, procedures and documentation required by 45 CFR 164.308, 164.310, 164.312 and 164.316.
- 2.7 **Disclosure to U.S. Department of Health and Human Services.** To the extent required by the Privacy Rule, Experian Health shall make its internal practices, books and records relating to the use and disclosure of PHI available to the Secretary to the extent required for determining Customer's compliance with the HIPAA Rules. Notwithstanding the foregoing, no attorney-client, accountant-client or other legal privilege shall be deemed waived by Experian Health by virtue of this Section.
- 2.8 **Retention of PHI; Return/Destruction of PHI.** Upon termination or expiration of the Agreement, Experian Health and its subcontractors shall, if commercially feasible, return or certify as destroyed all of Customer's PHI (excluding any archival copies) that Experian Health has in its possession, if any. If such return or destruction is not commercially feasible, as determined by Experian Health in its sole discretion, the Parties agree that the requirements of this BAA shall survive termination of the Agreement and that Experian Health shall limit all further uses and disclosures of PHI to those purposes that make the return or destruction of such PHI infeasible. This Section 2.8 shall survive the termination or expiration of this BAA.
- 2.9 **Transaction Rule.** Experian Health and Customer acknowledge that nothing in the Agreement or this BAA is intended to modify or violate the requirements contained in 45 CFR Part 162.915, as amended from time to time.
- 2.10 **Security Incidents.** If Experian Health becomes aware of any Successful Security Incidents, Experian Health shall report the same in writing to Customer within 15 business days of such Successful Security Incident. The Parties acknowledge and agree that this Section 2.10 constitutes notice by Experian Health to Customer of the ongoing existence and occurrence or attempts of Unsuccessful Security Incidents for which no additional notice shall be required.
- 2.11 **Duty to Mitigate.** Experian Health and Customer agree to use commercially reasonable efforts to mitigate, to the extent practicable, any harmful effects that become known to either Party related to the use or disclosure of PHI not provided for in this BAA.
- 2.12 **Data Breach.** If Experian Health discovers, as determined in accordance with 45 C.F.R. § 164.410, that a Breach of Unsecured PHI of Customer has occurred or may have occurred, Experian Health shall notify Customer of the identification of each Individual who has been or is reasonably believed to have been affected by the Breach, along with any other information that Customer as a Covered Entity will be required to include its notification of the Individual under the HITECH Act and its implementing regulations, to the extent known or reasonably available to Experian Health.

### 3. PROHIBITED USES AND DISCLOSURES.

- 3.1 **Fundraising & Marketing.** Experian Health shall not use or disclose PHI for fundraising or Marketing purposes unless permitted by the HIPAA Rules and the Agreement.
- 3.2 **Restrictions.** Customer shall not request, and Experian Health shall not disclose, PHI to a health plan for payment or Health Care Operations purposes if the Individual has requested this special restriction, and Customer has informed Experian Health in writing of this request, and the Individual has paid out of pocket in full for the health care item or service to which the PHI solely relates, as required by 45 C.F.R. 164.522.
- 3.3 **Remuneration.** Experian Health shall not directly or indirectly receive remuneration in exchange for PHI, unless Experian Health obtains a valid authorization from the Individual including specifications of whether the PHI can be further exchanged for remuneration by the receiving entity or as permitted by the HITECH Act, described in 45 C.F.R. 164.502 and 45 C.F.R. 164.508. Experian Health shall not directly or indirectly receive payment in exchange for making certain communications to individuals about a non-healthcare related or third-party product or service that encourages the recipient to purchase or use the product or service unless (i) the communication describes only a drug or biologic that is currently being prescribed for the recipient of the communication or (ii) Customer obtained a valid authorization from the Individual. However, Experian Health can make such a communication on behalf of Customer within the scope of the Agreement.
4. **CUSTOMER OBLIGATIONS.** Customer agrees to obtain and maintain consent(s) and/or authorization(s), if required under applicable law, to permit Customer to disclose PHI to Experian Health as provided in the Agreement, including without limitation relating to prescription drugs. Customer shall provide Experian Health with a current list of designated representatives who shall be the only Customer representatives with authority to access PHI. Customer shall notify Experian Health in writing within 48 hours if any designated representatives are no longer employed by Customer or no longer should be allowed access to PHI. Customer shall notify Experian Health in writing of any limitations in its notice of privacy practices in accordance with Section 164.520 of the Privacy Rule if such limitation may affect Experian Health's use or disclosure of PHI. Customer shall notify Experian Health in writing of any changes in, or revocation of, permission by an individual to use or disclose PHI, if such changes may affect Experian Health's use or disclosure of PHI. Customer shall notify Experian Health in writing of any restriction on the use or disclosure of PHI that Customer has agreed to in accordance with Section 164.522 of the Privacy Rule or under the HITECH ACT if such restriction may affect Experian Health's use or disclosure of PHI. Customer shall only use and/or disclose the Minimum Necessary PHI needed for Experian Health to provide the Products and Services in accordance with the HITECH Act and the Privacy Rule.
5. **TERMINATION.** If either Party materially defaults in the performance of any of its duties or obligations under this BAA and such default is not cured within 30 days after written notice is given by the non-defaulting Party to the defaulting Party specifying the default, the non-defaulting Party may at its option terminate this BAA as of a date specified in the notice of termination (the "Termination Date"), which Termination Date must be after the date of the notice of termination. Upon Experian Health's knowledge of a material violation of the HIPAA Rules by Customer, Experian Health shall provide notice and an opportunity for Customer to end the violation and may terminate this BAA if Customer does end the violation within 15 days of receipt of notice from Experian Health.
- Notwithstanding the foregoing, Experian Health may immediately suspend its performance of the Products and Services upon written notice to Customer if in Experian Health's reasonable good faith judgment any Products and Services are being used contrary to the Agreement or this BAA. Experian Health may suspend such performance until Customer delivers to Experian Health an adequate assurance of future performance by Customer in accordance with the terms and conditions of the Agreement and this BAA. If Customer is unable to provide such assurance or to cure such contrary use within five (5) days of Experian Health's written notice of suspension, Experian Health may terminate this BAA and/or the Agreement immediately upon written notice to Customer.
6. **CONFLICT WITH AGREEMENT; AMENDMENT.** The Parties agree that any ambiguity in this BAA shall be resolved in favor of a meaning that permits the Parties to comply with HIPAA. If there is a conflict between the terms of this BAA and the terms of the Agreement, the terms of this BAA shall control. All of the other terms and conditions contained in the Agreement and not specifically amended hereby remain in full force and effect. If there is an inconsistency between the provisions of this BAA, the HIPAA Rules, the HIPAA Rules shall control. Where provisions of this BAA are different than those mandated in the HIPAA Rules but are permitted by the HIPAA Rules, the provisions of this BAA shall control. If there are subsequent changes or clarifications to the HIPAA or Privacy Rule the Parties will negotiate in good faith to amend this BAA to comply with such changes. Notwithstanding the foregoing, if such changes or clarifications materially affect Experian Health, Experian Health may terminate the Agreement and this BAA by giving Customer at least 30 days' prior written notice.
7. **NO THIRD-PARTY BENEFICIARIES.** Nothing express or implied in this BAA is intended to confer, nor shall anything herein confer, upon any person other than the Parties and the respective successors and assigns of the Parties any rights, remedies, obligations, or liabilities whatsoever.
8. **DISCLAIMERS.** IN NO EVENT SHALL EITHER PARTY BE LIABLE FOR ANY INDIRECT, SPECIAL, EXEMPLARY, INCIDENTAL, CONSEQUENTIAL OR PUNITIVE DAMAGES ARISING OUT OF OR RELATING TO THIS BAA OR ANY BREACH OF THIS BAA, INCLUDING, WITHOUT LIMITATION, DAMAGES TO BUSINESS REPUTATION, LOST PROFITS, LOST DATA, BUSINESS INTERRUPTIONS OR OTHER ECONOMIC LOSS ARISING OUT OF OR RELATED TO THIS BAA. THE DISCLAIMERS SET FORTH IN THIS SECTION SHALL APPLY WHETHER OR NOT FORSEEABLE, HOWEVER CAUSED, AND EVEN IF THE PARTY HAS BEEN ADVISED OF THE POSSIBILITY OF SUCH DAMAGES.
9. **LIABILITIES.** Customer agrees that Experian Health's total aggregate liability under this BAA, from any cause whatsoever, and regardless of the form of action, whether in contract or in tort, including negligence, will be limited to the lesser of (1) the total amount payable for the Products and Services during the 12 months before the cause of action arose or (2) the damages incurred. Customer covenants that it will not sue Experian Health for any amount greater than such liability cap. Customer acknowledges that Sections 8 and 9 apply to the maximum extent permitted by applicable law and represent a fair allocation of the risk based on the prices Experian Health charges for the Products and Services.

**SCHEDULE B**  
**STATEMENT OF WORK**

(attached)