

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

**October 7, 2020**

The Board of Trustees of Memorial Hospital of Sweetwater County met via Zoom in regular session on October 7, 2020, at 2:00 PM with Mr. Taylor Jones, President, presiding.

**CALL TO ORDER**

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

Officially present: Ms. Irene Richardson, Chief Executive Officer; Dr. Lawrence Lauridsen, Medical Staff President; Mr. Jim Phillips, Legal Counsel; Mr. Darryn McGarvey and Mr. Dan Deyle, CliftonLarsonAllen; and Mr. Jeff Smith, Sweetwater County Commission Liaison.

**Pledge of Allegiance**

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

**Our Mission and Vision**

Dr. Sowada read aloud the mission and vision statements.

**Mission Moment**

Ms. Richardson said we have been receiving great reviews about Dr. Lex Auguste, OB/GYN. She said it has been wonderful to hear how he has impacted so many patients already. Ms. Richardson shared a story provided by Ms. Nicole Halstead, Dialysis Director, from a recent shopping experience. Ms. Halstead was wearing an "RN" shirt while shopping and she was approached by a gentleman. He asked her if she worked in Med/Surg or ICU. She said she did not work in either one but knows a lot of staff in those areas. She said the man praised "Dani" and Dr. Alicia Gray for the care they gave to his mother. He was very emotional and told her he was grateful for the compassion they shared with his mother. He told her he was so pleased with the care and said he is going to donate to our Foundation because he knows the care his family received was such great, kind care.

**APPROVAL OF AGENDA**

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

## **APPROVAL OF MINUTES**

The motion to approve the minutes of the September 2, 2020, regular meeting as presented was made by Dr. Sowada; second by Mr. Mathey. Motion carried.

## **COMMUNITY COMMUNICATION**

There were no comments.

## **OLD BUSINESS**

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

Ms. Kim White, Incident Command, reported Covid is making a comeback in Sweetwater County and throughout Wyoming. She said it is ramping up throughout Idaho, Montana, and all over the place. Ms. White said we are watching that closely. We have had one hospitalization. Staff are extremely busy but handling things very well. We are changing the times at the swabbing station and will send out announcements later this week. With the cold weather and with it getting darker earlier, we want to make sure we keep our staff safe. Ms. White said we are working with public health and the school districts. We are changing to a saliva test and hopefully that will help some of the testing and nasal pharyngeal things the community and patients do not love. She said we have had one positive employee since the last meeting. No one was quarantined from that one person. Ms. White reported we are status quo on personal protective equipment and maintaining at this point. Mr. Jones said there has been quite an uptick in the mountain states and asked if we know why. Ms. White said a lot of things are opening up like restaurants, bars, schools, but there is no one thing listed for sure. Mr. Jones thanked Ms. White and said to keep up the good work.

## **NEW BUSINESS**

### **FY20 Audit Report**

Mr. Darryn McGarvey and Mr. Dan Deyle from CliftonLarsonAllen introduced themselves. Mr. Deyle is the new manager on the audit. Mr. McGarvey said they performed the audit 100% remotely given where things are at from a Covid perspective. He said they are trying to do all of their work remotely to keep their clients and employees safe. Mr. McGarvey said they pulled the work off safely with the help of Ms. Tami Love, Chief Financial Officer, Mr. Ron Cheese, Patient Financial Services Director, Ms. Jan Layne, Controller, Ms. Richardson, and the entire team. The team tried to make it feel like they were onsite and had check-in meetings with the team every day. Mr. McGarvey said the experience was quite different from previous years but said he was happy to report they pulled it off and the audit is in really good shape. He said there is a lot of ambiguity on information from Health and Human Services on Covid-related funds. Mr. McGarvey reviewed the PowerPoint presentation they reviewed in detail with the Finance and Audit group the previous week. He said Covid-19 provider relief funds and Medicare advance payments resulted in a significant increase in days of cash on hand. The Medicare advance must be repaid. There was one minor audit adjustment that was proposed and no material weaknesses identified. He said the upcoming accounting standards that will have an impact involve leases and capitalized interest. Mr. Deyle reviewed:

- the industry benchmark data

- operating margin (relatively steady bottom line and Covid-19 funds are not reported as operating revenue, the organization is trending in a positive direction from a revenue standpoint)
- total margin (adds in non-operating revenues and expenses including interest expense on bonds and provider relief funds, fairly consistent with where it's been in the past)
- total EBIDA is a great indicator of what is the cash flow from operations from the organization and is relatively consistent within industry benchmarks
- operating loss per provider FTE specifically the clinics focus on the trends, visits per provider FTE (clinics) increased nicely in 2018, stayed pretty steady and then decreased in 2020 with impact from Covid
- days cash on hand sees huge growth almost identical to where we were in 2019
- net days in AR slowly trending in the upper direction and a testament to the business office as they focused on driving down the length of time it takes to collect AR, percentage of AR over 90 days old encouraging data
- bad debt and charity care as a percent of gross patient service revenue significantly higher than other CliftonLarsonAllen clients and is very demographic-based and not a true apples to apples comparison
- debt service coverage similar trend line as we see in total margin and consistent with the industry trends and well above the requirement for the debt agreement, debt to capitalization looks at the organization's reliance to long term debt and nice to see well below the industry benchmarks
- average age of plant has been a steady growth implies the organization has some capital expenditures on the horizon and should see that start to come down in 2021

Mr. McGarvey said it is apparent the hospital could have held their own even without the Covid funds. He reviewed industry trends and Covid-19 impact on hospitals and health systems. He said the federal response was quick with a "ready, shoot, aim" approach. He said there has been a flurry of activity with a lot of money distributed. They may have a hindsight 2020 approach when they revisit how those funds are used. Mr. McGarvey said if an organization received more than \$750,000 they will be subject to a single audit. He said we do not have a lot of guidance on that yet. The audit is due nine months after the fiscal year ends but the timeline may be extended. He said CliftonLarsonAllen performs more single audits than any other organization in the country so they feel confident they can help us with that process. Mr. McGarvey said there are definitely more reporting requirements related to this as well. They really focused on lost revenue first and then expenses second. Forty-eight hours ago, they again were redefining some of the definitions related to additional expenses and healthcare capacity. The Hospital has about \$6.5M provider relief funds that we have recognized in our income statement. The rules may change so there is a risk some of those funds may have to be paid back to Health and Human Services. There will be additional guidance coming from them and we do not know what that information will be. Mr. McGarvey said there are a lot of unknowns at this point. CliftonLarsonAllen is advising clients and doing the best they can with the information they have at the time. They are conducting a webinar October 8 to talk through some of these changes. Mr. McGarvey said there is a lot of good information in the meeting packet that is not related to Covid-19. He said the team did a great job getting ready for the remote audit and it was a great audit. He said CliftonLarsonAllen is happy to be a partner and work through some of these things, and happy the Hospital had a successful year. Mr. Jones congratulated everyone in the Hospital responsible for the work to ensure a clean audit and he can see how well the organization has done not only through Covid but in the last three years. He said it has really been a lot of difficult times and adversity and to have it laid out in those graphs shows

a pretty plain picture. Mr. Jones said he wanted to thank everyone in the organization because it takes a team effort to hold it together and improve. Ms. Richardson thanked Ms. Love, Mr. Cheese, Ms. Layne, and Ms. Erika Taylor. She said they did a great job and excellent work on the audit. Ms. Richardson spoke to the partnership between CliftonLarsonAllen and the Hospital. She said they have been so helpful and literally right by our side as always but especially now. Ms. Richardson said we continue to try to make sense of all the changes coming pretty fast and furious. Mr. McGarvey said they appreciate the partnership and said the Hospital has a nice organization with great leadership and great Board. He said he hopes that Covid slows and we can get back to some sense of normal in 2021. The motion to approve the FY20 Audit Report as presented was made by Mr. Mathey; second by Mr. Tardoni. Motion carried.

### **Board Policy – Maintenance of Board and Board Committee Meeting Minutes**

Dr. Sowada said she thinks the policy itself is explanatory and asked if there were any questions. Mr. Kelsey said if you look at the state statute on this, there is a tremendously big manual that the Wyoming Department of Archives has and we are required to follow that. He asked Ms. Richardson about all the records for the Hospital. She said we have them on hard drives and those are backed up in IT. Mr. Kelsey said we might read over that manual really carefully because his experience is the State is a stickler on what is accepted and he said it gets to be a real nightmare to maintain. Mr. Kelsey said he was just wondering how you handle that. He said his question goes far beyond Board minutes. Ms. Richardson said we do adhere to the statutory guidelines regarding the type and length of storage. Mr. Tardoni said there is a sizeable warehouse used to store records. At one time, the County offered us the old county building for storage and we looked at it but we decided it was not feasible. Mr. Kelsey said it is just something to think about. He said it is interesting if you read the statute it says all public records are the property of the State of Wyoming. You have to worry about fire and theft and all sorts of things. Ms. Richardson said we will check on it. Mr. Mathey said he thought we adopted a policy indicating specifically how long records must be maintained. Mr. Kelsey said that's all fine and well but the State changes that periodically so we are responsible for abiding by that so we have to keep on top of it and read that manual from time to time. Ms. Suzan Campbell, In House Counsel, said she has redone the records retention policy and it is based on the State schedule. She said it is in Policy Stat and she updates it annually. Dr. Sowada said this policy speaks simply to Board materials.

### **Employee Policy – Political Activity**

Mr. Tardoni said the policy has been discussed at two different Human Resources Committee meetings. Mr. Kelsey said this is one of the policies before he left the Committee that he asked the Hospital to look at because he did not see we had one. He asked what if we have one of our employees who wants to run for the state legislature or wants to run for county commissioner. Do we encourage that or do we say you have to do that on your time, use vacation time, etc.? He said a lot of organizations have policies that govern what the Board policy is on whether it is encouraged, etc. Mr. Kelsey said that was not addressed in this policy and said we might want to look at that and see if we want to address that or not. Ms. Richardson said she asked around to other places and the ones we talked to said it is on their own time and have to not have it interfere in their job. She said if we want to add that in there, we can add that in there. Mr. Kelsey said if the Board wants to add that in that would be great and said it is just a thought. Mr. Jones asked if we need any language in there about conflict of interest. Mr. Kelsey said there are different things

to think about. Mr. Tardoni said he encourages people to do this but they are doing something on their own time and it should remain on their own time. He said this political activity policy kind of outlines what they can and cannot do. Dr. Sowada said when the Committee looked at the policy Mr. Kelsey's question didn't even register in her mind and she appreciates him bringing this up. She said she thinks we need to take it back to the Committee to talk about it some more. Mr. Tardoni said we need to know what the Board wants. Mr. Jones said it is sent back to the Committee for further work.

### **CHIEF EXECUTIVE OFFICER REPORT**

Ms. Richardson said we have been consumed with State Land and Investment Board (SLIB) grants and changes in the CARES Act funds. She said she was going to give a brief update and then talk about the big items we need to discuss. She said we continue to do our socially distanced person-centered care workshops. We are moving forward with communicating with empathy training plans. The Joint Commission has not been on-site to-date. We continue to prepare and we are making sure we are ready. We continue to round and are still waiting. Ms. Richardson said we appreciate the leaders and their staff ensuring we are prepared. The Paint the Town Pink virtual event was a success. Ms. Tasha Harris, Cancer Center Director, and her team along with Ms. Kelly Sugihara, Wyoming Cancer Resource Services Region V Coordinator, put forward a really good event. Ms. Richardson said we will have our socially distanced Halloween cruise thru and haunted garden event on Friday, October 30. She said we will make sure we take all the precautions necessary pending any orders from the Governor. She shared a reminder that we are going to have the Quality Board Workshop on October 29 at 4:00 PM and that special meeting is in lieu of the November 4 regular meeting. Ms. Richardson said there will be some business we will need to discuss at the October 29 Board meeting and asked for the Board's pleasure on timing if they would like to meet earlier than 4:00 PM. Ms. Richardson said we have seen a big spike in Covid cases in Sweetwater County. We have implored people to be diligent about social distancing, wearing masks, washing hands, and doing all we can to minimize the spread. Ms. Richardson said she appreciates everyone's efforts. There was discussion of resolution of emergency powers, SLIB and projects, and CARES Act money. Ms. Richardson thanked the Board for granting the emergency powers to her during the pandemic. She has been very conservative and has been very careful to not abuse the powers. She listed the grant applications that have been approved so far for a total of \$5.525M. Ms. Richardson thanked Ms. Tiffany Marshall, Foundation Director, Ms. Love, Mr. Jim Horan, Facilities Director, and Ms. Mary Fischer, Lab Director, for their hard work to put the grants together for submission. Ms. Richardson said the meeting packet contained a more detailed graphic of transactions that have occurred since the approval of the SLIB grants. She reviewed the list of purchase orders issued for SLIB projects to-date. The motion to ratify the expenses at this point outlined in yellow in the packet as detailed by Ms. Richardson was made by Mr. Mathey; second by Mr. Tardoni. Motion carried.

Ms. Richardson said the medical office building entrance project bid came in at \$223,000 more than the original estimate for the grant. The team decided we do not want to move forward with this project at this time. The short time available, the long lead-time on getting the door, and the increased cost lead us to believe the project is not in our best interest at this time. Mr. Will Wheatley, Plan One Architects, said we were given a 12-week lead-time for the doors. This instance created a pretty stressful situation for the contractors due to the completion date at the end of December. Mr. Tardoni asked if they are seeing a squeeze on available personnel on contracts.

Mr. Wheatley said yes and no, it depends on the niche we are trying to fill. Ms. Richardson said right now all the requests for reimbursement must be in to the Attorney General's office by December 15 and we have not heard any discussion of extending that date. Commissioner Smith said what he has heard is the State wants everything in by everyone by the 15th so they can get all of their information submitted to the federal government by the 30th.

Ms. Richardson said the HVAC project and UV lights original estimate was \$2.314M and \$463,875 respectively. She said the bid came in significantly higher than that. She sent the Board some information about that and said she wanted to bring this to the Board's attention to get approval if we want to move forward due to the variance being significantly higher than the estimate. Ms. Richardson asked Mr. Jake Blevins of ST&B Engineering to explain the variance. Mr. Blevins said when doing the various grants we came up with \$2.3M, then got the grant in August, and then got into architectural design and found we have a sub-par roof structure and also discovered some variations in roof conditions in the existing building. We discovered the process where we moved forward with getting the design done to get the grant and then found these issues. Mr. Kelsey asked if this new amount that is much higher is the GMP that Groathouse gave them. Mr. Blevins said we do not have that amount yet because we are moving so fast as a design team. He said we do not have a formal GMP document. He said we are expecting to set a GMP on the 100% information. Mr. Blevins said everything has been advertised per the statutes. He said he significantly underestimated the amount of equipment we could order and have by December 15. Ms. Richardson said we originally discussed with the HVAC project we thought we could probably finish about \$900,000 of \$2.3M by December 15. We said if we had to, we could supplement with our own funds. Now that it is significantly higher, Ms. Richardson said she does not want to exceed that \$1.4M we had originally set aside for that amount. She said we have to make sure that project will be finished to that \$2.3M for the HVAC project and the amount for the UV lights by December 15. Ms. Richardson said we are hoping for some assurance from Groathouse that we will be able to meet that deadline. Mr. Blevins said SLIB will pay for anything we get done by that point. He said he doesn't want to put words in their mouth but he believes we can get the lion's share of those two project's SLIB funds by December 15. Ms. Richardson said she wants to make sure we do everything we can to maximize the grant request to the \$2.7M those two projects add up to. Mr. Blevins said because the last pay app is due on December 15 what he is going to ask is produce the first application on October 15 so we have three pay apps. He said Groathouse has been working very hard on moving this forward. Ms. Love said that because we bought the Trane unit we were told we would get a discount. She said we are sending in our first request from SLIB for \$628,000 so we already have our first step going on this. Ms. Richardson clarified she only wants to commit \$1.4M of our own funds to this project. She does not want to come back to the Board to ask for permission to spend additional funds for this. Dr. Sowada asked Ms. Richardson to explain why if something goes crazy what would be the downside of spending more than \$1.4M of the Hospital's money. Ms. Richardson said that was the original amount she was approved for and she would like to keep it at that. She would prefer not to be in December and have to be responsible for adding our own funds because we have not been able to finish and bill for up to the amount planned. She said we certainly could use CARES Act money but we should be able to bill and request and receive up to the amount requested from SLIB. Dr. Sowada said she heard Ms. Richardson say we could afford more but we would rather not. Mr. Mathey clarified the plan is to pay that \$1.4M out of CARES Act money. Ms. Richardson said she included a summary of how we have reconciled the CARES Act money. The information that was issued in June was changed by Health and Human Services in September so we want to make sure we are accounting for it

correctly. This new guidance may not be as beneficial to hospitals so we have been asked to submit letters to our legislators requesting they go back to the June guidance for reconciling the funds. As of Monday, the guidance even changed then. Ms. Richardson said we are trying to stay on top of it and she will keep the Board updated as to any changes that come up. She said we feel confident Health and Human Services' interpretation of capital expenditures is considered expenses so we think we could use that for the HVAC project and Lab remodel. The motion to authorize the CEO to proceed with the HVAC and UV projects being fully aware of the cost of these projects being \$4,384,930 was made by Mr. Mathey; second by Mr. Tardoni. Motion carried.

Ms. Richardson introduced Ms. Ann Clevenger as the new Chief Nursing Officer and said we are so excited to welcome her to our hospital family. Ms. Clevenger said she is very excited to be here. Ms. Richardson said Ms. Clevenger brings with her a wealth of experience and knowledge. She said a press release on Ms. Clevenger is coming out soon and asked everyone to please watch for that.

## **COMMITTEE REPORTS**

### **Quality Committee**

Mr. Kelsey said he did not have anything additional to add. He referenced the minutes and his chair report in the packet. Mr. Kelsey said he is looking forward to the workshop later this month.

### **Human Resources Committee**

Mr. Tardoni said his comments are in the chair report. He pointed out there is a violence prevention policy included in the minutes and that is a working document. Mr. Tardoni said it is not ready for comment, just something the committee is still working on.

### **Finance and Audit Committee**

Mr. Mathey asked that everyone please see the most excellent chair report provided by Mr. Tardoni that he created in Mr. Mathey's absence from the committee meeting the prior month.

**Capital Expenditure Requests:** Mr. Mathey reviewed capital expenditure request FY21-17 for a cone system submitted by Ms. Harris & Dr. Joshua Binks, Radiation Oncologist. Mr. Mathey said more detail is available in the packet. The motion to approve FY21-17 as requested was made by Mr. Mathey; second by Mr. Tardoni. Motion carried. Mr. Mathey reviewed capital expenditure request FY21-23 submitted by Ms. Leslie Taylor, Clinic Director, for equipment for the Neurologist who is scheduled to be on-board later this calendar year. He said more detail is available in the packet. The motion to approve FY21-23 as requested was made by Mr. Mathey; second by Mr. Tardoni. Motion carried.

**Bad Debt:** The motion to approve the net potential bad debt of \$936,722.29 as presented by Mr. Cheese was made by Mr. Mathey; second by Mr. Tardoni. Motion carried.

### **Building & Grounds Committee**

Mr. Kelsey said he did not have anything more to add than what is in the chair report and minutes.

### **Foundation Board**

Ms. Marshall reported we rolled out the first phase of the revamped Guardian Angel Program. Envelopes will be delivered to departments and they will put the envelopes into the discharge packets. We will measure response to see if patients and families respond to that. Ms. Marshall said the Guardian Angel Program is an opportunity for families or patients to nominate someone who participated in their care or they came in contact with. They make a donation in any amount to the Foundation and we will honor the staff member with a pin they can wear. We will look at how we can further expand that program. Ms. Marshall said the Annual Gifts Committee is up and going. We are working on finalizing our collateral. The Waldner House continues to be utilized a lot from 3-6 days a week. Ms. Marshall said we are gearing up again for a couple of smaller projects. The County has generously volunteered to partner with us on a couple of things. The Foundation Board has approved doing something fun for the staff next week. We are distributing gifts to staff on the main campus and at the College Hill location to say thank you for everything they are doing and to show support to them. Ms. Marshall said the Foundation Board feels each and every staff member makes a difference to our community.

### **Compliance Committee**

Mr. Tardoni said the chair report is in the packet. He said this is the first time we have received a report on an audit. The details are in the packet. Mr. Tardoni congratulated the physicians on their compliance.

### **Governance Committee**

Dr. Sowada said the minutes are in the packet.

### **Executive Oversight and Compensation Committee**

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

### **Joint Conference Committee**

Mr. Mathey said his report is in the packet. He said he is happy to report on September 21 the Medical Staff Bylaws Committee unanimously approved a new draft of the Medical Staff Bylaws after 2 to 2 ½ or maybe even 3 years. Mr. Mathey said it has come a long, long way from that first draft we looked at quite awhile ago. In the process, one of the most valuable things in his report is what exactly do Medical Staff Bylaws do. He said these do it and do it well. He pointed out some highlights in his report. Mr. Mathey said the draft bylaws contain an appeals process when members of the Medical Staff face adverse credentials or adverse privileges action. A termination and appeal policy is awaiting action related to the adoption of the Medical Staff Bylaws by the Medical Staff. The timeline will be introduction of the bylaws on October 29 and a vote at the December meeting. He said these will come before the Board. Mr. Mathey said he really is quite



pleased that they are done. Mr. Jones thanked everyone involved in the many hours of work on those.

### **CONTRACT REVIEW**

Ms. Campbell said the Experian Health Master Customer Agreement was presented to her by Ms. Love so she said Ms. Love could answer any questions anyone may have. Ms. Campbell said we need the agreement to start work with Cerner. The motion to authorize the CEO to execute the Experian agreement was made by Mr. Mathey; second by Dr. Sowada. Motion carried.

### **MEDICAL STAFF REPORT**

Dr. Lauridsen said the Bylaws Committee met on the September 21. Mr. Mathey's review covers it. The Medical Executive Committee met September 22 and it was largely informational. Dr. Lauridsen said we are happy to welcome Ms. Ann Clevenger as the new CNO. He said he thinks we can anticipate some discussion on policies and procedures as the bylaws wrap up. He said we will hope to have more to report later. Mr. Mathey asked when the bylaws will be voted upon by the Medical Staff. Ms. Kerry Downs, Medical Staff Services Director, said they will be ratified by the Medical Executive Committee on October 27 and then she can mail them out to everybody and we have to wait twenty days and can schedule a General Medical Staff meeting by the middle of November.

### **GOOD OF THE ORDER**

Mr. Kelsey asked about the timing on October 29. The Quality Workshop is starting at 4:00 PM. Mr. Jones said we will meet at 2:00 PM for a regular meeting and then go in to the workshop at 4:00 PM.

Mr. Phillips said Ms. Richardson asked him to be involved but he is not aware of anything for executive session so with the Board's permission he would leave the meeting.

### **EXECUTIVE SESSION**

Mr. Jones said there would be an executive session for personnel. He said the Board would hop off the current call and be on their executive session call. He said it would probably be a couple of hours and then the Board would come out of executive session and return to the open session call and wrap up the meeting before they adjourned. The motion to go into executive session was made by Mr. Kelsey; second by Dr. Sowada. Motion carried.

### **RECONVENE INTO REGULAR SESSION**

At 5:17 PM, the Board came out of executive session and the motion to go back in to regular session was made by Dr. Sowada; second by Mr. Mathey. Motion carried.

## **ACTION FOLLOWING EXECUTIVE SESSION**

### **Approval of Privileges**

The motion to approve hospital privileges as discussed in executive session was made by Mr. Mathey; second by Dr. Sowada. Motion carried.

Credentials Committee Recommendations from September 15, 2020

1. Initial Appointment to Active Staff (2 years)
  - Dr. Tony Pedri, Orthopaedic Surgery
2. Initial Appointment to Consulting Staff (1 year)
  - Dr. Mansour Khaddr, Cardiovascular Disease (Casper Cardiology)
3. Initial Appointment to Locum Tenens Staff (1 year)
  - Dr. Fei Lian, Urology
4. Reappointment to Consulting Staff (2 years)
  - Dr. Clint Allred, Cardiovascular Disease (U of U)
  - Dr. Rashmee Shah, Cardiovascular Disease (U of U)
  - Dr. Raoul Joubran, Gastroenterology (Gastroenterology Assoc. Casper)
5. Reappointment to Locum Tenens Staff (1 year)
  - Dr. Jonathan Roddy, Emergency Medicine (U of U)

The motion to authorize the CEO to execute the physician contract requested in executive session was made by Mr. Mathey; second by Dr. Sowada. Motion carried.

## **ADJOURNMENT**

Mr. Jones thanked everyone for their work and said we are getting a lot of things done. There being no further business to discuss, the meeting adjourned at 5:21 PM.

*Mr. Taylor Jones, President*

Attest:

*Mr. Marty Kelsey, Secretary*