

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

May 29, 2024

2:00 p.m.

Classrooms 1, 2 & 3

AGENDA

- | | | |
|-------|--|--|
| I. | Call to Order | Barbara Sowada |
| | A. Roll Call | |
| | B. Pledge of Allegiance | |
| | C. Mission and Vision | Kandi Pendleton |
| | D. Mission Moment | Irene Richardson, <i>Chief Executive Officer</i> |
| II. | Agenda <i>(For Action)</i> | Barbara Sowada |
| III. | Minutes <i>(For Action)</i> | Barbara Sowada |
| IV. | Community Communication | Barbara Sowada |
| V. | Old Business | Barbara Sowada |
| | A. Medical Staff Bylaws <i>(Remains under review/development, no request for action)</i> | |
| VI. | New Business <i>(Review and Questions/Comments)</i> | Barbara Sowada |
| | A. Board of Trustees Policy – Investment Policy <i>(For Action)</i> | Marty Kelsey |
| | B. Performance Improvement & Patient Safety (PIPS) Plan <i>(For Review)</i> | Kari Quickenden, <i>Chief Clinical Officer</i> |
| VII. | Chief Executive Officer Report | Irene Richardson |
| VIII. | President of the Medical Staff Report | Dr. Brianne Crofts |
| IX. | Committee Reports | |
| | A. Building & Grounds Committee | Marty Kelsey |
| | B. Compliance Committee | Kandi Pendleton |
| | C. Governance Committee | Barbara Sowada |
| | D. Quality Committee | Kandi Pendleton |
| | E. Human Resources Committee | Kandi Pendleton |
| | F. Finance & Audit Committee | Marty Kelsey |
| | 1. Capital Expenditure Requests <i>(For Action)</i> | |
| | 2. I.S. Report | |
| | 3. Bad Debt <i>(For Action)</i> | |
| | 4. Finance & Audit Committee Meeting Information | |
| | G. Foundation Board | Craig Rood |
| | H. Executive Oversight and Compensation Committee | Barbara Sowada |
| | I. Joint Conference Committee | Barbara Sowada |
| X. | Contract Review | Irene Richardson |
| | A. Contracts Approved by the CEO since Last Board Meeting <i>(For Your Information, No Action Requested)</i> | |
| | 1. Fibertech | |
| | 2. Martin Ray Laundry Systems | |

**MEMORIAL HOSPITAL OF SWEETWATER COUNTY
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May 29, 2024
2:00 p.m.
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AGENDA

- | | |
|--|----------------|
| XI. Good of the Order | Barbara Sowada |
| XII. Executive Session (W.S. §16-4-405(a)(ix)) | Barbara Sowada |
| XIII. Action Following Executive Session | Barbara Sowada |
| XIV. Adjourn | Barbara Sowada |



Memorial Hospital

OF SWEETWATER COUNTY

OUR MISSION

Compassionate care for every life we touch.

OUR VISION

To be our community's trusted healthcare leader.

OUR VALUES

Be Kind

Be Respectful

Be Accountable

Work Collaboratively

Embrace Excellence

OUR STRATEGIES

Patient Experience

Quality & Safety

Community, Services & Growth

Employee Experience

Financial Stewardship

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

May 1, 2024

The Board of Trustees of Memorial Hospital of Sweetwater County met in regular session on May 1, 2024, at 2:00 p.m. with Dr. Barbara Sowada, President, presiding.

CALL TO ORDER

Dr. Sowada welcomed everyone, including Senator John Kolb, and called the meeting to order.

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

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

Pledge of Allegiance

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

Mission and Vision

Mr. Kelsey read aloud the mission and vision statements.

Mission Moment

Ms. Richardson shared the first Mission Moment for the Board, specifically thanking Dr. Sowada and Mr. Kelsey for being gracious enough to cover Governance and excusing her to deal with a family emergency. She thanked them for their compassion.

Dr. Sowada gave accolades to Dr. Tony Pedri from a patient in Sublette County. She said there is another person in Pinedale who is happy to come to MHSC.

AGENDA

Dr. Sowada requested a change to the Agenda: Move XI. Medical Staff Report to after VII. Chief Executive Officer Report. Motion to approve with change was made by Judge James; second by Ms. Pendleton. Motion carried.

APPROVAL OF MINUTES

The motion to approve the minutes of the April 3, 2024, regular meeting as presented was made by Ms. Pendleton; second by Judge James. Motion carried.

The motion to approve the minutes of the April 5, 2024, emergency meeting as presented was made by Judge James; second by Mr. Rood. Motion carried.

The motion to approve the minutes of the April 8, 2024, special meeting to approve actions of the emergency meeting was made by Judge James; second Ms. Pendleton. Mr. Kelsey abstained. Motion carried.

COMMUNITY COMMUNICATION

Dr. Sowada introduced a former Board Liaison and current legislator, Senator John Kolb. She stated he is here to give updates and answer any questions the Board may have. Dr. Sowada questioned a special ad hoc committee pulled together by Governor Gordon to look at health care in Wyoming. Senator Kolb stated likely, Senator Baldwin as Chairman, would be the best person to inquire for information. Senator Kolb went on to say how nice it was to see everybody, and that he wanted the Board to be comfortable in calling and talking to him about issues. He said MHSC sits squarely in his district and should have a direct line to a legislator. He said it is good for the community to be able to give insight on what is happening. Senator Kolb said we need to work together. He said information directly from the source is always more valuable. Ms. Richardson thanked Senator Kolb for being a great advocate for MHSC. She said he has done a great job listening to and helping us.

Ms. Richardson asked Senator Kolb if he had insight to the fall Pulse Agenda? Senator Kolb stated, in his opinion, the Title XXV “revamp” was a failure. He believes it was too big and needs to be attacked in connectable smaller parts. He said that in the state of Wyoming, we have facility problems – housing, how people are titled, how are we going to prioritize what we are going to do. He said if we built a 200-bed facility, we’d have 220 people. Also, hospital security for titled patients; “how do you protect staff if you can’t charge?” Senator Kolb said incidents need to be reported, even if they can’t be charged. He said legislators need to know and we need to work together. Dr. Sowada thanked Senator Kolb for visiting, and the invitation as well as reminding him he was always welcome here.

OLD BUSINESS

Medical Staff Bylaws

Dr. Sowada said they remain under review.

Employee Policy: Non-Discrimination & Anti-Harassment

Dr. Sowada stated this is in second reading and ready for action. The motion to approve as presented was made by Ms. Pendleton; second by Judge James. Motion carried.

Board of Trustees Bylaws

Dr. Sowada noted this is reviewed every three (3) years and is the second reading. Mr. Kelsey stated a lot of clean-up and statute work was done. He said the decision was to leave the invitation of community members to be appointed to Board committees; this will require a policy be drafted. The motion to approve the bylaws as presented was made by Ms. Pendleton; second by Mr. Rood. Motion carried.

Board of Trustees Calendar

Dr. Sowada stated this is a living document, there will be changes, but the purpose of the calendar is to give everybody a “heads up” and a way to plan their annual calendars. Judge James noted the non-physician providers event is not listed. Dr. Sowada will update and asked if anyone else has any events, please reach out. The motion to approve with amended calendar event was made by Ms. Pendleton; second by Judge James. Motion carried.

NEW BUSINESS

No new business for discussion.

CHIEF EXECUTIVE OFFICER REPORT

Ms. Richardson provided an update on the Patient Family Advisory Council (PFAC). The PFAC met April 29, and will combine the May and June meeting on June 3, with a plan to celebrate our 5-year anniversary on July 3. Person-Centered Care (PCC) training continues to go well. Ms. Richardson said we had a recent locums physician that was very impressed by our PCC culture. The Strategic Plan dashboard and reports are being worked on. Ms. Richardson said we want to ensure we are doing our due diligence regarding Critical Access Hospital (CAH) status. She said we met with the General Medical Staff to ensure all were on the same page. We have approved the hiring of additional staff on Med/Surg to allow up to 20 admissions to determine if we really need that coverage. Ms. Richardson said a Master Plan meeting is scheduled May 17 to receive the report. Surgical Services brought on a locum anesthesia and surgical services team to evaluate the need to run a third room. The Interim Emergency Department Nursing Director, Ms. Nicole Torres, will be onsite at least until the end of August. Ms. Richardson said we held a recruitment event last month and expressed kudos to Ms. Amber Fisk (HR Director), Dr. Ann Clevenger (Chief Nursing Officer), Ms. Deb Sutton (Marketing Director), Ms. Lena Warren (Community Outreach Director) and Ms. Robin Fife (Clinical Administrative Assistant with a huge shout out for a successful event. The Lab Accreditation CAP Survey was conducted April 11-12 and the staff did an excellent job. Ms. Richardson said budget meetings started April 15, with online meetings to review the budget before presenting it to the Finance & Audit Committee and the Board. Townhall meetings were held last month with positive feedback. CliftonLarsenAllen has been onsite reviewing the finance revenue cycle. Executive Foundation Director interviews are in progress and Ms. Richardson said we have narrowed candidates from 8 down to 4. Hospital Week is May 13 with BBQ, food trucks, prizes and gifts, pinning ceremony and banquet. Ms. Richardson said she attended the American Hospital Association Annual Meeting in Washington DC, and met with Wyoming Senators John Barrasso and Cynthia Lumus, as well as Congresswoman Harriet Hageman. Ms. Richardson said it is always good to advocate for ourselves at these meetings. She expressed appreciation to the staff, the Board, our providers, and the Commissioners for their work and support.

Dr. Sowada took a moment to congratulate Ms. Richardson for her designation as Grass Roots Representative for the State of Wyoming, noting the “head winds facing rural hospitals are strong.” Mr. Jones shared the requirements for nomination, stating, “We’ve come a long way since Irene took over – Excellent job!”

PRESIDENT OF THE MEDICAL STAFF REPORT

Dr. Crofts began her report by noting they continue to work on Medical Staff Bylaws. Two medical scholarships were awarded from the 15 applicants (7 from SW#1, 8 from SW#2) that applied. The Medical Staff will meet May 21 and discuss the Strategic and Critical Access plans. Dr. Crofts reminded everyone that May is the one (1) year anniversary of the DaVinci Robot. She said the provider meeting agendas now include a Mission Moment.

Ms. Pendleton questioned whether the use of the robot sped up procedures? Dr. Crofts stated it wasn’t necessarily faster, but the view of the procedure is so much better. She said the robot provides better quality, which includes options for recording and connection to a hub which records data, as well as in

the moment viewing and assistance from providers long distance. Dr. Croft said she will look into providing statistics as well as creating a video.

COMMITTEE REPORTS

Joint Conference Committee

Did not meet.

Buildings & Ground Committee

All information is in the packet. Mr. Kelsey added that in approximately one month we will be breaking ground for the Lab addition. He said there are a lot of important things we will be looking at in terms of master planning and financial priorities. Ms. Pendleton questioned if there was additional SLIB money available through the State? Ms. Richardson stated the Guaranteed Maximum Price (GMP) came in close to estimate but wasn't sure if there was any other funding available. Senator Kolb said ARPA (American Rescue Plan Act) Fund money was available and we should qualify for associated overrun costs. He said we would need to contact the Governor's office. Ms. Pendleton next questioned the Medical Office Building entrance and if we anticipated completion by October 2024. Ms. Richardson affirmed, yes.

Compliance Committee

The minutes are in packet. Ms. Pendleton noted this Committee is good at picking subjects to audit, ensuring we are following our own procedures. Currently we are looking at tracking vendor compliance.

Quality Committee

The minutes are in packet. Quality is always busy – we have conversations on sepsis, falls and ED through-put times, and we are continuing to make progress.

Human Resources Committee

The HR Committee just had a special meeting to look at the contract for a salary survey. We will be looking at that contract a little later as the Board, but we had two options and chose to go with the more comprehensive version, which just made more sense.

Finance & Audit Committee

The full report is in packet.

Capital Expense: Req. # 24-48 Vital Sign Monitors. Eleven (11) rooms have been identified in the Med/Surg Unit in need of new monitors. This is a patient safety need. The vendor is Oracle, in the amount of \$203,415.99. The motion to approve as presented was made by Judge James; second by Ms. Pendleton. Motion carried.

IS Report: Mr. Kelsey urged everyone to look over this report and said it is very informative.

Bad Debt: The motion to approve the potential bad debt of \$1,070,412.49 for April as presented was made by Ms. Pendleton; second by Judge James.

Foundation Board

No meeting last month. No current updates.

Executive Oversight & Compensation Committee

Meet on Friday, no updates.

CONTRACT REVIEW

Contract Approved By The CEO Since Last Board Meeting

Dr. Sowada asked Ms. Richardson to provide a brief overview of the Gallagher contract. Ms. Richardson said we received two bids for salary review, but Gallagher provided a more comprehensive review. She liked that they will be looking at job descriptions to provide us with better feedback for salary structure. She said we have been using the same salary structure since about 2011 and it is time for a change to ensure we are competitive. The review will take 6-8 weeks to complete, with a goal to update every 3 years. Ms. Pendleton stated this was voted on in the Human Resources Committee and all felt like was a solid choice. The Board affirmed the choice.

BOARD EDUCATION

The Governance Institute E-Learning “Board Orientation Course”

Unfortunately, most reported they were unable to access the information. All will try again in this next month. Dr. Sowada said this is a 4-hour course with tests, but it could be done in sessions and you will receive a certificate upon successful completion. If members continue to have trouble accessing, please reach out to Ms. Cindy Nelson, Executive Assistant.

GOOD OF ORDER

Dr. Sowada said the June Board Meeting has been moved to May 29. The June Board Meeting is a busy meeting which includes the CEO Evaluation. To not waste time with oral instructions Dr. Sowada will e-mail instructions to members. Dr. Sowada reminded everyone that the June Governance Meeting decides the committee officers. Please send the recommended slate of officers and your preferred committee appointments to Mr. Kelsey. As an FYI, Dr. Sowada said she will be submitting her application to the County Commissioners for continuation of Board appointment.

EXECUTIVE SESSION

The motion to go into executive session at 3:05 p.m. to discuss personnel, litigation and information classified as confidential by law was made by Ms. Pendleton; second by Judge James. Motion carried. Dr. Sowada said there would be a 10-minute break.

RECONVENE INTO REGULAR SESSION

The motion to leave the executive session and return to the regular session at 4:57 p.m. was made by Judge James; second by Mr. Rood. Motion carried.

ACTION FOLLOWING EXECUTIVE SESSION

Pursuant to the notice provided in the agenda, the Board of Trustees held discussions and action was taken.

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

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

1. Initial Appointment to Associate Staff (1 year)
 - Dr. Torah Tomasi, Pediatrics
 - Dr. Andrew Mazzone, Urology
2. Initial Appointment to Consulting Staff (1 year)
 - Dr. Gregory Parish, Tele-Radiology (VRC)
 - Dr. Amir Arain, Tele-Neuro (U of U)
 - Dr. Blake Newman, Tele-Neuro (U of U)
 - Dr. Nicholas Frost, Tele-Neuro (U of U)
 - Dr. Sindhu Richards, Tele-Neuro (U of U)
3. Reappointment to Active Staff (2 years)
 - Dr. Christine Raps, Emergency Medicine
 - Dr. Emily Sanchez, Emergency Medicine
 - Dr. William Sarette, Pediatrics
 - Dr. David Liu, Otolaryngology
 - Dr. Ken Holt, OB/GYN
4. Reappointment to Consulting Staff (2 years)
 - Dr. Katharine Clapham, Cardiovascular Disease (U of U)
 - Dr. Vivek Reddy, Tele-Stroke (U of U)
 - Dr. Krishnan Kartha, Tele-Radiology (VRC)
 - Dr. Thomas Boden, Tele-Radiology (VRC)
 - Dr. Jennifer Ngo, Tele-Radiology (VRC)

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

ADJOURNMENT

There being no further business to discuss, the meeting adjourned at 4:58 p.m.

Dr. Barbara Sowada, President

Attest:

Ms. Kandi Pendleton, Secretary

Submitted by Robin Fife

ORIENTATION MEMO

Board Meeting Date: May 29, 2024

Topic for Old & New Business Items: Investment Policy for approval of Board of Trustees (no changes)

Policy or Other Document:

☒ Revision
☐ New

Brief Senior Leadership Comments: The Finance & Audit Committee reviewed and approved moving to the full Board for approval. No changes were made, this policy was due for its tri-annual approval.

Board Committee Action: The Finance & Audit Committee recommends approval of the Investment Policy.

Policy or Other Document:

☐ For Review Only
☒ For Board Action

Legal Counsel Review:

☐ In House Comments: *N/A*
☐ Board Comments:

Senior Leadership Recommendation: Tami Love, CFO recommends approval of the Investment Policy.



Approved N/A
Review Due 3 years after approval

Document Board of
Area Trustees

BOT - Investment Policy



Board of Trustees

STATEMENT OF PURPOSE:

This Statement of Investment Policy is adopted pursuant to the requirements of Wyoming Statute 9-4-831(h). It is the policy of Memorial Hospital of Sweetwater County (Hospital) to invest public funds in a manner which will provide a reasonable rate of investment return while assuring the maximum security of principal, meeting the daily cash flow demands, conforming to all federal, state and local laws and regulations governing the investment of public funds.

TEXT:

I. Scope

- a. This investment policy applies to all activities of the Hospital with regard to investing surplus public assets held in various Hospital restricted and unrestricted funds.
- b. Investment income will be allocated to the various funds based on their respective participation and in accordance with generally accepted accounting principles.

II. General Objectives – the primary objectives, in priority order, of investment activity shall be safety, liquidity, and yield.

- a. **Safety** – Safety of principal is the foremost objective of the investment program. Investments shall be undertaken in a manner that seeks to ensure the preservation of capital in the overall portfolio. The objective will be to mitigate credit risk and interest rate risk.

- i. **Credit Risk** – MHSC will minimize credit risk, which is the risk of loss due

to the failure of the security issuer or backer by:

1. Pre-qualifying the financial institutions, broker/dealers, intermediaries, and advisers with which the Hospital will do business in accordance with Section IV.
2. Diversifying the investment portfolio so that the impact of potential losses from any one type of security or from any one individual issuer will be minimized.

ii. **Interest Rate Risk** – The Hospital will minimize interest rate risk, which is the risk that the market value of securities in the portfolio will fall due to changes in market interest rates by:

1. Structuring the investment portfolio so that securities mature to meet cash requirements for ongoing operations, thereby minimizing the need to sell securities on the open market prior to maturity.
2. Investing operating funds primarily in shorter-term securities, money market mutual funds or similar investment pools and limiting the average maturity of the portfolio in accordance with this policy and Section VII.

b. **Liquidity** – The investment portfolio shall be structured to remain sufficiently liquid to meet all operating requirements that may be reasonably anticipated. This will be accomplished by structuring the portfolio so that securities mature concurrent with cash needs to meet anticipated demands. Furthermore, since all possible cash demands cannot be anticipated, the portfolio shall consist of securities with active secondary or resale markets. Alternatively, a portion of the portfolio may be placed in money market mutual funds or local government investment pools which offer same day liquidity for short-term funds.

c. **Yield** - The investment portfolio shall be designed with the objective of attaining a market rate of return throughout budgetary and economic cycles, taking into account the investment risk constraints and liquidity needs. Return on investment is of secondary importance compared to the safety and liquidity objectives described above. The core of investments are limited to relatively low risk securities in anticipation of earning a fair return relative to the risk being assumed. Securities shall generally be held until maturity with the following exceptions:

- i. A security with declining credit may be sold early to minimize loss of principal.
- ii. A security swap would improve the quality, yield, or target duration of the portfolio.
- iii. The security has increased in value and may be sold at an increase in value.
- iv. Liquidity needs of the portfolio require that the security be sold.

d. **Local Considerations** - Where possible, funds may be invested for the betterment of the local economy or that of local entities within the State. The Hospital may invest a

portion of the investment portfolio with eligible financial institutions at a lower rate of interest when the investment officer deems that the investment may benefit the local economy.

III. Standards of Care

- a. **Prudence** - The standard of prudence to be used by investment officials shall be the "prudent person" standard and shall be applied in the context of managing an overall portfolio. Investment officers acting in accordance with written procedures and this investment policy and exercising due diligence shall be relieved of personal responsibility for an individual security's credit risk or market price changes, provided deviations from expectations are reported in a timely fashion and the liquidity and the sale of the securities are carried out in accordance with the terms of this policy. The "prudent person" standard states that, "Investments shall be made with judgment and care, under circumstances then prevailing, which persons of prudence, discretion and intelligence exercise in the management of their own affairs, not for speculation, but for investment, considering the probable safety of their capital as well as the probable income to be derived."
- b. **Ethics and Conflict of Interest** - Officers and employees involved in the investment process shall refrain from personal business activity that could conflict with the proper execution and management of the investment program, or that could impair their ability to make impartial decisions. Employees and investment officials shall disclose any material interests in financial institutions with which they conduct business. They shall further disclose any personal financial/investment positions that could be related to the performance of the investment portfolio.
- c. **Delegation of Authority** - Authority to manage the investment program is delegated to the Chief Financial Officer (CFO), who shall act in accordance with established written procedures and internal controls for the operation of the investment program consistent with this investment policy. Such procedures shall include explicit delegation of authority to persons responsible for investment transactions.
 - i. In order to facilitate direct communication to the Board, the Finance and Audit Committee will be responsible for activities regarding the investment program including:
 - a. The periodic review of Hospital's investment activities.
 - b. The periodic review of the Hospital's investment policy.
 - ii. The Board will be responsible for approving any new investment activity as follows:
 - a. New investment types and instruments not previously approved by the Board.
 - b. New brokerage or dealer firms not previously approved by the Board.

IV. Authorized Financial Institutions, Depositories and Broker/Dealers

- a. A list will be maintained of financial institutions and depositories authorized to provide investment services. In addition, a list will be maintained of approved

security brokers and dealers.

- b. No public deposit shall be made except in a qualified public depository as established by Wyoming Statutes 9-4-817 through 9-4-828.
- c. All financial institutions and broker/dealer firms who desire to become qualified for investment transactions must provide a copy of a current Application of for Deposit of Public Funds. These documents will be reviewed annually by the Finance and Audit Committee.

V. Suitable and Authorized Investments

- a. **Investment Types** - In order to provide the broadest selection of investment opportunities, yet maintain satisfactory control of market and interest rate risk, the investment officer may invest in all instruments approved in W.S. 9-4-831.
- b. **Collateralization** - Collateralization will be required on investments with financial institutions when public monies on deposit exceed the amount insured by the Federal Deposit Insurance Corporation (FDIC). Collateral will be limited to the list of securities as described in Wyoming Statute 9-4-821.

VI. Safekeeping and Custody

- a. **Delivery vs. Payment** - All purchases of marketable securities will be executed by delivery to ensure that securities are deposited in an eligible financial institution prior to the release of funds.
- b. **Safekeeping** - Securities will generally be held by an independent third-party custodian selected by the CFO as evidenced by safekeeping receipts in the name of the Hospital. There may arise some instances where the securities may be held by the broker/dealer. The safekeeping institution shall provide information on their internal controls when requested by the CFO.
- c. **Internal Controls** - The CFO is responsible for establishing and maintaining an internal control structure designed to ensure that assets of the Hospital are protected from loss, theft or misuse. Accordingly, the CFO will ensure that an annual independent review of compliance is performed as part of the Hospital annual financial audit.

VII. Investment Parameters

- a. **Diversification** - The Hospital will attempt to diversify its investments by security type and institution. To provide assurance that the hospital will be able to continue financial operations without interruption and dependent upon interest rates, satisfaction with services and practicality, the hospital will generally attempt to utilize at least two financial institutions as depositories.
- b. **Maximum Maturities** - To the extent possible, the CFO shall attempt to match its investments with anticipated cash flow requirements. Unless matched to a specific cash flow, the CFO will not directly invest in securities maturing more than (5) years from the date of purchase or in accordance with state statutes.
- c. **Competitive Bids** - To ensure that securities are purchased at competitive prices, the CFO must maintain open communication with multiple broker/dealers and approved local banking contacts at all times. The Hospital may invest a portion of the

investment portfolio with eligible financial institutions at a lower rate of interest when the Board deems that the investment may benefit the local economy.

VIII. Policy Considerations

- a. **Exemption** - Any investment currently held that does not meet the guidelines of this policy shall be temporarily exempted from the requirements of this policy. At maturity or liquidation, such monies shall be reinvested only as provided by this policy.
- b. **Amendments** - This policy shall be reviewed on an annual basis by the Finance and Audit Committee. Any changes must be approved by the Board.

IX. Approval of Investment Policy

- a. The investment policy shall be approved by the Board. The policy shall be reviewed periodically by the Finance and Audit Committee and any modifications made thereto must be approved by the Board.

References

Wyoming State Statute 9-4-817 through 9-4-828, 9-4-831

Adopted: 12/18

Approval: Board of Trustees 8/4/21 (Pres. Jones, Sec. Kelsey)

Approval Signatures

Step Description	Approver	Date
In-house Legal	Suzan Campbell: General Legal Counsel	Pending

ORIENTATION MEMO

Board Meeting Date: May 29th, 2024

Topic for Old & New Business Items:

Performance Improvement and Patient Safety (PIPS) Plan

Policy or Other Document:

☒ Revision
☐ New

Brief Senior Leadership Comments:

Minimal revisions made to the content of the document. Added STEEP acronym under "Quality" definition. Minor grammatical and formatting changes. Added general verbiage around health equity. Added a few additional responsibilities under Quality Department. Minor changes made to PIPS Committee Reporting Calendar. Note: FY25 PIPS priorities have been selected and will come to board for approval in upcoming months.

Board Committee Action:

Approved by Quality Committee of the Board 05/15/2024

Policy or Other Document:

☒ For Review Only
At August Meeting For Board Action

Legal Counsel Review:

☒ In House Comments:
Board Comments:

Senior Leadership Recommendation:

For first read at this time.



Approved N/A
Review Due N/A

Document General -
Area Housewide
Reg. CMS A-0263,
Standards CMS A-0273,
CMS A-0283
+ 24 more

Performance Improvement and Patient Safety (PIPS) Plan

Mission

Compassionate care for every life we touch

Vision

To be our community's trusted healthcare leader

Values

Be Kind, Be Accountable, Be Respectful, Embrace Excellence, Work Collaboratively

Introduction

Memorial Hospital of Sweetwater County (MHSC) is committed to providing compassionate, equitable, high-quality care with a strong culture of safety for the best patient outcomes. Our objective is to support a culture of safety for our patients and staff. This culture allows us to consistently identify opportunities to improve performance and increase safety while maintaining a commitment to responsible stewardship of resources as aligned with MHSC's mission, vision, values, and strategic objectives.

Definitions

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

Patient safety - The prevention of errors and adverse effects to patients that are associated with health care. [Patient Safety Plan](#)

Quality - A person-centered commitment to excellence, consistently using best practice to achieve the best outcomes for our patients and community. The Institute of Medicine (IOM) outlines six aims for healthcare quality which comprise the STEEP acronym:

- I. Safe: avoiding harm to patients from the care that is intended to help them
- II. Timely: reducing wait times and sometimes harmful delays for both those who receive and those who give care
- III. Efficient: avoiding waste, including waste of equipment, supplies, ideas, and energy
- IV. Effective: providing services based on scientific knowledge to all who could benefit and refraining from providing services to those not likely to benefit
- V. Equitable: providing care that does not vary in quality because of personal characteristics such as gender, ethnicity, geographic location, and socioeconomic status
- VI. Patient-centered: providing care that is respectful of and responsive to individual patient preferences, needs, and values and ensuring that patient values guide all clinical decisions

MHSC uses the following terminology interchangeably: quality improvement and performance improvement.

Purpose

The Performance Improvement and Patient Safety (PIPS) Plan provides guidelines for collecting, analyzing, and using data to identify, address, and monitor performance to continually improve the quality of care provided by the Hospital. The PIPS Plan encompasses a multidisciplinary and integrated approach and is designed to include Leadership, Medical Staff, employees, and the Board of Trustees to collaboratively identify, plan, implement and sustain improvement. The previously identified parties assess processes, initiate peer review activities, and take appropriate actions that will improve the processes and/or systems, in an effort to improve outcomes within the organization. The PIPS Plan is approved annually by the Board of Trustees. Functions of the PIPS Plan include expressing the foundational concepts that form the basis for MHSC's performance improvement and patient safety efforts. In addition, the PIPS Plan outlines the structure and processes that MHSC has developed as a framework for participation in performance improvement across the organization.

Scope

The PIPS Plan is organization wide and applies to all departments, care, treatment, and services settings (including those services furnished under contract or arrangement). This includes Hospital inpatient and outpatient services, as well as Sweetwater Memorial Clinics. (Appendix 1 – PIPS Committee Reporting Calendar)

Objectives

The objective of the PIPS Plan is to allow for a systematic, coordinated, and continuous approach for improving performance. (Appendix 4 – PIPS Documentation Tool)

- I. To guide development and implementation of data collection processes that support

performance improvement. Data ~~are~~ is a fundamental ~~components~~ component of all performance improvement processes. Data can be obtained from internal sources (for example, documentation, records, staff, patients, observations, and risk assessments) or external sources (for example, regulatory organizations, insurers, and the community). The purpose of data collection is to ensure that data necessary to identify, address, and monitor areas for improvement are available.

- II. To guide development and implementation of data analysis processes that support performance improvement. Collected and validated data must be analyzed to be useful. The purpose of data analysis is to determine the status of the Hospital's quality of care and to inform any plans for improvement.
- III. To guide development and implementation of performance improvement processes that increase safety and quality. All performance improvement activities must be based on relevant data collected and analyzed according to Hospital policies and procedures. Performance improvement is a continual process. Performance improvement aims to ensure that the safest, highest-quality care is provided to all patients at all times.

Organization and Accountability

The PIPS Plan shall involve the coordinated efforts of the Board of Trustees, Senior Leadership Team, Medical Staff, Department Directors, Supervisors, Clinical Coordinators, and staff of the various MHSC departments and committees. Every employee is responsible for participating in performance improvement activities, as appropriate to their job duties. Engagement in quality improvement activities is an expectation at MHSC. Activities are prioritized by the PIPS Committee and Medical Staff, with input from the Quality Committee of the Board.

Board of Trustees

- I. The responsibilities of the Board of Trustees, as they relate to the PIPS Plan, include:
 - A. Oversee that quality and safety are at the core of the organization's mission
 - B. Oversee that quality and safety values are embedded in guiding the organization's strategic plan
 - C. Oversee that adequate resources (staff, time, information systems, and training) are allocated to data collection and performance improvement
 - D. Oversee the Hospital's ongoing monitoring, maintenance, and improvement efforts for safe, high - quality, and efficient medical clinical care
 - E. Monitor appropriate data collection processes, including methods, frequency, and details
 1. By approving the PIPS Plan and accepting dashboard reports and other reports addressing specific metrics, the Board approves data definitions and frequency and detail of data collection. The Board authorizes applicable quality oversight committees to adjust data definitions and data frequency as deemed necessary so long as revisions ensure performance improvement processes are in no way hindered and applicable definitions and frequency are consistent with national, state, or local reporting requirements. Based on its oversight responsibilities and at its discretion,

the Board, may at any time require changes in either frequency or detail of data collection.

- a. Frequency of data collection and reporting is determined on a case-by-case basis with consideration to improvement priorities, sample size necessary for adequate review, and resource consideration

F. ~~Assess the effectiveness of the PIPS Plan~~

G. Approves PIPS priorities annually

H. Assess the effectiveness of the PIPS priorities

- I. Review and approve the PIPS Plan annually
- J. Participate in education regarding the methods of quality management and performance improvement
- K. Receive reports of indicators and performance of processes as outlined in this plan
- L. Receive regular reports regarding all departments with direct and indirect patient care services and ensure these are monitored, problems are identified and prioritized, and appropriate action is implemented

Senior Leadership Team

- I. The Senior Leadership Team is comprised of the Chief Executive Officer (CEO), Chief Medical Officer (CMO), Chief Nursing Officer (CNO), Chief Clinical Officer (CCO), and Chief Financial Officer (CFO).
- II. Oversight of a PIPS Plan capable of continuous improvement is a task accomplished in an environment fostered by Senior Leadership support. The Senior Leadership Team's commitment includes taking accountability for the PIPS Plan's effectiveness and ensuring the PIPS Plan requirements are integrated into organizational processes. In addition, the commitment includes recognizing the importance of meeting patient needs and the various requirements of statutes and regulations that surround and permeate the organization.
- III. The responsibilities of the Senior Leadership Team as they relate to the PIPS Plan include:
 - A. Support the implementation, execution, and oversight of this quality framework
 - B. Set the scope, priorities, guidelines, and parameters for the PIPS Plan
 - C. Align the PIPS Plan with strategic priorities
 - D. Set expectations for using data and information
 - E. Set priorities for and identify the frequency of data collection and performance improvement that include but are not limited to the following:
 1. High-volume processes
 2. High-risk processes
 3. Problem-prone processes
 - F. Set priorities for performance improvement based on the following considerations:
 1. Incidence

2. Prevalence
 3. Severity
- G. Prioritize and ensure that adequate resources (staff, time, information systems, and training) are allocated to data collection and performance improvement
 - H. Update this plan to reflect any changes, including but not limited to, changes in the following:
 1. Strategic priorities
 2. Internal or external environment (such as patient population, community health metrics, and so on)
 - I. Ensure the PIPS Plan is cohesive and feasible
 - J. Periodically approve flexibility and variation in department and committee - scheduled reports as well as PIPS priorities, in extenuating circumstances as necessary
 - K. Ensure accreditation standards adherence
 - L. Motivate and support staff to achieve PIPS objectives
 - M. Evaluate the effectiveness of the Hospital's use of data and information
 - N. Monitor the effectiveness of the PIPS Plan and the achievement of results
 - O. Ensure appropriate follow-up of identified corrective actions not resulting in expected or sustained improvement
 - P. Communicate the PIPS Plan to staff and the community

Quality Department

- I. The responsibilities of the Quality Department as they relate to the PIPS Plan include:
 - A. Serve as a resource for performance improvement, patient safety, patient experience, and regulatory information
 - B. Educate MHSC staff about the performance improvement process, patient safety, and patient experience
 - C. Support staff, including Medical Staff, Leadership, and project leaders, in the development and implementation of performance improvement activities, including team building and data analysis
 - D. Assist with and assure data gatheringcollection efforts are valid, reliable, and comprehensive
 - E. Attend designated Medical Staff committee meetings and facilitate performance improvement processes
 - F. Provide accurate and reliable data for Ongoing Professional Practice Evaluation (OPPE) profiles for assessment of Medical Staff members
 - G. Promote consistency in performance improvement activities
 - H. Facilitate selection of annual PIPS priorities via prioritization matrix and multi-

disciplinary discussion

- I. Facilitate and prepare the annual Patient Safety and Performance Improvement report which represents a portfolio of safety and performance improvement efforts across the organization
- J. Lead various multi-disciplinary committees dedicated to performance improvement, patient safety, health equity, and accreditation, including but not limited to PIPS Committee, Patient Safety Committee, Health Equity Committee, and Continual Survey Readiness (CSR)

Medical Staff

- I. The Medical Staff provides expertise in meeting appropriate clinical goals, objectives, and initiatives for patient care. The responsibilities of the Medical Staff as they relate to the PIPS Plan include:
 - A. Provide clinical input for targets related to clinical outcomes
 - B. Carry out tasks to meet the objectives of the PIPS Plan
 - C. Reviews reports to ensure measures are reaching agreed-upon targets in Medical Staff meetings
 - D. Act upon identified areas for improvement
 - E. Provide effective mechanisms to measure, assess, and improve the quality and appropriateness of patient care, and the clinical performance of all individuals with delineated clinical privileges, accomplished through Ongoing Professional Practice Evaluations (OPPE), Focused Professional Practice Evaluations (FPPE), and Peer Review Process (~~refer to Professional Practice Review Process – Medical Staff Peer Review~~refer to Professional Practice Review Process – Medical Staff Peer Review)

Leadership Team

- I. The Leadership Team is comprised of department directors, supervisors, and clinical coordinators. The responsibilities of the Leadership Team, as they relate to the PIPS Plan, include:
 - A. Utilize performance improvement processes to support MHSC's mission, vision, and values
 - B. Participate in the collection and analysis of relevant departmental data
 - C. Foster a climate of continuous improvement through measurement, data analysis, identification, and implementation of changes needed to improve and ensure sustainment
 - D. Monitor processes known to jeopardize the safety or clinical outcomes of patients
 - E. Implement and maintain processes to ensure compliance with applicable requirement(s) or standard(s)
 - F. Ensure services provided are consistent with MHSC's values and goal of consistently providing person-centered care
 - G. Document improvement initiatives and progress

- H. Accountable for developing a process improvement project, knowing their scheduled presentation dates, and contacting the Quality Department for assistance prior to presenting, as necessary
- I. Present department performance improvement project updates to PIPS Committee as requested and/or scheduled (Appendix 5 - PIPS Reporting Presentation Template)

Project Teams, Staff, and Volunteers

- I. The responsibilities of the Project Teams, Department Employees, and Volunteers as they relate to the PIPS Plan include
 - A. Participate in data collection and analysis activities as well as performance improvement activities
 - B. Identify and utilize approaches for improving processes and outcomes to continuously improve the quality and safety of patient care
 - C. Performance improvement project teams may be formed according to employee identification of improvements and prioritization
 - D. Document improvement initiatives and progress (Appendix 4 - PIPS Documentation Tool)
 - E. Report improvement initiatives to PIPS Committee as requested or scheduled (Appendix 5 - PIPS Reporting Presentation Template)

PIPS Committee Functions

- I. The PIPS Committee oversees the establishment, implementation, and monitoring of the PIPS Plan. The core PIPS Committee shall be comprised of Senior Leadership, Director of Medical Office Building Clinics, Director of Acute Care Services, Director of Emergency Services, Infection Prevention, Director of Surgical Services, Director of Medical Imaging, Director of Women's Health, Director of Pharmacy, Director of Cardiopulmonary, Director of Environmental Services, Director of Lab, Director of Nutrition Services, Director of Rehab Services, Director of Care Management, Director of Education, Director of Dialysis, Director of Medical Oncology, Director of Radiation Oncology, Quality Department, Medical Staff Representative, Security, Emergency Management Coordinator, Family Medicine/Occupational Medicine Clinic Representative and Patient Safety Representative. Other representatives may attend based on identified priorities.
 - A. Provide an organization-wide program to systematically measure, assess, and improve performance to achieve optimal patient outcomes in a collaborative, multidisciplinary, cross-departmental approach
 - B. Support activities to promote patient safety and encourage a reduction in preventable harm, in collaboration with the Patient Safety Committee
 - C. Provide a mechanism to foster collaborative efforts for performance improvement, feedback, and learning throughout the organization while assigning responsibilities and authority for these processes
 - D. Implement all Centers for Medicare and Medicaid Services (CMS) and other regulatory bodies' quality management and performance improvement standards and maintain accreditation and required certifications

- E. Oversee compliance with accreditation standards and support resolution of noncompliance through action plans in coordination with the Continual Survey Readiness Committee
- F. Coordinate schedule for department and committee reports
- G. Prioritize improvement projects to address processes based on the following:
 - 1. Focus on high-risk, high-volume, or problem-prone areas
 - 2. Consider the incidence, prevalence, and severity of the problems in those areas
 - 3. Affect on health outcomes, patient safety, and quality of care
 - 4. Additional factors such as resource allocation and accreditation/regulatory requirements
 - 5. Utilize a prioritization scoring tool to assist in determining the distinct number of improvement projects annually (Appendix 3 - Proposed Performance Improvement Project Decision Checklist)
- H. Ensure performance improvement projects incorporate the needs and expectations of patients and families
- I. Monitor the status of identified and prioritized performance improvement projects and action plans by ensuring additional data collection and analysis is performed to assure improvement or problem resolution on a sustained basis
- J. Identify corrective actions not resulting in expected or sustained improvement
- K. Ensure proper continuation of the cycle of creating, implementing, monitoring, and evaluating improvement efforts
- L. Identify annual data elements collected on an ongoing basis to prioritize focus areas for performance improvement
- M. Review and approve the PIPS Plan each year prior to submitting to the Quality Committee of the Board
- N. Oversee annual evaluation of performance improvement project priorities and goals
- O. Oversee annual evaluation of PIPS Plan objectives, scope, and effectiveness, and evaluate progress towards strategic plan goals related to quality, safety, and patient experience
- P. Communicate information concerning quality, patient safety, and patient experience to departments when opportunities to improve exist
- Q. Report, in writing, to leadership on issues and interventions related to adequacy of staffing, including nurse staffing. This occurs at least once a year.
- R. Report appropriate information regarding quality, patient safety, patient experience, and accreditation to Senior Leadership, Medical Executive Committee (MEC), Quality Committee of the Board, and the Board of Trustees to provide leaders with the information they need in fulfilling their responsibilities concerning the quality and safety of patient care
 - 1. Specifically, the committee provides data on Multidrug-resistant

organisms (MDROs), Central line-associated blood stream infection (CLABSI), Catheter associated urinary tract infection (CAUTI), ~~Clostridioides difficile~~ *Clostridioides difficile* (CDI), Surgical site infection (SSI) to key stakeholders, including but not limited to the following:

- a. Leaders
 - b. Licensed independent practitioners
 - c. Nursing staff
 - d. Other clinicians
- S. Provide reports to the Quality Committee of the Board regarding results of performance improvement activities

Risk/Compliance

- I. Risk Management is undertaken by the Quality Department, in collaboration with multiple other departments, to identify, evaluate and reduce risk or loss to patients, employees, visitors, and the Hospital. The PIPS Committee may assist with quality improvement opportunities identified for risk reduction and performance improvement.

Safety

- I. MHSC is committed to encouraging, promoting, and supporting a culture of safety throughout the organization. The purpose of the organizational Patient Safety Program is to improve patient safety and reduce risk to patients through an environment that encourages:
- A. Recognition and acknowledgment of risks to patients with regard to medical/health care errors
 - B. Initiation of actions to reduce these risks
 - C. Internal reporting of what has been found and the actions taken
 - D. Focus on processes and systems
 - E. Minimization of individual blame or retribution for involvement in a medical/health care error
 - F. Organizational learning about medical/health care error
 - G. Support for the sharing of knowledge to effect behavioral changes in itself and other healthcare organizations
 - H. Appropriate communication and transparency to our patients and families
- II. Please refer to the Patient Safety Plan for further information. [Patient Safety Plan](#)

Methodology

Memorial Hospital of Sweetwater County utilizes processes outlined by the Institute for Healthcare Improvement (IHI) Model for Improvement, developed by Associates in Process Improvement. This model for improvement includes forming a team, setting aims, and establishing measures, along with selecting, testing, implementing, and spreading changes. The Plan, Do, Study, Act (PDSA) Model is used to guide tests of change within and throughout the organization. Specific, Measurable, Achievable,

Realistic, and Time-bound (S.M.A.R.T) goals are encouraged to be utilized when appropriate in setting aims and smart objectives. (See Appendix 4-PIPS Documentation Tool and Appendix 7 – IHI's Model for Improvement) Performance improvement teams may use other evidence-based methodologies and tools as appropriate based on the complexity, scope, and scale of the improvement project.

- I. Performance improvement project teams will use data to determine how action plans are developed and will define the frequency of data collection

Data

MHSC continually seeks to identify changes that will lead to improved quality and patient safety. Annually, each department/discipline shall develop indicators for performance improvement based on their identified improvement project. Whenever possible, data collection is a shared activity involving staff. The collected data may be organized and analyzed with the assistance of the Quality Department, if necessary.

- I. By approving the PIPS Plan and accepting dashboard reports and other reports addressing specific metrics, the Board approves data definitions, along with frequency and detail of data collection. The Board authorizes applicable quality oversight committees to adjust data definitions and frequency of data collection as deemed necessary, so long as revisions ensure performance improvement processes are in no way hindered and applicable definitions and frequency are consistent with national, state, or local reporting requirements. Based on its oversight responsibilities and at its discretion, the Board may, at any time require changes in either frequency or detail of data collection.
 - A. Frequency of data collection and reporting is determined on a case-by case basis with consideration to improvement priorities, sample size necessary for adequate review, and resources consideration

II. Data Collection

- A. The PIPS Committee has identified acceptable data sources for performance monitoring and improvement activity. Data sources and mechanisms of identifying opportunities for improvement include, but are not limited to:
 1. Risk Assessments
 2. Reports and/or alerts from governmental agencies (for example, Centers for Disease Control and Prevention, Occupational Safety and Health Administration, Food and Drug Administration)
 3. Accreditation reports
 4. Regulatory rounds and tracers
 5. Culture of Safety survey
 6. Occurrence reports and Good Catches identifying patient safety concerns and trends
 7. Staff reporting safety or process concerns to their leaders
 8. RCA (Root Cause Analysis)

9. FMEA (Failure Mode Effects Analysis)
10. Patient complaints/grievances
11. Patient perception of safety and quality
12. Peer review
13. Ongoing medical record review
14. Audit of clinical contracts
15. Internal audits identifying improvement opportunities
16. Sentinel event reports and Joint Commission Sentinel Event alerts
17. Hospital Quality Improvement Contractor (HQIC)

B. The PIPS Committee collaborates with department managers to perform the following activities:

1. Collect data required by CMS Conditions of Participation and The Joint Commission including measures from:
 - a. Inpatient Quality Reporting
 - b. Outpatient Quality Reporting
 - c. Value Based Purchasing
 - d. Hospital Readmission Reduction Program
 - e. Hospital Acquired Condition Reduction Program
 - f. Quality Payment Program – Merit Based Incentive Payment
 - g. Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS)
 - h. The Joint Commission ORYX Measures
2. Collect data on the following:
 - a. Improvement priorities, as identified by leadership
 - b. Selected outcome indicators (mortality, readmissions, etc.)
 - c. Health equity key performance indicators
 - d. Procedures, including operative procedures, that place patient at risk of disability or death
 - e. Clinically significant unexpected postoperative diagnoses, as determined by the medical staff
 - f. Blood and blood components use
 - g. Use of restraints
 - h. Use of seclusion
 - i. Patient safety issues (ex: falls, self harm)
 - j. Resuscitative services, including the following elements:

- i. Number and location of cardiac arrests
 - ii. Outcomes of resuscitation, such as return of spontaneous circulation (ROSC) and/or survival to discharge
 - iii. Transfer to higher level of care
- k. Pain assessment and pain management
 - l. Rapid response to change or deterioration in a patient condition
- m. Care or services to high-risk populations (patient falls)
- n. National Patient Safety Goals
- o. CMS preventable conditions (Hospital-Acquired Conditions)
- p. Healthcare-associated infections (SSI, CLABSI, CAUTI, MRSA, MDRO, C.diff)
- q. AHRQ Patient Safety Indicators (PSI)
- r. Reported and confirmed transfusion reactions
- s. Changing internal or external (e.g. Joint Commission Sentinel Event Alerts) conditions
- t. MRI incidents/injuries
- u. Significant adverse drug reactions
- v. Significant medication errors
- w. Adverse events or patterns of adverse events during moderate or deep sedation and anesthesia
- x. Complications of care

3. Collect data on topics in the following areas:

- a. Environment of care
- b. Infection prevention and control
- c. Medication management system
- d. Resuscitation performance, including but not limited to the following elements:
 - i. Frequency of early warning signs being present prior to cardiac arrest
 - ii. Timeliness of staff response to cardiac arrest
 - iii. Quality of cardiopulmonary resuscitation (CPR)
 - iv. Post-cardiac arrest care processes
 - v. Outcomes following cardiac arrest
- e. Organ procurement program (conversion rates)
- f. Adequacy of staffing, including nurse staffing, in relation to

- undesirable patterns, trends, or variations in performance
- g. Incidents related to overexposure to radiation during diagnostic computed tomography examinations
- 4. Include the following information when recording data:
 - a. Data source
 - b. Collection frequency
 - c. Reporting frequency
 - d. Report audience
 - e. Responsible department(s)
 - f. Indicators for intervention

III. Data Reliability and Validity

- A. Collected data need to be accurate, complete, and reliable. The PIPS Committee has established the following expectations for any data used to monitor or improve Hospital performance:
 - 1. Data samples will undergo auditing
 - 2. Data sources will be regularly checked using established procedures
 - 3. Re-abstraction will occur on a data sample

IV. Data Analysis

- A. The PIPS Committee does the following:
 - 1. Engages the assistance of relevant departmental management and/or staff to collect and analyze data
 - 2. Develops goals and benchmarks in conjunction with stakeholders with attention to past performance, national performance data, external benchmarks, or comparative databases
 - 3. Compares internal data over time to identify levels of performance, pattern or trends in performance, and variations in performance
 - 4. Utilizes statistical tools and techniques to measure, analyze, and display data (e.g., run charts, flow charts and control charts). Preferred PIPS data displays include dashboards, run charts, and control charts, as applicable
 - 5. Analyzes data using methods that are appropriate to the type of data and the desired metrics, which include but are not limited to:
 - a. Benchmark: a comparison and measurement of a health care organization's metrics against other national health care organizations. MHSC utilizes the National Average when available.
 - b. Target Goal (SMART Goal): targeted goals define interim steps towards the stretch goal. Target goals may change frequently as progress is made toward stretch goal. Target goals help form a

- concrete plan of action in order to make the stretch goal a reality.
- c. Stretch Goal: inspires us to think big and reminds us to focus on the larger picture. This goal should exceed the benchmark. MHSC utilizes the National Top 10% when available.
- 6. Analyzes aggregate data to identify opportunities for improvement and actions to improve the quality of processes

Communication

- I. ~~To communicate changes made based on data analysis and to sustain improvements, performance~~ Performance improvement is communicated through the following ~~resources~~ (Appendix 6 - Communication Plan):
 - A. Quality Committee of the Board
 - B. PIPS Committee
 - C. Leadership meetings
 - D. Medical Staff meetings
 - E. Staff meetings
 - F. Department white boards, electronic communication, and communication books may be utilized to display results of monitoring and internal performance improvement activities

Confidentiality

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

References

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Approval:

Reviewed and Approved:

Performance Improvement and Patient Safety Committee – ~~May 9th, 2023~~ 05/14/2024

Medical Executive Committee – ~~May 23rd, 2023~~

Quality Committee of the Board – ~~June 21st, 2023~~ 05/15/2024

Board of Trustees – ~~August 2nd, 2023~~

Attachments

[Appendix 1 - Reporting Calendar](#)

[Appendix 2 - Committee Reporting Structure](#)

[Appendix 3 - Proposed Performance Improvement Project Decision Checklist](#)

- [Appendix 4 - PIPS Documentation Tool](#)
- [Appendix 5 - PIPS Reporting Presentation Template](#)
- [Appendix 6 - Communication Plan](#)
- [Appendix 7 - IHI Model for Improvement.pdf](#)
- [Appendix 8 - FY 2024 PIPS Priorities](#)

Approval Signatures

Step Description	Approver	Date
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Reg. Standards

CMS A-0263, CMS A-0273, CMS A-0283, CMS A-0286, CMS A-0297, CMS A-0308, CMS A-0309, CMS A-0411, CMS A-0508, TJC LD.01.03.01, TJC LD.01.05.01, TJC LD.02.01.01, TJC LD.02.02.01, TJC LD.02.04.01, TJC LD.03.01.01, TJC LD.03.02.01, TJC LD.03.03.01, TJC LD.03.04.01, TJC LD.03.05.01, TJC LD.03.06.01, TJC LD.03.07.01, TJC LD.03.09.01, TJC LD.03.10.01, TJC PI.01.01.01, TJC PI.02.01.01, TJC PI.03.01.01, TJC PI.04.01.01



FY 2025 MHSC PIPS Committee Reporting Schedule

Monthly Meeting: Second (2nd) Tuesday of every Month, 1:00 p.m. - 3:00 p.m., via Microsoft Teams

	Quarter 3			Quarter 4			Quarter 1			Quarter 2		
	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
STANDING COMMITTEE REPORTS												
Antimicrobial Stewardship (biannual)	X						X					
Code Blue Committee (biannual)						X						X
Continual Survey Readiness (quarterly)		Q2			Q3			Q4			Q1	
E.H.R. OPS/Informatics (biannual)		X						X				
Emergency Management (biannual)				X						X		
EOC (biannual)		X						X				
Health Equity (biannual)		X						X				
Pain Task Force (biannual)	X						X					
Patient Flow (biannual)				X						X		
Patient Relations/Grievances Committee (biannual)			X						X			
Patient Safety (quarterly)			Q2			Q3			Q4			Q1
Person Centered Care (quarterly)		Q2			Q3			Q4			Q1	
PICC Line (annual)									X			
Sepsis (every other month)		X		X		X		X		X		X
Value Analysis Committee/Materials Management (annual)									X			
Workplace Violence (biannual)		X							X			
MEDICAL STAFF COMMITTEE REPORTS												
Blood Utilization Committee (biannual)					X						X	
Infection Control (quarterly)			Q2			Q3			Q4			Q1
Radiation Safety (biannual)						X						X
Trauma (biannual)			X						X			
Utilization Management - Readmissions (biannual)					X						X	
Patient Experience Survey Data												
Clinics - MOB	X			X			X			X		
Clinics - 3000	X			X			X			X		
Emergency Department	X			X			X			X		
ICU	X			X			X			X		
Medical Oncology	X			X			X			X		
Med/Surg	X			X			X			X		
Radiation Oncology	X			X			X			X		
Surgery Department	X			X			X			X		
Women's Health	X			X			X			X		
DEPARTMENT REPORTS												
Behavioral Health (biannual)				X						X		
Cardiopulmonary (biannual)					X						X	
Care Management - Discharge Planning (biannual)					X						X	
Chronic Care Manager (biannual)					X						X	
Clinic - MOB (biannual)			X						X			
Clinic - 3000 (biannual)			X						X			
Dialysis (biannual)						X						X
Dietitians (annual)										X		

	Monthly Meeting: Second (2nd) Tuesday of the Month, 1:00 p.m. - 3:00 p.m., Classrooms 1-3 or Virtual											
	Quarter 3			Quarter 4			Quarter 1			Quarter 2		
	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
DEPARTMENT REPORTS												
Education (annual)							X					
Emergency Department (biannual)		X						X				
Employee Health (annual)			X									
Environmental Services (biannual)		X						X				
Fiscal Services (annual)												X
Health Information Management (annual)		X										
Human Resources (annual)								X				
ICU (annual)				X								
Information Services (annual)	X											
Laboratory (biannual)		X						X				
Medical Imaging (biannual)						X						X
Medical Oncology (biannual)						X						X
Medical Staff Services (annual)									X			
Medical Surgical (biannual)			X						X			
Nutrition Services (biannual)				X						X		
Outpatient Infusion (annual)										X		
Patient Access (biannual)					X						X	
Patient Financial Services (biannual) (Central Scheduling, Pt Financial Navigation, & Translation & Interpretive Services)					3						3	
Pharmacy (biannual)	X						X					
Physician Recruitment (annual)						X						
PR/Marketing (annual)	X											
Radiation Oncology						X						X
Rehab Services (biannual)					X						X	
Sleep Lab (annual)				X								
Surgical Services (biannual)	X						X					
Volunteers, Community Outreach (annual)						X						
Women's Health (biannual)		X						X				
FACILITY WIDE REPORTS												
Hospital Compare Preview Reports (quarterly)	X			X			X			X		
MHSC Star Rating, Patient Safety, and Other Standards Dashboards (monthly)	X	X	X	X	X	X	X	X	X	X	X	X
Patient Experience/HCAHPS Dashboards - by Dept. (monthly)	X	X	X	X	X	X	X	X	X	X	X	X
ORYX Report (quarterly)			X			X			X			X
Quality Reporting Program Results (HRRP, HACRP, VBP, QPP - annually)							X	X				
Staffing Adequacy Report (annual)									X			
PIPS RELATED ITEMS												
PIPS Plan					X							
Patient Safety Plan					X							
Annual PIPS Priorities Selection					X							
Annual Patient Safety and Performance Improvement Report (Annual Evaluation)						X						
Total Reports:	18	14	11	19	17	15	18	14	15	19	15	13



FY 2022 MHSC Quality Committee of Board Reporting Schedule												
Monthly Meeting: Second (2nd) Tuesday of the Month, 1:00 p.m. - 2:30 p.m., Classrooms 1-3												
	Quarter 1			Quarter 2			Quarter 3			Quarter 4		
	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
STANDING COMMITTEE REPORTS												
Pain Task Force			Q4			Q1			Q2			Q3
Person Centered Care		Q4			Q1			Q2			Q3	
Antimicrobial Stewardship		Q4			Q1			Q2			Q3	
Continual Survey Readiness			Q4			Q1			Q2			Q3
Patient Safety (to include: EHR Ops, Code Blue, SMPT, restraint/seclusion, behavioral health, suicide screening)	Q4			Q1			Q2			Q3		
EOC	Q4			Q1			Q2			Q3		
MEDICAL STAFF COMMITTEE REPORTS												
Infection Control		Q4			Q1			Q2			Q3	
Tissue and Blood		Q4			Q1			Q2			Q3	
Trauma	Q4			Q1			Q2			Q3		
Radiation Safety			Q4			Q1			Q2			Q3
Utilization Management/Readmissions	Q4			Q1			Q2			Q3		
PROJECT TEAM REPORTS												
Sepsis		Q4			Q1			Q2			Q3	
ED Patient Flow	Q4			Q1			Q2			Q3		
DEPARTMENT REPORTS - Quarterly												
Women's Health		Q4			Q1			Q2			Q3	
Medical Surgical		Q4			Q1			Q2			Q3	
ICU			Q4			Q1			Q2			Q3
ED			Q4			Q1			Q2			Q3
Surgical Services	Q4			Q1			Q2			Q3		
Medical Imaging			Q4		Q1			Q2			Q3	
Clinic	Q4			Q1			Q2			Q3		
Radiation Oncology/Medical Oncology	Q4			Q1			Q2			Q3		
Outpatient Infusion		Q4			Q1			Q2			Q3	
Rehab Services			Q4			Q1			Q2			Q3
Cardiopulmonary			Q4			Q1			Q2			Q3
Legal Counsel (Contracted Services Report)	Q4			Q1			Q2			Q3		
FACILITY WIDE REPORTS												
Donor Connect		X			X			X			X	
Patient Experience/HCAHPS Dashboards	X	X	X	X	X	X	X	X	X	X	X	X
MHSC Organization Dashboard	X	X	X	X	X	X	X	X	X	X	X	X
Hospital Compare Preview Reports	X			X			X			X		
Quality Reporting Program Results (HRRP, HACRP, VBP, QPP - Annually)							X	X				
Culture of Safety Survey Results (Biennially)								X				

Audit of Peer Review and OPPE/FPPE (Annually)			X									
Audit of Credentialing Process (Annually)											X	
Audit of Clinical Contract Quality Review (Annually)												X
Accreditation Reports (Triennially Hospital, Biennially Lab)												
FMEA, RCA, Serious Safety Events (as they occur)												
PLAN APPROVAL (Annual)												
PIPS Plan						X						

MEMORANDUM

To: Board of Trustees
From: Wm. Marty Kelsey
Subject: Chair's Report...May Building and Grounds Committee Meeting
Date: May 24, 2024

Oncology Suite Renovation...Phase I has not been completed yet. The State Board of Pharmacy had concerns with wording on a letter. They will review again sometime in June. Jerry Johnston indicated that work should be completed on Phase II in a couple more months.

Medical Imaging Core and X-Ray...Design work continues with Plan One and ST & B. Hopefully, the project can be bid sometime in June. The ER X-Ray room work is now complete.

Laboratory Expansion Project...Project is moving ahead as scheduled. Groathouse Construction has received subcontractor bids.

MOB Entrance Project...It is estimated that bids can be received sometime in August. The project is projected to cost about \$2.1 million with SLIB paying about half. I asked about patient ingress and egress to the MOB. Mr. Wheatley indicated there will always be an entrance for patients to go in and out with the proviso that when concrete work is done and alternative entrance will have to be identified.

Foundation Area Renovation Project...Staff is awaiting Master Planning results and final decisions before what services will be moved into this space.

Master Plan...It is planned that the B & G Committee will be presented with the Master Plan recommendations followed by the full Board presentation at the July Board meeting.

The next meeting of the Committee will be held on June 25th at 2:00 p.m.

As usual, for more detailed information, please refer to the B & G Committee minutes in the packet.

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
Building and Grounds Committee Meeting
May 21, 2024

The Building and Grounds Committee met in regular session via Zoom on May 21, 2024,
at 2:30 PM with Mr. Marty Kelsey presiding.

In Attendance: Mr. Marty Kelsey, *Trustee, Chairman*
 Mr. Craig Rood, *Trustee*
 Ms. Irene Richardson, *CEO*
 Ms. Tami Love, *CFO*
 Mr. James Horan, *Director of Facilities*
 Mr. Gerry Johnston, *Maintenance Supervisor/ Project Manager*
 Mr. Will Wheatley, *PlanOne Architects*

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

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

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

Maintenance Metrics

Mr. Johnston said the Days Overdue are slowly dropping as they continue to clean up some old workorders. For April, there were 77% completed. Mr. Kelsey asked about staffing and Mr. Johnston said things were decent.

Old Business – Project Review

Oncology Suite renovation

Mr. Kelsey asked if Phase 1 of this project was complete. Mr. Wheatley said it has not been completed as there was some confusion with the State and Board of Pharmacy regarding some wording in the final letter. The Board of Pharmacy will need to come back in June. Mr. Kelsey asked about the timeline as Phase II can't begin until Phase I is complete. Mr. Johnston said there is probably another 2 months of work to be done. The contractor is still trying to make the deadline. Mr. Wheatley will follow up with a new schedule if it changes.

Medical Imaging Core and X-ray

Mr. Wheatley said they are in full design and development phase with ST&B. They hope to get this project out to bid in late June. Mr. Kelsey asked about the ER x-ray room. Mr. Johnston said it is complete and they are using the new room as of last week.

Laboratory Expansion project - SLIB

Mr. Wheatley said they have submitted responses to OHLS and only have one minor submittal outstanding and then they will have the State approval to start. Grothouse is mobilizing now and is working with the City of Rock Springs for permits. Due to the size, there will be an additional sewer tap fee. Mr. Kelsey asked if all subcontractor bids had been received. Mr. Wheatley said they have and Grothouse should be issuing agreements. There were no surprises with the subcontractor bids. The groundbreaking is scheduled for May 23.

MOB Entrance – SLIB

Mr. Wheatley said this project is a couple of weeks behind the Imaging project. They are pushing to meet the SLIB October deadline to have it under contract. The estimate to have bids in August. Mr. Kelsey asked if will be doing the traditional Design-Bid and if there are contractors available. Mr. Wheatley said this project is small enough to get other contractors but is concerned about the local subcontractor availability. There are 3 large scale projects starting in Sweetwater County. Mr. Kelsey asked if this project was mostly electrical or mechanical. Mr. Wheatley said there is some mechanical and electrical but mostly site work with the changes to parking and entrance. Ms. Richardson confirmed the total project is around \$2.1 million with half being through the SLIB grant. Mr. Kelsey asked how the Clinic entrance will be impacted during the project. There is a side door that leads directly into the stairwell. Mr. Wheatley said the project will need to be phased so we can always keep a portion open. However, there will be concrete work at the entrance where we may need to use an alternative entrance. Mr. Rood said we will need to communicate these changes to our staff and patients.

Foundation Area Renovation

Mr. Johnston said we may wait until the new office space in the Lab project is complete so we don't displace the staff. We are also still waiting on the Master Plan to help with deciding what services we want to move into this newly renovated space.

Master Plan

Ms. Richardson and Ms. Love were unable to attend the presentation from PACT but have set up a time to review the information. Mr. Horan said he was very impressed with PACT and their information for future projections and where healthcare is going. He said they have recommendations for changes within the existing facility and not just building new space. We would like to have them present to the full Board at the July 1st meeting. Mr. Kelsey asked if this committee could see the Master Plan presentation before going to the full Board.

U of U suite renovation

Ms. Love recommended removing this from the agenda. There may still be some renovations needed to move our clinics into that space, but it will not be done under the University of Utah agreement.

New Business

No new business was discussed.

Other

The next meeting is scheduled for Tuesday, June 25, 2024; 2:00P – 3:30P.

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

Submitted by Tami Love

DRAFT

Minutes
Governance Committee
May 20, 2024

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

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

Old Business

Board Policy: **Approval Process for a Community Member to be Appointed to a Board Committee.**
Draft of policy reviewed and edited. Edited policy is attached. Will review at June meeting before taking to Board for first read.

New Business

1. Board Policy: Guidelines for Negotiating Physician Contracts. Following changes were made:
 - a. Uncapitalize physician and contract throughout policy
 - b. D CME Stipend: Change to read "An unused portion *may* be carried to the next calendar year at the discretion of the CEO.
 - c. Terms and Provisions: change to read abide by all hospital policies.

Meeting adjourned at 3:10 pm.

Next meeting is scheduled for June 3rd at 2:00 pm.

Respectfully submitted,

Barbara J. Sowada, Ph.D.

Executive Summary – Quality Committee of the Board

PROVIDED BY Kari Quickenden and Jennifer Roger

REPORTING DATE May 2024 Quality Committee Monthly Meeting

General Highlights	<ul style="list-style-type: none"> • Aimee Urbin provided an update on the CAP Survey. • Kari Quickenden presented the April Care Compare Refresh Report. • Kari Quickenden presented the PIPS Plan for review.
FY 2024 PIPS Priorities	<ul style="list-style-type: none"> • Patient Experience – The patient experience back to basics toolkit has been updated to include suggestions from leaders for additional information. Employee check-ins led by the Person-Centered Care Committee began in April. • FY24 Patient Experience Priority #2 has been tabled. This priority focused on the design of a three-year strategic plan for patient experience. Since patient experience is a pillar of the organizational strategic plan with specific initiatives and objectives, the team and select MHSC Board of Trustees members concluded it was not appropriate to focus on this priority at this time. The PIPS Committee selected two items pivotal to patient experience for FY25 PIPS Priorities. The Quality Department will bring them to the Board of Trustees for approval in the upcoming months.
Patient Safety	<ul style="list-style-type: none"> • The Medical Device Failure Policy was reviewed and approved by the committee. • Aggregate occurrence report data was reviewed. There have been 219 reports entered into Synergi for CY 2024. 51 of those reports were Good Catches. • Patient perception of safety data from January to March 2024 was reviewed from Press Ganey. • In 2024 there have been 6 total patient falls, with 1 inpatient fall, and 0 patients have been injured from falling at MHSC.
Medication Safety	<ul style="list-style-type: none"> • Medication History Updates – Clinics and ED. The nurse directors continue to work with their staff in their respective departments on updating histories. With the transition to Interim Pharmacy Director, the team recognized an issue with the medication history data. The data has been validated and the updated data was included in the report.
Infection Prevention	<ul style="list-style-type: none"> • We continue to work toward the sustainability of appropriate documentation for isolation precautions. We have also started a work group that will investigate the increase in hospital acquired infections (HAI), Clostridium difficile (C. diff) cases. This multidisciplinary work group will look at causes as well as implement different solutions to reduce C. diff cases in house.
PIPS Committee	<ul style="list-style-type: none"> • We heard about wonderful improvement projects happening in multiple departments and committees. The Blood Utilization Committee continues to work towards a blood contamination rate of less than 1% using the Kurin diversion device. The Lab is working to achieve 100% compliance in documenting patient results and charges for urine dipstick point of care data entry at College Hill. Chronic Care Management continues to track recommended wellness screenings offered in 2023 and completed in 2024. Interpretive Services is working on improving communication between providers, nurses, and reception by creating an interpreting services pool within Cerner. The Patient Flow workgroup is working to decrease the amount of time for a patient to be moved from the ED to an inpatient unit to less than 110 minutes. The Person-Centered Care Committee has implemented monthly employee check-ins for every department organization wide to improve the person-centered care culture. Patient Financial Navigation continues their work on identifying patients receiving high-cost medications in the Outpatient Services department by increasing co-pay assistance revenue. Cardiac & Pulmonary Rehab continues to focus on providing monthly CORE education for patients. Physical & Speech Therapy continues to track improvement of patient satisfaction on therapy goals. Cardiopulmonary is working on compliance with ventilation equipment physician orders. Care Management continues to focus efforts on reducing the readmissions rate to 3.5-4%. Central Scheduling is working on improving encounter accuracy at the time of pre-registration to reduce delays in billing and receiving payment. Emergency Management is working on improving emergency management education and training organization. The Patient Access Team is working on decreasing the number of errors when creating patient encounters to improve the patient experience and assist with collections.

Capital Request Summary

Capital Request #

FY24-58

Name of Capital Request:

CONTROL HEADS FOR SOFT WATER SYSTEM

Requestor/Department:

Jim Horan/Facilities

Sole Source Purchase: Yes or No

Reason: current vendor for maintenance of tanks

☐ 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.	Pacific Water, INC	Salt Lake City, UT	\$58,516.50
2.			
3.			

Recommendation:

Pacific Water, INC - \$58,516.50



# Assigned: FY 24 - 58	
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: GJJ
Date: 5/6/2024	
Provide a detailed description of the capital expenditure requested: Install new control heads for soft water system	
Preferred Vendor: Pacific Water Inc.	
Total estimated cost of project (Check all required components and list related expense)	
1. Renovation	\$
2. Equipment	\$
3. Installation	\$ 52,156.50
4. Shipping	\$
5. Accessories	\$
6. Training	\$
7. Travel costs	\$
8. Other e.g. interfaces	\$ 6,360.00
Total Costs (add 1-8)	\$ 58,516.50
Does the requested item:	
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.)
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:	
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
# of bids obtained? _____	
<input type="checkbox"/> Copies and/or Summary attached.	
If no other bids obtained, reason:	
Review and Approvals	
Submitted by: Gerry Johnston Jr.	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

This quote will cover parts, pieces and installation of new control heads on our water softeners. The current ones are running through a ton of issues and we have had a service rep at least twice this year to trouble-shoot. Each time they are here costs roughly 2,500.00 The rep said the best way to fix our issues would be this direction in replacing the heads, due to their age.

I only have one quote as we don't have any industrial water softeners dealers in town. Finding someone that is close and offers the same products hasn't been easy. This vendor is the one who is familiar with our systems and currently do the maintenance.

We will request County maintenance funds for reimbursement.

Submitted by: Signature

Date

**PACIFIC WATER**
INC.

200 W. Haven Ave.
Salt Lake City, UT 84115
Phone (801) 485-6510

QUOTATION

Quotation No.	Quotation Date	Account No.
QJ112070	04/23/24	4144

BILL TO:
Memorial Hospital of Sweetwater County 1200 College Dr. Rock Springs, WY 82901

SHIP TO:
Memorial Hospital of Sweetwater County 1200 College Dr. Rock Springs, WY 82901

JOB NAME	LEAD TIME	EXPIRATION DATE	SALESPERSON	PAYMENT TERMS
		07/26/24	James Nielsen	

Qty	Part No.	Description	Price	Total
3	C959-C	Control Valve, Series 959 3" Less DLFC	\$4,760.00	\$14,280.00
3	CNHWBP-3	No Hard Water Bypass Valve 3"	\$1,090.00	\$3,270.00
3	CMC-3	Meter, Stainless Steel 3"	\$1,460.00	\$4,380.00
3	C959SMA	WS3 Side Mount Base Assembly	\$542.00	\$1,626.00
45	MCG8	Cation Resin CG8	\$118.90	\$5,350.50
1	Installation of New heads	Installation of new valves to include new piping upper and lower to the tank.	\$23,250.00	\$23,250.00
48		Labor	\$120.00	\$5,760.00
1		Service Call	\$600.00	\$600.00
			Sub Total	\$58,516.50
			Quotation Total	\$58,516.50
Quotation total does NOT include destination freight charges			Total does NOT include Sales Tax	

Capital Request Summary

Capital Request #

FY24-59

Name of Capital Request:

STORAGE FOR DAVINCI VIDEO

Requestor/Department:

Terry Thompson/IT

Sole Source Purchase: Yes or No

Reason: preferred vendor to maintain consistency with storage

☐ 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.	COMPUNET	MERIDIAN, ID	\$58,810.00
2.			
3.			

Recommendation:

COMPUNET - \$58,810.00



Assigned: FY 84 - 59

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: Information Services

Submitted by: Terry "TJ" Thompson

Date: 05/06/2024

Provide a detailed description of the capital expenditure requested:

As part of the DaVinci surgical robot expansion, one of the requirements to facilitate video of operations for training purposes. After conferencing with vendor we would need this additional storage as to store the videos for 90 Days.

Preferred Vendor: CompuNet

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

1. Renovation	\$
2. Equipment	\$57,560.00
3. Installation	\$1250.00
4. Shipping	
5. Accessories	
6. Training	
7. Travel costs	
8. Other e.g. interfaces	
Total Costs (add 1-8)	
	\$8,610.00

Does the requested item:

Require annual contract renewal? ☒ YES ☐ NO

Fit into existing space?

☒ YES ☐ NO

Explain: Space existing within our Pure Storage system

Attach to a new service?

☐ YES ☒ NO

Explain: Additional drives within our existing Pure Storage system

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

Budgeted Item:

Projected Annual Procedures (NEW not existing)

☐ YES ☒ NO

Revenue per procedure

\$

of bids obtained? 1

Projected gross revenue

\$

Projected net revenue

\$

Projected Additional FTE's

☒ Copies and/or Summary attached.

If no other bids obtained, reason:

Salaries

\$

CompuNet preferred vendor

Benefits

\$

Maintenance

\$

Supplies

\$

Total Annual Expenses

\$

Net Income/(loss) from new service

\$

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

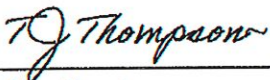
Signature 5-16-24
Signature 5-22-24

OTHER CONSIDERATIONS

As part of the DaVinci surgical robot expansion, one of the requirements to facilitate video of operations for training purposes. After conferencing with vendor we would need this additional storage as to store the videos for 90 Days.

Hardware, Pure Storage FlashArray DFM datapack 18TB 4X4.5TB	= 57,560.00
Support, DFM-DP- 18TB 1 , NBD Delivery, 24/7 Support	= 4364.40
Installation Services CompuNet	= 1250.00

Also this project is pending a Cerner Interface as to upload still picture to patient's medical records, which we are waiting on quote.



Submitted by: Signature

05/14/2024

Date



Jason Salisbury
(208) 286-3019
jsalisbury@compunet.biz
Quote #: JS237094

Pure - Drive Expansion

Quote Information:

Quote #: JS237094

Version: 1

Quote Date: 05/03/2024

Expiration Date: 08/01/2024

Prepared for:

Memorial Hospital of
Sweetwater County

Terry (TJ) Thompson

307-362-3711

tthompson@sweetwatermemoria
l.com

Bill To:

Memorial Hospital of
Sweetwater County

Tina Frulla

1200 College Drive

Rock Springs, WY 82901

tfrullo@sweetwatermemorial.co
m

Ship To:

Memorial Hospital of
Sweetwater County

Terry (TJ) Thompson

1200 College Drive

Rock Springs, WY 82901

Pure Datapack

Manufacturer Part Number	Product Details	Qty	List Price	Price	Ext. Price
DFM-DP-18TB-4x4.5TB	Pure Storage FlashArray DFM datapack 18TB- 4x4.5TB	1	\$143,900.00	\$57,560.00	\$57,560.00
DFM-DP-18TB, 1MO,ADV,FVR	DFM-DP- 18TB 1 Month Evergreen Forever Subscription, NBD Delivery, 24/7 Support	10	\$491.00	\$436.44	\$4,364.40
Subtotal:					\$61,924.40

Pro-Services Installation Services

Product Details	Qty	Price	Ext. Price
CNet FF - Installation CompuNet Installation Services	1	\$1,250.00	\$1,250.00
Subtotal:			\$1,250.00

Shipping

Product Description	Quantity	Price	Ext. Price
Ground Shipping To Be Determined, Billed As Actual	1	\$0.00	\$0.00

Quote Summary

Description	Amount
Pure Datapack	\$61,924.40



Jason Salisbury
(208) 286-3019
jsalisbury@compunet.biz
Quote #: JS237094

Quote Summary

Description	Amount
Pro-Services Installation Services	\$1,250.00
Total:	\$63,174.40

Taxes, shipping, handling and other fees may apply. We reserve the right to cancel any order arising from pricing or other errors. If Customer is purchasing a subscription-based product, Customer agrees to pay all charges for the complete term of the subscription. By signing below or issuing a Purchase Order, Customer agrees to CompuNet's standard terms and conditions, which can be reviewed [here](#), provided, that if Customer and CompuNet are parties to a currently effective Master Product Purchase and Services Agreement (MSA), the terms and conditions of such MSA shall control and shall supersede these standard terms and conditions. Your electronic signature, per the Electronic Signature Act, is considered equivalent to your signed and faxed signature, and allows you to accept and place your order. This Quote becomes binding and noncancelable upon Customer's return to CompuNet of acceptance. A copy of this acceptance and the attached proposal document will be sent to your email address to complete your order acceptance. You are NOT required to electronically sign your order, you may fax or email your signed proposal to your Account Executive.

Memorial Hospital of Sweetwater County

Signature: _____
Name: _____
Title: _____
Date: _____
PO Number: _____

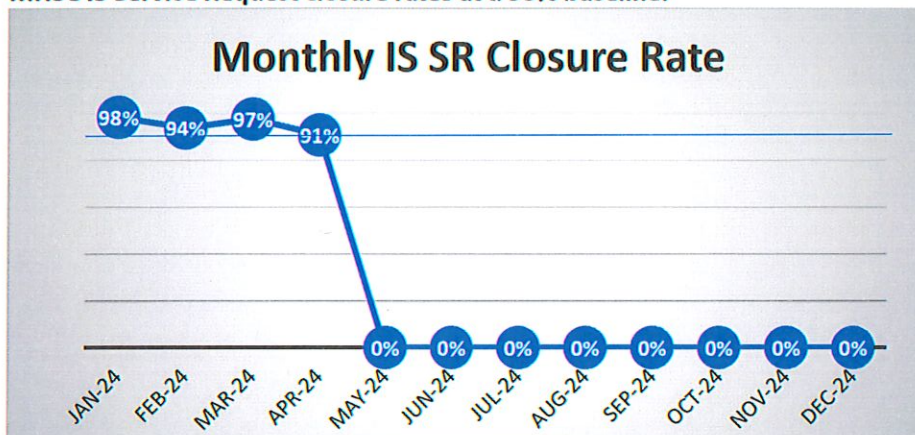
IS Report April 2024

By Terry (TJ) Thompson, IS Director

MHSC IS service environment:

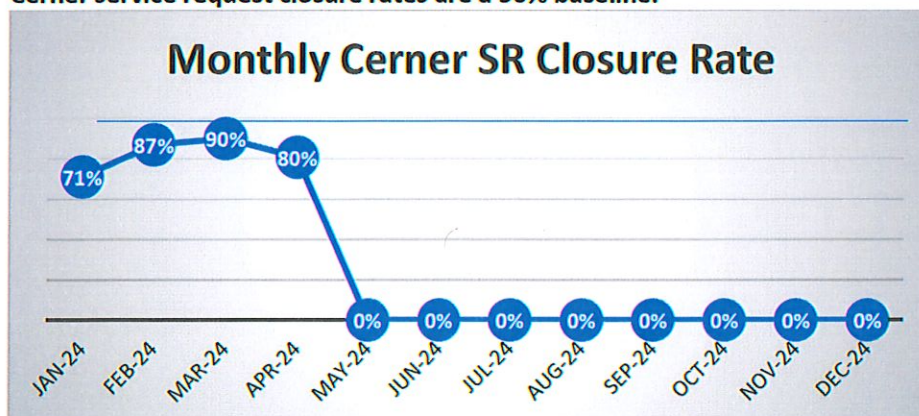
- 1158 computer user accounts
- 100 portable devices, Cell Phones, and iPads
- 790 Desktop systems, Laptops, and Desktops
- 562 VoIP Telephony devices
- 164 Servers, 158 being virtual systems.
- 86 Networking Nodes
- 103 Wireless devices
- 18 UPS

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



Service Desk 91% of our new 95% weekly meantime to restore baseline. Where we had 1047 service tickets closing 779 with 187 pending. We are currently struggling with staffing issues.

Cerner service request closure rates are a 90% baseline:

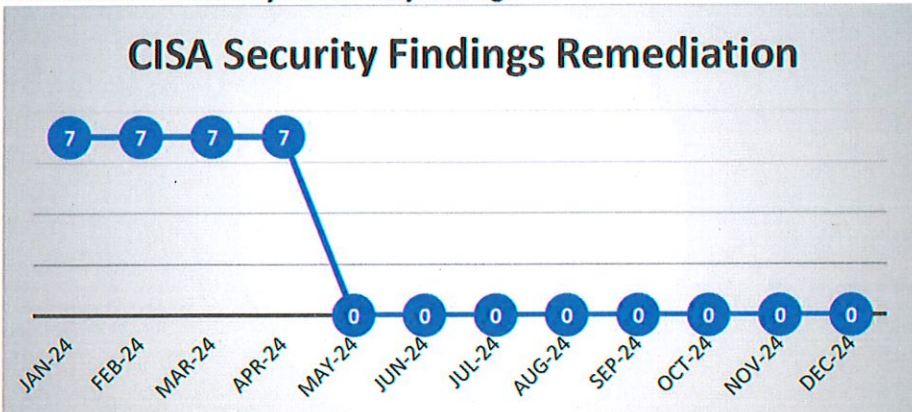


Cerner is at 80% of the weekly meantime to restore the 90% baseline. Cerner closed 90 of the 130 service requests of which 18 are pending.

MHSC Project Completion:

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

Remediation of CISA Cyber Security findings:



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

The remaining seven CISA security findings are known as heavy lift issues where we must make infrastructure changes without outages. We will continue to monitor the remaining CISA issues this year with an ETA by the third quarter of 2024. With the new Intune configuration planned to be finished sometime in June 2024, we hope to have many of these security findings remediated.

Below is the latest CISA Cyber Hygiene Report Card, which is performed weekly. CISA is scanning MHSC 44 external public IP addresses for vulnerabilities. We have 44 scanned addresses, with 8 hosts and 14 services on these hosts. Where two hosts have 4 medium vulnerabilities. We were able to remove the one low vulnerability. AllWest Communications has provided routing information to set up our Internet Edge project. We are migrating our connection to our new public IP addressing range, which requires coordination with multiple parties. Once we have completed this process, we will be able to remove the last four vulnerabilities.

2024-04-14

CYBER HYGIENE

REPORT CARD

Memorial Hospital of
Sweetwater County



0

Hosts with
unsupported
software



0

Potentially Risky
Open Services



34%

Decrease in
Vulnerable
Hosts



CISA
CYBER INFRASTRUCTURE

HIGH LEVEL FINDINGS

LATEST SCANS

January 26, 2024 — April 14, 2024

Completed host scan on all assets

April 8, 2024 — April 14, 2024

Last vulnerability scan on all hosts

ASSETS OWNED

44

No Change

HOSTS

7

No Change

VULNERABLE HOSTS

2

Decrease of 1
29% of hosts vulnerable

ASSETS SCANNED

44

No Change
100% of assets scanned

SERVICES

13

No Change

VULNERABILITIES

4

Decrease of 1

VULNERABILITIES

SEVERITY BY PROMINENCE



VULNERABILITY RESPONSE TIME

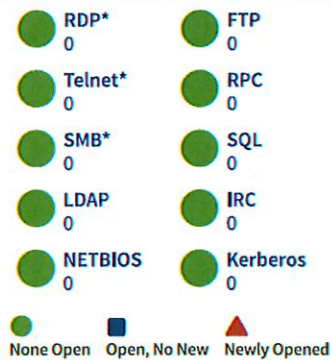


MAX AGE OF ACTIVE CRITICALS



MAX AGE OF ACTIVE HIGHS

POTENTIALLY RISKY OPEN SERVICES



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

* Denotes the possibility of a network management interface.

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

Tuesday~ May 28, 2024 2:00 p.m. Teleconference

Voting Members:

Barbara Sowada, Trustee
Craig Rood, Trustee
Irene Richardson
Tami Love
Jan Layne

Non-Voting Members:

Ron Cheese	Terry Thompson
Angel Bennett	Kari Quickenden
Ann Clevenger	Dr. Augusto Jamias
	Dr. David Dansie

Guests:

Leslie Taylor	Julia Kershisnik	Carrie Canestorp
Taylor Jones, Commissioner	James Horan	Gerry Johnston

- | | | |
|-------|---|------------------|
| I. | Call Meeting to Order | Craig Rood |
| II. | Mission Moment | Irene Richardson |
| III. | Approve Agenda | Craig Rood |
| IV. | Approve minutes from April 24,2024 | Craig Rood |
| V. | Capital Requests FY24 | Craig Rood |
| VI. | Financial Report | |
| | A. Monthly Financial Statements & Statistical Data | |
| | 1. Narrative | Tami Love |
| | 2. Financial Information | Tami Love |
| | 3. Financial Goals | Tami Love |
| | 4. Self-Pay Report | Ron Cheese |
| | 5. Preliminary Bad Debt | Ron Cheese |
| VII. | Old Business | |
| | A. Critical Access Update | Tami Love |
| | B. CLA Project – PIPS Financial Goals | Tami Love |
| | C. Budget Workshop | Tami Love |
| VIII. | New Business | |
| | A. Investment Policy | Tami Love |
| | B. Financial Forum Discussion | Craig Rood |
| IX. | Next Meeting – June 26,2024 | Tami Love |
| X. | Adjournment | Craig Rood |

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
Finance & Audit Committee Meeting
April 24, 2024

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

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

Non-Voting Members Present: Mr. Ron Cheese, *Director of Patient Financial Services*
Dr. Kari Quickenden, *CCO*
Dr. Ann Clevenger, *CNO*

Non-Voting Members Absent: Mr. Terry Thompson, *Director of IT*
Ms. Angel Bennett, *Director of Materials*
Dr. Augusto Jamias

Guests: Dr. Barbara Sowada, *Trustee*
Mr. Taylor Jones, *County Commissioner*
Ms. Carrie Canestorp, *Director of HIM*
Ms. Leslie Taylor, *Clinic Director*
Ms. Rebecca Vance-Student
Ms. Julia Kershisnik-Sweedler-*Director of Acute Care*

Call Meeting to Order

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

Approve Agenda

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

Approve Meeting Minutes

A motion to approve the meeting minutes from March 27, 2024, was made by Ms. Richardson; second by Ms. Love. Motion carried.

Capital Requests

Ms. Kershisnik-Sweedler presented capital request FY24-48 for GE Vital Sign Monitors. This is a request of the hospitalists and will increase patient safety and care. This is a budgeted item. The total cost is \$230,415.99. A motion was made to approve to send to the board for approval by Ms. Richardson; second by Ms. Love. Motion approved.

Financial Report

Ms. Love reviewed the financial information for March. We had an operating gain in March of \$272,604 compared to a budgeted gain of \$1.3 million. Gross revenue came in at \$22.7 million, under budget by \$637,533 million. Reductions of revenue were 52.8%, over the budget of 52.5%. Accounts Receivable increased slightly in March. Collections were at \$10.4 million. We are now reporting the collections goal as a percentage of net revenue. The annual debt service coverage ratio was 6.15 and days of cash on hand stayed the same at 104. Net days in AR stayed the same at 57.6 days. Expenses for March were \$11 million, over the budget by \$1.5 million. The clinic's revenue came in under budget, at \$3.0 million. The Clinic loss for March was \$272,258.

The revenue projection for April is projected to be \$23 million. Inpatient volumes decreased in April. Collections should be around \$10.3 million. Expenses are expected to be over budget in April. The estimated gain for April is \$200,000-300,000.

Financial Goals

Ms. Love reviewed the financial goals included in the packet. She said we were able to get information on denials. DNFB saw a decrease as we are working through this with CLA. The cash collection's goal was changed to 100% of net revenue.

Self-Pay Report

Mr. Cheese reviewed the self-pay report included in the packet. He said they have exceeded their yearly goal by \$486,291. The amount of medical assistance is decreasing due to patient navigation getting patients onto these programs and getting free drugs.

Preliminary Bad Debt

The preliminary bad debt, less recovery, is \$1,520,553.25. This will be updated to present at the May Board meeting.

Old Business

Critical Access

Ms. Love provided a critical access update. We met with the hospitalist team to get their questions and concerns answered. They were concerned about the length of stay and average daily census. We are gathering more information for them. We will present at the general medical staff meeting in May. Mr. Kelsey asked what the next steps were. Ms. Love said we need to tell the state we are ready and then we will have a survey by the state. Then we need a survey by the Joint Commission. We need to have Cerner make changes to our billing system and it will take about 4 months to make these changes. The earliest we are looking at converting to CAH would be October.

PIPS Financial Goals

Reports were provided in the packet with updates on the different projects with CLA. CLA will be on-site next week. A Denials Management Workgroup was created to work through denials. We have taken their recommendations regarding staffing and made changes to our phone tree to enhance productivity. We have also implemented point-of-service collections and have already seen improvement in this area. Mr. Kelsey asked if we only have one Medicare biller. Mr. Cheese said that we have two. We did lose one of our experienced Medicare billers and we are currently training her replacement. We have also seen an increase in Medicare revenue. Mr. Kelsey asked if we are looking at increases in staffing to deal with this increased revenue and volumes. Mr. Cheese said he is currently hiring two new people. One of these people will be moved to Medicare. Mr. Kelsey asked if we had the room for these people as he knows we have space issues over here. Mr. Kelsey suggested this be reviewed in the master plan. Dr. Sowada asked if we are working on workflow improvements and automation. Mr. Cheese said they are implementing new prior-authorization software that just went live that should help get money collected on the front-end. We are also improving workflows.

New Business

Financial Forum Discussion

Ms. Love said we are working on next year's budget. We met with the directors the week of April 15th and now are meeting with Irene to make final changes. Ms. Love said that the county budget is due Friday. She asked the committee if they wanted to hold a budget workshop. Dr. Sowada thought it would be beneficial for the new board members.

Next Meeting

The next meeting is May 28th at 2:00 pm.

Meeting adjourned at 2:59pm.

Submitted by Jan Layne

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

NARRATIVE TO APRIL 2024 FINANCIAL STATEMENTS

THE BOTTOM LINE. The bottom line from operations for April is a gain of \$349,002, compared to a gain of \$79,984 in the budget. This yields a 3.16% operating margin for the month compared to .80% in the budget. The year-to-date gain is \$5,447,098 compared to a gain of \$190,598 in the budget. The year-to-date operating margin is 5.04%, compared to .19% in the budget.

Year-to-date, the total net gain is \$6,448,567, compared to a total net gain of \$2,753,369 in the budget. This represents a profit margin of 5.97% compared to 2.74% in the budget.

REVENUE. Revenue was higher again in April coming in at \$23,499,639, over budget by \$2,642,294. Inpatient revenue is \$4,046,996, under budget by \$408,864 and outpatient revenue is \$19,452,643, over budget by \$3,051,158. Year-to-date, gross revenue remains over budget by \$17,251,100. Gross revenue has increased 19% from the same 10-month period last fiscal year, recognizing only 5% comes from the annual rate increase. The largest percentage variances for revenue to budget comparison came from the following hospital departments:

Outpatient Services – 40%	Nuclear Medicine – 23%
Surgical Services - 31%	CT Scan – 28%
Radiation Oncology – 46%	Ultrasound 15%
Cardiac Rehab – 39%	ICU – (69%)
MRI – 32%	Respiratory Therapy – (39%)
Histology – 35%	Behavioral Health – (36%)
Mammography 22%	Physical Therapy – (58%)

REDUCTION OF REVENUE. Deductions from revenue are estimated at 53.7% for the month, over budget for the month. Year-to-date reductions of revenue are 52.8%, slightly over budget. Total AR increased slightly from March, up by about \$300,000:

<i>Medicare – increase \$419,000</i>	<i>Government – decrease \$338,000</i>
<i>Medicaid - increase \$74,000</i>	<i>Self Pay – decrease \$352,000</i>
<i>Blue Cross – increase \$484,000</i>	<i>Worker's Comp – decrease \$164,000</i>
<i>Commercial - increase \$195,000</i>	

Total collections for the month came in higher this month, at \$10.7 million, at 100.3% of net patient revenue. Year-to-date collections are 91.9% of net patient revenue. The goal for collections as a percentage of net revenue is $\geq 100\%$.

NET OPERATING REVENUE. Total net operating revenue was \$11,045,328 in April and \$108,031,553 year-to-date. Other operating revenue in April includes occupational medicine revenue, county maintenance funds and cafeteria revenue.

RATIOS. Annual Debt Service Coverage came in at 6.05. Days of Cash on Hand increased 8 days, at 112 days as of April 30. Daily cash expenses increased to \$309,800 year-to-date. Net days in AR decreased 1 day to 56.6 days.

VOLUME. Inpatient admissions, discharges and patient days came in over budget for April. The average daily census (ADC) decreased to 13.1, which is over budget for the month, and average length of stay (LOS) increased slightly to 3.1, right at budget. ER visits, Surgeries, Outpatient visits and Clinic visits came in over budget and Births came in under budget.

EXPENSES. Total expenses came in over budget, but lower than the previous month, coming in at \$10,696,326, over budget by \$728,674. Expenses are over budget year to date by \$2,264,220. The following line items were over budget in April:

Benefits – Group health and Other employee benefits came in over budget for April. Group health is over budget \$950,170 year-to-date.

Contract Labor - There is unbudgeted contract expense in Medical Floor, Labor & Delivery, and Radiology for the month. Surgical services and Emergency department are over budget in April.

Other Physician Fees – Locum expenses for Radiation Oncology, Anesthesia and Clinic departments are over budget in April.

Purchased Services – Expenses over budget for the month include consulting fees, legal fees, collection agency, pharmacy management, surgical services, send out lab tests, and other professional services for facilities, coding and IT.

Supplies – Expenses over budget for April include surgical instruments, patient chargeables, implants, medical supplies, minor equipment, maintenance supplies, non-medical supplies and outdated supplies.

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

Other Operating Expenses – Categories over budget include freight and pharmacy floor allocation.

Leases & Rentals – Lease payment for the new orthopedic Mako robot was unbudgeted.

Depreciation and Amortization – This expense is over budget for April but remains under budget year-to-date by \$83,982.

PROVIDER CLINICS. Revenue for the Clinics came in at \$3,244,931, over budget by \$612,253. The bottom line for the Clinics in April is a loss of \$415,941 compared to a loss of \$377,112 in the budget. The year-to-date loss for the Clinics is \$3,597,418, slightly over the budgeted loss of \$3,534,928. Clinic volumes increased in April, at 7,252 visits. Total Clinic expenses for the month are \$2,112,782, over budget by \$210,893. Year-to-date expenses are over budget by \$686,681. Salaries, benefits, physician fees, purchased services, supplies, other operating expenses and depreciation are over budget for April.

OUTLOOK FOR MAY. Gross patient revenue for May is projected to be close to \$25 million, significantly over the budget of \$20.3 million. Inpatient admissions and patient days remained lower during the first half of the month but have increased over the last week. LOS is currently down to 2.4 days and average daily census is currently at 13.3. Outpatient revenue is projected to be over budget by \$3.5 million. We continue to see increased volumes in outpatient departments with Births, ER visits, Surgeries, Clinic visits and ancillary departments projecting over budget.

Collections are projecting to just under \$12 million. Deductions of revenue are expected to be stable with continued high revenue and collections. Expenses are expected to be over budget in May, but similar to April. The estimated bottom line for May will be another significant gain if volumes remain high.

Critical Access. We have been notified by the Wyoming Department of Health of their readiness to issue our Critical Access license. We are working through some final items in preparation for the surveys, including policies, analysis of bed counts, and medical staff presentations and will then accept the new license. Once the license is issued, we will be surveyed by both the State licensing division and Joint Commission. We have engaged Cerner to start the build for the switch over of billing procedures to CAH which as an estimated timeline of 6-8 weeks. We continue to meet with the consultant, our auditors, and cost report preparer as we work through the process.

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

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

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



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

Unaudited Financial Statements

for

Ten months ended April 30, 2024

Certification Statement:

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

Certified by:

Tami Love

Chief Financial Officer

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MEMORIAL HOSPITAL OF SWEETWATER COUNTY

EXECUTIVE FINANCIAL SUMMARY

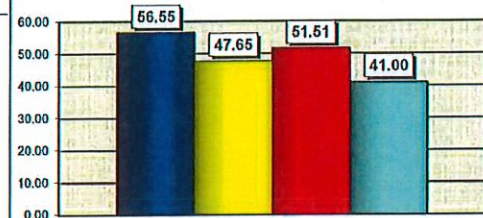
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Ten months ended April 30, 2024

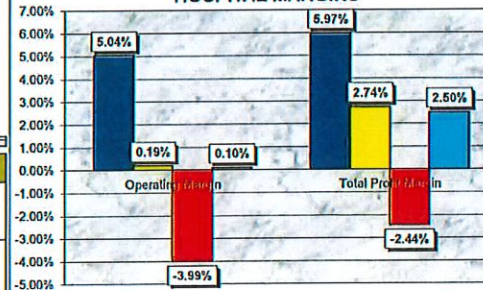
BALANCE SHEET

	YTD 4/30/2024	Prior FYE 6/30/2023
ASSETS		
Current Assets	\$46,428,056	\$38,972,749
Assets Whose Use is Limited	20,284,089	19,968,483
Property, Plant & Equipment (Net)	74,598,813	79,366,421
Other Assets	910,034	930,753
Total Unrestricted Assets	142,220,992	139,238,406
Restricted Assets	1,054,758	469,827
Total Assets	\$143,275,749	\$139,708,233
LIABILITIES AND NET ASSETS		
Current Liabilities	\$16,734,846	\$17,193,366
Long-Term Debt	23,793,187	25,114,116
Other Long-Term Liabilities	11,229,495	12,916,028
Total Liabilities	51,757,528	55,223,510
Net Assets	91,518,221	84,484,723
Total Liabilities and Net Assets	\$143,275,749	\$139,708,233

NET DAYS IN ACCOUNTS RECEIVABLE



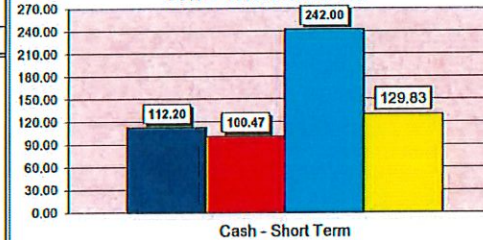
HOSPITAL MARGINS



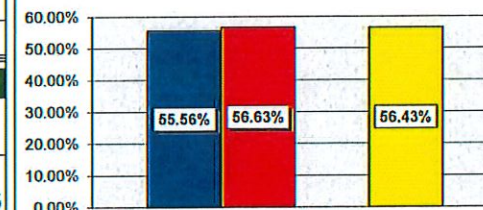
STATEMENT OF REVENUE AND EXPENSES - YTD

	04/30/24 ACTUAL	04/30/24 BUDGET	YTD ACTUAL	YTD BUDGET
Revenue:				
Gross Patient Revenues	\$23,499,639	\$20,857,345	\$225,101,988	\$207,850,888
Deductions From Revenue	(12,618,076)	(10,948,569)	(118,796,292)	(109,099,091)
Net Patient Revenues	10,881,563	9,908,776	106,305,696	98,751,798
Other Operating Revenue	163,765	138,860	1,725,858	1,759,034
Total Operating Revenues	11,045,328	10,047,636	108,031,553	100,510,832
Expenses:				
Salaries, Benefits & Contract Labor	5,865,493	5,605,905	56,997,493	56,007,694
Purchased Serv. & Physician Fees	1,081,641	814,471	9,611,359	8,796,335
Supply and Drug Expenses	1,980,870	1,790,561	18,490,824	17,721,539
Other Operating Expenses	880,675	883,987	8,765,877	8,991,782
Bad Debt Expense	0	0	0	0
Depreciation & Interest Expense	887,647	872,729	8,718,902	8,802,884
Total Expenses	10,696,326	9,967,652	102,584,455	100,320,234
NET OPERATING SURPLUS	349,002	79,984	5,447,099	190,598
Non-Operating Revenue/(Exp.)	(17,587)	22,941	1,001,469	2,562,771
TOTAL NET SURPLUS	\$331,415	\$102,925	\$6,448,568	\$2,753,369

DAYS CASH ON HAND



SALARY AND BENEFITS AS A PERCENTAGE OF TOTAL EXPENSES



KEY STATISTICS AND RATIOS

	04/30/24 ACTUAL	04/30/24 BUDGET	YTD ACTUAL	YTD BUDGET
Total Acute Patient Days	393	307	4,203	4,111
Average Acute Length of Stay	3.1	3.1	3.1	3.5
Total Emergency Room Visits	1,329	1,168	13,453	12,817
Outpatient Visits	8,674	7,756	83,356	76,492
Total Surgeries	196	154	1,821	1,572
Total Worked FTE's	482.44	491.43	464.75	491.43
Total Paid FTE's	520.70	540.03	513.06	540.03
Net Revenue Change from Prior Yr	26.75%	15.30%	18.59%	10.33%
EBIDA - 12 Month Rolling Average			11.52%	8.95%
Current Ratio			2.77	
Days Expense in Accounts Payable			39.14	

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

Budget	04/30/24
Prior Fiscal Year End	06/30/23
CLA \$50-\$100M Net Revenue	6/30/2020

FINANCIAL STRENGTH INDEX - 1.51









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
Ten months ended April 30, 2024

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  - DESIRED POSITION IN RELATION TO BENCHMARKS AND BUDGET

		Year to Date 4/30/2024	Budget 6/30/2024	Prior Fiscal Year End 06/30/23	CLA \$50-\$100 MM Net Revenue (See Note 1)
Profitability:					
Operating Margin		5.04%	0.24%	-3.99%	0.10%
Total Profit Margin		5.97%	0.31%	-2.44%	2.50%
Liquidity:					
Days Cash, All Sources **		112.20	129.83	100.47	242.00
Net Days in Accounts Receivable		56.55	45.02	51.51	41.00
Capital Structure:					
Average Age of Plant (Annualized)		11.74	11.32	10.70	12.00
Long Term Debt to Capitalization		21.19%	19.87%	23.43%	27.00%
Debt Service Coverage Ratio **		6.05	2.42	2.68	2.80
Productivity and Efficiency:					
Paid FTE's per Adjusted Occupied Bed		6.78	8.43	7.36	NA
Salary Expense per Paid FTE		\$103,433	\$86,892	\$103,824	NA
Salary and Benefits as a % of Total Operating Exp		55.56%	56.43%	56.63%	NA

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

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

Balance Sheet - Assets

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

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ROCK SPRINGS, WY

Ten months ended April 30, 2024

	Current Month 4/30/2024	Prior Month 3/31/2024	ASSETS Positive/ (Negative) Variance	Percentage Variance	Prior Year End 6/30/2023
Current Assets					
Cash and Cash Equivalents	\$15,690,053	\$13,223,373	\$2,466,679	18.65%	\$10,941,766
Gross Patient Accounts Receivable	50,507,984	50,189,520	318,464	0.63%	36,590,061
Less: Bad Debt and Allowance Reserves	(29,422,132)	(28,752,495)	(669,637)	-2.33%	(20,161,785)
Net Patient Accounts Receivable	21,085,852	21,437,026	(351,173)	-1.64%	16,428,276
Interest Receivable	0	0	0	0.00%	0
Other Receivables	4,945,245	4,380,035	565,211	12.90%	5,920,310
Inventories	2,866,322	3,917,099	(1,050,776)	-26.83%	3,831,105
Prepaid Expenses	1,840,583	1,732,581	108,001	6.23%	1,851,292
Due From Third Party Payers	0	0	0	0.00%	0
Due From Affiliates/Related Organizations	0	0	0	0.00%	0
Other Current Assets	0	0	0	0.00%	0
Total Current Assets	46,428,056	44,690,113	1,737,942	3.89%	38,972,749
Assets Whose Use is Limited					
Cash	80,271	(228,097)	308,367	-135.19%	84,123
Investments	0	0	0	0.00%	0
Bond Reserve/Debt Retirement Fund	0	0	0	0.00%	0
Trustee Held Funds - Project	1,204,910	1,015,330	189,581	18.67%	1,515,814
Trustee Held Funds - SPT	0	0	0	0.00%	0
Board Designated Funds	4,974,030	4,956,114	17,916	0.36%	4,343,674
Other Limited Use Assets	14,024,879	14,024,878	1	0.00%	14,024,873
Total Limited Use Assets	20,284,089	19,768,225	515,864	2.61%	19,968,483
Property, Plant, and Equipment					
Land and Land Improvements	4,583,118	4,583,118	0	0.00%	4,242,294
Building and Building Improvements	51,482,921	51,482,921	0	0.00%	49,931,920
Equipment	137,798,221	137,739,506	58,715	0.04%	135,715,602
Construction In Progress	1,265,916	1,091,507	174,410	15.98%	1,531,105
Capitalized Interest	0	0	0	0.00%	0
Gross Property, Plant, and Equipment	195,130,176	194,897,051	233,125	0.12%	191,420,921
Less: Accumulated Depreciation	(120,531,363)	(119,645,286)	(886,077)	-0.74%	(112,054,500)
Net Property, Plant, and Equipment	74,598,813	75,251,765	(652,952)	-0.87%	79,366,421
Other Assets					
Unamortized Loan Costs	910,034	916,021	(5,987)	-0.65%	930,753
Other	0	0	0	0.00%	0
Total Other Assets	910,034	916,021	(5,987)	-0.65%	930,753
TOTAL UNRESTRICTED ASSETS	142,220,992	140,626,124	1,594,867	1.13%	139,238,406
Restricted Assets	1,054,758	1,061,063	(6,306)	-0.59%	469,827
TOTAL ASSETS	\$143,275,749	\$141,687,188	\$1,588,562	1.12%	\$139,708,233

Balance Sheet - Liabilities and Net Assets

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

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ROCK SPRINGS, WY

Ten months ended April 30, 2024

	LIABILITIES AND FUND BALANCE				Prior Year End 6/30/2023
	Current Month 4/30/2024	Prior Month 3/31/2024	Positive/ (Negative) Variance	Percentage Variance	
Current Liabilities					
Accounts Payable	\$7,478,159	\$6,270,746	(\$1,207,413)	-19.25%	\$7,322,373
Notes and Loans Payable	0	0	0	0.00%	0
Accrued Payroll	1,730,037	1,538,187	(191,850)	-12.47%	2,077,791
Accrued Payroll Taxes	0	0	0	0.00%	0
Accrued Benefits	3,097,218	3,016,870	(80,348)	-2.66%	3,014,608
Accrued Pension Expense (Current Portion)	0	0	0	0.00%	0
Other Accrued Expenses	0	0	0	0.00%	0
Patient Refunds Payable	0	0	0	0.00%	0
Property Tax Payable	0	0	0	0.00%	0
Due to Third Party Payers	0	0	0	0.00%	0
Advances From Third Party Payers	0	0	0	0.00%	0
Current Portion of LTD	3,295,462	3,295,462	0	0.00%	3,295,462
Other Current Liabilities	1,133,970	948,447	(185,523)	-19.56%	1,483,132
Total Current Liabilities	16,734,846	15,069,713	(1,665,133)	-11.05%	17,193,366
Long Term Debt					
Bonds/Mortgages Payable	27,088,649	27,222,018	133,369	0.49%	28,409,579
Leases Payable	0	0	0	0.00%	0
Less: Current Portion Of Long Term Debt	3,295,462	3,295,462	0	0.00%	3,295,462
Total Long Term Debt (Net of Current)	23,793,187	23,926,555	133,369	0.56%	25,114,116
Other Long Term Liabilities					
Deferred Revenue	0	0	0	0.00%	0
Accrued Pension Expense (Net of Current)	0	0	0	0.00%	0
Other	11,229,495	11,497,808	268,313	2.33%	12,916,028
Total Other Long Term Liabilities	11,229,495	11,497,808	268,313	2.33%	12,916,028
TOTAL LIABILITIES	51,757,528	50,494,076	(1,263,452)	-2.50%	55,223,510
Net Assets:					
Unrestricted Fund Balance	82,059,650	82,059,650	0	0.00%	84,787,454
Temporarily Restricted Fund Balance	1,959,119	1,959,119	0	0.00%	1,959,119
Restricted Fund Balance	1,050,885	1,057,191	6,306	0.60%	465,954
Net Revenue/(Expenses)	6,448,568	6,117,152	N/A	N/A	(2,727,804)
TOTAL NET ASSETS	91,518,221	91,193,112	(325,110)	-0.36%	84,484,723
TOTAL LIABILITIES AND NET ASSETS	\$143,275,749	\$141,687,188	(\$1,588,562)	-1.12%	\$139,708,233

Statement of Revenue and Expense

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

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ROCK SPRINGS, WY

Ten months ended April 30, 2024

	CURRENT MONTH				Prior Year 04/30/23
	Actual 04/30/24	Budget 04/30/24	Positive (Negative) Variance	Percentage Variance	
Gross Patient Revenue					
Inpatient Revenue	\$3,666,923	\$4,118,211	(\$451,288)	-10.96%	\$2,991,123
Outpatient Revenue	16,587,785	14,106,457	2,481,329	17.59%	13,141,671
Clinic Revenue	3,244,931	2,632,677	612,253	23.26%	2,139,602
Specialty Clinic Revenue	0	0	0	0.00%	0
Total Gross Patient Revenue	23,499,639	20,857,345	2,642,294	12.67%	18,272,396
Deductions From Revenue					
Discounts and Allowances	(11,571,869)	(9,403,250)	(2,168,619)	-23.06%	(8,523,554)
Bad Debt Expense (Governmental Providers Only)	(1,043,471)	(1,339,277)	295,806	22.09%	(1,077,723)
Medical Assistance	(2,736)	(206,043)	203,307	98.67%	(101,640)
Total Deductions From Revenue	(12,618,076)	(10,948,569)	(1,669,507)	-15.25%	(9,702,917)
Net Patient Revenue	10,881,563	9,908,776	972,787	9.82%	8,569,479
Other Operating Revenue	163,765	138,860	24,905	17.93%	144,855
Total Operating Revenue	11,045,328	10,047,636	997,692	9.93%	8,714,334
Operating Expenses					
Salaries and Wages	4,125,869	4,142,560	16,691	0.40%	3,888,530
Fringe Benefits	1,369,376	1,224,726	(144,650)	-11.81%	1,369,964
Contract Labor	370,248	238,619	(131,630)	-55.16%	454,168
Physicians Fees	288,730	251,326	(37,404)	-14.88%	283,149
Purchased Services	792,911	563,144	(229,766)	-40.80%	519,259
Drug Expense	1,022,725	1,032,044	9,319	0.90%	827,453
Supply Expense	958,145	758,517	(199,628)	-26.32%	637,278
Utilities	118,540	127,763	9,223	7.22%	101,324
Repairs and Maintenance	380,073	417,834	37,761	9.04%	471,430
Insurance Expense	72,832	65,684	(7,148)	-10.88%	63,281
All Other Operating Expenses	271,601	255,219	(16,382)	-6.42%	183,485
Bad Debt Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Leases and Rentals	37,629	17,486	(20,143)	-115.20%	37,330
Depreciation and Amortization	887,647	872,729	(14,918)	-1.71%	924,151
Interest Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Total Operating Expenses	10,696,326	9,967,652	(728,674)	-7.31%	9,760,801
Net Operating Surplus/(Loss)	349,002	79,984	269,018	336.34%	(1,046,468)
Non-Operating Revenue:					
Contributions	0	0	0	0.00%	0
Investment Income	56,673	19,357	37,317	192.79%	27,547
Tax Subsidies (Except for GO Bond Subsidies)	0	0	0	0.00%	214
Tax Subsidies for GO Bonds	0	0	0	0.00%	0
Interest Expense (Governmental Providers Only)	(91,263)	(80,427)	10,836	-13.47%	(82,122)
Other Non-Operating Revenue/(Expenses)	17,003	84,012	(67,009)	-79.76%	568,576
Total Non Operating Revenue/(Expense)	(17,587)	22,941	(40,527)	-176.66%	514,215
Total Net Surplus/(Loss)	\$331,415	\$102,925	\$228,490	222.00%	(\$532,253)
Change in Unrealized Gains/(Losses) on Investments	0	0	0	0.00%	0
Increase/(Decrease in Unrestricted Net Assets	\$331,415	\$102,925	\$228,490	222.00%	(\$532,253)
Operating Margin	3.16%	0.80%			-12.01%
Total Profit Margin	3.00%	1.02%			-6.11%
EBIDA	11.20%	9.48%			-1.40%

Statement of Revenue and Expense

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

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ROCK SPRINGS, WY

Ten months ended April 30, 2024

	YEAR-TO-DATE				Prior Year 04/30/23
	Actual 04/30/24	Budget 04/30/24	Positive (Negative) Variance	Percentage Variance	
Gross Patient Revenue					
Inpatient Revenue	\$40,962,087	\$41,066,682	(\$104,595)	-0.25%	\$37,904,997
Outpatient Revenue	156,320,197	140,382,465	15,937,733	11.35%	128,496,864
Clinic Revenue	27,819,703	26,401,741	1,417,962	5.37%	22,577,331
Specialty Clinic Revenue	0	0	0	0.00%	0
Total Gross Patient Revenue	225,101,988	207,850,888	17,251,100	8.30%	188,979,192
Deductions From Revenue					
Discounts and Allowances	(104,092,321)	(93,716,905)	(10,375,416)	-11.07%	(87,776,231)
Bad Debt Expense (Governmental Providers Only)	(13,538,353)	(13,331,228)	(207,125)	-1.55%	(9,997,090)
Medical Assistance	(1,165,618)	(2,050,958)	885,340	43.17%	(1,894,182)
Total Deductions From Revenue	(118,796,292)	(109,099,091)	(9,697,202)	-8.89%	(99,667,503)
Net Patient Revenue	106,305,696	98,751,798	7,553,898	7.65%	89,311,689
Other Operating Revenue	1,725,858	1,759,034	(33,177)	-1.89%	1,788,315
Total Operating Revenue	108,031,553	100,510,832	7,520,721	7.48%	91,100,004
Operating Expenses					
Salaries and Wages	40,940,154	41,169,401	229,247	0.56%	38,280,836
Fringe Benefits	12,653,745	11,688,106	(965,639)	-8.26%	11,361,226
Contract Labor	3,403,594	3,150,187	(253,407)	-8.04%	4,785,147
Physicians Fees	2,947,469	2,925,164	(22,306)	-0.76%	2,802,388
Purchased Services	6,663,890	5,871,172	(792,718)	-13.50%	5,402,517
Drug Expense	9,695,389	10,007,947	312,558	3.12%	8,802,076
Supply Expense	8,795,435	7,713,592	(1,081,843)	-14.03%	7,338,144
Utilities	1,194,129	1,200,035	5,906	0.49%	1,142,036
Repairs and Maintenance	3,994,959	4,235,567	240,608	5.68%	4,380,853
Insurance Expense	696,294	644,085	(52,209)	-8.11%	637,735
All Other Operating Expenses	2,516,622	2,680,523	163,901	6.11%	2,341,512
Bad Debt Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Leases and Rentals	363,872	231,572	(132,300)	-57.13%	253,234
Depreciation and Amortization	8,718,902	8,802,884	83,982	0.95%	8,656,465
Interest Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Total Operating Expenses	102,584,455	100,320,234	(2,264,220)	-2.26%	96,184,171
Net Operating Surplus/(Loss)	5,447,099	190,598	5,256,501	2757.90%	(5,084,167)
Non-Operating Revenue:					
Contributions	0	0	0	0.00%	0
Investment Income	410,327	193,565	216,762	111.98%	219,685
Tax Subsidies (Except for GO Bond Subsidies)	0	0	0	0.00%	12,201
Tax Subsidies for GO Bonds	0	0	0	0.00%	0
Interest Expense (Governmental Providers Only)	(647,187)	(829,738)	182,551	-22.00%	(983,422)
Other Non-Operating Revenue/(Expense)	1,238,329	3,198,944	(1,960,615)	-61.29%	1,176,537
Total Non Operating Revenue/(Expense)	1,001,469	2,562,771	(1,561,302)	-60.92%	625,001
Total Net Surplus/(Loss)	\$6,448,568	\$2,753,369	\$3,695,199	134.21%	(\$4,559,167)
Change in Unrealized Gains/(Losses) on Investments	0	0	0	0.00%	0
Increase/(Decrease) in Unrestricted Net Assets	\$6,448,568	\$2,753,369	\$3,695,199	134.21%	(\$4,559,167)
Operating Margin	5.04%	0.19%			-5.58%
Total Profit Margin	5.97%	2.74%			-5.00%
EBIDA	13.11%	8.95%			3.93%

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

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	Actual 4/30/2024	Actual 3/31/2024	Actual 2/29/2024	Actual 1/31/2024	Actual 12/31/2023	Actual 11/30/2023
Gross Patient Revenue						
Inpatient Revenue	\$3,666,923	\$4,236,296	\$4,714,671	\$5,004,383	\$4,119,968	\$3,552,335
Inpatient Psych/Rehab Revenue						
Outpatient Revenue	\$16,587,785	\$15,459,637	\$15,607,056	\$16,628,567	\$17,109,573	\$15,516,757
Clinic Revenue	\$3,244,931	\$3,031,288	\$3,252,627	\$3,067,826	\$2,429,711	\$2,567,917
Specialty Clinic Revenue	\$0	\$0	\$0	\$0	\$0	\$0
Total Gross Patient Revenue	\$23,499,639	\$22,727,221	\$23,574,354	\$24,700,776	\$23,659,252	\$21,637,009
Deductions From Revenue						
Discounts and Allowances	\$11,571,869	\$10,397,914	\$9,922,170	\$12,184,470	\$11,030,342	\$10,060,276
Bad Debt Expense (Governmental Providers Only)	\$1,043,471	\$1,508,964	\$1,403,286	\$1,320,206	\$1,360,315	\$1,134,520
Charity Care	\$2,736	\$89,904	\$302,604	\$5,763	\$311,923	\$73,754
Total Deductions From Revenue	12,618,076	11,996,782	11,628,061	13,510,438	12,702,579	11,268,550
Net Patient Revenue	\$10,881,563	\$10,730,439	\$11,946,293	\$11,190,337	\$10,956,673	\$10,368,459
Other Operating Revenue	163,765	128,902	398,244	286,515	71,274	91,333
Total Operating Revenue	11,045,328	10,859,341	12,344,537	11,476,852	11,027,947	10,459,793
Operating Expenses						
Salaries and Wages	\$4,125,869	\$4,151,633	\$4,204,531	\$4,262,641	\$4,134,172	\$4,106,842
Fringe Benefits	\$1,369,376	\$1,751,548	\$1,345,949	\$1,307,203	\$1,293,553	\$1,186,780
Contract Labor	\$370,248	\$284,184	\$354,484	\$306,448	\$327,326	\$420,155
Physicians Fees	\$288,730	\$243,692	\$338,319	\$322,799	\$264,625	\$303,047
Purchased Services	\$792,911	\$773,560	\$705,125	\$688,536	\$681,342	\$582,899
Drug Expense	\$1,022,725	\$823,901	\$1,042,911	\$844,768	\$864,876	\$1,056,487
Supply Expense	\$958,145	\$853,767	\$1,193,600	\$997,801	\$911,134	\$769,388
Utilities	\$118,540	\$123,306	\$123,145	\$128,505	\$139,792	\$125,552
Repairs and Maintenance	\$380,073	\$359,688	\$433,508	\$460,691	\$356,186	\$421,619
Insurance Expense	\$72,832	\$71,334	\$71,184	\$70,566	\$70,566	\$70,566
All Other Operating Expenses	\$271,601	\$216,298	\$301,714	\$182,091	\$238,412	\$186,495
Bad Debt Expense (Non-Governmental Providers)						
Leases and Rentals	\$37,629	\$48,301	\$54,589	\$20,820	\$17,877	\$17,833
Depreciation and Amortization	\$887,647	\$885,626	\$878,266	\$880,262	\$867,058	\$841,307
Interest Expense (Non-Governmental Providers)						
Total Operating Expenses	\$10,696,326	\$10,586,737	\$11,047,324	\$10,473,131	\$10,166,918	\$10,088,970
Net Operating Surplus/(Loss)	\$349,002	\$272,604	\$1,297,214	\$1,003,721	\$861,029	\$370,822
Non-Operating Revenue:						
Contributions						
Investment Income	56,673	52,083	55,654	54,241	23,953	25,927
Tax Subsidies (Except for GO Bond Subsidies)						
Tax Subsidies for GO Bonds	0	0	0	0	0	0
Interest Expense (Governmental Providers Only)	(91,263)	(71,776)	(55,734)	(56,478)	(63,173)	(58,383)
Other Non-Operating Revenue/(Expenses)	17,003	593,094	512,608	15,618	15,618	10,043
Total Non Operating Revenue/(Expense)	(\$17,587)	\$573,399	\$512,528	\$13,381	(\$23,602)	(\$22,412)
Total Net Surplus/(Loss)	\$331,415	\$846,003	\$1,809,742	\$1,017,102	\$837,427	\$348,411
Change in Unrealized Gains/(Losses) on Investment	0	0	0	0	0	0
Increase/(Decrease in Unrestricted Net Assets	\$331,415	\$846,003	\$1,809,742	\$1,017,102	\$837,427	\$348,411
Operating Margin	3.16%	2.51%	10.61%	8.75%	7.81%	3.55%
Total Profit Margin	3.00%	7.79%	14.66%	8.86%	7.59%	3.33%
EBIDA	11.20%	10.67%	17.62%	16.42%	15.67%	11.59%

Actual 10/31/2023	Actual 9/30/2023	Actual 8/31/2023	Actual 7/31/2023	Actual 6/30/2023	Actual 5/31/2023
\$3,746,554	\$4,038,243	\$3,931,335	\$3,951,380	\$3,536,764	\$4,358,327
\$14,463,990	\$14,487,978	\$15,726,753	\$14,732,101	\$14,185,133	\$13,726,852
\$2,668,662	\$2,531,474	\$2,624,096	\$2,401,171	\$2,370,337	\$2,429,167
\$0	\$0	\$0	\$0	\$0	\$0
\$20,879,205	\$21,057,695	\$22,282,184	\$21,084,652	\$20,072,234	\$20,514,346
\$9,166,702	\$9,424,162	\$10,876,186	\$9,458,230	\$9,010,157	\$9,644,283
\$1,410,631	\$1,460,018	\$1,252,727	\$1,644,215	\$1,422,556	\$1,426,492
\$188,565	(\$1,270)	\$90,013	\$101,628	\$551,325	\$138,943
10,765,897	10,882,911	12,218,926	11,204,072	10,984,039	11,209,718
\$10,113,308	\$10,174,785	\$10,063,258	\$9,880,580	\$9,088,195	\$9,304,628
118,581	76,424	281,610	109,210	100,075	107,599
10,231,889	10,251,208	10,344,868	9,989,789	9,188,271	9,412,227
\$4,180,542	\$3,826,537	\$3,963,441	\$3,983,946	\$3,871,776	\$3,950,361
\$1,260,515	\$1,004,543	\$1,054,117	\$1,080,161	\$1,208,615	\$1,435,397
\$322,974	\$285,363	\$410,651	\$321,761	\$477,181	\$447,220
\$282,515	\$252,623	\$271,892	\$379,227	\$312,753	\$302,718
\$679,295	\$620,426	\$586,786	\$553,011	\$602,444	\$545,625
\$987,515	\$1,057,312	\$974,794	\$1,020,101	\$1,318,367	\$809,470
\$867,552	\$764,805	\$838,743	\$640,500	\$881,133	\$642,063
\$112,585	\$109,851	\$109,628	\$103,225	\$96,330	\$101,696
\$374,630	\$415,782	\$405,279	\$387,603	\$191,167	\$305,197
\$67,726	\$67,726	\$67,726	\$66,071	\$66,244	\$67,760
\$298,563	\$316,879	\$244,956	\$259,612	\$197,353	\$262,044
\$44,102	\$39,636	\$40,578	\$42,507	\$50,618	\$33,506
\$866,707	\$862,144	\$870,730	\$879,156	\$983,997	\$882,532
\$10,345,220	\$9,623,627	\$9,839,321	\$9,716,881	\$10,257,979	\$9,785,589
(\$113,331)	\$627,582	\$505,647	\$272,909	(\$1,069,708)	(\$373,362)
38,387	33,135	38,479	31,795	243,819	34,236
0	0	0	0	110	(579)
(58,584)	(59,321)	(43,939)	(88,534)	(113,407)	(84,131)
23,222	19,095	16,549	21,196	401,927	728,019
\$3,024	(\$7,091)	\$11,089	(\$35,543)	\$532,449	\$677,545
(\$110,307)	\$620,491	\$516,636	\$237,365	(\$537,259)	\$304,183
0	0	0	0	(158,659)	0
(\$110,307)	\$620,491	\$516,636	\$237,365	(\$695,918)	\$304,183
-1.11%	6.12%	4.89%	2.73%	-11.64%	-3.97%
-1.08%	6.05%	4.99%	2.38%	-5.85%	3.23%
7.36%	14.53%	13.30%	11.53%	-0.93%	5.41%

Statement of Cash Flows

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
ROCK SPRINGS, WY

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Ten months ended April 30, 2024

	CASH FLOW	
	Current Month 4/30/2024	Current Year-To-Date 4/30/2024
CASH FLOWS FROM OPERATING ACTIVITIES:		
Net Income (Loss)	\$331,415	\$6,448,568
Adjustments to Reconcile Net Income to Net Cash Provided by Operating Activities:		
Depreciation	887,647	8,718,902
(Increase)/Decrease in Net Patient Accounts Receivable	351,173	(4,657,576)
(Increase)/Decrease in Other Receivables	(565,211)	975,065
(Increase)/Decrease in Inventories	1,050,776	964,783
(Increase)/Decrease in Pre-Paid Expenses	(108,001)	10,709
(Increase)/Decrease in Other Current Assets	0	0
Increase/(Decrease) in Accounts Payable	1,207,413	155,787
Increase/(Decrease) in Notes and Loans Payable	0	0
Increase/(Decrease) in Accrued Payroll and Benefits	272,198	(265,144)
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	185,523	(349,162)
Net Cash Provided by Operating Activities:	3,612,933	12,001,930
CASH FLOWS FROM INVESTING ACTIVITIES:		
Purchase of Property, Plant and Equipment	(234,695)	(3,951,294)
(Increase)/Decrease in Limited Use Cash and Investments	(207,497)	(319,458)
(Increase)/Decrease in Other Limited Use Assets	(308,367)	3,852
(Increase)/Decrease in Other Assets	5,987	20,719
Net Cash Used by Investing Activities	(744,572)	(4,246,181)
CASH FLOWS FROM FINANCING ACTIVITIES:		
Increase/(Decrease) in Bond/Mortgage Debt	(133,369)	(1,320,929)
Increase/(Decrease) in Capital Lease Debt	0	0
Increase/(Decrease) in Other Long Term Liabilities	(268,313)	(1,686,533)
Net Cash Used for Financing Activities	(401,682)	(3,007,462)
(INCREASE)/DECREASE IN RESTRICTED ASSETS	(0)	(0)
Net Increase/(Decrease) in Cash	2,466,679	4,748,287
Cash, Beginning of Period	13,223,373	10,941,766
Cash, End of Period	\$15,690,053	\$15,690,053

Patient Statistics

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
 ROCK SPRINGS, WY
 Ten months ended April 30, 2024

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Current Month					Year-To-Date			
Actual 04/30/24	Budget 04/30/24	Positive/ (Negative) Variance	Prior Year 04/30/23	STATISTICS	Actual 04/30/24	Budget 04/30/24	Positive/ (Negative) Variance	Prior Year 04/30/23
Discharges								
126	100	26	100	Acute	1,335	1,171	164	1,171
126	100	26	100	Total Adult Discharges	1,335	1,171	164	1,171
27	31	(4)	31	Newborn	378	326	52	326
153	131	22	131	Total Discharges	1,713	1,497	216	1,497
Patient Days:								
393	307	86	307	Acute	4,203	4,111	92	4,111
393	307	86	307	Total Adult Patient Days	4,203	4,111	92	4,111
42	51	(9)	51	Newborn	611	555	56	555
435	358	77	358	Total Patient Days	4,814	4,666	148	4,666
Average Length of Stay (ALOS)								
3.1	3.1	0.0	3.1	Acute	3.1	3.5	(0.4)	3.5
3.1	3.1	0.0	3.1	Total Adult ALOS	3.1	3.5	(0.4)	3.5
1.6	1.6	(0.1)	1.6	Newborn ALOS	1.6	1.7	(0.1)	1.7
Average Daily Census (ADC)								
13.1	10.2	2.9	10.2	Acute	13.8	13.5	0.3	13.5
13.1	10.2	2.9	10.2	Total Adult ADC	13.8	13.5	0.3	13.5
1.4	1.7	(0.3)	1.7	Newborn	2.0	1.8	0.2	1.8
Emergency Room Statistics								
146	113	33	113	ER Visits - Admitted	1,410	1,189	221	1,189
1,183	1,055	128	1,055	ER Visits - Discharged	12,043	11,628	415	11,628
1,329	1,168	161	1,168	Total ER Visits	13,453	12,817	636	12,817
10.99%	9.67%		9.67%	% of ER Visits Admitted	10.48%	9.28%		9.28%
115.87%	113.00%		113.00%	ER Admissions as a % of Total	105.62%	101.54%		101.54%
Outpatient Statistics:								
8,674	7,756	918	7,756	Total Outpatients Visits	83,356	76,492	6,864	76,492
130	149	(19)	149	Observation Bed Days	1,372	1,313	59	1,313
6,657	5,131	1,526	5,131	Clinic Visits - Primary Care	61,064	52,800	8,264	52,800
595	502	93	502	Clinic Visits - Specialty Clinics	5,341	5,326	15	5,326
54	46	8	46	IP Surgeries	530	490	40	490
142	108	34	108	OP Surgeries	1,291	1,082	209	1,082
Productivity Statistics:								
482.44	491.43	(8.99)	462.16	FTE's - Worked	464.75	491.43	(26.68)	451.27
520.70	540.03	(19.33)	503.54	FTE's - Paid	513.06	540.03	(26.97)	499.42
1.3300	1.5000	(0.17)	1.5000	Case Mix Index -Medicare	1.4000	1.4896	(0.09)	1.4170
1.1400	1.2600	(0.12)	1.2600	Case Mix Index - All payers	1.1820	0.6731	0.51	1.2150

Accounts Receivable Tracking Report

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

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ROCK SPRINGS, WY

04/30/24

	<u>Current Month Actual</u>	<u>Current Month Target</u>
Gross Days in Accounts Receivable - All Services	65.12	56.57
Net Days in Accounts Receivable	56.55	55.45
Number of Gross Days in Unbilled Revenue	15.16	3.0 or <
Number of Days Gross Revenue in Credit Balances	0.00	< 1.0
Self Pay as a Percentage of Total Receivables	24.93%	N/A
Charity Care as a % of Gross Patient Revenue - Current Month	0.01%	0.99%
Charity Care as a % of Gross Patient Revenue - Year-To-Date	0.52%	0.99%
Bad Debts as a % of Gross Patient Revenue - Current Month	4.44%	6.42%
Bad Debts as a % of Gross Patient Revenue - Year-To-Date	6.01%	6.41%
Collections as a Percentage of Net Revenue - Current Month	98.91%	100% or >
Collections as a Percentage of Net Revenue - Year-To-Date	91.91%	100% or >
Percentage of Blue Cross Receivable > 90 Days	4.53%	< 10%
Percentage of Insurance Receivable > 90 Days	26.23%	< 15%
Percentage of Medicaid Receivable > 90 Days	39.63%	< 20%
Percentage of Medicare Receivable > 60 Days	33.51%	< 6%

Variance Analysis

MEMORIAL HOSPITAL OF SWEETWATER COUNTY ROCK SPRINGS, WYOMING Ten months ended April 30, 2024

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

	Current Month		Year-to-Date	
	Amount	%	Amount	%
Gross Patient Revenue	2,642,294	12.67%	17,251,100	8.30%
<p>Gross patient revenue is under budget for the month and over budget year to date. Patient statistics under budget in April were births. Average Daily Census is 13.1 in April which is over budget by 2.9.</p>				
Deductions from Revenue	(1,669,507)	-15.25%	(9,697,202)	-8.89%
<p>Deductions from revenue are over budget for April and over budget year to date. They are currently booked at 53.7% for April and 52.7% year to date. This number is monitored closely each month and fluctuates based on historical write-offs and current collection percentages. More detail included in the narrative.</p>				
Bad Debt Expense	295,806	22.09%	(207,125)	-1.55%
<p>Bad debt expense is booked at 4.4% for April and 6.0% year to date.</p>				
Charity Care	203,307	98.67%	885,340	43.17%
<p>Charity care yields a high degree of variability month over month and is dependent on patient needs. Patient Financial Services evaluates accounts consistently to determine when charity adjustments are appropriate in accordance with our Charity Care Policy.</p>				
Other Operating Revenue	24,905	17.93%	(33,177)	-1.89%
<p>Other Operating Revenue is over budget and under budget for the year.</p>				
Salaries and Wages	16,691	0.40%	229,247	0.56%
<p>Salary and Wages are under budget in April and are under budget year to date. Paid FTEs are under budget by 19.33 FTEs for the month and under 26.97 FTEs year to date.</p>				
Fringe Benefits	(144,650)	-11.81%	(965,639)	-8.26%
<p>Fringe benefits are over budget in April and over budget year to date.</p>				
Contract Labor	(131,630)	-55.16%	(253,407)	-8.04%
<p>Contract labor is over budget for April and over budget year to date. Med/Surg, L&D, ER and X-ray are over budget for the month.</p>				

Variance Analysis

MEMORIAL HOSPITAL OF SWEETWATER COUNTY ROCK SPRINGS, WYOMING Ten months ended April 30, 2024

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Monthly Variances in excess of \$10,000 as well as in excess of 10% explained below.

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

	Current Month		Year-to-Date	
	Amount	%	Amount	%
Physician Fees	(37,404)	-14.88%	(22,306)	-0.76%
Physician fees over budget in April and over budget year to date. Rad Onc, Cardio, Locums and Clinic Locums are over budget in April.				
Purchased Services	(229,766)	-40.80%	(792,718)	-13.50%
Purchased services are over budget for April and over budget year to date. Expenses over budget are consulting, bank card fee's, legal fee's, collection fee's and other purchased services.				
Supply Expense	(199,628)	-26.32%	(1,081,843)	-14.03%
Supplies are over budget for April and over budget year to date. Line items over budget include instruments, chargables, implants, other med/surg supplies, minor equipment and maintenance supplies.				
Repairs & Maintenance	37,761	9.04%	240,608	5.68%
Repairs and Maintenance are under budget for April and under budget year to date.				
All Other Operating Expenses	(16,382)	-6.42%	163,901	6.11%
This expense is over budget in April and under budget year to date. Other expenses over budget are freight and postage.				
Leases and Rentals	(20,143)	-115.20%	(132,300)	-57.13%
This expense is over budget for April and is over budget year to date due to the Mako robot rental.				
Depreciation and Amortization	(14,918)	-1.71%	83,982	0.95%
Depreciation is over budget for April and is under budget year to date				
BALANCE SHEET				
Cash and Cash Equivalents	\$2,466,679	18.65%		
Cash increased in April. Cash collections for April were \$10.7 million. Days Cash on Hand increased to 112 days.				
Gross Patient Accounts Receivable	\$318,464	0.63%		
This receivable increased in April due to higher revenue.				

Variance Analysis

MEMORIAL HOSPITAL OF SWEETWATER COUNTY ROCK SPRINGS, WYOMING Ten months ended April 30, 2024

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Monthly Variances in excess of \$10,000 as well as in excess of 10% explained below.

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

	Current Month		Year-to-Date	
	Amount	%	Amount	%
Bad Debt and Allowance Reserves	(669,637)	-2.33%		
Bad Debt and Allowances decreased.				
Other Receivables	565,211	12.90%		
Other Receivables increased in April due to the QRA accrual				
Prepaid Expenses	108,001	6.23%		
Prepaid expenses increased due to the normal activity in this account.				
Limited Use Assets	515,864	2.61%		
These assets increased due to debt service fund accrual				
Plant Property and Equipment	(652,952)	-0.87%		
The decrease in these assets is due to the the normal increase in accumulated depreciation.				
Accounts Payable	(1,207,413)	-19.25%		
This liability increased due to the normal activity in this account.				
Accrued Payroll	(191,850)	-12.47%		
This liability increased in April. The payroll accrual for April was 10 days.				
Accrued Benefits	(80,348)	-2.66%		
This liability increased in April with the normal accrual and usage of PTO.				
Other Current Liabilities	(185,523)	-19.56%		
This liability decreased for April due to the pmt accrual on the bonds				
Other Long Term Liabilities	268,313	2.33%		
This liability decreased with the payment on the leases				
Total Net Assets	370,822	-0.36%		

The net gain from operations for April is \$349,002



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

PROVIDER CLINICS

Unaudited Financial Statements

for

Ten months ended April 30, 2024

Certification Statement:

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

Certified by:

Tami Love

Chief Financial Officer

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Key Financial Ratios

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
ROCK SPRINGS, WY
Ten months ended April 30, 2024

PAGE 2

- DESIRED POSITION IN RELATION TO BENCHMARKS AND BUDGET

	Month to Date 4/30/2024	Year to Date 4/30/2024	Prior Fiscal Year End 06/30/23	MGMA Hospital Owned Rural
Profitability:				
Operating Margin	-24.51%	-22.59%	-30.52%	-36.58%
Total Profit Margin	-24.51%	-22.59%	-30.52%	-36.58%
Contractual Allowance %	49.21%	44.33%	44.16%	
Liquidity:				
Net Days in Accounts Receivable	58.54	55.78	37.74	39.58
Gross Days in Accounts Receivable	42.72	43.64	56.57	72.82
Productivity and Efficiency:				
Patient Visits Per Day	221.90	200.21	193.53	
Total Net Revenue per FTE	N/A	\$206,924	\$219,823	
Salary Expense per Paid FTE	N/A	\$175,881	\$103,824	
Salary and Benefits as a % of Net Revenue	104.43%	102.66%	56.63%	91.26%
Employee Benefits %	22.62%	20.77%	30.38%	6.10%

Statement of Revenue and Expense

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

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ROCK SPRINGS, WY

Ten months ended April 30, 2024

	CURRENT MONTH				Prior Year 04/30/23
	Actual 04/30/24	Budget 04/30/24	Positive (Negative) Variance	Percentage Variance	
Gross Patient Revenue					
Clinic Revenue	3,244,931	2,632,677	612,253	23.26%	2,139,602
Specialty Clinic Revenue	0	0	0	0.00%	0
Total Gross Patient Revenue	3,244,931	2,632,677	612,253	23.26%	2,139,602
Deductions From Revenue					
Discounts and Allowances	(1,596,933)	(1,146,045)	(450,888)	-39.34%	(929,422)
Total Deductions From Revenue	(1,596,933)	(1,146,045)	(450,888)	-39.34%	(929,422)
Net Patient Revenue	1,647,998	1,486,632	161,366	10.85%	1,210,180
Other Operating Revenue	48,843	38,145	10,698	28.05%	39,958
Total Operating Revenue	1,696,841	1,524,777	172,064	11.28%	1,250,137
Operating Expenses					
Salaries and Wages	1,445,111	1,337,772	(107,339)	-8.02%	1,250,382
Fringe Benefits	326,956	284,825	(42,130)	-14.79%	277,921
Contract Labor	0	0	0	0.00%	0
Physicians Fees	110,473	76,667	(33,806)	-44.10%	78,330
Purchased Services	7,543	4,006	(3,537)	-88.31%	1,797
Supply Expense	40,409	19,920	(20,489)	-102.86%	9,471
Utilities	815	1,691	876	51.81%	972
Repairs and Maintenance	4,634	7,315	2,682	36.66%	3,984
Insurance Expense	22,391	24,124	1,733	7.18%	16,284
All Other Operating Expenses	143,679	137,743	(5,935)	-4.31%	81,612
Bad Debt Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Leases and Rentals	4,400	3,787	(613)	-16.18%	3,608
Depreciation and Amortization	6,372	4,039	(2,334)	-57.78%	8,433
Interest Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Total Operating Expenses	2,112,782	1,901,889	(210,893)	-11.09%	1,732,794
Net Operating Surplus/(Loss)	(415,941)	(377,112)	(38,829)	10.30%	(482,657)
Total Net Surplus/(Loss)	(415,941)	(377,112)	(38,829)	10.30%	(482,657)
Change in Unrealized Gains/(Losses) on Investments	0	0	0	0.00%	0
Increase/(Decrease in Unrestricted Net Assets	(415,941)	(377,112)	(38,829)	10.30%	(482,657)
Operating Margin	-24.51%	-24.73%			-38.61%
Total Profit Margin	-24.51%	-24.73%			-38.61%
EBIDA	-24.14%	-24.47%			-37.93%

Statement of Revenue and Expense

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

ROCK SPRINGS, WY

Ten months ended April 30, 2024

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	YEAR-TO-DATE				Prior Year 04/30/23
	Actual 04/30/24	Budget 04/30/24	Positive (Negative) Variance	Percentage Variance	
Gross Patient Revenue					
Clinic Revenue	27,819,703	26,401,741	1,417,962	5.37%	22,577,331
Specialty Clinic Revenue	0	0	0	0.00%	0
Total Gross Patient Revenue	27,819,703	26,401,741	1,417,962	5.37%	22,577,331
Deductions From Revenue					
Discounts and Allowances	(12,333,297)	(11,480,721)	(852,576)	-7.43%	(10,044,137)
Total Deductions From Revenue	(12,333,297)	(11,480,721)	(852,576)	-7.43%	(10,044,137)
Net Patient Revenue	15,486,407	14,921,021	565,386	3.79%	12,533,194
Other Operating Revenue	440,256	381,450	58,806	15.42%	388,054
Total Operating Revenue	15,926,662	15,302,471	624,192	4.08%	12,921,248
Operating Expenses					
Salaries and Wages	13,537,351	13,218,009	(319,342)	-2.42%	12,182,942
Fringe Benefits	2,812,282	2,508,111	(304,172)	-12.13%	2,254,938
Contract Labor	0	0	0	0.00%	0
Physicians Fees	1,206,323	1,088,067	(118,256)	-10.87%	647,968
Purchased Services	65,863	39,531	(26,332)	-66.61%	79,939
Supply Expense	249,307	216,749	(32,558)	-15.02%	188,839
Utilities	10,235	16,550	6,316	38.16%	12,861
Repairs and Maintenance	48,640	72,971	24,331	33.34%	99,371
Insurance Expense	219,538	228,481	8,943	3.91%	164,909
All Other Operating Expenses	1,261,985	1,360,900	98,915	7.27%	1,215,548
Bad Debt Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Leases and Rentals	43,277	37,498	(5,780)	-15.41%	32,596
Depreciation and Amortization	69,280	50,533	(18,747)	-37.10%	81,707
Interest Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Total Operating Expenses	19,524,080	18,837,399	(686,682)	-3.65%	16,961,619
Net Operating Surplus/(Loss)	(3,597,418)	(3,534,928)	(62,490)	1.77%	(4,040,371)
Total Net Surplus/(Loss)	(3,597,418)	(3,534,928)	(62,490)	1.77%	(4,040,371)
Change in Unrealized Gains/(Losses) on Investments	0	0	0	0.00%	0
Increase/(Decrease) in Unrestricted Net Assets	(3,597,418)	(3,534,928)	(62,490)	1.77%	(4,040,371)
Operating Margin	-22.59%	-23.10%			-31.27%
Total Profit Margin	-22.59%	-23.10%			-31.27%
EBIDA	-22.15%	-22.77%			-30.64%

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

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	Actual 4/30/2024	Actual 3/31/2024	Actual 2/29/2024	Actual 1/31/2024	Actual 12/31/2023
Gross Patient Revenue					
Clinic Revenue	\$3,244,931	\$3,031,288	\$3,252,627	\$3,067,826	\$2,429,711
Specialty Clinic Revenue	\$0	\$0	\$0	\$0	\$0
Total Gross Patient Revenue	\$3,244,931	\$3,031,288	\$3,252,627	\$3,067,826	\$2,429,711
Deductions From Revenue					
Discounts and Allowances	(\$1,596,933)	(\$1,305,169)	(\$1,437,969)	(\$1,166,358)	(\$1,175,631)
Total Deductions From Revenue	(\$1,596,933)	(\$1,305,169)	(\$1,437,969)	(\$1,166,358)	(\$1,175,631)
Net Patient Revenue	\$1,647,998	\$1,726,120	\$1,814,659	\$1,901,467	\$1,254,080
Other Operating Revenue	\$48,843	\$37,502	\$44,208	\$40,957	\$39,646
Total Operating Revenue	1,696,841	1,763,622	1,858,867	1,942,425	1,293,727
Operating Expenses					
Salaries and Wages	\$1,445,111	\$1,402,323	\$1,417,161	\$1,401,458	\$1,401,351
Fringe Benefits	\$326,956	\$402,575	\$352,833	\$344,600	\$265,866
Contract Labor	\$0	\$0	\$0	\$0	\$0
Physicians Fees	\$110,473	\$95,316	\$184,805	\$142,870	\$104,507
Purchased Services	\$7,543	\$8,021	\$4,886	\$4,971	\$3,976
Supply Expense	\$40,409	\$15,937	\$20,431	\$35,784	\$18,050
Utilities	\$815	\$888	\$890	\$1,016	\$957
Repairs and Maintenance	\$4,634	\$4,634	\$2,942	\$3,991	\$6,565
Insurance Expense	\$22,391	\$22,391	\$22,391	\$22,391	\$22,391
All Other Operating Expenses	\$143,679	\$74,051	\$126,422	\$103,364	\$122,279
Bad Debt Expense (Non-Governmental Providers)					
Leases and Rentals	\$4,400	\$3,072	\$5,937	\$4,426	\$3,528
Depreciation and Amortization	\$6,372	\$6,673	\$6,773	\$7,332	\$6,757
Interest Expense (Non-Governmental Providers)					
Total Operating Expenses	\$2,112,782	\$2,035,880	\$2,145,470	\$2,072,203	\$1,956,227
Net Operating Surplus/(Loss)	(\$415,941)	(\$272,258)	(\$286,604)	(\$129,778)	(\$662,500)
Total Net Surplus/(Loss)	(\$415,941)	(\$272,258)	(\$286,604)	(\$129,778)	(\$662,500)
Change in Unrealized Gains/(Losses) on Investments	0	0	0	0	0
Increase/(Decrease in Unrestricted Net Assets)	(\$415,941)	(\$272,258)	(\$286,604)	(\$129,778)	(\$662,500)
Operating Margin	-24.51%	-15.44%	-15.42%	-6.68%	-51.21%
Total Profit Margin	-24.51%	-15.44%	-15.42%	-6.68%	-51.21%
EBIDA	-24.14%	-15.06%	-15.05%	-6.30%	-50.69%

Actual 11/30/2023	Actual 10/31/2023	Actual 9/30/2023	Actual 8/31/2023	Actual 7/31/2023	Actual 6/30/2023	Actual 5/31/2023	Actual 4/30/2023
\$2,567,917	\$2,668,662	\$2,531,474	\$2,624,096	\$2,401,171	\$2,370,337	\$2,429,167	\$2,139,602
\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
\$2,567,917	\$2,668,662	\$2,531,474	\$2,624,096	\$2,401,171	\$2,370,337	\$2,429,167	\$2,139,602
(\$1,127,929)	(\$1,203,232)	(\$1,097,845)	(\$1,132,244)	(\$1,089,987)	(\$966,079)	(\$1,078,791)	(\$929,422)
(\$1,127,929)	(\$1,203,232)	(\$1,097,845)	(\$1,132,244)	(\$1,089,987)	(\$966,079)	(\$1,078,791)	(\$929,422)
\$1,439,988	\$1,465,429	\$1,433,629	\$1,491,852	\$1,311,184	\$1,404,258	\$1,350,377	\$1,210,180
\$44,519	\$40,763	\$40,709	\$56,677	\$46,430	\$45,558	\$43,934	\$39,958
1,484,508	1,506,193	1,474,338	1,548,529	1,357,614	1,449,816	1,394,310	1,250,137
\$1,379,054	\$1,406,800	\$1,268,262	\$1,189,449	\$1,226,382	\$1,313,328	\$1,256,318	\$1,250,382
\$246,824	\$253,428	\$191,356	\$211,574	\$216,269	\$240,597	\$278,825	\$277,921
\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
\$141,747	\$122,560	\$48,223	\$124,955	\$130,867	\$87,845	\$62,293	\$78,330
\$6,143	\$8,953	\$7,449	\$11,119	\$2,801	\$10,728	\$1,912	\$1,797
\$22,062	\$25,675	\$32,976	\$20,843	\$17,142	\$23,512	\$14,520	\$9,471
\$957	\$954	\$1,866	\$946	\$946	\$946	\$914	\$972
\$8,071	\$3,411	\$7,881	\$3,298	\$3,213	\$4,762	\$2,745	\$3,984
\$22,391	\$22,391	\$22,391	\$20,205	\$20,205	\$20,205	\$20,205	\$16,284
\$94,799	\$172,653	\$153,968	\$97,070	\$173,700	\$89,444	\$162,897	\$81,612
\$4,556	\$4,912	\$3,828	\$2,865	\$5,754	\$3,154	\$3,586	\$3,608
\$6,757	\$6,757	\$6,791	\$7,097	\$7,971	\$8,480	\$8,360	\$8,433
\$1,933,361	\$2,028,495	\$1,744,991	\$1,689,421	\$1,805,250	\$1,803,001	\$1,812,574	\$1,732,794
(\$448,853)	(\$522,302)	(\$270,653)	(\$140,892)	(\$447,637)	(\$353,185)	(\$418,264)	(\$482,657)
(\$448,853)	(\$522,302)	(\$270,653)	(\$140,892)	(\$447,637)	(\$353,185)	(\$418,264)	(\$482,657)
0	0	0	0	0	0	0	0
(\$448,853)	(\$522,302)	(\$270,653)	(\$140,892)	(\$447,637)	(\$353,185)	(\$418,264)	(\$482,657)
-30.24%	-34.68%	-18.36%	-9.10%	-32.97%	-24.36%	-30.00%	-38.61%
-30.24%	-34.68%	-18.36%	-9.10%	-32.97%	-24.36%	-30.00%	-38.61%
-29.78%	-34.23%	-17.90%	-8.64%	-32.39%	-23.78%	-29.40%	-37.93%

Patient Statistics

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
 ROCK SPRINGS, WY
 Ten months ended April 30, 2024

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Current Month				STATISTICS	Year-To-Date			
Actual 04/30/24	Budget 04/30/24	Positive/ (Negative) Variance	Prior Year 04/30/23		Actual 04/30/24	Budget 04/30/24	Positive/ (Negative) Variance	Prior Year 04/30/23
				Outpatient Statistics:				
6,657	5,131	1,526	5,131	Clinic Visits - Primary Care	61,064	52,800	8,264	52,800
595	502	93	502	Clinic Visits - Specialty Clinics	5,341	5,326	15	5,326
				Productivity Statistics:				
81.43	80.17	1.26	73.91	FTE's - Worked	81.75	80.17	1.58	70.23
90.80	88.10	2.70	79.49	FTE's - Paid	92.11	88.10	4.01	78.59

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

PAYMENT SOURCE	NO. OF DISBURSEMENTS	AMOUNT
OPERATIONS (GENERAL FUND/KEYBANK)	698	9,338,816.50
CAPITAL EQUIPMENT (PLANT FUND)	5	265,837.18
CONSTRUCTION IN PROGRESS (BUILDING FUND)	3	189,556.43
PAYROLL APRIL 11, 2024		1,842,898.31
PAYROLL APRIL 25, 2024		1,776,464.15
TOTAL CASH OUTFLOW		<u>\$9,794,210.11</u>
CASH COLLECTIONS		10,763,445.00
INCREASE/DECREASE IN CASH		\$969,234.89

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

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

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

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

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

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

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

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

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
001226	2/8/2024	A. PLEASANT CONSTRUCTION, I	72,646.50	ONCOLOGY SUITE RENOVATION		
001227	2/8/2024	PLAN ONE/ARCHITECTS	7,280.00	LAB EXPANSION		
001228	2/22/2024	A. PLEASANT CONSTRUCTION, I	54,946.86	ONCOLOGY SUITE RENOVATION		
WF DEBT	2/20/2024	WF DEBT SERVICE	174,330.58	WF DEBT SERVICE		
FEBRUARY TOTALS					309,203.94	2,348,876.18

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
001229	3/7/2024	A. PLEASANT CONSTRUCTION, I	2,777.87	ONCOLOGY SUITE RENOVATION		
001229	3/7/2024	A. PLEASANT CONSTRUCTION, I	7,280.60	LAB EXPANSION		
001230	3/29/2024	PLAN ONE/ARCHITECTS	292.07	LAB EXPANSION		
001231	3/29/2024	A. PLEASANT CONSTRUCTION, I	196,395.40	ONCOLOGY SUITE RENOVATION		
WF DEBT	3/6/2024	WF DEBT SERVICE	186,000.00	WF DEBT SERVICE		
MARCH TOTALS					392,745.94	2,741,622.12

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
001232	4/12/2024	PLAN ONE/ARCHITECTS	1,693.00	LAB EXPANSION		
001232	4/12/2024	PLAN ONE/ARCHITECTS	2,340.38	ONCOLOGY SUITE RENOVATION		
WF DEBT	4/18/2024	WF DEBT SERVICE	185,523.05	WF DEBT SERVICE		
APRIL TOTALS					189,556.43	2,931,178.55

**PLANT FUND CASH DISBURSEMENTS
FISCAL YEAR 2024**

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

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

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

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

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
002613	11/2/2023	BRADEN SHIELDING SYSTEMS	17,915.00	SHIELDING VENDOR INSPECT FOR MRI UPGRADE		
002614	11/9/2023	AXON ENTERPRISES, INC.	24,400.84	BODY CAMERAS		
002615	11/9/2023	STERIS CORPORATION	79,698.33	INNOWAVE SONIC IRRIGATOR		
002616	11/9/2023	UL VERIFICATION SERVICES INC	25,700.00	PURE OHS ELECTRONIS EMP HEALTH RECORD		
002617	11/9/2023	WYOELCTRIC, INC	9,890.00	MRI UPGRADE BREAKER & ELECTRICAL		
002618	11/16/2023	BRADEN SHIELDING SYSTEMS	3,085.00	SHIELDING VENDOR INSPECT FOR MRI UPGRADE		
002619	11/16/2023	COMPUNET, INC.	13,310.00	VOIP E911 UPGRADE		
002620	11/22/2023	CDW GOVERNMENT LLC	10,762.14	NETWORK ANALYZER		
002621	11/22/2023	WYOELCTRIC, INC	63,137.75	LIGHTNING PROTECTION		
002622	11/30/2023	FISHER HEALTHCARE	9,662.60	PLATLET INCUBATOR AND AGITATOR		
002622	11/30/2023	FISHER HEALTHCARE	228.78	NEGATIVE 30 DEGREE C FREEZER		
002623	11/30/2023	INTERMOUNTAIN TRIMLIGHT (WI	7,500.00	PERMANENT LIGHTING		
NOVEMBER TOTALS					265,290.44	669,047.49

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

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

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
002633	2/1/2024	CERNER CORPORATION	18,963.25	HEATED ALSO TREATMENT CHAIRS		
002634	2/1/2024	CERNER CORPORATION	3,500.00	COMPUNET PURE STORAGE DEVICE EXPANSION		
002635	2/7/2024	DATEX-OHMEDA, INC.	21,240.00	ELEVATOR SMOKE CURTAIN		
002636	2/8/2024	FISHER HEALTHCARE	9,642.93	WHEELCHAIRS (4)		
002637	2/29/2024	TENACORE	138,434.40	GE VIVID 4D ULTRASOUND		
FEBRUARY TOTALS					191,780.58	1,109,390.77

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
002638	3/7/2024	FISHER HEALTHCARE	870.72	TWO DOOR REFRIGERATOR		
002638	3/7/2024	FISHER HEALTHCARE	6,678.72	FISHER REFRIGERATOR		
002639	3/7/2024	MINDRAY DS USA, INC.	97,070.01	ULTRASOUND MACHINE		
002639	3/7/2024	MINDRAY DS USA, INC.	80,625.01	TE X PLUS DIAGNOSTIC ULTRASOUND MACHINE		
002640	3/7/2024	PHILIPS HEALTHCARE	35,008.18	TRILOGY EV 300 NON-INVASIVE VENTILATORS (2)		
002641	3/7/2024	UNETIXS VASCULAR INC	39,995.00	MULTI LAB SERIES II ROODRA VASCULAR SYSTEM		
002642	3/15/2024	COMPUNET, INC.	48,022.44	FIBER CHANNEL INTERCONNECT HARDWARE		
002643	3/21/2024	DELL COMPUTER CORPORATION	13,126.30	DELL LAPTOP MONITOR DOCKING STATION (10)		
002644	3/29/2024	SERVCO	31,267.05	BOILER THROAT LINER		
002645	3/29/2024	VERTIV CORPORATION	73,807.66	UPS FOR LAB		
MARCH TOTALS					426,471.09	1,535,861.86

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
002646	4/3/2024	ENABLE ME, LLC	5,685.00	MAMMOGRAPHY BIOPSY CHAIR		
002647	4/3/2024	PHILIPS HEALTHCARE	162,180.00	PHILIPS EPIQ DIAGNOSTIC ULTRASOUND		
002648	4/12/2024	VERTIV CORPORATION	79,718.45	UPS FOR LAB		
002649	4/25/2024	EVIDENT SCIENTIFIC, INC.	6,014.73	MICROSCOPE		
002650	4/25/2024	MEDICAL POSITIONING, INC	12,239.00	ULTRASCAN TABLE		
APRIL TOTALS					265,837.18	1,801,699.04

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
GENERAL FUND DISBURSEMENTS
4/30/2024

Amount	Description
36,739.64	Advertising Total
14,906.41	Blood Total
3,500.00	Building Lease Total
103,872.90	Café Management Total
3,577.07	Cellular Telephone Total
52,609.39	Collection Agency Total
10,262.47	Computer Equipment Total
1,103,459.10	Contract Maintenance Total
292,113.57	Contract Personnel Total
22,199.56	Dental Insurance Total
7,977.28	Dialysis Supplies Total
625.00	Education & Travel Total
8,696.05	Employee Recruitment Total
152,626.37	Equipment Lease Total
8,308.05	Food Total
6,440.28	Freight Total
798.77	Fuel Total
3,533.93	Garbage Collection Total
1,276,336.86	Group Health Total
353,585.00	Hospital Supplies Total
34,766.75	Implant Supplies Total
654.00	Instruments Total
52,550.35	Insurance Premiums Total
127,821.77	Insurance Refund Total
96,260.78	Laboratory Services Total
78,873.31	Laboratory Supplies Total
251.40	Laundry Supplies Total
78,156.50	Legal Fees Total
340.00	Licenses & Taxes Total
18,600.00	Lithotripsy Service Total
28,754.29	Maintenance & Repair Total
18,247.51	Maintenance Supplies Total
6,102.00	Marketing & Promotional Supplies Total
8,741.00	Matching Funds Total
200.00	Membership Dues Total
3,964.57	MHSC Foundation Total
6,059.47	Minor Equipment Total
250.00	Monthly Pest Control Total
825.23	Non Medical Supplies Total
11,172.26	Office Supplies Total
1,970.00	Other Employee Benefits Total
3,598.34	Other Purchased Services Total
569.68	Oxygen Rental Total
1,540.34	Patient Refund Total
507.22	Payroll Deduction Total
6,763.24	Payroll Garnishment Total
3,700,000.00	Payroll Transfer Total

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MEMORIAL HOSPITAL OF SWEETWATER COUNTY
GENERAL FUND DISBURSEMENTS
4/30/2024

Check Number	Date	Vendor Check Name	Amount	Description
198460	4/18/2024	CHERRY ROAD MEDIA, INC.	918.00	Advertising
198378	4/12/2024	LAMAR ADVERTISING	437.00	Advertising
198510	4/18/2024	PILOT BUTTE BROADCASTING	650.00	Advertising
198400	4/12/2024	PINEDALE ROUNDUP	899.00	Advertising
198113	4/3/2024	ROCKET MINER	19.56	Advertising
198408	4/12/2024	ROCKET MINER	190.00	Advertising
198116	4/3/2024	ROYAL FLUSH ADVERTISING	729.75	Advertising
198410	4/12/2024	ROYAL FLUSH ADVERTISING	755.00	Advertising
198411	4/12/2024	SARATOGA SUN	1,800.00	Advertising
198117	4/3/2024	SCORPION HEALTHCARE LLC	2,849.00	Advertising
198524	4/18/2024	SCORPION HEALTHCARE LLC	5,734.16	Advertising
198129	4/3/2024	SWEETWATER NOW, LLC	2,900.00	Advertising
198425	4/12/2024	SWEETWATER NOW, LLC	1,475.00	Advertising
198437	4/12/2024	WYOMING NEWS SOURCE LLC	1,613.86	Advertising
198567	4/25/2024	BIG THICKET BROADCASTING	3,147.45	Advertising
198572	4/25/2024	BRIDGER VALLEY PIONEER	904.20	Advertising
198619	4/25/2024	KEMMERER GAZETTE	533.60	Advertising
198621	4/25/2024	LAMAR ADVERTISING	1,350.00	Advertising
198640	4/25/2024	PINEDALE ROUNDUP	1,000.00	Advertising
198649	4/25/2024	ROCKET MINER	19.56	Advertising
198650	4/25/2024	ROYAL FLUSH ADVERTISING	3,522.50	Advertising
198653	4/25/2024	SARATOGA SUN	1,080.00	Advertising
198671	4/25/2024	UINTA COUNTY HERALD	1,300.00	Advertising
198688	4/25/2024	WYOMING NEWS SOURCE LLC	1,590.00	Advertising
EFT000000008614	4/3/2024	GREEN RIVER STAR	42.00	Advertising
EFT000000008617	4/3/2024	ROCK SPRINGS SWEETWATER COUNTY AIRPORT	280.00	Advertising
EFT000000008639	4/25/2024	GREEN RIVER STAR	1,000.00	Advertising
198434	4/12/2024	VITALANT	6,022.30	Blood
198680	4/25/2024	VITALANT	8,884.11	Blood
198590	4/25/2024	CURRENT PROPERTIES, LLC	3,500.00	Building Lease
198672	4/25/2024	UNIDINE CORPORATION	103,872.90	Café Management
198139	4/3/2024	VERIZON WIRELESS, LLC	3,577.07	Cellular Telephone
198599	4/25/2024	EXPRESS RECOVERY SERVICES	34,367.13	Collection Agency
198681	4/25/2024	WAKEFIELD & ASSOCIATES, INC.	18,242.26	Collection Agency
198062	4/3/2024	CDW GOVERNMENT LLC	446.33	Computer Equipment
198338	4/12/2024	CDW GOVERNMENT LLC	10.58	Computer Equipment
198458	4/18/2024	CDW GOVERNMENT LLC	9,197.49	Computer Equipment
198578	4/25/2024	CDW GOVERNMENT LLC	608.07	Computer Equipment
198333	4/12/2024	BD DIAGNOSTICS	1,190.00	Contract Maintenance
198064	4/3/2024	CERNER CORP	25,111.68	Contract Maintenance
198341	4/12/2024	CERNER CORP	222,128.19	Contract Maintenance
198459	4/18/2024	CERNER CORP	402,061.26	Contract Maintenance
198066	4/3/2024	CLOUDLI COMMUNICATIONS INC.	57.85	Contract Maintenance
198146	4/3/2024	COMPUNET, INC.	8,800.00	Contract Maintenance
198339	4/12/2024	CSG, LLC	3,275.59	Contract Maintenance
198359	4/12/2024	FRONT RANGE MOBILE IMAGING, INC.	12,028.00	Contract Maintenance
198360	4/12/2024	GE HEALTHCARE	26,110.96	Contract Maintenance
198482	4/18/2024	HARMONY HEALTHCARE IT	7,727.00	Contract Maintenance
198369	4/12/2024	INOVALON PROVIDER INC.	995.70	Contract Maintenance
198489	4/18/2024	ISI WATER CHEMISTRIES	33.09	Contract Maintenance
198099	4/3/2024	MERGE HEALTHCARE SOLUTIONS, INC.	11,460.49	Contract Maintenance
198505	4/18/2024	NATIONAL BUSINESS INSTITUTE	1,187.00	Contract Maintenance
198104	4/3/2024	NETDAIS	6,450.00	Contract Maintenance

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
GENERAL FUND DISBURSEMENTS
4/30/2024

198393	4/12/2024	NETDAIS	17,541.58	Contract Maintenance
198506	4/18/2024	NUANCE COMMUNICATIONS, INC	1,800.00	Contract Maintenance
198108	4/3/2024	PACT STUDIOS, LLC	38,349.62	Contract Maintenance
198110	4/3/2024	PROVIDER RESOURCES, INC.	2,441.00	Contract Maintenance
198112	4/3/2024	RL DATIX	421.00	Contract Maintenance
198415	4/12/2024	SPECIALTY INCENTIVES, INC.	4,237.00	Contract Maintenance
198431	4/12/2024	UNITED AUDIT SYSTEMS, INC.	11,757.75	Contract Maintenance
198433	4/12/2024	VANDERBILT	4,414.40	Contract Maintenance
198544	4/18/2024	WYODATA SECURITY INC.	1,795.00	Contract Maintenance
198568	4/25/2024	BISCOM	1,836.07	Contract Maintenance
198580	4/25/2024	CERNER CORP	4,374.80	Contract Maintenance
198585	4/25/2024	CONSUMER FUSION INC.	1,750.00	Contract Maintenance
198608	4/25/2024	GREENSHADES SOFTWARE	3,300.00	Contract Maintenance
198613	4/25/2024	ISI WATER CHEMISTRIES	2,679.90	Contract Maintenance
198632	4/25/2024	NEUROMONITORING TECHNOLOGIES	600.00	Contract Maintenance
198634	4/25/2024	NUANCE COMMUNICATIONS, INC	105.00	Contract Maintenance
198642	4/25/2024	PROGRESS SOFTWARE CORPORATION	600.60	Contract Maintenance
198644	4/25/2024	QUADRAMED	243,140.30	Contract Maintenance
198647	4/25/2024	REMI CORPORATION	8,923.33	Contract Maintenance
198673	4/25/2024	UNITED AUDIT SYSTEMS, INC.	13,149.75	Contract Maintenance
198679	4/25/2024	VISONEX, LLC	2,442.00	Contract Maintenance
EFT00000008642	4/25/2024	STATE FIRE DC SPECIALTIES	2,386.25	Contract Maintenance
W/T	4/22/2024	TRIZETTO FEE	247.68	Contract Maintenance
W/T	4/5/2024	ZENITH	420.42	Contract Maintenance
W/T	4/22/2024	TRIZETTO FEE	6,128.84	Contract Maintenance
198074	4/3/2024	ELWOOD STAFFING SERVICES, INC	3,497.00	Contract Personnel
198352	4/12/2024	ELWOOD STAFFING SERVICES, INC	2,285.50	Contract Personnel
198079	4/3/2024	FOCUSONE SOLUTIONS LLC	69,843.00	Contract Personnel
198358	4/12/2024	FOCUSONE SOLUTIONS LLC	72,574.75	Contract Personnel
198475	4/18/2024	FOCUSONE SOLUTIONS LLC	76,871.25	Contract Personnel
198597	4/25/2024	ELWOOD STAFFING SERVICES, INC	1,568.57	Contract Personnel
198603	4/25/2024	FOCUSONE SOLUTIONS LLC	64,753.50	Contract Personnel
198652	4/25/2024	SARAH ROTH	720.00	Contract Personnel
198468	4/18/2024	DELTA DENTAL	22,199.56	Dental Insurance
198080	4/3/2024	FRESENIUS USA MARKETING, INC.	3,374.87	Dialysis Supplies
198477	4/18/2024	FRESENIUS USA MARKETING, INC.	3,266.75	Dialysis Supplies
198085	4/3/2024	HENRY SCHEIN INC	367.69	Dialysis Supplies
198366	4/12/2024	HENRY SCHEIN INC	304.57	Dialysis Supplies
198485	4/18/2024	HENRY SCHEIN INC	134.16	Dialysis Supplies
EFT00000008616	4/3/2024	HENRY SCHEIN INC	529.24	Dialysis Supplies
198462	4/18/2024	CNA SURETY	150.00	Education & Travel
198484	4/18/2024	HFMA	475.00	Education & Travel
198365	4/12/2024	HEALTH ECAREERS	3,510.00	Employee Recruitment
198367	4/12/2024	HOLIDAY INN - ROCK SPRINGS	1,424.00	Employee Recruitment
198088	4/3/2024	INSIGHT SCREENING LLC	1,899.55	Employee Recruitment
198527	4/18/2024	STATE OF WYOMING	160.00	Employee Recruitment
198558	4/25/2024	ALTITUDE ANALYSIS	390.00	Employee Recruitment
EFT00000008623	4/12/2024	SAFE SECURE TESTING INC.	1,312.50	Employee Recruitment
198082	4/3/2024	GE HEALTHCARE FINANCIAL SERVICES	47,164.93	Equipment Lease
198362	4/12/2024	GE HEALTHCARE FINANCIAL SERVICES	7,472.32	Equipment Lease
198095	4/3/2024	MAKO SURGICAL CORP	15,200.00	Equipment Lease
198495	4/18/2024	MAKO SURGICAL CORP	15,200.00	Equipment Lease
198105	4/3/2024	NEWLANE FINANCE COMPANY	59.58	Equipment Lease
198394	4/12/2024	NEWLANE FINANCE COMPANY	54.99	Equipment Lease

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198512	4/18/2024	PITNEY BOWES INC	241.08	Equipment Lease
198119	4/3/2024	SHADOW MOUNTAIN WATER CO ,WY	150.00	Equipment Lease
198413	4/12/2024	SHADOW MOUNTAIN WATER CO ,WY	465.00	Equipment Lease
198137	4/3/2024	US BANK EQUIPMENT FINANCE	946.30	Equipment Lease
198432	4/12/2024	US BANK EQUIPMENT FINANCE	891.88	Equipment Lease
198540	4/18/2024	US BANK EQUIPMENT FINANCE	1,424.06	Equipment Lease
198587	4/25/2024	COPIER & SUPPLY COMPANY	9,385.02	Equipment Lease
198605	4/25/2024	GE HEALTHCARE FINANCIAL SERVICES	47,164.93	Equipment Lease
198633	4/25/2024	NEWLANE FINANCE COMPANY	59.58	Equipment Lease
198655	4/25/2024	SHADOW MOUNTAIN WATER CO ,WY	253.34	Equipment Lease
198656	4/25/2024	SIEMENS FINANCIAL SERVICES, INC	6,493.36	Equipment Lease
198075	4/3/2024	F B MCFADDEN WHOLESALE	338.75	Food
198354	4/12/2024	F B MCFADDEN WHOLESALE	2,036.30	Food
198472	4/18/2024	F B MCFADDEN WHOLESALE	4,205.90	Food
198600	4/25/2024	F B MCFADDEN WHOLESALE	1,727.10	Food
198076	4/3/2024	FED EX	160.33	Freight
198355	4/12/2024	FED EX	70.63	Freight
198473	4/18/2024	FED EX	96.65	Freight
198134	4/3/2024	TRIOSE, INC	1,431.22	Freight
198430	4/12/2024	TRIOSE, INC	1,273.33	Freight
198538	4/18/2024	TRIOSE, INC	1,590.03	Freight
198670	4/25/2024	TRIOSE, INC	1,818.09	Freight
198406	4/12/2024	BAILEY ENTERPRISES	798.77	Fuel
EFT00000008626	4/12/2024	WWS - ROCK SPRINGS	3,533.93	Garbage Collection
W/T	4/23/2024	FURTHER ADMIN FEE	325.00	Group Health
W/T	4/25/2024	FURTHER FLEX 4/24/24	3,845.66	Group Health
W/T	4/11/2024	FURTHER FLEX 4/10/24	4,258.97	Group Health
W/T	4/4/2024	FURTHER FLEX 4/3/24	4,268.27	Group Health
W/T	4/18/2024	FURTHER FLEX 4/17/24	6,069.85	Group Health
W/T	4/26/2024	BLUE CROSS BLUE SHIELD 4/19/24	130,017.13	Group Health
W/T	4/12/2024	BLUE CROSS BLUE SHIELD 4/5/24	135,294.88	Group Health
W/T	4/19/2024	BLUE CROSS BLUE SHIELD 4/12/24	179,502.40	Group Health
W/T	4/5/2024	BLUE CROSS BLUE SHIELD 3/29/24	812,754.70	Group Health
198115	4/3/2024	ABBOTT NUTRITION	45.00	Hospital Supplies
198440	4/18/2024	AESCLAP INC	129.45	Hospital Supplies
198326	4/12/2024	APPLIED MEDICAL	750.00	Hospital Supplies
198444	4/18/2024	APPLIED MEDICAL	5,785.00	Hospital Supplies
198053	4/3/2024	ARTHREX INC.	2,160.40	Hospital Supplies
198327	4/12/2024	ARTHREX INC.	1,760.00	Hospital Supplies
198447	4/18/2024	ARTHREX INC.	2,007.50	Hospital Supplies
198448	4/18/2024	BARD MEDICAL	222.00	Hospital Supplies
198055	4/3/2024	BAXTER HEALTHCARE CORP/IV	5,230.93	Hospital Supplies
198331	4/12/2024	BAYER HEALTHCARE LLC	866.25	Hospital Supplies
198335	4/12/2024	BG MEDICAL LLC	2,125.00	Hospital Supplies
198059	4/3/2024	BOSTON SCIENTIFIC CORP	438.55	Hospital Supplies
198451	4/18/2024	BOSTON SCIENTIFIC CORP	2,272.92	Hospital Supplies
198061	4/3/2024	CARDINAL HEALTH/V. MUELLER	1,541.69	Hospital Supplies
198337	4/12/2024	CARDINAL HEALTH/V. MUELLER	22,808.71	Hospital Supplies
198455	4/18/2024	CARDINAL HEALTH/V. MUELLER	58,234.18	Hospital Supplies
198344	4/12/2024	COASTAL LIFE SYSTEMS,INC.	219.98	Hospital Supplies
198068	4/3/2024	CONE INSTRUMENTS	400.31	Hospital Supplies
198346	4/12/2024	CONE INSTRUMENTS	196.24	Hospital Supplies
198347	4/12/2024	COOK MEDICAL INCORPORATED	240.30	Hospital Supplies
198464	4/18/2024	COOK MEDICAL INCORPORATED	474.00	Hospital Supplies

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198470	4/18/2024	DJ ORTHOPEDICS, LLC	109.24	Hospital Supplies
198471	4/18/2024	EXPAND-A-BAND, LLC	126.00	Hospital Supplies
198357	4/12/2024	FISHER & PAYKEL HEALTHCARE, INC	654.47	Hospital Supplies
198363	4/12/2024	GENERAL HOSPITAL SUPPLY CORPORATION	240.00	Hospital Supplies
198084	4/3/2024	HEALTHCARE LOGISTICS INC	11.58	Hospital Supplies
198483	4/18/2024	HEALTHCARE LOGISTICS INC	10.30	Hospital Supplies
198086	4/3/2024	HOLOGIC, INC.	1,333.75	Hospital Supplies
198090	4/3/2024	J & J HEALTH CARE SYSTEMS INC	13,035.71	Hospital Supplies
198372	4/12/2024	J & J HEALTH CARE SYSTEMS INC	4,706.96	Hospital Supplies
198490	4/18/2024	J & J HEALTH CARE SYSTEMS INC	16,611.32	Hospital Supplies
198092	4/3/2024	KARL STORZ ENDOSCOPY-AMERICA	71.40	Hospital Supplies
198375	4/12/2024	KARL STORZ ENDOSCOPY-AMERICA	6,604.33	Hospital Supplies
198532	4/18/2024	LEICA BIOSYSTEMS RICHMOND	336.28	Hospital Supplies
198504	4/18/2024	M V A P MEDICAL SUPPLIES, INC.	453.20	Hospital Supplies
198096	4/3/2024	MARKET LAB, INC	816.84	Hospital Supplies
198097	4/3/2024	MASIMO AMERICAS, INC.	1,528.00	Hospital Supplies
198384	4/12/2024	MASIMO AMERICAS, INC.	1,470.00	Hospital Supplies
198496	4/18/2024	MASIMO AMERICAS, INC.	880.00	Hospital Supplies
198385	4/12/2024	MCKESSON MEDICAL-SURGICAL	498.34	Hospital Supplies
198098	4/3/2024	MEDLINE INDUSTRIES INC	15,809.30	Hospital Supplies
198387	4/12/2024	MEDLINE INDUSTRIES INC	16,535.62	Hospital Supplies
198499	4/18/2024	MEDLINE INDUSTRIES INC	48,487.13	Hospital Supplies
198100	4/3/2024	MES	51.45	Hospital Supplies
198502	4/18/2024	MES	80.95	Hospital Supplies
198103	4/3/2024	NATUS MEDICAL INC	329.00	Hospital Supplies
198507	4/18/2024	OWENS & MINOR 90005430	307.66	Hospital Supplies
198399	4/12/2024	PERFORMANCE HEALTH SUPPLY INC	65.97	Hospital Supplies
198109	4/3/2024	PREFERRED MEDICAL PRODUCTS	56.46	Hospital Supplies
198405	4/12/2024	RADIOMETER AMERICA INC	1,244.08	Hospital Supplies
198518	4/18/2024	RADIOMETER AMERICA INC	2,650.25	Hospital Supplies
198519	4/18/2024	RESMED CORP	299.00	Hospital Supplies
198124	4/3/2024	STERIS CORPORATION	1,202.21	Hospital Supplies
198422	4/12/2024	STERIS CORPORATION	1,318.43	Hospital Supplies
198528	4/18/2024	STERIS CORPORATION	1,334.69	Hospital Supplies
198429	4/12/2024	TRI-ANIM HEALTH SERVICES INC	1,858.37	Hospital Supplies
198536	4/18/2024	TRI-ANIM HEALTH SERVICES INC	617.32	Hospital Supplies
198539	4/18/2024	TSI INCORPORATED	2,310.00	Hospital Supplies
198138	4/3/2024	VERATHON INC.	431.00	Hospital Supplies
198542	4/18/2024	VERATHON INC.	651.00	Hospital Supplies
198555	4/25/2024	AESCLAP INC	307.68	Hospital Supplies
198560	4/25/2024	APPLIED MEDICAL	192.00	Hospital Supplies
198564	4/25/2024	B BRAUN MEDICAL INC.	875.00	Hospital Supplies
198571	4/25/2024	BOSTON SCIENTIFIC CORP	3,106.86	Hospital Supplies
198574	4/25/2024	CARDINAL HEALTH/V. MUELLER	7,015.58	Hospital Supplies
198576	4/25/2024	CAREFUSION 2200 INC	1,200.00	Hospital Supplies
198582	4/25/2024	COASTAL LIFE SYSTEMS, INC.	442.50	Hospital Supplies
198593	4/25/2024	DIAGNOSTIGA STAGO INC	916.96	Hospital Supplies
198595	4/25/2024	DJ ORTHOPEDICS, LLC	177.32	Hospital Supplies
198602	4/25/2024	FISHER & PAYKEL HEALTHCARE, INC	228.05	Hospital Supplies
198614	4/25/2024	J & J HEALTH CARE SYSTEMS INC	7,412.28	Hospital Supplies
198630	4/25/2024	M V A P MEDICAL SUPPLIES, INC.	23.50	Hospital Supplies
198626	4/25/2024	MEDLINE INDUSTRIES INC	57,960.07	Hospital Supplies
198638	4/25/2024	PERFORMANCE HEALTH SUPPLY INC	114.22	Hospital Supplies
198648	4/25/2024	RESPIRONICS	165.00	Hospital Supplies

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198660	4/25/2024	STERIS CORPORATION	8,947.95	Hospital Supplies
198669	4/25/2024	TRI-ANIM HEALTH SERVICES INC	957.03	Hospital Supplies
198676	4/25/2024	VAPOTHERM INC.	1,272.00	Hospital Supplies
198677	4/25/2024	VERATHON INC.	686.01	Hospital Supplies
EFT000000008612	4/3/2024	BREG INC	446.05	Hospital Supplies
EFT000000008615	4/3/2024	HARDY DIAGNOSTICS	1,184.12	Hospital Supplies
EFT000000008618	4/3/2024	STRYKER INSTRUMENTS	199.61	Hospital Supplies
EFT000000008621	4/12/2024	HARDY DIAGNOSTICS	178.40	Hospital Supplies
EFT000000008622	4/12/2024	OVATION MEDICAL	170.70	Hospital Supplies
EFT000000008628	4/18/2024	BEEKLEY CORPORATION	182.00	Hospital Supplies
EFT000000008629	4/18/2024	BREG INC	818.89	Hospital Supplies
EFT000000008631	4/18/2024	HARDY DIAGNOSTICS	784.84	Hospital Supplies
EFT000000008633	4/18/2024	OVATION MEDICAL	899.00	Hospital Supplies
EFT000000008638	4/25/2024	BREG INC	252.10	Hospital Supplies
EFT000000008640	4/25/2024	HARDY DIAGNOSTICS	950.09	Hospital Supplies
EFT000000008643	4/25/2024	STRYKER INSTRUMENTS	2,473.17	Hospital Supplies
198072	4/3/2024	CTM BIOMEDICAL, LLC	5,091.50	Implant Supplies
198350	4/12/2024	CTM BIOMEDICAL, LLC	5,091.50	Implant Supplies
198395	4/12/2024	OSSIO, INC.	7,685.00	Implant Supplies
198397	4/12/2024	PARAGON 28 INC.	6,693.75	Implant Supplies
198428	4/12/2024	TREACE MEDICAL CONCEPTS, INC.	7,710.00	Implant Supplies
198637	4/25/2024	PARAGON 28 INC.	2,495.00	Implant Supplies
198065	4/3/2024	CIVCO MEDICAL INSTRUMENTS	654.00	Instruments
198136	4/3/2024	PROVIDENT LIFE & ACCIDENT	31,985.35	Insurance Premiums
198439	4/18/2024	ACUITY, A MUTUAL INSURANCE COMPANY	20,565.00	Insurance Premiums
198173	4/8/2024	INSURANCE REFUND	157.02	Insurance Refund
198200	4/8/2024	INSURANCE REFUND	18.59	Insurance Refund
198201	4/8/2024	INSURANCE REFUND	25.49	Insurance Refund
198202	4/8/2024	INSURANCE REFUND	25.49	Insurance Refund
198204	4/8/2024	INSURANCE REFUND	28.38	Insurance Refund
198235	4/8/2024	INSURANCE REFUND	224.93	Insurance Refund
198250	4/8/2024	INSURANCE REFUND	50.74	Insurance Refund
198252	4/8/2024	INSURANCE REFUND	8.70	Insurance Refund
198180	4/8/2024	INSURANCE REFUND	4,635.38	Insurance Refund
198199	4/8/2024	INSURANCE REFUND	15.80	Insurance Refund
198294	4/8/2024	INSURANCE REFUND	783.93	Insurance Refund
198212	4/8/2024	INSURANCE REFUND	323.66	Insurance Refund
198213	4/8/2024	INSURANCE REFUND	19.66	Insurance Refund
198175	4/8/2024	INSURANCE REFUND	86.66	Insurance Refund
198178	4/8/2024	INSURANCE REFUND	64.60	Insurance Refund
198184	4/8/2024	INSURANCE REFUND	4.47	Insurance Refund
198242	4/8/2024	INSURANCE REFUND	25.49	Insurance Refund
198257	4/8/2024	INSURANCE REFUND	215.90	Insurance Refund
198162	4/8/2024	INSURANCE REFUND	3,015.54	Insurance Refund
198167	4/8/2024	INSURANCE REFUND	311.00	Insurance Refund
198169	4/8/2024	INSURANCE REFUND	231.80	Insurance Refund
198172	4/8/2024	INSURANCE REFUND	171.60	Insurance Refund
198174	4/8/2024	INSURANCE REFUND	129.15	Insurance Refund
198177	4/8/2024	INSURANCE REFUND	66.40	Insurance Refund
198181	4/8/2024	INSURANCE REFUND	747.73	Insurance Refund
198185	4/8/2024	INSURANCE REFUND	129.15	Insurance Refund
198188	4/8/2024	INSURANCE REFUND	885.40	Insurance Refund
198203	4/8/2024	INSURANCE REFUND	25.50	Insurance Refund
198205	4/8/2024	INSURANCE REFUND	106.60	Insurance Refund

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198206	4/8/2024	INSURANCE REFUND	106.60	Insurance Refund
198207	4/8/2024	INSURANCE REFUND	109.20	Insurance Refund
198254	4/8/2024	INSURANCE REFUND	839.16	Insurance Refund
198275	4/8/2024	INSURANCE REFUND	220.60	Insurance Refund
198276	4/8/2024	INSURANCE REFUND	266.96	Insurance Refund
198277	4/8/2024	INSURANCE REFUND	224.40	Insurance Refund
198278	4/8/2024	INSURANCE REFUND	224.40	Insurance Refund
198279	4/8/2024	INSURANCE REFUND	224.40	Insurance Refund
198280	4/8/2024	INSURANCE REFUND	906.31	Insurance Refund
198281	4/8/2024	INSURANCE REFUND	153.17	Insurance Refund
198287	4/8/2024	INSURANCE REFUND	638.40	Insurance Refund
198289	4/8/2024	INSURANCE REFUND	172.92	Insurance Refund
198292	4/8/2024	INSURANCE REFUND	1,596.00	Insurance Refund
198295	4/8/2024	INSURANCE REFUND	226.10	Insurance Refund
198266	4/8/2024	INSURANCE REFUND	25.82	Insurance Refund
198186	4/8/2024	INSURANCE REFUND	294.20	Insurance Refund
198189	4/8/2024	INSURANCE REFUND	2,267.47	Insurance Refund
198208	4/8/2024	INSURANCE REFUND	122.23	Insurance Refund
198209	4/8/2024	INSURANCE REFUND	122.23	Insurance Refund
198210	4/8/2024	INSURANCE REFUND	122.23	Insurance Refund
198231	4/8/2024	INSURANCE REFUND	116.05	Insurance Refund
198236	4/8/2024	INSURANCE REFUND	10,034.09	Insurance Refund
198259	4/8/2024	INSURANCE REFUND	264.20	Insurance Refund
198239	4/8/2024	INSURANCE REFUND	9.53	Insurance Refund
198165	4/8/2024	INSURANCE REFUND	872.10	Insurance Refund
198176	4/8/2024	INSURANCE REFUND	81.93	Insurance Refund
198179	4/8/2024	INSURANCE REFUND	310.56	Insurance Refund
198191	4/8/2024	INSURANCE REFUND	6.39	Insurance Refund
198198	4/8/2024	INSURANCE REFUND	15.39	Insurance Refund
198273	4/8/2024	INSURANCE REFUND	112.26	Insurance Refund
198274	4/8/2024	INSURANCE REFUND	2.63	Insurance Refund
198282	4/8/2024	INSURANCE REFUND	150.00	Insurance Refund
198290	4/8/2024	INSURANCE REFUND	1,261.47	Insurance Refund
198222	4/8/2024	INSURANCE REFUND	121.66	Insurance Refund
198223	4/8/2024	INSURANCE REFUND	23.82	Insurance Refund
198224	4/8/2024	INSURANCE REFUND	19.20	Insurance Refund
198225	4/8/2024	INSURANCE REFUND	15.56	Insurance Refund
198226	4/8/2024	INSURANCE REFUND	17.70	Insurance Refund
198227	4/8/2024	INSURANCE REFUND	58.53	Insurance Refund
198228	4/8/2024	INSURANCE REFUND	107.77	Insurance Refund
198229	4/8/2024	INSURANCE REFUND	18.61	Insurance Refund
198234	4/8/2024	INSURANCE REFUND	67.92	Insurance Refund
198241	4/8/2024	INSURANCE REFUND	77.48	Insurance Refund
198299	4/8/2024	INSURANCE REFUND	17.70	Insurance Refund
198300	4/8/2024	INSURANCE REFUND	17.70	Insurance Refund
198286	4/8/2024	INSURANCE REFUND	111.31	Insurance Refund
198265	4/8/2024	INSURANCE REFUND	342.80	Insurance Refund
198267	4/8/2024	INSURANCE REFUND	2,410.57	Insurance Refund
198192	4/8/2024	INSURANCE REFUND	8.24	Insurance Refund
198216	4/8/2024	INSURANCE REFUND	3,794.46	Insurance Refund
198240	4/8/2024	INSURANCE REFUND	32.87	Insurance Refund
198244	4/8/2024	INSURANCE REFUND	241.07	Insurance Refund
198245	4/8/2024	INSURANCE REFUND	18.61	Insurance Refund
198246	4/8/2024	INSURANCE REFUND	137.15	Insurance Refund

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198247	4/8/2024	INSURANCE REFUND	25.90	Insurance Refund
198251	4/8/2024	INSURANCE REFUND	397.10	Insurance Refund
198260	4/8/2024	INSURANCE REFUND	9.18	Insurance Refund
198264	4/8/2024	INSURANCE REFUND	108.96	Insurance Refund
198168	4/8/2024	INSURANCE REFUND	1,637.48	Insurance Refund
198211	4/8/2024	INSURANCE REFUND	226.59	Insurance Refund
198215	4/8/2024	INSURANCE REFUND	29.18	Insurance Refund
198217	4/8/2024	INSURANCE REFUND	95.23	Insurance Refund
198249	4/8/2024	INSURANCE REFUND	15.32	Insurance Refund
198255	4/8/2024	INSURANCE REFUND	17.70	Insurance Refund
198256	4/8/2024	INSURANCE REFUND	24.88	Insurance Refund
198283	4/8/2024	INSURANCE REFUND	9.61	Insurance Refund
198285	4/8/2024	INSURANCE REFUND	25.55	Insurance Refund
198288	4/8/2024	INSURANCE REFUND	261.67	Insurance Refund
198297	4/8/2024	INSURANCE REFUND	15.56	Insurance Refund
198298	4/8/2024	INSURANCE REFUND	29.18	Insurance Refund
198301	4/8/2024	INSURANCE REFUND	28.73	Insurance Refund
198302	4/8/2024	INSURANCE REFUND	196.00	Insurance Refund
198303	4/8/2024	INSURANCE REFUND	285.09	Insurance Refund
198218	4/8/2024	INSURANCE REFUND	142.70	Insurance Refund
198272	4/8/2024	INSURANCE REFUND	2,423.85	Insurance Refund
198219	4/8/2024	INSURANCE REFUND	234.60	Insurance Refund
198170	4/8/2024	INSURANCE REFUND	209.94	Insurance Refund
198182	4/8/2024	INSURANCE REFUND	25.82	Insurance Refund
198187	4/8/2024	INSURANCE REFUND	37.09	Insurance Refund
198193	4/8/2024	INSURANCE REFUND	22.33	Insurance Refund
198194	4/8/2024	INSURANCE REFUND	22.33	Insurance Refund
198195	4/8/2024	INSURANCE REFUND	59.38	Insurance Refund
198196	4/8/2024	INSURANCE REFUND	6.13	Insurance Refund
198197	4/8/2024	INSURANCE REFUND	32.38	Insurance Refund
198253	4/8/2024	INSURANCE REFUND	701.50	Insurance Refund
198261	4/8/2024	INSURANCE REFUND	58.33	Insurance Refund
198284	4/8/2024	INSURANCE REFUND	98.36	Insurance Refund
198163	4/8/2024	INSURANCE REFUND	52,195.64	Insurance Refund
198214	4/8/2024	INSURANCE REFUND	1,457.07	Insurance Refund
198233	4/8/2024	INSURANCE REFUND	90.11	Insurance Refund
198243	4/8/2024	INSURANCE REFUND	78.44	Insurance Refund
198248	4/8/2024	INSURANCE REFUND	197.37	Insurance Refund
198271	4/8/2024	INSURANCE REFUND	486.38	Insurance Refund
198293	4/8/2024	INSURANCE REFUND	291.15	Insurance Refund
198161	4/8/2024	INSURANCE REFUND	4,640.65	Insurance Refund
198164	4/8/2024	INSURANCE REFUND	928.15	Insurance Refund
198166	4/8/2024	INSURANCE REFUND	482.60	Insurance Refund
198171	4/8/2024	INSURANCE REFUND	197.80	Insurance Refund
198190	4/8/2024	INSURANCE REFUND	6.15	Insurance Refund
198221	4/8/2024	INSURANCE REFUND	110.60	Insurance Refund
198230	4/8/2024	INSURANCE REFUND	456.04	Insurance Refund
198232	4/8/2024	INSURANCE REFUND	1,730.40	Insurance Refund
198237	4/8/2024	INSURANCE REFUND	219.60	Insurance Refund
198238	4/8/2024	INSURANCE REFUND	130.75	Insurance Refund
198258	4/8/2024	INSURANCE REFUND	124.74	Insurance Refund
198262	4/8/2024	INSURANCE REFUND	1,081.77	Insurance Refund
198268	4/8/2024	INSURANCE REFUND	1,071.05	Insurance Refund
198183	4/8/2024	INSURANCE REFUND	2,687.56	Insurance Refund

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198263	4/8/2024	INSURANCE REFUND	34.02	Insurance Refund
198291	4/8/2024	INSURANCE REFUND	3,073.27	Insurance Refund
198220	4/8/2024	INSURANCE REFUND	70.15	Insurance Refund
198296	4/8/2024	INSURANCE REFUND	668.80	Insurance Refund
198160	4/8/2024	INSURANCE REFUND	5,312.90	Insurance Refund
198269	4/8/2024	INSURANCE REFUND	107.39	Insurance Refund
198270	4/8/2024	INSURANCE REFUND	82.68	Insurance Refund
198320	4/12/2024	ALLERMETRIX INC	3,750.70	Laboratory Services
198531	4/18/2024	SUMMIT PATHOLOGY	17,831.20	Laboratory Services
198624	4/25/2024	MAYO COLLABORATIVE SERVICES, INC.	574.32	Laboratory Services
198628	4/25/2024	METABOLIC NEWBORN SCREENING	5,908.52	Laboratory Services
EFT00000008637	4/25/2024	ARUP LABORATORIES, INC.	68,196.04	Laboratory Services
198057	4/3/2024	BIOMERIEUX, INC.	8,266.56	Laboratory Supplies
198450	4/18/2024	BIOMERIEUX, INC.	8,509.85	Laboratory Supplies
198453	4/18/2024	CANCER DIAGNOSTICS, INC	33.25	Laboratory Supplies
198336	4/12/2024	CARDINAL HEALTH	508.20	Laboratory Supplies
198454	4/18/2024	CARDINAL HEALTH	865.25	Laboratory Supplies
198063	4/3/2024	CEPHEID	18.00	Laboratory Supplies
198340	4/12/2024	CEPHEID	12,566.80	Laboratory Supplies
198077	4/3/2024	FISHER HEALTHCARE	5,271.27	Laboratory Supplies
198356	4/12/2024	FISHER HEALTHCARE	4,282.99	Laboratory Supplies
198474	4/18/2024	FISHER HEALTHCARE	7,424.56	Laboratory Supplies
198497	4/18/2024	MEDI BADGE INC.	182.38	Laboratory Supplies
198388	4/12/2024	MERCEDES MEDICAL	678.00	Laboratory Supplies
198420	4/12/2024	STATLAB MEDICAL PRODUCTS	672.74	Laboratory Supplies
198130	4/3/2024	SYSMEX AMERICA INC.	4,161.70	Laboratory Supplies
198534	4/18/2024	SYSMEX AMERICA INC.	637.51	Laboratory Supplies
198135	4/3/2024	TYPENEX MEDICAL, LLC	273.99	Laboratory Supplies
198573	4/25/2024	CARDINAL HEALTH	1,042.52	Laboratory Supplies
198579	4/25/2024	CEPHEID	11,468.00	Laboratory Supplies
198601	4/25/2024	FISHER HEALTHCARE	4,418.59	Laboratory Supplies
198663	4/25/2024	SYSMEX AMERICA INC.	418.31	Laboratory Supplies
EFT00000008611	4/3/2024	BIO-RAD LABORATORIES	3,176.79	Laboratory Supplies
EFT00000008620	4/12/2024	BIO-RAD LABORATORIES	3,766.49	Laboratory Supplies
EFT00000008634	4/18/2024	IDENTICARD	202.26	Laboratory Supplies
EFT00000008641	4/25/2024	IDENTICARD	27.30	Laboratory Supplies
198383	4/12/2024	MARTIN-RAY LAUNDRY SYSTEMS	251.40	Laundry Supplies
198071	4/3/2024	CROWLEY FLECK ATTORNEYS	55,654.00	Legal Fees
198087	4/3/2024	HUSCH BLACKWELL LLP	365.00	Legal Fees
198436	4/12/2024	WELBORN SULLIVAN MECK & TOOLEY, P.C.	21,200.00	Legal Fees
198609	4/25/2024	HATHAWAY & KUNZ, P.C.	937.50	Legal Fees
198687	4/25/2024	WYOMING STATE BOARD OF PHARMACY	340.00	Licenses & Taxes
198686	4/25/2024	WYOMING UROLOGICAL SERVICES, LP	18,600.00	Lithotripsy Service
198315	4/12/2024	ABOVE ALL MEDICAL PARTS INC.	1,338.22	Maintenance & Repair
198316	4/12/2024	AGILITI SURGICAL EQUIPMENT REPAIR INC.	2,325.00	Maintenance & Repair
198441	4/18/2024	AGILITI SURGICAL EQUIPMENT REPAIR INC.	351.90	Maintenance & Repair
198456	4/18/2024	CARRIER COMMERCIAL SERVICE	799.00	Maintenance & Repair
198342	4/12/2024	CLARK'S QUALITY ROOFING, INC	1,040.00	Maintenance & Repair
198145	4/3/2024	DANIEL DORMAN PAINTING	9,000.00	Maintenance & Repair
198493	4/18/2024	LEAF	2,670.00	Maintenance & Repair
198396	4/12/2024	PACIFIC STEEL HIDES FURS RECYC	263.65	Maintenance & Repair
198107	4/3/2024	PACIFIC WATER INC	725.62	Maintenance & Repair
198398	4/12/2024	PARTSSOURCE	699.48	Maintenance & Repair
198509	4/18/2024	PARTSSOURCE	517.60	Maintenance & Repair

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198412	4/12/2024	SENTRY AIR SYSTEMS INC.	370.95	Maintenance & Repair
198421	4/12/2024	STEALTH TECHNOLOGIES	325.47	Maintenance & Repair
198541	4/18/2024	UTAH CONTROLS INC	415.00	Maintenance & Repair
198562	4/25/2024	AVANTE HEALTH SOLUTIONS	47.50	Maintenance & Repair
198589	4/25/2024	CUMMINS ROCKY MOUNTAIN, LLC	4,152.00	Maintenance & Repair
198635	4/25/2024	PACIFIC STEEL HIDES FURS RECYC	190.94	Maintenance & Repair
198636	4/25/2024	PACT STUDIOS, LLC	2,770.00	Maintenance & Repair
EFT00000008613	4/3/2024	COLORADO DOORWAYS, INC	138.42	Maintenance & Repair
EFT00000008630	4/18/2024	COLORADO DOORWAYS, INC	613.54	Maintenance & Repair
198321	4/12/2024	ALPINE PURE SOFT WATER	1,455.30	Maintenance Supplies
198067	4/3/2024	CODALE ELECTRIC SUPPLY, INC	373.12	Maintenance Supplies
198083	4/3/2024	GRAINGER	1,065.00	Maintenance Supplies
198364	4/12/2024	GRAINGER	333.19	Maintenance Supplies
198480	4/18/2024	GRAINGER	267.96	Maintenance Supplies
198435	4/12/2024	HARRIS MOUNTAIN WEST, LLC	264.00	Maintenance Supplies
198368	4/12/2024	HOME DEPOT	463.57	Maintenance Supplies
198486	4/18/2024	HOME DEPOT	958.90	Maintenance Supplies
198381	4/12/2024	LOCKMASTERS INC.	143.19	Maintenance Supplies
198391	4/12/2024	NAPA AUTO PARTS	38.58	Maintenance Supplies
198409	4/12/2024	ROCK SPRINGS WINNELSON CO	2,315.26	Maintenance Supplies
198520	4/18/2024	ROCK SPRINGS WINNELSON CO	3,658.69	Maintenance Supplies
198543	4/18/2024	VERNACARE	469.81	Maintenance Supplies
198569	4/25/2024	BLOEDORN LUMBER	39.00	Maintenance Supplies
198583	4/25/2024	CODALE ELECTRIC SUPPLY, INC	828.79	Maintenance Supplies
198606	4/25/2024	GRAINGER	1,275.98	Maintenance Supplies
198610	4/25/2024	HOME DEPOT	2,404.43	Maintenance Supplies
198629	4/25/2024	MORCON SPECIALTY	298.90	Maintenance Supplies
EFT00000008609	4/3/2024	ACE HARDWARE	358.88	Maintenance Supplies
EFT00000008624	4/12/2024	ULINE, INC	907.50	Maintenance Supplies
EFT00000008635	4/18/2024	ULINE, INC	281.50	Maintenance Supplies
EFT00000008636	4/25/2024	ACE HARDWARE	45.96	Maintenance Supplies
198403	4/12/2024	PURPLE LIZARDS, LLC	2,105.00	Marketing & Promotional Supplies
198513	4/18/2024	PURPLE LIZARDS, LLC	945.00	Marketing & Promotional Supplies
198654	4/25/2024	SEAGULL PRINTING	3,052.00	Marketing & Promotional Supplies
198044	4/1/2024	MHSC MEDICAL STAFF	8,741.00	Matching Funds
198045	4/1/2024	MHSC MEDICAL STAFF	50.00	Membership Dues
198046	4/1/2024	MHSC MEDICAL STAFF	50.00	Membership Dues
198101	4/3/2024	MHSC MEDICAL STAFF	50.00	Membership Dues
198389	4/12/2024	MHSC MEDICAL STAFF	50.00	Membership Dues
198310	4/9/2024	MHSC-FOUNDATION	1,468.70	MHSC Foundation
198503	4/18/2024	MHSC-FOUNDATION	824.96	MHSC Foundation
198550	4/23/2024	MHSC-FOUNDATION	1,670.91	MHSC Foundation
198332	4/12/2024	BC GROUP INTERNATIONAL INC.	1,728.00	Minor Equipment
198118	4/3/2024	SENSONICS, INC	211.47	Minor Equipment
198565	4/25/2024	BC GROUP INTERNATIONAL INC.	4,120.00	Minor Equipment
198665	4/25/2024	TERMINIX OF WYOMING	250.00	Monthly Pest Control
198121	4/3/2024	SMILEMAKERS	176.43	Non Medical Supplies
198414	4/12/2024	SMILEMAKERS	158.10	Non Medical Supplies
198620	4/25/2024	KRAMES STAYWELL, LLC	490.70	Non Medical Supplies
198328	4/12/2024	ASI BUSINESS GROUP	4,381.38	Office Supplies
198469	4/18/2024	DISCOUNT ID	100.00	Office Supplies
198417	4/12/2024	STANDARD REGISTER COMPANY	1,005.88	Office Supplies
198122	4/3/2024	STAPLES BUSINESS ADVANTAGE	3,424.60	Office Supplies
198418	4/12/2024	STAPLES BUSINESS ADVANTAGE	288.94	Office Supplies

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198526	4/18/2024	STAPLES BUSINESS ADVANTAGE	432.23	Office Supplies
198545	4/18/2024	WYOMING EMBROIDERY	463.00	Office Supplies
198625	4/25/2024	MEDICAL ARTS PRESS	185.98	Office Supplies
198658	4/25/2024	STANDARD REGISTER COMPANY	393.76	Office Supplies
198659	4/25/2024	STAPLES BUSINESS ADVANTAGE	496.49	Office Supplies
198143	4/3/2024	YOUNG AT HEART SENIOR CITIZENS CENTER	1,970.00	Other Employee Benefits
198476	4/18/2024	FOTOS BY JENNI	79.00	Other Purchased Services
198094	4/3/2024	QUICK RESPONSE TAXI	145.00	Other Purchased Services
198380	4/12/2024	QUICK RESPONSE TAXI	196.00	Other Purchased Services
198494	4/18/2024	QUICK RESPONSE TAXI	471.00	Other Purchased Services
198523	4/18/2024	SANTA FE TRAIL RESTAURANT	2,088.34	Other Purchased Services
198047	4/1/2024	TURN UP THE VOLUME DJ SERVICES	300.00	Other Purchased Services
198559	4/25/2024	AMERICAN REGISTRY FOR INTERNET NUMBERS, LTD.	250.00	Other Purchased Services
198623	4/25/2024	QUICK RESPONSE TAXI	69.00	Other Purchased Services
EFT000000008610	4/3/2024	AIRGAS INTERMOUNTAIN INC	115.85	Oxygen Rental
EFT000000008619	4/12/2024	AIRGAS INTERMOUNTAIN INC	221.24	Oxygen Rental
EFT000000008627	4/18/2024	AIRGAS INTERMOUNTAIN INC	232.59	Oxygen Rental
198154	4/8/2024	PATIENT REFUND	166.79	Patient Refund
198148	4/8/2024	PATIENT REFUND	30.00	Patient Refund
198159	4/8/2024	PATIENT REFUND	30.00	Patient Refund
198151	4/8/2024	PATIENT REFUND	20.00	Patient Refund
198153	4/8/2024	PATIENT REFUND	22.89	Patient Refund
198152	4/8/2024	PATIENT REFUND	101.38	Patient Refund
198149	4/8/2024	PATIENT REFUND	21.66	Patient Refund
198150	4/8/2024	PATIENT REFUND	50.00	Patient Refund
198304	4/8/2024	PATIENT REFUND	28.74	Patient Refund
198156	4/8/2024	PATIENT REFUND	26.23	Patient Refund
198305	4/8/2024	PATIENT REFUND	20.41	Patient Refund
198158	4/8/2024	PATIENT REFUND	345.80	Patient Refund
198306	4/8/2024	PATIENT REFUND	345.80	Patient Refund
198157	4/8/2024	PATIENT REFUND	10.00	Patient Refund
198147	4/8/2024	PATIENT REFUND	15.00	Patient Refund
198155	4/8/2024	PATIENT REFUND	265.64	Patient Refund
198423	4/12/2024	PATIENT REFUND	40.00	Patient Refund
198313	4/9/2024	UNITED WAY OF SWEETWATER COUNTY	253.61	Payroll Deduction
198554	4/23/2024	UNITED WAY OF SWEETWATER COUNTY	253.61	Payroll Deduction
198307	4/9/2024	CIRCUIT COURT 3RD JUDICIAL	758.48	Payroll Garnishment
198308	4/9/2024	CIRCUIT COURT 3RD JUDICIAL	291.06	Payroll Garnishment
198548	4/23/2024	CIRCUIT COURT 3RD JUDICIAL	296.35	Payroll Garnishment
198549	4/23/2024	CIRCUIT COURT 3RD JUDICIAL	290.33	Payroll Garnishment
198311	4/9/2024	STATE OF WYOMING DFS/CSES	1,838.63	Payroll Garnishment
198551	4/23/2024	STATE OF WYOMING DFS/CSES	2,011.70	Payroll Garnishment
198552	4/23/2024	SWEETWATER CIRCUIT COURT-RS	353.61	Payroll Garnishment
198312	4/9/2024	TX CHILD SUPPORT SDU	461.54	Payroll Garnishment
198553	4/23/2024	TX CHILD SUPPORT SDU	461.54	Payroll Garnishment
W/T	4/8/2024	PAYROLL 8	1,800,000.00	Payroll Transfer
W/T	4/22/2024	PAYROLL 9	1,900,000.00	Payroll Transfer
198575	4/25/2024	CARDINAL HEALTH PHARMACY MGMT	95,588.88	Pharmacy Management
198596	4/25/2024	DR. ELIZABETH CONGDON	1,500.00	Physician Recruitment
198314	4/12/2024	DR. WAGNER VERONESE	25,000.00	Physician Retention
198123	4/3/2024	STARLA LEETE	15,000.00	Physician Retention
198048	4/3/2024	ADVANCED MEDICAL IMAGING, LLC	21,346.00	Physician Services
198345	4/12/2024	COMPHEALTH, INC.	18,984.28	Physician Services
198487	4/18/2024	IN MOTION PHYSICAL THERAPY LLC	2,145.00	Physician Services

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198382	4/12/2024	LOCUM TENENS.COM	1,554.09	Physician Services
198102	4/3/2024	MOUNTAIN STATES MEDICAL PHYSICS	12,207.46	Physician Services
198584	4/25/2024	COMPHEALTH, INC.	23,916.16	Physician Services
198643	4/25/2024	QLER PHYSICIAN MEDICAL GROUP, P.A.	25,650.00	Physician Services
198666	4/25/2024	THE SLEEP SPECIALISTS	7,100.00	Physician Services
198674	4/25/2024	UNIVERSITY OF UTAH (UHC OUTREACH)	113,733.08	Physician Services
198682	4/25/2024	WEATHERBY LOCUMS, INC	64,243.14	Physician Services
198556	4/25/2024	AIDVANTAGE	2,500.00	Physician Student Loan
198607	4/25/2024	GREAT LAKES	1,666.67	Physician Student Loan
198591	4/25/2024	MOHELA	3,333.34	Physician Student Loan
198592	4/25/2024	MOHELA	1,666.67	Physician Student Loan
198631	4/25/2024	US DEPARTMENT OF EDUCATION	1,666.67	Physician Student Loan
198675	4/25/2024	US DEPARTMENT OF EDUCATION	9,166.68	Physician Student Loan
198690	4/26/2024	US DEPARTMENT OF EDUCATION	21,672.95	Physician Student Loan
198050	4/3/2024	ALSCO AMERICAN LINEN	42.56	Professional Service
198322	4/12/2024	ALSCO AMERICAN LINEN	127.68	Professional Service
198443	4/18/2024	ALSCO AMERICAN LINEN	42.56	Professional Service
198343	4/12/2024	CLEANIQUE PROFESSIONAL SERVICES	4,700.00	Professional Service
198492	4/18/2024	CLIFTONLARSONALLEN LLP	64,306.22	Professional Service
198386	4/12/2024	MEDICAL PHYSICS CONSULTANTS, INC	2,250.00	Professional Service
198498	4/18/2024	MEDICAL PHYSICS CONSULTANTS, INC	1,500.00	Professional Service
198106	4/3/2024	P3 CONSULTING LLC	150.00	Professional Service
198508	4/18/2024	P3 CONSULTING LLC	1,511.25	Professional Service
198416	4/12/2024	ST+B ENGINEERING	24,621.60	Professional Service
198598	4/25/2024	CE BROKER	548.30	Professional Service
198581	4/25/2024	CLEANIQUE PROFESSIONAL SERVICES	5,950.00	Professional Service
198678	4/25/2024	VERISYS INC.	57.75	Professional Service
198685	4/25/2024	WYOMING DEPARTMENT OF HEALTH	282.00	Professional Service
EFT000000008625	4/12/2024	WESTERN STAR COMMUNICATIONS	663.00	Professional Service
EFT000000008644	4/25/2024	WESTERN STAR COMMUNICATIONS	714.00	Professional Service
198463	4/18/2024	COLLEGE OF AMERICAN PATHOLOGY	490.00	Proficiency Testing
198645	4/25/2024	RADIATION DETECTION COMPANY	6.70	Radiation Monitoring
EFT000000008632	4/18/2024	LANDAUER INC	139.90	Radiation Monitoring
198501	4/18/2024	MERRY X-RAY	225.65	Radiology Film
198467	4/18/2024	CURIUM US LLC	287.46	Radiology Material
198081	4/3/2024	GE HEALTHCARE INC	1,669.30	Radiology Material
198361	4/12/2024	GE HEALTHCARE INC	1,669.30	Radiology Material
198478	4/18/2024	GE HEALTHCARE INC	1,669.30	Radiology Material
198379	4/12/2024	LANTHEUS MEDICAL IMAGING, INC	2,134.56	Radiology Material
198491	4/18/2024	LANTHEUS MEDICAL IMAGING, INC	2,962.38	Radiology Material
198511	4/18/2024	PINESTAR TECHNOLOGY, INC.	415.00	Radiology Material
198604	4/25/2024	GE HEALTHCARE INC	1,669.30	Radiology Material
198639	4/25/2024	PHARMALOGIC WY, LTD	6,552.60	Radiology Material
198317	4/12/2024	DR. AHMAD BASHIRIMOGHADDAM	3,040.08	Reimbursement - CME
198073	4/3/2024	DR. DAVID LIU	2,867.56	Reimbursement - CME
198353	4/12/2024	EMILY JAMES	1,722.80	Reimbursement - CME
198091	4/3/2024	JOCELYN PALINEK	888.00	Reimbursement - CME
198373	4/12/2024	JOCELYN PALINEK	80.00	Reimbursement - CME
198120	4/3/2024	SHAWN ROCKEY, PA-C	1,062.00	Reimbursement - CME
198563	4/25/2024	DR. BANU SYMINGTON	1,720.20	Reimbursement - CME
198618	4/25/2024	DR. JOSHUA BINKS	155.00	Reimbursement - CME
198641	4/25/2024	DR. PRACHI PAWAR	873.00	Reimbursement - CME
198684	4/25/2024	DR. WILLIAM SARETTE	1,682.46	Reimbursement - CME
198324	4/12/2024	ANGEL BENNETT	208.62	Reimbursement - Education & Travel

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198461	4/18/2024	CHRISTOPHER KICKLIGHTER	1,120.00	Reimbursement - Education & Travel
198141	4/3/2024	DR. WILLIAM SARETTE	600.00	Reimbursement - Education & Travel
198377	4/12/2024	LACEY DAVIS	57.00	Reimbursement - Education & Travel
198390	4/12/2024	MINDY BYRD	94.62	Reimbursement - Education & Travel
198426	4/12/2024	TAMMIE HENDERSON	21.66	Reimbursement - Education & Travel
198132	4/3/2024	TASHA HARRIS	1,588.85	Reimbursement - Education & Travel
198577	4/25/2024	CARRIE CANESTORP	3,691.83	Reimbursement - Education & Travel
198615	4/25/2024	DR. JANENE GLYN	232.66	Reimbursement - Education & Travel
198646	4/25/2024	DR. RASHEEL CHOWDHARY	2,494.32	Reimbursement - Education & Travel
198612	4/25/2024	IRENE RICHARDSON	1,116.22	Reimbursement - Education & Travel
198616	4/25/2024	JODY BUTLER	496.40	Reimbursement - Education & Travel
198651	4/25/2024	SARAH BAILEY	629.00	Reimbursement - Education & Travel
198668	4/25/2024	TINA JULIUS	2,552.92	Reimbursement - Education & Travel
198617	4/25/2024	JOSEPH J. OLIVER, M.D.	1,010.72	Reimbursement - Insurance Premiums
198374	4/12/2024	JODY HARRISON	51.90	Reimbursement - Non Hospital Supplies
198093	4/3/2024	KERRY DOWNS	158.12	Reimbursement - Non Hospital Supplies
198376	4/12/2024	KERRY DOWNS	136.99	Reimbursement - Non Hospital Supplies
198131	4/3/2024	TAMI LOVE	40.02	Reimbursement - Non Hospital Supplies
198445	4/18/2024	DR. ARION LOCHNER	48.49	Reimbursement - Non Hospital Supplies
198351	4/12/2024	DESERIEE PADILLA	629.04	Reimbursement - Payroll
198144	4/3/2024	KATHLEEN HILL	60.84	Reimbursement - Payroll
198525	4/18/2024	SIERRA NOMIS	289.57	Reimbursement - Payroll
198318	4/12/2024	AIMEE URBIN	76.68	Reimbursement - Supplies
W/T	4/8/2024	PCS 3/28/24	228,525.54	Retirement
W/T	4/22/2024	PCS 4/11/24	233,820.77	Retirement
198419	4/12/2024	STATE OF WYO.DEPT.OF REVENUE	0.91	Sales Tax Payment
198133	4/3/2024	VITASCRIPTUM LLC	906.02	Scribe Services
198667	4/25/2024	VITASCRIPTUM LLC	2,338.76	Scribe Services
198051	4/3/2024	ALZHEIMER'S ASSOCIATION	800.00	Sponsorship
198058	4/3/2024	BITTER CREEK SPEECH AND DEBATE	300.00	Sponsorship
198060	4/3/2024	BOY SCOUT TROOP 4	300.00	Sponsorship
198452	4/18/2024	BOY SCOUTS OF AMERICA-CROSSROADS OF THE WEST COUNCIL	500.00	Sponsorship
198457	4/18/2024	CASPER COLLEGE FOUNDATION	500.00	Sponsorship
198078	4/3/2024	FLAMING GORGE AREA CHAMBER OF COMMERCE	500.00	Sponsorship
198481	4/18/2024	GRHS WOLVES ATHLETIC BOOSTER CLUB	500.00	Sponsorship
198401	4/12/2024	PINEDALE FINE ARTS COUNCIL	500.00	Sponsorship
198114	4/3/2024	ROCK SPRINGS RENEWAL FUND	2,000.00	Sponsorship
198521	4/18/2024	ROCK SPRINGS RENEWAL FUND	250.00	Sponsorship
198128	4/3/2024	SWEETWATER EVENTS COMPLEX	2,150.00	Sponsorship
198140	4/3/2024	WASHINGTON SQUARE MCKENZIE HOME	600.00	Sponsorship
198662	4/25/2024	SWEETEST FOUNDATION	350.00	Sponsorship
198438	4/18/2024	ACADEMY OF LYMPHATIC STUDIES	278.77	Surgery Supplies
198319	4/12/2024	ALI MED INC.	351.96	Surgery Supplies
198323	4/12/2024	ALTA MEDICAL SPECIALTIES	276.02	Surgery Supplies
198325	4/12/2024	APPLIED MEDICAL TECHNOLOGY	4,941.26	Surgery Supplies
198052	4/3/2024	ARMSTRONG MEDICAL INDUSTRIES	410.00	Surgery Supplies
198446	4/18/2024	ARMSTRONG MEDICAL INDUSTRIES	548.00	Surgery Supplies
198056	4/3/2024	BECTON DICKINSON	875.45	Surgery Supplies
198334	4/12/2024	BECTON DICKINSON	2,532.50	Surgery Supplies
198449	4/18/2024	BECTON DICKINSON	2,527.48	Surgery Supplies
198069	4/3/2024	COOPER SURGICAL	2,585.72	Surgery Supplies
198348	4/12/2024	COOPER SURGICAL	532.68	Surgery Supplies
198465	4/18/2024	COOPER SURGICAL	699.26	Surgery Supplies
198070	4/3/2024	COVIDIEN SALES LLC, DBA GIVEN IMAGING	602.69	Surgery Supplies

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
GENERAL FUND DISBURSEMENTS
4/30/2024

198349	4/12/2024	COVIDIEN SALES LLC, DBA GIVEN IMAGING	10,976.92	Surgery Supplies
198466	4/18/2024	COVIDIEN SALES LLC, DBA GIVEN IMAGING	14,006.99	Surgery Supplies
198479	4/18/2024	GLOBAL FOCUS MARKETING AND DISTRIBUTION, LTD.	215.46	Surgery Supplies
198370	4/12/2024	INTERNATIONAL BIOMEDICAL	123.82	Surgery Supplies
198089	4/3/2024	INTUITIVE SURGICAL INC.	5,796.00	Surgery Supplies
198371	4/12/2024	INTUITIVE SURGICAL INC.	25,486.00	Surgery Supplies
198488	4/18/2024	INTUITIVE SURGICAL INC.	11,340.00	Surgery Supplies
198500	4/18/2024	MERCURY MEDICAL	212.31	Surgery Supplies
198049	4/3/2024	MIADERM	396.00	Surgery Supplies
198392	4/12/2024	NEOGEN CORPORATION	341.70	Surgery Supplies
198514	4/18/2024	QFIX	150.00	Surgery Supplies
198126	4/3/2024	STRYKER ENDOSCOPY	743.30	Surgery Supplies
198529	4/18/2024	STRYKER ENDOSCOPY	454.97	Surgery Supplies
198127	4/3/2024	STRYKER ORTHOPAEDICS	3,790.00	Surgery Supplies
198424	4/12/2024	STRYKER ORTHOPAEDICS	56,928.57	Surgery Supplies
198530	4/18/2024	STRYKER ORTHOPAEDICS	18,630.00	Surgery Supplies
198427	4/12/2024	TELEFLEX LLC	142.00	Surgery Supplies
198535	4/18/2024	TELEFLEX LLC	871.00	Surgery Supplies
198537	4/18/2024	TRICOR SYSTEMS INC.	335.00	Surgery Supplies
198142	4/3/2024	XODUS MEDICAL, INC.	939.75	Surgery Supplies
198546	4/18/2024	XODUS MEDICAL, INC.	1,658.00	Surgery Supplies
198547	4/18/2024	ZIMMER BIOMET	345.00	Surgery Supplies
198557	4/25/2024	ALI MED INC	1,154.71	Surgery Supplies
198561	4/25/2024	ARMSTRONG MEDICAL INDUSTRIES	120.00	Surgery Supplies
198566	4/25/2024	BECTON DICKINSON	3,561.25	Surgery Supplies
198570	4/25/2024	BLUE ENDO	372.00	Surgery Supplies
198586	4/25/2024	COOPER SURGICAL	532.68	Surgery Supplies
198588	4/25/2024	COVIDIEN SALES LLC, DBA GIVEN IMAGING	5,224.32	Surgery Supplies
198611	4/25/2024	INTUITIVE SURGICAL INC.	5,922.00	Surgery Supplies
198627	4/25/2024	MERCURY MEDICAL	212.31	Surgery Supplies
198657	4/25/2024	SMITH & NEPHEW ENDOSCOPY INC	1,980.92	Surgery Supplies
198661	4/25/2024	STRYKER ORTHOPAEDICS	50,818.33	Surgery Supplies
198664	4/25/2024	TELEFLEX LLC	785.00	Surgery Supplies
198689	4/25/2024	XODUS MEDICAL, INC.	278.25	Surgery Supplies
198402	4/12/2024	PRESS GANEY ASSOCIATES, INC	4,789.33	Surveys
198622	4/25/2024	LANGUAGE LINE SERVICES	2,727.52	Translation Services
198111	4/3/2024	QUARTERMASTER	56.62	Uniforms
198515	4/18/2024	QUARTERMASTER	37.70	Uniforms
198442	4/18/2024	ALL WEST COMMUNICATIONS	4,868.29	Utilities
198054	4/3/2024	AT&T	42.15	Utilities
198329	4/12/2024	AT&T	49.72	Utilities
198330	4/12/2024	AT&T	254.62	Utilities
198404	4/12/2024	CENTURY LINK	1,303.76	Utilities
198517	4/18/2024	CENTURY LINK	325.76	Utilities
198516	4/18/2024	DOMINION ENERGY WYOMING	56,222.06	Utilities
198407	4/12/2024	ROCK SPRINGS MUNICIPAL UTILITY	11,809.23	Utilities
198522	4/18/2024	ROCKY MOUNTAIN POWER	40,193.67	Utilities
198594	4/25/2024	DISH NETWORK LLC	90.64	Utilities
198683	4/25/2024	WHITE MOUNTAIN WATER & SEWER DISTRICT	63.25	Utilities
198125	4/3/2024	STERICYCLE, INC.	2,324.97	Waste Disposal
W/T	4/4/2024	WC QTR 1 2024	118,604.14	Worker's Comp
			9,338,816.50	

Memorial Hospital of Sweetwater County
County Voucher Summary
as of month ending April 30, 2024

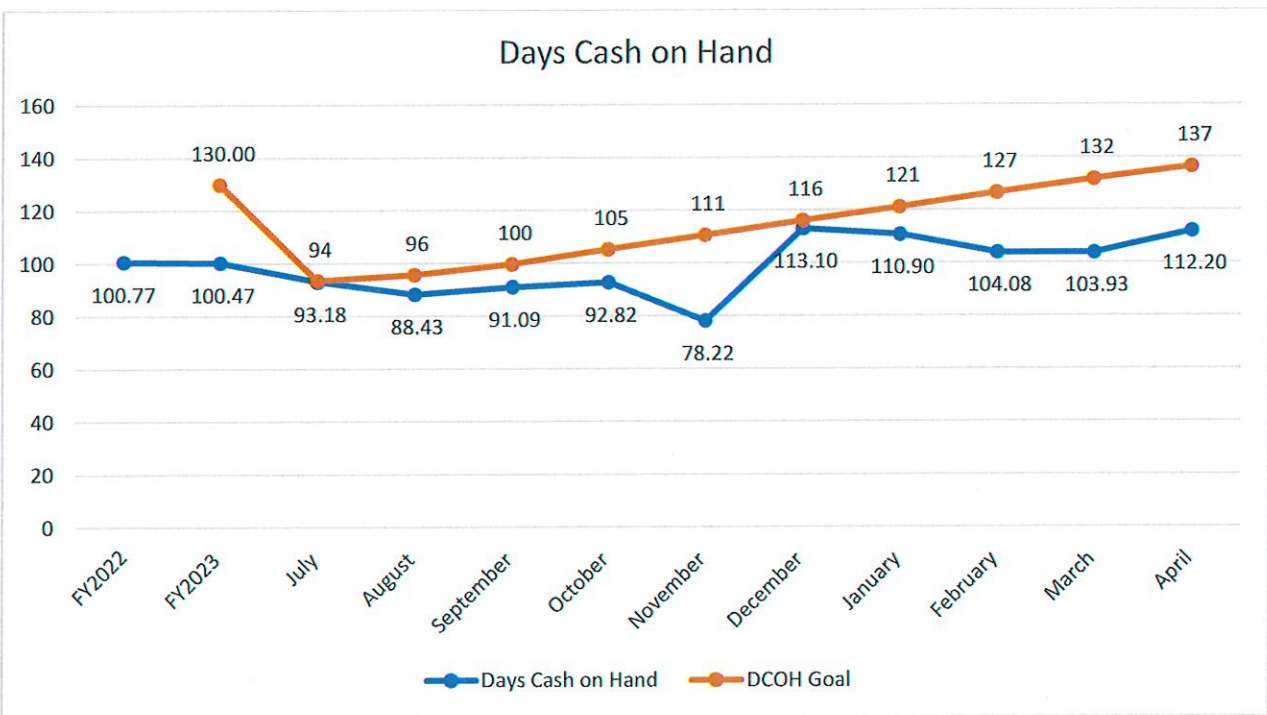
Vouchers Submitted by MHSC at agreed discounted rate		
July 2023		\$0.00
August 2023		\$49,254.59
September 2023		\$0.00
October 2023		\$27,913.61
November 2023		\$7,018.05
December 2023		\$0.00
January 2024		\$0.00
February 2024		\$44,243.47
March 2024		\$9,309.81
April 2024		\$30,704.90
May 2024		
June 2024		
County Requested Total Vouchers Submitted		<u>\$168,444.43</u>
Total Vouchers Submitted FY 24		\$168,444.43
Less: Total Approved by County and Received by MHSC FY 24		\$168,444.43
Total Vouchers Pending Approval by County		<u><u>\$0.00</u></u>

FY24 Title 25 Fund Budget from Sweetwater County	\$471,488.00
Funds Received From Sweetwater County	<u>\$168,444.43</u>
FY24 Title 25 Fund Budget Remaining	\$303,043.57
Total Budgeted Vouchers Pending Submittal to County	<u><u>\$0.00</u></u>

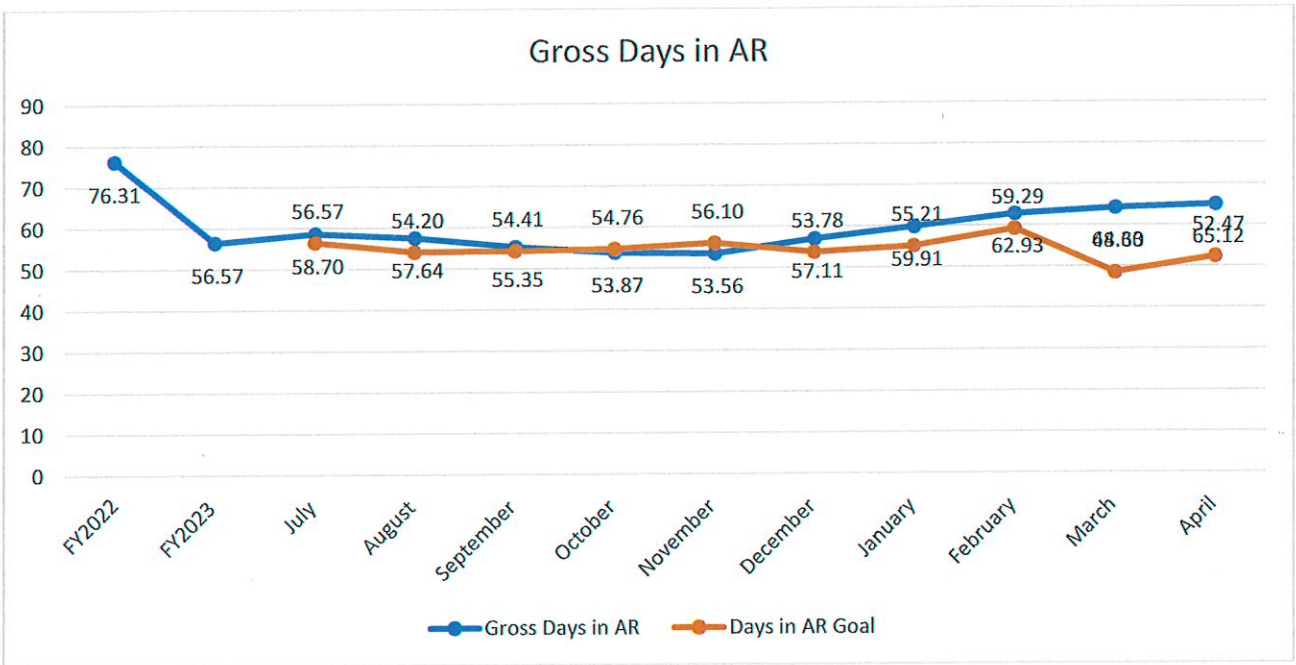
FY24 Maintenance Fund Budget from Sweetwater County	\$1,448,215.00
County Maintenance FY24 - July	\$0.00
County Maintenance FY24 - August	\$197,516.66
County Maintenance FY24 - September	\$0.00
County Maintenance FY24 - October	\$21,575.13
County Maintenance FY24 - November	\$20,665.42
County Maintenance FY24 - December	\$0.00
County Maintenance FY24 - January	\$100,431.64
County Maintenance FY24 - February	\$0.00
County Maintenance FY24 - March	\$107,468.18
County Maintenance FY24 - April	\$50,864.52
County Maintenance FY24 - May	
County Maintenance FY24 - June	
	<u>\$498,521.55</u>
FY24 Maintenance Fund Budget Remaining	<u><u>\$949,693.45</u></u>

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

- **Days Cash on Hand** represents the number of days the hospital can operate without cash receipts utilizing all sources of cash available. We have set interim goals of 100 days for September, 116 days for December, 132 days for March and 139 days for year end.
 - We had an increase of 8 days in DCOH, coming in at 112. Cash collections came in at \$10.7 million. Daily cash expense increased to \$309,800 in April.

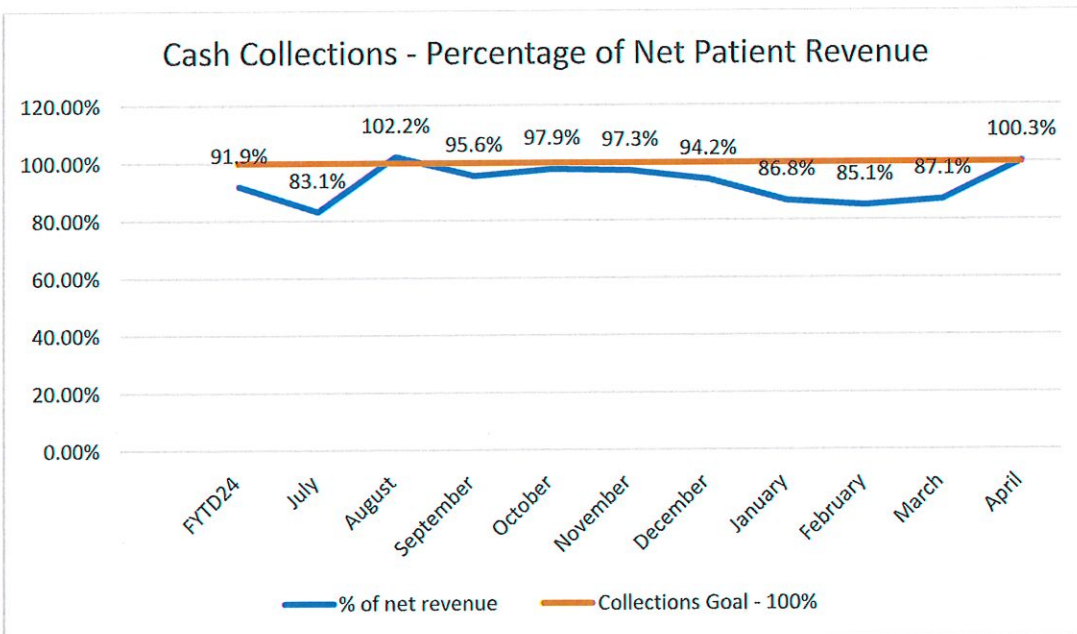


- **Days in Accounts Receivable** represents the number of days of patient charges tied up in unpaid patient accounts. We have set interim goals of 54.4 days for September, 53.8 days for December, 48.6 for March and 47.7 by year end.
 - We use a 3-month average calculation in the financial statements for this metric. Days in AR increased slightly in April due to the high collections, high revenue and stable AR and came in at 65.1, missing the goal for the month.

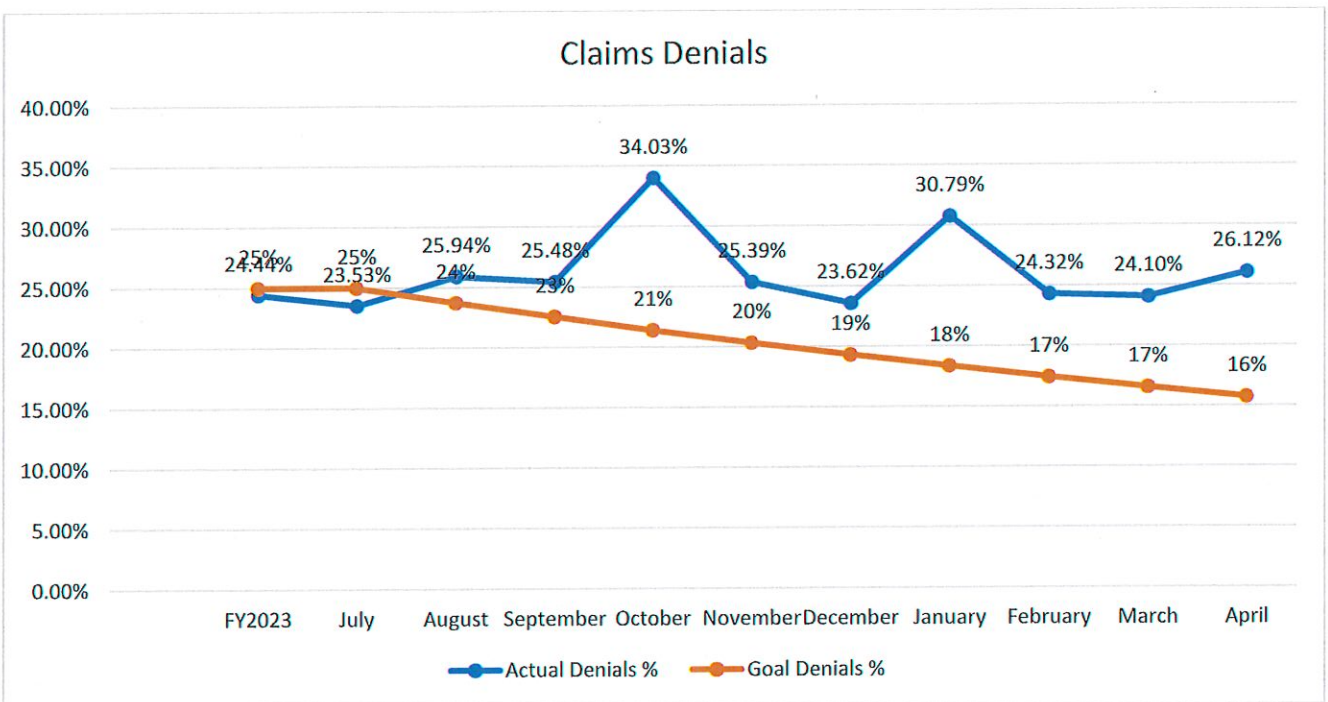


- **Cash Collections** – At the recommendation of CLA, we have changed the reporting goal for cash collections. The goal for cash collections is 100% or > than net patient revenue. The new trending graph is shown below.

- Cash collections for April were \$10.7 million, or 100.3% of net patient revenue, meeting the budget for the month. Year-to-date collections increased to 91.9% of net patient revenue.

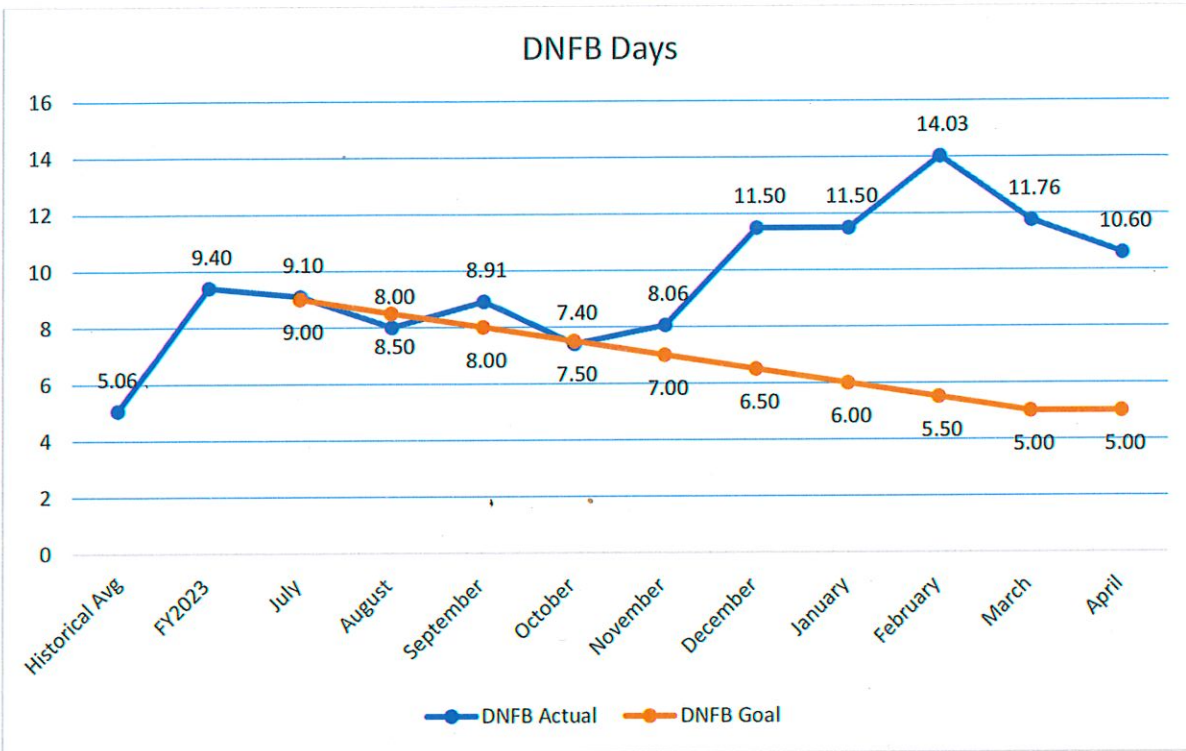


- **Denial Rate** – The denial rate is the percentage of all submitted claims denied by payers. A lower denial rate means improved cash flow. Current state and national benchmarks are at 15%.
 - The denial rate for April was 26.12%, under the goal of 16%. We continue to work with CLA around denials management and named a Denials Management Coordinator and assembled a Denials Management Workgroup.



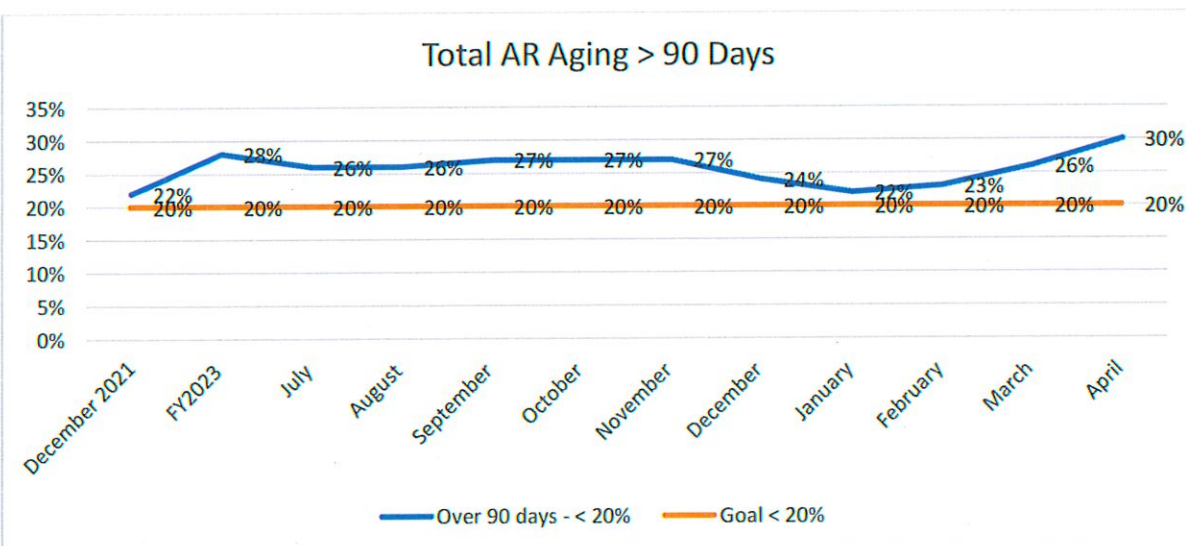
Revenue Cycle Goals – Fiscal Year 2024 - We have also set goals for specific financial metrics impacting the revenue cycle; DNFB Days, Total AR Aging and Payer Specific Aging.

- **DNFB Days – Discharged Not Final Billed days.** These are patient accounts where the patient has been discharged but the account has not been billed. Several categories fall under DNFB, including billing holds, corrections required, credit balances, waiting for coding, ready to bill and the standard delay. The standard delay is those accounts held automatically for 5 days before being released for billing. This allows for all charges to be posted, charts documented and coding to be completed. We have set the goal for DNFB days at 5 days by the end of the fiscal year, equal to our 5-day standard delay for billing accounts.
 - DNFB Days decreased to 10.6 in April the team continues to prioritize this goal. We continue to work through the details in bringing our DNFB days down.

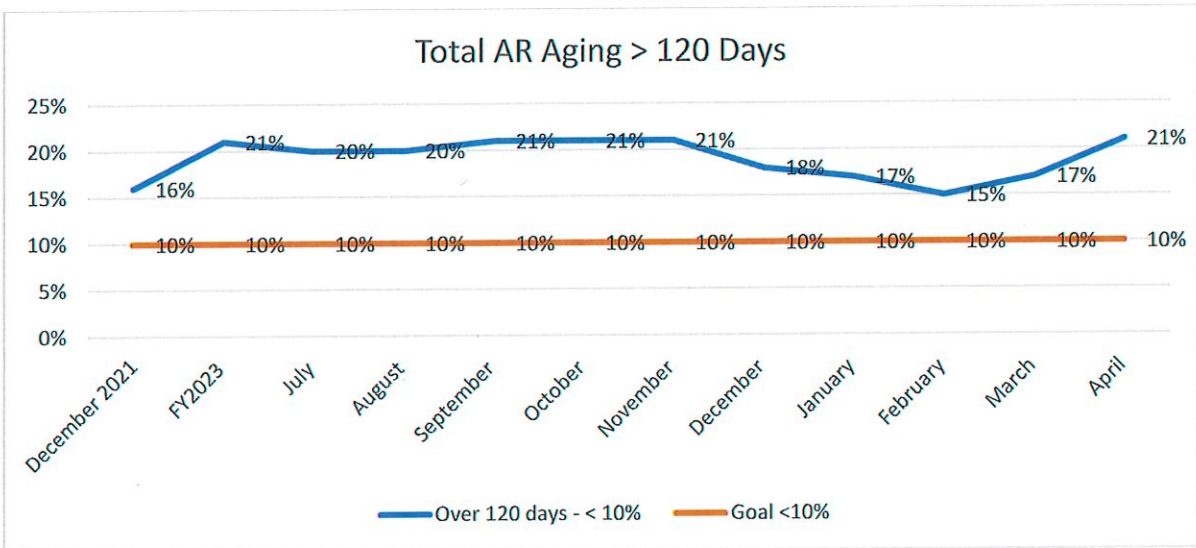


- **Total Accounts Receivable aging** – These goals were set based on national benchmarks received from CLA and are set as follows:

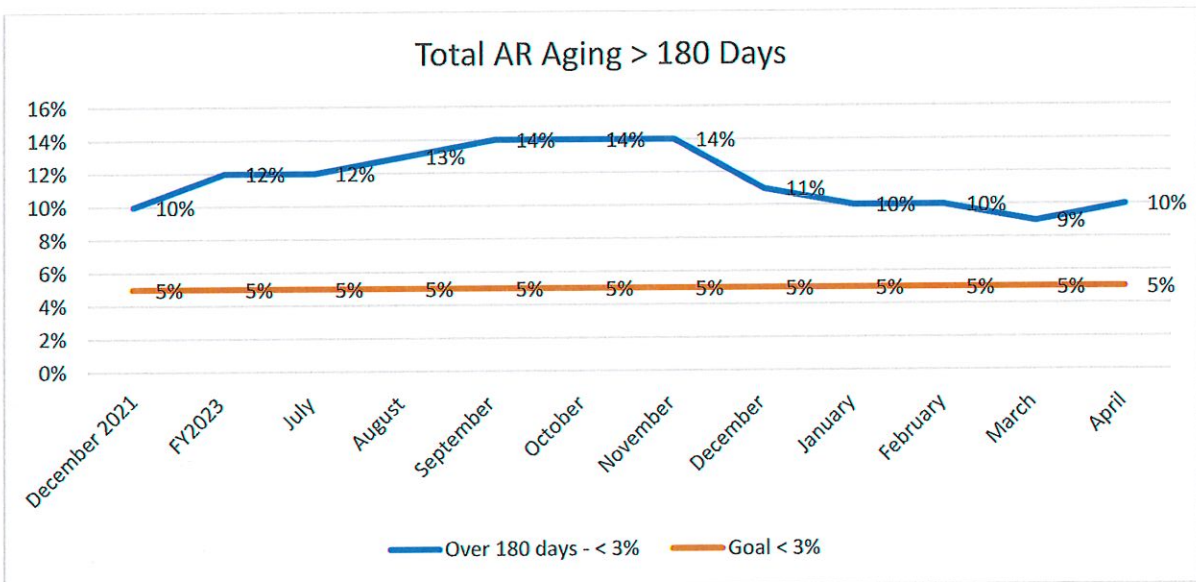
- Days over 90 days set be < 20% of total AR.
- Days over 120 days set at < 10% of total AR.
- Days over 180 days set at < 5% of total AR.



- Days over 90 days are at 30% for April, a result of the focus on DNFB as those accounts have now fallen into AR, tracked by their discharge date.



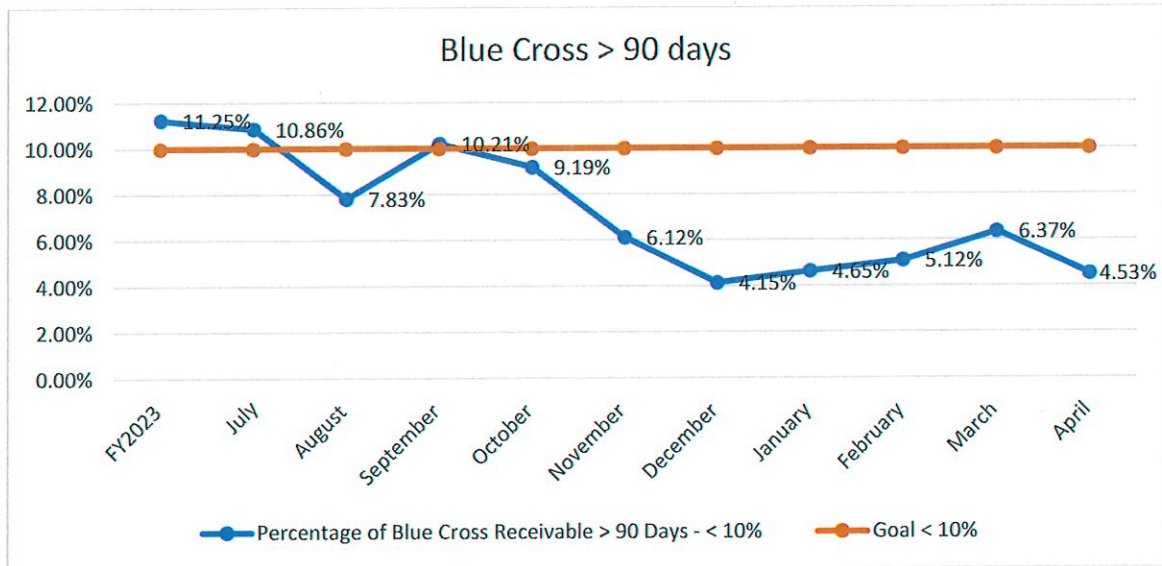
- Days over 120 days increased to 21% for April.



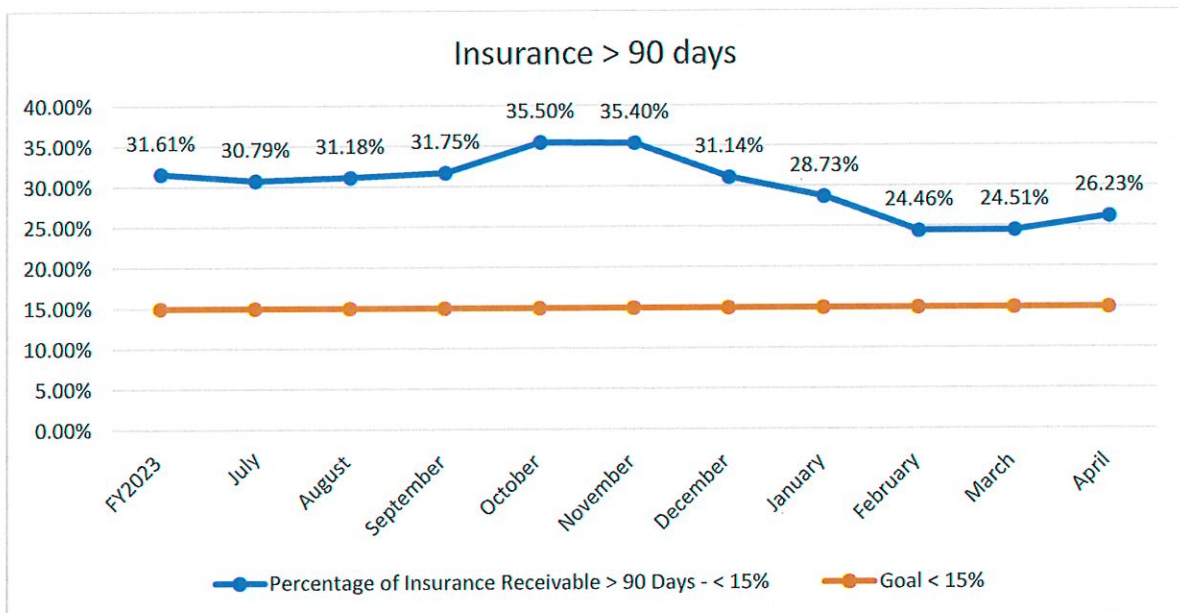
- Days over 180 days increased to 10% for April.

- **Days in AR by Payer** – These metrics show more detail of the aging AR by payer. We saw a decrease in the aging AR for Blue Cross, Commercial and Medicare with Medicaid staying right at the goal. These goals are as follows:

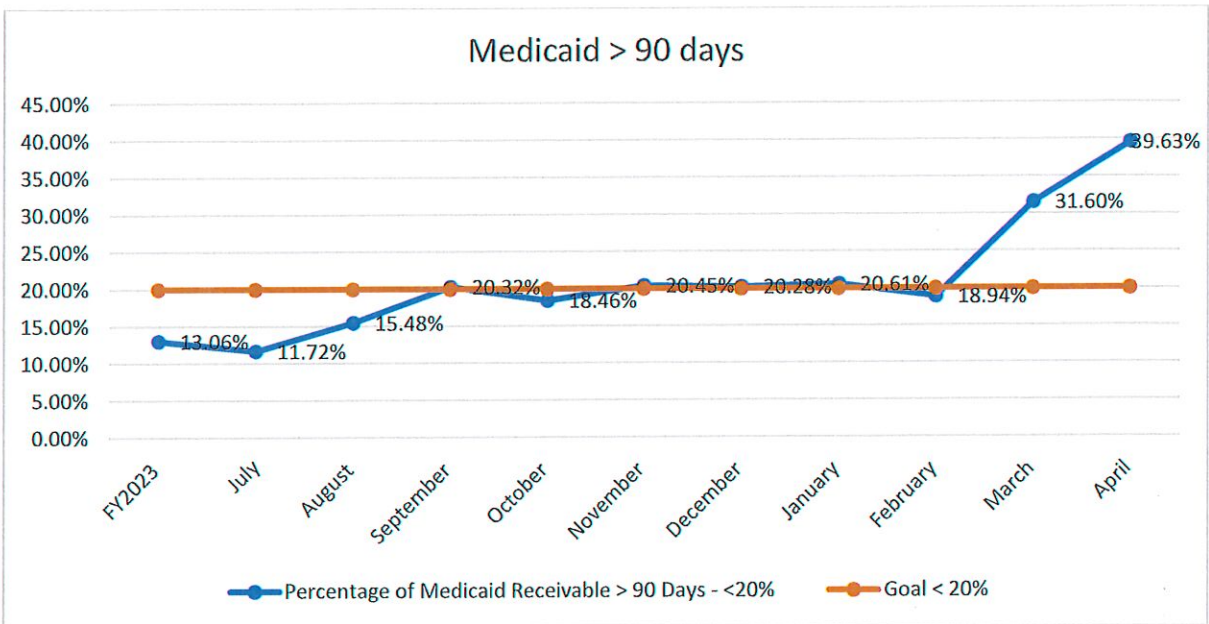
- BCBS Days in AR > 90 days less than 10%
- Insurance Days in AR > 90 days less than 15%
- Medicaid Days in AR > 90 days less than 20%
- Medicare Days in AR > **60 days** less than 6%



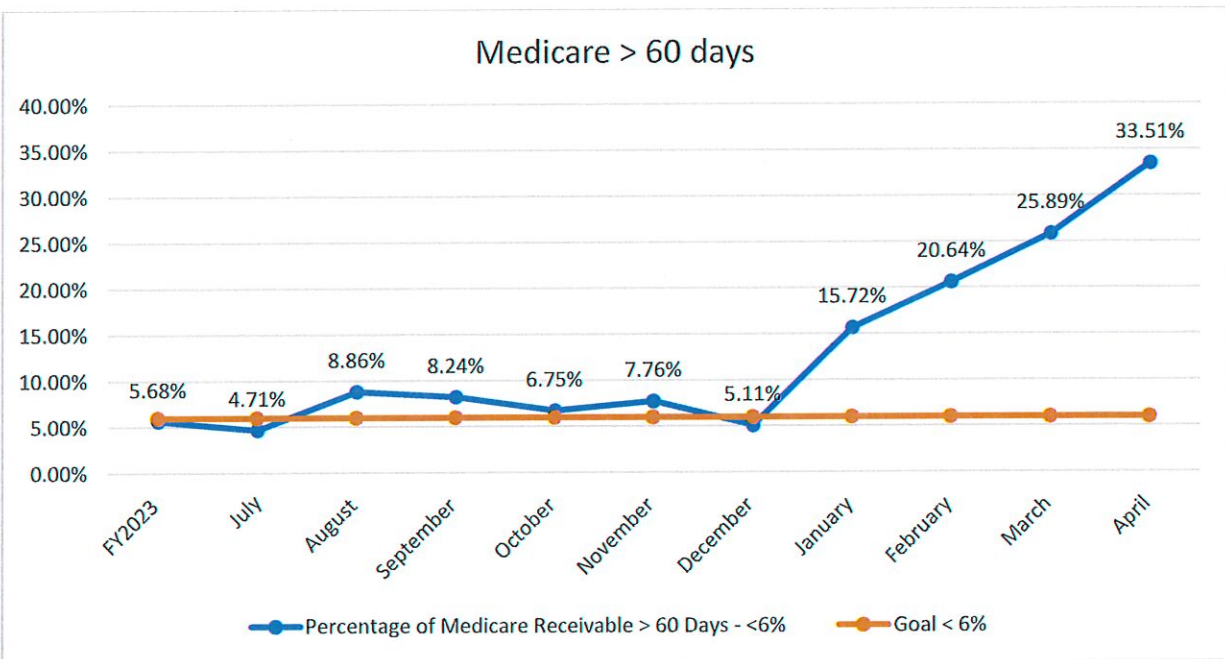
- Blue Cross aging remains under the goal of 10% in April.



- Commercial aging increased slightly, at 26.23% for April, as we focus on efficient workflows and train staff on denials management.



- Medicaid aging increased again in April as we continue to train the new Medicare/Medicaid biller. Aging is at 39.63%, over the 20% goal.



- Medicare saw another increase in aging > 60 days. We continue to train the new Medicare/Medicaid biller which is impacting the aging accounts.



Memorial Hospital Sweetwater County (MHSC)

Revenue Cycle: Paired Advisory Support

Project Summary – Period Ending: May 3, 2024

Executive summary of engagement actions and plans associated with the **Revenue Cycle Paired Advisory Support** for the period: **April 1, 2024, to May 3, 2024**. The project objectives are outlined below:

- **Patient Access Assistance** - to develop/implement a corrective action plan to address findings and recommendations from recent operational evaluation.
- **Business Office Assistance** – to develop/implement a corrective action plan to address findings and recommendations from recent operational evaluation.
- **Clinical Documentation and Coding Education** – to provide education and training to physician providers, coding, billing, and nursing staff on ICD-10-CM diagnosis coding guideline updates and changes, HCPCS/CPT procedural coding updates, Evaluation & Management levels as related to clinical documentation, coding, and billing compliance.

This summary is divided in the following four sections:

- Workplan Milestones
- Issues for Management Attention
- Major Accomplishments
- Timeline (Workplan)
- Expectations for the Next Reporting Period

PROJECT MANAGEMENT

Are milestones/deliverables being completed at the rate planned?		Ok – On track/Completed as Planned
	X	Concern – Trailing by 1 or 2 Milestones
		Problem – Trailing by > 2 Milestones

OVERALL DASHBOARD RATING

	RED	X	Red-Threat to project, intervention required
	YELLOW		Yellow-Shift in schedule or delay, moderate risk, or issues
	GREEN		Green-on schedule, minimal risks, or issues

Workplan Milestones	Finish Date	Responsible Party	Status
Project Mobilization <ul style="list-style-type: none">• Establish project governance structure, management tools, identify workgroup participants, and hold project kickoff meeting	12-05-23	CLA Consultants & Project Team Leader	Completed
Future State Workflow Redesign <ul style="list-style-type: none">• Patient Access• Business Office	12-31-23	CLA Consultants, Project Team Leaders, & Workgroups	Completed
Future State Workflow Build <ul style="list-style-type: none">• Patient Access	01-31-24	CLA Consultants, Project Team Leaders, & Workgroups	Completed





Workplan Milestones	Finish Date	Responsible Party	Status
Future State Workflow Build • Business Office	01-31-24	CLA Consultants, Project Team Leaders, & Workgroups	In Progress
Clinical Documentation/Coding Education • HIM Coding	12-31-23	CLA Consultants	Completed
Clinical Documentation/Coding Education • Providers	03-31-24	CLA Consultants	Completed



Issues for Management Attention

#	Issue	Definition/Impact	Action Plan	Status
01	Inappropriate assignment of charge capture posting and reconciliation of dialysis charge functions.	Billing staff completes dialysis charge functions. Activity impacts staff workload, productivity, and accuracy.	CFO to meet with Dialysis Leadership to request department be accountable for posting charges of services rendered in area. 02-09 -PFS leadership is currently testing a new approach with use of scanning application for general ledger updates/interface. 03-01: testing is still in progress. 03-20: Decision between scanning and care sets is in process. Meeting to take place after care set is built to test each process to determine most efficient option. 05-03: Dialysis staff has been trained and has taken ownership of entering charges.	Completed
02	Finance policy requires a \$90 payment for self-pay patients and at least a \$25-\$30 co-pay for insured patients.	Self-pay patients are unable to pay \$90 and co-pays are not being collected. Modify policy to require a minimum of \$25 to be collected upfront for self-pay and insured patients.	Modify Finance policy to reflect co-pay and self-pay requirement of \$25. 03-01:final review was being done to ensure that all forms/policies have been updated. 03-29: policy completed	Completed
03	Establishing workflow for patient collections across all clinical departments.	Registration staff collects owed funds as it relates to copays and self-pay patients.	Outstanding questions are resolved, and training schedule is established with all registration departments. 2-9-Training to take place the week of February 26. 03-01: Training completed	Completed



#	Issue	Definition/Impact	Action Plan	Status
04	Editing of patient statements	Patient statements need to be edited to reflect updated financial policy.	Ron to enter SR with Cerner 2/9-Waiting for SR to be entered. 03-01: Waiting for SR to be entered until after decision is made about patient finance company. Recommendation made to pause taking next steps on patient finance company and moving forward with edits to patient statements. 03-29: SR pending with Cerner and statement vendor. 05-03: Editing of statements has been completed.	Completed
05	Interpreter schedule is currently saved on Outlook calendar.	Team members are not currently able to access Outlook calendar.	Clinic Director to collaborate with Clinical Informatics team to establish schedule within Cerner. 2/9-Jodi is in the process of building schedule within Cerner. 03-01: Schedules completed	Completed
06	Lack of understanding regarding automated eligibility within Cerner.	Increase staff productivity by increased use of automation.	Clinic Registration Supervisor to collaborate with Clinical Informatics team to gain clearer understanding of functionality. 2/9-Jodi working with Cerner to gain clearer understanding of system set up. 03-01: Jodi will enter SR with Cerner to have all clinics set up in the same manner. 03-29: SR pending with Cerner 05-03: SR pending with Cerner	In Progress
07	Outstanding AR in legacy systems	Legacy system AR needs to be resolved so full attention can be placed on Cerner.	03-29: Legacy AR continues to decline but deadline of March 31 will not be met. 05-03: Legacy AR remains outstanding with a total of \$89K in Affinity. The Patient Financial Services Director has asked that the commercial AR be reviewed for a final time. Target date to stop working legacy AR is 5/31/2024.	In Progress 
08	Lack of understanding regarding patient AR work queues.	Continued increase in patient AR.	03-29: Gain understanding of patient AR workflow within Cerner. Manage outstanding patient AR from aging report 05-03: Feedback received from Cerner. CLA to work with Patient Financial Services Director and team to begin drafting policy and procedure.	In Progress 



#	Issue	Definition/Impact	Action Plan	Status
09	Re-structuring of Business Office phone tree	Alleviate phone volume from insurance billers	<p>03-29: Established phone tree structure and provided to IT in February. Waiting for set up to be completed.</p> <p>05-03: New phone tree that was set to take effect on 5/1 is not working as it was designed, therefore IT will need to review and correct set up. Additional work will also need to be completed by IT before remote worker can be incorporated into the phone through the Teams application. Both items should be priority items to alleviate phone calls that the billers receive so they can dedicate their time to outstanding AR.</p>	In Progress 
10	Outstanding DNFB that exceeds industry best practice of <u>> 4-days.</u>	Reduce backlogs of DNFB accounts waiting to be processed due to HIM-Coding, incomplete documentation, and billing.	<p>03-25: DNFB accounts total \$9.6M, which includes 3-day suspense period of \$2.2M, HIM-Coding of \$2.1M and \$5.3M due to processing concerns by Business Office.</p> <p>It was reported DNFB reports are monitored once per month by Business Office. It was agreed DNFB accounts must be worked daily. Leadership in HIM will be trained on how to generate the DNFB report and HIM and Business Office will work the weekly-Tuesday reports. Additionally, Business Office leadership will work closely with the billers to ensure daily tasks are prioritized in includes addressing outstanding billing holds due to DNFB.</p> <p>Weekly recurring meetings established with CLA to review progress made towards prioritization accounts for processing.</p> <p>05-01: DNFB of 5+ days has decreased from \$7.6M on 4/24 to \$6.4M on 4/30. A workgroup, that meets weekly, has been established by CLA to focus on strategy for reducing the dollars outstanding.</p>	In Progress 



DNFB

Hold Category	4/1/2024	4/9/2024	4/15/2024	4/23/2024	4/29/2024	4/30/2024
Bill Suppression Hold	\$2,580,754	\$2,363,408	\$2,241,334	\$1,743,263	\$2,168,634	\$2,151,130
Correction Required	\$112,940	\$212,546	\$121,539	\$204,724	\$211,613	\$203,101
Credit Balance - No Charges	\$0	\$0	\$0	\$0	\$0	\$0
Held in Scrubber-Submitted not transmitted	\$1,708,509	\$2,236,305	\$2,388,573	\$1,844,691	\$1,164,358	\$1,653,664
Ready to Bill	\$1,710,442	\$1,149,420	\$1,439,168	\$1,693,179	\$715,261	\$1,172,085
Standard Delay			\$15,121			
Waiting for Coding	\$1,516,227	\$1,693,892	\$2,267,191	\$2,350,816	\$1,456,653	\$1,295,078
Grand Total	\$7,628,871	\$7,655,572	\$8,472,926	\$7,836,673	\$5,716,520	\$6,475,058

Out of Scope

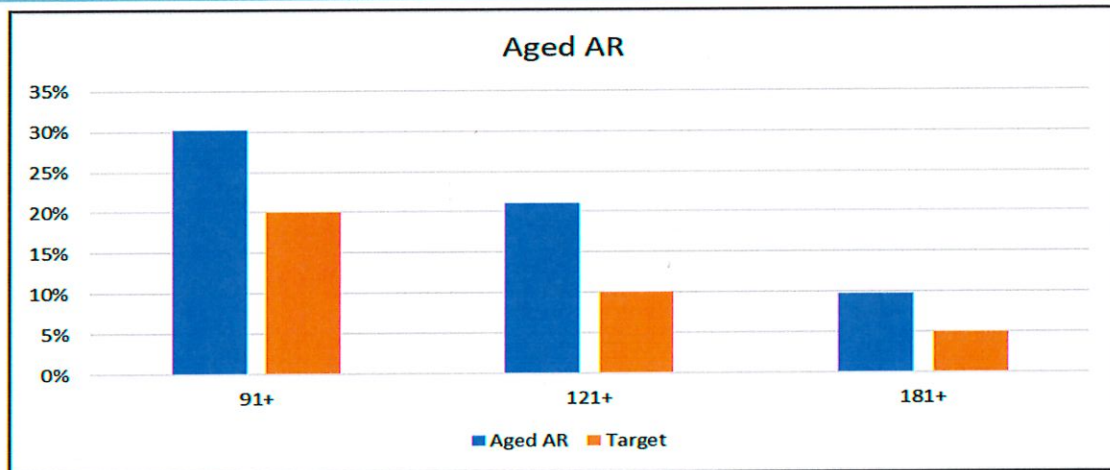
#	Activity	Action Pending/Taken
01	Patient Financing Options	03-01: Review of vendors has been completed and a list of pros and cons have been established. CLA has recommended that MHSC pause on making their final selection until consistent workflows have been created with the patient AR team as this is an immediate need due to the rising patient AR. 03-29: During onsite visit, discussions took place that indicated MHSC may be moving forward with choosing a vendor. No details were communicated regarding status of vendor proposals and possible starting dates.

Major Accomplishments for this Reporting Period

1. Denials Management Workgroup was launched, and initial monthly meeting was held on 4/30. Policies and procedures were reviewed, roles and responsibilities discussed regarding Denials Management Coordinator and designated department stakeholders who serve as Workgroup members.
2. Onsite Business Office meeting took place the week of 4/29. CLA worked with the Director of Patient Financial Services to establish a standard agenda and meeting cadence for future meetings.
3. Patient statements have been updated to reflect current financial policy.
4. Job descriptions for the Team Lead RC Specialist and Denials Management Coordinator were completed and have been approved by HR. Staff have also accepted the new roles and responsibilities.
5. Executive Leadership meeting took place on 4/30. During this meeting the top 5 KPI indicators were discussed and the frequency that the Director of Patient Financial Services should report out on were reviewed. The top 5 KPIs and frequency of each are as follows:



Days in A/R	< 50 Days	Weekly Tracking & Report-out
Aged A/R as a % of Billed A/R	<20% over 90 days, over 120 days < 10% & <5% over 180 days (Run by discharge date and break out by financial class. Drill down into payers with timely filing limits < 1 year)	Weekly Tracking & Report-Out
Discharged Not Final Billed (DNFB)	≤ 5 days of average daily revenue	Weekly Tracking & Report-Out
Denial Rate	≤ 15% average (based on state and national rates)	Monthly Tracking & Report-Out
Point of Service Collections	>2- 3% of monthly net revenue	Monthly Tracking & Report-out



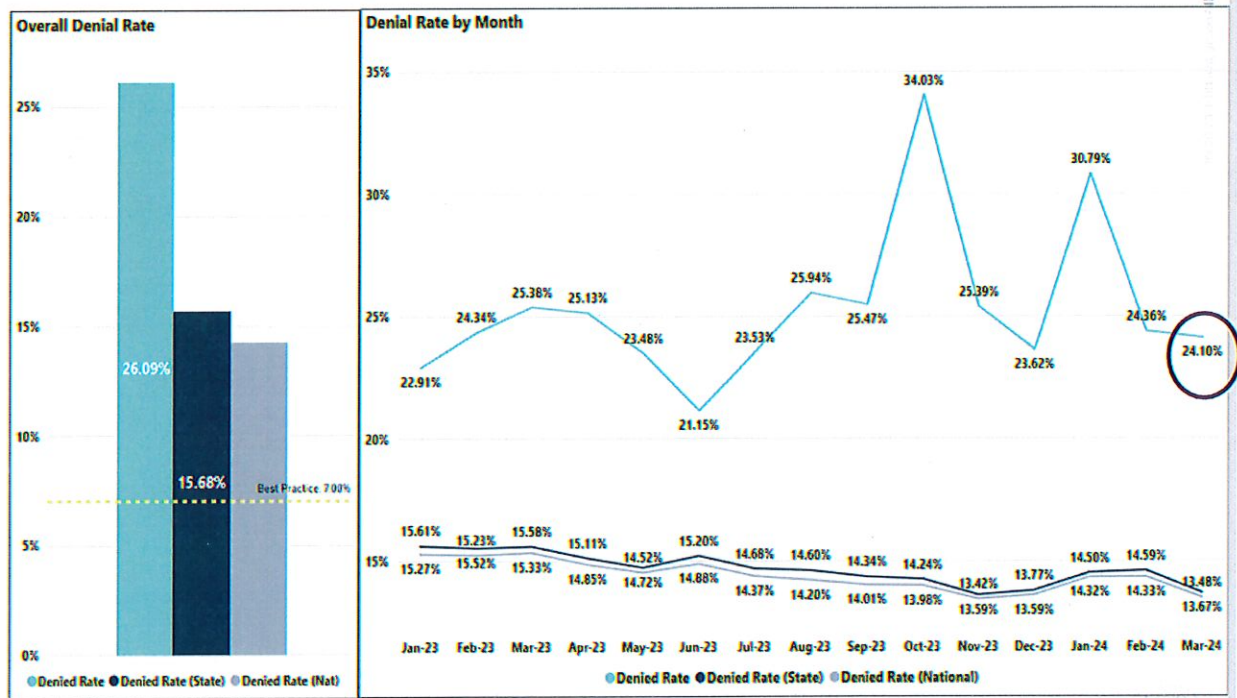
	Aged AR	Target
91+	30%	<20%
121+	21%	<10%
181+	10%	<5%



DNFB

Month	Monthly Average	Target #DNFB Days
April	13	≤5
March	14	≤5
Overall Average to Date	14 Days	≤5

Denial Analysis: Jan 2023 - March 2024



POS Collections

Calendar Year-to-date 2024 (April 26th)

- Total - \$80,315

Calendar Year – 2023

- Total - \$183,078

Projected POS by Calendar Year-end

- Estimated \$240,945

High-level Timeline (Workplan)

MHSC Project Plan V4						
ID	Task Mode	Task Name	Duration	Start	Finish	
1	★	Redesign & Implementation	153 days	Wed 11/1/23	Fri 5/31/24	
2	★	Project Mobilization	28 days	Wed 11/1/23	Fri 12/8/23	
3	★	Planning Meeting	22 days	Wed 11/1/23	Thu 11/30/23	
4	★	Onsite meeting	2 days	Tue 12/5/23	Wed 12/6/23	
5	★	Future State Model Definition & Design	44 days	Tue 12/5/23	Fri 2/2/24	
6	★	Patient Access	30 days	Tue 12/5/23	Mon 1/15/24	
9	★	Patient Financial Services	42 days	Tue 12/5/23	Wed 1/31/24	
16	★	Reporting/Data Analytics	30 days	Tue 12/5/23	Mon 1/15/24	
18	★	Policies and Procedures	98 days	Wed 11/1/23	Fri 3/15/24	
19	★	Patient Access	87 days	Wed 11/1/23	Thu 2/29/24	
23	★	Patient Financial Services	87 days	Wed 11/1/23	Thu 2/29/24	
28	★	Training	32 days	Thu 2/1/24	Fri 3/15/24	
34	★	Denials Management/Prevention Committee	96 days	Fri 2/16/24	Sun 6/30/24	
36	★	Parking lot items	129 days	Tue 12/5/23	Fri 5/31/24	

Expectations for the Next Reporting Period

The following major activities are scheduled to occur during the next reporting period.



Key Activity	Start Date	Completed Date
Kick-off Provider Clinical Documentation & Coding Education	02-12-24	03-25-24
Review phone tree flow chart	12-13-23	02-29-24
Finalization of pre-registration and registration process	12-5-23	01-31-24
Review action code report	12-13-23	01-31-24
Review of policies and procedures regarding newly established workflows	01-08-24	
Review of KPI reports/dashboard	01-08-24	05-03-24
Modifications to phone tree	02-29-24	
Review of Patient AR and Payment Posting Workflow	02-29-24	
Identify/train Denials Management Coordinator	03-05-24	05-03-24
Establish/Implement Denials Management Workgroup	04-01-24	05-03-24





Approved N/A
Review Due 3 years after approval

Document Area Board of Trustees

BOT - Investment Policy



Board of Trustees

STATEMENT OF PURPOSE:

This Statement of Investment Policy is adopted pursuant to the requirements of Wyoming Statute 9-4-831(h). It is the policy of Memorial Hospital of Sweetwater County (Hospital) to invest public funds in a manner which will provide a reasonable rate of investment return while assuring the maximum security of principal, meeting the daily cash flow demands, conforming to all federal, state and local laws and regulations governing the investment of public funds.

TEXT:

I. Scope

- a. This investment policy applies to all activities of the Hospital with regard to investing surplus public assets held in various Hospital restricted and unrestricted funds.
- b. Investment income will be allocated to the various funds based on their respective participation and in accordance with generally accepted accounting principles.

II. General Objectives – the primary objectives, in priority order, of investment activity shall be safety, liquidity, and yield.

- a. **Safety** – Safety of principal is the foremost objective of the investment program. Investments shall be undertaken in a manner that seeks to ensure the preservation of capital in the overall portfolio. The objective will be to mitigate credit risk and interest rate risk.

- i. **Credit Risk** – MHSC will minimize credit risk, which is the risk of loss due

to the failure of the security issuer or backer by:

1. Pre-qualifying the financial institutions, broker/dealers, intermediaries, and advisers with which the Hospital will do business in accordance with Section IV.
2. Diversifying the investment portfolio so that the impact of potential losses from any one type of security or from any one individual issuer will be minimized.

ii. **Interest Rate Risk** – The Hospital will minimize interest rate risk, which is the risk that the market value of securities in the portfolio will fall due to changes in market interest rates by:

1. Structuring the investment portfolio so that securities mature to meet cash requirements for ongoing operations, thereby minimizing the need to sell securities on the open market prior to maturity.
2. Investing operating funds primarily in shorter-term securities, money market mutual funds or similar investment pools and limiting the average maturity of the portfolio in accordance with this policy and Section VII.

- b. **Liquidity** – The investment portfolio shall be structured to remain sufficiently liquid to meet all operating requirements that may be reasonably anticipated. This will be accomplished by structuring the portfolio so that securities mature concurrent with cash needs to meet anticipated demands. Furthermore, since all possible cash demands cannot be anticipated, the portfolio shall consist of securities with active secondary or resale markets. Alternatively, a portion of the portfolio may be placed in money market mutual funds or local government investment pools which offer same day liquidity for short-term funds.
- c. **Yield** - The investment portfolio shall be designed with the objective of attaining a market rate of return throughout budgetary and economic cycles, taking into account the investment risk constraints and liquidity needs. Return on investment is of secondary importance compared to the safety and liquidity objectives described above. The core of investments are limited to relatively low risk securities in anticipation of earning a fair return relative to the risk being assumed. Securities shall generally be held until maturity with the following exceptions:
- i. A security with declining credit may be sold early to minimize loss of principal.
 - ii. A security swap would improve the quality, yield, or target duration of the portfolio.
 - iii. The security has increased in value and may be sold at an increase in value.
 - iv. Liquidity needs of the portfolio require that the security be sold.
- d. **Local Considerations** - Where possible, funds may be invested for the betterment of the local economy or that of local entities within the State. The Hospital may invest a

portion of the investment portfolio with eligible financial institutions at a lower rate of interest when the investment officer deems that the investment may benefit the local economy.

III. Standards of Care

- a. **Prudence** - The standard of prudence to be used by investment officials shall be the "prudent person" standard and shall be applied in the context of managing an overall portfolio. Investment officers acting in accordance with written procedures and this investment policy and exercising due diligence shall be relieved of personal responsibility for an individual security's credit risk or market price changes, provided deviations from expectations are reported in a timely fashion and the liquidity and the sale of the securities are carried out in accordance with the terms of this policy. The "prudent person" standard states that, "Investments shall be made with judgment and care, under circumstances then prevailing, which persons of prudence, discretion and intelligence exercise in the management of their own affairs, not for speculation, but for investment, considering the probable safety of their capital as well as the probable income to be derived."
- b. **Ethics and Conflict of Interest** - Officers and employees involved in the investment process shall refrain from personal business activity that could conflict with the proper execution and management of the investment program, or that could impair their ability to make impartial decisions. Employees and investment officials shall disclose any material interests in financial institutions with which they conduct business. They shall further disclose any personal financial/investment positions that could be related to the performance of the investment portfolio.
- c. **Delegation of Authority** - Authority to manage the investment program is delegated to the Chief Financial Officer (CFO), who shall act in accordance with established written procedures and internal controls for the operation of the investment program consistent with this investment policy. Such procedures shall include explicit delegation of authority to persons responsible for investment transactions.
 - i. In order to facilitate direct communication to the Board, the Finance and Audit Committee will be responsible for activities regarding the investment program including:
 - a. The periodic review of Hospital's investment activities.
 - b. The periodic review of the Hospital's investment policy.
 - ii. The Board will be responsible for approving any new investment activity as follows:
 - a. New investment types and instruments not previously approved by the Board.
 - b. New brokerage or dealer firms not previously approved by the Board.

IV. Authorized Financial Institutions, Depositories and Broker/Dealers

- a. A list will be maintained of financial institutions and depositories authorized to provide investment services. In addition, a list will be maintained of approved

security brokers and dealers.

- b. No public deposit shall be made except in a qualified public depository as established by Wyoming Statutes 9-4-817 through 9-4-828.
- c. All financial institutions and broker/dealer firms who desire to become qualified for investment transactions must provide a copy of a current Application of for Deposit of Public Funds. These documents will be reviewed annually by the Finance and Audit Committee.

V. Suitable and Authorized Investments

- a. **Investment Types** - In order to provide the broadest selection of investment opportunities, yet maintain satisfactory control of market and interest rate risk, the investment officer may invest in all instruments approved in W.S. 9-4-831.
- b. **Collateralization** - Collateralization will be required on investments with financial institutions when public monies on deposit exceed the amount insured by the Federal Deposit Insurance Corporation (FDIC). Collateral will be limited to the list of securities as described in Wyoming Statute 9-4-821.

VI. Safekeeping and Custody

- a. **Delivery vs. Payment** - All purchases of marketable securities will be executed by delivery to ensure that securities are deposited in an eligible financial institution prior to the release of funds.
- b. **Safekeeping** - Securities will generally be held by an independent third-party custodian selected by the CFO as evidenced by safekeeping receipts in the name of the Hospital. There may arise some instances where the securities may be held by the broker/dealer. The safekeeping institution shall provide information on their internal controls when requested by the CFO.
- c. **Internal Controls** - The CFO is responsible for establishing and maintaining an internal control structure designed to ensure that assets of the Hospital are protected from loss, theft or misuse. Accordingly, the CFO will ensure that an annual independent review of compliance is performed as part of the Hospital annual financial audit.

VII. Investment Parameters

- a. **Diversification** - The Hospital will attempt to diversify its investments by security type and institution. To provide assurance that the hospital will be able to continue financial operations without interruption and dependent upon interest rates, satisfaction with services and practicality, the hospital will generally attempt to utilize at least two financial institutions as depositories.
- b. **Maximum Maturities** - To the extent possible, the CFO shall attempt to match its investments with anticipated cash flow requirements. Unless matched to a specific cash flow, the CFO will not directly invest in securities maturing more than (5) years from the date of purchase or in accordance with state statutes.
- c. **Competitive Bids** - To ensure that securities are purchased at competitive prices, the CFO must maintain open communication with multiple broker/dealers and approved local banking contacts at all times. The Hospital may invest a portion of the

investment portfolio with eligible financial institutions at a lower rate of interest when the Board deems that the investment may benefit the local economy.

VIII. Policy Considerations

- a. **Exemption** - Any investment currently held that does not meet the guidelines of this policy shall be temporarily exempted from the requirements of this policy. At maturity or liquidation, such monies shall be reinvested only as provided by this policy.
- b. **Amendments** - This policy shall be reviewed on an annual basis by the Finance and Audit Committee. Any changes must be approved by the Board.

IX. Approval of Investment Policy

- a. The investment policy shall be approved by the Board. The policy shall be reviewed periodically by the Finance and Audit Committee and any modifications made thereto must be approved by the Board.

References

Wyoming State Statute 9-4-817 through 9-4-828, 9-4-831

Adopted: 12/18

Approval: Board of Trustees 8/4/21 (Pres. Jones, Sec. Kelsey)

Approval Signatures

Step Description	Approver	Date
In-house Legal	Suzan Campbell: General Legal Counsel	Pending

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: **FIBERTECH**
2. Purpose of contract, including scope and description: **HOSPITAL WINDOW WASHING SERVICE. NO CHANGE IN SERVICES OR COST FROM PRIOR YEARS.**
3. Effective Date: **July 1, 2024**
4. Expiration Date: **June 30, 2025**
5. Rights of renewal and termination: **not addressed in this letter agreement** Is this auto-renew **No**
6. Monetary cost of the contract and is the cost included in the department budget? **\$30,582.00**
7. Jurisdiction/Choice of Law provision checked and changed to Wyoming if able to so. **Wyoming company**
8. Any confidentiality provisions? **No**
9. Indemnification clause present? **No**
10. Is this contract appropriate for other bids? **No other local companies provide commercial window washing services**
11. In-house Counsel Reviewed: **Yes**
12. Is County Attorney review required? **No**

Contract Check List

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

1. Name of Contract: **MARTIN RAY LAUNDRY SYSTEMS**
2. Purpose of contract, including scope and description: **Preventative maintenance program for the hospital laundry equipment.**
3. Effective Date: **July 1, 2024**
4. Expiration Date: **June 30, 2025**
5. Rights of renewal and termination: **Not in this renewal** Is this auto-renew? **No**
6. Monetary cost of the contract and is the cost included in the department budget? **\$13,920.00 invoiced quarterly in amount of \$3480.00**
7. Jurisdiction/Choice of Law provision checked and changed to Wyoming if able to so. **Not addressed in this renewal**
8. Any confidentiality provisions? **NO**
9. Indemnification clause present? **No**
10. Is this contract appropriate for other bids? **This is the only laundry maintenance provider in the area**
11. In-house Counsel Reviewed: **Yes**
12. Is County Attorney review required? **No**