

THE BOARD OF SUPERVISORS
COUNTY OF LOS ANGELES
December 1, 2020
10:00 a.m.
Dial: 800-421-2233
Meeting ID: 999 9999 9999
Password: 999999

AGENDA

- I. Call to Order Taylor Jones
 - A. Roll Call
 - B. Pledge of Allegiance
 - C. [Our Mission and Vision](#) Ed Tardoni
 - D. Mission Moment Irene Richardson, *Chief Executive Officer*
- II. Agenda *(For Action)* Taylor Jones
- III. [Minutes](#) *(For Action)* Taylor Jones
- IV. Community Communication Taylor Jones
- V. Old Business Taylor Jones
 - A. COVID-19 Preparation and Recovery
 - 1. Incident Command Team Update Kim White, *Incident Commander*
 - B. Employee Policy *(from the Human Resources Committee)* *(For Action)* Ed Tardoni
 - 1. [Termination and Appeals](#)
 - C. [Rules of Practice Governing Hearings](#) *(For Action)* Richard Mathey
 - D. [Sentinel Event Policy](#) *(For Action)* Kara Jackson, *Director of Quality, Accreditation, Patient Safety*
- VI. New Business Taylor Jones
 - A. Board Policy *(from the Governance Committee)* *(For Review)* Barbara Sowada
 - 1. [Guidelines for Negotiating Non-Physician Provider Agreements](#)
 - 2. [Guidelines for Negotiating Physician Contracts](#)
 - B. [Patient Safety Plan](#) *(For Review)* Kara Jackson
- VII. Chief Executive Officer Report Irene Richardson
- VIII. Committee Reports
 - A. [Quality Committee](#) Marty Kelsey
 - B. [Human Resources Committee](#) Ed Tardoni
 - C. Finance & Audit Committee Richard Mathey
 - 1. [Capital Expenditure Request](#) *(For Action)*
 - 2. [State Loan and Investment Board Capital Expenditure Request](#) *(For Ratification)*
 - 3. Bad Debt *(For Action)*
[November Committee Meeting Information](#)
 - D. [Building & Grounds Committee](#) Marty Kelsey
 - E. Foundation Board Taylor Jones

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AGENDA

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| F. Compliance Committee | Ed Tardoni |
| G. Governance Committee | Barbara Sowada |
| H. Executive Oversight and Compensation Committee | Taylor Jones |
| I. Joint Conference Committee | Richard Mathey |
| IX. Contract Review | Suzan Campbell, <i>In-House Counsel</i> |
| A. Contract Consent Agenda (<i>For Action</i>) | |
| 1. Harmony Healthcare IT – Healthdata Archiver | |
| B. Contracts Approved by CEO since Last Board Meeting (<i>For Your Information</i>) | |
| 1. AdBay | |
| 2. Lincare | |
| X. Medical Staff Report | Dr. Lawrence Lauridsen, <i>Medical Staff President</i> |
| A. Supervising/Mentoring/Collaborating Physician Forms (<i>For Your Information</i>) | |
| XI. Good of the Order | Taylor Jones |
| XII. Executive Session (W.S. 14-405(a)(ix)) | Taylor Jones |
| XIII. Action Following Executive Session | Taylor Jones |
| XIV. Adjourn | Taylor Jones |



Memorial Hospital

OF SWEETWATER COUNTY

OUR MISSION

*Compassionate care for
every life we touch.*

OUR VISION

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

OUR VALUES

Be Kind

Be Respectful

Be Accountable

Work Collaboratively

Embrace Excellence

OUR STRATEGIES

Patient Experience

Quality & Safety

Workplace Experience

Growth, Opportunity & Community

Financial Stewardship

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

October 7, 2020

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

CALL TO ORDER

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

Officially present: Ms. Rene Richardson, Chief Executive Officer, Mr. Lawrence Lauridsen, Medical Staff President, Mr. Jim Phillips, Legal Counsel, Mr. Barryn McCarvey and Mr. Sean Heyle, Clifton Carson, LLC and Mr. Jeff Smith, Sweetwater County Commission Liaison.

Pledge of Allegiance

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

Our Mission and Vision

Mr. Sowada read aloud the mission and vision statements.

Mission Moment

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

APPROVAL OF AGENDA

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

APPROVAL OF MINUTES

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

COMMUNITY COMMUNICATION

There were no comments.

OLD BUSINESS

COVID-19 Preparation and Recovery - Incident Command Team Update

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

NEW BUSINESS

FY20 Audit Report

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

- the industry benchmark data

- operating margin □relatively steady □ottom line and Covid□19 funds are not reported as operating revenue□the organi□ation is trending in a positive direction from a revenue standpoint□
- total margin □adds in non□operating revenues and e□penses including interest e□pense on bonds and provider relief funds, fairly consistent with where it's been in the past)
- total □□□□□ is a great indicator of what is the cash flow from operations from the organi□ation and is relatively consistent within industry □enchmar□s
- operating loss per provider □□□ specifically the clinics focus on the trends□visits per provider □□□ □clinics□increased nicely in 2018□stayed pretty steady and then decreased in 2020 with impact from Covid
- days cash on hand sees huge growth almost identical to where we were in 2019
- net days in □R slowly trending in the upper direction and a testament to the □usiness office as they focused on driving down the length of time it takes to collect □R□percentage of □R over 90 days old encouraging data
- □ad de□t and charity care as a percent of gross patient service revenue significantly higher than other Clifton□arson□llen clients and is very demographic□ased and not a true apples to apples comparison
- de□t service coverage similar trend line as we see in total margin and consistent with the industry trends and well a□ove the re□uirement for the de□t agreement□de□t to capitali□ation loo□s at the organization's reliance to long term debt and nice to see well □elow the industry □enchmar□s
- average age of plant has □een a steady growth implies the organi□ation has some capital e□penditures on the hori□on and should see that start to come down in 2021

Mr. Mc□arvey said it is apparent the hospital could have held their own even without the Covid funds. He reviewed industry trends and Covid□19 impact on hospitals and health systems. He said the federal response was □uic□with a “ready□shoot□aim” approach. He said there has □een a flurry of activity with a lot of money distri□uted. □hey may have a hindsight 2020 approach when they revisit how those funds are used. Mr. Mc□arvey said if an organi□ation received more than □750□000 they will □e su□ject to a single audit. He said we do not have a lot of guidance on that yet. □he audit is due nine months after the fiscal year ends □ut the timeline may □e e□tended. He said Clifton□arson□llen performs more single audits than any other organi□ation in the country so they feel confident they can help us with that process. Mr. Mc□arvey said there are definitely more reporting re□uirements related to this as well. □hey really focused on lost revenue first and then e□penses second. □orty□eight hours ago□they again were redefining some of the definitions related to additional e□penses and healthcare capacity. □he Hospital has a□out □6.5M provider relief funds that we have recogni□ed in our income statement. □he rules may change so there is a ris□some of those funds may have to □e paid □ac□ to Health and Human Services. □here will □e additional guidance coming from them and we do not □now what that information will □e. Mr. Mc□arvey said there are a lot of un□nowns at this point. Clifton□arson□llen is advising clients and doing the □est they can with the information they have at the time. □hey are conducting a we□inar Octo□er 8 to tal□through some of these changes. Mr. Mc□arvey said there is a lot of good information in the meeting pac□et that is not related to Covid□19. He said the team did a great □□getting ready for the remote audit and it was a great audit. He said Clifton□arson□llen is happy to □e a partner and wor□through some of these things□and happy the Hospital had a successful year. Mr. □ones congratulated everyone in the Hospital responsi□le for the wor□to ensure a clean audit and he can see how well the organi□ation has done not only through Covid □ut in the last three years. He said it has really □een a lot of difficult times and adversity and to have it laid out in those graphs shows

a pretty plain picture. Mr. Jones said he wanted to thank everyone in the organization because it takes a team effort to hold it together and improve. Ms. Richardson thanked Ms. Love, Mr. Cheese, Ms. Payne and Ms. Rita Taylor. She said they did a great job and excellent work on the audit. Ms. Richardson spoke to the partnership between Clifton Carson Allen and the Hospital. She said they have been so helpful and literally right by our side as always but especially now. Ms. Richardson said we continue to try to make sense of all the changes coming pretty fast and furious. Mr. McCarvey said they appreciate the partnership and said the Hospital has a nice organization with great leadership and great board. He said he hopes that Covid slows and we can get back to some sense of normal in 2021. The motion to approve the 2020 Audit Report as presented was made by Mr. Mathey second by Mr. Cardoni. Motion carried.

Board Policy – Maintenance of Board and Board Committee Meeting Minutes

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

Employee Policy – Political Activity

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

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

CHIEF EXECUTIVE OFFICER REPORT

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

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

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

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

correctly. This new guidance may not be as beneficial to hospitals so we have been asked to submit letters to our legislators requesting they go back to the June guidance for reconciling the funds. As of Monday the guidance even changed then. Ms. Richardson said we are trying to stay on top of it and she will keep the board updated as to any changes that come up. She said we feel confident Health and Human Services' interpretation of capital expenditures is considered expenses so we think we could use that for the HCC project and a remodel. The motion to authorize the CEO to proceed with the HCC and CC projects being fully aware of the cost of these projects being 4384930 was made by Mr. Mathey second by Mr. Cardoni. Motion carried.

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

COMMITTEE REPORTS

Quality Committee

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

Human Resources Committee

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

Finance and Audit Committee

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

Capital Expenditure Requests: Mr. Mathey reviewed capital expenditure request 002117 for a cone system submitted by Ms. Harris for Mr. Joshua Sims Radiation Oncologist. Mr. Mathey said more detail is available in the packet. The motion to approve 002117 as requested was made by Mr. Mathey second by Mr. Cardoni. Motion carried. Mr. Mathey reviewed capital expenditure request 002123 submitted by Ms. Leslie Taylor Clinic Director for equipment for the neurologist who is scheduled to be on board later this calendar year. He said more detail is available in the packet. The motion to approve 002123 as requested was made by Mr. Mathey second by Mr. Cardoni. Motion carried.

Bad Debt: The motion to approve the net potential bad debt of 936722.29 as presented by Mr. Cheese was made by Mr. Mathey second by Mr. Cardoni. Motion carried.

Building & Grounds Committee

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

Foundation Board

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

Compliance Committee

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

Governance Committee

Mr. Sowada said the minutes are in the packet.

Executive Oversight and Compensation Committee

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

Joint Conference Committee

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

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

CONTRACT REVIEW

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

MEDICAL STAFF REPORT

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

GOOD OF THE ORDER

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

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

EXECUTIVE SESSION

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

RECONVENE INTO REGULAR SESSION

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

ACTION FOLLOWING EXECUTIVE SESSION

Approval of Privileges

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

Credentials Committee Recommendations from September 15, 2020

1. Initial appointment to Active Staff 2 years
 - Mr. Tony Pedri Orthopaedic Surgery
2. Initial appointment to Consulting Staff 1 year
 - Mr. Mansour Haddad Cardiovascular Disease Casper Cardiology
3. Initial appointment to Locum Tenens Staff 1 year
 - Mr. Heidi Hannon Radiology
4. Reappointment to Consulting Staff 2 years
 - Mr. Clint Illred Cardiovascular Disease III of III
 - Mr. Rashmee Shah Cardiovascular Disease III of III
 - Mr. Raoul Dougan Gastroenterology Gastroenterology Assoc. Casper
5. Reappointment to Locum Tenens Staff 1 year
 - Mr. Jonathan Roddy Emergency Medicine III of III

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

ADJOURNMENT

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

Mr. Taylor Jones President

Test:

Mr. Marty Halsey Secretary

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

October 29, 2020

The Board of Trustees of Memorial Hospital of Sweetwater County met via Zoom in a special workshop on October 29, 2020 at 2:00 PM with Mr. Taylor Jones, President, presiding.

CALL TO ORDER

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

Officially present: Ms. Rene Richardson, Chief Executive Officer, Mr. Jeff Smith, Sweetwater County Commission Liaison.

Pledge of Allegiance

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

Our Mission and Vision

Mr. Elsey read aloud the mission and vision statements.

Mission Moment

Ms. Richardson read aloud some comments regarding the Albin Clinic from Sweetwater County Business Feedback. The original message said patients were treated professionally and with kindness and heart. Following the original post, several favorable comments were added by others about the Clinic. Ms. Richardson said she is very proud of the Clinic and all they are doing.

APPROVAL OF AGENDA

Mr. Jones said the meeting is abbreviated and the Board will only take action on something we need to take action on. He said one of the reasons we are not reviewing everything is because we didn't have all the groups meeting before the packet and notices, so we are having an abbreviated meeting. He gave a reminder this workshop takes the place of the regular November meeting. The motion to approve the agenda as amended to move "action following executive session" immediately after the executive session was made by Mr. Sowada, second by Mr. Elsey. Motion carried.

COMMUNITY COMMUNICATION

Mr. Jones said this is not an action item but he wanted to give the public a chance to address the Board. Ms. Richardson reminded everyone the Halloween Cruise thru in the Haunted Garden is a socially distanced drive thru event on Friday, October 30 from 4:00 – 6:00 PM. Ms. Richardson

introduced Ms. Carrie Canestorp, Director of Health Information Management. Mr. Jones welcomed Ms. Canestorp.

OLD BUSINESS

Board Policy – Maintenance of Board and Board Committee Meeting Minutes

Mr. Sowada said the information is in the packet. She said the basic purpose is to outline how all Board and Committee minutes will be cared for. The policy was presented at the last meeting for review. The Governance Committee recommends passage by the Board. The motion to approve the policy as presented was made by Mr. Mathey, second by Mr. Sowada. Motion carried.

NEW BUSINESS

Medical Imaging Project

Ms. Richardson said she sent an email with the anticipated cost of renovation of the medical imaging area. She said the area other than CT and Mammography has been relatively untouched and is in need of renovation. We received State and Investment Board \$500,000 grant money for the H&C system. During the process it was identified some areas must be vacant for some of the H&C system work so we thought that would be an opportunity to make some much needed renovations to that area. Mr. Dale Levins, S&E Engineering, said Mr. Bill Heatley, Plan One Architects, has been more involved but agreed the timing is perfect. Ms. Richardson recommends we move forward with the project and said we can use Board reserve funds. She would like permission to contract with a Construction Manager not Risk CM and sign a contract with the architect to start the project as soon as possible. She said if the final cost exceeds the amount approved then she will bring it back to the Board for approval similar to the action taken with the Cafeteria remodel. Mr. Elsey asked if the source will be C&S trust funds. Ms. Richardson said reserves is where we are putting reconciled C&S loss funds from loss of revenue. She said we won't be subject to the June 30 deadline. Ms. Tami Love, Chief Financial Officer, said we will have approximately \$18.5M in that account by the end of December. Ms. Love outlined that fund and Mr. Elsey thanked her for the information. The motion to authorize the CEO to move forward with the medical imaging renovation project as outlined in the October 26 email and authorize the CEO to use Board funds to contract with a CM and architect for the project as presented was made by Mr. Mathey, second by Mr. Elsey. Motion carried.

SLIB Capital Expenditure Request

Mr. Mathey said the request is for money that has been spent already. Reimbursement will be sought from the applicable S&E grant. The motion to approve the ratification of S&E capital expenditure request 2021-29 expenditures as presented was made by Mr. Mathey, second by Mr. Cardoni. Motion carried.

COMMITTEE INFORMATION

Compliance Committee

Mr. Cardoni said the purpose of the Compliance Committee is to monitor if compliance activities are occurring. It is not their job to monitor the outcome or results of the activities. There is a hospital workgroup that follows through. For example, an audit was conducted of the credentialing committee and a risk analysis was sent to the Quality Committee for review and approval.

Joint Conference Committee

Ms. Perry owns Medical Staff Services Director gave an update on the Medical Executive Committee and bylaws. She said we have to send them out to the Medical Staff twenty days ahead of the vote on December 1. Mr. Mathey asked if they can vote if they do not attend the meeting. Ms. Perry and Ms. Richardson said they believe they must attend via Zoom or in person.

EXECUTIVE SESSION

Mr. Jones said there would be an executive session for personnel. The motion to go into executive session was made by Mr. Mathey second by Mr. Cardoni. Motion carried.

RECONVENE INTO REGULAR SESSION

At 3:06 PM the board came out of executive session and the motion to go back in to regular session and resume the special workshop of the board was made by Mr. Mathey second by Mr. Sowada. Motion carried.

ACTION FOLLOWING EXECUTIVE SESSION

Approval of Privileges

The motion to approve credentials and renew approval of privileges to healthcare providers as discussed in executive session was made by Mr. Mathey second by Mr. Perry. Motion carried.

Credentials Committee Recommendations from October 13, 2020

1. Reappointment to Active Staff 2 years
 - Mr. Dan Symington Hematology/Oncology
2. Reappointment to Consulting Staff 2 years
 - Mr. Christian Chan Director Radiology RC
3. Reappointment to Locum Tenens Staff 1 year
 - Mr. Philip Sam Emergency Medicine of
 - Mr. Gary van Heuvelen Radiation Oncology
 - Mr. Margaret Barnes Radiation Oncology

The motion to authorize the CEO to execute the medical directorship contract discussed in executive session was made by Mr. Mathey second by Mr. Sowada. Motion carried.

Mr. Jones announced the Board would take a break at 3:08 PM and resume the workshop at 4:00 PM.

QUALITY COMMITTEE PRESENTATION

Ms. Richardson said that every year the Board has special workshops with the Finance and Audit Committee and the Quality Committee. She introduced the presenters: Ms. Mari Quicenden Chief Clinical Officer, Ms. Sara Jackson Director of Quality Accreditation Patient Safety, Ms. Marali Plonsky Quality Analyst, Ms. Alpana Pohrel Quality Analyst, Mr. Corey Jordan Quality Analyst and Ms. Lodi Corley Clinic Systems Analyst/Informatics. Ms. Jackson said the group appreciated the opportunity. Each presenter took a turn reviewing information in a PowerPoint presentation on broad overviews of the following topics:

- Accreditation
- Performance Improvement and Patient Safety (PIPS)
- Patient Safety
- Culture of Safety Survey
- Press Ganey
- Star Rating Program
- Merit-based Incentive Payment System

The PowerPoint presentation will be available for the Board to review. Ms. Jackson said we recognize Quality is very complex with a lot of moving parts. Mr. Jones commended everyone for their work and progress as well as the improvements that have taken place. He said he looks forward to what is coming in the future. Ms. Jackson thanked her team and Ms. Quicenden for her support and leadership. Mr. Jones said it takes a team. Mr. Kelsey added his thanks to staff for the good work being done. Mr. Mathey and Mr. Kelsey met to review the quality consultant's report and have asked staff for their recommendations. Mr. Mathey and Mr. Kelsey will report back to the Board. Ms. Quicenden said Quality is a great team to work with and there is a lot of great work going on. She said she feels really good about where the work is going. She thanked the Board for their support. Ms. Richardson thanked the team and said they did great work and it was a great presentation.

ADJOURNMENT

There being no further business to discuss the meeting adjourned at 5:48 PM.

Mr. Taylor Jones President

Test:

Mr. Marty Kelsey Secretary

Termination and Appeal

General:

This Termination and Appeal policy and procedure applies to all employees of Memorial Hospital and to non-employed physicians. Only the Hospital's Chief Executive Officer (CEO) has the authority to terminate the employment of a Hospital employee and must provide a written directive to the Human Resources Office prior to any termination proceeding.

This Termination and Appeal policy and procedure does not apply to reduction-in-force (layoffs) due to a lack of funds, lack of work or other reasons.

From the time an employee is notified that he/she is being terminated, until all internal appeal avenues have been exhausted, the employee is entitled to continuing regular pay. At the discretion of the Hospital, the employee may be suspended with pay during this period of time, or may continue working. Should an employee resign, however, pay will cease at that time.

Employees may not utilize the Hospital's Conflict Resolution policy to address termination decisions.

Definitions:

At-Will Employee

An employee who works for the Hospital and is in the "Introductory Period", per Hospital policy. It is understood that no consideration has been furnished to the Hospital for the employment of the employee other than the employee's services. Any employee has the right to terminate his/her employment with the Hospital and the Hospital has the same right.

Part Time Employee

An employee who occupies a position and is scheduled to normally work less than thirty (30) hours in a workweek.

Full Time Employee

An employee who occupies a position and is scheduled to normally work thirty (30) hours a week or more. These include Non-Physician Providers as defined in the Medical Staff Bylaws.

Termination:

The involuntary termination of an employee by the Hospital's CEO.

Termination of "At-Will" Part Time Employees

Notice of termination shall be provided by the Director of Human Resources, or designee, upon a written directive from the CEO, by registered or certified mail to the last known address of such employee. Proof of such written notice, together with the proof of mailing, shall be kept and retained in the records of the Hospital. Although one or more steps in the Hospital's

Corrective Action Policy may be applied, the Hospital will not necessarily give the employee formal reasons for the termination.

Should the employee believe that the termination decision was based on the exercise of his or her constitutional rights, and/or that he or she has a reasonable expectation of continued employment, and/or that the action to terminate his or her employment would stigmatize him or her, the employee may appeal the decision to the CEO in writing within ten (10) calendar days of notification of termination. The CEO will review the written appeal and may (or may not) determine to interview the employee and/or discuss the matter with supervisory or other personnel. The CEO shall inform the employee of his or her decision in writing. The CEO's decision in this matter is final.

Termination of Non "At-Will" Part Time Employees

Notice of termination shall be provided by the Director of Human Resources, or designee, upon a written directive from the CEO, by registered or certified mail to the last known address of such employee. Proof of such written notice, together with the proof of mailing, shall be kept and retained in the records of the Hospital. The employee shall be provided reasons for the termination by the Hospital.

Should the employee decide to appeal the termination decision, the employee may appeal the decision to the CEO in writing within ten (10) calendar days of notification of termination. The CEO will review the written appeal and may (or may not) determine to interview the employee and/or discuss the matter with supervisory or other personnel. The CEO shall inform the employee of his or her decision in writing. The CEO's decision in this matter is final.

Termination of "At-Will" Full Time Employees

The Director of Human Resources, or designee, having first received a written directive from the CEO, shall terminate the employment of a full time employee who is in the "Introductory Period" upon notification in writing of such decision by registered or certified mail to the last known address of such employee. Proof of such written notice together with the proof of mailing, shall be kept and retained in the records of the Hospital. Reasons for the termination decision shall not be given, other than outlined below.

Should the employee believe that the decision to terminate his or her employment was based on the exercise of his or her constitutional rights, and/or that he or she has a reasonable expectation of continued employment and/or that the action to terminate his or her employment would stigmatize him or her, the following procedure will take place:

1. The employee may request a hearing before an Administrative Hearing Officer by requesting same in writing within ten (10) calendar days of receipt of the termination notice. The request shall be made to the CEO.

2. The CEO shall immediately notify the Board of Trustees' attorney of the request and shall forward the written request for a hearing to him or her. The Board of Trustees' attorney shall then arrange for an Administrative Hearing Officer to conduct a pre-hearing conference as soon as practical.
3. At the request of the Administrative Hearing Officer, the CEO shall submit to the Administrative Hearing Officer his or her reasons for termination. At the same time, the Administrative Hearing Officer shall request the employee to submit to the Administrative Hearing Officer substantial evidence that the termination decision was based upon an exercise of his or her constitutional rights and/or that he or she has a reasonable expectation of continued employment, and/or how the action of termination would stigmatize him or her.
4. After reviewing the reasons for the termination and any evidence submitted by the employee, the Administrative Hearing Officer shall determine that:
 - a. Sufficient evidence has been presented by the employee to warrant a formal hearing by the Administrative Hearing Officer. In such case, a hearing will be scheduled and, at the conclusion of the hearing, the Administrative Hearing Officer will submit a written copy of his or her findings, conclusions, and recommendations to the Board of Trustees for a final decision.

OR

- b. Insufficient evidence has been presented by the employee to warrant a formal hearing by the Administrative Hearing Officer. In such a case, the Administrative Hearing Officer will inform both the CEO and the employee of his or her findings. The CEO shall discuss these findings with the Board of Trustees' attorney and will subsequently make a recommendation to the Board of Trustees for a final decision.
5. If the Administrative Hearing Officer determines that a formal hearing shall be held, he or she will immediately provide the employee the CEO's reasons for termination and will immediately provide the CEO with any evidence submitted by the employee.

OR

If the Administrative Hearing Officer determines that a formal hearing is not warranted, upon request, he or she will provide the employee the CEO's reasons for termination.

6. Every reasonable effort shall be made by the Hospital to ensure that these due process proceedings are conducted in a timely manner. The Administrative Hearing Officer shall make a determination as to whether or not a formal hearing is warranted within thirty (30) calendar days from receipt of notice by the Board of Trustees' attorney. Should the Administrative Hearing Officer determine that a formal hearing be conducted, he or she shall notify the Board of Trustees' attorney of same. The Board of Trustees' attorney shall then arrange for a pre-hearing conference as soon as practical. The formal hearing

shall be held within thirty (30) calendar days following the pre-hearing conference. The Hospital shall pay for all administrative costs associated with the hearing including fees charged by the Hearing Officer and transcription services. The parties shall pay their own legal fees, if any. The Hospital's Rules of Practice Governing Hearings shall be followed. Should the Administrative Hearing Officer determine that a formal hearing is not warranted, a recommendation regarding the disposition of the case shall be made to the Board of Trustees within thirty (30) calendar days of the Administrative Hearing Officer's determination.

Termination of Non "At-Will" Full Time Employees

The Director of Human Resources, or designee, having first received a written directive from the CEO, shall terminate the employment of a full time employee who is not in the "Introductory Period", upon notification in writing of such decision by registered or certified mail to the last known address of such employee. Proof of such written notice together with the proof of mailing, shall be kept and retained in the records of the Hospital.

Prior to making the decision to terminate a full time employee in this category, and prior to notifying the employee of the decision, the CEO shall conduct an informal Pre-Determination Opportunity Meeting. The CEO shall notify the employee of the meeting by any appropriate means, giving the employee at least a week's notice. The employee may waive his or her right to participate in the meeting. At the meeting, the Hospital's Director of Human Resources, or designee, shall be in attendance. The employee's supervisor shall also be in attendance, unless the employee plans to attend the meeting and objects to same. The employee is allowed to have a limited number of other individuals attend this meeting and to speak in support of the employee.

At the Pre-Determination Opportunity Meeting, the CEO shall inform the employee that he or she is considering terminating the employee's employment at the Hospital. The CEO's reasons for considering the possible termination shall be shared with the employee. The employee shall be informed that this is an opportunity for the employee to share with the CEO information regarding his or her employment that the CEO can take into consideration prior to making a decision whether or not to terminate the employee.

Subsequent to the Pre-Determination Opportunity Meeting, the CEO shall make a decision. Should the CEO make the decision to terminate the employee, the employee shall be notified as set forth above. If the employee decides to appeal the termination decision, the following procedure will take place.

1. The employee may request a formal hearing before an Administrative Hearing Officer by requesting same in writing within ten (10) calendar days of receipt of the termination notice provided by the Hospital's Human Resources Office. The request shall be made to the CEO.

2. The CEO shall immediately notify the Board of Trustees' attorney of the request and shall forward the written request for a hearing to him or her. The Board of Trustees' attorney shall then arrange for an Administrative Hearing Officer to conduct a pre-hearing conference as soon as practical.
3. Every reasonable effort shall be made by the Hospital to ensure that these due process proceedings are conducted in a timely manner. The hearing shall be held within thirty (30) calendar days following the pre-hearing conference.
4. The Hospital shall pay all administrative costs associated with the hearing including fees charged by the Hearing Officer and transcription services. The parties shall pay their own legal fees, if any.
5. The Hospital's Rules of Practice Governing Hearings shall be followed.

Physicians

An independent (non-employed) physician who raises a constitutional defense to a credentialing or privileging decision by MEC may avail himself of this Termination and Appeal process.

An employed physician who raises a constitutional defense to a credentialing or privileging decision by MEC may avail himself of this Termination and Appeal process.

An employed physician who raises a constitutional defense to an adverse employment action, such as termination under his/her Professional Services Contract, and believes the termination was based on the exercise of his or her constitutional rights, and/or that he or she has a reasonable expectation of continued employment, and/or that the action to terminate his or her employment would stigmatize him or her may avail himself of the Termination and Appeal process.

POLICY _____

RULES OF PRACTICE GOVERNING HEARINGS

The Board of Trustees of Memorial Hospital of Sweetwater County adopts the following Rules of Practice Governing Hearings

Reference W.S. 16-3-107 through 16-3-112 as amended from time to time.

The Board adopts the following amended Rules of Practice Governing Hearings:

I. Definitions.

- (a) "Board" shall mean the Board of Trustees of Memorial Hospital of Sweetwater County.
- (b) "Hospital" shall mean Memorial Hospital of Sweetwater County.
- (c) "President" shall mean the President of the Board of Trustees of the Hospital, or in his/her absence the Vice President or other member of the Board designated by the Board to preside at any hearing.
- (d) "CEO" shall mean the Chief Executive Officer of the Hospital.
- (e) "Secretary" shall mean the secretary of the Board.
- (f) "Contestant" shall mean any person whose legal rights, duties or privileges pursuant to the policies and procedures of the Board are required to be determined by the Board in a hearing before the Board.

II. Contests.

A contest may be initiated by any person, herein referred to as the contestant, seeking any decision, order, ruling or any other appropriate action to be taken by the Board when such action, if taken by the Board would affect the rights of the contestant or any other person. A contest is initiated by the filing of a written request for a hearing, with the Secretary of the Board.

III. Request for Hearing.

Any contestant desiring a hearing must file with the Secretary of the Board a written request, setting forth the following:

- (a) The name of the contestant and the name of the Board or person adversely complaining.

- (b) A statement in ordinary, concise language of the facts on which the request is based, including reference to particular law or rules involved.
- (c) A request for hearing.
- (d) The address of the contestant, and the name of his/attorney, if any.
- (e) Upon receipt of a request for hearing, the Board shall follow the procedures set forth in the MHSC Termination and Appeal Policy (Policy # _____), if required.

IV. Notice of Hearing.

Upon the Board determining that a full due process hearing is appropriate, the Board shall cause written notice of any hearing held under these rules to be served upon each contestant at least ten (10) days prior to the date set for the hearing. Such notice shall include a statement of:

- (a) The time, place, and nature of the hearing.
- (b) The legal authority and jurisdiction under which the hearing is to be held.
- (c) Such other matters as may be required by the Wyoming Administrative Procedures Act.

V. Service of Notice.

Service may be made either personally or by certified or registered mail as follows:

- (a) Personally: Said service, if made by Sheriff, or other official, shall be made in the manner prescribed by the Wyoming Rules of Civil Procedure. Said Service may be made by any person, not an officer, who is of lawful age, and not a party of interest. The return of said service shall be made by the certification of the officer or person, by his/her affidavit. Such return of service must be filed with the Board prior to commencement of the hearing.
- (b) By certified or registered mail to the last known address of contestant.

VI. Motions.

The Board may, at any time after three(3) days notice to all parties, hear orally or otherwise any motion filed in connection with hearings under these rules.

VII. Docket.

When a proceeding is instituted by the filing of a petition, the Secretary shall assign it a number and enter the proceedings, with the date of its filing, on a separate page of the docket

provided for such purpose. The Secretary shall establish a separate file for each docketed case, in which shall be systematically placed, all paper, pleadings, documents, transcripts and evidence pertaining thereto and all such items shall have noted thereon, the docket number assigned, and the date of filing.

VIII. Form of Pleadings.

The form of pleadings or other papers filed in each docketed case shall be substantially as follows:

BEFORE THE BOARD OF TRUSTEES

OF

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

STATE OF WYOMING

IN THE MATTER OF

_____ Docket No. _____
Contestant

PETITION
(Request for Hearing, Motion, Answer, Etc,)

(Body of Pleading or Motion)

(Signature) _____

Name (Typed or Printed)
Title

(Signature) _____
Name (Typed or Printed)
Address
Attorney

IX. Disposition of Case by Stipulation.

Any case may be finally disposed of by stipulation, agreed settlement, consent, order or default of the parties, approved by the Board An appropriate order accordingly shall be entered in the case record.

X. Continuances.

For good cause shown, continuances and extensions of time may be granted or denied in the discretion of the Board, provided that except where both parties agree, no continuances shall be granted which shall extend the time for hearing beyond the time in which such hearing must be held as provided by law.

XI. Pre-Hearing Conference.

At a time on or before the day of the hearing, the Board may direct the attorneys for the parties to appear before the Board to consider:

- (a) The simplification of the issues.
- (b) The necessity or desirability of amending the pleadings.
- (c) The possibility of obtaining admissions of fact and of documents which will avoid unnecessary proof.
- (d) Such other matters as may aid in the disposition of the case.

Such conferences shall be conducted informally. A memorandum will be prepared which recites the actions taken at the conference, amendments allowed, agreements of the parties and limitation of the issues to those undisposed of by admissions or agreements of counsel and the parties. The pre-hearing memorandum will control the course of the hearing unless modified by the Board to prevent manifest injustice.

XII. Subpoenas.

The President or Secretary of the Board, upon written application of any party or his/her attorney, shall issue a subpoena requiring the appearance of witnesses for the purpose of taking evidence or documents relevant or material to the inquiry, all subject to the provision of W.S § 16-3-107(c) as amended from time to time.

XIII. Order of Procedure at Hearing.

As nearly as may be possible, hearings shall be conducted in accordance with the following order of procedure.

- (a) The President shall announce that the Board is open to transact business and call by docket number and title the case to be heard.
- (b) The hospital will be allowed an opening statement to briefly explain its position to the Board and outline the evidence it proposes to offer, together with the purpose thereof.
- (c) The contestant will be allowed an opening statement.

- (d) Any additional parties will be allowed an opening statement.
- (e) The hospital's evidence will be heard. Witnesses may be cross-examined by the contestant or his/her attorney and by members of the Board and legal counsel of the Board. The hospital's offered exhibits will be marked by letters of the alphabet, beginning with "A."
- (f) The President may introduce any evidence necessary on behalf of the Board, and exhibits of the board will be marked with double letters of the alphabet, beginning with "AA." Members of the Board may examine witnesses. Witnesses may be cross-examined by the contestant and the attorney for the other party.
- (g) The evidence of the contestant will be heard. And exhibits of such contestant will be marked with numbers beginning with "1." Each member of the Board, the attorney for any other party, and the attorney for the Board, shall have the right to cross-examine all witnesses presented on behalf of the contestant.
- (h) The hospital may offer rebuttal evidence.
- (i) The Board may, in its discretion, allow evidence to be offered out of order, as herein prescribed.
- (j) Closing statements will be made in the following sequence:
 - (1) Hospital
 - (2) Contestant
 - (3) Hospital in rebuttal

The time for oral argument may be limited by the President.

- (k) The President may recess the hearing as required.
- (l) After all interested parties have been offered an opportunity to be heard, the President shall declare the evidence closed and excuse all witnesses. The evidence of the case may be re-opened at a later date, for good cause shown, by order of the Board upon motion of any party to the proceedings, the President, or the Board itself.
- (m) Parties may tender briefs, or the board may call for such briefs as may be desirable.
- (n) The President may declare that the matter is taken under advisement and that the decision and order of the Board will be announced at a later date.

XIV. Witnesses at Hearings to be Sworn.

All persons testifying at any hearing before the Board shall stand and be administered the

following oath or affirmation by a member of the Board:

“Do you swear (or affirm) to tell the truth, the whole truth, and nothing but the truth in the matter now before the Board?”

No testimony will be received from a witness except under such oath or affirmation.

XV. Applicable Rules of Civil Procedure.

The rules of practice and procedure contained in the Rules of Civil Procedure of the State of Wyoming, insofar as the same may be applicable and not inconsistent with the laws of the State of Wyoming, shall apply in all hearings before the Board. For the application of such rules, the Secretary is designated to be in the same relationship to the Board as a clerk of court to a court.

XVI. Attorneys.

The filing of a pleading or other appearance by an attorney constitutes his/her appearance for the party for whom made. The Board must be notified in writing of his/her withdrawal from any matter. Any person appearing before the Board at a hearing in a representative capacity shall be precluded from examining or cross-examining any witness, unless such person shall be an attorney licensed to practice in the State of Wyoming, or a non-resident attorney associated with a Wyoming attorney. This rule shall not be construed to prohibit any person from representing himself/herself before the Board.

XVII. Attorneys for the Board.

In all hearings before the Board, the President shall request the attorney for the Board to be present to assist and advise the Board.

XVIII. Taking of Testimony – Reporter

In all hearings, the proceedings, including all testimony, shall be reported verbatim, stenographically or by any other appropriate means determined by the Board or the officer presiding at the hearing.

XIX. Decisions, Findings of Fact, Conclusions of Law, Orders.

The Board, following a full and complete hearing, shall make and enter a written decision and order containing findings of fact and conclusions of law based upon the evidence, both testimonial and documentary, introduced and admitted during the course of the hearing. In addition, all matters which have been officially noticed by the Board will be taken into consideration as a basis for making findings of fact and conclusions of law, and order shall be filed with the Secretary and will, without further action become the decision, findings of fact, conclusions of law and order based upon the hearing. The Secretary shall, upon receipt of any decision and order, send a copy to contestant and interested parties involved by certified mail, postage paid.

XX. Members of the Board Present

No member of the Board shall vote upon a decision of the Board unless he shall have been present at the hearing or has read the transcript of the proceedings. The vote of the Board shall be shown in its decision, i.e., 5-0, 4-1, 3-2, etc. or not participating, etc.

XXI. Appeals to District Court.

Appeals to the District Court from decisions of the Board may be taken in the manner prescribed by the Wyoming Administrative Procedures Act.

XXII. Transcripts.

Oral proceedings or any part thereof shall be transcribed on request of any party upon payment of the cost thereof. In case of an appeal to the District Court, the party appealing shall secure and file a transcript of the testimony and other evidence offered at the hearing with the Board, which transcript shall be verified by the oath of the reporter or transcribed as a true and correct transcript of the testimony and other evidence in the hearing. The cost of making the transcript shall be paid by the party prosecuting such appeal. The complete record on appeal, including the transcript of testimony, shall be verified by the Secretary.

XXIII. Standard of Conduct.

Contemptuous conduct by any person appearing at a hearing shall be grounds for his/her exclusion from the hearing by the presiding officer.

XXIV. Independent Hearing Examiner.

The Board may retain, at its expense, an independent hearing examiner to conduct the hearing and provide recommended findings of fact and conclusions of law to the Board at the conclusion of the hearing. The independent hearing examiner shall be a licensed attorney in the State of Wyoming and shall not have any interest in the proceedings before the Board.



Approved: N/A
 Review Due: N/A
 Document Area: *Risk Management*
 Reg. Standards: *LD 03.09.01, MS 05.01.01, TJC RI.01.02.01, EP 21*

Sentinel Event Policy

STATEMENT OF PURPOSE

It is the goal of the Memorial Hospital of Sweetwater County to provide the safe, high-quality care that our community deserves and expects from our institution. We must constantly work to reduce the occurrence of serious safety events and Sentinel Events in our facility. When a Sentinel Event occurs, it is our responsibility to carry out an expeditious and thorough investigation to reduce or eradicate future harm to patients, staff, and facility, as well as report the appropriate event to the necessary federal agencies.

DEFINITIONS

Definitions

- I. **Sentinel Event** - An unexpected occurrence involving death or serious physical or psychological injury, or risk thereof. Such events are called "sentinel" because they signal the need for immediate investigation and response. Furthermore, a Sentinel Event can also be described as a patient safety event (not primarily related to the natural course of the patient's illness or underlying condition) that reaches a patient and results in any of the following:
 - A. Death
 - B. Permanent Harm
 - C. Severe Temporary Harm
 - D. Any of the following events:
 1. Suicide of any patient receiving care, treatment, or services in a staffed around-the-clock care setting or within 72 hours of discharge, including from the organization's emergency department (ED)
 2. Unanticipated death of a full-term infant
 3. Discharge of an infant to the wrong family
 4. Abduction of any patient receiving care, treatment, or services
 5. Any elopement (that is, unauthorized departure) of a patient from a staffed around-the-clock care setting (including the ED) leading to the death, permanent harm, or severe temporary harm of the patient
- ☐ Administration of blood or blood products having unintended ABO and non-ABO (Rh, Duffy,

Kell, Lewis, and other clinically important blood groups) incompatibilities, hemolytic transfusion reactions, or transfusions resulting in severe temporary harm, permanent harm, or death

7. Rape, assault (leading to death, permanent harm, or severe temporary harm), or homicide of any patient receiving care, treatment, or services while on site at the organization
8. Rape, assault (leading to death, permanent harm, or severe temporary harm), or homicide of a staff member, licensed independent practitioner, visitor, or vendor while on site at the organization
9. Surgery or other invasive procedure performed at the wrong site, on the wrong patient, or that is the wrong (unintended) procedure for a patient
10. Unintended retention of a foreign object in a patient after an invasive procedure, including surgery
11. Severe neonatal hyperbilirubinemia (bilirubin \geq 30 milligrams/deciliter)
12. Prolonged fluoroscopy with cumulative dose \geq 1,500 rads to a single field or any delivery of radiotherapy to the wrong body region or \geq 25% above the planned radiotherapy dose
13. Fire, flame, or unanticipated smoke, heat, or flashes occurring during direct patient care caused by equipment operated and used by the hospital. To be considered a sentinel event, equipment must be in use at the time of the event; staff do not need to be present
14. Any intrapartum (related to the birth process) maternal death
15. Any event in which its classification as a Sentinel Event is unclear

E. For further in depth definitions, please review attached document "The Joint Commission Sentinel Event Policy".

II. **Severe Temporary Harm** - critical, potentially life-threatening harm lasting for a limited time with no permanent residual, but requires transfer to a higher level of care/monitoring for a prolonged period of time, transfer to a higher level of care for a life-threatening condition, or additional major surgery, procedure, or treatment to resolve the condition.

III. **Sexual Abuse/Assault** - is defined as non-consensual sexual contact involving a patient and another patient, staff member, or other perpetrator while being treated or on the premises of the organization, including oral, vaginal, or anal penetration or fondling of the patients' sex organ(s) by another individual's hand, sex organ, or object. One or more of the following must be present to determine that it is a sentinel event:

- A. Any staff-witnessed sexual contact as described above
- B. Admission by the perpetrator that sexual contact, as described above, occurred on the premises
- C. Sufficient clinical evidence obtained by the organization to support allegations of unconsented sexual contact

IV. **Invasive Procedure** - procedure in which skin or mucous membranes and/or connective tissue are incised or punctured, an instrument is introduced through a natural body orifice, or insertion of foreign material into the body for diagnostic or treatment-related purposes. Examples of invasive procedures include central line and chest tube insertions, biopsies and excisions, and all percutaneous procedures (e.g., cardiac, electrophysiology, interventional radiology).

V. **Occurrence Report** - The online form submitted by staff to the Risk/Compliance Department as described in the Occurrence Reporting procedure

VI. **Root Cause Analysis (RCA)**- A comprehensive systemic evaluation of an occurrence in an attempt to identify underlying causes or effects of a serious safety event. An RCA can also be described as an interdisciplinary team analysis to definitively determine the conditions that caused an event, with the understanding that if the undesirable condition were eliminated, changed, or controlled, the event could have been prevented.

VII. **Action plan** - The product of a Root Cause Analysis that identifies the strategies that an organization plans to implement to reduce the risk of similar events occurring in the future.

A. An appropriate action plan includes:

1. Identification of changes that can be implemented to reduce risk, or formulates a rationale for not undertaking such changes.
2. The plan should address responsibility for implementation, oversight, pilot testing if appropriate, time lines and methods for measuring the effectiveness of the recommended actions.
3. Action plans will include the adequacy of staffing, including nursing staffing, in its analysis of possible causes

Internal Reporting of Suspected Sentinel Events

I. Identification of a Sentinel Event

- A. When a safety event, or occurrence takes place, the first course of action is to stabilize the patient or environment.
- B. Following the stabilization, any potential Sentinel Event is to be reported immediately to the Risk/ Compliance Department and/or Administrator On Call (AOC). An individual must also be designated to complete an Occurrence Report.
- C. Upon notification, this individual will undertake or direct an initial investigation to determine if the occurrence is indeed a Sentinel Event as defined by this policy. If the event is determined not to be sentinel in nature, it will be addressed in accordance with the established Occurrence Report procedure.
- D. If the event is determined to be sentinel in nature, then the Hospital shall respond as noted in this policy.

II. Notification/Communication of Sentinel Events

- A. Upon determination that a Sentinel Event has occurred, the Risk/Compliance Department and/or available Administrator On Call will notify key representatives of the Hospital's leadership team.
- B. The Risk/Compliance Department or the AOC will also be responsible for notifying the Chief Executive Officer (CEO) and Board President of the sentinel event.
- C. Per the Event Disclosure policy, the Risk/Compliance Department, in conjunction with the attending physician, and legal counsel will determine the proper time and method disclosure of the event to the patient and the family.

III. Formation of a Sentinel Event Response Team

- A. A team is to be formed to respond to a Sentinel Event. The team should include, but not necessarily be limited to, the following:
 1. Appropriate representatives of administration, medical staff, legal, risk, quality, and public relations.

2. Those individuals directly involved in the event
- B. The purpose of the team will be to coordinate an investigation into the incident, conduct a root cause analysis, and determine corrective actions to undertake in response to finding and/or identified opportunities for improvement.
- IV. Protection from Discovery
- A. All activities undertaken by the team should be done under the auspices of the quality management functions and medical staff quality assurance / peer review process. Other legal protections are to be implemented as determined by legal counsel.
- V. Immediate Remediation
- A. The team will undertake those actions necessary to remediate any immediate threat or likelihood of the Sentinel Event recurring.
- VI. Investigation of Event/Conducting a Root Cause Analysis
- A. The team is to undertake a thorough and credible Root Cause Analysis (RCA) of the Sentinel Event. The RCA should be completed within 45 days of the organization becoming aware of the event.
1. A Root Cause Analysis may also be organized at the request of a leader in any department as a method to delineate cause in an occurrence of lesser significance.
- B. Facilitation must be done by 3 or more trained staff members in the following positions:
1. Main facilitator(s)
2. Staff member(s) to maintain the visual media
3. Note taker(s)
- C. The RCA must follow the systems involved in the adverse event, not solely the staff or providers involved.
- D. All information discussed within the RCA is to be kept confidential within MHSC.
- E. Developing and Implementing an Action Plan
1. Once the RCA has been completed, the team is to develop and implement a corrective action plan that will address both direct and root causes as well as ☐ when appropriate -- special and common cause variation. Special cause is a factor that intermittently and unpredictably induces variation over and above what is inherent in the system. It often appears as an extreme point (such as a point beyond the control limits on a control chart) or some specific, identifiable pattern in data. Common cause is a factor that results from variation inherent in the process or system. The risk of a common cause can be reduced by redesigning the process or system.
2. The action items are given due dates and responsible parties for completion.
- F. The notes/information from the RCA is documented in the the attached Appendix A: "RCA and 2.0 Action Plan Worksheet" form.
- VII. Internal Reporting
- A. A summary, void of patient or practitioner identifiable information, of the Sentinel Event, the root cause(s) identified, and the corrective actions taken will be reported to the Patient Safety Committee, Quality Committee of the Board, Medical Executive Committee and to the Board of Trustees. The corrective action plan will also be communicated to other appropriate parties within the organization.

External Reporting of Sentinel Events

- I. Our Hospital has made the decision to voluntarily report Sentinel Events to The Joint Commission for review.
- II. The CEO or their designee will be responsible for correspondence with outside agencies inquiring about sentinel, or other serious safety events. The decision to report a potential Sentinel Event to The Joint Commission for review will be made with prior knowledge of the CEO.
- III. A report that complies with The Joint Commission requirements will be compiled following the RCA that will be available for external reporting. This report must include:
 - A. Comprehensive Systemic Analysis of the event
 - B. Action plans and time-line for completion
- IV. Risk/Compliance will prepare report described above and will collaborate with Quality/Accreditation regarding submission of report to The Joint Commission within 45 business days of becoming aware of event.
 - A. Should The Joint Commission become aware of a Sentinel Event by reporting from a third party, the official report with follow-up information is required within 45 business days of becoming aware of the event

Confidentiality

- I. Record Keeping
 - A. A record of the investigation into the Sentinel Event, the subsequent RCA, and any performance improvement activities undertaken is to be maintained and should be constructed in such a way as to be afforded statutory protection from discovery.
- II. WY Stat 35-2-910. Quality management function for health care facilities; confidentiality; immunity; whistle blowing; peer review.
 - A. Subsection A. "Each licensee [hospital, healthcare facility and health services] shall implement a quality management function to evaluate and improve patient and resident care and services in accordance with the rules and regulations promulgated by the division. Quality management information relating to the evaluation or improvement of the quality of health care services is confidential. Any person who in good faith and within the scope of the function of a quality management program participate in the reporting, collection, evaluation, or use of quality management information or performs other functions as part of a quality management program with regards to a specific circumstance shall be immune from suit in any civil action based on such functions brought by a health care providers or person to whom the quality information pertains. In no event shall this immunity apply to any negligent or intention act or omission in the provision of care."
- III. 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.
- IV. 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.
- V. Information, data results, reports and minutes generated by all quality management activities will be handled in a manner ensuring strict confidentiality

VI. 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 W.S 35-17-105

VII. Quality improvement activities will occur in ways that preserve confidentiality of information consistent with policy and established law

Replaces: Sentinel Events, SPP 121

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I. United Regional. (LRG Healthcare. (August, 2020). *Sentinel Event Policy & Procedure*. Unpublished internal document, United Regional.

Approval: MEC 09/22/2020; Quality Committee of the Board 10/21/2020; Board of Trustees

Attachments

[Appendix A: RCA 2.0 and Action Plan Worksheet \(non-fillable\)](#)
[The Joint Commission Sentinel Event Policy - Updated 1.2020](#)

DRAFT

Guidelines for Negotiating Non-Physician Provider Agreements

Purpose

This Board of Trustees (Board) policy authorizes the Chief Executive Officer (CEO) to recruit Non-Physician Providers and negotiate their Agreements within the guidelines set forth below.

Definition

As defined by the Centers for Medicare and Medicaid, Non-Physician Providers include advanced practice nurses, physician assistants, certified nurse midwives, and other licensed providers who are not physicians.

The CEO is directly responsible for the hiring of Non-Physician Providers within these guidelines provided by the Board pursuant to its oversight responsibilities.

In order to meet the community's health care needs, it is important to attract and retain qualified Non-Physician Providers. Recruiting them to practice in rural areas is often challenging; therefore, these parameters are designed to balance the needs of the Hospital and the health care needs of the community with an Agreement that is attractive to Non-Physician Providers.

Prior to submitting the Agreement to the Non-Physician Provider for his/her acceptance the CEO will provide a detailed report based on these guidelines to the Board for its final approval.

Guidelines

1. Non-Physician Provider compensation

a. Based between the median and 75th percentile of the current MGMA pay scale, according to years of experience, with the exception of special circumstances when the CEO may need to offer higher compensation for difficult to fill specialties or on renewal Agreements where it is in the best interest of the Hospital and community to go higher to retain said Non-Physician Provider.

b. Incentive compensation is not offered.

c. On call pay is not offered.

2. Benefits

a. Health, Dental and Vision insurance will be offered to the Non-Physician Provider and their family at a range based on a sliding scale of employee's hourly range.

b. Malpractice insurance will be provided at the Hospital's expense. The Hospital shall obtain and maintain professional malpractice insurance to cover liabilities of both the Non-Physician Provider and the Hospital resulting from the practice of medicine by the Non-Physician Provider

on behalf of the Hospital. Coverage may be on an occurrence or claim made basis. If coverage is on a claim made basis, then upon termination of the Agreement, the Hospital shall purchase tail coverage, if such coverage is not included as part of the Non-Physician Provider's subsequent insurance.

c. PTO shall be accrued at a rate of 30, 35, 40, 45 or 50 days based on the CEO discretion on both new and renewal Agreements. Non-Physician Providers shall also receive 5 days of continuing medical education (CME) per year. PTO will be capped at 320 hours. No CME will be carried over into the next calendar year. Accrued PTO will be cashed out upon separation.

d. CME stipend of \$5,000 per year.

e. Sign on bonus/retention bonus of \$15,000 with the exception of special circumstances when the CEO may need to offer a higher sign on bonus or retention bonus for difficult to fill specialties or on renewal Agreements where it is in the best interest of the Hospital and community to go higher to retain said Non-Physician Provider.

f. A deferred benefit/Roth 457 retirement plan will be offered to the Non-Physician Provider immediately (1st of the following quarter of their start date). Non-Physician Provider may start contributing to their 457 (deferred or and/or Roth) plan on the 1st day of the next quarter of their start date. The CEO may agree to match the maximum contribution limit.

g. Student loan repayment of up to \$20,000 per year for a maximum of \$60,000 over a three-year period with the exception of special circumstances when the CEO may need to offer a higher student loan repayment for difficult to fill specialties or on renewal Agreements where it is in the best interest of the Hospital and community to go higher to retain said Non-Physician Provider.

h. Relocation allowance of \$10,000 for the cost of relocation that the Non-Physician Provider can apply to rent (6 Months) or moving services at his/her discretion. All receipts for moving services must be turned into the Medical Staff Services Office for payment.

3. Terms and Termination Provisions

a. The Agreement may be terminated by either party, without cause, upon 90 days written notice to the other party.

b. Hospital may terminate this Agreement immediately upon written notice to Non-Physician Provider effective immediately for reasons which shall be deemed for cause and shall be stated with particularity in the written notice to Non-Physician Provider.

c. Non-Physician provider shall be required to abide by all of the Hospital Human Resource policies and procedures during the term or their Agreement.

4. Restrictive Covenants

a. Covenant not to compete during the term of Non-Physician Provider's employment by Hospital within Sweetwater County for one full year from the date that they terminate employment with MHSC.

Guidelines for Negotiating Physician Contracts

Purpose

This Board of Trustees (Board) policy authorizes the Chief Executive Officer (CEO) to recruit Physicians and negotiate their Contracts within the guidelines set forth below.

Policy

The CEO is directly responsible for hiring Physicians and reports to the Board on medical staff recruitment and performance. In order to fulfill its oversight responsibility, the Board has established guidelines within which the CEO shall recruit Physicians and negotiate their contracts. These guidelines are based on federal physician recruitment and compensation statutes and regulations.

In order to meet the community's health care needs, it is important to attract and retain qualified Physicians. Recruiting Physicians to practice in rural areas is often challenging; therefore, these parameters are designed to balance the needs of the Hospital and the health care needs of the community with a Contract that is attractive to Physicians.

Prior to submitting the Contract to the Physician for his/her acceptance the CEO will provide a detailed report based on these guidelines to the Board for its final approval.

Guidelines

1. Physician Compensation

a. Based between the median and 75th percentile of the current MGMA pay scale, according to years of experience, with the exception of special circumstances when the CEO may need to offer higher compensation for difficult to fill specialties or on renewal Contracts where it is in the best interest of the Hospital and community to go higher to retain said Physician.

b. Incentive compensation is not offered.

c. On call pay in certain specialties is necessary and details will be provided to the Board when requesting Contract final approval.

2. Benefits

a. Health, Dental and Vision insurance will be offered to the Physician and their family at a range based on a sliding scale of employee's hourly range.

b. Malpractice insurance will be provided at the Hospital's expense. The Hospital shall obtain and maintain professional malpractice insurance to cover liabilities of both the Physician and the Hospital resulting from the practice of medicine by Physician on behalf of the Hospital. Coverage may be on an occurrence or claim made basis. If coverage is on a claim made basis,

then upon termination of the Contract, the Hospital shall purchase tail coverage, if such coverage is not included as part of the Physician's subsequent insurance.

c. PTO shall be accrued at a rate of 30, 35, 40, 45 or 50 days based on the CEO discretion on both new and renewal Contracts. Physician shall also receive 5 days of continuing medical education (CME) per year. PTO will be capped at 320 hours. No CME will be carried over into the next calendar year. Accrued PTO will be cashed out upon separation.

d. CME stipend of \$5,000 per year.

e. Sign on bonus/retention bonus of \$25,000 with the exception of special circumstances when the CEO may need to offer a higher sign on bonus or retention bonus for difficult to fill specialties or on renewal Contracts where it is in the best interest of the Hospital and community to go higher to retain said Physician.

f. A deferred benefit/Roth 457 retirement plan will be offered to Physician immediately (1st of the following quarter of their start date). Physician may start contributing to their 457 (deferred or and/or Roth) plan on the 1st day of the next quarter of their start date. The CEO may agree to match the maximum IRS contribution limit.

g. Student loan repayment of up to \$30,000 per year for a maximum of \$90,000 over a three-year period with the exception of special circumstances when the CEO may need to offer a higher student loan repayment for difficult to fill specialties or on renewal Contracts where it is in the best interest of the Hospital and community to go higher to retain said Physician.

h. Relocation allowance of \$10,000 for the cost of relocation that the Physician can apply to rent (6 Months) or moving services at Physicians discretion. All receipts for moving services must be turned into the Medical Staff Services Office for payment.

3. Terms and Termination Provisions

a. The Contract may be terminated by either party, without cause, upon 90 days written notice to the other party.

b. Hospital may terminate this Contract immediately upon written notice to Physician effective immediately for reasons which shall be deemed for cause and shall be stated with particularity in the written notice to Physician.

c. Physician shall be required to abide by all of the Hospital Human Resource policies and procedures during the term or their Contract.

4. Restrictive Covenants

a. Covenant not to compete during the term of Physician's employment by Hospital and for a period of one full year thereafter at any location within Sweetwater County.



Current Status: *Draft*

PolicyStat ID: 8496285

Approved: N/A

Review Due: N/A

Document Area: *General - Housewide*

Reg. Standards: *APR 09.01.01, APR 09.02.01, EC 04.01.01, IC 01.03.01, LD 02.01.01, LD 03.01.01, LD 03.02.01, LD 03.03.01, LD 03.04.01, LD 03.05.01, LD 03.07.01, LD 03.09.01, LD 04.01.01, LD 04.01.05, LD 04.01.10, MM 07.01.03, MM 08.01.01, MS 09.01.01, NR 02.01.01, PI 01.01.01, PI 02.01.01, PI.03.01.01, RI 01.01.01, RI 01.01.03, RI 01.02.01, RI 01.03.01, RI 01.05.01, RI 02.0.01*



Patient Safety Plan

Statement of Purpose

Memorial Hospital of Sweetwater (MHSC) strives for staff to feel supported, safe and empowered in speaking up about errors, near misses and related opportunities for improvement. MHSC promotes a “Just Culture” of safety which balances a non-punitive learning environment with equally important need to hold people accountable for their actions. Just Culture is a value supported system of accountability that allows individuals to report occurrences in an atmosphere of trust.

Introduction

MHSC is committed to providing compassionate, high-quality care with a strong culture of safety for the best patient outcomes. Our objective is to support a culture of safety for our patients and workers, as well as supporting an unrelenting commitment to safety and to do no harm. This culture allows our organization 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. The Patient Safety Plan cultivates an organization-wide approach and provides a coordinated and collaborative effort to patient safety.

Purpose

The purpose of MHSC's Patient Safety Plan is to improve patient safety and reduce risk to patients through an environment that encourages:

- I. Acknowledgement of risks to patient safety such that medical and human errors will occur in a complex environment
- II. Recognition and reporting of errors and risks to patient safety within a Just Culture
- III. Minimization of blame or unfair treatment for reporting or involvement in errors

- IV. Investigations and analyses with a focus on process and system improvements
- V. Utilization of a standardized tool which offers a clear, equitable and transparent process for recognizing and separating blameless errors from unsafe or reckless act (Appendix A-Just Culture Algorithms)
- VI. Collection and analysis of data to ensure proper prioritization of process improvements
- VII. Support initiatives that promote patient-centered care and involvement
- VIII. Open communication regarding patient safety risks, events and system-based improvements
- IX. Open communication with patients and families about medical errors that occur (See Disclosure of Medical Events Policy)
- X. Organizational learning about patient safety occurrences

Scope

The scope of the Patient Safety Program encompasses the patient population, visitors, volunteers, medical staff and staff. The program addresses maintenance and improvement in patient safety issues in every department throughout the facility.

- I. Education is a key strategy for prevention of patient safety issues based on needs specific to the organization
- II. Risk identification and analysis through trending of confidential patient safety occurrence information from individual event reports and aggregate data reports
- III. At least one high-risk patient safety process selected at a minimum of every 18 months for proactive risk assessment. The following may be considered, but not limited to, when selecting a proactive risk assessment:
 - A. The Joint Commission Sentinel event alerts
 - B. Core Measure performance data
 - C. Occurrence reporting information
 - D. Performance Improvement Priority Matrix (see Performance Improvement and Patient Safety-PIPS-Plan)
 - E. Information from external sources: state, federal and current literature
- IV. Utilization of patient satisfaction survey data to identify patient's perception of safety issues
- V. Regular evaluation of staffs' perception of the organizations' culture of safety using valid and reliable survey tools
 - A. Prioritization and implementation of changes identified by results of survey

Definitions

At-Risk Behavior: A behavioral choice where risk is not recognized or is mistakenly believed to be justified; failure to exercise expected care.

Reckless Behavior: A behavioral choice that consciously disregards a visible, substantial and unjustifiable risk that the individual knows or should have known that potential harm would result from the action; intentional risk taking.

Behavioral Drift: A change in behavioral patterns resulting from gradual and subtle adjustments over time.

Coaching: A supportive discussion with the employee regarding the need to engage in safe behavioral choices.

Console: Show compassion for; commiserate with.

Counseling: A first step disciplinary action; putting the employee on notice that performance is unacceptable.

Disciplinary Action: An action beyond remedial, up to and including punitive action or termination.

Human Error: An error of inadvertently doing something other than what should have been done; a slip, lapse or mistake.

Impossibility: A condition outside of one's control that prevents duty from being fulfilled.

Knowingly: Having knowledge of (in the context of a "Just Culture", knowing that harm is practically certain to occur).

Purposeful: Deliberate (in the context of a "Just Culture", a conscious objective to cause harm).

Performance Shaping Factors: Attributes that impact the likelihood of human errors or behavioral drift.

Punitive Action: Punitive deterrent designed to cause an individual or group to refrain from undesired behavioral choices.

Remedial Action: Actions taken to aid employee performance including education, training, and assignments appropriate to knowledge and skill.

Substantial and Unjustifiable Risk: A behavior where the risk of harm outweighs the social benefit attached to the behavior.

Willful violation: Behavior in which an individual knew or foresaw the result of the action, but went ahead and did the action anyway.

Infrastructure failure: An undesirable or unintended event, occurrence or situation involving the infrastructure of a medical facility or the discontinuation or significant disruption of a service which could seriously compromise patient safety.

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

Safety culture: Is the product of individual and group beliefs, values, attitudes, perceptions, competencies and patterns of behavior that determine the organizations commitment to quality and patient safety.

Non-punitive reporting: A reporting system where individuals are not punished for reporting adverse events, close calls and hazards, and shall not incur repercussions for sharing details of an event.

Disclosure: The process of communicating an adverse event or close call to patient /substitute decision maker.

Hazardous or unsafe conditions: A circumstance (other than a patient's own disease process or condition) that increases the probability of and adverse event, as it relates to patient safety.

Zero tolerance for reckless behavior: MHSC will not tolerate any reckless behavior or willful violations that may place a patient, provider or staff at risk, or results in abuse. These behaviors will result in disciplinary action or termination.

For further definitions refer to [Occurrence Reporting](#), [Sentinel Event Policy](#), [Disclosure of Adverse Medical Event](#)

Organization and Accountability

Governing Board

- I. Hold Senior Leadership accountable for promoting and modeling behaviors consistent with Just Culture, as well as overseeing action plans to improve patient safety throughout the organization
- II. Review annual written report provided by Patient Safety Committee

Senior Leadership Team

- I. Set expectations for improvement work based on results from the Culture of Safety survey
- II. Participate in regular safety rounds
- III. Encourage communication of ongoing efforts to improve safety in the organization

Leadership Team

- I. Communicate definition of a patient safety event throughout the organization
- II. Provide the foundation for an environment that supports Just Culture and patient safety by:
 - A. Promoting learning
 - B. Motivating staff to uphold a fair and Just Culture of safety
 - C. Providing a transparent environment in which quality measures and patient harms are freely shared with staff
 - D. Modeling professional behavior
 - E. Addressing intimidating behavior that might undermine the safety culture
- III. When a patient safety event occurs, provide resources and mechanisms for support as necessary
 - A. Examples include but are not limited to, debriefing, counseling and resources provided through the employee assistance program
- IV. Ensure completion of performance improvements and actions plans
- V. Disseminate lessons learned from safety events

Staff and Volunteers

- I. Improve the culture of safety and accountability by employing a “see something, say something, do something” approach
- II. Document events through designated reporting software and actively engage in related performance improvement efforts
- III. Constantly hold patient safety at the forefront and continue to advocate for changes where opportunities are identified

Patient Safety Committee

- I. Review the progress of improvements monthly
- II. Evaluate patient safety data for trends
- III. Actively participate in patient safety event investigation or designate a group for the action item
- IV. Report high level patient safety summary to Performance Improvement and Patient Safety (PIPS)

Committee monthly

- V. Report results of Failure Mode Effects Analysis (FMEA) and Root Cause Analysis (RCA) to PIPS and Quality Committee of the Board as they occur
- VI. Review and evaluate the effectiveness and efficiency of the Patient Safety Plan annually and present to PIPS Committee and Quality Committee of the Board
- VII. Environment of care specific findings will be addressed by the Environment of Care Committee

Data

Monitor data that will be further specified and defined in the Patient Safety Committee Charter.

Communication

MHSC is focused on creating an environment that engages frontline staff in internal reporting by:

- I. Ensuring a nonpunitive approach to patient safety event reporting
- II. Educating staff on identifying patient safety events that should be reported
- III. Providing timely feedback regarding actions taken on patient safety events

Information will be shared with the appropriate groups throughout the organization, including opportunities for improvement, actions to be taken and lessons learned.

In order to facilitate and encourage reporting of patient safety events, leaders and staff need to ensure that intimidating or unprofessional behaviors within the hospital are addressed, so as not to inhibit others from reporting safety concerns. Leaders will educate staff and hold them accountable for professional behavior. This includes the adoption and promotion of MHSC Code of Conduct that defines acceptable behavior as well as behaviors that undermine a culture of safety.

Intimidating and disrespectful behaviors disrupt the culture of safety and prevent collaboration, communication, and teamwork, which is required for safe and highly reliable patient care. Disrespect is not limited to outbursts of anger that humiliate a member of the health care team; it can manifest in many forms, including the following:

- I. Inappropriate words (profane, insulting, intimidating, demeaning, humiliating, or abusive language)
- II. Shaming others for negative outcomes
- III. Unjustified negative comments or complaints about another provider's care
- IV. Refusal to comply with known and generally accepted practice standards, the refusal of which may prevent other providers from delivering quality care
- V. Not working collaboratively or cooperatively with other members of the interdisciplinary team
- VI. Creating rigid or inflexible barriers to requests for assistance or cooperation
- VII. Not returning pages or calls promptly

Confidentiality

- I. WY Stat 35-2-910. Quality management function for health care facilities; confidentiality; immunity; whistle blowing; peer.

- A. Subsection A. "Each licensee [hospital, healthcare facility and health services] shall implement a quality management function to evaluate and improve patient and resident care and services in accordance with the rules and regulations promulgated by the division. Quality management information relating to the evaluation or improvement of the quality of health care services is confidential. Any person who in good faith and within the scope of the function of a quality management program participate in the reporting, collection, evaluation, or use of quality management information or performs other functions as part of a quality management program with regards to a specific circumstance shall be immune from suit in any civil action based on such functions brought by a health care providers or person to whom the quality information pertains. In no event shall this immunity apply to any negligent or intention act or omission in the provision of care."
- 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

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Approval: PIPS Committee 10/13/2020; MEC 10/27/2020; Quality Committee of the Board 10/21/2020 ; Board of Trustees

Attachments

No Attachments

DRAFT

MEMORANDUM

To: Board of Trustees
From: Wm. Marty Kelsey
Subject: Chair's Report...November Quality Committee Meeting
Date: November 30, 2020

Trustee Mathey led a discussion on the state statute regarding confidentiality associated with hospital quality issues.

Dr. Quickenden gave a report on the Annual Staffing Adequacy Assessment. Surveys were conducted in August and September, 2020 regarding skill mix, staffing levels, and competency/training and supervision. It was pointed out that MHSC needs to prepare this report each year in the event CMS or the Joint Commission requests it.

Dr. Quickenden and Ms. Jackson reported on the task they were given to group the Quality consultant's recommendations into priority tiers. It was noted that many of the consultant's recommendations have already been implemented. Work will commence and continue first on the highest priority recommendations with quarterly reports provided the Quality Committee. Where physicians are included in the recommendation, they will be involved in the work to address the recommendation.

The Chief Nursing Officer, Ms. Clevenger presented her doctoral project regarding patient pneumonia readmission rates. She talked about the 12 step tool kit that was created. The staff is very happy that the tool kit associated with the project can be implemented at MHSC early next year. The Committee voted to approve the project.

Dr. Poyer talked about the Covid-19 situation at MHSC. The staff has noted some things that can be done to improve communication. The Hospital has done a great job in managing the daily challenges associated with Covid-19.

The Committee went into Executive Session to discuss some matters classified as confidential. No action was taken after the session.



**Quality Committee Meeting
Memorial Hospital of Sweetwater County
November 18, 2020**

Present: **Voting Members:** Marty Kelsey (Quality Board Chair), Kara Jackson (Quality Director), Richard Mathey (Board Member), Irene Richardson (CEO), Tami Love (CFO), Ann Clevenger (CNO), Dr. Melinda Poyer (CMO), Dr. Kari Quickenden (CCO), Leslie Taylor (Clinic Director), Dr. Banu Symington,

Non-voting Members: Cindy Nelson, Corey Worden, Noreen Hove, Karali Plonsky,

Absent/Excused: **Voting Members:** Dr. Cielette Karn

Non-voting Members: Gabrielle Seilbach, Kalpana Pokhrel,

Chair: Mr. Marty Kelsey

Approval of Agenda & Minutes

Mr. Kelsey presented the Agenda for approval. Mr. Mathey motioned to approve, Ms. Richardson seconded the motion. Mr. Kelsey then present last month's Quality Committee Minutes from October 21, 2020 for approval. Dr. Quickenden motioned to approve and Ms. Richardson seconded the motion. Both were approved unanimously.

Mission Moment

Ms. Clevenger shared a story shared from another meeting regarding an end of life event. Due to COVID families are not able to be with loved one at end of life, but our Case Managers worked diligently to get this patient home on Hospice so family could be together.

Mr. Kelsey shared a story of a young couple he knows, where the wife was recently diagnosed with cancer. The diagnosis is difficult enough but traveling just adds to that burden and how glad they were for Sweetwater Regional Cancer Center.

Old Business

Mr. Mathey lead a discussion on State Statute 35-2-910. A statute that leads any Quality Management program in a healthcare setting, and pertains directly to all quality and patient safety data, materials and information as private and confidential.

New Business

Dr. Quickenden reviewed the Annual Staffing Adequacy Assessment stating this came out of our Quality review by Mella, a consultant, in August. It was a finding by Mella that we didn't have a Staffing Adequacy Assessment to produce for Centers for Medicare and Medicaid Services (CMS) or The Joint Commission (TJC). Dr. Quickenden noted that the nursing departments have a good handle on this, but we found that many of the other clinical and non-clinical areas don't and the staffing mix for many of these departments can affect patient care. Mella provided us with a short survey, that was sent out to departments to assess their staffing mix, levels and needs. Dr. Quickenden noted this report will be assessed on a case by

case basis between Department and Senior leaders as issues arise, but will be also be reviewed annually by the Quality Department.

Dr. Symington noted that one opportunity for improvement listed on the survey report was EMR use and questioned how it connected. Dr. Quickenden stated is was about the different systems we work in, and that not all areas are familiar with other area's systems.

Dr. Quickenden next reviewed the Quality Program Consultant Report Tier Assignment. This list is subjective and based on our findings and assessment of priorities for the Quality Program as related to our reporting responsibilities for CMS and TJC. Dr. Quickenden suggested bringing this report back to Quality Committee quarterly, both Mr. Kelsey and Mr. Mathey agreed follow up would be meaningful.

Mr. Kelsey questioned how quality concerns that include Providers are addressed. Dr. Quickenden stated Dr. Poyer assists through MEC by adding to agenda for discussion and solution. Mr. Kelsey recommended including the Consultant's recommendation report in the Quality Committee packet to help familiarize and remind us in the future. Both Mr. Kelsey and Mr. Mathey recognized the hard work that had gone into this report as evidenced by the large "completed" section.

Ms. Clevenger presented her DNP Project – The Impact of the Re-Engineered Discharge (RED) Toolkit on Patient Pneumonia Readmission Rates for approval, which has already been through PIPs and the Patient Steering Committee. Ms. Clevenger noted the Toolkit was created with 12 steps to ensure patients went home with the information and resources needed following Pneumonia admissions. The Quality department has been instrumental in researching and developing a process that will be implemented on Med/Surg and ICU. The plan is to implement in January 2021. Implementation will take 4-6 weeks, with gathering and review of information to be presented in April.

Mr. Kelsey requested a motion to approve Ms. Clevenger's DNP Project – The Impact of the Re-Engineered Discharge (RED) Toolkit on Patient Pneumonia Readmission Rates. Mr. Mathey motioned to approve, Dr. Symington seconded the motion, motion was unanimously approved.

Medical Staff Update

Dr. Poyer gave the update in Dr. Karn's absence. We currently have 7 COVID+ patients in house, a sub group of Incident Command including Dr. Poyer, Dr. Karn, Kim White, Incident Commander and Melissa Anderson, ED Director discussed and updated "Plan Z" our response to COVID-19. This plan was developed early on during COVID and many situational changes since have necessitated a need for an update to better serve our county. Dr. Poyer noted she had had a change to evaluate another hospital system and how they communicated with patients. We would like to add more patient navigators to assist with our communication process.

Mr. Kelsey questioned the capacity of our hospital for COVID+ patients. Dr. Poyer ran through potential numbers and space, but stated this is really a "moving target" based on the staff we have available. Mr. Kelsey further questioned the potential for more staff. Dr. Poyer stated other hospitals in Wyoming are in more dire straits than we are at this point, but that the Governor has developed a task force to address staffing issues. Dr. Poyer stated we have struggled with

staffing and the toll from COVID, but noted that our process seems to be effective as we have not seen staff to staff transmission.

Dr. Poyer noted COVID has created an exceptional "mission moment" for our facility, with the coming together of the entire facility to create and implement plans to keep our staff and community safe.

Consent Agenda

Informational items for review and discussion was presented by Mr. Kelsey. None were brought forth for discussion.

Executive Session

Mr. Kelsey requested a motion to move into Executive session to discuss quality information considered confidential by law. Mr. Mathey made a motion to approve, Ms. Richardson seconded the motion. Motion carried.

The Quality Committee reconvened at 09:39 a.m. with no further action. Mr. Kelsey requested a motion to resume the Quality Meeting. Motion to resume was made by Mr. Mathey and seconded by Ms. Richardson. Motion carried.

Mr. Kelsey thanked everyone for joining the meeting.

Mr. Mathey motioned to adjourn the meeting, Ms. Richardson seconded the motion.

Meeting Adjourned

The meeting adjourned at 9:40 am

Next Meeting

December 16, 2020 via ZOOM

Respectfully Submitted,

Robin Fife, Recording Secretary

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

Three Priorities 2021

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

1 Star Rating

- a. There are seven categories within the Star Rating and they are as follows: mortality, readmission, safety of care, efficient use of medical imaging, timeliness of care, patient experience (see bullet c.) and effectiveness of care. Each of these seven categories contain several data metrics. Data within the following categories continues to trend in right direction: mortality. Opportunities for improvement exist within the efficient use of medical imaging category. OP10 – Domain C with and without Contrast – Project team is working on improvements of process at this time, will continue to monitor. June and July's data within the readmission category has increased, an in-depth analysis of the data has been completed and did not yield any trending gaps in our processes. Case Management and Care Transition continue to monitor the data and their processes. Data for August has decreased and will continue to monitor. September data has increased again and our CNO's DNP project should begin to address improvements related to pneumonia readmissions. An opportunity for improvement exists within the safety of care category, specifically for the C. Clostridioides difficile infection measure. Infection Preventionist working on improvements with nursing departments and the medical staff.
- b. Within the Timeliness of Care category, Q2 – Median admit decision time to departure time has seen an increase in the data over the past few months. The most recent month of data has trended down again. The project team is aware and is identifying and developing thresholds for each part of the part of the Patient flow process. These thresholds have been identified and were implemented on September 1st. September data has trended down so will continue to monitor. Within the Effectiveness of Care category, we continue to see fluctuations with the data for Core Sep1 – Early Management Bundle/Severe Sepsis/Septic Shock Scorecards identifying opportunities for improvement continue to be sent to physicians and nurses. Sepsis team developed new visual tool to ensure all elements of Bundle are met in a timely manner and rounding and education have taken place. The sepsis project team continues to work towards their new goal related to improving compliance with ordering and obtaining blood cultures within specified timeframe. Leadership of Sepsis group is to be determined, will update when this has been clarified. Improvement work continues for Core OP23 – Head CT/MR Results for Stroke Pts within 45 minutes of arrival.
- c. Patient Experience/HC/HPS: The "Inpatient HCAHPS" is the survey data that affects our Star Rating and value based Purchasing reimbursement program. This survey

includes OAC and Med/Surg. Please see the “Introduction to Press Ganey Condensed Version” document for further information.

2 Risk/Safety

- a. Risk – The number of occurrence reports continue to be about the same amount reported. No trends in falls. There have been no reported weight-based medication errors for the month of October. We will continue to monitor this issue to ensure changes made are working.
- Safety – An interdisciplinary team is working to create a new safety committee. Development of charter/agenda and scheduling recurring meetings is underway. The Patient Safety Plan has been approved by PIPS Committee, MAC and Quality Committee of the Board. This plan will be presented to the Board for review in December. The Culture of Safety Survey was administered in June and results have been analyzed. Results were presented to Leadership, Town Halls and Quality Workshop of Board in October. Next steps is to share individual department data in November and early December. Improvement work goals etc. will be addressed by the Patient Safety Committee.

3 Performance Standards

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

4 Accreditation

- a. We continue to be in our Joint Commission triennial survey window and a survey will occur soon however this is also dependent upon the COVID-19 situation in our County. CSR Committee continues to meet weekly in order to prepare. There are some standards that need work to come into compliance and this work is underway. “Joint Points” continue to be shared with the hospital and clinics.

HUMAN RESOURCES COMMITTEE CHAIR REPORT TO THE BOARD NOVEMBER 2020

Ed Tardoni

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

HR DATA FOR THE MONTH

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

The open position report for November shows a dramatic increase in open positions. This increase is the result of seeking additional employees to help with the Covid workload. You may note a new position title. Housekeeping positions are now titled EVS for Environmental Services.

POLICY ACTIVITY

The HR Committee continued activity on the following policies

POLICY HOLD RESCINDED (by unanimous vote)

The HR Committee wishes to RESCIND THE HOLD RECCOMENDATION for the following pending policies:

- Termination and Appeals
- Introductory Period
- Corrective Action
- Board Appeals Procedure

The committee was updated on progress related to making all of these policies consistent.

TERMINATION AND APPEALS POLICY (by unanimous vote) Do not pass recommendation.

The Committee reviewed the document which updated the proposed policy to be consistent with the others generated by the Ad Hoc subcommittee. The package is now complete and constitutes a fundamental step change in employee relations approach. After considering the effectiveness of existing policies the committee arrived at a DO NOT PASS recommendation to the Board. This recommendation applies to the entire policy and not just the latest proposed changes.

INTRODUCTORY PERIOD (under ongoing review)

The HR Committee has proposed revisions to this pending policy in hand. No decision was arrived at during this meeting. The Board should be aware that the HR Committee considers this policy not yet ready for a Board vote.

POLITICAL ACTIVITY POLICY (progress update)

The Hospital Group has been selected to investigate proposed approaches to employees seeking office. No activity to report at this time.

WORK PLACE VIOLENCE POLICY (progress update)

The proposed Work Place Violence Policy contained a statement about a Work Place Violence Prevention Plan. That plan did not exist. The CEO assigned the HR Director to assemble a team to generate the plan. The team has been named. As of this date there is no activity to report. The policy will be sent to the Board for consideration once a Work Place Violence Prevention Plan is in place,

NEXT MEETING

The HR Committee meets the third Monday of the month. However, for December the Committee will meet the second Monday of the month. That would be December 14th, 2020 at 3:00 P.M most likely by Zoom

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
Human Resources Committee Meeting – Minutes Draft
Monday – November 16, 2020
Zoom

Trustee Members Attending by Zoom: Barbara Sowada & Ed Tardoni

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

Guests by Zoom: **Amy Lucy, Shawn Bazzanella, Ruthann Wolfe, Cindy Nelson, Kari Quickenden, Tami Love, Ann Clevenger, Taylor Jones**

Ed called the meeting to order. He said he is aware the Board passed a thing about recordkeeping. He said Amber's people always keep the notes and do an excellent job. Ed said he has been at fault because he has not done a roll call. Amber completed the roll call. Ed asked to add a "C" to the agenda for a release of hold recommendation. Barbara said she had a couple of things to add from old business. She asked for a status report of the workplace violence policy and a status report on the political activity policy. Ed said he would like to turn over the Chair role to Barbara at the time of the Term and Appeals discussion and then he will reassume the Chair for the vote. Ed said he wants to give everyone the chance to discuss. The motion to approve the agenda as amended was made by Barbara, second by Irene. Motion carried.

OLD BUSINESS

I. **MINUTES APPROVED:**

The motion to approve the October 19, 2020, meeting minutes was made by Barbara, second by Suzan. Motion carried.

II. **TURNOVER REPORT:**

Amber said you will see information as of 10/31. There are two pages for overall information. The overall percentage is 10% which is incredibly low, probably one of the lowest. She said we like to go with a 12-month rolling. October 2019 to October 2020 is 17% which is incredible. We also add the rehire rate to the bottom. Amber said she always thought that is such a remarkable thing that people sometimes end up back home. We have a 15% rehire rate. She said folks come back and that is a good thing. The national turnover average is about 26% with hospitals. It is a little bit lower during the pandemic. She said she breaks out the Clinic. The Clinic overall is 12% for a rolling 12 months. Ann said it seems like a lot of the nursing staff are switching areas where they are working. Amber said these are complete separations from the organization, it does not reflect changes of departments.

III. **OPEN POSITIONS:**

Amy said it has been a whirlwind the last couple of weeks. We have offered 21 jobs in the last week and have 12 people joining us next week. With that, we still have 22 open positions (19 FT, 1 Temp, 2 PRN). Eight of those are nursing positions. Amy said we offered a couple of them but were turned down because employers are offering nurses more to stay. Barbara said it seemed like last month there weren't as many open nursing positions. She asked if we are recruiting from in town or out of town. Amy said it is a mix of both. Barbara asked if we are experiencing staff fatigue to Covid? She asked what are we attributing the higher number of openings to? Irene said we are but a lot of these

positions are new. We are hiring to supplement staff to get through this Covid surge and these are positions that will be paid for with Cares Act funds. Irene said there may have been some turnover in the Clinic but a lot of these are to help with staffing right now because we want to deal with the surge and prepare. Some of our staff have been out on quarantine or isolation. Barbara asked about the quality analyst position under nursing. She asked if that has to be a nursing position or someone with MAP and statistical abilities instead of nursing. Kari said she and Kara Jackson talked about this extensively and decided we really need someone with a clinical background. Ed asked about an EVS tech listed. Amber said that is our environmental services technician. We changed from “housekeeping” to “EVS techs”.

IV. **EMPLOYEE POLICIES:**

a. **Termination and Appeal Policies** – Ed asked Barbara to chair. She said she assumes everyone had a chance to read the information. At this point she said she would like to ask for a motion to approve. Suzan said the version in the packet is from March but there have been many developments since then. Suzan made the motion to approve for the sake of discussion, second by Irene. Motion carried. Ed said he is concerned from a different perspective than some might think. He thinks the work product has been excellent. The wording is good. The logic is good. It has a sound legal basis. We sent it on to the Board with a do-pass recommendation. We did recommend a hold until the entire package was put together. He said what we have been engaged in is like the Manhattan Project. Everyone was working on getting the bomb and once it was done there was a question on dropping it. He said it is the same thing with the Challenger and the same thing with D-Day. Ed said we have another thing to consider. Should we do it? Because we can doesn't mean we should. Ed said it started out as an ad hoc committee. It grew into rewriting the entire employee relations packet of the hospital. Accordingly, it was said to run it through us. When he looks at the structure of this document, it is the structure he would see in a union operation or in a quasi-union environment. He gave some examples of concerns about “we/they” and a confrontational pre-determination opportunity meeting. Ed, Taylor and Barbara are representatives by law and charged with operating a county facility. Everyone else are employees. So how come this thing differentiates the we and the they and now differentiates the employees into classifications? Our investment is in being wise enough to get good employees and wise enough to bring them along and train them. When you have to fire someone, that is not a victory, you have lost an employee and the question is why. Compassionate care for every life we touch. That doesn't say anything about patients, that's all of us. Suzan said her understanding is that this policy was created because there is a feeling of some Board members and Jim Phillips that we need a mechanism to get from the termination to the hearing. So this grew out of that but she thinks it is way too excessive. She said if that's what we want, there is probably an easier way to do it than this document. This makes us public employees and she has done research that shows we are not public employees. If you're finally terminated from MHSC and you feel that you were terminated because your constitutional rights were violated, then this is what you do. It's complicated and no one is going to be able to figure this out. It does look like we are trying to change the rules on them. Barbara asked for confirmation that what she heard said is what we are doing right now works. Suzan said it does work. Ed said it is intended to eliminate risk. Suzan said when this policy came out and then was put on hold, she realized this policy would affect a lot of other policies. So all of those changes have already been made and will be in place even if we don't have this. There are things we have improved. She said the latest draft changed to try to mesh better with the Medical Executive Committee bylaws. Ed took the Chair role back. Barbara said from what she has heard this policy is not needed. Ed called for approval of the motion. The motion failed due to “opposed” votes. Ed said we have some explaining to do about that to the Board. He imagines there will be some discussion to explain why we feel that way. He said we do need to send it to the Board and thinks we need another motion to send to the Board with a do not pass recommendation.

The motion to send the policy to the Board with a do not pass recommendation as discussed was made by Dr. Sowada, second by Suzan. Motion carried.

b. **Introductory Period** – Suzan said there have been two changes made to the policy. One refers to definitions and changed from 90 days to a year. It is ready to come to this committee, it just hasn't come to this committee. There was discussion of transfers. Amber said she thinks one year for new hires is a good plan. She thinks we need one in place and feels a probationary period is appropriate with a transfer and thinks 90 days for transfer is appropriate. Barbara said that should be written out clearly. Ed asked if during 90 days are they at-will. Suzan said yes. Ed and Barbara asked why would a person take a promotion? Barbara suggested writing it that if it didn't work out in the promotion, the employee could return back to the previous position. Amber said it should be a 90-day performance assessment period. Suzan pulled up the latest draft. She read it aloud and there were comments it was not written well. Ed said he heard Amber say there should be specified performance evaluations during the time period. Suzan clarified she is okay with having new hires be for one year. Barbara said if an employee transfers within the one year probationary period, it should be extended to complete the year. If complete and then promoted, it should be a 90-day assessment. Suzan asked what if that position isn't open anymore? Ed said he is hearing the policy needs some work. Suzan said she will send out the draft to everyone with proposed changes in yellow compared to the current policy. The group wants to look at it and bring it back to the next meeting for review. The motion to do that was made by Amber, second by Barbara. Motion carried. The policy is referred back to staff for more work and will be brought back to the next committee meeting.

c. **Release of Hold Recommendation** - The motion to remove the recommendation of hold on that slate of policies that has been held up for the Term and Appeals Policy was made by Barbara, second by Suzan. Motion carried.

NEW BUSINESS

V. COMMITTEE MEMBER REPORTS:

Ed said Barbara asked for an update on the workplace violence policy. Amber said we were going to create an ad hoc committee and that has not been done yet. We did have one scheduled for the political activity committee. That was canceled and not rescheduled yet.

VI. NEXT MEETING DATE:

There was a suggestion to move the December meeting one week earlier to Monday - December 14, 2020 at 3:00 PM.

Ed thanked everyone for participating. The meeting adjourned at 4:05 PM.

Human Resources Committee Meeting
Monday, November 16, 2020
3:00 PM – Zoom meeting
AGENDA

Old Business

- I. Approval of minutes
- II. Turnover Report - Amber
- III. Open Positions –Amy
- IV. Employee policies– All
 - a. Termination and Appeal Policies
 - b. Introductory Period

New Business

- V. Committee member reports, other discussion(s) – as needed
- VI. Determination of Next Meeting Date (Auto-Scheduled for (12/21/20)

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
Human Resources Committee Meeting – Minutes Draft
Monday - October 19, 2020
Zoom

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

Ed called the meeting to order.

OLD BUSINESS

I. MINUTES APPROVED:

The motion to approve the September 28, 2020, meeting minutes was made by Barbara, second by Irene. Motion carried.

II. TURNOVER REPORT:

Amber reviewed the report reflecting updates through the end of August. She said we had a couple of calculations that were incorrect so the corrected information was included in the Board packet for October. She wanted to make sure everyone had the updated information for review. The Clinic turnover data is based on 110 employees and those that have left within the last month. Amber said we are in a great place especially during Covid. She said the average turnover rate for hospitals in the nation is 26% and during Covid it has gone up closer to 30%. She said we were at 15% pre-Covid and have kept ourselves to 20% or less since June. Amber said we continue to include the breakdown information for reasons and we encourage people to come back if possible. Barbara asked if we are experiencing Covid-fatigue. Amber said she thinks we are seeing a lot of that. She said we are seeing a lot of people asking about our employee assistance program. Amber said we have had so many people reach out with so many resources so we are sending that out to staff as much as possible. Irene shared information from a recent article she read about Covid-fatigue regarding people retiring earlier than planned. She said there are so many changes with Covid and so much risk as well as the financial implications of everything. Mentally, it is draining. Irene referenced the information shared during the Person-Centered Care Workshops and said we don't know how long this will last and we need to give staff the resources they need to take care of themselves. We are trying to wrap our minds around the changes but want to make sure we take care of our staff. Barbara said she trusts leaders are taking care of themselves and each other. Irene said we are trying. Barbara shared the story of the shoemaker. Ed said from the perspective of a civilian, when you look at the numbers, he can understand the disregard for the prevention measures from the general public. He said staff are actually warriors on the front. There have been some victories and he hopes that encourages people moving forward. Irene said she hopes we can ride out this storm because it has been a challenge. Ed said in this day in age our work is not where the office is, it is what we do unless you have direct patient impact. Irene said technology has had an impact.

Irene shared the overall updated turnover information on the screen. Amber said the information is as of September 30. Receptionists are in the higher category. She said the data reflects January 1 through September 30, 2020. Amber said people usually leave between their 91st and 365th day. We have about 530 employees currently. The rolling twelve-month overall rate is 18%. She reminded the Committee the national average with healthcare hospitals is 26% but with Covid has been closer to 30%.

Amber said the rehire rate is 15%. Amber said the Clinic through September is not that different than last month. Ed said we are at 53 separations and it looks like it has tapered off but projecting to be middle-range on losses for the year compared to other years. Amy said she thinks we will be under because we are lower with terminations than we were at this time last year.

III. **OPEN POSITIONS:**

Amy reviewed openings and the current status. She said we have 13 positions open currently: 12 FT and 1 PRN. We have some extra help for the ultrasound positions because they are typically hard to fill. It has been open since June.

IV. **EMPLOYEE POLICIES:**

a. **Workplace Violence Prevention Policy** – Amber said there is a lot of information in the packet sent by Suzan regarding workplace violence. Ed said what he sees is that he doesn't see a bunch of changes from what they considered last time. Suzan has provided information and resources for a plan. Ed said his feeling is what the Committee needs to decide is does that plan have to be submitted to the Board for approval. He knows the policy cites the plan so there should be a plan before we submit the policy to the Board for approval so he is asking how is hospital staff coming along on developing this plan. Suzan said she suggested the HR Committee create a working group and she would provide information but there hasn't been a group started and the plan hasn't been started. Ed said the way he sees it is staff develops the plan and the committee asks questions and refines. He doesn't see using committee time to develop the plan. Barbara agreed and said an ad-hoc committee as Suzan recommended would be very valuable. Irene agreed. Ed said the policy is basically on-hold until such time hospital staff can assure the Committee they have a plan in place. Ed asked Suzan if there is anything in this workplace violence policy before them that she thinks needs consideration today. Suzan said no, there have been no changes. Ed said we are ready to go once the hospital staff is ready to go and says they are ready to talk about the plan. Ed said the 135 pages of information should not go to the board packet. Irene said Amber should form the ad-hoc committee of Senior Leaders, Amber, anyone else from HR, Suzan, and Noreen Hove. There was discussion of including Stevie Nosich and Des Padilla. Barbara suggested David Beltran. Kari suggested a front-line nurse from the ED or ICU. Amber suggested the Clinical Coordinators from those areas. Amber will set up the committee and schedule a Zoom meeting.

b. **Others needing discussion** - Amber said the only other thing she had were a couple of e-mails back and forth with Suzan that we are holding off on.

Political Activity Policy - Ed said the Board sent the policy back to the Committee to look at employees running for public office or being elected to public office. Irene shared on-screen an e-mail from Marty Kelsey to Ed Tardoni and Irene. Ed said we have a lot of things to consider including what our budget will bear. He asked that when it is developed, bring it back to the Committee and he and Barbara will ask questions about it. Barbara clarified the policy is to be expanded to include information for running for office. Barbara said we need to decide what is the best thing for the organization. Irene shared her opinion and said she feels it is like a second job.

V. **NEW BUSINESS**

None

VI. **COMMITTEE MEMBER REPORTS:**

None.

VII. **NEXT MEETING DATE:**

The next meeting is Monday, November 16, 2020.

Ed thanked everyone for participating. The meeting adjourned at 3:40 PM.

DRAFT

Requisition	Job Title	Job Category	Schedule	Shift	Hours	Department
2676	Med. LabTech	Clinical	Regular Full Time	Variable	variable	LABORATORY
2677	Med. LabTech	Clinical	Regular Full Time	Variable	variable	LABORATORY
2649	Med. Tech	Clinical	Regular Full Time	Variable	variable	LABORATORY
2674	Nurse Practitioner	Clinical	Regular Full Time	Variable		CLINIC
2646	Physical Therapist	Clinical	Regular Full Time	Days	8:30-5pm	PHYS, OCC & SPEECH THERAPY
2359	Reg. Resp. Therapist	Clinical	Regular Full Time	Variable		CARDIOPULMONARY
2587	Ultrasound Tech.	Clinical	Regular Full Time	Days	M-F	ECHOCARDIOGRAPHY
2680	Ultrasound Tech.	Clinical	Regular Full Time	Days	M-F	Ultrasound
2651	Admitting Specialist I	Non-Clinical	PRN	Variable		ADMITTING
2652	Admitting Specialist I	Non-Clinical	PRN	Variable		ADMITTING
2681	Collections Clerk/Cashier	Non-Clinical	Regular Full Time	Days	M-F	CLINIC
2673	Collections Clerk	Non-Clinical	Regular Full Time	Days	M-F 8-4:30	PATIENT FINANCIAL SERVICES
2645	Dietary Aide	Non-Clinical	Regular Full Time	Variable		NUTRITION SERVICES

Filters

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

2687	Maintenance Machanic	Non-Clinical	Regular Full Time	Variable		Maintenance
2656	Chronic Care Manager	Nursing	Regular Full Time	Variable		CLINIC
2659	Registered Nurse	Nursing	Regular Full Time	Variable		MED/SURG
2658	Registered Nurse	Nursing	Regular Full Time	Variable		MED/SURG
2683	Registered Nurse	Nursing	Temporary	Variable		ICU
2660	Registered Nurse - Clinic	Nursing	Regular Full Time	Variable		CLINIC
2682	Registered Nurse - Clinic	Nursing	Regular Full Time	Variable		CLINIC
2675	Registered Nurse - Clinic	Nursing	Regular Full Time	Variable		CLINIC
2650	Quality Analyst RN	Nursing	Regular Full Time	Days		QUALITY

Filters

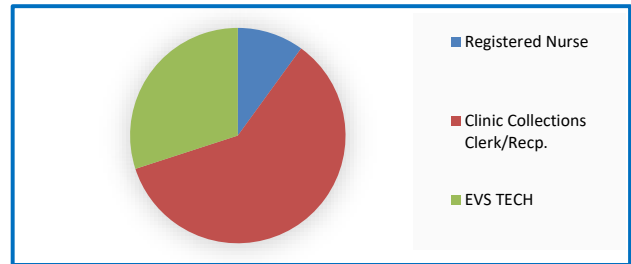
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MEMORIAL HOSPITAL OF SWEETWATER COUNTY

2020 Overall Turnover Data (As of 10/31/2020)

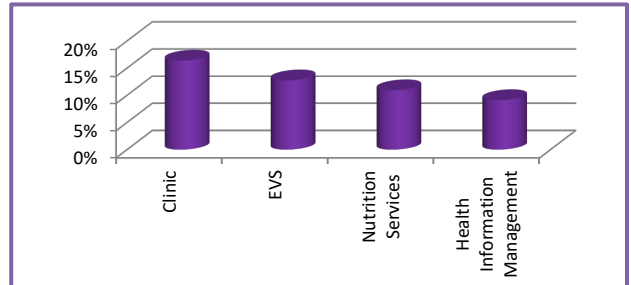
Top Position(s) / Turnover

	2020	%
Registered Nurse	8	7%
Clinic Collections Clerk/Recp.	6	40%
EVS TECH	5	20%



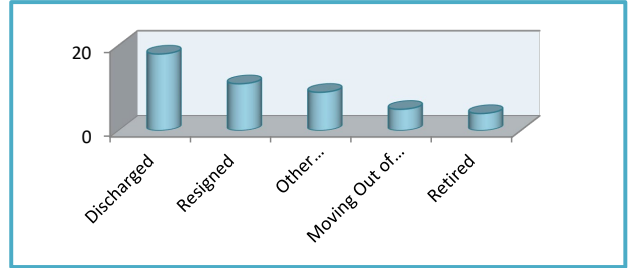
Top Department(s) / Turnover

	2020	%
Clinic	9	16%
EVS	7	13%
Nutrition Services	6	11%
Health Information Management	5	9%



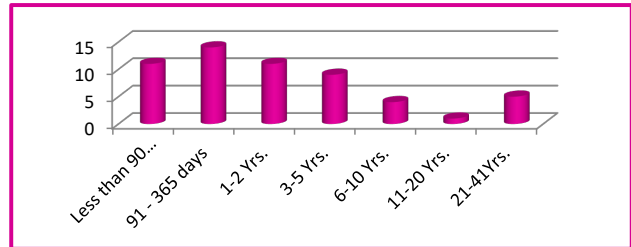
Top Reasons / Turnover

	2020	%
Discharged	18	33%
Resigned	11	20%
Other Employment	9	16%
Moving Out of Area/Relocation	5	9%
Retired	4	7%



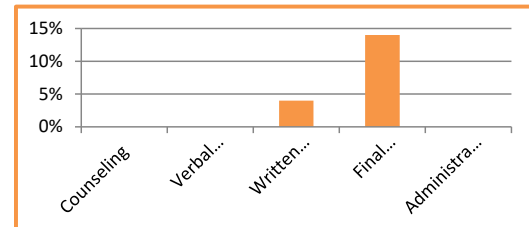
Length of Service

	2020	%
Less than 90 days	11	20%
91 - 365 days	14	25%
1-2 Yrs.	11	20%
3-5 Yrs.	9	16%
6-10 Yrs.	4	
11-20 Yrs.	1	
21-41Yrs.	5	9%
Total	55	



Corrective Action

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

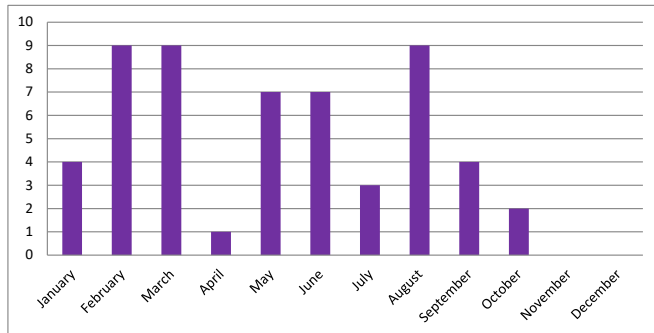


Total
Employees 536

536

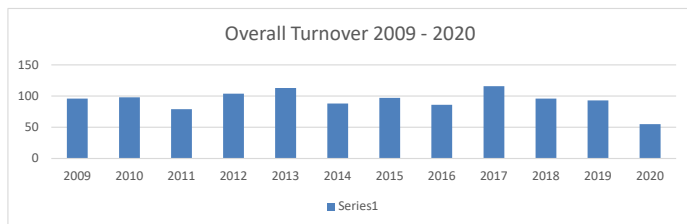
2020 Separations - Hospital Wide

	Separations	New Employees	
January	4	4	533
February	9	6	530
March	9	8	529
April	1	4	532
May	7	1	526
June	7	3	522
July	3	8	527
August	9	8	526
September	4	8	530
October	2	10	538
November			
December			
Total	55	60	10%



	Separations
Involuntary	18
Voluntary	37
Total	55

	Classifications
RN	7
Classified	48
Total	55



Overall Turnover

2009	96
2010	98
2011	79
2012	104
2013	113
2014	88
2015	97
2016	86
2017	116
2018	96
2019	93
2020	55

Rolling 12

	Separations	%
Jan 19 - Jan 20	109	20%
Feb 19 - Feb 20	107	20%
March 19 - March 20	107	20%
April 19 - April 20	103	19%
May 19 - May 20	105	20%
June 19 - June 20	105	20%
July 19 - July 20	94	18%
Aug 19 - Aug 20	92	17%
Sept 19 - Sept 20	93	18%
Oct 19 - Oct 20	94	17%

Rehire Rate

	Rehires	%
July 19 - July 20	14	15%
Aug 19 - Aug 20	17	18%
Sept 19 - Sept 20	16	17%
Oct 19 - Oct 20	13	15%

MEMORIAL HOSPITAL OF SWEETWATER COUNTY - CLINIC DATA

2020 **Clinic** Turnover Data (as of 10/31/2020)

Top Position(s) / Turnover

Clinic Collections Clerk/Recep
Registered Nurse

2020

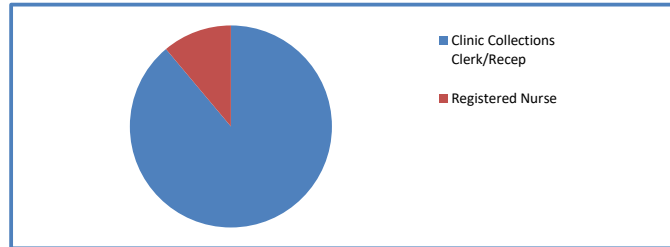
%

6

40%

1

5%



Top Reason(s) / Turnover

Discharged
Resignation

2020

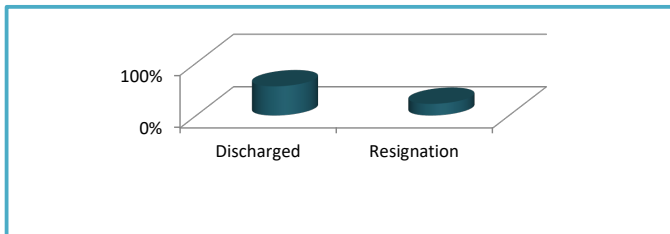
%

5

56%

2

22%



Length of Service

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

2020

%

3

33%

1

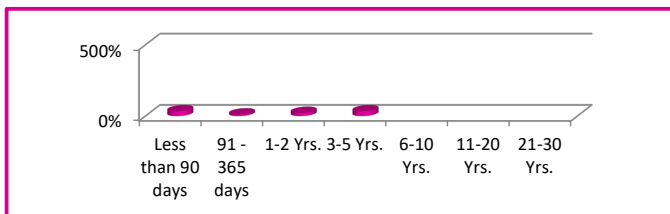
11%

2

22%

3

33%



Total

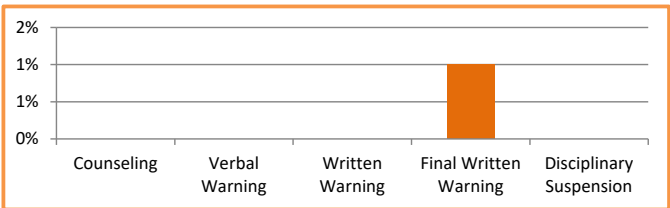
9

Corrective Action

Counseling
Verbal Warning
Written Warning
Final Written Warning
Disciplinary Suspension

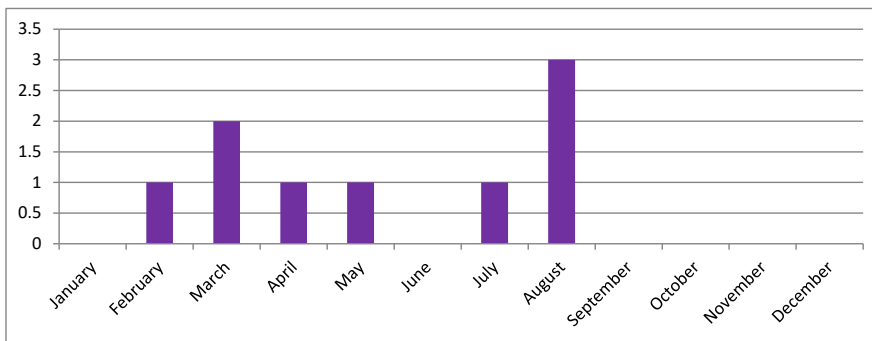
1%

100%



2020 Separations - Clinic

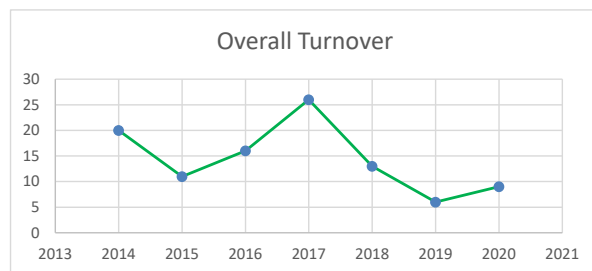
	Separations	New Employees	Total Employees	110
January	0	0	110	
February	1	1	110	
March	2	2	110	
April	1	0	109	
May	1	0	108	
June	0	0	108	
July	1	1	108	
August	3	3	108	
September	0	1	109	
October	0	4	113	
November				
December				
Total				



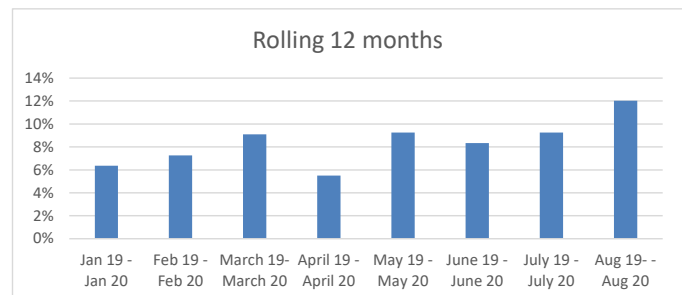
	Separations
Involuntary	5
Voluntary	4
Total	9

	Classifications
RN	1
Classified	8
Total	9

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



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



Policy Stat #:

Termination and Appeal

General:

This Termination and Appeal policy and procedure applies to all employees of Memorial Hospital excepting employed physicians and other providers. Only the Hospital's Chief Executive Officer (CEO) has the authority to terminate the employment of a Hospital employee and must provide a written directive to the Human Resources Office prior to any termination proceeding.

This Termination and Appeal policy and procedure does not apply to reduction-in-force (layoffs) due to a lack of funds, lack of work or other reasons.

From the time an employee is notified that he/she is being terminated, until all internal appeal avenues have been exhausted, the employee is entitled to continuing regular pay. At the discretion of the Hospital, the employee may be suspended with pay during this period of time, or may continue working. Should an employee resign, however, pay will cease at that time.

Employees may not utilize the Hospital's Conflict Resolution policy to address termination decisions.

Definitions:

At-Will Employee

An employee who has worked for the Hospital for less than one year and is in the "Introductory Period", per Hospital policy. It is understood that no consideration has been furnished to the Hospital for the employment of the employee other than the employee's services. Any employee has the right to terminate his/her employment with the Hospital and the Hospital has the same right.

Part Time Employee

An employee who occupies a position where the incumbent is scheduled to normally work less than thirty (30) hours in a work week.

Full Time Employee

An employee who occupies a position where the incumbent is scheduled to normally work thirty (30) hours a week or more.

Termination:

The involuntary termination of an employee by the Hospital's CEO.

Termination of "At-Will" Part Time Employees

Notice of termination shall be provided by the Director of Human Resources, or designee, upon a written directive from the CEO, by registered or certified mail to the last known address of

such employee. Proof of such written notice, together with the proof of mailing, shall be kept and retained in the records of the Hospital. Although one or more steps in the Hospital's Corrective Action Policy may be applied, the Hospital will not necessarily give the employee formal reasons for the termination.

Should the employee believe that the termination decision was based on the exercise of his or her constitutional rights, and/or that he or she has a reasonable expectation of continued employment, and/or that the action to terminate his or her employment would stigmatize him or her, the employee may appeal the decision to the CEO in writing within ten (10) calendar days of notification of termination. The CEO will review the written appeal and may (or may not) determine to interview the employee and/or discuss the matter with supervisory or other personnel. The CEO shall inform the employee of his or her decision in writing. The CEO's decision in this matter is final.

Termination of Non "At-Will" Part Time Employees

Notice of termination shall be provided by the Director of Human Resources, or designee, upon a written directive from the CEO, by registered or certified mail to the last known address of such employee. Proof of such written notice, together with the proof of mailing, shall be kept and retained in the records of the Hospital. The employee shall be provided reasons for the termination by the Hospital.

Should the employee decide to appeal the termination decision, the employee may appeal the decision to the CEO in writing within ten (10) calendar days of notification of termination. The CEO will review the written appeal and may (or may not) determine to interview the employee and/or discuss the matter with supervisory or other personnel. The CEO shall inform the employee of his or her decision in writing. The CEO's decision in this matter is final.

Termination of "At-Will" Full Time Employees

The Director of Human Resources, or designee, having first received a written directive from the CEO, shall terminate the employment of a full time employee who is in the "Introductory Period" upon notification in writing of such decision by registered or certified mail to the last known address of such employee. Proof of such written notice together with the proof of mailing, shall be kept and retained in the records of the Hospital. Reasons for the termination decision shall not be given, other than outlined below.

Should the employee believe that the decision to terminate his or her employment was based on the exercise of his or her constitutional rights, and/or that he or she has a reasonable expectation of continued employment and/or that the action to terminate his or her employment would stigmatize him or her, the following procedure will take place:

1. The employee may request a hearing before an Administrative Hearing Officer by requesting same in writing within ten (10) calendar days of receipt of the termination notice. The request shall be made to the CEO.

2. The CEO shall immediately notify the Board of Trustees' attorney of the request and shall forward the written request for a hearing to him or her. The Board of Trustees' attorney shall then arrange for an Administrative Hearing Officer to conduct a pre-hearing conference as soon as practical.
3. At the request of the Administrative Hearing Officer, the CEO shall submit to the Administrative Hearing Officer his or her reasons for termination. At the same time, the Administrative Hearing Officer shall request the employee to submit to the Administrative Hearing Officer substantial evidence that the termination decision was based upon an exercise of his or her constitutional rights and/or that he or she has a reasonable expectation of continued employment, and/or how the action of termination would stigmatize him or her.
4. After reviewing the reasons for the termination and any evidence submitted by the employee, the Administrative Hearing Officer shall determine that:
 - a. Sufficient evidence has been presented by the employee to warrant a formal hearing by the Administrative Hearing Officer. In such case, a hearing will be scheduled and, at the conclusion of the hearing, the Administrative Hearing Officer will submit a written copy of his or her findings, conclusions, and recommendations to the Board of Trustees for a final decision.

OR

- b. Insufficient evidence has been presented by the employee to warrant a formal hearing by the Administrative Hearing Officer. In such a case, the Administrative Hearing Officer will inform both the CEO and the employee of his or her findings. The CEO shall discuss these findings with the Board of Trustees' attorney and will subsequently make a recommendation to the Board of Trustees for a final decision.
5. If the Administrative Hearing Officer determines that a formal hearing shall be held, he or she will immediately provide the employee the CEO's reasons for termination and will immediately provide the CEO with any evidence submitted by the employee.

OR

If the Administrative Hearing Officer determines that a formal hearing is not warranted, upon request, he or she will provide the employee the CEO's reasons for termination.

6. Every reasonable effort shall be made by the Hospital to ensure that these due process proceedings are conducted in a timely manner. The Administrative Hearing Officer shall make a determination as to whether or not a formal hearing is warranted within thirty (30) calendar days from receipt of notice by the Board of Trustees' attorney. Should the Administrative Hearing Officer determine that a formal hearing be conducted, he or she shall notify the Board of Trustees' attorney of same. The Board of Trustees' attorney

shall then arrange for a pre-hearing conference as soon as practical. The formal hearing shall be held within thirty (30) calendar days following the pre-hearing conference. The Hospital shall pay for all administrative costs associated with the hearing including fees charged by the Hearing Officer and transcription services. The parties shall pay their own legal fees, if any. The Hospital's Rules of Practice Governing Hearings shall be followed. Should the Administrative Hearing Officer determine that a formal hearing is not warranted, a recommendation regarding the disposition of the case shall be made to the Board of Trustees within thirty (30) calendar days of the Administrative Hearing Officer's determination.

Termination of Non "At-Will" Full Time Employees

The Director of Human Resources, or designee, having first received a written directive from the CEO, shall terminate the employment of a full time employee who is not in the "Introductory Period", upon notification in writing of such decision by registered or certified mail to the last known address of such employee. Proof of such written notice together with the proof of mailing, shall be kept and retained in the records of the Hospital.

Prior to making the decision to terminate a full time employee in this category, and prior to notifying the employee of the decision, the CEO shall conduct an informal Pre-Determination Opportunity Meeting. The CEO shall notify the employee of the meeting by any appropriate means, giving the employee at least a week's notice. The employee may waive his or her right to participate in the meeting. At the meeting, the Hospital's Director of Human Resources, or designee, shall be in attendance. The employee's supervisor shall also be in attendance, unless the employee plans to attend the meeting and objects to same. The employee is allowed to have a limited number of other individuals attend this meeting and to speak in support of the employee.

At the Pre-Determination Opportunity Meeting, the CEO shall inform the employee that he or she is considering terminating the employee's employment at the Hospital. The CEO's reasons for considering the possible termination shall be shared with the employee. The employee shall be informed that this is an opportunity for the employee to share with the CEO information regarding his or her employment that the CEO can take into consideration prior to making a decision whether or not to terminate the employee.

Subsequent to the Pre-Determination Opportunity Meeting, the CEO shall make a decision. Should the CEO make the decision to terminate the employee, the employee shall be notified as set forth above. If the employee decides to appeal the termination decision, the following procedure will take place.

1. The employee may request a formal hearing before an Administrative Hearing Officer by requesting same in writing within ten (10) calendar days of receipt of the termination notice provided by the Hospital's Human Resources Office. The request shall be made to the CEO.

2. The CEO shall immediately notify the Board of Trustees' attorney of the request and shall forward the written request for a hearing to him or her. The Board of Trustees' attorney shall then arrange for an Administrative Hearing Officer to conduct a pre-hearing conference as soon as practical.
3. Every reasonable effort shall be made by the Hospital to ensure that these due process proceedings are conducted in a timely manner. The hearing shall be held within thirty (30) calendar days following the pre-hearing conference.
4. The Hospital shall pay all administrative costs associated with the hearing including fees charged by the Hearing Officer and transcription services. The parties shall pay their own legal fees, if any.
5. The Hospital's Rules of Practice Governing Hearings shall be followed.

Recommended Changes to Two Existing HR Policies March, 2020

These proposed changes to two existing HR policies are being recommended in connection with the recommendation to add a new policy, Termination and Appeal.

The Hospital's CEO, Irene Richardson, the Board's attorney, Jim Phillips, and Board Member Marty Kelsey all agree that the new policy should be adopted and that the two existing policies listed below should be modified as presented.

Employee Corrective Action

I.C.6 It is suggested that the existing sentence should remain "as is", but a second sentence should be added that would read: "Termination proceedings shall be handled in accordance with the Hospital's Termination and Appeal policy".

Introductory Period

The Hospital's CEO, Irene Richardson, would like to see the current 90 day Introductory Period, with a possible 90 day extension, replaced with a one year Introductory Period, with no extension.

Purpose

Replace "90 day" with "one year."

I.A. It is recommended that the second sentence be removed.

1.B. It is recommended that the first sentence be re-worded to read as follows: "Introductory period employees are at-will employees, as defined in the Hospital's Termination and Appeal policy". Further, it is recommended that all the remaining language in this section (1.B) be removed.

1.C It is recommended that the word "your" be removed.

II. It is recommended, in the introductory sentence, that "90 day" be replaced with "one year."

II.B. Same as above...replace "90 day" with "one year".

Capital Request Summary

Capital Request #

FY21-27

Name of Capital Request:

MASTER CONTROLLERS AND CAMERAS – OUT BUILDINGS

Requestor/Department:

DAVID BELTRAN/SECURITY

Sole Source Purchase: Yes or No

Reason: Utah Yamas is current vendor and we are adding onto existing system

☐ 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.	Utah Yamas	Draper, UT	\$33,642.00
2.			
3.			

Recommendation:

Utah Yamas - \$33,642.00

Memorial Hospital

OF SWEETWATER COUNTY

# Assigned: FY 21 - 27	
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: Security	Submitted by: David Beltran Date: 10/15/2020
Provide a detailed description of the capital expenditure requested: Master controller for 4 door card readers with ability to expand plus 8 cameras in and around facility buildings behind hospital.	
Preferred Vendor: Utah Yamas	
Total estimated cost of project (Check all required components and list related expense)	
1. Renovation	\$ 10,120.00
2. Equipment	\$ 13,552.00
3. Installation	\$ 8,325.00
4. Shipping	\$
5. Accessories	\$
6. Training	\$
7. Travel costs	\$
8. Other e.g. interfaces	\$ 1,645.00 (option 1)
Total Costs (add 1-8)	\$ 33,642.00
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 checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Safety
	Plumbing
electrical/cabling included in quote	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? 1	
<input type="checkbox"/> Copies and/or Summary attached. If no other bids obtained, reason: current vendor adding onto current operating system	
Review and Approvals	
Submitted by:	Verified enough Capital to purchase
Department Leader	<input type="checkbox"/> YES <input type="checkbox"/> NO
Executive Leader	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Chief Financial Officer	<input type="checkbox"/> YES <input type="checkbox"/> NO
Chief Executive Officer	<input type="checkbox"/> YES <input type="checkbox"/> NO
Board of Trustees Representative	<input type="checkbox"/> YES <input type="checkbox"/> NO

Scope Of Work Outline



Utah-Yamas Controls
13526 South 110 West
Draper, UT 84020
Tele: (801) 990-1950
Fax: (801) 990-1955

Date: 7/8/20
To: David Beltran, Memorial Hospital of Sweetwater County
Ref: Boiler Bldg security

PH: 307-352-8479
EM: dbeltran@sweetwatermemorial.com

Thank you for contacting us for your security needs. We appreciate the opportunity to provide this proposal. Please find details on the scope of work and pricing to complete this work, below.

- PROVIDE AND INSTALL THE MATERIAL REQUIRED TO SECURE (4) PERIMETER DOORS WITH CARD ACCESS AND INTEGRATE INTO THE EXISTING INET CONTROL SYSTEM.
DOORS TO SECURE ARE: NORTH ENTRY, EAST ENTRY, SOUTH ENTRY & MAINT BLDG ENTRY
- PROVIDE AND INSTALL (7) SECURITY CAMERAS AND INTEGRATE INTO THE EXISTING HANWHA VIDEO MANAGEMENT SYSTEM.
CAMERA LOCATIONS ARE: (3) BOILERS, (1) ELECTRICAL ROOM, WEST EXT, NORTH EXT & NE EXT CORNER
- ALL CAMERAS AND CARD ACCESS EQUIPMENT WILL BE IN 100% POINT TO POINT EMT CONDUIT AND WILL TERMINATE TO DOOR CONTROLLERS/POE SWITCHES IN THE NORTH OFFICE.
- POE NETWORK SWITCHES WILL BE OWNER PROVIDED AND INSTALLED.
- UTAH YAMAS CONTROLS TECHNICIANS WILL STAY IN CUSTOMER PROVIDED DORMS TO MINIMIZE COSTS.
- COST INCLUDES THE MATERIAL LISTED BELOW, WIRE PULLS, INSTALLATION, PROGRAMMING, TESTING, COMMISSIONING, TRAVEL, ACCOMMODATIONS & PER DIEM.
- MATERIAL:

1 - SCHNEIDER ELECT. 7798C, MASTER CONTROLLER	= \$1,855
1 - SCHNEIDER ELECT. 527NPR, NETPLUS ROUTER AND MOUNTING BASE	= \$2,050
1 - SCHNEIDER ELECT. SCU1284, 4-DOOR CARD READER CONTROLLER	= \$1,320
1 - PANEL BUILD UP INCLUDING 24x24x10 ENCLOSURE, PWR SUPPLIES, BATTERIES	= \$650
4 - AWID SP6820, PROXIMITY CARD READERS @ \$140EA	= \$560
2 - HES 9400 SERIES DOOR STRIKE FOR RIM EXIT BAR @ \$305EA	= \$610
2 - HES 5200 SERIES DOOR STRIKE FOR CYL HANDLE @ \$125EA	= \$250
4 - GRI 4400A, SURFACE MOUNT DOOR STATUS SWITCH w/ARMORED LEAD @ \$33EA	= \$132
4 - BOSCH DS160, REQUEST TO EXIT MOTION @ \$75EA	= \$300
1 - HANWHA WAVE-PRO-8, 8-PACK IP CAMERA LICENSES	= \$855
1 - HANWHA PNM9084QZ, 8MP 180 DEG MULTI-SENSOR CAMERA (4x2MP) w/MOUNT	= \$1,475
5 - HANWHA QNV6082R, 2MP, IR DOME CAM, IN/OUTDR, w/WALL MOUNT BKT @ \$420EA	= \$2,100
1 - HANWHA QNV8080R, 5MP IR DOME CAM, IN/OUTDR w/WALL MOUNT BKT	= \$545
PLENUM RATED WIRE, TAPE, TIES, BITS, LABELS & MISC INSTALL MATERIAL	= \$765
UPS GROUND SHIPPING CHARGES	= \$85
MATERIAL TOTAL:	= \$13,552
- WYOLECTRIC SUBCONTRACT:
100% CONDUIT INSTALLATION, ROUGH-IN, WIRE PULLS = \$10,120
- LABOR:
AS REQUIRED TO COMPLETE THE ABOVE SCOPE OF WORK = \$8,325

PROJECT TOTAL:	= \$31,997
-----------------------	-------------------

OPTION 1:

- WHILE ON SITE FOR THE ORIGINAL SCOPE OF WORK, PROVIDE AND INSTALL A CAMERA ON THE SW CORNER OF THE CARPENTRY BLDG. SAME SCOPE OF WORK APPLIES AS ABOVE.
- MATERIAL:

1 - HANWHA QNV8080R, 5MP IR DOME CAM, IN/OUTDR w/WALL MOUNT BKT	= \$545
PLENUM RATED WIRE, TAPE, TIES, BITS, LABELS & MISC INSTALL MATERIAL	= \$45
- WYOLECTRIC SUBCONTRACT:
100% CONDUIT INSTALLATION, ROUGH-IN, WIRE PULLS = \$805
- LABOR:
AS REQUIRED TO COMPLETE THE ABOVE SCOPE OF WORK = \$250

7/8/2020

OPTION 1:

= \$1,645

Thank you for allowing Utah-Yamas Controls Inc. to present this quotation to you. If you should have any questions please give me a call at 801-990-1950.

Sincerely,

Brian Dahl
Utah-Yamas Controls Inc.

This quotation, when signed by the purchaser or a representative, implies an acceptance of the attached terms and conditions at the end of this document and becomes a contract in full force and effect. All quotations are for prompt acceptance and are subject to change without notice after 60 days.

Signature

Printed Name

79/192

FY#	GRANT	DESCRIPTION	AMOUNT
FY21-5	CRF-01	MOBILE LAB 37FT	\$ 278,250.00
FY21-6, FY21-7	CRF-10	UVC ROBOTS	\$ 248,594.00
FY21-8, FY21-9	CRF-05	LABORATORY EQUIPMENT	\$ 227,531.00
FY21-11	CRF-61	MOB ENTRANCE \$289,900	deleted
FY21-12	CRF-59	UVG	\$ 463,875.00
FY21-13	CRF-77	HVAC	\$ 2,314,000.00
FY21-18	CRF-58	MOBILE LAB 26FT	\$ 197,250.00
FY21-19	CRF-62	LAB ANALYZERS (2)	\$ 366,000.00
FY21-20, FY21-21, FY21-22, FY21-29	CRF-64	WALK-IN CLINIC LAB EQUIPMENT	\$ 311,304.00
not capital	CRF-20	PAYROLL	\$ 672,894.00
not capital	CRF-63	PAPRS (50)	\$ 77,155.00
FY21-28	CRF-60	PRONING BEDS \$79,000	\$ 36,000.00
Total approved grants			\$ 5,192,853.00

Memorial Hospital

A Division of Sweetwater County

Assigned: FY 21 - 28

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: ICU Submitted by: Melissa Anderson Date: 9-14-20

Provide a detailed description of the capital expenditure requested:

This request is for a proning bed for COVID-19 pt with severe symptoms of respiratory distress. May also be used with pts diagnosed with ARDs, pts ventilated, and/or in need of positioning for adequate respiratory movement.

Preferred Vendor: ARJO Medical/Triadyno

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

1. Renovation	\$
2. Equipment	\$ 36,000.00
3. Installation	\$
4. Shipping	\$
5. Accessories	\$
6. Training	\$
7. Travel costs	\$
8. Other e.g. interfaces	\$
Total Costs (add 1-8)	\$ 36,000.00

Does the requested item:

Require annual contract renewal? ☐ YES ☒ NO

Fit into existing space?
☒ YES ☐ NO

Explain: beds will be housed in the ICU

Attach to a new service?
☐ YES ☒ NO

Explain:

Require physical plan modifications?
If yes, list to the right:
☐ YES ☒ NO

Electrical
HVAC
Safety
Plumbing
Infrastructure (I/S cabling, software, etc.)

\$ 0
\$
\$
\$
\$

Annualized impact on operations (if applicable):
Increases/Decreases

Budgeted Item:

☐ YES ☒ NO

Projected Annual Procedures (NEW not existing)

Revenue per procedure	\$
Projected gross revenue	\$
Projected net revenue	\$
Projected Additional FTE's	
Salaries	\$
Benefits	\$
Maintenance	\$
Supplies	\$

of bids obtained? 1
☒ Copies and/or Summary attached.
If no other bids obtained, reason:
sole source

SLIB grant CRF-60

Total Annual Expenses \$ 0 after purchase- long term; possible maintenance
Net Income/(loss) from new service \$

Review and Approvals

Submitted by: Melissa Anderson	Verified enough Capital to purchase
Department Leader	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Vice-President of Operations (NO)	<input checked="" 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

Handwritten signatures and dates:
10/24/2020
10/21/2020
10-27-2020

OTHER CONSIDERATIONS

<https://www.arjo.com/siteassets/inriver/resources/a/arjo-products-critical-care-rotoprone-tilted>

see above link for image of proning bed and kit.

The funds will come from the approved SLIB grant/funds. The bed will be to assist in alleviating severe respiratory signs and symptoms in patients diagnosed with acute respiratory distress syndrome, COVID, and any other respiratory illness that can progress or in patients that are mechanically ventilated.

Capital - \$36,000.00

Melissa Anderson
Digitally signed by Melissa Anderson
Date: 2019.03.08 13:27:46 -07'00'

Submitted by: Signature

9-14-20

Date

MEMORIAL HOSPITAL OF SWEETWATER COUNTY FINANCE & AUDIT COMMITTEE AGENDA

Tuesday~ November 24, 2020

10:00 a.m.

Teleconference

Voting Members:

Richard Mathey, Chairman

Ed Tardoni

Irene Richardson

Tami Love

Jan Layne

Non-Voting Members:

Ron Cheese

Angel Bennett

Ann Clevenger

Kari Quickenden

Dr. Larry Lauridsen

Dr. Augusto Jamias

Guests:

Jeff Smith, Commission

David Beltran

Stacey Nutt

Leslie Taylor

- | | | |
|------|--|----------------|
| I. | Call Meeting to Order | Richard Mathey |
| II. | <u>Approve October 28, 2020 Meeting Minutes</u> | Richard Mathey |
| III. | <u>Capital Requests FY 21</u> | |
| IV. | Financial Report | |
| | A. Monthly Financial Statements & Statistical Data | |
| | 1. <u>Narratives</u> | Tami Love |
| | 2. <u>Financial Information</u> | Tami Love |
| | B. Other Business | |
| | 1. Preliminary Bad Debt | Ron Cheese |
| V. | Old Business | |
| | A. SLIB grants update | Tami Love |
| VI. | New Business | |
| | A. Financial Forum Discussion | Richard Mathey |
| VII. | Adjournment | Richard Mathey |

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
Finance & Audit Committee Meeting
October 28, 2020

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

Voting Members Absent:

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

Non-Voting Members Absent: Dr. Augusto Jamias
Dr. Lawrence Lauridsen

Guests: Leslie Taylor, *Clinic Director*

Call Meeting to Order

Mr. Mathey called the meeting to order via teleconference. A motion to approve the agenda was made by Mr. Tardoni; seconded by Ms. Richardson. Motion carried.

Approve Meeting Minutes

A motion to approve the meeting minutes of September 30, 2020 with amended proposal was made by Mr. Tardoni; second by Ms. Richardson. Motion carried.

Capital Requests

FY21-29 for the Cytometer Analyzer is a SLIB approved grant. Mr. Mathey acknowledged receipt of this information and said that no approval was needed. It will be forwarded to the Board for ratification.

Ms. Love presented the Medical Imaging Remodel project. She explained that part of the HVAC project will take place in the Medical Imaging area. We are requesting to remodel the area of Medical Imaging that will be torn up from the HVAC project. This area is in-need of remodeling and it makes sense to do both projects at one time. It will save money and the offices and patient areas will only have to be relocated once. Ms. Love showed a plan on what areas would be remodeled and where everything would be moved. Ms. Richardson added these big remodel projects will help bring our age of plant ratio back down. Mr. Mathey asked for a

recommendation to move to the Board. A motion to move the proposal to the Board was made by Mr. Tardoni; second by Ms. Richardson. Motion carried.

Financial Report

Monthly Finance Statements & Statistical Data

Ms. Love said we did not use any of the CARES funds in September. She said this is because the rules keep changing and more guidance from HHS is coming out. We have approximately \$5.2 million left to reconcile. She also said repayment of the accelerated Medicare payments has been pushed back and we will have 2 years to pay it back before interest is added. Mr. Mathey asked where the money is on the financial statements. Ms. Love said that it can be found on the Balance Sheet under Board Designated Funds and Deferred Revenue. Mr. Mathey wanted to commend everyone involved in the SLIB process at MHSC. He said he has read articles of other hospitals that did not do a very good job in the SLIB process.

Ms. Love reviewed the narratives for September. She said our reduction of revenue increased this month to 56.4%. This increase was due to the increase in self-pay. We believe this is due to Covid and the economy. She said back in March a self-pay plan was proposed. This plan was put on hold when Covid hit. We are going to try and start implementing it again.

She said our salary and wage expenses are over budget due to budgeting at lower numbers. We have not seen the lower revenue due to Covid. We have also added extra positions such as swabbers and door monitors. We will be able to use CARES funds for these added positions. Mr. Tardoni asked about the revenue stream for the Covid testing. Ms. Love explained tests sent to the state are free and tests that go to ARUP are \$85.00.

Mr. Cheese presented the potential bad debt. The potential bad debt for October is \$1,174,614. He said three months ago we saw a huge increase in self-pay. This has now added to the increase in bad debt. He reported pure self-pay has increased about \$250,000 per month. Mr. Tardoni asked if Mr. Cheese was aware of the Miners insurance forms. He said it might help out some people. Mr. Cheese said he would look into it. Mr. Cheese also said they will be hiring a new employee to strictly work self-pay.

Old Business

Ms. Love reported updated information on the SLIB grants. She said so far we have requested \$1.4 million in reimbursements. We have also sent requests to the County. The County approved approximately \$450,000 and those requests will go to the next SLIB meeting for approval. Ms. Richardson said we requested grants for technology, ventilators, temperature kiosks and lab equipment.

Mr. Mathey asked for the breakdown of the funds we have received for CARES. Ms. Love provided the breakdown of \$1,205,545 in the first payment, \$466,486 for the second payment,

\$4,883,611 for the third payment for rural hospitals, \$5 million for safety net hospitals and \$63,442 for a reconciliation of the first payment. Ms. Richardson added we have also received \$7.4 million in accelerated Medicare and \$5.5 million in SLIB and another \$450,000 possible if the County requests are approved.

There was continued discussion on enterprise revenue. Mr. Mathey asked how it is measured and how much enterprise revenue comes from a surgery. Ms. Love said that everything except for the clinic revenue would be enterprise revenue. She gave the example that Dr. Symington's enterprise revenue would be very high due to the high cost of chemotherapy drugs. Mr. Tardoni wondered about the significance to the Board. Ms. Richardson said it is not significant to the Board, but is useful to management for operations. She said we never used to report this number to the Board. A member of a previous board requested it and we have continued to report it. Mr. Tardoni is worried this report can lead people to wrong conclusions. He does not think it is valuable to the board. Ms. Taylor thinks it leads to judging a physician's practice. Mr. Mathey asked who makes the decision to remove it from the packet. Mr. Richardson said that this decision is made at the committee level. Mr. Tardoni asked if there is a possible alternative measure. Mr. Mathey said maybe this should be a topic that is revisited with the new EMR. Mr. Tardoni suggested we leave it alone until we have a potential replacement.

New Business

Financial Forum Discussion

Ms. Love said that the Department of Audit Survey is included in the packet. She said we are required to submit this report every year. This year the state added a requirement of board signatures so we included it in the packet to review.

Mr. Love asked if the next meeting should be moved as it is the day before Thanksgiving. It was agreed to move the meeting to November 24, 2020. Mr. Mathey proposed moving the F&A meeting every month from 4pm to 3pm. It was agreed to move the meeting to 3pm.

With no further business, the meeting adjourned at 5:40 PM.

Submitted by Jan Layne

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

NARRATIVE TO OCTOBER 2020 FINANCIAL STATEMENTS

THE BOTTOM LINE. The bottom line from operations for October was a gain of \$68,869, compared to a loss of \$43,713 in the budget. This yields a .88% operating margin for the month compared to -.58% in the budget. The YTD net operating gain is \$76,026, compared to a loss of \$1,223,941 in the budget. This represents a YTD operating margin of .25% compared with -4.19% in the budget.

The total net gain for October is \$1,004,226, compared to a loss of \$48,179 in the budget. The YTD total net gain is \$1,371,907, compared to a loss of \$1,245,141 in the budget. This represents a YTD profit margin of 4.49% compared to -4.26% in the budget.

REVENUE. Revenue for the month was \$15,522,127, over budget by \$1,416,016. Inpatient revenue was over budget by \$72,179, hospital outpatient revenue was over budget by \$1,166,665 and the employed Provider Clinic was over budget by \$177,172. We saw a 10% increase in hospital gross revenue compared to budget and a 2.4% increase over the prior year. We have not seen the lower volumes we budgeted for the COVID-19 pandemic.

CARES Act – We have not reconciled CARES Act funds for the current fiscal year as we are reviewing the most recent requirements to figure the amount of lost revenue and expenses for reconciliation purposes. We have \$5,283,866 in grant reserves.

Annual Debt Service Coverage came in at 4.71. Days of Cash on Hand are 210 in October, down thirteen days from last month. Daily cash expense is \$230,000 year to date, up slightly from the prior month.

REDUCTION OF REVENUE. Deductions from revenue were lower this month, booked at 50.6% for October. Year to date reduction of revenue is 52.6%, right on budget. Total collections for the month came in higher this month at \$7,358,634. Net days in AR are up two days at 43.3 days. Goals for AR greater than 90 days were all attained again this month with the exception of Medicaid. We continue to see an increase in Self-Pay as a percentage of gross revenue and as a percentage of total accounts receivable.

The table below shows the October variance of expected to actual collections by payer for the Hospital only. The total collections came in lower than expected, at 47% compared to our goal of 48%.

OCTOBER						
Payer	Avg prior 2 months	Collection %	Expected Collections	Actual	Act Variance	Act Coll %
BLUE CROSS	2,895,061.00	83%	2,402,900.63	2,386,489.00	(16,411.63)	82%
COMMERCIAL	1,968,710.50	83%	1,634,029.72	1,674,614.00	40,584.29	85%
GOVERNMENT	710,943.00	20%	142,188.60	267,602.00	125,413.40	38%
MEDICAID	1,209,419.00	24%	290,260.56	340,035.00	49,774.44	28%
MEDICARE - IP	1,122,803.79	55%	617,542.08	252,867.63	(364,674.45)	23%
MEDICARE - OP	4,381,113.21	22%	963,844.91	986,674.37	22,829.46	23%
SELF PAY	1,428,520.00	40%	571,408.00	553,023.00	(18,385.00)	39%
WORKERS COMP	189,192.50	40%	75,677.00	28,529.00	(47,148.00)	15%
TOTAL HOSPITAL	13,905,763.00	48.2%	6,697,851.49	6,489,834.00	(208,017.49)	47%

EXPENSES. Total expenses in October were \$7,773,019, over budget by \$127,136. Expenses are over budget by \$61,847 year-to-date. The following line items were over budget:

Salary and Wage – Paid hours are over budget in October due to the higher volumes and the continued need for COVID related positions such as door monitors and lab swabbers.

Contract Labor – There are currently contract labor positions in Behavioral Health and Ultrasound.

Physician Fees – Locum tenens fees are over budget for Hospitalists, Pulmonology and Urology.

Repairs and Maintenance – Expenses over budget in October include Contract maintenance for the Cerner project.

PROVIDER CLINIC. Revenue for the Clinic increased in October, at \$1,669,859, over budget by \$177,172. Net patient revenue for the Clinic for October was \$904,126, over budget by \$112,056. The bottom line for the Clinic in October was a loss of \$603,935 compared to a loss of \$658,887 in the budget. Volumes were up slightly in October with total visits of 4,958. The Clinic providers also generate hospital enterprise revenue, including Lab, Imaging and Surgery. Gross enterprise revenue year to date is \$17,678,907 which is 28.1% of total Hospital revenue.

Deductions from revenue for the Clinic were booked at 45.9% for October. The payer mix year to date is as follows; Commercial Insurance and Blue Cross is 56% of revenue, Medicare and Medicaid is 39% of revenue and Self Pay is 6.6% of revenue. There has been increases in Commercial, Medicaid and Self-Pay and a decrease in Blue Cross and Medicare compared to prior year. Total expenses for the month were \$1,582,457, over budget \$63,712. The majority of the expenses consist of Salaries and Benefits; at 82.3% of total expenses year-to-date. Salary and wage, Physician fees and Purchased services were over budget for October.

OUTLOOK FOR NOVEMBER. Gross patient revenue is projecting slightly less in November but still over budget at \$14.9 million. Compared to last November, ER visits are down by 14%, Surgeries down 10% and Births are down by 32%. Admits are down by 39% but Patient Days are up by 23% due to longer length of stay. Lab visits are up by 87%, Sleep Lab is up by 11% and Outpatient visits are up 44%. Collections are projecting similar to the prior month for November at \$7.2 million. We expect the loss for November to be around \$300k - \$400k.

NOVEMBER		days 18							
Payer	Avg prior 2 months	Collection %	Expected Collections	Actual	Act Variance	Act Coll %	Projected	Prj Variance	Prj Coll %
BLUE CROSS	2,986,201.00	83%	2,478,546.83	1,834,065.00	(644,481.83)	61%	3,056,775.00	578,228.17	102%
COMMERCIAL	2,007,013.00	83%	1,665,820.79	823,756.00	(842,064.79)	41%	1,372,926.67	(292,894.12)	68%
GOVERNMENT	645,674.00	20%	129,134.80	141,270.00	12,135.20	22%	235,450.00	106,315.20	36%
MEDICAID	1,186,630.50	22%	261,058.71	97,115.00	(163,943.71)	8%	161,858.33	(99,200.38)	14%
MEDICARE - IP	1,061,133.82	54%	573,012.26	127,989.53	(445,022.74)	12%	213,315.88	(359,696.39)	20%
MEDICARE - OP	4,140,480.68	21%	869,500.94	499,407.47	(370,093.47)	12%	832,345.79	(37,155.15)	20%
SELF PAY	1,343,687.00	35%	470,290.45	335,668.00	(134,622.45)	25%	559,446.67	89,156.22	42%
WORKERS COMP	112,342.00	35%	39,319.70	31,942.00	(7,377.70)	28%	53,236.67	13,916.97	47%
TOTAL HOSPITAL	13,483,162.00	48.1%	6,486,684.49	3,891,213.00	(2,595,471.49)	29%	6,485,355.00	(1,329.49)	48%

Variances - Collections are projecting to come in right as expected this month, at 48%. We are currently down several positions in the billing office and are working on getting interviews and orientation dates scheduled.

Reduction of revenue - Projections for November payer mix shows an increase in Medicare, Work Comp and Self Pay with decreases in all other payers. This will result in an increase in reductions of revenue for November.



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

Unaudited Financial Statements

for

Four months ended October 31, 2020

Certification Statement:

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

Certified by:

Tami Love

Chief Financial Officer

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

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Four months ended October 31, 2020

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MEMORIAL HOSPITAL OF SWEETWATER COUNTY

EXECUTIVE FINANCIAL SUMMARY

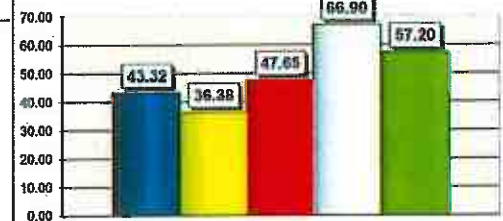
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Four months ended October 31, 2020

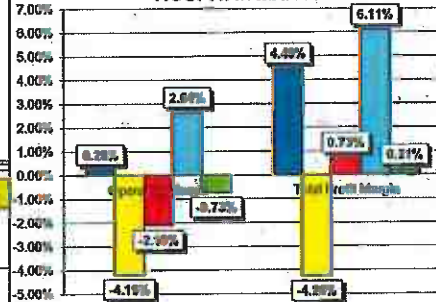
BALANCE SHEET

	YTD 10/31/2020	Prior FYE 6/30/2020
ASSETS		
Current Assets	\$29,802,602	\$29,710,616
Assets Whose Use is Limited	41,705,659	41,885,879
Property, Plant & Equipment (Net)	64,358,062	62,796,433
Other Assets	218,238	222,356
Total Unrestricted Assets	136,084,562	134,615,283
Restricted Assets	352,679	354,288
Total Assets	\$136,437,240	\$134,969,571
LIABILITIES AND NET ASSETS		
Current Liabilities	\$8,893,507	\$8,393,554
Long-Term Debt	27,781,250	27,800,498
Other Long-Term Liabilities	12,798,625	13,181,959
Total Liabilities	49,473,382	49,376,010
Net Assets	86,963,858	85,593,560
Total Liabilities and Net Assets	\$136,437,240	\$134,969,571

NET DAYS IN ACCOUNTS RECEIVABLE



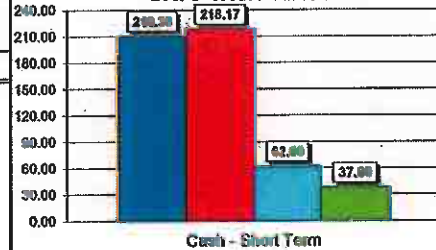
HOSPITAL MARGINS



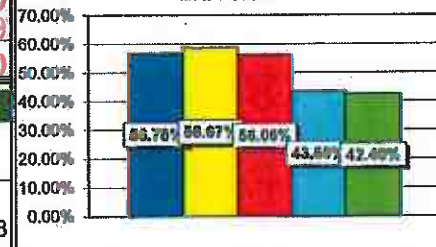
STATEMENT OF REVENUE AND EXPENSES - YTD

	10/31/20 ACTUAL	10/31/20 BUDGET	YTD ACTUAL	YTD BUDGET
Revenue:				
Gross Patient Revenues	\$15,522,127	\$14,106,112	\$62,804,466	\$55,688,750
Deductions From Revenue	(7,851,193)	(7,208,293)	(33,054,269)	(29,227,810)
Net Patient Revenues	7,670,934	6,897,819	29,750,198	26,460,940
Other Operating Revenue	170,953	704,351	817,877	2,745,320
Total Operating Revenues	7,841,887	7,602,170	30,568,075	29,206,260
Expenses:				
Salaries, Benefits & Contract Labor	4,444,062	4,303,276	17,314,052	17,136,515
Purchased Serv. & Physician Fees	694,212	637,462	2,672,871	2,731,394
Supply Expenses	1,195,557	1,219,191	5,072,760	4,810,754
Other Operating Expenses	881,677	910,460	3,207,568	3,454,042
Bad Debt Expense	0	0	0	0
Depreciation & Interest Expense	557,511	575,494	2,224,796	2,297,496
Total Expenses	7,773,019	7,645,882	30,492,048	30,430,201
NET OPERATING SURPLUS	68,869	(43,713)	76,026	(1,223,941)
Non-Operating Revenue/(Exp.)	935,357	(4,467)	1,295,880	(21,200)
TOTAL NET SURPLUS	\$1,004,226	(\$48,179)	\$1,371,907	(\$1,245,141)

DAYS CASH ON HAND



SALARY AND BENEFITS AS A PERCENTAGE OF TOTAL EXPENSES



KEY STATISTICS AND RATIOS

	10/31/20 ACTUAL	10/31/20 BUDGET	YTD ACTUAL	YTD BUDGET
Total Acute Patient Days	332	335	1,291	1,231
Average Acute Length of Stay	3.0	2.6	2.8	2.8
Total Emergency Room Visits	1,111	1,166	4,605	4,954
Outpatient Visits	9,672	7,420	35,320	28,252
Total Surgeries	147	140	634	579
Total Worked FTE's	438.37	437.01	428.04	437.01
Total Paid FTE's	477.70	479.80	471.72	479.80
Net Revenue Change from Prior Yr	0.70%	-2.38%	3.88%	-0.75%
EBIDA - 12 Month Rolling Average			6.46%	3.68%
Current Ratio			3.35	
Days Expense in Accounts Payable			39.99	

MEMORIAL HOSPITAL OF SWEETWATER COUNTY	
Budget	10/31/20
Prior Fiscal Year End	06/30/20
WYOMING	All Hospitals
< \$90M Net Rev.	Rural

FINANCIAL STRENGTH INDEX -		3.11
Excellent - Greater than 3.0	Good - 3.0 to 0.0	
Fair - 0.0 to (2.0)	Poor - Less than (2.0)	

Balance Sheet - Assets

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

ROCK SPRINGS, WY

Four months ended October 31, 2020

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	Current Month 10/31/2020	Prior Month 9/30/2020	ASSETS Positive/ (Negative) Variance	Percentage Variance	Prior Year End 6/30/2020
Current Assets					
Cash and Cash Equivalents	\$10,199,185	\$12,892,825	(\$2,693,640)	-20.89%	\$12,052,717
Gross Patient Accounts Receivable	23,463,907	23,574,878	(110,970)	-0.47%	22,601,743
Less: Bad Debt and Allowance Reserves	(13,273,451)	(13,616,454)	343,003	2.52%	(12,704,325)
Net Patient Accounts Receivable	10,190,457	9,958,424	232,033	2.33%	9,897,418
Interest Receivable	0	0	0	0.00%	0
Other Receivables	4,084,145	2,726,902	1,357,243	49.77%	2,416,525
Inventories	3,323,549	3,295,679	27,869	0.85%	3,208,539
Prepaid Expenses	2,005,267	2,041,864	(36,598)	-1.79%	2,135,417
Due From Third Party Payers	0	0	0	0.00%	0
Due From Affiliates/Related Organizations	0	0	0	0.00%	0
Other Current Assets	0	0	0	0.00%	0
Total Current Assets	29,802,602	30,915,695	(1,113,093)	-3.60%	29,710,616
Assets Whose Use is Limited					
Cash	37,576	49,517	(11,941)	-24.11%	23,688
Investments	0	0	0	0.00%	0
Bond Reserve/Debt Retirement Fund	0	0	0	0.00%	0
Trustee Held Funds - Project	2,792,889	2,681,254	111,636	4.16%	3,030,616
Trustee Held Funds - SPT	18,563	18,385	178	0.97%	14,345
Board Designated Funds	18,596,767	14,588,298	4,008,470	27.48%	23,843,068
Other Limited Use Assets	20,259,864	24,259,803	(3,999,939)	-16.49%	14,974,161
Total Limited Use Assets	41,705,659	41,597,256	108,403	0.26%	41,885,879
Property, Plant, and Equipment					
Land and Land Improvements	3,527,687	3,527,687	0	0.00%	3,527,687
Building and Building Improvements	38,783,761	38,783,761	0	0.00%	38,771,352
Equipment	112,962,893	111,199,934	1,762,959	1.59%	110,464,497
Construction In Progress	4,210,488	4,137,704	72,784	1.76%	2,957,578
Capitalized Interest	0	0	0	0.00%	0
Gross Property, Plant, and Equipment	159,484,829	157,649,086	1,835,743	1.16%	155,721,114
Less: Accumulated Depreciation	(95,126,767)	(94,570,423)	(556,343)	-0.59%	(92,924,681)
Net Property, Plant, and Equipment	64,358,062	63,078,662	1,279,400	2.03%	62,796,433
Other Assets					
Unamortized Loan Costs	218,238	219,268	(1,029)	-0.47%	222,356
Other	0	0	0	0.00%	0
Total Other Assets	218,238	219,268	(1,029)	-0.47%	222,356
TOTAL UNRESTRICTED ASSETS	136,084,562	135,810,881	273,681	0.20%	134,615,283
Restricted Assets	352,679	352,679	0	0.00%	354,288
TOTAL ASSETS	\$136,437,240	\$136,163,560	\$273,681	0.20%	\$134,969,571

Balance Sheet - Liabilities and Net Assets

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

ROCK SPRINGS, WY

Four months ended October 31, 2020

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	LIABILITIES AND FUND BALANCE				Prior Year End 6/30/2020
	Current Month 10/31/2020	Prior Month 9/30/2020	Positive/ (Negative) Variance	Percentage Variance	
Current Liabilities					
Accounts Payable	\$4,792,549	\$4,464,538	(\$328,011)	-7.35%	\$3,776,951
Notes and Loans Payable	0	0	0	0.00%	0
Accrued Payroll	1,047,249	2,232,032	1,184,782	53.08%	1,377,654
Accrued Payroll Taxes	0	0	0	0.00%	0
Accrued Benefits	2,521,662	2,474,791	(46,871)	-1.89%	2,483,630
Accrued Pension Expense (Current Portion)	0	0	0	0.00%	0
Other Accrued Expenses	0	0	0	0.00%	0
Patient Refunds Payable	0	0	0	0.00%	0
Property Tax Payable	0	0	0	0.00%	0
Due to Third Party Payers	0	0	0	0.00%	0
Advances From Third Party Payers	0	0	0	0.00%	0
Current Portion of LTD (Bonds/Mortgages)	308,044	308,044	0	0.00%	308,044
Current Portion of LTD (Leases)	0	0	0	0.00%	0
Other Current Liabilities	224,003	112,389	(111,614)	-99.31%	447,275
Total Current Liabilities	8,893,507	9,591,794	698,287	7.28%	8,393,554
Long Term Debt					
Bonds/Mortgages Payable	28,089,294	28,094,106	4,812	0.02%	28,108,542
Leases Payable	0	0	0	0.00%	0
Less: Current Portion Of Long Term Debt	308,044	308,044	0	0.00%	308,044
Total Long Term Debt (Net of Current)	27,781,250	27,786,062	4,812	0.02%	27,800,498
Other Long Term Liabilities					
Deferred Revenue	12,436,587	12,436,587	0	0.00%	12,716,487
Accrued Pension Expense (Net of Current)	0	0	0	0.00%	0
Other	362,038	389,485	27,447	7.05%	465,472
Total Other Long Term Liabilities	12,798,625	12,826,071	27,447	0.21%	13,181,959
TOTAL LIABILITIES	49,473,382	50,203,928	730,546	1.46%	49,376,010
Net Assets:					
Unrestricted Fund Balance	83,284,026	83,284,026	0	0.00%	78,299,323
Temporarily Restricted Fund Balance	1,959,119	1,959,119	0	0.00%	1,959,119
Restricted Fund Balance	348,806	348,806	(0)	0.00%	350,415
Net Revenue/(Expenses)	1,371,907	367,680	N/A	N/A	4,984,703
TOTAL NET ASSETS	86,963,858	85,959,632	(1,004,226)	-1.17%	85,593,560
TOTAL LIABILITIES AND NET ASSETS	\$136,437,240	\$136,163,560	(\$273,681)	-0.20%	\$134,969,571

Key Financial Ratios

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
ROCK SPRINGS, WY
Four months ended October 31, 2020

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

		Year to Date 10/31/2020	Budget 6/30/2020	BB+ Credit Rating	BBB- Credit Rating	Prior Fiscal Year End 06/30/20	WYOMING All Hospitals (See Note 1)	National Rural < \$80M Net Rev. (See Note 2)
Profitability:								
Operating Margin	*	0.25%	1.90%	0.10%	0.30%	-2.10%	2.64%	-0.73%
Total Profit Margin	*	4.49%	0.76%	0.80%	1.00%	0.73%	6.11%	0.21%
Liquidity:								
Days Cash, All Sources **	*	210.36	129.76	91.30	129.00	218.17	62.00	37.80
Net Days in Accounts Receivable	*	43.32	50.02	52.40	51.60	47.65	66.90	57.20
Capital Structure:								
Average Age of Plant (Annualized)	*	15.08	12.58	15.10	11.20	14.33	9.50	12.40
Long Term Debt to Capitalization	*	24.71%	25.75%	48.20%	41.80%	26.04%	16.80%	10.00%
Debt Service Coverage Ratio **	*	4.71	3.97	1.80	2.30	3.42	N/A	2.64
Productivity and Efficiency:								
Paid FTE's per Adjusted Occupied Bed	*	8.62	8.43			8.38	8.60	4.63
Salary Expense per Paid FTE		\$88,781	\$86,692			\$87,488	\$82,436	\$48,150
Salary and Benefits as a % of Total Operating Exp		56.76%	56.43%			56.06%	43.80%	42.40%

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

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

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

Statement of Revenue and Expense

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

ROCK SPRINGS, WY

Four months ended October 31, 2020

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	CURRENT MONTH				Prior Year 10/31/19
	Actual 10/31/20	Budget 10/31/20	Positive (Negative) Variance	Percentage Variance	
Gross Patient Revenue					
Inpatient Revenue	\$3,015,926	\$2,943,748	\$72,179	2.45%	\$3,144,192
Outpatient Revenue	10,836,342	9,669,677	1,166,665	12.07%	10,345,137
Clinic Revenue	1,435,042	1,210,212	224,830	18.58%	1,354,373
Specialty Clinic Revenue	234,817	282,475	(47,658)	-16.87%	313,861
Total Gross Patient Revenue	15,522,127	14,106,112	1,416,016	10.04%	15,157,564
Deductions From Revenue					
Discounts and Allowances	(6,210,334)	(6,198,485)	(11,848)	-0.19%	(6,692,232)
Bad Debt Expense (Governmental Providers Only)	(1,223,363)	(848,268)	(375,095)	-44.22%	(797,098)
Medical Assistance	(417,497)	(161,539)	(255,957)	-158.45%	(166,667)
Total Deductions From Revenue	(7,851,193)	(7,208,293)	(642,901)	-8.92%	(7,655,997)
Net Patient Revenue	7,670,934	6,897,819	773,115	11.21%	7,501,567
Other Operating Revenue	170,953	704,351	(533,397)	-75.73%	286,120
Total Operating Revenue	7,841,887	7,602,170	239,718	3.15%	7,787,687
Operating Expenses					
Salaries and Wages	3,500,184	3,255,459	(244,725)	-7.52%	3,394,397
Fringe Benefits	914,860	1,026,631	111,771	10.89%	1,014,021
Contract Labor	29,017	21,186	(7,832)	-36.97%	65,915
Physicians Fees	307,891	243,964	(63,927)	-26.20%	442,922
Purchased Services	386,321	393,497	7,177	1.82%	406,071
Supply Expense	1,195,557	1,219,191	23,634	1.94%	1,260,326
Utilities	79,491	101,222	21,732	21.47%	96,172
Repairs and Maintenance	594,480	466,850	(127,630)	-27.34%	428,532
Insurance Expense	44,678	43,785	(893)	-2.04%	53,986
All Other Operating Expenses	113,212	236,568	123,356	52.14%	210,413
Bad Debt Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Leases and Rentals	49,816	62,035	12,218	19.70%	83,761
Depreciation and Amortization	557,511	575,494	17,982	3.12%	563,653
Interest Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Total Operating Expenses	7,773,019	7,645,882	(127,136)	-1.65%	8,020,168
Net Operating Surplus/(Loss)	68,869	(43,713)	112,581	-257.55%	(232,481)
Non-Operating Revenue:					
Contributions	0	0	0	0.00%	0
Investment Income	20,019	23,667	(3,648)	-15.41%	32,300
Tax Subsidies (Except for GO Bond Subsidies)	178	0	178	0.00%	(2,103)
Tax Subsidies for GO Bonds	0	0	0	0.00%	0
Interest Expense (Governmental Providers Only)	(187,810)	(99,514)	8,296	-8.34%	(99,514)
Other Non-Operating Revenue/(Expenses)	1,022,971	71,381	951,590	1333.12%	56,224
Total Non Operating Revenue/(Expense)	935,357	(4,467)	939,824	-21040.87%	(43,093)
Total Net Surplus/(Loss)	\$1,004,226	(\$48,179)	\$1,052,405	-2184.36%	(\$245,574)
Change in Unrealized Gains/(Losses) on Investments	0	0	0	0.00%	0
Increase/(Decrease in Unrestricted Net Assets	\$1,004,226	(\$48,179)	\$1,052,405	-2184.36%	(\$245,574)
Operating Margin	0.88%	-0.58%			-2.99%
Total Profit Margin	12.81%	-0.63%			-3.15%
EBIDA	7.99%	7.00%			4.23%

Statement of Revenue and Expense

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

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ROCK SPRINGS, WY

Four months ended October 31, 2020

	YEAR-TO-DATE				Prior Year 10/31/19
	Actual 10/31/20	Budget 10/31/20	Positive (Negative) Variance	Percentage Variance	
Gross Patient Revenue					
Inpatient Revenue	\$12,325,917	\$10,784,657	\$1,541,261	14.29%	\$11,524,866
Outpatient Revenue	43,913,871	39,509,425	4,404,446	11.15%	42,169,384
Clinic Revenue	5,398,708	4,243,165	1,155,543	27.23%	4,986,636
Specialty Clinic Revenue	1,165,970	1,151,503	14,466	1.26%	879,448
Total Gross Patient Revenue	62,804,466	55,688,750	7,115,716	12.78%	59,560,334
Deductions From Revenue					
Discounts and Allowances	(28,633,881)	(24,402,312)	(4,231,568)	-17.34%	(26,379,244)
Bad Debt Expense (Governmental Providers Only)	(3,782,573)	(4,191,437)	408,864	9.75%	(3,986,758)
Medical Assistance	(637,815)	(634,068)	(3,755)	-0.59%	(654,573)
Total Deductions From Revenue	(33,054,269)	(29,227,810)	(3,826,459)	-13.09%	(31,020,575)
Net Patient Revenue	29,750,198	26,460,940	3,289,257	12.43%	28,539,759
Other Operating Revenue	817,877	2,745,320	(1,927,443)	-70.21%	886,433
Total Operating Revenue	30,568,075	29,206,260	1,361,814	4.66%	29,426,192
Operating Expenses					
Salaries and Wages	13,595,481	12,915,945	(679,536)	-5.26%	12,758,797
Fringe Benefits	3,522,289	4,115,827	593,538	14.42%	3,559,460
Contract Labor	196,282	104,743	(91,540)	-87.39%	465,143
Physicians Fees	1,008,464	1,004,357	(4,107)	-0.41%	1,486,792
Purchased Services	1,664,407	1,727,037	62,631	3.63%	1,630,576
Supply Expense	5,072,760	4,810,754	(262,006)	-5.45%	4,834,862
Utilities	357,311	402,470	45,159	11.22%	391,065
Repairs and Maintenance	1,859,741	1,845,725	(14,016)	-0.76%	1,703,136
Insurance Expense	144,070	173,866	29,795	17.14%	219,670
All Other Operating Expenses	611,146	782,991	171,845	21.95%	733,282
Bad Debt Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Leases and Rentals	235,301	248,991	13,690	5.50%	308,635
Depreciation and Amortization	2,224,796	2,297,496	72,699	3.16%	2,257,128
Interest Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Total Operating Expenses	30,492,048	30,430,201	(61,847)	-0.20%	30,348,348
Net Operating Surplus/(Loss)	76,026	(1,223,941)	1,299,967	-106.21%	(922,156)
Non-Operating Revenue:					
Contributions	0	0	0	0.00%	0
Investment Income	78,321	94,667	(16,346)	-17.27%	94,404
Tax Subsidies (Except for GO Bond Subsidies)	4,218	0	4,218	0.00%	3,103
Tax Subsidies for GO Bonds	0	0	0	0.00%	0
Interest Expense (Governmental Providers Only)	(437,602)	(406,101)	(31,500)	7.76%	(406,101)
Other Non-Operating Revenue/(Expense)	1,650,943	290,235	1,360,709	468.83%	301,092
Total Non Operating Revenue/(Expense)	1,295,880	(21,200)	1,317,080	-6212.64%	(7,502)
Total Net Surplus/(Loss)	\$1,371,907	(\$1,245,141)	\$2,617,047	-210.18%	(\$929,658)
Change in Unrealized Gains/(Losses) on Investments	0	0	0	0.00%	0
Increase/(Decrease) in Unrestricted Net Assets	\$1,371,907	(\$1,245,141)	\$2,617,047	-210.18%	(\$929,658)
Operating Margin	0.25%	-4.19%			-3.13%
Total Profit Margin	4.49%	-4.26%			-3.16%
EBIDA	7.54%	3.68%			4.55%

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

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	Actual 10/31/2020	Actual 9/30/2020	Actual 8/31/2020	Actual 7/31/2020	Actual 6/30/2020	Actual 5/31/2020
Gross Patient Revenue						
Inpatient Revenue	\$3,015,926	\$3,095,621	\$2,958,360	\$3,256,910	\$2,923,872	\$2,863,837
Inpatient Psych/Rehab Revenue						
Outpatient Revenue	\$10,836,342	\$10,137,542	\$11,339,455	\$11,600,532	\$9,853,590	\$8,485,713
Clinic Revenue	\$1,435,042	\$1,264,797	\$1,333,361	\$1,385,508	\$1,291,806	\$1,116,816
Specialty Clinic Revenue	\$234,817	\$351,223	\$185,452	\$414,478	\$281,911	\$314,858
Total Gross Patient Revenue	\$15,522,127	\$14,849,182	\$15,796,628	\$16,636,529	\$14,350,879	\$12,781,224
Deductions From Revenue						
Discounts and Allowances	\$6,210,334	\$7,325,918	\$7,239,901	\$7,857,728	\$5,980,828	\$5,186,139
Bad Debt Expense (Governmental Providers Only)	\$1,223,363	\$933,320	\$1,042,687	\$583,202	\$1,101,340	\$1,258,071
Charity Care	\$417,497	\$109,311	\$26,186	\$84,822	\$184,709	\$55,091
Total Deductions From Revenue	7,851,193	8,368,550	8,308,774	8,525,752	7,256,676	6,497,301
Net Patient Revenue	\$7,670,934	\$6,480,633	\$7,487,854	\$8,110,777	\$7,094,203	\$6,283,923
Other Operating Revenue	170,953	219,213	207,505	220,205	(1,616,588)	1,046,148
Total Operating Revenue	7,841,887	6,699,846	7,695,359	8,330,982	5,477,615	7,330,071
Operating Expenses						
Salaries and Wages	\$3,500,184	\$3,478,745	\$3,333,428	\$3,283,128	\$3,165,595	\$3,315,414
Fringe Benefits	\$914,860	\$843,750	\$869,467	\$894,212	\$854,214	\$888,042
Contract Labor	\$29,017	\$67,570	\$43,538	\$56,158	\$10,876	\$26,130
Physicians Fees	\$307,891	\$216,084	\$203,217	\$281,292	\$334,073	\$316,372
Purchased Services	\$388,321	\$434,094	\$395,658	\$448,335	\$503,898	\$385,944
Supply Expense	\$1,195,557	\$1,318,278	\$1,316,845	\$1,242,081	\$1,138,393	\$1,008,570
Utilities	\$79,491	\$82,626	\$81,449	\$103,746	\$88,251	\$102,274
Repairs and Maintenance	\$594,480	\$499,785	\$365,930	\$399,585	\$426,595	\$462,934
Insurance Expense	\$44,678	\$41,335	\$41,794	\$16,263	\$44,827	\$43,428
All Other Operating Expenses	\$113,212	\$211,975	\$145,095	\$140,863	\$211,587	\$91,828
Bad Debt Expense (Non-Governmental Providers)						
Leases and Rentals	\$49,816	\$80,042	\$82,114	\$83,328	\$49,303	\$49,189
Depreciation and Amortization	\$557,511	\$557,542	\$553,903	\$555,840	\$568,459	\$546,931
Interest Expense (Non-Governmental Providers)						
Total Operating Expenses	\$7,773,019	\$7,821,786	\$7,412,435	\$7,484,808	\$7,396,671	\$7,237,056
Net Operating Surplus/(Loss)	\$68,868	(\$1,121,940)	\$282,924	\$846,174	(\$1,917,055)	\$93,015
Non-Operating Revenue:						
Contributions						
Investment Income	20,019	20,406	21,540	16,355	35,221	175,009
Tax Subsidies (Except for GO Bond Subsidies)						
Tax Subsidies for GO Bonds	176	3,102	374	564	(1,068)	651
Interest Expense (Governmental Providers Only)	(107,810)	(114,157)	(107,816)	(107,818)	(221,170)	(100,643)
Other Non-Operating Revenue/(Expenses)	942,621	301,608	291,819	35,806	2,594,222	10,804
Total Non Operating Revenue/(Expense)	\$855,007	\$210,359	\$205,917	(\$54,993)	\$2,407,206	\$96,921
Total Net Surplus/(Loss)	\$923,876	(\$911,581)	\$488,842	\$791,181	\$489,251	\$179,936
Change in Unrealized Gains/(Losses) on Investments						
Increase/Decrease in Unrestricted Net Assets	\$923,876	(\$911,581)	\$488,842	\$791,181	\$489,251	\$179,936
Operating Margin	0.88%	-16.75%	3.68%	10.16%	-35.01%	1.27%
Total Profit Margin	11.75%	-13.61%	6.36%	9.50%	8.93%	2.44%
EBIDA	7.99%	-8.42%	10.87%	16.83%	-24.64%	8.73%

Actual 4/30/2020	Actual 3/31/2020	Actual 2/29/2020	Actual 1/31/2020	Actual 12/31/2019	Actual 11/30/2019	Actual 10/31/2019
\$2,794,519	\$2,777,538	\$2,722,862	\$3,543,613	\$2,709,104	\$2,982,847	\$3,144,192
\$8,104,600	\$10,396,977	\$10,746,705	\$10,775,879	\$10,812,648	\$9,944,805	\$10,345,137
\$1,146,806	\$984,201	\$1,161,210	\$1,485,917	\$1,143,776	\$1,063,719	\$1,354,373
\$288,932	\$244,806	\$262,865	\$247,493	\$269,431	\$308,619	\$313,861
\$12,334,856	\$14,343,621	\$14,893,661	\$16,052,901	\$14,934,858	\$14,300,980	\$15,157,564
\$5,565,060	\$6,081,666	\$6,619,813	\$7,065,871	\$5,867,946	\$5,637,701	\$6,692,232
\$1,158,759	\$813,846	\$837,619	\$746,898	\$857,280	\$724,765	\$797,098
\$87,459	\$284,093	\$182,758	(\$48,567)	\$453,288	\$492,120	\$186,867
6,811,278	7,159,805	7,639,991	7,764,182	7,178,528	6,854,586	7,655,997
\$5,523,578	\$7,183,916	\$7,253,671	\$8,288,719	\$7,756,331	\$7,446,403	\$7,501,567
2,076,262	231,937	125,399	274,722	321,846	168,314	286,120
7,599,840	7,414,953	7,375,689	8,563,441	8,078,178	7,614,717	7,787,687
\$3,149,585	\$3,411,912	\$3,348,166	\$3,210,137	\$3,353,001	\$3,302,746	\$3,394,397
\$920,695	\$933,298	\$895,130	\$1,012,357	\$935,213	\$982,139	\$1,014,021
\$46,076	\$49,063	\$41,291	\$75,137	\$52,546	\$115,454	\$65,915
\$338,295	\$368,453	\$411,317	\$297,440	\$377,567	\$277,906	\$442,922
\$381,426	\$485,887	\$322,623	\$450,582	\$389,987	\$420,497	\$406,071
\$1,158,916	\$1,321,818	\$1,178,617	\$1,171,456	\$1,299,752	\$982,804	\$1,280,326
\$89,337	\$84,093	\$87,382	\$91,522	\$98,722	\$105,485	\$96,172
\$444,786	\$446,244	\$420,893	\$504,386	\$427,780	\$434,367	\$428,532
\$47,455	\$54,964	\$59,739	\$56,143	\$52,652	\$52,662	\$53,986
\$149,169	\$208,358	\$141,853	\$77,399	\$231,240	\$176,692	\$210,413
\$64,204	\$66,906	\$67,609	\$76,381	\$72,943	\$83,881	\$83,761
\$549,655	\$552,321	\$554,019	\$559,141	\$569,157	\$584,202	\$563,653
\$7,319,780	\$7,981,317	\$7,520,339	\$7,582,059	\$7,860,680	\$7,508,767	\$8,020,168
\$280,080	(\$566,364)	(\$146,770)	\$961,392	\$227,618	\$185,060	(\$232,481)
18,515	21,494	21,076	19,081	17,623	39,086	32,300
968	(416)	373	249	1,148	9,170	(2,103)
(99,489)	(105,292)	(100,209)	(100,275)	(108,725)	(99,688)	(99,514)
1,422	91,220	198,344	28,888	156,527	90,253	56,224
(178,584)	\$7,093	\$79,583	(\$54,067)	\$66,676	(\$1,377)	(\$13,093)
\$201,476	(\$569,361)	(\$67,187)	\$927,325	\$294,193	\$104,693	(\$245,674)
\$201,476	(\$569,361)	(\$67,187)	\$927,325	\$294,193	\$104,693	(\$245,674)
3.69%	-7.64%	-1.99%	11.46%	2.82%	1.39%	-2.99%
2.65%	-7.64%	-0.91%	10.83%	3.64%	1.37%	-3.15%
10.92%	-0.19%	5.62%	17.99%	9.74%	8.80%	4.26%

Statement of Cash Flows

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

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ROCK SPRINGS, WY

Four months ended October 31, 2020

	CASH FLOW	
	Current Month 10/31/2020	Current Year-To-Date 10/31/2020
CASH FLOWS FROM OPERATING ACTIVITIES:		
Net Income (Loss)	\$1,004,226	\$1,371,907
Adjustments to Reconcile Net Income to Net Cash Provided by Operating Activities:		
Depreciation	557,511	2,224,796
(Increase)/Decrease in Net Patient Accounts Receivable	(232,033)	(293,039)
(Increase)/Decrease in Other Receivables	(1,357,243)	(1,667,620)
(Increase)/Decrease in Inventories	(27,869)	(115,010)
(Increase)/Decrease in Pre-Paid Expenses	36,598	130,150
(Increase)/Decrease in Other Current Assets	0	0
Increase/(Decrease) in Accounts Payable	328,011	1,015,598
Increase/(Decrease) in Notes and Loans Payable	0	0
Increase/(Decrease) in Accrued Payroll and Benefits	(1,137,912)	(292,372)
Increase/(Decrease) in Accrued Expenses	0	0
Increase/(Decrease) in Patient Refunds Payable	0	0
Increase/(Decrease) in Third Party Advances/Liabilities	0	0
Increase/(Decrease) in Other Current Liabilities	111,614	(223,272)
Net Cash Provided by Operating Activities:	(717,097)	2,151,138
CASH FLOWS FROM INVESTING ACTIVITIES:		
Purchase of Property, Plant and Equipment	(1,836,911)	(3,786,426)
(Increase)/Decrease in Limited Use Cash and Investments	(120,344)	194,108
(Increase)/Decrease in Other Limited Use Assets	11,941	(13,888)
(Increase)/Decrease in Other Assets	1,029	4,118
Net Cash Used by Investing Activities	(1,944,284)	(3,602,089)
CASH FLOWS FROM FINANCING ACTIVITIES:		
Increase/(Decrease) in Bond/Mortgage Debt	(4,812)	(19,248)
Increase/(Decrease) in Capital Lease Debt	0	0
Increase/(Decrease) in Other Long Term Liabilities	(27,447)	(383,334)
Net Cash Used for Financing Activities	(32,259)	(402,582)
(INCREASE)/DECREASE IN RESTRICTED ASSETS	0	0
Net Increase/(Decrease) in Cash	(2,693,640)	(1,853,532)
Cash, Beginning of Period	12,892,825	12,052,717
Cash, End of Period	\$10,199,185	\$10,199,185

ROCK SPRINGS, WY

Four months ended October 31, 2020

Current Month				Year-To-Date				
Actual 10/31/20	Budget 10/31/20	Positive/ (Negative) Variance	Prior Year 10/31/19	STATISTICS	Actual 10/31/20	Budget 10/31/20	Positive/ (Negative) Variance	Prior Year 10/31/19
Discharges								
111	127	(16)	141	Acute	460	446	15	495
111	127	(16)	141	Total Adult Discharges	460	446	15	495
31	32	(1)	36	Newborn	143	138	5	153
142	159	(17)	177	Total Discharges	603	583	20	648
Patient Days:								
332	335	(3)	372	Acute	1,291	1,231	60	1,368
332	335	(3)	372	Total Adult Patient Days	1,291	1,231	60	1,368
40	49	(9)	54	Newborn	200	235	(35)	261
372	383	(11)	426	Total Patient Days	1,491	1,466	25	1,629
Average Length of Stay (ALOS)								
3.0	2.6	0.4	2.6	Acute	2.8	2.8	0.0	2.8
3.0	2.6	0.4	2.6	Total Adult ALOS	2.8	2.8	0.0	2.8
1.3	1.5	(0.2)	1.5	Newborn ALOS	1.4	1.7	(0.3)	1.7
Average Daily Census (ADC)								
10.7	10.8	(0.1)	12.0	Acute	10.5	10.0	0.5	11.1
10.7	10.8	(0.1)	12.0	Total Adult ADC	10.5	10.0	0.5	11.1
1.3	1.6	(0.3)	1.7	Newborn	1.6	1.9	(0.3)	2.1
Emergency Room Statistics								
108	133	(25)	148	ER Visits - Admitted	449	504	(55)	560
1,003	1,033	(30)	1,148	ER Visits - Discharged	4,156	4,450	(294)	4,944
1,111	1,166	(55)	1,296	Total ER Visits	4,605	4,954	(349)	5,504
9.72%	11.42%		11.42%	% of ER Visits Admitted	9.75%	10.17%		10.17%
97.30%	104.96%		104.96%	ER Admissions as a % of Total	97.61%	113.13%		113.13%
Outpatient Statistics:								
9,672	7,420	2,252	8,244	Total Outpatients Visits	35,320	28,252	7,068	31,391
81	140	(59)	156	Observation Bed Days	367	451	(84)	501
4,418	5,506	(1,088)	4,621	Clinic Visits - Primary Care	16,166	20,301	(4,135)	16,679
540	572	(32)	574	Clinic Visits - Specialty Clinics	2,269	2,362	(93)	1,926
16	21	(5)	23	IP Surgeries	93	91	2	101
131	119	12	132	OP Surgeries	541	488	53	542
Productivity Statistics:								
438.37	437.01	1.36	441.81	FTE's - Worked	428.04	437.01	(8.97)	424.60
477.70	479.80	(2.10)	482.20	FTE's - Paid	471.72	479.80	(8.08)	470.02
1.5153	1.1598	0.36	1.2887	Case Mix Index - Medicare	1.4732	4.8262	(3.35)	1.3406
1.1783	1.1598	0.02	1.0954	Case Mix Index - All payers	1.1557	4.8262	(3.67)	0.8069

Accounts Receivable Tracking Report

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
ROCK SPRINGS, WY
10/31/20

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	<u>Current Month Actual</u>	<u>Current Month Target</u>
Gross Days in Accounts Receivable - All Services	46.76	52.11
Net Days in Accounts Receivable	43.32	47.65
Number of Gross Days in Unbilled Revenue	2.71	3.0 or <
Number of Days Gross Revenue in Credit Balances	0.00	< 1.0
Self Pay as a Percentage of Total Receivables	35.30%	N/A
Charity Care as a % of Gross Patient Revenue - Current Month	2.69%	1.15%
Charity Care as a % of Gross Patient Revenue - Year-To-Date	1.02%	1.14%
Bad Debts as a % of Gross Patient Revenue - Current Month	7.88%	6.01%
Bad Debts as a % of Gross Patient Revenue - Year-To-Date	6.02%	7.53%
Collections as a Percentage of Net Revenue - Current Month	95.93%	100% or >
Collections as a Percentage of Net Revenue - Year-To-Date	97.97%	100% or >
Percentage of Blue Cross Receivable > 90 Days	4.36%	< 10%
Percentage of Insurance Receivable > 90 Days	8.95%	< 15%
Percentage of Medicaid Receivable > 90 Days	21.02%	< 20%
Percentage of Medicare Receivable > 60 Days	5.88%	< 6%

Variance Analysis**MEMORIAL HOSPITAL OF SWEETWATER COUNTY
ROCK SPRINGS, WYOMING
Four months ended October 31, 2020****PAGE 13**

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

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

	Current Month		Year-to-Date	
	Amount	%	Amount	%
Gross Patient Revenue	1,416,016	10.04%	7,115,716	12.78%

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

Average Daily Census is 10.7 in October which is under budget by 0.1

Deductions from Revenue	(642,901)	-8.92%	(3,826,459)	-13.09%
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Deductions from revenue are over budget for October and over budget year to date.

They are currently booked at 50.6% for October and 52.6% year to date. This number is monitored closely each month and fluctuates based on historical write-offs and current collection percentages.

Bad Debt Expense	(375,095)	-44.22%	408,864	9.75%
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Bad debt expense is booked at 7.9% for October and 6.0% year to date.

Charity Care	(255,957)	-158.45%	(3,755)	-0.59%
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Charity care yields a high degree of variability month over month and is dependent on patient needs. Patient Financial Services evaluates accounts consistently to determine when charity adjustments are appropriate in accordance with our Charity Care Policy.

Other Operating Revenue	(533,397)	-75.73%	(1,927,443)	-70.21%
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Other Operating Revenue is under budget for the month and is under budget year to date. This is due to the CARES funds budgeted here, but now has to be reported in non-operating.

Salaries and Wages	(244,725)	-7.52%	(679,536)	-5.26%
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Salary and Wages are over budget and remain over budget year to date.

Paid FTEs are under budget by 2.1 FTEs for the month and under 8.08 FTEs year to date.

Fringe Benefits	111,771	10.89%	593,538	14.42%
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Fringe benefits are under budget in October and remain under budget year to date.

Contract Labor	(7,832)	-36.97%	(91,540)	-87.39%
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Contract labor is over budget for October and over budget year to date.

Behavioral Health, OR and Ultrasound and Echo are over budget for the month.

Variance Analysis

MEMORIAL HOSPITAL OF SWEETWATER COUNTY ROCK SPRINGS, WYOMING Four months ended October 31, 2020

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

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

	Current Month		Year-to-Date	
	Amount	%	Amount	%
Physician Fees	(63,927)	-26.20%	(4,107)	-0.41%
Physician fees are under budget in October and under budget year to date. Locums clinic and Hospitalists are over budget in October.				
Purchased Services	7,177	1.82%	62,631	3.63%
Purchased services are under budget for October and under budget year to date. Expenses over budget are dept management service				
Supply Expense	23,634	1.94%	(262,006)	-5.45%
Supplies are over budget for October and over budget year to date. Line items over budget include radioactive materials, Other med surg supplies, Minor Equipment, Outdated Supplies and Other non-med supplies				
Repairs & Maintenance	(127,630)	-27.34%	(14,016)	-0.76%
Repairs and Maintenance are over budget for October and over budget year to date.				
All Other Operating Expenses	123,356	52.14%	171,845	21.95%
This expense is over budget in October and under budget year to date. Other expenses over budget are Freigh, physician recruitment, employee recruitment, pharmacy floor direct, software and other expenses				
Leases and Rentals	12,218	19.70%	13,690	5.50%
This expense is under budget for October and is under budget year to date.				
Depreciation and Amortization	17,982	3.12%	72,699	3.16%
Depreciation is under budget for October and is under budget year to date.				
BALANCE SHEET				
Cash and Cash Equivalents	(2,693,640)	-20.89%		
Cash decreased in October. Cash collections for October were \$7.3 million. Days Cash on Hand decreased to 210 days.				
Gross Patient Accounts Receivable	(110,970)	-0.47%		
This receivable decreased in October.				

Variance Analysis**MEMORIAL HOSPITAL OF SWEETWATER COUNTY
ROCK SPRINGS, WYOMING
Four months ended October 31, 2020****PAGE 15**

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

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

	Current Month		Year-to-Date	
	Amount	%	Amount	%
Bad Debt and Allowance Reserves	343,003	2.52%		
Bad Debt and Allowances decreased.				
Other Receivables	1,357,243	49.77%		
Other Receivables increased in October due to county and occ med invoices				
Prepaid Expenses	(36,598)	-1.79%		
Prepaid expenses decreased due to the normal activity in this account.				
Limited Use Assets	108,403	0.26%		
These assets increased due to the debt service payment				
Plant Property and Equipment	1,279,400	2.03%		
The increase in these assets is due to the decrease in Capital equipment and the normal increase in accumulated depreciation.				
Accounts Payable	(328,011)	-7.35%		
This liability increased due to the normal activity in this account.				
Accrued Payroll	1,184,782	53.08%		
This liability decreased in October. The payroll accrual for October was 6 days.				
Accrued Benefits	(46,871)	-1.89%		
This liability increased in October with the normal accrual and usage of PTO .				
Other Current Liabilities	(111,614)	-99.31%		
This liability increased due to the payment on the bonds				
Other Long Term Liabilities	27,447	0.21%		
This liability decreased due to the payments on leases				
Total Net Assets	(1,004,226)	-1.17%		
The net gain from operations for October is \$68,869				



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

PHYSICIAN CLINICS

Unaudited Financial Statements

for

Four months ended October 31, 2020

Certification Statement:

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

Certified by:

Tami Love

Chief Financial Officer

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MEMORIAL HOSPITAL OF SWEETWATER COUNTY
ROCK SPRINGS, WY

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Four months ended October 31, 2020

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Key Financial Ratios

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

PAGE 2

ROCK SPRINGS, WY

Four months ended October 31, 2020

- DESIRED POSITION IN RELATION TO BENCHMARKS AND BUDGET

	Month to Date 10/31/2020	Year to Date 10/31/2020	Prior Fiscal Year End 06/30/20	MGMA Hospital Owned Rural
Profitability:				
Operating Margin	-61.72%	-50.96%	-68.15%	-36.58%
Total Profit Margin	-61.72%	-50.96%	-68.15%	-36.58%
Contractual Allowance %	45.86%	45.85%	46.02%	
Liquidity:				
Net Days in Accounts Receivable	36.60	39.00	50.83	39.58
Gross Days in Accounts Receivable	43.81	46.38	54.32	72.82
Productivity and Efficiency:				
Patient Visits Per Day	142.52	131.43	132.42	
Total Net Revenue per FTE	N/A	\$150,501	\$141,843	
Salary Expense per Paid FTE	N/A	\$162,682	\$162,294	
Salary and Benefits as a % of Net Revenue	127.80%	124.29%	134.65%	91.26%
Employee Benefits %	15.10%	14.99%	17.69%	6.10%

Statement of Revenue and Expense

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

ROCK SPRINGS, WY

Four months ended October 31, 2020

PAGE 3

	CURRENT MONTH				Prior Year 10/31/19
	Actual 10/31/20	Budget 10/31/20	Positive (Negative) Variance	Percentage Variance	
Gross Patient Revenue					
Clinic Revenue	1,435,042	1,210,212	224,830	18.58%	1,354,373
Specialty Clinic Revenue	234,817	282,475	(47,658)	-16.87%	313,861
Total Gross Patient Revenue	1,669,859	1,492,687	177,172	11.87%	1,668,235
Deductions From Revenue					
Discounts and Allowances	(765,733)	(700,617)	(65,116)	-9.29%	(768,291)
Total Deductions From Revenue	(765,733)	(700,617)	(65,116)	-9.29%	(768,291)
Net Patient Revenue	904,126	792,070	112,056	14.15%	899,944
Other Operating Revenue	74,395	67,787	6,608	9.75%	79,575
Total Operating Revenue	978,521	859,858	118,664	13.80%	979,519
Operating Expenses					
Salaries and Wages	1,086,459	994,365	(92,093)	-9.26%	963,743
Fringe Benefits	164,048	217,896	53,848	24.71%	179,354
Contract Labor	0	0	0	0.00%	0
Physicians Fees	145,489	86,067	(59,422)	-69.04%	177,148
Purchased Services	14,882	10,328	(4,555)	-44.10%	10,397
Supply Expense	13,359	21,755	8,396	38.60%	22,796
Utilities	972	1,747	775	44.38%	910
Repairs and Maintenance	18,512	23,235	4,723	20.33%	22,517
Insurance Expense	13,294	19,280	5,986	31.05%	20,493
All Other Operating Expenses	103,990	123,210	19,220	15.60%	101,086
Bad Debt Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Leases and Rentals	3,239	3,109	(131)	-4.21%	4,079
Depreciation and Amortization	18,214	17,754	(460)	-2.59%	21,983
Interest Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Total Operating Expenses	1,582,457	1,518,745	(63,712)	-4.20%	1,524,507
Net Operating Surplus/(Loss)	(603,935)	(658,887)	54,952	-8.34%	(544,988)
Total Net Surplus/(Loss)	(\$603,935)	(\$658,887)	\$54,952	-8.34%	(\$544,988)
Change in Unrealized Gains/(Losses) on Investments	0	0	0	0.00%	0
Increase/(Decrease in Unrestricted Net Assets	(\$603,935)	(\$658,887)	\$54,952	-8.34%	(\$544,988)
Operating Margin	-61.72%	-76.63%			-55.64%
Total Profit Margin	-61.72%	-76.63%			-55.64%
EBIDA	-59.86%	-74.56%			-53.39%

Statement of Revenue and Expense

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

ROCK SPRINGS, WY

Four months ended October 31, 2020

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	YEAR-TO-DATE				Prior Year 10/31/19
	Actual 10/31/20	Budget 10/31/20	Positive (Negative) Variance	Percentage Variance	
Gross Patient Revenue					
Clinic Revenue	5,398,708	4,243,165	1,155,543	27.23%	4,986,636
Specialty Clinic Revenue	1,165,970	1,151,503	14,466	1.26%	879,448
Total Gross Patient Revenue	6,564,678	5,394,668	1,170,010	21.69%	5,866,084
Deductions From Revenue					
Discounts and Allowances	(3,009,649)	(2,486,595)	(523,055)	-21.03%	(2,672,083)
Total Deductions From Revenue	(3,009,649)	(2,486,595)	(523,055)	-21.03%	(2,672,083)
Net Patient Revenue	3,555,029	2,908,073	646,955	22.25%	3,194,001
Other Operating Revenue	297,422	271,150	26,273	9.69%	289,144
Total Operating Revenue	3,852,451	3,179,223	673,228	21.18%	3,483,145
Operating Expenses					
Salaries and Wages	4,164,253	3,921,014	(243,239)	-6.20%	3,811,145
Fringe Benefits	624,046	879,842	255,796	29.07%	617,745
Contract Labor	0	0	0	0.00%	0
Physicians Fees	365,856	344,267	(21,589)	-6.27%	312,971
Purchased Services	49,410	41,311	(8,099)	-19.61%	38,344
Supply Expense	56,736	75,021	18,285	24.37%	92,544
Utilities	3,886	6,989	3,102	44.39%	3,934
Repairs and Maintenance	83,587	92,939	9,352	10.06%	86,120
Insurance Expense	50,334	75,844	25,511	33.64%	78,335
All Other Operating Expenses	331,848	331,742	(105)	-0.03%	336,003
Bad Debt Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Leases and Rentals	12,210	12,300	90	0.73%	17,225
Depreciation and Amortization	73,606	71,893	(1,713)	-2.38%	87,968
Interest Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Total Operating Expenses	5,815,772	5,853,161	37,390	0.64%	5,482,334
Net Operating Surplus/(Loss)	(1,963,321)	(2,673,938)	710,618	-26.58%	(1,999,188)
Total Net Surplus/(Loss)	(1,963,321)	(2,673,938)	\$710,618	-26.58%	(1,999,188)
Change in Unrealized Gains/(Losses) on Investments	0	0	0	0.00%	0
Increase/(Decrease) in Unrestricted Net Assets	(1,963,321)	(2,673,938)	\$710,618	-26.58%	(1,999,188)
Operating Margin	-50.96%	-84.11%			-57.40%
Total Profit Margin	-50.96%	-84.11%			-57.40%
EBIDA	-49.05%	-81.85%			-54.87%

Statement of Revenue and Expense - 13 Month Trend

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

ROCK SPRINGS, WY

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	Actual 10/31/2020	Actual 9/30/2020	Actual 8/31/2020	Actual 7/31/2020	Actual 6/30/2020
Gross Patient Revenue					
Clinic Revenue	\$1,435,042	\$1,264,797	\$1,333,361	\$1,365,508	\$1,291,506
Specialty Clinic Revenue	\$234,817	\$351,223	\$165,452	\$414,478	\$281,911
Total Gross Patient Revenue	\$1,669,859	\$1,616,020	\$1,498,813	\$1,779,986	\$1,573,417
Deductions From Revenue					
Discounts and Allowances	\$765,733	\$741,674	\$703,186	\$799,056	\$736,720
Total Deductions From Revenue	765,733	741,674	703,186	799,056	736,720
Net Patient Revenue	\$904,126	\$874,346	\$795,627	\$980,930	\$836,697
Other Operating Revenue	\$74,395	\$75,030	\$75,344	\$72,653	\$77,628
Total Operating Revenue	978,521	949,376	870,971	1,053,583	914,325
Operating Expenses					
Salaries and Wages	\$1,086,459	\$1,086,987	\$984,249	\$1,006,558	\$983,977
Fringe Benefits	\$164,048	\$149,004	\$144,807	\$166,187	\$170,996
Contract Labor	\$0	\$0	\$0	\$0	\$0
Physicians Fees	\$145,489	\$79,510	\$64,083	\$76,774	\$125,801
Purchased Services	\$14,882	\$15,580	\$8,196	\$10,752	\$9,098
Supply Expense	\$13,359	\$15,225	\$9,216	\$18,937	\$10,722
Utilities	\$972	\$647	\$979	\$1,288	\$1,861
Repairs and Maintenance	\$18,512	\$18,458	\$25,877	\$20,741	\$24,187
Insurance Expense	\$13,294	\$13,294	\$11,873	\$11,873	\$11,873
All Other Operating Expenses	\$103,990	\$88,010	\$82,041	\$77,807	\$45,948
Bad Debt Expense (Non-Governmental Providers)					
Leases and Rentals	\$3,239	\$2,177	\$3,652	\$3,141	\$3,083
Depreciation and Amortization	\$18,214	\$18,290	\$18,615	\$18,488	\$18,487
Interest Expense (Non-Governmental Providers)					
Total Operating Expenses	\$1,582,457	\$1,487,181	\$1,333,588	\$1,412,545	\$1,406,033
Net Operating Surplus/(Loss)	(\$603,935)	(\$537,805)	(\$462,618)	(\$358,963)	(\$491,708)
Total Net Surplus/(Loss)	(\$603,935)	(\$537,805)	(\$462,618)	(\$358,963)	(\$491,708)
Change in Unrealized Gains/(Losses) on Investr	0	0	0	0	0
Increase/(Decrease in Unrestricted Net Assets	(\$603,935)	(\$537,805)	(\$462,618)	(\$358,963)	(\$491,708)
Operating Margin	-61.72%	-56.65%	-53.12%	-34.07%	-53.78%
Total Profit Margin	-61.72%	-56.65%	-53.12%	-34.07%	-53.78%
EBIDA	-59.86%	-54.72%	-50.98%	-32.32%	-51.76%

Actual 5/31/2020	Actual 4/30/2020	Actual 3/30/2020	Actual 2/29/2020	Actual 1/31/2020	Actual 12/31/2019	Actual 11/30/2019	Actual 10/31/2019
\$1,116,816	\$1,146,806	\$984,201	\$1,161,210	\$1,485,917	\$1,143,777	\$1,063,719	\$1,354,373
\$314,858	\$288,932	\$244,806	\$262,865	\$247,493	\$269,430	\$309,619	\$313,861
\$1,431,674	\$1,435,737	\$1,229,007	\$1,424,074	\$1,733,410	\$1,413,207	\$1,373,338	\$1,668,235
\$637,461	\$713,510	\$556,603	\$675,312	\$757,358	\$637,085	\$657,305	\$768,291
637,461	713,510	556,603	675,312	757,358	637,085	657,305	768,291
\$794,213	\$722,227	\$672,404	\$748,762	\$976,052	\$776,122	\$716,033	\$899,944
\$66,375	\$32,189	\$43,725	\$64,550	\$68,061	\$84,399	\$58,298	\$79,575
860,588	754,416	716,129	813,312	1,044,113	840,521	774,331	979,519
\$979,724	\$886,494	\$1,031,014	\$1,032,181	\$938,454	\$1,032,409	\$976,184	\$963,743
\$162,005	\$171,434	\$216,704	\$189,196	\$208,849	\$161,562	\$165,925	\$179,354
\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
\$119,793	\$141,169	\$160,415	\$206,558	\$118,254	\$147,283	\$72,657	\$177,148
\$10,144	\$8,138	\$13,433	\$11,304	\$12,082	\$8,426	\$10,650	\$10,397
\$10,730	\$7,125	\$25,468	\$14,825	\$19,220	\$12,817	\$20,632	\$22,798
\$1,804	\$1,803	\$1,818	\$1,891	\$1,704	\$1,713	\$877	\$910
\$26,489	\$23,772	\$23,881	\$22,274	\$20,942	\$25,840	\$17,344	\$22,517
\$17,874	\$17,874	\$17,874	\$17,874	\$17,812	\$17,812	\$17,368	\$20,493
\$53,551	\$47,258	\$96,350	\$69,801	\$75,204	\$85,983	\$88,337	\$101,086
\$2,405	\$2,476	\$4,976	\$4,642	\$6,363	\$4,857	\$4,699	\$4,079
\$18,488	\$21,166	\$21,436	\$21,436	\$21,486	\$21,754	\$21,755	\$21,983
\$1,403,007	\$1,328,709	\$1,613,368	\$1,581,982	\$1,440,322	\$1,500,455	\$1,396,328	\$1,524,507
(\$542,419)	(\$574,293)	(\$897,239)	(\$768,670)	(\$396,209)	(\$659,933)	(\$621,997)	(\$544,988)
0	0	0	0	0	0	0	0
(\$542,419)	(\$574,293)	(\$897,239)	(\$768,670)	(\$396,209)	(\$659,933)	(\$621,997)	(\$544,988)
-63.03%	-76.12%	-125.29%	-94.51%	-37.95%	-78.51%	-80.33%	-55.64%
-63.03%	-76.12%	-125.29%	-94.51%	-37.95%	-78.51%	-80.33%	-55.64%
-60.86%	-73.32%	-122.30%	-91.88%	-35.89%	-75.93%	-77.52%	-53.39%

Current Month				STATISTICS	Year-To-Date			
Actual	Budget	Positive/ (Negative) Variance	Prior Year 10/31/19		Actual	Budget	Positive/ (Negative) Variance	Prior Year 10/31/19
10/31/20	10/31/20				10/31/20	10/31/20		
Outpatient Statistics:								
4,418	5,506	(1,088)	4,621	Clinic Visits - Primary Care	16,166	20,301	(4,135)	16,679
540	572	(32)	574	Clinic Visits - Specialty Clinics	2,269	2,362	(93)	1,926
Productivity Statistics:								
74.48	70.76	3.72	69.94	FTE's - Worked	68.97	70.76	(1.79)	66.00
79.63	77.76	1.87	76.87	FTE's - Paid	75.96	77.76	(1.80)	73.83

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

PAYMENT SOURCE	NO. OF DISBURSEMENTS	AMOUNT
OPERATIONS (GENERAL FUND/KEYBANK)	988	8,493,649.22
CAPITAL EQUIPMENT (PLANT FUND)	9	726,251.25
CONSTRUCTION IN PROGRESS (BUILDING FUND)	5	587,193.98
PAYROLL OCTOBER 11, 2020	N/A	1,511,273.78
PAYROLL OCTOBER 25, 2020	N/A	1,498,671.18
TOTAL CASH OUTFLOW		<u>\$9,807,094.45</u>
CASH COLLECTIONS		7,358,634.18
INCREASE/DECREASE IN CASH		-\$2,448,460.27

**PLANT FUND CASH DISBURSEMENTS
FISCAL YEAR 2021**

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

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

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
002346	9/11/2020	MOPEC INC	8,400.00	WORKSTATIONS AND MONITORS (20)		
002347	9/11/2020	MAGNUM MOBILE SPECIALTY VEHICLE	10,900.00	BEDSIDE GLUCOSE MONITORS		
002348	9/17/2020	CONVERGEBONE, INC.	430.86	LONG CYSTOSCOPY RESECTION TRAY		
002348	9/25/2020	CONVERGEBONE, INC.	61,337.50	MOBILE LAB, CLINIC SWABBING STATION - 26 FOOT - SUB		
SEPTEMBER TOTALS					81,148.36	395,301.34

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
002358	10/12/2020	INNOVATION WIRELESS	896.30	SYNCHRONIZED CLOCKS		
002359	10/14/2020	CUMMINS ROCKY MOUNTAIN, LLC	20,260.68	GENERATOR INTERFACE TOUCH MONITOR		
002360	10/14/2020	STRYKER ENDOSCOPY	43,303.76	CO2 CONDITIONING INSUFFLATOR KIT (3)		
002361	10/22/2020	OLYMPUS AMERICA INC.-LIFESCIENCE	10,217.18	MICROSCOPE - WALK-IN		
002362	10/22/2020	VARIAN MEDICAL SYSTEMS, INC	30,867.00	STEREOTACTIC CONE SYSTEM		
002367	10/28/2020	CARDINAL HEALTH/V.MUELLER	78,000.00	CHEMISTRY ANALYZER - WALK-IN		
002368	10/28/2020	CARDINAL HEALTH/V.MUELLER	366,000.00	VITROS XT 7600 ANALYZER (2)		
002369	10/28/2020	SKYTRON	73,377.69	SKYTRON MODEL 2200 DISINFECTION ROBOT (2)		
002370	10/28/2020	SKYTRON	103,328.64	SKYTRON MODEL 3200 DISINFECTION ROBOT		
OCTOBER TOTALS					726,251.25	1,121,552.59

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

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

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

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
001070	9/2/2020	TRANE U.S. INC.	482,854.00	HVAC UPGRADE		
001072	9/11/2020	PLAN ONE/ARCHITECTS	560.00	HVAC UPGRADE		
W/T	9/14/2020	WELLS FARGO	111,613.90	WF DEBT SERVICE		
SEPTEMBER TOTALS					595,027.90	1,206,969.04

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
001073	10/2/2020	B H INC.	240,495.98	CENTRAL PLANT UPGRADE		
001074	10/2/2020	ST+B ENGINEERING (SPACEK TI	203,848.10	HVAC UPGRADE		
001075	10/7/2020	CITY OF ROCK SPRINGS	13,806.00	HVAC UPGRADE		
001076	10/12/2020	PLAN ONE/ARCHITECTS	17,430.00	MOB ENTRY RECONFIGURATION		
W/T	10/19/2020	WELLS FARGO	111,613.90	WF DEBT SERVICE		
OCTOBER TOTALS					587,193.98	1,794,163.02

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
GENERAL FUND DISBURSEMENTS
10/31/20

Amount	Description
42,253.64	Advertising Total
8,797.90	Billing Services Total
1,780.23	Blood Total
10,400.00	Building Lease Total
6,605.82	Cellular Telephone Total
45,086.81	Collection Agency Total
5,037.02	Computer Equipment Total
2,915.91	Consulting Fees Total
1,837,630.61	Contract Maintenance Total
80,330.04	Contract Personnel Total
294.66	Courier Services Total
24,675.33	Dialysis Supplies Total
17,425.00	Education & Travel Total
298.00	Education Material Total
1,212.50	Employee Recruitment Total
6,747.41	Employee Vision Plan Total
94,225.19	Equipment Lease Total
34,735.86	Food Total
6,472.85	Freight Total
551.11	Fuel Total
2,547.60	Garbage Collection Total
573,264.29	Group Health Total
12,250.00	Hospital Membership Total
299,282.73	Hospital Supplies Total
1,122.00	Instruments Total
12,887.03	Insurance Premium Total
35,175.86	Insurance Refund Total
10.00	Internet Services Total
67,305.18	Laboratory Services Total
191,966.29	Laboratory Supplies Total
3,200.00	Laundry Supplies Total
8,207.30	Legal Fees Total
230.00	License Renewal Total
355.00	Licenses & Taxes Total
2,558.08	Life Insurance Total
217.44	Linen Total
9,300.00	Litortripsy Services Total
64,925.50	Locum Tenens Total
47,557.67	Maintenance & Repair Total
23,421.38	Maintenance Supplies Total
894.00	Marketing & Promotional Supplies Total
598.00	Medical Surgical Supplies Total
225.00	Membership Total
3,675.85	MHSC Foundation Total
199.97	Minor Equipment Total
974.00	Monthly Pest Control Total
10,848.93	Non Medical Supplies Total

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
GENERAL FUND DISBURSEMENTS
10/31/20

9,220.67	Office Supplies Total
5,611.49	Other Employee Benefits Total
21,083.70	Other Medical Surgical Supplies Total
613.00	Other Non Medical Surgical Supplies Total
1,390.00	Other Purchased Services Total
2,071.91	Oxygen Rental Total
17,607.03	Patient Refund Total
311.22	Payroll Deduction Total
9,223.57	Payroll Garnishment Total
2,800,000.00	Payroll Transfer Total
420.10	Petty Cash Total
913,717.00	Pharmacy Management Total
3,594.19	Physician Recruitment Total
243,888.62	Physician Services Total
77,040.54	Physician Student Loan Total
158,670.00	Professional Liability Insurance Total
45,068.09	Professional Service Total
173.30	Radiation Monitoring Total
883.09	Radiology Film Total
25,300.15	Radiology Material Total
12,388.11	Reimbursement - CME Total
14,821.58	Reimbursement - Education & Travel Total
27.70	Reimbursement - Food Total
1,239.99	Reimbursement - Insurance Premiums Total
1,624.00	Reimbursement - Memberships Total
177.50	Reimbursement - Non Hospital Supplies Total
374.19	Reimbursement - Payroll Correction Total
28.97	Reimbursement - Physician Recruitment Total
550.65	Reimbursement - Uniforms Total
291,513.56	Retirement Total
970.05	Sales Tax Payment Total
300.00	Scholarship Total
4,027.55	Scrub Sale Deductions Total
7,600.00	Sponsorship Total
1,298.60	Surgery Equipment Total
60,931.78	Surgery Supplies Total
2,060.01	Survey Expenses Total
1,405.88	Transcription Services Total
3.04	Unclaimed Property Total
742.51	Uniforms Total
88,224.09	Utilities Total
1,011.97	Waste Disposal Total
5,188.00	Window Cleaning Total
60,576.83	Workman's Comp Total
8,493,649.22	Grand Total

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
GENERAL FUND DISBURSEMENTS
10/31/20

Check Number	Date	Vendor Check Name	Amount	Description
174150	10/1/2020	ROCKET MINER	400.00	Advertising
174145	10/1/2020	PILOT BUTTE BROADCASTING	650.00	Advertising
174153	10/1/2020	SCORPION HEALTHCARE LLC	11,124.02	Advertising
174275	10/12/2020	SWEETWATER NOW, LLC	800.00	Advertising
174370	10/14/2020	ROCKET MINER	1,970.00	Advertising
174385	10/14/2020	THE RADIO NETWORK	3,166.65	Advertising
174373	10/14/2020	ROYAL FLUSH ADVERTISING	571.25	Advertising
174458	10/22/2020	BIG THICKET BROADCASTING	3,189.00	Advertising
174500	10/22/2020	KEMMERER GAZETTE	1,055.00	Advertising
174532	10/22/2020	ROYAL FLUSH ADVERTISING	525.00	Advertising
174805	10/30/2020	ROCKET MINER	28.50	Advertising
174819	10/30/2020	SWEETWATER NOW, LLC	3,700.00	Advertising
174720	10/30/2020	ADBAY.COM INC.	5,270.00	Advertising
174808	10/30/2020	SCORPION HEALTHCARE LLC	5,424.22	Advertising
EFT000000006196	10/1/2020	LAMAR ADVERTISING	400.00	Advertising
EFT000000006231	10/14/2020	LAMAR ADVERTISING	1,200.00	Advertising
EFT000000006231	10/14/2020	LAMAR ADVERTISING	1,200.00	Advertising
EFT000000006248	10/22/2020	GREEN RIVER STAR	600.00	Advertising
EFT000000006252	10/22/2020	LAMAR ADVERTISING	700.00	Advertising
EFT000000006257	10/22/2020	ROCK SPRINGS SWEETWATER COUNTY AIRPORT	280.00	Advertising
174544	10/22/2020	TRUE COMMERCE, INC	106.65	Billing Services
174759	10/30/2020	EXPRESS MEDICAID BILLING SERV	8,691.25	Billing Services
174550	10/22/2020	VITALANT	1,780.23	Blood
174701	10/23/2020	CURRENT PROPERTIES, LLC	3,500.00	Building Lease
174707	10/23/2020	HILLTOP PROPERTIES, LLC	6,900.00	Building Lease
174285	10/12/2020	VERIZON WIRELESS, LLC	3,303.28	Cellular Telephone
174834	10/30/2020	VERIZON WIRELESS, LLC	3,302.54	Cellular Telephone
174176	10/1/2020	WAKEFIELD & ASSOCIATES, INC.	44,486.51	Collection Agency
174305	10/12/2020	COLLECTION PROFESSIONALS, INC	323.51	Collection Agency
174332	10/14/2020	COLLECTION PROFESSIONALS, INC	276.79	Collection Agency
174086	10/1/2020	CDW GOVERNMENT LLC	2,141.05	Computer Equipment
174739	10/30/2020	CDW GOVERNMENT LLC	1,495.97	Computer Equipment
174752	10/30/2020	DELL COMPUTER CORPORATION	1,400.00	Computer Equipment
174070	10/1/2020	APPLIED RISK SOLUTIONS, INC.	2,500.00	Consulting Fees
174839	10/30/2020	WOODARD & CURRAN INC.	415.91	Consulting Fees
174144	10/1/2020	PHILIPS HEALTHCARE	2,766.00	Contract Maintenance
174179	10/1/2020	SENCORP WHITE, INC	5,125.00	Contract Maintenance
174156	10/1/2020	SIEMENS MEDICAL SOLUTIONS USA	2,120.00	Contract Maintenance
174112	10/1/2020	ISI WATER CHEMISTRIES	2,315.00	Contract Maintenance
174170	10/1/2020	UNITED AUDIT SYSTEMS, INC.	2,405.00	Contract Maintenance
174271	10/12/2020	SUN NUCLEAR CORPORATION	5,190.00	Contract Maintenance
174211	10/12/2020	CONVERGEONE, INC.	73,655.69	Contract Maintenance
174327	10/14/2020	CITRIX SYSTEMS, INC.	1,700.00	Contract Maintenance
174352	10/14/2020	MCKESSON HEALTH SOLUTIONS	782.86	Contract Maintenance
174363	10/14/2020	NUANCE COMMUNICATIONS, INC	313.33	Contract Maintenance
174369	10/14/2020	PHILIPS HEALTHCARE	2,664.00	Contract Maintenance
174376	10/14/2020	SIEMENS MEDICAL SOLUTIONS USA	19,078.75	Contract Maintenance
174390	10/14/2020	VARIAN MEDICAL SYSTEMS, INC	144,267.83	Contract Maintenance

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
GENERAL FUND DISBURSEMENTS
10/31/20

174347	10/14/2020	CONTRACTS	401.00	Contract Maintenance
174362	10/14/2020	NOVA BIOMEDICAL CORP.	4,015.00	Contract Maintenance
174360	10/14/2020	NRC HEALTH	40,721.00	Contract Maintenance
174388	10/14/2020	UNITED AUDIT SYSTEMS, INC.	3,616.00	Contract Maintenance
174394	10/14/2020	WYODATA SECURITY INC.	1,375.00	Contract Maintenance
174447	10/22/2020	ABILITY NETWORK INC	38.48	Contract Maintenance
174468	10/22/2020	CHANGE HEALTHCARE SOLUTIONS, LLC	4,041.94	Contract Maintenance
174473	10/22/2020	CONVERGEONE, INC.	7,908.88	Contract Maintenance
174486	10/22/2020	FIRST FINANCIAL HOLDINGS, LLC	7,248.00	Contract Maintenance
174494	10/22/2020	HEALTHCARE SOLUTIONS OF NC	1,024.00	Contract Maintenance
174506	10/22/2020	MCKESSON HEALTH SOLUTIONS	493.24	Contract Maintenance
174519	10/22/2020	PHILIPS HEALTHCARE	4,297.00	Contract Maintenance
174526	10/22/2020	RESA SERVICE, LLC	7,500.00	Contract Maintenance
174534	10/22/2020	SIEMENS MEDICAL SOLUTIONS USA	8,902.75	Contract Maintenance
174535	10/22/2020	SOUTHWESTERN BIOMEDICAL ELECT.	2,250.00	Contract Maintenance
174554	10/22/2020	WYODATA SECURITY INC.	1,375.00	Contract Maintenance
174764	10/30/2020	GE HEALTHCARE	23,125.58	Contract Maintenance
174790	10/30/2020	MEDNET	80.00	Contract Maintenance
174799	10/30/2020	NUANCE COMMUNICATIONS, INC	313.33	Contract Maintenance
174801	10/30/2020	PHILIPS HEALTHCARE	304.87	Contract Maintenance
174803	10/30/2020	PROVIDER ADVANTAGE NW INC	1,140.00	Contract Maintenance
174804	10/30/2020	REMI CORPORATION	2,651.41	Contract Maintenance
174824	10/30/2020	TRACTMANAGER INC	1,004.85	Contract Maintenance
174823	10/30/2020	TOTAL IMAGING SOLUTIONS, LLC	835.00	Contract Maintenance
174829	10/30/2020	UNITED AUDIT SYSTEMS, INC.	17,856.00	Contract Maintenance
174836	10/30/2020	WAYSTAR HEALTH	4,462.50	Contract Maintenance
EFT000000006201	10/1/2020	STATE FIRE DC SPECIALTIES	1,725.00	Contract Maintenance
EFT000000006202	10/1/2020	T-SYSTEM, INC	633.34	Contract Maintenance
EFT000000006205	10/12/2020	ARRENDALE ASSOCIATES, INC	1,435.00	Contract Maintenance
EFT000000006218	10/12/2020	STATE FIRE DC SPECIALTIES	1,550.64	Contract Maintenance
EFT000000006236	10/14/2020	STATE FIRE DC SPECIALTIES	4,077.09	Contract Maintenance
EFT000000006236	10/14/2020	STATE FIRE DC SPECIALTIES	4,077.09	Contract Maintenance
EFT000000006272	10/30/2020	STATE FIRE DC SPECIALTIES	448.03	Contract Maintenance
EFT000000006275	10/30/2020	T-SYSTEM, INC	16,498.66	Contract Maintenance
W/T	10/19/2020	ORTHO PHREESIA FEE	9.30	Contract Maintenance
W/T	10/6/2020	OPTIMIS 10/6/20	200.00	Contract Maintenance
W/T	10/15/2020	ZENITH	247.75	Contract Maintenance
W/T	10/16/2020	CARE CLOUD 10/16/20	349.00	Contract Maintenance
W/T	10/20/2020	TRIZETTO FEE 10/20/20	5,319.30	Contract Maintenance
W/T	10/19/2020	CLINIC PHREESIA FEE	5,515.00	Contract Maintenance
W/T	10/8/2020	SIEMENS EDI	9,017.12	Contract Maintenance
W/T	10/6/2020	QRA PAYMENT	1,377,164.00	Contract Maintenance
174086	10/1/2020	ELWOOD STAFFING SERVICES, INC	2,082.53	Contract Personnel
174104	10/1/2020	FOCUSONE SOLUTIONS LLC	10,737.25	Contract Personnel
174114	10/1/2020	JIM LANE	3,124.00	Contract Personnel
174152	10/1/2020	SARAH ROTH	540.00	Contract Personnel
174218	10/12/2020	ELWOOD STAFFING SERVICES, INC	1,657.03	Contract Personnel
174226	10/12/2020	FOCUSONE SOLUTIONS LLC	22,530.01	Contract Personnel
174340	10/14/2020	FOCUSONE SOLUTIONS LLC	13,877.25	Contract Personnel

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
GENERAL FUND DISBURSEMENTS
10/31/20

174486	10/22/2020	FOCUSONE SOLUTIONS LLC	13,423.26	Contract Personnel
174533	10/22/2020	SARAH ROTH	630.00	Contract Personnel
174754	10/30/2020	ELWOOD STAFFING SERVICES, INC	2,099.83	Contract Personnel
174762	10/30/2020	FOCUSONE SOLUTIONS LLC	9,628.88	Contract Personnel
174274	10/12/2020	SUSAN K CROFUTT	294.66	Courier Services
174109	10/1/2020	HENRY SCHEIN INC	124.95	Dialysis Supplies
174106	10/1/2020	FRESENIUS USA MARKETING, INC.	5,191.26	Dialysis Supplies
174229	10/12/2020	HACH COMPANY	40.89	Dialysis Supplies
174231	10/12/2020	HENRY SCHEIN INC	158.70	Dialysis Supplies
174341	10/14/2020	FRESENIUS USA MARKETING, INC.	12,025.71	Dialysis Supplies
174489	10/22/2020	FRESENIUS USA MARKETING, INC.	6,629.38	Dialysis Supplies
174495	10/22/2020	HENRY SCHEIN INC	20.72	Dialysis Supplies
174767	10/30/2020	HENRY SCHEIN INC	231.54	Dialysis Supplies
174763	10/30/2020	FRESENIUS USA MARKETING, INC.	198.26	Dialysis Supplies
EFT00000006270	10/30/2020	HENRY SCHEIN INC	53.92	Dialysis Supplies
174242	10/12/2020	LARRY D. MACY	1,500.00	Education & Travel
174502	10/22/2020	LARRY D. MACY	1,050.00	Education & Travel
174842	10/30/2020	WYOMING MEDICAL SOCIETY	14,875.00	Education & Travel
EFT00000006210	10/12/2020	MY EDUCATIONAL RESOURCES	298.00	Education Material
174235	10/12/2020	INSIGHT INVESTIGATIONS, INC	582.50	Employee Recruitment
EFT008000006217	10/12/2020	SST TESTING +, INC.	630.00	Employee Recruitment
174175	10/1/2020	VISION SERVICE PLAN - WY	6,747.41	Employee Vision Plan
174085	10/1/2020	CAREFUSION SOLUTIONS, LLC	21,293.00	Equipment Lease
174154	10/1/2020	SHADOW MOUNTAIN WATER CO ,WY	75.00	Equipment Lease
174284	10/12/2020	US BANK EQUIPMENT FINANCE	1,263.67	Equipment Lease
174223	10/12/2020	FIRST FINANCIAL HOLDINGS, LLC	7,248.00	Equipment Lease
174342	10/14/2020	GE HEALTHCARE FINANCIAL SERVICES	10,692.03	Equipment Lease
174375	10/14/2020	SHADOW MOUNTAIN WATER CO ,WY	636.90	Equipment Lease
174377	10/14/2020	SIEMENS FINANCIAL SERVICES, INC	18,429.63	Equipment Lease
174475	10/22/2020	COPIER & SUPPLY COMPANY	9,504.15	Equipment Lease
174547	10/22/2020	US BANK EQUIPMENT FINANCE	2,386.04	Equipment Lease
174808	10/30/2020	SHADOW MOUNTAIN WATER CO ,WY	869.65	Equipment Lease
174811	10/30/2020	SIEMENS FINANCIAL SERVICES, INC	18,429.63	Equipment Lease
174831	10/30/2020	US BANK EQUIPMENT FINANCE	978.51	Equipment Lease
EFT00000006274	10/30/2020	TIMEPAYMENT CORP	2,418.90	Equipment Lease
174089	10/1/2020	F B MCFADDEN WHOLESALE	2,238.13	Food
174098	10/1/2020	FARMER BROS CO	211.47	Food
174163	10/1/2020	SYSCO INTERMOUNTAIN FOOD	520.65	Food
174178	10/1/2020	WESTERN WYOMING BEVERAGES INC	1,200.00	Food
174093	10/1/2020	DFA DAIRY BRANDS CORP., LLC	335.54	Food
174220	10/12/2020	F B MCFADDEN WHOLESALE	1,886.62	Food
174276	10/12/2020	SYSCO INTERMOUNTAIN FOOD	1,588.44	Food
174216	10/12/2020	DFA DAIRY BRANDS CORP., LLC	130.54	Food
174338	10/14/2020	FARMER BROS CO	343.14	Food
174361	10/14/2020	NICHOLAS & CO INC	1,435.81	Food
174383	10/14/2020	SYSCO INTERMOUNTAIN FOOD	1,397.75	Food
174392	10/14/2020	WESTERN WYOMING BEVERAGES INC	1,113.13	Food
174478	10/22/2020	DFA DAIRY BRANDS CORP., LLC	441.26	Food
174484	10/22/2020	F B MCFADDEN WHOLESALE	3,218.25	Food

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174483	10/22/2020	FARMER BROS CO	151.11	Food
174515	10/22/2020	NICHOLAS & CO INC	7,906.67	Food
174539	10/22/2020	SYSCO INTERMOUNTAIN FOOD	4,213.44	Food
174552	10/22/2020	WESTERN WYOMING BEVERAGES INC	85.32	Food
174760	10/30/2020	F B MCFADDEN WHOLESALE	3,904.15	Food
174751	10/30/2020	DFA DAIRY BRANDS CORP, LLC	181.44	Food
EFT000000006192	10/1/2020	COCA-COLA BOTTLING COMPANY HIGH COUNTRY	342.00	Food
EFT000000006227	10/14/2020	COCA-COLA BOTTLING COMPANY HIGH COUNTRY	676.00	Food
EFT000000006227	10/14/2020	COCA-COLA BOTTLING COMPANY HIGH COUNTRY	676.00	Food
EFT000000006246	10/22/2020	COCA-COLA BOTTLING COMPANY HIGH COUNTRY	539.00	Food
174100	10/1/2020	FED EX	25.40	Freight
174221	10/12/2020	FED EX	18.73	Freight
174283	10/12/2020	UPS STORE	90.00	Freight
174485	10/22/2020	FED EX	57.73	Freight
174543	10/22/2020	TRIOSE, INC	6,280.99	Freight
174259	10/12/2020	RED HORSE OIL COMPANIES INC	551.11	Fuel
EFT000000006220	10/12/2020	WWS - ROCK SPRINGS	2,547.60	Garbage Collection
W/T	10/22/2020	FURTHER ADMIN FEE	195.00	Group Health
W/T	10/9/2020	FURTHER FLEX 10/7/20	291.53	Group Health
W/T	10/30/2020	FURTHER FLEX 10/28/20	608.11	Group Health
W/T	10/23/2020	FURTHER FLEX 10/21/20	1,068.88	Group Health
W/T	10/16/2020	FURTHER FLEX 10/14/20	1,129.25	Group Health
W/T	10/2/2020	FURTHER FLEX 9/30/20	2,160.43	Group Health
W/T	10/16/2020	BLUE CROSS BLUE SHIELD 10/9/20	70,393.62	Group Health
W/T	10/30/2020	BLUE CROSS BLUE SHIELD 10/23/20	93,721.28	Group Health
W/T	10/20/2020	BLUE CROSS BLUE SHIELD 10/18/20	123,159.83	Group Health
W/T	10/9/2020	BLUE CROSS BLUE SHIELD 10/2/20	131,083.52	Group Health
W/T	10/2/2020	BLUE CROSS BLUE SHIELD 9/25/20	149,452.86	Group Health
174721	10/30/2020	THE ADVISORY BOARD COMPANY	12,250.00	Hospital Membership
174067	10/1/2020	ABBOTT LABORATORIES	1,244.61	Hospital Supplies
174068	10/1/2020	ALLEN MEDICAL SYSTEMS INC	444.44	Hospital Supplies
174071	10/1/2020	AQUACAST LINER	2,050.00	Hospital Supplies
174072	10/1/2020	ARTHREX INC.	294.00	Hospital Supplies
174076	10/1/2020	B BRAUN MEDICAL INC.	368.62	Hospital Supplies
174075	10/1/2020	BAXTER HEALTHCARE CORP/IV	1,261.68	Hospital Supplies
174078	10/1/2020	BIOMET SPORTS MEDICINE	1,060.00	Hospital Supplies
174080	10/1/2020	BOSTON SCIENTIFIC CORP	1,460.52	Hospital Supplies
174084	10/1/2020	CARDINAL HEALTH/V. MUELLER	415.82	Hospital Supplies
174090	10/1/2020	COOK MEDICAL INCORPORATED	1,893.84	Hospital Supplies
174095	10/1/2020	DIAGNOSTICA STAGO INC	2,897.52	Hospital Supplies
174110	10/1/2020	HOLOGIC, INC.	457.00	Hospital Supplies
174136	10/1/2020	MINDRAY DS USA, INC.	274.56	Hospital Supplies
174141	10/1/2020	OLYMPUS AMERICA INC	657.82	Hospital Supplies
174142	10/1/2020	OWENS & MINOR 90005430	3,260.98	Hospital Supplies
174143	10/1/2020	PERFORMANCE HEALTH SUPPLY INC	61.73	Hospital Supplies
174160	10/1/2020	STERIS CORPORATION	679.25	Hospital Supplies
174164	10/1/2020	TELEFLEX MEDICAL INC.	613.80	Hospital Supplies
174168	10/1/2020	TRI-ANIM HEALTH SERVICES INC	252.80	Hospital Supplies
174171	10/1/2020	UTAH MEDICAL PRODUCTS INC	567.12	Hospital Supplies

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174172	10/1/2020	VERATHON INC.	350.00	Hospital Supplies
174188	10/12/2020	ABBOTT LABORATORIES	1,437.37	Hospital Supplies
174261	10/12/2020	ABBOTT NUTRITION	46.50	Hospital Supplies
174190	10/12/2020	AESCULAP INC	1,644.07	Hospital Supplies
174192	10/12/2020	AMAZON.COM CREDIT PLAN	2,874.96	Hospital Supplies
174197	10/12/2020	BARD PERIPHERAL VASCULAR INC	1,044.00	Hospital Supplies
174198	10/12/2020	BAXTER HEALTHCARE CORP/IV	840.84	Hospital Supplies
174201	10/12/2020	BIOMET SPORTS MEDICINE	1,442.00	Hospital Supplies
174203	10/12/2020	BOSTON SCIENTIFIC CORP	3,462.54	Hospital Supplies
174214	10/12/2020	C.R. BARD, INC.	198.00	Hospital Supplies
174206	10/12/2020	CARDINAL HEALTH/V. MUELLER	15,036.85	Hospital Supplies
174212	10/12/2020	COOK MEDICAL INC.	122.20	Hospital Supplies
174213	10/12/2020	COOK MEDICAL INCORPORATED	490.40	Hospital Supplies
174217	10/12/2020	DIAGNOSTICA STAGO INC	3,553.10	Hospital Supplies
174225	10/12/2020	FISHER & PAYKEL HEALTHCARE, INC	1,329.90	Hospital Supplies
174227	10/12/2020	GENERAL HOSPITAL SUPPLY CORPORATION	222.00	Hospital Supplies
174230	10/12/2020	HEALTHCARE LOGISTICS INC	67.39	Hospital Supplies
174232	10/12/2020	HILL-ROM	3,004.54	Hospital Supplies
174233	10/12/2020	HOLOGIC, INC.	4,193.00	Hospital Supplies
174238	10/12/2020	KARL STORZ ENDOSCOPY-AMERICA	2,502.94	Hospital Supplies
174273	10/12/2020	LEICA BIOSYSTEMS RICHMOND	580.96	Hospital Supplies
174244	10/12/2020	MCKESSON MEDICAL-SURGICAL	612.21	Hospital Supplies
174249	10/12/2020	OLYMPUS AMERICA INC	203.80	Hospital Supplies
174250	10/12/2020	OWENS & MINOR 90005430	9,682.16	Hospital Supplies
174252	10/12/2020	PERFORMANCE HEALTH SUPPLY INC	39.26	Hospital Supplies
174258	10/12/2020	RADIOMETER AMERICA INC	1,567.16	Hospital Supplies
174263	10/12/2020	SMITHS MEDICAL ASD INC	827.61	Hospital Supplies
174267	10/12/2020	STERIS CORPORATION	554.32	Hospital Supplies
174272	10/12/2020	SUREMARK CO	263.00	Hospital Supplies
174280	10/12/2020	TRI-ANIM HEALTH SERVICES INC	1,710.79	Hospital Supplies
174286	10/12/2020	WAXIE SANITARY SUPPLY	477.69	Hospital Supplies
174215	10/12/2020	CR BARD, INC	195.00	Hospital Supplies
174316	10/14/2020	AMAZON.COM CREDIT PLAN	644.51	Hospital Supplies
174317	10/14/2020	APPLIED MEDICAL	672.00	Hospital Supplies
174320	10/14/2020	B BRAUN MEDICAL INC.	1,176.43	Hospital Supplies
174319	10/14/2020	BAYER HEALTHCARE LLC	1,858.06	Hospital Supplies
174322	10/14/2020	BOSTON SCIENTIFIC CORP	735.93	Hospital Supplies
174333	10/14/2020	COOK MEDICAL INCORPORATED	2,354.20	Hospital Supplies
174335	10/14/2020	DIAGNOSTICA STAGO INC	3,981.31	Hospital Supplies
174343	10/14/2020	HEALTHCARE LOGISTICS INC	241.10	Hospital Supplies
174346	10/14/2020	HULL ANESTHESIA INC	180.00	Hospital Supplies
174380	10/14/2020	LEICA BIOSYSTEMS RICHMOND	905.12	Hospital Supplies
174353	10/14/2020	MCKESSON MEDICAL-SURGICAL	767.20	Hospital Supplies
174364	10/14/2020	OLYMPUS AMERICA INC	11,961.98	Hospital Supplies
174366	10/14/2020	OWENS & MINOR 90005430	1,213.00	Hospital Supplies
174378	10/14/2020	STERIS CORPORATION	4,405.80	Hospital Supplies
174386	10/14/2020	TRI-ANIM HEALTH SERVICES INC	168.65	Hospital Supplies
174391	10/14/2020	WAXIE SANITARY SUPPLY	2,405.25	Hospital Supplies
174396	10/14/2020	EDGE PHARMACEUTICALS, LLC	1,705.28	Hospital Supplies

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174448	10/22/2020	AESCLAP INC	587.56	Hospital Supplies
174454	10/22/2020	APPLIED MEDICAL	2,670.00	Hospital Supplies
174455	10/22/2020	B BRAUN MEDICAL INC.	380.00	Hospital Supplies
174462	10/22/2020	BOSTON SCIENTIFIC CORP	3,107.98	Hospital Supplies
174477	10/22/2020	C R BARD INC	350.00	Hospital Supplies
174476	10/22/2020	C.R. BARD, INC.	356.07	Hospital Supplies
174465	10/22/2020	CARDINAL HEALTH/V. MUELLER	52,484.54	Hospital Supplies
174471	10/22/2020	CONE INSTRUMENTS	299.53	Hospital Supplies
174472	10/22/2020	CONMED CORPORATION	151.60	Hospital Supplies
174474	10/22/2020	COOK MEDICAL INCORPORATED	244.00	Hospital Supplies
174481	10/22/2020	EDGE PHARMACEUTICALS, LLC	783.04	Hospital Supplies
174490	10/22/2020	GENERAL HOSPITAL SUPPLY CORPORATION	222.00	Hospital Supplies
174492	10/22/2020	GYNEX CORP	367.40	Hospital Supplies
174493	10/22/2020	HEALTHCARE LOGISTICS INC	337.38	Hospital Supplies
174496	10/22/2020	HILL-ROM	3,004.54	Hospital Supplies
174538	10/22/2020	LEICA BIOSYSTEMS RICHMOND	155.24	Hospital Supplies
174512	10/22/2020	M V A P MEDICAL SUPPLIES, INC.	432.70	Hospital Supplies
174508	10/22/2020	MEDTRONIC, USA	13,630.00	Hospital Supplies
174513	10/22/2020	NATUS MEDICAL INC	495.00	Hospital Supplies
174514	10/22/2020	NEOTECH PRODUCTS, INC	106.25	Hospital Supplies
174516	10/22/2020	OLYMPUS AMERICA INC	86.43	Hospital Supplies
174517	10/22/2020	OWENS & MINOR 90005430	18,567.35	Hospital Supplies
174527	10/22/2020	RESMED CORP	85.00	Hospital Supplies
174526	10/22/2020	RESPIRONICS	100.00	Hospital Supplies
174537	10/22/2020	STERIS CORPORATION	3,531.88	Hospital Supplies
174542	10/22/2020	TRI-ANIM HEALTH SERVICES INC	511.82	Hospital Supplies
174549	10/22/2020	VERATHON INC	720.00	Hospital Supplies
174551	10/22/2020	WAXIE SANITARY SUPPLY	260.48	Hospital Supplies
174722	10/30/2020	AESCLAP INC	453.90	Hospital Supplies
174724	10/30/2020	AMAZON.COM CREDIT PLAN	2,541.52	Hospital Supplies
174725	10/30/2020	APPLIED MEDICAL	528.00	Hospital Supplies
174731	10/30/2020	B BRAUN MEDICAL INC.	2,468.48	Hospital Supplies
174727	10/30/2020	BARD PERIPHERAL VASCULAR INC	450.00	Hospital Supplies
174728	10/30/2020	BAXTER HEALTHCARE CORP/IV	2,102.52	Hospital Supplies
174729	10/30/2020	BAXTER HEALTHCARE CORPORATION	798.39	Hospital Supplies
174730	10/30/2020	BAYER HEALTHCARE LLC	1,858.86	Hospital Supplies
174735	10/30/2020	BOSTON SCIENTIFIC CORP	6,465.06	Hospital Supplies
174747	10/30/2020	C R BARD INC	190.99	Hospital Supplies
174738	10/30/2020	CAREFUSION 2200 INC	1,200.00	Hospital Supplies
174744	10/30/2020	CONE INSTRUMENTS	216.61	Hospital Supplies
174745	10/30/2020	COOK MEDICAL INC.	2,191.96	Hospital Supplies
174746	10/30/2020	COOK MEDICAL INCORPORATED	1,935.72	Hospital Supplies
174753	10/30/2020	DIAGNOSTICA STAGO INC	118.52	Hospital Supplies
174780	10/30/2020	KARL STORZ ENDOSCOPY-AMERICA	1,637.44	Hospital Supplies
174816	10/30/2020	LEICA BIOSYSTEMS RICHMOND	893.41	Hospital Supplies
174798	10/30/2020	M V A P MEDICAL SUPPLIES, INC.	59.00	Hospital Supplies
174797	10/30/2020	MINDRAY DS USA, INC.	274.56	Hospital Supplies
174800	10/30/2020	OWENS & MINOR 90005430	25,649.56	Hospital Supplies
174814	10/30/2020	STERIS CORPORATION	4,535.01	Hospital Supplies

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174825	10/30/2020	TRI-ANIM HEALTH SERVICES INC	255.96	Hospital Supplies
174832	10/30/2020	VERATHON INC.	540.00	Hospital Supplies
174835	10/30/2020	WAXIE SANITARY SUPPLY	102.60	Hospital Supplies
174748	10/30/2020	CR BARD, INC	195.00	Hospital Supplies
EFT00000006190	10/1/2020	BREG INC	88.00	Hospital Supplies
EFT00000006191	10/1/2020	BSN MEDICAL INC	253.62	Hospital Supplies
EFT00000006194	10/1/2020	HARDY DIAGNOSTICS	1,136.93	Hospital Supplies
EFT00000006200	10/1/2020	SIEMENS HEALTHCARE DIAGNOSTICS, INC.	241.09	Hospital Supplies
EFT00000006206	10/12/2020	BREG INC	779.24	Hospital Supplies
EFT00000006208	10/12/2020	HARDY DIAGNOSTICS	1,310.51	Hospital Supplies
EFT00000006212	10/12/2020	OVATION MEDICAL	899.00	Hospital Supplies
EFT00000006216	10/12/2020	SIEMENS HEALTHCARE DIAGNOSTICS, INC.	2,841.09	Hospital Supplies
EFT00000006221	10/12/2020	ZOLL MEDICAL CORPORATION	1,115.20	Hospital Supplies
EFT00000006224	10/14/2020	BREG INC	793.93	Hospital Supplies
EFT00000006225	10/14/2020	BSN MEDICAL INC	64.03	Hospital Supplies
EFT00000006230	10/14/2020	HARDY DIAGNOSTICS	337.80	Hospital Supplies
EFT00000006234	10/14/2020	SIEMENS HEALTHCARE DIAGNOSTICS, INC.	144.06	Hospital Supplies
EFT00000006237	10/14/2020	STRYKER INSTRUMENTS	517.17	Hospital Supplies
EFT00000006238	10/14/2020	ZOLL MEDICAL CORPORATION	30.75	Hospital Supplies
EFT00000006224	10/14/2020	BREG INC	793.93	Hospital Supplies
EFT00000006225	10/14/2020	BSN MEDICAL INC	64.03	Hospital Supplies
EFT00000006230	10/14/2020	HARDY DIAGNOSTICS	337.80	Hospital Supplies
EFT00000006234	10/14/2020	SIEMENS HEALTHCARE DIAGNOSTICS, INC.	144.06	Hospital Supplies
EFT00000006237	10/14/2020	STRYKER INSTRUMENTS	517.17	Hospital Supplies
EFT00000006238	10/14/2020	ZOLL MEDICAL CORPORATION	30.75	Hospital Supplies
EFT00000006241	10/22/2020	BEEKLEY CORPORATION	166.00	Hospital Supplies
EFT00000006244	10/22/2020	BREG INC	496.49	Hospital Supplies
EFT00000006245	10/22/2020	BSN MEDICAL INC	168.35	Hospital Supplies
EFT00000006249	10/22/2020	HARDY DIAGNOSTICS	446.04	Hospital Supplies
EFT00000006250	10/22/2020	IN PRO CORPORATION	2,778.57	Hospital Supplies
EFT00000006259	10/22/2020	STRYKER INSTRUMENTS	244.80	Hospital Supplies
EFT00000006261	10/22/2020	ZOLL MEDICAL CORPORATION	1,720.27	Hospital Supplies
EFT00000006266	10/30/2020	BREG INC	1,055.55	Hospital Supplies
EFT00000006269	10/30/2020	HARDY DIAGNOSTICS	762.60	Hospital Supplies
EFT00000006273	10/30/2020	STRYKER INSTRUMENTS	1,135.60	Hospital Supplies
EFT00000006226	10/14/2020	CIVCO MEDICAL INSTRUMENTS	561.00	Instruments
EFT00000006226	10/14/2020	CIVCO MEDICAL INSTRUMENTS	561.00	Instruments
174282	10/12/2020	PROVIDENT LIFE & ACCIDENT	12,887.03	Insurance Premium
174292	10/12/2020	INSURANCE REFUND	145.28	Insurance Refund
174293	10/12/2020	INSURANCE REFUND	265.06	Insurance Refund
174294	10/12/2020	INSURANCE REFUND	773.29	Insurance Refund
174295	10/12/2020	INSURANCE REFUND	5.74	Insurance Refund
174297	10/12/2020	INSURANCE REFUND	562.16	Insurance Refund
174298	10/12/2020	INSURANCE REFUND	200.15	Insurance Refund
174299	10/12/2020	INSURANCE REFUND	54.15	Insurance Refund
174300	10/12/2020	INSURANCE REFUND	424.14	Insurance Refund
174301	10/12/2020	INSURANCE REFUND	1,736.50	Insurance Refund
174302	10/12/2020	INSURANCE REFUND	465.56	Insurance Refund
174303	10/12/2020	INSURANCE REFUND	47.04	Insurance Refund

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174425	10/22/2020	INSURANCE REFUND	33.00	Insurance Refund
174403	10/22/2020	INSURANCE REFUND	418.94	Insurance Refund
174432	10/22/2020	INSURANCE REFUND	304.18	Insurance Refund
174445	10/22/2020	INSURANCE REFUND	10,540.74	Insurance Refund
174419	10/22/2020	INSURANCE REFUND	23.35	Insurance Refund
174446	10/22/2020	INSURANCE REFUND	311.40	Insurance Refund
174436	10/22/2020	INSURANCE REFUND	25.60	Insurance Refund
174404	10/22/2020	INSURANCE REFUND	1,927.41	Insurance Refund
174407	10/22/2020	INSURANCE REFUND	869.44	Insurance Refund
174408	10/22/2020	INSURANCE REFUND	1,934.94	Insurance Refund
174410	10/22/2020	INSURANCE REFUND	112.10	Insurance Refund
174412	10/22/2020	INSURANCE REFUND	39.52	Insurance Refund
174434	10/22/2020	INSURANCE REFUND	1,377.50	Insurance Refund
174442	10/22/2020	INSURANCE REFUND	161.50	Insurance Refund
174421	10/22/2020	INSURANCE REFUND	11.79	Insurance Refund
174418	10/22/2020	INSURANCE REFUND	397.29	Insurance Refund
174426	10/22/2020	INSURANCE REFUND	190.00	Insurance Refund
174422	10/22/2020	INSURANCE REFUND	17.10	Insurance Refund
174444	10/22/2020	INSURANCE REFUND	1,193.75	Insurance Refund
174423	10/22/2020	INSURANCE REFUND	1,077.80	Insurance Refund
174605	10/22/2020	INSURANCE REFUND	25.00	Insurance Refund
174400	10/22/2020	INSURANCE REFUND	80.75	Insurance Refund
174416	10/22/2020	INSURANCE REFUND	500.00	Insurance Refund
174429	10/22/2020	INSURANCE REFUND	315.51	Insurance Refund
174430	10/22/2020	INSURANCE REFUND	429.21	Insurance Refund
174413	10/22/2020	INSURANCE REFUND	92.45	Insurance Refund
174433	10/22/2020	INSURANCE REFUND	39.36	Insurance Refund
174440	10/22/2020	INSURANCE REFUND	78.85	Insurance Refund
174402	10/22/2020	INSURANCE REFUND	4.75	Insurance Refund
174409	10/22/2020	INSURANCE REFUND	2,115.11	Insurance Refund
174420	10/22/2020	INSURANCE REFUND	66.70	Insurance Refund
174427	10/22/2020	INSURANCE REFUND	56.05	Insurance Refund
174431	10/22/2020	INSURANCE REFUND	4,917.49	Insurance Refund
174435	10/22/2020	INSURANCE REFUND	662.15	Insurance Refund
174903	10/30/2020	INSURANCE REFUND	146.00	Insurance Refund
174181	10/1/2020	WYOMING.COM	10.00	Internet Services
174131	10/1/2020	METABOLIC NEWBORN SCREENING	6,169.00	Laboratory Services
174247	10/12/2020	METABOLIC NEWBORN SCREENING	1,800.00	Laboratory Services
174450	10/22/2020	ALLERMETRIX INC	1,544.00	Laboratory Services
174505	10/22/2020	MAYO COLLABORATIVE SERVICES, INC.	328.60	Laboratory Services
174791	10/30/2020	METABOLIC NEWBORN SCREENING	4,522.00	Laboratory Services
EFT00000006262	10/22/2020	ARUP LABORATORIES, INC.	52,942.59	Laboratory Services
174083	10/1/2020	CARDINAL HEALTH	13,207.64	Laboratory Supplies
174087	10/1/2020	CEPHID	4,878.50	Laboratory Supplies
174102	10/1/2020	FISHER HEALTHCARE	5,258.13	Laboratory Supplies
174128	10/1/2020	MEDIVATORS REPROCESSING SYSTEM	395.00	Laboratory Supplies
174149	10/1/2020	RBD SYSTEMS INC	72.85	Laboratory Supplies
174162	10/1/2020	STRECK LABORATORIES INC	259.43	Laboratory Supplies
174159	10/1/2020	STATLAB MEDICAL PRODUCTS	2,383.83	Laboratory Supplies

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174194	10/12/2020	ANAEROBE SYSTEMS	36.00	Laboratory Supplies
174199	10/12/2020	BECKMAN COULTER, INC	2,817.84	Laboratory Supplies
174205	10/12/2020	CARDINAL HEALTH	22,123.21	Laboratory Supplies
174224	10/12/2020	FISHER HEALTHCARE	4,380.57	Laboratory Supplies
174237	10/12/2020	PLATINUM CODE	90.30	Laboratory Supplies
174200	10/12/2020	BECTON DICKINSON	663.20	Laboratory Supplies
174266	10/12/2020	STATLAB MEDICAL PRODUCTS	278.14	Laboratory Supplies
174321	10/14/2020	BECKMAN COULTER, INC	229.01	Laboratory Supplies
174324	10/14/2020	CARDINAL HEALTH	22,620.37	Laboratory Supplies
174326	10/14/2020	CEPHEID	3,850.00	Laboratory Supplies
174339	10/14/2020	FISHER HEALTHCARE	4,296.80	Laboratory Supplies
174379	10/14/2020	STRECK LABORATORIES INC	442.03	Laboratory Supplies
174456	10/22/2020	BECKMAN COULTER, INC	92.46	Laboratory Supplies
174459	10/22/2020	BIOFIRE DIAGNOSTICS, LLC	7,740.00	Laboratory Supplies
174464	10/22/2020	CARDINAL HEALTH	60,481.73	Laboratory Supplies
174467	10/22/2020	CEPHEID	7,738.46	Laboratory Supplies
174487	10/22/2020	FISHER HEALTHCARE	7,460.04	Laboratory Supplies
174504	10/22/2020	LIFELOC TECHNOLOGIES	100.00	Laboratory Supplies
174522	10/22/2020	PIPETTE.COM	425.00	Laboratory Supplies
174499	10/22/2020	PLATINUM CODE	297.96	Laboratory Supplies
174732	10/30/2020	BECKMAN COULTER, INC	649.47	Laboratory Supplies
174737	10/30/2020	CARDINAL HEALTH	2,479.66	Laboratory Supplies
174740	10/30/2020	CEPHEID	4,080.00	Laboratory Supplies
174761	10/30/2020	FISHER HEALTHCARE	2,275.89	Laboratory Supplies
174787	10/30/2020	MEDI BADGE INC	293.84	Laboratory Supplies
174788	10/30/2020	MEDVATORS REPROCESSING SYSTEM	204.00	Laboratory Supplies
174773	10/30/2020	PLATINUM CODE	258.26	Laboratory Supplies
174826	10/30/2020	TYPEX MEDICAL, LLC	64.00	Laboratory Supplies
EFT00000006195	10/1/2020	PACE ANALYTICAL SERVICES, LLC	173.00	Laboratory Supplies
EFT00000006211	10/12/2020	ORTHO-CLINICAL DIAGNOSTICS INC	951.99	Laboratory Supplies
EFT00000006233	10/14/2020	PDC HEALTHCARE	60.50	Laboratory Supplies
EFT00000006233	10/14/2020	PDC HEALTHCARE	60.50	Laboratory Supplies
EFT00000006243	10/22/2020	BIO-RAD LABORATORIES	485.00	Laboratory Supplies
EFT00000006253	10/22/2020	ORTHO-CLINICAL DIAGNOSTICS INC	2,089.75	Laboratory Supplies
EFT00000006255	10/22/2020	PDC HEALTHCARE	55.66	Laboratory Supplies
EFT00000006265	10/30/2020	BIO-RAD LABORATORIES	5,156.27	Laboratory Supplies
EFT00000006197	10/1/2020	MARTIN-RAY LAUNDRY SYSTEMS	3,200.00	Laundry Supplies
174074	10/1/2020	BARRY J. WALKER	3,857.30	Legal Fees
174521	10/22/2020	PHILLIPS LAW, LLC	4,350.00	Legal Fees
174330	10/14/2020	CLIA LABORATORY PROGRAM	180.00	License Renewal
174841	10/30/2020	WYOMING DEPT OF AGRICULTURE	50.00	License Renewal
174556	10/22/2020	WYOMING STATE BAR	355.00	Licenses & Taxes
174140	10/1/2020	NEW YORK LIFE INSURANCE COMPANY	2,558.00	Life Insurance
174812	10/30/2020	STANDARD TEXTILE	217.44	Linen
174840	10/30/2020	WYOMING UROLOGICAL SERVICES, LP	9,300.00	Urology Services
174177	10/1/2020	WEATHERBY LOCUMS, INC	43,336.80	Locum Tenens
174115	10/1/2020	JHMR MEDICAL ASSOCIATES	3,992.24	Locum Tenens
174837	10/30/2020	WEATHERBY LOCUMS, INC	17,596.46	Locum Tenens
174103	10/1/2020	FLOORING PROFESSIONALS INC	980.00	Maintenance & Repair

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174207	10/12/2020	CARRIER COMMERCIAL SERVICE	3,005.00	Maintenance & Repair
174253	10/12/2020	P M AUTO GLASS, INC.	355.00	Maintenance & Repair
174329	10/14/2020	CLARK'S QUALITY ROOFING, INC	17,582.00	Maintenance & Repair
174344	10/14/2020	HIGH SECURITY LOCK & ALARM	6.00	Maintenance & Repair
174345	10/14/2020	HOSE & RUBBER	67.09	Maintenance & Repair
174367	10/14/2020	PACIFIC STEEL HIDES FURS RECYC	117.09	Maintenance & Repair
174381	10/14/2020	SWEETWATER PLUMBING & HEATING	309.35	Maintenance & Repair
174393	10/14/2020	WHISLER CHEVROLET	420.00	Maintenance & Repair
174368	10/14/2020	PARADISE FLOORING & DESIGN INC.	1,055.88	Maintenance & Repair
174461	10/22/2020	BOBCAT OF ROCK SPRINGS	1,838.04	Maintenance & Repair
174463	10/22/2020	BROTHER'S CONSTRUCTION COMPANY LLC	2,900.00	Maintenance & Repair
174479	10/22/2020	DIRECT SUPPLY	644.00	Maintenance & Repair
174497	10/22/2020	HOSE & RUBBER	21.74	Maintenance & Repair
174518	10/22/2020	PARADISE FLOORING & DESIGN INC.	1,981.98	Maintenance & Repair
174818	10/30/2020	SWEETWATER PLUMBING & HEATING	184.65	Maintenance & Repair
174806	10/30/2020	ROOFTOP ANCHOR, INC.	2,540.00	Maintenance & Repair
EFT00000006198	10/1/2020	PARTSSOURCE	1,815.73	Maintenance & Repair
EFT00000006213	10/12/2020	PARTSSOURCE	43.01	Maintenance & Repair
EFT00000006254	10/22/2020	PARTSSOURCE	3,271.37	Maintenance & Repair
EFT00000006258	10/22/2020	SERVCO	4,950.00	Maintenance & Repair
EFT00000006271	10/30/2020	PARTSSOURCE	948.39	Maintenance & Repair
174089	10/1/2020	CODALE ELECTRIC SUPPLY, INC	1,532.87	Maintenance Supplies
174108	10/1/2020	GRAINGER	978.48	Maintenance Supplies
174111	10/1/2020	HOME DEPOT	82.03	Maintenance Supplies
174121	10/1/2020	JOHNSON CONTROLS INC	1,191.00	Maintenance Supplies
174196	10/12/2020	BARD ACCESS SYSTEMS	903.21	Maintenance Supplies
174228	10/12/2020	GRAINGER	72.75	Maintenance Supplies
174234	10/12/2020	HOME DEPOT	1,965.18	Maintenance Supplies
174236	10/12/2020	INSULATION INC.	1,320.00	Maintenance Supplies
174260	10/12/2020	ROCKLER COMPANIES, INC	278.93	Maintenance Supplies
174331	10/14/2020	CODALE ELECTRIC SUPPLY, INC	201.03	Maintenance Supplies
174348	10/14/2020	JOHNSON BROTHERS, INC.	1,115.00	Maintenance Supplies
174359	10/14/2020	NAPA AUTO PARTS	12.00	Maintenance Supplies
174387	10/14/2020	UNIPOWER	1,293.40	Maintenance Supplies
174371	10/14/2020	ROCK SPRINGS WINLECTRIC CO	97.06	Maintenance Supplies
174451	10/22/2020	ALPINE PURE SOFT WATER	1,352.40	Maintenance Supplies
174470	10/22/2020	CODALE ELECTRIC SUPPLY, INC	407.59	Maintenance Supplies
174491	10/22/2020	GRAINGER	956.53	Maintenance Supplies
174530	10/22/2020	ROCKLER COMPANIES, INC	13.95	Maintenance Supplies
174545	10/22/2020	UNIPOWER	395.27	Maintenance Supplies
174726	10/30/2020	BARD ACCESS SYSTEMS	959.07	Maintenance Supplies
174743	10/30/2020	CODALE ELECTRIC SUPPLY, INC	548.36	Maintenance Supplies
174766	10/30/2020	GRAINGER	187.50	Maintenance Supplies
174769	10/30/2020	HOME DEPOT	855.39	Maintenance Supplies
174771	10/30/2020	INSULATION INC.	477.65	Maintenance Supplies
174828	10/30/2020	UNIPOWER	1,003.98	Maintenance Supplies
EFT00000006188	10/1/2020	ACE HARDWARE	116.90	Maintenance Supplies
EFT00000006199	10/1/2020	SHERWIN WILLIAMS CO	33.78	Maintenance Supplies
EFT00000006214	10/12/2020	ROBERT I MERRILL COMPANY	330.00	Maintenance Supplies

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EFT000000006215	10/12/2020	SHERWIN WILLIAMS CO	33.78	Maintenance Supplies
EFT000000006219	10/12/2020	ULINE, INC	978.50	Maintenance Supplies
EFT000000006222	10/14/2020	ACE HARDWARE	469.81	Maintenance Supplies
EFT000000006222	10/14/2020	ACE HARDWARE	469.81	Maintenance Supplies
EFT000000006239	10/22/2020	ACE HARDWARE	47.18	Maintenance Supplies
EFT000000006242	10/22/2020	BENNETT'S	2,548.12	Maintenance Supplies
EFT000000006256	10/22/2020	ROBERT I MERRILL COMPANY	1,428.50	Maintenance Supplies
EFT000000006260	10/22/2020	ULINE, INC	305.50	Maintenance Supplies
EFT000000006263	10/30/2020	ACE HARDWARE	123.72	Maintenance Supplies
EFT000000006276	10/30/2020	ULINE, INC	846.50	Maintenance Supplies
174255	10/12/2020	PURPLE LIZARDS, LLC	894.00	Marketing & Promotional Supplies
174770	10/30/2020	INNOVATIVE MEDICAL PRODUCTS, INC.	598.00	Medical Surgical Supplies
174138	10/1/2020	NATIONAL FIRE PROTECTION ASSN	175.00	Membership
174186	10/2/2020	WYOMING NONPROFIT NETWORK	50.00	Membership
174132	10/1/2020	MHSC-FOUNDATION	1,165.95	MHSC Foundation
174356	10/14/2020	MHSC-FOUNDATION	1,235.95	MHSC Foundation
174792	10/30/2020	MHSC-FOUNDATION	1,271.95	MHSC Foundation
174374	10/14/2020	SENSONICS, INC	199.97	Minor Equipment
174167	10/1/2020	TERMINIX OF WYOMING	462.00	Monthly Pest Control
174822	10/30/2020	TERMINIX OF WYOMING	512.00	Monthly Pest Control
174105	10/1/2020	FOLLETT CORPORATION	3,598.00	Non Medical Supplies
174129	10/1/2020	MEDLINE INDUSTRIES INC	935.46	Non Medical Supplies
174155	10/1/2020	SHARN ANESTHESIA INC	604.80	Non Medical Supplies
174245	10/12/2020	MEDLINE INDUSTRIES INC	978.80	Non Medical Supplies
174355	10/14/2020	MEDLINE INDUSTRIES INC	1,606.03	Non Medical Supplies
174365	10/14/2020	ORIENTAL TRADING COMPANY	1,320.80	Non Medical Supplies
174382	10/14/2020	SWEETWATER TROPHIES	11.50	Non Medical Supplies
174507	10/22/2020	MEDLINE INDUSTRIES INC	674.72	Non Medical Supplies
174765	10/30/2020	GLOBAL EQUIPMENT COMPANY	362.30	Non Medical Supplies
174789	10/30/2020	MEDLINE INDUSTRIES INC	651.95	Non Medical Supplies
174810	10/30/2020	SHARN ANESTHESIA INC	104.57	Non Medical Supplies
174169	10/1/2020	UNIMED-MIDWEST INC.	472.43	Office Supplies
174157	10/1/2020	STAPLES BUSINESS ADVANTAGE	393.42	Office Supplies
174264	10/12/2020	STAPLES BUSINESS ADVANTAGE	1,308.33	Office Supplies
174281	10/12/2020	UNITED AD LABEL	256.66	Office Supplies
174240	10/12/2020	LABELMATCH	187.90	Office Supplies
174337	10/14/2020	ENCOMPASS GROUP, LLC	1,153.22	Office Supplies
174524	10/22/2020	PROFORMA	496.80	Office Supplies
174536	10/22/2020	STAPLES BUSINESS ADVANTAGE	1,946.71	Office Supplies
174546	10/22/2020	UNITED AD LABEL	149.46	Office Supplies
174755	10/30/2020	ENCOMPASS GROUP, LLC	1,584.24	Office Supplies
174813	10/30/2020	STAPLES BUSINESS ADVANTAGE	781.90	Office Supplies
EFT000000006235	10/14/2020	SMYTH PRINTING	244.80	Office Supplies
EFT000000006235	10/14/2020	SMYTH PRINTING	244.80	Office Supplies
174182	10/1/2020	YOUNG AT HEART SENIOR CITIZENS CENTER	1,970.00	Other Employee Benefits
174289	10/12/2020	YOUNG AT HEART SENIOR CITIZENS CENTER	1,970.00	Other Employee Benefits
EFT000000006251	10/22/2020	LAGOON CORPORATION	1,671.49	Other Employee Benefits
174079	10/1/2020	BLUE ENDO	555.07	Other Medical Surgical Supplies
174097	10/1/2020	EQUASHIELD LLC	3,855.68	Other Medical Surgical Supplies

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174165	10/1/2020	TELEFLEX LLC	293.93	Other Medical Surgical Supplies
174219	10/12/2020	EQUASHIELD LLC	1,543.52	Other Medical Surgical Supplies
174278	10/12/2020	TELEFLEX LLC	1,400.00	Other Medical Surgical Supplies
174384	10/14/2020	TELEFLEX LLC	104.76	Other Medical Surgical Supplies
174193	10/12/2020	AMBU INCORPORATED	193.93	Other Medical Surgical Supplies
174457	10/22/2020	BECTON DICKINSON	253.00	Other Medical Surgical Supplies
174460	10/22/2020	BIOMERIEUX, INC.	4,488.69	Other Medical Surgical Supplies
174482	10/22/2020	EQUASHIELD LLC	393.80	Other Medical Surgical Supplies
174531	10/22/2020	ROCK SPRINGS I.V. CENTER	4,323.69	Other Medical Surgical Supplies
174540	10/22/2020	TELEFLEX LLC	68.65	Other Medical Surgical Supplies
174733	10/30/2020	BECTON DICKINSON	786.00	Other Medical Surgical Supplies
174757	10/30/2020	EQUASHIELD LLC	1,924.48	Other Medical Surgical Supplies
174821	10/30/2020	TELEFLEX LLC	898.50	Other Medical Surgical Supplies
174452	10/22/2020	ALTA MEDICAL SPECIALTIES	613.00	Other Non Medical Surgical Supplies
174125	10/1/2020	QUICK RESPONSE TAXI	200.00	Other Purchased Services
174183	10/2/2020	QUICK RESPONSE TAXI	75.00	Other Purchased Services
174243	10/12/2020	QUICK RESPONSE TAXI	195.00	Other Purchased Services
174328	10/14/2020	CJ SIGNS	220.00	Other Purchased Services
174351	10/14/2020	QUICK RESPONSE TAXI	205.00	Other Purchased Services
174469	10/22/2020	CJ SIGNS	170.00	Other Purchased Services
174503	10/22/2020	QUICK RESPONSE TAXI	185.00	Other Purchased Services
174783	10/30/2020	QUICK RESPONSE TAXI	140.00	Other Purchased Services
EFT00000006189	10/1/2020	AIRGAS INTERMOUNTAIN INC	217.99	Oxygen Rental
EFT00000006204	10/12/2020	AIRGAS INTERMOUNTAIN INC	75.22	Oxygen Rental
EFT00000006223	10/14/2020	AIRGAS INTERMOUNTAIN INC	633.90	Oxygen Rental
EFT00000006223	10/14/2020	AIRGAS INTERMOUNTAIN INC	633.90	Oxygen Rental
EFT00000006240	10/22/2020	AIRGAS INTERMOUNTAIN INC	155.11	Oxygen Rental
EFT00000006264	10/30/2020	AIRGAS INTERMOUNTAIN INC	355.79	Oxygen Rental
174066	10/1/2020	PATIENT REFUND	200.00	Patient Refund
174296	10/12/2020	PATIENT REFUND	145.44	Patient Refund
174395	10/14/2020	PATIENT REFUND	12.80	Patient Refund
174396	10/14/2020	PATIENT REFUND	10.00	Patient Refund
174397	10/14/2020	PATIENT REFUND	27.85	Patient Refund
174398	10/14/2020	PATIENT REFUND	115.42	Patient Refund
174560	10/22/2020	PATIENT REFUND	15.00	Patient Refund
174561	10/22/2020	PATIENT REFUND	35.00	Patient Refund
174562	10/22/2020	PATIENT REFUND	231.20	Patient Refund
174563	10/22/2020	PATIENT REFUND	17.04	Patient Refund
174564	10/22/2020	PATIENT REFUND	30.00	Patient Refund
174565	10/22/2020	PATIENT REFUND	40.00	Patient Refund
174566	10/22/2020	PATIENT REFUND	30.00	Patient Refund
174567	10/22/2020	PATIENT REFUND	60.80	Patient Refund
174568	10/22/2020	PATIENT REFUND	30.00	Patient Refund
174569	10/22/2020	PATIENT REFUND	30.00	Patient Refund
174570	10/22/2020	PATIENT REFUND	20.00	Patient Refund
174401	10/22/2020	PATIENT REFUND	465.50	Patient Refund
174571	10/22/2020	PATIENT REFUND	180.00	Patient Refund
174572	10/22/2020	PATIENT REFUND	145.80	Patient Refund
174573	10/22/2020	PATIENT REFUND	31.64	Patient Refund

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174574	10/22/2020	PATIENT REFUND	70.00	Patient Refund
174558	10/22/2020	PATIENT REFUND	19.25	Patient Refund
174559	10/22/2020	PATIENT REFUND	276.00	Patient Refund
174575	10/22/2020	PATIENT REFUND	72.60	Patient Refund
174576	10/22/2020	PATIENT REFUND	90.00	Patient Refund
174577	10/22/2020	PATIENT REFUND	30.00	Patient Refund
174579	10/22/2020	PATIENT REFUND	276.00	Patient Refund
174578	10/22/2020	PATIENT REFUND	40.00	Patient Refund
174580	10/22/2020	PATIENT REFUND	39.05	Patient Refund
174405	10/22/2020	PATIENT REFUND	450.05	Patient Refund
174581	10/22/2020	PATIENT REFUND	30.00	Patient Refund
174582	10/22/2020	PATIENT REFUND	109.00	Patient Refund
174583	10/22/2020	PATIENT REFUND	35.00	Patient Refund
174584	10/22/2020	PATIENT REFUND	84.00	Patient Refund
174587	10/22/2020	PATIENT REFUND	36.40	Patient Refund
174586	10/22/2020	PATIENT REFUND	45.00	Patient Refund
174585	10/22/2020	PATIENT REFUND	40.00	Patient Refund
174406	10/22/2020	PATIENT REFUND	182.00	Patient Refund
174588	10/22/2020	PATIENT REFUND	35.00	Patient Refund
174589	10/22/2020	PATIENT REFUND	35.00	Patient Refund
174590	10/22/2020	PATIENT REFUND	20.00	Patient Refund
174591	10/22/2020	PATIENT REFUND	20.00	Patient Refund
174592	10/22/2020	PATIENT REFUND	182.00	Patient Refund
174593	10/22/2020	PATIENT REFUND	25.00	Patient Refund
174594	10/22/2020	PATIENT REFUND	40.00	Patient Refund
174595	10/22/2020	PATIENT REFUND	30.00	Patient Refund
174596	10/22/2020	PATIENT REFUND	270.60	Patient Refund
174597	10/22/2020	PATIENT REFUND	17.82	Patient Refund
174598	10/22/2020	PATIENT REFUND	100.00	Patient Refund
174599	10/22/2020	PATIENT REFUND	36.00	Patient Refund
174600	10/22/2020	PATIENT REFUND	90.00	Patient Refund
174601	10/22/2020	PATIENT REFUND	208.95	Patient Refund
174602	10/22/2020	PATIENT REFUND	90.00	Patient Refund
174603	10/22/2020	PATIENT REFUND	25.00	Patient Refund
174604	10/22/2020	PATIENT REFUND	196.40	Patient Refund
174606	10/22/2020	PATIENT REFUND	25.00	Patient Refund
174411	10/22/2020	PATIENT REFUND	265.00	Patient Refund
174607	10/22/2020	PATIENT REFUND	40.00	Patient Refund
174608	10/22/2020	PATIENT REFUND	40.00	Patient Refund
174609	10/22/2020	PATIENT REFUND	25.00	Patient Refund
174610	10/22/2020	PATIENT REFUND	25.00	Patient Refund
174611	10/22/2020	PATIENT REFUND	110.00	Patient Refund
174612	10/22/2020	PATIENT REFUND	25.00	Patient Refund
174614	10/22/2020	PATIENT REFUND	9.60	Patient Refund
174613	10/22/2020	PATIENT REFUND	8.76	Patient Refund
174414	10/22/2020	PATIENT REFUND	88.00	Patient Refund
174415	10/22/2020	PATIENT REFUND	70.40	Patient Refund
174615	10/22/2020	PATIENT REFUND	50.00	Patient Refund
174417	10/22/2020	PATIENT REFUND	70.40	Patient Refund

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174616	10/22/2020	PATIENT REFUND	20.00	Patient Refund
174617	10/22/2020	PATIENT REFUND	38.60	Patient Refund
174618	10/22/2020	PATIENT REFUND	5.00	Patient Refund
174620	10/22/2020	PATIENT REFUND	91.64	Patient Refund
174619	10/22/2020	PATIENT REFUND	32.28	Patient Refund
174621	10/22/2020	PATIENT REFUND	22.71	Patient Refund
174623	10/22/2020	PATIENT REFUND	20.00	Patient Refund
174622	10/22/2020	PATIENT REFUND	87.00	Patient Refund
174624	10/22/2020	PATIENT REFUND	76.35	Patient Refund
174625	10/22/2020	PATIENT REFUND	15.00	Patient Refund
174626	10/22/2020	PATIENT REFUND	175.00	Patient Refund
174627	10/22/2020	PATIENT REFUND	25.00	Patient Refund
174629	10/22/2020	PATIENT REFUND	15.00	Patient Refund
174628	10/22/2020	PATIENT REFUND	35.00	Patient Refund
174630	10/22/2020	PATIENT REFUND	353.60	Patient Refund
174635	10/22/2020	PATIENT REFUND	25.00	Patient Refund
174631	10/22/2020	PATIENT REFUND	10.00	Patient Refund
174632	10/22/2020	PATIENT REFUND	145.60	Patient Refund
174633	10/22/2020	PATIENT REFUND	56.00	Patient Refund
174634	10/22/2020	PATIENT REFUND	14.80	Patient Refund
174636	10/22/2020	PATIENT REFUND	60.00	Patient Refund
174637	10/22/2020	PATIENT REFUND	10.00	Patient Refund
174639	10/22/2020	PATIENT REFUND	20.00	Patient Refund
174638	10/22/2020	PATIENT REFUND	100.00	Patient Refund
174641	10/22/2020	PATIENT REFUND	11.00	Patient Refund
174640	10/22/2020	PATIENT REFUND	107.25	Patient Refund
174642	10/22/2020	PATIENT REFUND	45.00	Patient Refund
174643	10/22/2020	PATIENT REFUND	30.00	Patient Refund
174644	10/22/2020	PATIENT REFUND	124.00	Patient Refund
174645	10/22/2020	PATIENT REFUND	40.00	Patient Refund
174646	10/22/2020	PATIENT REFUND	116.64	Patient Refund
174647	10/22/2020	PATIENT REFUND	81.20	Patient Refund
174648	10/22/2020	PATIENT REFUND	156.04	Patient Refund
174649	10/22/2020	PATIENT REFUND	40.00	Patient Refund
174650	10/22/2020	PATIENT REFUND	20.00	Patient Refund
174651	10/22/2020	PATIENT REFUND	24.70	Patient Refund
174652	10/22/2020	PATIENT REFUND	350.00	Patient Refund
174655	10/22/2020	PATIENT REFUND	13.99	Patient Refund
174654	10/22/2020	PATIENT REFUND	214.00	Patient Refund
174653	10/22/2020	PATIENT REFUND	35.00	Patient Refund
174656	10/22/2020	PATIENT REFUND	35.00	Patient Refund
174657	10/22/2020	PATIENT REFUND	30.00	Patient Refund
174658	10/22/2020	PATIENT REFUND	119.00	Patient Refund
174659	10/22/2020	PATIENT REFUND	30.00	Patient Refund
174660	10/22/2020	PATIENT REFUND	45.00	Patient Refund
174662	10/22/2020	PATIENT REFUND	5.00	Patient Refund
174661	10/22/2020	PATIENT REFUND	273.01	Patient Refund
174663	10/22/2020	PATIENT REFUND	20.00	Patient Refund
174665	10/22/2020	PATIENT REFUND	50.00	Patient Refund

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174664	10/22/2020	PATIENT REFUND	84.00	Patient Refund
174666	10/22/2020	PATIENT REFUND	75.00	Patient Refund
174667	10/22/2020	PATIENT REFUND	25.00	Patient Refund
174668	10/22/2020	PATIENT REFUND	240.00	Patient Refund
174669	10/22/2020	PATIENT REFUND	30.00	Patient Refund
174670	10/22/2020	PATIENT REFUND	70.00	Patient Refund
174424	10/22/2020	PATIENT REFUND	70.40	Patient Refund
174671	10/22/2020	PATIENT REFUND	30.00	Patient Refund
174672	10/22/2020	PATIENT REFUND	30.00	Patient Refund
174673	10/22/2020	PATIENT REFUND	135.00	Patient Refund
174428	10/22/2020	PATIENT REFUND	62.68	Patient Refund
174674	10/22/2020	PATIENT REFUND	30.00	Patient Refund
174676	10/22/2020	PATIENT REFUND	20.03	Patient Refund
174675	10/22/2020	PATIENT REFUND	30.00	Patient Refund
174679	10/22/2020	PATIENT REFUND	57.57	Patient Refund
174678	10/22/2020	PATIENT REFUND	24.80	Patient Refund
174677	10/22/2020	PATIENT REFUND	15.00	Patient Refund
174680	10/22/2020	PATIENT REFUND	25.00	Patient Refund
174681	10/22/2020	PATIENT REFUND	65.00	Patient Refund
174682	10/22/2020	PATIENT REFUND	8.56	Patient Refund
174683	10/22/2020	PATIENT REFUND	30.00	Patient Refund
174684	10/22/2020	PATIENT REFUND	90.00	Patient Refund
174685	10/22/2020	PATIENT REFUND	200.00	Patient Refund
174686	10/22/2020	PATIENT REFUND	25.00	Patient Refund
174687	10/22/2020	PATIENT REFUND	25.00	Patient Refund
174689	10/22/2020	PATIENT REFUND	85.00	Patient Refund
174688	10/22/2020	PATIENT REFUND	30.00	Patient Refund
174690	10/22/2020	PATIENT REFUND	20.00	Patient Refund
174691	10/22/2020	PATIENT REFUND	92.00	Patient Refund
174692	10/22/2020	PATIENT REFUND	6.00	Patient Refund
174693	10/22/2020	PATIENT REFUND	14.20	Patient Refund
174694	10/22/2020	PATIENT REFUND	20.00	Patient Refund
174695	10/22/2020	PATIENT REFUND	35.00	Patient Refund
174696	10/22/2020	PATIENT REFUND	200.36	Patient Refund
174697	10/22/2020	PATIENT REFUND	78.44	Patient Refund
174698	10/22/2020	PATIENT REFUND	5.40	Patient Refund
174699	10/22/2020	PATIENT REFUND	20.00	Patient Refund
174437	10/22/2020	PATIENT REFUND	70.40	Patient Refund
174438	10/22/2020	PATIENT REFUND	70.40	Patient Refund
174439	10/22/2020	PATIENT REFUND	70.40	Patient Refund
174700	10/22/2020	PATIENT REFUND	349.00	Patient Refund
174441	10/22/2020	PATIENT REFUND	73.72	Patient Refund
174443	10/22/2020	PATIENT REFUND	70.40	Patient Refund
174844	10/30/2020	PATIENT REFUND	45.00	Patient Refund
174845	10/30/2020	PATIENT REFUND	25.00	Patient Refund
174846	10/30/2020	PATIENT REFUND	25.00	Patient Refund
174847	10/30/2020	PATIENT REFUND	36.83	Patient Refund
174848	10/30/2020	PATIENT REFUND	50.00	Patient Refund
174850	10/30/2020	PATIENT REFUND	100.00	Patient Refund

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
GENERAL FUND DISBURSEMENTS
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174849	10/30/2020	PATIENT REFUND	60.00	Patient Refund
174851	10/30/2020	PATIENT REFUND	25.00	Patient Refund
174852	10/30/2020	PATIENT REFUND	25.00	Patient Refund
174853	10/30/2020	PATIENT REFUND	25.00	Patient Refund
174854	10/30/2020	PATIENT REFUND	35.00	Patient Refund
174855	10/30/2020	PATIENT REFUND	5.00	Patient Refund
174856	10/30/2020	PATIENT REFUND	75.00	Patient Refund
174858	10/30/2020	PATIENT REFUND	60.00	Patient Refund
174857	10/30/2020	PATIENT REFUND	11.32	Patient Refund
174859	10/30/2020	PATIENT REFUND	30.00	Patient Refund
174860	10/30/2020	PATIENT REFUND	25.00	Patient Refund
174861	10/30/2020	PATIENT REFUND	35.00	Patient Refund
174862	10/30/2020	PATIENT REFUND	125.00	Patient Refund
174863	10/30/2020	PATIENT REFUND	35.67	Patient Refund
174864	10/30/2020	PATIENT REFUND	85.00	Patient Refund
174865	10/30/2020	PATIENT REFUND	35.00	Patient Refund
174866	10/30/2020	PATIENT REFUND	25.00	Patient Refund
174867	10/30/2020	PATIENT REFUND	35.00	Patient Refund
174868	10/30/2020	PATIENT REFUND	99.20	Patient Refund
174869	10/30/2020	PATIENT REFUND	90.00	Patient Refund
174870	10/30/2020	PATIENT REFUND	25.00	Patient Refund
174871	10/30/2020	PATIENT REFUND	54.23	Patient Refund
174872	10/30/2020	PATIENT REFUND	50.00	Patient Refund
174873	10/30/2020	PATIENT REFUND	20.00	Patient Refund
174874	10/30/2020	PATIENT REFUND	20.00	Patient Refund
174876	10/30/2020	PATIENT REFUND	25.45	Patient Refund
174875	10/30/2020	PATIENT REFUND	69.00	Patient Refund
174877	10/30/2020	PATIENT REFUND	10.00	Patient Refund
174878	10/30/2020	PATIENT REFUND	40.00	Patient Refund
174879	10/30/2020	PATIENT REFUND	135.90	Patient Refund
174880	10/30/2020	PATIENT REFUND	52.90	Patient Refund
174881	10/30/2020	PATIENT REFUND	35.00	Patient Refund
174882	10/30/2020	PATIENT REFUND	71.00	Patient Refund
174883	10/30/2020	PATIENT REFUND	145.60	Patient Refund
174884	10/30/2020	PATIENT REFUND	337.00	Patient Refund
174885	10/30/2020	PATIENT REFUND	360.00	Patient Refund
174885	10/30/2020	PATIENT REFUND	20.00	Patient Refund
174887	10/30/2020	PATIENT REFUND	25.00	Patient Refund
174888	10/30/2020	PATIENT REFUND	15.00	Patient Refund
174889	10/30/2020	PATIENT REFUND	144.00	Patient Refund
174890	10/30/2020	PATIENT REFUND	20.00	Patient Refund
174892	10/30/2020	PATIENT REFUND	5.20	Patient Refund
174891	10/30/2020	PATIENT REFUND	50.00	Patient Refund
174893	10/30/2020	PATIENT REFUND	145.80	Patient Refund
174894	10/30/2020	PATIENT REFUND	15.00	Patient Refund
174896	10/30/2020	PATIENT REFUND	100.00	Patient Refund
174895	10/30/2020	PATIENT REFUND	20.00	Patient Refund
174897	10/30/2020	PATIENT REFUND	58.00	Patient Refund
174898	10/30/2020	PATIENT REFUND	45.00	Patient Refund

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
GENERAL FUND DISBURSEMENTS

10/31/20

174899	10/30/2020	PATIENT REFUND	30.00	Patient Refund
174900	10/30/2020	PATIENT REFUND	20.00	Patient Refund
174901	10/30/2020	PATIENT REFUND	5.00	Patient Refund
174902	10/30/2020	PATIENT REFUND	100.00	Patient Refund
174904	10/30/2020	PATIENT REFUND	30.00	Patient Refund
174906	10/30/2020	PATIENT REFUND	194.00	Patient Refund
174905	10/30/2020	PATIENT REFUND	20.00	Patient Refund
174907	10/30/2020	PATIENT REFUND	30.00	Patient Refund
174908	10/30/2020	PATIENT REFUND	24.00	Patient Refund
174910	10/30/2020	PATIENT REFUND	15.00	Patient Refund
174912	10/30/2020	PATIENT REFUND	35.00	Patient Refund
174909	10/30/2020	PATIENT REFUND	30.00	Patient Refund
174911	10/30/2020	PATIENT REFUND	320.00	Patient Refund
174913	10/30/2020	PATIENT REFUND	20.00	Patient Refund
174914	10/30/2020	PATIENT REFUND	273.90	Patient Refund
174916	10/30/2020	PATIENT REFUND	10.00	Patient Refund
174915	10/30/2020	PATIENT REFUND	35.00	Patient Refund
174917	10/30/2020	PATIENT REFUND	30.00	Patient Refund
174918	10/30/2020	PATIENT REFUND	30.00	Patient Refund
174919	10/30/2020	PATIENT REFUND	7.00	Patient Refund
174920	10/30/2020	PATIENT REFUND	10.00	Patient Refund
174921	10/30/2020	PATIENT REFUND	30.00	Patient Refund
174922	10/30/2020	PATIENT REFUND	30.00	Patient Refund
174923	10/30/2020	PATIENT REFUND	35.00	Patient Refund
174924	10/30/2020	PATIENT REFUND	20.00	Patient Refund
174925	10/30/2020	PATIENT REFUND	90.00	Patient Refund
174926	10/30/2020	PATIENT REFUND	70.44	Patient Refund
174927	10/30/2020	PATIENT REFUND	84.98	Patient Refund
174928	10/30/2020	PATIENT REFUND	9.66	Patient Refund
174929	10/30/2020	PATIENT REFUND	30.00	Patient Refund
174930	10/30/2020	PATIENT REFUND	90.00	Patient Refund
174719	10/27/2020	UNITED WAY OF SWEETWATER COUNTY	311.22	Payroll Deduction
174304	10/12/2020	CIRCUIT COURT 3RD JUDICIAL-GR	321.64	Payroll Garnishment
174307	10/12/2020	SWEETWATER CIRCUIT COURT-RS	813.42	Payroll Garnishment
174715	10/27/2020	FAMILY SUPPORT REGISTRY	403.84	Payroll Garnishment
174716	10/27/2020	STATE OF WYOMING DFS/CSES	2,667.49	Payroll Garnishment
174713	10/27/2020	CIRCUIT COURT 3RD JUDICIAL-GR	489.50	Payroll Garnishment
174714	10/27/2020	DAVID G. PEAKE	3,484.62	Payroll Garnishment
174712	10/26/2020	SWEETWATER CIRCUIT COURT-RS	610.28	Payroll Garnishment
174717	10/27/2020	SWEETWATER CIRCUIT COURT-RS	215.66	Payroll Garnishment
174817	10/30/2020	SWEETWATER CIRCUIT COURT-RS	45.12	Payroll Garnishment
174718	10/27/2020	TREASURER STATE OF MAINE	172.00	Payroll Garnishment
W/T	10/12/2020	PAYROLL 21	1,400,000.00	Payroll Transfer
W/T	10/27/2020	PAYROLL 22	1,400,000.00	Payroll Transfer
174357	10/14/2020	MHSC - PETTY CASH	15.10	Petty Cash
174510	10/22/2020	MHSC - PETTY CASH	295.00	Petty Cash
174794	10/30/2020	MHSC - PETTY CASH	200.00	Petty Cash
174325	10/14/2020	CARDINAL HEALTH PHARMACY MGMT	913,717.00	Pharmacy Management
174174	10/1/2020	DR. VIRGINIA BURDINE	625.62	Physician Recruitment

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
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174710	10/23/2020	THE PRESERVE AT ROCK SPRINGS	1,349.00	Physician Recruitment
174768	10/30/2020	HOLIDAY INN EXPRESS - LONE TREE HOSPITALITY, LLC	239.98	Physician Recruitment
174399	10/20/2020	DR. JONATHAN BENNETT	1,379.59	Physician Recruitment
174126	10/1/2020	LOCUM TENENS.COM	37,273.00	Physician Services
174120	10/1/2020	JOHN A. LIYA, M.D.	18,500.00	Physician Services
174189	10/12/2020	ADVANCED MEDICAL IMAGING, LLC	17,796.50	Physician Services
174541	10/22/2020	THE SLEEP SPECIALISTS	10,250.00	Physician Services
174785	10/30/2020	LOCUM TENENS.COM	63,441.46	Physician Services
174830	10/30/2020	UNIVERSITY OF UTAH HEALTH CARE	92,998.46	Physician Services
174775	10/30/2020	JHHR MEDICAL ASSOCIATES	3,629.12	Physician Services
174187	10/6/2020	NAVIENT	39.09	Physician Student Loan
174389	10/14/2020	US DEPARTMENT OF EDUCATION	168.45	Physician Student Loan
174702	10/23/2020	DEPARTMENT OF EDUCATION	2,500.00	Physician Student Loan
174703	10/23/2020	DISCOVER STUDENT LOANS	1,039.28	Physician Student Loan
174704	10/23/2020	DRB EDUCATION FINANCE	39,709.66	Physician Student Loan
174705	10/23/2020	FEDLOAN SERVICING	20,625.00	Physician Student Loan
174706	10/23/2020	GREAT LAKES	1,666.67	Physician Student Loan
174709	10/23/2020	NAVIENT	2,294.06	Physician Student Loan
174711	10/23/2020	US DEPARTMENT OF EDUCATION	2,500.00	Physician Student Loan
174700	10/23/2020	DR. JACQUES DIENKER	6,486.33	Physician Student Loan
174827	10/30/2020	UMIA INSURANCE, INC.	158,670.00	Professional Liability Insurance
174088	10/1/2020	CLEANIQUE PROFESSIONAL SERVICES	3,955.00	Professional Service
174124	10/1/2020	CLIFTON LARSON ALLEN LLP	13,794.20	Professional Service
174173	10/1/2020	VERISYS INC.	24.00	Professional Service
174137	10/1/2020	MOUNTAIN STATES MEDICAL PHYSICS	7,237.15	Professional Service
174239	10/12/2020	KEITH WILLIAMS & ASSOCIATES, INC.	3,000.00	Professional Service
174248	10/12/2020	MILE HIGH MOBILE PET	8,920.00	Professional Service
174251	10/12/2020	P3 CONSULTING LLC	437.50	Professional Service
174354	10/14/2020	MEDICAL PHYSICS CONSULTANTS, INC	2,250.00	Professional Service
174555	10/22/2020	WYOMING DEPARTMENT OF HEALTH	184.00	Professional Service
174758	10/30/2020	CE BROKER	316.74	Professional Service
174742	10/30/2020	CLEANIQUE PROFESSIONAL SERVICES	3,350.00	Professional Service
174833	10/30/2020	VERISYS INC.	32.00	Professional Service
EFT000000006203	10/1/2020	WESTERN STAR COMMUNICATIONS	1,565.50	Professional Service
EFT000000006209	10/12/2020	LANDAUER INC	173.30	Radiation Monitoring
174246	10/12/2020	MERRY X-RAY	280.40	Radiology Film
174509	10/22/2020	MERRY X-RAY	602.69	Radiology Film
174082	10/1/2020	BRACCO DIAGNOSTICS INC	246.26	Radiology Material
174123	10/1/2020	LANTHEUS MEDICAL IMAGING, INC	3,463.33	Radiology Material
174204	10/12/2020	BRACCO DIAGNOSTICS INC	369.39	Radiology Material
174241	10/12/2020	LANTHEUS MEDICAL IMAGING, INC	3,463.33	Radiology Material
174350	10/14/2020	LANTHEUS MEDICAL IMAGING, INC	3,463.33	Radiology Material
174498	10/22/2020	INTERMOUNTAIN RADIOPHARMACY - UNIVERSITY OF UTAH	1,055.00	Radiology Material
174501	10/22/2020	LANTHEUS MEDICAL IMAGING, INC	4,533.19	Radiology Material
174736	10/30/2020	BRACCO DIAGNOSTICS INC	1,707.64	Radiology Material
174782	10/30/2020	LANTHEUS MEDICAL IMAGING, INC	3,463.33	Radiology Material
174749	10/30/2020	CURIUM US LLC	381.74	Radiology Material
EFT000000006207	10/12/2020	GE HEALTHCARE INC	1,036.60	Radiology Material
EFT000000006229	10/14/2020	GE HEALTHCARE INC	109.50	Radiology Material

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GENERAL FUND DISBURSEMENTS
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EFT000000006232	10/14/2020	PHARMALUCENCE, INC	348.00	Radiology Material
EFT000000006229	10/14/2020	GE HEALTHCARE INC	109.50	Radiology Material
EFT000000006232	10/14/2020	PHARMALUCENCE, INC	348.00	Radiology Material
EFT000000006247	10/22/2020	GE HEALTHCARE INC	267.32	Radiology Material
EFT000000006268	10/30/2020	GE HEALTHCARE INC	934.69	Radiology Material
174134	10/1/2020	DR. MICHAEL BOWERS	632.77	Reimbursement - CME
174073	10/1/2020	DR. BANU SYMINGTON	400.00	Reimbursement - CME
174077	10/1/2020	DR. BENJAMIN JENSEN	240.00	Reimbursement - CME
174117	10/1/2020	DR. JANENE GLYN	1,980.93	Reimbursement - CME
174118	10/1/2020	DR. JEFFREY WHEELER	1,265.00	Reimbursement - CME
174127	10/1/2020	DR. LUCY RYAN	600.00	Reimbursement - CME
174180	10/1/2020	DR. WILLIAM SARETTE	525.00	Reimbursement - CME
174113	10/1/2020	ISRAEL STEWART, DO	437.50	Reimbursement - CME
174119	10/1/2020	JOCELYN PALINEK	25.00	Reimbursement - CME
174166	10/1/2020	TENNY HANSON	598.44	Reimbursement - CME
174807	10/30/2020	DR. SAMER KATTAN	240.00	Reimbursement - CME
174750	10/30/2020	DR. DAVID DANSE	400.00	Reimbursement - CME
174774	10/30/2020	ISRAEL STEWART, DO	511.50	Reimbursement - CME
174777	10/30/2020	JOCELYN PALINEK	447.00	Reimbursement - CME
174820	10/30/2020	TAMARA WALKER, FNP	3,465.00	Reimbursement - CME
174931	10/30/2020	TENNY HANSON	539.97	Reimbursement - CME
174122	10/1/2020	DR. JONATHAN SCHWARTZ	2,385.01	Reimbursement - Education & Travel
174135	10/1/2020	DR. MICHAEL NEYMAN	1,584.19	Reimbursement - Education & Travel
174092	10/1/2020	DALE BRILL	1,275.90	Reimbursement - Education & Travel
174107	10/1/2020	GINA ELKINS	73.44	Reimbursement - Education & Travel
174209	10/12/2020	CHRISTIAN RODDA	72.42	Reimbursement - Education & Travel
174277	10/12/2020	TAMMIE HENDERSON	89.25	Reimbursement - Education & Travel
174279	10/12/2020	TINA FRULLO	27.54	Reimbursement - Education & Travel
174323	10/14/2020	DR. BRYTTON LONG	392.70	Reimbursement - Education & Travel
174349	10/14/2020	DR. JONATHAN SCHWARTZ	1,367.81	Reimbursement - Education & Travel
174466	10/22/2020	CAROL J. MACKIE	53.95	Reimbursement - Education & Travel
174520	10/22/2020	PHILLIP FLAKE	110.16	Reimbursement - Education & Travel
174529	10/22/2020	BOB FAIR	327.42	Reimbursement - Education & Travel
174741	10/30/2020	CINDY NELSON	49.99	Reimbursement - Education & Travel
174776	10/30/2020	DR. JANENE GLYN	973.09	Reimbursement - Education & Travel
174778	10/30/2020	DR. JONATHAN SCHWARTZ	1,973.68	Reimbursement - Education & Travel
174795	10/30/2020	DR. MICHAEL NEYMAN	1,039.16	Reimbursement - Education & Travel
174796	10/30/2020	DR. MICHELLE IVerson	473.12	Reimbursement - Education & Travel
174802	10/30/2020	DR. PRACHI PAWAR	1,160.00	Reimbursement - Education & Travel
174781	10/30/2020	KELLY SUGIHARA	1,392.75	Reimbursement - Education & Travel
174453	10/22/2020	AMY MAGANA	27.70	Reimbursement - Food
174094	10/1/2020	DEVIN TAUCHER	33.42	Reimbursement - Insurance Premiums
174116	10/1/2020	JANAE GALE	83.50	Reimbursement - Insurance Premiums
174130	10/1/2020	MELINDA DIERCKS	277.74	Reimbursement - Insurance Premiums
174779	10/30/2020	JOSEPH J. OLIVER, M.D.	845.33	Reimbursement - Insurance Premiums
174184	10/2/2020	NOREEN HOVE	1,624.00	Reimbursement - Memberships
174185	10/2/2020	TIFFANY MARSHALL	177.50	Reimbursement - Non Hospital Supplies
174784	10/30/2020	LISA COOK	250.74	Reimbursement - Payroll Correction
174836	10/30/2020	WILLIAM MULLEN	123.45	Reimbursement - Payroll Correction

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174786	10/30/2020	MARIANNE SANDERS	28.97	Reimbursement - Physician Recruitment
174069	10/1/2020	ALVARO HERNANDEZ	150.00	Reimbursement - Uniforms
174139	10/1/2020	NEIL LEWIS	76.65	Reimbursement - Uniforms
174161	10/1/2020	STEVEN SKORCZ, JR	324.00	Reimbursement - Uniforms
W/T	10/9/2020	ABG 10/1/20	144,343.42	Retirement
W/T	10/27/2020	ABG 10/15/20	147,170.14	Retirement
174158	10/1/2020	STATE OF WYO.DEPT.OF REVENUE	185.00	Sales Tax Payment
174265	10/12/2020	STATE OF WYO.DEPT.OF REVENUE	785.05	Sales Tax Payment
174133	10/1/2020	MHSC MEDICAL STAFF	200.00	Scholarship
174793	10/30/2020	MHSC MEDICAL STAFF	100.00	Scholarship
174202	10/12/2020	BOOKCLIFF SALES INC	3,715.75	Scrub Sale deductions
174734	10/30/2020	BOOKCLIFF SALES INC	311.80	Scrub Sale deductions
174081	10/1/2020	BOYS & GIRLS CLUB OF SWEETWATER COUNTY	1,000.00	Sponsorship
174146	10/1/2020	PMS SCREEN PRINTING	480.00	Sponsorship
174151	10/1/2020	ROCK SPRINGS RENEWAL FUND	1,200.00	Sponsorship
174147	10/1/2020	PRONGHORN POWER BOOSTER CLUB	1,000.00	Sponsorship
174254	10/12/2020	PMS SCREEN PRINTING	3,920.00	Sponsorship
174358	10/14/2020	MOBILE INSTRUMENT SERVICE	235.00	Surgery Equipment
174511	10/22/2020	MOBILE INSTRUMENT SERVICE	1,063.60	Surgery Equipment
174091	10/1/2020	CR BARD INC	582.60	Surgery Supplies
174262	10/12/2020	SMITH & NEPHEW ENDOSCOPY INC	1,716.00	Surgery Supplies
174269	10/12/2020	STRYKER ENDOSCOPY	2,109.17	Surgery Supplies
174290	10/12/2020	ZIMMER	10,221.00	Surgery Supplies
174291	10/12/2020	ZIMMER BIOMET	1,402.95	Surgery Supplies
174270	10/12/2020	STRYKER ORTHOPAEDICS	1,250.00	Surgery Supplies
174315	10/14/2020	ALI MED INC	185.86	Surgery Supplies
174334	10/14/2020	COVIDIEN SALES LLC, DBA GIVEN IMAGING	212.00	Surgery Supplies
174449	10/22/2020	ALI MED INC	229.42	Surgery Supplies
174557	10/22/2020	ZIMMER BIOMET	28,824.05	Surgery Supplies
174723	10/30/2020	ALI MED INC	1,018.99	Surgery Supplies
174772	10/30/2020	INTEGRA SURGICAL	808.00	Surgery Supplies
174815	10/30/2020	STRYKER ENDOSCOPY	1,799.76	Surgery Supplies
174843	10/30/2020	ZIMMER BIOMET	8,763.85	Surgery Supplies
EFT00000006193	10/1/2020	COOPER SURGICAL	451.17	Surgery Supplies
EFT00000006228	10/14/2020	COOPER SURGICAL	646.38	Surgery Supplies
EFT00000006228	10/14/2020	COOPER SURGICAL	646.38	Surgery Supplies
EFT00000006267	10/30/2020	COOPER SURGICAL	64.20	Surgery Supplies
174523	10/22/2020	PRESS GANEY ASSOCIATES, INC	2,080.01	Survey Expenses
174208	10/12/2020	CSG,LLC	1,405.88	Transcription Services
174548	10/22/2020	UTAH STATE TREASURER UNCLAIMED PROPERTY DIVISION	3.04	Unclaimed Property
174148	10/1/2020	QUARTERMASTER	351.96	Uniforms
174288	10/12/2020	WYOMING WORK WAREHOUSE	390.55	Uniforms
174195	10/12/2020	AT&T	257.51	Utilities
174257	10/12/2020	CENTURY LINK	1,278.03	Utilities
174256	10/12/2020	DOMINION ENERGY WYOMING	18,136.30	Utilities
174306	10/12/2020	ROCK SPRINGS MUNICIPAL UTILITY	15,321.01	Utilities
174287	10/12/2020	WHITE MOUNTAIN WATER & SEWER DISTRICT	57.50	Utilities
174191	10/12/2020	ALL WEST COMMUNICATIONS	4,162.13	Utilities
174318	10/14/2020	AT&T	111.03	Utilities

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
GENERAL FUND DISBURSEMENTS
10/31/20

174372	10/14/2020	ROCKY MOUNTAIN POWER	40,468.73	Utilities
174525	10/22/2020	CENTURY LINK	3,050.46	Utilities
174480	10/22/2020	DISH NETWORK LLC	70.49	Utilities
174553	10/22/2020	WHITE MOUNTAIN WATER & SEWER DISTRICT	57.50	Utilities
174756	10/30/2020	ENVIRO CARE INC.	5,253.40	Utilities
174268	10/12/2020	STERICYCLE, INC.	1,011.97	Waste Disposal
174101	10/1/2020	FIBERTECH	3,342.00	Window Cleaning
174222	10/12/2020	FIBERTECH	1,846.00	Window Cleaning
W/T	10/13/2020	WORKER'S COMP QTR 3	60,576.83	Workman's Comp
			8,493,649.22	

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

Vouchers Submitted by MHSC at agreed discounted rate		
July 2020		\$0.00
August 2020		\$0.00
September 2020		\$120,210.45
October 2020		\$0.00
County Requested Total Vouchers Submitted	<u>\$120,210.45</u>	
Total Vouchers Submitted FY 21		\$120,210.45
Less: Total Approved by County and Received by MHSC FY 21		\$120,210.45
Total Vouchers Pending Approval by County		<u><u>\$0.00</u></u>

FY21 Title 25 Fund Budget from Sweetwater County	\$262,548.00
Funds Received From Sweetwater County	<u>\$120,210.45</u>
FY20 Title 25 Fund Budget Remaining	\$142,337.55
Total Budgeted Vouchers Pending Submittal to County	<u><u>\$0.00</u></u>

FY21 Maintenance Fund Budget from Sweetwater County	\$2,150,456.00
County Maintenance FY21- July	\$71,821.34
County Maintenance FY21- August	\$14,923.47
County Maintenance FY21-September	\$93,540.23
County Maintenance FY21- October	\$21,472.98
	<u>\$201,758.02</u>
FY21 Maintenance Fund Budget Remaining	<u><u>\$1,948,697.98</u></u>

MEMORANDUM

To: Board of Trustees
From: Wm. Marty Kelsey
Subject: Chair's Report...November Buildings and Grounds Meeting
Date: November 30, 2020

Regarding the Central Plant project. This project was scheduled to be completed in June. It is now estimated the project is approximately 95% completed. Approximately \$460,000 is being withheld at this time. Jake mentioned that the Hospital may have to keep these funds and retain another contractor to do the work. I cautioned that legal counsel needs to be involved if we go down that road. I asked that the bonding company be notified to put more pressure on the contractor to finish the job. The six month delay is unacceptable.

Regarding the HVAC project, one small pay application has been submitted. A "very heavy billing" is expected by December 15th. Discussion occurred about the completion of work deadline as it pertains to reimbursement under the rules. Ms. Love reported on updated guidance. Jake believes that the \$2.8 million of the project will be completed by December 30 with the remaining \$1.4 million to be completed by June 30th. Regarding the medical imaging area, it was reported that everything got moved out. Will is planning to work with Grothouse on this matter. Several issues to need to be addressed.

Regarding the laboratory project, there was considerable discussion about whether or not CARES funds can actually be used for this project. Some sentiment was expressed that we are not sure. I asked Irene to get with her staff to try to get the best answer as possible. We do not want to be "on the hook" for paying for this project if CARES funds are not available. (UPDATE: See Irene's subsequent e-mail, dated November 22nd, on this subject.) Design work, however, is continuing.

Regarding the Pharmacy Chemo Mixing Room...Jake and Will are planning to get together after the first of the year to design a new space for this.

Regarding the Pharmacy Compounding Room, we are still waiting on doors. Regarding the outside drainage by the Emergency Department, the work has been completed.

Discussion ensued about some renovation requested by Dr. Sulentic. Cost might be in the area of \$120,000. Once details are ironed out, this could come to the Board after the first of the year. Staff recommends the Hospital pay half the cost.

Discussion ensued about a retaining wall issue at the Waldner House. This required more study and might come before the Board this coming spring.

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
Building and Grounds Committee Meeting
November 17, 2020

The Building and Grounds Committee met in regular session via Zoom on November 17, 2020, at 3:30 PM with Mr. Marty Kelsey presiding.

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

Mr. Kelsey called the meeting to order.

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

Dr. Sowada made a motion to approve the minutes from the October 20, 2020 meeting, Ms. Richardson seconded; motion passed.

Maintenance Metrics

Mr. Horan presented the maintenance metrics. He said they have been remarkably consistent and there is nothing out of the ordinary. Overtime is expected to increase with the arrival of the winter months.

Old Business – Project Review

Central Plant Expansion

Mr. Blevins said we have received the preliminary punch list and they are ramping up for closure. We are holding the balance of the retention plus the most recent pay application for a total of about \$460,000. Mr. Blevins will add a schedule of values to the unfinished punch list and one option is to withhold these funds and complete ourselves. Mr. Kelsey asked how much of the punch list is complete and Mr. Blevins responded less than 20-30% is complete at this time. Mr. Kelsey asked if we have considered his request to contact the bonding company of the contractor. Mr. Blevins and Ms. Richardson have not moved forward with contacting the bonding company at this time. Mr. Kelsey strongly advised we call the bonding company as this is unacceptable. Mr. Blevins said he would assist the hospital in this process. Mr. Kelsey would like a report prior to the Board meeting regarding our conversation with the bonding company and asked we talk to our legal counsel.

SLIB/CARES Act Projects

HVAC & UVC – Mr. Blevins provided an update and said Groathouse has mobilized and is ready to set the steel on the roof. We have received their first pay application. Steel will be delivered next week and the air handler will be shipped the beginning of December. The Medical Imaging staff has been fully relocated for the project. Infection control barriers are going up this week. We do need to make a final decision on the scope of the Medical Imaging remodel. We would like to talk to Groathouse about continuing with that project. He gave Groathouse a courtesy heads up of the possibility of the new project and that the ceiling and lighting scope may change. Mr. Kelsey asked about the SLIB due dates. Ms. Love explained we have received new guidance from SLIB. Grant reimbursement requests must be received by SLIB by December 15. If there is still work that will be done between December 15 – 30, then an estimate of services can be requested by December 15 and we will have until January 30, 2021 to submit actual invoices and documentation for any work completed by December 30. Mr. Blevins said the pay application from Groathouse was less than \$200,000 and he will work with them to make sure the next pay application includes as much of the completed project as possible. Mr. Kelsey asked for Mr. Blevins' sense of how much of the project will be completed by December 30. Mr. Blevins feels the project is on schedule for the initial timeline of \$2.8 million by the end of the year with the remaining \$1.4 million to be completed by June 30. He added he is very pleased with the choice of Groathouse for the CMAR.

Medical Imaging – Mr. Johnston reported they relocated all of the affected staff and patient areas. The barriers are up with new egress routes and ISLM completed. They are working on pulling the rooms negative. Mr. Kelsey asked if Groathouse had concerns about the Medical Imaging remodel project. Groathouse has been made aware of the project and we will be working with them on change orders regarding ceilings, lighting and demolition. We understand the immediate need to get the designs completed as soon as possible. Mr. Wheatley sent the conceptual drawings to the group today and has been working with a vendor on design of an interventional radiology suite. We are meeting next week to agree on a design so we can work with Groathouse on the design/build as we go if they are interested in the project.

Laboratory – Mr. Wheatley reported they are proceeding with design, both structural and civil. The goal is to have design documents complete by Thanksgiving, construction documents by mid-December to Groathouse for pricing. We would hopefully begin at the beginning of the year. Mr. Kelsey asked for more information on the deadlines for this project. Ms. Richardson and Ms. Love discussed the CARES Act funds and the use for these projects. Ms. Richardson recommended we do not move forward with the Lab at this time. Mr. Kelsey concurred without more information on the use of the funds. Ms. Love recommended we continue with the design phase up until we have pricing and have to decide. We hope to have more information from HHS in January. Mr. Wheatley agreed we should move on because of the tight timeline if it is a CARES Act project. He also said the review from the State may take longer as it is healthcare related. Mr. Kelsey asked we report back before the Board meeting on a decision. He understands our frustration of working in an unknown environment and agrees we don't want to give any money back.

Pharmacy Chemo Mixing Room – Mr. Horan and Mr. Blevins have met with Tim Mickle, our Director of Pharmacy, and the next step will be to devise a renovated space for the hospital to review at the beginning of the year. We are still getting information on the industrial hygienist.

Pharmacy Compounding Room – Mr. Johnston said the doors have been ordered but we are still waiting on notice of shipment. He is hoping we will have them by the beginning of the year.

Emergency Room Outside Drainage – Mr. Johnston said this project is complete. We will know if the drainage issues are fixed when we start having freeze/thaw weather.

Tabled Projects

Bulk Oxygen Renovation and Grading – Mr. Horan said there is nothing new to add at this point.

Replacement Roofing for Power House – Mr. Horan said this is still on for the spring.

OB Bathtubs to Showers – Mr. Horan said this is still on hold.

New Business

Dr. Sulentic Office – Ms. Love explained the history of this project. We would like to recommend the hospital pays for half of the renovation cost. Dr. Sowada asked what our portion of the project would cost. Ms. Love said the architectural estimate is right around \$120,000 so we would pay for \$60,000. Mr. Kelsey asked about his current contract. Ms. Richardson said his contract expired in February and we have been delayed due to the pandemic. She said he does do a lot of pathology services in our hospital and some surgeries. He has continued to pay us monthly rent. Mr. Kelsey asked if Ms. Richardson would bring a contract to the Board so we can get some closure.

Foundation Waldner House Wall – Ms. Love shared some pictures of the wall between the Waldner House and the neighbor. Mr. Horan had a surveyor do a boundary line validation and it turns out most of the wall is on the neighbor's property. He said we will approach the neighbor with this information and let him know we are willing to work with him for our mutual interest. The engineer estimate for a new wall and flat work is around \$100,000. Mr. Kelsey asked if this could probably be done next summer. Mr. Horan agreed and would keep the committee updated.

The next meeting will be held December 15 at 3:30 p.m.

Mr. Kelsey added he would like Ms. Richardson to get on the agenda for the executive session of the next Board meeting to discuss potential legal issues with the Central Plant contractor.

The meeting adjourned at 4:37 p.m.

Submitted by Tami Love

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

BUILDING & GROUNDS COMMITTEE AGENDA

Tuesday ~ November 17, 2020

3:30 p.m.

Zoom teleconference

Voting Board Committee Members: Marty Kelsey, Chairman Dr. Barbara Sowada

Voting Staff Committee Members: Irene Richardson, Tami Love, Jim Horan

Non-voting Members: Gerry Johnston, Stevie Nosich

Guests: Jake Blevins – ST&B, Will Wheatley – PlanOne, Jeff Smith - County Commissioner Liaison

- | | |
|--|---------------------|
| 1. Call Meeting to Order | Marty Kelsey |
| 2. Approve Agenda | Marty Kelsey |
| 3. Approve Minutes – October 20, 2020 | Marty Kelsey |
| 4. Maintenance Metrics | Jim Horan |
| a. Work orders | |
| b. Amount of overtime for month | |
| c. Budget variance | |
| 5. Old Business | Jim Horan |
| a. Project Review | |
| i. Central Plant expansion | |
| ii. SLIB/CARES Act Projects | |
| 1. HVAC/UVG | |
| 2. Laboratory | |
| iii. Pharmacy Chemo Mixing room | |
| iv. Pharmacy Compounding room | |
| v. Emergency Room outside drainage | |
| vi. Medical Imaging remodel | |
| b. Tabled projects | |
| i. Bulk Oxygen renovation and grading | |
| ii. Replacement roofing for power house | |
| iii. OB Bathtubs to Showers | |
| 6. New Business | Jim Horan |
| a. Dr. Sulentich office renovation | |
| b. Foundation Waldner House retaining wall | |

7. Next meeting schedule

Marty Kelsey

- a. December 15, 2020 Classroom 1 or Zoom; 3:30P – 4:30P

8. Adjournment

Marty Kelsey

MEMORANDUM FOR THE BOARD OF SUPERVISORS
Building and Grounds Committee Meeting
October 20, 2020

The Building and Grounds Committee met in regular session via Zoom on October 20, 2020 at 3:30 PM with Mr. Marty Selby presiding.

Attendance: Mr. Marty Selby *Trustee - Chair*
Mr. Karara Sowada *Trustee*
Ms. Rene Richardson *CEO*
Ms. Kami Love *CFO*
Mr. Jim Horan *Facilities Director*
Mr. Kerry Johnston *Facilities Supervisor*
Mr. Dale Levins *ST&B Engineering*
Ms. Leslie Taylor *Clinic Director*

Mr. Selby called the meeting to order.

Ms. Richardson made a motion to approve the agenda. Mr. Horan seconded motion passed.

Mr. Sowada made a motion to approve the minutes from the September 15, 2020 meeting. Ms. Richardson seconded motion passed.

Maintenance Metrics

Mr. Horan presented the maintenance metrics. All metrics have been standard and steady. Overtime is expected to increase with the arrival of the winter months. The Facilities department is slightly over budget each month but we continue to submit requests for reimbursement from our County Maintenance fund.

Old Business – Project Review

Central Plant Expansion

Mr. Levins said the preliminary punch list was issued to the Contractor. Subcontractors are onsite this week to work through the punch list. He said he would also be onsite this week and will check in with Mr. Harris. His Site Observation Specialist will also be onsite to review the project. He said Mr. Harris is pushing the subs to be done by the end of the month. Harris still needs to run through the functional testing of the controls. Mr. Sowada asked why the subcontractors were so slow. Mr. Levins said they struggled to find pipefitters in the market once we asked them to ramp up. She asked if our experience with these subcontractors will be considered with future projects. Mr. Levins said there have been lessons learned and we will be including liquidated damages in future contracts. Mr. Selby thanked Mr. Levins for his report.

S■■■■/C■R■S ■ct Pro■ects

H■■C ■■■C – Mr. ■levins provided an update. ■he general contractor■■roathouse■■will ■e onsite this wee■ to discuss mo■ili■ation and to meet with staff regarding e■pectations. He said su■mittals are ■eing reviewed as they come in. ■e did receive a response from the State for the permitting and have a few minor issues to respond ■ac■ ■he as■estos report came ■ac■ and we will need a■atement on the roof area. ■he City of Roc■Springs should release the electrical permit ■y the end of this wee■. Mr. ■levins said we are e■pecting the ■MP from ■roathouse soon. Mr. ■elsey as■ed a■out items we can purchase directly. Mr. ■levins responded the air handler unit was the only item to ■e direct purchased and the hospital has already made that purchase. ■he architect and engineer fees will also ■e direct purchases of the owner. Mr. Horan as■ed if a■out considering remodeling a portion of Medical ■aging as these areas will ■e relocated for this pro■ect. ■r. Sowada as■ed for a recommendation to the Committee and Ms. Richardson commented we would highly recommend moving forward with a phased remodel of the areas. She said we have preliminary cost figures and have the funds availa■le. Mr. ■elsey agreed it was a perfect time to loo■at this pro■ect and would li■e to see a recommendation to the ■oard. Mr. ■levins said he will need to tal■to Plan One ■rchitects to review scope overlay with the current pro■ect. He also gave ■roathouse a courtesy heads up of the possi■ility of the new pro■ect and that the ceiling scope may change.

MO■ ■ntrance – Mr. ■elsey said the decision was made to put this pro■ect on hold. Ms. Richardson said we may revisit if S■■■■ changes their rules and timelines.

■a■oratory – Mr. ■levins said the architect schematic design documents should ■e ready ■y the end of this wee■. He is wor■ing with ■ill ■ heatley of Plan One to loo■at options for the H■■C unit servicing this area.

Pharmacy Chemo Mi■ing Room – Mr. Horan and Mr. ■levins met with staff and it was agreed to wait until the new year to start this pro■ect. Mr. ■elsey as■ed if it was determined there is no imminent danger to ■ustify ■ringing in an industrial hygienist at this time. Mr. ■levins there has not ■een an analysis done at this time. Ms. Richardson and Mr. ■levins agreed we would circle ■ac■around and loo■at our contacts to ma■e this happen.

Pharmacy Compounding Room – Mr. ■ohnston said the doors have ■een ordered. Once we are notified of shipping■■we will start. He estimates a start date in a■out two wee■s.

■ounds ■ean■■o – Mr. Horan said we are waiting on the chain lin■fence and gate to ■e installed. ■e should ■e a■le to close this pro■ect out ■y the ne■t meeting.

Mr. ■elsey as■ed a■out the status of the potential change order on the Central Plant for fencing. Mr. Blevins said he didn't want to move forward with that under the current BHI contract. ■ was decided to wor■with Mr. ■ heatley on a design and we would ■id it out as a separate pro■ect.

■mergency Room Outside ■rainage – Mr. ■ohnston said they will start either this ■hursday or ne■t wee■. ■ will ta■e a■out four days to complete and they will also ■e wor■ing on some concrete replacement at 3000 College Hill.

Called Projects

Full Oxygen Renovation and Grading – Mr. Horan said there is nothing new to add at this point.
Replacement Roofing for Power House – Mr. Horan said this is still on for the spring.
On Bathrooms to Showers – Mr. Horan said this is still on hold.

New Business

Mr. Elsey asked if our snow removal equipment is ready to go. Mr. Horan said yes and they are pleased to have the new lean-to to store the equipment. He also mentioned he did include a new truck in the capital budget for this year.

Ms. Richardson asked about the need to have the SPP grant capital requests brought to this Committee for approval. Mr. Elsey and Mr. Sowada agreed they would not need to come to building rounds as they will be ratified at the board meeting.

Mr. Elsey thanked Mr. Levins and the staff for all the work put into these projects. He said he would like to come up for a tour of the projects.

Mr. Horan said since the new chiller plant up and running we have seen savings of \$8,000 per month. We will also be receiving an incentive of \$90,000 from Rocky Mountain Power once the project is complete. He will bring the graphs showing the tracking to the next meeting. We are actually using less electricity now than prior to building our MOU.

The next meeting will be held November 17 at 3:30 p.m.

Mr. Sowada made a motion to adjourn. Ms. Richardson seconded. Motion passed.

Submitted by Tami Love

B & G

	Active W/O	Active W/O > 30 Days	Monthly open W/O
Reported 10/16	221	198	23
Reported 11/2018	224	201	23
Reported 12/18	218	197	21
Reported 01/19	201	188	13
Reported 02/2019	208	182	37
Reported 03/2019	156	123	33
Reported 4/2019	178	126	52
Reported 5/2019	162	134	28
Reported 6/2019	165	88	77
Reported 7/2019	168	40	128
Reported 8/2019	166	28	138
Reported 9/2019	177	60	117
Reported 10/2019	not reported	not reported	not reported
Reported 11/2019	245	111	134
Reported 12/2019	213	115	98
Reported 1/2020	142	126	16
Reported 2/2020	152	114	38
Reported 3/2020	168	125	43
Reported 4/2020	108	97	11
Reported 5/2020	168	105	63
Reported 6/2020	174	112	62
Reported 7/2020	177	131	46
Reported 8/2020	95	35	60
Reported 9/2020	107	57	50
Reported 10/2020	105	45	60
Reported 11/2020	110	59	51

TMS ACCESS

B&G graph

Active =?

W/O

Query

Facilities

Web

Active = < 30 days

less active = > 30 days

Reports for Board Compliance Committee 10-22-2020

1. behavioral health patients
2. There were 2 HIPPA violations reportable for the month of October. Both cases the employees were coached and will be monitored.
3. The Grievance Committee resolved 6 cases in October. Each of the cases were reviewed and resolved in a timely manner.
4. Ongoing Audits by April Prado
 - a. Denial Management
 - b. Peer review OPPE, FPPE

Memorial Hospital of Sweetwater County
Governance Committee Meeting
November 6, 2020
Agenda

Old Business

1. Review and approve the following items:
 - a. BOT Bylaws: Chapter VII, Section 1 and 2
 - b. Policy regarding Guidelines for Physician Contracts
 - c. Policy regarding Guidelines for Non-Physician Contracts

New Business

1. Continue reviewing and revising BOT Bylaws

Executive Session, as needed

Memorial Hospital of Sweetwater County
Governance Committee Meeting
November 6, 2020
Zoom Meeting

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

Non-voting Members Present: Suzan Campbell and Marianne Sanders

Call Meeting to Order

Richard Mathey called meeting to order at 2:00 pm.

Discussion

Agenda was approved with switching time of Bylaw discussion with policies discussion.

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

Old Business

1. Policy regarding Guidelines Negotiating for Physician Contracts was reviewed. The purpose of this Board policy is to authorize the Chief Executive Officer (CEO) to recruit physicians and negotiate their contracts within the guidelines set forth in the policy. After minor changes made to retirement benefits section, it was determined that the policy is ready for the Board's first reading at the December Board meeting.
 - a. After an email discussion on Nov 9th the following sentence was added. "These guidelines are based on federal physician recruitment and compensation statutes and regulations."
2. Policy regarding Guidelines for Negotiating Non-Physician Provider Contracts was reviewed. The purpose of this Board policy is to authorize the CEO to recruit non-physician providers and negotiate their contracts within the guidelines set forth in the policy. After minor changes made to retirement benefits section, it was determined that the policy is ready for the Board's first reading at the December Board meeting.
 - a. After an email discussion on Nov 9th, it was determined that the sentence regarding federal physician recruitment statutes do not apply.
3. Revision of Bylaws was continued. Chapter 1: Definitions was reviewed and tentatively approved. Chapter VII-Medical Staff was reviewed and tentatively approved.

New Business

None

Executive Session re Peer-to-peer Relationships

1. Actions taken: identified need for a robust orientation program

With no further business, the meeting was adjourned at 4:30 pm.

Submitted by Barbara J. Sowada, Ph.D.

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: **HARMONY HEALTHCARE IT - HEALTHDATA ARCHIVER**

2. Purpose of contract, including scope and description: **This vendor will archive multiple current systems once we move to Cerner. The software will allow us to maintain access to patient charts in the legacy systems as needed for patient care. We will be able to launch the Harmony software directly from Cerner. Harmony will be archiving our in-house databases and moving all of it to their server. They will host the data for at least 60 months.**

3. Effective Date: **When signed by both parties**

4. Expiration Date: **5 years (60 months) from effective date. Auto-renew provisions? Yes, for one year terms after initial 5 years.**

5. Termination provisions: **Without cause after 5 years. During the 5 years, it will have to be for cause. We also wanted assurances that if/when this agreement is terminated MHSC retains all of its data. This has been addressed in the agreement--In the MSLA, Exhibit 5 Section 5 Ownership of Data and Operating System. MHSC owns all data hosted under the Master Agreement. Further, at the termination of the relationship, HHIT will provide Sweetwater with a copy of the data in a relational database format.**

This is regardless of anything in the agreement or manner of termination.

6. Monetary cost of the contract: **For the first 60 months the cost will be \$7,727 per month. After 60 months, monthly fee of \$1,855 per month. Travel and expenses are not included in the price and will be invoiced monthly as/if incurred.**

Budgeted? **Yes**

7. Jurisdiction/Choice of Law provision checked and changed to Wyoming if able to so. **Yes changed to Wyoming from Indiana**

8. Any confidentiality provisions? **Yes page 17 as to confidentiality of proprietary information of HHIT Also HHIT is signing a BAA as vendor to protect PHI of hospital**

9. Indemnification clause present? **Yes page 22**

10. Is this contract appropriate for other bids? **No**

11. Is County Attorney review required? **No**



P.O. Box 6595
South Bend, IN 46660
Tel: (574) 258-1044
Fax: (574) 258-1045

HEALTHDATA ARCHIVER

*Long-term, HIPAA-compliant storage of
electronic Protected Health Information (ePHI)*

Submitted To:

Stacey Nutt, Systems Administrator

Direct 307-352-8288

snutt@sweetwatermemorial.com

1200 College Drive, Rock Springs, WY 82901

Submitted By:

Tony W. Matt

Harmony Healthcare IT

M 763-232-7147

TMatt@HarmonyHIT.com



Master HealthData Archiver® License and Service Agreement

This Master License and Service Agreement (this "Agreement") is made effective by and between Business Interactions, LLC, d/b/a Harmony Healthcare IT, an Indiana limited liability company, of 17390 Dugdale Drive Suite 200, South Bend, Indiana 46635, ("Licensor"), and Memorial Hospital of Sweetwater County of 1200 College Dr, Rock Springs, WY 82901 ("Licensee"), collectively the "Parties."

The Parties hereto agree that as a master form of contract, this Agreement establishes the general terms under which services will be provided by Licensor to specified Licensee affiliates from time to time. As additional services are requested by Licensee, the Parties will negotiate and execute amendments to this Agreement in the form of a new Statement of Work. This Agreement in its entirety includes the following exhibits:

- Exhibit 1:** Statement of Work 1
- Exhibit 2:** Standard Terms and Definitions
- Exhibit 3:** Software License Agreement
- Exhibit 4:** Support and Maintenance Agreement
- Exhibit 5:** Hosted Software Services Agreement

This Agreement constitutes the entire understanding of the Parties hereto pertaining to the matters covered hereby and may only be modified or amended by a writing signed by all Parties.

The Parties hereto have caused this Agreement to be executed by their respective duly authorized representatives as of the date below (Effective Date).

Valid if executed on or before 12/10/20

By Licensee:

Signature

Name

Job Title

Date

By Licensor:

Signature

Name

Job Title

Date

Harmony Healthcare IT (HHIT) is dedicated to quality throughout the entire lifespan of a client. Please take a few minutes to complete the quality feedback survey:

<https://www.surveymonkey.com/r/ZCL389Y?Name=Tami%20Love&Acct=Memorial%20Hospital%20of%20Sweetwater%20County&Rep=Tony%20Matt&SO=Fill%20ME%20IN> of 3 short questions. Your candid response will help improve the HHIT process.

Exhibit 1: Statement of Work 1

Goals and Objectives

Licensee seeks to extract and archive data from legacy systems allowing for the decommissioning of these systems while maintaining access to the historical information through HealthData Archiver®.

General Assumptions

1. **Required database credentials** –Required credentials for backend source database access will be provided.
2. **Standard data drivers** – The necessary data drivers are in place to extract the database and supporting data elements.
3. **Source database is intact and in functional order** – No corrupt or malformed data caused by malfunctions of the source system and/or its ancillary hardware and software components.
4. **Documents and images are accessible** – All scanned, non-structured, and system-generated documents/images are not encrypted, not locked or in a proprietary format requiring source vendor delivery.
5. **Local administrator rights** – Licensor will be granted local administrator rights for access and installation of required data extraction tools on the source application server(s).

Scoping Considerations

The system details and archiving requirements relating to this Statement of Work were gathered during the discovery process. Some assumptions may have been made based upon industry best practices. Significant variance from the information documented on each system may result in a Change Order.

The Proposed Solution

Licensor proposes the archival of the following data sources:

1. Data Source: (See Appendix 1 for additional details)

The following services will be performed on each data source listed above.

1. **Data Extraction** - Extraction of all relevant data to be archived and migration into an intermediary SQL-based universal database for filtering and manipulation.
2. **Data Migration** – Migration of all data into HealthData Archiver®, retaining data discreteness when and where possible.
3. **HealthData Archiver®** –Configuration of the HealthData Archiver® (A HIPAA-compliant, virtual server based, vendor-neutral data archive accessible through any web browser) populated with historical information in a searchable, printable and reportable format with unlimited user licenses.
4. **Validation** - The final validation and approval of the archive, signifying project completion. Licensor will schedule a mutually agreed upon window, usually two weeks, to perform final archive validation. At the completion of this period, if the data validation step has not been completed by the Licensee, the

Licensor reserves the right to invoice support and maintenance fees for the extended period of time required to complete the validation and provide final project approval.

5. **Application Hosting** – Hosting of the completed HealthData Archiver® in a Tier III data center – providing secure, encrypted remote access.
6. **Ongoing Support and Maintenance** – Helpdesk technical support available by calling the Licensor Support Desk at (800) 781-1044 or by emailing support@harmonyhit.com. Also includes availability of future software updates and upgrades.

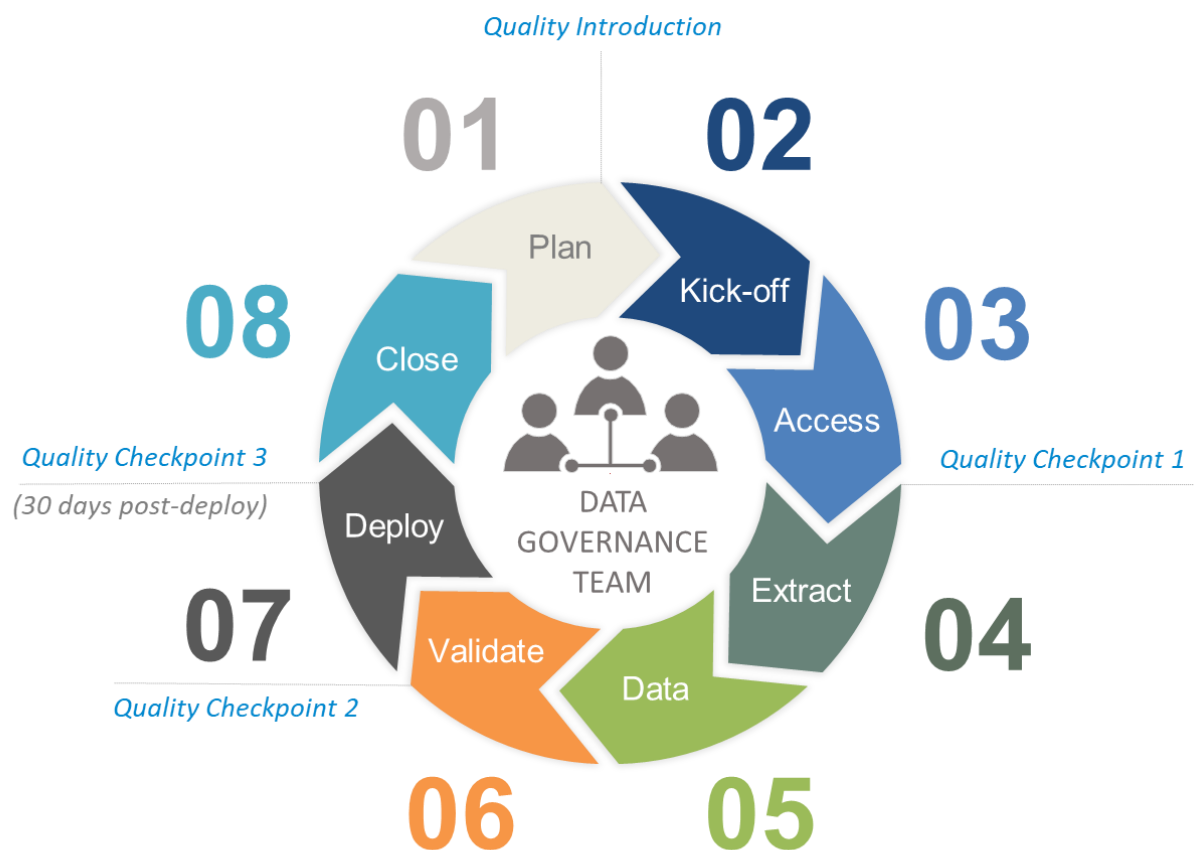
Delivery Schedule

Licensor has the capacity to scale its resources to meet mutually agreed upon timelines for completing the project. Licensee in collaboration with Licensor, will establish the reasonable priority of systems archived as well as target kick-off and completion dates.

Where agreed upon targeted kick-off, completion and go-live dates change, Harmony Healthcare IT will assess the impact of what could be additional effort required to meet dates and reserves the right to submit additional service charges.

Approach

Upon proposal acceptance, Licensor will provide a detailed project plan based on agreed upon timelines and information management goals for each system.



Licensing and Investment Overview

Line Item	
Systems to be Archived <ul style="list-style-type: none"> - Quadramed QCPR - Inpatient EHR - Quadramed Affinity - Inpatient Financial/RevCycle - T-Systems - EDIS - Nuance Clintegrity - Document Management - eMDs - Ambulatory Clinic (15-20 providers) - eMDs - Ambulatory Ortho Clinic (3 - 5 providers) - OBIX Perinatal System - Cerner SSO integration 	
Subscription/Monthly Fixed Technology Fee	Total
Months 1 - 60	\$7,727
Months 61 and beyond	\$1,855

Payment Schedule & Terms

- 60 months \$7,727. First payment due at kick-off of project or no later than 04/30/21.
- After 60 months, monthly fee of \$1,855 per month going forward.
- Travel and expenses are not included in the price and will be invoiced monthly as/if incurred.

Appendix 1: Data Source Details



Data Source Details

Source System Information				
System Name & Vendor: Harris/Quadramed OPUS EHR		Version #: 6.3.0.54	Bed Count: 99	Type of System: Inpatient EHR
System Status: Active currently moving to Cerner	Instances: 1	Facilities: 1	Database Size: 400GB	Server Location: On Prem
Operating System: Red Hat 7	Database Type: Cache	Image Size/Count: No	Patient Count:	Data Extraction: Harris
Contact Information				
Organization: Memorial Hospital of Sweetwater County			Address: 1200 College Dr Rock Springs, WY 82901	
Name: Stacey Nutt	Title: System Administrator		Email: snutt@sweetwatermemorial.com	Phone #: 307-352-8288
Archive Options:				
Deploy Location: <input checked="" type="checkbox"/> HHIT <input type="checkbox"/> Client Site	Database Platform: <input checked="" type="checkbox"/> PostgreSQL <input type="checkbox"/> MSSQL		Data Disposition: <input type="checkbox"/> Destroy Raw Data <input type="checkbox"/> Return Raw Data <input checked="" type="checkbox"/> Store Raw Data	
Single Sign-On: <input checked="" type="checkbox"/> Yes -> Go Forward Solution: <u>Cerner</u> <input type="checkbox"/> No		LDAP Integration: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	FairWarning Integration: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Transaction Posting (Rev Cycle Only): <input type="checkbox"/> Yes <input type="checkbox"/> No
TO BE COMPLETED BY HHIT SOLUTION ENGINEERING----				
Modules to be archived				
CLINICAL <ul style="list-style-type: none"> • Patient Info <ul style="list-style-type: none"> ◦ Profiles • Patient <ul style="list-style-type: none"> ◦ View Patient Documents • Allergies • Clinical Profile • Care Grid • Nursing Documents • Review Orders • View Results <ul style="list-style-type: none"> ◦ Laboratory ◦ Radiology • Flowsheet <ul style="list-style-type: none"> ◦ Vitals ◦ IV ◦ Respiratory • Problems List • BCMA Physician Notes				

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Data Source Details

Assumptions and Notes

- All documents not stored as static documents in the system (ie, Care Grid and Physician Note documents) will be delivered from the vendor as PDF documents.
- All data is MSSQL Server version 2008 or later. Clinical and PM data is on the same database server.
- Any data that is encrypted or proprietary format is not included in the archive.
- Any data not present in MSSQL database for any of the sources will need to be addressed by the client with the source application vendor, directly. HHIT cannot be held responsible for any data not present in the MSSQL database.





Data Source Details

Source System Information				
System Name & Vendor: Harris/Quadramed Affinity		Version #: 17.1.2.0	Bed Count: 99	Type of System: Inpatient PM
System Status: Active currently moving to Cerner	Instances: 1	Facilities: 1	Database Size: 180GB	Server Location: On Prem
Operating System: Windows OS R2	Database Type: Cache	Image Size/Count: Included in DB	Patient Count:	Data Extraction: Harris
Contact Information				
Organization: Memorial Hospital of Sweetwater County			Address: 1200 College Dr Rock Springs, WY 82901	
Name: Stacy Nutt	Title: System Administrator		Email: snutt@sweetwatermemorial.com	Phone #: 307-352-8288
Archive Options:				
Deploy Location: <input checked="" type="checkbox"/> HHIT <input type="checkbox"/> Client Site	Database Platform: <input checked="" type="checkbox"/> PostgreSQL <input type="checkbox"/> MSSQL		Data Disposition: <input type="checkbox"/> Destroy Raw Data <input type="checkbox"/> Return Raw Data <input checked="" type="checkbox"/> Store Raw Data	
Single Sign-On: <input checked="" type="checkbox"/> Yes -> Go Forward Solution: <u>Cerner</u> <input type="checkbox"/> No		LDAP Integration: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	FairWarning Integration: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Transaction Posting (Rev Cycle Only): <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
TO BE COMPLETED BY HHIT SOLUTION ENGINEERING----				
Modules to be archived				
Patient Registration <ul style="list-style-type: none"> • Personal Details • Residence • Employment • Next of Kin • Emergency Notification • Guarantor Information <ul style="list-style-type: none"> ◦ Personal ◦ Residence ◦ Employment • Image Capture • Patient Insurances • Visit Insurances • Misc Details • Admission Details • Admission Details • Accident Admission • Physicians • Diagnosis • Advanced Directive • Special Communication Need • Account Notes • Discharge Status 				

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Data Source Details

Account Processing

- Account Detail
- Charges
- Receipts
- Archived Reports

AP

- Invoice Detail
 - Vendor Selection
 - Check Information

GL

- Group Financial Statement
 - Detail Trial Balance

Assumptions and Notes

- All documents not stored as static documents in the system (ie, Care Grid and Physician Note documents) will be delivered from the vendor as PDF documents.
- All data is MSSQL Server version 2008 or later. Clinical and PM data is on the same database server.
- Any data that is encrypted or proprietary format is not included in the archive.
- Any data not present in MSSQL database for any of the sources will need to be addressed by the client with the source application vendor, directly. HHIT cannot be held responsible for any data not present in the MSSQL databases.



Data Source Details

Source System Information				
System Name & Vendor: T Systems		Version #: EV6.0	Bed Count: 99	Type of System: Emergency Department EHR
System Status: Active currently moving to Cerner	Instances: 1	Facilities: 1	Database Size: 100GB	Server Location: On Prem
Operating System: Windows 12 R2	Database Type: SQL	Image Size/Count: 1 TB	Patient Count:	Data Extraction: Nuance or HHIT?
Contact Information				
Organization: Memorial Hospital of Sweetwater County			Address: 1200 College Dr Rock Springs, WY 82901	
Name: Stacy Nutt	Title: System Administrator		Email: snutt@sweetwatermemorial.com	Phone #: 307-352-8288
Archive Options:				
Deploy Location: <input checked="" type="checkbox"/> HHIT <input type="checkbox"/> Client Site		Database Platform: <input checked="" type="checkbox"/> PostgreSQL <input type="checkbox"/> MSSQL		Data Disposition: <input type="checkbox"/> Destroy Raw Data <input type="checkbox"/> Return Raw Data <input checked="" type="checkbox"/> Store Raw Data
Single Sign-On: <input checked="" type="checkbox"/> Yes -> Go Forward Solution: <u>Cerner</u> <input type="checkbox"/> No		LDAP Integration: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	FairWarning Integration: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Transaction Posting (Rev Cycle Only): <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
TO BE COMPLETED BY HHIT SOLUTION ENGINEERING—				
Modules to be archived				
<ul style="list-style-type: none"> • Demographics <ul style="list-style-type: none"> ◦ Patient ◦ Disposition • Clin Data <ul style="list-style-type: none"> ◦ Meds and Allergies ◦ Problems ◦ Surgical Hx ◦ Summary • Vital Signs • CPOE <ul style="list-style-type: none"> ◦ MAR ◦ Order Sheet • Assessment • Triage • Progress • Discharge • Lab Results • Event Log • Procedures • Scanned and PDF Documents 				

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Data Source Details

Assumptions and Notes

- Scanned Documents and PDF documents available in standard format.
- HHIT will archive discrete data only. Client will have capability to assemble discrete data into patient centric reports via HealthData Archiver 'Print' functionality. Output will contain scoped data elements, but formatting will not perfectly match source system formatting.



Data Source Details

Source System Information				
System Name & Vendor: Nuance Clintegrity Document Management		Version #: 20.1.26	Bed Count: 99	Type of System: Document Management
System Status: Active currently moving to Cerner	Instances: 1	Facilities: 1	Database Size: 44GB	Server Location: On Prem
Operating System: Windows 2016	Database Type: SQL	Image Size/Count: NA	Patient Count:	Data Extraction: Source Vendor or HHIT?
Contact Information				
Organization: Memorial Hospital of Sweetwater County			Address: 1200 College Dr Rock Springs, WY 82901	
Name: Stacey Nutt	Title: Systems Administrator	Email: snutt@sweetwatermemorial.com	Phone #:307-352-8288	
Archive Options:				
Deploy Location: <input checked="" type="checkbox"/> HHIT <input type="checkbox"/> Client Site	Database Platform: <input checked="" type="checkbox"/> PostgreSQL <input type="checkbox"/> MSSQL		Data Disposition: <input type="checkbox"/> Destroy Raw Data <input type="checkbox"/> Return Raw Data <input checked="" type="checkbox"/> Store Raw Data	
Single Sign-On: <input checked="" type="checkbox"/> Yes -> Go Forward Solution: <u>Cerner</u> <input type="checkbox"/> No	LDAP Integration: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	FairWarning Integration: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Transaction Posting (Rev Cycle Only): <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
TO BE COMPLETED BY HHIT SOLUTION ENGINEERING---				
Modules to be archived				
PDF and TIFF Documents <ul style="list-style-type: none"> • Patient documents and files (ref labs, consent forms, etc) • EOB documents 				
Assumptions and Notes				
Access to the database and non encrypted				

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Data Source Details

Source System Information				
System Name & Vendor: eMDs		Version #: 9.1	Provider Count: 15-20	Type of System: Ambulatory EHR
System Status: Active currently moving to Cerner	Instances: 1	Facilities: 1	Database Size: 286GB	Server Location: On Prem
Operating System: Windows 2012 R2	Database Type: SQL	Image Size/Count: 360GB	Patient Count:	Data Extraction: OBIX
Contact Information				
Organization: Memorial Hospital of Sweetwater County			Address: 1200 College Dr Rock Springs, WY 82901	
Name: Stacy Nutt	Title: Systems Administrator		Email: snutt@sweetwatermemorial.com	Phone #:307-352-8288
Archive Options:				
Deploy Location: <input checked="" type="checkbox"/> HHIT <input type="checkbox"/> Client Site		Database Platform: <input checked="" type="checkbox"/> PostgreSQL <input type="checkbox"/> MSSQL		
Data Disposition: <input type="checkbox"/> Destroy Raw Data <input type="checkbox"/> Return Raw Data <input checked="" type="checkbox"/> Store Raw Data				
Single Sign-On: <input checked="" type="checkbox"/> Yes -> Go Forward Solution: <u>Cerner</u> <input type="checkbox"/> No		LDAP Integration: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		FairWarning Integration: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Transaction Posting (Rev Cycle Only): <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
TO BE COMPLETED BY HHIT SOLUTION ENGINEERING---				
Modules to be archived				
<p>EHR:</p> <ul style="list-style-type: none"> • Visit Notes • Log/Phone/Rx Notes • Labs/Tests • Diagnosis • Medications • Consults/Referrals • Documents • Alerts <ul style="list-style-type: none"> • Allergies • Immunizations • Vitals <p>Practice Management:</p> <ul style="list-style-type: none"> • Patient Info <ul style="list-style-type: none"> ○ General ○ Insurance ○ Addresses ○ Misc ○ Contacts ○ Fax Contacts <p>Financials</p>				
Assumptions and Notes				
eMDs Database is a single tenant model. If eMDs database is a multi-tenant model, data must be provided by eMDs.				



Data Source Details

Source System Information				
System Name & Vendor: e-MDs – Ortho Clinic		Version #: 9.1	Provider Count: 3-5	Type of System: Ambulatory - EHR
System Status: Active currently moving to Cerner	Instances: 1	Facilities: 1	Database Size: 60GB	Server Location: On Prem
Operating System: Windows 2012 R2	Database Type: MSSQL	Image Size/Count: 40GB	Patient Count:	Data Extraction: HHIT or e-MDs
Contact Information				
Organization: Memorial Hospital of Sweetwater County			Address: 1200 College Dr Rock Springs, WY 82901	
Name: Stacy Nutt	Title: System Administrator		Email: snutt@sweetwatermemorial.com	Phone #:307-362-3711
Archive Options:				
Deploy Location: <input checked="" type="checkbox"/> HHIT <input type="checkbox"/> Client Site	Database Platform: <input checked="" type="checkbox"/> PostgreSQL <input type="checkbox"/> MSSQL		Data Disposition: <input type="checkbox"/> Destroy Raw Data <input type="checkbox"/> Return Raw Data <input checked="" type="checkbox"/> Store Raw Data	
Single Sign-On: <input checked="" type="checkbox"/> Yes -> Go Forward Solution: <u>Cerner</u> <input type="checkbox"/> No	LDAP Integration: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		FairWarning Integration: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Transaction Posting (Rev Cycle Only): <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
TO BE COMPLETED BY HHIT SOLUTION ENGINEERING—				
Modules to be archived				
<p>EHR:</p> <ul style="list-style-type: none"> • Visit Notes • Log/Phone/Rx Notes • Labs/Tests • Diagnosis • Medications • Consults/Referrals • Documents • Alerts <ul style="list-style-type: none"> ◦ Allergies ◦ Immunizations ◦ Vitals <p>Practice Management:</p> <ul style="list-style-type: none"> • Patient Info <ul style="list-style-type: none"> ◦ General ◦ Insurance ◦ Addresses ◦ Misc ◦ Contacts ◦ Fax Contacts • Financials 				
Assumptions and Notes				
<ul style="list-style-type: none"> • eMDs Database is a single tenant model. If eMDs database is a multi-tenant model, data must be provided by eMDs. 				



Data Source Details

Source System Information				
System Name & Vendor: OBIX Perinatal		Version #: 8	Bed Count: 99	Type of System: OB Perinatal system
System Status: Active currently moving to Cerner	Instances: 1	Facilities: 1	Database Size: 86GB	Server Location: On Prem
Operating System: Windows 2016	Database Type: SQL	Image Size/Count: Included w DB	Patient Count:	Data Extraction: OBIX
Contact Information				
Organization: Memorial Hospital of Sweetwater County			Address: 1200 College Dr Rock Springs, WY 82901	
Name: Stacey Nutt	Title: System Administrator		Email: snutt@sweetwatermemorial.com	Phone #: 307-352-8288
Archive Options:				
Deploy Location: <input checked="" type="checkbox"/> HHIT <input type="checkbox"/> Client Site	Database Platform: <input checked="" type="checkbox"/> PostgreSQL <input type="checkbox"/> MSSQL		Data Disposition: <input type="checkbox"/> Destroy Raw Data <input type="checkbox"/> Return Raw Data <input checked="" type="checkbox"/> Store Raw Data	
Single Sign-On: <input checked="" type="checkbox"/> Yes -> Go Forward Solution: <u>Cerner</u> <input type="checkbox"/> No	LDAP Integration: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		FairWarning Integration: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Transaction Posting (Rev Cycle Only): <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
TO BE COMPLETED BY HHIT SOLUTION ENGINEERING----				
Modules to be archived				
Patient Demographics Fetal Monitoring Strips				
Assumptions and Notes				
All Fetal Strips will be delivered by the vendor in PDF format and will match format provided in OBIX Data Conversion v1.1 specification.				

Exhibit 2: Standard Terms and Definitions

1. Definitions.

- a. **Authorized User.** “Authorized User” means each person Licensee desires to have access to the Software.
- b. **Data Source.** “Data Source” means each individual source of archived data, including without limitation each database or a store of data files from a network or computer system.
- c. **Documentation.** “Documentation” means any printed or electronic materials provided to Licensee related to the products and services provided as part of this contract including without limitation, training materials, contracts, and other written materials generated by Licensor.
- d. **Hosted Software.** “Hosted Software” means Software hosted within Licensor’s data center.
- e. **Hosting Services.** “Hosting Services” means services related to maintaining the Hosted Software within Licensor’s data center.
- f. **Raw Data.** “Raw Data” means the data extracted from the Data Source or provided from the Data Source vendor in its original format prior to any data processing or transformation.
- g. **Software.** “Software” means all or any portion of a Licensee’s HealthData Archiver® provided to Licensee under the terms of the Software License Agreement between Licensor and Licensee.

2. Training. Licensor will provide basic training and training materials pertinent to the Software and Documentation. Additional training is available; upon request, Licensor will provide Licensee with specific details and will quote the then-current additional training fee.

3. Copies. The terms and conditions of this Agreement, including without limitation to this Exhibit, apply to any and all copies of the Software. Licensee may make one copy of the Software for use as a backup at each site where the Software is in authorized use under this Agreement. Licensee must reproduce and include any copyright, trade secret, trademark or proprietary data notices and other legends and logos on any and all copies.

4. Restrictions. Licensee may not transfer or assign the Software without the prior written consent of Licensor. Except as specifically provided above, Licensee may not reproduce the Software or Documentation or any part thereof. Licensee also may not make alterations to the Software or any part thereof, including but not limited to sub-routines, functions, libraries or other binary code segments of the Software; or use, rent, loan, sub-license, lease, distribute or grant other rights to the Software or Documentation to others. Licensee may not reverse engineer, reverse translate, decompile, disassemble or in any manner decode the Software, except as otherwise permitted by law.

5. Proprietary Rights and Confidentiality. The Software and Documentation are solely owned by Licensor and are protected by copyright, patent and trade secret laws. Licensee will take all steps necessary to protect Licensor’s proprietary rights in the Software and Documentation, including, but not limited to, the proper display of copyright, trademark, service mark, trade secret and other proprietary notices on any copies of the Software. Licensee will, at its own cost and expense, protect and defend Licensor’s ownership of the Software and Documentation against all claims, liens and legal processes of Licensee’s creditors and will keep the Software and Documentation free and clear of all such claims, liens and processes. Licensee will keep the Software and Documentation confidential and will not disclose or publish it, or any part of it, to others.

6. **Licensee's Warranty.** Licensee warrants that all individuals having access to the Software or Documentation will observe and perform all the terms and conditions of this Agreement. Licensee shall, at its own expense, promptly enforce the restrictions in this Agreement against any person who gains access to the Software or Documentation while an employee or consultant of Licensee and who violates said restrictions by instituting and diligently pursuing legal and equitable action against them, seeking first a temporary restraining order, then a preliminary injunction and finally a permanent injunction and any and all damages due under the law. Licensee agrees to immediately notify Licensor in writing of any misuse, misappropriation or unauthorized disclosure, display or copying of the Software or Documentation that may come to Licensee's attention.
7. **Licensor's Disposition of Raw Data.** Licensor shall keep the Licensee's Data Source Raw Data for 90 days post completion and project sign-off. After 90 days, Licensor shall Store Raw Data from Licensee's Data Source, unless the Licensee requests an Alternative Raw Data Disposition Option explicitly in writing to Licensor.

Store Raw Data - 90 days post project closure and sign-off, Licensor will Store Raw Data from the Data Source. Licensee authorizes Licensor to store Raw Data, unless Licensee explicitly selects an Alternative Raw Data Disposition Option in writing to Licensor. At any time, Licensee may request, in writing, that Raw Data be destroyed at which time Licensor will enact the "Destroy Raw Data" option. At all times when Licensor is storing Raw Data (including at any time following termination of this Agreement), Licensor shall store the Raw Data in accordance with all applicable state, federal and local laws and regulations, the BAA, and the Hosting Agreement executed between the parties.

Alternative Raw Data Disposition Options:

Destroy Raw Data - 90 days post project closure and sign-off, Licensor will notify Licensee in writing that Raw Data is due to be destroyed. Licensee will authorize Licensor to proceed with Raw Data destruction. All Raw Data will be destroyed by methods outlined in either the HIPAA Security Rule (located at 45 CFR Part 160 and Subparts A and C or Part 164) or provided by the latest National Institute of Standards and Technology ("NIST") guidelines. Upon completion of Raw Data destruction, Licensor will provide a Certificate of Destruction to Licensee.

Return Raw Data - 90 days post project closure and sign-off, Licensor will notify Licensee in writing that Raw Data is due to be returned to Licensee. Licensee will authorize Licensor to proceed with the Raw Data return, selecting one of the commercially recognized secure methods and practices provided in the written notification. Licensor will return Raw Data to the address provided by Licensee in the authorization. Upon receipt and confirmation by Licensee of the returned Raw Data, Licensor will destroy its copy of Raw Data utilizing commercially-recognized secure methods and practices methods outlined in the HIPAA Security Rule or the latest NIST guidelines. Upon complete of Raw Data destruction, Licensor will provide a Certificate of Destruction to Licensee.

8. **Miscellaneous.** Licensee shall also pay all freight, transportation, insurance, media-related costs and taxes and other governmental charges, however characterized (except based on Licensor's income), in connection with Licensee's licensing of the Software. Licensor shall be neither in default nor liable for any failure in performance or loss or damage under this Agreement due to any cause beyond its control. If requested by Licensor at any time, Licensee will certify under oath that it has fully and faithfully observed all of the terms and conditions of this Agreement. At reasonable times, Licensor may inspect

Licensee's premises and equipment to verify that all of the terms and conditions of this Agreement are being observed.

- 9. U.S. Government Restricted Rights.** The Software is provided with RESTRICTED RIGHTS. Use, duplication or disclosure by the Government is subject to restrictions as set forth in subdivision (b)(3)(ii) of The Rights in Technical Data and Computer Software clause at 48 C.F.R. 252.227-7013 or in subdivision (c)(1) and (2) of the Commercial Computer Program-Restricted Rights clause at 48 C.F.R. 52.227-19, as applicable. The Contractor/manufacturer is: Harmony Healthcare IT, 17390 Dugdale Drive, Suite 200, South Bend, Indiana 46635.
- 10. General.** The following miscellaneous provisions shall apply to all sections of this Agreement:
- a. Choice of Law.** This Agreement shall be construed and enforced in accordance with the internal laws of the State of Wyoming, without regard to choice of law principles.
 - b. Disputes.** If legal proceedings are commenced to resolve a dispute arising out of or relating to this Agreement, the prevailing party shall be entitled to recover all costs, legal fees, and expert witness fees as well as any costs of legal fees in connection with any appeals.
 - c. Indemnification.** Each Party shall indemnify and hold harmless the other Party, including Affiliates and each of their respective officers, directors, shareholders, employees, representatives, agents, successors and assigns from and against any and all claims, judgments, awards, costs, expenses, damages, and liabilities (including reasonable attorney fees) of whatsoever kind and nature that may be asserted, granted, or imposed against the other Party, and all associated Losses, to the extent arising directly or indirectly out of or in connection with the Services, Software, the Documentation, or any breach of this Agreement by the Party.
 - d. Severability.** In the event that any provision of this Agreement conflicts with the law under which this Agreement is to be construed or if any such provision is held invalid by a court with jurisdiction over the Parties to this Agreement, such provision shall be deemed to be restated or redacted to reflect as nearly as possible the original intention of the Parties in accordance with applicable law, and the remainder of this Agreement shall remain in full force and effect.
 - e. Independent Contractor.** Each party is an independent contractor hereunder and this Agreement shall not in any way create a partnership, joint venture, employer-employee, franchisor-franchisee or agency relationship between the Parties.
 - f. Compliance with Laws.** Licensee shall comply with all laws, statutes and regulations governing or otherwise applicable to this Agreement.
 - g. Transfer and Assignment.** This Agreement and any rights hereunder may not be assigned or otherwise transferred by Licensee without the prior written consent of Licensor, which may be withheld for any reason or no reason. This Agreement shall be freely assignable and transferable by Licensor for any reason, and Licensor shall be allowed to use additional employees, subcontractors or independent contractors for the provision of services without the prior consent of Licensee.
 - h. Counterparts.** This Agreement may be executed in two or more counterparts, each of which shall be deemed an original, but all of which together shall constitute one and the same instrument.
 - i. Binding Effect.** This Agreement shall be binding upon and shall inure to the benefit of the Parties hereto and their respective successors and assigns, and no other person shall acquire any right under or by virtue of this Agreement. Provided, however, no assignment of this Agreement or of any right, duty or obligation to be granted or performed hereunder shall be made without the prior written consent of the other parties.

- j. **Waiver of Breach and Survival.** The waiver by either party of a breach of any provision of this Agreement shall not constitute a waiver of any succeeding breach of such provision or a waiver of such provision itself nor shall any delay on the part of either party to act upon any breach be deemed a waiver thereto. The sections of this Agreement that by their terms survive the termination or non-renewal of this Agreement shall so survive.
- k. **Limitations on Rights of Third Parties.** Nothing expressed or implied in this Agreement is intended or shall be construed to confer upon or give any person other than the Parties hereto any rights or remedies under or by reason of this Agreement or the transactions contemplated hereby.
- l. **Force Majeure.** In the event that the actions of either party, other than the payment of any amounts due hereunder, shall be delayed or hindered in or prevented from the performance of any act required hereunder by reason of strikes, lockouts, labor troubles, inability to procure materials, failure of utilities, riots, insurrection, war, terrorist attack, acts of God, or other reason beyond the party's reasonable control, then performance of such act shall be excused for the period of the delay and the period for the performance of any such act shall be extended for a period equivalent to the period of such delay.
- m. **Contacting Licensor.** The Licensor telephone number can be accessed 24 hours a day, 7 days a week. Licensor maintains on-call staff members for technical emergencies. Licensor may use its judgment as to what constitutes an emergency.
- n. **Authority to Execute Agreement.** All persons executing the Agreement in a representative capacity warrant that they have authority to execute this Agreement and bind the entities they purport to represent.
- o. **Warranties and Limitations.**
 - 1. In order for any warranties to be valid, the following conditions must be met: (i) the Software has not been modified, changed, or altered by anyone other than the Licensor; (ii) the operating environment, including both hardware and systems software, meets the Licensor's recommended specifications; (iii) the computer hardware is in good operational order and is installed in a suitable operating environment; (iv) Licensee promptly notifies Licensor of its need for service; (v) Licensee provides adequate troubleshooting information and access so that the Licensor can identify and address problems; and (vi) all fees due to the Licensor have been paid.
 - 2. If all conditions in subparagraph (o)(1) have been met, Licensor warrants that the Software shall perform substantially in accordance with the Documentation for ninety (90) days from shipment. Licensor's entire liability and Licensee's exclusive remedy for breach of this warranty shall be for Licensor, at its option, either to: (i) return the License Fee paid for the Software; (ii) replace software that does not meet the limited warranty described herein and which is returned to Licensor with the original media and a copy of Licensee's receipt; or (iii) attempt to correct any errors which Licensee may find in the Software during the above-described warranty period and which prevent the Software from performing substantially in accordance with the Documentation.
 - 3. If all conditions in subparagraph (o)(1) have been met, Licensor warrants that it will use reasonable efforts to perform the Services contemplated under the Agreement. Licensee's sole and exclusive remedy for breach of this warranty is the right to terminate this Agreement immediately for the affected Software upon written notice to Licensor.
 - 4. Licensor will use commercially reasonable efforts to make the Hosting Services available in accordance with prevailing hosting industry standards, taking into account the Licensee's workstations and the speed of their connection to Licensor's hardware (the "Technical Standards"). Licensor will use commercially reasonable efforts under the circumstances to

remedy any interruptions, omissions, mistakes, accidents or errors in the Hosting Services (hereinafter "Defects") and restore the Hosting Services substantially in accordance with the Technical Standards. Upon notification in writing by Licensee of a failure in the Hosting Services to meet the Technical Standards, Licensor shall have twenty-four (24) hours in which to restore the Hosting Services substantially in accordance with the Technical Standards. Licensor further warrants that it will not materially decrease the overall security of the Hosting Services during the Term and that the Hosting Services will not introduce malevolent code into your systems. Licensee's exclusive remedy is termination, as provided in paragraph 7 of Exhibit 5. Licensor does not make, and hereby disclaims all other warranties as may pertain to the Hosting Services, whether express or implied, including but not limited to, the implied warranties of merchantability, non-infringement and fitness for a particular purpose, and except as set forth in this paragraph the Hosting Services are provided or performed on an "as is" basis. Licensor does not warrant that the Hosting Services provided hereunder will be uninterrupted, error-free, without slow response time or completely secure.

5. In no event shall Licensor be liable to Licensee or any third party for any losses; costs of procurement of substitute goods or services; lost profits; lost sales or business expenditures; investments; stolen data; lost data or commitments in connection with any business; loss of good will; delays; interruptions; viruses; or any indirect, punitive, exemplary, special, incidental or consequential damages arising out of or related to this Agreement, use of the Software or Documentation, performance of the Services or Hosting Services. These limitations shall apply notwithstanding any failure of essential purpose of any limited remedy. Notwithstanding anything to the contrary, Licensor's aggregate liability to Licensee (including attorney's fees), if any, shall not exceed the amount of the fees paid to Licensor by Licensee under this Agreement during the one (1) month immediately preceding the date on which such claim accrued.
6. No action, regardless of form, arising out of any transaction under this Agreement, may be brought by Licensee more than one year after Licensee has knowledge of the occurrence which gives rise to the cause of such action.

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Exhibit 3: Software License Agreement

1. **Grant of License.** Licensors hereby grants to Licensee a nonexclusive, nontransferable, limited license to use the software products described in Section 2, below (the “Software”), and the associated user and technical documentation (the “Documentation”), subject to the terms and conditions of this Agreement, including without limitation Exhibit 2 (Standard Terms and Definitions) which is attached hereto and incorporated herein by reference, and in consideration of timely payment of the License Fee and other charges described in Section 3, below. The license fee is based on the number of Data Sources, as defined in Exhibit 1 and any additional future Statement of Work entered into hereunder and noted in Section 2, below.

Legal title to the Software and Documentation shall remain with Licensors as its sole property during the entire term of this Agreement.

2. **Description of Software.** The Software licensed by Licensors to Licensee under this Agreement shall be included in Exhibit 1 and any additional future Statement of Work entered into hereunder.

3. **Payment:**

- a. Licensee shall pay Licensors the License Fee set forth in Exhibit 1 and any additional future Statement of Work entered into hereunder.
- b. Unless otherwise stated, all prices and fees are exclusive of state and local use, sales, and other applicable taxes and duties. Any applicable taxes will be paid by Licensee. Taxes will appear as separate additional items on Licensors’s invoices unless Licensee provides Licensors with a valid tax exemption certificate acceptable to relevant taxing authorities. Licensee shall indemnify Licensors against all applicable taxes and duties assessed in connection with the Agreement.
- c. All payments shall be due within 30 days after receipt of Licensors’s invoice. Any payment received after its due date shall bear interest at a rate of 1.5% per month for each month or fraction of a month beyond the payment due date.
- d. The Software shall be immediately returned to Licensors if any fees due under this Agreement are not paid as required.

4. **Term.** This Software License Agreement shall commence upon the Effective Date and remain in full force and effect for a period of five (5) years. Thereafter, this Software License Agreement will automatically renew for successive one-year terms upon the same terms and conditions unless and until terminated, as provided herein.

5. **Termination.** Licensee may terminate this Agreement without cause after five (5) years. Licensee may terminate this Agreement with cause where Licensors fails to cure breach of this Agreement within sixty (60) days written notice of breach of this Agreement to Licensors. Licensors may terminate this Software License Agreement at any time upon written notice to the other party. Licensee shall be entitled to a complete refund of the License Fee if it terminates this Software License Agreement within thirty (30) days of the original Effective Date. Upon termination, Licensee shall dispose of the Software and Documentation and all copies thereof either by returning such Software and Documentation to Licensors or by destroying the same and certifying such destruction in writing. Upon termination, Licensors shall provide Licensee a copy of the data upon termination of this agreement. The data will be delivered to Licensee as a backup of the relational database and any associated files. If Licensee requires the data in any other format, Licensors will provide Licensee a proposal for those services.

6. Technology Escrow Terms. Concurrent with execution of this Agreement, Licensee may opt-in, at its own expense, to the escrow terms below. Pursuant to these terms, Licenser will deposit with an Escrow Agent the source code for Software.

- a. Enrollment.** Licenser will enroll Licensee as a beneficiary with the Escrow Agent. Licensee shall receive notification from Escrow Agent of enrollment as a named beneficiary.
- b. Verification.** At Licensee's request and expense, the Escrow Agent may at any time verify deposit material. In the event that the Escrow Agent informs the Parties that the deposit material does not conform, Licenser will promptly deposit conforming deposit material.
- c. Release Conditions.** Escrow Agent will release source code to Licensee under one of the following circumstances (i) bankruptcy of Licenser; (ii) Licenser ceases trading; (iii) Licenser discontinues development of the Software.

7. Injunctive Relief. Because of the unique nature of the Software and Documentation, Licensee understands and agrees that Licenser will suffer irreparable injury in the event Licensee fails to comply with any of the terms of this Agreement and that monetary damages may be inadequate to compensate Licenser for such breach. Accordingly, Licensee agrees that Licenser will, in addition to any other remedies available to it at law or in equity, be entitled to injunctive relief, without posting a bond, to enforce the terms of this Agreement.

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Exhibit 4: Support and Maintenance Agreement

- 1. Software Support and Maintenance.** Licensor shall provide technical support in response to specific inquiries by Licensee as well as software maintenance by way of patches, updates, upgrades, and error-correction services (the “Services”) as set forth in any Statement of Work entered into hereunder. In exchange for the Services, Licensee shall pay to Licensor the fee set forth in Exhibit 1 and any additional future Statement of Work entered into hereunder. Licensor shall have the right to change the fee provided that Licensor gives Licensee at least sixty (60) days written notice of such change.
- 2. Term and Termination.**
 - a. Term.** Licensee agrees that the Services Term will be equal to the Software License Agreement Term, including its automatic renewal provision.
 - b. Termination.** The Support and Maintenance Agreement shall terminate (i) immediately upon termination or expiration of Licensee’s right to use the Software; or (ii) upon Licensee’s failure to comply with any provision of the Agreement. The termination of this Support and Maintenance Agreement will result in the automatic termination of the Software License Agreement, and vice versa.
- 3. License Support.** The level of support that the Licensor can provide is dependent upon the cooperation of Licensee and the quantity of information that Licensee can provide. If the Licensor cannot reproduce a problem or if the Licensee cannot successfully gather adequate troubleshooting information, the Licensor may need temporary login access on the Licensee’s system to identify and address the problem.
- 4. Licensee Responsibility.** The Licensee shall not distribute the Software to any third party. The Licensee shall not make any modifications to the Software. If Licensee makes modifications to the Software, the Licensor shall not be responsible for maintaining Licensee’s modified portions of the Software or for maintaining portions of the Software affected by Licensee’s modified portions of the Software. Corrections for difficulties or defects traceable to the Licensee’s errors or systems changes shall be billed at the Licensor’s standard time and material rates
- 5. Right to Work Product.** All error corrections, enhancements, new releases, and any other work product created by the Licensor in connection with the support services provided under this Agreement (the “Work Product”) are and shall remain the exclusive property of the Licensor regardless of whether the Licensee, its employees, or agents may have contributed to the conception, joined in its development, or paid the Licensor for the development or use of the Work Product. Such Work Product shall be considered part of the Software, and subject to the terms and conditions contained herein and in the License Agreement.

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Exhibit 5: Hosted Software Services Agreement

1. **Hosting Services.** Subject to Licensee's payment of the applicable fees for the Hosting Services described herein as set forth in Section 4 ("Hosting Fees"), Licenser will provide Licensee, on a non-exclusive basis, the Hosting Services described herein through which Licensee may access and use the Hosted Software. Licenser will (i) maintain the Hosted Software, together with all required third party software; (ii) utilize a platform of Licenser's choice to host the Hosted Software; and (iii) provide Licensee with real-time access to the Hosted Software in order for Licensee to run the Hosted Software and use it for its intended purposes.
2. **Limitation on Use of Hosting Services**
 - a. **Use by Licensee.** Licensee acknowledges and agrees that Licensee may use the Hosting Services only for its internal operations and for providing services to its organization.
 - b. **Software.** This Hosted Software Services Agreement ("Hosting Agreement") solely covers the Hosting Services provided by Licenser. No license to use any software is explicitly stated or implied within this Hosting Agreement. A license to use any software must either be agreed to elsewhere in the Agreement or the applications must be purchased and/or licensed separately.
3. **Access to Hosted Software.** Access rights granted to Licensee shall be limited to those rights necessary to use the functions provided in the Hosted Software, and necessary for its use. Licenser reserves the right to restrict or prevent access to: (i) any and all functions that access critical server or system resources; or (ii) directly modify the Hosted Software directories or database.
4. **Hosting Fees.** Licensee agrees to pay all fees relating to Hosting Services provided by the Licenser which are agreed upon by Licenser and Licensee and detailed in Exhibit 1.
5. **Ownership of Data and Operating System.** As between Licenser and Licensee, Licensee owns all data which is hosted under this Agreement by Licensee. Licenser may keep records of such data as may be necessary to comply with applicable laws and regulations or to verify Licensee's system usage levels. All production systems, programs, operating instructions, and other documentation prepared and/or provided by Licenser to Licensee shall be and remain Licenser's property. Licenser will provide Licensee a copy of the data upon termination of this agreement. The data will be delivered to Licensee as a backup of the relational database and any associated files. If Licensee requires the data in any other format, Licenser will provide Licensee a proposal for those services.
6. **Licensee Responsibilities and Acknowledgements.** Licensee acknowledges, agrees and understands that: (i) the Hosted Software will be housed at Licenser's chosen hosting facility, and will be operated on a server or servers as determined by Licenser; (ii) Licensee has purchased or legally obtained licenses for the Hosted Software, and has the right to have Licenser provide the Hosting Services outlined in this Hosting Agreement; (iii) Licensee will only use the Hosted Software in accordance to each application's license agreement; and (iv) this Hosting Agreement does not grant Licensee any additional rights above those included in the Hosted Software's License Agreement to utilize, distribute, or make available the Hosted Software to anyone within the Licensee's organization, or any third parties.
7. **Term, Termination, Renewal.**
 - a. **Term/Renewal.** All terms and conditions of this Hosting Agreement shall be in full force and effect during from the date of agreement execution and any periods hereunder. This Hosting Agreement shall automatically renew for successive equivalent periods, unless notice is given by either party of its intent to terminate the Hosting Agreement. Any fees paid to Licenser for services preformed are not subject to refund.
 - b. **Termination.** Licenser shall have the right to immediately terminate this Hosting Agreement if

Licensee is in breach of this Hosting Agreement, including but not limited to failure to pay Hosting Fees, and the breach is not cured within thirty (30) days of receiving written notice of such breach.

- c. **Effect.** Upon termination of this Hosting Agreement, access to the Hosted Software will be immediately discontinued.

8. **Confidential Information.** Licensee will not disclose to any third party any confidential or proprietary information of Licensor or any technical information relative to the setup and security of the Hosting Services unless such disclosure is approved in writing by Licensor.

9. **Data Center and Server Access**

- a. **Data Center Access.** Access to Licensee's server's data or Licensee's data on Licensor's web or database servers is restricted. Requests to grant access to the server or data must be made by email or fax and be sent from an authorized person. This is done to protect Licensee's data and code, and to provide documentation as to who has access to what. Co-located servers may be located behind a firewall with port restrictions as specified by the Licensee, if desired. Licensor will strive to maintain its servers, and monitor their activity in a professional manner, but is not liable for data loss due to the activities of hackers or crackers.
- b. **Availability of Servers.** Licensor shall endeavor to provide the Licensee with Hosting Services for twenty-four (24) hours a day, seven (7) days a week throughout the term of this agreement.
- c. **Backups.** Licensor will back up each server nightly to a remote data center and will hold those backups for 30 days. The remote facility maintains enough capacity to restore all Licensee environments in the event of a primary data center failure. In addition to daily backups, the primary storage environment is replicated to a redundant storage environment every hour within the primary data center. These replications would be used in the event of a server failure or primary storage network failure.

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BUSINESS ASSOCIATE AGREEMENT

This Business Associate Agreement (this "Agreement") is made effective as of _____, (the "Effective Date"), by and between Business Interactions, LLC, d/b/a Harmony Healthcare IT, of 17390 Dugdale Drive Suite 200, South Bend, Indiana 46635, hereinafter referred to as "Business Associate", and _Memorial Hospital of Sweetwater County_, of 1200 College Drive, Rock Springs, __Wyoming, 82901 hereinafter referred to as "Covered Entity", (individually a "Party" and collectively, the "Parties").

WITNESSETH:

WHEREAS, Sections 261 through 264 of the federal Health Insurance Portability and Accountability Act of 1996, Public Law 104-191, known as "the Administrative Simplification provisions," direct the Department of Health and Human Services to develop standards to protect the security, confidentiality and integrity of health information; and

WHEREAS, pursuant to the Administrative Simplification provisions, the Secretary of Health and Human Services has issued regulations modifying 45 CFR Parts 160 and 164 (the "HIPAA Privacy Rule"); and

WHEREAS, the Parties wish to enter into or have entered into an arrangement whereby Business Associate will provide certain services to Covered Entity, and, pursuant to such arrangement, Business Associate may be considered a "business associate" of Covered Entity as defined in the HIPAA Privacy Rule (the agreement evidencing such arrangement is reflected in a written agreement, and is hereby referred to as the "Arrangement Agreement"); and

WHEREAS, Business Associate may have access to Protected Health Information (as defined below) in fulfilling its responsibilities under such arrangement;

THEREFORE, in consideration of the Parties' continuing obligations under the Arrangement Agreement, compliance with the HIPAA Privacy Rule, and other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, the Parties agree to the provisions of this Agreement in order to address the requirements of the HIPAA Privacy Rule and to protect the interests of both Parties.

I. DEFINITIONS

Except as otherwise defined herein, any and all capitalized terms in this Agreement shall have the definitions set forth in the HIPAA Privacy Rule.

The term "Protected Health Information" means individually identifiable health information including, without limitation, all information, data, documentation, and materials, including without limitation, demographic, medical and financial information, that relates to the past,

present, or future physical or mental health or condition of an individual; the provision of health care to an individual; or the past, present, or future payment for the provision of health care to an individual; and that identifies the individual or with respect to which there is reasonable basis to believe the information can be used to identify the individual.

II. COORDINATION WITH HIPAA PRIVACY RULE

In the event of an inconsistency between the provisions of this Agreement and mandatory provisions of the HIPAA Privacy Rule, as amended, the HIPAA Privacy Rule in effect at the time shall control. Where provisions of this Agreement are different than those mandated in the HIPAA Privacy Rule, but are nonetheless permitted by the HIPAA Privacy Rule, the provisions of this Agreement shall control.

The parties agree that, in the event that any documentation of the arrangement pursuant to which Business Associate provides services to Covered Entity contains provisions relating to the use or disclosure of Protected Health Information, which are more restrictive than the provisions of this Agreement, the provisions of the more restrictive documentation will control. The provisions of this Agreement are intended to establish the minimum requirements regarding Business Associate's use and disclosure of Protected Health Information.

III. OBLIGATIONS AND ACTIVITIES OF BUSINESS ASSOCIATE

(a) Business Associate acknowledges and agrees that all Protected Health Information that is created or received by Covered Entity and disclosed or made available in any form, including paper record, oral communication, audio recording, and electronic display by Covered Entity or its operating units to Business Associate or is created or received by Business Associate on Covered Entity's behalf shall be subject to this Agreement.

(b) Business Associate agrees to not use or further disclose Protected Health Information other than as permitted or required by the Agreement or as required by law.

(c) Business Associate agrees to use appropriate safeguards to prevent use or disclosure of Protected Health Information other than as provided for by this Agreement.

(d) Business Associate agrees to mitigate, to the extent practicable, any harmful effect that is known to Business Associate of a use or disclosure of Protected Health Information by Business Associate in violation of the requirements of this Agreement.

(e) Business Associate agrees to report to Covered Entity any use or disclosure of the Protected Health Information not provided for by this Agreement.

(f) Business Associate agrees to ensure that any agent, including a subcontractor, to whom it provides Protected Health Information received from, or created or received by Business Associate on behalf of Covered Entity agrees to the same restrictions and conditions that apply through this Agreement to Business Associate with respect to such information.

(g) Business Associate agrees to make available Protected Health Information to the extent and in the manner required by Section 164.524 of the HIPAA Privacy Rule.

(h) Business Associate agrees to make Protected Health Information available for amendment and incorporate any amendments to Protected Health Information in accordance with the requirements of Section 164.526 of the HIPAA Privacy Rule.

(i) Business Associate agrees to make internal practices, books, and records relating to the use and

disclosure of Protected Health Information received from, or created or received by Business Associate on behalf of, Covered Entity available to the Covered Entity, or at the request of the Covered Entity to the Secretary of Health and Human Services.

(j) Business Associate agrees to document any disclosures of and make Protected Health Information available for purposes of accounting of disclosures, as required by Section 164.528 of the HIPAA Privacy Rule.

IV. PERMITTED USES AND DISCLOSURES BY BUSINESS ASSOCIATE

(a) Except as otherwise limited in this Agreement, Business Associate may use or disclose Protected Health Information to perform functions, activities, or services for, or on behalf of, Covered Entity as specified in the Arrangement Agreement, provided that such use or disclosure would not violate the Privacy Rule if done by Covered Entity.

V. ELECTRONIC PROTECTED HEALTH INFORMATION.

On or before April 21, 2005, the Covered Entity is required to comply with the requirements of the Security Rule.

(a) Business Associate shall implement administrative, physical, and technical safeguards that reasonably and appropriately protect the confidentiality, integrity, and availability of any electronic PHI that it creates, receives, maintains, or transmits on behalf of Covered Entity.

(b) Business Associate shall ensure that any agent, including a subcontractor, agrees to implement reasonable and appropriate safeguards to protect the confidentiality, integrity, and availability of any electronic PHI that it creates, receives, maintains, or transmits on behalf of Covered Entity.

(c) Business Associate agrees to report to Covered Entity any security incident (as defined in the Security Rules) of which Business Associate becomes aware.

VI. TERM AND TERMINATION

(a) Term. The Term of this Agreement shall be effective as of the date first written above, and shall terminate when all of the Protected Health Information provided by Covered Entity to Business Associate, or created or received by Business Associate on behalf of Covered Entity, is destroyed or returned to Covered Entity, or, if it is infeasible to return or destroy Protected Health Information, protections are extended to such information, in accordance with the termination provisions in this Section.

(b) Termination for Cause. Upon Covered Entity's knowledge of a material breach by Business Associate, Covered Entity shall have the right to immediately terminate this Agreement and the Arrangement Agreement.

(c) Effect of Termination.

(i) Except as provided in paragraph (ii) of this subsection, upon termination of this Agreement,

the Arrangement Agreement or upon request of Covered Entity, whichever occurs first, Business Associate shall return or destroy all Protected Health Information received from Covered Entity, or created or received by Business Associate on behalf of Covered Entity. This provision shall apply to Protected Health Information that is in the possession of subcontractors or agents of Business Associate. Business Associate shall retain no copies of the Protected Health Information.

(ii) In the event that Business Associate determines that returning or destroying the Protected Health Information is infeasible, Business Associate shall provide to Covered Entity notification of the conditions that make return or destruction infeasible. Upon mutual agreement of the Parties that return or destruction of Protected Health Information is infeasible, Business Associate shall extend the protections of this Agreement to such Protected Health Information and limit further uses and disclosures of such Protected Health Information to those purposes that make the return or destruction infeasible, for so long as Business Associate maintains such Protected Health Information.

VII. MISCELLANEOUS

(a) No Rights in Third Parties. Except as expressly stated herein or the HIPAA Privacy Rule, the Parties to this Agreement do not intend to create any rights in any third parties.

(b) Survival. The obligations of Business Associate under this Section shall survive the expiration, termination, or cancellation of this Agreement, the Arrangement Agreement and/or the business relationship of the parties, and shall continue to bind Business Associate, its agents, employees, contractors, successors, and assigns as set forth herein.

(c) Amendment. This Agreement may be amended or modified only in a writing signed by the Parties. The Parties agree that this Agreement will be automatically amended to conform to any changes in the Privacy Rule as is necessary for a Covered Entity to comply with the current requirements of the Privacy Rule and the Health Insurance Portability and Accountability Act, Public Law 104-191.

(d) Assignment. No Party may assign its respective rights and obligations under this Agreement without the prior written consent of the other Party.

(e) Independent Contractor. None of the provisions of this Agreement are intended to create, nor will they be deemed to create any relationship between the Parties other than that of independent parties contracting with each other solely for the purposes of effecting the provisions of this Agreement and any other agreements between the Parties evidencing their business relationship.

(f) Governing Law. This Agreement will be governed by the laws of the State of Indiana.

(g) No Waiver. No change, waiver or discharge of any liability or obligation hereunder on any one or more occasions shall be deemed a waiver of performance of any continuing or other obligation, or shall prohibit enforcement of any obligation, on any other occasion.

(h) Interpretation. Any ambiguity of this Agreement shall be resolved in favor of a meaning that permits Covered Entity to comply with the Privacy Rule.

(i) Severability. In the event that any provision of this Agreement is held by a court of competent jurisdiction to be invalid or unenforceable, the remainder of the provisions of this Agreement will remain in full force and effect.

(j) Notice. Any notification required in this Agreement shall be made in writing to the representative of the other Party who signed this Agreement or the person currently serving in that representative's position with the other Party.

(k) Authority to Execute Agreement. All persons executing the Agreement in a representative capacity warrant that they have authority to execute this Agreement and bind the entities they purport to represent.

IN WITNESS WHEREOF, the Parties have executed this Agreement as of the day and year written above.

By Covered Entity:

By Business Associate:

Signature

Signature

Printed Name

Printed Name

Job Title

Job Title

Date

Date

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: **AdBay Cinema Advertising Contract**
2. Purpose of contract, including scope and description: **Cinema motion and package for two 20-second video spots at 13 cinemas in RS & GR.**
3. Effective Date: **Dec. 1, 2020**
4. Expiration Date: **One year from effective date**
5. Rights of renewal and termination. **No termination provision in agreement. But in order to get a discount we have to pay total due up front. So we could ask that ads be pulled and end the agreement but cost would already be paid. Is this auto-renew? NO**
6. Monetary cost of the contract and is the cost included in the department budget? **\$20,000 with bundle discount. Yes, it is budgeted.**
7. Jurisdiction/Choice of Law provision checked and changed to Wyoming if able to so. Jurisdiction not addressed
8. Any confidentiality provisions? **Not addressed or applicable**
9. Indemnification clause present? **No**
10. Is this contract appropriate for other bids? **No. Only service available.**
11. 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: **LINCARE**
2. Purpose of contract, including scope and description: **LINCARE will provide MHSC with ventilators (oxygen concentrators) (See exhibit A). We would like this contract in place so if we need to rent ventilators (Trilogy device) the agreement has already been set up.**
3. Effective Date: **As soon as executed by both parties**
4. Expiration Date: **one year from effective date**
Is this auto renew? **Yes for successive one-year terms**
5. Termination provisions: **60 days written notice prior to the expiration of initial term or renewal term**
6. Monetary cost of the contract: **\$1108.91 for each Trilogy device. We will pay this rental fee for the Trilogy devices only for the months that the equipment is in possession of the Hospital** Budgeted? **Currently not budgeted, this is a need based on covid surge of patients in respiratory distress**
7. Jurisdiction/Choice of Law provision checked and changed to Wyoming if able to so. **Not addressed in agreement**
8. Any confidentiality provisions? **No but Lincare will sign a BAA to protect PHI**
9. Indemnification clause present? **Yes page 2 section 7.0**
10. Is this contract appropriate for other bids? **No**
11. Is County Attorney review required? **No**

**Memorial Hospital of Sweetwater County
Physician Assistant
Supervising Physician Agreement**

This form is to be completed by the supervising physician:

1. I am applying as a **Supervising Physician** for: _____

Name of Physician's Assistant
2. Physician Name: _____

Last First M Degree License
3. My medical specialty is: _____
4. My primary practice area is: _____
5. Define the practice setting i.e. – emergency room, walk-in clinic, women's health, family practice, surgery etc. _____

6. What is the patient population i.e. – pediatrics, geriatrics, all ages etc. _____

7. Please discuss if any the call schedule the PA will have at this practice: _____

8. How often will you be available to the PA for personal contact _____
9. When you are not available in person by what means of communication will the PA be able to reach you _____

STATEMENT OF SUPERVISING PHYSICIAN:

I hereby verify that _____ will be under my direction at all times and I agree to assume full responsibility for his/her actions in dealing with my patients who are hospitalized at Memorial Hospital of Sweetwater County (MHSC) or seen at any of the MHSC clinics. I agree to supervise the above named individual within the scope of their approved privileges. I also agree to notify the hospital when I am no longer supervising this person.

Signature: _____
R 11/10/2020

Date: _____

MENTORING AGREEMENT

This agreement is between the Mentor _____ and the Mentee _____ and will last for the approximate time period of three (3) years and then informally after.

The Mentee's objectives for the Mentoring Program:

- To develop skills and knowledge to be a competent and successful Nurse Practitioner.
- To gain a better understanding of best practice Nurse Practitioner skills and training.
- To learn self-motivation, self-discipline and goal setting techniques.
- To create and follow a three-year action Plan.

Specific assistance Mentor will provide to assist Mentee in achieving objectives (those listed are just some possible examples):

- Assist Mentee in the creation of action Plan that will consist of at least these 4 categories 1. Identified learning needs 2. Goal Setting 3. Resources available to or needed by Mentee to be successful at MHSC 4. How Mentee will be evaluated.
- Assess Mentee's current level of skills and knowledge and make a recommendation as to what education/training Mentee may need for success. These recommendations will be added to the action Plan.
- Monitor NP's relationship with patients and staff.
- Provide guidance, support and feedback to NP.
- Mentor may occasionally have to sign charts for the Mentee if billing goes through the hospital MR.
- In collaboration with department director and HR will update clinical competencies.
- Assign Mentee specific tasks/assignments aimed to develop Mentee's leadership skills.
- Evaluate the Mentee's need for continued action Plan at the end of the three year action Plan.

Steps Mentee will take in order to achieve these objectives:

- Provide Mentor with completed action Plan.
- Read material assigned by Mentor within established time frames.
- Complete tasks/assignments within established time frames.

Mentee's learning outcomes will be measured by:

- Demonstrated knowledge in all of the above listed objectives.
- Completion of action Plan.

Face-to-face meeting will occur weekly beginning. Other ways Mentor and Mentee will communicate will be via telephone and email. Everything discussed in the agreement will be confidential unless otherwise specified at the time of the discussion. This mentoring agreement sets forth the objectives that the Mentor and Mentee commit to working on together. Both agree to follow the guidelines of this agreement for the period specified and to make a good faith effort to resolve any issues that may arise between them.

This Mentoring agreement is not to take the place of the Supervision of the Mentee by the CCO.

Physician Mentor's Signature Date

Nurse Practitioner Mentee's Signature Date

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

Non-Physician Provider

Statement of Supervising/Collaborating Physician

Non-Physician Provider Name: _____

Specialty: _____ NPI: _____

Group Name: _____

Office Address: _____

Office Phone: _____ Office Fax: _____ Cell Phone: _____

Supervising/collaborating physician will provide supervision of the above listed Non-Physician provider (Nurse Practitioner or CNM), in accordance with state law, organizational policies, and the Memorial Hospital of Sweetwater County Medical Staff Bylaws and Rules and Regulations. The supervising/collaborating physician will:

- Sign the privilege request of the Non-Physician Provider he or she supervises, accepting responsibility for appropriate supervision of the services provided and agree that the supervised Non-Physician Provider will not exceed the scope of practice defined by law.
- Be physically present on hospital premises or readily available by electronic communication or provide an alternate to provide consultation when requested, and to intervene when necessary;
- Enter or countersign all Non-Physician provider discharge orders in a timely manner;
- Assume total responsibility for the care of any patient when requested or required by the policies referenced above, or in the interest of patient care.

Supervising/Collaborating Physician

Supervising/Collaborating Physician Name: _____

Specialty: _____ NPI: _____

Group Name: _____

Office Address: _____

Office Phone: _____ Office Fax: _____ Cell Phone: _____

Supervising/Collaborating Physician Signature: _____

Date: _____