

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

July 7, 2021

2:00 p.m.

Dial: 301-715-8592

Meeting ID: 847 6170 0454

Password: 957175

**AGENDA**

- I. Call to Order Taylor Jones
  - A. [Oath of Office](#)
  - B. Roll Call
  - C. Pledge of Allegiance
  - D. [Our Mission and Vision](#) Taylor Jones
  - E. 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. Employee Policy *(from the Human Resources Committee)* Ed Tardoni
    - 1. Termination and Appeals
    - 2. Introductory Period
  - B. Rules of Practice Governing Hearings Taylor Jones
  - C. Medical Staff Bylaws Dr. Jacques Denker, *Medical Staff President*
  - D. [Performance Improvement and Patient Safety \(PIPS\) Plan](#) *(For Action)* Kara Jackson,  
*Director of Quality, Accreditation, Patient Safety*
- VI. New Business (Review and Questions/Comments) Taylor Jones
  - A. Election of Officers *(For Action)* Barbara Sowada
  - B. Committee Assignments
  - C. [Board Reporting Calendar](#) Kara Jackson
  - D. [FY 2022 PIPS Priorities](#) Kara Jackson
  - E. [Board Policies](#) Barbara Sowada
- 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](#) Ed Tardoni
    - 1. [Capital Expenditure Requests](#) *(For Action)*
    - 2. [CARES Act Capital Expenditure Requests](#) *(For Ratification)*
    - 3. Bad Debt *(For Action)*  
[June Committee Meeting Information](#)

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- |                                                     |                    |
|-----------------------------------------------------|--------------------|
| D. <a href="#">Building &amp; Grounds Committee</a> | Marty Kelsey       |
| E. Foundation Board                                 | Taylor Jones       |
| F. <a href="#">Compliance Committee</a>             | Ed Tardoni         |
| G. Governance Committee                             | Barbara Sowada     |
| H. Executive Oversight and Compensation Committee   | Taylor Jones       |
| I. Joint Conference Committee                       | Taylor Jones       |
| IX. Contract Review                                 | Suzan Campbell     |
| A. Contract Consent Agenda <i>(For Action)</i>      |                    |
| 1. <a href="#">Interim IT Director</a>              |                    |
| 2. <a href="#">Radio Network</a>                    |                    |
| 3. <a href="#">Sweetwater Now</a>                   |                    |
| 4. <a href="#">WyoRadio</a>                         |                    |
| 5. <a href="#">Young at Heart Child Care Center</a> |                    |
| X. Medical Staff Report                             | Dr. Jacques Denker |
| XI. Good of the Order                               | Taylor Jones       |
| XII. Executive Session (W.S. §16-4-405(a)(ix))      | Taylor Jones       |
| XIII. Action Following Executive Session            | Taylor Jones       |
| XIV. Adjourn                                        | Taylor Jones       |



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OATH OF OFFICE

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I, KANDI PENDLETON, do solemnly swear and affirm that I will obey and defend the Constitution of the United States; and the Constitution of the State of Wyoming, and that I will faithfully and impartially discharge and perform the duties of my office as a member of the Board of Trustees of Memorial Hospital of Sweetwater County; that I have not paid or contributed, or promised to pay or contribute, either directly or indirectly, any money or other valuable thing, to procure my appointment; that I have not knowingly violated any law of the State of Wyoming in order to be appointed, or procured my appointment by others in my behalf; and that I will not knowingly receive, directly or indirectly, any money or other valuable thing for the performance or nonperformance of any act or duty pertaining to my position on the Board of Trustees.

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Kandi Pendleton, Affiant

THE STATE OF WYOMING        )  
                                              : ss  
COUNTY OF SWEETWATER        )

The foregoing Oath of Office was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, **2021.**

WITNESS my hand and official seal.

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Notary Public, State of Wyoming

My commission expires:



# 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**

**June 2, 2021**

The Board of Trustees of Memorial Hospital of Sweetwater County met via Zoom in regular session on June 2, 2021, at 2:00 PM with Mr. Taylor Jones, President, presiding.

**CALL TO ORDER**

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

Officially present: Ms. Irene Richardson, Chief Executive Officer; Dr. Jacques Denker, Medical Staff President; Mr. Geoff Phillips, Legal Counsel; and Mr. Jeff Smith, Sweetwater County Board of County Commissioners Liaison.

**Pledge of Allegiance**

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

**Our Mission and Vision**

Mr. Tardoni read aloud the mission and vision statements.

**Mission Moment**

Ms. Richardson said there are many great things going on. We have started sending out copies of thank you cards and survey comments weekly in “Thankful Thursday” e-mails to staff. Ms. Richardson read aloud several of the thank you note messages.

**APPROVAL OF AGENDA**

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

**APPROVAL OF MINUTES**

The motion to approve the minutes of the May 5, 2021, regular meeting as presented was made by Mr. Tardoni; second by Mr. Mathey. Motion carried.

**COMMUNITY COMMUNICATION**

There were no comments.

## **OLD BUSINESS**

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

Ms. Kim White, Incident Commander and Director of Emergency Services, reported Incident Command continues to meet bi-weekly. We continue to have processes and protocols in place. The current positivity rate is 6.8%. Ms. White said we are still seeing quite a few Covid cases in the Emergency Department and have approximately two patients per day in the ICU. We maintain and do all we can until things start trending down again.

### **Termination and Appeals Policy, Introductory Period, Rules of Practice Governing Hearings, Medical Staff Bylaws**

Mr. Jones said placeholders remain on the agenda for the Termination and Appeals Policy, the Introductory Period Policy, Rules of Practice Governing Hearings, and Medical Staff Bylaws.

### **Emergency Operations Plan**

The motion to approve the plan as presented was made by Dr. Sowada; second by Mr. Kelsey. Motion carried.

### **Board Self-Assessment**

Dr. Sowada reviewed the survey standardized by The Governance Institute. She said the full report is available in the board portal. The information compares 2018 results to this year as well as national averages. Dr. Sowada said the results show the board is relatively strong in fiscal oversight and duty of loyalty. There are some areas we can focus on to improve. The Board has a sense of where they need to spend their time. Dr. Sowada said she is proud of the Board and the senior leadership team. Mr. Jones said he appreciates the Board looking at the information critically and rating themselves accurately. Mr. Tardoni said he feels iProtean is a good self-directed resource. Dr. Sowada said the Governance Committee will review some options and bring back to the Board by August.

## **NEW BUSINESS**

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

Ms. Kara Jackson, Director of Quality, Accreditation, and Patient Safety, briefly reviewed the plan. She said we bring the plan to the Board every year for review and approval. The FY22 PIPS Priorities will be presented to the Board at the July meeting.

### **Election of Officer Guidelines**

Dr. Sowada said this policy is one that has been under review. We have about 18 policies under review right now. She said we will bring them to the Board as an agenda item. This policy is timely due to the election in July. The Governance Committee is putting together a slate of officers. Anyone interested may submit their name by June 15. Any office with two or more names will be

voted on. The motion to adopt the policy as presented was made by Mr. Mathey; second by Mr. Kelsey. Motion carried.

## **CHIEF EXECUTIVE OFFICER REPORT**

Ms. Richardson introduced new leadership directors: Ms. Jeanne West, Director of Case Management; Ms. Patty O'Lexey, Director of Education; Ms. Marianne Sanders, Director of Physician Recruitment and Relations. Ms. Richardson provided a 2018-2021 Strategic Plan update in the focus areas of Patient Experience, Quality and Safety, Community and Growth, Workplace Experience, Financial Stewardship. Ms. Richardson reported she is meeting with senior leaders every Monday in June to prepare for the 2021-2024 Strategic Plan. She would like one or two Trustees to join each meeting to ensure we have Board input. We have a Retreat scheduled July 14. If the Board recommends timing changes, please let her know. Ms. Richardson provided a Cerner project update and said we continue to plan for go-live in October. Ms. Richardson will provide her annual report to the Board of County Commissioners June 15. Ms. Richardson serves on the American Hospital Association Regional Policy Board. The next quarterly meeting is June 4. The Wyoming Hospital Association annual meeting is in Casper September 7-9. Trustees are invited to participate. Ms. Richardson reminded Trustees to sign in to iProtean to complete the assigned coursework. She expressed her personal appreciation for Mr. Mathey and said he will be recognized later in the meeting.

## **COMMITTEE REPORTS**

### **Quality Committee**

Mr. Kelsey said he did not have anything to add to the information in the packet.

### **Human Resources Committee**

Mr. Tardoni said the packet includes a list of employee policies that have been reviewed. He said if there are changes recommended, the policy goes through the HR Committee. Mr. Tardoni asked if the Board approves of the current process. Following discussion, Mr. Tardoni said he will proceed with the current process.

### **Finance and Audit Committee**

**Capital Expenditure Requests:** The motion to approve capital expenditure request FY21-77 for an interface with Cerner for \$69,488 was made by Mr. Tardoni; second by Mr. Jones. Motion carried. The motion to approve capital expenditure request FY21-80 for Synergy quality software to replace MIDAS for \$50,000 was made by Mr. Tardoni; second by Mr. Jones. Motion carried. The motion to approve FY21-81 for treadmills for tests for \$57,333.62 was made by Mr. Tardoni; second by Mr. Jones. Motion carried.

**Bad Debt:** The motion to approve the net potential bad debt of \$761,198.65 as presented by Mr. Ron Cheese, Director of Patient Financial Services, was made by Mr. Tardoni; second by Mr. Jones. Motion carried.

Ms. Tami Love, Chief Financial Officer, provided an overview of the FY22 Operating and Capital Budget. The motion to approve the FY22 Operating and Capital Budget as presented was made by Mr. Tardoni; second by Mr. Jones. Motion carried. Ms. Love thanked staff for their hard work and assistance.

### **Building & Grounds Committee**

Mr. Kelsey said he did not have anything to add to the information in the meeting packet.

### **Foundation**

Mr. Jones said the Foundation Board of Directors did not meet.

### **Compliance Committee**

Mr. Tardoni said the Committee did not meet.

### **Governance Committee**

Dr. Sowada said she did not have anything to add to the information in the packet.

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

Mr. Jones said the Board will discuss in executive session.

### **Joint Conference Committee**

Mr. Jones said there is nothing new to report.

## **CONTRACT REVIEW**

### **Contract Consent Agenda**

The motion to approve the contracts as presented was made by Dr. Sowada; second by Mr. Tardoni. Motion carried.

## **MEDICAL STAFF REPORT**

Mr. Jones said Dr. Denker is with patients and said he appreciates patients come first. Mr. Jones thanked everyone for their work to prepare for The Joint Commission visit and the tremendous improvements that came with lots of hard work, diligence, and everyone pitching in. Mr. Jones thanked Dr. Sowada for her work with the self-assessment. He thanked everyone for their work on the budget.

## **RECOGNITION**

Mr. Jones said Ms. Richardson shared very appropriate comments and compliments for Mr. Mathey in her report. He said he can't thank Mr. Mathey enough for his guidance, help, dedication, and countless hours. Mr. Jones said the Hospital would not be in its current position without Mr. Mathey's guidance, intelligence, and service. Mr. Jones said he has learned a great deal from Mr. Mathey. On every board, everyone bring something to the table. Mr. Jones said he has never learned as much as he has from Mr. Mathey. Mr. Tardoni said Mr. Mathey was the parachute that stabilized everything and said he appreciated that Mr. Mathey brought us to a nice, safe landing. Mr. Jones said we wish Mr. Mathey the best in his retirement. Mr. Mathey was presented with a framed picture of the Hospital and Trustees along with a sand art sculpture and appreciation plaque.

## **GOOD OF THE ORDER**

Mr. Tardoni said the State Miners' Board met in person. They are going to alternate meetings in-person and via Zoom moving forward.

## **EXECUTIVE SESSION**

Mr. Jones said there would be an executive session. He said the Board would take a ten-minute break and reconvene in executive session. The motion to go into executive session was made by Dr. Sowada; second by Mr. Mathey. Motion carried.

## **RECONVENE INTO REGULAR SESSION**

At 4:49 PM, the motion to leave executive session and return to regular session was made by Mr. Mathey; second by Dr. Sowada. Motion carried.

## **ACTION FOLLOWING EXECUTIVE SESSION**

### **Approval of Privileges**

The motion to approve privileges of the healthcare professionals discussed in executive session was made by Mr. Mathey; second by Mr. Tardoni. Motion carried.

#### **Credentials Committee Recommendations from May 11, 2021**

1. Initial Appointment to Active Staff (2 years)
  - Dr. Joshua Binks, Radiation Oncology
2. Initial Appointment to Locum Tenens Staff (1 year)
  - Dr. Wallace Curry, Urology
  - Dr. Joseph Sturdivant, Hospitalist
3. Reappointment to Active Staff (2 years)
  - Dr. Rahul Pawar, Nephrology
4. Reappointment to Consulting Staff (2 years)
  - Dr. Eric Tuday, Cardiovascular Disease (U of U)
5. Reappointment to Locum Tenens Staff (1 year)
  - Dr. Mary Murphy, Radiology
  - Dr. Chandrashekar Yeshlur, Pediatrics

6. Reappointment to AHP Staff (2 years)
  - Michael Bauer, Licensed Professional Counselor (SWCS)
  - Julie Scott, Licensed Professional Counselor (SWCS)
7. Old Business:
  - Credentialing Policy
  - Delegated Credentialing
8. New Business:
  - Conditions of Affiliation

The motion to authorize the CEO to execute contracts with healthcare professionals discussed in executive session was made by Mr. Mathey; second by Dr. Sowada. Motion carried.

The motion to authorize the CEO to pay employee bonuses as discussed in executive session was made by Mr. Mathey; second by Mr. Tardoni. Motion carried.

Ms. Kerry Downs, Director of Medical Staff Services, reviewed the Credentials Committee old business and new business items. The motion to approve the delegated credentialing policy as presented was made by Dr. Sowada; second by Mr. Kelsey. Motion carried. The motion to approve the conditions of affiliation information as presented was made by Mr. Mathey; second by Dr. Sowada. Motion carried.

### **ADJOURNMENT**

Mr. Jones thanked everyone. Mr. Jones repeated we cannot thank Mr. Mathey enough and wished him an amazing retirement. There being no further business to discuss, the meeting adjourned at 4:53 PM.

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Mr. Taylor Jones, President

Attest:

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Mr. Marty Kelsey, Secretary





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Approved: N/A

Review Due: N/A

Document Area: *General - Housewide*

Reg. Standards: *A-0263, A-0273, A-0283, A-0286, A-0297, A-0308, A-0309, A-0315, TJC LD.01.01.01, TJC LD.01.02.01, TJC LD.01.03.01, TJC LD.01.05.01, TJC LD.02.01.01, TJC LD.02.02.01, TJC LD.02.04.01, TJC LD.03.01.01, TJC LD.03.02.01, TJC LD.03.03.01, TJC LD.03.04.01, TJC LD.03.05.01, TJC LD.03.06.01, TJC LD.03.07.01, TJC LD.03.09.01, TJC LD.03.10.01, TJC PI.01.01.01, TJC PI.02.01.01, TJC PI.03.01.01*



## Performance Improvement and Patient Safety (PIPS) Plan

### Mission

Compassionate care for every life we touch

### Vision

To be our community's trusted healthcare leader

### Values

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

## Introduction

Memorial Hospital of Sweetwater County (MHSC) is committed to providing compassionate, 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. This culture allows us to consistently identify opportunities to improve performance and increase safety while maintaining a commitment to responsible stewardship of resources as aligned with MHSC's mission, vision, values, and strategic objectives.

## Definitions

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

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

MHSC defines quality as a person-centered commitment to excellence, consistently using best practice to achieve the best outcomes for our patients and community.

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

## Purpose

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

## Scope

The PIPS Plan is organization wide and applies to all departments, care, treatment, and services settings (including those services furnished under contract or arrangement). This includes: Hospital Inpatient and Outpatient services, and Sweetwater Memorial Clinics. Hospital services and compliance with contractual and regulatory standards are monitored to ensure the delivery of quality service to satisfy all specified requirements. (Appendix 1 – FY 2021 PIPS Committee Reporting Calendar)

## Objectives

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

- I. To guide development and implementation of data collection processes that support performance improvement. Data are fundamental components of all performance improvement processes. Data can be obtained from internal sources (for example, documentation, records, staff, patients, observations, risk assessments) or from external sources (for example, regulatory organizations, insurers, the community). The purpose of data collection is to ensure that data necessary to identify, address, and monitor areas for improvement are available.
- II. To guide development and implementation of data analysis processes that support performance improvement. Collected data must be analyzed to be useful. The purpose of data analysis is to determine the status of the hospital's quality of care and to inform any plans for improvement.

- III. To guide development and implementation of performance improvement processes that increase safety and quality. All performance improvement activities must be based on relevant data collected and analyzed according to hospital policies and procedures. Performance improvement is a continual process. The purpose of performance improvement is to ensure the safest, highest-quality care is provided to all patients at all times.

## Organization and Accountability

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

### ***Board of Trustees***

- I. The responsibilities of the Board of Trustees as they relate to the PIPS Plan include:
- A. Ensure quality and safety are at the core of the organization's mission
  - B. Ensure quality and safety values are embedded in guiding the organization's strategic plan
  - C. Review and approve PIPS Plan annually
  - D. Assess the effectiveness of the PIPS Plan
  - E. Participate in education regarding the methods of quality management and performance improvement
  - F. Receive reports of indicators and performance of processes as outlined in this plan
  - G. Oversee the Hospital's ongoing monitoring, maintenance, and improvement efforts for safe, high quality, and efficient medical care that is in accordance with all applicable laws and accrediting bodies
  - H. Receive regular reports regarding all departments with direct and indirect patient care services and ensure these are monitored, problems are identified and prioritized, and appropriate action is implemented

### ***Senior Leadership Team***

- I. The Senior Leadership Team is comprised of the Chief Executive Officer (CEO), Chief Medical Officer (CMO), Chief Nursing Officer (CNO), Chief Clinical Officer (CCO), and Chief Financial Officer (CFO).
- II. Oversight of a PIPS plan capable of continuous improvement is a task accomplished in an environment fostered by Senior Leadership support. The Senior Leadership Team's commitment includes taking accountability for the effectiveness of the PIPS Plan and ensuring the integration of the PIPS Plan requirements into organizational processes. In addition, the commitment includes recognizing the importance of meeting patient needs and the various requirements of statutes and regulations that surround and permeate the organization.
- III. The responsibilities of the Senior Leadership Team as they relate to the PIPS Plan include:
- A. Support the implementation, execution, and oversight of this quality framework
  - B. Set the scope, priorities, guidelines and parameters for the PIPS Plan

- C. Align the PIPS Plan with strategic priorities
- D. Prioritize the necessary resources to implement the PIPS Plan
- E. Ensure the PIPS Plan is cohesive and feasible
- F. Communicate the PIPS Plan to workers and the community
- G. May periodically approve flexibility and variation in department and committee scheduled reports, in extenuating circumstances
- H. Ensure accreditation standards adherence
- I. Motivate and support staff to achieve PIPS objectives
- J. Monitor the effectiveness of the PIPS Plan and the achievement of results
- K. Ensure appropriate follow up of identified corrective actions not resulting in expected or sustained improvement

### **Quality Department**

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

### **Medical Staff**

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

### **Leadership Team**

- I. The Leadership Team is comprised of department directors, supervisors, and clinical coordinators. The responsibilities of the Leadership Team as they relate to the PIPS Plan include:
  - A. Utilize performance improvement processes to support MHSC's mission, vision, and values
  - B. Department leaders are responsible for collaborating with the PIPS Committee to collect and report data
  - C. Foster a climate of continuous improvement through measurement, data analysis, identification, and implementation of changes needed to improve and ensure sustainment
  - D. Monitor processes known to jeopardize the safety or clinical outcomes of patients
  - E. Implement and maintain processes to ensure compliance with applicable requirement(s) or standard(s)
  - F. Ensure services provided are consistent with MHSC's values and goal of consistently providing person-centered care
  - G. Document improvement initiatives and progress (Appendix 4 - PIPS Documentation Tool)
  - H. Present department performance improvement project updates to PIPS Committee as requested and/or scheduled (Appendix 5 - PIPS Reporting Presentation Template)

#### ***Project Teams, Department Employees and Volunteers***

- I. The responsibilities of the Project Teams, Department Employees, and Volunteers as they relate to the PIPS Plan include:
  - A. Performance improvement project teams may be formed according to employee identification of improvements and prioritization
  - B. Every employee is encouraged to engage in improvement within their scope of responsibility and there is no need to formally declare or recognize this ongoing activity that adds to the vibrancy of our organization and quality of care
  - C. Identify and utilize approaches for improving processes and outcomes to continuously improve the quality and safety of patient care
  - D. Document improvement initiatives and progress (Appendix 4 - PIPS Documentation Tool)
  - E. Report improvement initiatives to PIPS Committee as requested or scheduled (Appendix 5 - PIPS Reporting Presentation Template)

#### ***PIPS Committee Functions***

- I. The PIPS Committee oversees the establishment, implementation, and monitoring of the PIPS Plan. . The core PIPS Committee shall be comprised of Senior Leadership, Director of Clinic, Director of Acute Care Services, Director of Emergency Services, Director of Infection Prevention/Risk/Compliance, Director of Surgical Services, Director of Medical Imaging, Director of Women's Health, Director of Pharmacy, Director of Cardiopulmonary, Director of Environmental Services, Director of Lab, Director of Nutrition Services, Director of Rehab Services, Care Management Supervisor, Education Supervisor, Director of Dialysis, Director of Cancer Center, Quality Department, Medical Staff Representative, Medical Staff PIPS-Quality Liaison, and Patient Safety Representative. Other representatives may attend based on identified priorities.
  - A. Provide an organization wide program to systematically measure, assess, and improve performance to achieve optimal patient outcomes in a collaborative, multidisciplinary, cross-departmental

approach

- B. Support activities to promote patient safety and encourage a reduction in preventable harm, in collaboration with the Patient Safety Committee
- C. Provide a mechanism to foster collaborative efforts for performance improvement, feedback, and learning throughout the organization while assigning responsibilities and authority for these processes
- D. Implement all Centers for Medicare and Medicaid Services (CMS) and other regulatory bodies' quality management and performance improvement standards and maintain accreditation and required certifications
- E. Oversee compliance with accreditation standards and support resolution of noncompliance through action plans in coordination with Continual Survey Readiness Committee
- F. Coordinate schedule for department and committee reports
- G. Prioritize improvement projects to address processes based on the following:
  - 1. Focus on high-risk, high volume, or problem prone areas
  - 2. Consider the incidence, prevalence, and severity of problem in those areas
  - 3. Affect health outcomes, patient safety, and quality of care
  - 4. Additional factors include: resource allocation and accreditation/regulatory requirements
  - 5. Utilizes a prioritization scoring tool. This will assist in determining the distinct number of improvement projects annually (Appendix 3 - Proposed Performance Improvement Project Decision Checklist)
- H. Ensure performance improvement projects incorporate the needs and expectations of patients and families
- I. Monitor the status of identified and prioritized performance improvement projects and action plans by ensuring additional data collection and analysis is performed, to assure improvement or problem resolution on a sustained basis
- J. Identify corrective actions not resulting in expected or sustained improvement
- K. Ensure proper continuation of the cycle of creating, implementing, monitoring, and evaluating improvement efforts
- L. Ensure appropriate allocation of resources to achieve successful performance improvement projects and sustained improvements
- M. Identify annual data elements collected on an ongoing basis to prioritize focus areas for performance improvement
- N. Review and approve the PIPS Plan each year prior to submitting to the Quality Committee of the Board
- O. Oversee annual evaluation of performance improvement project priorities and goals
- P. Oversee annual evaluation of PIPS Plan objectives, scope, and effectiveness, and evaluate progress towards strategic plan goals related to quality, safety and patient experience
- Q. Communicate information concerning quality, patient safety, and patient experience to departments when opportunities to improve exist

- R. Reports, in writing, to leadership on issues and interventions related to adequacy of staffing. This occurs at least once a year.
- S. Report appropriate information regarding quality, patient safety, patient experience, and accreditation to Senior Leadership, Medical Executive Committee (MEC), Quality Committee of the Board, and the Board of Trustees to provide leaders with the information they need in fulfilling their responsibilities concerning the quality and safety of patient care
- T. Provide reports to the Quality Committee of the Board regarding results of performance improvement activities

### **Risk/Compliance**

- I. Risk Management is undertaken by the Risk and Compliance Director, along with Compliance Committee, in order to identify, evaluate and reduce risk or loss to patients, employees, visitors, and the hospital. The PIPS Committee may assist with quality improvement opportunities identified for risk reduction and performance improvement.

### **Safety**

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

## **Methodology**

MHSC is committed to continuous improvement of processes and outcomes. To accomplish this, the organization has adopted Lean as its improvement methodology. Lean is a patient centered performance improvement methodology and is meant to improve processes while keeping the patient at the forefront. Lean is based on two pillars including continuous improvement and respect for people. The ultimate goal is to liberate the people who do the work to make improvements.

- I. Performance improvement project teams will collect, analyze, document, and report improvements using Lean principles and methodologies (Appendix 4 – PIPS Documentation Tool)
- II. Performance improvement project teams will use data to determine how action plans are developed and will define the frequency of data collection



## Data

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

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

### II. Data Reliability and Validity

- A. Collected data need to be accurate, complete, and reliable. The PIPS Committee has established the following expectations for any data used to monitor or improve hospital performance:

1. Data samples will undergo auditing
2. Data sources will be regularly checked using established procedures
3. Re-abstraction will occur on a data sample

- III. Aggregated data are analyzed to draw conclusions about opportunities for improvement and actions to improve the quality of processes. When available, external benchmarks or comparative databases will be included. Statistical tools and techniques are utilized to measure, analyze, and display data (e.g., run charts, flow charts and control charts).

### IV. Scope of Data Collection

- A. At a minimum, the organization will collect data required by CMS Conditions of Participation and The Joint Commission including measures from:
  1. Inpatient Quality Reporting
  2. Outpatient Quality Reporting
  3. Value Based Purchasing
  4. Hospital Readmission Reduction Program
  5. Hospital Acquired Condition Reduction Program
  6. Quality Payment Program – Merit Based Incentive Payment
  7. Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS)
  8. CMS Star Rating Program
  9. The organization will collect data on topics in the following areas:
    - a. Environment of care
    - b. Infection prevention and control



c. Medication management system

B. MHSC compares internal data over time to identify levels of performance, pattern or trends in performance, and variations in performance. Data sources and mechanisms of identifying opportunities for improvement include, but are not limited to, the following:

1. Accreditation reports
2. Regulatory rounds and tracers
3. Culture of Safety survey
4. Occurrence reports identifying patient safety concerns and trends
5. Staff reporting safety or process concerns to their leaders
6. Risk Assessments
7. Reports and/or alerts from governmental agencies (for example, Centers for Disease Control and Prevention, Occupational Safety and Health Administration, Food and Drug Administration)
8. RCA (Root Cause Analysis)
9. FMEA (Failure Mode Effects Analysis)
10. Patient complaints/grievances
11. Patient perception of safety and performance
12. Selected outcome indicators (mortality, readmissions, etc.)
13. Peer review
14. Transfers to other facilities
15. Changing internal or external (e.g. Joint Commission Sentinel Event Alerts) conditions
16. Internal audits identifying improvement opportunities
17. Leaders identifying improvement opportunities
18. Ongoing medical record review
19. Audit of clinical contracts
20. Operative or other procedures that place patient at risk of disability or death
21. All significant discrepancies between preoperative and postoperative diagnoses
22. Blood and blood components use
23. Restraint use
24. Outcomes related to resuscitation
25. Appropriateness of pain management
26. Near miss events
27. Rapid response to change or deterioration in a patient condition
28. Care or services to high-risk populations (patient falls)
29. National Patient Safety Goals
30. CMS preventable conditions (Hospital-Acquired Conditions)
31. Healthcare-associated infections

32. Organ procurement effectiveness (conversion rates)
33. AHRQ Patient Safety Indicators (PSI)
34. ORYX core measure data
35. Hospital Quality Improvement Contractor (HQIC)
36. Confirmed transfusion reactions
37. Staffing related events
38. MRI incidents/injuries
39. Significant adverse drug reactions
40. Significant medication errors
41. Adverse events or patterns of adverse events during moderate or deep sedation and anesthesia
42. Complications of care
43. Sentinel events

#### V. Organization Dashboard

- A. Data displays preferred by the PIPS Committee includes dashboards and run charts.
- B. Data presented on the organization dashboard is updated to reflect strategic priorities. Measures on the dashboard have targets, which guide an appropriate response or recognition of success
- C. Goals and benchmarks are developed in conjunction with stakeholders with attention to past performance and national performance data
- D. Analyzes data using methods that are appropriate to the type of data and the desired metrics, which include but are not limited to:
  1. Benchmark: a comparison and measurement of a health care organization's metrics against other national health care organizations. MHSC utilizes the National Average when available.
  2. Target Goal (SMART Goal): targeted goals define interim steps towards the stretch goal. Target goals may change frequently as progress is made toward stretch goal. Target goals help form a concrete plan of action in order to make the stretch goal a reality.
  3. Stretch Goal: inspires us to think big and reminds us to focus on the big picture. This goal should exceed the benchmark. MHSC utilizes the National Top 10% when available.

## Communication

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

## Confidentiality

- I. WY Stat 35-2-910. Quality management function for health care facilities; confidentiality; immunity; whistle blowing; peer review.
  - 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 participates 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 provider or person to whom the quality information pertains. In no event shall this immunity apply to any negligent or intentional 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

## References

- LRG Healthcare. (August, 2019). *Quality Management Plan*. Unpublished internal document, LRGHealthcare.
- Ransom Memorial Health. (March, 2019). *Quality Improvement Plan*. Unpublished internal document, Ransom Memorial Health.
- Whitney Matson. (N.A). *Quality Management System Plan*. Unpublished internal document, St. John's Health.
- Quality Assurance & Performance Improvement (QAPI). (n.d.). Retrieved from <https://hsag.com/qapi>

Summary of Compliance Concerns & Strategies for Compliance and/or Improvement: Healthcare Strategies. August 2020

The Joint Commission. (2020, March). *PI performance improvement plan*. PolicySource hospital and critical access hospital. [PolicySource: P&Ps for Compliance with Joint Commission Requirements | Joint Commission Resources \(jcrinc.com\)](https://www.jointcommission.org/policy-source/policies-for-compliance-with-joint-commission-requirements/)

Wyoming Laws. (2015). Title 35, Public Health and Safety. Wyoming Statute W.S. §35-2-910 (1977). Quality management functions for health care facilities; confidentiality; immunity; whistle blowing; peer

review. Retrieved from Thomson Reuters WestlawNext.

**Approval:**

Performance Improvement and Patient Safety Committee – 5/11/2021

Quality Committee of the Board – 5/19/2021

Medical Executive Committee – 5/25/2021

Board of Trustees –

## Attachments

[Appendix 6 - Communication Plan](#)

[Appendix 5 - PIPS Reporting Presentation Template](#)

[Appendix 1 - Reporting Calendar](#)

[Appendix 2 - Committee Reporting Structure](#)

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

[Appendix 4 - PIPS Documentation Tool](#)

DRAFT

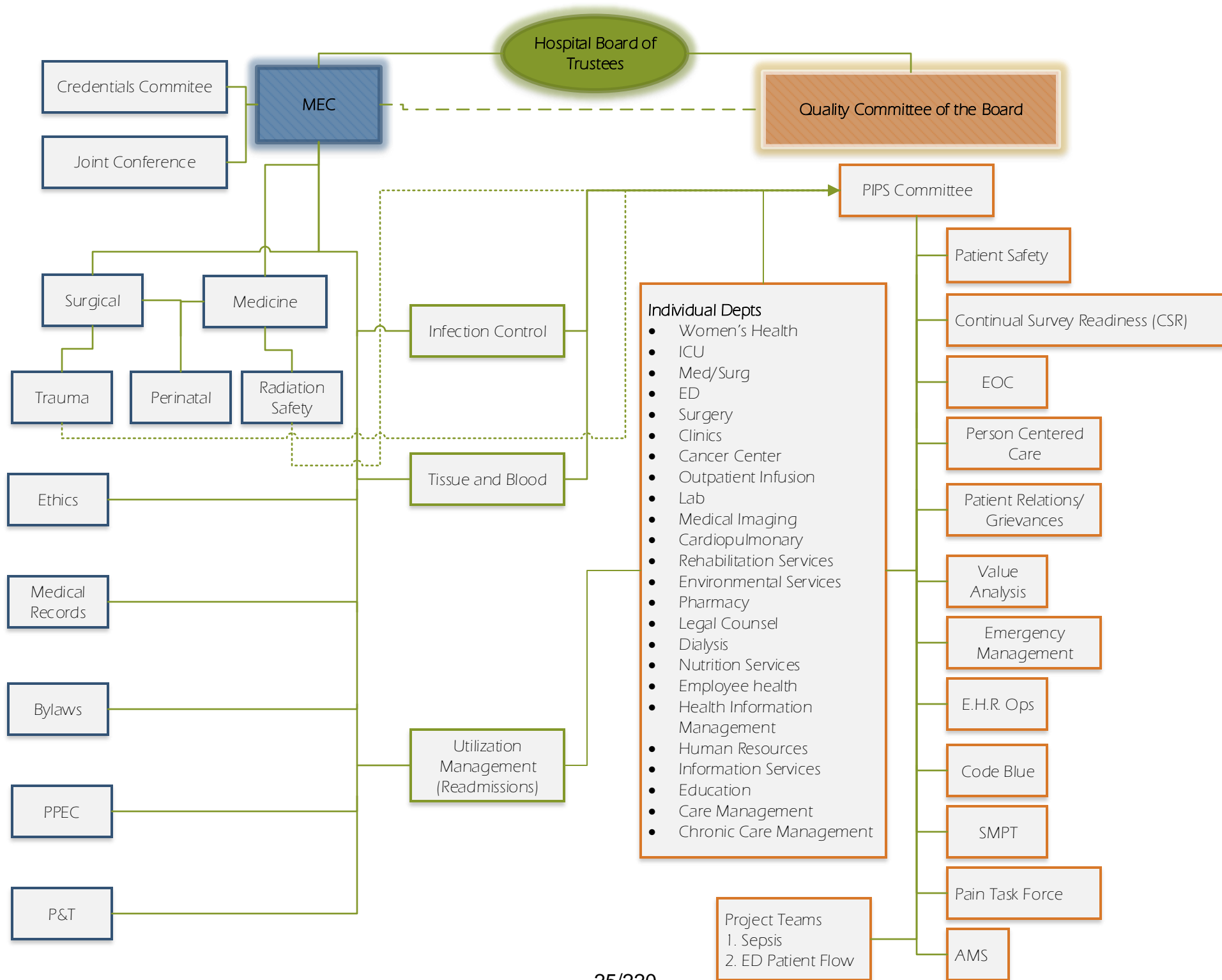


## FY 2022 MHSC PIPS Committee Reporting Schedule

Monthly Meeting: Second (2nd) Tuesday of the Month, 1:00 p.m. - 3:00 p.m., Classrooms 1-3 or Virtual

	Quarter 1			Quarter 2			Quarter 3			Quarter 4		
	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
<b>STANDING COMMITTEE REPORTS</b>												
Pain Task Force			Q4			Q1			Q2			Q3
Person Centered Care		Q4			Q1			Q2			Q3	
Antimicrobial Stewardship		Q4			Q1			Q2			Q3	
Continual Survey Readiness			Q4			Q1			Q2			Q3
E.H.R. OPS			Q4			Q1			Q2			Q3
Patient Safety	X	X	X	X	X	X	X	X	X	X	X	X
SMPT	Q4			Q1			Q2			Q3		
EOC (biannual)		X						X				
Patient Relations/Grievances Committee		Q4			Q1			Q2			Q3	
Value Analysis Committee (yearly)									X			
Emergency Management (biannual)				X						X		
Code Blue Committee	Q4			Q1			Q2			Q3		
<b>MEDICAL STAFF COMMITTEE REPORTS</b>												
Infection Control		Q4			Q1			Q2			Q3	
Tissue and Blood (biannual)					X						X	
Trauma (biannual)				X						X		
Radiation Safety (biannual)						X						X
Utilization Management - Readmissions		Q4			Q1			Q2			Q3	
<b>PROJECT TEAM REPORTS</b>												
Sepsis		Q4			Q1			Q2			Q3	
Patient Flow	Q4			Q1			Q2			Q3		
<b>DEPARTMENT REPORTS</b>												
Women's Health		Q4			Q1			Q2			Q3	
Medical Surgical		Q4			Q1			Q2			Q3	
ICU			Q4			Q1			Q2			Q3
ED			Q4			Q1			Q2			Q3
Surgical Services	Q4			Q1			Q2			Q3		
Medical Imaging			Q4			Q1			Q2			Q3
Clinic	Q4			Q1			Q2			Q3		
Radiation Oncology/Medical Oncology	Q4			Q1			Q2			Q3		
Social Services			Q4			Q1			Q2			Q3
Outpatient Infusion		Q4			Q1			Q2			Q3	
Rehab Services			Q4			Q1			Q2			Q3
Cardiopulmonary		Q4			Q1			Q2			Q3	
Environmental Services	Q4			Q1			Q2			Q3		
Pharmacy	Q4			Q1			Q2			Q3		
Behavioral Health			Q4			Q1			Q2			Q3
Patient Financial Services (to include Patient Access & Central Scheduling)			Q4			Q1			Q2			Q3

	Monthly Meeting: Second (2nd) Tuesday of the Month, 1:00 p.m. - 3:00 p.m., Classrooms 1-3 or Virtual											
	Quarter 1			Quarter 2			Quarter 3			Quarter 4		
	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
<b>DEPARTMENT REPORTS</b>												
Care Management - Discharge Planning	Q4			Q1			Q2			Q3		
Medical Staff Services (biannual)			X						X			
Materials Management (to include Central Supply - biannual)					X						X	
Dialysis (biannual)						X						X
Nutrition Services (biannual)			X						X			
Employee Health (biannual)			X						X			
Health Information Management (biannual)		X						X				
Human Resources (biannual)		X						X				
Information Services (biannual)	X						X					
Education (biannual)	X						X					
Chronic Care Manager (biannual)				X						X		
Legal Counsel (annual)												X
PR/Marketing (annual)							X					X
Physician Recruitment (annual)						X						
Fiscal Services (annual)	X											
Volunteers, Community Outreach (annual)					X							
<b>FACILITY WIDE REPORTS</b>												
Patient Experience/HCAHPS Dashboards - by Dept. (monthly)	X	X	X	X	X	X	X	X	X	X	X	X
MHSC Star Rating, Patient Safety, and Other Standards Dashboards (monthly)	X	X	X	X	X	X	X	X	X	X	X	X
Quality Program Consultant - Tier Assignment Report (monthly)	X	X	X	X	X	X	X	X	X	X	X	X
PI Accelerate Dashboard (quarterly)			X			X			X			X
Hospital Compare Preview Reports (quarterly)	X			X			X			X		
Staffing Adequacy Report (annual)									X			
Quality Reporting Program Results (HRRP, HACRP, VBP, QPP - annually)							X	X				
Culture of Safety Survey Results (biennially- administered last in June 2020)										X		
Accreditation Reports (Triennially Hospital, Biennially Lab, as they occur)												
FMEA, RCA, Serious Safety Events (as they occur)												
<b>PLAN APPROVAL</b>												
Dialysis QAPI Plan					X							
PI and Safety Report (annual)					X							
PIPS Plan Review/Evaluation					X							
PIPS Plan				X								



## Memorial Hospital of Sweetwater County

### Proposed Performance Improvement Project Decision Checklist

This checklist will be used by the Performance Improvement and Patient Safety (PIPS) Committee to assist in determining PIPS Priorities for each fiscal year. This document includes pertinent questions to ask when deciding whether or not to pursue a proposed performance improvement (PI) project. An ideal PI project should have six or more **Y** (or **Yes**) answers. Higher priority will be given to Yes answers that are bolded.

DEPARTMENT/UNIT: \_\_\_\_\_

DATE OF REVIEW: \_\_\_\_\_ REVIEWER(S): \_\_\_\_\_

TYPE/TOPIC OF PROJECT: \_\_\_\_\_

QUESTIONS	Y	N	UNSURE	NA	COMMENTS
<b>Is the proposed PI project aligned with the organization's mission/vision/goals?</b> <i>*Please specify which Strategic Plan Pillar this aligns with</i>					
Does the project have the support and participation of key stakeholders, including leadership and frontline staff?					
Does the project relate to safety and quality of patient care, either directly or indirectly?					
<b>Does the project involve a high-risk system, process, or operational area or one in which risks have been identified?</b>					
<b>Does the project involve a system, process, or operational area with a high volume of care recipients?</b>					
Is the project identified as potentially problematic in the literature or by professional associations or other sources? That is, are the issues identified relevant to this site?					
<b>Has feedback (such as complaints) been received from care recipients or staff in this area that is related to the PI project proposed?</b>					



QUESTIONS	Y	N	UNSURE	NA	COMMENTS
Does the project relate to a leadership priority?					
<b>Is the project related to a topic addressed by National Patient Safety Goals or another national, regional, or local priority-setting authority?</b>					
Is it necessary to address a special event (such as a merger or new construction)?					
Does the organization have the resources necessary to complete the entire PI project (including financial, human resources, and so on), as determined by a thorough analysis?					

Number of bolded YES answers: \_\_\_\_/5

Number of non-bolded YES answers: \_\_\_\_/6

Total number of YES answers: \_\_\_\_/11

*For PIPS Committee Use Only*

#### Scoring Guide

- The PIPS Committee will utilize this Proposed PI Improvement Project Decision Checklist to determine the recommended PIPS Priorities PI Projects each fiscal year.
- The purpose of the Proposed PI Improvement Project Decision Checklist is to guide and assist the PIPS Committee in determining the recommended PIPS priorities. The PIPS Committee may use this tool, in addition to considering other factors, when determining priorities for the organization.
  - o In order to be considered for a PI Project, must answer yes to at least 2 questions
  - o Higher priority will be given to yes answers that are bolded

PIPS Committee Decision Notes:

Identified as a PIPS PRIORITY?

If yes, PIPS Documentation Tool will be utilized and information will be reported into PIPS Committee monthly

If yes, answer the following questions:

- Name of project team:
- Project team members:
- Data to be monitored associated with this project:
- In addition, please identify the following:
  - o Report Format (e.g., is it a specifically titled dashboard, such as the HLD/Sterilization Dashboard, P&T Committee Dashboard, etc.)
  - o Responsibility of Oversight of Corrective Actions and Sustaining Compliance
  - o Oversight Committee

## Measure Development Tool

### Step 1 - Measure Development Tool

<b>Department/Unit:</b>	
<b>An opportunity exists for the quality monitoring of:</b> (name of your indicator)	
<b>It is important to monitor this because it is a:</b> (select all that apply)	<input type="checkbox"/> In-Process/Quality Assurance Measure <input type="checkbox"/> Performance Improvement Measure <input type="checkbox"/> Regulatory Measure of Success <input type="checkbox"/> Regulatory Requirement <input type="checkbox"/> Strategic Plan - Goals & Objectives <input type="checkbox"/> High Risk <input type="checkbox"/> Problem Prone <input type="checkbox"/> High Volume
<b>The Performance Indicator will be monitored beginning:</b> (MM/DD/YY)	5/1/2020
<b>The data sources will be:</b>	<input type="checkbox"/> Audit <input type="checkbox"/> Chart Review <input type="checkbox"/> Database <input type="checkbox"/> Observation <input type="checkbox"/> Patient Questioned <input type="checkbox"/> Staff Demo <input type="checkbox"/> Other (indicate below)
<b>The frequency the data will be collected will be:</b>	Monthly and reported quarterly to the Performance Improvement Committee
<b>The data will be collected by:</b>	
<b>The sample size will be:</b>	
<b>The numerator will be:</b>	
<b>The denominator will be:</b>	
<b>The Goal for Performance will be (choose one item in each row):</b>	
<i>Less than, equal to, or greater than</i>	
<i>Target (benchmark) Goal</i>	
<i>Stretch Goal</i>	
<i>Number, Percentage, or Percentile</i>	
<b>The Source of comparative/benchmark data is:</b>	
<b>Submitted by:</b>	
<b>Date:</b>	

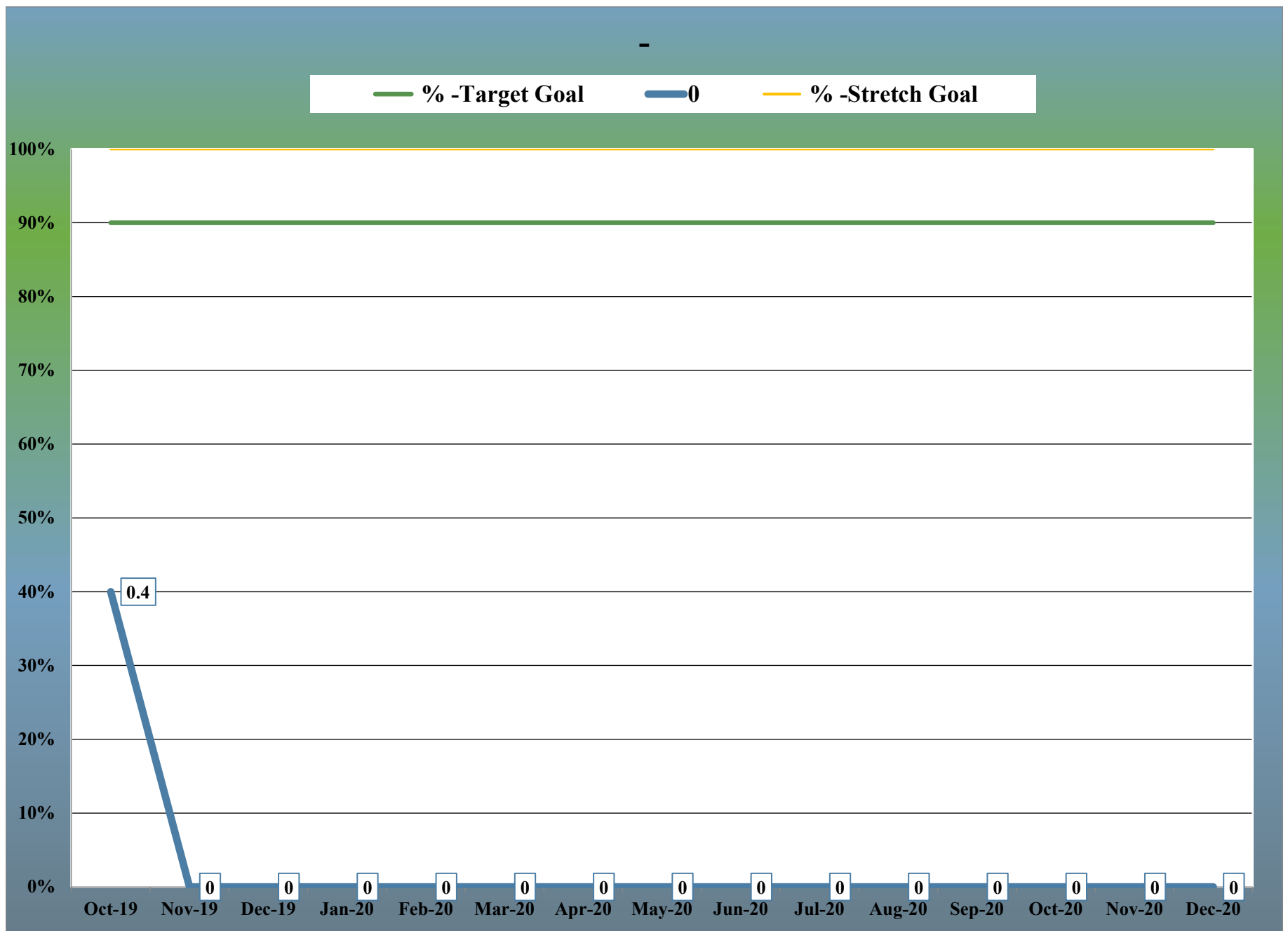
-									
	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20
% -Target Goal	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%
% -Stretch Goal	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%
Short Note to be included on the graph (optional)									

Number of Periods

13

-									
	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20			
% -Target Goal	90.00%	90.00%	90.00%	90.00%	90.00%	90.00%			
% -Stretch Goal	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%			
Short Note to be included on the graph (optional)									

Number of Periods



Performance Improvement Development Tool		
<b>Department:</b>	<i>Which department is responsible, can be interdisciplinary</i>	
<b>Report Submitted by:</b>	<i>Team lead/person responsible for this project</i>	
<b>Problem Statement:</b>	<i>What led you to discover the problem</i>	We have high rates of CAUTIs
<b>Stakeholders/Scope</b>	<i>Consider patient population and departments impacted</i>	
<b>Current State:</b>	<i>Please provide a description of the current process</i>	
<b>Problem Analysis:</b>	<i>5 Why's, ask why until you reach an actionable statement</i>	We lack a nurse-driven protocol, it's not addressed in MDR, need further education
<b>Target Condition:</b>	<i>In your perfect world, what would this process look like?</i>	We would limit the use of catheters via clinical decision support tools, we would have a nurse-driven protocol for removal, more education on potential effects of catheter use
<b>Counter Measures:</b>	<i>List measures that can be taken to counter your actionable items found in the problem analysis</i> <b>Continue to next tab to further detail plans for counter measure</b>	Develop nurse-driven protocol, provide more education, incorporate into MDR

Counter Measure Implementation							
	Counter Measure	Detailed Steps	Who is Responsible	Start/End Dates of test	Determination of Success	Evaluation	Sustainment
	What will be done	Explain what will be done, resources needed (skills training, staff education, support services, technology, etc.)	Who will do it?	Length of time to trial improvement/intervention	Identify how it will be determined that the plan of action is not producing desired results and pursuit should be abandoned or plan modified: 1. stakeholder harm/dissatisfaction is identified 2. Performance measures do not approach goal/benchmark after __ months/quarters (indicator # of quarters)	Evaluate Counter Measure Action Plan: 1. Successful 2. Needs action/adjustment 3. Not sustainable 4. To Be Determined	If successful, how will you measure/monitor for sustainment?
1							



# PIPS Presentation

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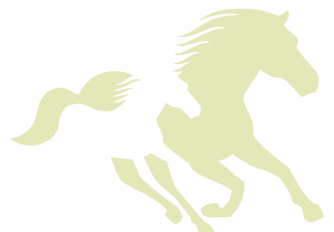


# Department/Team/ Process:

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DATE:

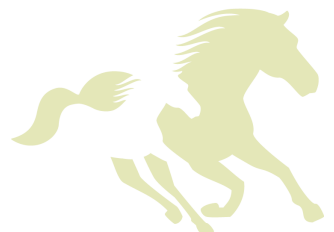
PRESENTER(S): NAME AND TITLE



# Data

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Insert data table or graphic

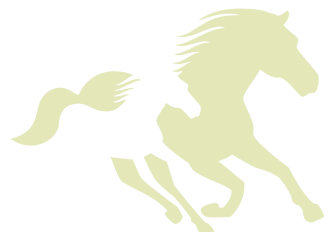


# Analysis and Opportunities for Improvement

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Describe:

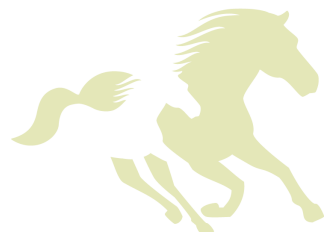
- What's the issue?
- Include WHY the data is performing the way it is and any barriers to compliance



# Actions – Who, What, When

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Who is going to take the action?	What actions are they going to take?	When is the target completion date?



## Communication Plan

Definition: The purpose of the communication plan is to describe the structure and schedule for communicating PI project information to all stakeholders and those not directly involved in the projects. The plan outlines who (**owner**) is responsible for providing the information, to whom (**whom**) the information is provided, type of information (**goals**) provided, the (**frequency**) of the information provided, and the method for providing it.

Owner	To Whom	Goals	Frequency	Method
Department Staff	Clinical Coordinator, Supervisor, Manager, Team Leader	Suggestions that identify & resolve issues	Weekly or more frequently as needed	Visual displays adequate to support staff driven change & huddles
Department Leaders	Department staff	PI project updates and progress, including review of success and failures.	Monthly or more frequently as needed	PIPS Documentation Tool, dashboards, visual display boards
Department Leaders	PIPS Committee	PI project updates and progress, to include a review of success and failures	Quarterly, or as identified on PIPS Reporting Calendar, or more frequently as needed; or monthly if performing below goal/benchmark	PIPS Presentation Template; Lessons Learned Report
Department Leaders	Senior Leadership	PI project updates and progress, to include a review of success and failures	Monthly	Review of PIPS Documentation Tool, dashboards, and verbal discussion
PI Project Team	PIPS Committee	PI project updates and progress, to include a review of success and failures	Quarterly, or as identified on PIPS Reporting Calendar, or more frequently as needed; or monthly if performing below goal/benchmark	PIPS Presentation Template; Lessons Learned Report

Standing Committee Chairs	PIPS Committee	PI Project updates and progress, to include a review of success and failures	Quarterly, or more frequently as needed	PIPS Presentation Template; Lessons Learned Report
Senior Leadership	Department Directors & fellow Senior Leaders	Review status, oversee performance, resolve resource issues	Monthly	Verbal status reports
PIPS Committee (Director of Quality and CCO)	Quality Committee of the Board	PIPS Priorities; indicators performing poorly; Review status of hospital's quality efforts; Identify issues and successes	Monthly	PIPS Presentation Template and summary; Lessons Learned Report
Medical Staff	Board of Trustees	Matters related to quality of medical care provided to patients	Minimum of twice per year, during scheduled Board of Trustees meetings	Verbal or written reports

#### **Report Methods Description:**

##### PIPS Documentation Tool

- Describes the thorough process of the PI project

##### PIPS Presentation Template

- To review trends, status of data and progress of the project

##### Lessons Learned Report

- Narrative summary of the project (upon project completion) that includes lessons learned for future projects.

## MHSC Board of Trustees Reporting Calendar

YEAR: 2021		Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
<b>Annual</b>													
1	Review of the Strategic Plan									X			
2	Approval of Scopes of Services						X						
3	Self-evaluation of Board Members with analysis						X						
4	CEO Evaluation										X		
5	Annual approval of the Operating Budget and when needed, the long-term capital expenditure plan						X						
6	External audit by an independent public accountant										X		
7	Annual PI/Patient Safety/Risk Management Report; Annual Approval of PIPS Plan (to include approval of frequency and detail of data collection); Annual Approval of PI Priorities and the number of distinct improvement projects to be conducted annually; Proactive Risk Assessment							X					
8	CMS Star Rating Report				X								
9	Quality Workshop of the Board												
10	Approval of Risk Management Plan			X							X		
11	Dialysis QAPI Program/Plan							X					
12	Approval of Patient Safety Plan	X											
13	Annual HR Report to Board & Annual Staffing Adequacy Report								X				
14	Annual Environment of Care Report and Approval of EOC Plans			X									
15	Annual Emergency Operations Plan Evaluation						X						
16	Annual Infection Control Report and Approval of Annual Infection Control Plan				X								
17	Approval of Utilization Management Plan Review									X			
18	Contracted Services Evaluation											X	
19	Medical Staff leader/designee reports on medical quality at timeframe defined per approved policy (at least twice per fiscal yr or calendar yr. Includes periodic reports of the medical staff evaluation of patient care services for every patient care location of the organization)					X				X			
20	Annual Conflict of Interest Form Signed							X					
<b>Biannual</b>													
1	Approval of Emergency Operations Plan							X					
2	Culture of Safety Survey Results									X			
<b>Triennial</b>													
1	Approval of Infection Prevention Program										X		
2	Approval of the Strategic Plan									X			
<b>Ongoing</b>													
1	Credentialing and Privileging Reports	X	X	X	X	X	X	X	X	X	X	X	X
2	Chief Nursing Reports			X					X				
3	Monitoring of the budget and long-term capital expenditure plans	X	X	X	X	X	X	X	X	X	X	X	X
4	Culture of Safety Action Plan Updates			X						X			
5	Patient Flow Reports					X						X	
6	Ongoing PI and Patient Safety Reports (Quality Committee of the Board Report)	X	X	X	X	X	X	X	X	X	X	X	X



**Memorial Hospital of Sweetwater County**  
**Performance Improvement and Patient Safety Priorities**  
**Fiscal Year 2022**

**I. Proposed FY 2022 Priorities**

2022 Priorities	Measurement/Metric	Benchmark/Goals	Responsibility	Oversight Committee
<b>Sepsis</b> <ul style="list-style-type: none"> <li>- Improvement of Sepsis bundle compliance</li> </ul> <u>Sepsis Team Members</u> <ul style="list-style-type: none"> <li>- Clinical Coordinator of ED</li> <li>- Director of ED</li> <li>- Medical Director of ED</li> <li>- CMO</li> <li>- Trauma Coordinator</li> <li>- CCO</li> <li>- CNO</li> <li>- Quality Analyst</li> <li>- Medical Director of Lab</li> <li>- Clinical Coordinator of Medsurg/ICU</li> </ul>	<p>Core Sep – 1: Sepsis Bundle Compliance</p> <p>Process Metrics:</p> <ul style="list-style-type: none"> <li>- Initial Lactate</li> <li>- Blood Cultures prior to antibiotics</li> <li>- Broad-spectrum antibiotics</li> <li>- IV Fluid- 30ml/kg</li> <li>- 2 Sets Vital Signs within 1 hour of fluids</li> <li>- Repeat lactate within 4 hours (if initial greater than 2)</li> <li>- Reassess hypotension after fluids</li> <li>- Physician focus exam after fluids</li> <li>- MD reassessment of perfusion</li> </ul> <p>Report Format:</p> <ul style="list-style-type: none"> <li>- Sepsis Dashboard</li> </ul>	<p>Benchmark: 59%</p> <p>Target Goal: 64%</p> <p>Stretch Goal: 70%</p>	<p>Director of ED, Medical Director of ED &amp; Clinical Coordinator of ED</p>	<p>PIPS Committee</p> <p>Reporting Frequency: Monthly</p>
<b>Patient Experience Surveys</b> <p><b>Inpatient</b> Team: Director of Acute Care Services, Director of Women's Services, Hospitalist Director, Perinatal Chair, Surgery Dept Chair, Clinical Coordinator for Women's Services, Clinical Coordinator for Acute Care Services, Director of EVS, Director of Pharmacy, Director of Nutrition Services, Director of Case Management, Care Transition, Facilities</p> <p><b>Outpatient Ambulatory Services (OAS)</b> Team: Director of Surgical Services, Surgery Department Chair, Clinical Coordinator for Surgical Services</p>	<p><b>Inpatient</b> Likelihood to Recommend Report Format</p> <ul style="list-style-type: none"> <li>- Inpatient HCAHPS Scorecard Year to Date</li> </ul> <p><b>Outpatient Ambulatory Services (OAS)</b> Likelihood to Recommend Report Format</p> <ul style="list-style-type: none"> <li>- OAS CAHPS Scorecard Year to Date</li> </ul>	<p><b>Inpatient</b> Likelihood to Recommend</p> <ul style="list-style-type: none"> <li>- Target Goal: 75th percentile</li> <li>- Stretch Goal: 90th percentile</li> </ul> <p><b>Outpatient Ambulatory Services (OAS)</b> Likelihood to Recommend</p> <ul style="list-style-type: none"> <li>- Target Goal: 75th percentile</li> <li>- Stretch Goal: 90th percentile</li> </ul>	<p><b>Inpatient</b></p> <ul style="list-style-type: none"> <li>- Director of Acute Care Services, Director of Women's Services, Hospitalist Director, Perinatal Chair</li> </ul> <p><b>Outpatient Ambulatory Services (OAS)</b></p> <ul style="list-style-type: none"> <li>- Director of Surgical Services &amp; Surgery Department Chair</li> </ul>	<p>PIPS Committee</p> <p>Reporting Frequency : Monthly</p>

**Memorial Hospital of Sweetwater County**  
**Performance Improvement and Patient Safety Priorities**  
**Fiscal Year 2022**

2022 Priorities	Measurement/Metric	Benchmark/Goals	Responsibility	Oversight Committee
<b>ED</b> Team: Director of ED, Medical Director of ED, Clinical Coordinator for ED, Director of Lab, Director of Medical Imaging, Director of Pharmacy  <b>Medical Practice (Clinics)</b> Team: Director of Clinics, Medicine Department Chair, Surgery Department Chair, Clinical Coordinator Clinics	<b>ED</b> Likelihood to Recommend Report Format - ED Facility Scorecard Year to Date  <b>Medical Practice (Clinics)</b> Likelihood to Recommend Report Format - Medical Practice Scorecard Year to Date	<b>ED</b> Likelihood to Recommend - Target Goal: 75th percentile - Stretch Goal: 90th percentile  <b>Medical Practice (Clinics)</b> Likelihood to Recommend - Target Goal: 75th percentile - Stretch Goal: 90th percentile	<b>ED</b> - Director of ED & Medical Director of ED  <b>Medical Practice (Clinics)</b> - Director of Clinics, Medicine Department Chair, Surgery Department Chair	
<b>Clostridioides Difficile (C.Diff)</b>  Reduce hospital-acquired C.Diff  <u>C.Diff Team</u> - Director of Infection Prevention - Chief Nursing Officer - Chief Clinical Officer - Chief Medical Officer - Clinical Coordinator for Med/Surg and Intensive Care Unit - Director of Laboratory - Medical Director of Laboratory - Medical Director of Emergency Department - Infection Prevention Consultant	Number of Hospital Acquired C.Diff Cases  Report Format: - C.Diff Dashboard & Star Rating Dashboard	Target Goal: 1 Stretch Goal: 0	Director of Infection Prevention	PIPS Committee  Reporting Frequency: Monthly

\*\* Additional project teams may be added as necessary.

## Board Policies

### Report from the Governance Committee

**Overview:** Between January and June, 2021, the Governance Committee reviewed and revised Board Bylaws and eighteen (18) Board policies. The Bylaws were approved at the June, 2021 meeting. The eighteen policies, which the Governance Committee recommends to be approved, are included in the consent agenda for the July, 2021st Board meeting.

**Background:** Because The Joint Commission recommends that the governing body should review its bylaws and policies every three to five years, the Governance Committee, with the assistance of guests Suzan Campbell and Marianne Sanders, reviewed all the Board policies that had been written since 2017. The purposes of the review were 1) to make sure policies were relevant and met current needs 2) standardize their format, and 3) create a section in *Policystat* specific for Board policies.

Below are the policies that were reviewed, date of first approval (if any), revisions (if any) and their disposition:

1. Guidelines for Negotiating NPP Agreements - Approved 2021, no changes made
2. Guidelines for Negotiating Physician Contracts – Approved 2021, no changes made
3. Financial Hardship – Approved 2020 – no changes made
4. Attendance at Board Committee Meetings – Approved 2020, no changes made
5. Maintenance of Board and Board Committee Meetings Minutes - Approved 2020, no changes made
6. Medical Staff Leadership Direct Consultation with the Board – Approved 2021, no changes made
7. CEO Evaluation Principles and Procedure – written
8. Election of Board Officers – written
9. Spending Authority and Matrix – Approved 2017, revised
10. Leadership's Duty to Disclose – Approved 2017, revised
11. Conflict of Interest – Approved 2018, revised
12. Board Agenda – Approved 2018, revised
13. Board E-mail Communication – Approved 2020, revised
14. Investment Policy – Approved 2018, revised
15. Contracts Requiring Board Approval – Approved 2018, revised
16. Contract Management – Approved 2017, archived and not included in this packet
17. Physician Credentialing – awaiting approval of Medical Staff Bylaws
18. Termination & Appeals Policy – in process

Policies 1 -15 can be found in *Policystat*. For ease of viewing and in order to save time, policies 1 – 15 are included in a consent agenda as part of the July Board packet. As with all consent agenda items, any policy may be removed for discussion.

**Recommendation:** The Governance Committee recommends that the Board approve the policies 7 through 15 (those highlighted in yellow), as written.



Approved:

N/A

Review Due:

3 years after approval

Document Area:

Board of Trustees

Reg. Standards:

## BOT - CEO Evaluation Principles and Procedure



### Board of Trustees

## STATEMENT OF PURPOSE:

Board of Trustees' (Board) evaluation of the Chief Executive Officer (CEO) of Memorial Hospital of Sweetwater County (Hospital) is important to the effective alignment between the Board and CEO as related to performance expectations and feedback regarding progress related to the mission and vision of the Hospital, as well as its strategic initiatives.

## PRINCIPLES:

An important duty of the Board is the development of a documented, well-designed, on-going process for providing feedback to the CEO and measuring progress and achievement. These principles guide a process that enhances the communication between the Board and the CEO.

For effective communication, the Board shall conduct the annual evaluation based on the following principles:

- At least quarterly review to establish transparency regarding performance expectations so that neither party is surprised during the formal, annual evaluation.
- May, at the monthly Board meeting, review and assess the CEO's performance expectations, modify strategy as needed, and learn from each other regarding conditions affecting the Hospital.
- The formal, annual evaluation shall include an assessment of the CEO's performance consistent with the CEO's job description and annual performance goals.
- Evaluation criteria shall be realistic, measurable and consistent with the Hospital's mission, vision, and strategic initiatives.
- Communication between the CEO and the Board shall be a continuous, two-way process. This allows for reviewing expectations, modifying strategy as needed, learning from each other, and avoiding misunderstandings.

## PROCEDURE:

The Executive Compensation & Oversight Committee (Committee) is responsible for the following activities:

- I. At the beginning of the evaluation cycle, develop, with input from the full Board and the CEO, clear and

comprehensive annual performance expectations that are related to the Hospital's mission, vision, and its strategic plan in these five (5) areas: Quality & Safety; Community & Growth; Workplace Experience, Financial Stewardship; and Patient Experience.

- A. For each of these five areas, specific, written annual performance goals shall be established and approved by the Board.
- II. Meets at least quarterly with the CEO to review progress toward meeting the Hospital's strategic and tactical priorities and goals, as well as to review responses to any unplanned change.
- III. Annually, evaluates the performance of the CEO using performance expectations and specific goals that were mutually agreed upon, established at the beginning of the evaluation cycle, and written.
  - A. Prior to the annual evaluation, the Committee shall review the assessment form and modify as needed to fit the Hospital's current needs.
  - B. To initiate the annual process, the Committee chair asks the CEO to complete the assessment form, including a summary of achievements relative to the goals defined at the beginning of the evaluation cycle and other accountabilities.
  - C. Board members are given the CEO's self-assessment, summary of achievement, the assessment form, and submission deadline.
  - D. Prior to the meeting with the CEO, the Summary Report is compiled by the Committee. It is reviewed and approved by the full Board. Part of the approval process includes decisions regarding what to emphasize in the Committee's annual evaluation discussion with the CEO.
  - E. The Committee, chaired by the President of the Board, meets personally with the CEO to discuss the evaluation results. This meeting shall provide performance improvement feedback to the CEO, and stimulate a productive, two-way dialogue with the CEO that includes his or her responses to the evaluation, his or her commitment to management improvement(s), as well as guidance expectations the CEO has regarding the Board. This document shall be signed by both the CEO and the Board president.
  - F. If a salary increase is communicated in the same meeting, care should be taken to spend appropriate time providing feedback and not let compensation become the principal focus of the conversation.
  - G. The cycle begins again with new expectations and goals.
- IV. Adjustments in compensation shall be based on an independent, fair market value assessment and in conjunction with the goals and objectives established as part of the annual planning process.

## References

[AHA Sample CEO Performance Appraisal - Trustees](https://trustees.aha.org/sites/default/files/) https://trustees.aha.org/sites/default/files/;

[Evaluating the Performance of the Hospital or Health ...](https://www.ache.org/.../evaluating-ceo-performance)https://www.ache.org/.../evaluating-ceo-performance; The Governance Institute. Elements of Governance. Performance Evaluation in the New Health Care Industry, 3<sup>rd</sup> ed. May 2016.

## Approvals:

**Governance Committee 6/16/21**

**Board of Trustees / / (Pres. Jones, Sec.Kelsey)**

## Attachments

No Attachments

## Approval Signatures

Approver	Date
Taylor Jones: Board Trustee	pending
Irene Richardson: CEO	06/2021
Suzan Campbell: General Legal Counsel	06/2021

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Approved: N/A  
Review Due: 3 years after approval  
Document Area: Administration  
Reg. Standards:

## BOT - Election of Officers Guidelines



### Board of Trustees

#### Purpose:

To assure succession planning and a smooth transition of board offices.

At the annual meeting of the Board of Trustees (Board), its members will elect the following officers: President, Vice President, Secretary, and Treasurer. The Governance Committee is responsible for submitting this slate of officers to the Board, which shall be voted on by the full Board. In the event of a mid-year vacancy, the Governance Committee is also responsible for recommending a candidate to fill the vacancy, within sixty (60) days of the vacancy.

#### Text:

##### Process:

- I. At the annual meeting of the Board of Trustees, its members will elect the following officers: President, Vice President, Secretary, and Treasurer.
  - A. To assist the Board in electing those officers, the Governance Committee will accept suggested nominees, encourage participation by nominees, and present a ballot of nominees for Board vote.
    1. Names of nominees should be submitted to the Governance Committee in writing with the consent of the nominee obtained.
    2. Suggested names for the annual slate will not be accepted after June 15.
    3. Prior to the July meeting, the Governance Committee will meet with each nominee to ensure prior consent was given for their nomination and to encourage their participation.
  - B. The Governance Committee will compile a list of all nominees and submit a ballot of candidates to be voted on by the full Board at its annual meeting, which is the first Wednesday of July.
  - C. In the event there are two or more nominations for one office, that office will be voted on separately.
- II. In the event of a midyear vacancy, the office will be filled within sixty (60) days of the vacancy, using the process outlined in Section I above.

**Board of Trustees Approval:** / /

## Attachments

No Attachments

## Approval Signatures

Approver	Date
Taylor Jones: Board Trustee	pending
Irene Richardson: CEO	06/2021
Suzan Campbell: General Legal Counsel	06/2021

COPY





Approved: 06/2021  
Review Due: 06/2024  
Document Area: Board of Trustees  
Reg. Standards:

## BOT - Spending Authority and Matrix



### Board of Trustees

## STATEMENT OF PURPOSE:

The purpose of this policy is to establish rules and guidelines with respect to spending authority for employees of Memorial Hospital of Sweetwater County (MHSC). The dollar amount and nature of the expenditure ultimately determines the level of approval required.

## TEXT:

### I. Policy

- A. Statutory authority for the purchase of goods and services for MHSC resides with its Board of Trustees.
- B. This policy delegates spending authority for items less than \$25,000 to the Chief Executive Officer (CEO) and/or the Chief Financial Officer (CFO).
- C. Through the Spending Authority Matrix, the policy also sets forth guidelines for the procurement of goods and services that are equal to or greater than \$25,000.

### II. Definitions

- A. **Providers** are the two (2) groups of practitioners listed in the MHSC Medical Staff Bylaws (Physicians and Non-Physician Providers).
- B. **Purchased Services** are any service contracted for and performed by a third party rather than a hospital's in-house staff.
- C. **Capital Purchases** are buildings and equipment that  $\geq$  \$2,000 and a life of at least one year.
- D. **Real Estate** is property consisting of land and the buildings on it.
- E. **Legal Settlements** are the resolutions of disputed matters between MHSC and a person or entity without going to trial.

### III. Procedure

- A. The rules and guidelines of the Spending Authority Matrix shall be followed in delegating spending authority.

Type of Transaction	Legal Review	Leader Approval	Board Approval	Commissioner Approval	Authorized Signature
<b>Providers</b>					
Acquisition of Practice	Yes	CEO	Yes	No	CEO
Employment > \$100,000	Yes	CEO	Yes	No	CEO
Consulting Agreement > \$25,000	Yes	CEO	Yes	No	CEO
<b>Purchased Services</b>					
PO or check requests up to \$1,000	No	Dept. Director	No	No	CEO, CFO
PO or check requests up to \$2,500	No	Senior Leader	No	No	CEO, CFO
PO or check requests up to \$25,000	No	CFO	No	No	CEO, CFO
PO or check requests $\geq$ \$25,000	No	CEO, CFO	No	No	CEO, CFO
Management agreements up to \$25,000	Yes	CEO, CFO	No	No	CEO, CFO
Management agreements $\geq$ \$25,000	Yes	CEO, CFO	Yes	No	CEO, CFO
Consulting agreements up to \$25,000	Yes	CEO, CFO	No	No	CEO, CFO
Medical services up to \$25,000	Yes	CEO, CFO	No	No	CEO, CFO
Medical services $\geq$ \$25,000	Yes	CEO, CFO	Yes	No	CEO, CFO
Service contracts up to \$25,000	Yes	Dept. Director	No	No	CEO, CFO
Service contracts $\geq$ \$25,000	Yes	CEO, CFO	No	No	CEO, CFO
<b>Capital Purchase</b>					
Unbudgeted items up to \$10,000	No	Dept. Director	No	No	CEO, CFO
Budgeted items up to \$10,000	No	CEO, CFO	No	No	CEO, CFO
Budgeted items up to \$25,000	Yes	CEO, CFO	No	No	CEO, CFO
Budgeted items $\geq$ \$25,000	Yes	CEO,	Yes	No	CEO, CFO

Type of Transaction	Legal Review	Leader Approval	Board Approval	Commissioner Approval	Authorized Signature
		CFO			
<b>Real Estate</b>					
Real estate acquisitions	Yes	CEO, CFO	Yes	Yes	CEO
Real estate leases	Yes	CEO, CFO	Yes	No	CEO, CFO
<b>Leases</b>					
Leases	Yes	CEO, CFO	Yes	No	CEO, CFO
<b>Legal Settlements</b>					
w/insurance up to \$25,000	Yes	CEO	Yes	No	CEO
w/insurance $\geq$ \$25,000	Yes	CEO	Yes	No	CEO

- B. Departments must purchase goods and services as economically as possible according to the specified standards of quality and service while giving responsible suppliers fair consideration.
- C. Whenever appropriate, purchased goods and services shall occur through a competitive bid process that is publicly accountable, ethical, fair, and transparent.
- D. There may be occasions when a "sole source" provider is necessary, or highly desirable, which precludes the need for a competitive bid.
- E. Regardless of the situation, an individual cannot delegate authority down to another employee. Authority can only be delegated up to the individual's supervisor or Chief Officer.
- F. Payment will be processed only for items purchased according to the above Matrix.
- G. All contracts with Providers must be signed by the CEO and approved by the Board of Trustees.
- H. Any medical malpractice settlements, regardless of the amount, will go through professional liability insurance, and will be approved by the Board.
- I. Except for the purchases that require the CEO's signature, either the CEO or the CFO may sign for all other expenses.
- J. All designated signers for payment must complete a signature card; the original will be kept on file at the local financial institution(s) and a copy will be kept on file in the Finance Department.
- K. Payment for goods and services shall be made via checks drawn against Hospital demand deposit accounts, or electronic funds transfer, as authorized by the hospital administration and its Board of Trustees.
- L. In accordance with Hospital policy, the Hospital is responsible for the maintenance and storage of all contracts associated with these purchases.

Original adoption: May 4, 2011

**Board of Trustees Approval: / (Pres. Jones, Sec. Kelsey)**

**Attachments**

[Cover Check List.docx](#)

**Approval Signatures**

Approver	Date
Irene Richardson: CEO	06/2021
Suzan Campbell: General Legal Counsel	06/2021

COPY



Approved: N/A  
Review Due: 3 years after approval  
Document Area: Board of Trustees  
Reg. Standards:

## BOT - Senior Leaders Duty to Disclose



### Board of Trustees

#### Purpose:

1. To assist the Board of Trustees (Board) of Memorial Hospital of Sweetwater County (Hospital) in fulfilling its fiduciary duties by requiring the CEO, other key senior leadership personnel, legal counsel, and employees to disclose to the Board the practices, activities, and decisions of the Hospital to ensure they are lawful, prudent, and in compliance with the Hospital's mission, commonly accepted business practices, and professional ethics.
2. To assist the Board in its efforts to ensure that the Hospital, its senior leadership, legal counsel, and employees conduct the business of the Hospital in a manner consistent with its mission, vision, values, and regulatory and statutory duties.

**Duty to Disclose:** A duty of disclosure is an obligation to reveal relevant information that another party needs to rely upon to make a decision.

**Senior Leadership Team:** Chief Executive Officer (CEO), Chief Financial Officer (CFO), Chief Clinical Officer (CCO), Chief Nursing Officer (CNO) and Chief Medical Officer (CMO)

#### Policy:

1. The senior leadership team, as well as those listed above, has an obligation to disclose to the Board, or a Board committee, on a timely and sufficient basis, information and analysis relevant to the Board's decision-making and oversight responsibilities.
2. The senior leadership team, as well as those listed above, shall be available to the Board at each of its regular meetings, and at its Committee meetings, as requested.
3. All senior leaderships' reports to the Board shall be timely, complete, accurate, and shall be presented in a clear and concise manner.
4. Senior leaderships' reports shall include, but not limited, to the following:
  - a. Regular, monthly financial performance of the Hospital, including any actual or anticipated threats to

corporate assets

- b. Regular, monthly quality performance of the Hospital, including any actual or anticipated threats to its licensure, CMS status, and/or liability claims
- c. Relevant trends in the marketplace or regulatory environment in which the Hospital conducts its operations
- d. Changes in the assumptions upon which any Board policy or strategy has been established
- e. Actual or anticipated legal action against the Hospital
- f. Actual or anticipated adverse media coverage against the Hospital
- g. Actual or anticipated noncompliance with any policy of the Board, regulatory requirement, or law
- h. Physician recruitment efforts, business plans for new and/or changes to existing service lines, and physician contracts.

Original adoption: 6/1/2001; Revised: 6/7/2017

## Approvals:

Governance Committee 6/30/2021

Board of Trustees / /

## Attachments

No Attachments

## Approval Signatures

Approver	Date
Irene Richardson: CEO	pending
Suzan Campbell: General Legal Counsel	06/2021





Approved: 06/2021  
Review Due: 06/2024  
Document Area: Board of Trustees  
Reg. Standards:

## BOT - Conflict of Interest Policy



### Board of Trustees

Memorial Hospital of Sweetwater County (MHSC) Board of Trustees members will operate in a manner that will uphold the ethical standards of the Hospital by adhering to this Conflict of Interest policy.

#### TEXT:

- I. Under the applicable Wyoming conflict of interest statutes (W.S. §17-19-831) a conflict of interest transaction is a Hospital transaction in which a Board of Trustees member has a direct or indirect interest and the transaction requires Board approval.
  - A. If a Board member has a direct or indirect conflict with a Hospital transaction, the Board member shall disclose his/her interest to the Board and then shall recuse him/herself from discussion and voting on the transaction.
  - B. An indirect conflict is a transaction:
    1. with another entity in which the Board member has a material interest or
    2. with another entity of which the Board member is a director, officer or trustee
- II. A Board member shall not use his/her position or any hospital funds, time, personnel, facilities, or equipment for his/her private benefit or that of another, unless the use is authorized by law.
  - A. A Board member shall not participate in the employment, transfer, discipline, or advancement of a family member at the Hospital.
  - B. A Board member shall not apply for a position as an employee of the Hospital until he/she has duly resigned his/her position on the Board.
- III. Each Board member shall complete and submit the annual Conflict of Interest Disclosure form (see attached) between July 1 and July 31 of each year.
  - A. The completed annual Disclosure forms will be maintained in the MHSC Administration office.
  - B. If, after completion and submission of the annual disclosure, a Board member becomes aware of any interest that could be perceived as a conflict or is a potential conflict of interest, the Board member shall promptly make disclosure of the interest to the Board.

**Approval: Revised May 25, 2021 Presented to Governance Committee June 4, 2021 approved by the Board of Trustees / / (Pres. Jones, Sec. Kelsey)**

## Attachments

No Attachments

## Approval Signatures

Approver	Date
Irene Richardson: CEO	06/2021
Suzan Campbell: General Legal Counsel	06/2021

COPY





Approved: N/A  
Review Due: 3 years after approval  
Document Area: Board of Trustees  
Reg. Standards:

## BOT - Board Agenda



### Board of Trustees

#### STATEMENT OF PURPOSE:

A meeting agenda is a list of activities in the order that they are to be addressed. Agendas provide prior notice of the business to be conducted; enable participants to come prepared; distinguish among informational items, action items, and discussion items; and facilitate allocation of time.

#### DEFINITIONS:

A **meeting agenda** is a list of activities in the order that they are to be addressed, beginning with the call to order and ending with adjournment.

A **consent agenda** is a subsection of the meeting agenda that groups non-controversial, routine business and reports into one agenda item. It is a time saving device, because the consent agenda can be approved in one action, rather than making motions on each separate item.

#### TEXT:

##### I. Preparing the Agenda.

- A. The President of the Board of Trustees (Board) shall prepare the agenda for all meetings of the Board in consultation with the Chief Executive Officer (CEO).
  1. If a Trustee has an item that s/he wishes to add, either for discussion or action, the Trustee shall send the item to the CEO and the Board President for inclusion in that month's agenda.
  2. The item will be placed on the agenda.
  3. The President has the discretion to designate the item for action, or for discussion with action to be taken later, or refer it to the appropriate Committee for further consideration.
- B. The chairperson of each Board Committee shall prepare the agenda for his/her Committee in consultation with the appropriate hospital staff.

##### II. Approving the Agenda.

- A. To assure the transparent conduction of the hospital business, agendas for regular and special meetings shall be approved at the beginning of each Board or Committee meeting.

**III. Amending the Agenda.**

- A. For regular meeting agendas, Trustees may move for additions or deletions to the original agenda. The amended agenda must be approved in order for the conducted business to be official.
- B. For consent agendas, Trustees may require that one or more items be removed to the regular agenda. The consent agenda is then approved minus the removed items.
- C. Agendas for *special* meetings may **not** be amended.

**Board of Trustees Approval: / / (Pres. Jones, Sec. Kelsey)**

**Attachments**

No Attachments

**Approval Signatures**

Approver	Date
Suzan Campbell: General Legal Counsel	pending



Approved: 06/2021  
Review Due: 06/2024  
Document Area: Board of Trustees  
Reg. Standards:

## BOT - EMAIL COMMUNICATIONS



### Board of Trustees

#### STATEMENT OF PURPOSE:

The Board of Trustees (Board) of Memorial Hospital of Sweetwater County (Hospital) will conduct business- whether in person or by email- in an open and transparent manner.

#### TEXT:

- I. Board members may and are encouraged to share educational information and materials amongst themselves by email. Such email correspondence, as long as it is NOT official Hospital business, is constructive.
- II. Email communication regarding Board agenda items:
  - A. Individual comments regarding any agenda item, including those placed by individual board members, are to be emailed to the Chief Executive Officer's (CEO) administrative assistant.
  - B. By emailing the CEO's administrative assistant everyone, including the public, can see them.
  - C. The emailed comments will be included in that month's board meeting packet.
- III. Official Hospital/Board business by email:
  - A. No meeting shall be conducted by electronic means or any other form of communication that does not permit the public to hear, read or otherwise discern meeting discussion contemporaneously.
  - B. Communications outside a meeting, including, but not limited to, sequential communications among members of an agency, shall not be used to circumvent the purpose of the Open Meetings Act W.S. 16-4-401(et. seq.).

**Board of Trustees Approval:** / (Pres. Jones, Sec. Kelsey)

## Attachments

No Attachments

## Approval Signatures

Approver	Date
Irene Richardson: CEO	06/2021
Suzan Campbell: General Legal Counsel	06/2021

COPY



Approved: 06/2021  
Review Due: 06/2024  
Document Area: Board of Trustees  
Reg. Standards:

## BOT - Investment Policy



### Board of Trustees

## STATEMENT OF PURPOSE:

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

## TEXT:

### I. Scope

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

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

- a. **Safety** – Safety of principal is the foremost objective of the investment program. Investments shall be undertaken in a manner that seeks to ensure the preservation of capital in the overall portfolio. The objective will be to mitigate credit risk and interest rate risk.
  - i. **Credit Risk** – MHSC will minimize credit risk, which is the risk of loss due to the failure of the security issuer or backer by:
    1. Pre-qualifying the financial institutions, broker/dealers, intermediaries, and advisers with which MHSC will do business in accordance with Section IV.
    2. Diversifying the investment portfolio so that the impact of potential losses from any one type of security or from any one individual issuer will be minimized.

- ii. **Interest Rate Risk** – MHSC will minimize interest rate risk, which is the risk that the market value of securities in the portfolio will fall due to changes in market interest rates by:
  - 1. Structuring the investment portfolio so that securities mature to meet cash requirements for ongoing operations, thereby minimizing the need to sell securities on the open market prior to maturity.
  - 2. Investing operating funds primarily in shorter-term securities, money market mutual funds or similar investment pools and limiting the average maturity of the portfolio in accordance with this policy and Section VII.
- b. **Liquidity** – The investment portfolio shall be structured to remain sufficiently liquid to meet all operating requirements that may be reasonably anticipated. This will be accomplished by structuring the portfolio so that securities mature concurrent with cash needs to meet anticipated demands. Furthermore, since all possible cash demands cannot be anticipated, the portfolio shall consist of securities with active secondary or resale markets. Alternatively, a portion of the portfolio may be placed in money market mutual funds or local government investment pools which offer same day liquidity for short-term funds.
- c. **Yield** - The investment portfolio shall be designed with the objective of attaining a market rate of return throughout budgetary and economic cycles, taking into account the investment risk constraints and liquidity needs. Return on investment is of secondary importance compared to the safety and liquidity objectives described above. The core of investments are limited to relatively low risk securities in anticipation of earning a fair return relative to the risk being assumed. Securities shall generally be held until maturity with the following exceptions:
  - i. A security with declining credit may be sold early to minimize loss of principal.
  - ii. A security swap would improve the quality, yield, or target duration of the portfolio.
  - iii. The security has increased in value and may be sold at an increase in value.
  - iv. Liquidity needs of the portfolio require that the security be sold.
- d. **Local Considerations** - Where possible, funds may be invested for the betterment of the local economy or that of local entities within the State. MHSC may invest a portion of the investment portfolio with eligible financial institutions at a lower rate of interest when the investment officer deems that the investment may benefit the local economy.

### III. Standards of Care

- a. **Prudence** - The standard of prudence to be used by investment officials shall be the "prudent person" standard and shall be applied in the context of managing an overall portfolio. Investment officers acting in accordance with written procedures and this investment policy and exercising due diligence shall be relieved of personal responsibility for an individual security's credit risk or market price changes, provided deviations from expectations are reported in a timely fashion and the liquidity and the sale of the securities are carried out in accordance with the terms of this policy. The "prudent person" standard states that, "Investments shall be made with judgement and care, under circumstances then prevailing, which persons of prudence, discretion and intelligence exercise in the management of their own affairs, not for speculation, but for investment, considering the probable safety of their capital as well as the probable income to be derived."
- b. **Ethics and Conflict of Interest** - Officers and employees involved in the investment process shall refrain from personal business activity that could conflict with the proper execution and management of the investment program, or that could impair their ability to make impartial decisions. Employees



and investment officials shall disclose any material interests in financial institutions with which they conduct business. They shall further disclose any personal financial/investment positions that could be related to the performance of the investment portfolio.

- c. **Delegation of Authority** – Authority to manage the investment program is delegated to the Chief Financial Officer, who shall act in accordance with established written procedures and internal controls for the operation of the investment program consistent with this investment policy. Such procedures shall include explicit delegation of authority to persons responsible for investment transactions.

- i. In order to facilitate direct communication to the Board of Trustees, the Finance and Audit Committee will be responsible for activities regarding the investment program including:

- a. The periodic review of Hospital's investment activities.
    - b. The periodic review of the Hospital's investment policy.

- ii. The Board of Trustees will be responsible for approving any new investment activity as follows:

- a. New investment types and instruments not previously approved by the Board.
    - b. New brokerage or dealer firms not previously approved by the Board.

#### IV. **Authorized Financial Institutions, Depositories and Broker/Dealers**

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

#### V. **Suitable and Authorized Investments**

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

#### VI. **Safekeeping and Custody**

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

compliance is performed as part of the MHSC annual financial audit.

## VII. Investment Parameters

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

## VIII. Policy Considerations

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

## IX. Approval of Investment Policy

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

# References

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

**Approval: Board of Trustees / / (Pres. Jones, Sec. Kelsey)**

## Attachments

No Attachments

## Approval Signatures

Approver	Date
Irene Richardson: CEO	06/2021
Tami Love: CFO	06/2021



Approver	Date
Suzan Campbell: General Legal Counsel	06/2021

COPY



Approved: 06/2021  
Review Due: 06/2024  
Document Area: Board of Trustees  
Reg. Standards:

## BOT - Contracts Requiring Board Approval Policy



### Board of Trustees

#### STATEMENT OF PURPOSE:

This Hospital wide policy describes the contracts that require MHSC Board of Trustees (Board) approval before they become effective. Board approval shall be authorization for the Chief Executive Officer (CEO) to sign contracts on behalf of the Board. This policy does not apply to the hiring of Hospital employees other than Physicians and Non-Physician Providers.

#### TEXT

- I. **Agreements requiring County Commission approval - as defined by Wyoming Statute § 18-8-301.**
  - A. This statute states that a contract in which the county hospital "engages in shared services and other cooperative ventures; enters into partnerships; either alone or in conjunction with any other entity, form or be an interest owner of corporations, partnership, limited partnership, cooperative... or any other trust or association organized under the laws of this state" must be approved by the Board of Trustees and the County Commissioners before such an agreement is binding on any of the parties. Contracts anticipated by Wyoming Statutes §18-8-108 and 109 can only be negotiated, executed and agreed to by the Board of Trustees in conjunction with the Board of County Commissioners.
- II. **Any contract equal to or greater than \$25,000.00**
  - A. This excludes service agreements (regardless of the dollar amount) attached to Board approved capital equipment.
  - B. The service agreements attached to this equipment can be signed and approved by the CEO and reported to the Board at the next Board meeting after approval.
    1. *All Physician and Non-Physician Provider Employment Contracts*
    2. *All Hospital Consultant contracts*
    3. *All Hospital Management contracts*

4. *All Real estate transactions and any property leases*
5. *Any medical malpractice settlements regardless of amount*
6. *Any other contract the CEO or In-House Counsel wish to present to the Board for discussion and approval.*

C. A list of other contracts that have been approved by In-House Counsel and signed by the CEO will be provided to the Board at the Board meeting following internal approval of these contracts.

### III. Process After Contract is Approved and Signed

- A. All executed contracts, excluding Physician and Non-Physician Provider contracts, shall be submitted to In House Counsel when finalized.
- B. Physician and Non-Physician Provider contracts are housed in the Administration office.
- C. All other contracts shall be entered into the contract database and tracked for renewal and/or expiration dates by In House Counsel. Notice of contract renewal or expiration shall be provided to the CEO and responsible staff member for the contract by In House Counsel at least 90 days prior to the date required to terminate or renew the contract.
  - For example, if contract requires 180 days notice to terminate, the contract will be flagged for notice to responsible party and CEO 90 days prior to the start of the 180 day's required for notice of termination.

### Approvals:

Board of Trustees / / (Pres. Jones, Sec. Kelsey)

### Attachments

No Attachments

### Approval Signatures

Approver	Date
Irene Richardson: CEO	06/2021
Suzan Campbell: General Legal Counsel	06/2021
Suzan Campbell: General Legal Counsel	06/2021



Approved: 05/2021  
Review Due: 05/2024  
Document Area: Board of Trustees  
Reg. Standards:

## BOT - Guidelines for Negotiating Physician Contracts



### Board of Trustees

#### STATEMENT OF PURPOSE:

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

#### POLICY

The CEO is directly responsible for the hiring of 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.

#### TEXT:

##### I. 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.

## **II. 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.
  - 1. 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 the Physician on behalf of the Hospital.
  - 2. Coverage may be on an occurrence or claim made basis.
  - 3. 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.
  - 1. Physician shall also receive 5 days of continuing medical education (CME) per year.
  - 2. PTO will be capped at 320 hours.
  - 3. No CME will be carried over into the next calendar year.
  - 4. 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 the Physician immediately (1st of the following quarter of their start date).
  - 1. 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.
  - 2. The CEO may agree to match the maximum IRS contribution limit.
- G. Student loan repayment of up to \$30,000 per year for 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 Contract 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 Physicians 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.

## **III. 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 of their Contract.

**IV. 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.

**Board of Trustees Approval: 3/21 (Pres. Jones, Sec. Kelsey)**

**Attachments**

No Attachments

**Approval Signatures**

Approver	Date
Irene Richardson: CEO	05/2021

COPY





Approved: 05/2021  
Review Due: 05/2024  
Document Area: Board of Trustees  
Reg. Standards:

## BOT - Guidelines for Negotiating Non-Physician Provider Agreements



### Board of Trustees

#### STATEMENT OF 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.

#### TEXT:

##### I. 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.

## **II. 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.
  - 1. 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.
  - 2. Coverage may be on an occurrence or claim made basis.
  - 3. 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.
  - 1. Non-Physician Providers shall also receive 5 days of continuing medical education (CME) per year. PTO will be capped at 320 hours.
  - 2. No CME will be carried over into the next calendar year.
  - 3. 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).
  - 1. 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.
  - 2. The CEO may agree to match the maximum contribution limit.
- G. Student loan repayment of up to \$20,000 per year for 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.

## **III. 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 of their Agreement.

**IV. 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.

**Board of Trustees Approval: 3/21 (Pres. Jones, Sec. Kelsey)**

**Attachments**

No Attachments

**Approval Signatures**

Approver	Date
Irene Richardson: CEO	05/2021

COPY



Approved: 06/2020  
Review Due: 06/2023  
Document Area: Board of Trustees  
Reg. Standards:

## BOT - Financial Hardship Policy



### Board of Trustees

## STATEMENT OF PURPOSE

The purpose of this Financial Hardship policy and procedure is to address the dual interests of providing access to medical care at Memorial Hospital of Sweetwater County (MHSC) and its ancillary departments for those with limited ability to pay for such services. MHSC has put three (3) separate programs into place to identify and assist patients with limited ability to pay for such services.

## TEXT

### I. Self-Pay Rate

- A. MHSC will offer a 50% discount off gross or billed charges to all uninsured patients regardless of income that have received emergency and/or other medically necessary care at our institution.
- B. An uninsured patient is defined as a patient without benefit of a third-party insurance (corporation, company, health plan or trust, automobile medical pay benefit, Workers' Compensation, health insurance, government or entitlement program, etc.).
- C. This offer will be made to self-pay patients that have demonstrated an inability to pay for all or a portion of such services after receiving a "Final Statement".

### II. Medical Assistance

- A. MHSC offers a Medical Assistance program for emergency and/or other medically necessary care at our institution to uninsured and under-insured patients based upon a variety of qualifications that must be met and demonstrated including income, household size, and savings and investment amounts.
- B. The program is designed to assist patients whereby their gross family income falls below 300% of the Federal Poverty Level amounts and their investment levels fall below a certain criterion.

### III. Payment Arrangement

- A. We understand that the recent shift from higher insurance payments for health care services to lower

insurance payments and coverage sometimes creates a financial hardship for our patients as the patient's financial responsibility for services increases. MHSC offers our patients the opportunity to ease the financial hardship that medical expenses sometimes create by offering our patients the opportunity to set up formal payment arrangements in an effort to retire their debt with us.

- B. The guideline for formal payment arrangement is below:

Account Balance		Payment Arrangement
\$0.01	\$150.00	Paid in full within 60 days of service
\$151.00	\$1,000.00	Minimum of \$100.00 per month
\$1,001.00	\$1,500.00	Minimum of \$150.00 per month
\$1,501.00	\$2,500.00	Minimum of \$200.00 per month
\$2,501.00	\$4,000.00	Minimum of \$250.00 per month
\$4,001.00	\$10,000.00	Minimum of \$300.00 per month
\$10,001.00	or larger	Minimum of \$500.00 per month

#### IV. Non-Discrimination

- A. MHSC does not exclude, deny benefits to, or otherwise discriminate against any person on the grounds of race, color, national origin, religion, sex, sexual orientation, gender identity/expression, genetic information, protected veteran status, or on the basis of disability or age in admission to, participation in, or receipt of services and benefits under any of its programs or activities.

## REFERENCES

**Board of Trustees Approval: 5/20 (Pres. Jones, Sec. Kelsey)**

### Attachments

No Attachments

### Approval Signatures

Approver	Date
Tami Love: CFO	06/2020
Ron Cheese: Patient Financial Director	06/2020



Approved: 05/2021  
Review Due: 05/2024  
Document Area: Board of Trustees  
Reg. Standards:

## BOT - Attendance of Board Committee Meetings



### Board of Trustees

#### STATEMENT OF PURPOSE:

Standing Committees are an important part of the governance structure of the Board of Trustees (Board) of Memorial Hospital of Sweetwater County. Although most of the detailed work of the Board is performed by its Committees, the Committees have no expressed or implied power or authority. therefore, it is permissible for a Trustee, who is not an appointed member, to attend meetings of Committees of which s/he is not a member.

#### TEXT:

- I. In the absence of an appointed trustee member, the Board President may appoint a trustee to be a temporary member of the Committee, who shall have voting privileges.
  - A. For educationl/informational purposes, Trustees may attend the meetings of Committees of which they are not appointed members.
  - B. They shall not have voting privileges.
  - C. Their attendance neither triggers a quorum nor indicates a public meeting.
- II. The Board President is an ex-officio member of all committees and may attend any Committee meeting without being in conflict of open meeting laws.
- III. All Board and Committee meetings shall comply with the Wyoming Open Meetings Act.<sup>1</sup>
  - A. Under Wyoming's Open Meetings Act notice of regularly scheduled committee meetings need not be given.
  - B. Committees may meet in executive session provided that all executive sessions are in compliance with the Wyoming Open Meetings Act.

#### References:

<sup>1</sup>Wyoming Open Meetings Act - Wyoming Statutes § 16-4-401 to 16-4-408.

**Board of Trustees Approval: 9/20 (Pres. Jones, Sec. Kelsey)**

## Attachments

No Attachments

## Approval Signatures

Approver	Date
Irene Richardson: CEO	05/2021

COPY



Approved: 05/2021  
Review Due: 05/2024  
Document Area: Board of Trustees  
Reg. Standards:

## BOT - Maintenance of Board and Board Committee Meeting Minutes



### Board of Trustees

#### STATEMENT OF PURPOSE:

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

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

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

#### Definitions:

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

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

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

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

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

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



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

## **TEXT:**

- I. There shall be an official record, or minutes, of the proceedings of every meeting.
  - A. Meeting minutes should include:
    1. Date of the meeting
    2. Time the meeting was called to order
    3. Names of the meeting participants and absentees
    4. Corrections and amendments to previous meeting minutes
    5. Additions to the current agenda
    6. Whether a quorum is present
    7. Motions take or rejected
    8. Voting - that there was a motion and second, and the outcome of the vote,
    9. Actions taken or agreed to be taken
    10. Next steps
    11. Items to be held over
    12. New business
    13. Open discussion or public participation
    14. Next meeting date and time
    15. Time of adjournment
  - B. The Board Secretary shall delegate the recording and drafting of Board meeting minutes to the executive assistant of the Chief Executive Officer (CEO).
  - C. For committees where someone other than the executive assistant of the CEO takes the minutes, the Committee Chair is responsible for assuring that the CEO's executive assistant has all the Committee meeting material for the upcoming Board meeting packet.
  - D. Board meeting minutes are official once they have been approved by the Board and signed by the Board Secretary. Committee meeting minutes are official once they have been approved by Committee members.
  - E. The minutes of executive sessions are confidential and are in the custody of the executive assistant of the CEO.
  - F. Public meeting notice, as well as the meeting agenda, handouts and documents that were referred to during the meeting shall be attached to the official copy of the minutes.
  - G. Storage and retention of all official records of the Board shall comply with Wyoming State statutes<sup>2</sup> and are delegated to the executive assistant of the CEO.
    1. Minutes of all Board meetings shall be permanently retained in physical form.
      - a. To protect from damage and destruction, physical copies of the minutes and their attached documents shall be retained in a safe, secure file cabinet in the office of the Hospital's administration.

- b. digital copies of the minutes and their attached documents shall be uploaded and retained in the board portal.
  - 2. Minutes of all Committee meetings shall be retained for three years.
    - a. Digital copies of the minutes and their attached documents shall be uploaded and retained in the appropriate Committee section of the board portal.
    - b. The administrative staff associated with the Committee shall be responsible for uploading each month's meeting material into the board portal for storage.
- H. Board and Committee minutes are controlled from unauthorized access.
  - 1. Digital minutes are protected from unauthorized access through passwords.
  - 2. Access to paper minutes is under the purview of the executive assistant of the CEO.
  - 3. Minutes that are in the public domain shall be provided for public review without charge on equipment made available by the Hospital in its office. Copies of the minutes may be requested; the Hospital may set a fee to cover costs of copying.
- I. Official minutes of all Board meetings will be part of the public material on the Board of Trustee's section of the Hospital's website.

## References

<sup>1</sup>Wyoming State Statute §1614-401 to 16-4-408 (2011)

<sup>2</sup>Wyoming State Statute §17-16-1601 and 17-19-1601 (2011)

## Board of Trustees Approval: 10/20 (Pres. Taylor, Sec. Kelsey)

### Attachments

No Attachments

### Approval Signatures

Approver	Date
Irene Richardson: CEO	05/2021





Approved: 05/2021  
Review Due: 05/2023  
Document Area: *Board of Trustees & Medical Staff*  
Reg. Standards: *CMS Appedix A 482.12(a) (10), A-0053*

## BOT - Medical Staff Leadership Direct Consultation with the Hospital Board of Trustees



### Board of Trustees

#### STATEMENT OF PURPOSE:

- To establish process for periodic direct consultation with the Hospital Board of Trustees by designated Medical Staff leader on matters related to quality of medical care provided to patients of the hospital in accordance with CMS [§482.12\(a\) \(10\), A-0053](#)

#### SCOPE:

- This policy applies to the Medical Staff and Board of Memorial Hospital of Sweetwater County.

#### DEFINITIONS:

- “Direct consultation”** means that the Board meets with the leader(s) of the Medical Staff, or his/her designee(s) either face-to-face or via a telecommunications system permitting immediate, synchronous communication.
- “Designee”** means an individual recognized by the hospital as a Medical Staff leader.

#### POLICY:

- Approach**
  - Direct consultation will be with the Board, at least twice yearly, at the monthly board meetings.
- Medical Staff Leader Designee**
  - In accordance with CMS, the Board may determine if the Medical Staff leader must make the designation in writing when he/she chooses to designate another individual to make the periodic consultations or whether the leader of the Medical Staff may make informal, ad hoc designation; and if advance notice of a designation is required.

- The Memorial Hospital of Sweetwater County Board has determined:
  - the designation may be informal and adhoc; and
  - the Board requires no advance notice.
- **Frequency of Periodic Consultation**
  - The Medical Staff leader or designee is required to meet at least twice during the fiscal year.
  - The Board may increase the number of consultations based upon the scope and complexity of the hospital services offered, specific patient populations served by the hospital, and any issues of patient safety and quality of care that the hospital's quality assessment and performance improvement program might periodically identify as needing the attention of the Board in consultation with it's Medical Staff.
  - The Medical Staff leader may also increase the number of consultations with the Board based upon the criteria listed above.
- **Required Elements of the Consultation**
  - The required consultation must include discussion of matters related to the quality of medical care provided to patients of the hospital.
- **Board Responsiveness**
  - The Board is expected to be responsive to any periodic and/or urgent requests from the leader of the Medical Staff or designee for timely consultation on issues regarding the quality of medical care provided to patients of the hospital.
- **Documentation**
  - Consultation with the Medical Staff leader or designee will be documented in minutes, including attendees and the matters discussed.

## REFERENCES

CMS State Operations Manual, Appendix A – Survey Protocol, Regulations and Interpretive Guidelines for Hospitals (Rev. 151, 11-20-15), §482.12(a) (10), A-0053 retrieved from [https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107ap\\_a\\_hospitals.pdf](https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107ap_a_hospitals.pdf)

## Reviewed and Approved:

MEC 02/23/2021

Quality Committee of the Board: 03/10/2021

MHSC Board of Trustees: 5/21/21 (Pres. Jones, Sec. Kelsey)

## Attachments

No Attachments

## Approval Signatures

Approver	Date
Ann Clevenger: CNO	05/2021
Irene Richardson: CEO	04/2021
Tami Love: CFO	02/2021
Kari Quickenden: Chief Clinical Officer	02/2021
Ann Clevenger: CNO	02/2021

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## MEMORANDUM

To: Board of Trustees  
From: Wm. Marty Kelsey  
Subject: Chair's Report...June Quality Committee Meeting  
Date: June 28, 2021

The Committee approved the "Board of Trustees Reporting Calendar." The Quality consultant, Mella, recommended that a calendar be approved by the Board each year to help ensure that all required reports are reviewed.

Dr. Quickenden gave an update on the Joint Commission Survey. Hospital staff has submitted the Hospital's response to the Survey findings and now are awaiting the Commission's feedback.

Kara Jackson, Quality Director, reported on Quality Reporting Programs and COVID. CMS provides the Hospital with periodic reports. She also reported on the FY 2022 CMS Inpatient Prospective Payment System Proposed Final Rule. This year, CMS will not be calculating a score for Value Based Purchasing...this score has helped the Hospital in the past.

Ms. Jackson reported on the new Annual Patient Safety and Performance Improvement Report. This report is informational for FY 2021. Also included in the Report are the proposed FY 2022 PIPS priorities. The Committee voted to approve this Report (including the proposed FY 2022 PIPS priorities) and to send it to the Board of Trustees for action at the July Board meeting.

Dr. Clevenger presented her DNP project...a Toolkit on Patient Pneumonia Readmission Rates. The Hospital realized a 1.9% reduction in admissions. Her project was deemed a success and Dr. Clevenger was congratulated by Committee members.

Dr. Karn gave the Medical Staff Update. She proposed that the Hospital require all employees to get the flu vaccination, beginning this year. The Committee agreed. This proposal will be taken to the General Medical Staff Committee in July for discussion. Committee members anticipate there will be some amount of pushback.

Dr. Poyer also gave an update. She went over several statistics covering various areas. She reported that physician engagement is going well at MHSC. She reported that two COVID patients had to be intubated and transferred. CDC guidelines are continuing to be followed.

For more detailed information on this meeting, please review the minutes of the meeting which are in the packet.

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

**Non-voting Members:** Valerie Boggs, Karali Plonsky, Corey Worden, Cindy Nelson,

**Guests:** Taylor Jones (Board of Trustees Chair),

Absent/Excused: **Voting Members:** Dr. Barbara Sowada (Quality Board Member),

**Non-voting Members:** Kalpana Pokhrel, Noreen Hove

**Guests:** Richard Mathey (Board of Trustee)

Chair: Mr. Marty Kelsey

### **Approval of Agenda & Minutes**

Mr. Kelsey called the Meeting to order at 8:15 am. The Quality Agenda was presented for approval, Dr. Symington motioned to approve, Dr. Poyer seconded. Motion was approved. Mr. Kelsey presented the May 19, 2021 Minutes for approval. Ms. Richardson motioned to approve, Ms. Jackson seconded. Motion was approved.

### **Mission Moment**

Ms. Plonsky shared a mission moment by way of HCAHPS survey "Patient Experience", from a "hot comment" received through the patient experience. A "hot comment" is a trigger word that sends an alert message to staff. The alert word was "terrible" – which turned out to be used to describe their anxiety. It was actually a great comment in the end, where they stated "if they ever had to stay at a hospital again, it would be this one to stay at, best service I have ever received".

### **Old Business**

Mr. Kelsey presented the Board of Trustees Reporting Calendar for approval. Mr. Kelsey relayed a question from Dr. Sowada – Is the reporting calendar optional or required? Ms. Jackson noted it was a recommendation from our consultant to ensure all required reports are reviewed. Dr. Quickenden agreed, it is a tracking mechanism. She also stated she and staff are confident that they have all required items listed, although it may evolve over time. Dr. Quickenden motioned to approve, Dr. Poyer seconded, motion approved. The Reporting Calendar will be taken to the Board of Trustees in July for final approval.

Dr. Quickenden reviewed the JC Survey Updates. Survey team met last Friday, and submitted our response to Joint Commission on Monday, June 21<sup>st</sup>. We expect a response in a few days of acceptance or need for additional information. In the meantime, we are working on items that

although not findings were opportunities for improvement. We are also Ramping up for Lab Survey in the fall.

### **New Business**

Ms. Jackson reported on Quality Reporting Programs and COVID - this information is a summary of CMS reports, which are received staggered through the summer. Ms. Jackson stated as additional reports come in, they will be compiled and another summary will be provided to the committee in July or August. Ms. Jackson further reported on the FY 2022 CMS Inpatient Prospective Payment System Proposed Final Rule. In years past this would have been simply reported verbally, this year there are quite a few proposed changes, many due to COVID, with some measures being suppressed, necessitating a visual report. This year they are proposing to not calculate a score for Value Based Purchasing (VBP), but instead receive a neutral score. Currently we receive a positive adjustment for VBP, so this change will not work in our favor. They will continue to give us feedback, but it will not be publicly be reported.

Ms. Jackson next reported on the new Annual Patient Safety and Performance Improvement Report. The goal of this report is to capture all the work that has been completed for FY 2021. Two other elements that are reported: Annual Evaluation of the PIPS plan and how well we felt it worked, plus the proposed FY 2022 PIPS priorities. Most of report is informational, with just the needed approval of the proposed FY 2022 Priorities by the Committee and the Board. Normally this information would have been decided on last month, but due to Joint Commission arrival on the day of the PIPS committee meeting it was delayed by 1 month. Three (3) priorities were identified: Sepsis, Patient Experience Surveys and Clostridioides Difficile (C.diff). Dr. Karn moved to approve the Proposed FY 2022 Priorities, Dr. Poyer seconded the motion, motion approved. The FY 2022 Priorities will go to the July Board Committee for approval.

Dr. Clevenger presented the DNP project update – Re-Engineered Discharge (Red) Toolkit on Patient Pneumonia Readmission Rates. The poster presentation was shared for review. The project was put in place to improve the transition of care for patients from the hospital to home, to help reduce pneumonia re-admissions. COVID increased the number values. Although the results were not statistically significant, they were clinically significant. We noted an improvement in the process and method of providing the education according to the patient needs. We also noted a 1.9% reduction in admissions. Overall the project was a success!

### **Medical Staff Update**

Dr. Karn addressed our Flu Vaccine policy, in consideration of the low rate of vaccination in our county. Dr. Karn proposed mandatory flu vaccination, as we do with rubella and varicella. In the past we have required either receive the vaccine or wear a mask, which did help to increase our rate. Dr. Karn noted she "is a proponent of mandatory vaccine, we work in a health care facility and it is our job to provide health care and promote health, not give the disease". This proposal was taken to MEC last night, who felt the entire medical staff should be involved, so it will be taken to General Medical Staff committee in July. We expect pushback, since we are in a vaccine hesitant area. We are looking into other facilities and their processes. We just need to be prepared for fallout.

Dr. Poyer gave the second half of no sepsis fallouts, transfer rates remain below national average, with no stems for April, and no HCAHP fallouts. Between Perinatal, Surgery, Dr. Najm and Dr. Poyer will be looking at each measure. Each month indicators will be reported to MEC and to Quality. We are doing well with physician engagement. We have recently had 2

COVID+ patients under the age of 45 that have had to be intubated and flown out within the last 48 hours. Our community positivity rates are updated every Thursday, currently at 6.2%, which is down from the 9s last week. Our hospital swab line positivity rate hovers between 10-20%, currently it is at 13%. We will continue to follow CDC guidelines with few contact points, masking and other COVID protocols we have in place.

#### **Informational Items for Review/Discussion**

Mr. Kelsey presented the Informational items for Review and requested any items for pull out. Ms. Jackson wished to highlight the efforts made in Patient Experience and the hard work that has gone into improving these measures, which is reflected in the improved statistics. Dr. Clevenger shared that the Pharmacy worked collaboratively with the Inpatient nursing units with a medication education program with videos, that help to show improvement in our scores.

#### **From the Director – bimonthly**

No report this month.

#### **Open Discussion**

Dr. Quickenden stated there are other surveys and inspections that we would like to bring forward to the Quality Committee, to recognize the hard work of everyone within the facility. We just had the Pharmacy inspection and we have Trauma Survey coming up. We will be sharing a summary of those surveys with Quality.

Mr. Kelsey noted a national award received by Star Valley for patient times, and wondered if we could learn anything from them. Ms. Taylor noted she had a surgical procedure there a few years ago and had a phenomenal experience. Dr. Clevenger stated she would reach out to them.

#### **Meeting Adjourned**

The meeting adjourned at 9:40 am

#### **Next Meeting**

July 21, 2021 at 08:15 am via ZOOM.

Respectfully Submitted,

---

Robin Fife, Recording Secretary

## **HR CHAIR REPORT TO THE BOARD FOR JUNE 2021**

**Ed Tardoni**

The Human Resources Committee met in a Zoom format in May.

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

The usual HR reports are included in the Board packet.

### **The HR Committee did not meet in the month of June.**

The June meeting was cancelled due to a lack of agenda items.

### **NEXT MEETING**

The next meeting of the HR Committee is scheduled for July 19, 2021 at 3:00 P.M most likely by Zoom



**Human Resources Committee Meeting  
June 2021 - No meeting held**

**Monthly reports**

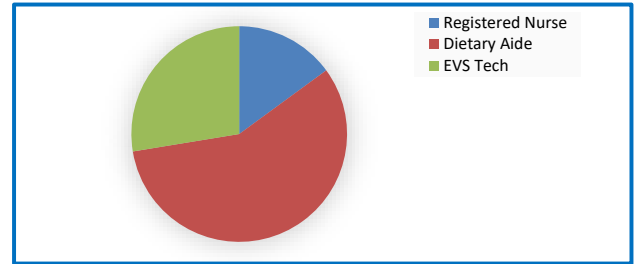
- I. Turnover Report (thru May 2021)
- II. Open Positions (as of 6/25)

# MEMORIAL HOSPITAL OF SWEETWATER COUNTY

## 2021 Overall Turnover Data (As of 5/31/2021)

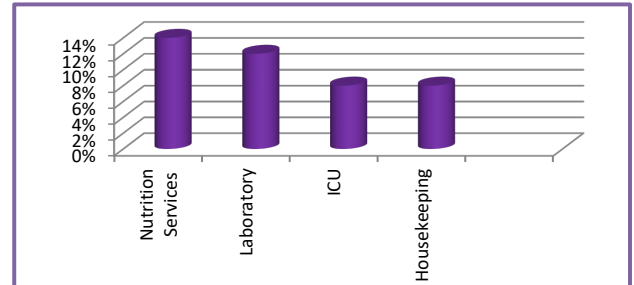
### Top Position(s) / Turnover

	2021	%
Registered Nurse	13	11%
Dietary Aide	5	42%
EVS Tech	4	20%



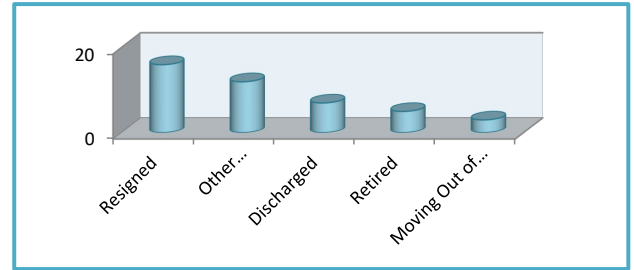
### Top Department(s) / Turnover

	2021	%
Nutrition Services	7	14%
Laboratory	6	12%
ICU	4	8%
Housekeeping	4	8%



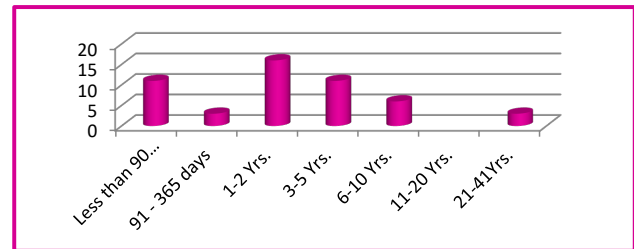
### Top Reasons / Turnover

	2021	%
Resigned	16	32%
Other Employment	12	24%
Discharged	7	14%
Retired	5	10%
Moving Out of Area/Relocation	3	6%



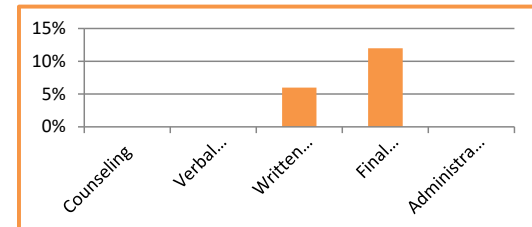
### Length of Service

	2021	%
Less than 90 days	11	22%
91 - 365 days	3	6%
1-2 Yrs.	16	32%
3-5 Yrs.	11	22%
6-10 Yrs.	6	12%
11-20 Yrs.	0	0%
21-41 Yrs.	3	6%
<b>Total</b>	<b>50</b>	



### Corrective Action

		% Discharged
Counseling		
Verbal Warning		
Written Warning	8%	0%
Final Written Warning	10%	100%
Administrative Leave		

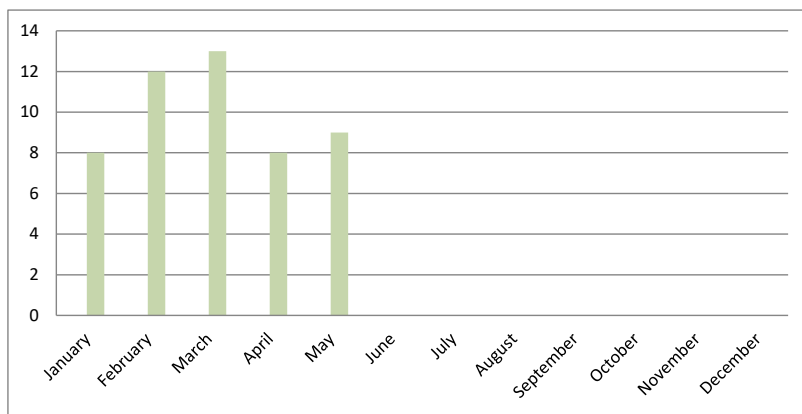


8

Total Employees

## 2021 Separations - Hospital Wide

	Separations	New Employees	556
January	8	10	558
February	12	2	548
March	13	10	545
April	8	15	552
May	9	7	550
June			
July			
August			
September			
October			
November			
December			
Total	50	19	



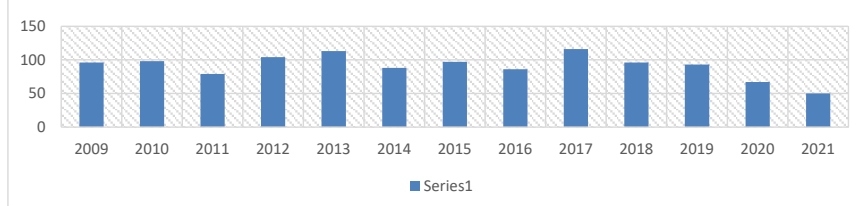
	Separations
Involuntary	6
Voluntary	44
Total	50

	Classifications
RN	13
Classified	37
Total	50

## 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	67
2021	50

## Overall Turnover 2021



## Rolling 12

	Separations	%
Jan 2020 - Jan 2021	93	17%
Feb 2020 - Feb 2021	100	18%
April 2020 - April 2021	99	18%
May 2020 - May 2021	105	19%

Requisition Number	Job Title	Schedule	Shift	Department
Clinical				
2723	Med. Imaging Aide	Regular Part Time	Variable	MEDICAL IMAGING
2677	Med. LabTech	Regular Full Time	Variable	LABORATORY
2649	Med. Tech	Regular Full Time	Variable	LABORATORY
2689	Med. Tech	Regular Full Time	Variable	LABORATORY
2804	Medical Assistant	Regular Part Time	Variable	CLINIC
2808	O. R. Scrub Tech	Regular Full Time	Days	SURGICAL SERVICES
2807	O.R. Aide I	Regular Full Time	Days	SURGICAL SERVICES
2743	Reg. Resp. Therapist	Regular Part Time	Variable	RESPIRATORY THERAPY
2359	Reg. Resp. Therapist	Regular Full Time	Variable	CARDIOPULMONARY
2744	SLP Lab T-Gist/Rpsgt	Regular Full Time	Nights	SLEEP LAB
2680	Ultrasound Tech.	Regular Full Time	Variable	ULTRASOUND
2800	Rad. Tech. II (ARRT)	Regular Full Time	Variable	MEDICAL IMAGING
Non-Clinical				
2797	Cook	Regular Full Time	Rotating	NUTRITION SERVICES
2733	Director Information Svcs	Regular Full Time	Days	INFORMATION TECHNOLOGY
2765	EVS Technician	Regular Part Time	Variable	HOUSEKEEPING
2759	Patient Access Specialist I	Regular Full Time	Variable	Admitting
2751	Patient Access Specialist I	PRN	Variable	Admitting
2781	Patient Access Specialist I	Regular Full Time	Variable	Admitting
Nursing				

#### 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:6/21

2806	Care Transition Nurse/Case Manager	Regular Full Time	Days	CARE MANAGEMENT
2802	Quality Analyst RN	Regular Full Time	Days	QUALITY
2803	Quality Analyst RN	Regular Full Time	Days	QUALITY
2809	Registered Nurse	Regular Full Time	Days	SURGICAL SERVICES
2795	Registered Nurse	Regular Full Time	Days	SAME DAY
2775	Registered Nurse	Regular Full Time	Days	SURGICAL SERVICES
2788	Registered Nurse	Regular Full Time	Nights	ICU
2710	Registered Nurse	Regular Full Time	Variable	ICU
2780	Registered Nurse	Regular Full Time	Variable	ICU
2773	Registered Nurse - Chemo	Regular Full Time	Days	MEDICAL ONCOLOGY
2762	Registered Nurse - Swabbing Station	Regular Full Time	Days	LABORATORY

#### 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:6/21

## **F&A COMMITTEE CHAIR REPORT TO THE BOARD JUNE 2021**

### **Chair – Ed Tardoni**

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

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

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

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

The committee, by unanimous vote sends \$524,757.59 in expenditures to the Board for consideration.

#### **FY 22-3 \$80,510.88 (budgeted)**

This item was requested by Crystal Hamblin and covers four ECG machines with carts. It consists of \$68,259 dollars for the machines and \$12,251.88 for a related three-year maintenance agreement.

Note - The committee sends this item to the Board for consideration with the provision that two specifics, related to the service agreement, be clarified by the Board meeting

#### **FY 22-4 \$287,897 (County Maintenance Fund)**

This item was requested by Jim Horan. It covers replacement of a leaking cement asbestos fire water supply line with new PVC piping. This is an extensive project with considerable delays related to permitting requirements.

Note - The committee sends this item to the Board for consideration with the provision that a reference to contract renewal be removed from the quote documents prior to the Board meeting.

#### **FY 22-5 \$156,346.71 (budgeted)**

This item was requested by Kim White and covers the replacement of seventeen Emergency Room gurneys.

### **OTHER BUSINESS**

The CEO, Irene, briefed the committee on preliminary investigations of potential bond refinancing.

### **NEXT MEETING.**

The Finance and Audit Committee will not meet in July. This is the traditional pause to allow hospital staff time to close FY 21. The next Committee meeting will occur in August.

## Capital Request Summary

Capital Request #

FY22-3

Name of Capital Request:

ECG MACHINES WITH CARTS (4)

Requestor/Department:

Crystal Hamblin/Cardiopulmonary

Sole Source Purchase: Yes or No

Reason:



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.	Cerner/Welch Allyn	Kansas City, MO	\$68,259.00 capital \$12,251.88 support \$80,510.88 total
2.	GE Healthcare	New York, NY	\$72,3052.88 capital
3.			

Recommendation:

Cerner/Welch Allyn - \$80,510.88



<b># Assigned: FY 22 - 3</b>	
<b>Capital Request</b>	
<b>Instructions:</b> YOU MUST USE THE TAB KEY to navigate around this form to maintain the form's integrity. <b>Note:</b> When appropriate, attach additional information such as justification, underlying assumptions, multi-year projections and anything else that will help support this expenditure. Print out form and attach quotes and supporting documentation.	
<b>Department:</b> Cardiology/Clinic	<b>Submitted by:</b> Crystal Hamblin/Leslie Taylor
<b>Date:</b> 06/23/2021	
<b>Provide a detailed description of the capital expenditure requested:</b>	
This request is for Electrocardiogram (ECG) machines with carts, three (3) for Hospital cardiopulmonary and one (1) for the Family Practice Clinic.	
<b>Preferred Vendor:</b> Cerner/Welch Allyn	
<b>Total estimated cost of project</b> (Check all required components and list related expense)	
1. Renovation 2. Equipment 3. Installation 4. Shipping 5. Accessories 6. Training 7. Travel costs 8. Other e.g. interfaces	\$ 65,859.00 \$ 2,400.00  \$ 12,251.88 (3yr support per machine) <b>Total Costs (add 1-8)</b> \$ 80,510.88
<b>Does the requested item:</b>	
Require annual contract renewal? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Fit into existing space? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Explain:
Attach to a new service? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Explain:
Require physical plan modifications? If yes, list to the right: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Electrical HVAC Safety Plumbing Infrastructure (I/S cabling, software, etc.)
<b>Annualized impact on operations (if applicable):</b>	
<b>Increases/Decreases</b>	
<b>Projected Annual Procedures (NEW not existing)</b>	
Revenue per procedure	\$
Projected gross revenue	\$
Projected net revenue	\$
Projected Additional FTE's	
Salaries	\$
Benefits	\$
Maintenance	\$
Supplies	\$
<b>Total Annual Expenses</b>	\$
<b>Net Income/(loss) from new service</b>	\$
<b>Budgeted Item:</b> <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
# of bids obtained? 2	
<input checked="" type="checkbox"/> Copies and/or Summary attached. If no other bids obtained, reason:	
<b>Review and Approvals</b>	
Submitted by: Crystal Hamblin	Verified enough Capital to purchase
Department Leader	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Vice President of Operations	<input type="checkbox"/> YES <input type="checkbox"/> NO
Chief Financial Officer	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Chief Executive Officer	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Board of Trustees Representative	<input type="checkbox"/> YES <input type="checkbox"/> NO

*Crystal Hamblin* 6-24-2021  
*Crystal Hamblin* 6-23-21  
*Crystal Hamblin* 6-25-21



## OTHER CONSIDERATIONS

Uniformity among diagnostic cardiology equipment will provide a secure connection to automate workflows. The Welch Allyn ELI 380 ECG machine can simplify the ECG workflow by decreasing the time needed to perform an exam improving data accuracy and delivering secure EMR connectivity.

Simple- streamlined barcode workflow eliminates data entry steps, and the Wireless Acquisition Module (WAM) provides untethered ECG capture to make exams easier and more comfortable for patients.

Secure- Promotes safeguarding of patient health information (PHI) and the network with data encryption.

Connected- Securely send patient information to the data management system through standards-based protocols like PDF, XML, HL7, or Dicom.

Upgrading to these ECG devices is a strong recommendation from Cerner. These devices have been validated with Cerner to optimize technology and improve patient and employee satisfaction. Competing bid received from GE Healthcare.

Capital - \$68,259.00  
Support - \$12,251.88  
Total - \$80,510.88

Submitted by: Signature

Date



## CERNER SALES ORDER

This Cerner Sales Order is made on June 23, 2021 ("Effective Date"), between

**Memorial Hospital of Sweetwater County ("Client")** and **Cerner Corporation ("Cerner")**

with its principal place of business at

1200 College Blvd  
Rock Springs, WY 82901, United States  
Telephone: (307) 362-3711

a Delaware corporation with its principal place of business at

2800 Rock Creek Parkway  
North Kansas City, MO 64117, United States  
Telephone: (816) 221-1024

Cerner Sales Contact: **Jake Westhoff**  
+1 816 571 6378  
jake.westhoff@cerner.com

Client agrees to purchase the specific products and services set forth herein, and Cerner agrees to furnish such products and services upon the terms and conditions of this Cerner Sales Order and the Cerner Business Agreement, dated September 04, 2020, between Client and Cerner (the "Agreement").

### MEMORIAL HOSPITAL OF SWEETWATER COUNTY

Authorized signatory: \_\_\_\_\_

(signature)

(printed name)

Title: \_\_\_\_\_

### CERNER CORPORATION

Authorized signatory: \_\_\_\_\_

**Teresa Waller**

Title: **Sr. Director, Contract Management**

### CLIENT WILL COMPLETE THE FOLLOWING UPON EXECUTION OF THIS CERNER SALES ORDER:

Client Invoice Contact: \_\_\_\_\_

Contact Phone #: \_\_\_\_\_

Contact Email Address: \_\_\_\_\_

Client's account can be managed online at [cerner.com](http://cerner.com) by registering for Cerner eBill. To gain access to eBill, contact the Cerner Client Care Center at 866-221-8877 or e-mail [ClientCareCenter@cerner.com](mailto:ClientCareCenter@cerner.com).



Memorial Hospital of Sweetwater County  
OPT-0271450\_Q-78171.1\_LA-0000050190  
June 23, 2021

#### Cerner Confidential Information

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**Cerner****CERNER SALES ORDER****FINANCIAL OVERVIEW**

Description	One-Time Fees	Monthly Fees
<b>EQUIPMENT</b>		
Equipment and Installation (if applicable)	65,859.00	--
Equipment Maintenance -- Year 1 Total	12,251.88	--
<b>SUBLICENSED SOFTWARE</b>		
Sublicensed Software and Installation (if applicable)	2,400.00	--
<b>TOTALS:</b>	<b>80,510.88</b>	<b>0.00</b>

All prices in this Cerner Sales Order are shown in USD. Pricing is valid until September 21, 2021. If this Cerner Sales Order is not executed on or before such date, this pricing is considered null and void and will be subject to revision.

Not applicable is indicated by "--".

**PAYMENT TERMS**

<b>ONE-TIME FEES</b>			
Description	Payment Number	Percent (%) Of Total Due	Payment Due
Equipment and Installation (if applicable)	1	100%	Upon Shipment
Sublicensed Software and Installation (if applicable)	1	100%	Upon Shipment

<b>MONTHLY RECURRING FEES</b>		
Description	Percent (%) Of Total Due	Payment Due
Equipment Maintenance	100%	Annually beginning upon shipment

**TERM AND TERMINATION**

**Equipment and Sublicensed Software Maintenance.** Maintenance warranties, if any, begin on the earlier of installation, or 30 days after shipment of the equipment and/or sublicensed software. Maintenance services will continue for the initial term set forth in the "Equipment/Sublicensed Software" section of this Cerner Sales Order. The initial term will automatically renew for additional periods of the same duration, unless Client provides Cerner with written notification of its intent to terminate Maintenance no less than 60 days prior to the expiration of the then-current period. Cerner may terminate Maintenance services if Client fails to pay invoices for Maintenance. All unpaid charges for Maintenance will be immediately due and payable upon such termination. Client will pay all applicable penalties or fees if Maintenance services are terminated, then later reinstated.

**EQUIPMENT/SUBLICENSED SOFTWARE**

**Technology Changes.** At the time of the actual order, Cerner may substitute individual technology solutions and/or Maintenance services based on availability or technological advancements. Cerner and Client may also agree to replace certain technology solutions with other Cerner offerings. If the substitute items or Maintenance services result in an increase in fees, Cerner and Client will discuss and agree upon the fee increase prior to ordering such items or Maintenance services.

**Shipping and Handling.** Client will pay standard shipping and handling fees, not to exceed \$1,126 USD. Additional fees may apply if Client requests expedited shipping. Notwithstanding any other agreement between the parties regarding shipping terms, the items set forth in this Cerner Sales Order will be shipped FOB the manufacturer's plant.

**Cerner**

Memorial Hospital of Sweetwater County  
OPT-0271450\_Q-76171.1\_LA-0000050190  
June 23, 2021

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**Cerner****CERNER SALES ORDER****EQUIPMENT AND INSTALLATION (if applicable)**

Quote: Q-78171.1						
Line No.	Manufacturer Part No.	Solution Detail Description	Qty.	Per Unit One-Time Fees	Extended One-Time Fees	Pass-Through Code
1	ELI380-DCS11	English Keyboard with ERGO display (WLAN, LAN, USB, etc)	4	14,600.00	58,400.00	--
2	9100-026-52	Smart Paper, ZFOLD, with Header for ELI380, 12 packs per cas	4	178.50	714.00	--
3	41000-031-50	WAM Accessory Kit with AHA Banana Leads	4	290.25	1,161.00	--
4	8356-008-53	Battery Cap Assembly, Gray, WAM	4	21.00	84.00	--
5	9911-024-60	RESTING ECG BASE CART w/ DRAWER	4	0.00	0.00	--
7	INS-PS-CARDIO	INSTALLATION AND CONFIGURATION SERVICES	1	2,500.00	2,500.00	--
9	99030-916HS	ELI SCANNER KIT,HS-1,GEN 6,4TH ED,HLSTR	4	750.00	3,000.00	--
TOTAL:					65,859.00	--

**EQUIPMENT MAINTENANCE**

Quote: Q-78171.1											
Line No.	Manufacturer Part No.	Solution Detail Description	Level of Service	Qty	Term (Mo.)	One-Time Fees Due - Year 1	One-Time Fees Due - Year 2	One-Time Fees Due - Year 3	One-Time Fees Due - Year 4	One-Time Fees Due - Year 5	One-Time Fees Due - Year 6 through End of Term
6	S9-ELI380-PROPL-PS	ELI380 SmartCare Protection Plus 3YR POS	24x7 M-Su Phone Support	4	36	12,251.88	--	--	--	--	--
TOTAL:						12,251.88	--	--	--	--	--

**SUBLICENSED SOFTWARE AND INSTALLATION (if applicable)**

Quote: Q-78171.1						
Line No.	Manufacturer Part No.	Solution Detail Description	Qty.	Per Unit One-Time Fees	Extended One-Time Fees	Pass-Through Code
8	900-0689-00	ADD'L CLINICAL TRAINING-8 HR DAY	1	2,400.00	2,400.00	--
TOTAL:					2,400.00	--



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**Cerner****CERNER SALES ORDER****EQUIPMENT/SUBLICENSSED SOFTWARE DELIVERY**

**Delivery Information.** The following delivery information is required to process the equipment/sublicensed software in this Cerner Sales Order.

Delivery Address	Delivery Contact Information
<hr/> <i>(Name of Facility)</i>	<hr/> <i>(Name -- Printed)</i>
<hr/> <i>(Address Line 1)</i>	<hr/> <i>(E-mail Address)</i>
<hr/> <i>(Address Line 2)</i>	<hr/> <i>(Phone Number)</i>
<hr/> <i>(City, State/Province, Zip/Postal Code, Country)</i>	<hr/> <i>(Fax Number)</i>

**Delivery Requirements.** Please check the applicable box for each question below to help ensure a successful delivery.

Does the facility accommodate a 48-foot trailer?		Yes		No	
Does the facility have a loading dock?		Yes		No	
What are the receiving days and hours of operation? <i>(Please enter days and times available)</i>	Days:		Start Time:		End Time:
Will a lift gate and/or ramp be required?	No		Lift Gate		Ramp
To what floor will the equipment be delivered?	Basement		Ground		Floor:
Does the facility have an elevator, or will a stair crawler be required?	Elevator		Stair Crawler		N/A
Does the facility require floor covering?		Yes		No	

**FACILITIES**

**Permitted Facilities.** For use and access by these facilities:

Name	Address	City	State/ Province	Zip/Postal Code	Country
Memorial Hospital of Sweetwater County	1200 College Blvd	Rock Springs	WY	82901	United States

The parties may add or substitute Permitted Facilities by amending this section.

**PASS-THROUGH PROVISIONS**

Memorial Hospital of Sweetwater County  
OPT-0271450\_Q-78171.1\_LA-0000050190  
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## CERNER SALES ORDER

Where pass-through provisions are applicable to third-party products and services, these provisions are referenced by a pass-through code in the "Solutions", "Equipment/Sublicensed Software", "Professional Services", "Application Management Services", or "Managed Services" sections of this Cerner Sales Order, and that code can be entered at <https://passthroughprovisions.cerner.com> to view the pass-through provisions. These pass-through provisions are incorporated into this Cerner Sales Order by reference, and may also be attached as an exhibit to this Cerner Sales Order.

### QUOTE ASSUMPTIONS

The following are general assumptions regarding the solutions, services, and project set forth in this Cerner Sales Order.

**Hillrom Cardiology Professional Services included in INS-PS-CARDIO:**

- ECG Installation includes Project Management and On-site Installation for up to 4 ECG carts. 1 day of Clinical Inservice Training is included in quote. On-site assembly of ECG carts is not included in INS-PS-CARDIO and may be purchased separately.

**900-0689-00 (Optional)** - 1 clinician for 8 hours within a 24hour period Monday-Friday. Multiple training days must be consecutive.

**S9-ELI380-PROPL-PS - 3 Year SmartCare Protection Plus Service Program (Optional)**

- On-site Repair Service (loaner/exchange available if cannot be repaired on-site)
- Factory Repair Service
- Software Updates & Upgrades. The X.Y.Z software numbering scheme with updates represented with Z and upgrades with Y.
- Factory Repair Turnaround (5-7 days), excluding transit
- Accessory Protection
- OEM Replacement Parts
- Scheduled Preventive Maintenance/Calibration (on-site)
- Free Expedited Shipping
- Priority Phone Line for Technical Support
- Accidental Damage

\*Must have a minimum of 5 devices at each location to be eligible

### ADDITIONAL TERMS AND PROVISIONS

#### EQUIPMENT AND SUBLICENSED SOFTWARE MAINTENANCE TERMS

**Maintenance Services for Equipment.** Maintenance services for Equipment are: (a) Initial determination of the source of the problem, problem management, critical situation escalation and recovery services; (b) dispatching and coordinating the activities of the third party maintenance supplier; (c) communicating with the third party maintenance supplier throughout the resolution of the issue; (d) field change orders; and (e) inclusion of Equipment issues in a tracking database. Maintenance services for Equipment do not include consumables.

**Maintenance Services for Sublicensed Software.** Maintenance services for Sublicensed Software are: (a) Initial determination of the source of the problem, problem management, critical situation escalation and recovery services; (b) providing all new versions, modifications, and patches of Sublicensed Software that Cerner is authorized to distribute; (c) communicating with third party maintenance providers throughout the resolution of the issue, (d) inclusion of Sublicensed Software issues in a tracking database.

**Maintenance Renewals.** The initial term for maintenance is set forth in the "Equipment/Sublicensed Software" section of this



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**EQUIPMENT AND SUBLICENSED SOFTWARE MAINTENANCE TERMS**

Cerner Sales Order, and automatically renews for additional periods of the same duration, unless Client provides written notification of termination no less than 60 days prior to the expiration of the then-current period. Client will also notify Cerner of any Equipment items that are no longer being used by Client, and therefore no longer require maintenance. Cerner may terminate maintenance services if Client fails to pay invoices for maintenance.

**Equipment Coverage Levels.**

**24x7 M-Su 4 HR.** Monday through Sunday, 24 hours per day, 365 days per year, on-site coverage. Service effort is continuous until problem is resolved. 24x7 4 HR service does not guarantee that service will be completed same day due to part availability.

**9x5 M-F 4 HR.** Monday through Friday, 8 AM to 5 PM CST, on-site coverage. Service effort is continuous until problem is resolved, excluding country holidays. On-site coverage does not guarantee that service will be completed same day due to part availability.

**9x5 M-F Next Business Day.** Monday through Friday, 8 AM to 5 PM CST with the objective of completion the next business day.

**9x5 M-F Depot.** Monday through Friday, 8 AM to 5 PM CST for service calls. Equipment is shipped to the manufacturer where it is repaired and returned to Client's facility.

**9x5 M-F Advanced Exchange.** Monday through Friday, 8 AM to 5 PM CST for service calls. A replacement will be shipped the next business day and requires return of the replaced equipment within 15 days of receiving the replaced device. Service requests placed after 1 PM CST cannot be guaranteed next business day delivery. If more than one device is being requested for replacement, one will be Advance Exchange and the remaining will be returned on a best effort basis depending upon availability of replacements.

**9x5 Su-Th 4 HR.** Sunday through Thursday, 8 AM to 5 PM GST, on-site coverage. Service effort is continuous until problem is resolved, excluding country holidays. On-site coverage does not guarantee that service will be completed same day due to part availability.

**Sublicensed Software Coverage Levels.** Service effort is continuous until the problem is resolved.

**24x7 M-Su Phone Support.** Monday through Sunday, 24 hours per day, 365 days per year.

**9x5 M-F Phone Support.** Monday through Friday, 8 AM to 5 PM CST, for service calls.

**9x5 Su-Th Phone Support.** Sunday through Thursday, 8 AM to 5 PM GST, for service calls.

**Changes to Maintenance Services.** Changes to maintenance services must be requested in writing by Client, and will take effect within 60 days after receipt of a signed change order.

Technology components can be added to maintenance coverage if they are in good working order. If a component is not in good working order, Cerner can arrange for it to be repaired on a time and materials basis prior to being placed on maintenance. Serial numbers must be provided.

**Inventory.** Client will review all Maintenance renewal letters to ensure accuracy, and to avoid charges for uncovered items. Client will provide Cerner with any missing or incorrect serial numbers as soon as possible to keep records current. Client will notify Cerner when technology components are replaced.

**Upgrades.** Maintenance services do not include hardware/technology updates. Maintenance services include software updates once they become available and have been certified for use by Cerner.

**Pricing and Allowances.** Equipment and/or Sublicensed Software maintenance pricing and allowances granted by Cerner are confidential and are not to be discussed outside the context of this arrangement. Allowances are available for multi-year





**Cerner**

## CERNER SALES ORDER

### EQUIPMENT AND SUBLICENSED SOFTWARE MAINTENANCE TERMS

maintenance and prepaid terms of one year or greater. Prices do not include any applicable taxes.

**Multi-Year Commitments.** Fees associated with the initial term are deemed prepaid and are non-refundable.



Memorial Hospital of Sweetwater County  
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June 23, 2021

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## Capital Request Summary

Capital Request #

Name of Capital Request:

FY22-4

Main waterline replacement

Requestor/Department:

Jim Horan, Gerry Johnston/Facilities

Sole Source Purchase: Yes or No

Reason: Semi-emergent - same contractor and engineer that did exploratory work to find the issue

☐ 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.	High Desert Construction	Reliance, WY	\$287,897.00
2.			
3.			

Recommendation:

High Desert Construction - \$287,897.00



<b># Assigned: FY 22 - 4</b>	
<b>Capital Request</b>	
<b>Instructions:</b> YOU MUST USE THE TAB KEY to navigate around this form to maintain the form's integrity. <b>Note:</b> When appropriate, attach additional information such as justification, underlying assumptions, multi-year projections and anything else that will help support this expenditure. Print out form and attach quotes and supporting documentation.	
<b>Department:</b> Facilities	<b>Submitted by:</b> Jim Horan/Gerry Johnston
<b>Date:</b> 06/23/2021	
<b>Provide a detailed description of the capital expenditure requested:</b> Waterline replacement ER to MOB, approximately 1,080 LF.	
<b>Preferred Vendor:</b> High Desert Construction	
<b>Total estimated cost of project</b> (Check all required components and list related expense)	
1. Renovation	\$ 287,897.00
2. Equipment	\$
3. Installation	\$
4. Shipping	\$
5. Accessories	\$
6. Training	\$
7. Travel costs	\$
8. Other e.g. interfaces	\$
<b>Total Costs (add 1-8)</b> \$ 287,897.00	
<b>Does the requested item:</b>	
Require annual contract renewal? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Fit into existing space? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Explain:
Attach to a new service? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Explain:
Require physical plan modifications? If yes, list to the right: <input type="checkbox"/> YES <input type="checkbox"/> NO	Electrical \$ HVAC \$ Safety \$ Plumbing \$ Infrastructure (I/S cabling, software, etc.) \$
<b>Annualized impact on operations (if applicable):</b>	
<b>Increases/Decreases</b>	<b>Budgeted Item:</b>
Projected Annual Procedures (NEW not existing)	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
Revenue per procedure \$	# of bids obtained? 1 <input checked="" type="checkbox"/> Copies and/or Summary attached. <b>If no other bids obtained, reason:</b> same contractor and engineer that did exploratory work for leak
Projected gross revenue \$	
Projected net revenue \$	
Projected Additional FTE's	
Salaries \$	
Benefits \$	
Maintenance \$	
Supplies \$	
<b>Total Annual Expenses</b> \$	
<b>Net Income/(loss) from new service</b> \$	
<b>Review and Approvals</b>	
Submitted by:	Verified enough Capital to purchase
Department Leader	<input type="checkbox"/> YES <input type="checkbox"/> NO
Executive Leader	<input type="checkbox"/> YES <input type="checkbox"/> NO
Chief Financial Officer	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Chief Executive Officer	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Board of Trustees Representative	<input type="checkbox"/> YES <input type="checkbox"/> NO
6.23.21 6.25.21	



#### OTHER CONSIDERATIONS

We currently have a leak in the dated and fatigued cement/asbestos water pipe next to ED that needs to fixed.

The purpose for doing this is to bypass cement/asbestos pipe in front of our building, abandon in place (to save cost and down time), and run new pipe with proper fittings and new fire hydrant (we will only need one for this project).

Doing this will eliminate the potential of leaks in the future as well as fix the current leak next to ED. There should not be any extra cost on the current estimate .

We need to order material as soon as possible. Material costs are on the up-rise, material is also becoming more scarce.

A DEQ (Department of Environmental Quality) permit will need to be purchased, this will be covered by High Desert. The permit process will take 6-8 weeks. Once in hand work can begin. This work will take 3-4 months.

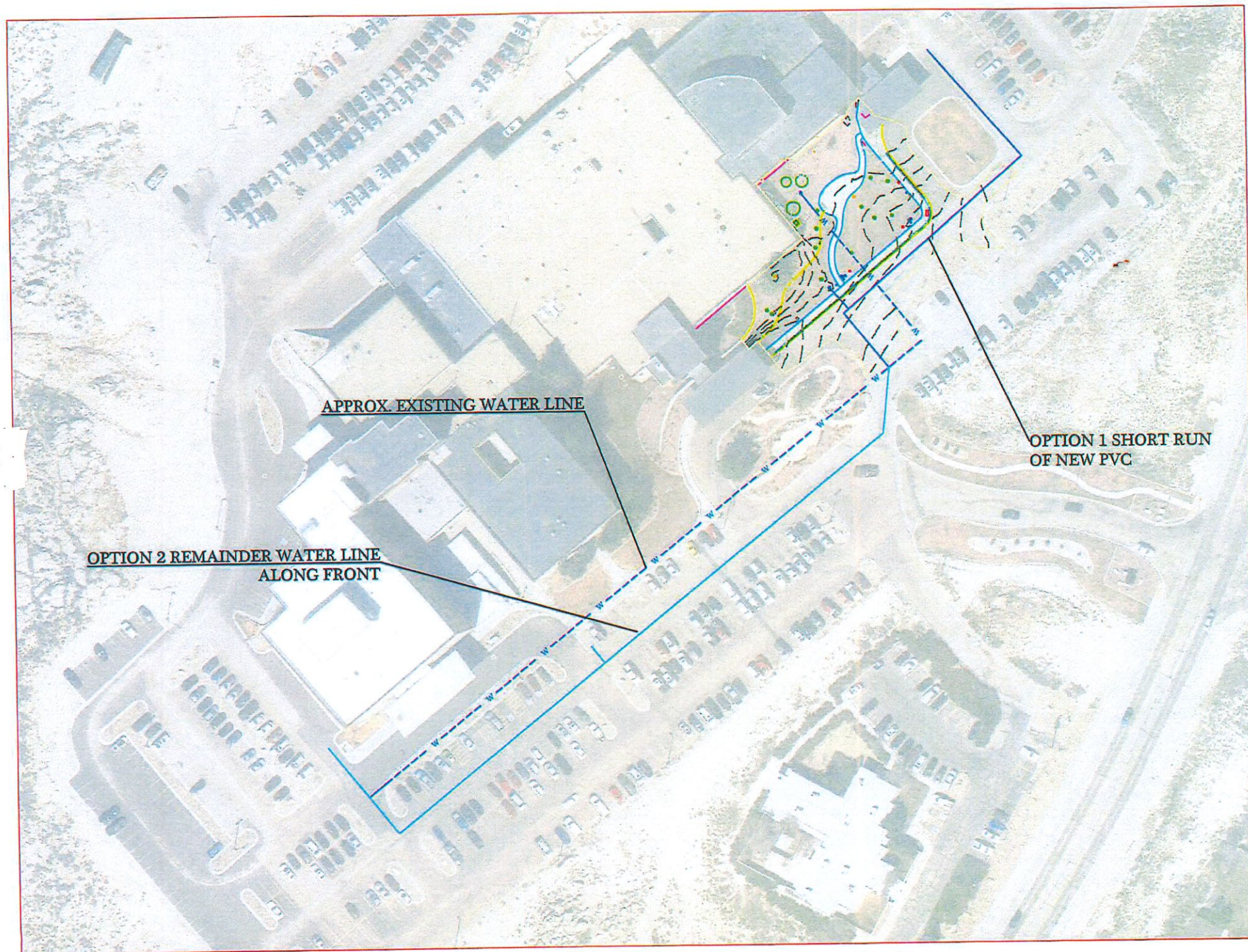
Will submit to County for reimbursement from our County Maintenance fund.

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

\_\_\_\_\_  
Date









## Capital Request Summary

Capital Request #

Name of Capital Request:

FY22-5

ED Gurneys (17)

Requestor/Department:

Kim White/Emergency Department

Sole Source Purchase: Yes or No

Reason: same equipment as current gurneys for consistency

☐ 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.	Stryker Medical	Chicago, IL	\$156,346.71
2.			
3.			

Recommendation:

Stryker Medical - \$156,346.71



		<b># Assigned: FY 22 - 5</b>
<b>Capital Request</b>		
<b>Instructions:</b> YOU MUST USE THE TAB KEY to navigate around this form to maintain the form's integrity. <b>Note:</b> When appropriate, attach additional information such as justification, underlying assumptions, multi-year projections and anything else that will help support this expenditure. Print out form and attach quotes and supporting documentation.		
<b>Department:</b> Emergency Department	<b>Submitted by:</b> Kim White	<b>Date:</b> 6/21/2021
<b>Provide a detailed description of the capital expenditure requested:</b> This capital request is to replace the gurneys in the ED (17).		
<b>Preferred Vendor:</b>		
<b>Total estimated cost of project</b> (Check all required components and list related expense)		
1. Renovation		\$ 156,346.71
2. Equipment		
3. Installation		
4. Shipping		
5. Accessories		
6. Training		
7. Travel costs		
8. Other e.g. interfaces		
<b>Total Costs (add 1-8)</b>		<b>\$ 156,346.71</b>
<b>Does the requested item:</b>		
Require annual contract renewal? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		
Fit into existing space?	Explain:	
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
Attach to a new service?	Explain:	
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		
Require physical plan modifications? If yes, list to the right:	Electrical HVAC Safety Plumbing Infrastructure (I/S cabling, software, etc.)	
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		
<b>Annualized impact on operations (if applicable):</b>		<b>Budgeted Item:</b>
<b>Increases/Decreases</b>		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Projected Annual Procedures (NEW not existing)		
Revenue per procedure	\$	# of bids obtained? <u>1</u>
Projected gross revenue	\$	<input type="checkbox"/> Copies and/or Summary attached. <b>If no other bids obtained, reason:</b> Stryker is the company that we use for our beds and gurneys.
Projected net revenue	\$	
Projected Additional FTE's		
Salaries	\$	
Benefits	\$	
Maintenance	\$	
Supplies	\$	
<b>Total Annual Expenses</b>	\$	
<b>Net Income/(loss) from new service</b>	\$	
<b>Review and Approvals</b>		
Submitted by:	Verified enough Capital to purchase	
Department Leader	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Executive Leader	<input type="checkbox"/> YES <input type="checkbox"/> NO	
Chief Financial Officer	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Chief Executive Officer	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Board of Trustees Representative	<input type="checkbox"/> YES <input type="checkbox"/> NO	



#### OTHER CONSIDERATIONS

This capital request is to replace the gurneys in the ED. The gurneys being used now are old and we are no longer able to purchase parts to fix them when they break. This has become a patient and staff safety issue, as a number of the gurney's steering mechanisms are broken, making it difficult to control the movement of the bed when transporting patients.

Only one quote was obtained because we have been able to purchase two new gurneys in the last year and they were Stryker beds. Consistency in type, style and the manufacturer of the bed make it easier for use and maintenance.

  
Submitted by: Signature

6/21/2021

Date





## Quick Quote 6/17/2021 9:49 PM

Quote Number: 10390860

Remit to:

Stryker Medical

Version: 1

P.O. Box 93308

Chicago, IL 60673-3308

Prepared For: MEMORIAL HOSP OF SWEETWATER COUNTY

Rep:

Jamie Massimilian

Attn:

Email:

jamie.massimilian@stryker.com

Phone Number:

GPO: Intalere (fka Amerinet)

Quote Date: 06/17/2021

Expiration Date: 09/15/2021

### Delivery Address

Name: MEMORIAL HOSP OF SWEETWATER COUNTY

Account #: 1098427

Address: 1200 COLLEGE DR

ROCK SPRINGS

Wyoming 82901-5868

### End User - Shipping - Billing

Name: MEMORIAL HOSP OF SWEETWATER COUNTY

Account #: 1098427

Address: 1200 COLLEGE DR

ROCK SPRINGS

Wyoming 82901-5868

### Bill To Account

Name: MEMORIAL HOSP OF SWEETWATER CO

Account #: 1081597

Address: PO BOX 1359

ROCK SPRINGS

Wyoming 82902-1359

### Equipment Products:

#	Product	Description	Qty	Sell Price	Total
1.0	1115000000X	Prime X Big Wheel Stretcher	13	\$9,974.84	\$129,672.96
1.1	1115016060	700lbs Weight Capacity			
1.2	1115025205	4 Sided Brake/Steer Control			
1.3	1115005610	3 Sided Hydraulic Controls			
1.4	1115226300	3 Sided Hyd Hood/Bellow			
1.5	1070060360	Scale System			
1.6	1115101002	LABEL, SPECIFICATION			
1.7	0036019933	21 CFR			
1.8	1105011160	Dual End Siderail Release			
1.9	1105048060	Head End Pop-Up Push Handles			
1.10	1105045000	NO TRANSFER BOARD			
1.11	1105045035	Integrated Pump Rack			
1.12	1105160951	LABEL,WARNING,FOOT END,RED			
1.13	1115001904	1115-X, DPM LABEL			
1.14	1105035367	2 Stage IV Pole Head Left			
1.15	1105035000	NO FOOT END OPTIONS			
1.16	1105210063	Head End Cover Option			
1.17	1105210362	Foot End Cover Option			



## Quick Quote 6/17/2021 9:49 PM

Quote Number: 10390860

Remit to: Stryker Medical

Version: 1

Prepared For: MEMORIAL HOSP OF SWEETWATER COUNTY

Attn:

P.O. Box 93308

Chicago, IL 60673-3308

Rep: Jamie Massimilian

Email: jamie.massimilian@stryker.com

Phone Number:

GPO: Intalere (fka Amerinet)

Quote Date: 06/17/2021

Expiration Date: 09/15/2021

#	Product	Description	Qty	Sell Price	Total
1.18	1703034300	ULTRA COMFRT, SE 3 x 30 DOMEST			
1.19	9000900910	UNBOXED			
1.20	7777770201	Contract 2 Year, Parts, Labor, Travel			
1.21	1105023004	EMERGENCY, SET			
1.22	1115600000	DOMESTIC MANUAL OPTION 1115			
2.0	1061000000	Gynnie Stretcher	4	\$6,668.44	\$26,673.74
2.1	1061026000	500lbs Weight Capacity			
2.2	1061131100	Pneumatic Fibresin Fowler			
2.3	1231008000	Powerwashable			
2.4	1010260010	5th Wheel Steering			
2.5	1711151000	Pop-Up Push Handles			
2.6	1061120000	Drainage Basin Hoop			
2.7	1061001901	1061 DPM LABEL			
2.8	1061001007	GYNNIE SPEC LABEL			
2.9	0036019933	21 CFR			
2.10	1061110000	2 Stage IV PoleHead Left			
2.11	1010900215	Emergency Label			
2.12	1061426200	4" x 26" Ultra Comfort HeatSealed Mattress			
2.13	9000900900	Unboxed Packaging			
2.14	7777770100	1 Year Parts/Labor/Travel			
Equipment Total:					\$156,346.71

### Price Totals:

Grand Total: \$156,346.71

Comments:





## Quick Quote 6/17/2021 9:49 PM

Quote Number: 10390860

Remit to:

**Stryker Medical**

P.O. Box 93308

Chicago, IL 60673-3308

Version: 1

Prepared For: MEMORIAL HOSP OF SWEETWATER COUNTY

Rep:

Jamie Massimilian

Attn:

Email:

jamie.massimilian@stryker.com

Phone Number:

GPO: Intalere (fka Amerinet)

Quote Date: 06/17/2021

Expiration Date: 09/15/2021

Prices: In effect for 60 days.

Terms: Net 30 Days

Contact your local Sales Representative for more information about our flexible payment options.

---

AUTHORIZED CUSTOMER SIGNATURE

**Capital Terms and Conditions:**

Deal Consummation: This is a quote and not a commitment. This quote is subject to final credit, pricing, and documentation approval. Legal documentation must be signed before your equipment can be delivered. Documentation will be provided upon completion of our review process and your selection of a payment schedule. Confidentiality Notice: Recipient will not disclose to any third party the terms of this quote or any other information, including any pricing or discounts, offered to be provided by Stryker to Recipient in connection with this quote, without Stryker's prior written approval, except as may be requested by law or by lawful order of any applicable government agency. A copy of Stryker Medical's Acute Care capital terms and conditions can be found at [https://techweb.stryker.com/Terms\\_Conditions/index.html](https://techweb.stryker.com/Terms_Conditions/index.html). A copy of Stryker Medical's Emergency Care capital terms and conditions can be found at <https://www.strykeremergencycare.com/terms>.

## Capital equipment in response to COVID – non grant

FY21-85	Waiting Room/Lobby Furniture – hospital grade	\$153,586.93
---------	-----------------------------------------------	--------------

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

OTHER CONSIDERATIONS

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

\_\_\_\_\_  
Date



8602 W BUCKEYE RD  
TOLLESON  
AZ 85353  
623-432-3249

# INVOICE

**SOLD TO:**

Angel Bennett  
Sweetwater Memorial Hospital  
1200 College Dr.

Phone:

Rock Springs WY 82901

**SHIP TO:**

Angel Bennett  
Sweetwater Memorial Hospital  
1200 College Dr.

Rock Springs WY 82901

FQO / QUOTE #	DATE	CUSTOMER PO NO	CUSTOMER NO	SALESPERSON
BI-168170	6/30/2021	CAP021095	Angel Bennett	ALMA HUIZAR

**Project:**

Line #	Qty	Part Number	Part Description	List \$	Ext List \$	Sell \$	Ext Sell \$
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**Area A**

1	1	D142RWAS	42" Table Top Round	\$874.00	\$874.00	\$421.20	\$421.20
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Discount from List: 51.81

Tag For: Area A

2	4	CTED11	Caterina Dining – Slat Back	\$1,217.00	\$4,868.00	\$586.51	\$2,346.04
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Discount from List: 51.81

Tag For: Area A

Finish Silver Ash

Finish Silver Ash  
Fabric Grade 13  
Fabric Galveston/Mayer/Stucco (All)



FQO / QUOTE #	DATE	CUSTOMER PO NO	CUSTOMER NO	SALESPERSON
BI-168170	6/30/2021	CAP021095	Angel Bennett	ALMA HUIZAR

Line #	Qty	Part Number	Part Description	List \$	Ext List \$	Sell \$	Ext Sell \$
3	1	LUM113	Lumio Table Base Medium	\$678.00	\$678.00	\$326.75	\$326.75

Discount from List: 51.81

Tag For: Area A

Finish Silver Ash

4	3	VLDFIXG11	Valinda Short Back – Fixed	\$1,489.99	\$4,469.97	\$718.07	\$2,154.21
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Discount from List: 51.81

Tag For: Area A

Finish Silver Ash  
Fabric Grade 13  
Fabric Galveston/Mayer/Agave (All)

5	1	VLDFIXB46G	Valinda Bariatric Short Back – 46W	\$3,979.83	\$3,979.83	\$1,917.99	\$1,917.99
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Discount from List: 51.81

Tag For: Area A

Finish Silver Ash  
Fabric Grade 13  
Fabric Silica Reach / MOMENTUM/Canvas (Back)  
Fabric Galveston / MAYER/ Agave (Seat)

6	6	VLDFIXG11	Valinda Short Back – Fixed	\$1,706.31	\$10,237.86	\$822.31	\$4,933.86
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Discount from List: 51.81

Tag For: Area A

Finish Silver Ash  
Fabric Grade 13  
Fabric Silica Reach / MOMENTUM/Canvas (Back)  
Fabric Galveston / MAYER/Lilac (Seat)

Tag Subtotal : List: \$25,107.66 Sell: \$12,100.05

## Area B

FQO / QUOTE #	DATE	CUSTOMER PO NO	CUSTOMER NO	SALESPERSON
BI-168170	6/30/2021	CAP021095	Angel Bennett	ALMA HUIZAR

Line #	Qty	Part Number	Part Description	List \$	Ext List \$	Sell \$	Ext Sell \$
7	3	VLDFIXG11	Valinda Short Back – Fixed	\$1,489.99	\$4,469.97	\$718.07	\$2,154.21

Discount from List: 51.81

Tag For: Area B

Finish Silver Ash  
Fabric Grade 13  
Fabric Galveston / MAYER/Ground (All)

8	1	VLDFIXB46G	Valinda Bariatric Short Back – 46W	\$3,979.83	\$3,979.83	\$1,917.99	\$1,917.99
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Discount from List: 51.81

Tag For: Area B

Finish Silver Ash  
Fabric Grade 13  
Fabric Galveston / MAYER/Ground (Seat)  
Fabric Silica Reach / MOMENTUM/ Tahini (Back)

9	2	CTE1BLA11	Caterina End Table,Round Top	\$1,153.00	\$2,306.00	\$555.66	\$1,111.32
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Discount from List: 51.81

Tag For: Area B

Finish Silver Ash

10	4	VLDFIXG11	Valinda Short Back – Fixed	\$1,706.31	\$6,825.24	\$822.31	\$3,289.24
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Discount from List: 51.81

Tag For: Area B

Finish Silver Ash  
Fabric Grade 13  
Fabric Galveston / MAYER/ Sunset (Seat)  
Fabric Silica Reach / MOMENTUM/ Tahini (Back)

Tag Subtotal : List: \$17,581.04 Sell: \$8,472.76

## Area C

Prepared By: Brandee Sheldrake

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2021-04-27 Memorial Hospital of Sweetwater BI-168170 Spec.sp4

6/30/2021 8:52:40AM

FQO / QUOTE #		DATE	CUSTOMER PO NO	CUSTOMER NO	SALESPERSON		
BI-168170		6/30/2021	CAP021095	Angel Bennett	ALMA HUIZAR		

Line #	Qty	Part Number	Part Description	List \$	Ext List \$	Sell \$	Ext Sell \$
11	2	DELF1	Delfini Lounge Chair	\$1,994.00	\$3,988.00	\$960.96	\$1,921.92

Discount from List: 51.81

Tag For: Area C

Finish Silver Ash  
Fabric Grade 13  
Fabric Galveston / MAYER/Ground (All)

12	2	VLDFIXB46G	Valinda Bariatric Short Back – 46W	\$3,979.83	\$7,959.66	\$1,917.99	\$3,835.98
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Discount from List: 51.81

Tag For: Area C

Finish Silver Ash  
Fabric Grade 13  
Fabric Galveston / MAYER/ Sunset (Seat)  
Fabric Silica Reach / MOMENTUM/ Tahini (Back)

13	4	DELF1	Delfini Lounge Chair	\$2,286.70	\$9,146.80	\$1,102.02	\$4,408.08
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Discount from List: 51.81

Tag For: Area C

Finish Silver Ash  
Fabric Grade 13  
Fabric Galveston / MAYER/Ground (Seat)  
Fabric Silica Reach / MOMENTUM/ Tahini (Inside Back/Outside Back)

Tag Subtotal : List: \$21,094.46 Sell: \$10,165.98

## Area D

14	2	VDNTBLA	Valdina Corner Linking Table, with Leg Support	\$866.00	\$1,732.00	\$417.35	\$834.70
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Discount from List: 51.81

Tag For: Area D

Finish Silver Ash

FQO / QUOTE #		DATE		CUSTOMER PO NO		CUSTOMER NO		SALESPERSON	
BI-168170		6/30/2021		CAP021095		Angel Bennett		ALMA HUIZAR	
Line #	Qty	Part Number	Part Description			List \$	Ext List \$	Sell \$	Ext Sell \$
15	1	VDNTBLB	Valdina Center Linking Table – 24"W			\$606.00	\$606.00	\$292.05	\$292.05
							Discount from List:	51.81	
			Tag For:	Area D					
				Finish	Silver Ash				
16	4	CTED11	Caterina Dining – Slat Back			\$1,217.00	\$4,868.00	\$586.51	\$2,346.04
							Discount from List:	51.81	
			Tag For:	Area D					
				Finish	Silver Ash				
				Fabric	Grade 13				
				Fabric	Galveston / MAYER/ Sunset (All)				
17	4	VLDFIXG11	Valinda Short Back – Fixed			\$1,489.99	\$5,959.96	\$718.07	\$2,872.28
							Discount from List:	51.81	
			Tag For:	Area D					
				Finish	Silver Ash				
				Fabric	Grade 13				
				Fabric	Galveston / MAYER/ Ground (All)				
18	6	VLDFIXG11	Valinda Short Back – Fixed			\$1,706.31	\$10,237.86	\$822.31	\$4,933.86
							Discount from List:	51.81	
			Tag For:	Area D					
				Finish	Silver Ash				
				Fabric	Grade 13				
				Fabric	Galveston / MAYER/ Sunset (Seat)				
				Fabric	Silica Reach / MOMENTUM/ Tahini (Back)				

FQO / QUOTE #	DATE	CUSTOMER PO NO	CUSTOMER NO	SALESPERSON
BI-168170	6/30/2021	CAP021095	Angel Bennett	ALMA HUIZAR

Line #	Qty	Part Number	Part Description	List \$	Ext List \$	Sell \$	Ext Sell \$
19	4	VLDFIXG11	Valinda Short Back – Fixed	\$1,489.99	\$5,959.96	\$718.07	\$2,872.28

Discount from List: 51.81

Tag For: Area D

Finish Silver Ash  
Fabric Grade 13  
Fabric Galveston / MAYER/ Sunset (All)

20	2	VLDFIXB46G	Valinda Bariatric Short Back – 46W	\$3,979.83	\$7,959.66	\$1,917.99	\$3,835.98
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Discount from List: 51.81

Tag For: Area D

Finish Silver Ash  
Fabric Grade 13  
Fabric Galveston / MAYER/ Ground (Seat)  
Fabric Silica Reach / MOMENTUM/ Tahini (Back)

Tag Subtotal : List: \$37,323.44 Sell: \$17,987.19

## Area E

21	3	SCIASTLB111	Sciara Bar Stool	\$1,586.00	\$4,758.00	\$764.34	\$2,293.02
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Discount from List: 51.81

Tag For: Area E

Finish Silver Ash  
Fabric Grade 13  
Fabric Galveston / MAYER/ Stucco (All)

22	3	SCIASTLB111		\$1,586.00	\$4,758.00	\$764.34	\$2,293.02
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Discount from List: 51.81

Tag For: Area E

Finish Silver Ash  
Fabric Grade 13

FQO / QUOTE #		DATE	CUSTOMER PO NO	CUSTOMER NO	SALESPERSON		
BI-168170		6/30/2021	CAP021095	Angel Bennett	ALMA HUIZAR		
Line #	Qty	Part Number	Part Description	List \$	Ext List \$	Sell \$	Ext Sell \$
				Fabric	Galveston / MAYER/ Agave (All)		
				<b>Tag Subtotal :</b>	List:	\$9,516.00	<b>Sell: \$4,586.04</b>

## Area F

23	3	VLDFIXG11	Valinda Short Back – Fixed			\$1,706.31	\$5,118.93	\$822.31	\$2,466.93
						Discount from List: 51.81			
				<u>Tag For:</u> <u>Area F</u>					
				Finish Fabric Fabric Fabric	Silver Ash Grade 13 Silica Reach / MOMENTUM/ Mint (Back) Galveston / MAYER/ Peat (Seat)				
24	2	D142RWAS	42" Table Top Round			\$874.00	\$1,748.00	\$421.20	\$842.40
						Discount from List: 51.81			
				<u>Tag For:</u> <u>Area F</u>					
				Finish	Silver Ash				
25	2	LUM113	Lumio Table Base Medium			\$678.00	\$1,356.00	\$326.75	\$653.50
						Discount from List: 51.81			
				<u>Tag For:</u> <u>Area F</u>					
				Finish	Silver Ash				
26	4	CTED11	Caterina Dining – Slat Back			\$1,217.00	\$4,868.00	\$586.51	\$2,346.04
						Discount from List: 51.81			
				<u>Tag For:</u> <u>Area F</u>					
				Finish Fabric Fabric	Silver Ash Grade 13 Galveston / MAYER/ Peat (All)				

FQO / QUOTE #		DATE	CUSTOMER PO NO		CUSTOMER NO		SALESPERSON	
BI-168170		6/30/2021	CAP021095		Angel Bennett		ALMA HUIZAR	
Line #	Qty	Part Number	Part Description		List \$	Ext List \$	Sell \$	Ext Sell \$
27	5	VLDFIXG11	Valinda Short Back – Fixed		\$1,489.99	\$7,449.95	\$718.07	\$3,590.35
						Discount from List:	51.81	
			Tag For:	Area F				
				Finish Fabric Fabric	Silver Ash Grade 13 Galveston / MAYER/ Winchester (All)			
28	4	CTED11	Caterina Dining – Slat Back		\$1,217.00	\$4,868.00	\$586.51	\$2,346.04
						Discount from List:	51.81	
			Tag For:	Area F				
				Finish Fabric Fabric	Silver Ash Grade 13 Galveston/Mayer/Winchester (All)			
29	5	VLDFIXG11	Valinda Short Back – Fixed		\$1,489.99	\$7,449.95	\$718.07	\$3,590.35
						Discount from List:	51.81	
			Tag For:	Area F				
				Finish Fabric Fabric	Silver Ash Grade 13 Galveston / MAYER/ Peat (All)			
30	3	VLDFIXG11	Valinda Short Back – Fixed		\$1,706.31	\$5,118.93	\$822.31	\$2,466.93
						Discount from List:	51.81	
			Tag For:	Area F				
				Finish Fabric Fabric Fabric	Silver Ash Grade 13 Silica Reach / MOMENTUM/ Mint (Back) Galveston/Mayer/Winchester (Seat)			

FQO / QUOTE #		DATE		CUSTOMER PO NO		CUSTOMER NO		SALESPERSON	
BI-168170		6/30/2021		CAP021095		Angel Bennett		ALMA HUIZAR	
Line #	Qty	Part Number	Part Description		List \$	Ext List \$	Sell \$	Ext Sell \$	
31	1	VLDFIXB46G	Valinda Bariatric Short Back – 46W		\$3,979.83	\$3,979.83	\$1,917.96	\$1,917.96	
						Discount from List:		51.81	
				Tag For:	Area F				
				Finish	Silver Ash				
				Fabric	Grade 13				
				Fabric	Silica Reach / MOMENTUM/ Mint (Back)				
				Fabric	Galveston/Mayer/Winchester (Seat)				
32	1	VLDFIXB46G	Valinda Bariatric Short Back – 46W		\$3,979.83	\$3,979.83	\$1,917.96	\$1,917.96	
						Discount from List:		51.81	
				Tag For:	Area F				
				Finish	Silver Ash				
				Fabric	Grade 13				
				Fabric	Silica Reach / MOMENTUM/ Mint (Back)				
				Fabric	Galveston / MAYER/ Peat (Seat)				
33	1	HON HSS4L-14A	SmartLink Seating 14" 4L Chair 4/carton		\$666.00	\$666.00	\$333.00	\$333.00	
						Discount from List:		50.00	
				Tag For:	Area F				
				Select Glide	...	Skipped Option			
				Select Shell Color	...	Skipped Option			
				Select Paint Option	\$(P6)	P6 Paint Opts			
				Select Grade 6 Paint	~	Undecided PAINT Option			
34	1	HON HEB4LEG	Build 4 pack adjustable post legs (22"-34")		\$237.00	\$237.00	\$118.50	\$118.50	
						Discount from List:		50.00	
				Tag For:	Area F				
				Select Paint Color	\$(P6)	P6 Paint Opts			
				Select Grade 6 Paint	~	Undecided PAINT Option			



FQO / QUOTE #	DATE	CUSTOMER PO NO	CUSTOMER NO	SALESPERSON
BI-168170	6/30/2021	CAP021095	Angel Bennett	ALMA HUIZAR

Line #	Qty	Part Number	Part Description	List \$	Ext List \$	Sell \$	Ext Sell \$
35	1	HON HERD-42E-4L	Build Round Table 42 inch with adj post legs	\$623.00	\$623.00	\$311.50	\$311.50



Tag For: Area F

Discount from List: 50.00

Select Grommet .N No Grommets  
 Select Grade \$(L5STD) Grd L5 Standard Laminates  
 Grd 5 Laminate Selection .FMQ1 White Markerboard  
 Select T-Mold Edge Color ... Skipped Option  
 Select Paint Color \$(P6) P6 Paint Opts  
 Select Grade 6 Paint ~ Undecided PAINT Option

Tag Subtotal : List: \$47,463.42 Sell: \$22,901.46

## Area G

36	1	D142RWAS	42" Table Top Round	\$874.00	\$874.00	\$421.20	\$421.20
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Discount from List: 51.81

Tag For: Area G

Finish Silver Ash

37	1	LUM113	Lumio Table Base Medium	\$678.00	\$678.00	\$326.75	\$326.75
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Discount from List: 51.81

Tag For: Area G

Finish Silver Ash

38	4	CTED11	Caterina Dining – Slat Back	\$1,217.00	\$4,868.00	\$586.51	\$2,346.04
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Discount from List: 51.81

Tag For: Area G

Finish Silver Ash  
 Fabric Grade 13  
 Fabric Galveston/Mayer/Winchester (All)

FQO / QUOTE #		DATE	CUSTOMER PO NO	CUSTOMER NO	SALESPERSON		
BI-168170		6/30/2021	CAP021095	Angel Bennett	ALMA HUIZAR		
Line #	Qty	Part Number	Part Description	List \$	Ext List \$	Sell \$	Ext Sell \$
39	3	VLDFIXG11	Valinda Short Back – Fixed	\$1,706.31	\$5,118.93	\$822.31	\$2,466.93
				Discount from List: 51.81			
Tag For: Area G							
				Finish Fabric Fabric Fabric	Silver Ash Grade 13 Silica Reach/Momentum/Mint (Back) Galveston/Mayer/Peat (Seat)		
40	2	VLDFIXB46G	Valinda Bariatric Short Back – 46W	\$3,979.83	\$7,959.66	\$1,917.99	\$3,835.98
				Discount from List: 51.81			
Tag For: Area G							
				Finish Fabric Fabric Fabric	Silver Ash Grade 13 Silica Reach/Momentum/Mint (Back) Galveston/Mayer/Peat (Seat)		
41	5	VLDFIXG11	Valinda Short Back – Fixed	\$1,489.99	\$7,449.95	\$718.07	\$3,590.35
				Discount from List: 51.81			
Tag For: Area G							
				Finish Fabric Fabric	Silver Ash Grade 13 Galveston/Mayer/Peat (All)		
42	3	VLDFIXG11	Valinda Short Back – Fixed	\$1,706.31	\$5,118.93	\$822.31	\$2,466.93
				Discount from List: 51.81			
Tag For: Area G							
				Finish Fabric Fabric Fabric	Silver Ash Grade 13 Silica Reach/Momentum/Mint (Back) Galveston/Mayer/Winchester (Seat)		

FQO / QUOTE #	DATE	CUSTOMER PO NO	CUSTOMER NO	SALESPERSON
BI-168170	6/30/2021	CAP021095	Angel Bennett	ALMA HUIZAR

Line #	Qty	Part Number	Part Description	List \$	Ext List \$	Sell \$	Ext Sell \$
43	5	VLDFIXG11	Valinda Short Back – Fixed	\$1,489.99	\$7,449.95	\$718.07	\$3,590.35

Discount from List: 51.81

Tag For: Area G

Finish  
Fabric  
Fabric  
Silver Ash  
Grade 13  
Galveston/Mayer/Winchester (All)

44	2	VLDFIXB46G	Valinda Bariatric Short Back – 46W	\$3,979.83	\$7,959.66	\$1,917.99	\$3,835.98
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Discount from List: 51.81

Tag For: Area G

Finish  
Fabric  
Fabric  
Fabric  
Silver Ash  
Grade 13  
Silica Reach/Momentum/Mint (Back)  
Galveston/Mayer/Winchester (Seat)

45	2	VLDFIXB46G	Valinda Bariatric Short Back – 46W	\$3,979.83	\$7,959.66	\$1,918.00	\$3,836.00
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Discount from List: 51.81

Tag For: Area G

Finish  
Fabric  
Fabric  
Fabric  
Silver Ash  
Grade 13  
Silica Reach/Momentum/Mint (Back)  
Galveston/Mayer/Peat (Seat)

Tag Subtotal : List: \$55,436.74 Sell: \$26,716.51

## Area H

46	2	VLDFIXG11	Valinda Short Back – Fixed	\$1,489.99	\$2,979.98	\$718.07	\$1,436.14
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Discount from List: 51.81

Tag For: Area H

Finish  
Silver Ash

FQO / QUOTE #	DATE	CUSTOMER PO NO	CUSTOMER NO	SALESPERSON
BI-168170	6/30/2021	CAP021095	Angel Bennett	ALMA HUIZAR

Line #	Qty	Part Number	Part Description	List \$	Ext List \$	Sell \$	Ext Sell \$
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Fabric Grade 13  
Fabric Galveston / MAYER/Cactus (All)

47	1	VLDFIXB46G	Valinda Bariatric Short Back – 46W	\$3,979.83	\$3,979.83	\$1,917.99	\$1,917.99
						Discount from List:	51.81

Tag For: Area H

Finish Silver Ash  
Fabric Grade 13  
Fabric Silica Reach / MOMENTUM/ Mint (Back)  
Fabric Galveston / MAYER/Cactus (Seat)

Tag Subtotal : List: \$6,959.81 Sell: \$3,354.13

#### Area J

48	1	VLDFIXG11	Valinda Short Back – Fixed	\$1,489.99	\$1,489.99	\$718.07	\$718.07
						Discount from List:	51.81

Tag For: Area J

Finish Silver Ash  
Fabric Grade 13  
Fabric Galveston / MAYER/ Agave (All)

49	1	VLDFIXB46G	Valinda Bariatric Short Back – 46W	\$3,979.83	\$3,979.83	\$1,917.99	\$1,917.99
						Discount from List:	51.81

Tag For: Area J

Finish Silver Ash  
Fabric Grade 13  
Fabric Silica Reach/Momentum/Canvass (Back)  
Fabric Galveston/Mayer/Agave (Seat)

FQO / QUOTE #	DATE	CUSTOMER PO NO	CUSTOMER NO	SALESPERSON
BI-168170	6/30/2021	CAP021095	Angel Bennett	ALMA HUIZAR

Line #	Qty	Part Number	Part Description	List \$	Ext List \$	Sell \$	Ext Sell \$
50	2	VLDFIXG11	Valinda Short Back – Fixed	\$1,706.31	\$3,412.62	\$822.31	\$1,644.62

Discount from List: 51.81

Tag For: Area J

Finish  
Fabric  
Fabric  
Fabric  
Silver Ash  
Grade 13  
Silica Reach/Momentum/Canvass (Back)  
Galveston/Mayer/Stucco (Seat)

51	1	SLLS40	Salerno Recliner	\$2,911.00	\$2,911.00	\$1,402.89	\$1,402.89
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Discount from List: 51.81

Tag For: Area J

Finish  
Fabric  
Silver Ash  
Galveston/Mayer/Stucco (All)

Tag Subtotal : List: \$11,793.44 Sell: \$5,683.57

## Area K - Meditation Room

52	2	VLDFIXG11	Valinda Short Back – Fixed	\$1,489.99	\$2,979.98	\$718.07	\$1,436.14
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Discount from List: 51.81

Tag For: Area K - Meditation Room

Finish  
Fabric  
Fabric  
Silver Ash  
Grade 13  
Galveston/Mayer/Lilac (All)

53	2	VLDFIXB46G	Valinda Bariatric Short Back – 46W	\$3,979.83	\$7,959.66	\$1,917.99	\$3,835.98
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Discount from List: 51.81

Tag For: Area K - Meditation Room

Finish  
Fabric  
Fabric  
Silver Ash  
Grade 13  
Silica Reach / MOMENTUM/Canvas (Back)

FQO / QUOTE #	DATE	CUSTOMER PO NO	CUSTOMER NO	SALESPERSON
BI-168170	6/30/2021	CAP021095	Angel Bennett	ALMA HUIZAR

Line #	Qty	Part Number	Part Description	List \$	Ext List \$	Sell \$	Ext Sell \$
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Fabric Galveston/Mayer/Lilac (Seat)

54	2	VLDFIXG11	Valinda Short Back – Fixed	\$1,706.31	\$3,412.62	\$822.31	\$1,644.62
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Discount from List: 51.81

Tag For: Area K - Meditation Room

Finish Silver Ash  
Fabric Grade 13  
Fabric Silica Reach / MOMENTUM/Canvas (Back)  
Fabric Galveston/Mayer/Stucco (Seat)

55	1	VDNTBLA	Valdina Corner Linking Table	\$866.00	\$866.00	\$417.35	\$417.35
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Discount from List: 51.81

Tag For: Area K - Meditation Room

Finish Silver Ash

**Tag Subtotal : List: \$15,218.26 Sell: \$7,334.09**

## Area L - Nuclear Medicine

56	1	VLDFIXB46G	Valinda Bariatric Short Back – 46W	\$3,979.83	\$3,979.83	\$1,917.99	\$1,917.99
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Discount from List: 51.81

Tag For: Area L - Nuclear Medicine

Finish Silver Ash  
Fabric Grade 13  
Fabric Silica Reach / MOMENTUM/Canvas (Back)  
Fabric Galveston/Mayer/Stucco (Seat)

**Tag Subtotal : List: \$3,979.83 Sell: \$1,917.99**

## Area M - CT MRI



FQO / QUOTE #	DATE	CUSTOMER PO NO	CUSTOMER NO	SALESPERSON
BI-168170	6/30/2021	CAP021095	Angel Bennett	ALMA HUIZAR

Line #	Qty	Part Number	Part Description	List \$	Ext List \$	Sell \$	Ext Sell \$
57	2	VLDFIXG11	Valinda Short Back – Fixed	\$1,489.99	\$2,979.98	\$718.07	\$1,436.14

Discount from List: 51.81

Tag For: Area M - CT MRI

Finish Silver Ash  
Fabric Grade 13  
Fabric Galveston/Mayer/Agave (All)

58	1	VLDFIXB46G	Valinda Bariatric Short Back – 46W	\$3,979.83	\$3,979.83	\$1,917.99	\$1,917.99
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Discount from List: 51.81

Tag For: Area M - CT MRI

Finish Silver Ash  
Fabric Grade 13  
Fabric Silica Reach / MOMENTUM/Canvas (Back)  
Fabric Galveston/Mayer/Agave (Seat)

Tag Subtotal : List: \$6,959.81 Sell: \$3,354.13

#### Area N - Elevator near Lena Office

59	1	VLDFIXB46G	Valinda Bariatric Short Back – 46W	\$3,979.83	\$3,979.83	\$1,917.99	\$1,917.99
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Discount from List: 51.81

Tag For: Area N - Elevator near Lena Office

Finish Silver Ash  
Fabric Grade 13  
Fabric Galveston/Mayer/Sunset (Seat)  
Fabric Silica Reach/MOMENTUM/Tahini (Back)

Tag Subtotal : List: \$3,979.83 Sell: \$1,917.99

#### Area P - Lab Waiting

FQO / QUOTE #	DATE	CUSTOMER PO NO	CUSTOMER NO	SALESPERSON
BI-168170	6/30/2021	CAP021095	Angel Bennett	ALMA HUIZAR

Line #	Qty	Part Number	Part Description	List \$	Ext List \$	Sell \$	Ext Sell \$
60	1	VLDFIXB46G	Valinda Bariatric Short Back – 46W	\$3,979.83	\$3,979.83	\$1,917.99	\$1,917.99

Discount from List: 51.81

Tag For: Area P - Lab Waiting

Finish Silver Ash  
Fabric Grade 13  
Fabric Galveston / MAYER/ Sunset (Seat)  
Fabric Silica Reach / MOMENTUM/ Tahini (Back)

61	3	VLDFIXG11	Valinda Short Back – Fixed	\$1,489.99	\$4,469.97	\$718.07	\$2,154.21
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Discount from List: 51.81

Tag For: Area P - Lab Waiting

Finish Silver Ash  
Fabric Grade 13  
Fabric Galveston/Mayer/Ground (All)

**Tag Subtotal :** List: \$8,449.80 **Sell:** \$4,072.20

## Basement Elevator

62	2	VLDFIXB46G	Valinda Bariatric Short Back – 46W	\$3,979.83	\$7,959.66	\$1,917.99	\$3,835.98
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Discount from List: 51.81

Tag For: Basement Elevator

Finish Silver Ash  
Fabric Grade 13  
Fabric Silica Reach / MOMENTUM/ Mint (Back)  
Fabric Galveston / MAYER/Cactus (Seat)

**Tag Subtotal :** List: \$7,959.66 **Sell:** \$3,835.98

## Freight

FQO / QUOTE #	DATE	CUSTOMER PO NO	CUSTOMER NO	SALESPERSON
BI-168170	6/30/2021	CAP021095	Angel Bennett	ALMA HUIZAR

Line #	Qty	Part Number	Part Description	List \$	Ext List \$	Sell \$	Ext Sell \$
63	1	Fabric	FREIGHT	\$0.00	\$0.00	\$9,313.11	\$9,313.11
						Discount from List:	0.00

Tag For: Freight

**Tag Subtotal :** List: \$0.00 **Sell: \$9,313.11**

### Services

64	1	SBI	ENHANCED SERVICES	\$0.00	\$0.00	\$4,875.00	\$4,875.00
						Discount from List:	0.00

Tag For: Services

**Tag Subtotal :** List: \$0.00 **Sell: \$4,875.00**

### TBD - DEX

65	1	VLDFIXG11	Valinda Short Back – Fixed	\$1,489.99	\$1,489.99	\$718.07	\$718.07
						Discount from List:	51.81

Tag For: TBD - DEX

Finish Silver Ash  
Fabric Grade 13  
Fabric Galveston/Mayer/Stucco (All)

**Tag Subtotal :** List: \$1,489.99 **Sell: \$718.07**

### TBD - Mano WR

FQO / QUOTE #	DATE	CUSTOMER PO NO	CUSTOMER NO	SALESPERSON
BI-168170	6/30/2021	CAP021095	Angel Bennett	ALMA HUIZAR

Line #	Qty	Part Number	Part Description	List \$	Ext List \$	Sell \$	Ext Sell \$
66	1	VLDFIXG11	Valinda Short Back – Fixed	\$1,489.99	\$1,489.99	\$718.07	\$718.07

Discount from List: 51.81

Tag For: TBD - Mano WR

Finish Silver Ash  
Fabric Grade 13  
Fabric Galveston / MAYER/ Lilac (All)

67	1	VLDFIXB46G	Valinda Bariatric Short Back – 46W	\$3,979.83	\$3,979.83	\$1,917.99	\$1,917.99
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Discount from List: 51.81

Tag For: TBD - Mano WR

Finish Silver Ash  
Fabric Grade 13  
Fabric Silica Reach / MOMENTUM/Canvas (Back)  
Fabric Galveston/Mayer/Lilac (Seat)

Tag Subtotal : List: \$5,469.82 Sell: \$2,636.06

## TBD - Respiratory

68	2	VLDFIXG11	Valinda Short Back – Fixed	\$1,706.31	\$3,412.62	\$822.31	\$1,644.62
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Discount from List: 51.81

Tag For: TBD - Respiratory

Finish Silver Ash  
Fabric Grade 13  
Fabric Silica Reach / MOMENTUM/Canvas  
Fabric Galveston/Mayer/Agave (Seat)

Tag Subtotal : List: \$3,412.62 Sell: \$1,644.62

Grand Total : List: \$289,195.63 Sell: \$153,586.93

## Special Instructions

FQO / QUOTE #		DATE	CUSTOMER PO NO	CUSTOMER NO	SALESPERSON		
BI-168170		6/30/2021	CAP021095	Angel Bennett	ALMA HUIZAR		
<u>Line #</u>	<u>Qty</u>	<u>Part Number</u>	<u>Part Description</u>	<u>List \$</u>	<u>Ext List \$</u>	<u>Sell \$</u>	<u>Ext Sell \$</u>

**Return Policy:** Furniture is sourced specifically for the customer and is non-returnable.  
Damaged or Defective items will be repaired or replaced in keeping with the manufacturer warranties in place at time of order.

This quote is valid for 30 days unless otherwise noted. Applicable Sales Tax will be added at time of invoicing.

----- **Additional Instructions** -----

By signing this quote, the customer authorizes the procurement of the products and services contained herein.  
This sale is subject to the Staples Workplace Studio Terms and Conditions attached.

ACCEPTED BY \_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

PO NUMBER \_\_\_\_\_

<b>Grand Total :</b>	List:	\$289,195.63	Sell:	<b>\$153,586.93</b>
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FQO / QUOTE #		DATE	CUSTOMER PO NO	CUSTOMER NO	SALESPERSON		
BI-168170		6/30/2021	CAP021095	Angel Bennett	ALMA HUIZAR		
<u>Line #</u>	<u>Qty</u>	<u>Part Number</u>	<u>Part Description</u>	<u>List \$</u>	<u>Ext List \$</u>	<u>Sell \$</u>	<u>Ext Sell \$</u>

#### FURNITURE TERMS AND CONDITIONS

These Terms and Conditions ("T&Cs") apply to all furniture products and services sold by Staples Contract & Commercial LLC ("Staples"). Throughout these T&Cs, your organization will be referred to as "Buyer" or as a "Party". These T&Cs, together with the quote with which these T&Cs are provided/incorporated, form a binding agreement between Staples and Buyer.

**1) PRICES OF PRODUCTS AND SERVICES.** Buyer may purchase and Staples shall provide the furniture products ("Products") and related services ("Services") at the prices set forth in Staples' written quote. All written quotes for the Products shall be governed by the terms and conditions of these T&Cs and any Exhibit if attached hereto. The purchase price of the Products does not include freight, handling, installation, insurance, sales or other taxes. Staples' prices are subject to change pursuant to the provisions contained herein and as quoted by Staples to Buyer for each project quoted. Freight, handling and installation charges are invoiced separately. Staples reserves the right to reasonably adjust a Product's price if extraordinary market events require immediate adjustment (e.g., shortages, trade disputes, natural disasters, etc.) and to adjust pricing with the impact of tariffs, customs, or duties imposed on Products. Staples will work with Buyer to identify alternative Products to mitigate customs impact where possible.

**2) TERM.** Either party shall have the right to terminate the provision of Products and Services pursuant to these T&Cs, for any reason, upon thirty (30) calendar days' prior written notice to the other party. All Products and Services quoted as of the effective date of termination shall be invoiced to Buyer upon termination. In the event of a termination by either party or upon cancellation or expiration of the Agreement, Buyer agrees to promptly pay all amounts owed to Staples. Following termination, Staples reserves the right to withhold shipment of Products until all past due invoices owed to Staples by Buyer are paid.

**3) DESIGN.** Designs, plans, drawings, specifications, and samples (and the contents thereof) provided in connection with the Products are the property of Staples, and may not be used, reproduced or distributed in whole or in part without Staples' written consent.

**4) SHIPPING.** Staples shall not be responsible for delays or defaults caused by others or by circumstances beyond its control. Unless Buyer has specified shipping instructions in writing herein or by a subsequent written notice, shipment and delivery will be made by the designated carrier and in the manner deemed best by Staples, including partial shipments.

**5) RISK OF LOSS AND DAMAGE.** Title and risk of loss or damage to the Product shall pass to Buyer when it is delivered to Buyer or Buyer's agent, whichever first occurs. Staples shall not be liable for any shipping damage, delay, default, loss or expense occurring during or attributable to transportation by any third party carrier.

**6) DELIVERY AND INSTALLATION.** If delivery and installation are part of this sale, the following provisions shall apply:

**A. Installation Site Condition** - Buyer will ensure the site is clean and free of debris prior to installation. If Staples must remove or assist in removing existing furniture or equipment at the job site, Buyer shall pay Staples for this Service, as separately invoiced.

**B. Installation Site Services** - Electricity, heat, and elevator service will be furnished at Buyer's expense. Buyer shall provide adequate facilities for docking, moving and handling of Products.

**C. Special Packaging or Handling** - If special packaging or handling not contained in these T&Cs is required, Buyer shall pay an extra charge as invoiced separately.

**D. Delivery/Installation** - Delivery and installation will be during normal business hours (8:00 AM to 5:00 PM local time Monday through Friday, except for Staples designated holidays). Buyer shall pay additional labor costs resulting from overtime work performed at Buyer's request. Staples shall designate the personnel to install the Products sold herein. Buyer shall be responsible for obtaining proper permits for the installation. If regulations in force at the time of installation require the use of tradesmen at the site other than Staples designated personnel, Buyer shall pay for any additional costs incurred. If the Products must be moved due to progress of other trades, or other reason, the Buyer agrees to pay the extra cost of moving.

**E. Storage Space** - Unless the Products arrive at the site earlier than the date requested, the Buyer shall provide safe and adequate storage space at the Buyer's expense. If the space provided is inadequate or inconveniently located (such as on another floor) or requires excessive sorting or other additional expense, the Buyer shall pay the associated cost or expense.

**7) INSTALLATION DELAYS.** If construction delays or other causes not within Buyer's or Staples' control force postponement of an installation as scheduled, Staples or the Buyer shall store the Products until installation can be resumed, and the Products shall be considered accepted by the Buyer for purposes of invoicing and payment. Buyer shall pay all transfer and storage charges incurred.

**8) COMPLETION OF INSTALLATION.** Within a reasonable time after installation, authorized representatives of Staples and Buyer shall inspect the Product for conformity with the order and for defects and/or damages, and shall note all such mutually agreed upon items on an installation "Service Report". Upon completion of the inspection, the representatives of Staples and Buyer shall sign the Service Report, which shall constitute acceptance of Products installed, except as noted in the Service Report.

**9) CHANGE ORDER/CANCELLATION.** Any order changes must be submitted in writing. Staples will use commercially reasonable efforts to accommodate Buyer's written change order request. All changes/cancellation requests shall be evaluated at the time of request by Staples and are subject to revised lead times and/or additional charges as applicable.

**10) RETURNS POLICY.** Custom or made to order Products, or Products sourced specifically for Buyer are not eligible for return. Upon approval by Staples, stocked inventory Product may be returned subject to a restocking fee exclusive of freight and delivery. Returned Product must be in new and unused condition and returned in its original carton within 14 days of receipt.

**11) PAYMENT.** Buyer may be required to pay a deposit of 50% of the total purchase price of the Product ordered. Payment terms are net 30 days from the date of shipment and net 10 days on a consolidated billing method (e.g. weekly, monthly). For partial shipments, payment shall be due only for Products received. The remaining balance for any partial shipment shall be due within terms following installation of the Product. Staples may invoice Buyer at any time following shipment of the Product. Buyer shall pay the net amount shown on the face of the invoice. Credit cards shall not be accepted unless otherwise agreed by Staples. Staples reserves the right to charge interest on any past due amount at the rate of 1.5% per month, or the maximum rate legally permitted, whichever is less. Staples shall be entitled to recover its costs of collection, including reasonable attorneys' fees.

**12) TAXES.** Staples may collect, and Buyer shall pay, any taxes, which Staples may be required to pay or collect by law in connection with this sale. Any such taxes will be added to the price at time of invoicing and the Buyer shall pay the same unless the Buyer shall furnish written proof thereof of exemption to Staples prior to the estimated shipping date. The appropriate tax rate will be based on where the Product is received.



FQO / QUOTE #		DATE	CUSTOMER PO NO	CUSTOMER NO	SALESPERSON		
BI-168170		6/30/2021	CAP021095	Angel Bennett	ALMA HUIZAR		
<u>Line #</u>	<u>Qty</u>	<u>Part Number</u>	<u>Part Description</u>	<u>List \$</u>	<u>Ext List \$</u>	<u>Sell \$</u>	<u>Ext Sell \$</u>

**13) LIMITED WARRANTY.** Staples will pass through all manufacturers' warranties for the Products sold to Buyer in lieu of any other express or implied warranties by Staples. STAPLES EXPRESSLY DISCLAIMS ALL REPRESENTATIONS AND WARRANTIES, EXPRESS OR IMPLIED, INCLUDING WITHOUT LIMITATION, NON-INFRINGEMENT, MERCHANTABILITY, FITNESS FOR A PARTICULAR USE OR PURPOSE, OR ANY OTHER STATUTORY OR COMMON LAW WARRANTY.

**14) LIMITATION OF LIABILITY.** Neither party shall be liable to the other for any special, indirect, incidental, consequential, or punitive damages of any kind even if advised of the possibility thereof. In no event shall Staples' liability (whether in contract, tort or otherwise) for damages arising out of the sale, delivery, installation, use or performance of the Product exceed the purchase price of the Product from which the claim arises.

**15) CONFIDENTIALITY.** The parties will not disclose any confidential information furnished by the other party, except as required by law. For purposes hereof, confidential information includes, but is not limited to, each party's customer lists, prices, purchasing patterns, and financial information provided by either party, whether or not marked as confidential. In the event a party believes it is required by subpoena or other legal process to disclose confidential information received from the other party, it will give prompt written notice to such other party prior to making any disclosures. If this section is breached, the parties agree that monetary damages may not be sufficient to remedy such breach and that the non-breaching party may suffer irreparable damages, and therefore, the parties agree that the non-breaching party will be entitled to equitable and injunctive relief.

**16) Press Releases and Advertisements.** Unless expressly required by applicable law, neither party shall, without the prior written consent of the other, issue press releases, marketing literature, public statements, or in any way engage in any other form of public disclosure relating to these T&Cs.

**17) SECURITY INTEREST.** Staples reserves and Buyer grants to Staples a purchase money security interest in the Product and in the proceeds thereof to secure any payment due hereunder including subsequent invoices. Upon Staples request, Buyer shall execute financing statements and other documents reasonably requested by Staples to protect Staples' security interest. Buyer shall maintain the Product in good condition; keep the Product free from liens and encumbrances; and shall not use or permit use of the Product in a manner likely to damage it, nor remove or permit the removal of the Product from the installation location, nor permit the disassembly of the Product and shall permit inspection by Staples' representative at reasonable times. Buyer shall procure and maintain fire, extended coverage, vandalism and malicious mischief insurance to the full insurable value of the Products, with loss payable to Staples as its interest may appear.

**18) INDEMNIFICATION.** Each party ("Indemnifying Party") shall defend, hold harmless and indemnify the other, its officers, directors, employees, and agents ("Indemnified Party") from and against all third-party claims, damages, or causes of action arising out of or related to the Indemnifying Party's grossly negligent acts or omissions or material breach of any representation, warranty, covenant or obligation under these T&Cs. The Indemnified Party will (a) notify the Indemnifying Party promptly in writing of such action, (b) give the Indemnifying Party sole control of the defense and settlement of such action and (c) provide the Indemnifying Party all reasonable information and assistance requested.

**19) FORCE MAJEURE.** Neither party shall be liable for delays or impairment of performance resulting in whole or in part from acts of God, labor disruptions, shortages, inability to procure product, supplies or raw materials, severe weather conditions, acts of subcontractors, interruption of utility services, acts of governments, or any other circumstances or causes beyond the control of either party in the conduct of its business.

**20) ASSIGNMENT.** Neither party may assign the benefits of these T&Cs without the prior written consent of the other, provided however that Staples may assign these T&Cs to any affiliate, subsidiary or controlled entity. Any party who is assigned these T&Cs is bound to all of the terms and conditions contained herein.

**21) INSURANCE.** Staples shall at its expense maintain: (i) commercial general liability insurance with limits of at least \$1,000,000 combined single limit per occurrence; (ii) if deliveries are to be made by Staples to any Buyer facility, automobile bodily injury and property damage liability insurance covering owned, non-owned and hired automobiles, the limits of which shall not be less than \$1,000,000 combined single limit per occurrence; (iii) employer's liability insurance, the limits of which shall not be less than \$1,000,000; (iv) workers' compensation insurance as prescribed by applicable law; and (v) umbrella/excess coverage in the amount of \$4,000,000 per occurrence. With respect to the coverage described in (i), (ii), and (v) above, Staples shall (a) name Buyer as an additional insured for loss or damage arising out of Staples' products or services under these T&Cs; (b) name Buyer's landlord or property manager as an additional insured when deliveries or services are to be made or performed by Staples at any Buyer facility; (c) waive insurer's subrogation rights against Buyer and Buyer's landlord or property manager, except to the extent loss or damage is caused solely by Buyer or Buyer landlord or property manager; (d) provide primary, non-contributory coverage to additional insureds to the extent loss or damage results from products or services under these T&Cs; and (e) be insured with insurance companies of recognized standing rated A VIII or better by A.M. Best. Buyer and Buyer's landlord or property manager shall receive prior written notice of cancellation in accordance with the policy provisions.

**22) Governing Law.** The provisions of these T&Cs shall be construed in accordance with the laws of the State of New York excluding its conflicts of law provisions.

**23) TERMS AND CONDITIONS OF AGREEMENT.** These terms and conditions, in addition to any quote, contain the entire agreement between the parties with respect to the subject matter hereof. All modifications must be in writing, signed by authorized agents of both parties. These T&Cs shall control over any terms and conditions presented in either party's order forms or other documents which conflict with these T&Cs. If there are any additional terms and conditions contained in Buyer's ordering documents that add to or conflict with these terms and conditions, except for product description, pricing, quantity, and delivery instructions, such terms and conditions are expressly objected to and shall not be binding on Staples.

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

**Wednesday~ June 30, 2021**

**2:00 p.m.**

**Teleconference**

**Voting Members:**

Ed Tardoni , Chairman  
Taylor Jones  
Irene Richardson  
Tami Love  
Jan Layne

**Non-Voting Members:**

Ron Cheese	Kari Quickenden
Angel Bennett	Dr. Larry Lauridsen
Ann Clevenger	Dr. Augusto Jamias

**Guests:**

Jeff Smith, Commission	Leslie Taylor	Kim White
Jim Horan	Crystal Hamblin	Gerry Johnston

- |      |                                                             |                  |
|------|-------------------------------------------------------------|------------------|
| I.   | Call Meeting to Order                                       | Ed Tardoni       |
| II.  | <a href="#"><u>Approve May 26, 2021 Meeting Minutes</u></a> | Ed Tardoni       |
| III. | <a href="#"><u>Capital Requests FY 22</u></a>               |                  |
| IV.  | Financial Report                                            |                  |
|      | A. Monthly Financial Statements & Statistical Data          |                  |
|      | 1. <a href="#"><u>Narratives</u></a>                        | Jan Layne        |
|      | 2. <a href="#"><u>Financial Information</u></a>             | Jan Layne        |
|      | B. Other Business                                           |                  |
|      | 1. <a href="#"><u>Preliminary Bad Debt</u></a>              | Ron Cheese       |
| V.   | Old Business                                                |                  |
|      | A. <a href="#"><u>Self -Pay Report</u></a>                  | Ron Cheese       |
| VI.  | New Business                                                |                  |
|      | A. Bond Refinancing                                         | Irene Richardson |
|      | B. Financial Forum Discussion                               | Ed Tardoni       |
| VII. | Adjournment                                                 | Ed Tardoni       |

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

**NARRATIVE TO MAY 2021 FINANCIAL STATEMENTS**

**THE BOTTOM LINE.** The bottom line from operations for May was a loss of \$639,142, compared to a loss of \$441,060 in the budget. This yields a -8.35% operating margin for the month compared to -6.24% in the budget. The YTD net operating loss is \$2,886,483, compared to a loss of \$4,210,746 in the budget. This represents a YTD operating margin of -3.36% compared with -5.36% in the budget.

The total net loss for May is \$636,289, compared to a loss of \$448,608 in the budget. The YTD total net gain is \$5,407,898, compared to a loss of \$4,293,773 in the budget. This represents a YTD profit margin of 6.30% compared to -5.47% in the budget.

**REVENUE.** Revenue for the month continues to be over budget, at \$15,485,052, over budget by \$1,283,391. Inpatient revenue was over budget by \$318,468, hospital outpatient revenue was over budget by \$1,057,677 and the Clinic was under budget by \$92,755. For May we saw a 9% increase in gross revenue compared to budget and a 21.2% increase from prior year.

Annual Debt Service Coverage came in at 5.52. Days of Cash on Hand are 196 in May, down seven days from last month. Daily cash expense is \$246,000 year to date, increased due to the continued months of higher expenses.

**REDUCTION OF REVENUE.** Deductions from revenue are 51.2% in May, slightly under budget. Year to date reduction of revenue is 51.3%, also under budget. Total collections for the month came in fairly high in May at \$7,147,545. The repayment of the Medicare Advanced Payment began in April and through May we have paid back \$377,000 of the \$7.3 million received.

Net days in AR grew slightly to 41.7 days. We continue to exceed the goals for AR greater than 90 days for all Payers.

**EXPENSES.** Total expenses in May were \$8,291,874, over budget by \$779,217. Expenses are over budget by \$5,949,294 year-to-date. COVID related expenses were \$660,000 in May and are \$3,827,000 year to date. The following line items were over budget in May:

**Salary and Wage** – Paid hours are also over budget in May due to the higher volumes and the continued need for COVID related positions such as additional ICU nurses, extra Hospitalist coverage, door monitors and laboratory staff.



**Benefits** – FICA and Retirement are both over budget for May.

**Contract Labor** – There are currently contract labor positions in Behavioral Health, Labor & Delivery, ICU, Surgery, Emergency Room, Laboratory, Ultrasound, Physical Therapy, and Respiratory Therapy. COVID related staff include door monitors and additional nursing, laboratory and respiratory therapy positions.

**Physician Fees** – Locum expenses for additional coverage for Hospitalists and locum coverage for Pulmonology and Urology are over budget in May.

**Supplies** – Drugs and Lab supplies are over budget due to increased volumes. Minor equipment, Outdated supplies, Maintenance supplies and Promotional supplies are also over budget in May.

**PROVIDER CLINIC.** Revenue for the Clinics in May is lower this month at \$1,470,752, under budget by \$92,755. Net patient revenue for the Clinics is \$769,173, under budget by \$93,525. The bottom line for the Clinics in May is a loss of \$571,568 compared to a loss of \$540,911 in the budget. Year to date, the operating loss is \$6,156,328, compared to a loss of \$6,702,462 in the budget. Deductions from revenue for the Clinics are at 47.7% for May. Volume at the Clinics are 4,517 visits in May.

Total Clinic expenses for the month were lower at \$1,399,867, under budget by \$71,529. The majority of the expenses consist of Salaries and Benefits; at 82.6% of total expenses year-to-date. Benefits and Purchased services are were over budget for May.

**OUTLOOK FOR JUNE.** Gross patient revenue is projecting lower in June at \$14.5 million. Compared to last June, service volumes are mostly projected to be lower or similar to last year. ER visits, Chemotherapy visits and inpatient surgeries are projecting higher than last year's volumes.

Collections for June are projecting slightly higher, close to \$7.4 million. Projections for June payer mix show an increase in Medicaid and Workers Comp and slight decreases in Blue Cross, Medicare and Self Pay. Deductions of revenue are expected to come in close to budget at 51%. Expenses will remain high in June with the continued COVID related expenses. The bottom line for June is estimated at a loss of around \$2.5 million. However, the total net loss should be close to breakeven with the remaining balance of COVID funds reconciled to the income statement.

**CARES ACT.** On June 11, the Department of Health and Human Services (HHS) released its updated guidance on the usage and reporting deadlines of the CARES Act funds. While some deadlines for usage and reporting were extended, our schedule did not change. We received all of our funds prior to June 30, 2020 so will still need to use and report on our funds by September 30, 2021.

We have reconciled \$9.2 million for CY2020 of the total \$11.6 million in CARES Act funds received. We will be reconciling the final balance in June with the additional payroll expense and the completion of the S1 and HVAC construction projects.



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

**Unaudited Financial Statements  
for  
Eleven months ended May 31, 2021**

**Certification Statement:**

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

Certified by:

**Tami Love**

Chief Financial Officer

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**MEMORIAL HOSPITAL OF SWEETWATER COUNTY**

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**ROCK SPRINGS, WY**

**Eleven months ended May 31, 2021**

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# MEMORIAL HOSPITAL OF SWEETWATER COUNTY

## EXECUTIVE FINANCIAL SUMMARY

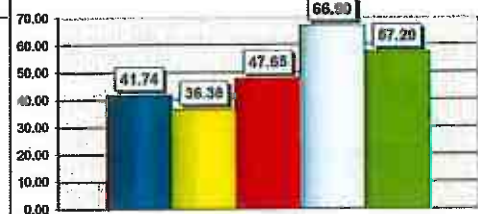
PAGE 2

Eleven months ended May 31, 2021

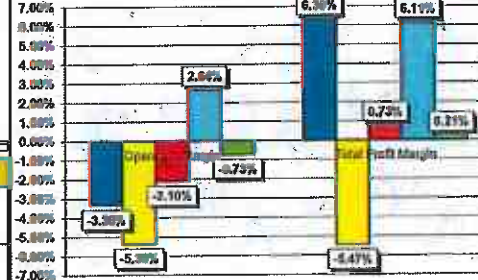
### BALANCE SHEET

	YTD 5/31/2021	Prior FYE 6/30/2020
<b>ASSETS</b>		
Current Assets	\$28,592,918	\$29,710,616
Assets Whose Use is Limited	41,922,270	41,885,879
Property, Plant & Equipment (Net)	66,134,660	62,796,433
Other Assets	211,032	222,356
Total Unrestricted Assets	136,860,880	134,615,283
Restricted Assets	560,661	354,288
Total Assets	\$137,421,542	\$134,969,571
<b>LIABILITIES AND NET ASSETS</b>		
Current Liabilities	\$9,112,750	\$8,393,554
Long-Term Debt	27,747,567	27,800,498
Other Long-Term Liabilities	9,489,876	13,181,959
Total Liabilities	46,350,193	49,376,010
Net Assets	91,071,349	85,593,560
Total Liabilities and Net Assets	\$137,421,542	\$134,969,571

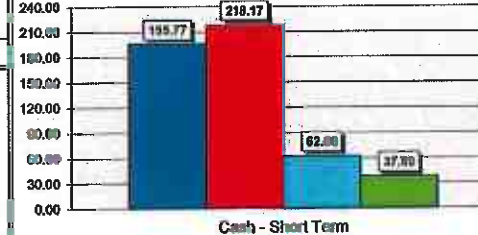
### NET DAYS IN ACCOUNTS RECEIVABLE



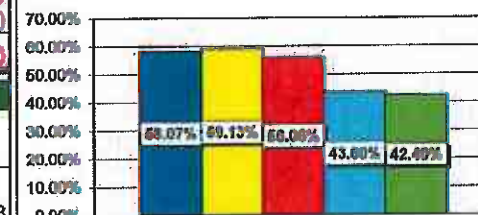
### HOSPITAL MARGINS



### DAYS CASH ON HAND



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



### KEY STATISTICS AND RATIOS

	05/31/21 ACTUAL	05/31/21 BUDGET	YTD ACTUAL	YTD BUDGET
Total Acute Patient Days	352	289	3,889	3,281
Average Acute Length of Stay	2.8	2.7	3.1	2.8
Total Emergency Room Visits	1,315	922	12,146	12,304
Outpatient Visits	8,637	6,009	98,499	74,337
Total Surgeries	134	114	1,672	1,467
Total Worked FTE's	455.61	437.01	443.11	437.01
Total Paid FTE's	496.01	479.80	486.89	479.80
Net Revenue Change from Prior Yr	4.40%	-3.53%	2.86%	-5.86%
EBIDA - 12 Month Rolling Average			2.22%	2.68%
Current Ratio			3.14	
Days Expense in Accounts Payable			32.76	

MEMORIAL HOSPITAL OF SWEETWATER COUNTY	
Budget	05/31/21
Prior Fiscal Year End	06/30/20
WYOMING	All Hospitals
< \$90M Net Rev.	Rural

FINANCIAL STRENGTH INDEX -		3.71
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

Eleven months ended May 31, 2021

PAGE 4

	Current Month 5/31/2021	Prior Month 4/30/2021	ASSETS Positive/ (Negative) Variance	Percentage Variance	Prior Year End 6/30/2020
<b>Current Assets</b>					
Cash and Cash Equivalents	\$9,872,905	\$11,603,146	(\$1,730,241)	-14.91%	\$12,052,717
Gross Patient Accounts Receivable	24,178,673	23,732,738	445,935	1.88%	22,601,743
Less: Bad Debt and Allowance Reserves	(13,027,156)	(12,879,088)	(148,068)	-1.15%	(12,704,325)
Net Patient Accounts Receivable	11,151,517	10,853,650	297,867	2.74%	9,897,418
Interest Receivable	0	0	0	0.00%	0
Other Receivables	2,251,488	2,462,888	(211,401)	-8.58%	2,416,525
Inventories	3,376,158	3,367,854	8,304	0.25%	3,208,539
Prepaid Expenses	1,940,850	1,882,665	58,186	3.09%	2,135,417
Due From Third Party Payers	0	0	0	0.00%	0
Due From Affiliates/Related Organizations	0	0	0	0.00%	0
Other Current Assets	0	0	0	0.00%	0
<b>Total Current Assets</b>	<b>28,592,918</b>	<b>30,170,203</b>	<b>(1,577,285)</b>	<b>-5.23%</b>	<b>29,710,616</b>
<b>Assets Whose Use is Limited</b>					
Cash	140,515	34,130	106,385	311.71%	23,688
Investments	0	0	0	0.00%	0
Bond Reserve/Debt Retirement Fund	0	0	0	0.00%	0
Trustee Held Funds - Project	2,904,074	2,792,618	111,456	3.99%	3,030,616
Trustee Held Funds - SPT	28,299	27,891	409	1.46%	14,345
Board Designated Funds	21,544,143	21,540,715	3,428	0.02%	23,843,068
Other Limited Use Assets	17,305,238	17,348,131	(42,893)	-0.25%	14,974,161
<b>Total Limited Use Assets</b>	<b>41,922,270</b>	<b>41,743,485</b>	<b>178,785</b>	<b>0.43%</b>	<b>41,885,879</b>
<b>Property, Plant, and Equipment</b>					
Land and Land Improvements	3,568,746	3,568,746	0	0.00%	3,527,687
Building and Building Improvements	38,828,435	38,828,435	0	0.00%	38,771,352
Equipment	114,297,449	113,936,304	361,145	0.32%	110,464,497
Construction In Progress	8,325,844	7,952,747	373,097	4.69%	2,957,578
Capitalized Interest	0	0	0	0.00%	0
Gross Property, Plant, and Equipment	165,020,474	164,286,232	734,241	0.45%	155,721,114
Less: Accumulated Depreciation	(98,885,813)	(98,322,166)	(563,647)	-0.57%	(92,924,681)
<b>Net Property, Plant, and Equipment</b>	<b>66,134,660</b>	<b>65,964,066</b>	<b>170,594</b>	<b>0.26%</b>	<b>62,796,433</b>
<b>Other Assets</b>					
Unamortized Loan Costs	211,032	212,062	(1,029)	-0.49%	222,356
Other	0	0	0	0.00%	0
<b>Total Other Assets</b>	<b>211,032</b>	<b>212,062</b>	<b>(1,029)</b>	<b>-0.49%</b>	<b>222,356</b>
<b>TOTAL UNRESTRICTED ASSETS</b>	<b>136,860,880</b>	<b>138,089,816</b>	<b>(1,228,936)</b>	<b>-0.89%</b>	<b>134,615,283</b>
<b>Restricted Assets</b>	<b>560,661</b>	<b>559,811</b>	<b>850</b>	<b>0.15%</b>	<b>354,288</b>
<b>TOTAL ASSETS</b>	<b>\$137,421,542</b>	<b>\$138,649,627</b>	<b>(\$1,228,086)</b>	<b>-0.89%</b>	<b>\$134,969,571</b>

# Balance Sheet - Liabilities and Net Assets

## MEMORIAL HOSPITAL OF SWEETWATER COUNTY

ROCK SPRINGS, WY

Eleven months ended May 31, 2021

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	LIABILITIES AND FUND BALANCE				Prior Year End 6/30/2020
	Current Month 5/31/2021	Prior Month 4/30/2021	Positive/ (Negative) Variance	Percentage Variance	
<b>Current Liabilities</b>					
Accounts Payable	\$4,554,259	\$4,672,365	\$118,106	2.53%	\$3,776,951
Notes and Loans Payable	0	0	0	0.00%	0
Accrued Payroll	1,328,597	991,451	(337,146)	-34.01%	1,377,654
Accrued Payroll Taxes	0	0	0	0.00%	0
Accrued Benefits	2,586,842	2,964,144	377,302	12.73%	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	335,009	223,575	(111,433)	-49.84%	447,275
<b>Total Current Liabilities</b>	<b>9,112,750</b>	<b>9,159,579</b>	<b>46,829</b>	<b>0.51%</b>	<b>8,393,554</b>
<b>Long Term Debt</b>					
Bonds/Mortgages Payable	28,055,611	28,060,423	4,812	0.02%	28,108,542
Leases Payable	0	0	0	0.00%	0
Less: Current Portion Of Long Term Debt	308,044	308,044	0	0.00%	308,044
<b>Total Long Term Debt (Net of Current)</b>	<b>27,747,567</b>	<b>27,752,379</b>	<b>4,812</b>	<b>0.02%</b>	<b>27,800,498</b>
<b>Other Long Term Liabilities</b>					
Deferred Revenue	9,309,300	9,686,375	377,075	3.89%	12,716,487
Accrued Pension Expense (Net of Current)	0	0	0	0.00%	0
Other	180,576	208,023	27,447	13.19%	465,472
<b>Total Other Long Term Liabilities</b>	<b>9,489,876</b>	<b>9,894,398</b>	<b>404,522</b>	<b>4.09%</b>	<b>13,181,959</b>
<b>TOTAL LIABILITIES</b>	<b>46,350,193</b>	<b>46,806,356</b>	<b>456,163</b>	<b>0.97%</b>	<b>49,376,010</b>
<b>Net Assets:</b>					
Unrestricted Fund Balance	83,147,542	83,284,026	136,484	0.16%	78,299,323
Temporarily Restricted Fund Balance	1,959,119	1,959,119	0	0.00%	1,959,119
Restricted Fund Balance	556,789	555,939	(850)	-0.15%	350,415
Net Revenue/(Expenses)	5,407,898	6,044,187	N/A	N/A	4,984,703
<b>TOTAL NET ASSETS</b>	<b>91,071,349</b>	<b>91,843,272</b>	<b>771,923</b>	<b>0.84%</b>	<b>85,593,560</b>
<b>TOTAL LIABILITIES AND NET ASSETS</b>	<b>\$137,421,542</b>	<b>\$138,649,627</b>	<b>\$1,228,086</b>	<b>0.89%</b>	<b>\$134,969,571</b>



# Key Financial Ratios

MEMORIAL HOSPITAL OF SWEETWATER COUNTY  
ROCK SPRINGS, WY  
Eleven months ended May 31, 2021

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↑ ↓ - DESIRED POSITION IN RELATION TO BENCHMARKS AND BUDGET

	Year to Date 6/31/2021	Budget 6/30/2021	BB+ Credit Rating	BBB- Credit Rating	Prior Fiscal Year End 06/30/20	WYOMING All Hospitals (See Note 1)	National Rural < \$50M Net Rev. (See Note 2)
<b>Profitability:</b>							
Operating Margin	↑ -3.36%	1.99%	0.10%	0.30%	-2.10%	2.64%	-0.73%
Total Profit Margin	↑ 6.30%	0.76%	0.80%	1.00%	0.73%	6.11%	0.21%
<b>Liquidity:</b>							
Days Cash, All Sources **	↑ 195.77	129.76	91.30	129.00	218.17	62.00	37.80
Net Days in Accounts Receivable	↓ 41.74	50.02	52.40	51.80	47.65	66.90	57.20
<b>Capital Structure:</b>							
Average Age of Plant (Annualized)	↓ 14.60	12.58	15.10	11.20	14.33	9.50	12.40
Long Term Debt to Capitalization	↓ 23.86%	25.75%	48.20%	41.60%	26.04%	16.80%	10.00%
Debt Service Coverage Ratio **	↑ 5.52	3.97	1.80	2.30	3.42	N/A	2.64
<b>Productivity and Efficiency:</b>							
Paid FTE's per Adjusted Occupied Bed	↓ 8.60	8.43			8.36	6.60	4.63
Salary Expense per Paid FTE	\$91,312	\$86,892			\$87,488	\$82,436	\$48,150
Salary and Benefits as a % of Total Operating Exp	58.07%	56.43%			56.06%	43.60%	42.40%

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

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

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

## Statement of Revenue and Expense

## MEMORIAL HOSPITAL OF SWEETWATER COUNTY

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ROCK SPRINGS, WY

Eleven months ended May 31, 2021

	CURRENT MONTH				Prior Year 05/31/20
	Actual 05/31/21	Budget 05/31/21	Positive (Negative) Variance	Percentage Variance	
Gross Patient Revenue					
Inpatient Revenue	\$3,057,995	\$2,739,527	\$318,468	11.62%	\$2,863,837
Outpatient Revenue	10,956,305	9,898,628	1,057,677	10.69%	8,485,713
Clinic Revenue	1,308,860	1,297,793	11,067	0.85%	1,116,816
Specialty Clinic Revenue	161,892	265,713	(103,821)	-39.07%	314,858
Total Gross Patient Revenue	15,485,052	14,201,661	1,283,391	9.04%	12,781,224
Deductions From Revenue					
Discounts and Allowances	(6,890,213)	(6,269,525)	(680,688)	-10.96%	(5,186,139)
Bad Debt Expense (Governmental Providers Only)	(763,338)	(945,335)	181,997	19.25%	(1,256,074)
Medical Assistance	(280,209)	(181,747)	(118,462)	-73.24%	(35,091)
Total Deductions From Revenue	(7,933,760)	(7,316,607)	(617,153)	-8.43%	(6,497,361)
Net Patient Revenue	7,551,292	6,885,053	666,238	9.68%	6,283,923
Other Operating Revenue	101,440	186,543	(85,103)	-45.62%	1,046,148
Total Operating Revenue	7,652,732	7,071,697	581,135	8.22%	7,330,071
Operating Expenses					
Salaries and Wages	3,563,709	3,294,716	(268,993)	-8.16%	3,315,414
Fringe Benefits	968,262	918,327	(49,935)	-5.44%	888,042
Contract Labor	322,046	10,767	(311,279)	-2891.14%	26,130
Physicians Fees	303,985	242,464	(61,521)	-25.37%	316,372
Purchased Services	387,299	395,045	7,746	1.96%	385,944
Supply Expense	1,314,104	1,190,155	(123,950)	-10.41%	1,008,570
Utilities	70,553	95,289	24,735	25.96%	102,274
Repairs and Maintenance	518,603	498,729	(19,874)	-3.99%	462,934
Insurance Expense	52,519	43,848	(8,670)	-19.77%	43,428
All Other Operating Expenses	152,472	194,631	42,158	21.66%	91,828
Bad Debt Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Leases and Rentals	64,630	62,498	(2,133)	-3.41%	49,189
Depreciation and Amortization	573,690	566,189	(7,501)	-1.32%	546,931
Interest Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Total Operating Expenses	8,291,874	7,512,657	(779,217)	-10.37%	7,237,056
Net Operating Surplus/(Loss)	(639,142)	(441,060)	(198,082)	44.91%	93,015
Non-Operating Revenue:					
Contributions	0	0	0	0.00%	0
Investment Income	103,869	23,667	80,202	338.88%	175,009
Tax Subsidies (Except for GO Bond Subsidies)	409	0	409	0.00%	651
Tax Subsidies for GO Bonds	0	0	0	0.00%	0
Interest Expense (Governmental Providers Only)	(107,629)	(101,960)	5,729	-5.62%	(100,543)
Other Non-Operating Revenue/(Expenses)	6,204	70,685	(64,481)	-91.22%	23,144
Total Non Operating Revenue/(Expense)	2,854	(7,648)	10,401	-137.81%	98,261
Total Net Surplus/(Loss)	(\$636,289)	(\$448,608)	(\$187,681)	41.84%	\$191,276
Change in Unrealized Gains/(Losses) on Investments	0	0	0	0.00%	191,745
Increase/(Decrease) in Unrestricted Net Assets	(\$636,289)	(\$448,608)	(\$187,681)	41.84%	\$383,021
Operating Margin	-8.35%	-6.24%			1.27%
Total Profit Margin	-8.31%	-6.34%			2.61%
EBIDA	-0.85%	1.77%			8.74%

## Statement of Revenue and Expense

## MEMORIAL HOSPITAL OF SWEETWATER COUNTY

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ROCK SPRINGS, WY

Eleven months ended May 31, 2021

	YEAR-TO-DATE				Prior Year 05/31/20
	Actual 05/31/21	Budget 05/31/21	Positive (Negative) Variance	Percentage Variance	
Gross Patient Revenue					
Inpatient Revenue	\$35,161,272	\$30,157,398	\$5,003,874	16.59%	\$31,919,204
Outpatient Revenue	117,849,748	108,904,267	8,945,479	8.21%	111,376,610
Clinic Revenue	15,276,935	13,118,246	2,158,689	16.46%	13,089,080
Specialty Clinic Revenue	3,209,247	2,929,109	280,139	9.56%	2,817,450
Total Gross Patient Revenue	171,497,200	155,109,020	16,388,180	10.57%	159,202,345
Deductions From Revenue					
Discounts and Allowances	(74,578,454)	(67,948,367)	(6,630,087)	-9.76%	(68,403,243)
Bad Debt Expense (Governmental Providers Only)	(10,973,908)	(10,398,682)	(575,224)	-5.53%	(10,381,996)
Medical Assistance	(2,388,392)	(2,377,858)	17,566	0.74%	(2,140,886)
Total Deductions From Revenue	(87,940,752)	(80,725,007)	(7,187,745)	-8.90%	(80,926,044)
Net Patient Revenue	83,584,448	74,384,013	9,200,435	12.37%	78,276,301
Other Operating Revenue	2,208,763	4,135,642	(1,926,878)	-46.59%	5,130,660
Total Operating Revenue	85,793,211	78,519,654	7,273,557	9.28%	83,406,961
Operating Expenses					
Salaries and Wages	39,215,809	35,602,184	(3,613,624)	-10.15%	35,849,759
Fringe Benefits	10,687,258	10,595,006	(92,252)	-0.87%	10,126,335
Contract Labor	1,588,928	232,204	(1,356,724)	-584.28%	870,839
Physicians Fees	2,972,843	2,655,106	(317,737)	-11.97%	3,872,043
Purchased Services	4,427,927	4,516,033	88,106	1.95%	4,447,403
Supply Expense	13,977,993	13,180,989	(797,005)	-6.05%	12,984,595
Utilities	1,018,866	1,065,810	46,945	4.40%	1,049,880
Repairs and Maintenance	5,444,918	5,227,492	(217,425)	-4.16%	4,844,305
Insurance Expense	458,161	480,677	22,516	4.68%	586,733
All Other Operating Expenses	1,929,859	2,174,910	245,051	11.27%	1,809,819
Bad Debt Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Leases and Rentals	687,740	687,696	(44)	-0.01%	789,750
Depreciation and Amortization	6,269,393	6,312,293	42,900	0.68%	6,142,755
Interest Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Total Operating Expenses	88,679,694	82,730,401	(5,949,294)	-7.19%	83,354,216
Net Operating Surplus/(Loss)	(2,886,483)	(4,210,746)	1,324,263	-31.45%	62,745
Non-Operating Revenue:					
Contributions	0	0	0	0.00%	0
Investment Income	279,606	260,333	19,272	7.40%	406,287
Tax Subsidies (Except for GO Bond Subsidies)	13,954	0	13,954	0.00%	15,244
Tax Subsidies for GO Bonds	0	0	0	0.00%	0
Interest Expense (Governmental Providers Only)	(1,202,367)	(1,120,897)	(81,470)	7.27%	(1,120,521)
Other Non-Operating Revenue/(Expense)	9,203,189	777,537	8,425,651	1083.63%	803,891
Total Non Operating Revenue/(Expense)	8,294,391	(83,026)	8,377,408	-10090.09%	109,902
Total Net Surplus/(Loss)	\$5,407,898	(\$4,293,773)	\$9,701,671	-225.95%	\$162,647
Change in Unrealized Gains/(Losses) on Investments	0	0	0	0.00%	191,745
Increase/(Decrease) in Unrestricted Net Assets	\$5,407,898	(\$4,293,773)	\$9,701,671	-225.95%	\$354,392
Operating Margin	-3.36%	-5.36%			0.06%
Total Profit Margin	6.30%	-5.47%			0.20%
EBIDA	3.96%	2.68%			7.44%



## Statement of Revenue and Expense - 13 Month Trend

MEMORIAL HOSPITAL OF SWEETWATER COUNTY  
ROCK SPRINGS, WY

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	Actual 5/31/2021	Actual 4/30/2021	Actual 3/31/2021	Actual 2/28/2021	Actual 1/31/2021	Actual 12/31/2020	Actual 11/30/2020
Gross Patient Revenue							
Inpatient Revenue	\$3,057,995	\$2,899,022	\$3,193,036	\$2,690,863	\$3,645,930	\$3,807,334	\$3,541,154
Inpatient Psych/Rehab Revenue							
Outpatient Revenue	\$10,956,306	\$11,180,916	\$12,012,531	\$9,644,427	\$9,967,382	\$10,454,974	\$9,719,339
Clinic Revenue	\$1,308,860	\$1,588,815	\$1,451,105	\$1,300,086	\$1,410,642	\$1,374,626	\$1,444,093
Specialty Clinic Revenue	\$161,892	\$236,066	\$342,042	\$281,294	\$311,512	\$321,541	\$328,942
Total Gross Patient Revenue	\$15,485,052	\$15,906,809	\$16,998,714	\$13,916,590	\$15,335,469	\$15,958,475	\$15,031,629
Deductions From Revenue							
Discounts and Allowances	\$6,890,213	\$6,661,972	\$7,053,702	\$5,612,790	\$6,661,815	\$6,637,293	\$7,026,788
Bad Debt Expense (Governmental Providers Only)	\$763,338	\$478,207	\$1,095,531	\$1,109,741	\$1,215,378	\$1,274,182	\$1,254,957
Charity Care	\$260,209	\$249,982	\$128,263	\$341,439	\$149,128	\$184,629	\$189,028
Total Deductions From Revenue	7,933,760	7,390,160	8,277,496	6,863,970	8,026,321	8,096,004	8,470,772
Net Patient Revenue	\$7,551,292	\$8,516,648	\$8,721,218	\$7,052,720	\$7,309,148	\$7,862,470	\$6,560,757
Other Operating Revenue	101,440	135,962	100,917	166,645	554,961	188,310	152,630
Total Operating Revenue	7,652,732	8,652,610	8,822,136	7,219,365	7,864,109	8,050,781	6,713,387
Operating Expenses							
Salaries and Wages	\$3,963,709	\$3,492,562	\$3,660,312	\$3,298,343	\$3,806,908	\$4,555,329	\$3,637,167
Fringe Benefits	\$968,262	\$1,070,954	\$1,111,599	\$1,017,103	\$1,153,370	\$1,020,056	\$923,626
Contract Labor	\$322,046	\$390,228	\$230,768	\$153,698	\$166,407	\$104,084	\$35,423
Physicians Fees	\$303,885	\$248,548	\$205,531	\$304,497	\$327,846	\$282,199	\$291,773
Purchased Services	\$357,299	\$493,446	\$363,312	\$348,834	\$424,314	\$384,462	\$362,052
Supply Expense	\$1,314,104	\$1,442,417	\$1,365,819	\$997,568	\$1,413,761	\$1,284,207	\$1,087,336
Utilities	\$70,553	\$117,576	\$89,246	\$93,512	\$72,884	\$108,264	\$109,520
Repairs and Maintenance	\$518,803	\$478,494	\$500,362	\$518,310	\$624,934	\$444,569	\$488,905
Insurance Expense	\$52,519	\$45,990	\$44,011	\$44,229	\$42,444	\$42,449	\$42,449
All Other Operating Expenses	\$182,472	\$220,980	\$215,184	\$172,795	\$174,806	\$228,097	\$154,600
Bad Debt Expense (Non-Governmental Providers)	\$64,630	\$64,239	\$69,020	\$70,269	\$62,335	\$61,256	\$43,670
Leases and Rentals							
Depreciation and Amortization	\$573,690	\$589,608	\$578,675	\$583,827	\$582,178	\$582,723	\$573,895
Interest Expense (Non-Governmental Providers)							
Total Operating Expenses	\$8,291,874	\$8,826,822	\$8,466,839	\$7,902,816	\$8,651,984	\$9,097,996	\$7,891,415
Net Operating Surplus/(Loss)	(\$639,142)	\$825,792	\$355,297	(\$683,451)	(\$787,875)	(\$1,047,215)	(\$918,028)
Non-Operating Revenue:							
Contributions							
Investment Income	103,889	13,895	17,587	11,312	12,078	13,945	28,397
Tax Subsidies (Except for GO Bond Subsidies)							
Tax Subsidies for GO Bonds	409	390	967	169	(2,572)	10,380	9
Interest Expense (Governmental Providers Only)	(107,628)	(107,629)	(102,617)	(107,805)	(104,612)	(117,265)	(107,806)
Other Non-Operating Revenue/(Expense)	(40,457)	808,373	1,784,852	788,517	161,858	3,928,613	48,839
Total Non-Operating Revenue/(Expense)	(\$43,806)	\$713,829	\$1,699,999	\$662,493	\$67,179	\$3,825,654	(\$30,272)
Total Net Surplus/(Loss)	(\$682,950)	\$1,539,621	\$2,055,296	\$471,035	(\$720,696)	\$2,786,739	(\$948,300)
Change in Unrealized Gains/(Losses) on Investments							
Increase/(Decrease) in Unrestricted Net Assets	(\$682,950)	\$1,539,621	\$2,055,296	\$471,035	(\$720,696)	\$2,786,739	(\$948,300)
Operating Margin	-8.35%	1.91%	4.14%	-2.56%	-8.75%	-13.03%	-12.63%
Total Profit Margin	-8.92%	9.19%	23.31%	6.36%	-7.89%	34.62%	-13.98%
EBIDA	-0.89%	7.64%	16.70%	5.29%	-1.34%	-6.79%	-4.66%

Actual 10/31/2020	Actual 9/30/2020	Actual 8/31/2020	Actual 7/31/2020	Actual 6/30/2020	Actual 5/31/2020
\$3,015,028	\$3,085,621	\$2,958,360	\$3,256,010	\$2,923,872	\$2,883,837
\$10,836,342	\$10,137,542	\$11,339,455	\$11,800,532	\$9,853,590	\$8,485,713
\$1,435,042	\$1,264,797	\$1,333,361	\$1,365,808	\$1,291,506	\$1,116,816
\$234,817	\$351,223	\$185,452	\$414,478	\$281,911	\$314,858
\$15,522,127	\$14,849,182	\$15,799,628	\$16,636,528	\$14,350,879	\$12,781,224
\$6,210,334	\$7,325,918	\$7,239,881	\$7,857,728	\$5,980,626	\$5,188,139
\$1,223,363	\$933,320	\$1,042,687	\$583,202	\$1,101,340	\$1,256,071
\$417,497	\$188,311	\$20,185	\$84,822	\$184,709	\$55,091
7,851,193	8,368,550	8,308,774	8,525,752	7,256,676	6,497,301
\$7,670,934	\$8,480,633	\$7,487,654	\$8,110,777	\$7,094,203	\$6,283,923
170,859	219,213	207,506	220,205	(1,615,588)	1,046,146
7,841,887	8,699,846	7,695,359	8,330,982	5,477,615	7,330,071
\$3,500,184	\$3,478,745	\$3,333,426	\$3,283,128	\$3,185,595	\$3,315,414
\$914,880	\$843,750	\$889,467	\$894,212	\$854,214	\$888,042
\$29,017	\$67,570	\$43,538	\$86,158	\$10,676	\$28,130
\$307,891	\$218,084	\$203,217	\$281,292	\$334,073	\$316,372
\$388,321	\$434,084	\$395,858	\$448,335	\$303,888	\$385,944
\$1,195,657	\$1,318,278	\$1,316,845	\$1,242,081	\$1,138,393	\$1,008,570
\$79,491	\$92,628	\$81,449	\$103,748	\$86,251	\$102,274
\$594,480	\$499,765	\$389,930	\$389,585	\$428,595	\$462,934
\$44,678	\$41,335	\$41,794	\$16,283	\$44,527	\$43,428
\$113,212	\$211,975	\$146,095	\$140,863	\$211,587	\$91,828
\$49,619	\$90,042	\$62,114	\$63,328	\$48,303	\$49,109
\$557,511	\$557,542	\$553,903	\$555,840	\$588,459	\$548,931
\$7,773,019	\$7,821,788	\$7,412,435	\$7,484,808	\$7,386,671	\$7,237,058
\$68,863	(\$1,121,840)	\$282,924	\$288,174	(\$1,817,955)	\$93,015
20,019	20,406	21,940	16,355	35,221	175,008
179	3,102	374	584	(1,068)	881
(107,840)	(114,157)	(107,816)	(107,818)	(221,176)	(100,543)
942,621	801,008	291,819	35,808	2,854,222	10,804
\$855,007	\$210,389	\$205,917	(\$54,993)	\$2,807,286	\$85,921
\$923,876	(\$911,581)	\$488,842	\$791,181	\$489,251	\$178,936
\$923,876	(\$911,581)	\$488,842	\$791,181	\$489,251	\$178,936
0.88%	-16.75%	3.82%	10.16%	-35.01%	1.27%
11.78%	-13.81%	6.35%	9.50%	8.93%	2.44%
7.96%	-8.42%	18.87%	16.83%	-24.84%	8.73%

## Statement of Cash Flows

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

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ROCK SPRINGS, WY

Eleven months ended May 31, 2021

	CASH FLOW	
	Current Month 5/31/2021	Current Year-To-Date 5/31/2021
<b>CASH FLOWS FROM OPERATING ACTIVITIES:</b>		
Net Income (Loss)	(\$636,289)	\$5,407,898
Adjustments to Reconcile Net Income to Net Cash Provided by Operating Activities:		
Depreciation	573,690	6,269,393
(Increase)/Decrease in Net Patient Accounts Receivable	(297,867)	(1,254,099)
(Increase)/Decrease in Other Receivables	211,401	165,037
(Increase)/Decrease in Inventories	(8,304)	(167,620)
(Increase)/Decrease in Pre-Paid Expenses	(58,186)	194,567
(Increase)/Decrease in Other Current Assets	0	0
Increase/(Decrease) in Accounts Payable	(118,106)	777,308
Increase/(Decrease) in Notes and Loans Payable	0	0
Increase/(Decrease) in Accrued Payroll and Benefits	(40,156)	54,155
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	111,433	(112,266)
<b>Net Cash Provided by Operating Activities:</b>	<b>(262,384)</b>	<b>11,334,373</b>
<b>CASH FLOWS FROM INVESTING ACTIVITIES:</b>		
Purchase of Property, Plant and Equipment	(744,285)	(9,607,621)
(Increase)/Decrease in Limited Use Cash and Investments	(72,399)	80,436
(Increase)/Decrease in Other Limited Use Assets	(106,385)	(116,827)
(Increase)/Decrease in Other Assets	1,029	11,324
<b>Net Cash Used by Investing Activities</b>	<b>(922,040)</b>	<b>(9,632,688)</b>
<b>CASH FLOWS FROM FINANCING ACTIVITIES:</b>		
Increase/(Decrease) in Bond/Mortgage Debt	(4,812)	(52,931)
Increase/(Decrease) in Capital Lease Debt	0	0
Increase/(Decrease) in Other Long Term Liabilities	(404,522)	(3,692,083)
<b>Net Cash Used for Financing Activities</b>	<b>(409,334)</b>	<b>(3,745,014)</b>
<b>(INCREASE)/DECREASE IN RESTRICTED ASSETS</b>	<b>(136,484)</b>	<b>(136,484)</b>
<b>Net Increase/(Decrease) in Cash</b>	<b>(1,730,241)</b>	<b>(2,179,812)</b>
Cash, Beginning of Period	11,603,146	12,052,717
<b>Cash, End of Period</b>	<b>\$9,872,904</b>	<b>\$9,872,904</b>

Patient Statistics

MEMORIAL HOSPITAL OF SWEETWATER COUNTY  
ROCK SPRINGS, WY  
Eleven months ended May 31, 2021

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Current Month				Year-To-Date				
Actual 05/31/21	Budget 05/31/21	Positive/ (Negative) Variance	Prior Year 05/31/20	STATISTICS	Actual 05/31/21	Budget 05/31/21	Positive/ (Negative) Variance	Prior Year 05/31/20
<b>Discharges</b>								
127	107	20	119	Acute	1,267	1,189	78	1,321
127	107	20	119	Total Adult Discharges	1,267	1,189	78	1,321
37	32	6	35	Newborn	363	362	1	402
164	139	25	154	Total Discharges	1,630	1,551	79	1,723
<b>Patient Days:</b>								
352	289	63	321	Acute	3,889	3,281	609	3,645
352	289	63	321	Total Adult Patient Days	3,889	3,281	609	3,645
57	48	9	53	Newborn	549	603	(54)	670
409	337	72	374	Total Patient Days	4,438	3,884	555	4,315
<b>Average Length of Stay (ALOS)</b>								
2.8	2.7	0.1	2.7	Acute	3.1	2.8	0.3	2.8
2.8	2.7	0.1	2.7	Total Adult ALOS	3.1	2.8	0.3	2.8
1.5	1.5	0.0	1.5	Newborn ALOS	1.5	1.7	(0.2)	1.7
<b>Average Daily Census (ADC)</b>								
11.4	9.3	2.0	10.4	Acute	11.6	9.8	1.8	10.9
11.4	9.3	2.0	10.4	Total Adult ADC	11.6	9.8	1.8	10.9
1.8	1.5	0.3	1.7	Newborn	1.6	1.8	(0.2)	2.0
<b>Emergency Room Statistics</b>								
125	117	8	130	ER Visits - Admitted	1,307	1,273	34	1,414
1,190	805	385	894	ER Visits - Discharged	10,839	11,031	(192)	12,257
1,315	922	393	1,024	Total ER Visits	12,146	12,304	(158)	13,671
9.51%	12.70%		12.70%	% of ER Visits Admitted	10.76%	10.34%		10.34%
98.43%	109.24%		109.24%	ER Admissions as a % of Total	103.16%	107.04%		107.04%
<b>Outpatient Statistics:</b>								
8,637	6,009	2,628	6,677	Total Outpatients Visits	98,499	74,337	24,162	82,597
72	87	(15)	97	Observation Bed Days	1,054	1,107	(53)	1,230
4,047	5,311	(1,264)	3,525	Clinic Visits - Primary Care	45,756	57,220	(11,464)	44,389
470	545	(75)	563	Clinic Visits - Specialty Clinics	5,732	6,007	(275)	5,745
17	21	(4)	23	IP Surgeries	258	248	11	275
117	94	23	104	OP Surgeries	1,414	1,220	195	1,355
<b>Productivity Statistics:</b>								
455.61	437.01	18.60	421.47	FTE's - Worked	443.11	437.01	6.10	413.97
496.01	479.80	16.21	459.23	FTE's - Paid	486.89	479.80	7.09	454.09
1.4201	1.4341	(0.01)	1.5934	Case Mix Index - Medicare	1.4974	1.0827	0.41	1.3877
1.1820	1.4341	(0.25)	1.0974	Case Mix Index - All payers	1.1979	1.0827	0.12	0.9980



# Accounts Receivable Tracking Report

**MEMORIAL HOSPITAL OF SWEETWATER COUNTY**  
**ROCK SPRINGS, WY**  
**05/31/21**

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	<b><u>Current Month Actual</u></b>	<b><u>Current Month Target</u></b>
Gross Days in Accounts Receivable - All Services	46.41	52.11
Net Days in Accounts Receivable	41.74	47.65
Number of Gross Days in Unbilled Revenue	5.27	3.0 or <
Number of Days Gross Revenue in Credit Balances	0.00	< 1.0
Self Pay as a Percentage of Total Receivables	33.02%	N/A
Charity Care as a % of Gross Patient Revenue - Current Month	1.81%	1.14%
Charity Care as a % of Gross Patient Revenue - Year-To-Date	1.38%	1.53%
Bad Debts as a % of Gross Patient Revenue - Current Month	4.93%	6.66%
Bad Debts as a % of Gross Patient Revenue - Year-To-Date	6.40%	6.70%
Collections as a Percentage of Net Revenue - Current Month	94.65%	100% or >
Collections as a Percentage of Net Revenue - Year-To-Date	97.41%	100% or >
Percentage of Blue Cross Receivable > 90 Days	0.88%	< 10%
Percentage of Insurance Receivable > 90 Days	6.85%	< 15%
Percentage of Medicaid Receivable > 90 Days	11.95%	< 20%
Percentage of Medicare Receivable > 60 Days	1.14%	< 6%

# Variance Analysis

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

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ROCK SPRINGS, WYOMING

Eleven months ended May 31, 2021

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	1,283,391	9.04%	16,388,180	10.57%

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 11.4 in May which is over budget by 2.0

Deductions from Revenue	(617,153)	-8.43%	(7,187,745)	-8.90%
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Deductions from revenue are over budget for May and over budget year to date.  
They are currently booked at 51.2% for May and 51.3% year to date. This number is monitored closely each month and fluctuates based on historical write-offs and current collection percentages.

Bad Debt Expense	181,997	19.25%	(575,224)	-5.53%
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Bad debt expense is booked at 4.9% for May and 6.4% year to date.

Charity Care	(118,462)	-73.24%	17,566	0.74%
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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	(85,103)	-45.52%	(1,926,878)	-45.59%
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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	(268,993)	-8.15%	(3,513,624)	-19.15%
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Salary and Wages are over budget and remain over budget year to date.

Paid FTEs are over budget by 16.2 FTEs for the month and over 7.1 FTEs year to date.

Fringe Benefits	(49,935)	-5.44%	(92,252)	-0.87%
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Fringe benefits are over budget in May and over budget year to date.

Contract Labor	(311,279)	-2894.44%	(1,356,724)	-584.28%
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Contract labor is over budget for May and over budget year to date.  
Behavioral Health, ICU, L&D, Ultrasound, OR, PACU, ER, Physical therapy,



# Variance Analysis

## MEMORIAL HOSPITAL OF SWEETWATER COUNTY

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### ROCK SPRINGS, WYOMING

Eleven months ended May 31, 2021

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	%
Lab, Respiratory and Emergency Mgmt are over budget.				
Physician Fees	(61,521)	-25.37%	(317,737)	-11.97%
Physician fees over budget in May and over budget year to date. Histology, Locums, Locums Clinic and Emergency Mgmt are over budget in May.				
Purchased Services	7,746	1.96%	88,106	1.95%
Purchased services are over budget for May and under budget year to date. Expenses over budget are bank card fee's and other purchased services				
Supply Expense	(123,950)	-10.41%	(797,005)	-6.05%
Supplies are over budget for May and over budget year to date. Line items over budget include Radioactive materials, lab supplies, drugs, minor equipment, outdated supplies and marketing supplies				
Repairs & Maintenance	(19,874)	-3.99%	(217,425)	-4.16%
Repairs and Maintenance are under budget for May and over budget year to date.				
All Other Operating Expenses	42,158	21.66%	245,051	11.27%
This expense is under budget in May and under budget year to date. Other expenses over budget are freight, courier services, physician recruitment and employee recruitment				
Leases and Rentals	(2,133)	-3.41%	(44)	-0.01%
This expense is over budget for May and is over budget year to date.				
Depreciation and Amortization	(7,501)	-1.32%	42,900	0.68%
Depreciation is over budget for May and is under budget year to date.				
<b>BALANCE SHEET</b>				
Cash and Cash Equivalents	(\$1,730,241)	-14.91%		
Cash decreased in May. Cash collections for May were \$7.1 million. Days Cash on Hand decreased to 196 days.				
Gross Patient Accounts Receivable	\$445,935	1.88%		
This receivable increased in May.				

## Variance Analysis

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

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ROCK SPRINGS, WYOMING

Eleven months ended May 31, 2021

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

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

	Current Month Amount	%	Year-to-Date Amount	%
<b>Bad Debt and Allowance Reserves</b>	(148,068)	-4.15%		
Bad Debt and Allowances increased.				
<b>Other Receivables</b>	(211,401)	-8.58%		
Other Receivables decreased in May due to county and occ.med invoice payments.				
<b>Prepaid Expenses</b>	58,186	3.09%		
Prepaid expenses increased due to the normal activity in this account.				
<b>Limited Use Assets</b>	178,785	0.43%		
These assets increased due to the debt service payment				
<b>Plant Property and Equipment</b>	170,594	0.26%		
The increase in these assets is due to the increase in Capital equipment and the normal increase in accumulated depreciation.				
<b>Accounts Payable</b>	118,106	2.53%		
This liability decreased due to the normal activity in this account.				
<b>Accrued Payroll</b>	(337,148)	-34.01%		
This liability increased in May. The payroll accrual for May was 9 days.				
<b>Accrued Benefits</b>	377,302	12.73%		
This liability decreased in May with the normal accrual and usage of PTO and the PTO cashout.				
<b>Other Current Liabilities</b>	(111,433)	-49.84%		
This liability increased due to the interest payment on the bonds				
<b>Other Long Term Liabilities</b>	404,522	4.09%		
This liability increased due bond interest				
<b>Total Net Assets</b>	771,923	0.84%		
The net loss from operations for May is \$639,143				



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

**PHYSICIAN CLINICS**

**Unaudited Financial Statements**

**for**

**Eleven months ended May 31, 2021**

**Certification Statement:**

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

**Certified by:**

**Tami Love**

**Chief Financial Officer**

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**ROCK SPRINGS, WY**

**Eleven months ended May 31, 2021**

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## Key Financial Ratios

### MEMORIAL HOSPITAL OF SWEETWATER COUNTY

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### ROCK SPRINGS, WY

Eleven months ended May 31, 2021

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

	Month to Date 5/31/2021	Year to Date 5/31/2021	Prior Fiscal Year End 06/30/20	MGMA Hospital Owned Rural
<b>Profitability:</b>				
Operating Margin	-69.01%	-57.52%	-68.15%	-36.58%
Total Profit Margin	-69.01%	-57.52%	-68.15%	-36.58%
Contractual Allowance %	47.70%	46.16%	46.02%	
<b>Liquidity:</b>				
Net Days in Accounts Receivable	42.98	35.65	50.83	39.58
Gross Days in Accounts Receivable	51.49	43.63	54.32	72.82
<b>Productivity and Efficiency:</b>				
Patient Visits Per Day	130.55	136.59	132.42	
Total Net Revenue per FTE	N/A	\$149,804	\$141,843	
Salary Expense per Paid FTE	N/A	\$166,162	\$162,294	
Salary and Benefits as a % of Net Revenue	135.74%	130.10%	134.65%	91.26%
Employee Benefits %	19.59%	17.30%	17.69%	6.10%

# Statement of Revenue and Expense

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

ROCK SPRINGS, WY

Eleven months ended May 31, 2021

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## CURRENT MONTH

	Actual 05/31/21	Budget 05/31/21	Positive (Negative) Variance	Percentage Variance	Prior Year 05/31/20
Gross Patient Revenue					
Clinic Revenue	1,308,860	1,297,793	11,067	0.85%	1,116,816
Specialty Clinic Revenue	161,892	265,713	(103,821)	-39.07%	314,858
Total Gross Patient Revenue	1,470,752	1,563,506	(92,755)	-5.93%	1,431,674
Deductions From Revenue					
Discounts and Allowances	(701,578)	(700,898)	(770)	-0.11%	(637,481)
Total Deductions From Revenue	(701,578)	(700,898)	(770)	-0.11%	(637,481)
Net Patient Revenue	769,173	862,698	(93,525)	-10.84%	794,213
Other Operating Revenue	59,125	67,787	(8,662)	-12.78%	66,375
Total Operating Revenue	828,299	930,486	(102,187)	-10.98%	860,588
Operating Expenses					
Salaries and Wages	940,167	1,045,067	104,900	10.04%	979,724
Fringe Benefits	184,159	170,100	(14,059)	-8.27%	162,005
Contract Labor	0	0	0	0.00%	0
Physicians Fees	114,521	86,067	(28,454)	-33.06%	119,793
Purchased Services	13,208	10,663	(2,545)	-23.87%	10,144
Supply Expense	15,954	17,693	1,739	9.83%	10,730
Utilities	1,933	1,747	(185)	-10.62%	1,804
Repairs and Maintenance	16,580	23,245	6,664	28.67%	26,489
Insurance Expense	13,611	19,343	5,731	29.63%	17,874
All Other Operating Expenses	82,775	81,769	(1,006)	-1.23%	53,551
Bad Debt Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Leases and Rentals	4,022	3,322	(700)	-21.08%	2,405
Depreciation and Amortization	12,937	12,382	(554)	-4.48%	18,488
Interest Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Total Operating Expenses	1,399,867	1,471,396	71,529	4.86%	1,403,007
Net Operating Surplus/(Loss)	(571,568)	(540,911)	(30,658)	5.67%	(542,419)
Total Net Surplus/(Loss)	(571,568)	(540,911)	(30,658)	5.67%	(542,419)
Change in Unrealized Gains/(Losses) on Investments	0	0	0	0.00%	0
Increase/(Decrease in Unrestricted Net Assets	(571,568)	(540,911)	(30,658)	5.67%	(542,419)
Operating Margin	-69.01%	-58.13%			-63.03%
Total Profit Margin	-69.01%	-58.13%			-63.03%
EBIDA	-67.44%	-56.80%			-60.86%



# Statement of Revenue and Expense

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

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ROCK SPRINGS, WY

Eleven months ended May 31, 2021

	YEAR-TO-DATE				Prior Year 06/31/20
	Actual 05/31/21	Budget 05/31/21	Positive (Negative) Variance	Percentage Variance	
Gross Patient Revenue					
Clinic Revenue	15,276,935	13,118,246	2,158,689	16.46%	13,089,081
Specialty Clinic Revenue	3,209,247	2,929,109	280,139	9.56%	2,817,450
Total Gross Patient Revenue	18,486,182	16,047,355	2,438,827	15.20%	15,906,531
Deductions From Revenue					
Discounts and Allowances	(8,533,247)	(7,326,024)	(1,207,222)	-16.48%	(7,306,717)
Total Deductions From Revenue	(8,533,247)	(7,326,024)	(1,207,222)	-16.48%	(7,306,717)
Net Patient Revenue	9,952,935	8,721,330	1,231,605	14.12%	8,599,814
Other Operating Revenue	749,419	745,662	3,757	0.50%	686,742
Total Operating Revenue	10,702,354	9,466,992	1,235,362	13.05%	9,286,556
Operating Expenses					
Salaries and Wages	11,870,985	11,116,023	(754,962)	-6.79%	10,687,604
Fringe Benefits	2,053,201	2,162,799	109,598	5.07%	1,893,419
Contract Labor	0	0	0	0.00%	0
Physicians Fees	990,246	946,733	(43,513)	-4.60%	1,279,000
Purchased Services	143,407	115,280	(28,127)	-24.40%	112,521
Supply Expense	168,011	207,813	39,802	19.15%	203,361
Utilities	15,928	19,219	3,291	17.13%	15,543
Repairs and Maintenance	212,263	255,726	43,463	17.00%	246,662
Insurance Expense	145,613	211,118	65,505	31.03%	202,821
All Other Operating Expenses	1,033,170	915,750	(117,421)	-12.82%	822,489
Bad Debt Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Leases and Rentals	35,340	35,401	62	0.17%	47,644
Depreciation and Amortization	190,519	183,592	(6,927)	-3.77%	235,440
Interest Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Total Operating Expenses	16,868,682	16,169,454	(699,228)	-4.26%	15,746,504
Net Operating Surplus/(Loss)	(8,166,328)	(6,702,462)	546,134	-8.15%	(6,459,947)
Total Net Surplus/(Loss)	(\$6,166,328)	(\$6,702,462)	\$546,134	-8.15%	(\$6,459,947)
Change in Unrealized Gains/(Losses) on Investments	0	0	0	0.00%	0
Increase/(Decrease) in Unrestricted Net Assets	(\$6,166,328)	(\$6,702,462)	\$546,134	-8.15%	(\$6,459,947)
Operating Margin	-57.52%	-70.80%			-69.56%
Total Profit Margin	-57.52%	-70.80%			-69.56%
EBIDA	-55.74%	-68.86%			-67.03%

# Statement of Revenue and Expense - 13 Month Trend

MEMORIAL HOSPITAL OF SWEETWATER COUNTY  
ROCK SPRINGS, WY

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	Actual 4/30/2021	Actual 4/30/2021	Actual 3/31/2021	Actual 2/28/2021	Actual 1/31/2021
Gross Patient Revenue					
Clinic Revenue	\$1,308,880	\$1,588,815	\$1,451,105	\$1,300,086	\$1,410,642
Specialty Clinic Revenue	\$161,892	\$298,088	\$342,042	\$281,294	\$311,512
Total Gross Patient Revenue	\$1,470,752	\$1,886,871	\$1,793,147	\$1,581,380	\$1,722,154
Deductions From Revenue					
Discounts and Allowances	\$701,578	\$669,032	\$828,370	\$758,645	\$836,394
Total Deductions From Revenue	701,578	669,032	828,370	758,645	836,394
Net Patient Revenue	\$769,173	\$1,017,838	\$964,777	\$822,735	\$885,759
Other Operating Revenue	\$59,125	\$58,845	\$59,163	\$65,776	\$70,558
Total Operating Revenue	\$828,299	1,076,684	1,023,880	888,510	956,317
Operating Expenses					
Salaries and Wages	\$940,167	\$1,037,659	\$1,142,213	\$1,104,879	\$1,132,930
Fringe Benefits	\$184,159	\$206,715	\$216,355	\$240,814	\$263,026
Contract Labor	\$0	\$0	\$0	\$0	\$0
Physicians Fees	\$114,521	\$46,485	\$30,939	\$83,378	\$78,208
Purchased Services	\$13,208	\$12,175	\$15,397	\$13,204	\$15,024
Supply Expense	\$15,954	\$19,891	\$18,548	\$17,037	\$14,651
Utilities	\$1,933	\$1,872	\$1,875	\$1,836	\$1,810
Repairs and Maintenance	\$16,580	\$16,968	\$18,493	\$18,542	\$17,458
Insurance Expense	\$13,611	\$13,611	\$13,611	\$13,611	\$13,611
All Other Operating Expenses	\$92,775	\$134,676	\$105,518	\$95,431	\$91,548
Bad Debt Expense (Non-Governmental Providers)					
Leases and Rentals	\$4,822	\$3,037	\$3,450	\$3,319	\$3,032
Depreciation and Amortization	\$12,937	\$12,966	\$17,183	\$18,273	\$18,273
Interest Expense (Non-Governmental Providers)					
Total Operating Expenses	\$1,399,867	\$1,506,056	\$1,583,583	\$1,620,324	\$1,647,571
Net Operating Surplus/(Loss)	(\$571,568)	(\$429,373)	(\$559,703)	(\$731,814)	(\$691,254)
Total Net Surplus/(Loss)	(\$571,568)	(\$429,373)	(\$559,703)	(\$731,814)	(\$691,254)
Change in Unrealized Gains/(Losses) on Investr	0	0	0	0	0
Increase/(Decrease in Unrestricted Net Assets	(\$571,568)	(\$429,373)	(\$559,703)	(\$731,814)	(\$691,254)
Operating Margin	-69.01%	-39.88%	-54.66%	-82.36%	-72.28%
Total Profit Margin	-69.01%	-39.88%	-54.66%	-82.36%	-72.28%
EBIDA	-67.44%	-38.67%	-52.99%	-80.31%	-70.37%

Actual 12/31/2020	Actual 11/30/2020	Actual 10/31/2020	Actual 9/30/2020	Actual 8/31/2020	Actual 7/31/2020	Actual 6/30/2020	Actual 5/31/2020
\$1,374,626	\$1,444,093	\$1,435,042	\$1,264,797	\$1,333,361	\$1,365,508	\$1,291,506	\$1,116,816
\$321,541	\$326,942	\$234,817	\$351,223	\$165,452	\$414,478	\$281,911	\$314,858
\$1,696,166	\$1,771,035	\$1,669,859	\$1,616,020	\$1,498,813	\$1,779,986	\$1,573,417	\$1,431,674
\$741,684	\$787,893	\$765,733	\$741,674	\$703,186	\$799,056	\$736,720	\$637,461
741,684	787,893	765,733	741,674	703,186	799,056	736,720	637,461
\$954,482	\$983,142	\$904,126	\$874,346	\$795,627	\$980,930	\$836,697	\$794,213
\$67,749	\$70,839	\$74,395	\$75,030	\$75,344	\$72,653	\$77,628	\$66,375
1,022,231	1,053,982	976,521	949,376	870,971	1,053,583	914,325	860,588
\$1,137,133	\$1,211,751	\$1,086,459	\$1,086,987	\$984,249	\$1,006,558	\$983,977	\$979,724
\$188,182	\$149,894	\$164,048	\$149,004	\$144,807	\$166,187	\$170,996	\$162,005
\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
\$140,601	\$122,258	\$145,489	\$78,510	\$64,083	\$76,774	\$125,801	\$119,793
\$12,233	\$12,756	\$14,862	\$15,580	\$8,196	\$10,752	\$9,098	\$10,144
\$12,388	\$12,806	\$13,359	\$15,225	\$9,216	\$18,937	\$10,722	\$10,796
\$594	\$2,122	\$972	\$847	\$979	\$1,288	\$1,861	\$1,804
\$19,895	\$20,740	\$18,612	\$18,458	\$25,877	\$20,741	\$24,187	\$26,489
\$13,611	\$13,611	\$13,294	\$13,294	\$11,873	\$11,873	\$11,873	\$17,874
\$109,020	\$82,354	\$103,996	\$88,010	\$62,041	\$77,807	\$45,948	\$63,551
\$2,398	\$3,871	\$3,239	\$2,177	\$3,652	\$3,141	\$3,083	\$2,405
\$18,641	\$18,641	\$18,214	\$18,290	\$18,615	\$18,488	\$18,487	\$18,488
\$1,634,705	\$1,650,804	\$1,582,457	\$1,487,181	\$1,333,588	\$1,412,545	\$1,406,033	\$1,403,007
(\$612,474)	(\$596,823)	(\$603,935)	(\$537,805)	(\$462,618)	(\$358,963)	(\$491,708)	(\$542,419)
0	0	0	0	0	0	0	0
(\$612,474)	(\$596,823)	(\$603,935)	(\$537,805)	(\$462,618)	(\$358,963)	(\$491,708)	(\$542,419)
-59.92%	-56.63%	-61.72%	-56.65%	-53.12%	-34.07%	-53.78%	-63.03%
-59.92%	-56.63%	-61.72%	-56.65%	-53.12%	-34.07%	-53.78%	-63.03%
-58.09%	-54.86%	-59.86%	-54.72%	-50.98%	-32.32%	-51.76%	-60.86%

# Patient Statistics

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

ROCK SPRINGS, WY

Eleven months ended May 31, 2021

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Current Month				STATISTICS	Year-To-Date			
Actual	Budget	Positive/ (Negative)	Prior		Actual	Budget	Positive/ (Negative)	Prior
05/31/21	05/31/21	Variance	Year 05/31/20		05/31/21	05/31/21	Variance	Year 05/31/20
Outpatient Statistics:								
4,047	5,311	(1,264)	3,525	Clinic Visits - Primary Care	45,756	57,230	(11,474)	44,392
470	545	(75)	563	Clinic Visits - Specialty Clinics	5,732	5,997	(265)	5,745
Productivity Statistics:								
63.99	70.76	(6.77)	66.27	FTE's - Worked	71.39	70.76	0.63	71.47
72.11	77.76	(5.65)	70.09	FTE's - Paid	77.84	77.76	0.08	78.05

**MEMORIAL HOSPITAL OF SWEETWATER COUNTY  
CASH DISBURSEMENT SUMMARY FOR MAY 21**

PAYMENT SOURCE	NO. OF DISBURSEMENTS	AMOUNT
OPERATIONS (GENERAL FUND/KEYBANK)	755	8,327,189.40
CAPITAL EQUIPMENT (PLANT FUND)	7	173,317.66
CONSTRUCTION IN PROGRESS (BUILDING FUND)	5	221,944.25
PAYROLL MAY 13, 2021	N/A	1,607,632.42
PAYROLL MAY 27, 2021	N/A	1,466,808.16
TOTAL CASH OUTFLOW		<u>\$8,722,451.31</u>
CASH COLLECTIONS		7,147,544.89
INCREASE/DECREASE IN CASH		-\$1,574,906.42



**PLANT FUND CASH DISBURSEMENTS  
FISCAL YEAR 2021**

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
002340	7/9/2020	CONVERGENCE, 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 & P	13,040.57	CONDENSATE PUMPS		
002343	7/17/2020	MIZUHO ORTHOPEDIC SYSTEMS, INC	51,063.00	OSI RADIO LUCENT OR TABLE		
002344	7/23/2020	CONMED LINVATEC	39,382.76	CONMED POWER SYSTEM		
002345	7/23/2020	OLYMPUS AMERICA INC	23,822.12	LONG CYSTOSCOPY RESECTION TRAY		
<b>JULY TOTALS</b>					<b>144,252.23</b>	<b>144,252.23</b>

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
002346	8/6/2020	MOPEC INC	6,568.97	BODY TRAYS-MORGUE		
002347	8/6/2020	MAGNUM MOBILE SPECIALTY VEHICL	91,770.00	MOBILE LAB, CLINIC, SWABBING STATION - 37 FT		
002348	8/14/2020	CONVERGENCE, INC.	8,194.00	CISCO VOIP PHONE LICENSES (30)		
002348	8/14/2020	CONVERGENCE, 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	7,810.00	CONMED POWER SYSTEM		
002352	8/18/2020	INNOVATION WIRELESS	685.00	SYNCHRONIZED CLOCKS		
002353	8/27/2020	OLYMPUS AMERICA INC.-LIFESCIENCE	10,217.18	MICROSCOPE		
<b>AUGUST TOTALS</b>					<b>169,900.75</b>	<b>314,152.98</b>

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	CONVERGENCE, INC.	430.95	LONG CYSTOSCOPY RESECTION TRAY		
002348	9/25/2020	CONVERGENCE, INC.	61,337.50	MOBILE LAB, CLINIC SWABBING STATION - 26 FOOT - 5110		
<b>SEPTEMBER TOTALS</b>					<b>81,148.36</b>	<b>395,301.34</b>

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	103,320.64	SKYTRON MODEL 3200 DISINFECTION ROBOT		
<b>OCTOBER TOTALS</b>					<b>726,251.25</b>	<b>1,121,552.59</b>



CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
002371	11/2/2020	SYNTHES LTD	11,598.50	LCP MINI PRAG SYSTEM		
002372	11/5/2020	CEPHEID	183,530.98	CEPHEID GENEXPERT MOLECULAR TESTING PLATFORM		
002373	11/5/2020	CERNER CORPORATION	99,193.32	CERNER		
002375	11/5/2020	MAGNUM MOBILE SPECIALTY VEHICL	170,430.00	MOBILE LAB, CLINIC, SWABBING STATION - 37 FT		
002376	11/5/2020	MAGNUM MOBILE SPECIALTY VEHICL	114,762.50	MOBILE LAB, CLINIC, SWABBING STATION - 26 FT		
002377	11/12/2020	CACHE VALLEY ELECTRIC CO.	17,938.25	BOILER HOUSE FIBER OPTIC		
002378	11/12/2020	CERNER CORPORATION	104,421.95	CERNER		
002379	11/12/2020	CHAVEZ CONCRETE	10,050.00	CONCRETE - ED ENTRANCE AND 3000 COLLEGE		
002380	11/12/2020	KRONOS INCORPORATED	6,030.00	KRONOS UPGRADE		
002381	11/18/2020	BIOFIRE DIAGNOSTICS, LLC	45,000.00	BIOFIRE TORCH SYSTEM MODULE (2)		
002382	11/18/2020	CERNER CORPORATION	104,421.95	CERNER		
002383	11/18/2020	FISHER HEALTHCARE	7,519.87	URINE CHEMISTRY ANALYZER - WALK-IN		
002384	11/25/2020	DELL COMPUTER CORPORATION	25,000.00	LAPTOPS (25)		
002385	11/25/2020	LUMENIS, INC.	200,900.01	LUMENIS MOSES PULSED HOLMIUM LASER		
002386	11/25/2020	NATUS MEDICAL INC	36,686.00	EMG 951		
NOVEMBER TOTALS					#####	2,259,035.92

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
002391	12/1/2020	SYSMEX AMERICA INC.	79,883.31	SYSMEX UN 2000 ANALYZER - WALK-IN		
002392	12/1/2020	SYSMEX AMERICA INC.	12,291.00	SYSMEX UN 2000 WAGON		
002393	12/2/2020	CARDINAL HEALTH/V.MUELLER	48,451.00	BD PHOENIX M50 SYSTEM INSTRUMENT		
002394	12/2/2020	CARDINAL HEALTH/V.MUELLER	244,250.00	BD BRUKER MALDI SIRIUS		
002395	12/9/2020	PHILIPS HEALTHCARE	15,892.22	PHILIPS V60 PLUS VENTILATOR		
002396	12/10/2020	SKYTRON	73,378.78	DISINFECTANT ROBOT		
002397	12/10/2020	CERNER CORPORATION	106,234.00	CERNER		
002398	12/10/2020	QUALITY BUILDERS, INC.	5,000.00	REPLACEMENT GROUNDS BUILDING		
002399	12/14/2020	MCKESSON MEDICAL-SURGICAL	77,367.00	HEMATOLOGY ANALYZER SYSMEX XN 1000 - WALK-IN		
002400	12/14/2020	QUALITY BUILDERS, INC.	17,483.00	REPLACE CONCRETE		
002401	12/17/2020	FISHER HEALTHCARE	219.70	THERMOFISHER REFRIGERATOR		
002402	12/17/2020	NATUS MEDICAL INC	47,851.40	NATUS EEG MACHINE		
002403	12/23/2020	CERNER CORPORATION	104,421.95	CERNER		
DECEMBER TOTALS					832,723.36	3,091,759.28

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
002404	1/7/2021	KRONOS INCORPORATED	6,920.00	KRONOS UPGRADE		
002405	1/22/2021	QUADRAMED CORPORATION	15,256.01	LINKUS SERVER		
002406	1/22/2021	SYSCO INTERMOUNTAIN FOOD	3,179.28	FREEZER, SANDWICH FRIDGE & HOT SERVING TABLE		
002408	1/25/2021	ARJO INC.	36,000.00	PRONING BED		
002409	1/28/2021	FISHER HEALTHCARE	13,591.12	WALK IN REFRIGERATOR/FREEZER		
002410	1/28/2021	KRONOS INCORPORATED	12,279.78	UPGRADE TIMECLOCKS		
002411	1/28/2021	SYSCO INTERMOUNTAIN FOOD	38,102.27	FOOD SERVICE LINE		
JANUARY TOTALS					125,328.46	3,217,087.74

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
002412	2/10/2021	VAPOTHERM INC.	31,285.00	VAPOTHERM DEVICES		
002413	2/18/2021	VERATHON MEDICAL	7,095.00	VERATHON BLADDER SCANNER		
002414	2/18/2021	ROBERT I MERRILL COMPANY	6,193.00	PHARMACY DOORS		
002415	2/25/2021	CERNER CORPORATION	104,421.95	CERNER CORPORATION		
002416	2/25/2021	DATX-OHMEIDA, INC.	7,412.50	WIRELESS FETAL MONITOR SYSTEM		
002417	2/25/2021	FISHER HEALTHCARE	10,112.85	-80 DEGREE FREEZER		
002418	2/25/2021	L&S FENCING (Louis Stanton, Sr.)	13,526.28	CHAIN LINK FENCE AROUND COOLING TOWER		
FEBRUARY TOTALS					180,046.58	3,397,134.32

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
002419	3/11/2021	CERNER CORPORATION	105,997.11	CERNER CORPORATION		
002420	3/18/2021	WASATCH CONTROLS (HARRIS ACQUIR	58,929.00	PHARMACY RENO		
002421	3/25/2021	DELL COMPUTER CORPORATION	41,090.06	LAPTOPS		
<b>MARCH TOTALS</b>					<b>206,016.17</b>	<b>3,603,150.49</b>

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
002422	4/8/2021	CERNER CORPORATION	104,421.95	CERNER CORPORATION		
002423	4/14/2021	FLOORING PROFESSIONALS INC	2,427.50	PHARMACY COMPOUNDING AREA		
002424	4/21/2021	AVANTE HEALTH SOLUTIONS(PACIFIC	18,900.00	ULTRASOUND TRANSDUCERS		
002425	4/29/2021	ENTRY SYSTEMS INC.	6,924.00	PHARMACY DOORS		
<b>APRIL TOTALS</b>					<b>132,673.45</b>	<b>3,735,823.94</b>

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
002426	5/13/2021	CERNER CORPORATION	108,657.62	CERNER CORPORATION		
002427	5/20/2021	P3 CONSULTING LLC	13,760.00	HMM/HTMLS		
002428	5/27/2021	CDW GOVERNMENT LLC	234.20	E-SIGNATURE IPADS FOR CERNER		
002429	5/27/2021	KARL STORZ ENDOSCOPY-AMERICA	21,268.70	KARL STORZ UROLOGY FLEXIBLE DIGITAL CYSTOSCOPE		
002430	5/27/2021	OLYMPUS AMERICA INC	5,829.98	UROLOGY FLEXIBLE SCOPE		
002431	5/27/2021	STRYKER ENDOSCOPY	20,947.16	BR GURNEYS		
002432	5/27/2021	WALL CONTRACTORS, INC.	2,620.00	CONCRETE, SEAL AND REPLACE ASPHALT		
<b>MAY TOTALS</b>					<b>173,317.66</b>	<b>3,909,141.60</b>

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

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

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		
<b>AUGUST TOTALS</b>					<b>339,286.60</b>	<b>611,941.14</b>

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		
<b>SEPTEMBER TOTALS</b>					<b>595,027.90</b>	<b>1,206,969.04</b>

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		
<b>OCTOBER TOTALS</b>					<b>587,193.98</b>	<b>1,794,163.02</b>

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
001077	11/12/2020	B H INC.	58,977.75	LAB EXPANSION		
W/T	11/17/2020	WELLS FARGO	111,613.90	WF DEBT SERVICE		
<b>NOVEMBER TOTALS</b>					<b>170,591.65</b>	<b>1,964,754.67</b>

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
001078	12/2/2020	ST+B ENGINEERING (SPACEK TI	63,750.45	HVAC UPGRADE		
001079	12/2/2020	ST+B ENGINEERING (SPACEK TI	7,906.88	HVAC UPGRADE		
001080	12/2/2020	GROATHOUSE CONSTRUCTION,	141,553.00	HVAC UPGRADE		
001081	12/3/2020	B H INC.	115,884.92	CENTRAL PLANT UPGRADE		
001082	12/10/2020	PLAN ONE/ARCHITECTS	30,406.25	HVAC UPGRADE		
001083	12/14/2020	GROATHOUSE CONSTRUCTION,	1,779,859.00	HVAC UPGRADE		
W/T	12/31/2020	WELLS FARGO	111,613.90	WF DEBT SERVICE		
<b>DECEMBER TOTALS</b>					<b>2,250,974.00</b>	<b>4,215,729.07</b>

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
001085	1/7/2021	PLAN ONE/ARCHITECTS	126,842.96	HVAC UPGRADE		
001086	1/14/2021	GROATHOUSE CONSTRUCTION,	213,490.00	HVAC UPGRADE		
001087	1/28/2021	CACHE VALLEY ELECTRIC CO.	3,101.83	HVAC UPGRADE		
W/T	1/19/2021	WF DEBT SERVICE	111,613.90	WF DEBT SERVICE		
<b>JANUARY TOTALS</b>					<b>455,048.69</b>	<b>4,670,777.76</b>

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
001088	2/10/2021	PLAN ONE/ARCHITECTS	31,275.00	LAB EXPANSION		
001088	2/10/2021	PLAN ONE/ARCHITECTS	15,749.50	MEDICAL IMAGING RENO		
001089	2/18/2021	GROATHOUSE CONSTRUCTION,	16,203.00	HVAC UPGRADE		
001090	2/18/2021	ST+B ENGINEERING (SPACEK TI	67,856.64	CENTRAL PLANT UPGRADE		
001091	2/18/2021	GROATHOUSE CONSTRUCTION,	145,831.00	HVAC UPGRADE		
001092	2/25/2021	INSULATION INC.	2,070.40	LAB EXPANSION		
W/T	2/17/2021	WF DEBT SERVICE	111,613.90	WF DEBT SERVICE		
<b>FEBRUARY TOTALS</b>					<b>390,599.44</b>	<b>5,061,377.20</b>

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
001093	3/11/2021	INSULATION INC.	3,444.40	LAB EXPANSION		
001094	3/11/2021	PLAN ONE/ARCHITECTS	15,637.50	LAB EXPANSION		
001094	3/11/2021	PLAN ONE/ARCHITECTS	118,879.60	MEDICAL IMAGING RENO		
001096	3/18/2021	GROATHOUSE CONSTRUCTION,	25,390.00	HVAC UPGRADE		
001097	3/25/2021	GROATHOUSE CONSTRUCTION,	203,401.00	HVAC UPGRADE		
001098	3/25/2021	ST+B ENGINEERING (SPACEK TI	5,100.00	HVAC UPGRADE		
001099	3/25/2021	GROATHOUSE CONSTRUCTION,	22,601.00	HVAC UPGRADE		
W/T	3/16/2021	WF DEBT SERVICE	111,433.37	WF DEBT SERVICE		
MARCH TOTALS					505,886.87	5,567,264.07

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
001100	4/8/2021	PLAN ONE/ARCHITECTS	11,967.64	MEDICAL IMAGING RENO		
001100	4/8/2021	PLAN ONE/ARCHITECTS	17,547.54	LAB EXPANSION		
001101	4/14/2021	B H INC.	79,954.68	CENTRAL PLANT		
001102	4/29/2021	GROATHOUSE CONSTRUCTION,	271,725.00	HVAC UPGRADE		
001103	4/29/2021	GROATHOUSE CONSTRUCTION,	30,191.00	HVAC UPGRADE RETAINAGE		
W/T	4/15/2021	WF DEBT SERVICE	111,433.37	WF DEBT SERVICE		
APRIL TOTALS					522,819.23	6,090,083.30

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
001104	5/6/2021	INSULATION INC.	11,773.44	HVAC UPGRADE		
001105	5/13/2021	A & B HOME IMPROVEMENTS	49,750.00	PHARMACY RENO		
001106	5/13/2021	PLAN ONE/ARCHITECTS	11,024.66	MEDICAL IMAGING RENO		
001107	5/13/2021	ST+B ENGINEERING (SPACEK TI	37,962.78	HVAC UPGRADE		
W/T	5/18/2021	WF DEBT SERVICE	111,433.37	WF DEBT SERVICE		
MAY TOTALS					221,944.25	6,312,027.55

MEMORIAL HOSPITAL OF SWEETWATER COUNTY  
GENERAL FUND DISBURSEMENTS  
5/31/21

Amount	Description
30,714.55	Advertising Total
11,046.24	Billing Services Total
13,938.57	Blood Total
3,500.00	Building Lease Total
1,000.77	Collection Agency Total
1,947.55	Computer Equipment Total
154,502.91	Consulting Fees Total
732,601.19	Contract Maintenance Total
315,683.12	Contract Personnel Total
827.00	Courier Services Total
34,574.80	Dental Insurance Total
10,178.79	Dialysis Supplies Total
4,942.50	Education & Travel Total
481.00	Education Material Total
2,511.00	Employee Recruitment Total
66,311.37	Equipment Lease Total
39,971.80	Food Total
8,162.61	Freight Total
397.62	Fuel Total
5,570.85	Garbage Collection Total
590,549.26	Group Health Total
147.35	Guest Relation Total
275,670.05	Hospital Supplies Total
14,839.08	Implant Supplies Total
2,665.00	Insurance Premiums Total
135,643.11	Insurance Refund Total
10.00	Internet Services Total
238,690.12	Laboratory Supplies Total
7,488.62	Laundry Supplies Total
4,512.50	Legal Fees Total
4,840.00	License & Taxes Total
181.44	Linen Total
12,400.00	Lithotripsy Service Total
62,704.75	Maintenance & Repair Total
28,490.84	Maintenance Supplies Total
1,040.17	MHSC Foundation Total
5,621.11	Minor Equipment Total
8,005.53	Non Medical Supplies Total
11,399.93	Office Supplies Total
3,370.00	Other Employee Benefits Total
5,796.18	Other Purchased Services Total
9,539.13	Oxygen Rental Total
24,305.30	Patient Refund Total
141.75	Payroll Deduction Total
6,843.27	Payroll Garnishment Total
3,200,000.00	Payroll Transfer Total
20.50	Petty Cash Total

[illegible][illegible]



MEMORIAL HOSPITAL OF SWEETWATER COUNTY  
GENERAL FUND DISBURSEMENTS  
5/31/21

Check Number	Date	Vendor Check Name	Amount	Description
178912	5/20/2021	ALL WORLD PROMOTIONS	2,992.50	Advertising
178917	5/20/2021	BEST VERSION MEDIA LLC	387.20	Advertising
178764	5/13/2021	BIG THICKET BROADCASTING	3,189.00	Advertising
178979	5/20/2021	PIO.COM, INC	12,993.20	Advertising
178836	5/13/2021	ROCKET MINER	1,000.00	Advertising
178693	5/6/2021	ROYAL FLUSH ADVERTISING	956.00	Advertising
178850	5/13/2021	THE RADIO NETWORK	2,916.65	Advertising
179251	5/27/2021	SWEETWATER NOW, LLC	3,700.00	Advertising
EFT000000006713	5/6/2021	LAMAR ADVERTISING	700.00	Advertising
EFT000000006730	5/13/2021	LAMAR ADVERTISING	400.00	Advertising
EFT000000006734	5/13/2021	ROCK SPRINGS SWEETWATER COUNTY AIRPORT	280.00	Advertising
EFT000000006768	5/27/2021	LAMAR ADVERTISING	1,200.00	Advertising
178938	5/20/2021	EXPRESS MEDICAID BILLING SERV	2,653.99	Billing Services
179007	5/20/2021	TRUE COMMERCE, INC	107.25	Billing Services
178712	5/6/2021	UNITED AUDIT SYSTEMS, INC.	7,040.00	Billing Services
179009	5/20/2021	UNITED AUDIT SYSTEMS, INC.	1,245.00	Billing Services
178858	5/13/2021	VITALANT	7,147.66	Blood
179261	5/27/2021	VITALANT	6,790.91	Blood
179180	5/27/2021	CURRENT PROPERTIES, LLC	3,500.00	Building Lease
178777	5/13/2021	COLLECTION PROFESSIONALS, INC	1,000.77	Collection Agency
178618	5/6/2021	CDW GOVERNMENT LLC	1,071.15	Computer Equipment
178924	5/20/2021	CDW GOVERNMENT LLC	876.40	Computer Equipment
179167	5/27/2021	CDW GOVERNMENT LLC	6,284.71	Computer Equipment
178954	5/20/2021	HOMWOOD SUITES	399.84	Consulting Fees
178842	5/13/2021	ST+B ENGINEERING	48,080.62	Consulting Fees
179010	5/20/2021	UNIVERSITY OF UTAH (UJHC OUTREACH)	99,148.46	Consulting Fees
178861	5/13/2021	WOODARD & CURRIAN INC.	589.28	Consulting Fees
178909	5/20/2021	ABILITY NETWORK INC	1,652.62	Contract Maintenance
178772	5/13/2021	CAREFUSION 211, INC.	7,556.30	Contract Maintenance
178623	5/6/2021	CLINICAL COMPUTER SYSTEM INC.	58,912.00	Contract Maintenance
178624	5/6/2021	CLOUDLI COMMUNICATIONS INC.	80.46	Contract Maintenance
178926	5/20/2021	CLOUDLI COMMUNICATIONS INC.	70.24	Contract Maintenance
178627	5/6/2021	CONVERGEONE, INC.	8,413.20	Contract Maintenance
178779	5/13/2021	CONVERGEONE, INC.	72,642.57	Contract Maintenance
178773	5/13/2021	CSG, LLC	631.35	Contract Maintenance
178793	5/13/2021	FIGMD, INC.	16,800.00	Contract Maintenance
178803	5/13/2021	ICONTRACTS	401.00	Contract Maintenance
178651	5/6/2021	JIM LANE	3,410.00	Contract Maintenance
178682	5/6/2021	NUANCE COMMUNICATIONS, INC	208.33	Contract Maintenance
178684	5/6/2021	ONESOURCE DOCUMENT MANAGEMENT SERVICES	3,150.00	Contract Maintenance
178827	5/13/2021	PHILIPS HEALTHCARE	1,133.00	Contract Maintenance
178977	5/20/2021	PHILIPS HEALTHCARE	899.61	Contract Maintenance
178980	5/20/2021	PROVIDER ADVANTAGE HW INC	1,140.00	Contract Maintenance
178982	5/20/2021	RED ROCKS MEDICAL, LLC	41,754.00	Contract Maintenance
178695	5/6/2021	SCORPION HEALTHCARE LLC	2,849.00	Contract Maintenance
178838	5/13/2021	SCORPION HEALTHCARE LLC	5,029.98	Contract Maintenance
178987	5/20/2021	SECHRIST TECHNOLOGY GROUP	1,024.00	Contract Maintenance
178698	5/6/2021	SIEMENS MEDICAL SOLUTIONS USA	2,875.42	Contract Maintenance

MEMORIAL HOSPITAL OF SWEETWATER COUNTY  
GENERAL FUND DISBURSEMENTS  
5/31/21

178988	5/20/2021	SIEMENS MEDICAL SOLUTIONS USA	9,543.33	Contract Maintenance
178713	5/6/2021	UNLIMITED TECHNOLOGY SYSTEMS, LLC	44,534.00	Contract Maintenance
179012	5/20/2021	VARIAN MEDICAL SYSTEMS, INC	350,876.00	Contract Maintenance
178718	5/6/2021	WASATCH CONTROLS	1,850.00	Contract Maintenance
178721	5/6/2021	WYODATA SECURITY INC.	3,285.00	Contract Maintenance
179015	5/20/2021	WYODATA SECURITY INC.	1,700.00	Contract Maintenance
179016	5/20/2021	WYOMING CANCER SURVEILLANCE	2,600.00	Contract Maintenance
179150	5/27/2021	AMERICAN TELEMEDICINE CONNECT CONSORTIUM, INC.	4,087.79	Contract Maintenance
179169	5/27/2021	CHANGE HEALTHCARE SOLUTIONS, LLC	4,005.94	Contract Maintenance
179200	5/27/2021	GE HEALTHCARE	23,378.08	Contract Maintenance
179205	5/27/2021	HARMONY HEALTHCARE IT	7,727.00	Contract Maintenance
179212	5/27/2021	ISI WATER CHEMISTRIES	2,399.95	Contract Maintenance
179239	5/27/2021	QUADRAMED	438.75	Contract Maintenance
EFT00000006714	5/6/2021	MERGE HEALTHCARE SOLUTIONS, INC	9,240.00	Contract Maintenance
EFT00000006724	5/13/2021	ARRENDALE ASSOCIATES, INC	1,435.00	Contract Maintenance
EFT00000006737	5/13/2021	STATE FIRE DC SPECIALTIES	1,903.75	Contract Maintenance
EFT00000006755	5/20/2021	STATE FIRE DC SPECIALTIES	11,931.80	Contract Maintenance
W/T	5/10/2021	SIEMENS EDI	9,017.12	Contract Maintenance
W/T	5/28/2021	CLINIC PHREESIA FEES	5,985.15	Contract Maintenance
W/T	5/20/2021	TRIZETTO FEE	5,319.20	Contract Maintenance
W/T	5/5/2021	ZENITH	350.35	Contract Maintenance
W/T	5/25/2021	CARE CLOUD	349.00	Contract Maintenance
W/T	5/18/2021	CIRKHO PHREESIA FEE	10.30	Contract Maintenance
178782	5/13/2021	CORE MEDICAL GROUP	8,350.00	Contract Personnel
178932	5/20/2021	CORE MEDICAL GROUP	8,350.00	Contract Personnel
178634	5/6/2021	ELWOOD STAFFING SERVICES, INC	2,769.38	Contract Personnel
178936	5/20/2021	ELWOOD STAFFING SERVICES, INC	2,967.15	Contract Personnel
178639	5/6/2021	FOCUSONE SOLUTIONS LLC	63,292.82	Contract Personnel
178795	5/13/2021	FOCUSONE SOLUTIONS LLC	68,876.89	Contract Personnel
178943	5/20/2021	FOCUSONE SOLUTIONS LLC	59,292.52	Contract Personnel
178663	5/6/2021	LARRY D. MACY	1,050.00	Contract Personnel
178972	5/20/2021	NURSE ASSIST INC	660.00	Contract Personnel
178694	5/6/2021	SARAH ROTH	300.00	Contract Personnel
178986	5/20/2021	SARAH ROTH	210.00	Contract Personnel
178701	5/6/2021	SOLJANT HEALTH	8,497.50	Contract Personnel
178840	5/13/2021	SOLJANT HEALTH	8,896.63	Contract Personnel
178891	5/20/2021	SOLJANT HEALTH	7,208.20	Contract Personnel
179175	5/27/2021	CORE MEDICAL GROUP	8,350.00	Contract Personnel
179188	5/27/2021	ELWOOD STAFFING SERVICES, INC	3,027.51	Contract Personnel
179198	5/27/2021	FOCUSONE SOLUTIONS LLC	63,504.52	Contract Personnel
178621	5/6/2021	CITY CAB	35.00	Courier Services
179234	5/27/2021	PACKAGERUNNER LOGISTICS LLC	792.00	Courier Services
178788	5/13/2021	DELTA DENTAL	34,574.80	Dental Insurance
178640	5/6/2021	FRESENIUS USA MARKETING, INC.	1,072.94	Dialysis Supplies
178945	5/20/2021	FRESENIUS USA MARKETING, INC.	2,491.06	Dialysis Supplies
178800	5/13/2021	HENRY SCHEIN INC	468.17	Dialysis Supplies
179199	5/27/2021	FRESENIUS USA MARKETING, INC.	3,437.16	Dialysis Supplies
179207	5/27/2021	HENRY SCHEIN INC	522.31	Dialysis Supplies
EFT00000006711	5/6/2021	HENRY SCHEIN INC	678.50	Dialysis Supplies

MEMORIAL HOSPITAL OF SWEETWATER COUNTY  
GENERAL FUND DISBURSEMENTS  
5/31/21

EFT000000006766	5/27/2021	HENRY SCHEIN INC	1,508.57	Dialysis Supplies
178930	5/20/2021	COPEZTHRIVE, LLC	582.50	Education & Travel
178950	5/20/2021	H-ISAC (HEALTH-ISAC, INC.)	1,200.00	Education & Travel
178802	5/13/2021	HSM ENTERPRISES	2,065.00	Education & Travel
178688	5/6/2021	PRONTO INTERNATIONAL	630.00	Education & Travel
179208	5/27/2021	HFMA	445.00	Education & Travel
EFT000000006715	5/6/2021	MY EDUCATIONAL RESOURCES	435.00	Education Material
EFT000000006770	5/27/2021	MY EDUCATIONAL RESOURCES	46.00	Education Material
178620	5/6/2021	CHRISTIE NIELSON	83.50	Employee Recruitment
178646	5/6/2021	HOLIDAY INN - ROCK SPRINGS	595.00	Employee Recruitment
178648	5/6/2021	INSIGHT INVESTIGATIONS, INC	792.50	Employee Recruitment
EFT000000006736	5/13/2021	SST TESTING +, INC.	1,040.00	Employee Recruitment
178781	5/13/2021	COPIER & SUPPLY COMPANY	692.67	Equipment Lease
178931	5/20/2021	COPIER & SUPPLY COMPANY	359.86	Equipment Lease
178642	5/6/2021	GE HEALTHCARE FINANCIAL SERVICES	10,692.03	Equipment Lease
178947	5/20/2021	GE HEALTHCARE FINANCIAL SERVICES	10,692.03	Equipment Lease
178978	5/20/2021	PITNEY BOWES GLOBAL FINANCIAL SERVICES, LLC	1,149.48	Equipment Lease
178856	5/13/2021	US BANK EQUIPMENT FINANCE	1,812.65	Equipment Lease
179165	5/27/2021	CAREFUSION SOLUTIONS, LLC	21,095.00	Equipment Lease
179174	5/27/2021	COPIER & SUPPLY COMPANY	10,613.45	Equipment Lease
179195	5/27/2021	FIRST FINANCIAL HOLDINGS, LLC	7,248.00	Equipment Lease
179258	5/27/2021	US BANK EQUIPMENT FINANCE	1,956.20	Equipment Lease
178630	5/6/2021	DFA DAIRY BRANDS CORP., LLC	276.87	Food
178787	5/13/2021	DFA DAIRY BRANDS CORP., LLC	188.00	Food
178934	5/20/2021	DFA DAIRY BRANDS CORP., LLC	181.28	Food
178637	5/6/2021	F B MCFADDEN WHOLESale	2,651.55	Food
178792	5/13/2021	F B MCFADDEN WHOLESale	2,245.05	Food
178940	5/20/2021	F B MCFADDEN WHOLESale	1,024.00	Food
178636	5/6/2021	FARMER BROS CO	233.50	Food
178939	5/20/2021	FARMER BROS CO	190.43	Food
178681	5/6/2021	NICHOLAS & CO INC	2,856.00	Food
178824	5/13/2021	NICHOLAS & CO INC	4,631.75	Food
178971	5/20/2021	NICHOLAS & CO INC	140.46	Food
178706	5/6/2021	SYSCO INTERMOUNTAIN FOOD	3,625.18	Food
178948	5/13/2021	SYSCO INTERMOUNTAIN FOOD	1,336.34	Food
179002	5/20/2021	SYSCO INTERMOUNTAIN FOOD	1,720.70	Food
178720	5/6/2021	WESTERN WYOMING BEVERAGES INC	693.50	Food
178860	5/13/2021	WESTERN WYOMING BEVERAGES INC	580.90	Food
179013	5/20/2021	WESTERN WYOMING BEVERAGES INC	718.30	Food
178182	5/27/2021	DFA DAIRY BRANDS CORP., LLC	163.11	Food
179193	5/27/2021	F B MCFADDEN WHOLESale	3,933.80	Food
179191	5/27/2021	FARMER BROS CO	286.14	Food
179229	5/27/2021	NICHOLAS & CO INC	6,276.56	Food
179253	5/27/2021	SYSCO INTERMOUNTAIN FOOD	3,735.80	Food
179264	5/27/2021	WESTERN WYOMING BEVERAGES INC	664.58	Food
EFT000000006709	5/6/2021	COCA-COLA BOTTLING COMPANY HIGH COUNTRY	575.00	Food
EFT000000006726	5/13/2021	COCA-COLA BOTTLING COMPANY HIGH COUNTRY	270.00	Food
EFT000000006747	5/20/2021	COCA-COLA BOTTLING COMPANY HIGH COUNTRY	468.00	Food
EFT000000006763	5/27/2021	COCA-COLA BOTTLING COMPANY HIGH COUNTRY	305.00	Food

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179006	5/20/2021	TRIOSE, INC	8,102.62	Freight
178714	5/6/2021	UPS STORE	50.00	Freight
179011	5/20/2021	UPS STORE	9.99	Freight
178832	5/13/2021	RED HORSE OIL COMPANIES INC	397.62	Fuel
EF1000000006720	5/6/2021	WWS - ROCK SPRINGS	2,955.26	Garbage Collection
EF1000000006740	5/13/2021	WWS - ROCK SPRINGS	2,615.59	Garbage Collection
W/T	5/7/2021	BLUE CROSS BLUE SHIELD 4/30/21	169,184.05	Group Health
W/T	5/14/2021	BLUE CROSS BLUE SHIELD 5/7/21	162,936.53	Group Health
W/T	5/21/2021	BLUE CROSS BLUE SHIELD 5/14/21	143,762.80	Group Health
W/T	5/28/2021	BLUE CROSS BLUE SHIELD 5/21/21	107,544.68	Group Health
W/T	5/28/2021	FURTHER FLEX 5/26/21	2,841.04	Group Health
W/T	5/21/2021	FURTHER FLEX 5/19/21	2,143.14	Group Health
W/T	5/14/2021	FURTHER FLEX 5/12/21	1,034.18	Group Health
W/T	5/7/2021	FURTHER FLEX 5/5/21	933.84	Group Health
W/T	5/24/2021	FURTHER FLEX ADM FEE	169.00	Group Health
178951	5/20/2021	GUEST RELATION	147.35	Guest Relation
178985	5/20/2021	ABBOTT NUTRITION	102.99	Hospital Supplies
178600	5/6/2021	APPLIED MEDICAL	1,188.00	Hospital Supplies
178759	5/13/2021	APPLIED MEDICAL	432.00	Hospital Supplies
178601	5/6/2021	ARMSTRONG MEDICAL INDUSTRIES	160.00	Hospital Supplies
178608	5/6/2021	B BRAUN MEDICAL INC.	1,811.84	Hospital Supplies
178762	5/13/2021	B BRAUN MEDICAL INC.	574.08	Hospital Supplies
178816	5/20/2021	B BRAUN MEDICAL INC.	1,254.08	Hospital Supplies
178605	5/6/2021	BARD PERIPHERAL VASCULAR INC	1,912.05	Hospital Supplies
178914	5/20/2021	BARD PERIPHERAL VASCULAR INC	1,912.05	Hospital Supplies
178606	5/6/2021	BAXTER HEALTHCARE CORP/IV	841.68	Hospital Supplies
178915	5/20/2021	BAXTER HEALTHCARE CORP/IV	840.84	Hospital Supplies
178607	5/6/2021	BAYER HEALTHCARE LLC	787.53	Hospital Supplies
178761	5/13/2021	BAYER HEALTHCARE LLC	2,085.61	Hospital Supplies
178763	5/13/2021	BECTON DICKINSON	157.20	Hospital Supplies
178609	5/6/2021	BIOMET SPORTS MEDICINE	120.00	Hospital Supplies
178765	5/13/2021	BIOMET SPORTS MEDICINE	567.00	Hospital Supplies
178611	5/6/2021	BOSTON SCIENTIFIC CORP	2,492.82	Hospital Supplies
178767	5/13/2021	BOSTON SCIENTIFIC CORP	1,207.62	Hospital Supplies
178918	5/20/2021	BOSTON SCIENTIFIC CORP	6,025.40	Hospital Supplies
178629	5/6/2021	C R BARD INC	1,151.85	Hospital Supplies
178628	5/6/2021	C.R. BARD, INC.	217.68	Hospital Supplies
178617	5/6/2021	CARDINAL HEALTH/V. MUELLER	34,587.87	Hospital Supplies
178770	5/13/2021	CARDINAL HEALTH/V. MUELLER	34,344.85	Hospital Supplies
178923	5/20/2021	CARDINAL HEALTH/V. MUELLER	7,654.58	Hospital Supplies
178622	5/6/2021	CIVCO RADIOTHERAPY	1,444.00	Hospital Supplies
178775	5/13/2021	CIVCO RADIOTHERAPY	22,500.00	Hospital Supplies
178927	5/20/2021	COASTAL LIFE SYSTEMS, INC.	637.47	Hospital Supplies
178626	5/6/2021	CONE INSTRUMENTS	67.88	Hospital Supplies
179080	5/20/2021	CONE INSTRUMENTS	512.13	Hospital Supplies
178780	5/13/2021	COOK MEDICAL INCORPORATED	369.60	Hospital Supplies
178929	5/20/2021	COOK MEDICAL INCORPORATED	742.60	Hospital Supplies
178631	5/6/2021	DIAGNOSTICA STAGO INC	171.08	Hospital Supplies
178789	5/13/2021	DIAGNOSTICA STAGO INC	2,005.64	Hospital Supplies



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178632	5/6/2021	EDGE PHARMACEUTICALS, LLC	1,921.39	Hospital Supplies
178635	5/6/2021	EQUASHIELD LLC	1,924.56	Hospital Supplies
178937	5/20/2021	EQUASHIELD LLC	1,852.44	Hospital Supplies
178791	5/13/2021	EXPAND-A-BAND, LLC	66.00	Hospital Supplies
178797	5/13/2021	GENERAL HOSPITAL SUPPLY CORPORATION	257.00	Hospital Supplies
178645	5/6/2021	HEALTHCARE LOGISTICS INC	100.25	Hospital Supplies
178799	5/13/2021	HEALTHCARE LOGISTICS INC	742.99	Hospital Supplies
178952	5/20/2021	HEALTHCARE LOGISTICS INC	1,251.73	Hospital Supplies
178955	5/20/2021	HILL ANESTHESIA INC	180.00	Hospital Supplies
178660	5/6/2021	KARL STORZ ENDOSCOPY-AMERICA	7,630.98	Hospital Supplies
178806	5/13/2021	KARL STORZ ENDOSCOPY-AMERICA	4,995.83	Hospital Supplies
178860	5/20/2021	KARL STORZ ENDOSCOPY-AMERICA	9.50	Hospital Supplies
178846	5/13/2021	LEICA BIOSYSTEMS RICHMOND	270.07	Hospital Supplies
178999	5/20/2021	LEICA BIOSYSTEMS RICHMOND	213.73	Hospital Supplies
178823	5/13/2021	M V A P MEDICAL SUPPLIES, INC.	501.58	Hospital Supplies
178811	5/13/2021	MARKET LAB, INC	2,713.65	Hospital Supplies
178965	5/20/2021	MARKET LAB, INC	342.48	Hospital Supplies
178908	5/19/2021	MCKESSON MEDICAL-SURGICAL	20,356.25	Hospital Supplies
178966	5/20/2021	MCKESSON MEDICAL-SURGICAL	6,212.59	Hospital Supplies
178813	5/13/2021	MEDI-DOSE INCORPORATED	101.13	Hospital Supplies
178674	5/6/2021	MERIT MEDICAL SYSTEMS, INC	836.73	Hospital Supplies
178821	5/13/2021	MINDRAY DS USA, INC.	272.65	Hospital Supplies
178970	5/20/2021	NATUS MEDICAL INC	84.06	Hospital Supplies
178683	5/6/2021	OLYMPUS AMERICA INC	367.06	Hospital Supplies
178825	5/13/2021	OLYMPUS AMERICA INC	1,222.30	Hospital Supplies
178973	5/20/2021	OLYMPUS AMERICA INC	1,950.86	Hospital Supplies
178686	5/6/2021	PERFORMANCE HEALTH SUPPLY INC	540.20	Hospital Supplies
178976	5/20/2021	PERFORMANCE HEALTH SUPPLY INC	372.75	Hospital Supplies
178833	5/13/2021	RESPIRONICS	511.13	Hospital Supplies
178697	5/6/2021	SHIPPERT MEDICAL TECHNOLOGIES	132.00	Hospital Supplies
178841	5/13/2021	SPACELABS MEDICAL	104.44	Hospital Supplies
178703	5/6/2021	STERIS CORPORATION	548.18	Hospital Supplies
178994	5/20/2021	STERIS CORPORATION	530.80	Hospital Supplies
178998	5/20/2021	SUREMARK CO	495.00	Hospital Supplies
178849	5/13/2021	TELEFLEX LLC	660.00	Hospital Supplies
179003	5/20/2021	TELEFLEX LLC	269.66	Hospital Supplies
178851	5/13/2021	TIDI PRODUCTS, LC	510.00	Hospital Supplies
178711	5/6/2021	TRI-ANIM HEALTH SERVICES INC	586.87	Hospital Supplies
178853	5/13/2021	TRI-ANIM HEALTH SERVICES INC	682.06	Hospital Supplies
179005	5/20/2021	TRI-ANIM HEALTH SERVICES INC	87.50	Hospital Supplies
178857	5/13/2021	VITALITY MEDICAL INC	390.10	Hospital Supplies
178719	5/6/2021	WAXIE SANITARY SUPPLY	480.50	Hospital Supplies
178859	5/13/2021	WAXIE SANITARY SUPPLY	409.44	Hospital Supplies
178599	5/6/2021	AMERICAN PHARMA, INC.	570.00	Hospital Supplies
179146	5/27/2021	ABBOTT LABORATORIES	145.54	Hospital Supplies
179148	5/27/2021	AESCULAP INC	972.73	Hospital Supplies
179151	5/27/2021	APPLIED MEDICAL	1,032.00	Hospital Supplies
179153	5/27/2021	ASPEN SURGICAL	385.63	Hospital Supplies
179155	5/27/2021	BARD PERIPHERAL VASCULAR INC	1,155.00	Hospital Supplies

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179156	5/27/2021	BAYER HEALTHCARE LLC	2,093.89	Hospital Supplies
179158	5/27/2021	BECTON DICKINSON	410.20	Hospital Supplies
179160	5/27/2021	BOSTON SCIENTIFIC CORP	3,663.59	Hospital Supplies
179178	5/27/2021	C R BARD INC	381.98	Hospital Supplies
179177	5/27/2021	C.R. BARD, INC.	217.68	Hospital Supplies
179166	5/27/2021	CAREFUSION 211, INC.	84.00	Hospital Supplies
179171	5/27/2021	COASTAL LIFE SYSTEMS, INC.	194.49	Hospital Supplies
179173	5/27/2021	CONE INSTRUMENTS	146.02	Hospital Supplies
179179	5/27/2021	CR BARD, INC	390.00	Hospital Supplies
179184	5/27/2021	DIAGNOSTICA STAGO INC	337.44	Hospital Supplies
179186	5/27/2021	DOCTOR EASY MEDICAL PRODUCTS	82.50	Hospital Supplies
179187	5/27/2021	EDGE PHARMACEUTICALS, LLC	1,403.46	Hospital Supplies
179189	5/27/2021	EQUASHIELD LLC	667.36	Hospital Supplies
179206	5/27/2021	HEALTHCARE LOGISTICS INC	1,178.28	Hospital Supplies
179210	5/27/2021	HULL ANESTHESIA INC	92.50	Hospital Supplies
179228	5/27/2021	M V A P MEDICAL SUPPLIES, INC.	400.00	Hospital Supplies
179215	5/27/2021	MARKET LAB, INC	576.12	Hospital Supplies
179217	5/27/2021	MCKESSON MEDICAL-SURGICAL	1,769.11	Hospital Supplies
179218	5/27/2021	MEDELA LLC	778.65	Hospital Supplies
179219	5/27/2021	MEDI-DOSE INCORPORATED	108.21	Hospital Supplies
179222	5/27/2021	MEDTRONIC, USA	13,782.00	Hospital Supplies
179223	5/27/2021	MERCURY MEDICAL	240.11	Hospital Supplies
179224	5/27/2021	MES	83.30	Hospital Supplies
179231	5/27/2021	OLYMPUS AMERICA INC	1,414.78	Hospital Supplies
179232	5/27/2021	OWENS & MINOR 90005430	24,151.23	Hospital Supplies
179236	5/27/2021	PERFORMANCE HEALTH SUPPLY INC	31.03	Hospital Supplies
179242	5/27/2021	RESPIRONICS	267.00	Hospital Supplies
179245	5/27/2021	SPACELABS MEDICAL	26.44	Hospital Supplies
179249	5/27/2021	STEBBS CORPORATION	2,027.44	Hospital Supplies
179254	5/27/2021	TELEFLEX LLC	312.94	Hospital Supplies
179256	5/27/2021	TRI-ANIM HEALTH SERVICES INC	4,379.93	Hospital Supplies
179269	5/27/2021	WAXIE SANITARY SUPPLY	3,449.20	Hospital Supplies
EFT00000006708	5/6/2021	BREG INC	267.82	Hospital Supplies
EFT00000006710	5/6/2021	HARDY DIAGNOSTICS	1,435.30	Hospital Supplies
EFT00000006717	5/6/2021	OVATION MEDICAL	1,078.80	Hospital Supplies
EFT00000006722	5/13/2021	APPLIED CARDIAC SYSTEM	312.50	Hospital Supplies
EFT00000006729	5/13/2021	HARDY DIAGNOSTICS	1,902.32	Hospital Supplies
EFT00000006738	5/13/2021	STRYKER INSTRUMENTS	1,217.38	Hospital Supplies
EFT00000006741	5/13/2021	ZOLL MEDICAL CORPORATION	1,230.96	Hospital Supplies
EFT00000006745	5/20/2021	BREG INC	302.23	Hospital Supplies
EFT00000006746	5/20/2021	BSN MEDICAL INC	253.62	Hospital Supplies
EFT00000006749	5/20/2021	HARDY DIAGNOSTICS	740.50	Hospital Supplies
EFT00000006750	5/20/2021	MARSHALL INDUSTRIES	271.95	Hospital Supplies
EFT00000006761	5/27/2021	BREG INC	389.30	Hospital Supplies
EFT00000006762	5/27/2021	BSN MEDICAL INC	56.95	Hospital Supplies
EFT00000006765	5/27/2021	HARDY DIAGNOSTICS	866.12	Hospital Supplies
EFT00000006776	5/27/2021	SIEMENS HEALTHCARE DIAGNOSTICS, INC.	144.06	Hospital Supplies
179610	5/6/2021	INOVENTUS LLC	607.48	Implant Supplies
179685	5/6/2021	PARAGON 28 INC.	8,641.60	Implant Supplies



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178710	5/6/2021	TREACE MEDICAL CONCEPTS, INC.	5,590.00	Implant Supplies
178910	5/20/2021	ACUITY, A MUTUAL INSURANCE COMPANY	2,665.00	Insurance Premiums
178883	5/17/2021	INSURANCE REFUND	11.68	Insurance Refund
178726	5/6/2021	INSURANCE REFUND	187.12	Insurance Refund
178903	5/17/2021	INSURANCE REFUND	392.35	Insurance Refund
178902	5/17/2021	INSURANCE REFUND	1,484.00	Insurance Refund
178872	5/17/2021	INSURANCE REFUND	131.81	Insurance Refund
178874	5/17/2021	INSURANCE REFUND	10,077.21	Insurance Refund
178876	5/17/2021	INSURANCE REFUND	38.03	Insurance Refund
178879	5/17/2021	INSURANCE REFUND	4,639.47	Insurance Refund
178881	5/17/2021	INSURANCE REFUND	9,454.77	Insurance Refund
178885	5/17/2021	INSURANCE REFUND	381.90	Insurance Refund
178886	5/17/2021	INSURANCE REFUND	16,177.01	Insurance Refund
178888	5/17/2021	INSURANCE REFUND	10,548.50	Insurance Refund
178889	5/17/2021	INSURANCE REFUND	4,680.91	Insurance Refund
178890	5/17/2021	INSURANCE REFUND	4,028.56	Insurance Refund
178907	5/17/2021	INSURANCE REFUND	4,368.42	Insurance Refund
179022	5/20/2021	INSURANCE REFUND	220.00	Insurance Refund
178868	5/17/2021	INSURANCE REFUND	194.70	Insurance Refund
178865	5/17/2021	INSURANCE REFUND	10,630.15	Insurance Refund
178869	5/17/2021	INSURANCE REFUND	10,214.18	Insurance Refund
178870	5/17/2021	INSURANCE REFUND	109.54	Insurance Refund
178873	5/17/2021	INSURANCE REFUND	10,725.80	Insurance Refund
178880	5/17/2021	INSURANCE REFUND	2,226.03	Insurance Refund
178891	5/17/2021	INSURANCE REFUND	1,047.52	Insurance Refund
178895	5/17/2021	INSURANCE REFUND	108.39	Insurance Refund
178897	5/17/2021	INSURANCE REFUND	5,796.43	Insurance Refund
178898	5/17/2021	INSURANCE REFUND	200.40	Insurance Refund
178904	5/17/2021	INSURANCE REFUND	9,109.04	Insurance Refund
178875	5/17/2021	INSURANCE REFUND	40.09	Insurance Refund
178867	5/17/2021	INSURANCE REFUND	279.80	Insurance Refund
178871	5/17/2021	INSURANCE REFUND	483.40	Insurance Refund
178905	5/17/2021	INSURANCE REFUND	2,139.00	Insurance Refund
178877	5/17/2021	INSURANCE REFUND	512.24	Insurance Refund
178878	5/17/2021	INSURANCE REFUND	244.72	Insurance Refund
179056	5/20/2021	INSURANCE REFUND	182.50	Insurance Refund
178882	5/17/2021	INSURANCE REFUND	792.76	Insurance Refund
178899	5/17/2021	INSURANCE REFUND	43.32	Insurance Refund
179101	5/26/2021	INSURANCE REFUND	1,429.21	Insurance Refund
179126	5/26/2021	INSURANCE REFUND	88.17	Insurance Refund
179079	5/26/2021	INSURANCE REFUND	38.26	Insurance Refund
179142	5/26/2021	INSURANCE REFUND	28.12	Insurance Refund
179269	5/27/2021	INSURANCE REFUND	1,500.00	Insurance Refund
179095	5/26/2021	INSURANCE REFUND	52.25	Insurance Refund
179136	5/26/2021	INSURANCE REFUND	141.01	Insurance Refund
179127	5/26/2021	INSURANCE REFUND	678.11	Insurance Refund
179132	5/26/2021	INSURANCE REFUND	4,254.51	Insurance Refund
179097	5/26/2021	INSURANCE REFUND	448.96	Insurance Refund
179074	5/26/2021	INSURANCE REFUND	107.83	Insurance Refund

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179106	5/26/2021	INSURANCE REFUND	49.64	Insurance Refund
179110	5/26/2021	INSURANCE REFUND	1,001.20	Insurance Refund
179133	5/26/2021	INSURANCE REFUND	3,119.80	Insurance Refund
179117	5/26/2021	INSURANCE REFUND	4.29	Insurance Refund
178724	5/6/2021	WYOMING.COM	10.00	Internet Services
178675	5/6/2021	METABOLIC NEWBORN SCREENING	3,114.24	Laboratory Services
178817	5/13/2021	METABOLIC NEWBORN SCREENING	1,500.00	Laboratory Services
179216	5/27/2021	MAYO COLLABORATIVE SERVICES, INC.	1,041.30	Laboratory Services
EFT00000006760	5/27/2021	ARUP LABORATORIES, INC.	81,883.99	Laboratory Services
178758	5/13/2021	ANAEROBE SYSTEMS	22.90	Laboratory Supplies
178766	5/13/2021	BIOMERIEUX, INC.	8,906.11	Laboratory Supplies
178616	5/6/2021	CARDINAL HEALTH	12,998.29	Laboratory Supplies
178769	5/13/2021	CARDINAL HEALTH	31,339.47	Laboratory Supplies
178922	5/20/2021	CARDINAL HEALTH	1,336.35	Laboratory Supplies
178619	5/6/2021	CEPHEID	5,617.00	Laboratory Supplies
178774	5/13/2021	CEPHEID	12,240.00	Laboratory Supplies
178638	5/6/2021	FISHER HEALTHCARE	4,000.59	Laboratory Supplies
178794	5/13/2021	FISHER HEALTHCARE	479.30	Laboratory Supplies
178942	5/20/2021	FISHER HEALTHCARE	797.90	Laboratory Supplies
178666	5/6/2021	LIFELC TECHNOLOGIES	85.78	Laboratory Supplies
178670	5/6/2021	MEDI BADGE INC.	214.85	Laboratory Supplies
178671	5/6/2021	MEDIVATORS REPROCESSING SYSTEM	91.44	Laboratory Supplies
178967	5/20/2021	MEDIVATORS REPROCESSING SYSTEM	150.00	Laboratory Supplies
178649	5/6/2021	PLATINUM CODE	88.18	Laboratory Supplies
178696	5/6/2021	SERACARE LIFE SCIENCES, INC.	1,337.70	Laboratory Supplies
178997	5/20/2021	STRECK LABORATORIES INC	265.74	Laboratory Supplies
178854	5/13/2021	TYPENEX MEDICAL, LLC	64.00	Laboratory Supplies
179008	5/20/2021	TYPENEX MEDICAL, LLC	203.49	Laboratory Supplies
179157	5/27/2021	BECKMAN COULTER, INC	17.03	Laboratory Supplies
179159	5/27/2021	BIOMERIEUX, INC.	4,505.68	Laboratory Supplies
179162	5/27/2021	CANCER DIAGNOSTICS, INC	93.05	Laboratory Supplies
179163	5/27/2021	CARDINAL HEALTH	49,589.08	Laboratory Supplies
179168	5/27/2021	CEPHEID	2,105.00	Laboratory Supplies
179196	5/27/2021	FISHER HEALTHCARE	4,227.05	Laboratory Supplies
179220	5/27/2021	MEDIVATORS REPROCESSING SYSTEM	91.42	Laboratory Supplies
179225	5/27/2021	MESA LABORATORIES	128.46	Laboratory Supplies
179243	5/27/2021	SIGMA-ALDRICH INC	884.79	Laboratory Supplies
179257	5/27/2021	TYPENEX MEDICAL, LLC	30.60	Laboratory Supplies
EFT00000006707	5/6/2021	BIO-RAD LABORATORIES	2,926.00	Laboratory Supplies
EFT00000006716	5/6/2021	ORTHO-CLINICAL DIAGNOSTICS INC	517.18	Laboratory Supplies
EFT00000006718	5/6/2021	PDC HEALTHCARE	1,043.76	Laboratory Supplies
EFT00000006725	5/13/2021	BIO-RAD LABORATORIES	1,892.44	Laboratory Supplies
EFT00000006744	5/20/2021	BIO-RAD LABORATORIES	889.60	Laboratory Supplies
EFT00000006751	5/20/2021	ORTHO-CLINICAL DIAGNOSTICS INC	966.24	Laboratory Supplies
EFT00000006753	5/20/2021	PDC HEALTHCARE	111.32	Laboratory Supplies
EFT00000006772	5/27/2021	PDC HEALTHCARE	60.60	Laboratory Supplies
EFT00000006777	5/27/2021	SYSMEX AMERICA INC.	830.20	Laboratory Supplies
EFT00000006769	5/27/2021	MARTIN-RAY LAUNDRY SYSTEMS	7,488.62	Laundry Supplies
179237	5/27/2021	PHILLIPS LAW, LLC	4,512.50	Legal Fees

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178862	5/13/2021	WYOMING STATE BOARD OF PHARMACY	340.00	License & Taxes
179260	5/27/2021	U S NUCLEAR REGULATORY COMM	4,500.00	License & Taxes
179246	5/27/2021	STANDARD TEXTILE	181.44	Linen
178723	5/6/2021	WYOMING UROLOGICAL SERVICES, LP	12,400.00	Lithotripsy Service
178603	5/6/2021	AVANTE HEALTH SOLUTIONS	514.99	Maintenance & Repair
178615	5/6/2021	CACHE VALLEY ELECTRIC CO.	15,594.28	Maintenance & Repair
178925	5/20/2021	CLARK'S QUALITY ROOFING, INC	610.00	Maintenance & Repair
178786	5/13/2021	CUMMINS ROCKY MOUNTAIN, LLC	4,547.22	Maintenance & Repair
178790	5/13/2021	ENTRY SYSTEMS INC.	5,524.00	Maintenance & Repair
178804	5/13/2021	ISI WATER CHEMISTRIES	2,315.00	Maintenance & Repair
178654	5/6/2021	JC JACOBS CARPET ONE	358.33	Maintenance & Repair
178805	5/13/2021	JC JACOBS CARPET ONE	3,141.49	Maintenance & Repair
178974	5/20/2021	OVERHEAD DOOR CO.	1,934.07	Maintenance & Repair
178826	5/13/2021	PARTSSOURCE	2,970.25	Maintenance & Repair
178716	5/6/2021	UTAH CONTROLS INC	210.00	Maintenance & Repair
179154	5/27/2021	BADGER DAYLIGHTING CORP	3,405.31	Maintenance & Repair
179181	5/27/2021	DANIEL DORMAN PAINTING	14,300.00	Maintenance & Repair
179197	5/27/2021	FLOORING PROFESSIONALS INC	2,342.38	Maintenance & Repair
179235	5/27/2021	PARTSSOURCE	1,531.99	Maintenance & Repair
179262	5/27/2021	WALL CONTRACTORS, INC.	2,300.00	Maintenance & Repair
EFT00000006727	5/13/2021	COLORADO DOORWAYS, INC	196.00	Maintenance & Repair
EFT00000006757	5/20/2021	WHITE MOUNTAIN LUMBER	909.44	Maintenance & Repair
178757	5/13/2021	ALPINE PURE SOFT WATER	676.20	Maintenance Supplies
178776	5/13/2021	CODALE ELECTRIC SUPPLY, INC	442.00	Maintenance Supplies
178928	5/20/2021	CODALE ELECTRIC SUPPLY, INC	534.54	Maintenance Supplies
178644	5/6/2021	GRAINGER	50.28	Maintenance Supplies
178798	5/13/2021	GRAINGER	161.17	Maintenance Supplies
178949	5/20/2021	GRAINGER	138.72	Maintenance Supplies
178647	5/6/2021	HOME DEPOT	272.94	Maintenance Supplies
178801	5/13/2021	HOME DEPOT	627.39	Maintenance Supplies
178953	5/20/2021	HOME DEPOT	328.29	Maintenance Supplies
178956	5/20/2021	INSULATION INC.	2,315.16	Maintenance Supplies
179172	5/27/2021	CODALE ELECTRIC SUPPLY, INC	807.76	Maintenance Supplies
179192	5/27/2021	FASTENAL COMPANY	39.81	Maintenance Supplies
179203	5/27/2021	GRAINGER	647.74	Maintenance Supplies
179209	5/27/2021	HOME DEPOT	724.85	Maintenance Supplies
EFT00000006705	5/6/2021	ACE HARDWARE	33.42	Maintenance Supplies
EFT00000006719	5/6/2021	ROCK SPRINGS WINNELSON CO	1,244.19	Maintenance Supplies
EFT00000006721	5/13/2021	ACE HARDWARE	108.91	Maintenance Supplies
EFT00000006732	5/13/2021	ROBERT I MERRILL COMPANY	248.00	Maintenance Supplies
EFT00000006733	5/13/2021	ROCK SPRINGS WINNELSON CO	6,375.02	Maintenance Supplies
EFT00000006735	5/13/2021	SHERWIN WILLIAMS CO	165.72	Maintenance Supplies
EFT00000006739	5/13/2021	ULINE, INC	1,026.50	Maintenance Supplies
EFT00000006742	5/20/2021	ACE HARDWARE	19.99	Maintenance Supplies
EFT00000006754	5/20/2021	ROCK SPRINGS WINNELSON CO	47.35	Maintenance Supplies
EFT00000006758	5/27/2021	ACE HARDWARE	11.15	Maintenance Supplies
EFT00000006773	5/27/2021	ROBERT I MERRILL COMPANY	892.00	Maintenance Supplies
EFT00000006774	5/27/2021	ROCK SPRINGS WINNELSON CO	10,551.72	Maintenance Supplies
EFT00000006775	5/27/2021	SHERWIN WILLIAMS CO	236.57	Maintenance Supplies

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178676	5/6/2021	MHSC-FOUNDATION	803.60	MHSC Foundation
178818	5/13/2021	MHSC-FOUNDATION	1,295.56	MHSC Foundation
178778	5/13/2021	COLORID, LLC	304.50	Minor Equipment
178667	5/6/2021	LINCARE INC	2,217.82	Minor Equipment
178839	5/13/2021	SENSONICS, INC	194.31	Minor Equipment
179185	5/27/2021	DIRECT SUPPLY	1,445.00	Minor Equipment
EFT000000006767	5/27/2021	LABORIE MEDICAL TECHNOLOGIES CORP	163.92	Minor Equipment
178933	5/20/2021	CUSTOMIZED COMMUNICATIONS, INC	1,400.00	Non Medical Supplies
178958	5/20/2021	J.J. KELLER & ASSOCIATES, INC.	363.95	Non Medical Supplies
178672	5/6/2021	MEDLINE INDUSTRIES INC	1,118.97	Non Medical Supplies
178814	5/13/2021	MEDLINE INDUSTRIES INC	1,541.97	Non Medical Supplies
178968	5/20/2021	MEDLINE INDUSTRIES INC	322.65	Non Medical Supplies
178989	5/20/2021	SMILEMAKERS	182.83	Non Medical Supplies
179202	5/27/2021	GLOBAL EQUIPMENT COMPANY	789.97	Non Medical Supplies
179221	5/27/2021	MEDLINE INDUSTRIES INC	2,130.08	Non Medical Supplies
179244	5/27/2021	SMILEMAKERS	155.11	Non Medical Supplies
178806	5/13/2021	LABELMATCH	89.95	Office Supplies
178702	5/6/2021	STAPLES BUSINESS ADVANTAGE	1,660.01	Office Supplies
178843	5/13/2021	STAPLES BUSINESS ADVANTAGE	403.24	Office Supplies
179152	5/27/2021	ASI BUSINESS GROUP	3,630.50	Office Supplies
179247	5/27/2021	STANDARD REGISTER COMPANY	474.35	Office Supplies
179248	5/27/2021	STAPLES BUSINESS ADVANTAGE	5,141.88	Office Supplies
178725	5/6/2021	YOUNG AT HEART SENIOR CITIZENS CENTER	1,970.00	Other Employee Benefits
178783	5/13/2021	CORNHANS KETTLE CORN	1,400.00	Other Employee Benefits
178919	5/20/2021	BOY SCOUT TROOP 4	240.00	Other Purchased Services
178944	5/20/2021	FOTOS BY JENNI	178.00	Other Purchased Services
178807	5/13/2021	KAYLEE'S PHOTOGRAPHY & DESIGN	300.00	Other Purchased Services
178665	5/6/2021	QUICK RESPONSE TAXI	198.00	Other Purchased Services
178810	5/13/2021	QUICK RESPONSE TAXI	132.00	Other Purchased Services
178964	5/20/2021	QUICK RESPONSE TAXI	111.00	Other Purchased Services
178993	5/20/2021	STAR TRANSIT	200.00	Other Purchased Services
179147	5/27/2021	ADVANCED MEDICAL REVIEWS, INC	764.33	Other Purchased Services
178214	5/27/2021	QUICK RESPONSE TAXI	107.00	Other Purchased Services
EFT000000006712	5/6/2021	LAGOCIN CORPORATION	3,565.85	Other Purchased Services
EFT000000006706	5/6/2021	AIRGAS INTERMOUNTAIN INC	207.13	Oxygen Rental
EFT000000006723	5/13/2021	AIRGAS INTERMOUNTAIN INC	4,464.35	Oxygen Rental
EFT000000006743	5/20/2021	AIRGAS INTERMOUNTAIN INC	174.63	Oxygen Rental
EFT000000006759	5/27/2021	AIRGAS INTERMOUNTAIN INC	4,693.02	Oxygen Rental
178864	5/17/2021	PATIENT REFUND	85.85	Patient Refund
178727	5/6/2021	PATIENT REFUND	25.00	Patient Refund
178728	5/6/2021	PATIENT REFUND	35.00	Patient Refund
178729	5/6/2021	PATIENT REFUND	10.00	Patient Refund
179018	5/20/2021	PATIENT REFUND	8.40	Patient Refund
178866	5/17/2021	PATIENT REFUND	150.00	Patient Refund
179019	5/20/2021	PATIENT REFUND	25.00	Patient Refund
179020	5/20/2021	PATIENT REFUND	50.00	Patient Refund
179021	5/20/2021	PATIENT REFUND	10.00	Patient Refund
179023	5/20/2021	PATIENT REFUND	25.00	Patient Refund
178730	5/6/2021	PATIENT REFUND	110.00	Patient Refund



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179024	5/20/2021	PATIENT REFUND	130.42	Patient Refund
178731	5/6/2021	PATIENT REFUND	52.00	Patient Refund
179025	5/20/2021	PATIENT REFUND	20.00	Patient Refund
179026	5/20/2021	PATIENT REFUND	25.00	Patient Refund
179027	5/20/2021	PATIENT REFUND	20.00	Patient Refund
179028	5/20/2021	PATIENT REFUND	40.00	Patient Refund
178732	5/6/2021	PATIENT REFUND	160.00	Patient Refund
179029	5/20/2021	PATIENT REFUND	20.00	Patient Refund
179030	5/20/2021	PATIENT REFUND	10.00	Patient Refund
178733	5/6/2021	PATIENT REFUND	25.00	Patient Refund
179031	5/20/2021	PATIENT REFUND	35.00	Patient Refund
179032	5/20/2021	PATIENT REFUND	55.67	Patient Refund
178734	5/6/2021	PATIENT REFUND	377.20	Patient Refund
178735	5/6/2021	PATIENT REFUND	20.00	Patient Refund
178884	5/17/2021	PATIENT REFUND	24.48	Patient Refund
179033	5/20/2021	PATIENT REFUND	27.00	Patient Refund
179034	5/20/2021	PATIENT REFUND	25.00	Patient Refund
179035	5/20/2021	PATIENT REFUND	40.00	Patient Refund
179036	5/20/2021	PATIENT REFUND	35.00	Patient Refund
179037	5/20/2021	PATIENT REFUND	30.00	Patient Refund
179038	5/20/2021	PATIENT REFUND	21.33	Patient Refund
178736	5/6/2021	PATIENT REFUND	95.00	Patient Refund
178737	5/6/2021	PATIENT REFUND	50.00	Patient Refund
179039	5/20/2021	PATIENT REFUND	20.00	Patient Refund
178738	5/6/2021	PATIENT REFUND	20.00	Patient Refund
179040	5/20/2021	PATIENT REFUND	30.00	Patient Refund
179041	5/20/2021	PATIENT REFUND	129.00	Patient Refund
178887	5/17/2021	PATIENT REFUND	654.36	Patient Refund
179042	5/20/2021	PATIENT REFUND	35.00	Patient Refund
178739	5/6/2021	PATIENT REFUND	5.00	Patient Refund
178740	5/6/2021	PATIENT REFUND	15.00	Patient Refund
179043	5/20/2021	PATIENT REFUND	25.00	Patient Refund
179044	5/20/2021	PATIENT REFUND	20.72	Patient Refund
178741	5/6/2021	PATIENT REFUND	20.00	Patient Refund
178892	5/17/2021	PATIENT REFUND	527.06	Patient Refund
178893	5/17/2021	PATIENT REFUND	50.00	Patient Refund
178894	5/17/2021	PATIENT REFUND	37.00	Patient Refund
179045	5/20/2021	PATIENT REFUND	30.00	Patient Refund
179046	5/20/2021	PATIENT REFUND	10.00	Patient Refund
179047	5/20/2021	PATIENT REFUND	116.00	Patient Refund
178742	5/6/2021	PATIENT REFUND	45.00	Patient Refund
178906	5/17/2021	PATIENT REFUND	6.40	Patient Refund
178896	5/17/2021	PATIENT REFUND	314.38	Patient Refund
179048	5/20/2021	PATIENT REFUND	25.00	Patient Refund
178743	5/6/2021	PATIENT REFUND	10.00	Patient Refund
178744	5/6/2021	PATIENT REFUND	35.00	Patient Refund
178745	5/6/2021	PATIENT REFUND	25.00	Patient Refund
179049	5/20/2021	PATIENT REFUND	130.42	Patient Refund
179050	5/20/2021	PATIENT REFUND	25.00	Patient Refund

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179051	5/20/2021	PATIENT REFUND	25.00	Patient Refund
178746	5/6/2021	PATIENT REFUND	111.50	Patient Refund
179052	5/20/2021	PATIENT REFUND	45.00	Patient Refund
179053	5/20/2021	PATIENT REFUND	20.00	Patient Refund
179054	5/20/2021	PATIENT REFUND	35.00	Patient Refund
179055	5/20/2021	PATIENT REFUND	500.00	Patient Refund
178747	5/6/2021	PATIENT REFUND	35.00	Patient Refund
178900	5/17/2021	PATIENT REFUND	684.49	Patient Refund
178901	5/17/2021	PATIENT REFUND	684.49	Patient Refund
179057	5/20/2021	PATIENT REFUND	25.00	Patient Refund
179059	5/20/2021	PATIENT REFUND	40.00	Patient Refund
179058	5/20/2021	PATIENT REFUND	25.00	Patient Refund
179071	5/26/2021	PATIENT REFUND	1,219.85	Patient Refund
179072	5/26/2021	PATIENT REFUND	36.96	Patient Refund
179073	5/26/2021	PATIENT REFUND	11.59	Patient Refund
179075	5/26/2021	PATIENT REFUND	102.95	Patient Refund
179100	5/26/2021	PATIENT REFUND	183.23	Patient Refund
179076	5/26/2021	PATIENT REFUND	97.85	Patient Refund
179078	5/26/2021	PATIENT REFUND	172.64	Patient Refund
179080	5/26/2021	PATIENT REFUND	489.97	Patient Refund
179081	5/26/2021	PATIENT REFUND	347.26	Patient Refund
179082	5/26/2021	PATIENT REFUND	465.53	Patient Refund
179083	5/26/2021	PATIENT REFUND	25.00	Patient Refund
179084	5/26/2021	PATIENT REFUND	10.00	Patient Refund
179085	5/26/2021	PATIENT REFUND	61.92	Patient Refund
179102	5/26/2021	PATIENT REFUND	99.09	Patient Refund
179086	5/26/2021	PATIENT REFUND	355.60	Patient Refund
179087	5/26/2021	PATIENT REFUND	42.61	Patient Refund
179088	5/26/2021	PATIENT REFUND	7.10	Patient Refund
179089	5/26/2021	PATIENT REFUND	27.25	Patient Refund
179090	5/26/2021	PATIENT REFUND	130.00	Patient Refund
179091	5/26/2021	PATIENT REFUND	85.00	Patient Refund
179077	5/26/2021	PATIENT REFUND	161.42	Patient Refund
179082	5/26/2021	PATIENT REFUND	61.35	Patient Refund
179093	5/26/2021	PATIENT REFUND	20.00	Patient Refund
179094	5/26/2021	PATIENT REFUND	509.20	Patient Refund
179096	5/26/2021	PATIENT REFUND	266.34	Patient Refund
179098	5/26/2021	PATIENT REFUND	40.24	Patient Refund
179115	5/26/2021	PATIENT REFUND	200.00	Patient Refund
179099	5/26/2021	PATIENT REFUND	34.65	Patient Refund
179103	5/26/2021	PATIENT REFUND	276.00	Patient Refund
179104	5/26/2021	PATIENT REFUND	49.56	Patient Refund
179105	5/26/2021	PATIENT REFUND	240.80	Patient Refund
179107	5/26/2021	PATIENT REFUND	20.00	Patient Refund
179108	5/26/2021	PATIENT REFUND	85.00	Patient Refund
179109	5/26/2021	PATIENT REFUND	285.01	Patient Refund
179111	5/26/2021	PATIENT REFUND	342.01	Patient Refund
179112	5/26/2021	PATIENT REFUND	348.85	Patient Refund
179113	5/26/2021	PATIENT REFUND	348.85	Patient Refund



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179114	5/26/2021	PATIENT REFUND	805.61	Patient Refund
179116	5/26/2021	PATIENT REFUND	44.59	Patient Refund
179118	5/26/2021	PATIENT REFUND	59.51	Patient Refund
179119	5/26/2021	PATIENT REFUND	280.28	Patient Refund
179120	5/26/2021	PATIENT REFUND	57.85	Patient Refund
179121	5/26/2021	PATIENT REFUND	11.24	Patient Refund
179122	5/26/2021	PATIENT REFUND	49.60	Patient Refund
179123	5/26/2021	PATIENT REFUND	1,408.18	Patient Refund
179124	5/26/2021	PATIENT REFUND	484.31	Patient Refund
179125	5/26/2021	PATIENT REFUND	4,021.32	Patient Refund
179128	5/26/2021	PATIENT REFUND	79.14	Patient Refund
179129	5/26/2021	PATIENT REFUND	50.73	Patient Refund
179130	5/26/2021	PATIENT REFUND	91.20	Patient Refund
179131	5/26/2021	PATIENT REFUND	792.18	Patient Refund
179134	5/26/2021	PATIENT REFUND	9.19	Patient Refund
179135	5/26/2021	PATIENT REFUND	1,220.12	Patient Refund
179137	5/26/2021	PATIENT REFUND	244.92	Patient Refund
179138	5/26/2021	PATIENT REFUND	32.11	Patient Refund
179139	5/26/2021	PATIENT REFUND	427.76	Patient Refund
179140	5/26/2021	PATIENT REFUND	124.39	Patient Refund
179141	5/26/2021	PATIENT REFUND	107.57	Patient Refund
179144	5/26/2021	PATIENT REFUND	50.00	Patient Refund
179143	5/26/2021	PATIENT REFUND	35.00	Patient Refund
179145	5/26/2021	PATIENT REFUND	86.64	Patient Refund
178754	5/11/2021	UNITED WAY OF SWEETWATER COUNTY	141.75	Payroll Deduction
178749	5/11/2021	CIRCUIT COURT 3RD JUDICIAL-GR	92.52	Payroll Garnishment
178750	5/11/2021	DAVID G. PEAKE	3,484.62	Payroll Garnishment
178751	5/11/2021	STATE OF WYOMING DFS/CSSES	2,367.19	Payroll Garnishment
178752	5/11/2021	SWEETWATER CIRCUIT COURT-RS	726.94	Payroll Garnishment
178753	5/11/2021	TREASURER STATE OF MAINE	172.00	Payroll Garnishment
W/T	5/11/2021	PAYROLL 10	1,600,000.00	Payroll Transfer
W/T	5/24/2021	PAYROLL 11	1,600,000.00	Payroll Transfer
178819	5/13/2021	MHSC - PETTY CASH	20.50	Petty Cash
178771	5/13/2021	CARDINAL HEALTH PHARMACY MGMT	4,832.10	Pharmacy Management
179164	5/27/2021	CARDINAL HEALTH PHARMACY MGMT	999,392.97	Pharmacy Management
178961	5/20/2021	KATHERINE MOCZULSKI	15,000.00	Physician Recruitment
179014	5/20/2021	DR. WILLIAM SARETTE	15,000.00	Physician Retention
179004	5/20/2021	TENNY HANSON	15,000.00	Physician Retention
178625	5/6/2021	COMPHEALTH, INC.	40,923.67	Physician Services
178755	5/13/2021	ADVANCED MEDICAL IMAGING, LLC	17,796.50	Physician Services
178652	5/6/2021	JFHHR MEDICAL ASSOCIATES	13,815.60	Physician Services
178658	5/6/2021	JOHN A. ILIYA, M.D.	14,700.00	Physician Services
178668	5/6/2021	LOCUM TENENS.COM	53,585.16	Physician Services
178700	5/6/2021	TETON PATHOLOGY	15,367.20	Physician Services
179255	5/27/2021	THE SLEEP SPECIALISTS	7,250.00	Physician Services
179183	5/27/2021	DEPARTMENT OF EDUCATION	2,500.00	Physician Student Loan
179213	5/27/2021	DR. JACQUES DENKER	6,498.33	Physician Student Loan
179194	5/27/2021	FEDLOAN SERVICING	20,625.00	Physician Student Loan
179204	5/27/2021	GREAT LAKES	1,666.67	Physician Student Loan

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179259	5/27/2021	US DEPARTMENT OF EDUCATION	2,500.00	Physician Student Loan
178715	5/6/2021	USI INSURANCE SERVICES WYOMING	211,313.30	Professional Liability Insurance
178855	5/13/2021	UMIA INSURANCE, INC	97,179.00	Professional Liability Insurance
178959	5/20/2021	JOINT COMMISSION RESOURCES	12,765.00	Professional Service
178820	5/13/2021	MILE HIGH MOBILE PET	6,020.00	Professional Service
178680	5/6/2021	MOUNTAIN STATES MEDICAL PHYSICS	7,237.15	Professional Service
178975	5/20/2021	P3 CONSULTING LLC	2,752.00	Professional Service
178992	5/20/2021	STANDARD AND POOR'S	7,500.00	Professional Service
178717	5/6/2021	VERISYS INC.	41.00	Professional Service
178722	5/6/2021	WYOMING DEPARTMENT OF HEALTH	54.00	Professional Service
179190	5/27/2021	CE BROKER	271.72	Professional Service
179233	5/27/2021	P3 CONSULTING LLC	5,993.75	Professional Service
179267	5/27/2021	WYOMING DEPARTMENT OF HEALTH	94.00	Professional Service
EF700000006756	5/20/2021	SWEETWATER MEDICS LLC	4,104.00	Professional Service
178831	5/13/2021	RADIATION DETECTION COMPANY	4.50	Radiation Monitoring
178816	5/13/2021	MERRY X-RAY	283.14	Radiology Film
178612	5/6/2021	BRACCO DIAGNOSTICS INC	1,591.84	Radiology Material
178768	5/13/2021	BRACCO DIAGNOSTICS INC	566.30	Radiology Material
178920	5/20/2021	BRACCO DIAGNOSTICS INC	550.04	Radiology Material
178641	5/6/2021	GE HEALTHCARE INC	4,291.98	Radiology Material
178796	5/13/2021	GE HEALTHCARE INC	463.04	Radiology Material
178946	5/20/2021	GE HEALTHCARE INC	338.53	Radiology Material
178662	5/6/2021	LANTHEUS MEDICAL IMAGING, INC	3,463.33	Radiology Material
178809	5/13/2021	LANTHEUS MEDICAL IMAGING, INC	3,463.33	Radiology Material
178963	5/20/2021	LANTHEUS MEDICAL IMAGING, INC	3,463.33	Radiology Material
179161	5/27/2021	BRACCO DIAGNOSTICS INC	1,744.86	Radiology Material
179201	5/27/2021	GE HEALTHCARE INC	570.05	Radiology Material
179211	5/27/2021	INTERMOUNTAIN RADIOPHARMACY - UNIVERSITY OF UTAH	4,715.00	Radiology Material
EF700000006731	5/13/2021	PHARMALUCENCE, INC	2,669.25	Radiology Material
EF700000006752	5/20/2021	PHARMALUCENCE, INC	2,865.00	Radiology Material
EF700000006771	5/27/2021	PHARMALUCENCE, INC	765.50	Radiology Material
178830	5/13/2021	RADFORMATION INC.	770.00	Radiology Supplies
178613	5/6/2021	BRIAN BARTON, PA-C	1,895.00	Reimbursement - CME
178604	5/6/2021	DIL BANU SYMMINGTON	322.00	Reimbursement - CME
178614	5/6/2021	DR. BRYTON LONG	448.54	Reimbursement - CME
178669	5/6/2021	DR. LUCY RYAN	757.00	Reimbursement - CME
178678	5/6/2021	DR. MICHAEL NEYMAN	962.06	Reimbursement - CME
178690	5/6/2021	DR. RAHUL PAWAR	2,289.63	Reimbursement - CME
178699	5/6/2021	DR. SIGSBEE DUCK	240.00	Reimbursement - CME
178650	5/6/2021	ISRAEL STEWART, D.O	307.79	Reimbursement - CME
178657	5/6/2021	JOCELYN PALINEK	469.44	Reimbursement - CME
178659	5/6/2021	JOSEPH J. OLIVER, M.D.	240.00	Reimbursement - CME
178921	5/20/2021	DR. BRYTON LONG	142.80	Reimbursement - Education & Travel
178748	5/6/2021	DR. JANENE GLYN	395.00	Reimbursement - Education & Travel
178664	5/6/2021	DR. LAWRENCE LAURIDSEN	285.60	Reimbursement - Education & Travel
178948	5/20/2021	GERRY JOHNSTON	295.80	Reimbursement - Education & Travel
178655	5/6/2021	JELENA FREY	183.60	Reimbursement - Education & Travel
178812	5/13/2021	MARY FISCHER	833.88	Reimbursement - Education & Travel
178673	5/6/2021	MEGAN JACOBSEN	434.70	Reimbursement - Education & Travel

MEMORIAL HOSPITAL OF SWEETWATER COUNTY  
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178669	5/20/2021	MICHAEL PEACH	5,000.00	Reimbursement - Education & Travel
178691	5/6/2021	RAMONA K BEACH	45.90	Reimbursement - Education & Travel
178692	5/6/2021	ROB FAIR	357.00	Reimbursement - Education & Travel
178983	5/20/2021	ROB FAIR	360.06	Reimbursement - Education & Travel
178834	5/13/2021	ROBIN SNOWBERGER	459.70	Reimbursement - Education & Travel
178996	5/20/2021	STEVIE NOSICH	1,286.35	Reimbursement - Education & Travel
178707	5/6/2021	TASHA HARRIS	925.00	Reimbursement - Education & Travel
178852	5/13/2021	TONIA GAILEY	129.00	Reimbursement - Education & Travel
178656	5/6/2021	JESSICA DAVIS	83.50	Reimbursement - Insurance Premiums
178643	5/6/2021	GERRY JOHNSTON	62.96	Reimbursement - Non Hospital Supplies
178957	5/20/2021	JAYNIE WELSH	2.08	Reimbursement - Non Hospital Supplies
178709	5/6/2021	TINA FRULLO	59.84	Reimbursement - Office Supplies
178815	5/13/2021	MEGAN JACOBSEN	61.90	Reimbursement - Office Supplies
179230	5/27/2021	NICOLE HALSTEAD	19.34	Reimbursement - Office Supplies
179266	5/27/2021	WILLIAM MULLEN	92.52	Reimbursement - Payroll Deduction
W/T	5/24/2021	ABG 5/9/21	187,459.38	Retirement
W/T	5/11/2021	ABG 4/29/21	180,781.04	Retirement
178844	5/13/2021	STATE OF WYO.DEPT.OF REVENUE	872.72	Sales Tax Payment
178677	5/6/2021	MHSC MEDICAL STAFF	100.00	Scholarship
179226	5/27/2021	MHSC MEDICAL STAFF	700.00	Scholarship
178913	5/20/2021	AMERICAN LEGION TOM WHITMORE POST 28	300.00	Sponsorship
178884	5/20/2021	ROCK SPRINGS AVENGERS SOCCER CLUB	250.00	Sponsorship
179061	5/20/2021	ROCK SPRINGS AVENGERS SOCCER CLUB	1,000.00	Sponsorship
179000	5/20/2021	SWEETWATER COUNTY SCHOOL DISTRICT #2	500.00	Sponsorship
179062	5/20/2021	SWEETWATER COUNTY SCHOOL DISTRICT #2	600.00	Sponsorship
178679	5/6/2021	MOBILE INSTRUMENT SERVICE	902.50	Surgery Equipment
178822	5/13/2021	MOBILE INSTRUMENT SERVICE	826.85	Surgery Equipment
179227	5/27/2021	MOBILE INSTRUMENT SERVICE	7,344.50	Surgery Equipment
178598	5/6/2021	ALI MED INC	622.98	Surgery Supplies
178911	5/20/2021	ALI MED INC	120.83	Surgery Supplies
178784	5/13/2021	COVIDIEN SALES LLC, DBA GIVEN IMAGING	375.40	Surgery Supplies
178785	5/13/2021	CR BARD INC	357.00	Surgery Supplies
178661	5/6/2021	KEY SURGICAL INC	78.00	Surgery Supplies
178700	5/6/2021	SMITH & NEPHEW ENDOSCOPY INC	1,536.00	Surgery Supplies
178990	5/20/2021	SMITH & NEPHEW INC.	1,278.12	Surgery Supplies
178704	5/6/2021	STRYKER ENDOSCOPY	2,332.44	Surgery Supplies
178845	5/13/2021	STRYKER ENDOSCOPY	734.40	Surgery Supplies
178705	5/6/2021	SYNTHES LTD	3,732.96	Surgery Supplies
178847	5/13/2021	SYNTHES LTD	189.04	Surgery Supplies
179001	5/20/2021	SYNTHES LTD	5,793.04	Surgery Supplies
178863	5/13/2021	ZIMMER BIOMET	28,727.30	Surgery Supplies
179017	5/20/2021	ZIMMER BIOMET	57.50	Surgery Supplies
179149	5/27/2021	ALI MED INC	265.68	Surgery Supplies
179176	5/27/2021	COVIDIEN SALES LLC, DBA GIVEN IMAGING	3,200.16	Surgery Supplies
179250	5/27/2021	STRYKER ENDOSCOPY	2,716.95	Surgery Supplies
179252	5/27/2021	SYNTHES LTD	5,208.72	Surgery Supplies
179268	5/27/2021	ZIMMER BIOMET	10,069.60	Surgery Supplies
EFT00000006728	5/13/2021	COOPER SURGICAL	1,310.81	Surgery Supplies
EFT00000006748	5/20/2021	COOPER SURGICAL	685.13	Surgery Supplies

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EFT000000006764	5/27/2021	COOPER SURGICAL	66.44	Surgery Supplies
178687	5/6/2021	PRESS GANEY ASSOCIATES, INC	3,500.00	Survey Expenses
179238	5/27/2021	PRESS GANEY ASSOCIATES, INC	2,060.01	Survey Expenses
178962	5/20/2021	LANGUAGE LINE SERVICES	1,696.82	Translation Services
179170	5/27/2021	CHOTA OUTFITTERS, LLC	128.23	Uniforms
178756	5/13/2021	ALL WEST COMMUNICATIONS	4,504.37	Utilities
178602	5/6/2021	AT&T	229.66	Utilities
178760	5/13/2021	AT&T	116.16	Utilities
178689	5/6/2021	CENTURY LINK	1,909.87	Utilities
178829	5/13/2021	CENTURY LINK	6,032.74	Utilities
178961	5/20/2021	CENTURY LINK	363.14	Utilities
178935	5/20/2021	DISH NETWORK LLC	75.50	Utilities
178828	5/13/2021	DOMINION ENERGY WYOMING	47,411.35	Utilities
178835	5/13/2021	ROCK SPRINGS MUNICIPAL UTILITY	12,557.98	Utilities
178837	5/13/2021	ROCKY MOUNTAIN POWER	39,162.57	Utilities
179241	5/27/2021	CENTURY LINK	5,929.94	Utilities
179240	5/27/2021	DOMINION ENERGY WYOMING	86.02	Utilities
179265	5/27/2021	WHITE MOUNTAIN WATER & SEWER DISTRICT	57.50	Utilities
178995	5/20/2021	STERICYCLE, INC.	904.69	Waste Disposal
178633	5/6/2021	ELEMENTS INTEGRATIVE WELLNESS CENTER	74.00	WCRS Grant
178941	5/20/2021	FIBERTECH	2,315.00	Window Cleaning
			8,327,189.40	

**Memorial Hospital of Sweetwater County  
County Voucher Summary  
as of month ending May 31, 2021**

<b>Vouchers Submitted by MHSC at agreed discounted rate</b>		
July 2020		\$0.00
August 2020		\$0.00
September 2020		\$120,210.45
October 2020		\$0.00
November 2020		\$7,705.78
December 2020		\$35,769.98
January 2021		\$17,891.77
February 2021		\$0.00
March 2021		\$0.00
April 2021		\$19,608.83
May 2021		\$4,357.52
County Requested Total Vouchers Submitted		<u>\$205,544.33</u>
Total Vouchers Submitted FY 21		\$205,544.33
Less: Total Approved by County and Received by MHSC FY 21		\$205,544.33
Total Vouchers Pending Approval by County		<u><u>\$0.00</u></u>

<b>FY21 Title 25 Fund Budget from Sweetwater County</b>	<b>\$273,488.00</b>
Funds Received From Sweetwater County	<u>\$205,544.33</u>
FY20 Title 25 Fund Budget Remaining	\$67,943.67
Total Budgeted Vouchers Pending Submittal to County	<u><u>\$0.00</u></u>

<b>FY21 Maintenance Fund Budget from Sweetwater County</b>	<b>\$1,448,215.00</b>
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
County Maintenance FY21- November	\$57,573.61
County Maintenance FY21-December	\$59,200.74
County Maintenance FY21-January	\$235,363.28
County Maintenance FY21-February	\$64,705.11
County Maintenance FY21-March	\$0.00
County Maintenance FY21-April	\$829,614.24
	<u>\$1,448,215.00</u>
FY21 Maintenance Fund Budget Remaining	<u><u>\$0.00</u></u>

MEMO: June 29, 2021  
TO: Finance Committee  
FROM: Ronald L. Cheese – Director Patient Financial Services  
SUBJECT: Preliminary June, 2021 Potential Bad Debts Eligible for Board Certification

Potential Bad Debts Eligible for Board Certification

Hospital Accounts	\$ 1,436,903.00
Hospital Payment Plans	\$ 32,839.00
Medical Clinic Accounts	\$ 25,465.48
Ortho Clinic Accounts	<u>\$ 105,235.63</u>
Total Potential Bad Debt	\$ 1,600,443.11

Hospital Accounts Returned	<u>\$ - 239,043.98</u>	
Net Bad Debt Turned		\$1,361,399.13

Hospital Recoveries Collection Agency	\$ 211,589.16	
Hospital Recoveries Payment Plans	\$ 61,811.07	
Medical Clinic Recoveries	\$ 5,751.70	
Ortho Clinic Recoveries	<u>\$ 1,358.57</u>	
Total Bad Debt Recoveries		<u>\$ 280,510.50</u>

Net Bad Debt Less Recoveries		<u><u>\$1,080,888.63</u></u>
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## MEMORANDUM

To: Board of Trustees  
From: Wm. Marty Kelsey  
Subject: Chair's Report...June Building and Grounds Meeting  
Date: June 28, 2021

Regarding the Central Plant Expansion Project, Jake is recommending that MHSC not pay the contractor, BHI, almost \$32,000 for work not completed and overruns on engineering fees. BHI will not be allowed to finish the project under Jake's recommendation. They have been notified and we will see how this ends.

Regarding the HVAC/UVG Projects...Jake is pleased with the progress. Final pay application should be ready by month-end to meet CARES Act requirements.

Regarding the Medical Imaging Renovation...work is progressing steadily/framing has started.

Regarding the S1 Unit...satisfactory progress is occurring. There could be more change orders, but the team is hopeful the contingency funds built in the budget will cover the costs. There are some areas not yet demolished and there could be some above-the-ceiling issues.

Regarding the Chemo Mixing Room Project...more information will be coming forth after the next County Commissioner's meeting. It is anticipated that County funding will be further reduced which will trigger a look at the Hospital's construction priorities."

Regarding the Pharmacy Compounding Room...the project is complete...only awaiting the sign off from the Department of Health.

Regarding Dr. Sulentic Office work...90% design should be completed in early July. A contractor should be selected and on board and working by sometime in September. The contractor will have to work around Dr. Sulentic's office schedule.

Regarding the Bulk Oxygen Project...the engineering for the site work needs to be completed. Barbara and I stressed that this project needs to be done before the freezing temperatures commence.

Regarding the Building Automation System Project...no progress yet. Vaughn's P & H is tied up at this time with other projects.

Mr. Horan discussed the issue of a main sprinkler line which has asbestos. Different options for addressing the problem have been discussed, including abandoning the line and replacing it with a new line. Ms. Love indicated the Hospital may need to tap into the Board Reserve fund

to pay for this work. Discussion is occurring regarding engineering work and bidding it out vs. a sole source contract.

Mr. Horan gave a slide presentation and informed the Committee that the Hospital is realizing huge savings in electrical costs due to the advanced technology of the new chiller.

Ms. Love indicated that the Hospital needs to start the conversation regarding potential projects for the Special Purpose Tax initiative. The Commissioners have agreed to sponsor whatever project(s) we ultimately agree on.

Barbara and I participated in a ninety minute tour of recent and on-going construction projects at the Hospital on Friday, June 25<sup>th</sup>. Jim Horan was our wonderful tour guide. We looked at everything from the new chillers, to the UV lights, to the S-1 project, to the sprinkler line issue discussed above...and a lot more. Thank you, Jim, for taking time from your Friday afternoon to escort us up stairs, down stairs and all around!

**MEMORIAL HOSPITAL OF SWEETWATER COUNTY**

**BUILDING & GROUNDS COMMITTEE AGENDA**

**Tuesday ~ June 15, 2021**

**3:30 p.m.**

**Zoom teleconference**

**Voting Board Committee Members:**

Marty Kelsey, Trustee - Chairman  
Dr. Barbara Sowada, Trustee

**Voting Staff Committee Members:**

Irene Richardson, CEO  
Tami Love, CFO  
Jim Horan, Director of Facilities

**Non-voting Members:**

Gerry Johnston, Facilities Supervisor  
Stevie Nosich, Safety Coordinator

**Guests:**

Jake Blevins – ST&B Engineering  
Will Wheatley – PlanOne Architects  
Jeff Smith - County Commissioner Liaison

1. **Call Meeting to Order** Marty Kelsey
2. **Approve Agenda** Marty Kelsey
3. **Approve Minutes – May 18, 2021** Marty Kelsey
4. **Maintenance Metrics** Jim Horan
  - a. Work orders
  - b. Department overtime
  - c. Budget variance
5. **Old Business**
  - a. Project Review
    - i. Central Plant expansion Jake Blevins/Gerry Johnston
    - ii. HVAC/UVG projects Jake Blevins
    - iii. Medical Imaging renovation Will Wheatley/Jake Blevins/Gerry Johnston
    - iv. S1 Unit Jake Blevins
    - v. Chemo Mixing room Jim Horan
    - vi. Pharmacy Compounding room Gerry Johnston

- |                                              |               |
|----------------------------------------------|---------------|
| vii. Dr. Sulentic Office                     | Will Wheatley |
| viii. Bulk Oxygen                            | Jim Horan     |
| ix. Building automation system               | Jim Horan     |
| b. Tabled projects                           | Jim Horan     |
| i. Replacement roofing for power house       |               |
| ii. OB Bathtubs to Showers                   |               |
| iii. Foundation Waldner House retaining wall |               |

**6. New Business**

- |                      |           |
|----------------------|-----------|
| a. Replace waterline | Jim Horan |
|----------------------|-----------|

**7. Next meeting schedule**

Marty Kelsey

- |                                                     |  |
|-----------------------------------------------------|--|
| a. July 20, 2021 Classroom 1 or Zoom; 3:30P – 4:30P |  |
|-----------------------------------------------------|--|

**8. Adjournment**

Marty Kelsey

MEMORIAL HOSPITAL OF SWEETWATER COUNTY  
Building and Grounds Committee Meeting  
June 15, 2021

The Building and Grounds Committee met in regular session via Zoom on June 15, 2021, at 3:30 PM with Mr. Marty Kelsey presiding.

In Attendance:        Mr. Marty Kelsey, *Trustee - Chair*  
                              Dr. Barbara Sowada, *Trustee*  
                              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*

Excused:                Ms. Irene Richardson, *CEO*

Mr. Kelsey called the meeting to order.

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

Mr. Kelsey asked for a motion to approve the minutes from the May 18, 2021 meeting. Dr. Sowada made a motion to approve the minutes. Mr. Horan seconded; motion passed.

### **Maintenance Metrics**

Mr. Horan said the maintenance metrics are remarkable consistent. There are always new work orders being submitted and completed. Mr. Kelsey requested for a tour of the construction areas for himself and Dr. Sowada next week. They will be touring the facility on Friday, June 25. Mr. Horan said there has been a flurry of activity to finish up some minor projects prior to year-end.

### **Old Business – Project Review**

#### **Central Plant Expansion**

Mr. Blevins has made a recommendation for final payment to BHI, reduced by outstanding items not completed and additional work from ST&B for overruns of their fixed fees. BHI has been notified. BHI will not be allowed to finish the outstanding work due to the high risk of the project. The retainage balance is \$309,847.83. Recommended deductions are \$31,745.76, leaving our final payment at \$278,102.07. Mr. Blevins recommends closing this project. BHI has asked for a conference call regarding finishing the final work but he will have the conversation with them.

#### **HVAC/UVG Projects**

Mr. Blevins just finished the team OAC meeting and they are moving along. There was a successful power outage earlier in the week to reroute the electrical and they are preparing for the medical gas outage later this week. They are focused on the penthouse completion and the new unit so they can finalize removal of the old unit in the basement. He will be here next week to review the progress. We are expecting the final pay application by the end of the month to meet the deadlines for our CARES Act funds. Mr. Kelsey asked if they are okay with the work and the



progress. Mr. Blevins said they are very happy with Groathouse. Mr. Kelsey asked about the timeline for the whole project. Mr. Blevins sent the timeline to Ms. Love after the meeting and the complete project, including Medical Imaging is schedule to be completed by the end of November.

#### Medical Imaging Renovation

Mr. Wheatley said they are framing for new spaces and working in conjunction with the HVAC project. It has been very steady progress.

#### S1 Unit

Mr. Blevins said the old unit has been removed and the curb adjustments have been cut in preparation for the assembly of the new unit. Mr. Kelsey asked if there have been any hints of new change orders coming. Mr. Blevins said there has been discussion of some changes in the ultrasound rooms but haven't seen any pricing. He has various items to review for possible use of contingency funds. They are also aware of some new scope regarding the louvre wall and access door in the basement. Mr. Wheatley said they will make that decision after the project is completed. Mr. Horan will show the committee members the area when they tour next week. Mr. Kelsey asked if the contingency funds were adequate. Mr. Blevins said there are some areas that have not been demolished and there could be unknown issues above the ceiling so he is hesitant to say he is comfortable at this point. Mr. Kelsey asked if there have been any supply chain issues. Mr. Blevins and Mr. Wheatley noted his concern as they have seen the issues nationwide but they are not aware of any issues with this project so far.

#### Pharmacy Chemo Mixing Room

Mr. Horan said we will start the conversation with Mr. Blevins and Mr. Wheatley this month. Ms. Love said the Commissioners are discussing reductions in our budget request. We will prioritize our capital construction projects for FY2022 and review with the committee next month once we hear of any adjustments made by the County.

#### Pharmacy Compounding Room

Mr. Johnston said this project is complete. The Board of Pharmacy completed their inspection on June 10. We are now waiting on the Department of Health to sign off on the project and issue occupancy. We are hoping to hear back from them soon.

#### Dr. Sulentic Office

Mr. Wheatley received feedback from the State and they have reinstated the previous variance and the status of the previous authorization to move forward with final design. The 90% design is tentatively scheduled for the first week of July, all documents to the City and State the following week and advertising, bids and contractor chosen in August. They will be working with Dr. Sulentic on scheduling construction around his office schedule.



### Bulk Oxygen

Mr. Horan said the agreement has been signed but we haven't seen the engineer plans for the site work. Once we receive the plans, we can start getting proposals for the work. Dr. Sowada asked about the timeline from start to finish. Mr. Horan hopes to have the work completed by the fall months. Mr. Kelsey agreed we need to complete the project before freezing temperatures start. He asked that we impress on them the timeliness of the project.

### Building Automation System

Mr. Horan said the Honeywell representative is having difficulty getting the subcontractor scheduled as they are tied up with our current HVAC project. Mr. Horan is hoping to have start dates and a timeline in the next couple of weeks. Mr. Blevins said he would help with the Rocky Mountain Power questionnaire for possible rebate incentives.

### Tabled Projects

There are no new updates on the remaining tabled projects as most are on hold for the spring weather and new budget year. With the potential budget reduction from the County, we may have to prioritize these projects as well.

- Replacement Roofing for Power House
- Foundation Waldner House Wall
- OB Bathtubs to Showers

### New Business

Mr. Horan discussed an issue they found while doing exploratory work when we were considering the Lab Renovation project. High Desert Construction discovered a main sprinkler line, which is transite asbestos piping. They have submitted proposals for two different options to abandon in place and rerun the waterline with plastic piping, one for just the effected portion and the other to replace all of the transite pipe. A portion of the pipe was replaced with plastic during the MOB construction. Mr. Johnston said they recommend the second option to replace all of the remaining transite pipe. Dr. Sowada commented it needs to be done. Mr. Kelsey asked Ms. Love about any allocated funds. She said we had not planned for this but we would be able to use funds from our Board Reserve fund. Mr. Kelsey said to let him know if any Board action is needed quickly. Mr. Horan said they will work on getting additional bids. Mr. Blevins asked if there is a possibility of asbestos piping in any other areas around the hospital, like the central plant. Mr. Johnston said it is unknown on one of the pipes coming into the plant.

Mr. Horan presented a slideshow with pictures of current and potential projects around the hospital and grounds. They have already seen the energy savings from the new chiller; \$3,000 less in April and \$8,000 less in May compared to the prior year.

Ms. Love said we would like to start the discussion of choosing and prioritizing projects for a potential Special Purpose Tax initiative being discussed at the County level. The Commissioners have agreed to sponsor our project.

The next meeting will be held July 20 at 3:30 p.m.

The meeting adjourned at 4:39 p.m.

*Submitted by Tami Love*

DRAFT

## **COMPLIANCE COMMITTEE CHAIR REPORT TO THE BOARD JUNE 2021**

**Ed Tardonì**

The Compliance Committee met in June in Zoom format.

### **NO BUSINESS WAS CONDUCTED**

Hospital Staff are in the process of moving the Risk and Compliance, working group, functions under the Quality Department. The Director of Quality, Kara Jackson, requested an orientation session with the Committee. The only agenda item was the orientation. Minutes are included in the Board Packet.

### **KEY TAKEAWAYS**

- The Compliance Committee is an oversight committee of the Board. It is not a working group.
- The oversight function of the committee covers a wider range of operations than Quality.
- Detected non compliance is referred to other working groups or committees for resolution.
- Compliance committee reports differ from Quality reporting in that Quality reports track progress whereas Compliance reports are interested solely in the documentation and detection of non-compliance.
- The audit function is critical to the operations of the Compliance Committee.
- The named Compliance Officer must be separate from, and independent of, the Compliance working group.
- It is worth noting what **does not** have to be done, or reported, when engaged in Compliance Committee work vs Quality Committee work.

### **NOTE TO THE BOARD**

Now would be an optimum time to make changes to the Compliance Committee Charter if the Board wishes to do so.

During the orientation, the subject of the MHSC Risk Assessment came up. The current Risk Assessment document is two years old and all items on it have been addressed. The CEO expressed the opinion that it was time to form a working group to execute a new risk assessment.

### **NEXT MEETING**

The next meeting of the committee will be held July 29, 2021 at 1530 hours most likely by Zoom.

## Board Compliance Committee Minutes ~ June 24, 2021

Present: Marty Kelsey, Ed Tardoni, Irene Richardson, Suzan Campbell, Kari Quickenden, Kara Jackson

Ed called the meeting to order.

Ed said the only item on the agenda is discussion and he said he and Marty have already shared their thoughts with staff. He said there are reports listed in the charter. All that has to be done on the hospital side is submit the reports. The Committee looks at them as an audit function to see are we doing what we said we would do. Irene asked if the Committee would like us to complete another risk assessment. Marty said he has been doing a lot of research on compliance. He said the compliance officer should report to the CEO and is to ensure laws, rules, regulations, and policies are followed. He said training is so important for the compliance officer. Ed said the keys are independence and protection. Suzan said she reports directly to Irene and can be the compliance officer now because of structure changes. Kari said facilitating the meetings could come from the Quality Department. Marty said he believes Irene should make the decision and he supports whatever she decides to do. Ed confirmed the Hospital still has a compliance hotline. Ed said he would like the safety valve concept added back in to the committee charter. Ed suggested staff prepare the reports specified for the next meeting. He suggested staff pick something small that doesn't usually show up in Quality and complete an audit. Ed said he commits to bring this discussion forward to the Board. Kari said she, Kara, Suzan and Irene will meet and formulate plans to move forward. Irene said we really want to be on the right track and have good direction from the Board. Ed said the key is that hospital staff understands what you don't have to do for the Board. Kari said she is confident we will get it to the way it needs to be.

Meeting adjourned. Next Meeting: Thursday – July 29, 2021, at 3:30 pm



## 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 and is ready for Board review and approval.

1. Name of Contract: **INTERIM IT DIRECTOR CONTRACT**

2. Purpose of contract, including scope and description: **Decision was made by Senior Leaders to hire an interim IT Director(Brad Kowalski) for 6 months. This agreement is directly between the interim Director and MHSC without use of 3<sup>rd</sup> party company (like the companies we use to find use and place locums physicians or traveling nurses). The agreement is for 16 weeks.**

3. Effective Date: **July 12, 2021**

4. Expiration Date: **October 31, 2021**

5. Termination provisions: **subject to early termination by either party**  
Is this auto-renew? **No**

6. Monetary cost of the contract: **\$12,000.00 month taxes paid by Brad Kowalski . Housing provided by Hospital** Budgeted? **Yes salary for IT Director in budget**

7. Jurisdiction/Choice of Law provision checked and changed to Wyoming if able to so. **Not addressed**

8. Any confidentiality provisions? **Yes Section 6**

9. Indemnification clause present? **Yes Section 7 subsection (e)**

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

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



# Interim I.T. Director Agreement

- a. All detailed proprietary and generally not known information obtained, accessed and/or generated during this Agreement will remain the sole ownership of the Organization.
- b. Person agrees to not disclose, divulge, or use any of said information without prior, written permission of Organization.

## 7. Independent Staff Member/Liability/Indemnification

- a. In providing the Services within this Agreement, the Person is acting as an independent staff member and not as an employee of Organization. No actual or implied partnership or joint venture is intended.
- b. The Organization agrees the Person will be covered by the Organization's general insurance and liability policies within the scope of this Agreement.
- c. Person agrees to execute the Organization's organizational Business Associate Agreement (BAA) under this Agreement.
- d. Person agrees to abide under the Organization's HIPAA Policies and Procedures.
- e. Except to the extent paid in settlement from any applicable insurance policies, and to the extent permitted by applicable law, each Party agrees to indemnify and hold harmless the other Party, and its respective affiliates, officers, agents, employees, and permitted successors and assigns against any and all claims, losses, damages, liabilities, penalties, punitive damages, expenses, reasonable legal fees and costs of any kind or amount whatsoever, which result from or arise out of any act or omission of the indemnifying party, its respective affiliates, officers, agents, employees and permitted successors and assigns that occur in connection with this Agreement. This indemnification will survive the termination of this Agreement.
- f. The Person will not hire and/or supply a sub-contractor without prior written Agreement of the Organization.
- g. In the event the Person hires and supplies a sub-contractor to assist in fulfilling the Agreement or fulfilling an additional agreed to service, the sub-contractor will remain an agent of the Person.
- h. The Person will be responsible for the fees associated with said sub-contractor.
- i. The Person will bill the Organization for said fees/expenses according to Section 3 and Section 4.

## 8. No Exclusivity

- a. The Parties acknowledge that this Agreement is non-exclusive and that either Party will be free, during and after the Term, to engage and contract with third parties for the provision of services similar to the Services listed in Section 1.

### Signatures

\_\_\_\_\_  
Signature/Title

\_\_\_\_\_  
Printed Name/Title

\_\_\_\_\_/Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Brad Kowalski

\_\_\_\_\_  
Printed

\_\_\_\_\_/Date



# Interim I.T. Director Agreement

This Agreement is between:

## ORGANIZATION

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

## PERSON

Brad Kowalski  
111 Merlot St., Deland, FL 32724

### 1. Service Provided

- a. Services will consist of acting as the Interim Information Technology Director for the Organization, including all duties usually associated with said position based on normal industry definitions.
- b. The Services may also include other tasks which both Parties may agree on.

### 2. Term of Agreement

- a. The term of this Agreement will begin on July 12, 2021 and will remain in force until October 31, 2021, subject to early termination if agreed upon by both parties. This Agreement may be extended with written consent by both parties.

### 3. Compensation

- a. The Person will charge the Organization a monthly rate of \$12,000.00 (USD). The monthly rate is based on an average of 30 hours per week, 4 weeks per month, being performed at an hourly rate of \$100.00.
- b. All taxes from this agreement will be the sole responsibility of the Person.
- c. In the event that Person is not able to supply the number of hours listed in 3.a, the monthly rate will be prorated to the appropriate amount.
- d. The Person will submit to the Organization at the end of the month an invoice summarizing the fees and expenses incurred.
- e. Invoices submitted by the Person to the Organization are due within 15 days via ACH disbursement.

### 4. Reimbursement of Expenses

- a. The Person will be reimbursed for reasonable and necessary expenses incurred by the Person in connection with this Agreement.
- b. Said expenses will be included in the monthly invoice in a detailed listing, including appropriate receipts when available.
- c. Starting on July 10, 2021 and continuing thru the termination of this Agreement, the Organization will supply the Person with acceptable housing consisting of an organizational apartment (previously seen and agreed to).

### 5. Equipment

- a. Organization will furnish to Person all necessary and reasonable equipment required to fulfill this Agreement. This equipment will include, but not be limited to, email access, laptop/workstation consistent with organizational standards, network access, access to network printer, etc.
- b. All supplied equipment will be returned to Organization at the termination of this Agreement.

### 6. Confidentiality



## 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: **The Radio Network**
2. Purpose of contract, including scope and description: **Radio advertising. Contract covers 104 ad spots on KYCS, KUGR, KFRZ, KZWB and KFZE (145 in Pinedale as an added benefit this year at no extra cost) Plus, eight months for Wolves Coverages; three ads per game.**
3. Effective Date: **Aug. 1, 2021**
4. Expiration Date: **One year from effective date.**
5. Rights of renewal and termination. **Advertiser (MHSC) has the right to terminate this contract within 30 days of termination date.** Is this auto-renew?  
**No**
6. Monetary cost of the contract and is the cost included in the department budget? **Contract covers 104 ad spots on KYCS, KUGR, KFRZ, KZWB and KFZE at \$583.33 per station for 12 months for an annual total of \$35,000. A cost of \$250 x 8 months for Wolves Coverages. Monthly ad costs remain the same. Total annual cost is \$37,000. Budgeted? Yes**
7. Jurisdiction/Choice of Law provision checked and changed to Wyoming if able to so. **Not addressed.**
8. Any confidentiality provisions? **No**
9. Indemnification clause present? **No**
10. Is this contract appropriate for other bids? **No**
11. Is County Attorney review required? **No**



40 Shoshone Ave.  
Green River, WY 82935  
P.O. Box 970

# THE RADIO NETWORK

**KYCS KUGR KUGR KFRZ KZWB**  
**95.1 FM 1490 AM 104.9 FM 92.1 FM 97.9 FM**

(370) 875-6666  
(307) 362-6746  
Fax: (307) 875-5847

Client Memorial Hospital Address 1200 College Dr RS, WY Date 5/10/21  
Sweetwater County  
E-mail \_\_\_\_\_ ☐ Last Sunday ☐ Exact Time ☐ CO-OP ☐ Schedule Only ☒ Contract

## KYCS

Start 8/1/21

Stop 7/31/22

Rep. CW

Mon	Tues	Wed	Thurs	Fri	Sat	Sun
# of Time <u>104</u> Sec. <u>30</u> Rate _____ Total <u>583.33</u>						

Special Instructions:

Cart # 108T

## KUGR

Start 8/1/21

Stop 7/31/22

Rep. CW

Mon	Tues	Wed	Thurs	Fri	Sat	Sun
# of Time <u>104</u> Sec. <u>30</u> Rate _____ Total <u>583.33</u>						

lea-7p

Live Reads  
FB Posts

## KFRZ

Start 8/1/21

Stop 7/31/22

Rep. UD

Mon	Tues	Wed	Thurs	Fri	Sat	Sun
# of Time <u>104</u> Sec. <u>30</u> Rate _____ Total <u>583.33</u>						

MHSWC has the  
right to terminate  
this contract  
within 30 days  
of termination date.

## KZWB

Start 8/1/21

Stop 7/31/22

Rep. CW

Mon	Tues	Wed	Thurs	Fri	Sat	Sun
# of Time <u>104</u> Sec. <u>30</u> Rate _____ Total <u>583.33</u>						

Authorized Signature \_\_\_\_\_

Cynthia Warkentin  
(JRN)

Date \_\_\_\_\_

240 East Pine Street  
Pinedale, Wyoming 82941

**THE FREEZE**  
**KFZE 104.3FM**  
**A RADIO NETWORK STATION**

Phone (307) 367-4211

Client Memorial Hospital Address 1200 College Dr RS, WY Date 5/10/21  
E-mail Sweetwater County ☐ Last Sunday ☐ Exact Time ☐ CO-OP ☐ Schedule Only ☒ Contract

	Mon	Tues	Wed	Thurs	Fri	Sat	Sun	Special Instructions:
Start <u>8/1/21</u>								Cart # <u>108T</u>
Stop <u>7/31/22</u>								Lea-7P
Rep. <u>CW</u>								MHSNC has the right to terminate contract within 30 days of terminate date.
# of Time <u>145</u> Sec. <u>30</u> Rate _____ Total <u>583.33</u>								

Signature \_\_\_\_\_

*Cynthia Wakefield*  
(TRN)



## 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: **SweetwaterNow**
2. Purpose of contract, including scope and description: **Digital advertising. Top Billboard banner ad on SweetwaterNow.com at reduced rate. Birth Page sponsorship on SweetwaterNow.com and Facebook at reduced rate. Sponsored content on SweetwaterNow.com and Facebook at reduced rate.**
3. Effective Date: **Aug. 1, 2021**
4. Expiration Date: **One year after effective date.**
5. Rights of renewal and termination. **Advertiser (MHSC) has the right to terminate this contract by written notice to SweetwaterNow within 60 days of termination date. Is this auto-renew? NO**
6. Monetary cost of the contract and is the cost included in the department budget? **Annual costs include top Billboard banner ad at \$22,800; Birth Page sponsorship, \$12,000; and Sponsored Content, \$,6000. Total is \$40,800, which is a \$2,000 annual decrease compared to 2020-21. It will be billed at \$3,400 per month in one invoice. Budgeted? YES**
7. Jurisdiction/Choice of Law provision checked and changed to Wyoming if able to so. **Not addressed.**
8. Any confidentiality provisions? **NO**
9. Indemnification clause present? **NO**
10. Is this contract appropriate for other bids? **NO**
11. Is County Attorney review required? **NO**





Dave Arambel  
Sales & Marketing  
Phone: 307-922-0700 Ext. 704  
Email: dave@sweetwaternow.com

## Memorial Hospital of Sweetwater County

**Sold To**

Memorial Hospital of Sweetwater Cou...  
1200 College Drive  
Rock Springs, Wyoming 82901

**Bill To**

Memorial Hospital of Sweetwater Cou...  
1200 College Drive  
Rock Springs, Wyoming 82901

**Proposal #: 630****Date:** May 17, 2021**Account Rep:** Dave Arambel**Billing Email**

dsutton@sweetwatermemorial.com

Product	Net
Top Billboard Banner Ad Placement	\$22,800.00
Birth Announcement Custom Sponsorship	\$12,000.00
Sponsored Content Bundle	\$6,000.00
<hr/>	
Sub Total	\$40,800.00
Discount	\$0.00
<b>Total</b>	<b>\$40,800.00</b>

**NOTES/AMENDMENTS**

Custom promotion package for top billboard banner ad placement/birth sponsorship/sponsored content

Marketing package reflect 37% discount on the banner ad placement

Sponsored content reflects a \$100 discount on original posts and \$25 discount on post reruns

Recurring Contract Discount: If Advertiser cancels contract prior to agreed upon end date and received a long-term contract discount, they will be invoiced for the difference between the discounted rate and full rate, from the beginning of the contract to the cancellation month. Contract is effective for one year, beginning Aug. 1, 2021.

**Terms and Conditions**

Advertising: Advertiser agrees to purchase advertising on SweetwaterNOW (the Network) in accordance to terms listed on this contract. Advertising covers all products on the website, newsletter, social media, podcast network, or other promotion.

Invoicing will be on the first of each month for annual contracted advertising and at the time of posting for sponsored content.

Advertiser's advertisement or post shall be removed from the Network if payment is not received within ten (10) days of the date payment is due. Network may ask for pre-payment on any advertising on a case-by-case basis. Prior to appearing on the Network, a proof of the ad/post will be emailed to the Advertiser for approval. Changes after initial approval subject to graphic design fees. Graphic design rate is \$75/hr. Photos or ad design may not be reproduced without permission from Network.

Advertiser is responsible for providing all information and digital artwork to meet SweetwaterNOW's specifications, if providing own creative. The Network reserves the right to determine the suitability of all ads submitted for distribution, and to reject advertising that does not meet its editorial or digital criteria.

Conditions of Agreement: The person signing this contract warrants that he/she has full authority to sign on behalf of the Advertiser. The Advertiser warrants that he/she has the right to use any trademark request and agrees to hold Network harmless from any liability and/or claims and will pay all expenses incurred in the defense thereof, arising out of the publication of any trademark or tradename in accordance with this contract. Advertiser has the right to terminate this contract by written notice to SweetwaterNOW within 60 days of termination date.

Recurring Contract Discount: If Advertiser cancels contract prior to agreed upon end date and received a longterm contract discount, they will be invoiced for the difference between the discounted rate and full rate, from the beginning of the contract to



the cancellation month.

Limitation of Liability: The Network cannot and does not warrant the accuracy of the information provided by the Advertiser. Omission or error in advertisement shall result in adjustment of charges to the Advertiser. In no case, however, shall SweetwaterNOW's liability exceed the total charge for services. The Advertiser acknowledges that the Network cannot guarantee advertising results and that no promise of such results have been made.

If Collection is Necessary: Advertiser agrees to pay all collection fees. All discounts on this contract become null and void. The highest published rate, on the rate sheet, for the product(s) agreed upon in this agreement will be charged and outstanding balances are subject to a 15% service charge.

\_\_\_\_\_  
**Memorial Hospital of Sweetwater County Representative**



## 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: **WyoRadio**
2. Purpose of contract, including scope and description:  
**Radio Advertising: Eight 30-second radio spots per day on KQSW, KSIT, KMRZ, KRKK-AM/FM (960 spots per month.) 50 additional spots per month on KSIT and KRKK. A minimum of three radio spots during every UW Cowboys Football Game and UW Cowboys/Cowgirls Basketball Games. When games are idle, 20 additional spots each on KSIT or KRKK. Two morning weather sponsorship reads weekday mornings on KQSW, KMRZ and KSIT.**  
**Digital Advertising: Top of Page 800x200 banner on Wyo4News.com and 300x25 embedded digital ad on. Wyo4News. Four featured/sponsored posts per month. Afternoon weather sponsorship on Wyo4News. Four featured posts on Wyo4News. Exclusive sponsor of weekly job board posts on Wyo4News, along with Keep Local Alive with Cowboys Package.**
3. Effective Date: **Contract effective date is Aug. 1, 2021.**
4. Expiration Date: **One year after effective date.**
5. Rights of renewal and termination? **Hospital (the advertiser) has right to terminate the contract with written notice 30 days before the termination date. Is this auto-renew? No**
6. Monetary cost of the contract and is the cost included in the department budget? **Contract is in 2021-22 budget. Monthly spend remains at \$3,189, with a few added benefits compared to last year's contract. TOTAL ANNUAL COST: \$38,268.00**



7. Jurisdiction/Choice of Law provision checked and changed to Wyoming if able to so. **Not Addressed.**

8. Any confidentiality provisions? **No**


9. Indemnification clause present? **No**

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

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

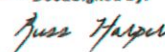


## MASTER AGREEMENT

Date:	<b>5/11/21</b>	Sales Rep:	<b>H-Russ</b>	<b>WYORADIO</b>																
Client:	<b>Memorial Hospital of Sweetwater County</b>																			
Agency:																				
Contact:	<b>Deb Sutton</b>																			
Street:	<b>1200 College Drive</b>																			
City:	<b>Rock Springs</b>																			
State / Zip:	<b>WY 82901</b>																			
E-Mail:	<a href="mailto:dsutton@sweetwatermemorial.com">dsutton@sweetwatermemorial.com</a>																			
Phone:	<a href="tel:307-362-3711">307-362-3711</a>																			
Fax:																				
																				
<b>2717 Yellowstone Road</b> <b>PO Box 2128</b> <b>Rock Springs, WY 82902</b> <b>RS: (307) 362-3793</b> <b>GR: (307) 875-5755</b> <b>Fax: (307) 362-8727</b>																				
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%;">KSIT</td> <td style="width:10%; text-align: center;">X</td> <td style="width:25%;">KRKK</td> <td style="width:10%; text-align: center;">X</td> <td style="width:30%; text-align: center;">Web</td> </tr> <tr> <td>KQSW</td> <td style="text-align: center;">X</td> <td>KMRZ</td> <td style="text-align: center;">X</td> <td style="text-align: center;">X</td> </tr> </table>											KSIT	X	KRKK	X	Web	KQSW	X	KMRZ	X	X
KSIT	X	KRKK	X	Web																
KQSW	X	KMRZ	X	X																
<b>BILLING</b>																				
<input checked="" type="checkbox"/> NEW CONTRACT		PURCHASE ORDER #		MONTHLY <input checked="" type="checkbox"/>		BROAD CAST		EOS												
<input type="checkbox"/> NEW BUSINESS				TRADE		CASH <input checked="" type="checkbox"/>														
<b>SPECIAL</b>																				
<b>SPONSORSHIP OR PACKAGE:</b> <b>KLA C + UW +HW/Top of Story + Features</b>																				
<b>CONFLICT CODE(S):</b> CO-OP: <input type="checkbox"/> No <input type="checkbox"/> Yes																				
START DATE <b>8/1/2021</b> END DATE <b>7/31/22</b>																				
<b>STATION(S)</b>																				
SCHEDULE	# SPOTS	:60 RATE	SCHEDULE	# SPOTS	:60 RATE	SCHEDULE	# SPOTS	:30 RATE	SCHEDULE	# SPOTS	:30 RATE									
KQSW			KSIT			KMRZ														
12A-5A			12A-5A			12A-5A			12A-5A											
12A-12A			12A-12A			12A-12A			12A-12A											
5A-12A			5A-12A			5A-12A			5A-12A											
6A-7P			6A-7P			6A-7P			6A-7P											
6A-10A			6A-10A			6A-10A			6A-10A											
6A-8P SA			6A-8P SA			6A-8P SA			6A-8P SA											
6A-8P SU			6A-8P SU			6A-8P SU			6A-8P SU											
<b>TERMS OF AGREEMENT</b>																				
<p>Client will receive 8 :30 second spots per day, per station on KMRZ, KSIT, KQSW and KRKK AM/FM</p> <p>Client will receive 50 additional spots per month on KSIT and KRKK AM/FM.</p> <p>Client will receive a minimum of 3 spots in every UW Cowboys Football and Basketball Game, and Every UW Cowgirls Basketball Game.</p> <p>In months where the Cowboys/Cowgirls are idle, client will receive 20 additional spots on respective station, KSIT or KRKK.</p> <p>Client will receive 2 morning weather sponsorship read weekday mornings on KQSW, KMRZ, KRKK and KSIT.</p> <p>Client will receive Top Of Page 800x200 Banner Ad on Wyo4news.com.</p> <p>Client will receive 800x200 rotating Top of Story ad on Wyo4News.com.</p> <p>Client will receive 300x250 Embedded/Sidebar ad on Wyo4News.com.</p> <p>Client will receive 4 Featured Posts on Wyo4News each month.</p> <p>Client will receive exclusive sponsor of Weekly Job Board Posts on Wyo4News.com</p> <p>Keep Local Alive with Cowboys Package Price: \$3189</p>																				
JAN \$3189	FEB \$3189	MAR \$3189	APR \$3189	MAY \$3189	JUN \$3189	JUL \$3189	AUG \$3189	SEP \$3189	OCT \$3189	NOV \$3189	DEC \$3189									
<b>TOTAL AMOUNT:</b>				<b>\$3,189.00</b>				<b>TOTAL SPOTS:</b>				<b>12880 + UW Spots</b>								
<b>Advertiser Signature:</b>						<b>Date:</b>														
<small>Advertiser has right to terminate this contract with 30 days written notice. Advertiser acknowledges that this document is a legal, binding contract. Invoices are due and payable on receipt. Advertiser further agrees to pay collection costs and attorney's fees.</small>																				
<small>NON DISCRIMINATION POLICY: (Licensee) and its station(s) do not discriminate in advertising contracts on the basis of race or ethnicity and will not accept any advertising which is intended to discriminate on the basis of race or ethnicity. Advertiser represents and warrants that it is not purchasing advertising time from (Licensee) or its station(s) that is intended to discriminate on the basis of race or ethnicity.</small>																				
Rev - 102915																				

Station Representative

DocuSigned by:

  
 DD3BBF53DE77414...

GM WyoRadio/Wyo4News

5/17/2021

218/220



## Contract Check List

This checklist summarizes the purpose of the contract, assures that In-house Legal Counsel and the CEO have reviewed the contract and the contract is ready for Board approval.

1. Name of Contract: **MOU WITH YOUNG AT HEART CHILD CARE CENTER**
2. Purpose of contract, including scope and description: **The MOU holds 11 slots at Young At Heart day care for hospital employee's children. Hospital pays \$4400.00 year for 11 spots to be held as priority access. Hospital also pays 15% of tuition for each spot that is used by hospital employees. Hospital always pay the 15% of tuition per month as the slots allotted to the hospital are always filled. This is a huge benefit for our staff.**
3. Date of contract execution: **July 1, 2021**
4. Date of contract expiration: **July 1, 2024**
5. Rights of renewal and termination: **60 day written notice of termination required. Can terminate with or without cause.**
6. Monetary costs: **\$4400.00 year (\$400.00 x 11 slots) billed annually in June. 15% tuition is \$1,970 monthly for a total of \$28,040 each year. Young at Heart has not increased tuition costs. This is same amount we paid in the agreement entered into in 2018.**
7. Included in Department Budget: **YES**
8. Let for bid, if appropriate:
9. County Attorney reviewed (if applicable):
10. In-house Counsel Reviewed: **Yes**





2400 Reagan Avenue  
Rock Springs, WY 82901  
Phone: 307-352-6737

**Sweetwater County Memorial Hospital & Young At-Heart Center**  
**Memorandum of Understanding**  
***Provider Services Collaboration***

This Memorandum of Understanding is made by and between the Sweetwater County Memorial Hospital and the Young at Heart Center of Rock Springs, Wyoming.

**Collaborative Partners**

The Young at Heart Early Learning Center will provide priority access for employees of the Sweetwater County Memorial Hospital. The following are the terms of this agreement;

1. Sweetwater County Memorial Hospital will have 11 full time slots available to their staff.
2. Sweetwater County Memorial Hospital will pay 15% of the tuition for each of the slots that are used.
3. Young at Heart will bill Sweetwater County Memorial Hospital monthly for the amount of discount that is being used.
4. Sweetwater County Memorial Hospital will pay \$400 for each slot to pay for Priority Access for their staff, for a total of \$4400 to be annually in June.
5. Priority access will be given to Sweetwater County Memorial Hospital; employees will immediately be placed at the front of the waiting list and enrolled as quickly as possible.

**Terms of the Memorandum**

This Memorandum of Understanding is effective on the date of the last agency signature. The Memorandum expires July 1, 2024. The signing parties will review this Memorandum of Understanding annually. Extensions and/or amendments will be made as deemed necessary and agreed to by the signing parties. In the event that the Collaborative Partner violates any of the terms or conditions of this Memorandum of Understanding, the Sweetwater County Memorial Hospital reserves the right to immediately terminate this agreement. In the event of termination of this Memorandum of Understanding, with or without cause, for any other reason, the party terminating the agreement shall give notice of such termination in writing to the other party. Termination shall be effective sixty (60) days after the date of receipt of the written notification.

As the Executive Director (or equivalent) of the Participating Agency, I have read, fully understand, and agree to the terms and guidelines set forth in this Memorandum of Understanding.

**Sweetwater County Memorial Hospital**

**Young at Heart Senior Center**

\_\_\_\_\_  
Signature / Sweetwater County Memorial  
Hospital, Chief Executive Officer

*Brianna Romero*

\_\_\_\_\_  
Signature / Director of ELC

Irene Richardson  
Printed Name

Brianna Romero  
Printed Name

Date: \_\_\_\_\_

Date: 6/8/2021