

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

March 2, 2022

2:00 p.m.

Dial: 301-715-8592

Meeting ID: 846 1849 8332

Password: 250762

AGENDA

- I. Call to Order Taylor Jones
 - A. Roll Call
 - B. Pledge of Allegiance
 - C. [Our Mission and Vision](#) Ed Tardoni
 - D. Mission Moment Irene Richardson, *Chief Executive Officer*
- II. Agenda *(For Action)* Taylor Jones
- III. [Minutes](#) *(For Action)* Taylor Jones
- IV. Community Communication Taylor Jones
- V. Old Business Taylor Jones
 - A. COVID-19 Preparation and Recovery - Incident Command Team Update Kim White,
Director of Emergency Services
 - B. Rules of Practice Governing Hearings Geoff Phillips, *Legal Counsel*
 - C. [Compliance Program](#) *(from the Compliance Committee)* *(For Review)* Marty Kelsey
 - D. Board Policy *(from the Governance Committee)* Barbara Sowada
 - 1. [CEO Evaluation](#) *(For Action)*
 - E. Medical Staff Bylaws *(For Action)* Dr. Brianne Crofts, *Medical Staff President*
- VI. New Business *(Review and Questions/Comments)* Taylor Jones
 - A. [Patient Safety Plan](#) *(from the Quality Committee)* *(For Review)* Kara Jackson, *Director of Quality, Accreditation, Patient Safety and Risk*
- VII. Chief Executive Officer Report Irene Richardson
- VIII. Committee Reports
 - A. [Quality Committee](#) Barbara Sowada
 - B. [Human Resources Committee](#) Barbara Sowada
 - C. [Finance & Audit Committee](#) Ed Tardoni
 - 1. [Capital Expenditure Request](#) *(For Action)*
 - 2. Bad Debt *(For Action)*
[February Committee Meeting Information](#)
 - D. [Building & Grounds Committee](#) Marty Kelsey
 - E. Foundation Board Taylor Jones
 - F. [Compliance Committee](#) Marty Kelsey
 - G. [Governance Committee](#) Taylor Jones
 - H. Executive Oversight and Compensation Committee Taylor Jones
 - I. Joint Conference Committee Taylor Jones

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- | | |
|---|--------------------|
| IX. Board Review of iProtean | Barbara Sowada |
| X. Contract Review | Suzan Campbell |
| A. Contract Consent Agenda <i>(For Action)</i> | |
| 1. Tacore Medical | |
| XI. Medical Staff Report | Dr. Brianne Crofts |
| XII. Good of the Order | Taylor Jones |
| XIII. Executive Session (W.S. §16-4-405(a)(ix)) | Taylor Jones |
| XIX. Action Following Executive Session | Taylor Jones |
| XV. Adjourn | Taylor Jones |



Memorial Hospital

OF SWEETWATER COUNTY

OUR MISSION

*Compassionate care for
every life we touch.*

OUR VISION

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

OUR VALUES

Be Kind

Be Respectful

Be Accountable

Work Collaboratively

Embrace Excellence

OUR STRATEGIES

Patient Experience

Quality & Safety

Workplace Experience

Growth, Opportunity & Community

Financial Stewardship

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

February 2, 2022

The Board of Trustees of Memorial Hospital of Sweetwater County met via Zoom in regular session on February 2, 2022, 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 at the call to order: Mr. Taylor Jones, Mr. Marty Kelsey, Ms. Kandi Pendleton, Dr. Barbara Sowada, and Mr. Ed Tardoni.

Officially present during the meeting: Ms. Irene Richardson, Chief Executive Officer; Dr. Brianne Crofts, Medical Staff President; Mr. Geoff Phillips, Legal Counsel; 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. Jones read aloud the mission and vision statements.

APPROVAL OF MINUTES

The motion to approve the minutes of the January 5, 2022, regular meeting as presented was made by Dr. Sowada; second by Mr. Tardoni. 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, provided a Covid-19 update. She said Covid same day testing supplies are limited due to a nationwide shortage. The State is only able to test for the omicron variant, we are unable to test for the strain locally. She offered to find more information from the State and report next month. Ms. White said we continue to offer a drive-thru vaccine clinic one day a week on Tuesdays only from 3:00 – 6:00 PM. We are arranging patient transfers with other locations on a case-by-case basis. We continue to offer monoclonal antibodies. We are hopeful the positive cases will start trending down. Mr. Jones thanked Ms. White for the update.

Rules of Practice Governing Hearings

Mr. Phillips reported we are still in the middle of the comment period. He said he will seek approval from the Board once the comment period has passed. Mr. Phillips said we will need to sign and approve following the comment period.

Risk Management Program

Mr. Kelsey said a small group met and Ms. Richardson shared with the group we are doing everything risk management would entail. Mr. Kelsey said he agrees and given the size of the Hospital and Ms. Richardson's confidence, we are handling well, and he is of the opinion we should keep doing what we are doing. Ms. Richardson shared she contacted hospitals around Wyoming. Their programs vary based on their size and resources. She said we already perform the items now and she feels we have our bases covered and are using our resources wisely.

Compliance Program

Mr. Kelsey said the Committee will meet later in the month. Ms. Suzan Campbell, In House Counsel, is working on the plan document. It should be ready for approval at the February Committee meeting and then moved on to the Board for review in March.

Employee Policy: Non-Discrimination and Anti-Harassment

Ms. Campbell said the policy was given to the Board the previous month. The current version is updated following input from the Board. She said this will replace the current policy. Mr. Kelsey thanked Ms. Campbell for considering and making the change to the hostile work environment language and said he supports the policy as written. The motion to approve the policy as presented was made by Dr. Sowada; second by Ms. Pendleton. Motion carried.

Human Resources Charter

Dr. Sowada said this is the second read for the charter. She reported the Committee met and added for the safety of employees information. The motion to approve the charter as presented was made by Dr. Sowada; second by Ms. Pendleton. Motion carried.

Medical Staff Bylaws

Mr. Jones said we have been working on the update for a period of time. The information was sent for review. Mr. Kelsey asked if Mr. Phillips has reviewed and put his stamp of approval on the final draft. Mr. Phillips said he has not, he requested a copy of the update, and agreed to review prior to the next meeting. Mr. Kelsey also asked for consideration of consistency with "board of trustees" and "governing body" references. Dr. Crofts said she is fine with approval of the medical staff bylaws placed on the March agenda.

NEW BUSINESS

Board Policy: CEO Evaluation

Dr. Sowada said the information is in the meeting packet. She said the question is do we change to the American Hospital Association or continue with what we are doing now with a monthly interview process. Dr. Sowada said all that is new is the choice between standardized or what we are doing now. She asked for people to forward their questions/changes to the Governance Committee. Dr. Sowada said Ms. Richardson was involved in the review process.

CHIEF EXECUTIVE OFFICER REPORT

Ms. Richardson began her report by sharing mission moments involving great patient care by the lab staff who assisted patients outside the normal schedule as well as a new security guard joining us who was here with the national guard and loved being here so applied to stay. Ms. Richardson also shared a letter from Senator John Barrasso congratulating us for our recent Rock Springs Chamber of Commerce community award and thanking us for our service to our community. She said a group continues to meet with Kaufman Hall and should have some information available in March. Go-Live with Cerner is still scheduled for February 28, 2022. Ms. Richardson said it will be a huge benefit for our patients and staff. We are working on the budget for next year. We are looking at three years plus for capital budget planning. Ms. Richardson said the Red Tie Gala events kicked off during the current week. March is Healthcare Month and we are doing something different this year. Instead of a health fair event, we are offering low-cost screening in our outpatient lab every Tuesday and Thursday and planning weekly drawings for participants. Ms. Richardson will conduct a Town Hall via Zoom February 10. She reported the Medical Staff presented a lovely gift to Dr. Jacques Denker in appreciation of his service as Medical Staff President last year. Ms. Richardson said she is looking forward to working with Dr. Crofts this year. Ms. Richardson provided a Strategic Plan update including Patient Experience, Quality and Safety, Community Outreach and Growth, Workplace Experience, and Financial Stewardship. She thanked the staff and physicians for the excellent job they are doing every day. Ms. Richardson invited everyone to thank people for what they do. She said we are very, very grateful for everyone at MHSC.

COMMITTEE REPORTS

Quality Committee

Dr. Sowada said the minutes are in the packet. She said she and Mr. Tardoni asked the Quality Department if they would share data with control charts. Mr. Corey Worden, Quality Analyst, reviewed a PowerPoint. Dr. Kari Quickenden, Chief Clinical Officer, said we will evaluate which measures will have control charts as we move forward. Dr. Sowada thanked Ms. Richardson, the Quality Department, and Senior Leaders for exploring the possibility. Ms. Richardson said she looks forward to analyzing the data this way.

Human Resources Committee

Dr. Sowada said the information is in the packet.

Finance and Audit Committee

Mr. Tardoni said the information is in the meeting packet.

The motion to approve the net potential bad debt of \$1,237,320.10 as presented by Ms. Tami Love, Chief Financial Officer, was made by Mr. Tardoni; second by Ms. Pendleton. Motion carried. Mr. Jones asked about the self-pay program that was supposed to bring that number down. Ms. Love referred to a report included in the monthly Finance and Audit Committee packet and said the information is staying fairly constant.

Building & Grounds Committee

Mr. Kelsey said the information is in the packet.

Foundation

Mr. Jones said there is something going on every day for the Red Tie Gala event. He said many businesses around town have been very supportive. The event is going well and we plan to finish strong. Mr. Jones expressed appreciation for the support we are receiving.

Compliance Committee

Mr. Kelsey reported information is in the packet.

Governance Committee

Mr. Jones said the information is in the packet.

Executive Oversight and Compensation Committee and Joint Conference Committee

Mr. Jones said Executive Oversight and Compensation is handled during Executive Session and there was nothing new to report for Joint Conference Committee.

BOARD REVIEW OF IPROTEAN

Mr. Tardoni facilitated the discussion. He said one of the basics of Board responsibility is related to finance. Mr. Jones said he enjoys and appreciates the ability to see how we are doing in comparison with other hospitals. Dr. Sowada said she liked the distinction between for-profit and not-for-profit hospitals and the strategies involved. Mr. Tardoni said he feels it was a good review regarding financial challenges. He said next month is cost control in challenging times.

CONTRACT REVIEW

Contracts Approved By CEO Since Last Board Meeting

There were no comments.

MEDICAL STAFF REPORT

Dr. Crofts reported the Medical Staff met and approved the bylaws and discussed Cerner. Dr. Crofts said she is so excited about Cerner. She said the Medical Staff are working on a leadership committee to facilitate medical staff issues and streamline.

GOOD OF THE ORDER

Mr. Tardoni said he was approached by people concerned about money and Covid. He said he points them to the Board packets to learn more. He said if you get attacked, try to find some way to educate.

Commissioner Smith said the Commissioners are trying to do their best to streamline and be productive with their time. They are looking at changes to their liaison system. They are going to a system where organizations do not have an assigned liaison but the entities come to the Board of County Commissioners to report quarterly. The Commissioners feel welcome to attend any and all meetings but in the essence of time they are moving to this system. Mr. Jones asked who should report quarterly. Commissioner Smith said it would be nice to have a variety of people. Ms. Richardson said she thinks it is a great idea and an opportunity for us to showcase what is going on and answer any questions. Commissioner Smith suggested submitting something in writing and then be available in person to answer any questions following review. He said the Commissioners will vote and then lay out a schedule and let us know. Mr. Jones thanked the Board of County Commissioners for their continuing support.

EXECUTIVE SESSION

Mr. Jones said there would be an executive session. He said the Board would leave the current meeting, go to another link, and then return to the original meeting for actions taken following executive session. He said the Board would take a 10-minute break and reconvene in executive session at 3:25 PM. The motion to go into executive session was made by Dr. Sowada; second by Mr. Kelsey. Motion carried.

RECONVENE INTO REGULAR SESSION

At 4:46 PM, the motion to leave executive session and return to regular session was made by Dr. Sowada; second by Mr. Kelsey. Motion carried.

ACTION FOLLOWING EXECUTIVE SESSION

Approval of Privileges

The motion to approve the credentials and privileges for providers discussed in executive session was made by Dr. Sowada; second by Mr. Tardoni. Motion carried.

Credentials Committee Recommendations from January 11, 2022

1. Initial Appointment to Locum Tenens Staff (1 year)
 - Dr. James Tackett, Hospitalist
2. Initial Appointment to Consulting Staff
 - Dr. Richard Jennis, Tele Radiology (VRC)

3. Reappointment to Active Staff
 - Dr. Brandon Chad Shelley, Podiatric Surgery
4. Reappointment to Consulting Staff (2 years)
 - Dr. Benjamin Bak, Tele Radiology (VRC)
 - Dr. Shaden Mohammad, Tele Radiology (VRC)
 - Dr. Sarah Lombardo, Tele ICU (U of U)
 - Dr. Sudha, Jayaraman, Tele ICU (U of U)
5. Reappointment to Locum Tenens Staff (1 years)
 - Dr. Preetpal Grewal, OB/GYN
 - Dr. Mark Uhlman, Urology
6. Reappointment to AHP Staff (2 years)
 - Starla Leete, Certified Nurse Midwife

The motion to approve the contract discussed in executive session and authorize the CEO to sign the contract was made by Dr. Sowada; second by Ms. Pendleton. Motion carried.

ADJOURNMENT

There being no further business to discuss, the meeting adjourned at 4:27 PM.

Mr. Taylor Jones, President

Attest:

Mr. Marty Kelsey, Secretary



Approved:

N/A

Review Due:

N/A

Document Area:

Administration

Reg. Standards:

MHSC COMPLIANCE PROGRAM

MHSC COMPLIANCE PROGRAM SUMMARY

Purpose of This Compliance Program

Memorial Hospital of Sweetwater County is committed to ensuring compliance with all applicable statutes, regulations and policies governing the Hospital's daily business activities. To that end, MHSC created a Compliance Program to serve as a practical guide that can be used by all Staff to assist them in performing their job functions in a manner that complies with applicable laws and policies. This Compliance Program is intended to further Staff's day-to-day commitment that Hospital operations comply with federal and state laws and to serve as a mechanism for preventing and reporting any violation of those laws.

It is the purpose and policy of the MHSC Compliance Program to:

- Educate all Staff about applicable laws and provide training in matters of compliance;
- Ensure periodic auditing, monitoring and oversight of compliance with those laws;
- Create an atmosphere that encourages and enables the reporting of noncompliance without fear of retribution; and
- Ensure mechanisms exist to investigate, discipline and correct noncompliance.

Contractors, vendors, temporary staff, contracted staff and others not defined as Staff below are also required to adhere to this Compliance Program and will be provided information as to intent and content of this Program during initial on-boarding.

COMPLIANCE PROGRAM

MHSC has created a comprehensive Compliance Program which includes:

Compliance Plan This document is comprised of the following sections: Definitions; Compliance Program Systems and Processes; and Reappraisal of overall Compliance Program and Plan.

[The Code of Conduct](#)

Staff are subject to the **Code of Conduct** which is an integral part of the Compliance Program. It contains specific policies related to Staff's personal conduct while performing their job duties at the Hospital. The primary objective of the Code of Conduct is to create a work environment that promotes cooperation, professionalism and compliance with the law. Compliance with the Code of Conduct is a significant factor in employee performance evaluations. **Medical Providers are subject to the Code of Conduct contained in the Medical Staff Bylaws and the Hospital's Code of Conduct.**

COMPLIANCE PLAN

SECTION I. Definitions of Commonly Used Terms

1. **Hospital-** means Memorial Hospital of Sweetwater County and all of its locations.
Staff- means all employees and volunteers of the Hospital.

SECTION II. COMPLIANCE PROGRAM SYSTEMS AND PROCESSES

The purpose of this section is to explain the various systems and processes that the Hospital has in place for the purpose of providing structure and support to the overall Compliance Program. This section explains the roles of the Compliance Officer and the Compliance Committee. It also contains information about Compliance Program education and training, auditing and corrective action. Most importantly, this section explains how to report violations anonymously.

Compliance Officers and Committee

Compliance Officer

- The Hospital has a Compliance Officer who serves as the primary supervisor of this Compliance Program. The Hospital's Compliance Officer occupies a high-level position within the organization and has authority to carry out all compliance responsibilities described in this Compliance Program. The Compliance Officer is responsible, together with leadership, for assuring that the Compliance Program is implemented to ensure that the Hospital maintains business integrity and that all applicable statutes, regulations and policies are followed.
- The Compliance Officer provides reports to the Board of Trustees about the Compliance Program and compliance issues. The CEO is responsible for supervising the work of the Compliance Officer, and maintaining the standards of conduct set forth in the Compliance Program. The Board of Trustees oversees all of the Hospital's compliance efforts and takes any appropriate and necessary actions to ensure that the Hospital conducts its activities in compliance with the law and sound business ethics.
- The Compliance Officer, the CEO and, if deemed necessary by the CEO, the Board of Trustees shall consult with legal counsel as necessary on compliance issues raised by the ongoing compliance review.

Responsibilities of the Compliance Officer

The Compliance Officer's responsibilities include the following:

- Overseeing and monitoring the implementation and maintenance of the Compliance Program.
- Reporting on a regular basis to the Board of Trustees (no less than annually) on the progress of implementation and operation of the Compliance Program and assisting the CEO in establishing methods to reduce the Hospital's risk of fraud, abuse and waste.
- Periodically reviewing and recommending changes to the Compliance Program in light of changes in the needs of the Hospital and changes in applicable statutes, regulations and government policies.
- Reviewing, at least annually, the implementation and execution of the elements of this Compliance Program.
- Developing, coordinating and participating in educational and training programs that focus on elements of the Compliance Program with the goal of ensuring that all appropriate Staff are knowledgeable about, and act in accordance with, this Compliance Program and all pertinent federal and state requirements.
- Ensuring that independent contractors and all other non-Staff of the Hospital are aware of the requirements of this Compliance Program as it applies to and affects the services provided by such contractors and agents.

- Ensuring that employees, independent contractors, and agents of the Hospital have not been excluded from participating in Medicare, Medicaid or any other federal or state health care program.
- Ensuring that the Hospital does not employ or contract with any individual who has been convicted of a criminal offense related to health care within the previous five years, or who is listed by a federal or state agency as debarred, excluded, or otherwise ineligible for participation in Medicare, Medicaid, or any other federal or state health care program.
- Coordinating internal compliance review and monitoring activities.
- In conjunction with supervisors and the Human Resources Department, investigating and acting on matters related to compliance, including design and coordination of internal investigations and making recommendations for any corrective action.
- Designating work groups or task forces needed to carry out specific missions, such as investigating or evaluating a proposed enhancement to the Compliance Program.
- The Compliance Officer has the authority to review all documents and other information relevant to compliance activities, including, but not limited to, patient records, billing records, records concerning marketing efforts and all arrangements with third parties, including without limitation employees, independent contractors, suppliers, agents and physicians.
- The Compliance Officer has direct access to the Board of Trustees, CEO and other senior management, and to legal counsel. The Compliance Officer, with approval of the CEO, has the authority to retain, as he or she deems necessary, outside legal counsel.

Compliance Committee

The Hospital has established a Compliance Committee to advise the Compliance Officer and assist in monitoring this Compliance Program. The Compliance Committee provides the perspectives of individuals with diverse knowledge and responsibilities within the Hospital.

The Board Compliance Committee shall consist of four (4) voting members and shall include the Chief Executive Officer, Compliance Officer, and two members of the Board of Trustees, one of whom shall serve as chair. The Compliance Auditor will be a non-voting member of the Committee and may serve as Secretary for meeting minutes.

Functions of the Compliance Committee

In fulfilling its charge, the Board Compliance Committee is responsible for the overseeing and all aspects of the Compliance Program as outlined in the Compliance Committee Charter.

Compliance as an Element of Performance

Attendance and participation in compliance training programs is a condition of continued employment. Failure to comply with training requirements will result in disciplinary action, including possible termination. The promotion of, and adherence to, the elements of this Compliance Program is a factor in evaluating the performance of all Hospital employees. Staff will be trained periodically regarding the Compliance Program, and new compliance policies that are adopted. Each staff member must sign the Acknowledgement of Receipt of Hospital Compliance Plan and annually sign the Conflict of Interest Certification form.

Supervisors will be subject to discipline for failure to adequately instruct their subordinates on matters covered by the Compliance Program. Supervisors will also be subject to discipline for failing to detect violations of the Compliance Program where reasonable diligence on the part of the supervisor would have led to the discovery of a problem or violation and thus would have provided the Hospital with the opportunity to take corrective action.

Training and Education

The Hospital acknowledges that this Compliance Program will be effective only if it is communicated and explained to Staff on a routine basis and in a manner that clearly explains its requirements. For this reason, the Hospital requires all Staff to attend specific training programs on a periodic basis. Training requirements and scheduling are established by the Hospital for its departments and affiliates based on the needs and requirements of each department and affiliate. Training programs include appropriate training in federal and state statutes, regulations, guidelines, ethical behavior, and policies described in this Compliance Program. Training will be conducted by Staff. New employees will be provided compliance training during orientation. Compliance will be part of annual education for all staff. Adherence with the provisions of this Compliance Program, including training requirements, is a factor in the annual evaluation of each Hospital employee. Training may include sessions highlighting this Compliance Program, summarizing fraud and abuse laws, physician self-referral laws, claims development and submission processes, and related business practices that reflect current legal standards. In addition to annual education on compliance, compliance training will be provided to Staff as needed and requested.

The Compliance Officer evaluates the content of the training program at least annually to ensure that the subject content is appropriate and sufficient to cover the range of issues confronting the Hospital's employees. The training program is modified as necessary to keep up-to-date with any changes in federal and state health care program requirements, and to address results of the Hospital's audits and investigations; results from previous training and education programs; trends in reporting; and guidance from applicable federal and state agencies. The appropriateness of the training format is evaluated by reviewing the length of the training sessions; whether training is delivered via live instructors or via computer-based training programs; the frequency of training sessions; and the need for general and specific training sessions.

The Board of Trustees will be provided periodic training, not less than annually, on fraud and abuse laws and other compliance matters.

Lines of Communicating and Reporting

Submitting Questions or Complaints

Individuals may utilize any of the following options to communicate a concern or raise a question associated with the Hospital's Compliance Program:

- Via the on-line Red Flag Reporting Program
- Via a phone message to Red Flag Reporting
- Via an email to Red Flag Reporting or
- Via an in person report to Hospital's Compliance Officer

The most anonymous way to communicate a concern or raise a question is via the on-line Red Flag Reporting Program. This reporting program is staffed by a third party and a message delivered this way can help ensure confidentiality (see important note below). The program is available seven days a week all year. Posters with the Hospital's specific code needed to file a report are located throughout the Hospital, MOB and Family Practice Clinic.

Important Note: Communications regarding concerns and questions are treated as privileged to the extent permitted by applicable law; however, it is possible that the identity of a person making a report may become known. Governmental authorities or a court may compel disclosure of the name of the reporting person.

Matters reported via one of the options stated above that suggest violations of compliance policies, statutes or regulations, are documented and investigated promptly. A log is maintained by the Compliance Officer of calls or communications, including the nature of any investigation and subsequent results. A summary of this

information is included in reports by the Compliance Officer to the Compliance Committee, CEO and Board of Trustees.

Non-Retaliation Policy

It is the Hospital's policy to prohibit retaliatory action against any person for making a report, anonymous or otherwise, regarding compliance. However, Hospital Staff cannot use complaints to the Compliance Officer to insulate themselves from the consequences of their own wrongdoing or misconduct. False or deceptive reports may be grounds for termination. It will be considered a mitigating factor if a person makes a forthright disclosure of an error or violation of this Compliance Program, or the governing statutes and regulations.

Enforcing Standards and Policies

Code of Conduct and related policies

It is the policy of the Hospital to appropriately discipline Hospital Staff who fail to comply with the Code of Conduct adopted pursuant to the overall Hospital Compliance Program or any federal or state statutes or regulations.

Discipline Procedures

Employees found to have violated any provision of the Compliance Program are subject to discipline consistent with the policies set forth herein, including termination of employment if deemed appropriate by the Hospital. Any such discipline is within the sole discretion of the Hospital. Each instance involving disciplinary action shall be thoroughly documented by the employee's supervisor (in conjunction with HR) and the Compliance Officer. Upon determining that an employee of the Hospital or any of its affiliates has committed a violation of this Compliance Program, such employee shall meet with his or her supervisor to review the conduct that resulted in the violation. The employee and supervisor will meet with the Compliance Officer to discuss any actions that may be taken to remedy such violation. All employees are expected to cooperate fully with the Compliance Officer and supervisors during the investigation of the violation. If deemed appropriate, legal counsel will be consulted prior to final actions or disciplinary measures imposed by supervisory personnel.

Auditing and Monitoring

The Hospital conducts periodic monitoring of this Compliance Program. Compliance reports created by this monitoring, including reports of suspected noncompliance, will be reviewed and maintained by the Compliance Officer and shared with the Compliance Committee.

- The Compliance Officer will develop and implement an audit plan. The plan will be reviewed at least annually to determine whether it addresses the proper areas of concern, considering, for example, findings from previous years' audits, risk areas identified as part of the annual risk assessment, and high-volume services.
- Periodic compliance audits are used to promote and ensure compliance. The audits will focus on specific programs or departments of the Hospital, including external relationships with third-party contractors. These audits are designed to address, at a minimum, compliance with laws governing kickback arrangements, physician self-referrals, claims development and submission (including an assessment of the Hospital's billing system), reimbursement and marketing. All Staff are expected to cooperate fully with auditors during this process by providing information, answering questions, etc. If any employee has concerns regarding the scope or manner of an audit, the employee should discuss this with his or her immediate supervisor.

- The Hospital shall conduct periodic reviews, including unscheduled reviews, to determine whether the elements of this Compliance Program have been satisfied. Appropriate modifications to the Compliance Program will be implemented when monitoring discloses that compliance issues have not been detected in a timely manner due to Compliance Program deficiencies.

Corrective Action

Violations and Investigations

- Violations of the Compliance Program, failure to comply with applicable federal or state laws, and other types of misconduct threaten the Hospital's status as a reliable and honest provider of health care services. Detected but uncorrected misconduct can seriously endanger the Hospital's business and reputation, and can lead to serious sanctions against the Hospital. Consequently, upon reports or reasonable indications of suspected noncompliance, prompt steps to investigate the conduct in question will be initiated under the direction and control of the Compliance Officer to determine whether a material violation of applicable law or the requirements of the Compliance Program has occurred. The Compliance Officer may create a response team to review suspected noncompliance including representatives from the compliance and other relevant departments.
- If such a violation has occurred, prompt steps will be taken to correct the problem, taking into account the root cause of the problem. As appropriate, such steps may include an immediate referral to criminal and/or civil law enforcement authorities, a corrective action plan, a report to the Office of Inspector General (OIG) or any other appropriate government organization, and/or submission of any over-payments. The specific steps that are appropriate in any given case will be determined after consultation with legal counsel.
- Depending upon the nature of the alleged violations, the Compliance Officer's internal investigation could include interviews with relevant Staff and a review of relevant documents. The CEO must approve all engagement of legal counsel, auditors or health care experts selected by the Compliance Officer to assist in an investigation where the Compliance Officer and supervisor deems such assistance appropriate. Complete records of all investigations will be maintained which contain documentation of the alleged violations, a description of the investigative process, copies of interview notes and key documents, a log of the witnesses interviewed and the documents reviewed, results of the investigation (e.g., any disciplinary action taken), and corrective actions implemented.
- If an investigation of an alleged violation is undertaken and the Compliance Officer believes the integrity of the investigation may be at stake because of the presence of employees under investigation, those employees will be removed from their current work activity until the investigation is completed. Where necessary, the Compliance Officer will take appropriate steps to secure or prevent the destruction of documents or other evidence relevant to the investigation.

Reporting to Federal Agencies

- If the Compliance Officer or a management official discovers credible evidence of misconduct from any source and, after reasonable inquiry, has reason to believe that the misconduct may violate criminal, civil or administrative law, then the misconduct will promptly be reported as appropriate to the OIG or any other appropriate governmental authority or federal and/or state law enforcement agency having jurisdiction over such matter. Such reports will be made by the Compliance Officer after review and approval by the CEO on a timely basis. Supervisors will be made aware that such report is being filed.
- All over-payments identified by the Hospital shall be promptly disclosed and/or refunded to the appropriate public or private payer or other entity.

SECTION III. REAPPRAISAL OF OVERALL COMPLIANCE PROGRAM AND COMPLIANCE PLAN

The Compliance Program as a whole and this Compliance Plan will be reviewed on an ongoing basis. The review process occurs in order to evaluate the effectiveness of the Compliance Program, to reflect current practices and changes, to ensure that appropriate services are monitored, delivered, and evaluated in accordance with the Compliance Program.

MHSC believes that by implementing an effective Compliance Program it will achieve better quality control and reduce the risk of future criminal and civil liabilities. MHSC recognizes that the implementation of a compliance program may not entirely eliminate fraud, abuse and waste. However, a sincere effort by Hospital to comply with applicable federal and state standards through the establishment of an effective compliance program significantly reduces the risk of unlawful or improper conduct.

APPENDIX List of federal and state statutes and regulations related to the Hospital's Compliance Program.

Attachments

[Appendix to Compliance Program.docx](#)

DRAFT

Board Policy

CEO Evaluation Policy

Purpose:

The purpose of the Chief Executive Officer (CEO) Performance Evaluation Policy is to provide a documented process for the Board to follow for evaluating the CEO's performance, providing him/her with feedback, and determining his/her compensation.

Policy:

It is the duty of the Board of Trustees (Board) to annually evaluate the performance of the Chief Executive Officer (CEO). The purpose of the CEO evaluation is to provide timely, clear, and focused feedback to the CEO about how well s/he is 1) performing in the key performance areas identified as most critical by the Board of Trustees in achieving the Hospital's strategic objectives; 2) managing the hospital in a manner consistent with its mission, vision, and values; and 3) conducting business in compliance with commonly accepted business practices and professional ethics.

Procedure:

1. The CEO shall be evaluated annually, at the last meeting of Hospital's fiscal year. The evaluation shall be based on criteria annually established by the Board¹ and the CEO.
2. The criteria used to evaluate the CEO shall be based on a variety of factors that support the hospital's mission, vision, values, and strategic goals.
3. Performance may be evaluated using the American Hospital Association's (AHA) *CEO Assessment* form that has been customized to fit the Hospital's needs, or using a monthly interview process where the chairs of the Board's Committees provide feedback, as well as soliciting the CEO's perspective.
4. Regardless of method used, the CEO shall be evaluated using criteria established by the Board and agreed to by the CEO.
5. Procedure for using the American Hospital Association's *CEO Assessment* form.
 - a. March, the chair of the Executive Oversight & Compensation (EO&C) committee shall contact the AHA to have form customized to fit Hospital's needs and have customized form sent to all Board members.
 - b. April, Board members shall return completed forms to AHA, who will compile responses into a summary report that reveals an overall performance rating in each area and a summary of comments made by Board members and the CEO.
 - c. May, the EO&C Committee shall review the results with the CEO and shall also review the CEO's proposed goals for the coming year, ensuring mutually agreement and commitment.

¹ Criteria is recommended by the Board's Executive Compensation & Oversight Committee and approved by the Board.

d. June, the Board chair shall compile, for Board approval, a final report of the CEO's performance evaluation and goals for the upcoming fiscal year.

6. Procedure for using the monthly interview process.

a. Each month, Committee chairs, as well as Committee members, may provide feedback regarding the CEO's performance as it relates to that committee's work regarding the Hospital's mission, vision, and goals, as well as soliciting the CEO's perspective.

b. June, the Board chair shall compile, for Board approval, a final report of the CEO's performance evaluation and goals for the upcoming fiscal year.

Approved: N/A

Review Due: N/A

Document Area: *General - Housewide*

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



Patient Safety Plan

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, as well as supporting an unrelenting commitment to safety and to do no harm. This culture allows our organization to consistently identify opportunities to improve performance and safety, while maintaining a commitment to responsible stewardship of resources as aligned with MHSC's mission, vision, values, and strategic objectives. The Patient Safety Plan cultivates an organization-wide approach and provides a coordinated and collaborative effort to patient safety.

Purpose

MHSC strives for staff to feel supported, safe and empowered in speaking up about errors, Good Catches/ near misses, and related opportunities for improvement. MHSC promotes a "Just Culture" of safety which balances a non-punitive learning environment with an equally important need to hold people accountable for their actions. Just Culture is a value supported system of accountability that allows individuals to report occurrences in an atmosphere of trust. The purpose of MHSC's Patient Safety Plan is to build a framework for the delivery of safe care, perpetuate a culture of safety, improve patient safety and reduce risk to patients through reducing variability in care processes, increasing reporting of safety events, and overall reduction of preventable adverse events.

Scope

The Patient Safety Plan is organization wide and encompasses patients, visitors, volunteers, medical staff, and staff. The plan addresses maintenance and improvement of patient safety issues in all departments throughout the organization.

Objectives

- I. To acknowledge risks to patient safety such that medical and human errors will occur in a complex environment
- II. To recognize and report errors and risks to patient safety within a Just Culture
- III. To engage staff in internal reporting by:
 - A. Ensuring a non-punitive approach to patient safety event reporting
 - B. Educating staff on identifying patient safety events that should be reported
 - C. Providing timely feedback regarding actions taken on patient safety events
- IV. To promote patient safety through effective management of identified risks and prevention of adverse events
- V. To reduce the opportunity for harm and improve safety mechanisms
- VI. To minimize blame or unfair treatment for reporting or involvement in errors
- VII. To collect and analyze data to ensure proper prioritization of process improvements
- VIII. To identify risk through trending of confidential patient safety occurrence information from individual event reports and aggregate data reports
- IX. To integrate patient safety priorities into the design and redesign of all relevant organizational processes, functions, and services
- X. To create an accountable Culture of Safety
- XI. To investigate and analyze with a focus on process and system improvements
- XII. To utilize a standardized tool which offers a clear, equitable and transparent process for recognizing and separating blameless errors from unsafe or reckless act (Appendix A-Just Culture Algorithms).
- XIII. To provide open communication regarding patient safety risks, events, and system-based improvements
- XIV. To provide open communication with patients and families about medical errors that occur (See Disclosure of Medical Events Policy)
- XV. To facilitate organizational learning about patient safety occurrences
- XVI. To use education as a key strategy for prevention of patient safety issues based on needs specific to the organization
- XVII. To identify at least one high-risk patient safety process selected at a minimum of every 18 months for proactive risk assessment. The following may be considered, but not limited to, when selecting a proactive risk assessment:
 - A. The Joint Commission Sentinel Event alerts
 - B. Core Measure performance data
 - C. Occurrence reporting information

D. Performance Improvement Priority Matrix (see Performance Improvement and Patient Safety (PIPS) Plan)

E. Information from external sources: state, federal and current literature

XVIII. To support initiatives that promote person-centered care and involvement

XIX. To identify patient perception of safety issues using patient satisfaction survey data

XX. To regularly evaluate staffs' perception of the organizations' culture of safety using a valid and reliable survey tool, and to implement improvements identified from survey results

Definitions

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

Patient harm: Unintended physical or psychological injury or damage resulting from or contributed to by medical care that requires additional monitoring, treatment, or hospitalization, or that results in death.

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

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

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

Zero tolerance for reckless behavior: MHSC will not tolerate any reckless behavior or willful violations that may place a patient, provider or staff at risk, or results in abuse. These behaviors will result in disciplinary action or termination, please see the [Employee Corrective Action](#) policy for further information.

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

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

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

Organization and Accountability

MHSC recognizes that all staff have an impact on patient safety. All staff are expected to participate in patient

safety activities and encouraged to offer suggestions and recommendations through their involvement in occurrence reports, patient safety initiatives, department meetings, and other formal and informal means.

Board of Trustees

- I. Hold Senior Leadership accountable for promoting and modeling behaviors consistent with Just Culture, as well as overseeing actions to improve patient safety throughout the organization
- II. Review and approve Patient Safety Plan annually
- III. Review annual written report provided by Patient Safety Committee
- IV. Ensure quality and safety are at the core of the organization's mission
- V. Ensure quality and safety values are embedded in guiding the organization's strategic plan

Senior Leadership Team

- I. Create and maintain a culture of safety at the hospital that supports effective implementation of the Patient Safety Plan
- II. Provide the resources necessary for the effective implementation of the Patient Safety Plan
- III. Define, in writing, the following terms:
 - A. Patient safety event
 - B. Adverse events
 - C. Adverse drug events
 - D. Medication errors
 - E. Sentinel events
 - F. Good Catch/close call/near miss
- IV. Disseminate these definitions throughout the organization
- V. Set expectations for improvement work based on results from the Culture of Safety survey
- VI. Participate in regular safety rounds
- VII. Encourage communication of ongoing efforts to improve safety in the organization

Leadership Team

- I. Create and maintain a culture of safety that supports effective implementation of the Patient Safety Plan
- II. Inform staff of patient safety initiatives
- III. Encourage participation in patient safety principles and initiatives, performance improvement, and problem-solving processes
- IV. Ensure completion of performance improvements and action plans
- V. Provide the foundation for an environment that supports Just Culture and patient safety by:
 - A. Promoting learning
 - B. Motivating staff to uphold a fair and Just Culture of safety
 - C. Providing a transparent environment in which quality measures and patient harms are freely shared with staff
 - D. Modeling professional behavior by adopting and promoting the MHSC Code of Conduct that defines

acceptable behavior as well as behaviors that undermine a culture of safety.

E. Addressing intimidating behavior that undermines the safety culture so as not to inhibit others from reporting safety concerns

F. Educating staff and holding them accountable for professional behavior

VI. When a patient safety event occurs, provide resources and mechanisms for support as necessary following a patient safety event

A. Examples include but are not limited to, debriefing, counseling, and resources provided through the employee assistance program

VII. Disseminate lessons learned from safety events

Medical Staff

I. 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)

II. Know and understand the culture of safety, the role of occurrence reporting in the culture of safety, and their rights and responsibilities under the culture of safety

III. Report all observed or suspected patient safety events (both events that do and do not reach the patient, and do or do not cause harm to the patient) immediately, and document events through designated reporting software

IV. Participate in any investigative activities including but not limited to the following:

A. Describe, in writing, the situation and event

B. Any clinical data related to the event (for example, patient's vital signs, medication name and dosage, and so on)

Identify any other staff members who were present during the event

C. Answer questions from the individual(s) investigating the event

D. Collaborate with Quality department, department directors and others as appropriate, to design and implement corrective actions and monitor the results

V. Provide the foundation for an environment that supports Just Culture and patient safety by:

A. Modeling professional behavior by adopting and promoting the MHSC Code of Conduct that defines acceptable behavior as well as behaviors that undermine a culture of safety.

B. Addressing intimidating behavior that undermines the safety culture so as not to inhibit others from reporting safety concerns

Quality Department

I. Facilitate education about patient safety principles to the Board of Trustees

II. Coordinate and provide patient safety education at new employee orientation and to staff annually

III. Collaborate with department directors to determine whether a reported patient safety event is likely to be repeated

IV. Conduct a Root Cause Analysis - see Sentinel Event Policy for more information

Patient Safety Committee

Please see the Patient Safety Committee Charter for details on the responsibilities of the Patient Safety Committee.

Staff and Volunteers

- I. Know and understand the organizational definitions of the following terms, as provided by leadership:
 - A. Patient safety event
 - B. Adverse events
 - C. Adverse drug events
 - D. Medication errors
 - E. Sentinel events
 - F. Good Catch/close call/near miss
- II. Comply with all hospital policies and procedures related to patient safety that apply to their position and job duties
- III. Know and understand the culture of safety, the role of occurrence reporting in the culture of safety, and their rights and responsibilities under the culture of safety
- IV. Improve the culture of safety and accountability by employing a “see something, say something, do something” approach
- V. Report all observed or suspected patient safety events (both events that do and do not reach the patient, and do or do not cause harm to the patient) to their department manager or supervisor immediately, and document events through designated reporting software
- VI. Participate in any investigative activities including but not limited to the following:
 - A. Describe, in writing, the situation and event
 - B. Any clinical data related to the event (for example, patient’s vital signs, medication name and dosage, and so on)
 - C. Identify any other staff members who were present during the event
 - D. Answer questions from the individual(s) investigating the event
 - E. Collaborate with Quality department, department directors and others as appropriate, to design and implement corrective actions and monitor the results
- VII. Participate in improvement activities related to the Patient Safety Plan
- VIII. Constantly hold patient safety at the forefront and continue to advocate for changes where opportunities are identified
- IX. Encourage patients and their family members to speak up when they observe or suspect a patient safety event or if they have questions about the safety of a system or process
- X. For further information please refer to [Occurrence Reporting](#) and/or [Sentinel Event Policy](#).

Data

Monitor data that is further specified and defined in the PIPS Plan and Patient Safety Committee Charter. Information from data analysis is used to make changes that improve performance and patient safety and

reduce the risk of sentinel events. Please see Patient Safety Committee charter Data heading for details.

Communication

Patient safety initiatives, lessons learned, and patient safety improvement work will be communicated as appropriate throughout the organization. Communication will occur through:

- I. Quality Committee of the Board
- II. PIPS Committee
- III. Patient Safety Committee
- IV. Leadership meetings
- V. Medical Staff meetings
- VI. Staff meetings
- VII. Department white boards, electronic communication, patient safety rounding, the patient safety newsletter, and communication books

Confidentiality

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

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Reviewed and Approved:

Patient Safety Committee: November 18th, 2021

MEC: November 23rd, 2021

Quality Committee of the Board: February 16th, 2022

Board of Trustees

Attachments



[just-culture-process-algorithm_725x425px-96dpi_1.jpg](#)

[Patient Safety Committee Charter.docx](#)

Present: **Voting Members:** Kara Jackson (Quality Director), Dr. Barbara Sowada (Quality Board Chair), Dr. Kari Quickenden (CCO), Ann Marie Clevenger (CNO), Ed Tardoni (Quality Board Member), Irene Richardson (CEO), Leslie Taylor (Clinic Director), Dr. Melinda Poyer (CMO), Dr. Jacques Denker, Tami Love (CFO), Dr. Alicia Gray,

Non-voting Members: Noreen Hove, Cindy Nelson, Jennifer Rogers, Taylor Jones (Board of Trustees Chair), Valerie Boggs, Corey Worden, Karali Plonsky,

Absent/Excused: **Voting Members:**

Non-voting Members: Kalpana Pokhrel

Guests: Kandi Pendleton (Board of Trustee)

Chair: Dr. Barbara Sowada

Call to Order & Introductions

Dr. Sowada called the meeting to order at 8:15. Ms. Jackson introduced Jennifer Roger, newest member of the Quality Team.

Approval of Agenda & Minutes

Dr. Sowada presented the Agenda for approval. Mr. Tardoni motioned to approve, Dr. Poyer seconded, Motion was approved.

Dr. Sowada presented the January 19, 2022 Quality Minutes for approval. Mr. Tardoni motioned to approve, Dr. Quickenden seconded. Motion approved.

Mission Moment

Ms. Richardson read two mission moments provided by Ms. Plonsky from two patient surveys from the ED.

Old Business

Ms. Jackson presented the Patient Safety Plan. Dr. Sowada noted Mr. Tardoni's comments from the last meeting had been addressed. The motion to approve the Plan to forward to the Board for review was made by Ms. Richardson, seconded by Dr. Poyer. Motion carried.

Control Charts: Ms. Jackson said we don't have any control charts to present yet. She said we will work on those soon and are excited to do that. Dr. Quickenden noted there is a lot of work on those measures that goes on in the background, especially related to the star ratings. Dr. Quickenden also noted we are working closely with Dr. Wheeler on PC 6 under "other standards." She said there is a lot of work going on. We will prioritize. Dr. Sowada reminded the group to keep the denominator in focus as well as the raw number. Mr. Tardoni elaborated on the process. Dr. Sowada said we want to look at our hospital in relation to the national standard.

Our numbers are really too small to fit into that math. Mr. Tardoni mentioned software and said he hopes we see some movement in control charts by the next meeting. Dr. Quickenden said we hope Cerner will offer some reporting options.

Measure PI Discussion: Ms. Jackson said she has been talking with Dr. Sowada about how deep we've been diving in the data. She said we are looking at coding and the documentation side. She reviewed some examples and said there is a lot of work going on behind the scenes with all of the measures.

Dr. Sowada requested from Dr. Clevenger that when the Trauma report deficiencies are corrected could we get an update and bring back the report to Quality.

New Business

Ms. Plonsky reviewed the Press Ganey Report findings. Surveys are important, we want to provide compassionate care. The patient's perception is their reality.

Ms. Plonsky started by reviewing Survey Response rates and how we compared nationally and regionally – both which were only a few percentage points over us. According to Press Ganey, for a facility our size, these response rates are not atypical.

Who is answering our surveys? In 2021, 415 inpatient surveys were received, 35.9% were negative, but 48.7% were Positive. We need to focus on providing consistent high levels of care to all patients. The split numbers show maybe we aren't always providing consistent care.

Take-Aways: 1) Decrease in Likelihood to Recommend, 2) Decrease in survey participation, 3) Survey response rates are comparable to national and regional averages.

Words of wisdom shared by Press Ganey: Establish a shared definition of patient experience, define some "always" behaviors, and to remember our workforce is truly the center of our patient experience.

Ms. Richardson shared a patient story that highlighted our efforts. At an offsite meeting an attendee shared her experience at the hospital. She said she had had Same Day Surgery and how wonderful everyone was from Admitting to OR. She said she had been to other facilities and that "we were the best", we took time to care and comfort her and she didn't feel rushed out the door.

Mr. Jones noted it was nice to see the numbers and how many are positive, and maybe this is a message we need to share – "pat ourselves on the back".

Dr. Quickenden stated the hand-off from Dr. Crofts to Dr. Denker was attended by herself and Ms. Richardson. He was updated him on what Quality has been working on. Plus, we asked Dr. Crofts to move forward in asking the medical staff "what is important to them?". Dr. Crofts has some ideas on what to work on with the medical staff.

Ms. Jackson gave an overview of Synergi. It went live 2 weeks ago, and seems to be working well. We rolled it out low-key, training staff individually, to prevent overload with the Pandemic and other system roll-outs. So far, the Quality team has trained 357 individuals! Ms. Hove stated what a wonderful system and job the Quality department has done.

Medical Staff Update

Dr. Poyer gave the physician update, starting with 2 examples of "Compassionate care for every life we touch". 1) Dr. Gray is a star in our hospital! She routinely and consistently goes above and beyond. Just yesterday she spent 4 hours working with a patient, the ED physicians and University of Utah to get them to Huntsman, during the pandemic and when they are so full. 2) Dr. Raoul Pawar for working with emergent patients. We are not approved for urgent or emergent dialysis, except in situations where we are not able to get a patient to another center, and without dialysis would die. We have been able to urgently able to dialysis several patients because of Dr. Pawar.

Currently we have 4 COVID+ patients in the hospital. We have seen a decrease in volume in Swab line, although still at 30% positivity rate. In last 7 days we have had 158 new positives, our county rate is decreasing to 14.7%. We have seen a decrease in hospitalizations and ED visits. 100% of Providers are vaccinated and 92% of staff – with 12 currently out due to COVID.

We are in constant conversation with Dr. Hopkins, Interim ED Medical Director, regarding fibrinolytic, sepsis and stroke cases. We continue to look at all the measures that fall into our Star rating. Control Charts are up for Sepsis and once we Go-Live with Cerner we are looking forward to more Control Charts as they are an outstanding way to look at that data.

Physician driven quality measures will be led by Dr. Crofts in her new position as Chief of Staff.

Informational Items for Review/Discussion

Dr. Sowada requested one pull out and Ms. Jackson gave an update to the Star Rating. It was discovered and shared by CMS that our data from performance period January 2019 – December 2019 had a calculation error by CMS on OP10 and within the Star Rating. They will be recalculating and sharing that information with our internal review this Spring – in July.

Dr. Sowada requested attention to "Median Admit Decision Time to Departure Time", which is a line of "red". Dr. Sowada suggested looking at this could be a patient and staff satisfier. Dr. Clevenger noted this is a topic that has come up repeatedly over the years, often with a high-level group, but we are currently creating a frontline team to review.

Dr. Sowada brought the meeting to a close with the gift of a few minutes!

Meeting Adjourned

The meeting adjourned at 9:38 am

Next Meeting

March 16, 2022 at 08:15 am via ZOOM.

Respectfully Submitted,

Robin Fife, Recording Secretary

PRESS GANEY REPORT

KARALI PLONSKY, QUALITY ANALYST

FEBRUARY 2022

“I’ve learned that people will forget what you said, people will forget what you did, but people will never forget how you made them feel.” – Maya Angelou

SURVEY RESPONSE RATES

National and Regional Data vs Professional Research Consultants (PRC) and Press Ganey				
Survey Mode	Inpatient (OB, MS, ICU)	Emergency Department	Surgery Department	Medical Practice (Clinics)
2020 National Data				
Mail	→ 24.7%	9.2%	32.1%	18.5%
Phone	18.8%	36.9%	22.3%	43.2%
Email	16.2%	9.6%	21.1%	13.4%
Text	13.3%	13.3%	22.7%	13.5%
2020 Region 8 Data				
Mail	→ 25.5%	25.5%	31.7%	17.1%
Phone	18.9%	18.9%	24.5%	32.4%
Email	13.0%	13.0%	16.6%	24.5%
Text	14.0%	14.0%	12.6%	23.7%
2019 MHSC PRC Data				
Phone	→ 19.6%	18.4%	16.3%	NA
2021 MHSC Press Ganey Data				
Mail (CMS approved surveys only)	→ 22.60%	Not CMS mandated surveys		
Mail (Approved and unapproved surveys)	18.7%	9.2%	24.0%	13.6%
Phone	NA	NA	NA	NA
Email	11.1%	6.1%	18.3%	6.3%
Text	11.8%	6.4%	9.7%	5.3%
Return Rate for all MHSC Survey Modes	18.7%	9.2%	23.3%	11.9%

Colored cells are compared with National averages

Green = at or above the national average, Yellow = within 5% of the National average, Red = below 5% of the national average

SENT VS RECEIVED PRESS GANEY SURVEYS IN 2021

Sent vs Received Press Ganey Surveys in 2021				
	Inpatient (OB, MS, ICU)	Emergency Department	Surgery Department	Medical Practice (Clinics)
January - June 2021				
# of Surveys Sent	730	4126	496	1793
# of Surveys Received	153	375	122	210
% of Surveys Received	21.0%	9.1%	24.6%	11.7%
# of Undeliverable Surveys	18	194	3	89
% of Undeliverable Surveys	2.5%	4.7%	0.6%	5.0%
July - December 2021				
# of Surveys Sent	793	4463	366	1987
# of Surveys Received	123	368	73	218
% of Surveys Received	15.5%	8.3%	20.0%	11.0%
# of Undeliverable Surveys	32	307	21	91
% of Undeliverable Surveys	4.0%	6.9%	5.7%	4.6%
Total for 2021				
# of Surveys Sent	→ 1523	8598	862	3780
# of Surveys Received	276	743	195	428
% of Surveys Received	→ 18.7%	9.2%	23.3%	11.9%
# of Undeliverable Surveys	50	501	24	180
% of Undeliverable Surveys	→ 3.3%	5.8%	2.8%	4.8%

2021 SURVEY RESPONSE RATES FOR INPATIENT UNITS

Sent vs Received Press Ganey Surveys in 2021 by Inpatient Unit												
	January	February	March	April	May	June	July	August	September	October	November	December
OB												
# of Surveys Sent	38	35	54	43	52	45	43	48	48	46	52	59
# of Surveys Received	6	5	7	5	6	8	1	10	4	1	5	2
% of Surveys Received	16.2%	15.2%	13.0%	12.2%	11.8%	18.6%	2.4%	20.8%	8.3%	2.2%	10.0%	3.6%
ICU												
# of Surveys Sent	12	10	19	14	18	16	0	0	15	18	19	25
# of Surveys Received	4	4	5	7	5	3			2	0	4	3
% of Surveys Received	25.0%	40.0%	26.3%	50.0%	27.8%	18.8%			14.3%	0.0%	22.2%	12.0%
Med/Surg												
# of Surveys Sent	64	51	66	59	55	70	70	72	73	84	64	52
# of Surveys Received	11	10	14	20	16	18	21	16	15	19	12	8
% of Surveys Received	17.4%	20.4%	21.9%	34.5%	29.6%	26.9%	31.8%	22.9%	22.4%	24.4%	20.0%	15.4%



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.*

To: Board of Trustees
 From: Barbara J. Sowada, Chair
 Re: Human Resources Committee Meeting
 Date: February 21, 2022

The Human Resources Committee met February 21st from 3:00 to 4:00 pm by Zoom.

Major discussion items were as follows:

- ✓ Turnover report showed 129 employees left MHSC in 2021, compared to 67 in 2020. Number of employees in January was 566. There are 70 open positions. If all 70 positions are filled, there would be over 600 employees—more employees than ever before. Irene has asked for a report of the current number of employees per department compared to 2019.
- ✓ Contract labor continues to be a concern. Because of the time it takes to recruit and orient a new employee, the goal is to gradually reduce contract labor. The goal is to have little or no contract labor by December, 2022.
- ✓ MHSC comparison to AHA Environmental Scan for labor data. MHSC spreadsheet and AHA link below.

Excel AHA Environmental Scan - Labor Costs I... Edit in Browser Download

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fx						
A	B	C	D	E	F	G
	FY2019	FY2020	FY2021	YTD FY2022	PRJ FY2022	
Clinical Labor	14,369,830	14,983,529	16,069,711	11,188,301	23,998,452.00	
Contract cost	1,021,278	881,515	1,874,887	2,810,796	4,818,507.43	
Contract FTEs	6.1	5.9	10.6	11.8	12.5	
Operating margin	0.05%	-1.72%	-6.06%	-1.78%	-4.20%	
Total expenses	86,733,112	90,749,787	99,062,923	62,626,834	107,360,286.86	
Labor expense	38,658,551	39,896,869	46,419,638	28,797,276	49,366,758.86	
Supply expense	13,044,020	14,102,988	15,162,632	10,168,702	17,432,060.57	
Drug expense	7,056,448	7,104,533	7,516,202	5,357,196	9,183,764.57	

M

MHSC and AHA Data Showing Percent Increase from 2019 to PRJ 2022		
	MHSC	AHA
Total Expenses	↑24%	↑17%
Labor Expenses	↑28%	↑16%
Supply Expenses	↑34%	↑20%
Drug Expenses	↑30%	↑37%

2022 Environmental Scan | AHA

<https://www.aha.org/environmentalscan>

- ✓ AHA Environmental Scan details the many effects of covid on American hospitals. The effect of covid on MHSC is similar to that experienced nationally.
- ✓ Social Media Policy was reviewed and deemed ready to present to the Board for its first reading. This needed policy replaces an earlier policy that is now out of date.
- ✓ Staff engagement survey will go forward. Hospital has a contract with the Gallagher Company to do the second survey. The first was conducted two years ago and was scheduled to begin July, 2021. Time frame for survey is to be determined.
- ✓ Senior Leadership and Board members went in to executive decision to discuss a variety of staffing issues. No decisions were made.

For more detail, see the reports and minutes of this meeting that are included in the March Board packet.

Next HR meeting will be March 21st.

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
Human Resources Committee Meeting – Minutes Draft
Monday – February 21, 2022

Zoom

Trustee Member Present by Zoom: Barbara Sowada, Kandi Pendleton
Voting Members Present by Zoom: Amber Fisk, Irene Richardson, Suzan Campbell
Non-Voting Members & Guests Present by Zoom: Taylor Jones, Tami Love, Kari Quickenden, Ann Clevenger, Amy Lucy, Ruthann Wolfe, Shawn Bazzanella, Edward Boggs, Cindy Nelson

Barbara called the meeting to order and welcomed guests.

APPROVAL OF AGENDA

The motion to approve the agenda with the addition of an update on the employee survey under old business was made by Kandi, second by Irene. Motion carried.

APPROVAL OF MINUTES

The motion to approve the January minutes as presented was made by Amber, second by Irene. Motion carried.

ROUTINE REPORTS

Turnover

Barbara asked for questions or concerns. Amber said there was nothing notable. Amber said our overall turnover rate for the rolling 12-month period is 24%.

Open Positions

Amy said we have the same number of openings as was reported last month: 70. Barbara asked for more information on the number of staff in the Respiratory Department. Ann said normally six plus one Tech. Irene requested a report that shows the total number of FTE's now compared to this time last year by department and then employee totals. Kandi asked about the high turnover with nutrition services and patient access. Amber said it is not above and beyond what is normal in those entry level positions.

Contract Staffing

Irene said we need to set a goal with a timeline for how long it will take to recruit and train so we can say we will no longer have travelers. Ann said she will meet with her leaders to see how long we think it will take.

OLD BUSINESS

Social Media Policy

Suzan said we are encountering issues with employees and social media. She looked at what other hospitals are doing and constructed ours around work and job requirements. Amber said she likes it and thinks it would be helpful. Taylor asked if this is as strong as we can get. Kandi asked if something could be included around bullying and harassment. The motion to take a draft to the Board for first read at the March meeting was made by Kandi, second by Suzan. Motion carried.

AHA Environmental Scan

The Committee reviewed Amber's notes. The Committee reviewed Tami's spreadsheet. There was discussion of how we compare to national averages. Irene said we have to get back to some form of normal.

Employee Survey

Amber said she has to start sending information by the end of March so the survey will happen this year.

NEW BUSINESS

There was no new business.

The next meeting is scheduled Monday, March 21.

The meeting adjourned at 3:52 PM.

F&A Committee Chair Report from February 23, 2022

Acting Chair – Kandi Pendleton

The Finance & Audit Committee met in Zoom format. Voting members, minus Ed Tardoni, were present. Board member Marty Kelsey stood in for Ed.

F&A Data for the Month

The usual F&A reports are included in the board packet. We spent some time discussing the repayment of the Medicare Advanced Payment, the hospital has repaid approximately 50% of the \$7.4 million. The payment amounts will increase over the next several months with expected completion in August of 2022.

Capital Expenditures

The board will see a capital expenditure request, FY21-53 revised, for \$230,805. This is for a previously approved expenditure to remodel Dr. Sulentic's office. Because of COVID and the supply chain, costs have doubled since the initial estimate, but it needs to be done. Sulentic has agreed to split the cost 50/50.

Specific Purpose Tax

Irene attended a meeting with the county and cities to discuss possible 6th penny projects. The hospital has put forth the lab renovation, including outside access, as their project with a projected amount of \$5 to \$7 million.

Nutrition Services

Staff has been in the process of soliciting bids for nutrition services. They received several bids and are beginning contract negotiations. We should see the complete contract at the April board meeting. The new contract would be budget neutral or with a slight annual savings for the hospital.

Budget Preparation & Next Meeting

The next F&A meeting is scheduled for March 30, 2022, and should be the annual budget workshop for the entire board, that will be in lieu of the April 6th Board meeting. Further discussion on that date will take place at the March 2nd meeting.

**Memorial Hospital of Sweetwater County
Rock Springs Plastic Surgery and Dermatology Center
Rock Springs, Wyoming**

2-2-2022
(DATE)

Proposal of: (RESIDENT BIDDER)
A. Pleasant Construction, Inc.
Name of Company

(hereinafter called Bidder) a Corporation, Individual, Partnership, or Association, organized under the laws of the State of Wyoming and having its principal office and place of business in the State of Wyoming for one year or more.

(NONRESIDENT BIDDER)

Proposal of: _____
Name of Company

(hereinafter called Bidder) a Corporation, Individual, Partnership, or Association, organized under the laws of the State of _____ (fill in State) and having its principal office and place of business in the State of _____ (fill in State) for a period of _____ years (fill in number of years).

To: Memorial Hospital of Sweetwater County
1200 College Drive
Rock Springs, WY 82901

The undersigned, having examined the Contract Documents and the site of the proposed work, and being familiar with all of the conditions surrounding the proposed project including the availability of materials and labor, hereby proposes to furnish all labor, materials, and supplies and to construct the project in accordance with the Contract Documents, within the time set forth therein, and at the prices stated below. These prices are to cover all expenses incurred in performing the work required under the Contract Documents, of which this proposal is a part.

Successful bidder hereby agrees to commence work under this contract on written Notice to Proceed and shall be substantially complete on or before July 13th, 2022 and final completion of July 27th, 2022. Contractor agrees to pay as liquidated damages in the amount of One Thousand Dollars (\$1,000.00) per day for each calendar day beyond that date that the project is not substantially completed.

Bidder acknowledges receipt of the following addenda:

1 2 3 4 5

The Owner reserves the right to award the Base Proposal in any manner that will best benefit the Hospital.

BASE PROPOSAL: Bidder agrees to perform all of the work described in the Contract Documents for the Memorial Hospital of Sweetwater County – Medical Office Building Entrance Renovation for the sum of:

~~Two Hundred Nine Thousand Six Hundred Five and no/100~~ Dollars (~~\$209,605.00~~)
(Amount shall be shown in both words and figures. In case of discrepancy, the amount shown in words shall govern).

The bid security attached in the sum of

Attached Dollars(\$)
5% of the Base Bid, is to become the property of the Owner in the event that the contract and bonds are not executed within the time above set forth, as liquidated damages for the delay and additional expense to the Owner caused thereby.

SEAL
(if bid is by a corporation)

Respectfully submitted:

By: 

James J. Jessen, Senior Estimator
(Title)

A. Pleasnat Construction, Inc.
(Company Name)

P.O. Box 939/1 Pleasant Way
(Address)

Green River, WY 82935
(City and State)

END OF PROPOSAL

BID BOND

AMCO Insurance Company
Nationwide Mutual Insurance Company
Allied Property & Casualty Insurance Company
1100 Locust St., Dept 2006 Des Moines, IA 50391-2006
(866) 387-0457

CONTRACTOR:

A. Pleasant Construction, Inc.
P.O. Box 939
Green River, WY 82935

OWNER:

Memorial Hospital of Sweetwater County
1200 College Drive
Rock Springs, WY 82901

SURETY:

Nationwide Mutual Insurance Company
1100 Locust St., Dept. 2006
Des Moines, IA 50391-2006

BOND AMOUNT: (5%) Five Percent of Amount Bid

PROJECT: Rock Springs Plastic Surgery and Dermatology Center

The Contractor and Surety are bound to the Owner in the amount set forth above, for the payment of which the Contractor and Surety bind themselves, their heirs, executors, administrators, successors and assigns, jointly and severally, as provided herein. The conditions of this Bond are such that if the Owner accepts the bid of the Contractor within the time specified in the bid documents, or within such time period as may be agreed to by the Owner and Contractor, and the Contractor either (1) enters into a contract with the Owner in accordance with the terms of such bid, and gives such bond or bonds as may be specified in the bidding or Contract Documents, with a surety admitted in the jurisdiction of the Project and otherwise acceptable to the Owner, for the faithful performance of such Contract and for the prompt payment of labor and material furnished in the prosecution thereof; or (2) pays to the Owner the difference, not to exceed the amount of this Bond, between the amount specified in said bid and such larger amount for which the Owner may in good faith contract with another party to perform the work covered by said bid, then this obligation shall be null and void, otherwise to remain in full force and effect. The Surety hereby waives any notice of an agreement between the Owner and Contractor to extend the time in which the Owner may accept the bid. Waiver of notice by the Surety shall not apply to any extension exceeding sixty (60) days in aggregate beyond the time for acceptance of bids specified in the bid documents, and the Owner and Contractor shall obtain the Surety's consent for an extension beyond sixty (60) days.

If this Bond is issued in connection with a subcontractor's bid to a Contractor, the term Contractor in this Bond shall be deemed to be a Subcontractor and the term Owner shall be deemed to be Contractor.

When this Bond has been furnished to comply with a statutory or other legal requirement in the location of the Project, any provision in this Bond conflicting with said statutory or legal requirement shall be deemed deleted herefrom and provisions conforming to such statutory or other legal requirement shall be deemed incorporated herein. When so furnished, the intent is that this bond shall be construed as a statutory bond and not as a common law bond.

Signed and sealed this 14th day of January, 2022

Annette Deavers
(Witness)

Courtney Yellie
(Witness)

A. Pleasant Construction, Inc.

(Principal) (Seal)

By:

(Title) James J. Jensen, Senior Estimator

Nationwide Mutual Insurance Company

(Surety) (Seal)

By:

(Title) James L. Wilhelm, Attorney-in-Fact



Power of Attorney

KNOW ALL MEN BY THESE PRESENTS THAT:

Nationwide Mutual Insurance Company, an Ohio corporation

hereinafter referred to severally as the "Company" and collectively as "the Companies" does hereby make, constitute and appoint:

Janece L. Wilhelm

each in their individual capacity, its true and lawful attorney-in-fact, with full power and authority to sign, seal, and execute on its behalf any and all bonds and undertakings, and other obligatory instruments of similar nature, in penalties not exceeding the sum of: Unlimited

Surety Bond Number: Bid Bond
Principal: A. Pleasant Construction, Inc.
Obligee: Memorial Hospital of Sweetwater County

and to bind the Company thereby, as fully and to the same extent as if such instruments were signed by the duly authorized officers of the Company; and all acts of said Attorney pursuant to the authority given are hereby ratified and confirmed.

This power of attorney is made and executed pursuant to and by authority of the following resolution duly adopted by the board of directors of the Company:

"RESOLVED, that the president, or any vice president be, and each hereby is, authorized and empowered to appoint attorneys-in-fact of the Company, and to authorize them to execute and deliver on behalf of the Company any and all bonds, forms, applications, memorandums, undertakings, recognizances, transfers, contracts of indemnity, policies, contracts guaranteeing the fidelity of persons holding positions of public or private trust, and other writings obligatory in nature that the business of the Company may require; and to modify or revoke, with or without cause, any such appointment or authority; provided, however, that the authority granted hereby shall in no way limit the authority of other duly authorized agents to sign and countersign any of said documents on behalf of the Company."

"RESOLVED FURTHER, that such attorneys-in-fact shall have full power and authority to execute and deliver any and all such documents and to bind the Company subject to the terms and limitations of the power of attorney issued to them, and to affix the seal of the Company thereto; provided, however, that said seal shall not be necessary for the validity of any such documents."

This power of attorney is signed and sealed under and by the following bylaws duly adopted by the board of directors of the Company.

Execution of Instruments. Any vice president, any assistant secretary or any assistant treasurer shall have the power and authority to sign or attest all approved documents, instruments, contracts, or other papers in connection with the operation of the business of the company in addition to the chairman of the board, the chief executive officer, president, treasurer or secretary; provided, however, the signature of any of them may be printed, engraved, or stamped on any approved document, contract, instrument, or other papers of the Company.

IN WITNESS WHEREOF, the Company has caused this instrument to be sealed and duly attested by the signature of its officer the 20th day of August, 2021.



Antonio C. Albanese, Vice President of Nationwide Mutual Insurance Company

ACKNOWLEDGMENT

STATE OF NEW YORK COUNTY OF NEW YORK: ss

On this 20th day of August, 2021, before me came the above-named officer for the Company aforesaid, to me personally known to be the officer described in and who executed the preceding instrument, and he acknowledged the execution of the same, and being by me duly sworn, deposes and says, that he is the officer of the Company aforesaid, that the seal affixed hereto is the corporate seal of said Company, and the said corporate seal and his signature were duly affixed and subscribed to said instrument by the authority and direction of said Company.



Notary Public
My Commission Expires
October 19, 2024

CERTIFICATE

I, Laura B. Guy, Assistant Secretary of the Company, do hereby certify that the foregoing is a full, true and correct copy of the original power of attorney issued by the Company; that the resolution included therein is a true and correct transcript from the minutes of the meetings of the boards of directors and the same has not been revoked or amended in any manner; that said Antonio C. Albanese was on the date of the execution of the foregoing power of attorney the duly elected officer of the Company, and the corporate seal and his signature as officer were duly affixed and subscribed to the said instrument by the authority of said board of directors; and the foregoing power of attorney is still in full force and effect.

IN WITNESS WHEREOF, I have hereunto subscribed my name as Assistant Secretary, and affixed the corporate seal of said Company this 14th day of January 2022.



Assistant Secretary



STATE OF WYOMING

CERTIFICATE OF RESIDENCY



Contractor Number: 0243

THIS CERTIFIES THAT:

A. PLEASANT CONSTRUCTION, INC.

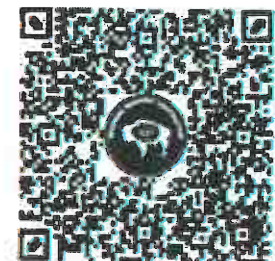
HAS BEEN GRANTED RESIDENCY STATUS PURSUANT TO WYOMING STATUTE 16-6-101, AS AMENDED. FIVE PERCENT PREFERENCE SHALL BE ALLOWED WHEN BIDDING ON ANY PUBLIC WORKS CONTRACT FOR A PERIOD OF ONE (1) YEAR FROM THE DATE CERTIFICATION IS GRANTED.

GRANTED THIS 2ND DAY of FEBRUARY TWO THOUSAND AND 22



Michele Johnson, Program Manager

EXPIRATION DATE: 2/1/2023



To verify the authenticity of the certificate,
please contact our office at 307-777-7261 or visit
wyomingworkforce.org/businesses/labor/info

CERTIFICATE SERIAL NUMBER: 022202201



BID FORM

Project No.: 1574
Project Name: MHSC Dermatology Suite Renovation

Bid Date: 02/02/22
Bid Time: 2:30 p.m.

Bidder	Base Bid #1	Addenda	Bid Security	Resident Y/N
* A. Pleasant Construction	\$ 209,605	5	✓	✓

*Attended mandatory pre-bid.

Capital Request Summary

Capital Request #

FY21-53

Name of Capital Request:

Dr. Sulentic office space renovation

Requestor/Department:

FACILITIES/JIM HORAN

Sole Source Purchase: ☒ Yes or ☐ No

Reason: Updated architectural estimate and DOH submittals previously done with PlanOne Architects

☐ 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.	PlanOne Architect and Contractor TBD	Rock Springs, WY	\$118,700.00
2.			
3.			

Recommendation:

PlanOne Architect and Contractor TBD - \$118,700.00



# Assigned: FV 21 - 53	
Capital Request	
Instructions: YOU MUST USE THE TAB KEY to navigate around this form to maintain the form's integrity. Note: When appropriate, attach additional information such as justification, underlying assumptions, multi-year projections and anything else that will help support this expenditure. Print out form and attach quotes and supporting documentation.	
Department: FACILITIES	Submitted by: M. HURAN
Date: 12/30/2020	
Provide a detailed description of the capital expenditure requested:	
Dr. Sulentic office space renovation	
Preferred Vendor: PlanOne and General Contractor TBD	
Total estimated cost of project (Check all required components and list related expense)	
1. Renovation	\$ 100,000.00
2. Equipment	\$
3. Installation	\$
4. Shipping	\$
5. Accessories	\$
6. Training	\$
7. Travel costs	\$
8. Other e.g. interfaces	\$ 18,700.00
Total Costs (add 1-8)	\$ 118,700.00
Does the requested item:	
Require annual contract renewal? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
Fit into existing space?	Explain:
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Attach to a new service?	Explain:
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
Require physical plan modifications?	Electrical
If yes, list to the right:	HVAC
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Safety
	Plumbing
	Infrastructure (US cabling, software, etc.)
	\$
	\$
	\$
	\$
	\$
Annualized impact on operations (if applicable):	
Increases/Decreases	
Projected Annual Procedures (NEW not existing)	
Revenue per procedure	\$
Projected gross revenue	\$
Projected net revenue	\$
Projected Additional FTE's	
Salaries	\$
Benefits	\$
Maintenance	\$
Supplies	\$
	\$
	\$
Total Annual Expenses	\$
Net Income/(loss) from new service	\$
Budgeted Item:	
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
# of bids obtained? 1	
<input type="checkbox"/> Copies and/or Summary attached. If no other bids obtained, reason: updated architectural estimate previously done by PlanOne Architects	
Review and Approvals	
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 type="checkbox"/> YES <input type="checkbox"/> NO
Board of Trustees Representative	<input type="checkbox"/> YES <input type="checkbox"/> NO

C. Huran 12-20-2020

OTHER CONSIDERATIONS

Modify the floor plan for the space to meet Wyoming Department of Health requirements for an Ambulatory Surgery Center (ASC) as submitted and accepted for variance.
Provide full design and building permit application drawings reflecting the approved HLS variance obtained.

Construction administration for the project.

Dr. Scott Sulentic and Hospital have agreed to split the cost evenly for this renovation project.

Submitted by: Signature

Date

Capital Request 2/1/18

December 9, 2020

Ms. Irene Richardson
Chief Executive Officer
Memorial Hospital of Sweetwater County
1200 College Drive
Rock Springs, WY 82901

Re: Rock Springs Plastic Surgery ASC Remodel Professional Services Proposal

Dear Irene,

Thank you for allowing Plan One/Architects to propose professional design services for your Rock Springs Plastic Surgery ASC Remodel Project. The intent of this letter is to outline the scope of work for the project, the design services we propose to provide, and the associated professional design fees.

Project Description: This proposal is for professional design services related to the following scope of work:

- Modify the floor plan for the space to meet Wyoming Department of Health requirements for an Ambulatory Surgery Center (ASC) as submitted and accepted for variance.
- Provide full design and building permit application drawings reflecting the approved HLS variance obtained.
- Construction administration for the project.

Professional Design Services: Plan One/Architects will provide professional design services for your project. This fee proposal includes:

1. Phase One: Design Services

- Field visit and document existing conditions including identification of existing conditions related to the scope of work.
- Conduct design meetings with Owner during design to review progress.
- Produce final project plans and specifications. The package will include all necessary architectural, mechanical, and electrical related scope of work to complete the projects.
- Generate incremental progress sets of construction documents that will allow the following Owner reviews:
 - 10% Schematic Design Review.
 - 65% Construction Document Review.
- Costs for progress sets of plans are included in this proposal.

2. Phase Two: Bidding Services

- Submit drawings to City of Rock Springs Building Department and the Wyoming Department of Health for review. Make any required revisions requested by the City of Rock Springs and the Wyoming Department of Health.
- Costs for final plans are included in the proposal.
- Recommend contractors.

3. Phase Three: Construction Administration Services (Additional Service)

- Organize and conduct pre-construction meeting.
- Perform contractor pay application reviews and approvals.
- Answer questions during construction and provide clarifications.
- Submittal and shop drawing reviews.
- Regular site visits and bi-monthly (2 times per month) observation reports.

4. Phase Four: Project Close Out (Additional Service)

- Review contractor provided record drawings.
- Perform final punch list inspection for the project.

Conceptual Cost Estimate: Based on the scope of work as we understand it, we are providing the following conceptual cost estimate for your budgeting purposes.

Original Project Estimate by Hogan Construction	=	\$ 67,500
Inflation Modifier - 5 years at \$2,500 per year	=	\$ 12,500
Construction Cost Subtotal	=	\$ 80,000
Work Restriction Schedule Impact - 25%	=	\$ 20,000

Construction Cost Estimate Total: = **\$100,000**

Fee Proposal: Based on the scope of work as described above, we are providing the following fee proposal for the Rock Springs Plastic Surgery ASC Remodel Project

Schematic Design:	\$ 2,805
Design Development:	\$ 4,675
Construction Documents:	\$ 6,545
Bidding & Negotiation	\$ 935
Construction Administration:	\$ 3,740
Total Professional Services Fee Proposal	= \$ 18,700

Plan One/Architects would be pleased to provide the above outlined services for the fixed amount of Eighteen Thousand Seven Hundred (\$18,700.00). Plan One will only bill according to the phase of work completed, work will not commence to the next phase until written approval has been granted by Dr. Sulentic or another individual otherized to provide a notice to proceed.

This proposal does not include on-site services or visits for our Mechanical, Electrical, and Plumbing engineers. If such services are required, they will be billed as additional services to this proposal.

If this proposal is acceptable to you, please sign both copies of this agreement, and return one signed copy to Plan One/Architects.

Sincerely,



William W. Wheatley, AIA
Vice President

Ms. Irene Richardson
Chief Executive Officer



Memorial Hospital

OF SWEETWATER COUNTY

# Assigned: FY 21 - 53 revised	
Capital Request	
Instructions: YOU MUST USE THE TAB KEY to navigate around this form to maintain the form's integrity. Note: When appropriate, attach additional information such as justification, underlying assumptions, multi-year projections and anything else that will help support this expenditure. Print out form and attach quotes and supporting documentation.	
Department: FACILITIES	Submitted by: JIM HORAN
Date: 02/18/22	
Provide a detailed description of the capital expenditure requested: Dr. Sulentic office space renovation - revised with current bid	
Preferred Vendor: A Pleasant Construction/PlanOne	
Total estimated cost of project (Check all required components and list related expense)	
1. Renovation	\$ 209,605.00
2. Equipment	\$
3. Installation	\$
4. Shipping	\$
5. Accessories	\$
6. Training	\$
7. Travel costs	\$
8. Other e.g. interfaces	\$ 21,200.00
Total Costs (add 1-8) \$ \$230,805.00	
Does the requested item:	
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.)
Annualized impact on operations (If applicable):	
Increases/Decreases	
Projected Annual Procedures (NEW not existing)	
Revenue per procedure	\$
Projected gross revenue	\$
Projected net revenue	\$
Projected Additional FTE's	
Salaries	\$
Benefits	\$
Maintenance	\$
Supplies	\$
	\$
Total Annual Expenses	\$
Net Income/(loss) from new service	\$
Budgeted Item:	
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
# of bids obtained? <u>1</u>	
<input checked="" type="checkbox"/> Copies and/or Summary attached. If no other bids obtained, reason: only one contractor bid	
Review and Approvals	
Submitted by:	Verified enough Capital to purchase
Department Leader	<input type="checkbox"/> YES <input type="checkbox"/> NO
Executive Leader	<input type="checkbox"/> YES <input type="checkbox"/> NO
Chief Financial Officer	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Chief Executive Officer	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Board of Trustees Representative	<input type="checkbox"/> YES <input type="checkbox"/> NO

OTHER CONSIDERATIONS

Current bid came in at \$209,605.00 from A Pleasant Construction.

PlanOne \$21,200 of which \$18,000 has already been invoiced and paid.

Submitted by: Signature _____

Date _____

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

Wednesday~ February 23, 2022 2:00 p.m. Teleconference

Voting Members:

Kandi Pendleton, Acting Chair
Marty Kelsey, Trustee
Irene Richardson
Tami Love
Jan Layne

Non-Voting Members:

Ron Cheese	Kari Quickenden
Angel Bennett	Dr. Israel Stewart
Ann Clevenger	Dr. Ben Jensen
Brad Kowalski	

Guests:

Jeff Smith, Commission	Leslie Taylor	Leah Lassise
------------------------	---------------	--------------

- | | | |
|-------|--|------------------|
| I. | Call Meeting to Order | Kandi Pendleton |
| II. | Approve Agenda | Kandi Pendleton |
| III. | Approve January 27, 2022 Meeting Minutes | Kandi Pendleton |
| IV. | Capital Requests FY 22 | |
| V. | Financial Report | |
| | A. Monthly Financial Statements & Statistical Data | |
| | 1. Narrative | Tami Love |
| | 2. Financial Information | Tami Love |
| | 3. Self-Pay Report | Ron Cheese |
| | 4. Preliminary Bad Debt | Ron Cheese |
| VI. | Old Business | |
| | A. KaufmanHall Engagement Update | Irene Richardson |
| | B. Special Purpose Tax projects | Irene Richardson |
| | C. Nutrition Services Program | Tami Love |
| VII. | New Business | |
| | A. Investment discussion | Tami Love |
| | B. Financial Forum Discussion | Kandi Pendleton |
| VIII. | Next Meeting – March 30, 2022 | Kandi Pendleton |
| | A. Budget Workshop | |
| IX. | Adjournment | Kandi Pendleton |

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

NARRATIVE TO JANUARY 2022 FINANCIAL STATEMENTS

THE BOTTOM LINE. The bottom line from operations for January was a loss of \$1,369,819, compared to a loss of \$187,686 in the budget. This yields a -18.09% operating margin for the month compared to -2.36% in the budget. The year-to-date loss is \$1,096,057, compared to a gain \$752,022 in the budget. The year to date operating margin is -1.78%, compared to 1.32% in the budget.

The total net gain for January is \$167,546, compared to a loss of \$231,392 in the budget. Year-to date, the total net gain is \$1,156,835, compared to a total net gain of \$449,730 in the budget. This represents a YTD profit margin of 1.88% compared to budget of .79%.

REVENUE. Revenue for the month came in significantly lower but still slightly over budget at \$16,505,665, over budget by \$215,502. Inpatient revenue is under budget by \$240,984, hospital outpatient revenue was over budget by \$657,624 and the Clinic was under budget by \$201,137. Revenue is over budget by \$6.56 million year to date.

VOLUME. We saw inpatient volumes decrease from prior months. However, we saw a significant increase in COVID positive patients in January. The average daily census (ADC), came down to 12.8 in January. The normal ADC prior to the pandemic was 12. Average length of stay (LOS) remained the same at 3.5 days which normally averages 2.6 days. In January, we averaged 5 COVID positive inpatients daily with a high of 11. ER visits, Births, Behavioral Health, Infusions, Clinic visits, Cancer Center visits and most Outpatient visits are over budget. Imaging and Surgery are slightly under budget.

Annual Debt Service Coverage came in at 3.96. Days of Cash on Hand remained the same at 147. Daily cash expense increased to \$276,000 year to date.

REDUCTION OF REVENUE. Deductions from revenue are 55.5% in January and 50.8% year to date, both under budget. Total collections for the month came in at \$8,485,763. The repayment of the Medicare Advanced Payment began in April and through January we have paid back \$3.8 million of the \$7.4 million received.

Net days in AR increased slightly to 49.9 days. We have seen a slight increase in Commercial and Medicaid aging AR but we continue to meet the goals for AR greater than 90 days for all Payers.

EXPENSES. Total expenses in January remained high at \$8,943,999, over budget by \$797,639. Expenses are over budget \$6,230,381 year to date of which \$2,886,567 are COVID-19 related expenses. The following line items were over budget in January:

Salary and Wage – Salary and Wage is over budget in January with the continued need for additional staffing such as door monitors and laboratory staff for testing and vaccines. Due to staffing shortages, incentives continued through January to ensure shift coverage.

Contract Labor – Due to staffing shortages in clinical areas there are currently contract labor staff in Med/Surg, ICU, Surgery, Emergency Room, Laboratory, Ultrasound, Respiratory Therapy, Behavioral Health and Social Services. COVID related staff include door monitors and additional nursing, laboratory and respiratory therapy positions. We have seen as much as an 175% increase in contract labor rates.

Physician Fees – Locum coverage is over budget due to additional shift coverage for Hospitalists.

Supplies – Implants, Med/Surg supplies, Drugs, Food, Office and Maintenance supplies are over budget in January.

PROVIDER CLINIC. Revenue for the Clinics also decreased in January, under budget at \$1,798,083. Year to date gross revenue is \$13,131,457, under budget by \$727,547. The bottom line for the Clinics in January is a loss of \$575,988 compared to a loss of \$444,797 in the budget. The year to date loss is \$3,403,966, compared to a budgeted loss of \$2,775,783. Deductions from revenue for the Clinics are at 44.7% year to date. Clinic volumes remain over budget with 5,810 visits in January.

Total Clinic expenses for the month are \$1,610,624, over budget by \$11,137. Wages, Purchased services, Supplies and Pharmacy expenses are over budget for January.

OUTLOOK FOR FEBRUARY. Gross patient revenue for February is projecting higher at \$18.2 million, over budget. The average daily census remains the same at 12.9. Average length of stay is at 3.3 days. We are still averaging 5 COVID positive inpatients each day through the first several weeks of February.

Collections for February are projecting close to \$8 million as we continue to collect on the prior high revenue months. Deductions of revenue are expected to come in higher again as we have seen a slight increase in Medicare, Medicaid and Self-Pay payer mix. Expenses will remain high in February due to continued staffing shortages and COVID related expenses. The bottom line for February is estimated at a \$300k - \$400k loss.

COVID RELIEF FUNDS. Wyoming Hospital Association (WHA) and Health and Human Services (HHS) are working closely with the Governor and State Legislature on how the \$55 million in capital & construction funds will be distributed.

Year to date we have received just under \$3 million in assistance from WHA and federal funds. We have been able to reconcile all of these funds against ongoing COVID related expenses, retention and recruitment and to assist with contract staffing. These funds are all accounted for under non-operating revenue on our income statement.



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

Unaudited Financial Statements

for

Seven months ended January 31, 2022

Certification Statement:

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

Certified by:

Tami Love

Chief Financial Officer

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MEMORIAL HOSPITAL OF SWEETWATER COUNTY ROCK SPRINGS, WY

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MEMORIAL HOSPITAL OF SWEETWATER COUNTY

EXECUTIVE FINANCIAL SUMMARY

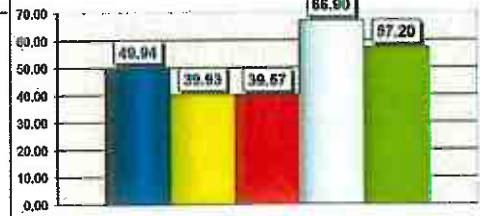
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Seven months ended January 31, 2022

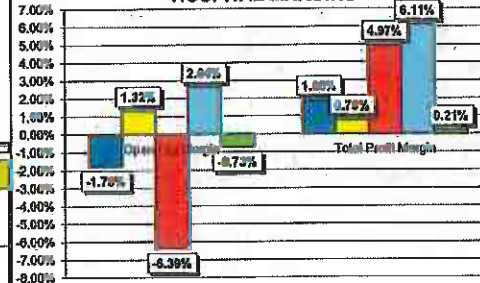
BALANCE SHEET

	YTD 1/31/2022	Prior FYE 6/30/2021
ASSETS		
Current Assets	\$31,619,605	\$28,361,282
Assets Whose Use is Limited	30,597,887	38,038,595
Property, Plant & Equipment (Net)	68,633,444	68,424,357
Other Assets	1,461,025	210,003
Total Unrestricted Assets	132,311,961	135,034,237
Restricted Assets	397,662	395,362
Total Assets	\$132,709,623	\$135,429,599
LIABILITIES AND NET ASSETS		
Current Liabilities	\$10,662,458	\$10,645,170
Long-Term Debt	26,835,000	27,742,755
Other Long-Term Liabilities	3,655,459	6,644,104
Total Liabilities	41,152,918	45,032,029
Net Assets	91,556,705	90,397,570
Total Liabilities and Net Assets	\$132,709,623	\$135,429,599

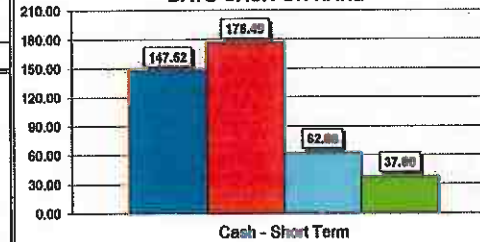
NET DAYS IN ACCOUNTS RECEIVABLE



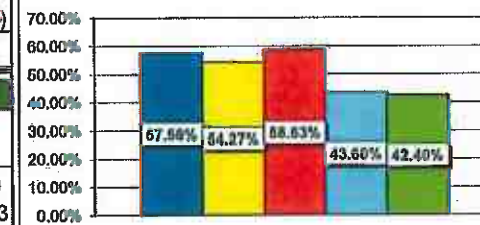
HOSPITAL MARGINS



DAYS CASH ON HAND



SALARY AND BENEFITS AS A PERCENTAGE OF TOTAL EXPENSES



STATEMENT OF REVENUE AND EXPENSES - YTD				
	01/31/22 ACTUAL	01/31/22 BUDGET	YTD ACTUAL	YTD BUDGET
Revenue:				
Gross Patient Revenues	\$16,505,665	\$16,290,163	\$123,233,521	\$116,673,127
Deductions From Revenue	(9,158,782)	(8,543,938)	(62,646,571)	(60,852,132)
Net Patient Revenues	7,346,883	7,746,225	60,586,950	55,820,995
Other Operating Revenue	227,298	212,450	943,828	1,327,480
Total Operating Revenues	7,574,181	7,958,675	61,530,777	57,148,475
Expenses:				
Salaries, Benefits & Contract Labor	5,356,201	4,512,425	36,063,069	31,016,282
Purchased Serv. & Physician Fees	952,057	778,278	5,591,452	5,627,725
Supply Expenses	1,116,697	1,233,850	10,168,702	8,449,707
Other Operating Expenses	938,489	889,066	6,813,732	6,601,091
Bad Debt Expense	0	0	0	0
Depreciation & Interest Expense	580,556	732,743	3,989,880	4,701,649
Total Expenses	8,943,999	8,146,361	62,626,834	56,396,453
NET OPERATING SURPLUS	(1,369,819)	(187,686)	(1,096,057)	752,022
Non-Operating Revenue/(Exp.)	1,537,365	(43,706)	2,252,892	(302,292)
TOTAL NET SURPLUS	\$167,546	(\$281,392)	\$1,156,835	\$449,730

KEY STATISTICS AND RATIOS

	01/31/22 ACTUAL	01/31/22 BUDGET	YTD ACTUAL	YTD BUDGET
Total Acute Patient Days	395	448	3,228	2,680
Average Acute Length of Stay	3.5	3.7	3.8	3.3
Total Emergency Room Visits	1,400	1,025	9,146	7,746
Outpatient Visits	10,675	7,597	66,118	57,619
Total Surgeries	151	151	917	1,142
Total Worked FTE's	451.84	450.97	457.19	450.97
Total Paid FTE's	493.86	494.77	503.72	494.77
Net Revenue Change from Prior Yr	-3.69%	1.20%	15.67%	7.43%
EBIDA - 12 Month Rolling Average			2.28%	9.54%
Current Ratio			2.97	
Days Expense in Accounts Payable			34.44	

MEMORIAL HOSPITAL OF SWEETWATER COUNTY	
Budget	01/31/22
Prior Fiscal Year End	06/30/21
WYOMING	All Hospitals
< \$90M Net Rev.	Rural









FINANCIAL STRENGTH INDEX -	1.97
Excellent - Greater than 3.0	Good - 3.0 to 0.0
Fair - 0.0 to (2.0)	Poor - Less than (2.0)

Key Financial Ratios

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
ROCK SPRINGS, WY
Seven months ended January 31, 2022

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  - DESIRED POSITION IN RELATION TO BENCHMARKS AND BUDGET

		Year to Date 1/31/2022	Budget 6/30/2021	Speculative Grade Rating	BBB Credit Rating	Prior Fiscal Year End 06/30/21	WYOMING All Hospitals (See Note 1)	National Rural < \$50M Net Rev. (See Note 2)
Profitability:								
Operating Margin		-1.78%	1.90%	1.60%	-1.00%	-6.39%	2.64%	-0.73%
Total Profit Margin		1.88%	0.76%	2.60%	1.30%	4.97%	6.11%	0.21%
Liquidity:								
Days Cash, All Sources **		147.52	129.76	103.40	228.00	176.49	62.00	37.80
Net Days in Accounts Receivable		49.94	50.02	52.40	51.80	39.57	66.90	57.20
Capital Structure:								
Average Age of Plant (Annualized)		15.67	12.58	14.00	13.90	14.61	9.50	12.40
Long Term Debt to Capitalization		23.13%	25.75%	36.60%	22.30%	24.02%	16.80%	10.00%
Debt Service Coverage Ratio **		3.90	3.97	2.80	2.50	5.03	N/A	2.64
Productivity and Efficiency:								
Paid FTE's per Adjusted Occupied Bed		8.08	8.43			8.61	6.60	4.63
Salary Expense per Paid FTE		\$97,055	\$96,892			\$95,218	\$62,436	\$48,150
Salary and Benefits as a % of Total Operating Exp		57.58%	56.43%			58.63%	43.60%	42.40%

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

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

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

Balance Sheet - Assets

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

ROCK SPRINGS, WY

Seven months ended January 31, 2022

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	Current Month 1/31/2022	Prior Month 12/31/2021	ASSETS Positive/ (Negative) Variance	Percentage Variance	Prior Year End 6/30/2021
Current Assets					
Cash and Cash Equivalents	\$10,353,361	\$10,059,797	\$293,564	2.92%	\$10,302,741
Gross Patient Accounts Receivable	30,019,586	31,145,878	(1,126,292)	-3.62%	22,751,139
Less: Bad Debt and Allowance Reserves	(16,520,651)	(16,419,284)	(101,367)	-0.62%	(12,710,325)
Net Patient Accounts Receivable	13,498,935	14,726,594	(1,227,659)	-8.34%	10,040,814
Interest Receivable	0	0	0	0.00%	0
Other Receivables	1,341,723	1,181,358	160,365	13.57%	2,073,519
Inventories	3,738,635	3,718,952	19,683	0.53%	3,774,659
Prepaid Expenses	2,686,951	2,670,814	16,137	0.60%	2,169,549
Due From Third Party Payers	0	0	0	0.00%	0
Due From Affiliates/Related Organizations	0	0	0	0.00%	0
Other Current Assets	0	0	0	0.00%	0
Total Current Assets	31,619,605	32,357,515	(737,910)	-2.28%	28,361,282
Assets Whose Use is Limited					
Cash	83,128	75,755	7,373	9.73%	145,904
Investments	0	0	0	0.00%	0
Bond Reserve/Debt Retirement Fund	0	0	0	0.00%	0
Trustee Held Funds - Project	153,820	118,328	35,492	29.99%	3,015,531
Trustee Held Funds - SPT	27,956	27,767	189	0.68%	26,503
Board Designated Funds	13,949,228	13,946,801	2,427	0.02%	19,921,794
Other Limited Use Assets	16,383,755	16,383,502	253	0.00%	14,928,863
Total Limited Use Assets	30,597,887	30,552,152	45,734	0.15%	38,038,595
Property, Plant, and Equipment					
Land and Land Improvements	4,215,925	4,215,925	0	0.00%	4,025,159
Building and Building Improvements	41,105,102	41,105,102	0	0.00%	41,947,846
Equipment	113,724,264	113,500,998	223,266	0.20%	114,615,271
Construction In Progress	8,424,625	7,809,255	615,370	7.88%	7,220,982
Capitalized Interest	0	0	0	0.00%	0
Gross Property, Plant, and Equipment	167,469,917	166,631,281	838,637	0.50%	167,809,258
Less: Accumulated Depreciation	(98,836,473)	(98,274,591)	(561,882)	-0.57%	(99,384,901)
Net Property, Plant, and Equipment	68,633,444	68,356,689	276,755	0.40%	68,424,357
Other Assets					
Unamortized Loan Costs	1,461,025	1,673,013	(211,988)	-12.67%	210,003
Other	0	0	0	0.00%	0
Total Other Assets	1,461,025	1,673,013	(211,988)	-12.67%	210,003
TOTAL UNRESTRICTED ASSETS	132,311,961	132,939,370	(627,409)	-0.47%	135,034,237
Restricted Assets	397,662	397,662	0	0.00%	395,362
TOTAL ASSETS	\$132,709,623	\$133,337,032	(\$627,409)	-0.47%	\$135,429,599

Balance Sheet - Liabilities and Net Assets

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

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ROCK SPRINGS, WY

Seven months ended January 31, 2022

	LIABILITIES AND FUND BALANCE				
	Current Month 1/31/2022	Prior Month 12/31/2021	Positive/ (Negative) Variance	Percentage Variance	Prior Year End 6/30/2021
Current Liabilities					
Accounts Payable	\$5,405,699	\$4,700,562	(\$705,137)	-15.00%	\$5,787,069
Notes and Loans Payable	0	0	0	0.00%	0
Accrued Payroll	1,965,342	1,652,293	(313,049)	-18.95%	1,555,117
Accrued Payroll Taxes	0	0	0	0.00%	0
Accrued Benefits	2,669,892	2,650,760	(19,132)	-0.72%	2,537,177
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)	258,516	267,533	9,017	3.37%	319,366
Current Portion of LTD (Leases)	0	0	0	0.00%	0
Other Current Liabilities	363,010	334,293	(28,717)	-8.59%	446,442
Total Current Liabilities	10,662,458	9,605,442	(1,057,017)	-11.00%	10,645,170
Long Term Debt					
Bonds/Mortgages Payable	27,093,516	27,102,533	9,017	0.03%	28,062,121
Leases Payable	0	0	0	0.00%	0
Less: Current Portion Of Long Term Debt	258,516	267,533	9,017	3.37%	319,366
Total Long Term Debt (Net of Current)	26,835,000	26,835,000	0	0.00%	27,742,755
Other Long Term Liabilities					
Deferred Revenue	3,634,135	5,467,677	1,833,542	33.53%	6,497,997
Accrued Pension Expense (Net of Current)	0	0	0	0.00%	0
Other	21,324	39,754	18,430	46.36%	146,106
Total Other Long Term Liabilities	3,655,459	5,507,431	1,851,972	33.63%	6,644,104
TOTAL LIABILITIES	41,152,918	41,947,873	794,955	1.90%	45,032,029
Net Assets:					
Unrestricted Fund Balance	88,046,962	88,046,962	0	0.00%	83,129,665
Temporarily Restricted Fund Balance	1,959,119	1,959,119	0	0.00%	1,959,119
Restricted Fund Balance	393,789	393,789	(0)	0.00%	391,489
Net Revenue/(Expenses)	1,156,835	989,289	N/A	N/A	4,917,296
TOTAL NET ASSETS	91,556,705	91,389,160	(167,548)	-0.18%	90,397,570
TOTAL LIABILITIES AND NET ASSETS	\$132,709,623	\$133,337,032	\$627,409	0.47%	\$135,429,599

Statement of Revenue and Expense

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

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ROCK SPRINGS, WY

Seven months ended January 31, 2022

	CURRENT MONTH				Prior Year 01/31/21
	Actual 01/31/22	Budget 01/31/22	Positive (Negative) Variance	Percentage Variance	
Gross Patient Revenue					
Inpatient Revenue	\$3,563,344	\$3,804,329	(\$240,984)	-6.33%	\$3,645,930
Outpatient Revenue	11,144,237	10,486,613	657,624	6.27%	9,967,382
Clinic Revenue	1,482,429	1,666,571	(184,142)	-11.05%	1,410,642
Specialty Clinic Revenue	315,655	332,649	(16,995)	-5.11%	311,512
Total Gross Patient Revenue	16,505,665	16,290,163	215,502	1.32%	15,335,466
Deductions From Revenue					
Discounts and Allowances	(7,888,958)	(7,133,390)	(755,568)	-10.59%	(6,661,815)
Bad Debt Expense (Governmental Providers Only)	(1,242,529)	(1,266,549)	24,020	1.90%	(1,215,379)
Medical Assistance	(27,295)	(143,999)	116,704	81.04%	(149,128)
Total Deductions From Revenue	(9,158,782)	(8,543,938)	(614,844)	-7.20%	(8,026,321)
Net Patient Revenue	7,346,883	7,746,225	(399,342)	-5.16%	7,309,145
Other Operating Revenue	227,298	212,450	14,848	6.99%	554,961
Total Operating Revenue	7,574,181	7,958,675	(384,494)	-4.83%	7,864,106
Operating Expenses					
Salaries and Wages	3,679,506	3,431,569	(247,937)	-7.23%	3,506,906
Fringe Benefits	1,052,865	1,066,481	13,615	1.28%	1,153,370
Contract Labor	623,830	14,375	(609,455)	-4239.69%	166,407
Physicians Fees	402,704	361,807	(40,897)	-11.30%	327,846
Purchased Services	549,353	416,471	(132,882)	-31.91%	424,314
Supply Expense	1,116,697	1,233,850	117,153	9.49%	1,413,761
Utilities	107,027	102,463	(4,564)	-4.45%	72,884
Repairs and Maintenance	543,950	499,233	(44,717)	-8.96%	624,934
Insurance Expense	51,700	48,783	(2,917)	-5.98%	42,444
All Other Operating Expenses	188,162	183,853	(4,310)	-2.34%	174,606
Bad Debt Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Leases and Rentals	47,650	54,734	7,085	12.94%	62,335
Depreciation and Amortization	580,556	732,743	152,187	20.77%	582,176
Interest Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Total Operating Expenses	8,943,999	8,146,361	(797,639)	-9.79%	8,551,984
Net Operating Surplus/(Loss)	(1,369,819)	(187,686)	(1,182,133)	629.85%	(687,878)
Non-Operating Revenue:					
Contributions	0	0	0	0.00%	0
Investment Income	8,304	14,459	(6,154)	-42.56%	12,078
Tax Subsidies (Except for GO Bond Subsidies)	189	0	189	0.00%	(2,572)
Tax Subsidies for GO Bonds	0	0	0	0.00%	0
Interest Expense (Governmental Providers Only)	(240,705)	(104,012)	136,692	-131.42%	(104,612)
Other Non-Operating Revenue/(Expenses)	1,769,576	45,848	1,723,728	3759.68%	161,685
Total Non-Operating Revenue/(Expense)	1,537,365	(43,708)	1,581,071	-3617.50%	67,179
Total Net Surplus/(Loss)	\$167,546	(\$231,392)	\$398,938	-172.41%	(\$520,699)
Change in Unrealized Gains/(Losses) on Investments	0	0	0	0.00%	0
Increase/(Decrease in Unrestricted Net Assets	\$167,546	(\$231,392)	\$398,938	-172.41%	(\$520,699)
Operating Margin	-18.09%	-2.36%			-8.75%
Total Profit Margin	2.21%	-2.91%			-7.89%
EBIDA	-10.42%	6.85%			-1.38%

Statement of Revenue and Expense

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

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ROCK SPRINGS, WY

Seven months ended January 31, 2022

	YEAR-TO-DATE				Prior Year 01/31/21
	Actual 01/31/22	Budget 01/31/22	Positive (Negative) Variance	Percentage Variance	
Gross Patient Revenue					
Inpatient Revenue	\$29,674,944	\$23,886,509	\$5,788,435	24.23%	\$23,320,336
Outpatient Revenue	80,427,121	78,927,614	1,499,506	1.90%	74,055,567
Clinic Revenue	11,191,471	11,488,772	(297,301)	-2.59%	9,628,069
Specialty Clinic Revenue	1,939,986	2,370,232	(430,246)	-18.15%	2,125,964
Total Gross Patient Revenue	123,233,521	116,673,127	6,560,394	5.62%	109,129,936
Deductions From Revenue					
Discounts and Allowances	(54,734,267)	(51,842,251)	(2,892,015)	-5.58%	(48,959,776)
Bad Debt Expense (Governmental Providers Only)	(7,100,768)	(7,885,278)	784,510	9.95%	(7,527,090)
Medical Assistance	(811,536)	(1,124,602)	313,066	27.84%	(1,160,499)
Total Deductions From Revenue	(62,646,571)	(60,852,132)	(1,794,440)	-2.95%	(57,647,366)
Net Patient Revenue	60,586,950	55,820,995	4,765,954	8.54%	51,482,570
Other Operating Revenue	943,828	1,327,480	(383,653)	-28.90%	1,711,779
Total Operating Revenue	61,530,777	57,148,475	4,382,302	7.67%	53,194,349
Operating Expenses					
Salaries and Wages	25,986,480	24,060,922	(1,925,558)	-8.00%	25,194,883
Fringe Benefits	7,265,794	6,291,825	(973,969)	-15.48%	6,519,341
Contract Labor	2,810,796	663,535	(2,147,261)	-323.61%	502,197
Physicians Fees	2,485,602	2,569,742	84,140	3.27%	1,910,282
Purchased Services	3,105,850	3,057,983	(47,868)	-1.57%	2,815,235
Supply Expense	10,168,702	8,449,707	(1,718,995)	-20.34%	8,858,065
Utilities	656,467	662,413	5,946	0.90%	647,979
Repairs and Maintenance	3,942,144	3,732,762	(209,381)	-5.61%	3,429,149
Insurance Expense	384,905	341,481	(43,424)	-12.72%	271,413
All Other Operating Expenses	1,449,256	1,460,779	11,523	0.79%	1,168,448
Bad Debt Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Leases and Rentals	380,959	403,655	22,696	5.62%	422,562
Depreciation and Amortization	3,989,880	4,701,649	711,769	15.14%	3,963,591
Interest Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Total Operating Expenses	62,626,834	56,396,453	(6,230,381)	-11.05%	55,703,143
Net Operating Surplus/(Loss)	(1,096,057)	752,022	(1,848,080)	-245.75%	(2,588,794)
Non-Operating Revenue:					
Contributions	0	0	0	0.00%	0
Investment Income	77,792	119,717	(41,925)	-35.02%	132,942
Tax Subsidies (Except for GO Bond Subsidies)	1,453	0	1,453	0.00%	12,007
Tax Subsidies for GO Bonds	0	0	0	0.00%	0
Interest Expense (Governmental Providers Only)	(781,983)	(766,688)	(15,296)	2.00%	(766,688)
Other Non-Operating Revenue/(Expense)	2,955,631	344,679	2,610,952	757.50%	5,790,181
Total Non Operating Revenue/(Expense)	2,252,892	(302,292)	2,555,184	-845.27%	5,168,442
Total Net Surplus/(Loss)	\$1,156,835	\$449,730	\$707,105	157.23%	\$2,659,648
Change in Unrealized Gains/(Losses) on Investments	0	0	0	0.00%	0
Increase/(Decrease) in Unrestricted Net Assets	\$1,156,835	\$449,730	\$707,105	157.23%	\$2,659,648
Operating Margin	-1.78%	1.32%			-4.72%
Total Profit Margin	1.88%	0.79%			5.00%
EBIDA	4.71%	9.54%			2.76%

Statement of Revenue and Expense - 13 Month Trend

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
ROCK SPRINGS, WY

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	Actual 1/31/2022	Actual 12/31/2021	Actual 11/30/2021	Actual 10/31/2021	Actual 9/30/2021	Actual 8/31/2021
Gross Patient Revenue						
Inpatient Revenue	\$3,563,344	\$3,901,947	\$3,635,525	\$6,090,930	\$6,033,540	\$3,340,697
Inpatient Psych/Rehab Revenue						
Outpatient Revenue	\$11,144,237	\$12,775,161	\$11,200,991	\$10,574,893	\$10,541,547	\$11,805,073
Clinic Revenue	\$1,482,429	\$1,967,053	\$1,622,638	\$1,698,739	\$1,419,718	\$1,520,955
Specialty Clinic Revenue	\$315,655	\$387,797	\$254,889	\$230,828	\$375,846	\$171,176
Total Gross Patient Revenue	\$16,505,665	\$19,001,956	\$16,713,813	\$18,593,188	\$18,370,651	\$16,837,901
Deductions From Revenue						
Discounts and Allowances	\$7,688,953	\$8,555,249	\$7,294,927	\$7,994,841	\$7,661,993	\$7,548,034
Bad Debt Expense (Governmental Providers On Charity Care)	\$1,242,629	\$1,000,088	\$1,128,561	\$908,293	\$722,048	\$1,039,023
	\$27,285	\$235,454	(\$18,194)	(\$17,014)	\$502,179	\$23,400
Total Deductions From Revenue	9,158,782	9,790,791	8,406,204	8,887,120	8,887,120	8,610,457
Net Patient Revenue	\$7,346,883	\$9,211,166	\$8,307,519	\$9,706,068	\$9,483,531	\$8,227,443
Other Operating Revenue	227,298	176,824	80,625	137,262	60,543	112,967
Total Operating Revenue	7,574,181	9,387,990	8,388,144	9,843,330	9,564,074	8,340,410
Operating Expenses						
Salaries and Wages	\$3,679,508	\$3,657,198	\$3,723,066	\$4,105,038	\$3,770,223	\$3,570,618
Fringe Benefits	\$1,062,865	\$973,861	\$1,065,893	\$1,318,416	\$1,079,987	\$766,740
Contract Labor	\$623,830	\$439,879	\$410,170	\$361,897	\$354,888	\$293,704
Physicians Fees	\$402,704	\$408,140	\$364,978	\$362,983	\$308,701	\$295,756
Purchased Services	\$548,353	\$390,764	\$461,277	\$359,836	\$433,583	\$364,402
Supply Expense	\$1,118,897	\$1,685,777	\$1,435,589	\$1,394,997	\$1,677,803	\$1,361,763
Utilities	\$107,027	\$105,760	\$92,733	\$91,857	\$88,009	\$84,660
Repairs and Maintenance	\$543,950	\$531,372	\$731,037	\$612,137	\$533,318	\$514,285
Insurance Expense	\$81,790	\$81,204	\$51,204	\$51,404	\$50,848	\$76,848
All Other Operating Expenses	\$188,182	\$188,727	\$241,518	\$222,475	\$188,267	\$180,435
Bad Debt Expense (Non-Governmental Providers)						
Leases and Rentals	\$47,850	\$50,397	\$55,342	\$56,923	\$54,068	\$52,622
Depreciation and Amortization	\$580,559	\$580,385	\$621,714	\$525,962	\$561,412	\$381,377
Interest Expense (Non-Governmental Providers)						
Total Operating Expenses	\$8,043,999	\$9,083,535	\$9,254,501	\$9,483,525	\$9,102,916	\$8,142,406
Net Operating Surplus/(Loss)	(\$1,369,818)	\$304,255	(\$866,357)	\$359,805	\$461,159	\$198,005
Non-Operating Revenue:						
Contributions						
Investment Income	8,304	10,129	14,102	11,918	12,534	9,843
Tax Subsidies (Except for GO Bond Subsidies)						
Tax Subsidies for GO Bonds	188	13	147	553	105	428
Interest Expense (Governmental Providers Only)	(\$240,795)	4,870	(\$11,555)	(\$107,774)	(\$11,369)	(\$107,625)
Other Non-Operating Revenue/(Expenses)	1,369,578	285,732	14,504	633,411	11,583	8,743
Total Non Operating Revenue/(Expense)	\$1,537,366	\$303,644	(\$82,843)	\$438,108	(\$87,413)	(\$88,611)
Total Net Surplus/(Loss)	\$167,543	\$607,799	(\$949,160)	\$797,933	\$374,012	\$109,395
Change in Unrealized Gains/(Losses) on Investments						
P						
Increase/Decrease in Unrestricted Net Assets	\$167,543	\$607,799	(\$949,160)	\$797,933	\$374,012	\$109,395
Operating Margin	-18.09%	3.24%	-10.33%	3.66%	4.82%	2.37%
Total Profit Margin	2.21%	6.47%	-11.32%	8.11%	3.91%	1.31%
EBIDA	-10.42%	9.42%	-2.92%	9.00%	10.69%	9.10%

Actual 7/31/2021	Actual 6/30/2021	Actual 6/31/2021	Actual 4/30/2021	Actual 3/31/2021	Actual 2/28/2021
\$3,108,961	\$2,686,411	\$3,057,995	\$2,899,022	\$3,193,036	\$2,690,883
\$12,385,219	\$11,118,723	\$10,956,305	\$11,180,916	\$12,012,531	\$9,644,427
\$1,481,938	\$1,448,630	\$1,308,860	\$1,588,815	\$1,451,105	\$1,300,086
\$234,229	\$343,674	\$161,892	\$298,059	\$342,042	\$281,294
\$17,210,347	\$15,596,439	\$15,485,052	\$15,986,809	\$16,998,714	\$13,916,680
\$7,790,286	\$6,867,239	\$6,890,213	\$6,861,972	\$7,053,702	\$5,012,790
\$1,057,325	\$1,119,785	\$763,338	\$478,207	\$1,095,631	\$1,109,741
\$58,415	\$394,216	\$280,209	\$248,982	\$128,263	\$541,439
8,906,006	8,381,239	7,933,760	7,390,160	8,277,496	6,663,970
\$8,304,341	\$7,215,200	\$7,551,292	\$8,576,648	\$8,721,218	\$7,252,720
126,489	105,054	101,440	135,982	100,917	158,645
8,432,830	7,320,254	7,652,732	8,712,630	8,822,136	7,411,366
\$3,480,834	\$5,326,942	\$3,663,709	\$3,482,562	\$3,666,312	\$3,298,343
\$1,008,022	\$989,361	\$968,262	\$1,070,954	\$1,111,599	\$1,017,103
\$306,728	\$285,959	\$322,046	\$380,228	\$230,786	\$153,689
\$321,340	\$512,548	\$393,985	\$248,549	\$208,531	\$304,497
\$546,635	\$839,680	\$387,299	\$493,446	\$383,312	\$348,634
\$1,476,093	\$1,174,839	\$1,314,104	\$1,442,417	\$1,386,819	\$997,588
\$86,421	\$91,804	\$70,553	\$117,576	\$89,246	\$93,512
\$476,044	\$515,075	\$516,803	\$478,494	\$500,382	\$516,910
\$82,703	\$52,887	\$52,519	\$45,980	\$44,011	\$44,229
\$238,671	\$199,196	\$152,472	\$220,969	\$216,184	\$172,795
\$63,758	\$57,770	\$64,630	\$64,238	\$68,020	\$70,289
\$558,604	\$557,387	\$573,690	\$569,609	\$578,675	\$563,827
\$8,815,953	\$10,383,228	\$8,291,874	\$8,626,022	\$8,469,839	\$7,602,816
(\$183,123)	(\$3,062,976)	(\$638,142)	\$87,609	\$365,206	(\$194,451)
10,981	10,538	103,889	13,895	17,587	11,312
21	(1,796)	408	390	967	183
(107,627)	(118,926)	(107,628)	(107,629)	(112,617)	(107,895)
319,366	7,381,377	(40,457)	806,373	1,784,952	758,617
\$222,720	\$2,287,193	(\$43,808)	\$713,030	\$1,690,908	\$662,486
\$39,597	(\$726,782)	(\$882,950)	\$880,639	\$2,056,204	\$471,035
	(17,627)	(136,484)		0	
\$39,597	(\$793,859)	(\$810,434)	\$880,639	\$2,056,204	\$471,035
-2.17%	-41.84%	-8.36%	1.01%	4.14%	-2.56%
0.47%	-10.80%	-8.92%	9.19%	23.31%	6.39%
4.46%	-34.23%	-0.86%	7.64%	10.70%	5.29%

Statement of Cash Flows

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

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ROCK SPRINGS, WY

Seven months ended January 31, 2022

CASH FLOW

	Current Month 1/31/2022	Current Year-To-Date 1/31/2022
CASH FLOWS FROM OPERATING ACTIVITIES:		
Net Income (Loss)	\$167,546	\$1,156,835
Adjustments to Reconcile Net Income to Net Cash Provided by Operating Activities:		
Depreciation	580,556	3,989,880
(Increase)/Decrease in Net Patient Accounts Receivable	1,227,659	(3,458,121)
(Increase)/Decrease in Other Receivables	(160,365)	731,796
(Increase)/Decrease in Inventories	(19,683)	36,024
(Increase)/Decrease in Pre-Paid Expenses	(16,137)	(517,402)
(Increase)/Decrease in Other Current Assets	0	0
Increase/(Decrease) in Accounts Payable	705,137	(381,369)
Increase/(Decrease) in Notes and Loans Payable	0	0
Increase/(Decrease) in Accrued Payroll and Benefits	332,180	542,940
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	28,717	(83,433)
Net Cash Provided by Operating Activities:	2,845,610	2,017,150
CASH FLOWS FROM INVESTING ACTIVITIES:		
Purchase of Property, Plant and Equipment	(857,311)	(4,198,967)
(Increase)/Decrease in Limited Use Cash and Investments	(38,361)	7,377,933
(Increase)/Decrease in Other Limited Use Assets	(7,373)	62,776
(Increase)/Decrease in Other Assets	211,988	(1,251,023)
Net Cash Used by Investing Activities	(691,057)	1,990,719
CASH FLOWS FROM FINANCING ACTIVITIES:		
Increase/(Decrease) in Bond/Mortgage Debt	(9,017)	(968,605)
Increase/(Decrease) in Capital Lease Debt	0	0
Increase/(Decrease) in Other Long Term Liabilities	(1,851,972)	(2,988,644)
Net Cash Used for Financing Activities	(1,860,989)	(3,957,249)
(INCREASE)/DECREASE IN RESTRICTED ASSETS	(0)	(0)
Net Increase/(Decrease) in Cash	293,564	50,620
Cash, Beginning of Period	10,059,797	10,302,741
Cash, End of Period	\$10,353,361	\$10,353,361

Patient Statistics

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

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ROCK SPRINGS, WY

Seven months ended January 31, 2022

Current Month				Year-To-Date				
Actual 01/31/22	Budget 01/31/22	Positive/ (Negative) Variance	Prior Year 01/31/21	STATISTICS	Actual 01/31/22	Budget 01/31/22	Positive/ (Negative) Variance	Prior Year 01/31/21
Discharges								
112	120	(8)	120	Acute	854	817	37	817
112	120	(8)	120	Total Adult Discharges	854	817	37	817
27	24	3	24	Newborn	229	236	(7)	227
139	144	(5)	144	Total Discharges	1,083	1,053	30	1,044
Patient Days:								
395	448	(53)	430	Acute	3,228	2,680	548	2,562
395	448	(53)	430	Total Adult Patient Days	3,228	2,680	548	2,562
42	44	(2)	35	Newborn	359	379	(20)	316
437	492	(55)	465	Total Patient Days	3,587	3,059	528	2,878
Average Length of Stay (ALOS)								
3.5	3.7	(0.2)	3.6	Acute	3.8	3.3	0.5	3.1
3.5	3.7	(0.2)	3.6	Total Adult ALOS	3.8	3.3	0.5	3.1
1.6	1.8	(0.3)	1.5	Newborn ALOS	1.6	1.6	(0.0)	1.4
Average Daily Census (ADC)								
12.7	14.5	(1.7)	13.9	Acute	15.0	12.5	2.5	11.9
12.7	14.5	(1.7)	13.9	Total Adult ADC	15.0	12.5	2.5	11.9
1.4	1.4	(0.1)	1.1	Newborn	1.7	1.8	(0.1)	1.5
Emergency Room Statistics								
130	118	12	112	ER Visits - Admitted	886	858	28	822
1,270	907	363	901	ER Visits - Discharged	8,260	6,888	1,372	6,852
1,400	1,025	375	1,013	Total ER Visits	9,146	7,746	1,400	7,674
9.29%	11.51%		11.06%	% of ER Visits Admitted	9.69%	11.08%		10.71%
116.07%	98.33%		93.33%	ER Admissions as a % of Total	103.75%	105.02%		100.61%
Outpatient Statistics:								
10,675	7,597	3,078	8,551	Total Outpatients Visits	66,118	57,619	8,499	64,297
157	89	68	89	Observation Bed Days	919	697	222	655
5,384	3,978	1,406	3,978	Clinic Visits - Primary Care	35,570	28,509	7,061	28,509
426	454	(28)	454	Clinic Visits - Specialty Clinics	3,323	3,716	(393)	3,716
25	31	(6)	31	IP Surgeries	157	184	(27)	174
126	120	6	120	OP Surgeries	760	958	(198)	918
Productivity Statistics:								
451.84	450.97	0.87	477.35	FTE's - Worked	457.19	450.97	6.22	437.21
493.86	494.77	(0.91)	508.16	FTE's - Paid	503.72	494.77	8.95	480.70
1.5280	1.5081	0.02	1.5081	Case Mix Index - Medicare	1.6930	1.6099	0.08	1.5374
0.7089	1.2953	(0.59)	1.2953	Case Mix Index - All payers	0.9111	1.1672	(0.26)	1.2168

Accounts Receivable Tracking Report

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

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ROCK SPRINGS, WY

01/31/22

	<u>Current Month Actual</u>	<u>Current Month Target</u>
Gross Days in Accounts Receivable - All Services	52.89	44.49
Net Days in Accounts Receivable	49.94	39.57
Number of Gross Days in Unbilled Revenue	4.24	3.0 or <
Number of Days Gross Revenue in Credit Balances	0.00	< 1.0
Self Pay as a Percentage of Total Receivables	28.20%	N/A
Charity Care as a % of Gross Patient Revenue - Current Month	0.17%	0.88%
Charity Care as a % of Gross Patient Revenue - Year-To-Date	0.66%	0.96%
Bad Debts as a % of Gross Patient Revenue - Current Month	7.53%	7.77%
Bad Debts as a % of Gross Patient Revenue - Year-To-Date	5.76%	6.76%
Collections as a Percentage of Net Revenue - Current Month	115.50%	100% or >
Collections as a Percentage of Net Revenue - Year-To-Date	93.26%	100% or >
Percentage of Blue Cross Receivable > 90 Days	2.90%	< 10%
Percentage of Insurance Receivable > 90 Days	17.78%	< 15%
Percentage of Medicaid Receivable > 90 Days	17.14%	< 20%
Percentage of Medicare Receivable > 60 Days	1.33%	< 6%

Variance Analysis

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

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ROCK SPRINGS, WYOMING

Seven months ended January 31, 2022

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	215,502	1.32%	6,560,394	5.62%

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

Average Daily Census is 12.7 in January which is under budget by 1.7

Deductions from Revenue	(614,844)	-7.20%	(1,794,440)	-2.95%
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Deductions from revenue are over budget for January and over budget year to date.

They are currently booked at 55.4 for January and 50.8% year to date. This number is monitored closely each month and fluctuates based on historical write-offs and current collection percentages.

Bad Debt Expense	24,020	1.90%	784,510	9.95%
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Bad debt expense is booked at 7.5% for January and 5.7% year to date.

Charity Care	116,704	81.04%	313,066	27.84%
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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	14,848	6.99%	(383,653)	-28.90%
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Other Operating Revenue is over budget for the month and is under budget year to date.

Most county maintenance funds are for capital projects.

Salaries and Wages	(247,937)	-7.23%	(1,925,558)	-8.00%
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Salary and Wages are over budget and are over budget year to date.

Paid FTEs are under budget by .91 FTEs for the month and over 8.95 FTEs year to date.

Fringe Benefits	13,615	1.28%	(973,969)	-15.48%
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Fringe benefits are over budget in January and over budget year to date.

Contract Labor	(569,455)	-4239.69%	(2,147,261)	-323.61%
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Contract labor is over budget for January and over budget year to date. Med/surg, ICU, OR Ultrasound, PACU, ER, Lab, Respiratory Therapy, Emergency Mgmt and Social Services are over budget.

Variance Analysis

MEMORIAL HOSPITAL OF SWEETWATER COUNTY ROCK SPRINGS, WYOMING Seven months ended January 31, 2022

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

	Current Month Amount	%	Year-to-Date Amount	%
Physician Fees	(40,897)	-11.30%	84,140	3.27%
Physician fees over budget in January and under budget year to date. ER & Emergency Mgmt and Sleep Lab are over budget in January.				
Purchased Services	(132,882)	-31.91%	(47,868)	-1.57%
Purchased services are under budget for January and under budget year to date. Expenses over budget are Dept Mgmt Service, Proficiency Testing and Other Purchased Services				
Supply Expense	117,153	9.49%	(1,718,995)	-20.34%
Supplies are under budget for January and over budget year to date. Line items over budget include implant, med/surg supplies, food, office supplies and maintenace supplies.				
Repairs & Maintenance	(44,717)	-8.96%	(209,381)	-5.61%
Repairs and Maintenance are under budget for January and over budget year to date.				
All Other Operating Expenses	(4,310)	-2.34%	11,523	0.79%
This expense is over budget in January and under budget year to date. Other expenses over budget are Employee recruitment, Physician recruitment and pharmacy floor direct.				
Leases and Rentals	7,085	12.94%	22,696	5.62%
This expense is under budget for January and is under budget year to date.				
Depreciation and Amortization	152,187	20.77%	711,769	15.14%
Depreciation is under budget for January and is under budget year to date.				
BALANCE SHEET				
Cash and Cash Equivalents	\$293,564	2.92%		
Cash increased in January. Cash collections for January were \$8.4 million. Days Cash on Hand increased to 147 days.				
Gross Patient Accounts Receivable	(\$1,126,292)	-3.62%		
This receivable decreased in January due to higher collections and a lower revenue month.				

Variance Analysis

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

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ROCK SPRINGS, WYOMING

Seven months ended January 31, 2022

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	%
Bad Debt and Allowance Reserves	(101,367)	-0.52%		
Bad Debt and Allowances increased.				
Other Receivables	160,365	13.57%		
Other Receivables increased in January due to county and occ med invoices and QRA.				
Prepaid Expenses	16,137	0.60%		
Prepaid expenses increased due to the normal activity in this account.				
Limited Use Assets	45,734	0.15%		
These assets increased due to the interest on the bonds.				
Plant Property and Equipment	276,755	0.40%		
The increase in these assets is due to the increase in Capital equipment and the normal increase in accumulated depreciation.				
Accounts Payable	(705,137)	-15.00%		
This liability increased due to the normal activity in this account.				
Accrued Payroll	(313,048)	-18.95%		
This liability increased in January. The payroll accrual for January was 15 days.				
Accrued Benefits	(19,132)	-0.72%		
This liability increased in January with the normal accrual and usage of PTO				
Other Current Liabilities	(28,717)	-8.58%		
This liability increased for January due to the accrued interest on the bonds				
Other Long Term Liabilities	1,851,972	33.63%		
This liability decreased due the payback of medicare accelerated				
Total Net Assets	(167,546)	-0.18%		

The net loss from operations for January is \$1,369,819



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

PHYSICIAN CLINICS

Unaudited Financial Statements

for

Seven months ended January 31, 2022

Certification Statement:

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

Certified by:

Tami Love

Chief Financial Officer

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

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Seven months ended January 31, 2022

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Key Financial Ratios

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

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ROCK SPRINGS, WY

Seven months ended January 31, 2022

- DESIRED POSITION IN RELATION TO BENCHMARKS AND BUDGET

	Month to Date 1/31/2022	Year to Date 1/31/2022	Prior Fiscal Year End 06/30/21	MGMA Hospital Owned Rural
Profitability:				
Operating Margin	-55.67%	-44.61%	-47.17%	-36.58%
Total Profit Margin	-55.67%	-44.61%	-47.17%	-36.58%
Contractual Allowance %	45.38%	44.75%	45.42%	
Liquidity:				
Net Days in Accounts Receivable	45.31	39.71	34.46	39.58
Gross Days in Accounts Receivable	58.46	51.99	44.23	72.82
Productivity and Efficiency:				
Patient Visits Per Day	173.68	165.44	137.99	
Total Net Revenue per FTE	N/A	\$186,145	\$151,830	
Salary Expense per Paid FTE	N/A	\$196,788	\$167,434	
Salary and Benefits as a % of Net Revenue	132.00%	121.97%	129.06%	91.26%
Employee Benefits %	20.94%	15.37%	17.03%	6.10%

Statement of Revenue and Expense

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

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ROCK SPRINGS, WY

Seven months ended January 31, 2022

	CURRENT MONTH				Prior Year 01/31/21
	Actual 01/31/22	Budget 01/31/22	Positive (Negative) Variance	Percentage Variance	
Gross Patient Revenue					
Clinic Revenue	1,482,429	1,666,571	(184,142)	-11.05%	1,410,642
Specialty Clinic Revenue	315,655	332,649	(16,994)	-5.11%	311,512
Total Gross Patient Revenue	1,798,083	1,999,221	(201,137)	-10.06%	1,722,154
Deductions From Revenue					
Discounts and Allowances	(816,054)	(897,823)	81,769	9.11%	(836,394)
Total Deductions From Revenue	(816,054)	(897,823)	81,769	9.11%	(836,394)
Net Patient Revenue	982,029	1,101,397	(119,368)	-10.84%	885,759
Other Operating Revenue	52,606	53,292	(686)	-1.29%	70,558
Total Operating Revenue	1,034,635	1,154,689	(120,054)	-10.40%	956,317
Operating Expenses					
Salaries and Wages	1,129,240	1,066,053	(63,187)	-5.93%	1,132,930
Fringe Benefits	236,456	250,961	14,505	5.78%	263,026
Contract Labor	0	0	0	0.00%	0
Physicians Fees	70,129	115,857	45,728	39.47%	76,208
Purchased Services	13,724	10,165	(3,559)	-35.02%	15,024
Supply Expense	17,580	14,559	(3,021)	-20.75%	14,651
Utilities	981	1,878	897	47.78%	1,810
Repairs and Maintenance	14,146	17,598	3,452	19.62%	17,458
Insurance Expense	14,998	14,816	(183)	-1.23%	13,611
All Other Operating Expenses	101,264	94,913	(6,352)	-6.69%	91,548
Bad Debt Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Leases and Rentals	2,559	3,268	709	21.70%	3,032
Depreciation and Amortization	9,545	9,419	(126)	-1.34%	18,273
Interest Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Total Operating Expenses	1,610,624	1,599,487	(11,137)	-0.70%	1,647,571
Net Operating Surplus/(Loss)	(575,988)	(444,797)	(131,191)	29.49%	(691,254)
Total Net Surplus/(Loss)	(\$575,988)	(\$444,797)	(\$131,191)	29.49%	(\$691,254)
Change in Unrealized Gains/(Losses) on Investments	0	0	0	0.00%	0
Increase/(Decrease in Unrestricted Net Assets	(575,988)	(444,797)	(131,191)	29.49%	(691,254)
Operating Margin	-55.67%	-38.52%			-72.28%
Total Profit Margin	-55.67%	-38.52%			-72.28%
EBIDA	-54.75%	-37.71%			-70.37%

Statement of Revenue and Expense

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

ROCK SPRINGS, WY

Seven months ended January 31, 2022

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	YEAR-TO-DATE				Prior Year 01/31/21
	Actual 01/31/22	Budget 01/31/22	Positive (Negative) Variance	Percentage Variance	
Gross Patient Revenue					
Clinic Revenue	11,191,471	11,488,772	(297,301)	-2.59%	9,628,069
Specialty Clinic Revenue	1,939,986	2,370,232	(430,246)	-18.15%	2,125,964
Total Gross Patient Revenue	13,131,457	13,859,004	(727,547)	-5.25%	11,754,033
Deductions From Revenue					
Discounts and Allowances	(5,875,685)	(6,366,591)	490,906	7.71%	(5,375,620)
Total Deductions From Revenue	(5,875,685)	(6,366,591)	490,906	7.71%	(5,375,620)
Net Patient Revenue	7,255,772	7,492,413	(236,641)	-3.16%	6,378,412
Other Operating Revenue	374,571	373,044	1,527	0.41%	506,569
Total Operating Revenue	7,630,343	7,865,457	(235,114)	-2.99%	6,884,981
Operating Expenses					
Salaries and Wages	8,066,592	7,386,354	(680,238)	-9.21%	7,646,067
Fringe Benefits	1,240,202	1,253,529	13,327	1.06%	1,205,158
Contract Labor	0	0	0	0.00%	0
Physicians Fees	390,282	680,397	290,115	42.64%	704,923
Purchased Services	95,208	114,214	19,006	16.64%	89,423
Supply Expense	127,717	117,704	(10,013)	-8.51%	96,581
Utilities	8,355	13,146	4,791	36.44%	8,411
Repairs and Maintenance	117,453	123,187	5,735	4.66%	141,680
Insurance Expense	106,111	103,709	(2,402)	-2.32%	91,168
All Other Operating Expenses	784,390	753,949	(30,441)	-4.04%	614,770
Bad Debt Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Leases and Rentals	24,502	22,438	(2,064)	-9.20%	21,511
Depreciation and Amortization	73,498	72,612	(886)	-1.22%	129,162
Interest Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Total Operating Expenses	11,034,309	10,641,240	(393,069)	-3.69%	10,748,852
Net Operating Surplus/(Loss)	(3,403,966)	(2,775,783)	(628,183)	22.63%	(3,863,871)
Total Net Surplus/(Loss)	(3,403,966)	(2,775,783)	(628,183)	22.63%	(3,863,871)
Change in Unrealized Gains/(Losses) on Investments	0	0	0	0.00%	0
Increase/(Decrease) in Unrestricted Net Assets	(3,403,966)	(2,775,783)	(628,183)	22.63%	(3,863,871)
Operating Margin	-44.61%	-35.29%			-56.12%
Total Profit Margin	-44.61%	-35.29%			-56.12%
EBIDA	-43.65%	-34.37%			-54.24%

Statement of Revenue and Expense - 13 Month Trend

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
ROCK SPRINGS, WY

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	Actual 1/31/2022	Actual 12/31/2021	Actual 11/30/2021	Actual 10/31/2021	Actual 9/30/2021
Gross Patient Revenue					
Clinic Revenue	\$1,482,429	\$1,967,053	\$1,622,638	\$1,696,739	\$1,419,718
Specialty Clinic Revenue	\$315,855	\$367,797	\$254,859	\$230,626	\$375,846
Total Gross Patient Revenue	\$1,798,083	\$2,324,849	\$1,877,297	\$1,927,365	\$1,795,564
Deductions From Revenue					
Discounts and Allowances	(\$816,054)	(\$1,025,029)	(\$833,465)	(\$859,090)	(\$881,974)
Total Deductions From Revenue	(\$816,054)	(\$1,025,029)	(\$833,465)	(\$859,090)	(\$881,974)
Net Patient Revenue	\$982,029	\$1,299,820	\$1,043,832	\$1,068,275	\$993,590
Other Operating Revenue	\$52,606	\$55,210	\$50,360	\$54,717	\$51,015
Total Operating Revenue	1,034,635	1,355,030	1,094,192	1,122,992	1,044,605
Operating Expenses					
Salaries and Wages	\$1,129,240	\$1,165,634	\$1,157,127	\$1,211,905	\$1,142,106
Fringe Benefits	\$236,456	\$155,260	\$157,402	\$200,865	\$181,343
Contract Labor	\$0	\$0	\$0	\$0	\$0
Physicians Fees	\$70,129	\$52,499	\$73,082	\$35,691	\$38,947
Purchased Services	\$13,724	\$13,553	\$15,431	\$14,885	\$11,585
Supply Expense	\$17,580	\$16,830	\$18,225	\$20,033	\$15,849
Utilities	\$981	\$985	\$997	\$652	\$1,326
Repairs and Maintenance	\$14,146	\$14,375	\$21,438	\$15,128	\$18,156
Insurance Expense	\$14,998	\$15,527	\$15,527	\$15,527	\$14,844
All Other Operating Expenses	\$101,264	\$119,107	\$94,760	\$127,049	\$107,037
Bad Debt Expense (Non-Governmental Providers)					
Leases and Rentals	\$2,559	\$3,864	\$3,844	\$3,593	\$2,835
Depreciation and Amortization	\$9,545	\$9,763	\$10,523	\$10,371	\$11,086
Interest Expense (Non-Governmental Providers)					
Total Operating Expenses	\$1,610,624	\$1,567,196	\$1,568,367	\$1,655,700	\$1,546,906
Net Operating Surplus/(Loss)	(\$575,988)	(\$212,166)	(\$474,175)	(\$532,707)	(\$502,301)
Total Net Surplus/(Loss)	(\$575,988)	(\$212,166)	(\$474,175)	(\$532,707)	(\$502,301)
Change in Unrealized Gains/(Losses) on Investm	0	0	0	0	0
Increase/(Decrease in Unrestricted Net Assets	(\$575,988)	(\$212,166)	(\$474,175)	(\$532,707)	(\$502,301)
Operating Margin	-55.67%	-15.66%	-43.34%	-47.44%	-48.09%
Total Profit Margin	-55.67%	-15.66%	-43.34%	-47.44%	-48.09%
EBIDA	-54.75%	-14.94%	-42.37%	-46.51%	-47.02%

Actual 8/31/2021	Actual 7/31/2021	Actual 6/30/2021	Actual 5/31/2021	Actual 4/30/2021	Actual 3/31/2021	Actual 2/28/2021	Actual 1/31/2021
\$1,520,956	\$1,481,938	\$1,448,630	\$1,308,860	\$1,588,815	\$1,451,105	\$1,300,086	\$1,410,642
\$171,175	\$234,229	\$343,674	\$181,892	\$298,058	\$342,042	\$281,294	\$311,512
\$1,692,131	\$1,716,167	\$1,792,304	\$1,470,752	\$1,886,871	\$1,793,147	\$1,581,380	\$1,722,154
(\$757,972)	(\$782,401)	(\$814,085)	(\$701,578)	(\$869,032)	(\$828,378)	(\$758,645)	(\$836,394)
(\$757,972)	(\$782,401)	(\$814,085)	(\$701,578)	(\$869,032)	(\$828,378)	(\$758,645)	(\$836,394)
\$934,159	\$934,067	\$978,219	\$769,173	\$1,017,838	\$964,777	\$822,735	\$885,759
\$56,240	\$54,422	\$46,757	\$59,125	\$58,845	\$59,103	\$65,776	\$70,558
990,399	988,489	1,024,977	828,299	1,076,684	1,023,880	888,510	956,317
\$1,137,088	\$1,123,497	\$1,061,614	\$940,167	\$1,037,659	\$1,142,213	\$1,104,879	\$1,132,938
\$137,188	\$171,689	\$149,134	\$184,159	\$206,715	\$216,355	\$240,814	\$263,026
\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
\$52,965	\$65,959	\$146,371	\$114,521	\$46,485	\$30,939	\$93,378	\$76,208
\$14,504	\$11,526	\$15,910	\$13,288	\$12,175	\$15,397	\$13,204	\$16,024
\$14,325	\$25,074	\$21,967	\$15,954	\$19,891	\$18,548	\$17,037	\$14,651
\$1,873	\$1,843	\$2,404	\$1,933	\$1,872	\$1,875	\$1,838	\$1,810
\$16,272	\$18,937	\$16,834	\$16,580	\$18,968	\$18,493	\$18,542	\$17,458
\$14,844	\$14,844	\$13,611	\$13,611	\$13,611	\$13,611	\$13,611	\$13,611
\$95,119	\$140,054	\$63,557	\$82,775	\$134,676	\$106,518	\$95,431	\$91,548
\$4,755	\$3,252	\$4,093	\$4,022	\$3,037	\$3,450	\$3,319	\$3,032
\$11,086	\$11,123	\$12,936	\$12,937	\$12,966	\$17,183	\$18,273	\$18,273
\$1,600,019	\$1,585,497	\$1,508,431	\$1,399,867	\$1,506,066	\$1,583,583	\$1,620,324	\$1,647,571
(\$509,620)	(\$597,009)	(\$483,454)	(\$571,558)	(\$429,373)	(\$559,703)	(\$731,814)	(\$691,254)
(\$509,620)	(\$597,009)	(\$483,454)	(\$571,558)	(\$429,373)	(\$559,703)	(\$731,814)	(\$691,254)
0	0	0	0	0	0	0	0
(\$509,620)	(\$597,009)	(\$483,454)	(\$571,558)	(\$429,373)	(\$559,703)	(\$731,814)	(\$691,254)
-51.46%	-60.40%	-47.17%	-69.01%	-39.88%	-54.66%	-82.36%	-72.28%
-51.46%	-60.40%	-47.17%	-69.01%	-39.88%	-54.66%	-82.36%	-72.28%
-50.34%	-59.27%	-45.91%	-67.44%	-38.67%	-52.99%	-80.31%	-70.37%

Patient Statistics

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

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ROCK SPRINGS, WY

Seven months ended January 31, 2022

Current Month				STATISTICS	Year-To-Date			
Actual	Budget	Positive/ (Negative)	Prior Year		Actual	Budget	Positive/ (Negative)	Prior Year
01/31/22	01/31/22	Variance	01/31/21		01/31/22	01/31/22	Variance	01/31/21
Outpatient Statistics:								
5,384	3,978	1,406	4,012	Clinic Visits - Primary Care	35,570	28,509	7,061	28,525
426	454	(28)	411	Clinic Visits - Specialty Clinics	3,323	3,716	(393)	3,490
Productivity Statistics:								
61.57	64.25	(2.68)	84.33	FTE's - Worked	62.55	64.25	(1.70)	72.61
69.33	70.60	(1.27)	89.94	FTE's - Paid	69.59	70.60	(1.01)	79.54

**MEMORIAL HOSPITAL OF SWEETWATER COUNTY
CASH DISBURSEMENT SUMMARY FOR JANUARY 22**

PAYMENT SOURCE	NO. OF DISBURSEMENTS	AMOUNT
OPERATIONS (GENERAL FUND/KEYBANK)	703	8,183,285.88
CAPITAL EQUIPMENT (PLANT FUND)	9	156,647.18
CONSTRUCTION IN PROGRESS (BUILDING FUND)	5	650,998.09
PAYROLL JANUARY 06, 2022	N/A	1,526,152.31
PAYROLL JANUARY 20, 2022	N/A	1,619,930.49
TOTAL CASH OUTFLOW		<u>\$8,990,931.15</u>
CASH COLLECTIONS		8,485,763.00
INCREASE/DECREASE IN CASH		-\$505,168.15

**CONSTRUCTION IN PROGRESS (BUILDING FUND) CASH DISBURSEMENTS
FISCAL YEAR 2022**

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
001122	7/8/2021	PLAN ONE/ARCHITECTS	14,699.53	MEDICAL IMAGING RENO		
001123	7/8/2021	ST+B ENGINEERING (SPACEK TI	82,507.79	HVAC PROJECT		
001128	7/9/2021	GROATHOUSE CONSTRUCTION,	209,015.00	HVAC PROJECT		
001129	7/9/2021	GROATHOUSE CONSTRUCTION,	1,057,454.00	HVAC PROJECT		
WF DEBT	7/14/2021	WF DEBT SERVICE	111,433.37	WF DEBT SERVICE		
JULY TOTALS					1,475,109.69	1,475,109.69

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
001130	8/5/2021	CACHE VALLEY ELECTRIC CO.	1,538.30	MEDICAL IMAGING RENO		
001131	8/12/2021	PLAN ONE/ARCHITECTS	11,024.66	MEDICAL IMAGING RENO		
001131	8/12/2021	PLAN ONE/ARCHITECTS	17,998.75	SULENTICH REMODEL		
WF DEBT	8/17/2021	WF DEBT SERVICE	111,433.37	WF DEBT SERVICE		
AUGUST TOTALS					141,995.08	1,617,104.77

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
001132	9/2/2021	WESTERN ENGINEERS & GEOLO	3,124.25	BULK O2 PROJECT		
001133	9/9/2021	PLAN ONE/ARCHITECTS	2,204.93	MEDICAL IMAGING RENO		
001134	9/23/2021	INSULATION INC.	4,711.15	MEDICAL IMAGING RENO		
001135	9/23/2021	WESTERN ENGINEERS & GEOLO	4,268.75	HVAC PROJECT		
WF DEBT	9/30/2021	WELLS FARGO	111,578.01	WF DEBT SERVICE		
SEPTEMBER TOTALS					125,887.09	1,742,991.86

CHECK NUMBER	DATE	PAYER	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
001136	10/7/2021	CACHE VALLEY ELECTRIC CO.	433.78	MEDICAL IMAGING RENO		
001137	10/7/2021	GROATHOUSE CONSTRUCTION,	161,221.00	HVAC PROJECT		
001138	10/7/2021	PLAN ONE/ARCHITECTS	2,204.93	MEDICAL IMAGING RENO		
001139	10/7/2021	GROATHOUSE CONSTRUCTION,	17,913.00	HVAC PROJECT		
001140	10/28/2021	CHEERNEY LANDSCAPING, INC	9,610.00	WATER LINE REPLACEMENT		
WF DEBT	10/18/2021	WELLS FARGO	111,578.01	WF DEBT SERVICE		
OCTOBER TOTALS					302,960.72	2,045,952.58

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
001141	11/4/2021	GROATHOUSE CONSTRUCTION,	15,611.00	HVAC PROJECT		
001142	11/4/2021	GROATHOUSE CONSTRUCTION,	140,499.00	HVAC PROJECT		
001143	11/11/2021	PLAN ONE/ARCHITECTS	2,204.93	MEDICAL IMAGING RENO		
WF DEBT	11/16/2021	WELLS FARGO	111,578.01	WF DEBT SERVICE		
NOVEMBER TOTALS					269,892.94	2,315,845.52

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
001144	12/2/2021	INSULATION INC.	7,911.00	MEDICAL IMAGING RENO		
001145	12/2/2021	GROATHOUSE CONSTRUCTION,	46,725.00	HVAC PROJECT		
001146	12/2/2021	GROATHOUSE CONSTRUCTION,	420,520.00	HVAC PROJECT		
001147	12/9/2021	PLAN ONE/ARCHITECTS	2,808.45	CHEMO MIXING ROOM		
001147	12/9/2021	PLAN ONE/ARCHITECTS	2,204.93	MEDICAL IMAGING RENO		
001148	12/16/2021	CITY OF ROCK SPRINGS	889.00	SULENTICH REMODEL		
DECEMBER TOTALS					481,058.38	2,796,903.90

CHECK NUMBER	DATE	PAYER	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
001149	1/6/2022	PLAN ONE/ARCHITECTS	2,808.45	MEDICAL IMAGING RENO		
001150	1/13/2022	INSULATION INC.	6,911.00	CHEMO MIXING ROOM		
001151	1/20/2022	GROATHOUSE CONSTRUCTION,	61,256.00	HVAC PROJECT		
001152	1/20/2022	GROATHOUSE CONSTRUCTION,	551,306.00	HVAC PROJECT		
WF DEBT	1/21/2022	WF DEBT SERVICE	28,716.64	WF DEBT SERVICE		
JANUARY TOTALS					650,998.09	3,447,901.99

**PLANT FUND CASH DISBURSEMENTS
FISCAL YEAR 2022**

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
002441	7/8/2021	CERNER CORPORATION	16,897.05	CERNER		
002442	7/15/2021	CARDINAL HEALTH	5,480.86	ORTHO WORKSTATION WITH ID TIPMASTER		
002443	7/15/2021	MEDIPINES CORP	9,758.91	NON-INVASIVE GAS EXCHANGE MONITORS		
002444	7/22/2021	KRISTI CLARK	694.71	CERNER		
002445	7/22/2021	ROCK SPRINGS WINNELSON CO	27,277.65	HOT WATER HEATER EXCHANGER		
002446	7/22/2021	STAXI CORPORATION	22,028.26	WHEELCHAIRS		
002447	7/22/2021	DELL COMPUTER CORPORATION	164,734.80	DESKTOPS AND MONITORS		
002448	7/29/2021	CARDINAL HEALTH	78,730.00	ORTHO VISION AUTOMATED BLOOD BANK SYSTEM		
JULY TOTALS					325,602.24	325,602.24

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
002449	8/5/2021	ENTRY SYSTEMS INC.	8,940.00	REPLACE LOADING DOCK DOOR		
002450	8/5/2021	P3 CONSULTING LLC	7,500.00	HMM/HTML5		
002451	8/12/2021	CERNER CORPORATION	35,823.72	CERNER		
002452	8/12/2021	DNV GL USA, INC.	10,685.40	SYNERGY LIFE		
002453	8/12/2021	VARIAN MEDICAL SYSTEMS, INC	5,144.50	STEREOTACTIC CONE SYSTEM		
002454	8/19/2021	CERNER CORPORATION	104,421.95	CERNER		
002455	8/19/2021	KARL STORZ ENDOSCOPY-AMER	12,464.00	ENT SCOPE		
002456	8/19/2021	VYAIR MEDICAL 211 INC.	24,999.00	CERNER INTERFACE TO CARDIOPULMONARY (VYAIR)		
002457	8/26/2021	RESPIRONICS	15,000.00	CERNER INTERFACE TO SLEEP LAB (PHILLIPS)		
AUGUST TOTALS					224,978.57	550,580.81

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
002458	9/9/2021	CERNER CORPORATION	18,939.52	CERNER		
002459	9/9/2021	DNV GL USA, INC.	6,240.00	SYNERGY LIFE		
002460	9/9/2021	TRI-ANIM HEALTH SERVICES INC	6,299.98	PARAPAC ADULT VENT		
002461	9/16/2021	CERNER CORPORATION	104,421.95	CERNER		
002462	9/16/2021	KRISTI CLARK	2,300.00	CERNER		
002463	9/16/2021	P3 CONSULTING LLC	10,000.00	CERNER INTERFACE FOR REV CYCLE & REFUNDS		
002464	9/23/2021	CERNER CORPORATION	76,792.62	CERNER		
002465	9/23/2021	CONVERGEONE, INC.	521,150.43	REPLACE NETWORK SWITCHES		
002466	9/30/2021	R & D SWEEPING & ASPHALT MAI	4,986.00	CONCRETE SEAL AND REPLACE		
002467	9/30/2021	DNV GL USA, INC.	1,176.21	SYNERGY LIFE		
SEPTEMBER TOTALS					752,306.71	1,302,887.52

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
002468	10/7/2021	GE PRECISION HEALTHCARE LLC	122,390.00	ULTRASOUND MACHINE		
002469	10/7/2021	TELEFLEX MEDICAL INC.	271.30	NEPTUNE HEATED HUMIDIFIERS		
002470	10/14/2021	CERNER CORPORATION	135,705.33	CERNER		
002471	10/14/2021	DELL COMPUTER CORPORATION	15,525.20	DESK TOPS AND MONITORS		
002472	10/14/2021	DNV GL USA, INC.	26,160.00	SYNERGY LIFE		
002473	10/14/2021	TELEFLEX MEDICAL INC.	4,000.00	NEPTUNE HEATED HUMIDIFIERS		
002474	10/14/2021	HIGH DESERT CONSTRUCTION, IP	287,897.00	WATERLINE REPLACEMENT		
002475	10/28/2021	CERNER CORPORATION	123,392.62	CERNER		
OCTOBER TOTALS					715,341.45	2,018,228.97

CHECK NUMBER	DATE	PAYER	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
002476	11/11/2021	CERNER CORPORATION	45,162.83	CERNER		
002477	11/18/2021	CONVERGEONE, INC.	12,288.00	FY21-63 REPLACE NETWORK SWITCHES		
002478	11/18/2021	DNV GL USA, INC.	6,480.00	SYNERGY LIFE		
002479	11/18/2021	STRYKER MEDICAL	26,673.74	ED GURNEYS (17)		
002480	11/24/2021	AVANOS MEDICAL, LLC	26,132.56	AVANOS CORTAK CENTRAL ACCESS SYSTEM		
002481	11/24/2021	CERNER CORPORATION	191,077.69	CERNER		
002482	11/24/2021	SCOTTCARE CORPORATION	14,788.00	SCOTTCARE TELEREHAB MONITORING		
002483	11/24/2021	STRYKER MEDICAL	137,490.26	ED GURNEYS (17)		
002484	11/24/2021	SIEMENS HEALTHCARE DIAGNOS	18,556.16	UNIPOC AND EDM INTERFACE WITH CERNER		
002485	11/24/2021	MARTIN-RAY LAUNDRY SYSTEM	2,780.00	LARGE WASHER MOTOR		
NOVEMBER TOTALS					481,429.24	2,499,658.21

CHECK NUMBER	DATE	PAYER	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
002486	12/2/2021	CDW GOVERNMENT LLC	30,650.30	CERNER - END USER COMPUTER EQUIPMENT		
002487	12/2/2021	HOLOGIC, INC.	19,200.00	CERNER - END USER COMPUTER EQUIPMENT		
002488	12/2/2021	KARL STORZ ENDOSCOPY-AMERI	15,049.50	CERNER - END USER COMPUTER EQUIPMENT		
002489	12/9/2021	CDW GOVERNMENT LLC	34,576.35	CERNER - END USER COMPUTER EQUIPMENT		
002490	12/9/2021	CERNER CORPORATION	4,173.23	CERNER		
002491	12/16/2021	CERNER CORPORATION	191,077.69	CERNER		
002492	12/22/2021	CDW GOVERNMENT LLC	37,005.30	CERNER - END USER COMPUTER EQUIPMENT		
002493	12/22/2021	CERNER CORPORATION	425,967.42	CERNER		
002494	12/22/2021	DUDE SOLUTIONS INC.	6,126.00	WORXHUB		
002495	12/22/2021	STAPLES	153,586.93	HOSPITAL FURNITURE		
002496	12/30/2021	WASATCH CONTROLS (HARRIS A	4,574.00	PHARMACY RENO		
DECEMBER TOTALS					921,986.72	3,421,644.93

CHECK NUMBER	DATE	PAYER	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
002497	1/6/2022	CDW GOVERNMENT LLC	1,130.30	CERNER END-USER COMPUTER EQUIPMENT		
002498	1/6/2022	CERNER CORPORATION	4,040.65	CERNER		
002499	1/6/2022	COVIDIEN SALES LLC, DBA GIVE	4,500.00	COVIDIEN 980 VENTILATORS (3)		
002500	1/6/2022	GE PRECISION HEALTHCARE LLC	19,200.00	GE ULTRASOUND MACHINE		
002501	1/13/2022	KARL STORZ ENDOSCOPY-AMERI	13,434.15	VIDEO CYSTOSCOPE		
002502	1/13/2022	TURF EQUIPMENT & AGRONOMIC	26,514.00	SIDEWALK SNOW REMOVAL VEHICLE		
002503	1/13/2022	VISIONEX, LLC	13,000.00	VIDEO CYSTOSCOPE		
002504	1/27/2022	MEDTRONIC, USA	36,725.75	PT EYE SYSTEM/THYROID LOCATOR		
002505	1/27/2022	SYSCO INTERMOUNTAIN FOOD	38,102.33	FOOD SERVICE LINE		
JANUARY TOTALS					156,647.18	3,578,292.11

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
GENERAL FUND DISBURSEMENTS
1/31/2022

Amount	Description
52,390.31	Advertising Total
3,912.90	Billing Services Total
13,066.94	Blood Total
3,500.00	Building Lease Total
3,352.28	Cellular Telephone Total
40,398.25	Collection Agency Total
21,124.93	Computer Equipment Total
117,856.74	Consulting Fees Total
234,639.37	Contract Maintenance Total
401,623.81	Contract Personnel Total
810.48	Courier Services Total
31,412.97	Dental Insurance Total
650.06	Diabetes Education Program Total
11,621.41	Dialysis Supplies Total
1,900.00	Education & Travel Total
536.95	Education Material Total
305.00	Employee Recruitment Total
6,667.53	Employee Vision Plan Total
55,411.06	Equipment Lease Total
45,934.20	Food Total
6,276.47	Freight Total
916.03	Fuel Total
3,212.26	Garbage Collection Total
606,493.80	Group Health Total
340,323.02	Hospital Supplies Total
17,598.00	Implant Supplies Total
185.00	Instruments Total
28,778.47	Insurance Premium Total
276.85	Insurance Refund Total
68,759.17	Laboratory Services Total
292,904.30	Laboratory Supplies Total
6,210.46	Laundry Supplies Total
3,615.00	Legal Fees Total
1,419.00	License/Fees Total
2,170.64	Life Insurance Total
15,500.00	Lithotripsy Services Total
71,499.12	Locum Tenens Total
64,554.71	Maintenance & Repair Total
16,703.16	Maintenance Supplies Total
993.00	Marketing & Promotional Supplies Total
150.00	Membership Fee Total
390.00	Memberships Total
4,057.32	MHSC Foundation Total
287.00	Monthly Pest Control Total
8,049.81	Non Medical Supplies Total
5,670.57	Office Supplies Total
1,970.00	Other Employee Benefits Total

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
GENERAL FUND DISBURSEMENTS
1/31/2022

24,276.00	Other Purchased Services Total
28,134.43	Oxygen Rental Total
7,801.03	Patient Refund Total
639.24	Payroll Deduction Total
15,716.81	Payroll Garnishment Total
3,200,000.00	Payroll Transfer Total
1,033,288.09	Pharmacy Management Total
16,699.88	Physician Recruitment Total
5,000.00	Physician Retention Total
193,590.29	Physician Services Total
32,291.68	Physician Student Loan Total
6,340.00	Postage Total
95,878.00	Professional Liability Insurance Total
153,810.59	Professional Service Total
22,298.23	Proficiency Testing Total
155.25	Radiation Monitoring Total
30,804.21	Radiology Material Total
575.00	Radiology Supplies Total
21,236.55	Reimbursement - CME Total
13,786.07	Reimbursement - Education & Travel Total
45.08	Reimbursement - Hospital Supplies Total
5,575.88	Reimbursement - Misc Total
1,004.23	Reimbursement - Non Hospital Supplies Total
99.88	Reimbursement - Notary Fee Total
385.98	Reimbursement - Office Supplies Total
137.96	Reimbursement - Payroll Deduction Total
18.65	Reimbursement - Supplies Total
150.00	Reimbursement - Uniforms Total
389,756.85	Retirement Total
676.21	Sales Tax Payment Total
200.00	Scholarship Total
32.74	Scrub Sale Deduction Total
500.00	Sponsorship Total
4,859.60	Surgery Equipment Total
41,202.07	Surgery Supplies Total
2,678.01	Survey Total
996.10	Transcription Services Total
126.42	Uniforms Total
130,666.77	Utilities Total
1,683.12	Waste Disposal Total
4,161.00	Window Cleaning Total
79,929.63	Worker's Comp Total
8,183,285.88	Grand Total

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
GENERAL FUND DISBURSEMENTS
1/31/2022

Check Number	Date	Vendor Check Name	Amount	Description
183253	12/22/2021	BIG THICKET BROADCASTING	3,189.00	Advertising
183775	1/13/2022	ROCKET MINER	26.88	Advertising
183507	1/6/2022	UPSLOPE MEDIA LLC	20,000.00	Advertising
183832	1/20/2022	BEST VERSION MEDIA LLC	774.40	Advertising
183936	1/27/2022	BIG THICKET BROADCASTING	3,364.00	Advertising
183939	1/27/2022	BRIDGER VALLEY PIONEER	645.00	Advertising
183877	1/20/2022	KEMMERER GAZETTE	335.00	Advertising
183969	1/27/2022	KEMMERER GAZETTE	105.00	Advertising
183896	1/20/2022	PILOT BUTTE BROADCASTING	650.00	Advertising
183988	1/27/2022	PINEDALE ROUNDUP	375.00	Advertising
183901	1/20/2022	ROCKET MINER	600.00	Advertising
183997	1/27/2022	ROCKET MINER	362.54	Advertising
183904	1/20/2022	SCORPION HEALTHCARE LLC	9,133.84	Advertising
184004	1/27/2022	SUBLETTE EXAMINER	250.00	Advertising
183919	1/20/2022	SWEETWATER NOW, LLC	3,400.00	Advertising
184005	1/27/2022	SWEETWATER NOW, LLC	3,400.00	Advertising
183920	1/20/2022	THE RADIO NETWORK	3,166.65	Advertising
EFT00000007240	1/6/2022	LAMAR ADVERTISING	1,200.00	Advertising
EFT00000007268	1/20/2022	LAMAR ADVERTISING	1,133.00	Advertising
EFT00000007270	1/20/2022	ROCK SPRINGS SWEETWATER COUNTY AIRPORT	280.00	Advertising
183954	1/27/2022	EXPRESS MEDICAID BILLING SERV	3,912.90	Billing Services
183804	1/13/2022	VITALANT	6,672.48	Blood
184013	1/27/2022	VITALANT	6,394.46	Blood
183849	1/20/2022	CURRENT PROPERTIES, LLC	3,500.00	Building Lease
183511	1/6/2022	VERIZON WIRELESS, LLC	3,352.28	Cellular Telephone
183429	1/6/2022	COLLECTION PROFESSIONALS, INC	311.90	Collection Agency
183512	1/6/2022	WAKEFIELD & ASSOCIATES, INC.	39,782.45	Collection Agency
183948	1/27/2022	COLLECTION PROFESSIONALS, INC	303.90	Collection Agency
183419	1/6/2022	CDW GOVERNMENT LLC	3,657.00	Computer Equipment
183693	1/13/2022	CDW GOVERNMENT LLC	14,300.06	Computer Equipment
183702	1/13/2022	DELL COMPUTER CORPORATION	1,465.16	Computer Equipment
183838	1/20/2022	CDW GOVERNMENT LLC	1,701.71	Computer Equipment
184010	1/27/2022	UNIVERSITY OF UTAH (UHC OUTREACH)	117,856.74	Consulting Fees
183694	1/13/2022	CERNER CORPORATION	85,003.35	Contract Maintenance
183427	1/6/2022	CLOUDU COMMUNICATIONS INC.	77.18	Contract Maintenance
183431	1/6/2022	COMPLIANCE PLUS INC.	6,234.75	Contract Maintenance
183719	1/13/2022	GREENSHADES SOFTWARE	64.75	Contract Maintenance
183443	1/6/2022	HENRY SCHEIN PRACTICE SOLUTIONS	841.50	Contract Maintenance
183722	1/13/2022	INSIGHT SCREENING LLC	1,757.50	Contract Maintenance
183452	1/6/2022	IVANTI, INC.	18,035.90	Contract Maintenance
183733	1/13/2022	LENOVO GLOBAL TECHNOLOGY	817.12	Contract Maintenance
183734	1/13/2022	NICKESON HEALTH SOLUTIONS	233.43	Contract Maintenance
183750	1/13/2022	NUANCE COMMUNICATIONS, INC	313.33	Contract Maintenance
183757	1/13/2022	PHILIPS HEALTHCARE	1,133.00	Contract Maintenance
183487	1/6/2022	QUADRAMED	541.20	Contract Maintenance
183760	1/13/2022	QUADRAMED	8,815.00	Contract Maintenance
183768	1/13/2022	REMI CORPORATION	2,822.65	Contract Maintenance
183771	1/13/2022	RL DATIX	421.00	Contract Maintenance
183780	1/13/2022	SDFI-TELEMEDICINE LLC	1,250.00	Contract Maintenance
183782	1/13/2022	SIEMENS MEDICAL SOLUTIONS USA	15,294.17	Contract Maintenance
183798	1/13/2022	TRUE COMMERCE, INC	3,510.30	Contract Maintenance
183805	1/13/2022	VOLPORA SOLUTIONS, INC.	6,515.00	Contract Maintenance
183514	1/6/2022	WASATCH CONTROLS	3,428.50	Contract Maintenance

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
GENERAL FUND DISBURSEMENTS
1/31/2022

183516	1/6/2022	WAYSTAR HEALTH	4,685.63	Contract Maintenance
183930	1/27/2022	ABILITY NETWORK INC	848.54	Contract Maintenance
183943	1/27/2022	CERNIER CORPORATION	9,285.12	Contract Maintenance
183944	1/27/2022	CHANGE HEALTHCARE SOLUTIONS, LLC	8,027.88	Contract Maintenance
183967	1/27/2022	ISI WATER CHEMISTRIES	650.78	Contract Maintenance
183971	1/27/2022	LOOPSREEN LLC	420.00	Contract Maintenance
183982	1/27/2022	NUANCE COMMUNICATIONS, INC	105.00	Contract Maintenance
183986	1/27/2022	PHILIPS HEALTHCARE	1,433.00	Contract Maintenance
183990	1/27/2022	PLAYNETWORK, INC.	179.70	Contract Maintenance
183994	1/27/2022	REMI CORPORATION	2,548.85	Contract Maintenance
183998	1/20/2022	RL DATIX	421.00	Contract Maintenance
183905	1/20/2022	SECHRIST TECHNOLOGY GROUP	1,024.00	Contract Maintenance
183908	1/20/2022	SIEMENS MEDICAL SOLUTIONS USA	19,220.16	Contract Maintenance
184001	1/27/2022	SIEMENS MEDICAL SOLUTIONS USA	2,680.00	Contract Maintenance
184009	1/27/2022	T-SYSTEM, INC	9,854.30	Contract Maintenance
184014	1/27/2022	VSR2 LIMITED	2,385.10	Contract Maintenance
184015	1/27/2022	WASATCH CONTROLS	653.00	Contract Maintenance
184017	1/27/2022	WYODATA SECURITY INC.	2,305.00	Contract Maintenance
W/T	1/20/2022	ORTHO PHREESIA FEE	7.70	Contract Maintenance
W/T	1/7/2022	OPTIMIS	200.00	Contract Maintenance
W/T	1/21/2022	CARE CLOUD	349.00	Contract Maintenance
W/T	1/6/2022	ZENITH	350.35	Contract Maintenance
W/T	1/20/2022	TRIZETTO FEE	5,719.22	Contract Maintenance
W/T	1/20/2022	CLINIC PHREESIA FEE	6,176.40	Contract Maintenance
183707	1/13/2022	ELWOOD STAFFING SERVICES, INC	18,150.70	Contract Personnel
183442	1/6/2022	FOCUSONE SOLUTIONS LLC	50,955.88	Contract Personnel
183713	1/13/2022	FOCUSONE SOLUTIONS LLC	66,062.75	Contract Personnel
183456	1/6/2022	JIM LANE	3,278.00	Contract Personnel
183744	1/13/2022	MICHAEL ZANETTI LOVE	6,750.00	Contract Personnel
183492	1/6/2022	SARAH ROTH	510.00	Contract Personnel
183779	1/13/2022	SARAH ROTH	188.00	Contract Personnel
183494	1/6/2022	SOLANT HEALTH	20,719.50	Contract Personnel
183784	1/13/2022	SOLANT HEALTH	60,685.25	Contract Personnel
183854	1/20/2022	ELWOOD STAFFING SERVICES, INC	7,722.87	Contract Personnel
183955	1/27/2022	FAVORITE HEALTHCARE STAFFING, INC.	42,658.16	Contract Personnel
183860	1/20/2022	FOCUSONE SOLUTIONS LLC	57,382.13	Contract Personnel
183958	1/27/2022	FOCUSONE SOLUTIONS LLC	50,791.07	Contract Personnel
183999	1/27/2022	SARAH ROTH	188.00	Contract Personnel
183913	1/20/2022	SOLANT HEALTH	15,597.50	Contract Personnel
183424	1/6/2022	CITY CAB	21.00	Courier Services
183983	1/27/2022	PACKAGERUNNER LOGISTICS LLC	789.48	Courier Services
183703	1/13/2022	DELTA DENTAL	31,412.97	Dental Insurance
184006	1/27/2022	SWEETWATER COUNTY DISTRICT BOARD OF HEALTH	650.06	Diabetes Education Program
183443	1/6/2022	FRESENIUS USA MARKETING, INC.	8,988.68	Dialysis Supplies
183448	1/6/2022	HENRY SCHEIN INC	285.00	Dialysis Supplies
183959	1/27/2022	FRESENIUS USA MARKETING, INC.	1,796.66	Dialysis Supplies
183963	1/27/2022	HENRY SCHEIN INC	198.15	Dialysis Supplies
EFT000000007280	1/27/2022	HENRY SCHEIN INC	352.92	Dialysis Supplies
183809	1/13/2022	WYOMING MEDICAL SOCIETY	1,900.00	Education & Travel
183870	1/20/2022	INJOY VIDEOS	430.95	Education Material
EFT000000007241	1/6/2022	MY EDUCATIONAL RESOURCES	106.00	Education Material
EFT000000007245	1/6/2022	SST TESTING +, INC.	305.00	Employee Recruitment
183803	1/13/2022	VISION SERVICE PLAN - WY	6,667.53	Employee Vision Plan
183699	1/13/2022	COPIER & SUPPLY COMPANY	67.80	Equipment Lease

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
GENERAL FUND DISBURSEMENTS
1/31/2022

183716	1/13/2022	GE HEALTHCARE FINANCIAL SERVICES	10,692.03	Equipment Lease
183783	1/13/2022	SIEMENS FINANCIAL SERVICES, INC	18,429.63	Equipment Lease
183508	1/6/2022	US BANK EQUIPMENT FINANCE	881.77	Equipment Lease
183801	1/13/2022	US BANK EQUIPMENT FINANCE	2,027.03	Equipment Lease
183949	1/27/2022	COPIER & SUPPLY COMPANY	8,592.00	Equipment Lease
183906	1/20/2022	SHADOW MOUNTAIN WATER CO, WY	977.99	Equipment Lease
184000	1/27/2022	SHADOW MOUNTAIN WATER CO, WY	229.85	Equipment Lease
183924	1/20/2022	US BANK EQUIPMENT FINANCE	1,633.94	Equipment Lease
184011	1/27/2022	US BANK EQUIPMENT FINANCE	233.67	Equipment Lease
EFT000000007259	1/13/2022	TIMEPAYMENT CORP	2,628.23	Equipment Lease
W/T	1/10/2022	SIEMENS EDI	9,017.12	Equipment Lease
183436	1/6/2022	DFA DAIRY BRANDS CORP., LLC	208.21	Food
183701	1/13/2022	DFA DAIRY BRANDS CORP., LLC	357.57	Food
183440	1/6/2022	F B MCFADDEN WHOLESALE	1,230.65	Food
183711	1/13/2022	F B MCFADDEN WHOLESALE	3,976.01	Food
183481	1/6/2022	NICHOLAS & CO INC	12,110.60	Food
183749	1/13/2022	NICHOLAS & CO INC	3,072.36	Food
183499	1/6/2022	SYS CO INTERMOUNTAIN FOOD	4,542.96	Food
183791	1/13/2022	SYS CO INTERMOUNTAIN FOOD	2,562.24	Food
183517	1/6/2022	WESTERN WYOMING BEVERAGES INC	660.40	Food
183807	1/13/2022	WESTERN WYOMING BEVERAGES INC	750.37	Food
183850	1/20/2022	DFA DAIRY BRANDS CORP., LLC	32.45	Food
183952	1/27/2022	DFA DAIRY BRANDS CORP., LLC	229.33	Food
183856	1/20/2022	F B MCFADDEN WHOLESALE	2,641.36	Food
183956	1/27/2022	F B MCFADDEN WHOLESALE	1,866.10	Food
183981	1/27/2022	NICHOLAS & CO INC	6,748.11	Food
184007	1/27/2022	SYS CO INTERMOUNTAIN FOOD	2,846.41	Food
184016	1/27/2022	WESTERN WYOMING BEVERAGES INC	289.05	Food
EFT000000007237	1/6/2022	COCA-COLA BOTTLING COMPANY HIGH COUNTRY	863.00	Food
EFT000000007251	1/13/2022	COCA-COLA BOTTLING COMPANY HIGH COUNTRY	651.00	Food
EFT000000007278	1/27/2022	COCA-COLA BOTTLING COMPANY HIGH COUNTRY	248.00	Food
183505	1/6/2022	TRIOSE, INC	246.33	Freight
183922	1/20/2022	TRIOSE, INC	6,030.14	Freight
183767	1/13/2022	RED HORSE OIL COMPANIES INC	916.03	Fuel
EFT000000007260	1/13/2022	WWS - ROCK SPRINGS	3,212.26	Garbage Collection
W/T	1/24/2022	FURTHER ADMIN FEE	211.25	Group Health
W/T	1/7/2022	FURTHER FLEX 1/5/22	1,554.02	Group Health
W/T	1/26/2022	FURTHER FLEX 1/26/22	2,088.76	Group Health
W/T	1/21/2022	FURTHER FLEX 1/19/22	2,200.76	Group Health
W/T	1/14/2022	FURTHER FLEX 1/12/22	4,061.52	Group Health
W/T	1/28/2022	BLUE CROSS BLUE SHIELD 1/21/22	28,788.64	Group Health
W/T	1/7/2022	BLUE CROSS BLUE SHIELD 12/31/21	154,923.97	Group Health
W/T	1/21/2022	BLUE CROSS BLUE SHIELD 1/14/22	412,664.88	Group Health
183450	1/6/2022	HUNTSMAN CANCER HOSPITAL	237.60	Hospital Supplies
183664	1/13/2022	AIR CLEAN SYSTEMS	153.00	Hospital Supplies
183668	1/13/2022	ALTA MEDICAL SPECIALTIES	388.34	Hospital Supplies
183401	1/6/2022	AMBU INCORPORATED	195.85	Hospital Supplies
183403	1/6/2022	APPLIED MEDICAL	1,464.00	Hospital Supplies
183670	1/13/2022	AQUACAST LINER	368.00	Hospital Supplies
183404	1/6/2022	ARTHREX INC.	629.00	Hospital Supplies
183671	1/13/2022	ARTHREX INC.	240.00	Hospital Supplies
183410	1/6/2022	B BRAUN MEDICAL INC.	560.50	Hospital Supplies
183676	1/13/2022	B BRAUN MEDICAL INC.	4,163.60	Hospital Supplies
183408	1/6/2022	BARD PERIPHERAL VASCULAR INC	584.00	Hospital Supplies

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183409	1/6/2022	BAYER HEALTHCARE LLC	1,246.60	Hospital Supplies
183678	1/13/2022	BECTON DICKINSON	653.60	Hospital Supplies
183680	1/13/2022	BG MEDICAL LLC	1,700.00	Hospital Supplies
183412	1/6/2022	BIOMET SPORTS MEDICINE	950.00	Hospital Supplies
183682	1/13/2022	BIOMET SPORTS MEDICINE	950.00	Hospital Supplies
183414	1/6/2022	BOSTON SCIENTIFIC CORP	1,381.36	Hospital Supplies
183683	1/13/2022	BOSTON SCIENTIFIC CORP	1,022.32	Hospital Supplies
183433	1/6/2022	C R BARD INC	381.98	Hospital Supplies
183418	1/6/2022	CARDINAL HEALTH/V. MUELLER	53,438.60	Hospital Supplies
183689	1/13/2022	CARDINAL HEALTH/V. MUELLER	28,002.62	Hospital Supplies
183690	1/13/2022	CAREFUSION 2200 INC	1,200.00	Hospital Supplies
183426	1/6/2022	CIVCO RADIOTHERAPY	1,213.00	Hospital Supplies
183695	1/13/2022	CIVCO RADIOTHERAPY	706.00	Hospital Supplies
183432	1/6/2022	COULMED PRODUCTS GROUP, LLC	446.95	Hospital Supplies
183434	1/6/2022	CR BARD, INC	390.00	Hospital Supplies
183437	1/6/2022	DIAGNOSTICA STAGO INC	872.89	Hospital Supplies
183705	1/13/2022	DIAGNOSTICA STAGO INC	2,999.64	Hospital Supplies
183438	1/6/2022	DJ ORTHOPEDICS, LLC	288.43	Hospital Supplies
183706	1/13/2022	DJ ORTHOPEDICS, LLC	162.68	Hospital Supplies
183439	1/6/2022	EQUASHIELD LLC	1,145.70	Hospital Supplies
183710	1/13/2022	EQUASHIELD LLC	7,370.44	Hospital Supplies
183717	1/13/2022	GETINGE USA SALES, LLC	678.26	Hospital Supplies
183447	1/6/2022	HEALTHCARE LOGISTICS INC	205.06	Hospital Supplies
183720	1/13/2022	HOLOGIC, INC.	2,433.00	Hospital Supplies
183721	1/13/2022	HULL ANESTHESIA INC	180.00	Hospital Supplies
183453	1/6/2022	J & J HEALTH CARE SYSTEMS INC	4,652.44	Hospital Supplies
183724	1/13/2022	J & J HEALTH CARE SYSTEMS INC	352.00	Hospital Supplies
183461	1/6/2022	KARL STORZ ENDOSCOPY-AMERICA	4,995.83	Hospital Supplies
183748	1/13/2022	M V A P MEDICAL SUPPLIES, INC.	999.00	Hospital Supplies
183469	1/6/2022	MCKESSON MEDICAL-SURGICAL	1,489.60	Hospital Supplies
183735	1/13/2022	MCKESSON MEDICAL-SURGICAL	27.35	Hospital Supplies
183470	1/6/2022	MEAD JOHNSON NUTRITION	80.32	Hospital Supplies
183738	1/13/2022	MEDTRONIC, USA	1,250.00	Hospital Supplies
183740	1/13/2022	MERCURY MEDICAL	582.20	Hospital Supplies
183479	1/6/2022	NATUS MEDICAL INC	313.00	Hospital Supplies
183482	1/6/2022	OLYMPUS AMERICA INC	109.20	Hospital Supplies
183751	1/13/2022	OLYMPUS AMERICA INC	296.54	Hospital Supplies
183483	1/6/2022	OWENS & MINOR 90005430	21.60	Hospital Supplies
183754	1/13/2022	OWENS & MINOR 90005430	11,702.36	Hospital Supplies
183485	1/6/2022	PERFORMANCE HEALTH SUPPLY INC	142.75	Hospital Supplies
183766	1/13/2022	RADIOMETER AMERICA INC	1,817.49	Hospital Supplies
183489	1/6/2022	RESPIRONICS	178.00	Hospital Supplies
183769	1/13/2022	RESPIRONICS	178.00	Hospital Supplies
183770	1/13/2022	RYTHMILINK HOLDINGS, LLC	188.00	Hospital Supplies
183786	1/13/2022	STERIS CORPORATION	8,753.97	Hospital Supplies
183500	1/6/2022	TELEFLEX LLC	111.00	Hospital Supplies
183792	1/13/2022	TELEFLEX LLC	46.60	Hospital Supplies
183504	1/6/2022	TRI-ANIM HEALTH SERVICES INC	1,071.21	Hospital Supplies
183797	1/13/2022	TRI-ANIM HEALTH SERVICES INC	388.05	Hospital Supplies
183509	1/6/2022	UTAH MEDICAL PRODUCTS INC	2,244.00	Hospital Supplies
183515	1/6/2022	WAXIE SANITARY SUPPLY	35.00	Hospital Supplies
183806	1/13/2022	WAXIE SANITARY SUPPLY	50.00	Hospital Supplies
183903	1/20/2022	ABBOTT NUTRITION	52.63	Hospital Supplies
183823	1/20/2022	ALTA MEDICAL SPECIALTIES	472.61	Hospital Supplies

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183932	1/27/2022	AMAZON.COM CREDIT PLAN	2,883.53	Hospital Supplies
183827	1/20/2022	APPLIED MEDICAL	96.00	Hospital Supplies
183826	1/20/2022	APPLIED MEDICAL TECHNOLOGY	579.38	Hospital Supplies
183933	1/27/2022	ARMSTRONG MEDICAL INDUSTRIES	560.00	Hospital Supplies
183830	1/20/2022	B BRAUN MEDICAL INC.	132.30	Hospital Supplies
183934	1/27/2022	B BRAUN MEDICAL INC.	585.60	Hospital Supplies
183828	1/20/2022	BAXTER HEALTHCARE CORP/IV	3,365.04	Hospital Supplies
183829	1/20/2022	BAYER HEALTHCARE LLC	1,246.36	Hospital Supplies
183831	1/20/2022	BECTON DICKINSON	290.00	Hospital Supplies
183937	1/27/2022	BLOXR SOLUTIONS LLC	15,594.50	Hospital Supplies
183834	1/20/2022	BOSTON SCIENTIFIC CORP	5,684.92	Hospital Supplies
183938	1/27/2022	BOSTON SCIENTIFIC CORP	1,225.17	Hospital Supplies
183848	1/20/2022	C R BARD INC	190.99	Hospital Supplies
183836	1/20/2022	CARDINAL HEALTH/V. MUELLER	14,419.33	Hospital Supplies
183940	1/27/2022	CARDINAL HEALTH/V. MUELLER	65,539.61	Hospital Supplies
183845	1/20/2022	CONE INSTRUMENTS	141.88	Hospital Supplies
183846	1/20/2022	COOK MEDICAL INCORPORATED	1,334.28	Hospital Supplies
183853	1/20/2022	DOCTOR EASY MEDICAL PRODUCTS	165.00	Hospital Supplies
183855	1/20/2022	EQUASHIELD LLC	4,454.20	Hospital Supplies
183953	1/27/2022	EQUASHIELD LLC	2,418.59	Hospital Supplies
183866	1/20/2022	GYNEC CORP	350.85	Hospital Supplies
183868	1/20/2022	HEALTHCARE LOGISTICS INC	255.25	Hospital Supplies
183871	1/20/2022	J & J HEALTH CARE SYSTEMS INC	9,244.32	Hospital Supplies
183968	1/27/2022	J & J HEALTH CARE SYSTEMS INC	1,422.04	Hospital Supplies
183876	1/20/2022	KCI USA	201.77	Hospital Supplies
183917	1/20/2022	LEICA BIOSYSTEMS RICHMOND	617.81	Hospital Supplies
183900	1/27/2022	M V A P MEDICAL SUPPLIES, INC.	12.75	Hospital Supplies
183882	1/20/2022	MCKESSON MEDICAL-SURGICAL	682.45	Hospital Supplies
183883	1/20/2022	MEDI-DOSE INCORPORATED	76.73	Hospital Supplies
183887	1/20/2022	MEDTRONIC, USA	6,761.00	Hospital Supplies
183888	1/20/2022	MERCURY MEDICAL	102.22	Hospital Supplies
183931	1/27/2022	MIADERM	624.00	Hospital Supplies
183891	1/20/2022	NATUS MEDICAL INC	331.51	Hospital Supplies
183893	1/20/2022	OWENS & MINOR 90005430	13,966.62	Hospital Supplies
183905	1/27/2022	PERFORMANCE HEALTH SUPPLY INC	186.00	Hospital Supplies
183992	1/27/2022	QUESET MEDICAL	47.00	Hospital Supplies
183897	1/20/2022	RESPIRONICS	120.00	Hospital Supplies
183907	1/20/2022	SHEATHING TECHNOLOGIES, INC.	363.95	Hospital Supplies
183915	1/20/2022	STERIS CORPORATION	247.90	Hospital Supplies
184003	1/27/2022	STERIS CORPORATION	5,487.12	Hospital Supplies
184008	1/27/2022	TELEFLEX LLC	217.50	Hospital Supplies
183921	1/20/2022	TRI-ANIM HEALTH SERVICES INC	4,702.34	Hospital Supplies
183927	1/20/2022	VAPOTHERM INC.	556.00	Hospital Supplies
183928	1/20/2022	VERATHON INC.	1,430.00	Hospital Supplies
EFT00000007236	1/6/2022	BREG INC	391.08	Hospital Supplies
EFT000000007239	1/6/2022	HARDY DIAGNOSTICS	126.96	Hospital Supplies
EFT000000007242	1/6/2022	OVATION MEDICAL	293.60	Hospital Supplies
EFT000000007249	1/13/2022	BREG INC	305.18	Hospital Supplies
EFT000000007250	1/13/2022	BSN MEDICAL INC	64.03	Hospital Supplies
EFT000000007253	1/13/2022	HARDY DIAGNOSTICS	887.16	Hospital Supplies
EFT000000007261	1/13/2022	ZOLL MEDICAL CORPORATION	48.31	Hospital Supplies
EFT000000007265	1/20/2022	BREG INC	70.40	Hospital Supplies
EFT000000007267	1/20/2022	HARDY DIAGNOSTICS	1,224.41	Hospital Supplies
EFT000000007272	1/20/2022	STRYKER INSTRUMENTS	1,135.60	Hospital Supplies

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EFT00000007273	1/20/2022	ZOLL MEDICAL CORPORATION	1,725.63	Hospital Supplies
EFT00000007277	1/27/2022	CLINICAL CHOICE	405.00	Hospital Supplies
EFT00000007279	1/27/2022	HARDY DIAGNOSTICS	1,312.97	Hospital Supplies
EFT00000007282	1/27/2022	STRYKER INSTRUMENTS	244.86	Hospital Supplies
183773	1/13/2022	ROCK SPRINGS LV. CENTER	1,306.61	Hospital Supplies
183899	1/20/2022	ROCK SPRINGS LV. CENTER	324.58	Hospital Supplies
183753	1/13/2022	OSSIO, INC.	6,558.00	Implant Supplies
183796	1/13/2022	TREACE MEDICAL CONCEPTS, INC.	11,040.00	Implant Supplies
EFT00000007276	1/27/2022	CIVCO MEDICAL INSTRUMENTS	185.00	Instruments
183506	1/6/2022	PROVIDENT LIFE & ACCIDENT	13,322.00	Insurance Premium
183800	1/13/2022	PROVIDENT LIFE & ACCIDENT	15,456.47	Insurance Premium
183520	1/6/2022	INSURANCE REFUND	168.55	Insurance Refund
184020	1/27/2022	INSURANCE REFUND	108.30	Insurance Refund
183666	1/13/2022	ALLERMETRIX INC	970.00	Laboratory Services
183742	1/13/2022	METABOLIC NEWBORN SCREENING	2,015.00	Laboratory Services
183972	1/27/2022	MAYO COLLABORATIVE SERVICES, INC.	1,368.40	Laboratory Services
183976	1/27/2022	METABOLIC NEWBORN SCREENING	3,308.88	Laboratory Services
EFT00000007275	1/27/2022	ARUP LABORATORIES, INC.	61,076.89	Laboratory Services
183669	1/13/2022	ANAEROBE SYSTEMS	13.55	Laboratory Supplies
183405	1/6/2022	ASSOCIATES OF CAPE COD INC	364.00	Laboratory Supplies
183677	1/13/2022	BECKMAN COULTER, INC	1,418.70	Laboratory Supplies
183411	1/6/2022	BIOFIRE DIAGNOSTICS, LLC	2,335.00	Laboratory Supplies
183681	1/13/2022	BIOFIRE DIAGNOSTICS, LLC	3,870.00	Laboratory Supplies
183687	1/13/2022	CANCER DIAGNOSTICS, INC	883.25	Laboratory Supplies
183417	1/6/2022	CARDINAL HEALTH	26,202.70	Laboratory Supplies
183688	1/13/2022	CARDINAL HEALTH	1,152.50	Laboratory Supplies
183691	1/13/2022	CARESFIELD LLC	108.81	Laboratory Supplies
183421	1/6/2022	CEPHEID	17,091.00	Laboratory Supplies
183441	1/6/2022	FISHER HEALTHCARE	183.25	Laboratory Supplies
183712	1/13/2022	FISHER HEALTHCARE	32,491.36	Laboratory Supplies
183730	1/13/2022	KURIN INC.	3,054.22	Laboratory Supplies
183474	1/6/2022	MEDIVATORS REPROCESSING SYSTEM	76.81	Laboratory Supplies
183741	1/13/2022	MESA LABORATORIES	420.00	Laboratory Supplies
183746	1/13/2022	MOPEC INC	276.20	Laboratory Supplies
183935	1/27/2022	BECKMAN COULTER, INC	18.70	Laboratory Supplies
183835	1/20/2022	CARDINAL HEALTH	27,141.15	Laboratory Supplies
184022	1/27/2022	CARDINAL HEALTH	68,783.06	Laboratory Supplies
183941	1/27/2022	CARESFIELD LLC	388.56	Laboratory Supplies
183839	1/20/2022	CEPHEID	699.38	Laboratory Supplies
183859	1/20/2022	FISHER HEALTHCARE	47,276.56	Laboratory Supplies
183957	1/27/2022	FISHER HEALTHCARE	6,936.81	Laboratory Supplies
183885	1/20/2022	MEDIVATORS REPROCESSING SYSTEM	285.00	Laboratory Supplies
183973	1/27/2022	MEDIVATORS REPROCESSING SYSTEM	218.62	Laboratory Supplies
183889	1/20/2022	MESA LABORATORIES	549.14	Laboratory Supplies
183909	1/20/2022	SIEMENS HEALTHCARE DIAGNOSTICS, INC.	172.50	Laboratory Supplies
183910	1/20/2022	SIGMA-ALDRICH INC	510.00	Laboratory Supplies
183923	1/20/2022	TYPENEX MEDICAL, LLC	388.69	Laboratory Supplies
EFT00000007235	1/6/2022	BIO-RAD LABORATORIES	571.62	Laboratory Supplies
EFT00000007243	1/6/2022	PDC HEALTHCARE	292.07	Laboratory Supplies
EFT00000007248	1/13/2022	BIO-RAD LABORATORIES	8,138.20	Laboratory Supplies
EFT00000007255	1/13/2022	ORTHO-CLINICAL DIAGNOSTICS INC	37,190.00	Laboratory Supplies
EFT00000007256	1/13/2022	PDC HEALTHCARE	508.07	Laboratory Supplies
EFT00000007258	1/13/2022	SYSMEX AMERICA INC.	530.97	Laboratory Supplies
EFT00000007264	1/20/2022	BIO-RAD LABORATORIES	2,184.71	Laboratory Supplies

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EFT000000007269	1/20/2022	PDC HEALTHCARE	18.48	Laboratory Supplies
EFT000000007283	1/27/2022	SYSMEX AMERICA INC.	159.66	Laboratory Supplies
EFT000000007281	1/27/2022	MARTIN-RAY LAUNDRY SYSTEMS	6,210.46	Laundry Supplies
183950	1/27/2022	CROWLEY FLECK ATTORNEYS	540.00	Legal Fees
183967	1/27/2022	PHILLIPS LAW, LLC	3,075.00	Legal Fees
183425	1/6/2022	CITY OF ROCK SPRINGS	1,419.00	License/Fees
183480	1/6/2022	NEW YORK LIFE INSURANCE COMPANY	2,170.64	Life Insurance
184018	1/27/2022	WYOMING UROLOGICAL SERVICES, LP	15,500.00	Urology Services
183430	1/6/2022	COMPHEALTH, INC.	6,450.30	Locum Tenens
183697	1/13/2022	COMPHEALTH, INC.	43,771.94	Locum Tenens
183446	1/6/2022	DR. HARESH K. VISWESHWAR	628.60	Locum Tenens
183503	1/6/2022	DR. TIFFANY PRACHACHALERM	38.84	Locum Tenens
183457	1/6/2022	JHHR MEDICAL ASSOCIATES	10,634.40	Locum Tenens
183843	1/20/2022	COMPHEALTH, INC.	9,975.04	Locum Tenens
183686	1/13/2022	CACHE VALLEY ELECTRIC CO.	3,224.11	Maintenance & Repair
183692	1/13/2022	CARRIER COMMERCIAL SERVICE	7,216.00	Maintenance & Repair
183451	1/6/2022	ISI WATER CHEMISTRIES	4,790.00	Maintenance & Repair
183737	1/13/2022	MED ONE EQUIPMENT SERVICES LLC	4,735.00	Maintenance & Repair
183484	1/6/2022	PARTSSOURCE	2,474.42	Maintenance & Repair
183755	1/13/2022	PARTSSOURCE	2,425.54	Maintenance & Repair
183763	1/13/2022	R & D SWEEPING AND ASPHALT MAINTENANCE, LC	14,000.00	Maintenance & Repair
183497	1/6/2022	STEALTH TECHNOLOGIES	2,672.85	Maintenance & Repair
183789	1/13/2022	SUEZ WTS SERVICES USA, INC.	1,724.00	Maintenance & Repair
183942	1/27/2022	CARRIER COMMERCIAL SERVICE	1,519.83	Maintenance & Repair
183844	1/20/2022	COMPLIANCE PLUS INC.	3,500.00	Maintenance & Repair
183962	1/27/2022	HEISCO LLC	950.00	Maintenance & Repair
183895	1/20/2022	PARTSSOURCE	97.80	Maintenance & Repair
183904	1/27/2022	PARTSSOURCE	707.12	Maintenance & Repair
183918	1/20/2022	SWEETWATER PLUMBING & HEATING	214.00	Maintenance & Repair
183926	1/20/2022	UTAH CONTROLS INC	157.50	Maintenance & Repair
EFT000000007244	1/6/2022	SERVCO	9,155.74	Maintenance & Repair
EFT000000007271	1/20/2022	SERVCO	4,950.00	Maintenance & Repair
183402	1/6/2022	AMERICAN FLOOR MATS, LLC	1,440.95	Maintenance Supplies
183407	1/6/2022	BARD ACCESS SYSTEMS	2,412.48	Maintenance Supplies
183675	1/13/2022	BARD ACCESS SYSTEMS	989.07	Maintenance Supplies
183428	1/6/2022	CODALE ELECTRIC SUPPLY, INC	3,272.70	Maintenance Supplies
183696	1/13/2022	CODALE ELECTRIC SUPPLY, INC	1,230.01	Maintenance Supplies
183444	1/6/2022	GRAINGER	325.54	Maintenance Supplies
183718	1/13/2022	GRAINGER	268.30	Maintenance Supplies
183478	1/6/2022	NAPA AUTO PARTS	103.56	Maintenance Supplies
183490	1/6/2022	ROCK SPRINGS WINNELSON CO	300.37	Maintenance Supplies
183776	1/13/2022	ROCK SPRINGS WINNELSON CO	731.23	Maintenance Supplies
183772	1/13/2022	ROCKLER COMPANIES, INC	426.99	Maintenance Supplies
183822	1/20/2022	ALPINE PURE SOFT WATER	676.20	Maintenance Supplies
183833	1/20/2022	BONCAT OF ROCK SPRINGS	184.06	Maintenance Supplies
183841	1/20/2022	CODALE ELECTRIC SUPPLY, INC	226.08	Maintenance Supplies
183861	1/20/2022	GRAINGER	358.94	Maintenance Supplies
183960	1/27/2022	GRAINGER	1,063.14	Maintenance Supplies
183869	1/20/2022	HOME DEPOT	1,238.80	Maintenance Supplies
183964	1/27/2022	HOME DEPOT	598.72	Maintenance Supplies
183902	1/20/2022	ROCK SPRINGS WINNELSON CO	680.90	Maintenance Supplies
EFT000000007233	1/6/2022	ACE HARDWARE	95.94	Maintenance Supplies
EFT000000007246	1/6/2022	ULINE, INC	43.50	Maintenance Supplies
EFT000000007262	1/20/2022	ACE HARDWARE	35.68	Maintenance Supplies

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183704	1/13/2022	DESKTOP DESIGN	993.00	Marketing & Promotional Supplies
183865	1/20/2022	GREEN RIVER CHAMBER OF COMMERCE	150.00	Membership Fee
EFT000000007257	1/13/2022	R.S. CHAMBER OF COMMERCE	390.00	Memberships
183396	1/4/2022	MHSC-FOUNDATION	1,151.66	MHSC Foundation
183815	1/18/2022	MHSC-FOUNDATION	1,101.66	MHSC Foundation
183977	1/27/2022	MHSC-FOUNDATION	1,804.00	MHSC Foundation
183501	1/6/2022	TERMINIX OF WYOMING	287.00	Monthly Pest Control
183725	1/13/2022	J.J. KELLER & ASSOCIATES, INC.	98.45	Non Medical Supplies
183471	1/6/2022	MEDIBADGE INC	282.87	Non Medical Supplies
183475	1/6/2022	MEDLINE INDUSTRIES INC	1,028.89	Non Medical Supplies
183736	1/13/2022	MEDLINE INDUSTRIES INC	1,772.63	Non Medical Supplies
183752	1/13/2022	OPTUM360 LLC	449.89	Non Medical Supplies
183875	1/20/2022	J.J. KELLER & ASSOCIATES, INC.	260.50	Non Medical Supplies
183886	1/20/2022	MEDLINE INDUSTRIES INC	3,392.83	Non Medical Supplies
183974	1/27/2022	MEDLINE INDUSTRIES INC	65.28	Non Medical Supplies
183892	1/20/2022	OPTUM360 LLC	223.43	Non Medical Supplies
184002	1/27/2022	SMILEMAKERS	475.04	Non Medical Supplies
183709	1/13/2022	ENCOMPASS GROUP, LLC	165.00	Office Supplies
183472	1/6/2022	MEDICAL ARTS PRESS	4.99	Office Supplies
183759	1/13/2022	PROFORMA	496.86	Office Supplies
183495	1/6/2022	STAPLES BUSINESS ADVANTAGE	830.02	Office Supplies
183785	1/13/2022	STAPLES BUSINESS ADVANTAGE	816.28	Office Supplies
183878	1/20/2022	LABELMATCH	108.92	Office Supplies
183909	1/27/2022	PURCHASE POWER	76.49	Office Supplies
183914	1/20/2022	STAPLES BUSINESS ADVANTAGE	3,172.01	Office Supplies
183810	1/13/2022	YOUNG AT HEART SENIOR CITIZENS CENTER	1,970.00	Other Employee Benefits
183464	1/6/2022	QUICK RESPONSE TAXI	276.00	Other Purchased Services
183732	1/13/2022	QUICK RESPONSE TAXI	105.00	Other Purchased Services
183825	1/20/2022	AMERICAN TELEMEDICINE CONNECT CONSORTIUM, INC.	4,475.00	Other Purchased Services
183945	1/27/2022	CHESTNUT LIGHTING	19,091.00	Other Purchased Services
183840	1/20/2022	CJ SIGNS	160.00	Other Purchased Services
183946	1/27/2022	CJ SIGNS	85.00	Other Purchased Services
183880	1/20/2022	QUICK RESPONSE TAXI	84.00	Other Purchased Services
EFT000000007234	1/6/2022	AIRGAS INTERMOUNTAIN INC	3,338.84	Oxygen Rental
EFT000000007247	1/13/2022	AIRGAS INTERMOUNTAIN INC	21,280.90	Oxygen Rental
EFT000000007263	1/20/2022	AIRGAS INTERMOUNTAIN INC	3,232.84	Oxygen Rental
EFT000000007274	1/27/2022	AIRGAS INTERMOUNTAIN INC	281.85	Oxygen Rental
183521	1/6/2022	PATIENT REFUND	65.00	Patient Refund
183522	1/6/2022	PATIENT REFUND	20.00	Patient Refund
183523	1/6/2022	PATIENT REFUND	10.00	Patient Refund
183524	1/6/2022	PATIENT REFUND	35.00	Patient Refund
183525	1/6/2022	PATIENT REFUND	45.00	Patient Refund
183526	1/6/2022	PATIENT REFUND	30.00	Patient Refund
183527	1/6/2022	PATIENT REFUND	25.00	Patient Refund
183528	1/6/2022	PATIENT REFUND	20.00	Patient Refund
183529	1/6/2022	PATIENT REFUND	20.00	Patient Refund
183530	1/6/2022	PATIENT REFUND	13.40	Patient Refund
183531	1/6/2022	PATIENT REFUND	20.00	Patient Refund
183533	1/6/2022	PATIENT REFUND	20.00	Patient Refund
183532	1/6/2022	PATIENT REFUND	35.00	Patient Refund
183534	1/6/2022	PATIENT REFUND	47.51	Patient Refund
183536	1/6/2022	PATIENT REFUND	20.00	Patient Refund
183535	1/6/2022	PATIENT REFUND	20.00	Patient Refund
183539	1/6/2022	PATIENT REFUND	40.00	Patient Refund

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
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183537	1/6/2022	PATIENT REFUND	70.00	Patient Refund
183538	1/6/2022	PATIENT REFUND	50.00	Patient Refund
183540	1/6/2022	PATIENT REFUND	90.00	Patient Refund
183542	1/6/2022	PATIENT REFUND	69.24	Patient Refund
183541	1/6/2022	PATIENT REFUND	20.00	Patient Refund
183543	1/6/2022	PATIENT REFUND	50.00	Patient Refund
183544	1/6/2022	PATIENT REFUND	5.00	Patient Refund
183546	1/6/2022	PATIENT REFUND	160.00	Patient Refund
183545	1/6/2022	PATIENT REFUND	20.00	Patient Refund
183547	1/6/2022	PATIENT REFUND	32.36	Patient Refund
183549	1/6/2022	PATIENT REFUND	11.32	Patient Refund
183548	1/6/2022	PATIENT REFUND	25.00	Patient Refund
183550	1/6/2022	PATIENT REFUND	40.00	Patient Refund
183551	1/6/2022	PATIENT REFUND	40.00	Patient Refund
183552	1/6/2022	PATIENT REFUND	35.00	Patient Refund
183553	1/6/2022	PATIENT REFUND	23.65	Patient Refund
183554	1/6/2022	PATIENT REFUND	10.00	Patient Refund
183555	1/6/2022	PATIENT REFUND	70.00	Patient Refund
183556	1/6/2022	PATIENT REFUND	23.08	Patient Refund
183557	1/6/2022	PATIENT REFUND	40.00	Patient Refund
183558	1/6/2022	PATIENT REFUND	109.20	Patient Refund
183559	1/6/2022	PATIENT REFUND	50.00	Patient Refund
183560	1/6/2022	PATIENT REFUND	35.00	Patient Refund
183561	1/6/2022	PATIENT REFUND	22.63	Patient Refund
183562	1/6/2022	PATIENT REFUND	25.00	Patient Refund
183563	1/6/2022	PATIENT REFUND	25.00	Patient Refund
183564	1/6/2022	PATIENT REFUND	83.84	Patient Refund
183565	1/6/2022	PATIENT REFUND	71.62	Patient Refund
183566	1/6/2022	PATIENT REFUND	60.56	Patient Refund
183567	1/6/2022	PATIENT REFUND	210.00	Patient Refund
183569	1/6/2022	PATIENT REFUND	91.91	Patient Refund
183568	1/6/2022	PATIENT REFUND	70.00	Patient Refund
183570	1/6/2022	PATIENT REFUND	66.50	Patient Refund
183571	1/6/2022	PATIENT REFUND	284.06	Patient Refund
183572	1/6/2022	PATIENT REFUND	50.00	Patient Refund
183573	1/6/2022	PATIENT REFUND	20.00	Patient Refund
183574	1/6/2022	PATIENT REFUND	40.00	Patient Refund
183575	1/6/2022	PATIENT REFUND	10.00	Patient Refund
183576	1/6/2022	PATIENT REFUND	30.00	Patient Refund
183577	1/6/2022	PATIENT REFUND	35.00	Patient Refund
183578	1/6/2022	PATIENT REFUND	55.00	Patient Refund
183579	1/6/2022	PATIENT REFUND	207.68	Patient Refund
183580	1/6/2022	PATIENT REFUND	10.00	Patient Refund
183581	1/6/2022	PATIENT REFUND	35.00	Patient Refund
183583	1/6/2022	PATIENT REFUND	30.00	Patient Refund
183582	1/6/2022	PATIENT REFUND	19.43	Patient Refund
183584	1/6/2022	PATIENT REFUND	35.00	Patient Refund
183586	1/6/2022	PATIENT REFUND	45.00	Patient Refund
183585	1/6/2022	PATIENT REFUND	49.10	Patient Refund
183587	1/6/2022	PATIENT REFUND	25.00	Patient Refund
183589	1/6/2022	PATIENT REFUND	35.00	Patient Refund
183590	1/6/2022	PATIENT REFUND	20.00	Patient Refund
183591	1/6/2022	PATIENT REFUND	40.00	Patient Refund
183588	1/6/2022	PATIENT REFUND	35.00	Patient Refund

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183594	1/6/2022	PATIENT REFUND	20.00	Patient Refund
183592	1/6/2022	PATIENT REFUND	20.00	Patient Refund
183593	1/6/2022	PATIENT REFUND	20.00	Patient Refund
183596	1/6/2022	PATIENT REFUND	35.00	Patient Refund
183595	1/6/2022	PATIENT REFUND	5.00	Patient Refund
183597	1/6/2022	PATIENT REFUND	30.00	Patient Refund
183598	1/6/2022	PATIENT REFUND	736.36	Patient Refund
183599	1/6/2022	PATIENT REFUND	35.00	Patient Refund
183600	1/6/2022	PATIENT REFUND	35.00	Patient Refund
183601	1/6/2022	PATIENT REFUND	50.00	Patient Refund
183602	1/6/2022	PATIENT REFUND	20.00	Patient Refund
183603	1/6/2022	PATIENT REFUND	61.94	Patient Refund
183604	1/6/2022	PATIENT REFUND	237.81	Patient Refund
183605	1/6/2022	PATIENT REFUND	104.34	Patient Refund
183606	1/6/2022	PATIENT REFUND	50.00	Patient Refund
183607	1/6/2022	PATIENT REFUND	20.00	Patient Refund
183608	1/6/2022	PATIENT REFUND	40.00	Patient Refund
183609	1/6/2022	PATIENT REFUND	35.00	Patient Refund
183610	1/6/2022	PATIENT REFUND	7.00	Patient Refund
183611	1/6/2022	PATIENT REFUND	336.75	Patient Refund
183612	1/6/2022	PATIENT REFUND	25.00	Patient Refund
183613	1/6/2022	PATIENT REFUND	18.66	Patient Refund
183614	1/6/2022	PATIENT REFUND	35.00	Patient Refund
183617	1/6/2022	PATIENT REFUND	35.00	Patient Refund
183618	1/6/2022	PATIENT REFUND	25.00	Patient Refund
183615	1/6/2022	PATIENT REFUND	25.00	Patient Refund
183616	1/6/2022	PATIENT REFUND	35.00	Patient Refund
183619	1/6/2022	PATIENT REFUND	50.00	Patient Refund
183620	1/6/2022	PATIENT REFUND	20.00	Patient Refund
183621	1/6/2022	PATIENT REFUND	10.00	Patient Refund
183622	1/6/2022	PATIENT REFUND	40.00	Patient Refund
183624	1/6/2022	PATIENT REFUND	15.00	Patient Refund
183623	1/6/2022	PATIENT REFUND	70.00	Patient Refund
183625	1/6/2022	PATIENT REFUND	34.00	Patient Refund
183627	1/6/2022	PATIENT REFUND	20.00	Patient Refund
183626	1/6/2022	PATIENT REFUND	33.80	Patient Refund
183628	1/6/2022	PATIENT REFUND	40.00	Patient Refund
183629	1/6/2022	PATIENT REFUND	14.49	Patient Refund
183630	1/6/2022	PATIENT REFUND	20.00	Patient Refund
183631	1/6/2022	PATIENT REFUND	40.00	Patient Refund
183632	1/6/2022	PATIENT REFUND	290.00	Patient Refund
183633	1/6/2022	PATIENT REFUND	113.26	Patient Refund
183634	1/6/2022	PATIENT REFUND	25.00	Patient Refund
183635	1/6/2022	PATIENT REFUND	25.00	Patient Refund
183636	1/6/2022	PATIENT REFUND	24.00	Patient Refund
183637	1/6/2022	PATIENT REFUND	30.00	Patient Refund
183638	1/6/2022	PATIENT REFUND	10.00	Patient Refund
183639	1/6/2022	PATIENT REFUND	55.00	Patient Refund
183640	1/6/2022	PATIENT REFUND	62.00	Patient Refund
183641	1/6/2022	PATIENT REFUND	50.00	Patient Refund
183642	1/6/2022	PATIENT REFUND	105.00	Patient Refund
183643	1/6/2022	PATIENT REFUND	20.00	Patient Refund
183644	1/6/2022	PATIENT REFUND	11.76	Patient Refund
183645	1/6/2022	PATIENT REFUND	40.00	Patient Refund

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183647	1/6/2022	PATIENT REFUND	25.00	Patient Refund
183646	1/6/2022	PATIENT REFUND	44.70	Patient Refund
183648	1/6/2022	PATIENT REFUND	100.00	Patient Refund
183649	1/6/2022	PATIENT REFUND	10.00	Patient Refund
183650	1/6/2022	PATIENT REFUND	25.00	Patient Refund
183652	1/6/2022	PATIENT REFUND	30.00	Patient Refund
183651	1/6/2022	PATIENT REFUND	60.00	Patient Refund
183653	1/6/2022	PATIENT REFUND	30.00	Patient Refund
183654	1/6/2022	PATIENT REFUND	31.19	Patient Refund
183811	1/13/2022	PATIENT REFUND	236.00	Patient Refund
183655	1/6/2022	PATIENT REFUND	120.00	Patient Refund
183656	1/6/2022	PATIENT REFUND	50.00	Patient Refund
183657	1/6/2022	PATIENT REFUND	40.00	Patient Refund
183658	1/6/2022	PATIENT REFUND	50.88	Patient Refund
183659	1/6/2022	PATIENT REFUND	30.00	Patient Refund
183660	1/6/2022	PATIENT REFUND	100.00	Patient Refund
183661	1/6/2022	PATIENT REFUND	25.00	Patient Refund
184021	1/27/2022	PATIENT REFUND	25.00	Patient Refund
183400	1/4/2022	UNITED WAY OF SWEETWATER COUNTY	394.62	Payroll Deduction
183819	1/18/2022	UNITED WAY OF SWEETWATER COUNTY	244.62	Payroll Deduction
183393	1/4/2022	CLERK OF COURT-CASPER	237.37	Payroll Garnishment
183394	1/4/2022	DAVID G. PEAKE	3,484.62	Payroll Garnishment
183395	1/4/2022	DISTRICT COURT THIRD JUDICIAL DIST	1,233.95	Payroll Garnishment
183397	1/4/2022	STATE OF WYOMING DFS/CSES	1,607.87	Payroll Garnishment
183398	1/4/2022	SWEETWATER CIRCUIT COURT-RS	1,295.19	Payroll Garnishment
183399	1/4/2022	TREASURER STATE OF MAINE	172.00	Payroll Garnishment
183812	1/18/2022	CLERK OF COURT-CASPER	232.66	Payroll Garnishment
183813	1/18/2022	DAVID G. PEAKE	3,484.62	Payroll Garnishment
183814	1/18/2022	DISTRICT COURT THIRD JUDICIAL DIST	1,167.25	Payroll Garnishment
183816	1/18/2022	STATE OF WYOMING DFS/CSES	1,607.87	Payroll Garnishment
183817	1/18/2022	SWEETWATER CIRCUIT COURT-RS	1,021.41	Payroll Garnishment
183818	1/18/2022	TREASURER STATE OF MAINE	172.00	Payroll Garnishment
W/T	1/4/2022	PAYROLL 1	1,600,000.00	Payroll Transfer
W/T	1/18/2022	PAYROLL 2	1,600,000.00	Payroll Transfer
183837	1/20/2022	CARDINAL HEALTH PHARMACY MGMT	1,033,285.09	Pharmacy Management
183708	1/13/2022	EMILY JAMES	15,000.00	Physician Recruitment
183663	1/13/2022	DR. AHMAD BASHIRMOGHADDAM	462.92	Physician Recruitment
183673	1/20/2022	DR. JAMES ZUBERNIS	1,236.96	Physician Recruitment
183476	1/6/2022	MELISSA JEWELL	5,000.00	Physician Retention
183662	1/13/2022	ADVANCED MEDICAL IMAGING, LLC	18,664.00	Physician Services
183727	1/13/2022	JOHN A. ILIYA, M.D.	25,200.00	Physician Services
183466	1/6/2022	LOCUM TENENS.COM	45,121.70	Physician Services
183477	1/6/2022	MPLT HEALTHCARE, LLC	23,350.31	Physician Services
183793	1/13/2022	THE SLEEP SPECIALISTS	12,225.00	Physician Services
183802	1/13/2022	UTAH PULMONARY ASSOCIATES, LLC	12,700.00	Physician Services
183821	1/20/2022	ADVANCED MEDICAL IMAGING, LLC	1,404.00	Physician Services
183872	1/20/2022	JHR MEDICAL ASSOCIATES	10,634.40	Physician Services
183801	1/20/2022	LOCUM TENENS.COM	12,464.92	Physician Services
183890	1/20/2022	MPLT HEALTHCARE, LLC	31,817.96	Physician Services
183851	1/20/2022	DEPARTMENT OF EDUCATION	2,500.00	Physician Student Loan
183857	1/20/2022	FEDLOAN SERVICING	20,625.00	Physician Student Loan
183862	1/20/2022	GRANITE STATE MANAGEMENT & RESOURCES	666.67	Physician Student Loan
183863	1/20/2022	GREAT LAKES	1,666.67	Physician Student Loan
183864	1/20/2022	GREAT LAKES EDUCATION LOAN SERVICES	1,000.00	Physician Student Loan

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183820	1/19/2022	MOHELA	1,666.67	Physician Student Loan
183852	1/20/2022	MOHELA	1,666.67	Physician Student Loan
183925	1/20/2022	US DEPARTMENT OF EDUCATION	2,500.00	Physician Student Loan
183758	1/13/2022	POSTMASTER	1,340.00	Postage
183488	1/6/2022	RESERVE ACCOUNT	5,000.00	Postage
183799	1/13/2022	UMIA INSURANCE, INC	95,878.00	Professional Liability Insurance
183714	1/13/2022	FRONT RANGE MOBILE IMAGING, INC.	11,880.00	Professional Service
183867	1/20/2022	HARMONY HEALTHCARE IT	83,242.46	Professional Service
183961	1/27/2022	HARMONY HEALTHCARE IT	7,727.00	Professional Service
183463	1/6/2022	CLIFTONLARSONALLEN LLP	2,047.50	Professional Service
183459	1/6/2022	JOINT COMMISSION RESOURCES	9,190.00	Professional Service
183473	1/6/2022	MEDICAL PHYSICS CONSULTANTS, INC	2,125.00	Professional Service
183747	1/13/2022	MOUNTAIN STATES MEDICAL PHYSICS	7,237.15	Professional Service
183510	1/6/2022	VERISYS INC.	67.00	Professional Service
183824	1/20/2022	AMERICAN COLLEGE OF RADIOLOGY	500.00	Professional Service
183947	1/27/2022	CLEANIQUE PROFESSIONAL SERVICES	3,900.00	Professional Service
183884	1/20/2022	MEDICAL PHYSICS CONSULTANTS, INC	7,450.00	Professional Service
183894	1/20/2022	P3 CONSULTING LLC	3,973.75	Professional Service
184012	1/27/2022	VERISYS INC.	46.00	Professional Service
183929	1/20/2022	VERIV CORPORATION	13,627.63	Professional Service
EFT000000007284	1/27/2022	WESTERN STAR COMMUNICATIONS	797.10	Professional Service
183842	1/20/2022	COLLEGE OF AMERICAN PATHOLOGY	22,250.23	Proficiency Testing
183765	1/13/2022	RADIATION DETECTION COMPANY	4.50	Radiation Monitoring
EFT000000007254	1/13/2022	LANDAUER INC	150.75	Radiation Monitoring
183415	1/6/2022	BRACCO DIAGNOSTICS INC	2,503.98	Radiology Material
183684	1/13/2022	BRACCO DIAGNOSTICS INC	4,625.14	Radiology Material
183715	1/13/2022	GE HEALTHCARE INC	1,926.18	Radiology Material
183462	1/6/2022	LANTHEUS MEDICAL IMAGING, INC	2,210.01	Radiology Material
183731	1/13/2022	LANTHEUS MEDICAL IMAGING, INC	6,926.66	Radiology Material
183966	1/27/2022	INTERMOUNTAIN RADIOPHARMACY - UNIVERSITY OF UTAH	5,545.00	Radiology Material
183879	1/20/2022	LANTHEUS MEDICAL IMAGING, INC	3,603.91	Radiology Material
183970	1/27/2022	LANTHEUS MEDICAL IMAGING, INC	3,463.33	Radiology Material
183764	1/13/2022	RADIATION PRODUCTS DESIGN, INC	575.00	Radiology Supplies
183778	1/13/2022	DR. SAMER KATTAN	1,643.00	Reimbursement - CME
183674	1/13/2022	DR. BANU SYMINGTON	888.00	Reimbursement - CME
183679	1/13/2022	DR. BENJAMIN JENSEN	888.00	Reimbursement - CME
183416	1/6/2022	DR. BRIANNE CROFTS	2,184.00	Reimbursement - CME
183435	1/6/2022	DR. DAVID DANSIE	535.00	Reimbursement - CME
183445	1/6/2022	DR. GRZEGORZ PUCHALA	8,236.01	Reimbursement - CME
183729	1/13/2022	DR. JOSHUA BINKS	181.00	Reimbursement - CME
183465	1/6/2022	DR. LEX AUGUSTE	1,060.00	Reimbursement - CME
183513	1/6/2022	DR. WALLACE CURRY	271.00	Reimbursement - CME
183518	1/6/2022	DR. WILLIAM SARETTE	476.49	Reimbursement - CME
183728	1/13/2022	JOSEPH J. OLIVER, M.D.	1,055.00	Reimbursement - CME
183467	1/6/2022	MARK SANDERS	200.00	Reimbursement - CME
183739	1/13/2022	MELISSA JEWELL	3,468.25	Reimbursement - CME
183911	1/20/2022	DR. SIGSBEE DUCK	150.00	Reimbursement - CME
183685	1/13/2022	BRAD KOWALSKI	1,735.12	Reimbursement - Education & Travel
183423	1/6/2022	CHRISTIAN RODDA	57.12	Reimbursement - Education & Travel
183454	1/6/2022	DR. JACOB JOHNSON	3,666.39	Reimbursement - Education & Travel
183458	1/6/2022	DR. JANENE GLYN	795.00	Reimbursement - Education & Travel
183806	1/13/2022	DR. WILLIAM SARETTE	608.00	Reimbursement - Education & Travel
183455	1/6/2022	JAMES HODAN	176.00	Reimbursement - Education & Travel
183726	1/13/2022	JOE MANSFIELD	222.30	Reimbursement - Education & Travel

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183756	1/13/2022	PATTY O'LEXY	283.32	Reimbursement - Education & Travel
183486	1/6/2022	PHILLIP FLAKE	128.52	Reimbursement - Education & Travel
183781	1/13/2022	SHAYLA TRIGG	125.00	Reimbursement - Education & Travel
183493	1/6/2022	SHELYNN EDWARDS	3,401.25	Reimbursement - Education & Travel
183795	1/13/2022	TINA WILSON	120.88	Reimbursement - Education & Travel
183874	1/20/2022	DR. JANENE GLYN	1,832.98	Reimbursement - Education & Travel
183995	1/27/2022	ROB FAIR	558.60	Reimbursement - Education & Travel
183996	1/27/2022	ROBIN SNOWBERGER	83.59	Reimbursement - Education & Travel
183975	1/27/2022	MEGAN JACOBSEN	45.08	Reimbursement - Hospital Supplies
183978	1/27/2022	DR. MICHAEL NEYMAN	5,575.88	Reimbursement - Misc
183460	1/6/2022	KARA JACKSON	19.95	Reimbursement - Non Hospital Supplies
183794	1/13/2022	TIFFANY MARSHALL	984.28	Reimbursement - Non Hospital Supplies
183951	1/27/2022	DAWN LARSEN	99.88	Reimbursement - Notary Fee
183790	1/13/2022	SUZAN CAMPBELL	385.98	Reimbursement - Office Supplies
183502	1/6/2022	TERRANCE WEBB	137.96	Reimbursement - Payroll Deduction
183468	1/6/2022	MARY FISCHER	18.65	Reimbursement - Supplies
183672	1/13/2022	ASHTON DUFAPE	150.00	Reimbursement - Uniforms
W/T	1/19/2022	ABG 1/6/22	187,458.89	Retirement
W/T	1/31/2022	ABG 1/20/22	202,297.96	Retirement
183496	1/6/2022	STATE OF WYO.DEPT.OF REVENUE	676.21	Sales Tax Payment
183743	1/13/2022	MHSC MEDICAL STAFF	200.00	Scholarship
183413	1/6/2022	BOOKCLIFF SALES INC	32.74	Scrub Sale deductions
183491	1/6/2022	RSHS BOYS SOCCER	500.00	Sponsorship
183745	1/13/2022	MOBILE INSTRUMENT SERVICE	4,749.60	Surgery Equipment
183979	1/27/2022	MOBILE INSTRUMENT SERVICE	110.00	Surgery Equipment
183665	1/13/2022	ALI MED INC	691.32	Surgery Supplies
183698	1/13/2022	COMMED UNVATEC	199.50	Surgery Supplies
183700	1/13/2022	COVIDIEN SALES LLC, DBA GIVEN IMAGING	4,240.37	Surgery Supplies
183723	1/13/2022	INTEGRA SURGICAL	101.81	Surgery Supplies
183498	1/6/2022	STRYKER ENDOSCOPY	2,332.44	Surgery Supplies
183788	1/13/2022	STRYKER ORTHOPAEDICS	14,678.80	Surgery Supplies
183519	1/6/2022	ZIMMER BIOMET	57.50	Surgery Supplies
183847	1/20/2022	COVIDIEN SALES LLC, DBA GIVEN IMAGING	360.00	Surgery Supplies
183965	1/27/2022	INTEGRA SURGICAL	54.02	Surgery Supplies
183912	1/20/2022	SMITH & NEPHEW ENDOSCOPY INC	1,722.00	Surgery Supplies
183916	1/20/2022	STRYKER ORTHOPAEDICS	6,404.00	Surgery Supplies
184019	1/27/2022	ZIMMER BIOMET	6,005.00	Surgery Supplies
EFT00000007238	1/6/2022	COOPER SURGICAL	1,237.61	Surgery Supplies
EFT00000007252	1/13/2022	COOPER SURGICAL	2,432.57	Surgery Supplies
EFT00000007266	1/20/2022	COOPER SURGICAL	685.13	Surgery Supplies
183991	1/27/2022	PRESS GANEY ASSOCIATES, INC	2,678.01	Survey
183420	1/6/2022	CSG,LLC	996.10	Transcription Services
183422	1/6/2022	CHOTA OUTFITTERS, LLC	126.42	Uniforms
183667	1/13/2022	ALL WEST COMMUNICATIONS	2,059.05	Utilities
183406	1/6/2022	AT&T	415.01	Utilities
183673	1/13/2022	AT&T	157.06	Utilities
183762	1/13/2022	CENTURY LINK	1,301.43	Utilities
183761	1/13/2022	DOMINION ENERGY WYOMING	39,455.76	Utilities
183774	1/13/2022	ROCK SPRINGS MUNICIPAL UTILITY	13,211.71	Utilities
183777	1/13/2022	ROCKY MOUNTAIN POWER	38,002.09	Utilities
183993	1/27/2022	DOMINION ENERGY WYOMING	140.71	Utilities
183900	1/20/2022	ROCK SPRINGS MUNICIPAL UTILITY	294.80	Utilities
183998	1/27/2022	ROCKY MOUNTAIN POWER	35,629.15	Utilities
183787	1/13/2022	STERCYCLE, INC.	1,683.12	Waste Disposal

[illegible]

一、《说文解字》：中国第一部系统分析汉字字形、考究字源的字典，由东汉许慎编著。全书共 15 卷，收录 9353 个汉字，按 540 部首分类。

二、《康熙字典》：清代康熙年间编纂的官方字典，由张玉书、陈廷敬等主编。全书共 47 卷，收录 49,030 个汉字，按 214 部首分类。

三、《中华大字典》：清末民初编纂的大型字典，由上海辞书出版社出版。全书共 15 卷，收录 48,000 个汉字，按 214 部首分类。

四、《辞源》：中国第一部大型综合性辞书，由商务印书馆出版。全书共 12 卷，收录 12,000 个汉字，按 214 部首分类。

五、《辞海》：中国最大的综合性辞书，由上海辞书出版社出版。全书共 12 卷，收录 12,000 个汉字，按 214 部首分类。

六、《新华字典》：新中国成立后第一部大型综合性辞书，由商务印书馆出版。全书共 1 卷，收录 12,000 个汉字，按 214 部首分类。

七、《现代汉语词典》：新中国成立后第一部大型综合性辞书，由商务印书馆出版。全书共 1 卷，收录 12,000 个汉字，按 214 部首分类。

八、《汉语大词典》：中国最大的综合性辞书，由商务印书馆出版。全书共 12 卷，收录 12,000 个汉字，按 214 部首分类。

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十、《汉语大百科全书》：中国最大的综合性辞书，由商务印书馆出版。全书共 12 卷，收录 12,000 个汉字，按 214 部首分类。

**Memorial Hospital of Sweetwater County
County Voucher Summary
as of month ending January 31, 2022**

Vouchers Submitted by MHSC at agreed discounted rate	
July 2021	\$5,878.09
August 2021	\$0.00
September 2021	\$0.00
October 2021	\$46,738.87
November 2021	\$0.00
December 2021	\$0.00
January 2022	\$80,567.35
County Requested Total Vouchers Submitted	<u>\$133,184.31</u>
Total Vouchers Submitted FY 22	\$133,184.31
Less: Total Approved by County and Received by MHSC FY 22	\$52,616.96
Total Vouchers Pending Approval by County	<u><u>\$80,567.35</u></u>

FY22 Title 25 Fund Budget from Sweetwater County	\$273,488.00
Funds Received From Sweetwater County	<u>\$52,616.96</u>
FY20 Title 25 Fund Budget Remaining	\$220,871.04
Total Budgeted Vouchers Pending Submittal to County	<u><u>\$0.00</u></u>

FY22 Maintenance Fund Budget from Sweetwater County	\$938,440.00
County Maintenance FY22 - July	\$304,298.79
County Maintenance FY22 - August	\$28,620.00
County Maintenance FY22 - September	\$0.00
County Maintenance FY22 - October	\$16,421.89
County Maintenance FY22 - November	\$0.00
County Maintenance FY22 - December	\$28,357.08
County Maintenance FY22 - January	\$104,052.50
	<u>\$481,750.26</u>
FY22 Maintenance Fund Budget Remaining	<u><u>\$456,689.74</u></u>

MEMO: February 23, 2022
TO: Finance Committee 
FROM: Ronald L. Cheese – Director Patient Financial Services
SUBJECT: Preliminary February, 2022 Potential Bad Debts Eligible for Board Certification

Potential Bad Debts Eligible for Board Certification

Hospital Accounts	\$ 1,425,000.00	
Hospital Payment Plans	\$ 75,000.00	
Medical Clinic Accounts	\$ 3,249.98	
Ortho Clinic Accounts	\$ 00.00	
Total Potential Bad Debt	\$ 1,503,249.98	
Hospital Accounts Returned	\$ - 50,000.00	
Net Bad Debt Turned		\$1,453,249.98

Hospital Recoveries Collection Agency	\$ 96,773.07	
Hospital Recoveries Payment Plans	\$ 70,000.00	
Medical Clinic Recoveries	\$ 5,961.31	
Ortho Clinic Recoveries	\$ 2,287.60	
Total Bad Debt Recoveries		\$ 175,021.98

Net Bad Debt Less Recoveries \$1,278,228.00

Largest Account 72,908.00

MEMORANDUM

To: Board of Trustees
From: Wm. Marty Kelsey
Subject: Chair's Report...February Buildings and Grounds Committee Meeting
Date: 25 February, 2022

Medical Imaging Renovation...this project is virtually completed. There are still some closeout items and some testing to do.

S-1 Unit...This project is essentially completed as well. Some testing still needs to be completed.

Chemo Mixing Room...Plan One has developed some options, but cannot proceed further until ST & B has weighed in on the impact of mechanical on the various options. Hospital staff will meet with the architect and engineers once more information becomes available.

Dr. Sulentic's Office...Only one bid was received (from A. Pleasant) and it was very high compared to earlier cost estimates. The Committee voted to recommend that the bid be accepted and move the project on to the Finance and Audit Committee for their action. The Committee was of the belief that costs are only going to go higher and that contractor availability is a problem.

Building Automation System...Some work has started; however, Vaughn's is not yet ready to begin their end of the work due to other pressing work they have. Some parts are still not available due to supply chain issues.

Generator ATS project...Some work remains to be done. Lightening Eliminators should be able to provide the Hospital with a cost proposal now that they are in possession of engineering work from ST & B.

Bulk Oxygen...Because of limited funds and several projects needing to be done, the Committee asked to staff to see if the project could be bid out two ways...a "bare necessities" option and an option that would be more comprehensive.

Special Purpose Tax...a brief discussion took place regarding this topic. State ARP funds will factor in the decision as well as matching requirements.

As usual, for more detail, please see the minutes of the meeting in the packet.

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
Building and Grounds Committee Meeting
February 15, 2022

The Building and Grounds Committee met in regular session via Zoom on February 15, 2022,
at 3:30 PM with Mr. Marty Kelsey presiding.

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

Mr. Kelsey called the meeting to order.

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

Mr. Kelsey asked for a motion to approve the minutes from the January 18, 2022 meeting. Mr. Tardoni made a motion to approve the minutes. Ms. Richardson seconded; motion passed.

Maintenance Metrics

Mr. Horan apologized as he was unable to compile the metrics for this month. He will include both months at the next meeting.

Old Business – Project Review

Medical Imaging Renovation

Mr. Blevins received the punch list today with Grothouse, PlanOne, Pat Davis and Hospital staff. The project is in the closeout phase. There are some items that still need to be completed like functional testing of systems and testing and balance.

S1 Unit

Mr. Blevins said functional testing is also on the punch list of the overall HVAC project. They are working with Harris to complete. Mr. Johnston said the outstanding item from HLS of the smoke detectors has been take care of.

Pharmacy Chemo Mixing Room

Mr. Blevins said PlanOne issued three options for this project this week. ST&B will be looking at these from the HVAC perspective. The simplest solution would be the expansion of the existing space but would displace the services. Mr. Wheatley said they will wait on the mechanical

feedback before meeting with Hospital staff. Mr. Horan said they will plan on bringing conceptual plans for the meeting next month.

Dr. Sulentic Office

Mr. Wheatley said the bid opening is complete and A Pleasant was the low bid at \$209,000. This is an increase from the original estimate due to the current market. He is now waiting on the Hospital to approve next steps. Ms. Richardson said the bid came in over estimate by about 40%. Mr. Kelsey advised we move forward to lock in the price. Mr. Kelsey asked if there were other bids. Mr. Wheatley said there were some subcontractors at the pre-bid walkthrough but only A Pleasant submitted a bid. After discussion, it was decided this project would be brought to Finance & Audit as a revised capital request. Mr. Wheatley will confirm the bid deadline. Mr. Tardoni motioned to take the newly revised project of \$209,605 to Finance for approval to move to the Board for final approval. Ms. Richardson seconded; motion passed.

Building Automation System

Mr. Horan said Harris was here this week and has completed running the cables and the pre-wiring for the boxes and controls. He said Vaughn's will be starting soon but we don't have a date yet. Mr. Kelsey asked if Vaughn's is in a position to start this project. They are also busy working at the College. Mr. Johnston said Harris is still waiting on the VAV parts due to the supply chain issues.

Generator ATS

Mr. Horan said the remaining small repairs will require the shutdown of the emergency equipment branch. He is looking into what will be impacted so we can plan on the disruption. He hopes to have this last repair completed by the next time we meet. He said Lightning Eliminators has received the drawings and plans from ST&B so they can complete their proposal. They are looking both inside and outside the building for grounding issues. He has not heard a date yet but they do want to come onsite. Mr. Kelsey mentioned the push to get this project completed before lightning season begins again this summer.

Bulk Oxygen

Mr. Horan said the engineer, Western Engineers, wants to advertise this project this week so we can get a proposal in front of this committee. Mr. Blevins said his staff has completed their portion of the plans and have been sent Western Engineers. The engineers estimate was shared with the group which includes some cleanup and grading of the back property. Mr. Tardoni asked for some explanations due to the title. Mr. Horan said this estimate is for removing the existing tank, adding a paved turning radius for the delivery truck, and grading for water runoff. It does include some lines for removing the construction debris from prior projects. Mr. Tardoni would like to see the plans for the area. They would also like to see the proposal with "must have" and "nice to have". There was discussion on prioritization of projects and funding. Ms. Love said the remaining balance of the County maintenance fund can be used for this project or put towards other projects. Mr. Kelsey asked that we have a decision at the next meeting as to what the priority project is. It was agreed we should move forward with advertising for bids, with options of additional work. Mr. Horan sent the site plans to Mr. Kelsey and Mr. Tardoni for their review.

Tabled Projects

No discussion.

Old Business – Other

Special Purpose Tax Projects

Ms. Richardson said there is an intergovernmental meeting this week to discuss the Special Purpose Tax and she will be attending. She said the State also has \$55 million in ARP funds they are discussing how to distribute. Her concern is there may be a match involved in receiving those funds through SLIB. Mr. Tardoni said the allocation of those State funds will magnify the supply chain and contractor issues in the State. Some projects currently on the list include:

- Medical Imaging x-ray rooms – new digital rooms will bring higher reimbursement
- Fixed Pet Scan – potential increased volumes with more availability
- Retail pharmacy
- Lab expansion – outside entrance to accommodate patients
- Foundation Lab remodel
- Behavioral Health suite – outpatient services
- Cardiac Cath Lab – included in Kaufman Hall consulting engagement
- Surgical suites – moving central sterile upstairs
- Dialysis – potential move to increased home treatment

New Business

No discussion.

Other Business

Mr. Kelsey said to let him know if an additional meeting needs to be held to discuss any other matters. The next meeting will be held March 15, 2022 at 3:30 p.m. Mr. Kelsey adjourned the meeting at 4:24 p.m.

Submitted by Tami Love

MEMORANDUM

To: Board of Trustees
From: Wm. Marty Kelsey
Subject: Chair's Report...February Compliance Committee Meeting
Date: 25 February, 2022

Suzan Campbell presented the Compliance Risk Assessment and Work Plan. The Committee reviewed the various areas of risk. The staff will recommend audit areas depending on the risk scores and other data and information. Areas such as contracts, financial, technology, insurance, patient care, and regulatory matters are considered.

Suzan presented some "Fair Warning" information that will be used in the compliance effort. Alerts and investigations are tracked.

Suzan presented the latest draft of the Compliance Program document. Several drafts were reviewed and edited over the past several weeks. The Committee endorsed this draft and subsequently voted to send it to the Board of Trustees for first reading at the March Board meeting.

Suzan presented to the Committee some information from the DOJ regarding criminal fraud. She also presented some information regarding statutory requirements associated with gifts.



**Board Compliance Committee Meeting
Memorial Hospital of Sweetwater County
February 21, 2022**

Present via Zoom: Marty Kelsey, *Trustee-Chair*, Kandi Pendleton, *Trustee*, Irene Richardson, *CEO*, Suzan Campbell, *In House Counsel*, April Prado, *Foundation & Compliance*

Minutes

Call to Order

The meeting was called to order at 9:00 am by Marty Kelsey.

Agenda

The February agenda was approved as written, Susan made the motion and Irene seconded it. Motion carried.

Meeting Minutes

The meeting minutes from November 2021 were presented. Kandi made the motion to approve the minutes as written and Irene seconded. Motion carried.

Old Business

Standing items report

- A. Compliance Risk Assessment and Work Plan- Suzan reported and presented the data that has been gathered to assist in creating our audit work plan. She stated that this is used by quality and risk. She asked the Board if they would like to pick the areas that are audited or if Irene and herself should, using the data presented. Marty stated that he felt the staff should and Kandi agreed. Suzan said that she and Irene would look at the data and bring some possible audits to the next meeting. Kandi asked how many audits would be looking to do and what process would be used to decide. Suzan said that she would be looking at areas where pre-audit risk scores were highest. Irene added that they would also be looking at areas of highest risk to the hospital. Irene said they would be looking for 3-4 areas to audit. Kandi asked how often the audits would be done and the answer was not clear, as it would depend on the audit itself. April was asked about how long audits take and she stated that it really depended on what was being audited. She stated that Quality has guidelines as to how many items have to be reviewed. Some audits may only require a check of 20 charts with 8 questions, while others might be 100 charts with 25 questions. Irene further clarified the process for choosing audit areas by referring to the presented "Risk Assessment" and stating the "total pre-audit score" looks at both the "Impact" and "Vulnerability" for the hospital. She included that 4 audits will be brought to the next meeting for a yearly plan.
- B. HIPAA spreadsheet- Suzan presented the FairWarning report. She explained that FairWarning works by first sending a report to HIM who investigates. If they find possible violations, it is reported to HR and further investigated. She continued that we will be using a new system, Cerner, so this report will be changing and will look different. Suzan continued that with our current report, we are doing very good. Marty questioned the "Zero incidents per month" part of the report. Suzan stated that this is the report that IT pulls from FairWarning. She also stated that HR was investigating some cases and that the report she received had names (employee and patient) in it that could not be presented. HR was asked to resubmit their report but had not as of the time of this meeting. April added that this number is likely the number of actual HIPAA violations that had been found, not the number that are being investigated. Suzan added that the new report will show how many have been investigated, how many violations were found and the outcome of those. Marty concluded that no action was needed today and asked if future reporting would be monthly. Suzan stated that it would.

Final Draft of Compliance Program document- Suzan presented this document in the hospitals Policy Stat format. She added and demonstrated that this document includes a link to the "Code of Conduct" as this had been previously requested. She stated that a grammar error had been corrected and that this document is now good to go. Kandi and Marty both agreed that the document looked good and that they appreciated the time and effort put into this by Suzan. Marty entertained that a motion be made to approve this document. Kandi made the motion and Irene seconded it. There was no further discussion and the motion carried.

DOJ announcement of changes to corporate criminal fraud-This document was presented by Suzan just to give the Board an idea about what she sees on a daily basis and what updates look like. She asked if the Board would like to see these things. Kandi and Marty agreed that they do not need to see all of these and would leave it to Suzan's discretion.

Gifts statutory requirements- Suzan presented a legal document that outlines what the limits and conditions are for gifts in a hospital setting. This document breaks down the different types of gifts and what is allowed. The "Code of Conduct" policy includes a section on this and Suzan just wanted everyone to be aware that there are lots of resources out there if we need them. Suzan said that our employees get calls all the time from vendors wanting to visit and bring their products, food, gifts etc. She included that employees are reaching out to her regularly and they are working through and checking on all of these inquiries.

Next Meeting

The next meeting will be on **March 28, 2022 @9:00 am**. Kandi stated that she will be absent. Marty agreed to find a Board member to sit in for her.

Additional Comments

Irene reported that the hospital has a new vendor for Compliance Reporting; Red Flag Reporting. This company will replace the existing Corporate Compliance Hotline. She continued that information on this new system has gone out to all employees and she feels that this program is a better fit for the employees. Suzan added that employees have used it and have reported to her that it is easy to use and that it looks good.

Adjournment

The meeting adjourned at 9:27 am

Respectfully Submitted,

April Prado, Recording Secretary

Minutes
Governance Committee Meeting
February 17, 2022

Present: Taylor Jones, Barbara Sowada, and Irene Richardson

Call to Order: Irene Richardson called the Zoom meeting to order at 11:00 am

Agenda was constructed during the meeting

Minutes had been previously approved

Old Business

1. The CEO Evaluation policy is seemingly ready for Board approval at its March meeting.

New Business

1. Staffing issues were discussed. No decisions made.
2. HCAHPS scores and Press Ganey Report presented by Quality Department personnel were discussed. Recommended that PowerPoint associated with the Press Ganey Report be presented to the Board at its March Meeting.
3. Iprotean video for March Board meeting is *Doing More with Less: The Cost Imperative*

The meeting was adjourned at 12:00 pm.

Next meeting is Thursday, March 24, 2022, at 11:00 am by Zoom.

Respectfully submitted,

Barbara J. Sowada, Ph.D.

Contract Check List

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

1. Name of Contract: **TACORE MEDICAL Physician Search Agreement**
2. Purpose of contract, including scope and description: **Tacore is a physician recruiting company. They will work with Marianne Sanders Physician recruiter to find the hospital candidates for open physician positions.**
3. Effective Date: **when accepted and signed by MHSC CEO**
4. Expiration Date: **one year from effective date**
5. Termination provisions: **either party with thirty (30) days written notice**
Is this auto-renew? **No**
6. Monetary cost of the contract: **\$28,500.00 per search including marketing. The per search costs are broken down in the agreement as follows: fee to open search \$1000.00; consulting fee (paid for first 6 months after search is open) \$1500.00 per month for total of \$9000.00, marketing fee \$8500.00 (paid first month search is opened); completion fee \$10,000.00(once contract is signed) Budgeted? Yes**
7. Jurisdiction/Choice of Law provision checked and changed to Wyoming if able to so. **No recruiting company operates out of Texas**
8. Any confidentiality provisions? **No**
9. Indemnification clause present? **No**

10. Is this contract appropriate for other bids? **We have used other recruiting firms but their fees are higher (\$30,000.00 to \$35,000.00) so we are hoping to have better success with this firm at a lesser fee.**

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

TACORE MEDICAL

GAME PLANNING SUCCESS SINCE 1999.

PHYSICIAN SEARCH AGREEMENT

TACORE Medical Inc. in agreement with _____ hereinafter referred to as ("Client"). Will conduct a search for a Physician in the specialty of _____ and shall be subject to the following agreements, terms and conditions.

Article 1. TACORE Medical Agrees To:

- 1.01 Use its best efforts to identify, pre-screen and recruit qualified Physicians who have indicated an interest in practicing medicine in association with Client.
- 1.02 Conduct reference checks and gather background information when authorized by Physician.
- 1.03 Help coordinate travel logistics on each Physician and Spouse for which Client has agreed to interview with an on-site visit.
- 1.04 Provide all necessary assistance to Client and the Physician Candidate in negotiation of a mutually satisfactory contract between the Physician and Client, once Client identifies a viable Physician Candidate through TACORE Medical.
- 1.05 Conduct an opportunity assessment prior to initiating search activity, designed to set working guidelines, candidate specifications, information on the practice opportunity, and community.
- 1.06 Develop and establish marketing strategies, i.e. direct mail, telemarketing and ads specifically designed for Client.

Article 2. Client Agrees To:

- 2.01 Use its best efforts in complying with established working guidelines.
- 2.02 Solely be responsible for all cost and expenses associated with visits by Physician Candidate and Spouse to Clients facilities and the community for which Client has requested a Candidate be recruited.
- 2.03 Reimburse TACORE Medical for all out-of-pocket expenses incurred on Clients behalf. These include any travel, lodging and marketing campaigns (direct mail, ads) when agreed upon in advance and approved by Client.
- 2.04 Pay TACORE Medical professional fees capped at \$28,500.00 per search, including marketing.
 - A. Engagement fee of \$ 1,000.00 upon signed Search Agreement.
 - B. Consulting fee of \$ 1,500.00 per month for 6 months.
 - C. Completion fee of \$ 10,000.00 per search when offer has been extended by Client and accepted by Physician Candidate first presented by TACORE Medical Inc. either verbal or written. Unpaid consulting fees will be due with completion fee. All invoices are due fifteen (15) days upon receipt.
 - D. Marketing fee \$ 8,500.00 per search

TACORE MEDICAL

GAME PLANNING SUCCESS SINCE 1999.

Article 3. Miscellaneous Terms and Conditions:

- 3.01 The initial term of this agreement shall be for 12 months and may be terminated by either party by giving the other party thirty (30) days written notice of such intent to terminate. Notwithstanding the foregoing termination of this Agreement shall not relieve Client from its obligation to pay TACORE Medical its professional fee specified in "Client agrees to" (2.04) for any Physician Candidate first referred by TACORE Medical Inc. who is employed or otherwise associates with Client as a result of TACORE Medical.
- 3.02 In the event TACORE Medical first presents a Physician Candidate (this includes any Physician Candidates Spouse that may also be a physician) whose specialty is not covered in this agreement and Associates with Client either by employment or otherwise, Client agrees to pay TACORE Medical the total professional fee specified in "Client agrees to" (2.04) during the term of this agreement or during the twelve (12) months following the term of this agreement.
- 3.03 If Physician Candidate first referred by TACORE Medical Inc. executes a written agreement to commence practicing medicine in association with Client but, does not commence practicing medicine within up to ninety (90) days after agreed upon start date or leaves within one hundred and twenty (120) days after commencing practice for any reason other than Clients non-performance under the Client – Physician Agreement, TACORE Medical will reactivate the search for the same specialty and location with no other professional fees due.
- 3.04 TACORE Medical makes no warranties or representation to Client regarding any identified Physicians to that particular Candidate's training, education, experience, licensure status and medical skills. Client releases TACORE Medical from any liability as a result from identification of Candidates to Client and indemnifies and holds harmless TACORE Medical from any and all losses claims and expenses arising out of any allegations that TACORE Medical is in any way responsible for any malpractice or other acts, errors or omissions of any Identified Physician Candidate. The provisions of the Article 3.04 shall survive any termination of this Agreement.
- 3.05 This Agreement is to be governed by the Laws of the State of Texas.

Accepted By:

Client: _____

Title: _____

Address: _____

City: _____ State: _____ Zip: _____

Date: _____

TACORE Medical Inc.

By: _____

Title: _____

Date: _____

CONTRACT NUMBER