



Memorial Hospital of Sweetwater County

Board of Trustees Regular Meeting

Wednesday - November 7, 2018

2:00 PM

MHSC Classrooms 1, 2 & 3

Meeting Book - Wednesday - November 7, 2018 Board of Trustees Regular Meeting

Board Meeting Agenda

I. Call to Order		Richard Mathey
A. Pledge of Allegiance		Richard Mathey
B. Our Mission and Vision		Taylor Jones
Mission Vision Values Strategies March 2018.pdf - Page 5		
II. Minutes	For Approval	Richard Mathey
Minutes for October 3 2018.docx - Page 6		
Minutes for October 17 2018 Special Joint Meeting with Foundation.docx - Page 13		
III. Community Communication		Richard Mathey
IV. Executive Session (W.S. 16-4-405(a)(iii), (a)(ix), (a)(x))		Richard Mathey
V. Credentials	For Approval	Richard Mathey
Confidential information available for review in the Board Portal.		
A. Approval of Privileges		
1. Providers		
B. Approval of Credentialing Criteria		
1. Emergency Medicine Delineation of Privileges		
Emergency Medicine Privileges.pdf - Page 16		
2. Occupational Medicine Delineation of Privileges		
Occupational Medicine Privileges.doc - Page 19		
3. Podiatric Surgical Delineation of Privileges		
Podiatry Privileges.doc - Page 24		
4. Certified Nurse Midwife Delineation of Privileges		
CNM Delineation of Privileges.docx - Page 27		
5. RN First Assist Delineation of Privileges		
RN First Assist Delineation of Privileges.docx - Page 37		
VI. Medical Staff Report		Dr. David Dansie, Medical Staff President
No report included in the meeting packet.		
VII. Old Business		Richard Mathey
A. For Board Approval		
1. 2018-2021 Strategic Plan - Page 41		
2. Corporate Compliance Plan - Page 42		

B. For Board Discussion/Action

1. Mr. Kelsey's Finance Position Paper

Mr. Kelsey's Finance Position Paper - Page 48

a. Comments

Richard Mathey Finance Position Paper Comments
October 2018.pdf - Page 54

C. Outstanding - Not Ready for Board Consideration (Placed on the agenda as a reminder of uncompleted business)

1. Drug and Alcohol Policy for Staff

2. Drug and Alcohol Policy for Employed and Credentialed Physicians

3. Policy or Plan RE Inspections for Weapons

Line thru this item. Will not be presented.

4. Employee Corrective Action Policy

Line thru this item. Will not be presented.

5. Employee Grievance Procedure and Conflict/Dispute

VIII. New Business

A. (From the Governance Committee)

For Review

Richard
Mathey

Barbara
Sowada

1. Board Procedure: Board Agenda Draft

Board Procedure Agenda.docx - Page 58

2. Board Procedure: E-mail Communication Draft

Board Procedure email communication.docx - Page 59

B. (From the Human Resources Committee)

For Approval

1. Health Insurance Recommendation

IX. Chief Executive Officer Report

Irene
Richardson,
Chief
Executive
Officer
Richard
Mathey

X. Committee Reports

A. Quality Committee

Barbara
Sowada

Quality Committee Summary Report- Dashboard October
2018.docx - Page 60

10 17 18 Quality Minutes.doc - Page 62

B. Human Resources Committee

Ed Tardoni

meeting book - monday - october 15, 2018 human resources
committee meeting.pdf - Page 63

C. Finance and Audit Committee

Marty Kelsey

1. Capital Expenditure Requests

For Approval

Marty Kelsey

Capital Expenditure Requests October 29 2018.pdf - Page
79

Capital Request FY 19_14.pdf - Page 80

2. Narratives

Tami Love,
Chief
Financial
Officer

Narrative to September 2018 Financial Statement.pdf - Page 109

Narrative Provider Clinic September 2018.pdf - Page 111

3. Investment Recommendation

For Approval

Tami Love

Open Bid Investment Summary 09 30 18.pdf - Page 112

a. Investment Plan - Bank of the West Funds

For Approval

Marty Kelsey

4. Bad Debt

For Approval

Ron Cheese,
Patient
Financial
Services
Director

Final numbers distributed near or on meeting date.

meeting book - monday - october 29, 2018 finance & audit committee meeting.pdf - Page 113

D. Building & Grounds Committee

Ed Tardoni

meeting book - tuesday - october 16, 2018 building & grounds committee meeting.pdf - Page 246

E. Foundation Board

Taylor Jones

F. Compliance Committee

Barbara
Sowada

Minutes October 2018 Compliance Sowada.docx - Page 257

G. Executive Oversight and Compensation Committee

In Executive Session

Richard
Mathey

H. Governance Committee

Barbara
Sowada

Minutes October 18 2018 Governance Sowada.docx - Page 258

I. Joint Conference Committee

Dr. David
Dansie

XI. Contract Review

Suzan
Campbell,
Chief Legal
Executive/Legal
Counsel

A. Contract Consent Agenda

For Approval

1. Change Healthcare from Interqual - Page 259

2. Rumor Digital Marketing Service Agreement - Page 291

3. T-System - Eighth Amendment - Page 300

B. Contracts Approved by CEO Since Last Board Meeting

For Your Information

1. Healthicity - Page 304

XII. Good of the Order

Richard
Mathey

XIII. Adjourn

Richard
Mathey



Memorial Hospital

OF SWEETWATER COUNTY

OUR MISSION

*Compassionate care for
every life we touch.*

OUR VISION

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

OUR VALUES

Be Kind

Be Respectful

Be Accountable

Work Collaboratively

Embrace Excellence

OUR STRATEGIES

Patient Experience

Quality & Safety

Workplace Experience

Growth, Opportunity & Community

Financial Stewardship

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

October 3, 2018

The Board of Trustees of Memorial Hospital of Sweetwater County met in regular session on October 3, 2018, at 2:00 PM with Mr. Richard Mathey, President, presiding.

CALL TO ORDER

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

Officially present: Dr. David Dansie, Medical Staff President, and Mr. John Kolb, Sweetwater County Board of County Commissioners Liaison. Mr. Jim Phillips, Legal Counsel, arrived later in the meeting.

Mr. Mathey led the audience in the Pledge of Allegiance and read aloud the mission and vision statements.

Mr. Mathey reported Ms. Irene Richardson, Chief Executive Officer, was in Green River representing the Hospital at a trial. He asked for a motion to amend the agenda to move her report and approval of the strategic plan to later in the meeting. The motion to amend the meeting as requested was made by Dr. Sowada; second by Mr. Tardoni. Motion carried.

APPROVAL OF MINUTES

The motion to approve the minutes of the September 12, 2018, regular meeting as presented was made by Mr. Jones; second by Dr. Sowada. Motion carried.

COMMUNITY COMMUNICATION

There were no comments.

Ms. Tami Love, Chief Financial Officer, said the auditors were delayed. Mr. Mathey asked for a motion to amend the agenda to move the presentation to later in the meeting. The motion to amend the agenda as requested was made by Mr. Jones; second by Dr. Sowada. Motion carried.

EXECUTIVE SESSION

The motion to go into Executive Session was made by Mr. Jones; second by Mr. Kelsey. Motion carried.

RECONVENE INTO REGULAR SESSION

The Board of Trustees reconvened into Regular Session at 3:40 PM. Mr. Phillips was no longer in attendance.

The motion to approve numbers one through six of the September 10, 2018 Credentials Committee Recommendations as follows for appointment to the Medical Staff was made by Dr. Sowada; second by Mr. Jones. Motion carried.

1. Initial Appointment to Active Staff (2 years)
 - Dr. Israel Stewart, Internal Medicine
2. Initial Appointment to Locum Tenens Staff (1 years)
 - Dr. Kamran Khan, Pulmonary Medicine
3. Initial Appointment to Consulting Staff
 - Dr. Mary Phillips, Tele Radiology (VRC)
4. Initial Appointment to AHP Staff (1 year)
 - Charles Michael, Licensed Social Work (SWCS)
5. Reappointment to Active Staff (2 years)
 - Dr. Sigsbee Duck, Otolaryngology
6. Reappointment to Consulting Staff (2 years)
 - Dr. Mark Sarfati, Vascular Surgery (U of U)
7. Other Business
 - Approval of Genetic Counselors Privilege Form
 - Approval of Consulting Gastroenterology Privilege Form
 - Approval of VRad Schedule 1- List of Physicians

The motion to approve the delineation of privileges forms for genetic counselors, consulting gastroenterology, and VRad schedule as presented was made by Mr. Jones; second by Mr. Kelsey. Motion carried.

The motion to approve the CEO to sign a physician contract on behalf of the Hospital as presented was made by Mr. Kelsey; second by Dr. Sowada. Motion carried.

FY18 AUDIT REPORT

Mr. Darryn McGarvey and Mr. Tyler Johnson from CliftonLarsonAllen presented the FY18 audit report. They reviewed the very collaborative process. Mr. McGarvey said they are hired to express an opinion on financials and issue a management letter. They use industry standard benchmarks and evaluate internal controls. They utilize a risk-based audit approach for the healthcare industry. Mr. McGarvey said hospital management is responsible for the financial policies. One of the heavy areas they focus on is the estimates. Mr. McGarvey said the estimates were deemed reasonable by the auditors. There were no difficulties or disagreements with management. There were no uncorrected adjustments. There were no material weaknesses or deficiencies. Mr. Johnson reviewed the financial ratios. He said the expense reduction was very impressive. FTE's were down and revenue was up and that was a positive trend. Mr. Jones said in light of all we have gone through, are those some numbers we should be striving for. He said

the \$8M turnaround was fabulous but it's not realistic to think we can do that again. Mr. McGarvey said most organizations are budgeting for a 2-4% margin. Being in the black in healthcare is a positive. As things stabilize, who do we benchmark with, what do we aspire to? Mr. McGarvey said we need to look at who we are and where we are going. He referenced good information for review in the audit packet. Mr. McGarvey noted a big play on the tele health side. He said it is something to invest in and something to watch. Mr. McGarvey concluded by saying it is always a pleasure to work with the Hospital. Mr. Kelsey said he really enjoyed this audit team and thanked staff for their good work. The motion to accept the FY18 audit report as presented was made by Mr. Kelsey; second by Mr. Jones. Motion carried.

OLD BUSINESS

For Board Approval

Strategic Plan

Mr. Mathey noted this was moved to later in the agenda.

Outstanding – Not Ready For Board Consideration

Mr. Mathey said the list is the same as last month. Mr. Tardoni said the Employee Corrective Action Policy and Employee Grievance Procedure and Conflict/Dispute items and perhaps the Policy or Plan Regarding Inspections for Weapons are being worked on by the Human Resources Committee.

NEW BUSINESS

Mr. Kelsey's Finance Position Paper

Mr. Mathey read aloud the note on the agenda and asked everyone to pay attention to certain parts of the note. He said Trustees and all other interested people are invited to submit comments and noted the deadline of October 30. Mr. Mathey said it is not the intent to deny input from people not on the Board. Regarding the position paper, Mr. Mathey said every time that we have a Board of Trustees meeting staff puts the packet together with the help of others and there is a deadline. Submission of written comments will result in shorter meetings.

Withdrawal of MHSC Funds from Bank of the West

Mr. Mathey said Ms. Love is reporting at the next Finance and Audit Committee meeting on what might happen. He said that is contingent on what happens in the current meeting. Mr. Jones said this was discussed two months ago by the Committee and at the September Board of Trustees meeting. The motion to remove the Bank of the West funds as soon as possible if not violating any legal contracts was made by Mr. Jones; second by Mr. Kelsey. Mr. Tardoni said he considers it to be a political issue, not a financial issue. He said he had 35 years in the industry and receives checks every month and feels voting would be a conflict of interest and said he would abstain from the vote. Mr. Mathey said the reason this was listed under "New Business"

was because the Trustees were engaged in an online debate of this issue as well as Mr. Kelsey's financial position paper. The activity was not meant to be a violation of open meetings law but it was a violation. Mr. Mathey wanted business done in public view. He said this process allows the Board members to have a conversation in the proper manner. In his view, Mr. Mathey said it has not been debated in a manner that is lawful and should not be voted on at this time. The motion carried. Mr. Mathey said the item will be removed from the November meeting agenda.

MEDICAL STAFF REPORT

Dr. Dansie reported the CEO hosted a General Medical Staff, Foundation Board of Directors, and Board of Trustees dinner at Santa Fe Trail in Rock Springs. He said the Medical Staff is very appreciative of that and the time and effort put forth to make that happen. Dr. Dansie said a letter of concern was sent to the Centers of Medicare and Medicaid Services (CMS) regarding their proposed fee schedules for 2019. The Medical Staff feels it will not have the desired effect and will hurt patients. Dr. Dansie thanked Dr. Jessica Dingwall and Ms. Kari Quickenden, Chief Clinical Officer, for their help resolving an issue regarding mammogram mailings timelines and guidelines. Dr. Dansie said the University of Utah has offered to host an ongoing series of teleconferences with our Medical Staff on a variety of fields and topics. Dr. Dansie said we were hoping we could have the revised bylaws to the Medical Staff on October 1. He said we are getting close and hope to meet with Mr. Nick Healy and the Joint Conference Committee. Dr. Dansie said we hope to bring to a vote within the month of October but may have to change the date of the next meeting.

Mr. Mathey said there would be a 10 minute recess. The meeting reconvened at 4:41 PM.

COMMITTEE REPORTS

Building and Grounds

Mr. Tardoni asked Mr. Jim Horan, Facilities Director, to report. Mr. Horan said the Committee discussed reports and the information the Committee would like to see including four metrics. He thinks it will help everybody. Mr. Tardoni said the project list Mr. Horan gives out includes a ranking system. The intent is to issue this when there is a change in the projects. Mr. Tardoni said that gives us a way to understand Mr. Horan's and the Hospital's concerns as an overview.

Compliance

Dr. Sowada said the Committee met the previous week. Previously it was an Ad Hoc Committee with Mr. Mathey and Mr. Tardoni. The Compliance Plan was reviewed and recommended for approval. Dr. Sowada said the structure of the Board Compliance Committee and Staff Compliance Committee is like Quality in that there is a Board group and an internal group. She said the Board President is the safety valve for the Compliance Committee. Mr. Tardoni said Mr. Clayton Radakovich, Director of Compliance and Risk Management, and Ms. Suzan Campbell, Chief Legal Executive and General Counsel, have plans for the internal work group but that has not been formed yet. Mr. Mathey said his preference is to wait to approve the Plan at the November meeting.

Executive Oversight and Compensation

Mr. Mathey said the minutes are in the packet. He said this is a proper subject for executive session and his report was made there.

Foundation Board

Ms. Tiffany Marshall, Foundation Director, reported the joint meeting between the Foundation Board and Hospital Board was moved to October 17. She said she will present options for a donor wall. She said it is important to recognize donors and it is a huge marketing tool. Ms. Marshall said she will try to give a number of options at least a week before the meeting for review. She said she told the doctors at the dinner the previous week to submit funding requests. Ms. Marshall said the Foundation Board is itching to spend some money. She said she has involved Ms. Love and we are looking at what we can do to invest some money back into the Hospital.

Finance and Audit

Capital Expenditure Requests: The motion to approve capital expenditure request FY 19-8 for \$234,300 for an upgrade to Quadramed QCPR was made by Mr. Kelsey; second by Mr. Jones. Motion carried. The motion to approve capital expenditure request FY 19-9 for \$155,842.87 for expanding the current virtual services storage environment was made by Mr. Kelsey; second by Mr. Jones. Motion carried.

Narratives: Ms. Love reviewed the narrative highlights included in the meeting packet.

Investment Recommendation: The motion to approve the investment recommendation of \$16,593,758 as requested was made by Mr. Kelsey; second by Mr. Jones. Motion carried.

Bad Debt: The motion to approve the net potential bad debt for \$1,037,374.06 as presented by Mr. Ron Cheese, Patient Financial Services Director, was made by Mr. Kelsey; second by Mr. Jones. Motion carried.

Governance

Dr. Sowada said she did not have any information to report.

Human Resources

Mr. Tardoni said the Committee got out of sync and will be moving forward with two previously referenced policies later in the month.

Quality

Dr. Sowada said there is a lot going on in Quality. She said a lot of time is being devoted to Board and Committee training. Mr. Kelsey said he knows the training component is important. The Committee is looking at statistics every meeting and moving toward a four-star rating.

CONTRACT REVIEW

Contract Consent Agenda

Ms. Campbell asked for any questions on the contracts included in the meeting packet. Mr. Mathey requested a change in the Change Healthcare for Interqual agreement. He said there is a discrepancy between numbers three and four. Ms. Campbell said the terms and conditions are an add-on to the original agreement from years ago. She said it just keeps being amended and everything goes by the June date but it is not in effect until the Board approves it. Ms. Campbell said she will obtain an answer for Mr. Mathey's question and bring it back for the Board's review in November.

The motion to authorize the CEO to sign the agreements as presented on behalf of MHSC, with the exception the Change Healthcare for Interqual agreement, was made by Mr. Tardoni; second by Dr. Sowada. Motion carried.

CEO REPORT

Ms. Campbell read aloud highlights from information provided by Ms. Richardson. She thanked everyone for their hard work in September. Ms. Campbell reviewed the strategic plan goals. Several leaders, physicians and Dr. Sowada plan to attend The Governance Institute Leadership Conference in Colorado Springs October 7-10. We continue recruiting for a Pulmonologist, Orthopedist, and Pediatrician. Ms. Campbell pointed out upcoming events and invited the Trustees to attend.

OLD BUSINESS (continued)

For Board Approval

Strategic Plan

The motion to approve the strategic plan as presented was made by Dr. Sowada; second by Mr. Jones. There was discussion of the wrong title on the document in the meeting packet so the motion was withdrawn by Dr. Sowada. The motion to forego a vote for the reason stated was made by Dr. Sowada; second by Mr. Jones. Motion carried. Mr. Mathey said the request for approval is tabled. This will allow Ms. Richardson to be at the meeting for discussion. Mr. Mathey referenced a summary included in the packet and said he did not know her intent in providing it unless it was just a summary to discuss.

GOOD OF THE ORDER

Dr. Sowada congratulated Ms. Love and her staff as well as the Finance and Audit Committee for their hard work on the audit.

ADJOURNMENT

There being no further business to discuss, the motion was made, second and carried to adjourn.

Mr. Richard Mathey, President

Attest:

Mr. Ed Tardoni, Secretary

DRAFT

**MINUTES FROM THE SPECIAL MEETING
MEMORIAL HOSPITAL OF SWEETWATER COUNTY
BOARD OF TRUSTEES
AND MHSC FOUNDATION BOARD**

October 17, 2018

The Board of Trustees of Memorial Hospital of Sweetwater County met in special session with the Hospital Foundation Board of Directors on October 17, 2018, at 6:00 PM with Mr. Richard Mathey, President, presiding.

CALL TO ORDER

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

Mr. Mathey welcomed the Foundation Board of Directors and said he enjoys the opportunities to meet. Present: Ms. Dianne Blazovich, Ms. Becky Costantino, Ms. Teresa Noble, Mr. Charlie Van Over, and Mr. Fred Von Ahrens. Dr. Jake Johnson arrived later in the meeting.

Officially present: Ms. Irene Richardson - Chief Executive Officer, Ms. Tami Love – Chief Financial Officer, and Ms. Tiffany Marshall – Foundation Director.

FOUNDATION BOARD UPDATE

Mr. Van Over thanked the Board for meeting. He said he feels the meetings are very beneficial. Mr. Van Over said the golf tournament in August made about \$6,700 and reported people had a great time. Mr. Van Over was pleased to announce Vaughn's donated a furnace and air conditioning system valued in excess of \$10,000 to the Waldner House. He said it is nice to have community partners like Vaughn's. The Foundation purchased four iPads for use in Dialysis and dictation software for Radiology. Mr. Van Over said the Foundation will have further discussion later that night on other items for donation to the Hospital. Mr. Van Over said that thanks to Ms. Marshall's ability to get a \$5,000 grant we were able to have the Paint the Town Pink event October 5. He said it was well-attended. A "Shredding for the Cure" fundraiser is scheduled for the upcoming Saturday. All donations will go to the Foundation. Mr. Van Over said it's time to dig in and get going for the Red Tie Gala. Save the date cards are out and he said he's sure it will be a great time. Mr. Mathey shared a personal experience with Vaughn's and said he is grateful for them. Mr. Tardoni also shared a positive personal experience involving Vaughn's.

FOUNDATION DIRECTOR UPDATE

Ms. Marshall reported 82 employees have elected to participate in the employee campaign. We are trending to reach our goal. She said it is not as good as two years ago but numbers are better than last year. She said staff will begin seeing rewards. Ms. Marshall reported 179 people attended the Paint the Town Pink Ladies' Night Out event. She submitted a grant for an "Unmasking Cancer" event next year and said she hopes representatives from both Boards are able to attend. Ms. Marshall submitted an RFP to the Helmsley Foundation for some radiology equipment. She worked with others for hours and hours in her office on the request for \$1.76M. We will hear by 12/1 if we are invited to apply for the grant. The Helmsley Foundation had three requirements to apply and we only meet two of the three, however they

encouraged us to apply. Ms. Marshall said we received a \$5,000 donation from Williams. It will be split up for different Hospital needs. Ms. Marshall reported she is working on employee engagement items. She said a kickball event was not well-attended but the attendees were a fun group. Ms. Marshall said she is trying again to find an employee to help with the Waldner House. A Foundation Associate position will be for 20 hours a week with their main priority the Waldner House. This person will also help with Foundation projects and efforts. Ms. Marshall said she is excited to receive applications. Ms. Marshall referenced a packet of information she e-mailed to both Boards twice and she distributed a hard copy of the information at the meeting. One item in the packet was a calendar of events. Ms. Marshall reviewed the events and invited everyone to participate. Another item in the packet were examples of donor walls. Ms. Marshall asked for feedback. She said it will be located near the fireplace on the left through the main entrance. Ms. Blazovich asked that her selection be included in the choices. She said they want something that looks like art not just squares or something. Everyone agreed they want it to be something easy to be maintained. Ms. Noble asked about the cost. Ms. Marshall said if the group will narrow down the choices to two or three, she will go out to get quotes. Ms. Marshall reported Hospital Human Resources has implemented BRAVO and one of the groups is about recognition. Ms. Marshall said she has been fighting for years to do it but kept getting shut down. One of the reasons she was shut down is the idea it is a popularity contest. Ms. Marshall said we want to implement a quarterly recognition and bring to the combined Boards to evaluate the submissions. She said identifying information would be redacted. Dr. Sowada said employees should recognize each other and it should be peer groups. She said she would not stand in the way of what the Boards decide. Ms. Marshall said employees will nominate each other. We want to remove the final decision from staff so there is no perception of favoritism. She said there will be four categories with four people selected per quarter. Mr. Mathey said this will be brought to the next Trustee meeting for a vote. Ms. Marshall said she will forward the program to Mr. Mathey and the Trustees for review.

CHIEF EXECUTIVE OFFICER UPDATE

Ms. Richardson reported she is conducting Town Hall meetings each day that week at noon. She has been reviewing the strategic plan. Town Hall meetings are scheduled each quarter: October, January, April, July. She said they have been well-attended so far. Ms. Richardson thanked everyone for attending the recent Medical Staff dinner. She hopes to host another one in the spring. Ms. Richardson invited everyone to attend the upcoming Halloween community trick-or-treat event October 31, Hospital 125th Birthday Celebration November 8, and holiday community event November 30. Ms. Richardson reported we had a successful audit. We ended the year with a \$16K loss compared to an \$8M loss the year before. She said Ms. Love and her staff did an excellent job with the audit. Ms. Richardson said we are looking at about a \$700K gain year-to-date. We are on our way to meeting the goals of our budget. Ms. Richardson reviewed the strategic plan process and highlighted the plan goals. She invited both Boards to participate in moving forward together.

HOSPITAL BOARD UPDATE

Mr. Mathey said the Board voted on the Bank of the West matter at the October meeting. Mr. Mathey said he was the sole no vote due to a procedural reason. He said his view was that it should not have been voted upon. A debate that took place by Board members should have been repeated in public and then voted on at a later meeting. Mr. Jones said it was discussed in a public meeting. Mr. Tardoni said he and Mr. Jones started debating via e-mail. Mr. Mathey said that was in violation of public meeting law so he was trying to rectify it.

Mr. Mathey asked for a motion to go into executive session to discuss a jury verdict award. The motion to move into executive session as requested was made by Mr. Jones; second by Mr. Tardoni. Motion carried.

The Board reconvened into open session at 7:27 PM.

ADJOURNMENT

The Foundation Board of Directors thanked Mr. Mathey and the Trustees for the opportunity to meet.

There being no further business to discuss, the meeting adjourned.

The next joint meeting is scheduled Thursday – January 24, 2019, at 6:00 PM. Dinner will be provided at 5:30 PM.

Mr. Richard Mathey, President

Attest:

Mr. Ed Tardoni, Secretary

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

EMERGENCY SERVICES DELINEATION OF CLINICAL PRIVILEGES

Name _____

PART I. PRIVILEGES

REQUESTED APPROVED

May render treatment to all patients presenting to the Emergency Department in the EMS (Emergency Medical Services) system under his or her base station control, and to any acutely decompensating patient anywhere in the hospital.

Airway techniques

- Airway adjunct use
- All types of endotracheal intubation
- Percutaneous transtracheal ventilation
- Cricothyrotomy
- Initial ventilator management

Anesthesia techniques

- Local
- Peripheral nerve blocks
- Regional IV nerve blocks (Bier block)
- Use of sedative, amnestic, analgesic agents
- Use of paralytic agents
- Use of ultra-short acting, non-gaseous total intravenous anesthesia (eg., methohexital sodium)

Diagnostic procedures

- Arthrocentesis
- Culdocentesis
- Cystourethrogram
- Lumbar puncture
- Emergency Pericardiocentesis
- Peritoneal lavage
- Anoscopy
- Thoracentesis
- Paracentesis
- Tonometry
- Slit lamp exam
- Skin biopsy

Genito-Urinary

- Urethral catheterization
- Suprapubic catheterization
- Precipitous delivery
- Perimortem Cesarean section

Head and Neck

- Anterior and posterior nasal packing
- Posterior nasal balloon placement
- Cautery of bleeding sites
- Direct, indirect and fiberoptic laryngoscopy and nasopharyngeal endoscopy

Hemodynamic techniques

- Arterial catheterization
- Central venous access including femoral, internal jugular, supraclavicular, subclavian, umbilical and venous cutdown lines
- Intraosseous line placement
- MAST application and removal

Skeletal

- Fracture/dislocation immobilization without casting
- Reduction of dislocations
- Reduction of fractures with gross displacement or angulation and severe neurovascular compromise
- Reduction of fractures with orthopedic consultation and at orthopedist's request
- Noninvasive cervical and spinal immobilization

Thoracic

- Cardiac pacing (cutaneous, transvenous and transthoracic)
- Defibrillation and cardioversion
- Emergency (in or near arrest) thoracotomy
- Thoracostomy with needle, catheter or chest tube placement

Blood

- Transfusion of blood and blood components
- Autotransfusion
- Initiating anti-coagulant or thrombolytic therapy

Miscellaneous

- Quantitative or qualitative expired carbon dioxide monitoring
- Gastric lavage
- Incision and drainage
- Pulse oximetry

Laceration and wound management including suturing
Excision of thrombosed hemorrhoids
Foreign body removal
EMS management and direction
Disaster management and direction

SPECIAL NON-CORE PRIVILEGES (See Qualifications and/or Specific Criteria*)

To be eligible to apply for the special non-core privileges listed below, the applicant must demonstrate successful completion of an approved, recognized course when such exists, or acceptable supervised training in residency, fellowship or other acceptable experience, and provide documentation of competence in performing the requested procedure (if required) consistent with criteria set forth in medical staff policies governing the exercise of specific privileges.

PART II. PRIVILEGES

REQUESTED APPROVED

_____ ***FOCUSED ABDOMINAL SONOGRAPHY FOR TRAUMA (F.A.S.T.)***

[Criteria: Successful completion of an accredited postgraduate training program in emergency medicine that included ACEP required curriculum training in ultrasound interpretation, ***OR*** completion of an ACEP or ACR approved course in ultrasound interpretation and demonstrated current competence as defined by the ACEP or ACR—currently 50 successfully proctored examinations with written documentation. Fifty examinations must be current--performed within the last three years.]

SPECIAL CONSIDERATIONS:

- *All examinations performed must have printed images which are submitted to the radiologist staff at MHSC for final interpretation and patient billing purposes.*
- *This privilege for FAST examinations does NOT extend to additional ultrasound examinations.*

Signature

Date



MEMORIAL HOSPITAL OF SWEETWATER COUNTY

OCCUPATIONAL MEDICINE CLINICAL PRIVILEGES

Name: _____ Effective from: _____ to _____

- Initial Appointment Reappointment

QUALIFICATIONS FOR OCCUPATIONAL MEDICINE

To be eligible to apply for core privileges in Occupational Medicine, the initial applicant must meet the following criteria:

- Successful completion of an Accreditation Council for Graduate Medical Education (ACGME) or American Osteopathic Association (AOA) accredited residency in occupational medicine or other related medical specialty.

AND

- Current certification or active participation in the examination process [with achievement of certification within 7 years from completion of residency or fellowship] leading to certification in Occupational Medicine or another related medical specialty by a recognized ABMS or AOA member board.

CORE PRIVILEGES

OCCUPATIONAL AND ENVIRONMENTAL MEDICINE CORE PRIVILEGES

- Requested** Evaluate, diagnose, treat, and provide consultation to patients of all working age (18 years and older) on an outpatient basis presenting with work-related problems. These privileges include the ability to admit patients to an occupational medicine or rehabilitation unit of an acute care facility, if one exists. Assess, stabilize, and determine disposition of patients with emergent conditions consistent with medical staff policy regarding emergency and consultative call services. The core privileges in this specialty include the procedures on the attached procedure list and such other procedures that are extensions of the same techniques and skills.

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

OCCUPATIONAL MEDICINE CLINICAL PRIVILEGES

Name: _____ Effective from: _____ to _____

Core Procedure List

This list is a sampling of procedures included in the core. This is not intended to be an all-encompassing list but rather reflective of the categories/types of procedures included in the core.

To the applicant: If you wish to exclude any procedures, please strike through those procedures that you do not wish to request, initial, and date.

1. Anesthesia, local, digital block
2. Superficial burn treatment, heat or chemical, eye, skin
3. Disability evaluations (per AMA guidelines)
4. EKG interpretation
5. Ergonomic evaluations
6. Eye injuries, infections, superficial foreign body
7. Fitness for duty evaluations
8. Foreign body removal (subcutaneous), ear, skin/soft tissue
9. Independent medical evaluations
10. Initial stabilization and treatment of fracture/dislocation
11. Injection therapy: epicondyle, tendon sheath, trigger point, shoulder (subacromial)
12. Interpretation of tests (e.g., spirometry, toxicologic, biological, radiographs, audiograms, industrial and environmental hygiene sampling results)
13. Nail injury; removal trephination
14. Nasal hemorrhage control; cautery, anterior packing
15. Perform history and physical exam
16. Periodic medical evaluations: asbestos, lead, respirator
17. Plant tours (health risk and exposure evaluations)
18. Preplacement evaluations (according to federal ADA requirements)
19. Proctoscopy
20. Pulmonary function test (baseline) for respirator only interpretation
21. Slit lamp usage
22. Soft-tissue debridement of burns, wounds
23. Toxic exposure evaluations
24. Wound repair/suturing

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

OCCUPATIONAL MEDICINE CLINICAL PRIVILEGES

Name: _____ Effective from: _____ to _____

ACKNOWLEDGEMENT OF PRACTITIONER

I have requested only those privileges for which by education, training, current experience, and demonstrated performance I am qualified to perform and that I wish to exercise at Memorial Hospital of Sweetwater County, and I understand that:

- a. In exercising any clinical privileges granted, I am constrained by Memorial Hospital of Sweetwater County and Medical Staff policies and rules applicable generally and any applicable to the particular situation.
- b. Any restriction on the clinical privileges granted to me is waived in an emergency situation and in such situation my actions are governed by the applicable section of the Medical Staff Bylaws or related documents.

Signature: _____ *Date:* _____

DEPARTMENT CHAIR'S RECOMMENDATION

I have reviewed the requested clinical privileges and supporting documentation for the above-named applicant and make the following recommendation(s):

- Recommend all requested privileges.
- Recommend privileges with the following conditions/modifications:
- Do not recommend the following requested privileges:

<i>Privilege</i>	<i>Condition/Modification/Explanation</i>
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____

Notes

Department Chair Signature: _____ *Date:* _____

FOR MEDICAL STAFF OFFICE USE ONLY

Credentials Committee action *Date:* _____

Medical Executive Committee action *Date:* _____

Board of Trustee action *Date:* _____

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
OCCUPATIONAL MEDICINE CLINICAL PRIVILEGES

Name: _____ Effective from: _____ to _____

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

DELINEATION OF PODIATRIC SURGICAL PRIVILEGES

Name: _____

PART I. PRIVILEGES – Require Base Criteria Only

Requested Approved Procedures (Limited to the Forefoot and Midfoot)

May co-admit with an M.D. or D.O. that has admitting privileges at Memorial Hospital of Sweetwater County and render podiatric medical, consultative services and surgical treatment for the following procedures:

_____	_____	Co-treatment with physician of skin, bone, and joint infections of the foot.
_____	_____	Incision and Drainage: abscess, hematoma, post-operative wound infection, infected bursa.
_____	_____	Puncture aspiration: abscess, hematoma, bulla, cyst
_____	_____	Paring/curettement benign hyperkeratotic or verrucous skin lesions with or without cauterization
_____	_____	Skin biopsy, skin/subcutaneous tissue
_____	_____	Excision of uncomplicated benign/malignant, skin/subcutaneous lesions
_____	_____	Debridement: toenails, superficial or subcutaneous tissue ulcer
_____	_____	Avulsion of toenails, partial or complete, with or without matricectomy, partial or complete, with or without repair of nail bed
_____	_____	Wedge excision of skin of nail fold
_____	_____	Simple repair or layered closure of foot wounds
_____	_____	Cauterization superficial granulation tissue
_____	_____	Incision and removal foreign body, subcutaneous tissues, muscle or tendon sheath
_____	_____	Tenotomy, digital, subcutaneous or open, extensor or flexor; lengthening, repair or suture of tendon
_____	_____	Excision intermetatarsal neuroma
_____	_____	Excision lesion of tendon/fibrous sheath or capsule (cyst or ganglion), forefoot, toes
_____	_____	Capsulotomy for contracture; metatarsophalangeal or interphalangeal joint
_____	_____	Arthroplasty, digital

_____	_____	Open/closed treatment digital fractures with use of internal fixation
_____	_____	Ostectomy; digital, metatarsal head
_____	_____	Use of intra-operative radiographs and C-Arm assisted surgical fluoroscopy (after appropriate in servicing by Radiologist)
_____	_____	Local anesthesia of the foot and ankle for forefoot procedures, fracture reduction/dislocation
_____	_____	Application/windowing/removal of: short leg walking cast; clubfoot; short leg splint; strapping (ankle, foot, toes) & Unna Boot
_____	_____	Use of internal fixation (K-wires, absorbable pins)

PART II. PRIVILEGES – Require Base Criteria Plus Additional Specified Criteria

Requested	Approved	
_____	_____	Arthrotomy with exploration, drainage or removal of loose or foreign body or for synovial biopsy, metatarsophalangeal or interphalangeal joint
_____	_____	Excision/curettage of bone cyst or benign tumor, phalanges, metatarsals
_____	_____	Hallux valgus (bunion) correction: with or without sesamoidectomy; Keller, McBride type; with metatarsal osteotomy; by phalanx osteotomy
_____	_____	Excision accessory ossicles, bone cyst or benign tumor, forefoot
_____	_____	Osteotomy, metatarsal or toe, base or shaft, with or without lengthening for shortening or angular correction
_____	_____	Soft tissue reconstruction, angular deformity of toe (i.e. overlapping second, fifth toe, curly toes)
_____	_____	Sesamoidectomy
_____	_____	Open/closed treatment metatarsal fractures with or without use of internal fixation
_____	_____	Ostectomy hypertrophied tarsal bone (i.e. 1 st metatarsal – 1 st cuneiform exostosis)
_____	_____	Forefoot tenodesis with or without transfer
_____	_____	Arthrodesis, digital
_____	_____	Use of internal fixation (screws, staples, pins)
_____	_____	Soft tissue reconstruction, angular deformity of toe (i.e. overlapping second, fifth toe, curly toes)
_____	_____	Excision accessory ossicles, bone cyst or benign tumor, forefoot

OTHER:

Requested

Approved

Signature

Date

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
CERTIFIED NURSE MIDWIFE (CNM) CLINICAL PRIVILEGES

Name: _____

Initial Appointment Reappointment

Introduction: The Practice of Nurse-Midwifery

The practice of nurse-midwifery at Memorial Hospital of Sweetwater County (MHSC) is performed by certified nurse-midwives (CNMs) who are credentialed as allied health professionals and must maintain appropriate practice privileges at MHSC. They provide nurse-midwifery services to women within a health care system that provides for consultation, collaboration and referral with their sponsoring Obstetrician. This is in agreement with the joint practice statement between the American College of Obstetricians and Gynecologists (ACOG) and the American College of Nurse Midwives (ACNM). The following practice guidelines also correspond with the ACNM Philosophy, Code of Ethics and Standards for the Practice of Nurse-Midwifery, the policies of the MHSC OB/GYN department and Wyoming state legislation governing nurse-midwifery practice.

Certified nurse-midwives are responsible for the obstetrical care of women whose medical/obstetrical history and present condition indicate an essentially normal course. These guidelines provide provisions for management of common deviations from normal, and for consultation, collaborative management, and referral to physician management when deviation from normal occurs.

Applicant: Check off the “Requested” box for core privileges requested. Applicants have the burden of producing information deemed adequate by the hospital for a proper evaluation of current competence, current clinical activity, and other qualifications, and for resolving any doubts related to qualifications for requested privileges.

Department chair: Check the appropriate box for recommendation on the last page of this form. If recommended with conditions or not recommended, provide condition or explanation on the last page of this form.

Other requirements

- This document is focused on defining the qualifications related to competency to exercise clinical privileges. The applicant must also adhere to any additional organizational, regulatory, or accreditation requirements that the organization is obligated to meet.

QUALIFICATIONS FOR CERTIFIED NURSE MIDWIFE (CNM)

To be eligible to apply for initial clinical privileges as a certified nurse midwife (CNM), the applicant must meet the following criteria:

Successful completion of an American College of Nurse Midwives (ACNM)-accredited nurse midwifery program

AND

Current active certification by the American Midwifery Certification Board (or its predecessor, the American College of Nurse Midwives (ACNM) Certification Council), or be actively seeking initial certification and take initial exams within 24 months from completion of midwifery program.

AND

Current active licensure to practice as an advanced practice nurse in the nurse midwife category in the State of Wyoming.

AND

Professional liability insurance coverage issued by a recognized company and in an amount equal to or greater than the limits established by the governing body.

Required previous experience: Applicants for initial appointment must be able to demonstrate current competence and evidence of the performance of at least 15 deliveries¹, reflective of the scope of privileges requested, in the past 12 months or completion of an accredited nurse midwifery program in the past 12 months.

Reappointment requirements: To be eligible to renew core privileges as a certified nurse midwife, the applicant must meet the following maintenance of privilege criteria:

Current demonstrated competence and an adequate volume of experience (x# deliveries) with acceptable results reflective of the scope of privileges requested for the past 24 months based on results of ongoing professional practice evaluation and outcomes. Evidence of current ability to perform privileges requested is required of all applicants for renewal of privileges.

Nurse-midwifery Management: The responsibility for decisions and orders concerning care of the patient meeting low risk criteria will be assumed by the CNM, according to approved practice guidelines. Management of deviations from normal may occur when the diagnosis is clear with an expected predictable outcome, or when consultation with the physician results in a mutual decision for continued CNM management of the patient's care. Nurse-midwifery management includes observation, assessment, examination and treatment according to current standards of care and clinical practice guidelines. When deviations from normal occur, the nurse midwife:

a. May implement guidelines to establish a diagnosis and treatment plan when deviations from normal are identified which are covered in practice guidelines.

b. will seek obstetrical consultation when deviations from normal develop which are not covered by practice guidelines.

c. may, with mutual agreement with the obstetrician/gynecologist, collaboratively manage the care of the woman who has developed medical or obstetric complications

d. may refer care of the woman to physician or other health care professional for management of particular aspect of patient's care or for assumption of total management of patient's care. The consultation may occur in person, by telephone, or by written documentation. The consultation will be documented in the medical record by the physician, per patient chart, per admission.

Consultation: Process whereby a CNM maintains primary management responsibility for the woman's care, seeks the advice/opinion of her supervising physician or MHSC physician.

Collaboration: Process whereby a CNM and physician jointly manage the care of a woman or newborn that has become medically or obstetrically complicated. The scope of collaboration may encompass the physical care of the patient, including delivery, by the CNM, according to a mutually agreed-upon plan of care. When the physician must assume a dominant role in the care of the patient due to increased risk status, the CNM may continue to participate in physical care, counseling, guidance, teaching and support. Effective communication between the CNM and physician is essential for ongoing collaborative management. The physician will document the assessment and plan of care in the medical record in a timely manner.

Referral: Process by which the CNM directs the patient to a physician or another health care professional for management of a particular problem or aspect of the patient's care. Responsibility for decisions and orders concerning the care of a woman who is referred to physician management is assumed by the physician. CNM will document in medical record that care has been transferred to physician management. A patient who has been

¹ *Clinical Privilege White Paper, Certified nurse-midwife—Practice area 164.* March 2007; HCPro, Inc.

referred to a physician may be referred back to the CNM once the condition requiring referral has been resolved, as determined by the physician.

Consulting physician: Physician member of the Medical Staff, with appropriate clinical privileges, who consults, collaborates, and who assumes care for patients of medium or high risk status as outlined in practice guidelines.

Proctoring Practitioner: Physician/CNM member of the Medical Staff with appropriate privileges. If required, the proctoring function will not negate the role and responsibilities of the sponsoring physician.

Prescriptive Authority: CNMs, with prescriptive authority granted by the State of Wyoming, will prescribe in accordance with all applicable state and federal laws including, but not limited to, the Wyoming Pharmacy Act [WS 33-24-101 through 33-24-204], the Wyoming Controlled Substances Act of 1971 [WS 35-7-1001 through 35-7-1101], the Federal Controlled Substances Act [21 U.S.C. 801 et seq], and their applicable Rules and Regulations.

Scope of Practice: The CNM is responsible for the management of patients during the antepartum, intrapartum, and postpartum periods. In addition, collaboration with the consultant physician in the co-management of selected medium risk patients may occur, if in the judgment of the physician and/or nurse-midwife this is deemed appropriate.

Quality/Peer Review: Evaluation of care provided by CNMs will be assessed through the established medical staff process.

Affiliation with medical staff appointee/supervision: The exercise of these clinical privileges requires a designated collaborating physician with clinical privileges at this hospital in the same area of specialty practice. All practice is performed under the supervision of this physician/designee and in accordance with written policies and protocols developed and approved by the relevant clinical department or service, the medical executive committee, nursing administration, and the governing body. A copy of the collaborating/sponsoring agreement signed by both parties is to be provided to the hospital. In addition, the collaborating physician must:

- Participate as requested in the evaluation of competency (i.e., at the time of reappointment and, as applicable, at intervals between reappointment, as necessary)
- Be physically present on hospital premises or readily available by electronic communication or provide an alternate to provide consultation when requested, and to intervene when necessary
- Assume total responsibility for the care of any patient when requested or required by the policies referenced above or in the interest of patient care
- Sign the privilege request of the practitioner he or she supervises, accepting responsibility for appropriate supervision of the services provided and agrees that the supervised practitioner will not exceed the scope of practice defined by law (within his or her licensing agreement—i.e., collaborating/sponsoring agreement)
- Co-sign entries on the medical record of all patients seen or treated by the collaborating practitioner in accordance with organizational policies

Medical record charting responsibilities

Clearly, legibly, completely, and in a timely fashion, the CNM must describe each service provided to a patient in the hospital and describe relevant observations. Standard rules regarding authentication of, necessary content of, and required time frames for preparing and completing the medical record and portions thereof are applicable to all entries made. All orders are to be countersigned by the collaborating physician in a timely manner.

GENERAL GUIDELINES AND RISKING CRITERIA

The following Guidelines are meant as a framework to identify patients appropriate for nurse midwifery care at MHSC, and not as an exhaustive and restrictive set of rules. They are intended to be amended from time to time as befits the ever-changing nature of health care. It is understood that a patient's status may change during the antepartum, intrapartum or postpartum, and with the change of status, the care plan may also be revised.

NOTE: The times listed below aren't fixed. If a complication is pending, the CNM should NOT wait until the times are expired before contacting the physician.

Low Risk Status: Patient meeting generally accepted definition of "low risk" status, including but not limited to, term pregnancies (greater than 37 weeks gestation), singleton, vertex presentations with uncomplicated antenatal and intrapartum courses, will be managed independently by the CNM.

Medium Risk Status/Consultation or Collaboration (Documentation in chart is mandatory) Patients with a history of more complicated antenatal courses due to medical, surgical, or obstetrical reasons require consultation and/or collaboration and a plan of care will be implemented that may or may not necessitate physician co-management. These include, but are not limited to:

Antepartum/Intrapartum:

- Mild hypertension in pregnancy without proteinuria/not requiring medication
- Heart disease, without functional disabilities
- Post-term pregnancy beyond 42 weeks
- Prolonged ROM at term (greater than 18 hours)
- Maternal fever greater than 100.4F (38C)
- Anemia, (Hct less than 25%, Hgb less than 8g/dl or symptomatic regardless of Hgb levels)
- Hemoglobinopathy
- Abdominal pain of unknown etiology or unresolving
- Small for gestational age (less than 10% estimated fetal weight)
- Gestational diabetes, diet controlled
- Preterm contractions without cervical change
- Abnormal ultrasound findings
- Mental impairment that interferes with patient compliance
- Other current medical, surgical, or psychiatric condition that could affect patient's plan of care
- Cholestasis of pregnancy
- Fetal demise, including prior history of second/third trimester loss
- Renal disease without renal failure, including complicated UTI/Pyelonephritis
- Labor deviating from normal rate of progress as outlined by ACOG guidelines
- 3rd stage labor lasting longer than 60 minutes
- Premature labor and/or PROM greater than 35 but less than 37 weeks
- Second stage greater than 2 hours with no epidural or greater than 3 hours (Nulliparous). Add 1 hour if epidural given.
- Pudendal Nerve block
- Suspected macrosomia (greater than 5000g, 4500g if diabetic)
- Oligohydramnios/Polyhydramnios

- Category II or III fetal heart rate tracings, persistent more than 15 minutes.
- Underlying familial genetic disorders with potential for transmission, (ie: Cystic fibrosis, hemoglobinopathies, Tay-Sachs, Huntington's Disease, Muscular Dystrophy, Chromosomal translocations/deletions), that directly affects patient's plan of care.
- History of prior complicated pregnancy, including, but not limited to: preterm labor, cesarean delivery, GBS affected infant, pre-eclampsia, gestational hypertension, infection with parvovirus, toxoplasmosis, HSV and/or CMV, Preterm premature rupture of membranes, that directly affects patient's plan of care.

Postpartum

- Maternal fever greater than 100.4F (38C)
- Severe anemia defined by Hct less than 22 or a symptomatic patient
- Persistent urinary retention
- Abdominal pain unresponsive to analgesic relief
- Mastitis
- Postpartum depression
- Postpartum hemorrhage greater than 500, resolved

High Risk Status/Physician management: (Documentation in chart mandatory) Patients in this category will require referral to physician management. The patient's care may then be managed through collaboration, as determined appropriate by the physician. These include, but are not limited to:

Antepartum/Intrapartum

- Diabetes requiring medication (insulin/oral hypoglycemic agents)
- PROM in pre-term infant less than 35 weeks
- Severe pre-eclampsia/eclampsia (including HELLP syndrome)
- Any patient requiring magnesium sulfate
- Severe IUGR (less than 3%ile estimated fetal weight)
- Persistent non-reassuring fetal heart rate tracing
- Unstable Placenta previa or unexplained third trimester bleeding
- Suspected abruptio placentae
- Unstable medical, surgical or psychiatric condition
- Trauma with vaginal bleeding or severe abdominal pain
- Complications resulting from isoimmunization
- DVT/thromboembolic disease
- Fetal anomalies requiring surgery (e.g. gastroschisis, NTD, cardiac defects, diaphragmatic hernia)
- Thrombocytopenia (platelets less than 100,000)
- Preterm labor less than 35 weeks
- Suspected maternal sepsis
- Use of illegal drugs, other than marijuana, immediately preceding or during labor
- Multiple gestations
- Third or Fourth degree lacerations
- Amnioinfusion
- Active genital herpes outbreak
- Hepatitis/HIV
- Non-cephalic presentation
- Cervical cerclage
- Alcohol abuse

Postpartum

- Hematoma increasing in size
- Postpartum hemorrhage greater than 500 mL
- Endometritis
- DVT/PE
- Episiotomy or laceration complications
- Suspected maternal sepsis
- Complicated medical, surgical, or psychiatric condition

Physician will be immediately available (within 20 minutes) for the following patients:

- Previous C-sections or Uterine Surgery
- Anticipated shoulder dystocia

Physicians will be notified immediately for infants with Apgars less than 6 at 10 minutes.

GUIDELINES FOR MANAGEMENT OF TRIAGE AND INTRAPARTUM PATIENTS

Screening: The CNM or Labor & Delivery staff will screen triage patients. Screening will include history, vital signs, and fetal monitor tracing and physical exam as indicated. CNM will be notified of patient status and a plan of care will be determined. CNM will consult, collaborate/comanage, or refer patient to physician care when indicated. Any transfer of patients to other facilities will be according to MHSC policies to ensure compliance with EMTALA guidelines.

Intrapartal Management: will include admission, management and discharge of patients as outlined in CNM Core & Special Privilege delineation.

Amniotomy: Membranes may be ruptured at the discretion of the CNM when the following criteria are met:

- Active labor (greater than 4 cm)
- Vertex presentation with head at 0/-1 station or lower, well applied to cervix
- Absence of bleeding, except bloody show
- Absence of contraindications for amniotomy:
 - Active maternal genital herpes
 - HIV
 - Non-vertex fetal presentation and any condition that precludes vaginal delivery
 - Undiagnosed vaginal bleeding

If the above criteria are not met, the CNM may perform amniotomy in selected circumstances, after consultation with physician. If head is not well applied to cervix, physician should be immediately available.

Fetal scalp electrode/IUPC: FSE/IUPC may be placed at the discretion of the CNM when the following criteria are met:

- Inability to obtain adequate fetal heart tracing, could be secondary to maternal habitus (obesity) or frequent maternal movement
- Confirmation of non-reassuring FHR tracing to allow for timely interventions
- Absence of contraindications for FSE/IUPC placement:
 - Active maternal genital herpes
 - HIV
 - Non-vertex fetal presentation and any condition that precludes vaginal delivery
 - Undiagnosed vaginal bleeding

CERTIFIED NURSE MIDWIFE (CNM) CORE PROCEDURES

Requested

Manage and provide care to adolescent and adult females focusing on pregnancy, childbirth, the postpartum period, gynecological needs, and the care of the newborn. CNMs may admit patients to the hospital. They may assess, stabilize, and determine the disposition of patients with emergent conditions consistent with medical staff policy regarding emergency and consultative call services. The core privileges in this specialty include the procedures listed below, and such other procedures that are extensions of the same techniques and skills.

This list is a sampling of procedures included in the core. This is not intended to be an all-encompassing list but rather reflective of the categories/types of procedures included in the core.

To the applicant: If you wish to exclude any procedures, please strike through those procedures you do not wish to request, then initial and date.

- Write admission orders after notification of collaborating physician
- Manage midwifery elements of selected moderate- and high-risk conditions after consultation with physician
- Order routine laboratory, radiological, sonographical, and other diagnostic examinations
- Perform history and physical examinations
- Collect specimens for pathological examination

Labor management

- Perform amniotomies
- Conduct fetal surveillance
- Comanage (limited to midwifery aspects of care) with physician selected moderate- and high-risk conditions including but not limited to pre-eclampsia, gestational diabetes, preterm labor, chorioamnionitis, and other conditions that may be assessed on a case-by-case basis with the consulting physician
- Perform induction of labor after consultation with physician
- Initiate amnio-infusion after consultation with physician
- Interpret fetal monitor tracing
- Manage normal labor at no less than 36 weeks gestational age and not more than 42 weeks completed gestation. Includes management of women with a previous Cesarean section with a documented low-transverse uterine scar.
- Manage post-dates pregnancy in consultation with a physician as appropriate
- Administer local or pudendal anesthesia and order epidural anesthesia when indicated

Management of normal spontaneous birth with the collaborating physician or designee readily available to respond to any call for assistance

- Perform cord blood sampling
- Explore the uterus and manually remove placenta fragments
- Perform midline/mediolateral episiotomies and repair
- Manage normal spontaneous birth
- Repair first- and second-degree perineal lacerations and other associated lacerations

Postpartum management

- Provide care to mothers and their infants in the postpartum period
- Perform hemorrhage stabilization with physician consultation if needed
- Manage midwifery elements of selected high-risk conditions after consultation with physician
- Monitor vital signs, lochia, fundus, and bladder functions in the immediate postpartum period
- Conduct postpartum rounds and examination

**REQUESTED BY CNM
(Initials)**

**APPROVED BY
SUPERVISING PHYSICIAN**

BOARD APPROVAL

_____ **First Assist for C Sections**

_____ **First Assist for Surgery**

Acknowledgement of Practitioner

I have requested only those clinical services/functions for which by education, training, current experience, and demonstrated performance I am qualified to perform and for which I wish to exercise at [hospital name], and I understand that:

In exercising any clinical services/functions granted and in carrying out the responsibilities assigned to me, I am constrained by hospital and medical staff policies and rules applicable generally and any applicable to the particular situation.

Signed _____ *Date* _____

Endorsement of collaborating PHYSICIAN / physician employer(s):

Signed _____ *Date* _____

Signed _____ *Date* _____

Department Chair's Recommendation

I have reviewed the requested clinical privileges and supporting documentation for the above-named applicant and make the following recommendation(s):

- Recommend requested clinical privileges
- Recommend clinical privileges with the following conditions/modifications:
- Do not recommend the following requested clinical privileges:

<i>Privilege</i>	<i>Condition/modification/explanation</i>
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____

Notes

**Statement of Collaborating Physician
Certified Nurse Midwives**

Name of C.N.M.

Name of Patient

I agree that I will be in a collaborative relationship with the above named CNM and patient for the purposes of referral, consultation and/or co-management as defined by the midwife scope of practice and delineation of privileges. I will assure appropriate access for consultation/coverage when I am unavailable. (Collaborative physician must be a member of the Active Medical Staff of Memorial Hospital of Sweetwater County with privileges in OB/GYN).

(Name) Collaborative Physician

Date

Collaborative Physician Office Address (please print or type)

Contact Phone: _____

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
Registered Nurse First Assistant
Delineation of Privileges

Name: _____

Initial Appointment Reappointment

Note: The following criteria for delineation of clinical privileges will uniformly apply to all applicants at initial appointment and reappointment of privileges.

DEFINITION OF RN FIRST ASSISTANT:

The RNFA is a perioperative registered nurse who:

- works in collaboration with the surgeon and other health care team members to achieve optimal patient outcomes;
- has acquired the necessary knowledge, judgment, and skills specific to the expanded role of RNFA clinical practice;
- intraoperatively practices at the direction of the surgeon; and
- does not concurrently function as a scrub person.²

EDUCATION:

Completion of an RNFA program that:

- is equivalent to six (6) semester credit hours of formal, post-basic nursing study;
- meets the AORN standards for RN first assistant education programs; and
- requires a baccalaureate degree for entry into the program (after January 1, 2020).¹

QUALIFICATIONS FOR RNFA PRACTICE:

The minimum qualifications to practice as an RNFA include:

- certification in perioperative nursing (CNOR);
- a minimum of three years of perioperative nursing experience;
- current certification in ACLS;
- successful completion of an RNFA program that meets the AORN standards for RN first assistant education programs;
- compliance with all statutes, regulations, and institutional policies relevant to RNFAs; and
- a baccalaureate degree, with the exception that the RNFA practicing prior to January 1, 2020, may continue to practice at his or her existing level of education.¹

CORE PROCEDURE LIST

NOTE: THIS LIST IS A SAMPLING OF PRIVILEGES INCLUDED IN THE CORE. IT IS NOT INTENDED TO BE AN ALL-ENCOMPASSING LIST. NEW APPLICANTS MAY BE REQUESTED TO PROVIDE DOCUMENTATION OF THE NUMBER AND TYPES OF HOSPITAL CASES DURING THE PAST 12 MONTHS. APPLICANTS HAVE THE BURDEN OF PRODUCING INFORMATION DEEMED ADEQUATE BY THE HOSPITAL FOR A PROPER EVALUATION OF CURRENT COMPETENCE AND OTHER QUALIFICATIONS AND FOR RESOLVING ANY DOUBTS.

To the applicant: If you wish to exclude any procedures, please strike through those procedures you do not wish to request, then initial and date.

Requested

- A. Assists the surgeon (DO/MD) during the operative procedure as the first assistant
- Performs positioning, prepping, and draping of patient
 - Provides homeostasis by clamping blood vessels, coagulating bleeding points, ligating vessels and by other means as directed by surgeon
 - Handles and/or cuts tissue as directed by surgeon during operative procedure
 - Performs wound closure as directed by surgeon
 - Incise and drain superficial skin infections
 - Changes dressings
 - Administers local infiltrative anesthetic
- B. Provides comprehensive approach to surgical patient care using knowledge and skills of professional nursing:
- Identifies patient hazards and participates in quality improvement and initiates appropriate corrective action
 - Applies principles of asepsis and infection control
 - Applies surgical dressing and assists with transferring patients from operating room³

SPECIAL NONCORE PRIVILEGES (SEE SPECIFIC CRITERIA)

If desired, noncore privileges are requested individually in addition to requesting the core. Each individual requesting noncore privileges must meet the specific threshold criteria governing the exercise of the privilege requested including training, required previous experience, and for maintenance of clinical competence.

Additional Privileges Requested:

AFFILIATION WITH MEDICAL STAFF APPOINTEE/SUPERVISION

The exercise of these clinical privileges requires a designated supervising surgeon (DO/MD) with clinical privileges at this hospital. All practice is performed under the supervision of this surgeon/designee and in accordance with written policies and protocols developed and approved by the relevant clinical department or service, the medical executive committee, nursing administration, and the governing body. A copy of the sponsoring surgeon (DO/MD) agreement signed by both parties is to be provided to the hospital.

In addition, the supervising surgeon must:

- Participate as requested in the evaluation of competency (i.e., at the time of initial appointment, reappointment and, as applicable, at intervals between reappointment, as necessary)
- Be physically present in the Surgery Department
- Assume total responsibility for the care of any patient
- Sign the privilege request of the practitioner he or she supervises, accepting responsibility for appropriate supervision of the services provided under his or her supervision, and agree that the supervised practitioner will not exceed the scope of practice defined by law (within his or her licensing agreement—i.e., supervising/collaborating agreement)
- Sign entries on the medical record of all patients seen or treated by the supervised practitioner in accordance with organizational policies

ACKNOWLEDGEMENT OF PRACTITIONER

I have requested only those clinical services/functions for which by education, training, current experience, and demonstrated performance I am qualified to perform and for which I wish to exercise at Memorial Hospital of Sweetwater County, and I understand that:

In exercising any clinical services/functions granted and in carrying out the responsibilities assigned to me, I am constrained by hospital and medical staff policies and rules applicable generally and any applicable to the particular situation.

Signed _____ *Date* _____

ENDORSEMENT OF COLLABORATING SURGEON (MD/DO)/EMPLOYER(S):

I have reviewed the clinical privileges requested by the named applicant, and I believe that this individual is qualified by licensure and training to provide patient care as requested. The applicant is employed, contracted, or supervised by me to function in this capacity.

I understand that all duties performed by him/her must be done under my supervision and upon my authority. I assume accountability for his/her conduct within Memorial Hospital of Sweetwater County.

I agree to notify the hospital of any changes in this agreement.

Signed _____ *Date* _____

Printed Name of Surgeon (MD/DO)Sponsor: _____

Signed _____ *Date* _____

Printed Name of Surgeon (MD/DO)Sponsor: _____

References

1. Advisory Opinion RN First Assistant, Wyoming State Board of Nursing; <https://nursing-online.state.wy.us/Resources/RN%20First%20Assistant.pdf>, April 9, 2014; 1 – 3.
2. AORN Position Statement on Advanced Practice Registered Nurses in the Perioperative Environment; Association of Operating Room Nurses; 2014; 1 – 4.
3. Scope of Practice, RN First Assistant; Kaleida Health; <https://www.kaleidahealth.org/providers/support/AHP/RNFA.pdf>, 2014; 1 – 2.

2018 – 2021

Strategic Plan

Overall Goal: Improve HCAHPS Scores to 75th Percentile

1 PATIENT EXPERIENCE

INITIATIVES	MEASURE
Patient Focused Culture Program	<ul style="list-style-type: none">Select and obtain MHSC Board approval by 10/2018Roll out plan by end of 12/2018100% of employees trained by 7/2021

Overall Goal: Improve CMS Star Rating to a 4 Star

2 QUALITY & SAFETY

INITIATIVES	MEASURE
Universal Training (LEAN)	<ul style="list-style-type: none">100% of employees trained on quality improvement strategy model by 6/2021

Overall Goal: Increase Patient Volume by 5%

3 COMMUNITY & GROWTH

INITIATIVES	MEASURE
Clinic Improvements	<ul style="list-style-type: none">Establish electronic follow up/reminder program in 80% of clinics by 12/2019
Improve Access to Care	<ul style="list-style-type: none">Patients able to make appointments in non-specialty clinics within 2 business days by 6/2021
Community Needs Assessment	<ul style="list-style-type: none">Report completed and shared with MHSC Board by 6/2019

Overall Goal: Increase Employee Retention

4 WORKPLACE EXPERIENCE

INITIATIVES	MEASURE
Communication Improved at All Levels	<ul style="list-style-type: none">Improve and/or create employee self-service portals by 6/2021Review and improve meetings process (purpose, timing, recordkeeping, attendance) by 6/2019
Become Employer of Choice	<ul style="list-style-type: none">Team BRAVO initiatives through 2021Professional development initiatives through 2021

Overall Goal: Improve Standard & Poor's Bond Rating

5 FINANCIAL STEWARDSHIP

INITIATIVES	MEASURE
Improve Bond Rating	<ul style="list-style-type: none">Maintain BB+ by 6/2020Improve BBB- by 6/2021
6 Cent Tax Project	<ul style="list-style-type: none">Prepared by 1/2020 to present to Board of County Commissioners for approval for placement on Election 2020 ballot





**Compliance Plan – Draft
Updated 9/27/18 C. Radakovich**

I. PURPOSE AND INTRODUCTION

Memorial Hospital of Sweetwater County (MHSC) is committed to conducting business in accordance with its mission, vision and values, complying with the established Code of Conduct and exercising high ethical standards in business decision making. In addition, as a non-profit tax exempt entity, MHSC is committed to serving and promoting the health of the community who are the stakeholders.

This plan and the accompanying Compliance Program help ensure that service delivered to patients and business is conducted with third party payors, employees, independent contractors, and other individuals who are representing MHSC using honest and ethical behavior. This plan provides an infrastructure supporting transparency in patient care and business dealings as well as accountability on the part of its workforce.

The Corporate Compliance Program develops appropriate processes, policies and procedures that help ensure regular compliance with Federal and State laws and regulations. This creates a framework to prevent and detect violations of the law by its employees, medical staff, resident physicians, clinical affiliates, volunteers and other individuals who are representing MHSC. In addition, the Program through education and training promotes the understanding of and adherence to applicable federal and state laws and regulations, and makes a sincere effort to create a system-wide awareness of the importance of preventing, detecting, and correcting any fraud, waste or abuse at MHSC in connection with state and federally funded health care programs and private health plans.

II. MISSION and VISION

Mission: *Compassionate care for every life we touch.*

Vision: *To be our community's trusted healthcare leader*

MHSC is a community based organization which partners with its physicians, employees and the communities it serves, to provide quality patient centered care. The Corporate Compliance program upholds the mission and vision by establishing and supporting a hospital-wide culture of honesty and respect to guide everyone's actions by developing standards, increasing awareness and promoting honest behavior and professional responsibility through education, awareness and shared accountability that promotes compliance with applicable laws, regulations and hospital policies.

Page 43 of 305

III. VALUES

- a. Be Kind
- b. Be Respectful
- c. Be Accountable
- d. Work Collaboratively
- e. Embrace Excellence

IV. STRUCTURE-COMPLIANCE OFFICER AND COMPLIANCE COMMITTEE

Appointment

The Director of Compliance and Risk Management has been designated as the Corporate Compliance Officer. The Compliance Officer has access to all documents and information relevant to compliance activities including but not limited to patient records, billing records, marketing records, contracts and written arrangements or agreements with others. The Compliance Officer has the ultimate responsibility and accountability for creating and facilitating a comprehensive strategy to ensure that MHSC is consistently complying with the federal and state regulations, and ethical business standards. However, each member of the workforce remains responsible and accountable for his or her own compliance with applicable laws.

Duties

The Compliance Officer is responsible for the day to day operations, planning and activities of the Compliance Program. The Compliance Officer oversees all on-going activities related to the development, implementation, maintenance and adherence to the organization's policies and procedures covering Corporate Compliance and Health Insurance Portability and Accountability Act (HIPAA) Privacy Compliance. The Compliance Officer works closely with Senior Leadership to implement internal controls and plans of correction when appropriate. In addition, the Compliance Officer develops and implements policies and procedures as required for compliance with all applicable federal and state regulations and guidelines, including the Federal Sentencing Guidelines and their enforcement provisions.

Independent Authority

It is the intent of this plan to establish the authority of the Compliance Officer to retain outside counsel or independent review organizations within the confines of facility approved business practices. Prior to independently retaining the aforementioned types of organizations, the following facility contacts will be made in this order depending on the presence of conflict of interest and cost of organization retention:

- a. Chief Legal Executive
- b. Chief Executive Officer
- c. Compliance Committee of the Board
- d. President of the Board of Trustees

Reporting

The Compliance Officer reports to In-house Counsel. The Compliance Officer is a member of the Board Compliance Committee and meets monthly with the committee. The Compliance Officer shall report directly to the Board of Trustees at least annually. Such reports may be written or oral. The Compliance Officer has the ability to participate in an Executive Session of the Board at the Board's discretion.

Page 44 of 305

Compliance Committee

The Corporate Compliance program will be supported by two committees. The Board Compliance Committee is a Committee of the Board of Trustees, which functions according to its charter. The internal compliance work team is charged with the responsibility of operating and monitoring the Program and initiating any actions to correct problems encountered. The duties of the internal compliance work team include but are not limited to:

- a. Advising the Compliance Officer and assisting in the implementation and maintenance of the Compliance Program;
- b. Recommending and monitoring, in conjunction with the relevant service areas, the development of internal systems and controls to carry out the MSHC's standards, policies and procedures;
- c. Determining the appropriate strategy and/or approach to promote adherence to the Compliance Program and the detection of potential violations;
- d. Recommending and monitoring a system to solicit, evaluate and respond to complaints and problems;
- e. Monitoring results of external and internal audits;
- f. Keeping apprised of all applicable requirements.

V. CODE OF CONDUCT

For a successful program to be in place, MHSC expects its medical staff, senior management, department directors, managers and supervisors to understand the Compliance Program and to comply with the Code of Conduct. These individuals are also expected to set an example for all other employees by following the Code of Conduct and ensure that their employees understand the policy. In addition to policies concerning general employee conduct, the Code of Conduct focuses on employee conduct with respect to the laws that most frequently and directly impact the business conduct of MHSC.

VI. EDUCATION AND TRAINING

Compliance and ethics training for all employees is integral to the effectiveness of a Compliance Program. The objective of this education is to establish a clear understanding of each employee's role and rights under this Plan. All employees will receive education and training on an annual basis.

The content of the education will be determined by the internal compliance work team on an annual basis. Additionally, the internal compliance work team, in conjunction with the Compliance Officer, will determine if individual departments will need supplemental education.

The Compliance Officer shall also establish a mechanism for employees to raise questions and receive prompt, appropriate guidance regarding compliance issues. This is separate and distinct from the anonymous reporting mechanism.

Changes in the Plan/Program or the addition of relevant information will be disseminated throughout the organization in a timely manner via various methods intended to maximize the saturation of the information.

VII. MONITORING COMPLIANCE

The Compliance Officer, in conjunction with the internal compliance work team, will create an annual work plan. Pursuant to that plan, the Compliance Officer will conduct or direct periodic audits of all departments to assess compliance with the standards and policies established with the program. Reports of audits shall be provided to the Compliance Committee.

As part of the ongoing monitoring and auditing efforts in the plan, the Compliance Officer in conjunction with the internal compliance work team will ensure appropriate policies and procedures are updated appropriately to reflect the most relevant laws and regulations.

The Compliance Officer will be notified of all external audits and have access to audit documentation, excluding protected peer review information. Further action, if necessary, by the Compliance Officer with respect to any deviation of discrepancy revealed by an audit will be taken under the provisions of this plan.

VIII. REPORTING CONCERNS AND COMPLAINTS; NON-RETALIATION POLICY

MHSC encourages and maintains open communications between its workforce and the Compliance Officer or Compliance Committee. Without help from the workforce it may be difficult to learn of possible compliance problems and to make necessary corrections.

The Compliance Officer monitors and maintains a “Compliance Hotline” that enables anonymous reporting without the fear of retaliation. Individuals are encouraged to call the hotline if they have any question about whether their concern should be reported. A written record of every report received will be kept for a period of five years. Every reasonable effort will be made to preserve confidentiality of reports of non-compliance. Individuals must understand, however, that circumstances may arise in which it is necessary or appropriate to disclose information. In such cases, disclosure will be on a “need to know” basis.

No member of the workforce shall in any way intimidate or retaliate against another individual for reporting, in good faith, an act of non-compliance. Acts of intimidation or retaliation should be reported to the Compliance Office and will be investigated. Any confirmed act of intimidation or retaliation shall result in discipline. Furthermore, the workforce is required to report acts of non-compliance. Any individual found to have known of such acts but failed to report, may be subject to disciplinary action.

IX. INVESTIGATION AND CORRECTION OF IDENTIFIED PROBLEMS

Reports or reasonable indications of fraud, waste or abuse, violations of this Compliance Program, violations of organization policy or procedure, or violations of applicable law or regulation are promptly investigated. The purpose of the investigation shall be to identify these situations, and to implement procedures necessary to ensure future compliance.

The Compliance Officer, or his or her designee, is responsible for directing the investigation of the alleged situation or problem. In undertaking investigations, the Compliance Officer may utilize other employees (consistent with appropriate confidentiality), outside attorneys, outside accountants and auditors, or other consultants or experts for assistance or advice.

Page 46 of 305

Because of the many situations or problems that are possible, the process and method of investigation is left to the judgment and discretion of the Compliance Officer. However, the Compliance Officer or his or her designee, may conduct interviews with any individual necessary and may review any documents including but not limited to those related to the claim development and submission process, patient records, e-mail and the contents of computers.

The Compliance Officer reports the results of each investigation to the Board Compliance Committee, and Chief Legal Executive, and, when appropriate based on significance, the Board of Trustees. The Compliance Officer may recommend a course of discipline and/or other corrective action. Corrective action recommendations by the Compliance Officer will be provided concurrently to the Human Resources Department and the Senior Leader over the service area.

Self-Disclosure Protocol

MHSC complies with all relevant federal and state statutes, rules and regulations to self-assess and to self-identify any matters that in reasonable assessment are potentially in violation of Federal or State criminal, civil or administrative laws and/or indicate internal billing patterns or operational issues that might affect the right to Medicaid or Medicare reimbursement. Upon identification, MHSC will report and refund any overpayments to Medicare and Medicaid within the statutory required mandates.

X. ENFORCEMENT AND DISCIPLINE

Sanctions may be imposed on any member of the workforce who is found to have intentionally or unintentionally violated established policies or procedures. These sanctions may result in disciplinary action, removal of privileges, discharge of employment, contract penalties, and in some cases civil and/or criminal prosecution. This is not an exhaustive list, as other sanctions may be recommended by the Compliance Committee.

Individuals may also be subject to disciplinary action for:

- a. Failure to perform any obligation or duty required of employees relating to compliance with the program, or applicable laws and regulations.
- b. Failure of the leadership personnel to detect non-compliance with applicable policies, laws, and regulations where reasonable diligence on the part of the leader would have led to the discovery of any violations or problems.
- c. Failure to report knowledge of suspected fraud, waste or abuse.

The disciplinary action will follow existing facility policies and procedures. Depending on the severity of the event, progressive discipline may not be required.

XI. REAPPRAISAL OF PLAN

This plan will be reviewed at least annually by the Compliance Officer and Compliance Committee. Revisions will be made as needed and education will be provided to staff as explained in Section VI.

Memorial Hospital of Sweetwater County

A Finance Position Paper

By

Wm. Marty Kelsey
Trustee

Introduction

For the past almost 15 months on the Board, I have been trying to keep alert to ways the Board can improve communication with Senior Leadership in an effort to enhance financial governance. I have observed many things. I have determined to reduce my thoughts to writing and share them at this time with the Board and some of Senior Leadership.

Please note and be assured of this important fact: **This is document is not a criticism of the Board nor of Senior Leadership.** This Position Paper is written primarily to the Board. But, of course, some of Senior Leadership is directly involved with what is written. Big ships turn slowly; however, I feel the time has come for the Board to make some fundamental changes in how we interact with and what we expect from Senior Leadership on matters impacting the Hospital's finances. Just as important, the time has also come for Senior Leadership to receive from the Board more guidance and policy direction.

The items listed below are not intended to be all-inclusive. I don't pretend to have all the answers. But we need to start somewhere. Trustees and Senior Leadership will, of course, have their own opinions and ideas. All of these opinions and ideas are welcomed in the marketplace of governance and management.

Request

I am requesting that Chairman Mathey place this matter on the October agenda. Not for the purpose of discussing/debating the content of this Position Paper, but rather to determine where do we go from here? What does our CEO think? What does our CFO think? What do Board members think?

Specific Position Paper Topics Listed Below

Below are the specific topics I wish to cover at this time. They are not listed in any particular order of priority or importance.

Data Used in Financial Decision Making

I feel that we as a Board have very limited data given us as we approve budgets and make other financial decisions. One hears the term regularly...“data-driven”. I don’t think we should be a “data driven” institution. Rather, I think we should be a “data informed” institution. Data, per se, should not be the driving factor in our decision-making. But, we as Board members and as Senior Leadership need to be informed of key data elements prior to making certain decisions. I can’t speak for Senior Leadership and what data they review and have at their disposal, but I have observed that the Board is making significant budget decisions absent knowledge of key data elements. Below, I will give some examples.

Comparator Hospitals

For a variety of reasons, it is often very helpful and desirable to know how other hospitals are operated. Metrics from these hospitals help us secure a good feel for how we are managed on multiple fronts.

Our auditors, CliftonLarsenAllen, have suggested that there are five Wyoming hospitals that could very well be our comparator hospitals. Some are larger than Memorial and some are smaller. I think we should very seriously consider using various data elements from these hospitals to compare ourselves to. Below, I will provide just a few areas could explore in this regard.

One subject area where we should keep using national and /or regional data, however, is with regard to physician salaries and perhaps salaries of selected professionals.

Cash on Hand

We all know that our bond covenants dictate that we need to have 75 days of cash on hand. As of July, 2018, we have 108 days of cash on hand. However, I’m not aware of any Board goal in this regard. I think there should be. Should it be 75 days minimum? Should it be 100 days minimum? I would lean on Senior Management to recommend a minimum. In any event, I believe this is a benchmark that should be set by the Board.

Annual Debt Service Coverage

Again, the bond covenants dictate that this coverage ratio should be 1.25. As of July, it was 2.75. I’m not aware of any Board goal in this regard. What should the number be as a goal? The minimum? No, of course. I would lean on Senior Management to recommend a minimum. As with cash on hand, I believe this is a benchmark that should be set by the Board.

Operating Margin

Much has been said about the Hospital’s operating margin. Operating margins are important to the financial health of the organization. Computationally, the FY 2019 budget shows a 1.9% operating margin. That number is easily manipulated. For example, if the two percent employee raise had not been plugged into the equation, the operating margin would be higher.

If significantly fewer patient days were assumed and then plugged into the equation, the operating margin would be lower. Numerous assumptions are made in the budget model.

My primary question to the Board is this: What do you want as an operating margin going forward? What do you want Senior Management to strive to achieve? One could argue that the Board determined that the 1.9% product of the budget equation was OK for FY 2019. I would not take issue with this argument. However, there are other prongs to this very important matter.

Our auditors suggest that Memorial Hospital strive to achieve an operating margin of approximately 3-4%. Do we as members of the Board want to see the operating margin increase over the next few years until we reach a desired level?

The Board did not set an operating margin goal for Senior Management to work toward for FY 2019. In my opinion, setting goals for an operating margin is an integral part of financial governance for a hospital board of trustees. This should be done not only for the immediate upcoming fiscal year, but also for a few years in the future.

Salaries and Benefits

For FY 2017, salary and benefit expenses per FTE employee for Memorial and for our “comparator” hospitals, as identified by our auditors were as follows:

Wyoming Hospital A:	\$83,656
Wyoming Hospital B:	\$95,992
Wyoming Hospital C:	\$92,591
Wyoming Hospital D:	\$99,654
Wyoming Hospital E:	\$100,478
Memorial Hospital:	\$108,333

Of note, for FY 2018, Memorial’s S & B expense was \$106,730. No data yet from the comparators.

The mean average, in FY 2017 for the five comparator hospitals, was \$94,400. Memorial’s S & B expenses were 14.7% higher than the average of the comparators.

There are at least three potential reasons why Memorial’s salaries and benefits per FTE are considerably higher than the average of these comparators.

- Higher Salaries and Wages
- Higher Level of Benefits, perhaps higher health insurance and/or retirement contributions, for example
- A combination of the above

Unlike what typically occurs in an often rather high-profile way at most public institutions, at Memorial there was almost no discussion involving the Board of what salary increases should

be for the upcoming fiscal year. The Finance Committee met in May and went over the proposed FY 2019 budget which had a two percent raise plugged in. Then it was approved in June by the Board with little discussion or fanfare.

It is my strong opinion that the Board needs to have good, comparative data regarding salaries and benefits before S & B decisions are made. (Data Informed Model) Salaries and benefits make up over 55% of the FY 2019 operating budget. Because of the huge expense involved, as well as employee recruitment and retention, this is an important Board matter and deserves more than a “minute or two” of discussion. Moreover, S & B expenses are critical to the bottom line. What should S & B increases be linked to? Lots of options. I’m quite sure Senior Management talks about this a lot. But, my point is...where is the Board?

Room Rates

This is another area where the Board had virtually no input this year. Senior Management made a decision to not increase room rates for FY 2019 whereas in the past they were apparently increased 5% annually.

My question is this: With an ever more cost conscience public due to higher out of pocket costs due at least in part to higher deductibles, people shop now more than ever. What should our room rates be? I have no clue. What are the room rates for our auditor-suggested “comparator hospitals”? For all I know, perhaps Senior Management has this data and uses it each year.

Each year the University of Wyoming and the seven community colleges act on tuition increases. They do not, however, do it in a vacuum. These decisions are made by either a Coordinating or Governing Board...not staff. Careful comparisons are made with regional colleges and universities before a decision is made. It is my opinion we need to seek comparative data before acting. We as a Board need to know what others are doing. (Data Informed Model) This is good information to have, if for no other reason than to defend our decisions if the need arises. I think the Board should decide on room rates and this matter should be discussed well before numbers are plugged into the budget model.

Sinking Funds and Medium Range Equipment Replacement Plan

I haven’t yet asked the question: “Does the Hospital employ sinking funds to provide resources to pay for the replacement of certain equipment items, or is the process entirely “pay as you go”? My guess is we are on a “pay as you go” basis. A sinking fund is a fund into which the institution deposits money annually anticipating a future purchase. Typically, these funds would be used for the purchase of “big ticket” items.

One example at Memorial comes immediately to mind. The Radiation Oncology department uses a very expensive item of equipment called a Linear Accelerator. I don’t know, but I am assuming this piece of equipment was purchased with bond proceeds. This piece of equipment will likely cost approximately \$3,000,000 to replace, depending on what “bells and whistles” are on it. As it now operates, the physical life is many years. However, the problem is not physical

life, it is functional life given exploding technology. Functional obsolescence is a real problem in many domains, medical equipment not excepted. Already, there are a few advanced accelerators on the market (used by cutting edge hospitals) that are gaining popularity.

I think it would be wise for the Board to consider the establishment of selected sinking funds for Senior Leadership to administer as part of a financial plan. What would the Hospital do if the need arises to buy such a piece of equipment? I know there are other expensive equipment items as well in the Hospital. (Comment: this is one reason why operating margins have significance!)

The Board is responsible for both short term and long term capital and equipment strategies. I think we should at least ensure there is a plan in place to address these matters.

Equipment Purchasing Prioritization

The FY 2019 budget has \$3,000,000 set aside for equipment purchases. The Board has not seen a comprehensive listing of equipment needs. (We did, however, receive a nice capital renewal listing a few months ago from Jim Horan)

I am suggesting that the Board be provided with a listing of equipment needs the Hospital has, not prioritized by each piece of equipment, but rather placed in three levels:

- Highest Priority, with total estimated cost
- Medium Priority, with total estimated cost
- Lowest Priority, with total estimated cost

I would be surprised if the list does not exceed \$3,000,000.

Each month the Finance Committee and subsequently the Board is presented with a list of requested equipment items. It would be nice to have a reference point as we consider these requests.

Clinic Financial Performance

We all know the Clinic is losing a substantial amount of money each year. Below are the numbers (rounded):

FY 2018: \$4,300,000
FY 2017: \$8,000,000
FY 2016: \$3,400,000

FY 2017 was likely an outlier...an aberration. It is interesting to me that the Clinic lost about \$900,000 more in FY 2018 than in FY 2016. Too early to see a trend and we need to keep on top of this part of the Hospital's operations. Where are we headed in FY 2019?

I think the Board would benefit from Senior Leadership addressing this issue, giving us some insights and possibly some projections and future plans.

Selected Strategic Plan Items

To effectively (and realistically) address Jim Horan's long list of capital renewal items, securing 6th cent funding may well be our best shot at getting adequate funding to meet several of these needs. Yes, we can spread the expenses out over time, but with competing medical equipment needs and small (or no) operating margins, the task will be challenging.

We must be careful to not "shoot ourselves in the foot" politically or otherwise over the next period of time. We do not have a lot of time to put together a package for consideration by the Board of County Commissioners.

Maintaining and then improving our Standard and Poors rating over time is a worthwhile goal. But, I can tell you, it is often a moving target. The institution must develop a very good relationship with the first level S & P contacts with the Hospital in order to have a fighting chance of getting a good recommendation from them to the S & P approving committee.

Board Budget Workshops with Senior Leadership

In my opinion, and as it is done with most all public entities, I think the Board needs to have a major budget workshop in late January of each year with Senior Leadership to go over comparative data, to listen to Senior Leadership's concerns, to give direction as determined appropriate, and to formulate fiscal strategies. This will likely be a several hour meeting. Another meeting may well be needed in late March or April, depending on issues. The outcomes of these workshops should prove worthwhile to Senior Leadership as they then work to present a proposed budget to the Finance Committee in May.

Summary

We need to get more involved as a Board. The Finance Committee can follow-up on things and bring things to the Board's attention for action or for information. But, I believe we need to do more as a Governing Board to meet our obligations to the public and to give guidance and direction to Senior Leadership. In my opinion, Senior Leadership deserves more direction from us.

Again, let me reiterate. This document is not meant to be critical. We have great people in Senior Leadership and on the Board who are doing good work. I am simply providing some things I feel are important for the Board to consider.

Richard Mathey's Comments on Kelsey Finance Position Paper

Introduction

Mr. Kelsey believes that BOT financial governance needs to be enhanced, and that fundamental changes in how the BOT interacts with Senior Leadership are needed. My view is that financial governance is strong but not overwhelming. And refinements can be made to financial governance.

Request

The matter of Mr. Kelsey's financial position paper was placed on the agenda. However, I remain confused concerning the purpose for which this was done. If we are not "discussing/debating the content of [the] Position Paper," I'm not sure what is to be discussed/debated. My comments are on the specific topics covered in the Position Paper.

Data Used in Financial Decision Making

From and after February 7, 2017, I believe I have had access to the full and complete body of MHSC financial data. To the extent I have requested that raw data be compiled in a specific manner, I have received the compilations. Generally, though, I am satisfied with the data staff provides as well as the manners of compilation. I do not agree that MHSC budgets are "data driven." The budgets are both data informed and aspirational, which I believe is appropriate.

Comparator Hospitals

Having comparator hospitals against which and to which MHSC's financial performance may be compared may be useful. I'm not sure. The appearance from my limited perspective is that all hospitals have similar broad goals, objectives, and methods of operation. However, each hospital operates in a unique environment and each attempts to optimize performance in its unique environment. The question of whether to use comparator hospitals is

best answered by applying a cost/benefit analysis. The cost-staff time and effort in identifying the comparators and perhaps staff time in reworking financial data from the comparators, so apples-to-apples comparisons are made. The benefit – we see how MHSC compares to the comparator set. Given the uniqueness of individual hospitals and the environments in which they exist, I'm not convinced that the cost will justify the benefit.

Cash on Hand

I agree that a days cash on hand goal should be established by the BOT, with heavy input from Senior Leadership. Of greater importance is the step after this goal has been reached. Exactly how will we use cash over and above the goal to meet elements of MHSC's strategic plan?

Annual Debt Service Coverage

The BOT and Senior Leadership should continue to monitor the annual debt service coverage ratio. At this point in MHSC's existence, with annual debt service being low, a goal other than the bond covenant requirement may interfere with the days cash on hand goal.

Operating Margin

I see the 1.9% operating margin for FY 2019 as both the Senior Leadership's and the BOT's aspirational operating margin. This operating margin was not the product of a budgetary equation, but a consciously chosen figure. I believe the rationale behind the figure is sound.

Salaries and Benefits

This is an area I believe must be left to Senior Leadership. However, I further believe that S&B expenses are critical to the bottom line and as Mr. Kelsey states, "I'm quite sure Senior Management talks about this a lot." I would like to have more detail from Senior Leadership concerning what it does, and why it does what it does, in the S&B area.

Room Rates

As with Salary & Benefits, I believe room rates should be recommended to the BOT by Senior Leadership. As with Salary & Benefits, I believe the BOT would benefit from knowing in more detail Senior Leadership's thinking on this topic. Every time I have asked for Senior Leadership's thoughts and rationale, regardless of the topic, I've been both impressed and comforted.

Sinking Funds and Medium Equipment Replacement Plan

This is directly linked to the question of days cash on hand. We are on a "pay as you go" basis, with prioritization being done by what breaks first or what becomes obsolete first. Establishing funded depreciation reserve accounts may be beneficial and I look forward to Senior Leadership's views on this topic.

Equipment Purchasing Prioritization

This too is linked to the question of days cash on hand. A comprehensive listing of equipment needs would be helpful when planning MHSC's financial future.

Clinic Financial Performance

I too am frustrated with Clinic Financial Performance. I agree with Mr. Kelsey that the BOT "would benefit from Senior Leadership addressing this issue, giving us some insights and possibly some projections and future plans."

Selected Strategic Plan Items

I agree with these observations. To the extent goals are set and action is taken on other sections of the Finance Position Paper, my view is that this should be done as part of the strategic plan.

Board Budget Workshops with Senior Leadership

If senior leadership would find budget workshops to be helpful, then budget workshops should take place. Putting together a budget takes a lot of hard work. I wouldn't want workshops to increase the work load unless the workshops result in a better budget, and I don't know enough about the budget process to make this cost/benefit decision.

Board Procedure: Board Agenda

Board of Trustees Orientation and Resource Handbook

Category: Governance Committee

Title: Board Agenda

Original adoption:

Revision:

1. **Amending the agenda.** It is recommended that the only permissible action be changing the order of the agenda items. However, in the case of a true emergency, agenda items may be added or deleted.
2. **Agenda items added by individual board members.**
 - a. If an individual board member has an item that s/he wishes to add, either for discussion or action, it is recommended that the person send the item to the CEO and the Board chair for inclusion in that month's agenda. The item will be placed on the agenda and discussed at that month's meeting, but no action will be taken. Any action to be taken will occur at the following month, as part of Old Business.
 - b. The alternative method is for the individual to bring the agenda item to the appropriate board committee. The committee, then, as part of its routine business recommends that the item come before the board for consideration. Once placed on the board agenda, the item will be discussed at that month's meeting, and any action to be taken will occur on at the following month, as part of Old Business.

Board Procedure: E-mail Communication

Board of Trustees Orientation and Resource Handbook

Category: Governance Committee

Title: E-mail Communication

Original adoption:

Revision:

Procedure for communicating with each other by email regarding the Board's business. Individual comments regarding any agenda item, including those placed by individual board members, are to be emailed to the CEO's administrative assistant. So that everyone, including the public can see them, the comments will be included in that month's board meeting packet.

DRAFT

MHSC Quality Dashboard

Background. The MHSC Quality Dashboard is a monthly snapshot of measures that reflect the quality and safety of patient care at MHSC. Metrics include internal goals and opportunities for improvement that have been identified by teams and outlined in the annual Quality Assessment Performance Improvement Plan (QAPI). Other metrics are defined, prioritized and benchmarked by the Centers for Medicare and Medicaid Services (CMS), The Joint Commission (TJC) and/or MIDAS comparative databases. Measures may be added, changed or re-evaluated annually, at a minimum, to best represent outcomes and goals. The data is used by the hospital to identify improvement opportunities, evaluate trends, and assist in moving MSHC towards strategic initiatives. Data is represented monthly, with the most recent, completed data. There is a lag in completion of data as teams have to manually abstract and collect the information. While a lag in the data exists on the dashboard, internal teams are still monitoring and responding to deviations from expected as occurrences arise in real time. The current dashboard reflects elements of CMS' Star Rating program as part of the strategic plan.

CMS Star Ratings- Overall Hospital

Mortality. No deviations from expected. Mortality rates similar to comparison benchmarks.

Readmission. Pneumonia readmission rate at 16.67% in August, up from 12.5% July. The 16.67% readmission reflects 1 patient readmission for the month of August.

Safety of Care. Refer to safety report.

Infection prevention. No data reported for August, still in progress.

Efficient Use of Medical Imaging. Case review from OP-10 reveals opportunities for improvement. A goal has been set and added to the QAPI work plan. Data criteria built into MIDAS to capture concurrent performance as of October. Performance of measure added to physician peer review process for review of cases when triggered as of October.

Timeliness of Care. Median time for ED arrival to ED departure for admitted patients was 310 minutes in August, down from 331 minutes in July. Current goal is to be under 250 minutes. Average composite time for past six months is 312 minutes. Median time from admit decision time to departure was 131 minutes in August, trending down from 145.9 minutes in July and 167.5 minutes in June. MHSC goal is 75 minutes. Interventions for improvement include: Patient feedback surveys started 7/10/18 to provide sample of patient perspective feedback in real time. Bedside hand-off and report began 9/10/2018 between ED and Medical floor transfers. ED and inpatient teams working through cycles of change and addressing barriers in new hand-off process. LEAN process implementation planned for future, pending initiation of contract for LEAN education.

Median time from ED arrival to ED departure for discharged patients at 155 minutes in August, down from 156 minutes in July. MHSC goal is 100 minutes.

Median time to ECG at 9 minutes in August, compared to 9 minutes in July. MHSC goal is 7 minutes or less. Work team in place. Bedside triage taking place. Testing use of walkie talkie devices as of October to expedite communicate necessity of immediate EKG upon patient arrival when indicated.

Effectiveness of Care. Influenza vaccine coverage among healthcare personnel at 75% for last flu season, with MHSC goal of 85%. Hospital newsletter sent out in September to begin preparation and heighten awareness of importance. Employee Health nurse actively rounding and performing vaccinations for employees.

Colonoscopy follow-up for average risk patients at 66.67% in August, down from 75% in July. August rate reflective of 2 cases not having appropriate documentation out of 3 for the month. Physician has been notified of documentation necessity and provided performance feedback. Data shared with surgery department. Indicator placed on medical staff peer review list for review.

QUALITY ASSESSMENT PERFORMANCE IMPROVEMENT (QAPI)

Opportunities for improvement.

Meaningful Use. Informatics has identified a 90-day reporting period where data meets benchmarks for successful reporting. Reporting to begin in February 2019 for 2018 performance.

Patient Experience. Refer to HCAHPS report.



**Quality Committee Meeting
Memorial Hospital of Sweetwater County
October 17, 2018**

Present: Clayton Radakovich, Suzan Campbell, Dr. Barbara Sowada, Marty Kelsey, Irene Richardson, Kari Quickenden, Dr. Cielette Karn, Dr. Banu Symington, Dr. Kristy Nielson, Leslie Taylor, Tami Love, Amanda Molski

Guest: Richard Mathey

Absent/Excused:

Chair: Dr. Barbara Sowada

Call to Order

Dr. Sowada called the meeting to order at 8:00 am.

Minutes

The September 19, 2018 Quality Meeting Minutes were presented. Mr. Kelsey moved to approve, Dr. Symington seconded. Motion carried.

Governance Quality Engagement Diagnostic

Dr. Sowada opened the conversation on section 4 of the Governance Quality Engagement Diagnostic – “Change the environment, policies, and culture”. Mr. Radakovich noted that with the current strategic plan we have moved away from #37, where we overwhelm staff with MANY little projects. Ms. Richardson referred to #42 and suggested that the Quality Report be moved ahead of the Finance report in the Agenda for Board meetings; we should show that Quality is important. Finance is also important, but Quality should drive us.

Education: The Board’s Role in Safety

Dr. Sowada presented a PowerPoint on “The Board’s Role in Safety”. (see attached)

Next Meeting

Robin Fife noted that the next meeting falls on the day before Thanksgiving. Committee determined changing to the week before would be preferred. Ms. Fife will check classroom availability and notify the Committee.

Meeting Adjourned The meeting adjourned at 10:00 am

Next Meeting November 21, 2018 at 0800 am, CR 1 & 2

Respectfully Submitted,

Robin Fife, Recording Secretary

Human Resources Committee Meeting
Monday, October 15th, 2018
3:00 PM – MOB Conference Room
AGENDA

Old Business

- I. Approval of Minutes
- II. Turnover Report - Amber
- III. Open Positions –Amy
- IV. New TPA – Insurance update for January 2019 – (Documents will be made available at the meeting) Amber/Brandon
- V. Employee Policies Update – Active Corrective Action policy/ Marty's notes for consideration.

New Business

- I. Nursing Services PRN Status Policy – Kristy Nielson
- II. Employee Compensation and Classification Plan – By request/Marty
- III. Determination of Next Meeting Date

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
Human Resources Committee Meeting
Monday, September 10, 2018
MOB Conference Room

TRUSTEE MEMBER(S) PRESENT: Ed Tardoni

MEMBERS PRESENT: Irene Richardson, Amber Fisk, Suzan Campbell

GUESTS: Tami Love, Kari Quickenden, Amy Lucy, Brandon McAninch

MEMBERS ABSENT: Marty Kelsey

Amber Fisk called meeting to order at 3:08 pm.

OLD BUSINESS

Approval of Minutes

Amber made a motion to approve the minutes from September's meeting. Suzan Campbell seconded. All ayes, none opposed. Motion carried.

Turnover

Amber shared that from January 1st thru August 31st there have been 23 resignations, 19 discharges, 10 moved out of area, 8 were PRN employees that were termed for either not working or not completing education and 5 left for other employment.

Irene Richardson commented on total employees being up to 512. She asked if it was due to hiring permanent MHSC employees versus using travelers. Discussion followed and it was concluded that was part of the reason as well as MHSC having more PRN employees.

Amber shared that the rolling calendar shows turnover at 27%, national average is 26% and healthcare is 27%. Ed Tardoni asked what turnover was as a cost to MHSC and suggested looking at it as so. Irene shared that it seems beneficial to invest in retention; discussion has taken place in regards to this at other meetings. Amber stated data could be put together to determine cost of turnover.

Open Positions

Amy shared the following:

- 7 open positions
- 3 are full-time
- 2 are part-time
- 2 PRN

Amber shared she had offered for a RN in Emergency with no return call so she may repost.

Page 64 of 305

Employee Policies Update

Amber shared that there were none in packets this time. Suzan shared that she has some questions and items to work through on the Weapons Policy as well as add drug testing into the Substance Abuse Policy.

HR Committee Charter-Committee Purpose Discussion

Ed shared that it only takes three Board Members to approve something and that it is about management versus governance. The hospital has more voting member than the Board does; it is about what the hospital wants, not the Board. He stated we need to use the committee as a working tool, vote during the Committee meeting then send to the Board for comment or for a vote. Ed shared some items he wanted to discuss:

1. Utilize voting in the committee
2. Lock down the current Board approved versions (by vote)
3. Get consensus (and a vote) that all revision inputs be collected on a separate proposed revision record.
4. No copies to be issued outside of the committee until approved by vote of the committee
5. Get a formal committee vote on any and all proposed revisions
6. Get a committee vote on a version to be presented to the Board with a do pass recommendation
7. Hold a special committee meeting (if necessary) in order to get the recommended version out to the Board before the next Board meeting.

All seven items were discussed amongst the committee. The following was determined:

1. The Committee will use voting in the committee
2. Scratched
3. Maintain separate proposed revision records
4. The formal committee will vote on all revisions-keep internal
5. Committee will vote for proposed revisions
6. Present to Board with do pass recommendations
7. Hold special committee meetings if and when necessary

Amber made a motion to pass the proposed committee purpose items as determined. Irene seconded. All ayes, none opposed. Motion carried.

NEW BUSINESS

No new business

Next Meeting

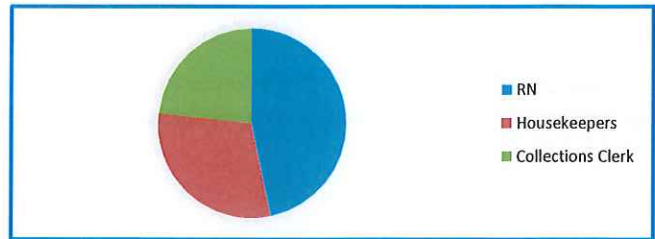
Monday, October 15th 2018 at 3:00 pm.

Meeting Adjourned.

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
2018 Overall Turnover Data (As of 09/30/2018)

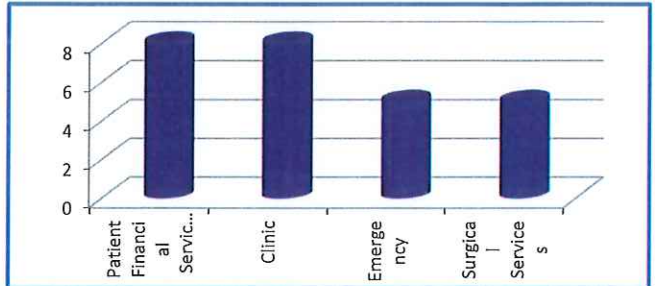
Top Position(s) / Turnover

	2018	%
RN	14	12%
Housekeepers	9	35%
Collections Clerk	7	78%



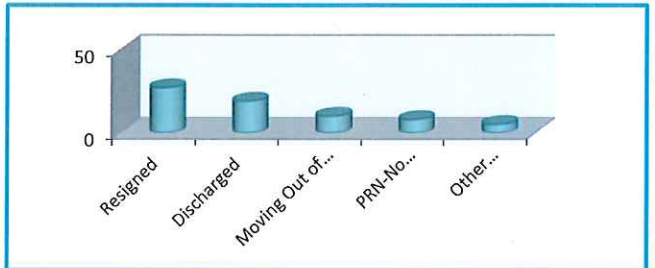
Top Department(s) / Turnover

	2018	%
Housekeeping	9	11%
Patient Financial Services	8	10%
Clinic	8	10%
Emergency	5	6%
Surgical Services	5	6%



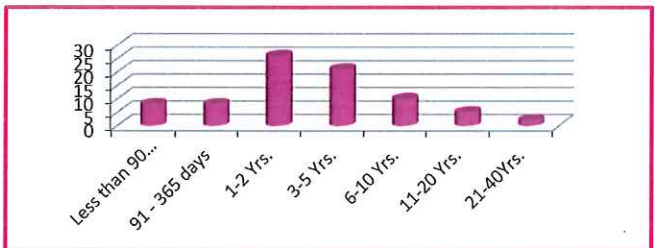
Top 5 Reasons / Turnover

	2018	%
Resigned	27	34%
Discharged	19	24%
Moving Out of Area/Relocation	10	13%
PRN-No Available Work	8	10%
Other Employment	5	6%



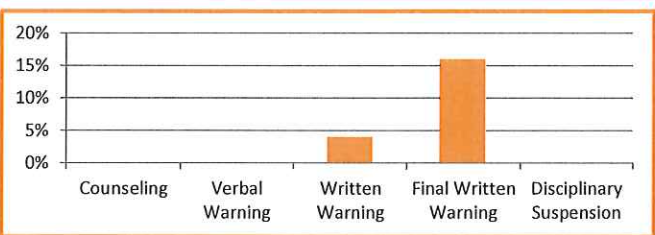
Length of Service

	2018	%
Less than 90 days	8	10%
91 - 365 days	8	10%
1-2 Yrs.	26	33%
3-5 Yrs.	21	26%
6-10 Yrs.	10	13%
11-20 Yrs.	5	6%
21-40Yrs.	2	3%
Total	80	



Corrective Action

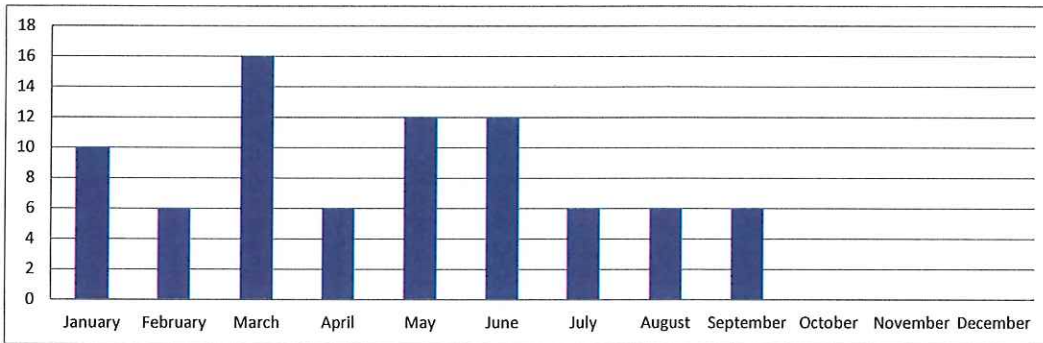
Counseling	
Verbal Warning	
Written Warning	4%
Final Written Warning	16%
Disciplinary Suspension	



2018 Separations - Hospital Wide

	Separations	New Employees	Total Employees
			502 505
January	10	7	501
February	6	5	494
March	16	9	500
April	6	16	510
May	12	13	511
June	12	10	509
July	6	9	512
August	6	6	512
September	6	12	518
October			
November			
December			
Total	80		

16%



Separations

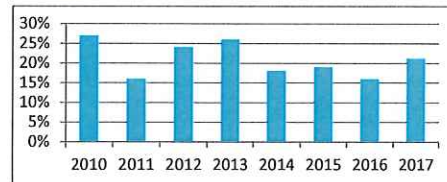
Involuntary	19
Voluntary	61
Total	80

Classifications

RN	13
Classified	67
Total	80

Overall Turnover

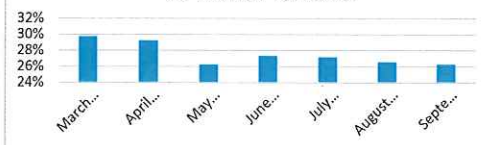
2009	96	25%
2010	98	27%
2011	79	16%
2012	104	24%
2013	113	26%
2014	88	18%
2015	97	19%
2016	86	16%
2017	116	21%
2018	80	16%



Rolling 12

	Separations	%
March 17-18	147	30%
April 17-18	146	29%
May 17-18	134	26%
June 17-18	139	27%
July 17-18	139	27%
August 17-18	136	27%
September 17-18	136	26%

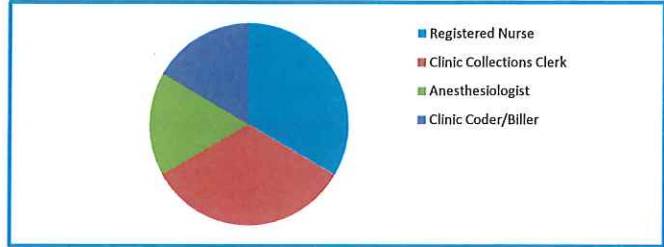
12 Month Turnover



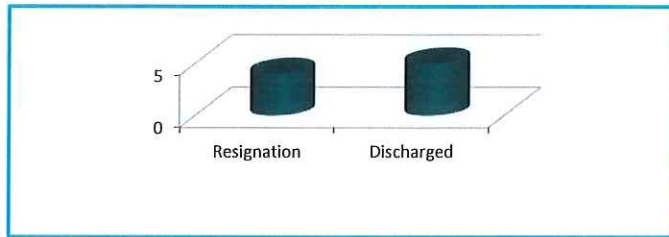
MEMORIAL HOSPITAL OF SWEETWATER COUNTY - CLINIC DATA

2018 Clinic Turnover Data (as of 09/30/2018)

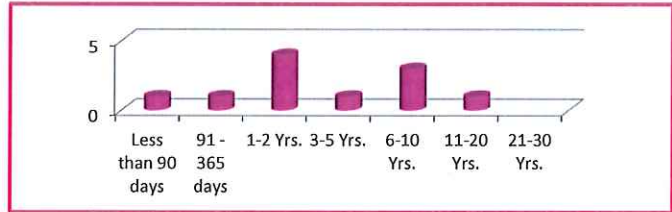
Top Position(s) / Turnover	2018	%
Registered Nurse	2	35%
Clinic Collections Clerk	2	33%
Anesthesiologist	1	33%
Clinic Coder/Biller	1	33%



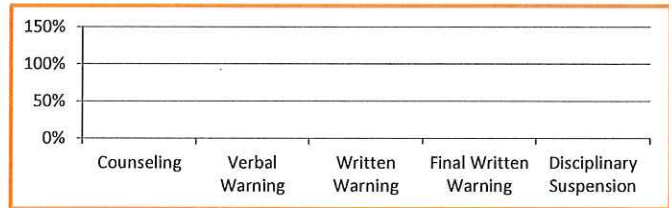
Top Reason(s) / Turnover	2018	%
Resignation	4	36%
Discharged	5	45%



Length of Service	2018	%
Less than 90 days	1	9%
91 - 365 days	1	9%
1-2 Yrs.	4	36%
3-5 Yrs.	1	9%
6-10 Yrs.	3	9%
11-20 Yrs.	1	9%
21-30 Yrs.	1	9%
Total	11	

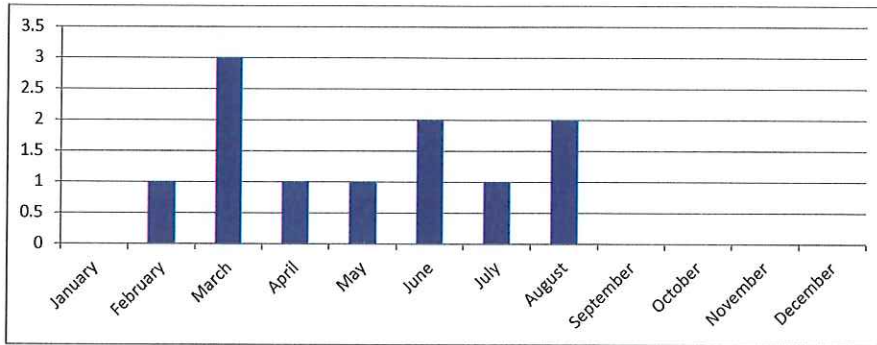


Corrective Action
Counseling
Verbal Warning
Written Warning
Final Written Warning
Disciplinary Suspension



2018 Separations - Clinic

	Separations	New Employees	Total Employees	
January	0	0	111	111
February	1	0	110	
March	3	0	107	
April	1	1	107	
May	1	2	108	
June	2	1	107	
July	1	0	106	
August	2	0	104	
September				
October				
November				
December				
Total	11			10%



Separations

Involuntary	5
Voluntary	6
Total	11

Overall Turnover

2014	20	26%
2015	11	18%
2016	16	14%
2017	26	23%
2018	11	10%

Classifications

RN	1
Classified	10
Total	11





Job Postings as of 10/05/2018



Position	Req #	Position Status	Shift: Days / Hours	Position Qualifications
<u>COMMUNICATIONS</u> PBX Operator/Receptionist	2176	Regular Full-Time	Variable	40 WPM Required - High School diploma or equivalent and/or technical school with courses in related field required.
<u>EMERGENCY</u> Registered Nurse - Internal Only	2177	Regular Full-Time	Nights	Current Wyoming Nursing License and hold a current BLS certification.
<u>MEDICAL OFFICE BUILDING/CLINIC</u> Registered Nurse	2151	Regular Full-Time	Days	Current Wyoming Nursing License and hold a current BLS certification.
<u>MED/SURG</u> C.N.A.	2175	Regular Full-Time	Variable	High School diploma or equivalent required. Completion of Nursing Assistant Program.
<u>NUTRITION SERVICES</u> Cook	2141	Regular Full-Time	Variable	High School diploma or equivalent required.
Dietary Aide	2142	Regular Part-Time	Variable	High School diploma or equivalent preferred.
<u>OB</u> Registered Nurse	2168	Regular Full-Time	Nights	Current Wyoming Nursing License and hold a current BLS certification.
<u>REHABILITATION</u> Speech Therapist	1447	PRN	Days	Masters Degree in Speech Pathology. Certificate of Clinical Competence from American Speech Language and Hearing Association or presently completing clinical fellowship year. Wyoming License in Speech Pathology. BLS certification.
Occupational Therapist	1997	PRN	Days	Minimum of Bachelor's degree in Occupational Therapy. Master's degree in Occupational Therapy preferred. State of Wyoming Occupational Therapist License required. BLS certification.
Physical Therapist	2173	PRN	Days	Minimum of Bachelor's degree in Physical Therapy. Master's degree in Physical Therapy preferred. State of Wyoming Physical Therapist License required. Must have a current BLS certification.



**Memorial
Hospital**
OF SWEETWATER COUNTY

Approved: 07/2018
Review Due: 07/2021
Policy Area: *Employee Policies*
Reg. Standard:

EMPLOYEE POLICIES - EMPLOYEE CORRECTIVE ACTION

Purpose

Memorial Hospital of Sweetwater County (MHSC) has high performance expectations because we strongly believe that everyone benefits when we all work together and conduct ourselves in a manner that mutually reflects the best interests of co-workers and the hospital. It is the philosophy of Memorial Hospital of Sweetwater County to take corrective action measures when needed for the purpose of correcting areas of performance deficiency or to deal with violations of policies and work rules. The purpose of corrective action is to both correct the situation and to avoid repetition.

Policy

- I. The employee will be informed if corrective action is necessary as soon as possible after any performance problem has been identified.
 - A. The employee's leader will discuss the situation with the employee, explaining the policy and the necessity of corrective action to avoid other disciplinary actions.
 - B. Although one or more corrective action measure may be taken in connection with a particular performance problem, **no formal order will be followed**. Corrective action may include any of a variety of actions depending on the circumstances and severity of the particular situation.
 - C. Corrective actions may be taken at the discretion of management and include **any** of the following in any order:
 1. Counseling with employee, which will be confirmed in writing by the employee's leader and placed in the employee's personnel file.
 2. Verbal warning, which will be placed in the employee's file.
 3. Written warning, which will be placed in the employee's file.
 4. Final written warning, which will be placed in the employee's file.
 5. Disciplinary suspension, which will be confirmed in writing and placed in the employee's personnel file. Suspension is normally used to remove an employee from hospital premises during an investigation or as a disciplinary action. This may be paid or unpaid.
 6. Termination, which will be documented and placed in the employee's personnel file.

D. The corrective action process will not always commence with a counseling or include every step. **The above options are not to be seen as a process in which one step always follows another.**

1. Some acts, particularly those that are intentional or serious, warrant more severe action on the first or subsequent offense.
2. An employee at a written warning or higher may be ineligible for pay increases and any additional compensation.
3. Consideration will be given to the seriousness of the offense, your intent and motivation to change the performance, and the environment in which the offense took place.

Link to Form # 802452 Counseling and Corrective Action Form <http://sweetwatermemorial.policystat.com/policy/2632825/latest/>

Approved: Board 6.6.18

Attachments:

No Attachments

Approval Signatures

Approver	Date
Kristy Nielson: Chief Nursing Officer	07/2018
Irene Richardson: CEO	07/2018
Amber Fisk: HR Director	06/2018
Suzan Campbell: In House Legal Counsel [RF]	06/2018

Applicability

Memorial Hospital of Sweetwater County

Amber Fisk

From: Marty Kelsey
Sent: Friday, October 05, 2018 10:05 AM
To: Suzan Campbell
Cc: EDWARD F TARDONI Owner; Irene Richardson; Kari Quickenden; Kristy Nielson; Tami Love; Amber Fisk
Subject: Re: Corrective Action policy and grievance/dispute resolution

All, below are my comments on the **Employee Corrective Action** policy provided us by Suzan in Word format. It is my understanding that the Board approved this policy in June, 2018. (Policy Stat #5095637)

I.C.1

Add the word "the" following the words "Counseling with".

I.C.5

Add the words "paid or unpaid" after suspension. (First part of sentence). Remove remaining two sentences. Removing an employee from hospital premises for the purpose of investigating possible wrongdoing should not be enumerated as a possible corrective action. There may be no discipline needed at all...the employee may be innocent of any wrongdoing. Making reference to this type of action is OK...but in my opinion should be made elsewhere in our policies.

I.D.

Remove the article "a" following the words "commence with".

I.D.2

Replace this sentence with the following sentence:

An employee who has been given a written warning or a more severe corrective action, may be ineligible for pay increases or any additional compensation for a period of time as determined by the Hospital's CEO.

Thanks!

Marty

Sent from my iPad

On Oct 2, 2018, at 2:14 PM, Suzan Campbell <sucampbell@sweetwatermemorial.com> wrote:

Good afternoon, Ed requested that staff move forward with the Corrective Action and Grievance/Conflict Resolution at the October 15 HR Committee meeting. Attached please find:

- 1) Employee Policies-Employee Corrective Action I took the current active Employee Policy-Corrective Action- off of PolicyStat, turned it into a Word document and show, with strike out and red-line, the changes that were made to the policy. This policy was initially given to the board members May 24 and was approved, subject to changes discussed at the meeting, at the June board meeting. (FYI- track changes to an Active Policy can't be done in PolicyStat as that would override the current policy and create a new draft policy which is why I tracked changes in a Word doc).
- 2) Complaint Procedure (Grievances) 1983 and Dispute Resolution 2006. I recently learned that the County Clerk's office had copies of MHSC documents that went through the rule-making process. I requested the records/documents from the SW County Clerk's office and received over 280 pages. In the documents was the attached Complaint Procedure (Grievances) date stamped July 14, 1983. Also attached is the employee's Dispute Resolution process. This was

part of the 2006 MHSC Employee Handbook filed with the County Clerk's office. Staff has not revised the draft Conflict Resolution/Grievance policies previously presented to the HR committee for the October 15th meeting. We could but it would be much cleaner if we could deal with these 2 polices/processes first before we add another one to the mix. Please feel free to email or call me with any questions you may have. Thanks, Suzan

Suzan Campbell, JD

WSB # 5-2644

In House Counsel MHSC

1200 College Drive

Rock Springs, WY 82901

307-352-8162

sucampbell@sweetwatermemorial.com

<dispute resolution from 2006.pdf>

<scanned grievance policy from 1983.pdf>

<EMPLOYEE POLICIES - EMPLOYEE CORRECTIVE ACTION with redline and strike out.docx>



Approved: N/A
 Review Due: 3 years after approval
 Policy Area: Human Resources
 Reg. Standard:

Nursing Services PRN Status

STATEMENT OF PURPOSE

- To define Nursing Services PRN status at the Memorial Hospital of Sweetwater County (MHSC).
- To outline the expectations of PRN status in the Nursing Services Department.
- To differentiate between PRN, Cross-Trained and Float Nursing Services status.
- To outline the responsibilities of those involved with Nursing Staff Services employees who are PRN status.

DEFINITIONS

I. PRN Nursing Services employee:

- A. Is one who fulfills hours in the Nursing Services Department on an 'as needed' basis. 'PRN' is the abbreviation meaning "when necessary", which is from the Latin "pro re nata" for an occasion that has arisen, as circumstances require, and/or as needed.
- B. Is one in which the employee chooses to work the minimum acceptable number of PRN hours to maintain competency in any given department(s) or patient care area(s).
- C. Does not accrue PTO time or receive employee benefits.
- D. May collect overtime and On-Call time per MHSC policy.
- E. May be placed on Low-Census, Low-Census On-Call and On-Call status per MHSC policy. Call-back status is not applicable in the PRN status option given the definition and purpose of PRN status.

II. Cross-Trained Nursing Services employee (see also MHSC 'Cross-Training Program' policy on PolicyStat):

- A. A Nursing Services employee of the MHSC who maintains competency in more than one department within the MHSC such that the employee can be considered staff in the department; an employee who is not just 'helping out' but instead can take assignments typical of permanent members of those departments.
- B. A situation in which a Nursing Services employee has specialized nursing skill sets that are recognized and used in prescribed nursing environments at a pre-scheduled time.

III. Float Nursing Services employee:

- A. Employee who leaves his or her 'home' department within the MHSC to help out in another

department within the organization for a partial or full shift to ensure safe staffing and optimal patient care.

- B. Typically completes task but accepts patient assignments if the situation and level of competency allows. In such cases it is imperative that the person in authority in the department in which the employee is floated make patient assignments according to the float employee's scope of practice and level of competence.
- C. Is responsible and accountable for accepting an assignment that is within his or her scope of practice and level of clinical competence (see Wyoming State Board of Nursing Scope of Practice).

IV. **Competencies:** Knowledge, skills, abilities and behaviors needed to effectively and safely perform in one's role.

TEXT

I. Requirements for Nursing Services PRN Status

- A. Minimum acceptable number of 144 hours per calendar year from January 1 - December 31 that can be accumulated in a variety of ways. Does not require a specific number of hours per month or quarter but instead requires that the total for the calendar year from January 1 - December 31 be a minimum of 144 hours.
- B. The PRN Nursing Services employee will have a 'home base' for the purpose of tracking time worked, competency assessment and performance appraisals.
- C. Types of activities that count toward the 144 total hours in the January 1 - December 31 calendar year:
 - 1. Time in direct patient care/interaction. The PRN employee will clock in and out of the department in which patient care/interaction is occurring.
 - 2. Time completing required education. The PRN employee will clock in and out/record time in the PRN employee's home department.
 - 3. Time teaching courses for MHSC employees, such as BLS, ACLS, PALS, NRP and others requested by the MHSC for its employees. The PRN employee will clock in and out using the Education Department pay code.
 - 4. Time teaching courses for the community, such as BLS, advance directives at senior centers, childbirth classes and other such classes, in-services or presentations and other similar activities as a representative of the MHSC. The PRN employee will clock in and out of the department that owns the particular content area.
 - 5. Time teaching and assisting in new hire orientation and unit-specific orientation. The PRN employee will clock in and out of the Education Department when teaching new hire orientation. The PRN employee will clock in and out of the specific department in which he or she is teaching and assisting in a unit-specific orientation.
 - 6. Time when on: a) Low Census, or b) Low Census On-Call status. See the Low Census, On-Call Rotation and Urgent Shift Coverage policy on PolicyStat.
 - 7. Time attending unit staff meetings. The PRN employee will clock in and out of the specific department having the staff meeting.
 - 8. Time attending MHSC Town Halls or other type of employee forums. The PRN employee will clock in and out of his or her home department.

Page 76 of 305

9. Time working on or off-site on projects assigned by a member of the MHSC Leadership Team. The PRN employee will clock in and out of the department/record hours worked of the MHSC leader who assigned the project. Must have prior approval by a member of the MHSC Leadership Team.
10. Time spent in committee work at the MHSC. The PRN employee will clock in and out of the department associated with the particular committee. Must have prior approval by a member of the MHSC Leadership Team.

II. **Criteria for Cross-Trained Staff and Float Staff:** See 'Cross-Training Program' policy on PolicyStat.

III. **Responsibilities of the PRN Employee:**

- A. Keep track of personal PRN hours such that a minimum of 144 hours is obtained in the January 1 - December 31 calendar year.
- B. Clock in and out of the MHSC timekeeping system appropriately and accurately.
- C. Independently maintain competencies in any and all nursing units worked or anticipated to work.
- D. Demonstrate professional accountability in accepting patient assignments appropriate to scope of practice, skill level and experience (see Wyoming State Board of Nursing Scope of Practice).
- E. Accept accountability for independently signing up for full or partial shifts, completing required courses and assignments, fulfilling scheduled hours, completing competencies, and obtaining prior approval from the appropriate member of MHSC Leadership and other expectations of a professional nurse PRN employee at the MHSC.

IV. **Responsibilities of Patient Care Area Nursing Leaders**

- A. Approve the PRN employee's time card in the MHSC timekeeping system.
- B. Monitor the PRN employee's number of acceptable work hours.
- C. Review, approve and monitor the PRN employee's competencies, including Annual Competencies and other competencies as these arise.
- D. Collaborate with the PRN employee in scheduling work time.
- E. Ensure the PRN employee's patient assignments are appropriate to the PRN employee's competency in the specific patient care area.
- F. Collaborate with the PRN employee and the Education Department personnel to ensure the PRN employee completes any and all appropriate unit-specific Orientation Plans.
- G. Include PRN staff and hours in the budget and productivity models.
- H. Conduct the PRN employee's annual performance appraisal.
 - I. Evaluate the effectiveness of PRN status in meeting patient care and departmental needs.

V. **Responsibilities of Education Department Personnel**

- A. Collaborate with the PRN employee, Clinical Coordinators and Nursing Directors to ensure the PRN employee completes any and all appropriate unit-specific Orientation Plans.
- B. Assist the PRN employee in completion of appropriate and assigned competencies.

VI. **Responsibilities of the Chief Nursing Officer**

- A. Review and monitor all Nursing Services budgets for the financial impact of PRN status.
- B. Evaluate the effectiveness of PRN status in meeting national standards for safe patient care and

adhering to the mission, vision and values of the MHSC as an organization.

Approvals: HR Committee

REFERENCES

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- Wyoming State Board of Nursing. (2018). *Chapter 3: Standard of nursing practice*. Retrieved from <https://nursing-online.state.wy.us/Default.aspx?page=24>

Attachments:

No Attachments

Approval Signatures

Approver	Date
Kristy Nielson: Chief Nursing Officer	pending

Applicability

Memorial Hospital of Sweetwater County

Page 78 of 305

**MEMORIAL HOSPITAL OF SWEETWATER COUNTY
FINANCE & AUDIT COMMITTEE
CAPITAL EXPENDITURE REQUESTS**

MONDAY ~ OCTOBER 29, 2018

		YTD CAPITAL APPROVED	GRANT OR DONATION REIMBURSED	2019 APPROVED BUDGET	REMAINING YTD BALANCE
AS OF SEPTEMBER 2018		843,567.00	-	3,000,000.00	2,156,433.00

CAPITAL REQUEST #	REQUESTED ITEM/REQUESTOR	CAPITAL AMOUNT TO BE APPROVED	MAINTENANCE SUPPORT COSTS	FREIGHT COSTS	TOTAL AMOUNT	COMMENTS
FY19-14	DR Bridge Program - Enterprise CR Tracie Soller	27,891.00	-	-	27,891.00	
FY19-15	Sterjs V-Pro Max sterilizer Alisha Mackie	111,829.00		1,943.96	113,772.96	
FY19-16	Healthcare Source HT Amber Fisk	34,025.00	60,632.00	-	94,657.00	*includes \$10,000 interface fee
TOTAL AMOUNT REQUESTED		173,745.00	60,632.00	1,943.96	236,320.96	

Assigned: FY 19-14

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: Medical Imaging - General Rad **Submitted by:** Tracie Soller **Date:** 3/8/2018

Provide a detailed description of the capital expenditure requested:

DR Bridge Program Enterprise CR. - Nano and Xpress- Program designed for facilities with older Konica Minolta CR systems running Windows XP that are not yet ready to switch to Digital Radiography but want to move to a more secure platform. Solves the windows security and stability concern and brings the equipment one step closer to DR. Transitions an earlier model control Station software and computer to the latest DR-ready software and hardware platforms as well as re-establishing security by moving from XP to Windows 10.

Preferred Vendor: Konica Minolta

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

1. Renovation	\$
2. Equipment	\$ 27891.00
3. Installation	\$
4. Shipping	\$
5. Accessories	\$
6. Training	\$
7. Travel costs	\$
8. Other e.g. interfaces	\$
Total Costs (add 1-8)	\$ 27891.00

Does the requested item:

Require annual contract renewal? YES NO

Fit into existing space? YES NO Explain:

Attach to a new service? YES NO Explain:

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

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

Annualized impact on operations (if applicable):

Increases/Decreases

Projected Annual Procedures (NEW not existing)

Budgeted Item:

YES NO

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 \$

of bids obtained? 1

Copies and/or Summary attached.

If no other bids obtained, reason:

This is an upgrade to existing equipment. No other vendor is able to perform this upgrade.

Review and Approvals

Submitted by: Verified enough Capital to purchase

Department Leader YES NO

Vice President of Operations YES NO

Chief Financial Officer YES NO

Chief Executive Officer YES NO

Board of Trustees Representative YES NO

Kam Quickandri 10-23-18

[Signature]

OTHER CONSIDERATIONS

Our CR readers are still operating on the XP windows platform. This platform is no longer supported.

The DR Bridge Program is designed for facilities with older Konica Minolta CR systems running Windows XP that are not yet ready to switch to Digital Radiography but want to move to a more secure platform. This smart investment solves the Windows security and stability concern while taking the customer one step closer to DR.

The DR Bridge Program transitions an earlier model Control Station software and computer to the latest DR-ready CS-7 software and hardware platform.

- Transition to an all new CS-7 Control Station - performed any time within the contract year. Includes new 23" multi-touch monitor.
- Re-establish security by moving from Windows XP to Windows 10
- Benefit from the latest and greatest platform software version and features and available options
- Completely protects the CR system for one year with Blue Moon Select coverage.

The DR Bridge comes with one year of Blue Moon Select for CR which includes:

*

Cassette Repair Benefit - no fault cassette & plate repair with copay

Konica Minolta will repair up to 4 cassettes for Xpress/IQue CR annually. \$150 co-pay per cassette applies. This feature excludes repairs for specialty cassettes (oncology, mammography, stitching, etc.).

Software Upgrades

Always receive the latest software version to keep up with system improvements and added features. Access to software upgrades means having the latest and greatest features and functionality in order to help maximize workflow efficiency and diagnostic capabilities. Includes installation. Optional software features may require additional purchase.

Tracie Soller Digitally signed by Tracie Soller
Date: 2018.03.08 13:12:58 -07'00'

Submitted by: Signature

3/8/2018

Date



**DIGITAL PRODUCT
SALES QUOTATION
Number : 860_76**

Revision E
08/17/2018

Presented To

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

1200 COLLEGE DRIVE
ROCK SPRINGS, WY 82901

ATTN: Nicole Manus
GPO: VIZIENT
MEMBER ID: 2872962

Presented By

Andrew Wells

Territory Manager

KONICA MINOLTA HEALTHCARE AMERICAS, INC.

411 NEWARK POMPTON TURNPIKE

WAYNE, NJ 07470

303-514-0003

andrew.wells@KONICAMINOLTA.COM



**DIGITAL PRODUCT
SALES QUOTATION
Number : 860_76**

Revision E
08/17/2018

Presented to:

MEM. HOSP.L OF SWEETWATER CO.
1200 COLLEGE DRIVE
ROCK SPRINGS, WY 82901

Presented by:

KONICA MINOLTA HEALTHCARE AMERICAS, INC.
411 NEWARK POMPTON TURNPIKE
WAYNE, NJ 07470

Contact:

GPO : Vizient
Member ID: 2872962

Contact:

Andrew Wells
Territory Manager
303-514-0003
Scott.Yarde@konicaminolta.com

This Sales Quotation is valid for 30 days from the above date

CS-7 for Nano CR s/n 090203792					
List Price					
Line	Qty	Description	Item Code	List Price	Price
1	1	<p>DR Bridge - Nano C,A, or E</p> <p>DR Bridge Program - Enterprise CR The DR Bridge Program is designed for facilities with older Konica Minolta CR systems running Windows XP that are not yet ready to switch to Digital Radiography but want to move to a more secure platform. This smart investment solves the Windows security and stability concern while taking the customer one step closer to DR.</p> <p>The DR Bridge Program transitions an earlier model Control Station software and computer to the latest DR-ready CS-7 software and hardware platform.</p> <ul style="list-style-type: none"> •Transition to an all new CS-7 Control Station - performed any time within the contract year. Includes new 23" multi-touch monitor. •Re-establish security by moving from Windows XP to Windows 10 •Benefit from the latest and greatest platform software version and features and available options •Completely protects the CR system for one year with Blue Moon Select coverage <p>Note: For DR Bridge programs for Nano, Xpress, or IQue installation, applications, and on-site labor throughout the contract year are provided by Konica Minolta unless ordered by Sentinel providers. For Konica Minolta applications, please allow 4-8 weeks for scheduling.</p> <p>Reminder: For all service needs, including technical support and scheduling applications training, please call our Technical Call Center at 800-945-0456.</p>	DRBRIDGE-NANO-CAE	\$14,995.00	\$13,495.50

	<p>The DR Bridge comes with one year of Blue Moon Select for CR which includes:</p> <p>Cassette Repair Benefit - no fault cassette & plate repair with copay Konica Minolta will repair up to 2 cassettes for Nano CR annually. \$150 co-pay per cassette applies. This feature excludes repairs for specialty cassettes (oncology, mammography, stitching, etc.).</p> <p>Software Upgrades Always receive the latest software version to keep up with system improvements and added features. Access to software upgrades means having the latest and greatest features and functionality in order to help maximize workflow efficiency and diagnostic capabilities. Includes installation. Optional software features may require additional purchase.</p> <p>Remote Technical Assistance - network and configuration changes This benefit provides remote assistance when IP addresses or other configuration setting changes are needed. Get simple access to assistance to make a change exactly when it is needed. Take advantage in the latest remote technologies to streamline support. Screen sharing is used in order to better demonstrate operation to users.</p> <p>On-Site Labor, Preventive Maintenance, and Software Updates On-site support from qualified service engineers to perform scheduled preventive maintenance or correct difficult problems. When a problem cannot be solved remotely, on-site coverage continues the support process to get the system working again. Trained engineers take over the troubleshooting so users can get back to patient care. When available, software updates - minor improvements and enhancements - are administered during on-site visits. It is the responsibility of the customer to contact Konica Minolta to schedule preventative maintenance service.</p> <p>Technical Call Center - phone support 24/7 phone support to assist with any operational support or performance anomaly. Whether the day or evening shift, users can get the dependable assistance they need with just a phone call. Phone support is the first step in problem resolution. Most of the time, a phone call is all that is needed to resolve the issue.</p> <p>Parts Coverage Normal wear and tear part exchange/replacement. Provides quick access to replacement parts when an unexpected problem occurs, minimizing downtime. Coverage does not include physical damage due to customer misuse or abuse (defined below).</p> <p>Specific Plan Terms: 1.Blue Moon Select coverage begins at the time order is received. 2.Coverage does not apply when there is physical damage due to customer misuse or abuse.</p> <p>Misuse/Abuse Includes: 1) Failure of Customer to follow the instructions in the appropriate manual for installation operation or maintenance.</p>			
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	<p>2) Failure to follow recommended cleaning protocols within the operation manual.</p> <p>3) Negligent misuse and/or negligent improper handling of such Equipment: Holes, Cracks, Tears, Deep Scratches, are typical indicators of this negligence.</p> <p>4) Repair, alteration, conversion or modification of such Equipment any component thereof, by persons other than trained, authorized, and qualified representatives.</p> <p>5) Man-made or natural disaster, theft, vandalism, neglect, abuse, use other than in accordance with the appropriate instruction manual or for purpose other for which it was designed.</p> <p>6) Component Failures directly attributed to: Power failures or surges, lightning, fire, flood, terrorist incident, actions of third parties or other events outside of the Company's reasonable control.</p> <p>7) Physical, mechanical, electrical, or magnetic stress not expressly contemplated by the appropriate instruction manual.</p> <p>8) Device fluid invasion.</p> <p>9) Use of Equipment by unqualified personnel.</p> <p>10) Serial number removed, defaced or altered from such Equipment.</p>			
Net Investment			\$14,995.00	\$13,495.50

CS-7 for Regius 210 s/n 12020048					
List Price					
Line	Qty	Description	Item Code	List Price	Price
1	1	<p>DR Bridge - Xpress or IQue</p> <p>DR Bridge Program - Enterprise CR The DR Bridge Program is designed for facilities with older Konica Minolta CR systems running Windows XP that are not yet ready to switch to Digital Radiography but want to move to a more secure platform. This smart investment solves the Windows security and stability concern while taking the customer one step closer to DR.</p> <p>The DR Bridge Program transitions an earlier model Control Station software and computer to the latest DR-ready CS-7 software and hardware platform.</p> <ul style="list-style-type: none"> • Transition to an all new CS-7 Control Station - performed any time within the contract year. Includes new 23" multi-touch monitor. • Re-establish security by moving from Windows XP to Windows 10 • Benefit from the latest and greatest platform software version and features and available options • Completely protects the CR system for one year with Blue Moon Select coverage <p>* Note: For DR Bridge programs for Nano, Xpress, or IQue installation, applications, and on-site labor throughout the contract year are provided by Konica Minolta unless ordered by Sentinel providers. For Konica Minolta applications, please allow 4-8 weeks for scheduling. *</p>	DRBRIDGE-XP-IQ	\$15,995.00	\$14,395.50

	<p>Reminder: For all service needs, including technical support and scheduling applications training, please call our Technical Call Center at 800-945-0456.</p> <p>*</p> <p>The DR Bridge comes with one year of Blue Moon Select for CR which includes:</p> <p>*</p> <p>Cassette Repair Benefit - no fault cassette & plate repair with copay Konica Minolta will repair up to 4 cassettes for Xpress/IQue CR annually. \$150 co-pay per cassette applies. This feature excludes repairs for specialty cassettes (oncology, mammography, stitching, etc.).</p> <p>*</p> <p>Software Upgrades Always receive the latest software version to keep up with system improvements and added features. Access to software upgrades means having the latest and greatest features and functionality in order to help maximize workflow efficiency and diagnostic capabilities. Includes installation. Optional software features may require additional purchase.</p> <p>*</p> <p>Remote Technical Assistance - network and configuration changes This benefit provides remote assistance when IP addresses or other configuration setting changes are needed. Get simple access to assistance to make a change exactly when it is needed. Take advantage in the latest remote technologies to streamline support. Screen sharing is used in order to better demonstrate operation to users.</p> <p>*</p> <p>On-Site Labor, Preventive Maintenance, and Software Updates On-site support from qualified service engineers to perform scheduled preventive maintenance or correct difficult problems. When a problem cannot be solved remotely, on-site coverage continues the support process to get the system working again. Trained engineers take over the troubleshooting so users can get back to patient care. When available, software updates - minor improvements and enhancements - are administered during on-site visits. It is the responsibility of the customer to contact Konica Minolta to schedule preventative maintenance service.</p> <p>*</p> <p>Technical Call Center - phone support 24/7 phone support to assist with any operational support or performance anomaly. Whether the day or evening shift, users can get the dependable assistance they need with just a phone call. Phone support is the first step in problem resolution. Most of the time, a phone call is all that is needed to resolve the issue.</p> <p>*</p> <p>Parts Coverage Normal wear and tear part exchange/replacement. Provides quick access to replacement parts when an unexpected problem occurs, minimizing downtime. Coverage does not include physical damage due to customer misuse or abuse (defined below).</p> <p>*</p> <p>Specific Plan Terms: 1.Blue Moon Select coverage begins at the time order is received.</p>			
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	<p>2. Coverage does not apply when there is physical damage due to customer misuse or abuse.</p> <p>*</p> <p>Misuse/Abuse Includes:</p> <p>1) Failure of Customer to follow the instructions in the appropriate manual for installation operation or maintenance.</p> <p>2) Failure to follow recommended cleaning protocols within the operation manual.</p> <p>3) Negligent misuse and/or negligent improper handling of such Equipment: Holes, Cracks, Tears, Deep Scratches, are typical indicators of this negligence.</p> <p>4) Repair, alteration, conversion or modification of such Equipment any component thereof, by persons other than trained, authorized, and qualified representatives.</p> <p>5) Man-made or natural disaster, theft, vandalism, neglect, abuse, use other than in accordance with the appropriate instruction manual or for purpose other for which it was designed.</p> <p>6) Component Failures directly attributed to: Power failures or surges, lightening, fire, flood, terrorist incident, actions of third parties or other events outside of the Company's reasonable control.</p> <p>7) Physical, mechanical, electrical, or magnetic stress not expressly contemplated by the appropriate instruction manual.</p> <p>8) Device fluid invasion.</p> <p>9) Use of Equipment by unqualified personnel.</p> <p>10) Serial number removed, defaced or altered from such Equipment.</p>			
Net Investment			\$15,995.00	\$14,395.50

Amount Due:	(a) Grand Total Net Investment	\$27,891.00
	(b) Plus Applicable Taxes	\$0.00
	(c) Cash Down Payment Required	\$0.00

This Sales Quotation is Subject to the Following Terms:

1. Standard Terms. The following set forth the standard terms and conditions on which Konica Minolta Healthcare Americas, Inc. U.S.A., Inc. ("KMHA") sells products and services (the "Terms"). These Terms may be supplemented by KMHA supplemental terms and conditions, as appropriate, which deal with KMHA services and digital products. These supplemental terms and conditions, when appended hereto, shall be incorporated into and be a part of these Standard Terms and Conditions as if the same document. All KMHA quotations are subject to these Terms. Any additional terms or conditions that may be agreed to on the face of a quotation, proposal or purchase agreement, provided that such document has been signed or initialed by a duly authorized officer of KMHA, shall also be subject to these Terms. These Terms and any other documents or supplemental terms and conditions shall be collectively referred to as the "Agreement." In the case of any conflict between these Terms and any other document properly constituting part of the Agreement, the terms on such other document shall control.

2. Prices. Unless otherwise stated in writing by KMHA, all prices quoted are exclusive of transportation charges, taxes, and insurance. Typographical errors are subject to correction by KMHA. Prices quoted are for the products specified only. UNLESS OTHERWISE SPECIFIED IN WRITING, ALL QUOTATIONS ARE FIRM FOR A PERIOD OF THIRTY (30) DAYS, EXPIRE THIRTY (30) DAYS AFTER THE DATE THEREOF, AND CONSTITUTE OFFERS. Budgetary quotations and estimates are provided for preliminary information only and

shall not constitute offers, or impose any responsibility or liability upon KMHA of any kind or nature whatsoever.

3. Invoices, Payment, and Taxes.

(a) Invoices. KMHA shall render an invoice to Customer: (1) for the Purchase Price set forth in the quotation or proposal upon shipment of the Products to Customer. Typographical errors shall be subject to correction by KMHA.

(b) Payment Terms. (c) Taxes. All prices quoted by KMHA shall be exclusive of all taxes and duties, including without limitation sales, use, value added and other taxes, duties or levies on transactions made under the Agreement. Customer shall pay KMHA an amount equal to any tax or duty that KMHA is required to collect or pay upon the sale or delivery of the Products to Customer, exclusive of KMHA's income taxes. If a certificate of exemption or similar document is required to exempt Customer from sales or use tax liability, Customer shall obtain and furnish to KMHA evidence of such exemption with Customer's order in a form reasonably satisfactory to KMHA.

4. Order Submissions and Acceptance. All orders for Products by Customer shall be made using a purchase order, purchase letter or other similar document (each, an "Order Document"). No Order Document shall be binding upon KMHA until it has been accepted by KMHA in writing, and KMHA shall not have any liability to Customer with respect to any Order Document that is not accepted by KMHA. KMHA shall notify Customer of any rejection of an Order Document and of the assigned delivery date for accepted orders within ten (10) business days of KMHA's receipt of the Order Document.

7. Force Majeure. Any failure or delay by Supplier in the performance of its obligations under this Agreement (other than Supplier's obligations to pay Administrative Fees and other amounts due and owing under this Agreement) shall be excused to the extent the failure or delay is due to any act of God, including, but not limited to, fire, flood, storm, earthquake, war, national emergency or natural disaster, and only to the extent such failure or delay in performance is not caused in any way by Supplier's own fault or negligence ("Force Majeure Event"), provided that (i) Supplier gives Novation prompt written notice of the delay in performance due to the Force Majeure Event as soon as reasonably possible, and (ii) Supplier uses commercially reasonable efforts to minimize the effects of the Force Majeure Event and resume performance. The timeliness of Supplier's payment obligations, however, shall still be excused to the extent such delay is due to a Force Majeure Event. Notwithstanding the foregoing, should any failure to perform or delay in performance due to a Force Majeure Event last longer than thirty (30) days, Novation may terminate this Agreement by written notice to Supplier.

8. Customer's Terms and Conditions. Products furnished by KMHA are sold on the terms and conditions set forth herein as well as any supplemental terms and conditions to this document, notwithstanding any terms and conditions that may be set forth in or contained on Customer's purchase order, invoice or any other document provided or issued by Customer.

9. Acceptance. The furnishing by KMHA of any Products to Customer shall constitute acceptance of those Products UNLESS Customer delivers written notice of a defect or nonconformity to KMHA within thirty (30) days of the date on which such Products are delivered to Customer. Notwithstanding the foregoing, any use of any Product by Customer, agents or contractors, for any business purpose, after it has been delivered to Customer, shall constitute acceptance of that Product by Customer.

10. Warranty and Limitations of Warranty.

(a) KMHA warrants to Customer that, during the applicable Warranty Period each standard Product manufactured by KMHA under the Agreement shall be free of defects in materials and workmanship.

(b) Unless otherwise specified by KMHA elsewhere in the Agreement or otherwise reduced to writing and expressly approved by an authorized officer of KMHA in writing, the Warranty Period for standard Products shall be one (1) year from the date of delivery, or two thousand (2,000) operating hours, whichever occurs first.

(c) With respect to Products, to repair or, at KMHA's option, replace such Products, or any defective portion thereof. Notwithstanding the foregoing, KMHA may, as an alternative, elect to refund an equitable portion of the purchase price of the affected Product. Items expendable in normal use ("Consumables") are not covered by the foregoing warranty. All warranty replacement or repair of parts shall be limited to Product malfunctions, which, in the reasonable opinion of KMHA, are due or traceable to defects in original material or workmanship. All replaced parts shall become the property of KMHA. All obligations of KMHA under this warranty shall cease in the event of abuse, misuse, accident, alteration, or neglect of the Product. In-warranty repaired or replacement parts are warranted only for the remaining un-expired portion of the original warranty period applicable to the repaired or replaced parts or ninety (90) days, whichever is greater. After the expiration of the applicable warranty period, Customer shall be charged at KMHA's then current rates for parts, labor and transportation.

(d) Customer must use reasonable care to avoid hazards. KMHA expressly disclaims any responsibility for loss or damage caused by the use of any Products other than in accordance with proper operation procedures. No warranty is provided by KMHA for any products sold or provided to Customer by KMHA which are not manufactured or produced by KMHA, and any manufacturer's warranty for such products, if any, shall be assigned to the Customer without recourse to KMHA.

(e) KMHA DOES NOT WARRANT THAT ANY PRODUCT OR THE FUNCTIONS PERFORMED BY ANY PRODUCT WILL MEET THE REQUIREMENTS OF CUSTOMER OR OF ANY OF ITS CUSTOMERS, OR THAT THE OPERATION OF ANY SUCH PRODUCT WILL BE UNINTERRUPTED OR ERROR FREE.

(f) THE WARRANTIES SET FORTH IN THE AGREEMENT ARE IN LIEU OF AND EXCLUDE ALL OTHER WARRANTIES, EXPRESS OR IMPLIED, INCLUDING BUT NOT LIMITED TO THE WARRANTIES OF MERCHANTABILITY AND FITNESS FOR A PARTICULAR PURPOSE, AND USE OR APPLICATION, WHICH ARE EXPRESSLY DISCLAIMED, UNLESS SUCH OTHER WARRANTIES, OBLIGATIONS OR LIABILITIES ARE EXPRESSLY AGREED TO IN WRITING BY AN AUTHORIZED OFFICER OF KMHA. STATEMENTS MADE BY ANY PERSON, INCLUDING REPRESENTATIVES OF KMHA, WHICH ARE INCONSISTENT OR IN CONFLICT WITH THE TERMS OF THE AGREEMENT SHALL NOT BE BINDING UPON KMHA UNLESS REDUCED TO WRITING AND SIGNED BY AN AUTHORIZED OFFICER OF KMHA.

11. Warranty-Expendable Products ("Consumables"). KMHA warrants that, at the time of delivery to Customer, Consumables manufactured and sold by KMHA to Customer under the Agreement will be free of defects in material and workmanship and will conform to KMHA's specifications therefore or other specifications expressly agreed to in writing by KMHA. KMHA SHALL HAVE NO OTHER OR FURTHER RESPONSIBILITY THEREFOR WHATSOEVER, AND KMHA DISCLAIMS ANY IMPLIED WARRANTIES OF MERCHANTABILITY AND FITNESS FOR A PARTICULAR PURPOSE WITH RESPECT THERETO.

12. Damages and Liability. WITH THE EXCEPTION OF KMHA'S INDEMNIFICATION RESPONSIBILITIES AS SET FORTH IN ITS AGREEMENT WITH NOVATION, IN NO EVENT SHALL KMHA BE LIABLE FOR ANY INCIDENTAL, INDIRECT, CONSEQUENTIAL, OR SPECIAL LOSSES OR DAMAGES OF ANY KIND WHATSOEVER, HOWSOEVER CAUSED.

14. Intellectual Property Rights. Customer acknowledges and agrees that all rights in and to the Product(s), and all patents, copyrights, trade secrets, trademarks, trade names, and any other forms of intellectual property associated therewith, will be and remain the sole and exclusive property of KMHA. Customer will not remove, cover or deface the KMHA name or any of KMHA's trademarks included on any of the Product(s), nor will Customer have any right to use the KMHA name or any of KMHA's trademarks, or any name or mark confusingly similar thereto, in connection with its use of the Product(s).

15. Term and Termination. The Agreement will be effective as of acceptance.

Customer may terminate the Agreement for a material breach of the Agreement by KMHA so long as Customer gives KMHA thirty (30) days prior written notice specifying the events or circumstances giving rise to the notice. KMHA may terminate the Agreement for a material breach of the Agreement by Customer so long as KMHA gives Customer thirty (30) days prior written notice specifying the events or

circumstances giving rise to the notice. The termination shall become effective after the lapse of such thirty-day period, unless within such thirty-day period the events or circumstances specified in the notice have been remedied by Customer or KMHA or a plan for remedying them has been proposed by Customer or KMHA and accepted in writing by Customer or KMHA. The termination of the Agreement shall not affect Customer's rights with respect to any Product(s) purchased and paid for by Customer prior to the date of termination. The Customer's obligation to make payments of fees accrued or incurred prior to the date of termination shall survive any termination of the Agreement.

16. Assignment; Binding Agreement. Until such time as all payments have been made under this Agreement, CUSTOMER shall not assign, transfer, pledge, hypothecate, mortgage, charge, encumber or otherwise dispose of the Equipment or its rights under this Agreement without the prior written consent of KMHA. The provisions of this Agreement are binding upon all successors, administrators, trustees and permitted assigns of CUSTOMER.

18. HIPAA Privacy Regulations.

(a) General. KMHA acknowledges that it may be a Business Associate of Customer for purposes of HIPAA's Standards for Privacy of Individually Identifiable Health Information (the "Privacy Regulations"). Accordingly, from and after April 20, 2005 or any other applicable compliance date established in the Privacy Regulations (the "Privacy Compliance Date"), KMHA shall comply with all applicable regulatory standards with respect to Customer's Protected Health Information. Customer shall cooperate with KMHA in the performance of KMHA's obligations. Notwithstanding any other term or provision of the Agreement, Customer acknowledges and agrees that any failure by Customer to cooperate with KMHA and/or perform any responsibilities set forth in the Privacy Regulations may excuse KMHA from any applicable delay or nonperformance by KMHA of any obligations set forth in this Agreement.

(b) Uses and Disclosures of Protected Health Information. From and after the Privacy Compliance Date, KMHA shall use and disclose Protected Health Information only as necessary to perform its obligations pursuant to the Agreement and/or as otherwise authorized by Customer. Notwithstanding the foregoing, KMHA may use Protected Health Information received by KMHA in its capacity as a Business Associate of Customer if necessary: (i) for the proper management and administration of KMHA, and/or (ii) to carry out the legal responsibilities of KMHA. KMHA may disclose Protected Health Information received by KMHA in its capacity as a Business Associate of Customer for the purposes described in subsections (i) and (ii) of this subsection (b) only if the disclosure is: (iii) required by law; or (iv) KMHA obtains reasonable assurances from the person to whom the Protected Health Information is disclosed that it will: (1) be held confidentially and used or further disclosed only as required by law or for the purpose for which it was disclosed to the person; and (2) notify KMHA of any instances of which it is aware in which the confidentiality of the Protected Health Information has been breached.

(c) Termination for Lack of HIPAA Compliance. If, following the Privacy Compliance Date, Customer believes that KMHA may have violated a material term of any of the requirements referred to or set forth in this Section 18, as soon as reasonably possible following Customer's request, the parties shall meet (in person or by telephone) to discuss Customer's concerns. Following such meeting, KMHA shall advise Customer as to whether it agrees or disagrees with Customer's concerns. If KMHA agrees with Customer's concerns, KMHA shall, within a reasonable time, propose to Customer a plan for addressing Customer's concerns (the "Corrective Plan") and, if necessary, the parties thereafter shall engage in good faith discussions in an effort to reach agreement on the terms of the Corrective Plan. If KMHA materially fails to implement the terms of the mutually agreed upon Corrective Plan, then Customer shall have the right to terminate the Agreement. If KMHA disagrees with Customer's concerns, then KMHA and Customer shall follow the dispute resolution procedures set forth in the Agreement until the dispute has been resolved.

19. Miscellaneous.

(a) Severability. If any part, provision, or clause of the Agreement, or the application thereof to any person or circumstance, is held invalid, void or unenforceable, such holding shall not effect and shall leave valid all other parts, provisions, clauses or applications of the terms and conditions remaining, and to this end the terms and conditions contained herein shall be treated as severable.

(b) Notices. Legal notices and communications given by the Customer and KMHA to one another in connection with the Agreement shall be given in writing and delivered via return receipt mail or express delivery service to the parties' respective business addresses or to such other address as the parties may substitute by giving notice to one another in accordance with this provision.

(c) Amendments. No modification or amendment of the Agreement or waiver of any provision of the Agreement will be valid unless in writing and signed by Customer and KMHA and specifically stating that it is a modification or amendment hereto.

(d) Governing Law. The Agreement shall be construed and enforced in accordance with the laws of the State of New Jersey.

(e) Arbitration. In the event the parties are unable to resolve, within a reasonable time, any controversy, dispute or claim arising out of or relating to the Agreement, the parties agree to first discuss the dispute informally. In the event that such discussion is not successful in resolving the dispute, then either party may submit such dispute to binding arbitration in Wayne, New Jersey, before a single arbitrator, in accordance with the Commercial Arbitration Rules of the American Arbitration Association then in effect. The arbitrator shall be required to produce a written opinion setting forth the reasons for the decision or award made. There shall be no appeal therefrom other than for bias, fraud or misconduct. Judgment upon and decision or award may be entered in any court of competent jurisdiction. Notwithstanding the foregoing, claims for equitable or injunctive relief, although subject to mediation as provided herein, shall not be subject to arbitration.

This Quotation, together with any Schedules hereto and the Standard Digital Products Terms and Conditions for the Purchase of Products and Services and the License of Software attached hereto, constitutes the entire agreement between Customer and Konica with respect to the Products, Services and Licensed Programs described herein, and supersedes all prior Quotations, understandings, inducements or conditions, express or implied, oral or written, except as herein contained.
CUSTOMER, BY ITS SIGNATURE BELOW, ACKNOWLEDGES THAT IT HAS READ THIS QUOTATION, UNDERSTANDS IT, AND AGREES TO ALL OF ITS TERMS AND CONDITIONS.
This Quotation shall not become effective until it has been signed by Customer and accepted by Konica at its offices in Wayne, New Jersey.

CUSTOMER: Mem. Hosp.I of Sweetwater Co.

Konica Minolta Healthcare Americas, Inc.

By:

Authorized Account Signature

Please Print or Type Name

Title: _____

Date: _____

Vizient

GPO Designation Initials

IDN Affiliation Initials

By:

Konica Minolta Territory Manager

Please Print or Type Name

Date: _____

Accepted

By: _____
Signature of Authorized Konica Minolta Officer

Please Print or Type Name

Title: _____

Date: _____

Please attach both Purchase Order and Deposit Check to this document for processing.

Assigned: FY 19 - 15

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: Surgical Services **Submitted by:** Alisha Mackie **Date:** 10/12/18

Provide a detailed description of the capital expenditure requested:

V-Pro Max Sterilizer-Hydrogen peroxide sterilizer

Preferred Vendor: Steris

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

1. Renovation	\$
2. Equipment	\$ 153827.50
3. Installation	\$ 3001.5
4. Shipping	\$ 1943.96
5. Accessories	\$
6. Training	\$
7. Travel costs	\$
8. Other e.g. interfaces	\$ -45,000 (\$30k trade in, \$15k promotion)
Total Costs (add 1-8)	\$ 113772.96

Does the requested item:

Require annual contract renewal? YES NO

Fit into existing space?
 YES NO Explain:

Attach to a new service?
 YES NO Explain:

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

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

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

Budgeted Item:

Projected Annual Procedures (NEW not existing) YES NO

Revenue per procedure \$
 Projected gross revenue \$ # of bids obtained? 1

Projected net revenue \$

Projected Additional FTE's _____
 Copies and/or Summary attached.
If no other bids obtained, reason:
 Steris is the only company that produces this type of sterilizer

Salaries	\$
Benefits	\$
Maintenance	\$
Supplies	\$

Total Annual Expenses \$

Net Income/(loss) from new service \$

Review and Approvals

Submitted by: Alisha Mackie Verified enough Capital to purchase

Department Leader YES NO

Vice President of Operations YES NO

Chief Financial Officer YES NO

Chief Executive Officer YES NO

Board of Trustees Representative YES NO

Cleyone

[Signature]

OTHER CONSIDERATIONS

The Steris V-pro max is an updated version of the sterilizer that we currently have the V-Pro. The V-Pro Max has the ability to sterilize all of the instruments that we are currently running through the ETO gas sterilizer. Having the ability to sterilize these items in the V-Pro Max rather than the ETO gas sterilizer is time savings. The V-Pro Max sterilizes instruments in approximately 1-1 1/2 hours and the ETO gas sterilizer takes approximately 16 hours. This will help in improving turn around time for instruments that cannot be run through the steam sterilizers. This would in turn increase staff and surgeon satisfaction as well as patient safety. This machine is used to sterilize all cameras, light cords and scopes used for laparoscopic cases, cystoscopies and some ENT procedures. The V-Pro Max can sterilize the same current instruments plus we will be able to use it to sterilize the flexible scopes like the ureteroscope, cystoscope and bronchoscope which now need to be processed in the ETO gas sterilizer. We are researching the need to keep the ETO sterilizer if this is approved.

Our current V-Pro is continuously needing service and we have to call the tech to come fix it. Steris service reports show over the past two years, we have had 4 PM's and 12 failures. The current equipment was purchased in 2011.

Steris specializes in this type of equipment. We have used Steris equipment in Central Sterile and Surgery for over 20 years due to the reliability of the equipment and the quick availability of the service tech. It would benefit the hospital to stay with Steris as all of our other sterilizers and washers are also from Steris. We currently stock all of the chemical sterilant, biological indicators, wraps for trays, and chemical indicator labels that will also work with the new V-Pro Max. This machine would require a maintenance contract after the first year. The current maintenance contract cost \$14,000 annually and the new contract would be comparable.

We would trade in our current V-Pro for this new sterilizer for \$30,000 credit plus an additional \$15,000 credit for the upgrade promotion.

For approval: \$113,772.96
Capital - \$111,829.00
Freight - 1943.96

Submitted by: Signature

Date



V-PRO[®] maX Sterilizer Cycle Overview

Flexible Cycle: 35 Minutes

The Flexible Cycle should be selected for:

- **Single channel** flexible endoscopes with an internal diameter of **1 mm** or larger and a length of **1050 mm** or shorter; OR
- **Dual channel** flexible endoscopes with the same diameter but a length for one channel of **990 mm** or shorter and the other channel **850 mm** or shorter.
- A maximum of 2 flexible endoscopes can be processed per load, with light cords and silicone mats.
- **Mixed Load Option:** Also may process 1 flexible endoscope that meets the claims described above, and any non lumen devices (see Non Lumen Cycle) up to 24 lbs.

Instruments that can be sterilized in the Flexible Cycle include but are not limited to:

- Olympus / Gyrus ACMI surgical endoscopes
- Intuitive Surgical daVinci[®] Endoscopes
- Bronchoscopes
- Small diameter flexible scopes, such as hysteroscopes, cystoscopes, ureteroscopes, and choledochoscopes
- Cameras, light cords, batteries
- Non Lumen Cycle devices



Flexible Cycle -Both shelves; 24 lbs

Lumen Cycle: 55 Minutes

The Lumen Cycle should be selected for:

- Stainless steel lumen instruments with a:
 - Single channel** with an internal diameter of 0.77 mm or larger and a length of 500 mm or shorter
 - Dual channel** with an internal diameter of 0.77 mm or larger and a length of 527 mm or shorter
 - Triple channel** with an internal diameter of 1.2 mm or larger and a length of 275 mm or shorter; an internal diameter of 1.8 mm or larger and a length of 310 mm or shorter; OR an internal diameter of 2.8 mm or larger and a length of 317 mm or shorter;
- Also may process non lumen devices (see Non Lumen Cycle)
- **20 lumens** per load maximum

Instruments that can be sterilized in the Lumen Cycle include but are not limited to:

- Rigid and semi-rigid endoscopes and laparoscopic instrument sets (arthroscopes, cystoscopes, ureteroscopes)
- Batteries
- Drills, saws, and shaver systems
- Intuitive Surgical Stapler Motor Pack
- Energy based devices, such as laser or ultrasonic handpieces
- Non Lumen Cycle devices



Lumen Cycle -Both shelves; 19.65 lbs

Non Lumen Cycle: 28 Minutes

The Non Lumen Cycle should be selected for:

- General medical devices requiring surface sterilization, or sterilization of mated stainless steel or titanium surfaces
- Non lumen rigid, semi-rigid and flexible endoscopes.

Instruments that can be sterilized in the Non Lumen Cycle include but are not limited to:

- Intuitive Surgical daVinci[®] Endoscopes
- Flexible non lumen scopes, such as ENT scopes
- Rigid and semi-rigid scopes, such as Hopkins telescopes
- Cameras and cables
- Laryngoscope blades
- Batteries
- Eye instruments
- Probes and transducers
- General surgery instruments without lumens



Non Lumen Cycle -Both shelves; 50 lbs



STERIS Corporation
5960 Heisley Road
Mentor, OH 44060-1834 • USA
440-354-2600
GLN: 0724995000004

QUOTATION

MEMORIAL HOSP OF SWEETWATER CNTY
Acct:41894 GLN: 1100004526014
1200 COLLEGE DR
ROCK SPRINGS, WY 82901, US

STERIS Quote No: MGREEN1010954

Revision No: 6

Date: 16-Oct-2018

ATTN: Melissa Mansfield, Director of Surgical Services (Phone: 307-352-8377)

Submitted By:
Mark Green, Account Manager
(801) 557-7012, mark_green@steris.com

Please submit your quote and purchase order directly to your Account Manager or to
RegionalSalesSupport@steris.com

STERIS is pleased to make the following proposal for your consideration:
TRADE-UP EXISTING V-PRO 1 TO V-PRO MAX

Melissa,

As per our conversation and your request, I am pleased to provide you this updated quotation for a new **V-Pro maX Low Temperature Sterilizer** as a Trade-up for your existing V-Pro 1 Plus unit; for **Memorial Hospital of Sweetwater County** Sterile Processing Department. This quote references our **V-Pro maX, Low Temperature, Cabinet Sterilizer** model for your consideration. I have also attached the *Technical Data Sheet* and *Cut Sheet Drawings* for your review and files. As needed I will schedule an additional site-review with our Installation Project Manager, Bill Brewer, prior to the installation.

V-PRO Sterilizer Upgrade Promotion Celerity Credit details

- Includes (1) Celerity™ 20 Incubator at no charge.

- Purchase 9 boxes (per sterilizer) of Celerity™ 20 HP Biological Indicator prior to 3/31/19, and receive either \$5,000 discount off the capital order (if purchased with capital order), or a \$5,000 credit later if purchased later once the minimum purchase is met.

If you have any questions or items I could address in greater detail, please feel free to contact me directly at (801) 557-7012 anytime. I appreciate the opportunity to be of service and look forward to working with you on this project.

Mark Green

Account Manager – Sterile Processing

(801) 557-7012 – Office

(866) 734-6627 – Fax

mark_green@steris.com

NOTICE: Sale of any Products or Services covered by this quotation is conditioned upon Buyer's assent to the terms contained herein (including the Terms and Conditions of Sale and /or the Installation Terms and Conditions included on the last page(s) of this quotation). Any additional or different terms proposed by Buyer are hereby objected to and will not be binding upon STERIS unless specifically assented to in writing by STERIS' authorized representative in Mentor, Ohio.

MEMORIAL HOSP OF SWEETWATER CNTY
Acct:41894 GLN: 1100004526014

STERIS Quote No: MGREEN1010954

Date: 16-Oct-2018

Revision No: 6



STERIS Quote No: MGREEN1010954

MEMORIAL HOSP OF SWEETWATER CNTY

Acct:41894 GLN: 1100004526014


1200 COLLEGE DR

ROCK SPRINGS, WY 82901, US



Executive Summary

Subtotal for line 1	111,829.00
Other	1,943.96
	USD 113,772.96

Item	Equipment #	Description	Quantity	Extended Book Price	Extended Discount Price
1.0000 	VP30002101	V-PRO MAX Single Door Cabinet 208-230V (English) • V-PRO MAX • Contract: GR INTALERE VQ10087 LOW TEMPERATURE STERILIZATION CONTRACT LEVEL 1	1	216,000.00	153,827.50
1.0100	SE600962	Install Large Hydrogen Peroxide Sterilizers	1	1,705.00	1,705.00
1.0200	SE6009621	Deinstall Large Hydrogen Peroxide Sterilizer	1	785.00	785.00
1.0300	SE6045100071	Disposal of Sterilizer	1	511.50	511.50
1.0400	TRADEVPRO	Trade-In VPro	1	0.00	-30,000.00
1.0500	VPROPROMO	V-PRO Sterilizer Upgrade Promotion	1	0.00	-15,000.00
Subtotal for line 1				219,001.50	111,829.00
2.0000	SHIPPING & HANDLING	CHARGES	1	1,943.96	1,943.96
Currency: USD		Quote Total Excluding Taxes		220,945.46	113,772.96

NOTE: If we are favored with an order, please confirm available electrical power on your purchase order.
NOTE: Work to be scheduled upon receipt of purchase order.

Above pricing includes:

- Pricing extended for BUDGET CONSIDERATION only.
- Pricing quoted subject to site inspection by STERIS.
- Pricing reflects National Account Discount.

Above pricing does not include (unless otherwise specified):

- Prices do not include after hours installation.

NOTE: ALL TAXES ARE EXCLUDED UNLESS OTHERWISE STATED. IF EXEMPT, PROOF OF TAX EXEMPTION MUST ACCOMPANY ALL PURCHASE ORDERS.

NOTE: Under present circumstances, this quotation may be considered firm for thirty (30) days from this date. Acceptance later is subject to confirmation. Our quotation is extended on the basis of shipment being made within twelve (12) months after receipt of purchase order or contract. For extended shipments, add ½% per month for any subsequent period beyond (12) months.

Term of Payment: NET 30

Terms of Shipping: PPA (Prepay & Add)

FOB: Origin

DELIVERY INSTRUCTIONS

Customer Purchase Order: _____

STERIS Sales Order Number: _____

Delivery Address: _____

Dock Days: **M-F**

Dock Hours _____

Pre-call Required Yes No

Note: Carrier will call 24 hours in advance of shipment to notify of delivery the following day.

Appointment Required Yes No

Note: If appointment required, carrier will hold shipment till contact below is reached to set a delivery appointment.

Receiving Contact for Required Pre-call: **LYDIA GARCIA**

Receiving Contact Phone _____

Receiving Contact Email _____

Dock with Leveler Yes No

Standard Size Dock (48-52" High) Yes No

Accommodate 75ft x 13.5ft H Tractor Trailer (Trailer plus sleeper unit) Yes No

If no, please specify max length/height of truck that can deliver _____

Proper equipment available at Customer site to unload the equipment Yes No

Note: <1,000lbs: a pallet jack probably would suffice; >1,000lbs a fork lift would probably be the preferred method

Liftgate Required* Yes No

Inside Delivery Beyond the Dock* Yes No

If yes, provide final delivery location (e.g. Room 204, Floor 4) _____

Equipment to be delivered to a construction site Yes No

If yes, PPE may be required by carrier. Please specify what PP will be required for delivery. _____

Union Drivers Required on Site Yes No

Updated on: **1/13/2017**

* = Additional Charges Apply

MEMORIAL HOSP OF SWEETWATER CNTY
Acct:41894 GLN: 1100004526014

STERIS Quote No: MGREEN1010954

Date: 16-Oct-2018

Revision No: 6

By:
Mark Green
Account Manager

Accepted For:
MEMORIAL HOSP OF SWEETWATER CNTY
Acct:41894 GLN: 1100004526014

(801) 557-7012
mark_green@steris.com

STERIS Corporation
5960 Heisley Road
Mentor, OH 44060
Tel: 440-354-2600
Fax: 440-639-4450

Signature: _____

Title: _____

Date: _____

E-mail: _____

Purchase Order: _____

Want Date: _____

Ship To Address: _____

Bill To Address: _____

View order history and place orders for accessories, consumables and parts on-line. Visit us at <https://store.steris.com>

Assigned: FY 19-16

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: Human Resources **Submitted by:** Amber Fisk - HR Director **Date:** 10/5/2018

Provide a detailed description of the capital expenditure requested:
 This new system will automate outdated, antiquated processes that are time wasters. This is free up time within the Hr department to focus more on the workplace experience and professional development which is part of the organizations strategic plan.

Preferred Vendor: Healthcare Source

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

1. Renovation	\$
2. Equipment	\$
3. Installation	\$ 24,025.00 software
4. Shipping	\$
5. Accessories	\$ 60632.00 annual maintenance
6. Training	\$
7. Travel costs	\$
8. Other e.g. interfaces	\$ 10,000.00
Total Costs (add 1-8)	\$ 94657.00

Does the requested item:

Require annual contract renewal? YES NO

Fit into existing space? YES NO Explain:

Attach to a new service? YES NO Explain:

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

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

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

Projected Annual Procedures (NEW not existing) YES NO

Revenue per procedure	\$	# of bids obtained? 3
Projected gross revenue	\$	<input type="checkbox"/> Copies and/or Summary attached. If no other bids obtained, reason: Kronos -\$66,000 (not all modules avail) Vibe HCM - \$43,000
Projected net revenue	\$	
Projected Additional FTE's		
Salaries	\$ -133,972.00 (1.5 FTEs)	
Benefits	\$	
Maintenance	\$	
Supplies	\$ -20,000.00 (replacing HLC modules)	
Total Annual Expenses	\$ 60,632.00	
Net Income/(loss) from new service	\$ TTL Savings \$ 93,340.00	

Review and Approvals

Submitted by: Verified enough Capital to purchase


Department Leader YES NO

Vice President of Operations YES NO

Chief Financial Officer YES NO

Chief Executive Officer YES NO

Board of Trustees Representative YES NO



OTHER CONSIDERATIONS

This program will allow for full automation of the HR process from hire to retirement, including training and professional development. This program allows employees to access their electronic files at any time. They may view and print, but cannot edit; applications, job descriptions, performance evaluations and basic demographic information. With this program, applicants will have an automated system to log into and save applications, update information and take behavioral assessments that help streamline the now, antiquated, print application system. If a candidate is chosen for an interview, their interview evaluations will be logged. This is important for future reference demonstrating equity in interviewing. When a candidate is selected, and hired, their information automatically populates into the active employee side of the system. Currently, all of these are manual, and logged in spreadsheets and paper filed. With the NetLearning system, regulatory requirements (learning and competencies) will automatically be assigned as well as all on-boarding activities. The individual will receive information from the HR staff on how to access their portal during our orientation process. It should be noted that all of this occurs without having to update multiple various systems within two different departments. The piece that the Education Department used to won (HLC) will now be automated and integrated within this system for consistency. This system essentially replaces any need for employees to be present in the education department. Human Resources will take over these pieces that were previously done by a Director and Assistant (1.5 FTE's). This is a total cost savings of \$ \$153,972.00 per year. The automated system will open up more time for all HR staff that can focus on training and professional development modules within the new system. This system does interface with our current HR/Payroll system which will also save time. The interface with Microsoft GP will cost a flat rate of \$10,000.

Performance evaluations will be completed within the system and will automatically route to various parties for review and approval. They may be signed electronically as well. Employees may access current and previous evaluations to help stick to expectations and goal setting. Competencies will be automated which is a regulatory requirement for The Joint Commission, and easily accessible when surveys are being done.

Currently, we have many forms that must be signed by many parties in order to request a position, transfer a position, change a wage or department, termination etc. All of these will be automated with the new system.

Education FTE savings: \$133,972.00 - Learning System Cost (current) \$20,000.00 (all annual).
New system annual cost (no new FTE's needed) - \$60,632.00. The maintenance cost has been budgeted in the fiscal year 19 budget.

For approval: \$94,657.00
Capital - \$24,025.00 Healthcare Source IT
Capital - \$10,000.00 DexPro
Annual License/Support - \$60,632.00



Digitally signed by Amber Fisk
Date: 2018.10.08 10:18:42 -06'00'

10/08/2018

Submitted by: Signature

Date

ORDER FORM

HealthcareSource Software and Services

The services described within this Order Form are provided to Memorial Hospital of Sweetwater County ("Customer") pursuant to the HealthcareSource HR, Inc. ("Licensor") Software Master Subscription Agreement set forth at: <http://www.healthcaresource.com/legal-documents/23-about-healthcaresource/173-software-subscription-agreement.html> (the "Agreement"), the terms of which are incorporated into this Order Form. Any term not defined herein shall have its meaning given in the Agreement. If any conflict exists between any of these documents, the Agreement will govern, followed by this Order Form.

I. Order

Contracting Parties: This Order Form is made between Licensor and the following party:

Customer:	Memorial Hospital of Sweetwater County	P.O. Number:	
Customer Address:	1200 College Drive PO Box 1359 Rock Springs, WY 82901		
Customer Contact:	Amber Fisk, Director of HR	Contact Details:	307.362.3711 afisk@sweetwatermemorial.com

Initial Term: The Initial Term of Customer's subscription shall be twelve (12) months from the latest signature date below ("Effective Date"). Renewal of the Initial Term shall be made in accordance with terms of the Agreement.

Services Ordered: Customer orders the products and services below (collectively, the "HealthcareSource Services"):

Position Manager®	Service Description
Position Manager	<p>Position Manager is an applicant tracking system that allows you to manage and engage candidates throughout the entire recruiting process. This includes setting up the requisition, defining your approval process, pre-qualification questions and ranking questions as well as creating job postings.</p> <p>Our customizable career site portal includes searchable job postings and an application process that is designed to meet your organization's unique needs.</p> <p>You can build a database of candidates, with interview history and qualifications, and can search for candidates by name, status, date, and more. Sending applications to your hiring manager is automated through email or login to the system which includes the ability to score, rank and compare candidates.</p> <p>We also have a robust reporting system with over 35 standardized reports to help understand all aspects of your recruitment process. These reports allow basic customization but we also include 5 completely customized reports that may be unique to your organization.</p>
Onboarding	<p>Our Onboarding portal automates the new hire paperwork and onboarding process. All new hire forms and new hire actions are online. You can also define your custom welcome message.</p> <p>The required data for these forms (such as name, address, telephone number, department, manager's name, etc.) is automatically pre-populated.</p>

	10 Onboarding forms are included. Additional forms may be added at the then- current rate.
FTP Site	The FTP Site allows secure transfer of data between Position Manager and the customer's HRIS.
Applicant Attach A Document	Allows applicants to upload a document which gets submitted in addition to their online application. The document can be viewed by Position Manager and Hiring Manager users.
Requisition Attach a Document	Allows hiring managers to attach a document to a requisition when they create the requisition. The document can be opened and viewed by approved users and Position Manager users in Human Resources and the document remains attached to the requisition indefinitely.
Lean Human Capital Services	<p>The Recruiter Academy: Customer will receive two (2) seat(s) to the Recruiter Academy Certified Recruiter (RACR) program. Customer must use the RACR seats within twelve (12) months of receipt. Unused RACR seats expire and will not carry over to the next year.</p> <p>Core Recruitment Benchmark Solution:</p> <ul style="list-style-type: none"> • Immediate access to the "2016 Core Recruiting BenchmarkReport"; • Access to the Core Recruiting Benchmark cloud solution; and • Annual Advisory Review call (up to 2 hours). <p>Lean Optimization Analysis:</p> <ul style="list-style-type: none"> • Lean PM Optimization Analysis & Best Practice Review • Thorough analysis of your current recruitment process from requisition approval to first day of employment: <ul style="list-style-type: none"> ○ LHC will host discovery call to identify Best Practices already implemented, and ways to reduce non-value added activities throughout the entire process. • LHC will provide detailed performance improvement recommendations: <ul style="list-style-type: none"> ○ To include implementation of Lean Process Best Practices. ○ To include a detailed Road Map to be used as a project plan to prioritize and manage implementation during your Recruitment Transformation Journey.
Web-Based Training	<p>Licensors will provide up to eight hours of formal web based training via WebEx and at least 12 weekly calls where additional information, site review and training is provided for the Client. Training includes the following sessions:</p> <ul style="list-style-type: none"> • HR Training 1 – 2 hours (HR Users) • HR Training 2 – 2 hours • Administrator – 2 hours (System Admins) • Hiring Manager (Either WebEx session for managers or Train the Trainer) – 1 hour • Follow-up/Advanced Training - 1-1.5 hours
Assessments	Service Description
Staff AssessmentSM	Staff Assessment is a predictive, online, behavioral-based assessment designed to:

	<ul style="list-style-type: none"> • Increase new-hire retention; • Identify applicants in terms of “fit”; • Provide interviewers with a structured, behavioral-based interview process; and • Develop incumbent staff members by prescribing specific solutions to enhance on-the-job performance. <p>It has been designed and validated to identify top performers for five Job Families: Nursing, Patient Care, Entry-Level Service, Administrative/Clerical, and Technical/Professional.</p> <ul style="list-style-type: none"> • The Nursing Critical Thinking Assessment is included which assesses the critical thinking aptitude of incumbent nurses and provides prescriptive solutions to assist nurses in improving their critical thinking aptitude.
Leadership AssessmentSM	<p>Leadership Assessment is a predictive, online, behavioral-based assessment that evaluates critical leadership competencies (including critical thinking) and is designed to:</p> <ul style="list-style-type: none"> • Identify candidates who are most likely to succeed as healthcare leaders; • Provide interviewers with a structured, behavioral-based interview process; and • Develop incumbent leaders by prescribing specific solutions to enhance on- the-job performance.
Reference AssessmentSM	<p>Reference Assessment is a predictive, online reference assessment solution that makes collecting references an easy and value-added step in your hiring process. This solution overcomes the traditional reference challenges on three levels:</p> <ul style="list-style-type: none"> • Automation • Accountability • Assessing a candidate's “fit”
Web-based Training	<p>Web-based training includes:</p> <ul style="list-style-type: none"> • Review of the Staff/Leadership/Reference Assessment(s)/Feedback Report(s), tips and techniques on best-practice use of the Assessment(s), Question & Answer, etc.
Performance Manager[®]	Service Description
Performance Manager	<p>Performance Appraisals - automated and paperless appraisals, 360 feedback reviews, goal setting, available job history and online tasks and reminders with capability to define what type of performance and skills are required by each employee.</p> <p>Feedback - Feedback provides a way for managers to evaluate and inform employees of their performance and create action plans. Feedback is a way to increase interaction between managers and employees to ensure performance is on par with expectations and potential.</p> <p>Performance Reporting – includes over 20 standard reports that will measure manager and employee effectiveness, achieve on-time</p>

	completion metrics for appraisals, goals and actions plans as well as help define achievable organizational goals.
HRIS Feeds	<p>Customer will be responsible for creating import scripts, on a regular basis, from their HRIS system to be uploaded on the FTP site provided by HealthcareSource. Licensor will create scripts to retrieve uploaded files and load them into the Performance Manager system, on a regular basis.</p> <p>The following are the defined script files to be created and exported in CSV format to the FTP site:</p> <ul style="list-style-type: none"> • Facility data • Department data • Position data • Employee data • Employee per-position data • License/certification (optional) • Electronic contacts (email addresses) (optional)
Job Description Data Entry	HealthcareSource will perform the work necessary to enter up to 1,000 of Customer's job descriptions into the system. Job descriptions must be provided by Customer in a format capable of being copied.
Training	Will provide Webex-type training for Customer's human resources staff and up to two administrators designated by Customer, who will then be responsible for training additional Customers employees. Fee <u>does not</u> include travel expenses.
NetLearning®	Service Description
NetLearning®	<p>LearningAdministration. The component of the NetLearning used for administration of training records including but not limited to creating courses, scheduling training, and generating reports.</p> <p>MyNetLearning. The component of the NetLearning Software designed to deliver training schedules, a list of training requirements, a report of transcripts, and training content to anyone granted access by the Licensee for purposes of participating in the training process.</p> <p>HealthcareSource Premium eLearning LibrarySM. The computer-based learning courses, owned by NetLearning and licensed to Licensee, that contain training content in a format that can be delivered through and administered by the Software. This purchase includes the courses listed on Schedule 2 of this Order Form ("Complementary Courses") which consists of the Core and Premium Compliance Courses ("Courses"). The Complementary Courses are subject to change, removal or replacement in Licensor's sole discretion, and certain course offerings may not be available for the entirety of the Term of this Order Form.</p> <p>HealthcareSource UniversitySM. For a period of three (3) months commencing on the Effective Date, access to online training courses will be provided at no charge. Customer will then have the option to purchase additional access at Licensor's current price offering for HealthcareSource University.</p> <p>The subscription is granted <u>ONLY</u> to the number of Authorized Users noted in Schedule 1</p>

NetManager	WEB-based software that allows floor supervisors to manage employee requirements for training.
NetCompetency®	WEB-based software that allows floor supervisors to track, manage and report on the competencies of every individual in the organization, all from one centralized software application. Seamlessly integrate this product with our LMS product to assign competencies to staff in conjunction with their other training requirements. Licensor personnel shall provide Customer with six (6) hours of web-based training and two (2) hours of step-up assistance/consultation regarding the use of NetCompetency.
Skills Data Entry	HealthcareSource will perform the work necessary to enter up to 1,000 of Customer's job skills into the system. Job skills must be provided by Customer in a format capable of being copied.
HealthcareSource University	Access to online courses, live Web-ex classes and one-on-one sessions that provide training services. The subscription is granted ONLY for the number of seats noted in Section 3(d) of this Order Form.
Web-based Training	Licensor personnel shall provide Customer with twelve (12) hours of web-based training regarding the use of the Learning Administrator and myNetLearning.

2. Summary of Fees

Annual Fees	
Position Manager with Lean Human Capital services	\$19,708.00
Reference Assessment	\$0.00
Staff Assessment	\$6,600.00
Leadership Assessment	\$2,640.00
Performance Manager	\$15,400.00
NetLearning	\$8,245.00
Premium eLearning Library	\$2,274.00
NetCompetency	\$4,117.00
HealthcareSource University	\$1,644.00
Total Annual Fee:	\$60,632.00
Set Up (for Facilities listed in Schedule 1)	

One-Time Fees	
Position Manager Implementation	\$5,500.00
Staff Assessment Implementation	\$660.00
Leadership Assessment Implementation	\$265.00
Performance Manager Implementation	\$8,250.00
Job Description Data Entry	\$2,200.00
NetLearning Implementation	\$2,750.00
NetCompetency Implementation	\$1,650.00
Skills Data Entry	\$2,750.00
Total One-Time Fee:	\$24,025.00

Total Fee Year 1:	\$84,657.00
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Prices valid through 11.30.18

Payment Terms: Total Fee Year 1 is due in full upon the receipt of invoice. For all training services, travel costs (if applicable) will be billed at Licensor's cost. If Customer is a tax exempt organization, Licensor requires a tax exempt certificate at the time of execution of this Order Form in order to exclude any applicable taxes from Customer's invoice.

3. Additional Terms

- a) **Facilities:** Customer agrees that this Order Form and the Licensor Products selected above are solely for the use and benefit of the total employees enumerated ("Population Size") at the facilities listed in the attached "Facilities List" (Schedule 1).
- b) **Customized Content:** If Licensor is to provide customized content to Customer in connection with the Services provided under this Order Form, in addition to the provisions of Section 6 of the Agreement, Customer agrees to the *Terms and Conditions of Content Customization* attached hereto as Schedule 3.
- c) **Facilitation of NetLearning Software Implementation:** Licensor shall provide the following implementation services:
 - a. In accordance with the terms and conditions set forth in Schedule 4 hereto, Licensor shall prepare two (2) types of "Import Templates" within the Learning Administrator to import employee records from ASCII data files that have been exported by Customer from the Customer's existing data files.
 - b. In accordance with the terms and conditions set forth in Schedule 3 hereto, Licensor shall provide up to ten (10) hours of Content Customization services. Upon completion of the Content Customization process, the customized CBL Modules shall be delivered to Customer in electronic format.
- d) **HealthcareSource University License:** The subscription granted is for up to five (5) seats. One seat is defined as one student attending any available HCSU offered class. Seats in a specific class are granted on a first come, first served basis. Customer also accepts that content supplied under this subscription is for HCSU purposes only and download and distribution of content can be done only with the express written consent of HCSU. Use of the HCSU courses is additionally subject to the terms and conditions of this Order Form and the Agreement noted above.

[Signature page follows]

By signing this Order Form, you are offering to purchase the products and services listed above. Your offer to purchase becomes a binding commitment upon acceptance by HealthcareSource, and is not subject to the issuance of any further purchase orders, confirmations or other events.

HEALTHCARESOURCE HR, INC.
100 Sylvan Rd, Suite 100
Woburn, MA 01801

**MEMORIAL HOSPITAL OF SWEETWATER
COUNTY**
1200 College Dr.
PO Box 1359
Rock Springs, WY 82901

Signature _____

Signature: _____

Print or Type Name: Aaron Noblet

Print or Type Name: _____

Title: Corporate Controller

Title: _____

Date: _____

Date: _____

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

To: Finance & Audit Committee
From: Tami Love, CFO

October 15, 2018

NARRATIVE TO SEPTEMBER 2018 FINANCIAL STATEMENT

THE BOTTOM LINE. The bottom line from operations for September was a gain of \$169,755, compared to a gain of \$183,589 in the budget. This yields a 2.48% operating margin for the month compared to 2.48% in the budget. The YTD net operating gain is \$672,576, compared to a gain of \$105,889 in the budget. This represents a YTD operating margin of 3.08% compared with .48% in the budget.

The total net gain for the month was \$64,310, compared to a gain of \$91,254 in the budget. The YTD total net gain is \$408,302, compared to a loss of \$171,114. This represents a YTD total profit margin of 1.87% compared with -.78% in the budget.

Annual Debt Service Coverage came in at 3.27. The existing bond covenants require that we maintain Debt Service Coverage of 1.25 for compliance.

VOLUME. Average inpatient census for the month was 10.4; under budget by .8. YTD average census is 11.6 compared to 11.5 in the budget and 16.1 in the prior year.

Inpatient surgeries were 5 under budget at 25 and outpatient surgeries were 17 under budget at 124. There were 6,027 outpatient visits, under budget by 109.

Total ER visits were 1,274, under budget by 45. There were 47 newborns in September, over budget by 15. Births are under budget by 16 year to date.

REVENUE. Revenue for the month was \$11,968,383, under budget by \$1,516,073. Inpatient revenue was under budget by \$418,338, outpatient revenue was under budget by \$932,470 and the employed Provider Clinic was over budget by \$165,265.

YTD total revenue was \$39,886,527, under budget by \$437,955. Inpatient revenue is under budget by \$492,581, outpatient revenue is over budget by \$14,823 and the Provider Clinic is over budget by \$39,803.

Net patient revenue for the month was \$6,179,587, under budget by \$993,473. YTD net patient revenue was \$20,855,083, under budget by \$538,555.

Deductions from revenue were booked at 48.4% for September compared to 46.8% in the budget. YTD deductions from revenue are 47.7%, compared to 47% in the budget and 47.7% for the same period in FY 2018.

EXPENSES. Total expenses for the month were \$6,687,900 under budget by \$528,656. All expense categories were under budget for September except Insurance expense and Leases and Rentals.

Insurance expense – This expense is over budget by \$5,842 and over budget \$15,180 year to date.

Leases and Rentals - This expense is over budget by \$13,326 and remains over budget year to date.

Through three months, the daily cash expense is at \$210,000, down from a high of \$236,000 in last fiscal year.

BALANCE SHEET. Operating cash at month end was \$16,584,209, an increase of \$2,490,165 from August. Collections for the month of September were \$7,609,891. The Days of Cash on Hand increased in September to 122, up thirteen days from August. The existing bond covenants require that we maintain 75 days of cash on hand for compliance.

Gross receivables at month end were \$21,945,462, a decrease of \$4,213,721 from the prior month. Net patient receivables at month end were \$11,410,718, down \$1,482,245 from last month. Days in Receivables are 50 for September, down 6 days from August.

OUTLOOK FOR OCTOBER. Gross revenue is projected to come in under budget in the Hospital and the Clinic. Inpatient admits, Patient days, Infusions, Chemo and Lab and other Outpatient visits are all projecting to come in close to budget. Surgeries, ER visits, Births and Clinic visits are projecting to be under budget in September. Gross patient revenue is projecting to come in at \$12.8M, with net revenue projecting to \$6.8M, both under budget. Collections are projecting to come in at \$6.4M, which is under budget. With expenses expected to come in around \$7M, we are projecting to a breakeven month in October.

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

To: Finance & Audit Committee
From: Tami Love, CFO

October 23, 2018

PROVIDER CLINIC – SEPTEMBER 2018

THE CLINIC BOTTOM LINE. The bottom line for the Provider Clinic for September was a loss of \$435,487, compared to a loss of \$389,194 in the budget. The YTD net operating loss is \$1,236,371, compared to a loss of \$1,390,100 in the budget.

VOLUME. Total visits were 4,097 for September, under budget by 270 visits. YTD patient visits are 12,828, over budget by 182 visits.

REVENUE. Revenue for the Clinic for September was \$1,222,216, under budget by \$168,463. YTD revenue was \$3,997,029, over budget by \$36,130. The Clinic physicians also generate hospital revenue, called enterprise revenue, which consists of various sources, including Lab, Medical Imaging and Surgery. The amount of gross enterprise revenue generated year to date through September from the Clinic is \$10,662,338. This equates to \$5,544,416 of net enterprise revenue with an impact to the bottom line of \$543,907. The gross enterprise revenue represents 26.7% of the total Hospital revenue year to date.

Net patient revenue for the Clinic for September was \$641,360, under budget by \$139,393. YTD net patient revenue was \$2,194,884, which was over budget by \$47,306.

Deductions from revenue for the Clinic were booked at 47.5% for September. In September, the YTD payer mix was as follows; Commercial Insurance and Blue Cross consisted of 55.1% of revenue, Medicare and Medicaid consisted of 38.8% of revenue and Self Pay consisted of 5.5% of revenue.

EXPENSES. Total expenses for the month were \$1,138,991, which was under budget by \$100,638. YTD expenses were \$3,623,868, which was under budget by \$117,950. The majority of the expenses consist of Salaries and Benefits; which are 84.8% of YTD total expenses. The following categories were over budget for September:

Repairs and Maintenance – This expense is over budget by \$2,299 and remains over budget \$3,059 year to date.

Leases and Rentals - This expense is over budget by \$354 and remains over budget \$1,905 year to date.

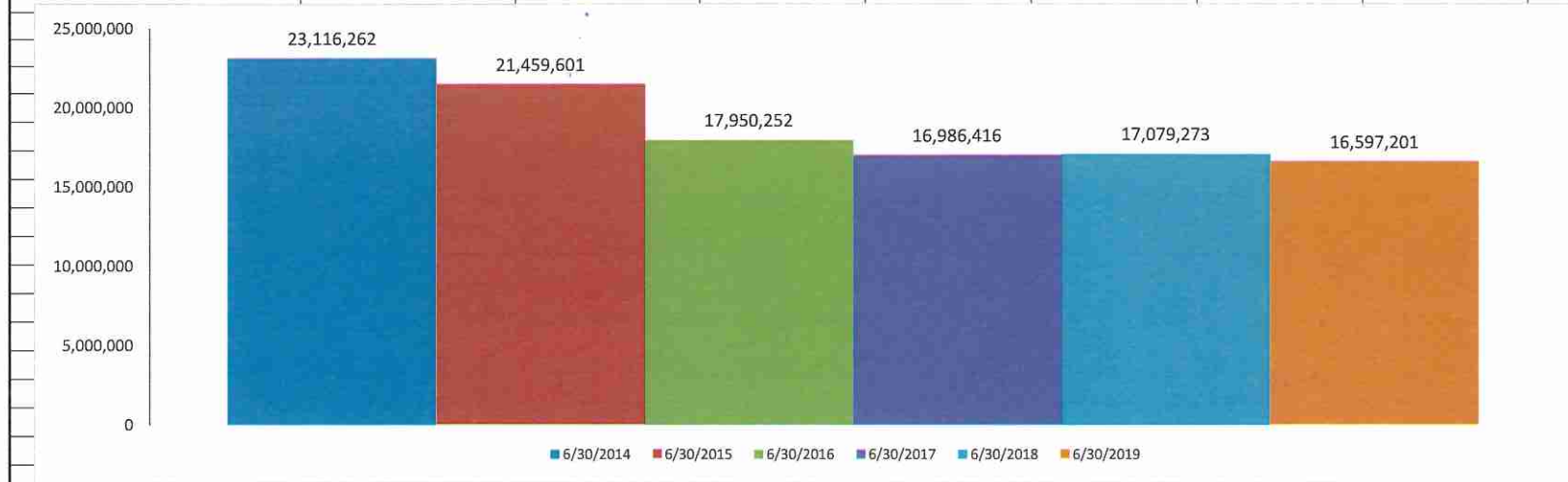
Depreciation – This expense is over budget by \$2,378 and remains over budget \$4,896 year to date.

Page 111 of 305

OVERALL ASSESSMENT. Through September, the Provider Clinic revenue plus enterprise revenue makes up 36.7% of total hospital gross patient revenue.

**MEMORIAL HOSPITAL OF SWEETWATER COUNTY
OPEN BID INVESTMENT SUMMARY REPORT
09/30/18**

ACCOUNT	FINANCIAL INST	INTEREST	6/30/2014	6/30/2015	6/30/2016	6/30/2017	6/30/2018	6/30/2019
		RATE						
GENERAL	BANK OF WEST	0.300%	8,710,751	5,295,564	4,330,411	4,362,377	4,894,328	4,904,513
RESERVE	BANK OF WEST	0.300%	1,300,000	1,300,000	1,300,000	1,300,000	1,300,000	1,300,000
GENERAL	BANK OF WEST	1.000%		2,460,272	2,983,016	2,964,992	2,474,121	2,480,927
CAPITAL DEVELOPMENT	KEYBANK	1.620%	13,001,178	12,299,119	9,231,852	8,253,433	8,303,935	7,804,410
E. BOICE	WYOSTAR	1.702%	39	39	39	40	40	40
LIFELINE	WYOSTAR	1.702%	104,294	104,607	104,934	105,575	106,849	107,311
TOTAL			23,116,262	21,459,601	17,950,252	16,986,416	17,079,273	16,597,201



INFORMATION:								
CURRENT INVESTMENT BALANCE:		\$ 16,597,201.01						
GENERAL FUND BALANCE AS OF 09/30/18		2,645,440						
REPRESENTING DAYS OF CASH ON HAND		12.60						
RECOMMENDATION:								
Recommendations on attached sheet								



Monday - October 29, 2018 Finance & Audit Committee Meeting

%date

Classrooms 1 & 2

Meeting Book - Monday - October 29, 2018 Finance & Audit Committee Meeting

Agenda

Agenda

Agenda Finance Comm October 29, 2018.docx

I. Call Meeting to Order

Marty
Kelsey
Marty
Kelsey

II. Approve Meeting Minutes

Finance and Audit Comm Draft Minutes September 26 2018.doc

III. Capital Requests FY19

Marty
Kelsey

CAPITAL REQUESTS October 29.xls

FY19-14.pdf

FY19-15.pdf

FY19-16.pdf

19 CAPITAL.xlsx

Capital Priority by Quarter.pdf

IV. Building Project Review

James
Horan

Building and Grounds-Sept.pdf

V. IT Report

Rich Tyler

IT Report Oct.docx

VI. Financial Report

A. Monthly Financial Statements & Statistical Data

Tami Love

1. Financial reports and Narratives

Tami Love

NARRATIVE TO SEPTEMBER 2018 FINANCIALS.doc

FY19 FINANCIALS COMBINED - Sept 2018.pdf

FY19 Other Operating Revenue Detail.xlsx

CLINIC NARRATIVE TO SEPTEMBER 2018
FINANCIALS.doc

FY19 FINANCIALS CLINIC- Sept 2018.pdf

FY19 FINANCIALS HOSPITAL-Sept 2018.pdf

Key Financial Ratio Definitions.pdf

19 Board Graphs Sept.pdf

19 MHSC STATISTICS-Sept.pdf

19 FTE REPORT - 093018.pdf

19 PAYOR MIX-SEPT.pdf

Days in AR-Sept.pdf

19 DAYS OF CASH & CASH VS EXPENSES-SEPT.pdf

19 BOARD LEGAL EXPENSE -SEPT.pdf

19 Cash Disbursements-Sept.pdf

2. Budget Adherence

Tami Love

B. Approve Investment Report

Tami Love

19 INVESTMENT SUMMARY 09-30-18.pdf

Investment policy current - 1996.pdf

Investment Policy-Draft.pdf

Investment Plan 102918.docx

Investment Proposal 093018.pdf

C. Other Business

1. Preliminary Bad Debt

Ron
Cheese

2. County Title 25 and Maintenance Voucher

Ron
Cheese

FY19 County Maintenance & Title 25 Voucher-Sept.pdf

VII. Old Business

Restricted Fund Accounts.pdf

VIII. New Business

A. Financial Forum Discussions

Marty
Kelsey
Marty
Kelsey

IX. Adjournment

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

Monday ~ October 29, 2018

4:00 p.m.

Classrooms 1 & 2

Voting Members:

Marty Kelsey, Chairman
Taylor Jones
Irene Richardson
Tami Love
Jan Layne

Non-Voting Members:

Ron Cheese
Angel Bennett
Rich Tyler
Kristy Nielson
Kari Quickenden
Suzan Campbell
Dr. Larry Lauridsen
Dr. Augusto Jamias

Guests:

John Kolb, Commission
Tracie Soller
Jim Horan
Amber Fisk
Leslie Taylor
Alisha Mackie

- I. Call Meeting to Order Marty Kelsey
- II. Approve September 26, 2018 Meeting Minutes Marty Kelsey
- III. Capital Requests FY 19 Marty Kelsey
- IV. Building Project Review Jim Horan
- V. IT Report Rich Tyler
- VI. Financial Report
 - A. Monthly Financial Statements & Statistical Data
 - 1. Narratives Tami Love
 - 2. Budget Adherence Tami Love
 - B. Approve Investment Report Marty Kelsey
 - 1. Investment Policy Tami Love
 - 2. Investment Plan Tami Love
 - C. Other Business
 - 1. Preliminary Bad Debt Ron Cheese
 - 2. Title 25 County Voucher Ron Cheese
- VII. Old Business
 - A. Comparator Hospitals Marty Kelsey
 - B. Restricted fund accounts donated to Foundation Tami Love
- VIII. New Business
 - A. Financial Forum Discussion Marty Kelsey
 - 1. Capital Equipment Plan Marty Kelsey
- IX. Adjournment Marty Kelsey

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
Finance & Audit Committee Meeting
September 26, 2018

Voting Members Present: Mr. Marty Kelsey, *Trustee - Chair*
Mr. Taylor Jones, *Trustee*
Ms. Tami Love, *CFO*
Ms. Jan Layne, *Controller*

Voting Members Absent: Ms. Irene Richardson, *CEO*

Non-Voting Members Present: Ms. Kari Quickenden, *CCO*
Dr. Kristy Nielson, *CNO*
Mr. Ron Cheese, *Director of Patient Financial Services*
Mr. Rich Tyler, *Director of Information Technology*
Dr. Larry Lauridsen

Non-Voting Members Absent: Ms. Angel Bennett, *Director of Materials Management*
Dr. Augusto Jamias

Guests: Ms. Bethany Bettolo, *Nursing Informatics*
Ms. Suzan Campbell, *Chief Legal Exec/General Counsel*
Ms. Leslie Taylor, *Clinic Director*
Mr. Jim Horan, *Facilities Director*
Mr. Darryn McGarvey, *CliftonLarsonAllen via telephone*
Mr. Tyler Johnson, *CliftonLarsonAllen via telephone*

Call Meeting to Order

Mr. Kelsey called the meeting to order.

Approve Meeting Minutes

A motion to approve the meeting minutes of August 29, 2018, as presented was made by Ms. Love; second by Ms. Layne. Motion carried.

Audit FY18

Mr. Johnson and Mr. McGarvey joined the meeting via telephone and reviewed the Draft Combined Financial Statements and reviewed an Audit Power Point presentation. They said they would review the information in further detail at the October Board of Trustees meeting. Mr. McGarvey said the Hospital essentially produced more revenue with less salary and wage expense. He said it was a fantastic job by everyone in the organization to get back on the right footing from a financial perspective. Mr. Johnson thanked everyone in the organization involved in the audit process. Mr. Jones asked where we compare to other comparable hospitals. Mr. McGarvey said they can “blind” their information and are happy to share that information with the Hospital. He said the Hospital should focus on driving cash-flow. Mr. Kelsey said the auditors told him in the exit interview there were five hospitals we could be compared to and Mr. Kelsey would like that information. Mr. Kelsey asked Mr. McGarvey to provide that information

to Ms. Richardson. Mr. Kelsey thanked everyone with a role in turning things around and said it was excellent work.

Capital Requests FY 18

Mr. Tyler reviewed request FY 19-8 for a version upgrade to QCPR for \$238,700. He said we have put it off as long as we can. Ms. Love said the amount requested includes some estimates for travel of \$4,400. She said the annual support is operational and not included in the capital request amount. Ms. Love said she would revise the amount on the request to \$234,300. The motion to approve the request as revised to forward to the Board of Trustees for review and a request for approval was made by Mr. Jones; second by Ms. Layne. Motion carried.

Mr. Tyler reviewed request FY 19-9 to expand the virtual server for \$155,842.67. Mr. Kelsey asked Mr. Tyler to include the second quote in the information forwarded to the Board. (Following the meeting, Mr. Kelsey asked Ms. Love via e-mail to clarify the CDW quote total of \$156,667.73 and include in the minutes.) Ms. Love will check the “budgeted” box on the form. The motion to approve the request as discussed to forward to the Board of Trustees for review and a request for approval was made by Mr. Jones; second by Ms. Love. Motion carried.

Building and Grounds Committee Report

Mr. Horan said the Building and Grounds Committee had a rather long meeting with a lively discussion of maintenance metrics. He said from now on reports will include the metrics requested. Mr. Kelsey asked how much additional burden did the request place on Mr. Horan and his staff. Mr. Horan said we are striving to make sure we give meaningful information. He said the group came to an understanding of what is the point of providing the information.

IT Report

Mr. Tyler reviewed his report in the meeting packet. He said the audio visual upgrades for the classrooms are on hold for now. Mr. Tyler said we received the final report from the IT risk assessment and he will forward the information to the full Board. He said he is reaching out to the Wyoming Health Information Exchange.

Financial Report

Monthly Finance Statements & Statistical Data

Ms. Love reviewed the narrative and financial highlights included in the meeting packet.

Approve Investment Report

The motion to approve investments as presented to forward to the Board for review and a request for approval was made by Mr. Jones; second by Ms. Layne. Motion carried.

Ms. Love reported on an MHSC investment policy she found from 1996. The information is not in Policy Stat. She asked Mr. Robb Slaughter, County Treasurer, to send her a copy of the County’s policy. Ms. Love said she cleaned up the 1996 policy and the update is very close to the original. She forwarded the updated proposed draft to Mr. Kelsey. Mr. Kelsey said we have

been talking about the Bank of the West and moving money. He said this will be on the October 3 Board agenda. Mr. Kelsey said he asked Mr. Jim Phillips, Board Legal Counsel, for his legal opinion on the investment policy Ms. Love forwarded to him. Mr. Kelsey said Mr. Phillips told him there is nothing in the policy that would prohibit us from moving our money. Ms. Love said her recommendation is to keep some money liquid. There was discussion about confusion and concern of what is currently in effect and what was sent to Mr. Phillips for review. Ms. Love said she will send the 1996 policy to Mr. Kelsey and Mr. Jones to review and compare to the updated information she sent to them that included some clean-up revisions.

Other Business

Mr. Cheese distributed the preliminary bad debt information of \$994,211 for review. The motion to forward the information to the Board for review and approval was made by Mr. Jones; second by Ms. Love. Motion carried.

Mr. Cheese reported Title 25 related vouchers have been forwarded to the County. \$19,080.15 was submitted on August 7. \$16,565.66 was submitted in September. Neither amount has been paid by the County to-date.

Ms. Love said we have submitted vouchers to the County for maintenance for \$61,971.99 and we have not received payment to-date.

New Business

Financial Forum Discussion

Mr. Kelsey said he has talked with Ms. Richardson and Mr. Richard Mathey. For a variety of reasons and for the purpose to see where we stand with like hospitals, he would like staff to come up with a list of five comparative hospitals. Mr. Kelsey said he is asking this committee and in particular Ms. Richardson, Ms. Love and Dr. Nielson to come back to the October committee meeting with the names of five hospitals that in our best professional opinion are comparable to our hospital to look at different metrics to see how we compare. He said the information won't necessarily drive decisions. Mr. Jones said it is like a weather vane. He said a lot of "low-lying fruit" is gone. Mr. Jones said if someone approaches him with a question of, "where do you see the hospital in five years?" he wants to have an answer. Mr. Kelsey said the auditors are probably not the best source for the information. He said staff can get information from public hospitals. Ms. Love said there are 26 hospitals in our area and 20 are critical access. Ms. Taylor said it might take more than a month to gather the requested information. Mr. Kelsey told staff to do their best, please work on it diligently, and sooner than later. He said he doesn't want to burden anyone but he feels it is important.

Due to the timing of Halloween, the October committee meeting is moved to Monday, October 29 at 4:00 PM.

With no further business, the meeting adjourned at 5:55 PM.

Submitted by Cindy Nelson

**MEMORIAL HOSPITAL OF SWEETWATER COUNTY
FINANCE & AUDIT COMMITTEE
CAPITAL EXPENDITURE REQUESTS**

MONDAY ~ OCTOBER 29, 2018

	YTD CAPITAL APPROVED	GRANT OR DONATION REIMBURSED	2019 APPROVED BUDGET	REMAINING YTD BALANCE
AS OF SEPTEMBER 2018	843,567.00	-	3,000,000.00	2,156,433.00

CAPITAL REQUEST #	REQUESTED ITEM/REQUESTOR	AMOUNT REQUESTED	COMMENTS
FY19-14	DR Bridge Program - Enterprise CR Tracie Soller	27,891.00	
FY19-15	Steris V-Pro Max sterilizer Alisha Mackie	111,829.00	
FY19-16	Healthcare Source HT Amber Fisk	34,025.00	

TOTAL AMOUNT REQUESTED	<u>145,854.00</u>	-	-
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Assigned: FY 19-14

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: Medical Imaging - General Rad

Submitted by: Tracie Soller

Date: 3/8/2018

Provide a detailed description of the capital expenditure requested:

DR Bridge Program Enterprise CR. - Nano and Xpress- Program designed for facilities with older Konica Minolta CR systems running Windows XP that are not yet ready to switch to Digital Radiography but want to move to a more secure platform. Solves the windows security and stability concern and brings the equipment one step closer to DR. Transitions an earlier model control Station software and computer to the latest DR-ready software and hardware platforms as well as re-establishing security by moving from XP to Windows 10.

Preferred Vendor: Konica Minolta

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

1. Renovation	\$	
2. Equipment	\$	27891.00
3. Installation	\$	
4. Shipping	\$	
5. Accessories	\$	
6. Training	\$	
7. Travel costs	\$	
8. Other e.g. interfaces	\$	
Total Costs (add 1-8)		\$ 27891.00

Does the requested item:

 Require annual contract renewal? YES NO

 Fit into existing space? YES NO Explain:

 Attach to a new service? YES NO Explain:

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

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

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

Projected Annual Procedures (NEW not existing)

Budgeted Item:
 YES NO

Revenue per procedure \$

 # of bids obtained? 1

Projected gross revenue \$

Projected net revenue \$

Projected Additional FTE's

 Copies and/or Summary attached.

If no other bids obtained, reason:

Salaries \$

This is an upgrade to existing equipment. No other vendor is able to perform this upgrade.

Benefits \$

Maintenance \$

Supplies \$

Total Annual Expenses \$

Net Income/(loss) from new service \$

Review and Approvals

Submitted by: Verified enough Capital to purchase

 Department Leader YES NO

 Vice President of Operations YES NO

 Chief Financial Officer YES NO

 Chief Executive Officer YES NO

 Board of Trustees Representative YES NO

Kamri Quickander 10-23-18

[Signature]

OTHER CONSIDERATIONS

Our CR readers are still operating on the XP windows platform. This platform is no longer supported.

The DR Bridge Program is designed for facilities with older Konica Minolta CR systems running Windows XP that are not yet ready to switch to Digital Radiography but want to move to a more secure platform. This smart investment solves the Windows security and stability concern while taking the customer one step closer to DR.

The DR Bridge Program transitions an earlier model Control Station software and computer to the latest DR-ready CS-7 software and hardware platform.

- Transition to an all new CS-7 Control Station - performed any time within the contract year. Includes new 23" multi-touch monitor.
- Re-establish security by moving from Windows XP to Windows 10
- Benefit from the latest and greatest platform software version and features and available options
- Completely protects the CR system for one year with Blue Moon Select coverage.

The DR Bridge comes with one year of Blue Moon Select for CR which includes:

*

Cassette Repair Benefit - no fault cassette & plate repair with copay

Konica Minolta will repair up to 4 cassettes for Xpress/IQue CR annually. \$150 co-pay per cassette applies. This feature excludes repairs for specialty cassettes (oncology, mammography, stitching, etc.).

Software Upgrades

Always receive the latest software version to keep up with system improvements and added features. Access to software upgrades means having the latest and greatest features and functionality in order to help maximize workflow efficiency and diagnostic capabilities. Includes installation. Optional software features may require additional purchase.

Tracie Soller Digitally signed by Tracie Soller
Date: 2018.03.08 13:12:58 -07'00'

Submitted by: Signature

3/8/2018

Date



**DIGITAL PRODUCT
SALES QUOTATION
Number : 860_76**

Revision E
08/17/2018

Presented To

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

1200 COLLEGE DRIVE
ROCK SPRINGS, WY 82901

ATTN: Nicole Manus
GPO: VIZIENT
MEMBER ID: 2872962

Presented By

Andrew Wells
Territory Manager

KONICA MINOLTA HEALTHCARE AMERICAS, INC.

411 NEWARK POMPTON TURNPIKE
WAYNE, NJ 07470
303-514-0003

andrew.wells@KONICAMINOLTA.COM



**DIGITAL PRODUCT
SALES QUOTATION
Number : 860_76**

Revision E
08/17/2018

Presented to:
MEM. HOSP.L OF SWEETWATER CO.
1200 COLLEGE DRIVE
ROCK SPRINGS, WY 82901

Presented by:
KONICA MINOLTA HEALTHCARE AMERICAS, INC.
411 NEWARK POMPTON TURNPIKE
WAYNE, NJ 07470

Contact:

Contact:
Andrew Wells
Territory Manager
303-514-0003
Scott.Yarde@konicaminolta.com

GPO : Vizient
Member ID: 2872962

This Sales Quotation is valid for 30 days from the above date

CS-7 for Nano CR s/n 090203792					
List Price					
Line	Qty	Description	Item Code	List Price	Price
1	1	<p>DR Bridge - Nano C,A, or E</p> <p>DR Bridge Program - Enterprise CR The DR Bridge Program is designed for facilities with older Konica Minolta CR systems running Windows XP that are not yet ready to switch to Digital Radiography but want to move to a more secure platform. This smart investment solves the Windows security and stability concern while taking the customer one step closer to DR.</p> <p>The DR Bridge Program transitions an earlier model Control Station software and computer to the latest DR-ready CS-7 software and hardware platform.</p> <ul style="list-style-type: none"> •Transition to an all new CS-7 Control Station - performed any time within the contract year. Includes new 23" multi-touch monitor. •Re-establish security by moving from Windows XP to Windows 10 •Benefit from the latest and greatest platform software version and features and available options •Completely protects the CR system for one year with Blue Moon Select coverage <p>Note: For DR Bridge programs for Nano, Xpress, or IQue installation, applications, and on-site labor throughout the contract year are provided by Konica Minolta unless ordered by Sentinel providers. For Konica Minolta applications, please allow 4-8 weeks for scheduling.</p> <p>Reminder: For all service needs, including technical support and scheduling applications training, please call our Technical Call Center at 800-945-0456.</p>	DRBRIDGE- NANO-CAE	\$14,995.00	\$13,495.50

	<p>The DR Bridge comes with one year of Blue Moon Select for CR which includes:</p> <p>Cassette Repair Benefit - no fault cassette & plate repair with copay Konica Minolta will repair up to 2 cassettes for Nano CR annually. \$150 co-pay per cassette applies. This feature excludes repairs for specialty cassettes (oncology, mammography, stitching, etc.).</p> <p>Software Upgrades Always receive the latest software version to keep up with system improvements and added features. Access to software upgrades means having the latest and greatest features and functionality in order to help maximize workflow efficiency and diagnostic capabilities. Includes installation. Optional software features may require additional purchase.</p> <p>Remote Technical Assistance - network and configuration changes This benefit provides remote assistance when IP addresses or other configuration setting changes are needed. Get simple access to assistance to make a change exactly when it is needed. Take advantage in the latest remote technologies to streamline support. Screen sharing is used in order to better demonstrate operation to users.</p> <p>On-Site Labor, Preventive Maintenance, and Software Updates On-site support from qualified service engineers to perform scheduled preventive maintenance or correct difficult problems. When a problem cannot be solved remotely, on-site coverage continues the support process to get the system working again. Trained engineers take over the troubleshooting so users can get back to patient care. When available, software updates - minor improvements and enhancements - are administered during on-site visits. It is the responsibility of the customer to contact Konica Minolta to schedule preventative maintenance service.</p> <p>Technical Call Center - phone support 24/7 phone support to assist with any operational support or performance anomaly. Whether the day or evening shift, users can get the dependable assistance they need with just a phone call. Phone support is the first step in problem resolution. Most of the time, a phone call is all that is needed to resolve the issue.</p> <p>Parts Coverage Normal wear and tear part exchange/replacement. Provides quick access to replacement parts when an unexpected problem occurs, minimizing downtime. Coverage does not include physical damage due to customer misuse or abuse (defined below).</p> <p>Specific Plan Terms: 1.Blue Moon Select coverage begins at the time order is received. 2.Coverage does not apply when there is physical damage due to customer misuse or abuse.</p> <p>Misuse/Abuse Includes: 1) Failure of Customer to follow the instructions in the appropriate manual for installation operation or maintenance.</p>			
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	<p>2) Failure to follow recommended cleaning protocols within the operation manual.</p> <p>3) Negligent misuse and/or negligent improper handling of such Equipment: Holes, Cracks, Tears, Deep Scratches, are typical indicators of this negligence.</p> <p>4) Repair, alteration, conversion or modification of such Equipment any component thereof, by persons other than trained, authorized, and qualified representatives.</p> <p>5) Man-made or natural disaster, theft, vandalism, neglect, abuse, use other than in accordance with the appropriate instruction manual or for purpose other for which it was designed.</p> <p>6) Component Failures directly attributed to: Power failures or surges, lightening, fire, flood, terrorist incident, actions of third parties or other events outside of the Company's reasonable control.</p> <p>7) Physical, mechanical, electrical, or magnetic stress not expressly contemplated by the appropriate instruction manual.</p> <p>8) Device fluid invasion.</p> <p>9) Use of Equipment by unqualified personnel.</p> <p>10) Serial number removed, defaced or altered from such Equipment.</p>			
Net Investment			\$14,995.00	\$13,495.50

CS-7 for Regius 210 s/n 12020048					
List Price					
Line	Qty	Description	Item Code	List Price	Price
1	1	<p>DR Bridge - Xpress or IQue</p> <p>DR Bridge Program - Enterprise CR The DR Bridge Program is designed for facilities with older Konica Minolta CR systems running Windows XP that are not yet ready to switch to Digital Radiography but want to move to a more secure platform. This smart investment solves the Windows security and stability concern while taking the customer one step closer to DR.</p> <p>The DR Bridge Program transitions an earlier model Control Station software and computer to the latest DR-ready CS-7 software and hardware platform.</p> <ul style="list-style-type: none"> • Transition to an all new CS-7 Control Station - performed any time within the contract year. Includes new 23" multi-touch monitor. • Re-establish security by moving from Windows XP to Windows 10 • Benefit from the latest and greatest platform software version and features and available options • Completely protects the CR system for one year with Blue Moon Select coverage <p>* Note: For DR Bridge programs for Nano, Xpress, or IQue installation, applications, and on-site labor throughout the contract year are provided by Konica Minolta unless ordered by Sentinel providers. For Konica Minolta applications, please allow 4-8 weeks for scheduling. *</p>	DRBRIDGE-XP-IQ	\$15,995.00	\$14,395.50

	<p>Reminder: For all service needs, including technical support and scheduling applications training, please call our Technical Call Center at 800-945-0456.</p> <p>*</p> <p>The DR Bridge comes with one year of Blue Moon Select for CR which includes:</p> <p>*</p> <p>Cassette Repair Benefit - no fault cassette & plate repair with copay Konica Minolta will repair up to 4 cassettes for Xpress/IQue CR annually. \$150 co-pay per cassette applies. This feature excludes repairs for specialty cassettes (oncology, mammography, stitching, etc.).</p> <p>*</p> <p>Software Upgrades Always receive the latest software version to keep up with system improvements and added features. Access to software upgrades means having the latest and greatest features and functionality in order to help maximize workflow efficiency and diagnostic capabilities. Includes installation. Optional software features may require additional purchase.</p> <p>*</p> <p>Remote Technical Assistance - network and configuration changes This benefit provides remote assistance when IP addresses or other configuration setting changes are needed. Get simple access to assistance to make a change exactly when it is needed. Take advantage in the latest remote technologies to streamline support. Screen sharing is used in order to better demonstrate operation to users.</p> <p>*</p> <p>On-Site Labor, Preventive Maintenance, and Software Updates On-site support from qualified service engineers to perform scheduled preventive maintenance or correct difficult problems. When a problem cannot be solved remotely, on-site coverage continues the support process to get the system working again. Trained engineers take over the troubleshooting so users can get back to patient care. When available, software updates - minor improvements and enhancements - are administered during on-site visits. It is the responsibility of the customer to contact Konica Minolta to schedule preventative maintenance service.</p> <p>*</p> <p>Technical Call Center - phone support 24/7 phone support to assist with any operational support or performance anomaly. Whether the day or evening shift, users can get the dependable assistance they need with just a phone call. Phone support is the first step in problem resolution. Most of the time, a phone call is all that is needed to resolve the issue.</p> <p>*</p> <p>Parts Coverage Normal wear and tear part exchange/replacement. Provides quick access to replacement parts when an unexpected problem occurs, minimizing downtime. Coverage does not include physical damage due to customer misuse or abuse (defined below).</p> <p>*</p> <p>Specific Plan Terms: 1.Blue Moon Select coverage begins at the time order is received.</p>			
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	<p>2. Coverage does not apply when there is physical damage due to customer misuse or abuse. *</p> <p>Misuse/Abuse Includes:</p> <p>1) Failure of Customer to follow the instructions in the appropriate manual for installation operation or maintenance. 2) Failure to follow recommended cleaning protocols within the operation manual. 3) Negligent misuse and/or negligent improper handling of such Equipment: Holes, Cracks, Tears, Deep Scratches, are typical indicators of this negligence. 4) Repair, alteration, conversion or modification of such Equipment any component thereof, by persons other than trained, authorized, and qualified representatives. 5) Man-made or natural disaster, theft, vandalism, neglect, abuse, use other than in accordance with the appropriate instruction manual or for purpose other for which it was designed. 6) Component Failures directly attributed to: Power failures or surges, lightening, fire, flood, terrorist incident, actions of third parties or other events outside of the Company's reasonable control. 7) Physical, mechanical, electrical, or magnetic stress not expressly contemplated by the appropriate instruction manual. 8) Device fluid invasion. 9) Use of Equipment by unqualified personnel. 10) Serial number removed, defaced or altered from such Equipment.</p>			
Net Investment			\$15,995.00	\$14,395.50

Amount Due:	(a) Grand Total Net Investment	\$27,891.00
	(b) Plus Applicable Taxes	\$0.00
	(c) Cash Down Payment Required	\$0.00

This Sales Quotation is Subject to the Following Terms:

1. Standard Terms. The following set forth the standard terms and conditions on which Konica Minolta Healthcare Americas, Inc. U.S.A., Inc. ("KMHA") sells products and services (the "Terms"). These Terms may be supplemented by KMHA supplemental terms and conditions, as appropriate, which deal with KMHA services and digital products. These supplemental terms and conditions, when appended hereto, shall be incorporated into and be a part of these Standard Terms and Conditions as if the same document. All KMHA quotations are subject to these Terms. Any additional terms or conditions that may be agreed to on the face of a quotation, proposal or purchase agreement, provided that such document has been signed or initialed by a duly authorized officer of KMHA, shall also be subject to these Terms. These Terms and any other documents or supplemental terms and conditions shall be collectively referred to as the "Agreement." In the case of any conflict between these Terms and any other document properly constituting part of the Agreement, the terms on such other document shall control.

2. Prices. Unless otherwise stated in writing by KMHA, all prices quoted are exclusive of transportation charges, taxes, and insurance. Typographical errors are subject to correction by KMHA. Prices quoted are for the products specified only. **UNLESS OTHERWISE SPECIFIED IN WRITING, ALL QUOTATIONS ARE FIRM FOR A PERIOD OF THIRTY (30) DAYS, EXPIRE THIRTY (30) DAYS AFTER THE DATE THEREOF, AND CONSTITUTE OFFERS.** Budgetary quotations and estimates are provided for preliminary information only and

shall not constitute offers, or impose any responsibility or liability upon KMHA of any kind or nature whatsoever.

3. Invoices, Payment, and Taxes.

(a) Invoices. KMHA shall render an invoice to Customer: (1) for the Purchase Price set forth in the quotation or proposal upon shipment of the Products to Customer. Typographical errors shall be subject to correction by KMHA.

(b) Payment Terms. (c) Taxes. All prices quoted by KMHA shall be exclusive of all taxes and duties, including without limitation sales, use, value added and other taxes, duties or levies on transactions made under the Agreement. Customer shall pay KMHA an amount equal to any tax or duty that KMHA is required to collect or pay upon the sale or delivery of the Products to Customer, exclusive of KMHA's income taxes. If a certificate of exemption or similar document is required to exempt Customer from sales or use tax liability, Customer shall obtain and furnish to KMHA evidence of such exemption with Customer's order in a form reasonably satisfactory to KMHA.

4. Order Submissions and Acceptance. All orders for Products by Customer shall be made using a purchase order, purchase letter or other similar document (each, an "Order Document"). No Order Document shall be binding upon KMHA until it has been accepted by KMHA in writing, and KMHA shall not have any liability to Customer with respect to any Order Document that is not accepted by KMHA. KMHA shall notify Customer of any rejection of an Order Document and of the assigned delivery date for accepted orders within ten (10) business days of KMHA's receipt of the Order Document.

7. Force Majeure. Any failure or delay by Supplier in the performance of its obligations under this Agreement (other than Supplier's obligations to pay Administrative Fees and other amounts due and owing under this Agreement) shall be excused to the extent the failure or delay is due to any act of God, including, but not limited to, fire, flood, storm, earthquake, war, national emergency or natural disaster, and only to the extent such failure or delay in performance is not caused in any way by Supplier's own fault or negligence ("Force Majeure Event"), provided that (i) Supplier gives Novation prompt written notice of the delay in performance due to the Force Majeure Event as soon as reasonably possible, and (ii) Supplier uses commercially reasonable efforts to minimize the effects of the Force Majeure Event and resume performance. The timeliness of Supplier's payment obligations, however, shall still be excused to the extent such delay is due to a Force Majeure Event. Notwithstanding the foregoing, should any failure to perform or delay in performance due to a Force Majeure Event last longer than thirty (30) days, Novation may terminate this Agreement by written notice to Supplier.

8. Customer's Terms and Conditions. Products furnished by KMHA are sold on the terms and conditions set forth herein as well as any supplemental terms and conditions to this document, notwithstanding any terms and conditions that may be set forth in or contained on Customer's purchase order, invoice or any other document provided or issued by Customer.

9. Acceptance. The furnishing by KMHA of any Products to Customer shall constitute acceptance of those Products UNLESS Customer delivers written notice of a defect or nonconformity to KMHA within thirty (30) days of the date on which such Products are delivered to Customer. Notwithstanding the foregoing, any use of any Product by Customer, agents or contractors, for any business purpose, after it has been delivered to Customer, shall constitute acceptance of that Product by Customer.

10. Warranty and Limitations of Warranty.

(a) KMHA warrants to Customer that, during the applicable Warranty Period each standard Product manufactured by KMHA under the Agreement shall be free of defects in materials and workmanship.

(b) Unless otherwise specified by KMHA elsewhere in the Agreement or otherwise reduced to writing and expressly approved by an authorized officer of KMHA in writing, the Warranty Period for standard Products shall be one (1) year from the date of delivery, or two thousand (2,000) operating hours, whichever occurs first.

(c) With respect to Products, to repair or, at KMHA's option, replace such Products, or any defective portion thereof. Notwithstanding the foregoing, KMHA may, as an alternative, elect to refund an equitable portion of the purchase price of the affected Product. Items expendable in normal use ("Consumables") are not covered by the foregoing warranty. All warranty replacement or repair of parts shall be limited to Product malfunctions, which, in the reasonable opinion of KMHA, are due or traceable to defects in original material or workmanship. All replaced parts shall become the property of KMHA. All obligations of KMHA under this warranty shall cease in the event of abuse, misuse, accident, alteration, or neglect of the Product. In-warranty repaired or replacement parts are warranted only for the remaining un-expired portion of the original warranty period applicable to the repaired or replaced parts or ninety (90) days, whichever is greater. After the expiration of the applicable warranty period, Customer shall be charged at KMHA's then current rates for parts, labor and transportation.

(d) Customer must use reasonable care to avoid hazards. KMHA expressly disclaims any responsibility for loss or damage caused by the use of any Products other than in accordance with proper operation procedures. No warranty is provided by KMHA for any products sold or provided to Customer by KMHA which are not manufactured or produced by KMHA, and any manufacturer's warranty for such products, if any, shall be assigned to the Customer without recourse to KMHA.

(e) KMHA DOES NOT WARRANT THAT ANY PRODUCT OR THE FUNCTIONS PERFORMED BY ANY PRODUCT WILL MEET THE REQUIREMENTS OF CUSTOMER OR OF ANY OF ITS CUSTOMERS, OR THAT THE OPERATION OF ANY SUCH PRODUCT WILL BE UNINTERRUPTED OR ERROR FREE.

(f) THE WARRANTIES SET FORTH IN THE AGREEMENT ARE IN LIEU OF AND EXCLUDE ALL OTHER WARRANTIES, EXPRESS OR IMPLIED, INCLUDING BUT NOT LIMITED TO THE WARRANTIES OF MERCHANTABILITY AND FITNESS FOR A PARTICULAR PURPOSE, AND USE OR APPLICATION, WHICH ARE EXPRESSLY DISCLAIMED, UNLESS SUCH OTHER WARRANTIES, OBLIGATIONS OR LIABILITIES ARE EXPRESSLY AGREED TO IN WRITING BY AN AUTHORIZED OFFICER OF KMHA. STATEMENTS MADE BY ANY PERSON, INCLUDING REPRESENTATIVES OF KMHA, WHICH ARE INCONSISTENT OR IN CONFLICT WITH THE TERMS OF THE AGREEMENT SHALL NOT BE BINDING UPON KMHA UNLESS REDUCED TO WRITING AND SIGNED BY AN AUTHORIZED OFFICER OF KMHA.

11. Warranty-Expendable Products ("Consumables"). KMHA warrants that, at the time of delivery to Customer, Consumables manufactured and sold by KMHA to Customer under the Agreement will be free of defects in material and workmanship and will conform to KMHA's specifications therefore or other specifications expressly agreed to in writing by KMHA. KMHA SHALL HAVE NO OTHER OR FURTHER RESPONSIBILITY THEREFOR WHATSOEVER, AND KMHA DISCLAIMS ANY IMPLIED WARRANTIES OF MERCHANTABILITY AND FITNESS FOR A PARTICULAR PURPOSE WITH RESPECT THERETO.

12. Damages and Liability. WITH THE EXCEPTION OF KMHA'S INDEMNIFICATION RESPONSIBILITIES AS SET FORTH IN ITS AGREEMENT WITH NOVATION, IN NO EVENT SHALL KMHA BE LIABLE FOR ANY INCIDENTAL, INDIRECT, CONSEQUENTIAL, OR SPECIAL LOSSES OR DAMAGES OF ANY KIND WHATSOEVER, HOWSOEVER CAUSED.

14. Intellectual Property Rights. Customer acknowledges and agrees that all rights in and to the Product(s), and all patents, copyrights, trade secrets, trademarks, trade names, and any other forms of intellectual property associated therewith, will be and remain the sole and exclusive property of KMHA. Customer will not remove, cover or deface the KMHA name or any of KMHA's trademarks included on any of the Product(s), nor will Customer have any right to use the KMHA name or any of KMHA's trademarks, or any name or mark confusingly similar thereto, in connection with its use of the Product(s).

15. Term and Termination. The Agreement will be effective as of acceptance.

Customer may terminate the Agreement for a material breach of the Agreement by KMHA so long as Customer gives KMHA thirty (30) days prior written notice specifying the events or circumstances giving rise to the notice. KMHA may terminate the Agreement for a material breach of the Agreement by Customer so long as KMHA gives Customer thirty (30) days prior written notice specifying the events or

circumstances giving rise to the notice. The termination shall become effective after the lapse of such thirty-day period, unless within such thirty-day period the events or circumstances specified in the notice have been remedied by Customer or KMHA or a plan for remedying them has been proposed by Customer or KMHA and accepted in writing by Customer or KMHA. The termination of the Agreement shall not affect Customer's rights with respect to any Product(s) purchased and paid for by Customer prior to the date of termination. The Customer's obligation to make payments of fees accrued or incurred prior to the date of termination shall survive any termination of the Agreement.

16. Assignment; Binding Agreement. Until such time as all payments have been made under this Agreement, CUSTOMER shall not assign, transfer, pledge, hypothecate, mortgage, charge, encumber or otherwise dispose of the Equipment or its rights under this Agreement without the prior written consent of KMHA. The provisions of this Agreement are binding upon all successors, administrators, trustees and permitted assigns of CUSTOMER.

18. HIPAA Privacy Regulations.

(a) General. KMHA acknowledges that it may be a Business Associate of Customer for purposes of HIPAA's Standards for Privacy of Individually Identifiable Health Information (the "Privacy Regulations"). Accordingly, from and after April 20, 2005 or any other applicable compliance date established in the Privacy Regulations (the "Privacy Compliance Date"), KMHA shall comply with all applicable regulatory standards with respect to Customer's Protected Health Information. Customer shall cooperate with KMHA in the performance of KMHA's obligations. Notwithstanding any other term or provision of the Agreement, Customer acknowledges and agrees that any failure by Customer to cooperate with KMHA and/or perform any responsibilities set forth in the Privacy Regulations may excuse KMHA from any applicable delay or nonperformance by KMHA of any obligations set forth in this Agreement.

(b) Uses and Disclosures of Protected Health Information. From and after the Privacy Compliance Date, KMHA shall use and disclose Protected Health Information only as necessary to perform its obligations pursuant to the Agreement and/or as otherwise authorized by Customer. Notwithstanding the foregoing, KMHA may use Protected Health Information received by KMHA in its capacity as a Business Associate of Customer if necessary: (i) for the proper management and administration of KMHA, and/or (ii) to carry out the legal responsibilities of KMHA. KMHA may disclose Protected Health Information received by KMHA in its capacity as a Business Associate of Customer for the purposes described in subsections (i) and (ii) of this subsection (b) only if the disclosure is: (iii) required by law; or (iv) KMHA obtains reasonable assurances from the person to whom the Protected Health Information is disclosed that it will: (1) be held confidentially and used or further disclosed only as required by law or for the purpose for which it was disclosed to the person; and (2) notify KMHA of any instances of which it is aware in which the confidentiality of the Protected Health Information has been breached.

(c) Termination for Lack of HIPAA Compliance. If, following the Privacy Compliance Date, Customer believes that KMHA may have violated a material term of any of the requirements referred to or set forth in this Section 18, as soon as reasonably possible following Customer's request, the parties shall meet (in person or by telephone) to discuss Customer's concerns. Following such meeting, KMHA shall advise Customer as to whether it agrees or disagrees with Customer's concerns. If KMHA agrees with Customer's concerns, KMHA shall, within a reasonable time, propose to Customer a plan for addressing Customer's concerns (the "Corrective Plan") and, if necessary, the parties thereafter shall engage in good faith discussions in an effort to reach agreement on the terms of the Corrective Plan. If KMHA materially fails to implement the terms of the mutually agreed upon Corrective Plan, then Customer shall have the right to terminate the Agreement. If KMHA disagrees with Customer's concerns, then KMHA and Customer shall follow the dispute resolution procedures set forth in the Agreement until the dispute has been resolved.

19. Miscellaneous.

(a) Severability. If any part, provision, or clause of the Agreement, or the application thereof to any person or circumstance, is held invalid, void or unenforceable, such holding shall not effect and shall leave valid all other parts, provisions, clauses or applications of the terms and conditions remaining, and to this end the terms and conditions contained herein shall be treated as severable.

(b) Notices. Legal notices and communications given by the Customer and KMHA to one another in connection with the Agreement shall be given in writing and delivered via return receipt mail or express delivery service to the parties' respective business addresses or to such other address as the parties' may substitute by giving notice to one another in accordance with this provision.

(c) Amendments. No modification or amendment of the Agreement or waiver of any provision of the Agreement will be valid unless in writing and signed by Customer and KMHA and specifically stating that it is a modification or amendment hereto.

(d) Governing Law. The Agreement shall be construed and enforced in accordance with the laws of the State of New Jersey.

(e) Arbitration. In the event the parties are unable to resolve, within a reasonable time, any controversy, dispute or claim arising out of or relating to the Agreement, the parties agree to first discuss the dispute informally. In the event that such discussion is not successful in resolving the dispute, then either party may submit such dispute to binding arbitration in Wayne, New Jersey, before a single arbitrator, in accordance with the Commercial Arbitration Rules of the American Arbitration Association then in effect. The arbitrator shall be required to produce a written opinion setting forth the reasons for the decision or award made. There shall be no appeal therefrom other than for bias, fraud or misconduct. Judgment upon and decision or award may be entered in any court of competent jurisdiction. Notwithstanding the foregoing, claims for equitable or injunctive relief, although subject to mediation as provided herein, shall not be subject to arbitration.

This Quotation, together with any Schedules hereto and the Standard Digital Products Terms and Conditions for the Purchase of Products and Services and the License of Software attached hereto, constitutes the entire agreement between Customer and Konica with respect to the Products, Services and Licensed Programs described herein, and supersedes all prior Quotations, understandings, inducements or conditions, express or implied, oral or written, except as herein contained. CUSTOMER, BY ITS SIGNATURE BELOW, ACKNOWLEDGES THAT IT HAS READ THIS QUOTATION, UNDERSTANDS IT, AND AGREES TO ALL OF ITS TERMS AND CONDITIONS. This Quotation shall not become effective until it has been signed by Customer and accepted by Konica at its offices in Wayne, New Jersey.

CUSTOMER: Mem. Hosp.I of Sweetwater Co.

Konica Minolta Healthcare Americas, Inc.

By:

Authorized Account Signature

Please Print or Type Name

Title: _____

Date: _____

Vizient

GPO Designation Initials

IDN Affiliation Initials

By:

Konica Minolta Territory Manager

Please Print or Type Name

Date: _____

Accepted

By: _____
Signature of Authorized Konica Minolta Officer

Please Print or Type Name

Title: _____

Date: _____

Please attach both Purchase Order and Deposit Check to this document for processing.

		# Assigned: FY <u>19-15</u>
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: Surgical Services	Submitted by: Alisha Mackie	Date: 10/12/18
Provide a detailed description of the capital expenditure requested: V-Pro Max Sterilizer-Hydrogen peroxide sterilizer		
Preferred Vendor: Steris		
Total estimated cost of project (Check all required components and list related expense)		
1. Renovation		\$
2. Equipment		\$ 153827.50
3. Installation		\$ 3001.5
4. Shipping		\$
5. Accessories		\$
6. Training		\$
7. Travel costs		\$
8. Other e.g. interfaces		\$ -45,000 (\$30k trade in, \$15k promotion)
Total Costs (add 1-8)		\$ 111,829.00
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 checked="" type="checkbox"/> NO	Electrical HVAC Safety Plumbing Infrastructure (I/S cabling, software, etc.)	\$ \$ \$ \$ \$
Annualized impact on operations (if applicable):		Budgeted Item:
Increases/Decreases		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Projected Annual Procedures (NEW not existing)		
Revenue per procedure	\$	# of bids obtained? <u>1</u>
Projected gross revenue	\$	
Projected net revenue	\$	<input checked="" type="checkbox"/> Copies and/or Summary attached. If no other bids obtained, reason: Steris is the only company that produces this type of sterilizer
Projected Additional FTE's		
Salaries	\$	
Benefits	\$	
Maintenance	\$	
Supplies	\$	
Total Annual Expenses	\$	
Net Income/(loss) from new service	\$	
Review and Approvals		
Submitted by: Alisha Mackie	Verified enough Capital to purchase	
Department Leader	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Vice President of Operations <u>CNO</u>	<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

The Steris V-pro max is an updated version of the sterilizer that we currently have the V-Pro. The V-Pro Max has the ability to sterilize all of the instruments that we are currently running through the ETO gas sterilizer. Having the ability to sterilize these items in the V-Pro Max rather than the ETO gas sterilizer is time savings. The V-Pro Max sterilizes instruments in approximately 1-1 1/2 hours and the ETO gas sterilizer takes approximately 16 hours. This will help in improving turn around time for instruments that cannot be run through the steam sterilizers. This would in turn increase staff and surgeon satisfaction as well as patient safety. This machine is used to sterilize all cameras, light cords and scopes used for laparoscopic cases, cystoscopies and some ENT procedures. The V-Pro Max can sterilize the same current instruments plus we will be able to use it to sterilize the flexible scopes like the ureteroscope, cystoscope and bronchoscope which now need to be processed in the ETO gas sterilizer. We are researching the need to keep the ETO sterilizer if this is approved.

Our current V-Pro is continuously needing service and we have to call the tech to come fix it. Steris service reports show over the past two years, we have had 4 PM's and 12 failures. The current equipment was purchased in 2011.

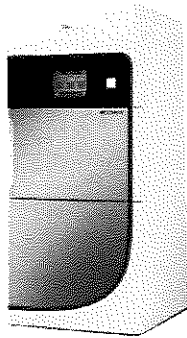
Steris specializes in this type of equipment. We have used Steris equipment in Central Sterile and Surgery for over 20 years due to the reliability of the equipment and the quick availability of the service tech. It would benefit the hospital to stay with Steris as all of our other sterilizers and washers are also from Steris. We currently stock all of the chemical sterilant, biological indicators, wraps for trays, and chemical indicator labels that will also work with the new V-Pro Max. This machine would require a maintenance contract after the first year. The current maintenance contract cost \$14,000 annually and the new contract would be comparable.

We would trade in our current V-Pro for this new sterilizer for \$30,000 credit plus an additional \$15,000 credit for the upgrade promotion.

Submitted by: Signature

Date

V-PRO[®] maX Sterilizer Cycle Overview



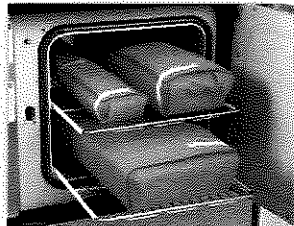
Flexible Cycle: 35 Minutes

The Flexible Cycle should be selected for:

- **Single channel** flexible endoscopes with an internal diameter of **1 mm** or larger and a length of **1050 mm** or shorter; OR
- **Dual channel** flexible endoscopes with the same diameter but a length for one channel of **990 mm** or shorter and the other channel **850 mm** or shorter.
- A maximum of 2 flexible endoscopes can be processed per load, with light cords and silicone mats.
- **Mixed Load Option:** Also may process 1 flexible endoscope that meets the claims described above, and any non lumen devices (see Non Lumen Cycle) up to 24 lbs.

Instruments that can be sterilized in the Flexible Cycle include but are not limited to:

- Olympus / Gyrus ACMI surgical endoscopes
- Intuitive Surgical daVinci[®] Endoscopes
- Bronchoscopes
- Small diameter flexible scopes, such as hysteroscopes, cystoscopes, ureteroscopes, and choledochoscopes
- Cameras, light cords, batteries
- Non Lumen Cycle devices



Flexible Cycle -Both shelves; 24 lbs

Lumen Cycle: 55 Minutes

The Lumen Cycle should be selected for:

- Stainless steel lumen instruments with a:
 - **Single channel** with an internal diameter of **0.77 mm** or larger and a length of **500 mm** or shorter
 - **Dual channel** with an internal diameter of **0.77 mm** or larger and a length of **527 mm** or shorter
 - **Triple channel** with an internal diameter of **1.2 mm** or larger and a length of **275 mm** or shorter; an internal diameter of **1.8 mm** or larger and a length of **310 mm** or shorter; OR an internal diameter of **2.8 mm** or larger and a length of **317 mm** or shorter;
- Also may process non lumen devices (see Non Lumen Cycle)
- **20 lumens per load maximum**

Instruments that can be sterilized in the Lumen Cycle include but are not limited to:

- Rigid and semi-rigid endoscopes and laparoscopic instrument sets (arthroscopes, cystoscopes, ureteroscopes)
- Batteries
- Drills, saws, and shaver systems
- Intuitive Surgical Stapler Motor Pack
- Energy based devices, such as laser or ultrasonic handpieces
- Non Lumen Cycle devices



Lumen Cycle -Both shelves; 19.65 lbs

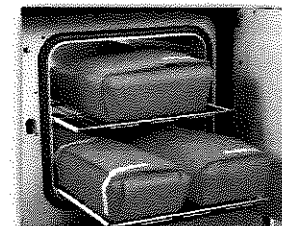
Non Lumen Cycle: 28 Minutes

The Non Lumen Cycle should be selected for:

- General medical devices requiring surface sterilization, or sterilization of mated stainless steel or titanium surfaces
- Non lumen rigid, semi-rigid and flexible endoscopes.

Instruments that can be sterilized in the Non Lumen Cycle include but are not limited to:

- Intuitive Surgical daVinci[®] Endoscopes
- Flexible non lumen scopes, such as ENT scopes
- Rigid and semi-rigid scopes, such as Hopkins telescopes
- Cameras and cables
- Laryngoscope blades
- Batteries
- Eye instruments
- Probes and transducers
- General surgery instruments without lumens



Non Lumen Cycle -Both shelves; 50 lbs

STERIS®



STERIS Corporation
5960 Heisley Road
Mentor, OH 44060-1834 • USA
440-354-2600
GLN: 0724995000004

QUOTATION

MEMORIAL HOSP OF SWEETWATER CNTY
Acct:41894 GLN: 1100004526014
1200 COLLEGE DR
ROCK SPRINGS, WY 82901, US

ATTN: Melissa Mansfield, Director of Surgical Services (Phone: 307-352-8377)

Please submit your quote and purchase order directly to your Account Manager or to
RegionalSalesSupport@steris.com

STERIS Quote No: MGREEN1010954

Revision No: 6

Date: 16-Oct-2018

Submitted By:
Mark Green, Account Manager
(801) 557-7012, mark_green@steris.com

STERIS is pleased to make the following proposal for your consideration:

TRADE-UP EXISTING V-PRO 1 TO V-PRO MAX

Melissa,

As per our conversation and your request, I am pleased to provide you this updated quotation for a new **V-Pro maX Low Temperature Sterilizer** as a Trade-up for your existing V-Pro 1 Plus unit; for **Memorial Hospital of Sweetwater County** Sterile Processing Department. This quote references our **V-Pro maX, Low Temperature, Cabinet Sterilizer** model for your consideration. I have also attached the *Technical Data Sheet* and *Cut Sheet Drawings* for your review and files. As needed I will schedule an additional site-review with our Installation Project Manager, Bill Brewer, prior to the installation.

V-PRO Sterilizer Upgrade Promotion Celerity Credit details

- Includes (1) Celerity™ 20 Incubator at no charge.

- Purchase 9 boxes (per sterilizer) of Celerity™ 20 HP Biological Indicator prior to 3/31/19, and receive either \$5,000 discount off the capital order (if purchased with capital order), or a \$5,000 credit later if purchased later once the minimum purchase is met.

If you have any questions or items I could address in greater detail, please feel free to contact me directly at (801) 557-7012 anytime. I appreciate the opportunity to be of service and look forward to working with you on this project.

Mark Green

Account Manager – Sterile Processing

(801) 557-7012 – Office

(866) 734-6627 – Fax

mark_green@steris.com

NOTICE: Sale of any Products or Services covered by this quotation is conditioned upon Buyer's assent to the terms contained herein (including the Terms and Conditions of Sale and /or the Installation Terms and Conditions included on the last page(s) of this quotation). Any additional or different terms proposed by Buyer are hereby objected to and will not be binding upon STERIS unless specifically assented to in writing by STERIS' authorized representative in Mentor, Ohio.

MEMORIAL HOSP OF SWEETWATER CNTY
Acct:41894 GLN: 1100004526014

STERIS Quote No: MGREEN1010954

Date: 16-Oct-2018

Revision No: 6



STERIS Quote No: MGREEN1010954

MEMORIAL HOSP OF SWEETWATER CNTY

Acct:41894 GLN: 1100004526014


1200 COLLEGE DR

ROCK SPRINGS, WY 82901, US



Executive Summary

Subtotal for line 1	111,829.00
Other	1,943.96
	USD 113,772.96

Item	Equipment #	Description	Quantity	Extended Book Price	Extended Discount Price
1.0000	VP30002101	V-PRO MAX Single Door Cabinet 208-230V (English) • V-PRO MAX • Contract: GR INTALERE VQ10087 LOW TEMPERATURE STERILIZATION CONTRACT LEVEL 1	1	216,000.00	153,827.50
					
1.0100	SE600962	Install Large Hydrogen Peroxide Sterilizers	1	1,705.00	1,705.00
1.0200	SE6009621	Deinstall Large Hydrogen Peroxide Sterilizer	1	785.00	785.00
1.0300	SE6045100071	Disposal of Sterilizer	1	511.50	511.50
1.0400	TRADEVPRO	Trade-In VPro	1	0.00	-30,000.00
1.0500	VPROPROMO	V-PRO Sterilizer Upgrade Promotion	1	0.00	-15,000.00
		Subtotal for line 1		219,001.50	111,829.00
2.0000	SHIPPING & HANDLING CHARGES		1	1,943.96	1,943.96
Currency: USD		Quote Total Excluding Taxes		220,945.46	113,772.96

NOTE: If we are favored with an order, please confirm available electrical power on your purchase order.
NOTE: Work to be scheduled upon receipt of purchase order.

Above pricing includes:

- Pricing extended for BUDGET CONSIDERATION only.
- Pricing quoted subject to site inspection by STERIS.

- Pricing reflects National Account Discount.

Above pricing does not include (unless otherwise specified):

- Prices do not include after hours installation.

NOTE: ALL TAXES ARE EXCLUDED UNLESS OTHERWISE STATED. IF EXEMPT, PROOF OF TAX EXEMPTION MUST ACCOMPANY ALL PURCHASE ORDERS.

NOTE: Under present circumstances, this quotation may be considered firm for thirty (30) days from this date. Acceptance later is subject to confirmation. Our quotation is extended on the basis of shipment being made within twelve (12) months after receipt of purchase order or contract. For extended shipments, add ½% per month for any subsequent period beyond (12) months.

Term of Payment: NET 30

Terms of Shipping: PPA (Prepay & Add)

FOB: Origin

DELIVERY INSTRUCTIONS

Customer Purchase Order: _____

STERIS Sales Order Number: _____

Delivery Address: _____

Dock Days: **M-F**

Dock Hours _____

Pre-call Required Yes No

Note: Carrier will call 24 hours in advance of shipment to notify of delivery the following day.

Appointment Required Yes No

Note: If appointment required, carrier will hold shipment till contact below is reached to set a delivery appointment.

Receiving Contact for Required Pre-call: **LYDIA GARCIA**

Receiving Contact Phone _____

Receiving Contact Email _____

Dock with Leveler Yes No

Standard Size Dock (48-52" High) Yes No

Accommodate 75ft x 13.5ft H Tractor Trailer (Trailer plus sleeper unit) Yes No

If no, please specify max length/height of truck that can deliver _____

Proper equipment available at Customer site to unload the equipment Yes No

Note: <1,000lbs: a pallet jack probably would suffice; >1,000lbs a fork lift would probably be the preferred method

Liftgate Required* Yes No

Inside Delivery Beyond the Dock* Yes No

If yes, provide final delivery location (e.g. Room 204, Floor 4) _____

Equipment to be delivered to a construction site Yes No

If yes, PPE may be required by carrier. Please specify what PP will be required for delivery. _____

Union Drivers Required on Site Yes No

Updated on: **1/13/2017**

* = Additional Charges Apply

MEMORIAL HOSP OF SWEETWATER CNTY
Acct:41894 GLN: 1100004526014

STERIS Quote No: MGREEN1010954

Date: 16-Oct-2018

Revision No: 6

By:
Mark Green
Account Manager

(801) 557-7012
mark_green@steris.com

Accepted For:
MEMORIAL HOSP OF SWEETWATER CNTY
Acct:41894 GLN: 1100004526014

STERIS Corporation
5960 Heisley Road
Mentor, OH 44060
Tel: 440-354-2600
Fax: 440-639-4450

Signature: _____

Title: _____

Date: _____

E-mail: _____

Purchase Order: _____

Want Date: _____

Ship To Address: _____

Bill To Address: _____

View order history and place orders for accessories, consumables and parts on-line. Visit us at <https://store.steris.com>

# Assigned: FY 19 - 14	
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: Human Resources	Submitted by: Amber Fisk - HR Director
Date: 10/5/2018	
Provide a detailed description of the capital expenditure requested: This new system will automate outdated, antiquated processes that are time wasters. This is free up time within the Hr department top focus more on the workplace experience and professional development which is part of the organizations strategic plan.	
Preferred Vendor: Healthcare Source	
Total estimated cost of project (Check all required components and list related expense)	
1. Renovation 2. Equipment 3. Installation 4. Shipping 5. Accessories 6. Training 7. Travel costs 8. Other e.g. interfaces	\$ See detailed attachment breakdown \$ \$ 24,025.00 \$ \$ \$ \$ 10,000.00 Total Costs (add 1-8) \$ 34,025.00
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 checked="" type="checkbox"/> NO	Electrical \$ HVAC \$ Safety \$ Plumbing \$ Infrastructure (I/S cabling, software, etc.) \$
Annualized impact on operations (if applicable):	
Increases/Decreases	Budgeted Item:
Projected Annual Procedures (NEW not existing)	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Revenue per procedure	# of bids obtained? 3
Projected gross revenue	
Projected net revenue	<input type="checkbox"/> Copies and/or Summary attached. If no other bids obtained, reason: Kronos -\$66,000 (not all modules avail) Vibe HCM - \$43,000
Projected Additional FTE's	
Salaries	
Benefits	
Maintenance	
Supplies	
Total Annual Expenses	\$ 60,632.00
Net Income/(loss) from new service	\$ TTL Savings \$ 993,340.00
Review and Approvals	
Submitted by:	Verified enough Capital to purchase
Department Leader	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Vice President of Operations	<input type="checkbox"/> YES <input type="checkbox"/> NO
Chief Financial Officer	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Chief Executive Officer	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Board of Trustees Representative	<input type="checkbox"/> YES <input type="checkbox"/> NO


OTHER CONSIDERATIONS

This program will allow for full automation of the HR process from hire to retirement, including training and professional development. This program allows employees to access their electronic files at any time. They may view and print, but cannot edit; applications, job descriptions, performance evaluations and basic demographic information. With this program, applicants will have an automated system to log into and save applications, update information and take behavioral assessments that help streamline the now, antiquated, print application system. If a candidate is chosen for an interview, their interview evaluations will be logged. This is important for future reference demonstrating equity in interviewing. When a candidate is selected, and hired, their information automatically populates into the active employee side of the system. Currently, all of these are manual, and logged in spreadsheets and paper filed. With the NetLearning system, regulatory requirements (learning and competencies) will automatically be assigned as well as all on-boarding activities. The individual will receive information from the HR staff on how to access their portal during our orientation process. It should be noted that all of this occurs without having to update multiple various systems within two different departments. The piece that the Education Department used to won (HLC) will now be automated and integrated within this system for consistency. This system essentially replaces any need for employees to be present in the education department. Human Resources will take over these pieces that were previously done by a Director and Assistant (1.5 FTE's). This is a total cost savings of \$ \$153,972.00 per year. The automated system will open up more time for all HR staff that can focus on training and professional development modules within the new system. This system does interface with our current HR/Payroll system which will also save time.

Performance evaluations will be completed within the system and will automatically route to various parties for review and approval. They may be signed electronically as well. Employees may access current and previous evaluations to help stick to expectations and goal setting. Competencies will be automated which is a regulatory requirement for The Joint Commission, and easily accessible when surveys are being done.

Currently, we have many forms that must be signed by many parties in order to request a position, transfer a position, change a wage or department, termination etc. All of these will be automated with the new system.

Education FTE savings: \$133,972.00 - Learning System Cost (current) \$20,000.00 (all annual).
New system annual cost (no new FTE's needed) - \$60,632.00. The maintenance cost has been budgeted in the fiscal year 19 budget.



Digitally signed by Amber Fisk
Date: 2018.10.08 10:18:42 -06'00'

10/08/2018

Submitted by: Signature

Date

ORDER FORM

HealthcareSource Software and Services

The services described within this Order Form are provided to Memorial Hospital of Sweetwater County ("Customer") pursuant to the HealthcareSource HR, Inc. ("Licensor") Software Master Subscription Agreement set forth at: <http://www.healthcaresource.com/legal-documents/23-about-healthcaresource/173-software-subscription-agreement.html> (the "Agreement"), the terms of which are incorporated into this Order Form. Any term not defined herein shall have its meaning given in the Agreement. If any conflict exists between any of these documents, the Agreement will govern, followed by this Order Form.

1. Order

Contracting Parties: This Order Form is made between Licensor and the following party:

Customer:	Memorial Hospital of Sweetwater County	P.O. Number:	
Customer Address:	<i>1200 College Drive PO Box 1359 Rock Springs, WY 82901</i>		
Customer Contact:	Amber Fisk, Director of HR	Contact Details:	307.362.3711 afisk@sweetwatermemorial.com

Initial Term: The Initial Term of Customer's subscription shall be twelve (12) months from the latest signature date below ("Effective Date"). Renewal of the Initial Term shall be made in accordance with terms of the Agreement.

Services Ordered: Customer orders the products and services below (collectively, the "HealthcareSource Services"):

Position Manager®	Service Description
Position Manager	<p>Position Manager is an applicant tracking system that allows you to manage and engage candidates throughout the entire recruiting process. This includes setting up the requisition, defining your approval process, pre-qualification questions and ranking questions as well as creating job postings.</p> <p>Our customizable career site portal includes searchable job postings and an application process that is designed to meet your organization's unique needs.</p> <p>You can build a database of candidates, with interview history and qualifications, and can search for candidates by name, status, date, and more. Sending applications to your hiring manager is automated through email or login to the system which includes the ability to score, rank and compare candidates.</p> <p>We also have a robust reporting system with over 35 standardized reports to help understand all aspects of your recruitment process. These reports allow basic customization but we also include 5 completely customized reports that may be unique to your organization.</p>
Onboarding	<p>Our Onboarding portal automates the new hire paperwork and onboarding process. All new hire forms and new hire actions are online. You can also define your custom welcome message.</p> <p>The required data for these forms (such as name, address, telephone number, department, manager's name, etc.) is automatically pre-populated.</p>

	10 Onboarding forms are included. Additional forms may be added at the then- current rate.
FTP Site	The FTP Site allows secure transfer of data between Position Manager and the customer's HRIS.
Applicant Attach A Document	Allows applicants to upload a document which gets submitted in addition to their online application. The document can be viewed by Position Manager and Hiring Manager users.
Requisition Attach a Document	Allows hiring managers to attach a document to a requisition when they create the requisition. The document can be opened and viewed by approved users and Position Manager users in Human Resources and the document remains attached to the requisition indefinitely.
Lean Human Capital Services	<p>The Recruiter Academy: Customer will receive two (2) seat(s) to the Recruiter Academy Certified Recruiter (RACR) program. Customer must use the RACR seats within twelve (12) months of receipt. Unused RACR seats expire and will not carry over to the next year.</p> <p>Core Recruitment Benchmark Solution:</p> <ul style="list-style-type: none"> • Immediate access to the "2016 Core Recruiting Benchmark Report"; • Access to the Core Recruiting Benchmark cloud solution; and • Annual Advisory Review call (up to 2 hours). <p>Lean Optimization Analysis:</p> <ul style="list-style-type: none"> • Lean PM Optimization Analysis & Best Practice Review • Thorough analysis of your current recruitment process from requisition approval to first day of employment: <ul style="list-style-type: none"> ○ LHC will host discovery call to identify Best Practices already implemented, and ways to reduce non-value added activities throughout the entire process. • LHC will provide detailed performance improvement recommendations: <ul style="list-style-type: none"> ○ To include implementation of Lean Process Best Practices. ○ To include a detailed Road Map to be used as a project plan to prioritize and manage implementation during your Recruitment Transformation Journey.
Web-Based Training	<p>Licensors will provide up to eight hours of formal web based training via WebEx and at least 12 weekly calls where additional information, site review and training is provided for the Client. Training includes the following sessions:</p> <ul style="list-style-type: none"> • HR Training 1 – 2 hours (HR Users) • HR Training 2 – 2 hours • Administrator – 2 hours (System Admins) • Hiring Manager (Either WebEx session for managers or Train the Trainer) – 1 hour • Follow-up/Advanced Training - 1-1.5 hours
Assessments	Service Description
Staff AssessmentSM	Staff Assessment is a predictive, online, behavioral-based assessment designed to:

	<ul style="list-style-type: none"> • Increase new-hire retention; • Identify applicants in terms of “fit”; • Provide interviewers with a structured, behavioral-based interview process; and • Develop incumbent staff members by prescribing specific solutions to enhance on-the-job performance. <p>It has been designed and validated to identify top performers for five Job Families: Nursing, Patient Care, Entry-Level Service, Administrative/Clerical, and Technical/Professional.</p> <ul style="list-style-type: none"> • The Nursing Critical Thinking Assessment is included which assesses the critical thinking aptitude of incumbent nurses and provides prescriptive solutions to assist nurses in improving their critical thinking aptitude.
Leadership AssessmentSM	<p>Leadership Assessment is a predictive, online, behavioral-based assessment that evaluates critical leadership competencies (including critical thinking) and is designed to:</p> <ul style="list-style-type: none"> • Identify candidates who are most likely to succeed as healthcare leaders; • Provide interviewers with a structured, behavioral-based interview process; and • Develop incumbent leaders by prescribing specific solutions to enhance on- the-job performance.
Reference AssessmentSM	<p>Reference Assessment is a predictive, online reference assessment solution that makes collecting references an easy and value-added step in your hiring process. This solution overcomes the traditional reference challenges on three levels:</p> <ul style="list-style-type: none"> • Automation • Accountability • Assessing a candidate's “fit”
Web-based Training	<p>Web-based training includes:</p> <ul style="list-style-type: none"> • Review of the Staff/Leadership/Reference Assessment(s)/Feedback Report(s), tips and techniques on best-practice use of the Assessment(s), Question & Answer, etc.
Performance Manager[®]	Service Description
Performance Manager	<p>Performance Appraisals - automated and paperless appraisals, 360 feedback reviews, goal setting, available job history and online tasks and reminders with capability to define what type of performance and skills are required by each employee.</p> <p>Feedback - Feedback provides a way for managers to evaluate and inform employees of their performance and create action plans. Feedback is a way to increase interaction between managers and employees to ensure performance is on par with expectations and potential.</p> <p>Performance Reporting – includes over 20 standard reports that will measure manager and employee effectiveness, achieve on-time</p>

	completion metrics for appraisals, goals and actions plans as well as help define achievable organizational goals.
HRIS Feeds	<p>Customer will be responsible for creating import scripts, on a regular basis, from their HRIS system to be uploaded on the FTP site provided by HealthcareSource. Licensor will create scripts to retrieve uploaded files and load them into the Performance Manager system, on a regular basis.</p> <p>The following are the defined script files to be created and exported in CSV format to the FTP site:</p> <ul style="list-style-type: none"> • Facility data • Department data • Position data • Employee data • Employee per-position data • License/certification (optional) • Electronic contacts (email addresses) (optional)
Job Description Data Entry	HealthcareSource will perform the work necessary to enter up to 1,000 of Customer's job descriptions into the system. Job descriptions must be provided by Customer in a format capable of being copied.
Training	Will provide Webex-type training for Customer's human resources staff and up to two administrators designated by Customer, who will then be responsible for training additional Customers employees. Fee <u>does not</u> include travel expenses.
NetLearning®	Service Description
NetLearning®	<p>LearningAdministration. The component of the NetLearning used for administration of training records including but not limited to creating courses, scheduling training, and generating reports.</p> <p>MyNetLearning. The component of the NetLearning Software designed to deliver training schedules, a list of training requirements, a report of transcripts, and training content to anyone granted access by the Licensee for purposes of participating in the training process.</p> <p>HealthcareSource Premium eLearning LibrarySM. The computer-based learning courses, owned by NetLearning and licensed to Licensee, that contain training content in a format that can be delivered through and administered by the Software. This purchase includes the courses listed on Schedule 2 of this Order Form ("Complementary Courses") which consists of the Core and Premium Compliance Courses ("Courses"). The Complementary Courses are subject to change, removal or replacement in Licensor's sole discretion, and certain course offerings may not be available for the entirety of the Term of this Order Form.</p> <p>HealthcareSource UniversitySM. For a period of three (3) months commencing on the Effective Date, access to online training courses will be provided at no charge. Customer will then have the option to purchase additional access at Licensor's current price offering for HealthcareSource University.</p> <p>The subscription is granted <u>ONLY</u> to the number of Authorized Users noted in Schedule 1</p>

NetManager	WEB-based software that allows floor supervisors to manage employee requirements for training.
NetCompetency®	WEB-based software that allows floor supervisors to track, manage and report on the competencies of every individual in the organization, all from one centralized software application. Seamlessly integrate this product with our LMS product to assign competencies to staff in conjunction with their other training requirements. Licensor personnel shall provide Customer with six (6) hours of web-based training and two (2) hours of step-up assistance/consultation regarding the use of NetCompetency.
Skills Data Entry	HealthcareSource will perform the work necessary to enter up to 1,000 of Customer's job skills into the system. Job skills must be provided by Customer in a format capable of being copied.
HealthcareSource University	Access to online courses, live Web-ex classes and one-on-one sessions that provide training services. The subscription is granted ONLY for the number of seats noted in Section 3(d) of this Order Form.
Web-based Training	Licensor personnel shall provide Customer with twelve (12) hours of web-based training regarding the use of the Learning Administrator and myNetLearning.

2. Summary of Fees

Annual Fees	
Position Manager with Lean Human Capital services	\$19,708.00
Reference Assessment	\$0.00
Staff Assessment	\$6,600.00
Leadership Assessment	\$2,640.00
Performance Manager	\$15,400.00
NetLearning	\$8,245.00
Premium eLearning Library	\$2,274.00
NetCompetency	\$4,117.00
HealthcareSource University	\$1,644.00
Total Annual Fee:	\$60,632.00
Set Up (for Facilities listed in Schedule 1)	

One-Time Fees	
Position Manager Implementation	\$5,500.00
Staff Assessment Implementation	\$660.00
Leadership Assessment Implementation	\$265.00
Performance Manager Implementation	\$8,250.00
Job Description Data Entry	\$2,200.00
NetLearning Implementation	\$2,750.00
NetCompetency Implementation	\$1,650.00
Skills Data Entry	\$2,750.00
Total One-Time Fee:	\$24,025.00

Total Fee Year 1:	\$84,657.00
--------------------------	--------------------

Prices valid through 11.30.18

Payment Terms: Total Fee Year 1 is due in full upon the receipt of invoice. For all training services, travel costs (if applicable) will be billed at Licensor's cost. If Customer is a tax exempt organization, Licensor requires a tax exempt certificate at the time of execution of this Order Form in order to exclude any applicable taxes from Customer's invoice.

3. Additional Terms

- a) **Facilities:** Customer agrees that this Order Form and the Licensor Products selected above are solely for the use and benefit of the total employees enumerated ("Population Size") at the facilities listed in the attached "Facilities List" (Schedule 1).
- b) **Customized Content:** If Licensor is to provide customized content to Customer in connection with the Services provided under this Order Form, in addition to the provisions of Section 6 of the Agreement, Customer agrees to the *Terms and Conditions of Content Customization* attached hereto as Schedule 3.
- c) **Facilitation of NetLearning Software Implementation:** Licensor shall provide the following implementation services:
 - a. In accordance with the terms and conditions set forth in Schedule 4 hereto, Licensor shall prepare two (2) types of "Import Templates" within the Learning Administrator to import employee records from ASCII data files that have been exported by Customer from the Customer's existing data files.
 - b. In accordance with the terms and conditions set forth in Schedule 3 hereto, Licensor shall provide up to ten (10) hours of Content Customization services. Upon completion of the Content Customization process, the customized CBL Modules shall be delivered to Customer in electronic format.
- d) **HealthcareSource University License:** The subscription granted is for up to five (5) seats. One seat is defined as one student attending any available HCSU offered class. Seats in a specific class are granted on a first come, first served basis. Customer also accepts that content supplied under this subscription is for HCSU purposes only and download and distribution of content can be done only with the express written consent of HCSU. Use of the HCSU courses is additionally subject to the terms and conditions of this Order Form and the Agreement noted above.

[Signature page follows]

By signing this Order Form, you are offering to purchase the products and services listed above. Your offer to purchase becomes a binding commitment upon acceptance by HealthcareSource, and is not subject to the issuance of any further purchase orders, confirmations or other events.

HEALTHCARESOURCE HR, INC.
100 Sylvan Rd, Suite 100
Woburn, MA 01801

**MEMORIAL HOSPITAL OF SWEETWATER
COUNTY**
1200 College Dr.
PO Box 1359
Rock Springs, WY 82901

Signature _____

Signature: _____

Print or Type Name: Aaron Noblet

Print or Type Name: _____

Title: Corporate Controller

Title: _____

Date: _____

Date: _____

MHSC Capital Budget for FYE 6/30/2019

Department	ITEM	Approved	Purch/Amt	Variance	FY#
Facilities	MOB Duct Renovation	278,240	27,327	(250,913)	FY19-1
Cancer Center	Looking Glass/ARIA equipment	9,168	9,168	-	FY19-2
Urology	Flexible Video Cystoscope	29,984	29,984	-	FY19-4
IT	Desktop Computers	55,938	55,223	(715)	FY19-5
IT	Laptop Computers	32,652	32,652	-	FY19-6
Cancer Center	Looking Glass/ARIA equipment	1,476	1,020	(455)	FY19-7
IT	Quadramed Electronic Health Record Upgrade	234,300	234,300	-	FY19-8
IT	Virtual Server Upgrade	155,843	155,843	-	FY19-9
Facilities	2019 Can Am 4 Wheeler w/ Plow	6,987	6,987	-	FY19-10
IT	WAN Bandwith upgrade	16,985	16,985	-	FY19-11
IT	iPrism internet content filter appliance	21,995	21,995	-	FY19-12
Respiratory	Trilogy Transport Ventilator	11,697			FY19-13
				-	
Total Budgeted		3,000,000	591,484	(252,083)	

Capital Expenditure Dollars Authorized		<u>855,264</u>
Less Donated Capital		
FY19-13 Trilogy Transport Ventilator	Foundation purchase	(11,697)
		<u>(11,697)</u>
Net Capital Outlay FYTD 2019		<u>843,567</u>
Remaining Balance FY2019 Capital Budget		<u>2,156,433</u>

Capital Expenditures Budget

Budget For The Year Ending 6/30/2019

Department	Requested Item	Priority	Number of Units	Capital Budget	Notes	FY#
Quarter 1: July - September						
MAINTENANCE	MOB duct return project	1	1	\$278,240	approved	FY19-1
IT	Looking Glass equipment			\$9,168	approved	FY19-2
CLINIC - Urology	Cystoscope		1	\$29,984	approved	FY19-4
IT	Desktop Computers and Monitors	3	50	\$55,938	approved	FY19-5
IT	Laptops for Providers and Replacements	2	18	\$32,652	approved	FY19-6
IT	Looking Glass equipment			\$1,438	approved	FY19-7
IT	Upgrade QCPR to Version 6.2	4	1	\$234,300	approved	FY19-8
IT	Virtual Environment upgrade	1		\$155,843	approved	FY19-9
IT	WAN Bandwith upgrade	5	1	\$16,985	approved	FY19-11
IT	iPrism internet content filter appliance	5	1	\$21,995	approved	FY19-12
				\$836,543	\$836,543	
Quarter 2: October - December						
MAINTENANCE	2019 Can-Am 4-wheeler with Snow Plow		1	\$6,987	approved	FY19-10
HR	Healthcare Source HT	1	1	\$34,025		FY19-16
RADIOLOGY	DR Bridge Program Enterprise CR	1	1	\$27,891		FY19-14
SURGERY	V-Pro Max Sterilizer	4	1	\$111,829		FY19-15
IT	Upgrade Mirth appliances			\$12,000	approved	FY19-18
CANCER CENTER	Centricity software update			\$9,852	approved	FY19-17
MAINTENANCE	Central Plant Upgrade phase 1	6	1	\$269,000		
IT	Replace Core Network Switches	6	1	\$80,269		
LABORATORY	Automated Urinalysis Analyzer	1	1	\$130,195		
IT	QCPR Server upgrade	7	1	\$120,000		
				\$802,048	\$1,638,591	
Quarter 3: January - March						
SURGERY	Endoscopic System Replacement	3	1	\$331,834		
MAINTENANCE - Other Depts	Engineering Medical Imaging remodel	5	1	\$15,000		
MAINTENANCE - Other Depts	OR Architectural/Engineering/Redesign of patient spaces	8	1	\$90,000		
MAINTENANCE	IT Heat Resolution	7	1	\$85,000		

CARDIOPULMONARY	Muse Cardiology IS	1	1	\$174,094	
OB	Fetal Monitor Carts	1	1	\$9,095	possible grant
BLOOD BANK	Automated Blood Bank Analyzer	1	1	\$113,500	
LABORATORY	Fluorescent Microscope	5	1	\$7,371	
BLOOD BANK	Blood Bank double door refrigerator	4	1	\$13,196	
				\$839,090	\$2,477,681

Quarter 4: April - June

RADIOLOGY	Digital Portable X-Ray Unit #2	2	1	\$172,535	possible grant
RADIOLOGY	Digital Portable X-Ray Unit #1	3	1	\$172,535	possible grant
RADIOLOGY-ECHO	EPIC 7C Cardiac Ultrasound System	4	1	\$151,557	
RADIATION ONCOLOGY	Sterotactic Cone System	2	1	\$96,015	
OB	Wireless Fetal Monitor	2	1	\$5,308	possible grant
SECURITY	Replace old Inet Operating Control Boards	1	1	\$35,454	
LABORATORY	Centrifuge, replacement	3	1	\$6,810	
LABORATORY	Refrigerator	4	1	\$7,196	
BLOOD BANK	Blood Bank -20 degrees freezer	3	1	\$10,573	
RADIOLOGY	DR for the GE Precision 500	5	1	\$88,560	
DIETARY	Refrigeration Unit For Cooks Line	3	1	\$12,889	
DIETARY	Conveyor Belt Dishwasher	4	1	\$47,000	
DIETARY	Posiflex 2	5	1	\$5,079	
				\$811,511	\$3,289,192

Grants 345,000.00 Helmsley

MAINTENANCE-College Hill	Fire Notification System	2	1	\$24,957	tabled	FY19-3
DIETARY	Walk-In Cooler and Freezer Units/Including Renovation	1	1	\$81,588	Foundation	FY19-19
SURGERY	Percutaneous Nephrolithotomy System	2	1	\$11,920	Foundation	
LABORATORY	-20 degrees freezer	2	1	\$7,088	Foundation	
BLOOD BANK	Blood Bank Cell Washer	2	1	\$7,403	Foundation	
RESPIRATORY	Respironics Trilogy Vent	2	1	\$11,687	Foundation	FY19-13
RADIATION ONCOLOGY	18x Photon Beam	1	1	\$35,512	Foundation	
SURGERY	Pediatric Foreign Body Removal	1	1	\$31,453	Foundation	
CLINIC	Wall mounted otoscopes and ophthalmoscopes		32	\$11,002	Foundation	FY19-20
				\$197,653		

BUILDING AND GROUNDS COMMITTEE
Memorial Hospital of Sweetwater County

10/16/2018

Trustee Committee Members Present: Ed Tardoni, Barbara Sowada

Committee Members Present: Irene Richardson, Jim Horan, Tami Love

Guests Present: Gerry Johnston, John Kolb, Leslie Taylor

Minutes taken by: Cindy Nelson

Location: Classroom 1

Time Started: 3:30PM

TOPIC	DISCUSSION	RESPONSIBLE	ACTION	TIMELINE
Review Minutes	Minor edits	E. Tardoni	Approved	None
Maintenance Metric #1, Number of open W/O's?	221	J. Horan/S. Nosich	Continue to report each month	Report each meeting
Maintenance Metric #2. Number of open W/O > 30 days?	198... October open W/O = 23	J. Horan/S. Nosich	Continue to report each month	Report each meeting
Maintenance Metric #3. Amount of OT for the month?	Projected slightly more OT than usual due to office moves for return duct project in MOB and the beginning of the snow removal season.	J. Horan	Continue to report each month	Report each meeting
Maintenance Metric #4. Over/ under budget for the month?	Projected slightly over budget for the month due to Building Automation issues the needed to be resolved.	J. Horan	Continue to report each month	Report each meeting
Laundry upgrade	Plan to start this winter to resolve issues	J. Horan	Give update.	Next Meeting
Itemized Maintenance projects.	<ol style="list-style-type: none"> Collapsing retaining wall. Seal mechanical room floor. 	J. Horan	<ol style="list-style-type: none"> Go to bid in Jan/ Feb. 2019 This autumn. 	Review progress next meeting.
Wyoming Department of Health (WDH) inspection of our Medical Office Building (MOB) and 3000 College Hill (CH)	Several items will need to be addressed for licensing by WDH: <ol style="list-style-type: none"> Return-air ducts for invasive procedure rooms. Work has begun. General Surgery is almost completed. ENT suite is the next phase. Contractor is performing work conscientiously and carefully. 	J. Horan/ C. Raddakovich	<ol style="list-style-type: none"> Give update. 	Review progress next meeting.
Utility systems upgrades	Discussed engineered phasing	J. Horan	Awaiting proposal from ST&B	Review progress next meeting.
Power-point presentation	Showed various photos depicting work performed over the previous month.	J. Horan	Noted	None
Time Adjourned: 4:30P				
Next Meeting: November 20, 2018 3:30P-4:30P				
Respectfully Submitted: Jim Horan				

Finance and Audit Committee

IT report

October 2018

Rich Tyler

1. Tsystem production environment has been upgraded to the latest version.
2. Kicked off auditing software implementation. Currently looking at a go-live in March 2019.
3. Continuing working with the Cancer Center team and Pharmacy team to implement the new Looking Glass software. Also working to implement Varian Aria for the medical oncology department. Possible go-live in Jan 2019.
4. Upgraded Iprism content filter and Fatpipe WAN aggregation device in preparation to upgrade internet speed to 1Gig. Waiting on AllWest to schedule an install and provide us with an activation date.
5. Kicked off implementation to connect to Wyoming HIE (Health Information Exchange). Currently sending example interface messages and working with vendors to verify data structure. I was also voted in to service on the executive committee of the Wyoming HIE.
6. Set up a webinar with a few providers to explain what the Utah state HIE currently offers us, and how they can utilize it to retrieve patient information submitted by hospitals and providers throughout Utah.
7. Took delivery of 50 desktops/monitors as well as new laptops for the providers. Currently working on imaging those and preparing for a roll out of the laptops. The desktops will be rolled out as needed and to replace older computers throughout the facility.
8. Scheduled to take delivery of virtual server expansion hardware in November to allow for server migration and growth.
9. Finalizing quotes to migrate Mirth Connect (interface engine) from current outdated appliances to new virtual environment.
10. Investigating new Antivirus software with possible implementation in December or January.

IT News and Info:

1. The files of an estimated 75,000 individuals were accessed in a breach of Healthcare.gov for ACA enrollment according to CMS. CMS on behalf of HHS (Dept of Health and Human Services), has the authority to investigate and audit hospitals and providers for compliance with HIPAA standards and security rules.
2. The Fetal Diagnostic Institute of the Pacific (Hawaii) was hit with ransomware in June that potentially breached the data of 40,800 patients.
3. Portland Oregon based Legacy Health notifies 38,000 patients that a phishing attack may have breached their data.
4. UnityPoint Health in Wisconsin is notifying 1.4 million patients that their records may have been breached when its business system was compromised by a phishing attack.
5. Anthem Health was breached back in 2015 and exposed PHI of 79 million people. The department of Health and Human Services, DHS, settled the case and Anthem agreed to pay DHS \$16 million for the data breach. Also, Anthem has agreed to pay \$115 million to settle lawsuits over that data breach.

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

To: Finance & Audit Committee
From: Tami Love, CFO

October 15, 2018

NARRATIVE TO SEPTEMBER 2018 FINANCIAL STATEMENT

THE BOTTOM LINE. The bottom line from operations for September was a gain of \$169,755, compared to a gain of \$183,589 in the budget. This yields a 2.48% operating margin for the month compared to 2.48% in the budget. The YTD net operating gain is \$672,576, compared to a gain of \$105,889 in the budget. This represents a YTD operating margin of 3.08% compared with .48% in the budget.

The total net gain for the month was \$64,310, compared to a gain of \$91,254 in the budget. The YTD total net gain is \$408,302, compared to a loss of \$171,114. This represents a YTD total profit margin of 1.87% compared with -.78% in the budget.

Annual Debt Service Coverage came in at 3.27. The existing bond covenants require that we maintain Debt Service Coverage of 1.25 for compliance.

VOLUME. Average inpatient census for the month was 10.4; under budget by .8. YTD average census is 11.6 compared to 11.5 in the budget and 16.1 in the prior year.

Inpatient surgeries were 5 under budget at 25 and outpatient surgeries were 17 under budget at 124. There were 6,027 outpatient visits, under budget by 109.

Total ER visits were 1,274, under budget by 45. There were 47 newborns in September, over budget by 15. Births are under budget by 16 year to date.

REVENUE. Revenue for the month was \$11,968,383, under budget by \$1,516,073. Inpatient revenue was under budget by \$418,338, outpatient revenue was under budget by \$932,470 and the employed Provider Clinic was over budget by \$165,265.

YTD total revenue was \$39,886,527, under budget by \$437,955. Inpatient revenue is under budget by \$492,581, outpatient revenue is over budget by \$14,823 and the Provider Clinic is over budget by \$39,803.

Net patient revenue for the month was \$6,179,587, under budget by \$993,473. YTD net patient revenue was \$20,855,083, under budget by \$538,555.

Deductions from revenue were booked at 48.4% for September compared to 46.8% in the budget. YTD deductions from revenue are 47.7%, compared to 47% in the budget and 47.7% for the same period in FY 2018.

EXPENSES. Total expenses for the month were \$6,687,900 under budget by \$528,656. All expense categories were under budget for September except Insurance expense and Leases and Rentals.

Insurance expense – This expense is over budget by \$5,842 and over budget \$15,180 year to date.

Leases and Rentals - This expense is over budget by \$13,326 and remains over budget year to date.

Through three months, the daily cash expense is at \$210,000, down from a high of \$236,000 in last fiscal year.

BALANCE SHEET. Operating cash at month end was \$16,584,209, an increase of \$2,490,165 from August. Collections for the month of September were \$7,609,891. The Days of Cash on Hand increased in September to 122, up thirteen days from August. The existing bond covenants require that we maintain 75 days of cash on hand for compliance.

Gross receivables at month end were \$21,945,462, a decrease of \$4,213,721 from the prior month. Net patient receivables at month end were \$11,410,718, down \$1,482,245 from last month. Days in Receivables are 50 for September, down 6 days from August.

OUTLOOK FOR OCTOBER. Gross revenue is projected to come in under budget in the Hospital and the Clinic. Inpatient admits, Patient days, Infusions, Chemo and Lab and other Outpatient visits are all projecting to come in close to budget. Surgeries, ER visits, Births and Clinic visits are projecting to be under budget in September. Gross patient revenue is projecting to come in at \$12.8M, with net revenue projecting to \$6.8M, both under budget. Collections are projecting to come in at \$6.4M, which is under budget. With expenses expected to come in around \$7M, we are projecting to a breakeven month in October.

TRENDS IN HEALTH CARE FINANCE.

Medicaid Eligibility and Reimbursement

CMS recently reported plans to approve more of the pending work requirement waivers for Medicaid enrollees. State waivers that require work or other community engagement activities have been approved in four states, with seven other states' waivers being reviewed by CMS. With Medicaid expansion under the Affordable Care Act in 2016, a recent projection shows Medicaid spending reaching \$1 trillion by 2026. Federal scrutiny has risen with the increase in both the number of Medicaid plans and the number of beneficiaries that are covered by those plans. CMS has announced the launch of eight program-integrity initiatives aimed at minimizing spending. These include targeted audits of actual claims data, eligibility determination, State rate-setting processes and supplemental Medicaid payments.

Effects on MHSC - Medicaid expansion was not passed in Wyoming. Previous legislative budget session cuts resulted in \$10 million in reductions of Medicaid reimbursements. In a previous analysis of possible Medicaid expansion, we estimated an additional \$7 million in patient revenue would have qualified for Medicaid under the expansion. These dollars were ultimately written off to bad debt and charity care.

While MHSC hasn't contributed to the increased costs due to the ACA and Medicaid expansion, we will likely be affected by these new initiatives. In the past few years, Medicaid has continually cut our reimbursements. Wyoming Department of Health reduced their general fund by \$90 million with corresponding federal matching funds cut by \$43.4 million, totaling \$143.4 million in reductions for the FY17 & 18 biennium.

While the Medicaid population has stayed relatively even at around 9.5% of total revenue over the last 5 years, Medicaid payments decreased by \$760,000 from fiscal year 2017 to fiscal year 2018. In Wyoming, Medicaid eligibility is already very difficult. With the added work requirements and eligibility initiatives, we are facing a shift in patients from low reimbursing Medicaid to even lower reimbursing self-pay.



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

Unaudited Financial Statements

for

Three months ended September 30, 2018

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.

Page 159 of 305

Certified by:

Tami Love

Chief Financial Officer

Table of Contents

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

PAGE 1

ROCK SPRINGS, WY

Three months ended September 30, 2018

TABLE OF CONTENTS

EXECUTIVE SUMMARY	PAGE 2
FINANCIAL RATIOS AND BENCHMARKS	PAGE 3
BALANCE SHEET - ASSETS	PAGE 4
BALANCE SHEET - LIABILITIES AND NET ASSETS	PAGE 5
STATEMENT OF OPERATIONS - CURRENT MONTH	PAGE 6
STATEMENT OF OPERATIONS - YEAR-TO-DATE	PAGE 7
STATEMENT OF OPERATIONS - 13 MONTH TREND	PAGE 8
STATEMENT OF CASH FLOWS	PAGE 10
KEY OPERATING STATISTICS	PAGE 11
ACCOUNTS RECEIVABLE REPORT	PAGE 12
REVENUE AND EXPENSE VARIANCE ANALYSIS	PAGE 13
KEY FINANCIAL RATIOS - FORMULAS AND PURPOSE	PAGE S-A

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

EXECUTIVE FINANCIAL SUMMARY

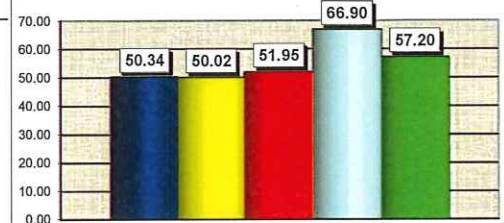
PAGE 2

Three months ended September 30, 2018

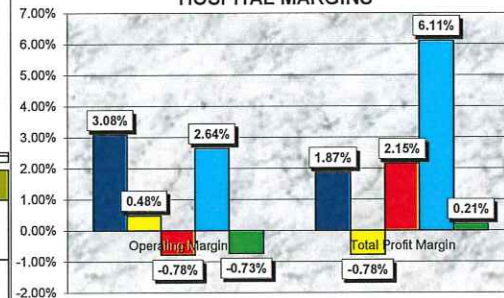
BALANCE SHEET

	YTD 9/30/2018	Prior FYE 6/30/2018
ASSETS		
Current Assets	\$35,259,834	\$32,985,887
Assets Whose Use is Limited	14,018,979	16,103,800
Property, Plant & Equipment (Net)	66,524,643	68,224,600
Other Assets	243,974	247,062
Total Unrestricted Assets	116,047,430	117,561,349
Restricted Assets	417,045	426,203
Total Assets	\$116,464,475	\$117,987,552
LIABILITIES AND NET ASSETS		
Current Liabilities	\$8,053,250	\$9,791,188
Long-Term Debt	27,901,547	27,915,983
Other Long-Term Liabilities	891,940	1,070,720
Total Liabilities	36,846,737	38,777,891
Net Assets	79,617,738	79,209,661
Total Liabilities and Net Assets	\$116,464,475	\$117,987,552

NET DAYS IN ACCOUNTS RECEIVABLE



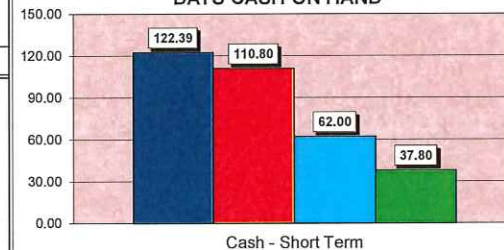
HOSPITAL MARGINS



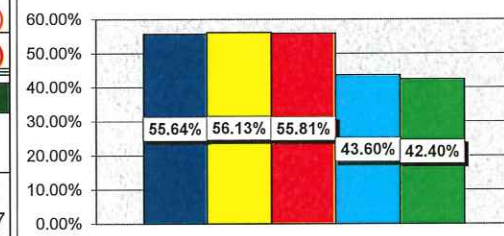
STATEMENT OF REVENUE AND EXPENSES - YTD

	09/30/18 ACTUAL	09/30/18 BUDGET	YTD ACTUAL	YTD BUDGET
Revenue:				
Gross Patient Revenues	\$11,968,383	\$13,484,456	\$39,886,527	\$40,324,482
Deductions From Revenue	(5,788,796)	(6,311,395)	(19,031,444)	(18,930,845)
Net Patient Revenues	6,179,587	7,173,060	20,855,083	21,393,638
Other Operating Revenue	678,067	227,085	988,164	676,345
Total Operating Revenues	6,857,654	7,400,145	21,843,247	22,069,982
Expenses:				
Salaries, Benefits & Contract Labor	3,708,220	4,040,434	11,779,091	12,386,867
Purchased Serv. & Physician Fees	581,971	660,432	1,793,686	1,953,729
Supply Expenses	1,060,199	1,142,857	3,390,237	3,425,818
Other Operating Expenses	732,687	751,434	2,358,865	2,298,874
Bad Debt Expense	0	0	0	0
Depreciation & Interest Expense	604,823	621,399	1,848,792	1,898,804
Total Expenses	6,687,900	7,216,556	21,170,671	21,964,093
NET OPERATING SURPLUS	169,754	183,589	672,576	105,889
Non-Operating Revenue/(Exp.)	(105,444)	(92,335)	(264,273)	(277,004)
TOTAL NET SURPLUS	\$64,310	\$91,254	\$408,302	(\$171,114)

DAYS CASH ON HAND



SALARY AND BENEFITS AS A PERCENTAGE OF TOTAL EXPENSES



KEY STATISTICS AND RATIOS

	09/30/18 ACTUAL	09/30/18 BUDGET	YTD ACTUAL	YTD BUDGET
Total Acute Patient Days	311	334	1,069	1,062
Average Acute Length of Stay	2.6	2.7	2.9	2.7
Total Emergency Room Visits	1,274	1,319	3,974	4,077
Outpatient Visits	6,027	6,136	19,045	19,176
Total Surgeries	149	171	486	538
Total Worked FTE's	401.68	427.27	400.74	427.27
Total Paid FTE's	441.00	464.23	445.69	464.23
Net Revenue Change from Prior Yr	-2.53%	5.18%	4.78%	5.87%
EBIDA - 12 Month Rolling Average			9.61%	9.08%
Current Ratio			4.38	
Days Expense in Accounts Payable			37.67	

■	MEMORIAL HOSPITAL OF SWEETWATER COUNTY	
■	Budget	09/30/18
■	Prior Fiscal Year End	06/30/18
■	WYOMING	All Hospitals
■	< \$90M Net Rev.	Rural

FINANCIAL STRENGTH INDEX - 1.29	
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
Three months ended September 30, 2018

↓ ↑ - DESIRED POSITION IN RELATION TO BENCHMARKS AND BUDGET

		Year to Date 9/30/2018	Budget 6/30/2019	BB+ Credit Rating	BBB- Credit Rating	Prior Fiscal Year End 06/30/18	WYOMING All Hospitals (See Note 1)	National Rural < \$90M Net Rev. (See Note 2)
Profitability:								
Operating Margin	↑	3.08%	1.90%	0.10%	0.30%	-0.78%	2.64%	-0.73%
Total Profit Margin	↑	1.87%	0.76%	0.80%	1.00%	2.15%	6.11%	0.21%
Liquidity:								
Days Cash, All Sources **	↑	122.39	129.76	91.30	129.00	110.80	62.00	37.80
Net Days in Accounts Receivable	↓	50.34	50.02	52.40	51.80	51.95	66.90	57.20
Capital Structure:								
Average Age of Plant (Annualized)	↓	12.19	12.58	15.10	11.20	10.19	9.50	12.40
Long Term Debt to Capitalization	↓	25.95%	25.75%	48.20%	41.60%	26.19%	16.80%	10.00%
Debt Service Coverage Ratio **	↑	3.27	3.97	1.80	2.30	3.15	N/A	2.64
Productivity and Efficiency:								
Paid FTE's per Adjusted Occupied Bed	↓	7.98	8.43			8.43	6.60	4.63
Salary Expense per Paid FTE		\$85,632	\$86,892			\$85,976	\$62,436	\$48,150
Salary and Benefits as a % of Total Operating Exp		55.64%	56.43%			55.81%	43.60%	42.40%

Note 1 - 2017 Ingenix report (2015 median data), for all hospitals within the state regardless of size.

Note 2 - 2017 Ingenix report (2015 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

PAGE 4

Three months ended September 30, 2018

	Current Month 9/30/2018	Prior Month 8/31/2018	ASSETS Positive/ (Negative) Variance	Percentage Variance	Prior Year End 6/30/2018
Current Assets					
Cash and Cash Equivalents	\$16,584,209	\$14,094,044	\$2,490,165	17.67%	\$14,404,653
Gross Patient Accounts Receivable	21,945,462	26,159,183	(4,213,721)	-16.11%	21,199,648
Less: Bad Debt and Allowance Reserves	(10,534,744)	(13,266,220)	2,731,476	20.59%	(9,770,080)
Net Patient Accounts Receivable	11,410,718	12,892,963	(1,482,245)	-11.50%	11,429,568
Interest Receivable	0	0	0	0.00%	0
Other Receivables	2,171,518	2,106,977	64,541	3.06%	1,957,332
Inventories	2,818,569	2,837,636	(19,067)	-0.67%	2,829,223
Prepaid Expenses	2,274,820	2,295,208	(20,388)	-0.89%	2,365,112
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	35,259,834	34,226,829	1,033,005	3.02%	32,985,887
Assets Whose Use is Limited					
Cash	15,119	14,758	361	2.45%	12,573
Investments	0	0	0	0.00%	0
Bond Reserve/Debt Retirement Fund	0	0	0	0.00%	0
Trustee Held Funds - Project	2,706,903	4,506,499	(1,799,596)	-39.93%	3,034,341
Trustee Held Funds - SPT	2,192,547	2,201,275	(8,728)	-0.40%	3,452,951
Board Designated Funds	1,300,000	1,300,000	0	0.00%	1,300,000
Other Limited Use Assets	7,804,410	7,804,410	(0)	0.00%	8,303,935
Total Limited Use Assets	14,018,979	15,826,942	(1,807,963)	-11.42%	16,103,800
Property, Plant, and Equipment					
Land and Land Improvements	2,952,098	2,928,057	24,041	0.82%	2,928,057
Building and Building Improvements	38,071,388	38,071,388	(0)	0.00%	38,041,246
Equipment	108,352,288	108,355,297	(3,009)	0.00%	108,303,077
Construction In Progress	1,035,655	1,017,701	17,954	1.76%	1,010,882
Capitalized Interest	0	0	0	0.00%	0
Gross Property, Plant, and Equipment	150,411,429	150,372,443	38,986	0.03%	150,283,261
Less: Accumulated Depreciation	(83,886,786)	(83,281,963)	(604,823)	-0.73%	(82,058,661)
Net Property, Plant, and Equipment	66,524,643	67,090,480	(565,837)	-0.84%	68,224,600
Other Assets					
Unamortized Loan Costs	243,974	245,003	(1,029)	-0.42%	247,062
Other	0	0	0	0.00%	0
Total Other Assets	243,974	245,003	(1,029)	-0.42%	247,062
TOTAL UNRESTRICTED ASSETS	116,047,430	117,389,254	(1,341,824)	-1.14%	117,561,349
Restricted Assets	417,045	427,549	(10,504)	-2.46%	426,203
TOTAL ASSETS	\$116,464,475	\$117,816,803	(\$1,352,328)	-1.15%	\$117,987,552

Balance Sheet - Liabilities and Net Assets

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
ROCK SPRINGS, WY
Three months ended September 30, 2018

PAGE 5

	LIABILITIES AND FUND BALANCE				
	Current Month 9/30/2018	Prior Month 8/31/2018	Positive/ (Negative) Variance	Percentage Variance	Prior Year End 6/30/2018
Current Liabilities					
Accounts Payable	\$4,081,454	\$3,750,391	(\$331,064)	-8.83%	\$4,934,966
Notes and Loans Payable	0	0	0	0.00%	0
Accrued Payroll	1,638,463	1,541,161	(97,302)	-6.31%	910,902
Accrued Payroll Taxes	0	0	0	0.00%	0
Accrued Benefits	1,672,614	1,661,866	(10,748)	-0.65%	1,702,057
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)	575,631	1,810,631	1,235,000	68.21%	1,810,631
Current Portion of LTD (Leases)	0	0	0	0.00%	0
Other Current Liabilities	85,088	653,801	568,713	86.99%	432,632
Total Current Liabilities	8,053,250	9,417,850	1,364,600	14.49%	9,791,188
Long Term Debt					
Bonds/Mortgages Payable	28,477,178	29,716,990	1,239,812	4.17%	29,726,614
Leases Payable	0	0	0	0.00%	0
Less: Current Portion Of Long Term Debt	575,631	1,810,631	1,235,000	68.21%	1,810,631
Total Long Term Debt (Net of Current)	27,901,547	27,906,359	4,812	0.02%	27,915,983
Other Long Term Liabilities					
Deferred Revenue	0	0	0	0.00%	0
Accrued Pension Expense (Net of Current)	0	0	0	0.00%	0
Other	891,940	928,662	36,722	3.95%	1,070,720
Total Other Long Term Liabilities	891,940	928,662	36,722	3.95%	1,070,720
TOTAL LIABILITIES	36,846,737	38,252,871	1,406,134	3.68%	38,777,891
Net Assets:					
Unrestricted Fund Balance	76,794,258	76,794,258	(0)	0.00%	74,388,532
Temporarily Restricted Fund Balance	1,959,119	1,959,119	0	0.00%	1,959,119
Restricted Fund Balance	456,059	466,562	10,503	2.25%	465,216
Net Revenue/(Expenses)	408,302	343,993	N/A	N/A	2,396,794
TOTAL NET ASSETS	79,617,738	79,563,932	(53,806)	-0.07%	79,209,661
TOTAL LIABILITIES AND NET ASSETS	\$116,464,475	\$117,816,803	\$1,352,328	1.15%	\$117,987,552

Statement of Revenue and Expense

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

PAGE 6

ROCK SPRINGS, WY

Three months ended September 30, 2018

	CURRENT MONTH				
	Actual 09/30/18	Budget 09/30/18	Positive (Negative) Variance	Percentage Variance	Prior Year 09/30/17
Gross Patient Revenue					
Inpatient Revenue	\$2,499,813	\$2,918,151	(\$418,338)	-14.34%	\$2,847,824
Outpatient Revenue	8,246,354	9,178,824	(932,470)	-10.16%	8,831,699
Clinic Revenue	1,076,083	1,132,286	(56,203)	-4.96%	1,103,975
Specialty Clinic Revenue	146,133	255,195	(109,062)	-42.74%	236,113
Total Gross Patient Revenue	<u>11,968,383</u>	<u>13,484,456</u>	<u>(1,516,073)</u>	<u>-11.24%</u>	<u>13,019,611</u>
Deductions From Revenue					
Discounts and Allowances	(4,581,170)	(5,428,138)	846,968	15.60%	(5,069,104)
Bad Debt Expense (Governmental Providers Only)	(1,072,535)	(712,436)	(360,099)	-50.54%	(982,992)
Charity Care	(135,091)	(170,821)	35,730	20.92%	(63,706)
Total Deductions From Revenue	<u>(5,788,796)</u>	<u>(6,311,395)</u>	<u>522,599</u>	<u>8.28%</u>	<u>(6,115,802)</u>
Net Patient Revenue	<u>6,179,587</u>	<u>7,173,060</u>	<u>(993,473)</u>	<u>-13.85%</u>	<u>6,903,809</u>
Other Operating Revenue	678,067	227,085	450,983	198.60%	132,021
Total Operating Revenue	<u>6,857,654</u>	<u>7,400,145</u>	<u>(542,491)</u>	<u>-7.33%</u>	<u>7,035,830</u>
Operating Expenses					
Salaries and Wages	3,014,576	3,152,027	137,451	4.36%	2,960,550
Fringe Benefits	648,010	778,317	130,307	16.74%	620,573
Contract Labor	45,634	110,090	64,456	58.55%	137,000
Physicians Fees	239,881	267,348	27,467	10.27%	157,462
Purchased Services	342,090	393,084	50,994	12.97%	480,197
Supply Expense	1,060,199	1,142,857	82,658	7.23%	1,086,034
Utilities	90,628	93,484	2,856	3.06%	106,004
Repairs and Maintenance	351,939	374,783	22,844	6.10%	343,702
Insurance Expense	66,217	60,375	(5,842)	-9.68%	66,590
All Other Operating Expenses	138,767	150,982	12,215	8.09%	169,070
Bad Debt Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Leases and Rentals	85,136	71,810	(13,326)	-18.56%	89,248
Depreciation and Amortization	604,823	621,399	16,576	2.67%	682,349
Interest Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Total Operating Expenses	<u>6,687,900</u>	<u>7,216,556</u>	<u>528,656</u>	<u>7.33%</u>	<u>6,898,779</u>
Net Operating Surplus/(Loss)	169,754	183,589	(13,835)	-7.54%	137,051
Non-Operating Revenue:					
Contributions	0	0	0	0.00%	0
Investment Income	4,652	3,985	667	16.73%	10,888
Tax Subsidies (Except for GO Bond Subsidies)	0	0	0	0.00%	420,876
Tax Subsidies for GO Bonds	0	0	0	0.00%	0
Interest Expense (Governmental Providers Only)	(127,030)	(113,824)	13,207	-11.60%	(107,709)
Other Non-Operating Revenue/(Expenses)	16,934	17,504	(570)	-3.26%	1,485
Total Non Operating Revenue/(Expense)	<u>(105,444)</u>	<u>(92,335)</u>	<u>(13,110)</u>	<u>14.20%</u>	<u>325,537</u>
Total Net Surplus/(Loss)	\$64,310	\$91,254	(\$26,944)	-29.53%	\$462,588
Change in Unrealized Gains/(Losses) on Investments	0	0	0	0.00%	0
Increase/(Decrease in Unrestricted Net Assets)	\$64,310	\$91,254	(\$26,944)	-29.53%	\$462,588
Operating Margin	2.48%	2.48%			1.95%
Total Profit Margin	0.94%	1.23%			6.57%
EBIDA	11.30%	10.88%			16.63%

Statement of Revenue and Expense

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

PAGE 7

ROCK SPRINGS, WY

Three months ended September 30, 2018

	YEAR-TO-DATE				Prior Year 09/30/17
	Actual 09/30/18	Budget 09/30/18	Positive (Negative) Variance	Percentage Variance	
Gross Patient Revenue					
Inpatient Revenue	\$8,296,615	\$8,789,197	(\$492,581)	-5.60%	\$8,593,880
Outpatient Revenue	27,598,604	27,583,782	14,823	0.05%	26,635,593
Clinic Revenue	3,363,885	3,301,169	62,717	1.90%	3,245,285
Specialty Clinic Revenue	627,422	650,336	(22,913)	-3.52%	652,374
Total Gross Patient Revenue	<u>39,886,527</u>	<u>40,324,482</u>	<u>(437,955)</u>	<u>-1.09%</u>	<u>39,127,132</u>
Deductions From Revenue					
Discounts and Allowances	(15,714,142)	(16,281,074)	566,932	3.48%	(15,359,800)
Bad Debt Expense (Governmental Providers Only)	(2,894,129)	(2,137,309)	(756,820)	-35.41%	(2,742,194)
Charity Care	(423,173)	(512,462)	89,288	17.42%	(542,398)
Total Deductions From Revenue	<u>(19,031,444)</u>	<u>(18,930,845)</u>	<u>(100,599)</u>	<u>-0.53%</u>	<u>(18,644,392)</u>
Net Patient Revenue	<u>20,855,083</u>	<u>21,393,638</u>	<u>(538,555)</u>	<u>-2.52%</u>	<u>20,482,740</u>
Other Operating Revenue	988,164	676,345	311,819	46.10%	363,587
Total Operating Revenue	<u>21,843,247</u>	<u>22,069,982</u>	<u>(226,735)</u>	<u>-1.03%</u>	<u>20,846,327</u>
Operating Expenses					
Salaries and Wages	9,352,963	9,678,151	325,188	3.36%	9,602,583
Fringe Benefits	2,159,356	2,383,445	224,089	9.40%	1,954,489
Contract Labor	266,773	325,271	58,498	17.98%	441,255
Physicians Fees	708,512	778,543	70,031	9.00%	477,889
Purchased Services	1,085,174	1,175,186	90,012	7.66%	1,285,693
Supply Expense	3,390,237	3,425,818	35,581	1.04%	3,154,274
Utilities	277,556	289,901	12,345	4.26%	280,482
Repairs and Maintenance	1,128,650	1,137,232	8,582	0.75%	1,071,240
Insurance Expense	196,305	181,125	(15,180)	-8.38%	200,241
All Other Operating Expenses	526,507	475,186	(51,321)	-10.80%	572,630
Bad Debt Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Leases and Rentals	229,847	215,430	(14,417)	-6.69%	280,746
Depreciation and Amortization	1,848,792	1,898,804	50,012	2.63%	2,085,190
Interest Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Total Operating Expenses	<u>21,170,671</u>	<u>21,964,093</u>	<u>793,422</u>	<u>3.61%</u>	<u>21,406,712</u>
Net Operating Surplus/(Loss)	672,576	105,889	566,686	535.17%	(560,385)
Non-Operating Revenue:					
Contributions	0	0	0	0.00%	0
Investment Income	24,840	11,955	12,885	107.78%	21,699
Tax Subsidies (Except for GO Bond Subsidies)	0	0	0	0.00%	1,037,908
Tax Subsidies for GO Bonds	0	0	0	0.00%	0
Interest Expense (Governmental Providers Only)	(341,322)	(341,471)	149	-0.04%	(338,497)
Other Non-Operating Revenue/(Expense)	52,209	52,512	(303)	-0.58%	37,394
Total Non Operating Revenue/(Expense)	<u>(264,273)</u>	<u>(277,004)</u>	<u>12,730</u>	<u>-4.60%</u>	<u>758,505</u>
Total Net Surplus/(Loss)	\$408,302	(\$171,114)	\$579,416	-338.61%	\$198,120
Change in Unrealized Gains/(Losses) on Investments	0	0	0	0.00%	0
Increase/(Decrease) in Unrestricted Net Assets	\$408,302	(\$171,114)	\$579,416	-338.61%	\$198,120
Operating Margin	3.08%	0.48%			-2.69%
Total Profit Margin	1.87%	-0.78%			0.95%
EBIDA	11.54%	9.08%			11.71%

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

	Actual 9/30/2018	Actual 8/31/2018	Actual 7/31/2018	Actual 6/30/2018	Actual 5/31/2018
Gross Patient Revenue					
Inpatient Revenue	\$2,499,813	\$2,459,161	\$3,337,641	\$2,691,073	\$2,473,613
Inpatient Psych/Rehab Revenue					
Outpatient Revenue	\$8,246,354	\$9,927,413	\$9,424,838	\$8,882,234	\$9,045,341
Clinic Revenue	\$1,076,083	\$1,193,552	\$1,094,250	\$1,252,867	\$1,294,418
Specialty Clinic Revenue	\$146,133	\$215,242	\$266,047	\$179,865	\$209,960
Total Gross Patient Revenue	\$11,968,383	\$13,795,368	\$14,122,776	\$13,006,039	\$13,023,332
Deductions From Revenue					
Discounts and Allowances	\$4,581,170	\$5,240,990	\$5,891,982	\$4,273,304	\$5,120,197
Bad Debt Expense (Governmental Providers Only)	\$1,072,535	\$972,129	\$849,465	\$1,232,693	\$750,881
Charity Care	\$135,091	\$202,867	\$85,215	\$419,740	\$188,399
Total Deductions From Revenue	5,788,796	6,415,986	6,826,662	5,925,738	6,059,477
Net Patient Revenue	\$6,179,587	\$7,379,382	\$7,296,114	\$7,080,302	\$6,963,855
Other Operating Revenue	678,067	159,188	150,909	482,048	116,501
Total Operating Revenue	6,857,654	7,538,570	7,447,023	7,562,349	7,080,357
Operating Expenses					
Salaries and Wages	\$3,014,576	\$3,132,114	\$3,206,273	\$2,975,968	\$3,095,577
Fringe Benefits	\$648,010	\$825,597	\$685,749	\$694,860	\$852,917
Contract Labor	\$45,634	\$87,004	\$134,135	\$46,590	\$106,303
Physicians Fees	\$239,881	\$211,428	\$257,203	\$443,327	\$364,555
Purchased Services	\$342,090	\$366,075	\$377,009	\$439,285	\$420,404
Supply Expense	\$1,060,199	\$1,133,975	\$1,196,063	\$1,010,111	\$1,002,232
Utilities	\$90,628	\$104,407	\$82,521	\$98,439	\$93,552
Repairs and Maintenance	\$351,939	\$417,795	\$358,916	\$369,736	\$343,807
Insurance Expense	\$66,217	\$66,217	\$63,871	\$61,525	\$67,521
All Other Operating Expenses	\$138,767	\$193,415	\$194,326	\$270,617	\$195,498
Bad Debt Expense (Non-Governmental Providers)					
Leases and Rentals	\$85,136	\$72,008	\$72,703	\$100,598	\$69,589
Depreciation and Amortization	\$604,823	\$621,957	\$622,012	\$952,632	\$608,857
Interest Expense (Non-Governmental Providers)					
Total Operating Expenses	\$6,687,899	\$7,231,993	\$7,250,778	\$7,463,688	\$7,220,813
Net Operating Surplus/(Loss)	\$169,755	\$306,577	\$196,245	\$98,661	(\$140,456)
Non-Operating Revenue:					
Contributions					
Investment Income	4,652	14,772	5,416	18,869	103,261
Tax Subsidies (Except for GO Bond Subsidies)					
Tax Subsidies for GO Bonds				51,516	315,887
Interest Expense (Governmental Providers Only)	(127,030)	(102,944)	(111,348)	(197,203)	(104,082)
Other Non-Operating Revenue/(Expenses)	16,934	14,644	20,631	12,052	16,881
Total Non Operating Revenue/(Expense)	(\$105,445)	(\$73,528)	(\$85,301)	(\$114,766)	\$331,947
Total Net Surplus/(Loss)	\$64,310	\$233,049	\$110,943	(\$16,105)	\$191,491
Change in Unrealized Gains/(Losses) on Investments					
Increase/(Decrease in Unrestricted Net Assets)	\$64,310	\$233,049	\$110,943	(\$16,105)	\$191,491
Operating Margin	2.48%	4.07%	2.64%	1.30%	-1.98%
Total Profit Margin	0.94%	3.09%	1.49%	-0.21%	2.70%
EBIDA	11.30%	12.32%	10.99%	13.90%	6.62%

Actual 4/30/2018	Actual 3/31/2018	Actual 2/28/2018	Actual 1/31/2018	Actual 12/31/2017	Actual 11/30/2017	Actual 10/31/2017	Actual 9/30/2017
\$3,103,402	\$3,572,487	\$2,539,861	\$3,482,532	\$2,372,167	\$2,557,222	\$2,788,873	\$2,847,824
\$8,179,117	\$9,117,338	\$8,217,125	\$9,046,087	\$9,332,424	\$9,091,002	\$9,761,390	\$8,831,699
\$1,045,617	\$1,318,708	\$1,119,761	\$1,215,537	\$1,048,027	\$1,212,089	\$1,220,406	\$1,103,975
\$190,157	\$247,601	\$83,134	\$157,597	\$191,061	\$176,581	\$205,457	\$236,113
\$12,518,293	\$14,256,134	\$11,959,881	\$13,901,753	\$12,943,679	\$13,036,894	\$13,976,126	\$13,019,611
\$5,180,571	\$5,699,847	\$4,779,964	\$5,865,394	\$4,987,914	\$5,399,047	\$5,490,404	\$5,069,104
\$608,142	\$888,176	\$510,331	\$432,591	\$595,394	\$298,556	\$945,198	\$982,992
\$162,130	(\$6,620)	\$160,500	\$105,168	\$261,972	\$188,422	\$196,604	\$63,706
5,950,844	6,581,403	5,450,794	6,403,153	5,845,280	5,886,024	6,632,206	6,115,802
\$6,567,449	\$7,674,731	\$6,509,087	\$7,498,600	\$7,098,399	\$7,150,870	\$7,343,920	\$6,903,809
398,959	122,609	246,357	202,830	219,842	360,875	226,027	132,021
6,966,408	7,797,340	6,755,443	7,701,430	7,318,241	7,511,744	7,569,947	7,035,830
\$2,982,785	\$3,211,428	\$3,005,037	\$3,269,915	\$3,145,250	\$2,875,383	\$3,195,966	\$2,960,550
\$992,919	\$649,692	\$990,578	\$1,119,679	\$854,959	\$865,713	\$899,647	\$620,573
\$122,359	\$44,526	\$79,857	\$166,621	\$111,766	\$183,557	\$129,775	\$137,000
\$346,772	\$254,190	\$255,063	\$250,758	\$292,891	\$210,531	\$188,302	\$157,462
\$437,651	\$439,077	\$421,063	\$427,741	\$364,808	\$505,848	\$412,633	\$480,197
\$1,080,684	\$1,182,216	\$972,465	\$1,200,722	\$1,032,955	\$1,088,388	\$1,087,098	\$1,086,034
\$90,887	\$107,529	\$81,728	\$95,685	\$94,092	\$91,389	\$85,365	\$106,004
\$378,782	\$376,215	\$440,924	\$389,140	\$368,249	\$358,456	\$325,228	\$343,702
\$53,077	\$56,861	\$56,861	\$58,940	\$58,919	\$61,018	\$63,804	\$66,589
\$198,362	\$201,300	\$154,373	\$177,214	\$139,568	\$172,447	\$215,922	\$169,070
\$67,974	\$73,351	\$75,743	\$78,591	\$68,724	\$72,622	(\$50,868)	\$89,248
\$610,433	\$610,991	\$610,388	\$612,267	\$617,326	\$618,625	\$738,261	\$682,349
\$7,362,685	\$7,207,378	\$7,144,081	\$7,847,273	\$7,149,507	\$7,103,978	\$7,291,132	\$6,898,778
(\$396,277)	\$589,963	(\$388,637)	(\$145,843)	\$168,734	\$407,767	\$278,815	\$137,052
(1,767)	10,816	4,898	(2,148)	1,833	902	4,510	10,888
233,293	291,849	379,346	322,567	334,349	338,547	308,743	420,876
(104,431)	(148,675)	(105,421)	(105,774)	(120,482)	(106,298)	(170,996)	(107,709)
12,688	40,555	8,609	26,104	11,269	23,279	20,605	1,481
\$139,783	\$194,545	\$287,431	\$240,749	\$226,968	\$256,429	\$162,862	\$225,536
(\$256,494)	\$784,508	(\$101,206)	\$94,906	\$395,702	\$664,196	\$441,677	\$462,588
(\$256,494)	\$784,508	(\$101,206)	\$94,906	\$395,702	\$664,196	\$441,677	\$462,588
-5.69%	7.57%	-5.75%	-1.89%	2.31%	5.43%	3.68%	1.95%
-3.68%	10.06%	-1.50%	1.23%	5.41%	8.84%	5.83%	6.57%
3.07%	15.40%	3.28%	6.06%	10.74%	13.66%	13.44%	11.65%

Statement of Cash Flows

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
ROCK SPRINGS, WY
Three months ended September 30, 2018

	CASH FLOW	
	Current Month 9/30/2018	Current Year-To-Date 9/30/2018
CASH FLOWS FROM OPERATING ACTIVITIES:		
Net Income (Loss)	\$64,310	\$408,302
Adjustments to Reconcile Net Income to Net Cash Provided by Operating Activities:		
Depreciation	604,823	1,848,792
(Increase)/Decrease in Net Patient Accounts Receivable	1,482,245	18,850
(Increase)/Decrease in Other Receivables	(64,541)	(214,186)
(Increase)/Decrease in Inventories	19,067	10,654
(Increase)/Decrease in Pre-Paid Expenses	20,388	90,292
(Increase)/Decrease in Other Current Assets	0	0
Increase/(Decrease) in Accounts Payable	331,064	(853,512)
Increase/(Decrease) in Notes and Loans Payable	0	0
Increase/(Decrease) in Accrued Payroll and Benefits	108,050	698,118
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	(568,713)	(347,544)
Net Cash Provided by Operating Activities:	1,996,693	1,659,766
CASH FLOWS FROM INVESTING ACTIVITIES:		
Purchase of Property, Plant and Equipment	(38,986)	(148,835)
(Increase)/Decrease in Limited Use Cash and Investments	1,808,324	2,087,367
(Increase)/Decrease in Other Limited Use Assets	(361)	(2,546)
(Increase)/Decrease in Other Assets	1,029	3,088
Net Cash Used by Investing Activities	1,770,006	1,939,074
CASH FLOWS FROM FINANCING ACTIVITIES:		
Increase/(Decrease) in Bond/Mortgage Debt	(1,239,812)	(1,249,436)
Increase/(Decrease) in Capital Lease Debt	0	0
Increase/(Decrease) in Other Long Term Liabilities	(36,722)	(178,780)
Net Cash Used for Financing Activities	(1,276,535)	(1,428,216)
(INCREASE)/DECREASE IN RESTRICTED ASSETS	1	8,933
Net Increase/(Decrease) in Cash	2,490,165	2,179,556
Cash, Beginning of Period	14,094,044	14,404,653
Cash, End of Period	\$16,584,209	\$16,584,209

Patient Statistics

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

ROCK SPRINGS, WY

Three months ended September 30, 2018

Current Month									Year-To-Date			
Actual 09/30/18	Budget 09/30/18	Positive/ (Negative) Variance	Prior Year 09/30/17	STATISTICS					Actual 09/30/18	Budget 09/30/18	Positive/ (Negative) Variance	Prior Year 09/30/17
Discharges												
120	125	(5)	170	Acute				369	398	(29)	489	
120	125	(5)	170	Total Adult Discharges				369	398	(29)	489	
47	32	15	75	Newborn				106	122	(16)	214	
167	157	10	245	Total Discharges				475	520	(45)	703	
Patient Days:												
311	334	(23)	526	Acute				1,069	1,062	7	1,477	
311	334	(23)	526	Total Adult Patient Days				1,069	1,062	7	1,477	
80	50	30	99	Newborn				184	217	(33)	252	
391	384	7	625	Total Patient Days				1,253	1,279	(26)	1,729	
Average Length of Stay (ALOS)												
2.6	2.7	(0.1)	3.1	Acute				2.9	2.7	0.2	3.0	
2.6	2.7	(0.1)	3.1	Total Adult ALOS				2.9	2.7	0.2	3.0	
1.7	1.6	0.1	1.3	Newborn ALOS				1.7	1.8	(0.0)	1.2	
Average Daily Census (ADC)												
10.4	11.1	(0.8)	17.5	Acute				11.6	11.5	0.1	16.1	
10.4	11.1	(0.8)	17.5	Total Adult ADC				11.6	11.5	0.1	16.1	
2.7	1.7	1.0	3.3	Newborn				2.0	2.4	(0.4)	2.7	
Emergency Room Statistics												
119	140	(21)	135	ER Visits - Admitted				405	399	6	425	
1,155	1,179	(24)	1,285	ER Visits - Discharged				3,569	3,678	(109)	3,729	
1,274	1,319	(45)	1,420	Total ER Visits				3,974	4,077	(103)	4,154	
9.34%	10.61%		9.51%	% of ER Visits Admitted				10.19%	9.79%		10.23%	
99.17%	112.00%		79.41%	ER Admissions as a % of Total				109.76%	100.25%		86.91%	
Outpatient Statistics:												
6,027	6,136	(109)	6,758	Total Outpatients Visits				19,045	19,176	(131)	20,626	
77	108	(31)	92	Observation Bed Days				329	346	(17)	304	
3,654	3,846	(192)	4,581	Clinic Visits - Primary Care				11,485	11,260	225	13,047	
443	521	(78)	655	Clinic Visits - Specialty Clinics				1,343	1,386	(43)	1,689	
25	30	(5)	43	IP Surgeries				71	86	(15)	113	
124	141	(17)	158	OP Surgeries				415	452	(37)	464	
Productivity Statistics:												
401.68	427.27	(25.59)	402.93	FTE's - Worked				400.74	427.27	(26.53)	406.72	
441.00	464.23	(23.23)	449.73	FTE's - Paid				445.69	464.23	(18.54)	459.48	
1.3433	1.3733	(0.03)	0.9221	Case Mix Index -Medicare				1.2309	3.8532	(2.62)	1.0146	
0.7620	0.9709	(0.21)	0.9221	Case Mix Index - All payers				0.7523	2.6322	(1.88)	0.8563	

Accounts Receivable Tracking Report

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
ROCK SPRINGS, WY
09/30/18

PAGE 12

	Current Month <u>Actual</u>	Current Month <u>Target</u>
Gross Days in Accounts Receivable - All Services	50.62	50.05
Net Days in Accounts Receivable	50.34	51.95
Number of Gross Days in Unbilled Revenue	3.96	3.0 or <
Number of Days Gross Revenue in Credit Balances	0.00	< 1.0
Self Pay as a Percentage of Total Receivables	31.39%	N/A
Charity Care as a % of Gross Patient Revenue - Current Month	1.13%	1.27%
Charity Care as a % of Gross Patient Revenue - Year-To-Date	1.06%	1.27%
Bad Debts as a % of Gross Patient Revenue - Current Month	8.96%	5.28%
Bad Debts as a % of Gross Patient Revenue - Year-To-Date	7.26%	5.30%
Collections as a Percentage of Net Revenue - Current Month	123.15%	100% or >
Collections as a Percentage of Net Revenue - Year-To-Date	99.10%	100% or >
Percentage of Blue Cross Receivable > 90 Days	9.61%	< 10%
Percentage of Insurance Receivable > 90 Days	8.81%	< 15%
Percentage of Medicaid Receivable > 90 Days	2.81%	< 20%
Percentage of Medicare Receivable > 60 Days	23.62%	< 6%



Variance Analysis

MEMORIAL HOSPITAL OF SWEETWATER COUNTY ROCK SPRINGS, WYOMING Three months ended September 30, 2018

PAGE 13

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

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

	Current Month		Year-to-Date	
	Amount	%	Amount	%
Gross Patient Revenue	(1,516,073)	-11.24%	(437,955)	-1.09%

Gross patient revenue is under budget for the month and under budget year to date. Patient statistics under budget include ER visit, Outpatient Visits and Surgeries.

Average Daily Census is 10.4 in September which is under budget by 0.8

Deductions from Revenue	522,599	8.28%	(100,599)	-0.53%
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Deductions from revenue are under budget for Sept and over budget year to date.

They are currently booked at 48% for Sept and 47% year to date. This number is monitored closely each month and fluctuates based on historical write-offs and current collection percentages.

Bad Debt Expense	(360,099)	-50.54%	(756,820)	-35.41%
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Bad debt expense is booked at 9% for Sept. and 7% year to date.

Charity Care	35,730	20.92%	89,288	17.42%
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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	450,983	198.60%	311,819	46.10%
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Other Operating Revenue is over budget for the month and is over budget year to date.

Salaries and Wages	137,451	4.36%	325,188	3.36%
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Salary and Wages are under budget and remain under budget year to date. With the lower

census, departments have been very mindful of sending employees home to balance staffing and patient needs. Paid FTEs are under budget by 23.23 FTEs for the month and 18.54 FTEs year to date.

Fringe Benefits	130,307	16.74%	224,089	9.40%
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Fringe benefits are under budget in Sept. and remain under budget year to date.

Contract Labor	64,456	58.55%	58,498	17.98%
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Contract labor is under budget for Sept. and remains under budget year to date. Behavioral Health, Recovery and Respiratory are over budget for the month.

Variance Analysis

MEMORIAL HOSPITAL OF SWEETWATER COUNTY ROCK SPRINGS, WYOMING

PAGE 14

Three months ended September 30, 2018

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

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

	Current Month		Year-to-Date	
	Amount	%	Amount	%
Physician Fees	27,467	10.27%	70,031	9.00%
Physician fees are under budget in Sept. and remain under budget year to date. ICU and Locum Radiology are over budget				
Purchased Services	50,994	12.97%	90,012	7.66%
Purchased services are under budget for Sept. and under budget year to date. Services over budget include Sponsorships, Bank Card Fees and Collection Agency.				
Supply Expense	82,658	7.23%	35,581	1.04%
Supplies are under budget for Sept. and remain under budget year to date. Line items over budget include Radioactive materials, Blood, Instruments, Implants and Outdated Supplies.				
Repairs & Maintenance	22,844	6.10%	8,582	0.75%
Repairs and Maintenance are under budget for Sept. and under budget year to date.				
All Other Operating Expenses	12,215	8.09%	(51,321)	-10.80%
This expense is under budget in Sept. and over budget year to date. Other expenses over budget are Memberships, Computer Software and Foundation Other Expenses and Dietary Allocation.				
Leases and Rentals	(13,326)	-18.56%	(14,417)	-6.69%
This expense is overbudget for Sept. and remains over budget year to date.				
Depreciation and Amortization	16,576	2.67%	50,012	2.63%
Depreciation is under budget for Sept. and remains under budget year to date.				

BALANCE SHEET

Cash and Cash Equivalents	\$2,490,165	17.67%
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Cash increased in Sept. Cash collections for Sept. were \$7.6 million. Days Cash on Hand increased to 122 days.

Gross Patient Accounts Receivable	(\$4,213,721)	-16.11%
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This receivable decreased in Sept. due to Medicare funds coming in.

Variance Analysis

MEMORIAL HOSPITAL OF SWEETWATER COUNTY ROCK SPRINGS, WYOMING

PAGE 15

Three months ended September 30, 2018

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

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

	Current Month		Year-to-Date	
	Amount	%	Amount	%
Bad Debt and Allowance Reserves	2,731,476	20.59%		
Bad Debt and Allowances decreased due to the Medicare funds coming in.				
Other Receivables	64,541	3.06%		
Other Receivables increased in Sept. due to Occ Med and County Maintenance invoices.				
Prepaid Expenses	(20,388)	-0.89%		
Prepaid expenses decreased due to the normal activity in this account.				
Limited Use Assets	(1,807,963)	-11.42%		
These assets increased due to the payment of the bonds.				
Plant Property and Equipment	(565,837)	-0.84%		
The decrease in these assets is due to the increase in Capital equipment and the normal increase in accumulated depreciation.				
Accounts Payable	(331,064)	-8.83%		
This liability increased due to the normal activity in this account.				
Accrued Payroll	(97,302)	-6.31%		
This liability increased in Sept. The payroll accrual for Sept was 14 days.				
Accrued Benefits	(10,748)	-0.65%		
This liability decreased in Sept. with the normal accrual and usage of PTO .				
Other Current Liabilities	568,713	86.99%		
This liability decreased due to payment of the bonds.				
Other Long Term Liabilities	36,722	3.95%		
This liability decreased due to the normal monthly lease payments.				
Total Net Assets	(53,806)	-0.07%		

The net gain from operations for Sept. is \$169,755

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

OTHER OPERATING REVENUE - Detail

YEAR TO DATE 2019

JULY		MONTHLY	FYTD
DESCRIPTION	AMOUNT	TOTAL	TOTAL
Collection Agency interest income	9,917.17		
Pharmacy sales	15.51		
Coca Cola Commission	146.08		
Medical Records	558.15		
HPSA	30,015.62		
Cache Valley Rebate	12.00		
Inmar Rebate	1,768.95		
Interlare	4,055.66		
Foundation Golf Trny	2,250.00		
MCR Test Amount	0.02		
Olympus Thunderbeat	1,800.00		
PACS Storage	1,000.00		
County Maintenance Fund	13,120.28		
BCBS Payment Received Incorrectly - Wil be reversed	72.00		
WWB Commissions	460.89		
Post Partum Supplies	(189.51)		
Foundation	(47.96)		
Grants	(4,163.39)		
Lab Courier	520.00		
Shriners	346.36		
Solvay	3,600.00		
Jim Bridger Physician Services	12,750.00		
Castle Rock	3,653.70		
Tata Occupation Medicine on site	14,550.00		
Sage View	2,400.00		
High Desert Rural Health Clinic District Wamsutter - July	28,503.61		
Cafeteria sales	23,793.98		
July Totals		150,909.12	150,909.12

AUGUST		MONTHLY	FYTD
DESCRIPTION	AMOUNT	TOTAL	TOTAL
Collection Agency interest income	15,521.30		
Retirement Forfeiture	11.17		
Medical Records	639.65		
Pharmacy sales	80.46		
BLS	204.00		
HPSA	757.48		
Foundation - Reimburse Golf Tournament	(2,850.00)		
Wind River Vending	8.75		
Sports Physicals	3,650.00		
PACS Storage	380.00		
WWB Commissions	241.86		
Blood Systems Reversal	(72.00)		
Sweetwater Medics-Linens	2,500.00		
County Maintenance Fund	48,851.71		
Prenatal Class	60.00		
Grants	(522.28)		
Lab Courier	260.00		
Shriners	262.62		
Solvay	900.00		
Jim Bridger Retainer	800.00		
Jim Bridger Physician Services	13,812.50		
Castle Rock	2,115.30		
Tata Occupation Medicine on site	16,650.00		
Sage View	2,400.00		
High Desert Rural Health Clinic District Wamsutter - August	27,723.96		
Cafeteria sales	24,801.23		
August Totals		159,187.71	310,096.83

SEPTEMBER		MONTHLY	FYTD
DESCRIPTION	AMOUNT	TOTAL	TOTAL

Collection Agency interest income	14,347.07		
Retirement Forfeiture	641.46		
Medical Records	186.55		
Pharmacy sales	14.00		
Radiology Films	5.00		
BLS	361.00		
HPSA	13.19		
BCBS Entered incorrectly - reversed on 10/1	3,469.66		
Inmar Rebate	59.92		
Interlare	11,763.70		
MCR Temp Allowance	29,017.00		
Supplies	1,362.32		
PACS Storage	576.00		
WWB Commissions	115.28		
Foundation	496,842.20		
Prenatal Class	122.30		
Grants	(1,190.46)		
County Maintenance Fund	21,866.14		
Shriners	234.70		
Solvay	900.00		
Jim Bridger Retainer	800.00		
Jim Bridger Physician Services	11,687.50		
Castle Rock	2,596.05		
Tata Occupation Medicine on site	12,450.00		
Sage View	2,400.00		
High Desert Rural Health Clinic District Wamsutter - August	31,076.00		
Cafeteria sales	33,766.83		
Catering	2,583.66		
September Totals		678,067.07	988,163.90

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

To: Finance & Audit Committee
From: Tami Love, CFO

October 23, 2018

PROVIDER CLINIC – SEPTEMBER 2018

THE CLINIC BOTTOM LINE. The bottom line for the Provider Clinic for September was a loss of \$435,487, compared to a loss of \$389,194 in the budget. The YTD net operating loss is \$1,236,371, compared to a loss of \$1,390,100 in the budget.

VOLUME. Total visits were 4,097 for September, under budget by 270 visits. YTD patient visits are 12,828, over budget by 182 visits.

REVENUE. Revenue for the Clinic for September was \$1,222,216, under budget by \$168,463. YTD revenue was \$3,997,029, over budget by \$36,130. The Clinic physicians also generate hospital revenue, called enterprise revenue, which consists of various sources, including Lab, Medical Imaging and Surgery. The amount of gross enterprise revenue generated year to date through September from the Clinic is \$10,662,338. This equates to \$5,544,416 of net enterprise revenue with an impact to the bottom line of \$543,907. The gross enterprise revenue represents 26.7% of the total Hospital revenue year to date.

Net patient revenue for the Clinic for September was \$641,360, under budget by \$139,393. YTD net patient revenue was \$2,194,884, which was over budget by \$47,306.

Deductions from revenue for the Clinic were booked at 47.5% for September. In September, the YTD payer mix was as follows; Commercial Insurance and Blue Cross consisted of 55.1% of revenue, Medicare and Medicaid consisted of 38.8% of revenue and Self Pay consisted of 5.5% of revenue.

EXPENSES. Total expenses for the month were \$1,138,991, which was under budget by \$100,638. YTD expenses were \$3,623,868, which was under budget by \$117,950. The majority of the expenses consist of Salaries and Benefits; which are 84.8% of YTD total expenses. The following categories were over budget for September:

Repairs and Maintenance – This expense is over budget by \$2,299 and remains over budget \$3,059 year to date.

Leases and Rentals - This expense is over budget by \$354 and remains over budget \$1,905 year to date.

Depreciation – This expense is over budget by \$2,378 and remains over budget \$4,896 year to date.

OVERALL ASSESSMENT. Through September, the Provider Clinic revenue plus enterprise revenue makes up 36.7% of total hospital gross patient revenue.



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

PHYSICIAN CLINICS

Unaudited Financial Statements

for

Three months ended September 30, 2018

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.

Page 178 of 305

Certified by:

Tami Love

Chief Financial Officer

Table of Contents

**MEMORIAL HOSPITAL OF SWEETWATER COUNTY
ROCK SPRINGS, WY
Three months ended September 30, 2018**

PAGE 1

TABLE OF CONTENTS

FINANCIAL RATIOS AND BENCHMARKS	PAGE 2
STATEMENT OF OPERATIONS - CURRENT MONTH	PAGE 3
STATEMENT OF OPERATIONS - YEAR-TO-DATE	PAGE 4
STATEMENT OF OPERATIONS - 13 MONTH TREND	PAGE 5
KEY OPERATING STATISTICS	PAGE 7

Key Financial Ratios

MEMORIAL HOSPITAL OF SWEETWATER COUNTY ROCK SPRINGS, WY

PAGE 2

Three months ended September 30, 2018

↓ ↑ - DESIRED POSITION IN RELATION TO BENCHMARKS AND BUDGET

		Month to Date 9/30/2018	Year to Date 9/30/2018	Prior Fiscal Year End 06/30/18	MGMA Hospital Owned Rural
Profitability:					
Operating Margin	↑	-61.90%	-51.79%	-76.57%	-36.58%
Total Profit Margin	↑	-61.90%	-51.79%	-76.57%	-36.58%
Contractual Allowance %	↓	47.52%	45.09%	46.36%	
Liquidity:					
Net Days in Accounts Receivable	↓	73.90	66.31	62.33	39.58
Gross Days in Accounts Receivable	↓	65.33	61.35	55.18	72.82
Productivity and Efficiency:					
Patient Visits Per Day	↓	121.80	124.84	133.67	
Total Net Revenue per FTE	↑	N/A	\$148,118	\$139,450	
Salary Expense per Paid FTE		N/A	\$168,851	\$181,602	
Salary and Benefits as a % of Net Revenue		137.00%	128.66%	150.24%	91.26%
Employee Benefits %		11.63%	12.86%	15.36%	6.10%

Statement of Revenue and Expense

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

Three months ended September 30, 2018

	CURRENT MONTH				Prior Year 09/30/17
	Actual 09/30/18	Budget 09/30/18	Positive (Negative) Variance	Percentage Variance	
Gross Patient Revenue					
Clinic Revenue	1,076,083	1,244,546	(168,463)	-13.54%	1,103,975
Specialty Clinic Revenue	146,133	146,133	0	0.00%	236,113
Total Gross Patient Revenue	<u>1,222,216</u>	<u>1,390,679</u>	<u>(168,463)</u>	<u>-12.11%</u>	<u>1,340,088</u>
Deductions From Revenue					
Discounts and Allowances	(580,856)	(609,926)	29,070	4.77%	(555,237)
Total Deductions From Revenue	<u>(580,856)</u>	<u>(609,926)</u>	<u>29,070</u>	<u>4.77%</u>	<u>(555,237)</u>
Net Patient Revenue	<u>641,360</u>	<u>780,753</u>	<u>(139,393)</u>	<u>-17.85%</u>	<u>784,851</u>
Other Operating Revenue	62,144	69,682	(7,537)	-10.82%	55,461
Total Operating Revenue	<u>703,504</u>	<u>850,435</u>	<u>(146,930)</u>	<u>-17.28%</u>	<u>840,312</u>
Operating Expenses					
Salaries and Wages	863,345	926,150	62,805	6.78%	981,413
Fringe Benefits	100,447	131,163	30,716	23.42%	115,658
Contract Labor	0	0	0	0.00%	0
Physicians Fees	38,235	43,300	5,065	11.70%	8,000
Purchased Services	5,363	5,933	569	9.60%	14,339
Supply Expense	10,863	12,122	1,260	10.39%	12,121
Utilities	1,267	1,554	287	18.49%	1,574
Repairs and Maintenance	29,160	26,862	(2,299)	-8.56%	28,910
Insurance Expense	16,088	16,089	0	0.00%	19,406
All Other Operating Expenses	45,658	50,624	4,966	9.81%	65,091
Bad Debt Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Leases and Rentals	4,874	4,520	(354)	-7.82%	5,018
Depreciation and Amortization	23,690	21,312	(2,378)	-11.16%	25,747
Interest Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Total Operating Expenses	<u>1,138,991</u>	<u>1,239,629</u>	<u>100,638</u>	<u>8.12%</u>	<u>1,277,277</u>
Net Operating Surplus/(Loss)	<u>(435,487)</u>	<u>(389,194)</u>	<u>(46,292)</u>	<u>11.89%</u>	<u>(436,964)</u>
Total Net Surplus/(Loss)	<u>(\$435,487)</u>	<u>(\$389,194)</u>	<u>(\$46,292)</u>	<u>11.89%</u>	<u>(\$436,964)</u>
Change in Unrealized Gains/(Losses) on Investments	0	0	0	0.00%	
Increase/(Decrease in Unrestricted Net Assets)	<u>(435,487)</u>	<u>(389,194)</u>	<u>(46,292)</u>	<u>11.89%</u>	<u>(436,964)</u>
Operating Margin	-61.90%	-45.76%			-52.00%
Total Profit Margin	-61.90%	-45.76%			-52.00%
EBIDA	-58.54%	-43.26%			-48.94%

Statement of Revenue and Expense

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

ROCK SPRINGS, WY

Three months ended September 30, 2018

	YEAR-TO-DATE				
	Actual 09/30/18	Budget 09/30/18	Positive (Negative) Variance	Percentage Variance	Prior Year 09/30/17
Gross Patient Revenue					
Clinic Revenue	3,369,607	3,419,625	(50,019)	-1.46%	3,245,286
Specialty Clinic Revenue	627,422	541,273	86,149	15.92%	652,374
Total Gross Patient Revenue	<u>3,997,029</u>	<u>3,960,899</u>	<u>36,130</u>	<u>0.91%</u>	<u>3,897,659</u>
Deductions From Revenue					
Discounts and Allowances	(1,802,145)	(1,813,321)	11,176	0.62%	(1,649,123)
Total Deductions From Revenue	<u>(1,802,145)</u>	<u>(1,813,321)</u>	<u>11,176</u>	<u>0.62%</u>	<u>(1,649,123)</u>
Net Patient Revenue	<u>2,194,884</u>	<u>2,147,578</u>	<u>47,307</u>	<u>2.20%</u>	<u>2,248,536</u>
Other Operating Revenue	192,612	204,141	(11,528)	-5.65%	160,970
Total Operating Revenue	<u>2,387,496</u>	<u>2,351,718</u>	<u>35,778</u>	<u>1.52%</u>	<u>2,409,506</u>
Operating Expenses					
Salaries and Wages	2,721,693	2,834,733	113,040	3.99%	3,259,395
Fringe Benefits	350,011	406,986	56,975	14.00%	371,087
Contract Labor	0	0	0	0.00%	0
Physicians Fees	46,535	59,900	13,365	22.31%	22,250
Purchased Services	18,470	17,527	(943)	-5.38%	42,850
Supply Expense	32,197	35,485	3,288	9.27%	34,993
Utilities	3,549	4,651	1,103	23.70%	4,723
Repairs and Maintenance	84,355	81,295	(3,059)	-3.76%	81,570
Insurance Expense	48,265	48,266	1	0.00%	59,439
All Other Operating Expenses	229,716	170,699	(59,017)	-34.57%	276,423
Bad Debt Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Leases and Rentals	15,467	13,561	(1,905)	-14.05%	17,686
Depreciation and Amortization	73,610	68,714	(4,896)	-7.12%	77,419
Interest Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Total Operating Expenses	<u>3,623,868</u>	<u>3,741,818</u>	<u>117,950</u>	<u>3.15%</u>	<u>4,247,836</u>
Net Operating Surplus/(Loss)	(1,236,371)	(1,390,100)	153,728	-11.06%	(1,838,330)
Total Net Surplus/(Loss)	(1,236,371)	(1,390,100)	\$153,728	-11.06%	(1,838,330)
Change in Unrealized Gains/(Losses) on Investments	0	0	0	0.00%	0
Increase/(Decrease) in Unrestricted Net Assets	(1,236,371)	(1,390,100)	\$153,728	-11.06%	(1,838,330)
Operating Margin	-51.79%	-59.11%			-76.29%
Total Profit Margin	-51.79%	-59.11%			-76.29%
EBIDA	-48.70%	-56.19%			-73.08%

Statement of Revenue and Expense - 13 Month Trend

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

	Actual 9/30/2018	Actual 8/31/2018	Actual 7/31/2018	Actual 6/30/2018	Actual 5/31/2018
Gross Patient Revenue					
Clinic Revenue	\$1,076,083	\$1,193,552	\$1,099,971	\$1,246,901	\$1,294,418
Specialty Clinic Revenue	\$146,133	\$215,242	\$266,047	\$179,865	\$209,960
Total Gross Patient Revenue	\$1,222,216	\$1,408,794	\$1,366,018	\$1,426,767	\$1,504,378
Deductions From Revenue					
Discounts and Allowances	\$580,856	\$628,019	\$593,270	721,946	723,707
Total Deductions From Revenue	580,856	628,019	593,270	721,946	723,707
Net Patient Revenue	\$641,360	\$780,776	\$772,749	\$704,821	\$780,671
Other Operating Revenue	\$62,144	\$64,664	\$65,804	56,368	51,230
Total Operating Revenue	703,504	845,440	838,552	761,188	831,901
Operating Expenses					
Salaries and Wages	\$863,345	\$905,846	\$952,502	\$997,175	\$1,006,587
Fringe Benefits	\$100,447	\$133,815	\$115,748	\$130,925	\$167,936
Contract Labor	\$0	\$0	\$0		
Physicians Fees	\$38,235	\$4,150	\$4,150	\$44,124	\$20,989
Purchased Services	\$5,363	\$6,258	\$6,849	\$5,025	\$4,336
Supply Expense	\$10,863	\$14,751	\$6,583	\$31,946	\$15,134
Utilities	\$1,267	\$1,563	\$719	\$1,296	\$1,296
Repairs and Maintenance	\$29,160	\$27,304	\$27,891	\$25,292	\$30,760
Insurance Expense	\$16,088	\$16,088	\$16,088	\$18,578	\$18,396
All Other Operating Expenses	\$45,658	\$93,350	\$90,708	\$95,556	\$80,282
Bad Debt Expense (Non-Governmental Providers)					
Leases and Rentals	\$4,874	\$5,276	\$5,317	\$5,457	\$5,130
Depreciation and Amortization	\$23,690	\$24,915	\$25,005	\$24,495	\$24,525
Interest Expense (Non-Governmental Providers)					
Total Operating Expenses	\$1,138,991	\$1,233,317	\$1,251,560	\$1,379,869	\$1,375,371
Net Operating Surplus/(Loss)	(\$435,487)	(\$387,877)	(\$413,008)	(\$618,681)	(\$543,470)
Total Net Surplus/(Loss)	(\$435,487)	(\$387,877)	(\$413,008)	(\$618,681)	(\$543,470)
Change in Unrealized Gains/(Losses) on Investr	0	0	0	0	0
Increase/(Decrease in Unrestricted Net Assets	(\$435,487)	(\$387,877)	(\$413,008)	(\$618,681)	(\$543,470)
Operating Margin	-61.90%	-45.88%	-49.25%	-81.28%	-65.33%
Total Profit Margin	-61.90%	-45.88%	-49.25%	-81.28%	-65.33%
EBIDA	-58.54%	-42.93%	-46.27%	-78.06%	-62.38%

Actual 4/30/2018	Actual 3/31/2018	Actual 2/28/2018	Actual 1/31/2018	Actual 12/31/2017	Actual 11/30/2017	Actual 10/31/2017	Actual 9/30/2017
\$1,045,617	\$1,318,709	\$1,119,761	\$1,215,537	\$1,048,027	\$1,212,089	\$1,220,406	\$1,103,975
\$190,157	\$247,601	\$83,134	\$157,597	\$191,061	\$176,581	\$205,457	\$236,113
\$1,235,774	\$1,566,309	\$1,202,895	\$1,373,134	\$1,239,088	\$1,388,670	\$1,425,863	\$1,340,088
553,735	713,615	704,136	623,009	543,305	612,876	692,936	555,237
553,735	713,615	704,136	623,009	543,305	612,876	692,936	555,237
\$682,039	\$852,694	\$498,759	\$750,126	\$695,783	\$775,795	\$732,927	\$784,851
62,427	65,331	92,755	39,205	75,425	47,316	57,810	55,461
744,466	918,025	591,514	789,330	771,208	823,111	790,737	840,312
\$929,322	\$996,616	\$1,044,644	\$1,050,815	\$1,074,475	\$911,619	\$1,011,079	\$981,413
\$182,950	\$149,196	\$208,855	\$229,329	\$150,556	\$141,429	\$154,715	\$115,658
\$46,770	\$54,331	\$35,838	\$49,360	\$27,509	\$8,750	\$13,500	\$8,000
\$5,124	\$6,119	\$6,909	\$6,934	\$3,674	\$16,060	\$14,349	\$14,339
\$26,988	\$15,838	\$13,586	\$11,675	\$12,148	\$6,673	\$12,143	\$12,121
\$1,917	\$1,612	\$1,292	\$1,924	\$1,576	\$1,293	\$1,885	\$1,574
\$23,559	\$23,975	\$44,024	\$24,693	\$44,360	\$27,672	\$25,772	\$28,910
\$18,396	\$17,662	\$17,762	\$17,762	\$17,762	\$19,353	\$18,963	\$19,406
\$65,989	\$69,590	\$52,427	\$58,416	\$67,389	\$60,479	\$75,621	\$65,091
\$5,328	\$4,923	\$5,658	\$5,487	\$4,823	\$5,002	\$4,831	\$5,018
\$25,871	\$25,156	\$25,537	\$25,690	\$25,820	\$25,820	\$25,820	\$25,747
\$1,332,214	\$1,365,018	\$1,456,533	\$1,482,085	\$1,430,091	\$1,224,150	\$1,358,677	\$1,277,277
(\$587,748)	(\$446,994)	(\$865,019)	(\$692,755)	(\$658,883)	(\$401,039)	(\$567,940)	(\$436,964)
(\$587,748)	(\$446,994)	(\$865,019)	(\$692,755)	(\$658,883)	(\$401,039)	(\$567,940)	(\$436,964)
0	0	0	0	0	0	0	0
(\$587,748)	(\$446,994)	(\$865,019)	(\$692,755)	(\$658,883)	(\$401,039)	(\$567,940)	(\$436,964)
-78.95%	-48.69%	-146.24%	-87.76%	-85.44%	-48.72%	-71.82%	-52.00%
-78.95%	-48.69%	-146.24%	-87.76%	-85.44%	-48.72%	-71.82%	-52.00%
-75.47%	-45.95%	-141.92%	-84.51%	-82.09%	-45.59%	-68.56%	-48.94%

Patient Statistics

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

ROCK SPRINGS, WY

Three months ended September 30, 2018

Current Month				STATISTICS	Year-To-Date			
Actual 09/30/18	Budget 09/30/18	Positive/ (Negative) Variance	Prior Year 09/30/17		Actual 09/30/18	Budget 09/30/18	Positive/ (Negative) Variance	Prior Year 09/30/17
Outpatient Statistics:								
3,654	3,846	(192)	3,771	Clinic Visits - Primary Care	11,485	11,260	225	11,756
443	521	(78)	474	Clinic Visits - Specialty Clinics	1,343	1,386	(43)	1,459
Productivity Statistics:								
60.07	65.96	(5.89)	58.76	FTE's - Worked	57.63	65.96	(8.33)	62.50
63.49	71.70	(8.21)	67.23	FTE's - Paid	63.95	71.70	(7.75)	72.23



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

HOSPITAL ONLY

Unaudited Financial Statements

for

Three months ended September 30, 2018

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.

Page 186 of 305

Certified by:

Tami Love

Chief Financial Officer

Table of Contents

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

PAGE 1

Three months ended September 30, 2018

TABLE OF CONTENTS

FINANCIAL RATIOS AND BENCHMARKS	PAGE 2
STATEMENT OF OPERATIONS - CURRENT MONTH	PAGE 3
STATEMENT OF OPERATIONS - YEAR-TO-DATE	PAGE 4
STATEMENT OF OPERATIONS - 13 MONTH TREND	PAGE 5
KEY OPERATING STATISTICS	PAGE 7



Key Financial Ratios

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

PAGE 2

ROCK SPRINGS, WY

Three months ended September 30, 2018

↓ ↑ - DESIRED POSITION IN RELATION TO BENCHMARKS AND BUDGET

		Month to Date 9/30/2018	Year to Date 9/30/2018	Prior Fiscal Year End 06/30/18	WYOMING All Hospitals (See Note 1)	National Rural < \$90M Net Rev (See Note 2)
Profitability:						
Operating Margin	↑	9.83%	9.81%	6.04%	2.64%	-0.73%
Total Profit Margin	↑	8.12%	8.45%	11.04%	6.11%	0.21%
Contractual Allowance %	↓	37.23%	38.76%	31.23%	34.31%	53.86%
Inpatient Gross Revenue Percentage		23.26%	23.12%	34.51%	36.90%	28.70%
Outpatient Gross Revenue Percentage		76.74%	76.88%	65.49%	64.10%	71.70%
Liquidity:						
Net Days in Accounts Receivable	↓	53.25	48.46	53.22	66.90	57.20
Gross Days in Accounts Receivable	↓	53.84	49.43	52.36		
Productivity and Efficiency:						
Paid FTE's per Adjusted Occupied Bed	↓	8.75	7.59	7.35	6.60	4.63
Total Net Revenue per FTE	↑	N/A	\$202,202	\$176,393	\$132,369	\$109,053
Salary Expense per Paid FTE		N/A	\$71,691	\$63,287	\$62,436	\$48,150
Salary and Benefits as a % of Net Revenue		44.59%	44.75%	46.65%	43.60%	42.40%
Employee Benefits %		25.45%	27.29%	30.51%	22.98%	29.27%

Note 1 - 2017 Ingenix report (2015 median data), for all hospitals within the state regardless of size.

Note 2 - 2017 Ingenix report (2015 median data), for all U. S. hospitals that match this type and size.

Statement of Revenue and Expense

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

PAGE 3

ROCK SPRINGS, WY

Three months ended September 30, 2018

	CURRENT MONTH				
	Actual 09/30/18	Budget 09/30/18	Positive (Negative) Variance	Percentage Variance	Prior Year 09/30/17
Gross Patient Revenue					
Inpatient Revenue	\$2,499,813	\$2,918,151	(\$418,337)	-14.34%	\$2,847,823
Outpatient Revenue	8,246,353	9,175,626	(929,273)	-10.13%	8,831,699
Clinic Revenue	0	0	0	0.00%	0
Specialty Clinic Revenue	0	0	0	0.00%	0
Total Gross Patient Revenue	<u>10,746,167</u>	<u>12,093,777</u>	<u>(1,347,610)</u>	<u>-11.14%</u>	<u>11,679,522</u>
Deductions From Revenue					
Discounts and Allowances	(4,000,314)	(4,818,213)	817,899	16.98%	(4,513,867)
Bad Debt Expense (Governmental Providers Only)	(1,072,535)	(712,436)	(360,099)	-50.54%	(982,992)
Charity Care	(135,091)	(170,821)	35,730	20.92%	(63,706)
Total Deductions From Revenue	<u>(5,207,939)</u>	<u>(5,701,469)</u>	<u>493,530</u>	<u>8.66%</u>	<u>(5,560,565)</u>
Net Patient Revenue	<u>5,538,227</u>	<u>6,392,308</u>	<u>(854,080)</u>	<u>-13.36%</u>	<u>6,118,958</u>
Other Operating Revenue	615,923	157,403	458,520	291.30%	76,560
Total Operating Revenue	<u>6,154,150</u>	<u>6,549,711</u>	<u>(395,561)</u>	<u>-6.04%</u>	<u>6,195,517</u>
Operating Expenses					
Salaries and Wages	2,151,231	2,225,877	74,647	3.35%	1,979,137
Fringe Benefits	547,562	647,154	99,592	15.39%	504,914
Contract Labor	45,634	110,090	64,456	58.55%	137,000
Physicians Fees	201,646	224,048	22,402	10.00%	149,461
Purchased Services	336,727	387,152	50,425	13.02%	465,859
Supply Expense	1,049,336	1,130,735	81,399	7.20%	1,073,913
Utilities	89,361	91,930	2,568	2.79%	104,431
Repairs and Maintenance	322,779	347,922	25,143	7.23%	314,793
Insurance Expense	50,129	44,286	(5,842)	-13.19%	47,183
All Other Operating Expenses	93,109	100,358	7,249	7.22%	103,978
Bad Debt Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Leases and Rentals	80,262	67,290	(12,972)	-19.28%	84,230
Depreciation and Amortization	581,133	600,087	18,954	3.16%	656,602
Interest Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Total Operating Expenses	<u>5,548,909</u>	<u>5,976,928</u>	<u>428,019</u>	<u>7.16%</u>	<u>5,621,502</u>
Net Operating Surplus/(Loss)	605,241	572,783	32,459	5.67%	574,016
Non-Operating Revenue:					
Contributions	0	0	0	0.00%	0
Investment Income	4,652	3,985	667	16.73%	10,888
Tax Subsidies (Except for GO Bond Subsidies)	0	0	0	0.00%	420,876
Tax Subsidies for GO Bonds	16,574	0	16,574	0.00%	(694)
Interest Expense (Governmental Providers Only)	(127,030)	(113,824)	13,206	-11.60%	(107,709)
Other Non-Operating Revenue/(Expenses)	360	17,504	(17,144)	-97.94%	325,536
Total Non Operating Revenue/(Expense)	<u>(105,445)</u>	<u>(92,335)</u>	<u>(13,110)</u>	<u>14.20%</u>	<u>325,536</u>
Total Net Surplus/(Loss)	\$499,797	\$480,448	\$19,348	4.03%	\$899,552
Change in Unrealized Gains/(Losses) on Investments	0	0	0	0.00%	0
Increase/(Decrease) in Unrestricted Net Assets	\$499,797	\$480,448	\$19,348	4.03%	\$899,552
Operating Margin	9.83%	8.75%			9.27%
Total Profit Margin	8.12%	7.34%			14.52%
EBIDA	19.28%	17.91%			24.96%

Statement of Revenue and Expense

**MEMORIAL HOSPITAL OF SWEETWATER COUNTY
ROCK SPRINGS, WY
Three months ended September 30, 2018**

	YEAR-TO-DATE				Prior Year 09/30/17
	Actual 09/30/18	Budget 09/30/18	Positive (Negative) Variance	Percentage Variance	
Gross Patient Revenue					
Inpatient Revenue	\$8,296,615	\$8,789,197	(\$492,581)	-5.60%	\$8,593,879
Outpatient Revenue	27,592,883	27,574,387	18,496	0.07%	26,635,593
Clinic Revenue	0	0	0	0.00%	0
Specialty Clinic Revenue	0	0	0	0.00%	0
Total Gross Patient Revenue	<u>35,889,498</u>	<u>36,363,584</u>	<u>(474,086)</u>	<u>-1.30%</u>	<u>35,229,472</u>
Deductions From Revenue					
Discounts and Allowances	(13,911,997)	(14,467,753)	555,756	3.84%	(13,710,676)
Bad Debt Expense (Governmental Providers Only)	(2,894,129)	(2,137,309)	(756,820)	-35.41%	(2,742,194)
Charity Care	(423,173)	(512,462)	89,289	17.42%	(542,398)
Total Deductions From Revenue	<u>(17,229,299)</u>	<u>(17,117,524)</u>	<u>(111,775)</u>	<u>-0.65%</u>	<u>(16,995,268)</u>
Net Patient Revenue	<u>18,660,199</u>	<u>19,246,060</u>	<u>(585,861)</u>	<u>-3.04%</u>	<u>18,234,204</u>
Other Operating Revenue	795,552	472,204	323,348	68.48%	202,618
Total Operating Revenue	<u>19,455,751</u>	<u>19,718,264</u>	<u>(262,513)</u>	<u>-1.33%</u>	<u>18,436,822</u>
Operating Expenses					
Salaries and Wages	6,631,270	6,843,418	212,149	3.10%	6,343,188
Fringe Benefits	1,809,345	1,976,459	167,114	8.46%	1,583,402
Contract Labor	266,773	325,271	58,498	17.98%	441,255
Physicians Fees	661,977	718,643	56,666	7.89%	455,639
Purchased Services	1,066,703	1,157,659	90,956	7.86%	1,242,843
Supply Expense	3,358,040	3,390,334	32,294	0.95%	3,119,281
Utilities	274,007	285,249	11,242	3.94%	275,759
Repairs and Maintenance	1,044,295	1,055,937	11,642	1.10%	989,670
Insurance Expense	148,040	132,859	(15,181)	-11.43%	140,801
All Other Operating Expenses	296,791	304,487	7,696	2.53%	296,206
Bad Debt Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Leases and Rentals	214,380	201,869	(12,511)	-6.20%	263,060
Depreciation and Amortization	1,775,182	1,830,090	54,908	3.00%	2,007,771
Interest Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Total Operating Expenses	<u>17,546,803</u>	<u>18,222,275</u>	<u>675,472</u>	<u>3.71%</u>	<u>17,158,876</u>
Net Operating Surplus/(Loss)	1,908,948	1,495,989	412,959	27.60%	1,277,946
Non-Operating Revenue:					
Contributions	0	0	0	0.00%	0
Investment Income	24,840	11,955	12,885	107.78%	21,699
Tax Subsidies (Except for GO Bond Subsidies)	0	0	0	0.00%	1,037,908
Tax Subsidies for GO Bonds	51,848	0	51,848	0.00%	34,571
Interest Expense (Governmental Providers Only)	(341,322)	(341,471)	149	-0.04%	(338,497)
Other Non-Operating Revenue/(Expense)	360	52,512	(52,152)	-99.31%	2,824
Total Non Operating Revenue/(Expense)	<u>(264,274)</u>	<u>(277,004)</u>	<u>12,729</u>	<u>-4.60%</u>	<u>758,505</u>
Total Net Surplus/(Loss)	\$1,644,674	\$1,218,986	\$425,688	34.92%	\$2,036,450
Change in Unrealized Gains/(Losses) on Investments	0	0	0	0.00%	0
Increase/(Decrease) in Unrestricted Net Assets	\$1,644,674	\$1,218,986	\$425,688	34.92%	\$2,036,450
Operating Margin	9.81%	7.59%			6.93%
Total Profit Margin	8.45%	6.18%			11.05%
EBIDA	18.94%	16.87%			22.20%

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

	Actual 9/30/2018	Actual 8/31/2018	Actual 7/31/2018	Actual 6/30/2018	Actual 5/31/2018
Gross Patient Revenue					
Inpatient Revenue	\$2,499,813	\$2,459,161	\$3,337,641	\$2,691,073	\$2,473,613
Inpatient Psych/Rehab Revenue					
Outpatient Revenue	\$8,246,353	\$9,927,413	\$9,419,117	\$8,888,200	9,045,342
Clinic Revenue					
Specialty Clinic Revenue					
Total Gross Patient Revenue	\$10,746,167	\$12,386,574	\$12,756,758	\$11,579,273	\$11,518,954
Deductions From Revenue					
Discounts and Allowances	\$4,000,314	\$4,612,971	\$5,298,713	\$3,551,358	4,396,490
Bad Debt Expense (Governmental Providers On Charity Care)	\$1,072,535	\$972,129	\$849,465	\$1,232,693	750,881
Charity Care	\$135,091	\$202,867	\$85,215	\$419,740	188,399
Total Deductions From Revenue	5,207,939	5,787,967	6,233,393	5,203,792	5,335,770
Net Patient Revenue	\$5,538,227	\$6,598,607	\$6,523,365	\$6,375,481	\$6,183,184
Other Operating Revenue	\$615,923	\$94,523	\$85,105	425,680	65,272
Total Operating Revenue	6,154,150	6,693,130	6,608,471	6,801,161	6,248,456
Operating Expenses					
Salaries and Wages	\$2,151,231	\$2,226,268	\$2,253,771	\$1,978,793	\$2,088,990
Fringe Benefits	\$547,562	\$691,782	\$570,001	\$563,935	\$684,981
Contract Labor	\$45,634	\$87,004	\$134,135	\$46,590	\$106,303
Physicians Fees	\$201,646	\$207,278	\$253,053	\$399,203	\$343,566
Purchased Services	\$336,727	\$359,817	\$370,160	\$434,260	\$416,068
Supply Expense	\$1,049,336	\$1,119,224	\$1,189,480	\$978,165	\$987,098
Utilities	\$89,361	\$102,844	\$81,802	\$97,143	\$92,256
Repairs and Maintenance	\$322,779	\$390,492	\$331,025	\$344,444	\$313,047
Insurance Expense	\$50,129	\$50,129	\$47,783	\$42,948	\$49,126
All Other Operating Expenses	\$93,109	\$100,065	\$103,617	\$175,061	\$115,217
Bad Debt Expense (Non-Governmental Providers)					
Leases and Rentals	\$80,262	\$66,732	\$67,386	\$95,141	\$64,460
Depreciation and Amortization	\$581,133	\$597,042	\$597,007	\$928,137	\$584,332
Interest Expense (Non-Governmental Providers)					
Total Operating Expenses	\$5,548,909	\$5,998,676	\$5,999,218	\$6,083,819	\$5,845,442
Net Operating Surplus/(Loss)	\$605,241	\$694,454	\$609,252	\$717,342	\$403,014
Non-Operating Revenue:					
Contributions					
Investment Income	\$4,652	\$14,772	\$5,416	\$18,869	103,261
Tax Subsidies (Except for GO Bond Subsidies)		\$0			
Tax Subsidies for GO Bonds	(\$127,030)	(\$102,944)	0	51,516	315,887
Interest Expense (Governmental Providers Only)			(111,348)	(197,203)	(104,082)
Other Non-Operating Revenue/(Expenses)	\$16,934	\$14,644	20,631	12,052	16,881
Total Non Operating Revenue/(Exper	(\$105,445)	(\$73,528)	(\$85,301)	(\$114,766)	\$331,947
Total Net Surplus/(Loss)	\$499,797	\$620,926	\$523,951	\$602,576	\$734,961
Change in Unrealized Gains/(Losses) on Investments				(7,438)	58,630
Increase/(Decrease in Unrestricted Net Assets	\$499,797	\$620,926	\$523,951	\$595,138	\$793,591
Operating Margin	9.83%	10.38%	9.22%	10.55%	6.45%
Total Profit Margin	8.12%	9.28%	7.93%	8.86%	11.76%
EBIDA	19.28%	19.30%	18.25%	24.19%	15.80%

Actual 4/30/2018	Actual 3/31/2018	Actual 2/28/2018	Actual 1/31/2018	Actual 12/31/2017	Actual 11/30/2017	Actual 10/31/2017	Actual 9/30/2017
\$3,103,402	\$3,572,487	\$2,539,861	\$3,482,532	\$2,372,167	\$2,557,222	\$2,788,873	\$2,847,823
8,179,117	9,117,337	8,217,125	9,046,087	9,332,424	9,091,002	9,761,390	8,831,699
\$11,282,519	\$12,689,825	\$10,756,986	\$12,528,619	\$11,704,591	\$11,648,224	\$12,550,263	\$11,679,522
4,626,836	4,986,232	4,075,828	5,242,385	4,444,609	4,786,171	4,797,468	4,513,867
608,142	888,176	510,331	432,591	595,394	298,556	945,198	982,992
162,130	(6,620)	160,500	105,168	261,972	188,422	196,604	63,706
5,397,109	5,867,788	4,746,658	5,780,144	5,301,974	5,273,149	5,939,270	5,560,565
\$5,885,410	\$6,822,037	\$6,010,328	\$6,748,475	\$6,402,616	\$6,375,075	\$6,610,993	\$6,118,958
336,532	57,279	153,602	163,625	144,416	313,559	168,217	76,560
6,221,942	6,879,315	6,163,930	6,912,100	6,547,032	6,688,634	6,779,210	6,195,517
\$2,053,463	\$2,214,812	\$1,960,393	\$2,219,100	\$2,070,775	\$1,963,764	\$2,184,887	\$1,979,137
\$809,969	\$500,496	\$781,722	\$890,349	\$704,402	\$724,284	\$744,932	\$504,914
\$122,359	\$44,526	\$79,857	\$166,621	\$111,766	\$183,557	\$129,775	\$137,000
\$300,002	\$199,858	\$219,225	\$201,398	\$265,382	\$201,781	\$174,802	\$149,461
\$432,527	\$432,958	\$414,154	\$420,807	\$361,134	\$489,788	\$398,284	\$465,859
\$1,053,696	\$1,166,378	\$958,879	\$1,188,979	\$1,019,865	\$1,081,715	\$1,074,955	\$1,073,913
\$88,970	\$105,918	\$80,437	\$93,761	\$92,517	\$90,096	\$83,480	\$104,431
\$355,223	\$352,240	\$396,900	\$364,448	\$323,889	\$330,784	\$299,456	\$314,793
\$34,681	\$39,199	\$39,099	\$41,178	\$41,157	\$41,666	\$44,841	\$47,183
\$132,373	\$131,711	\$101,946	\$118,798	\$72,178	\$111,968	\$140,301	\$103,978
\$62,646	\$68,428	\$70,085	\$73,104	\$63,901	\$67,620	(\$55,699)	\$84,230
\$584,562	\$585,835	\$584,851	\$586,577	\$591,507	\$592,805	\$712,442	\$656,602
\$6,030,471	\$5,842,359	\$5,687,548	\$6,365,120	\$5,718,475	\$5,879,828	\$5,932,455	\$5,621,502
\$191,471	\$1,036,956	\$476,382	\$546,980	\$828,558	\$808,806	\$846,755	\$574,016
(1,767)	10,816	4,898	(2,148)	1,833	902	4,510	10,888
233,293	291,849	379,346	322,567	334,349	338,547	308,743	420,876
(104,431)	(148,675)	(105,421)	(105,774)	(120,482)	(106,298)	(170,996)	(107,709)
12,688	40,555	8,609	26,104	11,269	23,279	20,605	1,481
\$139,783	\$194,545	\$287,432	\$240,749	\$226,968	\$256,429	\$162,862	\$325,936
\$331,254	\$1,231,501	\$763,813	\$787,729	\$1,055,526	\$1,065,235	\$1,009,617	\$899,552
\$331,254	\$1,231,501	\$763,813	\$787,729	\$1,055,526	\$1,065,235	\$1,009,617	\$899,552
3.08%	15.07%	7.73%	7.91%	12.66%	12.09%	12.49%	9.27%
5.32%	17.90%	12.39%	11.40%	16.12%	15.93%	14.89%	14.52%
12.47%	23.59%	17.22%	16.40%	21.69%	20.96%	23.00%	19.86%

Patient Statistics

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
ROCK SPRINGS, WY

Three months ended September 30, 2018

Current Month				STATISTICS					Year-To-Date				
Actual	Budget	Positive/ (Negative)	Prior Year		Actual	Budget	Positive/ (Negative)	Prior Year		Actual	Budget	Positive/ (Negative)	Prior Year
09/30/18	09/30/18	Variance	09/30/17		09/30/18	09/30/18	Variance	09/30/17		09/30/18	09/30/18	Variance	09/30/17
Discharges													
120	125	(5)	125	Acute	369	398	(29)	398					
120	125	(5)	125	Total Adult Discharges	369	398	(29)	398					
47	32	15	32	Newborn	106	122	(16)	122					
167	157	10	157	Total Discharges	475	520	(45)	520					
Patient Days:													
311	334	(23)	334	Acute	1,069	1,062	7	1,062					
311	334	(23)	334	Total Adult Patient Days	1,069	1,062	7	1,062					
80	50	30	50	Newborn	184	217	(33)	217					
391	384	7	384	Total Patient Days	1,253	1,279	(26)	1,279					
Average Length of Stay (ALOS)													
2.6	2.7	(0.1)	2.7	Acute	2.9	2.7	0.2	2.7					
2.6	2.7	(0.1)	2.7	Total Adult ALOS	2.9	2.7	0.2	2.7					
1.7	1.6	0.1	1.6	Newborn ALOS	1.7	1.8	(0.0)	1.8					
Average Daily Census (ADC)													
10.0	10.8	(0.7)	10.8	Acute	11.6	11.5	0.1	11.5					
10.0	10.8	(0.7)	10.8	Total Adult ADC	11.6	11.5	0.1	11.5					
2.6	1.6	1.0	1.6	Newborn	2.0	2.4	(0.4)	2.4					
Emergency Room Statistics													
119	140	(21)	140	ER Visits - Admitted	405	399	6	399					
1,155	1,179	(24)	1,179	ER Visits - Discharged	3,569	3,678	(109)	3,678					
1,274	1,319	(45)	1,319	Total ER Visits	3,974	4,077	(103)	4,077					
9.34%	10.61%		10.61%	% of ER Visits Admitted	10.19%	9.79%		9.79%					
99.17%	112.00%		112.00%	ER Admissions as a % of Total	109.76%	100.25%		100.25%					
Outpatient Statistics:													
6,027	6,136	(109)	6,136	Total Outpatients Visits	19,045	19,176	(131)	19,176					
77	108	(31)	108	Observation Bed Days	329	346	(17)	346					
25	30	(5)	30	IP Surgeries	71	86	(15)	86					
124	141	(17)	141	OP Surgeries	415	452	(37)	452					
Productivity Statistics:													
341.61	361.31	(19.70)	344.17	FTE's - Worked	343.11	361.31	(18.20)	344.22					
377.51	392.53	(15.02)	382.50	FTE's - Paid	381.74	392.53	(10.79)	387.25					
1.3433	1.3733	(0.03)	1.3733	Case Mix Index -Medicare	1.2309	0.9600	0.27	1.2844					
0.7620	0.9709	(0.21)	0.9709	Case Mix Index - All payers	0.7523	0.8500	(0.10)	0.8774					

KEY FINANCIAL RATIOS - FORMULAS AND PURPOSE

<p>EBITDA (Earnings Before Interest, Taxes, Depreciation & Amortization) Formula: $(\text{Net Operating Surplus or Loss} + \text{Interest Expense} + \text{Taxes} + \text{Depreciation} + \text{Amortization}) / \text{Total Operating Revenue}$ Purpose: Provides a measure of profitability excluding expenses related to the hospital's investments in the physical plant.</p>	<p>Higher Values are Favorable</p>
<p>Net Operating Gain/Loss Formula: $\text{Total Operating Revenue} - \text{Total Operating Expenses}$ Purpose: A measure of excess revenue over expenses (Gain) or excess expenses over revenue (Loss) with respect to patient care and hospital operations.</p>	<p>Higher Values are Favorable</p>
<p>Total Net Gain/Loss Formula: $\text{Total Operating Revenue} - \text{Total Operating Expenses} + \text{Total Non Operating Revenue \& Expense}$ Purpose: A measure of excess revenue over expenses (Gain) or excess expenses over revenue (Loss) including revenue and expenses not related to patient care.</p>	<p>Higher Values are Favorable</p>
<p>Operating Margin Formula: $\text{Net Operating Surplus or Loss} / \text{Total Operating Revenue}$ Purpose: A measure of the hospital's profitability with respect to patient care and hospital operations.</p>	<p>Higher Values are Favorable</p>
<p>Total Profit Margin Formula: $\text{Total Net Surplus or Loss} / \text{Total Operating Revenue}$ Purpose: Measures overall profitability from all sources, including revenue and expenses not related to patient care.</p>	<p>Higher Values are Favorable</p>
<p>Return on Assets Formula: $\text{Total Net Surplus or Loss} / \text{Total Unrestricted Assets}$ Purpose: A measure of excess revenue over expenses in relation to the overall assets controlled by the hospital.</p>	<p>Higher Values are Favorable</p>
<p>Contractual Allowance Percentage Formula: $\text{Total Deductions From Revenue} / \text{Total Gross Patient Revenue}$ Purpose: Represents the percentage of gross charges that are uncollectible due to mandated or voluntary contractual discounts.</p>	<p>Lower Values are Favorable</p>

KEY FINANCIAL RATIOS - FORMULAS AND PURPOSE

Days Cash on Hand, Short Term	Higher Values are Favorable
Formula: $\text{Cash \& Cash Equivalents} / ((\text{Total Operating Expenses} - \text{Depreciation \& Amortization} - \text{Bad Debt Expense}) / 365)$	
Purpose: Represents the number of days the hospital could operate without cash receipts utilizing only short term cash accounts.	
Days Cash on Hand, All Sources	Higher Values are Favorable
Formula: $(\text{Cash \& Cash Equivalents} + \text{Limited Use Cash} + \text{Funded Depreciation} + \text{Board Designated Funds}) / ((\text{Total Expenses} - \text{Depreciation \& Amortization} - \text{Bad Debt Expense}) / 365)$	
Purpose: Represents the number of days the hospital could operate without cash receipts utilizing all sources of cash available.	
Gross Days in Accounts Receivable	Lower Values are Favorable
Formula: $\text{Gross Patient Accounts Receivable} / (\text{Total Gross Patient Revenue} / 365)$	
Purpose: Represents the number of days of patient charges that is tied up in unpaid patient accounts.	
Net Days in Accounts Receivable	Lower Values are Favorable
Formula: $\text{Net Patient Accounts Receivable} / (\text{Net Patient Revenue} / 365)$	
Purpose: Represents the number of days of net patient revenue (cash flow) that is tied up in unpaid patient accounts.	
Average Payment Period	Lower Values are Favorable
Formula: $\text{Total Current Liabilities} / ((\text{Total Operating Expenses} - \text{Depreciation \& Amortization} - \text{Bad Debt Expense}) / 365)$	
Purpose: Measures the average time that elapses before current liabilities are met.	
Current Ratio	Higher Values are Favorable
Formula: $\text{Total Current Assets} / \text{Total Current Liabilities}$	
Purpose: An indicator of the hospital's liquidity and ability to meet short term (less than 1 year) liabilities utilizing short term assets.	
Average Age of Plant	Lower Values are Favorable
Formula: $\text{Accumulated Depreciation} / \text{Annual Depreciation Expense}$	
Purpose: Is used as a proxy for the average accounting age of a hospital's capital assets such as buildings, fixtures equipment.	
Capital Costs as a Percentage of Total Expenses	Lower Values are Favorable

KEY FINANCIAL RATIOS - FORMULAS AND PURPOSE

Formula: $(\text{Depreciation \& Amortization} + \text{Interest Expense}) / \text{Total Operating Expenses}$

Purpose: Measures the relative amount of fixed costs and is one measure used to determine a hospital's capital expenditure flexibility.

Long Term Debt to Equity

Lower Values are Favorable

Formula: $\text{Total Long Term Debt} / \text{Total Net Assets}$

Purpose: This is used to measure the degree of financial leverage that the hospital has employed.

Long Term Debt to Capitalization

Lower Values are Favorable

Formula: $\text{Total Long Term Debt} / (\text{Total Long Term Debt} + \text{Total Net Assets})$

Purpose: This measures the proportion of the hospital's capitalization provided by debt and is used as an indicator of debt capacity.

Debt Service Coverage Ratio

Higher Values are Favorable

Formula: $(\text{Total Net Surplus or Loss} + \text{Depreciation \& Amortization} + \text{Interest Expense}) / (\text{Current Portion of Long Term Debt} + \text{Interest Expense})$

Purpose: Measures the ratio of available funds for the payment of the current year's debt service (Principal and interest).

Salary Expense per Paid FTE

Lower Values are Favorable

Formula: $(\text{Salary \& Wages} + \text{Contract Labor}) / \text{Paid FTE's}$

Purpose: Provides a simple measure of the largest resource used in the hospital

Paid FTE's per Adjusted Occupied Bed

Lower Values are Favorable

Formula: $\text{Total Paid FTE's} / \text{Adjusted Average Daily Census}$

Purpose: A measure of the overall staffing of the hospital in relationship to the hospital's utilization.

Net Revenue per Adjusted Discharge

Higher Values are Favorable

Formula: $\text{Net Patient Revenue} / \text{Adjusted Discharges}$

Purpose: Is an indicator of the hospital's ability to generate collectable revenue from it's patient care operations.

Operating Expenses per Adjusted Discharge

Lower Values are Favorable

Formula: $\text{Total Operating Expenses} / \text{Adjusted Discharges}$

KEY FINANCIAL RATIOS - FORMULAS AND PURPOSE

Purpose: A measure of the hospital's average cost of delivering care per equivalent patient stay.

Financial Strength Index

Higher Values are Favorable

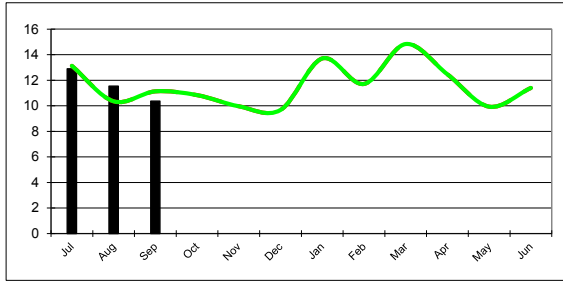
Formula: $((\text{Total Margin} - 4.0) / 4.0) + ((\text{Days Cash on Hand} - 50) / 50) + ((50 - \text{Debt to Capitalization Ratio}) / 50) + ((9 - \text{Average Age of Plant}) / 9)$

Purpose: Is an indicator of the hospital's overall long term financial health. This index combines the impact of increasing operating margins, increasing cash on hand from all sources, decreasing the hospital's reliance on debt for capital improvements and decreasing the hospital's average age of plant.

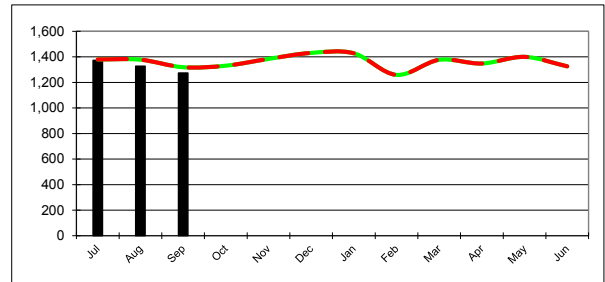
**MEMORIAL HOSPITAL OF SWEETWATER COUNTY
"DASHBOARD" GRAPHS
SEPTEMBER 2018**

— FYE 2018 ACTUAL
 - - - FYE 2019 BUDGET
 █ FYE 2019 ACTUAL

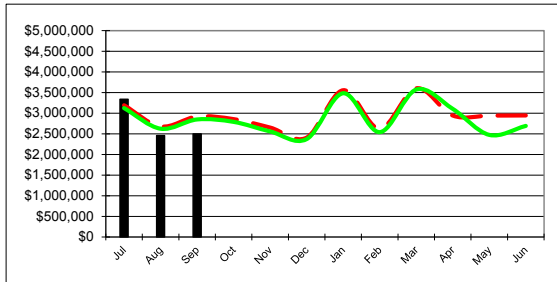
AVERAGE ACUTE CENSUS



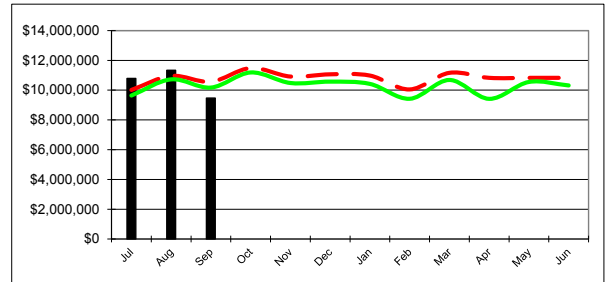
ER IP+OP VISITS



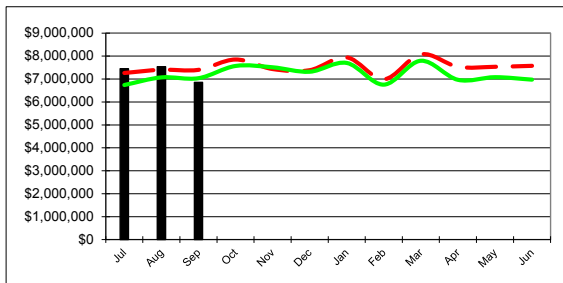
INPATIENT CHARGES



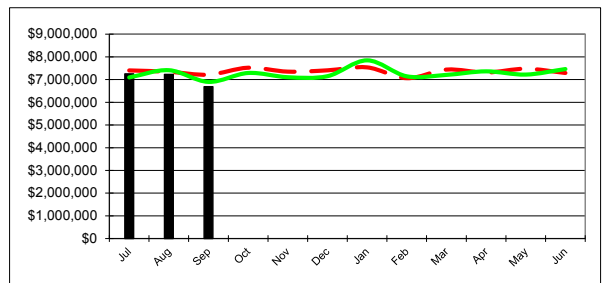
OUTPATIENT CHARGES



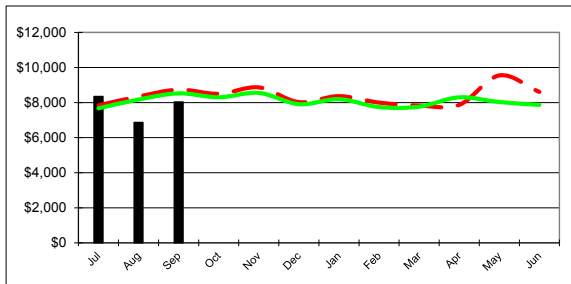
TOTAL NET OPERATING REVENUE



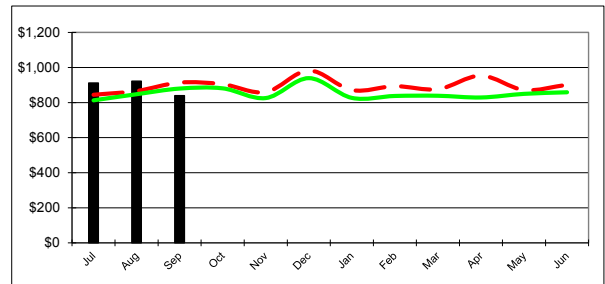
OPERATING EXPENSE



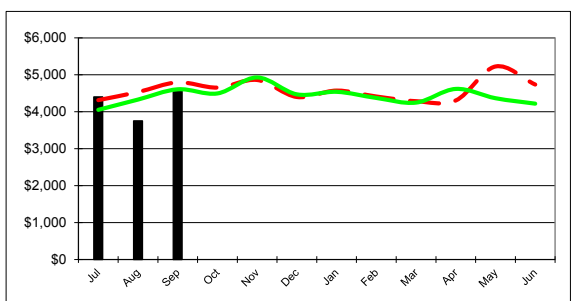
AVERAGE CHARGE PER ADJUSTED PATIENT DAY



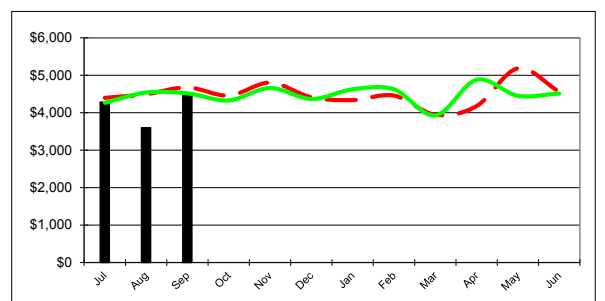
AVERAGE CHARGE PER OUTPATIENT VISIT (Inc. ER)



AVERAGE NET OPERATING REVENUE PER ADJUSTED PATIENT DAY



AVERAGE OPERATING EXPENSE PER ADJUSTED PATIENT DAY



MEMORIAL HOSPITAL OF SWEETWATER COUNTY

DETAIL STATISTICS

September 2018

STATISTICS	Actual Sep-18	Budget Sep-18	PY Sep-17	YTD Sep-18	YTD Sep-17	YTD Sep-16	YTD Sep-15
Case Mix							
Medicare	1.3433	1.3733	1.3733	1.2309	1.2844	1.4576	1.3752
All payers	0.7620	0.9709	0.9709	0.7523	0.8774	0.8626	0.8419
Admissions							
Med	59	60	60	190	184	228	264
ICU	16	21	21	55	69	97	90
Surgery	4	10	10	23	20	26	30
OB	47	31	31	107	125	156	147
Newborn	46	29	29	106	122	148	145
Total Admissions	172	151	151	481	520	655	676
Discharges							
Med	58	64	64	202	209	259	287
ICU	6	18	18	27	37	50	46
Surgery	8	12	12	32	27	38	48
OB	48	31	31	108	125	150	147
Newborn	47	32	32	106	122	145	145
Total Discharges	167	157	157	475	520	642	673
Patient Days:							
Med	180	183	183	671	587	1,112	1,072
ICU	40	61	61	113	152	242	259
Surgery	23	42	42	114	104	99	137
OB	68	48	48	171	219	248	239
Newborn	80	50	50	184	217	238	221
Total Patient Days	391	384	384	1,253	1,279	1,939	1,928
Observation Bed Days	77	108	108	329	346	272	219
Surgery Statistics:							
IP Surgeries	25	30	30	71	86	123	104
OP Surgeries	124	141	141	415	452	417	427
Outpatient Visits:							
X-ray	708	678	678	2,103	2,117	2,111	2,107
Mammography	103	152	152	361	386	360	405
Ultrasound	239	293	293	874	855	779	782
Cat Scan	413	443	443	1,276	1,304	1,198	1,146
MRI	117	119	119	370	327	301	318
Nuclear Medicine	31	65	65	107	152	108	120
PET Scan	2	18	18	14	39	32	15
Echo	52	0	0	161		0	0
Laboratory	2,489	2,280	2,280	7,872	7,655	9,085	7,808
Histology	151	164	164	518	463	412	394
Respiratory Therapy	224	255	255	613	761	735	693
Cardiovascular	364	433	433	1,232	1,257	1,396	1,356
Sleep Lab	27	27	27	90	88	61	55
Cardiac Rehab	278	300	300	815	1,012	1,418	1,224
Physical Therapy	144	194	194	387	626	679	736
Dialysis	375	313	313	1,153	923	712	775
Medical Oncology	154	152	152	493	483	571	671
Radiation Oncology	156	250	250	606	728	889	999
Total Outpatients Visits	6,027	6,136	6,136	19,045	19,176	20,847	19,604
Clinic Visits - Primary Care	3,654	3,846	3,771	11,485	11,756	13,196	16,658
Clinic Visits - Specialty Clinics	443	521	474	1,343	1,459	1,595	1,512
ER visits admitted	119	140	140	405	399	433	425
ER visits Discharged	1,155	1,179	1,179	3,569	3,678	3,790	3,902
Total ER visits	1,274	1,319	1,319	3,974	4,077	4,223	4,327

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

BUDGET	PPE	9/2/2018	9/16/2018	9/30/2018	Variance from Bud	CHANGE FROM LAST PAY PERIOD		YTD	Variance from budget
						Increase	Decrease		
AVG CENSUS	11.80	12.0	10.1	10.2	(1.6)	0.07	-	83.3	
ER VISITS (Avg Day)	45	40.7	45.3	38.9	(5.9)	-	6.36	302.6	
SURGERIES (IP+OP)	78	78	70	76	(1.6)	6.00	-	529.0	
BIRTHS	19	13	23	21	2.0	-	2.00	119.0	
CHARGES -IP \$000	1,358	1237	1202	1015	(343)	-	187.00	9102.0	
-OP \$000	4,987	4946	4298	4229	(758)	-	69.00	32381.0	
-TOTAL \$000	6,345	6183	5500	5244	(1,101)	-	256.00	41483.0	
Adjusted Patient Days	772	840	650	739	(33)	89.06	-	5,359.94	

Paid FTEs (Including Contract)

600	MEDICAL FLOOR	24.5	20.7	20.9	19.9	(4.6)	-	1.06	21.1	(3.4)
605	BEHAVIORAL HEALTH	7.2	7.2	4.5	5.9	(1.3)	1.36	-	8.1	0.9
610	OB FLOOR	5.3	6.9	6.9	6.7	1.4	-	0.16	6.3	1.0
611	NURSERY	7.2	6.7	7.3	6.5	(0.7)	-	0.79	6.8	(0.4)
612	LABOR & DELIVERY	4.9	2.9	3.4	3.0	(2.0)	-	0.44	3.1	(1.8)
615	OUTSIDE SERVICES	0.9	1.5	1.2	2.0	1.1	0.81	-	1.5	0.6
620	ICU	12.5	11.6	10.0	9.2	(3.3)	-	0.84	10.5	(2.0)
630	OR	12.1	13.7	11.9	13.4	1.3	1.49	-	13.2	1.1
631	SAME DAY SURGERY	6.8	6.2	6.1	5.9	(1.0)	-	0.24	5.8	(1.0)
633	RECOVERY	2.8	3.6	2.6	2.1	(0.7)	-	0.41	3.2	0.4
634	CENTRAL STERILE	3	1.5	2.8	2.6	(0.4)	-	0.15	2.6	(0.4)
640	DIALYSIS	7	7.8	8.0	8.3	1.3	0.30	-	7.2	0.2
650	ER	21.5	21.8	21.4	20.3	(1.2)	-	1.12	22.1	0.6
651	TRAUMA	1.3	2.2	2.1	1.9	0.6	-	0.21	1.9	0.6
652	SANE	0.9	1.1	1.0	1.1	0.2	0.13	-	1.1	0.2
660	RADIATION ONC	6.6	6.9	6.8	7.0	0.4	0.12	-	6.8	0.2
661	MEDICAL ONC	6	5.7	5.8	6.3	0.3	0.57	-	6.3	0.3
700	LABORATORY	31.1	30.1	29.9	28.4	(2.7)	-	1.46	29.6	(1.5)
701	HISTOLOGY	2	2.1	2.0	2.0	0.0	-	0.03	2.1	0.1
702	BLOOD BANK	1	1.0	0.9	1.2	0.2	0.32	-	1.1	0.1
710	RADIOLOGY	9.7	9.6	10.0	9.3	(0.4)	-	0.65	9.7	(0.0)
711	MAMMOGRAPY	1.6	1.1	0.7	1.5	(0.1)	0.78	-	1.2	(0.4)
712	ULTRASOUND	3.25	4.1	4.3	3.8	0.5	-	0.49	4.1	0.8
713	NUC MED	1.6	1.0	1.2	1.1	(0.5)	-	0.14	1.4	(0.2)
714	CAT SCAN	4.7	4.4	4.2	4.2	(0.5)	-	0.03	4.4	(0.3)
715	MRI	1.3	1.1	1.0	1.2	(0.1)	0.21	-	1.1	(0.2)
716	PET SCAN	0.1	-	-	-	(0.1)	-	-	0.0	(0.1)
717	ECHOCARDIOGRAPHY	1.25	1.0	0.5	0.3	(0.9)	-	0.19	0.8	(0.5)
720	RESPIRATORY	6	7.7	7.1	6.7	(0.7)	-	0.46	7.5	1.5
721	SLEEP LAB	2.3	1.6	1.6	1.9	(0.4)	0.30	-	1.6	(0.7)
722	CARDIO	2.3	1.9	2.0	1.9	(0.4)	-	0.13	1.9	(0.4)
723	CARDIAC REHAB	2.4	2.3	2.2	2.3	(0.1)	0.10	-	2.2	(0.2)
730	PHYSICAL THERAPY	3.5	3.5	3.0	3.5	(0.0)	0.53	-	3.2	(0.3)
780	EDUCATION	2	0.5	0.5	0.6	(1.4)	0.09	-	0.4	(1.6)
781	SOCIAL SERVICES	1	1.0	1.0	1.0	-	-	-	1.0	0.0
782	QUALITY	4	4.6	4.1	4.1	0.1	0.08	-	4.5	0.5
783	INFECTION CONTROL	2	3.0	4.0	2.0	(0.0)	-	1.99	2.4	0.4
784	ACCREDITATION	3	2.8	3.0	3.0	0.0	0.04	-	2.4	(0.6)
786	NURSING INFORMATICS	3	3.0	3.0	3.0	-	-	-	3.0	0.0
790	HEALTH INFORMATION	12.6	12.5	12.7	14.9	2.3	2.14	-	13.0	0.4
791	CASE MANAGEMENT	5.3	5.1	5.0	5.1	(0.2)	0.06	-	5.3	0.0
800	MAINTENANCE	11.7	11.6	11.3	11.8	0.1	0.51	-	11.2	(0.5)
801	HOUSEKEEPING	23.5	22.3	21.4	23.0	(0.5)	1.59	-	22.7	(0.8)
802	LAUNDRY	6.5	5.7	5.6	6.6	0.1	0.93	-	5.9	(0.6)
803	BIO MED	2	1.1	1.0	1.0	(1.0)	0.04	-	1.0	(1.0)
810	SECURITY	8.3	8.1	8.0	8.1	(0.2)	0.11	-	8.1	(0.2)
811	EMERGENCY MGMT	0.1	0.0	0.1	-	(0.1)	-	0.14	0.0	(0.1)
850	PURCHASING	5	5.0	5.1	5.0	-	-	0.09	5.0	0.0
855	CENTRAL SUPPLY	3	3.0	3.0	3.0	-	-	0.00	3.0	0.0
870	DIETARY	17.6	16.2	16.7	16.5	(1.1)	-	0.17	16.4	(1.2)
871	DIETICIANS	1.5	1.0	1.0	0.8	(0.7)	-	0.16	0.9	(0.6)
900	ADMINISTRATION	6	6.0	6.0	6.0	-	-	-	6.0	0.0
901	COMM SVC	1	1.0	1.0	1.0	-	-	-	1.0	0.0
902	MED STAFF SVC	2.5	2.0	2.2	2.8	0.3	0.58	-	2.3	(0.2)
903	MHSC FOUNDATION	1.3	1.0	1.0	1.0	(0.3)	-	-	1.0	(0.3)
904	VOLUNTEER SRV	1	1.0	1.0	1.0	-	-	-	1.0	0.0
905	NURSING ADMIN	4.3	4.1	4.1	4.0	(0.3)	-	0.11	4.7	0.4
907	PHYSICIAN RECRUIT	1	1.0	1.0	1.0	-	-	-	1.0	0.0
910	INFORMATION SYSTEMS	8	8.0	8.0	8.0	-	-	-	7.9	(0.1)
920	HUMAN RESOURCES	4.6	4.4	4.3	4.4	(0.2)	0.04	-	4.4	(0.2)
930	FISCAL SERVICES	5	4.8	4.8	4.8	(0.2)	0.01	-	4.8	(0.2)
940	BUSINESS OFFICE	14	13.7	13.8	14.4	0.4	0.61	-	14.0	(0.0)
941	ADMITTING	13.4	14.4	14.6	16.2	2.8	1.63	-	14.4	1.0
942	COMMUNICATION	3	2.8	2.6	2.7	(0.3)	0.15	-	2.9	(0.1)
943	CENTRAL SCHEDULING	4	3.9	4.0	4.0	0.0	0.01	-	3.7	(0.3)

PPE	BUDGET	9/2/2018	9/16/2018	9/30/2018	Variance from Bud	LAST PAY PERIOD		YTD	from budget	
						Increase	Decrease			
948	NEW ORTHO	1	-	-	-	(1.0)	-	-	0.0	(1.0)
949	DENKER	3	3.0	3.0	3.0	(0.0)	-	0.05	3.3	0.3
950	OLIVER	3.1	2.2	3.0	3.1	(0.0)	0.07	-	2.8	(0.3)
952	NEW PULMONOLOGIST	2	-	-	-	(2.0)	-	-	0.0	(2.0)
953	STEWART	2.5	1.0	1.0	1.0	(1.5)	-	-	1.4	(1.1)
954	WHEELER	3	1.0	1.0	1.0	(2.0)	-	-	1.7	(1.3)
956	KATTAN	3.5	1.0	1.0	1.0	(2.5)	-	-	1.7	(1.8)
957	STARLA LETTE	2	1.0	1.0	1.0	(1.0)	-	-	1.3	(0.7)
958	VERONESE	0	-	-	-	-	-	-	0.3	0.3
959	GREWAL	3	1.0	1.0	1.0	(2.0)	-	-	1.6	(1.4)
960	SANDERS	2	1.0	1.0	1.0	(1.0)	-	-	1.5	(0.5)
961	DANSIE	2.5	1.0	1.0	1.0	(1.5)	-	-	1.5	(1.0)
962	BOWERS	2	0.5	0.7	0.6	(1.5)	-	0.13	1.2	(0.8)
963	LONG	3	1.0	0.9	0.9	(2.1)	-	-	1.3	(1.7)
964	JAKE JOHNSON	2	1.0	1.0	1.0	(1.0)	-	-	1.0	(1.0)
966	OCC MED	1	1.0	1.0	1.1	0.1	0.07	-	1.1	0.1
967	PA PALINEK	1.5	-	-	-	(1.5)	-	-	0.0	(1.5)
969	PAWAR	2	2.0	2.0	2.0	(0.0)	-	0.00	2.1	0.1
970	CROFTS	2.5	1.0	1.0	1.0	(1.5)	-	-	1.4	(1.1)
971	WAMSUTTER CLINIC	1	1.8	1.7	1.9	0.9	0.20	-	1.9	0.9
972	FARSON CLINIC	0	-	-	-	-	-	-	0.0	0.0
973	LAURIDSEN	1	0.9	0.8	0.9	(0.1)	0.10	-	0.9	(0.1)
974	SMG ADMIN/BILLING	13.5	34.5	32.8	36.9	23.4	4.11	-	27.1	13.6
976	LEHMAN	2	0.9	0.9	0.8	(1.2)	-	0.13	0.8	(1.2)
978	HOSPITALIST	4.2	4.2	4.2	4.2	-	-	-	4.2	0.0
980	JENSEN	1	1.0	1.0	1.0	-	-	-	0.6	(0.4)
981	CROFT	1	1.0	1.0	1.0	-	-	-	1.0	0.0
982	CHRISTENSEN	3	1.0	1.0	1.0	(2.0)	-	-	1.8	(1.2)
988	CURRY	2	1.0	1.0	1.0	(1.0)	-	-	1.9	(0.1)
990	NEW PEDIATRICIAN	0	-	-	-	-	-	-	0.0	0.0
991	JAMIAS	2	1.0	1.0	1.0	(1.0)	-	-	1.3	(0.7)
992	ASPER	1	1.0	1.0	1.0	-	-	-	1.3	0.3
993	LIU	2	1.0	1.0	1.0	(1.0)	-	-	1.1	(0.9)
994	DUCK	2	1.1	-	1.1	(0.9)	1.08	-	1.1	(0.9)
996	SARETTE	0.6	1.1	-	2.1	1.5	2.10	-	0.9	0.3
997	OUTSIDE SERVICES	0.5	-	-	-	(0.5)	-	-	0.0	(0.5)

TOTAL Paid FTEs	464.2	445.6	435.3	446.7	(17.5)	11.38	-	445.7	(18.5)
TOTAL WORKED FTEs	422.4	410.1	388.8	414.5	(7.9)	25.67	-	400.7	(21.7)

WORKED % Paid	91%	92%	89%	93%	2%	0.03	-	90%	(0.0)
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CONTRACT FTES (Inc above)	2.3	5.6	4.1	4.6	2.3	0.46	-	6.2	3.9
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GROSS EMPLOYEE PAYROLL	1,437,662	1,340,218	1,376,400	1,376,400	36,181.97	-	36,544,337
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Average Employee Hourly Rate	\$40.33	\$38.48	\$38.52	\$38.52	0.03	-	#DIV/0!	#DIV/0!
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Benchmark Paid FTEs	6.63	7.43	9.38	8.46	1.83	-	0.92	22.12	15.49
per Adj. Occupied Bed (APD)									

WORKED FTEs (Including Contract)

600	MEDICAL FLOOR	22.3	18.5	17.5	17.6	(4.7)	0.09	-	18.8	(3.5)
605	BEHAVIORAL HEALTH	6.6	7.1	2.8	5.5	(1.0)	2.70	-	7.6	1.1
610	OB FLOOR	4.8	6.4	6.7	6.1	1.2	-	0.66	5.8	0.9
611	NURSERY	6.6	5.4	6.7	5.6	(1.0)	-	1.12	5.5	(1.0)
612	LABOR & DELIVERY	4.5	2.6	3.0	2.5	(1.9)	-	0.51	2.7	(1.7)
615	OUTSIDE SERVICES	0.8	1.5	1.2	2.0	1.2	0.81	-	1.5	0.7
620	ICU	11.4	8.9	8.9	8.3	(3.0)	-	0.60	9.4	(1.9)
630	OR	11.0	12.8	11.4	12.9	1.9	1.52	-	12.4	1.4
631	SAME DAY SURGERY	6.2	5.4	5.1	5.7	(0.5)	0.62	-	5.1	(1.0)
633	RECOVERY	2.5	3.3	2.3	1.9	(0.7)	-	0.48	3.0	0.5
634	CENTRAL STERILE	2.7	1.2	2.7	2.5	(0.2)	-	0.17	2.3	(0.4)
640	DIALYSIS	6.4	7.6	7.2	7.7	1.3	0.50	-	6.6	0.3
650	ER	19.6	19.8	19.9	19.8	0.2	-	0.12	20.2	0.6
651	TRAUMA	1.2	1.8	1.7	1.9	0.7	0.24	-	1.6	0.5
652	SANE	0.8	1.1	0.8	1.1	0.3	0.38	-	1.0	0.2
660	RADIATION ONC	6.0	6.8	5.2	7.0	1.0	1.75	-	6.0	(0.0)
661	MEDICAL ONC	5.5	5.6	4.3	5.8	0.3	1.53	-	5.3	(0.2)
700	LABORATORY	28.3	26.3	26.3	25.7	(2.6)	-	0.58	26.4	(1.9)
701	HISTOLOGY	1.8	2.1	1.7	1.9	0.1	0.28	-	1.9	0.1
702	BLOOD BANK	0.9	1.0	0.9	1.2	0.3	0.32	-	1.1	0.2

	PPE BUDGET	9/2/2018	9/16/2018	9/30/2018	Variance from Bud	LAST PAY PERIOD		YTD	from budget
						Increase	Decrease		
710 RADIOLOGY	8.8	8.8	8.7	9.2	0.4	0.45	-	8.7	(0.1)
711 MAMMOGRPAHY	1.5	1.1	0.7	1.1	(0.4)	0.43	-	1.0	(0.4)
712 ULTRASOUND	3.0	3.6	4.1	3.5	0.6	-	0.57	3.8	0.8
713 NUC MED	1.5	1.0	0.9	1.0	(0.5)	0.03	-	1.1	(0.3)
714 CAT SCAN	4.3	4.1	4.1	4.2	(0.1)	0.11	-	4.1	(0.2)
715 MRI	1.2	1.1	0.8	1.2	0.1	0.41	-	1.0	(0.2)
716 PET SCAN	0.1	-	-	-	(0.1)	-	-	0.0	(0.1)
717 ECHOCARDIOGRAPHY	1.1	1.0	0.5	0.3	(0.8)	-	0.19	0.8	(0.4)
720 RESPIRATORY	5.5	7.1	6.9	6.4	0.9	-	0.47	6.6	1.1
721 SLEEP LAB	2.1	1.6	1.1	1.4	(0.7)	0.32	-	1.4	(0.7)
722 CARDIO	2.1	1.6	1.8	1.9	(0.2)	0.09	-	1.6	(0.5)
723 CARDIAC REHAB	2.2	2.2	1.8	2.1	(0.0)	0.35	-	2.1	(0.1)
730 PHYSICAL THERAPY	3.2	3.3	2.6	3.3	0.1	0.67	-	2.8	(0.4)
780 PATIENT ED	1.8	0.5	0.5	0.6	(1.3)	0.10	-	0.4	(1.4)
781 SOCIAL SERVICES	0.9	1.0	1.0	0.8	(0.2)	-	0.25	0.9	0.0
782 QUALITY & ACCREDIT	3.6	4.1	3.8	4.0	0.4	0.21	-	3.9	0.3
783 INFECTION CONTROL	1.8	2.7	1.6	1.7	(0.1)	0.17	-	1.7	(0.1)
784 COMPLIANCE	2.7	2.8	2.3	2.8	0.1	0.50	-	2.2	(0.5)
786 NURSING INFORMATICS	2.7	2.5	2.8	2.9	0.1	0.13	-	2.8	0.0
790 HEALTH INFORMATION	11.5	11.7	10.9	11.7	0.2	0.77	-	11.2	(0.3)
791 CASE MANAGEMENT	4.8	4.5	4.4	4.8	0.0	0.39	-	4.7	(0.1)
800 MAINTENANCE	10.6	11.4	10.1	10.9	0.2	0.81	-	10.1	(0.6)
801 HOUSEKEEPING	21.4	20.1	19.1	21.4	0.0	2.28	-	20.2	(1.2)
802 LAUNDRY	5.9	5.4	5.0	6.2	0.3	1.27	-	5.4	(0.6)
803 BIO MED	1.8	1.1	0.9	1.0	(0.8)	0.12	-	0.9	(0.9)
810 SECURITY	7.6	7.0	7.3	7.7	0.2	0.46	-	7.2	(0.4)
811 EMERGENCY MGMT	0.1	0.0	0.1	-	(0.1)	-	0.14	0.0	(0.1)
850 PURCHASING	4.6	4.3	4.6	4.3	(0.3)	-	0.30	0.0	(4.5)
855 CENTRAL SUPPLY	2.7	3.0	2.6	2.5	(0.2)	-	0.12	4.5	1.8
870 DIETARY	16.0	15.9	15.5	16.1	0.1	0.58	-	2.4	(13.6)
871 DIETICIANS	1.4	1.0	1.0	0.6	(0.8)	-	0.40	15.3	13.9
900 ADMINISTRATION	5.5	4.9	4.3	5.9	0.4	1.60	-	0.9	(4.6)
901 COMM SVC	0.9	0.9	0.8	1.0	0.1	0.20	-	5.2	4.3
902 MED STAFF SVC	2.3	1.9	1.6	2.3	0.1	0.73	-	0.9	(1.3)
903 MHSC FOUNDATION	1.2	1.0	0.8	1.0	(0.2)	0.20	-	1.9	0.8
904 VOLUNTEER SRV	0.9	1.0	1.0	0.5	(0.4)	-	0.50	1.0	0.1
905 NURSING ADMIN	3.9	3.8	3.8	3.3	(0.6)	-	0.56	0.8	(3.1)
907 PHYSICIAN RECRUIT	0.9	1.0	1.0	0.3	(0.6)	-	0.70	4.0	3.1
910 INFORMATION SYSTEMS	7.3	7.6	7.5	7.9	0.6	0.43	-	0.9	(6.4)
920 HUMAN RESOURCES	4.2	4.2	4.2	4.1	(0.1)	-	0.05	7.3	3.1
930 FISCAL SERVICES	4.6	4.1	4.3	4.1	(0.5)	-	0.26	4.2	(0.3)
940 BUSINESS OFFICE	12.7	12.5	12.2	13.5	0.8	1.28	-	4.1	(8.6)
941 ADMITTING	12.2	13.9	14.1	15.6	3.4	1.48	-	12.6	0.4
942 COMMUNICATION	2.7	2.8	1.9	2.6	(0.1)	0.76	-	13.8	11.1
943 CENTRAL SCHEDULING	3.6	3.8	3.5	3.7	0.1	0.17	-	2.6	(1.0)
948 NEW OTHO	0.9	-	-	-	(0.9)	-	-	3.3	2.3
949 DENKER	2.7	3.0	2.8	2.9	0.1	0.07	-	0.0	(2.7)
950 OLIVER	2.8	2.2	2.8	2.5	(0.3)	-	0.25	2.7	(0.1)
952 NEW PULMONOLOGIST	1.8	-	-	-	(1.8)	-	-	2.5	0.7
953 STEWART	2.3	1.0	0.8	0.9	(1.4)	0.10	-	0.0	(2.3)
954 WHEELER	2.7	1.0	1.0	0.5	(2.2)	-	0.50	1.3	(1.5)
956 KATTAN	3.2	0.9	1.0	1.0	(2.2)	-	-	1.4	(1.8)
957 STARLA LETTE	1.8	1.0	1.0	1.0	(0.8)	-	-	1.6	(0.2)
958 VERONESE	-	-	-	-	-	-	-	1.3	1.3
959 GREWAL	2.7	1.0	1.0	1.0	(1.7)	-	-	0.1	(2.6)
960 SANDERS	1.8	1.0	1.0	0.5	(1.3)	-	0.50	1.3	(0.5)
961 DANSIE	2.3	1.0	1.0	1.0	(1.3)	-	-	1.3	(1.0)
962 BOWERS	1.8	0.5	0.6	0.6	(1.3)	-	-	1.3	(0.5)
963 LONG	2.7	1.0	0.9	0.8	(1.9)	-	0.10	1.0	(1.8)
964 JAKE JOHNSON	1.8	1.0	1.0	1.0	(0.8)	-	-	1.2	(0.6)
966 OCC MED	0.9	1.0	0.9	1.1	0.2	0.15	-	1.0	0.1
967 PA PALINEK	1.4	-	-	-	(1.4)	-	-	1.0	(0.4)
969 PAWAR	1.8	1.5	1.9	2.0	0.2	0.06	-	0.0	(1.8)
970 CROFTS	2.3	0.9	1.0	0.9	(1.4)	-	0.10	1.8	(0.4)
971 WAMSUTTER CLINIC	0.9	1.8	1.7	1.9	1.0	0.22	-	1.2	0.3
972 FARSON CLINIC	-	-	-	-	-	-	-	1.8	1.8
973 LAURIDSEN	0.9	0.4	0.8	0.9	(0.0)	0.10	-	0.0	(0.9)
974 SMG ADMIN/BILLING	12.3	32.6	29.9	35.2	22.9	5.26	-	0.8	(11.5)
976 LEHMAN	1.8	0.4	0.7	0.7	(1.1)	0.03	-	24.7	22.9
978 HOSPITALIST	3.8	4.2	4.2	4.2	0.4	-	-	0.7	(3.2)
980 JENSEN	0.9	1.0	0.9	1.0	0.1	0.10	-	4.2	3.3
981 CROFT	0.9	1.0	1.0	1.0	0.1	-	-	0.6	(0.3)
982 CHRISTENSEN	2.7	1.0	1.0	1.0	(1.7)	-	-	0.8	(1.9)
988 CURRY	1.8	1.0	0.9	0.6	(1.2)	-	0.30	1.6	(0.2)
990 NEW PEDIATRICIAN	-	-	-	-	-	-	-	1.6	1.6
991 JAMIAS	1.8	1.0	1.0	1.0	(0.8)	-	-	0.0	(1.8)
992 ASPER	0.9	0.9	0.9	0.9	(0.0)	-	-	1.2	0.3
993 LIU	1.8	1.0	1.0	1.0	(0.8)	0.05	-	0.8	(1.0)
994 DUCK	1.8	1.1	1.4	1.1	(0.7)	-	0.29	1.0	(0.8)

	BUDGET	PPE	9/2/2018	9/16/2018	9/30/2018	Variance from Bud	LAST PAY PERIOD		YTD	from budget
							Increase	Decrease		
996 SARETTE	0.5	1.1	-	2.1	1.6	2.10	-	1.2	0.6	
997 OUTSIDE CLINICS	0.5	-	-	-	(0.5)	-	-	0.9	0.4	
TOTAL WORKED FTES	422.4	410.1	388.8	414.5	(7.90)	25.67	-	400.7	(21.7)	
CONTRCT FTES (Inc above)	2.3	5.6	4.1	4.6	2.28	0.46	-	6.2	3.9	

OVERTIME HOURS

	PPE	9/2/2018	9/16/2018	9/30/2018	Variance from Bud	LAST PAY PERIOD		YTD	from budget
						Increase	Decrease		
600 MEDICAL FLOOR		8.3	10.0	2.0	37.88	-	8.00	20.3	
605 BEHAVIORAL HEALTH		24.8	-	36.0	847.92	36.00	-	365.5	
610 OB FLOOR		2.5	-	2.8	67.02	2.75	-	31.0	
611 NURSERY		-	8.3	-	-	-	8.25	9.0	
612 LABOR & DELIVERY		-	-	-	-	-	-	-	
615 OUTSIDE SERVICES		-	-	-	-	-	-	-	
620 ICU		-	1.8	-	-	-	1.75	2.3	
630 OR		18.3	20.5	7.0	297.57	-	13.50	95.0	
631 SAME DAY SURGERY		8.8	5.3	1.8	72.19	-	3.50	45.3	
633 RECOVERY		0.5	-	-	-	-	-	6.5	
634 CENTRAL STERILE		1.0	13.0	0.8	17.07	-	12.25	24.8	
640 DIALYSIS		7.8	8.8	34.3	1,607.57	25.50	-	112.3	
650 ER		14.8	23.0	36.0	1,238.35	13.00	-	144.3	
651 TRAUMA		9.5	-	-	-	-	-	22.3	
652 SANE		0.5	1.8	5.0	268.80	3.25	-	12.8	
660 RADIATION ONC		0.5	-	0.8	62.66	0.75	-	5.0	
661 MEDICAL ONC		-	-	1.0	32.93	1.00	-	8.5	
700 LABORATORY		6.0	26.5	14.3	533.60	-	12.25	170.0	
701 HISTOLOGY		5.5	3.5	3.0	87.00	-	0.50	20.8	
702 BLOOD BANK		0.3	-	0.5	21.72	0.50	-	5.3	
710 RADIOLOGY		1.0	5.3	3.5	153.52	-	1.75	26.5	
711 MAMMOGRPAHY		-	1.3	-	-	-	1.25	1.3	
712 ULTRASOUND		1.8	3.5	8.0	560.39	4.50	-	28.8	
713 NUC MED		0.3	2.5	-	-	-	2.50	6.5	
714 CAT SCAN		-	-	0.3	8.51	0.25	-	1.8	
715 MRI		-	-	3.3	129.22	3.25	-	5.0	
716 PET SCAN		-	-	-	-	-	-	-	
717 ECHOCARDIOGRAPHY		0.3	-	5.0	374.10	5.00	-	6.3	
720 RESPIRATORY		-	3.3	-	-	-	3.25	12.0	
721 SLEEP LAB		4.3	-	9.5	451.44	9.50	-	31.8	
722 CARDIO		-	-	0.3	6.14	0.25	-	0.3	
723 CARDIAC REHAB		-	-	-	-	-	-	-	
730 PHYSICAL THERAPY		-	-	-	-	-	-	-	
780 PATIENT ED		-	-	-	-	-	-	-	
781 SOCIAL SERVICES		-	-	-	-	-	-	-	
782 QUALITY & ACCREDIT		-	-	0.3	10.76	0.25	-	0.3	
783 INFECTION CONTROL		22.8	-	2.5	127.48	2.50	-	30.5	
784 COMPLIANCE		-	-	3.0	104.31	3.00	-	3.0	
786 NURSING INFORMATICS		-	-	-	-	-	-	-	
790 HEALTH INFORMATION		-	-	-	-	-	-	0.3	
791 CASE MANAGEMENT		12.3	1.3	5.5	310.63	4.25	-	62.3	
800 MAINTENANCE		0.3	0.8	24.8	672.96	24.00	-	32.8	
801 HOUSEKEEPING		36.3	16.8	10.8	221.26	-	6.00	262.3	
802 LAUNDRY		20.3	2.5	12.3	207.43	9.75	-	160.0	
803 BIO MED		2.8	1.3	0.3	15.26	-	1.00	4.3	
810 SECURITY		4.8	3.8	11.5	342.68	7.75	-	59.0	
811 EMERGENCY MGMT		-	-	-	-	-	-	-	
850 PURCHASING		-	8.0	-	-	-	8.00	10.8	
855 CENTRAL SUPPLY		-	0.3	-	-	-	0.25	0.3	
870 DIETARY		3.8	26.8	10.8	238.74	-	16.00	174.5	
871 DIETICIANS		-	-	-	-	-	-	-	
900 ADMINISTRATION		-	-	-	-	-	-	-	
901 COMM SVC		-	-	-	-	-	-	-	
902 MED STAFF SVC		-	-	-	-	-	-	0.3	
903 MHSC FOUNDATION		-	-	-	-	-	-	-	
904 VOLUNTEER SRV		-	-	-	-	-	-	-	
905 NURSING ADMIN		4.0	4.0	13.0	923.91	9.00	-	92.0	
907 PHYSICIAN RECRUIT		-	-	-	-	-	-	-	
910 INFORMATION SYSTEMS		-	-	-	-	-	-	-	
920 HUMAN RESOURCES		-	-	-	-	-	-	-	
930 FISCAL SERVICES		0.3	-	0.3	7.20	0.25	-	1.0	
940 BUSINESS OFFICE		6.5	10.3	41.0	1,137.99	30.75	-	154.3	
941 ADMITTING		141.5	149.5	204.5	5,085.43	55.00	-	969.5	
942 COMMUNICATION		11.5	14.8	15.8	381.13	1.00	-	97.0	
943 CENTRAL SCHEDULING		-	0.5	0.5	15.53	-	-	3.3	
948 NEW ORTHO		-	-	-	-	-	-	-	
949 DENKER		1.3	1.0	-	-	-	1.00	4.1	
950 OLIVER		0.3	1.0	10.0	400.60	9.00	-	17.6	
952 NEW PULMONOLOGIST		-	-	-	-	-	-	-	

BUDGET	PPE	9/2/2018	9/16/2018	9/30/2018	Variance from Bud	LAST PAY PERIOD		YTD	from budget
						Increase	Decrease		
953	STEWART	-	-	-	-	-	-	14.5	
954	WHEELER	-	-	-	-	-	-	4.3	
956	KATTAN	-	-	-	-	-	-	1.8	
957	STARLA LETTE	-	-	-	-	-	-	-	
958	VERONESE	-	-	-	-	-	-	-	
959	GREWAL	-	-	-	-	-	-	5.5	
960	SANDERS	-	-	-	-	-	-	26.5	
961	DANSIE	-	-	-	-	-	-	5.9	
962	BOWERS	-	-	-	-	-	-	-	
963	LONG	-	-	-	-	-	-	3.8	
964	JAKE JOHNSON	-	-	-	-	-	-	-	
966	OCC MED	2.5	4.3	5.8	295.38	1.50	-	63.5	
967	PA PALINEK	-	-	-	-	-	-	-	
969	PAWAR	-	0.3	-	-	-	0.25	2.5	
970	CROFTS	-	-	-	-	-	-	-	
971	WAMSUTTER CLINIC	3.0	4.8	4.3	96.39	-	0.50	26.8	
972	FARSON CLINIC	-	-	-	-	-	-	-	
973	LAURIDSEN	-	-	-	-	-	-	-	
974	SMG ADMIN/BILLING	51.0	27.8	53.3	1,824.74	25.50	-	233.5	
976	PA LEHMAN	-	-	-	-	-	-	2.4	
978	HOSPITALIST	-	-	-	-	-	-	-	
980	JENSEN	-	-	-	-	-	-	-	
981	CROFT	-	-	-	-	-	-	-	
982	CHRISTENSEN	-	-	-	-	-	-	10.4	
988	CURRY	-	-	-	-	-	-	8.4	
990	NEW PEDIATRICIAN	-	-	-	-	-	-	-	
991	JAMIAS	-	-	-	-	-	-	-	
992	ASPER	-	-	-	-	-	-	-	
993	LIU	-	-	-	-	-	-	1.0	
994	DUCK	-	-	-	-	-	-	1.0	
996	SARETTE	-	-	-	-	-	-	-	
997	OUTSIDE CLINICS	-	-	-	-	-	-	-	

TOTAL OT HOURS	441.0	417.3	604.5	19,295	187.25	-	3,771.0
TOTAL OT FTEs	5.5	5.2	7.6		2.34	-	6.7
OT % WORKED HOURS	1.4%	1.4%	1.8%		0.00	0.0%	

CONTRACT HOURS	BUDGET	PPE	9/2/2018	9/16/2018	9/30/2018	Current FTE	CHANGE FROM LAST PAY PERIOD		FTE YTD	Variance from budget
							Increase	Decrease		
600	MEDICAL FLOOR		-	-	-	-	-	-	-	-
605	BEHAVIORAL HEALTH		127.3	29.3	126.8	1.6	97.50	-	1.85	1.85
610	OB FLOOR	0.5	-	-	-	-	-	-	-	(0.50)
611	NURSERY		-	-	-	-	-	-	-	-
612	LABOR & DELIVERY		-	-	-	-	-	-	-	-
615	OUTSIDE SERVICES		-	-	-	-	-	-	-	-
620	ICU		-	24.0	-	-	-	24.00	0.09	0.09
630	OR	1.0	167.2	171.6	239.6	3.0	68.00	-	2.07	1.07
631	SAME DAY SURGERY		-	-	-	-	-	-	-	-
633	RECOVERY		-	-	-	-	-	-	-	-
634	CENTRAL STERILE		-	-	-	-	-	-	-	-
640	DIALYSIS		-	-	-	-	-	-	-	-
650	ER	0.3	-	-	-	-	-	-	0.51	0.21
651	TRAUMA		-	-	-	-	-	-	-	-
652	SANE		-	-	-	-	-	-	-	-
660	RADIATION ONC		-	-	-	-	-	-	-	-
661	MEDICAL ONC		-	-	-	-	-	-	-	-
700	LABORATORY		-	-	-	-	-	-	-	-
701	HISTOLOGY		-	-	-	-	-	-	0.20	0.20
702	BLOOD BANK		-	-	-	-	-	-	-	-
710	RADIOLOGY		-	-	-	-	-	-	-	-
711	MAMMOGRAPY		-	-	-	-	-	-	-	-
712	ULTRASOUND	0.5	79.0	68.8	-	-	-	68.75	0.77	0.27
713	NUC MED		-	-	-	-	-	-	-	-
714	CAT SCAN		-	-	-	-	-	-	-	-
715	MRI		-	-	-	-	-	-	-	-
716	PET SCAN		-	-	-	-	-	-	-	-
717	ECHOCARDIOGRAPHY		-	-	-	-	-	-	-	-
720	RESPIRATORY	-	71.8	36.0	-	-	-	36.00	0.72	0.72
721	SLEEP LAB		-	-	-	-	-	-	-	-
722	CARDIO		-	-	-	-	-	-	-	-
723	CARDIAC REHAB		-	-	-	-	-	-	-	-
730	PHYSICAL THERAPY		-	-	-	-	-	-	-	-
780	PATIENT ED		-	-	-	-	-	-	-	-
781	SOCIAL SERVICES		-	-	-	-	-	-	-	-
782	QUALITY & ACCREDIT		-	-	-	-	-	-	-	-
783	INFECTION CONTROL		-	-	-	-	-	-	-	-
784	ACCREDITATION		-	-	-	-	-	-	-	-

BUDGET	PPE	9/2/2018	9/16/2018	9/30/2018	Variance from Bud	LAST PAY PERIOD		YTD	from budget
						Increase	Decrease		
786	NURSING INFORMATICS	-	-	-	-	-	-	-	-
790	HEALTH INFORMATION	-	-	-	-	-	-	-	-
791	CASE MANAGEMENT	-	-	-	-	-	-	-	-
800	MAINTENANCE	-	-	-	-	-	-	-	-
801	HOUSEKEEPING	-	-	-	-	-	-	-	-
802	LAUNDRY	-	-	-	-	-	-	-	-
803	BIO MED	-	-	-	-	-	-	-	-
810	SECURITY	-	-	-	-	-	-	-	-
811	EMERGENCY MGMT	-	-	-	-	-	-	-	-
850	PURCHASING	-	-	-	-	-	-	-	-
855	CENTRAL SUPPLY	-	-	-	-	-	-	-	-
870	DIETARY	-	-	-	-	-	-	-	-
871	DIETICIANS	-	-	-	-	-	-	-	-
900	ADMINISTRATION	-	-	-	-	-	-	-	-
901	COMM SVC	-	-	-	-	-	-	-	-
902	MED STAFF SVC	-	-	-	-	-	-	-	-
903	MHSC FOUNDATION	-	-	-	-	-	-	-	-
904	VOLUNTEER SRV	-	-	-	-	-	-	-	-
905	NURSING ADMIN	-	-	-	-	-	-	-	-
907	PHYSICIAN RECRUIT	-	-	-	-	-	-	-	-
910	INFORMATION SYSTEMS	-	-	-	-	-	-	-	-
920	HUMAN RESOURCES	-	-	-	-	-	-	-	-
930	FISCAL SERVICES	-	-	-	-	-	-	-	-
940	BUSINESS OFFICE	-	-	-	-	-	-	-	-
941	ADMITTING	-	-	-	-	-	-	-	-
942	COMMUNICATION	-	-	-	-	-	-	-	-
943	CENTRAL SCHEDULING	-	-	-	-	-	-	-	-
948	NEW ORTHO	-	-	-	-	-	-	-	-
949	DENKER	-	-	-	-	-	-	-	-
950	OLIVER	-	-	-	-	-	-	-	-
952	NEW PULMONOLOGIST	-	-	-	-	-	-	-	-
953	STEWART	-	-	-	-	-	-	-	-
954	WHEELER	-	-	-	-	-	-	-	-
956	KATTAN	-	-	-	-	-	-	-	-
957	STARLA LETTE	-	-	-	-	-	-	-	-
958	VERONESE	-	-	-	-	-	-	-	-
959	GREWAL	-	-	-	-	-	-	-	-
960	SANDERS PA	-	-	-	-	-	-	-	-
961	DANSIE	-	-	-	-	-	-	-	-
962	BOWERS	-	-	-	-	-	-	-	-
963	LONG	-	-	-	-	-	-	-	-
964	JAKE JOHNSON	-	-	-	-	-	-	-	-
966	OCC MED	-	-	-	-	-	-	-	-
967	PA PALINEK	-	-	-	-	-	-	-	-
969	PAWAR	-	-	-	-	-	-	-	-
970	CROFTS	-	-	-	-	-	-	-	-
971	WAMSUTTER CLINIC	-	-	-	-	-	-	-	-
972	FARSON CLINIC	-	-	-	-	-	-	-	-
973	LAURIDSEN	-	-	-	-	-	-	-	-
974	SMG ADMIN/BILLING	-	-	-	-	-	-	-	-
978	HOSPITALIST	-	-	-	-	-	-	-	-
980	JENSEN	-	-	-	-	-	-	-	-
981	CROFT	-	-	-	-	-	-	-	-
982	CHRISTENSEN	-	-	-	-	-	-	-	-
988	CURRY	-	-	-	-	-	-	-	-
990	NEW PEDIATRICIAN	-	-	-	-	-	-	-	-
991	JAMIAS	-	-	-	-	-	-	-	-
992	ASPER	-	-	-	-	-	-	-	-
993	LIU	-	-	-	-	-	-	-	-
994	DUCK	-	-	-	-	-	-	-	-
996	SARETTE	-	-	-	-	-	-	-	-
997	OUTSIDE CLINICS	-	-	-	-	-	-	-	-

TOTAL CONTRACT HOURS		445.2	329.6	366.3		36.8	-		
TOTAL CONTRACT FTEs	2.3	5.6	4.1	4.6	2.3	0.5	-	6.2	3.9
CONTRACT % WORKED HOURS		1.4%	1.1%	1.1%		0.0%	0.0%		

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

Three months ending September 30, 2018

PAYOR MIX DATA

HOSPITAL	CURRENT	YEAR TO DATE	PRIOR YEAR
Commercial/Work Comp	16.98%	17.18%	18.37%
Blue Cross	22.43%	21.17%	23.66%
Medicaid	9.79%	8.16%	9.99%
Medicare	39.49%	41.50%	36.77%
Self Pay	8.42%	9.42%	9.42%
Other	2.89%	2.58%	1.79%
TOTAL	100%	100%	100%

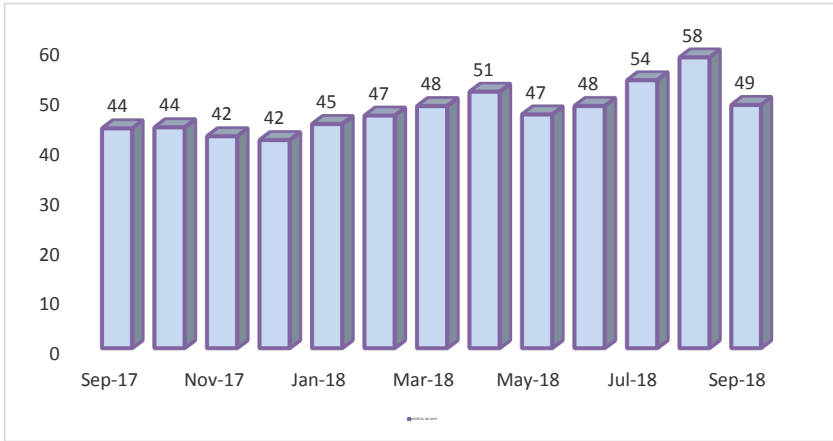
CLINIC	CURRENT	YEAR TO DATE	PRIOR YEAR
Commercial/Work Comp	26.20%	26.46%	28.94%
Blue Cross	27.34%	28.64%	30.49%
Medicaid	12.53%	12.95%	14.70%
Medicare	27.71%	25.82%	19.07%
Self Pay	5.36%	5.51%	6.18%
Other	0.85%	0.62%	0.62%
TOTAL	100%	100%	100%

ORTHO CLINIC	CURRENT	YEAR TO DATE	PRIOR YEAR
Commercial/Work Comp	42.04%	32.08%	39.50%
Blue Cross	30.98%	22.41%	27.91%
Medicaid	3.09%	4.40%	6.32%
Medicare	19.17%	37.07%	23.02%
Self Pay	4.23%	3.77%	2.71%
Other	0.48%	0.27%	0.54%
TOTAL	100%	100%	100%

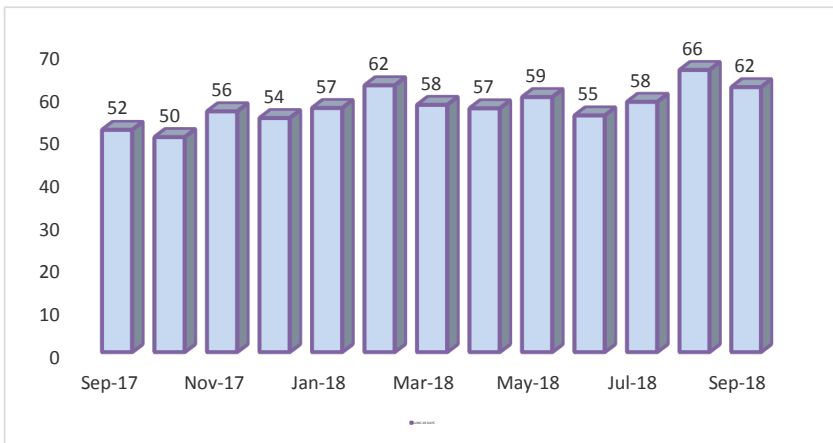
COMBINED	CURRENT	YEAR TO DATE	PRIOR YEAR
Commercial/Work Comp	18.16%	18.23%	19.86%
Blue Cross	23.00%	21.85%	24.39%
Medicaid	9.97%	8.52%	10.34%
Medicare	38.12%	40.04%	34.80%
Self Pay	8.08%	8.98%	8.96%
Other	2.66%	2.37%	1.65%
TOTAL	100%	100%	100%

**MEMORIAL HOSPITAL OF SWEETWATER COUNTY
DAYS IN A/R
09/30/18**

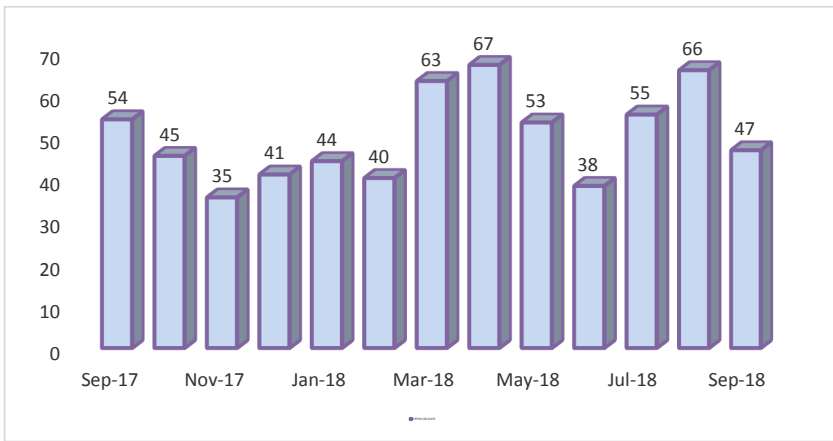
	HOSPITAL AR DAYS
Sep-17	44
Oct-17	44
Nov-17	42
Dec-17	42
Jan-18	45
Feb-18	47
Mar-18	48
Apr-18	51
May-18	47
Jun-18	48
Jul-18	54
Aug-18	58
Sep-18	49



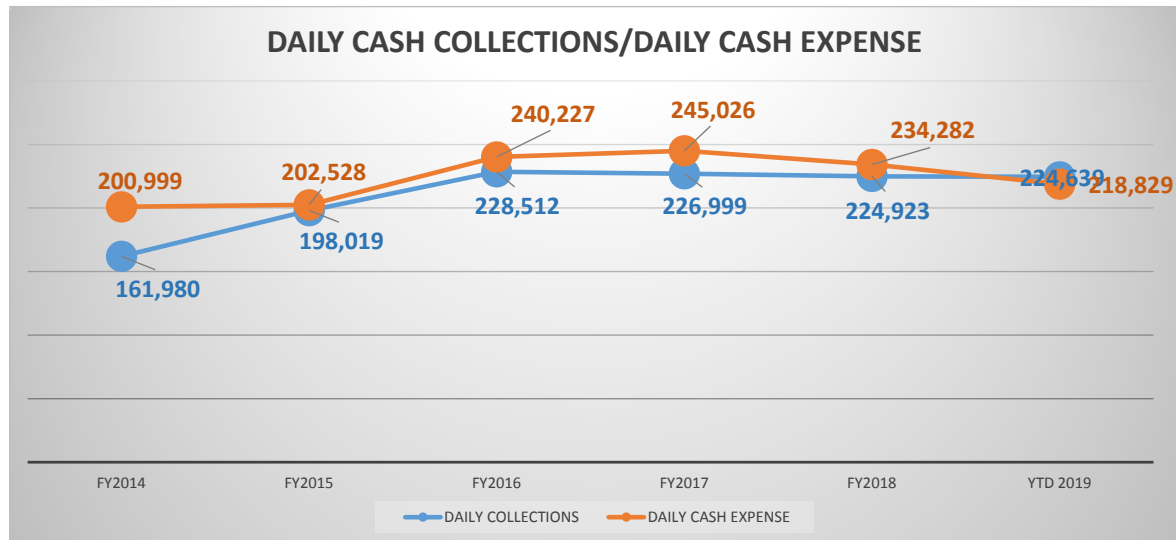
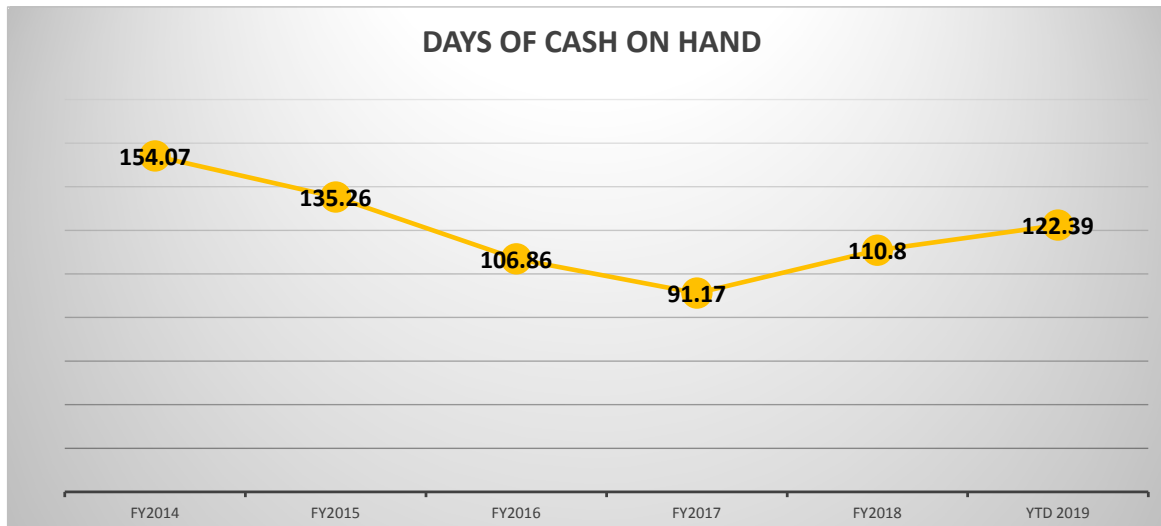
	CLINIC AR DAYS
Sep-17	52
Oct-17	50
Nov-17	56
Dec-17	54
Jan-18	57
Feb-18	62
Mar-18	58
Apr-18	57
May-18	59
Jun-18	55
Jul-18	58
Aug-18	66
Sep-18	62



	ORTHO AR DAYS
Sep-17	54
Oct-17	45
Nov-17	35
Dec-17	41
Jan-18	44
Feb-18	40
Mar-18	63
Apr-18	67
May-18	53
Jun-18	38
Jul-18	55
Aug-18	66
Sep-18	47



MEMORIAL HOSPITAL OF SWEETWATER COUNTY
 Days of Cash on Hand
 9/30/2018



**Memorial Hospital of Sweetwater County
Legal Fees By Fiscal Year**

FY 2019

DRAY, DYEKMAN, REED & HEALEY PC	\$2,117.50
SETTLEMENTS	\$30,000.00
PHILLIPS LAW, LLC	\$29,197.12
Total FYTD 2019	\$61,314.62

**MEMORIAL HOSPITAL OF SWEETWATER COUNTY
CASH DISBURSEMENT SUMMARY FOR SEPTEMBER 2018**

PAYMENT SOURCE	NO. OF DISBURSEMENTS	AMOUNT
OPERATIONS (GENERAL FUND/KEYBANK)	630	5,728,340.38
CAPITAL EQUIPMENT (PLANT FUND)	3	24,951.11
CONSTRUCTION IN PROGRESS (BUILDING FUND)	2	110,387.98
PAYROLL September 2, 2018	N/A	1,398,544.77
PAYROLL September 16, 2018	N/A	1,300,594.35
TOTAL CASH OUTFLOW		\$5,863,679.47
CASH COLLECTIONS		\$7,609,891.00
INCREASE/DECREASE IN CASH		\$ 1,746,211.53

**PLANT FUND CASH DISBURSEMENTS
FISCAL YEAR 2019**

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
002181	7/19/2018	CHEETAH MEDICAL, INC	18,675.00	CARDIAC MONITORING SYS		
002182	7/19/2018	HITACHI HEALTHCARE AMERICAS COF	30,574.00	MERGE UNITY		
002183	7/19/2018	LOOKING GLASS SYSTEMS, LLC	29,375.00	ARIA-LOOKING GLASS SOFTWARE		
002184	7/19/2018	WAXIE SANITARY SUPPLY	7,023.40	FLOOR SCRUBBER		
002185	7/25/2018	MARK COSTELLO COMPANY	8,985.00	AUTOCLAVE CARTS		
002186	7/25/2018	SIEMENS MEDICAL SOLUTIONS USA	8,618.80	CT SCANNER		
002187	7/25/2018	MERGE HEALTHCARE SOLUTIONS, INC	21,772.83	RADIFORCE COLOR MONITORS		
002187	7/25/2018	MERGE HEALTHCARE SOLUTIONS, INC	8,931.26	MERGE UNITY		
JULY TOTALS					133,955.29	133,955.29

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
002188	8/1/2018	ACCURATE ENTERPRISED	12,020.50	SPRINKLER SYSTEM/COLLEGE DRIVE		
AUGUST TOTALS					12,020.50	145,975.79

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
002191	9/27/2018	CODALE ELECTRIC SUPPLY, INC	3,887.50	PARKING LOT LIGHTS		
002189	9/6/2018	CDW GOVERNMENT LLC	9,043.11	ARIA		
002190	9/27/2018	ACCURATE ENTERPRISES(ANNA M RA)	12,020.50	SPRINKLER SYSTEM/COLLEGE DRIVE		
SEPTEMBER TOTALS					24,951.11	170,926.90

**CONSTRUCTION IN PROGRESS (BUILDING FUND) CASH DISBURSEMENTS
FISCAL YEAR 2019**

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
000999	7/19/2018	INSULATION INC.	1,115.48	ASBESTOS SURBEY - MOB		
001000	7/19/2018	PLAN ONE/ARCHITECTS	1,743.00	MHSC DUCT RENOVATION		
W/T	7/17/2018	WF DEBT SERVICES	110,584.76	WF DEBT SERVICES		
JULY TOTALS					113,443.24	113,443.24

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
001001	8/9/2018	PLAN ONE/ARCHITECTS	622.50	MHSC DUCT RENOVATION		
W/T	8/15/2018	WF DEBT SERVICES	110,584.76	WF DEBT SERVICES		
AUGUST TOTALS					111,207.26	224,650.50

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
001002	9/6/2018	PLAN ONE/ARCHITECTS	622.50	MHSC DUCT RENOVATION		
W/T	9/14/2018	WF DEBT SERVICES	109,765.48	WF DEBT SERVICES		
SEPTEMBER TOTALS					110,387.98	335,038.48

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
GENERAL FUND DISBURSEMENTS
09/30/18

Amount	Description
246,172.94	ABG Retirement Total
21,739.37	Advertising Total
398.49	Billing Services Total
8,696.49	Blood Bank Services Total
30,150.00	Building Lease Total
42,710.46	Collection Agency Total
29,076.54	Computer Equipment Total
84,038.66	Contract Maintenance Total
121,358.38	Contract Personnel Total
589.32	Courier Services Total
29,871.10	Dental Insurance Total
5,258.31	Dialysis Supplies Total
8,165.30	Education & Travel Total
2,838.81	Employee Recruitment Total
6,113.14	Employee Vision Total
58,470.44	Equipment Lease Total
34,163.63	Food Total
9,183.86	Freight Total
834.37	Fuel Total
2,022.88	Garbage Collection Total
333,316.54	Group Health Total
209,389.83	Hospital Supplies Total
40,732.89	Insurance Premium Total
272.57	Insurance Refund Total
10.00	Internet Services Total
48,712.72	Laboratory Services Total
112,691.56	Laboratory Supplies Total
7,546.97	Life Insurance Total
76,911.13	Locum Tenens Total
13,341.21	Maintenance & Repair Total
16,756.59	Maintenance Supplies Total
403.67	Marketing & Promotional Supplies Total
7,541.00	Memberships Total
1,785.04	MHSC Foundation Total
396.00	Minor Equipment Total
9,566.02	Non Medical Supplies Total
4,715.04	Office Supplies Total
2,266.50	Other Employee Benefits Total
876.00	Other Purchased Services Total
1,335.89	Oxygen Rental Total
6,968.12	Patient Refund Total
422.09	Payroll Deduction Total
4,755.23	Payroll Garnishment Total
2,752,801.33	Payroll Transfer Total
25.25	Petty Cash Total
868,474.01	Pharmacy Management Total
192.10	Physician Recruitment Total

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
GENERAL FUND DISBURSEMENTS
09/30/18

5,866.82	Physician Recruitment Total
164,011.38	Physician Services Total
54,864.81	Physician Student Loan Total
5,000.00	Postage Total
27,056.36	Professional Service Total
15.75	Radiation Monitoring Total
384.27	Radiology Film Total
22,974.27	Radiology Material Total
13.53	Reimbursement - Badge Balance Total
7,160.77	Reimbursement - CME Total
10,792.98	Reimbursement - Education & Travel Total
1,021.30	Reimbursement - Food Total
69.92	Reimbursement - Office Supplies Total
67.69	Reimbursement - Supplies Total
194.00	Reimbursement - Uniforms Total
10,000.00	Settlement Total
3,000.00	Sponsorship Total
2,321.08	Surgery Equipment Total
27,179.09	Surgery Supplies Total
11,959.00	Surveys Total
2,119.42	Transcription Services Total
508.65	Uniforms Total
89,629.50	Utilities Total
14,918.00	Virtual Library Total
3,154.00	Window Cleaning Total
5,728,340.38	Grand Total

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
GENERAL FUND DISBURSEMENTS
09/30/18

Check Number	Date	Vendor Check Name	Amount	Description
W/T	9/4/2018	ABG 8/19/18	121,007.64	ABG Retirement
W/T	9/18/2018	ABG 9/02/18	125,165.30	ABG Retirement
158214	9/19/2018	SWEETWATER NOW, LLC	1,408.00	Advertising
158218	9/19/2018	TOPP PUBLISHING LLC	560.00	Advertising
158196	9/19/2018	PUBLISHING CONCEPTS, INC.	975.00	Advertising
158221	9/19/2018	UINTA COUNTY HERALD	1,370.00	Advertising
EFT000000004094	9/6/2018	ADBAY.COM	2,635.00	Advertising
EFT000000004108	9/6/2018	LAMAR ADVERTISING	380.00	Advertising
EFT000000004113	9/6/2018	ROCKET MINER	46.37	Advertising
EFT000000004118	9/13/2018	IN10SITY INTERACTIVE, LLC	1,710.00	Advertising
EFT000000004121	9/13/2018	ROCK SPRINGS SWEETWATER COUNTY AIRPORT	280.00	Advertising
EFT000000004134	9/19/2018	GREEN RIVER STAR	1,175.00	Advertising
EFT000000004149	9/27/2018	ADBAY.COM	10,000.00	Advertising
EFT000000004160	9/27/2018	LAMAR ADVERTISING	1,200.00	Advertising
158143	9/19/2018	EXPRESS MEDICAID BILLING SERV	286.89	Billing Services
158219	9/19/2018	TRUE COMMERCE, INC	111.60	Billing Services
158222	9/19/2018	UNITED BLOOD SERVICES	8,696.49	Blood Bank Services
158242	9/21/2018	BIG SANDY CLINIC	2,200.00	Building Lease
158238	9/21/2018	CURRENT PROPERTIES, LLC	3,500.00	Building Lease
158245	9/21/2018	HILLTOP PROPERTIES, LLC	24,450.00	Building Lease
158085	9/13/2018	ROCKY MOUNTAIN SERVICE BUREAU	42,710.46	Collection Agency
157952	9/6/2018	CDW GOVERNMENT LLC	179.10	Computer Equipment
158129	9/19/2018	CDW GOVERNMENT LLC	27,218.56	Computer Equipment
158264	9/26/2018	CDW GOVERNMENT LLC	1,095.50	Computer Equipment
158276	9/26/2018	DELL COMPUTER CORPORATION	583.38	Computer Equipment
157937	9/6/2018	API SYSTEMS INTEGRATORS	282.00	Contract Maintenance
158004	9/6/2018	PHILIPS HEALTHCARE	15,600.00	Contract Maintenance
158031	9/6/2018	WASATCH CONTROLS	1,400.00	Contract Maintenance
158018	9/6/2018	SUPERO HEALTHCARE SOLUTIONS	3,750.00	Contract Maintenance
158091	9/13/2018	THOMSON REUTERS	722.40	Contract Maintenance
158268	9/26/2018	COLORADO DOCUMENT SECURITY	2,221.00	Contract Maintenance
158277	9/26/2018	DELL FINANCIAL SERVICES	3,811.48	Contract Maintenance
158153	9/19/2018	HEALTHCARE SOLUTIONS OF NC	1,024.00	Contract Maintenance
158299	9/26/2018	KRONOS INCORPORATED	2,400.00	Contract Maintenance
158314	9/26/2018	PHILIPS HEALTHCARE	3,997.00	Contract Maintenance
158195	9/19/2018	PROVIDER ADVANTAGE NW INC	1,140.00	Contract Maintenance
158197	9/19/2018	QUALITY SYSTEMS, INC	1,174.00	Contract Maintenance
158323	9/26/2018	SIEMENS MEDICAL SOLUTIONS USA	8,973.00	Contract Maintenance
158325	9/26/2018	SOUTHWESTERN BIOMEDICAL ELECT.	1,320.00	Contract Maintenance
158281	9/26/2018	DEXPRO DYNAMICS LLC	243.75	Contract Maintenance
158283	9/26/2018	DYNAMIC COMMUNITIES, INC	800.00	Contract Maintenance
158146	9/19/2018	FLEXENTIAL CORP.	8,637.24	Contract Maintenance

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

GENERAL FUND DISBURSEMENTS

09/30/18

158180	9/19/2018	MHSC MEDICAL STAFF	50.00	Contract Maintenance
158464	9/26/2018	QUADRAMED	877.50	Contract Maintenance
EFT000000004117	9/6/2018	STATE FIRE DC SPECIALTIES	458.00	Contract Maintenance
EFT000000004120	9/13/2018	LAGOON CORPORATION	2,241.17	Contract Maintenance
EFT000000004126	9/19/2018	ARRENDALE ASSOCIATES, INC	1,200.00	Contract Maintenance
EFT000000004143	9/19/2018	SOLARWINDS, INC	6,863.00	Contract Maintenance
W/T	9/5/2018	APEX EDI	67.00	Contract Maintenance
W/T	9/7/2018	SOLUTION REACH	339.00	Contract Maintenance
W/T	9/7/2018	SOLUTION REACH	339.00	Contract Maintenance
W/T	9/7/2018	SOLUTION REACH	339.00	Contract Maintenance
W/T	9/7/2018	SOLUTION REACH	339.00	Contract Maintenance
W/T	9/7/2018	SOLUTION REACH	339.00	Contract Maintenance
W/T	9/10/2018	SIEMENS EDI	9,017.12	Contract Maintenance
W/T	9/20/2018	GATEWAY EDI	3,725.00	Contract Maintenance
W/T	9/21/2018	CARE CLOUD	349.00	Contract Maintenance
157999	9/6/2018	NURSE ASSIST INC	660.00	Contract Personnel
158078	9/13/2018	FOCUSONE SOLUTIONS LLC	58,647.94	Contract Personnel
158142	9/19/2018	ELWOOD STAFFING SERVICES, INC	8,407.35	Contract Personnel
158284	9/26/2018	ELWOOD STAFFING SERVICES, INC	870.70	Contract Personnel
158147	9/19/2018	FOCUSONE SOLUTIONS LLC	35,573.33	Contract Personnel
158288	9/26/2018	FOCUSONE SOLUTIONS LLC	14,224.06	Contract Personnel
158156	9/19/2018	HOMEWOOD SUITES	1,666.00	Contract Personnel
158294	9/26/2018	HOMEWOOD SUITES	1,309.00	Contract Personnel
158020	9/6/2018	SUSAN K CROFUTT	589.32	Courier Services
158139	9/19/2018	DELTA DENTAL	1,489.60	Dental Insurance
158278	9/26/2018	DELTA DENTAL	28,381.50	Dental Insurance
157973	9/6/2018	HENRY SCHEIN INC	52.99	Dialysis Supplies
158148	9/19/2018	FRESENIUS USA MANUFACTURING	4,553.61	Dialysis Supplies
158154	9/19/2018	HENRY SCHEIN INC	526.76	Dialysis Supplies
158293	9/26/2018	HENRY SCHEIN INC	124.95	Dialysis Supplies
158094	9/13/2018	JUHC - CLINICAL STAFF EDUCATION	600.00	Education & Travel
158074	9/13/2018	AMERICAN MEDICAL ASSOCIATION	3,408.50	Education & Travel
158185	9/19/2018	MY EDUCATIONAL RESOURCES	32.00	Education & Travel
158231	9/19/2018	WYOMING HOSPITAL ASSOCIATION	275.00	Education & Travel
157972	9/6/2018	HCPRO	1,994.00	Education & Travel
158006	9/6/2018	QUADRAMED	1,855.80	Education & Travel
158237	9/21/2018	AMERICU CREDIT UNION	932.31	Employee Recruitment
EFT000000004119	9/13/2018	INSIGHT INVESTIGATIONS, INC	1,486.50	Employee Recruitment
EFT000000004122	9/13/2018	SST TESTING +, INC.	420.00	Employee Recruitment
158097	9/13/2018	VISION SERVICE PLAN - WY	6,113.14	Employee Vision Plan
157949	9/6/2018	CAREFUSION SOLUTIONS, LLC	20,524.00	Equipment Lease
157975	9/6/2018	HP FINANCIAL SERVICES	292.36	Equipment Lease
158030	9/6/2018	US BANK EQUIPMENT FINANCE	237.54	Equipment Lease
158134	9/19/2018	COPIER & SUPPLY COMPANY	112.43	Equipment Lease

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

GENERAL FUND DISBURSEMENTS

09/30/18

158149	9/19/2018	GE HEALTHCARE FINANCIAL SERVICES	13,081.09	Equipment Lease
158157	9/19/2018	HP FINANCIAL SERVICES	292.36	Equipment Lease
158324	9/26/2018	SIEMENS FINANCIAL SERVICES, INC	18,429.63	Equipment Lease
158227	9/19/2018	US BANK EQUIPMENT FINANCE	2,169.75	Equipment Lease
158339	9/26/2018	US BANK EQUIPMENT FINANCE	928.29	Equipment Lease
EFT000000004123	9/13/2018	TIMEPAYMENT CORP	1,950.00	Equipment Lease
EFT000000004166	9/27/2018	SHADOW MOUNTAIN WATER CO ,WY	452.99	Equipment Lease
157965	9/6/2018	F B MCFADDEN WHOLESAL	2,934.82	Food
157989	9/6/2018	MEADOW GOLD DAIRY	451.78	Food
157998	9/6/2018	NICHOLAS & CO INC	2,116.46	Food
158022	9/6/2018	SYSCO INTERMOUNTAIN FOOD	6,468.65	Food
158033	9/6/2018	WESTERN WYOMING BEVERAGES INC	846.47	Food
158144	9/19/2018	F B MCFADDEN WHOLESAL	3,507.55	Food
158285	9/26/2018	F B MCFADDEN WHOLESAL	2,594.49	Food
158171	9/19/2018	LLORENS PHARMACEUTICAL INTERNATIONAL DIVISION IN	541.51	Food
158175	9/19/2018	MEADOW GOLD DAIRY	1,025.10	Food
158302	9/26/2018	MEADOW GOLD DAIRY	527.95	Food
158188	9/19/2018	NICHOLAS & CO INC	2,579.73	Food
158310	9/26/2018	NICHOLAS & CO INC	2,955.34	Food
158216	9/19/2018	SYSCO INTERMOUNTAIN FOOD	3,421.70	Food
158230	9/19/2018	WESTERN WYOMING BEVERAGES INC	1,512.24	Food
158343	9/26/2018	WESTERN WYOMING BEVERAGES INC	458.66	Food
EFT000000004101	9/6/2018	COCA-COLA BOTTLING COMPANY HIGH COUNTRY	433.55	Food
EFT000000004103	9/6/2018	FARMER BROS CO	861.20	Food
EFT000000004131	9/19/2018	COCA-COLA BOTTLING COMPANY HIGH COUNTRY	254.15	Food
EFT000000004132	9/19/2018	FARMER BROS CO	462.98	Food
EFT000000004156	9/27/2018	COCA-COLA BOTTLING COMPANY HIGH COUNTRY	209.30	Food
157966	9/6/2018	FED EX	105.75	Freight
158026	9/6/2018	TRIOSE, INC	4,824.26	Freight
158145	9/19/2018	FED EX	20.90	Freight
158286	9/26/2018	FED EX	32.73	Freight
158337	9/26/2018	TRIOSE, INC	4,170.72	Freight
158226	9/19/2018	UPS STORE	29.50	Freight
158200	9/19/2018	RED HORSE OIL COMPANIES INC	834.37	Fuel
EFT000000004146	9/19/2018	WWS - ROCK SPRINGS	2,022.88	Garbage Collection
W/T	9/6/2018	UUHP 9/05/18	107,201.65	Group Health
W/T	9/13/2018	UUHP 9/12/18	61,944.48	Group Health
W/T	9/20/2018	UUHP 09/19/18	107,977.22	Group Health
W/T	9/27/2018	UUHP 9/26/18	56,193.19	Group Health
157938	9/6/2018	APPLIED MEDICAL	5,016.00	Hospital Supplies
157939	9/6/2018	ARROW INTERNATIONAL, INC.	1,180.00	Hospital Supplies
157943	9/6/2018	B BRAUN MEDICAL INC.	478.40	Hospital Supplies
157941	9/6/2018	BARD PERIPHERIAL VASCULAR INC	2,088.00	Hospital Supplies
157967	9/6/2018	BAXTER HEALTHCARE CORP	1,458.88	Hospital Supplies

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

GENERAL FUND DISBURSEMENTS

09/30/18

157942	9/6/2018	BAYER HEALTHCARE LLC	1,856.82	Hospital Supplies
157945	9/6/2018	BOSTON SCIENTIFIC CORP	803.08	Hospital Supplies
157950	9/6/2018	CAREFUSION 2200 INC	1,200.00	Hospital Supplies
157951	9/6/2018	CARSTENS HEALTH INDUSTRIES INC	30.31	Hospital Supplies
157956	9/6/2018	COASTAL LIFE SYSTEMS,INC.	456.52	Hospital Supplies
157959	9/6/2018	CONE INSTRUMENTS	240.68	Hospital Supplies
157961	9/6/2018	COOK MEDICAL INCORPORATED	1,029.68	Hospital Supplies
157963	9/6/2018	DIAGNOSTIGA STAGO INC	118.52	Hospital Supplies
157977	9/6/2018	J & J HEALTH CARE SYSTEMS INC	383.21	Hospital Supplies
157980	9/6/2018	KCI USA	136.20	Hospital Supplies
158019	9/6/2018	LEICA BIOSYSTEMS RICHMOND	124.77	Hospital Supplies
157996	9/6/2018	NATUS MEDICAL INC	82.03	Hospital Supplies
157997	9/6/2018	NEOTECH PRODUCTS, INC	164.50	Hospital Supplies
158000	9/6/2018	OLYMPUS AMERICA INC	513.56	Hospital Supplies
158002	9/6/2018	OWENS & MINOR 90005430	13,136.48	Hospital Supplies
158003	9/6/2018	PERFORMANCE HEALTH SUPPLY INC	136.50	Hospital Supplies
158008	9/6/2018	RESPIRONICS	89.00	Hospital Supplies
158015	9/6/2018	STERIS CORPORATION	2,091.16	Hospital Supplies
158025	9/6/2018	TRI-ANIM HEALTH SERVICES INC	678.44	Hospital Supplies
158032	9/6/2018	WAXIE SANITARY SUPPLY	374.80	Hospital Supplies
157964	9/6/2018	EDGE PHARMACEUTICALS, LLC	1,114.58	Hospital Supplies
157982	9/6/2018	LABELMATCH	89.95	Hospital Supplies
157995	9/6/2018	NANOSONICS, INC	518.00	Hospital Supplies
158105	9/19/2018	ABBOTT LABORATORIES	651.61	Hospital Supplies
158252	9/26/2018	ABBOTT LABORATORIES	1,268.17	Hospital Supplies
158107	9/19/2018	AESCULAP INC	769.85	Hospital Supplies
158255	9/26/2018	AMAZON.COM CREDIT PLAN	3,041.85	Hospital Supplies
158112	9/19/2018	APPLIED MEDICAL	744.00	Hospital Supplies
158256	9/26/2018	APPLIED MEDICAL	816.00	Hospital Supplies
158113	9/19/2018	AQUACAST LINER	757.33	Hospital Supplies
158115	9/19/2018	ARTHREX INC.	660.00	Hospital Supplies
158257	9/26/2018	ARTHREX INC.	480.00	Hospital Supplies
158120	9/19/2018	B BRAUN MEDICAL INC.	2,094.08	Hospital Supplies
158258	9/26/2018	B BRAUN MEDICAL INC.	2,029.45	Hospital Supplies
158118	9/19/2018	BARD MEDICAL	166.32	Hospital Supplies
158289	9/26/2018	BAXTER HEALTHCARE CORP	1,449.29	Hospital Supplies
158119	9/19/2018	BAYER HEALTHCARE LLC	1,856.82	Hospital Supplies
158122	9/19/2018	BECTON DICKINSON	1,088.00	Hospital Supplies
158260	9/26/2018	BECTON DICKINSON	1,088.00	Hospital Supplies
158124	9/19/2018	BOSTON SCIENTIFIC CORP	1,139.84	Hospital Supplies
158273	9/26/2018	C R BARD INC	324.38	Hospital Supplies
158269	9/26/2018	CONMED CORPORATION	236.50	Hospital Supplies
158270	9/26/2018	COOK MEDICAL INC.	480.00	Hospital Supplies
158133	9/19/2018	COOK MEDICAL INCORPORATED	1,346.22	Hospital Supplies

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

GENERAL FUND DISBURSEMENTS

09/30/18

158271	9/26/2018	COOK MEDICAL INCORPORATED	3,366.82	Hospital Supplies
158140	9/19/2018	DIAGNOSTIGA STAGO INC	2,419.43	Hospital Supplies
158150	9/19/2018	GENERAL HOSPITAL SUPPLY CORPORATION	737.00	Hospital Supplies
158152	9/19/2018	HEALTHCARE LOGISTICS INC	20.00	Hospital Supplies
158292	9/26/2018	HEALTHCARE LOGISTICS INC	97.20	Hospital Supplies
158159	9/19/2018	IN PRO CORPORATION	6,499.60	Hospital Supplies
158165	9/19/2018	KARL STORZ ENDOSCOPY-AMERICA	9,994.95	Hospital Supplies
158296	9/26/2018	KARL STORZ ENDOSCOPY-AMERICA	5,162.40	Hospital Supplies
158166	9/19/2018	KCI USA	4,968.00	Hospital Supplies
158297	9/26/2018	KCI USA	210.75	Hospital Supplies
158330	9/26/2018	LEICA BIOSYSTEMS RICHMOND	300.27	Hospital Supplies
158173	9/19/2018	MARKET LAB, INC	74.18	Hospital Supplies
158174	9/19/2018	MCKESSON MEDICAL-SURGICAL	465.82	Hospital Supplies
158301	9/26/2018	MCKESSON MEDICAL-SURGICAL	1,411.60	Hospital Supplies
158303	9/26/2018	MEDELA INC	654.22	Hospital Supplies
158178	9/19/2018	MEDTRONIC, USA	7,919.00	Hospital Supplies
158305	9/26/2018	MEDTRONIC, USA	809.00	Hospital Supplies
158182	9/19/2018	MINDRAY DS USA, INC.	1,914.80	Hospital Supplies
158311	9/26/2018	NSPIRE HEALTH, INC	84.00	Hospital Supplies
158190	9/19/2018	OLYMPUS AMERICA INC	253.69	Hospital Supplies
158312	9/26/2018	OLYMPUS AMERICA INC	3,929.14	Hospital Supplies
158192	9/19/2018	OWENS & MINOR 90005430	59,522.59	Hospital Supplies
158313	9/26/2018	OWENS & MINOR 90005430	24,101.69	Hospital Supplies
158319	9/26/2018	RADIOMETER AMERICA INC	259.64	Hospital Supplies
158326	9/26/2018	SPACELABS MEDICAL	183.76	Hospital Supplies
158211	9/19/2018	STERIS CORPORATION	1,151.83	Hospital Supplies
158334	9/26/2018	TELEFLEX MEDICAL INC.	1,863.69	Hospital Supplies
158336	9/26/2018	TRI-ANIM HEALTH SERVICES INC	126.40	Hospital Supplies
158223	9/19/2018	UNITED STATES PLASTIC CORP	90.67	Hospital Supplies
158340	9/26/2018	UTAH MEDICAL PRODUCTS INC	64.26	Hospital Supplies
158341	9/26/2018	VERATHON INC.	229.00	Hospital Supplies
158229	9/19/2018	WAXIE SANITARY SUPPLY	743.08	Hospital Supplies
158342	9/26/2018	WAXIE SANITARY SUPPLY	849.27	Hospital Supplies
158254	9/26/2018	ALTA MEDICAL SPECIALTIES	413.17	Hospital Supplies
158141	9/19/2018	EDGE PHARMACEUTICALS, LLC	1,122.92	Hospital Supplies
158151	9/19/2018	GETINGE USA SALES, LLC	774.00	Hospital Supplies
158208	9/19/2018	STANLEY SECURITY SOLUTIONS, INC.	440.75	Hospital Supplies
EFT000000004098	9/6/2018	BREG INC	219.12	Hospital Supplies
EFT000000004099	9/6/2018	BSN MEDICAL INC	254.37	Hospital Supplies
EFT000000004105	9/6/2018	HARDY DIAGNOSTICS	665.89	Hospital Supplies
EFT000000004116	9/6/2018	SIEMENS HEALTHCARE DIAGNOSTICS, INC.	1,070.00	Hospital Supplies
EFT000000004127	9/19/2018	BAXTER HEALTHCARE CORP/IV	1,500.00	Hospital Supplies
EFT000000004128	9/19/2018	BIODEX MEDICAL SYSTEMS INC	198.00	Hospital Supplies
EFT000000004130	9/19/2018	BREG INC	84.62	Hospital Supplies

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

GENERAL FUND DISBURSEMENTS

09/30/18

EFT000000004135	9/19/2018	HARDY DIAGNOSTICS	361.63	Hospital Supplies
EFT000000004144	9/19/2018	STRYKER INSTRUMENTS	59.70	Hospital Supplies
EFT000000004152	9/27/2018	BAXTER HEALTHCARE CORP/IV	1,655.58	Hospital Supplies
EFT000000004154	9/27/2018	BREG INC	487.01	Hospital Supplies
EFT000000004159	9/27/2018	HARDY DIAGNOSTICS	1,077.54	Hospital Supplies
EFT000000004164	9/27/2018	PACIFIC MEDICAL LLC	450.00	Hospital Supplies
158095	9/13/2018	PROVIDENT LIFE & ACCIDENT	28,415.88	Insurance Premium
158225	9/19/2018	PROVIDENT LIFE & ACCIDENT	12,317.01	Insurance Premium
158044	9/6/2018	INSURANCE REFUND	63.37	Insurance Refund
158069	9/6/2018	INSURANCE REFUND	53.20	Insurance Refund
158123	9/19/2018	INSURANCE REFUND	156.00	Insurance Refund
158232	9/19/2018	WYOMING.COM	10.00	Internet Services
EFT000000004167	9/27/2018	ARUP LABORATORIES, INC.	48,712.72	Laboratory Services
157944	9/6/2018	BECKMAN COULTER, INC	479.95	Laboratory Supplies
157947	9/6/2018	CANCER DIAGNOSTICS, INC	86.05	Laboratory Supplies
157948	9/6/2018	CARDINAL HEALTH	33,874.73	Laboratory Supplies
157991	9/6/2018	MEDIVATORS REPROCESSING SYSTEM	500.00	Laboratory Supplies
158111	9/19/2018	ANAEROBE SYSTEMS	22.70	Laboratory Supplies
158121	9/19/2018	BECKMAN COULTER, INC	2,608.94	Laboratory Supplies
158259	9/26/2018	BECKMAN COULTER, INC	809.35	Laboratory Supplies
158126	9/19/2018	CANCER DIAGNOSTICS, INC	86.05	Laboratory Supplies
158127	9/19/2018	CARDINAL HEALTH	23,482.46	Laboratory Supplies
158262	9/26/2018	CARDINAL HEALTH	27,049.20	Laboratory Supplies
158265	9/26/2018	CEPHEID	265.00	Laboratory Supplies
158176	9/19/2018	MEDIVATORS REPROCESSING SYSTEM	222.00	Laboratory Supplies
158306	9/26/2018	MESA LABORATORIES	58.00	Laboratory Supplies
158328	9/26/2018	STRECK LABORATORIES INC	236.20	Laboratory Supplies
158220	9/19/2018	TYPENEX MEDICAL, LLC	185.40	Laboratory Supplies
158316	9/26/2018	PROMETHEUS LABORATORIES INC	2,500.00	Laboratory Supplies
EFT000000004097	9/6/2018	BIO-RAD LABORATORIES	1,834.86	Laboratory Supplies
EFT000000004104	9/6/2018	FISHER HEALTHCARE	7,164.56	Laboratory Supplies
EFT000000004106	9/6/2018	INTER-MOUNTAIN LABORATORIES	260.00	Laboratory Supplies
EFT000000004110	9/6/2018	MASTER TECH	390.03	Laboratory Supplies
EFT000000004111	9/6/2018	ORTHO-CLINICAL DIAGNOSITCS INC	891.21	Laboratory Supplies
EFT000000004112	9/6/2018	PDC HEALTHCARE	629.88	Laboratory Supplies
EFT000000004129	9/19/2018	BIO-RAD LABORATORIES	228.80	Laboratory Supplies
EFT000000004133	9/19/2018	FISHER HEALTHCARE	5,554.36	Laboratory Supplies
EFT000000004139	9/19/2018	ORTHO-CLINICAL DIAGNOSITCS INC	959.38	Laboratory Supplies
EFT000000004141	9/19/2018	PDC HEALTHCARE	429.00	Laboratory Supplies
EFT000000004153	9/27/2018	BIO-RAD LABORATORIES	452.76	Laboratory Supplies
EFT000000004158	9/27/2018	FISHER HEALTHCARE	597.58	Laboratory Supplies
EFT000000004162	9/27/2018	MASTER TECH	604.57	Laboratory Supplies
EFT000000004163	9/27/2018	ORTHO-CLINICAL DIAGNOSITCS INC	228.54	Laboratory Supplies
158083	9/13/2018	NEW YORK LIFE INSURANCE COMPANY	3,769.00	Life Insurance

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

GENERAL FUND DISBURSEMENTS

09/30/18

158187	9/19/2018	NEW YORK LIFE INSURANCE COMPANY	3,777.97	Life Insurance
157958	9/6/2018	COMPHEALTH, INC.	23,134.34	Locum Tenens
157986	9/6/2018	LUDWIG KRONER, M.D.	20,980.54	Locum Tenens
158132	9/19/2018	COMPHEALTH, INC.	912.79	Locum Tenens
EFT000000004096	9/6/2018	BARTON ASSOCIATES	31,883.46	Locum Tenens
157962	9/6/2018	DAVE'S APPLIANCE	59.00	Maintenance & Repair
158321	9/26/2018	RICHARD WOLF MEDICAL INST CORP	129.30	Maintenance & Repair
158213	9/19/2018	SWEETWATER PLUMBING & HEATING	246.85	Maintenance & Repair
158331	9/26/2018	SWEETWATER PLUMBING & HEATING	142.50	Maintenance & Repair
158309	9/26/2018	NANOSONICS, INC	10,762.99	Maintenance & Repair
EFT000000004100	9/6/2018	CARRIER COMMERCIAL SERVICE	991.47	Maintenance & Repair
EFT000000004165	9/27/2018	PARTSSOURCE	1,009.10	Maintenance & Repair
157957	9/6/2018	CODALE ELECTRIC SUPPLY, INC	283.49	Maintenance Supplies
158029	9/6/2018	UNIPOWER	447.53	Maintenance Supplies
158234	9/20/2018	CODALE ELECTRIC SUPPLY, INC	1,814.18	Maintenance Supplies
158267	9/26/2018	CODALE ELECTRIC SUPPLY, INC	94.20	Maintenance Supplies
158291	9/26/2018	GRAINGER	1,162.19	Maintenance Supplies
158155	9/19/2018	HOME DEPOT	1,280.12	Maintenance Supplies
158266	9/26/2018	MSC INDUSTRIAL SUPPLY CO	830.70	Maintenance Supplies
EFT000000004093	9/6/2018	ACE HARDWARE	86.95	Maintenance Supplies
EFT000000004114	9/6/2018	ROCK SPRINGS WINNELSON CO	9,661.58	Maintenance Supplies
EFT000000004115	9/6/2018	SHERWIN WILLIAMS CO	157.63	Maintenance Supplies
EFT000000004124	9/19/2018	ACE HARDWARE	12.33	Maintenance Supplies
EFT000000004145	9/19/2018	ULINE, INC	227.50	Maintenance Supplies
EFT000000004148	9/27/2018	ACE HARDWARE	21.99	Maintenance Supplies
EFT000000004151	9/27/2018	ALPINE PURE SOFT WATER	676.20	Maintenance Supplies
158125	9/19/2018	BOTTOM LINE MARKETING	200.17	Marketing & Promotional Supplies
158280	9/26/2018	DESKTOP DESIGN	203.50	Marketing & Promotional Supplies
EFT000000004138	9/19/2018	MOUNTAIN STATES EMPLOYERS COUNCIL	5,600.00	Membership
157971	9/6/2018	GREEN RIVER CHAMBER OF COMMERCE	92.00	Memberships
157936	9/6/2018	APIC REGISTRATION	1,450.00	Memberships
158307	9/26/2018	MGMA	399.00	Memberships
158099	9/19/2018	MHSC-FOUNDATION	1,785.04	MHSC Foundation
158017	9/6/2018	SUPERIOR AUDIOMETRICS, LLC	396.00	Minor Equipment
157933	9/6/2018	ALADDIN TEMP-RITE LLC	74.40	Non Medical Supplies
157955	9/6/2018	CIVCO MEDICAL SOLUTIONS	610.00	Non Medical Supplies
157969	9/6/2018	GLOBAL EQUIPMENT COMPANY	40.32	Non Medical Supplies
157974	9/6/2018	HOBART CORPORATION	3,989.93	Non Medical Supplies
157992	9/6/2018	MEDLINE INDUSTRIES INC	1,508.92	Non Medical Supplies
158161	9/19/2018	J.J. KELLER & ASSOCIATES, INC.	857.00	Non Medical Supplies
158177	9/19/2018	MEDLINE INDUSTRIES INC	1,241.45	Non Medical Supplies
158304	9/26/2018	MEDLINE INDUSTRIES INC	526.36	Non Medical Supplies
158191	9/19/2018	ORIENTAL TRADING COMPANY	278.81	Non Medical Supplies
158206	9/19/2018	SMILEMAKERS	248.83	Non Medical Supplies

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
GENERAL FUND DISBURSEMENTS
09/30/18

EFT000000004155	9/27/2018	CJ'S GRAFFIX'S	190.00	Non Medical Supplies
157990	9/6/2018	MEDICAL ARTS PRESS	45.99	Office Supplies
158014	9/6/2018	STAPLES BUSINESS ADVANTAGE	714.90	Office Supplies
158158	9/19/2018	IDENTISYS INC	632.00	Office Supplies
158207	9/19/2018	STANDARD REGISTER COMPANY	951.13	Office Supplies
158209	9/19/2018	STAPLES BUSINESS ADVANTAGE	244.29	Office Supplies
158327	9/26/2018	STAPLES BUSINESS ADVANTAGE	445.73	Office Supplies
EFT000000004142	9/19/2018	SMYTH PRINTING	1,681.00	Office Supplies
158024	9/6/2018	TRANSFORMATIONS FACE PAINTING, LLC	150.00	Other Employee Benefits
158163	9/19/2018	JOY'S FLOWERS & GIFTS	35.00	Other Employee Benefits
158295	9/26/2018	JOY'S FLOWERS & GIFTS	111.50	Other Employee Benefits
158233	9/19/2018	YOUNG AT HEART SENIOR CITIZENS CENTER	1,970.00	Other Employee Benefits
157985	9/6/2018	QUICK RESPONSE TAXI	50.00	Other Purchased Services
158235	9/20/2018	PITT STOP SIGNS	526.00	Other Purchased Services
158169	9/19/2018	QUICK RESPONSE TAXI	100.00	Other Purchased Services
158204	9/19/2018	SARAH WOOTAN	200.00	Other Purchased Services
EFT000000004095	9/6/2018	AIRGAS INTERMOUNTAIN INC	715.84	Oxygen Rental
EFT000000004125	9/19/2018	AIRGAS INTERMOUNTAIN INC	103.66	Oxygen Rental
EFT000000004150	9/27/2018	AIRGAS INTERMOUNTAIN INC	516.39	Oxygen Rental
158035	9/6/2018	PATIENT REFUND	50.00	Patient Refund
158036	9/6/2018	PATIENT REFUND	10.00	Patient Refund
158037	9/6/2018	PATIENT REFUND	5.00	Patient Refund
158038	9/6/2018	PATIENT REFUND	45.00	Patient Refund
158039	9/6/2018	PATIENT REFUND	25.00	Patient Refund
158040	9/6/2018	PATIENT REFUND	170.56	Patient Refund
158041	9/6/2018	PATIENT REFUND	40.00	Patient Refund
158042	9/6/2018	PATIENT REFUND	20.00	Patient Refund
158043	9/6/2018	PATIENT REFUND	40.00	Patient Refund
158045	9/6/2018	PATIENT REFUND	20.00	Patient Refund
158046	9/6/2018	PATIENT REFUND	30.08	Patient Refund
158047	9/6/2018	PATIENT REFUND	25.00	Patient Refund
158048	9/6/2018	PATIENT REFUND	41.95	Patient Refund
158049	9/6/2018	PATIENT REFUND	5.00	Patient Refund
158050	9/6/2018	PATIENT REFUND	21.00	Patient Refund
158051	9/6/2018	PATIENT REFUND	19.00	Patient Refund
158052	9/6/2018	PATIENT REFUND	12.40	Patient Refund
158053	9/6/2018	PATIENT REFUND	30.00	Patient Refund
158054	9/6/2018	PATIENT REFUND	5.00	Patient Refund
158055	9/6/2018	PATIENT REFUND	21.84	Patient Refund
158056	9/6/2018	PATIENT REFUND	49.00	Patient Refund
158057	9/6/2018	PATIENT REFUND	55.00	Patient Refund
158058	9/6/2018	PATIENT REFUND	20.00	Patient Refund
158059	9/6/2018	PATIENT REFUND	20.00	Patient Refund
158060	9/6/2018	PATIENT REFUND	25.00	Patient Refund

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
GENERAL FUND DISBURSEMENTS
09/30/18

158061	9/6/2018	PATIENT REFUND	25.00	Patient Refund
158062	9/6/2018	PATIENT REFUND	25.00	Patient Refund
158063	9/6/2018	PATIENT REFUND	20.00	Patient Refund
158064	9/6/2018	PATIENT REFUND	17.58	Patient Refund
158065	9/6/2018	PATIENT REFUND	10.00	Patient Refund
158066	9/6/2018	PATIENT REFUND	37.00	Patient Refund
158067	9/6/2018	PATIENT REFUND	82.55	Patient Refund
158068	9/6/2018	PATIENT REFUND	17.20	Patient Refund
158070	9/6/2018	PATIENT REFUND	20.00	Patient Refund
158071	9/6/2018	PATIENT REFUND	40.00	Patient Refund
158345	9/26/2018	PATIENT REFUND	10.00	Patient Refund
158346	9/26/2018	PATIENT REFUND	15.70	Patient Refund
158347	9/26/2018	PATIENT REFUND	20.00	Patient Refund
158348	9/26/2018	PATIENT REFUND	12.00	Patient Refund
158349	9/26/2018	PATIENT REFUND	40.00	Patient Refund
158350	9/26/2018	PATIENT REFUND	20.00	Patient Refund
158351	9/26/2018	PATIENT REFUND	29.00	Patient Refund
158352	9/26/2018	PATIENT REFUND	17.40	Patient Refund
158353	9/26/2018	PATIENT REFUND	26.96	Patient Refund
158354	9/26/2018	PATIENT REFUND	85.56	Patient Refund
158355	9/26/2018	PATIENT REFUND	5.85	Patient Refund
158357	9/26/2018	PATIENT REFUND	20.00	Patient Refund
158356	9/26/2018	PATIENT REFUND	45.00	Patient Refund
158358	9/26/2018	PATIENT REFUND	48.00	Patient Refund
158361	9/26/2018	PATIENT REFUND	8.89	Patient Refund
158360	9/26/2018	PATIENT REFUND	20.80	Patient Refund
158359	9/26/2018	PATIENT REFUND	13.48	Patient Refund
158363	9/26/2018	PATIENT REFUND	12.54	Patient Refund
158362	9/26/2018	PATIENT REFUND	26.60	Patient Refund
158364	9/26/2018	PATIENT REFUND	30.00	Patient Refund
158365	9/26/2018	PATIENT REFUND	25.00	Patient Refund
158367	9/26/2018	PATIENT REFUND	450.00	Patient Refund
158366	9/26/2018	PATIENT REFUND	35.00	Patient Refund
158368	9/26/2018	PATIENT REFUND	20.00	Patient Refund
158369	9/26/2018	PATIENT REFUND	48.80	Patient Refund
158370	9/26/2018	PATIENT REFUND	40.00	Patient Refund
158371	9/26/2018	PATIENT REFUND	140.47	Patient Refund
158372	9/26/2018	PATIENT REFUND	15.00	Patient Refund
158373	9/26/2018	PATIENT REFUND	20.00	Patient Refund
158376	9/26/2018	PATIENT REFUND	10.62	Patient Refund
158379	9/26/2018	PATIENT REFUND	25.00	Patient Refund
158374	9/26/2018	PATIENT REFUND	15.00	Patient Refund
158381	9/26/2018	PATIENT REFUND	267.40	Patient Refund
158377	9/26/2018	PATIENT REFUND	5.00	Patient Refund

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
GENERAL FUND DISBURSEMENTS
09/30/18

158380	9/26/2018	PATIENT REFUND	17.40	Patient Refund
158375	9/26/2018	PATIENT REFUND	20.00	Patient Refund
158378	9/26/2018	PATIENT REFUND	83.01	Patient Refund
158382	9/26/2018	PATIENT REFUND	40.00	Patient Refund
158384	9/26/2018	PATIENT REFUND	45.00	Patient Refund
158386	9/26/2018	PATIENT REFUND	12.37	Patient Refund
158385	9/26/2018	PATIENT REFUND	30.00	Patient Refund
158387	9/26/2018	PATIENT REFUND	25.00	Patient Refund
158388	9/26/2018	PATIENT REFUND	5.00	Patient Refund
158390	9/26/2018	PATIENT REFUND	69.00	Patient Refund
158389	9/26/2018	PATIENT REFUND	30.00	Patient Refund
158391	9/26/2018	PATIENT REFUND	126.00	Patient Refund
158392	9/26/2018	PATIENT REFUND	25.00	Patient Refund
158393	9/26/2018	PATIENT REFUND	35.00	Patient Refund
158394	9/26/2018	PATIENT REFUND	42.94	Patient Refund
158395	9/26/2018	PATIENT REFUND	25.00	Patient Refund
158396	9/26/2018	PATIENT REFUND	34.73	Patient Refund
158397	9/26/2018	PATIENT REFUND	278.80	Patient Refund
158398	9/26/2018	PATIENT REFUND	35.00	Patient Refund
158400	9/26/2018	PATIENT REFUND	22.00	Patient Refund
158401	9/26/2018	PATIENT REFUND	70.00	Patient Refund
158403	9/26/2018	PATIENT REFUND	30.00	Patient Refund
158402	9/26/2018	PATIENT REFUND	20.00	Patient Refund
158404	9/26/2018	PATIENT REFUND	13.00	Patient Refund
158405	9/26/2018	PATIENT REFUND	92.45	Patient Refund
158406	9/26/2018	PATIENT REFUND	577.89	Patient Refund
158407	9/26/2018	PATIENT REFUND	20.00	Patient Refund
158408	9/26/2018	PATIENT REFUND	5.00	Patient Refund
158409	9/26/2018	PATIENT REFUND	30.00	Patient Refund
158410	9/26/2018	PATIENT REFUND	18.60	Patient Refund
158411	9/26/2018	PATIENT REFUND	42.00	Patient Refund
158412	9/26/2018	PATIENT REFUND	11.10	Patient Refund
158413	9/26/2018	PATIENT REFUND	6.20	Patient Refund
158414	9/26/2018	PATIENT REFUND	40.00	Patient Refund
158415	9/26/2018	PATIENT REFUND	25.00	Patient Refund
158417	9/26/2018	PATIENT REFUND	45.00	Patient Refund
158416	9/26/2018	PATIENT REFUND	20.00	Patient Refund
158419	9/26/2018	PATIENT REFUND	186.62	Patient Refund
158418	9/26/2018	PATIENT REFUND	70.00	Patient Refund
158420	9/26/2018	PATIENT REFUND	13.51	Patient Refund
158383	9/26/2018	PATIENT REFUND	120.00	Patient Refund
158421	9/26/2018	PATIENT REFUND	18.60	Patient Refund
158422	9/26/2018	PATIENT REFUND	150.00	Patient Refund
158424	9/26/2018	PATIENT REFUND	10.00	Patient Refund

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
GENERAL FUND DISBURSEMENTS
09/30/18

158423	9/26/2018	PATIENT REFUND	25.00	Patient Refund
158425	9/26/2018	PATIENT REFUND	18.70	Patient Refund
158426	9/26/2018	PATIENT REFUND	13.00	Patient Refund
158427	9/26/2018	PATIENT REFUND	10.00	Patient Refund
158428	9/26/2018	PATIENT REFUND	12.40	Patient Refund
158429	9/26/2018	PATIENT REFUND	25.00	Patient Refund
158430	9/26/2018	PATIENT REFUND	80.00	Patient Refund
158432	9/26/2018	PATIENT REFUND	30.00	Patient Refund
158431	9/26/2018	PATIENT REFUND	5.00	Patient Refund
158433	9/26/2018	PATIENT REFUND	26.42	Patient Refund
158434	9/26/2018	PATIENT REFUND	35.00	Patient Refund
158435	9/26/2018	PATIENT REFUND	30.00	Patient Refund
158436	9/26/2018	PATIENT REFUND	40.00	Patient Refund
158437	9/26/2018	PATIENT REFUND	12.80	Patient Refund
158438	9/26/2018	PATIENT REFUND	25.00	Patient Refund
158439	9/26/2018	PATIENT REFUND	6.00	Patient Refund
158440	9/26/2018	PATIENT REFUND	70.15	Patient Refund
158441	9/26/2018	PATIENT REFUND	29.87	Patient Refund
158442	9/26/2018	PATIENT REFUND	35.00	Patient Refund
158399	9/26/2018	PATIENT REFUND	47.34	Patient Refund
158443	9/26/2018	PATIENT REFUND	28.00	Patient Refund
158444	9/26/2018	PATIENT REFUND	45.00	Patient Refund
158446	9/26/2018	PATIENT REFUND	40.00	Patient Refund
158449	9/26/2018	PATIENT REFUND	50.00	Patient Refund
158448	9/26/2018	PATIENT REFUND	30.00	Patient Refund
158447	9/26/2018	PATIENT REFUND	53.80	Patient Refund
158445	9/26/2018	PATIENT REFUND	286.54	Patient Refund
158450	9/26/2018	PATIENT REFUND	50.00	Patient Refund
158452	9/26/2018	PATIENT REFUND	5.00	Patient Refund
158451	9/26/2018	PATIENT REFUND	25.00	Patient Refund
158453	9/26/2018	PATIENT REFUND	10.00	Patient Refund
158454	9/26/2018	PATIENT REFUND	30.00	Patient Refund
158455	9/26/2018	PATIENT REFUND	57.43	Patient Refund
158456	9/26/2018	PATIENT REFUND	145.00	Patient Refund
158457	9/26/2018	PATIENT REFUND	20.49	Patient Refund
158460	9/26/2018	PATIENT REFUND	17.80	Patient Refund
158458	9/26/2018	PATIENT REFUND	50.00	Patient Refund
158461	9/26/2018	PATIENT REFUND	5.10	Patient Refund
158459	9/26/2018	PATIENT REFUND	25.00	Patient Refund
158462	9/26/2018	PATIENT REFUND	41.58	Patient Refund
158463	9/26/2018	PATIENT REFUND	14.25	Patient Refund
157931	9/6/2018	UNITED WAY OF SWEETWATER COUNTY	100.00	Payroll Deduction
157927	9/6/2018	OFFICE OF CHILD SUPPORT ENFORCEMENT	104.40	Payroll Deduction
157928	9/6/2018	OKLAHOMA CENTRALIZED SUPORT REGISTRY	102.69	Payroll Deduction

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
GENERAL FUND DISBURSEMENTS
09/30/18

158103	9/19/2018	UNITED WAY OF SWEETWATER COUNTY	115.00	Payroll Deduction
157926	9/6/2018	FAMILY SUPPORT REGISTRY	496.14	Payroll Garnishment
157929	9/6/2018	STATE OF WYOMING DFS/CSES	581.68	Payroll Garnishment
157930	9/6/2018	SWEETWATER CIRCUIT COURT	1,108.75	Payroll Garnishment
158098	9/19/2018	FAMILY SUPPORT REGISTRY	496.14	Payroll Garnishment
158101	9/19/2018	STATE OF WYOMING DFS/CSES	1,122.82	Payroll Garnishment
158102	9/19/2018	SWEETWATER CIRCUIT COURT	845.30	Payroll Garnishment
158100	9/19/2018	OFFICE OF CHILD SUPPORT ENFORCEMENT	104.40	Payroll Garnishment
W/T	9/5/2018	PAYROLL 18	1,350,000.00	Payroll Transfer
W/T	9/17/2018	PAYROLL 19	1,400,000.00	Payroll Transfer
W/T	9/19/2018	MED FLEX AUG 18	2,801.33	Payroll Transfer
157993	9/6/2018	MHSC - PETTY CASH	25.25	Petty Cash
158075	9/13/2018	CARDINAL HEALTH PHARMACY MGMT	859,046.51	Pharmacy Management
158128	9/19/2018	CARDINAL HEALTH PHARMACY MGMT	9,427.50	Pharmacy Management
158080	9/13/2018	JOSEPH J. OLIVER, M.D.	192.10	Physician Recruitment
158322	9/26/2018	SANDS CATERING	1,781.88	Physician Recruitment
158236	9/21/2018	DR. ALICIA GRAY	3,000.00	Physician Recruitment
158079	9/13/2018	DR. JON MCDONALD	1,084.94	Physician Recruitment
157979	9/6/2018	JOHN A. ILIYA, M.D.	6,000.00	Physician Services
158011	9/6/2018	ROCK SPRINGS FAMILY PRACTICE	5,769.23	Physician Services
157953	9/6/2018	SWEETWATER PEDIATRICS	9,750.00	Physician Services
158106	9/19/2018	ADVANCED MEDICAL IMAGING, LLC	33,538.00	Physician Services
158172	9/19/2018	LOCUM TENENS.COM	855.65	Physician Services
158202	9/19/2018	ROCK SPRINGS FAMILY PRACTICE	5,769.23	Physician Services
158224	9/19/2018	UNIVERSITY OF UTAH DIVISION OF CARDIOVASCULAR MED	262.60	Physician Services
158338	9/26/2018	UNIVERSITY OF UTAH HEALTH CARE	87,066.67	Physician Services
158251	9/21/2018	WYOMING PATHOLOGY	15,000.00	Physician Services
157932	9/6/2018	US DEPARTMENT OF EDUCATION	148.04	Physician Student Loan
158239	9/21/2018	DEPARTMENT OF EDUCATION	7,311.56	Physician Student Loan
158240	9/21/2018	DISCOVER STUDENT LOANS	519.64	Physician Student Loan
158241	9/21/2018	DRB EDUCATION FINANCE	5,833.33	Physician Student Loan
158243	9/21/2018	FEDLOAN SERVICING	11,712.49	Physician Student Loan
158244	9/21/2018	GREAT LAKES	11,697.91	Physician Student Loan
158247	9/21/2018	NAVIENT	5,869.25	Physician Student Loan
158248	9/21/2018	NAVIENT	1,500.00	Physician Student Loan
158249	9/21/2018	NELNET LOAN SERVICES, INC	719.89	Physician Student Loan
158104	9/19/2018	US DEPARTMENT OF EDUCATION	169.75	Physician Student Loan
158250	9/21/2018	WELLS FARGO EDUCATION FINANCIAL SERVICES	2,884.62	Physician Student Loan
158246	9/21/2018	DR. JACQUES DENKER	6,498.33	Physician Student Loan
158320	9/26/2018	RESERVE ACCOUNT	5,000.00	Postage
157983	9/6/2018	CLIFTONLARSONALLEN LLP	3,758.49	Professional Service
158027	9/6/2018	TTE LABORATORIES	150.37	Professional Service
158162	9/19/2018	JOINT COMMISSION RESOURCES	300.00	Professional Service
158181	9/19/2018	MILE HIGH MOBILE PET	15,500.00	Professional Service

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
GENERAL FUND DISBURSEMENTS
09/30/18

158184	9/19/2018	MOUNTAIN STATES MEDICAL PHYSICS	6,875.00	Professional Service
158193	9/19/2018	P3 CONSULTING LLC	472.50	Professional Service
158318	9/26/2018	RADIATION DETECTION COMPANY	15.75	Radiation Monitoring
158179	9/19/2018	MERRY X-RAY	384.27	Radiology Film
157976	9/6/2018	INTERMOUNTAIN RADIOPHARMACY - UNIVERSITY OF UTAH	4,775.00	Radiology Material
157987	9/6/2018	MALLINCKRODT NUCLEAR MEDICINE LLC	861.70	Radiology Material
158261	9/26/2018	BRACCO DIAGNOSTICS INC	2,244.37	Radiology Material
EFT000000004109	9/6/2018	LANTHEUS MEDICAL IMAGING, INC	6,404.10	Radiology Material
EFT000000004137	9/19/2018	LANTHEUS MEDICAL IMAGING, INC	3,202.05	Radiology Material
EFT000000004140	9/19/2018	PHARMALUCENCE, INC	2,285.00	Radiology Material
EFT000000004161	9/27/2018	LANTHEUS MEDICAL IMAGING, INC	3,202.05	Radiology Material
158077	9/13/2018	ELIZABETH FERGUSON	3.59	Reimbursement - Badge Balance
158275	9/26/2018	CRISSI SAMLEY	9.94	Reimbursement - Badge Balance
157946	9/6/2018	DR. BRYTTON LONG	327.56	Reimbursement - CME
157984	9/6/2018	DR. LAWRENCE LAURIDSEN	3,820.72	Reimbursement - CME
158138	9/19/2018	DR. DAVID LIU	658.81	Reimbursement - CME
158205	9/19/2018	DR. SIGSBEE DUCK	2,353.68	Reimbursement - CME
157988	9/6/2018	MARY TYLER	36.72	Reimbursement - Education & Travel
157935	9/6/2018	ANGEL BENNETT	192.27	Reimbursement - Education & Travel
157968	9/6/2018	GINA ELKINS	285.55	Reimbursement - Education & Travel
157978	9/6/2018	JIM HICKOK	100.00	Reimbursement - Education & Travel
158009	9/6/2018	ROB FAIR	357.00	Reimbursement - Education & Travel
157981	9/6/2018	YOUR HOSPITALIST TEAM	1,478.20	Reimbursement - Education & Travel
158023	9/6/2018	TINA FRULLO	18.36	Reimbursement - Education & Travel
158073	9/13/2018	AMELIA CUEVAS	217.82	Reimbursement - Education & Travel
158081	9/13/2018	KARI QUICKENDEN	212.16	Reimbursement - Education & Travel
158082	9/13/2018	KELLY SUGIHARA	458.74	Reimbursement - Education & Travel
158084	9/13/2018	PATTY O'LEXY	179.01	Reimbursement - Education & Travel
158089	9/13/2018	STEPHANIE WELSH	24.00	Reimbursement - Education & Travel
158093	9/13/2018	TIFFANY MARSHALL	437.46	Reimbursement - Education & Travel
158092	9/13/2018	TIFFANY URANKER	429.43	Reimbursement - Education & Travel
158110	9/19/2018	AMY CHAVEZ	27.70	Reimbursement - Education & Travel
158263	9/26/2018	CATHY BRITT	193.71	Reimbursement - Education & Travel
158135	9/19/2018	COREY WORDEN	1,899.93	Reimbursement - Education & Travel
158279	9/26/2018	DESERIEE PADILLA	219.61	Reimbursement - Education & Travel
158228	9/19/2018	DR. WALLACE CURRY	207.20	Reimbursement - Education & Travel
158290	9/26/2018	GINA ELKINS	146.88	Reimbursement - Education & Travel
158160	9/19/2018	JIM HICKOK	184.58	Reimbursement - Education & Travel
158164	9/19/2018	KARISSA CORLEY	21.93	Reimbursement - Education & Travel
158298	9/26/2018	KRISTY NIELSON	371.57	Reimbursement - Education & Travel
158170	9/19/2018	LISABETH CLANTON	473.44	Reimbursement - Education & Travel
158186	9/19/2018	NATALIE HARRISON	30.60	Reimbursement - Education & Travel
158189	9/19/2018	NICOLE HALSTEAD	422.34	Reimbursement - Education & Travel
158315	9/26/2018	PHILLIP FLAKE	73.44	Reimbursement - Education & Travel

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
GENERAL FUND DISBURSEMENTS
09/30/18

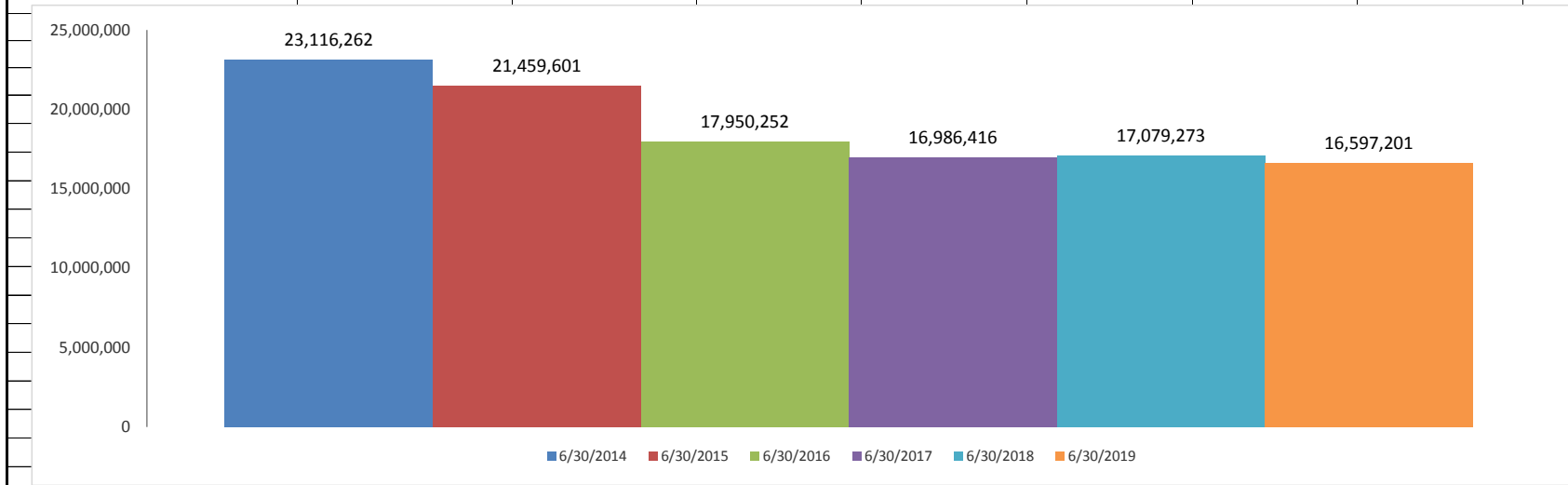
158201	9/19/2018	ROBIN SNOWBERGER	19.55	Reimbursement - Education & Travel
158217	9/19/2018	TAMMIE HENDERSON	38.25	Reimbursement - Education & Travel
158168	9/19/2018	YOUR HOSPITALIST TEAM	1,997.60	Reimbursement - Education & Travel
158090	9/13/2018	TAMI LOVE	37.93	Reimbursement - Education & Travel
158300	9/26/2018	LESLIE TAYLOR	997.30	Reimbursement - Food
158210	9/19/2018	STEPHANIE WELSH	24.00	Reimbursement - Food
158086	9/13/2018	RUTHANN WOLFE	69.92	Reimbursement - Office Supplies
158076	9/13/2018	CINDY NELSON	25.77	Reimbursement - Supplies
158087	9/13/2018	SAISHA MONTOYA	41.92	Reimbursement - Supplies
158096	9/13/2018	VONNIE ROCKEY	44.00	Reimbursement - Uniforms
158335	9/26/2018	TRENTON MCKENZIE	150.00	Reimbursement - Uniforms
W/T	9/26/2018	HUNTINGTON BANK	10,000.00	Settlement
157970	9/6/2018	GOLDEN HOUR SENIOR CENTER, INC.	1,000.00	Sponsorship
158072	9/6/2018	ROCK SPRINGS HIGH SCHOOL	500.00	Sponsorship
158028	9/6/2018	UINTA COUTNY SCHOOL DISTRICT #4	400.00	Sponsorship
158034	9/6/2018	YWCA OF SWEETWATER COUNTY	500.00	Sponsorship
158088	9/13/2018	SPECIAL OLYMPICS - WYOMING	500.00	Sponsorship
158332	9/26/2018	FARSON/EDEN HIGH SCHOOL	100.00	Sponsorship
157994	9/6/2018	MOBILE INSTRUMENT SERVICE	766.88	Surgery Equipment
158183	9/19/2018	MOBILE INSTRUMENT SERVICE	1,281.26	Surgery Equipment
158308	9/26/2018	MOBILE INSTRUMENT SERVICE	292.94	Surgery Equipment
158274	9/26/2018	CR BARD, INC	376.68	Surgery Supplies
157934	9/6/2018	ALI MED INC	101.80	Surgery Supplies
157960	9/6/2018	CONMED LINVATEC	420.00	Surgery Supplies
158013	9/6/2018	SMITH & NEPHEW ENDOSCOPY INC	8,506.78	Surgery Supplies
158016	9/6/2018	STRYKER ENDOSCOPY	1,059.95	Surgery Supplies
158021	9/6/2018	SYNTHES LTD	5,744.64	Surgery Supplies
158108	9/19/2018	ALI MED INC	196.10	Surgery Supplies
158253	9/26/2018	ALI MED INC	406.98	Surgery Supplies
158136	9/19/2018	COVIDIEN SALES LLC, DBA GIVEN IMAGING	1,823.44	Surgery Supplies
158272	9/26/2018	COVIDIEN SALES LLC, DBA GIVEN IMAGING	250.00	Surgery Supplies
158137	9/19/2018	CR BARD INC	327.92	Surgery Supplies
158167	9/19/2018	KEY SURGICAL INC	330.00	Surgery Supplies
158212	9/19/2018	STRYKER ENDOSCOPY	2,356.20	Surgery Supplies
158329	9/26/2018	STRYKER ENDOSCOPY	2,402.20	Surgery Supplies
158215	9/19/2018	SYNTHES LTD	1,320.00	Surgery Supplies
158333	9/26/2018	SYNTHES LTD	1,214.40	Surgery Supplies
158114	9/19/2018	ARMSTRONG MEDICAL INDUSTRIES	26.00	Surgery Supplies
EFT000000004102	9/6/2018	COOPER SURGICAL	176.00	Surgery Supplies
EFT000000004147	9/19/2018	ZIMMER	80.00	Surgery Supplies
EFT000000004157	9/27/2018	COOPER SURGICAL	60.00	Surgery Supplies
158194	9/19/2018	PROFESSIONAL RESEARCH CONSULTANTS	11,959.00	Surveys
158130	9/19/2018	CSG, LLC	26.29	Transcription Services
EFT000000004107	9/6/2018	KEYSTROKE TRANSCRIPTION SERVICE, INC.	1,395.47	Transcription Services

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
 GENERAL FUND DISBURSEMENTS
 09/30/18

EFT00000004136	9/19/2018	KEYSTROKE TRANSCRIPTION SERVICE, INC.	697.66	Transcription Services
157954	9/6/2018	CHOTA OUTFITTERS, LLC	141.90	Uniforms
158198	9/19/2018	QUARTERMASTER	366.75	Uniforms
157940	9/6/2018	AT&T	4,790.73	Utilities
158007	9/6/2018	CENTURY LINK	2,120.00	Utilities
158010	9/6/2018	ROCK SPRINGS MUNICIPAL UTILITY	13,191.33	Utilities
158109	9/19/2018	ALL WEST COMMUNICATIONS	3,918.44	Utilities
158116	9/19/2018	AT&T	49.03	Utilities
158117	9/19/2018	AT&T	82.61	Utilities
158199	9/19/2018	CENTURY LINK	3,417.81	Utilities
158282	9/26/2018	DISH NETWORK LLC	60.47	Utilities
158317	9/26/2018	DOMINION ENERGY WYOMING	14,700.14	Utilities
158203	9/19/2018	ROCKY MOUNTAIN POWER	47,241.44	Utilities
158344	9/26/2018	WHITE MOUNTAIN WATER & SEWER DISTRICT	57.50	Utilities
158001	9/6/2018	OVID TECHNOLOGIES, INC	14,918.00	Virtual Library
158287	9/26/2018	FIBERTECH	3,154.00	Window Cleaning
			5,728,340.38	

**MEMORIAL HOSPITAL OF SWEETWATER COUNTY
OPEN BID INVESTMENT SUMMARY REPORT
09/30/18**

ACCOUNT	FINANCIAL INST	INTEREST RATE	6/30/2014	6/30/2015	6/30/2016	6/30/2017	6/30/2018	6/30/2019
			GENERAL	BANK OF WEST	0.300%	8,710,751	5,295,564	4,330,411
RESERVE	BANK OF WEST	0.300%	1,300,000	1,300,000	1,300,000	1,300,000	1,300,000	1,300,000
GENERAL	BANK OF WEST	1.000%		2,460,272	2,983,016	2,964,992	2,474,121	2,480,927
CAPITAL DEVELOPMENT	KEYBANK	1.620%	13,001,178	12,299,119	9,231,852	8,253,433	8,303,935	7,804,410
E. BOICE	WYOSTAR	1.702%	39	39	39	40	40	40
LIFELINE	WYOSTAR	1.702%	104,294	104,607	104,934	105,575	106,849	107,311
TOTAL			23,116,262	21,459,601	17,950,252	16,986,416	17,079,273	16,597,201



INFORMATION:								
CURRENT INVESTMENT BALANCE:		\$ 16,597,201.01						
GENERAL FUND BALANCE AS OF 09/30/18		2,645,440						
REPRESENTING DAYS OF CASH ON HAND		12.60						
RECOMMENDATION:								
Recommendations on attached sheet								

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

Amended Statement of Investment Policy

1.0 GENERAL:

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

2.0 SCOPE:

This investment policy applies to all activities of Memorial Hospital of Sweetwater County with regard to investing surplus public assets held in the various hospital restricted and unrestricted funds.

3.0 PRUDENCE:

Investments shall be made with judgment and care—under circumstances then prevailing—which persons of prudence, discretion and intelligence exercise in the management of their own affairs, for investment, considering the probable safety of their capital as well as the probable income to be derived.

The standard of prudence to be used by investment officials shall be the "prudent person" standard and shall be applied in the context of managing an overall portfolio. Investment officers acting in accordance with written procedures and the investment policy and exercising due diligence shall be relieved of personal responsibility for an individual security's credit risk or market price changes, provided deviations from expectations are reported in a timely fashion and appropriate action is taken to control adverse developments.

4.0 OBJECTIVES:

The primary objectives, in priority order, of Memorial Hospital of Sweetwater County investment action shall be:

4.1 Safety:

Safety of principal is the foremost objective of the investment program. Investments of Memorial Hospital of Sweetwater County shall be undertaken in

a manner that seeks to ensure the preservation of capital in the overall portfolio. To attain this objective, diversification is required in order that potential losses on individual securities do not exceed the income generated from the remainder of the portfolio.

4.2 Liquidity:

Memorial Hospital of Sweetwater County's investment portfolio will remain sufficiently liquid to enable the Hospital to meet all operating requirements which might be reasonably anticipated.

4.3 Return on Investment:

The Hospital's investment portfolio shall be designed with the objective of attaining a reasonable rate of return throughout budgetary and economic cycles, taking into account the Hospital's investment risk constraints and the cash flow characteristics of the portfolio.

5.0 **MANAGEMENT RESPONSIBILITY:**

Management responsibility for the investment program is hereby delegated to the Assistant Executive Director - Finance, who may establish written procedures for the operation of the investment program consistent with this investment policy. Procedures should include reference to: safekeeping, Public Securities Association (PSA), repurchase agreements, wire transfer agreements, collateral/depository agreements, banking service contracts, and approval by the Board of Trustees of Memorial Hospital of Sweetwater County. Such procedures shall include explicit delegation of authority to persons responsible for investment transactions. No person may engage in an investment transaction except as provided under the terms of this policy and the procedures established by the Assistant Executive Director - Finance and approved by the Board of Trustees. The Assistant Executive Director - Finance shall be responsible for all transactions undertaken and shall establish a system of controls to regulate investing activities.

6.0 **INVESTMENT COMMITTEE:**

In order to facilitate direct communication to the Board of Trustees, the Investment Committee shall be established. The committee shall be composed of:

- 1) Two Board members
- 2) Executive Director
- 3) Assistant Executive Director - Finance
- 4) Assistant Executive Director

The purpose of the committee as it relates to the investing program shall be:

- 1) The periodic review of and report on the Hospital's investment activities.
- 2) The periodic review of the Hospital's investment policy.
- 3) Review and comment on any amendments of the Hospital's investment policy as proposed by the Assistant Executive Director - Finance.

7.0 ETHICS AND CONFLICTS OF INTEREST:

Officers and employees involved in the investment process shall refrain from personal business activity that could conflict with proper execution of the investment program, or which could impair their ability to make impartial investment decisions.

Members of the Board of Trustees, Investment Committee and investment officials employed by the Hospital shall disclose to the Executive Director any material personal financial interests in financial institutions that conduct business within the jurisdictions, and they shall further disclose any large personal financial/investment positions that could be related to the performance of the Hospital's portfolio.

Employees and officers shall subordinate their personal investment transactions to those of the Hospital, particularly with regard to the time of purchases and sales.

8.0 AUTHORIZED FINANCIAL DEALERS AND INSTITUTIONS:

The Assistant Executive Director - Finance will maintain a list of financial institutions authorized to provide investment services. No public deposit shall be made except in a qualified public depository as established by Wyoming Statutes 9-4-817 through 9-4-828.

All financial institutions and broker/dealers who desire to become qualified bidders for investment transactions must supply the Hospital's Assistant Executive Director - Finance with a set of current audited financial statements and proof that they otherwise qualify pursuant to Wyoming Statutes to provide investment services.

An annual review of the financial condition and registration of qualified bidders will be conducted by the Assistant Executive Director - Finance.

9.0 AUTHORIZED AND SUITABLE INVESTMENTS:

Memorial Hospital of Sweetwater County is authorized by statute to invest in those types of securities allowed in Wyoming Statutes 9-1-416 and 9-4-831. For purposes of this investment policy, the Board of Trustees of Memorial Hospital of Sweetwater County elects to authorize the following type of investments until such time as this policy may be amended:

- 1) U.S. Government Treasury Bills,
- 2) U.S. Treasury Bonds
- 3) U.S. Treasury Notes
- 4) Government Agency Securities
- 5) Certificates of Deposit
- 6) Money Market Accounts
- 7) WyoSTAR Government Investment Pool

It is understood that the above-referenced statutes allow several additional investment opportunities, including obligations and instruments fully guaranteed by the full faith and credit of the United States Treasury and certain diversified money market funds, as defined in Wyoming Statute 9-4-831(g). It is the intention of the Board of Trustees to monitor these additional investment opportunities, and if their performance exceeds the above-listed investments to consider the addition of such investments to the list of authorized investments at future Board of Trustee meetings.

Investments in the local government investment pool, WyoSTAR, will be made via a wire transfer which will be approved by a member of the governing body and the Assistant Executive Director - Finance, and reported to the governing body with the monthly financial statements.

10.0 COLLATERALIZATION:

Collateralization will be required on investments with financial institutions when public monies on deposit (regular or time) exceed the amount insured by the Federal Deposit Insurance Corporation. Collateral will be limited to the list of securities as described in Wyoming Statute 9-4-821.

The market value of deposits will include accrued interest.

The adequacy of the pledged collateral will be measured by the market or par value of the collateral, whichever is the lesser.

11.0 SAFEKEEPING AND CUSTODY:

Pledged collateral that are instruments of the United States Government and its agencies will be safe kept by the Federal Reserve Bank of Kansas City - Denver Branch. Other listed collateral that cannot be held by the Federal Reserve shall be held by a non-affiliated, independent third party with whom the Hospital has a current custodial agreement.

A clearly marked evidence of ownership (safekeeping receipt) must be supplied to the Hospital and retained.

The right of collateral substitution upon prior notification and acceptance by the Hospital is granted.

All security transactions, including collateral for repurchase agreements, if and when allowed, entered into by the Hospital shall be conducted on a delivery-versus-payment (DVP) basis.

12.0 DIVERSIFICATION:

The Hospital will attempt to diversify its instruments by security type and institution. To provide assurance that the Hospital will be able to continue financial operations without interruption and dependent upon interest rates, satisfaction with services, and practicality, the Hospital will generally attempt to utilize at least two financial institutions as depositories.

13.0 MAXIMUM MATURITIES:

To the extent possible, the Hospital will attempt to match its investments with anticipated cash flow requirements. Unless matched to a specific cash flow, the Hospital will not directly invest in securities maturing more than ten (10) years from the date of purchase.

14.0 INTERNAL CONTROL:

The Assistant Executive Director - Finance shall establish a process of annual independent review of the investment function by an external auditor. This review will provide internal control by assuring compliance with policies and procedures.

15.0 MARKET YIELD:

The Hospital's investment strategy is active. When acquiring, investing, reinvesting, exchanging, retaining, selling and managing property for the benefit of the Hospital, any person providing investment advice or undertaking investment services shall exercise judgment and care under the circumstances then prevailing, which persons of prudence, discretion and intelligence exercise in the management of their own affairs, in regard to investment, using care in the management of all funds, considering income and safety within the provisions of the law and this policy.

Given this strategy, the basis used by the Assistant Executive Director - Finance to determine whether reasonable yields are being achieved is if the annual rate of return on all average cash and investment balances is within 100 basis points below the lower of:

- 1) The average one (1) year certificate of deposit rate of local depositories;
or

- 2) The average annual earning rate of the Lehman Bros. composite index of U.S. Treasury Securities amount as published in the *Wall Street Journal*.

16.0 REPORTING:

The Assistant Executive Director - Finance is charged with the responsibility of including a monthly investment report on investment activity to the Board of Trustees.

17.0 INVESTMENT POLICY ADOPTION:

The Hospital's *Amended Statement of Investment Policy* shall be adopted by resolution of the Board of Trustees. The policy shall be reviewed on an annual basis by the Investment Committee and any modifications made thereto must be approved by the Board of Trustees.

Original
9/96

**A RESOLUTION OF THE BOARD OF TRUSTEES
OF MEMORIAL HOSPITAL OF SWEETWATER COUNTY
ADOPTING AN
AMENDED STATEMENT OF INVESTMENT POLICY**


WHEREAS, the Board of Trustees of Memorial Hospital of Sweetwater County wants to safely earn the highest prudent investment income so as to reduce pressure for increased taxes, fees, and service charges; and,

WHEREAS, Chapter 112, Session Laws of 1996, created Wyoming Statute 9-4-831(h) which requires every political subdivision of the state to adopt a "Statement of Investment Policy."

NOW, THEREFORE, BE IT RESOLVED that the Board of Trustees of Memorial Hospital of Sweetwater County, meeting this 30th day of September, 1996, does hereby adopt the attached "Amended Statement of Investment Policy for Memorial Hospital of Sweetwater County" and declares it in effect immediately.


Chairman

ATTEST:


Secretary



Approved: N/A
 Review Due: N/A
 Policy Area: Fiscal Services
 Reg. Standard:

Investment Policy

Statement of Purpose

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

Text

I. Scope

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

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

- a. **Safety** – Safety of principal is the foremost objective of the investment program. Investments shall be undertaken in a manner that seeks to ensure the preservation of capital in the overall portfolio. The objective will be to mitigate credit risk and interest rate risk.
 - i. **Credit Risk** – Memorial Hospital of Sweetwater County will minimize credit risk, which is the risk of loss due to the failure of the security issuer or backer by:
 - 1. Pre-qualifying the financial institutions, broker/dealers, intermediaries, and advisers with which MHSC will do business in accordance with Section IV
 - 2. Diversifying the investment portfolio so that the impact of potential losses from any one type of security or from any one individual issuer will be minimized
 - ii. **Interest Rate Risk** – Memorial Hospital of Sweetwater County will minimize interest rate risk, which is the risk that the market value of securities in the portfolio will fall due to changes in market interest rates by:
 - 1. Structuring the investment portfolio so that securities mature to meet cash requirements for ongoing operations, thereby minimizing the need to sell securities on the open market prior

to maturity

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

III. Standards of Care

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

Financial Officer, who shall act in accordance with established written procedures and internal controls for the operation of the investment program consistent with this investment policy. Such procedures shall include explicit delegation of authority to persons responsible for investment transactions.

- i. In order to facilitate direct communication to the Board of Trustees, the Finance and Audit Committee will be responsible for activities regarding the investment program including:
 1. The periodic review of and approval of Hospital's investment activities
 2. The periodic review of the Hospital's investment policy

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

- a. A list will be maintained of financial institutions and depositories authorized to provide investment services.
- b. No public deposit shall be made except in a qualified public depository as established by Wyoming Statutes 9-4-817 through 9-4-828.

V. **Suitable and Authorized Investments**

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

VI. **Safekeeping and Custody**

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

VII. **Investment Parameters**

- a. **Diversification** – The Hospital will attempt to diversify its investments by security type and institution. To provide assurance that the Hospital will be able to continue financial operations without interruption and dependent upon interest rates, satisfaction with services and practicality, the Hospital will generally attempt to utilize at least two financial institutions as depositories.
- b. **Maximum Maturities** - To the extent possible, the Chief Financial Officer shall attempt to match its investments with anticipated cash flow requirements. Unless matched to a specific cash flow, the Chief Financial Officer will not directly invest in securities maturing more that (5) years from the date

of purchase or in accordance with state statutes.

- c. **Competitive Bids** - To ensure that securities are purchased at competitive prices, the Chief Financial Officer must maintain open communication with multiple broker/dealers at all times.

VIII. Policy Considerations

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

IX. Approval of Investment Policy

- a. The investment policy shall be adopted by resolution of the Board of Trustees. The policy shall be reviewed on an annual basis by the Finance and Audit Committee and any modifications made thereto must be approved by the Board of Trustees.

References

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

Attachments:

No Attachments

Applicability

Memorial Hospital of Sweetwater County

Investment Plan – Bank of West funds

Liquidity – We are recommending we keep a balance relatively liquid that will cover a normal payroll and an average week of accounts payable disbursements. We recommend we move \$2,000,000 to a money market account with a higher interest rate.

Money Market funds – We are recommending we bid out remaining estimate of \$4,000,000 to qualified institutions under a CD ladder structure with terms ranging from 6 months to 5 years, see attached rate proposals.

Long term investments – We recommend moving estimated balance of \$2,500,000 of portable investments to MBS Securities current accounts. These funds are completely portable and can be moved from one broker to another without selling them. There would be no realized loss with the transfer. We can move this money without fees or penalties.

Investment Plan – Going forward

Long term investments – We recommend bidding out funds as they come due. We will bring bid proposals, with our recommendation, to the Finance and Audit Committee for approval.

INVESTMENT SUMMARY REPORT

Investment Date

11/8/2018

	LIQUID	6 MONTH	1 YEAR	18 MONTHS	2 YEAR	3 YEAR	4 YEAR	5 YEAR
APPROVED DEPOSITORY APPLICANTS FOR THE F.Y.E. 6/30/19	Money Market or Deposit Account	180 DAYS TO MATURITY DATE	365 DAYS TO MATURITY DATE	545 DAYS TO MATURITY DATE	730 DAYS TO MATURITY DATE	1,095 DAYS TO MATURITY DATE	1,460 DAYS TO MATURITY DATE	1,825 DAYS TO MATURITY DATE
MATURITY DATE		5/7/2019	11/8/2019	5/6/2020	11/7/2020	11/7/2021	11/7/2022	11/7/2023

TOTAL AMOUNT AVAILABLE	2,000,000	500,000	500,000		1,000,000	1,000,000	1,000,000	
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RECOMMENDATIONS ARE SHADED

MBS SECURITIES		500,000 2.30%	500,000 2.65%	2.80%	1,000,000 3.05%	1,000,000 3.20%	1,000,000 3.30%	3.50%
US BANK	1.05%	2.06%	2.22%	2.43%	2.51%	2.51%	2.51%	2.61%
WELLS FARGO		2.20%	2.55%	2.60%	2.85%	3.05%	3.25%	
UINTA BANK	1,000,000 1.81%		2.02%	2.12%	2.32%	2.52%		
COMMERCE BANK additional .25% with active checking acco	1.00%	1.26%	1.76%	1.86%	2.01%	2.26%	2.51%	2.76%
ROCKY MOUNTAIN BANK	0.50%	0.30%	0.85%	1.29%	1.45%	2.00%	2.20%	2.34%
WYO-STAR	1,000,000 1.71%							

**Memorial Hospital of Sweetwater County
County Voucher Summary
as of month ending September 30, 2018**

Vouchers Submitted by MHSC at agreed discounted rate	
July 2018	\$25,263.47
August 2018	\$19,080.15
September 2018	\$16,565.76
County Requested Total Vouchers Submitted as of July 31, 2018	\$60,909.38
Total Vouchers Submitted FY 2019	\$60,909.38
Less: Total Approved by County and Received by MHSC FY 2019	\$60,909.38
Total Vouchers Pending Approval by County	\$0.00

FY19 Title 25 Fund Budget from Sweetwater County	\$338,580.00
Funds Received From Sweetwater County	\$60,909.38
FY19 Title 25 Fund Budget Remaining	\$277,670.62
Total Budgeted Vouchers Pending Submittal to County	\$0.00

FY18 Maintenance Fund Budget from Sweetwater County	\$1,063,752.00
County Maintenance FY19 - July	\$13,120.28
County Maintenance FY19 - August	\$48,851.71
County Maintenance FY19 - September	\$21,866.14
	\$83,838.13
FY18 Maintenance Fund Budget Remaining	\$979,913.87

memo

To: Finance & Audit Committee
From: Tami Love, CFO
Date: August 29, 2018
RE: Restricted Fund accounts

We currently have four bank account funds that were created years ago from restricted donations to the Hospital. We also have an account with the donated funds from the auxiliary when they closed their Lifeline program. The accounts are listed below with the current balances as of 06/30/18:

Heart Research fund	\$659.94
Dialysis fund	\$23,965.04
Oncology fund	\$12,324.10
Archie Piirainen fund	\$33,147.21
Lifeline fund	<u>\$42,902.31</u>
Total funds	\$112,998.60

I would like to recommend that we donate these funds to the MHSC Foundation. They would be given as restricted donations to the Foundation fund that most closely matches the specific purpose of the original donation.



Memorial Hospital of Sweetwater County Board of Trustees

Building and Grounds Committee Meeting

Tuesday - October 16, 2018

3:30 PM

Classrooms 1 & 2

**Memorial Hospital of Sweetwater County
Building & Grounds Committee
Classrooms 1 & 2
3:30 PM**

Tuesday – October 16, 2018

Board Committee Members

**Ed Tardoni
Barbara Sowada**

Staff Committee Members

**Irene Richardson
Jim Horan
Tami Love**

Guests

**Gerry Johnson – *Facilities*
Stevie Nosich – *Facilities*
Leslie Taylor - *Clinic*
Britt Morgan – *Plan One Architects*
John Kolb – *Board of Sweetwater County Commissioners***

Agenda

- 1. Approve September 18, 2018 Minutes**
- 2. Metrics Report**
- 3. Project(s) Review**
- 4. Old Business**
- 5. New Business**
- 6. Meeting Schedule**

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
Building & Grounds Committee Meeting
September 18, 2018
3:30 PM

Trustee Committee Members Present: Mr. Ed Tardoni

Trustee Committee Member Excused: Dr. Barbara Sowada

Staff Committee Members Present: Mr. Jim Horan
Ms. Tami Love
Ms. Irene Richardson

Guests: Mr. Gerry Johnston
Ms. Leslie Taylor
Mr. John Kolb, *County Commissioner Liaison*

Call Meeting to Order

Mr. Tardoni called the meeting to order. He said he wanted to talk about maintenance metrics and asked for the current number of open work orders in the system. Mr. Horan said he would like to better-understand the wishes of the Board. Mr. Tardoni said he reminded Ms. Love there were three members of the Board interested in seeing the numbers. He said the numbers aren't important; what's important is the trend. Ms. Richardson said we want to give Mr. Tardoni everything he wants and needs. She said we want to make sure we are providing information in a meaningful way. She added we want to make sure the Board knows management is looking at these things on a regular basis. She asked if the Board wants to see the trends with additional information. Mr. Tardoni said they do not, he just wants the numbers. Mr. Tardoni said the four items he wants to see reported and in the minutes each month are:

- 1) Current number of open work orders in the system
- 2) Number over 30 days. (No need to break out PM orders.)
- 3) Current overtime load higher or lower than typical
- 4) Will we be near budget for the month

Following a lengthy discussion, Ms. Love said Mr. Horan will present the numbers as requested at the next meeting. Mr. Horan said we have an updated system and do not have the means to provide the numbers currently but we will by the next meeting. Mr. Horan said his answers to numbers 3 and 4 at this time are:

- 3) His opinion is overtime will be higher.
- 4) His opinion is he feels we will be near budget in Facilities.

Mr. Tardoni said staff have a very valuable resource with the knowledge of Trustees. He provided his cell number and invited anyone to call him directly if there are concerns.

Projects Review

Mr. Horan distributed a revised projects list.

Old Business

None.

New Business

Mr. Kolb asked about the possibility of the County obtaining a discount on hospital charges for county employees.

Mr. Tardoni referenced the Bank of the West issue. Mr. Kolb shared his views. Mr. Tardoni asked Mr. Kolb for copies of recent banking investment options obtained by the County. Mr. Kolb asked Mr. Tardoni to contact Mr. Robb Slaughter, County Treasurer.

The meeting adjourned at 6:16 PM.

Next Meeting

The next meeting is scheduled October 16 at 3:30 PM.

Submitted by Cindy Nelson.

**FY19 PRIORITIZED CAPITAL LIST
800- FACILITIES SUPPORT SERVICES**

MHSC Facilities Risk Assessment Tool			EXPLANATION OF TERMS:	
FACTOR	RANGE OF VALUES (weighted)	VALUE		
1. Compliance (Life Safety)	0= low need; 5= highest need (X2)		<ul style="list-style-type: none"> • Factor #1--Compliance (Life Safety)—Need based on accreditation or on threats to the life safety elements as defined by code. 0= low need; 5 = highest need, failure results in severe threat to life and/or loss of accreditation. <u>Multiply assessment value by 2</u> • Factor #2--Probability of failure—Need based on likelihood of failure. 0 = no risk; 5 = failure is imminent. • Factor #3--Impact of failure—Need based on the result of failure to business and people. 0 = no risk, inconvenience; 5 = catastrophic, failure results in substantial loss to people or business function. <u>Multiply assessment value by 2.</u> • Factor #4--Timeliness—Need based on the expediency of performing this project/work. 0= lowest need; 5= immediate need, postponing results in substantial loss or difficulty on one or more levels. • Factor #5--Political Need—Need communicated by Senior Leadership. 0= no political imperative; 5= vitally urgent. <u>Multiply assessment value by 3.</u> 	
2. Probability of Failure	0= low risk; 5= failure is imminent			
3. Human Property or Business impact of failure	0= low risk; 5= catastrophic (X2)			
4. Timeliness	0= low need; 5= immediate need			
5. Political need	0= none; 5= urgent need (X3)			
TOTAL				

1	Build lean-to storage shed onto our Carpenter shop building	We have several attachments for maintenance vehicles (i.e.. Sweepers, snow plows, salt spreader, forklift attachments, etc.) that are stored outside in the "elements". This request is for the materials to build a lean-to attachment to our carpenter shop building, in order to store these expensive attachments under cover.	<ul style="list-style-type: none"> •Code compliance/ hazard ◆Protect equipment. •Increase equipment life-span. •Increased storage area for other uses. •Eliminate the eye-sore and clutter of all the attachments ◆Rating: 1... 5X2 = 10 2... 5 3... 2X2 = 4 4... 5 5... 0 Total = 28 	\$ 50,000
2	Central Plant Upgrade	Originally, this upgrade was to be done in conjunction with the ASC expansion. The Central Plant had an initial upgrade along with the MOB expansion that enabled us to use the hospital plant for essential heating and cooling. At that time, a new chiller was installed and a "flat-plate" heat exchanger, too, to capture cooler outside temperatures for "free" cooling. However, the two (2) existing chillers and the two (2) cooling towers are very old and are in need of replacement. The entire Central plant system (except for the portion installed with the MOB expansion) will need to be upgraded with new pumps, piping, etc. The existing system is becoming quite precarious and this upgrade needs to be done very, very soon. Both this project and the next, rate very high in priority. Failure of this request (1A) is systemic and would affect the entire facility. The failure of the next prioritized request (1B) would affect sections of the facility. It's hard to know which will fail first.	<ul style="list-style-type: none"> •Reduce utility costs (huge energy savings) •Prevent cooling failure for essential systems and areas. •Cooling efficiency •Accurate comfort control •Greatly reduce maintenance costs ◆Rating: 1... 2X2 = 4 2... 4 3... 5x2 = 10 4... 4 5... 1X3 = 3 Total = 25 	\$ 1,900,000

**FY19 PRIORITIZED CAPITAL LIST
800- FACILITIES SUPPORT SERVICES**

3	Replace S1 HVAC unit including Laundry Upgrade	<p>REPLACE "S1": is almost 40 years old, inefficient and unable to properly regulate temp. It is sized inappropriately for the demand, given the evolving nature of health-care over the decades and the massive changes done during the 2008-10 renovation. This unit is fatigued, with improper/faulty controls. Its replacement is essential. Each year that goes by makes its failure more imminent.</p> <p>Laundry Upgrade:</p> <ul style="list-style-type: none"> • Lint issues to be resolved with a new lint collector with all new duct-work entering and exiting this collector. Also, re-duct room exhaust separating it from the dryer exhaust (present configuration is a code violation). • Installation of new dryer (purchased in 2012). • Re-pipe steam distribution lines into dryers and ironer to remedy condensate issues. • Install new controls for ironer to eliminate need for staff to manually turn steam valves (very dangerous). • Provide proper conditioned air for staff. • Create a clean linen storage room within the laundry area; with proper air pressurization differential. • Re-design proper separation between dirty/clean washing machine area. • Remove asbestos floor tiles and re-floor entire area. • Facelift the entire area (new paint, ceilings, etc.) 	<p>REPLACE "S1":</p> <ul style="list-style-type: none"> •Reduce utility costs •Prevent failure of essential systems and spaces. •Compliant air exchange rates •Proper freeze protection for units •Reduce filter replacement •Accurate comfort control •Greatly reduce maintenance costs <p>LAUNDRY UPGRADE:</p> <ul style="list-style-type: none"> •Provide code compliant lint collection and separation •Resolve the very dangerous practice of manipulating steam valves by staff •Enable installation of our new dryer •Resolve code issues regarding separation of clean linen •Provide adequate conditioned air for staff •Remove asbestos floor tiles •More efficient work space and work flow <p>◆Rating: 1... 4X2 = 8 2... 3 3... 4X2 = 8 4... 2 5... 1X3 = 3 Total = 24</p>	\$ 1,850,000
4	Basement level fire sprinkler replacement	Heads are nearing their end-of-life. Replacement will allow us to replace the ceiling.	<p>◆ Code compliant.</p> <p>◆ Allow us to replace ceiling system which is in terrible shape.</p> <p>◆ Improved appearance and access.</p> <p>◆Rating: 1... 4X2 = 8 2... 0 3... 4X2 = 8 4... 1 5... 1X3 = 3 Total = 20</p>	\$ 9,000
5	Basement level ceiling replacement	Ceilings in the facility are our smoke barrier. They need to be tight and in good shape.	<p>◆ Complinace with codes and TJC.</p> <p>◆ Appearance.</p> <p>◆Rating: 1... 4X2 = 8 2... 0 3... 4X2 = 8 4... 1 5... 1X3 = 3 Total = 20</p>	\$ 22,000
6	Replace De-aerator Tank in Powerhouse	A "de-aerator" tank is used in our steam generating system to scrub all the oxygen possible from make-up water supplied to our boilers. An important function to keep excess oxygen from the boiler water that could cause rusting and pitting of our boilers and steam piping system. Our existing de-aerator is the original from 1978. It is rusted and rotted inside and is failing to perform its function.	<p>◆ Keeps excess oxygen from our boilers that can cause rust and pitting.</p> <p>◆ Maximizes boiler efficiency... saves energy.</p> <p>◆ Extends the life of the boilers.</p> <p>◆Rating: 1... 2X2 = 4 2... 4 3... 4X2 = 8 4... 3 5... 0 Total = 19</p>	\$ 350,000

**FY19 PRIORITIZED CAPITAL LIST
800- FACILITIES SUPPORT SERVICES**

7	Replacement of S3	<p>"S" class units are 35 plus years old, inefficient and unable to properly regulate temps. They are sized inappropriately for the demand, given the evolving nature of health-care over the decades and the massive changes from the 2008 renovation. These units are fatigued, with improper/faulty controls. They supply conditioned air to the core of the original hospital and their replacement is essential. Each year that goes by makes their failure more imminent. S3 is running at 100% capacity and is barely providing sufficient room air exchanges as defined by code. Then ever these air exchange amounts fall-out of range, the OR suites cannot be used. The replacement of this unit is critical.</p>	<ul style="list-style-type: none"> •Reduce utility costs •Prevent failure of essential systems and spaces. •Compliant air exchange rates •Proper freeze protection for units •Reduce filter replacement •Accurate comfort control •Greatly reduce maintenance costs <p>◆Rating: 1... 3X2 = 6 2... 2 3... 3X2 = 6 4... 1 5... 1X3 = 3 Total = 18</p>	\$ 1,000,000
8	Resolve air-balancing issues in Lab/ Fiscal Services	<p>Since the 2008 renovation, air pressurization issues have persisted in the Lab/Fiscal areas of the hospital. Sometimes the pressurization issues are so severe that papers are sucked into the Fiscal area at the pay window and staff at the window need to wear gloves because of the wind-chill. In the lab, the pressurization can be so severe that corridor doors that are required by code to close and latch, do not. "ST&B Engineering" was enlisted to identify the issues and found several. Some were because of incomplete work from the renovation. Some were because of incomplete engineering. Some were from shoddy work. This request is to remedy the issues that cause this.</p>	<ul style="list-style-type: none"> •Code compliant air exchanges •Resolve code issues surrounding non-latching doors. •Resolve staff/customer discomfort. •Increase energy efficiency. •Decrease unoccupied load on HVAC systems. <p>◆Rating: 1... 3X2 = 6 2... 5 3...1X2 = 2 4... 2 5... 1X3 = 3 Total = 18</p>	\$ 198,000
9	Replacement of "S6"	<p>"S" class units are 35 plus years old, inefficient and unable to properly regulate temps. They are sized inappropriately for the demand, given the evolving nature of health-care over the decades and the massive changes from the 2008 renovation. These units are fatigued, with improper/faulty controls. They supply conditioned air to the core of the original hospital and their replacement is essential. Each year that goes by makes their failure more imminent. S6 is old and grossly inefficient, barely able to provide conditioned air to Medical Imaging, especially in the hottest months. Patients, staff and equipment suffer when this antique unit is taxed.</p>	<ul style="list-style-type: none"> •Reduce utility costs •Prevent failure of essential systems and spaces. •Compliant air exchange rates •Proper freeze protection for units •Reduce filter replacement •Accurate comfort control •Greatly reduce maintenance costs <p>◆Rating: 1... 1X2 = 2 2... 3 3... 4X2 = 8 4... 2X2 = 4 5.. 0 Total = 17</p>	\$ 1,100,000
10	Upgrade of "S2" HVAC unit	<p>Request to upgrade S2 air-handler that supplies air to our Kitchen/ Cafeteria area. This request takes the place of a complete replacement of that air-handler, originally proposed for \$540K in a prior capital request, and postpones that replacement farther into the future. The upgrades here proposed will allow us to modulate the entire system which currently runs constantly 24/7, to run at a very slow rate during unoccupied times.</p>	<ul style="list-style-type: none"> •Great energy savings •Extended life of a unit currently slated for replacement. •Integration with our Building Automation System (BAS) giving excellent control over all aspects of the system. •This expense will be utilized on any future replacement unit and not be forfeited. <p>◆Rating: 1...1X2 = 2 2...2 3... 4X2 = 8 4... 5 5... 0 Total = 17</p>	\$ 21,000

**FY19 PRIORITIZED CAPITAL LIST
800- FACILITIES SUPPORT SERVICES**

11	Resolve domestic hot water issues	It was discovered that during one of the renovations the hot water (HW) recirculation line for the B-Level and possible affecting areas on the first floor, was abandoned due to an error on the part of the architect/engineers.	<ul style="list-style-type: none"> •This has a negative effect on the ability for the hand sinks to supply warm water in a timely manner. •This may also run the risk of legionella due to stagnant water. ◆Rating: 1... 3X2 = 6 2... 2 3... 4X2 = 8 4... 1 5... 0 Total = 17	\$ 24,500
12	Replacement roof for ICU	This is an original roof that has had several leak issues of late. This will be the last of the original roofs to replace. The original ballast will be removed, new insulation installed and new EPDM direct-glued roof membrane installed. This proposal also includes a safety railing around a scary, 2-story deep window well on that roof that is most hazardous to those who must access roof-mounted equipment.	<ul style="list-style-type: none"> • Eliminate leaks/ replace aged roof • Safety railing around dangerous window-well. ◆Rating: 1... 1X2 = 2 2... 2 3... 5X2 = 10 4... 1X2 = 2 5... 0 Total = 16	\$ 110,000
13	Roof Fall Protection System	The current roof has several code issues regarding fall protection for staff. OSHA is quite specific about these fall issues and MHSC needs to provide adequate protection for them. This request will enable us to purchase the necessary protection devices and equipment to provide for proper fall protection for staff, as defined by OSHA regulations.	<ul style="list-style-type: none"> •Safety for workers •This system meets OSHA requirements. •Cost avoidance - recovery from OSHA fines, Workman Comp claims and possible civil suit. ◆Rating: 1... 5X2 = 10 2... 1 3... 2X2 = 4 4... 1 5... 0 Total = 16	\$ 71,000
14	New Underground Storage Tank (UST) for additional emergency supplies of diesel fuel	Existing UST has the capacity to supply either the Emergency Diesel Generator (EDG) OR the boilers for 96 hours, but not both.	<ul style="list-style-type: none"> •TJC standards stipulate the ability to run 96 hours independently. If we lost both RMP and Questar we would not have enough diesel fuel to meet this obligation. •The current system has a single point of failure, having only one single transfer point to pump fuel from the UST to EDGs or boilers. •Will also support the long range plan of having the whole hospital electrical load on the Emergency Branch, supplied by EDGs during RMP failure. ◆Rating: 1... 2X2 = 4 2... 1 3... 5X2 = 10 4... 1 5... 0 Total = 16	\$ 400,000
15	Engineering for Generator Building fire suppression	Fire suppression for this building has been part of "FM Global's" recommendations since 2011 ("FM Global" is our insurance provider).	<ul style="list-style-type: none"> •This engineering will assure full compliance with all codes and may even mitigate the final cost of any needed suppression. ◆Rating: 1... 3X2 = 6 2... 1 3... 3X2 = 6 4... 2 5... 0 Total = 15	\$ 12,000

**FY19 PRIORITIZED CAPITAL LIST
800- FACILITIES SUPPORT SERVICES**

16	Ambulance Bay Drains	<p>Our ambulance bays do not have proper floor-drains to capture sand, oil and grease. Since 2012 when this issue came to light, we have mitigated it with signage informing ambulance personnel that our bays are not for cleaning purposes... not for hosing-off their vehicles. This caution eliminates contamination from this source but not from accidental leakage. This is a substantial code issue that was neglected with our 2008-10 renovation. The city requires waste water testing quarterly in order to assure that there are no improper levels of toxins and chemicals discharged. This Ambulance bay issue could be a potentially large problem, resulting in DEQ or EPA sanctions and fines. This issue would best be resolved with the proposed ASC expansion, due to the lack of plumbing slope in existing waste-lines. The solution would require trenching through the ambulance bay floor and installing a pit outside of the ED. Then trenching around the building and installation of new piping to tie into the waste line outside of the ED at a convenient manhole. The cost to do this is substantial and the estimated cost in this Capital Request is contingent on the ASC. This estimate is NOT for a complete stand-alone project. Even though this is a potential issue, we may still want to wait for the ASC project unless we become sure it is abandoned. I can then get a complete proposal. With the trenching around a finished building with concrete walkways and paved areas, the stand-alone cost could be monumental.</p>	<ul style="list-style-type: none"> •Eliminates the risk of EPA fines •Eliminates the risk with the local sewer district ◆Rating: 1... 4X2 = 8 2... 3 3... 1 4... 1 5... 0 Total = 13 	\$ 187,000
17	Resolve steam condensate issues	<p>With our the boiler lead/lag project completed, we now need to resolve the steam condensate collection issues that have plagued us. The 2008 renovation was such an improvement for this facility. But some chronic issues were not addressed. One of these is the proper collection and return of steam condensate to the boilers. Condensate is almost like liquid gold. It is pure water with no hardness, no chemicals... nothing to contaminate or scale boilers. It's collection and return to the system saves so much money. Less city make-up water is needed; less chemical treatment of raw water is needed; less threat of corrosion and scaling within the boiler and throughout the entire steam distribution system. We now have the expertise in-house to perform this work. This request is for the parts and pieces.</p>	<ul style="list-style-type: none"> •Save water dollars. •Save chemical treatment dollars. •Boiler longevity. •Energy savings. ◆Rating: 1... 1X2 = 2 2... 2 3... 2X2 = 4 4... 3 5... 0 Total = 11 	\$ 23,000
18	"Ventrac 3400Y" lawn Tractor	<p>Our current lawn mower is in sad shape. This request would allow us to purchase a substantial lawn tractor that could also be fitted with snow removal equipment to make it a true 4-season tool.</p>	<ul style="list-style-type: none"> •Efficiency •Replace faulty equipment •Improve usefulness of tool •Improve productivity ◆Rating: 1... 1X2 = 2 2... 2 3... 1X2 = 2 4... 2 5... 1X3 = 3 Total = 11 	\$ 48,000
19	Remove asbestos (ACM) flooring on the B-Level	<p>Tile in this area is roughly 35+ years old. Due to the freight and materials handling performed on the B Level, this tile is occasionally damaged creating a risk generating friable ACM.</p>	<ul style="list-style-type: none"> •Portions of the basement have been replaced on an as needed basis. This would eliminate all ACM on the B - Level. •With the additional foot traffic and materials transport through this hallway due to the MOB, this area is in sore need of upgrade. ◆Rating: 1... 1X2 = 2 2... 1 3... 2X2 = 4 4... 1 5... 1X3 = 3 Total = 11 	\$ 70,000
20	Dust collection system for shop	<p>All carpenter shops are notorious for dust issues. This vacuum system will collect dust from each of the wood-working tools to a central bagging unit.</p>	<ul style="list-style-type: none"> ◆ Safety ◆ Ease of working. ◆ Convenience. ◆Rating: 1... 4X2 = 8 2... 2 3... 1 4... 0 5... 0 Total = 11 	\$ 4,200

**FY19 PRIORITIZED CAPITAL LIST
800- FACILITIES SUPPORT SERVICES**

21	Engineering for "Window-wells"	The "window-wells" in the original hospital leak and are a catch-all for clutter.	<ul style="list-style-type: none"> This engineering is for roofing over the window-wells with either a hard roof (converting the area into usable spaces) or skylights (converting the areas into atriums). Either way, the space becomes usable instead of a leaky catch-all. ◆Rating: 1... 1X2 = 2 2... 1 3... 1X2 = 2 4... 1 5... 1X3 = 3 Total = 9 	\$ 10,000
22	Engineering for Emergency Diesel Generators	We know we have excess generator capacity. We need to have an engineering study to determine what additional non-emergency loads can be added to ensure "normal" operation of the hospital during a loss of power.	<ul style="list-style-type: none"> To meet code, the generator can be connected to "normal" power loads so long as there is load stripping capability in the event that one of the generators is lost. Need engineering review of existing loads and design work to connect "normal" loads. ◆Rating: 1... 1X2 = 2 2... 1 3... 1X2 = 2 4... 1 5... 1X3 = 3 Total = 9 	\$ 135,000
23	Shredder System for autoclaved hazardous waste	The days of having our hazardous waste stored and then transported to an approved disposal site (at tremendous cost) are behind us. But the ability to properly treat this waste is still ahead of us. We now autoclave (sterilize) this waste, compact it, and then dispose of it at our sanitary landfill. However, the ability to shred this waste after sterilization would maximize our efforts and provide a waste product that is better suited for our landfill. This request is for the engineering and equipment as well as expanding our processing building to accommodate this improved operation.	<ul style="list-style-type: none"> Improved work flow. Suitable waste product for our landfill. Sharps to be properly processed for disposal. ◆Rating: 1... 1X2 = 2 2... 1 3... 2X2 = 4 4... 1 5... 0 Total = 8 	\$ 340,318
24	Parking lot revision	This revision will provide 20 new parking spaces near our front entrance. It will also redesign our entrance roadways to resolve confusion. Plans are available and project proposals have been received.	<ul style="list-style-type: none"> New parking spaces. Redesigned front entrance roadway to resolve confusion. ◆Rating: 1... 1X2 = 2 2... 1 3... 2X2 = 4 4... 1 5... 0 Total = 8 	\$ 344,000

COLLEGE HILL MOB

	Fire Notification System at College Hill MOB	Code requirement	Protect patients and staff (On-hold till required)	\$ 30,000
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804-OFFSITE PROPERTIES

Priority	Description	Justification	Benefit	Cost
	Replace front steps and porch at College Court townhouse	Currently, the front porch and steps at our College Court townhouse are in grave disrepair, if not downright dangerous. This request will be to replace the steps and porch parts.	<ul style="list-style-type: none"> Safety Appearance and functionality 	\$ 8,000

CAPITAL REQUESTS FOR OTHER DEPARTMENTS

	OR architectural and engineering assessment and redesign of patient and support spaces	OR areas are in sore need of renovation. Tile walls and coved flooring is damaged, HVAC system is barely adequate with inadequate controls, sterile processing falls under constant scrutiny from surveyors due to poor layout. This request will provide design for improved surfaces and new layout to match today's standards.	<ul style="list-style-type: none"> Improved environmental control Code compliant design for sterile processing and work flow. Improved, more trouble free surfaces. New, up-to-date appearance. 	\$ 90,000
	Private room in Medical Oncology	On occasion, patients receiving infusion can be agitated which can cause commotion and distress in the other patients. WDH will be involved and will require architectural design.	New design specifications require such rooms.	\$ 40,000

**FY19 PRIORITIZED CAPITAL LIST
800- FACILITIES SUPPORT SERVICES**

	Remodel Rad-Room 3 (with room 2)	<p>With the purchase of a new x-ray machine for Rad-Room 3, there will be necessary work in the room itself to be done:</p> <ul style="list-style-type: none"> •With any new upgrade, room 3 and room 2 will become combined to make one large room •Major overhaul of the the electrical system including branch circuits and lighting. •Wall removal and reconfiguration, lead shielding retrofit involved. •An entirely new ceiling installed. •New flooring. •New sprinkler layout. •New HVAC duct layout and controls. Ductboard is likely to be removed and remediated. •Removal/ reconfiguration of piped gas. •Reconfiguration of nurse call system. •All new paint and upgrade bathroom. 	<ul style="list-style-type: none"> •Upgrades to systems, including energy efficient controls for unoccupied modes. •Along with the latest equipment, the room will be refreshed with appealing décor and will operate like a well-tuned machine. 	\$ 410,000
	Remodel Rad-Room 4	<p>With the purchase of a new x-ray machine for Rad-room 4, there will be necessary work in the room itself to be done:</p> <ul style="list-style-type: none"> •The new machine will liekly require new raceways installed for the new cabling requirements. •There will need to be a new ceiling installed to accommodate the new equipment layout. •New lighting and upgrades to the original branch circuit wiring will be necessary. •New flooring will be in order as well as a realignment of cabinetry. •New HVAC ductwork layout and controls. Likely some ductboard to be removed and remediated. •New sprinkler configuration is likely necessary. •All new paint and upgrade to the bathroom. 	<ul style="list-style-type: none"> •Upgrade to systems, including energy efficient controls for unoccupied modes. •Along with the latest equipment, the room will be refreshed with appealing décor and will operate like a well-tuned machine 	\$ 375,000
	Kitchen dish room	<p>With the purchase of any new dishwasher, the dish room itself would need to be retrofitted to the new machine. This is an opportunity to correct some long-standing issues with that room:</p>	<ul style="list-style-type: none"> •Accommodate new dish machine. •Improved work flow. 	\$ 30,000
	Kitchen walk-in refrigerator and freezer renovation	<p>To accommodate new walk-in units... retrofit spaces including sprinkler coverage, lighting and wiring for new units.</p>	<ul style="list-style-type: none"> ◆ Replacement of aged units that require constant repair. ◆ Vastly improved work flow 	\$ 30,000
	Kitchen refrigerated prep-line	<p>With the purchase of new under counter style coolers, there will be some necessary retrofit of the old tray-line, including a sink addition.</p>	<ul style="list-style-type: none"> •Improved work flow. •Removal of old outdated equipment. •increased efficiency. 	\$ 10,000

Board Compliance Committee

Minutes

October 24, 2018

Present: Barbara Sowada, Ed Tardoni, Irene Richardson, Suzan Campbell, and Clayton Radakovich

Barbara Sowada called the meeting to order at 2:00 pm.

There were no minutes to approve.

The following items were discussed:

1. The distinction between the internal compliance committee and the board compliance committee was reviewed. The Internal Compliance Committee, which is composed of an eleven-personal hospital team, including all of senior leadership and the CMO, is responsible for the identification, investigation, and resolution of compliance issues; it is a management committee. The Board Compliance Committee, which is composed of two board members, the CEO, the Chief Legal Executive, and the Director of Compliance and Safety, is responsible for oversight; its purpose is to assure that the internal committee's work is vigorous, continuous, and appropriate.
2. The information brought from the Internal Compliance Committee to the Board Compliance Committee was discussed. It was agreed that only the following information will be brought to the Board Committee.
 - a. Cases will be identified by number and broad category. For example, 1, Financial; 2, Nursing; 7, Nursing; 1, Lab, etc.
 - b. Cases will be classified as open or pending; under investigation; and resolved.
 - c. Details of the investigation will not be brought to the Board committee.
 - d. General description of resolution; and, where appropriate, a follow-up noting whether remedy has prevented the reoccurrence.
3. Cases will not be brought to the Board Compliance Committee that have not been reviewed and acted upon by the Internal Compliance Committee. This should not be a problem with the Internal Committee meeting the first of the month and the Board Committee meeting the last of the month.
4. The Compliance and Safety Department is requesting to replace its contract tracking software with more robust software that also allows for tracking compliance issues. Cost of the proposed software is within the approved authority of the CEO; therefore, no board action required.
5. The Compliance Plan was included in the October Board packet and should be approved at the November Board meeting.
6. No training to report.

Meeting was adjourned at 3:30 pm.

Respectfully submitted,

Barbara J. Sowada, Ph.D
Chair, Board Compliance Committee

Memorial Hospital of Sweetwater County
Governance Committee Meeting
October 18, 2018

Voting Members Present: Richard Mathey and Barbara Sowada

Non-Voting Members Present: Irene Richardson

Call Meeting to Order

Richard Mathey called meeting to order at 2:15 pm.

Approve Meeting Minutes

No minutes to approve.

Discussion

The recent issue regarding the Bank of the West indicated that the Board needs better procedures for conducting its business. Therefore, the Governance Committee met in order to draft procedures for the following items: 1) amending the agenda, and 2) the timely placement of items, by individuals, on the monthly board agenda.

1. **Amending the agenda.** It is recommended that the only permissible action be changing the order of the agenda items. However, in the case of a true emergency, agenda items may be added or deleted.
2. **Agenda items added by individual board members.**
 - a. If an individual board member has an item that s/he wishes to add, either for discussion or action, it is recommended that the person send the item to the CEO and the Board chair for inclusion in that month's agenda. The item will be placed on the agenda and discussed at that month's meeting, but no action will be taken. Any action to be taken will occur at the following month, as part of Old Business.
 - b. The alternative method is for the individual to bring the agenda item to the appropriate board committee. The committee, then, as part of its routine business recommends that the item come before the board for consideration. Once placed on the board agenda, the item will be discussed at that month's meeting, and any action to be taken will occur on at the following month, as part of Old Business.
3. **Procedure for communicating with each other by email regarding the Board's business.** Individual comments regarding any agenda item, including those placed by individual board members, are to be emailed to the CEO's administrative assistant. So that everyone, including the public can see them, the comments will be included in that month's board meeting packet.
4. **Agenda order.** A suggestion was made at the Board Quality Committee that the executive session of the board meeting be moved to the end of the agenda, as this would make it easier for the staff to attend the board meeting. No action was taken.
5. **Board Committee Minutes.** There was discussion regarding the decision-making value of having the most current board committee minutes. In other words, having the minutes of the meetings that occurred in September be included in the October board packet. No action was taken.

With no further business, the meeting was adjourned at 3:30 pm.

Submitted by Barbara J. Sowada, Ph.D.

Contract Check List

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

1. Name of Contract: **CHANGE HEALTHCARE for INTERQUAL**
2. Purpose of contract, including scope and description: **Interqual is an essential tool used by physicians and case managers to ensure accuracy of admission status and appropriateness of admissions for all patients. Additionally, use of a screening tool to assist in determining the admission status of the patient, the appropriateness of care, and care needs upon discharge is a Medicare requirement for hospitals. Interqual is also essential in making sure we do not violate Medicare standards and helps to prevent a Recovery Audit Contractor (RAC)* audit. If the level of care and the days of admission are not appropriate, Medicare can audit the hospital and require repayment for Medicare funds that the hospital has already received. As stated earlier and Interqual assessment is performed for all patients, not just patients on Medicare. Interqual gives guidance needed to meet the requirements of insurance plans so the hospital can achieve full reimbursement.**

In summary, the McKesson Interqual tool is key to reimbursement for the hospital. The benefit far outweighs the cost. Interqual helps MHSC get the most reimbursement possible and prevents Medicare audits and denials by insurance for the care that is provided to the patient.

***The RACs detect and correct past improper payments so that CMS and Carriers, FIs, and MACs can implement actions that will prevent future improper payments. Our goal is to prevent RAC audits, and Interqual is key to the prevention of such audits.**

Page 259 of 305

3. Effective Date: **new software and criteria will be available when agreement is approved by MHSC**

4. Expiration Date: **three-year agreement. Date of June 26 is based on the license date. All subsequent addendums have to be coterminous with the license.**

Master contract date is June 26. Every 3 years a new add-on is entered into so that pricing doesn't change and any new training or tools that became available are included in the add-on. The company does it this way so there is no gap in contract coverage. This add-on has taken us longer than usual to approve but the "effective date" of the add-on is just to show when this latest add-on was approved retroactive to June 27 2018 so there was no gap in coverage or pricing guarantee.

Master contract date of June 26 is the controlling date and this add-on extends the pricing and training to June 25, 2021.

5. Rights of renewal and termination **60 day termination provision** Is this auto-renew? **Yes if not terminated.**
6. Monetary cost of the contract and is the cost included in the department budget? **\$15,169.00 plus \$1000.00 for training per year total per year \$16,169.00. After year three the software, 3rd party costs and Criteria continue, training drops off. This is included in department budget**
7. Jurisdiction/Choice of Law provision checked and changed to Wyoming if able to so. **Governed by the laws of the state where customer is located (Wyoming)**
8. Any confidentiality provisions? **Section 4 of Master Agreement**
9. Indemnification clause present? **Yes section 6 of Master Agreement**
10. Is this contract appropriate for other bids? **Not at this point**
11. Is County Attorney review required? **No**



**CHANGE HEALTHCARE ADD-ON ORDER
TERMS AND CONDITIONS**

SECTION 1: DEFINITIONS. Capitalized terms used but not otherwise defined in this Add-On Order have the meaning set forth in the MA or Order Form (defined below).

- 1.1 **"Add-On Order"** means this document, which sets forth the terms for the customer identified in the signature block below ("Customer"), to license one or more of the following: (a) Change Healthcare Technologies, LLC. ("**Change Healthcare**") Software, Clinical Content, ASP Services (the "**Products**"), identified in Exhibit A to this Add-On Order; (b) Change Healthcare implementation, education, and training services ("**Services**"), identified in Exhibit C to this Add-On Order; and (c) Third Party Software, identified in Exhibit A to this Add - On Order, which Customer desires to renew or add to its license granted in the existing MA and Order Form.
- 1.2 **"MA"** means the Master Agreement or License Agreement referenced in the Order Form.
- 1.3 **"Order Form"** means the Order Form, Contract Supplement, or Renewal Order Form, as amended by all previous renewal orders and amendments, between Change Healthcare and Customer and under which Customer has licensed the Products and Services.
- 1.4 **"Term,"** as used in Exhibit A only, means the incremental time period upon which Customer's net annual payment is based.

SECTION 2: EXHIBITS. This Add-On Order incorporates the attached exhibits.

A	Products
B	Clinical Content, Interrater Reliability Suite, ASP Terms, and InterQual Connect™
C	Implementation, Education, and Consulting Services Terms (if applicable)

SECTION 3: SCOPE.

3.1 This Add-On Order may be used **only** to:

- (1) **Renew** a license for InterQual® Clinical Content, InterQual View®, CareEnhance® Review Manager Enterprise, Change Healthcare-hosted CareEnhance® Review Manager Enterprise, InterQual® Online, InterQual® Online Anonymous Review, InterQual® Interrater Reliability Suite, InterQual® Coordinated Care Content, InterQual® Content Customization Tool, InterQual® Learning Basics, and InterQual® Transparency Solution;
- (2) **Add** InterQual® Clinical Content (excluding historical criteria), InterQual View®, or InterQual Interrater Reliability Software;
- (3) **Add** facilities, but only if Customer is adding Products listed in (1) of this Section 3.1 to such additional facilities and Customer already has a license for such Products; and
- (4) **Remove** facilities or **not renew** Products at the end of the current term, but only if Customer is renewing Products pursuant to (1) of this Section 3.1.

3.2 This Add-On Order may be used **only** for deals with average annual value (including Services) equal to or less than \$250,000. Page 261 of 305

3.3 This Add-On Order may not be used to terminate Products or drop facilities prior to the end of the current term.

- 3.4 This Add-On Order is null and void if: (a) used for a purpose not described in this section (Scope); (b) it is for a deal with average annual value greater than \$250,000; or (c) if any changes are made to its terms and conditions.

SECTION 4: LICENSE GRANT/TERM.

- 4.1 Subject to the terms in the MA and Order Form and to any provisions in the latest Order Form that provide for automatic renewal of the Order Form and fees associated therewith, Change Healthcare grants to Customer a license to use the Products set forth in Exhibit A. Such license begins on the **"Add-On Order Effective Date"** and ends on the **"Add-On Order End Date,"** each identified on the first page of Exhibit A.

4.1.1 If this Add-On Order involves a **renewal** of a license, which may include adding Products or facilities, Exhibit A will list all Products licensed by Customer and all Customer facilities. Any Products or facilities not listed in Exhibit A will **not renew** as of the end of the most current term of the Order Form.

4.1.2 If this Add-On Order does not involve a **renewal** of a license (i.e., only adding Products or facilities), Exhibit A will list such additional Products and facilities and will have no effect on the existing Products or facilities.

Place an "X" here if you are removing a facility or facilities.

SECTION 5: LICENSE FEES AND PAYMENT TERMS.

5.1 **Product Fees.** In exchange for the Products, Customer agrees to pay to Change Healthcare the fees set forth on the last page of Exhibit A under the heading **"Grand Term Total."** For clarification purposes, the Grand Term Total may include a pro-rated fee for additional Products licensed by Customer during the Term. Fees for Products will be due as shown on the last page of Exhibit A under the heading **"Payment Due Dates."**

5.2 **Service Fees.** In exchange for Services, if applicable, Customer agrees to pay to Change Healthcare the fees set forth in Exhibit C under the heading "Payment Terms – Services Fees." Customer will pay such fees to Change Healthcare on the dates set forth in Exhibit C.

5.3 **Invoices.** Invoices will be issued to Customer by Change Healthcare, and Customer will comply with the remittance instructions printed on each invoice.

5.4 **Taxes.** Unless Customer provides Change Healthcare prior to the Add-On Order Effective Date satisfactory evidence of exemption (including evidence of renewal if applicable) from applicable sales, use, value-added or other similar taxes or duties, Change Healthcare will invoice Customer for all such taxes applicable to the transactions under this Add-On Order.

5.5 **Reporting Obligations.** Customer is solely responsible for reporting all discounts or appropriate net prices received from Change Healthcare pursuant to this Add-On Order on cost reports filed by Customer with any government entity.

SECTION 6: SERVICES, SUPPORT, AND REQUIRED ENVIRONMENTS. The parties agree to abide by the terms set forth in the Implementation and Training Services Guide, the Required Environments Guide/Technical Configurations, and the Support Manual, which may be amended from time to time at Change Healthcare's discretion.

Page 262 of 305

SECTION 7: TRANSITION. The parties acknowledge and agree that Change Healthcare currently provides the Clinical Content in a variety of formats. Change Healthcare reserves the right to change the format and to provide such Clinical Content to Customer in a different medium at mutually agreed on license fees.

SECTION 8: UPGRADES/UPDATES. Installation and/or implementation of the Products by Change Healthcare as a result of Upgrades/Updates to the Products and/or new Releases of the Products are not included in the annual license fees set forth in Exhibit C. Unless otherwise addressed by the Order Form or this Add-On Order, such additional services shall be contracted for separately and additional fees will apply.

SECTION 9: ALLIANCE PARTNER. Additional services may be required and contracted for separately if Customer or Change Healthcare terminates its relationship with any Alliance Partner identified in the Order Form and Customer chooses to integrate the Software and/or Clinical Content into Customer's workflow system.

SECTION 10: PURCHASE ORDER. Change Healthcare will include Customer's purchase order ("PO") number on Customer invoices if provided by Customer on or before the Add-On Order Effective Date. Failure to provide Change Healthcare with a PO number or copy does not suspend or negate any Customer duty, including payment, under this Add-On Order. Pre-printed terms and conditions on or attached to Customer's PO shall be of no force or effect.

SECTION 11: ASP SOFTWARE/SERVICES. The following Products are licensed pursuant to the ASP terms contained in the Order Form, the MA, and Exhibit B to this Add-On Order: InterQual Interrater Reliability Software, Change Healthcare-hosted CareEnhance@Review Enterprise Manager, InterQual Online Software, InterQual Content Customization Tool Software, and InterQual Learning Basics.

SECTION 12: THIRD PARTY TERMS. If Third Party Software is included in Exhibit A, Customer agrees to the applicable Third Party Terms, as set forth at <http://customerportal.mckesson.com>, which Customer may access using the following confidential login information:

User ID: contractprovisions@mckesson.com
Password (case sensitive): PortalAccess

For the avoidance of doubt, if there are no Third Party Terms for the Third Party Products listed on the Change Healthcare Customer Portal, then no Third Party Terms apply. In the event that a Third Party Vendor raises its licensing fees of such Third Party Products, Change Healthcare may increase its annual license fees upon the next anniversary of such Add-On Order.

SECTION 13: CONFLICTS. If there is a conflict between this Add-On Order and the Order Form or the MA, then this Add-On Order controls.

SECTION 14: ENTIRE AGREEMENT. Except as specifically modified by this Add-On Order, all terms of the Order Form and the MA will remain in full force and effect. This Add-On Order, together with the Order Form and the MA, is the complete and exclusive agreement between the parties with respect to the subject matter hereof, superseding and replacing all prior agreements, communications, and understandings (written and oral) regarding its subject matter.

[Signatures on following page]

This Add-On Order is executed by an authorized representative of each party.

CUSTOMER: Memorial Hospital of Sweetwater
County

Change Healthcare Technologies, LLC

By: _____

By: _____

Name: _____

Name: _____

Title: _____

Title: _____

Date: _____

Date: _____

Customer PO. No. _____

CUSTOMER – For Execution:
Change Healthcare no longer requires the exchanging and signing of hard copy contracts. Please fax or email (scanned document) the signed agreement to your sales executive or account manager.

Change Healthcare Technologies, LLC
5995 Windward Parkway
Alpharetta, GA 30005
Attn: General Counsel

With a copy to: Change Healthcare Technologies,
LLC
275 Grove Street
Suite 1-210
Newton, MA 02466
Attn: Vice President of Product Operations

EXHIBIT A (Products)

Annual License Fee Quotation
Quote# 158177
License# 11332
Customer# MEM126
SAP# 1028448

Sold To: Memorial Hospital of Sweetwater County
Sold To Address: 1200 College Drive
 Rock Springs, WY 82901
Sold To Attn: Clay Radakovich (clradakovich@sweetwatermemorial.com)

Today's Date: 9/5/2018
Start First Full Year: 6/26/2018
Add-On Order Effective Date: 6/26/2018
Add-On Order End Date: 6/25/2021

Sales Person: Ebony White
Bill To: Memorial Hospital of Sweetwater County
Bill To Address: 1200 College Drive
 Rock Springs, WY 82901
Bill To Attn: Kallie Mikkelsen (kmikkelsen@sweetwatermemorial.com)

Ship To: See Facility(ies) information below
IRR Admin: Kallie Mikkelsen (kmikkelsen@sweetwatermemorial.com)

If Customer and the "Bill To" company are not the same, the "Bill To" company will be invoiced for all fees associated with this quotation; however, Customer shall remain liable for the payment obligations hereunder."

Memorial Hospital of Sweetwater County - Rock Springs , WY (303617)

1200 College Drive, Rock Springs, WY 82901
Download Central Admin: Paul Tolman (ptolman@minershospital.org)
Ship To: Kallie Mikkelsen (kmikkelsen@sweetwatermemorial.com/+1 (307) 352-8342)

	<u>Size / Type</u>	<u>Users</u>
Term 1		
6/26/2018 - 6/25/2019		
3rd Party		
Oracle - JRE	58Beds	0
Oracle OJDBC6 (v11) Driver	58Beds	0
SAP - Business Objects Crystal Reports – 2008 Runtime	58Beds	0
Criteria		
InterQual® Acute Adult Criteria	58Beds	0
InterQual® Acute Pediatric Criteria	58Beds	0
Software		
# InterQual Learning Basics	58Beds	0
InterQual® View (Included)	58Beds	0
InterQual® View (SQL)	58Beds	0
# InterQual® Interrater Reliability Standard Tests	58Beds	0
InterQual® Review Manager (Non-Production)	58Beds	0
InterQual® Review Manager (SQL)	58Beds	0
Total Net Dollars for Term 1 :	<u>\$15,169.03</u>	

Term 2		
6/26/2019 - 6/25/2020		
3rd Party		
Oracle - JRE	58Beds	0
Oracle OJDBC6 (v11) Driver	58Beds	0
SAP - Business Objects Crystal Reports – 2008 Runtime	58Beds	0
Criteria		
InterQual® Acute Adult Criteria	58Beds	0
InterQual® Acute Pediatric Criteria	58Beds	0
Software		
# InterQual Learning Basics	58Beds	0

InterQual® View (Included)	58Beds	0
InterQual® View (SQL)	58Beds	0
# InterQual® Interrater Reliability Standard Tests	58Beds	0
InterQual® Review Manager (Non-Production)	58Beds	0
InterQual® Review Manager (SQL)	58Beds	0
Total Net Dollars for Term 2 :		<u>\$15,169.03</u>

Term 3

6/26/2020 - 6/25/2021

3rd Party

Oracle - JRE	58Beds	0
Oracle OJDBC6 (v11) Driver	58Beds	0
SAP - Business Objects Crystal Reports – 2008 Runtime	58Beds	0

Criteria

InterQual® Acute Adult Criteria	58Beds	0
InterQual® Acute Pediatric Criteria	58Beds	0

Software

# InterQual Learning Basics	58Beds	0
InterQual® View (Included)	58Beds	0
InterQual® View (SQL)	58Beds	0
# InterQual® Interrater Reliability Standard Tests	58Beds	0
InterQual® Review Manager (Non-Production)	58Beds	0
InterQual® Review Manager (SQL)	58Beds	0

Total Net Dollars for Term 3 : **\$15,169.03**

Total Net Dollars for All Terms : **\$45,507.09**

Deliverables

Dropped Products

Quantity **Deliverable Name**

CES

indicates the product is being added to the License

QUOTE TOTALS

Extra User Fees: \$0

*Extra User Fees, If Applicable, are not included in first year totals unless specifically indicated

* Price subject to applicable state and/or local taxes.

* This Quote is valid until: November 04, 2018

Criteria/Software Totals

Total License Fees :	\$50,563.44
Discounts :	\$5,056.34
Net Dollars :	\$45,507.10

Payment Due Dates

<u>Due Date</u>	<u>Amount Due</u>
June 26, 2018	15,169.03
June 26, 2019	15,169.03
June 26, 2020	15,169.03

Quote Total

Grand Term Total : \$45,507.10

CONFIDENTIALITY NOTICE: This quotation, including any attachments, is for the sole use of the intended recipient(s) only for the purposes of the transaction described herein and for no other purpose. The information contained in this quote may be private and confidential, and may also be subject to the work product doctrine. Any unauthorized review, use, disclosure or distribution is prohibited. If you are not the intended recipient, please contact the sender and destroy all copies of the original message.

EXHIBIT B (Clinical Content, Interrater Reliability Suite, and ASP Terms)

Clinical Content Terms

The following terms apply to all Software, Clinical Content, and ASP Services licensed in this Add-On Order:

Copying of Clinical Content

1. In this section "**Member**", "**Insured**", "**Participant**" and "**Beneficiary**" are used interchangeably to mean an enrollee, covered person, policy holder, or subscriber of an insurance carrier. "**Provider**" means a health care professional or facility and a Provider may be referred to as participating, non-participating, contracted, non-contracted or out-of-network to identify whether the Provider has a contractual relationship with an insurance carrier.

2. Customer may disclose the Clinical Content on an ad-hoc basis in the smallest increments or portions feasible under the circumstances or as legally required for disclosure with the Change Healthcare Statement of Disclosure, all as set forth below:

(i) to a Member included as one of Customer's Covered Lives under this Agreement when the Clinical Content have been referenced in the process of denying, limiting, or discontinuing authorization of services for the Member;

(ii) to a Member for the sole purpose of satisfying Customer's contractual obligations to report review results;

(iii) to a participating or out-of-network Provider of health care services subject to Customer's medical necessity review and for use in case specific discussions;

(iv) to a public agency or independent review organization in connection with conducting an independent external review of or conducting an appeal of Customer's medical necessity determination in a specific case when the Clinical Content have been referenced in the process of making said determination;

(v) to a public agency to comply with a statutory or regulatory mandate requiring the Clinical Content to be filed with the agency (electronic access to the copy to be furnished to Change Healthcare as soon as practicable prior to any disclosure so that Change Healthcare may, at its option, object to or dispute the disclosure;

(vi) pursuant to a judicial order or subpoena (copy to be furnished to Change Healthcare by at least five (5) business days notice prior to any disclosure so that Change Healthcare may, at its option, object to or dispute the disclosure, or, if the scheduled time for the disclosure is less than five (5) business days, than as soon as possible prior to disclosure.

3. If Customer is located in Massachusetts, this section 3 will apply. As provided by Massachusetts state law:

(i) Access to Clinical Content for Insureds and Prospective Insureds:

Insurance carriers shall provide Clinical Content and protocols to insureds and prospective insureds upon request and free of charge, however, where the insured or prospective insured is seeking licensed, proprietary Clinical Content, the insurance carrier shall limit the disclosure of licensed, proprietary Clinical Content to the information which is relevant to the particular treatments or services identified by the insured or prospective insured. Page 267 of 305

(ii) Access to Clinical Content for Health Care Providers:

Insurance carriers shall provide criteria and protocols to health care providers upon request and free of charge to health care providers, however where the health care provider is seeking licensed, proprietary Clinical Content, the

insurance carrier shall limit the disclosure of licensed, proprietary Clinical Content to the information which is relevant to the particular treatments or services identified by the health care provider.

(iii) Access to Clinical Content for the Massachusetts Health Policy

Commission's Office of Patient Protection ("OPP") and the Massachusetts Division of Insurance ("Division"). Insurance carriers shall provide all criteria and protocols upon request to the OPP and Division free of charge, including licensed, proprietary Clinical Content and protocols purchased by an insurance carrier. Any such licensed, proprietary Clinical Content and protocols purchased by an insurance carrier provided to OPP and the Division shall not be public records and shall be exempt from disclosure under the public records laws. The OPP and the Division may request the entire set of utilization review criteria, medical necessity criteria and protocols, and in response to such a request the insurance carrier shall provide all requested documents.

4. As provided under the Federal Mental Health Parity and Addiction Equity Act of 2008 as amended:

(i) Access to Clinical Content for plan medical necessity determinations with respect to mental health or substance use disorder benefits or health insurance coverage offered in connection with the plan with respect to these benefits, shall be made available by the plan administrator or health insurance issuer offering the coverage to any current or potential participant, beneficiary, or contracting provider upon request in accordance with regulations. The current or potential participant, beneficiary, or contracting provider is to identify the specific treatments or services that are the subject of the above mentioned medical necessity determination. If a potential participant, beneficiary, or contracting provider requests criteria that are not for identified specific treatments or services, Customer and Change Healthcare agree to work cooperatively to provide an appropriate response.

(ii) Access to Clinical Content also will be provided to a plan participant or beneficiary, or contracting provider when requesting the reason for any denial of reimbursement or payment for services with respect to mental health or substance use disorder benefits. The plan participant, beneficiary, or contracting provider is to identify the specific treatments or services that are the subject of the above mentioned denial of reimbursement or payment. If a plan participant, beneficiary, or contracting provider requests criteria that are not for identified specific treatments or services, Customer and Change Healthcare agree to work cooperatively to provide an appropriate response.

(iii)

5. If Customer has reason to request flexibility to disclose Clinical Content beyond the requirements as set forth in the subsections above, Customer and Change Healthcare agree to work cooperatively prior to disclosure to ensure appropriate measures are in place for protecting Change Healthcare's intellectual property, trade secrets and confidential information.

6. Customer's disclosure and Change Healthcare's agreement for disclosure of Clinical Content pursuant to this section to comply with regulatory or legal requirements does not constitute a waiver of Change Healthcare's rights to protect its intellectual property, trade secrets and confidential information.

7. In connection with each disclosure/distribution, all Clinical Content copies shall prominently display on the cover page and/or introductory screen Change Healthcare's trademark and copyright notices and Proprietary Notice, as provided herein, and Customer shall maintain and furnish the disclosure/distribution to Change Healthcare upon request.

8. The following is the Change Healthcare Statement of Disclosure to be provided with each disclosure/distribution of the Clinical Content.

Page 268 of 305

Change Healthcare's Statement of Disclosure:

The Clinical Content you are receiving is confidential and proprietary information and is being provided to you solely as it pertains to the information requested. Under copyright law, the Clinical Content may not

be copied, distributed, or otherwise reproduced. In addition, the Clinical Content may contain advanced clinical knowledge which we recommend you discuss with your physician upon disclosure to you. The Clinical Content reflects clinical interpretations and analyses and cannot alone either (a) resolve medical ambiguities of particular situations; or (b) provide the sole basis for definitive decisions. The Clinical Content is intended solely for use as screening guidelines with respect to medical appropriateness of healthcare services and not for final clinical or payment determinations concerning the type or level of medical care provided, or proposed to be provided, to a patient; all ultimate care decisions are strictly and solely the obligation and responsibility of your health care provider.

Interrater Reliability Suite Terms

The following terms apply only to the licensure of the InterQual® Interrater Reliability Suite Software, Clinical Content, and corresponding ASP Services ("**InterQual Interrater Reliability Suite**"):

Data. Customer acknowledges that Change Healthcare may use the data collected from Customer's use and customization of the InterQual Interrater Reliability Suite for various internal purposes, including, but not limited to product development and improvement, marketing, benchmark reporting and identifying additional Customer-specific training opportunities. All information collected will be used and maintained in accordance with the provisions of the Agreement and this Product Schedule.

Limitation on License Grant. Customer may not use the InterQual Interrater Reliability Suite to prepare tests unrelated to the Clinical Content.

Permitted Access. Customer represents and warrants that only Customer and its Permitted Users will be permitted access to the InterQual Interrater Reliability Suite and only for the uses described herein. Each Permitted User must be required to register and receive a login ID and password before accessing the InterQual Interrater Reliability Suite. After the initial registration, Customer shall ensure that all additional Permitted Users are authorized and receive login IDs and passwords. Customer shall take all measures necessary to ensure compliance by all Permitted Users with all terms and conditions of the Agreement and this Contract Supplement. Change Healthcare may terminate the access of any Permitted User to the InterQual Interrater Reliability Suite in the event of any such violation, in addition to other remedies allowed under the Agreement or this Contract Supplement. Change Healthcare may rely upon the certification, statement, or electronic representation thereof, in providing the InterQual Interrater Reliability Suite to Customer and its Permitted Users. Customer shall (i) be responsible for determining and identifying the Permitted Users who will be granted access to the InterQual Interrater Reliability Suite; (ii) provide a list of those authorized Permitted Users to Change Healthcare; and (iii) update this list as needed. Should there be a change to a specific Permitted User (termination of employment, change of job status, etc.), Customer shall notify Change Healthcare of such change within 30 days from the date of occurrence in order for Change Healthcare to disallow access for such Permitted User. Additionally, Customer shall not provide access to any Permitted User until such time as notification has been provided to Change Healthcare.

ASP Terms

The following terms and conditions apply only to the provision of ASP Services by Change Healthcare for Customer:

Internet Access and Use. Customer acknowledges and agrees that the ASP Services and/or Clinical Content will be accessed by Customer via the internet and the ASP Services and/or Clinical Content will be located on a remote server. Customer acknowledges and agrees that the use of the Products are strictly for Customer's use solely related to the Change Healthcare Clinical Content, and for no other purpose.

Page 269 of 305

Interruption. CHANGE HEALTHCARE DOES NOT WARRANT THAT THE INTERNET ACCESS WILL BE UNINTERRUPTED, ERROR-FREE OR COMPLETELY SECURE. CHANGE HEALTHCARE DOES NOT AND CANNOT CONTROL THE FLOW OF DATA TO OR FROM CHANGE HEALTHCARE, CUSTOMER'S NETWORK, AND OTHER PORTIONS OF THE INTERNET. SUCH FLOW DEPENDS IN

LARGE PART ON SERVICES PROVIDED OR CONTROLLED BY THIRD PARTIES. AT TIMES, ACTIONS OR INACTIONS OF SUCH THIRD PARTIES CAN IMPAIR OR DISRUPT CUSTOMER'S CONNECTIONS TO THE INTERNET (OR PORTIONS THEREOF). CHANGE HEALTHCARE CANNOT GUARANTEE THAT SUCH EVENTS WILL NOT OCCUR. ACCORDINGLY, CHANGE HEALTHCARE DISCLAIMS ANY AND ALL LIABILITY RESULTING FROM OR RELATED TO SUCH EVENTS UNLESS CAUSED SOLELY BY OR OCCURS SOLELY AS A RESULT OF ANY ACT OR OMISSION BY CHANGE HEALTHCARE, ITS EMPLOYEES OR AGENTS.

Security. Customer is solely responsible for acquiring, servicing, maintaining, and updating all equipment, computers and software (including anti-virus software) not owned or operated by or on behalf of Change Healthcare, that allows Customer and its Permitted Users to access the Products. Customer agrees to use commercially reasonable security measures to prevent unauthorized access to the Software and/or Clinical Content. Customer agrees to be responsible for any breach of the MA or any other unauthorized dissemination of the Software and/or Clinical Content or its content by any user accessing the Software and/or Clinical Content via Customer's Website.

Proprietary Rights. Customer acknowledges that the ASP Services, including all applicable rights to patents, copyrights, trademarks, and trade secrets, are the sole and exclusive property of Change Healthcare or Third Party Vendors who have licensed such rights to Change Healthcare. Customer agrees and acknowledges that under this Add-On Order, Customer is not purchasing title to the ASP Services but is only being granted a license to use the ASP Services during the term of the license. Customer agrees (a) that all rights, title, and interest in the ASP Services will be deemed to vest and remain vested in Change Healthcare, including, but not limited to, patents, copyrights, trade secrets, and other intellectual property rights, and (b) to hereby assign any and all rights that Customer may have in such ASP Services to Change Healthcare and to execute all further documents reasonably requested by Change Healthcare to evidence such assignment.

Location. Change Healthcare may provide the ASP Services from any Data Center and may from time to time transfer any or all of the ASP Services being provided hereunder to any new Data Center or relocate the personnel, equipment and other resources used in providing the ASP Services.

Customer's Website. In operation of Customer's Website, Customer will comply with all applicable laws and regulations.

Upgrades/Updates. Updates/Upgrades to the ASP Software are included within the ASP Services contemplated. Notwithstanding the foregoing, the parties agree to execute an amendment to this Add-On Order for additional services in the event of any Customer-specific integrations, data mapping or configuration of any business rules, or additional training that may be needed as a result of such Updates/Upgrades, and additional fees will apply. Change Healthcare and Customer will determine the scope of the additional services to be provided and the terms and conditions pursuant to which such additional services shall be provided by Change Healthcare.

Migration to InterQual Connect™

If Customer is a hospital and is renewing CareEnhance® Review Manager Enterprise or Change Healthcare-hosted CareEnhance® Review Manager Enterprise, upon Change Healthcare's notice to Customer, Customer may migrate to InterQual Connect™ during the term of this Add-On Order. If Customer elects to migrate during the term, Customer will execute a new Order Form for InterQual Connect prior to the start of the migration. The License Fees will remain the same during the term as shown in this Add-On Order. However, the Order Form will identify applicable Implementation, Services and other fees.

Page 270 of 305

EXHIBIT C

IMPLEMENTATION, EDUCATION AND CONSULTING SERVICES TERMS

InterQual® Services

1.0 SERVICE PRICING (MHS14356-C)

Table 1: Services for Memorial Hospital of Sweetwater County

InterQual Services	Number of Participants	Annual Fee (Years 1-3)
<u>ILS LOC: InterQual® (Acute)</u> • VILT - LOC: InterQual® Acute Criteria	Up to 4 participants annually Material: 75005568	\$1,000.00
Fixed Fee Total:		\$1,000.00

Payment Terms - Services Fees

- \$1,000.00* due on the Add On Order Effective Date.
- \$1,000.00* due on the first anniversary of the Add On Order Effective Date.
- \$1,000.00* due on the second anniversary of the Add On Order Effective Date.
- * plus any applicable taxes

2.0 STATEMENT OF PROJECT SCOPE

The Services in this Exhibit will be delivered in accordance with the Change Healthcare Guide to Standard Implementation and Training Services ("Services Guide") which may be amended at Change Healthcare's discretion and is incorporated herein by reference. To obtain the most current version of the Services Guide, contact your Change Healthcare Sales Executive, Account Manager or download from Customer Hub. At no time will there be a material change that will reduce or adversely affect the services to be delivered during the term of the agreement.

3.0 ASSUMPTIONS

- 3.1 Customer will incur additional fees and training material costs for each additional participant beyond the agreed upon maximum number of participants identified herein and/or each participant attending New User shared session(s) when available and/or each additional instructor-led session requested beyond the McKesson recommended number of session(s). Customer will be billed separately for additional participants and/or sessions not covered by this agreement.
- 3.2 Customer acknowledges that Services will be provided only for Facilities licensed under the Agreement.
- 3.3 Services will not be carried over from prior years.
- 3.4 Education includes all applicable self-paced education modules.
- 3.5 All applicable self-paced education modules should be completed prior to any VILT session(s).

4.0 DEFINITIONS

"Fixed Fee ("FF")" means that the Services will be delivered by Change Healthcare at a set price, determined by Change Healthcare, considering the project scope and the time and resources necessary to complete the Services. Page 271 of 305

"New User" refers to staff that are new to the use of InterQual criteria

"VILT" means virtual instructor-led training. This method of delivering traditional classroom courses using the Internet and teleconferencing technologies whereby the instructor and students are at independent locations.



Memorial Hospital of Sweetwater County
License Agreement No. 11332
Customer No. MEM126
June 21, 2006

MCKESSON HEALTH SOLUTIONS LLC LICENSE AGREEMENT

THIS LICENSE AGREEMENT ("Agreement") is made effective as of this day of , 2006 (the "Effective Date"), by and between McKesson Health Solutions LLC ("McKesson"), having a principal place of business One Post Street, 34th Floor, San Francisco, CA 94104 and Memorial Hospital of Sweetwater County ("Customer") with offices at 1200 College Drive, Rock Springs, WY 82902 (collectively the "Parties" and each a "Party").

1. LICENSE.

1.1. Subject to the terms and conditions of this Agreement and each applicable Contract Supplement (including without limitation payment of the applicable amounts pursuant to Section 8.3), McKesson hereby grants to Customer i) a non-exclusive, non-transferable license to use the Clinical Content and/or Software in a manner consistent with its Documentation. Where applicable, such use shall be consistent with Customer's own internal medical determinations of clinical appropriateness performance for a patient ("Reviews"), and business purposes as set forth in each applicable Contract Supplement for the Affiliate locations listed therein. The Software and/or Clinical Content or Documentation may not be copied or used other than as permitted by this Agreement. Should McKesson agree to permit Customer to expand its license after the Effective Date or the effective date of the applicable Contract Supplement, Customer and McKesson must execute an amendment to this Agreement, expanding the scope of the license granted herein, at the then Prevailing Rate for such additional use. In this Agreement (a) "Affiliate" means any entity controlling, controlled by or under common control with Customer or McKesson, as applicable and as listed in the applicable Contract Supplement. For the purposes of this definition, control means either majority ownership or ownership of more than fifty percent (50%) of the outstanding stock of such entity, (b) "Contract Supplement" means the Contract Supplement(s) to this Agreement describing the Software and/or Clinical Content licensed herein, the Term, the size representation, and such other information as the parties deem necessary and appropriate, (c) "Clinical Content" means the InterQual Clinical Decision Support Criteria, InterQual SmartSheets, the clinical content (medical text) contained within the QualityFirst guidelines, and any other clinical content provided to Customer under this Agreement or an applicable Contract Supplement, together with any related Documentation, Updates,

derivative works, information and services described in the Contract Supplement, (d) "Documentation" means user guides, operating manuals, and specifications, whether in print or machine readable media, in effect as of the date of shipment, supplied to Customer under this Agreement for use with the Software and/or Clinical Content licensed herein or any component thereof, including all additions, Updates or modifications thereto, (e) "Installation Site" means the location(s) designated in the Contract Supplement at which the Software and/or Clinical Content shall be installed, (f) "Prevailing Rates" means the applicable McKesson standard rates then in effect for the Software, Clinical Content or a given service, on the license date or the service date as applicable, (g) "Software" means the proprietary databases and object code computer programs described in the applicable Contract Supplement, together with any related Documentation, Updates, derivative works, information and services, (h) "Updates" means all corrections, modifications, enhancements or new releases of the Software and/or Clinical Content designated by McKesson as "Updates" during the Initial Term and any Renewal Term. Updates do not include new software products or modules for which McKesson charges separately.

1.2. Customer shall not rent, lease or provide remote computer services or distribute the Clinical Content and/or Software and its Documentation, or permit the use of the Clinical Content and/or Software and its Documentation by an outsource or facility management service whether to provide services to Customer or otherwise, without the prior written consent of McKesson.

1.3 Customer may copy the Clinical Content on an ad-hoc basis in the smallest increments or portions feasible under the circumstances or as legally required for disclosure: (a) to a provider of health care service subject to Customer's medical necessity review or medical claims adjudication and solely for use for case specific medical necessity or claims adjudication discussions with Customer; (b) to a person included as one of Customer's "Covered Lives" or "Members", meaning a primary member, subscriber or eligible dependent covered under a health plan or member who is included under a delegated risk arrangement under an agreement with Customer, under this Agreement or to such person's representative when the Clinical Content have been referenced in the process of denying, limiting, or discontinuing authorization of services or payment for said person with Customer's provision to said person of

Memorial Hospital of Sweetwater County
 License Agreement No. 11332
 Customer No. MEM126
 June 21, 2006

the McKesson's Statement of Disclosure, as set forth below; (c) to a prospective customer for the sole purpose of marketing its services; (d) to an existing customer for the sole purpose of satisfying its contractual obligations to report review results; (e) to a public agency or independent review organization in connection with conducting an independent external review of or conducting an appeal of Customer's medical necessity determination in a specific case when the Clinical Content have been referenced in the process of making said determination; (f) to a public agency to comply with a statutory or regulatory mandate requiring the Clinical Content to be filed with said agency (copy to be furnished to McKesson as soon as practicable prior to any such disclosure so that McKesson may, at its option, object to or dispute same); and, (g) pursuant to a judicial order or subpoena (copy to be furnished to McKesson by at least five (5) business days notice prior to any such disclosure so that McKesson may, at its option, object to or dispute same, or, if the scheduled time for such disclosure is less than five (5) business days, then as soon as possible prior to such disclosure). In connection with each disclosure/distribution, all Clinical Content copies shall prominently display on the cover page and/or introductory screen McKesson's trademark and copyright notices and Proprietary Notice, as dictated by herein, and Customer shall maintain and furnish the disclosure/distribution to McKesson upon request.

"McKesson's Statement of Disclosure": The Clinical Content you are receiving is confidential and proprietary information and is being provided to you solely as it pertains to the indication discussed with your healthcare provider. Under copyright law, the Clinical Content may not be copied, distributed, or otherwise reproduced. In addition, the Clinical Content may contain advanced clinical knowledge which we recommend you discuss with your physician upon disclosure to you.

The Clinical Content reflects clinical interpretations and analyses and cannot alone either (a) resolve medical ambiguities of particular situations; or (b) provide the sole basis for definitive decisions. The Clinical Content is intended solely for use as screening guidelines with respect to medical appropriateness of healthcare services and not for final clinical or payment determinations concerning the type or level of medical care provided, or proposed to be provided, to a patient; all ultimate care decisions are strictly and solely the obligation and responsibility of your health care provider."

2. TERM AND TERMINATION

2.1 This Agreement shall commence on the Effective Date stated in the first paragraph of this Agreement, or for Contract Supplements and amendments executed after the Effective Date, on the date accepted by McKesson as set forth thereon. This Agreement shall continue for an initial Term set forth in each Contract Supplement ("Initial Term") or until the termination of each Contract Supplement, in accordance with the terms set forth herein.

2.2 The Initial Term as specified in an applicable Contract Supplement (together with any Renewal Terms as set forth herein) during which Customer shall have a license to use the applicable licensed Software and/or Clinical Content and Documentation, (the "Term") of the Agreement shall renew automatically for additional terms equal to one (1) year (each, a "Renewal Term") upon the expiration of the Initial Term and each subsequent Renewal Term, unless either party provides written notice of termination to the other party not less than sixty (60) days prior to the expiration of the then current Term. The license fee payable during any Renewal Term shall be the Prevailing Rate.

2.3 If either party shall commit a material breach of any term or condition of this Agreement, and if said party shall fail to cure, or make substantial progress to cure, any such breach within forty-five (45) days after written notice of such breach is given by the non-breaching party, then the non-breaching party shall be entitled, upon notice, to terminate this Agreement.

3. PRODUCT SUPPORT

3.1 McKesson shall provide the implementation services, consulting services and training services in the amount specified in each applicable Contract Supplement. Such services shall be provided at the location designated in each applicable Contract Supplement.

3.2 Technical Support Services. During each twelve (12) month period commencing as of the latter of the Effective Date or the effective date of the applicable Contract Supplement, during the Term and for so long as Customer's payments due have been paid in full, McKesson shall provide Customer with telephone technical support for the two (2) most current releases of the Software during McKesson's normal business hours (8:30 AM - 8:00 PM Eastern Time) on regular business days, excluding McKesson holidays, for inquiries directly related to the functioning of the Software. All requests

Memorial Hospital of Sweetwater County
 License Agreement No. 11332
 Customer No. MEM126
 June 21, 2006

for support shall be coordinated by Customer through its designated representative(s).

3.3 In the event Customer reports an error to McKesson, and at other times reasonably requested by McKesson (including but not limited to, during the installation of the Software), Customer shall give McKesson reasonable access, including but not limited to the following: 1) to the equipment upon which the Software resides, 2) to the Software itself, 3) to qualified Customer staff who may assist in providing informational assistance in resolving the issue and all relevant documentation and records, and 4) shall provide such reasonable assistance as McKesson may request, including the provision of sample output and other diagnostic information, to assist McKesson in the provision of support services. Customer acknowledges and agrees that only its designated representatives can report an error to McKesson. In no event shall McKesson have any responsibility to correct any errors or damage resulting from changes or modifications made to the Software by Customer or problems caused by misuse or negligence of Customer's employees or agents or third parties Customer allows to access the equipment or Software, a malfunction of Customer's equipment, idiosyncrasies of Customer's computer environment, or use with incompatible equipment or third party software.

3.4 Customer shall be responsible for performing normal and customary maintenance to the computer environment in which the Software operates, including but not limited to database backups, database performance and tuning, network performance and tuning, and routine maintenance of the application in a currently-supported environment.

3.5 On-site and additional support may be provided to Customer by McKesson at McKesson's Prevailing Rates.

3.6 Updates: Customer must be current with regard to payment of fees due and payable to McKesson under the Agreement for McKesson to furnish Updates to Customer. McKesson reserves the right to amend the features and functionality of the Clinical Content and/or Software when applicable as part of the development cycle.

4. CONFIDENTIALITY; PROPRIETARY RIGHTS.

4.1 Confidential Information. Each party (the "Discloser") may disclose to the other party (the "Recipient") certain non-public information relating to the Discloser's business, including technical, marketing,

financial, personnel, planning, medical records and other information that is marked confidential or which the Recipient should reasonably know to be confidential given the nature of the information and the circumstance of disclosure ("Confidential Information"). Confidential Information of each party shall also include the terms of this Agreement and each Contract Supplement, but not the existence and general nature of this Agreement and each Contract Supplement. Confidential Information will not include any information:

(a) lawfully obtained or created by the Recipient independently of, and without use of, Discloser's Confidential Information and without breach of any obligation of confidence; or

(b) that is in or enters the public domain without breach of any obligation of confidence.

4.2 Use and Disclosure. Except as expressly permitted by this Agreement, the Recipient will:

(a) not disclose Discloser's Confidential Information except (i) to the employees or contractors of the Recipient to the extent that they need to know that Confidential Information for the purpose of performing the Recipient's obligations under this Agreement, and who are bound by confidentiality terms with respect to that Confidential Information no less restrictive than those contained in this Section 4; or (ii) as required to be disclosed by law, to the extent required to comply with that legal obligation, provided that the Recipient will promptly notify the Discloser of such obligation;

(b) use the Discloser's Confidential Information only for the purpose of performing Recipient's obligations under this Agreement; and

(c) use all reasonable care in handling and securing the Discloser's Confidential Information, and employ all reasonable data security measures that the Recipient ordinarily uses with respect to its own proprietary information of similar nature and importance.

4.3 Return of Confidential Information. The Recipient will return to the Discloser, and destroy or erase all of the Discloser's Confidential Information in tangible form, upon the expiration or termination of this Agreement, and the Recipient will promptly certify in writing to the Discloser that it has done so.

Page 274 of 305

4.4 HIPAA Business Associate Exhibit. McKesson agrees to the obligations set forth on Exhibit 1 attached hereto.

Memorial Hospital of Sweetwater County
 License Agreement No. 11332
 Customer No. MEM126
 June 21, 2006

4.5 **Right to Injunctive Relief.** McKesson and Customer expressly acknowledge and agree that the breach, or threatened breach, by a party of any provision of this Agreement may cause the other party to be irreparably harmed and that said party may not have an adequate remedy at law. Therefore, McKesson and Customer agree that upon such breach, or threatened breach, the non-breaching party will be entitled to seek injunctive relief to prevent the breaching party from commencing or continuing any action constituting such breach without having to post a bond or other security and without having to prove the inadequacy of any other available remedies. Nothing in this paragraph will be deemed to limit or abridge any other remedy available to the non-breaching party at law or in equity.

4.6 **Termination by Customer.** Customer may terminate this Agreement if McKesson has violated a material term of Exhibit 1 to this Agreement and has failed to cure such breach within thirty (30) days after Customer has provided McKesson with prompt written notice of such material breach.

4.7 **Proprietary Rights:** Customer acknowledges that the Software and/or Clinical Content licensed hereunder may be subject to copyright, and whether or not so subject, constitutes proprietary trade secret information of McKesson, and that Customer has no interest in or right to use the Software and/or Clinical Content except in accordance with the terms of this Agreement. McKesson retains all rights, title and interest in and to the Software and/or Clinical Content without regard to the media in which the Software and/or Clinical Content are expressed or embodied, including, without limitation, all copyrights, trade secrets, translations and other proprietary rights therein. Customer agrees that it shall hold the Software and/or Clinical Content in confidence, it shall not disclose or otherwise make the Software and/or Clinical Content or any part thereof available to any third party except to the extent permitted by this Agreement, and it shall take all reasonable steps and precautions to maintain the confidentiality of the Software and/or Clinical Content licensed hereunder. Customer further agrees as follows:

4.8 Customer shall not use the Software and/or the Clinical Content at any other Installation Site or allow the use of the Software and/or the Clinical Content by any entity not listed in a Contract Supplement as an "Affiliate" except during any period of time when Customer is temporarily prevented, due to causes beyond Customer's control, from using the Software or Clinical Content at the Installation Site for daily processing operations. During such periods, Customer may use the Software and/or Clinical Content at an alternate Installation Site, and if such use shall

continue for a period of more than thirty (30) days, Customer shall notify McKesson of the location of such Installation Site.

4.9 Customer shall not remove, or permit to be removed from, any item included in the Software and/or Clinical Content, including any proprietary, confidential or copyright notices, markings or legends placed thereon by McKesson.

4.10 Except as expressly set forth in this Agreement, Customer shall not, without the prior consent of McKesson, copy or duplicate by any means the Software, Clinical Content, Documentation or any item included therein except to the extent reasonably necessary to maintain backup or historical documentation or to implement or use the Software and/or Clinical Content, including, but not limited to, the copying or re-entry of the Clinical Content into any other media, software, database, or data retrieval system. Customer shall cause all proprietary, confidential and copyright notices, markings or legends which appear on any item included in the Software, Clinical Content or Documentation to be placed upon each such copy or duplication.

4.11 Customer shall not reverse engineer, de-compile, or disassemble the Software and/or Clinical Content, or create, attempt to create, or permit others to create derivative works from the Software and/or Clinical Content.

4.12 Unless otherwise expressly agreed, all changes, modifications, improvements or derivative works made or developed with regard to the Software and/or Clinical Content by McKesson or Customer, whether or not made or developed at Customer's request, shall remain the property of McKesson and, upon delivery or disclosure to Customer, shall be deemed to have been part of the Software and/or Clinical Content as of the date of this Agreement.

4.13 **Service Names and Marks:** Unless specifically licensed, neither party shall obtain any rights to any copyright symbols, trademarks, service names or service marks of the other party, nor shall either party conduct any activity or make any statement, written or oral, which in any manner may constitute an infringement upon the use of such trademarks, service names or service marks by the other party. The infringing party shall indemnify and hold harmless the non-infringing party against any action, claim or loss arising from any such infringement, including all costs and reasonable attorneys' fees.

5. WARRANTIES.

Memorial Hospital of Sweetwater County
 License Agreement No. 11332
 Customer No. MEM126
 June 21, 2006

5.1. McKesson warrants that the Software will be capable of performing in all material respects in accordance with all functional specifications set forth in the Documentation. McKesson does not warrant that operation of the Software will be uninterrupted or error free. McKesson has endeavored to assure the accuracy of the data supplied in the Software, but McKesson does not warrant that such data will be complete or error free. Customer will notify McKesson in writing of a breach of the foregoing warranty. Customer's exclusive remedy under this warranty shall be the repair or replacement of the Software.

5.2 The foregoing warranty set forth in Section 5.1 shall not apply:

(a) if Customer operates the Software on equipment that is not listed as a supported platform in the release notes;

(b) if a person or entity other than McKesson or its authorized third party supplier or agent modifies the Software, the data therein; or

(c) during any period of time that Customer is past due on any fees in accordance with the terms of this Agreement.

5.3. McKesson warrants that the Software, as delivered to Customer by McKesson, does not contain any virus, worm, trap door, back door or other device that would interfere with or disrupt the use of the Software in accordance with the Documentation or that would corrupt or erase any data.

5.4. Disclaimer: THE CLINICAL CONTENT (WITHOUT REGARD TO THE MEDIA IN WHICH IT IS EMBODIED OR EXPRESSED), IS PROVIDED ON AN "AS-IS" BASIS. With respect to a material defect in material or workmanship, written notice and an explanation of the circumstances of any claim that the Clinical Content has proved materially defective in material or workmanship shall be given promptly by Customer to McKesson. CUSTOMER'S SOLE AND EXCLUSIVE REMEDY IN THE EVENT OF A MATERIAL DEFECT IN THE CLINICAL CONTENT IS EXPRESSLY LIMITED TO THE CORRECTION OF SUCH BY McKESSON AT ITS SOLE EXPENSE. THE WARRANTIES EXPRESSLY PROVIDED IN THIS AGREEMENT ARE IN LIEU OF ALL OTHER WARRANTIES, EXPRESS AND IMPLIED, INCLUDING, BUT NOT LIMITED TO, ANY IMPLIED WARRANTIES OF MERCHANTABILITY AND, FITNESS FOR A PARTICULAR PURPOSE, WHICH WARRANTIES ARE HEREBY SPECIFICALLY DISCLAIMED.

5.5 Limitations. Customer

acknowledges that the Software and Clinical Content are not intended to prescribe, designate or limit medical care to be provided or procedures to be performed. Customer accepts responsibility for and acknowledges that it shall exercise its own independent judgment in its use of the Software and/or Clinical Content and shall be solely responsible for such use. Customer further acknowledges that it shall be solely responsible for any modifications, additions, alterations or other changes made by a person or entity other than McKesson or its authorized third party supplier or agent to the Software, the Clinical Content or the data therein.

6. INDEMNIFICATION.

6.1 Customer Indemnification. Notwithstanding the provisions of Section 7, McKesson agrees to indemnify, defend and hold harmless Customer from and against any claim asserted or suit or proceeding brought against Customer alleging that any McKesson owned Software and/or Clinical Content infringes a U.S. copyright or trade secret of a third-party, provided McKesson is given prompt written notice of, and full and complete authority, information and assistance in the defense of, such claim, suit or proceeding. McKesson shall not be responsible for the cost of any settlement of any such claim, suit or proceeding made without the written consent of McKesson. In addition, and at the option and expense of McKesson, McKesson may, at any time after any such claim has been asserted, and shall, in the event the Software and/or Clinical Content is held to constitute an infringement, either procure for Customer the right to continue using that Software and/or Clinical Content, or replace or modify that Software and/or Clinical Content so that it becomes non-infringing, provided that such replacement or modified Software and/or Clinical Content has the same functional characteristics as the infringing Software and/or Clinical Content, or, if the prior two remedies are commercially impractical in McKesson's reasonable opinion, accept a return of the infringing portion of the Software and/or Clinical Content and issue to Customer a reasonable credit based upon a pro-rated use. Customer may engage its own counsel, at its own expense, to advise Customer in connection with any such claim, suit or proceeding. McKesson shall not be liable to Customer under the terms of this Section 6.1 or otherwise if any infringement or claim is based upon the use of any Software and/or Clinical Content in violation of this Agreement, or in combination with any software or Clinical Content other than programs licensed by McKesson to Customer for such use, or arises from a Software and/or Clinical Content customization performed by McKesson for Customer based upon Customer's ideas, designs, or specifications. The

Memorial Hospital of Sweetwater County
 License Agreement No. 11332
 Customer No. MEM126
 June 21, 2006

foregoing provisions state the full extent of McKesson's responsibility with respect to the indemnity set forth herein.

6.2 McKesson Indemnification. The parties understand that all ultimate care and payment decisions are strictly and solely the obligation and responsibility of Customer and its providers and reviewers with McKesson having no right or standing to direct or control their uses of the Software and/or Clinical Content. Accordingly, Customer agrees to and hereby does indemnify, defend and hold McKesson harmless from and against all claims, suits, losses, demands, damages or expenses (including reasonable attorneys' fees, court costs and expert witness fees and expenses) arising out of Customer's use of or inability to use, the Clinical Content or the Software (or the use of or inability to use the Clinical Content or the Software by any person receiving the Clinical Content or the Software by or through Customer) provided, however, that McKesson (i) promptly notifies Customer in writing by certified mail of such claim, suit or proceeding; (ii) gives Customer the right to control and direct investigation, preparation, defense and settlement of any claim, suit or proceeding; and (iii) gives assistance and full cooperation for the defense of same. Customer shall not be obliged to pay damages (and costs, if any) to such third party until all appeals to courts of competent jurisdiction have been exhausted or the time for making such appeals has passed without an appeal being taken. Customer shall not be liable for amounts payable in connection with any settlement or compromise entered into by McKesson without Customer's prior written authorization.

7. LIMITATION OF LIABILITY.

7.1 Total Damages. MCKESSON'S TOTAL CUMULATIVE LIABILITY UNDER THIS AGREEMENT WITH RESPECT TO ANY SOFTWARE, CLINICAL CONTENT OR MARKS DELIVERED UNDER ANY CONTRACT SUPPLEMENT WILL BE LIMITED TO THE TOTAL FEES PAID (LESS ANY REFUNDS OR CREDITS) BY CUSTOMER TO MCKESSON UNDER SUCH CONTRACT SUPPLEMENT.

7.2 Exclusion of Damages. IN NO EVENT WILL MCKESSON BE LIABLE TO CUSTOMER UNDER, IN CONNECTION WITH, OR RELATED TO THIS AGREEMENT FOR ANY SPECIAL, PUNITIVE, INCIDENTAL, INDIRECT, EXEMPLARY, OR CONSEQUENTIAL DAMAGES, INCLUDING, BUT NOT LIMITED TO, LOST PROFITS OR LOSS OF GOODWILL, WHETHER BASED ON BREACH OF CONTRACT, WARRANTY, TORT, PRODUCT LIABILITY OR OTHERWISE, AND WHETHER OR NOT MCKESSON HAS BEEN ADVISED, KNEW OR

SHOULD HAVE KNOWN OF THE POSSIBILITY OF SUCH DAMAGE.

7.3 Material Consideration. THE PARTIES ACKNOWLEDGE AND AGREE THAT THE FOREGOING LIMITATIONS OF LIABILITY ARE CONDITIONS AND A MATERIAL CONSIDERATION FOR THEIR ENTRY INTO THIS AGREEMENT.

8. GENERAL

8.1 Assignment. Customer shall not assign this Agreement without the express written consent of McKesson, which consent shall not be unreasonably withheld. McKesson may, upon notice to Customer, assign this Agreement, in whole or in part, to any Affiliate or any entity resulting from the sale, combination or transfer of all or substantially all of the assets or capital stock, or from any other corporate form of reorganization by or of McKesson. Subject to all of the terms and conditions hereof, this Agreement inures to the benefit of and is binding upon the parties hereto and their successors and assigns.

8.2 McKesson may from time to time perform an audit to determine compliance with the terms of this Agreement upon reasonable notice. If an audit reveals that Customer's use of the Clinical Content and/or Software and its Documentation during the period being audited is in excess of the size representation described in an applicable Contract Supplement, then McKesson will have the right to invoice Customer for all such excess use based on the Prevailing Rate at the time the audit is completed and Customer will promptly pay any such invoice. If such excess use exceeds five percent (5%) of the applicable licensed use, then Customer will also pay McKesson's reasonable costs of conducting the audit. In addition, McKesson may recalculate any fees or other charges that are calculated on the basis of the number of usage-based variables, invoice Customer accordingly and Customer agrees to pay such invoice in accordance with the terms of this Agreement.

8.3 All fees shall be paid within thirty (30) days after the invoice date. In addition to all remedies available under law, unless the subject of reasonable dispute by Customer, all amounts owed hereunder not paid when due and payable shall bear interest from the date such amounts are due and payable at the lesser of (a) one and one-half percent (1.5%) per month, or (b) the maximum charge permitted by law, until fully paid. Reasonable out-of-pocket expenses incurred by McKesson in connection with services provided pursuant to this Agreement, including travel, lodging and living expenses, and other reasonable out-of-pocket expenses shall be billed to Customer by McKesson monthly. All

Memorial Hospital of Sweetwater County
 License Agreement No. 11332
 Customer No. MEM126
 June 21, 2006

amounts payable to McKesson under this Agreement are exclusive of all sales, use, value-added, withholding, and other taxes and duties (collectively "Taxes"). Customer shall promptly pay, and indemnify McKesson against, all Taxes assessed by any authority within or outside of the U.S. in connection with any such amounts, this Agreement, and McKesson's performance, except for Taxes payable on McKesson's net income. Customer shall reimburse McKesson for all reasonable costs incurred (including reasonable attorneys' fees) in collecting past due amounts owed by Customer.

8.4. Upon the termination of this Agreement or an applicable Contract Supplement, Customer shall cease using the applicable Software and/or Clinical Content and Documentation and Customer shall certify to McKesson in writing that all copies (in any form or media) of the Software and/or Clinical Content and Documentation, whether or not modified or incorporated into other materials, have been destroyed or returned to McKesson. Termination or expiration of this Agreement shall not relieve Customer's obligation to pay all fees due under the Agreement and shall not limit either Party from pursuing any other remedies available to it. In addition to those provisions which specifically provide for survival beyond expiration or termination, all provisions contained in this Section and all provisions, if any, regarding indemnification, warranty, limitations of liability, and confidentiality and/or protection of proprietary rights and trade secrets shall survive indefinitely or until the expiration of the time period specified elsewhere in this Agreement with respect to the provision in question.

8.5 Special Provisions for McKesson and Business Partner Software: "Business Partner Software" is any third party Software sublicensed or distributed by McKesson to Customer, as identified in the Contract Supplement. To the extent that the terms or conditions under which McKesson sublicenses or distributes any such software to Customer differ from the terms and conditions otherwise stated in this Agreement, said differences are stated in each applicable Contract Supplement or in shrinkwrap agreements provided with such software and such differences shall control. The parties agree the licensors of any Business Partner Software shall be third party beneficiaries with respect to the provisions of this Agreement as they relate to their respective Business Partner Software. In the event that McKesson can reasonably demonstrate the need to replace or substitute any Business Partner Software, the parties agree to negotiate in good faith as to the terms and conditions for Customer to obtain reasonably comparable software or to retain the Business Partner Software initially licensed.

8.6 The parties may publicly announce that they have entered into this Agreement and describe their relationship in general terms, excluding financial terms. The parties shall not make any other public announcement or press release regarding this Agreement or any activities performed under this Agreement without the prior written consent of the other party.

8.7 This Agreement is subject to any laws, orders or other restrictions on the export of Software and/or Clinical Content and related information and Documentation that may be imposed by governmental authorities. Customer shall comply with any governmental laws, orders or other restrictions on the export and re-export of Software and/or Clinical Content (including technical data and any related information and Documentation) which may be imposed from time to time by the governments of the United States and any country to which any Software and/or Clinical Content is shipped.

8.8 Canadian Transactions. If Licensee acquired this Criteria or Software in Canada, France, or other French-speaking countries, Licensee agrees to the following: The parties hereto have expressly required that the present Agreement and its Exhibits be drawn up in the English language. / Les parties aux présent contrat ont expressément exigé que ce contrat ainsi que ses Annexes soient rédigées en langue anglaise.

8.9 Under this license, McKesson will supply only commercial computer software, commercial computer software documentation and/or technical data customarily provided to the public with a commercial item or process. Accordingly, McKesson asserts the rights described in 48 C.F.R §§ 12.211-12. Alternatively, should the Government determine that this license is inconsistent with Federal law or otherwise fails to satisfy the Government's needs, McKesson then asserts restricted rights as prescribed by the Restricted Rights Notice (JUN 1987) contained in 48 C.F.R. § 52.227-14(g)(3). Moreover, if for any reason, 48 C.F.R § 12.211 is determined to be inapplicable to the technical data delivered under this license, then, at a minimum, McKesson asserts those rights contained in 48 C.F.R § 252.227-7015(b)(2). In this regard, the Government shall not use technical data to manufacture additional quantities of any item (except as provided in 48 C.F.R § 252.227-7015(b)(1)), nor shall the Government release, perform, display, disclose, or authorize use of such technical data outside the Government, without first obtaining McKesson's written permission.

Memorial Hospital of Sweetwater County
License Agreement No. 11332
Customer No. MEM128
June 21, 2006

8.10. McKesson and Customer agree to make available upon the written request of the Secretary of Health and Human Services or the Comptroller General, or their representatives, this Agreement and such books, documents and records as may be necessary to verify the nature and extent of the costs of the services rendered hereunder to the full extent required by the Centers for Medicare and Medicaid Services ("CMS" f/k/a the Health Care Financing Administration) implementing Section 952 of the Omnibus Reconciliation Act of 1980, codified at 42 U.S.C. Section 1395x(v)(1)(I), or by any other applicable federal or state authority.

8.11. This Agreement shall be governed by and construed in accordance with the laws in the state in which the Customer is located, exclusive of its rules governing choice of law and conflict of laws.

8.12. Any action of any kind arising out of or in any way connected with this Agreement, other than collection of outstanding payment obligations, must be

commenced within one (1) year of the date upon which the cause of action accrued.

8.13 This Agreement, including Contract Supplements, attachments, and exhibits, is the complete and exclusive agreement between the parties with respect to the subject matter hereof, superseding and replacing any and all prior agreements, communications, and understandings (both written and oral) regarding such subject matter. This Agreement may be modified, or any rights under it waived, only by a written document executed by both parties. Pre-printed or additional terms and conditions on or attached to Customer's purchase order shall be of no force or effect. Each Party executes this Agreement by its duly authorized representatives.

IN WITNESS WHEREOF, the Parties hereto have caused this Agreement to be duly executed as of the date set forth above.

MEMORIAL HOSPITAL OF SWEETWATE COUNTY

Signature: David Paugh

Printed Name: David Paugh

Title/Position: Chief Financial Officer

Date: 6/23/06

MCKESSON HEALTH SOLUTIONS LLC

Signature: [Signature]

Printed Name: Kevin Bullman

Title/Position: VP

Date: 6-26-06

Memorial Hospital of Sweetwater County
 License Agreement No. 11332
 Customer No. MEM126
 June 21, 2006

EXHIBIT 1

BUSINESS ASSOCIATE OBLIGATIONS

1. **DEFINITIONS.** All capitalized terms used herein that are not otherwise defined have the meanings ascribed in HIPAA.

"**Designated Record Set**" means a group of records maintained by or for Customer that are the medical records and/or billing records of individual patients or are otherwise used by Customer to make decisions about individual patients.

"**HIPAA**" means the Health Insurance Portability and Accountability Act of 1996 and the federal HIPAA privacy regulations at 45 C.F.R. parts 160 and 164.

"**Individually Identifiable Health Information**" means individually identifiable health information as defined at 45 C.F.R. § 164.501.

"**Protected Health Information**" or "**PHI**" means Individually Identifiable Health Information (transmitted or maintained in any form or medium) concerning Customer's patients or the patients of any of Customer's health care provider customers.

2. RESPONSIBILITIES OF THE PARTIES WITH RESPECT TO PROTECTED HEALTH INFORMATION

2.1 **Responsibilities of McKesson.** With regard to PHI obtained from Customer, McKesson agrees as follows:

(a) McKesson will use and/or disclose the PHI only as permitted or required by this Agreement or as required by law.

(b) McKesson will use appropriate safeguards to maintain the security of the PHI and to prevent unauthorized use or disclosure of PHI, which will in no event be any less than the means which McKesson uses to protect its own confidential information.

(c) McKesson will report to Customer any use or disclosure of PHI of which McKesson becomes aware that is not permitted by this Agreement.

(d) If McKesson is permitted to utilize an agent or subcontractor to perform any of its obligations under this Agreement, McKesson will require all such subcontractors and agents that receive or use, or have access to, PHI under the Agreement to agree, in writing, to the same restrictions and conditions on the use and/or disclosure of PHI that apply to McKesson pursuant to this Agreement.

(e) McKesson will make available its internal practices, books and records relating to the use and disclosure of PHI to the Secretary of HHS for purposes of determining Customer's compliance with HIPAA.

(f) McKesson will provide to Customer such information in McKesson's possession as is reasonably requested by Customer and necessary to enable Customer to respond to a request by an individual for an accounting of the disclosures of the individual's PHI in accordance with HIPAA.

(g) Unless otherwise explicitly stated in the applicable Contract Supplement, the parties do not intend for McKesson to maintain any PHI in a Designated Record Set for Customer. If McKesson maintains any PHI in a Designated Record Set, then McKesson agrees to (1) provide to Covered Entity such PHI in a timely fashion upon written request, and (2) to make amendments to such PHI in accordance with HIPAA.

(h) If McKesson believes it has a legal obligation to disclose any PHI, it will notify Customer as soon as reasonably practical after it learns of such obligation, and in any event within a time sufficiently in advance of the proposed release date such that Customer's rights would not be prejudiced, as to the legal requirement pursuant to which it believes the PHI must be released. If Customer objects to the release of such PHI, McKesson will allow Customer to exercise any legal rights or remedies McKesson might have to object to the release of the PHI, and McKesson agrees to

Memorial Hospital of Sweetwater County
 License Agreement No. 11332
 Customer No. MEM126
 June 21, 2006

provide such assistance to Customer, at Customer's expense, as Customer may reasonably request in connection therewith.

(i) As of the final compliance date established by the applicable regulation:

1. McKesson will implement administrative, physical, and technical safeguards that reasonably and appropriately protect the confidentiality, integrity, and availability of the electronic protected health information that it creates, receives, maintains, or transmits on behalf of Customer as required by HIPAA.
2. McKesson will ensure that any agent, including a subcontractor, to whom it provides such information agrees to implement reasonable and appropriate safeguards to protect it;
3. McKesson will report to Customer any security incident of which it becomes aware.

2.2 Responsibilities of Customer. Customer agrees to obtain any consent or authorization that may be required by HIPAA, or applicable state law, prior to furnishing McKesson with PHI. Customer agrees to timely notify McKesson, in writing, of any arrangements between Customer and the individual that is the subject of PHI that may impact in any manner the use and/or disclosure of that PHI by McKesson under this Agreement.

2.3 Effect of Changes of HIPAA Privacy Regulation on Responsibilities of the Parties. To the extent that any relevant provision of HIPAA is materially amended in a manner that changes the obligations of business associates or covered entities that are embodied in term(s) of this Agreement, the Parties agree to negotiate in good faith appropriate non-financial terms or amendment(s) to this Agreement to give effect to such revised obligations. In addition, the terms of this Agreement should be construed in light of any interpretation and/or guidance on HIPAA issued by HHS from time to time.

3. PERMITTED USES AND DISCLOSURES OF PROTECTED HEALTH INFORMATION.

3.1 Permitted Uses and Disclosures of PHI by McKesson. Except as specified below, McKesson may only access, duplicate or otherwise use or disclose PHI as necessary to perform its obligations under the Agreement, provided that such use or disclosure would not violate HIPAA if done by Customer. Unless otherwise permitted by this Agreement, McKesson will not permit the disclosure of any PHI to any person or entity other than such of its employees, agents or subcontractors who must have access to the PHI in order for McKesson to perform its obligations under this Agreement and who agree to keep such PHI confidential as required by this Agreement. Unless otherwise limited herein, McKesson may:

- (a) use the PHI in its possession for its proper management and administration and to fulfill any legal responsibilities of McKesson.
- (b) disclose the PHI in its possession to a third party for the purpose of McKesson's proper management and administration or to fulfill any legal responsibilities of McKesson, provided that (i) the disclosures are required by law, or (ii) McKesson has received from the third party reasonable assurances regarding the confidential handling of such PHI as required under HIPAA.
- (c) aggregate the PHI obtained by McKesson as a business associate.

4. TERMINATION OF AGREEMENT

4.1 Return of PHI. Upon the expiration or termination, for any reason, of this Agreement that requires the use of PHI by McKesson, McKesson will promptly return to Customer, or at Customer's sole option destroy, any PHI in its possession or control and will retain no copies of such PHI, and, unless otherwise expressly agreed to in writing, any right or license which McKesson has to use the PHI will terminate immediately upon such expiration or termination of this Agreement. If the destruction or return of the PHI is not reasonably feasible, the protections contained in this Agreement will continue to apply to any retained PHI, and any further use or disclosure of the PHI by McKesson is limited solely to those purposes that made the return or destruction of such PHI infeasible.

HOSPITAL- MEMORIAL HOSPITAL OF SWEETWATER COUNTY
 VENDOR- MCKESSON HEALTH SOLUTIONS 4274
 22423 NETWORK PLACE
 CHICAGO IL 60673-1224
 PHONE#
 FAX#
 CUST ID

SHIP TO-
 MEMORIAL HOSPITAL OF SWEETWATER COUNTY
 1200 COLLEGE DRIVE
 P.O. BOX 1359
 ROCK SPRINGS WY 82901
 PHONE# 307-362-3711
 TAX ID 83-6000-295

PURCHASE ORDER NO. M064997
 PAGE 1

TERMS	NET 30 DAYS	SHIP TO	CARRIER	CONFIRMED WITH	ORD DEPT	ORDERED DUE DATE				
LINE	QTY	UNIT	DESCRIPTION	CATALOG NO.	MANUFACTURER NO.	ITEM NO.	DEPT	UNIT-PACK	UNIT PRICE	EXTD PRICE
1	1	EA	PROJECT MGMT/EDUCATION/TECHNOLOGY/INSTALL INSTALL				810	10500.00	81055700	10500.00
2	1	YR	FIRST YEAR LICENSE FEE CARE ENHANCE				810	10000.00	10017200	10000.00
JULY 2006 THRU JULY 2007										
3	1	YR	SECOND YEAR LICENSE FEE CARE ENHANCE				810	15039.90	10017200	15039.90
JULY 2007 THRU JULY 2008										
4	1	YR	THIRD YEAR LICENSE FEE CARE ENHANCE				810	15039.90	10017200	15039.90
JULY 2008 THRU JULY 2009										
5	1	YR	FOURTH YEAR LICENSE FEE CARE ENHANCE				810	16809.30	10017200	16809.30
JULY 2009 THRU JULY 2010										
6	1	YR	FIFTH YEAR LICENSE FEE CARE ENHANCE				810	16809.30	10017200	16809.30
JULY 2010 THRU JULY 2011										

SIGNATURE: *Geoff Samsel*

BUYER: C SAMSEL

** TOTAL ** 84,198.40

COPY- 1

PROPRIETARY AND CONFIDENTIAL TO
MCKESSON HEALTH SOLUTIONS LLC

Contract Supplement No. 9751
June 21, 2006



Contract Supplement

Sold To:

Memorial Hospital of Sweetwater County ("Customer")
1200 College Drive
Rock Springs, WY 82902-1359

Ship To:

See Affiliate Information Listed Below.

Bill To:

Memorial Hospital of Sweetwater County
1200 College Drive
P.O. Box 1359
Rock Springs, WY 82902-1359
Telephone: (307) 352-8301
Facsimile: (307) 352-8175
Attention: Linda Mink
Title: Dir. Of Quality & Accreditation
Email: lmink@minershopsital.com

Download Central Administrator: Paul Tolman.

Contract Supplement to License Agreement # 11332, dated _____.

THIS CONTRACT SUPPLEMENT, including all Exhibits, Schedules, and Attachments hereto and incorporated herein (this "Contract Supplement") amends the agreement identified above including all Exhibits, Schedules, and Attachments thereto, and as amended (the "Agreement"), and is made effective as of the _____ day of _____, 2006 (the "Contract Supplement Effective Date"). Unless otherwise specifically and expressly set forth in this Contract Supplement, this Contract Supplement sets forth terms and conditions that apply only to the Affiliates, Software, Clinical Content and/or Services listed in this Contract Supplement. To the extent the terms and conditions of the Agreement are in conflict with this Contract Supplement, the terms of this Contract Supplement shall control. Where not different or in conflict with the terms, conditions and definitions of this Contract Supplement, all applicable terms, conditions, and definitions set forth in the Agreement are incorporated within this Contract Supplement as if set forth herein.

Upon the Contract Supplement Effective Date, add the following:

MCKESSON SOFTWARE AND/OR CLINICAL CONTENT:

AFFILIATE (name / address)	NO. OF COPIES	SOFTWARE and/or CLINICAL CONTENT	BEDS
Memorial Hospital of Sweetwater County 1200 College Drive Rock Springs, WY 82902-1359 Attention: Linda Mink	1 Included in Software above	CareEnhance® Clinical Management Software (CCMS®): CareEnhance® Review Manager Enterprise (Access and SQL version) InterQual® Clinical Content InterQual® Clinical Evidence Summaries	99
	3	InterQual® Level of Care Criteria: • Acute Adult	
	2	• Acute Pediatric	

PROPRIETARY AND CONFIDENTIAL TO
MCKESSON HEALTH SOLUTIONS LLC

Contract Supplement No. 9751
June 21, 2006

Payment Terms - License Fees:

\$10,000.00* due on the Contract Supplement Effective Date. Such fee includes a forty-three point forty-eight percent (43.48%) discount.

\$15,039.90* due on the first anniversary of the Contract Supplement Effective Date. Such fee includes a fifteen percent (15%) discount.

\$15,039.90* due on the second anniversary of the Contract Supplement Effective Date. Such fee includes a fifteen percent (15%) discount.

\$16,809.30* due on the third anniversary of the Contract Supplement Effective Date. Such fee includes a five percent (5%) discount.

\$16,809.30* due on the fourth anniversary of the Contract Supplement Effective Date. Such fee includes a five percent (5%) discount.

* plus any applicable taxes

Payment Terms - Services:

\$ 10,500.00 due on the Contract Supplement Effective Date.

Initial Term: Five (5) years beginning on the Contract Supplement Effective Date.

Alliance Partner: MidasPlus, Inc

Alliance Partner Application: MIDAS 7.0

Additional Provisions:

1. It shall be Customer's responsibility to ensure that all discounts or the appropriate net price received from McKesson pursuant to this Contract Supplement are properly reflected on any cost reports filed by Customer to any government entity.
2. Unless executed earlier, the pricing set forth herein is valid until June 30, 2006.
3. This Contract Supplement will be governed by the terms and conditions of the previously negotiated Business Associate Obligations agreement.
4. Attached hereto as Exhibit 1 are the Project Services Terms.
5. Attached hereto as Exhibit 2 is the Alliance Partner Schedule.
6. "Beds" means the number of hospital beds regularly maintained (set up and staffed for use) for inpatients by Customer or its Affiliate.

PROPRIETARY AND CONFIDENTIAL TO
MCKESSON HEALTH SOLUTIONS LLC

Contract Supplement No. 8751
June 21, 2006

7. Customer must include Purchase Order Number in order for McKesson to process shipping.

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

MCKESSON HEALTH SOLUTIONS LLC

Signature: David Paugh

Signature: [Handwritten Signature]

Printed Name: David Paugh

Printed Name: 16728 Arulanan

Title/Position: Chief Financial Officer

Title/Position: Dir

Date: 6/23/06

Date: 6-26-06

Customer PO #: _____

Federal Tax ID #: 83-6000295

Taxable Status: Tax Exempt

Tax Exemption ID #: 04001733

PROPRIETARY AND CONFIDENTIAL TO
MCKESSON HEALTH SOLUTIONS LLC

Contract Supplement No. 9751
June 21, 2006

EXHIBIT 1 TO CONTRACT SUPPLEMENT NO. 9751

PROJECT SERVICES TERMS

Customer agrees to pay McKesson the Project Service Fees as set forth below (the "Service Fees") which is payable as set forth in this Agreement.

Table 1: SERVICE PRICING

SERVICES	Fixed Fee (FF)
McKesson – Medical Management Group (MMG)	
<p>Implementation Services for Memorial Hospital of Sweetwater County: CareEnhance™ Review Manager Enterprise (CERMe) deployed with an Alliance Partner (Midas)</p> <p><i>Project Service Fees represent the implementation deliverables as outlined in this document. Any services/deliverables that are beyond the scope of the Project Services, but mutually agreed to will be billed based on the scope of additional services to be provided, and the terms and conditions (including fees to be paid) pursuant to which such additional services shall be provided by McKesson. Customer and McKesson will agree upon any modifications to the Project Services and Service Fees in writing.</i></p>	
Project Management Services	included
Product Education Services	included
Technology Services	included
TOTAL PROJECT SERVICES:	\$10,500.00

DEFINITION OF BILL TYPES

Fixed Fee (FF) - Fixed Fee means that the Project Services will be delivered by McKesson at a set price determined by McKesson taking into account the project scope, and the time and resources necessary to complete the project scope.

Time and Materials Fees (T&M) - Time and Materials means that the Project Services will be delivered by McKesson on a time and materials basis such that the fees payable by Customer will be based on the hours spent by McKesson multiplied by the applicable hourly rate. McKesson may estimate the amount of hours and/or days necessary to provide the services.

ASSUMPTIONS

Project Assumptions:

- Services are limited to the Deliverables specifically documented herein.
- McKesson will assign an implementation team to Customer staffed with Product and Technical Consultants.
- Pricing assumes a centralized project implementation team.
- Customer will assign representatives from appropriate technical and user departments as defined in the CareEnhance™ Review Manager Enterprise (CERMe) Customer Profile and will ensure that dedicated resources have the bandwidth to dedicate to this project.
- The duration of the project is largely dependent on the scheduling and completion of training and the availability of Customer resources.
- The Customer is responsible for ensuring that dedicated resources are allocated to this project, as defined in the Customer Resource Profile.
- A change in Customer Resource(s) (project team) may result in a Change of Scope for the Implementation Project.
- Night and Weekend technical and/or consulting support is not included in the Project Services.
- The project length does not reflect the total length of time involved in completing the implementation and training. Completion is a Customer-driven initiative based on resource allocation and/or organizational requirements.
- Project Services are for implementation at one facility at one site.
- The Project Service Fees do not include related travel and expenses incurred to provide Project Services. Customer is responsible for all reasonable travel-related expenses incurred in connection with the Project Services. If McKesson conducts services at Customer's location, Customer shall reimburse McKesson for all reasonable travel, living and out-of-pocket expenses incurred by McKesson.
- Customer will coordinate the facilities (including projector, screen, white board and power supply), in addition to the hardware and software installation required for any meetings or training sessions held at Customer site. Customer must provide appropriate

Page 286 of 305

**PROPRIETARY AND CONFIDENTIAL TO
MCKESSON HEALTH SOLUTIONS LLC**Contract Supplement No. 9751
June 21, 2006

classroom setting with one computer for each attendee (For training, McKesson recommends a classroom format with all tables and participants facing forward).

13. **The Project Services will be for the initial installation of CareEnhance™ Review Manager Enterprise (CERMe).**
14. Customer will identify a single Customer executive to serve as a single point of contact for the McKesson Implementation Project Manager and to expedite decisions on all critical issues that impact the implementation schedule, costs and scope boundaries.
15. Customer will provide all necessary legal and risk management review.

Technical Assumptions:

1. Customer must have the appropriate hardware and software available to support CareEnhance™ Review Manager Enterprise (CERMe). Customer is responsible for resolving any data integrity issues identified.
2. McKesson does not provide database administration or operating system training.
3. The Service pricing assumes no custom modification, web, interface, conversion or programming services unless otherwise specified. Modifications and custom services are available for an additional fee and will be scheduled separately.
4. Customer is responsible for all Alliance Partner related activities that occur during the CERMe implementation.
5. Customer will identify a competent, on-site technical support person to provide all necessary Information System (IS) services and personal computer (PC) technical support during the course of the implementation project.
6. Customer will provide all necessary Information Systems support resources; acquire all hardware, software, install, configure and test the database server and workstation hardware
7. Customer will be responsible for the computing environment set up and for maintenance. The computing environment will meet the minimum recommended specifications defined by McKesson. Installation of the computing environment will be complete prior to installation of the licensed software.
8. At all times, including during software installation, Customer shall give McKesson reasonable access, including but not limited to remote access, to the equipment upon which the Software resides and to the software itself.
9. Data will only be edited in the system where it was originally entered.
10. No information will be transferred from CareEnhance™ Review Manager Enterprise (CERMe) to Customer Data System.
11. Customer will use its internal "help desk" as the first line of support for end-users after the "go-live" date. The Customer's help desk personnel will contact McKesson's hotline after the issue has been appropriately screened by the Customer.

Training Assumptions:

1. McKesson delivers training and consulting related to McKesson developed products only.
2. Pricing for the InterQual™ Criteria training programs assumes an end-user training methodology for user education unless otherwise specified.
3. Customer is responsible for all shipping costs for training materials.
4. Customer is responsible for creating customized ad hoc reports.
5. All end user training will be performed using the CareEnhance™ Review Manager Enterprise (CERMe) Training Database unless otherwise specified; McKesson recommends that the Customer's productive system is used for report training to allow exploration of the Customer's data.
6. On-site and remote training sessions are limited to the maximum number of participants per class specified in Table 2, Service Deliverables.
7. Customer must have CERMe installed and tested in a training environment prior to on-site training.
8. Customer must complete System Administration training and configure the System Administration module before attending any other training courses.
9. Continuing education credits will be issued for qualified courses and to those participants who provide nursing license numbers and signatures.

BENEFITS

By providing healthcare organizations with increased ownership and control over the deployment process, the Project Services deliverables reduce implementation costs while optimizing resource utilization and improving the deployment process. The implementation methodology utilized by McKesson also allows healthcare organizations to:

1. Utilize the expertise and implementation experience of the McKesson CareEnhance™ Call Center Software Services Team to assist with implementation and decision processes related to CareEnhance™ Review Manager Enterprise (CERMe).
2. Utilize the implementation guidelines as a tool for subsequent roll out.
3. Enable Customer to independently roll out or deploy the licensed software to additional Facilities as agreed upon in the software license.
4. Help Customers define their workflow process at each Facility through McKesson's utilization of implementation methodology based on "Best Practices."
5. Utilize the training methodologies and tools presented in the McKesson product curriculum to continue quality staff education on an as-needed basis.
6. Empower the Customer to independently maintain the system post implementation.

PROJECT LENGTH

**PROPRIETARY AND CONFIDENTIAL TO
MCKESSON HEALTH SOLUTIONS LLC**

Contract Supplement No. 9751
June 21, 2008

Upon execution of this contract, McKesson will commence delivery of the Project Services on a mutually agreeable date. The duration of the Project Services is estimated to be no more than 28 weeks from the initial planning session through the productive use phase. Customer acknowledges that the full deployment of each product may extend beyond the lengths indicated in this Agreement. The full deployment is the responsibility of Customer, unless additional services are purchased which provide for extended McKesson implementation services assistance. This period of time may vary due to the complexity of the environment or other implementation activity. This duration of the Project Services is largely dependent on the extent of interface development efforts and the availability of Customer resources. The implementation is considered complete 10 business days after productive use.

CUSTOMER RESOURCE PROFILE - CareEnhance™ Review Manager Enterprise (CERMe)

The Customer is responsible for establishing the necessary project personnel required to successfully implement the product(s). The Customer's project team is recommended, at a minimum, to consist of a Clinical Lead, Technical Lead and Project Manager. The number and specific responsibilities of team members are based upon Customer organizational structure and local needs determination.

1. In some cases, an individual may assume more than one role; regardless, all of the roles must be addressed. Combination of roles will increase the Customer's risk for success and may extend the timeline significantly.
2. A change in Customer resources will impact the scope of the project, resulting in additional training needs and extending the timeline and budget of the project. It is recommended that resources be assigned with long-term commitment in mind.

CANCELLATION POLICY

Should Customer decide to cancel the training program, Customer will be responsible for all costs incurred by McKesson Health Solutions up to the date of cancellation. The training program may be rescheduled 20 business days before training dates without incurring cancellation fees. Training can be cancelled/rescheduled once within a 12 month period, according to the follow provisions:

- Cancellations made at least 21 days prior to the training date will incur a minimal financial penalty and are based on resource availability.
- Cancellations made less than 21 days prior to the training date will incur payment of program and shipping fees, as well as travel expenses.

McKesson will not cancel but may reschedule (without financial penalty training dates due to circumstances beyond our control such as: extreme illness, accident, terrorism, and/or system failure).

PROCEDURE FOR CHANGE OF SCOPE

1. Customer may request changes to the project at any time. Since a change could affect the estimated completion, estimated effort or project scope, all changes must be submitted, evaluated and approved by the Customer and the McKesson teams prior to altering the Statement of Work or the project plan.
2. Any change to the items listed in section *Deliverables* will be subject to review by the project team. The team will evaluate whether the change is within the scope of this Statement of Work. If it is not within the scope and requires additional resources to complete, the change may be subject to McKesson consulting fees at the consulting rate below:

Hourly Rate	Resource
\$200.00	Technical Consultant
\$200.00	Clinical Consultant
\$200.00	Analytical Consultant

Hourly Rate	Resource
\$200.00	Project Manager
\$250.00	Database Administrator

3. Change requests may impact the project plan as their evaluation will take project team members time away from project tasks. The following steps will be followed prior to implementing a change:
 - The party requesting the change will complete a *Change Request Form* provided by the McKesson Project Manager during the Project Kick-off Meeting. The Request Form must describe the change, rationale for the change and the effect the change will have on the project. The completed request form will be submitted to the McKesson Project Manager.
 - The Project Team will review the proposed change to determine its impact to the project. The McKesson Project Manager and Customer Project manager will provide written approval or rejection.
 - If the team approves the change, the Statement of Work and the project plan will be updated to reflect the change and its impact to the project. The change will also be communicated through the Status Report.
4. If a change is rejected, it will be maintained in the Change Request Log and re-evaluated for completion during the next phase of the project.

PROPRIETARY AND CONFIDENTIAL TO
MCKESSON HEALTH SOLUTIONS LLC

Contract Supplement No. 9751
June 21, 2006

Table 2: DELIVERABLES

Material #	Project Management Services
74008035	<p>Standard Project Management Services (remote support throughout the installation)</p> <p>Project Management support will be provided throughout the implementation project. The Project is considered complete 10 business days after the last training or entry of the first review – whichever occurs first.</p> <ul style="list-style-type: none"> • Review scope of services • Identify McKesson and customer roles and responsibilities • Coordinate Kick-off call with team members • Facilitate scheduling of clinical and technical services • Identify and resolve implementation issues • Transition to product support and account management

Material #	Technical Education Services	Length	Location	Maximum Participants
75003072	Web-based training covering Navigations and System Access and Security Settings for CareEnhance™ Review Manager Enterprise Software	1 session (2 hours)	Via the Web	5 participants (5 internet connections)
75003071	Web-based training covering Navigations for the CareEnhance™ Review Manager Enterprise Software	1 session (2 hours)	Via the Web	5 participants (5 internet connections)
74008044	Web-based program covering a technical overview of the CareEnhance™ Review Manager Enterprise Software	1 session (3 hours)	Via the Web	5 participants (5 internet connections)

Material #	Technical Consulting Services	Location	Maximum Participants
74008039	<p>Technical Consulting on Installation and Configuration of Software (remote support)</p> <ul style="list-style-type: none"> ▪ Assist with System Access and Navigations courses as necessary ▪ Review of CERMe environment and configuration settings ▪ Assistance with installation and testing of CERMe software ▪ Assist with customer training room installation ▪ Review of Desktop PC • Provide remote technical support before, during and up to 10 days after productive-use 	Remote Support	N/A

Material #	InterQual Criteria Training	Length	Location	Maximum Participants
75002917	Standard on-site training on InterQual™ Acute Criteria with CareEnhance™ Review Manager Enterprise Software	1 session (1.5 days)	Client's site	10 per session

PROPRIETARY AND CONFIDENTIAL TO
MCKESSON HEALTH SOLUTIONS LLC

Contract Supplement No. 9751
June 21, 2006

EXHIBIT 2

ALLIANCE PARTNER SCHEDULE

"Alliance Partner" means a McKesson approved third party listed hereunder (i) which has manufactured a healthcare software application and McKesson validated integration between the application and the Software, including Clinical Content and (ii) with which Customer has established a direct relationship to license, including interface software, updates, maintenance and support of said application and integration and resulting in said application and integration.

Alliance Partner: **MidasPlus, Inc**

Currently Validated Alliance Partner Application: **MIDAS 7.0**

Customer may not install any integration to the Software without the prior written consent of McKesson. Only integrations from McKesson's Alliance Partners, or other integrations that have been approved by McKesson in writing, are permitted to be used in conjunction with the Software. Additionally, notwithstanding anything to the contrary in this Agreement, Customer is solely responsible for securing the installation, updates, support, and maintenance of any integration. Customer shall not implement an Alliance Partner integration for a new release or update until the Alliance Partner has obtained a validation certificate from McKesson.

WITH RESPECT TO ANY PRODUCT AND/OR INTEGRATION MANUFACTURED BY AN ALLIANCE PARTNER OR NOT MANUFACTURED BY MCKESSON, CUSTOMER SHALL LOOK TO THE ALLIANCE PARTNER OR MANUFACTURER OF THE PRODUCT AND/OR INTEGRATION FOR ANY WARRANTY THEREON. MCKESSON DOES NOT REPRESENT OR WARRANT THAT ANY ALLIANCE PARTNER REFERENCED HEREIN OR UNDER ANY APPLICABLE CONTRACT SUPPLEMENT HAS VALIDATED WITH ANY PARTICULAR VERSION OF THE SOFTWARE AND/OR CLINICAL CONTENT. NO ORAL OR WRITTEN INFORMATION OR ADVICE PROVIDED BY MCKESSON, ITS AGENTS OR EMPLOYEES WILL CREATE ANY WARRANTY OR IN ANY WAY INCREASE THE SCOPE OF THE WARRANTIES EXPRESSLY PROVIDED IN THIS AGREEMENT.

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: **RUMOR DIGITAL MARKETING SERVICE AGREEMENT**

2. Purpose of contract, including scope and description: **Rumor creates and manages all of our digital advertising through Facebook, Google, etc.**

These digital ads are geo-targeted to our service area. The digital marketing director retargets the advertising to people based on their geographic locations. They also retarget based on who visits our website and certain pages of our website. It's all done through the Google Display Network. Ads can retarget to popular news and sports sites that you frequent.

For example, if you've been searching for an obstetrics doctor and are an avid reader of the New York Times, you may see Dr. Grewal's ad while you're reading a digital news story on your phone.

They also establish conversions through those ads with a phone number that tracks phone calls to the various specialties we're advertising.

3. Effective Date: **When approved and signed by MHSC**

4. Expiration Date: **one year from effective date**

5. Rights of renewal and termination yes month to month after initial year.
Can terminate with 30 days-notice but can't submit it until after the initial term (non-cancelable term) Is this auto-renew? Yes if notice isn't given

6. Monetary cost of the contract and is the cost included in the department budget? **\$5500.00 month for total of \$66,000.00 year. May be additional charges for content creation. This is in the Marketing budget**

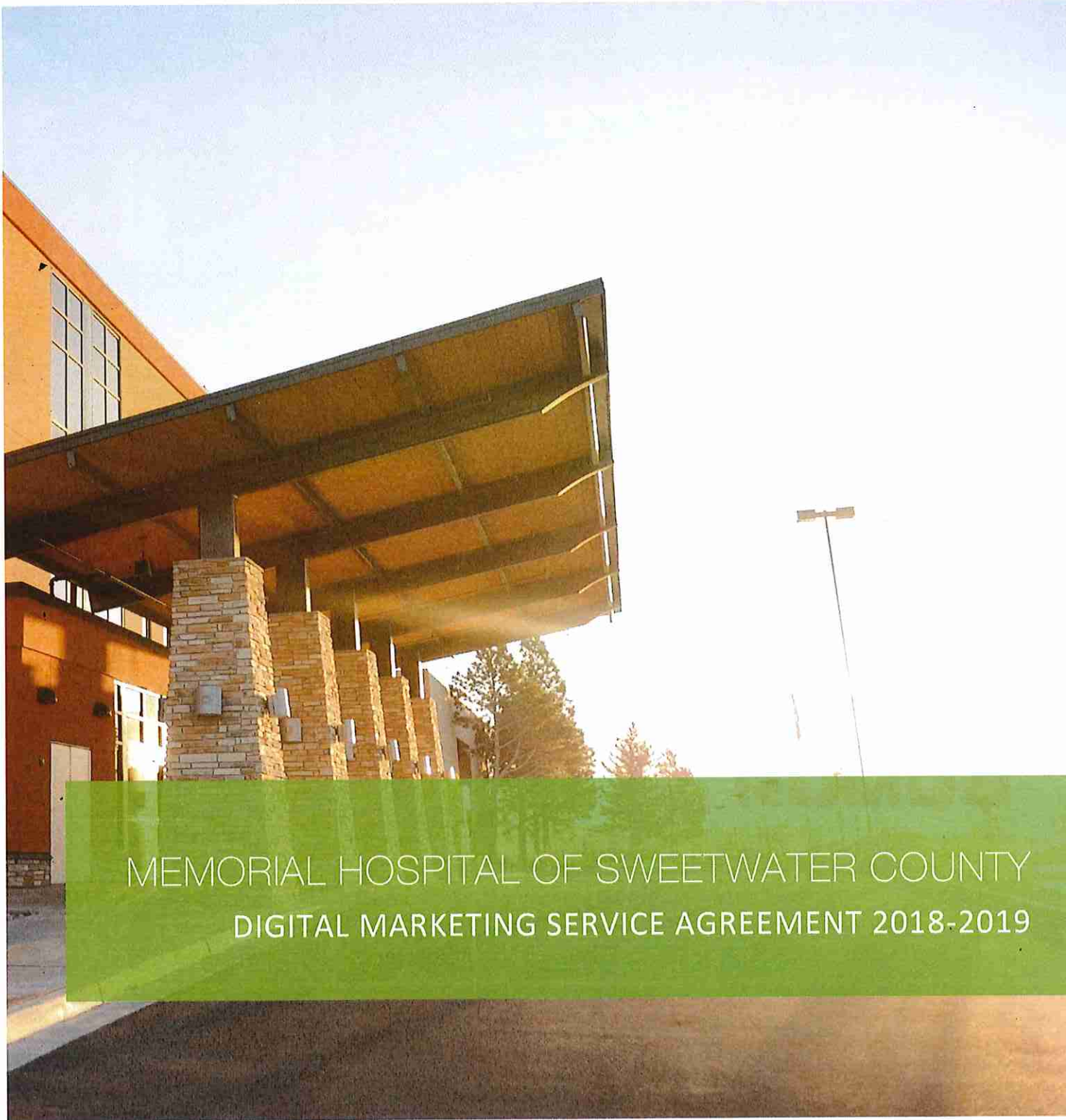
7. Jurisdiction/Choice of Law provision checked and changed to Wyoming if able to so. **Utah**

8. Any confidentiality provisions? **No**

9. Indemnification clause present? **Yes section 8**

10. Is this contract appropriate for other bids? **We do not, now, take bids on this contract. We emphasize creative direction and digital marketing capabilities. However, we will be looking at companies that may also host our website. In the coming 3-6 months, we will be taking proposals on website redesign and hosting. We specifically will look closely at companies that also have creative and geo-targeting capabilities for digital marketing.**

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



MEMORIAL HOSPITAL OF SWEETWATER COUNTY
DIGITAL MARKETING SERVICE AGREEMENT 2018-2019



Online Marketing Services Program

This RUMOR Online Marketing Services Program Order Form ("Order Form") is made and entered into as of the effective date specified between RUMOR (hereinafter "Company") and Memorial Hospital of Sweetwater County (herein "Client").

Client hereby retains Company, and Company hereby agrees to provide the Client an Online Marketing Services Program ("Program") listed in the table below and summarized herein.

Client gives Company permission to bill Client up to five thousand five hundred (\$5,500) per month as per this agreement. Client is given 30 days from the date of invoice to pay the amount due. Client hereby agrees to pay the monthly installment within the agreed upon terms. Company may charge Client any outstanding amounts and, in the case of delinquent payments, interest and other charges set forth in the Agreement, any credit card processing fees, and a five percent (5%) late fee. Interest and penalties shall be compounded until paid in full.

Online Marketing Service Agreement

Online Marketing Description <i>(Ongoing month-to-month)</i>	Monthly Budget
Google AdWords & Facebook Advertising Management	\$1,500
Facebook Ad Spend*	\$1,500 - \$2,000
Google AdWords Ad Spend*	\$2,000 - \$2,500
Maximum Monthly Payment	\$5,000 - \$5,500

* Google AdWords and Facebook advertising budgets will be allowed to fluctuate periodically under this Agreement as directed in writing by the Client, or as recommended by Company, so long as ad budget fluctuations do not exceed the maximum monthly payment range (\$5,000 - \$5,500).



DIGITAL MARKETING SERVICE AGREEMENT

Services Renewal

Services are provided under the terms and conditions of the Online Marketing Services Program Agreement (the "Agreement") located on following pages, which is incorporated fully herein by this reference. Terms not defined in this Order Form shall have the same meanings as those reflected in the Agreement.

The term of this Agreement shall be twelve (12) months, beginning with the effective date of services listed below. Client's subscription to the Services hereunder will automatically renew at the expiration of the initial term on a month-to-month basis at the monthly rate for the described Program. Should Client wish to terminate their subscription of Services after the initial term, Client shall give the Company thirty (30) days advance written notice of termination, which cannot be submitted until after the non-cancellable period of Client's initial term of Services herein. Upon termination of Client's Services, any and all outstanding charges and other costs and expenses owed pursuant to their Services shall be immediately due and payable by Client to Company.

Online Marketing Terms and Conditions

Client's initials below indicate acceptance of the Service Agreement and Terms and Conditions.

Initials: _____

Client's signature below indicates acceptance of this Program as set forth in the Order Form above. Monthly payment must be received before contracted services will commence. Services will be effective as of the date written below.

Effective Date of Services: _____

RUMOR (Company)

MHSC (Client)

Signature: _____

Signature: _____

Print Name: _____

Print Name: _____

Title: _____

Title: _____

TERMS AND CONDITIONS

Thank you for choosing RUMOR. This Online Marketing Services Agreement (the "Agreement") is between RUMOR Advertising (hereinafter "Company") and Memorial Hospital of Sweetwater County ("Client"). Separate proposals or work orders outside this agreement are subject to the General Terms and Conditions set forth below.

1. TERMS OF AGREEMENT

- a) **Exclusivity.** Company will perform, on an exclusive basis, all online marketing tasks for Client set forth in the Proposal. Client hereby authorizes Company to act on its behalf on all online marketing matters.
- b) **Term of Agreement.** In the absence of a contrary provision in the Proposal, and subject to the termination provisions herein, Client authorizes Company to act on its behalf for the term of this Agreement commencing on the Effective Date listed herein (the "Initial Term"). If not sooner terminated, the term of this Agreement will automatically renew to month-to-month periods following the conclusion of the Initial Term.
- c) **No Services without Execution of Agreement.** Company shall not perform online marketing services on behalf of Client unless and until Client executes, agrees to and enters into this Agreement.
- d) **Budget.** Company will not exceed Client's maximum monthly payment as listed herein, or for a separate work order for a campaign or project, without first obtaining written permission from Client.
- e) **Notification.** Client agrees to notify and to permit Company to notify, on its behalf, any online marketing entities to inform them of Client's selection of Company as its Agent. Client further agrees to notify and direct all online marketing solicitations to Company.
- f) **Client Approval.** Client shall be responsible for approving all material, including the accuracy of its content (including any representations, claims, offers, promises, guarantees and contact information) before it is published or forwarded to online service providers. The Company will use its best reasonable efforts to prepare accurate information, subject to Client's final responsibility to proof and confirm that the content is accurate.

2. PAYMENT AND BILLING TERMS AND CONDITIONS

- a) **Time.** Unless otherwise set forth in the Proposal, all payments for online marketing services are to be paid in advance by Client to Company, as invoiced by Company, before any online marketing services are provided, purchased, or implemented.
- b) **Materiality.** Time is of the essence with this Agreement. Payment dates are a material term of this Agreement. Upon Client's failure to make timely payment, Company, in its own discretion, may immediately discontinue further performance under, or terminate, this Agreement.
- c) **Content Creation.** At client's request, Company will provide copywriting, graphic design, photography or other services as requested by the Client. Client agrees to pay \$175 for each hour of additional services performed outside the scope of this agreement for, or on behalf of, Client by Company and Company's employees, consultants, contractors and agents.

TERMS AND CONDITIONS

- d) **Web Development.** At client's request, Company will provide web development services to client. Client agrees to pay \$175 for each hour of web development services performed for, or on behalf of, Client by Company and Company's employees, consultants, contractors and agents.
- e) **Right to Modify Terms of Payment.** Upon reasonable belief of Company that Client's credit has been impaired, Company may request adequate assurances from Client verifying Client's ability to pay on an ongoing basis. In the absence of reasonable assurances, Company may request advance payment and an additional retainer against estimates of future service fees for a period of three (3) months. If the parties do not agree on such modified payment terms, Company may terminate the Agreement.
- f) **Billing and Collection.** Company will invoice Client monthly for the services specific to this Agreement, or as needed for other services as requested by Client outside the scope of this agreement. Any invoice or payment that is delinquent for more than fifteen (15) days may, in the Company's sole discretion, be subject to interest at the rate of 1.5% per month (18% per annum) from the original due date or the highest rate allowable under applicable law, whichever is less. If any balance remains unpaid for a period of thirty (30) days, Company may terminate the agreement immediately and endeavor to collect any outstanding balance by means of applicable legal procedures, including without limitation, referral to a collection agency or institution of legal proceedings. Client shall be responsible for all collection costs, including actual reasonable collection fees of 35% and attorney's fees.
- g) **Credit Card Charges.** If the applicable project specifies that payment will be made by commercial or personal credit card specified by Client, Company may charge the client's credit card on file with the Company for the full amount, plus any outstanding amounts, in the case of delinquent payments, interest and other charges set forth in the Agreement, any credit card processing fees, and a five percent (5%) late fee. Interest and penalties shall be compounded until paid in full.

3. TERMINATION

- a) **Non-cancellable Period.** Should Client wish to terminate this Agreement after the initial contract term as noted in Proposal (non-cancellable period), Client shall give the Company thirty (30) days advance written notice of termination, which cannot be submitted until after the non-cancellable period.
- b) **Mid-month Cancellation.** Client cancelling mid-month will still be responsible for paying the month in full by Client to Company, as invoiced by Company. Upon termination of this Agreement, any and all outstanding media, marketing, graphic design and web maintenance and design and other costs and expenses owed pursuant to this Agreement shall be immediately due and payable by Client to Company.
- c) **By Client.** If Client terminates this Agreement prior to its expiration, Client shall pay Company the agreed upon rate for services (including preparatory work) provided to Client or contracted for by the Company on Client's behalf through the date of termination plus any applicable penalties, liquidated damages, costs and expenses incurred by Company resulting from termination including, but not limited to, expenses incurred in connection with the cancellation of media purchases and contracts and web hosting or servicing contracts.

TERMS AND CONDITIONS

- d) **By Company.** If Company terminates this Agreement prior to its expiration (other than for cause), and Company and Client cannot agree on a satisfactory substitute day or time for continuance of services covered by this Agreement at rates upon which this Agreement is based, Client shall pay Company for only services made through the date of termination without penalty; that is, Client shall have the benefit of the same discounts which it would have earned had it been allowed to complete the contract in the event of termination hereunder.
- e) **Website Design and Implementation.** The Company invests a great deal of time and effort into creating a one-of-a-kind website that is specifically designed for the Client; therefore, the website design and implementation service fees are not refundable or cancellable. Upon termination of this Agreement, any and all outstanding graphic design, web maintenance and design and other costs and expenses owed pursuant to this Agreement shall be immediately due and payable by Client to Company.

4. EFFECT OF BREACH

- a) **By Client.** Company shall have the right to terminate this Agreement at any time following default by Client in the payment of amounts owed, as set forth in the applicable Proposal, or any other material breach of the terms of this Agreement that remains uncured following a thirty (30) day written notice of such breach. Upon termination, all amounts then owed by Client pursuant to this Agreement shall become immediately due and payable.
- b) **By Company.** If Client terminates this Agreement based upon Company's material breach of the terms of this Agreement, which breach remains uncured following a thirty (30) day written notice of such breach, Company's liability shall be limited to the payment, as liquidated damages, of a net sum equal to Client's actual non-cancellable costs incurred by Client for the online marketing services for the remainder of the term of the Agreement.

5. NATURAL AND UNAVOIDABLE CATASTROPHES

If, due to public emergency or necessity, force majeure, restriction imposed by law, acts of God, labor disputes, or for any other cause reasonably beyond Company's control, Company is unable to perform online marketing or advertising pursuant to this Agreement, Company shall not be liable to Client or any other party for the damages incurred in connection with such failure.

6. SUBSTITUTION OF ONLINE PROGRAM

Company may substitute or accept substitution of online marketing programs on the condition substitution meets the requirements of the marketing campaigns required pursuant to this Agreement and the applicable Proposal.

7. THIRD-PARTY SERVICES AND CONTRACTORS

Unless otherwise noted on the face of this Agreement or applicable Proposal, all online marketing fees incurred for third-party services shall be invoiced by Company and paid by Client in advance.

8. INDEMNIFICATION

TO THE MAXIMUM EXTENT PERMITTED BY LAW, CLIENT AGREES TO DEFEND, INDEMNIFY AND HOLD HARMLESS COMPANY, ITS AFFILIATES, AND THEIR RESPECTIVE DIRECTORS, OFFICERS, EMPLOYEES AND AGENTS FROM AND AGAINST ANY AND ALL

TERMS AND CONDITIONS

CLAIMS, ACTIONS, SUITS OR PROCEEDINGS, AS WELL AS ANY AND ALL LOSSES, LIABILITIES, DAMAGES, COSTS AND EXPENSES, INCLUDING ACTUAL REASONABLE ATTORNEYS FEES, (COLLECTIVELY "CLAIMS") TO THE EXTENT SUCH CLAIMS ARISE FROM OR IN ANY MANNER RELATED (DIRECTLY OR INDIRECTLY) TO ANY WORK PERFORMED OR SERVICES PROVIDED UNDER THIS AGREEMENT; THE CONTENT OF ANY WEBSITES, ONLINE MARKETING, ADVERTISING OR MARKETING ADS, COPY AND MATERIALS PREPARED BY COMPANY FOR OR ON BEHALF OF CLIENT; ANY BREACH OF AN AGREEMENT BETWEEN CLIENT AND A THIRD-PARTY; ANY VIOLATION OF ANY FEDERAL, STATE, OR LOCAL LAW OR REGULATIONS; OR A THIRD PARTY; AND ANY BREACH OF THE TERMS OF THIS AGREEMENT BY CLIENT.

9. GENERAL

- a) **Online Marketing Responsiveness.** To the best of Company's ability, Company will place the online marketing ads covered by this Agreement on the days and/or approximate times as communicated by Company or as mutually agreed by Company and Client.
- b) **Assignment and Waiver.** This Agreement and any ancillary Proposals or projects may not be assigned or transferred by Client without first obtaining the written consent of Company; nor may Company be required to perform online marketing services hereunder for the benefit of anyone other than Client. The failure of either party to enforce any rights granted hereunder shall not be deemed a waiver by that party as to subsequent enforcement of rights or subsequent actions in the event of future breach.
- c) **Governing Law, Venue, and Jurisdiction.** This Agreement shall be governed by the laws of the State of Utah. The exclusive venue for any litigation or court action arising out of or related to this Agreement shall be in the state and federal courts located in Salt Lake County, Utah. Company and Client consent to the jurisdiction of the courts located in Salt Lake County, Utah for all litigation and court action arising out of or related to this Agreement. The parties acknowledge and agree that the provision of certain Services under this Agreement and applicable Proposals may be subject to the Rules and Regulations and the administrative decisions of the Federal Communications Commission made pursuant to its quasi-legislative and quasi-judicial powers.
- d) **Joint Drafting.** Both Company and Client have had the opportunity to review and recommend changes to this Agreement and to seek professional input as desired. Ambiguities of intent or language shall not be construed against either party.
- e) **Severability.** If any part of this Agreement is unenforceable, the remainder of this Agreement will continue in full force and effect.
- f) **Entire Agreement.** This Agreement contains the entire agreement between the parties relating to the subject matter herein contained. This Agreement may be changed by Company at any time without prior notice.

Page 299 of 305

10. TRANSFER OF AGREEMENT

Client may not assign or transfer this Agreement, in whole or in part without the prior written consent of Company. In the event that Client contemplates whole or partial sale of its business, ownership change, or change in jurisdiction, Client shall notify Company by mail, facsimile or email no less than 60 days prior to the effective date of the event.

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: **EIGHTH AMENDMENT- T SYSTEM**

2. Purpose of contract, including scope and description: **eighth amendment to the original master agreement with T System signed December 13, 2011. This amendment will hold pricing with no increase and the content customization will be waived which is a savings of \$5000.00**

3. Effective Date: **to receive the current pricing and waiver of content customization the amendment needs to be signed before November 16.**

4. Expiration Date: **extends the licensing agreement to March 12, 2021 with no fee increase.**

5. Rights of renewal and termination: **will renew at the end of the 2 years for 1 year terms until terminated by either party. Termination requires 6 months notice. Is this auto-renew? Yes after 2 years unless terminated**

6. Monetary cost of the contract and is the cost included in the department budget? **Monthly cost remains the same which is \$8249.00 month for the following services and fees:**

current monthly T-System licenses fee at will remain the same \$6,808 per month. EV Stat \$1,108 monthly license fee and Pepid \$333 monthly license fee Annual costs for license fees \$98988.00

Additional annual costs
 - **Learning Management System Annual Maintenance \$4,995**
 - **ADT outbound Annual Maintenance \$500**
TOTAL PER YEAR \$104,483.00

7. Jurisdiction/Choice of Law provision checked and changed to Wyoming if able to so. **Jurisdiction is controlled by master agreement**

8. Any confidentiality provisions? **None in amendment**

9. Indemnification clause present? **None in amendment**

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

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

EIGHTH AMENDMENT TO THE T SYSTEMEV LICENSE AGREEMENT

This Eighth Amendment ("Eighth Amendment") is the eighth amendment to the T SystemEV License Agreement ("License Agreement") dated December 13, 2011 by and between Memorial Hospital of Sweetwater County ("Licensee") and T-System, Inc. ("TSI").

While preserving all other obligations under the License Agreement and in consideration of the mutual promises and covenants and agreements hereinafter set forth, and other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, the parties hereto mutually agree to amend the License Agreement as follows:

1. Extension of License Agreement; Pricing.

- a. The term of the License Agreement currently ends on March 12, 2019. By this Eighth Amendment, the term of the License Agreement is hereby extended by two (2) years through March 12, 2021 ("Current Term"). Thereafter, the License Agreement shall automatically renew for additional one (1) year terms (each a "Renewal Term") until terminated by either party as set forth herein. Either party may terminate this Agreement by written notice to the other party at least six (6) months before the end of the Current Term or any Renewal Term. Neither party may terminate this Agreement during the Current Term or any Renewal Term except as expressly set forth herein. If Licensee terminates this Agreement during the Current Term or any Renewal Term, Licensee shall pay TSI the Monthly License Fee for every remaining month in the term in which such termination occurs. The parties acknowledge and agree that damages resulting from a claim under this section are not readily ascertainable at this time, and the above amount of liquidated damages is reasonable under the circumstances.
- b. TSI agrees that it will not increase the current Monthly License Fee of \$6,808 during the Current Term. At the end of the Current Term and annually thereafter, by written notice to Licensee, TSI shall increase the Monthly License Fee no more than annually, based on the i) the lesser of the Consumer Price Index for All Urban Consumers (CPI-U), US City Average, All Items, 1982-84=100, not seasonally adjusted ("CPI") and five percent (5%), and ii) the reassessment of the Site's APV. At the end of the Current Term, TSI may also increase the monthly license fee based on TSI's then-current pricing. The obligation to pay amounts incurred during the term of this Agreement will survive the termination of this Agreement. All payments will be payable at Dallas, Texas, in U.S. dollars.

- 2. Content Customization Services.** Licensee has requested TSI provide content customizations to replace the Cincinnati Stroke Scale with the NIHSS Stroke Scale on the top level as set forth on Exhibit 1 to this Eighth Amendment. The Content Customizations fee of \$5,000 is hereby waived.

To the extent of any conflict between the provisions of the License Agreement and this Eighth Amendment, the terms of this Eighth Amendment will control. Except to the extent modified by this Eighth Amendment, all other terms and conditions of the License Agreement shall remain in full force and effect. By signing below, the parties confirm their agreement to this Eighth Amendment. The Effective Date of this Eighth Amendment is the date last signed below. The pricing and discounts set forth on this Eighth Amendment shall expire if not signed and returned by November 16, 2018.

Memorial Hospital of Sweetwater County,
a Wyoming non-profit corporation

T-System, Inc.,
a Texas corporation

By: _____
Name: _____
Title: _____
Date: _____

By: _____
Name: Tim Swango
Title: EVP & COO
Date: _____

Contract Check List

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

1. Name of Contract: **HEALTHICITY**
2. Purpose of contract, including scope and description: **Replace current contract management software with new software that also has compliance and risk software tracking capabilities. Current contract software is TractManager which is \$9980.00 a year. This new software with contract and compliance management is \$10,000.00 year.**
3. Effective Date: **When signed by MHSC**
4. Expiration Date: **one year from effective date.**
5. Rights of renewal and termination: **90-day out no cause termination notice** Is this auto-renew? **Yes- for 1 year terms**
6. Monetary cost of the contract and is the cost included in the department budget? **\$10,000.00 a year. It is budgeted for**
7. Jurisdiction/Choice of Law provision checked and changed to Wyoming if able to so. **The software company is out of California with software across the country so jurisdiction is in originating state-CA. There is a regional office in Utah that we will be working with.**
8. Any confidentiality provisions? **Yes--as to PHI. Also have a Business Assoc. Agreement which is required under HIPAA.**
9. Indemnification clause present? **Yes--section 6 page 4**
10. Is this contract appropriate for other bids? **Compared software that would replace current contract management software and do compliance and**

risk tracking and this one was the only one we could find that would do all that we wanted.

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