

ADAMS COUNTY PUBLIC HOSPITAL DISTRICT #2  
Meeting of the Board of Commissioners  
**March 23, 2022**  
East Adams Rural Healthcare  
Conference Room  
Ritzville, WA

- I) Call to Order
- II) Additions or Corrections to the Agenda
- III) Approval of Minutes-February 23, 2022
- IV) Consent Agenda
  - i) Chief Nursing Officer Report
  - ii) EMS Report
  - iii) HR Report
- V) Medical Staff Report – Dr. Sackmann
- VI) CEO Report – Corey Fedie
- VII) Committee Reports
  - i) Finance Committee – Kim Polanco
    - (1) Financials – February
    - (2) Approval of Warrants and Vouchers
- VIII) Old Business
  - None
- IX) New Business
  - i) Annual Quality Report
  - ii) Purchase Request: Mobile Clinic
- X) Public Comment
- XI) Next Board Meeting at 5:30 p.m. April 27, 2022
- XII) Adjourn

Washington State law states that all meetings of public bodies such as ours be open to attendance by the public, save for executive sessions or if a meeting has been closed owing to disruption. But that law is equally clear that there is no requirement that public attendees at such meetings be permitted to take any part in the proceedings. This Board, however, promotes open dealings with our community, and welcomes appropriate public participation; but, considering interests such as efficiency and simple civility, we do have rules governing that participation.

We generally have on our agenda a period intended for public comments and questions, and we ask that members of the public confine questions and comments to that period. If, however, during our deliberations on a given matter a member of the public believes that he or she has some clearly relevant information that we have not considered, he or she may raise his or her hand and the Board Chair, in his or her discretion, may allow that member of the public to provide a brief factual comment.

Moreover, both during meetings and in the specified comment period, we require that questions or comments be concise, factual, and, notably, that they be civil. We willingly accept tough questions and critical comments, but we will not accept generalized negative opinions, rambling, personal attacks, or perceived disparagement of individuals. Comments are limited to three minutes.

The Board reserves the right to terminate a question or comment at any point if the Board determines in its discretion that the comment or question is unacceptable or disruptive. Please remember the need for civility and compliance with our rules.

ADAMS COUNTY PUBLIC HOSPITAL DISTRICT NO. 2  
East Adams Rural Hospital  
903 S. Adams  
Ritzville, WA 99169  
Meeting of the Board of Commissioners  
February 23, 2022

|          |                  |                       |
|----------|------------------|-----------------------|
| PRESENT: | John Kragt       | Board Chair           |
|          | Stacey Plummer   | Vice Chair            |
|          | Eric Walker      | Commissioner          |
|          | Jerry Crossler   | Commissioner          |
|          | Corey Fedie      | CEO                   |
|          | Kimberly Polanco | CFO                   |
|          | Jennifer Pepperd | Chief Nursing Officer |

ABSENT: Dan Duff, Dr. Sackmann

GUESTS: Rod Larse, Ritzville Journal, Colene Hickman, Kelly Wiggins, Dr. Nelson McKay, Joe Lodge and Shaun Johnson, DZA

There were 0 community members present.

The meeting was called to order at 5:30pm by John Kragt, Board Chair

**INTRODUCTIONS-** None

**ADDITIONS AND CORRECTIONS-**None

**APPROVAL OF MINUTES**

The January 26<sup>th</sup> Board Meeting minutes were presented. Vice-Chair Stacey Plummer made a motion to approve the January 26<sup>th</sup> Board Meeting minutes. Commissioner Eric Walker seconded. Motion passed unanimously. The February 2<sup>nd</sup> Special Board Meeting minutes were presented. Vice-Chair Stacey Plummer made a motion to approve the February 2<sup>nd</sup> Special Board Meeting minutes as presented, Commissioner Eric Walker seconded. Motion passed unanimously.

**CONSENT AGENDA:**

Board Chair John Kragt polled the Board if they would like anything moved from the Consent Agenda to the regular agenda. The Board did not request anything to be moved.

## **MEDICAL STAFF REPORT:**

Dr. McKay reported on behalf of Dr. Sackmann that the state inspection was completed. There were some findings regarding the Med Staff By-laws that included some clarifications of committees, timely documentation and policies that did not match district policies. The By-laws were reviewed at the Med Staff retreat. Jennifer and Marnie will continue to go through them and present them to Med Staff when they are done. Providers submitted a list of equipment requests. Jennifer will review and gather further information. There were some internet connection issues that were causing some nursing issues but IT has since fixed that. Dr. McKay reported that there has been a decrease in COVID cases and patient transfers have been getting easier. Board Chair John Kragt asked Dr. McKay about his thoughts regarding the EMS structure since there has been some discussions out within the community. Dr. McKay said that there was one weekend that he was aware of that there was no coverage. He has not heard any patient complaints regarding service or timeliness of responses. Board Chair John Kragt shared that he had a good patient care experience with Dr. McKay.

## **CEO REPORT- See attached**

There is a lot going on however, we are making great progress. There are still a few hiccups but we are working on those. With the COVID outbreak from both the staff and public perspective we took good care of the people and unfortunately we did have to go into lock down again which impacts our admissions and ancillary services because the larger hospitals were not doing any elective procedures. You will see that impact in the January financials. Due to a lot of hard work we did start the year in a fairly good position. It was a little rough start for the beginning of the year however, we are already starting to see an increase with things starting to open back up now. Leadership has been meeting and talking with managers about ways to improve and get more people through the doors. There has been an internal sub-committee formed to work on getting a higher rate of acute/swing-bed admissions that fit our organization. With our current provider base and with Dr. Sackmann's patient base we will be able to take better care of our patients. We are also in the middle of a new EMR implementation. There will be some training and down time that may affect the financials as well. The good news is that we are building and striving. We had a good year last year. We are off to a running start this year.

## **COMMITTEE REPORTS**

### **Finance Committee- See Attached Report**

### **CFO REPORT - See attached**

Kim Polanco, CFO reported that we ended January with a loss of \$243,000. With the surge in COVID and restrictions on admissions because procedures weren't being done but we did see a record of inpatient admissions and ancillary services around that. We had a lot of sicker patients coming in and as Dr. McKay mentioned we were able to transfer patients out quicker than usual. We did have lower volumes in areas such as physical therapy due to procedures not being done. We did see higher volumes in the clinic. We had the 2<sup>nd</sup> highest month in collections for the clinic in the last two years. Thank you to Kris Morgan in our clinic billing department for working hard to get on top of our clinic billings. In the past month we have made a huge improvement in working on the billing processes and making sure we have all of the appropriate documentation included for clean billing. Kim is confident that we will see an increase in revenues by the second quarter now that billings are going out quicker and there is an increase in collections. There are still some supply issues with timeliness and cost increases. We are still able to get everything that we need. Our revenues will go up but our expenses will also be a little higher than anticipated due to the higher prices.

As Corey mentioned we are working on the EPIC implementation. We have received a Federal Communication Commission Grant that helps cover some of the cost for the equipment needed as part of the implementation that will be helpful. IT has been working hard to provide information needed. The 2020 audit will be presented tonight. We are now working on the 2021 audit. Board Chair John Kragt asked about the increase in Professional Fees. Kim said that the Purchased Services are included and she still needs to separate the two. Kim said that there has been a higher cost for Nursing Services. There may be an issue with the budget detail for this category. Kim will look into it and report back. John said that it has been high and asked if Kim thought that too much was allocated to Purchased Services when it should have been shifted to Professional Fees. Kim explained that she believes she has too much budgeted and needs to go through and make sure she has everything separated to the correct spot and accounted for budget wise.

Corey explained that the nurse staffing cost continues to be an issue and if the new legislation passes it will become even more challenging. Jennifer explained that we have contracted with a company called Passport and they provide nurses from overseas. We have had one of them here for several months now and she is working out very well. COVID did delay their arrival. There will be another nurse coming within the next couple of months. We are not sure where we will utilize her whether it will be in the hospital or clinic. Jennifer will work with Pam and Corey to make that determination. Passport has also expressed that they may be able to provide temporary services as well dependent on current rates. Jennifer also reported that she has signed a contract for an agency night nurse through August.

## **WARRANTS & VOUCHERS: EARH**

John Kragt presented the following warrants for approval Accounts Payable Warrants #063402 to #063587 for the amount of \$690,025.31 and an additional \$337,078.36 for payroll direct deposits and \$122,301.42 for payroll tax deposits. Commissioner Eric Walker made a motion to approve, Vice-Chair Stacey Plummer seconded. Motion passed unanimously.

## **OLD BUSINESS**

### **Financial Audit: See attached**

Joe Lodge and Shaun Johnson of DZA were in attendance to present the 2020 financial audit findings. Joe Lodge gave a brief introduction of himself and Shaun and the services that DZA provides to the district. Items that will be discussed are the financial statements, Board communication and management letter and financial indicators. Joe explained the auditor's report and key part is the opinion section. Joe then described the government reporting standards. Joe then explained the net position which details the assets which we own and liabilities which is what we owe and the difference between the two. Joe highlighted some of the big differences. The cash and cash equivalents had a significant increase due to the COVID relief funding, Payment Protection Program loan and the sale of the nursing home. There was a decrease in patient account receivables that is probably due to going through and cleaning up several accounts and adjustments. Joe explained that the Payment Protection Program loan has been forgiven but based on audit reporting you can't report it that way until it is actually forgiven, so that will recorded in the 2021 audit as revenue instead of a liability. Another item that showed a significant decrease was refunds payable for overpayment which was also due to going through accounts. Some credit balances were referred back to patient accounts receivables depending on the nature of those credit balances.

Joe went over the statement of revenues and expenses and how we end up with the bottom line. Most changes in revenues came from various grants. A substantial amount of expenses come from salary and wage increases, and new hires. The operating loss is similar to prior year. There was a substantial amount of non-operating expenses due to taxations. Statement of cash flow is similar to prior report however it is based on cash and cash equivalents rather than accruals. Joe highlighted some items on the notes to basic financial statements. There are a couple of new accounting policies based on leases and construction project interest reporting. There were additional notes on the PPP loan and additional COVID relief funding. Joe explained that the operating expenses have been similar over the past couple of years. This was the first year there was a positive change in net position which is mostly from the Cares Act Funds. The patient revenue by department was a mix of increases and decreases. Joe explained the findings in the Independent Auditor's Report. There were no compliance issues with rules or regulations. There were some deficiencies with account reconciliations. There was deficiency in internal controls for having a second person reviewing journal entries. Reconciliations should be reviewed on a monthly basis. Joe discussed the required report to the Board. There were some challenges and delays in completing the audit. DZA had some recommendations for accounts receivable and updating the allowance percentages once a year. The credit balances should be reconciled in a timely manner.

Shaun Johnson presented the financial indicators. There is comparison information from the last two years, as well as, peer hospital information. The peer information was from 2019 which was pre-pandemic. Total margin was 15.5% primarily due to 3.5 million in relief funds. If COVID funding is removed it is at -17.6%. The operating margin was -31.4%. It is recommended to have a break even and rely on tax revenue. Days cash on hand was 313 days due to relief funds, Medicare advance payments and sell of nursing home. Typically 90 days or higher is ideal. If all relief funds, Medicare advance payments and sell of nursing home is removed it brings the cash on hand days down to 233. Current ratio is at 2.7. With 9 million in assets and 3.3 million of liabilities. This is a healthy indicator. Capital indicator expenditures. Should average out at 100% over 5 years. We are currently at 50%. We will have a higher percentage in 2021 and 2022 as old equipment will be needing to be replaced. Long-term debt to net position report shows that we are at 48.3% which is a good range. Days in net patient accounts receivable. This is an area of concern. We are currently at 134 days. It is recommended to be at 50-60 days. There was large write offs done so it brought the gross days down. We are at 162 days and it is recommended to be at 70-80 days. Contractual adjustments is at 31.2%. This is something that should just be monitored. Bad debt percentage of revenue increased in 2020 due to old account write-offs. Charity Care percentage is at .9%. FTE employees are at 58. Salaries and Benefits all in cost has increased. Net patient service revenue per FTE did decrease. Could work on this without increasing expenses. Corey asked how we are comparable to facilities that offer additional services such as surgeries. Shaun explained that those other facilities would have a much higher net patient service revenue because they are able to bill out those higher rates. A good goal would be \$130,000-\$140,000. Net to patient service revenue was at 106%. Salary and Benefits represented 60% and 40% for other expenses which only leaves 6% for other operating margin. This should be closer to 150%. This would leave an operating indicator of a break even. Commissioner Eric Walker asked about the Charity Care percentage of revenue. How does that back up to other facilities and does it meet all of the statutes and limitations. Shaun said that 1% is about average. Shaun was not sure on the statutes and limitations.

## **End of Year Strategic Plan Summary:**

Corey presented an end of year strategic plan summary. Service goals included increasing outpatient volumes with the following results, Lab 6%, CT 10%, Ultrasound 31%, Observation Days 38%, Therapy 51% and Clinic visits 10%, as well as, increasing acute and swing bed admissions with the result of an increase of 92%. People goals included recruitment which we were able to recruit Dr. McKay and welcome Rose Jones back. We were also able to hire Lexi Zuver who provides women's health services and supports us with family medicine overflow as well. Leadership has been attending Studor group training which focuses on leadership principles.

Managers have been engaged and completing their training. We have received lots of good feedback from how we treat our staff, work together and continue to grow and develop. Financials for end of year were good with all things considered. That is in great part to providers, revenue cycle team, leaders and across the board. It takes everyone to make the district successful. There has been an increase in advertising and marketing to the community. There has been consistency with Facebook, the website and the newspaper with getting information out to the community. With COVID it has been a struggle to get out into the community physically but Corey was actually able to attend a Lions Club Meeting. Strategic Projects will have a big impact with the upcoming year. We are implementing a new EMR and have added Pain Management Services which has been completely implemented and very successful for 7-8 months now. There are several more items on the list that need to be addressed but we have two more years to complete them. The Board should be excited about all of the items that were accomplished this past year. We have shared our appreciation with the staff by providing some fun and activities along the way which include some meals being provided, as well as, events throughout the holidays. The moral is great and there is a lot of positivity in the organization. We have just had a great year. We will discuss further at the Board Retreat in March. The next Board meeting will hopefully be the last virtual meeting however, we will still provide the Zoom information for anyone that does not want to physically join.

## **NEW BUSINESS**

### **State Survey Results; Plan of Corrections:**

Jennifer reported some of the State Survey results and plans of corrections. State survey is normally every 18 months. We have not had one in 3 years due to COVID. This year DOH and CMS completed the survey together. We did receive some deficiencies. We are still working on some items however, there were several items that have already been addressed and corrected such as maintenance and facility issues and some policies that were not on the DOH website. Todd is working on some preventative maintenance and training so that it can be done internally rather than having a vendor come in to perform the testing. There were several citations in Medical Records that stem from various things such as provider documentation, scanning of records. We have made huge strides in correcting this. We are doing daily audits on admit charts. There were policies that did not match our By-laws. As Dr. McKay mentioned Jennifer will be working with Marnie to update the By-laws. We continue to find some items the further we look. Overall it was a good audit. Corey explained that he was told that it would be a light audit however he felt that they did actually dig in pretty deep in some areas. Staff really stepped up and helped provide requested documentation to the surveyors and Jennifer did a great job spear heading the audit.

### **CAH Annual Evaluation: See attached**

Jennifer reported on the CAH annual evaluation. Jennifer explained that the report gives an overview of things that have been done over the last three years. It goes into detail per each department. It did not include pain clinic. Jennifer will get that information added and send it back out to the Board.

Jennifer said there is a lot of information included in the report. There are some goals on the back pages. Jennifer said that the Board is free to review it and email her if they have any questions.

**PUBLIC COMMENT**-None

### **EXECUTIVE SESSION**

The Board went into Executive Session at 6:55 p.m. to review the performance of a public employee. The estimated length of the Executive Session was 20 minutes. The Board came out of Executive Session at 7:03 p.m. Commissioner Eric Walker made a motion to set the 2022 bonus criteria to what was provided to the Board Members. Vice-Chair Stacey Plummer seconded. Commissioner Dan Duff was absent. Motion passed unanimously.

Commissioner Eric Walker made a motion, seconded by Vice-Chair Stacey Plummer to adjourn the meeting. The motion passed.

The meeting was adjourned at 7:04 p.m.

Respectfully submitted,

Kylie Buell  
Executive Assistant

## CNO Board Report

March 23, 2022

1. We were able to hire a NAC into our open night shift position. So we currently do not have any open NAC positions at this time. We still have the open charge nurse position, which is contracted until sometime in June at this time. It is nice to have the consistency of the same nurse in that position.
2. I am continuing to work with Pam for clinic transition.
3. We continue to work on some ACO reporting that has come up. IT has been great at getting reports for me.
4. I have been working with Peggy and IT for our meeting to move to EPIC. We are in still the discovery phase.
5. We continue to monitor the changes to our visitor policy and COVID changes. Jackie has been great at keeping us informed.
6. We meet with Airlift northwest who will be starting a service in our area soon.
7. I participated in the state survey process for the lab.
8. We had another visit from the state they conducted a vaccine survey, along with a follow up from our last survey. We are awaiting the results of that.
9. Skills fair was sent out to nursing staff to complete. This covers a lot of skills that we do yearly.
10. We currently have a student nurse working with our ER staff, she has been very excited to come and work with us. She will only be here for a short amount of time. Tami has been working with her.
11. I attended the Northwest Rural Health conference this week. More to come on this.
12. I have been working with Marnie for changes to the By-laws.

Sincerely,

Jennifer Pepperd CNO



| AMBULANCE RUNS February 2022 |                     |                   |                            |                |                    |                   |                            |                  |
|------------------------------|---------------------|-------------------|----------------------------|----------------|--------------------|-------------------|----------------------------|------------------|
| UNIT                         | TRANSPORT           | EARH              | REFUSAL/<br>NON-<br>INJURY | CANCEL/<br>UTL | TREAT &<br>RELEASE | OTHER<br>FACILITY | LIFT<br>ASSIST/<br>Standby | TOTAL            |
| 963                          |                     |                   | 1                          |                |                    | 1                 |                            | 2                |
| 964                          | 6                   | 12                | 7                          | 7              |                    | 1                 | 1                          | 34               |
| 966                          |                     | 4                 | 2                          |                |                    |                   | 2                          | 8                |
| 967                          | 2                   |                   |                            |                |                    |                   |                            | 2                |
| ALL                          | 8                   | 16                | 10                         | 7              | 0                  | 2                 | 3                          | 46               |
| UNIT                         | STARTING<br>MILEAGE | ENDING<br>MILEAGE |                            |                |                    |                   |                            | TOTAL<br>MILEAGE |
| 963                          | 90064               | 90145             |                            |                |                    |                   |                            | 81               |
| 964                          | 154718              | 155967            |                            |                |                    |                   |                            | 1249             |
| 966                          | 53358               | 53545             |                            |                |                    |                   |                            | 187              |
| 967                          | 22852               | 23284             |                            |                |                    |                   |                            | 432              |
| ALL                          |                     |                   |                            |                |                    |                   |                            | 1949             |

2021 YTD Total **\_761\_** runs

2022 YTD Total runs runs **116**

**6.56% Complete**

Month 2021 **\_65\_** runs

Month 2022 **\_46\_** runs

Increase/Decrease of **\_-19\_** from

## Job Openings

| Department             | Job Opening                     | Date Open  | Status | Notes  |
|------------------------|---------------------------------|------------|--------|--|
| Business Office        | Posting Clerk                   | 01/11/2021 | Filled | Hired in-house   |
| Business Office        | Health Information Manager      | 04/01/2021 | Filled | Offer letter signed as of 3/17/21. Candidate start date set for 4/26/21. <b>Candidate will start 5/3/21</b>  |
| Nursing                | Long Term Care Nurse            | 09/13/2019 | Filled | Candidate accepted position as of 3/15/21. Will onboard/orientate before end of March.   |
| Clinic/Hospital        | MD                              | 10/16/2020 | Filled | Working with recruitment firms. <b>Start date 10/4/2021</b>  |
| Facilities             | Maintenance Tech.               | 03/02/2021 | Filled | Calls out to 5 applicants to schedule interviews. <b>Only one applicant returned call, not interested due to travel. Still interviewing and accepting applications</b> |
| Nursing                | Long Term Care Nurse(Day Shift) | 09/13/2019 | Filled | Filled with Passport RN starting 11/1/2021   |
| Information Technology | Help Desk/Support               | 03/03/2021 | Filled | <b>1 interview scheduled for 7/23/21. Applicant will start orientation 8/16/2021</b>   |
| Facilities             | Facilities Manager              | 05/07/2021 | Filled | 4 interviews conducted. Anticipating an offer being presented Friday 5/28/21. <b>Orientatton will start 07/12/21</b>   |
| Business Office        | Remote Biller                   | 04/02/2021 | Filled | <b>Candidate orientation 5/27/21</b>   |
| Business Office        | Referral Specialist             | 04/13/2021 | Filled | <b>Candidate orientation 5/27/21</b>   |
| Business Office        | Clinic Biller                   | 04/21/2021 | Filled | Offer letter written up 7/21/21, waiting on clarification from Manager on proposed wage. <b>Candidate accepted and will start orientation 8/16/21</b>                  |
| Administration         | Executive Assistant             | 06/07/2021 | Filled | 3 interviews scheduled for the week of 6/21/21 <b>Candidate will start orientation 07/01/21</b>  |
| Rehab                  | Physical Therapist              | 05/15/2021 | Filled | <b>Signed offer letter, start date August 16, 2021</b>   |
| Rehab                  | Speech Language Pathologist     | 05/31/2021 | Filled | <b>Signed offer letter, start date August 16, 2021</b>   |
| Clinic                 | MA-C                            | 05/28/2021 | Filled | Candidate started 06/15/21   |
| Clinic                 | MA-C                            | 07/15/2021 | Filled | Filled with LPN, candidate started 10/4/2021   |
| Nursing                | NA-C Noc Shift                  | 07/06/2021 | Filled | <b>Posted and filled with per diem internal candidate</b>  |
| Facilities             | Housekeeper                     | 07/22/2021 | Filled | Offer accepted and candidate will start orientation 11/1/2021  |
| Rehab                  | OT/COTA                         | 07/29/2021 | Open   | Not Currently advertising for position   |
| Lab                    | MLT                             | 07/30/2021 | Closed | <b>Unable to fill at this time</b>   |
| Lab                    | Temporary Lab Assistant         | 08/05/2021 | Open   | <b>Filled with internal candidate</b>  |
| Facilities             | Hospital Engineer               | 08/20/2021 | Open   | <b>Offer accepted and candidate will start orientation 01/27/2022</b>  |
| Business Office        | HIM Tech                        | 09/01/2021 | Filled | <b>Offer accepted and candidate will start orientation 01/27/2022</b>  |
| Clinic                 | MA-C                            | 09/07/2021 | Filled | Filled with an NAC that started 10/18/2021   |
| Nursing                | NA-C Noc Shift                  | 10/13/2021 | Filled | <b>Filled with agency NAC 03/08/22</b>   |
| Business Office        | Biller                          | 11/11/2021 | Filled | Candidate will complete orientation 12/13/2021   |
| Clinic                 | Clinic Manager                  | 12/01/2021 | Filled | <b>Hired internal, candidate started 01/17/2022</b>  |
| IT                     | Tech                            | 12/02/2021 | Filled | <b>Candidate accepted offer and started 12/15/2021</b>   |
| Clinic                 | RN, LPN, OR MA-C                | 01/17/2022 | Open   |  |



# East Adams Rural Healthcare

903 South Adams  
Ritzville, Washington 99169  
509-659-1200

CEO Report to the Board

Board of Commissioners  
East Adams Rural Healthcare  
March 23<sup>rd</sup>, 2022

February was a difficult month as we assumed it would be. However, we made more improvements in Revenue Cycle that are part of the Finance report. Toward the end of the month outpatient procedures across the state started picking up and we also admitted more patients. We are hopeful March will be better and future months improving as the healthcare system picks up steam.

You may have heard that Senate Bill 5751 failed to pass this session which is a huge win for us. We are fortunate to not have the difficult staffing situations that larger facilities do and this bill would have had a very significant and negative impact on us. We are certainly concerned about the safety of staff, but the larger focus really needs to be on growing the workforce so we have the ability to change staff/patient ratios. In that effort we support more Nurse training initiatives, the possibility of hosting nursing students as well as finding ways to support the much needed wages for Nurse Educators across the state.

Hopefully you have noticed an increase in our marketing and advertising as well. We have pushed a number of new pieces in the newspaper, regional magazines, community guides, website and of course social media. We also heard back on our application for federal funds for the mobile clinic. We are pleased to announce that we did receive the full amount and are nearly fully funded for the project. This is due to grants and other funding sources to which we applied for over the past year. A tremendous amount of work went into getting this funding and we are excited to move forward. The agenda includes an item for approval of purchase for the mobile unit.

Several of us are attending the NW Rural Health Conference for the first time in a couple of years and Thursday will begin the Board Retreat. We are excited for these opportunities to grow, educate and plan. We look forward to meeting in-person!

As always, it is a privilege to serve the board and our community.

Respectfully,

Corey Fedie, CEO

FINANCE COMMITTEE AGENDA  
Adams County Public Hospital District #2  
March 16, 2022

- I. Call to Order
- II. Attendance
- III. Review/approve meeting minutes: February 2022
- IV. Review of Warrants & Vouchers: February 2022
- V. Financial Statements: February 2022
- VI. Additional Information
  1. Discussion - Mobile Clinic Purchase
- VII. Adjourn

# **Finance Committee Meeting Minutes**

March 16, 2022

## **I. Call to order**

Corey Fedie called the meeting of the Finance Committee for Adams County Hospital District #2 to order at 12:34 p.m.

## **II. In Attendance - Virtual Meeting**

Jerry Crossler, Board Member; Dan Duff, Board Member; Corey Fedie, CEO; Kim Polanco, CFO, Colene Hickman, Revenue Cycle Manager, Kelly Wiggins, Interim Revenue Cycle Manager

Absent: Beverly Kelley, Volunteer Committee Member;

## **III. Review and Approve meeting minutes: February 2022**

- a) See attached- Jerry Crossler moved to approve the February 2022 meeting minutes, Dan Duff seconded the motion, motion passed.

## **IV. Review Warrants and Vouchers: February 2022**

- a) See attached- Dan Duff moved to approve, Jerry Crossler seconded the motion, motion passed.

## **V. Financial Statements: February 2022**

- a) See Attached – Kim reported details in the CFO Report. February business resulted in a Net Loss of (\$55,996) and an Operating Loss of (\$167,509) for the month. Kim described the pain management claims recovered from prior months. Kim also described the GAAP requirement for revenue recognition and the estimated uncollectible revenue which included an explanation for the increase in gross and net AR days. While these KPIs are higher temporarily the measures represent new revenue and a higher percentage of collectible revenue than in previous years. These KPIs will be dropping in the future moving toward goals set for the year. Kim reported the reduction of bad debt expense as well as the lower expenses and continued higher contract nursing expense.

## **VI. Additional Information**

- a) **Discussion – Mobile Clinic Purchase** – Corey discussed the grant revenues awarded to fund the mobile health clinic and the proposed purchase request for the board meeting this month. The Committee agreed to move forward with a request to the Board.

## **VII. Adjourn**

Dan Duff moved to adjourn, Jerry Crossler seconded. Meeting adjourned at 1:08 p.m.

Respectfully Submitted by Kim Polanco

# **Finance Committee Meeting Minutes**

February 16, 2022

## **I. Call to order**

Corey Fedie called the meeting of the Finance Committee for Adams County Hospital District #2 to order at 12:42 p.m.

## **II. In Attendance - Virtual Meeting**

Jerry Crossler, Board Member; Dan Duff, Board Member; Corey Fedie, CEO; Kim Polanco, CFO, Colene Hickman, Revenue Cycle Manager, Kelly Wiggins, Interim Revenue Cycle Manager

Absent: Beverly Kelley, Volunteer Committee Member;

## **III. Review and Approve meeting minutes: January 2022**

- a) See attached- Jerry Crossler moved to approve the January 2022 meeting minutes, Dan Duff seconded the motion, motion passed.

## **IV. Review Warrants and Vouchers: January 2022**

- a) See attached- Brief discussion on payables and some specific warrants issued. Jerry Crossler moved to approve, Dan Duff seconded the motion, motion passed.

## **V. Financial Statements: January 2022**

- a) See Attached – Kim reported details in the CFO Report. January business resulted in a Net Loss of (\$243,528) for the month and an Operating Loss of (\$361,497). Kim described the figure in the swing bed revenue line as it includes adjustments for prior month change in level of care for a couple of patients which reduced the total revenue for the month. Corey and Kim briefly described the Medicare swing bed cost to charge ratio and its effect on the financial statements in the deductions to revenue. Brief discussion about the key performance indicators.
- b) Kelly described the collections process and the Washington laws and timeframe regarding charity and collections. The District has specific Medicare guidelines to follow as well.
- c) Brief discussion on remaining COVID grant funds applicable to 2022.
- d) Corey described some of the difficulties with revenues and expenses and how the pandemic still affects operations considerably especially with contract nursing expense. Corey also described additional services the District is looking to add for the community.

## **VI. Additional Information**

a) **2020 Audit Update** – The draft 2020 audit report was received on February 15<sup>th</sup> and will be presented to the Board by the auditors, DZA, at the next Board Meeting.

b) **Accounting and Payroll Software Updates** – The payroll software implementation planned go-live date continues to be planned for April 1<sup>st</sup>. The accounting software implementation has been moved from March to May to ensure adequate testing and training are in place before the transition.

## VII. Adjourn

Jerry Crossler moved to adjourn, Dan Duff seconded. Meeting adjourned at 1:27 p.m.

Respectfully Submitted by Kim Polanco

DRAFT

EARH

| Check Number | Vendor Name                            | Check Date | Check Amount |
|--------------|--|------------|--------------|
| 0000063588   | A-L COMPRESSED GASES                   | 02/04/2022 | \$ 463.26    |
| 0000063589   | ALSCO                                  | 02/04/2022 | \$ 572.95    |
| 0000063590   | AMERISOURCEBERGEN                      | 02/04/2022 | \$ 7,185.67  |
| 0000063591   | Automated Accounts Inc                 | 02/04/2022 | \$ 266.30    |
| 0000063592   | BOB'S TV & APPLIANCE                   | 02/04/2022 | \$ 81.27     |
| 0000063593   | Backus Marketing & Design              | 02/04/2022 | \$ 422.00    |
| 0000063594   | CARDINAL HEALTH                        | 02/04/2022 | \$ 160.93    |
| 0000063595   | CENTURYLINK                            | 02/04/2022 | \$ 6,227.40  |
| 0000063596   | CONSOLIDATED DISPOSAL SVCS             | 02/04/2022 | \$ 429.00    |
| 0000063597   | Capital Group Retirement Plan Services | 02/04/2022 | \$ 187.50    |
| 0000063598   | Carol Templin                          | 02/04/2022 | \$ 3,452.00  |
| 0000063599   | Clearwater Springs                     | 02/04/2022 | \$ 295.63    |
| 0000063600   | DATAPRO SOLUTIONS INC                  | 02/04/2022 | \$ 7,051.32  |
| 0000063601   | DAVEY, TRUDY L                         | 02/04/2022 | \$ 80.30     |
| 0000063602   | Dorcey Hunt                            | 02/04/2022 | \$ 3,760.00  |
| 0000063603   | EARH INSURANCE & PENSION               | 02/04/2022 | \$ 23,527.67 |
| 0000063604   | EMPLOYEE FUND                          | 02/04/2022 | \$ 106.00    |
| 0000063605   | EMPLOYMENT SECURITY DEPT.              | 02/04/2022 | \$ 5,081.15  |
| 0000063606   | Emergency Medical Products             | 02/04/2022 | \$ 675.09    |
| 0000063607   | FEDERAL EXPRESS CORP                   | 02/04/2022 | \$ 41.25     |
| 0000063608   | FIRST CHOICE HEALTH                    | 02/04/2022 | \$ 27.08     |
| 0000063609   | FISHER HEALTHCARE                      | 02/04/2022 | \$ 3,219.18  |
| 0000063610   | Family Support Registry                | 02/04/2022 | \$ 92.76     |
| 0000063611   | HFMA                                   | 02/04/2022 | \$ 455.00    |
| 0000063612   | Health Carousel, LLC                   | 02/04/2022 | \$ 8,571.36  |
| 0000063613   | Hospital Services Corporation          | 02/04/2022 | \$ 2,400.00  |
| 0000063614   | Joshua Brownlowe                       | 02/04/2022 | \$ 123.80    |
| 0000063615   | K.C. Charles, Inc                      | 02/04/2022 | \$ 3,897.72  |
| 0000063616   | LocalTel Communications                | 02/04/2022 | \$ 197.20    |
| 0000063617   | MILLIMAN, INC                          | 02/04/2022 | \$ 642.60    |
| 0000063618   | MedWorxs                               | 02/04/2022 | \$ 788.00    |
| 0000063619   | NW Rural Health Conference             | 02/04/2022 | \$ 1,150.00  |
| 0000063620   | Nanosonics, Inc.                       | 02/04/2022 | \$ 536.25    |
| 0000063621   | NextGen Healthcare, Inc                | 02/04/2022 | \$ 1,803.60  |
| 0000063622   | OMNI STAFFING SERVICES, INC.           | 02/04/2022 | \$ 18,412.85 |
| 0000063623   | OWENS & MINOR                          | 02/04/2022 | \$ 13,108.28 |
| 0000063624   | Pacific Office Automation INC          | 02/04/2022 | \$ 1,229.83  |
| 0000063625   | Quadient Finance USA, Inc              | 02/04/2022 | \$ 210.00    |
| 0000063626   | QuadraMed                              | 02/04/2022 | \$ 22,514.06 |
| 0000063627   | RDO Equipment Co.                      | 02/04/2022 | \$ 73.33     |
| 0000063628   | RICOH USA INC                          | 02/04/2022 | \$ 35.59     |
| 0000063629   | SKILL SURVEY INC.                      | 02/04/2022 | \$ 788.00    |
| 0000063630   | SPHC Service                           | 02/04/2022 | \$ 1,804.18  |
| 0000063631   | STAPLES                                | 02/04/2022 | \$ 557.39    |
| 0000063632   | UP TO DATE                             | 02/04/2022 | \$ 719.04    |



|            |  |            |    |           |
|------------|--|------------|----|-----------|
| 0000063633 | United Health Care                       | 02/04/2022 | \$ | 45,673.33 |
| 0000063634 | Vitalant                                 | 02/04/2022 | \$ | 616.00    |
| 0000063635 | Western States Equipment Co.             | 02/04/2022 | \$ | 480.38    |
| 0000063663 | A-L COMPRESSED GASES                     | 02/22/2022 | \$ | 185.16    |
| 0000063664 | ABILITY NETWORK INC                      | 02/22/2022 | \$ | 1,159.36  |
| 0000063665 | ADAMS COUNTY SHERIFFS OFFICE             | 02/22/2022 | \$ | 5,642.15  |
| 0000063666 | AION Women's Health                      | 02/22/2022 | \$ | 7,665.00  |
| 0000063667 | ALSCO                                    | 02/22/2022 | \$ | 605.62    |
| 0000063668 | AVISTA UTILITIES                         | 02/22/2022 | \$ | 2,502.28  |
| 0000063669 | Aaron Demeurers                          | 02/22/2022 | \$ | 200.00    |
| 0000063670 | Aaron Demeurers                          | 02/22/2022 | \$ | 50.00     |
| 0000063671 | Automated Accounts Inc                   | 02/22/2022 | \$ | 270.30    |
| 0000063672 | BASIN REFRIGERATION                      | 02/22/2022 | \$ | 611.28    |
| 0000063673 | BRONCO FARM SUPPLY                       | 02/22/2022 | \$ | 1,305.89  |
| 0000063674 | BW BRONCO INN                            | 02/22/2022 | \$ | 769.93    |
| 0000063675 | Backus Marketing & Design                | 02/22/2022 | \$ | 25.00     |
| 0000063676 | Beacon Management, LLC                   | 02/22/2022 | \$ | 13,182.75 |
| 0000063677 | Bettina Mays                             | 02/22/2022 | \$ | 139.00    |
| 0000063678 | Beverly Kelley                           | 02/22/2022 | \$ | 40.00     |
| 0000063679 | Bradley O'Neill                          | 02/22/2022 | \$ | 77.28     |
| 0000063680 | Bright Light Solutions                   | 02/22/2022 | \$ | 350.00    |
| 0000063681 | CAREFUSION                               | 02/22/2022 | \$ | 2,324.16  |
| 0000063682 | CENTURYLINK                              | 02/22/2022 | \$ | 5,405.35  |
| 0000063683 | Canon Medical Systems                    | 02/22/2022 | \$ | 7,539.81  |
| 0000063684 | Capital Inventory                        | 02/22/2022 | \$ | 490.00    |
| 0000063685 | Caravan Health                           | 02/22/2022 | \$ | 5,000.00  |
| 0000063686 | Chauna Carlson                           | 02/22/2022 | \$ | 50.00     |
| 0000063687 | Clay Cousins                             | 02/22/2022 | \$ | 25.00     |
| 0000063688 | DENNY'S 6870                             | 02/22/2022 | \$ | 41.55     |
| 0000063689 | DINGUS, ZARECOR & ASSOCIATES PLLC        | 02/22/2022 | \$ | 13,500.00 |
| 0000063690 | EAP Consulting L.L.C.                    | 02/22/2022 | \$ | 4,550.00  |
| 0000063691 | EARH INSURANCE & PENSION                 | 02/22/2022 | \$ | 20,209.48 |
| 0000063692 | ECOLAB                                   | 02/22/2022 | \$ | 717.67    |
| 0000063693 | FERRELLGAS                               | 02/22/2022 | \$ | 1,392.26  |
| 0000063694 | FIRST CHOICE HEALTH                      | 02/22/2022 | \$ | 62.40     |
| 0000063695 | Family Support Registry                  | 02/22/2022 | \$ | 92.76     |
| 0000063696 | Granger, Greg                            | 02/22/2022 | \$ | 49.14     |
| 0000063697 | Health Carousel, LLC                     | 02/22/2022 | \$ | 4,942.08  |
| 0000063698 | Holistic Pain Management of Colorado LLC | 02/22/2022 | \$ | 30,780.00 |
| 0000063699 | Hunt, Dorcey                             | 02/22/2022 | \$ | 50.97     |
| 0000063700 | INCYTE PATHOLOGY                         | 02/22/2022 | \$ | 700.00    |
| 0000063701 | INLAND IMAGING BUSINESS Associates       | 02/22/2022 | \$ | 1,902.40  |
| 0000063702 | Jackson Physician Search                 | 02/22/2022 | \$ | 2,500.00  |
| 0000063703 | Jennifer Verhey                          | 02/22/2022 | \$ | 100.00    |
| 0000063704 | John Pierre                              | 02/22/2022 | \$ | 35.00     |
| 0000063705 | Johnson Law Group                        | 02/22/2022 | \$ | 2,500.00  |
| 0000063706 | Juanita Lyle                             | 02/22/2022 | \$ | 44.00     |

|            |                                 |            |    |           |
|------------|---------------------------------|------------|----|-----------|
| 0000063707 | Judy Watkins                    | 02/22/2022 | \$ | 5.00      |
| 0000063708 | Kara Pavone                     | 02/22/2022 | \$ | 44.57     |
| 0000063709 | Kurtis Staley                   | 02/22/2022 | \$ | 10.00     |
| 0000063710 | Kurtis Staley                   | 02/22/2022 | \$ | 18.25     |
| 0000063711 | Leticia Fanucchi                | 02/22/2022 | \$ | 12.61     |
| 0000063712 | MEDICATION REVIEW               | 02/22/2022 | \$ | 9,767.69  |
| 0000063713 | Makayla Johnson                 | 02/22/2022 | \$ | 15.00     |
| 0000063714 | Mecham, Matthew                 | 02/22/2022 | \$ | 109.00    |
| 0000063715 | Melvin Klettke                  | 02/22/2022 | \$ | 176.05    |
| 0000063716 | MultiMedical Systems, LLC       | 02/22/2022 | \$ | 1,637.96  |
| 0000063717 | NORCO INC                       | 02/22/2022 | \$ | 238.50    |
| 0000063718 | Nicholas J Meyers               | 02/22/2022 | \$ | 50.00     |
| 0000063719 | OMNI STAFFING SERVICES, INC.    | 02/22/2022 | \$ | 12,928.47 |
| 0000063720 | OXARC                           | 02/22/2022 | \$ | 26.63     |
| 0000063721 | PARA HealthCare Analytics, LLC  | 02/22/2022 | \$ | 2,500.00  |
| 0000063722 | PETTY CASH - H                  | 02/22/2022 | \$ | 20.00     |
| 0000063723 | PHD UNEMPLOYMENT COMPENSATION   | 02/22/2022 | \$ | 1,870.00  |
| 0000063724 | PHD WORKERS COMPENSATION        | 02/22/2022 | \$ | 2,846.00  |
| 0000063725 | Providence Health and Services  | 02/22/2022 | \$ | 575.00    |
| 0000063726 | RITZVILLE DRUG                  | 02/22/2022 | \$ | 356.60    |
| 0000063727 | RITZVILLE HARDWARE              | 02/22/2022 | \$ | 657.55    |
| 0000063728 | RITZVILLE JOURNAL               | 02/22/2022 | \$ | 2,219.00  |
| 0000063729 | RITZVILLE TIRE COMPANY          | 02/22/2022 | \$ | 622.87    |
| 0000063730 | RITZVILLE, CITY OF              | 02/22/2022 | \$ | 1,395.33  |
| 0000063731 | RURAL HEALTH CLINIC ASSOC OF WA | 02/22/2022 | \$ | 500.00    |
| 0000063732 | Riley Lamb                      | 02/22/2022 | \$ | 162.00    |
| 0000063733 | Ritzville Akins                 | 02/22/2022 | \$ | 47.09     |
| 0000063734 | Rogers Machinery Company, Inc   | 02/22/2022 | \$ | 612.90    |
| 0000063735 | SENSEKE                         | 02/22/2022 | \$ | 140.40    |
| 0000063736 | SPHC Service                    | 02/22/2022 | \$ | 403.60    |
| 0000063737 | STATE AUDITOR'S OFFICE          | 02/22/2022 | \$ | 7,082.10  |
| 0000063738 | Samaritan Healthcare            | 02/22/2022 | \$ | 116.00    |
| 0000063739 | Teresa Mancinelli Ryan          | 02/22/2022 | \$ | 60.00     |
| 0000063740 | Teresa Ryan                     | 02/22/2022 | \$ | 39.00     |
| 0000063741 | Todd Mayer                      | 02/22/2022 | \$ | 10.00     |
| 0000063742 | Todd Mayer                      | 02/22/2022 | \$ | 10.00     |
| 0000063743 | Todd Nida                       | 02/22/2022 | \$ | 489.99    |
| 0000063744 | Travis Riggle                   | 02/22/2022 | \$ | 122.97    |
| 0000063745 | Tyler Wabel                     | 02/22/2022 | \$ | 33.72     |
| 0000063746 | US Foods                        | 02/22/2022 | \$ | 1,469.59  |
| 0000063747 | WASHTUCNA, TOWN OF              | 02/22/2022 | \$ | 156.43    |
| 0000063748 | WHIT                            | 02/22/2022 | \$ | 8,380.50  |
| 0000063749 | ALSCO                           | 02/28/2022 | \$ | 1,730.78  |
| 0000063750 | AMERISOURCEBERGEN               | 02/28/2022 | \$ | 7,028.30  |
| 0000063751 | AVISTA UTILITIES                | 02/28/2022 | \$ | 8,299.55  |
| 0000063752 | Access Information Protected    | 02/28/2022 | \$ | 164.62    |
| 0000063753 | Avanos Medical, Inc.            | 02/28/2022 | \$ | 1,241.57  |

|            |                                 |            |    |            |
|------------|---------------------------------|------------|----|------------|
| 0000063754 | BRONCO FARM SUPPLY              | 02/28/2022 | \$ | 1,323.48   |
| 0000063755 | COBRA Management Services, LLC  | 02/28/2022 | \$ | 268.00     |
| 0000063756 | Change Healthcare               | 02/28/2022 | \$ | 421.26     |
| 0000063757 | Cory Kramer                     | 02/28/2022 | \$ | 25.00      |
| 0000063758 | DATAPRO SOLUTIONS INC           | 02/28/2022 | \$ | 4,696.22   |
| 0000063759 | DT Micro                        | 02/28/2022 | \$ | 1,155.00   |
| 0000063760 | Danielle Scrupps                | 02/28/2022 | \$ | 40.00      |
| 0000063761 | Debra McDonald                  | 02/28/2022 | \$ | 30.00      |
| 0000063762 | Dorcey Hunt                     | 02/28/2022 | \$ | 4,560.00   |
| 0000063763 | Evelyn Schmidt                  | 02/28/2022 | \$ | 66.10      |
| 0000063764 | FIRST CHOICE HEALTH             | 02/28/2022 | \$ | 5.60       |
| 0000063765 | FISHER HEALTHCARE               | 02/28/2022 | \$ | 7,574.23   |
| 0000063766 | Fedie, Corey                    | 02/28/2022 | \$ | 215.40     |
| 0000063767 | GREENWALT, PATSY                | 02/28/2022 | \$ | 65.52      |
| 0000063768 | Granger, Greg                   | 02/28/2022 | \$ | 71.37      |
| 0000063769 | Health Carousel, LLC            | 02/28/2022 | \$ | 7,964.00   |
| 0000063770 | Joyce Shepherd                  | 02/28/2022 | \$ | 33.06      |
| 0000063771 | LANDAUER INC.                   | 02/28/2022 | \$ | 181.13     |
| 0000063772 | Lynn Greenwalt                  | 02/28/2022 | \$ | 5.33       |
| 0000063773 | MEDLINE INDUSTRIES, INC.        | 02/28/2022 | \$ | 927.25     |
| 0000063774 | Myrtle Gustafson                | 02/28/2022 | \$ | 10.00      |
| 0000063775 | NextGen Healthcare, Inc         | 02/28/2022 | \$ | 5,036.39   |
| 0000063776 | Nuance Communications, Inc      | 02/28/2022 | \$ | 258.12     |
| 0000063777 | OWENS & MINOR                   | 02/28/2022 | \$ | 2,568.97   |
| 0000063778 | PC Connection Sales Corporation | 02/28/2022 | \$ | 2,966.81   |
| 0000063779 | Pacific Office Automation INC   | 02/28/2022 | \$ | 1,229.83   |
| 0000063780 | RICOH USA INC                   | 02/28/2022 | \$ | 960.08     |
| 0000063781 | RICOH USA INC                   | 02/28/2022 | \$ | 239.76     |
| 0000063782 | Rebecca Colbert                 | 02/28/2022 | \$ | 50.00      |
| 0000063783 | Rose Johnson                    | 02/28/2022 | \$ | 1,400.00   |
| 0000063784 | SPRAGUE ANNUAL                  | 02/28/2022 | \$ | 160.00     |
| 0000063785 | STAPLES                         | 02/28/2022 | \$ | 1,072.80   |
| 0000063786 | TIERPOINT                       | 02/28/2022 | \$ | 640.00     |
| 0000063787 | Travelers CL Remittance Center  | 02/28/2022 | \$ | 350.00     |
| 0000063788 | U.S. BANCORP                    | 02/28/2022 | \$ | 12,292.04  |
| 0000063789 | VERIZON WIRELESS                | 02/28/2022 | \$ | 1,264.69   |
| 0000063790 | VIAVANT, PETER                  | 02/28/2022 | \$ | 9,300.00   |
| 0000063791 | Victor Perez                    | 02/28/2022 | \$ | 41.40      |
| 0000063792 | WAYSTAR                         | 02/28/2022 | \$ | 87.30      |
|            |                                 |            | \$ | 475,937.86 |



**Adams County Public Hospital District No. 2  
DBA: East Adams Rural Healthcare  
Ritzville, WA**

**Unaudited Financial Statements**

**for**

**The Two Months Ended, February 28, 2022**

**Certification Statement:**

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

Certified by:

**Kimberly Polanco, CHFP**

Chief Financial Officer

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**East Adams Rural Healthcare**

**Ritzville, WA**

**The Two Months Ended, February 28, 2022**

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# East Adams Rural Healthcare

903 South Adams  
Ritzville, Washington 99169  
509-659-1200

CFO Report to the Board

Board of Commissioners  
East Adams Rural Healthcare  
March 16, 2022

## FEBRUARY 2022 FINANCIAL OVERVIEW

### February Financial Status

East Adams Rural Healthcare's February business resulted in a Net Loss of (\$55,996) for the month and (\$239,794) for the first two months of the year. Operations resulted in a loss of (\$167,509) for the month and (\$468,985) for the year. The District has a negative total margin of (13.9%) and negative operating margin of (31.36%) year to date. As previously reported, the year began with additional restrictions due to the COVID surge, however service delivery volumes have increased in February over January and the increases have maintained in March and are expected to continue.

The District has 223 days cash on hand of which 27 days are Medicare Advance Payments recouped at 25% of Medicare payments each month. To date 56% of the advanced funds have been paid back to CMS with \$887,863 remaining to be paid.

### Accounts Receivable

Gross Patient AR increased \$352,511 or 8.4%. Net Patient AR decreased (\$125,261) or 7.2%. Gross Accounts Receivable Days increased to 147 due to capturing revenue previously unrecognized for pain management service claims for prior months. This increase is temporary as those claims were billed in early March and collection is anticipated within 60 days. Net Patient Accounts Receivable Days increased to 90 due to a reduction in the estimated percentages for uncollectible accounts. With a full year of utilizing an efficient revenue collection process and the clean-up of old accounts receivable we have reliable historical collection trends by payer and have revised the estimated percentages of collectible accounts receivable. In addition to this, the recognition of additional pain management service revenue has driven the days figure higher.

Accounts receivable over 120 days old represent 39% of the receivables which is a 1% increase from January. Many of the pain management balances are in this category, have recently been billed, and will be resolved in the near future.

### Expenses

February expenses were \$919,761, which is 9% below budget. The reduction in expenses from budget are primarily in salaries and wages, reduced estimated bad debt, and lower repairs and maintenance expense. These are partially offset by an increase in contract nurse staffing, ER staffing, and audit expenses.

### Grant Funds

The District was awarded and received \$100,000 for the Empire Capital Grant. These funds have been recorded as Deferred Revenue until the funds are spent on the planned mobile clinic.

Best Regards,

Kimberly Polanco, CHFP



Adams County Public Hospital District No. 2  
Statement of Operations  
For the Period Ending  
The Two Months Ended February 28, 2022

|                                    | Prior Month         |                     | Month to Date Information |                     |                 |                     | Year to Date Information |                     |                 |                     | Last Year YTD |  |
|------------------------------------|---------------------|---------------------|---------------------------|---------------------|-----------------|---------------------|--------------------------|---------------------|-----------------|---------------------|---------------|--|
|                                    | Last Month          | Actual              | Budget                    | Variance            | % Var           | Actual              | Budget                   | Variance            | % Var           |                     |               |  |
|                                    |                     |                     |                           |                     |                 |                     |                          |                     |                 |                     |               |  |
| <b>Patient Service Revenue</b>     |                     |                     |                           |                     |                 |                     |                          |                     |                 |                     |               |  |
| Daily Inpatient Services           | \$ 48,988           | \$ 46,690           | \$ 10,206                 | \$ 36,484           | 357.48%         | \$ 95,678           | \$ 20,412                | \$ 75,266           | 368.73%         | 6,339               |               |  |
| Swingbed Room Revenue              | 738                 | 50,729              | 116,955                   | (66,227)            | -56.63%         | 51,467              | 227,189                  | (175,723)           | -77.35%         | (12,657)            |               |  |
| Physician/Clinic Services          | 78,569              | 54,094              | 63,279                    | (9,185)             | -14.52%         | 132,663             | 126,558                  | 6,105               | 4.82%           | 103,068             |               |  |
| Ancillary Inpatient Services       | 55,985              | 42,102              | 6,168                     | 35,934              | 582.59%         | 98,087              | 12,336                   | 85,751              | 695.13%         | 7,205               |               |  |
| Ancillary Outpatient Services      | 843,891             | 1,189,958           | 658,082                   | 531,876             | 80.82%          | 2,033,849           | 1,316,164                | 717,685             | 54.53%          | 1,254,098           |               |  |
| <b>Total Gross Patient Revenue</b> | <b>\$ 1,028,170</b> | <b>\$ 1,383,573</b> | <b>\$ 854,690</b>         | <b>\$ 528,883</b>   | <b>61.88%</b>   | <b>\$ 2,411,743</b> | <b>\$ 1,702,659</b>      | <b>\$ 709,084</b>   | <b>41.65%</b>   | <b>\$ 1,358,053</b> |               |  |
| Deductions from Revenue            | 291,155             | 641,797             | (29,068)                  | (670,865)           | 2307.92%        | 932,952             | (58,136)                 | (991,088)           | 1704.78%        | (1,704,838)         |               |  |
| <b>Net Patient Service Revenue</b> | <b>\$ 737,015</b>   | <b>\$ 741,776</b>   | <b>\$ 883,758</b>         | <b>\$ 141,982</b>   | <b>16.07%</b>   | <b>\$ 1,478,790</b> | <b>\$ 1,760,795</b>      | <b>\$ 282,004</b>   | <b>16.02%</b>   | <b>\$ 3,062,891</b> |               |  |
| Other Operating Revenue            | 6,325               | 10,477              | 40,833                    | (30,356)            | -74.34%         | 16,802              | 81,666                   | (64,864)            | -79.43%         | (239,091)           |               |  |
| <b>Total Operating Revenue</b>     | <b>\$ 743,340</b>   | <b>\$ 752,252</b>   | <b>\$ 924,591</b>         | <b>\$ (172,338)</b> | <b>-18.64%</b>  | <b>\$ 1,495,592</b> | <b>\$ 1,842,461</b>      | <b>\$ (346,868)</b> | <b>-18.83%</b>  | <b>\$ 2,823,800</b> |               |  |
| <b>Expenses</b>                    |                     |                     |                           |                     |                 |                     |                          |                     |                 |                     |               |  |
| Salaries and Wages                 | 465,174             | 463,202             | 504,845                   | 41,643              | 8.25%           | 928,376             | 1,009,690                | 81,315              | 8.05%           | 1,034,386           |               |  |
| Employee Benefits                  | 141,172             | 113,186             | 107,016                   | (6,171)             | -5.77%          | 294,359             | 214,031                  | (40,328)            | -18.84%         | 69,889              |               |  |
| Purchased Services                 | 138,635             | 153,604             | 115,125                   | (38,480)            | -33.42%         | 292,239             | 230,249                  | (61,990)            | -26.92%         | 200,701             |               |  |
| Professional Fees                  | 89,856              | 53,462              | 32,125                    | (21,338)            | -66.42%         | 143,318             | 64,249                   | (79,069)            | -123.07%        | 47,197              |               |  |
| Supplies                           | 52,704              | 51,758              | 54,780                    | 3,022               | 5.52%           | 104,461             | 109,560                  | 5,099               | 4.65%           | (31,682)            |               |  |
| Repairs and Maintenance            | 19,928              | 22,485              | 22,431                    | 9,946               | 44.34%          | 32,413              | 44,863                   | 12,450              | 27.75%          | 26,017              |               |  |
| Utilities                          | 18,695              | 28,848              | 17,662                    | (11,186)            | -63.33%         | 47,543              | 35,324                   | (12,219)            | -34.59%         | 34,129              |               |  |
| Advertising & Marketing            | 3,725               | 5,623               | 9,692                     | 4,069               | 41.98%          | 9,348               | 19,384                   | 10,036              | 51.77%          | 13,070              |               |  |
| Depreciation                       | 61,687              | 61,687              | 67,716                    | 6,029               | 8.90%           | 123,375             | 135,432                  | 12,057              | 8.90%           | 114,026             |               |  |
| Insurance                          | 22,414              | 9,627               | 11,205                    | 1,578               | 14.08%          | 32,042              | 22,411                   | (9,631)             | -42.98%         | 18,996              |               |  |
| Education/Travel/Dues              | 2,537               | 4,749               | 2,917                     | (1,832)             | -62.81%         | 7,286               | 5,834                    | (1,452)             | -24.89%         | 3,432               |               |  |
| Interest                           | 30,406              | 30,421              | 31,870                    | 1,449               | 4.55%           | 60,827              | 63,741                   | 2,914               | 4.57%           | 61,975              |               |  |
| Taxes & Licenses                   | 4,251               | 21,454              | 15,468                    | (5,987)             | -38.70%         | 25,705              | 30,935                   | 5,230               | 16.91%          | (21,187)            |               |  |
| Rent                               | 6,844               | 3,751               | 2,446                     | (1,305)             | -53.33%         | 10,595              | 4,893                    | (5,702)             | -116.55%        | 5,008               |               |  |
| Bad Debt Expense                   | (14,380)            | (94,940)            | 13,270                    | 108,210             | 815.45%         | (109,320)           | 26,540                   | 135,860             | 511.91%         | (427,866)           |               |  |
| Other                              | 1,169               | 842                 | 2,776                     | 1,934               | 69.66%          | 2,011               | 5,553                    | 3,542               | 63.78%          | (3,817)             |               |  |
| <b>Total Operating Expenses</b>    | <b>\$ 1,044,816</b> | <b>\$ 919,751</b>   | <b>\$ 1,011,344</b>       | <b>\$ 91,583</b>    | <b>9.06%</b>    | <b>\$ 1,964,577</b> | <b>\$ 2,022,688</b>      | <b>\$ 58,110</b>    | <b>2.87%</b>    | <b>\$ 1,144,274</b> |               |  |
| <b>Operating Income (Loss)</b>     | <b>\$ (301,476)</b> | <b>\$ (167,509)</b> | <b>\$ (86,753)</b>        | <b>\$ (80,756)</b>  | <b>93.09%</b>   | <b>\$ (468,985)</b> | <b>\$ (180,227)</b>      | <b>\$ (288,758)</b> | <b>160.22%</b>  | <b>\$ 1,679,526</b> |               |  |
| <b>Non-Operating Income</b>        |                     |                     |                           |                     |                 |                     |                          |                     |                 |                     |               |  |
| Grant & Other NonOp Revenue        | 15,889              | -                   | 12,340                    | (12,340)            | -100.00%        | 15,889              | 24,680                   | (8,791)             | -35.62%         | (39,633)            |               |  |
| Tax Levy Income                    | 101,939             | 111,207             | 100,019                   | 11,188              | 11.19%          | 213,146             | 200,038                  | 13,108              | 6.55%           | 172,196             |               |  |
| Interest Income                    | 141                 | 306                 | 17                        | 289                 | 1700.18%        | 156                 | 34                       | 122                 | 359.35%         | 42                  |               |  |
| Donations                          | -                   | -                   | -                         | -                   | 0.00%           | -                   | -                        | -                   | 0.00%           | -                   |               |  |
| EACC Gain/Loss on Sale             | -                   | -                   | -                         | -                   | 0.00%           | -                   | -                        | -                   | 0.00%           | -                   |               |  |
| Gain/(Loss) on Sale of Property    | -                   | -                   | -                         | -                   | 0.00%           | -                   | -                        | -                   | 0.00%           | (193,388)           |               |  |
| <b>Total Non-Operating Income</b>  | <b>\$ 117,969</b>   | <b>\$ 111,513</b>   | <b>\$ 112,376</b>         | <b>\$ (863)</b>     | <b>-0.77%</b>   | <b>\$ 229,191</b>   | <b>\$ 224,752</b>        | <b>\$ 4,440</b>     | <b>1.98%</b>    | <b>\$ (60,783)</b>  |               |  |
| <b>Net Income (Loss)</b>           | <b>\$ (183,507)</b> | <b>\$ (55,996)</b>  | <b>\$ 25,623</b>          | <b>\$ (81,619)</b>  | <b>-318.54%</b> | <b>\$ (239,794)</b> | <b>\$ 44,523</b>         | <b>\$ (284,317)</b> | <b>-638.58%</b> | <b>\$ 1,618,743</b> |               |  |

ADAMS COUNTY PUBLIC HOSPITAL DISTRICT NO. 2  
EAST ADAMS RURAL HEALTHCARE & DISTRICT CLINICS  
13 MONTH COMBINED STATEMENT OF INCOME AND LOSS

|                                    | Feb 21       | Mar 21       | Apr 21     | May 21       | Jun 21       | Jul 21       | Aug 21       | Sep 21       | Oct 21       | Nov 21       | Dec 21         | Jan 22       | Feb 22       | 12 - Month<br>Average | YTD            |              |
|------------------------------------|--------------|--------------|------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|----------------|--------------|--------------|-----------------------|----------------|--------------|
|                                    |              |              |            |              |              |              |              |              |              |              |                |              |              |                       | Last Year      | This Year    |
| <b>Patient Service Revenue</b>     | \$ 5,535     | \$ 5,535     | \$ 22,910  | \$ -         | \$ 6,520     | \$ 5,535     | \$ 4,890     | \$ 18,235    | \$ 15,315    | \$ 26,510    | \$ 12,055      | \$ 48,988    | \$ 46,690    | \$ 17,765             | \$ 6,339       | \$ 95,678    |
| Daily Inpatient Services           | 36,841       | 56,126       | 207,243    | 238,906      | (63,125)     | 154,170      | 137,061      | (18,369)     | 88,627       | 133,297      | 77,789         | 738          | 50,729       | 88,599                | (12,667)       | 51,467       |
| Swinebred Room Revenue             | 74,331       | 81,854       | 73,786     | 40,725       | 77,541       | 43,515       | 104,927      | 38,867       | 56,340       | 123,330      | 79,619         | 78,569       | 54,094       | 71,099                | 103,068        | 132,663      |
| Physician/Clinic Services          | 5,483        | 16,148       | 13,900     | 549          | 6,029        | 8,964        | 10,477       | 1,948        | 11,345       | 10,768       | 11,070         | 55,985       | 42,102       | 15,774                | 7,205          | 98,087       |
| Ancillary Inpatient Services       | 655,936      | 501,102      | 613,219    | 629,442      | 504,614      | 560,344      | 776,053      | 644,818      | 617,968      | 531,178      | 389,525        | 843,891      | 1,189,958    | 650,176               | 1,254,038      | 2,033,849    |
| Ancillary Outpatient Svc           | 779,126      | \$ 660,765   | \$ 931,058 | \$ 909,622   | \$ 531,579   | \$ 772,528   | \$ 1,033,408 | \$ 685,519   | \$ 789,594   | \$ 825,083   | \$ 570,058     | \$ 1,028,170 | \$ 1,383,573 | \$ 843,413            | \$ 1,358,063   | \$ 2,411,743 |
| <b>Total Gross Patient Revenue</b> | \$ 489,151   | \$ 212,242   | \$ 27,391  | \$ 152,288   | \$ (47,562)  | \$ 251,524   | \$ 298,817   | \$ 273,031   | \$ 157,974   | \$ (885,740) | \$ (200,437)   | \$ 291,155   | \$ 641,797   | \$ 97,707             | \$ (1,704,838) | \$ 932,952   |
| Deductions from Revenue            | \$ 289,975   | \$ 448,524   | \$ 903,667 | \$ 757,334   | \$ 579,141   | \$ 521,003   | \$ 734,591   | \$ 412,488   | \$ 631,620   | \$ 1,710,823 | \$ 770,494     | \$ 737,015   | \$ 741,776   | \$ 745,706            | \$ 3,062,891   | \$ 1,478,790 |
| <b>Net Patient Service Rev</b>     | \$ 298,647   | \$ 476,495   | \$ 913,978 | \$ 766,279   | \$ 603,353   | \$ 4,282     | \$ 10,899    | \$ 75,586    | \$ 265,843   | \$ 15,195    | \$ (87,915)    | \$ 6,325     | \$ 10,477    | \$ 31,004             | \$ 2,823,800   | \$ 1,495,592 |
| <b>Other Operating Revenue</b>     | \$ 8,672     | \$ 27,972    | \$ 10,311  | \$ 8,944     | \$ 24,212    | \$ 4,282     | \$ 10,899    | \$ 75,586    | \$ 265,843   | \$ 15,195    | \$ (87,915)    | \$ 6,325     | \$ 10,477    | \$ 31,004             | \$ (239,091)   | \$ 16,802    |
| <b>Total Operating Revenue</b>     | \$ 298,647   | \$ 476,495   | \$ 913,978 | \$ 766,279   | \$ 603,353   | \$ 4,282     | \$ 10,899    | \$ 75,586    | \$ 265,843   | \$ 15,195    | \$ (87,915)    | \$ 6,325     | \$ 10,477    | \$ 776,710            | \$ 2,823,800   | \$ 1,495,592 |
| <b>Expenses</b>                    | \$ 390,326   | \$ 375,650   | \$ 480,991 | \$ 380,413   | \$ 367,491   | \$ 576,838   | \$ 389,818   | \$ 407,842   | \$ 426,959   | \$ 438,823   | \$ 625,890     | \$ 465,174   | \$ 463,202   | \$ 449,924            | \$ 1,034,386   | \$ 928,376   |
| Salaries and Wages                 | 51,327       | 86,242       | 65,628     | 136,973      | 38,298       | 144,513      | 91,460       | 135,433      | 51,357       | 86,201       | 174,229        | 141,172      | 113,186      | 105,558               | 69,889         | 254,359      |
| Employee Benefits                  | 95,074       | 137,519      | 193,090    | 99,113       | 124,605      | 169,674      | 147,429      | 158,451      | 215,742      | 126,554      | 255,132        | 138,635      | 153,904      | 159,962               | 200,701        | 292,239      |
| Purchased Services                 | 22,534       | 35,984       | 76,321     | 82,168       | 95,342       | 103,230      | 112,132      | 95,158       | 119,343      | 56,492       | 147,482        | 89,856       | 53,462       | 88,907                | 47,197         | 143,318      |
| Professional Fees                  | 61,414       | 51,923       | 32,740     | 17,156       | (149,154)    | 36,407       | 48,870       | 97,088       | 66,924       | 49,151       | 287,467        | 52,704       | 51,758       | 56,919                | (31,682)       | 104,461      |
| Supplies                           | 10,909       | 15,202       | 17,552     | 17,156       | 13,043       | 21,305       | 15,792       | 20,878       | 14,782       | 19,246       | 15,255         | 19,928       | 12,485       | 16,885                | 26,017         | 32,413       |
| Repairs and Maintenance            | 20,734       | 19,814       | 19,885     | 23,857       | 19,204       | 11,672       | 14,939       | 22,827       | 9,965        | 11,574       | 17,310         | 18,695       | 28,848       | 18,216                | 34,129         | 47,543       |
| Utilities                          | 6,843        | 1,938        | 6,847      | 8,175        | 5,450        | 8,321        | 4,519        | 12,534       | 10,261       | 2,376        | 21,671         | 3,725        | 5,623        | 7,620                 | 13,070         | 9,348        |
| Advertising & Marketing            | 66,410       | 66,428       | 66,427     | 66,428       | 66,427       | 66,428       | 79,839       | 63,402       | 63,728       | 63,728       | 63,728         | 61,687       | 61,687       | 65,828                | 114,026        | 123,375      |
| Depreciation                       | 10,019       | 8,308        | 19,519     | 7,999        | 28,803       | 7,568        | 7,568        | 2,979        | 7,094        | 16,565       | 12,599         | 22,414       | 9,627        | 12,754                | 18,996         | 32,042       |
| Insurance                          | 2,448        | 1,420        | 1,918      | 2,909        | 2,311        | 2,148        | 430          | 3,220        | 3,894        | 1,697        | 2,937          | 2,537        | 4,749        | 2,509                 | 3,432          | 7,286        |
| Education/Travel/Dues              | 31,226       | 31,273       | 31,237     | 31,262       | 31,274       | 31,235       | 31,220       | 31,841       | 31,174       | 31,160       | 30,436         | 30,406       | 30,421       | 31,074                | 61,975         | 60,827       |
| Interest                           | 7,495        | 20,208       | 18,641     | 4,925        | 16,891       | 7,306        | 11,615       | 15,060       | 18,613       | 9,780        | 30,588         | 4,251        | 21,454       | 14,944                | (21,187)       | 25,705       |
| Taxes & Licenses                   | 4,108        | 3,224        | 8,499      | 4,786        | 4,866        | 4,624        | 4,624        | 4,677        | 3,724        | 4,624        | 3,724          | 6,844        | 3,751        | 4,904                 | 5,008          | 10,595       |
| Rent                               | (74,181)     | (126,016)    | (186,691)  | (6,853)      | 15,719       | 41,863       | 254,082      | 24,779       | 12,419       | 28,540       | 292            | (14,380)     | (94,940)     | (4,264)               | (427,866)      | (109,320)    |
| Bad Debt Expense                   | 4,321        | 498          | 818        | 1,975        | 919          | 1,330        | 629          | 641          | 847          | 696          | 1,066          | 1,169        | 842          | 953                   | (3,817)        | 2,011        |
| Other                              | \$ 711,008   | \$ 710,331   | \$ 872,604 | \$ 918,442   | \$ 681,433   | \$ 1,234,462 | \$ 1,214,968 | \$ 1,096,823 | \$ 1,057,666 | \$ 951,208   | \$ 1,689,807   | \$ 1,044,816 | \$ 919,761   | \$ 1,032,693          | \$ 1,144,274   | \$ 1,964,577 |
| <b>Total Operating Expenses</b>    | \$ (412,360) | \$ (233,836) | \$ 41,373  | \$ (152,163) | \$ (78,080)  | \$ (709,177) | \$ (469,538) | \$ (608,769) | \$ (160,202) | \$ 774,810   | \$ (1,007,228) | \$ (301,476) | \$ (167,509) | \$ (255,989)          | \$ 1,679,526   | \$ (468,985) |
| <b>Operating Income (Loss)</b>     | \$ -         | \$ 60,352    | \$ 93,657  | \$ -         | \$ 1,104,275 | \$ -         | \$ 12,200    | \$ 923       | \$ -         | \$ 129,608   | \$ 977,841     | \$ 15,889    | \$ -         | \$ 199,562            | \$ (39,633)    | \$ 15,889    |
| <b>Non-Operating Income</b>        | \$ 110,599   | \$ 111,145   | \$ 197,355 | \$ 67,473    | \$ 113,271   | \$ 94,317    | \$ 94,328    | \$ 94,336    | \$ 94,353    | \$ 94,404    | \$ 94,756      | \$ 101,939   | \$ 111,207   | \$ 105,740            | \$ 172,196     | \$ 213,146   |
| Grant & Other Non-Op Rev           | 14           | 13           | 10         | 7            | 31           | 6            | 6            | 5            | 5            | 8            | 27             | 141          | 306          | 47                    | 42             | 156          |
| Tax Levy Income                    | -            | -            | -          | -            | -            | -            | -            | -            | -            | -            | -              | -            | -            | -                     | -              | -            |
| Interest Income                    | -            | -            | -          | -            | -            | -            | -            | -            | -            | -            | -              | -            | -            | -                     | -              | -            |
| Donations                          | -            | -            | -          | -            | -            | -            | -            | -            | -            | -            | -              | -            | -            | -                     | -              | -            |
| EACC Gain/Loss on Sale             | -            | -            | -          | -            | -            | -            | -            | -            | -            | -            | -              | -            | -            | -                     | -              | -            |
| Gain/Loss on Sale prop             | -            | -            | -          | -            | -            | -            | -            | -            | -            | -            | -              | -            | -            | -                     | -              | -            |
| <b>Total Non-Operating Income</b>  | \$ 110,613   | \$ 171,511   | \$ 291,022 | \$ 67,480    | \$ 1,217,577 | \$ 94,323    | \$ 106,534   | \$ 95,263    | \$ 94,358    | \$ 224,020   | \$ 1,072,624   | \$ 117,969   | \$ 111,513   | \$ 305,349            | \$ (60,783)    | \$ 229,863   |
| <b>Net Income (Loss)</b>           | \$ (301,747) | \$ (62,325)  | \$ 332,396 | \$ (84,683)  | \$ 1,139,496 | \$ (614,854) | \$ (363,004) | \$ (513,506) | \$ (65,844)  | \$ 998,630   | \$ 65,395      | \$ (183,507) | \$ (55,996)  | \$ 49,367             | \$ 1,618,743   | \$ (239,122) |





ADAMS COUNTY PUBLIC HOSPITAL DISTRICT NO. 2  
EAST ADAMS RURAL HEALTHCARE & DISTRICT CLINICS  
Comparative Balance Sheet

|  | Change      |             |             |             |             |             |             |             |             |             |             |             |             |             |             |             |             |
|--|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|
|  | Feb 21      | Mar 21      | Apr 21      | May 21      | Jun 21      | Jul 21      | Aug 21      | Sep 21      | Oct 21      | Nov 21      | Dec 21      | Jan 22      | Feb 22      | Current     | %           | YTD         |             |
| <b>ASSETS</b>                                |             |             |             |             |             |             |             |             |             |             |             |             |             |             |             |             |             |
| <b>Current Assets</b>                        |             |             |             |             |             |             |             |             |             |             |             |             |             |             |             |             |             |
| Operating Cash                               | 6,065,015   | 6,179,535   | 7,670,159   | 7,700,804   | 7,721,302   | 7,189,349   | 6,808,469   | 6,356,827   | 6,046,167   | 6,385,864   | 6,263,807   | 5,752,377   | 5,458,515   | (293,862)   | -5.1%       | (805,292)   |             |
| Accounts Receivable                          | 4,247,576   | 4,045,873   | 3,778,464   | 3,575,772   | 3,327,388   | 3,612,356   | 4,092,947   | 3,923,778   | 4,016,575   | 4,294,488   | 4,045,965   | 4,207,829   | 4,560,340   | 352,511     | 8.4%        | 514,375     |             |
| Patients                                     | (2,031,935) | (1,833,007) | (1,485,986) | (1,254,862) | (1,189,742) | (1,338,086) | (1,724,230) | (1,537,863) | (1,548,802) | (1,540,202) | (1,719,620) | (1,745,088) | (1,870,349) | (125,261)   | 7.2%        | (150,729)   |             |
| Allowance for Bad Debt & Contractuals        | 2,215,641   | 2,212,866   | 2,292,478   | 2,320,910   | 2,137,646   | 2,274,319   | 2,368,717   | 2,385,915   | 2,467,773   | 2,754,286   | 2,326,345   | 2,462,741   | 2,689,991   | 227,250     | 9.2%        | 363,646     |             |
| Net Patient Receivables                      | (393,126)   | (393,126)   | (393,126)   | (393,126)   | (393,126)   | (393,126)   | (393,126)   | (393,126)   | (393,126)   | (393,126)   | (393,126)   | (393,126)   | (393,126)   | -           | 0.0%        | -           |             |
| Third Party Receivables                      | 264,990     | 296,759     | (116,383)   | (157,900)   | (49,119)    | 40,469      | 131,450     | 161,262     | 62,163      | 11,963      | 100,045     | 199,334     | 307,413     | 108,079     | 54.2%       | 207,368     |             |
| Taxes Receivable                             | 202,178     | 202,378     | 204,412     | 207,948     | 101,948     | 99,442      | 96,119      | 93,541      | 91,188      | 88,159      | 371,874     | 378,156     | 386,677     | 8,521       | 2.3%        | 14,804      |             |
| Inventory                                    | 26,203      | 26,203      | 26,203      | 26,203      | 26,203      | 26,210      | 26,210      | 26,212      | 26,212      | 26,214      | 26,215      | 26,216      | 26,218      | 2           | 0.0%        | 3           |             |
| Reserve For Operations                       | 1,837,940   | 1,838,116   | 1,838,268   | 1,838,365   | 1,838,496   | 1,838,769   | 1,838,891   | 1,839,021   | 1,839,166   | 1,839,295   | 1,839,443   | 1,839,583   | 1,839,733   | 150         | 0.0%        | 290         |             |
| Depreciation                                 | (0)         | (0)         | (0)         | (0)         | 59,176      | 59,234      | 59,292      | 59,350      | 59,408      | 59,466      | 59,524      | 59,582      | 59,640      | (1,942)     | -0.3%       | 31,110      |             |
| Other Current Assets                         | 10,218,942  | 10,362,730  | 11,522,013  | 11,542,637  | 11,443,532  | 11,133,666  | 10,933,023  | 10,560,865  | 10,226,854  | 10,798,003  | 10,618,009  | 10,381,740  | 10,429,938  | 48,198      | 0.5%        | (186,071)   |             |
| <b>Total Current Assets</b>                  | 16,744,134  | 16,744,134  | 16,748,235  | 16,748,235  | 16,748,235  | 16,748,235  | 16,748,235  | 16,862,345  | 16,862,345  | 16,862,345  | 16,915,848  | 16,943,206  | 16,943,206  | -           | 0.0%        | 27,358      |             |
| <b>Other Assets</b>                          |             |             |             |             |             |             |             |             |             |             |             |             |             |             |             |             |             |
| Property, Buildings, & Equipment             | (7,339,679) | (7,406,107) | (7,472,534) | (7,538,962) | (7,605,389) | (7,671,817) | (7,738,245) | (7,804,673) | (7,871,101) | (7,937,529) | (8,003,957) | (8,070,385) | (8,136,813) | (8,203,241) | (8,269,669) | (8,336,097) | (8,402,525) |
| Accumulated Depreciation                     | 9,404,455   | 9,338,028   | 9,271,501   | 9,204,974   | 9,138,447   | 9,071,920   | 8,995,393   | 8,928,866   | 8,852,339   | 8,785,812   | 8,719,285   | 8,652,758   | 8,586,231   | (61,687)    | 0.8%        | (123,375)   |             |
| <b>Net Property Plant &amp; Equipment</b>    | 46,788      | 46,788      | 46,788      | 46,788      | 46,788      | 46,788      | 46,788      | 46,788      | 46,788      | 46,788      | 46,788      | 46,788      | 46,788      | (61,687)    | -0.7%       | (96,017)    |             |
| Investment in Property                       | -           | -           | -           | -           | -           | -           | -           | -           | -           | -           | -           | -           | -           | -           | 0.0%        | -           |             |
| Construction in Progress                     | -           | -           | -           | -           | -           | -           | -           | -           | -           | -           | -           | -           | -           | -           | 0.0%        | -           |             |
| 457B Plan Assets                             | -           | -           | -           | -           | -           | -           | -           | -           | -           | -           | -           | -           | -           | -           | 0.0%        | -           |             |
| <b>Total Property, Plant &amp; Equipment</b> | 9,451,243   | 9,384,815   | 9,322,488   | 9,256,061   | 9,189,633   | 9,123,206   | 9,043,367   | 9,114,074   | 9,033,832   | 8,990,104   | 8,956,393   | 8,922,064   | 8,860,376   | (61,687)    | -0.7%       | (96,017)    |             |
| <b>Total Assets</b>                          | 19,670,064  | 19,747,545  | 20,844,501  | 20,798,698  | 20,633,165  | 20,256,872  | 19,976,390  | 19,674,959  | 19,280,666  | 19,788,106  | 19,574,402  | 19,303,804  | 19,290,314  | (13,459)    | -0.1%       | (284,088)   |             |
| <b>LIABILITIES</b>                           |             |             |             |             |             |             |             |             |             |             |             |             |             |             |             |             |             |
| <b>Current Liabilities:</b>                  |             |             |             |             |             |             |             |             |             |             |             |             |             |             |             |             |             |
| Accounts Payable                             | 67,545      | 175,718     | 153,439     | 107,903     | (96,976)    | (149,806)   | (74,290)    | 68,116      | (52,181)    | (158,606)   | 589,189     | 456,133     | 398,756     | (67,377)    | -12.6%      | (190,433)   |             |
| Payroll And Related Liabilities              | 1,749,914   | 1,751,382   | 1,508,630   | 1,566,676   | 1,506,218   | 1,772,927   | 1,736,404   | 1,782,642   | 1,544,404   | 1,566,514   | 1,462,376   | 1,523,264   | 1,463,743   | (99,520)    | -3.9%       | (16,633)    |             |
| Third Party Cost Report                      | 1,324,459   | 1,324,459   | 2,332,346   | 2,332,346   | 1,446,627   | 1,446,627   | 1,446,627   | 1,446,627   | 1,446,627   | 1,446,627   | 438,740     | 438,740     | 438,740     | -           | 0.0%        | -           |             |
| Settlements                                  | 240,000     | 240,000     | 240,000     | 240,000     | 240,000     | 240,000     | 240,000     | 240,000     | 240,000     | 250,000     | 250,000     | 250,000     | 250,000     | -           | 0.0%        | -           |             |
| Current Portion of LTD                       | 193,904     | 192,748     | 183,176     | 178,103     | 177,841     | 173,127     | 165,409     | 177,584     | 176,460     | 174,859     | 189,447     | 174,130     | 303,139     | 129,009     | 74.1%       | 103,692     |             |
| Other Accrued Expenses                       | 3,575,622   | 3,684,307   | 4,417,591   | 4,425,228   | 3,275,710   | 3,482,874   | 3,534,150   | 3,714,969   | 3,355,310   | 3,269,394   | 2,999,752   | 2,842,266   | 2,854,378   | 12,112      | 0.4%        | (109,974)   |             |
| <b>Total Current Liabilities</b>             | 7,975,960   | 8,007,084   | 8,038,209   | 8,069,334   | 7,913,711   | 7,944,836   | 7,975,960   | 8,007,084   | 8,038,169   | 7,632,546   | 7,662,941   | 7,693,336   | 7,723,730   | 30,395      | 0.4%        | 60,789      |             |
| <b>Long Term Debt:</b>                       |             |             |             |             |             |             |             |             |             |             |             |             |             |             |             |             |             |
| Capital Lease                                | -           | -           | -           | -           | -           | -           | -           | -           | -           | -           | -           | -           | -           | -           | 0.0%        | -           |             |
| Bonds  | 7,975,960   | 8,007,084   | 8,038,209   | 8,069,334   | 7,913,711   | 7,944,836   | 7,975,960   | 8,007,084   | 8,038,169   | 7,632,546   | 7,662,941   | 7,693,336   | 7,723,730   | 30,395      | 0.4%        | 60,789      |             |
| <b>Total Liabilities</b>                     | 7,975,960   | 8,007,084   | 8,038,209   | 8,069,334   | 7,913,711   | 7,944,836   | 7,975,960   | 8,007,084   | 8,038,169   | 7,632,546   | 7,662,941   | 7,693,336   | 7,723,730   | 30,395      | 0.4%        | 60,789      |             |
| <b>FUND BALANCE (DEFICIT):</b>               |             |             |             |             |             |             |             |             |             |             |             |             |             |             |             |             |             |
| Prior Years                                  | 6,499,149   | 6,499,149   | 6,499,149   | 6,499,149   | 6,499,149   | 6,499,149   | 6,499,149   | 6,499,149   | 6,499,149   | 6,499,149   | 6,499,149   | 6,499,149   | 6,499,149   | -           | 0.0%        | 2,452,560   |             |
| Current Year                                 | 1,618,743   | 1,556,419   | 1,868,814   | 1,804,131   | 2,943,627   | 2,328,773   | 1,965,769   | 1,452,264   | 1,385,420   | 2,385,250   | 2,450,646   | (183,507)   | (239,503)   | (55,996)    | 30.5%       | (2,690,149) |             |
| <b>Total Fund Balance (Deficit)</b>          | 8,117,893   | 8,055,568   | 8,367,963   | 8,303,280   | 9,442,776   | 8,827,923   | 8,464,919   | 7,951,413   | 7,884,569   | 8,884,399   | 8,949,795   | 8,768,201   | 8,712,206   | (55,996)    | -0.6%       | (237,589)   |             |
| <b>Total Liabilities And Fund Balance</b>    | 19,689,675  | 19,746,960  | 20,843,764  | 20,797,842  | 20,632,197  | 20,255,633  | 19,976,029  | 19,673,467  | 19,279,049  | 19,786,340  | 19,572,488  | 19,303,804  | 19,290,314  | (13,469)    | -0.1%       | (282,174)   |             |

ADAMS COUNTY PUBLIC HOSPITAL DISTRICT NO. 2  
EAST ADAMS RURAL HEALTHCARE & DISTRICT CLINICS  
Comparative Balance Sheet Changes



|  | Feb 21           | Mar 21           | Apr 21           | May 21           | Jun 21           | Jul 21           | Aug 21           | Sep 21           | Oct 21           | Nov 21           | Dec 21           | Jan 22           | Feb 22           |
|--|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|
| <b>Cash From Operations</b>            |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |
| Net Income                             | 828,374          | (62,325)         | 332,396          | (84,683)         | 1,139,496        | (614,854)        | (363,004)        | (513,506)        | (65,844)         | 998,830          | 65,395           | (181,593)        | (55,996)         |
| Depreciation                           | 705,755          | 66,428           | 66,427           | 66,428           | 66,427           | 66,428           | 79,839           | 63,402           | 63,728           | 63,728           | 63,728           | 61,687           | 61,687           |
| Change in A/R                          | 1,198,002        | 2,775            | (79,612)         | (28,432)         | 183,263          | (136,673)        | (94,398)         | (17,198)         | (81,858)         | (286,513)        | 427,941          | (136,396)        | (227,250)        |
| Change in Current Liabilities          | 2,526,427        | 108,485          | 733,284          | 7,637            | (1,149,518)      | 207,165          | 51,276           | 180,820          | (359,659)        | (85,916)         | (309,642)        | (117,486)        | 12,112           |
| Change in Other Current Assets         | (38,295)         | (31,966)         | 411,106          | 38,571           | (63,547)         | (85,140)         | (85,717)         | (60,174)         | 103,374          | 55,191           | (369,855)        | (138,623)        | (114,558)        |
| <b>Net Cash From Operations</b>        | <b>5,220,264</b> | <b>83,396</b>    | <b>1,463,601</b> | <b>(479)</b>     | <b>176,121</b>   | <b>(563,075)</b> | <b>(412,004)</b> | <b>(346,656)</b> | <b>(340,258)</b> | <b>745,321</b>   | <b>(122,433)</b> | <b>(512,411)</b> | <b>(324,105)</b> |
| <b>Cash from Financing and Capital</b> |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |
| Change in Long Term Liabilities        | -                | -                | -                | -                | -                | -                | -                | -                | -                | -                | -                | -                | -                |
| Change in Capital Equipment            | 591,892          | -                | (4,101)          | -                | -                | -                | -                | (134,110)        | (3,486)          | -                | (30,018)         | (27,358)         | -                |
| Bond                                   | (538,894)        | 31,125           | 31,125           | 31,125           | (155,623)        | 31,125           | 31,125           | 31,125           | 31,085           | (405,623)        | 30,395           | 30,395           | 30,395           |
| <b>Net Cash From Capital</b>           | <b>52,999</b>    | <b>31,125</b>    | <b>27,024</b>    | <b>31,125</b>    | <b>(155,623)</b> | <b>31,125</b>    | <b>31,125</b>    | <b>(102,985)</b> | <b>27,599</b>    | <b>(405,623)</b> | <b>377</b>       | <b>3,037</b>     | <b>30,395</b>    |
| <b>Net Change in Cash</b>              | <b>5,273,263</b> | <b>114,521</b>   | <b>1,490,625</b> | <b>30,646</b>    | <b>20,499</b>    | <b>(531,950)</b> | <b>(380,880)</b> | <b>(449,641)</b> | <b>(312,659)</b> | <b>339,698</b>   | <b>(122,056)</b> | <b>(509,374)</b> | <b>(293,710)</b> |
| <b>Beginning Cash</b>                  | <b>2,655,486</b> | <b>7,929,158</b> | <b>8,043,856</b> | <b>9,534,632</b> | <b>9,565,396</b> | <b>9,586,007</b> | <b>9,054,328</b> | <b>8,673,571</b> | <b>8,224,060</b> | <b>7,911,545</b> | <b>8,251,373</b> | <b>8,129,464</b> | <b>7,618,176</b> |
| <b>Ending Cash</b>                     | <b>7,928,749</b> | <b>8,043,679</b> | <b>9,534,480</b> | <b>9,565,278</b> | <b>9,585,894</b> | <b>9,054,057</b> | <b>8,673,448</b> | <b>8,223,929</b> | <b>7,911,401</b> | <b>8,251,243</b> | <b>8,129,317</b> | <b>7,620,090</b> | <b>7,324,466</b> |

ADAMS COUNTY PUBLIC HOSPITAL DISTRICT NO. 2  
EAST ADAMS RURAL HEALTHCARE & DISTRICT CLINICS  
STATISTICS



|                             | Mar 21 | Apr 21 | May 21 | Jun 21 | Jul 21 | Aug 21 | Sep 21 | Oct 21 | Nov 21 | Dec 21 | Jan 22 | Feb 22 | Year To Date |         | 12 Month Average | % Change from Prior Year |
|-----------------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------------|---------|------------------|--------------------------|
|                             | 31     | 30     | 31     | 30     | 31     | 31     | 30     | 31     | 30     | 31     | 31     | 28     | Last Year    | Current | 30.36            |                          |
| Days In Period              | 31     | 30     | 31     | 30     | 31     | 31     | 30     | 31     | 30     | 31     | 31     | 28     | 59           | 59      | 30.36            |                          |
| Admits                      | 2      | 3      | 0      | 2      | 1      | 1      | 4      | 2      | 6      | 2      | 5      | 4      | 13           | 9       | 2.73             | -31%                     |
| Discharges                  | 2      | 3      | 0      | 1      | 2      | 1      | 4      | 2      | 5      | 3      | 5      | 3      | 2            | 8       | 2.64             | 300%                     |
| Patient Days                | 7      | 9      | 0      | 4      | 3      | 3      | 9      | 9      | 16     | 8      | 26     | 23     | 30           | 49      | 10.00            | 63%                      |
| Average LOS per Discharge   | 3.50   | 3.00   | 0.00   | 4.00   | 1.50   | 3.00   | 2.25   | 4.50   | 3.20   | 2.67   | 5.20   | 7.67   | 15.00        | 6.13    | 3.36             | -59%                     |
| Average Daily Census        | 0.23   | 0.30   | 0.00   | 0.13   | 0.10   | 0.10   | 0.30   | 0.29   | 0.53   | 0.26   | 0.84   | 0.82   | 0.51         | 0.83    | 0.33             | 63%                      |
| Laboratory Billable Tests   | 1,124  | 1,414  | 1,129  | 1,043  | 991    | 1,091  | 1,684  | 1,427  | 1,398  | 1,375  | 1,794  | 1,438  | 2,208        | 3,232   | 1,344            | 46%                      |
| EKG Charges                 | 35     | 46     | 35     | 17     | 46     | 51     | 27     | 31     | 35     | 66     | 26     | 42     | 119          | 66      | 38               | -43%                     |
| X-rays                      | 107    | 115    | 104    | 109    | 109    | 102    | 104    | 133    | 112    | 126    | 141    | 114    | 180          | 255     | 115              | 42%                      |
| CT Scans                    | 32     | 48     | 45     | 43     | 41     | 82     | 46     | 55     | 50     | 78     | 83     | 101    | 73           | 184     | 61               | 152%                     |
| MRI Scans                   | 2      | 7      | 6      | 5      | 5      | 7      | 4      | 8      | 5      | 7      | 4      | 9      | 8            | 13      | 6                | 63%                      |
| ULTRASOUND Scans            | 16     | 19     | 13     | 14     | 18     | 9      | 14     | 15     | 20     | 23     | 30     | 18     | 35           | 48      | 18               | 37%                      |
| Pain Management Procedures  | 0      | 0      | 3      | 7      | 32     | 27     | 41     | 33     | 19     | 23     | 26     | 23     | 0            | 49      | 21               | 13%                      |
| ER Visits                   | 59     | 93     | 96     | 39     | 122    | 166    | 86     | 100    | 62     | 176    | 90     | 104    | 171          | 194     | 103              |                          |
| Ambulance Runs              | 63     | 62     | 56     | 67     | 71     | 67     | 54     | 49     | 52     | 93     | 70     | 46     | 127          | 116     | 62               | -9%                      |
| Skilled Swing Days          | 21     | 56     | 89     | 47     | 68     | 58     | 56     | 47     | 80     | 78     | 5      | 15     | 143          | 168     | 54               | 17%                      |
| Non-Skilled Swing Days      | 62     | 70     | 90     | 45     | 61     | 62     | 60     | 96     | 108    | 163    | 123    | 84     | 118          | 59      | 87               | -50%                     |
| Observation Hours           | 50     | 48     | 11     | 76     | 140    | 43     | 195    | 120    | 275    | 70     | 128    | 265    | 116          | 393     | 125              | 239%                     |
| Observation Days            | 2.08   | 2.00   | 0.46   | 3.17   | 5.83   | 1.79   | 8.13   | 5.00   | 11.46  | 2.92   | 5.33   | 11.04  | 4.83         | 16.38   | 5.2              | 239%                     |
| Physical Therapy Treatments | 765    | 618    | 625    | 528    | 573    | 657    | 799    | 760    | 844    | 779    | 498    | 518    | 957          | 1,016   | 654              | 6%                       |
| FTE's Worked                | 52.69  | 58.74  | 42.37  | 42.36  | 57.97  | 54.00  | 48.82  | 59.42  | 58.17  | 58.80  | 60.52  | 57.60  | 55.96        | 59.06   | 54.43            | 6%                       |
| FTE's Paid                  | 53.65  | 59.71  | 44.05  | 44.00  | 59.60  | 55.63  | 50.24  | 60.81  | 59.56  | 60.20  | 62.71  | 59.95  | 56.92        | 61.33   | 56.04            | 8%                       |
| Rev / FTE's                 | 53     | 59     | 42     | 42     | 58     | 54     | 49     | 59     | 58     | 59     | 61     | 58     | 56           | 59      | 54               | 6%                       |



**East Adams Rural Healthcare**  
**Ritzville, WA**  
**STATEMENT OF REVENUE & EXPENSES**  
**Period 2, February 2022**

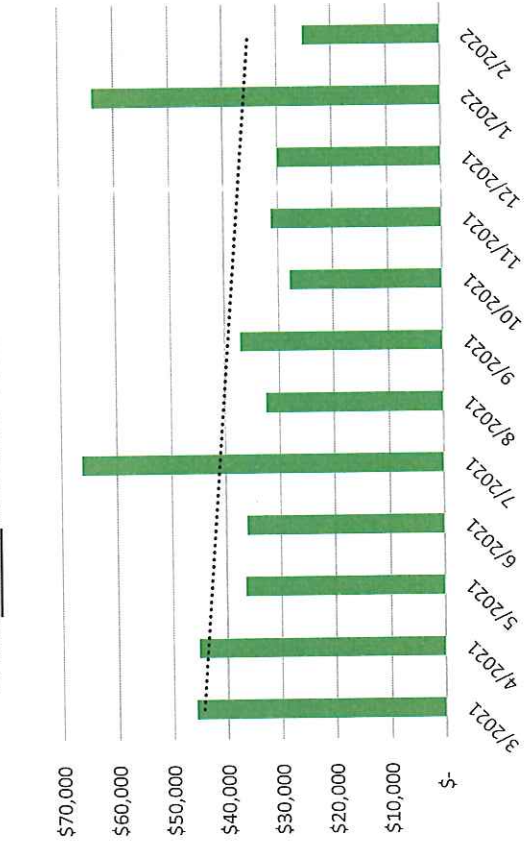
| Month to Date               |                  |              |                  | Year to Date                             |                  |                  |              |                  |
|-----------------------------|------------------|--------------|------------------|--|------------------|------------------|--------------|------------------|
| Actual                      | Budget           | Variance \$  | Last Year Month  | Actual                                   | Budget           | Variance \$      | Last Year    |                  |
| <b>Patient Revenue</b>      |                  |              |                  |  |                  |                  |              |                  |
| 46,690                      | 10,206           | 357%         | 5,535            | Inpatient Services                       | 95,678           | 20,412           | 369%         | 6,339            |
| 50,729                      | 116,955          | -57%         | 36,841           | Swing Bed Revenue                        | 51,467           | 227,189          | -77%         | -12,657          |
| 54,094                      | 63,279           | -15%         | 74,331           | Clinic Revenue                           | 132,663          | 126,558          | 5%           | 103,068          |
| 42,102                      | 6,168            | 583%         | 5,483            | Ancillary IP Services                    | 98,087           | 12,336           | 695%         | 7,205            |
| 1,189,958                   | 658,082          | 81%          | 656,936          | Ancillary OP Services                    | 2,033,849        | 1,316,164        | 55%          | 1,254,098        |
| <b>1,383,573</b>            | <b>854,690</b>   | <b>62%</b>   | <b>779,126</b>   | <b>Total Gross Patient Revenue</b>       | <b>2,411,743</b> | <b>1,702,659</b> | <b>42%</b>   | <b>1,358,053</b> |
| 641,797                     | -29,068          | -2308%       | 489,151          | Deductions from Revenue                  | 932,952          | -58,136          | -1705%       | -1,704,838       |
| <b>741,776</b>              | <b>883,758</b>   | <b>-16%</b>  | <b>289,975</b>   | <b>Net Patient Service Revenue</b>       | <b>1,478,790</b> | <b>1,760,795</b> | <b>-16%</b>  | <b>3,062,891</b> |
| 10,477                      | 40,833           | -74%         | 8,672            | Other Operating Revenues                 | 16,802           | 81,666           | -79%         | -239,091         |
| <b>752,252</b>              | <b>924,591</b>   | <b>-19%</b>  | <b>298,647.1</b> | <b>Total Revenue</b>                     | <b>1,495,592</b> | <b>1,842,461</b> | <b>-19%</b>  | <b>2,823,800</b> |
| <b>OPERATING EXPENSES</b>   |                  |              |                  |  |                  |                  |              |                  |
| 463,202                     | 504,845          | -8%          | 390,326          | Salaries & Wages                         | 928,376          | 1,009,690        | -8%          | 1,034,386        |
| 113,186                     | 107,016          | 6%           | 51,327           | Employee Benefits                        | 254,359          | 214,031          | 19%          | 69,889           |
| 153,604                     | 115,125          | 33%          | 95,074           | Purchased Services                       | 292,239          | 230,249          | 27%          | 200,701          |
| 51,758                      | 54,780           | -6%          | 61,414           | Supplies                                 | 104,461          | 109,560          | -5%          | -31,682          |
| 53,462                      | 32,125           | 66%          | 22,534           | Professional Fees                        | 143,318          | 64,249           | 123%         | 47,197           |
| 61,687                      | 67,716           | -9%          | 66,410           | Depreciation                             | 123,375          | 135,432          | -9%          | 114,026          |
| 9,627                       | 11,205           | -14%         | 10,019           | Insurance                                | 32,042           | 22,411           | 43%          | 18,996           |
| 30,421                      | 31,870           | -5%          | 31,226           | Interest                                 | 60,827           | 63,741           | -5%          | 61,975           |
| 28,848                      | 17,662           | 63%          | 20,734           | Utilities                                | 47,543           | 35,324           | 35%          | 34,129           |
| 12,485                      | 22,431           | -44%         | 10,909           | Repairs & Maintenance                    | 32,413           | 44,863           | -28%         | 26,017           |
| 21,454                      | 15,468           | 39%          | 7,495            | Taxes & Licenses                         | 25,705           | 30,935           | -17%         | -21,187          |
| 4,749                       | 2,917            | 63%          | 2,448            | Education/Travel/Dues                    | 7,286            | 5,834            | 25%          | 3,432            |
| 3,751                       | 2,446            | 53%          | 4,108            | Rent                                     | 10,595           | 4,893            | 117%         | 5,008            |
| -94,940                     | 13,270           | -815%        | -74,181          | Bad Debt                                 | -109,320         | 26,540           | -512%        | -427,866         |
| 6,465                       | 12,468           | -48%         | 11,164           | Other Expenses                           | 11,359           | 24,937           | -54%         | 9,253            |
| <b>919,761</b>              | <b>1,011,344</b> | <b>-9%</b>   | <b>711,008</b>   | <b>Total Operating Expenses</b>          | <b>1,964,577</b> | <b>2,022,688</b> | <b>-3%</b>   | <b>1,144,274</b> |
| <b>NON-OPERATING INCOME</b> |                  |              |                  |  |                  |                  |              |                  |
| 111,207                     | 100,019          | 11%          | 110,599          | Tax Levy Income                          | 213,146          | 200,038          | 7%           | 172,196          |
| 306                         | 17               | 1700%        | 0                | Interest & Dividend Income               | 156              | 34               | 359%         | 0                |
| 0                           | 12,340           | -100%        | 0                | Grant Revenue                            | 15,889           | 24,680           | -36%         | -39,633          |
| 0                           | 0                | 0%           | 0                | Donations                                | 0                | 0                | 0%           | 0                |
| 0                           | 0                | 0%           | 0                | EACC                                     | 0                | 0                | 0%           | -193,388         |
| 0                           | 0                | 0%           | 0                | Gain/Loss Sale of Property               | 0                | 0                | 0%           | 0                |
| <b>111,513</b>              | <b>112,376</b>   | <b>-1%</b>   | <b>110,599</b>   | <b>Net Non-Operating Income</b>          | <b>229,191</b>   | <b>224,752</b>   | <b>2%</b>    | <b>-60,825</b>   |
| <b>-55,996</b>              | <b>25,623</b>    | <b>-319%</b> | <b>-301,762</b>  | <b>Net Income (Loss) From Operations</b> | <b>-239,794</b>  | <b>44,524</b>    | <b>-639%</b> | <b>-43,808</b>   |

# EARH Revenue Collections 12 Month Trend

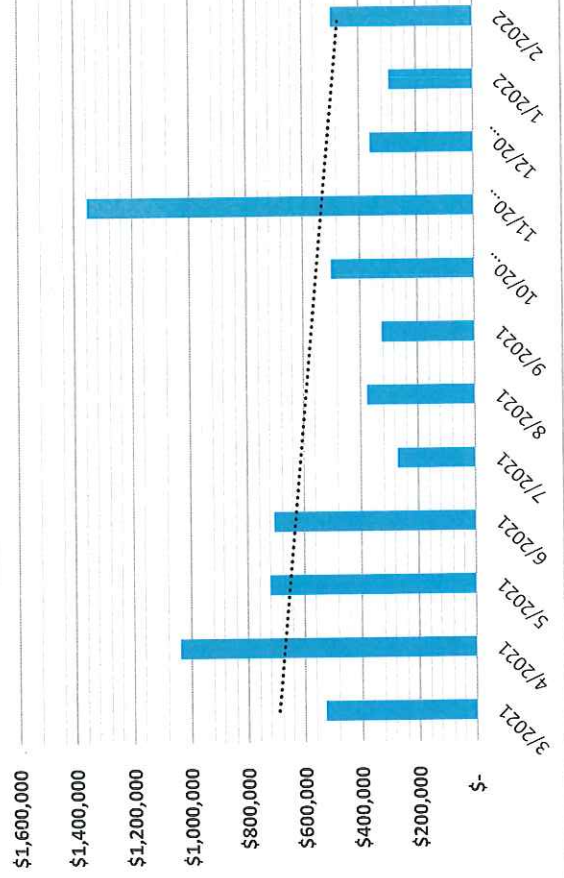
| Month/Year | Total Deposits | Clinic    | Hospital     | Grants/Other | COVID Funds                    |
|------------|----------------|-----------|--------------|--------------|--------------------------------|
| 2/2021     | \$ 313,683     | \$ 15,046 | \$ 288,047   | \$ 10,590    | \$ -                           |
| 3/2021     | \$ 665,422     | \$ 45,762 | \$ 528,844   | \$ 90,816    | \$ -                           |
| 4/2021     | \$ 2,208,698   | \$ 45,257 | \$ 1,038,986 | \$ 116,568   | \$ 1,007,887 (2nd PPP Loan)    |
| 5/2021     | \$ 770,148     | \$ 36,526 | \$ 723,984   | \$ 9,638     | \$ -                           |
| 6/2021     | \$ 987,207     | \$ 36,209 | \$ 707,871   | \$ 43,127    | \$ 200,000                     |
| 7/2021     | \$ 352,041     | \$ 66,237 | \$ 273,773   | \$ 12,030    | \$ -                           |
| 8/2021     | \$ 442,031     | \$ 32,485 | \$ 377,607   | \$ 31,939    | \$ -                           |
| 9/2021     | \$ 438,609     | \$ 37,088 | \$ 325,985   | \$ 75,536    | \$ -                           |
| 10/2021    | \$ 806,874     | \$ 27,909 | \$ 500,063   | \$ 26,219    | \$ 252,684 (CARES Act Phase 4) |
| 11/2021    | \$ 1,540,730   | \$ 31,280 | \$ 1,354,015 | \$ 25,827    | \$ 129,608 (CARES Act Phase 4) |
| 12/2021    | \$ 819,851     | \$ 30,053 | \$ 361,866   | \$ 427,932   | \$ -                           |
| 1/2022     | \$ 646,179     | \$ 63,810 | \$ 294,334   | \$ 272,147   | \$ 15,889 (CARES Act Phase 4)  |
| 2/2022     | \$ 648,252     | \$ 25,189 | \$ 497,656   | \$ 125,407   | \$ -                           |
| 3/2022     | \$ 330,098     | \$ 18,608 | \$ 197,054   | \$ 114,436   | \$ -                           |

Collected as of 3/10/2022

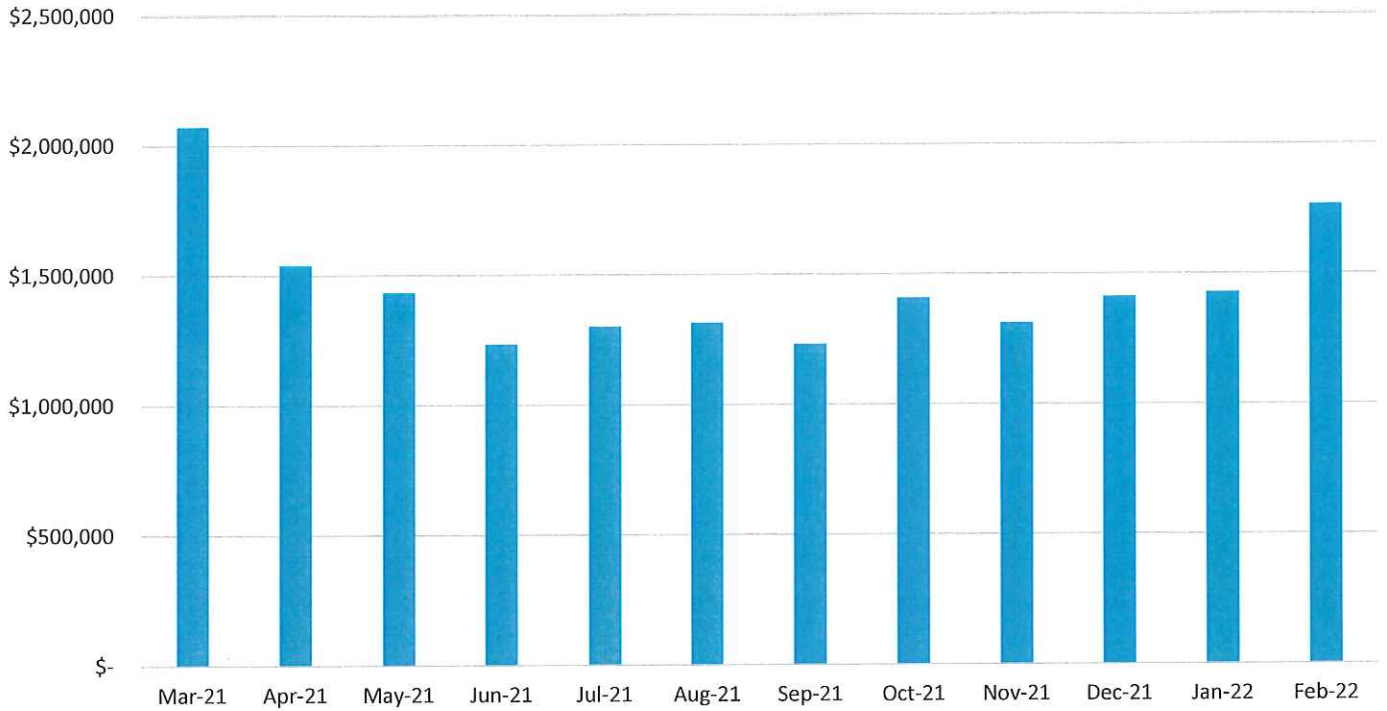
**EARH Clinic Revenue Collected**



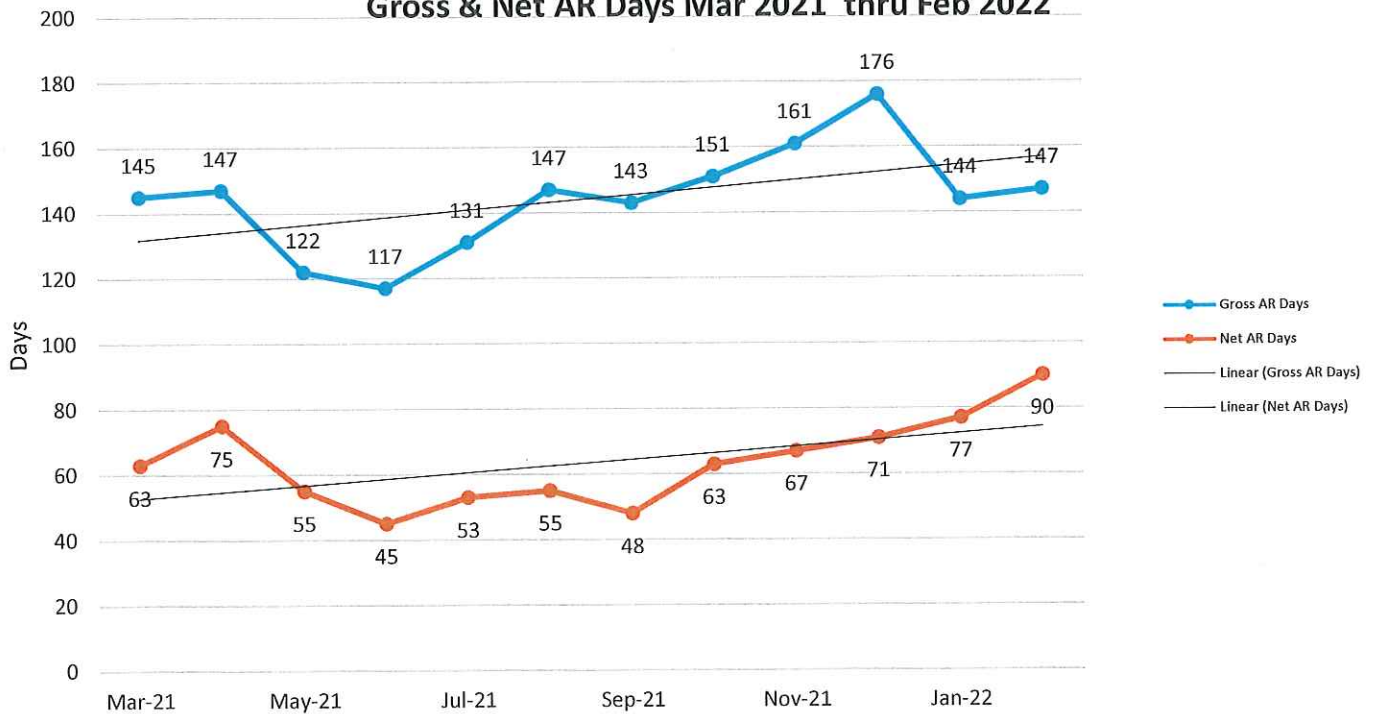
**EARH Hospital Revenue Collected**



### EARH Gross AR Balances Over 120 Days 12 Month Trend Ending February 2022



### Gross & Net AR Days Mar 2021 thru Feb 2022





# East Adams Rural Healthcare

## VOUCHER CERTIFICATION AND APPROVAL

I, THE UNDERSIGNED SUPERINTENDENT, DO HEREBY CERTIFY UNDER PENALTY OF PERJURY THAT THE MATERIALS HAVE BEEN FURNISHED, THE SERVICES RENDERED AND THE LABOR PERFORMED AS DESCRIBED HEREIN AND THAT THE CLAIMS ARE JUST AND PAID OBLIGATIONS BY ADAMS COUNTY PUBLIC HOSPITAL DISTRICT NO. 2 AND THAT I AM AUTHORIZED TO AUTHENTICATE AND CERTIFY TO SAID CLAIMS.

\_\_\_\_\_  
COREY FEDIE, SUPERINTENDENT

WARRANTS AUDITED AND CERTIFIED BY THE SUPERINTENDENT HAVE BEEN RECORDED ON THE ATTACHED LISTING.

WE, THE UNDERSIGNED BOARD OF DIRECTORS OF ADAMS COUNTY PUBLIC HOSPITAL DISTRICT NO. 2, ADAMS COUNTY, WASHINGTON, DO APPROVE THOSE WARRANTS INCLUDED IN THE ATTACHED LIST AND FURTHER DESCRIBED AS ACCOUNTS PAYABLE WARRANTS #063588 THROUGH #063792 IN THE AMOUNT OF \$475,937.86 AND AN ADDITIONAL \$343,634.04 FOR PAYROLL DIRECT DEPOSITS AND \$118,438.11 FOR PAYROLL TAX DEPOSITS.

SIGNED THIS 23RD DAY OF MARCH 2022:

\_\_\_\_\_  
ERIC WALKER, COMMISSIONER

\_\_\_\_\_  
JOHN KRAGT, CHAIRMAN

\_\_\_\_\_  
STACEY PLUMMER, VICE CHAIRMAN

\_\_\_\_\_  
JERRY CROSSLER, COMMISSIONER

\_\_\_\_\_  
DAN DUFF, SECRETARY/COMMISSIONER



# Adams County Public Hospital District #2

## Quality Improvement Report

### Annual Review/Year 2021

|                                |   |   |  |  |
|--------------------------------|---|---|--|--|
| <p><b>Safety Committee</b></p> | <p><b>Item:</b> Safety Reporting through a combination of Incident Command related to COVID Pandemic Response and Safety Committee functions. Collaboration with Todd Nida to determine delineation of committee leadership responsibilities.</p> | <p><b>Goal:</b> Consistent reporting and participation in Incident Command Meetings</p>   | <p><b>Measurements:</b> Safety reporting reflected in Incident Command Minutes</p>               | <p><b>Continuous Improvement Plan:</b> Selection of new Safety Committee Leader with meetings to resume NLT March 2021</p>   |
| <p>01/01/2021-12/31/2021</p>   | <p><b>Item:</b> L&amp;I Claim Submission</p> <p><b>Reason:</b> To ensure EARH L&amp;I claim submission is no greater than like facilities within our insurance group. To use L&amp;I claims as an employee safety measurement tool.</p>           | <p><b>Goal:</b></p> <p><b>Optimal:</b> No claims per year</p> <p><b>Acceptable:</b> Fewer claims per employee/claim ratio than facilities in our insurance group.</p> | <p><b>Measurements:</b> Will continue measure going forward with new Safety Committee Leader</p> | <p><b>Continuous Improvement Plan:</b></p> <p><b>Employee survey:</b> Need for greater training and communication identified, in particular night shift.</p> <p><b>Training:</b> With focus on exercises-Active shooter</p> <p>Patient evacuation fire</p> <p><b>Culture:</b> Posters/Safety Board<br/>Safety briefing/huddles<br/>Employee ownership/</p> |

# Adams County Public Hospital District #2

## Quality Improvement Report

### Annual Review/Year 2021

|                              |   |   |  |
|------------------------------|---|---|--|
|                              | <p>Involvement through committee rotation, safety projects, annual safety fair.</p>   |   |  |
| <p>01/01/2021-12/31/2021</p> | <p><b>Item:</b> Near Misses, Injuries, Mishaps<br/><b>Reason:</b> To us these events to identify trends that will improve employee and facility safety, to prevent more serious injuries in the future, to decrease the future L&amp;I claims related to more serious injuries.</p> | <p><b>Goal:</b><br/><b>Optimal:</b> No Injuries, Mishaps, Near Misses per year.<br/><b>Acceptable:</b> Each and every trend identified results in a decrease or total correction of that particular trend. That all injuries are minor in nature, not requiring L&amp;I claim, missed work or medical</p> | <p><b>Measurements:</b><br/>Will continue measure going forward with new Safety Committee Leader</p> |
|                              | <p><b>Continuous Improvement Plan:</b><br/>Active and engaged Safety Committee that identifies and corrects all safety issues, minor and serious in a timely manner.</p>  | <p>Increased employee awareness, involvement and personal responsibility as a part of continually improved safety culture.</p>  | <p>Improved supervisor/management</p>  |

# Adams County Public Hospital District #2 Quality Improvement Report Annual Review/Year 2021

|                              |  |  |  |   |
|------------------------------|--|--|--|---|
|                              |  | care.  |  | <p>level involvement to promote safety within their work centers.</p> <p>Active use of tools such as Job Safety Analysis, Hazard Assessments, PPE use and assessment.</p>   |
| <p>01/01/2021-12/31/2021</p> | <p><b>Item:</b> Safety Resources</p> <p><b>Reason:</b> To ensure staff and facility safety is not hindered by lack of resources. To ensure that PPE is available, in working condition and appropriate to the task. To ensure resources are provided for training, whether that be time, material or expertise</p> | <p><b>Goal:</b></p> <p>To be excellent stewards of resources provided, to decrease insurance costs through an outstanding safety and accident prevention</p> | <p><b>Measurement:</b></p> <p>Will continue measure going forward with new Safety Committee Leader</p> | <p><b>Continuous Improvement Plan:</b></p> <p>Through committee and executive leadership identify necessary investments. Leverage external expertise already available through organization participation such as Washington Hospital</p> |

# Adams County Public Hospital District #2 Quality Improvement Report Annual Review/Year 2021

|  |   |   |   |
|--|---|---|---|
|  | both inside and outside the organization. | program, to identify and prioritize hazards and invest in correcting those hazards. | Association. EARH received a 2,500 dollar award as a rural access hospital "Top Safety Performer" for 2021. Continue to seek and win such awards. |
|--|---|---|---|

# Adams County Public Hospital District #2

## Quality Improvement Report

### Annual Review/Year 2021

|  |   |  |   |   |   |
|--|---|--|---|---|---|
| <p><b>Social Services</b></p> <p>01/01/2021-12/31/2021</p> | <p>Distribution of swing bed surveys at time of discharge. Encouraging patients to complete survey prior to departure.</p>                            | <p>Acceptable result is 90% completion rate on day of d/c or day prior to d/c.</p> | <p>Average rate for completion was 80%. (ON day of d/c)</p> | <p>Surveys were distributed/offered to 80% of discharges. Those not given prior to d/c were mailed.</p> | <p>Surveys have offered specific insight into patient stays and care given. As well as what we can do better. Surveys will continue to be encouraged and reviewed monthly. -Will continue to monitor monthly.</p> |
| <p>01/01/2021-12/31/2021</p>                               | <p>Weekly care plan meetings. Representatives from dietary, nursing, social services &amp; therapy convene to review all swing bed and LTC cases.</p> | <p>Acceptable result is 90%</p>  | <p>90% goal met.</p>  | <p>Staff will continue weekly meetings. Continue to monitor.</p>  | <p>Weekly meeting have been a success &amp; enabled the entire care team to stay up to date on any changes. As well as keep the resident centered care plans up to date. Will continue to monitor monthly.</p>    |

# Adams County Public Hospital District #2

## Quality Improvement Report

### Annual Review/Year 2021

|  |  |   |  |  |   |
|--|--|---|--|--|---|
| 01/01/2021-12/31/2021                                  | Swing bed functional maintenance program adherence.                    | FMP will be offered on both shifts daily. -we did not set an acceptable/goal percentage | Day shift average was 50% documented FMP completed. Night shift averaged 54% documented  | Will continue to track and monitor monthly.<br><br>-May review at weekly care plan meetings. In order to track more closely. |   |
| <b>Dietary Department</b><br><br>01/01/2020-12/31/2020 | Test tray scores<br><br>Resident weekly weights<br><br>Equipment temps | 95%<br><br><5%above or below admit weight<br><br>100% 2 x day WNL                       | Reheated or chilled to proper temperature<br>Supplement added or discontinued as needed<br><br>Checked 2x daily, all in normal | 0 problems<br><br>One res on comfort care, weights discontinued all other within normal parameters                           | Will continue to monitor<br><br>Will continue to monitor<br><br>Will continue to monitor and record daily |

# Adams County Public Hospital District #2

## Quality Improvement Report

### Annual Review/Year 2021

|  |                             |     |                                     |  |   |
|--|-----------------------------|-----|-------------------------------------|--|---|
|  | Registered Dietician Audits | 95% | range<br>Some minor cleaning issues | 1 freezer down and replaced freezers all in good repair<br><br>Issues corrected immediately and in-services completed. Training on going for all employees | Will continue to monitor and follow up as needed.<br><br>On going monitoring and follow up as needed. |
|--|-----------------------------|-----|-------------------------------------|--|---|

|                        |  |                                   |  |  |
|------------------------|--|-----------------------------------|--|--|
| <b>Human Resources</b> | Send out a monthly policy via email. Employees will have to log into PolicyStat and read/acknowledge policy. | Acceptable<br>Results will be 90% | HR will check the policy and track percentage of staff complying | Will continue to monitor and alert managers of the staff members who are out of compliance. Send |
|------------------------|--|-----------------------------------|--|--|

# Adams County Public Hospital District #2 Quality Improvement Report Annual Review/Year 2021

|                                   |   |   |  |  |
|-----------------------------------|---|---|--|--|
| <p>01/01/2021-<br/>12/31/2021</p> | <p><b>Certifications, Licenses, and Renewals</b></p> <p>Personnel Files will be audited monthly.<br/>New hires from previous month accounted for and titers audited</p> | <p>Acceptable results will be 90%</p> <p>Acceptable results will be 100% for titer/immunization</p> | <p>All licenses, certifications, and renewals will be at 100%.<br/>5 files will be audited per month.<br/>Audit list will be sent to J. Mathis</p> | <p>out reminders last week of the month prior to the renewal.</p> <p>New Hires missing information will be received within 7 days of audit</p> |
|-----------------------------------|---|---|--|--|



Adams County Public Hospital District #2  
 Quality Improvement Report  
 Annual Review/Year 2021

|   |  |   |   |   |
|---|--|---|---|---|
| <p><b>Lab Department</b></p> <p>01/01/2021-12/31/2021</p> | <p><b>Item:</b> Staff Competency and Training by various means of evaluation, measurable benchmarks, and peer review.<br/> <b>Reason:</b> Meet CLIA standards-Meet highest standards for rural health lab excellence-Increase revenue through patient/provider confidence.</p> | <p><b>Acceptable:</b><br/>                 All staff fully trained and highly competent with complete and thorough documentation of both.</p> | <p><b>Corrective Actions:</b><br/>                 Remedial training, individual improvement plans as needed.</p> | <p><b>Continuous Improvement:</b><br/>                 Constant OJT<br/>                 Yearly Continuing Education.<br/>                 Robust and continuous Quality Assurance markers, evaluation and corrections.</p> |
|---|--|---|---|---|

# Adams County Public Hospital District #2

## Quality Improvement Report

### Annual Review/Year 2021

|  |   |   |   |   |
|--|---|---|---|---|
| <p><b>Lab Department</b></p> <p>01/01/2021-<br/>12/31/2021</p> | <p><b>Item:</b> Staff Competency</p> <p>Assess Staff Competency and Training by various means of evaluation, measurable benchmarks, and peer review.</p> <p><b>Reason:</b> Meet CLIA standards-Meet highest standards for rural health lab excellence-Increase revenue through patient/provider confidence.</p> | <p><b>Acceptable:</b></p> <p>All staff fully trained and highly competent with complete and thorough documentation of both.</p> | <p><b>Corrective Actions:</b></p> <p>Remedial training, individual improvement plans as needed.</p> | <p><b>Continuous Improvement:</b></p> <p>Constant OJT</p> <p>Yearly Continuing Education.</p> <p>Robust and continuous Quality Assurance markers, evaluation and corrections.</p> |
|--|---|---|---|---|

# Adams County Public Hospital District #2

## Quality Improvement Report

### Annual Review/Year 2021

|                              |   |   |  |   |
|------------------------------|---|---|--|---|
| <p>01/01/2021-12/31/2021</p> | <p><b>Item:</b> Order entry/reception</p> <p>Ensure orders are entered or cross interface with 100% accuracy.</p> <p><b>Reason:</b> To ensure providers and patients receive exactly what was initially ordered the first time.</p> | <p><b>Acceptable:</b></p> <p>100% accurate<br/>100% of the time</p> | <p><b>Limiting Factors:</b></p> <p>Not all tests are properly interfaced leading to temporary fixes or work arounds.</p>   | <p><b>Corrective Action &amp; Improvement Plan:</b></p> <p>On-going working group with IT and billing to ensure issues are identified and corrected.</p> <p>Clean and restructure lab selection list.</p> |
| <p>01/01/2021-12/31/2021</p> | <p><b>Item:</b> Result finalization and release.</p> <p><b>Reason:</b> To ensure every patient result is released to the provider with 100% accuracy so as to also ensure the highest level of patient care and treatment.</p>      | <p><b>Acceptable:</b></p> <p>100% accurate<br/>100% of the time</p> | <p><b>Limiting Factors:</b></p> <p>No factor should limit result accuracy and precision, however limited interface connectivity requires manual entry of many results.</p> | <p><b>Corrective Action &amp; Improvement Plan:</b></p> <p>Improved interface as resources allow, interface integrity checks, diligent staff competency training and assessment.</p>                      |

# Adams County Public Hospital District #2 Quality Improvement Report Annual Review/Year 2021

|                       |   |  |                              |  |
|-----------------------|---|--|------------------------------|--|
| 01/01/2021-12/31/2021 | <p>IT Department</p> <p>All computers to 8gbs of ram or more and on at least windows 10</p> | Acceptable is -0- computers under  | Measured by excel sheet      | Needs to be done by epic implementation for system to run              |
| 01/01/2021-12/31/2021 | Epic implementation   | Acceptable goal: Making sure all systems are ready and all devices are automated as much as possible | -0- in the last three months | Will continue to monitor, and work towards with epic care connect team |

# Adams County Public Hospital District #2 Quality Improvement Report Annual Review/Year 2021

|                                  |  |   |   |  |
|----------------------------------|--|---|---|--|
| <p>01/01/2021-12/31/2021</p>     | <p>Replacing old equipment</p>   | <p>Acceptable<br/>40% of the buildings computer</p>       | <p>Measured by how many pcs we replace and deploy effective solutions for end users</p> | <p>Working on this every day and putting plan in motions.</p>  |
| <p><b>Imaging Department</b></p> | <p>Monitoring CT angio studies for accuracy. (occurrence of sub-optimal studies in short period)</p> | <p>Acceptable error % of studies performed to be 95%.</p> | <p>204 of 208 studies performed acceptable 95.8%</p>                                    | <p>Will continue to monitor.<br/>Will continue to monitor.</p> |
| <p>02/26/2022</p>                |  |   |   |  |

# Adams County Public Hospital District #2

## Quality Improvement Report

### Annual Review/Year 2021

|            |   |  |  |                                     |
|------------|---|--|--|-------------------------------------|
| 02/26/2022 | <p>Analyzing STAT CT's for 30 minute interpretation by Inland Imaging.<br/>Reason: Have had at times significant delay in read times.</p> | <p>Acceptable result is 30 minute or less.</p> | <p>Consistently under 30 minutes through 2019.</p> | <p>Will continue to monitor.</p>    |
| 02/26/2022 | <p>Analyzing billing discrepancy.<br/>Reason: Exams performed without being billed.</p>   | <p>Acceptable result: 100%</p>                 | <p>Monthly billing errors between 5 and 7.</p>     | <p>Will continue to monitor.</p>    |
| 02/26/2022 | <p>Analyzing credentialing completion, defined privileges, complete board approval (all documents</p>                                     | <p>Acceptable: 100%</p>                        | <p>No errors in last 18 mo.</p>                    | <p>Will discontinue monitoring.</p> |

# Adams County Public Hospital District #2 Quality Improvement Report Annual Review/Year 2021

|            |  |                                |  |                                     |
|------------|--|--------------------------------|--|-------------------------------------|
|            | <p>signed).<br/>Reason: State inspection found privileges not signed by governing bodies.</p>  |                                |  |                                     |
| 02/26/2022 | <p>Analyzing billing discrepancy.<br/>Reason: Exams performed without being billed.</p>  | <p>Acceptable result: 100%</p> | <p>Monthly billing errors between 5 and 7.</p> | <p>Will continue to monitor.</p>    |
| 02/26/2022 | <p>Analyzing credentialing completion, defined privileges, complete board approval (all documents signed).<br/>Reason: State inspection found privileges not signed by governing bodies.</p> | <p>Acceptable: 100%</p>        | <p>No errors in last 18 mo.</p>                | <p>Will discontinue monitoring.</p> |

# Adams County Public Hospital District #2 Quality Improvement Report Annual Review/Year 2021

| Rehabilitation Department<br>3/15/22 | Item:<br><b>Chart Audits</b><br>- Frequency compliance Medicare req.<br>- Signing MD NPI #<br>- Timed vs untimed minutes                                    | Goal:<br>100% compliance<br><br>0 repeats   | Measureme nt:<br>95% compliance           | Continuous Improvement Plan:<br>We will continue to monitor these areas and correct all areas of concern                                      |  |
|--------------------------------------|---|---|---|---|--|
| 10/1/2019<br>2/31/20                 | <b>Outpatient Caseload</b><br>- Outpatient ambulatory walk in clinic therapy patients PT/OT/ST<br><br>- Average units billed per outpatient therapy patient | >51 average Outpatient per week average<br><br>>= 3.15 units per outpatient visit | 50.45 patients/wk<br><br>2.75 units/visit | Improve measurement and tracking strategies (a multidisciplinary effort with current EMR)<br><br>Improve followup and pt contact to referrals |  |



Adams County Public Hospital District #2  
 Quality Improvement Report  
 Annual Review/Year 2021

| 1/01/20<br>9/30/20 | Referrals             | Total #<br>referrals | Total #<br>Scheduled | # contacted 3X<br>With no appointment<br>Scheduled | # with<br>continued<br>or<br>completed<br>care<br>164 |
|--------------------|-----------------------|----------------------|----------------------|--|---|
|                    | All Referrals be seen |                      |                      |  |   |
|                    | Outpatient            | 178                  | 164                  | 14   | 164   |
|                    | Swing Bed             | 28                   | 28                   | 0  | 28  |
|                    | Avg Monthly OP ref.   | 36.78                |                      |  |   |

# Adams County Public Hospital District #2

## Quality Improvement Report

### Annual Review/Year 2021

|  |   |  |  |   |
|--|---|--|--|---|
| <p><b>Maintenance Department</b></p> <p>01-01-2020</p> | <p>Monitoring bio-waste weights for fluctuations.</p> | <p>No national standard set.</p>   | <p>Weights stayed fairly level during monitoring period.</p> | <p>Will discontinue monitoring for 2020.</p>  |
| <p>03-07-2022</p>                                      | <p>Monitor BAS system for alarms/failures.</p>        | <p>Improve alarm counts and building problems by being “pro-active not “re-active”</p> | <p>Monitor alarm report daily. Gain monthly averages</p>     | <p>Will report annually. There is a solid need to continually improve building system operation to drive utilities savings and reduce labor/contractor costs.</p> |

# Adams County Public Hospital District #2

## Quality Improvement Report

### Annual Review/Year 2021

|            |   |   |  |  |
|------------|---|---|--|--|
| 01-01-2020 | Monitoring dirty linen weights for miss use of linen service. | Standard :<br>15.9 A.P.D.   | We are well below the national standard.                     | Will discontinue monitoring for 2020                                       |
| 03-07-2022 | Building operations preventative maintenance program          | Complete all points of building PM's to a level of 98% monthly completion | Record daily – weekly – monthly in new Plant Operations Logs | Will report annual, needed to improve building performance and reliability |
| 07-01-2020 | Housekeeping  | EARH standard: All daily check off list filled out 100%                   | All daily list were completed and signed off.100%            | Will discontinue monitoring for 2020                                       |

# Adams County Public Hospital District #2

## Quality Improvement Report

### Annual Review/Year 2021

|   |  |   |   |  |
|---|--|---|---|--|
| <p>09-01-2020</p>   | <p>Housekeeping-Covid response</p>   | <p>Added extra cleaning and check off list for high traffic and high touch areas.</p> | <p>100% on lobby check off list. Extra wipe down rounds completed.</p>  | <p>Will continue monitoring into 2021.</p>   |
| <p>03-07-2022</p>   | <p>Continue Covid Response plan</p>  | <p>To seek time savings procedures</p>  | <p>Monitor plans of action by team</p>  | <p>Will continue into 2022</p>   |
| <p>03-07-2022</p>   | <p>Housekeeping efficiencies and procedures</p>  |   |   |  |
| <p><b>Infection Control</b><br/>01/01/2021-12/31/2022</p> | <p>Track and report Healthcare Acquired Infections (HAI) in inpatient and certified swing bed settings</p> | <p>Goal is to have no HAI on a monthly basis</p>                                      | <p>Data is gathered from inpatient and Certified Swing bed charts/ investigated and HAI are either determined/ not determined based on CDC criteria</p> | <p>Action plans instituted for and HAI that are identified on a monthly basis. HAI are reported through QA and to the CDC and WA Department of Health as indicated</p> |

# Adams County Public Hospital District #2

## Quality Improvement Report

### Annual Review/Year 2021

|                              |   |  |   |   |
|------------------------------|---|--|---|---|
| <p>01/01/2021-12/31/2021</p> | <p>Employee Health Incident Tracking<br/>COVID specific tracking and outbreak management PRN</p>  | <p>Goal is no employee health outbreaks on a monthly basis</p> | <p>Track Employee health incidents in all departments such as needle sticks, infection outbreaks, or reportable conditions and report to appropriate agencies as indicated.</p>         | <p>Action Plans as needed, although there have been no incidents in close to a year this area will continue to be monitored and reported through QA and action plans instituted on an as needed basis.<br/><br/>Reporting to the DOH as indicated</p>   |
| <p>01/01/2021-12/31/2021</p> | <p>Medication Therapy Monitoring<br/>Reporting of Antibiotic Use Days<br/>Participation in UW TASP Meetings and Quarterly IC/P&amp;T/Stewardship meetings</p> | <p>100% of patients will be on appropriate therapy</p>         | <p>100% of patients will be on appropriate therapy within 24 hours of return of cultures that indicate a change in antibiotics is appropriate<br/><br/>Monitor antibiotic usage for</p> | <p>Continue to review antibiotic usage and recommend changes in antibiotics as appropriate for culture sensitivity. Additional action plans as needed.<br/><br/>Antibiotic usage for facility remains low.<br/><br/>Report back to QA/Medstaff and Board any pertinent information from participation</p> |

Adams County Public Hospital District #2  
 Quality Improvement Report  
 Annual Review/Year 2021

|   |   |   |  |  |
|---|---|---|--|--|
|   |   |   | tracking/trending/<br>overuse  | in these meetings.   |
| 0/01/2021 -<br>12/31/2021                               | COVID-19 Pandemic Mitigation<br><br>Tracking of all COVID inpatients<br><br>Tracking of all COVID related transfers | Continuous monitoring of COVID-19 Pandemic and daily updates from DOH and CDC | All COVID-19 policies and procedures are updated on an as-needed basis based on current recommendations from the DOH and CDC | Continue to updated as needed all policies and procedures, continue to participate in all COVID-19 related calls/webinars/ and presentations with DOH/ CDC/WSHA and other entities as needed |
| <b>Employee Health</b><br><br>0/01/2020 -<br>12/31/2021 | Employee Health Tracking  | Tracking and monitoring employee sickness                                     | Transition to electronic tracking from paper tracking. Maintained by Infection Control Nurse                                 | Continue to track and monitor symptoms of sick employees, report outbreaks as required, advise employees on requirements for COVID testing and required time out of facility as necessary.   |

# Adams County Public Hospital District #2

## Quality Improvement Report

### Annual Review/Year 2021

|  |  |  |  |  |
|--|--|--|--|--|
| <p>03/01/2020-12/31/2021</p>                                 | <p>Employee COVID symptom tracking</p>                   | <p>All employees with s/s of COVID will report symptoms to Infection Control</p> | <p>Infection Control will track all employees who have potential s/s of COVID-19 and refer for testing and quarantine as necessary</p> | <p>Continue to track and monitor symptomatic employees. Advise employees on necessary testing and quarantine</p>   |
| <p><b>Nursing</b><br/>01/01/2020-12/31/2021</p>              | <p>CVA/ STEMI/ Restraint/ Blood Transfusion Tracking</p> | <p>All areas will be tracked and reported through QA on a monthly basis</p>      | <p>Monthly reporting to QA on stats in each area tracking measures that are required</p>   | <p>Continue to track and report on a monthly basis, implement education and action plans as necessary for measures that do not meet current facility goals</p>                                 |
| <p><b>Med Staff Department</b><br/>01/01/2020-12/31/2021</p> | <p>Patient Deaths</p>                                    | <p>100% of patient deaths will be reviewed</p>                                   | <p>100% of patient deaths will be reviewed on a quarterly basis by our independent provider Dr. Kerr in Med Staff.</p>                 | <p>All deaths will be reviewed in Med Staff on a continual basis for appropriate treatment and continued improvement. Action plans implemented as indicated on recommendation by Dr. Kerr.</p> |

Adams County Public Hospital District #2  
Quality Improvement Report  
Annual Review/Year 2021



# Adams County Public Hospital District #2 Quality Improvement Report Annual Review/Year 2021

|                       |                   |  |  |  |
|-----------------------|-------------------|--|--|--|
| 01/01/2020-12/31/2021 | Organ Procurement | 95% of organ procurement paperwork will be completed | Audit of patient deaths in the ED/ Hospital/ and Inpatient settings for state required organ procurement paperwork to ensure completeness and accuracy on a monthly basis. | Action plans implemented as needed to ensure that all deaths have appropriate paperwork and reported through QA on an ongoing monthly basis. |
|-----------------------|-------------------|--|--|--|

# Adams County Public Hospital District #2

## Quality Improvement Report

### Annual Review/Year 2021

|  |   |  |  |  |
|--|---|--|--|--|
| <p><b>QA Department</b></p> <p>01/01/2020-12/31/2021</p> | <p>QMM and Patient Concern Reporting</p>            | <p>100% of QMM and Patient Concerns are reported to QA</p>                         | <p>All QMM and Patient Concern forms are investigated by the appropriate department and reported to QA for accountability, RCA as needed, and tracking/trending.</p> | <p>QMMs and Patient Concern forms will continue to be reported on a monthly basis and action plans implemented as needed.</p>  |
| <p>01/01/2021</p>  | <p>Participation by all QA managers/departments</p> | <p>100% of departments on the QA committee will participate on a monthly basis</p> | <p>All departments on the QA committee are expected to actively participate in monthly meetings/PowerPoint</p>   | <p>Continue to monitor and reassess on a monthly basis. Action plans implemented as needed to continue to have active participation and excellent data to continue to elevate the QA program at EARH</p> |

# Adams County Public Hospital District #2 Quality Improvement Report Annual Review/Year 2021

|                       |                   |                            |  |   |
|-----------------------|-------------------|----------------------------|--|---|
|                       |                   |                            | presentations/ and annual/ monthly review of department measures and quality improvement projects. |   |
| <b>EMS Department</b> | Narrative writing | Goal Is 100%               |  |   |
| 2021                  |                   | 96% improved over 2020 50% |  |   |
|                       | GCS/Vitals        | Goal is 100%               |  |   |
|                       | Turn In reports   | 98.7%                      |  |   |
|                       |                   | 4 day turn around          |  | We continue to meet goals and expectations with continued report verification and training. |

|                        |             |             |                     |                   |
|------------------------|-------------|-------------|---------------------|-------------------|
| <b>Business Office</b> | <b>Item</b> | <b>Goal</b> | <b>Measurements</b> | <b>Continuous</b> |
|------------------------|-------------|-------------|---------------------|-------------------|

# Adams County Public Hospital District #2

## Quality Improvement Report

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|                                  |               |  |   |
|----------------------------------|---------------|--|---|
| <p>Improvement in AR Days</p>    | <p>&lt;60</p> | <p>Continually monitor the ATB and work with coding/billers to ensure accounts are resolved in a timely manner</p> | <p>Continue to work on upstream processes to improve our clean claim rates so claim pay faster. Cross train billers to know and understand biller for all payers so we have more coverage when staff are out. Monitor daily/weekly/monthly processes and identify gaps promptly to avoid delays in processes.</p> |
| <p>Improved Clean Claim Rate</p> | <p>95%</p>    | <p>Ensure claims are reviewed prior to submission to resolve any issues that may lead to rejection/denial.</p>     | <p>Work with billers to review edits and identify root cause to issues promptly. For issues where we cannot identify a system fix, work with clearinghouse to build custom edits to catch issues that lead to denials.</p>  |

# Adams County Public Hospital District #2

## Quality Improvement Report

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|                        |                                       |                     |   |  |
|------------------------|---------------------------------------|---------------------|---|--|
|                        | Improved First Pass Rate              | 60%                 | Improve upstream processes to ensure claims are clean at the time they are ready to bill and reduce edit errors. This reduces the amount of time a biller needs to work a claim and eliminates the need for follow up since it pays promptly. | Continue to identify root cause issues and work with upstream processes to improve the integrity of data collected through the life of an account. |
| <b>Medical Records</b> | <b>Item</b><br>IP IMM Forms Completed | <b>Goal</b><br>>95% | <b>Measurements</b><br>Review each inpatient account for a Medicare/Medicare Advantage patient to ensure forms are delivered  | <b>Continuous</b><br>Audit each inpatient chart to ensure forms are completed as required.<br>Provide feedback to staff if forms are missing.      |

# Adams County Public Hospital District #2

## Quality Improvement Report

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|                                |      |   |   |
|--------------------------------|------|---|---|
| Follow up IMM Form             | >95% | Review each inpatient account for a Medicare/Medicare Advantage patient to ensure forms are delivered       | Audit each inpatient chart to ensure forms are completed as required. Provide feedback to staff if forms are missing.   |
| OBS MOON Form                  | >95% | Review all observation admissions to ensure patient is provided the MOON observation form                   | Review each Observation admission to ensure MOON notice has been completed. Provide feedback to staff if forms are missing.   |
| % of Charts on Deficiency List | >5%  | Continually monitor accounts that have missing/incomplete documentation and work with department to resolve | Work audit queue from coders to validate deficiency. Notify provider/department of needed/missing information promptly. Provide deficiency list on regular basis to admin staff for assistance with resolution. |

# Adams County Public Hospital District #2

## Quality Improvement Report

### Annual Review/Year 2021

|                            |   |                                   |   |  |
|----------------------------|---|-----------------------------------|---|--|
|                            | <p>% of Incomplete charts past due</p>                  | <p>&gt;5%</p>                     | <p>Report out accounts missing documentation regularly to avoid past due documentation</p>  | <p>Regularly report out past due charts to admin staff. Improve auditing process to audit items throughout the life of the account rather than after the fact.</p>   |
|                            | <p>Days in total Discharged not Final Billed (DNFB)</p> | <p>&gt;5</p>                      | <p>Divide total dollar amount of unbilled accounts by average daily revenue</p>   | <p>Review unbilled accounts regularly to identify issues creating lag in initial billing. Identify gaps in process/system to improve ability to bill accounts promptly.</p>  |
| <p><b>Registration</b></p> | <p><b>Item</b></p> <p>Registration Accuracy</p>         | <p><b>Goal</b></p> <p>&gt;95%</p> | <p><b>Measurements</b></p> <p>Audit accounts registered to ensure demographic information, insurance information, and type of account was correct</p> | <p><b>Continuous</b></p> <p>Perform daily audits on previous days census to correct any issues identified. Manager will then perform secondary audit to identify any items that may have been missed. Provide feedback/training to staff to improve.</p> |

# Adams County Public Hospital District #2 Quality Improvement Report Annual Review/Year 2021

|                    |      |  |   |
|--------------------|------|--|---|
| Completed Consents | >95% | Review consents to ensure they are signed appropriately                              | Audit outpatient admissions to ensure general consent is completed correctly. Provide feedback to staff with any issues identified and provided continual training.   |
| Authorizations     | >95% | Review accounts for services that require an authorization to ensure it was obtained | Audit each account that may require an authorization for services. Ensure proper authorization was obtained and input to account accordingly. Provide feedback and education to staff if a needed authorization was missed. |

- SPH/Falls – 2021 Yearly Review QI
- Completed:
- Monthly tracking consistent
- Trending very nicely to 100% in consistency with SPH paperwork and computer documentation
- Fall forms consistent in NAC binder



# Adams County Public Hospital District #2

## Quality Improvement Report

### Annual Review/Year 2021

- Annual SPH review completed/filed and reported at Safety Meeting (needs identified)
- Needs:
- Annual training in both SPH/Falls (skills fair)
- Improved staff communication on white boards regarding fall risk/status (not currently audited)
- Nurse lead SPH team for review/walk through, program maintenance and annual documentation (therapy to remain as consult and patient mobility training as needed)
- SPH policy sign off by admin