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# Reaching Beyond Today's Needs

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2021 Community Benefits Report

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**MISSION**

We improve the health of our community every day.

**VISION**

Bay Area Hospital will be the model for regional healthcare excellence.

**VALUES**

Kindness, Excellence, Teamwork, Ownership, Innovation

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# Innovating for the Future



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Welcome to Bay Area Hospital's annual Community Benefits Report.

We are pleased to share a selection of stories highlighting what's been happening at Bay Area Hospital over the past year, as well as the exciting steps our outstanding physicians and service-oriented staff are taking to continue offering the most advanced technologies and services available.

Throughout 2021 technology was at the forefront of Bay Area Hospital's push to innovate. We streamlined our medical software, implemented a new tele-intensivist program in the Intensive Care Unit (ICU), and are making strides in providing alternative, remote options for care.

One of the ways we pursued this in 2021 was through a pop-up vaccine clinic. When we received doses of the COVID-19 vaccine and learned that hospitals were the first and only recipients of vaccine, our dedicated crew worked overtime to ensure that vaccinations could begin almost immediately. We made vaccinations available to community members as soon as Oregon updated the eligibility criteria.

We've also welcomed several talented new physicians and healthcare professionals to our team, including two new cardiologists, and are looking forward to expanding our Prefontaine Cardiovascular Center and other services in the coming year.

As times continue to change, so will Bay Area Hospital. We remain committed to meeting the growing needs of our community and providing innovative solutions and high-quality care right here in Coos Bay.

For your good health,

A handwritten signature in blue ink that reads "Brian Moore". The signature is fluid and cursive, with the first name "Brian" being larger and more prominent than the last name "Moore".

Brian Moore  
*President and CEO*



# At the Heart of Things

## New Developments in the Prefontaine Cardiovascular Center

E

Exciting things are happening at the heart of Bay Area Hospital. With the addition of two new heart specialists to the Prefontaine Cardiovascular Center in the past year, our ability to diagnose and treat patients with a wide range of cardiovascular issues has continued to expand.

Stephen Mattichak, MD, an interventional cardiologist who started with Bay Area Hospital in September 2021, practices interventional cardiology, vascular medicine, and vascular intervention. Antony Chu, MD, a clinical cardiac electrophysiologist, has been with Bay Area Hospital for just over a year.

According to Harley Anderson, the clinical nurse manager for the cardiac catheterization laboratory (cath lab), having these two specialists on staff has significantly expanded the center's ability to treat patients.

“Dr. Mattichak not only brings the ability to treat a wide range of cardiovascular diseases but also specializes in vascular medicine and peripheral vascular disease,” says Anderson.



**“It was amazing to see not only what Bay Area Hospital already had but also how supportive it was of the next steps... the needs of the community and build toward meeting those needs is tremendous.” —Harley Anderson**

“Dr. Chu currently enables us to place pacemakers and automatic implantable cardioverter-defibrillators and to treat problems in the electrical system of the heart.”

Anderson left a position with a large hospital in Las Vegas, Nevada, to come to Bay Area Hospital specifically because of our vision for the cardiovascular program.

“Most regions with this population size do not have these capabilities,” says Anderson. “It was amazing to see not only what Bay Area Hospital already had but also how supportive it was of the next steps.”

With its current capabilities, the team in the cath lab is equipped to perform a wide variety of cardiac procedures, including diagnostic catheterizations (coronary angiography), coronary stenting, pacemaker placements, and intravascular ultrasounds.

The hospital’s cardiovascular team hopes to expand its service lines to perform even more lifesaving procedures, including ablations, which are often performed to correct atrial fibrillation, or arrhythmia (irregular heartbeat). According to Anderson, approximately 10% of adults ages 65 and older suffer from arrhythmia.

“The foresight to see the needs of the community and build toward meeting those needs is tremendous,” he says.

Anderson is acutely aware of the difference an ablation can make on a person’s quality of life, having undergone the procedure himself two years ago.

“I couldn’t walk up the stairs and have a conversation,” he says. “I had the ablation, and the next day I was walking up the stairs and not getting out of breath.”

With the addition of a second cath lab, the cardiovascular team will have an even greater capacity to perform these kinds of procedures, reducing the wait time for patients who currently have to drive to Eugene or beyond for care.

Funding for this second lab is already under way. The cardiovascular team looks forward to what this exciting new space will mean for attracting more talented physicians like Dr. Mattichak and Dr. Chu to Bay Area Hospital.

*Opposite: Heart Specialists Stephen Mattichak, MD, FACC, FSCAI, and Antony Chu, MD, FACC, FHRS, FAHA*

*Top: Clinical Nurse Manager Harley Anderson*

# Tele-Intensivist Program Enhances Care for ICU Patients

T

Those who have recently visited Bay Area Hospital may have noticed a few changes in the Intensive Care Unit (ICU)—specifically, the addition of a new virtual face. The face in question is of “the robot”—a freestanding, mobile virtual intensive care device that connects the staff in the ICU with a tele-intensivist at Oregon Health & Science University (OHSU) via a secure teleconferencing feature. Intensivists are board-certified physicians who provide intricate care for critically ill patients, having completed a two-year fellowship that qualifies them to offer this high level of care.

The robot is part of the new tele-intensivist program at Bay Area Hospital, which was officially rolled out in 2020 to meet the increased demand for intensive care services with the outbreak of COVID-19. According to Wendy Haack, DO, Bay Area Hospital’s director of intensive care, though the ICU is full of smart and capable healthcare professionals, certain conditions arise that would benefit from the expertise of a critical care intensivist—particularly in COVID-19 cases.

“COVID-19 patients are all over the board,” says Dr. Haack. “Some need fluids, and some need fluids taken out; and if they’re put on a ventilator, that can be very dicey. Sometimes you need to change ventilator settings every 15 minutes, and it is extremely complex. Intensivists have the highest level of expertise with critical patients.”

Across the nation intensivists are highly sought after but are rarely found in smaller communities. The tele-intensivist program helps solve this problem. It also allows for critically ill Bay Area Hospital patients to receive a higher level of care closer to home, rather than having to be transported elsewhere.

“It doesn’t mean that we don’t still need to fly some people out,” adds Dr. Haack. “It helps us make better decisions about when to send someone out and when to keep them here, and it helps us send them out sooner if that’s what needs to happen.”



**“We have great physicians here in Coos Bay, but the tele-intensivist helps us look at things differently.”**

**—Wendy Haack**



*Dr. Haack consults with Marshall Lee, MD, TeleICU director at OHSU*

The mobile ICU device enables intensivists and ICU nurses from OHSU to virtually diagnose, assess, and provide recommendations for Bay Area Hospital patients, providing the specialists with a live video feed as well as the patient’s current vitals and electronic medical record.

While the ICU team at Bay Area Hospital provides the hands-on patient care, this direct access to OHSU—and the ability to establish an ongoing relationship with an intensivist—allows for greater collaboration, problem-solving, and state-of-the-art care.

“You always need what we call ‘boots on the ground,’” says Dr. Haack. “We have great physicians here in Coos Bay, but the tele-intensivist helps us look at things differently. And when a patient is really sick and needs a higher level of care, we’ve got someone we can call who can join the conversation and say, ‘Ah, I’ve seen this before; this is what we need to do.’”

Dr. Haack and the ICU team look forward to even greater collaboration with OHSU with the introduction of a virtual ICU, which enables the ICU team to converse not only with OHSU tele-intensivists and ICU nurses but also with critical care pharmacists and respiratory therapists.

Establishing this virtual ICU will include the installation of monitors in each ICU room, eliminating the need to wheel our single robot from room to room.

With a permanent presence in each ICU room, intensivists at OHSU will be able to provide constant monitoring for Bay Area Hospital’s critically ill patients. This enables our ICU staff to move from room to room, attending to other patients while knowing that the patient they’ve just left is being watched for any changes.

As this new partnership with OHSU continues to expand in new and exciting ways, Bay Area Hospital’s ICU team remains committed to providing high-quality care for patients right here in Coos Bay, where they can stay closer to their homes and families.

“Family is important,” says Dr. Haack. “Family is good for our patients’ health. And if they don’t have their family, they don’t have the same healing environment. Our new tele-intensivist program enables our patients to stay in the community close to their loved ones while still receiving state-of-the-art, university medical center–level care.”



# Spotlight: Patrick Varga

**Chief Information and Innovation Officer**

P

Patrick Varga has worn many hats in his life. A pharmacist by training with an MBA in healthcare administration, Varga has worked in healthcare since 1992. He has served in a wide variety of roles in his career, from pharmacist to healthcare administrator to CEO.

Varga's most recent role is chief information and innovation officer at Bay Area Hospital, where he helps ensure the hospital's cybersecurity, information security, and privacy.

During his tenure, Varga helped consolidate Bay Area Hospital's multiple computer systems into two main systems: Workday and Epic. Workday is a cloud-based computer system used to streamline the hospital's Finance, Human Resources, and Supply departments, and it serves as the backbone for the official rollout of Epic, the nation's leading electronic health record (EHR) system.

**"I always want to see improvement.  
I want to make things better.  
I like new projects and the idea  
of changing things up."**

Epic gives patients easy access to their health records and test results and provides direct communication with caregivers via the MyChart app. It also enables patients to have continuity of care with any other healthcare organization that uses Epic.

"Within our greater healthcare community, we had seven systems," says Varga. "Now we're working with just two EHRs, so we're more easily able to collaborate with Bay Clinic and North Bend Medical Center and better serve the community."



**“It’s exciting for our patients to have different ways to interact with us—and for us to find more ways to make that happen. Patients are looking for more flexibility in their care, and we want to provide that.” —Patrick Varga**

Varga’s background as a pharmacist and an administrator gives him a unique drive to innovate.

“As a pharmacist and clinician, I always want to see improvement,” he says. “I want to make things better. I like new projects and the idea of changing things up.”

This drive to pursue new opportunities has led Varga and the leadership team at Bay Area Hospital to advocate for more flexible, technologically driven care, including tele-health and the hospital-at-home program.

Bay Area Hospital began rolling out the tele-health program at the height of the COVID-19 pandemic, as it provided patients with the opportunity to talk with their providers from the comfort of their homes.

One of the programs Varga is most excited about is hospital-at-home, which enables a patient to check into Bay Area Hospital from their own bed and receive virtual visits twice a day from a physician, nurse practitioner, or physician assistant. The program will enable Bay Area Hospital to treat more patients

without needing additional patient rooms—limiting patients’ exposure to one another and allowing them to heal in the familiar comfort of home.

“Hospital-at-home is a pretty exciting concept,” says Varga. “Anywhere from 15 to 30 patients per day could receive care from home rather than strictly in this building.”

Looking to the future, Varga hopes to continue drawing more and more talented healthcare professionals to Coos Bay, whether through in-person or remote opportunities, and to prioritize high-quality solutions for care.

“It’s exciting for our patients to have different ways to interact with us—and for us to find more ways to make that happen,” says Varga. “Patients are looking for more flexibility in their care, and we want to provide that.”



*Top: Hospitalist Rajesh Ravuri, MD checks in on a patient.*

# The Pursuit of High-Quality Care

R

Rarely has talk of the importance of high-quality health-care been as prevalent as it has been in the past two years.

Whether it's due to the COVID-19 outbreak or the rising levels of poor mental and physical health across the country, people are keenly aware of the need for care that they can count on in their communities. Unfortunately for those who live in more rural areas, high-quality medical care is often much harder to access.

According to HealthAffairs.org, more than 59 million Americans live in rural areas, where they are often forced to drive long distances for care, leading to higher percentages of citizens in poor health and higher mortality rates due to chronic conditions. For residents of Coos County and beyond, however, Bay Area Hospital provides high-quality care right in their own community.

“I think there's this general idea in the community that we're just a small-town hospital—and we're not,” says Chief Quality Officer Kelli Dion. “We have state-of-the-art equipment; highly trained doctors, nurses, and other healthcare professionals; and access to specialists at Oregon Health & Science University. We're not your typical small-town hospital.”



Chief Quality Officer Kelli Dion

**“I think there’s this general idea in the community that we’re just a small-town hospital—and we’re not. We have state-of-the-art equipment; highly trained doctors, nurses, and other healthcare professionals; and access to specialists at Oregon Health & Science University. We’re not your typical small-town hospital.” —Kelli Dion**

As chief quality officer at Bay Area Hospital, Dion measures, monitors, and analyzes the care being provided, ensuring that the highest quality of care is being delivered to our patients.

“Our main function in the hospital is to ensure that patient care goes right and to recognize early if it’s not going right so that we can intervene to have a positive impact,” says Dion.

If something does go wrong, Dion and the leadership team are quick to investigate and determine what they can do to prevent it from happening again.

“At the heart of each data point we look at is a real person who had a real experience at our hospital, and we can’t lose track of that,” says Dion. “When there is an outcome that needs to be investigated, we use tools like root cause analysis to figure out what went wrong and to fix the processes before the same event happens again. My favorite part of what we do is the proactive risk assessment.”

Part of this proactive risk assessment included Bay Area Hospital’s anticipation of and response to the COVID-19 outbreak. Along with fast-tracking the tele-intensivist program to help treat COVID-19 patients in the Intensive Care Unit, we set up a vaccine clinic for the community when pharmacies and local clinics didn’t have the resources to provide mass vaccinations.

“We never lost our focus on patient safety,” says Dion. “That has always been our highest priority. And if we can’t do it safely, then we don’t do it. With COVID-19, when we set up our incident command, our objectives were to keep our patients and staff safe, to communicate effectively, and to stay open for care.”

Looking to the future, Bay Area Hospital remains committed to improving processes, adding service lines, retaining staff, and providing patients with high-quality, leading-edge care.

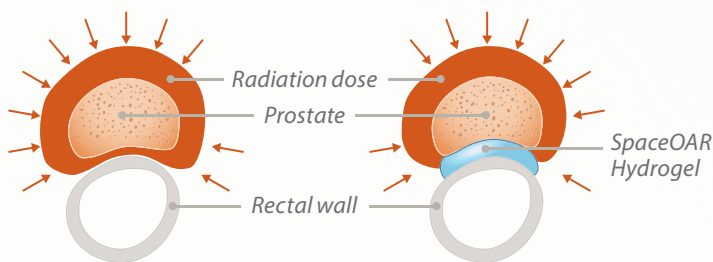
# Gel Technology Provides Revolutionary Treatment for Prostate Cancer

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Most would agree that the push for innovation in medicine is strongest in the field of cancer research and treatment. At Bay Area Cancer Center, Carl Jenson, MD, is a radiation oncologist responding to this push with the adoption of an exciting new treatment for prostate cancer.

According to the Centers for Disease Control and Prevention, prostate cancer is one of the most common cancers in the United States, with more than 183,000 new cases diagnosed each year.

SpaceOAR Hydrogel is a state-of-the-art technology designed to reduce the side effects of radiation treatment. According to Dr. Jenson, Bay Area Hospital is one of only a few centers in Oregon using this exciting new treatment for prostate cancer.



For those who choose to have the cancer treated with radiation, there are risks to the surrounding organs, specifically the rectum. SpaceOAR Hydrogel mitigates some of these risks.

Working as a kind of shield, the gel is inserted between the prostate tumor and the rectum, protecting the rectum from the harsh side effects of radiation while helping focus the



Carl Jenson, MD

radiation on the tumor. Afterward the gel is naturally absorbed into the body and passed through urination.

“The idea of creating a safeguard isn’t new, but for treating prostate cancer this is very new,” says Dr. Jenson.

“We can do almost everything here,” he adds. “We have outstanding equipment and the staff to make it happen. It’s a team effort—an entire group of very talented people who make these kinds of treatments possible, which is incredibly exciting.”

Illustration courtesy of Boston Scientific

# For the Well-Being of Our Community

At Bay Area Hospital, our mission is to improve the health of our community every day. We pursue this mission through health services for vulnerable or underserved people; financial and in-kind support for public health programs; health education, screening, and prevention services; medical education; and more. The table below shows how Bay Area Hospital provides these benefits through financial assistance, charity care, and subsidies for services otherwise not available in our community.

Program	Key Facts	Staff <sup>1</sup>	Direct Annual Expense	Bay Area Hospital Subsidy
<b>Charity Care</b>	Bills were wholly or partially written off for 4,745 patients in FY 2021 <sup>2</sup>	25	\$3,459,197	\$1,271,987
<b>Community Education and Support Groups</b>	Diabetic education is provided to patients throughout the year	2	\$159,414	\$159,414
<b>Health Professionals Education (surgical residents/externs)</b>	Provides undergraduate training and assistance in preparing future healthcare professionals; supports two full-time surgical residents and medical externs	6	\$505,744	\$505,744
<b>Home Health Agency</b>	7,295 billable visits	22	\$5,016,950	\$2,374,717
<b>Kids' HOPE Center</b>	252 child victims served during FY 2021; 86 medical exams; 167 children referred to counseling/therapeutic services; 136 provided with emergency services such as food/clothing; 1,500 books given	7	\$50,770	\$50,770
<b>Management of Maternity Services (MOMS)</b>	Nearly 90% of all patients giving birth at Bay Area Hospital rely on MOMS	3	\$344,799	\$344,799
<b>Palliative Care</b>	Answers more than 200 annual physician requests to aid patients	2	\$121,718	\$121,718
<b>Psychiatric Services</b>	2,925 inpatient days in FY 2021	22	\$6,669,337	\$4,361,106
<b>Family Housing Unit</b>	Free housing provided for patients who live more than 50 miles from Bay Area Hospital	1	\$13,000	\$52,700
<b>Miscellaneous Community Services</b>	Additional services provided to the community include: SANE (Sexual Assault Nurse Examiners) exams, transportation, food and prescription vouchers, annual drug take-back program, and miscellaneous other monetary and in-kind donations	20	\$96,047	\$96,047
<b>Totals</b>		<b>110</b>	<b>\$16,436,976</b>	<b>\$9,339,002</b>

<sup>1</sup> Bay Area Hospital employees and volunteers who devote all or part of their time to the program.

<sup>2</sup> "FY 2021" denotes the 2021 fiscal year, July 2020 through June 2021; "2021" is calendar year 2021.

# Financial Summaries

Transparency and accountability are paramount to the operation of Bay Area Hospital. Thanks to sound leadership from our executive team and publicly elected Board of Directors, we're happy to report that given the challenges of the past two years we have served the community without having to levy any taxes. We choose to publish these numbers each year so that you know exactly how Bay Area Hospital served the community the previous year.

## Summary Balance Sheet

As of June 30, 2021

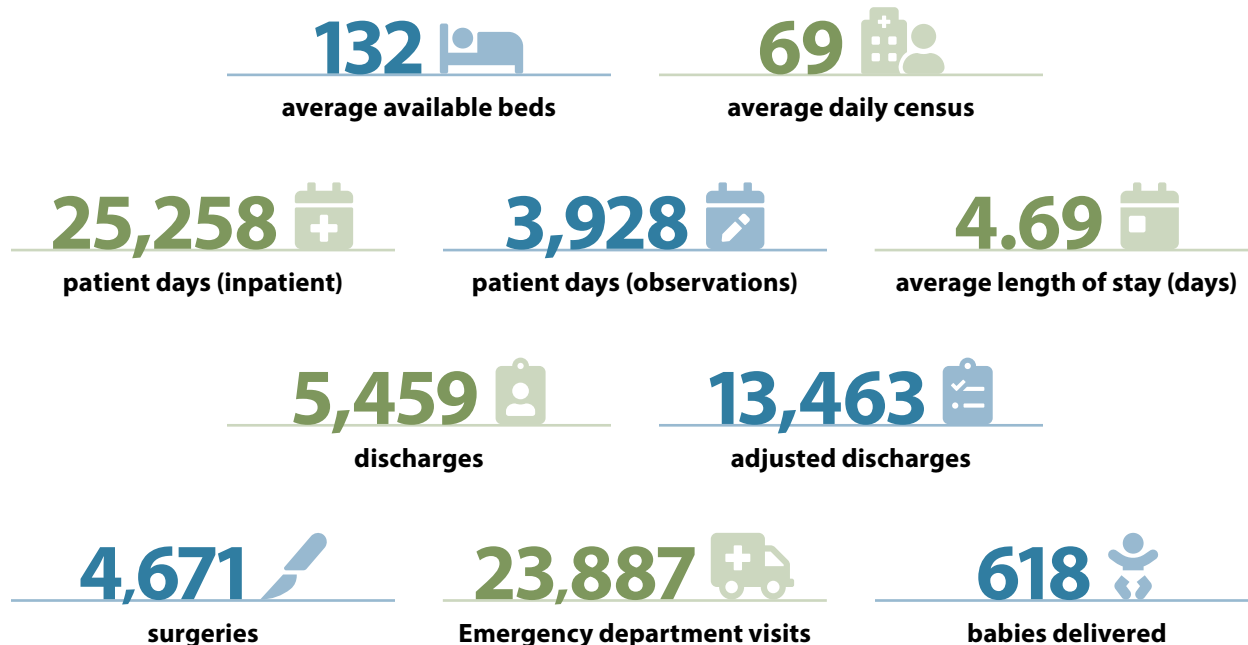
Assets	
Current assets	\$94,477,772
Investments	\$114,366,926
Property, plant, and equipment (net)	\$84,834,197
Other assets	\$24,009,472
<b>Total assets</b>	<b>\$317,688,367</b>
Liabilities	
Current liabilities	\$54,669,493
Long-term debt	\$52,792,543
Other liabilities and minority interests	\$21,208,945
Net position	\$189,017,386
<b>Total liabilities and net position</b>	<b>\$317,688,367</b>

## Summary Statement of Revenues and Expenses

As of June 30, 2021

Operating Revenue	
Net operating revenue	\$211,057,525
Operating Expenses	
Wages and benefits	\$121,886,936
Supplies	\$45,710,361
Depreciation	\$8,215,219
Other expenses	\$45,048,152
<b>Total operating expenses</b>	<b>\$220,860,668</b>
Income (loss) from operations	(\$9,803,143)
Net nonoperational gains (losses)	\$10,734,543
<b>Revenue in excess of expenses</b>	<b>\$931,400</b>

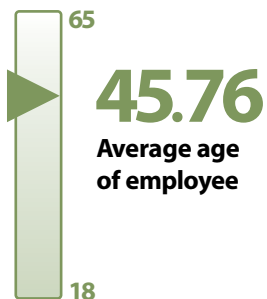
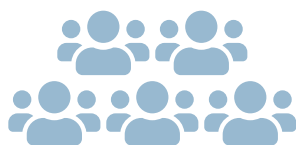
# Key Operating Indicators



# Workforce Statistics

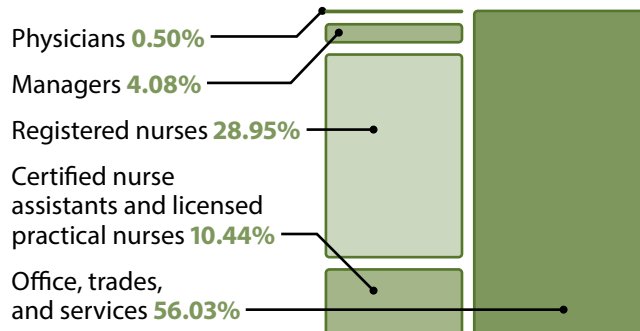
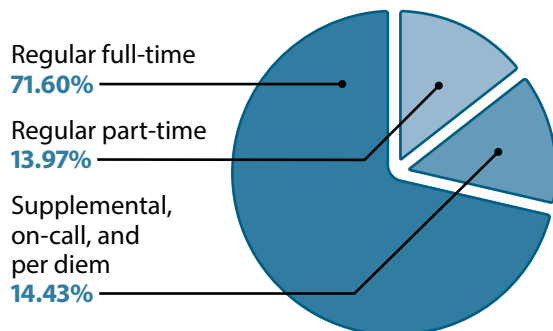
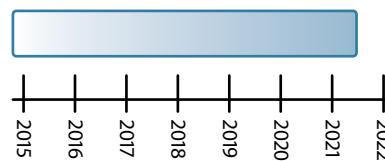
Average number of employees

**1,120**



Average length of service (years)

**7.79**





1775 Thompson Road  
Coos Bay, OR 97420

## Preventing child abuse is everyone's responsibility. Speak up.

Our community has a collective responsibility to help and protect our children. The ongoing support of volunteers and sponsors like you allows Kids' HOPE Center to continue its important work. By supporting the operation of the county's nonprofit child abuse intervention center, you are making a difference in the lives of children throughout Coos County and beyond. Learn more at [bayareahospital.org/KHC](http://bayareahospital.org/KHC)

### **Kids' HOPE Center**

Healing · Outreach · Prevention · Education

