

**BAY AREA HOSPITAL DISTRICT BOARD MEETING  
January 9, 2024, MINUTES**

*Bay Area Hospital Myrtle Conference Room @ 6:05 pm*

**BOARD EDUCATION SESSION – ChatGPT Exercise in Cypress Computer Lab**

**CALL TO ORDER**

Mr. Troy Cribbins, Board Chairperson, called the Bay Area Hospital (BAH) District Board meeting to order at 6:06 pm. A quorum was present.

**BOARD ATTENDANCE**

Tom McAndrew, MD; Barb Taylor; Patrice Parrott (via Teams); Carma Erickson-Hurt

**ABSENT**

Kim Winker, Director of Marketing (excused)

**STAFF ATTENDANCE**

Brian Moore, CEO; Jennifer Collins, CNO; Kelli Dion, CQO; Lee Saltzgaber, MD, CMO;  
Mary Lou Tate, CFO; Calvin Thomas, interim COO; Dr. Paavani Atluri, COS (Chief of Staff); Denise Bowers, EA

**LEGAL COUNSEL**

Megan Kronsteiner, Esq.

**PUBLIC ATTENDANCE AND INPUT**

None

**REPORT OF THE BOARD CHAIRPERSON COMMENTS – Mr. Troy Cribbins**

Chairperson Cribbins had no specific comments except to express his hope that everyone had a great holiday season.

**BOARD COMMENTS:**

Dr. McAndrew shared that he has completed his first week of retirement from his practice at North Bend Medical Center, and he welcomed Dr. Paavani Atluri to her new role of Chief of Staff for Bay Area Hospital. He asked Dr. Atluri to share back with the board on how they can better participate with the Medical Executive Committee in the future.

**CHANGE IN AGENDA ORDER – MOVE COMPLIANCE QUARTERLY REPORT FOR 4<sup>TH</sup> QUARTER TO LATER IN THE MEETING**

**CONSENT AGENDA**

The consent agenda included:

Board Meeting Minutes – December 12, 2023

MEC (Medical Executive Committee) Approved Minutes – November 2023

Balanced Scorecard – November 2023

**Action Taken by the Board:**

Dr. Tom McAndrew moved to approve the Consent Agenda as presented in the board packet. Ms. Carma Erickson-Hurt seconded, and the motion carried on a call of vote.

**QUALITY AND PATIENT SAFETY COMMITTEE (QPSC) REPORT – Ms. Patrice Parrott**

*"We improve the health of our community every day!"*

Ms. Parrott reported that, as there was no QPSC meeting in December 2023, there was nothing new to report.

### **CHIEF EXECUTIVE OFFICER REPORT – Mr. Brian Moore, CEO**

Mr. Moore began his report and invited the Board Chairperson to interrupt him once Ms. Linda Howard, of The Fox Group, was able to join us virtually.

#### *Financial Recovery*

Mr. Moore reported that a \$2M Medicare Cost Report true-up assessed fees was large part of what pulled us off track in November. In response, we accelerated our planned work on reducing claims payment denials. This is patient care that we are providing that we are not being paid for due to various reasons. We believe the opportunity amounts to over \$4 million per year. Our revenue cycle team is using new tools to help fight for these dollars. We have a plan for intervention and communication to engage our broader leadership team. We will be asking our management team to do daily audits to track these denials to pursue the unpaid dollars quickly. Questions were asked and answered.

Ms. Howard came online, and the floor was turned over to her.

### **COMPLIANCE QUARTERLY REPORT FOR 4<sup>TH</sup> QUARTER – Ms. Linda Howard, The Fox Group**

Ms. Howard reviewed the 4<sup>th</sup> quarter compliance report as included in the board packet. There was a short question and answer session with the board during which we lost power, and Ms. Howard's virtual connection to the meeting.

Mr. Moore continued his report to the board.

### **CHIEF EXECUTIVE OFFICER REPORT – Mr. Brian Moore, CEO**

#### *Financial Recovery (continued)*

Chairperson Cribbins recapped what Mr. Moore had earlier reported regarding avenues we are pursuing to get better reimbursement on claims payments. This recap led to a robust question and answer session.

There was discussion about the audits that are included in the compliance report for the month. Ms. Tate explained that there are a variety of audits that flow through that committee process. The wound care audit results in discussion were initiated by one of our payers. All audit results are reviewed by revenue cycle leadership and appealed if appropriate. We also seek to make any needed changes to improve future claims submissions.

#### *Work Session Tomorrow*

Larry Tramutola will join the board tomorrow to provide his research and interview information to help us determine how we best have conversation with our constituents about their interest in supporting Bay Area Hospital with a new levy on the November ballot.

#### *Signet Health*

Mr. Moore reported that the formal engagement for management services for our behavioral health service line was just before Thanksgiving. Signet has three physicians they are vetting and have not wasted time implementing what they have learned from their recent site visit. Ms. Jennifer Collins said they provided three resumes for the manager role and interviews are set for next week. Questions were asked and answered.

As Ms. Howard reconnected to the meeting, the floor was again turned over to her.

### **COMPLIANCE QUARTERLY REPORT FOR 4<sup>TH</sup> QUARTER (continued)**

Ms. Howard continued her review of the 4<sup>th</sup> quarter compliance report as included in the board packet

**Action taken by the Board:** Ms. Barb Taylor moved to approve the 4<sup>th</sup> Quarter Compliance report as presented in the packet and reviewed by Ms. Linda Howard, The Fox Group. Dr. Tom McAndrew seconded the motion. There was no further discussion and the motion carried on call for vote.

### **CHIEF EXECUTIVE OFFICER REPORT – Mr. Brian Moore, CEO**

#### *EPIC Connect*

Mr. Moore reported that St. Charles has filled a Chief Information Digital Officer role, new to their organization, in lieu of a CIO role. This new individual will start in March 2024. This new leader has significant Epic Connect experience and will start in early March 2024. In the interim we are pursuing a two-fold strategy; pressing the agreement from a legal perspective – there are price protections in place for the agreement and both sides have their legal counsel engaged in those conversations. In parallel, Mr. Calvin Thomas is working our team and St. Charles to understand the workflow of Epic system administration and organization chart for St. Charles as our Epic Connect partner. As we get that clarity, we can optimize our participation and increase the value that we get from the process as St. Charles has described it to us. We are in discussions with St. Charles on a future site visit. Mr. Moore asked Mr. Thomas to provide a brief update to the board.

Mr. Thomas reported that at 4:00 pm today; St. Charles agreed to separate the regulatory concerns out of the meeting cadence and use the time to address the 12 topmost issues for resolution. He is finding a pathway to greater clarity and gaining individual attention to both the contract issues and the resolution list. St. Charles is open to that work with us. Questions were asked and answered.

#### *Leadership Changes*

Mr. Moore reported formally that Mr. Clay England is no longer with the organization. Mr. Moore is acting as the interim CHRO as a search begins for an Interim HR Director permanent CHRO. We are seeking someone who will manage core HR issues, with excellent communication and strong emotional intelligence as a long-term search begins for an external CHRO.

#### *Sepsis*

Mr. Moore had wanted to discuss Sepsis and the work being done by that group with the board; due to lack of time this evening, it will be addressed at a future meeting.

#### *Patient Experience Update – Ms. Jennifer Collins, CNO*

Ms. Collins reported that we are at 61%, on our way to our goal of 67.5%. She is excited that minor adjustments are making a huge improvement in our scores. We have work to do and are well on our way.

Ms. Collins is working with our HR business partner on a framework to train all leaders in customer service and service recovery, using our organizational values. This program will be presented to the executive team and there will be multiple offerings to staff. A recent patient experience initiative is being led by two of our newest leaders, Mr. Andrei Ailutoaei, Nursing Services Director and Mr. Alister Stewart, Emergency Department Manager. They did a deep dive into the left without being seen metrics in conjunction with patient satisfaction surveys. This led to a discovery of the impact of being sent back to the waiting room after being initially triaged. Taking this information, they created a new workflow to make better use of the beds in B Pod which also opened other space in the body of the ED. Patients are now on a continual movement forward through the process. The new workflow has also improved the ability of lab and imaging to find patients. The board had complimentary comments for Ms. Collins and her team. Questions were asked and answered.

### **FINANCIAL OFFICER REPORT – Ms. Barbara Taylor, Treasurer**

There was no Finance Committee meeting in December; however, a financial packet was sent out to the Finance Committee. Overall, Bay Area hospital lost \$185K in November vs. budgeted income of \$261K and last year's loss of \$1.9M. The largest variance to budget in November is the 2023 CMS Cost Report was finalized and showed BAH owing just over \$2M; just under \$900k had been accrued for this settlement, thus causing a \$1.1M impact to the financials this month. Year-to-date Net Revenues are \$5.0M ahead of budget and \$21.5M ahead of last year (Actual of \$98.4M vs. Budget of \$93.4M vs. Last Year of \$76.9M).

Detailed financial documents were included in the board packet.

Chairperson Cribbins commented that "we are not alone" in this financial "tightness." Ms. Tate shared that in the last CEO/CFO meeting with our lender, Mr. Ron Freed, our case manager, reflected that his eyes have been opened to the fiscal crisis in healthcare nationwide. Also, Mr. Freed said he is impressed with Bay Area Hospital in that we are delivering what we promised our lenders.

Questions were asked and answered.

**MEDICAL STAFF CREDENTIALS REPORT – Dr. Lee Saltzgaber**

This report was reviewed in the Executive Session.

**EXECUTIVE SESSION**

The Board went into Executive Session as authorized by ORS 192.660(2) at 7:13 pm to:

- (c) consider matters pertaining to the function of the medical staff at a public hospital*
- (f) consider information or records that are exempt by law from public inspection*
- (h) consult with legal counsel concerning the legal rights and duties of the District with regard to current litigation or litigation likely to be filed*

**OPEN SESSION**

Chairperson Cribbins reopened the meeting into public session at 7:15 pm.

**Action taken by the Board:** Dr. Tom McAndrew moved to approve the Credentialing Report as presented in the packet. Ms. Carma Erickson-Hurt seconded the motion. There was no further discussion and the motion carried on call for vote.

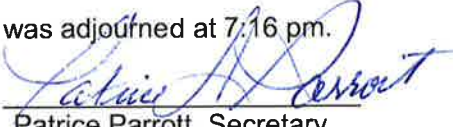
**MEDICAL STAFF REPORT – Dr. Paavani Atluri, Chief of Staff**

Dr. Atluri was welcomed to her new MEC role as Chief of Staff, and she stated that her work will focus on improving interdepartmental relationships and communications.

**ADJOURNMENT**

There being no further business, the District Board meeting was adjourned at 7:16 pm.

  
Troy Cribbins, Board Chairperson

  
Patrice Parrott, Secretary

Date: 2/13/24

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