

Jefferson County Public Hospital District No.2
Board of Commissioners, Regular Session Minutes
Wednesday, January 18, 2017
Victor J. Dirksen Conference Room

Call to Order:

The meeting was called to order at 3:28pm by Commissioner Buhler. Present were Commissioners Buhler, De Leo, Dressler, Kolff, and Ready. Also present were Mike Glenn, CEO, Brandie Manuel, Executive Director Quality, Hilary Whittington, CFO, Jackie Mossakowski, CNO, Steven Feland, CHRO, Dr. Kent Smith, Chief of Staff and Alyssa Rodrigues, Administrative Assistant. This meeting was officially audio recorded by Jefferson Healthcare.

Approve Agenda:

Commissioner Dressler made a motion to approve the January 18 regular session agenda. Commissioner De Leo seconded the motion and made an amendment to add discussion and voting on advocacy agenda for Olympia. Commissioner Dressler seconded the amended motion.

Action: Motion passed unanimously.

Patient Story:

Jackie Mossakowski reported about the high census at Jefferson Healthcare and expressed her deep appreciation for all employees at Jefferson Healthcare during these times.

Minutes:

- January 4 Regular Session minutes

Commissioner Dressler made a motion to approve the January 4 regular session minutes with a recommended correction to strike the word "some" on page 4.

Commissioner Kolff seconded the motion.

Action: Motion passed unanimously.

Required Approvals:

- Medical Staff Credentials/Appointments/Reappointments
- November Warrants and Adjustments

Commissioner De Leo made a motion to approve Medical Staff Credentials/ Appointments/ Reappointments as presented. Commissioner Dressler seconded the motion.

Action: Motion passed unanimously.

Public Comment:

Public comment was made.

Financial Report:

Hilary Whittington, CFO presented the December financial report.

Administrator's Report:

Mike Glenn presented the administrators report regarding the strategic plan update and advocacy agenda.

Discussion ensued.

Commissioner De Leo made a motion to approve the advocacy agenda. Commissioner Dressler seconded the motion.

Discussion ensued.

Action: Motion passed unanimously

Commissioner Ready made a motion to draft an advocacy letter advising President-Elect Trump on healthcare reform. Commissioner Kolff seconded the motion.

Discussion ensued.

Action: Motion failed 2 to 3. Commissioners Kolff and Ready in favor, Commissioners Dressler, De Leo, and Buhler opposed.

Resolution 2017-03: Action Requested

Commissioner De Leo made a motion to approve Resolution 2017-03: Chimacum School District No. 49 Replacement Levy. Commissioner Dressler seconded the motion.

No public comment.

Action: Motion passed unanimously.

Resolution 2017-05: Action Requested

Mary Feeney, Director of Emergency Services and Bill Hunt, Emergency Management Coordinator, presented a power point in regards to the Jefferson County Hazard Mitigation Report.

Discussion ensued.

Action: Motion passed unanimously.

Board Reports:

Commissioner Buhler discussed the documents she passed out regarding agenda topics to come, administrative committees, annual board evaluation criteria, compiled results from board meeting evaluations, and Board of Health minutes.

Commissioner Kolff explained PSARA flyer that he passed out to commissioners and public.

Commissioner Kolff made a suggestion to add power points the same day as the audio recording to the Jefferson Healthcare website.

Commissioner De Leo announced he participated in online training for Open Public Meeting and Public Records Training for Hospital District Commissioners from WSHA, and also Open Public Meeting and Public Records Boot Camp.

Commissioner Buhler announced a break at 5:30pm
Commissioner Buhler reconvened the meeting at 5:40pm.

Executive Session:

Commissioner Buhler announced they will go into executive session at 5:40pm to discuss possible lease or purchase of real estate RCW 42.30.110(1)B, Commissioners will come out of executive session at 6:10pm. No action will be taken.

Commissioners came out of executive session at 6:10pm.

Commissioner Buhler announced they will go back into executive session at 6:10pm and will come out at 6:20pm.

No members of the public were waiting to return to the commissioners meeting at 6:10pm, executive session resumed.

Commissioners came out of executive session at 6:22pm. No action taken.

Conclude:

Commissioner Kolff made a motion to conclude the meeting. Commissioner Ready seconded the motion.

Action: Motion passed unanimously.

Meeting concluded at 6:22pm.

Approved by the Commission:

President of Commission: Jill Buhler _____

Secretary of Commission: Marie Dressler _____



Overview of December

Soft close of the month; some remaining work to do for final year-end close



This is a preliminary income statement and balance sheet with many significant items still outstanding. The numbers will move. A lot.

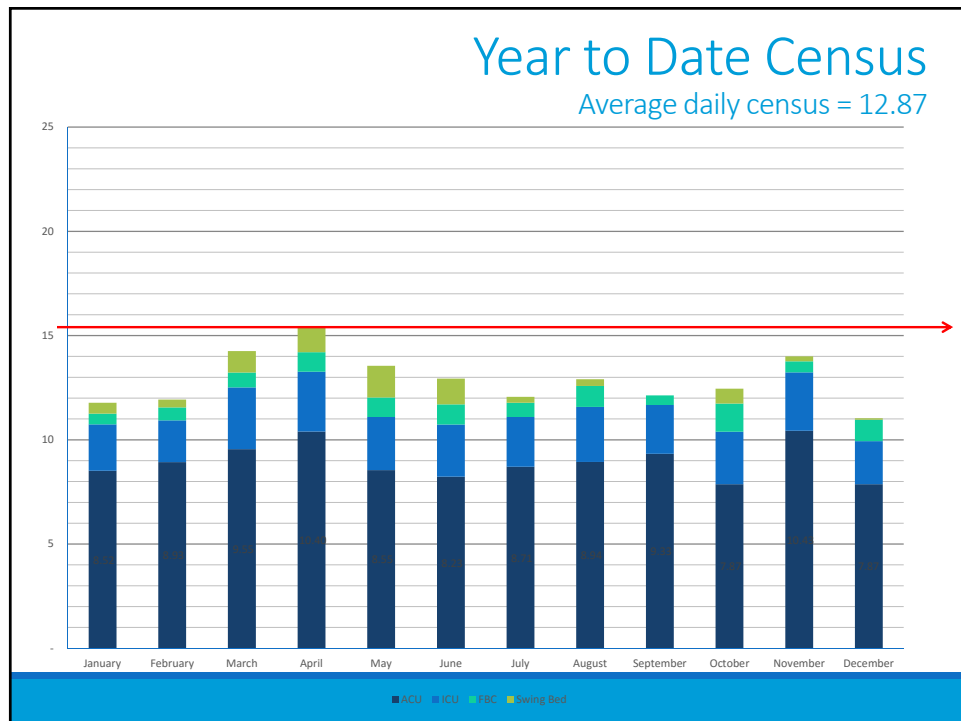
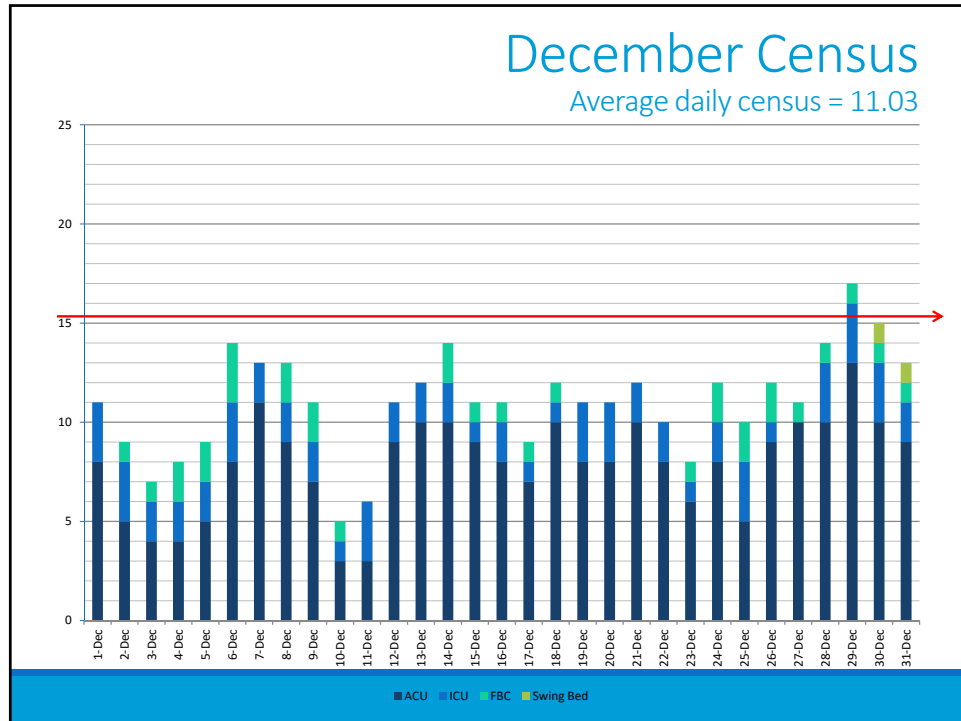
Preliminary ≠ Draft

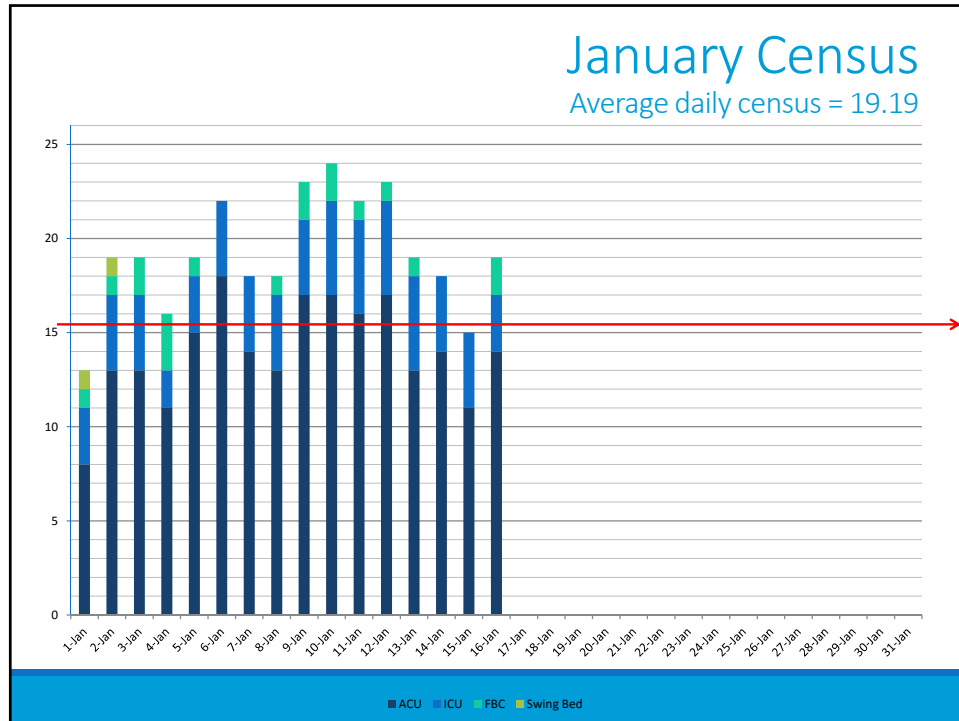


Holidays traditionally result in lower inpatient census; we have seen higher OP activity as orthopedics and related ancillary services grow



High depreciation and professional fees; this was generally expected at year end but higher volumes have increased our need to flex up





Operating Statistics

December 2016

STATISTIC DESCRIPTION	DECEMBER BUDGET	DECEMBER ACTUAL	QUANTITY VARIANCE	% VARIANCE
ICU PATIENT DAYS (IP + OBSERVATION, MIDNIGHT CENSUS)	88	75	(13)	-14%
ACU PATIENT DAYS (IP + OBSERVATION, MIDNIGHT CENSUS)	334	276	(58)	-17%
SWING IP PATIENT DAYS (MIDNIGHT CENSUS)	46	2	(44)	-96%
PATIENT DAYS (ACU, ICU, SWING), INCLUDES OBSERVATION	467	353	(114)	-24%
BIRTHS	8	6	(2)	-27%
SURGERY MINUTES (IN OR)	8,333	6,466	(1,867)	-22%
SPECIAL PROCEDURE CASES	61	74	13	21%
RECOVERY MINUTES	2,748	2,436	(312)	-11%
LAB BILLABLE TESTS	15,166	17,060	1,894	12%
TOTAL BLOOD BANK UNITS MATCHED	55	73	18	34%
TOTAL RADIOLOGY TESTS	1,180	1,370	190	16%
MRIs COMPLETED	133	140	7	6%
CT SCANS COMPLETED	300	333	33	11%
ULTRASOUNDS COMPLETED	265	283	18	7%
NUC MED TESTS	19	18	(1)	-6%
TOTAL DIAGNOSTIC IMAGING TESTS	1,897	2,144	247	13%

Operating Statistics

December 2016

STATISTIC DESCRIPTION	DECEMBER BUDGET	DECEMBER ACTUAL	QUANTITY VARIANCE	% VARIANCE
TOTAL PHARMACY UNITS	21,750	17,977	(3,773)	-17%
TOTAL RESPIRATORY THERAPY PROCEDURES	2,000	2,351	351	18%
ER CENSUS	875	960	85	10%
SOCO PATIENT VISITS (ENCOUNTERS)	125	128	3	2%
JHPC & JMPG PATIENT VISITS (ENCOUNTERS)	2,492	2,537	45	2%
JHFM PATIENT VISITS (ENCOUNTERS)	1,433	1,176	(257)	-18%
JHIM PATIENT VISITS (ENCOUNTERS)	565	568	3	0%
TOTAL RURAL HEALTH CLINIC VISITS	5,168	4,409	(759)	-15%
JHPLC PATIENT VISITS (ENCOUNTERS)	379	406	27	7%
GEN SURG PATIENT VISITS	250	170	(80)	-32%
ORTHO PATIENT VISITS	512	371	(141)	-28%
MSS TOTAL MSS PATIENT VISITS	680	707	27	4%
ONCOLOGY VISITS	334	233	(101)	-30%
ANTI COAG VISITS	490	569	79	16%
SLEEP CLINIC VISITS	183	137	(46)	-25%

Disclaimers

Outstanding year end entries

Revenues

Detail review of Port Ludlow A/R

2016 Medicare and Medicaid cost report estimates.
Likely decrease given ESSB depreciation (generally
higher expense = IOU to Medicare)

Review allowance calculation compared to actual
collections activity

340b Revenue reconciliation (and expense)

Expenses

Review accruals for retirement, PTO, and other salary
related expenses

Late invoices - estimates recorded for services/goods
received before year end

Update depreciation expense, detail review of every
asset & project

Reconcile inventory to supply expense; likely increase
given magnitude of pharmacy

December Revenues and adjustments

	December 2016 Actual	December 2016 Budget	Variance Favorable/ (Unfavorable)	%	December 2016 YTD	December 2016 Budget YTD	Variance Favorable/ (Unfavorable)	%	December 2016 YTD
Gross Revenue									
Inpatient Revenue	2,715,625	3,297,643	(582,019)	-18%	34,037,971	36,933,268	(4,895,297)	-13%	34,808,057
Outpatient Revenue	12,020,404	11,360,630	659,774	6%	138,908,030	134,128,020	4,780,010	4%	130,057,320
Total Gross Revenue	14,736,029	14,658,273	77,756	1%	172,946,001	173,061,288	(115,287)	0%	164,865,376
Revenue Adjustments									
Cost Adjustment Medicaid	1,806,852	1,781,879	(24,973)	-1%	19,656,891	21,037,559	1,380,667	7%	20,145,947
Cost Adjustment Medicare	4,814,978	4,345,396	(469,582)	-11%	55,718,728	61,303,435	(4,415,293)	-8%	61,291,990
Charity Care	37,678	97,917	(60,240)	-62%	927,129	1,106,048	228,919	20%	1,007,943
Contractual Allowances Other	1,208,222	1,060,797	(145,425)	-14%	12,887,280	12,624,183	(363,098)	-3%	11,724,931
Administrative Adjustments	29,392	16,940	(12,452)	-74%	222,717	200,000	(22,717)	-11%	611,085
Adjust Bad Debt	285,050	340,617	(55,567)	-16%	2,784,396	4,021,458	1,237,061	31%	3,375,292
Total Revenue Adjustments	8,180,171	7,643,546	(536,625)	-7%	92,197,143	90,242,682	(1,954,461)	-2%	88,157,189
Net Patient Service Revenue	6,555,858	7,014,727	(458,870)	-7%	80,748,859	82,818,606	(2,069,747)	-2%	76,708,188
Other Revenue									
340B Revenue	279,541	369,396	(89,855)	-24%	3,048,548	4,361,229	(1,312,681)	-30%	3,742,522
Meaningful Use Chr Incentive	-	14,399	(14,399)	-100%	182,750	170,000	12,750	8%	448,110
Other Operating Revenue	85,893	89,231	(3,339)	-4%	1,108,111	1,053,500	54,611	5%	855,712
Total Operating Revenues	6,921,291	7,487,753	(566,462)	-8%	85,088,267	88,403,335	(3,315,067)	-4%	81,754,531

December Expenses, nonoperating activities, and change in net position

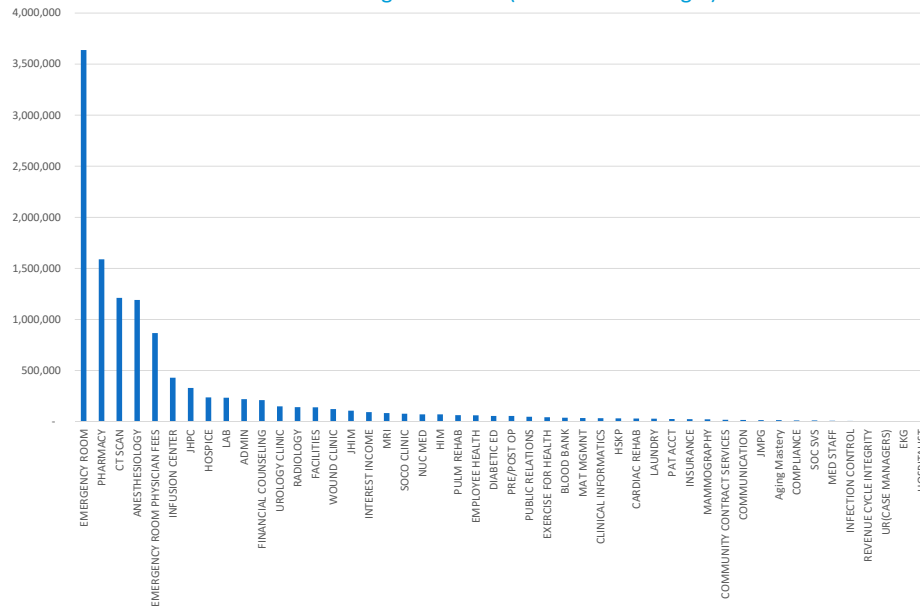
	December 2016 Actual	December 2016 Budget	Variance Favorable/ (Unfavorable)	%	December 2016 YTD	December 2016 Budget YTD	Variance Favorable/ (Unfavorable)	%	December 2016 YTD
Operating Expenses									
Salaries And Wages	3,456,365	3,650,395	(194,029)	5%	41,613,451	43,097,983	1,484,532	3%	39,147,712
Employee Benefits	706,792	890,696	(183,905)	21%	9,926,499	10,515,908	589,409	6%	9,409,317
Professional Fees	353,004	294,336	(58,668)	-34%	3,629,665	3,120,850	(508,816)	-16%	3,190,787
Purchased Services	814,354	609,090	(205,264)	-25%	5,700,782	6,010,047	309,265	5%	4,749,592
Supplies	1,069,844	1,054,039	(15,805)	-1%	13,396,056	14,384,800	988,744	7%	11,763,215
Insurance	70,942	59,307	(11,635)	-20%	675,767	700,200	24,433	3%	598,538
Leases And Rentals	112,992	120,268	(7,276)	-6%	1,396,424	1,419,934	23,510	2%	1,291,527
Depreciation And Amortization	518,778	325,032	(193,746)	-60%	4,165,566	3,837,459	(328,107)	-9%	4,176,527
Repairs And Maintenance	60,394	74,629	(14,235)	-19%	674,123	879,913	205,790	23%	855,593
Utilities	81,868	79,875	(1,993)	-3%	832,880	940,670	107,790	11%	874,999
Licenses And Taxes	56,078	60,016	(3,938)	-7%	624,411	708,578	84,164	12%	668,412
Other	210,878	157,549	(53,329)	-34%	1,761,335	1,860,091	98,756	5%	1,683,432
Total Operating Expenses	7,212,887	7,244,891	(32,004)	0%	84,396,761	87,476,430	3,079,669	4%	78,440,141
Operating Income (Loss)	(291,596)	242,862	(534,458)	-220%	691,506	926,905	(235,399)	-25%	3,314,390
Non Operating Revenues (Expenses)									
Taxation For Asset Operations	(12,771)	21,516	(34,287)	-159%	168,795	254,025	(85,230)	-34%	164,795
Taxation For Debt Service	(19,677)	14,482	(34,158)	-236%	247,460	170,975	76,485	45%	258,767
Investment Income	10,487	3,146	7,311	232%	117,597	37,140	80,457	217%	41,496
Interest Expense	(25,699)	(52,334)	26,635	81%	(474,328)	(617,878)	143,550	23%	(379,893)
Bond Insurance Costs	-	-	-	0%	-	(610,000)	610,000	0%	(153,300)
Gain or (Loss) on Disposed Asset	10,000	-	10,000	0%	56,749	0	56,749	0%	(31,014)
Contributions	8,483	12,366	(3,883)	-31%	58,535	146,000	(87,465)	-60%	455,646
Total Non Operating Revenues (Expenses)	(28,207)	(825)	(28,382)	-3441%	174,809	(619,738)	794,547	128%	356,697
Change in Net Position (Loss)	(320,802)	242,037	(562,840)	-233%	866,315	307,167	559,148	182%	3,671,088

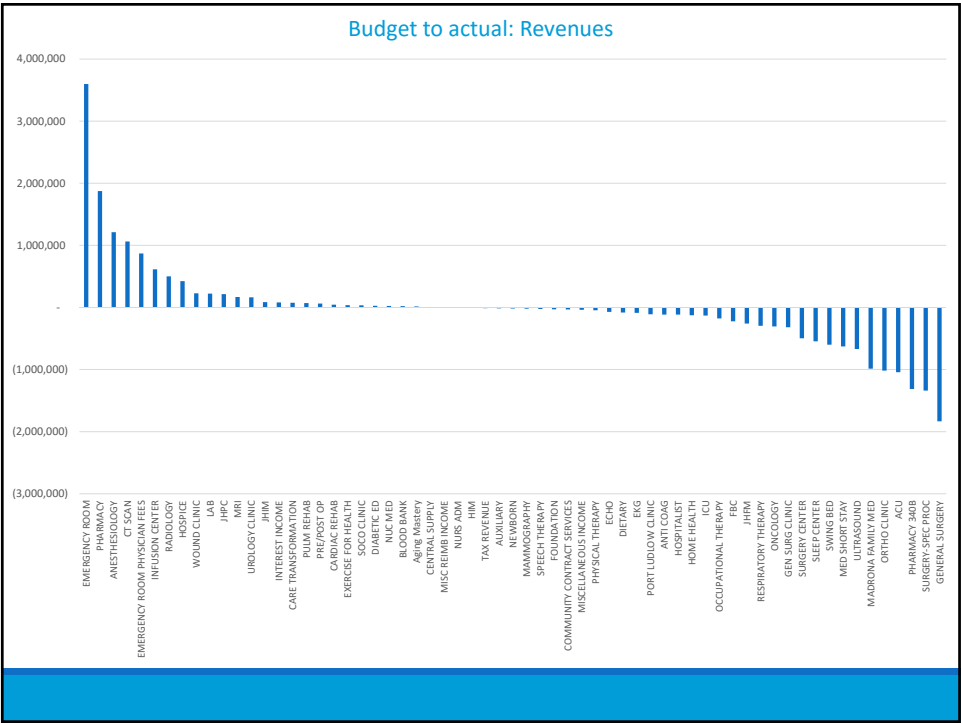
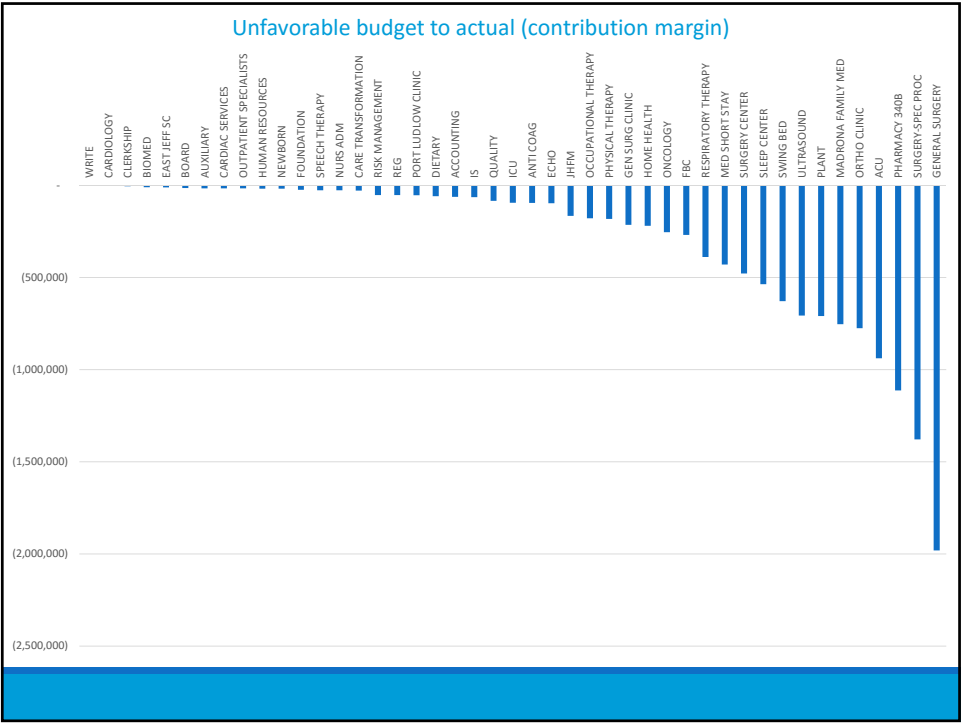
Financial Snapshot

December, month and year to date

	December 2016 Actual	December 2016 Budget	Variance Favorable/ (Unfavorable)	%	December 2016 YTD	December 2016 Budget YTD	Variance Favorable/ (Unfavorable)	%	December 2016 YTD
Operating Margin	-4.2%	3.2%	-7.5%	-229.9%	0.8%	1.0%	-0.24%	-22.5%	4.1%
Total margin	-4.6%	3.2%	-7.9%	-243.4%	1.0%	0.3%	0.67%	193.0%	4.5%
Inpatient gross revenue	2,710,625	3,297,643	(582,019)	-17.6%	34,037,971	38,933,268	(4,895,297)	-12.6%	34,808,057
Outpatient gross revenue	12,020,404	11,360,630	659,774	5.8%	138,908,030	134,128,020	4,780,010	3.6%	130,057,320
Net patient revenue	6,555,858	7,014,727	(458,870)	-6.5%	80,748,859	82,818,606	(2,069,747)	-2.5%	76,708,188
Deductions as a % of gross revenue	-55.5%	-52.1%	-3.4%	-6.5%	-53.3%	-52.1%	-1.16%	-2.2%	-53.5%
Charity as a % of gross revenue	-0.3%	-0.7%	0.4%	61.7%	-0.5%	-0.7%	0.13%	19.7%	-0.6%
Bad Debt as a % of gross revenue	-1.9%	-2.3%	0.4%	16.8%	-1.6%	-2.3%	0.71%	30.7%	-2.0%
Salaries & Benefits as a % of net pt. service rev.	-63.5%	-64.7%	1.2%	1.9%	-63.8%	-64.7%	0.91%	1.4%	-63.3%

Favorable budget to actual (contribution margin)

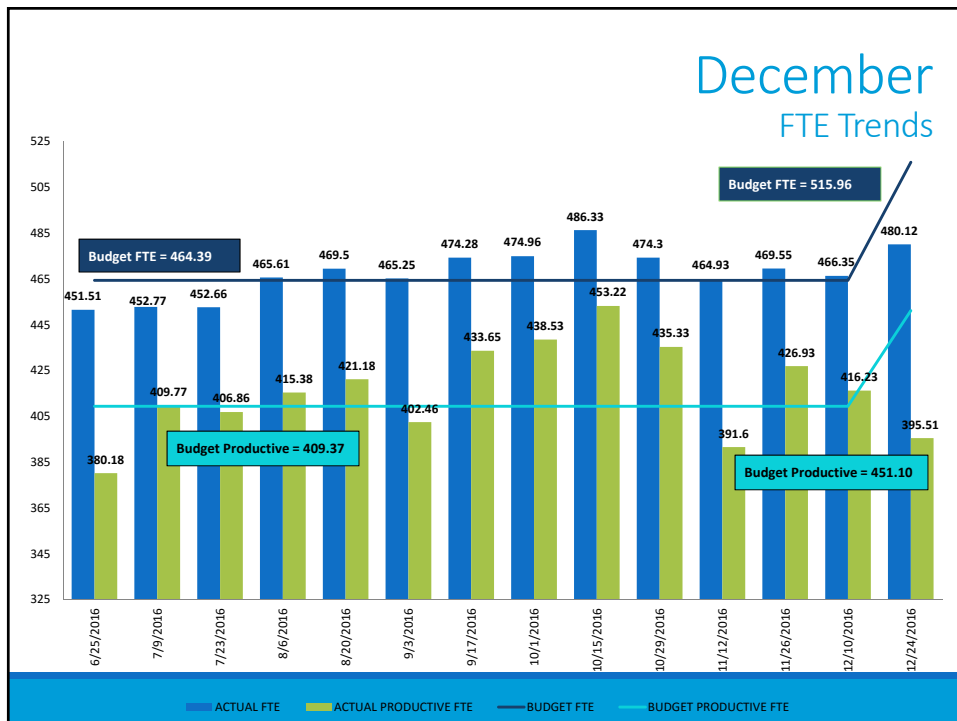


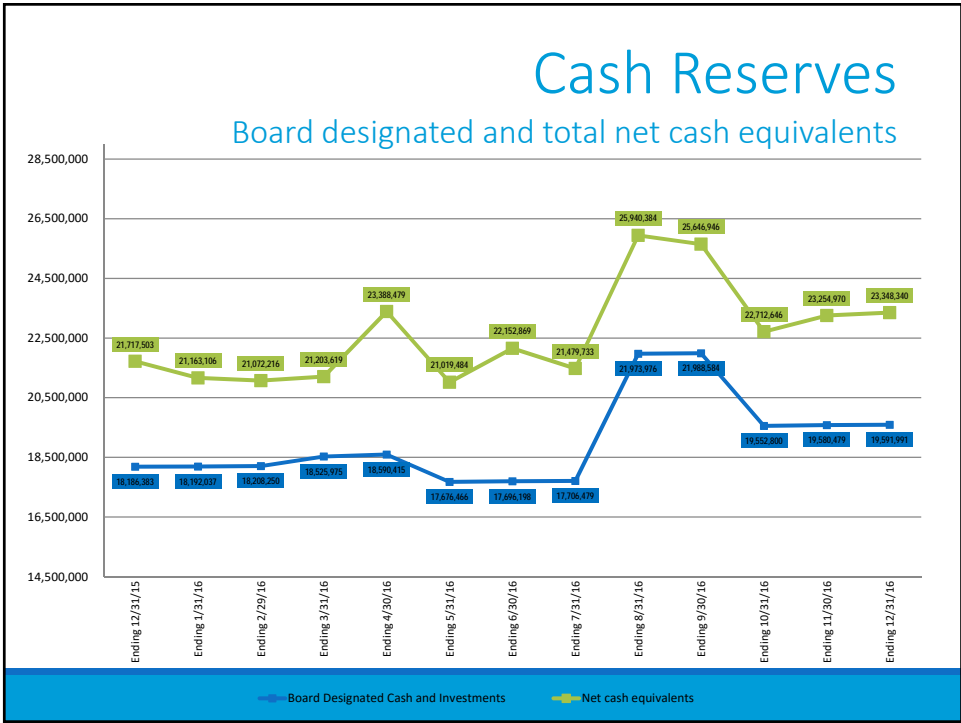
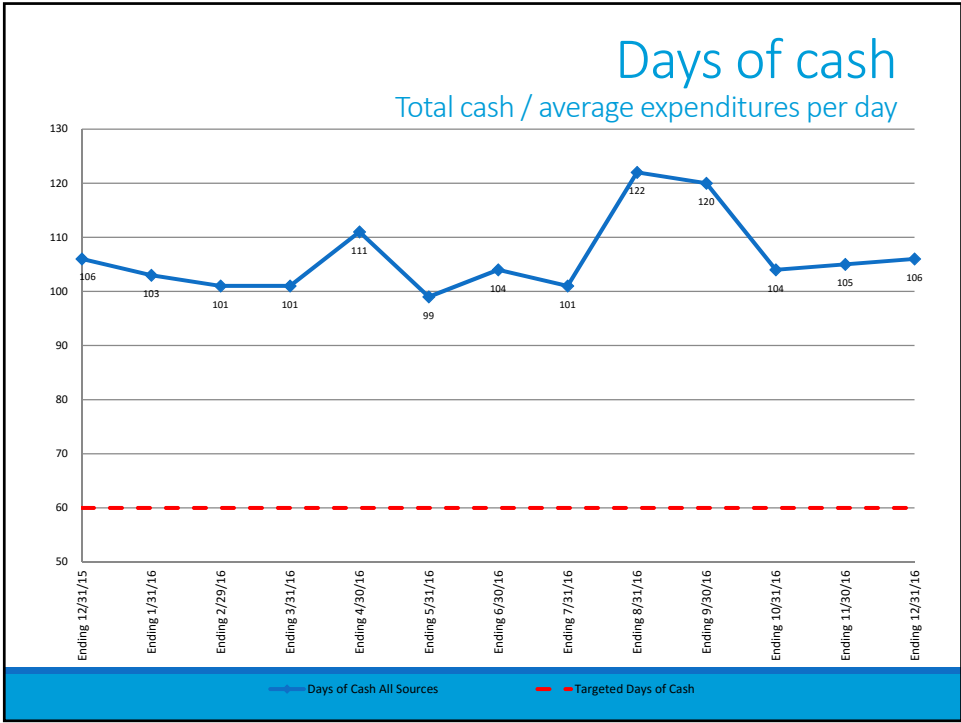


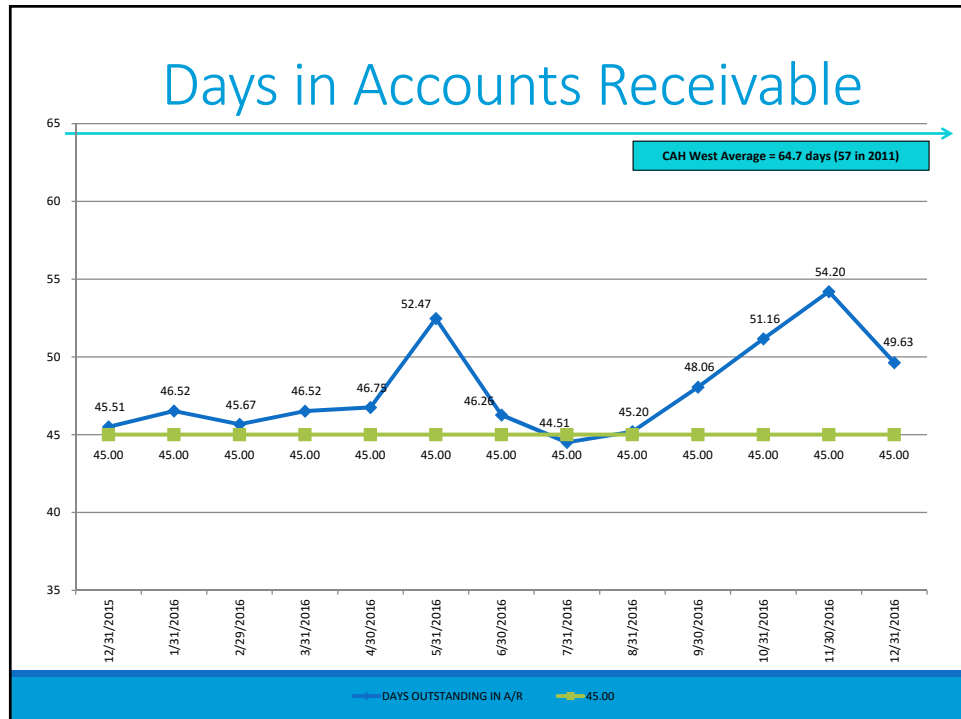
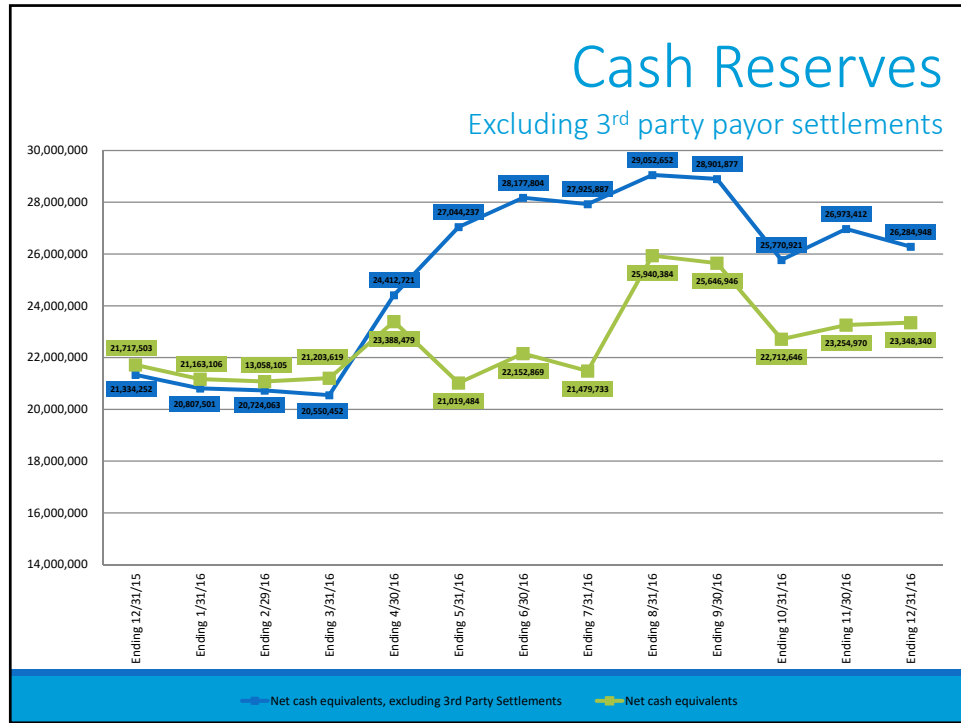
Balance Sheet

December, 2016 and 2015

	2016	2015
ASSETS		
<i>Current Assets</i>		
Cash and cash equivalents	\$ 3,756,349	\$ 3,692,643
Cash and cash equivalents restricted or limited as to use	20,240,389	18,768,134
Receivables	14,436,489	9,728,932
Other current assets	1,967,730	1,873,244
Total current assets	40,400,957	34,062,953
<i>Noncurrent Assets</i>		
Total non-current assets	40,495,660	24,402,953
Total Assets	\$ 80,896,617	\$ 58,465,906
LIABILITIES AND NET POSITION		
<i>Current liabilities</i>		
Accounts payable	\$ 3,939,947	\$ 3,937,279
Accrued payroll, PTO, and related liabilities	3,267,562	3,346,599
Other current liabilities	1,057,197	1,878,268
Total current liabilities	8,264,705	9,162,146
<i>Noncurrent liabilities</i>		
Long-Term debt net of current portion, refunding loss, and bond discounts	27,994,518	11,962,604
Total non-current liabilities	27,994,518	11,962,604
Total liabilities	36,259,224	21,124,750
Net position	44,637,394	37,341,156
Total Liabilities and Net Position	\$ 80,896,617	\$ 58,465,906







2016 Board Budget to Actual

Department	Department Description	Rev/Exp	Account	Account Description	December	December	Variance		YTD Actual	YTD Budget	YTD Variance
					Actual	Budget	(Favorable)/	Unfavorable			(Favorable)/
8612 BOARD		Exp	600010	MANAGEMENT & SUPERVISION WAGES	497.00	4,574.00	(4,077.00)		54,573.00	54,000.00	573.00
			602300	CONSULT MNGMT FEE	-	423.00	(423.00)		5,339.00	5,000.00	339.00
			604200	CATERING	43.00	42.00	1.00		816.00	500.00	316.00
			604500	OFFICE SUPPLIES	-	-	-		-	-	-
			604800	MINOR EQUIPMENT	-	-	-		-	-	-
			604900	OTHER NON-MEDICAL SUPPLIES	-	-	-		-	-	-
			606500	OTHER PURCHASED SERVICES	-	-	-		12,483.00	-	12,483.00
			609400	TRAVEL/MEETINGS/TRAINING	62.00	1,143.00	(1,081.00)		13,759.00	13,500.00	259.00
				Exp Total	602.00	6,182.00	(5,580.00)		86,970.00	73,000.00	13,970.00
				BOARD Total	602.00	6,182.00	(5,580.00)		86,970.00	73,000.00	13,970.00
				Grand Total	602.00	6,182.00	(5,580.00)		86,970.00	73,000.00	13,970.00

2017 Board Budget

Dept #	Department Name	Rev/Exp	Summary	Account	Account Description	2017 Budget
8612 BOARD		Exp	20_SALARIES	600010	MANAGEMENT & SUPERVISION WAGES	54,720
			20_SALARIES Total			54,720
			22_PROFESSIONAL FEES	602300	CONSULT MNGMT FEE	
				602500	AUDIT FEES	35,000
			22_PROFESSIONAL FEES Total			35,000
			23_PURCHASED SERVICES	606500	OTHER PURCHASED SERVICES	10,000
			23_PURCHASED SERVICES Total			10,000
			24_SUPPLIES	604200	CATERING	1,163
				604500	OFFICE SUPPLIES	-
				604800	MINOR EQUIPMENT	-
				604850	COMPUTER EQUIPMENT	-
				604900	OTHER NON-MEDICAL SUPPLIES	-
			24_SUPPLIES Total			1,163
			26_LEASES/RENTALS	608100	LEASES/RENTALS-BUILDINGS	
			26_LEASES/RENTALS Total			
			30_LICENSES/TAXES	609200	LICENSE LICENSES AND TAXES	
			30_LICENSES/TAXES Total			
			31_OTHER	609400	TRAVEL/MEETINGS/TRAINING	20,000
				609900	MISC OTHER EXP	
			31_OTHER Total			20,000
			Exp Total			120,883
			BOARD Total			120,883
			Grand Total			120,883

January preview

Revenues

\$15,800,000 in HB charges

- Average: \$486,000/day (HB only)
- Budget: \$560,500/day

\$5,200,000 in HB cash collections

- Average: \$199,000/day (HB only)
- Goal: \$255,000/day



QUESTIONS AND COMMENTS?

Administrator's Report

January 18, 2017

January 2017

- Busiest two week period in our history
- ED seeing 35-45 patients per day
- Inpatient census 22-25
- Surgery, ancillary departments and primary care clinics very busy
- Hospital or ED never went on divert
- Staff was awesome!

Dental Services

Capital budget appropriations and request.

Jefferson
Healthcare

live here. thrive here.

2017 Legislative Session Member Requested Local Community Project Information Form

Project Name: Expanding Dental Services in Jefferson County;
The Jefferson Healthcare Dental Clinic

Address of Project Site: 915 Sheridan St
Port Townsend, WA 98368

Project Contact:
Name(s): Jennifer Wharton
Title: Executive Director of the Medical Group
Organization: Jefferson Healthcare
Organization's website: www.jeffersonhealthcare.org
Website:
Phone: 360-385-2200
E-Mail: jwharton@jeffersonhealthcare.org
Mailing Address: 834 Sheridan Street
Port Townsend, WA 98368

Where is the Project Physically Located?
District: 24
Latitude: 48.106744
Longitude: -122.790639
<http://www.mapquest.com>

Legislative Sponsor(s):
Representative Tharinger

Funding Requested: \$1,036,000
Do not directly enter the Funding Requested amount on the line above. Instead, enter the relevant amounts under "Requested Dollar Amount" on page 2. The total Funding Requested will automatically be calculated and filled in on the line above.

Organization Information

	Yes	No
Is the requesting organization registered with the state as a non-profit organization?		N
Is there a current or pending 501(c)(3) IRS registration?		N
If answered no to either of the above, is applicant a local government?	Y	

Important Notes:
This is not a formal grant program. This form provides information for House members to request a separate appropriation in the capital budget for this project. Funding any project is at the discretion of the Legislature. Successful past projects generally are ones in which the requested state funds: (1) are used for a facility providing an important public benefit; (2) are a small portion of the total project funding (25% or less); (3) result in a completed project or phase usable by the public for the intended purpose when the state funds are expended; and (4) are for a project that is ready for construction or renovation and will be completed within the biennium.


Funds are available on a reimbursement basis only and cannot be advanced.

Projects may be subject to state prevailing wage law (Chapter 39.12 RCW). Requesting organizations are encouraged to consult the Industrial Statistician (David Some: 360-602-5330 or dsome235@lni.wa.gov) at the Washington State Department of Labor Industries to determine whether prevailing wages must be paid.

High-performance building requirements (Chapter 39.35D RCW and Chapter 28A.150.510 RCW) and Executive Order 13-03 regarding life cycle and operating costs in public works projects may also apply.

NOTE: This form is prepared for the use of the Capital Budget Chair, Representative Tharinger. He may elect to submit this form for filing in the Capital Budget Committee records. In addition, if the proposed request is funded in the enacted capital budget bill, the form may be filed with the state agency that distributes funding for the project. If so filed, this form will become a legislative record subject to public disclosure and will be archived consistent with Chapter 40.14 RCW.

revised Nov 7, 2016



DENTAL CARE IN JEFFERSON COUNTY

Increasing Access to Dental Services
Jefferson Healthcare (JH) proposes to address one of the most critical health needs in east Jefferson County by establishing a dental clinic for Medicaid and low-income residents of the area. JH intends to co-locate the clinic in one of its facilities that already houses primary care and behavioral healthcare, thus offering patients dental services that are integrated with other aspects of health care.

The clinic will provide an estimated 8,500 to 10,500 dental visits per year, serving approximately 3,000 children and adults. The total project cost for building and equipping a six-chair facility will be approximately \$1.7 million. One million dollars in state capital funding is being requested, with other funding streams being pursued to fulfill the capital amount.

Critical Need for Dental Services
Jefferson County has the lowest utilization of dental care services for Medicaid eligible clients in Washington State, having ranked 39 out of 39 counties for the last five years. Since the expansion of Medicaid there are almost 9,000 Jefferson County residents, 2,400 children, who are on some form of Apple Health; of these, only 21% receive dental care. There are no dentists in the County that see adults with Medicaid. Given the lack of access, patients often wait to seek care until they go to the emergency department. In 2016 there were 173 JH Emergency Department visits for dental-related reasons; over 75% of these visits were paid for by Medicaid.

6 chair dental clinic
Serving 3,000 children and adults
8,500 to 10,500 dental visits per year

Ongoing Sustainability: Dental Services in a Rural Health Clinic
JH will be the first rural health clinic (RHC) in WA State to offer dental services. Given that the primary population that would use the JH dental clinic are Medicaid and other low-income residents of the hospital district, payment using the RHC payment schedule is key to the financial viability of the service. Dental services will need to be included in the WA Medicaid State Plan as a RHC service. The intention would be to initiate this project following approval of the Health Care Authority's submission of the Medicaid State Plan amendment.

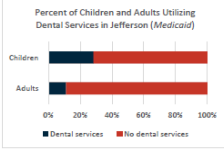
Benefit to the Community
A six-chair dental clinic will be developed one of the existing primary care medical clinics owned by JH, ensuring integration with primary and behavioral health services. This will allow Jefferson County residents to receive whole person care from one medical system.

There are a number of important economic benefits associated with this project.

- Avoidance of expensive and unnecessary ED visits (estimated to cost over \$180,000 per year).
- Better oral health care for patients with chronic diseases yields better outcomes and lower costs.
- Reduction in absenteeism at school and work due to dental pain.
- At least eight to ten skilled jobs would be added to the community.

JH intends on working with strategic partners to advocate for including dental services under the RHC umbrella, and will continue to move toward the development of a six-chair dental facility. For further information, please contact:
Jenn Wharton, Medical Group Director
jwharton@jeffersonhealthcare.org

Percent of Children and Adults Utilizing Dental Services in Jefferson (Medicaid)



Group	Dental services	No dental services
Children	~21%	~79%
Adults	~0%	~100%

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Strategic Plan Review

- Areas of Focus:
 1. Improve the patient care experience
 2. Improve the Employee/ Provider experience
 3. Improve access to Primary Care
 4. Expand Jefferson Healthcare specialty services
 5. Improve the integration of Primary Care, Behavioral Health, and Dental Care
 6. Maintain the access to care improvements resulting from ACA
 7. Pivot to population health management
 8. Improve financial stability
 9. Update Strategic Plan/ Master Site Plan
- Strategic plan facilitator candidate

Advocacy Priorities

- Advocacy Letter
- January 24 legislative visit

Administrator's Report

Jefferson Healthcare 2017 Advocacy Letter

January 18, 2017

Advocacy, 2017

- Advocacy is always important. This year, it is very important.
- Sometimes, a strong defense is your best offense.
- Protect what is worth protecting, focus on the achievable.
- Fight the right fight.

Our most pressing issues

- Preserve access to health care and health coverage for Washingtonians.
- Maintain hospital system financial stability; fund essential services in small rural hospitals as the hospitals transition to new value based payment models.

Our most pressing issues

- Improve the mental health system.
 - Allow expansion for new psychiatric beds.
 - Allow alternatives to Eastern and Western state hospitals.
 - Residential treatment center beds

Our most pressing issues

- Provide tools to combat opioid overuse by enhancing the prescription monitoring system.
- Support Innovative care models by expanding telemedicine use.
- Provide a new payment model for vulnerable critical access hospitals.

Our most pressing issues

- Allow dental services to be included as a cost based service in Rural Health Clinics.
 - Fund Jefferson County as a pilot project

Questions & Comments




Jefferson County- City Of Port Townsend Hazard Mitigation Plan




Why?

- FEMA requires counties to assess & adopt a hazard mitigation plan.
- In the event of a disaster JHC will request resources initially from the County
- By developing an all county plan resources available are clearly defined
- When requests for resources required are outside the scope of Jefferson County then the request rolls to Region 2 (Jefferson, Clallam, & Kitsap Counties)



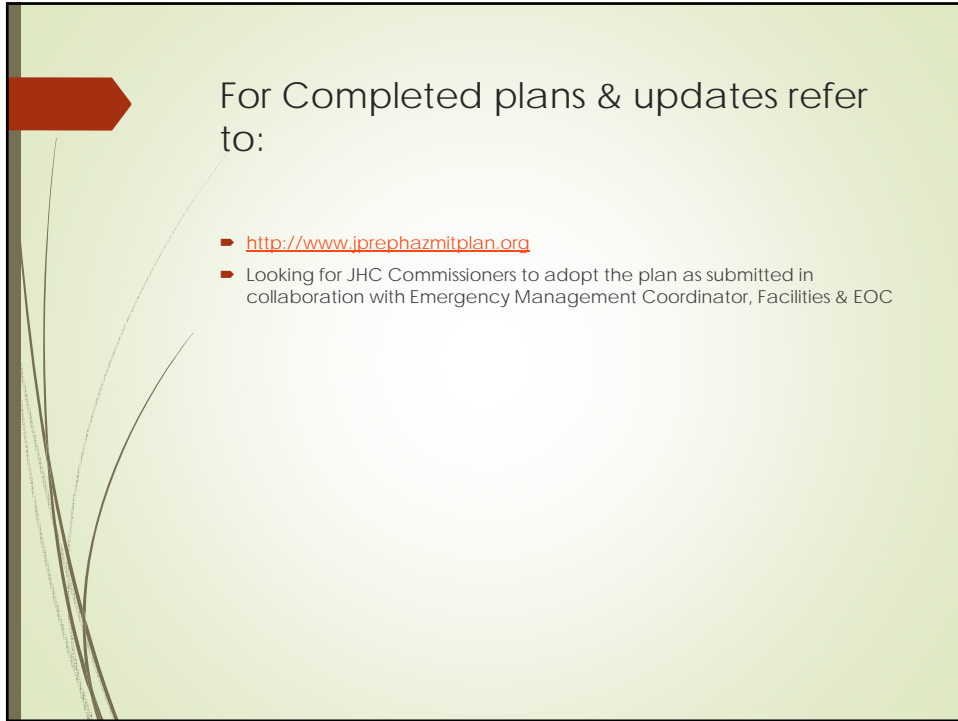
Who?

- All County stakeholders including but not limited to
- JHC
- Water
- Power
- EMS/Fire
- Law Enforcement
- City Administration
- County Administration
- Public Health



What?

- Binders were created and sent to all County Stakeholders to evaluate internally to verify all information & resources are correct
- Revisions were then submitted to the County for updates
- Once all plans have been submitted to the County then the entire plan goes to state for approval.
- Once the State approves it is then submitted to FEMA for adoption



For Completed plans & updates refer to:

- <http://www.jprephazmitplan.org>
- Looking for JHC Commissioners to adopt the plan as submitted in collaboration with Emergency Management Coordinator, Facilities & EOC