Jefferson County Public Hospital District No.2
Board of Commissioners, Regular Session Minutes
Wednesday, April 19, 2017
Victor J. Dirksen Conference Room

Call to Order:
The meeting was called to order at 3:31pm by Commissioner Kolff. Present were Commissioners Buhler, De Leo, Kolff, and Ready. Also present were Mike Glenn, CEO, Hilary Whittington, CFO, Steven Feland, CHRO, Lisa Holt, CAO, Brandie Manuel, Executive Director of Quality and Safety, Jenn Wharton, Executive Director Medical Group, and Alyssa Rodrigues, Administrative Assistant. This meeting was officially audio recorded by Jefferson Healthcare. Commissioner Dressler was excused. Commissioner Buhler assigned Commissioner Kolff as chair for the meeting due to dental issues.

Approve Agenda:
Commissioner Buhler made a motion to approve the agenda. Commissioner Ready seconded.
Action: Motion passed unanimously.

Minutes:
- March 29 Special Session minutes

Commissioner Ready made a motion to approve the March 29 Regular Session Minutes. Commissioner Buhler seconded.
Action: Motion passed unanimously.

Patient Story:
Jackie Mossakowski, CNO, read aloud a letter regarding the patient's orthopedics experience with Dr. Naumann and the solid team work displayed.

Required Approvals:
- Medical Staff Credentials/Appointments/Reappointments
- March Warrants and Adjustments
- Resolution 2017-16 Cancel Warrants
- Resolution 2017-17 Surplus Equipment
- Resolution 2017-18 Cash Drawer Increase

Commissioner De Leo made a motion to approve Medical Staff Credentials/ Appointments/ Reappointments, March Warrants and Adjustment, Resolution 2017-16 Cancel Warrants, Resolution 2017-17 Surplus Equipment, Resolution 2017-18 Cash Drawer Increase as presented. Commissioner Ready seconded the motion.
Action: Motion passed unanimously.

Public Comment:
No public comment was made.

CHIP Interlocal Agreement Resolution 2017-19:
Commissioner Buhler made a motion to adopt resolution 2017-19. Commissioner Ready seconded the motion.

Discussion ensued.

Commissioner Kolff made an amendment that clarifies whenever it says Jefferson County it refers to East Jefferson County and there are two locations in the document where it talks about service area that the CHIP covers. Commissioner De Leo seconded.

Discussion ensued.
Action: Motion passed unanimously.

Commissioner Kolff made a motion to add the word "cost" so it is read per capita cost Commissioner Buhler.
Action: Motion passed unanimously

Discussion ensued.
Action: Main motion passed unanimously

Summary of Community Meetings:
Katie Holmes, facilitator and Mike Glenn, CEO gave a summary of community meetings.

Discussion ensued.

Commissioner Buhler made a motion that under Growth and Innovation having Improving the Health of the Community as a goal and having implementing the CHIP in collaboration with other partners and agencies as one of the strategies. Commissioner Ready seconded.
Action: Motion passed unanimously.
Discussion ensued.

Patient Advocate Report:
Jackie Levin, Patient Advocate, gave a presentation on 1st Quarter Data.

Discussion ensued.

Financial Report:
Hilary Whittington, CFO, presented the February financial report.

Discussion ensued.

Hilary Whittington, CFO and Erin Coffey, Manager of Patient Access presented on the Patient Financial Experience Task Force.

Discussion ensued.

Administrator's Report:
Mike Glenn, CEO, gave his administrator's report.

Discussion ensued.

Chief Medical Officer Report:
Joe Mattern, CMO excused. No CMO report given.

Board Reports:
Commissioner De Leo attended the April 5 Women's Health Forum. He announced the need expressed for continued support for Jefferson Healthcare's participation in school health clinics. He mentioned there was a concern that teen pregnancy was not in the CHIP because of the low rate in Jefferson County. People are concerned since it is not on the CHIP it will fall of the radar and teen pregnancy may rise. Also if we have any political capital to work towards maintaining Title 10 funding for Family Planning and Take Charge Program.

Commissioner Kolff announced that Commissioner Ready and himself had attended the Green Committee and was excited about the enthusiasm and what they have already implemented and that he appreciated the energy and innovations that the committee is taking on.

Commissioner Kolff recessed for a 7 minute break at 5:48pm.
Commissioner Kolff reconvened the meeting at 5:55pm.

Executive Session:
Commissioner Kolff announced they will go into executive session to discuss potential litigation with legal counsel Jay Rodne at 5:55pm. No action will be taken.

Commissioner Kolff came out of executive session at 6:10pm.

Conclude:
Commissioner Buhler made a motion to conclude the meeting. Commissioner Ready seconded the motion.
Action: Motion passed unanimously.

Meeting concluded at 6:10pm.

Approved by the Commission:

President of Commission: Jill Buhler _____

Secretary of Commission: Marie Dressler _____

Patient Advocate
1st Quarter Report 2017

Jackie Levin RN, MS
Patient Advocate

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Office of Patient Advocate

- Patient Concerns
  - Work with Leaders on resolutions, problem solving,
  - Reviews as needed with Risk Manager and CNO
- Committees
  - HEI, Ethics, Surgery, Patient/Staff Safety,
  - Palliative Care,
- Service Excellence & Safety Programs
  - Mindfulness: Staff, Community, Cardiac Rehab Classes
  - CARE, TeamSTEPPS

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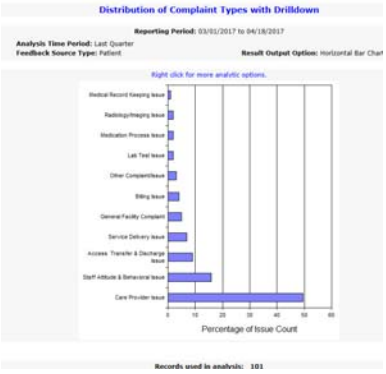
Distribution of 1st Q Concerns (# 76)



Records used in analysis: 101

COMPLAINT ISSUE TYPE	PERCENTAGE	ISSUE COUNT
Access Transfer & Discharge Issue	8.9	9
Billing Issue	4	4
Care Provider Issue	49.5	50
General Facility Complaint	5	5
Lab Test Issue	2	2
Medical Record Keeping Issue	1	1
Medication Process Issue	2	2
Other Complaint/Issue	3	3
Radiology/Imaging Issue	2	2
Service Delivery Issue	6.9	7
Staff Attitude & Behavioral Issue	15.8	16

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4th Quarter 2016 by Issue

Records used in analysis: 78

NO	COMPLAINT ISSUE TYPE	PERCENTAGE	ISSUE COUNT
1	Access Transfer & Discharge Issue	7.7	6
2	Billing Issue	2.6	2
3	Care Provider Issue	28.2	22
4	Complaint Handling Issue	1.3	1
5	General Facility Complaint	1.3	1
6	Healthcare Coverage Issue	2.6	2
7	Lab Test Issue	7.7	6
8	Medical Record Keeping Issue	1.3	1
9	Other Complaint/Issue	9	7
10	Privacy/Information Access Issue	1.3	1
11	Radiology/Imaging Issue	3.8	3
12	Service Delivery Issue	19.2	15
13	Staff Attitude and Behavioral Issue	14.1	11

Note: Tabular Reports show a maximum of 1000 rows on this display pane. You can view the complete report by opening it

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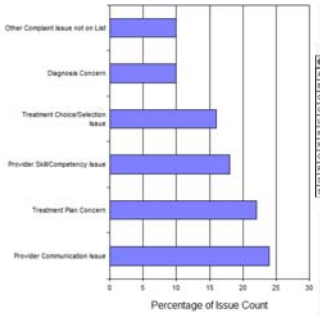
Drill Down by Provider Concerns (#50 Records)



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Service Delivery Issue	6.9	7
Staff Attitude & Behavioral Issue	15.8	16

Records used in analysis: 50

COMPLAINT ISSUE NATURE	PERCENTAGE	ISSUE COUNT
Diagnosis Concern	10	5
Other Complaint Issue not on List	10	5
Provider Communication Issue	24	12
Provider Skill/Competency Issue	18	9
Treatment Choice/Selection Issue	16	8
Treatment Plan Concern	22	11

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Concerns by Area/total # concerns

	1st Q 2017	Q 4 2016	Q 3 2016	Q 2 2016	Q 1 2016	Q 4 2015	Q 32015	Q 2 2015
ED	18/76	13/57	11/88	18/54	13/52	15/61	5/47	10/42
All PCP/WI Clinics	27/76	17/57	46/88	24/54	21/52	34/61	29/47	17/42
ACU/OBs	7/76	2/57	4/88	5/ 54	3/52	2/61	3/47	5/42
Others: Lab, DI, Reg, Rehab, Sp.Clinics	20/76	12/57	3/88	6/54	14/52	10/61	7/47	10/42
ACS	4/76	12/57	1/88	1/48	1/52			

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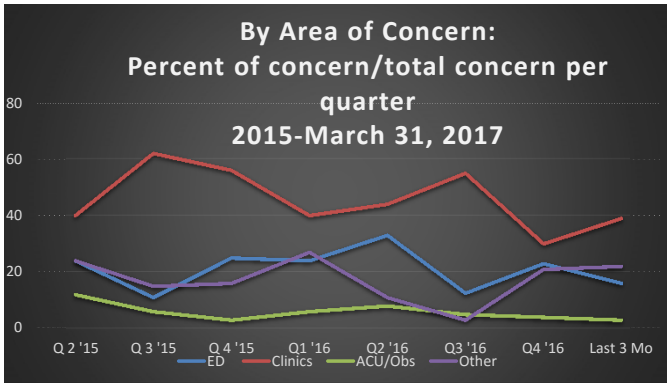

	Q 2 '15	Q 3 '15	Q 4 '15	Q1 '16	Q2 '16	Q3 '16	Q4 '16	1st Q
ED	24	11	25	24	33	12.5	23	18
Clinics	40	62	56	40	44	55	30	27
ACU/Obs	12	6	3	6	8	5	4	7
Other	24	15	16	27	11	3	21	20

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Acknowledgement to Closure Time Data 1st Quarter 2017 76 Patient Calls

	Days to Acknowledgement		Days to Closure	Reasons beyond 7 days Acknowledgment /30 days resolution
High	15(1)	High	77	Peer Review, complex case,
Low	0	Low	0	
Ave	2.7	Ave	20	
			Number > 30 D	9
			Number > 50 D	6

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Patient Advocates and Performance Improvement

PI Plan:

1. Patient Rounding Inpatient and Clinics
2. Patient Feedback Forums
   1. Inpatient
   2. Surgery
   3. Emergency Department
3. PFAC Members on Hospital Committees

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Patient Family Advisory Council

- Increased number of community members to 8 (was 5)
- PFAC Involvement
  - Ethics Committee
  - MyChart Patient Education
  - Quiet at Night—2nd overnight saw improvements
  - Patient-Family Handbook Revision-near completion
  - Beryl Institute

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Patient Advocate and Strategic Plan

Strategic Plan: Enhancing Patient Experience

1. Mindfulness
2. C.A.R.E. Program
3. TeamSTEPPS
4. PFAC

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C.A.R.E. And Mindfulness Courses ATTENDANCE 2017

CARE Program Departments	**4 courses 50 Attendees**	**Mindfulness**	**3 Classes 40 Students 2016 and 2017**	**Mindfulness included in TeamSTEPPS**
ACU/ICU	Administration	ACU/ICU	Administration	
ED	Financial Coun.	ED	Financial Coun.	
Registration	Rehab	Registration	Rehab	
Bio-Med	MSS/Onc	Nursing Admin	JHSA	
HR	JHSA	Primary Care Clinics	Surgery	
Sleep	Surgery	Ortho	HIM/Business	

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Service Excellence Programs

TeamSTEPPS **C.A.R.E**

PFAC **Mindfulness**

TeamSTEPPS: Program to enhance patient safety and teamwork

C.A.R.E: Treating the patient with care focuses on how to enhance 1:1 communication

Mindfulness: Taking care of one's inner well-being

PFAC: Listening to the voice of the patient.

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Questions?

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Finance Report – March 2017

April 19, 2017

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UPCOMING CHANGES

Image

- New colors
- More dynamic graphs and charts

Content

- Additional Statistics
- Additional Data
- Monthly Service Line Highlights and Lowlights

Knowledge Sharing

- EHR
- Depreciation
- Contractual
- Prepaid
- Checks Writing Process/AP
- Payroll/FTEs

OVERVIEW OF MARCH

High fluctuation in inpatient census.
We are actively working to understand the low swing bed volumes.

Very expensive month for cash – and dip in days of cash – purchased 1010 Sheridan and paying cash for L2 build out.

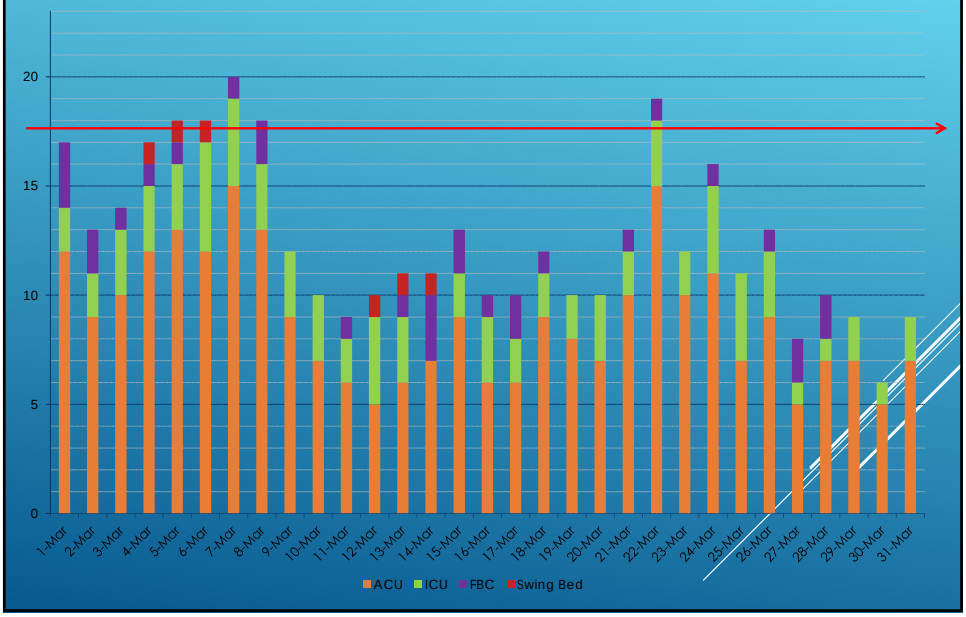
We have stepped into the 2017 expense model, though the revenues are taking some time to catch up.

Recognized revenue from the Nuclear Camera donation from the Jefferson Healthcare Foundation.

Overall, February was a net neutral month.

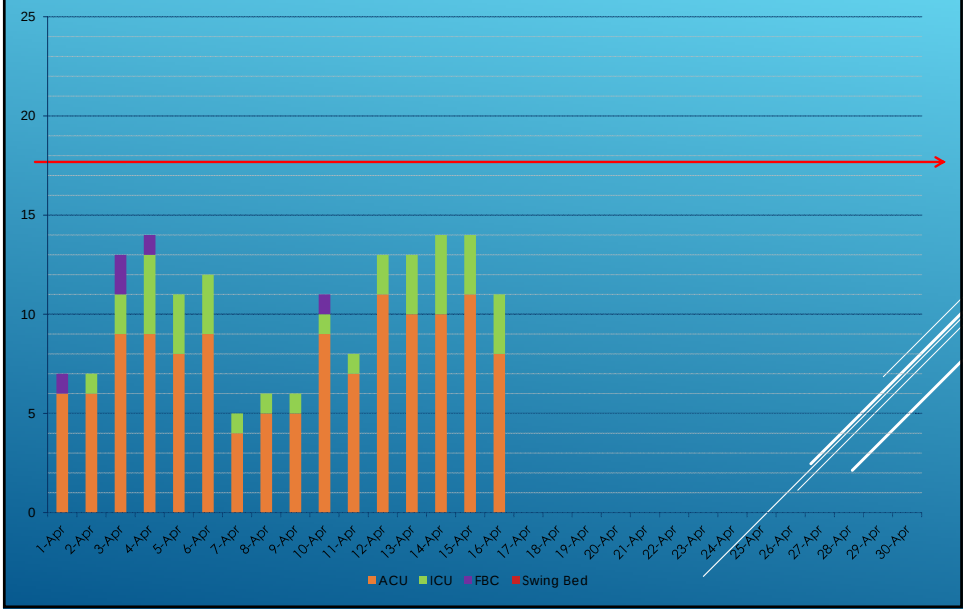
MARCH CENSUS

AVERAGE DAILY CENSUS = 12.55



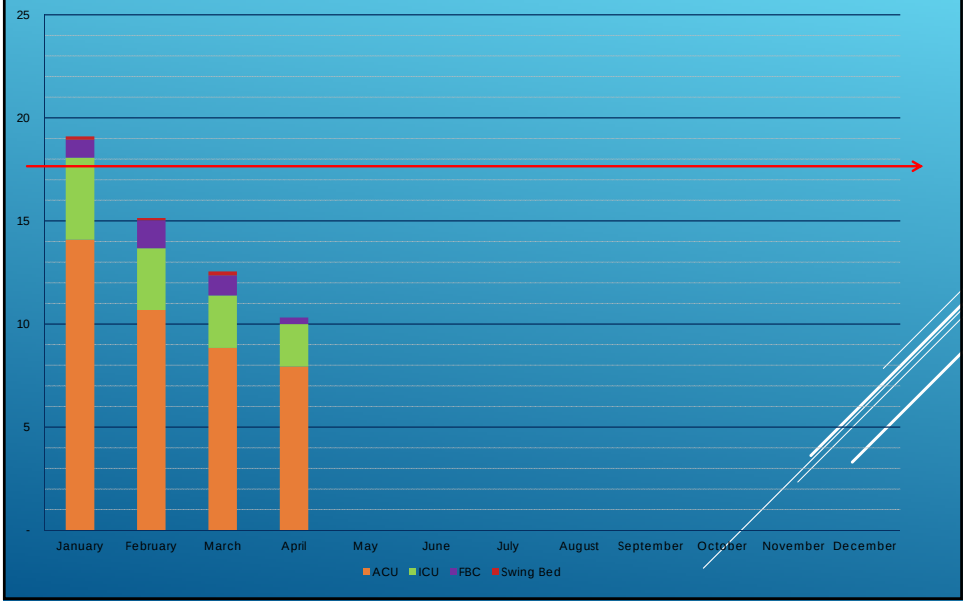
APRIL CENSUS

AVERAGE DAILY CENSUS = 10.31



YEAR TO DATE CENSUS

AVERAGE DAILY CENSUS = 14.28



OPERATING STATISTICS

MARCH 2017

STATISTIC DESCRIPTION	MARCH BUDGET	MARCH ACTUAL	QUANTITY VARIANCE	% VARIANCE
ICU PATIENT DAYS (IP + OBSERVATION, MIDNIGHT CENSUS)	82	80	(2)	-2%
ACU PATIENT DAYS (IP + OBSERVATION, MIDNIGHT CENSUS)	316	293	(23)	-7%
SWING IP PATIENT DAYS (MIDNIGHT CENSUS)	59	4	(55)	-93%
PATIENT DAYS (ACU, ICU, SWING), INCLUDES OBSERVATION	458	377	(81)	-18%
BIRTHS	9	11	2	22%
SURGERY MINUTES (IN OR)	8,563	10,392	1,829	21%
SPECIAL PROCEDURE CASES	127	59	(68)	-54%
RECOVERY MINUTES	6,738	8,251	1,513	22%
LAB BILLABLE TESTS	17,306	18,308	1,002	6%
TOTAL BLOOD BANK UNITS MATCHED	47	64	17	36%
TOTAL RADIOLOGY TESTS	1,438	1,606	168	12%
MRIs COMPLETED	165	177	12	7%
CT SCANS COMPLETED	375	356	(19)	-5%
ULTRASOUNDS COMPLETED	261	300	39	15%
NUC MED TESTS	39	43	4	10%
TOTAL DIAGNOSTIC IMAGING TESTS	2,278	2,482	204	9%

OPERATING STATISTICS

MARCH 2017

STATISTIC DESCRIPTION	MARCH BUDGET	MARCH ACTUAL	QUANTITY VARIANCE	% VARIANCE
TOTAL PHARMACY UNITS	11,280	21,020	9,740	86%
TOTAL RESPIRATORY THERAPY PROCEDURES	2,897	2,983	86	3%
ER CENSUS	1,021	1,076	55	5%
SOCO PATIENT VISITS (ENCOUNTERS)	177	224	47	27%
JHPC & JMPG PATIENT VISITS (ENCOUNTERS)	2,564	2,765	201	8%
JHFM PATIENT VISITS (ENCOUNTERS)	1,287	1,376	89	7%
JHIM PATIENT VISITS (ENCOUNTERS)	607	875	268	44%
TOTAL RURAL HEALTH CLINIC VISITS	4,635	5,240	605	13%
JHPLC PATIENT VISITS (ENCOUNTERS)	475	573	98	21%
GEN SURG PATIENT VISITS	350	324	(26)	-7%
ORTHO PATIENT VISITS	1,042	663	(379)	-36%
INFUSION CENTER VISITS	469	577	108	23%
WOUND CARE VISITS	313	286	(27)	-9%
ONCOLOGY VISITS	395	314	(81)	-21%
ANTI COAG VISITS	552	538	(14)	-3%
SLEEP CLINIC VISITS	212	162	(50)	-24%
CARDIOLOGY CLINIC	205	189	(16)	-8%

MARCH

REVENUES AND ADJUSTMENTS

	March 2017 Actual	March 2017 Budget	Variance Favorable/ (Unfavorable)	%	March 2017 YTD	March 2017 Budget YTD	Variance Favorable/ (Unfavorable)	%	March 2016 YTD
Gross Revenue									
Inpatient Revenue	3,058,236	3,440,801	(382,565)	-11%	11,920,518	9,989,422	1,931,096	19%	8,361,294
Outpatient Revenue	14,405,508	14,416,995	(11,487)	0%	39,331,367	41,855,789	(2,524,422)	-6%	34,226,830
Total Gross Revenue	17,463,745	17,857,796	(394,052)	-2%	51,251,886	51,845,211	(593,325)	-1%	42,588,124
Revenue Adjustments									
Cost Adjustment Medicaid	1,961,790	2,191,686	229,896	10%	5,295,404	6,362,958	1,067,555	17%	4,951,908
Cost Adjustment Medicare	5,746,785	5,885,349	138,564	2%	17,862,489	17,086,496	(775,993)	-5%	13,825,006
Charity Care	110,803	111,704	900	1%	230,126	324,301	94,175	29%	203,930
Contractual Allowances Other	1,288,342	1,251,241	(37,101)	-3%	3,732,820	3,632,635	(100,185)	-3%	2,824,453
Administrative Adjustments	140,455	20,121	(120,335)	-598%	158,902	58,415	(100,486)	-172%	306,142
Adjust Bad Debt	438,050	264,920	(173,130)	-65%	1,029,587	769,123	(260,464)	-34%	857,262
Total Revenue Adjustments	9,686,226	9,725,020	38,794	0%	28,309,326	28,233,927	(75,399)	0%	22,968,702
Net Patient Service Revenue	7,777,518	8,132,776	(355,258)	-4%	22,942,559	23,611,283	(668,724)	-3%	19,619,422
Other Revenue									
340B Revenue	115,642	260,239	(144,597)	-56%	727,041	755,531	(28,490)	-4%	851,999
Meaningful Use Ehr Incentive	-	3,397	(3,397)	-100%	-	9,863	(9,863)	-100%	-
Other Operating Revenue	128,993	112,961	16,031	14%	326,060	327,953	(1,892)	-1%	229,269
Total Operating Revenues	8,022,152	8,509,373	(487,221)	-6%	23,995,661	24,704,630	(708,969)	-3%	20,700,690

MARCH

EXPENSES, NONOPERATING ACTIVITIES, AND CHANGE IN NET POSITION

	March 2017 Actual	March 2017 Budget	Variance Favorable/ (Unfavorable)	%	March 2017 YTD	March 2017 Budget YTD	Variance Favorable/ (Unfavorable)	%	March 2016 YTD
Operating Expenses									
Salaries And Wages	4,134,799	4,211,112	76,313	2%	11,803,062	12,225,808	422,746	3%	10,043,745
Employee Benefits	1,013,032	1,040,237	27,205	3%	3,019,203	3,020,041	839	0%	2,759,916
Professional Fees	444,813	290,474	(154,339)	-53%	1,204,636	843,312	(361,324)	-43%	943,666
Purchased Services	580,407	539,994	(40,413)	-7%	1,455,638	1,567,724	112,086	7%	1,162,425
Supplies	1,247,796	1,212,418	(35,378)	-3%	3,829,646	3,519,923	(309,723)	-9%	2,746,839
Insurance	51,345	57,753	6,408	11%	146,805	167,671	20,866	12%	166,468
Leases And Rentals	97,164	147,734	50,571	34%	344,690	428,905	84,216	20%	346,229
Depreciation And Amortization	355,890	312,906	(42,984)	-14%	1,052,359	908,436	(143,922)	-16%	1,043,115
Repairs And Maintenance	43,400	77,228	33,828	44%	140,211	224,211	84,000	37%	117,913
Utilities	70,312	78,128	7,815	10%	243,784	226,822	(16,962)	-7%	185,468
Licenses And Taxes	46,410	46,565	155	0%	132,691	135,188	2,497	2%	147,057
Other	113,229	174,830	61,601	35%	396,304	507,571	111,268	22%	409,919
Total Operating Expenses	8,198,597	8,189,379	(9,218)	0%	23,769,029	23,775,613	6,585	0%	20,072,761
Operating Income (Loss)	(176,445)	319,995	(496,439)	-155%	226,632	929,017	(702,385)	-76%	627,930
Non Operating Revenues (Expenses)									
Taxation For Maint Operations	16,661	17,156	(495)	-3%	52,071	49,808	2,262	5%	43,288
Taxation For Debt Service	18,485	19,003	(519)	-3%	55,826	55,171	655	1%	63,410
Investment Income	13,320	6,582	6,738	102%	39,605	19,110	20,495	107%	25,971
Interest Expense	(52,636)	(85,615)	32,979	39%	(157,375)	(248,561)	91,186	37%	(85,357)
Bond Issuance Costs	-	(12,740)	12,740	0%	-	(36,986)	36,986	0%	-
Gain or (Loss) on Disposed Asset	-	-	-	0%	5,500	0	5,500	0%	43,249
Contributions	287,663	11,890	275,773	2319%	297,982	34,521	263,462	763%	12,744
Total Non Operating Revenues (Expenses)	283,493	(43,723)	327,216	748%	293,608	(126,938)	420,546	331%	103,306
Change in Net Position (Loss)	107,048	276,272	(169,224)	-61%	520,241	802,079	(281,838)	-35%	731,236

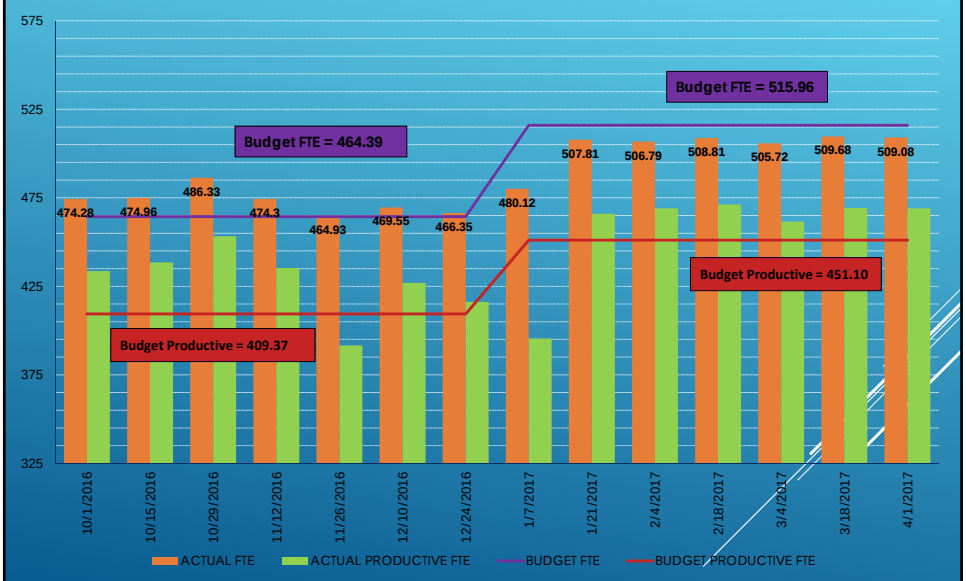
FINANCIAL SNAPSHOT

FEBRUARY, MONTH AND YEAR TO DATE

	March 2017 Actual	March 2017 Budget	Variance Favorable/ (Unfavorable)	%	March 2017 YTD	March 2017 Budget YTD	Variance Favorable/ (Unfavorable)	%	March 2016 YTD
Operating Margin	-2.2%	3.8%	-6.0%	-158.5%	0.9%	3.8%	-2.82%	-74.9%	3.0%
Total margin	1.3%	3.2%	-1.9%	-58.9%	2.2%	3.2%	-1.08%	-33.2%	3.5%
Inpatient gross revenue	3,058,236	3,440,801	(382,565)	-11.1%	11,920,518	9,989,422	1,931,096	19.3%	8,361,294
Outpatient gross revenue	14,405,508	14,416,995	(11,487)	-0.1%	39,331,367	41,855,789	(2,524,422)	-6.0%	34,226,830
Net patient revenue	7,777,518	8,132,776	(355,258)	-4.4%	22,942,559	23,611,283	(668,724)	-2.8%	19,619,422
Deductions as a % of gross revenue	-55.5%	-54.5%	-1.0%	-1.8%	-55.2%	-54.5%	-0.78%	-1.4%	-53.9%
Charity as a % of gross revenue	-0.6%	-0.6%	0.0%	-1.4%	-0.4%	-0.6%	0.18%	28.2%	-0.5%
Bad Debt as a % of gross revenue	-2.5%	-1.5%	-1.0%	-69.1%	-2.0%	-1.5%	-0.53%	-35.4%	-2.0%
Salaries & Benefits as a % of net pt. service rev.	-66.2%	-64.6%	-1.6%	-2.5%	-64.6%	-64.6%	-0.04%	-0.1%	-65.3%

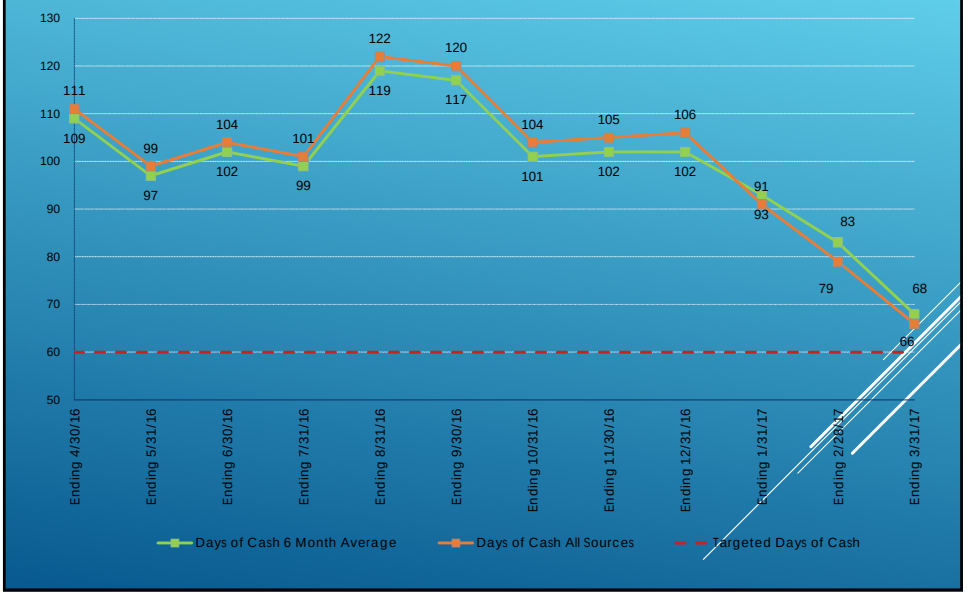
MARCH

FTE TRENDS



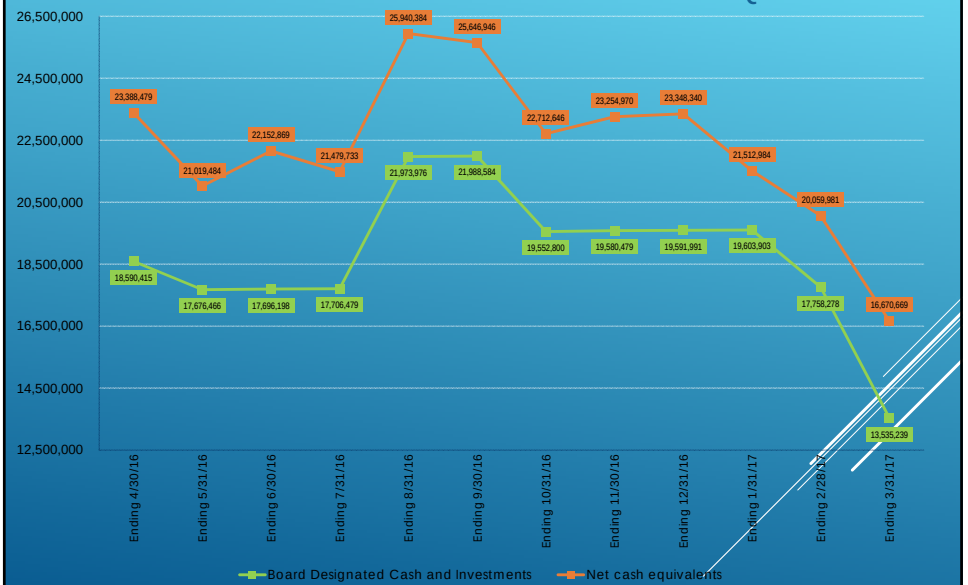
DAYS OF CASH

TOTAL CASH / AVERAGE EXPENDITURES PER DAY



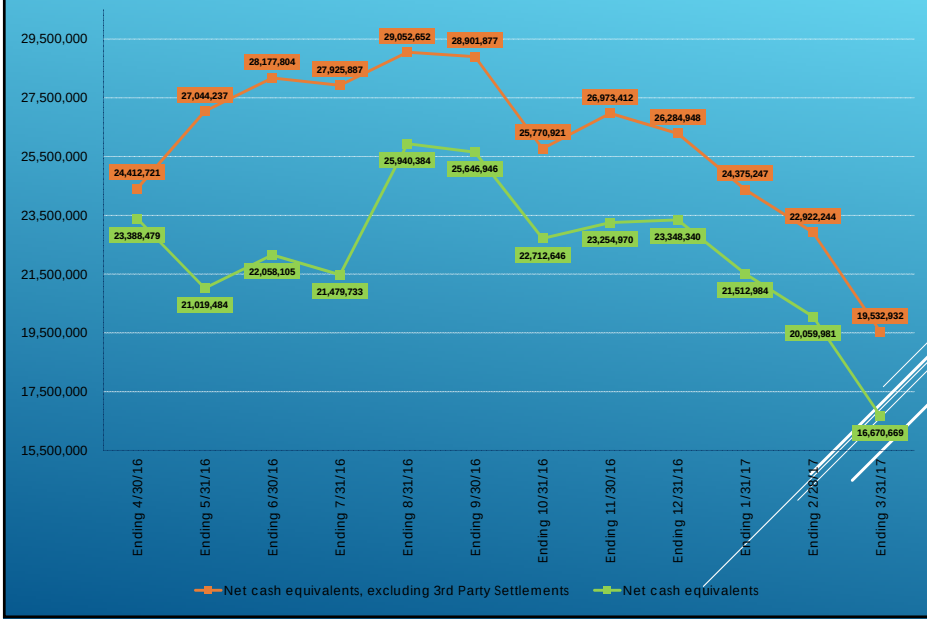
CASH RESERVES

BOARD DESIGNATED AND TOTAL NET CASH EQUIVALENTS

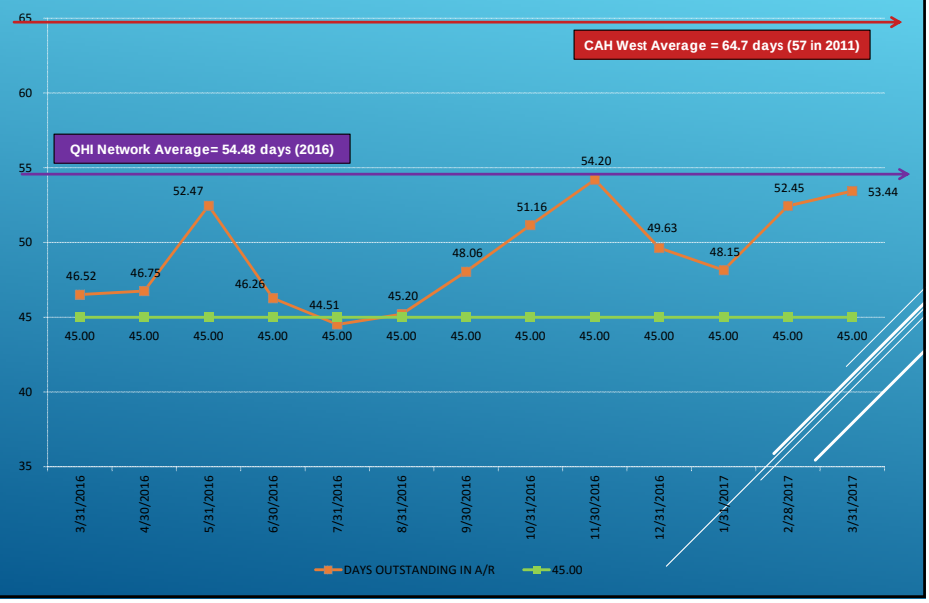


CASH RESERVES

EXCLUDING 3RD PARTY PAYOR SETTLEMENTS



DAYS IN ACCOUNTS RECEIVABLE



2017 BOARD BUDGET TO ACTUAL

Department	Department Description	Rev/Exp	Account	Account Description	March Actual	March Budget	Variance (Favorable)/ Unfavorable	YTD Actual	YTD Budget	YTD Variance (Favorable)/ Unfavorable
8612	BOARD	Exp	600010	MANAGEMENT & SUPERVISION WAGES	5,228.00	4,647.00	581.00	13,115.00	13,493.00	(378.00)
			602300	CONSULT MNGMT FEE	-	-	-	-	-	-
			602500	AUDIT FEES	19,332.00	2,973.00	16,359.00	19,332.00	8,630.00	10,702.00
			604200	CATERING	330.00	99.00	231.00	429.00	287.00	142.00
			604500	OFFICE SUPPLIES	8.00	-	8.00	128.00	-	128.00
			604800	MINOR EQUIPMENT	-	-	-	-	-	-
			604850	COMPUTER EQUIPMENT	-	-	-	-	-	-
			604900	OTHER NON-MEDICAL SUPPLIES	-	-	-	3.00	-	3.00
			606500	OTHER PURCHASED SERVICES	-	849.00	(849.00)	-	2,466.00	(2,466.00)
			608100	LEASES/RENTALS-BUILDINGS	-	-	-	-	-	-
			609200	LICENSE LICENSES AND TAXES	-	-	-	-	-	-
			609400	TRAVEL/MEETINGS/TRAINING	-	1,699.00	(1,699.00)	104.00	4,932.00	(4,828.00)
			609900	MISC OTHER EXP	-	-	-	-	-	-
	BOARD Total				24,898.00	10,267.00	14,631.00	33,111.00	29,808.00	3,303.00
Grand Total					24,898.00	10,267.00	14,631.00	33,111.00	29,808.00	3,303.00

APRIL PREVIEW

REVENUES

- **$15,400,000 in HB charges**
  - **Average: $548,000/day (HB only)**
  - **Budget: $560,500/day**
- **$6,600,000 in HB cash collections**
  - **Average: $220,000/day (HB only)**
  - **Goal: $255,000/day**

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Questions and comments?

PATIENT FINANCIAL EXPERIENCE TASK FORCE

Task force kick off

April 19, 2017

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REVIEWING OUR PRACTICES AROUND CHARITY CARE AND THE COLLECTIONS PROCESS

- Considering the entire financial process, from the patient's perspective
- Identifying barriers in understanding the billing process and financial assistance options
- Recommending changes to improve the overall patient financial experience

A COMMITMENT TO CONTINUOUS IMPROVEMENT … WHY NOW?

- WSHA recently published new financial assistance policies and charity care templates
- The impacts of the ACA have changed the landscape
- Ongoing community input about the difficulty in understanding our collections and charity care policies
- New partnerships with other local resources that can help us promote transparency
- Shifting to value based payments is on the horizon

TASK FORCE MEMBERS:
BALANCED PARTICIPATION FROM JH AND COMMUNITY REPRESENTATION

Jefferson Healthcare employees

- Hilary Whittington, CFO
- Jen Goodwin, Director of Revenue Cycle Operations
- Erin Coffey, Manager of Patient Access & Compliance Officer
- Wenkie Schultz, Financial Counselor

Commissioners

- Tony Deleo
- Matt Ready

Community Members

- Steve Workman
- Susan Whitmire, Kitsap Bank

Patients

- PFAC member
- PFAC member

Legal Resources

- Ariel Speser

THE CHARTER

Project name

- Patient financial experience task force (PFETF)

Leadership

- Chair: Hilary Whittington
- Vice Chair: Erin Coffey
- Admin assistant: Elaina Harland

Expected timeline

- April 19 kick off
- August 2017 recommendations

Meeting frequency

- 6 meetings
- 2 - 4 weeks apart
- 1.5 - 2 hour meetings

Areas affected (stakeholders)

- Patients
- Clinical staff
- Financial counseling team
- Patient access staff
- Community

THE CHARTER CONTINUED

Purpose

- Evaluate and affect our current policies, procedures, communications and tools to create a best practice patient billing experience

Vision statement

- Standardize the patient financial experience to ensure transparency; empower patients with the information they need to make decisions

Relevant organizational goals (strategic plan)

- Demystify healthcare economics

Questions and comments

Thank you.

Administrative Report

April 19, 2017

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Behavioral Health

- Behavioral health crisis/ safe room fully implemented.
- Tele psych service contract in place and several providers are credentialed.
- Jefferson Healthcare/ Discovery Behavioral Health Oversight Committee is active and making progress.

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Dental Health

- Dental services likely to be included as a cost based service in Rural Health Clinics.
- $1,000,000 grant earmarked for Jefferson Healthcare. Dental Clinic is included in Proposed House and Senate Capital budgets.
- Jefferson Healthcare is working on a dental program, space and financial plan associated w/ a 4-6 chair dental suite.
- We also intend on reaching out to the local dental community to ask for input and guidance.

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Jefferson Healthcare Medical Group

- Jenn Wharton, Executive Director Medical Group has her team in place.
  - Tammy Newton, Director of Clinic Operations
  - Natasha McLeron, Clinic Manager
  - Colleen Rodrigues, Clinic Manager
  - Jaimie Hoobler, Clinical Manager
  - Krystal Brock-Farrington, Front Office Supervisor
- Continue to focus on their strategic plan and the Breakthrough Objective Access.
- Increasing appointment openings and growing patient volumes.

Month	2016	2017	Increase	% Increase
January	5123	5722	599	10%
February	5098	5557	459	8%
March	5618	5798	180	3%
Total	**15,839**	**17,077**	**1,238**	**7%**

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Other Key Dates/ Milestones

- Jefferson Healthcare Women's Clinic opened April 3.
- Jefferson Healthcare Surgical Associates will expand into their new space on April 24.
- Jefferson Healthcare Dermatology Clinic scheduled to open in PT June 12 and Port Ludlow August 14.

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Other Key Dates/ Milestones

- Jefferson Healthcare Port Ludlow Clinic is scheduled to open June 26.
- Jefferson Healthcare Sleep Lab is scheduled to relocate to its new 4 bed center no later than May 14.
- ESSB 2nd floor shell space build-out project is substantially completed and we have a certificate of occupancy for the space.

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Medicaid Transformation Demonstration: WA State Innovation Model Funding *("1115 waiver")*

- Required projects:
  - Opioid Response Project
  - Bi-directional integration of primary and behavioral health care
- Optional projects:
  - Community-based care coordination – Pathways HUB model
  - Access to oral health
  - Diversion interventions
  - Maternal and child health
  - Transitions of Care
  - Chronic disease prevention and control

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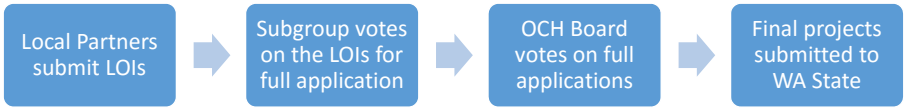
Medicaid Transformation Demonstration: Flow of Project Concepts



Note:
This opportunity is not a grant. It will be pay-for-reporting the first two years and then pay-for-performance.

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Funding Entity	Topic	Role	Status
OCH *Medicaid transformation*	Access to oral health	Lead agency	LOI submitted – Approved for application step
OCH *Medicaid transformation*	Community paramedicine	Lead partner with EJFR	LOI submitted – Approved for application step
OCH *Medicaid transformation*	Community-based care coordination; Chronic disease prevention and control; transitions of care	Partner	LOIs submitted; Variants were approved for applications
DOH Population Health Flex Funding	Housing strategy planning for Jefferson Healthcare	Lead agency	Submitted

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Questions & Comments

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