Call to Order:
The meeting was called to order at 2:00pm by Board Chair Buhler Rienstra. Present by phone and video were Commissioners Dressler, Kolff, McComas and Ready. Also, in attendance by phone were Mike Glenn, CEO, Tyler Freeman, Chief Financial Officer, Jon French, Chief Legal Officer, Jake Davidson, Chief Ancillary & Specialty Services Officer, Caitlin Harrison, Chief Human Resources Officer, Jenn Wharton, Chief Ambulatory and Medical Group Officer, Dr. Joseph Mattern, Chief Medical Officer, and Alyssa Rodrigues, Administrative Assistant. This meeting was officially audio recorded by Jefferson Healthcare.

Approve Agenda:
Commissioner Buhler Rienstra suggested amending the motion to state under April Warrants and Adjustments instead of March Warrants and Adjustments under Required Approvals. Commissioner Dressler made a motion to approve the amended agenda. Commissioner Kolff seconded. 
Action: Motion passed unanimously

Board Governance Education
The Commissioners watched a section of a recorded webinar title, “Governance Clinic” by James Orlikoff, President, Orlikoff and Associates, Inc, regarding board evaluations.

Discussion ensued.

Education Topic:
- 2022-2025 Strategic Plan Update
  Mike Glenn, CEO, provided the 2022-2025 Strategic Plan Update.

Commissioners provided feedback which included:
Goal 1 – To attain health outcomes for all.
• Commissioner Kolff would like to see patient centered included in this goal.

1) Deliver care guided by the best evidence:
• Commissioner Kolff suggested using the word racism and updating sentence to say assess and address health equity within Jefferson Healthcare and our community.

2) Improve transitions of care
• Commissioner Kolff felt the phrase "ensure frictionless encounters" sounds more like a goal than a strategy

2) Harm No Patient
• Commissioner Kolff asked for Mike to send them the five principles of Highly Reliable Organizations.

Goal 2: Deliver a care experience that exceeds patient expectations
1) Define and fully embed radically convenient access to care.
• Commissioner Kolff suggested adding continuously identify and eliminate barriers to care

2) Develop and cultivate a Service Excellence Culture with all employees of Jefferson Healthcare.
• Commissioner Kolff asked to include the board in the first bullet, “Reinstitute Jefferson University for all staff and providers.”

3) Consistently deliver an outstanding experience with every encounter
• Commissioner Dressler asked if there should be something about patient satisfaction regarding the health issue they went to the provider for.
• Commissioner Kolff said the term “outreach” implies we are reaching out to them and add pending “resolution” of patient accounts.

Goal 3: To be an incredible place to work and practice. (No Changes)

Goal 4: to remain an independent, financially strong healthcare organization

4) Develop new facilities to grow existing services and introduce/expand new services to meet community need and maintain financial viability.
• Commissioner Kolff asked if the word facility should be plural

6) Continue to grow services to ensure the community can be served and Jefferson Healthcare remains viable.
• Commissioner Kolff asked if advocating for changing the healthcare system which undervalues CAH and rural hospital districts. Advocating at both the state and federal level as well as advocating a change in the system so that
healthcare is viewed as a right for everyone. These changes would help support to remain an independent, financially strong healthcare organization.

**Goal 5: To support health and promote wellness in the communities we serve**

- Commissioner Ready asked if the Community Health Improvement Plan was still part of the Strategic Plan. Mike will add to this goal.

Commissioners recessed for break at 3:19pm.
Commissioners reconvened from break at 3:30pm.

**Minutes:**
- April 28, 2021 Regular Session Minutes

Commissioner Dressler made a motion to approve the April 28, 2021 Regular Session minutes. Commissioner McComas seconded.
**Action:** Motion passed unanimously.

**Required Approvals:** Action Requested
- April Warrants and Adjustments
- Medical Staff Credentials/Appointments/Reappointments

Commissioner Dressler made a motion to approve the April Warrants and Adjustments and Medical Staff Credentials/ Appointments/ Reappointments. Commissioner Kolff seconded.
**Action:** motion passed unanimously.

**Patient Advocate Report:** Jackie Levin, RN
Jackie Levin, RN, Patient Advocate presented the 1st quarter Patient Advocate Report.

Discussion ensued.

**Financial Report:**
Tyler Freeman, CFO, presented the April Financial Report.

Discussion ensued.

**Administrative Report**
Mike Glenn, CEO, presented the May Administrative report.

Discussion ensued

**CMO Report**
Dr. Joe Mattern, CMO provided the CMO report which included COVID-19 Community Prevalence, Visitor Policy, COVID-19 Cases and Vaccine, Vaccine Hesitancy, Vaccine
Integration, COVID-19 De-escalation, Masking, Pre-Procedure Testing, Medical Staff Changes and Behavioral Health.

Discussion ensued.

**Board Business:**
- Board of Health Report
  Commissioner Kolff provided a Board of Health report which included Needle Exchange Program, Grants for WIC families, pollution sources, promoting breast feeding, Entheogenic plant use by adults and Social Determinants of Health training.

Commissioner Buhler Rienstra thanked Commissioner Kolff for his work on the Board of Health as a representative of Jefferson Healthcare Board of Commissioners.

Commissioner Dressler thanked all the staff for what they do. Commissioner McComas seconded and shared he had enjoyed being able to participate in the activities of Hospital Week.

Commissioner Kolff was delighted to say he was happy Commissioner Dressler and Kolff will be able to be apart of the board for another six years.

**Meeting Evaluation:**
Commissioners evaluated the meeting.

**Conclude:**
Commissioner Dressler made a motion to conclude the meeting. Commissioner Kolff seconded.

**Action:** Motion passed unanimously.

Meeting concluded at 5:17pm.

Approved by the Commission:

Chair of Commission: Jill Buhler Rienstra _________________________________
Secretary of Commission: Marie Dressler _________________________________
Jefferson Healthcare
Strategic Plan
2022-2025
(DRAFT)
Objective:

To be the highest performing rural healthcare system and critical access hospital in the country.
1. To attain excellent health outcomes for all.
2. To deliver a care experience that exceeds patient expectations.
3. To be an incredible place to work and practice.
4. To remain an independent, financially strong healthcare organization.
5. To support health and promote wellness in the communities we serve.
Goal #1: To attain excellent health outcomes for all.

Strategies:

1. Deliver care guided by the best evidence.
   • Provide evidence based, best practice clinical care.
   • Enhance the use of technology for improving patient outcomes.
   • Assess and address health equity with Jefferson Healthcare and our community.

2. Improve transitions of care.
   • Ensure effective, reliable and efficient handoffs, transition and patient discharges.
   • Optimize the referral process.
   • Ensure frictionless patient navigation.
Goal #1: To attain excellent health outcomes for all.

Strategies:

3. Harm No Patient
   • Achieve zero preventable harms by implementing the five principles of Highly Reliable Organizations (HROs)
   • Resume LEAN to ensure the availability and hospital wide deployment of continuous process improvement tools.
   • Leverage data and analytics to evaluate the effectiveness of systems, predict gaps, and guide the delivery of care.
Goal #2: To deliver a care experience that exceeds patient expectations.

Strategies:

1. Define and fully embed radically convenient access to care.
   - Eliminate barriers to care.
   - Leverage technology to enable patient to monitor, schedule and seek care online.
   - Create a culture that promotes and an infrastructure that supports access to care.
     •
     •
Goal #2: To deliver a care experience that exceeds patient expectations.

Strategies:

2. Develop and cultivate a Service Excellence Culture with all employees of Jefferson Healthcare.
   • Reinstitute Jefferson University for all staff and providers.
   • Develop a Jefferson Healthcare Service Excellence scorecard to monitor patient satisfaction performance and benchmark with other organizations.


Goal #2: To deliver a care experience that exceeds patient expectations.

Strategies:

3. Consistently deliver an outstanding experience with every encounter.
   • Personalize the patients experience with every encounter.
   • Deliver consistent, intuitive and inviting service standards across all of Jefferson Healthcare.
   • Define patient care experience continuum starting with initial patient outreach ending with patient accounts.
Goal #3: To be an incredible place to work and practice.

Strategies:

1. Attract and select high performers that exemplify the Jefferson Healthcare way.
   - Define the Jefferson Healthcare way for patients, staff, providers and the community.
   - Focus on interviewing and onboarding to always hire and develop the best candidate.
   - Invest in diversity training.
Goal #3: To be an incredible place to work and practice.

Strategies:

2. Develop and retain high performers.
   • Invest in training and development that hardwires the Jefferson Healthcare experience.
   • Ensure a culture and infrastructure that is professionally challenging and personally supportive for all employees.

3. Ensure the organization has high performing leaders.
   • Create and model high performance leadership principles.
   • Invest in continuous training and development of all leaders.
Goal #3: To be an incredible place to work and practice.

Strategies:

4. Support providers in a thriving, rewarding practice.
   • Create optimal care teams.
   • Implement technology that supports the provider practice.
   • Redesign medical staff governance to bridge medical staff/medical group dynamics and promote effective medical staff leadership.
Goal #4: To remain an independent, financially strong healthcare organization.

Strategies:

1. **Respond to a changing healthcare environment.**
   - Create a roadmap to value-based care.
   - Create and operationalize COVID-19 financial recovery.

2. **Identify and confront market forces that may challenge Jefferson Healthcare’s independence.**
Goal #4: To remain an independent, financially strong healthcare organization.

Strategies:

3. Improve value by improving the efficiency of care delivery.
   - Reduce waste and unnecessary expense by ensuring leaders have a strong working knowledge of healthcare finances.
   - Deliver training and tutorials that deepen our leaders’ proficiency with healthcare finance; meet them where they are.
   - Develop tools for comprehensive monthly reporting and analysis that drives action to improve.

4. Develop new facilities to grow existing services and introduce/expand new services to meet community need and maintain financial viability.
   - Develop facility to meet immediate need for additional specialty clinic space and ambulatory surgery suites.
   - Complete Master Site Plan to include concept designs for ‘65 building replacement project.
Goal #4: To remain an independent, financially strong healthcare organization.

Strategies:

5. Maximize capture rate of gross revenue (charges) and net revenues (cash).
   - Develop toolkits for leaders and providers to understand the impacts of all steps of revenue cycle activities.
   - Optimize clinical documentation and feedback for providers.
   - Enhance active denial and error management strategies.
Goal #4: To remain an independent, financially strong healthcare organization.

Strategies:

6. Continue to grow services to ensure the community can be served and Jefferson Healthcare remains viable.
   • Expand the array of specialty services we offer to our community.
   • Ensure the community seeks care locally by understanding and addressing their needs.
Goal #5: To support health and promote wellness in the communities we serve.

Strategies:

1. Strengthen our position as an anchor of the community.
   - Maintain and build new relationships with organizations that promote the community’s health.
   - Recognize the opportunity of anchor institutions and the impact they have on their community.
Goal #5: To support health and promote wellness in the communities we serve.

Strategies:

2. Demystify healthcare economics.
   • Provide price estimation tools for patients.
   • Optimize use of MyChart for improved engagement with patients and easier bill payment.
   • Create a financial counseling/advocacy experience that informs and supports all patients.
Jefferson Healthcare Strategic Plan
Development and Completion Process

May 26  Present draft plan to Jefferson Healthcare Board of Commissioners
June 15  Virtual Community Forum
June 17  Virtual Community Forum
June 23  Present summary of Community Input and feedback to Board of Commissioners
June 29  Present draft plan to Jefferson Healthcare Leadership group
August 3  Full Day SLG Retreat
August 17 Full Day SLG Retreat
September 29 Present Draft plan to Board of Commissioners for final comments
October 27 Present plan to Board of Commissioners for approval
2022-2025 Strategic Plan Planning Process

- 1st Board Presentation - high-level review of rough draft 2022-2025 Strategic Plan.
- Series of Community Outreach meetings via TEAMS seeking input on the Plan.
- 2nd Board Presentation - review Strategic Plan draft.
- 3rd Board Presentation - Strategic Plan final draft.
- 4th Board Presentation - Approve Strategic Plan final draft.
Patient Advocate Q1 2021 Report

- Responsiveness to Patient Feedback
- Distribution of Care Provider Concerns
- LGBTQ Health Equity Task Force
- Trends by Service Area
- Resolved Common Concerns
Responding to Patient Concerns, Q1 2021

- **97 concerns reported**
- **90 patient navigation calls**

15% increase in Navigation Calls over Q4 '20
29% increase in Concerns over Q4 '20
Responding to Patient Concerns, Q4 2020

1.7 average days to acknowledgement
High: 7 -- Low: 0

18.4 average days to resolution
High: >30 (5) -- Low: 0

Average days to resolution increased by 5.2 days (39%) with 22% increase in all calls to Patient Advocate Office.
Concerns per 1,000 visits

ED, EC, PC

- 13% increase in Emergency Department concerns this quarter
- Express Clinic slight tic downward (5%)
- Primary Care reduced by 22%
- Provider communication remains main issue
Types of Concerns

Significant decrease in Q2 2020 mirrors decrease in patient volumes

Care Provider concerns highest

28% increase in Q1 from Q4
- **Care provider** concerns accounted **55%** of patient concerns in Q1 2021.
- **28%** increase from Q4

**Actions Taken:**
- Meeting the new providers --- learn our process
- Practice Managers' support in concern process
- Work with Executive Director Dan Z

### Q1 2021 Care Provider Concerns by Type

<table>
<thead>
<tr>
<th>Category</th>
<th>Q1 2021</th>
<th>Q4 2020</th>
</tr>
</thead>
<tbody>
<tr>
<td>Communication</td>
<td>19</td>
<td>13</td>
</tr>
<tr>
<td>Skill/Competency</td>
<td>7</td>
<td>4</td>
</tr>
<tr>
<td>RX Choice</td>
<td>7</td>
<td>5</td>
</tr>
<tr>
<td>RX Plan/Selection</td>
<td>9</td>
<td>7</td>
</tr>
<tr>
<td>Diagnosis</td>
<td>8</td>
<td>5</td>
</tr>
</tbody>
</table>
Types of Concerns:

Access & Service Delivery

- Focused on access-related concerns in Q1 2021
  - Delayed Referral Processing
  - Medication renewals
  - Time to New Patient Appointments
  - Improved access for Transgender patients
HEI Award Application

June is Pride Month

LGBTQIA+ Task Force

June 16th 2021
Pride Day at JH

Education:
Brown Bag Lunch 7/14/21
With Beau Ohlgren

LGBTQ Taskforce goals:
Front-line staff training
Increase community representation TF & PFAC
Express, ED and Inpatient Trends

Service Area Trend
Service Area Trends

# of Concerns

Primary and Specialty Clinic Trends

- Dip in Q1 and Q2 mirrors decrease in # of visits
- Increase in # of calls but a decrease in #/1000
- Decrease in Specialty Clinic by # Concerns
Service Area Trends

Specialty Clinic Concerns per 1,000 visits

- Q1 2019: 1
- Q2 2019: 1.04
- Q3 2019: 1.7
- Q4 2019: 1.9
- Q1 2020: 1.65
- Q2 2020: 1.9
- Q3 2020: 2.3
- Q4 2020: 1.78
- Q1 2021: 1.9
Service Area Trends

Ancillary and Other Services Trends

- Registration
- Laboratory
- Diagnostic Imaging
- Rehab
- Dietary
- Billing
COVID-19
Common Concerns

Resolved: Common Pandemic Concerns

- Temporary Visitor Policy Update
- Screening Station Wait Times and Mask Issues
  - Interim Supervisor assisting with concerns
  - Temperature Screening Kiosk
Questions?
### April 2021
### Operating Statistics

<table>
<thead>
<tr>
<th>STATISTIC DESCRIPTION</th>
<th>APRIL 2021</th>
<th>APRIL 2020</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>MO ACTUAL</td>
<td>MO BUDGET</td>
</tr>
<tr>
<td>FTEs - TOTAL (AVG)</td>
<td>609</td>
<td>625</td>
</tr>
<tr>
<td>ADJUSTED PATIENT DAYS</td>
<td>2,864</td>
<td>2,161</td>
</tr>
<tr>
<td>ICU PATIENT DAYS (IP + OBSERVATION, MIDNIGHT CENSUS)</td>
<td>68</td>
<td>73</td>
</tr>
<tr>
<td>ACU PATIENT DAYS (IP + OBSERVATION, MIDNIGHT CENSUS)</td>
<td>256</td>
<td>320</td>
</tr>
<tr>
<td>PATIENT DAYS (ACU, ICU, SWING), INCLUDES OBSERVATION</td>
<td>338</td>
<td>415</td>
</tr>
<tr>
<td>SURGERY CASES (IN OR)</td>
<td>143</td>
<td>123</td>
</tr>
<tr>
<td>SPECIAL PROCEDURE CASES</td>
<td>68</td>
<td>75</td>
</tr>
<tr>
<td>LAB BILLABLE TESTS</td>
<td>21,799</td>
<td>20,874</td>
</tr>
<tr>
<td>TOTAL DIAGNOSTIC IMAGING TESTS</td>
<td>3,162</td>
<td>3,046</td>
</tr>
<tr>
<td>PHARMACY MDS DISPENSED</td>
<td>19,158</td>
<td>23,663</td>
</tr>
<tr>
<td>RESPIRATORY THERAPY PROCEDURES</td>
<td>2,781</td>
<td>3,607</td>
</tr>
<tr>
<td>REHAB/PT/OT/ST RVUs</td>
<td>9,194</td>
<td>8,920</td>
</tr>
<tr>
<td>ER CENSUS</td>
<td>881</td>
<td>1,074</td>
</tr>
<tr>
<td>DENTAL CLINIC</td>
<td>424</td>
<td>385</td>
</tr>
<tr>
<td>TOTAL RURAL HEALTH CLINIC VISITS</td>
<td>6,081</td>
<td>6,261</td>
</tr>
<tr>
<td>TOTAL SPECIALTY CLINIC VISITS</td>
<td>3,471</td>
<td>3,348</td>
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</table>
### Operating Revenue

<table>
<thead>
<tr>
<th></th>
<th>April 2021 Actual</th>
<th>April 2021 Budget</th>
<th>Variance Favorable/ (Unfavorable)</th>
<th>April 2021 YTD</th>
<th>April 2021 Budget YTD</th>
<th>Variance Favorable/ (Unfavorable)</th>
<th>%</th>
<th>April 2020 YTD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gross Patient Service Revenue</td>
<td>24,924,971</td>
<td>23,715,243</td>
<td>1,209,728 5%</td>
<td>95,840,651</td>
<td>94,860,974</td>
<td>979,677 1%</td>
<td></td>
<td>75,319,910</td>
</tr>
<tr>
<td>Revenue Adjustments</td>
<td>13,245,093</td>
<td>12,616,123</td>
<td>(628,970) -5%</td>
<td>50,851,164</td>
<td>50,464,491</td>
<td>(386,673) -1%</td>
<td></td>
<td>40,876,853</td>
</tr>
<tr>
<td>Charity Care Adjustments</td>
<td>252,919</td>
<td>225,526</td>
<td>(27,393) -12%</td>
<td>1,227,535</td>
<td>902,102</td>
<td>(325,433) -36%</td>
<td></td>
<td>941,028</td>
</tr>
<tr>
<td>Net Patient Service Revenue</td>
<td>11,426,960</td>
<td>10,873,595</td>
<td>553,365 5%</td>
<td>43,761,953</td>
<td>43,494,381</td>
<td>267,572 1%</td>
<td></td>
<td>33,502,029</td>
</tr>
<tr>
<td>Other Revenue</td>
<td>608,102</td>
<td>532,096</td>
<td>76,006 14%</td>
<td>1,986,436</td>
<td>2,128,385</td>
<td>(141,949) -7%</td>
<td></td>
<td>4,590,137</td>
</tr>
<tr>
<td><strong>Total Operating Revenue</strong></td>
<td>12,035,062</td>
<td>11,405,691</td>
<td>629,371 6%</td>
<td>45,748,389</td>
<td>45,622,765</td>
<td>125,623 0%</td>
<td></td>
<td>38,092,166</td>
</tr>
</tbody>
</table>

### Operating Expenses

<table>
<thead>
<tr>
<th></th>
<th>April 2021 Actual</th>
<th>April 2021 Budget</th>
<th>Variance Favorable/ (Unfavorable)</th>
<th>April 2021 YTD</th>
<th>April 2021 Budget YTD</th>
<th>Variance Favorable/ (Unfavorable)</th>
<th>%</th>
<th>April 2020 YTD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Salaries And Wages</td>
<td>5,946,034</td>
<td>5,609,938</td>
<td>(336,096) -6%</td>
<td>23,276,968</td>
<td>22,439,754</td>
<td>(837,214) -4%</td>
<td></td>
<td>21,264,550</td>
</tr>
<tr>
<td>Employee Benefits</td>
<td>1,507,747</td>
<td>1,439,719</td>
<td>(68,028) -5%</td>
<td>5,745,527</td>
<td>5,758,875</td>
<td>13,347 0%</td>
<td></td>
<td>5,060,375</td>
</tr>
<tr>
<td>Other Expenses</td>
<td>3,623,111</td>
<td>4,013,083</td>
<td>389,972 10%</td>
<td>16,196,516</td>
<td>16,052,334</td>
<td>(144,181) -1%</td>
<td></td>
<td>14,931,898</td>
</tr>
<tr>
<td><strong>Total Operating Expenses</strong></td>
<td>11,076,892</td>
<td>11,062,740</td>
<td>(14,152) 0%</td>
<td>45,219,011</td>
<td>44,250,963</td>
<td>(968,048) -2%</td>
<td></td>
<td>41,256,823</td>
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<tr>
<td>Operating Income (Loss)</td>
<td>958,170</td>
<td>342,951</td>
<td>615,219 179%</td>
<td>529,378</td>
<td>1,371,803</td>
<td>(842,425) -61%</td>
<td>(3,164,657)</td>
<td></td>
</tr>
<tr>
<td>Total Non Operating Revenues (Expenses)</td>
<td>34,129</td>
<td>(483)</td>
<td>34,612 7166%</td>
<td>(35,402)</td>
<td>(1,936)</td>
<td>(33,466) -1729%</td>
<td>(55,971)</td>
<td></td>
</tr>
<tr>
<td>Change in Net Position (Loss)</td>
<td>992,299</td>
<td>342,468</td>
<td>649,831 190%</td>
<td>493,976</td>
<td>1,369,867</td>
<td>(875,891) -64%</td>
<td>(3,220,628)</td>
<td></td>
</tr>
</tbody>
</table>

### Operating Margin

- Operating Margin: 8.0% 3.0% 5.0% 164.8% 1.2% 3.0% -1.85% -61.5% -8.3%
- Total Margin: 8.2% 3.0% 5.2% 174.6% 1.1% 3.0% -1.92% -64.0% -8.5%
- Salaries & Benefits as a % of net pt svc rev: -65.2% -64.8% -0.4% -0.6% -66.3% -64.8% -1.49% -2.3% -78.6%
<table>
<thead>
<tr>
<th>Department</th>
<th>Account</th>
<th>Description</th>
<th>Apr Actual</th>
<th>Apr Budget</th>
<th>Apr Variance</th>
<th>2021 YTD Actual</th>
<th>2021 YTD Budget</th>
<th>YTD Variance</th>
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</thead>
<tbody>
<tr>
<td>BOARD</td>
<td>600010</td>
<td>MANAGEMENT &amp; SUPERVISION WAGES</td>
<td>2,633</td>
<td>4,520</td>
<td>1,887</td>
<td>15,943</td>
<td>18,079</td>
<td>2,136</td>
</tr>
<tr>
<td></td>
<td>601100</td>
<td>BENEFITS FICA</td>
<td>206</td>
<td>275</td>
<td>69</td>
<td>1,173</td>
<td>1,098</td>
<td>(75)</td>
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<tr>
<td></td>
<td>601150</td>
<td>BENEFITS WA F&amp;MLA</td>
<td>4</td>
<td>7</td>
<td>3</td>
<td>23</td>
<td>26</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>601400</td>
<td>BENEFITS MEDICAL INS-UNION</td>
<td>4,880</td>
<td>4,521</td>
<td>(359)</td>
<td>19,518</td>
<td>18,082</td>
<td>(1,436)</td>
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<tr>
<td></td>
<td>601600</td>
<td>BENEFITS RETIREMENT</td>
<td>-</td>
<td>222</td>
<td>222</td>
<td>-</td>
<td>886</td>
<td>886</td>
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<tr>
<td></td>
<td>601900</td>
<td>BENEFITS EMPLOYEE ASSISTANCE</td>
<td>0</td>
<td>8</td>
<td>8</td>
<td>0</td>
<td>33</td>
<td>33</td>
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<tr>
<td></td>
<td>602300</td>
<td>CONSULT MNGMT FEE</td>
<td>-</td>
<td>1,607</td>
<td>1,607</td>
<td>-</td>
<td>6,429</td>
<td>6,429</td>
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<tr>
<td></td>
<td>602500</td>
<td>AUDIT FEES</td>
<td>-</td>
<td>3,714</td>
<td>3,714</td>
<td>-</td>
<td>14,855</td>
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<tr>
<td></td>
<td>604200</td>
<td>CATERING</td>
<td>-</td>
<td>87</td>
<td>87</td>
<td>-</td>
<td>350</td>
<td>350</td>
</tr>
<tr>
<td></td>
<td>604500</td>
<td>OFFICE SUPPLIES</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td></td>
<td>604850</td>
<td>COMPUTER EQUIPMENT</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td></td>
<td>605500</td>
<td>OTHER PURCHASED SERVICES</td>
<td>-</td>
<td>822</td>
<td>822</td>
<td>-</td>
<td>3,288</td>
<td>3,288</td>
</tr>
<tr>
<td></td>
<td>609400</td>
<td>TRAVEL/MEETINGS/TRAINING</td>
<td>-</td>
<td>1,233</td>
<td>1,233</td>
<td>-</td>
<td>4,932</td>
<td>4,932</td>
</tr>
<tr>
<td>BOARD Total</td>
<td></td>
<td></td>
<td>7,722</td>
<td>17,014</td>
<td></td>
<td>9,292</td>
<td>36,657</td>
<td>68,057</td>
</tr>
</tbody>
</table>

**43**
May 2021
Preview – (*as of 0:00 5/25/21)

• $24,450,000 in Projected HB charges
  • Average: $788,710/day (HB only)
  • Budget: $766,899/day
  • 102.8% of Budget

• $9,192,459 in HB cash collections
  • Average: $296,531/day (HB only)
  • Goal: $338,386/day

• 36.3 Days in A/R

• Questions
Administrative Report

May 26, 2021

Mike Glenn, CEO
### COVID-19 VACCINATIONS

<table>
<thead>
<tr>
<th>Category</th>
<th>Details</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Doses administered</td>
<td>Total # doses given &amp; recorded (all time). As of 5/24/2021</td>
<td>25,071</td>
</tr>
<tr>
<td>Patients receiving 1st dose</td>
<td># Patients receiving at least their 1st dose. As of 5/24/2021</td>
<td>12,996</td>
</tr>
<tr>
<td>Patients completing series</td>
<td># Patients receiving all doses in a series. As of 5/24/2021</td>
<td>12,045</td>
</tr>
<tr>
<td>Wasted (all time)</td>
<td>% Doses unviable (40 doses). Uses vials-to-doses factors. As of 5/24/2021</td>
<td>0.13%</td>
</tr>
<tr>
<td>Latest inventory (Pfizer)</td>
<td># Vials from physical inventory. As of 5/24/2021</td>
<td>368 vials</td>
</tr>
<tr>
<td>Latest inventory (Moderna)</td>
<td># Vials from physical inventory. As of 5/24/2021</td>
<td>457 vials</td>
</tr>
<tr>
<td>Latest inventory (Johnson)</td>
<td># Vials from physical inventory. As of 5/24/2021</td>
<td>91 vials</td>
</tr>
<tr>
<td>Doses on hand (all vendors)</td>
<td>Uses vials-to-doses factors. As of 5/24/2021</td>
<td>7,233</td>
</tr>
</tbody>
</table>

#### Daily vaccinations (last 4 weeks)

- Doses administered & recorded by day. As of 5/24/2021

#### Doses administered

Cumulative # doses administered up through each date. Hover for detail. As of 5/24/2021

#### Vaccinations by Zip Code

# Distinct patients receiving one or more doses (all time). As of 5/24/2021

- **Vendor (All)**
- **Dose number (All)**
Patients by 5-year age bands
# Distinct patients receiving one or more doses (all time). Bands start at the age shown and run through the next band. Hover for detail. As of 5/24/2021

Series status
- Pink: Series started
- Blue: Series completed
- Gray: Received no doses

JH employees
Series status for 873 current employees. KPI indicates the percent of employees who are fully vaccinated. Latest completion date 5/20/2021.

Shipments received
# Vials by date of receipt at JH. Color indicates vendor. Hover for detail.

Daily inventory (since 1/14)
# Vials reported in physical inventory at end of day by vendor. Color indicates vendor. Hover for detail. As of 5/24/2021.
## Testing Update

<table>
<thead>
<tr>
<th>Tests</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Tested</td>
<td>20,194</td>
</tr>
<tr>
<td>Negatives</td>
<td>19,873</td>
</tr>
<tr>
<td>Positives</td>
<td>321</td>
</tr>
<tr>
<td>Percentage Positive</td>
<td>1.6%</td>
</tr>
<tr>
<td>Employee Tests</td>
<td>8 positive, 492 negatives</td>
</tr>
</tbody>
</table>
Jefferson Healthcare Volumes

COVID-19 Phone Line and Clinic Visit Volumes

Respiratory nurse line calls and telephone encounters - by week
Last 12 weeks of respiratory phone line call data (bars) and telephone encounters created (line), excluding partial weeks.

Respiratory Clinic visit volumes - by week
Last 12 weeks of visits in the Respiratory Eval Clinic, excluding partial weeks.

Total call volume since launch of triage line
- Inbound Calls: 205,981
- Calls Answered: 164,674
- # Telephone Encounters: 53,752

Total Respiratory Evaluation Clinic visits - all time
- Drive-Through: 11,640
- Office Visit: 4,316
- Total: 15,956
Jefferson Healthcare Volumes

Primary Care variance to budgeted visits
Visit volumes in the five primary care and Dental clinics. Red line indicates weekly visit budget based on 2021 annual budgets. The labels are % volume to budget for the selected clinics.

<table>
<thead>
<tr>
<th>Week</th>
<th>100%</th>
<th>100%</th>
<th>93%</th>
<th>98%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Week of 4/25</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Week of 5/2</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Week of 5/9</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Week of 5/16</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Specialty clinic variance to budgeted visits
Visit volumes in Medical Group’s specialty clinics. Red line indicates week visit budget based on 2021 annual budgets. The labels are % volume to budget for the selected clinics.

<table>
<thead>
<tr>
<th>Week</th>
<th>106%</th>
<th>107%</th>
<th>90%</th>
<th>105%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Week of 4/25</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Week of 5/2</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Week of 5/9</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Week of 5/16</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Includes visits in: Sheridan, Watership, Townsend, Port Ludlow and South County primary care clinics and the Dental Clinic.

Includes visits in: JHSA clinic, Sleep Medicine, Urology, Women's Clinic, Wound Care and the Port Townsend components of Cardiology, Dermatology and Orthopedics (Port Ludlow components, if any, are not included).
Jefferson Healthcare Volumes

Oncology/Infusion variance to target visits
Visit volumes in Oncology Clinic and Infusion Center. Red line indicates weekly visit target based on annual targets. The % labels are the variances of actual to target visits.

Note: This chart was previously called "Hospital Outpatient variance to target visits" and included Wound Clinic, Sleep Clinic and Sleep Study.

Surgical case variance to target cases
Surgical case volumes in the hospital OR. Red line indicates weekly combined case target based on annual targets for endoscopy and surgical services. The % labels are the variances of actual to target surgical case volume.

Includes surgical cases performed in the hospital OR. Does not include the endoscopy suite at JHSA.
Jefferson Healthcare Volumes

Emergency Department and Express Clinic Volume

Week In Focus
Hover over a week below to view underlying data.

9/27/2020
Total: 338
Express Clinic: 128
Emergency Dept: 210

Total Visits, 1/1/2020 to 5/23/2021
Select a department to bring in focus.

Emergency Dept: 14,836
Express Clinic: 9,420

Volumes by Arrival Department and Week, 2020 - 2021
Transition of COVID Services
Jefferson Healthcare/ Jefferson County Partnership

• Compensation for unreimbursed expenses

• Mass Vaccination Sites
  • Jefferson Healthcare Immunization Clinic

• Testing
  • Clinical
  • Community

• COVID Educational Services
  • Nurse Consult Line
May 13, 2021

Mike Glenn, Chief Executive Officer
Jefferson Healthcare
834 Sheridan Street
Port Townsend, WA 98368

RE: County Grant Agreement for Unreimbursed COVID-19 Mass Vaccination Clinic Costs

Dear Mike,

Thank you and Jefferson Healthcare for your heroic and fast action to stand up mass vaccination clinics to protect the people of Jefferson County at a critical time during this COVID-19 pandemic. I am writing to confirm the County’s intent to backfill Jefferson Healthcare’s vaccination clinic cost reimbursement shortfalls using CARES Act funds for an amount up to $350,000 in documented unreimbursed vaccination program costs.

Interim County Administrator Mark McCauley will be coordinating with Jennifer Wharton to prepare the grant agreement, which we intend to enter with Jefferson Healthcare after May 17, 2021.

On behalf of the people of all Jefferson County, I want to thank Jefferson Healthcare for stepping up during the COVID-19 pandemic in this critical way, to protect the health and wellbeing of the community. Because of your actions, Jefferson County has among the highest vaccination rates and lowest COVID transmission rates in Washington State. Your actions have saved lives.

Yours in partnership and gratitude,

[Signature]
Kate Dean, Chair
Jefferson County Board of County Commissioners
Commissioner District 3
Jefferson Healthcare COVID Vaccination Plan

• Express Clinic

• Emergency Department

• Other Clinics
Juneteenth (June 19)

A week of black history inspired music, food and education to celebrate this impactful day in our history.
Questions