*COVID-19 Notice* 
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All meeting attendees, including Board of Commissioners, staff and members of the public shall participate virtually. No physical meeting location will be provided.

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Regular Session Agenda
Wednesday, July 27, 2022

Call to Order: 2:00
Approve Agenda: 2:00

Governance Discussion:
- Generative Governance discussion

Education Topic:
- Critical Access Hospital Annual Report
  - Brandie Manuel, Chief Patient Safety and Quality Officer
- Home Health and Hospice Quarterly Update
  - Tammy Tarsa, Executive Director, Home Health and Hospice

Break: 3:15

Team, Employee, Provider of the Quarter: 3:30

Public Comment: 3:40
Public comments are welcome orally, with a 3-minute limit, or may be submitted via email at commissioners@jeffersonhealthcare.org, or written and addressed to Commissioners at 834 Sheridan Street, Port Townsend, WA 98368. Written submissions must be received by 5:00 pm the day prior to the meeting.

Minutes: Action Requested 3:50
- June 22 Regular Session Minutes (pg. 3-5)
- July 5 Special Session Minutes (pg. 6-7)
- July 13 Special Session Minutes (pg. 8-9)

Required Approvals: Action Requested 4:10
- June Warrants and Adjustments (pg. 10-15)
- Medical Staff Credentials/ Appointments/ Reappointments (pg. 16-18)
- Medical Staff Policies (pg. 19-22)

Quality Report: Brandie Manuel, CPSO 4:20

Financial Report: Mike Glenn, CEO 4:35
Jefferson County Public Hospital District No.2
Board of Commissioners Meeting

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Administrative Report: Mike Glenn, CEO 4:50
- Replacement and Expansion Project

Board Business: 5:05
- Board of Health Report
- Resolution Numbering Adjustment
  - Resolution 2022-03 (A) Union Contracts Ratification
  - Resolution 2022-03 (B) Surplus Equipment

Resolution 2022-08 Ballot Resolution 5:15

Meeting Evaluation: 5:25

Executive Session: 5:30

Conclude: 6:00

This Regular Session will be officially recorded. The times shown in the agenda are estimates only.
Jefferson County Public Hospital District No.2
Board of Commissioners, Regular Session Minutes
Wednesday, June 22, 2022

Call to Order:
The meeting was called to order at 2:02 pm by Board Chair Buhler Rienstra. Present by phone and video were Commissioners Dressler, Kolff, McComas, and Ready. Also, in attendance were Mike Glenn, CEO, Tyler Freeman, Chief Financial Officer, Jake Davidson, Chief Ancillary & Specialty Services Officer, Tina Toner, Chief Nursing Officer, Brandie Manuel, Chief Patient Safety Quality Officer, and Alyssa Rodrigues, Administrative Assistant. This meeting was officially audio recorded by Jefferson Healthcare.

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

Board Governance Education:
- Generative Governance discussion
- Generative Governance discussion is scheduled for July 5, 2022 to discuss Master Site Plan. Commissioner Buhler Rienstra explained that Matt Ellsworth, Executive Director Association of Washington Public Hospital Districts, will explain legal boundaries around board governance and bonds.

Education Topic:
Mr. Ellsworth provided a presentation on the Board’s role with pursuing a bond.

Discussion ensued.

**Break:**
Commissioners recessed for a break at 3:02 pm.
Commissioner reconvened from the break at 3:30 pm.

**Patient Story:**
Tina Toner, Chief Nursing Officer presented the patient story regarding a letter sent in by a patient about Jefferson Healthcare’s 5-star rating for patient experience.

**Public Comment:**
No public comment was made.

**Minutes:**
- May 25, 2022 Special Session Minutes

Commissioner Kolff made a motion to amend minutes under Board of Health report to state “Dr. Berry received the Young Professional of the Year award from the Chamber of Commerce.” Commissioner Dressler seconded.

**Action:** Motion passed unanimously.

Commissioner Kolff made a motion to approve the May 25, 2022, Regular Session Minutes with amendments. Commissioner Dressler seconded.

**Action:** Motion passed unanimously.

**Required Approvals:** Action Requested
- May Warrants and Adjustments
- Resolution 2022-07 Cancelled Warrants
- Medical Staff Credentials/Appointments/Reappointments
- Med Staff Policy Updates

Commissioner Dressler made a motion to approve the May Warrants and Adjustments, Resolution 2022-07 Cancelled Warrants, Medical Staff Credentials/ Appointments/ Reappointments. Commissioner McComas seconded.

**Action:** Motion passed unanimously.

**CHRO Presentation:**
- Resolution 2022-08 Union Contracts Ratification

Allison Crispen, Interim CHRO presented Resolution 2022-08 Union Contracts Ratification
Commissioner Dressler made a motion to approve Resolution 2022-08 Union Contracts Ratification. Commissioner Kees seconded. 
**Action:** Motion passed unanimously.

**Quality Report:**
Brandie Manuel, CPSQO presented the May Quality Report
Discussion ensued.

**Financial Report:**
Tyler Freeman, CFO, presented the May Financial Report.
Discussion ensued.

**Administrative Report**
Mike Glenn, CEO, presented the June Administrative report.
Discussion ensued

**Board Business:**
- Board of Health Report

Commissioner Kolff provided the Board of Health Report which included an update on the annual Public Health Hero Awards recipient KPTZ for their COVID related programming. In addition, Dr. Berry reported on the extreme transmissibility of the virus, public health staff is planning on participating in an intensive anti racism course, and a report given by Jeff Johnson, Regional Director, of ORCA.

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

**Executive Session:**
- Discuss the potential purchase and sale of property

Executive Session was canceled.

**Conclude:**
Commissioner McComas made a motion to conclude the meeting. Commissioner Kolff seconded.
**Action:** Motion passed unanimously.

The meeting concluded at 6:03pm.

Approved by the Commission:
Chair of Commission: Jill Buhler Rienstra ________________________________
Secretary of Commission: Marie Dressler ________________________________
Call to Order:
The meeting was called to order at 2:02 pm by Board Chair Buhler Rienstra. Present by phone and video were Commissioners Dressler, Kolff, McComas, and Ready. Also, in attendance were Mike Glenn, CEO, and Alyssa Rodrigues, Administrative Assistant. This meeting was officially audio recorded by Jefferson Healthcare.

Public Comment:
No public comment was made.

Work Session:
The purpose of this special session is to have a discussion about Generative Governance. Action may be taken.

Mike Glenn, CEO gave an update on the building project and next steps.

Discussion ensued.

Commissioners and Mike Glenn, CEO, discussed Bond, Bond Size and AWPHD’s Guidelines for Elected and Appointed Officials Participation in Elections Activity.

Discussion ensued.
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**Conclude:**
Commissioner Dressler made a motion to conclude the meeting. Commissioner Kolff seconded.
**Action:** Motion passed unanimously.

The meeting concluded at 3:26pm.

Approved by the Commission:
Chair of Commission: Jill Buhler Rienstra
Secretary of Commission: Marie Dressler

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Special Session Agenda
Tuesday, July 13, 2022

Call to Order:
The meeting was called to order at 12:30 pm by Board Chair Buhler Rienstra. Present by phone and video were Commissioners Dressler, Kolff, McComas, and Ready. Also, in attendance were Mike Glenn, CEO, Jake Davidson, Chief Ancillary Officer/interim Chief Ambulatory and Medical Group Officer, Tyler Freeman, CFO, Brandie Manuel, Chief Patient Safety and Quality Officer, Tina Toner, CNO, and Alyssa Rodrigues, Administrative Assistant. This meeting was officially audio recorded by Jefferson Healthcare.

Public Comment:
No public comment was made during public comment period.

Work Session:
The purpose of this special session is to have an update on the Master Site Plan.

Mike Glenn, CEO, presented building concepts.

Discussion ensued.

Public comment was made during work session.

Discussion ensued.

Conclude:
Commissioner Dressler made a motion to conclude the meeting. Commissioner McComas seconded.
Action: Motion passed unanimously.
*COVID-19 Notice*

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The meeting concluded at 1:51pm.

Approved by the Commission:
Chair of Commission: Jill Buhler Rienstra
Secretary of Commission: Marie Dressler

This Special Session will be officially recorded. Times shown in agenda are estimates only.
<table>
<thead>
<tr>
<th>STATISTIC DESCRIPTION</th>
<th>JUNE 2022</th>
<th>JUNE 2021</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>ACTUAL</td>
<td>VARIANCE</td>
</tr>
<tr>
<td></td>
<td>MO</td>
<td>%</td>
</tr>
<tr>
<td></td>
<td>BUDGET</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FTES - TOTAL (AVG)</td>
<td>580.19</td>
<td>7%</td>
</tr>
<tr>
<td>FTES - PRODUCTIVE (AVG)</td>
<td>501.17</td>
<td>10%</td>
</tr>
<tr>
<td>ADJUSTED PATIENT DAYS</td>
<td>3,941</td>
<td>45%</td>
</tr>
<tr>
<td>ICU PATIENT DAYS (IP + OBSERVATION, MIDNIGHT CENSUS)</td>
<td>105</td>
<td>73</td>
</tr>
<tr>
<td>ACU PATIENT DAYS (IP + OBSERVATION, MIDNIGHT CENSUS)</td>
<td>278</td>
<td>268</td>
</tr>
<tr>
<td>SWING IP PATIENT DAYS (MIDNIGHT CENSUS)</td>
<td>-</td>
<td>16</td>
</tr>
<tr>
<td>PATIENT DAYS (ACU, ICU, SWING), INCLUDES OBSERVATION</td>
<td>383</td>
<td>357</td>
</tr>
<tr>
<td>BIRTHS</td>
<td>6</td>
<td>8</td>
</tr>
<tr>
<td>SURGERY CASES (IN OR)</td>
<td>130</td>
<td>134</td>
</tr>
<tr>
<td>SURGERY MINUTES (IN OR)</td>
<td>15,782</td>
<td>16,680</td>
</tr>
<tr>
<td>SPECIAL PROCEDURE CASES</td>
<td>88</td>
<td>76</td>
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<tr>
<td>LAB BILLABLE TESTS</td>
<td>21,378</td>
<td>21,544</td>
</tr>
<tr>
<td>BLOOD BANK UNITS MATCHED</td>
<td>43</td>
<td>-</td>
</tr>
<tr>
<td>MRs COMPLETED</td>
<td>217</td>
<td>211</td>
</tr>
<tr>
<td>CT SCANS COMPLETED</td>
<td>583</td>
<td>546</td>
</tr>
<tr>
<td>RADIOLOGY DIAGNOSTIC TESTS</td>
<td>1,623</td>
<td>1,548</td>
</tr>
<tr>
<td>ECHOs COMPLETED</td>
<td>183</td>
<td>172</td>
</tr>
<tr>
<td>ULTRASOUNDS COMPLETED</td>
<td>313</td>
<td>341</td>
</tr>
<tr>
<td>MAMMOGRAPHS COMPLETED</td>
<td>-</td>
<td>274</td>
</tr>
<tr>
<td>NUCLEAR MEDICINE TESTS</td>
<td>39</td>
<td>51</td>
</tr>
<tr>
<td>TOTAL DIAGNOSTIC IMAGING TESTS</td>
<td>2,958</td>
<td>3,143</td>
</tr>
<tr>
<td>PHARMACY MDS DISPENSED</td>
<td>19,800</td>
<td>20,579</td>
</tr>
<tr>
<td>ANTI COAG VISITS</td>
<td>411</td>
<td>405</td>
</tr>
<tr>
<td>RESPIRATORY THERAPY PROCEDURES</td>
<td>2,589</td>
<td>2,899</td>
</tr>
<tr>
<td>PULMONARY REHAB RVUs</td>
<td>69</td>
<td>122</td>
</tr>
<tr>
<td>PHYSICAL THERAPY RVUs</td>
<td>7,263</td>
<td>8,005</td>
</tr>
<tr>
<td>OCCUPATIONAL THERAPY RVUs</td>
<td>1,228</td>
<td>1,063</td>
</tr>
<tr>
<td>SPEECH THERAPY RVUs</td>
<td>100</td>
<td>286</td>
</tr>
<tr>
<td>RENT/HPT/OT/ST RVUs</td>
<td>8,660</td>
<td>9,476</td>
</tr>
<tr>
<td>ER CENSUS</td>
<td>1,142</td>
<td>954</td>
</tr>
<tr>
<td>EXPRESS CLINIC</td>
<td>980</td>
<td>740</td>
</tr>
<tr>
<td>SOCO PATIENT VISITS</td>
<td>95</td>
<td>132</td>
</tr>
<tr>
<td>PORT LUDLOW PATIENT VISITS</td>
<td>655</td>
<td>662</td>
</tr>
<tr>
<td>SHERIDAN VISITS</td>
<td>2,623</td>
<td>2,695</td>
</tr>
<tr>
<td>DENTAL CLINIC</td>
<td>383</td>
<td>416</td>
</tr>
<tr>
<td>WATERSHIP CLINIC PATIENT VISITS</td>
<td>1,279</td>
<td>1,102</td>
</tr>
<tr>
<td>TOWNSEND PATIENT VISITS</td>
<td>576</td>
<td>563</td>
</tr>
<tr>
<td>TOTAL RURAL HEALTH CLINIC VISITS</td>
<td>6,591</td>
<td>6,310</td>
</tr>
<tr>
<td>CARDIOLOGY CLINIC VISITS</td>
<td>536</td>
<td>435</td>
</tr>
<tr>
<td>DERMATOLOGY CLINIC VISITS</td>
<td>713</td>
<td>725</td>
</tr>
<tr>
<td>GEN SURG PATIENT VISITS</td>
<td>308</td>
<td>340</td>
</tr>
<tr>
<td>ONCOLOGY VISITS</td>
<td>561</td>
<td>573</td>
</tr>
<tr>
<td>ORTHO PATIENT VISITS</td>
<td>839</td>
<td>830</td>
</tr>
<tr>
<td>SLEEP CLINIC VISITS</td>
<td>163</td>
<td>82</td>
</tr>
<tr>
<td>URINOLOGY VISITS</td>
<td>158</td>
<td>184</td>
</tr>
<tr>
<td>WOMENS CLINIC VISITS</td>
<td>296</td>
<td>329</td>
</tr>
<tr>
<td>WOUND CLINIC VISITS</td>
<td>212</td>
<td>298</td>
</tr>
<tr>
<td>TOTAL SPECIALTY CLINIC VISITS</td>
<td>3,786</td>
<td>3,796</td>
</tr>
<tr>
<td>SLEEP CENTER SLEEP STUDIES</td>
<td>60</td>
<td>41</td>
</tr>
<tr>
<td>INFUSION CENTER VISITS</td>
<td>833</td>
<td>819</td>
</tr>
<tr>
<td>SURGERY CENTER ENDOSCOPIES</td>
<td>74</td>
<td>81</td>
</tr>
<tr>
<td>HOME HEALTH EPISODES</td>
<td>46</td>
<td>50</td>
</tr>
<tr>
<td>HOSPICE CENSUS/DAYS</td>
<td>825</td>
<td>1,046</td>
</tr>
<tr>
<td>CARDIAC REHAB SESSIONS</td>
<td>-</td>
<td>60</td>
</tr>
<tr>
<td>DIETARY MEALS SERVED</td>
<td>8,951</td>
<td>7,174</td>
</tr>
<tr>
<td>MAT MGMT TOTAL ORDERS PROCESSED</td>
<td>1,521</td>
<td>1,721</td>
</tr>
<tr>
<td>EXERCISE FOR HEALTH PARTICIPANTS</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>
## Jefferson Healthcare

### June 2022

<table>
<thead>
<tr>
<th>Gross Revenue</th>
<th>June 2022 Actual</th>
<th>June 2022 Budget</th>
<th>Variance Favorable/ (Unfavorable) %</th>
<th>June 2022 YTD</th>
<th>June 2022 Budget YTD</th>
<th>Variance Favorable/ (Unfavorable) %</th>
<th>June 2021 YTD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inpatient Revenue</td>
<td>2,670,476</td>
<td>3,255,393</td>
<td>(584,917) -16%</td>
<td>20,388,433</td>
<td>19,640,869</td>
<td>747,564 4%</td>
<td>18,067,075</td>
</tr>
<tr>
<td>Outpatient Revenue</td>
<td>24,899,112</td>
<td>23,456,232</td>
<td>1,442,879 6%</td>
<td>135,995,051</td>
<td>141,519,268</td>
<td>(5,524,217) -4%</td>
<td>129,800,698</td>
</tr>
<tr>
<td><strong>Total Gross Revenue</strong></td>
<td>27,569,588</td>
<td>26,711,625</td>
<td>857,963 3%</td>
<td>156,383,484</td>
<td>161,160,137</td>
<td>(4,776,654) -3%</td>
<td>147,867,773</td>
</tr>
</tbody>
</table>

### Revenue Adjustments

| Cost Adjustment Medicaid | 2,026,497 | 2,212,628 | 186,130 8% | 12,345,052 | 12,212,628 | 122,424 1% | 11,762,055 |
| Cost Adjustment Medicare | 9,715,419 | 9,128,957 | (586,462) -6% | 54,370,197 | 55,078,043 | 707,845 1% | 50,530,959 |
| Charity Care | 83,429 | 204,694 | 121,265 59% | 756,915 | 1,234,986 | 478,071 39% | 1,612,948 |
| Contractual Allowances Other | 2,921,786 | 2,549,267 | (372,519) -15% | 15,106,649 | 15,380,578 | 273,928 2% | 17,611,581 |
| Administrative Adjustments | 86,202 | 85,043 | (1,159) -1% | 381,920 | 513,090 | 131,170 26% | 287,240 |
| Allowance for Uncollectible Accounts | 767,266 | 415,389 | (351,877) -85% | 2,015,090 | 2,506,179 | 491,089 20% | 1,089,385 |
| **Total Revenue Adjustments** | 15,602,599 | 14,595,977 | (1,006,622) -7% | 84,975,823 | 88,062,395 | 3,086,572 4% | 82,894,168 |

### Net Patient Service Revenue

| 11,966,989 | 12,115,648 | (148,659) -1% | 71,407,661 | 73,097,742 | (1,690,082) -2% | 64,973,605 |

### Operating Expenses

| Salaries And Wages | 5,828,271 | 6,355,305 | 527,034 8% | 36,788,259 | 38,343,676 | 1,555,417 4% | 34,331,694 |
| Employee Benefits | 1,284,344 | 1,477,375 | 193,031 13% | 8,491,188 | 8,913,495 | 422,308 5% | 8,215,628 |
| Professional Fees | 503,609 | 163,970 | (339,639) -207% | 2,334,917 | 989,286 | (1,345,631) -136% | 954,391 |
| Purchased Services | 1,046,298 | 730,477 | (315,821) -43% | 4,723,676 | 4,407,211 | (316,466) -7% | 4,228,262 |
| Supplies | 2,255,564 | 2,436,505 | 180,941 7% | 15,266,230 | 14,700,249 | (565,981) -4% | 13,538,242 |
| Insurance | 69,744 | 120,863 | 51,118 42% | 419,488 | 729,205 | 309,717 42% | 543,037 |
| Leases And Rentals | 69,698 | 48,659 | (21,039) -43% | 426,182 | 293,573 | (132,609) -45% | 156,600 |
| Depreciation And Amortization | 429,451 | 352,144 | 77,307 22% | 2,574,124 | 2,089,937 | 484,187 18% | 2,978,813 |
| Repairs And Maintenance | 100,359 | 93,215 | (7,144) -8% | 391,806 | 562,398 | 170,593 30% | 532,033 |
| Utilities | 142,456 | 83,900 | (58,556) -70% | 837,286 | 506,196 | (331,089) -65% | 624,391 |
| Licenses And Taxes | 77,924 | 75,579 | (2,345) -3% | 426,774 | 455,992 | 29,218 6% | 448,361 |
| Other | 72,272 | 233,482 | 161,211 69% | 977,797 | 1,408,677 | 430,879 31% | 954,093 |
| **Total Operating Expenses** | 11,879,900 | 12,331,474 | 451,484 4% | 73,857,727 | 74,399,896 | 42,169 1% | 67,325,546 |

### Operating Income (Loss)

| 882,238 | 324,104 | 558,134 172% | 2,267,283 | 1,955,425 | 311,858 16% | 1,848,728 |

### Non Operating Revenues (Expenses)

| Taxation For Maint Operations | 24,016 | 23,934 | 82 0% | 144,095 | 144,095 | (0) 0% | 138,606 |
| Taxation For Debt Service | 21,066 | 18,066 | 3,000 17% | 128,155 | 108,997 | 19,158 18% | 240,517 |
| Investment Income | 30,948 | 27,288 | 3,661 13% | 96,084 | 164,636 | (68,552) -42% | 25,890 |
| Interest Expense | (67,655) | (74,588) | 6,933 9% | (485,025) | (450,014) | (35,011) -8% | (572,865) |
| Bond Issuance Costs | - | - | - | - | - | - | 0 |
| Gain or (Loss) on Disposed Asset | - | - | - | - | - | - | 0 |
| Contributions | 2,676 | 8,492 | (5,816) -66% | 17,235 | 51,234 | (34,000) -66% | 28,371 |
| **Total Non Operating Revenues (Exp)** | 11,052 | 3,192 | 7,860 -246% | (99,456) | 19,256 | (118,713) 616% | (139,477) |

### Change in Net Position (Loss)

| 893,289 | 327,295 | 565,994 173% | 2,167,826 | 1,974,681 | 193,145 10% | 1,709,251 |
TO:    BOARD OF COMMISSIONERS  
FROM:  TYLER FREEMAN, CFO  
RE:    JUNE 2022 GENERAL FUND WARRANTS & ACH FUND TRANSFERS  

Submitted for your approval are the following warrants:

GENERAL FUND:

<table>
<thead>
<tr>
<th>Warrant Number</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>290318</td>
<td>$2,903,180</td>
</tr>
<tr>
<td>291356</td>
<td>$5,495,838</td>
</tr>
</tbody>
</table>

ACH TRANSFERS

$13,055,284.40

YEAR-TO-DATE:

$21,454,303.27

$112,265,172.04

Warrants are available for review if requested.
The following items need to be approved at the next commission meeting:

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>General Fund Warrants &amp; ACH Transfers</td>
<td>$21,454,303.27</td>
<td>(Provided under separate cover)</td>
</tr>
<tr>
<td>Allowance for Uncollectible Accounts / Charity</td>
<td>$938,896.62</td>
<td>(Attached)</td>
</tr>
<tr>
<td>Canceled Warrants</td>
<td>$0.00</td>
<td>(Attached)</td>
</tr>
</tbody>
</table>
TO:       BOARD OF COMMISSIONERS  
FROM:     TYLER FREEMAN, CFO  
RE:       JUNE 2022 ALLOWANCE FOR UNCOLLECTIBLE ACCOUNTS, ADMINISTRATIVE, AND CHARITY CARE WRITE OFFS

Submitted for your approval are the following:

<table>
<thead>
<tr>
<th></th>
<th>JUNE</th>
<th>JUNE YTD</th>
<th>JUNE YTD BUDGET</th>
</tr>
</thead>
<tbody>
<tr>
<td>Allowance for Uncollectible Accounts:</td>
<td>767,265.76</td>
<td>2,015,089.68</td>
<td>2,506,178.63</td>
</tr>
<tr>
<td>Charity Care:</td>
<td>83,428.68</td>
<td>756,914.58</td>
<td>1,234,985.99</td>
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<td>Other Administrative Adjustments:</td>
<td>88,202.18</td>
<td>381,920.07</td>
<td>513,089.87</td>
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<td><strong>TOTAL FOR MONTH:</strong></td>
<td><strong>$938,896.62</strong></td>
<td><strong>3,153,924.33</strong></td>
<td><strong>$4,254,254.49</strong></td>
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</table>
TO: BOARD OF COMMISSIONERS  
FROM: TYLER FREEMAN, CFO  
RE: JUNE 2022 WARRANT CANCELLATIONS

State law requires you to pass a resolution canceling any warrants which are not presented to the Treasurer for payment within one year of issue.

<table>
<thead>
<tr>
<th>DATE</th>
<th>WARRANT</th>
<th>AMOUNT</th>
</tr>
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</table>

TOTAL: $ -
FROM: Medical Staff Services
RE: 07/19/2022 Medical Executive Committee appointments/reappointments for Board approval 07/27/2022

C-0241

§485.627(a) Standard: Governing Body or Responsible Individual
The CAH has a governing body or an individual that assumes full legal responsibility for determining, implementing and monitoring policies governing the CAH’S total operation and for ensuring that those policies are administered so as to provide quality health care in a safe environment.

Interpretive Guidelines §485.627(a)
It is the responsibility of the governing body (or responsible individual) to appoint, with the advice of the medical staff, the individual practitioners to the medical staff. After considering medical staff recommendations, and in accordance with established CAH medical staff criteria and State and Federal laws and regulations, the governing body (or responsible individual) decides whether or not to appoint new medical staff members or to continue current members of the medical staff.

Recommended provisional appointment to the active/courtesy/allied health/locum tenens staff:
1. Tyler McKay, MD
2. Michael Petrides, MD
3. Erica Tirado, DO

Recommended re-appointment to the active medical staff with privileges as requested:
1. Steven Moll, MD
2. Renee Schroetlin, MD

Recommended re-appointment to the courtesy medical staff with privileges as requested:
1. Amit Kansara, MD
2. Robert Lada, MD
3. Michael Marvi, MD
4. Kyle Ogami, MD
5. Brendan McCullough, MD
6. Samantha Lancaster, MD
7. Valerie McWhorter, MD

Recommended re-appointment to the allied health staff with privileges as requested:
1. Addison Richert, PA
2. Charles Schott, ARNP

Recommended Temporary Privileges:
1. N/A

Recommended POCUS Privileges:
1. N/A

Medical Student Rotation:
1. N/A

Disaster Privileging
1. N/A

90-day provisional performance review completed successfully:
FROM: Medical Staff Services
RE: 07/19/2022 Medical Executive Committee appointments/reappointments for Board approval 07/27/2022

C-0241
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1. N/A

Resignations:
1. Eric Prince, MD- Swedish
2. Peter Thurlow, MD- Radia
3. Karen Forbes, MD- JHC
4. Shannon Farmakis, MD- Radia
FROM: Medical Staff Services
RE: 07/19/2022 Medical Executive Committee appointments/reappointments for Board approval 07/27/2022

C-0241
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Summary of Changes for Policy and Privilege Review

**Policies**

1. Physician Supervision of Physician Assistants No changes
   1. No Changes

**Privileges**

1. N/A
Physician Supervision of Physician Assistants

POLICY:

A physician assistant (PA) may practice medicine at Jefferson Healthcare with active medical staff privileges and completion of the practice agreement by the Washington Medical Commission (WMC) to the extent permitted by the Commission. The sponsoring physician, as an agent of Jefferson Healthcare, will exercise supervision over the PA, and shall retain the professional and legal responsibility for health care tasks rendered by the PA when so required by state law. The sponsoring physician and PA are mutually obligated by the rules and regulations set forth by state and federal laws.

PURPOSE:

To define the process for supervision of physician assistants.

SCOPE:

The policy applies to all PAs appointed to the active medical staff at Jefferson Healthcare. This includes the inpatient setting, emergency department, specialty clinics, and rural health clinics.

DEFINITIONS:

*Physician Assistants* means a person who is licensed by the commission to practice medicine to a limited extent only under the supervision of a physician as defined in chapter 18.71 RCW and who is academically and clinically prepared to provide health care services and perform diagnostic, therapeutic, preventative, and health maintenance services.

*Washington Medical Commission (WMC)* It is the purpose and responsibility of the Washington Medical Commission (WMC) to protect the public by ensuring quality healthcare is provided by physicians and physician assistants. The WMC establishes, monitors, and enforces qualifications for licensure, consistent standards of practice, and continuing competency.
**Remote Site:** A setting physically separate from the sponsoring or supervising physician’s primary place for meeting patients or a setting where the physician is present less than 25% of the practice time of the licensee.

**RESPONSIBILITY:**

It is the responsibility of the PA to provide the required information to the Credentials Committee and comply with all medical staff policies and procedures. The Physician Assistant and the Sponsoring Physician are responsible for ensuring that documentation of appropriate consultation and review of work are maintained.

The Medical Executive Committee provides oversight of the quality of medical staff services and makes recommendations regarding credentialing and privileging to the Board of Commissioners.

All credentials and privileges of AHPs are reviewed and approved by the Board of Commissioners per the Medical Staff Reappointments and Renewal of Clinical Privileges Policy and the Medical Staff Initial Appointment Policy.

**PROCEDURE:**

**Application and Approval of PA Privileges**

A. The PA shall apply for appointment and privileges through the Jefferson Healthcare Medical Staff office.
   1. The application shall include information regarding education, training, experience, and competency

B. The appointment, reappointment, delineation of privileges and approval process shall be completed in accordance with Medical Staff Policies as documented above

C. PAs must be approved by the Governing Board upon recommendation of the Credentials Committee and the Medical Executive Committee

**Sponsor and Supervision Requirements**

A. Limitations: A physician may enter into practice agreements with no more than five PA’s as outlined in WAC 246-915-055.
   1. A physician may apply for a waiver with the WMC to supervise up to 10 PAs as outlined in SHB 2378.

B. Every PA is required to have an approved practice agreement with WMC.
   1. The practice agreement shall delineate the manner and extent to which the PA will practice and be supervised.
      a. The practice agreement must specify the detailed description of the scope of practice and the supervision process for the practice
      b. The sponsoring physician and the PA shall determine which services are provided and the degree of supervision
C. PAs are required to be sponsored by a physician who is currently appointed to the active medical staff of Jefferson Healthcare.
   1. If the sponsoring physician terminates his or her relationship with Jefferson Healthcare a new sponsor must be arranged for the PA. WMC must be notified of the practice agreement termination.
   2. A PA who practices in multiple specialties may need more than one practice agreement, according to state and federal law and based upon the PAs training and scope of practice

D. Supervision may consist of concurrent observation; however, it does not require the physical presence of the sponsor unless indicated on the privilege list

E. The sponsoring physician or designee shall review care provided by the PA on a continuous basis and countersign any admission History & Physical (H & P) examinations and Discharge Summary

F. In accordance with state and federal laws and regulations, for the first year of the PA's practice at Jefferson Healthcare, the sponsoring physician or designee shall review 10 outpatient cases per month for the first year, then five cases per month after.
   1. Additional review is not required when the care is provided in collaboration with a physician

G. The sponsoring physician shall always be available to the PA for clinical questions and the resolution of quality of care issues.

H. Supervision must be continuous but does not require the personal presence of the sponsoring physician at the place where health care tasks are performed so long as the PA and sponsoring physician can be in contact by telecommunication.

I. In cases where the sponsoring physician is not immediately available, a back-up sponsoring physician shall be available to the PA for the resolution of clinical or quality of care issues.

Remote Sites

A. Physician Assistants no longer need to be approved by the WMC to practice in remote sites. The remote site practice must be documented as part of the PA practice agreement.
   1. The names of the supervising physician and the PA must be prominently displayed at the entrance to the clinic or in the reception area of the remote site

RECORDS REQUIRED:

Reports are provided to the medical staff office at reappointment or as requested by Medical Staff.

REFERENCES:

- CMS Benefit Policy Manual Chapter 13, Rural Health Clinics (RHC)
  - RHC Staffing requirements 30.1.1
- CMS CAH Conditions of Participation: §485.631(b)(1)
- Washington State Legislature RCWs, Chapter 18.71A, Physician's Assistants
- Washington State Legislature WACs; Physician Assistants - Medical Quality Assurance Commission
- Washington State Legislature: SBH 2378

### Approval Signatures

<table>
<thead>
<tr>
<th>Step Description</th>
<th>Approver</th>
<th>Date</th>
</tr>
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<tbody>
<tr>
<td>Allison Crispen: Director of Medical Staff Programs</td>
<td>08/2021</td>
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