

Due to the presence of multiple respiratory illness, Jefferson Healthcare is still highly encouraging practice of high infection protocols. You may choose to attend this meeting virtually by accessing the below information or can attend in person in the Sheridan Conference Room at 915 Sheridan Street. Limited seating available.

**Audio Only:** dial Phone Conference Line: (509) 598-2842  
When prompted, enter Conference ID number: 572 938 342#  
**Microsoft Teams meeting:** Join on your computer or mobile app.

## **Jefferson County Public Hospital District No. 2**

### **Board of Commissioners, Special Session Minutes**

### **Wednesday, December 20, 2023**

#### **Call to Order:**

The meeting was called to order at 2:00 pm by Board Chair Buhler Rienstra. Commissioners in attendance included Commissioners Dressler, McComas and Ready. Also, in attendance were Mike Glenn, CEO, Tyler Freeman, Chief Financial Officer, Jake Davidson, Chief Operating Officer, Molly Propst, Chief Human Resources Officer, Brandie Manuel, Chief Patient Safety and Quality Officer, Tina Toner, Chief Nursing Officer, Dunia Faulx, Chief Planning and Advocacy Officer, and Christina Avila, Executive Assistant. Commissioner Kolff was excused from this meeting. This meeting was officially audio recorded by Jefferson Healthcare. Board Chair Buhler Rienstra stated that due to the Special Session there will not be a motion to approve the agenda.

#### **Patient Story:**

Tina Toner, CNO shared a patient letter which included compliments for the Watership Clinic, Dr. Manik, Dr. Brooks, MA, and front desk staff. Discussion ensued.

#### **Public Comment:**

No public comment was made.

#### **Minutes:**

- November 15, 2023 Special Session Minutes
- December 01, 2023 Special Session Minutes

Commissioner Dressler made a motion to approve the November 15, 2023 Special Session Minutes and the December 01, 2023 Special Session Minutes. Commissioner McComas seconded.

Commissioner Ready made a motion to amend and approve the December 01, 2023 Special Session Minutes to reflect that the meeting was audio recorded by Commissioner Ready. Commissioner Dressler seconded.

**Action:** Motion passed unanimously

**Required Approvals:** Action Requested

- Resolution 2023-22 Canceled Warrants
- October Warrants and Adjustments
- Medical Staff Credentials/Appointments/Reappointments
- Revised Board Assessment Instrument

Commissioner McComas made a motion to approve the Required Approvals. Commissioner Ready seconded.

**Action:** Motion passed unanimously.

**Home Health and Hospice Annual Report:**

David Hunsley, Director of Home Health, Hospice, and Palliative Care presented the Home Health and Hospice Annual Report which included Staffing Updates, Home Health 12-Month Snapshot, Home Health Strengths, NRC Home Health Survey, Comments, Home Health Challenges, Opportunities via 2024 Ongoing Quality Projects, Additional Opportunities, Home Health Average Daily Census, Home Health Visits and Patients Served, Home Health OASIS and Claims Based Measures, Home Health Patient Experience, 2023 Hospice 12-Month Snapshot, Hospice Strengths, NRC Hospice Survey Comments, Hospice Challenges, Hospice Opportunities via 2024 Quality Projects, Other Opportunities for Hospice, Hospice Visits and Patients Served, Hospice Patient Days by Level of Care, HIS and HVLDL Measures, Hospice Patient Experience, Palliative Care Strengths, and Palliative Care Opportunities. Discussion ensued.

Commissioner Dressler made a motion to approve David Hunsley as Director for Home Health, Hospice, and Palliative Care. Commissioner Ready seconded.

**Action:** Motion passed unanimously.

**Financial Report:**

Tyler Freeman, Chief Financial Officer, presented the November Financial Report. Discussion ensued.

**Project Update:** Jake Davidson, Chief Operating Officer provided a project update. Discussion ensued. Board Chair Buhler Rienstra confirmed that the project reports can be presented at every other meeting moving forward.

**Break**

Commissioners recessed for break at 3:25 pm.

Commissioners reconvened from break at 3:45 pm.

**Administrative Report**

Carrie Hite provided an update on the Healthier Together Pool Project Design, which included the Project Calendar, Site Options and Recommendations, Site Analysis, Mountain View Pros and Cons, Community Feedback, Base Program Recommendations, Optional Program if Funding

Allows, Alternate Site Amenities, Base Site Plan, Revisions to Schematic Designs, Funding and Operations, Operational Cost Summary, PED vs. MPD Options, Funding Recommendation, and Next Steps. Mike Glenn, Chief Executive Officer, and Dunia Faulx, Chief Planning and Advocacy Officer, presented the December Administrative report. Discussion ensued.

**Board Business:**

- Foundation Update

Commissioner Dressler provided a Foundation Update, which included Commissioner McComas offering to serve as the Hospital representative on the Jefferson Healthcare Foundation Board, thanks to Board Members for individual contributions to the Foundation, expecting to receive news for \$1 million grant application in February, Fundraising and Outreach plan, plans to expand the Foundation Board, and the Jefferson Healthcare Foundation Fund. Discussion ensued. Board Chair Buhler Rienstra confirmed that the Board will request a motion to approve Commissioner McComas serving as the Hospital representative on the Jefferson Healthcare Foundation Board at the next meeting.

**Executive Session**

Board Chair Buhler Rienstra cancelled the Executive Session and announced that Executive Session will be held in January.

**Meeting Evaluation:**

Commissioners evaluated the meeting.

**Conclude:**

Commissioner Dressler made a motion to conclude the meeting. Commissioner McComas seconded.

**Action:** Motion passed unanimously.

The meeting concluded at 4:58 pm.

Approved by the Commission:

Chair of Commission: Jill Buhler Rienstra \_\_\_\_\_

Secretary of Commission: Marie Dressler \_\_\_\_\_

2023 Update

Jefferson



Healthcare

HOME HEALTH, HOSPICE  
AND PALLIATIVE CARE

Caring for our community at home.

# Recent History of Home Health, Hospice, and Palliative Care

- Since the previous Director of HHHPC moved on, Tina Toner and Dr. Mattern provided interim clinical leadership during the recruitment for a new HHH/PC Director.
- HHH/PC experienced staffing challenges in the past year requiring adjustments in practice to ensure continued access.
  - An acuity-based admission process was initiated
  - Utilization of remote centralized case management (URCM) helped to reduce the burden on front line clinical staff.
  - HH Travel RN
- Hospice and Palliative Care are fully staffed (Nov – Dec 2023)
- HHHPC Administrator: David Hunsley (Dec 2023)

2023 Update

# Home Health

# Home Health 12 Month Snapshot

Ave daily census: 104 (2022 - 92)

Admissions: 558

Recerts: 297

Discharges: 510

- Discharged to Hospice: 27 (2022-26)
- Died on HH: 17

Visits: 14,918

- Visits per Stay: 13.35 (WA 14.82, Nat 14.29)

# Strengths

- Excellent Caliber of our Clinical Staff
- Admission Nursing Capacity
- New Scheduler
- Reasserting Direct Day-to-Day Clinical Supervision
- Multidisciplinary Wound and Lymphedema Care – Wound Care Certified OT and RN (40% of our Patients) [Quality Project]
- True Quality of Care High



# NRC Home Health Survey Comments

*"Excellent care Wonderful people!"*

*"Excellent service + attitudes."*

*"There (unreadable) are wingless angels!!!"*

*"Great people! Very aware and sensitive."*

*"I have received excellent care from talented, caring people."*

*"Excellent!"*

*"Very professional and caring."*

*"I am very impressed with the agency The office, my physical therapist and my occupational therapist @ Jefferson Healthcare Home Health."*

*"Members of the Home Health team have made it possible for me to live at home. Their vigilance saved my life earlier in the year. I am lucky to live in an area where there is such a wonderful organization. I cannot praise them enough."*

\*From November 2023 National Research Corporation Comments Report

# Challenges

- Recruiting
  - HHHPC Clinical Manager
  - 2 HH PT, 2 HH RN and HH Per Diem positions are currently posted
- Lagging Home Health Outcome Trends (On Paper)
  - Below national averages
  - Byproduct of not having day-to-day clinical managers in home health program
  - Interrater reliability
- Emergent Care Without Hospitalization Rate
- Inefficiencies
  - Processes
  - Positions need to get maximum “bang for the buck”

# Opportunities - Via Our Ongoing Quality Projects

## ***A Team Approach to HH Case Management***

- Roles Clinical Manager/ Utilization review/Triage
- Quality and Oasis review
- Clinician Consistency / Geo Teams
- Care Plans
- Standardization and Simplification of Processes
- Improving Outcome Measures – 2 OASIS Certified Therapists

**"Right from the Start"** (*Pre-Admission* – Admission) Intake process, timely start of care, post-admission clinical and OASIS Review

## **Managing Medications at the Start of Care**

# Additional Opportunities

- **Creative Recruiting Methods**
- **Culture**
  - It Eats Everything Else for Breakfast
  - "Culture of Excellence"
- **High Reliability**
  - Processes
  - Clinical Outcomes
  - Communication
  - Interdisciplinary Team

# HH Average Daily Census:

## Average daily census, by month

Monthly values from the year previous are shown in grey.

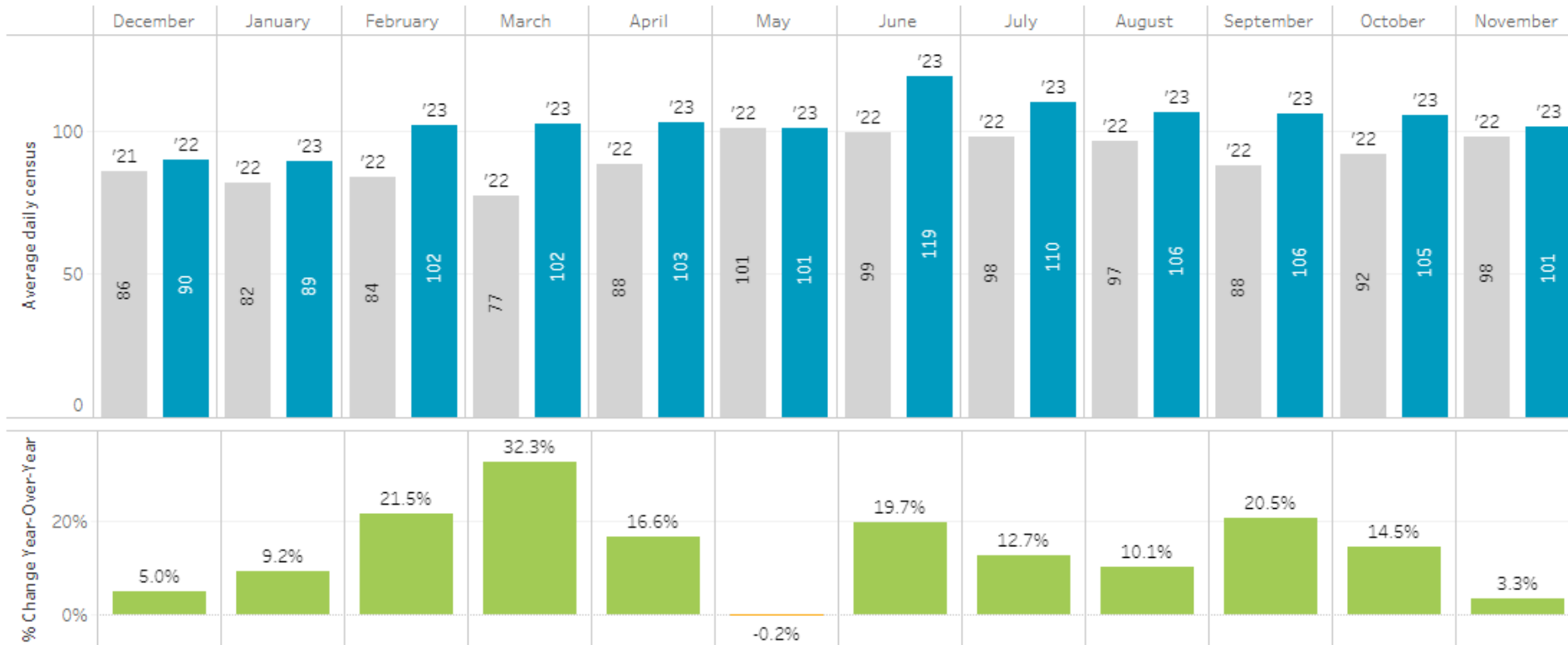
Percent change from the same month in the year previous is shown below the bar graph.

### Legend

- Previous year
- Current year

### Select Department(s)

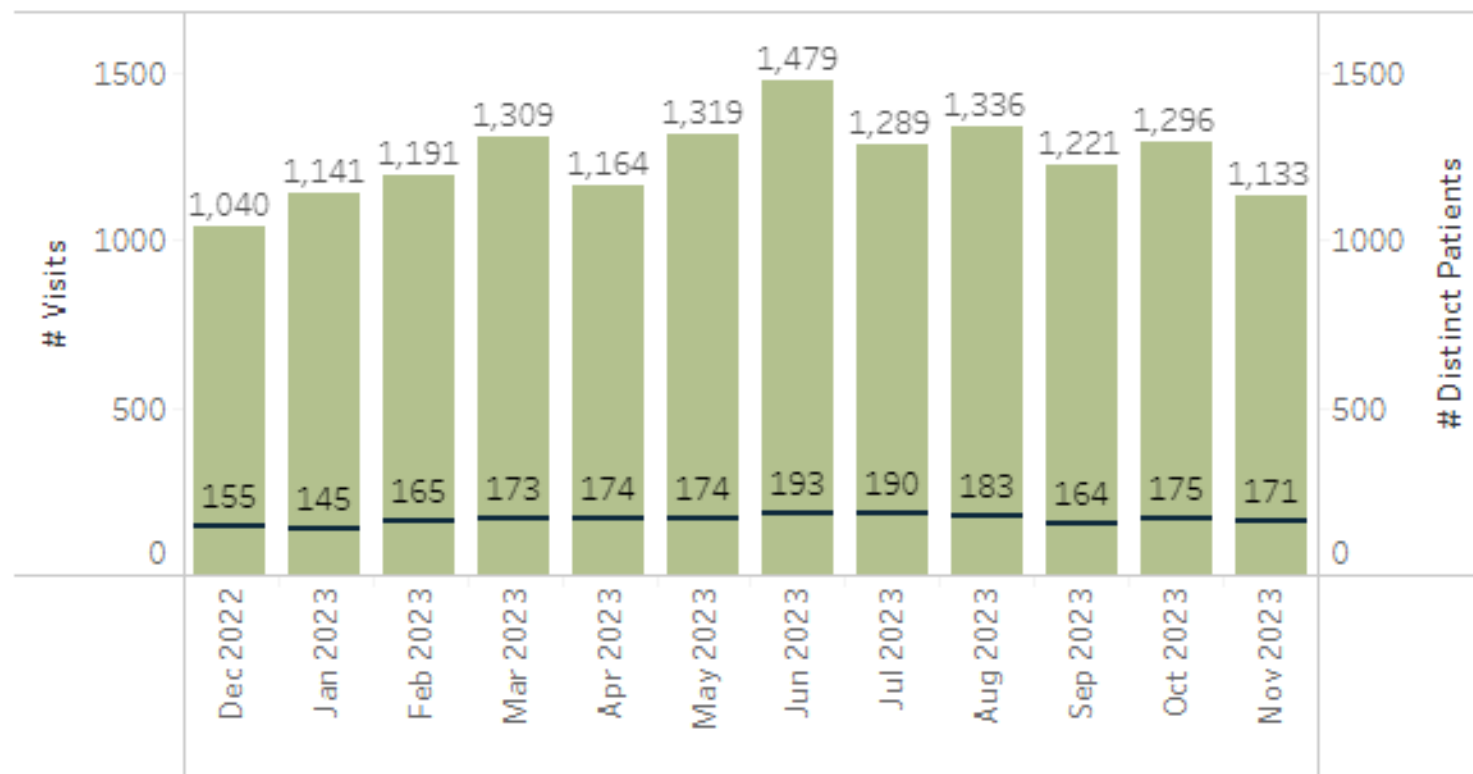
- ☒ Home Health
- ☐ Hospice



# Home Health Visits and Patients Served

## HHH Visits by Month

The bar represents the number of visits each month. Color indicates the department. The dark blue line indicates the number of patients who had a visit during that timeframe.



# HH OASIS and Claims based Measures

## Re-hospitalization rate (lower is better)

- 30 day – 12.33% (WA 11.59%, Nat 12.47%)
- 60 day – 12.1% (WA 13.5%, Nat 14.9%)
- All ACH (actual) 19.6% (WA 21.7%, Nat 23.4%)

## Areas to address:

- Emergent care without Hospitalization 10% (WA 6.3%, Nat 6.3%)
- Risk Adjusted Outcomes: 73.1% (WA 89.1%, Nat 89.1%)
- Skin Integrity: 0.8% (WA 0.4%, Nat 0.2%) lower is better
- Falls with Major Injury: 2.9% (WA 1.3%, Nat 1.0%)
- Admission timeliness: 91.5% (WA 90.3%, Nat 96.5%)
- Transfer of Health Information to Patient 87.3% (WA 87.1%, Nat 88.0%)

# Home Health Patient Experience:

## HHCAHPS Stoplight Report

Service Dates From Jan 1, 2023 to Dec 31, 2023

<https://catalyst.nrcpicker.com/JeffHealth/HHCAHPSSR/default.aspx>

December 1, 2023



	Picker Dimensions	Benchmarks		Rolling Averages up to 10/1/2023	Jefferson Healthcare Home Health			
Overall		NRC 75th Percentile*	Bed Size 0-49 Average	3 Months‡	Qtr 4 2023‡	Qtr 3 2023	Qtr 2 2023	Qtr 1 2023
We want to know your rating of your care from this agency's home health providers.								
Using any number from 0 to 10, where 0 is the worst home health care possible and 10 is the best home health care possible, what number would you use to rate your care from this agency's home health providers?								
		92.1% (n=25,861)	--	95.0%μ PR=93 (n=20)	100.0%μ PR=100 (n=2)	96.2%μ PR=97 (n=26)	83.3% PR=14 (n=36)	85.7% PR=23 (n=42)
Highest Scores	NRC 75th Percentile*	Bed Size 0-49 Average	3 Months‡	Qtr 4 2023‡	Qtr 3 2023	Qtr 2 2023	Qtr 1 2023	
Would Recommend Agency	87.1% (n=25,816)	--	100.0%μ PR=100 (n=21)	100.0%μ PR=100 (n=3)	96.3%μ PR=99 (n=27)	81.1% PR=32 (n=37)	92.5% PR=93 (n=40)	



## Home Health Patient Experience:

Key Drivers		NRC 75th Percentile*	Bed Size 0-49 Average	3 Months‡	Qtr 4 2023‡	Qtr 3 2023	Qtr 2 2023	Qtr 1 2023
In the last 2 months of care, how often have you had confidence and trust in home care providers from this agency?	Emotional Support	90.3% (n=13,233)	--	95.0%µ PR=94 (n=20)	100.0%µ PR=100 (n=2)	92.6%µ PR=88 (n=27)	83.8% PR=24 (n=37)	90.2% PR=74 (n=41)
In the last 2 months of care, how often did you feel that home health providers from this agency really cared about you?	Emotional Support	90.1% (n=13,275)	--	90.0%µ PR=74 (n=20)	100.0%µ PR=100 (n=2)	88.9%µ PR=67 (n=27)	83.3% PR=14 (n=36)	90.0% PR=74 (n=40)
In the last 2 months of care, how often did home health providers from this agency seem informed and up-to-date about all the care or treatment you got at home?	Coordination of Care	83.6% (n=23,643)	--	90.0%µ PR=97 (n=20)	100.0%µ PR=100 (n=2)	84.0%µ PR=78 (n=25)	78.8% PR=46 (n=33)	76.9% PR=34 (n=39)
Opportunity:								
When you started getting home health care from this agency, did someone from the agency ask to see all the prescription and over-the-counter medicines you were taking?	Patient Safety	91.7% (n=24,118)	--	72.2%µ PR=6 (n=18)	0.0%µ PR=1 (n=1)	76.9%µ PR=11 (n=26)	84.6%µ PR=36 (n=26)	73.7% PR=7 (n=38)

2023 Update

# Hospice

# Hospice 12 Month Snapshot:

Admissions: 144

Discharges: 150

- Deaths: 137 – 91.3% (WA 87.7%, Nat 86.4%)
- Live Discharges: 14
  - Stable- no longer meets hospice criteria: 6
  - Moved out of service area: 2
  - Revoked: 3
  - Transferred to another hospice: 1
  - Discharged due to safety risks: 1

Length of Stay

- Median Length of Stay: 23 (Nat 18)
- Ave Length of Stay: 84 (Nat 75.1, WA 66.2)
- Length of Stay less than 7 days: 41 - 27% (WA 29%, Nat 34%) lower is better
- Length of Stay 180 days or more: 17 – 11.3% (WA 10%, Nat 12%) lower is better

# Strengths

- Fully Staffed - Our amazing hospice team!
- Strong Clinical Leadership
- Admitting Patients within 48 Hours Routinely
- Very Good to Excellent Outcomes Across Process Measures (Hospice Item Set)
- Hospice Index Score 10/10
- Comfort Therapy and Volunteer Programs Reactivated
- Support of the Hospice Foundation

# NRC Hospice Survey Comments

*"My team was exceptional! I could not have helped my mom through end of life without their help and support."*

*"The care my spouse received and support I received was absolutely first rate and exceeded my expectations."*

*"The highest praise goes to your team. All questions were answered - respectfully done! Thank you so much - compassionate kind care was shown to my mom & family! Well-done!"*

*"I want to thank everyone that helped me and my family. It was a God sent to have hospice members come and help explain and help with my mothers needs & my brother & help to understand what was going on and how to deal with it! Thank you to hospice This was a God sent thing for my family It was horrible before and after they came it was so much better to help my mother!"*

*"The staff was wonderful, caring and kind. They reminded us often that they were available 24/7"*

*"The hospice team and overall resources were exceptional."*

\*From November 2023 National Research Corporation Comments Report

# Challenges

- 27% Length of stay less than 7 days (below national and state averages)
- Patient satisfaction scores have room for improvement. "Emotional Support" measure
- Hospice visits in last days of life

# Opportunities Via 2024 Quality Projects

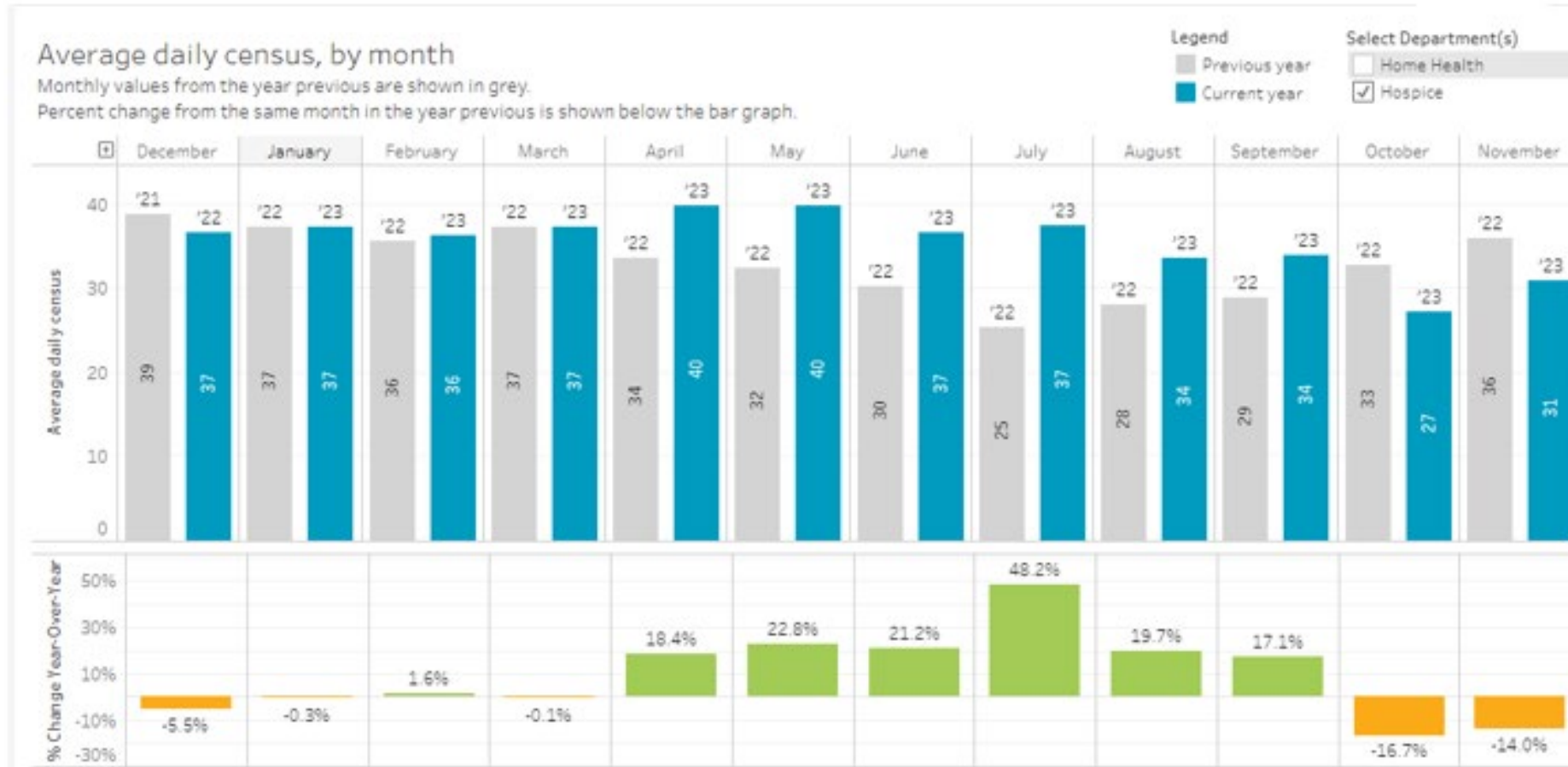
- Improve Hospice Visits in the last days of life
- Crosswalk accreditation standards with practice
- Hospice Foundation Engagement
- Emotional support for patients/families
- Preparation for new Hospice Outcomes and Patient Evaluation (HOPE) assessment tool

# Other Opportunities

- Community Liaison to redouble efforts to get physicians to refer sooner.
- Palliative Care Program - helping providers to know when to refer.
- Direct work with Cancer Care Program, Hospitalists, and Others.
- Opening up access in hospice, now that we're fully staffed.



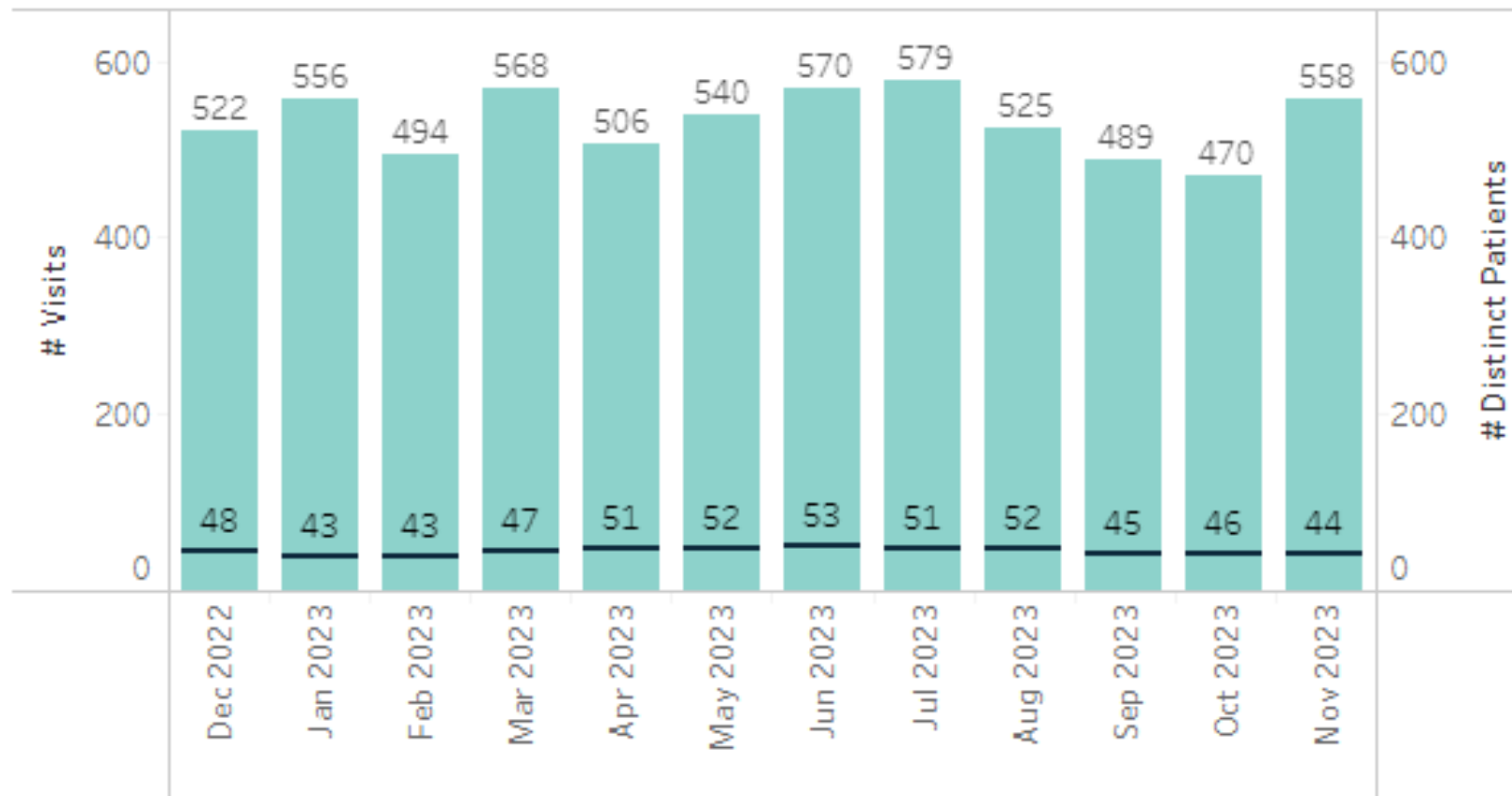
# Hospice Average Daily Census



# Hospice Visits and Patients Served

## HHH Visits by Month

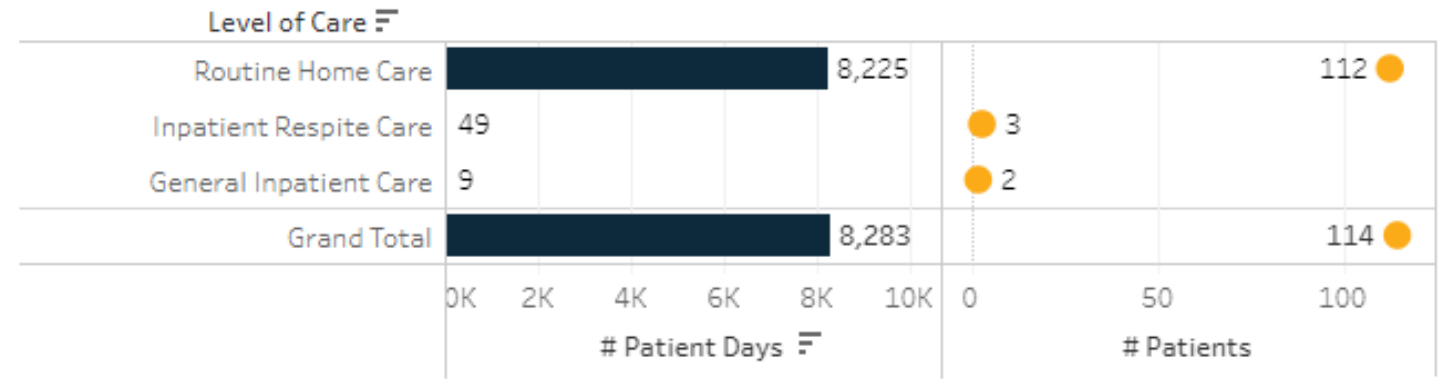
The bar represents the number of visits each month. Color indicates the department. The dark blue line indicates the number of patients who had a visit during that timeframe.



# Patient Days by Level of Care

## Patient Days by Level of Care (Hospice Only)

Total patient days and distinct patients enrolled in hospice for the selected timeframe, by level of care



Hospice Levels of Care: ( % of discharges with any)

- Routine Home Care: 96% (WA 93.6% Nat 84.8%)
- Inpatient Respite Care: 2.1% (WA 1.9% Nat 3.6%)
- General Inpatient Care: 4.1% (WA 11.8 Nat 20.1%)
- Continuous Care: 0% (WA 0.1% Nat 1.2%)

# HIS and HVLDL Measures

## HIS: Hospice Item Set

- Hospice comprehensive assessment – 92.6% (WA - 94.9% Nat- 91.6% )
- Treatment preferences: 100% (WA – 99.9% Nat- 99.5% )
- Beliefs/values addressed: 100% (WA – 97.6% Nat- 98.3% )
- Pain screening: 97.1% (WA -98.9% Nat-98.3%)
- Pain assessment:97.8% (WA -98.6% Nat-94.8%)
- Dyspnea treatment: 97.3% (WA -98.5% Nat- 97.4%)
- Dyspnea screening: 97.8% (WA -99.6% Nat- 99.0%)
- Patients treated with an Opioid who are given a bowel regimen:100% (WA -99.6% Nat- 93.2%)

## HVLDL: Hospice visits in last days of life

- 35.3% (WA 50.6%, Nat 47.9%)
- Identified as an area for improvement in 2024

## HCI: Hospice Care Index Score: 10 (highest possible score)



Hospice Stoplight Report

Service Dates From Oct 1, 2022 to Sep 30, 2023

<https://catalyst.nrcpicker.com/JeffersonH/PatExp/hospsr2/default.aspx>

December 1, 2023



		Picker Dimensions		Benchmarks		Rolling Averages up to 8/30/2023	Jefferson Healthcare Hospice		
Overall		NRC 75th Percentile*	NRC Average	Bed Size 0-49 Average	3 Months‡		Qtr 3 2023‡	Qtr 2 2023	Qtr 1 2023
Please answer the following questions about your family member's care from the hospice named on the survey cover. Do not include care from other hospices in your answers.		88.6% (n=7,682)	86.1% (n=7,682)	--	88.9%µ PR=78 (n=18)		81.8%µ PR=25 (n=11)	80.0%µ PR=17 (n=15)	85.7%µ PR=47 (n=7)
Using any number from 0 to 10, where 0 is the worst hospice care possible and 10 is the best hospice care possible, what number would you use to rate your family member's hospice care?									
Highest Scores		NRC 75th Percentile*	NRC Average	Bed Size 0-49 Average	3 Months‡		Qtr 3 2023‡	Qtr 2 2023	Qtr 1 2023
Would you recommend this hospice to your friends and family?	Would Recommend	91.2% (n=7,699)	86.8% (n=7,699)	--	100.0%µ PR=100 (n=18)		100.0%µ PR=100 (n=11)	86.7%µ PR=39 (n=15)	85.7%µ PR=35 (n=7)

## Hospice Patient Experience:

Key Drivers		NRC 75th Percentile*	NRC Average	Bed Size 0-49 Average	3 Months‡	Qtr 3 2023‡	Qtr 2 2023	Qtr 1 2023
Did the hospice team give you the training you needed about how to help your family member if he or she had trouble breathing?	Information and Education	83.4% (n=2,472)	77.7% (n=2,472)	--	100.0%µ PR=100 (n=3)	100.0%µ PR=100 (n=2)	100.0%µ PR=100 (n=2)	75.0%µ PR=35 (n=4)
While your family member was in hospice care, how often did the nursing home staff and hospice team work well together to care for your family member?	Coordination of Care	--	61.8% (n=1,543)	--	100.0%µ (n=1)	--	100.0%µ (n=1)	0.0%µ (n=1)
While your family member was in hospice care, how often did the hospice team keep you informed about your family member's condition?	Information and Education	84.2% (n=7,694)	80.8% (n=7,694)	--	94.4%µ PR=99 (n=18)	90.9%µ PR=98 (n=11)	80.0%µ PR=49 (n=15)	71.4%µ PR=5 (n=7)

### Opportunity:

In the weeks after your family member died, how much emotional support did you get from the hospice team?	Emotional Support	92.0% (n=7,314)	88.7% (n=7,314)	--	88.2%µ PR=44 (n=17)	90.0%µ PR=57 (n=10)	93.3%µ PR=85 (n=15)	71.4%µ PR=1 (n=7)
---	-------------------	--------------------	--------------------	----	---------------------------	---------------------------	---------------------------	-------------------------

2023 Update

# Palliative Care

# Strengths

- Fully staffed
- Full-time coordinator on staff
- PA in November (Sara Katz), ARNP in December (Linda Calderwood)
- Dr. Mattern leading
- Fully accredited
- Ripe for growth of chosen model



# Challenges

- Program development slowed by APRN transition out in Oct. 2022
- Dr. Mattern held program together in interim, with 29 referrals from October 2022 to November 2023
- Lack of a current physical location to see patients who may need to come in for care
- Social Work and Spiritual Care Needs

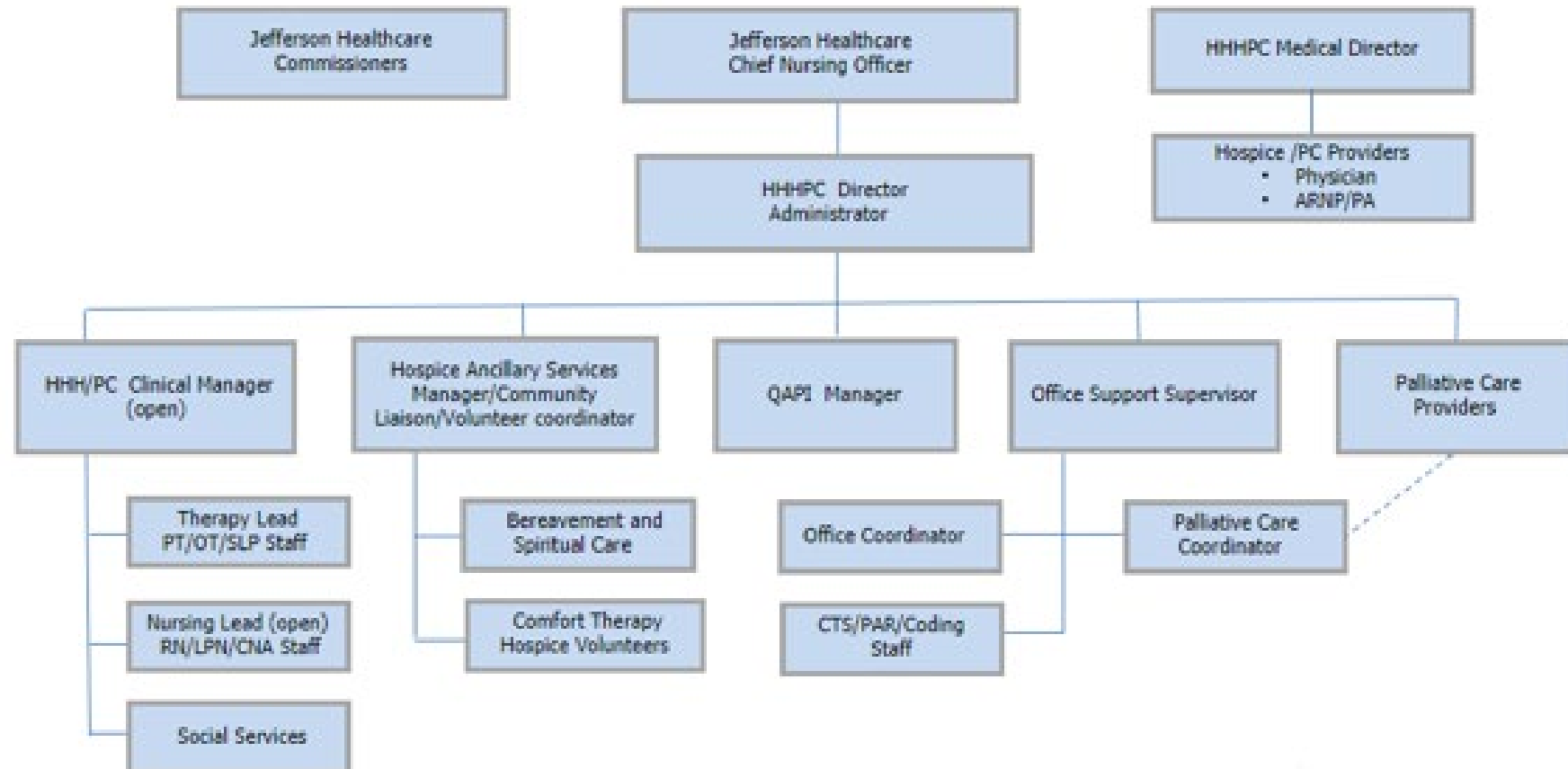
# Opportunities

- Opportunity to develop a program fine-tuned to the needs of Jefferson County residents.
- Acquisition of clinic space at Sheridan Clinic and Quilcene Clinic to see patients
- Review accreditation standards and procedures
- Identify and update quality measures
- Update workflows
- Continue to standardize program
- Improve EPIC Reporting
- Build a robust program that services physician groups in the community (Cancer Care, Hospitalists, community physicians, etc.)

2023 Update

# HHHPC Structure

**Jefferson Healthcare  
Home Health Hospice and Palliative Care  
(HHHPC)  
2024 Draft Structure**



# What's Next in 2024?

Home Health Hospice and Palliative Care:  
Strategic Planning

Home Health and Hospice: Electronic Visit  
Verification, Process Optimization

Home Health: Value Base Purchasing and OASIS E  
Optimization

Hospice: Hospice Outcomes and Patient  
Evaluation Tool

Palliative Care: Program evaluation and process  
development

# Jefferson Healthcare

October 2023 Finance Report

December 19, 2023

Tyler Freeman, CFO

# October 2023

## Operating Statistics

STATISTIC DESCRIPTION	OCT 2023						OCT 2022			
	MO ACTUAL	MO BUDGET	% VARIANCE	YTD ACTUAL	YTD BUDGET	% VARIANCE	MO ACTUAL	% VARIANCE	YTD ACTUAL	% VARIANCE
FTEs - TOTAL (AVG)	665	688	3%	616	688	10%	594	-12%	573	-8%
ADJUSTED PATIENT DAYS	3,548	3,041	17%	32,440	29,819	9%	3,230	10%	29,488	10%
ICU PATIENT DAYS (IP + OBSERVATION, MIDNIGHT CENSUS)	61	108	-44%	813	1,058	-23%	98	-38%	1,054	-30%
ACU PATIENT DAYS (IP + OBSERVATION, MIDNIGHT CENSUS)	330	297	11%	3,026	2,910	4%	301	10%	2,878	5%
PATIENT DAYS (ACU, ICU, SWING), INCLUDES OBSERVATION	391	422	-7%	3,906	4,135	-6%	417	-6%	4,013	-3%
SURGERY CASES (IN OR)	138	133	4%	1,289	1,308	-1%	141	-2%	1,237	4%
SPECIAL PROCEDURE CASES	82	71	15%	846	695	22%	74	11%	718	15%
LAB BILLABLE TESTS	23,298	21,832	7%	214,186	214,096	0%	20,928	11%	208,755	3%
TOTAL DIAGNOSTIC IMAGING TESTS	3,575	3,235	11%	33,212	31,715	5%	1,598	124%	14,407	57%
PHARMACY MEDS DISPENSED	21,977	19,897	10%	214,747	195,123	10%	21,178	4%	193,065	10%
RESPIRATORY THERAPY PROCEDURES	3,164	3,259	-3%	28,569	31,955	-11%	3,191	-1%	29,900	-5%
REHAB/PT/OT/ST	8,727	9,458	-8%	82,935	92,746	-11%	7,454	17%	81,810	1%
ER CENSUS	1,204	1,068	13%	11,873	10,472	13%	1,120	8%	10,567	11%
DENTAL CLINIC	522	419	25%	4,798	4,109	17%	387	35%	4,143	14%
TOTAL RURAL HEALTH CLINIC VISITS	8,115	6,623	23%	69,983	64,946	8%	6,282	29%	61,374	12%
TOTAL SPECIALTY CLINIC VISITS	3,831	3,765	2%	37,799	38,179	-1%	3,386	13%	35,058	7%

# October 2023

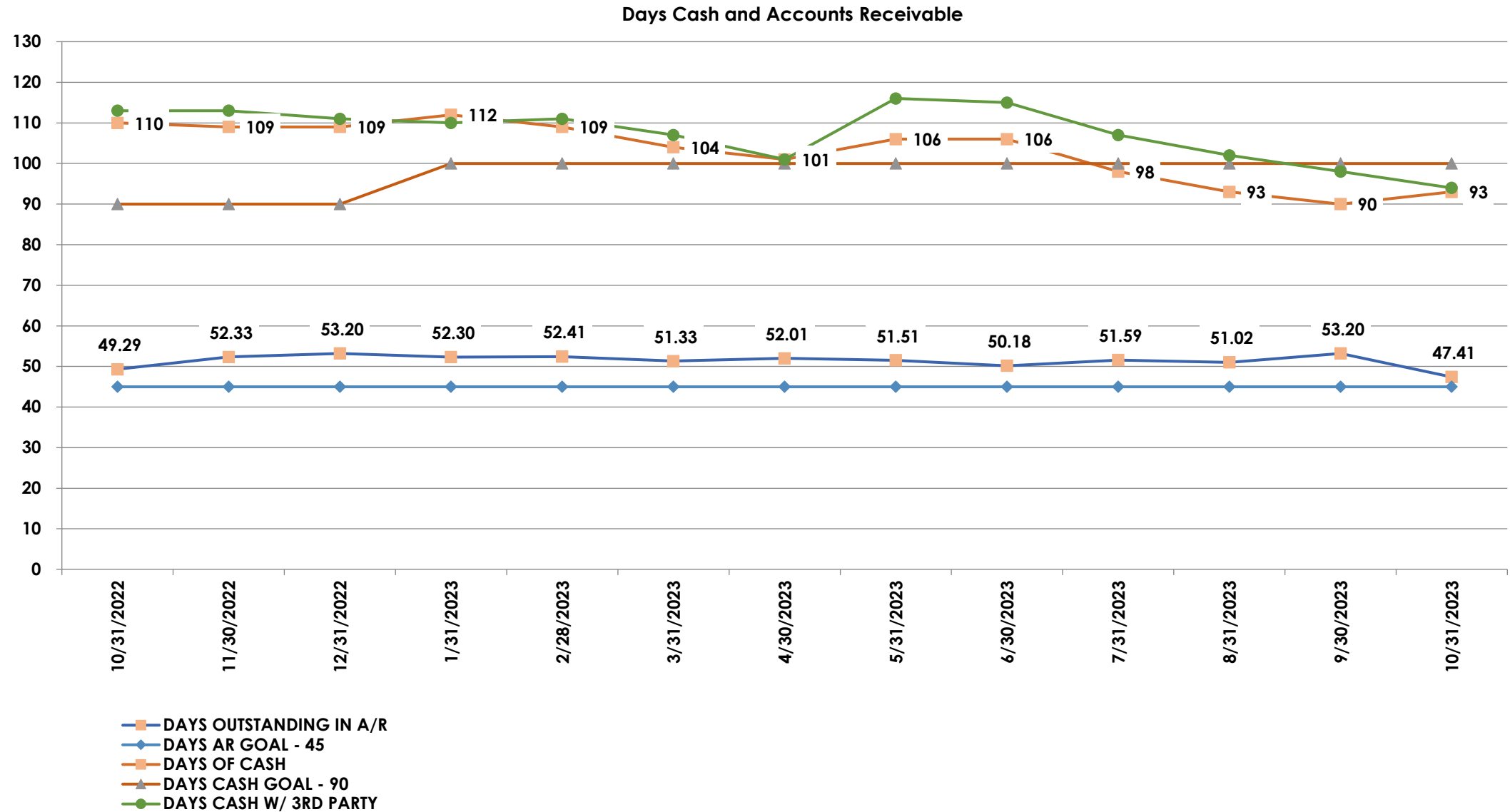
## Income Statement Summary

	October 2023 Actual	October 2023 Budget	Variance Favorable/ (Unfavorable)	%	October 2023 YTD	October 2023 Budget YTD	Variance Favorable/ (Unfavorable)	%	October 2022 YTD
<b>Operating Revenue</b>									
Gross Patient Service Revenue	31,702,439	29,491,437	2,211,002	7%	301,093,710	289,206,347	11,887,363	4%	262,675,929
Revenue Adjustments	17,434,172	15,847,480	(1,586,692)	-10%	163,510,824	155,407,546	(8,103,278)	-5%	141,691,863
Charity Care Adjustments	507,949	187,886	(320,063)	-170%	2,887,976	1,842,493	(1,045,483)	-57%	1,261,014
Net Patient Service Revenue	13,760,318	13,456,071	304,247	2%	134,694,910	131,956,309	2,738,601	2%	119,723,052
Other Revenue	535,783	452,638	83,145	18%	6,377,782	4,438,770	1,939,012	44%	7,642,173
Total Operating Revenue	14,296,101	13,908,709	387,392	3%	141,072,691	136,395,078	4,677,613	3%	127,365,225
<b>Operating Expenses</b>									
Salaries And Wages	6,334,381	6,899,538	565,158	8%	64,015,512	67,659,991	3,644,479	5%	60,657,706
Employee Benefits	1,458,923	1,564,367	105,444	7%	14,752,934	15,340,891	587,957	4%	13,970,640
Other Expenses	6,468,738	5,041,491	(1,427,247)	-28%	59,176,166	49,439,134	(9,737,032)	-20%	50,580,592
Total Operating Expenses	14,262,041	13,505,396	(756,645)	-6%	137,944,612	132,440,016	(5,504,597)	-4%	125,208,938
Operating Income (Loss)	34,059	403,312	(369,253)	-92%	3,128,079	3,955,063	(826,983)	-21%	2,156,286
Total Non Operating Revenues (Expenses)	5,600	(1,730)	7,330	424%	1,087,231	(16,965)	1,104,196	6509%	205,409
Change in Net Position (Loss)	39,659	401,582	(361,923)	-90%	4,215,310	3,938,097	277,213	7%	2,361,695
Operating Margin	0.2%	2.9%	-2.7%	-91.8%	2.2%	2.9%	-0.68%	-23.5%	1.7%
Total margin	0.3%	2.9%	-2.6%	-90.4%	3.0%	2.9%	0.10%	3.5%	1.9%
Salaries & Benefits as a % of net pt svc rev	-56.6%	-62.9%	6.3%	10.0%	-58.5%	-62.9%	4.42%	7.0%	-62.3%



# September 2023

## Cash and Accounts Receivable



# November 2023

Preview — (\*as of 0:00 11/30/23)

- **\$ 29,784,482 in Projected HB charges**

- Average: \$992,816/day (HB only)
- Budget: \$947,481/day
- 104.8% of Budget

- **\$13,500,760 in HB cash collections**

- Average: \$450,025/day (HB only)
- Goal: \$417,444/day

- **47.10 Days in A/R**

- **Questions**

# December 2023

Preview — (\*as of 0:00 12/17/23)

- **\$ 32,403,392 in Projected HB charges**
  - Average: \$1,045,271/day (HB only)
  - Budget: \$947,481/day
  - 110.3% of Budget
- **\$9,879,333 in HB cash collections**
  - Average: \$318,688/day (HB only)
  - Goal: \$417,444/day
- **51.6 Days in A/R**
- **Questions**

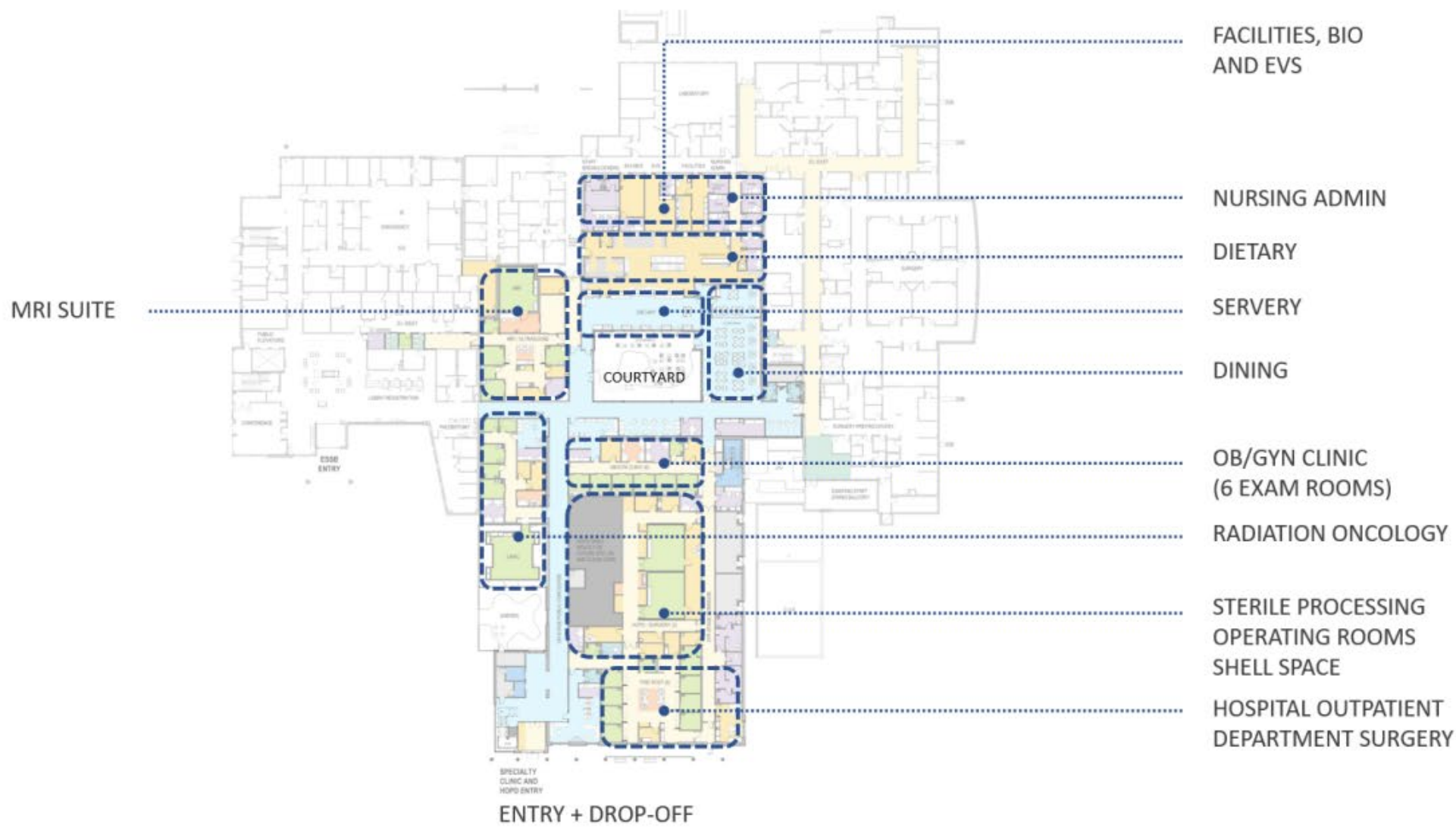
# Building Update

*December 2023*



View from Sheridan Ave + 7<sup>th</sup> St

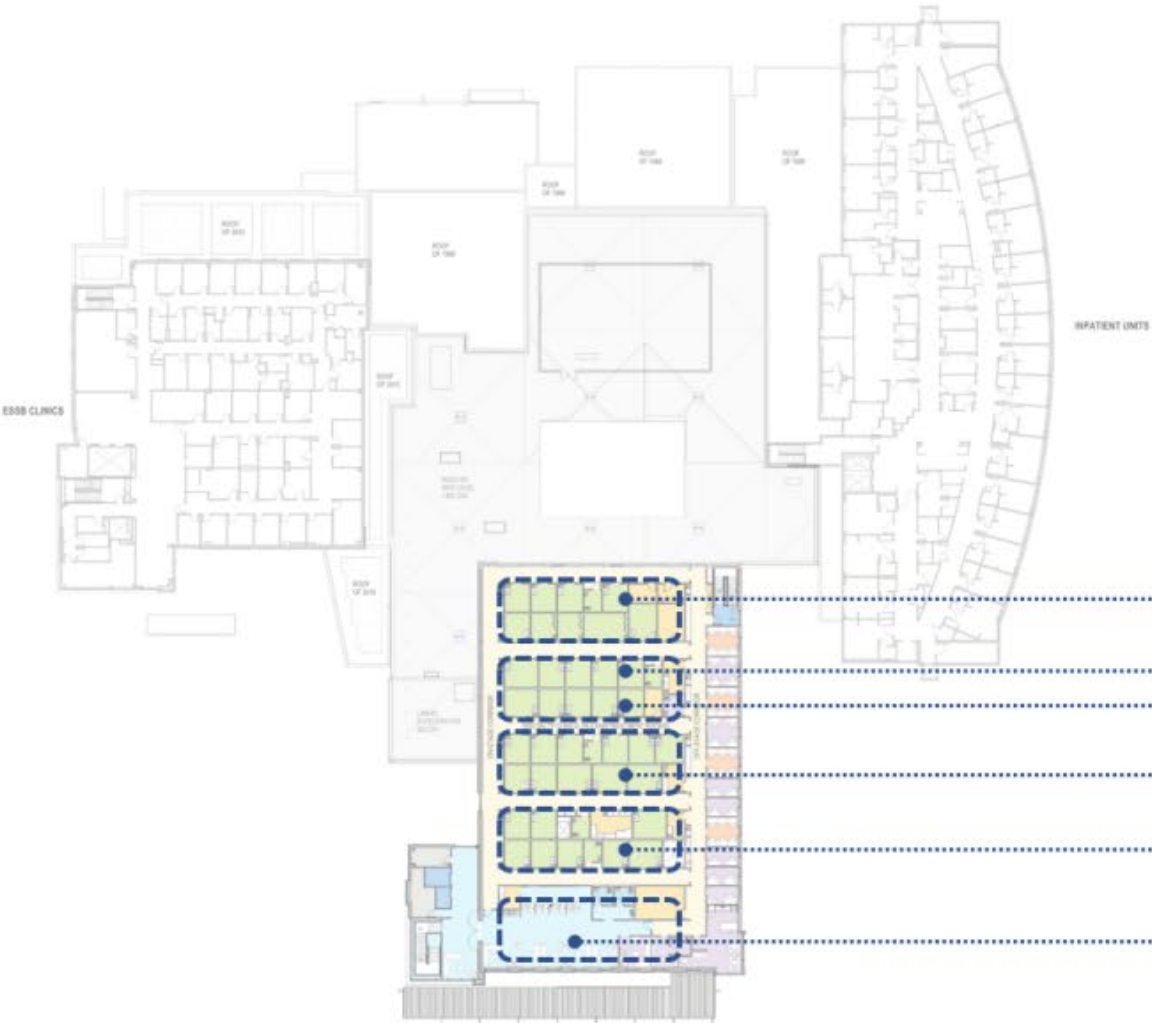
# Level 1 Floor Plan





# Level 2 Floor Plan

38 Exam Rooms



- PULMONARY, NEUROLOGY,  
WOUND CLINIC
- UROLOGY CLINIC  
ENT CLINIC
- HAND CLINIC
- DERMATOLOGY CLINIC
- REGISTRATION

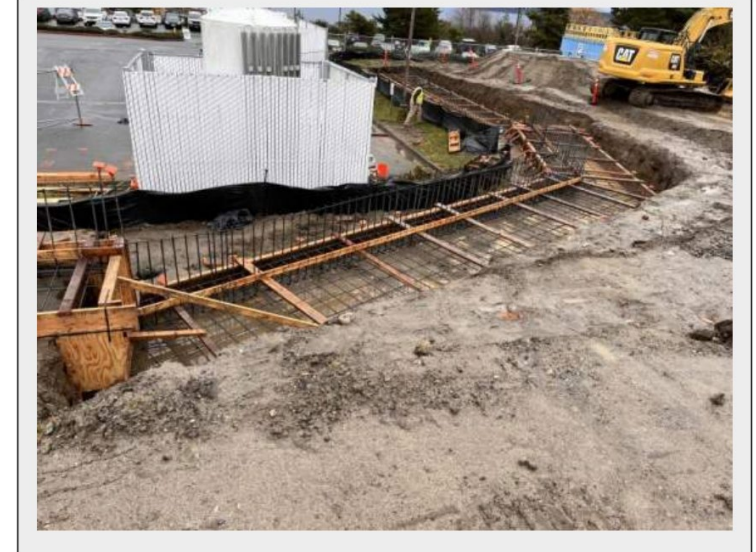
# Construction Update



Salvaged fountain, benches, and gates saved in Orchard Lot and protected with water filled barriers



CUP retaining wall footing formwork is in progress (looking South)



CUP retaining wall footing formwork is in progress (looking East)







[ABOUT ▾](#)[PROJECTS](#)[SOLUTIONS](#)[CAREERS ▾](#)[PARTNERS ▾](#)[NEWS](#)[CONTACT](#)

# JEFFERSON HEALTHCARE

SOUTH CAMPUS REPLACEMENT & ADDITION PROJECT  
CONSTRUCTION UPDATES

## ABOUT THE PROJECT

The Jefferson Hospital expansion project includes the demolition of older buildings in the central portion of the campus. The new construction will comprise approximately 56,000 gsf of space, including 19,000 gsf as one-story infill spaces, featuring public, kitchen, dining, offices and radiology. A linear accelerator (LINAC) space will be constructed as a standalone building. The two-story medical office building (MOB) will be approximately 37,000 gsf, including two ambulatory operating rooms and associated pre- and post-op spaces at the ground level, and offices and multiple

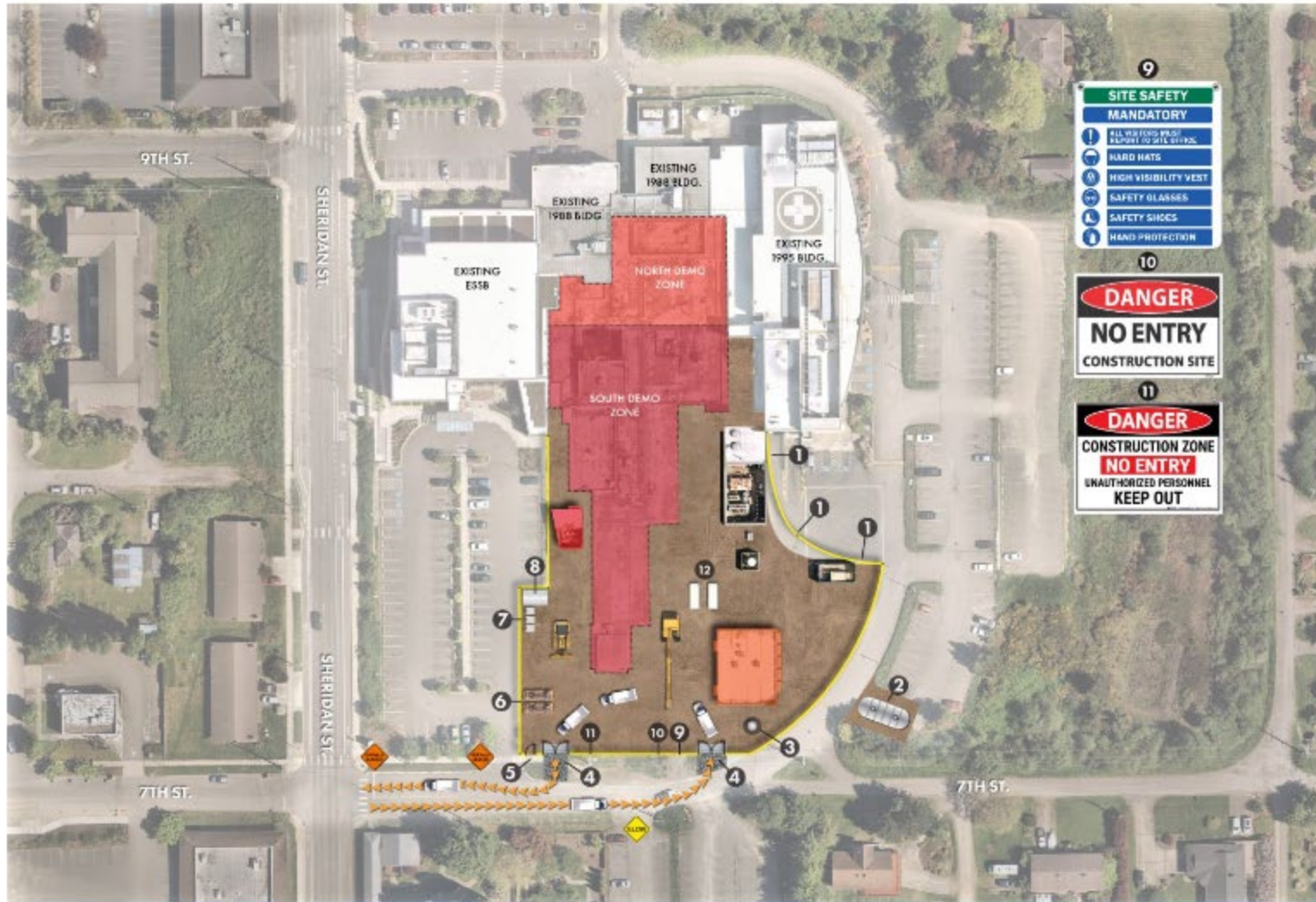
## CONTACT US

Name \*

FIRST

LAST

## SITE LOGISTICS MAPS



- 1 Construction fencing at CUP will be adjusted to maintain minimum construction clearances as required by scope/schedule. We will maintain maximum access to loading docks at all times.
- 2 Site Water Management Tanks
- 3 Site Sump for Dewatering
- 4 Site Access Gate - SWPPP Measures Utilized
- 5 Construction Personnel Walk in Access Gate
- 6 (2) General Waste Dumpsters
- 7 Temporary Toilets - (2) Mens, (1) Womens
- 8 Construction Personnel Lunch Room
- 9 Construction Signage #1
- 10 Construction Signage #2
- 11 Construction Signage #3
- 12 (2) Material Storage Cones

2023

OCT

NOV

DEC

2024

JAN

FEB

MAR

APR

MAY

JUN

JUL

AUG

SEP

OCT

NOV

DEC

2025

JAN

FEB

MAR

APR

MAY

JUN



CURRENT PROJECT IMAGE (UPDATED EVERY 10 MINUTES)



Demolition

Move in Summer of 2025

Jan.-Feb. 2024

2024-2025

2025

Construction

# Financing Update

- Closed on 12/19
  - Siemens \$21.65 Million
  - JPMorgan- \$25 Million
  - Public Offering- \$66.25 Million
- Paid Off
  - USDA- \$15.25 Million
  - 2012 Note- \$2.12 Million

# Other Sources of Funding

- Federal Government
  - Radiation Oncology FY 2023: \$2.5 Million
  - Specialty Services FY 2024: \$2 Million (in both House and Senate Budgets)
- Washington State
  - Reproductive Health FY 2023: \$4 Million
  - Jefferson Healthcare Foundation: \$2.5 Million (in process)

# Construction Update

- Guaranteed Maximum Price signing tomorrow 12/21.
- Pre-GMP work mostly done, transitioning to full GMP phase.
- Abatement continues in the north side.
- Retain wall being poured tomorrow.
- Demolition slated to start January 9<sup>th</sup>.

# Jefferson Healthcare

## Administrative Report

December 20, 2023

Mike Glenn





# Healthier Together Update

Carrie Hite, City of Port Townsend



# Value Based Purchasing

A Monthly Review  
December 2023

# Jefferson Accountable Care, LLC

Jefferson Healthcare is committed to innovative, patient-centered and physician-and-APP-driven models for care transformation.

Jefferson Accountable Care is made up of over 8,000 Medicare-covered lives in our community.

Jefferson Accountable Care solely consists of Jefferson Healthcare patients and is operated by Jefferson Healthcare staff.

Jefferson Accountable Care includes all our clinicians under our TIN.

<https://jeffersonhealthcare.org/about-us/medicare-aco/>

# JAC Administrative Updates

- We are required to notify beneficiaries two times per year that they are assigned to our ACO.
- The second notification will go out this week via an email.
- I will send the board this document so you have it as well.

## Medicare Shared Savings Program

### Accountable Care Organizations

Working together to give you the best care.

**Jefferson Healthcare** is part of an Accountable Care Organization (ACO)

#### *We provide coordinated care for you to get well & stay well:*

- You get patient-centered care focused on your needs. Better coordination helps your primary care provider focus on taking care of you.
- You may save time, money, and frustration by avoiding repeated tests and appointments.
- Your benefits stay the same – we just work on better coordinating your care with external providers!

#### *Get the most from your care with our communication & support:*

- If you haven't already signed up for MyChart, ask us how. You'll get 24-hour access to your personal health information, including lab results and communication from your health care provider.
- You can visit [Medicare.gov](https://www.medicare.gov) and log into (or create) your secure Medicare account to choose a primary care doctor.
- Medicare protects the privacy of your health information. If you don't want Medicare to share information with your health care providers for care coordination, call 1-800-MEDICARE (1-800-633-4227). Medicare may still share general information to measure provider quality. For more information on how Medicare may use and give out your information, visit [Medicare.gov](https://www.Medicare.gov) and search for "privacy."

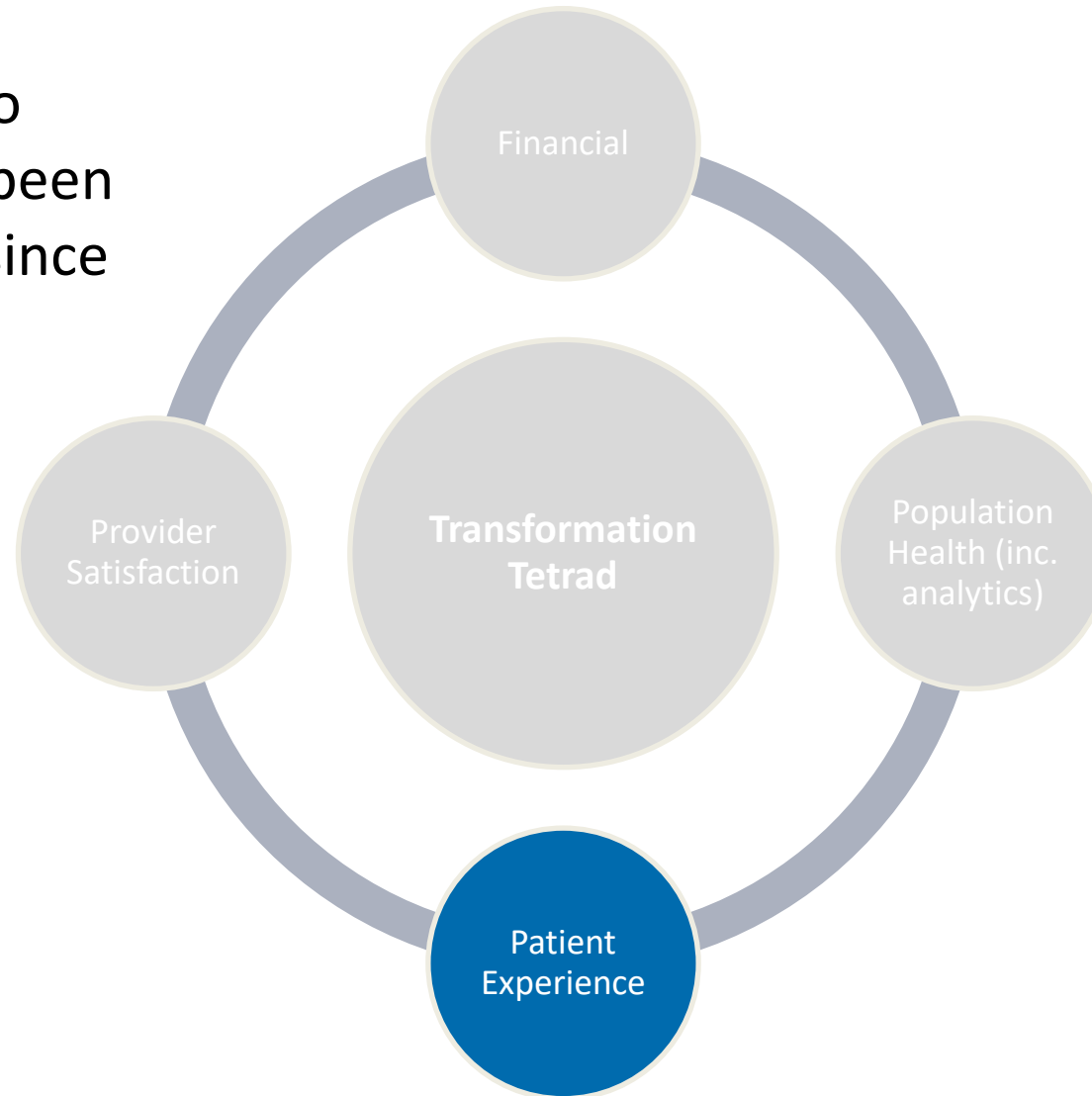
#### *Want more information?*

Ask our front desk, call us at 360-385-2200 extension 4958, or visit our website at [Jeffersonhealthcare.org/about-us/medicare-aco/](https://Jeffersonhealthcare.org/about-us/medicare-aco/). You can also visit [Medicare.gov](https://www.Medicare.gov) or call 1-800-MEDICARE (1-800-633-4227). TTY users can call 1-877-486-2048.

To report a Medicare-related concern or complaint, call 1-800-MEDICARE (1-800-633-4227).

# Implementing the Transformation Tetrad

- Focus is on outreach to patients who haven't been seen by primary care since before 2022.



# Advocacy

December 2023

# WSHA Draft Legislative Agenda | Policy

- Ensure access to care is not threatened by reduction in payments to hospitals.
- Allow hospitals and providers to continue to merge, affiliate and engage in business transactions.
- Allow EMS personnel to work in hospitals with a new credential.
- Support modernization of state medical record retention law. (*Current law: maintain medical records for at least 10 years following the most recent discharge*)

# Advocacy | Federal

- Remaining hopeful on Expanding Healthcare for Rural Seniors federal appropriation.
- Interesting legislation on expanding CAHs (SB 1571) and funding rural community facilities (HR 5989)
- FY2024 Spending Bill and Expiring Program deadlines are coming up (1/19 and 2/2)



# Admin Report

- DOC grant for early learning/child care center
  - Grant agreement ready to sign...\$1,000,000!
- Performance and culture improvement work
  - Final LDI completed 12/5
- OB Sustainability Task Force
- 2023 Year in Review Podcast will be recorded in mid-January
- State of Reform conference
  - Panelist

# Questions