

Wheatland Memorial Healthcare  
Board of Trustees' Meeting

The Meeting of the Board of Trustees of Wheatland Memorial Healthcare was held on October 27, 2016 in the Health Education Center.

**MEMBERS PRESENT:**

Aubrey Miller, <i>Chair</i>	June Voldseth, <i>Vice Chair</i>
Don Amundson, <i>Secretary/Treasurer</i>	Jenny Peters, <i>Trustee</i>
Tom Bennett, <i>Trustee</i>	

**EXCUSED MEMBERS:**

Katie Rein, *Trustee*

**OTHERS PRESENT:**

Kyle Gee, <i>Billings Clinic</i> (via phone)	Peggy Hiner, <i>HR Director</i>
Gia Holiway, <i>Clinic Director</i>	Brad Howell, <i>CEO</i>
Jane Moe, <i>Foundation Director</i>	Taylor Lies, <i>PA-C</i>
Hannah Sexton, <i>PA-C</i>	Kathy Jutila, <i>MD, COS</i>
John Hauck, <i>CPA w/ Eide Bailly</i>	Kayla Tellock, <i>Executive Secretary</i>

**WELCOME AND INTRODUCTION**

Mr. Miller called the meeting to order at 5:09 pm.

Health Insurance was added to the agenda under the financial section.

**SEPTEMBER MINUTES**

The September Board Minutes were presented. *Upon motion that was duly made by Mr. Bennett and seconded by Ms. Voldseth the September Board Minutes were adopted as presented.*

**REGULAR AGENDA**

***I. Audit***

- a. John Hauck with Eide Bailly discussed the Audit Report with the Board. *Upon motion that was duly made by Ms. Voldseth and seconded Ms. Peters the 2015 Audit Report was accepted as presented.*

***II. Information Report to Board***

- a. Clinic Tour
  - i. Ms. Holiway gave the Board of Trustees a tour of the clinic.

***III. Management Reports to the Board***

- a. CEO Report
  - i. Mr. Howell has been focusing on the responses from the state survey. The leadership team has been doing very well. Ms. Tellock is going to be our Policy Manager for Compliance 360. Ms. Fenley has been offered the DON position and she has accepted. Ms. Fenley has a lot of back ground in leadership with the military and we feel confident in our decisions.
- b. Clinic Report
  - i. Ms. Holiway discussed the Clinic Stats for the month of September. The clinic now has two employees out on FMLA. Ms. Hansen and Ms. Barnhart have been stepping in when they

are available to help check in patients. The nurses said they wouldn't mind picking up a few extra shifts so we did not hire a traveler.

c. Operational/Foundation/Marketing Report

- i. Ms. Moe was able to get approval from the insurance company for the med-locks we had to purchase for our door access due to the lightning strike. WMH will be reimbursed for the med-locks purchase.

d. HR Report

- i. Ms. Hiner reported that she will be taking the DON position off the open position list and adding the DON assistant to the list. So far we haven't been getting any applicants for nurses. We have been going through a company that has tried to provide us with applicants, but it never follows through. Ms. Hiner stated that she and Ms. Fenley will start going to colleges for recruiting. Ms. Fenley has some great ideas for recruiting that we are going to try.

#### IV. Financials

a. September Financials

- i. For September, we posted a loss of \$40,000. This was unfavorable to budget by \$16,000. Total Operating Revenues were positive against budget by \$59,000.
- ii. Our Operating Expenses were unfavorable to budget by \$24,000. Utilities were unfavorable to budget by \$8,000 due to e-Emergency communication line. Other Professional Expenses were unfavorable to budget by \$2,000 due to traveling staff.
- iii. Year to date, through 9 months; we have a loss of \$6,500. This loss was favorable to budget by \$186k. Total Operating Revenues are positive against budget by \$263k (6.3%). Our inpatient volumes (mostly due to the nursing home census) have been lower than budget by \$12,000 (5.8%), but outpatient is better than budget by \$224,000 (12.7%), and clinic revenues are favorable to budget by \$5,000 (.7%).
- iv. As part of the FY 2015 audit, the \$415k of Meaningful Use money was transferred out of August 2016 and recorded in December 2015.
- v. Year to date, Total Expenses are unfavorable to budget by \$125,000 (2.6%). Primarily due to the variance in Other Professional Fees for traveling Staff and Supplies due to increasing drug costs.
- vi. Balance Sheet, we ended the month with \$271,000 in Cash reserves. Cash increased by \$78,000 from the prior month resulting in 16 days of cash on hand. The increase of cash was a result of good collections, and an increase of \$156k in Accounts Payable.
- vii. We have \$2.0m in Restricted Funds, and \$1,019,000 in Net Patient Accounts Receivables. Our vendor payables balance was \$476,000, resulting in 28 days outstanding payables which are below the level we want it maintained.
- viii. Accounts Receivable days ended the month at 69; this was a 5 day increase from the prior month balance of 64 days.
- ix. *Upon motion that was duly made by Mr. Bennett and seconded by Ms. Peters the September financials were adopted as presented.*

b. Other Activities

- i. Business Office continues to work on a new patient statement and improving their processes and cleanup of the revenue cycle.
- ii. We reviewed a couple preliminary FY 2015 audit adjustments that would be discussed at the board meeting.

- iii. Ms. Hiner presented the proposed FY 2017 employee health insurance plan. *Upon motion that was duly made by Ms. Voldseth and seconded by Mr. Amundson the Board approved to keep the \$2,000 and \$2,500 deductions for the facilities health insurance plan.*

**V. Discussion Topics**

- a. State Survey
  - i. WMH had a State survey the first week of October. The surveyors were very pleased with most of the things we have going on. The only deficiencies we had were administration issues. Mr. Howell went over the 15 deficiencies, out of the deficiencies eight of them pertained to our policies and procedures. To help us maintain our policies and procedures better we have started using the program Compliance 360.
- b. Policy & Procedure Review
  - i. Part of our deficiency was not having the Boards oversight on the policy and procedures. Whenever there is a new policy it will be brought to the Board for approval.
  - ii. Compliance 360 is a program that will hold all of WMH policy and procedures. The program provides an automatic system that reminds department heads to review their policy and procedures on an annual basis. Compliance 360 provides us to run an audit report that shows who it's been approved by and when it was last reviewed.
  - iii. Ms. Tellock ran a report from Compliance 360 that shows all the policies that have been uploaded in the past two weeks. The report shows which policies have been approved and which policies have been published. The report contained roughly 380 policies. The Board members reviewed the list. At the next Board meeting Ms. Tellock will run a second report that will contain the policies that have been uploaded after today's date for the Boards approval. *Upon motion that was duly made by Mr. Amundson and seconded by Mr. Bennett the Policy and Procedures listed in the report were approved as presented.*
- c. Regional Leadership Conference Overview
  - i. The Board had discussed their experiences from the Regional Leadership Conference. Many thought it was nice to talk to other facilities and see what is going on at their facilities.
  - ii. During the Regional Leadership Conference it was asked if there was a governance survey that would allow us to ask how board members are doing as a team and as individuals. Mr. Gee has found a survey that Billings Clinic has used before and can send it to other facilities to compare results and see how everyone is ranking. Many of the questions on the survey are about the hospitals mission, quality, financial, and management. Mr. Gee will get this out the facilities and review the results once they are all in.
- d. Meaningful Use Update
  - i. Ms. Holiway will be going to a workshop on Friday for new training on Meaningful Use.
- e. Strategic Planning
  - i. On November 17<sup>th</sup> at the next Board meeting we will have recommendations on what we will need to do next for the CT scanner.
- f. Community Health Assessment
  - i. Ms. Moe reviewed the Community Health Assessment results with the Board. On November 14<sup>th</sup> the Leadership team will go over the results and make a plan on what things we can improve based on the results. The results will be put on our hospital website.
- g. Studer Group

- i. The contract for the Studer Group program has been signed. WMH will start the program at the first of the year.
- h. Lawson Update
  - i. Billings Clinic's main Lawson person had recently resigned. We are now waiting for an outside person to come in from Lawson and get us started on training.
- i. Ice Machine
  - i. Last week, Mr. Howell sent an email to the Board about the hospital's ice machine. The hospital has had the ice machine for many years, but it has stopped working. Maintenance staff was able to make temporary repairs until a new ice machine is ordered. The new ice machine will cost about \$4, 641.31 this does included a parts and labor warranty for three years and then a five year warranty the evaporator and compressor. *Upon motion that was duly made by Mr. Bennett and Ms. Voldseth the purchase of a new ice machine was approved as presented.*
- j. Trauma Designation Resolution
  - i. The Trauma Designation resolution was presented to the Board. *Upon motion that was duly made by Mr. Amundson and seconded by Ms. Peters the Trauma Designation Resolution were adopted as presented.*
- k. Annual Review Report
  - i. Mr. Howell went over the Annual Review Packet with the Board. There were questions pertaining to the Annual Review minutes. Mr. Howell will have them revised for the next Board meeting.
- l. Quality Reports to the Board
  - i. Mr. Howell discussed that he will start making a quality report of the hospital for the Board.

**VI. Announcements**

- a. Next WMH Board meeting will be held on ~~November~~ 17<sup>th</sup>, 2016 at 5:00 PM in the HEC room.

**VII. Executive Session**

- a. The executive session began at 7:18 pm.

**VIII. Adjournment**

- a. There being no further business to be brought before the Board, the meeting was adjourned at 8:13 pm.

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DON AMUNDSON, SECRETARY/TREASURER

*Jane W Voldseth*  
Vice Chair