

ECTOR COUNTY HOSPITAL DISTRICT BOARD OF DIRECTORS MEETING DECEMBER 1, 2020 – 5:30 p.m. MEDICAL CENTER HOSPITAL BOARD ROOM (2ND FLOOR) 500 W 4TH STREET, ODESSA, TEXAS

AGENDA (p.1-2)

- I. CALL TO ORDER Don Hallmark, President

- IV. MISSION / VISION / VALUES OF MEDICAL CENTER HEALTH SYSTEM Bryn Dodd (p.3)

V. AWARDS AND RECOGNITION

A. December 2020 Associate and Nurse of the Month...... Russell Tippin

- Associate: Cynthia Hernandez, Executive Assistant Emergency Department
- Nurse: Jodi Price, RN Charge Infusion Services

VI. CONFLICT OF INTEREST DISCLOSURE BY ANY BOARD MEMBER

VII. PUBLIC COMMENTS ON AGENDA ITEMS

- - A. Consider Approval of Regular Meeting Minutes, November 3, 2020
 - B. Consider Approval of Joint Conference Committee, November 24, 2020
 - C. Consider Approval of Federally Qualified Health Center Monthly Report, October 2020
 - D. MCHS Compliance Program Reaffirmation and Compliance Committee Charter
 - E. TCDRS Annual Contribution Authorization

IX. COMMITTEE REPORTS

A. Finance CommitteeBryn Dodd (p.33-105)

- 1. Financial Report for Month Ended October 31, 2020
- 2. Consent Agenda
 - a. Consider Approval of IsoRx Texas, Ltd. Pricing Agreement Renewal
 - b. Consider Approval of Abbott Rapid Diagnostics Informatics, Inc./RALS Interface Renewal
 - c. Consider Approval of Morrison Agreement Renewal/Amendment
 - d. Consider Approval of COVID-19 Onetime Pay Adjustment

- 3. Consider Approval of Engagement Letter with Weaver
- 4. Consider Approval of Shimadzu Service Agreement

5. Capital Expenditure Requests

- a. Consider Approval of Emergency Purchase of Swisslog Healthcare TransLogic Pneumatic Tube System Upgrade/Modernization
- b. Consider Approval of BD Pyxis ES Anesthesia Cabinets
- c. Consider Approval of Emergency Purchase Workstations on Wheels (WOWs) for COVID units
- d. Consider Approval of Versapulse power suite 60W Laser
- e. Consider Approval of Stryker TPX Small Bone Drill
- f. Consider Approval of BK5000 Ultrasound System
- g. Consider Approval of Cisco Fiber Channel (FC) Switch Replacement
- h. Consider Approval of End of Service Life (EOSL) Ethernet Switch Replacement

- 1. Update on Audit Plan
- 2. Update on Audit Pack examination from April 2020 and the Proposed 2020/2021 Project Plan

X. QUALITY ASSURANCE PERFORMANCE IMPROVEMENT (QAPI) Christin Timmons (p.106-113)

XI. PRESIDENT/CHIEF EXECUTIVE OFFICER'S REPORT AND ACTIONSRussell Tippin (p.114-115)

- A. COVID-19 Update
- B. Ad-hoc Reports
- C. Ronald McDonald House Update

XIII. EXECUTIVE SESSION

Meeting held in closed session involving any of the following: (1) Consultation with attorney regarding legal matters and legal issues pursuant to Section 551.071 of the Texas Government Code; and (2) Deliberation regarding negotiations for health care services, pursuant to Section 551.085 of the Texas Government Code.

XIV. ITEMS FOR CONSIDERATION FROM EXECUTIVE SESSION

- A. Consider Approval of MCH ProCare Provider Agreement(s)
- B. Consider Approval of MCH On-call Agreement(s)
- C. Consider Approval of Joint Venture

If during the course of the meeting covered by this notice, the Board of Directors needs to meet in executive session, then such closed or executive meeting or session, pursuant to Chapter 551, Texas Government Code, will be held by the Board of Directors on the date, hour and place given in this notice or as soon after the commencement of the meeting covered by this notice as the Board of Directors may conveniently meet concerning any and all subjects and for any and all purposes permitted by Chapter 551 of said Government Code.

<u>MISSION</u>

Medical Center Health System is a community-based teaching organization dedicated to providing high quality and affordable healthcare to improve the health and wellness of all residents of the Permian Basin.

<u>VISION</u>

MCHS will be the premier source for health and wellness.

<u>VALUES</u>

I-ntegrity C-ustomer centered A-ccountability R-espect E-xcellence



ECTOR COUNTY HOSPITAL DISTRICT BOARD OF DIRECTORS REGULAR BOARD MEETING NOVEMBER 3, 2020 – 5:30 p.m.

MINUTES OF THE MEETING

MEMBERS PRESENT:

Don Hallmark, President Mary Lou Anderson David Dunn Wallace Dunn Richard Herrera

MEMBERS ABSENT:

Bryn Dodd, Vice President Ben Quiroz

OTHERS PRESENT:

Russell Tippin, President/Chief Executive Officer Steve Ewing, Chief Financial Officer Steve Steen, Chief Legal Counsel Matt Collins, Chief Operating Officer Adiel Alvarado, President of MCH ProCare Christin Timmons, Chief Nursing Officer Dr. Timothy Benton, Vice Chief of Staff Mary Gallegos, Risk Manager Dr. Gary Ventolini, TTUHSC Permian Basin Kerstin Connolly, Paralegal Michaela Johnson, Executive Assistant to CEO

OTHERS VIRTUALLY PRESENT:

Dr. Donald Davenport, Chief of Staff Tina Leal, Vice President Physician and Community Relations Linda Carpenter, Vice President Information Tech/CIO Various other interested members of the Medical Staff, employees, and citizens

I. CALL TO ORDER

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Don Hallmark, President, called the meeting to order at 5:53 p.m. in the Ector County Hospital District Board Room at Medical Center Hospital. Notice of the meeting was properly posted as required by the Open Meetings Act.

II. INVOCATION

Chaplain Doug Herget offered the invocation.

III. PLEDGE OF ALLEGIANCE

Don Hallmark led the Pledge of Allegiance to the United States and Texas flags.

IV. MISSION/VISION OF MEDICAL CENTER HEALTH SYSTEM

Richard Herrera presented the Mission, Vision and Values of Medical Center Health System.

V. CONFLICT OF INTEREST DISCLOSURE BY ANY BOARD MEMBER

No conflicts were disclosed.

VI. PUBLIC COMMENTS ON AGENDA ITEMS

No comments from the public were received.

VII. CONSENT AGENDA

- A. Consider Approval of Regular Meeting Minutes, October 6, 2020
- B. Consider Approval of Joint Conference Committee, October 27, 2020
- C. Consider Approval of Federally Qualified Health Center Monthly Report, September 2020
- D. Consider Approval of moving ECHD Finance and Board Meeting from December 1, 2021 to December 7, 2021

David Dunn moved and Richard Herrera seconded the motion to approve the items listed on the Consent Agenda as presented. The motion carried unanimously.

VIII. COMMITTEE REPORTS

A. Finance Committee

- 1. Quarterly Investment Report Quarter 4, FY 2020
- 2. Quarterly Investment Officer's Certification
- 3. Financial Report for Month Ended September 30, 2020
- 4. Consent Agenda
 - a. Consider Approval of CVA Advertising and Marketing Contract Agreement
 - b. Consider Approval of Hologic SecurView Contract Renewal Agreement
 - c. Consider Approval of SOFIE Pricing Agreement Renewal
- 5. Consider Approval of Scorpion Website Agreement
- 6. Consider Approval of da Vinci Xi Robot Lease Agreement
- 7. COVID-19 Partnerships with Odessa College and City of Odessa
- 8. Capital Expenditure Request

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a. Consider Approval of Emergency Department Belmont Rapid Infuser

David Dunn moved and Wallace Dunn seconded the motion to approve the Finance Committee report as presented. The motion carried unanimously.

IX. PRESIDENT/CHIEF EXECUTIVE OFFICER'S REPORT AND ACTIONS

A. COVID-19 Update

Russell Tippin provided a report on Medical Center Hospital and the response to the COVID-19 virus.

MCH currently has 51 patients inhouse, 8 or 9 patients have been discharged. There are 60 MCH employees out on leave with most due to cohabitation. There were 13 deaths in October, 10 of those were Ector County residents. The intensivists are providing night coverage now. Elective surgery numbers are holding strong. On Friday, 8 nurses and 3 respiratory therapists arrived from FEMA to help with coverage.

This report was for information only. No action was taken.

B. Ad-hoc Reports

- 1. Regional Services Update was provided.
- 2. DNV Accreditation arrived today and will be at MCH for 4 days performing a survey. The closing session will be on Friday at 12:00 and the board is invited to listen in.

These reports were for information only. No action was taken.

C. Emergency Department Utilization Update

Christin Timmons, Chief Nursing Officer, provided an update on the Emergency Department Utilization project.

This report was for information only. No action was taken.

X. TTUHSC AT THE PERMIAN BASIN

Dr. Gary Ventolini provided the TTUHSC at the Permian Basin Report for information only. No action was taken.

XI. EXECUTIVE SESSION

Don Hallmark stated that the Board would go into Executive Session for the meeting held in closed session involving any of the following: (1) Consultation with attorney regarding legal matters and legal issues pursuant to Section 551.071 of the Texas Government Code; (2) Deliberation Regarding Real Property pursuant to Section 551.072 of the Texas Government Code; (3) Deliberation regarding Personnel Matters pursuant to Section 551.074 of the Texas³ ^{G of 115} Government Code; (4) Deliberations regarding negotiations for health care services, pursuant to Section 551.085 of the Texas Government Code; (5) Deliberation regarding Economic Development Negotiations pursuant to Section 551.087 of the Texas Government Code.

ATTENDEES for the entire Executive Session: ECHD Board members Don Hallmark; Mary Lou Anderson, David Dunn, Wallace Dunn, Richard Herrera, Russell Tippin, Steve Steen, Steve Ewing, Kerstin Connolly, and Michaela Johnson. Matt Collins, Chief Operating Officer, reported to the Board of Directors regarding property leases and provided an update on the Strategic Planning during Executive Session then was excused.

Adiel Alvarado, President of MCH ProCare, reported to the Board of Directors regarding ProCare provider agreements during Executive Session then was excused.

Mary Gallegos, Risk Manager, reported to the Board of Directors during Executive Session then was excused.

Russell Tippin, Chief Executive Officer, reported to the Board of Directors during Executive Session.

Steve Steen, Chief Legal Counsel, reported to the Board of Directors during Executive Session.

Executive Session began at 6:23 pm. Executive Session ended at 7:30 p.m.

No action was taken during Executive Session.

XII. ITEMS FOR CONSIDERATION FROM EXECUTIVE SESSION

A. Consider Approval of MCH ProCare Provider Agreements

Don Hallmark presented the following renewal/amendment:

- George Rodenko, M.D. This is a 2-year renewal for Radiology.
- Nick Azarov, M.D. This is an amendment for Critical Care Agreement.

Don Hallmark presented the following new agreement:

• Emily Combs, FNP, MSN This is a 3-year agreement for Electrophysiology.

Wallace Dunn moved and Richard Herrera seconded the motion to approve the ProCare provider agreements as presented. The motion carried unanimously.

B. Consider Approval of MCH Lease Agreements

Don Hallmark presented the following lease agreements:

- ProCare Internal Medicine, 8050 Hwy 191, Suite 200-201. This is a 1-year lease agreement.
- ProCare Orthopedics, 8050 Hwy 191, Suite 210. This is a 1-year lease agreement.

Wallace Dunn moved and Mary Lou Anderson seconded the motion to approve the medical director agreements as presented. The motion carried unanimously.

C. Consider Approval of the ECHD Board's Delegation of Grievances to the Grievance Committee

Don Hallmark presented the request to have the ECHD Board delegate the responsibilities for grievances to the MCH Grievance Committee.

Richard Herrera moved and Wallace Dunn seconded the motion to approve the delegation of grievances to the Grievance Committee as presented. The motion carried unanimously.

XIII. ADJOURNMENT

There being no further business to come before the Board, Don Hallmark adjourned the meeting at 7:32 p.m.

Respectfully submitted,

David Dunn, Secretary Ector County Hospital District



ECTOR COUNTY HOSPITAL DISTRICT BOARD OF DIRECTORS

Item to be considered:

Medical Staff and Allied Health Professionals Staff Applicants

Statement of Pertinent Facts:

Pursuant to Article 3 of the Medical Staff Bylaws, the application process for the following Medical Staff and Allied Health Professional applicants is complete. The Joint Conference Committee and the Medical Executive Committee recommend approval of privileges or scope of practice and membership to the Medical Staff or Allied Health Professionals Staff for the following applicants, effective upon Board Approval.

Medical Staff:

Applicant	Department	Specialty/Privileges	Group	Dates
Vijay Eranki, MD	Medicine	Endocrinology	TTUHSC	12/01/2020- 11/30/2021
Kelly Struble, DO	Medicine	Infectious Disease	Eagle Telemedicine	12/01/2020- 11/30/2021

Allied Health:

Applicant	Department	AHP Category	Specialty/ Privileges		Sponsoring Physician(s)	Dates
Emily Combs, NP	Cardiology	AHP	Nurse Practitioner	ProCare	Dr. Zagrodzky	12/01/2020- 11/30/2022
Duhiangchin Thianhlun, PA	OB/GYN	AHP	Physician Assistant	Permian's Women Center	Dr. Pill Raja	12/01/2020- 11/30/2022

*Please grant temporary Privileges

Advice, Opinions, Recommendations and Motions:

If the Hospital District Board of Directors concurs, the following motion is in order: Accept the recommendation of the Medical Executive Committee and the Joint Conference Committee and approve privileges and membership to the Medical Staff as well as scope of practice and Allied Health Professional Staff membership for the above listed applicants.



ECTOR COUNTY HOSPITAL DISTRICT BOARD OF DIRECTORS

Item to be considered:

Reappointment of the Medical Staff and/or Allied Health Professional Staff

Statement of Pertinent Facts:

The Medical Executive Committee and the Joint Conference Committee recommends approval of the following reappointments of the Medical Staff and Allied Health Professional Staff as submitted. These reappointment recommendations are made pursuant to and in accordance with Article 5 of the Medical Staff Bylaws.

Medical Staff:

Applicant	Department	Status Criteria Met	Staff Category	Specialty/ Privileges	Group	Changes to Privilege	Dates
Jared Browning, MD	Radiology	Yes	Telemedicine	Telemedicine	VRAD	None	12/01/2020- 11/30/2022
Kevan Akrami, MD	Medicine	Yes	Associate	Infectious Disease	Eagle Telemedicin e	None	02/01/2021- 01/31/2022
David Fitzgerald, MD	Medicine	Yes	Associate	Infectious Disease	Eagle Telemedicin e	None	02/01/2021- 01/31/2022
Tariq Khan, MD	Surgery	Yes	Affiliate	Surgery	Texas Health	None	02/01/2021-01/31/2022
Charles Kutler, MD	Medicine	Yes	Associate	Infectious Disease	Eagle Telemedicin e	None	02/01/2021- 01/31/2022
Timothy Braatz, MD	Radiology	Yes	Telemedicine	Telemedicine	VRAD	None	02/01/2021-01/31/2023
Karen Caldemeyer, MD	Radiology	Yes	Telemedicine	Telemedicine	VRAD	None	02/01/2021-01/31/2023
Steven Davis, MD	Radiology	Yes	Telemedicine	Telemedicine	VRAD	None	02/01/2021-01/31/2023
Jennifer Gutierrez, MD	Radiology	Yes	Telemedicine	Telemedicine	VRAD	None	02/01/2021-01/31/2023
Vivian Hoang, MD	Medicine	Yes	Telemedicine	Telemedicine /Intraopertive Neuromonot or ing	Real Time Neuromonot or ing Associates	None	02/01/2021- 01/31/2023
Garry Kennebrew, MD	Emergency Medicine	Yes	Associate to	Emergency Medicine	BEPO	None	02/01/2021-01/31/2023
Scott Peterson, DO	Surgery	Yes	Associate to	Trauma Surgery	Envision	None	02/01/2021- 01/31/2023



Allied Health Professionals:

Applicant	Department	AHP Category	Specialty / Privileges	Group	Sponsoring Physician(s)	Changes to Privileges	Dates
None							

Advice, Opinions, Recommendations and Motions:

If the Hospital District Board of Directors concurs, the following motion is in order Accept and approve the recommendations of the Medical Executive Committee and the Joint Conference Committee relating to the reappointment of the Medical Staff and/or Allied Health Professional Staff.



ECTOR COUNTY HOSPITAL DISTRICT BOARD OF DIRECTORS

Item to be considered:

Change in Clinical Privileges

Statement of Pertinent Facts:

The Medical Executive Committee and the Joint Conference Committee recommends the request below on change in clinical privileges. These clinical changes in privileges are recommendations made pursuant to and in accordance with Article 4 of the Medical Staff Bylaws.

Additional Privileges:

Staff Member	Department	Privilege
Abbie Schuster, MD	Surgery	ADD:Colonoscopy-diagnostic; Esophagogastroduodenoscopy-nonoperative; Percutaneous Endoscopy Gastrostomy (PEG)

Advice, Opinions, Recommendations and Motions:

If the Hospital District Board of Directors concurs, the following motion is in order: Accept and approve the recommendations of the Medical Executive Committee and the Joint Conference Committee relating to the change in clinical privileges of the Allied Health Professional Staff.



ECTOR COUNTY HOSPITAL DISTRICT BOARD OF DIRECTORS

Item to be considered:

Change in Medical Staff or AHP Staff Status- Resignations/ Lapse of Privileges

Statement of Pertinent Facts:

The Medical Executive Committee and the Joint Conference Committee recommends approval of the following changes in staff status. These resignations/lapse of privileges are recommendations made pursuant to and in accordance with Article 4 of the Medical Staff Bylaws.

Resignation / Lapse of Privileges:

Staff Member	Staff Category	Department	Effective Date	Action
Omolara Aderinboye, MD	Active	Pediatrics	10/27/2020	Resignation
Baraa Alabd Akrazzak, MD	Active	Pediatrics	10/27/2020	Resignation
Adebayo Atolagbe, MD	Active	Pediatrics	10/27/2020	Resignation
Ronald Bacani, NP	AHP	Emergency Medicine	09/21/2020	Resignation
Floyd Barry, MD	Active	Pediatrics	10/27/2020	Resignation
Lawrence Blanchard, MD	Active	Anesthesia	07/31/2020	Resignation
Srikanth Deme, MD	Active	Surgery	11/01/2020	Resignation
Christy Guiley, PA	AHP	Surgery	11/01/2020	Resignation
Stephen Fox, MD	Telemedicine	Telemedicine	11/09/2020	Resignation
Alim Ladha, MD	Active	Surgery	11/01/2020	Resignation
Steven Prudencio, NP	AHP	Family Medicine	03/31/2020	Resignation
Frank Welte, MD	Telemedicine	Telemedicine	06/15/2020	Resignation

Advice, Opinions, Recommendations and Motion:

If the Hospital District Board of Directors concurs, the following motion is in order: Accept and approve the recommendations of the Medical Executive Committee and the Joint Conference Committee to approve the Resignation / Lapse of Privileges.



ECTOR COUNTY HOSPITAL DISTRICT BOARD OF DIRECTORS

Item to be considered:

Change in Medical Staff or AHP Staff Category

Statement of Pertinent Facts:

The Medical Executive Committee and the Joint Conference Committee recommend approval of the following changes in staff status category. The respective departments determined that the practitioners have complied with all Bylaws requirements and are eligible for the change as noted below.

Staff Category Change:

Staff Member	Department	Category
Garry Kennebrew, MD	Emergency Medicine	Associate to Active
Scott Peterson, DO	Surgery	Associate to Active
Christine Leonhart, FNP	Ambulatory	Removal of I-FPPE
Christin Richardson, FNP	Ambulatory	Removal of I-FPPE
Cornelia De Riese, MD	OBGYN	Removal of I-FPPE
Alexandra Fierro, PA	Cardiology	Removal of I-FPPE
Visalakshi Sethuraman, MD	Pediatric	Removal of I-FPPE
Kevan Akrami, MD	Medicine	Removal of I-FPPE
David Fitzgerald, MD	Medicine	Removal of I-FPPE
Daniel Babbel, MD	Surgery	Removal of I-FPPE
Macaulay Nwojo, MD	Surgery	Extend I-FPPE 6 months
Yvonne Gochangco CRNA	Anesthesia	Removal of I-FPPE
Angelina McMurray CRNA	Anesthesia	Removal of I-FPPE
Alan Robinson CRNA	Anesthesia	Removal of I-FPPE
Marivic Salarda CRNA	Anesthesia	Removal of I-FPPE

Proctoring Credentialing:

Applicant	Departm ent	Specialty/Privile ges	Group	Comments
None				

Changes to Credentialing Dates:

Staff Member	Staff Category	Department	Dates
None			

Changes of Supervising Physician(s):

Staff Member	Group	Department
None		



Leave of Absence:

Staff Member	Staff Category	Department	Effective Date	Action
None				

Advice, Opinions, Recommendations and Motion:

If the Hospital District Board of Directors concurs, the following motion is in order: Accept and approve the recommendations of the Medical Executive Committee and the Joint Conference Committee to approve the staff category changes, changes to the credentialing dates, changes of supervising physicians and leave of absence.



ECTOR COUNTY HOSPITAL DISTRICT BOARD OF DIRECTORS

Item to be considered:

CER – BK Ultrasound System CER – Versapulse power suite 60W Laser CER – Stryker TPX Small Bone Drill CER – CER - Pyxis Anesthesia System ES

Statement of Pertinent Facts:

The Medical Executive Committee and the Joint Conference Committee recommends approval of the the following:

CER – BK Ultrasound System CER – Versapulse power suite 60W Laser CER – Stryker TPX Small Bone Drill CER - Pyxis Anesthesia System ES

Advice, Opinions, Recommendations and Motion:

If the Hospital District Board of Directors concurs, the following motion is in order: Accept the recommendation of the Medical Executive Committee and the Joint Conference Committee to approve the CER: BK Ultrasound System, Versapulse power suite 60W Laser, Stryker TPX Small Bone Drill, Pyxis Anesthesia System ES.



ECTOR COUNTY HOSPITAL DISTRICT BOARD OF DIRECTORS

Item to be considered:

Medical Staff Bylaws / Policies/ Privilege Criteria

Statement of Pertinent Facts:

The Medical Executive Committee and the Joint Conference Committee recommends approval of the following:

- Pediatric Nephrology Delineation of Clinical Privileges and Procedures
- Research Coordinator Job Description

Advice. Opinions. Recommendations and Motion:

If the Hospital District Board of Directors concurs, the following motion is in order: Accept and approve the recommendations of the Medical Executive Committee and the Joint Conference Committee to approve the Pediatric Nephrology Delineation of Clinical Privileges and Procedures and the Research Coordinator Job Description.

Family Health Clinic December 2020 ECHD Board Packet

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ECTOR COUNTY HOSPITAL DISTRICT CENTERS FOR PRIMARY CARE COMBINED - OPERATIONS SUMMARY OCTOBER 2020

				CUR	RENT MONT	н						YEA	R TO DATE		
	4	CTUAL	E	BUDGET	BUDGET VAR	PF	RIOR YR	PRIOR YR VAR		CTUAL	E	BUDGET	BUDGET VAR	PRIOR YR	PRIOR YR VAR
PATIENT REVENUE	-													-	
Outpatient Revenue	\$	645,425	\$	526,483	22.6%	\$	632,097	2.1%	\$	645,425	\$	526,483	22.6% \$	632,097	2.1%
TOTAL PATIENT REVENUE	\$	645,425	\$	526,483	22.6%	\$	632,097	2.1%	\$	645,425	\$	526,483	22.6% \$	\$ 632,097	2.1%
DEDUCTIONS FROM REVENUE															
Contractual Adjustments	\$	355,043	\$	181,017	96.1%	\$	32,096	1006.2%	\$	355,043	\$	181,017	96.1% \$	\$ 32,096	1006.2%
Self Pay Adjustments		73,939		50,993	45.0%		30,766	140.3%		73,939		50,993	45.0%	30,766	140.3%
Bad Debts		41,126		84,319	-51.2%		359,763	-88.6%		41,126		84,319	-51.2%	359,763	-88.6%
TOTAL REVENUE DEDUCTIONS	\$	470,109	\$	316,329	48.6%	\$	422,625	11.2%	\$	470,109	\$	316,329	48.6%	\$ 422,625	11.2%
		72.84%		60.08%			66.86%			72.84%		60.08%		66.86%	
NET PATIENT REVENUE	\$	175,316	\$	210,154	-16.6%	\$	209,472	-16.3%	\$	175,316	\$	210,154	-16.6% \$	\$ 209,472	-16.3%
OTHER REVENUE															
FHC Other Revenue	\$	9,316	\$	26,697	-65.1%	\$	15,209	-38.7%	\$	9,316	\$	26,697	-65.1% \$	5 15,209	-38.7%
TOTAL OTHER REVENUE	\$ \$	9,316	\$	26,697	-65.1%	\$	15,209	-38.7%	\$	9,316	\$	26,697	-65.1% \$	\$ 15,209	-38.7%
NET OPERATING REVENUE	\$	184,632	\$	236,851	-22.0%	\$	224,682	-17.8%	\$	184,632	\$	236,851	-22.0% \$	\$ 224,682	-17.8%
OPERATING EXPENSE															
Salaries and Wages	\$	81.946	\$	111.879	-26.8%	\$	113.288	-27.7%	\$	81.946	\$	111.879	-26.8%	§ 113.288	-27.7%
Benefits	•	20.499	*	28.089	-27.0%	Ŧ	28,711	-28.6%	•	20.499	Ŧ	28.089	-27.0%	28,711	-28.6%
Physician Services		135,933		151,471	-10.3%		123,486	10.1%		135,933		151,471	-10.3%	123,486	10.1%
Cost of Drugs Sold		6,018		9,168	-34.4%		14,584	-58.7%		6,018		9,168	-34.4%	14,584	-58.7%
Supplies		7,969		6,132	30.0%		7,926	0.5%		7,969		6,132	30.0%	7,926	0.5%
Utilities		5,653		5,939	-4.8%		7,008	-19.3%		5,653		5,939	-4.8%	7,008	-19.3%
Repairs and Maintenance		3,971		1,192	233.2%		625	535.4%		3,971		1,192	233.2%	625	535.4%
Leases and Rentals		523		370	41.4%		495	5.6%		523		370	41.4%	495	5.6%
Other Expense		1,100		3,341	-67.1%		3,341	-67.1%		1,100		3,341	-67.1%	3,341	-67.1%
TOTAL OPERATING EXPENSES	\$	263,613	\$	317,581	-17.0%	\$	299,465	-12.0%	\$	263,613	\$	317,581	-17.0% \$	\$ 299,465	-12.0%
Depreciation/Amortization	\$	33,405	\$	33,405	0.0%	\$	36,862	-9.4%	\$	33,405	\$	33,405	0.0% \$	\$ 36,862	-9.4%
TOTAL OPERATING COSTS	\$	297,019	\$	350,986	-15.4%	\$	336,327	-11.7%	\$	297,019	\$	350,986	-15.4%	\$ 336,327	-11.7%
NET GAIN (LOSS) FROM OPERATIONS	\$	(112,387)	\$	(114,135)	-1.5%	\$	(111,645)	0.7%	\$	(112,387)	\$	(114,135)	-1.5% \$	6 (111,645)	0.7%
Operating Margin		-60.87%		-48.19%	26.3%		-49.69%	22.5%	<u> </u>	-60.87%	1	-48.19%	26.3%	-49.69%	22.5%

	CURRENT MONTH					YEAR TO DATE						
Medical Visits	1,619	1,661	-2.5%	1,752	-7.6%	1,619	1,661	-2.5%	1,752	-7.6%		
Optometry Visits	-	-	0.0%	-	0.0%	-	-	0.0%	-	0.0%		
Total Visits	1,619	1,661	-2.5%	1,752	-7.6%	1,619	1,661	-2.5%	1,752	-7.6%		
Average Revenue per Office Visit	398.66	316.97	25.8%	360.79	10.5%	398.66	316.97	25.8%	360.79	10.5%		
Hospital FTE's (Salaries and Wages)	18.9	27.0	-30.1%	28.6	-34.0%	18.9	27.0	-30.1%	28.6	-34.0%		

ECTOR COUNTY HOSPITAL DISTRICT CENTER FOR PRIMARY CARE CLEMENTS - OPERATIONS SUMMARY OCTOBER 2020

	CURRENT MONTH						YEAR TO DATE									
	ļ	ACTUAL	E	BUDGET	BUDGET VAR	PI	RIOR YR	PRIOR YR VAR	ļ	CTUAL	E	UDGET	BUDGET VAR	PF	RIOR YR	PRIOR YR VAR
PATIENT REVENUE																
Outpatient Revenue	\$	645,206	\$	363,147			393,909	63.8%	\$	645,206	\$	363,147	77.7%		393,909	63.8%
TOTAL PATIENT REVENUE	\$	645,206	\$	363,147	77.7%	\$	393,909	63.8%	\$	645,206	\$	363,147	77.7%	\$	393,909	63.8%
DEDUCTIONS FROM REVENUE																
Contractual Adjustments	\$	357,793	\$	121,401	194.7%	\$	(450)	-79669.6%	\$	357,793	\$	121,401	194.7%	\$	(450)	-79669.6%
Self Pay Adjustments		84,906		32,373	162.3%		(136)	-62636.9%		84,906		32,373	162.3%		(136)	-62636.9%
Bad Debts		27,365		56,943	-51.9%		303,780	-91.0%		27,365		56,943	-51.9%		303,780	-91.0%
TOTAL REVENUE DEDUCTIONS	\$	470,064	\$	210,717	123.1%	\$	303,195	55.0%	\$	470,064	\$	210,717	123.1%	\$	303,195	55.0%
		72.9%		58.0%			77.0%			72.9%		58.0%			77.0%	
NET PATIENT REVENUE	\$	175,142	\$	152,430	14.9%	\$	90,714	93.1%	\$	175,142	\$	152,430	14.9%	\$	90,714	93.1%
OTHER REVENUE																
FHC Other Revenue	\$	9,316	\$	26,697	0.0%	\$	15,209	-38.7%	\$	9,316	\$	26,697	0.0%	\$	15,209	-38.7%
TOTAL OTHER REVENUE	\$	9,316	\$	26,697	-65.1%	\$	15,209	-38.7%	\$	9,316	\$	26,697	-65.1%	\$	15,209	-38.7%
NET OPERATING REVENUE	\$	184,458	\$	179,127	3.0%	\$	105,924	74.1%	\$	184,458	\$	179,127	3.0%	\$	105,924	74.1%
OPERATING EXPENSE																
Salaries and Wages	\$	81,946	\$	80,728	1.5%	\$	77,921	5.2%	\$	81,946	\$	80,728	1.5%	\$	77,921	5.2%
Benefits		20,499		20,268	1.1%		19,748	3.8%		20,499		20,268	1.1%		19,748	3.8%
Physician Services		135,933		104,171	30.5%		72,118	88.5%		135,933		104,171	30.5%		72,118	88.5%
Cost of Drugs Sold		6,018		6,489	-7.3%		10,872	-44.6%		6,018		6,489	-7.3%		10,872	-44.6%
Supplies		7,969		4,678	70.4%		5,989	33.1%		7,969		4,678	70.4%		5,989	33.1%
Utilities		3,659		3,021	21.1%		3,502	4.5%		3,659		3,021	21.1%		3,502	4.5%
Repairs and Maintenance		3,971		1,073	270.1%		625	535.4%		3,971		1,073	270.1%		625	535.4%
Leases and Rentals		523		370	41.4%		495	5.6%		523		370	41.4%		495	5.6%
Other Expense		1,100		3,341	-67.1%		3,341	-67.1%		1,100		3,341	-67.1%		3,341	-67.1%
TOTAL OPERATING EXPENSES	\$	261,620	\$	224,139	16.7%	\$	194,612	34.4%	\$	261,620	\$	224,139	16.7%	\$	194,612	34.4%
Depreciation/Amortization	\$	4,081	\$	4,081	0.0%	\$	4,744	-14.0%	\$	4,081	\$	4,081	0.0%	\$	4,744	-14.0%
TOTAL OPERATING COSTS	\$	265,701	\$	228,220	16.4%	\$	199,355	33.3%	\$	265,701	\$	228,220	16.4%	\$	199,355	33.3%
NET GAIN (LOSS) FROM OPERATIONS	\$	(81,243)		(49,093)	-65.5%	\$	(93,432)	13.0%	\$	(81,243)	\$	(49,093)		\$	(93,432)	-13.0%
Operating Margin		-44.04%		-27.41%	60.7%		-88.21%	-50.1%		-44.04%		-27.41%	60.7%		-88.21%	-50.1%

		CURRI	ENT MONTH	4						
Medical Visits	1,619	1,198	35.1%	1,139	42.1%	1,619	1,198	35.1%		0.0%
Average Revenue per Office Visit	398.52	303.13	31.5%	345.84	15.2%	398.52	303.13	31.5%	345.84	15.2%
Hospital FTE's (Salaries and Wages)	18.9	19.2	-1.5%	18.9	-0.1%	18.9	19.2	-1.5%	18.9	-0.1%

ECTOR COUNTY HOSPITAL DISTRICT CENTER FOR PRIMARY CARE WEST UNIVERSITY - OPERATIONS SUMMARY OCTOBER 2020

	CURRENT MONTH							YEAR TO DATE								
	А	CTUAL	E	UDGET	BUDGET VAR	PF	rior yr	PRIOR YR VAR	А	CTUAL	I	BUDGET	BUDGET VAR	PF	RIOR YR	PRIOR YR VAR
PATIENT REVENUE																
Outpatient Revenue	\$	219	\$	163,336			238,188	-99.9%	\$	219	\$	163,336	-99.9%		238,188	-99.9%
TOTAL PATIENT REVENUE	\$	219	\$	163,336	-99.9%	\$	238,188	-99.9%	\$	219	\$	163,336	-99.9%	\$	238,188	-99.9%
DEDUCTIONS FROM REVENUE																
Contractual Adjustments	\$	(2,749)	\$	59.616	-104.6%	\$	32.546	-108.4%	\$	(2,749)	\$	59.616	-104.6%	\$	32,546	-108.4%
Self Pay Adjustments		(10,967)		18.620	-158.9%		30,902	-135.5%		(10,967)		18,620	-158.9%		30,902	-135.5%
Bad Debts		13,761		27.376	-49.7%		55.983	-75.4%		13.761		27.376	-49.7%		55,983	-75.4%
TOTAL REVENUE DEDUCTIONS	\$	45	\$	105,612	-100.0%	\$	119,430	-100.0%	\$	45	\$	105,612	-100.0%	\$	119,430	-100.0%
	•	20.39%		64.66%		·	50.14%			20.39%		64.66%			50.14%	
NET PATIENT REVENUE	\$	174	\$	57,724	-99.7%	\$	118,758	-99.9%	\$	174	\$	57,724	-99.7%	\$	118,758	-99.9%
OTHER REVENUE																
FHC Other Revenue	\$	-	\$	-	0.0%	\$	-	0.0%	\$	-	\$	-	0.0%	\$	-	0.0%
TOTAL OTHER REVENUE	\$	-	\$	-	0.0%	\$	-	0.0%	\$	-	\$	-	0.0%	\$	-	0.0%
NET OPERATING REVENUE	\$	174	\$	57,724	-99.7%	\$	118,758	-99.9%	\$	174	\$	57,724	-99.7%	\$	118,758	-99.9%
OPERATING EXPENSE																
Salaries and Wages	\$	-	\$	31,151	-100.0%	\$	35,367	-100.0%	\$	-	\$	31,151	-100.0%	\$	35,367	-100.0%
Benefits		-		7,821	-100.0%		8,963	-100.0%		-		7,821	-100.0%		8,963	-100.0%
Physician Services		-		47,300	-100.0%		51,369	-100.0%		-		47,300	-100.0%		51,369	-100.0%
Cost of Drugs Sold		-		2,679	-100.0%		3,712	-100.0%		-		2,679	-100.0%		3,712	-100.0%
Supplies		-		1,454	-100.0%		1,937	-100.0%		-		1,454	-100.0%		1,937	-100.0%
Utilities		1,993		2,918	-31.7%		3,506	-43.1%		1,993		2,918	-31.7%		3,506	-43.1%
Repairs and Maintenance		-		119	-100.0%		-	100.0%		-		119	-100.0%		-	100.0%
Other Expense		-		-	0.0%		-	0.0%	_	-		-	0.0%		-	0.0%
TOTAL OPERATING EXPENSES	\$	1,993	\$	93,442	-97.9%	\$	104,853	-98.1%	\$	1,993	\$	93,442	-97.9%	\$	104,853	-98.1%
Depreciation/Amortization	\$	29,325	\$	29,324	0.0%	\$	32,118	-8.7%	\$	29,325	\$	29,324	0.0%	\$	32,118	-8.7%
TOTAL OPERATING COSTS	\$	31,318	\$	122,766	-74.5%	\$	136,972	-77.1%	\$	31,318	\$	122,766	-74.5%	\$	136,972	-77.1%
NET GAIN (LOSS) FROM OPERATIONS	\$	(31,144)	\$	(65,042)	-52.1%	\$	(18,214)	71.0%	\$	(31,144)	\$	(65,042)	-52.1%	\$	(18,214)	71.0%
Operating Margin	-1	7890.56%		-112.68%	15777.7%		-15.34%	116549.9%	-1	7890.56%		-112.68%	15777.7%		-15.34%	116549.9%

		CURR	ENT MONTH	ł		YEAR TO DATE					
Medical Visits	-	463	-100.0%	613	-100.0%	-	463	-100.0%	613	-100.0%	
Optometry Visits	-	-	0.0%	-	0.0%	-	-	0.0%	-	0.0%	
Total Visits	-	463	-100.0%	613	-100.0%	-	463	-100.0%		0.0%	
Average Revenue per Office Visit	-	352.78	-100.0%	388.56	-100.0%	-	352.78	-100.0%	388.56	-100.0%	
Hospital FTE's (Salaries and Wages)	-	7.9	-100.0%	9.7	-100.0%	-	7.9	-100.0%	9.7	-100.0%	

ECTOR COUNTY HOSPITAL DISTRICT FAMILY HEALTH CLINIC COMBINED OCTOBER 2020

		MONTHLY F	REVENUE		YTD REVENUE							
	Clements	West	Total	%	C	lements		West	Total	%		
Medicare	\$ 92,232	\$ 217	\$ 92,449	14.3%	\$	92,232	\$	217 \$	92,449	14.3%		
Medicaid	324,652	(1,507)	323,145	50.1%		324,652		(1,507)	323,145	50.1%		
FAP	-	-	-	0.0%		-		-	-	0.0%		
Commercial	101,217	(2,114)	99,103	15.4%		101,217		(2,114)	99,103	15.4%		
Self Pay	100,649	3,623	104,272	16.2%		100,649		3,623	104,272	16.2%		
Other	26,455	-	26,455	4.1%		26,455		-	26,455	4.1%		
Total	\$ 645,206	\$ 219	\$ 645,425	100.0%	\$	645,206	\$	219 \$	645,425	100.0%		

		MONTHLY P	AYMENTS		YEAR TO DATE PAYMENTS						
	Clements	West	Total	%	С	lements		West		Total	%
Medicare	\$ 22,066	\$ 1,933	\$ 23,999	16.5%	\$	22,066	\$	1,933	\$	23,999	16.5%
Medicaid	66,172	858	67,030	46.2%		66,172		857		67,029	46.2%
FAP	-	-	-	0.0%		-		-		-	0.0%
Commercial	25,121	967	26,088	18.0%		25,121		967		26,088	18.0%
Self Pay	25,862	1,603	27,464	18.9%		25,862		1,603		27,464	18.9%
Other	387	216	602	0.4%		387		216		602	0.4%
Total	\$ 139,608	\$ 5,576	\$ 145,184	100.0%	\$	139,608	\$	5,575	\$	145,183	100.0%

ECTOR COUNTY HOSPITAL DISTRICT FAMILY HEALTH CLINIC CLEMENTS OCTOBER 2020

REVENUE BY PAYOR

		CURRENT	MONTH		YEAR TO DATE						
	CURRENT Y	′EAR	PRIOR YE	AR	CURRENT Y	′EAR	PRIOR YE	AR			
	GROSS		GROSS		GROSS		GROSS				
	REVENUE	%	REVENUE	%	REVENUE	%	REVENUE	%			
Medicare	\$ 92,232	14.3%	\$ 58,376	14.8%	\$ 92,232	14.3%	\$ 58,376	14.8%			
Medicaid	324,652	50.3%	166,675	42.4%	324,652	50.3%	166,675	42.4%			
PHC	-	0.0%	-	0.0%	-	0.0%	-	0.0%			
Commercial	101,217	15.7%	77,515	19.7%	101,217	15.7%	77,515	19.7%			
Self Pay	100,649	15.6%	91,183	23.1%	100,649	15.6%	91,183	23.1%			
Other	26,455	4.1%	160	0.0%	26,455	4.1%	160	0.0%			
TOTAL	\$ 645,206	100.0%	\$ 393,909	100.0%	\$ 645,206	100.0%	\$ 393,909	100.0%			

PAYMENTS BY PAYOR

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		CURRENT	MONTH					
	CURRENT	YEAR	PRIOR YE	AR	CURRENT Y	'EAR	PRIOR YE	AR
	PAYMENTS	%	PAYMENTS	%	PAYMENTS	%	PAYMENTS	%
Medicare	\$ 22,066	15.8%	\$ 38,893	27.7%	\$ 22,066	15.7%	\$ 38,893	27.7%
Medicaid	66,172	47.4%	52,230	37.1%	66,172	47.5%	52,230	37.1%
PHC	-	0.0%	-	0.0%	-	0.0%	-	0.0%
Commercial	25,121	18.0%	21,716	15.5%	25,121	18.0%	21,716	15.5%
Self Pay	25,862	18.5%	27,091	19.3%	25,862	18.5%	27,091	19.3%
Other	387	0.3%	612	0.4%	387	0.3%	612	0.4%
TOTAL	\$ 139,608	100.0%	\$ 140,542	100.0%	\$ 139,608	100.0%	\$ 140,542	100.0%

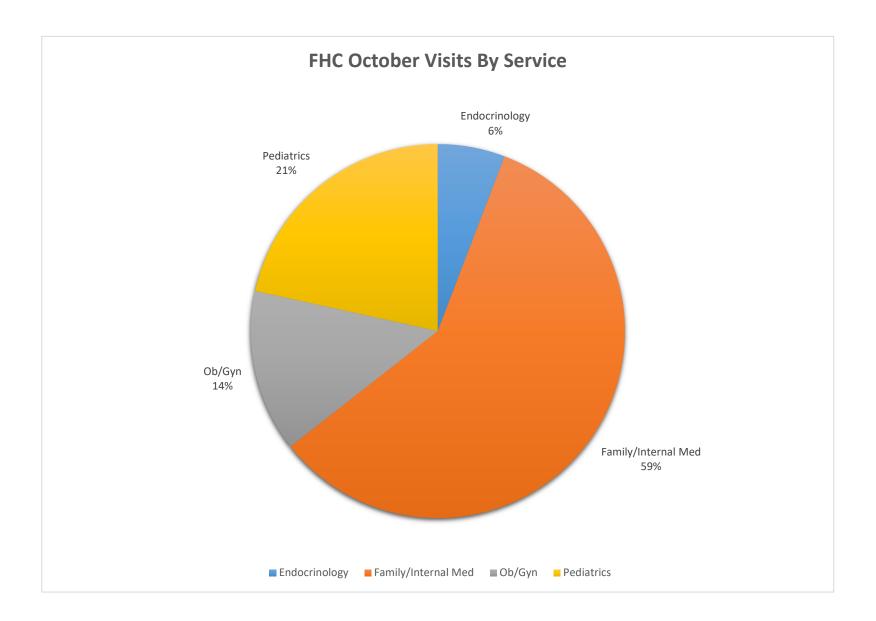
ECTOR COUNTY HOSPITAL DISTRICT FAMILY HEALTH CLINIC WEST UNIVERSITY OCTOBER 2020

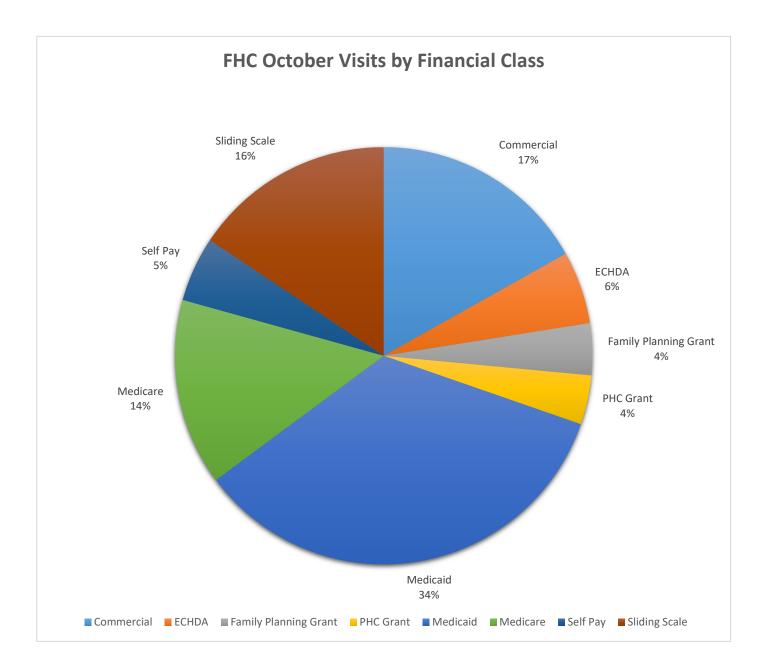
REVENUE BY PAYOR

		CURRENT I	ионт	н		YEAR TO DATE					
	CURRENT	YEAR		PRIOR YE	AR	(CURRENT Y	'EAR		PRIOR YE	AR
	GROSS			GROSS		G	ROSS		G	ROSS	
	REVENUE	%	R	EVENUE	%	RE	REVENUE %		REVENUE		%
Medicare	\$ 217	99.3%	\$	52,655	22.1%	\$	217	99.3%	\$	52,655	22.1%
Medicaid	(1,507)	-689.2%	\$	62,415	26.2%		(1,507)	-689.1%		62,415	26.2%
PHC	-	0.0%	\$	-	0.0%		-	0.0%		-	0.0%
Commercial	(2,114)	-966.8%	\$	49,684	20.9%		(2,114)	-966.8%		49,684	20.9%
Self Pay	3,623	1656.7%	\$	73,042	30.7%		3,623	1656.6%		73,042	30.7%
Other	-	0.0%	\$	391	0.2%		-	0.0%		391	0.2%
TOTAL	\$ 219	100.0%	\$	238,188	100.0%	\$	219	100.0%	\$	238,188	100.0%

PAYMENTS BY PAYOR

		CURRENT N	MONTH		YEAR TO DATE					
	CURREN	T YEAR	PRIOR YE	AR	CURRENT	YEAR	PRIOR YE	AR		
	PAYMENTS	%	PAYMENTS	%	PAYMENTS	%	PAYMENTS	%		
Medicare	\$ 1,933	34.7%	\$ 15,834	27.3%	\$ 1,933	34.7%	\$ 15,834	27.3%		
Medicaid	858	15.4%	15,008	25.9%	857	15.4%	15,008	25.9%		
PHC	-	0.0%	-	0.0%	-	0.0%	-	0.0%		
Commercial	967	17.3%	13,740	23.7%	967	17.3%	13,740	23.7%		
Self Pay	1,603	28.7%	12,969	22.3%	1,603	28.7%	12,969	22.3%		
Other	216	3.9%	488	0.8%	216	3.9%	488	0.8%		
TOTAL	\$ 5,576	100.0%	\$ 58,039	100.0%	\$ 5,576	100.0%	\$ 58,039	100.0%		





9

FHC Executive Director's Report-December 2020

- Provider Update: Dr. Poudel's credentialing with the region's Medicaid Managed Care organizations was completed in October and he is now open to see Firstcare, Amerigroup and Superior pediatric patients.
- **Staffing Update**: The Family Health Clinic has the following open staff positions: 2 LVN, 1.5 Medical Assistant, and 2 Front Desk.
- **Telehealth Update**: For the month of October, telehealth visits accounted for 4% of the Clinic's total visits. We continue to provide the telehealth option for sick, wellness, and follow up visits.
- COVID 19 Update: Due to the COVID 19 crisis, the Family Health Clinic has implemented the following temporary operational changes: no walk-in patients, patients will be scheduled with same day appointments; temporary hold on our public walk-in vaccine clinic; implemented telehealth options for remote health services; decreased our operating hours (Monday thru Friday 8am-5pm, closed Noon-1pm); implemented visitor restrictions, and employee and patient screening processes at both FHC locations. Both patients and employees are required to wear masks. In August 2020, we temporarily consolidated clinics and are operating out of our Clements location.
- **Public Health Emergency Extended:** HHS Secretary Azar issued an order extending the COVID 19 Public Health Emergency by another 90 days. The extension will take effect on October 23, extending the PHE through January 21, 2021. Per HRSA, the PHE allows FQHCs the flexibility to adjust operating hours and temporarily close locations, as needed, during the COVID pandemic without prior approval from HRSA.
- HRSA Change in Scope Approved: HRSA has approved the addition of Pediatric Nephrology to the Family Health Clinic's scope effective November 2020.



MEMORANDUM

- TO: Ector County Hospital District Board of Directors
- FROM: Gingie Sredanovich, Chief Compliance and Privacy Officer through Russell Tippin, President and Chief Executive Officer
- SUBJECT: ECHD/MCHS Compliance Committee Reaffirmation 2020 (In conjunction with the Reaffirmation of Corporate Compliance Program Resolution)
- DATE: November 25, 2020

Background:

On July 14, 1998, the Ector County Hospital District Board of Directors directed the establishment and maintenance of a Corporate Compliance Program as a continuous process for the improvement of its business policies and practices, and oversight of its responsibilities under local, state and federal rules, laws and regulations.

Objective:

To reaffirm the Ector County Hospital District/Medical Center Health System's (ECHD/MCHS) commitment to the Board approved Compliance Committee which will oversee the implementation, operation and effectiveness of the ECHD/MCHS Corporate Compliance Program, and assist the ECHD/MCHS Board in fulfilling is fiduciary responsibility and accountability relating to its compliance oversight responsibilities, the Mission and Values of MCHS and the MCHS Compliance Standards of Conduct.



December 2020

MEDICAL CENTER HEALTH SYSTEM

COMPLIANCE COMMITTEE CHARTER

I. <u>PURPOSE</u>

As an expression of our commitment to act with integrity and ethics and to institute a program to ensure compliance with all applicable laws, Medical Center Health System ("MCHS") has created a Board approved Compliance Committee to (i) oversee the implementation, operation, and effectiveness of MCHS's Compliance Program and the performance of the Compliance Officer in effectuating the Compliance Program, and (ii) assist the Board in fulfilling its fiduciary responsibility and accountability relating to its compliance oversight responsibilities, the Mission and Values of MCHS and the MCHS Compliance Standards of Conduct.

II. <u>AUTHORITIES AND RESPONSIBILITIES</u>

The Compliance Committee is continuously composed of representatives from multiple disciplines. At a minimum, the Compliance Committee will include the Chief Compliance and Privacy Officer, President and Chief Executive Officer (Pres./CEO), Chief Legal Counsel, Chief Financial Officer, Chief Operating Officer, Chief Medical Officer, Chief Information Officer and two Ector County Hospital District Board Members. The Pres./CEO shall also appoint such ex officio members of the Compliance Committee as he or she deems necessary or advisable to assist the committee in the performance of its duties. Ex officio members of the committee.

The Compliance Committee will receive reports from ad-hoc guests which will be related to Human Resources, Information Technology/Security, Revenue Cycle/Integrity, or others as deemed necessary.

III. DUTIES OF THE COMPLANCE COMMITTEE

The duties of the Compliance Committee shall include:

- 1. Advising the Chief Compliance Officer and assisting in the implementation and maintenance of the Compliance Program;
- 2. Working with appropriate departments of the Health System to develop standards of conduct and policies and procedures to promote adherence to the Compliance Program;



- 3. Recommending and monitoring, in conjunction with the relevant departments, the development of internal systems and controls to carry out MCHS's standards, policies and procedures;
- 4. Determining the appropriate strategy and/or approach to promote adherence to the Compliance Program and the detection of potential violations;
- 5. Developing a system to solicit, evaluate and respond to complaints and problems;
- 6. Overseeing the education and training of employees and systems for communication with and by employees;
- 7. Analyzing the legal requirements with which MCHS must comply and locating and analyzing specific risk areas within the Health System; and
- 8. Establishing confidentiality standards and requirements for committee members and those persons requested to provide assistance to the committee.

IV. <u>MEETINGS</u>

The Committee shall meet at least quarterly in order to perform its responsibilities. The Committee shall keep agendas, minutes and attendance of its meetings.



THE BOARD OF DIRECTORS OF THE ECTOR COUNTY HOSPITAL DISTRICT MEDICAL CENTER HEALTH SYSTEM

WHEREAS: The Ector County Hospital District/Medical Center Health System (ECHD/MCHS), is committed to ethical and legal business practices as essential to the advancement of its Mission of service to the Ector County community.

WHEREAS: Pursuant to this commitment, as set forth in the minutes of July 14, 1998 and subsequent minutes, the Board of Directors of ECHD/MCHS has previously directed the establishment and maintenance of a Corporate Compliance Program as a continuous process for the improvement of its business policies and practices, and oversight of its responsibilities under local, state and federal rules, laws, and regulations.

WHEREAS: It is the policy of the ECHD/MCHS that the implemented Corporate Compliance Program assure a collaborative participation of all elements of the hospital in the prevention of violations of Medical Center Health System's policies, local, state and federal laws. The expectations of this policy are to:

- Reaffirm this hospital's commitment to its stated principles and beliefs.
- Assure the hospital acts in a manner consistent with its Mission and Values.
- Have the hospital meet its ethical and legal requirements.
- Decrease the risk of inappropriate behavior.

RESOLVED: That the Board of Directors, ECHD/MCHS reaffirms its commitment to the expectations of ethical and legal conduct stated herein, and to the continuous effective monitoring of the hospital's responsibilities and business practices by its leadership, managers, and employees, and through the processes and procedures of the Corporate Compliance Program.

FURTHER RESOLVED: To assure that the Board's expectations are adhered the Board directs that:

- That the Audit Committee monitor the performance of the Corporate Compliance Program and receive regular reports in Executive Session, but no less than quarterly in each calendar year, from the Chief Compliance Officer, on the program's initiatives, training, education, audits and reviews, and such other matters as should be brought to the Board's attention.
- That the Chief Executive Officer and the Chief Compliance Officer jointly report to the full Board on the status and effectiveness of the Corporate Compliance Program on no less than an annual basis.
- That the Chief Executive Officer establishes such policies and procedures as necessary to accomplish the goals and objectives stated herein.

Passed and Approved this 1st day of December, 2020.

Don Hallmark, President

David Dunn

Bryn Dodd, Vice President

Richard Herrera

Mary Lou Anderson

Ben Quiroz

Wallace Dunn



Date: November 23, 2020

- To: Board of Directors Ector County Hospital District
- From: Russell Tippin President and CEO
- Subject: TCDRS Plan Provisions Plan Year 2021

The Ector County Hospital District (ECHD) is a sponsor of a retirement plan with the Texas County & District Retirement System (TCDRS). Any plan changes to the ECHD retirement plan with TCDRS require authorization from the ECHD Board of Directors.

The Ector County Hospital District is proposing to keep the employee contribution the same as 2020. The current employee contribution is 6 percent. The Ector County Hospital District is proposing to change the employer contribution to 145 percent effective January 1, 2021.

ECTOR COUNTY HOSPITAL DISTRICT MONTHLY STATISTICAL REPORT OCTOBER 2020

		CUF	RRENT MON	ΝΤΗ			YEAR-TO-DATE			
		BUD	-	PRIOR			BUDG		PRIOR	
Hospital InPatient Admissions	ACTUAL	AMOUNT	VAR.%	AMOUNT	VAR.%	ACTUAL	AMOUNT	VAR.%	AMOUNT	VAR.%
Acute / Adult	1,078	1,141	-5.5%	1,164	-7.4%	1,078	1,141	-5.5%	1,164	-7.4%
Neonatal ICU (NICU)	27	30	-10.0%	33	-18.2%	27	30	-10.0%	33	-18.2%
Total Admissions	1,105	1,171	-5.6%	1,197	-7.7%	1,105	1,171	-5.6%	1,197	-7.7%
Patient Days										
Adult & Pediatric	4,302	4,147	3.7%	3,911	10.0%	4,302	4,147	3.7%	3,911	10.0%
ICU	438	378	15.9%	353	24.1%	438	378	15.9%	353	24.1%
CCU	396	385	2.9%	373	6.2%	396	385	2.9%	373	6.2%
NICU Total Patient Days	<u>442</u> 5,578	516 5,426	<u>-14.3%</u> 2.8%	591 5,228	<u>-25.2%</u> 6.7%	<u>442</u> 5,578	516 5,426	<u>-14.3%</u> 2.8%	<u>591</u> 5,228	<u>-25.2%</u> 6.7%
Total Fatient Days	0,010	0,420	2.070	0,220	0.1 /0	0,070	0,420	2.070	0,220	0.1 /0
Observation (Obs) Days	773	799	-3.3%	859	-10.0%	773	799	-3.3%	859	-10.0%
Nursery Days	309	321	-3.7%	323	-4.3%	309	321	-3.7%	323	-4.3%
Total Occupied Beds / Bassinets	6,660	6,546	1.7%	6,410	3.9%	6,660	6,546	1.7%	6,410	3.9%
Average Length of Stay (ALOS)										
Acute / Adult & Pediatric	4.76	4.30	10.7%	3.98	19.6%	4.76	4.30	10.7%	3.98	19.6%
NICU	16.37	17.20	-4.8%	17.91	-8.6%	16.37	17.20	-4.8%	17.91	-8.6%
Total ALOS Acute / Adult & Pediatric w/o OB	5.05 5.77	4.63	8.9%	4.37 4.84	15.6% 19.2%	5.05 5.77	4.63	8.9%	4.37 4.84	15.6% 19.2%
Addie / Addie & Fediatrie W/0 OB	0.11			4.04	13.2 /0	0.11			4.04	13.2 /0
Average Daily Census	179.9	175.0	2.8%	168.6	6.7%	179.9	175.0	2.8%	168.6	6.7%
Hospital Case Mix Index (CMI)	1.6824	1.5944	5.5%	1.5559	8.1%	1.6824	1.5944	5.5%	0.0000	0.0%
Medicare										
Admissions	378	409	-7.6%	410	-7.8%	378	410	-7.8%	410	-7.8%
Patient Days	2,141	1,965	9.0%	1,915	11.8%	2,141	1,965	9.0%	1,915	11.8%
Average Length of Stay	5.66	4.80	17.9%	4.67	21.3%	5.66	4.79	18.2%	4.67	21.3%
Case Mix Index Medicaid	2.0454			3.7201	-45.0%	2.0454			1.8601	10.0%
Admissions	153	146	4.8%	155	-1.3%	153	146	4.8%	155	-1.3%
Patient Days	654	734	-10.9%	723	-9.5%	654	734	-10.9%	723	-9.5%
Average Length of Stay	4.27	5.03	-15.0%	4.66	-8.4%	4.27	5.03	-15.0%	4.66	-8.4%
Case Mix Index	1.1725			1.9669	-40.4%	1.1725			0.9835	19.2%
Commercial										
Admissions Patient Days	317 1,443	317 1,393	0.0% 3.6%	343 1,396	-7.6% 3.4%	317 1,443	317 1,393	0.0% 3.6%	343 1,396	-7.6% 3.4%
Average Length of Stay	4.55	4.39	3.6%	4.07	3.4 % 11.8%	4.55	4.39	3.6%	4.07	3.4 % 11.8%
Case Mix Index	1.6181	4.00	0.070	2.8396	-43.0%	1.6181	4.00	0.070	1.4198	14.0%
Self Pay										
Admissions	225	271	-17.0%	265	-15.1%	225	271	-17.0%	265	-15.1%
Patient Days	1,196	1,248	-4.2%	1,029	16.2%	1,196	1,248	-4.2%	1,029	16.2%
Average Length of Stay Case Mix Index	5.32 1.4853	4.61	15.4%	3.88 2.8940	36.9% -48.7%	5.32 1.4853	4.61	15.4%	3.88 1.4470	36.9% 2.6%
All Other	1.4000			2.0040	-40.770	1.4000			1.4470	2.070
Admissions	32	27	18.5%	24	33.3%	32	27	18.5%	24	33.3%
Patient Days	144	141	2.1%	165	-12.7%	144	141	2.1%	165	-12.7%
Average Length of Stay	4.50	5.22	-13.8%	6.88	-34.5%	4.50	5.22	-13.8%	6.88	-34.5%
Case Mix Index	1.5111			4.3477	-65.2%	1.5111			2.1739	-30.5%
<u>Radiology</u>										
InPatient	4,097	4,194	-2.3%	4,249	-3.6%	4,097	4,194	-2.3%	4,249	-3.6%
OutPatient	7,323	7,431	-1.5%	9,303	-21.3%	7,323	7,431	-1.5%	9,303	-21.3%
Cath Lab										
InPatient	541	460	17.6%	491	10.2%	541	460	17.6%	491	10.2%
OutPatient	742	590	25.8%	765	-3.0%	742	590	25.8%	765	-3.0%
Laboratory										
InPatient	74,069	59,649	24.2%	68,373	8.3%	74,069	59,649	24.2%	68,373	8.3%
OutPatient	62,027	60,158	3.1%	65,870	-5.8%	62,027	60,158	3.1%	65,870	-5.8%
<u>Other</u>										
Deliveries	191	189	1.1%	191	0.0%	191	189	1.1%	191	0.0%
Surgical Cases										
InPatient	246	276	-10.9%	306	-19.6%	246	276	-10.9%	306	-19.6%
OutPatient	541	534	1.3%	631	-14.3%	541	534	1.3%	631	-14.3%
Total Surgical Cases	787	810	-2.8%	937	-16.0%	787	810	-2.8%	937	-16.0%
GI Procedures (Endo)										
InPatient	140	152	-7.9%	178	-21.3%	140	152	-7.9%	178	-21.3%
OutPatient	163	245	-33.5%	322	-49.4%	163	245	-33.5%	322	-49.4%
Total GI Procedures	303	397	-23.7%	500	-39.4%	303	397	-23.7%	500	-39.4%

ECTOR COUNTY HOSPITAL DISTRICT MONTHLY STATISTICAL REPORT OCTOBER 2020

Hospital Operations Marbours Paid 261,809 265,347 1.3% 286,056 4.5% 261,809 265,347 1.3% 286,056 4.5% Adjusted Patient Days 10,013 10,044 -0.3% 10,612 4.7% 10,014 -0.3% 10,612 4.7% 10,014 -0.3% 10,612 4.7% 10,612 4.7% 10,612 4.7% 10,612 4.7% 10,612 4.7% 10,612 4.7% 10,612 4.7% 10,612 4.7% 10,612 4.7% 10,612 4.7% 10,612 4.7% 10,612 4.7% 10,612 4.7% 4.8 4.8 4.6 4.6 4.8 3.8% 4.6 4.6 4.8 3.8% 4.6 4.6 4.8 3.8% 4.6 4.6 4.8 3.8% 4.8 <t< th=""><th></th><th></th><th>cui</th><th></th><th>ΝΤΗ</th><th></th><th></th><th>YEA</th><th>AR-TO-DATE</th><th></th><th></th></t<>			cui		ΝΤΗ			YEA	AR-TO-DATE		
OutPlace			BUD	GET	PRIOR	YEAR		BUDG	GET	PRIOR)	(EAR
Energency Rom Visits 3.33 3.656 6.5% 4.644 22.1% 3.339 3.656 6.5% 4.644 22.1% 3.339 3.656 6.5% 4.644 22.1% 3.339 3.656 6.2% 21.211 1.7% 7.78 79 3.3% 689 1.00% 77.87 79 3.3% 689 1.00% 77.87 79 3.3% 689 1.00% 77.87 79 3.3% 664 4.6% 21.11 77.87 21.11 77.87 79 3.3% 664 4.6% 21.11 77.87 79 3.3% 265.347 1.3% 265.347 1.3% 266.06 8.5% 1.178 0.015 0.04.2% 0.3% 0.01 0.044 0.3% 0.01 0.044 0.3% 0.01 0.044 0.3% 0.01 0.044 0.3% 0.01 0.044 0.3% 0.01 0.051 0.4% 0.03 0.04 0.3% 0.06 0.03 0.06 0.03 0.01 0.03 <t< th=""><th></th><th>ACTUAL</th><th>AMOUNT</th><th>VAR.%</th><th>AMOUNT</th><th>VAR.%</th><th>ACTUAL</th><th>AMOUNT</th><th>VAR.%</th><th>AMOUNT</th><th>VAR.%</th></t<>		ACTUAL	AMOUNT	VAR.%	AMOUNT	VAR.%	ACTUAL	AMOUNT	VAR.%	AMOUNT	VAR.%
Observation Days T73 T99 3.3% 889 -10.0% Total OP Occasions of Servic 71,090 18.22 4.8% 22,172 23,189 4.8% 22,172 23,189 4.8% 22,172 23,189 4.8% 22,172 23,189 4.8% 22,172 23,189 4.8% 22,172 23,189 4.8% 22,172 23,189 4.8% 22,172 23,189 4.8% 22,172 23,189 4.8% 22,174 -13% 28,066 4.5% Adjusted Patient Days 10,013 10,044 4.3% 10,512 4.7% 10,013 10,044 4.3% 10,512 4.7% 10,013 10,044 4.3% 10,512 4.7% 24.5% 4.6% 4.6% 4.3% 10,512 4.7% 10,013 10,044 4.3% 26.1% 6.4% 4.6% 4.6% 4.6% 4.6% 4.6% 4.6% 4.6% 4.6% 4.6% 4.7% 2.2% 4.48 3.8% 1.5% 1.5% 1.5% 1.5%		3 330	3 565	6 3%	4 644	-28 1%	3 3 3 0	3 565	6 3%	4 644	-28 1%
Other Of Docusions of Service Total OP Cocusions of Sr. 17,880 18,823 6,8% 21,211 -17,1% Maintons field Maintons Field 23,192 23,193 4,8% 28,714 -18,8% 28,714 -18,8% 28,714 -18,8% 28,714 -18,8% 28,714 -18,8% 28,714 -18,8% 28,714 -18,8% 28,714 -18,8% 28,714 -18,8% 28,714 -18,8% 28,714 -18,8% 28,714 -18,8% 28,714 -18,8% 28,714 -18,8% 28,714 -13,8% 28,616 -8,5% -10,8% 28,10 10,644 -0,3% 10,613 10,044 -0,3% 10,612 -4,7% 10,013 10,044 -0,3% 10,512 -4,7% 10,013 10,044 -0,3% 10,27 24,7% 10,014 -0,0% 24,128 24,128 24,128 24,128 24,128 24,128 24,128 44,8 28,128 24,128 44,8 28,128 24,128 24,128 24,128 24,128 24,128 24,128 24,128<										,	
Total ADP Occasions of Svc. 21,702 23,189 6.4% 28,74 18.8% 21,702 23,189 6.4% 28,74 18.8% Hondrad Operations 1,073 1,475 1,455 1,255 1,455											
Marthours Paid 261,809 265,847 -1.3% 286,056 -4.5% 247,809 245,477 -1.3% 286,056 -4.5% 1.477.90 1.38% 261,039 263,477 -1.3% 1.614.8 -4.5% Adjusted Patient Days 10,013 10,044 -0.3% 10,512 -4.7% 10,013 10,044 -0.3% 10,512 -4.7% 10,013 10,044 -0.3% 10,512 -4.7% 10,013 10,044 -0.3% 10,512 -4.3% 26,42 -0.0% 4.6 4.6 -1.0% 4.6 -4.5 -1.0% 4.6 -3.5% 4.6 4.6 -1.0% 4.6 -3.5% 4.6 -4.5 -1.0% 4.6 -3.5% 4.6 -3.5% 4.6 -3.5% 4.6 -3.5% 4.6 -3.5% 4.6 -3.5% 4.6 -4.55 -2.5% 3.0.5% 4.61 -3.5% 1.5% 3.47 -1.5% 3.41 15.5% 1.5% 3.43 -3.5% 1.231 1.5% 3.1.5% 1.5%<	Total O/P Occasions of Svc.				26,714						-18.8%
$ \begin{array}{c} FTEs & 1,477.0 & 1,477.9 & -1.3\% & 1,647.8 & -8.5\% & 1,477.0 & 1,477.9 & -1.3\% & 1,614.8 & -8.5\% \\ Hours / Adjusted Patient Day & 26.15 & 26.42 & -1.0\% & 27.21 & 3.9\% \\ Coccapancy - Actual Beats & 51.8\% & 50.2\% & 2.8\% & 47.4\% & 50.8\% & 51.5\% & 50.2\% & 23.5\% & 46.4\% & 5.7\% \\ FTEs / Adjusted Occupied Beat & 4.5 & 4.5 & -1.0\% & 4.8 & -3.9\% & 4.5 & 4.5 & -1.0\% & 4.8 & -3.5\% \\ \hline Patient Chaps & 1.0\% & 1.0\% & 1.0\% & 4.3 & -3.5\% & -4.5\% & 4.6 & -1.0\% & 4.8 & -3.5\% \\ \hline Patient Chaps & 4.6 & -1.0\% & 4.8 & -3.9\% & -4.5 & -4.5\% & -$	Hospital Operations										
Adjusted Patient Days 10.013 10.044 -0.3% 10.012 -1.0044 -0.3% 10.041 -0.3% 10.044 -0.3% 10.041 -0.1% 10.13 10.13 10.13 10.13 10.3% 10.13 10.3% 10.33 10.33 10.33 10.33 10.33 10.33 10.33 10.33 10.33 10.33 10.33 10.33 10.33 10.33											
Hours Adjusted Patient Day Occupanol - Adjusted Occupied Bed 26,15 26,42 -1.0% 27,21 3.9% 26,165 50,27 2.8% 77,27 3.9% 26,165 50,27 2.8% 4.8 3.9% 76,165 50,27 2.8% 4.4 3.9% 4.6 4.6 4.8 3.9% 4.6 4.6 4.8 3.9% 4.6 4.6 4.8 3.9% 4.6 4.6 4.8 3.3% 7.7% 4.6 0.9% 4.6 4.6 4.8 3.3% 7.7% 4.6 0.9% 4.6 4.6 4.8 3.3% 7.7% 4.6 0.9% 4.6 4.6 0.2% 3.5 0.6% 6.164 6.163 0.2% 3.5 0.6% 6.164 6.163 0.2% 3.5 0.6% 6.164 6.13 0.2% 3.5 0.2% 1.139 1.139 1.139 1.139 1.139 1.139 1.139 1.139 1.139 1.139 1.139 1.137 1.216 0.0% 1.137 1.00.			,					,			
Occupancy - Actual Beds 61.6% 592.% 2.8% 41.74% 8.8% 51.6% 502.% 2.8% 44.3% 6.7% FTE's / Adjusted Occupied Bed 4.6 4.6 4.6 3.3% 4.6 4.6 4.8 3.3% Admissions 3.22 3.2 0.0% 3.4 5.3% 3.2 0.0% 3.4 5.3% Admissions 3.22 0.0% 3.4 5.3% 3.06% 4.6 4.6 4.6 5.9% Admissions 3.22 0.0% 3.4 5.3% 3.06% 4.6.0 4.5.9 3.6.7% 5.16% 8.154 8.135 0.2% 5.2%			,		,			,		,	
FTE's / Adjusted Occupied Bed 4.6 4.6 4.6 4.6 4.6 4.6 4.6 4.6 4.6 4.6 4.6 4.8 3.3% InPlation Rehab Unit Admissions 32 32 0.0% 34 5.5% 32 32 0.0% 34 5.9% 32 32 0.0% 34 5.9% 32 32 0.0% 34 5.9% 32 32 0.0% 34 5.9% 32 32 0.0% 34 5.9% 32 32 0.0% 34 5.9% 32 32 0.0% 34 5.9% 32 32.6% 46.0 46.9 32.6% 46.0 45.9 0.2% 55.3 30.6% 46.0 45.9 0.2% 55.3 30.6% 46.0 45.9 0.2% 55.3 30.6% 46.0 45.9 0.2% 55.1% 1.139 42.1% 1.619 1.198 55.1% 1.139 42.1% 1.619 1.198 15.1% 1.100.0% 1.59											
Admissions 32 32 32 0.0% 34 6.5% 32 32 32 0.0% 34 6.5% 32 32 32 0.0% 34 6.5% 0.0% 446 90% Average Length of Stay 15.2 13.5 12.5% 46.0 90% 436 43.5 0.2% 6.245 30.6% 46.0 45.9 0.2% 53.3 30.6% 46.0 45.9 0.2% 53.3 30.6% Canter for Primary Care - Cleanents 1.619 1.198 35.1% 1.139 42.1% 1.619 1.198 35.1% 1.39 42.1% 1.619 1.198 35.1% 1.139 42.1% 1.619 1.198 3.51% 1.139 42.1% 1.619 1.198 3.51% 1.139 42.1% 1.619 1.198 3.147 0.1% 3.395 1.600.0% 613 1.000.0% 1.83 1.000.0% 1.231 1.000.0% 1.231 1.000.0% 1.231 1.000.0% 1.231 1.000.											-3.9%
Patient Days 486 432 12.5% 446 9.0% 486 432 12.2% 446 9.0% Marbage Langth of Sky 15.2 13.5 12.5% 13.1 15.8% 15.2 13.5 12.5% 13.1 15.8% 15.2 13.5 12.5% 13.4 15.8% 13.5 0.2% 53.6 30.6% 8.164 8.135 0.2% 53.6 30.6% 8.164 8.135 0.2% 53.6 30.6% Center for Primary Care - Clements 1.619 1.198 35.1% 1.139 42.1% 1.619 1.138 42.1% 1.619 1.139 42.1% 1.619 1.139 42.1% 1.619 1.139 42.1% 1.619 1.139 42.1% 1.619 1.133 42.1% 1.619 1.139 42.1% 1.619 1.139 42.1% 1.619 1.131 1.203 5.5% 1.211 1.00.0% 1.233 1.00.0% 1.721 1.00.0% 1.71 1.00.0% 1.71 1.00.0% 1	InPatient Rehab Unit										
$ \begin{array}{llllllllllllllllllllllllllllllllllll$	Admissions	32	32	0.0%	34	-5.9%	32	32	0.0%	34	-5.9%
Marhours Paid FTE's 8,154 46.0 8,154 45.9 0.2% 0.2% 6,245 35.3 30.6% 35.4 8,164 45.9 6,245 0.2% 30.6% 35.3 Center for Primary Care - Clements Total Medical Visits 1,1619 1,198 1,189 35.1% 1,139 1,20 42.1% 1,619 1,198 1,8.9 35.1% 0.2% 1,133 3.36% 45.9 0.2% 45.9 35.3 30.6% Center for Primary Care - Clements Total Medical Visits 1,619 1,198 19.2 35.1% 19.2 1,137 19.2 42.1% 18.9 1,619 19.2 1,138 19.2 42.1% 18.9 1,139 19.2 42.1% 18.9 1,139 19.2 42.1% 18.9 1,139 19.2 42.1% 18.9 1,138 19.2 1,137 19.0 1,137 19.0 1,137 19.0 1,21 19.00% 1,23 19.00% 1											
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Center for Primary Care - Clements 1,619 1,198 35.1% 1,139 42.1% 1,619 1,198 35.1% 1,139 42.1% FTE's 18.9 19.2 1.5% 18.9 0.1% 3,345 0.1% 3,347 0.1% 18.9 19.2 -1.5% 18.9 0.1% Center for Primary Care - West University - 1483 -100.0% - 463 -100.0% - 463 -100.0% - 463 -100.0% - 1,333 -100.0% 1,721 -100.0% - 1,333 -100.0% - 1,333 -100.0% - 1,333 -100.0% - 1,333 -100.0% - 1,333 -100.0% - 1,333 -100.0% - 1,333 -100.0% - 1,333 -100.0% - 1,333 -100.0% - 1,333 -100.0% - 1,333 -100.0% - 1,335 -100.0% - 1,335 -100.0% - 1,333 -100.0%											
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Matheours Paid FTE's 3,345 3,395 -1.5% 3,347 -0.1% 3,345 3,395 -1.5% 3,347 -0.1% FTE's 18.9 19.2 -1.5% 18.9 -0.1% 18.9 19.2 -1.5% 18.9 0.1% Center for Primary Care - West University - - 463 -100.0% - 463 -100.0% - 463 -100.0% - 1.033 -100.0% - 1.033 -100.0% - 1.033 -100.0% - 1.033 -100.0% - 1.033 -0.00 7.9 -100.0% 9.7 -100.0% - 1.033 -5.5% 1.231 -7.6% 1.137 1.203 -5.5% 1.231 -7.6% 1.137 1.203 -5.5% 1.231 -7.6% 1.137 1.203 -5.5% 1.231 -7.6% 1.137 1.203 -5.5% 1.231 -7.6% 1.137 1.203 -5.5% 1.271 4.6337% 1.44 4.8 -8.8% 4.6 <t< td=""><td>Center for Primary Care - Clements</td><td>1 610</td><td>1 109</td><td>35 10/</td><td>1 1 2 0</td><td>42 1%</td><td>1 610</td><td>1 109</td><td>35 1%</td><td>1 120</td><td>42 10/</td></t<>	Center for Primary Care - Clements	1 610	1 109	35 10/	1 1 2 0	42 1%	1 610	1 109	35 1%	1 120	42 10/
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ProCare FTEs 206.0 234.8 -12.3% 212.3 -3.0% 206.0 234.8 -12.3% 212.3 -3.0% Total System FTEs 1,832.9 1,842.6 -0.5% 2,008.4 -8.7% 1,832.9 1,842.6 -0.5% 2,008.4 -8.7% Urgent Care Visits JBS Clinic 555 830 -33.1% 899 -38.3% 555 830 -33.1% 899 -38.3% West University 481 465 3.4% 487 -1.2% 481 465 3.4% 487 -1.2% 481 465 3.4% 487 -1.2% 481 465 3.4% 487 -1.2% 481 465 3.4% 487 -1.2% 481 465 3.4% 487 -1.2% 481 465 3.4% 487 -1.2% 481 465 3.4% 42.9% 909 497 82.9% 636 42.9% 909 497 82.9% 636 42.9% 1,945 1,792 8	Total FTE'S per Adjusted Occupied										
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Urgent Care Visits 555 830 -33.1% 899 -38.3% JBS Clinic 555 830 -33.1% 899 -38.3% West University 481 465 3.4% 487 -1.2% 42nd Street 909 497 82.9% 636 42.9% Total Urgent Care Visits 1,945 1,792 8.5% 2,022 -3.8% Wal-Mart Clinic Visits East Clinic 156 411 -62.0% 399 -60.9% West Clinic - - 0.0% 340 -100.0% - - 0.0% 340 -100.0%	ProCare FTEs										-3.0%
JBS Clinic 555 830 -33.1% 899 -38.3% 555 830 -33.1% 899 -38.3% West University 481 465 3.4% 487 -1.2% 481 465 3.4% 487 -1.2% 42nd Street 909 497 82.9% 636 42.9% 909 497 82.9% 636 42.9% 909 497 82.9% 636 42.9% 909 497 82.9% 636 42.9% 909 497 82.9% 636 42.9% 909 497 82.9% 636 42.9% 909 497 82.9% 636 42.9% 909 497 82.9% 636 42.9% 909 497 82.9% 636 42.9% 1,945 1,792 8.5% 2,022 -3.8% 1,945 1,792 8.5% 2,022 -3.8% 1,945 1,792 8.5% 2,022 -3.8% 1,945 1,945 1,945 399 -60.9% 160.9%	Total System FTEs	1,832.9	1,842.6	-0.5%	2,008.4	-8.7%	1,832.9	1,842.6	-0.5%	2,008.4	-8.7%
West University 481 465 3.4% 487 -1.2% 481 465 3.4% 487 -1.2% 42nd Street 909 497 82.9% 636 42.9% 909 497 82.9% 636 42.9% 909 497 82.9% 636 42.9% 909 497 82.9% 636 42.9% 909 497 82.9% 636 42.9% 1,945 1,792 8.5% 2,022 -3.8% 1,945 1,792 8.5% 2,022 -3.8% 1,945 1,792 8.5% 2,022 -3.8% 1,945 1,792 8.5% 2,022 -3.8% 1,945 1,792 8.5% 2,022 -3.8% 1,945 1,792 8.5% 2,022 -3.8% 1,945 1,792 8.5% 2,022 -3.8% 1,945 1,792 8.5% 2,022 -3.8% 1,945 1,945 1,945 1,945 1,945 1,945 399 -60.9% 160 11 -62.0% 399	Urgent Care Visits					00.001					
42nd Street 909 497 82.9% 636 42.9% 909 497 82.9% 636 42.9% Total Urgent Care Visits 1,945 1,792 8.5% 2,022 -3.8% 1,945 1,792 8.5% 2,022 -3.8% Wal-Mart Clinic Visits East Clinic 156 411 -62.0% 399 -60.9% 156 411 -62.0% 399 -60.9% - - 0.0% 340 -100.0% - - 0.0% 340 -100.0% - - 0.0% 340 -100.0% - - 0.0% 340 -100.0% - - 0.0% 340 -100.0% - - 0.0% 340 -100.0% - - 0.0% 340 -100.0%											
Total Urgent Care Visits 1,945 1,792 8.5% 2,022 -3.8% 1,945 1,792 8.5% 2,022 -3.8% Wal-Mart Clinic Visits East Clinic 156 411 -62.0% 399 -60.9% 156 411 -62.0% 399 -60.9% - - 0.0% 340 -100.0% - - 0.0% 340 -100.0% - - 0.0% 340 -100.0% - - 0.0% 340 -100.0% - - 0.0% 340 -100.0% - - 0.0% 340 -100.0% - - 0.0% 340 -100.0% - - 0.0% 340 -100.0% - - 0.0% 340 -100.0% - - 0.0% 340 -100.0% - - 0.0% 340 -100.0% - - 0.0% 340 -100.0% - - 0.0% 340 -100.0% - - 0.0% 340 </td <td></td>											
East Clinic 156 411 -62.0% 399 -60.9% 156 411 -62.0% 399 -60.9% West Clinic - - 0.0% 340 -100.0% - - 0.0% 340 -100.0%											
East Clinic 156 411 -62.0% 399 -60.9% 156 411 -62.0% 399 -60.9% West Clinic - - 0.0% 340 -100.0% - - 0.0% 340 -100.0%	Wal-Mart Clinic Visits										
	East Clinic	156	411				156	411			
Total Wal-Mart Visits		-	-					-			
	Total Wal-Mart Visits	156	411	-62.0%	739	-78.9%	156	411	-62.0%	739	-78.9%

ECTOR COUNTY HOSPITAL DISTRICT BALANCE SHEET - BLENDED OCTOBER 2020

	HOSPITAL	PRO CARE	ECTOR COUNTY HOSPITAL DISTRICT
ASSETS			
CURRENT ASSETS: Cash and Cash Equivalents	\$ 74,565,952	\$ 4,650	\$ 74,570,602
Investments	49,284,928	. ,	49,284,928
Patient Accounts Receivable - Gross	225,130,872		256,711,913
Less: 3rd Party Allowances	(127,024,950	, , , , ,	
Bad Debt Allowance	(74,054,431		
Net Patient Accounts Receivable Taxes Receivable	24,051,490		31,731,874 6,792,103
Accounts Receivable - Other	6,792,103 8,932,648		8,975,831
Inventories	7,573,211		7,971,490
Prepaid Expenses	3,838,617		4,022,834
Total Current Assets	175,038,948	8,310,714	183,349,662
CAPITAL ASSETS: Property and Equipment	482,937,161	467,364	483,404,525
Construction in Progress	1,649,620	,	1,649,620
	484,586,782		485,054,146
Less: Accumulated Depreciation and Amortization	(309,466,103) (333,490)	(309,799,593)
Total Capital Assets	175,120,679	133,874	175,254,553
INTANGIBLE ASSETS / GOODWILL - NET		-	_
RESTRICTED ASSETS:	4 000		4 000
Restricted Assets Held by Trustee	4,896		4,896
Restricted Assets Held in Endowment Restricted TPC, LLC	6,375,569 593,971	-	6,375,569 593,971
Restricted MCH West Texas Services	2,278,635	-	2,278,635
Pension, Deferred Outflows of Resources	6,438,549		6,438,549
Assets whose use is Limited		79,725	79,725
TOTAL ASSETS	\$ 365,851,246	\$ 8,524,313	\$ 374,375,559
LIABILITIES AND FUND BALANCE			
CURRENT LIABILITIES:			
Current Maturities of Long-Term Debt	\$ 2,036,454	\$-	\$ 2,036,454
Self-Insurance Liability - Current Portion	3,179,304		3,179,304
Accounts Payable	26,205,551	4,104,911	30,310,462
A/R Credit Balances	3,682,204	-	3,682,204
Accrued Interest	167,939	-	167,939
Accrued Salaries and Wages	4,425,179	4,236,526	8,661,705
Accrued Compensated Absences	4,336,803	-	4,336,803
Due to Third Party Payors	4,425,008	-	4,425,008
Deferred Revenue	(1,618,231) 215,706	(1,402,524)
Total Current Liabilities	46,840,211	8,557,144	55,397,355
ACCRUED POST RETIREMENT BENEFITS	60,155,276	-	60,155,276
SELF-INSURANCE LIABILITIES - Less Current Portion	2,037,980		2,037,980
LONG-TERM DEBT - Less Current Maturities	69,068,538		69,068,538
Total Liabilities	178,102,005	8,557,144	186,659,149
FUND BALANCE	187,749,241	(32,831)	187,716,410
TOTAL LIABILITIES AND FUND BALANCE	\$ 365,851,246	\$ 8,524,313	\$ 374,375,560

ECTOR COUNTY HOSPITAL DISTRICT BALANCE SHEET - BLENDED OCTOBER 2020

		PRIOR FISCAL	CURRENT	
	CURRENT YEAR	HOSPITAL	PRO CARE UNAUDITED	YEAR CHANGE
ASSETS				
CURRENT ASSETS:				
Cash and Cash Equivalents	\$ 74,570,602	\$ 85,536,668	\$ 4,650	\$ (10,970,716)
Investments	49,284,928	37,790,083	-	11,494,845
Patient Accounts Receivable - Gross	256,711,913	229,332,591	29,129,319	(1,749,997)
Less: 3rd Party Allowances	(134,214,240)	(130,246,448)	(6,079,147)	2,111,356
Bad Debt Allowance	(90,765,800)	(74,141,620)	(15,966,971)	(657,209)
Net Patient Accounts Receivable	31,731,874	24,944,523	7,083,200	(295,849)
Taxes Receivable	6,792,103	6,690,004	-	102,099 1,635,251
Accounts Receivable - Other Inventories	8,975,831 7,971,490	7,316,982 7,585,878	23,598 398,279	(12,668)
Prepaid Expenses	4,022,834	2,891,777	202,921	928,136
Trepaid Expenses	4,022,034	2,091,111	202,921	920,130
Total Current Assets	183,349,662	172,755,916	7,712,648	2,881,098
CAPITAL ASSETS:				
Property and Equipment	483,404,525	480,276,838	467,364	2,660,323
Construction in Progress	1,649,620	4,122,443		(2,472,822)
	485,054,146	484,399,281	467,364	187,501
Less: Accumulated Depreciation and Amortization	(309,799,593)	(307,901,871)	(331,334)	(1,566,388)
Total Capital Assets	175,254,553	176,497,410	136,030	(1,378,887)
INTANGIBLE ASSETS / GOODWILL - NET	-	-	0	(0)
RESTRICTED ASSETS:				
Restricted Assets Held by Trustee	4,896	2,370,723	-	(2,365,827)
Restricted Assets Held in Endowment	6,375,569	6,375,569	-	(_,000,0)
Restricted TPC, LLC	593,971	593,971	-	-
Restricted MCH West Texas Services	2,278,635	2,255,728	-	22,907
Pension, Deferred Outflows of Resources	6,438,549	6,438,549	-	-
Assets whose use is Limited	79,725		69,426	10,299
TOTAL ASSETS	\$ 374,375,559	\$ 367,287,865	\$ 7,918,105	\$ (830,410)
LIABILITIES AND FUND BALANCE				
CURRENT LIABILITIES:				
Current Maturities of Long-Term Debt	\$ 2,036,454	\$ 2,035,380	\$-	\$ 1,074
Self-Insurance Liability - Current Portion	φ 2,030,434 3,179,304	φ 2,000,000 3,179,304	Ψ -	φ 1,074
Accounts Payable	30,310,462	24,244,787	3,371,956	2,693,720
A/R Credit Balances	3,682,204	4,064,002	-	(381,798)
Accrued Interest	167,939	32,015	-	135,924
Accrued Salaries and Wages	8,661,705	6,607,784	4,346,323	(2,292,401)
Accrued Compensated Absences	4,336,803	4,182,624	-	154,180
Due to Third Party Payors	4,425,008	4,217,493	-	207,515
Deferred Revenue	(1,402,524)	290,392	232,657	(1,925,572)
Total Current Liabilities	55,397,355	48,853,779	7,950,935	(1,407,359)
ACCRUED POST RETIREMENT BENEFITS	60,155,276	59,555,276	-	600,000
SELF-INSURANCE LIABILITIES - Less Current Portion	2,037,980	2,037,980	-	-
LONG-TERM DEBT - Less Current Maturities	69,068,538	69,162,757	-	(94,219)
Total Liabilities	186,659,149	179,609,792	7,950,935	(901,578)
FUND BALANCE	187,716,410	187,678,074	(32,831)	71,168
TOTAL LIABILITIES AND FUND BALANCE	\$ 374,375,560	\$ 367,287,865	\$ 7,918,105	\$ (830,410)

ECTOR COUNTY HOSPITAL DISTRICT BLENDED OPERATIONS SUMMARY OCTOBER 2020

	CURRENT MONTH							YEAR TO DATE							
				Contra	BUDGET			PRIOR				1 EAR	BUDGET		PRIOR
		ACTUAL		BUDGET	VAR	P	PRIOR YR	YR VAR		ACTUAL		BUDGET	VAR	PRIOR YR	YR VAR
PATIENT REVENUE						-									·
Inpatient Revenue	\$	54,251,093	\$	52,945,909	2.5%	\$	51,604,529	5.1%	\$	54,251,093	\$	52,945,909	2.5% \$	51,604,529	5.1%
Outpatient Revenue		58.111.708	*	56.610.054	2.7%	Ŧ	61.497.966	-5.5%	•	58.111.708	•	56.610.054	2.7%	61,497,966	-5.5%
TOTAL PATIENT REVENUE	\$	112,362,801	\$	109,555,963		\$	113,102,495	-0.7%	\$	112,362,801	\$	109,555,963	2.6% \$		-0.7%
	+	,,	+			-			+	,,,	Ŧ	,		,,	
DEDUCTIONS FROM REVENUE															
Contractual Adjustments	\$	69,068,025	\$	63,802,092	8.3%	\$	71,156,300	-2.9%	\$	69,068,025	\$	63,802,092	8.3% \$	71,156,300	-2.9%
Policy Adjustments		1,770,375		1,299,022	36.3%		389,953	354.0%		1,770,375		1,299,022	36.3%	389,953	354.0%
Uninsured Discount		9,460,539		13,983,185	-32.3%		8,115,545	16.6%		9,460,539		13,983,185	-32.3%	8,115,545	16.6%
Indigent		634,189		1,398,032	-54.6%		1,886,719	-66.4%		634,189		1,398,032	-54.6%	1,886,719	-66.4%
Provision for Bad Debts		8,588,681		6,692,862	28.3%		6,289,384	36.6%		8,588,681		6,692,862	28.3%	6,289,384	36.6%
TOTAL REVENUE DEDUCTIONS	\$	89,521,809	\$	87,175,193	2.7%	\$	87,837,899	1.9%	\$	89,521,809	\$	87,175,193	2.7% \$	87,837,899	1.9%
		79.67%		79.57%			77.66%			79.67%		79.57%		77.66%	
OTHER PATIENT REVENUE															
Medicaid Supplemental Payments	\$	1,954,337	\$	1,752,244	11.5%	\$	1,097,298	78.1%	\$	1,954,337		1,752,244	11.5% \$		78.1%
DSRIP		547,173		547,173	0.0%		479,459	14.1%		547,173		547,173	0.0%	479,459	14.1%
TOTAL OTHER PATIENT REVENUE	\$	2,501,510	\$	2,299,417	8.8%	\$	1,576,757	58.6%	\$	2,501,510	\$	2,299,417	8.8% \$	1,576,757	58.6%
						_									
NET PATIENT REVENUE	\$	25,342,501	\$	24,680,187	2.7%	\$	26,841,353	-5.6%	\$	25,342,501	\$	24,680,187	2.7% \$	26,841,353	-5.6%
OTHER REVENUE															
Tax Revenue	\$	5,236,620	¢	5,308,654	-1.4%	¢	5,562,655	-5.9%	\$	5,236,620	¢	5,308,654	-1.4% \$	5,562,655	-5.9%
Other Revenue	Ф	930,526	Þ	5,308,654 798,700	-1.4%	φ	5,562,655 886,725	-5.9%	¢	930,526	ф	5,308,654 798,700	-1.4% \$ 16.5%	886,725	-5.9%
TOTAL OTHER REVENUE	\$	6,167,146	¢	6,107,354	1.0%	¢	6,449,380	-4.4%	\$	6,167,146	¢	6,107,354	1.0% \$		-4.4%
TOTAL OTHER REVENUE	φ	0,107,140	Ψ	0,107,554	1.070	Ψ	0,443,500	-4.470	Ψ	0,107,140	ψ	0,107,334	1.070 Q	0,448,500	-4.470
NET OPERATING REVENUE	\$	31,509,646	\$	30,787,541	2.3%	\$	33,290,734	-5.4%	\$	31,509,646	\$	30,787,541	2.3% \$	33,290,734	-5.4%
									<u> </u>						
OPERATING EXPENSES															
Salaries and Wages	\$	13,143,136	\$	13,156,711	-0.1%	\$	13,904,756	-5.5%	\$	13,143,136	\$	13,156,711	-0.1% \$	13,904,756	-5.5%
Benefits		2,639,955		2,684,730	-1.7%		2,885,088	-8.5%		2,639,955		2,684,730	-1.7%	2,885,088	-8.5%
Temporary Labor		863,015		687,233	25.6%		1,361,634	-36.6%		863,015		687,233	25.6%	1,361,634	-36.6%
Physician Fees		1,483,767		1,460,671	1.6%		1,481,421	0.2%		1,483,767		1,460,671	1.6%	1,481,421	0.2%
Texas Tech Support		823,757		820,236	0.4%		1,016,932	-19.0%		823,757		820,236	0.4%	1,016,932	-19.0%
Purchased Services		4,139,099		3,732,319	10.9%		4,759,104	-13.0%		4,139,099		3,732,319	10.9%	4,759,104	-13.0%
Supplies		5,096,025		5,125,235	-0.6%		5,006,692	1.8%		5,096,025		5,125,235	-0.6%	5,006,692	1.8%
Utilities		370,679		332,021	11.6%		300,516	23.3%		370,679		332,021	11.6%	300,516	23.3%
Repairs and Maintenance		673,613		738,806	-8.8%		669,662	0.6%		673,613		738,806	-8.8%	669,662	0.6%
Leases and Rent		149,875		158,744	-5.6%		110,595	35.5%		149,875		158,744	-5.6%	110,595	35.5%
Insurance		168,174		154,717	8.7%		137,962	21.9%		168,174		154,717	8.7%	137,962	21.9%
Interest Expense		103,186		150,449	-31.4%		238,624	-56.8%		103,186		150,449	-31.4%	238,624	-56.8%
ECHDA		150,995		317,389	-52.4%		456,678	-66.9%		150,995		317,389	-52.4%	456,678	-66.9%
Other Expense		105,642		213,243	-50.5%	_	158,947	-33.5%		105,642		213,243	-50.5%	158,947	-33.5%
TOTAL OPERATING EXPENSES	\$	29,910,917	\$	29,732,504	0.6%	\$	32,488,610	-7.9%	\$	29,910,917	\$	29,732,504	0.6% \$	32,488,610	-7.9%
Depreciation/Amortization	\$	1,569,287	\$	1,593,154	-1.5%	¢	1.539.382	1.9%	\$	1,569,287	¢	1.593.154	-1.5% \$	1,539,382	1.9%
(Gain) Loss on Sale of Assets	Ф	1,509,207	Þ	1,595,154	-1.5%	φ	1,559,562	-100.0%	¢	1,309,207	ф	1,595,154	-1.5% \$ 0.0%	272	-100.0%
(Gain) Loss on Gale of Assets		-		-	0.076		212	-100.0%		-		-	0.076	212	-100.0%
TOTAL OPERATING COSTS	\$	31,480,205	\$	31,325,658	0.5%	\$	34.028.263	-7.5%	\$	31,480,205	\$	31,325,658	0.5% \$	34,028,264	-7.5%
		. , ,													
NET GAIN (LOSS) FROM OPERATIONS	\$	29,441	\$	(538,117)	105.5%	\$	(737,530)	104.0%	\$	29,441	\$	(538,117)	-105.5% \$	(737,530)	-104.0%
Operating Margin		0.09%		-1.75%	-105.3%		-2.22%	-104.2%	_	0.09%		-1.75%	-105.3%	-2.22%	-104.2%
NONOPERATING REVENUE/EXPENSE															
Interest Income	\$	17,573	\$	33,519	-47.6%	\$	90,529	-80.6%	\$	17,573	\$	33,519	-47.6% \$	90,529	-80.6%
Tobacco Settlement		-		-	0.0%		-	0.0%		-		-		-	
Trauma Funds		-			0.0%		-	0.0%		-		-	0.0%	-	0.0%
Donations		-		21,084	-100.0%		-			-		21,084	-100.0%	-	e
COVID-19 Stimulus		-		-	0.0%		-	0.0%		-		-	0.0%	-	0.0%
Underwriter Discount & Bond Costs		-		-	0.0%		-	0.0%		-		-	0.0%	-	0.0%
Build America Bonds Subsidy		-		-	0.0%		75,422	-100.0%		-		-	0.0%	75,422	-100.0%
CHANCE IN NET DOOTTON DEFORE															
CHANGE IN NET POSITION BEFORE	ŕ	47.045	¢	(402 644)	100 70/	¢	(674 670)	100.00/	ć	47.045	¢	(400 544)	100 70/ *	(674 670)	100.00/
INVESTMENT ACTIVITY	\$	47,015	\$	(483,514)	109.7%	ф	(571,579)	108.2%	\$	47,015	\$	(483,514)	109.7% \$	(571,579)	108.2%
Unrealized Gain/(Loss) on Investments	\$	1,246	\$	14,285	0.0%	\$	720	73.0%	\$	1,246	\$	14,285	0.0% \$	720	73.0%
Investment in Subsidiaries		22,907		1,614	1319.3%		21,916	4.5%		22,907		1,614	1319.3%	21,916	4.5%
CHANGE IN NET POSITION	\$	71,168	\$	(467,615)	115.2%	\$	(548,943)	113.0%	\$	71,168	\$	(467,615)	115.2% \$	(548,943)	113.0%

ECTOR COUNTY HOSPITAL DISTRICT HOSPITAL OPERATIONS SUMMARY OCTOBER 2020

	CURRENT MONTH						YEAR TO DATE						
		ACTUAL	BUDGET	BUDGET VAR	PRIOR YR	PRIOR YR VAR		ACTUAL	BUDGET	BUDGET VAR	PRIOR YR	PRIOR YR VAR	
PATIENT REVENUE Inpatient Revenue	\$		\$ 52,945,909		\$ 51,604,529	5.1%	\$	54,251,093 \$	52,945,909	2.5% \$	51,604,529	5.1%	
Outpatient Revenue		43,138,591	45,162,566		\$ 52,155,320	-17.3%		43,138,591	45,162,566	-4.5%	52,155,320	-17.3%	
TOTAL PATIENT REVENUE	\$	97,389,684	\$ 98,108,475	-0.7%	\$ 103,759,849	-6.1%	\$	97,389,684 \$	98,108,475	-0.7% \$	103,759,849	-6.1%	
DEDUCTIONS FROM REVENUE													
Contractual Adjustments	\$	62,668,489	\$ 59,409,256	5.5%		-6.0%	\$	62,668,489 \$	59,409,256	5.5% \$	66,634,557	-6.0%	
Policy Adjustments Uninsured Discount		76,753 8,056,727	141,926 13,284,140	-45.9% -39.4%	\$ 78,209 \$ 7,739,109	-1.9% 4.1%		76,753 8,056,727	141,926 13,284,140	-45.9% -39.4%	78,209 7,739,109	-1.9% 4.1%	
Indigent Care		628,596	1,373,364	-54.2%		-65.6%		628,596	1,373,364	-54.2%	1,829,199	-65.6%	
Provision for Bad Debts		7,047,062	5,677,680	24.1%		29.8%		7,047,062	5,677,680	24.1%	5,430,491	29.8%	
TOTAL REVENUE DEDUCTIONS	\$	78,477,628	\$ 79,886,366 81.43%	-1.8%	\$ 81,711,565 78,75%	-4.0%	\$	78,477,628 \$	79,886,366	-1.8% \$	81,711,565	-4.0%	
OTHER PATIENT REVENUE		80.58%	01.43%		10.15%			80.58%	81.43%		78.75%		
Medicaid Supplemental Payments	\$	1,954,337	\$ 1,752,244	11.5%	\$ 1,097,298	78.1%	\$	1,954,337 \$	1,752,244	11.5% \$	1,097,298	78.1%	
DSRIP		547,173	547,173	0.0%		14.1%		547,173	547,173	0.0%	479,459	14.1%	
TOTAL OTHER PATIENT REVENUE	\$	2,501,510	\$ 2,299,417	8.8%	\$ 1,576,757	58.6%	\$	2,501,510 \$	2,299,417	8.8% \$	1,576,757	58.6%	
NET PATIENT REVENUE	\$	21,413,566	\$ 20,521,526	4.3%	\$ 23,625,041	-9.4%	\$	21,413,566 \$	20,521,526	4.3% \$	23,625,041	-9.4%	
OTHER REVENUE													
Tax Revenue	\$	5,236,620	\$ 5,308,654	-1.4%	\$ 5,562,655	-5.9%	\$	5,236,620 \$	5,308,654	-1.4% \$	5,562,655	-5.9%	
Other Revenue		600,709	610,472		\$ 678,605	-11.5%	_	600,709	610,472	-1.6%	678,605	-11.5%	
TOTAL OTHER REVENUE	\$	5,837,329	\$ 5,919,126	-1.4%	\$ 6,241,260	-6.5%	\$	5,837,329 \$	5,919,126	-1.4% \$	6,241,260	-6.5%	
NET OPERATING REVENUE	\$	27,250,895	\$ 26,440,652	3.1%	\$ 29,866,301	-8.8%	\$	27,250,895 \$	26,440,652	3.1% \$	29,866,301	-8.8%	
OPERATING EXPENSE													
Salaries and Wages	\$	9,207,526		0.5%		-8.1%	\$	9,207,526 \$	9,165,091	0.5% \$	10,024,061	-8.1%	
Benefits		2,303,258	2,301,006	0.1%		-9.3%		2,303,258	2,301,006	0.1%	2,540,452	-9.3%	
Temporary Labor Physician Fees		684,307 1,372,154	471,566 1,315,530	45.1% 4.3%		-7.5% 9.9%		684,307 1,372,154	471,566 1,315,530	45.1% 4.3%	739,443 1.248.408	-7.5% 9.9%	
Texas Tech Support		823,757	820,236	0.4%		-19.0%		823,757	820,236	0.4%	1,016,932	-19.0%	
Purchased Services		4,104,516	3,746,030	9.6%		-9.5%		4,104,516	3,746,030	9.6%	4,533,931	-9.5%	
Supplies		4,968,284	4,974,949	-0.1%		2.7%		4,968,284	4,974,949	-0.1%	4,837,868	2.7%	
Utilities		370,032	331,206	11.7%		24.5%		370,032	331,206	11.7%	297,106	24.5%	
Repairs and Maintenance		673,613	733,989	-8.2%		0.6%		673,613	733,989	-8.2%	669,631	0.6%	
Leases and Rentals Insurance		(13,647) 119,305	(7,258) 109,297	88.0% 9.2%		-76.1% 32.7%		(13,647) 119,305	(7,258) 109,297	88.0% 9.2%	(57,129) 89,908	-76.1% 32.7%	
Interest Expense		103,186	150,449	-31.4%		-56.8%		103,186	150,449	-31.4%	238,624	-56.8%	
ECHDA		150,995	317,389	-52.4%		-66.9%		150,995	317,389	-52.4%	456,678	-66.9%	
Other Expense		44,660	121,795	-63.3%		-47.9%		44,660	121,795	-63.3%	85,744	-47.9%	
TOTAL OPERATING EXPENSES	\$	24,911,947	\$ 24,551,275	1.5%	\$ 26,721,656	-6.8%	\$	24,911,947 \$	24,551,275	1.5% \$	26,721,656	-6.8%	
Depreciation/Amortization	\$	1,562,109	\$ 1,585,669	-1.5%		2.7%	\$	1,562,109 \$	1,585,669	-1.5% \$	1,521,042	2.7%	
(Gain)/Loss on Disposal of Assets		-	-	0.0%	\$ 272	-100.0%		-	-	100.0%	272	-100.0%	
TOTAL OPERATING COSTS	\$	26,474,056	\$ 26,136,944	1.3%	\$ 28,242,970	-6.3%	\$	26,474,056 \$	26,136,944	1.3% \$	28,242,970	-6.3%	
NET GAIN (LOSS) FROM OPERATIONS	\$	776,839	\$ 303,708	155.8%	\$ 1,623,331	52.1%	\$	776,839 \$	303,708	155.8% \$	1,623,331	-52.1%	
Operating Margin		2.85%	1.15%	148.2%	\$0	-47.6%		2.85%	1.15%	148.2%	5.44%	-47.6%	
NONOPERATING REVENUE/EXPENSE													
Interest Income	\$	17,573	\$ 33,519	-47.6%		-80.6%	\$	17,573 \$	33,519	-47.6% \$	90,529	-80.6%	
Tobacco Settlement		-	-	0.0%		0.0%		-	-		-	0.0%	
Trauma Funds		-	-	0.0%		0.0%		-	- 21,084	0.0%	-	0.0%	
Donations COVID-19 Stimulus		-	21,084	-100.0% 0.0%		0.0% 0.0%		-	21,064	-100.0%		0.0% 0.0%	
Underwriter Discount & Bond Costs		-	-	0.0%		0.0%		-	-		-	0.0%	
Build America Bonds Subsidy		-	-		\$ 75,422	-100.0%		-	-		75,422	-100.0%	
CHANGE IN NET POSITION BEFORE													
CAPITAL CONTRIBUTION	\$	794,413	\$ 358,311	121.7%	\$ 1,789,282	-55.6%	\$	794,413 \$	358,311	121.7% \$	1,789,282	-55.6%	
Procare Capital Contribution		(747,398)	(841,825)	-11.2%	\$ (2,360,861)	-68.3%		(747,397)	(841,825)	-11.2%	(2,360,861)	-68.3%	
CHANGE IN NET POSITION BEFORE INVESTMENT ACTIVITY	\$	47,015	\$ (483,514)	109.7%	\$ (571,579)	108.2%	\$	47,015 \$	(483,514)	109.7% \$	(571,579)	108.2%	
Unrealized Gain/(Loss) on Investments Investment in Subsidiaries	\$	1,246 22,907	\$ 14,285 1,614	-91.3% 1319.3%		73.0% 4.5%	\$	1,246 \$ 22,907	14,285 1,614	-91.3% \$ 1319.3%	720 21,916	73.0% 4.5%	
CHANGE IN NET POSITION	\$	71,168	\$ (467,615)	115.2%	\$ (548,943)	113.0%	\$	71,168 \$	(467,615)	115.2% \$	(548,943)	113.0%	

ECTOR COUNTY HOSPITAL DISTRICT PROCARE OPERATIONS SUMMARY OCTOBER 2020

	CURRENT MONTH							YEAR TO DATE						
		ACTUAL		BUDGET	BUDGET VAR	PRIOR YR	PRIOR YR VAR		ACTUAL		BUDGET	BUDGET VAR	PRIOR YR	PRIOR YR VAR
PATIENT REVENUE									-				-	
Outpatient Revenue	\$		\$	11,447,488		\$ 9,342,646	60.3%		14,973,117		11,447,488	30.8% \$		60.3%
TOTAL PATIENT REVENUE	\$	14,973,117	\$	11,447,488	30.8%	\$ 9,342,646	60.3%	\$	14,973,117	\$	11,447,488	30.8% \$	9,342,646	60.3%
DEDUCTIONS FROM REVENUE														
Contractual Adjustments	\$	6,399,535	\$	4,392,836	45.7%	\$ 4,521,743	41.5%	\$	6,399,535	\$	4,392,836	45.7% \$	4,521,743	41.5%
Policy Adjustments		1,693,622		1,157,096	46.4%	311,743	443.3%		1,693,622		1,157,096	46.4%	311,743	443.3%
Uninsured Discount		1,403,812		699,045	100.8%	376,436	272.9%		1,403,812		699,045	100.8%	376,436	272.9%
Indigent		5,594		24,668	-77.3%	57,520	-90.3%		5,594		24,668	-77.3%	57,520	-90.3%
Provision for Bad Debts		1,541,619		1,015,182	51.9%	858,892	79.5%		1,541,619		1,015,182	51.9%	858,892	79.5%
TOTAL REVENUE DEDUCTIONS	\$	11,044,182	\$	7,288,827	51.5%	\$ 6,126,334	80.3%	\$	11,044,182	\$	7,288,827	51.5% \$	6,126,334	80.3%
		73.76%		63.67%		65.57%			73.76%		63.67%		65.57%	
NET PATIENT REVENUE	\$	3,928,935	\$	4,158,661	-5.5%	\$ 3,216,312	22.2%	\$	3,928,935	\$	4,158,661	-5.5% \$	3,216,312	22.2%
OTHER REVENUE									26.2%					
Other Income	\$	329,817	¢	188,228	75.2%	\$ 208,121	58.5%	\$	329,817	¢	188,228	75.2% \$	208,121	58.5%
TOTAL OTHER REVENUE	φ	529,017	φ	100,220	1 3.2 /0	φ 200,121	30.370	φ	329,017	φ	100,220	13.270 4	200,121	30.370
NET OPERATING REVENUE	\$	4,258,751	\$	4,346,889	-2.0%	\$ 3,424,433	24.4%	\$	4,258,751	\$	4,346,889	-2.0% \$	3,424,433	24.4%
	<u> </u>	1,200,101	Ŷ	1,010,000	2.070	¢ 0,121,100	211770	<u> </u>	1,200,701	Ŷ	1,010,000	2.070 4	0,121,100	2
OPERATING EXPENSE									-					
Salaries and Wages	\$	3,935,610	\$	3,991,620	-1.4%	\$ 3,880,695	1.4%	\$	3,935,610	\$	3,991,620	-1.4% \$	3,880,695	1.4%
Benefits		336,698		383,724	-12.3%	344,636	-2.3%		336,698		383,724	-12.3%	344,636	-2.3%
Temporary Labor		178,708		215,667	-17.1%	622,191	-71.3%		178,708		215,667	-17.1%	622,191	-71.3%
Physician Fees		111,612		145,141	-23.1%	233,013	-52.1%		111,612		145,141	-23.1%	233,013	-52.1%
Purchased Services		34,583		(13,711)	-352.2%	225,173	-84.6%		34,583		(13,711)	-352.2%	225,173	-84.6%
Supplies		127,741		150,286	-15.0%	168,824	-24.3%		127,741		150,286	-15.0%	168,824	-24.3%
Utilities		646		815	-20.7%	3,410	-81.0%		646		815	-20.7%	3,410	-81.0%
Repairs and Maintenance		-		4,817	-100.0%	31	-100.0%		-		4,817	-100.0%	31	-100.0%
Leases and Rentals		163,522		166,002	-1.5%	167,725	-2.5%		163,522		166,002	-1.5%	167,725	-2.5%
Insurance		48,869		45,420	7.6%	48,055	1.7%		48,869		45,420	7.6%	48,055	1.7%
Other Expense	_	60,981		91,448	-33.3%	73,203	-16.7%	_	60,981		91,448	-33.3%	73,203	-16.7%
TOTAL OPERATING EXPENSES	\$	4,998,971	\$	5,181,229	-3.5%	\$ 5,766,954	-13.3%	\$	4,998,971	\$	5,181,229	-3.5% \$	5,766,954	-13.3%
Depreciation/Amortization	\$	7,178	\$	7,485	-4.1%	\$ 18,340	-60.9%	\$	7,178	\$	7,485	-4.1% \$	18,340	-60.9%
(Gain)/Loss on Sale of Assets		-		-	0.0%	-	0.0%		-		-	0.0%	-	0.0%
TOTAL OPERATING COSTS	\$	5,006,149	\$	5,188,714	-3.5%	\$ 5,785,294	-13.5%	\$	5,006,149	\$	5,188,714	-3.5% \$	5,785,294	-13.5%
NET GAIN (LOSS) FROM OPERATIONS	\$	(747,398)	\$	(841,825)		\$ (2,360,861)	-68.3%	\$	(747,398)	\$	(841,825)	11.2% \$		68.3%
Operating Margin		-17.55%		-19.37%	-9.4%	-68.94%	-74.5%		-17.55%		-19.37%	-9.4%	-68.94%	-74.5%
COVID-19 Stimulus	\$	-	\$	-		\$ -	0.0%	\$	-	\$	-	0.0% \$		0.0%
MCH Contribution	\$	747,398	\$	841,825	-11.2%	\$ 2,360,861	-68.3%	\$	747,398	\$	841,825	-11.2% \$	2,360,861	-68.3%
CAPITAL CONTRIBUTION	\$	-	\$	-	0.0%	\$-	0.0%	\$	-	\$	-	0.0% \$; -	0.0%

MONTHLY STATISTICAL REPORT

		CURRE	NT MONTH			YEAR TO DATE					
Total Office Visits	8,213	10,301	-20.27%	10,819	-24.09%	8,213	10,301	-20.27%	10,819	-24.09%	
Total Hospital Visits	5,178	5,189	-0.21%	5,298	-2.27%	5,178	5,189	-0.21%	5,298	-2.27%	
Total Procedures	14,240	12,966	9.83%	13,521	5.32%	14,240	12,966	9.83%	13,521	5.32%	
Total Surgeries	745	923	-19.28%	962	-22.56%	745	923	-19.28%	962	-22.56%	
Total Provider FTE's	91.0	93.0	-2.15%	80.4	13.18%	91.0	93.0	-2.15%	80.4	13.18%	
Total Staff FTE's	102.6	129.0	-20.47%	120.7	-15.00%	102.6	129.0	-20.47%	120.7	-15.00%	
Total Administrative FTE's	12.4	12.8	-3.13%	11.2	10.71%	12.4	12.8	-3.13%	11.2	10.71%	
Total FTE's	206.0	234.8	-12.27%	212.3	-2.97%	206.0	234.8	-12.27%	212.3	-2.97%	

ECTOR COUNTY HOSPITAL DISTRICT CENTER FOR PRIMARY CARE CLEMENTS - OPERATIONS SUMMARY OCTOBER 2020

	CURRENT MONTH							YEAR TO DATE							
	4	CTUAL	Е	UDGET	BUDGET VAR	PRIC	OR YR	PRIOR YR VAR	4	CTUAL	E	UDGET	BUDGET VAR	PRIOR YR	PRIOR YR VAR
PATIENT REVENUE	-														
Outpatient Revenue	\$	645,206	\$	363,147	77.7%			63.8%	\$	645,206	\$	363,147	77.7% \$		63.8%
TOTAL PATIENT REVENUE	\$	645,206	\$	363,147	77.7%	\$ 39	93,909	63.8%	\$	645,206	\$	363,147	77.7% \$	\$ 393,909	63.8%
DEDUCTIONS FROM REVENUE															
Contractual Adjustments	\$	357,793	\$	121,401	194.7%	\$	(450)	-79669.6%	\$	357,793	\$	121,401	194.7%	6 (450)	-79669.6%
Self Pay Adjustments		84,906		32,373	162.3%		(136)	-62636.9%		84,906		32,373	162.3%		-62636.9%
Bad Debts		27,365		56,943	-51.9%	30	03,780	-91.0%		27,365		56,943	-51.9%	303,780	-91.0%
TOTAL REVENUE DEDUCTIONS	\$	470,064	\$	210,717	123.1%	\$ 30	03,195	55.0%	\$	470,064	\$	210,717	123.1%	\$ 303,195	55.0%
		72.9%		58.0%			77.0%			72.9%		58.0%		77.0%	
NET PATIENT REVENUE	\$	175,142	\$	152,430	14.9%	\$ 9	90,714	93.1%	\$	175,142	\$	152,430	14.9% \$	\$ 90,714	93.1%
OTHER REVENUE															
FHC Other Revenue	\$	9,316	\$	26.697	0.0%	\$	15.209	-38.7%	\$	9,316	\$	26.697	0.0% \$	5 15,209	-38.7%
TOTAL OTHER REVENUE	\$	9,316	\$	26,697			15,209	-38.7%	\$	9,316	\$	26,697	-65.1% \$		-38.7%
NET OPERATING REVENUE	\$	184,458	\$	179,127	3.0%	\$ 10	05,924	74.1%	\$	184,458	\$	179,127	3.0% \$	\$ 105,924	74.1%
OPERATING EXPENSE															
Salaries and Wages	\$	81,946	\$	80,728	1.5%	\$ 7	77,921	5.2%	\$	81,946	\$	80,728	1.5% \$	5 77,921	5.2%
Benefits		20,499		20,268	1.1%		19,748	3.8%		20,499		20,268	1.1%	19,748	3.8%
Physician Services		135,933		104,171	30.5%		72,118	88.5%		135,933		104,171	30.5%	72,118	88.5%
Cost of Drugs Sold		6,018		6,489	-7.3%		10,872	-44.6%		6,018		6,489	-7.3%	10,872	-44.6%
Supplies		7,969		4,678	70.4%		5,989	33.1%		7,969		4,678	70.4%	5,989	33.1%
Utilities		3,659		3,021	21.1%		3,502	4.5%		3,659		3,021	21.1%	3,502	4.5%
Repairs and Maintenance		3,971		1,073	270.1%		625	535.4%		3,971		1,073	270.1%	625	535.4%
Leases and Rentals		523		370	41.4%		495	5.6%		523		370	41.4%	495	5.6%
Other Expense		1,100		3,341	-67.1%		3,341	-67.1%		1,100		3,341	-67.1%	3,341	-67.1%
TOTAL OPERATING EXPENSES	\$	261,620	\$	224,139	16.7%	\$ 19	94,612	34.4%	\$	261,620	\$	224,139	16.7% \$	\$ 194,612	34.4%
Depreciation/Amortization	\$	4,081	\$	4,081	0.0%	\$	4,744	-14.0%	\$	4,081	\$	4,081	0.0%	\$ 4,744	-14.0%
TOTAL OPERATING COSTS	\$	265,701	\$	228,220	16.4%	\$ 19	99,355	33.3%	\$	265,701	\$	228,220	16.4%	\$ 199,355	33.3%
NET GAIN (LOSS) FROM OPERATIONS	\$	(81,243)	\$	(49,093)	-65.5%	\$ (9	93,432)	13.0%	\$	(81,243)	\$	(49,093)	-65.5%	6 (93,432)	-13.0%
Operating Margin		-44.04%		-27.41%	60.7%	-8	88.21%	-50.1%		-44.04%		-27.41%	60.7%	-88.21%	-50.1%

		CURRI	ENT MONTH	H		YEAR TO DATE						
Medical Visits	1,619	1,198	35.1%	1,139	42.1%	1,619	1,198	35.1%		0.0%		
Average Revenue per Office Visit	398.52	303.13	31.5%	345.84	15.2%	398.52	303.13	31.5%	345.84	15.2%		
Hospital FTE's (Salaries and Wages)	18.9	19.2	-1.5%	18.9	-0.1%	18.9	19.2	-1.5%	18.9	-0.1%		

ECTOR COUNTY HOSPITAL DISTRICT CENTER FOR PRIMARY CARE WEST UNIVERSITY - OPERATIONS SUMMARY OCTOBER 2020

	CURRENT MONTH						YEAR TO DATE									
	А	CTUAL	E	UDGET	BUDGET VAR	PF	rior yr	PRIOR YR VAR	А	CTUAL	I	BUDGET	BUDGET VAR	PF	rior yr	PRIOR YR VAR
PATIENT REVENUE																
Outpatient Revenue	\$	219	\$	163,336			238,188	-99.9%	\$	219	\$	163,336	-99.9%		238,188	-99.9%
TOTAL PATIENT REVENUE	\$	219	\$	163,336	-99.9%	\$	238,188	-99.9%	\$	219	\$	163,336	-99.9%	\$	238,188	-99.9%
DEDUCTIONS FROM REVENUE																
Contractual Adjustments	\$	(2,749)	\$	59.616	-104.6%	\$	32.546	-108.4%	\$	(2,749)	\$	59.616	-104.6%	\$	32,546	-108.4%
Self Pay Adjustments		(10,967)		18.620	-158.9%		30,902	-135.5%		(10,967)		18,620	-158.9%		30,902	-135.5%
Bad Debts		13,761		27.376	-49.7%		55.983	-75.4%		13.761		27.376	-49.7%		55,983	-75.4%
TOTAL REVENUE DEDUCTIONS	\$	45	\$	105,612	-100.0%	\$	119,430	-100.0%	\$	45	\$	105,612	-100.0%	\$	119,430	-100.0%
	•	20.39%		64.66%		·	50.14%		·	20.39%	•	64.66%			50.14%	
NET PATIENT REVENUE	\$	174	\$	57,724	-99.7%	\$	118,758	-99.9%	\$	174	\$	57,724	-99.7%	\$	118,758	-99.9%
OTHER REVENUE																
FHC Other Revenue	\$	-	\$	-	0.0%	\$	-	0.0%	\$	-	\$	-	0.0%	\$	-	0.0%
TOTAL OTHER REVENUE	\$	-	\$	-	0.0%	\$	-	0.0%	\$ \$	-	\$	-	0.0%	\$	-	0.0%
NET OPERATING REVENUE	\$	174	\$	57,724	-99.7%	\$	118,758	-99.9%	\$	174	\$	57,724	-99.7%	\$	118,758	-99.9%
OPERATING EXPENSE																
Salaries and Wages	\$	-	\$	31,151	-100.0%	\$	35,367	-100.0%	\$	-	\$	31,151	-100.0%	\$	35,367	-100.0%
Benefits		-		7,821	-100.0%		8,963	-100.0%		-		7,821	-100.0%		8,963	-100.0%
Physician Services		-		47,300	-100.0%		51,369	-100.0%		-		47,300	-100.0%		51,369	-100.0%
Cost of Drugs Sold		-		2,679	-100.0%		3,712	-100.0%		-		2,679	-100.0%		3,712	-100.0%
Supplies		-		1,454	-100.0%		1,937	-100.0%		-		1,454	-100.0%		1,937	-100.0%
Utilities		1,993		2,918	-31.7%		3,506	-43.1%		1,993		2,918	-31.7%		3,506	-43.1%
Repairs and Maintenance		-		119	-100.0%		-	100.0%		-		119	-100.0%		-	100.0%
Other Expense		-		-	0.0%		-	0.0%		-		-	0.0%		-	0.0%
TOTAL OPERATING EXPENSES	\$	1,993	\$	93,442	-97.9%	\$	104,853	-98.1%	\$	1,993	\$	93,442	-97.9%	\$	104,853	-98.1%
Depreciation/Amortization	\$	29,325	\$	29,324	0.0%	\$	32,118	-8.7%	\$	29,325	\$	29,324	0.0%	\$	32,118	-8.7%
TOTAL OPERATING COSTS	\$	31,318	\$	122,766	-74.5%	\$	136,972	-77.1%	\$	31,318	\$	122,766	-74.5%	\$	136,972	-77.1%
NET GAIN (LOSS) FROM OPERATIONS	\$	(31,144)	\$	(65,042)	-52.1%	\$	(18,214)	71.0%	\$	(31,144)	\$	(65,042)	-52.1%	\$	(18,214)	71.0%
Operating Margin	-1	7890.56%		-112.68%	15777.7%		-15.34%	116549.9%	-1	7890.56%		-112.68%	15777.7%		-15.34%	116549.9%

Medical Visits	-	463	-100.0%	613	-100.0%	-	463	-100.0%	613	-100.0%
Optometry Visits	-	-	0.0%	-	0.0%	-	-	0.0%	-	0.0%
Total Visits	-	463	-100.0%	613	-100.0%	-	463	-100.0%		0.0%
Average Revenue per Office Visit	-	352.78	-100.0%	388.56	-100.0%	-	352.78	-100.0%	388.56	-100.0%
Hospital FTE's (Salaries and Wages)	-	7.9	-100.0%	9.7	-100.0%	-	7.9	-100.0%	9.7	-100.0%

ECTOR COUNTY HOSPITAL DISTRICT OCTOBER 2020

REVENUE BY PAYOR

		CURRENT M	MONTH			YEAR T	O DATE	
	CURRENT Y	EAR	PRIOR YEAR	२	CURRENT YE	EAR	PRIOR YEA	٨R
	GROSS		GROSS		GROSS		GROSS	
	REVENUE	%	REVENUE	%	REVENUE	%	REVENUE	%
Medicare	\$ 34,726,572	35.7%	\$ 39,816,015	38.4%	\$ 34,726,572	35.7%	\$ 39,816,015	38.4%
Medicaid	11,439,898	11.7%	9,919,634	9.6%	11,439,898	11.7%	9,919,634	9.6%
Commercial	33,985,735	34.9%	29,808,946	28.7%	33,985,735	34.9%	29,808,946	28.7%
Self Pay	12,317,524	12.6%	19,190,898	18.5%	12,317,524	12.6%	19,190,898	18.5%
Other	4,919,955	5.1%	5,024,357	4.8%	4,919,955	5.1%	5,024,357	4.8%
TOTAL	\$ 97,389,684	100.0%	\$ 103,759,849	100.0%	\$ 97,389,684	100.0%	\$ 103,759,849	100.0%

PAYMENTS BY PAYOR

		CURRENT N	IONTH			YEAR TO	DATE	
	CURRENT YE	EAR	PRIOR YEAR		CURRENT YEA	R	PRIOR YEA	R
	PAYMENTS	%	PAYMENTS	%	PAYMENTS	%	PAYMENTS	%
Medicare	\$ 8,965,754	46.8%	\$ 7,681,531	38.4%	\$ 8,965,754	46.8%	\$ 7,681,531	38.4%
Medicaid	1,988,281	10.4%	3,092,804	15.5%	1,988,281	10.4%	3,092,804	15.5%
Commercial	6,223,695	32.4%	7,257,841	36.3%	6,223,695	32.4%	7,257,841	36.3%
Self Pay	926,837	4.8%	1,399,274	7.0%	926,837	4.8%	1,399,274	7.0%
Other	1,075,427	5.6%	561,536	2.8%	1,075,427	5.6%	561,536	2.8%
TOTAL	\$ 19,179,994	100.0%	\$ 19,992,985 1	00.0%	\$ 19,179,994	100.0%	\$ 19,992,985	100.0%

ECTOR COUNTY HOSPITAL DISTRICT FAMILY HEALTH CLINIC CLEMENTS OCTOBER 2020

REVENUE BY PAYOR

		CURRENT	MONTH			YEAR T	O DATE	
	CURRENT Y	′EAR	PRIOR YE	AR	CURRENT Y	/EAR	PRIOR YE	AR
	GROSS		GROSS		GROSS		GROSS	
	REVENUE	%	REVENUE	%	REVENUE	%	REVENUE	%
Medicare	\$ 92,232	14.3%	\$ 58,376	14.8%	\$ 92,232	14.3%	\$ 58,376	14.8%
Medicaid	324,652	50.3%	166,675	42.4%	324,652	50.3%	166,675	42.4%
PHC	-	0.0%	-	0.0%	-	0.0%	-	0.0%
Commercial	101,217	15.7%	77,515	19.7%	101,217	15.7%	77,515	19.7%
Self Pay	100,649	15.6%	91,183	23.1%	100,649	15.6%	91,183	23.1%
Other	26,455	4.1%	160	0.0%	26,455	4.1%	160	0.0%
TOTAL	\$ 645,206	100.0%	\$ 393,909	100.0%	\$ 645,206	100.0%	\$ 393,909	100.0%

PAYMENTS BY PAYOR

•

		CURRENT I	MONTH		YEAR TO DATE							
	CURRENT	YEAR	PRIOR YE	AR	CURRENT Y	/EAR	PRIOR YE	٩R				
	PAYMENTS	PAYMENTS %		%	PAYMENTS	%	PAYMENTS	%				
Medicare	\$ 22,066	15.8%	\$ 38,893	27.7%	\$ 22,066	15.7%	\$ 38,893	27.7%				
Medicaid	66,172	47.4%	52,230	37.1%	66,172	47.5%	52,230	37.1%				
PHC	-	0.0%	-	0.0%	-	0.0%	-	0.0%				
Commercial	25,121	18.0%	21,716	15.5%	25,121	18.0%	21,716	15.5%				
Self Pay	25,862	18.5%	27,091	19.3%	25,862	18.5%	27,091	19.3%				
Other	387	0.3%	612	0.4%	387	0.3%	612	0.4%				
TOTAL	\$ 139,608	100.0%	\$ 140,542	100.0%	\$ 139,608	100.0%	\$ 140,542	100.0%				

ECTOR COUNTY HOSPITAL DISTRICT FAMILY HEALTH CLINIC WEST UNIVERSITY OCTOBER 2020

REVENUE BY PAYOR

		CURRENT I	ионт	н				YEAR T		E	
	CURRENT	YEAR		PRIOR YE	AR	(CURRENT Y	'EAR		PRIOR YE	AR
	GROSS		(GROSS		G	ROSS		Ģ	GROSS	
	REVENUE	%	R	EVENUE	%	RE	VENUE	%	RE	VENUE	%
Medicare	\$ 217	99.3%	\$	52,655	22.1%	\$	217	99.3%	\$	52,655	22.1%
Medicaid	(1,507)	-689.2%	\$	62,415	26.2%		(1,507)	-689.1%		62,415	26.2%
PHC	-	0.0%	\$	-	0.0%		-	0.0%		-	0.0%
Commercial	(2,114)	-966.8%	\$	49,684	20.9%		(2,114)	-966.8%		49,684	20.9%
Self Pay	3,623	1656.7%	\$	73,042	30.7%		3,623	1656.6%		73,042	30.7%
Other	-	0.0%	\$	391	0.2%		-	0.0%		391	0.2%
TOTAL	\$ 219	100.0%	\$	238,188	100.0%	\$	219	100.0%	\$	238,188	100.0%

PAYMENTS BY PAYOR

		CURRENT	MONTH			YEAR T	O DATE	
	CURRE	NT YEAR	PRIOR YE	EAR	CURRENT	YEAR	PRIOR YE	AR
	PAYMENTS	%	PAYMENTS	%	PAYMENTS	%	PAYMENTS	%
Medicare	\$ 1,93	3 34.7%	\$ 15,834	27.3%	\$ 1,933	34.7%	\$ 15,834	27.3%
Medicaid	85	3 15.4%	15,008	25.9%	857	15.4%	15,008	25.9%
PHC	-	0.0%	-	0.0%	-	0.0%	-	0.0%
Commercial	96	7 17.3%	13,740	23.7%	967	17.3%	13,740	23.7%
Self Pay	1,603	3 28.7%	12,969	22.3%	1,603	28.7%	12,969	22.3%
Other	210	3.9%	488	0.8%	216	3.9%	488	0.8%
TOTAL	\$ 5,57	6 100.0%	\$ 58,039	100.0%	\$ 5,576	100.0%	\$ 58,039	100.0%

ECTOR COUNTY HOSPITAL DISTRICT SCHEDULE OF CASH AND INVESTMENTS - HOSPITAL ONLY OCTOBER 2020

Cash and Cash Equivalents	Frost	Hilltop	<u>Total</u>
Operating	\$ 39,792,704	\$-	\$ 39,792,704
Mission Fitness	166,332	-	166,332
Petty Cash	9,306	-	9,306
Dispro	-	1,182	1,182
General Liability	-	913,009	913,009
Professional Liability	-	507,404	507,404
Funded Worker's Compensation	-	608,527	608,527
Funded Depreciation	-	75,742	75,742
Designated Funds		507,209	 507,209
Total Cash and Cash Equivalents	\$ 39,981,920	\$ 2,613,073	\$ 42,594,993

Investments		<u>Other</u>	<u>Hilli</u>	top		<u>Total</u>
Dispro	\$	-	\$ 5,40	01,000	\$	5,401,000
Funded Depreciation		-	34,72	29,000		34,729,000
Funded Worker's Compensation		-		34,000		1,684,000
General Liability		-	2,10	03,000		2,103,000
Professional Liability		-	2,60	07,000		2,607,000
Designated Funds		23,622	2,74	47,000		2,770,622
Allowance for Change in Market Values				(9,694)		(9,694)
Total Investments	\$	23,622	\$ 49,26	61,306	\$	49,284,928
Total Unrestricted Cash and Investments					\$	91,879,921
Restricted Assets	<u>R</u>	eserves	Prosp	<u>perity</u>		<u>Total</u>
Assets Held By Trustee - Bond Reserves	\$	4,896	\$	-	\$	4,896
Assets Held In Endowment-Board Designated		-		75,569	•	6,375,569
Advanced Medicare Payment	31	1,970,959		-		31,970,959
Restricted TPC, LLC-Equity Stake		593,971		-		593,971
Restricted MCH West Texas Services-Equity Stake	2	2,278,635		-		2,278,635
Total Restricted Assets	\$ 34	1,848,461	\$ 6.37	75,569	\$	41,224,030

Total Cash & Investments

\$ 133,103,950

ECTOR COUNTY HOSPITAL DISTRICT STATEMENT OF CASH FLOW OCTOBER 2020

		Hospital	Procare	Blended
Cash Flows from Operating Activities and Nonoperating Revenue: Excess of Revenue over Expenses	\$	71,168	- \$	71,168
Noncash Expenses:	Ψ	71,100	Ψ	71,100
Depreciation and Amortization		1,564,232	2,156	1,566,388
Unrealized Gain/Loss on Investments		1,246	_,	1,246
Accretion (Bonds)		(34,913)	-	(34,913)
Changes in Assets and Liabilities		(0.,0.0)		(01,010)
Patient Receivables, Net		893,033	(597,184)	295,849
Taxes Receivable/Deferred		(2,010,721)	(16,950)	(2,027,671)
Inventories, Prepaids and Other		(2,549,838)	(882)	(2,550,720)
Accounts Payable		1,578,967	732,955	2,311,922
Accrued Expenses		(1,892,501)	(120,095)	(2,012,596)
Due to Third Party Payors		207,515	-	207,515
Accrued Post Retirement Benefit Costs		600,000	-	600,000
Net Cash Provided by Operating Activities	\$	(1,571,813)	0 \$	(1,571,812)
Cash Elaws from Investing Activities:				
Cash Flows from Investing Activities: Investments	\$	(11,496,090)	- \$	(11,496,090)
Acquisition of Property and Equipment		(187,501)	-	(187,501)
Net Cash used by Investing Activities	\$	(11,683,591)	- \$	(11,683,591)
Cash Flows from Financing Activities:				
Current Portion Debt	\$	1,074	- \$	1,074
Intercompany Activities	\$	-	(0)	(0)
Net Repayment of Long-term Debt/Bond Issuance		(59,306)	-	(59,306)
Net Cash used by Financing Activities		(58,232)	(0)	(58,233)
Net Increase (Decrease) in Cash		(13,313,636)	0	(13,313,636)
Beginning Cash & Cash Equivalents @ 9/30/2020		97,132,659	4,650	97,137,309
Ending Cash & Cash Equivalents @ 10/31/2020	\$	83,819,023 \$	4,650 \$	83,823,673
Balance Sheet Cash and Cash Equivalents	\$	42,594,993	4,650 \$	42,599,643
Restricted Assets	φ	41,224,030	4,000 \$ -	41,224,030
Ending Cash & Cash Equivalents @ 10/31/2020	\$	83,819,023	4,650 \$	83,823,673

ECTOR COUNTY HOSPITAL DISTRICT TAX COLLECTIONS FISCAL 2021

	-	ACTUAL LECTIONS	_	UDGETED LLECTIONS		/ARIANCE		RIOR YEAR	\	ARIANCE
<u>AD VALOREM</u> OCTOBER TOTAL	\$ \$	251,630 251,630	\$ \$	2,025,971 2,025,971	\$ \$	<u>(1,774,341)</u> (1,774,341)	\$ \$	357,473 357,473	\$ \$	(105,843) (105,843)
SALES OCTOBER SUB TOTAL ACCRUAL TOTAL	\$	2,929,377 2,929,377 281,272 3,210,649	\$	3,282,683 3,282,683 - 3,282,683	\$	(353,306) (353,306) 281,272 (72,034)	\$	4,204,814 4,204,814 - 4,204,814	\$	(1,275,437) (1,275,437) 281,272 (994,165)
TAX REVENUE	\$	3,462,278	\$	5,308,654	\$	(1,846,376)	\$	4,562,287	\$	(1,100,008)

ECTOR COUNTY HOSPITAL DISTRICT MEDICAID SUPPLEMENTAL PAYMENTS FISCAL YEAR 2021

CASH ACTIVITY		TAX (IGT) SSESSED	GC	VERNMENT PAYOUT	BURDEN ALLEVIATION	NE	
DSH							
1st Qtr	\$	(637,747)	\$	1,993,583		\$	1,355,836
2nd Qtr	Ŧ	-	Ŧ	-		Ŧ	-
3rd Qtr		-		-			-
4th Qtr		-		-			-
DSH TOTAL	\$	(637,747)	\$	1,993,583		\$	1,355,836
UC							
1st Qtr	\$	(16,099)	\$	38,376			22,278
2nd Qtr		-		-			-
3rd Qtr		-		-			-
4th Qtr		-		-			-
UC TOTAL	\$	(16,099)	\$	38,376		\$	22,278
DSRIP							
1st Qtr	\$	_	\$	_		\$	-
2nd Qtr	Ŷ	-	¥	-		Ψ	-
3rd Qtr		-		-			-
4th Qtr		-		-			-
DSRIP UPL TOTAL	\$	-	\$	-		\$	-
UHRIP							
1st Qtr	\$	_	\$	_		\$	_
2nd Qtr	Ψ	_	Ψ			Ψ	
3rd Qtr		_		_			
4th Qtr		_					
UHRIP TOTAL	\$	-	\$			\$	-
GME			•			<u>^</u>	
1st Qtr	\$	-	\$	-		\$	-
2nd Qtr		-		-			-
3rd		-		-			-
4th Qtr		-		-			-
GME TOTAL	\$	-	\$	-		\$	-
MCH Cash Activity	\$	(653,846)	\$	2,031,959		\$	1,378,113
	•		•		•	•	
ProCare Cash Activity	\$	-	\$	-	\$-	\$	-
Blended Cash Activity	\$	(653,846)	\$	2,031,959	\$ -	\$	1,378,113
INCOME STATEMENT ACTIVITY:						E	
FY 2021 Accrued / (Deferred) Adju	istments:						
DSH Accrual						\$	1,024,414
Uncompensated Care Accrual							1,079,409
URIP							(178,654)
GME							29,167
Regional UPL Benefit							-
Medicaid Supplemental Pa	ayments						1,954,337
DSRIP Accrual							547,173

Total Adjustments

\$ 2,501,510

ECTOR COUNTY HOSPITAL DISTRICT CONSTRUCTION IN PROGRESS - HOSPITAL ONLY AS OF OCTOBER 31, 2020

RE NUMBEI	RITEM	 BALANCE AS OF /30/2020	CTOBER	OCTOBER ADDITIONS	TOBER	 BALANCE AS OF //31/2020	ADD: MOUNTS PITALIZED		ROJECT	DGETED MOUNT	ER/(OVER) /D/BUDGET
RE20-1352	<u>RENOVATIONS</u> REGIONAL LAB	11,853	-	-	-	11.853	-		11.853	150,000	138,148
RE20-1359	ROCK HOUSE RENOVATIONS	65,052	18,869	-	-	83,921	-		83,921	48,500	(35,421)
	SUB-TOTAL	\$ 76,905	\$ 18,869	\$ -	\$ -	\$ 95,774	\$ -	\$	95,774	\$ 198,500	\$ 102,726
	MINOR BUILDING IMPROVEMENT										
RE20-1349	REFRACTORY BOILER UPGRADE	-	-	-	-	-	-		-	30,000	30,000
RE20-1357	ER TUBE STATION	55,775	6,808	-	-	62,582	-		62,582	48,000	(14,582)
RE20-1358	ER TRIAGE	26,960	55,297	-	-	82,257	-		82,257	75,000	(7,257)
RE20-1360	RENTAL PROPERTY REPAIRS - CASA ORTIZ	34,377	1,573	-	-	35,949	-		35,949	25,000	(10,949)
RE20-1361	CT SCAN	38,073	2,215	-	-	40,288	-		40,288	175,000	134,712
RE21-1362	PHARMACY PYXIS	-	3,046	-	-	3,046	-		3,046	15,000	11,954
RE21-1363	STERILE STORAGE	-	-	-	-	-	-		-	25,000	25,000
RE21-1364	TENNENT IMPROVEMENT - 750 W 5TH	-	-	-	-	-	-		-	25,000	25,000
	SUB-TOTAL	\$ 155,184	\$ 68,939	\$ -	\$ -	\$ 224,123	\$ -	\$	224,123	\$ 418,000	\$ 193,878
	EQUIPMENT & SOFTWARE PROJECTS - CIP INCOMPLETE										
	VARIOUS CAPITAL EXPENDITURE PROJECTS	\$ 3,890,354	\$ 560,326	\$ (3,120,956)	\$ -	\$ 1,329,724	\$ -	\$	1,329,724	\$ 3,000,000	\$ 1,670,276
	SUB-TOTAL	\$ 3,890,354	\$ 560,326	\$ (3,120,956)	\$ -	\$ 1,329,724	\$ -	_	1,329,724	\$ 3,000,000	\$ 1,670,276
	TOTAL CONSTRUCTION IN PROGRESS	\$ 4,122,443	\$ 648,133	\$ (3,120,956)	\$ -	\$ 1,649,620	\$ -	\$	1,649,620	\$ 3,616,500	\$ 1,966,880

ECTOR COUNTY HOSPITAL DISTRICT CAPITAL PROJECT & EQUIPMENT EXPENDITURES OCTOBER 2020

ITEM	CLASS	BOOKED	AMOUNT
TRANSFERRED FROM CONSTRUCTION IN PROGRESS/RENOVATION PROJECTS			
TOTAL PROJECT TRANSFERS		\$	-
EQUIPMENT PURCHASES			
None		\$	-
TOTAL EQUIPMENT PURCHASES		\$	-
TOTAL TRANSFERS FROM CIP/EQUIPMENT PURCHASES		\$	-

ECTOR COUNTY HOSPITAL DISTRICT FISCAL 2021 CAPITAL EQUIPMENT CONTINGENCY FUND OCTOBER 2020

MONTH/ YEAR	DESCRIPTION	DEPT NUMBER		P AMC	.O DUNT	CTUAL MOUNT	0/(FROM) ITINGENCY
Oct-20 Oct-20 Oct-20	Available funds from budget UltraLite 500 Series CombiM 84 Giraffe Warmer	6850 7410 6550	\$ 600,000 - - -	\$	- - -	\$ - 8,827 18,294 15,562	\$ 600,000 (8,827) (18,294) (15,562)
			\$ 600,000	\$	-	\$ 42,683	\$ 557,317

ECTOR COUNTY HOSPITAL DISTRICT SUPPLEMENTAL SCHEDULE OF ACCOUNTS RECEIVABLE - OTHER OCTOBER 2020

				PRIOR Y	EAR		CURRENT
	(URRENT YEAR	-	IOSPITAL AUDITED		O CARE JDITED	 YEAR CHANGE
AR DISPRO/UPL	\$	(331,422)	\$	-	\$	-	\$ (331,422)
AR UNCOMPENSATED CARE		1,057,131		-		-	1,057,131
AR DSRIP		1,217,204		670,031		-	547,173
AR NURSING HOME UPL		-		-		-	-
AR UHRIP		387,087		565,741		-	(178,654)
AR GME		29,167		-		-	29,167
AR BAB REVENUE		-		-		-	-
AR PHYSICIAN GUARANTEES		434,995		358,963		-	76,031
AR ACCRUED INTEREST		13,373		99,784		-	(86,411)
AR OTHER:		1,963,137		2,451,028		23,598	(511,489)
Procare On-Call Fees		-		-		-	-
Procare A/R - FHC		-		-		-	-
Other Misc A/R		1,963,137		2,451,028		23,598	(511,489)
AR DUE FROM THIRD PARTY PAYOR		2,579,113		2,371,598		-	 207,515
TOTAL ACCOUNTS RECEIVABLE - OTHER	\$	8,975,831	\$	7,316,982	\$	23,598	\$ 1,635,251

ECTOR COUNTY HOSPITAL DISTRICT SUPPLEMENTAL SCHEDULE OF HOSPITAL TEMPORARY LABOR FTE'S OCTOBER 2020

		CUI	RRENT MON	ітн		YEAR TO DATE						
TEMPORARY LABOR DEPARTMENT	ACTUAL	BUDGET	BUDGET VAR	PRIOR YR		ACTUAL	BUDGET	BUDGET VAR	PRIOR YR			
9 CENTRAL	2.5	2.8	-11.5%	4.9	-49.4%	2.5	2.8	-11.5%	4.9	-49.4%		
5 CENTRAL	2.5	2.0	23.2%	1.7	50.1%	2.5	2.0	23.2%	1.7	50.1%		
CARDIOPULMONARY	5.2	2.4	115.7%	2.8	83.7%	5.2	2.4	115.7%	2.8	83.7%		
INTENSIVE CARE UNIT 4 (CCU)	12.3	6.2	100.5%	1.7	631.7%	12.3	6.2	100.5%	1.7	631.7%		
6 Central	1.0	1.5	-34.2%	2.3	-55.6%	1.0	1.5	-34.2%	2.3	-55.6%		
OPERATING ROOM	2.5	2.0	22.7%	3.0	-15.6%	2.5	2.0	22.7%	3.0	-15.6%		
8 CENTRAL	2.6	1.6	59.4%	0.9	188.1%	2.6	1.6	59.4%	0.9	188.1%		
PM&R - PHYSICAL	-	-	0.0%	3.2	-100.0%	-	-	0.0%	3.2	-100.0%		
7 CENTRAL	1.1	4.9	-77.7%	2.7	-59.3%	1.1	4.9	-77.7%	2.7	-59.3%		
	2.5	0.9	170.9%	0.9	177.8%	2.5	0.9	170.9%	0.9	177.8%		
STERILE PROCESSING	-	-	0.0%	3.3	-100.0%	-	-	0.0%	3.3	-100.0%		
IMAGING - DIAGNOSTICS	-	1.0	-100.0%	2.2 1.5	-100.0%	-	1.0	-100.0%	2.2 1.5	-100.0%		
4 CENTRAL 4 EAST	1.6	1.0	53.4% 0.0%	1.5	3.9%	1.6	1.0	53.4%	1.5 1.0	3.9%		
NURSING ORIENTATION	- 0.1	-	0.0%	-	-100.0% 0.0%	- 0.1	-	0.0% 0.0%	-	-100.0% 0.0%		
LABORATORY - CHEMISTRY	-	- 3.4	-100.0%	-	0.0%	-	- 3.4	-100.0%	-	0.0%		
MEDICAL STAFF	-		0.0%	1.1	-100.0%	-		0.0%	- 1.1	-100.0%		
IMAGING - ULTRASOUND	-	0.6	-100.0%	-	0.0%	-	0.6	-100.0%	-	0.0%		
6 West	0.4	0.3	12.8%	0.4	-15.1%	0.4	0.3	12.8%	0.4	-15.1%		
INTENSIVE CARE UNIT 2	1.1	6.2	-81.7%	0.1	1481.1%	1.1	6.2	-81.7%	0.1	1481.1%		
DISASTER AND EMERGENCY OPERATIONS	0.3	-	0.0%	-	0.0%	0.3	-	0.0%	-	0.0%		
RAD MCH CVI	-	-	0.0%	-	0.0%	-	-	0.0%	-	0.0%		
IMAGING - NUCLEAR MEDICINE	-	-	0.0%	-	0.0%	-	-	0.0%	-	0.0%		
EMERGENCY DEPARTMENT	-	-	0.0%	0.5	-100.0%	-	-	0.0%	0.5	-100.0%		
INPATIENT REHAB	-	-	0.0%	0.1	-100.0%	-	-	0.0%	0.1	-100.0%		
PM&R - SPEECH	-	-	0.0%	0.3	-100.0%	-	-	0.0%	0.3	-100.0%		
IMAGING - CT SCAN	-	-	0.0%	-	0.0%	-	-	0.0%	-	0.0%		
2 Central	-	-	0.0%	-	0.0%	-	-	0.0%	-	0.0%		
5 WEST	0.1	-	0.0%	-	0.0%	0.1	-	0.0%	-	0.0%		
INPATIENT REHAB - THERAPY	-	-	0.0%	-	0.0%	-	-	0.0%	-	0.0%		
NEO-NATAL INTENSIVE CARE	-	-	0.0%	-	0.0%	-	-	0.0%	-	0.0%		
	-	-	0.0%	-	0.0%	-	-	0.0%	-	0.0%		
TRAUMA SERVICE FOOD SERVICE	-	-	0.0% 0.0%	-	0.0% 0.0%	-	-	0.0% 0.0%	-	0.0% 0.0%		
FINANCIAL ACCOUNTING	-	-	0.0%	-	0.0%		-	0.0%	-	0.0%		
PATIENT ACCOUNTING	_	-	0.0%	-	0.0%	_	-	0.0%	-	0.0%		
IT OPERATIONS	-	-	0.0%	-	0.0%	-	-	0.0%	-	0.0%		
ADMINISTRATION	-	-	0.0%	-	0.0%	-	-	0.0%	-	0.0%		
SUBTOTAL	35.8	37.0	-3.1%	34.4	4.1%	35.8	37.0	-3.1%	34.4	4.1%		
TRANSITION LABOR												
LABORATORY - CHEMISTRY	3.6	-	0.0%	3.4	6.5%	3.6	-	0.0%	3.4	6.5%		
INTENSIVE CARE UNIT 4 (CCU)	-	-	0.0%	2.7	-100.0%	-	-	0.0%	2.7	-100.0%		
INPATIENT REHAB - THERAPY	-	-	0.0%	1.0	-100.0%	-	-	0.0%	1.0	-100.0%		
7 CENTRAL	-	-	0.0%	2.3	-100.0%	-	-	0.0%	2.3	-100.0%		
NEO-NATAL INTENSIVE CARE	-	-	0.0%	1.4	-100.0%	-	-	0.0%	1.4	-100.0%		
PM&R - OCCUPATIONAL INTENSIVE CARE UNIT 2	-	-	0.0%	1.1 0.8	-100.0%	-	-	0.0%	1.1 0.8	-100.0%		
4 EAST	-	-	0.0% 0.0%	0.8	-100.0% -100.0%	-	-	0.0% 0.0%	0.8	-100.0% -100.0%		
9 CENTRAL	-	-	0.0%	-	0.0%		-	0.0%	-	0.0%		
8 CENTRAL	-	-	0.0%	-	0.0%	-	-	0.0%	-	0.0%		
INPATIENT REHAB	-	-	0.0%	-	0.0%	-	_	0.0%	-	0.0%		
OPERATING ROOM	-	-	0.0%	-	0.0%	-	-	0.0%	-	0.0%		
6 Central	-	-	0.0%	-	0.0%	-	-	0.0%	-	0.0%		
LABORATORY - HEMATOLOGY	-	-	0.0%	-	0.0%	-	-	0.0%	-	0.0%		
EMERGENCY DEPARTMENT	-	-	0.0%	-	0.0%	-	-	0.0%	-	0.0%		
5 CENTRAL	-	-	0.0%	-	0.0%	-	-	0.0%	-	0.0%		
4 CENTRAL	-	-	0.0%	-	0.0%	-	-	0.0%	-	0.0%		
LABOR AND DELIVERY	-	-	0.0%	-	0.0%	-	-	0.0%	-	0.0%		
6 West	-	-	0.0%	-	0.0%	-	-	0.0%	-	0.0%		
5 WEST	-	-	0.0%	-	0.0%	-	-	0.0%	-	0.0%		
SUBTOTAL	3.6	-	0.0%	13.2	-72.7%	3.6	-	0.0%		-72.7%		
GRAND TOTAL	39.4	37.0	6.7%	47.6	-17.2%	39.4	37.0	6.7%	47.6	-17.2%		

ECTOR COUNTY HOSPITAL DISTRICT SUPPLEMENTAL SCHEDULE OF TEMPORARY LABOR, TRANSITION LABOR & PURCHASED SERVICES - HOSPITAL ONLY OCTOBER 2020

	CURRENT MONTH						YEAR TO DATE						
	ACTUAL	BUDGET	\$ VAR	% VAR	PRIOR YR	% VAR		ACTUAL	BUDGET	\$ VAR	% VAR	PRIOR YR	% VAR
ICU4 TEMPORARY LABOR		\$ 84,864 \$	191,233	225.3% \$	30,364	809.3%	\$	276,097 \$	84,864	\$ 191,233	225.3% \$	30,364	809.3%
RT TEMPORARY LABOR	78,996	13,634	65,362	479.4%	79,238	-0.3%		78,996	13,634	65,362	479.4%	79,238	-0.3%
ALL OTHER	289,035	373,068	(84,033)	-22.5%	495,479	-41.7%		289,035	373,068	(84,033)	-22.5%	495,479	-41.7%
TOTAL TEMPORARY LABOR	\$ 644,128	\$ 471,566 \$	172,562	36.6% \$	605,081	6.5%	\$	644,128 \$	471,566	172,562	36.6% \$	605,081	6.5%
ALL OTHER	\$ 40.179	- \$	40.179	100.0% \$	134.361	-70.1%	\$	40.179	- :	\$ 40.179	100.0% \$	134.361	-70.1%
TOTAL TRANSITION LABOR	\$ 40,179	\$ - \$	40,179	0% \$	134,361	-70.1%	\$	40,179 \$	- 9	40,179	0.0% \$	134,361	-70.1%
GRAND TOTAL TEMPORARY LABOR	\$ 684,307	\$ 471,566 \$	212,741	45.1% \$	739,443	-7.5%	\$	684,307 \$	471,566	\$ 212,741	45.1% \$	739,443	-7.5%
PA OTHER PURCH SVCS	\$ 886,305	\$ 761,536 \$	124,769	16.4% \$	84,443	949.6%	\$	886,305 \$	761,536	\$ 124,769	16.4% \$	84,443	949.6%
ADM CONSULTANT FEES	142,489	18,500	123,989	670.2%	52,001	174.0%		142,489	18,500	123,989	670.2%	52,001	174.0%
COMM REL ADVERTISMENT PURCH SVCS	98,257	27,542	70,715	256.8%	8,934	999.9%		98,257	27,542	70,715	256.8%	8,934	999.9%
MISSION FITNESS CONTRACT PURCH SVC	65,275	5,693	59,582	1046.6%	66,396	-1.7%		65,275	5,693	59,582	1046.6%	66,396	-1.7%
HR RECRUITING FEES	78,177	25,750	52,427	203.6%	53,014	47.5%		78,177	25,750	52,427	203.6%	53,014	47.5%
FHC OTHER PURCH SVCS	135,058	103,021	32,037	31.1%	70,980	90.3%		135,058	103,021	32,037	31.1%	70,980	90.3%
PT ACCTS COLLECTION FEES	91,110	56,946	34,164	60.0%	553,189	-83.5%		91,110	56,946	34,164	60.0%	553,189	-83.5%
COMM REL MEDIA PLACEMENT	65,807	34,808	30,999	89.1%	(3,433)	-2017.2%		65,807	34,808	30,999	89.1%	(3,433)	-2017.2%
REF LAB ARUP PURCH SVCS	63,447	49,894	13,553	27.2%	76,261	-16.8%		63,447	49,894	13,553	27.2%	76,261	-16.8%
ADMIN LEGAL FEES	59,080	47,709	11,371	23.8%	109,364	-46.0%		59,080	47,709	11,371	23.8%	109,364	-46.0%
HK SVC CONTRACT PURCH SVC	78,198	98,911	(20,713)	-20.9%	95,372	-18.0%		78,198	98,911	(20,713)	-20.9%	95,372	-18.0%
ECHDA OTHER PURCH SVCS	129,635	179,821	(50,186)	-27.9%	224,370	-42.2%		129,635	179,821	(50,186)	-27.9%	224,370	-42.2%
ALL OTHERS	2,211,677	2,335,899	(124,222)	-5.3%	3,143,040.48	-29.6%		2,211,677	2,335,899	(124,222)	-5.3%	3,143,040	-29.6%
TOTAL PURCHASED SERVICES	\$ 4,104,516	\$ 3,746,030 \$	358,486	9.6% \$	4,533,931	-9.5%	\$	4,104,516 \$	3,746,030	\$ 358,486	9.6% \$	4,533,931	-9.5%



Financial Presentation For the Month Ended October 31, 2020

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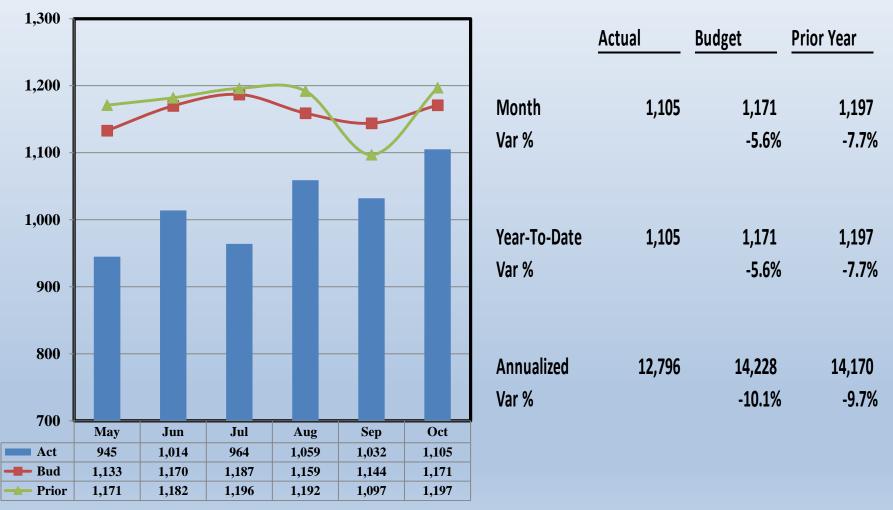
Volume

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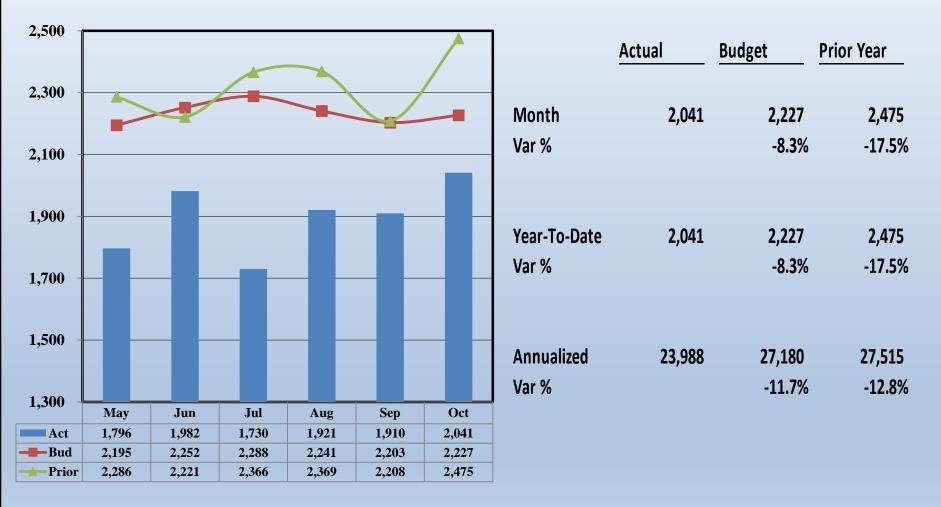
Total – Adults and NICU





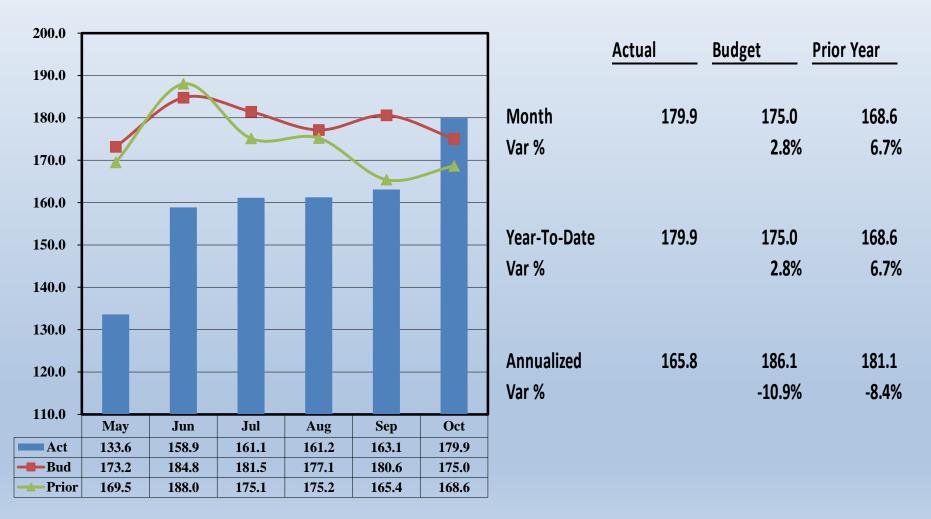
Adjusted Admissions

Including Acute & Rehab Unit



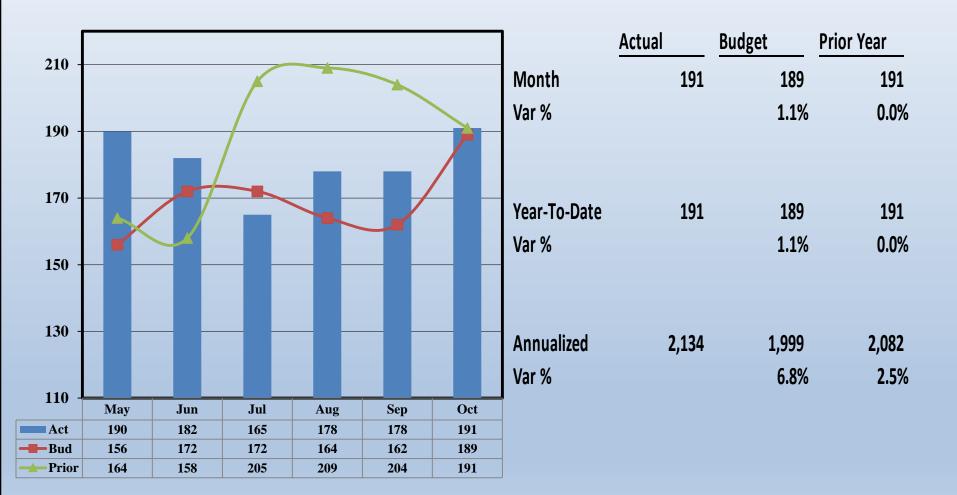


Average Daily Census



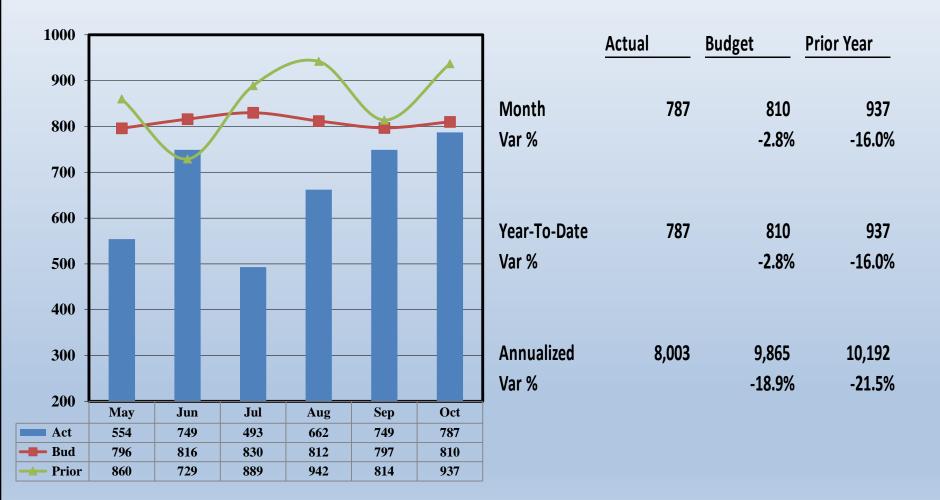






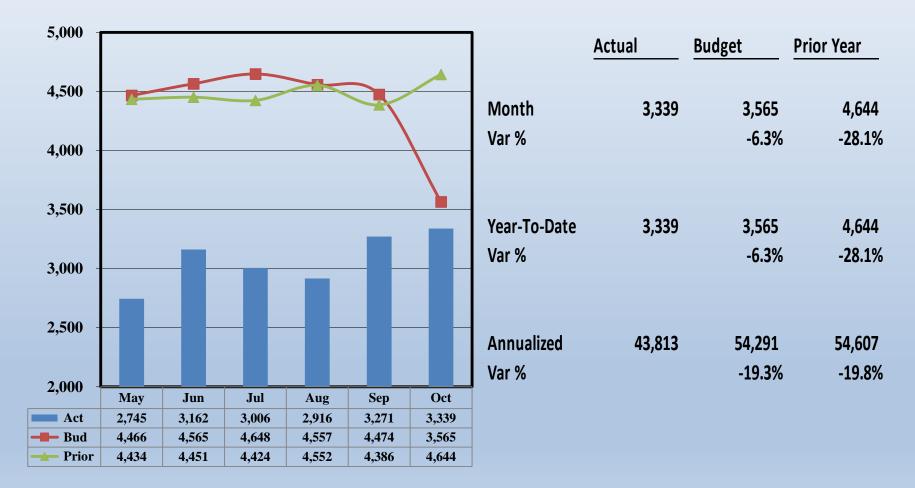


Total Surgical Cases



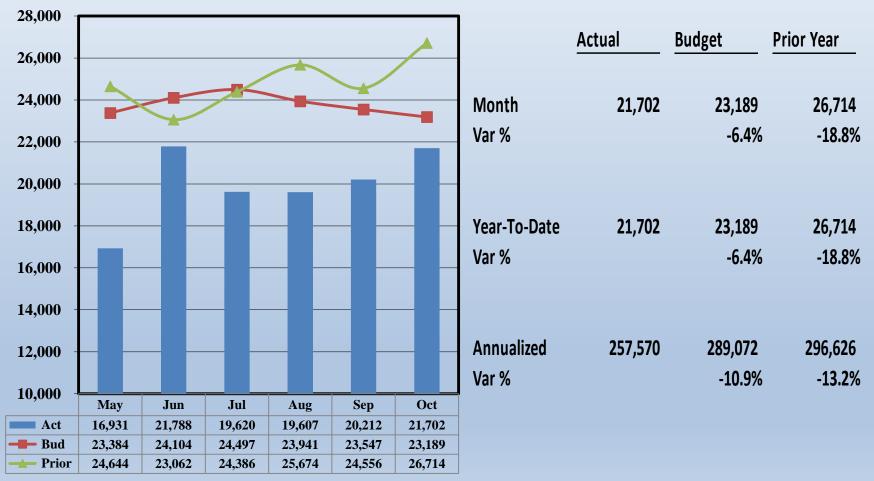






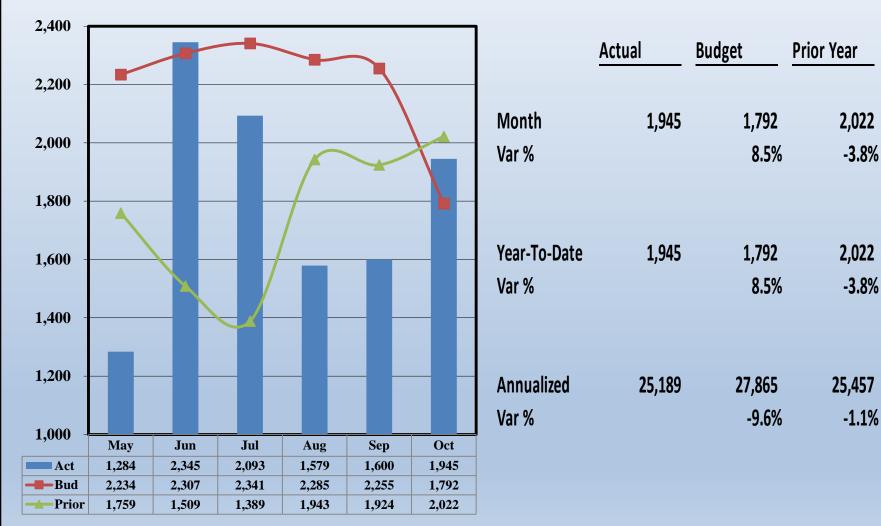


<u>Total Outpatient</u> Occasions of Service



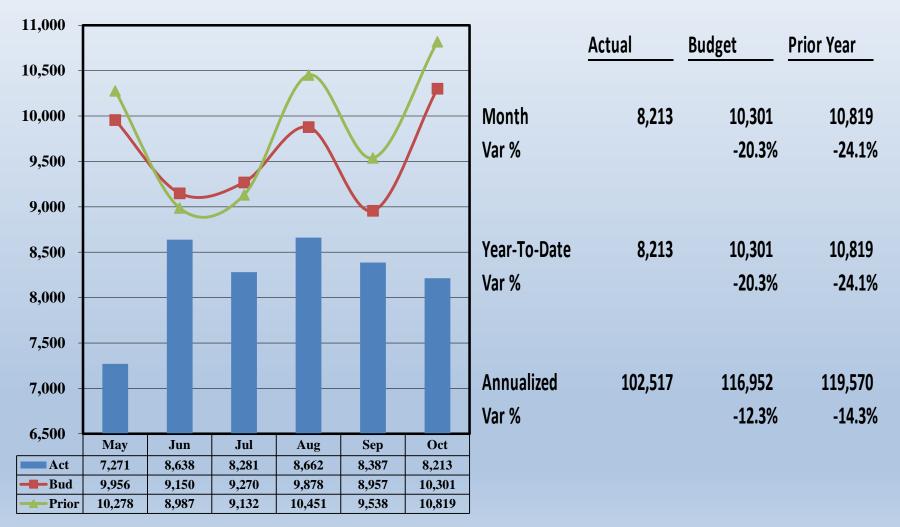












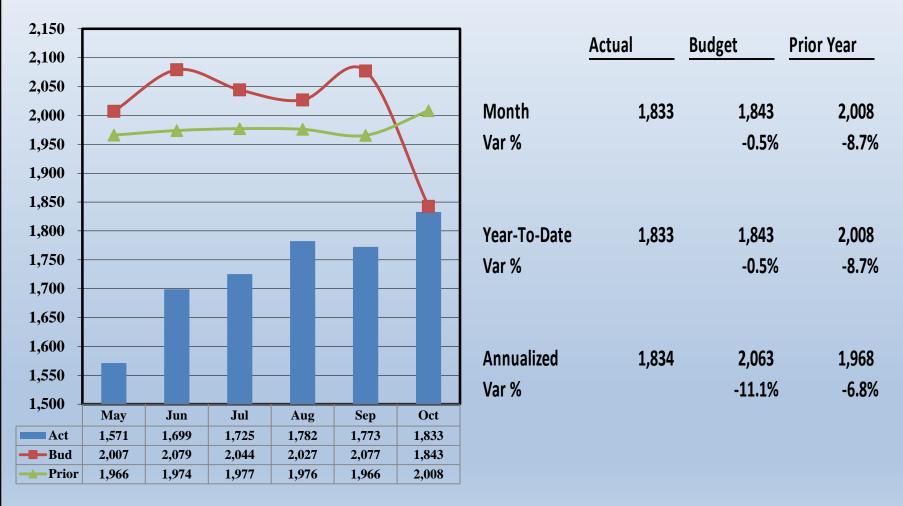


Staffing



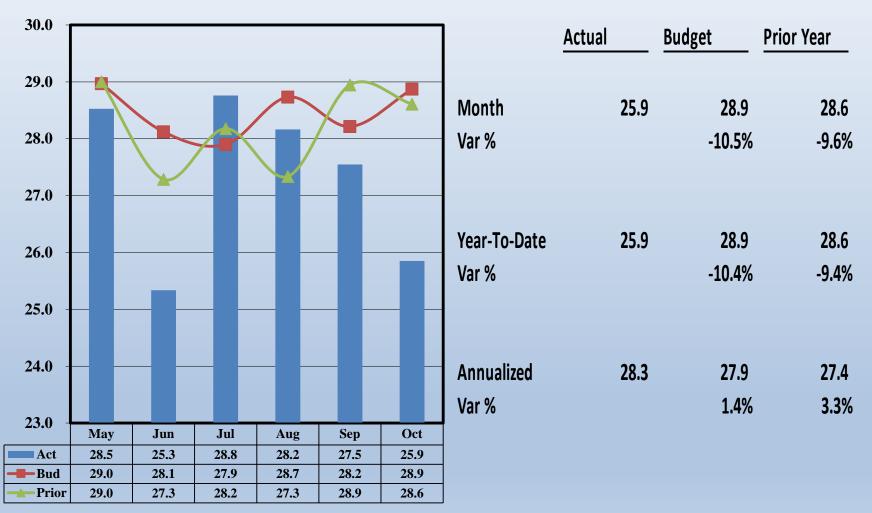


Including Contract Labor and Management Services





Paid Hours per Adjusted Patient Day (Ector County Hospital District)

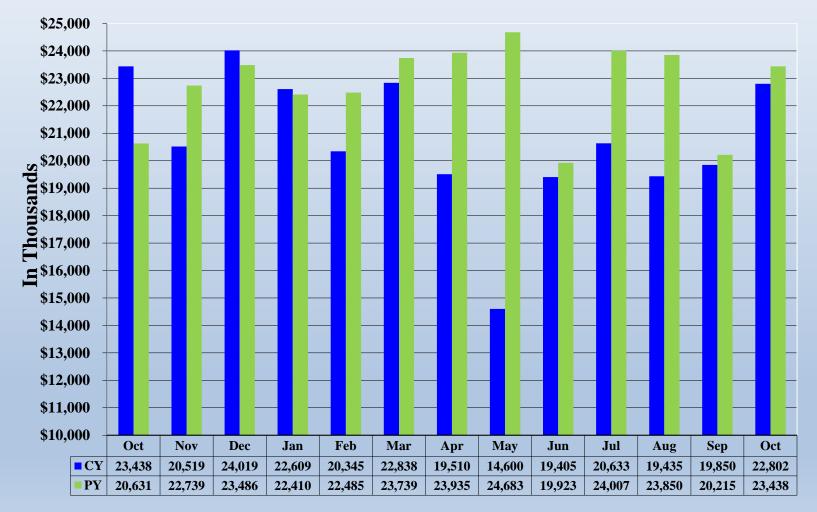








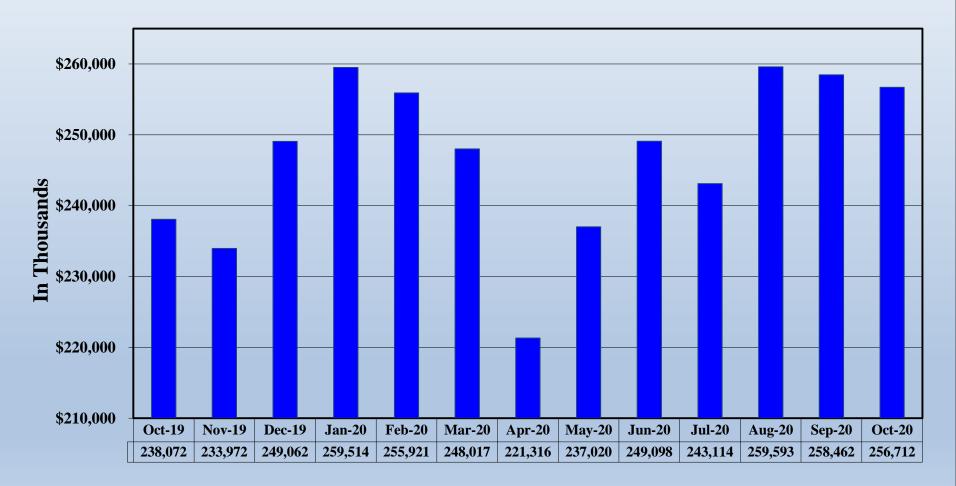
13 Month Trending





Total Accounts Receivable – Gross

Thirteen Month Trending

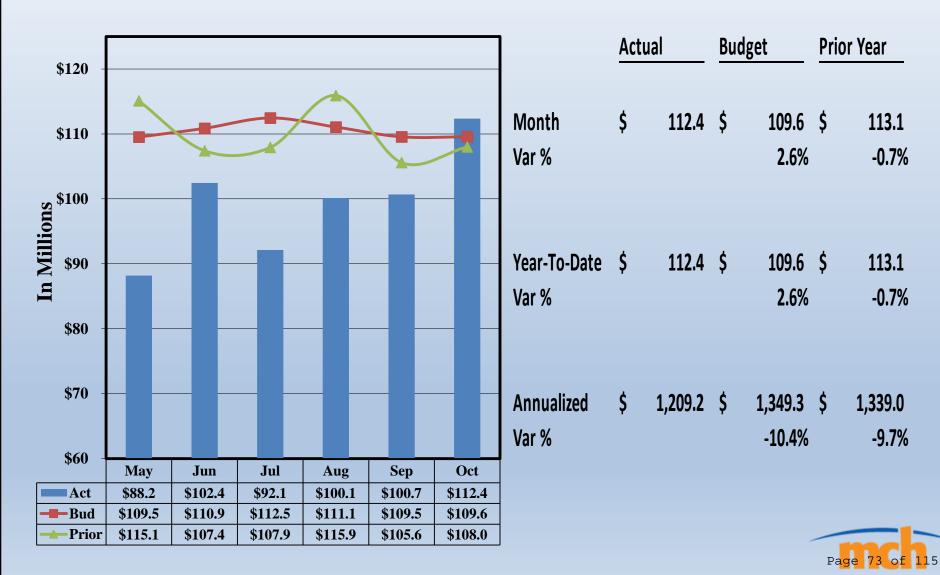




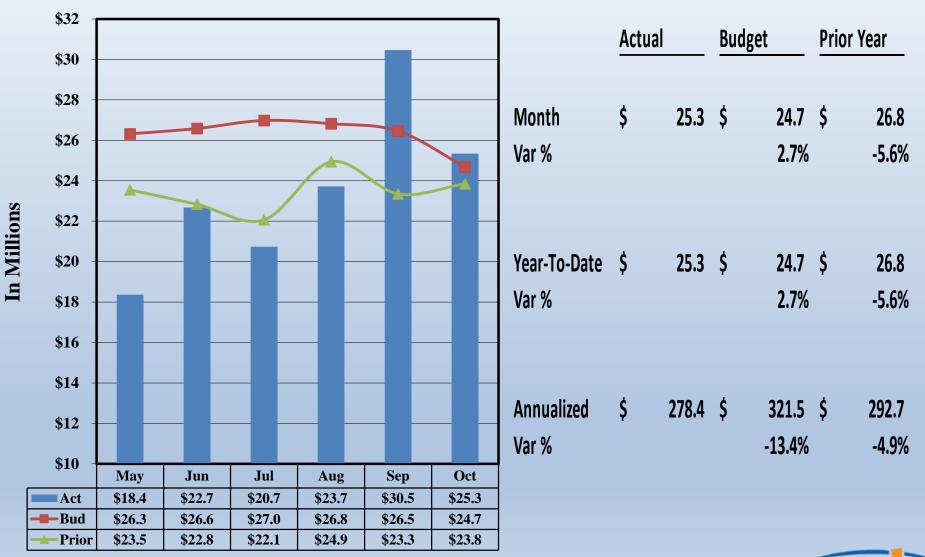
Revenues & Revenues &



Total Patient Revenues



Total Net Patient Revenues

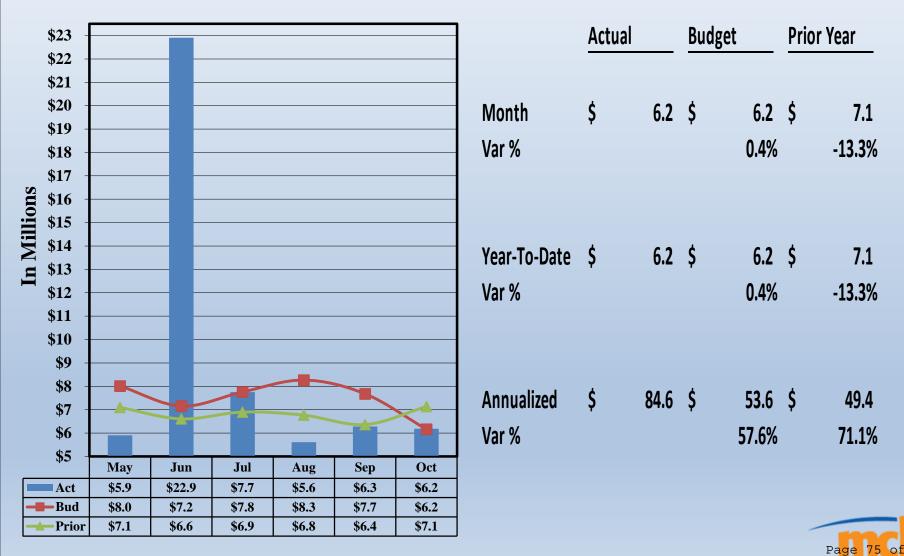


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Other Revenue

(Ector County Hospital District)

Including Tax Receipts, Interest & Other Operating Income

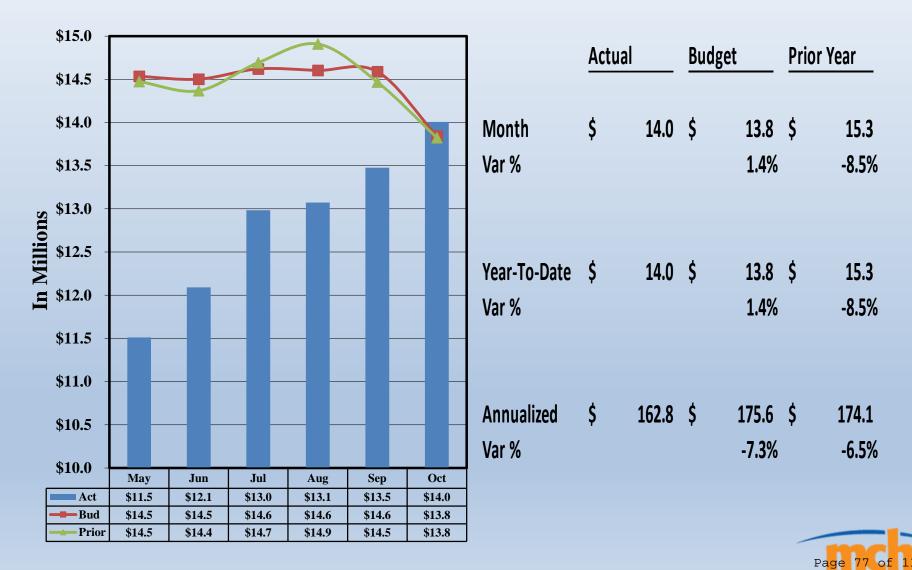


Operating Expenses

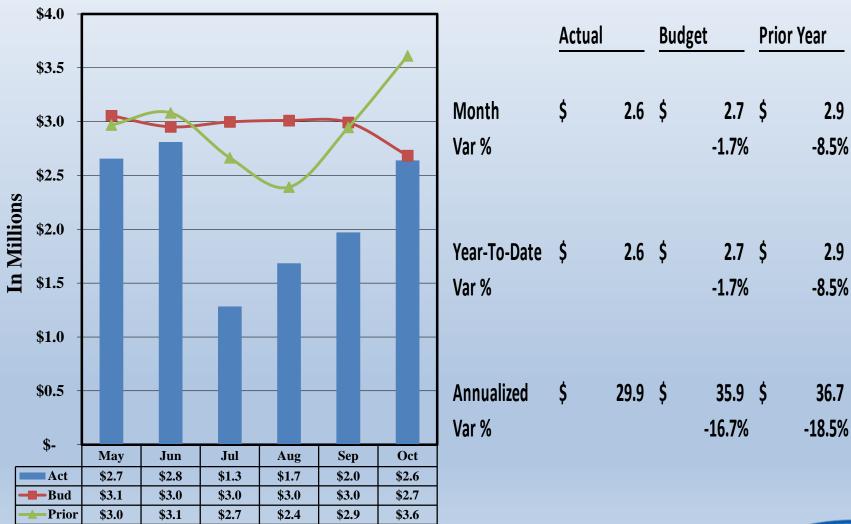
The second

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Salaries, Wages & Contract Labor



Employee Benefit Expense





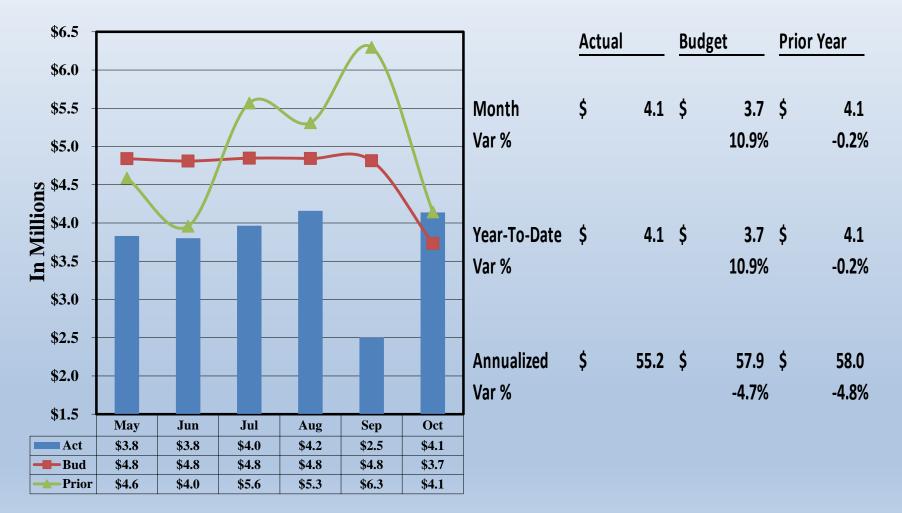






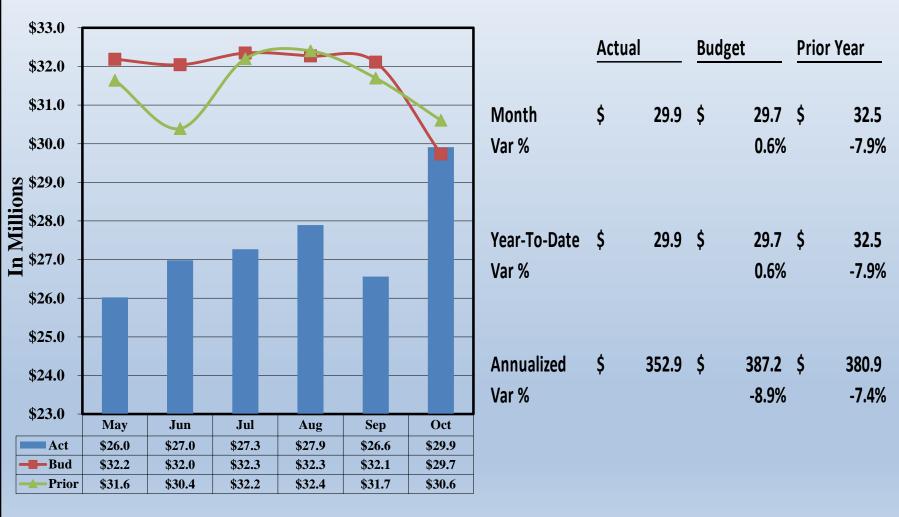
Purchased Services

(Ector County Hospital District)





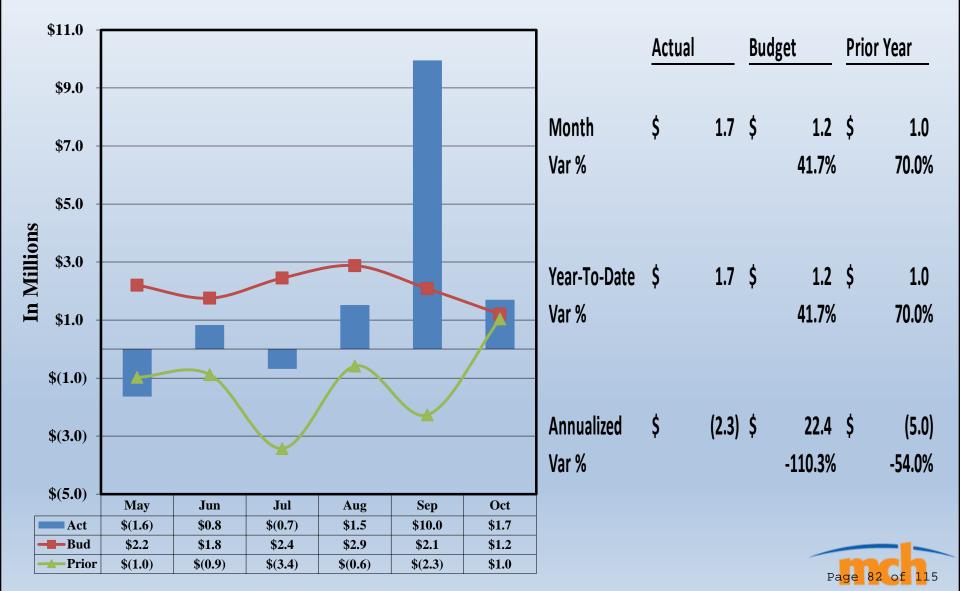
Total Operating Expense







Ector County Hospital District Operations

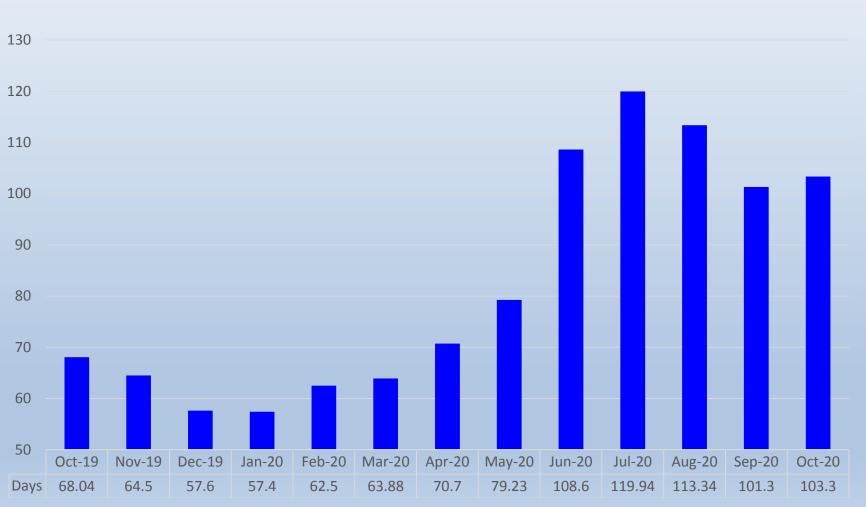


Days Cash on Hand

Thirteen Month Trending

*Excludes Medicare Advance Payments due to COVID

140









To:	ECHD Board of Directors
Through:	Russell Tippin, President & CEO
Through:	Matt Collins, COO
From:	Carol Evans, Divisional Director of Radiology
Date:	November 17, 2020
RE:	Pricing Agreement Renewal – IsoRx Texas Ltd.
Term:	12/1/2020 - 11/30/2025

Annual Spend: FY20 = \$452,000/yr

REQUEST

The Department of Radiology is requesting approval to renew a pricing agreement for term stated above with IsoRx Texas, Ltd., for the provision of radiopharmaceuticals utilized in the performance of nuclear medicine procedures.

PURPOSE OF CONTRACT

IsoRx supplies radiopharmaceuticals for utilization in nuclear medicine procedures for 7290-MCH CVI and 7300-Nuclear Medicine.

A five-year term is requested due to limited suppliers of radiopharmaceuticals and volatile pricing changes due to limited suppliers. While IsoRx is our radionuclide pharmacy, the pharmacy sources different radiopharmaceuticals from various suppliers. Many of the radioisotopes only have one supplier and are subject to price changes without notice. A five year agreement protects us from these price variances. The previous agreement with IsoRx was also a five year agreement.

VENDORS CONSIDERED

Quotes were obtained from IsoRx and Cardinal Health. Pricing was similar on the radiopharmaceuticals. With no clear pricing advantage IsoRx is the vendor of choice for the following reasons:

1. Extra Fees

Item	IsoRx	Cardinal
Weekday Delivery Fees.	No Delivery Fees	1st Delivery = \$0
(Normal # of deliveries per day		2nd Deliveries = $$30$
is 2 – 4.)		3rd Deliveries = \$105
		4th Deliveries = $$180$
		5^{th} Delivery = \$255
After Hours Callout	\$0	\$250
After Hours Delivery Charge	\$0	\$150
STAT Orders	\$0	\$95
WBC After Hours	\$0	\$175

Cardinal is the Vizient vendor and estimated the ISP impact savings at \$6,855 annually. However, this savings is lost when delivery fees are considered. Average deliveries are 3 per day for 260 days per year which equals $105 \times 260 = 27,300$ annually. This does not include after hours callbacks or delivery fees which would raise this amount considerably.

- 2. IsoRx is a local pharmacy located on the MCH campus. Cardinal's pharmacy operates out of Abilene. Advantages of a local pharmacy include.
 - a. WBC study (White Blood Cell). This requires removing blood from the patient and sending the blood to the pharmacy to be "tagged" with the radiopharmaceutical and then the blood is returned to the hospital and injected back into the patient. Allowed turnaround time for the tagging of the blood and re-injection is 7 hours. With the pharmacy located in Abilene this can be problematic. Cardinal adds a WBC after-hours charge of \$175 as this is a known concern with remote pharmacies. Volume on this exam is 2 5 per month.
 - b. When working with remote pharmacies bad weather can result in cancellation of dose deliveries or long delays, negatively impacting patient care
 - c. USP 825 With the changes in USP 797 to USP 825 there are requirements for compounding of medications and hot lab cleaning. As IsoRx is on our campus we will not need to compound any medications and they will assist us in compliance with hot lab requirements.
 - d. Due to proximity add-on orders can be delivered to hospital in under 30 minutes and emergency after-hours does are to the hospital within 1 hour. This results in reduced overtime for staff due to waiting on doses.
- Pricing is guaranteed for 5 years with IsoRx. The Cardinal contract allows for an increase of up to 7% annually (vendor stated historically the increase has been 4.5% 5%).

FINANCIAL CONSIDERATIONS

Radiopharmaceutical expense for FY 20 is listed in the table below:

7290 MCH-CVI	\$213,000
7300 – Nuclear Medicine	\$239,000
Total	\$452,000

This is a budgeted operational expense as these radiopharmaceuticals are required to perform nuclear medicine procedures.

Pricing Agreement is for 5 years and contains MCH Legal Department required nonappropriations clause for contracts with a term greater than 2 years. This is a budgeted operational expense.

RECOMMENDATION

Approval of 5-year contract with IsoRx Texas Ltd., for radiopharmaceuticals.



MEMORANDUM

DATE:	November 23, 2020
SUBJECT:	Abbott Rapid Diagnostics Informatics, Inc./RALS Interface Renewal
FROM:	Tara Ward, Divisional Director of Laboratory Services Through Matt Collins, Chief Operating Officer
TO:	ECHD Board of Directors

Cost:	
Abbott/iSTAT (term)	\$68,391.14
FreeStyle Precision Pro/Precision Exceed Pro	\$71,974.17
AVOX	\$32,921.64
BiliChek	\$30,612.10
Quidel Sofia	\$46,900.22
Clinitek Status	\$39,967.43
RALS eQUIZ	\$5,000.00
Level II Test System & Support	\$5,199.32
Roche cobas Liat	\$39,357.00
Project Total (5 year term)	\$340,323.02

Background:

RALS is used in our Point of Care department as a middleware for handling results from a variety of POCT analyzers such as iSTAT, Quidel SOFIA2, FreeStyle Precision and Precision Xceed Pro glucometers, AVOX arterial blood gas analyzers, Clinitek Status urinalysis analyzers and helps us to maintain operator competencies via the eQUIZ modules. RALS allows us to seamlessly flow results for these tests that are performed bedside to the patient's EMR with no manual intervention on the part of the operators. This renewal allows us to consolidate all license fees and expiration dates into one single contract, which will be easier to track for the next renewal. This renewal will last for 5 years, through December 2025, and will take the place of 3 existing contracts.

Staffing:

No additional FTE's required.

Funding: budgeted operational expense



MEMORANDUM

TO:	ECHD Board of Directors
FROM:	Russell Tippin, Chief Executive Officer Through Matt Collins, Chief Operating Officer
SUBJECT:	Morrison Management Specialists Contract Amendment – Nutrition Services
DATE:	December 2, 2020

Cost:

Management Fee through 12/31/21 (Operational Budget)	\$105,266.40
Management Fee through 12/31/22 (Operational Budget)	<u>\$131,584.56</u>
Contract Total	\$236,850.96

Background:

This contract renewal provides for on-going MCHS Nutrition Services to include, management, supplies and contract labor. The current contract includes a two-year auto renewal for management services. This amendment extends the contract for two years and provides for a 20% decrease in management fee and also includes "not for cause" 90 day termination language.

Staffing:

No additional FTE's required.

Disposition of Existing Equipment: N/A

Implementation Time Frame: N/A

Funding: budgeted operational expense



October 19, 2020

Steve Ewing Chief Financial Officer Ector County Hospital District Medical Center Health System 500 West 4th Street Odessa, TX 79760

Dear Mr. Ewing:

Weaver and Tidwell, L.L.P. ("Weaver", "our", "us", and "we") looks forward to the opportunity to assist you in identifying specific business risks that could prevent Medical Center Health System (the "System", "you", and "your") from achieving its objectives.

We are pleased to confirm our acceptance and our understanding of this engagement by means of this letter.

Scope of Services

We will assist management in identifying critical risk areas that threaten the System's ability to achieve its objectives and evaluate the System's processes for monitoring and controlling those risks which will include developing and executing an Internal Audit Plan ("Internal Audit Plan").

We will assist management in identifying critical risk areas that threaten the System's ability to achieve its objectives and evaluate the System's processes for monitoring and controlling those risks. The scope of the internal audit plan will be agreed to by management and implemented by our internal audit engagement team assigned to perform the services. We anticipate that our procedures will involve interviewing the System's personnel, reviewing available documentation and testing the System's compliance with internal control policies and procedures.

At the conclusion of each project on the internal audit plan we will review the results of our observations, inquiries and tests with you before we finalize results and develop recommendations. The results of our audit procedures will be delivered to both management and the audit committee. We will prepare written reports to management and the audit committee which will present the results of each project. These reports are intended for internal use by management, the audit committee and the board of directors and should not be used for any other purpose.

We will not audit or review any financial statements of the System and will not express an opinion or any other form of assurances on them.

Mr. John Wauson is the engagement partner for the services specified in this letter, and is responsible for supervising our services performed as part of this engagement.

Internal Audit Functions and Responsibilities

The purpose of our engagement is to assist you in improving the processes by which you monitor and manage the risks that face your System. Management is responsible for establishing and monitoring a system of internal control and for the internal audit function. Management and the Audit Committee are responsible for designating a responsible individual such as the Chief Financial Officer to be in charge of internal audit. In addition, Management and the Audit

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Committee are responsible for approving the scope and frequency of internal audit services and for evaluating and approving the adequacy of the internal audit plan, the internal audit procedures to be performed, evaluating the findings and recommendations resulting from internal audit activities performed by us, and the actions, if any, necessary to respond to the findings and recommendations.

We will not authorize or execute transactions, prepare source documents or take custody of the System's assets. We will assist you in the overall risk assessment, in developing the internal audit plan and in testing compliance with the System's control structure. However, it is ultimately your responsibility to assess the adequacy of your risk management system.

You are also responsible for management decisions and functions; for designating an individual with suitable skill, knowledge, or experience to oversee the internal audit services and any other non-attest services we may provide; and for evaluating the adequacy and results of those services and accepting responsibility for them.

Timing and Delivery of Services

The internal audit services will begin October 1, 2020 and continue through the fiscal year ending September 30, 2021. We will conduct our work jointly from your location and remotely, when appropriate. We will, at all times, coordinate our work with you to provide the least disruption of the System's day-to-day operations.

Fees and Invoicing

We estimate that the complete annual internal audit plan will result in hours of 1,200 and fees of \$192,000 at a flat rate of \$160/hour. If significant additional time or a change in the scope of services is necessary, we will discuss the reasons with you and arrive at a new fee estimate before we incur the additional costs. It is understood that neither our fees nor the payment thereof will be contingent upon the results of this engagement.

Our invoices for this engagement will be rendered each month as work progresses. Our invoices are payable on presentation. For invoices not paid within sixty (60) days of the invoice date, a late charge will be added to the outstanding balance. The late charge will be assessed at .5% on the unpaid balance per month. If invoices are not paid within one hundred twenty (120) days of the invoice date, the engagement will be placed on hold and we will stop work until the balance is brought current, or we may withdraw from the engagement (and any other engagements for the same client).

Ethical Conflict Resolution

In the unlikely event that circumstances occur which we in our sole discretion believe could create a conflict with either the ethical standards of our firm or the ethical standards of our profession in continuing our engagement, we may suspend our services until a satisfactory resolution can be achieved or we may resign from the engagement. We will notify you of such conflict as soon as Medical Center Health System October 19, 2020

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practicable, and we will discuss with you any possible means of resolving the conflict prior to suspending our services.

Documentation and Confidentiality

The documentation we prepare pertaining to and in support of this engagement is our property and constitutes confidential information. If we are requested to make the documentation available to regulators, government agencies, peer reviewers, or other outside parties, we will notify you before producing any documents in response to the request (unless prohibited by law or direction of law enforcement). We will cooperate with any lawful efforts made to minimize the disclosure or protect the documentation, at the expense of the party taking or requesting such efforts. Access will be provided if required or authorized by law or regulation, or we will otherwise comply with any requirement for your notification and consent prior to disclosure.

The parties do not intend this engagement or engagement letter to be for the benefit of any thirdparty. Unless you inform us in writing, we are not aware of the identity of any third-parties to which any of our work product will be supplied and we do not anticipate any such third-parties' reliance upon our professional services unless expressly stated herein.

During the course of the engagement, we may communicate via fax, email, or other electronic mechanism. Please be aware that communication in those mediums contains a risk of misdirected or intercepted communications. Any request to limit such transmissions or use a more secure means of communication must be made in writing.

Dispute Resolution Procedure including Jury Waiver

Any dispute between the parties arising from or relating to this engagement or engagement letter shall, if negotiations and other discussions fail, be first submitted to mediation before resorting to litigation. The parties agree to conduct any mediation in good faith and make reasonable efforts to resolve any dispute by mediation. If the parties are unable to agree upon a mediator, either party may invoke the mediation service of the American Arbitration Association (AAA) in accordance with the provisions of the Commercial Mediation Procedures then in effect. The parties agree to conduct the mediation in Midland, Texas or another mutually agreed upon location, and each party shall bear its own expenses, including attorney's fees and costs, except for the fees of the mediator which shall be borne equally by the parties.

This engagement letter and all disputes between the parties shall be governed by, resolved, and construed in accordance with the laws of the State of Texas, without regard to conflict-of-law principles. Any action arising out of or relating to this engagement or engagement letter shall only be brought in, and each party agrees to submit and consent to the exclusive jurisdiction of, the federal or state courts situated in Tarrant County, Texas.

Each party hereby irrevocably waives any right it may have to trial by jury in any proceeding arising out of or relating to this engagement or this engagement letter.

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Whenever possible, this engagement letter shall be interpreted in such a manner as to be effective and valid under applicable laws, regulations, or published interpretation, but if any term of this engagement letter is declared illegal, unenforceable, or unconscionable, that term shall be severed or modified and the remaining terms of the engagement letter shall remain in force. The parties agree that the court should modify any term declared to be illegal, unenforceable, or unconscionable in a manner that will retain the intended term as closely as possible.

Miscellaneous

We may at times provide documents marked as drafts. Those documents are for review purposes only and should not be relied upon in any way.

We inform you that we have non-CPA licensees who may provide services pertaining to this engagement.

This engagement letter sets forth all of the agreed upon terms and conditions of our engagement with respect to the matters covered herein, and supersedes any that may have come before. This engagement letter may not be amended or modified except by further writing signed by all the parties.

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We appreciate the opportunity to assist you and look forward to working with you and your team.

Sincerely,

Weaver and Sidnell L.L.P.

WEAVER AND TIDWELL, L.L.P.

Midland, Texas

Please sign and return a copy of this letter to indicate your acknowledgment of, and agreement with, the arrangements for our engagement as described herein, including each party's respective responsibilities. By signing below, the signatory also represents that they have been authorized to execute this agreement.

Medical Center Health System

Ву:

Printed Name:_____

Title:

Date: _____



To:	ECHD Board of Directors
Through:	Russell Tippin, President & CEO
Through:	Matt Collins, COO
From:	Carol Evans, Divisional Director of Radiology
Date:	November 17, 2020
RE:	Service Agreement - Shimadzu

Term:	11/1/20-11/1/22
Total Spend:	95,200

REQUEST

The Department of Radiology is requesting approval for a new contract with Shimadzu to cover digital detectors on four portable x-ray units for an annual cost of \$47,600. Total cost for the two year contract is \$95,200. This expense is not budgeted.

PURPOSE OF CONTRACT

This contract includes coverage of digital radiography (DR) detectors and drop coverage. The DR detectors are subject to heavy use as they are placed under/behind patients during x-rays. The DR panel receives the radiation and produces the resultant image. These panels are heavy and cumbersome and are therefore subject to accidental hits and drops. At the same time these panels are delicate and are easily damaged. Once damaged the detector cannot be utilized as there will be artifacts and drop-out on images rendering them unreadable by the radiologist.

FINANCIAL CONSIDERATIONS

Replacement of a damaged panel currently costs \$49,000. This contract will charge a \$5,000 deductible for replacement of the detector regardless of cause of failure. Trimedx considers the detector an accessory and does not cover repair/replacement. In the past months we have had to replace one detector and currently have another that needs to be replaced. Shimadzu has agreed to charge the \$5000 deductible on the one that is currently out of service, if this contract is approved. If the contract is not approved the cost of replacement to the hospital will be \$49,000.

Tract Manager reviewed pricing and obtained additional discounts which are reflected in current pricing.

RECOMMENDATION

As these detectors are very high use, daily wear and tear as well as accidental drops are an ongoing concern. It is recommended that they be placed under contract with Shimadzu.



MEMORANDUM

TO: ECHD Board of Directors
FROM: Matt Collins, Chief Operating Officer
SUBJECT: Tube System
DATE: November 25, 2020

Cost:

Tube System Network Cabling Contingency	\$151,090 5,000 <u>10,000</u>	
Contract Total	<u>\$166,090</u>	

Background:

The Swisslog tube system is approximately 10 years old and is experiencing failures that cause disruption to hospital operations. Reliable uptime for this system is of extreme importance as hospital operations depends on the tube system to transport medications, lab specimens and other vital documents on 24/7 basis.

At this time management is recommending the tube system be modernized to improve reliability. The modernization package includes a new System Control Center, Ethernet Conversion Transfer Unit, and Panel Upgrades.

Staffing:

No additional FTE's required.

Disposition of Existing Equipment: N/A

Implementation Time Frame: 12 – 18 Weeks

Funding: Emergency Capital 2021



To:	ECHD Board of Directors
Through:	Russell Tippin, President & CEO
Through:	Matt Collins, Chief Operating Officer
From:	Minh Hong, Pharmacy Director
Date:	12/02/2020
RE:	Acquisition of OR Anesthesia ES Pyxis System

BD Pyxis Anesthesia ES System: We need 23 workstations to have one for each OR. The total quoted cost for the equipment is \$374,463. There will be minimal implementation cost to add data drop if there is not already one in each of the OR room.

Pyxis Anesthesia System ES (23 units)	\$ 374,463
Data drop for 23 OR rooms	\$ 2,000

REQUEST

The pharmacy department requests the purchase of new OR Anesthesia ES system including 23 units to equip each OR room with one unit.

OBJECTIVE

The new system will provide operational, clinical, and financial benefits in the short and long term. Medication cabinet is the gold standard to have in each OR.

- 1) Clinical benefits
 - a. In emergency situation, OR staff will have all necessary medications inside the OR room to prevent delay in care. This is especially important since we no longer able to provide OR technicians.
 - b. Reducing medication errors by eliminating the use of medication boxes.
 - c. Reduce risk of control substance diversion and inappropriate handling.
- 2) Operational and financial benefits
 - a. During a case, nurses do not have to leave the OR room to get more medications and supplies.
 - b. Pharmacy technicians do not have to restock OR medication inventory multiple times a day.
 - c. Anesthesiologists and nurses do not have to pre-draw medications prior to a case. This also reduces medication wastes since the pre-drawn medications do not always get administered.
 - d. Improve medication charge capture.
 - e. Reduce the need for kitcheck tags. We spent \$90,000 on kitcheck tags in the last 12 months. 75% of these tags were used for OR case trays and boxes.

IT REQUIREMENTS

IT will be heavily involved in during the planning, building interfaces and implementation.

VENDOR CONSIDERATION

BD Pyxis is the vendor of choice because their products meet all of our needs without providing extra functionalities which we may or may not need. Their price quote is also the lowest. We also have BD carousels, Alaris Pumps and Automated dispensing cabinets. The inter-operability is an important consideration.

FTE

- No additional labor required

WARRANTY & SERVICE COVERAGE

BD provides all maintenance services for \$1,656/month

MD BUYLINE & Tractmanager

- Both concluded that the current quote is appropriate pricing for this product. **DISPOSITION OF EXISTING EQUIPMENT**

Not applicable for this project



MEMORANDUM

TO:	ECHD Board of Directors	
FROM:	Christin Abbott-Timmons RN MSN	
SUBJECT:	Workstations on Wheels (WOWs) for COVID units	
DATE:	11/17/2020	
	rts with power, label printer tray, and locking drawers rs, zebra printers, and medication scanners	\$56,896.00 <u>\$21,895.00</u> \$78,691.00

Background:

As Medical Center Health System is experiencing a COVID surge, we are opening additional patient locations and have an urgent need for additional computer equipment for our clinicians to use in those areas.

The additional units will be deployed to respiratory therapy and nursing to utilize for scanning medications at time of dispensing, lab ordering and charting in the electronic medical record. As COVID volume decreases the units will be deployed to the higher census areas for long term usage in patient care.

Staffing:

No additional FTE's required.

Disposition of Existing Equipment:

N/A

Implementation Time Frame:

Funding:

Emergency Contingency Capital Request



FY 2020 CAPITAL EQUIPMENT REQUEST

Date:	November 3, 2020	
То:	Ector County Hospital District Board of Directors	
Through:	Russell Tippin, President / CEO Christin Timmons, Vice-President / CNO	
From:	Michelle Sullivan MSN, BSN, RN, ACNO Surgical Services Jade Barroquillo BSN, RN, Director of Surgical Operations	
Re:	Versapulse power suite 60W Laser	
Total Cost Unbudgeted A	Amount CER 6620-20-01	\$87,900 \$87,900

OBJECTIVE

Obtain Versapulse power suite 60W Laser for use in Urological cases. These type cases include laser lithotripsy for kidney and bladder stones. We have five urologists that will utilize this equipment.

HISTORY

The current laser is a rental from Agiliti Surgical Inc. The laser owned by the hospital has been repaired several times in the last year and now cannot be repaired again per Trimedx. We perform approx. 110 laser cases per year. The cost for laser rental is \$3600.00 per week. We have been renting this laser weekly since July 2019.

PURCHASE CONSIDERATIONS

Lumenis is a leading supplier of reliable laser/ energy sources. We have several purchasing Options: fair market value lease (36/48/60), Capital lease (12/36/48/60) with a recovery period, Capital lease option, Lumenis recovery program (30/60).

FTE IMPACT

No additional FTE(s) will be required.

INSTALLATION & TRAINING

Provided by vendor.

WARRANTY AND SERVICE CONTRACT

1-year warranty

DISPOSITION OF EXISTING EQUIPMENT

Disposition complete by Trimedx

LIFE EXPECTANCY OF EQUIPMENT

10 years

MD BUYLINE INFORMATION

Meets MD Buyline and Vizient pricing recommendation.

COMMITTEE APPROVAL

Surgery Dept.PendingFCCPendingMECPendingJoint ConferencePendingECHD BoardPending



FY 2020 CAPITAL EQUIPMENT REQUEST

Date:	November 3, 2020	
То:	Ector County Hospital District Board of Directors	
Through:	Russell Tippin, President / CEO Christin Timmons, Vice-President / CNO	
From:	Michelle Sullivan MSN, BSN, RN, ACNO Surgical Services Jade Barroquillo BSN, RN, Director of Surgical Operations	
Re:	Stryker TPX Small Bone Drill	
Total Cost Unbudgeted A	Amount CER 6620-20-01	\$463,380.96 \$463,380.96

OBJECTIVE

Complete Stryker power updates as planned pre-covid. This is step 2 of our needed power upgrades for drills and saws.

HISTORY

Currently the drills are at end of life and not dependable. Obtaining these small bone drills will complete the power needs. The small set is lightweight and can be used for multiple specialties and is used on a regular basis. More than 200 times per year. Repairs for the current drills are not supported by Stryker. These drills are used and reprocessed multiple time per day.

PURCHASE CONSIDERATIONS

Stryker was utilized for phase one of our upgrade for large bone power drills. Capital funds were already allocated for the completion of this power upgrade for small bone needs.

FTE IMPACT

No additional FTE(s) will be required.

INSTALLATION & TRAINING

Provided by vendor.

WARRANTY AND SERVICE CONTRACT

1-year warranty

DISPOSITION OF EXISTING EQUIPMENT

To be disposed of by Trimedx

LIFE EXPECTANCY OF EQUIPMENT

8 years

MD BUYLINE INFORMATION

Meets MD Buyline and Vizient pricing recommendation.

COMMITTEE APPROVAL

Surgery Dept.	Pending
FCC	Pending
MEC	Pending
Joint Conference	Pending
ECHD Board	Pending



FY 2020 CAPITAL EQUIPMENT REQUEST

Date:	November 16, 2020	
To:	Ector County Hospital District Board of Directors	
Through:	Russell Tippin, President / CEO Christin Timmons, Vice-President / CNO	
From:	Michelle Sullivan MSN, BSN, RN, ACNO Surgical Services Jade Barroquillo BSN, RN, Director of Surgical Operations	
Re:	BK 5000 Ultrasound System	
Total Cost Unbudgeted A	amount CER 6620-20-01	\$<mark>145</mark> \$145

OBJECTIVE

Obtain Ultrasound system to aid with robotic surgeries that require ultrasound to ensure adequate excision of cancerous tissues/tumors. The use of the ultrasound helps to obtain adequate specimens when trying to resect tumors thus reducing the number of frozen sections for immediate examination by the pathologist. This can decrease time spent in the operating room for this patient but allowing time for an additional case to be added.

HISTORY

Currently we do not own an ultrasound that has the capabilities needed for this type of visualization and treatment.

PURCHASE CONSIDERATIONS

BK medical is the preferred vendor for these type ultrasounds for their state-of-the-art applications and visualization. This ultrasound can be utilized by several different service lines. The above equipment does not include the 21,108.00 a year service agreement which will come from the operational budget.

FTE IMPACT

No additional FTE(s) will be required.

<mark>,776.89</mark> ,776.89

INSTALLATION & TRAINING

Provided by vendor.

WARRANTY AND SERVICE CONTRACT

1-year warranty on all parts and labor

DISPOSITION OF EXISTING EQUIPMENT

No existing equipment presents

LIFE EXPECTANCY OF EQUIPMENT 7-10 years

MD BUYLINE INFORMATION

Meets MD Buyline and Vizient pricing recommendation.

COMMITTEE APPROVAL

Surgery Dept. Pending FCC Pending MEC Pending Pending Joint Conference Pending ECHD Board



MEMORANDUM

TO:	ECHD Board of Directors	
FROM:	Linda Carpenter, Vice President/Chief Information Of	ficer
SUBJECT:	Cisco Fiber Channel (FC) Switch Replacement	
DATE:	12/1/2020	
<u>Cost:</u> Cisco FC Sv	vitch Replacement	\$68,539.00
Budget Ref FY2021 Cap		\$68,539.00

Background:

These Fiber Channel switches are the foundational infrastructure equipment that serves more than 90% of our onsite SAN storage communication between servers and storage platforms. The continued supportability of this equipment is extremely important to the stability of our environment. Maintenance on our current FC is expiring and is no longer supported. Replacement devices will enable full support and maintenance as well as increased performance related to data storage and retrieval processes. These performance gains will alleviate bottlenecks with critical clinical data on internally hosted systems and storage. In addition, replacement of these devices will help prevent security vulnerabilities with data storage and retrieval. This proposed equipment purchase supports existing SAN infrastructure and is necessary for continued supportability for storage connectivity to meet patient care needs.

Staffing:

No additional FTE's required.

Disposition of Existing Equipment:

Existing equipment will be properly disposed of in accordance to MCH Hardware Disposal Policy.

Implementation Time Frame:

3 to 4 month time frame to schedule and replace the existing FC Switches.

Funding:

Cisco FC Switch Replacement in the amount of \$68,539.00 from Computex Technology Solutions will come from FY2021 capital funds for this project.



MEMORANDUM

TO:	CHD Board of Directors									
FROM:	inda Carpenter, Vice President/Chief Information Officer									
SUBJECT:	End of Service Life (EOSL) Ethernet Switch Replace	nd of Service Life (EOSL) Ethernet Switch Replacement								
DATE:	12/1/2020									
<u>Cost:</u> EOSL Ether	net Switch Replacement	\$289,330.69								

Background:

Currently, there are fifty-four (54) network switches used throughout the entire health system that were End of Service Life (EOSL) between 2016 and 2018. Additionally, most of the existing switches were purchased as refurbished devices contributing to equipment concerns. These ethernet switches provide the connectivity for every single wired device in Medical Center Health System (MCHS) as well as several internal partners and tenants on MCHS properties. Replacement devices will enable full support for security patches to prevent security vulnerabilities. The replacement devices would also provide full integration with our appliance that provides full reporting/management of various network segments in the health system. This purchase is necessary for continued system supportability. As the switches continue to age, they create additional security risks to the environment. If they fail, it would cause system stability issues as staff will not be able to use their computers to access applications, email, and patient information.

Staffing:

No additional FTE's required.

Disposition of Existing Equipment:

Existing equipment will be disposed of in accordance to MCHS Hardware Disposal Policy.

Implementation Time Frame:

Implementation would begin immediately. In order to prevent major disruption, we will be using a rolling phase approach that could take approx. 3-4 months to replace all 54 existing switches.

Funding:

EOSL Ethernet Switch Replacement in the amount of \$289,330.69 from Computex Technology Solutions will come from FY2021 capital funds for this project.



Purpose: Medical Center Health System develops, implements, evaluates, and maintains an effective, ongoing, hospital-wide data driven QAPI program. The program reflects the complexity of the hospital and all services provided, focuses on indicators related to improved outcomes, proactively identify areas of risk, and takes actions that address the hospital's performance across the spectrum of care. Performance improvement projects are implemented, monitored, and revised as necessary to achieve success, and assure that improvements are sustained over time.

Mission: Medical Center Health System is a community-based teaching organization dedicated to providing high-quality and affordable healthcare and improve the health and wellness of all residents of the Permian Basin.

Vision: MCHS will be the premier source for health and wellness

Multi-year Strategic Plan: Impact all organization pillars, People, Finance, Quality, Experience and Growth, to achieve a 5-Star CMS Rating by 2023.

2021 Fiscal Year Organization Priorities:

- People: To decrease turnover rate by 4% from last fiscal year, as measured by in house quality monitoring by Human Resources.
- Finance: To achieve 96% to 104% managed productivity, as measured by Premier Operations Advisor System.
- Growth: To increase employee tele-medicine visits by 10% from last fiscal year, as measured by in house quality monitoring.
- Quality: Achieve an average 20% reduction in patient quality/safety events (Readmissions, CAUTI, SSI's, Pressure Ulcers and Post-Op Respiratory Failure).
 - o To maintain accreditation and certification readiness
- Experience: To increase HCAHPS scores by 5% from last fiscal year, as measured by NRC.

Scope: To achieve the goal of delivering high quality care, all departments - both clinical and non-clinical, are given the responsibility and authority to participate in MCHS QAPI.

Governing Board Responsibility: The MCHS Board of Directors of Medical Center Hospital is ultimately responsible for assuring that high quality care is provided to our patients. The Board delegates the responsibility for implementing this plan to the Quality and Patient Safety Division through its QAPI plan, and to the committees and departments working under the authorization of the QAPI Committee, and to the hospital's Executive Leadership Team.

Overall Program Effectiveness: The Director of Quality & Patient Safety and Quality Improvement Officer assumes responsibility for the overall integrity and effectiveness of the QAPI program. The Director of Quality & Patient Safety and Quality Improvement Officer in collaboration with the QAPI Committee, leadership team, department heads, Clinical Managers, CEO, Governing Body, and all other organization staff as appropriate to plan, direct, coordinate, and improve MCHS quality and safety of care, services provided and organization operations.

Program effectiveness is ensured by the following:



- 1. An ongoing program for quality improvement and patient safety is defined, implemented, and maintained.
- 2. The program reflects the complexity of Medical Center Health System and all services provided, focuses on indicators related to improved outcomes, and takes actions that address the agency's performance across the spectrum of care.
- 3. QAPI efforts address priorities for improved quality of care, and patient safety.
- 4. All improvement actions are evaluated for effectiveness.
- 5. Clear expectations for patient quality/safety are established, implemented, and maintained.
- 6. Findings of waste are appropriately addressed.

Leadership Responsibility: CEO and Senior leadership are responsible for developing the quality objectives included in this QAPI Plan. CEO and Senior leadership set priorities, provide leader emphasis, and allocate necessary resources to support the plan. Leadership will ensure that quality actions are based upon strategic plan therefore ensuring the future of quality health care for our patients and community. CEO and Senior leadership are responsible for monitoring outcomes of performance improvement and assisting with key processes when the need arises.

Medical Staff Responsibility: The medical staff at Medical Center Health System participates in surgical case review; blood usage review; medical record review; infection control; pharmacy and therapeutics review; mortality review; utilization management, including denials issued by payers; review of transfers to other facilities; credentialing and will serve, from time to time, as liaisons to Quality and Performance Improvement activities. Identified medical staff leaders and subject experts may serve on additional committees and project teams under the authorization of the QAPI Committee. The goal is to improve the quality and safety of care that is provided to the patients at MCHS.

Manager/Department Staff Responsibility: Every department, both clinical and non-clinical, within MCHS is responsible for implementing quality assurance and performance improvement activities. Each department manager/director is responsible for setting goals that give direction for process improvement. Managers and department staff identify quality indicators, collect and analyze data, develop and implement changes to improve experience, quality of care and service delivery. Ongoing monitoring and presentation to the QAPI Committee assures that improvement is made and sustained. The goal is to improve the quality and safety of care that is routinely provided to the patients at MCHS. (Please see appendix A for tentative QAPI report schedule)

QAPI Committee: The QAPI Committee consists of the following individuals: Chief Medical Officer, Chief Nursing Officer, Chief Operational Officer, Associate Chief Experience Officer, Infection Prevention Officer, Director of Laboratory, Director of Radiology, Director of Environmental Services, Compliance Officer, Risk Manager, Procare Provider representative, Director of Urgent Care, and FHC representative. Each member may elect a designee to attend on their behalf under the circumstance they are unable to attend.

The members of the QAPI Committee are responsible for:

- Assuring that the review functions outlined in this plan are completed.
- Prioritizing issues referred to the QAPI Committee for review.



- Assuring that the data obtained through QAPI activities are analyzed, recommendations made and appropriate follow up of problem resolution is done; Incorporating internal and external sources of benchmarking data, Hospital Compare data, HCAHPs data, Leapfrog data, etc.
- Identifying other sources, such as the DNV-GL NAIHO and ISO standards, for incorporation into the hospital's overall quality improvement efforts.
- Reporting on ongoing findings, studies, recommendations, and trends to the Governing Board at minimum annually; reporting to QMC annually; and reporting to hospital staff as appropriate.
- Identifying educational needs and assuring that staff education for quality improvement takes place.
- Appointing sub committees or teams to work on specific issues, as necessary.
- Assuring that the necessary resources are available.

Communication: QAPI Council provides oversight of performance improvement activities. The Director of Quality and Patient Safety and Quality Improvement Officer facilitate performance improvement activities and functions as the central clearing house for quality data and information collected throughout the facility. Data tracking, trending and aggregates from a variety of sources will be used to prepare reports for the governing board, quality council and the medical staff when requested. Communication on organizational and departmental performance is ongoing via Balanced Score Cards.

Quality Improvement Processes and Methodology: The Quality Assurance and Performance Improvement plan is a framework for the organized, ongoing and systematic measurement, assessment and performance improvement activities.

Outside sources/comparative databases, such as professional practice standards, national and state benchmarks, etc., will be used to compare our outcomes and processes with others, identifying areas to focus quality improvement efforts.

Our methodology/process includes (but not limited to):

- Ongoing monitoring and data collection
- Problem identification and data analysis
- Identification/implementation of actions (30/60/90-day plans depending on report out frequency)
- Evaluation/enhancement of actions
- Measures to improve quality on a continuous basis and sustain excellence
- Performance improvement teams, which may be inter or intradepartmental, that look at issues to identify opportunities to improve processes and outcomes using the following methods.
 - Lean
 - Plan, Do, Study, Act (PDSA)
 - Rapid Cycle Improvement
 - Six Sigma (DMAIC)
 - Benchmarking
 - Dashboards and/or Scorecards
 - Etc.



Associate Chief Patient Experience Officer

Chief Nursing Officer

Chief Medical officer

Chief Executive Officer



Appendix A:

QA	API Committee	Repo	rting	g Sch	edu	le							
Report	Frequency	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Annual Plan & Evaluation													
Approval			1	1	1	1							
Patient Safety/Risk	Annually	X											
Performance Improvement	Annually		X										
Annual eval haz mat waste man. plan; fire safety man. plan; annual eval safety plan; annual eval security man. plan; annual eval life safety plan; annual eval utilities	Annually	x											
Emergency Management	Annually	X											
Staffing Effectiveness	Annually		X										
Patient Safety Culture Survey	Annually	X						-					
Infection Prevention	Annually	X											
UR Committee	Annually	X											
P&T Committee	Annually			X									
Required Reporting													
Blood Usage/Wastage	Quarterly		X			X			X			Х	
Infection Prevention	Quarterly	Х			x			Х			Х		
Invasive/Operative Procedures/Return to Surgery/Anesthesia Monitoring	Quarterly			x			x			x			x
Medication Management	Quarterly			X			X			X			Х
Pain Management	Quarterly			X			X			X			Х
Patient Experience	Quarterly			X			X			X			Х
Patient Througput	Quarterly		X			X			X			Х	
Physican Environement	Quarterly	X			X			Х			Х		
Readmissions (done through team reports)	Monthly	X	X	X	X	X	X	Х	X	X	Х	Х	Х
Restraint Usage	Quarterly		X			X			X			Х	
Resuscitation Outcomes	Annually				X								
Risk Management/Falls	Quarterly			X			X			X			Х
Emergency Management	Quarterly	X			X			Х			Х		



Department-Specific QAPI		1		1	1								
Accreditation Readiness/Tracers													
Results	Monthly	Х	Х	Х	Х	X	Х	Х	X	Х	Х	X	Х
Acute IP Physical Therapy	Quarterly		Х			X			X			X	
Adminsitration	Quarterly			Х			Х			Х			Х
Ambulatory Quality	Bi-annually					X						X	
Biomedical/Clinical Engineering	Quarterly	X			Х			X			Х		
Business Office	Quarterly			Х			X			Х			Х
Cardiac Rehab	Quarterly	X			Х			X			Х		
Cath Lab	Quarterly	Х			Х			Х			Х		
CDI	Quarterly			X			X			Х			Х
Communications/Marketing	Quarterly			X			X			Х			Х
Community Health	Quarterly	X			X			X			X		
Compliance	Quarterly			X			X			Х			
CV Services	Quarterly	X			X			X			X		
Dialysis	Quarterly	X			X			X			X		
ED Stats/LWBS	Quarterly		Х			X			X			X	
Electrodiagnostics	Quarterly	X			Х			Х			Х		
Endoscopy	Quarterly			Х			Х			Х			Х
Engineering/Facilities	Quarterly	X			Х			Х			Х		
Financial Accounting	Quarterly			Х			X			Х			X
Family Health Clinic	Quarterly			Х			X			Х			Х
Housekeeping/Environmental Services	Quarterly			Х			X			Х			X
Human Resources	Quarterly			Х			Х			Х			
Infusion/Wound Care	Quarterly	X			Х			Х			Х		
Inpatient Stat TAT	Quarterly		Х			Х			X			Х	
IP Rehab Unit Services	Quarterly		Х			Х			Х			Х	
IT	Quarterly			Х			Х			Х			Х
Laboratory	Quarterly		Х			Х			Х			X	
Linen Services	Quarterly	X			Х			X			X		
Materials Management	Quarterly			Х			X			Х			Х
MCH Foundation	Quarterly			Х			X			Х			Х
Medical Staff Services	Quarterly		Х			Х			X			X	
Moderate Sedation	Quarterly		Х			X			X			X	
NICU QAPI	Quarterly		Х			X			X			X	
Nursing Education	Quarterly		Х			X			X			X	
Nursing Unit 5W	Quarterly		Х			X			Х			X	
Nutrition Services (Clinical)	Quarterly	X			X			X			X		
Nutrition Services	Quarterly	X			X			X			X		
OP Therapy	Quarterly		Х			X			X			X	
OR	Quarterly			Х			X			Х			Х



						-	-	-	-				
OR Ambulatory	Quarterly			X			X			Х			Х
OR PACU	Quarterly			Х			Х			X			Х
Pastoral Care	Quarterly			X			X			Х			Х
Patient Experience	Quarterly			Х			X			X			Х
PBX/Operator	Quarterly	X			X			X			Х		
Perinatal QAPI	Quarterly		Х			X			X			Х	
Pharmacy	Quarterly			X			X			X			Х
Police/Security	Quarterly												
Pressure Ulcer (Nursing Unit PI)	Quarterly	Х			Х			Х			Х		
ProCare Clinics	Quarterly			Х			Х			Х			Х
Radiology Services- Mammography	Quarterly		Х			X			X			Х	
Registration	Quarterly			Х			X			Х			Х
Respiratory Report	Quarterly		Х			X			Х			Х	
Safe Harbor & Sitter hours	Quarterly	X			Х			X			Х		
Sepsis	Quarterly	X			X			X			Х		Х
Sterile Processing	Quarterly			X			X			X			Х
Transport	Quarterly		Х			Х			X				
Trauma Services	Quarterly		Х			Х			X			Х	
UOM	Quarterly	X			Х			X			Х		
RCA Reports													
Readmissions													
CHF/AMI	Quarterly	X			Х			X			Х		
COPD	Quarterly		Х			X			X			Х	
CABG	Quarterly			X			X			X			Х
Pneumonia	Quarterly	X			Х			Х			Х		
Stroke	Quarterly			Х			Х			Х			Х
Knee/Hip	Quarterly		Х			X			Х			Х	
Center for Heart Disease													
ACTION-GWTG Registry	Quarterly			X			X			X			Х
CathPCI Registry	Quarterly			Х			Х			X			Х
GWTG-Heart Failure	Quarterly		Х			Х			Х			Х	
Society of Thoracic Surgeons Database	Quarterly		Х			Х			Х			Х	
Disease/Condition Specific													
Reports													
Total Joint Center	Bi-annually				X						Х		
GWTG-Stroke	Bi-annually			X						X			



Consent Agenda													
Conversion rate (actual donors/eligible donors)	Annually		x										
Medical Record Delinquency	Quarterly			Х			X			X			X
Critical Values Reporting	Quarterly	X			X			X			X		
CT dose index/MRI safety	Quarterly		Х			X			Х			Х	
Committee Minutes Due													
Emergency Management Committee	Quarterly	X			x			X		x			
Environment of Care Committee	Quarterly	X			X			X		X			
Alignment Room	Quarterly	X			X			X		X			
Infection Control and Prevention	Quarterly		X			X			Х			Х	
P & T	Quarterly		X			X			Х			Х	
Antibiotic Stewardship Committee	Quarterly		Х			X			Х			Х	
Greivances/Complaints	Quarterly			X			X			X			X
Resuscitation Outcomes	Quarterly			X			X			Х			Х

December Board Report

Site Visits

McCamey- met with Dr Addison and nurses at clinic. Dr Addison stated they are seeing more positive COVID patients here recently than lately, he stated about 80% are coming back positive. They recently lost one of their providers, Debbie Mercer NP, I gave condolences. They are not sure at this time when they will replace her, they have had some locums come in to help at this time. Dr. Addison stated they have had a few transfers to MCH, no issues. Dr Addison did bring up how important it is for them to receive patient information once the patient transfers to MCH. I have let him know we are working on ways to share information. He provided example of when they send patient to San Angelo they receive information back on the patient from the time the patient is admitted there and then also once the patient is discharged. In the meantime, I did provide him with case management contact information to call on patients transferred to MCH, he thanked for that.

Andrews- met with Chris Dallaire, new clinic director and providers in clinic. Chris stated he has heard of no issues at this time with transfers or getting patients into MCH system. Chris introduced me to all clinic staff and providers. Dr Tochterman stated she has had no issues with transferring patients to MCH in either the hospital or clinic setting. I have provided updated list to all staff with updated MCH provider information. I have let Chris know we do have some new providers who would like to introduce themselves to regional providers he stated we will set something up for possibly first of next year due to visitor restrictions.

Ft Stockton- MCH quality team provided AIDET training to staff. Met with several team members from hospital. Provided updates on new providers to clinic manager, she stated they have no issues with getting patients into our clinics. Spoke with social worker and home health representative, provided them with our case management department contact information. They also let me know they have cardiac rehab in their facility. I will let our CM department know of that information.

Upcoming site visits

Alpine 12/2

Regional updates:

- Regional call occurring weekly at this time
- Continuing to reach out to Ector County Clinics with MCH updates in regards to visitors, procedures, ect.
- Continuing to provide region with virtual education at this time including respiratory, diabetes, pediatrics, EKG courses, and trauma.

Telehealth updates:

- 12 employee visits for the month of November
- 15% of visits for MCH Procare patients were seen via telemedicine, this is up from last month
- Urgent Care exploring how to implement Telehealth into their practice
- Physical therapist/ Speech Therapist to begin providing Telehealth services