



Hi-Desert Memorial Health Care District dba
Morongo Basin Healthcare District
BOARD OF DIRECTORS REGULAR MEETING MINUTES
June 3, 2021 at 6:00 p.m.

Convened on site restricted to board members and staff; public invited to attend via GoToMeeting, an electronic, remote-site platform temporarily permitted as per the Executive Order issued by California's Governor in response to the COVID-19 pandemic.

- **Mission Statement:** *To improve the health and wellness of the communities we serve.*
- **Vision:** *A healthy Morongo Basin.*
- **Core Values:** *Commitment, Collaboration, Accountability, Dignity, Integrity.*

Board of Directors:

- Director Brown (*remote*)
- Director Evans
- Director Markle-Greenhouse
- Director Mondary (*remote*)

Administrative Staff:

- Jackie Combs, CEO
- Karen Graley, Board Clerk
- Cindy Schmall, COO

Guests:

- Linda Evans, Chief Strategy Officer, Desert Mkt, Tenet (*remote*)

CALL TO ORDER

Director Greenhouse called the meeting to order at 6:01 p.m. The meeting was convened on the La Contenta campus and using the electronic platform of Go-To-Meeting.

ROLL CALL

Karen Graley, Board Clerk, conducted roll call and declared a quorum.

OBSERVANCES

Director Evans read the mission, vision and core value statements.

Director Greenhouse led the assembly in the pledge to the American flag.

PUBLIC COMMENT

No public comments were presented.

APPROVAL OF MEETING AGENDA

Motion 21-31: Director Evans motioned to approve the meeting agenda as presented; motion was seconded by Director Mondary; the motion passed by unanimous vote.

APPROVAL OF MEETING MINUTES

Motion 21-32: Director Evans motioned to approve the minutes the Board of Directors with changes; motion seconded by Director Mondary; motion passed by unanimous vote.

- Minutes: Special meeting of the Board of Directors, May 4, 2021; edit text to read, “no reportable action taken” as the closed session report.
- Minutes: Regular meeting of the Board of Directors, May 6, 2021
- Minutes: Special meeting of the Board of Directors, May 11, 2021; edit text to read, “no reportable action taken” as the closed session report.



DESERT CARE NETWORK UPDATE – *Linda Evans, Chief Strategy Officer, Desert Mkt, Tenet*
Ms. Evans thanked the board for the opportunity to provide an update about Hi-Desert Medical Center (HDMC), the Continuing Care Center (CCC) and Desert Care Network (DCN), on behalf of Karen Faulis, CEO, HDMC.

COVID-19 Update:

- Acute hospital has had zero positive COVID-19 patients for the last two weeks. Zero CCC residents have tested positive for COVID-19 in the past three weeks.
- As of this morning, DRMC currently has three positive COVID-19 patients and two PUI patients in-house; JFK currently has two positive COVID-19 patients and three PUI patients in-house.
- DCN is now contracted with the State BSC & MyTurn program (eff April 1), so all appointment scheduling goes through the State system.
- Vaccination clinics are continuing at the DCN hospitals, however, appointment demand has decreased significantly. We are now working with FIND, churches, and senior centers to address homebound people and attend food distribution sites to offer vaccines. We are also working with the schools to capture the 12 years and older population interested in being vaccinated.

Lease Agreement capital projects update:

- The Cerner/PBAR EMR and financial platform conversion occurred on May 18. Cerner and Tenet continue to provide onsite and remote support. End users are adopting the new platforms well. DRMC and JFK have upgraded their version of Cerner so all three facilities are now on the most upgraded version (Cerner Millennium).
- The Cerner Long Term Care (LTC) Module for CCC work has begun with a goal of implementation before year-end. This will allow for CCC to be completely on Cerner documentation. CCC did already to Cerner for CPOE, physician documentation and partial medication management.
- The hospital main sewer line construction project was completed in May.
- A few remaining hospital flooring areas are scheduled for completion late June (waiting on tile delivery).
- The CCC flooring replacement project is to begin after hospital flooring complete.
- Acute hospital air handler #1 replacement project is complete. Air handler #2 has an anticipated completion date in June.

Director Mondary asked for clarification regarding the reported COVID-19 patients. COVID-19 patients in the Coachella Valley are in the med/surg unit, not ICU.

Director Evans praised the inclusion of CCC in the Cerner project as it will benefit both staff and patient care.

PRESENTATION

DISTRICT STRATEGIC PLAN, 2022-2025 – *Jackie Combs, CEO*

Ms. Combs presented the three-year strategic plan. The plan was influenced by the Community Health Needs Assessment and the input from both the District and CHC boards.

Director Evans stated it is an excellent plan. Regarding Strategy 2, we should consider targeting working with Morongo Unified School District to reduce teen vaping. And the plan does not include anything regarding the homeless in our community. We have a homeless shelter for animal but not for people.



Perhaps the District could encourage community action to affect the homeless problem. Ms. Combs stated that senior leadership meetings include assessing homelessness. Cindy Schmall and Joe Ruddon have taken on that project and we will bring information to the board as it becomes available. She also commented that she was pleased that data gathering for the Morongo Basin was included in the plan Ms. Combs noted that staff is already collecting relevant data.

Director Mondary spoke to the importance of assessing the homeless problem in our community. After discussion, Ms. Combs offered to add the homeless issue to the strategic plan.

Director Brown asked about behavioral health services for children. Ms. Combs stated that she has been working with UCR for two years to get a child psychiatrist on staff part time and is encouraged that it may happen in the near future.

ACTION ITEMS

APPROVE POLICY AND PROCEDURE – *Cindy Schmall, COO*

Ms. Schmall presented an overview of the policy and its revisions. This policy waives the co-pay fee for employees and their immediate family who are covered under our insurance plans when using clinic services. Director Mondary asked if we have the capability to collect statistics to determine how many employees are using our services; Ms. Schmall indicated that could be done.

- **Motion 21-33:** Director Evans motioned to approve P&P HR-200 Employee Discounts (*revised*), second by Director Monday; motion passed by unanimous vote.

Ms. Combs presented an overview of policy LD-200 and its purpose. She stated that she consulted with legal and was informed that the law has changed how districts can sell real property. There was no discussion.

- **Motion 21-34:** Director Evans motioned to approve P&P LD-200 District Surplus Real Property (*new*), second by Director Mondary; motion passed by unanimous vote.

APPROVE DISTRICT OPERATIONS BUDGET – *Jackie Combs, CEO*

Ms. Combs presented a brief overview of the budget. There was no discussion.

- **Motion 21-35:** Director Evans motioned to approve the District's Operational Budget for FY2021 as presented, second by Director Mondary; motion passed by unanimous vote.

APPROVE DISTRICT CAPITAL BUDGET – *Jackie Combs, CEO*

- **Motion 21-36:** Director Evans motioned to approve the District's Capital Budget for 2021 as presented, second by Director Brown; motion passed by unanimous vote.

APPROVE HRSA CAPITAL BUDGET – *Jackie Combs, CEO*

Ms. Combs presented an overview of the budget for the HRSA grant. She explained that HRSA requires approval by the governing board before disbursing the grant monies.

Ms. Schmall narrated a PowerPoint presentation. The grant originates from the federal government's American Rescue Plan and is specific to construction, renovation and projects that would allow the expansion of services. It is a one-time award spanning three years for spend down. The base award was \$500,000 plus \$11 per patient. Our total award is \$602,322.

- **Motion 21-37:** Director Mondary motioned to approve the capital budget for HRSA grant as presented, second by Director Brown; motion passed by unanimous vote.



REPORTS

FINANCIAL REPORTS – *Debbie Anderson, CFO*

Ms. Combs presented Debbie Anderson's financial statements for April 2021.

Visits for April slipped down to 3,278 (last month they were 3,481). Even though they trended downwards, this is still the second highest month of visits for the fiscal year and since COVID starting affecting visits.

Also, \$100,000 was spent that met criteria for the Rural health stimulus monies in April, although this included some one-time expenses that won't be incurred in either May or June. However, the plans discussed to spend down the stimulus monies were not being implemented until May. Remaining stimulus monies last month for rural health were at \$326,118 and for this month they are at \$226,097. In addition, a private grant was due to end on April 30 and we were able to obtain an extension so that we could try to spend down 100% of those monies.

The change in net position for the clinics unfortunately was a large loss. Due to the significance of the loss, it warrants a bit of discussion. Table A (*at the end of this packet*) shows the clinics change in net position month by month.

Patient services revenue is actually higher than most months to date. Contractuals is comprised of real & estimated. Real was quite a bit higher because the income for past couple of months was significantly higher (and remember, real contractuals are booked into the general ledger when the payment hits, which is usually 2-3 months after the service). Additionally, estimated contractuals are up due to adjustments that should have been placed in March were placed in April as well as due to there being higher income. When this adjustment is made, net patient services revenue lands at about \$565,000, more in line with expectations that correlate to visits (IE: Visits were the second highest of the year, and revenue is only about \$7,000 from being the second highest of the year). When net patient income is combined with grant revenue & other revenue, it is the fourth highest month of the fiscal year. (and would be the second highest if you discounted 1st five revenue included in October and November, which isn't in April revenue). In short, revenue really is not the main issue for the loss for the month.

When we look at expenses, however, expenses as a percentage of revenue increased for April. There were a couple of large one-time expenses, there is additional expenses due to April being a third payroll month, new rates of pay (raises) started in April, and staffing is settling back to more normal levels. Based on the deep dive analysis, it is not expected that May and June will be as large of a loss as April. However, this is dependent upon grant income being recognized and visits trending upwards and not downwards.

Consolidated April 2021 operating loss after allocation came in at \$(142,950) and the change in net position came in at \$(46,759), both of which were below budgeted expectations.

Non-clinic operating income after allocation came in at \$42,824 and the change in net position came in at \$139,016, both of which were above budgeted expectations. Year to date non-clinic operating income after allocation came in at \$151,809, and the change in net position came in at \$615,222, both of which were below budgeted expectations.

April 2021 operating loss after allocation came in at \$(185,775), and the change in net position also came in at \$(185,775), both of which were below budgeted expectations. Year



to date clinic operating loss after allocation came in at \$(237,088), and the change in net position came in at \$(267,493), both of which were below budgeted expectations

- **Motion 21-29:** Director Evans motioned to accept the financial report as presented, second by Director Brown; motion passed by unanimous vote.

MORONGO BASIN HEALTHCARE DISTRICT UPDATE – Jackie Combs, CEO

Ms. Combs referred the board to the agenda packet for her report. There were no questions.

CALENDAR REVIEW AND COORDINATION

The calendars for the Board of Directors were reviewed and coordinated.

- CHC board meeting is Thursday, June 10, 2021
- June 29 is a District special board meeting to appoint to the board's vacant seat

DIRECTOR COMMENTS

- Director Brown: "Everything seems to be moving forward well. "
- Director Evans: She thanked staff and Linda Evans for their reports. She stated, "I am very proud and pleased with the strategic plan; that it is becoming more evidenced based and specific to our Basin. I am proud of the healthcare District that is willing to look for solutions to difficult issues. I commend our healthcare staff and their compassion and dedication that I have experienced from them; it's comforting to see how they are caring for our community."
- Director Mondary: He will be back in the Basin on July 1. "I appreciate all the work that staff does and that my peer board members come prepared to these meetings."
- Director Greenhouse: Thanked Cindy Schmall for the capital grant information.

MEETING ADJOURNED TO CLOSED SESSION at 7:14 p.m.

- Pursuant to Government Code section 54957 of the Health and Safety Code: Report involving Personnel: Public Employment, CEO. Projected disclosure is July, 2021.

MEETING ADJOURNED TO OPEN SESSION at 8:55 p.m. Director Greenhouse directed staff to pursue an employment agreement with the selected CEO candidate.

MEETING ADJOURNED

The meeting was adjourned at 9:00 p.m.

Board meeting minutes recorded by K. Graley, Board Clerk.


Dianne Markle-Greenhouse
President


Greg Brown
Secretary