

**BOARD OF COMMISSIONERS
PUBLIC HOSPITAL DISTRICT NO. 1 OF PEND OREILLE COUNTY**

April 24, 2025

In Attendance: Commissioners: Lois Robertson, Susan Johnson, Melanie Kiss, Becky Walrath, Lynnette Elswick; Executive Officers: Kim Manus, Joseph Clouse, Jenny Smith, Others: RaeLynn Wellman, Rhi Drake, Jane Tilley, Cassie Wise, Tina Batsch, Josh Johnson, Jeremy Lewis, DO; Jeremy Lamecker, Trina Gleese, Karen Knorr, Casey Scott, Rachel Davis, Phillip Ventress, Ashley Carstens, Bradley White

CALL TO ORDER:

Vice Chairperson Johnson called the meeting to order at 9:02 a.m.

READING OF LEGAL NOTICE:

The regular meeting legal notice was distributed as required.

APPROVAL OF AGENDA / CONSENT ITEMS:

The Meeting Agenda, Auditors Reports and Uncompensated Report (Consent Packet) were approved via motion made, seconded, and passed unanimously.

Bad Debt/Charity: April, inclusive District Write-off: \$ 26,390.15

APPROVAL OF PREVIOUS MEETING MINUTES,

March 17th, minutes were approved via a motion made, seconded, and unanimously approved.

March 21st, minutes were approved via a motion made, seconded, and unanimously approved.

BUSINESS FROM THE AUDIENCE:

Jenny Smith and Josh Johnson presented the Foundation Annual Report.

State Auditors Exit Conference: The SAO presented the results from the independent Accountability audit of Newport Hospital and Health Services from January 1, 2022, to December 31, 2023. The following areas were examined based on risk assessment for the years ended December 31, 2023, and 2022: Procurement – purchases; Accounts payable – general Disbursements; Payroll – gross wages for patient advocate employees; Conflict of interest – hiring process; Open Public Meetings, Compliance with minutes, meeting and executive session requirements; Financial condition – reviewing for indications of financial distress. The audit resulted in no findings. In those selected areas, the SAO indicated District operations complied, in all material respects, with applicable state laws, regulations, and its own policies, and provided adequate controls over the safeguarding of public resources. Exit recommendations for management's consideration were presented as Exit items. These Exit Recommendations have been added to the Board packet as a reference document.

COMMITTEE REPORTS:

Finance: Jane Tilley, Controller, presented the financial packet. Highlighting days cash on hand is sitting at 109.8. Overtime was down this pay period. Express Care saw 500 patients in January, February and March. Swing beds have been down due to the team being more selective and ensuring when accepting a transfer payment to be expected.

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Revenue Cycle Report: Cassie Wise reviewed the Revenue Cycle Report. Highlighting the team is on track to hit the 45-day goal this month, then they will recast their goal. April heavy focus on 4DX goal. There still haven't been any large scale write offs as of yet. Hoping to have step one of MAT award goal by June/July.

Cassie also reviewed the Residential Care Revenue Cycle Report. Gross revenue increased last month because of collections. Admits are coming in, discharges are happening just as quickly.

The test case for the Idaho resident that started in respite care was accepted into WA Medicaid after 12 days, the family received a refund for the rest of the month.

Quality & Compliance: Rhi Drake reviewed the quality report. She advised surgery is not receiving patient experience scores due to issues attributed to Providence EPIC. Carol has been working on resolving these issues with the Providence team. She shouted out PFS and EVS for their progress on their PDSA projects. The Quality plan will be presented in May.

Strategy/Marketing/Community Engagement: Jenny Smith advised marketing is taking a slow start in hopes of having exciting announcements that will need heavily marketed. Keokee is going to work with Josh on SEO.

The Community Health Needs Assessment and Community Health Improvement Plan are presented as action items for approval.

Administrative Services Report: Joseph Clouse reviewed the administrative services report. He advised overtime was almost cut in half from last pay period - \$15K was \$32K last pay period. Still hoping not to exceed the goal of \$500K this year.

Blue Room Architect and planning committee are scheduled to meet May 6th to discuss the facility master plan.

Clinical Services Report: Tina Batsch reviewed the clinical services report. She highlighted lab hit a historical record of billable tests last month with 8937 tests. Rehab had 930 visits. Radiology is now available 7 days a week and is going well.

CEO Report – Kim Manus discussed the CEO report. She advised that the CFO has been hired, Justin Peters. He is scheduled to start May 12th.

360 Evaluations have been sent out for the clinic providers; they are due May 16th. The evaluations were rolled out via UKG and are anonymous. This is the first step towards the employee survey in August.

Seeber's is now closed for lunch for 30 minutes and this has been well received by the community. The need to close was attributed to WA L&I regulatory requirements. Starting this July, reports will be sent to L&I with numbers and an explanation on why employees missed their breaks/lunch. Beginning in July 2026, there will be fines associated when employees are not taking their scheduled breaks/lunches.

Cori, Pharmacy Director, has been working with CPS on an opportunity to utilize the 340b program to purchase meds for dispensing in the hospital outpatients. Based on their analysis, an opportunity to purchase the top twelve (12) 340b qualified medications would result in estimated annual savings of \$357K.

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Kim provided an update on projects. The parking lot bid opening is scheduled for May 6th. The board agreed that the clinic expansion is a priority project and would like to move forward with obtaining final architectural drawings at an estimated \$80K. Kim reported Blue Room did complete a preliminary review to convert the business office into childcare space and the drawings were included in the board packet. Kim stressed consideration to move forward with childcare would be contingent on financial proforma showing revenue potential in providing this service.

Kim met with WSHA they are still unsure if the Safety Net Assessment Program will be approved in Washington. SLT is reviewing the 2025 budget to establish opportunities for operating efficiencies, as well as seeing if there are any opportunities to bring in more revenue.

Due to inconsistency with Providence's ability to provide weekly ECHO service at Newport, discussions are being held with Providence on developing ECHO capability internally. Kim explained our MRI vendor, Heritage Imaging, is offering this as a new service line with a "per click" fee; however, there is a possibility to add a module to our existing Ultrasound machine and have employed technicians provide the service. Providence has agreed to partner with Newport to provide support with technician training, as well as continuing to offer support to perform the professional reads for Newport exams.

On the surgical front, Schicker has indicated he will be offering surgery on Fridays due to recent OR slot time availability. Kanning and Williams' partner, Dr. Robbins, is in the process of being credentialed with plans to sign a contract to join the Newport rotation for general surgery.

ACTION ITEMS:

Motion to approve the 2025 Community Health Needs Assessment and Community Health Improvement Plan was made, seconded and unanimously approved.

Motion to approve appointing Rhi Drake as the Privacy Officer was made, seconded and unanimously approved.

Motion to approve the potential capital purchase to upgrade the Ultrasound unit with the ECHO module in the amount of \$28,784 plus tax and shipping was made seconded and unanimously approved.

Motion to approve the Resolution 2025-07 to surplus the shed was made, seconded and unanimously approved.

EXECUTIVE SESSION

As permitted by RCW 42.30.110, the meeting was moved to the Executive Session at 10:32 am for approximately fifteen minutes to consider information regarding staff privileges or quality improvement committees under RCW [70.41.205](#)

RETURN TO OPEN SESSION

The Commission returned to Open Session at 10:47 am.

NEXT MEETING DATE

The next meeting will be on May 22, 2025, at 8:30 am.

Per the recommendation of the Medical Staff Executive Committee, the Board of Commissioners approved the following privileges by motion made, seconded, and passed unanimously:
Re-Appointment – Off Site Radiology Mariam Shehata, MD – NPI #1457974818- 04.28.2025-04.28.2027
Re-Appointment – Off Site Radiology Corey Ho, MD – NPI #1598041162– 04.25.2025-04.25.2027
Re-Appointment – Off Site Radiology Ryne Dougherty, MD – NPI #1477915890 – 04.28.2025-04.28.2027

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Re-Appointment – Off Site Radiology Amy Newton, MD – NPI #1518314765– 04.28.2025-04.28.2027
Re-Appointment – Off Site Radiology Jedidiah Schlung, MD – NPI #138600858 – 04.28.2025-04.28.2027
Re-Appointment – Off Site Radiology Matthew Curtis, MD – NPI #1629423710 – 04.28.2025-04.28.2027
Re-Appointment – Off Site Radiology Samuel Plesner, DO – NPI #158807627 – 04.28.2025-04.28.2027
Re-Appointment – Off Site Radiology Jennifer Xiao, MD – NPI#1366803256 - 04.28.2025-04.28.2027

ADJOURNMENT

There being no further business, the meeting was adjourned at approximately 10:48 am.

Minutes recorded by RaeLynn Wellman, Executive Administrative Assistant.


Lynnette Elswick, President
Board of Commissioners


Melanie Kiss, Secretary
Board of Commissioners