Chief Executive Officer Chris Bjornberg



#### **Board of Directors**

Abe Hathaway, President Jeanne Utterback, Vice President Tom Guyn, M.D., Secretary Tami Humphry, Treasurer Lester Cufaude, Director

# Finance Committee Meeting Agenda

September 27, 2023 at 11:00 AM Fall River Lions Club 44256 Highway 299 E McArthur, CA 96056

In observance of the Americans with Disabilities Act, please notify us at 530-336-5511, ext 1264 at least 48 hours in advance of the meeting so that we may provide the agenda in alternative formats or make disability-related modifications and accommodations. The District will make every attempt to accommodate your request.

#### **Attendees**

Tami Vestal-Humphry, Chair, Board Member Abe Hathaway, Board Member Chris Bjornberg, CEO Travis Lakey, CFO

1	CALL MEETING TO ORDER	Approx. Time Allotted
2	CALL FOR REQUEST FROM THE AUDIENCE - PUBLIC COMMENTS OR TO SPEAK TO AGENDA ITEMS	
3	APPROVAL OF MINUTES	

3	APPK	APPROVAL OF IVIINOTES								
	3.1	Regular Meeting – August 30, 2023	Attachment A	Action Item	2 min.					
4	FINAN	NCIAL REVIEWS/BUSINESS								
	4.1	August 2023 Financials	Attachment B	Action Item	15 min.					
	4.2	Accounts Payable (AP)/Accounts Receivable (AR)	Attachment B	Action Item	15 min.					
5	ADMI	NISTRATIVE REPORT	Information	5 min.						
6	OTHE	R INFORMATION/ANNOUNCEMENTS								

7 **ADJOURNMENT:** Next Regular Meeting – October 25, 2023

Posted 09/22/2023

Public records which relate to any of the matters on this agenda (except Closed Session items), and which have been distributed to the members of the Board, are available for public inspection at the office of the Clerk to the Board of Directors, 43563 Highway 299 East, Fall River Mills CA 96028. This document and other Board of Directors documents are available online at <a href="https://www.mayersmemorial.com">www.mayersmemorial.com</a>.

**Chief Executive Officer** Chris Bjornberg



**Board of Directors** Abe Hathaway, President Jeanne Utterback, Vice President

Tom Guyn, M.D., Secretary Tami Humphry, Treasurer Lester Cufaude, Director

# Board of Directors Finance Committee Minutes

August 30, 2023 FR Boardroom

These minutes are not intended to be a verbatim transcription of the proceedings and discussions associated with the business of the board's agenda; rather, what follows is a summary of the order of business and general nature of testimony, deliberations and action taken.

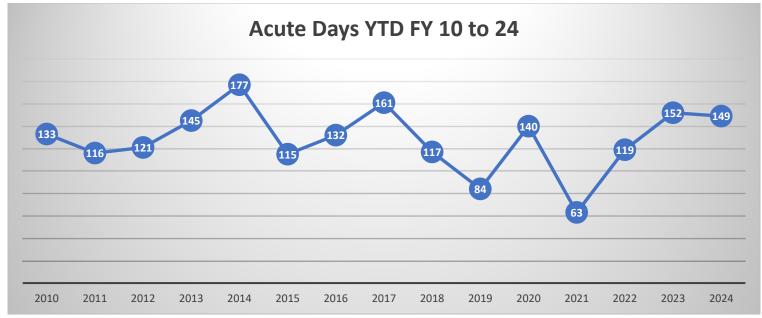
		MEETING TO ORDER: Tami Humphry called the meeting to order BOARD MEMBERS PRESENT:	STAFF PRESENT:		
		Tami Vestal-Humphry, Committee Chair Abe Hathaway, Director	Chris Bjornberg, CEO Travis Lakey, CFO		
		Abe natriaway, Director	Ryan Harris, COO		
		ABSENT:	Jessica DeCoito, Board Clerk		
		ADJENT.	Jessica Decoito, Board Cierk		
2	CALL	FOR REQUEST FROM THE AUDIENCE – PUBLIC COMMENTS OR	O SPEAK TO AGENDA ITEMS - None		
3	APPR	OVAL OF MINUTES: July 26, 2023 – minutes attached. Motion m	oved, seconded and carried.  Hathawa  Humphry		Approved by All
4	FINA	NCIAL REVIEWS			-
	4.1	July 2023 Financials: Audit went really well. We are about 80% earlier than normal. Great collection month. AR days are also lo into Cerner and that will change. Met with the GPO yesterday a have are not covered in the agreement, so we will look at switch Accountant starts this next Tuesday, September 5 <sup>th</sup> . Visiting Nu will be putting plans into place. Registry staff is up for expenses that cost down next month. Housing figures show that we are sufficer Lodge, Employee Housing.  Motion moved, seconded and carried to approve financials.  Accounts Payable (AP) & Accounts Receivable (AR): A/R Days 717,495.	ooking very good but will transit over and found that 20% of the items we he those items/vendors. New arse Program was approved and we but new hires should help bring aving money by owning the Pit  Hathawa Humphry		Approved by All
	4.3	Board Quarterly Finance Review: Motion moved, seconded an	d carried to full board for approval. Hathawa Humphry		Approved by All
5	ADM	INISTRATIVE REPORT: Meeting with Rural CAH and Rural Hospita	ls with CHA took place yesterday. A lot of discuss	ion was	on SB 525
	Insur	nimum wage increase to \$25/hr. Our concerns of not being repres ance Coalition) this morning to talk about our health insurance plance information will be shared once we receive the official propo	an for our employees. The numbers proposed are		•
6	OTHE	R INFORMATION/ANNOUNCEMENTS: None			
7	ADJO	URNMENT – 11:46 pm			
	Next	Finance Committee Meeting: August 30, 2023			

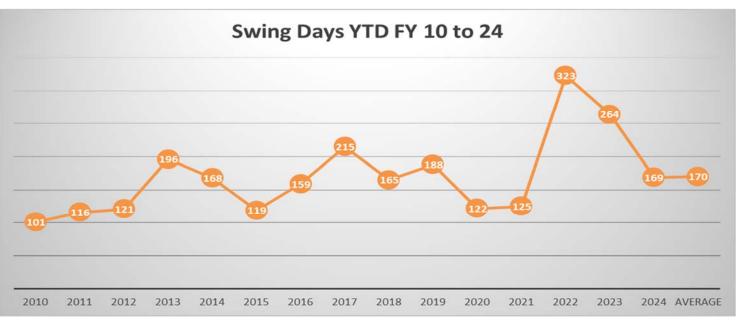
# Finance Notes August FY 24

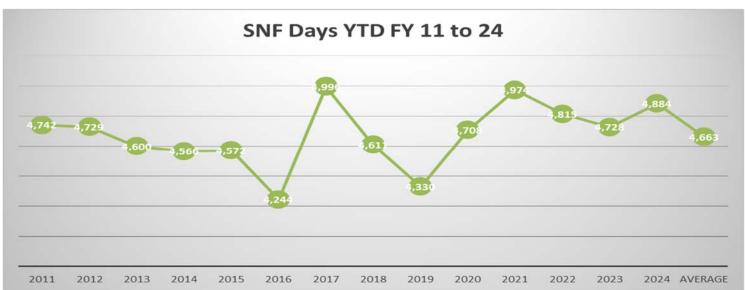
Ratios	FY 24	FY 23 Average	
Cash on Hand	188	182	Average PY
Net Income	-260,291	328,477	Average PY
Current Ratio	7		N/A
AR Days	53.84	61	Average PY
Accounts Payable	1,345,771	651,656	Average PY
Daily Gross Revenue	150,800	142,873	Average PY
,	,	,	
% of Gross Revenue Collected	69%	68%	Average PY

- 1) August was a rough month as due the way Paycom comes across it recognizes the third payroll period in August and some other items I will discuss in the Income Statement notes.
- 2) We are having some growing pains with the new system so the packet is smaller than normal while we work out some kinks.
- 3) The Phase 5 Provider Relief Reporting is completed. As usual we have more than enough expenses to cover the supplemental payments, so I didn't have to use any alternative revenue methods which are more likely to trigger audits. HRSA does have five years to go back to audit any of our submittals which I'm not really worried about as we have Paragon on our local servers so I can get in and get that info if needed.
- 4) I'm writing my notes as we are having Cerner Go-Live Week which is extremely disruptive to the revenue cycle whenever you switch EMRs. Revenue will drop temporarily as we work out all the charge capture processes in each department. Department managers are responsible for reviewing their charges daily to identify items not being charged. Cerner is here next week as well to help us out as bills don't drop for five days so billing won't have anything to work on in the new system until Monday. There is always a sizable AR day increase that takes months to work through given the new system plus the old systems (Paragon & Epic) that AR is still being worked.
- 5) Fall is a bit of a slog every year as I'm currently working on the annual audit, 22 Medicare Desk Review (mini audit), 22 Medi-Cal Desk Review and the Medicare, Medi-Cal and Hospice Cost Reports.
- 6) Cash is going to dip by approximately 1.1 million in October as we have our first HQAF IGT. The state is supposed to prefund the Medi-Cal Managed Care Plans so we should be paid within a month (approximately 3.3 million) vs the normal 90 day + turnaround.
- 7) Jack and I are taking a weeklong Cerner Reporting class in October. Hopefully this will get us up to speed on any reports we are required to do throughout the year.
- 8) We have officially signed on with our new insurance broker for our health insurance and benefits. This will save us 15 to 24 percent vs the cost of renewing with our current plan in January. So worst case scenario our insurance costs are the same as they are now. Libby and Kelly now have quite a bit of work to get all the information to Rural Hospital Insurance of America given the quick turnaround. Hoping to work with this broker again on our other insurances as well to see if we can get some savings on property, liability, or workers comp.
- 9) Our new Group Purchasing Organization representatives will be onsite next month to meet with all our clinical managers about their supply spend and some areas of opportunity going forward.

# Statistics YTD through Period 2 Compared to Historical Performance

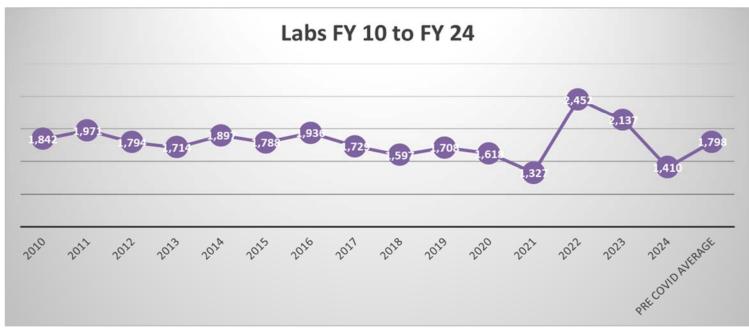


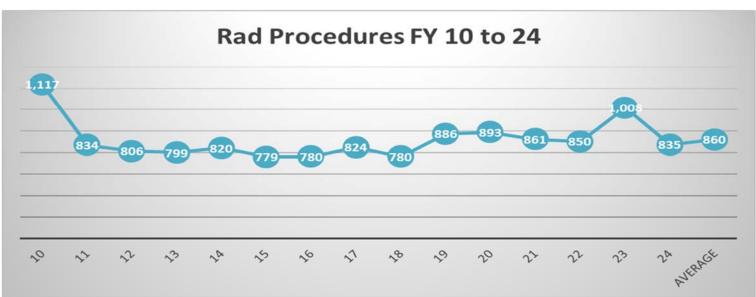


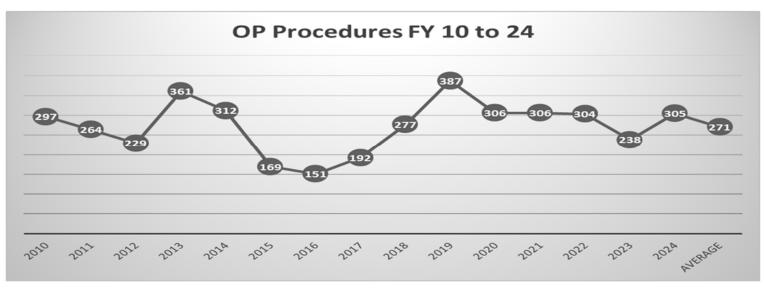




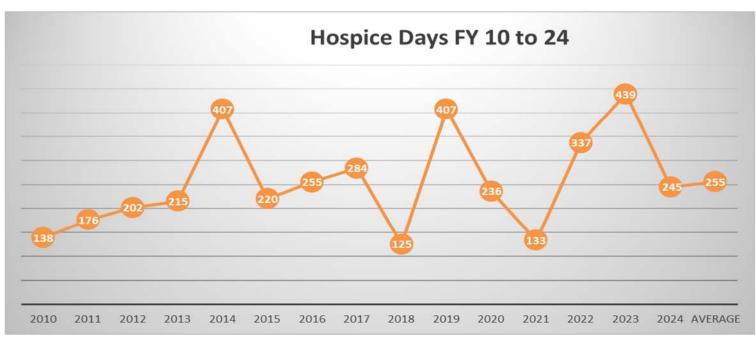
When ER visits dip it's fairly common for Lab and Rad to dip as well given a % of those services are driven by the ER

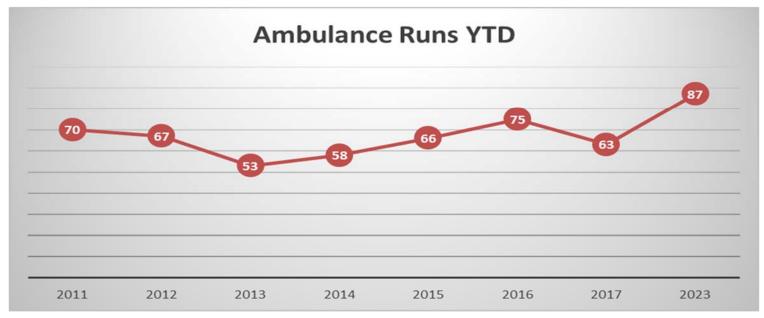


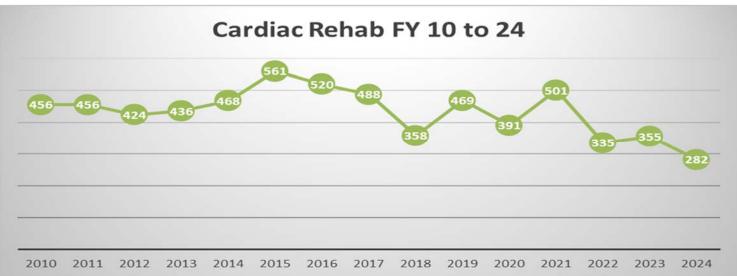












Clinic visits have steadily been going up as we have 98 more than the prior August.



## **Income Statement**

- 1) Revenue was down compared to August prior year in Acute and Outpatient Revenue.
- 2) Contractuals are lower due to us accruing for two HQAFs this year.
- 3) Salaries and Wages are up considerably due to the third pay period. Fortunately this only happens twice per year.
- 4) Benefits are up due to a price increase in January.
- 5) Supplies are up due Surgery restocking and some larger pharmacy spend. Typically we averaged 336K last year.
- 6) SNF Travelers are the highest I've ever seen for a two month period. I know there are some meetings occurring to discuss this.
- 7) On the positive side travelers overall compared to the same period last year are down 10K even with SNF being up 200K.
- 8) Repairs and Maintenance are up due to some plumbing repairs.
- 9) Utilities are up due rate increases.
- 10) Insurance costs are up due Workers Comp being a % of wages, and higher property insurance renewals.
- 11) Depreciation costs are up due to the seismic wall project and mobile clinic.
- 12) Non-Operating Revenue is up due to higher pharmacy collections.
- 13) Given the third payroll and SNF Travelers losing 260K isn't that bad.

## **Balance Sheet**

- 1) Cash is down as we had an expense heavy month.
- 2) Restricted Cash is up as the end of the month was the day prior to our USDA bi-annual debt payment.
- 3) The Medicare/Medi-Cal Settlement will increase monthly until we receive our annual supplemental payments.
- 4) Subscription Based Assets are up due to some larger software expenses we are required to recognize as assets while we have the right to use them.
- 5) Accounts Payable is up due to some larger traveler invoices coming in after month end.
- 6) The HQAF and Rate Range Payables are part of the other side of the Medi-Care/Medi-Cal Receivable.
- 7) Long Term and Current Subscription Liabilities are the offset of our Subscription Based Assets.
- 8) Our Fund Balance is a very robust 42 million.
- 9) Our Current Ratio is 7 which is well ahead of what most lenders require.

August .		Variance  5 (3) (2) (3)  45 (37) 40	VOLUME: DISCHARGES Acute Swing Bed Skilled Nursing Care (DISCHG) Observations  PATIENT DAYS Acute Swing Bed Skilled Nursing Care	FY 2024 YTD  Actual  27 13 4 9  149 169 4,884	FYE 2023	(5) (7) 1 (8) (3) (95)	% Increase or Decrease -15.61% -35.01% 33.32% -47.11%
2023 2 August Actual A  16 5 1 3 97 66 2,462 6.06 13.20 3.13 2.13	ACTUAL 2023 July  Actual  11  8 3 6  52 103 2,422	Variance  5 (3) (2) (3)  45 (37) 40	VOLUME:  DISCHARGES  Acute  Swing Bed  Skilled Nursing Care (DISCHG)  Observations  PATIENT DAYS  Acute  Swing Bed  Skilled Nursing Care	YTD  Actual  27 13 4 9  149 169	32 20 3 17	(5) (7) 1 (8)	-15.61% -35.01% 33.32%
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August  Actual  Actual	July Actual  11  8  3  6  52  103  2,422	5 (3) (2) (3) 45 (37) 40	VOLUME:  DISCHARGES  Acute  Swing Bed  Skilled Nursing Care (DISCHG)  Observations  PATIENT DAYS  Acute  Swing Bed  Skilled Nursing Care	YTD  Actual  27 13 4 9  149 169	32 20 3 17	(5) (7) 1 (8)	-15.61% -35.01% 33.32%
Actual A  16 5 1 3 97 66 2,462  6.06 13.20  3.13 2.13	11 8 3 6 52 103 2,422	5 (3) (2) (3) 45 (37) 40	DISCHARGES Acute Swing Bed Skilled Nursing Care (DISCHG) Observations  PATIENT DAYS Acute Swing Bed Skilled Nursing Care	27 13 4 9	32 20 3 17	(5) (7) 1 (8)	-15.61% -35.01% 33.32%
16 5 1 3 97 66 2,462 6.06 13.20	11 8 3 6 52 103 2,422	5 (3) (2) (3) 45 (37) 40	DISCHARGES Acute Swing Bed Skilled Nursing Care (DISCHG) Observations  PATIENT DAYS Acute Swing Bed Skilled Nursing Care	27 13 4 9	32 20 3 17 152 264	(5) (7) 1 (8)	-15.61% -35.01% 33.32%
16 5 1 3 97 66 2,462 6.06 13.20	11 8 3 6 52 103 2,422	5 (3) (2) (3) 45 (37) 40	DISCHARGES Acute Swing Bed Skilled Nursing Care (DISCHG) Observations  PATIENT DAYS Acute Swing Bed Skilled Nursing Care	27 13 4 9	32 20 3 17 152 264	(5) (7) 1 (8)	-15.61% -35.01% 33.32%
5 1 3 97 66 2,462 6.06 13.20	8 3 6 52 103 2,422	(3) (2) (3) 45 (37) 40	Acute Swing Bed Skilled Nursing Care (DISCHG) Observations  PATIENT DAYS Acute Swing Bed Skilled Nursing Care	13 4 9 149 169	20 3 17 152 264	(7) 1 (8)	-35.01% 33.32%
5 1 3 97 66 2,462 6.06 13.20	8 3 6 52 103 2,422	(3) (2) (3) 45 (37) 40	Swing Bed Skilled Nursing Care (DISCHG) Observations  PATIENT DAYS Acute Swing Bed Skilled Nursing Care	13 4 9 149 169	20 3 17 152 264	(7) 1 (8)	-35.01% 33.32%
97 66 2,462 6.06 13.20 3.13 2.13	3 6 52 103 2,422	(2) (3) 45 (37) 40	Skilled Nursing Care (DISCHG) Observations  PATIENT DAYS Acute Swing Bed Skilled Nursing Care	149 169	152 264	(3)	33.32%
97 66 2,462 6.06 13.20 3.13 2.13	52 103 2,422 4.73	(3) 45 (37) 40	Observations  PATIENT DAYS Acute Swing Bed Skilled Nursing Care	149 169	17 152 264	(8)	
97 66 2,462 6.06 13.20 3.13 2.13	52 103 2,422 4.73	45 (37) 40	PATIENT DAYS Acute Swing Bed Skilled Nursing Care	149 169	152 264	(3)	-47.11%
66 2,462 6.06 13.20 3.13 2.13	103 2,422 4.73	(37) 40	Acute Swing Bed Skilled Nursing Care	169	264		
66 2,462 6.06 13.20 3.13 2.13	103 2,422 4.73	(37) 40	Acute Swing Bed Skilled Nursing Care	169	264		
66 2,462 6.06 13.20 3.13 2.13	103 2,422 4.73	(37) 40	Swing Bed Skilled Nursing Care	169	264		
2,462 6.06 13.20 3.13 2.13	2,422 4.73	1	Skilled Nursing Care			(95)	-2.01%
6.06 13.20 3.13 2.13	4.73	1	_	4,884	4,728		-36.01%
3.13 2.13			LENGTH OF STAY			156	3.32%
3.13 2.13			LENGTH OF STAY				
3.13 2.13							
3.13 2.13	12.88		Acute	5.52	4.75	1	16.22%
2.13		0	Swing Bed	13.00	13.20	(0)	-1.51%
2.13			Skilled Nursing Care				
2.13			9 -				
2.13			AVERAGE DAILY CENSUS				
2.13	1.68	1	Acute	4.81	2.45	2	96.22%
	3.32	(1)	Swing Bed	5.45	4.26	1	28.02%
13.42	78.13	1	Skilled Nursing Care	157.55	76.26	81	106.62%
	70.10		Chilled Harsing Care	107.00	70.20	01	100.02 /
			ANCILLARY SERVICES				
0	0	0	Surgery Inpatient Visits	0	0	0	#DIV/0!
0	0	0	Surgery OP/ procedure visits	0	3	(3)	-100.01%
337	382	(45)	Emergency Room Visits	719	827	. ,	-13.11%
						(108)	28.22%
138	167	(29)	Outpatient Services Procedures	305	238	67	
767	643	124	Laboratory Visits	1410	2,137	(727)	-34.01%
436	399	37	Radiology Procedures	835	1,008	(173)	-17.21%
103	142	(39)		245	439	(194)	-44.21%
238	149	89	Physcial Therapy visits	387	458	(71)	-15.51%
139	187	(48)		288	355	(67)	-18.91%
54	60	(6)	Telemedicine visits	114	75	39	52.02%
22	13	9	Admissions from ER	35	44	(9)	-20.51%
13	15	(2)	Transfers from ER	28	37	(9)	-24.31%
787	708	79	Clinic Visits	1495	1,261	234	18.62%
46	41	5	Ambulance	87	-	87	#DIV/0!
			PRODUCTIVITY:				
			Productive FTE's				
9.50	10.02		Nursing - Acute	9.81	22.07		
39.69	37.38		Long Term Care	38.30	56.81		
52.02	51.63		Ancillary	51.78	46.99		
66.53	61.97		Service	63.79	77.15		
167.74	161.00		Total Productive	163.68			
79.03	82.27		Non-Productive FTE's	80.97			
246.77	243.27		Paid FTE's	244.65			
			PRODUCTIVE FTE PER				
2.46	2.46		ADJUSTED OCCUPIED BED	2.40	2.92		

# **MAYERS MEMORIAL HOSPITAL**

Statement of Revenue and Expenses Fiscal Year Ending JUNE 30, 2024 COMPARISON TO ACTUAL

2023 AUGUST Month Actual	2022 AUGUST Month Actual	Variance	Patient Revenue	FY2024 2023 AUGUST YTD Actual	FY2023 2022 AUGUST YTD Actual	Variance	Increase Decrease %
1,031,063	1,154,046	(122 742)	Acute Revenue	1,893,445	2,354,166	(460,721)	-19.57%
1,383,805	1,236,608	· · · · · · · · · · · · · · · · · · ·	Revenue - SNF Inpatient	2,737,152	2,347,813	389,339	16.58%
0	0		Revenue - Hospice Inpatient	_,: : : , : : = 0	0	0	
2,526,369	2,970,517		Outpatient Revenue	5,119,940	5,459,853	(339,913)	-6.23%
4,941,237	5,361,171	. , ,	Patient Revenue	9,750,537	10,161,832	(411,294)	-4.05%
			DEDUCTIONS FROM REVENUE				
(565,994)	(1,035,180)	469,185	Contractuals- Care/cal	(1,023,676)	(1,394,181)	370,504	-26.58%
(246,297)	(180,640)		Contractuals- PPO	(522,946)	(742,831)	219,885	-29.60%
(=::,=::)	(8,099)		Charity and Write-Offs	(1,241)	(8,099)	6,858	-84.68%
(50,659)	(138,720)		Admin Adjustments and Employee Discounts	(218,597)	(260,862)	42,264	-16.20%
(172,620)	(118,769)		Provision for Bad Debt	(305,973)	(189,549)	(116,423)	61.42%
(1,035,571)	(1,481,407)	445,836	Total Deductions	(2,072,434)	(2,595,522)	523,088	-20.15%
27,986	296,958	(268.971)	Other Operating Revenues	68,115	330,630	(262,515)	-79.40%
3,933,653	4,176,721		Net Revenue	7,746,218	7,896,940	(150,721)	-1.91%
			OPERATING EXPENSES				
1,989,077	1,362,239		Salaries & Wages	3,592,502	2,861,343	731,159	25.55%
367,299	331,348	,	Employee Benefits	708,239	707,840	399	0.06%
457,291	294,409		Supplies	813,310	557,792	255,517	45.81%
206,146	127,278	· · · · · · · · · · · · · · · · · · ·	Professional Fees	308,551	229,367	79,184	34.52%
112,539	141,009	· · · · · · · · · · · · · · · · · · ·	Other Purchased Service Nurse Travel Acute	154,296	301,447	(147,151)	-48.81%
447,014	246,771	200,243	Other Purchased Service Nurse Travel SNF	793,120	474,098	319,022	67.29%
71,040	223,868	(182,468)	Other Purchased Service Travel Ancillary	281,912	450,532	(168,621)	-37.43%
192,855	205,372	(668,190)	Other Purchased Service	385,636	325,145	60,491	18.60%
58,616	52,548	6,067	Repairs & Maintenance	80,158	76,621	3,537	4.62%
96,580	61,760	34,819	Utilities	196,473	84,861	111,612	131.52%
27,578	19,729	7,849	Insurance Other	134,161	36,505	97,656	267.51%
265,374	67,015	198,359	Other Expenses	425,941	144,571	281,370	194.62%
5,578	5,282	296	Interest Expense	8,012	11,714	(3,702)	-31.60%
156,405	132,880	23,524	Depreciation Expense	312,938	257,439	55,498	21.56%
5,227	6,858	(1,631)	Rental/Lease	16,942	11,146	5,796	52.00%
4,458,618	3,278,367	379,368	Total Operating Expenses	8,212,191	6,530,422	1,681,769	25.75%
(524,965)	898,354	(622,436)	Income From Operations	(465,972)	1,366,517	(1,832,489)	-134.10%
486,308	312,651	173,657	Non-Operating Revenue	921,104	590,634	330,470	55.95%
38,921	763	,	Interest Income	202,369	44,501	157,868	354.75%
260,556	193,566	66,989	Non-Operating Expenses	521,469	389,739	131,730	33.80%
264,673	119,848	144,826	Total Non-Operating	602,004	245,396	356,608	145.32%
(260,291)	1,018,202	(477,611)	Net Income	136,031	1,611,913	(1,475,882)	-91.56%