



# Finance Committee

## August 14, 2019

**Bartlett**  
Regional Hospital



# Bartlett Regional Hospital

FINANCE COMMITTEE MEETING  
August 14, 2019 – 7:00 a.m.  
Bartlett Regional Hospital – Boardroom  
Agenda

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Mission Statement

Bartlett Regional Hospital provides its community with quality, patient-centered care in a sustainable manner.

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CALL TO ORDER

APPROVAL OF MINUTES – [July 10, 2019](#)

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<u>Old or New</u>	<u>Desired Response</u>
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1. June 2019 Financial Statements Review

New

Action

A. [June Financial Review](#)

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2. Other

A. [Capital Projects – Billy Gardner](#)

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**Next Meeting: September 11, 2019 @ 7:00 am in BRH Boardroom**

Committee member comments / questions

ADJOURN

# Bartlett Regional Hospital

3260 Hospital Drive, Juneau, Alaska 99801 907.796.8900 [www.bartletthospital.org](http://www.bartletthospital.org)

## Finance Committee Meeting Minutes BRH Boardroom – July 10, 2019

**Called to order at 7:00 a.m. by Finance Committee Chair, Dr. Bob Urata.**

**Finance Committee & Board Members:** Dr. Bob Urata (Chair), Mark Johnson, Deb Johnston, Kenny Solomon-Gross

**Staff:** Kevin Benson, CFO, Billy Gardner, COO, Rose Lawhorne, CNO, Chuck Bill, CEO, Dallas Hargrave, HR Director, Scott Chille, IS Director, Megan Costello, CBJ Law, and Megan Taylor, Executive Assistant

***Mr. Johnson made a MOTION to approve the minutes from the June 12, 2019 Finance Committee Meeting. Dr. Urata noted no objections and they were approved.***

### **May 2019 Finance Review – Kevin Benson, CFO**

Mr. Benson explained that Bartlett Regional Hospital didn't perform as well as was expected, financially. In-patient revenues were down, but outpatient revenues were up. This doesn't offset, however, because outpatients create less revenue per individual. BOPS revenue was also up for the month of May. Salaries and wages were \$439,700 over budget, but this is due to an overlap of filling permanent positions while temporary employees finish their contracted terms. Once complete, most of the contracted positions will not be re-recruited.

### **IT Project Updates – Scott Chille**

Mr. Chille presented to the Finance Committee about the current and upcoming projects related to the \$2.5 million capital that has been approved for upgrades. The primary upgrade is the conversion of the current three "silo" system, with a six towers, a large footprint, outdated hardware, and three independently functioning units, to the VxBlock system with three cabinets, increased versatility of storage and utilization capabilities, a smaller footprint, and less demand for power and cooling. Five years of maintenance costs are included in the initial cost. The current setup, once "sanitized" will be sold to slightly offset some of the cost, with an expected return of about \$300,000.

Meditech is being upgraded to "Expanse", which is expected to go live March 2020.

Replacement of network core switches should happen in September, resulting in a major downtime of 8-10 hours.

### **Certified Public Expenditures – Kevin Benson**

Mr. Benson explained that following conversations with Donna Stewart at the State of Alaska, it appears that a 5% cut, as proposed, would affect BRH in the amount of about \$1.5 million. Behavioral health programs are exempt from the cut, as well as Critical Access Hospitals. It was noted that this effect would be drastic due to BRH's substantial Medicaid population. Ms. Stewart looked at the data, and agreed. She and her team came back with the idea of Certified Public Expenditures, which has been in use at other states. This follows a model used in the state of Washington. It uses the Medicare Cost Report, through federal reimbursements, so it doesn't cost the state anything to advocate for this. The drawback is that the reimbursements may not be received by BRH until December 2020. The additional reimbursement would likely be about \$2.1 million, but is dependent on Rural Demonstration Project base

year values, so will change, but this number should be nearly accurate. 2021 is the next base year, as the RDP lasts five years.

It is likely that because Bartlett Regional Hospital is a critical source of behavioral health services for Southeast Alaska, state entities are more willing to offer assistance so that as a company BRH isn't forced to look at areas that aren't producing as much revenue, as expendable.

**Anesthesia Capital Request – Kevin Benson**

Due to director turnover, the need for new machines wasn't known until servicing was requested. Four new anesthesia machines are needed, at a cost of \$70,000 each. Request will be covered by some of the \$2 million of unused capital from FY 2019's budget.

*Mr. Johnson made a MOTION to approve the request for \$281,000, and move the request to the board. Ms. Johnston seconded, and noting no objections, the motion passed.*

**Next Meeting:** August 14<sup>th</sup>, 2019 at 7:00 a.m. in BRH Boardroom

**Adjourned – 8:00 a.m.**

DRAFT

# Bartlett Regional Hospital

3260 Hospital Drive, Juneau, Alaska 99801

907.796.8900

[www.bartletthospital.org](http://www.bartletthospital.org)

DATE: August 8, 2019  
TO: BRH Finance Committee  
FROM: Kevin Benson, Chief Financial Officer  
RE: June Financial Performance

June marked the end of the Fiscal Year for BRH. 2019 was a challenging year both operationally and financially. The year concluded with a number of unusual adjustments both positive and negative but overall finished on a strong note achieving a Net Income of \$1.5 million.

Operationally June was a very busy month. Statistics show Inpatient Days to be 12% greater than budget reversing the trend of not meeting budget volumes for the past 5 months. Outpatient volumes were strong in almost all areas but particularly in observation and surgery. This resulted in Hospital Revenues that were \$800,000 greater than budget. Physician revenues was also very strong exceeding budget by \$319,000.

Deductions were greater than budget as a result of increased revenues and a significant shift of governmental payors to 69% up from the budget target of 65%. As a result, 75% of the \$1 million of additional revenue ended up going to deductions. After discounts Net Patient Revenue finished at only \$240,000 or 2.9% in excess of budget. Expenses exceeded budget by \$2,962,000 or 35.8%. However, \$2.2 million was recording of PERS expense to reflect the On-Behalf funding by the state of Alaska. The expense is offset by recording the funding in Other-Operating Revenue. This resulted in an Operating Loss of \$234,000 well below the budget target Operating Income of \$83,000. Interest Income was understated throughout the year. Final results showed a significant adjustment of \$1.5 million due to increased earnings. Therefore, after Non-Operating Revenue final Net Income was \$1,515,000.

On a year to date basis BRH has a Net Income of \$2,881,000 and finished 13% behind the budget target of \$3,310,000. The year to date Income from Operations is -3.42%, while the final Net Income is 2.84%.

## Significant Items:

- Physician Revenue shows growth in the current year running 21.9% over the prior year.
- BRH received the attached letter indicating the state of Alaska made an Employer On-Behalf Funding to PERS for BRH in the amount of \$2,176,179.
- BRH saw 325 births in 2019 which was 10 more than the prior year. This may not seem significant but it reversed reductions that had been seen in the past two years.



THE STATE  
of ALASKA  
GOVERNOR MICHAEL J. DUNLEAVY

Department of Administration  
DIVISION OF RETIREMENT AND BENEFITS

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July 24, 2019

KAREN A TAUG, ADMMINSTRATOR  
BARTLETT REGIONAL HOSPITAL  
3260 HOSPITAL DR  
JUNEAU AK 99801

Sent via email to: [KTAUG@BARTLETTTHOSPITAL.ORG](mailto:KTAUG@BARTLETTTHOSPITAL.ORG)

RE: FY2019 Employer On-Behalf Funding - PERS ER 219

During the 2018 legislative session, House Bill HB286 (HB286) passed providing on-behalf funding for PERS employer contributions for Fiscal Year 2019 (FY2018). HB286, Section 25 reads as follows:

*(b) The sum of \$135,219,000 is appropriated from the general fund to the Department of Administration for deposit in the defined benefit plan account in the **public employees' retirement system** as an additional state Contribution under AS 39.35.280 for the fiscal year ending June 30, 2019.*

HB286 at <http://www.akleg.gov/PDF/30/Bills/HB0286Z.PDF> (Section 2 and 25).

The Alaska Retirement Management Board approved the actuarially determined rate of 27.58% for FY2019, with HB286 providing an on-behalf rate of 5.58% for each FY2019 employer payroll. On-behalf funding is applied with the processing of each employer payroll with payroll end dates between July 1, 2018 and June 30, 2019 and fully received by the Division by July 15, 2019. A fully received and processable payroll must include payment, an employer summary, and any other required documentation (WIRE and ACH payments must have a corresponding Memo). All such payrolls have been processed, thus we have trued-up your account and made an adjusting entry.

Included is a report detailing the Employer On-Behalf Funding allocated for fiscal year 2019 payrolls. **This is your final adjusted statement for FY2019.** Please work with your accountant or auditor to determine where to show this funding on your financial statements. Feel free to contact me via telephone at (907)465-2279 or email at [tamara.criddle@alaska.gov](mailto:tamara.criddle@alaska.gov) if you have any questions or need additional information regarding HB286.

Sincerely,

Tamara Criddle, Accountant

**State of Alaska, Division of Retirement & Benefits  
FY2019 - HB286 Employer On-Behalf Detail as of 7/24/2019  
BARTLETT REGIONAL HOSPITAL - ER 219**

Payroll Ending Date	On-Behalf		Total	
	Pension	Other Post-employment Healthcare		
07/14/2018	74,498.59	0.00	74,498.59	
07/28/2018	73,644.43	0.00	73,644.43	
08/11/2018	74,456.91	0.00	74,456.91	
08/25/2018	75,805.82	0.00	75,805.82	
09/08/2018	77,891.79	0.00	77,891.79	
09/22/2018	75,778.68	0.00	75,778.68	
10/06/2018	78,122.05	0.00	78,122.05	
10/20/2018	78,952.69	0.00	78,952.69	
11/03/2018	78,364.95	0.00	78,364.95	
11/17/2018	79,581.83	0.00	79,581.83	
12/01/2018	82,155.80	0.00	82,155.80	
12/15/2018	78,353.48	0.00	78,353.48	
12/29/2018	77,708.15	0.00	77,708.15	
01/12/2019	78,063.32	0.00	78,063.32	
01/26/2019	79,018.04	0.00	79,018.04	
02/09/2019	77,931.42	0.00	77,931.42	
02/23/2019	79,349.93	0.00	79,349.93	
03/09/2019	79,035.85	0.00	79,035.85	
03/23/2019	78,977.93	0.00	78,977.93	
04/06/2019	78,795.91	0.00	78,795.91	
04/20/2019	79,325.36	0.00	79,325.36	
05/04/2019	78,815.83	0.00	78,815.83	
05/18/2019	80,131.99	0.00	80,131.99	
06/01/2019	81,291.82	0.00	81,291.82	
06/15/2019	81,715.87	0.00	81,715.87	
06/29/2019	82,005.21	0.00	82,005.21	
06/30/2019	Year-End Adjustment	137,017.76	0.00	137,017.76
<b>TOTALS FOR BARTLETT REGIONAL HOSPITAL</b>				
	<b>\$2,176,791.41</b>	<b>\$0.00</b>	<b>\$2,176,791.41</b>	

**DISCLAIMER:** The information contained in this letter is based on the specific facts and circumstances presented and cannot be applied to other facts and circumstances. This letter may contain a summary description of benefits, costs, rates, valuations, other calculations, policies or procedures for one or more pension or benefit plans administered by the Division of Retirement and Benefits, including but not limited to, the Public Employees' Retirement System, the Teachers' Retirement System, the Judicial Retirement System, the Supplemental Annuity Plan, the Deferred Compensation Plan, the AlaskaCare Employee Health Plan, or the AlaskaCare Retiree Benefit Plan. The Division of Retirement and Benefits has made every effort to ensure, but does not guarantee, that the information provided is accurate and up to date. Where this letter conflicts with the relevant Plan Document, the Plan Document controls.

**Bartlett Regional Hospital  
Dashboard Report for June 2019**

Facility Utilization:	CURRENT MONTH					YEAR TO DATE			
	Actual	Budget	% Over (Under)	Prior Year	Prior Month (May)	Actual	Budget	% Over (Under)	Prior Year
<b>Hospital Inpatient: Patient Days</b>									
Patient Days - Med/Surg	484	394	23%	394	322	4,476	4,795	-7%	4,795
Patient Days - Critical Care Unit	81	87	-7%	87	91	1,077	1,062	1%	1,062
Patient Days - Swing Beds	0	25	-100%	0	0	0	300	-100%	0
Avg. Daily Census - Acute	18.8	16.9	12%	16	13.3	15.2	16.9	-10%	16.0
Patient Days - Obstetrics	63	66	-5%	66	74	805	804	0%	804
Patient Days - Nursery	48	58	-17%	58	57	722	702	3%	702
<b>Total Hospital Patient Days</b>	<b>676</b>	<b>605</b>	<b>12%</b>	<b>605</b>	<b>544</b>	<b>7,080</b>	<b>7,363</b>	<b>-4%</b>	<b>7,363</b>
Births	23	17	35%	17	28	325	315	3%	315
<b>Mental Health Unit</b>									
Patient Days - Mental Health Unit	269	287	-6%	287	294	3,341	3,493	-4%	3,493
Avg. Daily Census - MHU	9.0	9.6	-6%	9.6	9	9.2	9.6	-4%	9.6
<b>Rain Forest Recovery:</b>									
Patient Days - RRC	253	367	-31%	367	320	3,975	3,936	1%	3,936
Avg. Daily Census - RRC	8	12.2	-31%	12.2	10	11	10.8	1%	10.8
Outpatient visits	22	59	-63%	59	25	303	721	-58%	721
<b>Inpatient: Admissions</b>									
Med/Surg	94	69	36%	69	66	828	881	-6%	881
Critical Care Unit	44	43	2%	43	45	479	487	-2%	487
Obstetrics	26	18	44%	18	31	335	331	1%	331
Nursery	23	17	35%	17	28	335	332	1%	332
Mental Health Unit	27	50	-46%	50	40	429	544	-21%	544
<b>Total Admissions - Inpatient Status</b>	<b>214</b>	<b>197</b>	<b>9%</b>	<b>197</b>	<b>210</b>	<b>2,406</b>	<b>2,575</b>	<b>-7%</b>	<b>2,575</b>
<b>Admissions - "Observation" Status</b>									
Med/Surg	71	49	45%	49	50	683	652	5%	652
Critical Care Unit	39	30	30%	30	36	390	346	13%	346
Mental Health Unit	3	5	0%	5	5	31	21		21
Obstetrics	20	10	100%	10	15	219	188	16%	188
Nursery	0	1		1	0	7	12	-42%	12
<b>Total Admissions to Observation</b>	<b>133</b>	<b>95</b>	<b>40%</b>	<b>95</b>	<b>106</b>	<b>1,330</b>	<b>1,219</b>	<b>9%</b>	<b>1,219</b>
<b>Surgery:</b>									
Inpatient Surgery Cases	62	51	22%	51	45	557	594	-6%	594
Endoscopy Cases	128	91	40%	91	129	1,221	1,137	7%	1,137
Same Day Surgery Cases	99	101	-2%	101	117	1,153	1,233	-6%	1,233
<b>Total Surgery Cases</b>	<b>289</b>	<b>244</b>	<b>19%</b>	<b>244</b>	<b>291</b>	<b>2,931</b>	<b>2,964</b>	<b>-1%</b>	<b>2,964</b>
Total Surgery Minutes	17,668	15,780	12%	15,780	17,205	184,710	191,987	-4%	191,987
<b>Outpatient:</b>									
Total Outpatient Visits (Hospital)									
Emergency Department Visits	1,349	1,308	3%	1,308	1,384	14,539	15,913	-9%	15,913
Cardiac Rehab Visits	126	69	83%	69	94	1,045	837	25%	837
Lab Visits	248	222	12%	222	233	3,035	3,707	-18%	3,707
Lab Tests	10,246	10,067	2%	10,067	10,138	112,461	115,768	-3%	115,768
Radiology Visits	743	881	-16%	881	808	9,367	10,227	-8%	10,227
Radiology Tests	2,670	2,670	0%	2,670	2,689	30,311	29,821	2%	29,821
Sleep Study Visits	29	24	23%	24	32	311	287	8%	287
<b>Physician Clinics:</b>									
Hospitalists	265	244	8%	244	214	2,280	2,973	-23%	2,973
Bartlett Oncology Clinic	72	62	16%	62	70	846	757	12%	757
Behavioral Health Outpatient visits	292	268	9%	268	326	4,171	4,549	-8%	4,549
Orthopedic Clinic (NEW)	-	15	-100%	15	1	38	188	-80%	188
Special Clinic Outpatient visits	-	0	0%	-	0	-	-	0%	-
Bartlett Surgery Specialty Clinic visits	325	384	-15%	384	322	3,628	4,678	-22%	4,678
	954	975	-2%	975	933	10,963	13,145	-17%	13,145
<b>Other Operating Indicators:</b>									
Dietary Meals Served	27,644	21,779	27%	21,779	31,404	327,287	264,982	24%	264,982
Laundry Pounds (Per 100)	396	408	-3%	408	416	4,776	4,841	-1%	4,841



**Bartlett Regional Hospital  
Dashboard Report for June 2019**

Facility Utilization:	CURRENT MONTH				YEAR TO DATE			
	Actual	Budget	% Over (Under) Budget	Prior Year	Actual	Budget	% Over (Under) Budget	Prior Year
<b>Financial Indicators:</b>								
Revenue Per Adjusted Patient Day	4,286	4,209	1.8%	3,797	4,180	4,430	-5.6%	4,167
Contractual Allowance %	42.7%	39.9%	7.0%	40.1%	41.1%	39.9%	3.0%	39.9%
Bad Debt & Charity Care %	2.5%	3.1%	-17.1%	0.8%	2.4%	3.1%	-22.5%	1.3%
Wages as a % of Net Revenue	50.8%	46.1%	10.2%	49.3%	49.4%	46.1%	7.2%	47.1%
Productive Staff Hours Per Adjusted Patient Day	22.8	22.5	1.0%	20.1	20.4	23.7	-13.9%	23.8
Non-Productive Staff Hours Per Adjusted Patient Day	3.6	2.6	39.4%	3.2	3.3	2.7	22.6%	3.3
Overtime/Premium % of Productive	4.33%	6.23%	-30.5%	6.50%	5.93%	6.23%	-4.8%	6.23%
Days Cash on Hand	83	116	-28.2%	103	110	116	-4.8%	141
Board Designated Days Cash on Hand	118	165	-28.2%	101	157	165	-4.8%	101
Days in Net Receivables	50.9	51	0.0%	51	50.9	51	0.0%	51
							<b>% Over</b>	
Total debt-to-capitalization (with PERS)					63.9%	33.7%	89.6%	45.1%
Total debt-to-capitalization (without PERS)					20.3%	33.7%	-39.7%	20.1%
Current Ratio					8.04	2.00	302.0%	6.07
Debt-to-Cash Flow (with PERS)					8.62	2.7	219.3%	8.98
Debt-to-Cash Flow (without PERS)					2.74	2.7	1.6%	4.00
Aged A/R 90 days & greater					48.6%	19.8%	145.6%	
Cash Collections					82.0%	99.4%	-17.5%	
POS Cash Collection					10.2%	21.3%	-52.1%	
Cost of Collections (Hospital only)					5.2%	2.8%	84.1%	
Charity Care Write off					0.8%	1.4%	-42.3%	
Bad Debt Write off					0.6%	0.8%	-27.9%	
Discharged not Final Billed (DNFB)					10.3%	4.7%	119.0%	
Unbilled & Claims on Hold (DNBP)					10.3%	5.1%	101.8%	
Claims final billed not submitted to payor (FBNS)					0.0%	0.2%	-100.0%	

**BARTLETT REGIONAL HOSPITAL  
STATEMENT OF REVENUES AND EXPENSES  
FOR THE MONTH AND YEAR TO DATE OF JUNE 2019**

<u>MONTH ACTUAL</u>	<u>MONTH BUDGET</u>	<u>MO \$ VAR</u>	<u>MTD % VAR</u>	<u>PR YR MO</u>		<u>YTD ACTUAL</u>	<u>YTD BUDGET</u>	<u>YTD \$ VAR</u>	<u>YTD % VAR</u>	<u>PRIOR YTD ACT</u>	<u>PRIOR YTD % CHG</u>
\$4,170,114	\$4,257,551	-\$87,437	-2.1%	\$3,836,212	1. Gross Patient Revenue:						
\$964,679	\$1,042,505	-\$77,826	-7.5%	\$945,528	2. Inpatient Revenue	\$49,315,947	\$51,800,234	-\$2,484,287	-4.8%	\$48,249,464	2.2%
\$5,134,794	\$5,300,056	-\$165,263	-3.1%	\$4,781,740	3. Inpatient Ancillary Revenue	\$10,858,901	\$12,683,763	-\$1,824,862	-14.4%	\$12,403,151	-12.5%
					4. Total Inpatient Revenue	\$60,174,848	\$64,483,997	-\$4,309,149	-6.7%	\$60,652,616	-0.8%
\$8,712,610	\$7,746,503	\$966,107	12.5%	\$7,499,505	5. Outpatient Revenue	\$98,176,935	\$94,249,129	\$3,927,806	4.2%	\$88,584,979	10.8%
\$13,847,404	\$13,046,559	\$800,844	6.1%	\$12,281,245	6. Total Patient Revenue - Hospital	\$158,351,784	\$158,733,126	-\$381,342	-0.2%	\$149,237,595	6.1%
\$260,676	\$374,863	-\$114,188	-30.5%	\$393,498	7. RRC Patient Revenue	\$4,171,399	\$4,560,827	-\$389,429	-8.5%	\$4,437,720	-6.0%
\$209,859	\$200,056	\$9,803	4.9%	\$120,684	8. BHOPS Patient Revenue	\$2,478,345	\$2,434,002	\$44,343	1.8%	\$2,025,921	22.3%
\$1,077,298	\$758,515	\$318,783	42.0%	\$775,032	9. Physician Revenue	\$10,006,086	\$9,228,585	\$777,501	8.4%	\$8,205,763	21.9%
\$15,395,237	\$14,379,993	\$1,015,242	7.1%	\$13,570,458	10. Total Gross Patient Revenue	\$175,007,614	\$174,956,540	\$51,073	0.0%	\$163,906,998	6.8%
					Deductions from Revenue:						
\$3,150,468	\$2,635,500	-\$514,968	-19.5%	\$2,313,574	11. Inpatient Contractual Allowance	\$35,483,854	\$32,013,855	-\$3,469,999	-10.8%	\$32,054,012	10.7%
-\$308,333	-\$308,333	\$0	0.0%	-\$308,333	10a. Rural Demonstration Project	-\$3,699,996	-\$3,699,996	\$0	0.0%	-\$3,699,996	0.0%
\$3,219,398	\$2,881,254	-\$338,144	-11.7%	\$2,738,974	12. Outpatient Contractual Allowance	\$34,944,251	\$35,055,261	-\$111,010	0.3%	\$31,237,089	11.9%
\$508,420	\$528,487	-\$20,067	-3.8%	\$700,519	13. Physician Service Contractual Allowance	\$5,159,877	\$6,429,929	-\$1,270,052	-19.8%	\$5,738,046	-10.1%
\$12,736	\$21,005	-\$8,269	-39.4%	\$15,019	14. Other Deductions	\$173,535	\$255,559	-\$82,024	-32.1%	\$205,845	0.0%
\$124,410	\$167,805	-\$43,395	-25.9%	\$17,749	15. Charity Care	\$1,082,498	\$2,041,628	-\$959,130	-47.0%	\$1,519,195	-28.7%
\$265,685	\$271,975	-\$6,290	-2.3%	\$88,425	16. Bad Debt Expense	\$3,066,546	\$3,309,035	-\$242,489	-7.3%	\$648,984	372.5%
\$6,972,784	\$6,197,693	-\$775,091	-12.5%	\$5,565,927	17. Total Deductions from Revenue	\$76,210,564	\$75,405,271	-\$805,293	-1.1%	\$67,703,174	12.6%
42.7%	42.0%			42.4%	% Contractual Allowances / Total Gross Patient Revenue	41.1%	42.0%			42.1%	
2.5%	3.1%			0.8%	% Bad Debt & Charity Care / Total Gross Patient Revenue	2.4%	3.1%			3.3%	
45.3%	43.1%			41.0%	% Total Deductions / Total Gross Patient Revenue	43.5%	43.1%			41.3%	
\$8,422,453	\$8,182,300	\$240,151	2.9%	\$8,004,531	18. Net Patient Revenue	\$98,797,050	\$99,551,269	-\$754,220	-0.8%	\$96,203,824	2.7%
\$2,571,029	\$166,801	\$2,404,228	1441.4%	\$1,356,869	19. Other Operating Revenue	\$4,713,981	\$2,029,415	\$2,684,566	132.3%	\$3,240,072	45.5%
\$10,993,482	\$8,349,101	\$2,644,381	31.7%	\$9,361,400	20. Total Operating Revenue	\$103,511,030	\$101,580,684	\$1,930,345	1.9%	\$99,443,895	4.1%
					Expenses:						
\$3,685,158	\$3,491,046	-\$194,112	-5.6%	\$3,394,209	21. Salaries & Wages	\$42,318,786	\$42,474,395	-\$155,609	-0.4%	\$40,448,063	4.6%
\$319,681	\$225,720	-\$93,961	-41.6%	\$285,393	22. Physician Wages	\$3,365,983	\$2,746,255	-\$619,728	-22.6%	\$2,481,668	35.6%
\$271,337	\$54,092	-\$217,245	-401.6%	\$265,790	23. Contract Labor	\$3,128,019	\$658,118	-\$2,469,901	-375.3%	\$2,344,388	33.4%
\$3,923,274	\$1,702,125	-\$2,221,149	-130.5%	\$4,740,273	24. Employee Benefits	\$21,798,521	\$20,709,168	-\$1,089,353	-5.3%	\$22,741,753	-4.1%
\$8,199,450	\$5,472,983	-\$2,726,467	-49.8%	\$8,685,665	25. % Salaries and Benefits / Total Operating Revenue	\$70,611,309	\$66,587,936	-\$4,023,373	-6.0%	\$68,015,872	3.8%
74.6%	65.6%			92.8%		68.2%	65.6%			68.4%	
\$69,340	\$77,184	-\$7,844	-10.2%	\$77,721	26. Medical Professional Fees	\$961,500	\$939,067	-\$22,433	-2.4%	\$939,526	2.3%
\$147,066	\$274,581	-\$127,515	-46.4%	\$250,043	27. Physician Contracts	\$2,622,926	\$3,340,743	-\$717,817	-21.5%	\$3,622,534	-27.6%
\$148,282	\$177,122	-\$28,840	-16.3%	\$665,175	28. Non-Medical Professional Fees	\$1,883,186	\$2,154,968	-\$271,782	-12.6%	\$2,592,676	-27.4%
\$1,291,522	\$1,005,156	-\$286,366	-28.5%	\$312,877	29. Materials & Supplies	\$12,918,764	\$12,229,388	-\$689,376	-5.6%	\$11,012,692	17.3%
\$136,593	\$122,697	-\$13,896	-11.3%	\$109,803	30. Utilities	\$1,487,682	\$1,492,818	-\$5,137	-0.3%	\$1,453,486	2.4%
\$358,495	\$266,867	-\$91,628	-34.3%	\$284,827	31. Maintenance & Repairs	\$3,777,711	\$3,246,871	-\$530,840	-16.3%	\$3,135,804	20.5%
\$49,489	\$55,567	-\$6,079	-10.9%	\$70,876	32. Rentals & Leases	\$619,667	\$676,071	-\$56,404	-8.3%	\$774,421	-20.0%
\$38,528	\$40,045	-\$1,517	-3.8%	\$34,934	33. Insurance	\$701,158	\$487,216	-\$213,942	-43.9%	\$495,081	41.6%
\$587,612	\$630,575	-\$42,963	-6.8%	\$671,490	34. Depreciation & Amortization	\$7,196,120	\$7,671,990	-\$475,870	-6.2%	\$7,422,119	-3.0%
\$52,667	\$52,493	-\$174	-0.3%	\$53,995	35. Interest Expense	\$638,664	\$638,664	\$0	0.0%	\$653,430	-2.3%
\$148,322	\$89,966	-\$58,356	-64.9%	-\$2,184	36. Other Operating Expenses	\$1,378,727	\$1,094,584	-\$284,143	-26.0%	\$807,823	70.7%
\$11,227,365	\$8,265,236	-\$2,962,129	-35.8%	\$11,215,222	37. Total Expenses	\$104,797,412	\$100,560,316	-\$4,237,097	-4.2%	\$100,925,463	-3.8%
-\$233,883	\$83,865	-\$317,748	-378.9%	-\$1,853,822	38. Income (Loss) from Operations	-\$1,286,382	\$1,020,368	-\$2,306,750	-226.1%	-\$1,481,568	-13.2%
\$1,644,494	\$38,548	\$1,605,946	4166.1%	\$318,178	39. Non-Operating Revenue	\$2,393,728	\$469,000	\$1,924,728	410.4%	\$590,905	305.1%
\$104,123	\$149,708	-\$2,131,206	-1423.6%	\$1,177,186	40. Interest Income	\$1,774,397	\$1,821,455	-\$2,129,733	-116.9%	\$2,816,890	-37.0%
\$1,748,616	\$188,256	\$3,737,151	1985.1%	\$1,495,364	41. Other Non-Operating Income	\$4,168,125	\$2,290,455	\$1,877,670	82.0%	\$3,407,796	22.3%
\$1,514,733	\$272,121	\$1,242,612	-456.6%	-\$358,457	42. Total Non-Operating Revenue	\$2,881,743	\$3,310,823	-\$429,080	-13.0%	\$1,926,228	-49.6%
					43. Net Income (Loss)						
-2.13%	1.00%			-19.80%	Income from Operations Margin	-1.24%	1.00%			-1.49%	
13.78%	3.26%			-3.83%	Net Income	2.78%	3.26%			1.94%	

August 14 2019 Finance Committee

Bartlett Regional Hospital  
June 2019 Financial Operating Summary

Financial Group	In-Pt June		Out-Pt June		Physician Division June		BRH Total June	
	June	June Budget	Actual	June Budget	Actual	June Budget	Actual	June Budget
Aetna	356,555	345,773	1,382,921	1,295,538	208,130	98,193	1,947,605	1,739,504
Blue Cross	381,443	535,694	1,372,940	1,316,056	277,619	186,299	2,032,002	2,038,049
Comm	202,970	224,607	486,418	397,561	149,214	102,055	838,603	724,223
MCD	1,760,580	1,845,884	1,584,853	1,613,036	282,757	213,367	3,628,190	3,672,287
MCR	2,751,464	2,409,805	2,894,980	2,304,557	249,252	256,959	5,895,697	4,971,321
Other	(2,824)	62,505	478,356	162,980	14,365	14,149	489,897	239,634
SEARHC	48,518	41,765	123,485	73,858	8,053	609	180,057	116,232
Self	(231,504)	62,635	89,814	210,800	9,486	29,296	(132,204)	302,731
VA/Cham	123,881	110,208	202,892	253,868	88,281	47,963	415,054	412,039
Worker's	4,808	24,106	95,528	130,187	-	9,681	100,336	163,974
<b>Grand Total</b>	<b>5,395,892</b>	<b>5,662,982</b>	<b>8,712,187</b>	<b>7,758,441</b>	<b>1,287,157</b>	<b>958,571</b>	<b>15,395,236</b>	<b>14,379,994</b>
Commercial	945,776	1,130,180	3,337,807	3,139,342	634,963	396,228	4,918,546	4,665,750
Government	4,681,620	4,470,167	5,284,566	4,408,299	642,708	533,047	10,608,894	9,411,513
Self Pay	(231,504)	62,635	89,814	210,800	9,486	29,296	(132,204)	302,731
<b>Total Charges</b>	<b>5,395,892</b>	<b>5,662,982</b>	<b>8,712,187</b>	<b>7,758,441</b>	<b>1,287,157</b>	<b>958,571</b>	<b>15,395,236</b>	<b>14,379,994</b>
% of Hospital Charges	30%	31%	34%	31%	4%	4%	68.9%	65.4%
<b>Prior Month</b>								
Commercial	1,216,257	1,167,850	3,873,345	3,243,983	516,410	409,433	5,606,012	4,821,266
Government	4,222,321	4,619,175	4,984,593	4,555,242	862,502	550,812	10,069,416	9,725,229
Self Pay	(125,855)	64,724	158,075	217,822	(3,142)	30,272	29,078	312,818
<b>Total Charges</b>	<b>5,312,723</b>	<b>5,851,749</b>	<b>9,016,014</b>	<b>8,017,047</b>	<b>1,375,770</b>	<b>990,517</b>	<b>15,704,507</b>	<b>14,859,313</b>
% of Hospital Charges	27%	31%	32%	31%	5%	4%	64.1%	65.4%

August 14 2019 Finance Committee

Bartlett Regional Hospital

Type	Description	June Actual	June Budget	June Actual (Over) / Under Budget
6010	Mgrs & Supervisors	404,845	419,260	14,415
6020	Techs & Specs	659,685	699,458	39,773
6030	RN's	762,964	834,393	71,429
6040	Clerical & Admin	337,058	365,428	28,370
6060	Clinical - Other	238,182	286,522	48,340
6070	Non-Clinical - Other	232,831	213,897	(18,934)
6100	Overtime	220,724	82,009	(138,715)
6110	Call Back	59,778	44,498	(15,280)
6120	Shift Differentials	128,228	116,623	(11,605)
6130	On-Call	16,501	26,258	9,757
6090	Non Productive	519,164	402,700	(116,464)
6105	Premium Pay	-	-	-
6190	Bonuses	105,200	-	(105,200)
	Grand Total	3,685,158	3,491,046	(194,112)
6050	Physicians	319,681	225,720	(93,961)
6500	Contract Labor	271,337	54,092	(217,245)
	Physician Contracts	591,018	279,812	(311,206)

BARTLETT REGIONAL HOSPITAL  
BALANCE SHEET  
June 30, 2019

	<u>June-19</u>	<u>May-19</u>	<u>June-18</u>	<u>CHANGE FROM PRIOR FISCAL YEAR</u>
<b>ASSETS</b>				
Current Assets:				
1. Cash and cash equivalents	29,494,772	30,684,662	36,115,860	(6,621,088)
2. Board designated cash	37,698,814	37,454,806	34,304,989	3,393,825
3. Patient accounts receivable, net	14,299,074	13,554,492	12,991,632	1,307,442
4. Other receivables	4,621,299	2,788,544	1,919,498	2,701,801
5. Inventories	3,303,166	3,524,534	3,068,151	235,016
6. Prepaid Expenses	1,013,343	1,150,708	728,834	284,509
7. Other assets	28,877	28,877	28,877	-
8. Total current assets	90,459,345	89,186,623	89,157,841	1,301,505
Appropriated Cash:				
9. CIP Appropriated Funding	4,224,426	4,461,076	1,178,300	3,046,126
Property, plant & equipment				
10. Land, bldgs & equipment	149,447,695	148,980,878	146,626,471	2,821,224
11. Construction in progress	867,758	599,228	233,207	634,551
12. Total property & equipment	150,315,453	149,580,105	146,859,678	3,455,772
13. Less: accumulated depreciation	(97,716,627)	(97,210,263)	(91,385,019)	(6,331,608)
14. Net property and equipment	52,598,826	52,369,842	55,474,659	(2,875,836)
15. Deferred outflows/Contribution to Pension Plan	8,564,873	8,564,873	8,564,873	-
16. Total assets	155,847,470	154,582,414	154,375,673	1,471,796
<b>LIABILITIES &amp; FUND BALANCE</b>				
Current liabilities:				
17. Payroll liabilities	1,964,340	1,630,530	1,663,508	300,833
18. Accrued employee benefits	3,878,920	3,824,923	3,528,376	350,543
19. Accounts payable and accrued expenses	1,852,367	2,403,708	1,664,366	188,001
20. Due to 3rd party payors	1,819,247	1,472,327	2,548,844	(729,596)
21. Deferred revenue	208,781	748,522	17,111	191,671
22. Interest payable	335,994	267,922	350,344	(14,350)
23. Note payable - current portion	845,000	845,000	820,000	25,000
24. Other payables	347,097	293,087	1,031,592	(684,496)
25. Total current liabilities	11,251,746	11,486,019	11,624,141	(372,394)
Long-term Liabilities:				
26. Bonds payable	18,130,000	18,130,000	18,975,000	(845,000)
27. Bonds payable - premium/discount	1,415,502	1,430,907	1,608,050	(192,548)
28. Net Pension Liability	62,996,347	62,996,347	62,996,347	-
29. Deferred In-Flows	9,841,533	9,841,533	9,841,533	-
30. Total long-term liabilities	92,383,382	92,398,786	93,420,930	(1,037,548)
31. Total liabilities	103,635,128	103,884,805	105,045,071	(1,409,942)
32. Fund Balance	52,212,342	50,697,609	49,330,603	2,881,739
33. Total liabilities and fund balance	155,847,470	154,582,414	154,375,673	1,471,796

**Bartlett Regional Hospital  
Accounts Receivable  
June 30, 2019**

Aging by Fin Grp	Unbilled A/R	0-30	31-60	61-90	91-120	121-150	151+	A/R Total	Billed & Unbilled	Billed & Unbilled
									6/30/2019	5/31/2019
Aetna	\$53,127	\$505,821	\$434,721	\$150,273	\$324,263	\$126,348	\$346,189	\$1,887,615	\$1,940,743	\$1,828,537
Blue Cross	\$112,516	\$403,827	\$113,580	\$46,810	\$63,153	\$12,092	\$157,764	\$797,225	\$909,741	\$889,595
CB	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Com	\$68,990	\$314,531	\$215,939	\$39,086	\$24,909	\$95,186	\$184,144	\$873,796	\$942,786	\$647,852
Medicaid	\$934,608	\$1,019,837	\$213,410	\$317,340	\$759,135	\$133,008	\$1,646,407	\$4,089,137	\$5,023,745	\$4,638,708
Medicare	\$1,560,705	\$1,604,871	\$654,418	\$173,213	\$17,470	\$9,059	\$9,526	\$2,468,556	\$4,029,261	\$3,228,575
Medicare Rep	\$70,262	\$86,111	\$34,279	\$0	\$0	\$811	\$25,321	\$146,523	\$216,785	\$65,150
Other	\$21,255	\$67,141	\$20,526	\$0	\$0	\$13,484	\$98,284	\$199,435	\$220,689	\$551,667
SEARHC	\$35,085	\$36,105	\$4,703	\$2,554	\$38,475	\$3	\$9,599	\$91,439	\$126,524	\$147,759
Self	\$64,318	\$48,594	\$144,371	\$162,249	\$22,230	\$164,363	\$2,357,959	\$2,899,766	\$2,964,085	\$3,228,992
VA	\$8,212	\$153,136	\$111,841	\$203,088	\$105,325	\$0	\$224,699	\$798,089	\$806,301	\$749,018
Worker's	\$0	\$11,686	\$0	\$3,186	\$0	\$0	\$1,642	\$16,514	\$16,514	\$34,742
<b>in-patient</b>	<b>\$2,929,078</b>	<b>\$4,251,660</b>	<b>\$1,947,789</b>	<b>\$1,097,798</b>	<b>\$1,354,960</b>	<b>\$554,353</b>	<b>\$5,061,535</b>	<b>\$14,268,095</b>	<b>\$17,197,173</b>	<b>\$16,010,597</b>
Aetna	\$520,849	\$830,014	\$428,746	\$234,739	\$140,031	\$42,331	\$98,692	\$1,774,554	\$2,295,403	\$2,249,026
Blue Cross	\$391,215	\$746,205	\$308,459	\$131,832	\$93,895	\$28,485	\$73,110	\$1,381,986	\$1,773,201	\$1,751,346
CB	\$0	\$0	\$0	\$0	\$0	\$0	\$413	\$413	\$413	\$413
Com	\$132,620	\$322,096	\$303,729	\$92,207	\$25,640	\$18,757	\$112,133	\$874,563	\$1,007,183	\$814,048
Medicaid	\$355,399	\$538,839	\$246,195	\$193,302	\$79,323	\$84,096	\$622,050	\$1,763,807	\$2,119,205	\$2,199,012
Medicare	\$606,553	\$1,453,387	\$173,118	\$128,550	\$28,129	\$111,046	\$154,974	\$2,049,204	\$2,655,757	\$2,267,475
Medicare Rep	\$7,068	\$57,748	\$4,612	\$0	\$0	\$0	\$58,527	\$120,886	\$127,954	\$83,844
Other	\$56,221	\$199,960	\$75,572	\$35,294	\$3,000	\$11,350	\$99,516	\$424,693	\$480,914	\$321,087
SEARHC	\$39,018	\$61,834	\$35,983	\$18,351	\$1,890	\$80	\$46,981	\$165,120	\$204,137	\$179,608
Self	\$53,570	\$202,596	\$352,869	\$375,437	\$293,771	\$380,679	\$4,708,756	\$6,314,108	\$6,367,678	\$6,323,162
VA	\$101,702	\$327,560	\$90,821	\$30,451	\$30,829	\$32,345	\$228,657	\$740,664	\$842,366	\$873,363
Worker's	\$14,856	\$67,722	\$136,718	\$31,617	\$18,498	\$26,048	\$85,094	\$365,697	\$380,553	\$415,865
<b>out-patient</b>	<b>\$2,279,071</b>	<b>\$4,807,962</b>	<b>\$2,156,822</b>	<b>\$1,271,782</b>	<b>\$715,008</b>	<b>\$735,219</b>	<b>\$6,288,902</b>	<b>\$15,975,695</b>	<b>\$18,254,766</b>	<b>\$17,478,249</b>
Aetna	\$573,976	\$1,335,835	\$863,468	\$385,013	\$464,294	\$168,679	\$444,882	\$3,662,169	\$4,236,145	\$4,077,564
Blue Cross	\$503,731	\$1,150,032	\$422,039	\$178,642	\$157,048	\$40,577	\$230,874	\$2,179,212	\$2,682,942	\$2,640,941
CB	\$0	\$0	\$0	\$0	\$0	\$0	\$413	\$413	\$413	\$413
Com	\$201,610	\$636,627	\$519,669	\$131,293	\$50,549	\$113,943	\$296,277	\$1,748,359	\$1,949,969	\$1,461,900
Medicaid	\$1,290,007	\$1,558,677	\$459,606	\$510,642	\$838,458	\$217,105	\$2,268,457	\$5,852,944	\$7,142,951	\$6,837,721
Medicare	\$2,167,258	\$3,058,258	\$827,537	\$301,763	\$45,599	\$120,105	\$164,499	\$4,517,760	\$6,685,018	\$5,496,050
Medicare Rep	\$77,330	\$143,859	\$38,891	\$0	\$0	\$811	\$83,848	\$267,409	\$344,738	\$148,994
Other	\$77,476	\$267,101	\$96,098	\$35,294	\$3,000	\$24,834	\$197,800	\$624,127	\$701,603	\$872,754
SEARHC	\$74,103	\$97,940	\$40,686	\$20,905	\$40,366	\$83	\$56,580	\$256,559	\$330,662	\$327,367
Self	\$117,888	\$251,190	\$497,240	\$537,686	\$316,001	\$545,042	\$7,066,715	\$9,213,875	\$9,331,763	\$9,552,153
VA	\$109,914	\$480,696	\$202,661	\$233,540	\$136,155	\$32,345	\$453,356	\$1,538,753	\$1,648,667	\$1,622,381
Worker's	\$14,856	\$79,408	\$136,718	\$34,803	\$18,498	\$26,048	\$86,736	\$382,211	\$397,067	\$450,608
<b>Grand Total</b>	<b>\$5,208,149</b>	<b>\$9,059,622</b>	<b>\$4,104,611</b>	<b>\$2,369,581</b>	<b>\$2,069,968</b>	<b>\$1,289,572</b>	<b>\$11,350,437</b>	<b>\$30,243,790</b>	<b>\$35,451,939</b>	<b>\$33,488,846</b>

Aged Balance excludes Credit Balances

	June-19	May-19
Aging without credits	\$30,243,790	\$27,700,886
Unbilled	\$5,208,149	\$5,787,960
total without credits	\$35,451,939	\$33,488,846

May 2019 Write Offs - Bartlett Regional Hospital

Adjustments

One Time PPD Ins		
Timely Filing		
Compliance/Risk/Adminstrative	\$2,053.90	1
SP Prompt Pay Disc	\$12,580.40	166
Timely RRC-BOPS/LABS		
Demographic Informaiton	\$369.90	1
Auth Denials	\$11,029.43	3
Denied Appeals		
Provider Enrollment BH	\$5,132.00	1
Mental Health BD Adj	\$11,091.10	1
	\$42,256.73	173

Collections

One Time Ins PPD	\$0.00	
Collections SPPPD	\$71,637.60	166
	\$71,637.60	166

**Bartlett Regional Hospital  
Capital Spending  
Progress as of June 30, 2019**

**1 Patient Safety/Compliance/IT Security  
2 End of Life/Revenue Enhancer/Cost saver  
3 Future End of Life/Nice to have**

Cap#	DEPT #	DEPARTMENT	DESCRIPTION	CAPITAL	Substitution	Purchased Thru June 2019	Remaining Budget Balance	Priority	FY	Notes
19-001	6020	CCU	Progressa Beds (1)	38,000		40,335	(2,335)	2	2019	Obsolete beds replacing
19-011	6020	CCU	Bariatric Progressa Bed	44,269		38,592	5,677	2	2019	Current Bariatric bed was purchase in 2011 and is at end of life. We have had issues with bed breaking down. Biomed has asked it be replaced.
19-022	6020	CCU	Progressa Beds (1)	39,829			39,829	2	2019	Replacing bed purchased in 2001. Again, it is end of life and biomed has concerns about keeping up maintenance with frequent work orders.
19-002	6065	Mental Health Unit	Outfit Exam Room	10,000			10,000	3	2019	Hospitalist's request
19-003	6080	OB	Nitronox Model E Stand	-			-	2	2019	For Pain management;short acting
19-004	6080	OB	Halo Bassinets	-			-	2	2019	Replace older bassinets, will provide safer sleep practices
19-023	6080	OB	VS Monitors for OB 6 & 7(2)	10,000		12,618	(2,618)	1	2019	Need to provide for continuous SpO2 monitoring for patients who are on PCA with basal rate. These monitors would be mounted in the rooms and we could monitor at the nursing station.
19-024	6080	OB	Labor & Delivery Beds(3)	61,000			61,000	2	2019	Replace beds greater than 10 years old. Ergonomically safer for staff when breaking down bed for delivery.
19-025	6170	RT	Blood Gas Analyzer	21,000			21,000	2	2019	Current units approaching 7 years of 10 year lifespan. End of life. \$28K unit & 7K for interfacing
19-026	6170	RT	Phillips Resprionics V60 Non-invasive Ventilator	12,992			12,992	2	2019	This is intended to replace one of two Resprionics Vision Non-invasive Ventilators that are not supported (end of life) since 7/30/16. These machines have a high utilization rate in CCU and ED.
19-027	6170	RT	Phillips Resprionics V60 Non-invasive Ventilator	13,000			13,000	3	2020	This is intended to replace one of two Resprionics Vision Non-invasive Ventilators that are not supported (end of life) since 7/30/16. These machines have a high utilization rate in CCU and ED.
19-028	6170	RT		32,864			32,864	3	2020	This is intended to replace the second PB 840 that is end of life/support as of 12/31/2020. This is part of an ongoing transition to this ventilator as we are currently in the process of replacing another PB 840 that has failed. We need to maintain a minimum of 4 functional ICU vents to meet patient care needs.
18-006	6210	Operating Room	Washer/Disinfector(Part of larger CIP CSR Equipment Upgrade)	128,601			128,601	1	2018	To expedite instrument turn over in Central Sterile Processing. The current washer is frequently down for repairs and maintenance; 110,106 for product & \$50K for facility
19-005	6210	Operating Room	LMA Stone Breaker	-			-	2	2019	Used to break up large bladder stones
19-006	6210	Operating Room	Ultra Light Urology Camera (1)	-			-	2	2019	Used for Cysto-Urological cases. Have two currently but cases are being delayed due to turnover/repair
19-007	6210	OR	Anesthesia Machine	30,865			30,865	2	2019	With addition of a new surgeon an additional machine is necessary
19-029	6210	OR	3 Urogology HD Camera Heads	34,641		30,169	4,472	2	2019	Current camera heads are old and we have no service agreement. We are having to send them out for repair frequently incurring extra cost and when they are out of service it results in delays and empty OR rooms which is loss in money and productivity
19-030	6210	OR	Omni Retractor Set	7,500			7,500	2	2019	We have 3 general surgeons and only 1 such retractor. When this retractor is used after hours and on weekends We pay the scrub tech overtime of a minimum of 3 hours to reprocess in case another emergency arises.
19-031	6210	OR	Rigid Ureteroscope	8,294			8,294	2	2019	Only having 1 creates a 1.5 hour delay for this instrument to be reprocessed resulting in loss of revenue and productivity
19-032	6210	OR	Semi Rigid Ureteroscope	8,294			8,294	2	2019	Only having 1 creates a 1.5 hour delay for this instrument to be reprocessed resulting in loss of revenue and productivity
19-033	6210	OR	Flexible Fiber Optic Nephroscope	7,719			7,719	2	2019	The one we have is so old that the only way to sterilize it is to soak it in glutaraldehyde for 20 minutes and then rinse in 3 separate basins of sterile water. When needed for an emergency in the ED or here in surgery it is a long delay compromising patient care.
19-034	6210	OR	Orthopedic Broken Screw Removal Set	22,741			22,741	3	2020	Orthopedic Broken Screw Removal Set

August 14 2019 Finance Committee



**Bartlett Regional Hospital  
Capital Spending  
Progress as of June 30, 2019**

1 Patient Safety/Compliance/IT Security  
2 End of Life/Revenue Enhancer/Cost saver  
3 Future End of Life/Nice to have

Cap#	DEPT #	DEPARTMENT	DESCRIPTION	CAPITAL	Substitution	Purchased Thru June 2019	Remaining Budget Balance	Priority	FY	Notes
19-035	6210	OR	Washer Sterilizer	107,000			107,000	3	2020	We have one washer sterilizer and several times throughout the year it has been nonfunctional interfering with operational needs in the surgery dept. and standard of care. In addition we are busier with more total joint replacements and have added another surgeon. Having a second washer sterilizer would make our department more efficient in getting sterilized trays out.
19-008	6230	Emergency Room	Phillips Portable Monitors (2)	42,000		40,247	1,754	1	2019	The ED currently has 5 hardwired cardiac monitors and two portable cardiac monitors, adding two more portable cardiac monitors will allow 9 of the 12 ED rooms to be able to become a monitored bed. During busy summers the ED frequently has to move less sick monitored patients into a hall bed to make room for a critical patient. Having two extra monitors would allow the patients to continue to be monitored even though they are in a hall bed. * quote was sent for one, I am requesting two.
19-009	6230	Emergency Room	Sonosite Ultrasound Probe	11,500		11,285	215	1	2019	This ultrasound probe allows providers to do bedside screening on patients that have a large habitus. Having this probe in the ED would allow for early recognition of potentially life threatening conditions that the current probes have less of sensitivity for.
19-036	6230	Emergency Room	ETCO2 Module (5)	24,000		26,160	(2,160)	1	2019	With CMS requiring ETCO2 monitoring for more patients this capital request would allow the majority of the ED's hardwired monitored beds to have ETCO2 monitoring. I am also asking for two ETCO2 modules for our two portable monitors, this would allow ETCO2 monitors to be used in non-hardwired rooms. * Please keep in mind that the attached quote includes ETCO2's for CCU.)
18-009	7010	Lab	Cobas 6000 Chemistry Analyzer-Duplicated item-will not be purchased	135,224			135,224	3	2018	Propose going to a single analyzer, with proven reliability/Ice stat
18-010	7010	Lab	ACL Top 350 CTS System	50,000		50,000	-	2	2018	Replacement of current ACL Elite Coagulation Analyzer, current system is 8 years old and cannot produce needed cutoff with D-Dimer method
19-037	7010	70 Lab/Histology	Coagulation Analyzer-Duplicated item will not be purchased	50,000			50,000	2	2019	Used for coagulation studies to include D-dimer. ER physicians want a unit with 500 DD units. Unit is currently 7 years old.
19-038	7013	7010 Lab/Histology	Blood Bank Sero-Fuge and Stat spin cytofuge	8,500			8,500	2	2019	Current Sero fuge in Blood bank est 30 plus years old. Cytofuge was determined by Bio Med as not safe. Need replacement. Been sharing with histology, but need one specific to lab.
19-039	7013	7010 Lab/Histology	Vitek (microbiology analyzer)	65,000			65,000	3	2020	Plan for Capital for 2019 - 2020
19-040	7013	7010 Lab/Histology	Bacti Alert (blood culture analyzer)	45,000			45,000	3	2020	Plan for Capital for 2019 - 2020
19-041	7010	70 Lab/Histology	Temperature monitoring system - 36, RT, 2-8, -20 and -70.	20,000			20,000	3	2020	Complete monitoring system for all temps in Laboratory, Histology. This is a CAP standard, which we must monitor. Currently this is all manual.
19-042	7042	Ultrasound	Phillips Ultrasound (4)	720,858		700,684	20,174	2	2019	1st year under warranty, \$59,588 service contract per year after
19-043	7045	MRI	Bayer MRI injector	52,253		43,225	9,028	2	2019	1st year under warranty, \$5,454 service contract 5yrs thereafter
19-044	7062	Wellness	NOVA Blood Glucose Monitors Interface-Meditech Software	13,512			13,512	3	2019	This has been on the back burner since before we made the transition from Magic to the current system. Initially the plan was to implement this when the original meters were phased in but due to the cost of multiple interfaces due to the EMR change it was delayed.
19-010	7070	Pharmacy	Omnixplorer	37,173			37,173	3	2019	Allows nurses to find medications in other Omnicell cabinets
18-011	7070	Pharmacy	Pharmacy Surveillance software for drug diversion	30,000			30,000	1	2019	Software is needed to audit the use of controlled substances.
18-012	7070	Pharmacy	Infusion Pumps	525,000			525,000	2	2019	New infusion pumps
18-013	7070	Pharmacy	Anesthesia Workstations	124,492		126,089	(1,596)	1	2018	Automated workstations to securely store, label, and electronically charge medications
19-045	7070	Pharmacy	Inventory Management Automation	114,800			114,800	2	2019	This computer system will be used to establish minimum and maximum levels for each medication and electronic ordering through our wholesaler. This should reduce the value of inventory and the amount of expired and wasted medications.

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Cap#	DEPT #	DEPARTMENT	DESCRIPTION	CAPITAL	Substitution	Purchased Thru June 2019	Remaining Budget Balance	Priority	FY	Notes
19-046	7070	Pharmacy	Automated system to check IV compounds and / or bar code scanning for clean room	8,000			8,000	1	2019	Hardware, iPads, for Pharmacy Keeper software. This software adds barcode verification and picture record keeping that improves patient safety. Also improves efficiency of medication use inspections throughout the hospital.
19-047	7070	Pharmacy	Automated dispensing cabinet	72,400			72,400	3	2020	The tabletop Omnicell in SDS would be moved to the Infusion department to be used for medications, including controlled substances, administered during sleep studies to improve security and compliance. Pre-medications and adverse reaction treatments for Infusion would be kept in the location where they are needed without having pharmacy staff deliver doses for each patient. A single tower Omnicell for SDS will hold more pre-op medications which will improve efficiency in that department.
18-014	7091	PT	Construction of countertop/desk	10,000			10,000	3	2018	Redesign/construction of reception area and front desk
18-015	7091	PT	Room Divider for OT	8,000			8,000	3	2018	OT has no private patient area, also will provide sound mitigation
19-012	8110	Nutrition	Computation Software System	170,000		80,944	89,056	2	2019	New POS System, inventory and cost control, nutrient analysis, diet orders, intake analysis
19-048	8112	Nutrition	Blast Chill/Freezer	13,729			13,729	3	2020	due to the amount of cook/chill production in our operation, this would assist our facility in implementing best practices for food safety by ensuring that food is chilled or frozen in required timeframes. This will also reduce condensation which is causing rust in our cooler and freezer with current practices.
19-049	8112	Nutrition	Convection Oven	10,891		7,248	3,643	2	2019	– the current one is about to die.
19-050	8112	Nutrition	Fryer	9,731		24,344	(14,613)	2	2019	Current one needs to be replaced. the one that we purchased last year was unfortunately a 1 phase range. Consequently, it is very inefficient and is rarely even used by our cooks as it takes an hour to boil water. This new range is a 3 phase model that will be much more efficient.
19-051	8112	Nutrition	Range	8,452		7,952	500	2	2019	
19-013	8360	Facilities	Assess for Bulk Oxygen Storage-moved to FY20 Capital Budget	25,000			25,000	3	2020	
18-018	8360	Facilities	BOPS Exterior Painting	15,000			15,000	2	2018	
18-019	8360	Facilities	Bartlett House Flooring	50,000			50,000	2	2018	More durable & cleaning (Mark to looking into 50/50 rotation)
18-020	8360	Facilities	Admin Bldg - North Handicap Ramp/Stair Assessment	15,000			15,000	1	2018	Ramp is moving away from building
18-021	8360	Facilities	Pharmacy Clean Room-moved to FY20 Capital Budget	400,000		89,028	310,972	1	2018	Pharmacy Remodeling to Comply with UPC 500
18-022	8360	Facilities	Digital CCTV ED	21,000			21,000	2	2018	installed for MHU & RRC want to add ER
18-023	8360	Facilities	Keypad to Prox Conversion	30,000		10,680	19,320	2	2018	
18-038	8360	Facilities	Fire Suppression System - Server Rooms	238,875		296,377	(57,502)		2018	
19-052	8360	Facilities	Box Truck	60,000			60,000	2	2019	Replace Box Truck purchased in 2003
19-053	8360	Facilities	Plow Truck	55,000			55,000	2	2020	Replace Plow Truck purchased in 2012
19-054	8360	Facilities	Administration Building Carpet	70,000			70,000	2	2019	Replace Carpet purchased in 2000
19-055	8360	Facilities	JMC Fire Alarm Replacement	125,000			125,000	1	2019	Building doesn't have a functional fire alarm system
19-056	8360	Facilities	JMC Flooring	50,000			50,000	3	2019	Luxury Vinyl Tile(LVT) and Carpet Tile
19-057	8360	Facilities	Chiller 2	50,000		11,640	38,360	3	2019	Currently functional, has had some problems in the past.
19-058	8360	Facilities	Boiler Room Ventilation (Help Lab Heat)	200,000			200,000	2	2019	Help control in lab Actual cost not known at this time. Estimate is less than \$100,000.
19-059	8360	Facilities	Endoscopy Ventilation Upgrade	99,000		14,371	84,629	3	2019	Does't move enough air.
19-060	8360	Facilities	Convert ASU 1 Heating to Glycol	100,000		12,096	87,904	2	2019	Original ventilatoin system. Water heating coil in system.
19-061	8360	Facilities	Replace Heating Coil ASU 15	50,000			50,000	2	2019	Heating for lab.
19-062	8360	Facilities	Dishroom Rebuild-moved to FY20 Capital Budget	100,000			100,000	3	2019	Purchased in 1999
19-063	8360	Facilities	Hawk Boiler Upgrade	160,000		53,801	106,199	2	2019	Feature added to boiler (O2 trim) increased efficiency.
19-014	8390	PAS	E-Forms/Signature	130,000		125,543	4,457	3	2019	Patient form software HIGH: If the we run out of storage space Medical Records will not be able to scan records into Meditech. Evaluate the space on the Scanning and Archiving Meditech Server
18-024	9200	IS	Meditech Scanning for Medical Records	107,000			107,000	1	2018	(Expected) Purchase new WISM-2 card for VSS pair, configure WISM-2's for high availability. Purchase 2 new outdoor AP's/Antennas and upgrade Surgery
18-025	9200	IS	Wireless: Infrastructure Upgrade	29,000		34,481	(5,481)	2	2018	Clinic shot. We budgeted for a Citrix Remote Access Solution. Compare with Virtual
18-028	9200	IS	Citrix Remote Access	36,732		14,545	22,187	1	2018	Desktops.

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19-015	9200	IS	Wireless: AirMagnet Enterprise Upgrade	29,000		22,949	6,051	2	2019	Wireless IDS/IPS, RF monitoring, wireless policies, and historical RF/Policy Violation data
19-016	9200	IS	Critical Care Flowsheet	135,000		123,308	11,692	2	2019	Flowsheet style documentation
19-017	9200	IS	Philips to Meditech: Upgrade & Interface (IECG)-moved to FY20 Budget	145,000			145,000	2	2019	Upgrade/Migrate Philips TraceMaster to Philips Intelli-ECG with ADT/ORU
19-018	9200	IS	OB to Meditech Interface (IntelliSpace Perinatal Interface)-moved to FY20 Capital Buc	120,000			120,000	3	2019	Setup ADT/ORU between Philips OB System and Meditech; new monitors must be interfaced.
19-019	9200	IS	SEARHC: Cerner EHR to Meditech Interface-moved to FY20 Capital Budget	35,000			35,000	3	2020	Dr. Cate Buley, SEARHC Medical Director is requesting an interface of IHS (SEARHC and other) clinics interacing their Cerner EHR with BRH's Meditech.
19-020	9200	IS	Evaluate Two Factor Authentication & Proximity system-moved to FY20 Capital Budge	170,000			170,000	2	2019	Research solutions to see if we can elevate security at a reasonable cost
19-021	9200	IS	Meditech 6.16 Hardware Upgrade	100,000			100,000	3	2020	Hardware and licensing required for next version of Meditech 6.x Keeps Test and Live dictionaries synchronized – Meditech. Requested
19-064	9200	IS	Summit InSync Software	13,500		13,500	-	3	2019	quote.
18-030	9200	IS	Valco Merge or other software-moved to FY20 Capital Budget	60,000			60,000	2	2019	Migrate old Meditech archive data to new system.
18-031	9200	IS	Cisco Catalyst 3850	343,000		325,901	17,099	2	2018	6509's EOL in 2012. We have 8 6509's to replace We run a collapsed core model. The switch that has the Dell environment connected is the old core. Once the work above is done,
18-033	9200	IS	Network Efficiency: Catalyst 6509-Main Decomission	42,875			42,875	2	2018	only access layer devices will remain.
19-065	9200	IS	OpSus Recover or like solution-moved to FY20 Capital Budget	400,000			400,000	2	2019	Complete Redundant Backup solution for Meditech.
19-066	9200	IS	Unitrends Backup Device	105,000		100,000	5,000	2	2019	Secondary backup device for Split location backups.
19-067	9200	IS	NetApp Storage Shelf Expansion	85,000			85,000	2	2019	Increase Capacity on our SAN, currently Critically low on space. Upgrade to IAS 2.0 – support of IAS original module no longer exists, and
19-068	9200	IS	IAS Module – Meditech	12,000			12,000	2	2019	any implantation must use the 2.0 version. Interface Between Capitol Fire and Bartlett to send Patient information
19-069	9200	IS	ImageTrend (CCFR interface)-moved to FY20 Capital Budget	75,000			75,000	2	2019	electronically
19-070	9200	IS	Oncology Module - Meditech-moved to FY20 Capital Budget	189,000			189,000	3	2020	Proposed by Dr. Urata, Pharmacy, Infusion Therapy Ability to Proactively monitor services and functionality with BRH
19-071	9200	IS	Datacenter monitoring toolkit	65,000			65,000	2	2019	network Devices and server equipment
19-073	9200	IS	Cisco Catalyst 3850	343,000	(69,000)	286,965	(12,965)	2	2019	Remainder of Switches
19-074	9200	IS	Internet Routers		69,000	69,426	(426)	2	2019	Increase Internet Speed form 100Mbps to 1Gbps (10x speed increase) over 15 years. Presently I only have one torso manikin that functions for our classes. This manikin does not meet standards for the AHA guidelines
19-072	9405	Staff Development	Manikin <b>ADDITIONS:</b>	18,497		18,497	(0)	3	2019	for ACLS class equipment. The other two manikins are inoperable for all
19-075	7041	IS	Rimage Catalyst 6000 CD Burner			23,780	(23,780)		2019	
19-076	7041	IS	Sorna Vertex 25EI CD Burner			20,096	(20,096)		2019	
19-077	8360	Facilities	Cafeteria Entry/Ramp Flooring			14,780	(14,780)		2019	
19-078	8360	Facilities	Dr. Miller's Office Flooring Replacement			17,115	(17,115)		2019	
19-079	7041	Diagnostic Radiology	Atlas Loading Car and Transfer Carriage			11,479	(11,479)		2019	
19-080	9200	IS	Hyperbaric Room Remodel			37,188	(37,188)		2019	
19-081	6230	OR	Rapid Disinfecter UVC Mobile Disinfection System			60,579	(60,579)		2019	
19-082	9200	IS	Moveit Automation Enterprise Software			12,873	(12,873)		2019	
19-083	6210	OR	Glidescope Advanced Video Laryngosocpy			19,303	(19,303)		2019	
18-039	9200	IS	Lab Handheld Data Manager Interface-Telcor Project			13,509	(13,509)		2018	
18-040	9200	IS	Addition to Bridgehead Filestore Archiving			19,460	(19,460)		2018	
18-041	8360	Facilities	Replace Doors and Transaction Windows			43,172	(43,172)		2018	
18-044	7047	Mamography	Mammo Plus Reading Software			26,800	(26,800)		2018	
18-045	7041	Diagnostic Radiology	Radiologist Reading Stations			49,550	(49,550)		2018	
19-084	9200	IS	Thycotic Secret Server			13,385	(13,385)		2019	
18-046	8360	Facilities	Fire Doors			36,245	(36,245)		2018	
19-085	6230	Emergency Room	I-Stat			21,470	(21,470)		2019	
19-086	9200	IS	Malware Software			13,780	(13,780)		2019	
19-087	9200	IS	VMWARE Software			28,856	(28,856)		2019	
19-088	6170	Respiratory Therapy	VMAX PFT WIN 10 Software Upgrade			9,717	(9,717)		2019	
19-089	6210	OR	Trimano Fortis Support Arm			17,118	(17,118)		2019	
19-090	8360	Facilities	ADU 11 Supply Fan Upgrade			19,356	(19,356)		2019	
19-091	8360	Facilities	2019 Bobcat Toolcat 5600			62,415	(62,415)		2019	
19-092	7091	PT	Humanform Power Procedure Chair			12,659	(12,659)		2019	

August 14, 2019 Finance Committee

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						June 2019	Budget Balance			
19-093	8360	Facilities	Lab Ventilation Improvement			20,240	(20,240)			2019
19-094	7010	LAB	I-Stat Hand Held Blood Analyzer Addition			3,210	(3,210)			2019
19-095	9200	IS	Dragon Medical One Software Upgrade			16,975	(16,975)			2019
19-096	9862	Crisis Stabilization	Healthcare Information System Software			50,000	(50,000)			2019
19-096	9863	Amb Detox Gant	Healthcare Information System Software			45,000	(45,000)			2019
				2018	1,784,798	-	1,135,837	648,962		
				2019	5,141,070	-	2,467,272	2,673,797		
				2020	795,734	-	-	795,734		
					<b>7,721,602</b>	-	<b>3,603,109</b>	<b>4,118,493</b>		

Bartlett Regional Hospital  
 Facility Capital Projects  
 As of August 1, 2019

Capital Project	Estimate	Budget	Variance	Notes
ASU-11 Supply Fan Upgrade	263,176	-	263,176	* Unplanned Repair
Endoscopy Workroom Ventilation Upgrades	172,683	99,000	73,683	* Under estimated project
Central Sterilization Room Equipment Upgrades	186,575	200,000	(13,425)	
Lab Ventilation and Cooling Upgrades	427,180	250,000	177,180	* Under estimated project
Chiller No. 2 Replacement	229,975	50,000	179,975	* Under estimated project
ASU-1 Heating Coil Upgrade to Glycol	203,074	100,000	103,074	* Under estimated project
ER Waiting Area/PAS Area	-	-	-	* Unplanned Project
<b>Total</b>	<b>1,482,663</b>	<b>699,000</b>	<b>783,663</b>	

There is a shortfall of \$785,000 that will be funded by the following projects that won't be completed in the current year.

Ground Floor Asbestos Tile Replacement	-	500,000	(500,000)	Delayed
Oncology Module - Meditech	-	189,000	(189,000)	Delayed
Replacement Sleep-Off Vans	-	120,000	(120,000)	No longer a Program at BRH
	-	809,000	(809,000)	
<b>Total Net Capital Spending</b>	<b>1,482,663</b>	<b>1,508,000</b>	<b>(25,337)</b>	

The items marked with an "\*" require board approval as they are either unbudgeted or over budget threshold variance. By substituting projects that won't be completed the Total Capital Budget spending will not be exceeded.

# Bartlett Regional Hospital

3260 Hospital Drive, Juneau, Alaska 99801

907.796.8900

[www.bartlethospital.org](http://www.bartlethospital.org)

DATE: August 8, 2019  
TO: BRH Finance Committee  
FROM: Kevin Benson, CFO and Billy Gardner, COO  
RE: Capital Projects

There are a number of facility projects that BRH must address (see attached Listing). Most of these projects were included in the Capital Budget. However even if they were included, the estimated cost was significantly underestimated and amounts to \$783,663. Due to the cost variance in order to proceed with these projects approval of the Board of Directors is needed. In order to fund this variance, projects that were included in the budget will either be delayed or will not be completed.

Preliminary Design/Cost Estimates have been obtained for these projects better defining the scope of the projects and associated cost. Listed below is a description of each project.

## **ASU-11 Supply Fan Upgrade:**

BRH surgery wing includes three operating suites along with surgery support spaces located on the 2<sup>nd</sup> floor of the hospital. The surgical area of the hospital was last renovated in 1988, and records show that the supply fan for ASU-11 about 8-9 years ago when there was an unexpected failure. Data is not available on this replacement fan but it appears to be a like for like replacement of the original. Murray and Associates did perform an evaluation on the HVAC system serving these spaces in 2015. An outcome of this evaluation was the 2016 BRH OR Surgery Ventilation System Upgrade which address the cooling, dehumidification and humidification needs of the space. This work did not include any modifications to the supply or return fan for the air handler unit and made minimal modifications to the internal parts of the air handler unit. Air filtration occurs with the ASU-11 downstream of the supply fan section.

As noted above, the issues related to temperature and humidity to the operating spaces were addressed in the 2016 upgrades. However, with the original supply fan and return fan in the ASU-11 unit, there are issues regarding upgrades to air ventilation rate requirements for the operating room. In addition, if ASU-11 fails, all surgery suites will have to be shut down until repairs or replacements are made. Replacement of the supply fan to ASU-11 with a more powerful unit is critical to maintaining the minimum flow rates to the surgical operating rooms. Replacing SF-11 with a pair of plenum style fans would allow for a higher air flow rate and would, in turn, offer a redundancy that is currently not present.

We estimate a five-month lead time to get the equipment built and shipped to Juneau. February has the lowest volumes for surgeries and would have the least amount of impact on operations for installation. We estimate the OR will be down for about five days (we would schedule the down time to

occur over President's Day weekend for minimal OR time loss) and strongly encourage Surgeons and staff to plan vacation time for this week.

### **Endoscopy Workroom Ventilation Upgrades**

The endoscopy work rooms in BRH share ventilation air from ASU-11 and EF-11 with Surgery Operating Suites 1-3. These Areas have strict ventilation requirements that exceed the current capacity of the air handling system. The three OR suites requirements are currently starving the Endoscopy Suite of necessary ventilation to meet regulation. This project, along with other ASU-11 upgrades, will be necessary to ensure compliance. This project will run concurrent with the ASU-11 Supply Fan Upgrade to minimize operational flow impacts on the schedule.

### **Central Sterilization Room Upgrades**

This project allows for the addition of an Ultrasonic Ophthalmology Instrument cleaner, a new triple sink, a new sterilizer, a new pass through window to the CSR, and new sterilizer pumps. Modification of the existing Central Sterilization room is complex and will require several phases of construction. The project will take 4 weeks to complete but should not result in any OR downtime.

### **Lab Ventilation and Cooling Upgrades**

The laboratory is located on the second floor of the Main Hospital and directly over the facility boiler room. This project will increase ventilation and cooling in the lab and reduce the overall temperature of the space. Several primary factors contribute to the elevated lab temperatures: excessive heat transfer through the floor and reduced cooling air from AHU-15. The average floor temperature throughout the lab is 83 degrees F, with some places reaching 91 degrees F. In addition to the added heat load from the floor, the cooling system is not capable of operating at full capacity during the winter. The only cooling to the lab comes from tempered outside air through AHU-15, but during winter months the air flow is reduced as much as 70% to prevent the heating coil from freezing. This reduction in cooling air amplifies the excessive heat load in the space and results in air temperatures regularly exceeding 80 degrees F.

Overheating in the lab has been a well-documented problem for over 10 years and is much more than just an employee comfort issue. Sensitive laboratory supplies have strict storage temperature requirements and several of the supplies used in this area must be stored in other spaces to meet those requirements. Recently, we have had to dispose of supply kits which were exposed to out of range temperatures in the lab. Additionally, some lab equipment and processes require ambient air temperatures lower than the building mechanical system is capable of achieving. This has forced staff to implement work-around solutions and carefully monitor temperatures to achieve required results.

The proposed design seeks to address both causes of excessive heat in the lab. The first step is to eliminate or significantly reduce the heat load from the floor, the second step is to ensure that full design air flow can be supplied to the space throughout the year. These two areas of improvement should allow the existing ventilation/cooling system to function as originally designed and maintain the space throughout the year at the desired temperature set point.

### **Chiller No. 2 Replacement**

The existing water chiller #2 located on the roof of BRH has reached the end of its useful life. It also broke down this July and required repairs. Continuing to rely on the unit will lead to increasing maintenances costs and reduced reliability. This project will replace the chiller, adjacent isolation

valves, and related sensors and accessories to ensure facility chilled water operation and to reduce maintenance requirements. The replacement will be sized to match existing performance, size and electrical load as closely as possible to limit additional work.

### **ASU-1 Heating Coil Upgrade to Glycol**

Project scope is to upgrade the heating loop at the main heating coil for ASU-1 to an antifreeze loop to prevent coil damage from freezing conditions. Ideally the work will be performed during warmer weather where the need for the heating coil is minimized and heating needed can be picked up by the Heat Recovery coil and the ASU-1 hot deck heating coil. This heating coil supplies heat to one third of the main hospital building and to multiple floors. It is imperative that we minimize the risk of coil failure due to freezing.

### **Other Future Projects in Cue:**

**Stairwell doors:** Current design poses a safety risk as doors freely swing into the stairwell. There is no warning to a person who is on a landing between floors and they could very easily be struck by a door being swung open. We are finding design solutions (new doors with windows, slower hinges, new door frames etc.) and will have pricing soon.

**After hours Main Hospital Lockdown:** We are planning on installing badge readers on all entrances into the main hospital after hours. We have had incidences where disgruntled members of the public have malingered on the second and third floor of the main hospital after being discharged from the ED. This has resulted in arson on the second floor and misuse of facilities on the third. The lock down project is estimated at \$206,000. We suspect the actual costs of this project, however, may come back much higher than the above estimate.

**ER Waiting Area/PAS Desk:** The first task I was given in my new role as COO by Chuck was to escalate the priority of this project. While the overall design and layout of our ED will need long term strategies, we must still look at short term improvements of the patient waiting area to ensure employee safety, patient safety, and operational workflow. The first meeting I attended to discuss this project was on June 25th with our safety officer, security officer, the PAS Director, Facilities Director and the ED Director. Recent events involving employee safety at the PAS desk were discussed to determine the scope of the project and the measures which needed to happen immediately to ensure the safety of our employees. Marc Walker and I then met with Wilson Engineering on August 1<sup>st</sup> to begin getting construction designs and costs together so that safety concerns are adequately addressed for the employees while still maintaining a presence in the ED waiting area for patient safety and registration.