Bartlett Regional Hospital

Minutes BOARD OF DIRECTORS MEETING December 28, 2021 – 5:30 p.m. BRH Boardroom / Zoom videoconference

CALL TO ORDER - Meeting called to order at 5:32 p.m. by Kenny Solomon-Gross, Board President. Roll call taken.

BOARD MEMBERS PRESENT (Zoom attendees italicized)			
Kenny Solomon-Gross, President	Rosemary Hagevig, Vice-President	Mark Johnson, Secretary	
Brenda Knapp	Lance Stevens	Deb Johnston	
Hal Geiger	Iola Young	Lindy Jones, MD	

ALSO PRESENT (Zoom attendees italicized)

Jerel Humphrey, Interim CEO	Kevin Benson, CFO	Kim McDowell, CNO
Dallas Hargrave, HR Director	Vlad Toca, COO	Karen Forrest, Interim CBHO
Keegan Jackson, MD, COS	Michelle Hale, CBJ Liaison	Barbara Nault, Legal Advisor
Robert Palmer, CBJ Law	Sarah Griffith, Elgee Rehfeld	Karen Tarver, Elgee Rehfeld
Joseph Roth, MD	Anita Moffitt, Executive Assistant	

APPROVE AGENDA – Request made to move the Compliance Update from Old Business to the Board Compliance and Audit Committee Report section. *MOTION by Ms. Hagevig to approve the agenda as amended. Mr. Geiger seconded. There being no objections, agenda approved as amended.*

PUBLIC PARTICIPATION – None

CONSENT AGENDA - MOTION by Ms. Hagevig to approve the consent agenda as presented. Ms. Knapp seconded. There being no objection, the November 23, Board of Directors meeting minutes and October 2021 Financials approved.

NEW BUSINESS

Financial Audit Review - Sarah Griffith, of Elgee Rehfeld, introduced herself as the partner in charge of the BRH stand-alone financial statement audit. She then recognized Zoom participant Karen Tarver as the auditor in charge of the CBJ audit and acknowledged Adam Sykes' involvement in the BRH audit, especially as it pertains to the Revenue Cycle. A summary level of the June 30, 2021 financial statement audit to be presented this evening. BRH grants, which are subject to federal and state single audits, are included in CBJ's audit and is not yet complete. It was noted that BRH is an enterprise fund included in the CBJ ACFR. Copies of the letter to the board and the audited financial statements are included in tonight's packet. Ms. Griffith provided an overview of the timing and audit process. A draft form of the audit results had been presented at the December 10th Finance Committee meeting with most of the board members in attendance. Financial statements were issued in its final form on December 15th. Financial statement audit results were unmodified, meaning financial statements are materially correct. The financial statements contain significant estimates to the following: 1) Net Pension Liability, OPEB Assets and Liabilities and Deferred inflows and outflows. 2) Patient Accounts receivable 3) Provider relief funds. Draft financial statements were prepared by Elgee Rehfeld based on accounting system and management provided data. Management retains responsibility of the financial statements by reviewing the draft and accepting it. She reported there were no material audit adjustments identified this year. Statement of Net Position overview provided. Total assets: \$172 million compared to \$162 million the prior year. Total liabilities: \$101 million compared to \$96 million

the prior year. Net position of BRH is \$65 million. Pension adjustments required by GASB have significant impact on financial statement. Taking into account all of the assets, liabilities and accruals associated with the net pension and OPEB obligations, it was a \$2 million decrease in expense. Summarized income statement overview provided: \$118 million in revenues compared to \$103 million the prior year. Expenses of \$122 million compared to \$105 million in prior year. Change in net position \$4 million compared to \$8 million in prior year. Suggestions for improvement provided as part of the audit and discussed at length with management, Board President and Finance Committee Chair. A finding of deficiency in internal control over financial reporting related to purchasing processes, specifically surrounding credit cards identified. Auditor recommendation associated with this is that BRH perform an entity wide risk assessment of the organization and ensure there are policies and procedures in place to mitigate any risks. Another matter identified, that did not rise to the level of a finding, is related to gift card purchasing and requirements to be reported as taxable compensation to employees. Management has an action plan in place to address these issues. There are no prior year comments to report on. CBJ state single audit results are pending and there could be findings or issues as a result of the programs being audited. The single audit was not issued at the time of the financial statements audit due to late guidance from the federal government pertaining to how to audit some of the programs CBJ has. Results are anticipated to be completed in January. The entity wide financial statement audit results, however, will be presented to the Assembly on January 4th. She expressed thanks and appreciation for BRH staff during this process, specifically Mr. Benson, Ms. Robert and the rest of the accounting team. They were great to work.

MOTION by Ms. Johnston that the Board accept the audited Financial Statement Report and Letter to the Board. Mr. Stevens seconded. There being no objections, *MOTION approved.* Mr. Solomon-Gross thanked Ms. Griffith and Ms. Tarver for their diligence and wished them a happy new year.

MEDICAL STAFF REPORT – Dr. Jackson noted the December 7th meeting was very brief and reported the following: There had been a presentation of the high sensitivity troponin protocol/test used to rule out heart attack. ER physicians and hospitalist worked together to educate other providers on this test. A second reading and request for approval of the Bylaws revision to Article 8.9 related to physicians and other practitioners in training. Approval of the revision was unanimous. Conversion of old charts form Meditech Magic to Meditech Expanse not complete yet. Discussion held about the need to provide Meditech Magic training to new providers so they can access old charts. Physician Health and Wellness committee survey will be open until January 1st. This survey is to help identify what providers in the community want and need. Election of officers for 2022 was held. Dr. Nicholas Rosenfeld elected Vice Chief of Staff and Dr. Amy Dressel, Secretary/Treasurer. Dr. Joseph Roth replaces Dr. Keegan Jackson as Chief of Staff.

MOTION by Mr. Stevens to accept the Article 8.9, Physicians and other Practitioners in Training Medical Staff Bylaw revision. Ms. Hagevig seconded. Clarification provided for Mr. Geiger that although it is our process, there had been nothing written in the bylaws outlining the requirement that physicians and practitioners in training will be directly supervised by a credentialed physician of the medical staff. Ms. Knapp obtained confirmation that this bylaw revision has been reviewed and approved by legal and the Medical Staff. Mr. Geiger identified a clerical error, "Trainee" in the last sentence should not be capitalized, and made a friendly amendment to the MOTION, by laws approved with the correction of clerical error identified. Mr. Stevens agreed. There being no objection or further discussion, Medical Staff Bylaws revision to Article 8.9, Physicians and other Practitioner in Training approved as amended.

COMMITTEE REPORTS:

Physician Recruitment – Draft minutes from the November 30th meeting in the packet. Mr. Johnson reported the Committee approved the recruitment of one orthopedic surgeon and one neurologist. Three orthopedic surgeons have or are leaving the practice in a few months. There will be no local neurologist after Dr. Hunter-Joerns' retirement this month. Mr. Humphrey stated the orthopedic surgeon we need would need to be able to provide total joint care. *MOTION by Mr.*

Johnson on behalf of the Physician Recruitment committee that the Board approve recruitment of one orthopedic surgeon and one neurologist. Ms. Johnston seconded. There being no objection, MOTION approved. Mr. Humphrey stated that Dr. Hightower has held discussions with Dr. Garcia about joining Juneau Bone and Joint Center but does not know if anything has come of those discussions. Mr. Stevens initiated discussion about the need for recruitment of a female general surgeon. Personal knowledge of people forgoing surgery or leaving Juneau to seek care from female surgeon noted by Mr. Stevens. Mr. Johnson has heard the same and suggested if we had a female surgeon in town, perhaps patient numbers would increase. Locum services provided by Dr. Jennifer Schmidt are limited due to contractual issues, not credentialing issues. Dr. Jones stated that if we continue with locum coverage, we need to look at the parameters. Mr. Humphrey will continue discussions with Drs. David and Ben Miller and key stakeholders about this specialty. Physician Recruitment Committee meeting will be scheduled for further discussions.

Planning Committee - Mr. Stevens reported the draft minutes from the December 3rd meeting accurately reflect the meeting. He noted that due to the weather, he's not sure if the Crisis Stabilization building project is still on track.

Committee of the Whole – Draft minutes from the December 9th meeting in the packet. Mr. Solomon-Gross reported it was a good meeting. Loren Jones and Kim Russel's presentations provided valuable information and there was more direction given from the Board than he had expected.

Finance Committee – Ms. Johnston noted the bulk of the December 10th meeting was spent talking about the financial audit. She stated the draft minutes, included in the packet, accurately reflect the conversations of the meeting.

Board Compliance and Audit Committee: Ms. Young reported draft minutes from the December 20th meeting, included in the packet, accurately reflect the meeting. She then provided the following compliance update: She and Mr. Solomon-Gross attended a meeting with Mr. Humphrey and Mr. Overson to discuss additional resources for the Compliance Department. A decision has been made to hire one FTE, recruitment process has begun. Mr. Solomon-Gross noted that Mr. Overson has provided the CEO a list of the top priority compliance projects currently being worked on. He also stated that an outside company will provide the compliance training for the Board in 2022.

MANAGEMENT REPORTS:

Legal Report – Ms. Nault reported that she is working with the Compliance Director on drafting a new service line policy. She is reviewing contracts related to the hospital's sleep lab and a software agreement for respiratory therapy services. She provided the following updates on the 340B program: A voluntary disclosure letter has been prepared and circulated for input. We are waiting for a reconciliation being prepared by Verity, Bartlett's contract pharmacy administrator, and 340B Direct, the pharmacy administrator. This reconciliation is relevant to determining specific refunds due to manufacturers. This is expected to be received next week. She continues to work with senior leadership on the contracting process improvement.

HR Report – Mr. Hargrave highlighted the COVID vaccination policy, incentive pay for employees to work extra shifts and traveler pay market place changes from his written report. He also reported that the scope of services in our current contract with BE Smith, not only covers providing interim leadership, but also executive recruitment. He, Mr. Solomon-Gross and Kim Russel believe the correct path to move forward with executive recruiters is to engage with BE Smith under the current contract. BE Smith is an industry leader in executive search firms specializing in rural areas. If the Board would prefer not to use BE Smith, an RFP can be issued to find a new firm. Doing so will add months to the CEO recruitment efforts. Mr. Stevens and Mr. Geiger expressed support in moving ahead with BE Smith. Mr. Hargrave given direction to engage BE Smith to recruit a new CEO.

CNO Report – Ms. McDowell reported there has been no COVID patients in house over the last week and a half but there has been an increase in positive cases in the ED. In response to Ms. Knapp's query, Dr. Jones said it hasn't been genetically sequenced here, but we have to assume the Omicron variant is present in Juneau. In response to Ms. Hagevig, he reported that BRH has ample test supplies but home test kits are being used up very quickly and in short supply.

CBHO Report – Ms. Forrest reported her written reports will now include a section of overarching system improvements. Behavioral Health is trying to stabilize nursing services. An interim nursing director for Behavioral Health will start on January 10th. Traveler rate of pay has been increased to be in line with national averages. Rainforest Recovery has 7 of 8 beds filled. MHU is starting to get patients through statewide referrals and has 6 of 7 beds filled with patients from out of area. She is working on policy development and refinement. Mr. Johnson asked how patients get into the Applied Behavioral Analysis program and noted the long wait list. Ms. Forrest stated this is a first come, first served program. There is great need for this highly intensive program and she suggests expanding it if financially feasible. Ms. Young asked how utilization of the part time pediatrician in BOPS is working out. Ms. Forrest reported staff is working with IT to pull requested data. The pediatrician is reviewing intakes for medical input and following up with primary care physicians (PCPs) when there are areas of concern or gaps in medical information. She also provides pediatric consults for behavioral health staff and helps with facilitated exams for younger patients receiving services and being prescribed controlled substances through telehealth providers. The pediatrician works part time hours and the number of kids coming in without primary care providers is relatively low. This is a new position and still under development. We are gathering data for more thorough conversations about the work happening in this position and to share with the board. Dr. Jones reported his sense is that this position is used to facilitate the provision of care in the behavioral health aspect given our current situation with telemedicine physicians. It is not in competition with the private practices. It makes it easier for people to get needed mental health services. His opinion is that this position has been successful and has not entered down the slippery slope of Bartlett providing primary pediatric care.

COO Report – Mr. Toca reported Diagnostic Imaging (DI) has seen increases from the prior 12 months by 17%. Marketing efforts of bone density scans have been successful, numbers have increased by 300%. The Joint Commission (TJC) survey went very well for DI. All open positions in the lab have been filled. The team is trying to be proactive to address supply issues in the lab and pharmacy. Speech Therapy has reduced the number of patients on the waitlist for services from 60 to 30. The pharmacy is the first in Alaska to provide Jelmyto, a new cancer treatment. It's a very effective medication but requires a lot of coordination between the OR, Infusion Therapy and the Pharmacy to administer. The pharmacy was recognized by TJC surveyors for being small but mighty. Departments throughout the hospital did amazingly well during the survey. There was a significant increase in visitor engagement on our website and social media pages thanks to our marketing efforts. Erin Hardin has been hired as the new Director of Marketing. She will begin her new role on January 23rd. Mr. Geiger initiated discussion about what the marketing graphics represent in Mr. Toca's report. He recommends, in the future, using bigger captions, with terms defined, to explain the graphics. Mr. Solomon-Gross agrees and looks forward to seeing next month's report in an easier to read fashion.

CFO Report – Mr. Benson reported we continue to work on the corrective action plan that has been developed to address the deficiency identified during the audit process. Many of the steps have already been implemented and we will continue to work on the rest of the action plan going forward. In time there will be a follow-up review to see if there is any aspect of the deficiency that has been missed. He noted it's now calendar year end so the finance department is working on year end taxes and other year-end reporting requirements. Mr. Solomon-Gross asked why Medicaid suspended \$3.8 Million in BRH claims as noted in the CFO report. Mr. Benson explained that this was due to a programming change in Medicaid's billing system made effective July 1st. There was an issue with a particular pharmaceutical that was not mapped correctly within the Medicaid processing system and when the system encountered a claim with that code, it kicked it out for review or suspended processing. We were in communication with the state to determine what the issue was. The issue hasn't been resolved yet but the state had asked if they could process claims, having that particular issue to get the rest of the claim paid. After getting their software issue resolved, they will reprocess the claims and pay whatever funds should be forthcoming. As of last Thursday, a lot of those claims were released. For \$3.5 Million in charges, we received \$2 Million. They still have to resolve their software issue and reprocess the claims. Mr. Johnson obtained confirmation that this issue affected all hospitals.

CEO Report – Mr. Humphrey is anxious to get a handle on the issue with general surgery. The Physician Recruitment Committee will reconvene at some point soon. He continues to meet with key stakeholders and physicians. Mr. Stevens congratulated the team for the great job on TJC survey and asked about the engineer reviewer still to come in late December. Mr. Humphrey acknowledged staff did an outstanding job with a great team effort and expressed appreciation for Mr. Solomon-Gross and Ms. Hagevig's attendance during the survey. The engineer reviewer had come on December 20th for a couple of days. There were a few findings but nothing major and some were fixed immediately. Mr. Stevens obtained confirmation that the physician call space is out for bid now and should be completed in about 5 months.

Discussion held about asbestos abatement for the project. The delay in the project has been due to decommissioning the old IT processors currently in that space.

CBJ Liaison report – Ms. Hale had no report but wanted staff and Board members to know how impressed she is by their dedication and hard work.

PRESIDENT REPORT – Mr. Solomon-Gross thanked outgoing Chief of Staff, Dr. Keegan Jackson. He read a letter of acknowledgment of Dr. Jackson's time in this position. As a thank you, a leaf will be engraved with Dr. Jackson's name on it and put on the Bartlett Regional Hospital Foundation's Giving Tree. Dr. Jackson expressed thanks and said it's been an eye opening experience. Dr. Roth introduced as the new Chief of Staff. He thanked everyone for their time and said he hopes the pandemic mellows out and makes things easier next year than it has been in the past two. Dr. Jackson noted Dr. Roth has been in this role before and he is heavily involved in the Alaska State Medical Association. She is looking forward to being his past Chief of Staff this year. Mr. Solomon-Gross acknowledged TJC report was very favorable. He wants senior leaders and directors to know how much he and the rest of the board appreciate how dedicated and hardworking BRH staff is. He noted that the facilities department had been commended as having the cleanest shop the surveyor has ever seen and both surveyors were very complimentary of staff. Ms. Hagevig gave an extra shout out to Gail Moorehead for her leadership throughout the survey process. Mr. Solomon-Gross noted the Strategic Planning retreat will be held on Saturday, January 8th.

ELECTION OF BOARD OFFICERS – Mr. Solomon-Gross opened the floor for nomination of calendar year 2022 Board Officers.

- Board President Ms. Knapp nominated Kenny Solomon-Gross for a second term as Board President and
 provided many compelling reasons for doing so. Mr. Geiger seconded. Mr. Solomon-Gross accepted the
 nomination. No other nominations. *MOTION by Ms. Hagevig that nominations be closed and unanimous ballot approved. Ms. Knapp seconded. There being no objection,* Mr. Solomon-Gross approved for Board
 President. Mr. Solomon-Gross thanked everyone for their vote of confidence and promises to work as hard next
 year as he has this past year.
- Vice President Ms. Knapp nominated Ms. Hagevig for Board Vice-President and provided many compelling reasons for doing so. Ms. Hagevig accepted the nomination. No other nominations. *MOTION by Mr. Stevens that nominations be closed and unanimous ballot approved. Ms. Knapp seconded. There being no objection, Ms. Hagevig* approved for Board Vice President.
- Secretary Mr. Stevens nominated Deborah (Deb) Johnston for Board Secretary. Mr. Johnson seconded. Ms. Johnston accepted the nomination. No other nominations. *MOTION by Ms. Hagevig that nominations be closed and unanimous ballot approved. Ms. Knapp seconded. There being no objections, Ms. Johnston approved for Board Secretary.*

Mr. Solomon-Gross recognized Mr. Johnson for his time on the Executive Committee and his 8 years on the board. Whether in agreement or not, Mr. Solomon-Gross values Mr. Johnson's opinions and greatly appreciates him for making him look at things differently. He was very helpful on the Executive Committee and in supporting Mr. Solomon-Gross during his first year as Board President. (Mr. Johnson noted he may have served the role as devil's advocate.) Mr. Solomon-Gross extended a welcome to the Executive Committee to Ms. Johnston and noted Mr. Stevens will remain on the committee as the past president.

BOARD CALENDAR – January calendar reviewed. Planning Committee meeting will not be held on January 7th. No other changes. Mr. Solomon-Gross will have new committee assignments to Ms. Moffitt by Tuesday of next week.

BOARD COMMENTS AND QUESTIONS – Mr. Johnson noted that he has seen amazing progress at Bartlett in the 8 years he has served on the board, Behavioral Health being an example. He feels there is value, in recording for history, how much progress has been made at this hospital. We now provide a lot of services that people used to have to go somewhere else to receive. While it's happened gradually, it continues to progress. Ms. Hagevig agrees and sighted Oncology as a good example. Mr. Solomon-Gross congratulated Dr. Jones, Ms. Johnston and Mr. Geiger for their reappointment to the Board. Mr. Stevens reported that he will be taking on a new role in the company he works for and will be transitioning to Anchorage at some point in the new year. He will continue to provide as much guidance and participation to the board as possible until that time comes, probably mid to late year. Most meeting participation will be virtual. Ms. Hale congratulated Mr. Stevens. Mr. Stevens will keep the Board and Assembly abreast of his status.

EXECUTIVE SESSION – *MOTION by Mr. Stevens to recess into executive session to discuss several matters as written in the agenda:*

• Those which by law, municipal charter, or ordinance are required to be confidential or involve consideration of records that are not subject to public disclosure, specifically the Credentialing report, Medical Staff Meeting minutes, the patient safety dashboard and 340B updates.

And

• To discuss possible BRH litigation, specifically a candid discussion of facts and litigation strategies with the BRH and Municipal attorney. (Unnecessary staff and Medical Chief of staff may be excused from this portion of the session.)

And

• To discuss information presented that the immediate knowledge of which would clearly have an adverse effect upon the finances of BRH; that being a discussion about campus planning. (Unnecessary staff and Medical Chief of staff may be excused from this portion of the session.)

Ms. Johnston seconded. The Board entered executive session at 7:17 p.m., after a 5-minute break. They returned to regular session at 8:35 p.m.

MOTION by Ms. Hagevig to approve the credentialing report as presented. Ms. Knapp seconded. There being no objections, credentialing report approved.

Mr. Stevens reported that coming out of Executive Session, the Board gave direction to Senior Leadership regarding campus planning.

Mr. Solomon-Gross thanked everyone for their time and wished all a safe and happy new year.

ADJOURNMENT: 8:36 p.m.

NEXT MEETING: 5:30 p.m. – Tuesday, January 25, 2022