



Board of Directors:
 Dr. John Frels
 Charles W. Papacek
 Cindy Sheppard
 Faye Sheppard
 Richard Wheeler

Lynn Falcone, CEO

Quality Care.
 Close to Home.

1200 N. Esplanade, Cuero, Texas 77954
 Phone: 361-271-1000 Fax: 361-271-1001

POSTED

Date 5-21-20@10:00

**NOTICE
 BOARD OF DIRECTORS
 CUERO REGIONAL HOSPITAL
 ANNUAL MEETING**

The Board of Directors of the Cuero Regional Hospital will hold their Annual meeting via conference call, Thursday, May 28, 2020, at 5:30 P.M. Board packet will be available online for viewing. The public toll-free dial-in number is 1-888-204-5987, access code 6265946 and this information will also be available on the Cuero Regional Hospital website – cuerohospital.org:

The subjects to be considered at such meeting are:

- I. Call to Order
- II. Oath of Office
- III. Election of Officers
- IV. Committee Appointments:
 - Standing Committees:
 - Joint Conference
 - Strategic Planning
 - Special Committees:
 - By Laws/Contract
 - Foundation
 - Investment/Finance
 - Physicians/Clinics
 - Scholarship
 - Facilities/Building
- V. Medical Staff Appointments were approved in 2019 and will run through 2021:
 - Chief of Staff – Dr. Paul Willers
 - Vice-Chief of Staff – Dr. Jennifer Gonzales
 - Secretary – Dr. Sheryl Mills
- VI. Adjourn into regular monthly meeting

Richard Wheeler, Board Chairman

I certify that, in compliance with the Texas Open Meetings Act, I provided this notice of this meeting to the DeWitt County Clerk and posted this agenda at the designated location at the DeWitt County Courthouse, Cuero, Texas, and also at the front entrance of Cuero City Hall and by the switchboard on the first floor of Cuero Regional Hospital, 2550 N. Esplanade, Cuero, Texas 77954 by 5:00 p.m., on the 22nd day of May, 2020.

Signature of Person Posting Agenda

ANNUAL MEETING

I. Call to Order

II. Oath of Office

Oath of Office will be sworn to by Mrs. Cindy Sheppard, Director, via conference call. Katherine Simon, Administrative Secretary/Notary, will meet Mrs. Sheppard to read the Oath of Office in person after the May Annual Board meeting.

III. Election of Officers

Chairman of the Board

Vice-Chairman of the Board

Secretary of the Board

IV. Committee Appointments

Current Committee Assignments

STANDING COMMITTEES:

Joint Conference – All Members

Strategic Planning – All Members

SPECIAL COMMITTEES:

By-Laws/Contract – Mrs. C. Sheppard, Mrs. F. Sheppard

Foundation – Dr. Frels, Mr. Papacek

Investment/Finance – Mrs. F. Sheppard, Mr. Papacek

Physicians/Clinics – Dr. Frels, Mr. Wheeler

Scholarship – Mrs. C. Sheppard, Mr. Papacek

Facilities/Building – Dr. Frels, Mrs. Faye Sheppard

V. Medical Staff Officers (were approved in 2019 and will run through 2021)

Chief of Staff – Dr. Paul Willers

Vice-Chief of Staff – Dr. Jennifer Gonzales

Secretary – Dr. Sheryl Mills



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Lynn Falcone, CEO

Board of Directors:
Dr. John Frels
Charles W. Papacek
Cindy Sheppard
Faye Sheppard
Richard Wheeler

1000 E. 1st Street, Cuero, TX 77953
714.233.2200 • Fax: 714.233.2201 • www.cuerohospital.org

NOTICE
BOARD OF DIRECTORS
CUERO REGIONAL HOSPITAL

POSTED

Date 5-21-20 @ 10:00

The Board of Directors of the Cuero Regional Hospital will hold their regular monthly meeting via conference call, Thursday, May 28, 2020, at 5:30 P.M. Board packet will be available online for viewing. The public toll-free dial-in number and access code is 1-888-204-5987, Access Code 6265946 and will be available on the Cuero Regional Hospital website – cuerohospital.org:

The subjects to be considered at such meeting are:

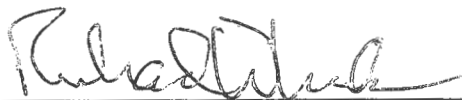
- I. Call to Order
- II. Community Input
- III. Review of Minutes of the April 23, 2020 Regular Called Meeting and the May 7, 2020 Emergency Called Meeting
- IV. Review of Financial Statement and Statistical Report
 1. Financial and Statistical Report
 2. Finance Committee Report
 3. Quarterly Investment Report
- V. Report from Chief of Staff – No Appointments or Reappointments
- VI. Report from Marketing & Development Director – List of Advertising and Events
- VII. Clinic Operations and KPI Report by Clinic Administrator
- VIII. Report on Quality/Safety, Finance and Community from Asst. Administrator
- IX. Report Quality/Safety, People, Growth and Community from Chief Nursing Officer
- X. Report on Quality/Safety, People, Growth and Community from Chief Executive Officer
- XI. Report on Quality
- XII. Compliance Update
- XIII. Committee Reports
- XIV. Old Business
- XV. New Business
 1. Board Self Evaluations – Review and Take Appropriate Action
 2. CEO Evaluation by Board – Review, Discuss and Take Appropriate Action
 3. Semi-Annual Nurse Staffing Plan – Review and Take Appropriate Action
 4. Quarterly QA/Risk Management/Safety Report – Review and Take Appropriate Action
 5. Investment Policy/Strategies/Approved Broker Annual Reports – Review and Take Appropriate Action

CUERO REGIONAL HOSPITAL

Cuero Regional Hospital • Cuero Home Health • Bill Dorn Medical Center

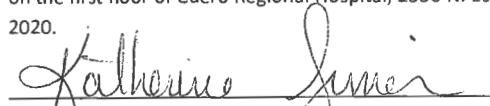
Open Medical Clinic • Bolso Family Practice • Maury Family Practice • Fortson Family Clinic • Johnson Medical Clinic

6. Annual Audit Report and Board Education – BKD, LLC – Review and Take Appropriate Action
 7. Approve Medical Staff By-Law Revisions – Review and Take Appropriate Action
 8. Current Capital Risks – Information Only
 9. Board Resolution regarding Authorized Users on Bank Accounts – Review and Take Appropriate Action
 10. Capital Expenditure Request to Replace Two Radiometer ABL80 Flex Blood Gas Analyzers – Review and Take Appropriate Action
 11. Request for Authorization to sign Surgical Equipment Service Agreement – Review and Take Appropriate Action
 12. COVID19 Pay – Discussion Only
- XVI. The Board reserves the right to retire into executive session concerning any of the items listed on this Agenda, whenever it is considered necessary and legally justified under the Open Meetings Act, for:
- 551.071 Consultation with attorney regarding pending, potential litigation involving the Hospital and/or Hospital District
 - 551.072 Deliberations about Real Property to deliberate the purchase, exchange, lease, or value of real property if deliberations in an open session would have a detrimental effect on the position of the District
 - 551.073 Deliberation Regarding Prospective Gifts or Donations
 - 551.074 Personnel matters relating to the appointment, employment, evaluation, discipline or dismissal of an officer or employee
 - 551.076 Deliberation regarding security devices
 - 551.085 Discussion of pricing and/or financial planning information related to negotiation for the arrangement of provision of services or product lines for DeWitt Medical District and proposed new physician services for DeWitt Medical District, and any other non-profit health maintenance organizations under the umbrella of DeWitt Medical District.
- XVII. Communications
- XVIII. Adjournment



Richard Wheeler, Board Chairman

I certify that, in compliance with the Texas Open Meetings Act, I provided this notice of this meeting to the DeWitt County Clerk and posted this agenda at the designated location at the DeWitt County Courthouse, Cuero, Texas, and also at the designated location for the City of Cuero and by the switchboard on the first floor of Cuero Regional Hospital, 2550 N. Esplanade, Cuero, Texas 77954 and online at cuerohospital.org by 5:00 p.m. on the 22nd day of May, 2020.



Signature of Person Posting Agenda

CUERO REGIONAL HOSPITAL
BOARD OF DIRECTORS MEETING

April 23, 2020

The Board of Directors of Cuero Regional Hospital held their regular monthly meeting, via conference call, on Thursday, April 23, 2020, DeWitt County, Texas, at 5:30 P.M. The agenda was posted in compliance with the Open Meetings Act. A board packet was posted online at cuerohospital.org, along with a dial in Toll-Free number and access code.

Board members present via conference call:

Mr. Richard Wheeler, Chairman
Mrs. Faye Sheppard, Vice Chairman
Mr. Charles Papacek, Secretary
Dr. John Frels, DDS, Member
Mrs. Cindy Sheppard, Member

Leadership members present via conference call:

Mrs. Lynn Falcone, Chief Executive Officer
Mrs. Denise McMahan, Assistant Administrator
Mrs. Judy Krupala, Chief Nursing Officer
Mr. Greg Pritchett, Clinic Administrator
Dr. Paul Willers, Chief of Staff
Dr. David Hill, Chief Medical Officer
Mrs. Kathy Simon, Administrative Assistant

Guests via conference call: Mr. Geoff Crabtree, Methodist Healthcare System

The Board Chairman called the meeting to order at 5:30 p.m.

CALL TO
ORDER

Community Input:

COMMUNITY
INPUT

Mr. Papacek moved, Mrs. Faye Sheppard seconded, to approve the minutes of the regular called meeting on March 26, 2020 and the special called meeting on April 15, 2020 as presented; the motion carried unanimously.

MINUTES

The Chief Financial Officer's Financial Statement and Statistical Report were provided. The Finance Committee did review the statements and report. The Clinic Administrator's Financial Report was reviewed and it was noted that there was a date typo in the report. The report was accepted as presented with the correction of the typo.

FINANCIAL/
STATISTICAL

Dr. Frels moved, Mrs. Cindy Sheppard seconded, to table the quarterly investment report until the May Board meeting; motion carried unanimously.

QUARTERLY
INV RPT

Mr. Papacek moved, Mrs. Faye Sheppard seconded, based upon the recommendation of Medical Staff, to approve the emergency privileges/appointments (limited to the privileges

MEDICAL
STAFF

delineated) as presented on the agenda for Hemant Dand, MD, Pulmonary Critical Care, Saad Farooqi, MD, Pulmonary Critical Care, Pritam Ghosh, MD, Pulmonary Critical Care, Eduardo Vadia, MD, Pulmonary Critical Care; the motion carried unanimously.

Mr. Papacek moved, Mrs. Faye Sheppard seconded, based upon the recommendation of Medical Staff, to approve the two year re-appointments (limited to the privileges delineated) as presented on the agenda for Mary Betterman, MD, Tele-Radiology, Christian Burrell, MD, Tele-Neurology, William Craig, MD, Cardiology, Phoebe Dann, MD, Tele-Radiology, Mark Heard, MD, Family Practice, Alyson Kirchner, MD, OB/GYN, Joshua Lucas, MD, Tele-Radiology, Raymond Reese, MD, Family Practice, Robert Ryan, MD, Urology, Nelson Uzquiano, MD, Tele-Radiology, John Welsh, MD, Emergency Medicine; the motion carried unanimously.

The Marketing and Development Director report was provided.

MARKETING

The Clinic Administrator's report was provided.

CLINIC
LEADERSHIP

The Assistant Administrator's report was provided.

ASST. ADMIN.
REPORT

The Chief Nursing Officer's report was provided.

CNO REPORT

The Chief Executive Officer's report was provided.

CEO REPORT

The reports on Quality for the hospital and clinics were provided.

QUALITY

The Assistant Administrator reported for compliance that there have been monthly HIPPA chart audits and that conflict of interest forms for staff have been signed.

COMPLIANCE

Committee Reports: None

COMMITTEE
REPORT

Old Business: None

New Business:

Medical Safety Plan, Utilization Review Plan, Risk Management Plan, Discharge Planning Program and Quality Assessment/Performance Improvement Plan were presented by the Assistant Administrator for annual review. Dr. Frels moved, Mrs. Cindy Sheppard seconded, to accept the plans and program as stated in the agenda; the motion carried unanimously.

ANNUAL RVW
APPROVAL OF
PLANS

The Assistant Administrator requested the capital expenditure purchase to Convert Chiller #2 to 460 Volt Power. A quote to convert chiller #2 to 460 Volt Power for \$25,617.00 from Trane was approved under emergency conditions by Mr. Wheeler on 4/1/2020. Dr. Frels moved, Mr. Papacek seconded, to approve the capital expenditure purchase up to \$25,617.00 from Trane to convert chiller #2 to 460 Volt Power; motion carried unanimously.

CHILLER 2 to
460 V POWER

The Assistant Administrator requested the capital expenditure purchase for Chiller Power

Cuero Regional Hospital
Board of Directors Meeting
3

480 Volt Conversion. A quote for the chiller power 480 Volt conversion of \$18,789.03 from Hall Electric was approved under emergency conditions by Mr. Wheeler on 4/1/2020. Dr. Frels moved, Mrs. Cindy Sheppard seconded, to approve the capital expenditure purchase up to \$18,789.03 from Hall Electric for Chiller Power 480 Volt Conversion; motion carried unanimously.

CHILLER PWR
480 V CONV.

Communication: None

There was no further business; Mr. Papacek moved, Dr. Frels seconded, to adjourn; the motion carried unanimously. The meeting adjourned at 6:09 p.m.

ADJOURN

Richard Wheeler, Chairman

Charles Papacek, Secretary

CUERO REGIONAL HOSPITAL
BOARD OF DIRECTORS MEETING

May 7, 2020

The Board of Directors of Cuero Regional Hospital held an emergency called meeting, via conference call, on Thursday, May 7, 2020, DeWitt County, Texas, at 1:00 P.M. The agenda was posted in compliance with the Open Meetings Act and was posted online at cuerohospital.org, along with a dial in Toll-Free number and access code.

Board members present via conference call:

Mrs. Faye Sheppard, Vice Chairman

Mr. Charles Papacek, Secretary

Dr. John Frels, DDS, Member

Board members absent: Mr. Richard Wheeler, Chairman, Mrs. Cindy Sheppard, Member

Leadership members present via conference call:

Mrs. Lynn Falcone, Chief Executive Officer

Mrs. Alma Alexander, Chief Financial Officer

Mrs. Denise McMahan, Assistant Administrator

Mr. Greg Pritchett, Clinic Administrator

Mrs. Kathy Simon, Administrative Assistant

The Board Vice -Chairman called the meeting to order at 1:00 p.m.

CALL TO
ORDER

The Chief Executive Officer noted the reason for the emergency called meeting was to have the board resolve that the Chief Financial Officer, Alma Alexander, has the authority to commit Cuero Regional Hospital to the PPP (Payroll Protection Plan) funds with the bank requesting the resolution. The Chief Financial Officer went over the PPP fund information in detail and answered questions that the board members presented. A motion was made by Mr. Papacek, seconded by Dr. Frels, to resolve that the Chief Financial Officer, Alma Alexander, has the authority to commit Cuero Regional Hospital to the PPP funds with the bank requesting the resolution; the motion carried with all three directors present voting unanimously.

BOARD
RESOLUTION
CFO AUTHORITY
FOR PPP FUNDS

The Chief Financial Officer asked the board to approve setting up a separate account for funds related to COVID-19, including the PPP funds, so that they can be more easily tracked. Dr. Frels moved, Mr. Papacek seconded, to approve the Chief Financial Officer to set up a separate account for COVID-19 funds, including the PPP funds, for better tracking purposes; the motion carried with all three directors present voting unanimously.

ACCOUNT FOR
COVID-19/PPP
FUNDS

There was no further business; Dr. Frels moved, Mr. Papacek seconded, to adjourn; the motion carried unanimously. The meeting adjourned at 1:12 p.m.

ADJOURN

Richard Wheeler, Chairman

Charles Papacek, Secretary

Financial Summary - APRIL 2020										
Summary Measures	Current Month	Budget	VAR to Budget	Prior Year	VAR to PY	YTD	YTD Budget	VAR to Budget YTD	PY YTD	VAR to PY YTD
EBIDA – Hosp. Only	\$773,100	\$271,352	\$501,748	(\$71,300)	\$844,400	\$8,176,531	\$6,308,750	\$1,867,781	\$5,763,996	\$2,412,535
Net Operating Income – Hosp. Only	(\$13,076)	(\$269,925)	\$256,849	(\$500,141)	\$487,065	\$208,141	(\$1,418,179)	\$1,626,320	(\$1,002,229)	\$1,210,370
Clinic - Net Operating Income	(\$27,216)	\$4,843	(\$32,059)	\$111,475	(\$138,691)	(\$298,330)	\$42,017	(\$340,347)	\$270,866	(\$569,196)
EBIDA Consolidated	\$745,883	\$276,195	\$469,688	\$40,175	\$705,708	\$7,878,201	\$6,350,767	\$1,527,434	\$6,034,863	\$1,843,338
Net Income - Consolidated	\$539,425	\$68,684	\$470,741	(\$132,991)	\$672,416	\$6,471,542	\$4,898,198	\$1,573,344	\$4,838,563	\$1,632,979
Net District Tax Revenue	\$15,870	\$66,000	(\$50,130)	\$88,691	(\$72,821)	\$4,284,017	\$4,400,000	(\$115,983)	\$3,985,754	\$298,263
Nursing Home Revenue	\$563,848	\$267,766	\$296,082	\$166,984	\$396,864	\$2,277,714	\$1,874,360	\$403,354	\$1,584,172	\$693,542
Admissions										
Admissions	64	64	0	62	2	531	550	(19)	533	(2)
Patient Days	192	238	(46)	188	4	1,686	1,818	(132)	1,758	(72)
ADC include Obs	8.2	10.0	(1.8)	8.4	(0.2)	9.8	10.9	(1.1)	10.7	(0.9)
Outpatient Visits (ex RHC & ED)	2,515	3,708	(1,193)	3,694	(1,179)	24,022	25,289	(1,267)	25,168	(1,146)
Clinic Visits	3,859	6,235	(2,376)	5,937	(2,078)	37,868	43,137	(5,269)	43,706	(5,838)
Births	17	13	4	9	8	89	87	2	81	8
ED Visits	508	801	(293)	802	(294)	5,896	5,579	317	5,570	326
Total Surgeries/less Endo	28	64	(36)	63	(35)	371	411	(40)	398	(27)
Revenue/Net Revenue										
Net Revenue	\$2,619,259	\$2,515,983	\$103,276	\$2,105,465	\$513,794	\$18,416,748	\$18,961,337	(\$544,589)	\$18,028,816	\$387,932
Net Revenue PAPD	\$3,293	\$2,391	\$902	\$1,729	\$1,564	\$2,446	\$2,368	\$77	\$2,374	\$72
Deductions as % of Gross	68%	60%	8%	61%	7%	65%	60%	5%	61%	4%
Expenses										
Total Expenses	\$2,632,335	\$2,785,908	\$153,573	\$2,605,606	(\$26,729)	\$18,208,607	\$20,379,516	\$2,170,909	\$19,031,045	\$822,438
Total Expenses PAPD	\$3,310	\$2,648	(\$662)	\$2,140	(\$1,169)	\$2,418	\$2,545	\$127	\$2,506	\$88
Total Staffing PAPD	\$1,675	\$1,321	(\$354)	\$1,071	(\$604)	\$1,265	\$1,297	\$32	\$1,294	\$30
Supplies PAPD	\$344	\$314	(\$29)	\$209	(\$135)	\$242	\$316	\$73	\$285	\$42
Stats & Ratios -										
FTE's	205.50	202.30	3.20	219.87	-14.37	223.81	220.83	2.98	223.72	0.09
FTE/EEOB	7.75	5.77	1.98	5.06	2.69	6.33	5.87	0.46	6.25	0.09
Avg Hourly Rate	\$27.61	\$29.46	(\$1.85)	\$23.51	\$4.10	\$27.25	\$28.77	(\$1.52)	\$24.69	\$2.56
Net A/R Days	13.1	20.9	-7.8	24.9	-11.8	13.3	19.6	-6.3	20.6	-7.3
Cash Net Revenue %	104.2%	100%	4%	100.1%	4%	99.7%	100%	0%	99.7%	0%
Days Cash on Hand	330.00	180.00	150.00	266.00	64.00	330.00	180.00	150.00	266.00	64.00

CUERO REGIONAL HOSPITAL
 BALANCE SHEET
 PERIOD ENDED 04/30/20

	CURRENT YEAR-TO-DATE	PRIOR YEAR YEAR-TO-DATE
ASSETS		

CURRENT:		
CASH	14,607,617.92	13,925,388.04
MARKETABLE SECURITIES	2,046,620.24	2,023,774.62
ACCOUNTS RECEIVABLE	11,281,551.72	9,551,629.47
ALLOWANCE FOR UNCOLLECTIBLES	(8,374,739.65)	(6,873,140.69)
INTER-COMPANY RECEIVABLE	0.00	0.00
OTHER RECEIVABLES	5,180,640.53	4,148,768.33
INVENTORY	661,074.58	586,239.88
PREPAID EXPENSES	5,057,132.21	3,235,732.90
	-----	-----
TOTAL CURRENT ASSETS	\$ 30,459,897.55	\$ 26,598,392.55
OTHER ASSETS:		
ASSETS WHOSE USE IS LIMITED	16,403,597.97	11,827,666.58
OTHER ASSETS		
	-----	-----
TOTAL OTHER ASSETS	\$ 16,403,597.97	\$ 11,827,666.58
PROPERTY, PLANT, & EQUIPMENT:		
LAND	1,139,140.08	1,139,140.08
BUILDING AND IMPROVEMENTS	23,218,737.42	21,857,892.27
EQUIPMENT	32,587,199.32	29,119,366.17
	-----	-----
TOTAL PROPERTY, PLANT, & EQUIPMENT	\$ 56,945,076.82	\$ 52,116,398.52
LESS ACCUMULATED DEPRECIATION	(35,448,043.70)	(33,209,013.71)
	-----	-----
NET PROPERTY, PLANT, & EQUIPMENT	\$ 21,497,033.12	\$ 18,907,384.81
	-----	-----
TOTAL ASSETS	\$ 68,360,528.64	\$ 57,333,443.94
	=====	=====

CUERO REGIONAL HOSPITAL
 BALANCE SHEET
 PERIOD ENDED 04/30/20

	CURRENT YEAR-TO-DATE	PRIOR YEAR YEAR-TO-DATE
LIABILITIES AND FUND BALANCE -----		
CURRENT:		
ACCOUNTS PAYABLE	(707,478.84)	(910,553.88)
ACCRUED SALARIES & WAGES	(1,815,797.85)	(1,456,360.42)
ACCRUED INTEREST	0.00	0.00
CURRENT PORTION LTD	(126,082.87)	0.00
DUE TO/FROM 3RD PARTY PAYORS	(573,649.13)	(340,359.99)
DUE TO/FROM AFFILIATES	(4,571,217.23)	(2,819,357.09)
	-----	-----
TOTAL CURRENT LIABILITIES	\$ (7,794,225.92)	\$ (5,526,631.38)
LONG TERM DEBT:		
NOTES/LEASES PAYABLE	(1,614,539.57)	0.00
BONDS PAYABLE	0.00	0.00
	-----	-----
TOTAL LONG TERM DEBT	\$ (1,614,539.57)	\$ 0.00
FUND BALANCE	(52,480,221.25)	(46,968,250.07)
CURRENT YEAR (INCOME) LOSS	(6,471,541.90)	(4,838,562.49)
	-----	-----
TOTAL FUND BALANCE	(58,951,763.15)	(51,806,812.56)
	-----	-----
TOTAL LIABILITIES AND FUND BALANCE	\$ (68,360,528.64)	\$ (57,333,443.94)
	=====	=====

CUERO REGIONAL HOSPITAL
 FINANCIAL STATEMENT
 APR 20

	ACTUAL	BUDGET	PR ACTUAL	YTD ACTUAL	YTD BUDGET	PY ACTUAL
OPERATING REVENUE:						

INPATIENT REVENUE	1,255,300	1,344,297	882,760	10,461,232	10,268,612	9,947,559
OUTPATIENT REVENUE	3,915,894	4,322,663	4,720,247	34,519,882	33,019,350	31,836,895
340B PROGRAM	29,005	276,620	113,473	1,745,004	1,936,340	1,174,133
GROSS REVENUE FROM PATIENTS	\$ 5,200,199	\$ 5,943,580	\$ 5,716,480	\$ 46,726,118	\$ 45,224,302	\$ 42,958,587
REVENUE DEDUCTIONS:						
CHARITY	(137,958)	(173,258)	(171,147)	(1,756,877)	(1,323,461)	(1,120,180)
DISCOUNTS	695,964	(803,680)	(860,835)	(8,555,336)	(6,139,035)	(6,076,848)
BAD DEBT	(539,457)	(432,652)	(452,421)	(4,433,333)	(3,304,879)	(3,022,822)
CONTRACTUALS	(3,543,845)	(2,145,384)	(1,980,380)	(15,771,771)	(16,387,841)	(16,162,444)
TOTAL REVENUE DEDUCTIONS	\$ (3,525,296)	\$ (3,554,974)	\$ (3,464,783)	\$ (30,517,316)	\$ (27,155,216)	\$ (26,382,293)
NET PATIENT REVENUE	\$ 1,674,903	\$ 2,388,606	\$ 2,251,697	\$ 16,208,802	\$ 18,069,086	\$ 16,576,294
OTHER OPERATING REVENUE	861,023	35,710	75,964	1,217,816	250,584	421,537
SUPPLEMENTAL MCD PMTS	83,333	91,667	(222,196)	990,130	641,667	1,030,985
TOTAL OPERATING REVENUE	\$ 2,619,259	\$ 2,515,983	\$ 2,105,465	\$ 18,416,748	\$ 18,961,337	\$ 18,028,816
OPERATING EXPENSES:						

SALARIES AND WAGES	(972,828)	(1,021,537)	(1,024,058)	(7,423,881)	(7,733,607)	(7,140,046)
AGENCY PERSONNEL						
FRINGE BENEFITS	(285,772)	(278,488)	(202,418)	(1,557,763)	(1,977,281)	(2,126,759)
PAYROLL TAXES	(73,722)	(89,773)	(76,992)	(541,488)	(673,140)	(563,287)
SUPPLIES	(273,396)	(330,825)	(254,222)	(1,824,128)	(2,527,062)	(2,161,887)
PURCHASED SERVICES	(274,369)	(326,627)	(317,780)	(1,811,325)	(2,297,914)	(2,155,756)
PROFESSIONAL CONTRACTS	(420,352)	(432,106)	(435,082)	(2,967,768)	(3,024,726)	(2,924,798)
DEPRECIATION EXPENSE	(203,509)	(202,083)	(173,166)	(1,384,174)	(1,414,579)	(1,195,478)
INSURANCE EXPENSE	(19,865)	(16,112)	(16,212)	(130,867)	(112,784)	(113,412)
INTEREST EXPENSE	(2,949)	(5,428)	0	(22,485)	(37,990)	(822)
OTHER OPERATING EXPENSE	(105,573)	(82,929)	(105,676)	(544,728)	(580,433)	(648,802)
TOTAL OPERATING EXPENSES	(2,632,335)	(2,785,908)	(2,605,606)	(18,208,607)	(20,379,516)	(19,031,045)
NET OPERATING INCOME (LOSS)	(13,076)	(269,925)	(500,141)	208,141	(1,418,179)	(1,002,229)
NET DISTRICT OPERATING INCOM	15,870	66,000	88,691	4,284,017	4,400,000	3,985,754
NURSING HOME UPL	563,848	267,766	166,984	2,277,714	1,874,360	1,584,172
NET INCOME (LOSS)	\$ 566,642	\$ 63,841	\$ (244,466)	\$ 6,769,872	\$ 4,856,181	\$ 4,567,696
	=====	=====	=====	=====	=====	=====

CUERO REGIONAL HOSPITAL & CLINICS
FINANCIAL STATEMENT
APR 20

	ACTUAL	BUDGET	PR ACTUAL	YTD ACTUAL	YTD BUDGET	PY ACTUAL
OPERATING REVENUE:						

INPATIENT REVENUE	1,255,300	1,344,297	882,760	10,461,232	10,268,612	9,947,559
OUTPATIENT REVENUE	3,915,894	4,322,663	4,720,247	34,519,882	33,019,350	31,836,895
340B PROGRAM	29,005	276,620	113,473	1,745,004	1,936,340	1,174,133
CLINIC REVENUES	604,856	900,522	907,558	5,723,290	6,388,086	6,189,247
GROSS REVENUE FROM PATIENTS	\$ 5,805,055	\$ 6,844,102	\$ 6,624,038	\$ 52,449,408	\$ 51,612,388	\$ 49,147,834
REVENUE DEDUCTIONS:						
CHARITY	(137,958)	(173,258)	(171,147)	(1,756,877)	(1,323,461)	(1,120,180)
DISCOUNTS	695,964	(803,680)	(860,835)	(8,555,336)	(6,139,035)	(6,076,848)
BAD DEBT	(539,457)	(432,652)	(452,421)	(4,433,333)	(3,304,879)	(3,022,822)
CONTRACTUAL ALLOWANCES	(3,543,845)	(2,145,384)	(1,980,380)	(15,771,771)	(16,387,841)	(16,162,444)
CLINIC ALLOWANCES	(128,061)	(210,402)	(177,792)	(1,502,863)	(1,543,109)	(1,593,370)
TOTAL REVENUE DEDUCTIONS	\$ (3,653,357)	\$ (3,765,376)	\$ (3,642,575)	\$ (32,020,179)	\$ (28,698,325)	\$ (27,975,663)
NET PATIENT REVENUE	\$ 2,151,697	\$ 3,078,726	\$ 2,981,463	\$ 20,429,229	\$ 22,914,063	\$ 21,172,171
OTHER OPERATING REVENUE	861,023	35,710	75,964	1,217,816	250,584	421,537
SUPPLEMENTAL MCD PMTS	83,333	91,667	(222,196)	990,130	641,667	1,030,985
TOTAL OPERATING REVENUE	\$ 3,096,054	\$ 3,206,103	\$ 2,835,231	\$ 22,637,175	\$ 23,806,314	\$ 22,624,693
OPERATING EXPENSES:						

SALARIES AND WAGES	(1,335,698)	(1,506,576)	(1,445,364)	(10,627,309)	(11,102,665)	(10,175,937)
AGENCY PERSONNEL						
FRINGE BENEFITS	(285,772)	(278,488)	(202,418)	(1,557,763)	(1,977,281)	(2,126,759)
PAYROLL TAXES	(101,137)	(117,141)	(105,514)	(748,333)	(869,018)	(752,730)
SUPPLIES	(285,261)	(357,242)	(279,894)	(2,044,748)	(2,728,596)	(2,382,972)
PURCHASED SERVICES	(290,158)	(343,220)	(341,153)	(1,937,394)	(2,414,717)	(2,389,042)
PROFESSIONAL CONTRACTS	(477,785)	(529,892)	(519,133)	(3,513,778)	(3,714,646)	(3,362,473)
DEPRECIATION EXPENSE	(203,509)	(202,083)	(173,166)	(1,384,174)	(1,414,579)	(1,195,478)
INSURANCE EXPENSE	(22,571)	(17,912)	(18,346)	(149,282)	(130,584)	(129,089)
INTEREST EXPENSE	(2,949)	(5,428)	0	(22,485)	(37,990)	(822)
OTHER OPERATING EXPENSE	(131,506)	(113,203)	(138,910)	(742,098)	(792,400)	(840,754)
TOTAL OPERATING EXPENSES	(3,136,346)	(3,471,185)	(3,223,897)	(22,727,364)	(25,182,476)	(23,356,056)
NET OPERATING INCOME (LOSS)	(40,292)	(265,082)	(388,666)	(90,189)	(1,376,162)	(731,363)
NET DISTRICT OPERATING INCOM	15,870	66,000	88,691	4,284,017	4,400,000	3,985,754
NURSING HOME UPL	563,848	267,766	166,984	2,277,714	1,874,360	1,584,172
NET INCOME (LOSS)	\$ 539,425	\$ 68,684	\$ (132,991)	\$ 6,471,542	\$ 4,898,198	\$ 4,838,563

**CRH CLINICS PERIOD VS PRIOR YEAR
FINANCIAL STATEMENT
APR 20**

	ACTUAL	BUDGET	PR ACTUAL	YTD ACTUAL	YTD BUDGET	FY ACTUAL
OPERATING REVENUE:						

CLINIC REVENUES	604,856	900,522	907,558	5,723,290	6,388,086	6,189,247
GROSS REVENUE FROM PATIENTS	\$ 604,856	\$ 900,522	\$ 907,558	\$ 5,723,290	\$ 6,388,086	\$ 6,189,247
REVENUE DEDUCTIONS:						
CLINIC ALLOWANCES	(128,061)	(210,402)	(177,792)	(1,502,863)	(1,543,109)	(1,593,370)
TOTAL REVENUE DEDUCTIONS	\$ (128,061)	\$ (210,402)	\$ (177,792)	\$ (1,502,863)	\$ (1,543,109)	\$ (1,593,370)
NET PATIENT REVENUE	\$ 476,795	\$ 690,120	\$ 729,766	\$ 4,220,427	\$ 4,844,977	\$ 4,595,877
TOTAL OPERATING REVENUE	\$ 476,795	\$ 690,120	\$ 729,766	\$ 4,220,427	\$ 4,844,977	\$ 4,595,877
OPERATING EXPENSES:						

SALARIES AND WAGES	(362,870)	(485,039)	(421,306)	(3,203,428)	(3,369,058)	(3,035,891)
AGENCY PERSONNEL						
FRINGE BENEFITS	0	0	0	0	0	0
PAYROLL TAXES	(27,415)	(27,368)	(28,523)	(206,846)	(195,878)	(189,443)
SUPPLIES	(11,865)	(26,417)	(25,672)	(220,620)	(201,534)	(221,085)
PURCHASED SERVICES	(15,789)	(16,593)	(23,372)	(126,069)	(116,803)	(233,286)
PROFESSIONAL CONTRACTS	(57,433)	(97,786)	(84,051)	(546,010)	(689,920)	(437,675)
DEPRECIATION EXPENSE						
INSURANCE EXPENSE	(2,706)	(1,800)	(2,134)	(18,415)	(17,800)	(15,677)
INTEREST EXPENSE						
OTHER OPERATING EXPENSE	(25,933)	(30,274)	(33,234)	(197,370)	(211,967)	(191,953)
TOTAL OPERATING EXPENSES	(504,011)	(685,277)	(618,291)	(4,518,757)	(4,802,960)	(4,325,010)
NET OPERATING INCOME (LOSS)	(27,216)	4,843	111,475	(298,330)	42,017	270,866

**CRH RURAL HEALTH CLINICS
 FINANCIAL STATEMENT
 APR 20**

	ACTUAL	BUDGET	PR ACTUAL	YTD ACTUAL	YTD BUDGET	FY ACTUAL
OPERATING REVENUE:						

CLINIC REVENUES	507,749	764,666	717,035	4,629,286	5,350,336	5,212,003
GROSS REVENUE FROM PATIENTS	\$ 507,749	\$ 764,666	\$ 717,035	\$ 4,629,286	\$ 5,350,336	\$ 5,212,003
REVENUE DEDUCTIONS:						
CLINIC ALLOWANCES	(50,572)	(118,967)	(48,400)	(691,343)	(844,668)	(907,785)
TOTAL REVENUE DEDUCTIONS	\$ (50,572)	\$ (118,967)	\$ (48,400)	\$ (691,343)	\$ (844,668)	\$ (907,785)
NET PATIENT REVENUE	\$ 457,177	\$ 645,699	\$ 668,635	\$ 3,937,944	\$ 4,505,668	\$ 4,304,219
TOTAL OPERATING REVENUE	\$ 457,177	\$ 645,699	\$ 668,635	\$ 3,937,944	\$ 4,505,668	\$ 4,304,219
OPERATING EXPENSES:						

SALARIES AND WAGES	(307,294)	(432,176)	(361,026)	(2,768,836)	(2,965,250)	(2,656,186)
AGENCY PERSONNEL						
FRINGE BENEFITS	0	0	0	0	0	0
PAYROLL TAXES	(23,243)	(24,446)	(24,065)	(181,358)	(173,560)	(167,256)
SUPPLIES	(11,785)	(25,748)	(25,152)	(215,392)	(196,662)	(215,730)
PURCHASED SERVICES	(15,713)	(16,430)	(23,337)	(125,673)	(115,659)	(232,610)
PROFESSIONAL CONTRACTS	(57,433)	(97,714)	(84,051)	(546,010)	(689,414)	(437,025)
DEPRECIATION EXPENSE						
INSURANCE EXPENSE	(2,706)	(1,800)	(2,134)	(18,415)	(17,800)	(15,677)
INTEREST EXPENSE						
OTHER OPERATING EXPENSE	(23,979)	(27,329)	(27,635)	(174,153)	(191,314)	(171,003)
TOTAL OPERATING EXPENSES	(442,152)	(625,643)	(547,399)	(4,029,837)	(4,349,659)	(3,895,488)
NET OPERATING INCOME (LOSS)	15,026	20,056	121,236	(91,894)	156,009	408,730

CRH SPECIALTY HEALTH CLINICS
 FINANCIAL STATEMENT
 APR 20

	ACTUAL	BUDGET	PR ACTUAL	YTD ACTUAL	YTD BUDGET	PY ACTUAL
OPERATING REVENUE:						

CLINIC REVENUES	97,107	135,856	190,523	1,094,004	1,037,750	977,244
GROSS REVENUE FROM PATIENTS	\$ 97,107	\$ 135,856	\$ 190,523	\$ 1,094,004	\$ 1,037,750	\$ 977,244
REVENUE DEDUCTIONS:						
CLINIC ALLOWANCES	(77,490)	(91,435)	(129,392)	(811,521)	(698,441)	(685,586)
TOTAL REVENUE DEDUCTIONS	\$ (77,490)	\$ (91,435)	\$ (129,392)	\$ (811,521)	\$ (698,441)	\$ (685,586)
NET PATIENT REVENUE	\$ 19,618	\$ 44,421	\$ 61,131	\$ 282,484	\$ 339,309	\$ 291,658
TOTAL OPERATING REVENUE	\$ 19,618	\$ 44,421	\$ 61,131	\$ 282,484	\$ 339,309	\$ 291,658
OPERATING EXPENSES:						

SALARIES AND WAGES	(55,577)	(52,863)	(60,280)	(434,592)	(403,808)	(379,705)
AGENCY PERSONNEL						
FRINGE BENEFITS						
PAYROLL TAXES	(4,172)	(2,922)	(4,458)	(25,487)	(22,318)	(22,187)
SUPPLIES	(80)	(669)	(521)	(5,228)	(4,872)	(5,355)
PURCHASED SERVICES	(77)	(163)	(35)	(396)	(1,144)	(676)
PROFESSIONAL CONTRACTS	0	(72)	0	0	(506)	(650)
DEPRECIATION EXPENSE						
INSURANCE EXPENSE	0	0	0	0	0	0
INTEREST EXPENSE						
OTHER OPERATING EXPENSE	(1,954)	(2,945)	(5,599)	(23,218)	(20,653)	(20,950)
TOTAL OPERATING EXPENSES	(61,860)	(59,634)	(70,893)	(488,920)	(453,301)	(429,522)
NET OPERATING INCOME (LOSS)	(42,242)	(15,213)	(9,761)	(206,437)	(113,992)	(137,864)

EBIDA for the Hospital at \$773K, was higher than Budget and Prior Year. COVID19 Stimulus money received from Federal and State totalled \$791K. Without these funds EBIDA would have been a loss of \$18K and the net loss from Operations would have been \$804K due to the effects of COVID19. The breakdown of revenue and expenses performance indicators were as follows:

NET REVENUE:

- Patient Net Revenue was lower than Budget by \$714K mainly due to lower Patient Days (40), ER visits (293) and Surgeries (36). The lower volume due to effects of COVID19 during the month of April, drove the variance lower by \$583K. A negative rate variance by \$131K was driven by a lower Case Mix compared to prior year (lower by 8%) and a lower Payor Mix with Medicare down by 15.6%
- COVID-19 Stimulus funds received in April from Federal Funds (\$706K) - Cares Act Relief Fund and State Funds (\$84K) - SORH Ship Grant
- Other Revenue was higher than Budget by \$35.3K due to higher revenue in Medicare Pass Thru (\$11.8K), and Interest Income (\$15.5K), Misc Revenue (\$7.2K), and Rental Income (\$1.4K)

EXPENSES:

- Total Expenses were lower than Budget by \$153.6K due lower expenses compared to Budget in several categories. Salaries were lower than Budget by \$48.7K due to lower volume. FTEs were higher than Budget due to COVID19 Pay. COVID19 pay was paid during the second half of April, paying employees at regular scheduled hours. COVID19 Pay hours for April totalled 10.6 paid FTEs and costs of \$43K. Supplies were lower than Budget by \$57.4K due to lower Implant costs (\$69.3K), Med/Surg (\$21.9K), Supplies Chrgd to Patients (\$13K) and Office Supplies (\$4.6K). No Spine cases were performed in April. Podiatry cases were lower by 6 and Ortho cases were lower by 9. Pharmaceutical supply expense was higher than Budget by \$53.9K due to COVID19 expense. Purchased Services were lower than Budget by \$52.2K driven by lower Utilities (\$20.5K), and Repairs and Maintenance (\$32.1K). Prof Contracts were lower by \$11.8K mainly due to lower Physical Therapy expense. Other Operating Expenses were higher than Budget by \$22.6K driven by Postage (\$4.6K), and Disaster Expense (\$16.2K), which includes consulting costs and equipment rental

CLINICS:

- Clinic Net Operating Income was a loss of \$27K mainly due to a loss in the Specialty Clinics. RHC Net Operating Income was positive at \$15K, lower than Budget by \$5K driven by lower volume (down 2,376 visits). Revenue was lower due to lower in office visits and unbilled phone visits. Expenses were lower driven by lower Salaries due to reduced hours related to COVID19. Specialty Clinic loss of \$42.2K was higher than the Budgeted loss by \$27K. General Surgeon loss was higher than Budget by \$16.4K and Podiatry loss was higher than Budget by \$10.7. Both budget variances were due to COVID19 guidelines driving lower surgeries during the month of April and a drop in office visits. General Surgeries were down by 7. As mentioned above, Podiatry was down 6 cases

OTHER:

- Wellness Net Operating Income was negative at \$12.7K, lower than Budget by \$33.4K mainly due lower Revenue by \$47.9K. The Wellness Center closed due to COVID19 guidelines from the State
- 340B Net Operating Income was lower than Budget by \$277K, mainly due to lower Revenue by \$247.6K driven by lower clinic volumes from COVID19 effects
- Capital Expenditures - update: Electrical upgrades Phase 1 complete, Phase 2 in progress - \$985K through Apr; Computer Network Optimization - phase two in progress - \$396K spend of \$898M Budget; OR Renovations - \$1.5M (on hold); Central Sterile Renovation - \$716K (on hold); and 3D Mammo - \$480K (approved at Jan Board meeting). Capital projects on hold except for Electrical, Network Optimization and 3D Mammo

**BUDGET COMPARISON REPORT
 WELLNESS CENTER 7085
 FOR PERIOD ENDING 04/30/20**

	ACTUAL	BUDGET	PR ACTUAL	YTD ACTUAL	YTD BUDGET	FY ACTUAL
REVENUE						
IN PATIENT REVENUE						
OUT PATIENT REVENUE	908	48,847	48,911	304,794	373,119	366,915
TOTAL REVENUE	<u>908</u>	<u>48,847</u>	<u>48,911</u>	<u>304,794</u>	<u>373,119</u>	<u>366,915</u>
DEDUCTIONS FROM REVENUE						
CHARITY						
DISCOUNTS						
PROVISION FOR BAD DEBT						
CONTRACTUAL ALLOWANCES						
CLINIC ALLOWANCES						
TOTAL DEDUCTIONS FROM REVENUE						
OTHER OPERATING REVENUE						
OTHER OPERATING REVENUE	0	0	0	0	0	0
DISTRICT NET INCOME (LOSS)						
DISPRO-SHARE REVENUE						
TOTAL OTHER REVENUE	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
EXPENSES						
SALARIES	(5,233)	(11,425)	(11,193)	(80,073)	(87,288)	(80,211)
FICA	(334)	(879)	(746)	(5,545)	(6,715)	(5,702)
MED/SURG SUPPLIES	0	(27)	(20)	(101)	(200)	(187)
OFFICE SUPPLIES	0	(80)	(148)	(883)	(615)	(716)
OTHER SUPPLIES	(55)	(1,537)	(778)	(9,267)	(11,737)	(9,452)
UNIFORMS	0	(13)	0	0	(102)	(96)
CHEMICAL COST	0	0	0	0	0	214
FOOD	0	(956)	(1,584)	(4,988)	(7,304)	(6,135)
ELECTRICITY	(3,085)	(4,350)	(4,396)	(25,098)	(30,886)	(29,123)
FUEL & GAS	(91)	(200)	(182)	13,517	(1,422)	(1,520)
WATER	(73)	(140)	(222)	(1,042)	(995)	(872)
MAINTENANCE CONTRACTS	(55)	(396)	(325)	(820)	(2,778)	(2,909)
REPAIRS & MAINTENANCE	(437)	(2,419)	(256)	(13,950)	(16,930)	(28,190)
PROFESSIONAL CONTRACTS	(1,053)	(920)	(1,192)	(7,351)	(6,439)	(5,718)
PROFESSIONAL SERVICES	500	(3,435)	(2,657)	(15,477)	(24,042)	(21,488)

**BUDGET COMPARISON REPORT
 WELLNESS CENTER 7085
 FOR PERIOD ENDING 04/30/20**

	ACTUAL	BUDGET	PR ACTUAL	YTD ACTUAL	YTD BUDGET	FY ACTUAL
LICENSES	0	(8)	0	(355)	(58)	(20)
PHONE/CABLE/INTERNET	(570)	(539)	(428)	(3,246)	(3,771)	(3,719)
DUES & SUBSCRIPTIONS	0	(542)	0	(2,299)	(3,792)	(416)
ADVERTISING	0	(50)	0	(131)	(350)	0
TRAVEL & MEETING	(3,100)	(42)	0	(3,125)	(292)	(158)
POSTAGE	0	(14)	(1)	(2)	(104)	(148)
BUILDING RENT	0	(30)	0	0	(211)	0
EQUIPMENT RENTAL	0	0	0	(26)	0	(64)
PUBLIC EDUCATIONAL ACTIVITIE	0	(8)	0	(1,978)	(50)	(1,678)
LINEN PURCHES	0	(42)	0	(301)	(292)	(338)
FREIGHT	0	0	0	0	0	(45)
TOTAL EXPENSES	(13,585)	(28,052)	(24,130)	(162,539)	(206,373)	(198,691)
NET PROFIT/(LOSS)	(12,677)	20,795	24,781	142,254	166,746	168,224

Cuero Community Hospital
Inventory Holdings Report
For the Quarter of January, February and March 2020
Prepared May 11, 2020

Fund: Hospital District

Sec Type	CUSIP	Maturity Date	Interest	Yield to Maturity	Face Value	Purchase Principal	Beginning Book	Beginning Market Value	Ending Book	Ending Market Value	Change in MKT Value	Current D-T-M	Accrued Interest
Securities													
	0	0	1/0/1900	3.823%	0.851%	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
Totals					\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	#DIV/0!	\$0.00
							<i>Beginning Book</i>	<i>Beginning Market Value</i>	<i>Ending Book</i>	<i>Ending Market Value</i>			
Money Market - Mutual Funds													
Wells Fargo *			0.810%				\$1,987,301.43	\$1,987,301.43	\$1,994,886.81	\$1,994,886.81			
Logic *			0.000%				\$0.50	\$0.50	\$0.50	\$0.50			
MBIA - General *			1.470%				\$67,852.70	\$67,852.70	\$68,155.85	\$68,155.85			
MBIA -Funded Dep			1.470%				\$21,852.70	\$21,852.70	\$21,945.09	\$21,945.09			
Totals							\$2,077,007.33	\$2,077,007.33	\$2,084,988.25	\$2,084,988.25			
Checking and Savings Accounts													
General Fund			1.510%				\$4,882,148.00	\$4,882,148.00	\$8,182,922.69	\$8,182,922.69			
Payroll Acct			1.510%				\$3,809.34	\$3,809.34	\$8,908.29	\$8,908.29			
Clinic Account			1.510%				\$1,288,123.23	\$1,288,123.23	\$605,378.15	\$605,378.15			
Specialty Account			1.510%				\$108,781.78	\$108,781.78	\$49,843.53	\$49,843.53			
Brookshire			1.510%				\$167,509.51	\$167,509.51	\$49,907.67	\$49,907.67			
Stockdale			1.510%				\$42,775.39	\$42,775.39	\$26,659.49	\$26,659.49			
Floresville			1.510%				\$179,497.65	\$179,497.65	\$263,528.50	\$263,528.50			
Victoria			1.510%				\$244.83	\$244.83	\$245.74	\$245.74			
Corpus NH			1.510%	5334			\$25,119.50	\$25,119.50	\$0.00	\$0.00			
Winsor-Corpus NH			1.510%	5342			\$288,894.84	\$288,894.84	\$4,775.78	\$4,775.78			
Kingsville NH			1.510%	5350			\$6,437.80	\$6,437.80	\$6,524.93	\$6,524.93			
Calallen NH			1.510%	847			\$0.00	\$0.00	\$12,078.29	\$12,078.29			
Calallen NH - HUD			1.510%	5647			\$154,067.33	\$154,067.33	\$342,581.69	\$342,581.69			
Plugerville NH			1.510%	804			\$29,399.17	\$29,399.17	\$0.00	\$0.00			
CC NH-HUD			1.510%	5590			\$384,240.26	\$384,240.26	\$191,755.64	\$191,755.64			
Kingsville NH-HUD			1.510%	5612			\$185,975.70	\$185,975.70	\$131,112.21	\$131,112.21			
Plugerville NH-HUD			1.510%	5620			\$241,096.64	\$241,096.64	\$128,350.50	\$128,350.50			
Legend-SA			1.510%	1193			\$302,939.37	\$302,939.37	\$165,876.55	\$165,876.55			
Legend-SA West			1.510%	1207			\$189,045.91	\$189,045.91	\$150,770.91	\$150,770.91			
Sonterra			1.510%	1215			\$139,290.82	\$139,290.82	\$267,083.07	\$267,083.07			
Corpus-Windsor HUD			1.510%	5655			\$40.17	\$40.17	\$245,250.66	\$245,250.66			
Luling			1.510%				\$49,049.31	\$49,049.31	\$42,170.52	\$42,170.52			
Oakmont - Humble			1.510%				\$124,560.15	\$124,560.15	\$94,677.60	\$94,677.60			
Parklane			1.510%				\$43,125.88	\$43,125.88	\$52,605.45	\$52,605.45			
Yorktown			1.510%				\$115,561.27	\$115,561.27	\$67,719.26	\$67,719.26			
Lampasas			1.510%				\$99,587.45	\$99,587.45	\$74,178.51	\$74,178.51			
Self Funded Acct			1.510%				\$945,658.64	\$945,658.64	\$949,189.87	\$949,189.87			
Funded Depreciation			1.510%				\$15,614,066.00	\$15,614,066.00	\$16,343,862.35	\$16,343,862.35			
Building Fund			1.510%				\$480,066.81	\$480,066.81	\$481,859.45	\$481,859.45			
Champs			0.000%				\$6,711.03	\$6,711.03	\$5,854.08	\$5,854.08			
Totals							\$26,097,823.78	\$26,097,823.78	\$28,945,671.38	\$28,945,671.38			
Total Hospital District Funds							\$28,174,831.11	\$28,174,831.11	\$31,030,659.63	\$31,030,659.63			

This report is in compliance with GAAP, the District Investment Policy, the District Investment Strategies and the Public Funds Investment Act.

Greg Pritchett
Investment Officer

05/11/2020
Date

Marketing and Development Board Report May 2020

- **Marketing Campaign Reporting/Analytics:** Review reporting for all campaigns and see the creative for April/May:
https://www.dropbox.com/sh/8d3o11md0wpixia/AADrJKRwCX_AruTOWBxiOVCJa?dl=0
- **Video**
 - We did not run on YouTube in April to help watch our expenses.
 - Covid-19: https://youtu.be/69_nzRt7a3Q
 - Cuero Health Resilience 30 sec video: <https://youtu.be/T537GMHn7B8>
 - Covid-19 Call 911 in medical emergencies:
<https://www.facebook.com/cuerohospital/videos/2621499318176548/>
 - Thank you community for support: <https://youtu.be/sJfQz8gQIUQ>
- **Social Media**
 - Facebook continued to grow during this period. We grew 114 page likes in the last 28 days, posts reached 22K, videos reached over 7K with 2,807 likes/followers on our page! We are right behind Citizens with 3K and ahead of other rural hospitals with similar markets that I compare us to.
 - Twitter and Instagram continue to grow.
 - Social has been the main driver of traffic to our website at this time. Thanks to our partnership with Coffey for our website, we have had access to great material to share on social, as well as great info from Methodist as well!
- **Website**
 - Reporting was not available at the time of preparing this board report. It will be added to the dropbox link above.
 - Emily is continuing to work on SEO to increase search engine referrals to the site.
- **Public relations**
 - Events – all events and meetings postponed due to COVID-19.
 - Working with Nikki on Dueling Pianos (scheduled for Friday, July 24th) promotion
 - Working on a new date for the Baby Fair. Possibly early August or late September.
 - In order to keep the public informed on the latest updates with Coronavirus, marketing set up a page on the website with the latest updates – you can easily navigate to it from the homepage – www.cuerohospital.org
 - Updates from CDC were shared on all social channels and press releases were submitted to all area media which resulted in good coverage.
- **Development:**
 - **From Bump to Baby: Family and Baby Expo/ Fair**, which was set for Saturday, April 4, has been postponed. We are looking into dates in August or even late September to ensure adequate time to prepare and inform attendees.
 - We **postponed our May 14th Cuero Regional Hospital Fun After Five Fiesta** on the grounds of the Hospital from 5 – 8 p.m. Rather our internal CHAMPS committee did a drive-in hamburger cookout for the staff which was well received. We got a YETI cooler donated to serve as our time capsule which we will fill and bury on our 50th anniversary date.
 - Nurses Week was May 6 – 12. Thank to media partnerships, we were able to run radio spots on KIXS and Jack FM, as well as a nice letter to the editor that ran in local papers and The Victoria Advocate.
 - Hospital Week was May 10 – 15. We raised \$12,600 in about a week's time to support the event, to provide t-shirts for the staff, as well as \$10 Cuero Bucks for all staff to use locally. We have received positive feedback on the week's event. We raised \$1,550 on an internal raffle that will be matched by Cuero Community Foundation and given to CAMAL House Food Pantry.

- **Cuero Health was featured in the new #CrossroadsCares spot** developed by Building Brands Marketing, the firm that does our video production. It will be playing on local traditional media, as well as digital/social media: You can download the original video file here: <https://vimeo.com/406692101>
 - **50th anniversary videos** are finished and rolling on social media!
 - Watch the 10 second spot (to run pre-roll): <https://vimeo.com/402757242>
 - 30 second spot: <https://vimeo.com/406260992>
 - **Spring 2020 Connect Issue** arrived in mailboxes late April and issues have been distributed to patient waiting areas.. You can view it here: <http://cuero regional.flippublication.com/spring2020>
 - Sept. 8, 2020 will be our 50th anniversary event at the Venue. More details to come!
 - Date set for 2020 Runway for a Cure: 10/20/20!
 - TurkeyTrot 2020 set for 10/10/20
- **Coverage in April/early May:**
 - **To see all press releases submitted to area print, radio, TV, magazines, etc, visit:** <https://www.cuero regionalhospital.org/news/>
 - **Cuero Record:**
 - **April 22** - <https://www.cuero record.com/news/cuero-regional-hospital-resuming-elective-surgeries>
 - **April 23** - <https://www.cuero record.com/columns-opinions/resilience>
 - **May 5** - <https://www.cuero record.com/columns-opinions/2020-national-nurses-week-%E2%80%93-may-6-12-2020>
 - **May 13** - <https://www.cuero record.com/columns-opinions/falcone-thanks-hospital-staff-incredible-work>
 - **Yorktown News-Views:**
 - **April 22** - <https://www.cuero record.com/news/cuero-regional-hospital-resuming-elective-surgeries>
 - **April 23** - <https://www.cuero record.com/columns-opinions/resilience>
 - **May 5** - <https://www.cuero record.com/columns-opinions/2020-national-nurses-week-%E2%80%93-may-6-12-2020>
 - **May 13** - <https://www.cuero record.com/columns-opinions/falcone-thanks-hospital-staff-incredible-work>
 - **KAVU/Crossroads Today:**
 - **March 21** - <https://www.crossroadstoday.com/cuero-health-clinics-to-provide-telephone-appointments/>
 - **April 8** - <https://www.crossroadstoday.com/healthcare-heroes-dr-jennifer-gonzales/>
 - **April 21** - <https://www.crossroadstoday.com/cuero-health-facilities-adding-safety-measures-for-visitors/>
 - **May 10** - <https://www.crossroadstoday.com/cuero-regional-is-hosting-a-hospital-appreciation-parade/>
 -
 - **Victoria Advocate:**
 - **April 24** – Best of Best results published: https://www.victoriaadvocate.com/361mag/best_of_the_best/best-of-the-best-companies/article_662f9364-736d-11ea-9d85-0bf7b98157db.html
 - https://www.victoriaadvocate.com/361mag/best_of_the_best/best-of-the-best-health-beauty/article_dc8d610c-73b9-11ea-92f8-634985b8be23.html
 - https://www.victoriaadvocate.com/361mag/best_of_the_best/best-of-the-best-professionals/article_b553a510-73a5-11ea-97f4-4b5f09b7eb8e.html

Best of the Best - Professionals:

Family Doctor

First Runner Up – Paul Willers, DO – Cuero Health

Podiatrist

Second Runner Up – Neil Campbell, DPM

Best of the Best – Companies:

Place to Work

Second Runner Up - Cuero Regional Hospital

Best of the Best - Health & Beauty:

Fitness & Exercise

Second Runner Up - Cuero Wellness Center

Home Health & Hospice Care

Third Runner Up - Cuero Home Health

Hospital/ER Facility

Second Runner Up - Cuero Regional Hospital

Medical Clinics

First Runner Up - Cuero Medical Clinic

- **April 25** - https://www.victoriaadvocate.com/news/highereducation/cuero-physician-wife-have-come-full-circle-since-attending-vc/article_9bbce92e-7fec-11ea-aadf-e3834944e908.html
- **April 26** - https://www.victoriaadvocate.com/opinion/letter-resilience-the-battle-cry-for-health-care-workers-in-cuero/article_5349b8c8-85ac-11ea-96d4-9f2ee9189fef.html
- **April 29** - https://www.victoriaadvocate.com/counties/dewitt/cuero-health-lifeway-baptist-church-partner-for-cuero-community-blood-drive-on-may-2/article_30cbaaac-8a40-11ea-8dca-f3f518ac7a26.html
- **April 30** - https://www.victoriaadvocate.com/counties/dewitt/cuero-regional-hospital-to-launch-inpatient-dialysis-in-late-may/article_4e72f21c-8af5-11ea-81ab-37db09d16e26.html
- **May 1** - https://www.victoriaadvocate.com/opinion/letter-recognizing-outstanding-work-during-national-nurses-week/article_50494812-8bbc-11ea-8aa3-cbdb256fa4b1.html
- **May 13** - https://www.victoriaadvocate.com/opinion/letter-cuero-health-celebrates-hospital-week/article_e9762600-9494-11ea-bd7d-9f025fc662c8.html



**Board of Directors Cuero Regional
Hospital Cuero Family Clinics
April 2020**

I am pleased to provide the Board with this report on the clinic organization. Total RHC operations had a profit of \$15,026. Clinic expense reductions helped offset the lost revenues from COVID-19 in April. Revenue was under budget by \$188,522 and expenses were under budget by \$183,491.

Total visits were 3,859 compared to 5,937 in 2019. AR days are at 34. BCBS Medicaid is helping with the reimbursement issue I communicated to you in my last report. After putting in a complaint with the State department of insurance we were contacted the next day by BCBS.

Respectfully submitted,

Greg Pritchett, Clinic Administrator

Cuero Family Clinics
Key Performance Indicators for CBO
FY 2020

KPI	September	October	November	December	January	February	March	April	May	June	July	August	September	Goals	YTD/AVG
% of A/R >60 days	34.22%	29.54%	29.93%	32.55%	38.19%	38.29%	44.08%	46.69%	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	35%	36.89%
% of claims sent w/in 48 hours of visit	92%	92%	96%	103%	83%	90%	75%	127%	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	90%	163%
Days in A/R	29	32	30	29	30	30	30	34	0	0	0	0	0	45	18
Total \$ paid/patient visit	\$ 104.72	\$ 93.09	\$ 117.47	\$ 103.63	\$ 94.69	\$ 107.79	\$ 108.27	\$ 120.73	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	TBD	\$ 105.22
First Pass Resolution Rate	98%	94%	95%	96%	95%	95%	96%	96%	95%	92%	93%	94%	98%	90%	95%
Gross Collection Rate	93%	75%	96%	85%	79%	88%	94%	92%	0%	0%	0%	0%	0%	TBD	50%
Net Collection Rate	91%	85%	118%	91%	98%	100%	112%	102%	0%	0%	0%	0%	0%	TBD	57%
\$ collected at clinics/patient Visit	\$ 3.52	\$ 3.68	\$ 2.95	\$ 3.12	\$ 4.00	\$ 3.43	\$ 4.06	\$ 5.11	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	\$ 10.00	\$ 11.66
Statistics															
ATB Total Balance	\$ 655,309	\$ 740,462	\$ 687,648	\$ 680,937	\$ 700,697	\$ 693,407	\$ 670,438	\$ 661,653	\$ -	\$ -	\$ -	\$ -	\$ -		\$ 4,835,242.00
A/R Balance >60 days	\$ 224,246	\$ 218,714	\$ 205,834	\$ 221,634	\$ 267,624	\$ 265,472	\$ 295,496	\$ 308,955	\$ -	\$ -	\$ -	\$ -	\$ -		\$ 1,783,729.00
Average Daily Revenue	\$ 22,646	\$ 23,481	\$ 22,920	\$ 23,422	\$ 23,048	\$ 23,188	\$ 22,113	\$ 19,397	\$ 20,215	\$ 20,663	\$ 22,570	\$ 22,526	\$ 22,646		\$ 266,190.52
Total Payments	\$ 581,328	\$ 608,742	\$ 625,047	\$ 571,106	\$ 592,395	\$ 584,950	\$ 536,468	\$ 465,901	\$ -	\$ -	\$ -	\$ -	\$ -		\$ 3,984,609
Total Visits	5,551	6,539	5,321	5,511	6,256	5,427	4,955	3,859	0	0	0	0	0		37,868
Total Claims Submitted	5,128	6,022	5,131	5,679	5,166	4,872	3,732	4,888	5,616	4,857	5,363	5,123	5,128		61,577
Total Gross Charges	\$ 623,177	\$ 809,178	\$ 653,320	\$ 668,867	\$ 752,159	\$ 665,918	\$ 572,095	\$ 507,749	\$ 739,546	\$ 612,384	\$ 679,389	\$ 735,593	\$ 623,177		\$ 8,019,375 \$ 7,007,960
Contractual Allowances	\$ (15,587)	\$ 91,468	\$ 124,308	\$ 43,390	\$ 146,705	\$ 79,336	\$ 95,184	\$ 50,572	\$ 84,861	\$ 102,661	\$ 42,718	\$ 165,799	\$ (15,587)		\$ 1,011,415
Contractuals as a % of Gross Chgs	-2.50%	11.30%	19.03%	6.49%	19.50%	11.91%	16.64%	9.96%	11.47%	16.76%	6.29%	22.54%	-2.50%		12.61%
Cash collected at clinics	\$ 19,532	\$ 24,069	\$ 15,708	\$ 17,220	\$ 25,003	\$ 18,607	\$ 20,105	\$ 19,704	\$ 83,241	\$ 67,983	\$ 73,127	\$ 57,274	\$ 19,532		\$ 441,573
Days in month	30	31	30	31	31	29	31	30	31	30	31	31	30		31
# of Denied Claims	124	353	267	223	247	225	152	174	302	373	383	302	124		3,125

Assistant Administrator
Board Report
May 2020

Quality/Safety

1. When testing the new generator issues were noted with the 480 transformer. After much investigative work by Rick and many phone calls, it was discovered that the city placed the wrong transformer. The city thought they bought a 5 wire 480 volt transformer but it is actually a 3 wire 480 volt transformer. The city is currently looking for a 5 wire transformer for replacement.
2. The water cooled chiller work should be completed by Monday, May 18th.

Finance

1. Screening mammograms were restarted on 5/4/2020.
2. The Wellness Center will reopen on 5/18/2020 at a maximum of 25% capacity. Showers and saunas must remain closed but bathrooms can be open. We will evaluate restarting classes on 6/1/2020.
3. The 3D Mammography will be installed the 1st week of June.
4. Cardiopulmonary department is working to get the Sleep Lab certified through the American Sleep Association. We have been told that within the next year Medicare will only pay for sleep studies performed in a certified Sleep Lab.

Community

1. Tami and Cathy at the Wellness Center have been providing Facebook live workouts and these have been viewed by 300-400 people.

**BOARD REPORT
NURSING ADMINISTRATION 5-14-2020**

Safety/Quality

- We had 1 inpatient fall in April, with no injuries. We did not have any visitor falls this past month.
- We were 33% compliant with our Sepsis patients in April. We had 3 patients. The issues dealt with antibiotic time frames and appropriateness. We have been focused on the COVID diagnosis. Sepsis was discussed at our Medical Staff and Hospitalists meetings, as well as with our ER physicians.

People

- We have developed a COVID folder for staff to have a central location for policies/procedures, videos and illustrations.
- Surgery is now performing elective cases. Announcements of the opening are through flyers and news/social media.
- Our two scholarship EMS students have completed their programs at Victoria College and have passed their state registry exams. Laura Herrera and Jason Corbell are now licensed paramedics.
- The Nursing Directors purchased bandage scissors for the nursing staff. Each Director provided baskets of goodies daily, including rolls of toilet paper. Multiple meals were served.

Growth

- Our Inpatient Dialysis Program officially began May 11, 2020. Staff completed the required education. Protocols are in place.
- Cardio/Pulmonary Rehab. will begin in June. Staff education will be complete May 30, 2020.

Community

- We will continue to provide CPR for Cuero Health only. Classes for the public will resume at a later date.
- Thank you to the community for their donations to Hospital and Nurses Week.

Nurse Staffing Plan Review

Yours in service,

Judy Krupala, CNO

Quality/Safety

- Provider entry at 74% but chart delinquency fell to 19%
- 1 inpatient fall with no injury
- Sepsis – 33% - 2 patients were given antibiotics outside 3 hour window; both tested for COVID19. Re-education of ER physicians and staff
- No new positive COVID19 patients; 139 patients tested
- Working with local nursing homes on patient transfer issues due to COVID19 and testing

People

- Nurses week celebrated May 6-12
- Hospital week celebrated May 11-16 – phenomenal community support of hospital week: money, food donations, community parade
- I have begun receiving applicants for Greg's position; in the meantime, I will fill clinic administrator position
- Keisha Whitman, Infection Control Nurse; Angela McKinney, Materials Director; and Sean Webb, Respiratory Therapist were submitted to THA as Hospital Heroes where they were recognized on the THA Facebook page for their contributions during this pandemic
- Staff feedback continues to be positive with regard to CRH preparedness and communication



Growth

- Dialysis training completed May 6; ready for our first patient
- Dr. Lemley doing well and will rent until desirable purchase opens up
- Due to house availability, Dr. John Pulvino accepted offer elsewhere
- Cardio Pulmonary Rehab training program rescheduled for May 25-26

Community

- Impressed with continued Community support of hospital
- Tami doing Facebook Live Workouts once per day; Wellness Center will open May 18 under restrictions set forth in Governor Abbott's executive order.
- Working with Congressmen/Reps to include Tax Districts in the Payroll Protection Program and to open up elective surgeries

Service

- Please refer to service scores on the Quality Dashboards



FY 2020

GOAL

Quality Improvement Dashboard

1Q2019

2Q2020

3Q2020

4Q2020

OCT

NOV

DEC

JAN

FEB

MAR

APR

MAY

JUNE

JULY

AUG

SEPT

Quality/Patient Safety Metrics

Total RL Solutions Reported		32	26	14	27	23	16	17					
Near Miss		2	5	0	3	2	3	1					
Precursor		21	15	11	21	15	12	11					
Serious Safety		1	0	1	0	1	0	0					
Medication Error	0	0	0	0	2	0	0	0					
Hand Off Communication Incidents	0	5	2	1	1	1	0	1					
2-patient identifier	95%	77%	92%	93%	97%	97%	94%	98%					
Medication Override-Overall	<10%	13.0%	10.9%	9.1%	9.3%	6.6%	7.1%	9.5%					
Medication Reconciliation complete < 24 hours	95%												
% Provider order entry	65%	70%	76%	68%	71%	76%	78%	76%					
% Blood Transfusion Criteria compliance	95%	100%	100%	100%	100%	100%	100%	100%					
% Chart Delinquency	<20%	19%	27%	30%	12%	4%	7%	19%					
Total Falls	0	7	4	1	2	3	1	1					
Inpatient Fall Rate (# falls per 1000 pt days)	<2%	14.5%	0%	3.7%	3.4%	0%	0%	5.2%					
Other Fall Rate (# other falls per consolidated APD)	<0.1%	0.19%	0.30%	0%	0.07%	0.30%	0.09%	0%					

Patient Satisfaction

Press Ganey Texas Rank Percentile

HCAHPS: Overall Rating	75th	86	99	23	23	43	1	80					
HCAHPS: Would Recommend	75th	21	15	17	54	46	32	81					
OAS-CAHPS: Overall Rating	51st	57	46	94	12	26	48						
OAS-CAHPS: Would Recommend	51st	3	23	4	25	19	85						
HH-HCAHPS: Overall Rating	65th	22	99	99	99	99	99						
HH-HCAHPS Score: Would Recommend	65th	75	99	17	99	99	1						
Clinics Satisfaction: Overall Rating	51st	7	4	9	27	24	16	69					
Clinics Satisfaction: Would Recommend	51st	8	8	4	30	21	3	80					
ER Satisfaction: Overall Rating	75th	73	68	34	41	81	69	79					
ER Satisfaction: Would Recommend	75th	66	88	21	23	87	78	88					

Infection Control

CAUTI	0	0	0	0	0	0	0	0					
CLABSI	0	0	0	0	0	0	0	0					
SSI	0	2	0	1	1	0	2	1					
Handwashing Compliance	95%	88%	88%	86%	94%	89%	90%	96%					

Goal Met



FY2020

GOAL

Core Measures Dashboard

1Q2019

2Q2020

3Q2020

4Q2020

OCT

NOV

DEC

JAN

FEB

MAR

APR

MAY

JUNE

JULY

AUG

SEPT

Core Measures

SEP-1 Sepsis Compliance	85%	80%	92%	80%	100%	100%	40%	33%						
PC-01 Elective Delivery	<2%	0%	0%	0%	0%	0%	0%							
PC-02 Cesarean Birth	<33%	37.5%	0%	67%	100%	50%	100%							
PC-03 Antenatal Steroids	97%	100%												
PC-05 Exclusive Breast Milk Feeding	50%	50%	67%	20%	50%	27%	43%							
OP-2 Fibrinolytic Therapy received within 30 min	100%													
OP-23 Head CT/MRI results interpreted within 45 min of ER arrival	100%		100%											
OP-29 Appropriate follow up for Colonoscopy	100%	100%	100%	100%	100%	100%	100%							
Goal Met														

Cuero Regional Hospital - Department QAPI dashboard 2020

Department	Indicator	Contact	Target Goal	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr
Ambulatory	Colonoscopy	Jennifer	100%	100%			
Anesthesia	Reintubation other than accidental extubation	Andy	0%	0%			
	Code Blue		100%	100%			
	Equipment Malfunction		0%	0%			
Bio-Med	Monthly BioMed PM Compliance	BioMed	100%	100%			
Childbirth	Infant Resuscitation	Wilma	100%	100%			
	STAT C-Section/Emergent C-Section		100%	100%			
	Physician Documentation		95%	86%			
	Prenatal Records		100%	97%			
	Transfers		100%	N/A			
Cardiopulmonary	Blood Gas Lab Compliance	Brenda	100%	88%			
Case Management	Peer to Peer's completed after denial	Cheryl	100%	33%			
	UR: ALOS - inpatient		<3.5	3.89			
Dietary	Press Ganey - Quality of food Top Box Score	Erin	50th	21%			
Emergency Room	Code Blue	Judy	90%	93%			
	STEMI referral Protocol		100%	75%			
	Stroke Care		85%	82%			
	Left Without Being Seen		<1.5%	1.3%			
	Left Against Medical Advice		<1%	0.9%			
	Trauma TAT imaging > 30 min		< 8%	14.0%			
EMS	Stroke Care	Freddie	100%	98%			
	Average Time to Call		<5min	5.65			
EVS	Daily Cleaning after discharge	Jonathan		new			
	HCAHPS - Cleanliness of Facility - Top Box		75%	63%			
Home Health	485 completed within 5 days	Margie	100%	100%			
ICU	Code Blue	Jennifer	90%	100%			
	Restraints		100%	100%			
	Cardizem Drips		95%	100%			
Infection Control	Sepsis Bundle - antibiotics given within 1 hour	Keisha	100%	85%			

	Pneumonia pathway		88%	50%
IT	Appropriateness of use	Suzy		new
Lab	Blood Transfusion Criteria Contaminated Blood Cultures	Sabrina	100%	100% new
Maintenance	Monthly PM Compliance	Rick	100%	100%
Medical Records	ABN Monitoring Chart Delinquency	Amanda	75% <20%	57% 7.7%
MedSurg	Falls Medication Reconciliation Code Blue	Rebecca	<2% 93% 90%	1.13% 95% 100%
Outpatient	Wound Care	Delia		new
PACU	Pain Relief Discharge Criteria Code Blue		95% 95% 90%	100% 100% 100%
Pharmacy	Overall hospital - Medication Scan Rate Medication Overrides	Lisa	98% <10%	96% 7.7%
Radiology	Turnaround times for reports within 30 min Unnecessary radional exposure to patients Proper disinfection of endocavity probe	Tyler	92% <7% 100%	85.3% 8.3% 100%
Registration	Registration email addresses obtained	Sandy	75%	33%
Surgery	Pre-Op checklist Operative Permits Patient Identification Surgical Counts	Jill T	100% 100% 100% 100%	100% 99% 100% 100%



GOAL

Clinics Quality Improvement Dashboard

FY 2020

1Q2019

2Q2020

3Q2020

4Q2020

OCT

NOV

DEC

JAN

FEB

MAR

APR

MAY

JUNE

JULY

AUG

SEPT

Patient Satisfaction

Press Ganey Texas Rank Percentile

Cuero Overall Satisfaction Score:	51st	10	1	10	52	14	11	68					
Cuero would recommend practice:	51st	6	6	8	61	9	4	89					
Goliad Overall Satisfaction Score:	51st	1	73	2	5	43	31	2					
Goliad would recommend practice:	51st	13	99	1	2	90	2	2					
Kenedy Overall Satisfaction Score:	51st	92	33	46	2	99	99	99					
Kenedy would recommend practice:	51st	99	99	10	2	99	99	99					
Parkside Overall Satisfaction Score:	51st	46	5	3	9	43	7	99					
Parkside would recommend practice:	51st	24	4	1	14	23	1	99					
Yorktown Overall Satisfaction Score:	51st	7	5	3	9	15	41	99					
Yorktown would recommend practice:	51st	7	4	9	15	6	7	99					
Combined Clinics Overall Satisfaction Score:	51st	7	4	9	27	24	16	69					
Combined Clinics would recommend practice:	51st	8	8	4	29	21	3	80					
Goal Met													

updated 5/5/2020



GOAL

Clinics Quality Measures Dashboard

FY2020

1Q2019

2Q2020

3Q2020

4Q2020

OCT

NOV

DEC

JAN

FEB

MAR

APR

MAY

JUNE

JULY

AUG

SEPT

Quality/Patient Safety Metrics

Total RL Solutions Reported for Clinics	3	7	1	2	7	2	4						
Near Miss	0	1	0	0	2	0	0						
Precursor	2	4	1	1	4	2	1						
Serious Safety	0	0	0	0	0	0	0						
Other	1	2	0	1	1	0	3						
Handwashing compliance		92%	88%	93%	87%	100%	93%						

Core Measures

Wait Time- average time from check-in to check-out	<60 mins	66 mins	67 mins	65 mins	65 mins	58 mins	53 mins	46 mins					
Wait Time- average time from check-in to seeing nurse	<20 mins	18 mins	18 mins	20 mins	17 mins	14 mins	10 mins	7 mins					
NQF 0034- Colorectal Cancer Screening according to USPSTF for patients 50-75 years of age	85%	74%	76%	73%	73%	75%	72%	73%					
NQF 0069- children 3mths to 18yrs who were diagnosed with URI and were not dispensed an antibiotic on or three days after episode	85%	90%	87%	87%	88%	84%	84%	88%					
NQF 0056- Diabetic Foot Exam for patients 18-75 yrs of age with diabetes (visual inspection, sensory exam w/mono filament, and pulse exam) during the measurement year	85%	69%	45%	53%	59%	61%	74%	72%					
NQF 2372- Breast Cancer Screening with mammogram for women 50-74 years of age	75%	56%	60%	55%	47%	56%	53%	51%					
NQF 0028- Smoking Cessation- patients age 18 & older who were screened for tobacco use & received tobacco cessation intervention if identified as tobacco user	85%	83%	80%	80%	84%	80%	80%	79%					
Gestational Diabetes Mellitus (GDM) Screening- in pregnant women between 24-28wks gestation	90%	67%	60%	33%	87%	88%	75%	88%					
Timely Chart Closure- percentage of charts open after date of encounter	<15%	41%	37%	29%	27%	27%	25%	20%					
Timely Review of Results- number of providers w/results outstanding for month 48hrs after month end	0	10	7	9	8	4	4	5					
Goal Met													

updated 5/4/2020

AGENDA ITEM #1

**Board Self Evaluations – Review and Take
Appropriate Action**

AGENDA ITEM #2

**CEO Evaluation by Board – Review and
Take Appropriate Action**

AGENDA ITEM #3

**Semi-Annual Nurse Staffing Plan – Review
and Take Appropriate Action**

Nursing Staffing Plan
Semi-Annual Review
October 2019—March 2020

In compliance with the Nurse Staffing Rules, a semi-annual evaluation of the Cuero Regional Hospital Nurse Staffing Plan is detailed in this document. Included in this semi-annual nurse staffing plan evaluation will be all patient handling and movement incidents as required in the Safe Patient Handling and Movement Policy. An evaluation of the nursing-sensitive indicators selected by the Cuero Regional Hospital Nurse Staffing Advisory Committee is included. This evaluation is presented to the Nurse Staffing Advisory Committee, Governing Board, Senior Leadership, the Medical Staff, Nursing Directors and all departments of Nursing.

The Nurse Advisory Committee is established by the nomination of nursing peers. The committee is represented by 60% of direct care nurses from each clinical department. Members of the Nurse Staffing Advisory Committee are as follows: Judy Krupala, RN, CNO; Jill Saenz, RN, QA/PI/RM Director, Korrie Valis, RN, OB; Angela Farmer, RN, ER; Jenna Carson RN, ICU; Kim Curlee, LVN, Surgery; Lynn Lunsford, LVN, MS. and Kari Mueller, RN, MS.

The purpose of the committee is to recommend a nurse staffing plan that protects patients, supports greater retention of registered nurses and promotes adequate staffing. The committee is charged with the following objectives:

- To develop and recommend a unit-and shift-based staffing plan to guide the hospital-wide assignment of nurses;
- To solicit feedback and review, assess and respond to staffing concerns expressed to the committee; and
- evaluate the effectiveness of the hospital’s nurse staffing plan based on nurse-sensitive outcome indicators and variations between the plan and actual staffing

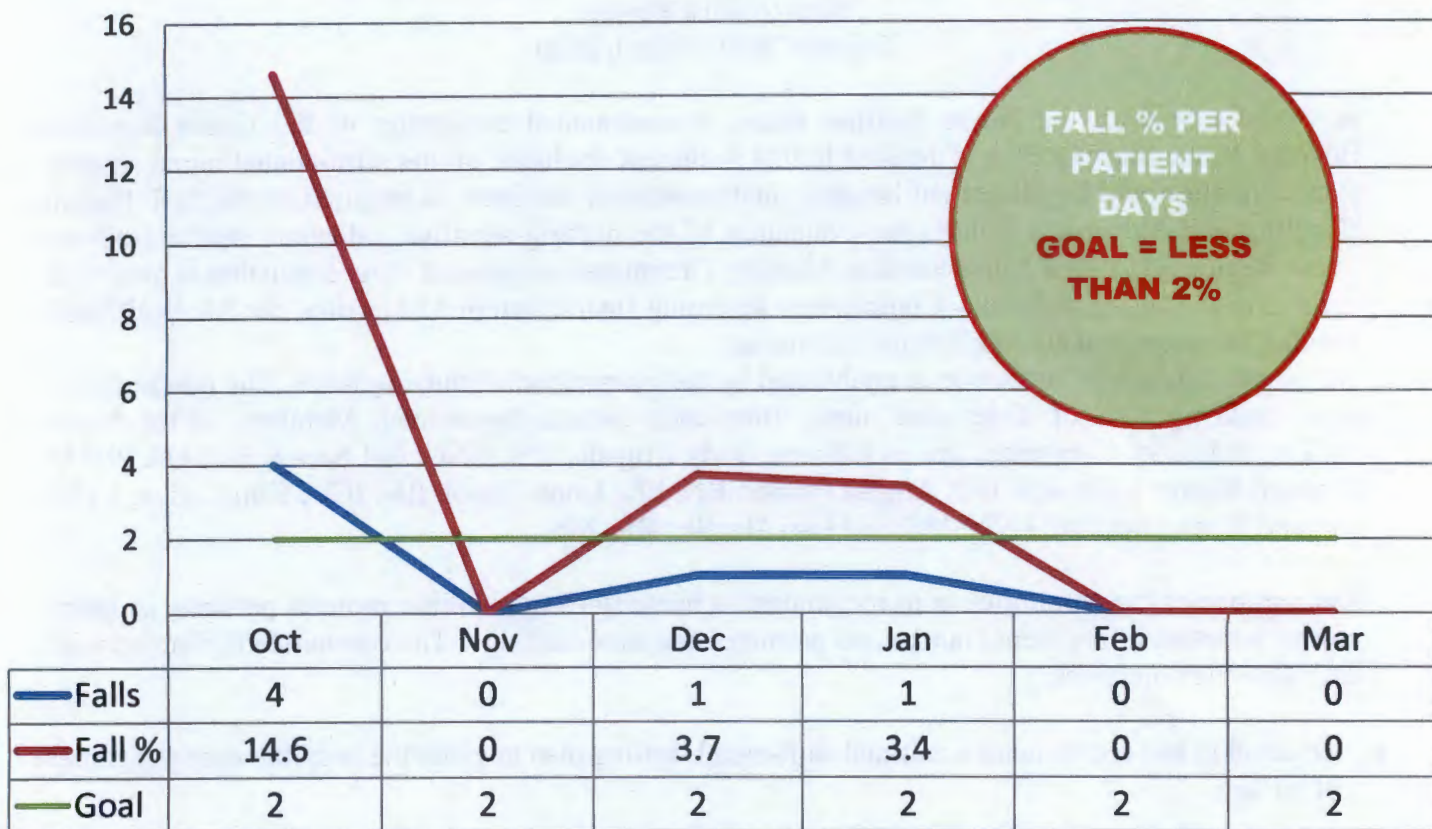
The average daily census for each nursing unit for the above calendar period is below:

	4-19 to 9-19 2019 (6 mos.)	10-19 to 3-20 2019-2020 (6 mos.)
MedSurg	6.31+1.93 (obs) = 8.23	1.72+6.48 (obs) = 8.20
ICU	1.05+.28 = 1.34	0.17+.95 = 1.11
OB	.71+ .25= .96	.09+ 1.05= 1.15
Nursery	.60	.82
ER visits	4741	5,388
Outpatient visits	22,449	21,507
Surgery encounters	550	557

(Obs) is the abbreviation for the “observation patient”.

1. Nurse Sensitive Indicators include falls, work related injury/illness, validated patient complaints related to staffing, and skin breakdowns. The evaluation follows:

October 2019 - March 2020 Fall Chart



Fall Prevention Team continues to work to decrease falls throughout our organization. We utilize the Plan, Do Check and Act Model (PDCA) which encompasses an interdisciplinary approach to patient safety with a focus on outcomes.

FALLS	Inpatient	ER	Outpatient	Clinic	Visitor	Total	Pt days	In Pt Fall %
October	4		1		2	7	274	14.6%
November			3	1		4	260	0%
December	1					1	268	3.7%
January	1		1			2	294	3.4%
February					3	3	201	0%
March					1	1	197	0%
Total	6	0	5	1	6	18	1494	4%

Work related injuries/illnesses.

DATE	DEPARTMENT	INJURY
Oct 2019	None	
Nov 2019	None	
Dec 2019	None	
Jan 2020	None	
Feb 2020	None	
Mar 2020	None	

Validated patient complaints related to staffing:

We had 1 patient complaint related to staffing levels. Complete documentation and investigation is provided through our QA process and RL solutions. We are also reviewing these at the Senior Leadership Weekly Meetings.

DATE	DEPARTMENT	COMPLAINT
Oct 2019	None	
Nov 2019	None	
Dec 2019	ER	ER patient's mom stated that the nurse came to the window right away and said that they had to clean a room and would come out and get her. She said the waiting room was packed and she felt like it was going to take a while to be cared for so she left.
Jan 2020	None	
Feb 2020	None	
Mar 2020	None	

Skin Breakdown.

There were no initial skin breakdowns that occurred while in the hospital.

Length of Stay:

- Oct – 3.1
- Nov – 3.2
- Dec – 3.1
- Jan – 3.0
- Feb – 2.8
- Mar – 2.7
- Total Average for 6 months 2.98

Hospital Acquired Pneumonia: We had 0 health care acquired pneumonia from October 2019 – March 2020.

2. **HCAHPS Scores:**

Our CMS HCAHPS Inpatient Survey reveals the following for this reporting period.

Inpatient HCAHPS	APRIL 2019 – SEPT 2019	OCT 2019 – MARCH 2020
Overall Rating	85%	79%
Would Recommend	86%	72%
Nurse Communication	90%	96%
Response of Hospital Staff	80%	77%
Doctor Communication	90%	89%
Hospital Environment	83%	77%
Cleanliness of hospital environment	85%	82%
Quietness of hospital environment	81%	72%
Communication about Medicines	71%	82%
Discharge Information	81%	85%
Care Transitions	68%	57%
Average	82%	79%
Number of Respondents	59	68

ER Satisfaction	APRIL 2019 – SEPT 2019	OCT 2019 – MARCH 2020
Overall Rating	72%	74%
Arrival	70%	69%
Nurses	79%	79%
Doctors	71%	74%
Tests	77%	78%
Family or Friends	74%	77%
Personal/Insurance	72%	77%
Personal Issues	66%	68%
Overall Assessment	74%	76%
Average	73%	75%
Number of Respondents	211	212

Ambulatory Care CAHPS	APRIL 2019 – SEPT 2019	OCT 2019 – MARCH 2020
Overall Rating	90%	88%
Recommend the facility	75%	81%
Communication	96%	94%
Facility/Personal Treatment	98%	97%
Discharge	97%	98%
Average	91%	92%
Number of Respondents	117	129

3. **Staffing Utilization and Productivity:**

ER	Fixed Staffing—2-RN's and a RN for the 2p-10p shift.
ICU	Fixed Staffing—2 RN's
OB	Fixed Staffing—2 RN's with the exception of 1 tenured LVN.
OR	Fixed Staffing—3 RN's with 3 scrub technicians (LVN's and CST).
Outpatient	1 LVN and 1 Aide
Med surg	Continues with staffing grid based on patient census.

Executive Summary:

1. Our ER visits, for this reporting period, have increased. Our outpatient visits have decreased. We have seen a slight decrease in our surgical encounters. Our ICU and Med Surg units have remained constant.
2. Nursing education, during this reporting period, has included the following:

- | | |
|---|-------------------------|
| Nursing Educ. Leadership Institute Academy | Neonatal Sepsis |
| Charge Nurse Leadership Certificate program | Pre-eclampsia/Eclampsia |
| Immunization for Children Storage and Handling | Team Stepps |
| CMS Hospital Conditions of Participation | BLS |
| Asthma Time-Maintain a Healthy Home to control Asthma Education | Pediatric Code Blue |
| Healthcare Challenges in Chemical Incidents | EKG/Capnography |
| Nursing Skills Rally and Employee Skills Rally | ACLS/PALS |
| Dialysis and Defibrillator training | Employee Forums |
| Cardiac Rehab—Shadowing | Donning and Doffing |
| Sensitive Data on Scams | KCI wound Vac |
| COVID.19 | Wound Care |
| Code Blue | EKG Class |
| Hypoxic Ischemic Encephalopathy | De-escalation class |
| Infrared Skin Thermometer | GE Radiant Warmer |
| | Arterial Lines |

3. We have not completed our training on "Care of the Dialysis Patient". We will complete this training and begin accepting dialysis patients in May.
4. Our Cardiopulmonary Rehabilitation Program is still on course to open in June.
5. Our Patient Satisfaction Scores have increased in ER and Ambulatory Care. We have seen a decrease in our Inpatient Scores. Rebecca Murray, Med Surg. Director and Wilma Reedy, OB Director will address with staff members and develop improvement plans for our patients specific to response of staff, quietness of environment and care transitions. Our painting and plumbing projects are now complete on the Med Surg. floor, but the painting has just begun in the OB unit.
6. Our Trauma Designation Survey will be September 21-22, 2020.
7. Staffing vacancies: 1-MS, 0-ER, 0-OB, 0-ICU/Day Surgery/PACU, 0-OP, 0-Surgery
8. Project LINC students: we currently have two Project LINC students. One will graduate in May. We have one nurse waiting to take her State Board exam.

Yours in Service,

The Nurse Staffing Committee

Yours in Service

Nurse Staffing Committee

AGENDA ITEM #4

**Quarterly QA/Risk Management/Safety
Report – Review and Take Appropriate
Action**

QUALITY ASSESSMENT REPORT 2020



INDICATORS		JAN	FEB	MAR	1st	APR	MAY	JUNE	2nd	JULY	AUG	SEPT	3rd	OCT	NOV	DEC	4th	2020	2019
SURGICAL CASE REVIEW	Post Op Complications(SSI)	1	0	2	3														
	Surgical Incidents	0	1	0	1														
	C-Section Rates	28.6%	38%	20%	29%														
BLOOD USAGE REVIEW	Number of Blood Transfusion	32	24	25	81														
	Blood use not meeting criteria	0	0	0	0														
	Transfusion reactions	0	0	0	0														
DRUG USAGE REVIEW	Minor Drug Reactions	1	1	1	3														
	Major Drug Reactions	0	0	0	0														
	% Medication Overrides	9.3%	6.5%	7.1%	7.6%														
MEDICAL RECORDS	Total Delinquent Charts	28	7	10	45														
	% Delinquency	12%	4%	7%	7.7%														
	Provider Entry Orders	4,583	3,353	2,862	10,798														
	% Provider Entry Orders	71%	76%	76%	74%														
INFECTION CONTROL	HAI Rate	0.5%	0.3%	0.7%	0.5%														
	Surgical Site Infection Rate	1%	0%	3%	1.3%														
	CLABSI/CAUTI	0	0	0	0														
	Handwashing Compliance	94%	89%	90%	91%														
QUALITY OF CARE REVIEW	Readmission within 30 Days	3	1	2	6														
	Readmission rate	3.5%	1.7%	3.3%	2.8%														
	Total # of EMS "911 calls"	138	132	126	396														
	EMS Bypass	16	12	14	42														

Privileged and Confidential - This is a confidential committee communication prepared at the direction of the hospital quality and peer review committees and as part of the quality, patient safety and risk management activities of Cuero Community Hospital. These committees are on going and are engaged in quality monitoring, performance improvement, professional review and /or peer review activities in the interest of preventing injury and improving medical and health care services. This document is to be used for quality, performance improvement, peer review, and patient safety activities only. This document is confidential and privileged and is not subject to court subpoena in accordance with § 161.031, et seq. of the Texas Health & Safety Code, §§ 151.001 et seq, 160.001, et seq, and 303.001 et seq of the Texas Occupations Code and 42 U.S.C.A, Section 11101 et seq. and 1320. It is a privileged document and not intended as a communication in the regular course of business

CUERO REGIONAL HOSPITAL - RISK MANAGEMENT REPORT 2020

EMPLOYEE INCIDENTS	JAN	FEB	MAR	APR	MAY	JUNE	JULY	AUG	SEPT	OCT	NOV	DEC	2020	2019
Falls	0	0	1											
Strain/Sprain	0	0	4											
Skin Tear/Cut	1	2	0											
Needlestick/Sharps Issue	0	0	0											
Exposure	0	0	0											
Other	0	1	1											
TOTAL	1	3	7											
Lost Time Injury days	23	18	0											
FTE's Worked	297.4	281.87	300.78											
% of Employees Injuries	3.4%	10.6%	0.0%											
PATIENT INCIDENTS														
Fall w/o injury or minor	1	0	0											
Falls with Serious Injury	0	0	0											
Medication Errors	2	0	0											
Treatment Errors	0	0	0											
Other	0	0	0											
TOTAL	3	0	0											
Patient Grievances	0	0	0											
Identification Incidents	2	2	1											
CLINIC INCIDENTS														
Falls	0	0	0											
Medication Errors	0	0	0											
Treatment Errors	0	0	0											
Other	0	0	1											
OUTPATIENT/VISITOR INCIDENTS														
Falls	1	3	1											
Other	1	0	0											
SAFETY/SECURITY														
Theft (Including Alleged)	0	0	0											
Property Damage/Vandalism	0	1	0											
Disorderly Person	0	1	0											
Other	7	4	4											
PHYSICIAN INCIDENTS														
Complaints-Staff Physicians	0	0	0											
Complaints-ER Physicians	0	0	0											
Provision of Care	2	3	1											
PROFESSIONAL CONDUCT														
Physicians	1	0	1											
Staff	6	6	3											

AGENDA ITEM #5

**Investment Policy/Strategies/Approved
Broker Annual Reports – Review and Take
Appropriate Action**

**DEWITT MEDICAL DISTRICT
d/b/a
CUERO REGIONAL HOSPITAL**

INVESTMENT POLICY

The Governing Body of DeWitt Medical District d/b/a Cuero Regional Hospital may purchase, sell, and invest its funds and funds under its control in investments authorized under the Public Funds Investment Act, Chapter 2256, Texas Government Code, as amended (the "act") in compliance with investment policies approved by the Governing Body and according to the standard of care set forth in this policy.

This Policy, adopted by resolution is intended to comply with this Act.

I. PURPOSE

The purpose of this investment policy is to:

- A. Primarily emphasize safety of principal and liquidity;
- B. Address investment diversification, yield, and maturity and the quality and capability of investment management.
- C. List the types of authorized investments; and,
- D. Specify the maximum allowable stated maturity of investments.

II. STANDARD OF CARE

- A. Investments shall be made with judgment and care, under prevailing circumstances, that a person of prudence, discretion, and intelligence would exercise in the management of the person's won affairs, not speculation, but for investment, considering the probable income to be derived.
- B. Investment of funds shall be governed by the following investment objectives, in order of priority:
 - 1. Preservation and safety of principal;
 - 2. Liquidity;
 - 3. Yield.
- C. In determining whether an investment officer has exercised prudence with respect to an investment decision, the determination shall be made taking into consideration:
 - 1. The investment of all funds, or funds under the Hospital's control, over which the officer had responsibility rather than a consideration as to the prudence of a single investment; and

2. Whether the investment decision was consistent with the written investment policy of the Hospital.
- D. Market price of investments will be monitored by requiring three pricing quotes to determine proper pricing of investments.
- E. The settlement of all transactions, except investment pool funds and mutual funds, will be on a delivery versus payment basis.

III. INVESTMENT STRATEGY

- A. As an integral part of this investment policy, Hospital shall adopt a separate written investment strategy for each of the funds under its control.
- B. Each investment strategy must describe the investment objectives for the particular funds using the following priorities in order of importance:
 1. Understanding of the suitability of investment to the financial requirements of the hospital;
 2. Preservation and safety of principal;
 3. Liquidity;
 4. Marketability of the investment if the need arises to liquidate the investment before maturity;
 5. Diversification of the investment portfolio; and
 6. Yield.

IV. INVESTMENT OFFICER

1. The Investment Officer shall exercise the judgement and care, under prevailing circumstances, that a prudent person would exercise in the management of the person's own affairs. Unless authorized by law, a person may not deposit, withdraw, transfer, or manage in any other manner the funds of the Hospital.
2. Such authority is effective until Hospital rescinds the authority or terminates the person's employment.
3. An officer or employee of a regional planning commission, council of governments or similar regional planning agency created under Chapter 391, Local Government Code, is ineligible to be designated as an investment officer for any investing entity other than the Hospital.
4. An investment officer of Hospital who has a personal business relationship with a business organization offering to engage in an investment transaction with the hospital shall file a statement disclosing that personal business interest. An investment officer who is related within the second degree by affinity or consanguinity, to an individual seeking to sell an investment to the Hospital shall file a statement

be filed

disclosing that relationship. A statement required under this subsection must with the Texas Ethics Commission and the Governing Body of the Hospital. An investment officer will have a personal business relationship with a business organization if:

- a. the investment officer owns 10% or more of the voting stock or shares of the business organization or owns \$5,000 or more of the fair market value of the business organization.
- b. funds received by the investment officer from the business organization exceed 10% of the investment officer's gross income for the previous year; or
- c. the investment officer has acquired from the business organization during the previous year investments with a book value of \$2,500 or more for the personal account of the investment officer.

5. Reporting.

- a. Not less than quarterly, the investment officer shall prepare and submit to the governing body of Hospital a written report of investment transactions for all funds subject to this Policy for the preceding reporting period.
- b. The report must:
 - (1) Describe in detail Hospital's investment position on the date of the report.
 - (2) Be prepared jointly by all investment officers of the Hospital;
 - (3) Be signed by each investment officer of the Hospital;
 - (4) Contain a summary statement, prepared in compliance with generally accepted accounting principals, of each pooled fund group that states the:
 - * beginning market value for the reporting period;
 - * additions and changes to the market value during the period;
 - * ending market value for the period;
 - * fully accrued interest for the reporting period.
 - (5) State the book value and market value of each separate invested asset at the beginning and end of the reporting period by the type of asset and fund type invested;
 - (6) State the maturity date of each separately invested asset that has a maturity date;
 - (7) State the account or fund or pooled group fund in the Hospital for which each individual investment was acquired; and
 - (8) State the compliance of the investment portfolio of the Hospital with:
 - * the investment strategy expressed in the Hospital's investment policy
 - * relevant provisions of the Act.

- c. The report shall be presented not less than quarterly to the Hospital Governing Body and Administrator within a reasonable time after the end of the period.
- d. A report on the Public Funds Investment Act will be prepared and presented to the Governing Board by the investment officer no later than 180 days after the close of the legislative session.
- e. If the Hospital invests in other than money market mutual funds, investment pools or accounts offered by its depository bank in the form of certificates of deposit, or money market accounts or similar accounts, the reports prepared by the investment officers shall be formally reviewed at least annually by an independent auditor, and the result of the review shall be reported to the Governing Board by the auditor.

V. GENERAL PROVISIONS

- A. The Governing Body shall review its investment policy and investment strategies not less than annually. The Governing Body shall adopt a written resolution stating that it has reviewed the investment policy and investment strategies and that the resolution shall record any changes made to either the investment policy or investment strategies.
- B. The Controller of the Hospital shall be the investment officer to be responsible for the investment of its funds.
- C. Bids for certificate of deposit may be solicited:
 - 1. Orally;
 - 2. In writing;
 - 3. Electronically; or
 - 4. In any combination of those methods.
- D. A written copy of this Policy shall be presented to any person offering to engage in an investment transaction with the Hospital. Hospital's investment officer may not buy any securities from a person who has not delivered to Hospital an instrument in substantially the form provided by Section E. The Hospital will still have the responsibility of monitoring the investments to determine that they are in compliance with the investment policy.
- E. The qualified representative of the business organization offering to engage in an investment transaction shall execute a written instrument in a form acceptable to the Hospital and the business organization substantially to the effect that the

business organization:

1. Has received and reviewed the investment policy of the Hospital;
2. Has acknowledged that the business organization has implemented a reasonable procedures and controls in an effort to preclude investment transactions conducted between the Hospital and the organization that are not authorized by the Hospital's investment policy, except to the extent that this authorization is dependent on an analysis of the makeup of the Hospital's entire portfolio or requires an interpretation of subjective investment standards.

- F. Hospital, in conjunction with its annual financial audit, shall perform a compliance audit of management controls on investments and adherence to Hospital's established investment policies.
- G. The Governing Body authorizes any investment authorized by the Act.
- H. The Governing Body or designated investment committee shall, at least annually, review, revise, and adopt a list of qualified brokers that are authorized to engage in investment transactions with the Hospital.

VI. AUTHORIZED INVESTMENTS:

- A. Obligations of, or guaranteed by, governmental entities except as provided by Section VI, B; the following are authorized investments:
1. Obligations of the United States or its agencies and instrumentalities;
 2. Direct obligation of this state or its agencies and instrumentalities;
 3. Collateralized mortgage obligations directly issued by a federal agency or instrumentality of the United States, the underlying security for which is guaranteed by an agency or instrumentality of the United States.
 4. Other obligations the principal and interest of which are unconditionally guaranteed or insured by, or backed by the full faith and credit of, this state or the United States or their respective agencies and instrumentalities; and
 5. Obligations of states, agencies, counties, cities, and other political subdivisions of any state rated as to investment quality by a nationally recognized investment rating firm not less than A or its equivalent.
- B. The following are not authorized investments under this section:
1. Obligations whose payment represents the coupon payments on the outstanding principal balance of the underlying mortgage-backed security collateral and pays no principal;

2. Obligations whose payment represents the principal stream of cash flow from the underlying mortgage-backed security collateral and bears no interest;
3. Collateralized mortgage obligations that have a stated final maturity date of greater than 10 years; and,
4. Collateralized mortgage obligations the interest rate of which is determined by an index that adjusts opposite to the changes in market index.

C. Certificates of Deposit: A Certificate of deposit or share certificate is an authorized investment if the certificate of deposit is issued by a state or national bank domiciled in this state, a savings bank association domiciled in this state or a state or federal credit union domiciled in this state, and is:

1. Guaranteed or insured by the Federal Deposit Insurance Corporation or its successor;
2. Secured by obligations that are obligations of or guaranteed by entities by governmental as described by Section V.A., including mortgage backed securities directly issued by a federal agency or instrumentality that have a market value of not less than the principal amount of the certificates, but excluding those mortgage backed securities that are not authorized investments as provided in Section V.B. above.
3. Secured in any other manner and amount provided by law for deposits of Hospital.

D. Repurchase Agreements:

1. A fully collateralized repurchase agreement is an authorized investment if the repurchase agreement:
 - a. Has defined termination date;
 - b. Is secured by obligations described by Section VI.A. Above;
 - c. Requires the securities being purchased by Hospital to be pledged to Hospital, held in the Hospital's name and deposited at the time the investment is made with Hospital or with a third party selected and approved by Hospital; and
 - d. Is placed through a primary government securities dealer, as defined by the Federal Reserve, or a financial institution doing business in this state.

2. In this section, "repurchase agreement" means a simultaneous agreement to

buy, hold for a specified time and sell back at a future date obligations described by Section VI.A. above at a market value, at the time the funds are disbursed, or not less than the principal amount of the funds disbursed. The term includes a direct security repurchase agreement and a reverse security repurchase agreement.

3. Notwithstanding any other law, the term of any reverse security repurchase agreement may not exceed 90 days after the date the reverse security repurchase agreement is delivered.
4. Money received by Hospital under the terms of reverse security repurchase agreement shall be used to acquire additional authorized investments, but the term of the authorized investments acquired must mature not later than the exception date stated in the reverse security repurchase agreement.

E. Bankers' Acceptance. A banker's acceptance is an authorized investment if the bankers' acceptance:

1. Has a stated maturity of 270 days or fewer from the date of its issuance;
2. Will be, in accordance with its terms, liquidated in full at maturity.
3. Is eligible for collateral for borrowing from a Federal Reserve Bank; and
4. Is accepted by a bank organized and existing under the laws of the United States or any state, if the short-term obligations of the banks, or of a bank holding company of which the bank is the largest subsidiary, are rated not less than A-1 or P-1 or an equivalent rating by at least one nationally recognized credit rating agency.

F. Commercial Paper. Commercial paper is an authorized investment if the commercial paper:

1. Has a stated maturity of 270 days or fewer from the date of its issuance; and
2. Is rated not less than A-1 or P-1 or an equivalent rating by at least:
 - a. two nationally recognized credit rating agencies; or
 - b. one nationally recognized credit rating agency and is fully secured by an irrevocable letter of credit issued by a bank organized and existing under the laws of the United States or any state.

G. Mutual Funds.

1. A no-load money market mutual fund is an authorized investment if the mutual fund:
 - a. Is registered with and regulated by the Securities and Exchange Commission;
 - b. Has a dollar-weighted average stated maturity of 90 days or fewer; and

- c. Includes in its objectives the maintenance of a stable net asset value of \$1 for each share.
 - d. Provides the Hospital with a prospectus and other information required by the Securities Exchange Act of 1934 or the Investment Company Act of 1940.
2. In addition to a no-load money market mutual fund permitted as an authorized investment, a no-load mutual fund is an authorized investment if the mutual fund:
- a. Is registered with the Securities and Exchange Commission;
 - b. Has an average weighted maturity of less than two years.
 - c. Is invested exclusively in obligations approved by the Act,
 - d. Is continuously rated as to investment quality by at least one nationally recognized investment rating firm of not less than AAA or its equivalent; and
 - e. Conforms to the requirements set forth in the Act relating to the eligibility of investment pools to receive and invest funds of investing entities.
3. Hospital is not authorized to
- a. Invest, in the aggregate, more than 15 percent of its monthly average fund balance, excluding bond proceeds and reserves and other funds held for debt service, in mutual funds described in Subsection (2), either separately or collectively,
 - b. Invest any portion of bond proceeds, reserves, and funds held for debt service, in mutual funds described in Subsection (2), or
 - c. Invest its funds or funds under control, including bond proceeds and reserves and other funds held for debt service, in any one mutual fund described in Subsection (1) or (2) in an amount that exceeds 10 percent of the total assets of the mutual fund.

H. Investment Pools.

- 1. Hospital may invest its funds and funds under its control through an eligible investment pool if Hospital's governing body by resolution authorizes investment in the particular pool. An investment pool shall invest the funds it receives from entities only as permitted by the Act and only in authorized investments permitted by the Act.
- 2. To be eligible to receive funds from and invest funds on behalf of Hospital, an investment pool must furnish to the investment officer or other authorized

representative of Hospital an offering circular or other similar disclosure instrument that contains, at a minimum, the following information:

- a. The types of investments in which money is allowed to be invested;
 - b. The maximum average dollar-weighted maturity allowed, based on the stated maturity date, of the pool;
 - c. The maximum stated maturity date any investment security within the portfolio has;
 - d. The objectives of the pool;
 - e. The size of the pool;
 - f. The names of the members of the advisory board of the pool and dates their terms expire;
 - g. The custodian bank that will safekeep the pool's assets;
 - h. Whether the intent of the pool is to maintain a net asset value of one dollar and the risk of market price fluctuation;
 - i. Whether the only source of payment is the assets of the pool at market value or whether there is secondary source of payment, such as insurance or guarantees, and a description of the secondary source of payment;
 - j. The name and address of the independent auditor of the pool;
 - k. The requirements to be satisfied for Hospital to deposit funds in and withdraw funds from the pool and any deadlines or other operating policies required for Hospital to invest funds in and withdraw funds from the pool; and
 - l. The performance history of the pool, including yield, average dollar-weighted maturities and expense ratios.
3. To maintain eligibility to receive funds from and invest funds on behalf of Hospital, an investment pool must furnish to the Hospital's investment officer or other authorized representative:
- a. Investment transaction confirmations; and
 - b. A monthly report that contains, at a minimum, the following information:
 - (1) The types and percentage breakdown of securities in which the pool is invested;
 - (2) The current average dollar-weighted maturity, based on the stated maturity date of the pool, which is not greater than 90 days.
 - (3) The current percentage of the pool's portfolio in investments that have stated maturities of more than one year;

- (4) The book value versus the market value of the pool's portfolio, using amortized cost valuation;
- (5) The size of the pool;
- (6) The number of participants in the pool;
- (7) The custodian bank that is safekeeping the assets of the pool;
- (8) A listing of daily transaction activity of the Hospital participating in the pool;
- (9) The yield and expense ratio of the pool;
- (10) The portfolio managers of the pool; and
- (11) Any changes or addenda to the offering circular.

4. In this section, "Yield" shall be calculated in accordance with regulations governing the registration of open-end management investment companies under the Investment Company Act of 1940, as promulgated from time to time by the federal Securities and Exchange Commission. Hospital, by contract, may delegate to an investment pool, the authority to hold legal title as custodian of investments purchased with its local funds.

I. Miscellaneous.

1. **Effect of Loss Required Rating.** An investment that requires a minimum rating under the Act does not qualify as an authorized investment during the period the investment does not have the minimum rating. Hospital shall take all prudent measures that are consistent with its investment policy to liquidate an investment that does not have the minimum rating.
2. Except with respect to those investing entities described in Subsection 3 below, a security described in Section VI., B. is not an authorized investment for Hospital notwithstanding any other provision of the Act or other law to the contrary.
3. Mortgage pass-through certificates and individual mortgage loans that may constitute an investment described in the Act, Section 2256.009 (b) are authorized investments with respect to the housing bond programs operated by:
 - a. the Texas Department of Housing and Community Affairs or a nonprofit corporation created to act on its behalf;
 - b. Municipal or County Housing Authorities; or
 - c. Municipal or County Housing Finance Corporations.
4. The Hospital may use electronic means to transfer or invest all funds that it collects or controls.

5. Any investment securities authorized by and acquired under Chapter 2256, Government Code, prior to September 1, 1995, and no longer authorized investment securities under that chapter as amended by Chapter 402, 74th Legislature, Regular Session (1193), need not be liquidated before the final stated maturity of the investment.
6. Notwithstanding any other law, a municipality with a population of less than 50,000 may not issue for any purpose or cause to be issued in its behalf any installment sale obligation or lease-purchase obligation having the principal amount of \$1 million or more without complying with the provisions of Section 3.002, Chapter 53, Acts of the 70th Legislature, 2nd Called Session, 1987, regardless of whether the obligation was issued individually or in a series of related transactions, or whether the obligation was issued with no recourse to the Hospital.

VII. INVESTMENT TRAINING:

- A. The Treasurer, or Chief Financial Officer, if the Treasurer is not the chief Financial Officer, and the Investment Officer of Hospital shall attend at least one training session relating to the treasurer's or officer's responsibilities under this Policy and the Act within 12 months after taking office or assuming duties.
- B. The Treasurer, or Chief Financial Officer, if the Treasurer is not the Chief Financial Officer, and the Investment Officer of the Hospital shall attend an investment training session not less than once in a two-year period and receive not less than 10 hours of instruction relating to investment responsibilities under this Act from an independent source approved by the Governing Board of the Hospital or a designated investment committee advising the investment officer.
- C. Training under this section must include education in investment controls, security risks, strategy risks, market risks, diversification of investment portfolio and compliance with the Act.
- D. Authorized training may be obtained from Region III, Texas Association of School Business Officials, Patterson & Associates, TML, TWB, TASBO, Virtual Learning Concepts, Texas Association of Counties, and any course offered by a recognized training program in the state of Texas.

VIII. This Policy takes effect May 28, 2020.

Adopted by the Governing Body of the DeWitt Medical District d/b/a Cuero Regional Hospital this the 28th Day of May, 2020.

Richard Wheeler, Chairman

Faye Sheppard, Vice Chairman

Charles W. Papacek, Secretary

John Frels, Member

Cynthia Sheppard, Member

ATTACHMENT A
RESOLUTION TO ADOPT INVESTMENT STRATEGIES OF DeWitt MEDICAL DISTRICT

Whereas, the Public Funds Investment Act of Texas, Section 2256.005(d) requires a governing body to adopt a separate written investment strategy for each of the funds under it's control; and

Whereas, the governing Board of Directors of DeWitt Medical District desires to insure the financial security and liquidity of DeWitt Medical District funds at all times:

NOW THEREFORE BE IT RESOLVED, that the Board of Directors of DeWitt Medical District adopt the following investment strategies by fund:

All funds are considered the DeWitt Medical District Fund and will be considered for investments as follows:

An operating balance is to be kept at all times to meet the cash flow needs in the depository bank, drawing interest under the depository contract.

Funds not needed to meet current year obligations may be invested in securities approved by the DeWitt Medical District Investment Policy. The investments will not exceed stated maturity dates outlined in the policy. And for those investments with no stated maturity date the maximum maturity shall be 3 years.

For diversification, a portion of the fund balance may be deposited in an investment pool if the interest earned is higher than provided under the local depository contract.

Unanimously adopted this the 28th day of May, 2020.

Richard Wheeler, Chairman

Faye Sheppard, Vice Chairman

Charles W. Papacek, Secretary

John Frels, Member

Cynthia Sheppard, Member

**ATTACHMENT B
LIST OF APPROVED INVESTMENT BROKERS**

The following Brokers have been approved this 28th Day of May, 2020 to engage in investment transactions with the Hospital:

Wells Fargo Investment Services
LOGIC - Local Government Investment Cooperative
MBIA Investment Pool
Texpool
Wells Fargo Brokerage Services, LLC
Prosperity Private Investments

Richard Wheeler, Chairman

Faye Sheppard, Vice Chairman

Charles W. Papacek, Secretary

John Frels, Member

Cynthia Sheppard, Member

AGENDA ITEM #6

**Annual Audit Report and Board Education –
BKD, LLC – Review and Take Appropriate
Action**

AGENDA ITEM #7

**Approve Medical Staff By-Law Revisions –
Review and Take Appropriate Action**

Attached are the Medical Staff Bylaws with my recommended revisions. I know these are extensive, so if there are any questions, I'm happy to explain reasons for changes. The following are the significant substantive revisions:

- Sec. 1.1: Add or revise the following definitions – Allied Health Professional, Applicant, Board of Directors, Bylaws, CEO, Clinical Privileges, Complete Application, Dentist, Ex Officio, Hospital, Medical Staff, Member, Member in good standing, Peer Review, Physician, Podiatrist, Practitioner, Suspension, Termination
- Sec. 2.1: Add purposes regarding organization of Medical Staff, licensure, and accountability.
- Sec. 3.1: Add provisions regarding the nature of Medical Staff membership.
- Sec. 3.2: Update qualifications for membership.
- Sec. 3.3 – 3.7: Add provisions on effect of other affiliations, non-discrimination, authorizations and releases, basic responsibilities, and waiver of qualifications.
- Sec. 3.9.a: Add provision on submission of application, complete application, and effect of misrepresentation, misstatement or omission.
- Sec. 3.9.f-l: Revise to clarify process for review of application by MEC, action by the Board, notice of final decision, reapplication, reappointment, requests for modification of privileges, and use of outside reviewers.
- Sec. 4.2: Clarify qualifications, prerogatives, and responsibilities of Active Staff.
- Sec. 4.3: Add new category of Affiliate Staff.
- Sec. 4.5: Consolidate categories of Consulting/Courtesy Staff.
- Sec. 4.6: Clarify that new appointees are on provisional status rather than a separate staff category.
- Sec. 5.1: Add new provisions regarding the determination of clinical privileges and requirement for request for clinical privileges.
- Sec. 5.4: Move section about dentists and oral surgeons from 3.4 to 5.4.
- Sec. 5.5: Revise section about H&P privileges to follow hospital licensing rule and CMS Condition of Participation language.
- Sec. 5.6: Update section on temporary privileges (to be used in very limited circumstances).

- Sec. 5.8: Update section on disaster privileges.
- Sec. 5.9: Replace section on telemedicine privileges to follow CMS Condition of Participation language.
- Sec. 5.10: Add section on leave of absence.
- Sec. 5.11: Add section on allied health professionals; note that AHPs are not members of the Medical Staff but do hold clinical privileges.
- Sec. 6.1: Move provisions regarding peer review to this section.
- Sec. 6.4: Revise section on corrective action – this should be handled by the MEC following a request by the Peer Review Committee, CEO or Board.
- Sec. 6.5: Revised section on summary suspension.
- Sec. 6.6: Add grounds for automatic suspension for Medicare/Medicaid exclusion or conviction/no contest plea to a felony; add provisions for reporting, notice, and reinstatement following automatic suspension.
- Sec. 7.2: Update provisions on notice of action.
- Sec. 7.3: Clarify requirements for request for hearing.
- Sec. 7.6: Revise provisions on hearing committee and hearing officer.
- Sec. 7.7: Add section on list of witnesses.
- Sec. 7.8: Clarify provisions on hearing process regarding burden of proof, hearing record, hearing recesses.
- Sec. 7.9-7.13: Add provisions on process following completion of hearing – hearing report, action on report, notice of result, effect of result.
- Sec. 7.14: Update provisions on appellate review.
- Sec. 7.15: Add provision regarding action taken following appellate review.
- Sec. 8.1.h: Add provision regarding resignation from office.
- Art. IX: Clarify provisions regarding committees in accordance with information received from hospital on actual practice.
- Art. X: Add provisions on regular and special meetings, place for meetings, notice of special meeting, manner of acting, procedures, minutes and rules of order.
- Art. XI: Update sections on adoption of rules and regulations and revision of same.
- Art. XII: Update sections on adoption, amendment and review of bylaws.

Jennifer Claymon
Member
Board Certified, Health Law
Texas Board of Legal Specialization

512-660-5965 direct
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[Bio](#)

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rcmhlaw.com

**Reed +
Claymon**

Notice: This communication, including attachments, may contain information that is confidential and protected by the attorney/client or other privilege. It is intended to be conveyed only to the designated recipient(s). If the reader or recipient of this communication

AGENDA ITEM #8

Current Capital Risks – Information Only

Current Capital Risks

Dept	Item	Cost	Urgency Explanation
HH	Laptops	\$ 2,800	Current laptops not functioning properly at all times. Needed to document/bill
ICU/Day Surg	Telemetry	\$ 106,583	Budgeted fy21 but several downtime issues; not supported by company. If it crashes we no longer can provide tele services, loss of volume
ER	Telemetry		Intermittant issue; budgeted in FY21
EMS	LifePak	\$ 42,000	Item was dropped; held together with a zip tie. No longer supported by vendor. Not budgeted for this year.
EMS	Lucas	\$ 18,000	We have one and it is used in ER and on scenes
EMS	Video Laryngoscopes	\$ 5,000	Currently we do not have, using this equipment minimizes space between patient and intubation. 2 X \$2500
MedSurg	Bedside Tables/Cabinets	\$ 24,000	Item budgeted to be partially reimbursed by Volunteers. Safety concern with tables when raising/lowering table.
MedSurg	Mattresses	\$ 3,750	To replace 5 mattresses that are 15 years old. Mattresses are needed for patient care, IC and patient satisfaction.
Facility	Infrastructure/Negative Pressure	TBD	Upgrade to add more negative pressure rooms on med surg and ICU - long term COVID care
Facility	PAPRS	\$ 18,000	Replace 15 yo PAPRS and add 5 for total of 10; long term COVID care
OB	Floor Replacement	\$ 12,800	Floors in 3 labor rooms are not solid surface; cracks are infection control issue
RT	ABG Machines	\$ 17,000	Current machines over 7 yrs old and no longer serviceable. Without ABG machine, CRH not able to provide emergency & ICU level care
IT	IT Servers/Network	\$ 1,100,000	Servers are intermittently have problems. In the past two weeks, system taken down for emergent repair and replacement of drives. Houses all meditech, loss of servers takes down clinical and financial systems
Surg/Anesthesia	Anesthesia Machine	\$ 72,000	This is the OB unit. Out of date, end of life, GE does not have parts readily available. If machine goes down, no replacement in hospital. Machine is 18 years old.
TOTAL		\$ 1,421,933	

AGENDA ITEM #9

**Board Resolution regarding Authorized
Users on Bank Accounts – Review and Take
Appropriate Action**

RESOLUTION

BE IT RESOLVED: By the Board of Directors of the DeWitt Medical District, meeting in regular session on May 28, 2020, that the Board hereby authorizes:

Lynn Falcone, Chief Executive Officer _____

Alma Alexander, Chief Financial Officer _____

Denise McMahan, Assistant Administrator _____

to sign checks for all accounts with Prosperity Bank.
(Bank Name)

Remove Greg Pritchett, Clinic Administrator, from all accounts.
Laura Tiffin and Samantha Sutton have authority to discuss banking accounts with Prosperity Bank.

BE IT FURTHER RESOLVED: That each check requires two signatures.

FINALLY, BE IT RESOLVED: That these signatures will be valid until such time as the Board would pass a new resolution and that such a resolution with the most current date shall have precedence over any other resolutions.

Signed this 28th day of May, 2020.

Richard Wheeler, Chairman of the Board

Charles Papacek, Board Secretary

AGENDA ITEM #10

Capital Expenditure Request to Replace Two Radiometer ABL80 Flex Blood Gas Analyzers – Review and Take Appropriate Action

HOSPITAL/ENTITY Cuero Regional Hospital		
DEPARTMENT Cardiopulmonary		DATE PREPARED 03/23/2020
Is the requested purchase in compliance with the Healthtrust GPO?		
D E S C R I P T I O N	PROJECT NAME Current Blood Gas Analyzer Replacements	DESIRED DELIVERY/START DATE
	PROJECT DESCRIPTION Replacing two Radiometer ABL80 Flex Blood Gas Analyzers	PURPOSE FOR REQUEST New Service <input type="checkbox"/> Replacement <input checked="" type="checkbox"/> Code Compliance <input type="checkbox"/>
	JUSTIFICATION End of life. Out of service contract. Annual one year service contract \$10,194.00 Continuation of issues and problems with instruments.	
	BUDGET REFERENCE Blood Gas Instruments x 2 (with 5yr service / warranty)	Amount Budgeted
	BUDGET LINE ITEM <i>IF NOT BUDGETED, WHY IS IT NEEDED AT THIS TIME?</i>	\$20,000.00
F I N A N C I A L	EQUIPMENT/PROJECT COSTS	ASSET DISPOSITION DATA
		Attach copies of proposals
		Bid #1 Bid #2 Bid #3
	Name of Bidder	IL Gem 4000 Siemens RapidPoint 500 Radiometer ABL90 Flex Plus
	Land and/or Acquisition	
	Construction	
	Equipment	
	TOTAL COSTS	\$17,700.00 \$23,500.00
	Less Trade In	\$2,000.00
	NET CAPITAL REQUIRED	\$17,700.00 \$23,522.00 \$21,550.00 w/five year service/warranty
RECOMMENDATION (Check one)	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
A U T H O R I Z A T I O N	DEPARTMENT HEAD	
	Brenda A. Martin, RRT <i>Brenda A Martin RRT</i>	
	DATE: 3/23/2020	
	SLT LEADER	
	<i>AM Martin</i>	
DATE: 5/6/20		
CHIEF EXECUTIVE OFFICER or CHIEF FINANCIAL OFFICER		
<i>Alma Alexander 5/10/20</i>		
DATE:		
DATE:		
Board Member Signature if greater than \$5,000		



Capital Purchase Proposal

From: David Guthmiller
Werfen USA LLC
180 Hartwell Rd
Bedford, MA 01730
Cell phone: 214-493-2130
E-mail: dguthmiller@ilww.com

Date: May 08, 2020
Quote: 6000117245
Expiration date: August 20, 2020
Payment Term: Net 30 days

To: CUERO COMMUNITY HOSPITAL

YOAKUM HWY
CUERO, TX 77954
Attn: BRENDA MARTIN
RT

National Account: HPG HEALTHTRUST PURCHASING GROUP

Werfen USA, LLC. (IL) is pleased to present the attached proposal for your consideration.

Customer agrees to exclusively use consumable products supplied by IL to run tests on the instrument(s) included in this proposal. See Product Addendum for all consumables pricing.

The Agreement once accepted by the customer and IL is not subject to cancellation. Invoicing will commence within 60 days following hardware installation or at system acceptance whichever comes sooner.

The prices stated herein may be increased at any time after the first year provided, that written notice is given at least thirty (30) days prior to the effective date of such increase and any increase shall not exceed 3% per year.

Only the terms and conditions set forth herein and those contained herein shall control the transactions between IL and CUERO COMMUNITY HOSPITAL. It is expressly understood and agreed that any terms and conditions put forth by CUERO COMMUNITY HOSPITAL, including, but not limited to the terms and conditions in any purchase order issued to IL, shall be without force and effect.

Any Agreement created as a result of this Proposal may involve a discount, rebate or price reduction in connection with the products sold. IL hereby notifies Customer of its disclosure obligation, and Customer agrees to properly disclose and appropriately reflect the net prices of all products under this Agreement in any costs claimed or charges made to Medicare, Medicaid, and any other federal or state health care programs requiring discount disclosure, and as required by 42 U.S.C § 1320a-7b(b)(3)(A).

To initiate this order, the following documents are required:

- * Copy of this Proposal acknowledging your acceptance of the offer
- * Purchase Order issued to Werfen USA, LLC for instrument(s) referencing Quote N° 6000117245
- * Purchase Order issued to Werfen USA, LLC for initial supplies or for one year of sequestered materials
- * Initialed Instrument and Product Addenda

David Guthmiller

Customer Signature and Date

David Guthmiller
Sales Consultant

Customer Title

Customer Printed Name

This quotation is CONFIDENTIAL and meant for only the intended recipient. It may be privileged by law or contain proprietary information. Do not disclose.

Instrument Addendum

CUERO COMMUNITY HOSPITAL
YOAKUM HWY
CUERO, TX 77954
Quote: 6000117245

Instrument(s) delivery Terms : 60 days after receipt of order
Instrument(s) shipping Terms : FOB destination

	<i>Product</i>	<i>Qty.</i>	<i>Avg. Price</i>	<i>Extended Price</i>
Instruments				
GEM PREMIER 4000 INSTRUMENT	00025000000	1	\$8,500.00	\$8,500.00
GEM PREMIER 4000 INSTRUMENT	00025000000	1	\$8,500.00	\$8,500.00
	Instrument Total	2		\$17,000.00
Accessories				
GEMweb Licence for GEM Premier Analyzer	00025000050	1	\$700.00	\$700.00

Value Add Savings

As part of this offer, a start up kit for each of the GEM instruments listed above will be provided. Each start up kit includes a 450 test full-menu PAK, CVP and PVP.

Warranty / Service

GEM PREMIER 4000 INSTRUMENT Includes 5 -Year Warranty

For instruments contained in this proposal that are repaired at the customer site, all warranty and service items contained herein include labor and travel for on-site calls during standard IL business hours 8:00AM to 5:00PM. For instruments contained in this proposal that are depot-repaired, all warranty and service items contained herein include pre-paid shipment to and from IL's depot location. Replacement parts for parts that become marginal or defective through normal use during the term of the agreement are also provided at no charge, excluding parts and services which are made necessary by (1) Customer neglect, misuse, or improper operation; (2) accident, fire, water, vandalism, electrical power failure or other casualty; (3) delays caused by Customer; (4) the action of any persons other than an IL authorized service representative; (5) Customer's failure to perform routine maintenance; (6) modification of the equipment covered by this Agreement without the prior written approval of IL; (7) unsuitable environmental conditions; or (8) the use of expendables and reagents not recommended by IL. Also excluded are expendable and consumable parts; the moving, decontamination, de-install, or re-install of covered instruments; UPS, line conditioners, or printers; LIS consultation or troubleshooting; and national holidays.

Instrument Order Total

\$17,700.00

Customer Initials and Date

IL HQ Initials and Date

EQUIPMENT SALE (Purchase) AGREEMENT

Legal Name:	<u>DEWITT MEDICAL DISTRICT</u>	Federal ID:	_____
Customer Name:	<u>CUERO COMMUNITY HOSPITAL</u>	Ship to Customer #:	_____
Address:	<u>2550 N ESPLANADE DR</u>	Sold to Customer #:	<u>5613</u>
City, State, Zip:	<u>CUERO, TX 77954</u>	Payment Terms:	<u>Net 30 days from date of invoice</u>
Phone:	_____		
Effective Date:	_____		
Subgroup:	<u>HEALTHTRUST GENERIC CODE</u>		

This Equipment Sale Agreement, by and between Siemens Healthcare Diagnostics Inc. ("Siemens" or "Vendor") and the party identified under "Legal Name" (or "Customer Name" if no "Legal Name") in the heading above ("Customer" or "Purchaser"), is effective as of the date of the last signature of the parties contained herein ("Effective Date"). This Equipment Sale Agreement is entered into in connection with that certain Purchasing Agreement dated - June 1, 2011 by and between HealthTrust Purchasing Group, L.P. ("HealthTrust") and Vendor (HPG-500021, Blood Gas as amended, the "Purchasing Agreement"). The terms and provisions of the Purchasing Agreement are incorporated into this Equipment Sale Agreement by this reference, and this Equipment Sale Agreement is subject to and governed by the terms and provisions of the Purchasing Agreement.

Purchaser agrees to purchase and Siemens agrees to sell the equipment listed below ("Equipment") at the price(s) listed below.

QTY	Part #	Description of Equipment	Price	Extended Price
2	10492730	RAPIDPoint @ 500	\$11,562.00	\$23,124.00
2	10324789	UPS STANDARD 120V	\$199.00	\$398.00

Total:			\$23,522.00
Shipping & Handling:			Included
Total Price:			\$23,522.00

Information about service and training associated with the Equipment purchased hereunder is set forth on the Attachment A to the Supplement to the Master Products Agreement entered into between the parties, if applicable. This Equipment Sale Agreement is subject to the Terms and Conditions attached hereto and made a part hereof and the Purchasing Agreement.

If Customer is returning on-site equipment in conjunction with this Equipment Sale Agreement ("Agreement"), such equipment ("Returned Equipment") shall be identified by instrument type(s) and serial number(s) in the table below. Customer represents that there are no liens or encumbrances on the Returned Equipment. Customer agrees to deliver the Returned Equipment to Siemens within sixty (60) days after the installation of the Equipment purchased hereunder. Upon Siemens' receipt of Returned Equipment, Customer's title and interests in "Returned Equipment", if applicable, shall pass from Customer to Siemens. In the event any item(s) of Returned Equipment is/are omitted from the table below, Customer makes the same representations and agreements regarding such omitted Returned Equipment.

QTY	Description of Returned Equipment	Serial Number



By signing this Agreement, Customer and Siemens hereby acknowledge they are authorized to sign this Agreement.

CUSTOMER – HealthTrust Member Facility:

By: _____
(Authorized Signature Authority for Facility)

Name (print): _____

Title: _____

Date: _____

By: _____
(Facility Department Director)

Name (print): _____

Title: _____

Date: _____

Siemens Healthcare Diagnostics Inc.:

By: _____

Name (print): _____

Title: _____

Date: _____

Address: 115 Norwood Park South, Norwood, MA 02062

Cuero Community Hospital
2550 N Esplanade
Cuero, TX 77954

REP: Eric Sachs
EMAIL ADDRESS: ESachs@radiometeramerica.com
PHONE #: 832-523-7441
QUOTE #: MS-0411-NBAR6REV

ATTN: Brenda Martin
 Respiratory
 361.275.0539
CUSTOMER #: 20299000

DATE	TERMS	AGREE & ACCEPT PAYMENT TERMS	QUOTE EXP DATE	GPO	CONTRACT #
3/17/2020	Net 45		6/30/2020	HealthTrust	HT #4020

CASH PURCHASE						
ITEM	QTY	PART#	DESCRIPTION	Unit Price	Ext. Price	
A	2	ABL90 FLEX PLUS	ABL90 FLEX PLUS Analyzer (Possible parameters include: pH, pCO2, pO2, Hct, Cl-, Ca++, K+, Na+, Glucose, Lactate, ctHb, SO2, FO2Hb, FCOHb, FMetHb, FHb and nBI. Sensor cassette chosen will determine the parameters that will be reported.)	\$12,500.00	\$25,000.00	
B			Trade in Radiometer Analyzers This pricing includes the replacement of 2 ABL80 S/N: 313246, 313247 with all and accessories. The above returns must be sent to Radiometer in Westlake, Ohio within 60 days of the installation of the above analyzers.		(\$2,000.00)	
C		Interface Allowance	\$3,500 (This is only an allowance, allowance is valid for 12 months from the analyzer IVW All installation, training, product support and warranty will be the responsibility of the manufacturer. The above hospital is responsible for ordering the interface from the LIS manufacturer. Upon submission of an invoice from the manufacturer, Radiometer will reimburse the above hospital up to this allowance amount.)			
D	2	WARR-90	Annual Warranty Contract - ABL90 (1 year)	\$12,732.00		Included
E	2	SVC-ABL90	Annual Service Contract - ABL90 (4 Years)	\$12,732.00		Included
F		Includes Training				
G		Includes Starter Kit	Consumables provided to validate instruments. Consumables outside the provided amount will have to be purchased outside this agreement.	\$5,000.00		Included
H		Freight (approx.)	Shipping cost for analyzers (FOB Origin)			\$550.00
I	2	LiveConnect	LiveConnect Promo - \$1,000 off analyzer pricing with LIVE Connect Commitment within 12 months of installation. Customer will be billed if LIVE Connect is not installed within 12 months per analyzer quoted Pricing is contingent on Cuero Hospital making a 5 year commitment to purchase consumables per the attached consumable schedule annually.	(\$1,000.00)	(\$2,000.00)	
Total Capital Quotation					\$21,550.00	

LEASE OPTION

Terms of Lease Agreement

The ABL90 FLEX PLUS Analyzers can be acquired under Radiometer's Lease Program for 60 Months. Radiometer retains ownership of the instrumentation over the course of the agreement. At the end of the agreement period, the systems may be purchased for \$1.

The following is included:

- The use of the ABL90 FLEX PLUS Analyzers with supplies and reagents sufficient to operate the analyzer on a continuous basis, under normal operating conditions, observing all manufacturers recommendations. Supplies will be shipped as per the attached Preferred Customer Agreement. Quantities above this agreement will be shipped at an additional charge.
- Warranty for one year and service coverage for 4 years.
- 3 Boxes of QualiCheck5+ quality control material and 2 linearity kits annually for the Analyzers.
- Thorough installation on premises, in-service and user training.
- The Analyzers are covered by on site service.



The pricing is based upon estimated supplies for the above noted patient and quality control volumes. Hospital policies and procedures, types of samples analyzed and unscheduled instrument maintenance can affect these supplies. Additional quantities required must be purchased outside of this agreement.

All Radiometer products are UI60601 and CSA 22.2-601 certified. This pricing includes in-service and user training.

The pricing contained in this quotation is per the HealthTrust Contract

TOTAL MONTHLY LEASE: \$434.94

The prices quoted are firm through the "Quote Expiration Date" above, and do not include federal, state, or local taxes. Minimum billing \$50.00. Routing of shipments at shipper's discretion.

The information in this document is confidential and proprietary. The receiving party of confidential information shall, keep in confidence all of the confidential information received by it. The receiving party shall take reasonable steps to prevent unauthorized disclosure or use of the confidential information provided and to prevent it from falling into the public domain or into the possession of unauthorized persons.
 Terms & Conditions as per HT Contract #4020 and any promotional discount.

Reviewed & Agreed Upon By:

X _____
 Cuero Community Hospital
 Radiometer America

AGENDA ITEM #11

**Request for Authorization to sign Surgical
Equipment Service Agreement – Review and
Take Appropriate Action**

SURGICAL EQUIPMENT SERVICE AGREEMENT

THIS SURGICAL EQUIPMENT SERVICE AGREEMENT is made and entered into this _____, 2020 by and between SURGICAL DIRECT SOUTH, LLC a Missouri corporation ("Surgical"), and DeWitt Medical District d/b/a CUERO REGIONAL HOSPITAL a political subdivision of the state of Texas ("User").

WHEREAS, Surgical is in the business of providing and renting medical equipment and supplies to hospitals and surgery centers, and specializes in the delivery of phacoemulsifier systems and microscopes; and

WHEREAS, User desires to rent from Surgical that Phacoemulsifier and Microscope (the "Equipment"), and disposables, as described in the attached Exhibit "A", and Surgical desires to rent the same to User, all in accordance with the terms and conditions hereinafter set forth.

NOW, THEREFORE, for and in consideration of the mutual covenants and agreements contained herein, and other good and valuable consideration, the receipt and legal sufficiency of which is hereby acknowledged, the parties hereto agree as follows:

1. Rental of Equipment. (a) Subject to the terms and conditions hereinafter set forth, Surgical agrees to rent the Equipment to User for use at the Facility (as that term is hereinafter defined), and User agrees to rent the Equipment from Surgical for use at the Facility, for the rental term set forth in paragraph 2 below. Surgical shall deliver the Equipment to the Facility in accordance with the schedule of visits to the Facility by Surgical to be agreed upon by the parties. It is understood and agreed by the parties that only qualified surgeons designated by User shall operate the Equipment, and that neither Surgical nor its agents or representatives will operate the Equipment, or provide any medical services in connection therewith. Surgical retains ownership of the Equipment.

(b) The term "Facility," as used herein, shall mean that hospital located at 2550 N ESPLANADE ST, CUERO TX 77954. The Facility must meet all applicable JCAHO regulations and provide an ample power source for the Equipment.

2. Term. (a) The term of this Agreement shall be three (3) years, and shall commence on the date first above written. Unless terminated by either party in accordance with the terms of subparagraph (b) below, the initial three (3) year term shall automatically renew for successive one (1) year periods unless and until one party notifies the other of its election to cancel at least thirty (30) days prior to expiration of the then-current one-year period.

(b) Termination with Cause. In the event of breach of this Agreement by either party, the other party may terminate this Agreement for cause upon ten (10) days written notice mailed or personally delivered to the other party, and the notified party's failure to cure or correct the cause of the termination notice, to the reasonable satisfaction of the party giving such notice, within thirty (30) days of the receipt of said notice.

(c) Either party may terminate this Agreement without cause upon thirty (30) days prior written notice.

(d) However, in the event User terminates the Agreement for no cause, User agrees to pay Surgical an “equivalent amount” for the remainder of the then-current term of the Agreement, not to exceed twelve (12) months. The “equivalent amount” will be calculated for User based on the average monthly cases over the past months of operations multiplied by \$375 (Lowest price tier less the lens implant).

(e) In no event shall the cancellation of this Agreement by either party relieve User of any remaining payment obligation hereunder.

3. Fee Schedule. (a) Surgical will provide the Equipment to User on a per case basis as shown in Exhibit “A”; provided that at least four (4) cases shall be scheduled and performed for any visit scheduled by User. In any event, the minimum fee to be paid to Surgical for any visit shall be that sum equal to the total number of cases performed.

(b) In addition to the above-referenced fee, User shall also be responsible for payment for any of the following which may be supplied by Surgical: (i) additional disposables required due to contamination by User, or its personnel, (ii) items not normally required for surgery (e.g., vitrectors, additional blades and sutures, etc.), and (iii) items requested by the performing physician. Any such items supplied by Surgical will be billed at Surgical's standard rate at the time of surgery.

(c) All undisputed fees shall be billed by Surgical, with payment in full due within thirty (30) days following User’s receipt of an invoice date. An additional charge of 1.5% per month shall be assessed for all past-due amounts.

4. Scheduling of Visits. The parties shall schedule visits to the Facility by Surgical at dates and times mutually convenient for the parties. Surgeries by User, or its physician, shall be scheduled consecutively for each visit.

5. Infectious Illnesses. User agrees to either:

Observe Universal Precautions with each surgery procedure, and to provide necessary protective clothing to Surgical representatives relative to each procedure.

OR

Notify Surgical prior to scheduled surgery of any and all potentially infectious illnesses related to patients to whom Surgical representatives may be exposed in order to properly inform Surgical and its representatives of all potential risks. User agrees to provide all necessary clothing to Surgical representatives.

6. Representations, Warranty and Covenants of Surgical.

a) Surgical warrants that it will provide trained technicians for the Equipment being provided herein, and that Surgical Direct has not and will not alter the Equipment in any manner from the specifications of the manufacturer. **SURGICAL MAKES NO OTHER REPRESENTATIONS OR WARRANTIES, EXPRESS OR IMPLIED, AS TO ANY MATTER WHATSOEVER, INCLUDING (WITHOUT LIMITING THE GENERALITY OF THE FOREGOING EXCLUSION) MERCHANTABILITY, AND FITNESS FOR ANY PARTICULAR PURPOSE OF THE EQUIPMENT. WHILE SURGICAL MAKES NO FURTHER REPRESENTATION OR WARRANTY WITH RESPECT TO THE EQUIPMENT, ANY AND ALL WARRANTIES THAT SURGICAL HAS FROM THE MANUFACTURER OF THE EQUIPMENT, SURGICAL ASSIGNS TO USER, TO THE EXTENT THAT IT IS ASSIGNABLE, FOR THE PERIOD THE EQUIPMENT IS USED BY THE USER UNDER THIS AGREEMENT.**

(b) Surgical hereby covenants that it will maintain general liability insurance, and fire and theft insurance coverage, with respect to the Equipment during the term of this Agreement, and that upon request for same, it will furnish to User certificates evidencing such coverage.

7. Representations, Warranties and Covenants of User. User hereby represents, warrants and covenants to Surgical as follows:

(a) User hereby represents and warrants that all physicians and surgeons operating the Equipment possess adequate knowledge and skills to operate the same safely and effectively. Further, User hereby covenants that the Equipment shall be used for F.D.A.-approved procedures only, and only for the uses for which it was designed and intended, and that any other use of the Equipment will not be permitted.

(b) User hereby covenants that it will maintain general liability insurance and professional liability insurance (including, without limitation, insurance covering the activities of User, its agents, employees, physicians and surgeons) during the term of this Agreement, and that upon request for same, it will furnish to Surgical certificates evidencing such coverage. Further, User hereby covenants that all physicians, surgeons and other medical personnel utilizing the Equipment shall maintain professional liability insurance in accordance with User's medical staff by-laws, and that upon request for same, it will furnish to Surgical certificates evidencing such coverage.

8. Record Keeping. In accordance with 42 U.S.C. Section 1395 and 42 C.F.R. Section 402, Surgical shall retain this Agreement, and for four (4) years after equipment is furnished hereunder shall allow the Comptroller General of the United States and the U.S. Department of Health and Human Services, and their duly-authorized representatives, access to this Agreement, and such of Surgical's records as may be necessary to verify costs hereunder; provided that such access is required under the above-referenced statute and regulations, and, provided further, that such requests for access comply with all applicable procedural requirements. Upon receipt of a request for access, Surgical agrees that it will immediately notify User of same, and consult with User as to its response thereto.

9. Indemnification. User hereby agrees to indemnify and hold harmless Surgical, its successors and assigns, from and against any and all actions, suits, proceedings, damages, liabilities, claims, losses, costs and expenses, including reasonable attorney's fees and other professional fees, paid or incurred by Surgical, its successors and assigns, by reason of or arising out of or in connection with the operation and use of the Equipment and disposables, or by reason of any failure in the operation of the Equipment and disposables, except to the extent caused by the negligence or willful misconduct of Surgical. In the event of any malfunction or failure attributable to the Equipment, User's sole remedy shall be against the manufacturer thereof, and shall in no way affect User's payment obligation to Surgical.

10. Mutual Confidentiality of Contract/Surgical Information. User, and Surgical, agree that all information relating to its business relationship with User and Surgical is confidential and may not be disclosed by User or Surgical to any third party. This confidential information includes, but is not limited to: the terms of this Agreement, all pricing quotes, pricing information and bills of Surgical. User acknowledges that Surgical has taken precautions to protect such information and prevent its dissemination to third parties. Disclosure of any Confidential information of Surgical or User to third parties, such as competitors of Surgical or User, is strictly prohibited and violates the terms of this Agreement, and enforcement of this provision may be pursued by Surgical or User in law and/or equity. The confidentiality provisions of this Agreement and enforcement of same shall survive termination of this Agreement.

11. Exclusivity. User agrees that, during the term of this Agreement, all surgeries by User which could be performed utilizing Surgical will be performed using only Surgical, and shall not be performed using similar equipment or services by another person or entity.

12. Attorney Fees. If legal and/or equitable proceedings are filed by any party to enforce any provision of this Agreement, then the prevailing party in said action shall be entitled to recover all of its costs and expenses, including its reasonable attorneys' fees from the non-prevailing party.

13. Notices. All writings, notices and other communications under this Agreement shall be in writing and addressed as follows:

If to Surgical, to: Surgical Direct South, LLC
 3461 Howell St.
 Dallas, TX 75204
 Attn: Tyler Conrad

If to User, to: CUERO REGIONAL HOSPITAL
 2550 N Esplanade St, Cuero, TX 77954
 Attn: Jill Turner

Any such writing, notice or communication shall be deemed given when deposited in the United States mails, postage prepaid, first-class, registered or certified mail, return receipt requested, and addressed as hereinabove provided. Any such address may be changed by notice to the other party to this Agreement as provided in this paragraph 13.

14. Non-Waiver. No delay or failure by either party to exercise any right under this Agreement, and no partial or single exercise of that right, shall constitute a waiver of that or any other right, unless otherwise expressly provided herein.

15. Severability. In the event any one or more of the provisions contained in this Agreement shall be declared invalid, illegal or unenforceable by any Court of competent jurisdiction, the validity, legality or enforceability of the remaining provisions of this Agreement shall not be impaired thereby, and this Agreement shall be construed as if such invalid, illegal or unenforceable provision were not contained herein, unless otherwise expressly stated herein.

16. Counterparts. This Agreement may be executed in two or more counterparts, each of which shall be deemed an original, but all of which together shall constitute one and the same agreement.

17. Binding Effect. This Agreement shall be binding upon and inure to the benefit of the parties hereto, and to their respective legal representatives, successors and permitted assigns.

18. Governing Law/Exclusive Venue. This Agreement has been executed in the State of Texas, and shall be governed, construed and interpreted in accordance with the internal laws of the State of Texas, without reference to conflicts of law principles and the parties agree that the sole and exclusive venue for any claims, causes of actions or lawsuits arising out of this agreement is either the United States District Court of Texas, or the Circuit Court of Cuero County, Texas.

19. Entire Agreement. This Agreement contains the full, complete and exhaustive agreement between the parties with respect to the subject matter hereof, and supersedes all prior oral understandings and discussions between the parties. This Agreement may be amended only by an instrument in writing executed and delivered by Surgical and User.

IN WITNESS WHEREOF, the undersigned with full authority of its board of directors and/or members, executes this Agreement on behalf of his or her respective entity, on the day and year first above written.

SURGICAL:

USER:

SURGICAL DIRECT SOUTH LLC

CUERO REGIONAL HOSPITAL

By: _____
Tyler Conrad
Managing Partner

By: _____
Lynn Falcone
CEO

Exhibit "A"

Surgical Direct agrees to supply one each of the following equipment and disposables per procedure. These items will be used in conjunction with performance of cataract extraction, and can be modified per the attached service agreement.

Surgical Direct Surgical Coordinator
Alcon Centurion Phaco Machine (up to 2 OR's)
Alcon LX3 Microscope (up to 2 OR's)
(5) Microscope handle Sets
(5) Centurion Handpiece Sets
IA polymer tip
I/A Sleeve
Centurion Tubing Pack
Phaco Tip 45 degree
Custom Eye pack (equivalent to Alcon bundled pack)
Salmon Phaco Sleeve
Eye-Drape
30g Hydrodissection Cannula
Provisc
Viscoat
BSS 500ml
BSS 15ml
5% Betadine
IOL D Cartridge
SN60WF IOL

Per case bundled cost:	1-6 cases	\$590 per case
	7+ cases	\$515 per case

Equipment ONLY (Phaco and Microscope)	1-6 cases:	\$250
	7+ cases:	\$200

YAG Laser (optional)	\$150 per eye
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AGENDA ITEM #12

COVID19 Pay – Discussion Only