



**Prosser**  
Memorial Health

**Prosser Memorial Health  
Board of Commissioners**

**Board Packet**

**December 15, 2022**

## Vision

Patients  
Employees  
Medical Staff  
Quality  
Services  
Financial



# Prosser

Memorial Health

**Mission:** To improve the health of our community.

## Values

Accountability  
Service  
Promote Teamwork  
Integrity  
Respect  
Excellence

**BOARD OF COMMISSIONERS – WORK SESSION**  
**TUESDAY, December 13, 2022**  
**6:00 PM - WHITEHEAD CONFERENCE ROOM**  
**AGENDA**

**COMMISSIONERS:**

Stephen Kenny, Ph.D.  
Sharon Dietrich, M.D.  
Glenn Bestebreur  
Susan Reams  
Keith Sattler  
Brandon Bowden  
Neilan McPartland

**STAFF:**

Craig Marks, CEO  
Merry Fuller, CNO/COO  
David Rollins, CFO  
Shannon Hitchcock, CCO  
Kristi Mellema, CQO  
Bryon Dirkes, CHRO  
Dr. Brian Sollers, CMO  
Annie Parker, CCOO

**GUESTS:** Adam Trumbour, Senior Project Manager, NV5  
Paul Kramer, Project Director, NV5  
Brandon Potts, Bouten Construction  
Nick Gonzalez, Bouten Construction  
Kurt Broeckelmann, bcDG

**I. CALL TO ORDER**

**II. PUBLIC COMMENT**

**III. SERVICES**

**A. Replacement Facility Update**

**1. Design Updates**

- a. DOH/USDA/City of Prosser Reviews
- 1. Development Agreement
- b. SVID
- c. Washington DOT
- d. Furniture Fair

**bcDG/NV5/Bouten**  
**NV5**  
**NV5/Bouten**  
**bcDG**  
**NV5**

**2. Construction/Schedule/Budget**

- a. Construction Update-OAC Meeting, Groundbreaking
- b. Schedule (**Attachment G**) (**Attachment H**)
- c. Project Budget

**Bouten/NV5**  
**NV5/Bouten/bcDG**  
**NV5**

- 3. Financing**
  - a. USDA
  - b. Construction Loan (**Attachment Y**)

**David**

**IV. FINANCIAL STEWARDSHIP**

- A. 2023 Capital and Operating Budgets (**Attachment W**)**

**David/All**

**V. EXECUTIVE SESSION**

- A. RCW 42.30.110 (I)** To consider proprietary or confidential nonpublished information related to the development, acquisition or implementation of state purchased health care services as provided in RCW 41.05.26

**VI. RESUME REGULAR SESSION**

**VII. ADJOURN**

## Vision

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Financial



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**BOARD OF COMMISSIONERS**  
**THURSDAY, December 15, 2022**  
**6:00 PM, WHITEHEAD CONFERENCE ROOM**  
**AGENDA**

**COMMISSIONERS:**

Stephen Kenny, Ph.D.  
Sharon Dietrich, M.D.  
Glenn Bestebreur  
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**STAFF:**

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Shannon Hitchcock, CCO  
Kristi Mellema, CQO  
Bryon Dirkes, CHRO  
Dr. Brian Sollers, CMO  
Annie Parker, CCOO

**I. CALL TO ORDER**

- A. Pledge of Allegiance

**II. PUBLIC COMMENT**

**III. APPROVE AGENDA**

**Action Requested – Agenda**

**IV. CONSENT AGENDA**

- A. Board of Commissioners Meeting Minutes for November 17, 2022.  
B. **Payroll and AP Vouchers** #168941 through #169602 dated 11-05-22 through 12-07-22 in the amount of \$6,931,598.59. Board Policies: Medical Staff Recruitment; Exclusive Designated Medical Specialty Services; Affiliation; and Issue Resolution Procedure-Exempt Staff.

**Action Requested – Consent Agenda**

**V. MEDICAL STAFF DEVELOPMENT**

- A. Medical Staff Report and Credentialing

**Dr. Martin**

**1. Advancement from Provisional**

None.

**Action Requested - Advancement from Provisional**

**2. New Appointment**

None.

**Action Requested – New Appointment and Requested Clinic Privileges**

### 3. Reappointment

**Ryan Steed, CRNA** - Reappointment to Advanced Practice Clinician staff with requested privileges in Anesthesia January 1, 2023, through December 31, 2025.

**Maria Recio Restrepo, MD** – Reappointment to Telemedicine staff with requested privileges in Neurology effective January 1, 2023, through December 31, 2025.

**Action Requested – Reappointment and Requested Clinical Privileges**

B. 2023 Medical Staff Model & Provider Recruitment/Succession Plan (**Attachment P**)      **Dr. Sollers/Craig/Annie P**  
**Action Requested- 2023 Medical Staff Model**

## VI. FINANCIAL STEWARDSHIP

- A. Review Financial Reports for November 2022 (**Attachment V**)      **David**  
**Action Requested** – Financial Reports
- B. Review 2023 Operating and Capital Budgets (**Attachment W**)      **David**  
**Action Requested** – 2023 Operating and Capital Budget

## VII. SERVICES

- A. Review PMH Mission, Vision, Values and Standards of Behavior (**Attachment K**)      **Craig**  
**Action Requested** - PMH Mission, Vision, Values and Standards of Behavior
- B. Review 2023 PMH Strategic Plan (**Attachment J**)      **Craig**  
**Action Requested** – 2023 PMH Strategic Plan
- C. Review 2023 PMH Marketing Plan (**Attachment L**)      **Shannon**  
**Action Requested** – 2023 PMH Marketing Plan
- D. Review 2023 IT Plan (**Attachment M**)      **Craig**  
**Action Requested** – 2023 PMH IT Plan

## VIII. QUALITY

- A. Review 2022 Environment of Care (EOC) Report and 2023 EOC Plan (**Attachment X**)      **Kristi**  
**Action Requested** – 2023 PMH Environment of Care Plan
- B. Legislative and Political Updates      **Commissioner Bestebreur**
- C. CEO/Operations Report      **Craig**

## IX. ADJOURN

**PMH**  
**Board of Commissioners**  
**Work Plan – FY2022**

**Vision**

Patients  
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 Medical Staff  
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Month	Goals & Objectives	Education
January	<p>QUALITY:</p> <ul style="list-style-type: none"> <li>Review/Approve 2022 Strategic Plan and 2022 Patient Care Scorecards</li> <li>Sign Financial Disclosure and Conflict of Interest Statements</li> <li>Approve 2022 Risk Management and Quality Assurance Plans</li> <li>Select and Approve Board Officers</li> <li>Review Board Committee structure and membership</li> </ul> <p>SERVICES:</p> <ul style="list-style-type: none"> <li>Approve acquisition of surgical equipment</li> <li>Approve radiologist contracts</li> <li>Approve Construction Loan</li> </ul>	<p>EMPLOYEE DEVELOPMENT:</p> <ul style="list-style-type: none"> <li>Review 2021 Employee Engagement Survey Results</li> <li>Review 2021 Medical Staff Engagement Survey Results</li> </ul> <p>QUALITY:</p> <ul style="list-style-type: none"> <li>Review Board Self-Evaluation</li> </ul> <p>FINANCIAL STEWARDSHIP:</p> <ul style="list-style-type: none"> <li>Review semi-annual financial performance report for PMH Clinics</li> </ul> <p>SERVICES:</p> <p>Replacement Facility Update</p> <ul style="list-style-type: none"> <li>Construction Loan Schedule Update</li> </ul>

Month	Goals & Objectives	Education
February	<p>SERVICES:</p> <ul style="list-style-type: none"> <li>• Approve construction mini-MACC</li> <li>• Approve construction documents</li> </ul> <p>QUALITY:</p> <ul style="list-style-type: none"> <li>• Approve 2022 Board Action Plan</li> </ul> <p>EMPLOYEE DEVELOPMENT:</p> <ul style="list-style-type: none"> <li>• Review and Approve 2022 Leadership Incentive Compensation Program</li> </ul>	<p>EMPLOYEE DEVELOPMENT:</p> <ul style="list-style-type: none"> <li>• Attend AHA Governance Conference</li> </ul> <p>PATIENT LOYALTY:</p> <ul style="list-style-type: none"> <li>• Patient Loyalty Summary report</li> <li>• Review Patient Engagement Plan</li> </ul> <p>SERVICES:</p> <p>Replacement Facility Update:</p> <ul style="list-style-type: none"> <li>• Construction Documents</li> <li>• Mini-MACC</li> <li>• Schedule</li> </ul>
March	<p>QUALITY:</p> <ul style="list-style-type: none"> <li>• Review/Approve Board Polices</li> <li>• Approve 2022 Corporate Compliance Plan</li> <li>• Approve 2022 Infection Prevention Control Plan</li> </ul> <p>EMPLOYEE DEVELOPMENT</p> <ul style="list-style-type: none"> <li>• Review and Approve 2022 Leadership Incentive Compensation Program</li> </ul> <p>MEDICAL STAFF DEVELOPMENT:</p> <ul style="list-style-type: none"> <li>• Support Providers' Day Celebration</li> </ul> <p>FINANCIAL STEWARDSHIP:</p> <ul style="list-style-type: none"> <li>• Accept 2021 Audit Report</li> </ul> <p>SERVICES:</p> <ul style="list-style-type: none"> <li>• Approve the MACC / GMP for the new facility</li> </ul>	<p>PATIENT LOYALTY:</p> <ul style="list-style-type: none"> <li>• Review 2021 Utilization Review Performance</li> </ul> <p>QUALITY:</p> <ul style="list-style-type: none"> <li>• Review 2021 Corporate Compliance Report</li> <li>• Review 2021 Infection Prevention Summary</li> </ul> <p>EMPLOYEE DEVELOPMENT:</p> <ul style="list-style-type: none"> <li>• Review Employee Performance Report</li> <li>• Review the Communications Calendar</li> </ul> <p>FINANCIAL STEWARDSHIP:</p> <ul style="list-style-type: none"> <li>• Presentation of the 2021 Audit Report by Auditors</li> <li>• Capital Campaign Update</li> </ul>

Month	Goals & Objectives	Education
	<p>PATIENT LOYALTY</p> <ul style="list-style-type: none"> <li>• Approve the 2022 Utilization Review Plan</li> </ul>	<p>SERVICES: Replacement Facility Update</p> <ul style="list-style-type: none"> <li>• MCAA / GMP</li> <li>• USDA Update</li> <li>• Budget</li> </ul>
April	<p>QUALITY:</p> <ul style="list-style-type: none"> <li>• Approve 2022 Community Benefits Report</li> </ul> <p>EMPLOYEE DEVELOPMENT</p> <ul style="list-style-type: none"> <li>• Conduct CEO Evaluation</li> </ul> <p>SERVICES:</p> <ul style="list-style-type: none"> <li>• Approve the MACC / GMP for the new facility</li> </ul>	<p>SERVICES: Replacement Facility Update</p> <ul style="list-style-type: none"> <li>• MCAA / GMP</li> <li>• USDA Update</li> <li>• Budget</li> </ul> <p>QUALITY:</p> <ul style="list-style-type: none"> <li>• Strategic &amp; Patient Care Score Cards</li> <li>• Review 2021 Community Benefits Report</li> </ul> <p>EMPLOYEE DEVELOPMENT:</p> <ul style="list-style-type: none"> <li>• Review 2021 Leadership Performance (LEM)</li> <li>• Review Employee Engagement Plan</li> <li>• Review the Communications Calendar</li> </ul> <p>MEDICAL STAFF DEVELOPMENT:</p> <ul style="list-style-type: none"> <li>• Review 2021 FPPE/OPPE Summary</li> </ul> <p>PATIENT LOYALTY:</p> <ul style="list-style-type: none"> <li>• Review Interpreter Services Plan</li> <li>• Call Center Update</li> </ul>



Month	Goals & Objectives	Education
May	<p>EMPLOYEE DEVELOPMENT:</p> <ul style="list-style-type: none"> <li>• Support Hospital Week</li> </ul>	<p>SERVICES:</p> <ul style="list-style-type: none"> <li>• Replacement Facility Update</li> </ul> <p>MEDICAL STAFF</p> <ul style="list-style-type: none"> <li>• Medical Staff Engagement Plan</li> </ul> <p>EMPLOYEE DEVELOPMENT:</p> <ul style="list-style-type: none"> <li>• Employee Retirement Update</li> </ul> <p>PATIENT LOYALTY:</p> <ul style="list-style-type: none"> <li>• Review Customer Service Program</li> </ul>
June	<p>QUALITY:</p> <ul style="list-style-type: none"> <li>• Review/Approve Board Polices</li> <li>• Approve 2021 CAH Annual Report</li> </ul> <p>FINANCIAL STEWARDSHIP:</p> <ul style="list-style-type: none"> <li>• Approve 2022 Cost Report</li> </ul>	<p>QUALITY:</p> <ul style="list-style-type: none"> <li>• Report 2022 Q1 Utilization Review</li> </ul> <p>EMPLOYEE DEVELOPMENT:</p> <ul style="list-style-type: none"> <li>• Review Leader Assessment and Development Program</li> </ul> <p>SERVICES:</p> <ul style="list-style-type: none"> <li>• Marketing Update</li> <li>• PMH Telehealth Update</li> </ul> <p>FINANCIAL STEWARDSHIP:</p> <ul style="list-style-type: none"> <li>• Accounting Software Update</li> </ul>
July	<p>MEDICAL STAFF DEVELOPMENT:</p> <ul style="list-style-type: none"> <li>• Attend BOC, Medical Staff and Leadership Engagement Activity</li> </ul> <p>FINANCIAL STEWARDSHIP:</p> <ul style="list-style-type: none"> <li>• Approve Single Audit</li> </ul>	<p>SERVICES:</p> <ul style="list-style-type: none"> <li>• Replacement Facility Update</li> </ul> <p>MEDICAL STAFF</p> <ul style="list-style-type: none"> <li>• Review PMH Clinic productivity</li> </ul> <p>QUALITY:</p>

Month	Goals & Objectives	Education
		<ul style="list-style-type: none"> <li>• Quality Committee Report</li> <li>• Strategic &amp; Patient Care Score Cards</li> <li>• Board Judiciary Responsibilities</li> </ul> <p>EMPLOYEE DEVELOPMENT:</p> <ul style="list-style-type: none"> <li>• Human Resources Update</li> <li>• Review Leadership and Exempt Wage Scales</li> </ul> <p>FINANCIAL STEWARDSHIP:</p> <ul style="list-style-type: none"> <li>• Review Semi-Annual Financial Performance Report for PMH Clinics</li> <li>• Foundation Update</li> </ul>
August	<p>EMPLOYEE DEVELOPMENT:</p> <ul style="list-style-type: none"> <li>• Attend end of summer Engagement Activity for BOC, Medical Staff, and all staff</li> </ul>	<p>SERVICES:</p> <ul style="list-style-type: none"> <li>• Replacement Facility Update</li> </ul>
September	<p>QUALITY:</p> <ul style="list-style-type: none"> <li>• Review/Approve Board Polices</li> </ul>	<p>EMPLOYEE DEVELOPMENT:</p> <ul style="list-style-type: none"> <li>• Review Employee Benefit Changes</li> <li>• Review Leadership Development Activities</li> </ul> <p>SERVICES:</p> <ul style="list-style-type: none"> <li>• Replacement Facility update</li> </ul> <p>PATIENT LOYALTY:</p> <ul style="list-style-type: none"> <li>• Nurse Educator Update</li> </ul>
October		<p>QUALITY:</p>

Month	Goals & Objectives	Education
		<ul style="list-style-type: none"> <li>• Conduct 2023 Strategic Planning</li> <li>• Strategic &amp; Patient Care Score Cards</li> </ul> <p>EMPLOYMENT DEVELOPMENT:</p> <ul style="list-style-type: none"> <li>• Review Leadership Accountability Resource Tools</li> </ul> <p>PATIENT LOYALTY:</p> <ul style="list-style-type: none"> <li>• Patient Loyalty Summary</li> </ul>
November	<p>FINANCIAL STEWARDSHIP:</p> <ul style="list-style-type: none"> <li>• Approve Property Tax Request for County Commissioners</li> </ul>	<p>QUALITY:</p> <ul style="list-style-type: none"> <li>• iVantage Update</li> </ul> <p>SERVICES:</p> <ul style="list-style-type: none"> <li>• Review draft 2023 Strategic Plan; 2023 Marketing and IT Plans; and Medical Staff Model/2023 Provider Recruitment Plan</li> <li>• Replacement Facility Update</li> </ul> <p>EMPLOYEE DEVELOPMENT:</p> <ul style="list-style-type: none"> <li>• Review Non-exempt (union) performance evaluation template</li> </ul> <p>FINANCIAL STEWARDSHIP:</p> <ul style="list-style-type: none"> <li>• Review draft 2023 Budget</li> </ul>
December	<p>QUALITY:</p> <ul style="list-style-type: none"> <li>• Complete Board Self-Evaluations</li> <li>• Review/Approve Board Policies</li> <li>• Approve the 2023 Environment of Care Plan</li> </ul>	<p>QUALITY:</p> <ul style="list-style-type: none"> <li>• Review the 2022 Environment of Care Plan</li> </ul>

Month	Goals & Objectives	Education
	<p>SERVICES:</p> <ul style="list-style-type: none"> <li>• Approve 2023 Strategic Plan; 2023 Marketing and IT Plans; and Medical Staff Model/2023 Provider Recruitment Plan</li> </ul> <p>FINANCIAL STEWARDSHIP:</p> <ul style="list-style-type: none"> <li>• Approve 2023 Operating and Capital Budgets</li> <li>• Banking relationship Selection</li> </ul> <p>EMPLOYEE DEVELOPMENT:</p> <ul style="list-style-type: none"> <li>• Attend holiday celebration</li> </ul>	



## 2022 - Patient Care Scorecard

Major Goal Areas & Indicators	2022 Goal	Jan	Feb	March	April	May	June	July	Aug	Sept	Oct	Nov	Dec	2022 YTD	2021	2020
<b>Quality</b>																
Left Without Being Seen	<0.80%	2.02%	1.47%	0.88%	2.25%	2.97%	3.88%	2.89%	5.09%	4.40%	3.02%	3.60%		3.07%	1.47%	0.80%
Median Admit Decision Time to ED Departure Time for Admitted Patients	<44 min	53	56	51	51	45	51	53	63	53	52	58		53	60	70
Median Time from ED Arrival to Departure for Discharged ED Patients	<107 min	109	115	114	114	110	134	128	128	143	131	136		124	117	128
Severe Preeclamptic Mothers: Timely Treatment Rate	>90.00%	42.86%	57.14%	86.21%	60.00%	84.62%	90.91%	88.89%	100.00%	66.67%	68.75%	66.67%		70.00%	N/A	N/A
All-Cause Unplanned 30 Day Inpatient Readmissions	<2.70%	10.61%	2.74%	4.92%	3.77%	5.45%	9.09%	5.63%	6.45%	8.06%	3.85%	5.45%		5.96%	5.80%	3.80%
Sepsis - Early Management Bundle	>94.40%	100.00%	0.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	N/A		96.55%	94.40%	72.73%
Healthcare Associated Infection Rate per 100 Inpatient Days	<0.07%	0.00%	0.00%	0.57%	0.00%	0.00%	0.45%	0.00%	0.00%	0.00%	0.00%	0.00%		0.09%	0%	0.29%
Diabetes Management - Outpatient A1C>9 or missing result	<21.89%	22.40%	24.19%	24.53%	21.32%	22.32%	23.35%	26.83%	22.76%	20.98%	17.80%	17.13%		22.07%	21.89%	27.61%
Medication Reconciliation Completed	>90.00%	96.30%	94.74%	90.74%	92.00%	88.00%	85.00%	76.67%	81.67%	96.49%	95.00%	95.00%		90.00%	46%	47.15%
Turnaround time of 30 minutes or less for STAT testing	<30 min	22.0	21.0	21.0	21.0	19.0	19.0	18.0	19.0	19.0	18.0	20.0		19.7	38	37.5
Median Time to ECG for Patients Presenting to the ED with Chest Pain	< 6.3 min	5.0	3.0	5.0	5.0	4.0	4.0	5.0	3.0	4.0	4.0	4.0		4.2	6.3	7
Surgical Site Infection	<0.19%	0.00%	0.59%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%		0.03%	0.19%	0.25%
Bar Code Scanning: Medication Compliance	>93.50%	94.91%	95.77%	95.43%	95.00%	94.54%	93.76%	91.55%	93.34%	92.50%	92.15%	90.03%		93.54%	93.50%	98.90%
Bar Code Scanning: Patient Compliance	>94.70%	96.42%	95.81%	96.17%	96.16%	95.95%	94.83%	92.35%	93.55%	92.87%	92.90%	89.10%		94.19%	94.70%	N/A
*Overall Quality Performance Benchmark (iVantage)	>61	61	61	36	36	36	36	36	36	36	36	36		36	61	53
*Falls with Injury	<2	-	-	-	-	-	1	-	-	-	1	-		1	3	2

Green at or above Goal (4)  
 Yellow within 10% of Goal (2)  
 Red More than 10% below Goal (0)



## 2022 - Strategic Plan Scorecard

Major Goal Areas & Indicators	2022 Goal	Jan	Feb	March	April	May	June	July	Aug	Sept	Oct	Nov	Dec	2022 YTD	2021 Avg	2020 Avg
<b>Patient Loyalty</b>																
IP - "Would Recommend"	>93.1%	94.8%	92.4%	91.7%	92.9%	90.5%	96.4%	79.2%	90.8%	90.3%	95.3%	95.7%		92.0%	93.1%	87.9%
ED - "Would Recommend"	>84.0%	83.9%	81.7%	76.4%	88.0%	88.8%	90.7%	67.7%	85.2%	91.3%	88.6%	89.4%		86.0%	84.0%	81.4%
Acute Care - "Would Recommend"	>91.8%	90.9%	94.4%	87.5%	94.4%	87.5%	91.7%	79.2%	85.0%	97.2%	95.0%	94.6%		90.6%	91.8%	84.1%
OB - "Would Recommend"	>93.6%	99.0%	100.0%	97.7%	100.0%	88.9%	100.0%	75.0%	100.0%	100.0%	100.0%	100.0%		96.4%	93.6%	92.3%
Outpatient Surgery - "Would Recommend"	>96.6%	100.0%	100.0%	97.2%	97.7%	94.4%	95.3%	98.5%	91.4%	95.2%	97.2%	100.0%		96.2%	96.6%	89.8%
Clinic - "Would Recommend"	>91.0%	92.8%	97.5%	91.7%	97.6%	91.8%	94.3%	86.8%	90.6%	92.5%	92.6%	93.5%		93.0%	91.0%	87.3%
Outpatient - "Would Recommend"	>94.1%	98.1%	96.1%	93.5%	96.0%	96.0%	94.8%	94.5%	90.6%	92.1%	96.2%	95.4%		94.8%	94.1%	88.1%
Composite Score	>92.9%	95.7%	95.2%	94.4%	94.1%	93.8%	93.7%	93.2%	94.0%	92.7%	93.2%	93.3%		93.3%	92.9%	N/A
<b>Medical Staff Development</b>																
Medical Staff Turnover	<10%	0%	0%	0%	0%	0%	4%	0%	1%	0%	0%	0%		5%	12%	0.2%
Prosser Specialty Clinic Visits	1,352	1,386	1,429	1,617	1,428	1,366	1,422	1,272	1,681	1,365	1,504	1,548		1,456	1,318	954
Benton City Clinic Visits	868	775	650	822	657	870	730	718	899	881	909	889		800	732	837
Prosser RHC Clinic Visits	1,291	1,063	1,111	1,206	1,106	1,211	1,122	1,152	1,398	1,138	1,213	1,136		1,169	1,227	1,226
Grandview Clinic Visits	969	1,055	833	1,021	873	986	960	904	1,065	1,107	1,001	898		973	778	589
Women's Health Center	679	508	600	660	533	611	708	554	648	569	584	589		597	602	601
*# of Active Medical Staff	>51	52	53	53	54	55	54	55	54	54	55	55		54	51	45
<b>Employee Development</b>																
403(B) Participation Rate	>98%	98%	98%	98%	98%	98%	98%	98%	99%	99%	99%	99%		98%	98%	46%
Average Recruitment Time (days)	<21	19	26	40	11	15	19	22	17.5	19	15	17		20	21	32
# of Open Positions (Vacancies)	<23	32	28	35	31	32	39	39	29	24	21	37		32	32	29
Hours of Overtime - Overtime/Total Hours Worked	<4.5%	6.8%	5.3%	4.9%	6.0%	6.3%	6.1%	8.2%	7.1%	7.1%	6.4%	5.7%		6.4%	6.1%	5.9%
Agency - Cost/Total Labor	<7.7%	6.2%	10.6%	6.9%	6.9%	5.7%	7.9%	7.7%	10.5%	8.9%	10.3%	9.1%		8.2%	7.7%	7.6%
Turnover Rate	<0.6%	0.6%	1.2%	0.9%	0.9%	0.9%	1.2%	0.6%	0.0%	0.6%	0.0%	1.1%		0.7%	0.9%	0.6%
Timely Evaluations	>71.8%	95.1%	85.0%	84.2%	93.0%	79.0%	80.0%	81.0%	78.0%	91.0%	90.2%	100.0%		87.0%	71.8%	70.2%
Education Hours/FTE	>2.15	0.64	1.33	1.39	0.95	0.68	0.75	0.44	1.05	1.68	1.22	2.26		1.13	1.05	1.22
New Hire (Tenure) < 1 year	<10%	0.6%	0.6%	0%	0.6%	0.3%	0.3%	1.4%	0.3%	0.3%	0.8%	0.8%		0.5%	10%	0%
* Lost Workdays due to On-the-Job Injuries	<10.25	11	7	7	0	0	6.3	13	15	8	12	1		7	19.49	10.25
<b>Quality</b>																
ED Encounters - Left Without Being Seen	<0.8%	2.0%	1.5%	0.9%	2.3%	3.0%	3.9%	2.9%	5.1%	4.4%	3.0%	3.6%		3.0%	1.4%	0.8%
* Falls with Injury	<2	0	0	0	0	0	1	0	0	0	1	0		0	3	2
Healthcare Associated Infection Rate per 100 Inpatient Days	<0.1%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%		0.00%	0.0%	0.3%
All-Cause Unplanned Readmissions within 30 Days	<2.7%	10.6%	2.7%	4.9%	3.7%	5.5%	9.1%	5.6%	6.5%	8.1%	3.9%	5.0%		6.0%	6.1%	3.8%
Diabetes Management - Outpatient A1C>9 or missing result	<21.88%	22.40%	24.19%	24.53%	21.32%	22.32%	23.35%	26.83%	22.76%	20.98%	17.80%	17.13%		22.15%	21.88%	27.61%
<b>Services</b>																
ED Visits	1,083	1,287	949	1,138	1,246	1,448	1,419	1,384	1,375	1,501	1,492	1,668		1,355	1,105	805
Inpatient Admissions	96	123	98	115	102	89	120	121	123	96	94	119		109	116	83
OB Deliveries	50	47	41	61	46	41	50	57	55	42	49	44		48	49	41
Surgeries and Endoscopies	187	162	170	268	274	288	337	284	331	301	294	318		275	179	101
Diagnostic Imaging Procedures	2,851	2,462	2,619	3,134	2,915	2,981	3,091	2,691	3,125	3,317	3,391	3,177		2,991	2,992	2,280
Lab Procedures	14,000	14,139	13,806	14,818	13,359	15,075	14,738	13,972	16,271	14,778	16,116	19,201		15,116	14,327	11,768
Adjusted Patient Days	1,900	1,627	1,819	2,016	1,838	2,127	2,461	2,502	2,545	2,500	2,180	2,281		2,172	1,697	1,393
Therapy Visits	1,651	1,225	1,391	1,542	1,339	1,420	1,701	1,540	1,817	1,448	1,517	1,410		1,486	1,453	1,314
Outpatient Special Procedures Visits	325	241	221	332	249	277	306	364	389	418	433	497		339	324	247
<b>Financial Performance</b>																
Net Days in Accounts Receivable	50	55	58	55	56	55	55	55	55	55	53	55.83		53	51	63
*Total Margin	6.90%	5.2%	13.6%	13.3%	11.2%	5.2%	16.8%	7.4%	23.6%	8.4%	11.2%	12.8%		12.0%	18.40%	4.50%
Net Operating Revenue/FTE	\$ 19,431	\$ 17,959	\$ 18,695	\$ 21,800	\$ 19,651	\$ 20,465	\$ 21,737	\$ 18,317	\$ 23,184	\$ 22,020	\$ 19,920	\$ 19,877		\$ 20,330	\$ 20,682	\$ 17,191
Labor as % of net Revenue	56.30%	63.18%	52.36%	48.39%	62.85%	60.40%	50.97%	59.42%	45.01%	56.04%	54.56%	50.56%		54.89%	57.00%	61.30%
Operating Expense/FTE	\$ 18,177	\$ 17,959	\$ 16,155	\$ 17,591	\$ 17,598	\$ 19,469	\$ 17,756	\$ 17,086	\$ 17,873	\$ 19,609	\$ 17,866	\$ 17,461		\$ 17,857	\$ 16,940	\$ 15,891
*Days Cash on Hand	109	142	150	154	150	148	152	154	161	163	163	167		163	155	183
Commercial %	28.60%	29.90%	30.90%	31.80%	31.70%	31.40%	31.60%	31.60%	31.30%	31.70%	31.60%	31.60%		31.60%	29.00%	29.00%
Total Labor Expense/Total Expense	60.20%	60.73%	60.33%	59.41%	62.99%	62.87%	60.43%	62.50%	58.03%	62.86%	60.68%	57.46%		60.75%	61.00%	61.30%

Green at or above Goal  
Yellow within 10% of Goal  
Red More than 10% below Goal  
 \*Cumulative Total - goal is year end number

## Vision

Patients  
Employees  
Medical Staff  
Quality  
Services  
Financial



# Prosser

Memorial Health

## Values

Accountability  
Service  
Promote Teamwork  
Integrity  
Respect  
Excellence

**Mission:** To improve the health of our community.

BOARD WORK SESSION		November 15, 2022		WHITEHEAD CONFERENCE ROOM			
COMMISSIONERS PRESENT		STAFF PRESENT		GUESTS		COMMUNITY MEMBERS	
<ul style="list-style-type: none"> <li>• Dr. Steve Kenny</li> <li>• Keith Sattler</li> <li>• Glenn Bestebreur</li> <li>• Susan Reams</li> <li>• Brandon Bowden</li> <li>• Sharon Dietrich, M.D.</li> <li>• Neilan McPartland</li> </ul>		<ul style="list-style-type: none"> <li>• Craig Marks, CEO</li> <li>• Merry Fuller, CNO/COO</li> <li>• David Rollins, CFO</li> <li>• Shannon Hitchcock, CCO</li> <li>• Kristi Mellema, CCO</li> <li>• Bryon Dirkes, CHRO</li> <li>• Dr. Brian Sollers, CMO</li> <li>• Annie Parker, CCOO</li> </ul>		<ul style="list-style-type: none"> <li>• Adam Trumbour, Senior Project Manager, NV5</li> <li>• Gary Hicks, Financial Advisor</li> <li>• Brandon Potts, Vice President-Bouten Construction</li> <li>• Nick Gonzalez, Bouten Construction</li> <li>• Kurt Broeckelmann, bcDG</li> </ul>		None.	
AGENDA		DISCUSSION		ACTION		FOLLOW-UP	
<b>I. CALL TO ORDER</b>		The meeting was called to order by Commissioner Kenny at 6:00 p.m.		None.		None.	
<b>II. Public Comment</b>				None.		None.	
III. SERVICES		DISCUSSION		ACTION		FOLLOW-UP	
<b>A. Replacement Facility Update</b>							
<b>1. Design Updates</b> <ul style="list-style-type: none"> <li>a. DOH/USDA/City of Prosser Reviews (Attachment J)</li> <li>b. SVID (Attachment K)</li> <li>c. Washington DOT</li> <li>d. Furniture Fair (Attachment L)</li> </ul>		Adam, Kurt, and Craig provided the Board with updates regarding regulatory agency (DOH, USDA, City of Prosser) reviews; ongoing work with SVID to bury the existing overflow canal on hospital property; Washington DOT and the furniture fair.		None.		None.	

<p><b>2. Construction/ Schedule/Budget</b></p> <p><b>a. Construction update (Attachment M)</b></p> <p><b>b. Schedule (Attachment I)</b></p> <p><b>c. Project Budget (Attachment N) (Attachment O)</b></p>	<p>Nick and Adam provided a contractor update and reviewed a draft schedule.</p>	<p>None.</p>	<p>None.</p>
<p><b>3. Financing</b></p> <p><b>a. USDA</b></p> <p><b>b. Construction Loan</b></p>	<p>Gary provided an update on all financing activities, including the USDA, and the construction loan.</p>	<p>None.</p>	<p>None.</p>
<p><b>IV. FINANCIAL STEWARDSHIP</b></p>			
<p><b>A. Draft 2023 Operating (Attachment DD) &amp; Capital Budgets (Attachment EE)</b></p> <p><b>B. 2023 Property Tax Levy / Resolution (Attachment FF) (Attachment GG)</b></p>	<p>David provided an update on the Draft 2023 Operating &amp; Capital Budgets and on the 2023 Property Tax Levy / Resolution.</p>	<p><b>None.</b></p>	<p>To be approved at the November Board Meeting.</p>
<p><b>V. ADJOURN</b></p>			
<p>There being no further business to attend to, Commissioner Kenny adjourned the meeting at 7:53 p.m.</p>			



## Vision

Patients  
Employees  
Medical Staff  
Quality  
Services  
Financial



# Prosser

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Promote Teamwork  
Integrity  
Respect  
Excellence

BOARD MEETING		November 17, 2022,		WHITEHEAD CONFERENCE ROOM			
COMMISSIONERS PRESENT		STAFF PRESENT		MEDICAL STAFF		GUESTS	
<ul style="list-style-type: none"><li>• Steve Kenny Ph.D.</li><li>• Glenn Bestebreur</li><li>• Susan Reams</li><li>• Keith Sattler</li><li>• Sharon Dietrich, M.D.</li><li>• Neilan McPartland</li><li>• Brandon Bowden (absent)</li></ul>		<ul style="list-style-type: none"><li>• Craig Marks, CEO</li><li>• Merry Fuller, CNO/COO</li><li>• David Rollins, CFO</li><li>• Shannon Hitchcock, CCO</li><li>• Kristi Mellema, CCQO</li><li>• Bryon Dirkes, CHRO</li><li>• Annie Parker, CCOO</li></ul>		<ul style="list-style-type: none"><li>• Dr. Brian Sollers, CMO</li><li>• Syed Hashmi, MD</li></ul>			
AGENDA		DISCUSSION		ACTION		FOLLOW-UP	
<b>I. Call to Order</b>		The meeting was called to order by Commissioner Kenny at 6:00 p.m.					
<b>A. Pledge of Allegiance</b>							
<b>II. Public Comment</b>		None.		None.		None.	
<b>III. Approve Agenda</b>		None.		Commissioner Reams made a Motion to approve the October 27, 2022, Agenda. The Motion was seconded by Commissioner Sattler and passed with 6 in favor, 0 opposed.			
<b>IV. APPROVE CONSENT AGENDA</b> <b>A. Board of Commissioners Meeting Minutes for October 27, 2022.</b>		None.		Commissioner Bestebreur made a Motion to approve the Consent Agenda. The Motion was seconded by Commissioner Reams and passed with 6 in favor, 0 opposed.		None.	



	<p><b>Karmina Bowen, ARNP</b> – Provisional/Advanced Practice Clinician with requested privileges in Family Medicine effective December 1, 2022, through May 31, 2023.</p> <p><b>Stacie Olson, ARNP</b> – Provisional/Advanced Practice Clinician with requested privileges in Emergency Medicine effective December 1, 2022, through May 31, 2023.</p> <p><b>Nadine Foist, MD</b> – Provisional/Locum Tenens staff with requested privileges in Obstetrics/Gynecology effective December 1, 2022, through May 31, 2023.</p>	<ul style="list-style-type: none"> <li>• <b>William Michael McDonnell, MD</b></li> <li>• <b>Karmina Bowen, ARNP</b></li> <li>• <b>Stacie Olson, ARNP</b></li> <li>• <b>Nadine Foist, MD</b></li> </ul>	
<p><b>3. Reappointment</b></p>	<p>Dr. Hashmi presented the following providers for <b>Reappointment:</b></p> <p><b>Robert Erwin, Jr. CRNA</b> - Reappointment to Advanced Practice Clinician staff with requested privileges in Anesthesia December 1, 2022, through November 30, 2024.</p> <p><b>Tarvinder Singh, MD</b> – Reappointment to Telemedicine staff with requested privileges in Neurology effective December 1, 2022, through November 30, 2024.</p> <p><b>Corey White, DO</b> – Reappointment to Telemedicine staff with requested privileges in Nephrology effective December 1, 2022, through November 30, 2024.</p>	<p>A Motion to approve the reappointment and requested Clinical Privileges that were reviewed and recommended by the Department Chair, the Credentialing Committee and Medical Executive Committee for the following provider was made by Commissioner Reams and seconded by Commissioner Dietrich. The Motion passed with 6 in favor, 0 opposed.</p> <ul style="list-style-type: none"> <li>• <b>Robert Erwin, Jr. CRNA</b></li> <li>• <b>Tarvinder Singh, MD</b></li> <li>• <b>Corey White, DO</b></li> </ul>	

VI. FINANCIAL STEWARDSHIP		DISCUSSION	ACTION	FOLLOW-UP
<b>A. Review Financial Reports for October 2022 (Attachment CC)</b>	David Rollins presented the October 2022 Financial Reports.	A Motion to accept the Financial Reports for October 2022, was made by Commissioner Dietrich, and seconded by Commissioner Sattler. The Motion passed with 6 in favor, 0 opposed.	None.	
<b>B. 2023 Property Tax Resolution (Attachment FF)</b>	David presented the 2023 Property Tax Resolution #1075.	A Motion to approve the 2023 Property Tax Resolution #1075 was made by Commissioner Bestebreuer and seconded by Commissioner Reams. The Motion passed with 6 in favor, 0 opposed.	None.	
<b>C. 2023 Property Tax Levy (Attachment GG)</b>	David presented the 2023 Property, Tax Levy.	A Motion to approve the 2023 Property, Tax Levy was made by Commissioner Bestebreuer and seconded by Commissioner Reams. The Motion passed with 6 in favor, 0 opposed.		
VII. SERVICES		DISCUSSION	ACTION	FOLLOW-UP
<b>A. Mission, Vision, Values and Standards of Behavior (Attachment A)</b>	Craig presented the Draft Mission, Vision, Values & Standards of Behavior.	None.	To be approved by the Board in December.	
<b>B. Draft 2023 Strategic Plan (Attachment B) (Attachment C)</b> 1. Patient Loyalty 2. Medical Staff Development 3. Employee Development 4. Quality 5. Services 6. Financial Stewardship	Pillar Champions briefly discussed each Pillar of the draft 2023 Strategic Plan.	None.	To be approved by the Board in December.	

<b>C. Draft Medical Staff Model and 2023 Provider Recruitment/Succession Plan (Attachment D)</b>	Dr. Sollers, Annie, and Craig presented the Draft Medical Staff Model and 2023 Provider Recruitment/Succession Plan.	None.	To be approved by the Board in December.
<b>D. Draft 2023 Marketing Plan (Attachment E)</b>	Shannon presented the draft 2023 Marketing Plan.	None.	To be approved by the Board in December.
<b>E. Draft 2023 IT Plan (Attachment F)</b>	Craig presented the Draft 2023 IT Plan.	None.	To be approved by the Board in December.
<b>VIII. QUALITY</b>			
<b>A. CEO/Operations Report</b>	Craig provided a brief Operations Report based upon his written report included in the November Board Packet.	<b>None.</b>	<b>None.</b>
<b>IX. ADJOURN</b>			
There being no further business to attend to, Commissioner Kenny adjourned the meeting at 8:02 p.m.			

## Vision

Patients  
Employees  
Medical Staff  
Quality  
Services  
Financial



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## Values

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Service  
Promote Teamwork  
Integrity  
Respect  
Excellence

**FINANCE COMMITTEE MEETING**  
**Monday – December 12, 2022,**  
**7:00 a.m. – Vineyard Conference Room**  
**AGENDA**

**MEMBERS:**

Keith Sattler  
Neilan McPartland  
Brandon Bowden

**STAFF:**

Craig Marks  
David Rollins  
Stephanie Titus

**CALL TO ORDER**

**I. APPROVE MINUTES**

**Action Requested** – November 14, 2022, Minutes

**II. FINANCIAL STEWARDSHIP**

**A. Review Financials –November 2022 (Attachment V)**

**David**

**Action Requested** – November 2022 Financial Statements

**B. Review Accounts Receivable and Cash Goal**

**Stephanie**

**C. Voucher Lists**

**Action Requested** – Voucher List - Payroll and AP Vouchers # 168941 through #169602  
Dated 11-05-22 through 12-07-22 in the amount of \$6,931,598.59.

**David**

**E. Review 2023 Operating and Capital Budgets (Attachment W)**

**David**

**Action Requested** - Review 2023 Operating and Capital Budgets

**F. New Hospital Financing Update (Attachment Y)**

**David**

**III. ADJOURN**

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FINANCE COMMITTEE MEETING		November 14, 2022	VINEYARD CONFERENCE ROOM	
				GUESTS
<ul style="list-style-type: none"><li>• Keith Sattler</li><li>• Neilan McPartland</li><li>• Brandon Bowden</li></ul>		<ul style="list-style-type: none"><li>• Craig Marks, CEO</li><li>• David Rollins, CFO</li><li>• Stephanie Titus, Director of Finance Operations</li></ul>		
AGENDA	DISCUSSION	ACTION	FOLLOW-UP	
I. CALL TO ORDER	Keith Sattler called the meeting to order at 7:03 a.m.			
II. APPROVE MINUTES		A motion to approve the Finance Committee Meeting Minutes for October 24, 2022, as presented was made by Neilan McPartland. The motion was seconded by Keith Sattler and approved.	None.	
III. FINANCIAL STEWARDSHIP A. Review Financials – October 2022 (Attachment CC)	Net Income of \$904,660 in October and Gross Charges were \$22,643,919 which was 16% higher than budget for the month and 38% greater than the prior year. Net Operating Revenue came in at \$8,092,963 (3% over budget).	A motion to recommend acceptance of the October 2022 Financial Statements as presented to the PMH Board of Commissioners was made	None.	

	<p>Expenses were \$7,258,383 in October and 0% over budget. Surgeries were 294 vs 191 budget and ER visits were 1,492 vs 1,104 budget.</p> <p>Cash Flow was (\$56,695) for the month and \$3,298,621 YTD. AR were at a net 53 days overall.</p>	by Neilan McPartland. The motion was seconded by Brandon Bowden and approved.	
<b>B. Review Accounts Receivable and Cash Goal</b>	AR was at 53 net days overall as Collections were \$9,058,843 and better than goal at \$8,332,452. POS collections were \$30,389 exceeding a budget of \$15,000 and prior year \$22,399. POS collections YTD are \$375,901 versus \$150,000 budget and \$172,589 prior year.	None.	None.
<b>C. Voucher Lists Payroll and AP Vouchers #168541 through #168940 Dated 10-20-22 through 11-04-22 in the amount of \$6,544,809.93. Surplus Item Resolution # 1074: (1) Tenant Floor Machine.</b>		A motion to recommend approval of the Voucher Lists # 168541 through #168940 dated 10-20-22 through 11-04-22 in the amount of \$6,544,809.93 was made by Neilan McPartland, seconded by Brandon Bowden, and approved.	None.
<b>D. 2023 Operating Budget-Draft (Attachment DD)</b>	Draft Budget was presented showing \$280,241,448 gross revenue, \$100,121,337 net revenue, \$93,127,565 operating expenses and \$6,504,352 net income.	None.	None.
<b>E. 2023 Capital Budget-Draft (Attachment EE)</b>	Draft Capital Budget was presented showing \$532,255 in 2023 approved capital purchases and \$367,304 of carryover approved capital purchases from 2022 that have not been completed but expected in 2023.	None.	None.
<b>IV. ADJOURN</b>			
Having declared no further business, the meeting was adjourned at 7:56 am.			



## MEMORANDUM

**TO: BOARD OF COMMISSIONERS  
PROSSER MEMORIAL HEALTH**

**FROM: CRAIG J. MARKS, CEO**

**DATE: December 2022**

**RE: CEO REPORT**

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### **SERVICES**

#### **1. Replacement Facility Update**

November was a month of historic significance as it relates to our Replacement Facility Project. First, after waiting several months, the Washington Department of Health (DOH) issued our Authorization to Begin Construction (A2BC) on November 7<sup>th</sup>. Second, the City of Prosser issued our full building permit on November 9<sup>th</sup>. Third, on November 18<sup>th</sup>, the United States Department of Agriculture (USDA) issued their concurrence for PMH to begin construction of our replacement facility (**Attachment A**). With the approval of these three agencies, we were able to finalize our groundbreaking date (**Attachment B**), and on November 29<sup>th</sup>, we hosted our official Groundbreaking Ceremony (**Attachment C**). I would like to apologize to everyone, especially our staff, for the short notice of the event and for having it on a Tuesday morning. Unfortunately, if we wanted to get the construction started our options were limited as we attempted to accommodate the USDA officials. As you may recall, we originally planned to break ground in May/June, but inflation changed all that. Fortunately, we were still able to begin the construction in 2022, although six months later than planned five years ago. Our plan is to use our 2022 Holiday Party to thank our staff for their support of this project, as most staff were busy working and unable to attend the groundbreaking. Despite the poor weather (temperature of 28° with snow flurries) the event was well attended including local media and community leaders and the feedback was positive. Speakers included Neil Ripplinger- Executive Director of the Prosser Economic Development Association; Dr. Brian Sollers- PMH Chief Medical Officer; Brandon Potts- Vice President of Bouten Construction; and Marti Canatsey from the USDA. While the USDA planned to have several representatives at the event, the weather prevented this, but they did send a letter which was read by Marti Canatsey (**Attachment D**). Now that construction has started, we look forward to our Grand Opening in fall/winter of 2024!

As you can see, November was an incredibly busy month for the project and is summarized in the Owner's Representatives (NV5) Project Report for November (**Attachment E**); the minutes from our last Project Team Meeting (**Attachment F**); and the project schedule for the next four months (**Attachment G**). We continue to focus on three main areas with this project: Design; Construction/ Schedule/ Budget; and Financing. However, in the coming months our primary focus will be on Construction/ Schedule/ Budget as design and financing activities decrease.

## A. Design

We continue to work with the DOH to address questions they have regarding our plans. Most are minor and will be addressed in the next month or two and all must be resolved before we occupy the building. One example is the design detail for our MRI and CT suites, which are currently being drawn, but could not until we selected our replacement MRI and CT, (we selected GE units in September). We are also in the process of fine-tuning our Functional Program which details how we plan to use our new building. The bulk of our work with the USDA is now complete including meeting all of the items in their Letter of Conditions. We must, however, continue to meet all these conditions as we move forward. While we have obtained our building permit from the City of Prosser, we continue to work with them on a Development Agreement for improvements they would like us to move to North Gap Road. Working with our attorneys, we have developed a draft agreement which the City is currently reviewing. They expect to give us feedback in the next few weeks. Ultimately, the Prosser City Council must approve the Development Agreement. As we get further in the process, a draft Agreement will be shared with the Board. Our goal is to delay making any improvements until more is known about future North Gap Road development and when the Washington State Department of Transportation (WSDOT) plans to improve (widen) the Gap Road overpass. Stay tuned. We are also waiting to hear back from WSDOT as it relates to improvements, they want us to make to the intersection of North Gap Road and the westbound I82 exit and eastbound I82 on-ramp. The city expects us to hear from WSDOT in the near future and that it will include their plans for a roundabout. We are proceeding with the Sunnyside Valley Irrigation District as (SVID) on burying the canal on our property and they expect to complete the project before the spring irrigation season. Finally, we held a Furniture Fair on November 7<sup>th</sup> and have collected a tremendous amount of feedback about each piece of furniture trialed. The feedback has been summarized and will be reviewed with Open Square on December 13<sup>th</sup>. Based on the feedback, we will be seeking alternatives for a couple of pieces.

## B. Construction/Schedule/Budget

Once we received the go-ahead from the USDA, Bouten Construction jumped into action. In two short weeks, they assisted in putting up signs, moved the main entrance to the property, helped prepare and host the groundbreaking, began excavation of the site and is currently working on setting up their construction trailer putting up a security fence, etc. For the next two years there will be a steady stream of activity on our property, and with the signs we have erected, the whole world will know what is going on! As we move into the construction phase of the project, Bouten will be conducting Owner, Architect, Contractor (OAC) Meetings. The first introductory OAC Meeting was held on October 26<sup>th</sup> and the next meeting will be on December 13<sup>th</sup> after the holidays, the plan is to hold OAC Meetings and monthly Project Team Meetings, biweekly rather than the current weekly meetings. Two critically important areas as we move forward will be our construction schedule and budget. The construction schedule is still being refined, but is included (**Attachment H**) and will be reviewed at the December Board Work Session. There is no change to our budget from when the Board approved it (\$112 million), but as contraction begins, we will need and plan to keep a close eye on it. On a positive budget note, Gary Hicks has indicated that cost of issuance for the interim

construction loan have come in \$39,225 better than our budget. Let's hope that all of our expenses come in under budget!

### **C. Financing**

As I previously mentioned, we are in good shape as it relates to our USDA loans and will have little activity with them until the construction is complete and we are ready to close our loan with them. They do plan to have their architect visit the construction site several times during construction to ensure that we are abiding by all of their requirements (e.g., ADA). We plan to close our construction loan with Western Alliance Bank on December 6<sup>th</sup> (**Attachment Y**). The locked-in interest rate will be 5.75%. The good news is, we will only pay interest on funds that we have drawn out, which will occur over the next two years. As we approach the end of 2022 and begin the first half of this project, we plan to have most members of our Project Team at the December Board Work Session to update the Board about the state of the project and answer any questions the Board may have. To get a better understanding of the magnitude of work that has gone into this project, I have included a project and finance schedule comprised by Gary Hicks (**Attachment I**).

## **2. 2023 Strategic Plan**

For the past several months we have been working to finish 2022 strong, while at the same time preparing for 2023 and the challenges it will bring. Our 2023 Strategic Planning Process involved meetings with all of our team members including staff, Board, Medical Staff and leadership. The discussions we had about the future of Prosser Memorial Health were uplifting and inspirational. The ideas suggested by our team, which were distributed in the November board packet, were excellent and ranged from enhancements we can make soon, to long-term changes that will position us well for the future. While we discussed our replacement facility project, we also focused on our Pillar Goals, objectives, and the strategies that will enable us to achieve them. The result is our 2023 PMH Strategic Plan (**Attachment J**) which does all these things.

In addition, we reviewed our Mission, Vision, Values, and Standards of Behavior, and made several small changes (**Attachment K**). The 2023 Strategic Plan will be a challenge to accomplish as it contains many initiatives to pursue and achieve ranging from our continued recruitment of additional providers to the development of a replacement facility. Most of our initiatives focus on and promote our continued growth and our commitment to become the best hospital we can be. It is important to emphasize that this Plan keeps us focused on our Six Pillars of Excellence, the keys to our long-term success. The initiatives in the Plan are both short-term (e.g., provider recruitment) and long-term (e.g., the development of a replacement facility) and will enable PMH to be successful in both the short and long-term. The Board will be asked to approve the proposed PMH Mission, Vision, Values and Standards of Behavior and the 2023 Prosser Memorial Health Strategic Plan at the December Board Meeting.

### 3. 2023 PMH Marketing Plan

The past couple of years PMH has worked hard to increase our marketing efforts throughout the Yakima Valley (Yakima to the Tri-cities) and it has paid off. We are now seeing patients from communities throughout the Valley and patient volumes throughout PMH have continued to rise. Shannon Hitchcock, Chief Communications Officer, has developed these significant marketing/communication strategies that tell the Prosser Memorial Health story to the communities we serve, and there is more to come. Shannon has developed a draft 2023 PMH Marketing Plan (**Attachment L**) which is a comprehensive overview of how we plan to continue telling our story through direct mail, social media, newspaper, billboards, radio, television, town hall webcasts, etc. The plan emphasizes our providers, staff and the caring approach they provide to every patient, the new and advanced services provided at PMH (e.g., gastroenterology (GI) services); and how we will provide ongoing communication about all the wonderful things happening throughout Prosser Memorial Health, especially the development of our replacement facility. The Board received a draft 2023 PMH Marketing Plan last month and will be asked to approve it in December.

### 4. 2023 PMH Information Technology (IT) Plan

The use of electronic health records (EHRs) and robust IT infrastructures are critical in healthcare today and will be long into the future. We are very fortunate to partner with Kadlec/Providence and share their EHR-Epic, the number one EHR in the world. PMH is now more familiar with Epic and its advantages and challenges. PMH has worked hard to make the use of Epic as easy as possible and will continue to work with our staff on enhancing our use of Epic. This along with several other initiatives were in our 2022 IT Plan and will also be in our 2023 IT Plan. Phillip Braem, our Chief Information Officer, and his staff have reviewed the 2022 IT Plan, and collected IT suggestions/opportunities throughout the year and the Strategic Planning Process. In addition, they have reviewed the initiatives in the draft 2023 PMH Strategic Plan that have IT implications. In response, they developed the draft 2023 PMH IT Plan (**Attachment M**) which assesses our infrastructure needs (hardware and software) and our IT programmatic opportunities. Several key initiatives included in the IT plan include: ongoing Epic education for staff; the replacement of Lawson as our Human Resource/payroll software platform; the completion of the installation of the virtual desktop infrastructure throughout PMH; and the continued focus on cyber security to protect our system and data from outside attacks. These are all initiatives that will enhance the performance of our IT systems and enhance staff engagement/satisfaction with our IT systems. The Board will be asked to approve the 2023 PMH IT Plan at the December Board Meeting.

### 5. Epic Annual Report

Last year Providence spun off their Community Connect division (the division that supported all non-Providence entities using their version of Epic) and created a new company called Community Technologies a Tegria Company. This company provides an Annual Report (**Attachment N**) which is a comprehensive data-driven report produced by Epic containing key values regarding our organization as well as comparison data with other organizations similar to us. We are currently in the process of

reviewing this report to identify opportunities to further PMH's usage of the tools available in our current version of Epic. In the near future, we will discuss key metrics and additional tools we would like to utilize based upon this report with staff from Community Technologies. As noted in the 2023 IT Plan, we will continue to enhance our utilization of the Epic System throughout 2023.

## **Patient Loyalty**

### **1. Community Appreciation**

During this season of giving, we have so much to be thankful for at PMH. This past year may have been the most challenging we have ever faced at PMH, as we continue to fight the COVID-19 pandemic and saw record volumes throughout the organization. However, one thing that remained constant was the willingness of our team to go the extra mile for the good of our patients and the communities we serve. The giving spirit of our staff and organization is reflected in the attached thank yous (**Attachments O1-O8**) and shows how much we are appreciated. We are truly blessed with one of the most generous, compassionate, and caring teams in the country! Thank you for all that you do and may it be returned tenfold to each of you during this holiday season!!!

## **Medical Staff Development**

### **1. 2023 PMH Medical Staff Model and Provider Recruitment/ Retention Plan**

One of the reasons we have been successful the past couple of years is because of the development and implementation of our Medical Staff Model and Provider Recruitment/ Retention Plan. This Plan has allowed us to double the size of our Medical Staff and most importantly, better meet the growing health care needs of the communities we serve. As part of the Strategic Planning Process for 2023, we once again spent a considerable amount of time discussing the Medical Staff Development Pillar, and specifically, the provider needs of the communities we serve. Based on the needs analysis contained in the 2023 Strategic Planning Packet (not a perfect system, but one based on population and used across the country), we continue to have needs in both primary and specialty care despite all of our success. These shortages force residents to seek care elsewhere, which helps explain our historically low market share. The proposed 2023 PMH Medical Staff Model and Provider Recruitment/ Retention Plan (**Attachment P**) was reviewed and approved by the PMH Medical Staff and is recommended to the Board for approval in December. The Plan is a mix of primary (FP, PEDS, IM) and specialty (EM, GI, Ortho, Radiologist, Occupational Medicine) care providers, and will be challenging to accomplish considering the nationwide provider shortage.

## 2. Medical Staff Recruitment

As we near the end of 2022, I am pleased to report that our recruitment efforts are proving to be successful despite nationwide shortages of providers. Last week we received a signed contract from Geoffrey Higgs, M.D.- Sports Medicine Orthopedic Surgeon. Dr. Higgs has a tremendous amount of sports medicine experience including being the team physician for several professional sports franchises (e.g., NFL- New England Patriots, NHL Boston Bruins). Dr. Higgs plans to join PMH in May 2023. We've also learned that Josh Macke, D.O.- Emergency Medicine is planning to sign an agreement with PMH this week. Dr. Macke is completing his residency in emergency medicine in Arizona and plans to join us in June 2023 (**Attachment Q**). Dr. Macke is originally from the state of Washington and is looking forward to coming home! In addition, we have another emergency medicine candidate from the area that is interested in opportunities at PMH. With the recent announcement that Pam Morris, ARNP- Occupational Medicine is leaving PMH, we have been searching for a replacement provider. I am pleased to report that we are currently in contract negotiations with an occupational medicine provider that is interested in joining us. I hope to announce at the December Board Meeting that we have several new providers joining our Medical Staff. Last month we announced that Dr. Jessica Dingwall- Radiologist, will be joining our team in March. Since then, we have been exploring options for covering us when Dr. Dingwall is off, and we have found several solutions including our current radiologist (Drs. Zuckerman and Ballard) and several area Radiologist. At this time, we have most shifts covered for 2023! In addition to these specialties, we continue to recruit for primary care providers including family practice, pediatrics, and internal medicine. While we have interviewed several candidates, we have not yet found providers that match our culture. These searches will be the foundation of our efforts in 2023.

## Employee Development

### 1. Employee Engagement

As tradition goes at PMH, we are going to fill the month of December with holiday festivities (**Attachment R**) and for the first time in three years, we will hold a holiday party (**Attachment S**). The party will be held on December 10<sup>th</sup> from 5:00 p.m. until midnight at the HAPO Center in Pasco. The event will include a nice dinner, dancing, and casino night. To date we have almost 500 staff and families signed up. On Thursday, December 16<sup>th</sup> we will have a day of celebration throughout PMH. This year we will have two individual contests, a Christmas Cookie Contest, and our Annual Ugly Sweater Contest. These contests are open to all PMH Team members, including Board members. We will also have a Department Holiday Gift Box Decorating Contest, with all entries to be used to decorate under the PMH Christmas tree in the lobby. Prizes will be awarded to the top entries and events like this will help everyone get into the holiday spirit. In addition, departments, and clinics throughout PMH have volunteered to purchase gifts for less fortunate families in our community. Thank you to everyone participating for your generosity. Finally, we will be serving our Annual Holiday Lunch/Dinner on the 15<sup>th</sup> to both the day and night shifts. The meal will once again include

prime rib, mashed potatoes, veggies, and peppermint stick ice cream. While we wrap-up 2022, we are already making plans for our Annual Employee Recognition Luncheon (years of service) in January. Stay tuned for more details after the holidays. Also included in the Board packet is the December employee newsletter (**Attachment T**) which contains useful information such as a reminder for employees to complete their 2023 Benefits Open Enrollment and pictures about what took place last month.

## **2. Employee/Medical Staff Engagement Surveys**

The engagement survey process for both our staff and Medical Staff ended on November 18<sup>th</sup>. This process is conducted once per year and enables us to objectively and anonymously, hear from our staff and Medical Staff about how well we, as an organization, are engaging with our team. This process will identify areas of change from previous years (because we use the same survey instrument and questions), areas where we are performing well, and opportunities for improvement. We will use this information to develop strategies to enhance our performance at the department level and throughout the organization. At this time, we only have high level results from People Element (the company that performed the survey), such as participation levels. Our staff participation rate was 84% compared to 82% in 2021. Our Medical Staff Participation rate was 49% compared to 74% in 2021 and are combined participation rate was 79% compared to 81% in 2021. Considering everything that has been going on in healthcare, these are still strong and will provide us an accurate view of the engagement levels of our team. We anticipate detailed reports to be available in January where they will be shared with everyone and used to develop our improvement plans.

## **3. Aspire Program**

One of the highlights at our Annual Holiday Party is the recognition of all recipients of ASPIRE Awards throughout the year (Winners in 2022- (**Attachment U**) and the random selection of twelve of those individuals to receive checks ranging from \$250 to \$1,000. These individuals were recognized for living our ASPIRE Values. Specifically, they are being recognized for doing things for their patients, co-workers, visitors, providers, etc. that go above and beyond their regular job descriptions. Four Bronze Medal recipients will receive checks for \$250; four Silver Medal recipients will receive checks for \$500; and four Gold Medal recipients will receive checks for \$1,000. Please join me in thanking each of these individuals for their efforts to exceed the expectations of others and truly make PMH great!

#### 4. International Association of Firefighters (IAFF)

Prosser Memorial Health is in negotiations with I.A.F.F., Local I-24. The Union represents twenty-one (21) full-time & part-time EMT's and Paramedics. After six (6) negotiating sessions the Union and Prosser Memorial leadership mutually agreed to move to mediation in attempt to resolve outstanding items. All but three (3) contract articles have tentative agreements, with the remaining open items being, ours of Work/Staffing Levels, Wages, and Personal Time Off (PTO). Mediation is scheduled for January 5<sup>th</sup>, 2023, where we look forward to securing an agreement, at which time the proposal would then be brought before the Board of Commissioners in January for approval.

#### 5. Men's Health Month

I would like to thank everyone who supported the awareness of Men's Health Month by participating in the No Shave November last month. The participation has been outstanding especially among members of the PMH Medical Staff. The contest will continue until December 15<sup>th</sup> when our staff will select the winners. Again, thank you for supporting the awareness of Men's Health and for tolerating the no shave look. Good luck to all the participants!

### Financial Stewardship

#### 1. Financial Performance- November

As we near the end of 2022, I am pleased to report that our financial performance remains strong, and our overall financial position has never been stronger in the history of Prosser Memorial Health (**Attachment V**). In November our patient volumes remained strong as indicated by our adjusted patient days which were 2,281 days or 22% better than our budget. This resulted in our gross patient revenue being \$5.3 million better than our budget, for our largest gross revenue month of \$23.4 million in our history. This is especially impressive when you factor in the fact that the month includes Thanksgiving Day and the day-after Thanksgiving, two historically low volume days. Our deductions from revenue were high, 39% over budget, but because of our strong revenue our net revenue for the month was \$8.2 million compared to our budget of \$7.3 million. Our expenses were 6% over budget, but certainly in line with our increased volumes and revenue. The result was an operating income of \$1.0 million compared to our budgeted operating income of \$452,064, resulting in an operating margin of 12.2%. After accounting for non-operating income, our bottom line (net income) for the month of November was \$1,060,228 for a healthy total margin of 12.8%.

As in previous months, as we continue to add strong financial months, our year-to-date performance improves. Our year-to-date gross revenue is now 15% better than budget and 28% better than last year. After accounting for deductions from revenue, COVID-19 Relief Funds, etc., our net revenue is 8% (\$6.2 million) better than budget and 7% better than last year (and in 2021 we received \$10.2 million in COVID-19 Relief Funds!). Our year-to-date expenses are 1% over budget and 16% over last year, resulting in an operating income that is 110% better than budget. After factoring in our non-operating (loss) due to investment declines, our year-to-date net income is



\$10,525,319 for a total margin of 12.1%, significantly better than our Pillar goal of 6.0%. This strong operating performance led to a positive cash flow in November of \$1.2 million and year-to-date is \$4.5 million. This positive cash flow performance is aided by our strong payor mix and lower capital spending. This has also strengthened our balance sheet where we have over \$30 million in cash despite already spending almost \$8 million on our replacement facility project. Our financial position remains strong and positions PMH well for the future, including the construction of our replacement facility.

## 2. 2023 Operating and Capital Budgets

After several months of working with our Leadership Team, the finance staff have developed proposed 2023 PMH Operating and Capital Budgets (**Attachment W**) which the Board will be asked to approve at the December meeting. The budgets are based upon input from our staff, Leadership Team, Medical Staff and the proposed 2023 Strategic Plan. The budget packet goes into great detail about the specifics contained in the budgets so I will not. Please note, that we continue to be in growth mode, but it is difficult to predict the pace of growth in the future. This is specifically true in 2022 because we saw a definite surge in volumes in 2021 due to the pandemic regardless of the volumes, we experience in 2023, our goal will be to achieve our budgeted net income and total margin. Based on our projections our Operating Budget is projecting a net income (bottom line) of \$6,209,240 (6.12% total margin). This performance exceeds our Financial Stewardship Pillar Goal of 6.0% and will enable us to continue our journey towards a new facility. Our proposed capital budget includes \$756,587 of acquisitions and \$308,982 of carry over items from the 2022 Capital Budget. We are projecting a positive cashflow of \$729,386, which will enable us to maintain our strong financial position throughout the replacement facility project.

## 3. PMH Foundation Update

With the official groundbreaking for the new hospital, the Foundation has now moved into the public phase of our capital campaign. The Foundation Board of Directors will be actively soliciting donations in 2023 through community outreach and one-on-one meetings with community stakeholders to raise additional funds for the project. To date we are halfway to our goal of \$3 million, with \$1.5 million in pledges received.

Save the Dates! **Go Red for Women** will be held Friday, February 3 at Desert Wind Winery, **Bottles, Brews, Barbecues** will be held June 9-10 at Vintner's Village and the **Wine Country Classic** will be held Friday, September 8 at Canyon Lakes.

## Quality

### 1. 2022 Environment of Care (EOC) Report and 2023 EOC Plan

As in previous years, the 2022 (EOC) Report and Plan for 2023 was developed by Steve Broussard, former Director of Support Services; (Steve retired on December 5<sup>th</sup> , after working at PMH for 28 years!), for Board review and approval in December (**Attachment X**). This comprehensive report covers several EOC areas that are integral to our ongoing operations but are not always top of mind for our staff. Steve has done an outstanding job of educating our entire Team about the importance of these areas and he's always been well prepared when we are surveyed by regulatory agencies. As a result, we do well in the surveys and provide a safe environment for our patients, visitors, and staff. On behalf of PMH, I would like to thank Steve for all his efforts in this area and wish him well in his retirement!

### 2. Board Policies

The Board will be asked to review and approve the following Board Policies at the December Board Meeting: Medical Staff Recruitment (**Attachment AA**); Exclusive Designated Medical Specialty Services (**Attachment BB**); Affiliation (**Attachment CC**), and Issue Resolution Procedure- Exempt Staff (**Attachment DD**). The only changes being recommended by Administration to these policies are title changes, typos, etc. As a result, these policies will be placed on the December Consent Agenda. If the Board would like to make changes and/or discuss the proposed Policies, any Commissioner may remove a policy from the Consent Agenda and place it on the Regular Agenda.

### 3. Washington State Hospital Association (WSHA)

One area that all hospitals need help with is state and federal legislative support. This would be prohibitively expensive for individual hospitals to do this, so most hospitals depend on state and national hospital associations to provide this support. For this reason, PMH is a member of WSHA and the American Hospital Association (AHA). Our annual dues for WSHA are approximately \$38,000 per year based on our annual operating expenses. This represents a 2% increase, which is the maximum increase, even though our expenses have been increasing in excess of 10% per year due to our growth. I have included a letter from Cassie Sauer, President of WSHA (**Attachment EE**) which details some of the support WSHA has provided to PMH. WSHA is one of the few state hospital associations where all state hospitals and health systems are members and PMH plans to continue to be a member of WSHA in 2023.

#### **4. Board Self-Evaluation**

A final reminder that it is time for all Board members to complete their annual self-evaluation, which was distributed in November. Please complete the evaluation and return it to Rosemary or Steve Kenny by the first week of January so that the results can be compiled and discussed in January. We plan to review the results in January and use the findings to develop a 2023 Board Action Plan.

#### **5. Board Education**

For the first time in several years, the AHA Rural Healthcare Leadership Conference will not be held in Phoenix, Arizona. This year the conference will be held in San Antonio from February 19-22 (**Attachment FF**). This conference addresses many issues rural hospitals are facing today and includes many top healthcare speakers. Several Board members have already signed-up for the conference, and I encourage all Board members to participate. If you are interested, please contact Rosemary.

#### **6. December Board Work Regular Session**

The December Board Work Session will be used to update the Board on the Replacement Facility Project and several other strategic initiatives. Specifically, as it relates to our Replacement Facility Project, we plan to discuss design updates; the construction process and schedule; and the current status of our loan initiatives for the project. Finally, we will answer any questions the Board may have regarding our proposed 2023: Operating and Capital Budgets; Strategic Plan; Marketing Plan, IT Plan; and Medical Staff Model and Provider Recruitment/ Retention Plan. At the December Board Meeting, the Board will be asked to act on: several Board Policies; the 2023 Medical Staff Model and Provider Recruitment/Retention Plan; 2023 Operating and Capital Budgets; 2023 Strategic Plan; 2023 Marketing Plan; 2023 IT Plan; and the 2023 EOC Plan. There are a lot of action items, but hopefully most of the Board's questions regarding these items will be discussed and answered at the Board Work Session. May you and your family have a Merry Christmas and a wonderful New Year!

If you have any questions regarding this report, or other hospital activities, please contact me at (269) 214-8185 (cell), (509) 786-6695 (office), or stop by and see me at the hospital.

Attachment A

RD Instruction 1942-A  
Guide 18  
Page 8

15. Rural Development Concurrence.

As lender or insurer of funds to defray the costs of this contract, and without liability for any payments thereunder, Rural Development (Rural Development) hereby concurs in the award of this CONTRACT to

Bouten Construction Company

U.S. Department of Agriculture  
Rural Development

By  \_\_\_\_\_

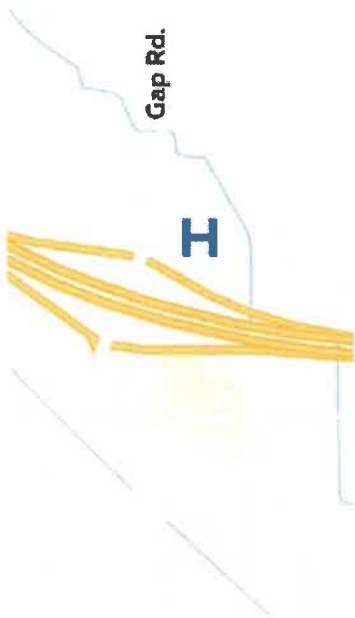
Title Community Programs Director

Date 11/18/22

This CONTRACT shall not be effective unless and until concurred in by the State Director of Rural Development, U.S. Department of Agriculture or a delegated representative.

PLEASE JOIN US

# NEW HOSPITAL GROUNDBREAKING



**Tuesday,  
November 29  
11:00AM  
New Hospital Site**

The new hospital site is located on the northeast corner of North Gap Road and I-82. Reception to follow at Desert Wind Winery.



**Prosser**  
Memorial Health **Foundation**



# NEW HOSPITAL GROUNDBREAKING AGENDA

**Tuesday, November 29, 2022**

## WELCOME

**Neal Ripplinger**

Executive Director

Prosser Economic Development Association

**Craig Marks**

CEO

**Brian Sollers, DO**

Chief Medical Officer

**Brandon Potts**

Bouten Construction

Photo opportunities for  
USDA, Board of Commissioners, and Design Team.

## RECEPTION

A reception will immediately follow at Desert Wind Winery.  
2258 Wine Country Rd., Prosser



**Prosser**  
Memorial Health Foundation

[Learn More](#)





United States Department of Agriculture

**Rural Development**

Washington State Office  
1835 Black Lake Blvd., SW  
Suite B  
Olympia, WA 98512

Voice 360.704.7700  
Fax 855.843-6124

To: Prosser Hospital Commissioners

From: Koni Reynolds, USDA-RD Community Programs Director,  
Helen Price Johnson, USDA-RD WA State Director

PROSSER HOSPITAL GROUNDBREAKING EVENT  
November 29, 2022

Greetings Hospital Commissioners, dignitaries, and project team members,  
CONGRATULATIONS!

I'm sorry the snowy weather conditions in the mountains prevented us from attending today's event.

***As part of the USDA, Washington Rural Development exists to sustainably maximize prosperity and opportunity in Washington's rural communities through good stewardship on behalf of the American People. Because we know that "Together, America Prospers."***

We are proud to be in partnership with the Prosser community on this project. This new hospital is funded by a \$80.5 million Community Facilities direct loan and \$1 million ERHC grant from USDA Rural Development, to add to the almost \$26 million in cash from Prosser Memorial Health and \$5 million in operating leases.

Many people worked tirelessly to bring this to fruition. At USDA we are very proud of our Community Program Specialist Marti Canatsey. We'd like to take this moment to acknowledge and thank her for the diligence, commitment to customer service and her positive can-do spirit which all came together with this project.

Thank you for including Rural Development in this special groundbreaking event. We honor the efforts of this hospital board. The investments you are making will serve families from across this region, for generations, delivering much needed high quality medical care for the rural communities you serve.

Again, Congratulations!

A handwritten signature in cursive script that reads "Koni Reynolds".

Koni Reynolds, USDA-RD Community Programs Director

A handwritten signature in cursive script that reads "Helen Price Johnson".

Helen Price Johnson, USDA-RD WA State Director




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**Prosser Public Hospital District  
Prosser Memorial Health Replacement Hospital  
Progress Report**

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**DATE:** December 5, 2022

**I. PROJECT TEAM:**

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Prosser Memorial Health (PMH)	Owner
NV5	Owner's Representative
bcDesignGroup (bcDG)	Architect/Design Team
Henderson Engineering	Security, Low Voltage, Audiovisual Design
Gary Hicks Financial, LLC	USDA Application Consultant
Perkins Coie	General Counsel
R&B   Genesis (Mitchell)	Medical Equipment Planner
GeoProfessional Innovation	Geotechnical Engineering Services and Construction Materials Testing & Inspection Services
CBRE   Heery	Commissioning Agent
OpenSquare	Furniture Vendor
Bouten Construction	General Contractor as Construction Manager

**II. PROGRESS:**

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- A. Contracts – The following is a status of professional services agreements:
- a. Agreements, contracts and/or amendments *executed this period*:
    - i. Sunnyside Valley Irrigation District, Construction Cost agreement to relocate irrigation canal underground, dated November 3, 2022.
    - ii. On November 18, 2022, the USDA provided their concurrence with the contract for construction between PMH and Bouten, fully executing the contract.
  - b. Agreements, contracts and/or amendments *in process this period*:
    - i. None.
- B. Site Development and Coordination
- a. Sunnyside Valley Irrigation District (SVID) – As noted in previous board reports, the project team is proceeding with moving the SVID overflow canal underground in its current location. PMH executed a Construction Cost agreement as noted above, and Bouten Construction's excavation subcontractor, Big D's Excavation, has provided a proposal for the pipe material. The team aims to complete the irrigation construction work in early 2023.
- C. Design – Building
- a. bcDG will issue a final "conformed set" of drawings once all permitting items have been resolved with the Washington State Department of Health (DoH). This set is currently on track for issuance in early 2023.
- D. Permitting
- a. Local and state authorities having jurisdiction have permitted the project for construction.
  - b. The design team is currently finalizing their coordination efforts with the DoH to resolve comments remaining from their review process. bcDG aims to finish this coordination effort in early 2023, as noted previously.
  - c. The project team continues to wait for a final signed copy of the Intersection Control and Evaluation (ICE) report that the project team sent to the Washington State Department of Transportation (WSDOT) in May. bcDG's traffic consultant, TranspoGroup, understands that WSDOT has completed their review and has not further comments, but that getting physical



signatures is taking longer than anticipated. The project team hopes to receive a signed copy of the ICE in January, 2023.

- E. USDA Approval
  - a. On November 18, the USDA provided their concurrence with the project, which effectively authorized the project to proceed with construction. This is a major milestone resulting from over a year of collaborative effort by the project team to demonstrate that this project meets all of USDA's stringent design and contracting requirements. The culmination of this process, besides formal concurrence, was the symbolic groundbreaking ceremony that took place on Tuesday, November 29.
- F. Pre-Construction
  - a. On November 18, 2022, and subsequent to receiving USDA's formal concurrence, PMH issued Notice to Proceed to Bouten Construction. This milestone closes the Pre-Construction phase of the project and formally commences the Construction phase, which similarly closes the pre-construction phases of the design team and project management team's contracts. All subconsultants will now be providing their specified construction phase services, also referred to as "construction administration".
- G. Operations / Activation
  - a. The project team intends to reconvene monthly operations meetings in early 2023. The meetings are intended to plan and strategize for the operational shift that will occur when PMH moves from their existing facility to the new facility in 2024.
  - b. NV5 intends to involve Kim Cunningham, their proposed Transition Coordinator, to facilitate the operational transition and physical move from the existing facility to the new facility.
  - c. The Operations team will continue to develop the 'Functional Program Document', as requested and required by the Department of Health, to act as an 'Owner's Manual' for this process.

### III. PROCUREMENT:

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- A. Upcoming project team members to procure include:
  - a. Art Consultant, 2023.
  - b. Signage Design and Fabrication vendor, 2023.

### IV. SCHEDULE:

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*See 4-month look ahead schedule, attached herewith.*

### V. BUDGET

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- A. NV5 maintains a comprehensive project budget and is currently updating its contract and invoice tracking system to align with the approved final budget. This system will be used in future board reports to convey overall financial status on the project, such as total spent to date, current spent for the month, reallocations, and contingency usage.

### VI. PROJECT CHALLENGES / RISKS:

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- A. **Construction** – Now that the project is in the Construction phase, some potential risks to successful project completion are as follows:
  - a. **Excavation and site development.** While PMH engaged a geotechnical engineer to survey the soils within the project area and inform the design process, there remains a risk of encountering foreign debris under the surface (such as agricultural debris, trash and other discarded materials, polluted soils, etc.), and unforeseen rock. The current excavation

efforts have demonstrated that the site appears to be both relatively undisturbed and free of unforeseen rock; the project team hopes this bodes well for the remainder of excavation.

- b. **Imaging Department final design.** During the development of the documents, the imaging department could not be fully designed until PMH had selected all of its imaging equipment and those manufacturers had provided drawings specific for our project. This is somewhat typical of healthcare construction, and as such, the current construction contract includes an allowance, an allotment of money without any associated, well-defined and contracted construction scope, for the construction of the imaging department. At this time, the design team indicates that they have all of the information they need from the imaging equipment manufacturers to design the department, and that they will issue drawings for construction in early 2023. Bouten will then have their subcontractors provide a proposal to construct the department. Only once the project team reviews and approves this proposal will the true cost be apparent—and ideally within the designated allowance. Until this happens, there is a risk the cost could exceed the allowance.
  - c. **SVID construction.** While SVID intends to complete the irrigation ditch undergrounding work promptly in early 2023, it is not possible to hold them accountable for timely construction as they are essentially a public utility. If SVID delays this work by several months or more, this would in turn prevent Bouten from completing their site work, roads and parking lots, for example, as planned. While the likelihood of this occurring appears remote based on SVID's previous performance, the risk remains until the undergrounding effort is complete.
  - d. **Lead times.** Throughout the pre-construction phase, the project team has attempted to identify risk to project completion due to extended lead times for equipment and materials. Fortunately, this disruption in the industry appears to be waning, however the team will continue to monitor this risk, plan as reasonably as possible, and keep the PMH Board informed of schedule or costs impacts due to this phenomenon.
  - e. **Design Coordination.** As we enter the construction phase of the project, any imperfections in the design documents will be identified by the general contractor as they arise, and the design team will assist the general contractor with developing a solution. This is a normal part of the construction process, as no design is 100% perfect, and to that end we've carried a contingency to cover these unforeseen issues. The project team feels strongly that they've created a well-coordinated design and associated document set, which should create very few coordination issues; however, there is always a risk of a large unforeseen design issue that could consume a large portion of contingency. The project team will endeavor to keep PMH informed of these issues as they arise and resolve.
- B. **Traffic Study** – The project team continues to wait for the State to sign off on the Intersection Control Evaluation (ICE) study that PMH's consultant, TranspoGroup, completed earlier this summer. This is the last step in approving the traffic mitigation measures identified by the project team and the City of Prosser. The team is hopeful that the WSDOT will return a signed copy this month. Ahead of this milestone, the team understands that the State has approved the Hospital's proposal to install a 4-way stop at N Gap Road and the I-82 westbound on/off ramps, though WSDOT requested PMH to pay a fee in lieu of the improvements, since WSDOT is in fact slated to construct a traffic circle in that intersection in the near future.
- C. **Road Improvement Deferral Agreement** – As noted in this report, the project team is working to finalize the deferral agreement for improvements to North Gap Road. The team is advocating for the best interests of PMH and the community, but as this is a negotiated process, the City could require any number of scenarios, including: construction of a portion of the road improvements concurrent with the building construction; payment now in lieu of construction; future payment in lieu of construction; future construction concurrent with road improvements to the north and south of PMH's parcel. The project team is hopeful for the latter, and will keep the Board informed of any developments.

**VII. NEXT STEPS:**

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- A. Transition all consultants to Construction phase services, including procurement kickoff (furniture, medical equipment, etc.)

**VIII. ATTACHMENTS:**

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- A. 4-month look ahead schedule

Owner Team Meeting Minutes

<b>Meeting #</b>	<b>20221202</b>	<b>Date:</b>	<b>Meeting: Friday, December 2, 2022 Issued: Monday, December 5, 2022</b>	
<b>Time &amp; Location:</b>	9:00amCT/8:00amMT/7:00amPT MS Teams Video Call	<b>Prepared by:</b>	Adam Trumbour - NV5	
<b>Attendees:</b> ✓ = Attended Meeting	<b>PMH</b> Craig Marks ✓      David Rollins ✓ Bryon Dirkes ✓      Steve Broussard	Merry Fuller	Phillip Braem	
	<b>NV5</b> Paul Kramer Adam Trumbour ✓ Braden Demmerly ✓	<b>BCDG</b> Kurt Broeckelmann Brooke Cinalli Hilary Beashore ✓ Lance White ✓	<b>Finance Consult.</b> Gary Hicks	<b>Bouten</b> Brandon Potts Mac McGrath ✓ Josh Belt ✓ Nick Gonzales
<b>Attendees</b>				

PMN = Post Meeting Note

For minutes from prior weeks, please reference previously issued minutes.

No	Item	Date Due By	Ball in Court
<b>1.</b>	<b>GENERAL / ADMINISTRATION</b>		
1.1.	<b>Project Goals, Objectives, &amp; Strategies</b> 21Oct22 – NV5 to review the sheet and resurrect during construction.	INFO	Team
1.2.	5Mar21 – Graham Team	CLOSED	
1.3.	5Mar21 – NV5 Transition	CLOSED	
1.4.	<b>Contracting Realignment</b> 4Nov22 – With USDA for signature.	IN PROGRESS	
<b>2.</b>	<b>SCHEDULE</b>		
2.1.	<b>4-Month Look Ahead Schedule</b>	INFO	
2.2.	<b>In-Person Meetings – as noted at the end of meeting minutes.</b>	INFO	
2.3.	<b>Overall Project Schedule</b>	INFO	
<b>3.</b>	<b>BUDGET</b>		
3.1.	Budget Development	CLOSED	
3.2.	Medical Equipment (Major and Minor) (moved to item 4.12)	CLOSED	
3.3.	DZA Feasibility Study	CLOSED	
3.4.	<b>Financing.</b> 4Nov22 – Team is gathering final information requested by financing (USDA, etc.). 18Nov22 – NV5 is working with Gary, David and USDA to clarify costs to date.	INFO	
<b>4.</b>	<b>PROCUREMENT / OWNER-LED ACTIVITIES</b>		
4.1.	GC/CM RFP	CLOSED	
4.2.	<b>Furniture &amp; Demonstration Furniture</b> 18Nov22 – PMH returned comments from the Fair to OpenSquare for their consideration. 2Dec22 – Need to review feedback from fair with OpenSquare and PMH Admin on 12/13/22. NV5 to coordinate with OpenSquare.	INFO	
4.3.	Site Clearing	CLOSED	
4.4.	Geotechnical Engineer	CLOSED	
4.5.	Commissioning Agent	CLOSED	
4.6.	Security Design Consultant	CLOSED	

Owner Team Meeting Minutes

4.7.	<b><u>New Facility Operational Meetings</u></b> 04Mar22 – Team to commence meetings within the coming months.	INFO	NV5, Merry
4.8.	bcDG Contract	CLOSED	
4.9.	<b><u>Landscape Consultant</u></b> 11Mar22 – The Foundation would like to incorporate a donor patio/bricks, etc., and would like to know when the landscape contractor will be engaged. As of now, plan is to contract with them during April MACC process. Team to involve the Foundation thereafter. 22Apr22 – Graham received one bid for this work. (PMN) Graham indicates the bid was not compliant and therefore they did not accept it. 6May22 – Close out pending new contractor. 13May22 – PMH requests wildflower planting on fallow parts of the property, as part of the final site landscaping. 17Jun22 – Adam to send plan to Bouten. PMH needs a reasonably landscaped site but understands there might be potential to continue to enhance the landscaping once construction is complete. 5Aug22 – Bouten spoke with prospective landscaping, who recommended that any seeded areas also be irrigated. This is best addressed by the landscape design-build team once they are onboard as a subcontractor, though. 2Dec22 – Bouten to facilitate a meeting with PMH and project team to finalize landscaping scope (drop dead date ~Sept. 2023).	INFO	
4.10.	<b><u>Telecommunications Provider</u></b> 6May22 – PMH working on existing facility contract. USAC funding cannot apply until a facility is constructed, so PMH will proceed without USAC financing. 2Dec22 – NV5 to restart conversations on installation.	INFO	NV5
4.11.	Flooding from Neighbor	CLOSED	NV5

Owner Team Meeting Minutes

4.12.	<p><b>Medical Equipment (Major and Minor)</b>            14Jan22 – We need to competitively bid all new equipment (lights/booms (Stryker), imaging). Note: lights from current ORs will be moved to new Procedure Rooms, for example. RBA advises against bidding the Steris system and Pyxis system. Need to provide specific dates for “required on site” for all equipment.            04Mar22 – NV5 to check in with RBA for next steps.            11Mar22 – NV5 is conducting a meeting with RBA on 3/17.            18Mar22 – Meeting was moved to 3/18.            8Apr22 – Next steps occur after MACC is approved.            6May22 – Adam to check with RBA on updated budget pricing. PMH may increase leased equipment by an additional \$1.4MM.            13May22 – RBA will revisit their cost estimate and send to team for review. They will also review lease options to capture the additional \$1.4MM in leasing PMH would like to pursue.            20May22 – NV5 to check on RBA progress.            3Jun22 – R&amp;B sent a list of proposed leased equipment. NV5 to send to Steve, Dave, Merry, Craig. PMH is also working on reusing more imaging equipment vs. buying or leasing new.            17Jun22 – Adam to send to Gary. PMH team to review internally and determine which items are appropriate. NV5 to add this review to the on-site agenda for board week.            24Jun22 – NV5 to review lease list from David.            22Jul22 – RBA stresses the importance of executing procurement contracts this year to avoid unpredictable price increases.            2Dec22 – Need to review imaging scope and status,</p>	IN PROGRESS	NV5
4.13.	<p><b>Food Service Equipment</b>            29Jul22 – NV5 will procure a FSE vendor once NTP date is set.            5Aug22 – Team reviewed FSE plans with Morrison, who provided minor comments.            2Dec22 – bcDG needs to know if we are switching from quarry tile in the kitchen. David Rollins is working with Morrison to make a determination.</p>	INFO	PMH
4.14.	<p><b>Imaging Equipment</b>            18Nov22 – NV5 to send out email with summary on imaging needs etc.</p>	IN PROGRESS	NV5
<b>5.</b>	<b>DESIGN / PERMITTING</b>		
5.1.	Annexation & Zoning	CLOSED	
5.2.	Certificate of Need	CLOSED	
5.3.	Water & Sewer (City)	CLOSED	
5.4.	<p><b>City Permit Review</b>            18Nov22 – On November 10, the City issued the full building permit.            2Dec22 – PMH to issue a check to the City for inspection deposit on Monday, December 5.</p>	INFO	PMH

Owner Team Meeting Minutes

5.5.	<p><b>State Permit Review</b> 21Oct22 – The team met with the Dept of Health on 10/18 and 10/19 to review the project. The DoH subsequently issued an authorization to proceed with excavation and foundation work. The team is hopeful that DoH will issue A2BC within the next two weeks given their feedback during the meetings. 18Nov22 – On November 8, the DoH issued A2BC, which authorized the project to proceed into construction. PMH needs updated functional program that addresses all comments in the review document—especially in the clinic area “Clinical Health Risk Assessment (HRA)”. PMH to update functional program accordingly. Sean Otley is CNO and Ken Peters is Facilities at Chelan; Bouten to share their contact information with Merry Fuller.</p>	IN PROGRESS	bcDG, PMH
5.6.	Electric Service	CLOSED	
5.7.	Program Review	CLOSED	
5.8.	<p><b>Nurse Server Mockup</b> 2Dec22 – Bouten will show this to PCI for their information. Bouten also plans a mockup of the headwall and nurse server prior to construction.</p>	INFO	Bouten
5.9.	NV5 DD Review	CLOSED	
5.10.	<p><b>Design Progress Update</b> 4Nov22 – Conformed set will be issued on 11/11/22. 18Nov22 – Review set sent on 11/11; bcDG working on revisions to this set and will reissue it next week. Imaging Suite will be issued as a Pricing Request (PR).</p>	IN PROGRESS	bcDG
5.11.	<p><b>SVID coordination</b> 18Nov22 – 10" supply work complete. 12/5 ETA on SVID materials (manholes and culvert ends). Bouten working on finalizing quantities with Jason (ECWE), SVID and Big D's on final quantities for all pipe materials and will provide ETA EOD today.</p>	IN PROGRESS	Bouten
5.12.	PAR Process	CLOSED	
5.13.	<p><b>Traffic Study</b> 4Nov22 – Team would like ICE to review the proposed cost \$55,000 for the stop signs, including nuance of PMH being a public entity/funded. bcDG coordinating with TranspoGroup on this. 18Nov22 – bcDG (Kurt) to report back on verifying the \$55k figure with TranspoGroup. 2Dec22 – bcDG to report back on status of ICE.</p>	IN PROGRESS	TranspoGroup
5.14.	Helipad	CLOSED	
5.15.	Pneumatic Tube System	CLOSED	
5.16.	<p><b>USDA Review</b> 4Nov22 – NV5 to check with USDA re Precon Conf. ahead of A2BC. NV5 to coordinate preconstruction conference agenda. 18Nov22 – On 11/16/2022, USDA indicated that Notice to Proceed could be issued to Bouten. PMH is still waiting for USDA to distribute a fully executed copy of Bouten’s contract, as well as USDA 1942-A Guide 18 page 8 “Rural Development Concurrence” form. 2Dec22 – USDA provided full concurrence with both Bouten’s contract and the overall notice to proceed. NV5 and PMH to continue the coordination with USDA to resolve their “spent to date” documentation needs.</p>	IN PROGRESS	NV5, PMH

Owner Team Meeting Minutes

5.17.	<b>Bulk Oxygen System</b> 4Nov22 – Team to review Oxarc proposal for engineered drawings and proceed accordingly, though this should not be a requirement for A2BC. Bouten needs slab penetrations info prior to construction. 18Nov22 – NV5 returned signed proposal to Oxarc. NV5 to check with Oxarc on timing of deliverable.	IN PROGRESS	Oxarc
5.18.	New Address	CLOSED	
5.19.	Lot Consolidation of Site	CLOSED	
5.20.	Benton County Noxious Weed Mitigation	CLOSED	
5.21.	Stormwater Permit (SWPPP)	CLOSED	
5.22.	<b>Development Agreement</b> 18Nov22 – Team met and finalized draft; NV5 to share with PerkinsCoie today for their final review, then send to the City.	IN PROGRESS	NV5
5.23.	<b>Signage</b> 2Dec22 – Need to coordinate with DOT to change highway signage.	INFO	NV5
<b>6.</b>	<b>PRE-CONSTRUCTION</b>		
6.1.	Value Engineering (VE) Process	CLOSED	
6.2.	ECCM/MCCM Procurement	CLOSED	
6.3.	Preconstruction Contract Amendment	CLOSED	
6.4.	CM Estimating	CLOSED	
6.5.	Early Procurement	CLOSED	
6.6.	MACC prep	CLOSED	
6.7.	Construction Commencement	CLOSED	
6.8.	Building Permit – See item 5.4 above.	CLOSED	
6.9.	Graham Wind-Down	CLOSED	
6.10.	Groundbreaking Ceremony	CLOSED	
6.11.	Team Management	CLOSED	
6.12.	<b>Builder’s Risk Insurance</b> 2Dec22 – Bouten to share a copy of the policy with NV5 when it is executed. Need to review coverage of owner-furnished equipment; NV5 to get a cost from RBA on value of equipment that will be installed. Mac to determine if PMH can pay direct.	INFO	Bouten
6.13.	Owner-Architect-Contractor (OAC) Meeting Cadence	CLOSED	
6.14.	<b>Constructability Review</b> 4Nov22 – There are still open comments from Bouten’s third-party constructability reviewer. Bouten to share with the team for review and incorporation. 18Nov22 – Mac (Bouten) to circle back with their 3 <sup>rd</sup> party reviewer; likely week of 11/28. 2Dec22 – Nick will reach out to design team after they meet with reviewer. This needs to happen before bcDG is “pencils down” with the project in early Q1 2023.	IN PROGRESS	Bouten, bcDG
6.15.	<b>BPUD Coordination</b> 4Nov22 – NV5 and Bouten to coordinate with BPUD re permanent power. Need to greenlight BPUD before 12/22/2022 or else pricing expires. BPUD proposes an alternative route which would provide redundant power. 18Nov22 – Power trenches need to be in place prior to 12/22 so that BPUD can start work on 12/22. The revised route would need to be resolved before then. NV5 to review today. 2Dec22 – Team recommends proceeding with BPUD’s proposed loop feed. ECE to update the site plan to show new route. The easement agreement currently in place between BPUD and PMH is a blanket agreement and will cover this additional loop feed.	IN PROGRESS	ECE



Owner Team Meeting Minutes

6.16.	USDA/Project Signage	IN PROGRESS	Bouten, PMH
6.17.	<b>Draft SOV Review</b> 18Nov22 - NV5 to respond today. 2Dec22 - Bouten needs before Monday.	12/5/22	NV5
6.18.	<b>OACs at Whitehead</b> 2Dec22 - Future team meetings under the Owner-Architect-Contractor format, or "OAC", will be held in the Whitehead conference room until Bouten has a site office large enough to accommodate all attendees.	INFO	

The above represents the writer's understanding of the items discussed and/or conclusions reached. It is requested that any questions, comments, omissions, and/or errors to these meeting minutes be directed in writing to this office within three (3) business days. Please contact NV5.

**Next Online Meeting**

**Date:** [Tuesday, December 13, 2022, at 12:00pm CT / 11:00am MT / 10:00am PT; Whitehead Conf. Room](#)

**Upcoming In-Person Meetings**

[None noted.](#)

[NB: Cookie competition on Thursday 12/15!! Need 3 dozen if you want to participate.](#)

**Prosser Memorial Health  
Replacement Hospital**



**4 Month Outlook**

**DECEMBER 2022**

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
27	28	29	30	01	02	03
					PROJECT TEAM MEETING	
04	05	06	07	08	09	10
11	12	13	14	15	16	17
		OAC / CONSTRUCTION MEETING (TBD)				
		BOARD WORKSESSION		BOARD MEETING		
18	19	20	21	22	23	24
25	26	27	28	29	30	31
	CHRISTMAS (OBS.)					
01	02	03	04	05	06	07

**JANUARY 2023**

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
01	02	03	04	05	06	07
	NEW YEAR'S DAY (OBS.)	OAC / CONSTRUCTION MEETING (TBD)			PROJECT TEAM MEETING (TBD)	
08	09	10	11	12	13	14
					PROJECT TEAM MEETING (TBD)	
15	16	17	18	19	20	21
		OAC / CONSTRUCTION MEETING (TBD)			PROJECT TEAM MEETING (TBD)	
22	23	24	25	26	27	28
		BOARD WORKSESSION		BOARD MEETING		
29	30	31	01	02	03	04
05	06	07	08	09	10	11
				Items to be rescheduled:		
				NEW FACILITY OPERATIONAL MEETING (NV5-Led)	NEW FACILITY OPERATIONAL MEETING (Merry-Led)	

**LEGEND**

IN PERSON MEETING NV5 & BCDG ON SITE UNLESS OTHERWISE NOTED	ONLINE MEETING	PMH MEETING NO ATTENDANCE BY PROJECT TEAM	HOLIDAY
	DELIVERABLE		FOR BOARD APPROVAL

4 Month Outlook

**FEBRUARY 2023**

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
29	30	31	01	02	03	04
					PROJECT TEAM MEETING (TBD)	
05	06	07	08	09	10	11
		OAC / CONSTRUCTION MEETING (TBD)			PROJECT TEAM MEETING (TBD)	
12	13	14	15	16	17	18
					PROJECT TEAM MEETING (TBD)	
19	20	21	22	23	24	25
		OAC / CONSTRUCTION MEETING (TBD)				
		BOARD WORKSESSION		BOARD MEETING		
26	27	28	01	02	03	04
05	06	07	08	09	10	11

**MARCH 2023**

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
26	27	28	01	02	03	04
					PROJECT TEAM MEETING (TBD)	
05	06	07	08	09	10	11
		OAC / CONSTRUCTION MEETING (TBD)			PROJECT TEAM MEETING (TBD)	
12	13	14	15	16	17	18
					PROJECT TEAM MEETING (TBD)	
19	20	21	22	23	24	25
		TEAM CHECK IN (5-week month)			PROJECT TEAM MEETING (TBD)	
26	27	28	29	30	31	01
		OAC / CONSTRUCTION MEETING (TBD)		BOARD MEETING		
02	03	04	05	06	07	08



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## JOB MEMORANDUM

<b>TO:</b> Project Team	<b>DATE:</b> December 1, 2022
<b>ATTENTION:</b> Paul Kramer & Adam Trumbour	<b>PROJECT:</b> PMH Replacement Hospital Prosser Memorial Health Prosser, WA
<b>FROM:</b> Mac McGrath, Craig Niemela & Josh Belt	
<b>SUBJECT:</b> Schedule Baseline - December	<b>BOUTEN PROJECT NO.:</b> K-825

Attached please find the current baseline schedule for the project, covering through projected final completion March 12, 2025. Per the issued Notice to Proceed, Bouten has a substantial completion date of November 21, 2024.

The attached baseline schedule reflects we are not maintaining the contractual substantial completion date of November 21, 2024. The schedule narrative accompanying the update describes progress, as well as details of delays that have occurred. A summary of these items is included here:

Per the September 27, 2022, Exhibit C contract schedule Bouten was projecting Notice to Proceed (NTP) on October 24, 2022, with mobilization activities following and 'formal' commencement of construction on November 14, 2022, which were indicated by Activities 44-52, reference Fig. 1 next page. The Exhibit C substantial completion date was set for 2 years after commencement on November 14, 2024. A delay beyond Bouten's control occurred when USDA withheld their concurrence to commence construction, during which time the NTP was not issued and mobilization activities were not approved by PMH. The USDA delay remained in effect until an NTP was issued on November 18, 2022. The NTP was issued and adjusted the commencement (Activity 52) from November 14, 2022, to November 21, 2022, and the substantial completion from November 14, 2024, to November 21, 2024. An updated Exhibit C schedule was sent on November 18, 2022, with the USDA delay added as Activity 44 to reflect the actual issuance of the NTP, reference Fig. 2 next page. Once the mobilization activities that were delayed were accounted for the new substantial completion date is December 13, 2024. This discrepancy and change of dates were discussed and agreed upon by Paul Kramer on November 21, 2022, and the contractual change of date will occur with the PR-01 Conformed Drawings request.

The critical path currently runs through the two-story concrete structure, interior rough-ins of all areas, and the interior finishes of Area A & E. The baseline schedule has been populated by Bouten with the input of all the trade partners. Additional trade partner validation of the schedule will occur through pull plans that will precede the start of each area/scope of work by 60-90 days throughout the project. Additional information will be provided by Bouten as we continue to buildout important procurement items, sequencing nuances, and key owner scopes.

There are no current schedule concerns as early procurement efforts were undertaken for air handling units and chillers. High priority procurement items that may become schedule concerns include remaining HVAC equipment, electrical gear, and generators.

Per the Exhibit C schedule and baseline schedule issuance Bouten has included a weather bank of fifteen days. Weather bank days, when used, will be communicated through the project OAC meetings and removed from the schedule.

If you have any questions or comments regarding this schedule update, please let me know.

PMH REPLACEMENT HOSPITAL – SCHEDULE

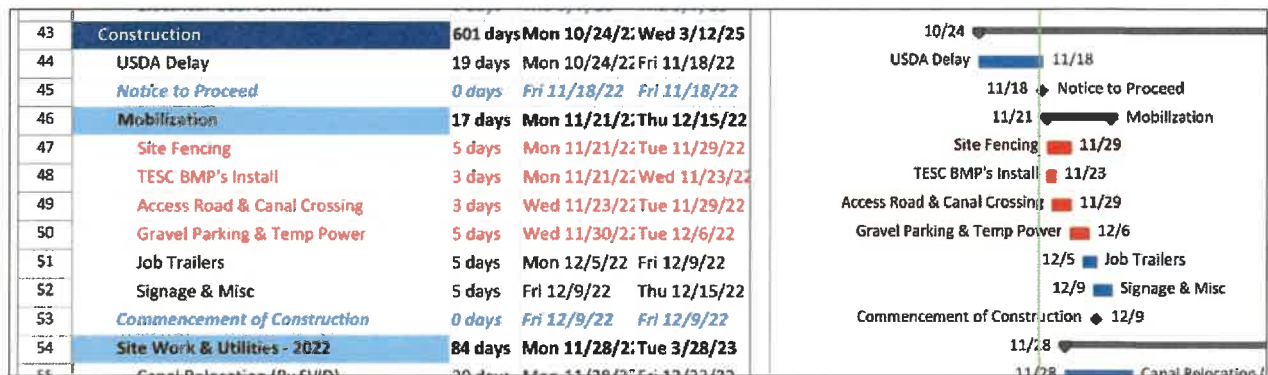
December 1, 2022

Page 2

Fig. 1 – Exhibit C Schedule Dated 09/27/2022:



Fig. 2 – Exhibit C Schedule Dated 11/18/2022:











BASELINE CONSTRUCTION SCHEDULE

ID	Task Name	Start	Finish	Units/Total	Start	Finish	Units/Total	Start	Finish	Units/Total
175	Decking & Ledger	Fri 6/16/23	Thu 6/22/23	302	0 days					
176	Misc Steel	Thu 6/15/23	Mon 6/19/23	303	3 days					
177	Area A Complete	Thu 6/22/23	Thu 6/22/23	1631	0 days					
178	Area C	Fri 6/16/23	Mon 7/30/23	309	1 day					
179	Unload & Shakeout Steel	Fri 6/16/23	Mon 6/19/23	1685	1 day					
180	Structural Steel Erection	Mon 6/19/23	Thu 6/29/23	310	1 day					
181	Welding Activities	Wed 6/21/23	Tue 6/27/23	1690	6 days					
182	Decking & Ledger	Fri 6/30/23	Mon 7/10/23	311	4 days					
183	Misc Steel	Thu 6/22/23	Fri 6/23/23	313	19 days					
184	Area C Complete	Mon 7/10/23	Mon 7/10/23	1691	9 days					
185	Area D	Fri 6/30/23	Mon 7/24/23	314	1 day					
186	Unload & Shakeout Steel	Fri 6/30/23	Mon 7/3/23	1691	1 day					
187	Structural Steel Erection	Mon 7/3/23	Thu 7/13/23	315	1 day					
188	Welding Activities	Mon 7/10/23	Fri 7/14/23	1691	1 day					
189	Decking & Ledger	Fri 7/14/23	Mon 7/24/23	316	1 day					
190	Misc Steel	Thu 7/6/23	Thu 7/13/23	318	8 days					
191	Area D Complete	Mon 7/24/23	Mon 7/24/23	1691	1 day					
192	Area B.1 & B.2	Fri 7/14/23	Wed 8/2/23	319	16 days					
193	Unload & Shakeout Steel	Fri 7/14/23	Mon 7/17/23	1691	16 days					
194	Structural Steel Erection	Mon 7/17/23	Fri 7/21/23	320	16 days					
195	Welding Activities	Wed 7/19/23	Tue 7/25/23	1700	39 days					
196	Decking & Ledger	Thu 7/20/23	Mon 7/24/23	321	16 days					
197	Steel Stairs	Tue 7/25/23	Thu 7/27/23	322	39 days					
198	Misc Steel	Fri 7/28/23	Wed 8/2/23	323	39 days					
199	Area B.1 & B.2 Completed	Wed 8/2/23	Wed 8/2/23	1701	39 days					
200	Area E & F	Tue 9/5/23	Mon 10/2/23	324	0 days					
201	Unload & Shakeout Steel	Tue 9/5/23	Wed 9/6/23	1691	0 days					
202	Structural Steel Erection	Thu 9/7/23	Wed 9/20/23	325	0 days					
203	Welding Activities	Tue 9/12/23	Mon 9/25/23	1691	17 days					
204	Decking & Ledger	Tue 9/19/23	Mon 9/25/23	326	0 days					
205	Steel Stairs	Mon 9/25/23	Wed 9/27/23	327	17 days					
206	Misc Steel	Wed 9/27/23	Mon 10/2/23	328	17 days					
207	Area E & F Complete	Mon 10/2/23	Mon 10/2/23	1701	17 days					
208	Canopies & Misc	Fri 12/8/23	Tue 1/23/24	344	73 days					
209	North Canopy (Stand Alone)	Fri 12/8/23	Mon 12/18/23	1701	36 days					
210	West Canopy (Stand Alone)	Fri 1/12/24	Tue 1/23/24	1701	73 days					
211	Canopies Structural Steel Complete	Tue 1/23/24	Tue 1/23/24	1701	73 days					
212	Building Envelope	Fri 6/23/23	Fri 2/9/24	49	0 days					
213	Area A	Fri 6/23/23	Tue 8/15/23	50	0 days					
214	South Elevation	Fri 6/23/23	Wed 7/19/23	1411	0 days					
215	Fireproofing	Fri 6/23/23	Mon 6/26/23	1701	0 days					
216	Exterior Framing	Tue 6/27/23	Thu 6/29/23	1411	0 days					
217	Exterior Sheathing	Fri 6/30/23	Mon 7/9/23	1411	22 days					
218	Weather Barrier	Wed 7/5/23	Thu 7/6/23	1411	22 days					
219	MEPP Rough In	Fri 7/7/23	Mon 7/10/23	1434	24 days					
220	Exterior Window System	Fri 7/7/23	Tue 7/31/23	1411	22 days					
221	Install Window Frames	Fri 7/7/23	Wed 7/12/23	1421	22 days					
222	Install Glass	Thu 7/13/23	Tue 7/18/23	1421	41 days					
223	EIFS	Thu 7/13/23	Wed 7/19/23	1411	22 days					
224	West Elevation	Tue 6/27/23	Wed 7/26/23	1421	1 day					
225	Fireproofing	Tue 6/27/23	Wed 6/28/23	1701	1 day					
226	Exterior Framing	Fri 6/30/23	Wed 7/5/23	1421	0 days					
227	HM Frames	Wed 7/5/23	Wed 7/5/23	1431	16 days					

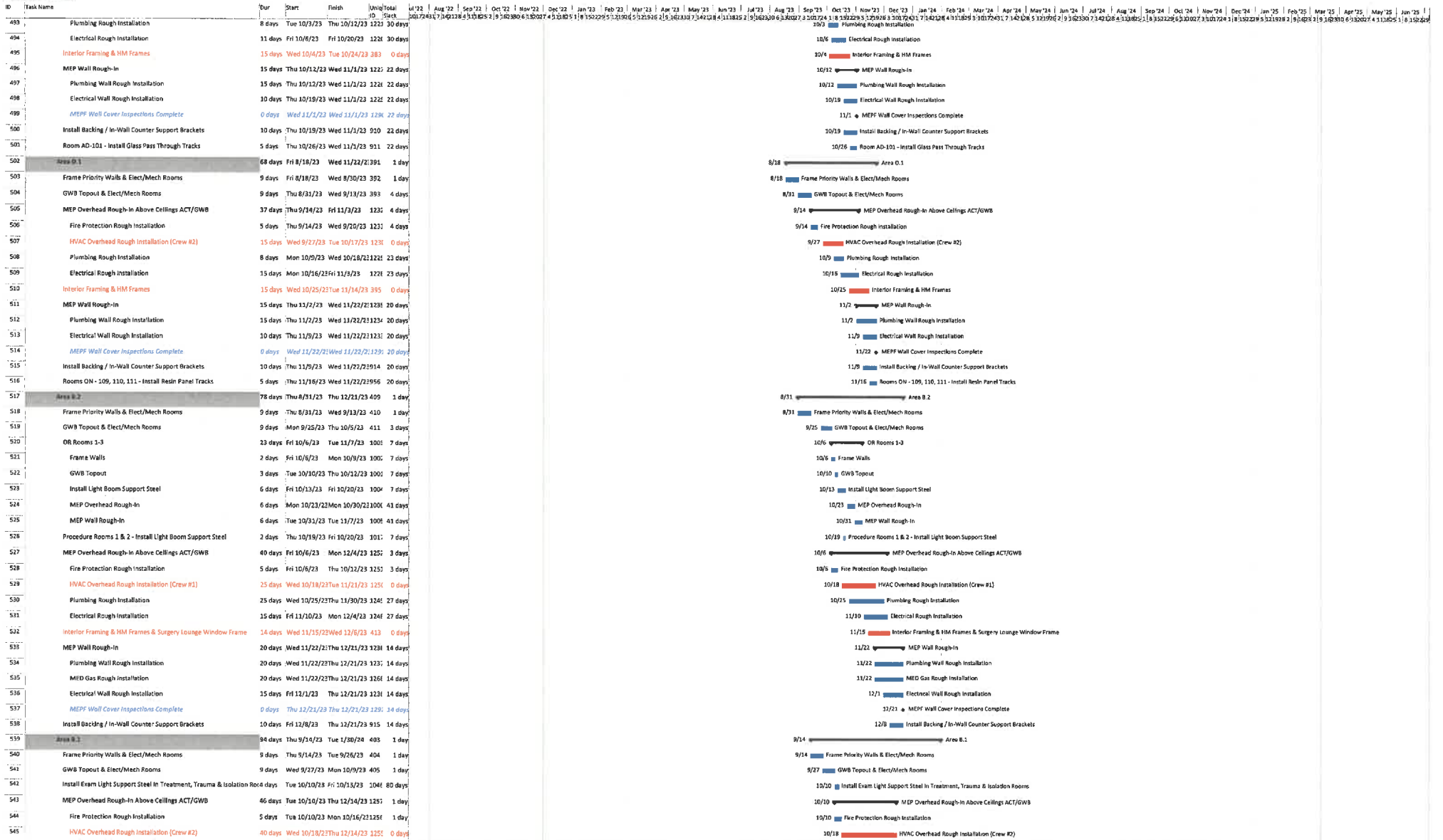


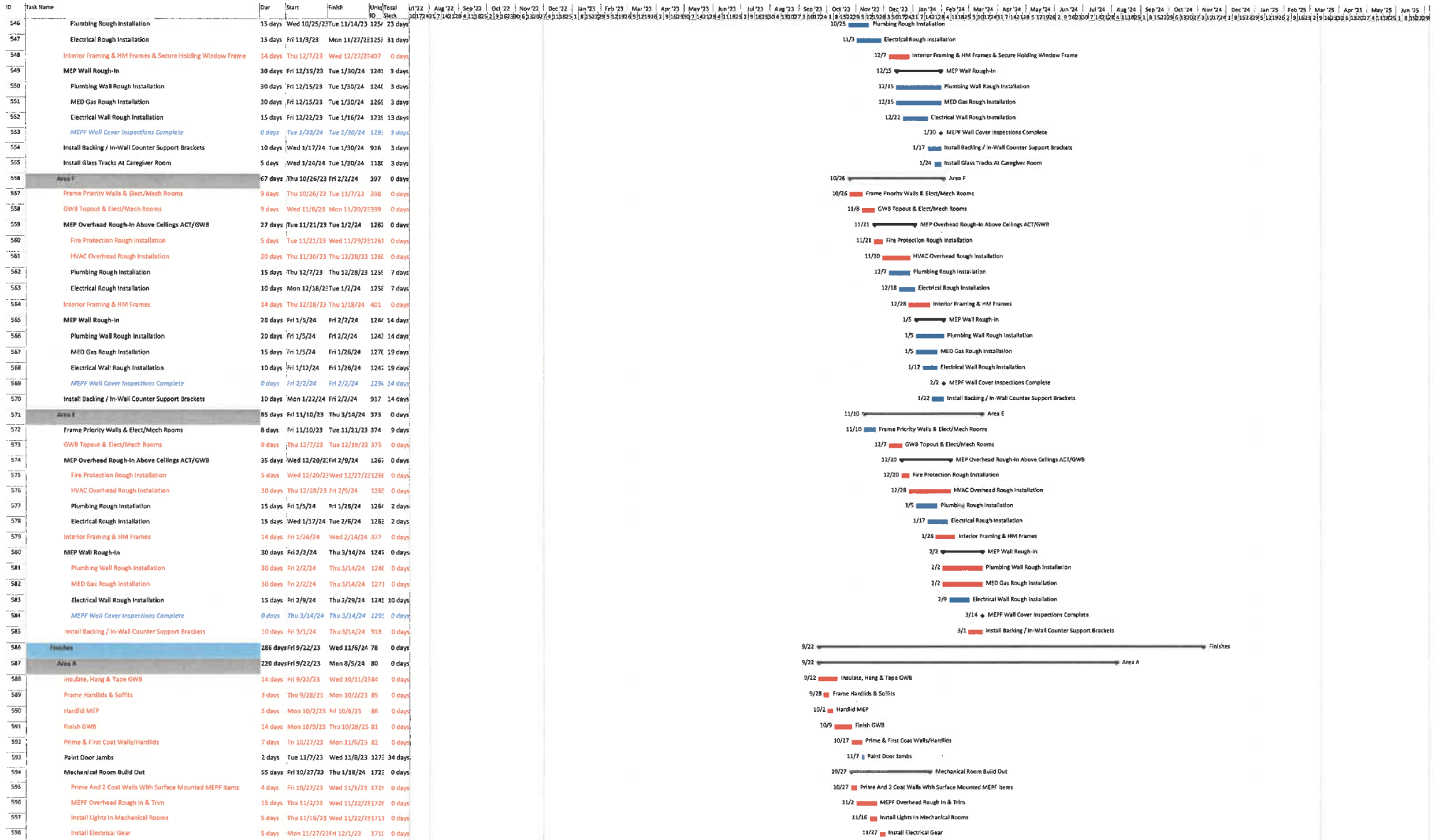
















ID	Task Name	Dur	Start	Finish	Units/Total	Sheet
652	Measure/Fab Countertops	15 days	Mon 12/13/23	Tue 1/2/24	1375	21 days
653	Install Countertops	7 days	Wed 1/3/24	Thu 1/11/24	1378	21 days
654	MEPF Trim - Casework	5 days	Fri 1/12/24	Fri 1/19/24	1400	21 days
655	Power On In This Area	0 days	Thu 11/30/23	Thu 11/30/23	1400	32 days
656	Ceiling Grid MEPF Trim	10 days	Thu 11/30/23	Wed 12/13/23	1377	22 days
657	Install Lights	5 days	Thu 11/30/23	Wed 12/6/23	1377	22 days
658	Install Sprinkler Heads	3 days	Tue 12/5/23	Thu 12/7/23	1371	22 days
659	Install Fire Alarm	3 days	Wed 12/6/23	Fri 12/8/23	1365	22 days
660	Install HVAC GRD's	5 days	Thu 12/7/23	Wed 12/13/23	1370	22 days
661	Install ACT Tile	4 days	Thu 12/7/23	Tue 12/19/23	1361	22 days
662	Install Floor Tile & Base	15 days	Wed 12/20/23	Thu 1/11/24	1361	22 days
663	Install Wall Protection	3 days	Fri 1/12/24	Wed 1/17/24	1361	29 days
664	Install Epoxy Floor In Janitor Closet	3 days	Fri 1/12/24	Wed 1/17/24	1361	22 days
665	Door And Hardware Install	3 days	Tue 1/16/24	Thu 1/18/24	1351	22 days
666	Final Paint Walls/Hardlids	4 days	Mon 1/22/24	Thu 1/25/24	1381	21 days
667	Install Corner Guards	2 days	Fri 1/26/24	Mon 1/29/24	1380	21 days
668	Construction Clean Area	3 days	Tue 1/30/24	Thu 2/1/24	1381	21 days
669	Install Kitchen Equipment	20 days	Fri 2/2/24	Thu 2/29/24	1364	21 days
670	Kitchen Equipment Hook Up	15 days	Fri 3/3/24	Thu 3/21/24	1371	21 days
671	Kitchen Complete	0 days	Thu 3/21/24	Thu 3/21/24	1400	21 days
672	Men & Womens Restroom	30 days	Mon 11/27/23	Tue 1/9/24	846	34 days
673	Prime & First Coat Walls/Hardlids	2 days	Mon 11/27/23	Tue 11/28/23	849	34 days
674	Install Floor & Wall Tile	10 days	Wed 11/29/23	Tue 12/12/23	848	34 days
675	Measure/Fab Countertops	15 days	Wed 12/13/23	Thu 1/4/24	1431	64 days
676	Install Countertops	1 day	Fri 1/5/24	Fri 1/5/24	1411	64 days
677	Install Partitions	2 days	Wed 12/13/23	Thu 12/14/23	847	34 days
678	Install MEPF Trim	2 days	Fri 12/15/23	Mon 12/18/23	856	34 days
679	Install Bathroom Accessories	2 days	Tue 12/19/23	Wed 12/20/23	854	34 days
680	Final Paint Walls/Hardlids	2 days	Thu 12/21/23	Fri 12/22/23	855	34 days
681	Install Sinks	2 days	Mon 1/8/24	Tue 1/9/24	1401	64 days
682	Common Area	178 days	Thu 11/30/23	Mon 8/12/24	1381	1 day
683	Ceiling Grid (ACT)	4 days	Thu 11/30/23	Tue 12/5/23	844	27 days
684	Reception & Gift Shop Casework	5 days	Wed 12/6/23	Tue 12/12/23	843	50 days
685	Install Wall Protection	3 days	Wed 12/13/23	Fri 12/15/23	841	50 days
686	Measure/Fab Countertops	15 days	Wed 12/13/23	Thu 1/4/24	1321	60 days
687	Install Countertops	5 days	Fri 1/5/24	Thu 1/11/24	1321	60 days
688	Install Wall Tile At Casework	2 days	Fri 1/12/24	Tue 1/16/24	842	60 days
689	MEPF Trim - Casework	3 days	Wed 1/17/24	Fri 1/19/24	899	60 days
690	Power On To Area	0 days	Wed 12/6/23	Wed 12/6/23	858	37 days
691	Ceiling Grid MEPF Trim	10 days	Wed 12/6/23	Tue 12/19/23	839	27 days
692	Install Lights	5 days	Wed 12/6/23	Tue 12/12/23	838	27 days
693	Install Sprinkler Heads	3 days	Mon 12/11/23	Wed 12/13/23	837	27 days
694	Install Fire Alarm	3 days	Tue 12/12/23	Thu 12/14/23	835	27 days
695	Install HVAC GRD's	5 days	Wed 12/13/23	Tue 12/19/23	836	27 days
696	Install ACT System Tile	8 days	Wed 12/20/23	Tue 1/2/24	1054	27 days
697	Install ACT Tile	4 days	Wed 12/20/23	Tue 12/26/23	834	27 days
698	Install Wood ACT Tile	4 days	Wed 12/27/23	Tue 1/2/24	1051	27 days
699	Install Laminate Panels On Ceilings	6 days	Wed 1/3/24	Wed 1/10/24	850	53 days
700	Install Terrazzo Flooring System	18 days	Wed 1/3/24	Mon 1/29/24	1277	27 days
701	Install Flooring	9 days	Tue 1/23/24	Fri 2/2/24	833	27 days
702	Door And Hardware Install	3 days	Fri 2/2/24	Tue 2/6/24	832	48 days
703	MEPF Trim - Wall & Ceiling	5 days	Mon 2/5/24	Fri 2/9/24	896	27 days
704	OFI	10 days	Mon 2/5/24	Fri 2/16/24	829	27 days





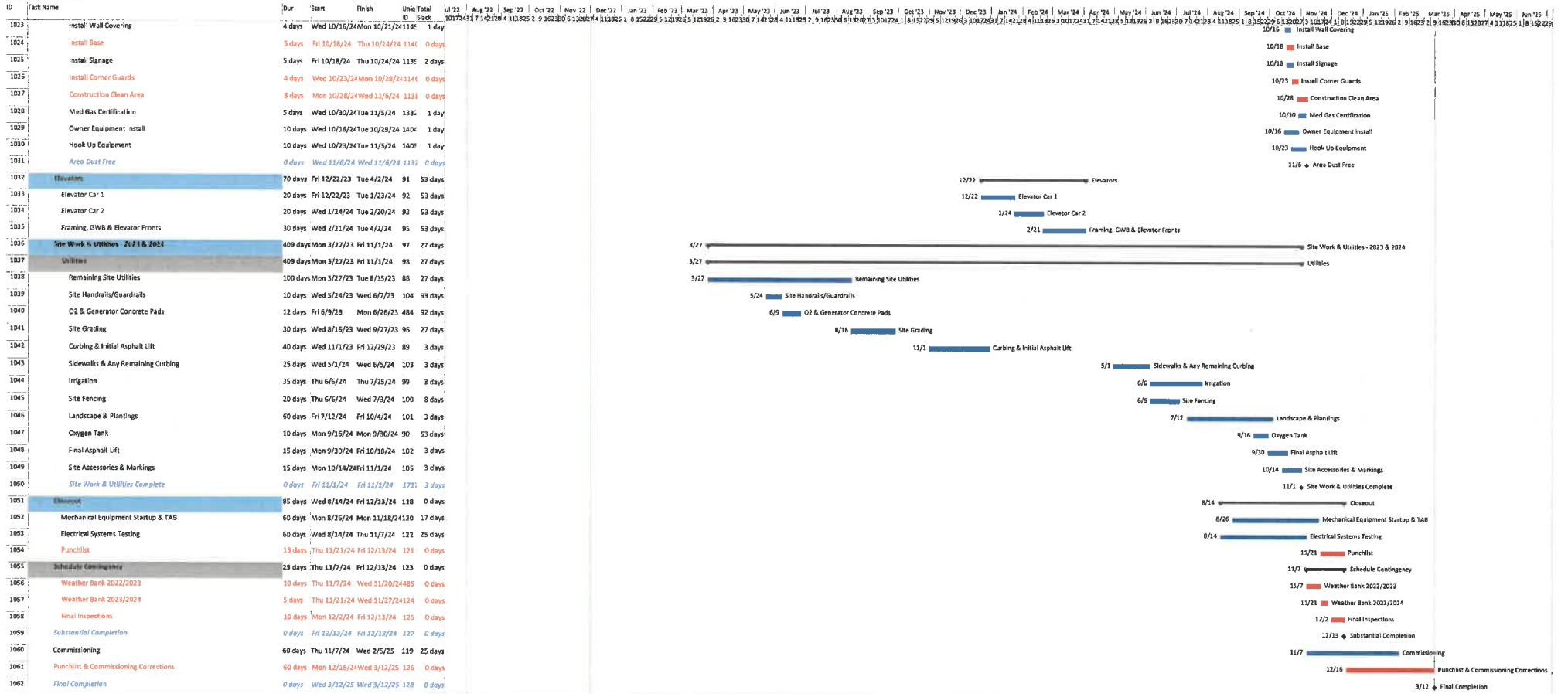












**TO: INTERESTED PARTIES**

**FROM: GARY HICKS**

**DATE: DECEMBER 6, 2022**

**RE: PROSSER PUBLIC HOSPITAL DISTRICT, BENTON COUNTY, WASHINGTON  
USDA RURAL DEVELOPMENT DIRECT LOAN & INTERIM CONSTRUCTION LOAN  
FINANCE & PROJECT SCHEDULE**

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The following is a revised finance and project schedule for the above-referenced financing to assist financing team members in planning for critical dates and events. Please contact me at your earliest convenience should any of the dates indicated present a problem for any interested party. All times noted below are Pacific Time.

<u>DATE</u>	<u>TASK TO BE COMPLETED</u>
November 8, 2018	* Pre-application submitted to USDA for review.
February 5, 2019	* USDA Rural Development reviewed pre-application and invited District to submit final application.
February 5, 2021	* RFP for underwriters/placement agents sent to selected firms.
February 12, 2021	* Draft feasibility study send to District for review and comment.
February 17, 2021	* District comments to DZA on feasibility study.
February 18, 2021	* Underwriters/placement agents submit proposals.
March 1, 2021	* Draft of PAR sent to USDA for review and comment.
March 9, 2021	* Draft of feasibility study sent to USDA for review and comment.
March 12, 2021	* Project appraisal sent to USDA for review and comment.
March 19, 2021	* Draft environmental assessment sent to USDA for review and comment.
March 22, 2021	* Updated cost estimate for the Project provided by the Project Manager.
March 25, 2021	* Send feasibility study and other documents to the District to be reviewed by the Board at the Board of Commissioners meeting on April 1, 2021.
April 1, 2021 6:30 p.m.	* District Board meeting – approval of USDA application components. Approve feasibility study and select underwriters/placement agent.
April 2, 2021	* Formal application submitted to USDA for review and consideration.
May 19, 2021	* District publishes 1 <sup>st</sup> USDA approved notice for environmental comments.

**PROSSER PUBLIC HOSPITAL DISTRICT  
FINANCING & PROJECT SCHEDULE  
PAGE 2**

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<b>DATE</b>	<b>TASK TO BE COMPLETED</b>
May 26, 2021	* District publishes 2 <sup>nd</sup> USDA approved notice for environmental comments.
July 21, 2021	* FONSI published in local newspapers.
August 31, 2021	* Interim construction loan and supplemental financing plan of finance determined. Begin work on the Appendix A and Request for Terms.
September 2, 2021	* USDA issues its Letter of Conditions, Letter of Intent to Meet Conditions, and Request for Obligations to the District.
September 3, 2021	* Board Resolution send to the District by Brad Berg.
September 7, 2021 6:00 p.m.	* District Board meeting – review Letter of Conditions from USDA and consider approval of Resolution to proceed forward with USDA Loans.
September 8, 2021	* District executes Letter of Intent to Meet Conditions, Request for Obligation of Funds and other necessary documents, if approved and authorized.
September 9, 2021	* USDA provides updated Letter of Conditions (“LOC”) and Right-of-Way documents.
September 12, 2021	* Distribution of initial draft of the Appendix A.
September 15, 2021 1:30 p.m.	* Meeting with USDA, State Architect, District, finance and project teams.
September 20, 2021 10:00 a.m.	* Financing update and document review call to review the Appendix A.
September 24, 2021	* Distribution of revised draft of Appendix A by G.L. Hicks Financial.
September 27, 2021	* Initial draft of Request for Terms by Piper Sandler.
October 4, 2021	* Initial draft of USDA financing documents by Foster Garvey.
October 8, 2021 10:00 a.m.	* Financing update and document review conference call/meeting.
October 12, 2021	* Distribution of revised draft of Appendix A, USDA financing documents and Request for Terms.
October 18, 2021 10:00 a.m.	* Financing update and document review meeting.

**PROSSER PUBLIC HOSPITAL DISTRICT  
FINANCING & PROJECT SCHEDULE  
PAGE 3**

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<u>DATE</u>	<u>TASK TO BE COMPLETED</u>
October 19, 2021	* Distribution of revised draft of Appendix A and Request for Terms.
October 26, 2021	* Send Request for Terms and Appendix A to prospective interim lenders.
November 9, 2021	* Receipt of bank Term Sheets for interim construction financing.
November 10, 2021 2:00 p.m.	* Evaluate Term Sheets received. Decision to recommend a private placement or a public offering of BANs for the interim construction financing.
November 11, 2021	* Send materials to the District for inclusion in Board member packets, including an analysis of Term Sheets received and preferred Term Sheet.
November 12, 2021	* Send recommended Term Sheet to USDA if private placement is selected.
November 16, 2021 6:00 p.m.	* District Board meeting – review of financing status and review of analysis of Term Sheets for construction financing and decision on financing options.
December 15, 2021	* Distribution of interim construction loan documents and Note Resolution (the “Financing Documents”) by Stacie Amasaki.
January 5, 2022 10:00 a.m.	* Initial financing update and document review conference call/virtual meeting.
January 7, 2022	* Distribution of revised Financing Documents.
January 18, 2022 10:00 a.m.	* Final financing update and document review conference call/ meeting.
January 19, 2022 9:00 a.m.	* USDA update and LOC review conference call/ meeting.
January 19, 2022	* Send Note Resolution and other documents to the finance team and send the Note Resolution to the District for inclusion in Board member packets.
January 25, 2022	* Construction documents (100% CDs) sent to USDA for review and approval.
January 25 & 27, 2022 6:00 p.m.	* District Board meetings – review and approval of Note Resolution. Send executed Note Resolution to USDA. Update on LOC requirements.
February 1, 2022	* Mini bid opening at the District.
February 2, 2022	* USDA provides letter of intent to Western Alliance.

**PROSSER PUBLIC HOSPITAL DISTRICT  
FINANCING & PROJECT SCHEDULE  
PAGE 4**

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<u>DATE</u>	<u>TASK TO BE COMPLETED</u>
February 3, 2022	* NV5 provides monthly project cash flow draw schedule.
February 4, 2022	* NV5 provides Traffic Impact Study. Piper Sandler provides updated analysis of estimated accrued interest costs during interim construction loan.
February 22 & 24, 2022 6:00 p.m.	* District Board meetings – financing and project updates. Board approval of revised project budget. Authorize submission of USDA revision application.
March 3, 2022	* Final project budget from NV5.
March 8, 2022	* Revised PAR from bcDG.
March 10, 2022	* Receipt of revised Feasibility Study & submit revision application to USDA.
March 22 & 24, 2022 6:00 p.m.	* District Board meetings – review of electrical & mechanical budgets and discussion concerning options for selection of contractors
March 30, 2022	* USDA approves \$13,000,000 additional funding request.
April 6, 2022	* Western Alliance and U.S. Bank approve DACA document.
April 14, 2022	* Bid opening at the Holiday Inn Express in Prosser.
April 14, 2022	* Deliver executed USDA Right-of-Way Certificate.
April 19, 2022	* Final bid opening at the Hospital. Wrap-up bid package. Approval of construction loan by Western Alliance with additional \$13,000,000 funding.
April 20, 2022	* Submit documents to the District for inclusion in Board packets for the April Board meetings.
April 26 & 28, 2022 6:00 p.m.	* District Board meetings – review construction bid results. Approval of amended Note Resolution authorizing \$13,000,000 in additional funding.
May 3, 2022	* District Special Board meeting – review construction bid process and discuss next steps to proceed with bid process and any additional funding required.
May 24 & 26, 2022 6:00 p.m.	* District Board meetings – update on and evaluation of value engineering prospects and other project related discussions.
June 28 & 30, 2022 6:00 p.m.	* District Board meetings – update on GCCM, bid process and design updates. Update on additional funding and USDA process.

**PROSSER PUBLIC HOSPITAL DISTRICT  
FINANCING & PROJECT SCHEDULE  
PAGE 5**

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<b>DATE</b>	<b>TASK TO BE COMPLETED</b>
June 28, 2022	* Deliver executed USDA Right-of-Way Opinion and send with related Certificate to USDA.
July 26 & 28, 2022 6:00 p.m.	* District Board meetings – update on and evaluation of the bid process, value engineering and contract terms.
August 1, 2022	* Advertise construction bid and send bid documents to prospective bidders.
August 23 & 25, 2022 6:00 p.m.	* District Board meetings – update on bid process. Possible Board resolution to approve mini-MACC contract.
August 26, 2022	* Determine source of additional funding (USDA debt, parity revenue bonds, subordinate revenue bonds, operating lease, District reserves, etc.).
August 30, 2022	* Open final construction bids received and begin evaluation of bids. (bid openings also on 8/23, 8/25 and 8/30).
September 1, 2022	* Mitigated Determination of Non-significance/SEPA issued subject to City negotiations on road improvements adjacent to project site.
September 2, 2022	* Establish MACC amount based on bids received and total project cost.
September 2, 2022	* Commence work on revised Feasibility Study by DZA using final costs.
September 5 ,2022	* Begin application and/or financing process to secure additional funding.
September 7, 2022	* Complete evaluation of bids and recommendation of bids received by NV5.
September 7, 2022	* DZA provides draft of revised Feasibility Study for review and comment.
September 8, 2022 6:00 p.m.	* District Special Board meeting – approve MACC final contract price. Approve resolution authorizing submission of revision application to USDA.
September 9, 2022	* Subsequent application submitted to USDA with document package.
September 9, 2022	* Equipment operating lease term sheets due.
September 13, 2022	* DZA provides final revised Feasibility Study and submitted to USDA.
September 19, 2022	* Department of Health issues Certificate of Need.
September 21, 2022	* Analysis of equipment operating lease proposals. Review with District and select two finalists based on term sheets provided. Secure commitments.

**PROSSER PUBLIC HOSPITAL DISTRICT  
FINANCING & PROJECT SCHEDULE  
PAGE 6**

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<b>DATE</b>	<b>TASK TO BE COMPLETED</b>
September 27, 2022	* USDA approval of subsequent applications and issues LOCs (Loan & Grant).
September 27, 2022	* Provide Western Alliance with subsequent Loan LOC and credit package.
September 27 & 29, 2022 6:00 p.m.	* District Board meetings – review and approve MACC and District signs GC contracts. Authorize plan of finance with additional USDA Direct Loan, USDA Grant, interim construction loan and operating lease amounts.
October 4, 2022	* Western Alliance approval of \$80,500,000 interim construction loan.
October 5, 2022	* Draft of revised interim construction revenue bond anticipation note (“BAN”) documents sent to the finance team for review and comment.
October 12, 2022 2:00 p.m.	* Financing update and document review conference call/meeting.
October 13, 2022	* Final interim construction revenue BAN documents sent to the finance team.
October 17, 2022 2:00 p.m.	* Financing update and document review conference call/meeting.
October 25, 2022	* Complete Section I requirements to the LOCs and submit documentation and information to USDA as one complete package.
October 25 & 27, 2022 6:00 p.m.	* District Board meetings – Approval of interim construction BAN financing. Discussion of fixed and variable rate for BAN interim construction financing.
November 7, 2022	* Department of Health approval of final drawings and specifications (A2BC).
November 8, 2022	* City of Prosser issues full building permit.
November 9, 2022	* Washington State DOT approval and receipt of traffic study (ICE).
November 10, 2022 10:00 a.m.	* Preconstruction meeting with USDA at Prosser Memorial Hospital.
November 16, 2022	* USDA approves final plans and indicates District can issue Notice to Proceed to Bouten. District elects to proceed with fixed rate on interim const. loan.
November 18, 2022	* USDA issues written concurrence to proceed with construction and closing of the interim construction loan.
November 21, 2022	* Commencement of construction.

**PROSSER PUBLIC HOSPITAL DISTRICT  
FINANCING & PROJECT SCHEDULE  
PAGE 7**

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<u>DATE</u>	<u>TASK TO BE COMPLETED</u>
November 23, 2022	* On or before this date, Western Alliance sets the fixed interest rate for the interim construction loan. Note finalized with remaining information.
November 23, 2022	* Foster Garvey sends final interim construction loan documents and certificates to finance team for review and signature.
November 29, 2022 11:00 a.m.	* Ground breaking ceremony at project site. Invite USDA and other officials.
November 30, 2022	* Executed documents, certificates and opinions returned to Foster Garvey.
November 30, 2022	* Executed documents, certificates and opinions sent to Western Alliance.
December 2, 2022	* Western Alliance finalizes set-up of interim construction loan on its system.
December 5, 2022 12:00 noon	* Pre-closing conference call with finance team. Invitations to be sent by Piper Sandler to finance team participants.
December 6, 2022	* Interim construction loan closing via email in the morning.
September __, 2024	Request updated term sheets from two leasing company finalists.
November __, 2024	Close equipment operating lease financings.
January __, 2025	Distribution of USDA Revenue & LTGO Bond documents and resolution (the "Direct Loan Documents") to finance team members by Brad Berg.
January __, 2025	Document review and financing update conference call at 10:00 a.m.
January __, 2025	Distribution of revised Direct Loan Documents.
February __, 2025	Document review and financing update conference call at 10:00 a.m.
February __, 2025	Distribution of revised Direct Loan Documents. Send Direct Loan Documents to the District for inclusion in Board packets.
February __, 2025 6:30 p.m.	District Board meeting – review of project and financing status and approve Resolution and Direct Loan Documents for USDA Loans.
February 29, 2025	Completion of construction.



**PROSSER PUBLIC HOSPITAL DISTRICT  
FINANCING & PROJECT SCHEDULE  
PAGE 8**

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<u>DATE</u>	<u>TASK TO BE COMPLETED</u>
March __, 2025	Pre-closing conference call for USDA Loans with the finance team.
March __, 2025	Closing of USDA Loans. Go live to admit patients.

I look forward to working with all those involved with this financing. Should any of the scheduled dates established above for the completion of tasks cause difficulty for any participant, please contact me immediately at (801) 225-0731 to resolve any potential problem areas.

\* Task Completed

## 2023 STRATEGIC PLAN



Prosser Memorial Health

723 MEMORIAL STREET, PROSSER WA 99350

## Table of Contents

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<b>Quality</b> .....	<b>7</b>
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<b>Financial Stewardship</b> .....	<b>11</b>

## ACRONYMS DEFINED:

CEO – Chief Executive Officer

CCO – Chief Communications Officer

CCOO – Chief Clinics Operations Officer

CFO – Chief Financial Officer

CHRO – Chief Human Resources Officer

CIO – Chief Information Officer

CMO – Chief Medical Officer

CNO/COO – Chief Nursing Officer/Chief Operating Officer

CQO – Chief Quality Officer

	Strategic Goal	1-Year Objective Metrics	Objectives/Strategies	Timing	Accountable
<p><b>MISSION</b> Prosser Memorial Health will improve the health of our community.</p> <p><b>VISION</b> Prosser Memorial Health will become one of the top 100 Critical Access Hospitals in the country through the achievement of our Pillars of Excellence:</p> <ul style="list-style-type: none"> <li>• Patient Loyalty</li> <li>• Medical Staff Development</li> <li>• Employee Development</li> <li>• Quality</li> <li>• Services</li> <li>• Financial Stewardship</li> </ul> <p><b>VALUES</b> Accountability Service Promote Teamwork Integrity Respect Excellence</p>	<p><b>Patient Loyalty</b> Prosser Memorial Health (PMH) will provide outstanding customer service, aspiring to treat those we serve the way they want to be treated.</p>	<ol style="list-style-type: none"> <li>1. Demonstrate a 1% improvement in overall patient satisfaction over 2022.</li> <li>2. Demonstrate a year over year incremental improvement (0.1% or greater) in all survey types and locations reflected in the “would recommend” composite score.</li> <li>3. Refresh the Patient Engagement committee: meeting <math>\geq 6</math> times with <math>\geq 2</math> patient/family participants.</li> <li>4. Provide a detailed quarterly report of patient engagement activities, initiatives, and objective measures by the Patient Engagement Committee and Departments.</li> <li>5. Reduce Left Without Being Seen (LWBS) to <math>\leq 0.5\%</math>.</li> <li>6. Reduce ED Admit decision to bed to 44 minutes.</li> <li>7. Increase post-discharge follow up phone calls completion to 80%.</li> <li>8. Demonstrate a 5% increase in the HCAHPS Transition of Care Metrics.</li> </ol>	<ul style="list-style-type: none"> <li>• Re- introduce the Service Recovery Program across the Organization.</li> <li>• Re-launch the Patient Engagement Committee including community members.</li> <li>• Expand patient rounding among all clinical leaders.</li> <li>• Implement the “Super Track” Patient Flow Project</li> <li>• Establish Nurse Triage Protocols and training for hospital and clinic nurses.</li> <li>• Establish MyChart promotion and training at every location.</li> <li>• Complete the rolling open of the Call Center.</li> <li>• Complete Huron Customer Service Training across the Clinics.</li> <li>• Provide Customer Service Training to all outpatient departments.</li> <li>• Provide Customer Service Training to all inpatient departments.</li> <li>• Assess and implement practices around diversity, equity, inclusion, and respect.</li> </ul>	<p>1/23</p> <p>1/23</p> <p>2/23</p> <p>3/23</p> <p>1/23</p> <p>4/23</p> <p>5/23</p> <p>3/23</p> <p>6/23</p> <p>9/23</p> <p>12/23</p>	<p>CNO/COO</p> <p>CNO/COO</p> <p>CNO/COO</p> <p>ED Director</p> <p>Specialty Clinic Director</p> <p>Patient Access Director</p> <p>Patient Access Director</p> <p>CCOO</p> <p>ED Director</p> <p>Director of Care Coordination/ Nursing Leadership</p> <p>FBP/ACU Director</p>
	<p><b>Goal:</b> PMH will achieve a patient satisfaction rate of 95% or higher.</p>				

	Strategic Goal	1-Year Objective Metrics	Objectives/Strategies	Timing	Accountable
<p><b>MISSION</b> Prosser Memorial Health will improve the health of our community.</p> <p><b>VISION</b> Prosser Memorial Health will become one of the top 100 Critical Access Hospitals in the country through the achievement of our Pillars of Excellence:</p> <ul style="list-style-type: none"> <li>• Patient Loyalty</li> <li>• Medical Staff Development</li> <li>• Employee Development</li> <li>• Quality</li> <li>• Services</li> <li>• Financial Stewardship</li> </ul> <p><b>VALUES</b> Accountability Service Promote Teamwork Integrity Respect Excellence</p>	<p><b>Medical Staff Development</b></p> <p>PMH will respond to Medical Staff concerns and needs in a timely manner, pursue initiatives in collaboration with our Medical Staff and ensure the availability of the appropriate providers for those we serve.</p> <p><b>Goal:</b> PMH will achieve and maintain an annual Medical Staff satisfaction rate of 90% or higher.</p>	<ol style="list-style-type: none"> <li>1. Demonstrate a 3% improvement in Medical Staff satisfaction.</li> <li>2. Increase Medical Staff participation in the Annual Medical Staff Engagement survey by 5%.</li> <li>3. Recruit 100% of the providers identified in the 2023 Medical Staff Recruitment Plan and hire 75% of the providers in the plan.</li> <li>4. Achieve the budgeted number of Active Medical Staff members.</li> <li>5. Maintain the annual Medical Staff turnover rate at &lt;5%.</li> <li>6. Meet or exceed budgeted PMH Clinic volumes and financial goals.</li> <li>7. All Prosser Memorial Health Rural Health Clinic (RHC) providers shall meet/exceed RHC productivity standards as set by Medicare/Medicaid.</li> <li>8. Meet with 100% of Prosser Memorial Health employed providers to provide annual evaluation.</li> </ol>	<ul style="list-style-type: none"> <li>• Develop the 2023 Medical Staff Recruitment Plan and recruit the identified providers through utilization of recruitment platforms including Practice Match, PMH website, Indeed, etc. Conduct monthly Provider Recruitment and Retention meeting with CEO to maintain progress.</li> <li>• Enhance the Medical Staff Engagement Plan and conduct bimonthly Medical Staff Engagement Team meetings.</li> <li>• Implement provider productivity standards and metric scorecards to be shared with providers monthly utilizing the clinic dyads to drive productivity improvement.</li> <li>• Maintain the DYAD Management structure throughout all PMH Clinics and conduct monthly clinic staff/provider meetings.</li> <li>• Develop and implement a comprehensive 2023 PMH Clinic Marketing Plan which will promote various PMH Medical Staff services.</li> <li>• Continue to develop and implement a comprehensive GI Service Line including the provision of ERCPs.</li> <li>• Continue to develop and enhance formal onboarding, including New Employee Orientation and clinic-specific orientation.</li> <li>• Reexamine and enhance the PMH CMO model to engage Medical Staff to improve Medical Staff satisfaction.</li> </ul>	<p>12/23</p> <p>12/23</p> <p>1/23</p> <p>12/23</p> <p>3/23</p> <p>6/23</p> <p>3/23</p> <p>12/23</p>	<p>CCOO/Provider Recruiter</p> <p>Provider Recruiter</p> <p>Clinic Directors/CCOO/CMO</p> <p>CMO/CCOO</p> <p>CCO/CCOO</p> <p>Director of Specialties/Director of Surgical Services</p> <p>Provider Recruiter/CCOO</p> <p>CCOO/CMO</p>

			<ul style="list-style-type: none"> <li>• Reenforce FPPE/OPPE process in the Prosser Memorial Health Clinics.</li> </ul>	6/23	CMO/CCOO/CQO
			<ul style="list-style-type: none"> <li>• Develop and implement an Annual Evaluation process for all providers.</li> </ul>	11/23	CCOO/CMO/CHRO
			<ul style="list-style-type: none"> <li>• Continue to generate and maintain Epic-specific training and support for the Medical Staff, including on-call Epic staff.</li> </ul>	12/23	CIO
			<ul style="list-style-type: none"> <li>• Continue to enhance the system for UR and coding documentation feedback for all providers.</li> </ul>	12/23	Director of Care Coordination/CCOO
			<ul style="list-style-type: none"> <li>• Continue to explore, implement new and enhance existing PMH Clinic Services as appropriate (e.g., Occupational Medicine, Women's Health, Sports Medicine).</li> </ul>	12/23	CCOO/CMO/CEO
			<ul style="list-style-type: none"> <li>• Develop a business plan for operating an outreach Specialty practice.</li> </ul>	1/23	CCOO/CEO

	Strategic Goal	1-Year Objective Metrics	Objectives/Strategies	Timing	Accountable
<p><b>MISSION</b> Prasser Memorial Health will improve the health of our community.</p> <p><b>VISION</b> Prasser Memorial Health will become one of the top 100 Critical Access Hospitals in the country through the achievement of our Pillars of Excellence:</p> <ul style="list-style-type: none"> <li>• Patient Loyalty</li> <li>• Medical Staff Development</li> <li>• Employee Development</li> <li>• Quality</li> <li>• Services</li> <li>• Financial Stewardship</li> </ul> <p><b>VALUES</b> Accountability Service Promote Teamwork Integrity Respect Excellence</p>	<p><b>Employee Development</b></p> <p>PMH will encourage and provide ongoing development of our employees by selecting talent effectively, communicating efficiently, creating a work atmosphere that values the individual talents of every employee resulting in a highly engaged workforce.</p> <p><b>GOAL:</b> PMH will achieve and maintain an annual employee satisfaction rate of 90% or higher.</p>	<ol style="list-style-type: none"> <li>1. Achieve an Employee Satisfaction rate of 90% or higher.</li> <li>2. Achieve an annual employee turnover rate of 9% or less.</li> <li>3. Achieve an average recruitment time of 34 days.</li> <li>4. Reduce the number of hours of overtime/total hours worked to less than 4.5%.</li> <li>5. Implement an employment screening tool for 90% of all new employees.</li> <li>6. Maintain an annual 98% 403(b) participation rate.</li> </ol>	<ul style="list-style-type: none"> <li>• Review the employee onboarding experience and make enhancements to the process, based on discovery and first-hand input from new hires.</li> <li>• Review the New Leader orientation and onboarding experience and make enhancements to the process, based on discovery and first-hand input from new hires.</li> <li>• Ensure the practice of offering competitive wages and benefits by participating in identified surveys and using results to drive strategic compensation and benefits decisions, for both annual planning and just-in-time adjustments, where warranted.</li> <li>• Ensure employee recognition continues through established committees and recognition programs and develop a process to measure the effectiveness of selected programs, making revisions as needed.</li> <li>• Revise the Employee and Provider Annual Engagement Survey tool (questions), process and supporting resources to deliver more frequent mid-year measurements of targeted metrics to support timely responses and interventions.</li> <li>• Conduct three (3) Leadership Development Institutes (LDI). Continue Administrative Rounding (e.g., enhance relationships, trust, teamwork, etc.).</li> </ul>	<p>6/23</p> <p>7/23</p> <p>9/23</p> <p>12/23</p> <p>9/23</p> <p>12/23</p>	<p>CHRO</p> <p>CHRO/CQO/CIO</p> <p>CHRO</p> <p>CHRO/CCO</p> <p>CHRO/CEO</p> <p>CHRO/CEO</p>

			<ul style="list-style-type: none"> <li>Evaluate the effectiveness of the organization-wide Uniform Policy and make revisions as identified.</li> </ul>	6/23	CHRO/CCOO
			<ul style="list-style-type: none"> <li>Conduct three (3) week-long campaigns focused on retirement: Include 403(b) and 457(b) to maintain and/or increase participation.</li> </ul>	12/23	CHRO
			<ul style="list-style-type: none"> <li>Develop a Medical Assistant's Practice Council for Clinic MA's that focuses on MAC development, standardizing best practices and assisting in the selection of new MA's.</li> </ul>	4/23	CHRO/CQO/CCOO
			<ul style="list-style-type: none"> <li>Enhance the hiring process by researching and implementing an e-based pre-employment screening tool that identifies applicant traits and behaviors that are aligned with PMH Values and Standards of Behaviors.</li> </ul>	9/23	CHRO/CIO
			<ul style="list-style-type: none"> <li>Develop a Meals and Breaks metric that is reported on the Strategic Scorecard to support compliance with Federal and State requirements.</li> </ul>	6/23	CHRO/CNO/COO



	Strategic Goal	1-Year Objective Metrics	Objectives/Strategies	Timing	Accountable
<p><b>MISSION</b> Prosser Memorial Health will improve the health of our community.</p> <p><b>VISION</b> Prosser Memorial Health will become one of the top 100 Critical Access Hospitals in the country through the achievement of our Pillars of Excellence:</p> <ul style="list-style-type: none"> <li>• Patient Loyalty</li> <li>• Medical Staff Development</li> <li>• Employee Development</li> <li>• Quality</li> <li>• Services</li> <li>• Financial Stewardship</li> </ul> <p><b>VALUES</b> Accountability Service Promote Teamwork Integrity Respect Excellence</p>	<p><b>Quality</b></p> <p>Continue to support the systemic organization-wide approach to plan, design, measure, assess and improve organizational performance. Objectives are designed to:</p> <ul style="list-style-type: none"> <li>• Attain optimal patient outcomes and patient and family experience</li> <li>• Support an engaged and safe workforce</li> <li>• Enhance appropriate utilization</li> <li>• Minimize risks and hazards of care</li> <li>• Develop and share best practices</li> </ul> <p><b>Goal:</b> PMH will achieve an INDEX Quality score of 36 or higher.</p>	<ol style="list-style-type: none"> <li>1. Achieve an overall medication bar code scanning compliance rate of 93.5% or greater for the hospital.</li> <li>2. Achieve an overall patient bar code scanning compliance rate of 94.7% or greater for the hospital.</li> <li>3. Maintain the Healthcare Associated Infections (HAI) rate per 100 inpatient days at &lt;0.1%.</li> <li>4. Achieve and maintain a Hand Hygiene compliance goal of 100%.</li> <li>5. Achieve &lt;0.5% goal of patients leaving the ED without being seen (LWBS) (OP22). <i>(As indicated by the Hospital Strength INDEX)</i></li> <li>6. Achieve or exceed the goal of 115 minutes (median time) for patients arriving to the ED to their departure time (OP18b). <i>(As indicated by the Hospital Strength INDEX)</i></li> <li>7. Achieve or exceed the goal of 89% for Staff receiving the Influenza Vaccination (IMM3). <i>(As indicated by the Hospital Strength INDEX)</i></li> <li>8. Be 100% compliant with regulatory standards of applicable agencies (State of WA, CMS, etc.).</li> <li>9. ED will direct schedule follow-up appointments for 50% of ED discharges needing a follow-up with a PMH care provider.</li> </ol>	<ul style="list-style-type: none"> <li>• Maintain an organization-wide Strategic Plan Scorecard of key performance indicators.</li> <li>• Maintain a Patient Care Scorecard to measure and trend selected Quality measures.</li> <li>• Conduct Environment of Care audits/tracers in all departments and share results with the unit Directors and staff.</li> <li>• Pass all applicable regulatory surveys (e.g., DOH, Laboratory, RHC)</li> <li>• Report medication and patient bar code scanning compliance at each monthly Quality meeting and at clinical staff meetings.</li> <li>• Report hand hygiene compliance rates at each monthly Quality meeting.</li> <li>• Formalize the Antimicrobial Stewardship (AMS) program.</li> <li>• Implement ED scheduling Clinic follow-up appointments.</li> <li>• Educate staff on the importance of influenza vaccination.</li> <li>• Conduct Employee Influenza Vaccination clinics including the accessibility of vaccination through the House Supervisors during the evening and weekend shifts.</li> </ul>	<p>12/23</p> <p>12/23</p> <p>12/23</p> <p>12/23</p> <p>12/23</p> <p>12/23</p> <p>6/23</p> <p>6/23</p> <p>9/23</p> <p>10/23</p>	<p>CQO</p> <p>CQO</p> <p>CQO/Safety Committee</p> <p>CQO</p> <p>Director of Pharmacy</p> <p>Infection Preventionist</p> <p>Director of Pharmacy</p> <p>Director of Patient Access/CCOO/Director of ED/EMS</p> <p>Employee Health</p> <p>Employee Health</p>

			<ul style="list-style-type: none"> <li>• Research ways to become a GI Center of Excellence and leverage the data that is being collected in GIQuIC (GI Quality Improvement Consortium).</li> </ul>	12/23	Director of Surgical Services/CQO
			<ul style="list-style-type: none"> <li>• Implement Bugsy and complete a comprehensive evaluation of the Infection Control program, reporting and tracking.</li> </ul>	6/23	Infection Preventionist/CQO

	Strategic Goal	1-Year Objective Metrics	Objectives/Strategies	Timing	Accountable
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			<ul style="list-style-type: none"> <li>• Review a proforma for adding new services: ERCP and TEE.</li> </ul>	12/23	CCOO / Director of Specialty Clinic / Director of Surgery
			<ul style="list-style-type: none"> <li>• Host a diabetic forum, monthly nutrition class, new parent class, Stop the Bleed, Digestive Health, and Cardiac Health.</li> </ul>	12/23	CCO
			<ul style="list-style-type: none"> <li>• Offer iPads to inpatients.</li> </ul>	12/23	CIO
			<ul style="list-style-type: none"> <li>• Migrate Share Drives to SharePoint/OneDrive.</li> </ul>	6/23	CIO
			<ul style="list-style-type: none"> <li>• Create Epic education and training program.</li> </ul>	10/23	CIO

	Strategic Goal	1-Year Objective Metrics	Objectives/Strategies	Timing	Accountable
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			<ul style="list-style-type: none"> <li>Utilize Labor Productivity System to enable improvements in the efficiency of labor utilization by departments.</li> </ul>	01/23	CFO/Director of Finance
			<ul style="list-style-type: none"> <li>Enhance quarterly departmental reviews.</li> </ul>	01/23	CFO/Director of Finance
			<ul style="list-style-type: none"> <li>Reduce unscheduled leave through implementation of new PTO model for staff.</li> </ul>	12/23	CFO/CHRO
			<ul style="list-style-type: none"> <li>Utilize partner to reduce capital, service agreement and bio-medical service costs.</li> </ul>	02/23	CFO/ Director of Materials Management
			<ul style="list-style-type: none"> <li>Implement new GL/AP/MM software that allows for more effective and efficient expense management.</li> </ul>	12/23	Director of Finance
			<ul style="list-style-type: none"> <li>Conduct monthly Leadership Finance Training sessions.</li> </ul>	02/23	CFO/ Director of Finance

DRAFT

Attachment K

# Mission, Vision, Values & Standards of Behavior

A S P I R E

Accountability

Service

Promote Teamwork

Integrity

Respect

Excellence



**Prosser**  
Memorial Health

This is how we care.

# Our Mission

Prosser Memorial Health will improve the health of our **greater** community.

# Our Vision

## FY 2022-2025

Prosser Memorial **Health** will become one of the top 100 Critical Access Hospitals in the country through the achievement of the following Pillars of Excellence.

# Pillars of Excellence

**1. Patient Loyalty Pillar:** PMH will provide outstanding customer service, aspiring to treat those we serve the way they want to be treated.

**GOAL:** PMH will achieve a patient satisfaction rate of 95% or higher.

**2. Medical Staff Development Pillar:** PMH will respond to Medical Staff concerns and needs in a timely manner, pursue initiatives in collaboration with our Medical Staff and ensure the availability of the appropriate providers for those we serve.

**GOAL:** PMH will achieve and maintain an annual Medical Staff satisfaction rate of 90% or higher.

**3. Employee Development Pillar:** PMH will encourage and provide for the ongoing development of our employees. We will provide an atmosphere that values our employees and promotes:

- Open communication.
- Competitive wages and benefits.
- Selection and retention of effective, caring personnel.
- Utilization and development of talent throughout the organization.
- On-going education.
- Employee recognition.

**GOAL:** PMH will achieve and maintain an annual employee satisfaction rate of 90% or higher.



**4. Quality Pillar:** PMH will develop and maintain a system of continuous improvement which is incorporated into the daily work of every employee and Medical Staff member.

**GOAL:** PMH will achieve a Quality INDEX Score of 36 or higher.

**5. Services Pillar:** PMH will develop and maintain appropriate facilities, technology and services to meet the needs of those we serve, that includes building a replacement facility.

**GOAL:** PMH will achieve 50% market share of our greater community for those services. (Proxy: Adjusted Patient Days > 28,989 days).

**6. Financial Stewardship Pillar:** PMH will continue to strengthen its financial stewardship position to enhance the ability to develop new services, obtain needed technology, modernize facilities, recruit physicians and ultimately ensure long-term viability.

**GOAL:** PMH will achieve an annual total margin of 6% or more.

# Administrative Team

## Pillar Champions



# Our Values

ASPIRE to soar to a great height.

A

**Accountability:**

Take responsibility for our own behavior

S

**Service:**

Deliver high-quality healthcare with hope, optimism and compassion

P

**Promote Teamwork:**

Work together to achieve common goals

I

**Integrity:**

Do the right thing even when no one is watching

R

**Respect:**

Respect the inherent value and worth of each person

E

**Excellence:**

Exceed the expectations of those we serve



# Our Shared Values & Standards of Behavior



**Prosser**  
Memorial Health

# Staff and Auxiliary

Prosser Memorial Health has a rich heritage of leadership in our community, consistently offering new and innovative services. While our Mission calls us to deliver compassionate, high-quality, affordable health services to our community, we also strive for excellence in every aspect of the way we care for our patients and their families. When we enhance our service excellence, we will establish a lifelong relationship with our patients and their families, securing our future and the next generation of quality health care.

These standards outline the behaviors necessary to achieve excellence in the way we work together as a team to serve our patients. We have the opportunity to practice excellence in every interaction we have with a patient, a family member, physician, visitor, or each other. In order to achieve and sustain service excellence, we request that each staff member read and incorporate these behaviors and follow these standards in their daily work lives. These expectations will be added to each job application and description as well as Medical Staff, Board member and auxiliary applications. All team members will be accountable for their customer service attitude and actions. Creating a workplace where everyone is willing to go the extra mile to show kindness and meet the needs of our patients, family members, physicians, and co-workers will be greatly beneficial to everyone.

A handwritten signature in black ink that reads "Craig". The signature is written in a cursive style with a large, sweeping 'C' and a long, trailing tail.

Craig J. Marks, FACHE  
CEO  
Prosser Memorial Health

# Introduction

Prosser Memorial Health strives to fulfill its Mission by expecting all staff to embrace our values and adopt our Standards of Behavior.

We believe each and every department and individual adds value to our organization and is accountable for its success.

We need to rejoice in the accomplishments of our coworkers, always recognizing them for a job well done.

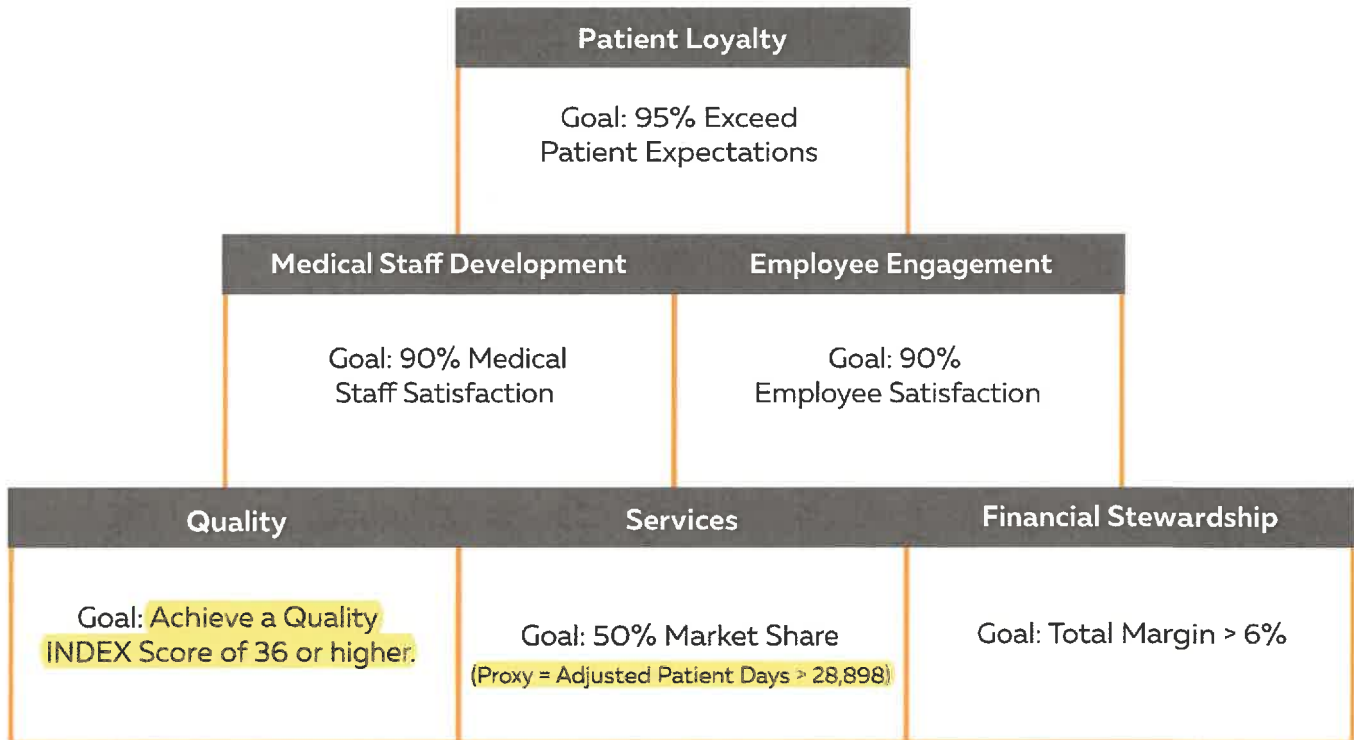
We believe that by consistently living and following these Values and Behaviors we will be proud of and take ownership with PMH, making our work enjoyable while exceeding the expectations of those we serve.

Our Values are to ASPIRE to soar to a great height.

- A** **Accountability:** Take responsibility for our own behavior
- S** **Service:** Care enough to exceed the expectations of those we serve
- P** **Promote Teamwork:** Work together to achieve common goals
- I** **Integrity:** Do the right thing even when no one is watching
- R** **Respect:** Respect the inherent value and worth of each person
- E** **Excellence:** Exceed the expectations of those we serve

# Vision of Success FY2022 to 2025

We will become one of the top 100 Critical Access Hospitals in the country by living our ASPIRE Values and the achievement of the below Pillars of Excellence.



# ASPIRE Values & Standards of Behavior



**Prosser**  
Memorial Health



# We Value ACCOUNTABILITY:

Take responsibility for our own behavior.

## I WILL:

- Set a good example, project self-confidence, and not allow personal issues to interfere with the quality of my work.
- Anticipate and correct problems before they become complaints.
- Apologize to those we serve for problems or delays, do my best to make it right, initiate service recovery as warranted, and thank them for their understanding and patience.
- Seek out available education opportunities to improve my personal and professional skills so I can participate, learn, and grow.
- Avoid blaming others when problems occur by becoming part of the solution, and take responsibility for my own behavior.
- Take initiative to hold myself and others accountable for creating a safe, high-quality, and positive environment.
- Take pride in what I do and my professional appearance, language and behavior.
- Own and resolve guest problems.

A S P I R E

Accountability

Service

Promote Teamwork

Integrity

Respect

Excellence

# We Value SERVICE:

Care enough to exceed the expectations of those we serve.

## I WILL:

- Immediately acknowledge everyone I meet, smile and, if possible, address them by name.
- Assist and/or escort those we serve to their destination or introduce them to someone who can help them.
- Contribute to the creation of a clean, safe environment for those we serve.
- Answer the phone with a smile in my voice and identify myself by name and department.
- Be professional, providing help in a friendly and compassionate manner.
- Seek out opportunities to promote a positive experience for our customers.
- Thank customers for choosing PMH.
- Be aware of my tone in emails, voicemails, and interactions with others.

A S P I R E

Accountability

Service

Promote Teamwork

Integrity

Respect

Excellence

# We Promote TEAMWORK

Work together to accomplish great things.

## I WILL:

- Focus more on “we” and less on “me”.
- Be open to new ideas and embrace change.
- Speak favorably about PMH, all departments, and coworkers, and go out of my way to make my team-members look good.
- Welcome new employees.
- Recognize and praise achievement.
- Communicate effectively.
- Have a positive, encouraging attitude when encountering co-workers.
- Seek partners in the community with common values and goals.

A S P I R E

Accountability

Service

Promote Teamwork

Integrity

Respect

Excellence

# We Value INTEGRITY:

Do the right thing even when no one is watching.

## I WILL:

- Do the right thing even when no one is watching, even when it is difficult.
- Be honest, trustworthy, responsible, and dependable.
- Be considerate of how I am perceived in my body language, eye contact, verbal tone, and writing style, realizing that this perception affects others and the outcome I am trying to achieve.
- Take ownership in positively representing PMH in and out of the workplace.
- Follow through with what I say.
- Take pride in what I do.
- Promote mutual respect and build community within PMH.
- Seek input from those impacted by decisions.
- Always wear my name badge.
- Ask clarifying questions and not make assumptions.

A S P I R E

Accountability

Service

Promote Teamwork

Integrity

Respect

Excellence

# We Value RESPECT:

Treat others with Dignity.

## I WILL:

- Protect everyone's privacy and confidentiality.
- Be aware and considerate of generational, physical, religious, financial and cultural diversity.
- Praise in public, coach in private.
- Recognize each person, situation and idea as significant.
- Not engage in gossip, inappropriate behavior or language.
- Treat others as they want to be treated.
- Provide services to the underserved and encourage others to do the same.
- Anticipate and provide for the needs of those we serve.
- Provide fairness and justice in internal policies and practices and external relationships.
- Recognize and celebrate diversity and inclusion.
- Focus on an individual's strengths and do not minimize other's opinions.

A S P I R E

Accountability

Service

Promote Teamwork

Integrity

Respect

Excellence

# We Value EXCELLENCE:

Exceed the expectations of those we serve.

## I WILL:

- Participate in continuous improvement, recognizing that everything I do is a process that can be improved.
- Contribute to the creation of a just culture and not accept excuses, mediocrity, and carelessness.
- Do my best and remain positive.
- Use my time effectively.
- Anticipate and provide for the needs of those we serve.
- Provide compassionate and personalized service in a timely manner, and build strong relationships that create PMH guests for life.
- Strive to “raise the bar” in exceeding expectations.
- Promote effective use of resources.
- Ensure accountability for the development and use of resources in the present and their availability for the future.
- Always begin each day and each activity with quality in mind.
- Begin each customer interaction by considering their expectations and going beyond their expectations by providing care with compassion, integrity, respect and stewardship.

A S P I R E

Accountability

Service

Promote Teamwork

Integrity

Respect

Excellence

# Commitment to ASPIRE

Exceed the expectations of those we serve.

These Values and Standards of Behavior reflect the level of professionalism that we will demonstrate in providing services to our community.

These Values and Standards of Behavior have been developed by employees of Prosser Memorial Health to establish specific behaviors that all employees, medical staff, and volunteers are expected to model.

We believe that by adopting these Values and Standards of Behavior, those we serve will receive outstanding service, making PMH one of the finest hospitals in Washington.

I have read, understand, and agree to comply with the Prosser Memorial Health Values and Standards of Behavior.

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Signature

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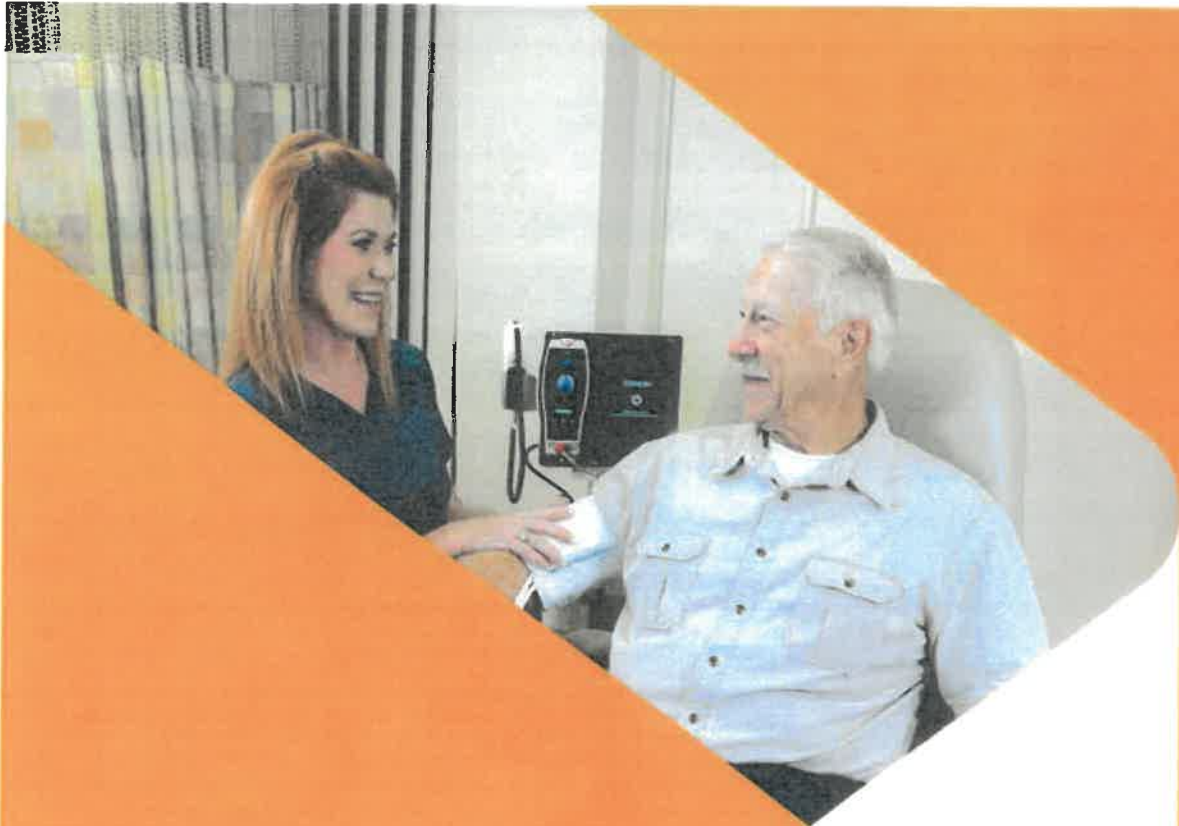
Date

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Print Name

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Department



# 2023

Communications &  
**Marketing  
Plan**

*Delivering  
High-Quality,  
Affordable  
Healthcare.*

723 Memorial Street  
Prosser, WA 99350  
[ProsserHealth.org](http://ProsserHealth.org)



**Prosser**  
Memorial Health



# Communications, Marketing & Community Relations Plan 2023

## Executive Summary:

***This Is How We Care and This Is How We Grow*** are the focus of the 2023 Communications, Marketing, and Community Relations plan. We will continue to market our growing service lines and providers emphasizing our mantra of high-quality care delivered with respect, hope, and optimism.

The 2023 Communications, Marketing, and Community Relations Plan builds on the commitment we have made to the communities we serve by meeting their healthcare needs and providing access to care. The messaging, images and outreach in this plan will generally stay the same in 2023. We will focus on building volumes and patient loyalty with new providers, promote and educate the public on new service lines, and restart our community health education initiatives.

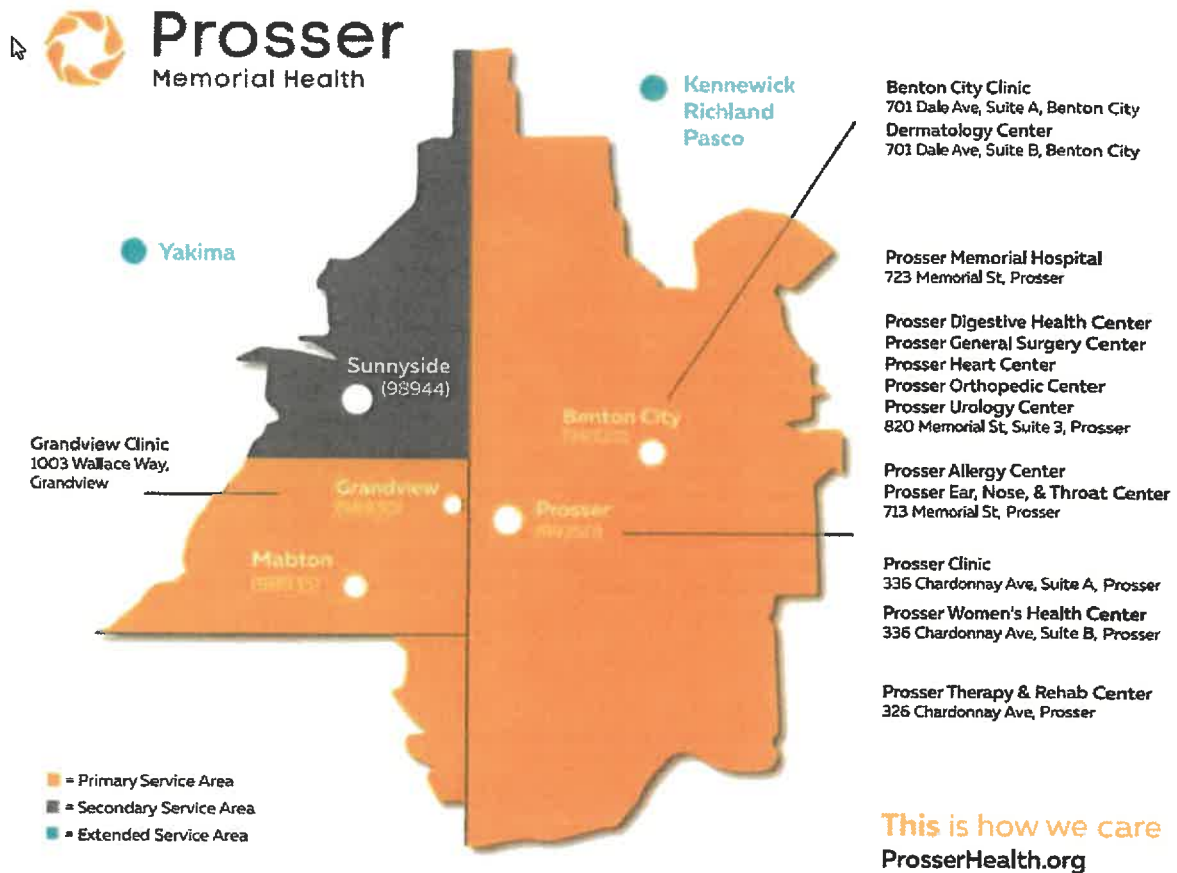
This plan focuses on three areas in 2023: 1. Access to Primary Care Providers 2. Community Education on the healthcare education and resources PMH has to offer and 3. Organization-wide customer service program that reinforces our brand, image, and tagline. A new website will be launched in January 2023 that allows for more access and two-way communications with PMH and the public when they have questions or need help navigating through our network to connect with the correct departments or clinics.

A comprehensive customer service program, across the organization, will ensure we are living our Mission, Vision, and Values with every patient encounter we have. For our messaging and outreach to be authentic, and memorable to each patient, they need to feel and believe, ***This Is How We Care*** every time we answer the phone, greet them at check-in, follow up with their questions and concerns, and at the time they receive a statement from PMH.

## Primary & Secondary Service Area:

The hospital's service area includes the communities of Prosser, Mabton, Sunnyside, Benton City and Grandview.

Continued growth in the primary service area is expected in the next three years with the largest increases seen among residents 65 years and older. Our secondary service area continues to expand into the Yakima area with more Astria Health clinics and services lines closing and with the purchase of Yakima Valley Memorial Hospital to MultiCare.



## Who is the competition?

Prosser Memorial Health's major competitors are Astria Sunnyside Hospital and Astria Health Centers located in Sunnyside, Grandview, and Prosser. While Kadlec, Trios, and Lourdes are considered competition with primary care and some specialty service lines we do have strong partnerships with these facilities and transfer our patients to them when a higher level of care is needed.

In 2023, our strategy is to continue to take market-share away from the Astria Health system as it struggles to retain providers and staff, financial stability, and plummeting patient satisfaction. We will continue to market aggressively in the Yakima area with our Joint Replacement program, Orthopedics, Urology, ENT, Dermatology, our Digestive Health Center, and Women's Health where demands are significantly outpacing supply.

## Opportunity:

Prosser Memorial Health has built a solid reputation of providing high quality healthcare with compassion. Our patient satisfaction numbers are strong and our patient testimonials and social media engagement from the community remains strong. Looking forward to 2023, there are numerous opportunities to grow market-share:

### 1. A New Hospital

We will introduce the new hospital project to the public in the fall of 2022 With a groundbreaking event on the new facility and launching a public capital campaign to help us reach our \$3 million goal.

### 2. Primary Care Access

Our primary care network continues to grow as consumers learn about the clinics, providers and services offered. Internally we will work to ensure patients have access to our providers in a timely manner. Our provider group is engaged in Prosser Memorial Health, the community, and their patients.

### 3. Digestive Health Center & Dermatology

From Yakima to the Tri-Cities, there is a long waiting list to be seen by a Gastroenterologist or a Dermatologist. We will aggressively promote Dr. Cohen and Dr. McDonnell in our Digestive Health Center in both markets as well as Dr. Nylander and Karmina Bowen at our Dermatology Center.

#### 4. Our Customer Experience

***This Is How We Care*** is not a tagline we put at the end of a print ad or video. It is the organization culture and way in which we go by treating our patients. Working directly with our clinic and department directors to launch a comprehensive customer service program that reinforces our Mission, Vision and Values.

##### Hospital Services

- Emergency Care Center
- ER wait times
- Ouch-less Pediatric ER
- PMH Family Birthplace: Full service, C-Sections, Pain Management – Epidurals, Labor, Delivery, Recovery, Postpartum (LDRP) Suites
- PMH Surgery Center
- Inpatient Acute Care
- Pediatric Hospital Medicine Admissions
- Diagnostic Imaging
- 3D HD Mammography
- Diabetic Education
- Registered Dietitian
- DEXA Scan
- Provider Referrals
- MRI
- CT
- Cardio - adult and pediatric
- Transitional Care Services
- Therapy
- Outpatient Special Procedures
- PICC line placement
- IV Therapy
- Wound Care
- ECHO
- Nuclear Medicine
- Community Paramedic Program
- In-home discharge follow-up (case management)

**Clinical Services:**

- PMH Surgical Group (Orthopedics, Podiatric, General, ENT, Urology, General Surgery, Digestive Health Center, Cardiology)
- Joint Replacement Program
- Obstetrics
- Geriatric Medicine
- Pediatric
- Mental Health
- Women's Health
- Gynecological Surgery Services
- PMH Family Medicine providers
- PMH Occupational Health
- Employer contracted services
- Family Medicine
- Clinic Visits- After hours and weekend availability
- Extended Hours
- Referrals to Medical Center Services
- Dermatology
- PMH Therapy Services

**5. Growth**

Our 2023 marketing plan will include a large focus on growing our clinic volumes and outpatient service lines. We will also focus on our advanced technology capabilities with the Mako Robot System, 3D HD mammography equipment, Dermatology, and the Digestive Health Center.

**Community Outreach:**

We believe in the power of community. There is no greater responsibility, or privilege, than taking care of our friends, family, and neighbors. Our messaging in 2023 will build on the brand power of ***This Is How We Care*** and incorporate the care philosophy of our providers and hospital staff. We want patients to choose Prosser Memorial Health because our providers are the best in their field, our technology is state-of-the-art and because we truly care about our patients and their families.

## **Brand Position & Personality**

Prosser Memorial Health has gained the trust in our primary service area as the preferred community hospital as well as steadily increased volumes at the clinics. Who we are and how we deliver care to our community will continue to be the main message in our marketing and community outreach. It's what sets us apart from our competition.

## **Goals and Objectives**

Our overall communications strategy supports the organizations overall objectives and priorities. These include:

1. Achieve a patient satisfaction rate of 95% or higher;
2. Achieve an annual Medical Staff satisfaction rate of 90% or higher;
3. Achieve and maintain an annual employee satisfaction rating of 90% or higher;
4. Achieve and maintain selected quality attribute scores that will place the hospital in the top 10 percent of Critical Access Hospitals;
5. Increase adjusted patient days for those services we provide; and
6. Achieve an annual total margin 6% or more.

## **Target Audience**

### **1. Consumers**

- a. Women in our primary service area make 75% of all healthcare decisions for their family. From the Nursery to the Emergency Department and everywhere in between. We will place additional emphasis on working moms who need appointments for themselves and their families outside of the 8 am – 5pm window.
- b. New patients in our secondary service area.
- c. Existing patients and their families can tell our story the best. Retaining their business and having them share their experience with others is a key segment of our communications plan.

### **2. Prosser Memorial Health Family**

- a. Clinical and support staff;
- b. Providers;
- c. Hospital leaderships;
- d. Board of Commissioners; and
- e. Foundation Board of Directors

### **3. Community Stakeholders**

- a. Civic leaders;
- b. Business owners;
- c. Organizations and associations;
- d. School district leaders;
- e. EMT's and CPP services; and
- f. Outside healthcare networks as referral sources

## **Communication Strategies**

Prosser Memorial Health's 2023 Communications Plan will be a multi-channel approach in the Yakima and Tri-Cities markets in English and Spanish with appropriate messaging to match the target audience with the service. We will track volumes, patient experiences and testimonials to ensure our message is resonating with the intended audience and is reflected in our bottom line. Since the pandemic we know that TV, radio and social media have been most successful channels to use to communicate our messaging.

### **Multi-Channel Marketing will include:**

#### **1. Newsprint**

- a. We will continue to use Prosser, Grandview, Sunnyside, Tri-City Herald, Yakima Herald- Republic, Yakima Magazine and the Kids Directory but it will be on a smaller scale than in 2020 as it is not that effective.

#### **2. Billboards**

- a. 5 in Sunnyside, 1 in Grandview and 1 in Prosser, 2 in Yakima, 2 in Tri-Cities.
- b. Mobile billboards in the Tri-Cities.

#### **3. Radio**

- a. English and Spanish radio have been very successful in the Yakima and Tri-Cities markets.

#### **4. TV**

- a. KAPP/KVEW, FOX, and cable.

#### **5. Social Media**

- a. Facebook, LinkedIn, Instagram, You Tube, Twitter

#### **6. Digital**

- a. Search Optimization
- b. Search Engine Marketing
- c. Behavioral Targeting
- d. Geo Fencing
- e. Conquer Campaign for competitor's name when searched
- f. Complete redesign of the current website

#### **7. Direct Mail**

- a. Quarterly Community Newsletter
- b. Postcards introducing new providers and new service lines as needed

#### **8. Community Health Education Virtually and In Person**

- a. We will use Facebook and Zoom to conduct regular health education classes that include our providers and their expertise.



## **Conclusion:**

There is much to share with our community on what is going on at Prosser Memorial Health! The 2023 Communications Plan will be use a multi-channel approach in the Yakima and Tri-Cities markets in English and Spanish to share this information with potential patients. We will track volumes, patient experiences and testimonials to ensure our message is resonating with the intended audience and is reflected in our bottom line. We will implement a comprehensive customer service plan that includes best practices training, defines expectations, and monitors the patient experience across our organization.



## Vision

Patients  
Employees  
Medical Staff  
Quality  
Services  
Financial



# Prosser

Memorial Health

## Values

Accountability  
Service  
Promote Teamwork  
Integrity  
Respect  
Excellence

**Mission:** To improve the health of our community.



# 2023 TECHNOLOGY STRATEGIC PLAN

PHILLIP BRAEM

PROSSER MEMORIAL HEALTH

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Leveraging and efficiently using technology is critical to the success of Prosser Memorial Health (PMH) and its Vision of becoming a top 100 Critical Access Hospital in the United States.

During the next year PMH will continue its transformation in leveraging technologies to increase efficiencies and competitiveness. The following will be the focus of the 2023 IT Strategic Plan:

- Continue to support 2023 PMH Strategic Initiatives.
- Expand Virtual Desktop Infrastructure to office employees.
- Continue to enhance PMH Security – Implement industry leading cyber security tools to increase security posture.
- Revamp employee onboarding regarding IT services. (Access, Training)
- Continue to leverage Health Streams for Epic learning purposes
- Transition Providence / Epic network circuit to a higher capacity and redundant circuit.
- Expand reporting tools for fast visual analytics of Epic data.
- Integrate multiple software and hardware with Epic.
- Implement new technologies in PMH departments.
- Support new telehealth service offerings
- Plan for New Hospital networking equipment
- Continue to support improved workflows and processes across the enterprise
- Continue to improve IT Department efficiencies and communicate

## MISSION, VISION, VALUES, AND STANDARDS OF BEHAVIOR

### MISSION

#### PROSSER MEMORIAL HEALTH MISSION

Prosser Memorial Health will improve the health of our community.

#### INFORMATION TECHNOLOGY MISSION

PMH Technology will progressively leverage technology in full alignment with the Prosser Memorial Health Mission.

### VISION

#### PROSSER MEMORIAL HEALTH VISION

Prosser Memorial Health will become one of the top 100 Critical Access Hospitals in the country through the achievement of the following Pillars of Excellence.

##### **PILLAR OF EXCELLENCE #1: Patient Loyalty**

PMH will provide outstanding customer service, aspiring to treat those we serve the way they want to be treated.

##### **PILLAR OF EXCELLENCE #2: Medical Staff Development**

PMH will respond to Medical Staff technology concerns and needs in a timely manner, pursue initiatives in collaboration with our Medical Staff and ensure the availability of the appropriate providers for those we serve.

##### **PILLAR OF EXCELLENCE #3: Employee Development**

PMH will encourage and provide for the ongoing development of our employees.

- Open Communication.

- Competitive wages and benefits.

- Selection and retention of effective, caring personnel.

- Utilization and development of talent throughout the organization.

- On-going education.

- Employee recognition.

##### **PILLAR OF EXCELLENCE #4: Quality**

PMH will develop and maintain a system of continuous improvement which is incorporated into the daily work of every employee and Medical Staff member.

**PILLAR OF EXCELLENCE #5: Services**

PMH will develop and maintain appropriate facilities, technology, and services to meet the needs of those we serve.

**PILLAR OF EXCELLENCE #6: Financial Stewardship**

PMH will continue to strengthen its financial stewardship position to enhance the ability to develop new services, obtain needed technology, modernize facilities, recruit physicians, and ultimately ensure long-term viability.

---

**TECHNOLOGY VISION**

PMH Technology will actively and progressively leverage technology to fully align with the Prosser Memorial Health Vision.

**VALUES**

---

**PROSSER MEMORIAL HEALTH VALUES**

**ASPIRE to soar to a great height**

- A Accountability:** Take responsibility for our own behavior.
- S Service:** Care enough to exceed the expectations of those we serve.
- P Promote Teamwork:** Work together to achieve common goals.
- I Integrity:** Do the right thing even when no one is watching.
- R Respect:** Respect the inherent value and worth of each person.
- E Excellence:** Exceed the expectations of those we serve.

---

**TECHNOLOGY VALUES**

PMH Technology Team will actively follow and exhibit Prosser Memorial Health Values.

## SWOT ANALYSIS - CURRENT TECHNOLOGY SYSTEMS

The aim of any strengths-weaknesses-opportunities-threats (SWOT) analysis is to identify the key internal and external factors that are important to achieving objectives. SWOT can be helpful to quickly portray the current state. It is defined as:

- **Strengths:** Attributes of the organization that are helpful to achieving the objective.
- **Weaknesses:** Attributes of the organization that are harmful to achieving the objective.
- **Opportunities:** External conditions that are helpful to achieving the objective.
- **Threats:** External conditions which could do damage to the business's performance.

## STRENGTHS

- **Epic.** PMH runs the highly rated electronic health record software system Epic at a heavily discounted rate through Providence. PMH is currently on Epic 2022.
- **Providence.** We have a great technology partner in Providence which is one of the largest hospital systems in the United States. Our partnership with Providence allows PMH access to additional technology resources in the healthcare field.
- **Multiple Hosted Cloud Based services.** Cloud based services (software located offsite with multiple software publishers who are also the software subject matter experts) are trending up in technology and leverage software experts to make small technology teams more efficient. Epic, Lawson, Kronos, GHX, CPSI, and other software applications are currently running at hosted locations.
- **Security.**
  - **Palo Alto Firewall:** Palo Alto is a leader in the Gartner Magic Quadrant for Enterprise Network Firewalls.
  - **Nessus Vulnerability scanning** to detect threats internally.
  - **Cortex XDR:** Cortex XDR detection and response allows you to stop sophisticated attacks and adapt defenses to prevent future threats. Cortex XDR uses machine learning while analyzing network, endpoint and cloud data to accurately detect attacks, and it automatically reveals the root cause of alerts to speed up investigations.
  - **Critical Start:** The Critical Start Security Operations Center (SOC) provides 24x7x365 security monitoring, investigation, and response, for our security services.
- **Fiber.** Due to the location of Prosser Memorial Health between the Tri-Cities and Yakima there is prime access to local high bandwidth fiber optic wide area networking.



- Team. We have an excellent small internal IT team of 5 members. The team is highly customer focused, talented, and experienced consisting of 2 Clinical Informaticists, 1 Systems Analyst, 1 highly service-oriented helpdesk technician, and 1 CIO technology leader.
- Many technology grants and credits are available. Rural discounts and credits are available for our network services and telehealth programs.
- Diagnostic Imaging Department Technologies. PMH runs Fuji PACS system which is fully integrated with Epic.
- Major Infrastructure Upgraded in 2019 consisting of best-in-class Cisco Network and Phones, best in class Pure Storage, and best in class VMWare virtual servers.
- Great Infrastructure and partner CompuNet who is an all IT engineering firm and does fantastic work for PMH.

## WEAKNESSES

- Lawson product suite not effective. Will be fully replaced in 2023.
- Epic Knowledge. Lack of continued learning program and enough subject matter experts to effectively grow staff epic knowledge. Continue to train users as super users and bring on an Epic Educator.
- IT Staff. Limited in capabilities due to being down 3 staff members.  
Replace, recruit new staff in 2023
- Onboarding employees, current process is cumbersome and time consuming.
- Fiber Circuit to Kadlec for Epic communication – No backup and reliant upon Kadlec's Infrastructure

## OPPORTUNITIES

- Expand data and analytical dashboards enterprise wide to improve workflows and processes.
- Increase onsite Epic subject matter expertise and self-service training to increase leverage in Epic investment.
- Leverage newer technologies in all departments. Healthcare technologies are rapidly developing and there is great opportunity for PMH to leverage.
- Increased Epic integration and optimizations to grow PMH clinical efficiencies in all areas.
- Improve network connections to Providence Health

## THREATS

- Lack of onsite Epic subject matter expertise and self-service training to increase leverage in Epic investment.
- Security threats continue to expand to critical infrastructure, staff, technology partners and vendors. There is a large threat to PMH credibility if patient information is compromised, which would reduce the level of trust current and potential patients.
- PMH continues to rely on regional partners, vendors, and the internet for mission critical services. For example, PMH relies on the internet to deliver many services and disruption to the internet can disable a variety of functions.

## TECHNOLOGY RECOMMENDATIONS BY PMH PILLAR

### PILLAR OF EXCELLENCE #1: PATIENT LOYALTY

- Meet or exceed specific PMH IT PMH Goals as listed in the PMH LEM.

### PILLAR OF EXCELLENCE #2: MEDICAL STAFF DEVELOPMENT

- Continue to grow Epic expertise through Epic Super Users and Health Stream education.
- IT Leadership will produce surveys to assess the needs of Medical Staff.

### PILLAR OF EXCELLENCE #3: EMPLOYEE DEVELOPMENT

- Create an IT project status board.
- Send out Quarterly IT Status Update to all staff.

### PILLAR OF EXCELLENCE #4: QUALITY

- Continue to enhance IT Security Posture.
- Implement new surveillance and security measures at hospital and clinics.
- Expand Virtual Desktop Infrastructure.
- Complete rollout of Epic Warpdrive to all users.  
Will significantly decrease the time it takes staff to login to Epic and chart on patients.
- Complete upgrading outdated Microsoft Office 2013 to Microsoft Office 365.
- Develop and implement new PMH onboarding and off boarding process.
- Continue to grow Epic expertise through Epic super users and Health Stream education.
- Implementation of new Ventilators into Epic.
- Growth in PMH participation in Epic UGM conference and Providence Community Technologies community events at UGM and in WA State.
- Implementation of Epic reporting dashboard

- Implementation of new external network circuits to increase redundancy and throughput.
- Complete required Providence Epic Upgrades.

#### PILLAR OF EXCELLENCE #5: SERVICES

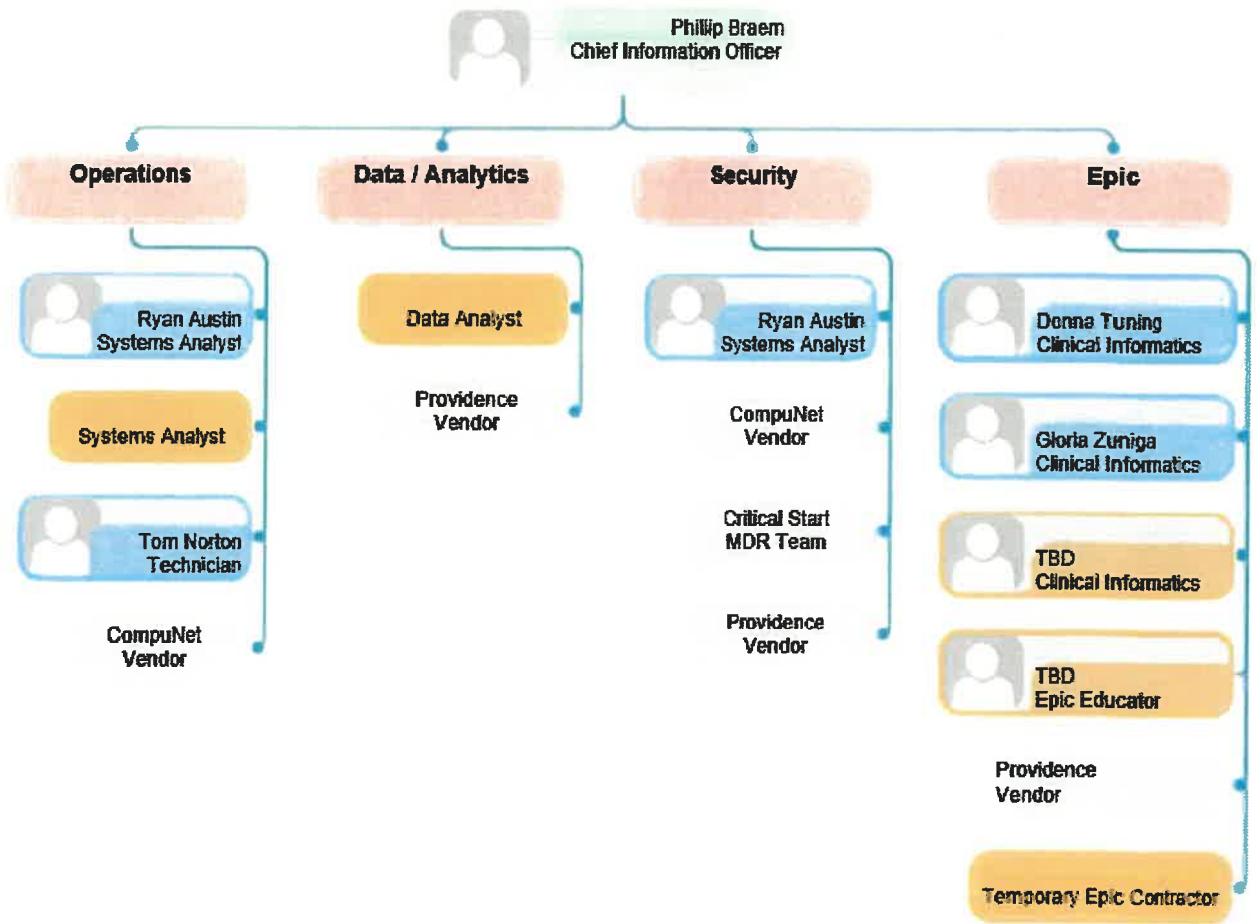
- Implement all new Telehealth solutions.
- Increase technology Storage.
- Enhance backup strategy – allow for quicker restoration.
- Implement Epic Cupid, if appropriate
- Implement new enterprise resource planning (ERP) software
- Implement iPads for Patients
- Implement any other Epic enhancements, if appropriate

#### PILLAR OF EXCELLENCE #6: FINANCIAL STEWARDSHIP

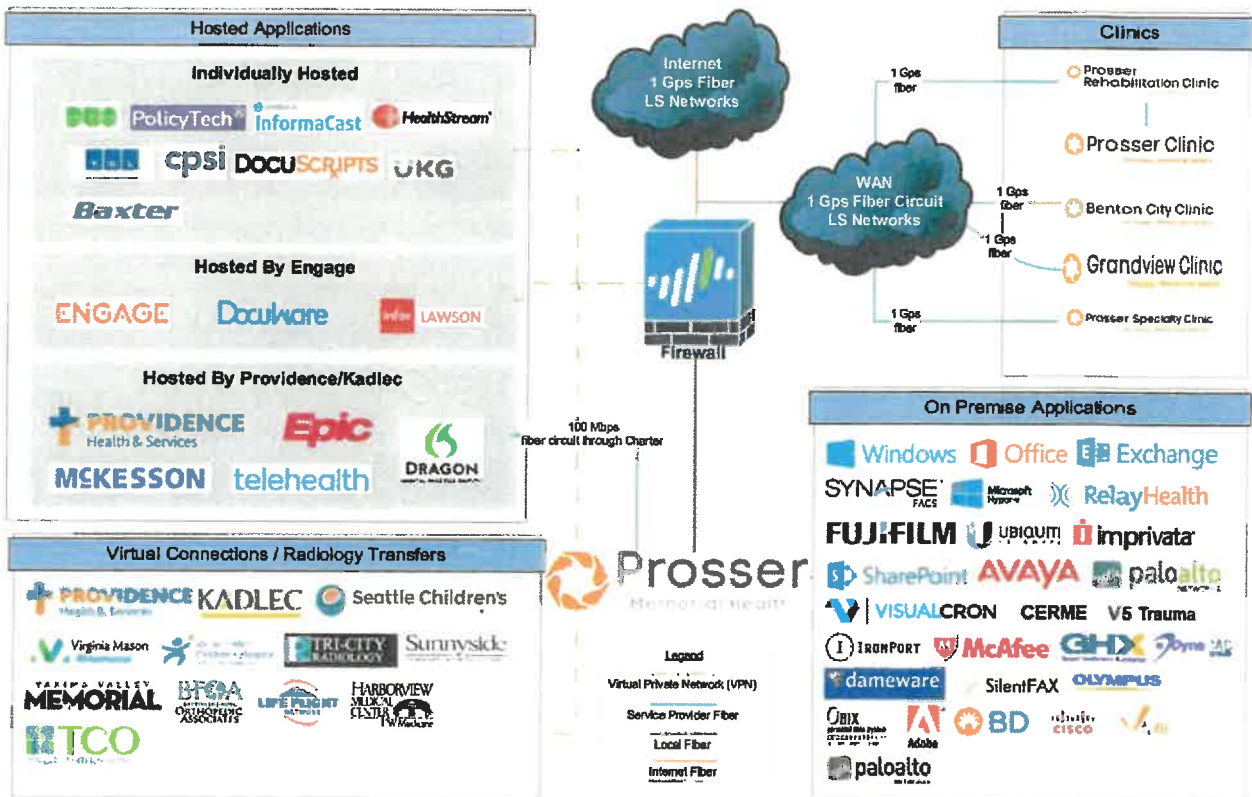
- Meet or exceed IT annual operating and capital budgets.

#### IT SERVICES

#### STAFF – CURRENT + FUTURE



## SUPPORTED SERVICES – HIGH LEVEL



## SECURITY POSTURE

- Multi Factor authentication – Duo Mobile
- Imprivata SSO – Auto Lock out after 10 minutes
- Palo Alto Cortex XDR –Applies machine learning at cloud scale to rich network, endpoint, and cloud data, so you can quickly find and stop targeted attacks, insider abuse and compromised endpoints
- Critical Start MDR – Integrates with Cortex XDR to detect every alert, resolve every alert and respond to breaches.
- MS Office 365 – Secure Email, Attachment scanning, Email security protection.
- Annual Penetration Testing via vendor.
- Annual GAP Analysis using CIS Controls
- Encrypt Mobile Devices – Manage Engine
- Desktop Encryption – Windows Bitlocker
- Phishing Testing and Training – Monthly
- Firewall - URL Filtering, SSL Decryption, Packet Inspection, Threat Analysis, Etc.
- Backups - Nightly

---

## GOALS

- Continue security awareness training via InfoSec
- Continually improve CIS Critical Security Controls V8 controls
- Implement Identity and Access management tools
- Implement security cameras and door access controls at clinics
- Implement silent alarms via Emergency alert system.
- Implement iPads for Patient Access
- Implement Company Wide Communication Platform



EXECUTIVE PACKET

*Epic*

Prosser Memorial  
Health

October 2022

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# Preface

## Rationale

The Executive Packet is a collection of data-driven reports from areas across your organization. Each page highlights areas where Epic's technology and automation could better support and advance your organizational goals. We hope you find them useful. Please let us know if any additional data points would be valuable.

## Notes on Data

Each page within the packet outlines the date ranges used for the data, the peer group you are being compared against, and the comparison date range for calculating trends (such as last quarter). Trending is calculated as "percent change from prior period." For example, a change from 40% to 50% would be represented as a 25% increase between periods.

Broadly speaking, most over-time metrics cover the previous 3-month period, while point-in-time metrics represent the most current value we were able to collect.

We use a variety of data sources in the packet: clinical, financial, and feature tracking metrics, feature usage information for your organization from Gold Stars and Nova release notes, and a variety of manually gathered data.

## Metric Glossary

If you'd like more information on the metrics in the packet, refer to the [Metric Glossary](#). Work with your BFF and TC if any metrics require additional exploration.

## Opportunities

Most pages now highlight opportunities—programs or features that we recommend to help you get the most out of Epic and to help advance your organizational goals. These recommendations are based on your data and are reviewed by your BFF and TC.

While reviewing each feature's expected implementation effort, keep the following definitions in mind:

- Minimal: Fewer than ten hours of build, with little or no preparation required
- Moderate: Between ten and fifty hours of build, with some significant training and operational planning needed
- Considerable: More than fifty hours of build, with significant training and operational preparedness needed

## Peer Grouping

You are being compared against the peer group **Community**: Organizations that are the primary health provider for a region, such as a rural area.

You can find a list of organizations included in benchmarking peer groups in the most recent Cogito Benchmarking Update post on the UserWeb (<https://userweb.epic.com/Topic/340>). Download the Participation PDF linked at the bottom of the post.



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<b>2 MyChart Diamonds Patient Experience</b> <i>Improve usage of key patient experience features and gain insight into your adoption compared to other Epic community members.</i>	<b>3</b>
<b>3 Provider Efficiency</b> <i>Help physicians maximize system use and efficiency. See how you compare on efficiency best practices and identify areas to further optimize.</i>	<b>7</b>
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# Interoperability Exchange Statistics

Standards-Based  
Exchange of  
Patient Records

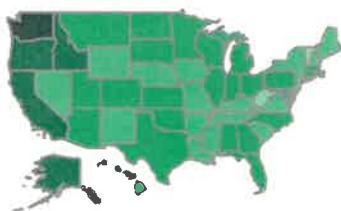


## Patient Records Exchanged- Washington Instance

You've exchanged patient records with organizations spanning

**50 STATES**

Darker shading indicates higher exchange volume



45,238,043

▶ Patient Record Exchanges in 2022 YTD

66,939,681

▶ Patient Record Exchanges in 2021

255,615,933

▶ Patient Record Exchanges Since Care Everywhere Go-Live in 2011

## Extending Beyond the Care Everywhere Network

Connections to Organizations Using Software Other Than Epic

7,605

### Top Carequality Networks by Exchange Volume

(Live Since: 05/25/2016)

■ Sent ■ Received

athenahealth

6,253,892

CommonWell

1,828,117

Kno2

1,575,952

GE Healthcare (Qvera)

892,899

NextGen

836,284

eClinicalWorks

519,965

NetSmart

38,329

### Federal Connections

Peer Group Adoption

DoD & VA

72 / 114

SSA

66 / 114

### Improving Your Exchange

Peer Group Adoption

Effective Authorization Policy

112 / 115

### Non-Treatment Use Cases

Peer Group Adoption

Chart Gateway

56 / 113

Payer Platform

38 / 114

## Top Trading Partners

■ Sent ■ Received

MultiCare Health System

7,086,570

Kaiser Permanente Washington

6,731,369

Clinics using athenahealth

6,372,258

UW Medicine - Washington

6,174,284

Everett Clinic and Polyclinic

5,622,291

APHL Informatics Messaging Services

3,689,697

Catholic Health Initiatives Pacific Region

2,592,651

## Improving Provider Access to External Data

Peer Group Adoption

Longitudinal Plan of Care

105 / 119

Show de-duplicated patient information from external & internal sources.

Happy Together Lab Results (Fundamental)

103 / 117

Include lab results from Care Everywhere in patient charts.

▶ 976k External Results Newly Visible in Chart Review (Last month)

Image Exchange

79 / 115

Send and receive reference-quality images via Care Everywhere.

Happy Together Imaging

39 / 119

Show internal & external imaging results together in the patient chart for a more complete picture.

## Streamlining Incoming Referrals

▼ You ■ Bottom 25% ■ Middle 50% ■ Median ■ Best 25%

### Electronic Referrals Received

49

Percent of Overall Volume

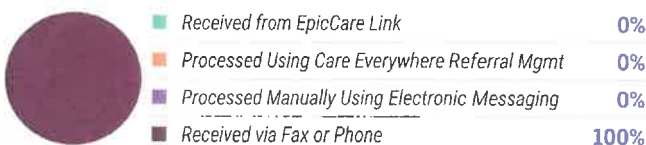
0.0%

0.0%

0%

2%

9%



### Features Improving Your Exchange

Peer Group Adoption

Shared Provider Directory

100 / 114

Automatic Electronic Referral Management

48 / 120

Feature Toggle Legend



# Opportunities

Minimal Effort
 Moderate Effort
 Considerable Effort
 Gold Stars Item
 Related to Honor Roll

Feature	Description	For Your Team (Search Galaxy using the title below)
<p><b>Effective Authorization Policy</b></p>	<p>By streamlining the authorization process, you can keep data-sharing barriers from making it difficult for providers who obtain clinical information through Care Everywhere to use that information in patient care.</p>	<p><a href="#">Authorization Setup</a></p>
<p><b>Electronic Referrals</b></p>	<p>Work with outside organizations to send more referrals electronically to reduce the calls, faxes, and time needed to get appointments and testing scheduled.</p>	<p><a href="#">Outside Provider Messaging Setup and Support Guide</a></p>
<p><b>Payer Platform</b></p>	<p>Payer Platform is designed to strengthen collaboration among patients, payers, and providers to reduce administrative burdens, lower costs, and improve patient care.</p>	<p><b>Prerequisites:</b> Payer Platform  <a href="#">Payer Platform Analyst Toolkit</a></p>

# MyChart Diamonds

## PATIENT EXPERIENCE

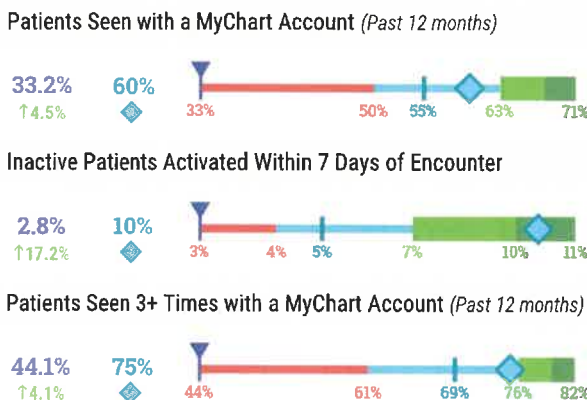


MyChart Diamonds are designed to help you and your patients get the most out of MyChart. Earning a diamond is a significant achievement and reflects that you have all key features in an area enabled and widely used by patients. You can earn a diamond by using every feature within a section and meeting the usage thresholds indicated by blue diamonds for certain benchmarked metrics within a section.

YES In Use   
  NO Not in Use   
  N/A Not Applicable   
  YES Always On   
 ▼ You   
 ■ Bottom 25%   
 ■ Middle 50%   
 ■ Median   
 ■ Best 25%   
 ■ Best 10%   
 ◆ Diamond Threshold



### Patient Activation & Engagement



Features	Peer Group Adoption
<input checked="" type="checkbox"/> Instant Activation (Triggered by staff)	114 / 119
<input checked="" type="checkbox"/> Instant Activation (Triggered automatically)	107 / 119
<input checked="" type="checkbox"/> Self-Signup	109 / 119
<input checked="" type="checkbox"/> Multilingual MyChart	49 / 72



### Self-Scheduling & Appointment Management

Features	Peer Group Adoption
<input checked="" type="checkbox"/> Scheduling (Direct scheduling)	115 / 119
<input checked="" type="checkbox"/> Scheduling as Guest (Open scheduling)	99 / 119

Features	Peer Group Adoption
<input checked="" type="checkbox"/> Scheduling by Invitation (Ticket scheduling)	75 / 119



### Pre-Visit Registration & Arrival

**Patient Self Check-In**

eCheck-In Steps Enabled    10 / 15

Features	Peer Group Adoption
<input checked="" type="checkbox"/> eCheck-In for All	81 / 120
<input type="checkbox"/> Welcome Kiosk Check-In	71 / 119

Features	Peer Group Adoption
<input checked="" type="checkbox"/> Patient Demographic Verification (Answers remembered >7 days)	75 / 120
<input checked="" type="checkbox"/> Hello, Patient	84 / 119
<input type="checkbox"/> E-registration for Emergency Department	5 / 119



### Telehealth

Features	Peer Group Adoption	Features	Peer Group Adoption
<input checked="" type="checkbox"/> Integrated Video Visits	106 / 119	<input type="checkbox"/> Visits Through Messaging (Asynchronous E-Visits)	51 / 119
<input checked="" type="checkbox"/> Text to Join Video Visits	68 / 119	▶ Volume: -	
		<input checked="" type="checkbox"/> Multiparty Video Visits	57 / 76



### Access to Clinical Information

#### Results Released for Inpatient & Outpatient Results

▶ Within 24 Hours

98.4% ◆ 90% ◆

51% ■ 100% ■

▶ Within 3 Days

- ■ 77% ■ 92% ■ 100% ■

#### Results Released for Inpatient & Outpatient Results

▶ Within 5 Days

- ■ 84% ■ 93% ■ 97% ■ 100% ■

▶ Not Released Within 31 Days

1.6% ■ ↓4.8%

0% ■ 3% ■ 6% ■ 12% ■



### Patient Journeys & Remote Patient Monitoring

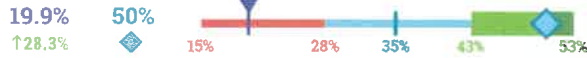
Features	Peer Group Adoption	Features	Peer Group Adoption
<input type="checkbox"/> Care Plans (Care Companion)	52 / 119	<input checked="" type="checkbox"/> Questionnaires	98 / 119
		▶ Volume: 1,768	



### Financial Experience

**Patient Payments Collected Online**  
(Past 3 months) **\$232k**

Patient Payments Collected Through MyChart & Welcome



Paperless Statements (% of total statements)



#### Features

Peer Group Adoption

<input checked="" type="checkbox"/> YES	Bill Pay	106 / 112
<input checked="" type="checkbox"/> YES	Guest Pay	112 / 119
<input checked="" type="checkbox"/> YES	Self Service Estimates	75 / 119
▶ Volume: 174		
<input checked="" type="checkbox"/> YES	Self Service Guest Estimates	82 / 112
<input type="checkbox"/> NO	Paperless Statements	98 / 112
<input checked="" type="checkbox"/> YES	Payment Plans	91 / 118
<input checked="" type="checkbox"/> YES	Financial Assistance	55 / 70
<input type="checkbox"/> NO	Balance Notifications	34 / 119



### Patient Communication

Average Message Turnaround Time (Days)



#### Features

Peer Group Adoption

<input checked="" type="checkbox"/> YES	Patient Message Attachments	116 / 119
<input checked="" type="checkbox"/> YES	Text Messages (SMS integration)	95 / 119



### Interoperability & Access

#### Features

Peer Group Adoption

<input checked="" type="checkbox"/> YES	Share Everywhere	115 / 119
<input checked="" type="checkbox"/> YES	Happy Together	114 / 119

#### Features

Peer Group Adoption

<input checked="" type="checkbox"/> YES	Download	117 / 119
<input checked="" type="checkbox"/> YES	Patient-to-Patient Sharing (Proxy invites)	98 / 117

# Opportunities

Minimal Effort

Moderate Effort

Considerable Effort

Gold Stars Item

Related to Honor Roll

Feature	Description	For Your Team <i>(Search Galaxy using the title below)</i>
<b>Fundamentals Utilization</b> 	Increase account activation and engagement with these tips we've heard from high-performing organizations in the Epic community.	<a href="#">Patient Experience Diamonds Playbook</a>
<b>Messaging Utilization</b> 	Improve message turnaround time with tips we've heard from high-performing organizations in the Epic community.	<a href="#">Patient Experience Diamonds Playbook</a>
<b>Financial Utilization</b> 	Review tips for improvement paired with an Epic-led service to help you overhaul the patient financial experience.	<a href="#">Patient Experience Services: Patient Financial Experience</a>
<b>Balance Notifications</b> 	Engage guarantors and collect self-pay balances by notifying guarantors of changes to their accounts, such as new balances, processed payments, payment methods that are close to expiring, and more.	<a href="#">Billing Notifications Setup and Support Guide</a>
<b>Paperless Statements</b> 	Increase patient satisfaction and save on costs by allowing patients to opt out of receiving statements in the mail and receive them only through MyChart.	<a href="#">MyChart Billing Setup and Support Guide: Paperless Billing</a>
<b>Care Companion</b> 	Care Companion allows you to provide an interactive plan of care to patients, facilitating care for complex conditions and giving clinicians the opportunity to respond to data from the patient.	<a href="#">MyChart Care Companion Setup and Support Guide</a>
<b>Visits Through Messaging</b> 	With E-Visits in MyChart, patients can get convenient care for non-urgent health concerns and physicians can efficiently care for patients and be reimbursed for the care they provide.	<a href="#">E-Visits Setup and Support Guide</a>
<b>Welcome Kiosk Check-In</b> 	Save time at the front desk by allowing patients to pay copays, sign consent forms and other documents, verify information, and answer questionnaires at a kiosk. The Welcome check-in also notifies clinical staff that the patient is ready to be seen.	<a href="#">Welcome Setup and Support Guide</a>
<b>E-registration for Emergency Departments</b> 	Patients roomed in the ED can eCheck-in on a mobile device to provide registration information, potentially saving registration staff a trip and affording the patient a little more privacy.	<a href="#">Allow Patients to Complete ED Self-Registration After Rooming</a>

# Provider Efficiency

See Signal (signal.epic.com), Epic's online portal for provider efficiency data trending, insights, and drilldowns.



Metrics include all providers unless otherwise indicated. IP Inpatient OP Outpatient ▼ You ■ Bottom 25% ■ Middle 50% ■ Median ■ Best 25%



## Provider Satisfaction

The KLAS Arch Collaborative found a correlation between charts closed same day in Epic, EHR satisfaction, and self-reported burnout. When providers can complete today's work today and close charts the same day as the visit, they are more likely to be satisfied with the EHR and less likely to report burnout.

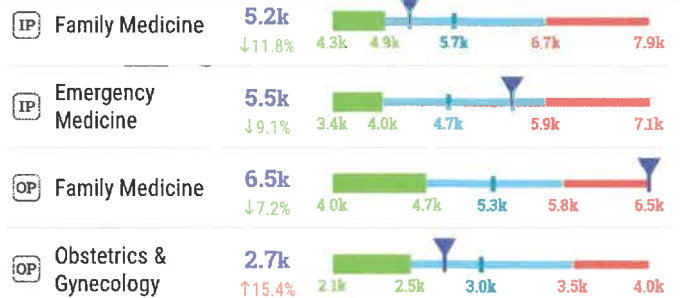


Here are key focus areas where Epic software can help your providers' ability to get their work done efficiently and effectively.

### Measure with Signal (Goal is one unique Signal user per week per 200 providers)



### Eliminate Note Bloat (Your largest specialties' note length in characters, compared to specialty peers)



### Reduce In Basket Clutter (Per provider)



Your Last In Basket Tune-Up **February 2022** ✓

### Expedite Care with Refill Protocols

YES Using Refill Protocols ✓

▶ Peer Group Adoption: 98 / 120

Your Last Refill Protocol Tune-Up **February 2022** ✓

### Make Advisories Actionable



Provider Advisories - Fewest Actions Taken **Count**

IP IP ALLERGY DATA EXISTS BUT UNVE... [10746] **445**

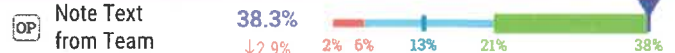
IP CONTRAST MEDIA SHORTAGE NOTICE ... [84905] **163**

OP - -

OP - -

Your Last BestPractice Advisory Tune-Up **April 2022** ✓

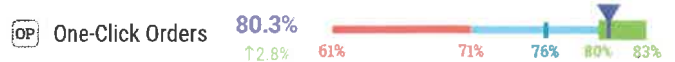
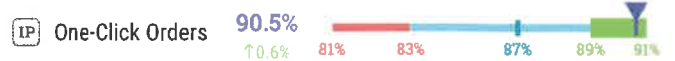
### Work with Your Clinical Team



### Save Clicks with User Settings (Per provider)



### Streamline Orders



Your Last Order Tune-Up **February 2022** ✓



**Feature Toggle Legend** YES  In Use

NO  Not in Use

YES  On, but Underutilized

N/A  Not Applicable to Your Organization

3  Using 3rd Party

MON YEAR  Available in a Future Version

Installing

# Opportunities

Minimal Effort Moderate Effort Considerable Effort Gold Stars Item Related to Honor Roll

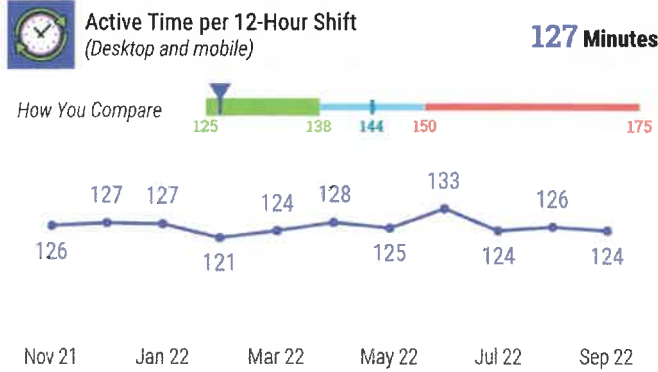
Feature	Description	For Your Team (Search Galaxy using the title below)
<p><b>Engage Providers in Design, Build, and Governance</b></p>	<p>Teach providers how to configure Epic to meet the needs of their specialties. Providers engaged with the EHR report higher overall satisfaction, support their colleagues, and give your IT staff time to focus on more complex projects.</p>	<p><a href="#">Physician and Clinical Content Builders</a></p>
<p><b>Measure with Signal</b></p>	<p>Understand how providers at your organization spend time in the EHR and identify opportunities to improve efficiency through targeted workflow and training improvements.</p>	<p><a href="#">Signal Quick Start Guide</a></p>
<p><b>Record Training in Signal</b></p>	<p>Your staff can monitor and celebrate the impact of their training efforts on key efficiency metrics by documenting the training they do with providers.</p>	<p><a href="#">Training Data in Signal</a></p>
<p><b>Provide Ongoing Training</b></p>	<p>Research shows that three to five hours of ongoing training each year improves provider satisfaction and helps users feel a greater sense of ownership over their EHR workflows.</p>	<p><a href="#">Ongoing Training Strategy - Mastery Training</a></p>
<p><b>Eliminate Note Bloat</b></p>	<p>Identify sources of note bloat—which tripled between 2009 and 2020—and help providers focus their notes on what's clinically relevant.</p>	<p><a href="#">Bending the Note Curve Workshop: Combat Note Bloat at Your Organization</a></p>
<p><b>Reduce In Basket Clutter</b></p>	<p>Identify opportunities to reduce the number of In Basket messages sent to users and pools, more appropriately route messages, and prioritize users for In Basket efficiency training.</p>	<p><a href="#">In Basket Tune-Up</a></p>
<p><b>Work with Your Clinical Team - Notes</b></p>	<p>Have support staff start notes so that providers can focus on patient care and clinical decision-making.</p>	<p><a href="#">Improve Clinician Efficiency and Wellness with Epic Strategy Handbook: Team Based Care</a></p>
<p><b>Work with Your Clinical Team - Orders</b></p>	<p>Have support staff tee up refills and start the orders needed to close care gaps so that providers can focus on patient care and clinical decision-making.</p>	<p><a href="#">Improve Clinician Efficiency and Wellness with Epic Strategy Handbook: Team Based Care</a></p>
<p><b>Save Clicks with User Settings</b></p>	<p>Providers who tailor their workflows to suit their preferences are twice as likely to feel highly satisfied with the EHR. Help your providers get there by introducing them to Epic's personalization options.</p>	<p><a href="#">User Settings Strategy Handbook</a></p>

# Acute Care Nursing

▼ You ■ Bottom 25% ■ Middle 50% ■ Median ■ Best 25%

## Track Time in Epic (5 second inactivity timeout)

Monitor active time in system and improve end user efficiency based on 2,344 shifts across 455 nurses from November 1, 2021 - September 29, 2022.



## Active Time in Desktop & Mobile by Category (Minutes)



## Focus Areas for Outreach & Coaching

Coach workflows and train for efficiency in the largest departments with the largest variance in system use. 1 Standard Deviation Average

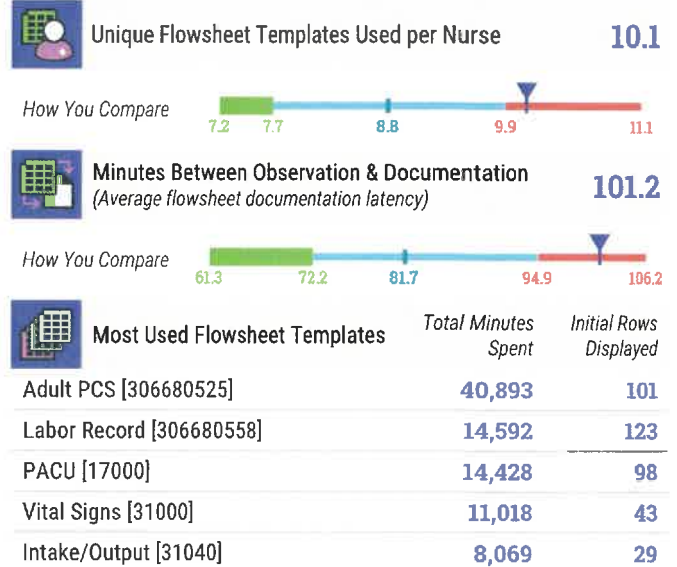
Department	Nurses	Active Time in Minutes
CC WPM EMERGEN...	25	~136
CC WPM MED SURG	36	~115
CC WPM LABOR A...	24	~94

## Reduce Documentation Burden Through Automation

Features	Peer Group Adoption
<input checked="" type="radio"/> Ventilator Documentation from Devices	90 / 114
<input checked="" type="radio"/> Infusion Pumps Programmed from Orders	51 / 108
<input type="radio"/> Deterioration Index Calculations	47 / 114
<input type="radio"/> Early Sepsis Detection Calculations	67 / 114
<input type="radio"/> Fall Risk Calculations	20 / 114
<input checked="" type="radio"/> Patient Workload Scores Assigned	70 / 113
<input type="radio"/> Assignments from Imported Nurse Staff Schedule	47 / 112

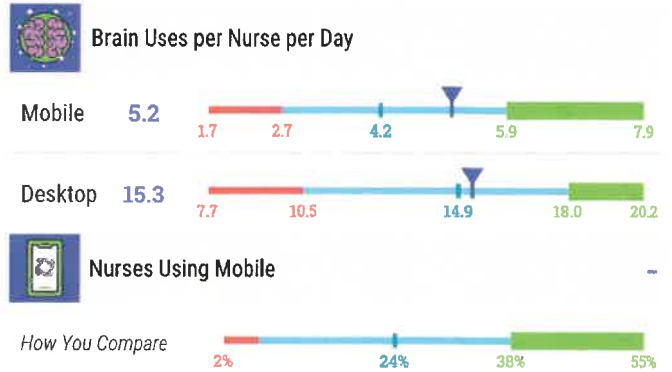
## Provide Lean Flowsheets

Enable nurses to document efficiently and in real time.

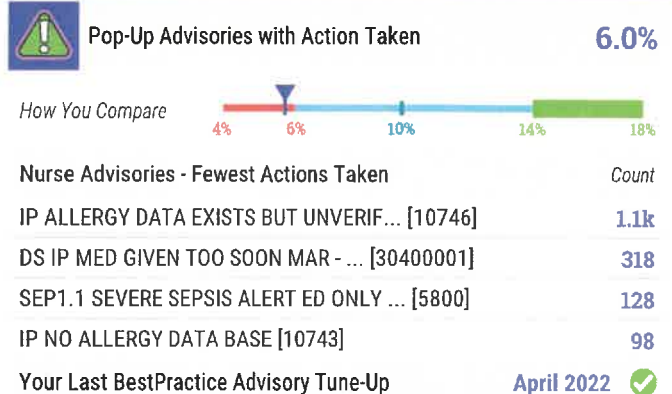


## Keys for Nursing Satisfaction & Efficiency

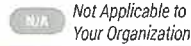
Rover and the Brain task list are correlated with higher nursing EHR satisfaction according to correlative studies by the KLAS Arch Collaborative.



## Make Advisories Actionable



Feature Toggle Legend



# Opportunities

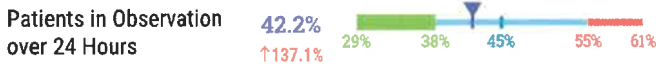
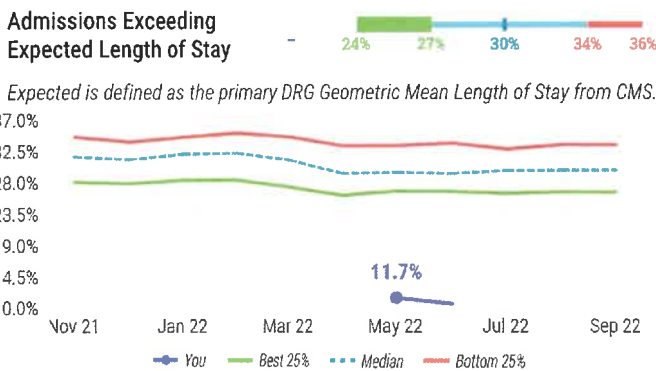
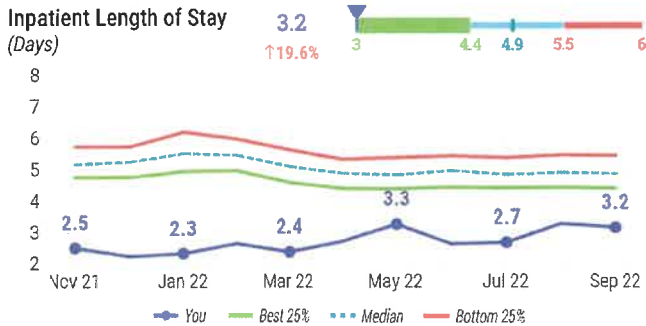


Feature	Description	For Your Team (Search Galaxy using the title below)
<b>Targeted Rounding and Outreach</b> 	Connect with nurses directly to train efficiency tips, reinforce process and policy, and gather feedback to identify ways to improve their experience.	<a href="#">Talk to Nurses to Gather Qualitative Feedback</a>
<b>Provide Lean Flowsheets (More Real-time Documentation)</b> 	Help nurses do more real-time, discrete flowsheet documentation by following an action plan to streamline content and share efficiency tips.	<a href="#">Nurse Efficiency - Focus on Flowsheets</a>
<b>Make Advisories Actionable</b> 	Minimize interruptions and alert fatigue by focusing your organization's BestPractice Advisories on the most important interventions that are likely to require action.	<a href="#">Run the BestPractice Advisory Tune-Up</a>
<b>Provide Lean Flowsheets (Fewer Templates)</b> 	<a href="#">A study of nursing flowsheet usage</a> shows that each flowsheet template increases nurse time by 10%. Consolidate templates to save that documentation time.	<a href="#">Nurse Efficiency - Focus on Flowsheets</a>
<b>Early Detection of Sepsis</b> 	Identify patients who are at risk of developing sepsis so that your organization can intervene before patients deteriorate.	<b>Prerequisites:</b> Predictive Analytics <a href="#">Cognitive Computing Model Brief: Early Detection of Sepsis</a>
<b>Inpatient Risk of Falls</b> 	Automatically identify patients who are at risk of falling so that you can better prevent the adverse event with minimal additional input from clinicians or operational staff.	<b>Prerequisites:</b> Predictive Analytics <a href="#">Cognitive Computing Model Brief: Inpatient Risk of Falls</a>
<b>Assignments from Imported Nurse Staff Schedule</b> 	Charge nurses can review the many factors that influence staffing decisions—such as patient workload acuity and expected transfers—and make their assignments, all in a single place.	<a href="#">Configure the Nursing Assignment Wizard to Streamline Patient Assignments</a>
<b>Deterioration Index</b> 	Proactively treat clinical deterioration with guidance from risk assessments that are updated when clinicians add to a patient's chart.	<b>Prerequisites:</b> Predictive Analytics <a href="#">Cognitive Computing Model Brief: Deterioration Index</a>

# Patient Throughput

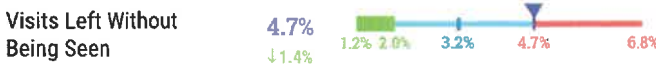
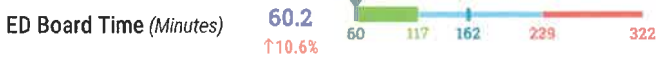
▼ You ■ Bottom 25% ■ Middle 50% ■ Median ■ Best 25% # Peer Group

## Monitor & Improve Length of Stay (LoS)



Use On-Demand Analytics for Length of Stay 42 / 117

## Emergency Department (ED) Throughput IP = Inpatient



Monitor ED Throughput Bottlenecks in Real Time 101 / 115

▶ Average Daily Views: **255.3 (2.7)**

Use a Single Activity to Document ED Disposition 89 / 114

Predict ED Patients Needing IP Beds in Advance 2 / 114

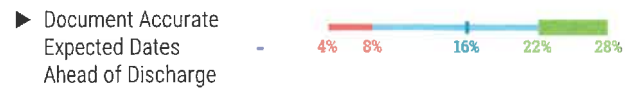
▶ ED Admissions Predicted in Advance: -

## Plan for & Monitor Discharge Times

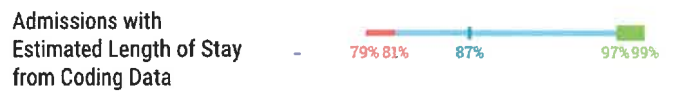


00:00 - 10:00  
 10:00 - 12:00  
 Your Discharge Time of Day Distribution  
 12:00 - 14:00  
 14:00 - 16:00  
 16:00 - 18:00  
 18:00 - 24:00

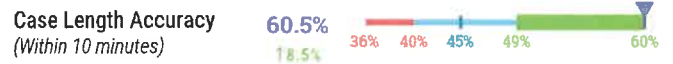
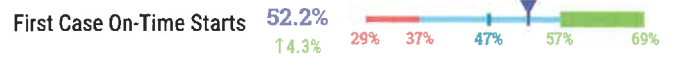
Plan Ahead for Discharges with Expected Dates 110 / 113



Use Real-Time Dashboard Components for Planning 43 / 113



## Perioperative Department Throughput



Plan Ahead of Surgical Admission Bed Needs 87 / 111

Feature Toggle Legend



# Opportunities



Feature	Description	For Your Team (Search Galaxy using the title below)
<p><b>Track Discharge Milestones and Delays</b></p>	Track progress toward discharge, and highlight delays in discharging the patient on time so that everyone stays in-the-know about your patients' readiness for discharge.	<a href="#">Discharge Planning Build Sherlock Checklist: Discharge Milestones and Delays (Sherlock)</a>
<p><b>Use Real-Time Dashboard Components for Planning</b></p>	Track how your hospital is doing at completing discharge milestones in real-time, and monitor current information and trends in regard to discharge delays.	<a href="#">Discharge Planning Build Sherlock Checklist: Discharge Monitor Dashboard (Sherlock)</a>
<p><b>Implement Capacity Command Center Dashboards</b></p>	Tackle patient flow and capacity issues in real time and from multiple angles with Epic's suite of Capacity Command Center dashboards, which can be used on both wall-mounted monitors and individual workstations.	<a href="#">Grand Central Reporting Setup and Support Guide: Capacity Command Center Considerations (Galaxy)</a>
<p><b>Hold a Patient Throughput Review</b></p>	Review your key patient throughput indicators with Epic experts and your executive team to identify new ways that Epic can help you improve throughput outcomes.	
<p><b>Predict ED Patients Needing IP Beds in Advance</b></p>	Use the ED Likelihood to Occupy a Bed predictive model to help bed planners and house supervisors proactively prepare for patients, decrease bed turnaround time, and keep throughput running smoothly.	<b>Prerequisites:</b> Cognitive Computing, Enhanced Data Analytics, and Nebula <a href="#">Inpatient Cognitive Computing Setup and Support Guide: Configure the Likelihood to Occupy a Bed Model (Galaxy)</a>
<p><b>Include Providers in the ED Triage Process</b></p>	Send low-acuity ED patients home sooner by providing physicians with a streamlined workflow to queue up testing, diagnosis, and treatment during triage.	<a href="#">ED Triage Setup and Support Guide: Let Physicians Start Documenting During Triage (Galaxy)</a>
<p><b>Implement the Remaining Length of Stay Predictive Model</b></p>	Help clinicians see into a patient's future with the Remaining Length of Stay predictive model. Clinicians can use the model in their discharge planning workflows as a guide when they enter the patient's expected discharge date.	<b>Prerequisites:</b> Cognitive Computing, Enhanced Data Analytics, and Nebula <a href="#">Cognitive Computing Model Brief: Remaining Length of Stay (Galaxy)</a>
<p><b>Use On-Demand Analytics for Length of Stay</b></p>	Decrease length of stay by investigating how often patients exceed the expected length of stay and the contributing factors of that length of stay. Identify opportunities for improvement or evaluate the effectiveness of initiatives.	<b>Prerequisites:</b> Hospital Billing and SlicerDicer DRGs SlicerDicer Data Model Sherlock Checklist (Sherlock)
<p><b>Improve First Case On-Time Starts</b></p>	A late start for a case can lead to subsequent case delays or cancellations. For example, remind patients about upcoming cases and appointments to reduce no-shows. With Procedure Pass, document the completion of pre-surgical tasks and prevent delays and day-of cancellations.	<a href="#">Improving On Time Starts Strategy Handbook (Galaxy)</a>

# Financial Pulse Index

This page provides a peer-based comparison of some key revenue cycle measures. It highlights areas of strength and opportunities to improve financial performance.

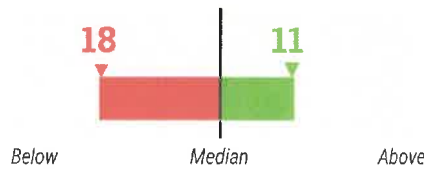
### Financial Pulse Trophies

Your gold (best 5%), silver (best 10%), and bronze (best 25%) metrics compared to the peer group.



### Metrics Compared to Median

The number of metrics above and below the peer group median.



### Metric Movement (Since last quarter)

The # of metrics that improved, dropped, or stayed the same compared to last quarter.

Improved >5%	9
Within 5% of Prior Value	11
Declined >5%	8

**Metrics** A selection of available metrics is below. Use Financial Pulse to see your performance for all available metrics.

Hospital Billing				% Change	Your Value	Best 25%	Legend: You (blue triangle), Bottom 25% (red), Middle 50% (light blue), Median (dark blue), Best 25% (green), Best 10% (dark green)			
!	AR Days	↑1.1%	54.6	34.7	25.3	34.7	45.2	54.2	72.9	
!	Net Collection Ratio	↓1.5%	87.9%	95.0%	74.0%	88.2%	92.5%	97.5%		
!	Insurance Net Collection Ratio	↓3.8%	92.2%	98.2%	83.9%	94.6%	96.9%	99.4%		
	Self-Pay Net Collection Ratio	↑3.1%	43.0%	57.1%	9.9%	27.4%	42.8%	57.1%	71.2%	76.9%
!	Clean Paid Claims	↑4.4%	33.0%	66.9%	29.0%	49.1%	58.7%	66.9%	75.5%	
	DNFB Days	↑8.5%	7.7	7.1	5.1	7.1	8.8	10.9	16.3	
	Primary Denial Rate	↑1.7%	11.7%	9.2%	6.5%	9.2%	11.6%	14.8%	22.2%	
!	Insurance 90+	↓6.1%	26.3%	16.2%	8.9%	11.3%	16.2%	20.7%	26.2%	36.2%
Professional Billing				% Change	Your Value	Best 25%	Legend: You (blue triangle), Bottom 25% (red), Middle 50% (light blue), Median (dark blue), Best 25% (green), Best 10% (dark green)			
!	AR Days	↓34.1%	65.9	29.1	21.5	25.2	29.1	33.7	40.0	65.9
!	Clean Paid Claims	→0.0%	0.0%	39.0%	0.0%	8.5%	22.6%	39.0%	54.2%	62.2%
✓	Pre-AR Days	→0.0%	0.0	1.8	0.0	1.0	1.8	2.9	4.8	8.6
	Insurance 90+	↓60.5%	16.7%	15.3%	6.2%	10.2%	15.3%	24.4%	31.7%	51.4%

**Information**

**Hospital Billing**

Service Area CC WPM PROSSER MEMORIAL HEALTH SA

Peer Group All Epic

**Professional Billing**

Service Area CC WPM PROSSER MEMORIAL HEALTH SA

Peer Group All Epic

**Financial Pulse Trophies**

**Hospital Billing Trophies (1 / 18)**

Claim Error Days

**Professional Billing Trophies (2 / 11)**

Self-Pay 90+

Aged 90+

**Financial Pulse Leaderboard** *The leaderboard is generated by comparing your performance to the entire Epic community.*

No metrics qualify for the leaderboard.

**Opportunities**



Feature	Description	For Your Team
---------	-------------	---------------

<p><b>Improve Your Clean Claims Rate</b></p>	<p>Get to the root cause of billing errors and bottlenecks with the HB Billing and Claims Dashboard. Managers can identify manual touches and improve upstream workflows to prevent future errors.</p>	<p><a href="#">HB Billing and Claims Dashboard (Data Handbook)</a></p>
<p><b>Improve Your Collection Ratio</b></p>	<p>Identify opportunities to improve your collection ratio. Drill down by criteria such as financial class, payer, and provider to review write-off reasons and fix the root cause of unnecessary write-offs.</p>	<p><a href="#">Revenue Cycle Reporting Strategy Handbook: Net Collection Ratio (Galaxy)</a></p>
<p><b>Monitor Workqueue Status and Performance</b></p>	<p>Improve accountability and identify workqueues that need attention, such as workqueues with aging items or unclear ownership, so supervisors can develop plans to address the issues.</p>	<p><a href="#">HB and PB Workqueue Monitoring Reporting Deep Dive (Galaxy)</a></p>
<p><b>Improve Clinical Coding Quality</b></p>	<p>Speed up billing by using the Clinical Coding Quality Review report to identify areas where coders correct charges filed from clinical documentation and educate providers with frequent charge errors.</p>	<p><a href="#">PB Manager - Reporting Quick Start Guide (Galaxy)</a></p>

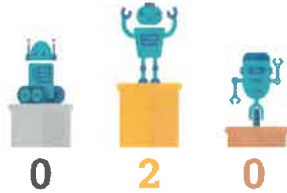
# Automation Pulse Index



This page gives a quick glimpse into how often key Revenue Cycle activities take place without anyone at your organization needing to lift a finger. You can learn about opportunities to improve automation within your Revenue Cycle by reviewing the Financial Programs on the UserWeb.

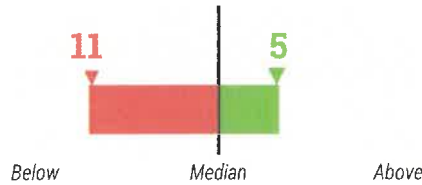
### Automation Pulse Trophies

Your gold (best 5%), silver (best 10%), and bronze (best 25%) metrics compared to the peer group.



### Metrics Compared to Median

The number of metrics above and below the peer group median.



### Metric Movement (Since last quarter)

The # of metrics that improved, dropped, or stayed the same compared to last quarter.

Improved >5%	3
Within 5% of Prior Value	12
Declined >5%	1

**Metrics** A selection of the available metrics is below. Use Automation Pulse to see your performance for all available metrics.

	% Change	Your Value	▼ You	Bottom 25%	Middle 50%	Median	Best 25%	Best 10%
✓ Payment Plans Using Auto Pay	↑1.7%	98.2% (106.0 / 108.0)	98.2%	25.7%	52.4%	66.4%	75.5%	84.7%
Coverages Auto Created via RTE	↑12.5%	45.9% (0.8k / 1.7k)	45.9%	1.1%	21.6%	37.0%	49.5%	60.5%
Estimates Auto Created	↑0.5%	86.8% (419.0 / 483.0)	86.8%	12.9%	75.7%	93.2%	100.0%	
! HB Charges Triggered Clinically	↑0.5%	97.4% (58.7k / 60.3k)	97.4%	93.3%	98.2%	99.3%	99.9%	
! HB Outpatient Accounts Coded by SVC	↑8.2%	33.1% (2.9k / 8.6k)	33.1%	11.8%	42.3%	66.5%	84.9%	96.2%
! HB Consecutive Accounts Auto Combined	→0.0%	0.0% (0.0 / 187.0)	0.0%	0.0%	30.4%	55.6%	77.3%	95.3%
! HB Late Charges Auto Processed	→0.0%	0.0% (0.0 / 263.0)	0.0%	0.0%	34.0%	54.8%	74.3%	90.6%
HB Claim Status Messages Received	↓6.3%	50.2% (8.1k / 16.1k)	50.2%	1.8%	19.4%	39.4%	53.9%	67.4%
! HB Claim Attachments Auto Generated	→0.0%	0.0% (0.0 / 126.0)	0.0%	0.0%	57.8%	100.0%		
! HB Insurance Payments Auto Posted	↑2.7%	79.7% (13.7k / 17.3k)	79.7%	79.7%	92.8%	95.9%	99.3%	



**Information**

<b>Hospital Billing</b>		<b>Professional Billing</b>	
Service Area	CC WPM PROSSER MEMORIAL HEALTH SA	Service Area	CC WPM PROSSER MEMORIAL HEALTH SA
Peer Group	All Epic	Peer Group	All Epic

**Automation Pulse Trophies**

- HB Payment Plans Using Auto Pay
- PB Payment Plans Using Auto Pay

**Automation Pulse Leaderboard** *The leaderboard is generated by comparing your performance to the entire Epic community.*

No metrics qualify for the leaderboard.

**Opportunities**



Feature	Description	For Your Team
<p><b>Optimize Clinical Charging Workflow</b></p>	Reduce coding time and improve accuracy by automatically filing charges that include the necessary clinical information when clinical orders are placed or resulted.	<a href="#">Charge Capture Workflow Recommendation Toolkit (Galaxy)</a>
<p><b>Code Simple Visits Automatically</b></p>	Automatically code simple hospital accounts, such as lab and radiology visits, using information from the patient's visit, which saves time and allows coders to focus on complex cases.	<a href="#">Simple Visit Coding Setup &amp; Support Guide (Galaxy)</a>
<p><b>Automate Consecutive Account Combinations</b></p>	Auto-combine consecutive accounts in certain situations, such as same-day outpatient accounts and accounts that meet the 72-hour rule, allowing users to focus on more complex scenarios.	<a href="#">Consecutive Accounts Setup &amp; Support Guide (Galaxy)</a>
<p><b>Automate Late Charge Processing</b></p>	Save staff time and allow them to focus on more complex accounts by auto-processing late charges meeting specific criteria. Most scenarios can be automated.	<a href="#">Resolute Hospital Billing Foundation System Enhancement Directory: Automate Late Charge Account Processing (Galaxy)</a>



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Dear PMH,  
Thank you for sponsorship of our robotics team. we are, excited to represent prosser when we go to competition, without your help, this would not have been possible. We are so grate full.

Team Bossbots

Thank you so much for your generous donation! Your support means so much. We hope to make Prosser proud at qualifiers.  
Sincerely, Michelle OBrien (coach)



Thank you! - Mystery Morris

Thank You so much! - Anoushka  
Thank you so much! - Kassandra Flack

We appreciate you!  
- Sydney Emale

Thank you!  
- Mali

Thank you so much!  
- Karen Delgado

Thank You!!  
- Tessa

Thank You!  
- Hammie

Thank you!  
- Joslyn

Thank you!  
- Kayda - Aliya

Thank you so much!  
- Hooper Emma

Thank you

- Noelia

Thank you!  
- Hanna

Thank you so much!  
- Criste

appreciate it

Thank you!  
- Cassie

Thank you, Prosser Memorial Health for your support!  
- PHS Girls Soccer

Thank you!

- Alisa

Thank you!  
- Rupita

Thank you!  
- Miranda

Thank you  
- Estefania

Thank you so much!  
- Stephanie

Thank you!  
- Ari

Thank you!  
- Brianna

Thank you!  
- Kaitlyn  
- Destiny



Home Of The Mustangs




Shannon,

Thank you to you and your team for your partnership at Benton PUD's annual Senior Day event in Prosser.

The event was a great success and we look forward to partnering with the hospital in the future!

- Jenny Sparks  
Manager of Customer  
Engagement

Thank you for your generosity. It will help us tremendously.  
Debbie

Thank you so much!  
-Madison  
I thank you for all that you do!   
-Audrey

Thank you  
Elyse

Thank you!  
-Mariah

Thank you for your support!  
Call J, MSW

We appreciate you!  Shelby

Thank you  
Vicky

Thank you for your generosity  
-Diana

Thank you!  
Selma

Thank you!  
Amy

Thank you!  
Cass

Robert

Your generosity is appreciated! Michele

Prosser Memorial Health-

Thank you!

Thank you so much for your generous support of Heartlinks!

We appreciate you!  
Charlotte

Lise S.  
W. Thomas  
Cecilia

Thank you for enabling us to deliver quality care!  
Mercedes

Thank you!  
Murray

Thank you  
MBR

Thank you  
Jasim



Heartlinks

Hospice & Palliative Care

**GREAT FUTURES START HERE.**



**BOYS & GIRLS CLUBS  
OF BENTON AND FRANKLIN  
COUNTIES**

Artwork by: Annalise Age: 10

Dear Shannon,

Thank you for being an Angel  
Sponsor + supporting youth!

Because of you, **Great Futures Start Here.**





**Craig Marks**

---

**From:** Shannon Hitchcock  
**Sent:** Thursday, November 10, 2022 12:10 PM  
**Subject:** Great Job GI / Surgery Center Team

**Follow Up Flag:** Follow up  
**Flag Status:** Flagged

Team,

Sara Dawson received this thank you note from a GI patient. Great job everyone!  
#ThisIsHowWeCare

Nov. 5, 2022  
Dear Sara Dawson,  
I wish to take a moment to commend your gastroenterology dept.  
I had a colonoscopy on Wed. Nov. 2. From the time I was scheduled to leaving the hospital after the procedure, I received nothing but exceptional, caring service.  
As you all know, this procedure isn't fun. You were gracious, professional, and kind. I am sure I am only one of the many grateful folks who have received your care. Your actions are a reflection of your souls.  
Thank you to each of you.

**Shannon Hitchcock**  
Chief Communications Officer / E.D. of the Foundation | Community Relations  
**PROSSER MEMORIAL HEALTH**  
723 MEMORIAL ST | PROSSER, WA 99350  
o: (509) 786 6601  
[shannonh@prosserhealth.org](mailto:shannonh@prosserhealth.org) | [www.prosserhealth.org](http://www.prosserhealth.org)



## Craig Marks

---

**From:** Shannon Hitchcock  
**Sent:** Thursday, December 1, 2022 12:58 PM  
**To:** !Administration  
**Subject:** PMH Sponsorship of Cookies with Santa

Team,

Prosser Memorial Health sponsors the Cookies with Santa event the day after the Boys & Girls Club Festival of Trees. This is a free community event where families can see all of the beautifully decorated Christmas trees that were auctioned off, get their pictures taken with Santa, and decorate cookies.

We send the Boys & Girls Club with lots of giveaways for the kiddos too.

Here are some pictures of the event I wanted to share with you: <https://ncphotographywa.passgallery.com/-cookieswithsanta/gallery>

### Shannon Hitchcock

*Chief Communications Officer / E.D. of the Foundation | Community Relations*

**PROSSER MEMORIAL HEALTH**

**723 MEMORIAL ST | PROSSER, WA 99350**

o: (509) 786 6601

[shannonh@prosserhealth.org](mailto:shannonh@prosserhealth.org) | [www.prosserhealth.org](http://www.prosserhealth.org)



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November 13, 2022

To the workers at Prosser Memorial Health and all other volunteers,

Thank you so very much on behalf of myself and I am certain all of the veterans and their family members who were the recipients of your Veteran's Day hospitality.

The breakfast was fantastic. The gifts were above and beyond what could be expected by anyone. Just a group of fine community members coming together to produce a really memorial day for veterans.

Of course, Prosser Memorial Health has this community mindedness reputation already. This was just an extension thereof.

Thank you also to the folks at the Senior and Community Center for providing the space for the get together to take place in.

May God bless and keep each and every one of you who took your own personal time, talents, and effort towards this event.

Thank you! Keith Hicks 😊



**Prosser**  
Memorial Health



# Medical Staff Model & Provider Recruitment/Succession Plan

FY 2017-2025

[ProsserHealth.org](http://ProsserHealth.org)

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Medical Staff Development Plan Analysis	Page 9-15
<small>Tables present the needs assessments in each community by Primary, Secondary and Tertiary Care</small>	
Primary/Secondary Service Area Provider List	Page 16-22



October 1, 2021

This Medical Staff Model and Provider Recruitment Plan provides us with a roadmap for provider recruitment, retention, and succession planning for the next few years. A roadmap alone does not guarantee a successful journey, however, the data presented strongly suggests provider recruitment must remain a top priority for the coming years. The Model will be used as a tool to not only better understand current and future healthcare needs of our Service Area, but also to guide our critical evidence-based decisions to address those needs and improve the lives of the residents in the PMH Primary and Secondary Service Areas.

#### Methodology/Overview

The Model is based upon many different data sources including the Merritt Hawkins Cooper Physician Requirements Model, US Census Bureau, and secondary data from local sources. The most recent data available was collected for this report and five-year trends are presented:

1. Population data was divided among five logical geographic communities: Prosser, Grandview, Sunnyside, Benton City, and Mabton. The purpose of the division was to align with the current primary and secondary PMH service areas. Population growth was also factored into the model to give an overall picture of each community;
2. All physicians and advanced practice clinicians in each community service area were identified, regardless of affiliations or specialty;
3. The Cooper Model (which indicates the number of providers by specialty that a community can financially support) was used to identify the physician needs for the communities based on a 100% market share goal; and
4. For each community, the provider shortfall is noted. From this evidence-based data, the recruitment plan can begin which will drive our strategic planning and budgeting.

As you review this Medical Staff Model and Provider Recruitment Plan, you will note the obvious: we have plenty of work to continue. If you have any questions, comments or suggestions for improvement, please contact us. We welcome your input in the process as we work together to design the future Prosser Memorial Health.

## Revenue by Specialty

### UNITES STATES NET REVENUE BY PHYSICIAN SPECIALTY

Specialty	In Patient Discharges	Net In Patient Revenue (\$ in thousands)	Net Out Patient Revenue (\$ in thousands)	Total Net Revenue (\$ in thousands)
*With the use of Hospitalist.				
Family Practice*	156	\$92	\$213	\$305
Internal Medicine*	11	\$103	\$172	\$285
Pediatrics*	n/a	n/a	n/a	\$856
OB/GYN*	144	\$759	\$481	\$1,240
Hospitalist	486	\$3,936	\$190	\$4,127
Cardiology	104	\$1,359	\$1,010	\$2,368
General Surgery	112	\$1,522	\$852	\$2,374
Gastroenterology	15	\$103	\$728	\$831
Neurology	11	\$160	\$387	\$574
Oncology	57	\$751	\$2,629	\$3,380
Otolaryngology	16	\$163	\$608	\$771
Orthopedic Surgery	95	\$1,526	\$638	\$2,164
Podiatry	5	\$64	\$260	\$324
Mental Health Provider	344	\$1,458	\$173	\$1,642
Pulmonology	65	\$981	\$233	\$1,214
Urology	39	\$368	\$755	\$1,123

Source: James Lifton, "Gauging the financial impact of physicians on hospitals." Healthcare Financial Management Association; April 2012.

### AVERAGE ANNUAL REVENUE BY SPECIALTY

Cardiovascular Surgery	\$3,697,916
Cardiology (Invasive)	\$3,484,375
Neurosurgery	\$3,437,500
Orthopedic Surgery	\$3,286,764
Gastroenterology	\$2,965,277
Hematology/Oncology	\$2,855,000
General Surgery	\$2,707,317
Internal Medicine	\$2,673,387
Pulmonology	\$2,361,111
Cardiology (Non-Invasive)	\$2,310,000
Urology	\$2,161,458
Family Medicine	\$2,111,931
Neurology	\$2,052,884
OB/GYN	\$2,024,193
Otolaryngology	\$1,937,500
Psychiatry	\$1,820,512
Nephrology	\$1,789,062

Pediatrics	\$1,612,500
U.S. Average Net Revenue per Provider (2018)	\$2.4 million
PMH Average Net Revenue per Provider (2018)	\$1.5 million

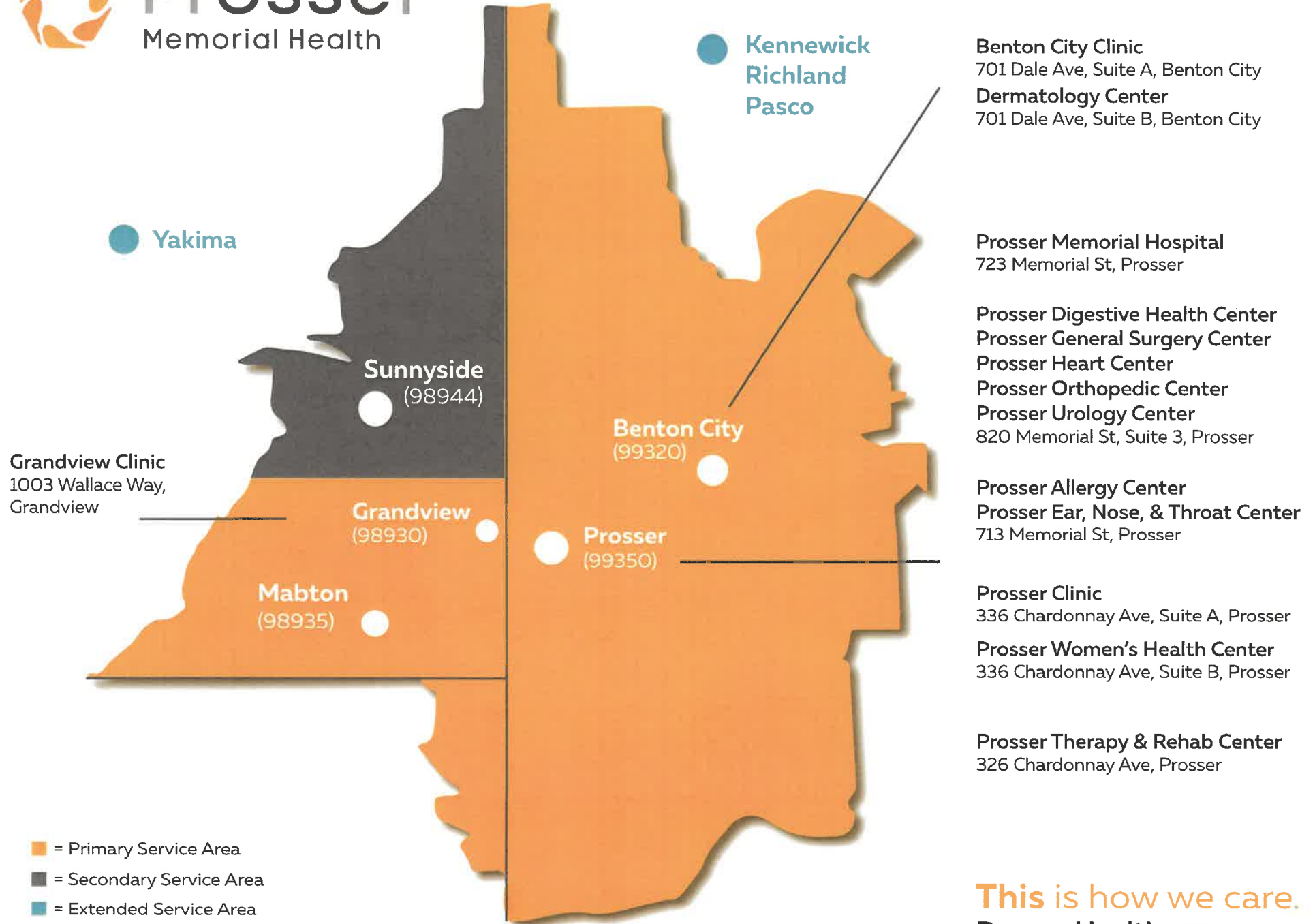
Source: Merritt Hawkins. 2019 Physician Inpatient/Outpatient Revenue Survey.





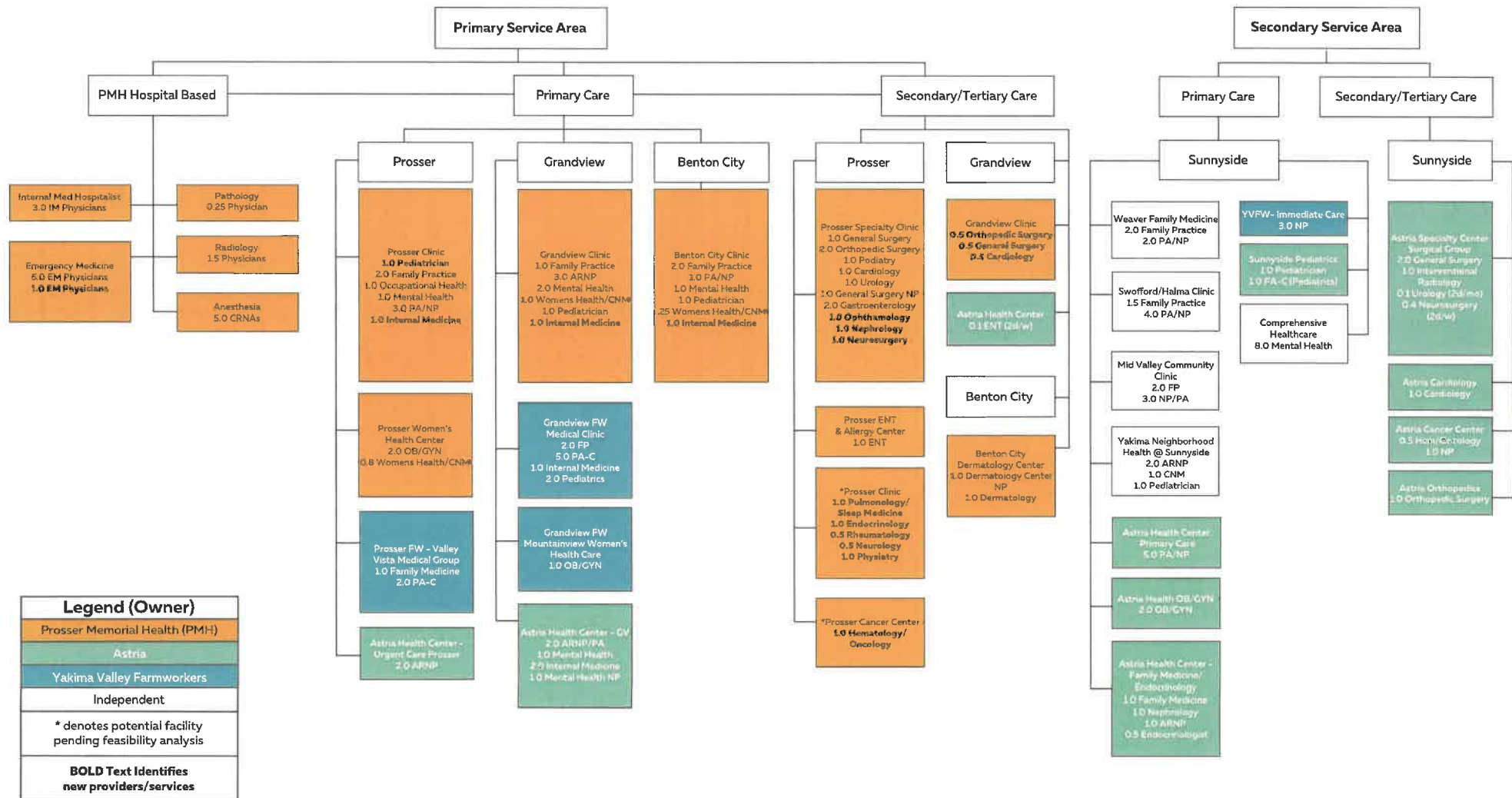
# Prosser

Memorial Health



**This is how we care.**  
[ProsserHealth.org](http://ProsserHealth.org)

## Medical Staff Recruitment / Succession Model 2017-2024



**PMH MEDICAL STAFF RECRUITMENT & SUCCESSION PLAN BY LOCATION AND FISCAL YEAR 2021-2025**

FY 2021		
Internal Medicine/Family Practice	1.0	Benton City Clinic
Dermatology - NYLANDER	1.0	Benton City Dermatology Clinic
Pediatrics – PROCTOR	1.0	Grandview Clinic
Pediatrics - COOKS	1.0	Prosser Clinic
Mental Health Counselor - PETERS	1.0	Benton City Clinic
NP – PARKS	1.0	Grandview Clinic
NP – GLOVER	1.0	Grandview Clinic
Subtotal	<u>7.0</u>	
FY 2022		
Gastroenterology – COHEN	1.0	PMH Specialty Clinic
Psychiatric /Behavioral Health – DENNIS	1.0	Grandview Clinic
Dermatology ARNP - BOWEN	1.0	Dermatology Center
Orthopedic Surgery (Sports Medicine)	0.0	PMH Specialty Clinic
Family Practice – BRINDLE	1.0	Benton City Clinic
Family Practice – THOMPSON	1.0	Prosser Clinic
Internal Medicine	0.0	Prosser Clinic
Physiatry (Pain Management)	0.0	Prosser Clinic
Emergency Medicine – (WALLACE)	1.0	Prosser Memorial Hospital
Emergency Medicine – (MONICK, KIM, HIMMEL)	1.0	Prosser Memorial Hospital
Emergency Medicine APC – (NIELSON, MCPHEE)	2.0	Prosser Memorial Hospital
Endocrinology	0.0	Prosser/Grandview/Benton City
Subtotal	<u>9.0</u>	
FY 2023		
Internal Medicine	1.0	Prosser Clinic
Allergy NP	1.0	Prosser Allergy Center
Occupational Medicine	1.0	Prosser Clinic
Pediatrics	1.0	Prosser Clinic
Family Practice	1.0	Prosser Clinic
Gastroenterology	1.0	PMH Specialty Clinic
Orthopedic Surgery (Sports Medicine)	1.0	PMH Specialty Clinic
Psychiatric / Behavioral Health NP	1.0	Benton City Clinic
Radiologist	1.0	Prosser Memorial Hospital
Emergency Medicine	2.0	Prosser Memorial Hospital
Subtotal	<u>11.0</u>	
FY 2024		
Pulmonology/Sleep Medicine	1.0	Prosser Memorial Hospital
Endocrinology	1.0	Prosser/Grandview/Benton City
Physiatry (Pain Management)	1.0	Prosser Clinic
Family Practice / Internal Medicine	1.0	Prosser Clinic
Family Practice / Internal Medicine	1.0	Benton City Clinic
Family Practice / Internal Medicine	1.0	Grandview Clinic
Hematology/Oncology	1.0	Prosser Cancer Center
Subtotal	<u>7.0</u>	
FY 2025		
Nephrology	1.0	PMH Specialty Clinic
Ophthalmology	1.0	PMH Specialty Clinic
Neurosurgery	1.0	PMH Specialty Clinic
Rheumatology	1.0	Prosser Clinic
Neurology	1.0	Prosser Clinic
Subtotal	<u>5.0</u>	
TOTAL		

10.24.2022

PMH Service Area: Total Primary Service Area Physician Need 2023		Population Needed/Provider	Needed (FTEs)	Current Supply (FTEs)	Supply Needed (FTEs)
2018 Population:	45,003				
2023 Population:	47,380				
<b>Primary Care</b>					
General/Family Practice	3,226	14.7	26.0	11.3	
General Internal Medicine	3,247	14.6	3.0	11.6	
Pediatrics	5,682	8.3	4.0	4.3	
OB/GYN	7,143	6.6	5.0	1.6	
<b>Primary Care Subtotal</b>		<b>44.3</b>	<b>38.0</b>	<b>7.3</b>	
<b>Secondary Care</b>					
Allergy & Immunology	71,429	0.7	0.4	0.3	
Cardiology	12,821	3.7	1.5	2.2	
Dermatology	25,000	1.9	2.0	0.1	
Gastroenterology	22,727	2.1	2.0	0.1	
Hematology/Oncology	23,810	2.0	0.0	2.0	
Nephrology	40,000	1.2	0.0	1.2	
Neurology	19,608	2.4	0.0	2.4	
Mental Health Provider	6,250	7.6	7.0	0.6	
Pulmonology	25,000	1.9	0.0	1.9	
General Surgery	8,772	5.4	2.0	3.4	
Ophthalmology	18,182	2.6	0.0	2.6	
Orthopedic Surgery	11,905	4.0	2.0	2.0	
Otorhinolaryngology	31,250	1.5	0.8	0.7	
Plastic Surgery	41,667	1.1	0.5	0.6	
Urology	27,778	1.7	1.0	0.7	
<b>Secondary Care Subtotal</b>		<b>39.8</b>	<b>19.2</b>	<b>27.6</b>	
<b>Tertiary Care</b>					
Cardio Thoracic Surgery	66,667	0.7	0.0	0.7	
Endocrinology	50,000	0.9	1.0	0.1	
Infectious Diseases	58,824	0.8	0.0	0.8	
Neurosurgery	62,500	0.8	0.5	0.3	
Physical Med/Rehab	37,037	1.3	0.0	1.3	
Rheumatology	66,667	0.7	0.0	0.7	
Vascular Surgery	66,667	0.7	0.0	0.7	
<b>Tertiary Subtotal</b>		<b>8.0</b>	<b>1.5</b>	<b>3.0</b>	
<b>Total</b>		<b>92.1</b>	<b>58.7</b>	<b>37.9</b>	

PMH Service Area: Total Primary/Secondary Service Area Physician Need 2023		Population Needed/Provider	Needed (FTEs)	Current Supply (FTEs)	Supply Needed (FTEs)
2018 Population:	67,344				
2023 Population:	70,395				
<b>Primary Care</b>					
General/Family Practice	3,226	21.8	52.5	30.7	
General Internal Medicine	3,247	21.7	3.0	18.7	
Pediatrics	5,682	12.4	7.0	5.4	
OB/GYN	7,143	9.9	8.0	1.9	
<b>Primary Care Subtotal</b>			65.7	70.5	4.8
<b>Secondary Care</b>					
Allergy & Immunology	71,429	1.0	0.2	0.8	
Cardiology	12,821	5.5	2.5	3.0	
Dermatology	25,000	2.8	2.0	0.8	
Gastroenterology	22,727	3.1	2.0	1.1	
Hematology/Oncology	23,810	3.0	1.5	1.5	
Nephrology	40,000	1.8	1.0	0.8	
Neurology	19,608	3.6	0.4	3.2	
Mental Health Provider	6,250	11.3	15.0	3.7	
Pulmonology	25,000	2.8	0.0	2.8	
General Surgery	8,772	8.0	4.0	4.0	
Ophthalmology	18,182	3.9	0.0	3.9	
Orthopedic Surgery	11,905	5.9	3.0	2.9	
Otorhinolaryngology	31,250	2.3	1.4	0.9	
Plastic Surgery	41,667	1.7	1.0	0.7	
Urology	27,778	2.5	2.0	0.5	
<b>Secondary Care Subtotal</b>			59.2	36.0	27.3
<b>Tertiary Care</b>					
Cardio Thoracic Surgery	66,667	1.1	0.0	1.1	
Endocrinology	50,000	1.4	0.2	1.2	
Infectious Diseases	58,824	1.2	0.0	1.2	
Neurosurgery	62,500	1.1	0.9	0.2	
Physical Med/Rehab	37,037	1.9	0.0	1.9	
Rheumatology	66,667	1.1	0.0	1.1	
Vascular Surgery	66,667	1.1	0.0	1.1	
<b>Tertiary Subtotal</b>			8.9	1.1	5.7
<b>Total</b>			133.8	107.6	28.2

PMH Primary Service Area: Prosser Zip Code: 99350 Physician Need 2023		Population Needed/Provider	Needed (FTEs)	Current Supply (FTEs)	Supply Needed (FTEs)
2018 Population:	14,674				
2023 Population:	15,578				
<b>Primary Care</b>					
General/Family Practice	3,226	4.8	10.0	5.2	
General Internal Medicine	3,247	4.8	0.0	4.8	
Pediatrics	5,682	2.7	0.0	2.7	
OB/GYN	7,143	2.2	2.8	0.6	
<b>Primary Care Subtotal</b>		<b>14.5</b>	<b>12.8</b>	<b>1.7</b>	
<b>Secondary Care</b>					
Allergy & Immunology	71,429	0.2	0.2	0.0	
Cardiology	12,821	1.2	1.5	0.3	
Dermatology	25,000	0.6	0.0	0.6	
Gastroenterology	22,727	0.7	2.0	1.3	
Hematology/Oncology	23,810	0.7	0.0	0.7	
Nephrology	40,000	0.4	0.0	0.4	
Neurology	19,608	0.8	0.0	0.8	
Mental Health Provider	6,250	2.5	1.0	1.5	
Pulmonology	25,000	0.6	0.0	0.6	
General Surgery	8,772	1.8	2.0	0.2	
Ophthalmology	18,182	0.9	0.0	0.9	
Orthopedic Surgery	11,905	1.3	2.0	0.7	
Otorhinolaryngology	31,250	0.5	0.8	0.3	
Plastic Surgery	41,667	0.4	0.5	0.1	
Urology	27,778	0.6	1.0	0.4	
<b>Secondary Care Subtotal</b>		<b>13.1</b>	<b>11.0</b>	<b>2.1</b>	
<b>Tertiary Care</b>					
Cardio Thoracic Surgery	66,667	0.2	0.0	0.2	
Endocrinology	50,000	0.3	0.0	0.3	
Infectious Diseases	58,824	0.3	0.0	0.3	
Neurosurgery	62,500	0.2	0.5	0.3	
Physical Med/Rehab	37,037	0.4	0.0	0.4	
Rheumatology	66,667	0.2	0.0	0.2	
Vascular Surgery	66,667	0.2	0.0	0.2	
<b>Tertiary Subtotal</b>		<b>1.9</b>	<b>0.5</b>	<b>1.4</b>	
<b>Total</b>			<b>29.6</b>	<b>24.3</b>	<b>5.3</b>

PMH Primary Service Area: Grandview Zip Code: 98930 Physician Need 2023		Population Needed/Provider	Needed (FTEs)	Current Supply (FTEs)	Supply Needed (FTEs)
2018 Population:	15,767				
2023 Population:	16,430				
<b>Primary Care</b>					
General/Family Practice	3,226	5.1	13.0	7.9	
General Internal Medicine	3,247	5.1	3.0	2.1	
Pediatrics	5,682	2.9	3.0	0.1	
OB/GYN	7,143	2.3	2.0	0.3	
<b>Primary Care Subtotal</b>			15.3	21.0	5.7
<b>Secondary Care</b>					
Allergy & Immunology	71,429	0.2	0.0	0.2	
Cardiology	12,821	1.3	0.0	1.3	
Dermatology	25,000	0.7	0.0	0.7	
Gastroenterology	22,727	0.7	0.0	0.7	
Hematology/Oncology	23,810	0.7	0.0	0.7	
Nephrology	40,000	0.4	0.0	0.4	
Neurology	19,608	0.8	0.0	0.8	
Mental Health Provider	6,250	2.6	4.0	1.4	
Pulmonology	25,000	0.7	0.0	0.7	
General Surgery	8,772	1.9	0.0	1.9	
Ophthalmology	18,182	0.9	0.0	0.9	
Orthopedic Surgery	11,905	1.4	0.0	1.4	
Otorhinolaryngology	31,250	0.5	0.1	0.4	
Plastic Surgery	41,667	0.4	0.0	0.4	
Urology	27,778	0.6	0.0	0.6	
<b>Secondary Care Subtotal</b>			13.8	4.1	9.7
<b>Tertiary Care</b>					
Cardio Thoracic Surgery	66,667	0.2	0.0	0.2	
Endocrinology	50,000	0.3	0.0	0.3	
Infectious Diseases	58,824	0.3	0.0	0.3	
Neurosurgery	62,500	0.3	0.0	0.3	
Physical Med/Rehab	37,037	0.4	0.0	0.4	
Rheumatology	66,667	0.2	0.0	0.2	
Vascular Surgery	66,667	0.2	0.0	0.2	
<b>Tertiary Subtotal</b>			2.1	0.0	2.1
<b>Total</b>			31.2	25.1	6.1

PMH Primary Service Area: Benton City Zip Code: 99320, (99345) (Includes Patterson) Physician Need 2023		Population Needed/Provider	Needed (FTEs)	Current Supply (FTEs)	Supply Needed (FTEs)
2018 Population:	10,043				
2023 Population:	10,651				
<b>Primary Care</b>					
General/Family Practice	3,226	3.3	3.0	0.3	
General Internal Medicine	3,247	3.3	0.0	3.3	
Pediatrics	5,682	1.9	1.0	0.9	
OB/GYN	7,143	1.5	0.2	1.3	
<b>Primary Care Subtotal</b>		9.9	4.2	5.7	
<b>Secondary Care</b>					
Allergy & Immunology	71,429	0.1	0.0	0.1	
Cardiology	12,821	0.8	0.0	0.8	
Dermatology	25,000	0.4	2.0	1.6	
Gastroenterology	22,727	0.5	0.0	0.5	
Hematology/Oncology	23,810	0.4	0.0	0.4	
Nephrology	40,000	0.3	0.0	0.3	
Neurology	19,608	0.5	0.0	0.5	
Mental Health Provider	6,250	1.7	2.0	0.3	
Pulmonology	25,000	0.4	0.0	0.4	
General Surgery	8,772	1.2	0.0	1.2	
Ophthalmology	18,182	0.6	0.0	0.6	
Orthopedic Surgery	11,905	0.9	0.0	0.9	
Otorhinolaryngology	31,250	0.3	0.0	0.3	
Plastic Surgery	41,667	0.3	0.0	0.3	
Urology	27,778	0.4	0.0	0.4	
<b>Secondary Care Subtotal</b>		8.9	4.0	4.9	
<b>Tertiary Care</b>					
Cardio Thoracic Surgery	66,667	0.2	0.0	0.2	
Endocrinology	50,000	0.2	0.0	0.2	
Infectious Diseases	58,824	0.2	0.0	0.2	
Neurosurgery	62,500	0.2	0.0	0.2	
Physical Med/Rehab	37,037	0.3	0.0	0.3	
Rheumatology	66,667	0.2	0.0	0.2	
Vascular Surgery	66,667	0.2	0.0	0.2	
<b>Tertiary Subtotal</b>		1.3	0.0	1.3	
<b>Total</b>			20.2	8.2	12.0



PMH Primary Service Area: Mabton Zip Code: 98935 Physician Need 2023		Population Needed/Provider	Needed (FTEs)	Current Supply (FTEs)	Supply Needed (FTEs)
2018 Population:	4,519				
2023 Population:	4,721				
<b>Primary Care</b>					
General/Family Practice	3,226	1.5	0.0	1.5	
General Internal Medicine	3,247	1.5	0.0	1.5	
Pediatrics	5,682	0.8	0.0	0.8	
OB/GYN	7,143	0.7	0.0	0.7	
<b>Primary Care Subtotal</b>		<b>4.4</b>	<b>0.0</b>	<b>4.4</b>	
<b>Secondary Care</b>					
Allergy & Immunology	71,429	0.1	0.0	0.1	
Cardiology	12,821	0.4	0.0	0.4	
Dermatology	25,000	0.2	0.0	0.2	
Gastroenterology	22,727	0.2	0.0	0.2	
Hematology/Oncology	23,810	0.2	0.0	0.2	
Nephrology	40,000	0.1	0.0	0.1	
Neurology	19,608	0.2	0.0	0.2	
Mental Health Provider	6,250	0.8	0.0	0.8	
Pulmonology	25,000	0.2	0.0	0.2	
General Surgery	8,772	0.5	0.0	0.5	
Ophthalmology	18,182	0.3	0.0	0.3	
Orthopedic Surgery	11,905	0.4	0.0	0.4	
Otorhinolaryngology	31,250	0.2	0.0	0.2	
Plastic Surgery	41,667	0.1	0.0	0.1	
Urology	27,778	0.2	0.0	0.2	
<b>Secondary Care Subtotal</b>		<b>4.0</b>	<b>0.0</b>	<b>4.0</b>	
<b>Tertiary Care</b>					
Cardio Thoracic Surgery	66,667	0.1	0.0	0.1	
Endocrinology	50,000	0.1	0.0	0.1	
Infectious Diseases	58,824	0.1	0.0	0.1	
Neurosurgery	62,500	0.1	0.0	0.1	
Physical Med/Rehab	37,037	0.1	0.0	0.1	
Rheumatology	66,667	0.1	0.0	0.1	
Vascular Surgery	66,667	0.1	0.0	0.1	
<b>Tertiary Subtotal</b>		<b>0.6</b>	<b>0.0</b>	<b>0.6</b>	
<b>Total</b>		<b>9.0</b>	<b>0.0</b>	<b>9.0</b>	

PMH Secondary Service Area: Sunnyside Zip Code: 98944 Physician Need 2023					
2018 Population: 22,341 2023 Population: 23,015	Population Needed/Provider	Needed (FTEs)	Current Supply (FTEs)	Supply Needed (FTEs)	
<b>Primary Care</b>					
General/Family Practice	3,226	7.1	26.5	19.4	
General Internal Medicine	3,247	7.1	0.0	7.1	
Pediatrics	5,682	4.1	3.0	1.1	
OB/GYN	7,143	3.2	3.0	0.2	
<b>Primary Care Subtotal</b>		21.5	32.5	11.0	
<b>Secondary Care</b>					
Allergy & Immunology	71,429	0.3	0.0	0.3	
Cardiology	12,821	1.8	1.0	0.8	
Dermatology	25,000	0.9	0.0	0.9	
Gastroenterology	22,727	1.0	0.0	1.0	
Hematology/Oncology	23,810	1.0	1.5	0.5	
Nephrology	40,000	0.6	1.0	0.4	
Neurology	19,608	1.2	0.4	0.8	
Mental Health Provider	6,250	3.7	8.0	4.3	
Pulmonology	25,000	0.9	0.0	0.9	
General Surgery	8,772	2.6	2.0	0.6	
Ophthalmology	18,182	1.3	0.0	1.3	
Orthopedic Surgery	11,905	1.9	1.0	0.9	
Otorhinolaryngology	31,250	0.7	0.5	0.2	
Plastic Surgery	41,667	0.6	0.5	0.1	
Urology	27,778	0.8	1.0	0.2	
<b>Secondary Care Subtotal</b>		19.3	16.9	2.4	
<b>Tertiary Care</b>					
Cardio Thoracic Surgery	66,667	0.3	0.0	0.3	
Endocrinology	50,000	0.5	0.2	0.3	
Infectious Diseases	58,824	0.4	0.0	0.4	
Neurosurgery	62,500	0.4	0.4	0.0	
Physical Med/Rehab	37,037	0.6	0.0	0.6	
Rheumatology	66,667	0.3	0.0	0.3	
Vascular Surgery	66,667	0.3	0.0	0.3	
<b>Tertiary Subtotal</b>		2.9	0.6	2.3	
<b>Total</b>		43.7	50.0	6.3	

# Primary & Secondary Service Area Provider List

## BENTON CITY

**Benton City Clinic**  
701 Dale Ave., Suite A  
Benton City, WA 99320  
509.588.4075

- Dr. Suzanne Staudinger (Family Practice)
- Dr. David Carl (Peds)
- Dr. Jennifer Brindle (Family Practice)
- Jessica Luther, ARNP (Family Practice)
- Steve Peters (Mental Health)
- Bailey Padilla, CNM (Midwife) (Friday Only)

**Dermatology Center**  
701 Dale Ave., Suite B  
Benton City, WA 99320  
509.588.4555

- Dr. Nicola Nylander
- Karmina Bowen, ARNP

## PROSSER

**Prosser Clinic**  
336 Chardonnay Ave., Suite A  
Prosser, WA 99350  
509.786.1576

- Dr. Carolyn O'Connor (Family Practice)
- Dr. Jayme Thompson (Family Practice)
- Pam Morris, ARNP (Family Practice, Occupational Medicine)
- Heather Morse, ARNP (Mental Health)
- Zach Garland, ARNP (Family Practice)
- Teresa Charvet, PA-C (Family Practice)

**Prosser Women's Health Center**  
336 Chardonnay Ave., Suite B  
Prosser, WA 99350  
509.786.0031

- Dr. Brian Sollers (OB/GYN)
- Dr. Heidi Weaver (OB/GYN)
- Bailey Padilla, CNM (Midwife) (0.8)
- Teresa Charvet, PA-C (Every Other Friday)

**Prosser General Surgery Center**  
820 Memorial St., Suite 3  
Prosser, WA 99350  
509.786.5599

- Dr. Richard Unger (Gen Surgery)
- Afton Dunham, AANP-C

**Prosser Orthopedic Center**  
820 Memorial St., Suite 3  
Prosser, WA 99350  
509.786.5599

- Dr. Jared Clifford (Podiatrist)
- Dr. Thomas Halvorson (Orthopedic Surgery)
- Dr. Samuel Strebel (Orthopedic Surgery)

**Prosser Heart Center**  
820 Memorial St., Suite 3  
Prosser, WA 99350  
509.786.5599

- Dr. Karan Bhatti (Cardiology)

**Prosser Urology Center**

820 Memorial St., Suite 3  
Prosser, WA 99350  
509.786.5599

- Dr. Tom Tieu (Urology)

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**Prosser ENT & Allergy Center**

713 Memorial St.  
Prosser, WA 99350  
509.786.5599

- Dr. Coral Tieu (ENT)

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**Valley Vista Medical Center**

820 Memorial St., Suite 1  
Prosser, WA 99350  
509.786.2010  
Clinic Manager: Bindu Musunuru  
bindum@yvfwc.org | Ext. 5524

- Dr. Edward Lane, Family Medicine
- Rebecca Reinhard, PA-C
- Rebecca Wray, PA-C, Family Medicine

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**Astria Health Center - Primary Care  
with Walk-In Care**

355 Chardonnay Ave.  
Prosser, WA 99350  
509.781.6366

- Amma Ababio, FNP, \$10 Sports Physicals,  
Primary Care, Primary Care with Walk-In Care
- Davis Bronson, MD, FACS, Plastic and  
Reconstructive Surgery
- Selena Diaz, FNP, Primary Care

## GRANDVIEW

### **Grandview Clinic**

1003 Wallace Way  
Grandview, WA 98930  
509.203.1080

- Dr. Jose Santa-Cruz (Family Practice)
- Dr. Brian Proctor (Pediatrics)
- Erica Garza, ARNP (Family Practice)
- Peter Park, ARNP (Family Practice)
- Sara Glover, ARNP (Family Practice)
- Diane Hanks, ARNP (Mental Health)
- Juliet Dennis, ARNP (Mental Health)
- Becky Morris, CNM-WHNP

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### **Astria Health Center - Family Medicine, Internal Medicine, Ear, Nose, & Throat, and Orthopedics**

208 N. Euclid Rd.  
Grandview, WA 98930  
509.882.1855

- Manuel Jimenez, PA-C, Internal Medicine
- Anna Madej, MD, Internal Medicine, Primary Care
- Daniel Quiroz-Portella, MD, Diabetes, Internal Medicine, Primary Care, Senior Services
- Suzanne Cleland-Zamudio, MD, Allergy Testing and Treatment Program, Ear, Nose and Throat, Surgery

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### **Grandview Clinic Farmworkers Clinic**

1000 Wallace Way  
Grandview, WA 98930  
509.882.3444  
Clinic Manager: Norma Avila-Alejandre  
normaa@yvfwc.org

- Dr. Katheryn Norris, Family Medicine
- Dr. Tad White, Family Medicine
- Dr. Tamera Schille, Pediatrics
- Dr. Thatcher Felt, Pediatrics
- Dr. Flint Orr, Internal Medicine
- Brianne Johnson, PA-C
- Jeffrey Johnson, PA-C
- Thomas Jenkins, PA-C
- Nathaniel Burgi, PA-C
- Irene Paz, PA-C

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### **Mountain View Women's Health Center**

Yakima Valley Farmworkers  
240 Division St.  
Grandview, WA 98930  
509.882.4700  
Clinic Manager: Norma Avila-Alejandre  
normaa@yvfwc.org

- Dr. Ridhima Gupta, OB/GYN

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### **Astria Health Center - Pediatrics, Behavioral Health, Primary Care with Walk-In Care**

222 E. 2nd St.  
Grandview, WA 98930  
509.203.6501

- Nekol Hatley, PMHNP, Behavioral Health/Psychiatry
- Katherine Soto, MSW, Behavioral Health/Psychiatry

## SUNNYSIDE

### Weaver Family Medicine

2935 Allen Rd.  
Sunnyside, WA 98944  
509.837.0070

- Dr. Derek Weaver (Family Medicine)
- Dr. Judith Harvey (Family Medicine)
- Jason Redd, PA-C
- Ty Nielson, PA-C

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### Astria Health Center - Pediatrics

803 E. Lincoln Ave  
Sunnyside, WA 98944  
509.837.7551

- Ana Garcia, MD, Pediatrics, Primary Care with Walk-In Care
- Mark Gardner, PA-C, Pediatrics, Primary Care with Walk-In Care

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### Sunnyside Immediate Care

Yakima Valley Farmworkers  
2680 Yakima Valley Highway, Suite B  
Sunnyside, WA 98944  
509.839.3000

- Jeffrey Johnson, PA
- Brianne Johnson, PA
- Karina Borges, PA
- Irene Castro, PA
- Thomas Jenkins, PA
- Nathaniel Burai, PA

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### Swofford & Halma Clinic

2303 Reith Way  
Sunnyside, WA 98944  
509.837.3933

- Dr. Harlan Halma, Family Medicine (.5 FTE)
- Dr. Blake Bond, Family Medicine
- Marivel Sandoval, PA-C
- Margaret Kranz, PA-C
- Ramon Perez, PA-C
- Bristol Fletcher, ARNP

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### Mid Valley Community Clinic

700 S. 11th St.  
Sunnyside, WA 98944  
509.839.6822

- Dr. Harlan Halma, Family Medicine (.5 FTE)
- Dr. Douglas Wrung, Family Medicine (.5 FTE)
- Irma Mejia, ARNP
- Elba Fernandez, ARNP
- Dr. Kristin Bond, Family Medicine
- Heidi April, PA-C

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### Astria Health Center - Primary Care with Walk-In Care

2705 E. Lincoln Ave., Suite B  
Sunnyside, WA 98944  
509.836.4848

- Jonathan Alvord, PA-C, Family Medicine, Primary Care, Primary Care with Walk-In Care
- Paul Furan, PA-C, Family Medicine, Primary Care, Primary Care with Walk-In Care
- Sara McDonald, AGNP, Internal Medicine, Primary Care, Sleep Medicine, Walk-In Care
- Timothy Salvos, PA-C, Primary Care, Primary Care with Walk-In Care

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**Astria Health Center - Cardiology**

803 E Lincoln Ave.  
Sunnyside, WA 98944  
509.836.4825

- Locum Cardiologists
- Sumeet Sachdev, MD, Cath Lab

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**Astria Health - Obstetrics & Gynecology**

803 E. Lincoln Way  
Sunnyside, WA 98944  
509.837.1550

- Miguel A. Brizuela, MD, MS, OB-GYN, FACOG, Obstetrics and Gynecology (OB/GYN), Sleep Medicine
- Robert R. Wells, MD, OB-GYN, Obstetrics and Gynecology (OB/GYN)

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**Astria Health - Occupational Medicine**

802 Miller Ave.  
Sunnyside, WA 98944  
509.837.1564

- None Listed

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**Astria Health - Orthopedics**

2705 E. Lincoln Ave., Suite A  
Sunnyside, WA 98944  
509.837.1570

- Adrian Obuch, MD, Orthopedic Surgery, Orthopedics, Sports Medicine

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**Cancer Center**

1013 E. Edison Ave.  
Sunnyside, WA 98944  
509.837.1587

- Mahakit Inklab, MD, Cancer Care, Internal Medicine, Oncology and Hematology
- Christina Zoric, AOCNP, Cancer Care, Internal Medicine, Oncology and Hematology, Sleep Medicine

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**Specialty Center Surgical Group**

500 S. 11th St.  
Sunnyside, WA 98944  
509.837.7722

- Hand Surgery
- Joint Replacement
- Neurosurgery
- Orthopedic Rehabilitation
- Orthopedic Surgery
- Podiatry
- Spine Care & Endoscopic Spine Surgery (TESSYS)
- Stroke Care
- Surgical Services
- Urgent Care
- Urology
- General Surgery
- Interventional Radiology
- Percutaneous Cryoblation (CRYOtherapy)
- Vascular Surgery

- Lori Alvord, MD, Gastroenterology, General Surgery, Surgery
- Dave Atteberry, MD, Neurology, Neurosurgery
- Tracy Berg, MD, Surgery, Vascular Surgery, Wound Care Center
- Ernesto Dizon Jr., MD, General Surgery, Robotic Surgery
- Peter Grunert, MD, Neurology, Neurosurgery
- Jeffrey LeCheminant, DPM, FACFAS, Podiatry
- David Shoemaker, MD, Interventional Radiology, Vascular Medicine
- Brad A. Ward, MD, Neurology, Neurosurgery
- Manuel Ybanez, MD, Surgery
- Mihai Alexianu, MD, Urology
- Richard Mynatt, MD, Urology

**Yakima Neighborhood Health**

617 Scoon Rd.  
Sunnyside, WA 98944  
509.837.8200

- Dr. Nana, Pediatrics
- Sue Dennis, ARNP, CNM, Women's Health
- Cynthia Hurtato, ARNP, Family Practice

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**Comprehensive Healthcare**

1319 Saul Rd.  
Sunnyside, WA 98944  
509.837.2089

- Brittney Skillman, ARNP
- Jose Sabalsa, Counselor
- Crystal Liebert, Counselor
- Jaime Ortiz, Counselor
- Jose Villalba, Drug & Alcohol Counselor
- Leticia Chavez, Therapist
- Ronda Beaudry, Therapist
- Metilda Reyes, Therapist

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**Astria Health Center - Family Medicine**

2705 E. Lincoln Ave., Suite B  
Sunnyside, WA 98944  
509.837.1799

- Craig Whittlesey, MD
- Jonathan Alvord, PA-C
- Paul Furan, PA-C
- Susan Bussert, PA-C

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**Astria Health Audiology**

1017 Tacoma Ave.  
Sunnyside, WA 98944  
509.837.1720

- Sally B. Rodgers, AuD
- Katie Bertheas, AuD

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**Astria Health Center - Primary Care with Walk-In Care/Dentistry**

2201 E. Edison Ave.  
Sunnyside, WA 98944  
509.837.4596

- Gregory Norell, DDS, Adult Dentistry, Dental Surgery, Pediatric Dentistry
- Timothy Salvos, PA-C, Primary Care, Primary Care with Walk-In Care, Walk-In Care

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**Astria Health Center - Primary Care with Walk-In Care/Endocrinology/Nephrology**

803 E. Lincoln Ave.  
Sunnyside, WA 98944  
509.837.6911

- Vansi Kanneganti, MD, Nephrology
- Ben Rodriguez, PA-C, Diabetes Education, Endocrinology
- Gary Treece, MD, Diabetes, Endocrinology

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**Astria Health Center - Sleep Medicine**

803 E. Lincoln Ave.  
Sunnyside, WA 98944  
509.837.6911

- None Listed

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**Astria Health Center - Sleep Medicine Center**

1013 E. Edison Ave.  
Sunnyside, WA 98944  
509.837.1627

- None Listed



**Astria Health Therapy Services**

326 S. 9th St.  
Sunnyside, WA 98944  
509.836.4835

- Olivia Maiocco, DPT, Physical Therapy
- Shaundra Mendez, CCC-SLP, Pediatric Speech Language Pathology, Speech Language Pathology, Speech Therapy
- Victoria Mendoza, DPT, Physical Therapy
- Daisy Perez, DPT, Physical Therapy
- Jill Raines, OTD, Occupational Medicine, Therapy Services
- Suzanne Rettig, SLP, Speech Language Pathology, Speech Therapy

**Astria Home Health**

812 Miller Ave., Suite A  
Sunnyside, WA 98944  
509.837.1567

- None Listed

**Breast Health Center**

1016 Tacoma Ave.  
Sunnyside, WA 98944  
509.837.1627

- None Listed

**ZILLAH**

**Astria Health Center -  
Family Medicine, Neurosurgery,  
Podiatry, and Vascular Medicine**

915 Vintage Valley Pkwy., Suite 200  
Zillah, WA 98953  
509.314.6565

- Dave Atteberry, MD, Neurology, Neurosurgery
- Teodor Butiu, MD, Pediatrics, Primary Care
- Mitchell D. Cahn, MD, Cardiology, Vascular Surgery
- Risa Campos, DNP, ARNP, FNP-C, Family Medicine, Primary Care, Primary Care
- Peter Grunert, MD, Neurology, Neurosurgery
- Vu Le, MD, Gastroenterology
- Jeffrey LeCheminant, DPM, FACFAS, Podiatry
- Valentine Okochi, FNP-BC, \$10 Sports Physicals, Family Medicine, Primary Care
- Brad A. Ward, MD, Neurology, Neurosurgery

**TOPPENISH**

**Astria Health Center -  
Primary Care with Walk-In Care  
and Multi-Specialty Care**

516 W. 4th Ave.  
Toppenish, WA 98948  
509.865.2500

- Valentine Okochi, FNP-BC, \$10 Sports Physicals, Family Medicine, Primary Care, Primary Care with Walk-In Care
- Jay Campbell, DSW, Behavioral Health/Psychiatry

# Josh Macke

(360) 348-2448

Email: Joshua.macke@azkrmc.com

## Work Experience

- 6/2020-Present      **Emergency Medicine Resident physician**  
Kingman Regional Medical Center - Midwestern University
- 2/2020-6/2020      **ACLS/PALS instructor**  
Cascade training company
- 1/2015-3/2015      **Teacher Assistant, Anatomy lab**  
Central Washington University

## Education

- 5/2020      **Pacific Northwest University of Health Sciences**  
Doctor of Osteopathic Medicine
- 5/2016      **Heritage University**  
Master of Arts in Medical Science
- 6/2015      **Central Washington University**  
Bachelor of Science in Biology  
Specialization in Biomedical Sciences  
Minor in Chemistry

## Licensures and Certifications

- 9/2020      **Advance Trauma Life support**  
American College of Surgeons
- 6/2020      **Pediatric Advance Life Support**  
American Heart Association
- 6/2020      **Advanced Cardiovascular Life Support**  
American Heart Association
- 2/2020      **Emergency Neurologic Life Support**  
Neurocritical care society
- 8/2019      **Basic Life Support Certification**  
American Heart Association

## Honors and Awards

- 10/2021      **EKG diagnostic competition – 1<sup>st</sup> place**  
Kingman Regional Medical Center, Kingman, AZ
- 4/2021      **Poster presentation - 1<sup>st</sup> place**  
**Arizona Osteopathic Medical Association**  
Virtual Research symposium  
The Mental Health Impact of COVID-19 on Healthcare Workers and the General Population in a Rural Community Setting
- 10/2020      **Save of the month**  
Emergency Department, Kingman Regional Medical Center, Kingman, AZ
- 2/2018-5/2020      **Sigma Sigma Phi Delta chapter**

**Osteopathic National Honor society**  
Pacific Northwest University

## Presentations

- 2/2022 **Podium Speaker**  
**Critical Care Conference**  
Kingman Regional Medical Center, Kingman, AZ  
Approach to undifferentiated shock
- 9/2021 **Podium Speaker**  
**Emergency Medical Service Run Review**  
Kingman Regional Medical Center, Kingman, AZ  
Pediatric Airway Emergencies
- 9/2021 **Podium Speaker**  
**Administrative Review**  
Kingman Regional Medical Center, Kingman, AZ  
Near Misses and Patient Complaints
- 9/2021 **Podium Speaker**  
**Critical Care Conference,**  
Kingman Regional Medical Center, Kingman, AZ  
BRASH syndrome: A deadly cycle
- 6/2021 **Podium Speaker**  
**Pharmacological lecture series**  
Kingman Regional Medical Center, Kingman, AZ  
Pharmaceuticals of Cardiac Arrest
- 4/2021 **Poster Presentation**  
**Arizona Osteopathic Medical Association**  
Virtual Research Symposium  
The Mental Health Impact of COVID-19 on Healthcare Workers and the General Population  
in a Rural Community Setting
- 5/2016 **Poster Presentation**  
**Graduate Symposium**  
Heritage University, Toppenish, WA  
Acute stress effects on Memory
- 5/2015 **Poster Presentation**  
**National Conference of Undergraduate Research**  
Eastern Washington University, Cheney, WA  
Coliform Bacteria of Wilson Creek
- 4/2015 **Poster Presentation**  
**Symposium of University Research and Creative Expression**  
Central Washington University, Ellensburg, WA  
Coliform Bacteria of Wilson Creek

## Research

- 3/2022-present **Dosing effects in RSI medication**  
**Midwestern University**  
Principal Investigator  
Study focuses on outcomes on patients inadequately dosed with RSI medications in the  
emergency room
- 3/2022-present **Epoprostenol efficacy in COVID-19 patients with ARDS**

**Midwestern University**

Sub-Investigator

Retrospective review on outcomes associated with Epoprostenol responders vs Epoprostenol non responders in COVID-19 patients

7/2020-9/2020

**The Mental Health Impact of COVID-19 on Healthcare Workers and the General Population in a Rural Community Setting**

**Midwestern University**

Co-Principal Investigator

Study focuses on psychological stress from COVID-19 on population in a rural setting

1/2015-3/2015

**Bacteria within our water system**

**Central Washington University**

Data collector

Implemented various microbiology techniques to culture and identify multiple bacteria species using water samples collected by Dr. Pinkart from various water sources in Ellensburg, WA

9/2014-2/2015

**Coliform Bacteria of Wilson Creek**

**Central Washington University**

Data collector

Collected water samples from Wilson Creek to pinpoint *E. coli* outbreak. Used flow cytometry to identify and culture strains

## Professional Memberships and Committees

1/2022-Present

**KRMC Sepsis Committee - Kingman Regional Medical Center**

7/2021-Present

**MWU Research Committee - Midwestern University**

2/2019-Present

**Society for Academic Emergency Medicine**

2/2018-5/2020

**Sigma Sigma Phi Gamma Delta Chapter, National Osteopathic Honor Society**

8/2016-Present

**American College of Emergency Physicians**

8/2016-Present

**American College of Osteopathic Emergency Physicians**

6/2015-6/2020

**Master Hunter of Washington Department of Fish and Wildlife**

# Holiday FESTIVITIES

DECEMBER 15

## Cookie Contest

Deliver your cookies to the Vineyard Conference Room between 7:00am - 9:00am. If you would like to be a judge in the cookie contest, please contact Annie Tiemersma. Judging will take place from 9:30am - 10:30am.

## Lunch

Prime Rib lunch will be served in the Hospital Courtyard from 11:00am - 1:00pm. Nightshift dinner will be served in the Vineyard Conference Room at 9:00pm.

## Ugly Sweater Contest

Get creative and sport your most festive outfit! Submit your picture to [contest@prosserhealth.org](mailto:contest@prosserhealth.org). Voting will be available on SharePoint starting December 16th.

## No Shave November

Judging for No Shave November will take place. Submit a picture of your beard to [contest@prosserhealth.org](mailto:contest@prosserhealth.org). Voting will be available on SharePoint starting December 16th.

## Support Families in Need

If your department adopted a family in need this season, please turn in all gifts wrapped and labeled to Community Relations by 4:00pm on December 15th.

## Holiday Gift Box

### Decorating Contest

Departments provide their own boxes. Decorated boxes must be turned in to the Vineyard Conference Room by 12:00pm on December 15th.



**Prosser**  
Memorial Health

PROOF



PLEASE JOIN US

# Holiday Party



**Prosser**  
Memorial Health

**This is how we care.**

[ProsserHealth.org](http://ProsserHealth.org)



SATURDAY, DECEMBER 10, 2022  
5:30 PM - 12:00 AM  
HAPO CENTER  
6600 BURDEN BLVD, PASCO, WA

**Please join us, with your plus one,  
for a night of great food, drinks,  
and good times! Try your luck and  
skill at the casino tables.**

**There is a block of discounted  
hotel rooms available through  
the Holiday Inn.**

**Please RSVP to Community Relations  
Department by December 6:  
509.786.6601.**



PROSSER MEMORIAL HEALTH EMPLOYEE NEWSLETTER

# THE PULSE



# News & Events



## Veterans Day Breakfast

On behalf of the 150 veterans and their families that we served breakfast to – THANK YOU! Our guests were so appreciative of PMH for hosting an event to thank and honor them!



A shout out to the Dietary Team who made a fantastic breakfast that was enjoyed by all!





# Turkey Trot

On November 19, 2022, PMH held its first ever turkey trot! Thank you to all who participated and congratulations to our winners!



# News & Events



## Groundbreaking Ceremony

On November 29, 2022, we broke ground at the new hospital site. WOW, what a day! Thank you to those that braved the cold and joined us for this meaningful and historic day that has been 75 years in the making! Thank you to our incredible team, patients, and the communities we serve for your unwavering dedication and continued support. The future of healthcare is here, and THIS is how we grow!





## Gratitude Winners

During the month of November, Acute Care and Family Birthplace staff submitted what they are thankful for on the "Gratitude Wall" displayed in their department. Congratulations Kristie, Kelly, and Christine for receiving prizes in the Gratitude Wall drawing!



## OR Wall of Gratitude



# News & Events



## Halloween Festivities

Congratulations to all the participants and winners. What a fun day!! HR will contact the winners and department leaders to arrange prize distribution. Each department wins a Pizza Party for the full department.

### Employee Costume Winners



1. Ryan Austin  
\$100 Amazon Card



2. Sara Dawson  
\$50 Amazon Card



3. Rhonda Wild  
\$50 Amazon Card

# NEWS & EVENTS

## Department Costume Winners



1. Med Staff



2. Laboratory

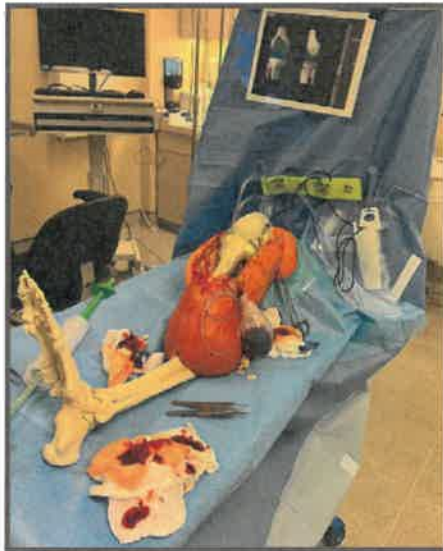


3. Information Technology

## Pumpkin Contest Winners



1. Environmental Care



2. Surgery



3. Acute Care

# News & Events

## Dermatology Center Open House

On November 18, 2022, an open house was held at the Dermatology Center. Dr. Nicola Nylander and Karmina Bowen, ARNP were there to discuss medical and cosmetic dermatology services offered at the clinic.



## Holiday Party

Join us Saturday, December 10 from 5:30 pm - 12:00 am at the HAPO Center for our staff holiday party! RSVP on SharePoint by December 6.

# Holiday FESTIVITIES

DECEMBER 15

## Cookie Contest

Deliver your cookies to the Vineyard Conference Room between 7:00am - 9:00am. If you would like to be a judge in the cookie contest, please contact Annie Tiemersma. Judging will take place from 9:30am - 10:30am.

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**Prosser**  
Memorial Health



# Welcome to the Team!



Left to right: Rosa Merlin, Marneye Driesen, Vanessa Cisneros, Amanda Bazan, John Stalder, Jennifer Nunez, Rose Hildebrant, Tricia McClure, Heath Anderson, Guadalupe Mariano

# WELCOME TO THE TEAM

## What have you enjoyed at Prosser Memorial Health so far?

**John Stalder**  
Surgery PACU RN  
My coworkers.

**Marneye Driesen**  
Diagnostic Imaging - Echo Tech  
The amazing people I work with.

**Amanda Bazan**  
Benton City Patient Registrar  
I enjoy how PMH is involved within its community.

**Vanessa Cisneros**  
EVS Technician  
Being part of an amazing team.

**Heath Anderson**  
Sr. Accountant Finance Dept.  
The family and friendly environment here at PMH.

**Jennifer Nunez**  
Prosser Clinic Medical Assistant  
Welcoming staff.

**Rose Hildebrant**  
FBC  
The positive energy throughout the hospital.

**Tricia McClure**  
PACU - RN  
The positive work environment.

**Guadalupe Mariano**  
Specialty Clinic CMA  
The positive environment.

**Rosa Merlin**  
Outpatient Scheduler  
I have enjoyed the opportunity to learn in the medical field.

## What is your favorite Thanksgiving food?

**John Stalder**  
Surgery PACU RN  
Potatoes and deviled eggs.

**Marneye Driesen**  
Diagnostic Imaging - Echo Tech  
Pumpkin pie - extra whip.

**Amanda Bazan**  
Benton City Patient Registrar  
Mashed potatoes with gravy and stuffing.

**Vanessa Cisneros**  
EVS Technician  
Stuffing and cranberry sauce.

**Heath Anderson**  
Sr. Accountant Finance Dept.  
Smoked brisket, smoked mac & cheese, and smoked potatoes.

**Jennifer Nunez**  
Prosser Clinic Medical Assistant  
Ham.

**Rose Hildebrant**  
FBC  
Mashed potatoes.

**Tricia McClure**  
PACU - RN  
Turkey, mashed potatoes, and stuffing all mixed together.

**Guadalupe Mariano**  
Specialty Clinic CMA  
Mashed potatoes and gravy.

# Anniversaries

## Happy Anniversary!

Thank you for being an essential part of Prosser Memorial Health's success.

### Happy 1 Year

- **Hillary Baker**  
Laboratory Assistant II
- **Dr. Mitchell Cohen**  
Prosser Digestive Health Center
- **Sandi McCall**  
Environmental Services  
Technician
- **Aimee Sarmiento Moreno**  
Medical/Surgical Technician
- **Kai Jones**  
Emergency Department  
Physician Assistant
- **Ashley Kristofzski**  
Family Birthplace RN
- **Judith Chavez**  
Family Birthplace RN
- **Kristie De La Rosa**  
Care Transition Department  
RN Resource Nurse

### Happy 2 Years

- **Jasmin Zepeda**  
Officer Health Information  
Management Certified Coder
- **Deborah Bucknell**  
Benton City Clinic  
Patient Services Representative

### Happy 3 Years

- **Afton Dunham**  
Prosser General Surgery Center  
ARNP
- **Jeanna Graybill**  
Nursing Administration  
RN Resource Nurse
- **Laura Sosa**  
Grandview Clinic  
Certified Medical Assistant

### Happy 4 Years

- **Maria Del Rubi Rodriguez**  
Laboratory Assistant II

### Happy 5 Years

- **Griselda Ponce-Verduzco**  
Medical/Surgical Technician
- **ShaRhonda Wild**  
Diagnostic Imaging  
Ultrasonographer - R

### Happy 7 Years

- **Timothy Shipley**  
Emergency Medical Services  
(EMS) EMT B
- **Kristal Oswalt**  
Community Relations  
Community Outreach  
Coordinator

### Happy 9 Years

- **Donna Tuning**  
Information Services  
Clinical Informatics Nurse

### Happy 11 Years

- **Rocky Snider**  
Human Resources  
HR Generalist - Senior Recruiter
- **Dr. Wali Martin**  
Emergency Department

### Happy 12 Years

- **Nigel Day**  
Emergency Department  
Registered Nurse

### Happy 14 Years

- **Rebecca Hernandez**  
Health Information  
Management Technician II

### Happy 23 Years

- **Karla Greene**  
Nursing Administration  
RN Resource Nurse

### Happy 27 Years

- **Steven Broussard**  
Maintenance  
Director of Support Services

# Birthdays



## Free 20oz Busy Bean Coffee on your birthday!

On your birthday, we just want to let you know that it is a great pleasure working with truly inspirational figures like yourselves. Thank you for all the incredible support you give towards Prosser Memorial Health. Happy Birthday to you all! #ThisIsHowWeCare

### December 2

- **Yolanda Campos**  
Prosser Women's Clinic  
Patient Services Representative

### December 4

- **Veronica Reyna**  
Laboratory Assistant II

### December 5

- **Steven Broussard**  
Maintenance  
Director of Support Services
- **Rose Hildebrant**  
Nursing Administration  
RN Resource Nurse

### December 6

- **Nicomedes Estrada Garcia**  
Environmental Services Technician
- **Cheryl Stafford**  
Laboratory Assistant II

### December 7

- **Magdalena Fernandez**  
Patient Registration  
Patient Registrar

### December 11

- **Aurora Weddle**  
Diagnostic Imaging Director
- **Dr. Elizabeth Karr**  
Emergency Physician

### December 12

- **Kristal Oswalt**  
Community Relations  
Community Outreach Coordinator

### December 13

- **Cisco Wilkinson**  
Diagnostic Imaging  
CT Technologist - R Eligible

### December 16

- **Madison Benjert**  
Family Birthplace RN
- **Steven Peters**  
Benton City Clinic  
Licensed Mental Health Counselor
- **Donna Haydon**  
Laboratory QA QC Technologist
- **Tamara Schaff**  
Prosser Clinic & Benton City Clinics  
Director

### December 17

- **Edith Nateras**  
Emergency Department  
Technician
- **Savanah McLaughlin**  
Emergency Medical Services  
Paramedic

### December 18

- **Dr. David Carl**  
Benton City Clinic
- **Miriam Robles**  
Medical/Surgical RN

### December 19

- **Salud Gonzalez**  
Benton City Clinic  
Patient Services Representative

### December 20

- **Beth Phinney**  
Benton City Clinic  
Patient Services Representative

### December 21

- **Olga Cuevas**  
Family Birthplace  
OB Technician

### December 22

- **Rachel Castillo**  
Surgical Services RN

### December 24

- **Olena Larsen**  
Surgical Services  
Central Sterilizing Technician

### December 25

- **Carling Vaux**  
Surgical Services  
RN Lead
- **Lourdes Tlatenchi**  
Laboratory Assistant II

### December 26

- **Kelly Knurbein**  
Family Birthplace RN

### December 27

- **Cassandra Hansen**  
Emergency Medical Services  
EMT B
- **Gladys Marquez**  
Diagnostic Imaging  
MRI Tech

### December 28

- **Courtney Estell**  
Emergency Medical Services  
Paramedic
- **Billie Brown**  
OP Special Procedures RN

### December 30

- **Sasha Thomasson**  
Care Transition Department  
Director of Care Co-ordination

### December 31

- **Bryon Dirkes**  
Chief Human Resources Officer
- **Ana Garcia**  
Prosser Specialty Clinic CMA
- **Amber Herrera**  
Prosser Clinic  
Patient Services Representative

# ASPIRE Awards



Our ASPIRE program recognizes team members who demonstrate our core values of Accountability, Service, Promoting Teamwork, Integrity, Respect and Excellence.



## Dr. Jacobo Rivero

Congratulations to Dr. Jacobo Rivero, our Emergency Department provider, for receiving a Bronze ASPIRE Award! Dr. Rivero came in on his day off to help the ED one night when the ED provider working was in a prolonged rapid response with a patient and could not leave to assist other patients. The ED staff greatly appreciated Dr. Rivero coming in to help alleviate the patients we had waiting. He never hesitates to jump in with his calm and friendly demeanor whenever we need him. Thank you Dr. Rivero!



## Nina Hanson

Congratulations to Nina Hanson, Prosser Memorial Health Paramedic, for receiving a Gold ASPIRE Award! Our Community Paramedic Team was dispatched to a local care facility to provide wound care for a hospice patient that required a higher level of care than could be provided by the facility staff. Nina took great care not to cause the patient any pain, while comforting her and explaining how she was going to treat the patient's wound and saving her a trip to the hospital. On behalf of your patients and your PMH team, thank you for delivering excellent patient care with compassion.

# ASPIRE AWARDS



## Paul Weisz

Congratulations to Paul Weisz, in our Maintenance Department, for receiving a Gold ASPIRE Award! Paul drove to the Tri-Cities to pick up a medication for an ER patient that had a critical condition. He then drove to Harborview Hospital in Seattle to deliver blood samples that needed specialized laboratory testing done ASAP. Paul ensured that this patient received the proper care as fast as possible. Thank you for jumping in to assist the ED Team! It was truly appreciated by everyone involved.



## Jackie Villanueva

Congratulations to Jackie Villanueva, Surgical Services OR Tech for receiving a Bronze ASPIRE Award! Jackie jumped into action in the OR breakroom performing the Heimlich maneuver on a fellow employee who was choking.



## THINK BEYOND FINANCES WHEN PLANNING FOR RETIREMENT

Ensuring that you have enough income to live comfortably in retirement should be a critical goal. However, money is not the only thing you need to consider when you are planning for your retirement. To enjoy a truly satisfying retirement, you also need to focus on maintaining good health now and developing interests that can absorb your time when you are no longer working. Moreover, smart retirement planning considers where you will live. Deciding whether to stay where you are, to move elsewhere, to downsize, or to rent all require careful thought on your part. This article offers some tips on how to examine these possibilities.

### Where to Call Home

Do you intend to continue living in your present home when you retire? Or is downsizing in your future? Many retirees find that they no longer wish to deal with the trouble of maintaining a large family home. They want a simpler lifestyle and some opt to buy a house with less square footage than their current home. Others choose to rent and let someone else take care of the upkeep of their home.

You should also consider your network of family and friends as well as access to entertainment and shopping. If regular contact with family and friends is important to your quality of life, you may want to remain nearby. If dining out and attending concerts and plays are important to you, be sure that wherever you choose to live offers the leisure activities you enjoy.

### Health and Access to Quality Health Care

Not every region is equal when it comes to health care. Some areas are well served by hospitals, clinics, and medical specialists. Others, especially rural areas, find it hard to attract physicians and often have smaller hospitals with fewer specialist departments. Your health care needs will obviously play a big role in deciding where you want to live in retirement.

Another point to consider when thinking about where you will live is how easy it will be for you to pursue outdoor activities that you enjoy and help you stay fit. Obviously, living in warmer parts of the country means that you can walk, jog, bike, or golf most days of the year. Or if you are a winter sports enthusiast, you may prefer a colder climate.

### Hobbies and Activities

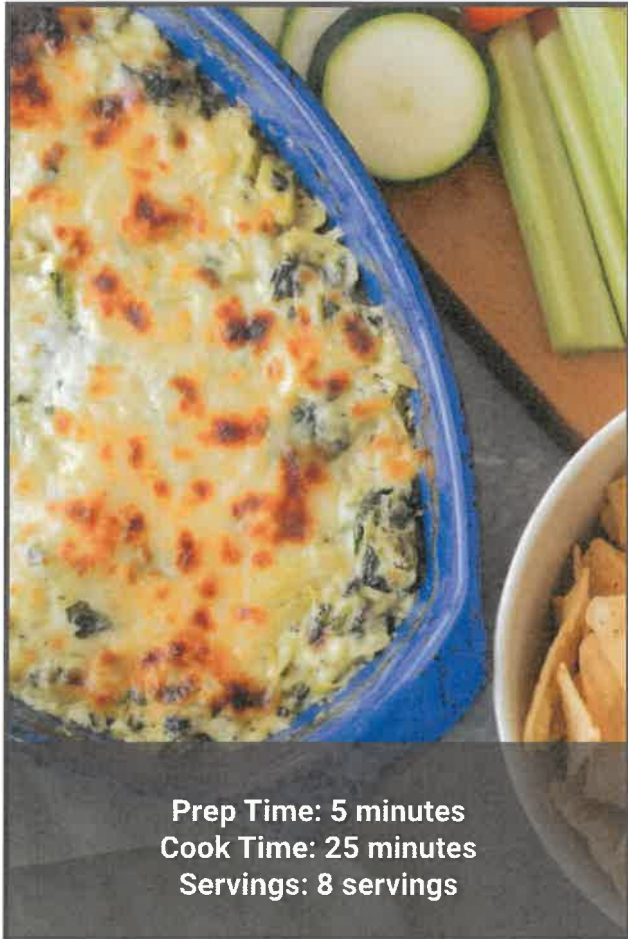
Planning for how you'll spend your leisure time can keep you focused and prevent you from becoming bored. Volunteering, attending classes at nearby colleges and universities, traveling, or taking day trips are just some of the many ways you can fill your post-work leisure hours. You might even be able to turn a favorite hobby into a business and make some extra money in the process. The important thing is to have a plan for retirement that keeps your mind and body occupied.

Coordinating your lifestyle goals and your financial planning can help make for a more enjoyable and fulfilling retirement. A financial professional can assist you with your planning.

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Neither USI nor its affiliates and/or employees/agents/registered representatives offer legal or tax advice. Prior to acting on this information, we recommend that you seek independent advice specific to your situation from a qualified legal/tax professional.

# Health & Wellness



## Healthy Spinach Artichoke Dip

### Ingredients:

- 14 oz artichoke hearts drained WELL and cut in small pieces (about 1.5 cups)
- 5 oz frozen spinach (about 2.5 cups thawed & drained)
- 1 cup non fat greek yogurt
- 1/2 cup small curd cottage cheese (I used 4% milkfat)
- 1 cup shredded mozzarella cheese
- 1/4 cup grated parmesan cheese
- 1/2 teaspoon pepper
- 1/2 teaspoon garlic powder
- 1/2 teaspoon onion powder

### Instructions:

1. Preheat oven to 400°F.
2. Thaw and drain spinach thoroughly. You can use a strainer and a paper towel to absorb the liquid.
3. In a bowl, mix all ingredients until thoroughly combined.
4. Pour dip mixture into a glass 8x8 or medium oval pan (top with extra cheese if desired!) and bake at 400°F for 25 minutes.
5. Broil for 1-2 minutes before serving to get cheese on top brown and melty.
6. Serve with chips or veggies or choice.

- **Calories: 111**
- **Carbohydrates: 6g**
- **Protein: 11g**
- **Fat: 5g**
- **Saturated Fat: 3g**

- **Cholesterol: 18mg**
- **Sodium: 255mg**
- **Potassium: 127mg**
- **Fiber: 2g**
- **Sugar: 2g**

- **Vitamin A: 2714IU**
- **Vitamin C: 11mg**
- **Calcium: 182mg**
- **Iron: 1mg**





**Prosser**  
Memorial Health

[ProsserHealth.org](http://ProsserHealth.org)




# Prosser

## Memorial Health

### 2022 ASPIRE MEDAL AWARD WINNERS

Gold Winners	Silver Winners	Bronze Winners
<ul style="list-style-type: none"> <li>• Nora Newhouse</li> </ul>	<ul style="list-style-type: none"> <li>• Isabel Diaz</li> </ul>	<ul style="list-style-type: none"> <li>• Angelita Rojas-Gonzalez</li> </ul>
<ul style="list-style-type: none"> <li>• Dr. Brian Proctor</li> </ul>	<ul style="list-style-type: none"> <li>• Brianna Saenz</li> </ul>	<ul style="list-style-type: none"> <li>• Maria Rubalcaba</li> </ul>
<ul style="list-style-type: none"> <li>• Mary Castilleja</li> </ul>	<ul style="list-style-type: none"> <li>• Maria Rivera</li> </ul>	<ul style="list-style-type: none"> <li>• Cassandra Ambriz</li> </ul>
<ul style="list-style-type: none"> <li>• Andy Vanguardia</li> </ul>	<ul style="list-style-type: none"> <li>• Javier Gonzalez</li> </ul>	<ul style="list-style-type: none"> <li>• Jaron Raymond</li> </ul>
<ul style="list-style-type: none"> <li>• Dr. Jared Clifford</li> </ul>	<ul style="list-style-type: none"> <li>• Dr. Wali Martin</li> </ul>	<ul style="list-style-type: none"> <li>• Justin Herzog</li> </ul>
<ul style="list-style-type: none"> <li>• Jill Pagel</li> </ul>	<ul style="list-style-type: none"> <li>• Maggie Munoz-Costello</li> </ul>	<ul style="list-style-type: none"> <li>• Andy Vanguardia</li> </ul>
<ul style="list-style-type: none"> <li>• Maryann Hildebrant</li> </ul>	<ul style="list-style-type: none"> <li>• Ana Garcia</li> </ul>	<ul style="list-style-type: none"> <li>• Miranda Smith</li> </ul>
<ul style="list-style-type: none"> <li>• Griselda Villalobos</li> </ul>	<ul style="list-style-type: none"> <li>• Denise Guillen</li> </ul>	<ul style="list-style-type: none"> <li>• Dr. Jacobo Rivero</li> </ul>
<ul style="list-style-type: none"> <li>• Nina Klewin</li> </ul>	<ul style="list-style-type: none"> <li>• Katie Grow</li> </ul>	<ul style="list-style-type: none"> <li>• Nicomedes Garcia</li> </ul>
<ul style="list-style-type: none"> <li>• Rosa Rivera</li> </ul>	<ul style="list-style-type: none"> <li>• Ann Brunner</li> </ul>	<ul style="list-style-type: none"> <li>• Jacqueline Villanueva</li> </ul>
<ul style="list-style-type: none"> <li>• Paul Weisz</li> </ul>	<ul style="list-style-type: none"> <li>• Dr. Steven Rode</li> </ul>	<ul style="list-style-type: none"> <li>• Corina Montelongo</li> </ul>
<ul style="list-style-type: none"> <li>• Miranda Smith</li> </ul>	<ul style="list-style-type: none"> <li>• Noemi Borrego</li> </ul>	<ul style="list-style-type: none"> <li>• Andy Vanguardia</li> </ul>
<ul style="list-style-type: none"> <li>• Madison Benjert</li> </ul>		
<ul style="list-style-type: none"> <li>• Erica Garza</li> </ul>		

Attachment V



**Prosser**  
Memorial Health  
Balance Sheet  
November 30, 2022

	Assets					Liabilities & Fund Balance			
	11/30/2022	10/31/2022	11/30/2021	12/31/2021		11/30/2022	10/31/2022	11/30/2021	12/31/2021
Cash & Temporary Investments	13,938,017	12,953,179	9,731,720	9,316,646	Current Portion of Bonds Payable	886,359	837,283	851,489	871,489
COVID Cash Holding	-	-	1,571,762	1,546,716	Current Portion of USDA	-	-	-	-
Gross Patient Accounts Receivable	42,090,356	40,551,941	32,541,479	31,324,657	Current Portion Capital Leases	254,546	233,078	248,904	248,495
Less Allowances for Uncollectible	(26,522,000)	(25,442,000)	(20,130,020)	(19,716,000)	Accounts Payable	2,645,862	2,761,042	2,274,393	1,797,177
Net Patient Receivables	15,568,356	15,109,941	12,411,459	11,608,657	Payroll & Related Liabilities	3,796,968	3,484,197	3,091,066	3,410,607
Taxes Receivable	40,946	183,667	31,323	23,641	Cost Report Payable	518,603	480,053	950,837	510,126
Receivable from 3rd Party Payor	248,250	316,323	-	241,933	Other Payables to 3rd Parties	1,346,364	1,346,364	969,467	969,467
Inventory	601,958	588,267	491,889	570,651	Deferred LEOFF Pension	483,233	483,233	-	483,233
Prepaid Expenses	1,315,420	1,478,694	1,321,216	1,152,815	Deferred Tax Revenue	76,197	152,393	71,831	-
Other Current Assets	27,643	25,824	7,961	4,746	Deferred EHR Medicare Revenue	-	-	-	-
Total Current Assets	31,740,590	30,655,895	25,567,330	24,465,805	Deferred COVID Revenue	-	-	1,571,762	1,546,716
LEOFF Net Pension Asset	1,106,851	1,106,851	-	1,106,851	Accrued Interest Payable	111,081	92,799	114,644	19,670
Whitehead Fund - LGIP	1,230,933	1,227,144	1,214,762	1,214,855	Other Current Liabilities	-	-	-	-
Funded Depreciation - Cash	9,209,672	4,791,104	791,065	1,003,653	Total Current Liabilities	10,119,213	9,870,442	10,144,393	9,856,980
Funded Depreciation - TVI	10,742,728	14,946,713	17,691,455	17,537,681	Non Current Liabilities				
Bond Obligation Cash Reserve	767,555	767,552	767,514	767,520	Bonds Payable net of CP	8,945,003	8,994,398	9,787,373	9,482,042
USDA Debt Reserve Fund	-	-	-	-	USDA Financing Payable net of CP	-	-	-	-
Tax Exempt Lease Funds	-	-	-	-	Capital Leases net of CP	372,238	393,707	605,917	605,826
Board Designated Assets	23,057,739	22,839,364	20,464,796	21,630,560	Total Non Current Liabilities	9,317,241	9,388,105	10,393,290	10,087,868
Land	478,396	478,396	478,396	478,396	Total Liabilities	19,436,454	19,258,547	20,537,683	19,094,572
Property Plant & Equipment	47,894,235	47,610,526	44,852,635	46,165,427	Fund Balance				
Construction In Progress	6,106,471	6,239,317	5,152,193	4,226,277	Current YR Unrestricted Fund Balance	10,525,319	9,465,092	15,711,390	16,487,111
Accumulated Depreciation	(32,992,082)	(32,777,816)	(30,459,130)	(30,725,767)	Prior YR Unrestricted Fund Balance	49,065,095	49,065,095	32,577,983	32,577,984
Net Property Plant & Equipment	21,487,020	21,550,423	20,024,094	20,144,333	Restricted Fund Balance	-	-	-	-
Investment & Other Non Current Assets	996,079	997,612	1,025,396	1,023,805	Total Fund Balance	59,590,414	58,530,187	48,289,373	49,065,095
Land - Gap Road	1,745,440	1,745,440	1,745,440	1,745,440					
Net Investments & Other Non Current Asset:	2,741,519	2,743,052	2,770,836	2,769,245					
<b>Total Assets</b>	<b>\$ 79,026,868</b>	<b>\$ 77,788,734</b>	<b>\$ 68,827,056</b>	<b>\$ 69,009,943</b>	<b>Total Liabilities &amp; Fund Balance</b>	<b>\$ 79,026,868</b>	<b>\$ 77,788,734</b>	<b>\$ 68,827,056</b>	<b>\$ 69,009,943</b>



# Prosser Memorial Health

## Statement of Operations November 30, 2022

Month Ending				Prior	
Actual	Budget	Variance	%	Year	%
\$ 3,394,828	\$ 3,825,206	\$ (430,378)	-11%	\$ 3,043,354	12%
20,068,843	14,277,132	5,791,711	41%	13,593,213	48%
23,463,671	18,102,338	5,361,333	30%	16,636,567	41%
5,374,568	3,718,488	(1,656,080)	-45%	3,266,390	65%
4,859,892	3,976,544	(883,348)	-22%	3,668,725	32%
3,998,907	2,263,938	(1,734,969)	-77%	2,412,022	66%
563,124	354,197	(208,927)	-59%	368,145	53%
14,796,491	10,313,167	(4,483,324)	-43%	9,715,282	52%
278,784	300,988	22,204	7%	296,306	-6%
144,130	326,549	182,419	56%	103,191	40%
15,219,405	10,940,704	(4,278,701)	-39%	10,114,779	50%
8,244,266	7,161,634	1,082,632	15%	6,521,788	26%
-	126,814	(126,814)	-100%	1,496,853	-100%
14,803	15,480	(677)	-4%	19,922	-26%
<b>8,259,069</b>	<b>7,303,928</b>	<b>955,141</b>	<b>13%</b>	<b>8,038,563</b>	<b>3%</b>
3,128,147	3,048,403	(79,744)	-3%	2,734,884	14%
662,682	788,296	125,614	16%	685,761	-3%
377,596	282,947	(94,649)	-33%	427,135	-12%
4,168,425	4,119,646	(48,779)	-1%	3,847,780	8%
405,214	348,831	(56,383)	-16%	333,691	21%
50,368	77,819	27,451	35%	82,246	-39%
1,448,039	1,202,958	(245,081)	-20%	877,373	65%
32,910	47,475	14,565	31%	26,701	23%
509,088	452,325	(56,763)	-13%	423,787	20%
179,309	161,302	(18,007)	-11%	180,858	-1%
127,693	103,587	(24,106)	-23%	97,105	31%
217,873	196,422	(21,451)	-11%	204,290	7%
116,184	141,499	25,315	18%	152,045	-24%
3,086,678	2,732,218	(354,460)	-13%	2,378,096	30%
<b>7,255,103</b>	<b>6,851,864</b>	<b>(403,239)</b>	<b>-6%</b>	<b>6,225,876</b>	<b>17%</b>
<b>1,003,966</b>	<b>452,064</b>	<b>551,902</b>	<b>122%</b>	<b>1,812,687</b>	<b>-45%</b>
83,182	76,314	6,868	9%	71,831	16%
1,174	2,935	(1,761)	-60%	(24,802)	-105%
(28,094)	(46,681)	18,587	-40%	(32,361)	-13%
-	347	(347)	-100%	-	-
<b>56,262</b>	<b>32,915</b>	<b>23,347</b>	<b>71%</b>	<b>14,668</b>	<b>284%</b>
<b>\$ 1,060,228</b>	<b>\$ 484,979</b>	<b>\$ 575,249</b>	<b>119%</b>	<b>\$ 1,827,355</b>	<b>-42%</b>

Year to Date				Prior		
Actual	Budget	Variance	%	Year	%	
<b>Gross Patient Services Revenue</b>						
Inpatient	\$ 41,023,661	\$ 42,419,965	\$ (1,396,304)	-3%	\$ 37,962,806	8%
Outpatient	189,874,811	158,327,515	31,547,296	20%	142,077,060	34%
<b>Total Gross Patient Services Revenue</b>	<b>230,898,472</b>	<b>200,747,480</b>	<b>30,150,992</b>	<b>15%</b>	<b>180,039,866</b>	<b>28%</b>
<b>Deductions from Revenue</b>						
<b>Contractual Allowances</b>						
Medicare	49,235,811	41,236,501	(7,999,310)	-19%	36,868,006	34%
Medicaid	48,599,810	44,098,232	(4,501,578)	-10%	39,588,123	23%
Negotiated Rates	34,311,150	25,106,146	(9,205,004)	-37%	23,270,023	47%
Other Adjustments	8,055,318	3,927,896	(4,127,422)	-105%	3,568,849	126%
<b>Gross Contractual Allowances</b>	<b>140,202,089</b>	<b>114,368,775</b>	<b>(25,833,314)</b>	<b>-23%</b>	<b>103,295,001</b>	<b>36%</b>
Charity Care	4,010,107	3,337,835	(672,272)	-20%	2,762,051	45%
Bad Debt	1,436,477	3,621,298	2,184,821	60%	3,201,921	-55%
<b>Total Deductions From Revenue</b>	<b>145,648,673</b>	<b>121,327,908</b>	<b>(24,320,765)</b>	<b>-20%</b>	<b>109,258,973</b>	<b>33%</b>
<b>Net Patient Services Revenue</b>	<b>85,249,799</b>	<b>79,419,572</b>	<b>5,830,227</b>	<b>7%</b>	<b>70,780,893</b>	<b>20%</b>
COVID Net Revenue	1,785,036	1,394,954	390,082	28%	10,197,897	-82%
Other Operating Revenue	232,221	282,780	(50,559)	-18%	395,887	-41%
<b>Net Revenue</b>	<b>87,267,056</b>	<b>81,097,306</b>	<b>6,169,750</b>	<b>8%</b>	<b>81,374,677</b>	<b>7%</b>
<b>Operating Expenses</b>						
Salaries	34,113,663	33,805,538	(308,125)	-1%	30,026,951	14%
Benefits	8,489,048	8,741,875	252,827	3%	7,423,283	14%
Purchased Labor	3,809,205	3,137,763	(671,442)	-21%	3,134,016	22%
<b>Sub-Total Labor Costs</b>	<b>46,411,916</b>	<b>45,685,176</b>	<b>(726,740)</b>	<b>-2%</b>	<b>40,584,250</b>	<b>14%</b>
Professional Fees - Physicians	4,735,620	3,837,143	(898,477)	-23%	3,952,229	20%
Professional Fees - Other	588,363	858,604	270,241	31%	707,024	-17%
Supplies	13,115,770	13,400,224	284,454	2%	11,040,661	19%
Purchased Services - Utilities	472,704	522,230	49,526	9%	465,317	2%
Purchased Services - Other	4,334,293	4,975,579	641,286	13%	3,444,544	26%
Rentals & Leases	1,993,466	1,774,325	(219,141)	-12%	1,976,263	1%
Insurance License & Taxes	1,131,958	1,139,465	7,507	1%	958,412	18%
Depreciation & Amortization	2,400,482	2,160,641	(239,841)	-11%	2,031,129	18%
Other Operating Expenses	1,180,883	1,557,639	376,756	24%	900,268	31%
<b>Sub-Total Non-Labor Expenses</b>	<b>29,953,539</b>	<b>30,225,850</b>	<b>272,311</b>	<b>1%</b>	<b>25,475,847</b>	<b>18%</b>
<b>Total Operating Expenses</b>	<b>76,365,455</b>	<b>75,911,026</b>	<b>(454,429)</b>	<b>-1%</b>	<b>66,060,097</b>	<b>16%</b>
<b>Operating Income (Loss)</b>	<b>10,901,601</b>	<b>5,186,280</b>	<b>5,715,321</b>	<b>110%</b>	<b>15,314,580</b>	<b>-29%</b>
<b>Non Operating Income</b>						
Tax Revenue	860,868	839,449	21,419	3%	803,981	7%
Investment Income	(967,783)	32,280	(1,000,063)	-3098%	(38,478)	2415%
Interest Expense	(342,279)	(513,492)	171,213	-33%	(385,980)	-11%
Other Non Operating Income (Expense)	72,912	3,820	69,092	1809%	17,287	322%
<b>Total Non Operating Income</b>	<b>(376,282)</b>	<b>362,057</b>	<b>(738,339)</b>	<b>-204%</b>	<b>396,810</b>	<b>-195%</b>
<b>Net Income (Loss)</b>	<b>\$ 10,525,319</b>	<b>\$ 5,548,337</b>	<b>\$ 4,976,982</b>	<b>90%</b>	<b>\$ 15,711,390</b>	<b>-33%</b>



# Prosser

## Memorial Health

### Statement of Operations 13-month Trend

	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22
<b>Gross Patient Services Revenue</b>													
Inpatient	\$ 3,043,354	\$ 3,406,566	\$ 3,605,247	\$ 3,288,747	\$ 3,726,370	\$ 4,138,763	\$ 3,310,749	\$ 3,857,898	\$ 3,644,634	\$ 4,156,328	\$ 3,828,140	\$ 4,071,955	\$ 3,394,828
Outpatient	13,593,213	14,195,193	13,346,293	14,047,763	17,199,727	16,039,568	17,523,148	18,638,990	16,756,514	19,301,817	18,380,184	18,571,964	20,068,843
<b>Total Gross Patient Services Revenue</b>	<b>16,636,567</b>	<b>17,601,759</b>	<b>16,951,540</b>	<b>17,336,510</b>	<b>20,926,097</b>	<b>20,178,331</b>	<b>20,833,897</b>	<b>22,496,888</b>	<b>20,401,148</b>	<b>23,458,145</b>	<b>22,208,324</b>	<b>22,643,919</b>	<b>23,463,671</b>
<b>Deductions from Revenue</b>													
<b>Contractual Allowances</b>	39%	40%	38%	40%	38%	33%	38%	36%	35%	39%	40%	36%	35%
Medicare	3,266,390	3,200,913	3,393,158	3,902,405	3,785,864	4,551,851	4,308,246	5,205,426	4,601,476	4,915,032	4,138,002	5,059,783	5,374,568
Medicaid	3,668,725	3,909,940	4,012,377	2,920,563	4,802,755	4,652,839	4,548,393	4,701,779	4,559,333	4,985,014	4,088,025	4,468,840	4,859,892
Negotiated Rates	2,412,022	2,549,312	2,379,307	2,584,862	2,978,601	2,714,651	2,834,178	3,257,683	2,888,068	3,416,698	3,394,502	3,863,693	3,998,907
Other Adjustments	368,145	398,392	199,926	624,993	626,880	1,328,948	654,495	818,520	652,908	598,097	1,110,368	877,059	563,124
<b>Gross Contractual Allowances</b>	<b>9,715,282</b>	<b>10,058,557</b>	<b>9,984,768</b>	<b>10,032,823</b>	<b>12,194,100</b>	<b>13,248,289</b>	<b>12,345,312</b>	<b>13,983,408</b>	<b>12,701,785</b>	<b>13,914,841</b>	<b>12,730,897</b>	<b>14,269,375</b>	<b>14,796,491</b>
Charity Care	296,306	599,602	341,961	354,814	452,226	343,536	438,650	521,022	351,581	287,801	358,727	281,005	278,784
Bad Debt	103,191	(114,798)	214,560	(24,155)	243,688	(92,400)	221,628	(133,838)	297,843	204,558	339,947	20,517	144,130
<b>Total Deductions From Revenue</b>	<b>10,114,779</b>	<b>10,543,361</b>	<b>10,541,289</b>	<b>10,363,482</b>	<b>12,890,014</b>	<b>13,499,425</b>	<b>13,005,590</b>	<b>14,370,592</b>	<b>13,351,209</b>	<b>14,407,200</b>	<b>13,429,571</b>	<b>14,570,897</b>	<b>15,219,405</b>
<b>Net Patient Services Revenue</b>	<b>6,521,788</b>	<b>7,058,398</b>	<b>6,410,251</b>	<b>6,973,028</b>	<b>8,036,083</b>	<b>6,678,906</b>	<b>7,828,307</b>	<b>8,126,296</b>	<b>7,049,939</b>	<b>9,050,945</b>	<b>8,778,753</b>	<b>8,073,022</b>	<b>8,244,266</b>
COVID Grant Revenue	1,496,853	25,046	455,985	107,900	50,843	712,772	52,506	249,375	107,208	38,580	-	-	-
Other Operating Revenue	19,922	28,650	118,972	(76,453)	23,220	50,187	23,821	15,152	27,206	15,458	9,756	19,941	14,803
<b>Net Revenue</b>	<b>8,038,563</b>	<b>7,112,094</b>	<b>6,985,208</b>	<b>7,004,475</b>	<b>8,110,146</b>	<b>7,441,865</b>	<b>7,904,634</b>	<b>8,390,823</b>	<b>7,184,353</b>	<b>9,104,983</b>	<b>8,788,509</b>	<b>8,092,963</b>	<b>8,259,069</b>
<b>Operating Expenses</b>	59%	52%	63%	52%	48%	63%	60%	51%	59%	45%	56%	55%	51%
Salaries	2,734,884	3,303,928	2,972,517	2,772,043	2,865,229	2,980,200	3,595,919	3,007,956	3,130,198	3,030,073	3,603,843	3,188,743	3,128,147
Benefits	685,761	68,030	827,743	492,813	753,577	929,136	864,394	805,166	737,393	614,207	877,804	762,928	662,682
Purchased Labor	427,135	310,891	250,000	386,545	269,484	288,146	267,672	328,737	321,151	429,131	438,176	452,568	377,596
<b>Sub-Total Labor Costs</b>	<b>3,847,780</b>	<b>3,682,849</b>	<b>4,050,260</b>	<b>3,651,401</b>	<b>3,888,290</b>	<b>4,197,482</b>	<b>4,727,985</b>	<b>4,141,859</b>	<b>4,188,742</b>	<b>4,073,411</b>	<b>4,919,823</b>	<b>4,404,239</b>	<b>4,168,425</b>
Professional Fees - Physicians	333,691	399,338	407,364	333,806	386,705	382,778	391,045	482,125	424,354	533,096	496,634	492,531	405,214
Professional Fees - Other	82,246	30,749	41,222	61,379	103,229	64,244	(26,169)	54,282	41,765	58,784	63,768	75,491	50,368
Supplies	877,373	1,080,455	1,134,236	1,003,996	1,100,475	961,608	1,416,520	1,182,777	1,122,439	1,198,991	1,244,844	1,301,845	1,448,039
Purchased Services - Utilities	26,701	33,590	49,802	23,513	49,904	37,431	33,429	46,709	53,512	58,004	41,073	46,418	32,910
Purchased Services - Other	423,787	458,116	335,478	381,919	365,468	382,103	477,295	319,531	330,670	459,142	441,901	331,699	509,088
Rentals & Leases	180,858	111,591	181,248	191,423	236,771	216,425	119,924	159,032	149,762	210,436	171,163	177,974	179,309
Insurance License & Taxes	97,105	92,103	99,053	87,858	87,811	101,813	94,344	112,234	87,476	83,089	144,742	105,846	127,693
Depreciation & Amortization	204,290	268,228	212,599	211,565	215,248	220,087	207,039	222,140	223,071	223,551	223,632	223,677	217,873
Other Operating Expenses	152,045	92,216	158,066	105,914	110,506	100,267	78,539	133,508	79,775	120,741	78,687	98,663	116,184
<b>Sub-Total Non-Labor Expenses</b>	<b>2,378,096</b>	<b>2,566,386</b>	<b>2,619,068</b>	<b>2,401,373</b>	<b>2,656,117</b>	<b>2,466,756</b>	<b>2,791,966</b>	<b>2,712,338</b>	<b>2,512,824</b>	<b>2,945,834</b>	<b>2,906,444</b>	<b>2,854,144</b>	<b>3,086,678</b>
<b>Total Operating Expenses</b>	<b>6,225,876</b>	<b>6,249,235</b>	<b>6,669,328</b>	<b>6,052,774</b>	<b>6,544,407</b>	<b>6,664,238</b>	<b>7,519,951</b>	<b>6,854,197</b>	<b>6,701,566</b>	<b>7,019,245</b>	<b>7,826,267</b>	<b>7,258,383</b>	<b>7,255,103</b>
<b>Operating Income (Loss)</b>	<b>1,812,687</b>	<b>862,859</b>	<b>315,880</b>	<b>951,701</b>	<b>1,565,739</b>	<b>777,627</b>	<b>384,683</b>	<b>1,536,626</b>	<b>482,787</b>	<b>2,085,738</b>	<b>962,242</b>	<b>834,580</b>	<b>1,003,966</b>
<b>Non Operating Income</b>													
Tax Revenue	71,831	73,097	74,817	80,262	88,426	77,100	74,594	80,517	78,534	76,197	77,946	69,295	83,182
Investment Income	(24,802)	(146,092)	476	476	(571,938)	11,722	8,769	(186,482)	2,158	10,012	(268,189)	24,040	1,174
Interest Expense	(32,361)	(20,143)	(31,143)	(60,844)	(21,572)	(30,723)	(39,532)	(21,447)	(30,255)	(30,052)	(29,986)	(18,630)	(28,094)
Other Non Operating Income (Expense)	-	6,000	-	81,261	14,920	(2,497)	(20,347)	-	-	4,200	-	(4,625)	-
<b>Total Non Operating Income</b>	<b>14,668</b>	<b>(87,138)</b>	<b>44,150</b>	<b>101,155</b>	<b>(490,164)</b>	<b>55,602</b>	<b>23,484</b>	<b>(127,412)</b>	<b>50,437</b>	<b>60,357</b>	<b>(220,229)</b>	<b>70,080</b>	<b>56,262</b>
<b>Net Income (Loss)</b>	<b>\$ 1,827,355</b>	<b>\$ 775,721</b>	<b>\$ 360,030</b>	<b>\$ 1,052,856</b>	<b>\$ 1,075,575</b>	<b>\$ 833,229</b>	<b>\$ 408,167</b>	<b>\$ 1,409,214</b>	<b>\$ 533,224</b>	<b>\$ 2,146,095</b>	<b>\$ 742,013</b>	<b>\$ 904,660</b>	<b>\$ 1,060,228</b>
<b>Total Margin</b>	<b>22.7%</b>	<b>11.0%</b>	<b>5.1%</b>	<b>14.8%</b>	<b>14.1%</b>	<b>11.1%</b>	<b>5.1%</b>	<b>17.1%</b>	<b>7.4%</b>	<b>23.4%</b>	<b>8.7%</b>	<b>11.1%</b>	<b>12.8%</b>
<b>Margin (Non Operating Income)</b>	<b>22.5%</b>	<b>12.1%</b>	<b>4.5%</b>	<b>13.6%</b>	<b>19.3%</b>	<b>10.4%</b>	<b>4.9%</b>	<b>18.3%</b>	<b>6.7%</b>	<b>22.9%</b>	<b>10.9%</b>	<b>10.3%</b>	<b>12.2%</b>
<b>Salaries as a % of Net Revenue</b>	<b>34.0%</b>	<b>46.5%</b>	<b>42.6%</b>	<b>39.6%</b>	<b>35.3%</b>	<b>40.0%</b>	<b>45.5%</b>	<b>35.8%</b>	<b>43.6%</b>	<b>33.3%</b>	<b>41.0%</b>	<b>39.4%</b>	<b>37.9%</b>
<b>Labor as a % of Net Revenue</b>	<b>47.9%</b>	<b>51.8%</b>	<b>58.0%</b>	<b>52.1%</b>	<b>47.9%</b>	<b>59.8%</b>	<b>56.0%</b>	<b>49.4%</b>	<b>58.3%</b>	<b>44.7%</b>	<b>56.0%</b>	<b>54.4%</b>	<b>50.5%</b>
<b>Operating Expense change from prior month</b>	<b>-4%</b>	<b>-4%</b>	<b>3%</b>	<b>-7%</b>	<b>1%</b>	<b>3%</b>	<b>16%</b>	<b>6%</b>	<b>10%</b>	<b>8%</b>	<b>21%</b>	<b>12%</b>	<b>12%</b>
<b>Gross Revenue change from prior month</b>	<b>-12%</b>	<b>-7%</b>	<b>-10%</b>	<b>-8%</b>	<b>11%</b>	<b>7%</b>	<b>10%</b>	<b>19%</b>	<b>21%</b>	<b>24%</b>	<b>18%</b>	<b>20%</b>	<b>24%</b>
<b>Net Revenue change from prior month</b>	<b>-43%</b>	<b>-49%</b>	<b>-50%</b>	<b>-50%</b>	<b>-42%</b>	<b>-47%</b>	<b>-44%</b>	<b>-40%</b>	<b>9%</b>	<b>-35%</b>	<b>-37%</b>	<b>-42%</b>	<b>-41%</b>



# Prosser

## Memorial Health Statement of Cash Flows November 30, 2022

<b>CURRENT MONTH</b> <b>Actual</b>	<b>NET INCOME TO NET CASH BY</b> <b>OPERATIONS</b>	<b>YEAR TO DATE</b> <b>Actual</b>
1,060,228	<b>NET INCOME (LOSS)</b>	<b>10,525,319</b>
217,873	Depreciation Expense	2,400,482
-	Amortization	-
-	Loss (Gain) on Sale of Assets	-
<b>1,278,101</b>	<b>TOTAL</b>	<b>12,925,801</b>
	<b>WORKING CAPITAL</b>	
(99,857)	Decrease (Increase) in Assets	(4,200,130)
248,771	Increase (Decrease) in Liabilities	262,233
<b>1,427,015</b>	<b>NET CASH PROVIDED BY OPERATIONS</b>	<b>8,987,904</b>
	<b>CASH FLOWS FROM INVESTING ACTIVITIES</b>	
(150,863)	Capital Purchasing	(3,609,002)
-	Proceeds on Capital Assets Sold	-
(72,939)	Investment Activity	(877,068)
<b>(223,802)</b>	<b>NET CASH USED BY INVESTING ACTIVITIES</b>	<b>(4,486,070)</b>
<b>1,203,213</b>	<b>NET CHANGE IN CASH</b>	<b>4,501,834</b>
	<b>CASH BALANCE</b>	
<b>35,792,543</b>	<b>BEGINNING</b>	<b>32,493,922</b>
<b>36,995,756</b>	<b>ENDING</b>	<b>36,995,756</b>
<b>1,203,213</b>	<b>NET CASH FLOW</b>	<b>4,501,834</b>



**Prosser**  
Memorial Health  
Direct Cash Flow Statement  
November 30, 2022

	<u>December</u> <u>2021</u>	<u>January</u> <u>2022</u>	<u>February</u> <u>2022</u>	<u>March</u> <u>2022</u>	<u>April</u> <u>2022</u>	<u>May</u> <u>2022</u>	<u>June</u> <u>2022</u>	<u>July</u> <u>2022</u>	<u>August</u> <u>2022</u>	<u>September</u> <u>2022</u>	<u>October</u> <u>2022</u>	<u>November</u> <u>2022</u>	<u>Year to Date</u> <u>2022</u>
<b>CASH FLOWS FROM OPERATING</b>													
<b>PAYMENTS RECEIVED</b>													
Commercial	3,330,492	2,870,461	2,644,488	3,345,808	3,083,155	3,080,772	3,456,092	3,664,670	3,459,009	3,952,203	3,388,970	2,926,872	35,872,500
Medicaid	1,709,233	1,527,015	1,438,583	1,933,332	1,793,945	1,717,575	1,999,159	1,776,093	1,922,625	2,251,936	2,184,114	2,095,733	20,640,110
Medicare	1,813,966	1,682,223	1,406,927	1,706,618	1,682,098	1,847,438	2,223,897	1,689,671	2,244,129	2,489,423	1,890,580	2,193,475	21,056,479
VA	119,229	83,053	37,616	94,447	100,585	74,713	18,848	46,441	74,217	46,243	56,914	(1,510)	631,567
Worker's Comp	154,764	154,456	80,761	125,210	100,871	123,467	196,392	274,009	213,343	196,405	226,594	155,224	1,846,732
Self Pay	97,535	65,480	93,400	120,387	66,663	98,505	69,161	123,196	84,611	65,184	63,010	54,578	904,175
Other Non Patient Payments	112,073	266,052	212,934	467,464	425,160	996,244	538,087	218,554	253,270	55,276	297,476	353,683	4,084,200
Cash Received (Patients, Insurance, Other)	<b>7,337,292</b>	<b>6,648,740</b>	<b>5,914,709</b>	<b>7,793,266</b>	<b>7,252,477</b>	<b>7,938,714</b>	<b>8,501,636</b>	<b>7,792,634</b>	<b>8,251,204</b>	<b>9,056,670</b>	<b>8,107,658</b>	<b>7,778,055</b>	<b>85,035,763</b>
Patient Refunds	(30,265)	(37,922)	(9,381)	(52,430)	(26,079)	(30,262)	(15,402)	(15,948)	(12,661)	(52,077)	(15,728)	(67,027)	(334,917)
AP Expenses	(1,628,648)	(3,425,965)	(2,483,587)	(4,162,503)	(4,176,244)	(4,332,217)	(3,764,079)	(3,055,432)	(3,345,398)	(3,856,458)	(4,408,292)	(3,239,466)	(40,249,641)
Settlement LumpSum Payments	-	-	-	-	-	-	-	-	-	-	-	-	-
Payroll Expenses	(4,109,423)	(2,878,211)	(2,861,203)	(2,826,391)	(3,848,358)	(2,937,045)	(3,013,974)	(4,355,448)	(2,911,511)	(3,896,145)	(3,605,304)	(3,063,019)	(36,196,609)
Loan/Interest Expense	(456,436)	(57,467)	(57,467)	(57,467)	(57,467)	(57,467)	(224,627)	(54,467)	(54,467)	(54,467)	(54,467)	(54,467)	(784,297)
<b>NET CASH PROVIDED BY OPERATING</b>	<b>1,112,520</b>	<b>249,175</b>	<b>503,071</b>	<b>694,475</b>	<b>(855,671)</b>	<b>581,723</b>	<b>1,483,554</b>	<b>311,339</b>	<b>1,927,167</b>	<b>1,197,523</b>	<b>23,867</b>	<b>1,354,076</b>	<b>7,470,299</b>
<b>CASH FLOWS FROM INVESTING ACTIVITIES</b>													
Capital Purchasing	(386,876)	(641,743)	(216,418)	(134,128)	(249,106)	(371,445)	(658,291)	-	(390,385)	(75,524)	(80,562)	(150,863)	(2,968,465)
<b>NET CASH USED BY INVESTING ACTIVITIES</b>	<b>(386,876)</b>	<b>(641,743)</b>	<b>(216,418)</b>	<b>(134,128)</b>	<b>(249,106)</b>	<b>(371,445)</b>	<b>(658,291)</b>	<b>-</b>	<b>(390,385)</b>	<b>(75,524)</b>	<b>(80,562)</b>	<b>(150,863)</b>	<b>(2,968,465)</b>
<b>NET CHANGE IN CASH</b>	<b>725,644</b>	<b>(392,568)</b>	<b>286,653</b>	<b>560,347</b>	<b>(1,104,777)</b>	<b>210,278</b>	<b>825,263</b>	<b>311,339</b>	<b>1,536,782</b>	<b>1,121,999</b>	<b>(56,695)</b>	<b>1,203,213</b>	<b>4,501,834</b>
<b>CASH BALANCE</b>													
<b>BEGINNING</b>	<b>31,768,278</b>	<b>32,493,922</b>	<b>32,101,354</b>	<b>32,388,007</b>	<b>32,948,354</b>	<b>31,843,577</b>	<b>32,053,855</b>	<b>32,879,118</b>	<b>33,190,457</b>	<b>34,727,239</b>	<b>35,849,238</b>	<b>35,792,543</b>	<b>32,493,922</b>
<b>ENDING</b>	<b>32,493,922</b>	<b>32,101,354</b>	<b>32,388,007</b>	<b>32,948,354</b>	<b>31,843,577</b>	<b>32,053,855</b>	<b>32,879,118</b>	<b>33,190,457</b>	<b>34,727,239</b>	<b>35,849,238</b>	<b>35,792,543</b>	<b>36,995,756</b>	<b>36,995,756</b>
<b>NET CASH FLOW</b>	<b>725,644</b>	<b>(392,568)</b>	<b>286,653</b>	<b>560,347</b>	<b>(1,104,777)</b>	<b>210,278</b>	<b>825,263</b>	<b>311,339</b>	<b>1,536,782</b>	<b>1,121,999</b>	<b>(56,695)</b>	<b>1,203,213</b>	<b>4,501,834</b>



# Prosser

Memorial Health

## Key Operating Statistics November 30, 2022

Month Ending				Year to Date				Prior	Change	
Actual	Budget	Variance	%		Actual	Budget	Variance	%	Year	
<b>Key Volumes</b>										
260	248	12	5%	Inpatient Acute Days	3,123	2,761	362	13%	3,201	-2%
70	148	(78)	-53%	Inpatient Swing Days	1,115	1,647	(532)	-32%	754	48%
330	396	(66)	-17%	<b>Total Inpatient Days</b>	4,238	4,408	(170)	-4%	3,955	7%
119	148	(29)	-20%	Inpatient Admissions	1,199	1,647	(448)	-27%	1,277	-6%
121	148	(27)	-18%	Inpatient Discharges	1,195	1,647	(452)	-27%	1,275	-6%
8	11	(3)	-29%	Swing Bed Discharges	67	126	(59)	-47%	67	0%
2,281	1,874	407	22%	Adjusted Patient Days	23,853	20,860	2,993	14%	18,757	27%
11.00	13.20	(2.20)	-17%	Average Daily Census	12.69	13.20	(0.51)	-4%	11.84	7%
836	700	136	19%	Adjusted Discharges	6,726	7,795	(1,069)	-14%	6,047	11%
2.15	1.68	0.47	28%	Average Length of Stay - Hospital	2.61	1.68	0.94	56%	2.51	4%
14.00	13.04	0.96	7%	Average Length of Stay - Swing Bed	14.00	13.04	0.96	7%	11.25	24%
44%	53%	-9%	-17%	Acute Care Occupancy (25)	51%	53%	-2%	-4%	47%	7%
44	49	(5)	-11%	Deliveries	533	549	(16)	-3%	526	1%
198	120	78	65%	OR Surgical Procedures	1,997	1,338	659	49%	1,930	3%
120	65	55	85%	GI Procedures	1,030	720	310	43%		
1,668	1,068	600	56%	Emergency Dept Visits	14,907	11,896	3,011	25%	12,063	24%
19,201	13,808	5,393	39%	Laboratory Tests	166,273	153,732	12,541	8%	158,431	5%
3,177	2,812	365	13%	Radiology Exams	32,903	31,310	1,593	5%	33,280	-1%
1,548	1,334	214	16%	PMH Specialty Clinic	16,018	14,848	1,170	8%	14,591	10%
889	856	33	4%	PMH - Benton City Clinic Visits	8,800	9,531	(731)	-8%	8,255	7%
1,136	1,274	(138)	-11%	PMH - Prosser Clinic Visits	12,856	14,180	(1,324)	-9%	13,765	-7%
898	955	(57)	-6%	PMH - Grandview Clinic Visits	10,703	10,638	65	1%	8,326	29%
589	670	(81)	-12%	PMH - Women's Health Clinic Visits	6,564	7,460	(896)	-12%	6,651	-1%
<b>LABOR FULL-TIME EQUIVALENT</b>										
332.69	345.07	12.38	4%	Employed Staff FTE's	321.96	345.07	23.11	7%	286.12	13%
34.94	34.75	(0.19)	-1%	Employed Provider FTE	33.90	34.75	0.85	2%	30.87	10%
367.63	379.82	12.19	3%	All Employee FTE's	355.86	379.82	23.96	6%	316.99	12%
335.87	303.86	(32.01)	-11%	Productive FTE's	313.19	303.86	(9.33)	-3%	279.82	12%
14.22	18.65	4.43	24%	Outsourced Therapy FTE's	14.06	18.65	4.59	25%	15.17	-7%
24.55	11.65	(12.90)	-111%	Contracted Staff FTE's	10.98	11.65	0.67	6%	7.15	54%
38.77	30.30	(8.47)		All Purchased Staff FTE's	25.04	30.30	5.26	17%	22.32	12%
9.11	12.00	2.89	24%	Contracted Provider FTE's	8.29	12.00	3.71	31%	7.36	13%
415.51	422.12	6.61	2%	All Labor FTE's	389.19	422.12	32.93	8%	346.67	12%





# Prosser

Memorial Health

Financial Operations

November 30, 2022

	YTD 2021	YTD 2022	YTD Budget 2022
<b>Utilization</b>			
Admissions	1,277	1,199	1,647
Adjusted Admissions	6,056	6,748	7,795
Average Daily Census	9.6	9.4	8.3
Adjusted Occupied Beds	45.5	52.6	39.1
Average Length of Stay (days)	2.5	2.6	1.7
Outpatient Revenue %	78.9%	82.2%	78.9%
Total Yield (net patient revenue)	68.5%	46.4%	67.9%
Hospital Case Mix Index	0.99	0.99	1.00
Average Charge Per Patient Day	9,599	9,680	9,624
<b>Financial Performance (\$000)</b>			
Net Patient Revenue	70,781	85,250	79,420
Total Operating Revenue	81,375	87,267	81,097
Total Operating Expense	66,060	76,365	75,911
Income (Loss) from Operations	15,315	10,902	5,186
Excess of Revenue Over Expenses	15,711	10,525	5,548
EBIDA (Operating Cash Flow)	17,346	13,302	7,347
Additions to Property, Plant, and Equipment	6,058	3,609	682
<b>Balance Sheet (\$000)</b>			
Unrestricted Cash and Investments	11,303	13,938	16,686
Accounts Receivable (gross)	32,541	42,090	26,541
Net Fixed Assets	20,024	21,487	31,774
Current and Long-Term Liabilities (excluding LT debt)	10,144	10,119	7,884
Long-Term Debt	9,787	8,945	8,928
Total Liabilities	19,931	19,064	16,812
Net Worth	48,289	59,590	55,460

	YTD 2021	YTD 2022	YTD Budget 2022
<b>Key Ratios</b>			
Operating Margin (%)	18.8%	12.5%	6.4%
Total Margin (%)	19.3%	12.1%	6.8%
Operating EBIDA Margin (Operating Cash Flow)	21.3%	15.2%	9.1%
Average Expense per Adjusted Patient Days	3,522	3,201	3,639
Average Net Revenue per Adjusted Patient Days	3,774	3,574	3,807
Net Accounts Receivable (days)	56.63	55.83	52.20
Current Ratio (x)	2.52	3.14	3.80
Cash on Hand (days)	158	167	109
Cushion Ratio (x)	82.31	108.09	43.67
Return on Equity (%)	32.54%	17.66%	11.01%
Capital Spending Ratio	5.80	3.58	0.61
Average Age of Plant (Years)	13.75	12.60	10.52
Debt Service	14.28	9.23	6.55
Debt-to-Capitalization (%)	19%	15%	12.78%
<b>Patient Revenue Sources by Gross Revenue (%)</b>			
Medicare	32.2%	31.6%	32.2%
Medicaid	30.8%	30.7%	30.8%
Commercial Insurance	29.3%	31.6%	29.3%
Self-pay and Other	4.4%	2.8%	4.4%
<b>Labor Metrics</b>			
Productive FTE's (incl contract labor)	309.50	346.52	346.16
Total FTE's (incl contract labor)	346.67	389.19	422.12
Labor Cost (incl benefits) per FTE - Annualized	127,711	130,094	118,067
Labor Cost (incl benefits) as a % of Net Operating Revenue	49.9%	53.2%	56.3%
Net Operating Revenue per FTE - Annualized	256,072	244,612	209,584
Operating Expense per FTE - Annualized	207,879	214,054	196,181

**Contacts:**

David Rollins  
Stephanie Titus

Chief Financial Officer  
Director of Finance

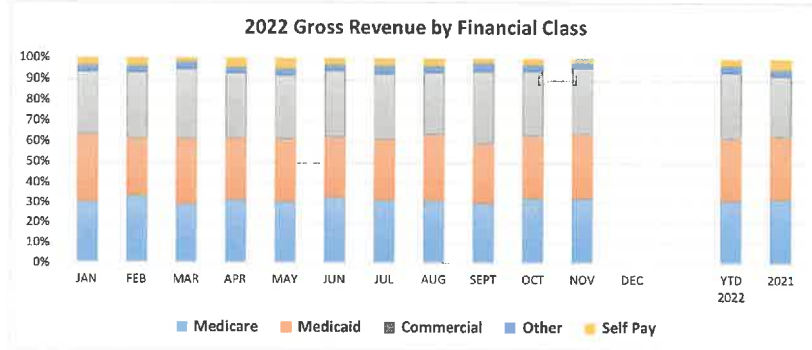
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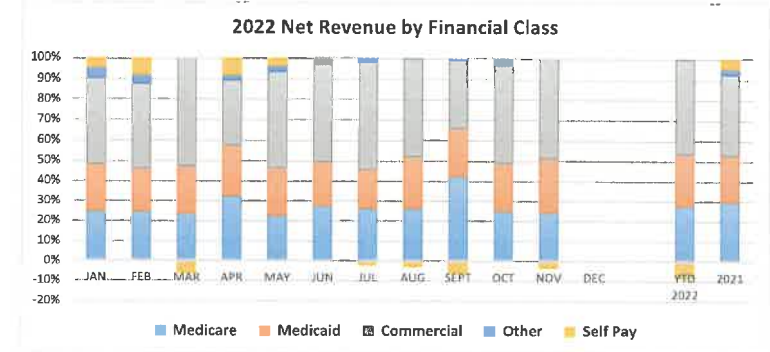
**Revenue by Financial Class  
November 30, 2022**

Month	Medicare	Medicaid	Commercial	Other	Self Pay	Total
JAN	30.6%	33.1%	29.9%	3.4%	3.0%	100.0%
FEB	33.6%	28.3%	31.5%	3.4%	3.2%	100.0%
MAR	29.6%	31.8%	33.6%	3.5%	1.5%	100.0%
APR	31.5%	30.2%	31.5%	2.9%	3.9%	100.0%
MAY	30.9%	30.8%	30.5%	3.4%	4.5%	100.0%
JUN	32.8%	29.7%	31.8%	3.0%	2.6%	100.0%
JUL	31.6%	29.9%	31.5%	4.0%	3.0%	100.0%
AUG	31.4%	32.4%	29.7%	3.5%	3.0%	100.0%
SEPT	30.1%	29.4%	34.6%	4.2%	1.7%	100.0%
OCT	32.5%	30.7%	31.0%	3.3%	2.5%	100.0%
NOV	32.5%	31.8%	31.5%	2.4%	1.8%	100.0%
DEC						
YTD 2022	31.6%	30.7%	31.6%	3.4%	2.8%	100.0%
2021	32.2%	30.8%	29.3%	3.3%	4.4%	100.0%



**Net Revenue by Financial Class  
November 30, 2022**

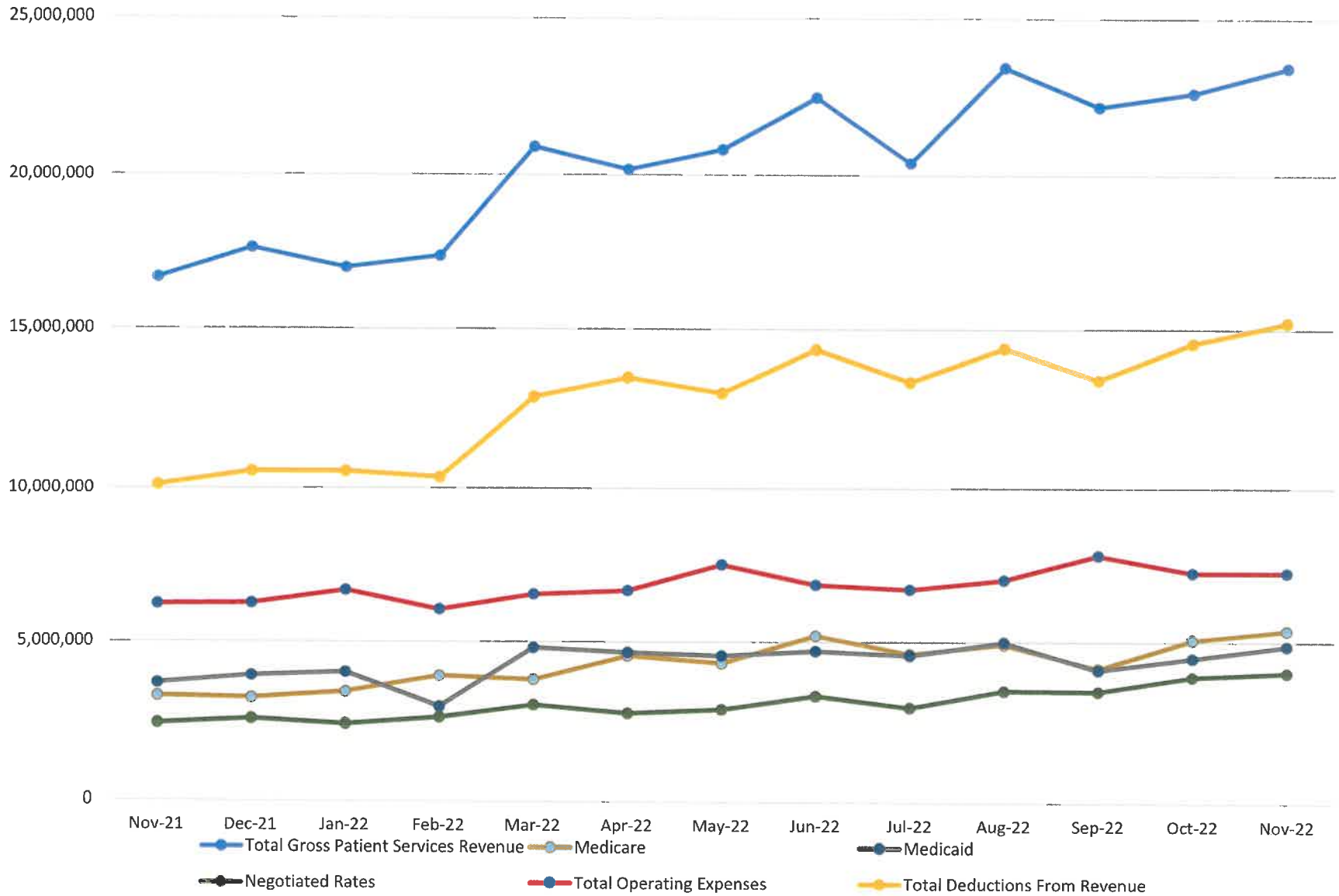
Month	Medicare	Medicaid	Commercial	Other	Self Pay	Total
JAN	24.9%	23.6%	42.0%	5.2%	4.3%	100.0%
FEB	24.7%	21.6%	41.5%	4.6%	7.6%	100.0%
MAR	23.6%	24.0%	54.5%	3.8%	-6.0%	100.0%
APR	32.6%	25.2%	31.8%	2.7%	7.7%	100.0%
MAY	22.7%	23.9%	47.1%	3.1%	3.3%	100.0%
JUN	27.6%	22.2%	46.8%	2.5%	0.8%	100.0%
JUL	26.3%	19.8%	52.1%	3.4%	-1.6%	100.0%
AUG	26.2%	25.9%	47.9%	2.4%	-2.4%	100.0%
SEPT	42.4%	23.7%	33.3%	6.1%	-5.6%	100.0%
OCT	25.0%	24.2%	47.6%	2.9%	0.3%	100.0%
NOV	24.2%	27.4%	50.5%	1.0%	-3.0%	100.0%
DEC						
YTD 2022	27.7%	26.3%	46.0%	8.4%	-8.4%	100.0%
2021	29.8%	23.5%	39.5%	2.7%	4.5%	100.0%



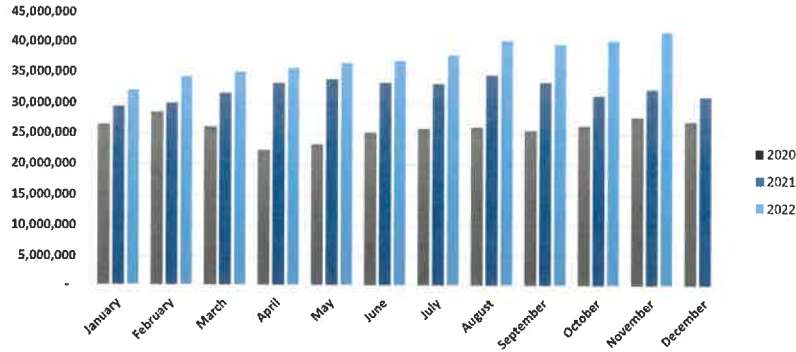


# Prosser

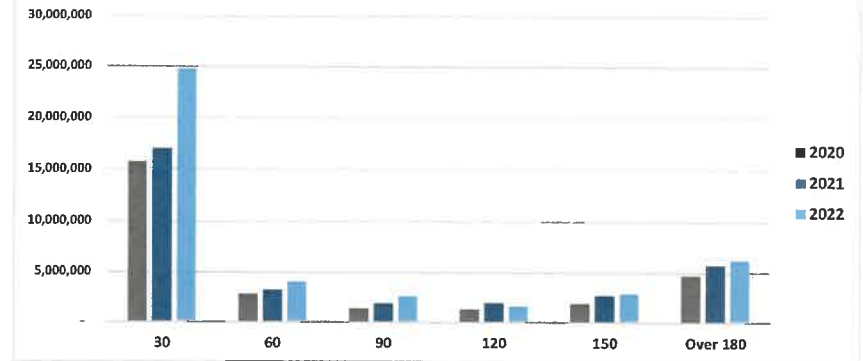
Memorial Health



AR Balance Trend - 2020-2022



AR Age Comparative 2020-2022



AR Balance Trend

	2017	2018	2019	2020	2021	2022	% Change
January	13,660,199	16,931,510	19,428,531	26,540,403	29,542,976	32,260,939	9%
February	14,529,841	16,911,324	19,146,130	28,567,785	30,120,411	34,474,143	14%
March	15,115,376	14,989,166	19,513,147	26,130,696	31,816,016	35,287,961	11%
April	15,752,955	15,852,894	19,692,139	22,350,961	33,444,324	35,889,741	7%
May	15,131,907	16,812,980	19,455,887	23,319,876	34,107,637	36,813,211	8%
June	15,446,995	16,291,895	21,223,053	25,197,275	33,577,529	37,192,042	11%
July	15,918,959	15,979,415	20,206,074	25,943,825	33,378,224	38,080,535	14%
August	17,412,422	16,633,907	20,028,246	26,144,421	34,777,364	40,568,933	17%
September	17,547,651	17,129,789	23,681,156	25,640,562	33,643,597	39,883,272	19%
October	15,948,473	16,950,256	25,724,222	26,432,788	31,514,355	40,551,941	29%
November	16,292,336	17,374,013	25,655,024	27,862,474	32,541,479	42,090,356	29%
December	16,777,361	17,137,550	25,486,600	27,102,309	31,324,657		

AR Age Balance Comparative

	30	60	90	120	150	Over 180
2016	6,520,093	1,617,498	980,460	661,863	1,036,945	2,972,389
2017	7,395,478	2,232,801	1,214,281	809,589	1,345,070	3,295,117
2018	11,087,380	1,828,183	1,102,758	623,406	885,033	1,847,253
2019	14,436,537	3,005,610	1,759,420	1,036,724	1,960,955	3,455,779
2020	15,734,042	2,824,337	1,390,770	1,324,068	1,889,868	4,699,389
2021	17,016,597	3,238,113	1,892,738	1,968,447	2,695,963	5,729,621
2022	24,741,568	4,015,397	2,600,956	1,620,479	2,880,884	6,231,072

AR Percentage of Total Balance

2016	47%	12%	7%	5%	8%	22%
2017	45%	14%	7%	5%	8%	20%
2018	64%	11%	6%	4%	5%	11%
2019	56%	12%	7%	4%	8%	13%
2020	58%	10%	5%	5%	7%	17%
2021	52%	10%	6%	6%	8%	18%
2022	59%	10%	6%	4%	7%	15%



# Prosser

Memorial Health

Lease Schedule

As of:

November 30, 2022

### Building Rentals

Lease	Effective Date	Term Date	Auto Renew	Payment Amount		2022	2023	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033	Total
Prosser Professional Center	May-17	April-32		20,687.55	RHC	253,240	255,698	260,838	263,369	263,369	268,663	271,270	276,722	282,174	287,790	45,020		3,222,270
Prosser Professional Center	May-17	April-32		9,583.00	Therapy	115,000	116,650	120,000	121,188	123,600	124,824	127,308	128,568	131,127	132,425	95,930		1,566,620
Prosser Family Fitness Pool	Jul-15	Jul-22		32,812.50	Therapy	73,625	16,000	16,000	16,000	16,000	8,000							408,125
Benton City Professional Center	May '12	2027		14,000.00	Family Med	168,000	168,000	168,000	168,000	168,000	56,000							1,232,000
Benton City Professional Center	May '12	2027		4,775.00	Pain Clinic	57,300	57,300	57,300	57,300	57,300	19,100							420,200
Yakima Valley Farmworkers	Oct-06	Oct-47		16,539.93	Spec Clinic	190,400	62,400	63,960	65,559	67,198	68,878	70,600	72,365	74,174	76,028	77,929	79,877	1,366,327
Chardonnay Building with Builder	Jun-13	Jun-28		9,082.00	OB/GYN	108,984	108,984	108,984	108,984	108,984	108,985	49,951						921,824
Total Building Leases						966,549	785,032	795,082	800,400	804,451	654,449	519,129	477,656	487,475	496,244	218,880	79,877	9,137,366

A -

- 41770060 BUILDING RENTAL -PT
- 41770721 BUILDING RENTAL -ST
- 41770722 BUILDING RENTAL -OT

### Leased Equipment

Lease	Effective Date	Term Date		Payment Amount		2022	2023	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033	Total
Stryker - Fee per Case agreement	Mar-18	Mar-23		7,739.16		92,870	23,217											394,697
Biomerieux	Dec-19	Dec-24		798.70		9,584	9,584	8,786										47,922
Flex Financial (MAKO)	Oct-19	Oct-24		21,157.04		233,779	233,779	175,335										1,168,897
Karl Storz	Mar-21	Aug-23		5,838.37		70,060	46,707											175,151
Leaf	Sep-16	Sep-20	Renewed	7,807.00		93,684	93,684	93,684										336,000
Baxter - Infusion Pumps	Aug-17	Aug-22		193.80		1,550												6,202
Baxter - Spectrum SW	Aug-17	Aug-22		60.00		480												1,920
Quadient	Apr-20	Jul-25		282.00		3,384	3,384	3,384	1,974									17,766
Total Equipment Leases						505,393	410,356	281,188	1,974	-	-	-	-	-	-	-	-	2,701,560
Total Future Leases						1,471,942	1,195,388	1,076,270	802,374	804,451	654,449	519,129	477,656	487,475	496,244	218,880	79,877	11,838,926

**Capital Expenditure Budget**

GL #	DEPARTMENT	YEAR	DESCRIPTION	APPROVED COST	Anticipated by YE	Spent To Date	Purchase Date
60700	Med/Surg	2022	Sit to Stand Chair	10,000	Yes		
		2022	Blanket warmer	6,000	Yes		
		2022	Child Cribs (x2)	18,000	Yes		
		2022	Sleeper Sofa - Room 4	5,500	Yes		
		2022	Zoll Monitor	50,000	Yes		
70100	Family Birthplace	2022	Draeger Infant Warmer	13,224	Yes	14,298	8/1/2022
70200	Surgical Services	2021	Colonoscope Sterilizer	80,000	Yes	86,166	5/1/2022
		2022	Erbe	72,062	Yes	49,320	1/1/2022
		2022	Olympus Colonoscopes (x4)	185,038	Yes	185,038	11/24/2021
		2022	Stryker SPY-PHI (blood flow monitor)	115,000	Yes	121,951	6/1/2022
		2022	Megadyne Ace Blade	13,500	Yes		
		2022	Gastrosopes (x2)	46,000	Yes	50,662	7/1/2022
70700	Laboratory	2021	Nova Biomedical Stat Profile	13,227			
		2022	Chemistry Freezer	6,658	Yes	6,332	5/1/2022
71400	Diagnostic Imaging	2022	RALS middleware interface	29,363			
		2022	Bugsy - EPIC module IC surveillance	90,000			
		2021	TEE Service Line	132,234	Yes	110,812	*ongoing
71800	Cardiopulmonary	2022	I-STAT blood analyzer	11,868			
		2022	Phillips V60 BiPAP Interface	43,322			
72000	Physical Therapy	2022	PFT Interface (Easy Pro)	15,000			
		2022	Hamilton Ventilator Interface	15,000	Yes	34,852	7/1/2022
		2022	Chattanooga Vectra GENSYS	5,736			
72300	Emergency Dept	2022	Stryker Stretchers (x3)	22,300	Yes	20,567	11/1/2022
		2022	ED EHR Module	10,000	Yes		
		2022	Metro Carts (x2)	15,000	Yes		
		2022	Altrix Unit	30,000	Yes		
		2022	Level 1 Unit	8,000	Yes		
		2022	Zoll Monitor	50,000	Yes		
72500	OSP	2021	Exam Chair	11,000			
		2021	Blanket Warmer	5,000			
		2022	New Patient Care divider curtains	7,000			
72600	Benton City	2021	Security Cameras	12,000			
		2022	Repainting of Building	38,622			
		2022	Remodel for Provider Office	7,020	Yes	Incl. in Derm	10/1/2022
72630	Grandview	2022	Venue Go Ultrasound	44,890	Yes		
		2022	Cabinet and Desk Remodel	15,000	No		
72640	Women's Health	2022	Blanket Warmer	5,000	Yes		
		2022	Fluid Warmer	5,000	Yes		
72700	Specialty Clinic	2022	Medtronic Pill Capsule	17,889	Yes	16,019	1/1/2022
		2022	Provation Prof Fees Documenting SW	26,405	Yes	26,405	1/31/2022
		2022	Olympus Scopes	56,104			
84600	Environmental Services	2022	Carpet Shampooer	13,000	Yes	13,530	11/1/2022
		2022	Floor Scrubber	15,000			
85400	Information Technology	2022	Virtual Desktop Expansion	91,471			
		2022	Replacement Firewall	33,201	Yes	42,975	6/1/2022
		2022	Server Storage Archiving	14,000			
		2022	Interpreter Compliance HW/SW	20,000	Yes	24,998	*ongoing
85600	Scheduling Call Center	2022	Call Center Cubicle Set up	30,000	Yes	13,742	4/30/2022
87400	Employee Health	2022	@Net Health Agility	18,500	Yes	Amortization	9/1/2022
			<b>2022 Capital Items</b>	<b>1,401,400</b>		\$ 65,339	
			<b>2021 Carryover Approved Capital Items</b>	<b>212,234</b>		\$ 110,812	
			<b>TOTAL</b>	<b>\$ 1,613,634</b>		<b>\$ 817,667</b>	
<b>NON BUDGETED CAPITAL - BOARD APPROVED DURING 2022</b>							
70100	Family Birthplace	2022	Fetal Cart Core Kit			7,110	10/1/2022
70200	Surgery	2022	Universal Driver (Stryker)			26,728	1/1/2022
70200	Surgery	2022	WM-DP# Mobile Workstation			70,539	2/1/2022
70200	Surgery	2022	Neptune 3 Rover			17,157	3/1/2022
70200	Surgery	2022	Electrosurgical Unit			12,588	9/1/2022
70200	Surgery	2022	Smartpump Dual Channel			7,738	9/1/2022
70200	Surgery	2022	Core 2 Console			22,208	10/1/2022
70200	Surgery	2022	Yellofin Stirrups (L) & *			6,657	11/1/2022
85100	Accounting	2021	Kronos			7,500	8/1/2022
85300	Patient Financial Svcs	2021	COVID Business Office Remodel			64,749	4/1/2022
85400	Information Technolo	2022	Cooling System			9,291	8/1/2022
						\$ 252,265	
						\$ 1,069,932	



# Prosser

## Memorial Health

As of:  
November 30, 2022

### Capital Project Expenditures

<u>Project Name</u>	<u>Budget</u>	<u>Aug-22</u>	<u>Sep-22</u>	<u>Oct-22</u>	<u>Nov-22</u>
CIP - New Prosser Hospital		5,597,075	5,665,755	5,788,818	5,953,933
CIP - Gap Rd Land Improvement		118,571	118,571	118,571	118,571
	78,400,000	5,715,646	5,784,326	5,907,389	6,072,504
CIP - DI TEE Project	132,234	-	-	-	-
CIP - Dermatology Clinic	235,000	260,157	260,157	260,157	-
CIP - Beaker Lab System	788,596	-	-	-	-
CIP - Call Center	30,000	813	-	-	-
CIP - 1511 Meade Ave		12,378	12,378	12,378	12,378
CIP - PFS Office Remodel	35,328	-	-	-	-
Asset Clearing:					
<i>TD100 System Additional Cost</i>		2,216	2,216	-	-
<i>Zoll Medical - Remote View X-series</i>		5,000	5,000	5,000	5,000
<i>Additional Cost to Firewall</i>		209	209	-	-
<i>Core 2 (US)</i>		20,431	20,431	-	-
<i>Aquaplus Steamcleaner</i>		12,459	12,459	12,459	-
<i>Hill-Rom Left Allen Yellofin Elite</i>				2,786	-
<i>Hill-Rom Right Allen Yellofin Elite</i>				2,786	-
<i>Hill-Rom Yelofin Rerusable Pad Set</i>				552	-
<i>Stryker Gynnie Stretcher</i>				19,221	-
<i>Telecore Software (50%)</i>				16,589	16,589
<i>Megadyne Elect gen/Smoke Evac</i>		12,668	-	-	-
	81,093,614	6,041,977	6,097,176	6,239,317	6,106,471

# PROSSER MEMORIAL HEALTH

## FYE 2023 BUDGET

### EXECUTIVE SUMMARY

The Operating and Capital Budgets were prepared based on the 2023 Strategic Plan and the Mission, Vision and Values of Prosser Memorial Health.

The current YTD Operating Margin through November 2022 is 12.5% with a total margin of 12.1%. The hospital continued to build its volumes and revenue in 2022 driven by the growth of the medical staff as well as utilizing COVID relief funds. The Medical Staff Plan includes adding more physicians in 2023. The budget was prepared with the expectations of increased physician productivity in 2023 as we actively recruit identified needs to build on the 2022 established foundation. We plan to add additional providers in the following areas: Family Practice, Internal Medicine, Gastroenterology, Endocrinology and Emergency Medicine.

PMH is expecting Income from Operations of \$6,731,571 (6.63% Operating Margin) for FYE2023 compared to an Income from Operations of \$10,901,601 (12.49% Operating Margin including Cares Act COVID relief funds recognized in 2022). The Total Net Income for 2023 is expected to be \$6,209,240 (6.12% Total Margin). The Financial Pillar goal is a 6.0% total margin.

Gross Patient Service Revenue is expected to increase by 13.4% from 2022 to 2023 driven by the growth in our employed physicians in 2021-2023. We anticipate not only an increase of revenue within their own specialties but also expect to see an impact to referred revenue in other departments such as Surgical Services, Diagnostic Imaging, Laboratory, Cardiopulmonary, and others. We have implemented price increases of 5% for all services for 2023.

	2019	2020	2021	2022	2023
<b>Net Revenue</b>	59,177,725	64,701,930	87,895,293	88,560,115	101,525,408
<b>Operating Expenses</b>	56,921,901	62,399,113	27,811,475	82,847,386	94,793,837
<b>Income from Operations</b>	2,255,824	2,302,817	15,810,092	5,712,729	6,731,571
<b>Operating Margin</b>	3.91%	3.60%	17.99%	6.45%	6.63%
<b>Total Margin</b>	5.33%	4.60%	18.48%	6.90%	6.12%



Deductions from revenue are budgeted to be 65% of revenue which is slightly higher than 2022, although improved contractual compliance could reduce this significantly. All additional Medicare and Medicaid receivables and payables have been accounted for in our projections.

Operating Expenses are expected to increase by 13.8% from 2022 to 2023. Included in the operating plan is the recruitment of additional physicians which will help us achieve our Medical Staff Recruiting Plan for 2023. Professional Fees Other have increased for Consulting and Legal for 2 Union Negotiations in 2023 as well as the new Call Center and Utilization Review Physician Documentation/Champion resources are implemented that will lead to increased net reimbursement. Purchased Labor expenses are projected to increase overall as we continue to recruit permanent FTEs in areas such as Acute Care, Family Birthplace, Cardiopulmonary, Therapies, Diagnostic Imaging, Surgery and Patient Financial Services which offset lowered costs in the Emergency Department due to the hiring of new providers and Health Information Management due to hiring new coder and changing outsource partner for lower costs. Supplies and Purchased Services Other increased due to more surgical procedures and an overall increase in patient volumes especially in the Emergency Department and OSP/Wound Care. Marketing, Advertising, and Human Resource activity have also increased our Supply expenses as we introduce new Services and Providers along with increased Education to the community highlighted by Diabetic Education and Dietician Services along with an increased budget for Employee Engagement activities. IT expenses are also up with the replacement of obsolete equipment, software upgrades and EPIC expenses with additional costs due to expanded user activity as our volumes increase. Depreciation is higher due to acquisition of equipment 2021-2023 although this number is expected to decrease over the following two years as our capital budgets have declined substantially due to the impending construction of the new hospital.

## **Patient Volume**

Total Inpatient Acute and OB days are projected to increase by 8% from 3,407 in 2022 to 3,696 in 2022 driven by higher Emergency Room visits and transfers from other facilities. Swing Bed volume are also expected to increase after the declines driven by COVID and are forecasted to grow by 20% to 1,524 patient days. In addition, the growth in our Provider Panel should also enable more admissions versus patients being referred to Yakima or the Tri-Cities.

## **Patient Revenue**

Inpatient Revenue is projected to increase by 9.7% from \$44,753,085 in 2022 to \$49,107,656 in 2023. This increase is partially driven by a price increase to offset

increased costs to supplies and labor; however it should be noted that our Inpatient Payer Mix is 81% cost-based for Acute and Swing and 67% for OB.

Outpatient Revenue is projected to increase by 14.2% from \$207,136,157 in 2022 to \$236,503,085 in 2023. This increase is driven by the continued growth of the Emergency Department, Specialty Clinic, Surgical Services. This growth has in turn driven growth in Digital Imaging, Laboratory and OSP/Wound Care. The Emergency Room growth in 2022 has grown tremendously in 2022 to a forecasted 16,262 for the year and continued projected growth is more muted to only 16,500 in 2023 or 1.4%.

## Deductions from Revenue

The Contractual Allowances are expected to increase by 16.0% over 2022 at 64.5% overall based on the following payer mix:

Hospital Gross Revenue by Payer	2019	2020	2021	2022 Fcst	2023 Budget
Medicare	31.5%	29.8%	32.2%	31.6%	31.6%
Medicaid	31.8%	31.9%	30.8%	30.7%	30.7%
Insurance	28.6%	29.4%	29.3%	31.6%	31.6%
Self-Pay	8.1%	8.9%	7.7%	6.2%	6.2%
Total	100.0%	100.0%	100.0%	100.0%	100.0%

## Net Operating Revenue

Net Operating Revenue in 2023 is expected to increase by \$6,437,260 or 6.8% to \$101,250,986 despite no COVID relief funds in 2023 but there were \$1,835,036 in COVID relief funds in 2022 within the projected Net Operating Revenue total for 2022 of \$92,999,781. An increased focus on contract compliance with our Commercial Payers and improved estimates and collections of Self-Pay accounts are expected to reduce those contractual adjustments by upwards of 1% or greater in 2023.

## Operating Expenses

Operating Expenses are expected to increase by 13.8% from \$83,293,833 in 2022 to \$94,793,837 in 2023.

Salary expense is increasing 9.4% in 2023 due to annual salary increases of 3.5% - 4.0% on average and the addition of staffing and providers. Increased staffing in the Clinics, Surgery, and Outpatient Special Procedures are the primary drivers along with the creation and staffing of a centralized Call Center and Scheduling departments that should dramatically improve our patient experience in scheduling appointments,

receiving estimates and pre-authorizations. Increase in EVS staffing driven by patient volumes along with focus on increased quality and responsiveness in Nutrition Services are quality and patient satisfaction driven initiatives.

Employee benefits are increasing because of new member enrollment and it is important to note that we are partially self-insured for medical benefits. Being partially self-insured enables PMH to reduce its premiums to employees while still protecting itself from catastrophic claims. When members of the family use PMH facilities for care we are able to provide care with reduced cost to the organization. Health Insurance for employees is projected to not increase except for covered lives increases in 2023.

Supplies are increasing due to higher patient volumes and higher acuity services such as in Surgery with a greater emphasis on joint replacement surgeries. We are also investing in our marketing and advertising to provide the community with clear visibility of what we can offer for their healthcare needs.

Depreciation expense is projected to increase due to assets purchased in 2022 which will have a full year of depreciation along with the capital purchases in 2023.

## **Income from Operations**

PMH is expecting Income from Operations of \$6,731,571 (a 6.6% Operating Margin) for 2023 compared to a projected Income from Operations of \$11,794,315 (a 12.4% Operating Margin) for 2022.

## **Non-Operating Revenue / Expense**

Non-Operating Revenue is expected to decrease from (\$410,489) in 2022 to (\$522,331) in 2023 driven by interest expenses associated with the interim construction loan. Effective December 15, 2019, GASB effectively changed prior treatment of interest cost incurred before the end of a construction period from capitalization of interest as part of a construction in process to recognizing as non-operating interest expense as it is incurred (GASB Statement No. 89).

## **Net Income**

PMH is expecting Net Income of \$6,209,240 (6.1% Total Margin) for 2023 compared to Net Income of 11,383,826 (11.97% Total Margin) for 2022.

## Capital Expenditures

Capital Expenditures for 2023 are budgeted to be \$1,065,569 with \$756,587 for new equipment purchased in 2023 and \$308,982 for equipment authorized in 2022 but not received and in operation by the end of the year. The Capital Budget has decreased in 2023 comparative to prior years to replace only necessary equipment in anticipation of the high capital demands of the new facility in 2024-2025.

## Cash Flow

PMH expects to generate a negative cash flow of (\$4,989,517) in 2023. The requirement of PMH to fund the first \$25,548,033 for the construction costs of the new facility will be met in 2022-2023 less the set aside amount of \$5,175,992 for interest expense on the interim construction loan as its incurred. PMH has already funded the purchase of the land for \$1,725,375, and Construction in Progress (Design, Engineering, Project Management, Financing, Consulting, Legal) is projected to be \$7,715,332 by year end which leaves \$16,107,326 to be paid out in 2023 & 2024. The capital budget for 2023 is also utilizing 100% cash for \$1,065,569. Accounts Receivables is targeted to reduce Net Receivables by \$1,464,204 which equates to 48 Days Overall which is a decrease from the November 2022 total of 55 Days Overall.



# Prosser

Memorial Health  
STATEMENT OF OPERATIONS

	Actual YTD		Budget 2023	Variance	
	Nov-2022	Projected 2022		Projected 2022 vs Budget 2023	
<b>Gross Patient Services Revenue</b>					
Inpatient	41,023,661	44,753,085	49,107,656	4,354,571	9.7%
Outpatient	189,874,811	207,136,157	236,503,085	29,366,928	14.2%
<b>Total Gross Patient Services Revenue</b>	<b>230,898,472</b>	<b>251,889,242</b>	<b>285,610,741</b>	<b>33,721,499</b>	<b>13.4%</b>
<b>Deductions from Revenue</b>					
<b>Contractual Allowances</b>					
Medicare	49,235,811	53,711,794	60,448,742	6,736,948	12.5%
Medicaid	48,599,810	53,017,975	60,510,960	7,492,985	14.1%
Negotiated Rates	34,311,150	37,430,345	46,478,743	9,048,398	24.2%
Other Adjustments	8,055,318	8,787,620	9,836,965	1,049,345	11.9%
<b>Gross Contractual Allowances</b>	<b>140,202,089</b>	<b>152,947,733</b>	<b>177,275,410</b>	<b>24,327,677</b>	<b>15.9%</b>
Charity Care	4,010,107	4,374,662	5,142,144	767,482	17.5%
Bad Debt	1,436,477	1,567,066	1,942,201	375,135	23.9%
<b>Total Deductions From Revenue</b>	<b>145,648,673</b>	<b>158,889,461</b>	<b>184,359,755</b>	<b>25,470,294</b>	<b>16.0%</b>
<b>Net Patient Services Revenue</b>	<b>85,249,799</b>	<b>92,999,781</b>	<b>101,250,986</b>	<b>8,251,205</b>	<b>8.9%</b>
COVID Net Revenue	1,785,036	1,835,036	-	(1,835,036)	
Other Operating Revenue	232,221	253,332	274,423	21,091	8.3%
<b>Net Revenue</b>	<b>87,267,056</b>	<b>95,088,149</b>	<b>101,525,408</b>	<b>6,437,260</b>	<b>6.8%</b>
<b>Operating Expenses</b>					
Salaries	34,113,663	37,214,905	40,722,971	3,508,066	9.4%
Benefits	8,489,048	9,260,780	10,610,501	1,349,721	14.6%
Purchased Labor	3,809,205	4,155,496	4,658,138	502,642	12.1%
<b>Sub-Total Labor Costs</b>	<b>46,411,916</b>	<b>50,631,181</b>	<b>55,991,610</b>	<b>5,360,429</b>	<b>10.6%</b>
Professional Fees - Physicians	4,735,620	5,166,131	5,178,970	12,839	0.2%
Professional Fees - Other	588,363	641,851	1,196,982	555,131	86.5%
Supplies	13,115,770	14,308,113	17,132,993	2,824,880	19.7%
Purchased Services - Utilities	472,704	515,677	628,372	112,695	21.9%
Purchased Services - Other	4,334,293	4,728,320	5,506,998	778,678	16.5%
Rentals & Leases	1,993,466	2,174,690	2,333,161	158,471	7.3%
Insurance License & Taxes	1,131,958	1,234,863	1,742,903	508,040	41.1%
Depreciation & Amortization	2,400,482	2,604,772	3,038,768	433,996	16.7%
Other Operating Expenses	1,180,883	1,288,236	2,043,080	754,844	58.6%
<b>Sub-Total Non-Labor Expenses</b>	<b>29,953,539</b>	<b>32,662,652</b>	<b>38,802,227</b>	<b>6,139,575</b>	<b>18.8%</b>
<b>Total Operating Expenses</b>	<b>76,365,455</b>	<b>83,293,833</b>	<b>94,793,837</b>	<b>11,500,004</b>	<b>13.8%</b>
<b>Operating Income (Loss)</b>	<b>10,901,601</b>	<b>11,794,315</b>	<b>6,731,571</b>	<b>(5,062,744)</b>	<b>-42.9%</b>
<b>Non Operating Income</b>					
Tax Revenue	860,868	939,129	994,308	55,179	5.9%
Investment Income	(967,783)	(1,055,763)	54,461	1,110,225	-105.2%
Interest (Expense)	(342,279)	(373,395)	(1,589,721)	(1,216,326)	325.7%
Other Non Operating (Expense)	72,912	79,540	18,620	(60,920)	-76.6%
<b>Total Non Operating Income</b>	<b>(376,282)</b>	<b>(410,489)</b>	<b>(522,331)</b>	<b>(111,842)</b>	<b>27.2%</b>
<b>Net Income (Loss)</b>	<b>\$ 10,525,319</b>	<b>\$ 11,383,826</b>	<b>\$ 6,209,240</b>	<b>\$ (5,174,586)</b>	<b>-45.5%</b>
<b>Operating Margin</b>	<b>12.49%</b>	<b>12.40%</b>	<b>6.63%</b>		
<b>Total Margin</b>	<b>12.06%</b>	<b>11.97%</b>	<b>6.12%</b>		
<i>Net Income less COVID relief</i>			\$ 6,209,240		
<i>Operating Margin less COVID relief</i>			7.05%		
<i>Total Margin less COVID relief</i>			6.12%		
<b>Operating Revenue/adjusted patient day</b>	<b>4,653</b>	<b>4,723</b>	<b>3,344</b>	<b>-29.2%</b>	
<b>Operating Expense/adjusted patient day</b>	<b>4,071</b>	<b>4,137</b>	<b>3,122</b>	<b>-24.5%</b>	
<b>Operating Revenue/FTE</b>	<b>245,242</b>	<b>267,222</b>	<b>248,463</b>	<b>-7.0%</b>	
<b>Operating Expense/FTE</b>	<b>214,606</b>	<b>234,077</b>	<b>231,989</b>	<b>-0.9%</b>	



# Prosser

## Memorial Health

### BALANCE SHEET

	Actual 11/30/2022	Projected 12/31/2022	Budgeted 12/31/2023
<b>Current Assets</b>			
Cash and Temporary Investments	\$ 13,938,017	6,796,524	\$ 10,005,764
COVID Cash Reserve	-	-	-
Gross Patient Accounts Receivable	42,090,356	39,985,838	36,027,240
Less Allowances for Uncollectibles	(26,522,000)	(25,195,900)	(22,701,506)
Net Patient Receivables	15,568,356	14,789,938	13,325,734
Taxes Receivable	40,946	30,000	30,000
Receivable for 3rd Party Payor	248,250	273,075	382,305
Inventory	601,958	632,056	651,018
Prepaid Expenses	1,315,420	1,257,420	1,295,143
Other Current Assets	27,643	27,643	28,196
<b>Total Current Assets</b>	<b>31,740,590</b>	<b>23,806,656</b>	<b>25,718,159</b>
<b>Restricted Assets</b>			
LEOFF Net Pension Asset	1,106,851	1,106,851	1,106,851
Whitehead Fund - LGIP	1,230,933	1,231,019	1,232,051
Funded Depreciation - Cash	9,209,672	435,746	4,357,460
Funded Depreciation - TVI	10,742,728	10,742,728	11,178,474
Bond Obligation Cash Reserve	767,555	767,555	767,555
Construction Account	-	10,967,528	-
Interest Account	-	5,175,998	3,586,277
USDA Debt Reserve Fund	-	-	-
Tax Exempt Lease Funds	-	-	-
Board Designated Assets	23,057,739	30,427,425	22,228,668
<b>Property, Plant and Equipment</b>			
Land	478,396	478,396	478,396
Property, Plant, Equipment, and Lease	47,894,235	49,452,784	50,518,353
Construction in Progress	6,106,471	7,106,471	85,485,000
Accumulated Depreciation	(32,992,082)	(32,992,082)	(36,030,850)
Net Property, Plant and Equipment	21,487,020	24,045,569	100,450,899
<b>Other Assets</b>			
Investments and Other Non Current Assets	996,079	994,488	992,897
Land - Gap Road	1,745,440	1,745,440	1,745,440
Net Investments & Other Non Currents A	2,741,519	2,739,928	2,738,337
<b>Total Assets</b>	<b>\$ 79,026,868</b>	<b>\$ 81,019,578</b>	<b>\$ 146,442,935</b>
<b>Current Liabilities</b>			
Current Portion of Bonds Payable	886,359	891,489	872,825
Current Portion of USDA	-	-	-
Current Portion Capital Leases	254,546	248,495	255,103
Current Portion of Other	-	-	-
Accounts Payable	2,645,862	3,968,793	4,048,169
Payroll and Related Liabilities	3,796,968	3,725,795	3,874,827
Cost Report Payable	518,603	568,603	533,901
Other Payables to 3rd Parties	1,346,364	1,346,364	596,364
Deferred LEOFF Pension	483,233	-	-
Deferred Tax Revenue	76,197	-	-
Deferred EHR Medicare Revenue	-	-	-
Deferred COVID Revenue	-	-	-
Accrued Interest Payable	111,081	18,282	18,282
Other Current Liabilities	-	-	-
<b>Total Current Liabilities</b>	<b>10,119,213</b>	<b>10,767,821</b>	<b>10,199,471</b>
Bonds Payable	8,945,003	8,572,182	7,680,693
Construction Financing Payable	-	-	60,791,000
USDA Financing Payable net of CP	-	-	-
Capital Lease Payable	372,238	372,147	255,104
<b>Total Non Current Liabilities</b>	<b>9,317,241</b>	<b>8,944,329</b>	<b>68,726,797</b>
<b>Total Liabilities</b>	<b>19,436,454</b>	<b>19,712,150</b>	<b>78,926,267</b>
<b>Fund Balance</b>			
Equity	49,065,095	49,923,602	61,307,428
Undistributed Retained Earnings	10,525,319	11,383,826	6,209,240
<b>Total Fund Balance</b>	<b>59,590,414</b>	<b>61,307,428</b>	<b>67,516,667</b>
<b>Total Liabilities and Fund Balance</b>	<b>\$ 79,026,868</b>	<b>\$ 81,019,578</b>	<b>\$ 146,442,935</b>



# Prosser

Memorial Health  
STATEMENT OF CASH FLOWS

	PROJECTED 2022	BUDGET 2023
NET INCOME TO NET CASH BY OPERATIONS		
<b>Net Income</b>	\$ 11,383,826	\$ 6,209,240
Loss (Gain) on Sales of Assets	-	-
Depreciation Expense	2,604,772	3,038,768
<b>TOTAL</b>	13,988,598	9,248,008
WORKING CAPITAL		
Decrease (Increase) in Assets	(4,027,737)	1,297,737
Increase (Decrease) in Liabilities	(5,996,104)	59,214,117
<b>NET CASH PROVIDED BY OPERATIONS</b>	3,964,757	69,759,861
CASH FLOWS FROM INVESTING		
Capital Purchasing	(9,220,000)	(79,444,098)
Financing Activity	9,985,270	4,694,719
<b>TOTAL</b>	765,270	(74,749,379)
<b>Net Change in Cash</b>	\$ 4,730,027	\$ (4,989,517)
Beginning Cash Balance		
	32,493,922	37,223,949
Ending Cash Balance		
	37,223,949	32,234,432
<b>Net Cash Flow</b>	\$ 4,730,027	\$ (4,989,517)
Days of Total Cash On Hand	159	126
Composition of Net Working Capital Change:		
(Increase) Decrease in Net Acct. Rec.	(4,052,843)	1,464,204
(Increase) Decrease in Other Current Assets	(853,499)	(166,467)
Increase (Decrease) in Total Current Liab.	3,513,517	(568,350)
Increase (Decrease) in Short Term Debt	0	0
<b>Net Working Capital (Increase)/Decrease</b>	\$ (1,392,825)	\$ 729,386



# Prosser Memorial Health

## OPERATIONAL STATISTICS

Description	2021 Actual	2022 Annualized	2023 Budget	Change	Percentage
<b>Admissions</b>					
Acute	1,397	1,308	1,478	170	11.50%
OB	583	583	600	17	2.91%
<b>Hospital</b>	<b>1,980</b>	<b>1,891</b>	<b>2,078</b>	<b>187</b>	<b>9.02%</b>
Swing Bed	64	72	122	50	40.98%
Nursery	583	581	600	19	3.09%
<b>Patient Days</b>					
Acute	2,506	2,457	2,796	339	12.13%
OB	966	950	900	(50)	-5.58%
<b>Hospital</b>	<b>3,472</b>	<b>3,407</b>	<b>3,696</b>	<b>289</b>	<b>7.82%</b>
Swing Bed	806	1,216	1,524	308	20.19%
Nursery	808	808	900	92	10.18%
Observation Days	746	737	700	-37	-5.35%
<b>Total Days</b>	<b>5,024</b>	<b>5,361</b>	<b>5,920</b>	<b>559</b>	<b>9.45%</b>
<b>Average Daily Census</b>					
Hospital	7	7	8	1	12.13%
Swing Bed	2	3	4	2	36.71%
Nursery	2	2	2	0	7.83%
<b>Case Mix Index</b>					
Hospital	1.15	1.20	1.20	-	0.00%
Medicare	1.19	1.16	1.16	-	0.00%
<b>Length of Stay</b>					
Hospital	2	2	2		
Swing Bed	13	13	12		
OB	1	1	2		
<b>Adjusted Patient Days</b>	<b>20,438</b>	<b>26,022</b>	<b>30,360</b>	<b>4,338</b>	<b>14.29%</b>
<b>Surgeries - Inpatient</b>	<b>331</b>	<b>491</b>	<b>660</b>	<b>169</b>	<b>25.62%</b>
<b>Surgeries - Outpatient</b>	<b>1,817</b>	<b>2,811</b>	<b>3,096</b>	<b>285</b>	<b>9.20%</b>
<b>Total Surgeries</b>	<b>2,148</b>	<b>2,039</b>	<b>3,756</b>	<b>454</b>	<b>12.08%</b>
<b>Births</b>	<b>583</b>	<b>581</b>	<b>600</b>	<b>19</b>	<b>3.09%</b>
Laboratory Tests	171,918	181,389	196,707	15,318	7.79%
EKG Tests	6,524	6,412	6,706	294	4.38%
Cardiopulmonary Tests	8,644	7,823	8,184	361	4.41%
Diagnostic Imaging Exams	35,907	35,894	36,167	273	0.75%
Pharmacy Items	1,370,031	1,611,781	1,683,924	72,143	4.28%
Nutritional Services Meals	37,757	33,936	38,355	4,419	11.52%
Laundry Pounds	241,045	224,433	247,608	23,175	9.36%
Outpatient Special Procedures	3,883	4,066	4,500	434	9.65%
Therapy Clinic Visits	17,430	17,836	16,987	-849	-5.00%
Emergency Department Visits	13,258	16,262	16,500	238	1.44%
Hospitalists Visits	3,888	3,537	3,864	327	8.47%
EMS Trips (w. CPP)	2,192	2,379	2,380	1	0.03%
Benton City Clinic Visits	8,778	9,600	9,913	313	3.16%
Prosser Specialty Clinic Visits	15,819	17,474	18,542	1,068	5.76%
Prosser Clinic (w. Occ Health) Visits	14,724	14,025	9,300	-4,725	-50.80%
Comprehensive Pain Mgmt Clinic Visits	0	0	0	0	
Dermatology Clinic Visits	599	2,451	3,962	1,511	38.13%
Grandview Clinic Visits	9,334	11,676	11,031	-645	-5.85%
Prosser Women's Health	7,227	7,161	7,311	150	2.06%
Outpatient Hospital Visits	116,345	117,828	122,563	4,735	3.86%
<b>Paid Employee FTE's</b>	<b>320</b>	<b>356</b>	<b>409</b>	<b>53</b>	<b>12.91%</b>
<b>FTE's per Adj. Census</b>	<b>46.66</b>	<b>52.87</b>	<b>53.34</b>	<b>0.47</b>	<b>0.88%</b>
<b>Average Salary Cost per Hour</b>	<b>51.19</b>	<b>50.28</b>	<b>47.91</b>	<b>(2.36)</b>	<b>-4.93%</b>
<b>Average Benefit Cost per Hour</b>	<b>12.74</b>	<b>12.51</b>	<b>12.48</b>	<b>(0.03)</b>	<b>-0.22%</b>
<b>Net Operating Revenue per FTE</b>	<b>272,378</b>	<b>267,207</b>	<b>248,463</b>	<b>(18,744)</b>	<b>-7.54%</b>





# Prosser

Memorial Health

## Capital Budget 2022

			Approved
Department	Year	Description	Cost
60700	Med/Surg	2023 Umano Acute Beds (x5)	75,000
70100	Family Birthplace	2023 Obstetric Hemorrhage Carts x2	23,500
		2023 Stryker Labor Bed Mattress x4	15,200
70200	Surgical Services	2023 Patient Communication System	16,500
		2023 Tourniquets for Ortho Surgery	7,805
		2023 Surgicount - AORN requirement x2	18,635
		2023 ERCP instrumentation	145,000
		2023 Stryker Stretchers x2	18,260
		2023 Scope Cabinet	35,000
70700	Laboratory	2022 RALS middleware interface	29,363
		2022 Buggy - EPIC module IC surveillance	90,000
71400	Diagnostic Imaging	2023 MRI Medrad injector	40,000
		2023 Stryker Ultrasound Stretcher	7,376
72300	Emergency Dept	2023 Hoyer Lift	12,000
		2023 ER Computer upgrade	30,000
		2023 Metro carts	15,000
72500	OSP	2023 EPIC Interface - iHeal	50,000
72600	Benton City	2022 Repainting of Building	50,000
72640	Women's Health	2022 Blanket Warmer	5,000
		2022 Fluid Warmer	5,000
72700	Specialty Clinic	2023 Diabetic Education Build - EPIC	20,556
84600	Environmental Services	2022 Floor Scrubber	15,000
85400	Information Technology	2023 Radiologist Monitors/Computer Replacement	94,464
		2023 Clinic Security - Access Controls	56,400
		2023 Temperature Alerting - Enterprise-wide	17,892
85100	Accounting	2023 ERP System Implementation	58,000
		2023 <b>2023 Capital Items</b>	<b>756,587</b>
		2022 <b>2022 Carryover Approved Capital Items</b>	<b>308,982</b>
		<b>TOTAL</b>	<b>1,065,569</b>



Staffing Plan

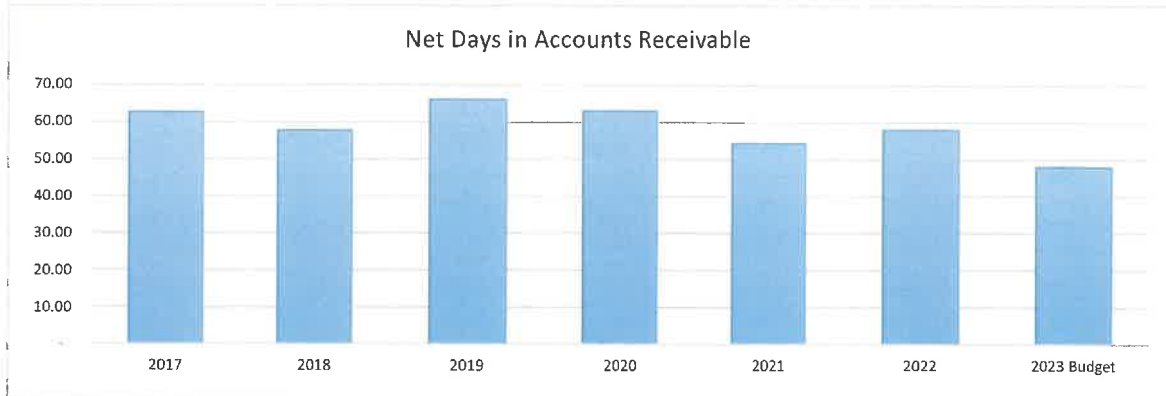
Department	2022		2023		Change	
	Current	Budget	Budget	Budget	FTE's	Percentage
Medical / Surgical	21.22	21.77	20.25	(0.97)	-4.6%	
Family Birthplace	16.50	19.39	17.00	0.50	3.0%	
Surgery	27.83	23.75	28.55	0.72	2.6%	
Laboratory	25.80	22.20	25.45	(0.35)	-1.4%	
Diagnostic Imaging	17.30	18.80	17.65	0.35	2.0%	
Pharmacy	3.67	5.00	4.57	0.90	24.4%	
Cardiopulmonary	6.19	8.69	5.50	(0.69)	-11.1%	
Emergency Room	17.43	17.35	19.90	2.47	14.2%	
Outpatient Special Procedures	2.72	5.10	6.00	3.28	120.6%	
Emergency Medical Services	17.73	17.99	15.00	(2.73)	-15.4%	
Community Paramedic Program	-	-	-	-	0.0%	
Care Transitions	3.50	4.50	5.50	2.00	57.1%	
Quality Assurance	1.00	1.00	1.00	-	0.0%	
Nursing Administration	10.35	10.25	12.40	2.05	19.8%	
Total for Chief Nursing Officer	171.24	175.79	178.77	7.53	4.4%	
ED Physicians	4.93	5.43	6.33	1.40	28.4%	
PMH Family Medicine - Benton City	14.25	18.00	14.85	0.60	4.2%	
PMH Family Medicine - Prosser	20.02	19.95	18.85	(1.17)	-5.8%	
PMH Family Medicine - Grandview	18.06	20.50	20.60	2.54	14.1%	
PMH Women's Health Clinic	9.55	10.30	12.50	2.95	30.9%	
Comprehensive Pain Clinic	-	-	-	-	0.0%	
Dermatologist Clinic	2.83	4.20	7.25	4.42	156.2%	
Prosser Specialty Clinic	26.59	26.69	31.45	4.86	18.3%	
Ideal Protein	-	-	-	-	0.0%	
Employee Health	0.09	0.93	0.60	0.51	100.0%	
Information Systems	5.15	8.46	9.00	3.85	74.8%	
Administration	2.03	2.00	2.00	(0.03)	-1.5%	
Board of Directors	0.10	0.10	0.11	0.01	10.0%	
Volunteer Services	-	-	-	-	0.0%	
Community Relations	4.18	3.50	4.25	0.07	1.7%	
Human Resources	4.00	4.00	4.50	0.50	12.5%	
Process Improvement	-	-	-	-	0.0%	
Medical Staff	1.91	1.25	2.50	0.59	30.9%	
Total for Chief Executive Officer	113.69	125.31	134.79	21.10	18.6%	
Nutritional Services	8.79	11.09	12.46	3.67	41.7%	
Laundry	2.21	2.85	-	(2.21)	-100.0%	
Supply Chain	5.76	5.60	6.75	0.99	17.2%	
Maintenance	4.90	5.50	6.05	1.15	23.5%	
Environmental Services	9.50	10.00	14.00	4.50	47.4%	
Accounting	5.04	5.80	6.80	1.76	34.9%	
Patient Registration	8.65	6.70	8.60	(0.05)	-0.6%	
Patient Financial Services	13.17	13.18	16.40	3.23	24.5%	
Health Information Management	8.51	8.00	9.00	0.49	5.8%	
Call Center	-	-	8.00	8.00	-	
Scheduling	-	-	7.00	2.62	59.8%	
Total for Chief Financial Officer	70.91	78.72	95.06	24.15	34.1%	
Total FTE's	355.84	379.82	408.61	52.77	14.8%	
Total Budgeted Operating Revenue	95,088,149	78,588,742	101,250,986			
Operating Revenue per FTE	267,222	206,910	247,791			



# Prosser

Memorial Health

## Accounts Receivable Analysis



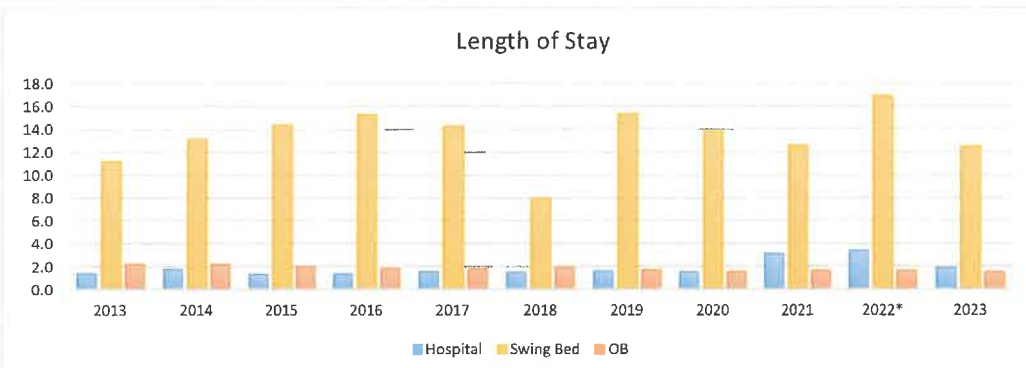
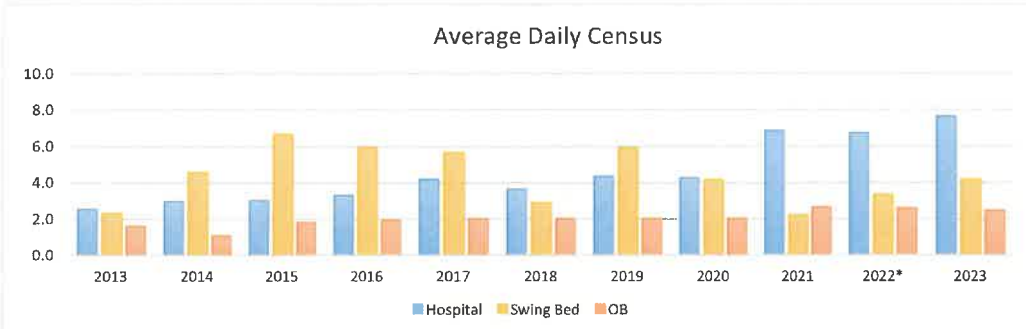
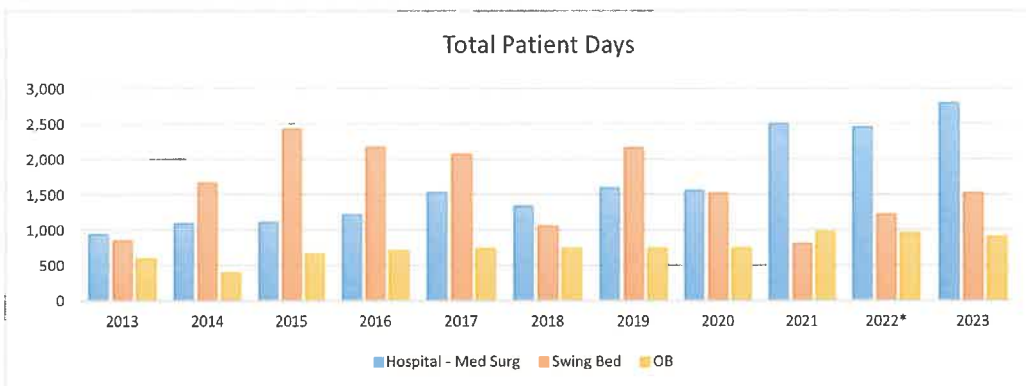
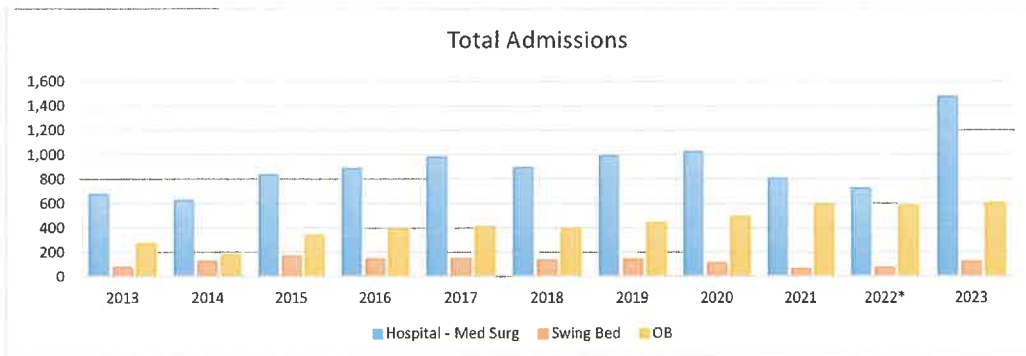
Hospital Gross Revenue by Payor	2022						
	2017	2018	2019	2020	2021	2022	Budget
Medicare	33.3%	31.4%	31.5%	29.7%	32.2%	31.6%	30.9%
Medicaid	32.1%	32.3%	31.8%	32.1%	30.8%	30.7%	32.1%
Insurance	26.7%	28.2%	28.6%	29.0%	29.3%	31.6%	28.6%
Self Pay	8.0%	8.1%	8.1%	9.2%	7.7%	6.0%	8.5%
<b>Total</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>

\*Annualized



# Prosser

Memorial Health  
Service Line Volume Graphs

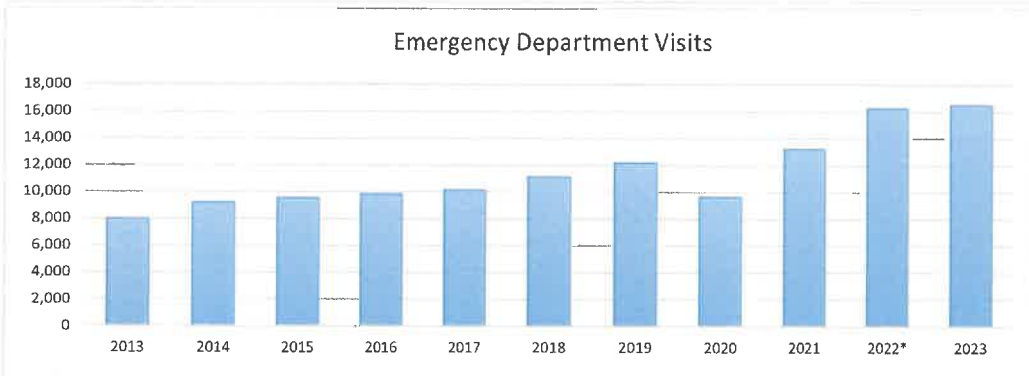
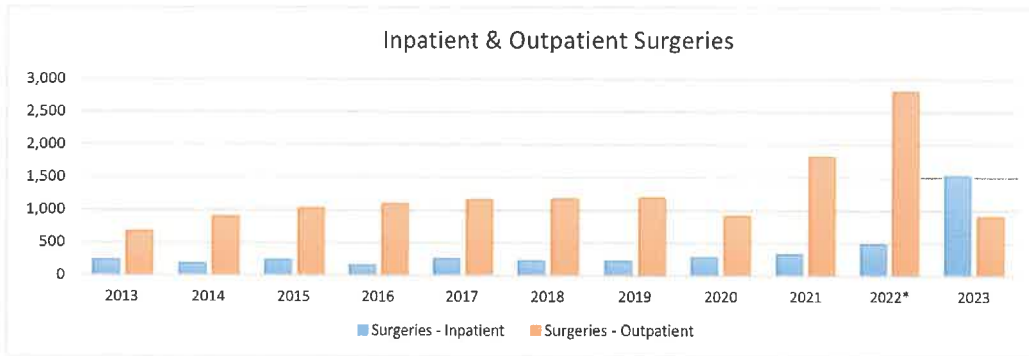
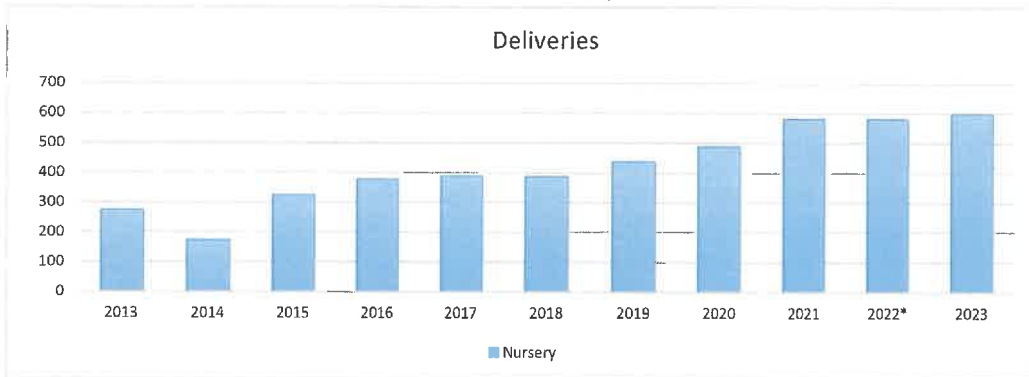


\*Annualized



# Prosser

Memorial Health  
Service Line Volume Graphs  
Service Line Volume Graphs cont'd



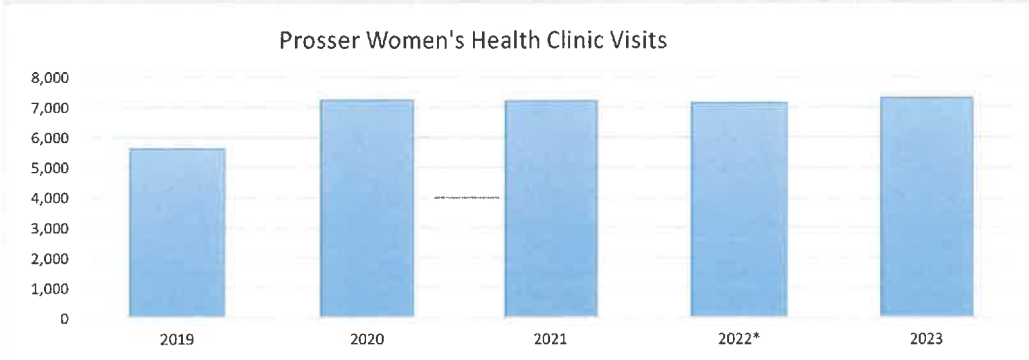
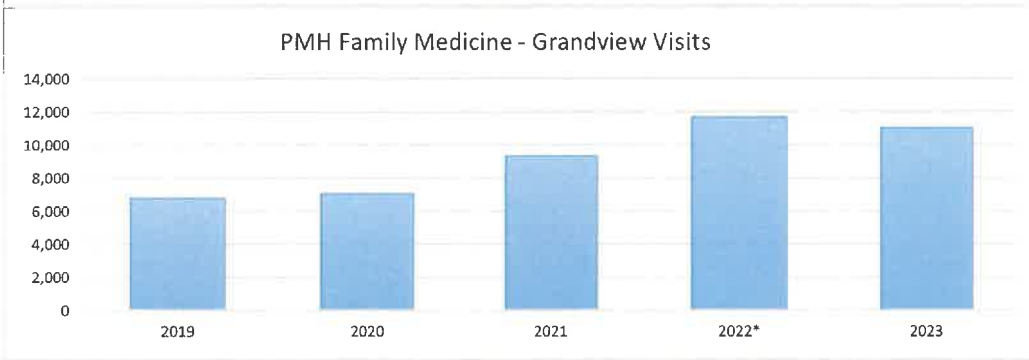
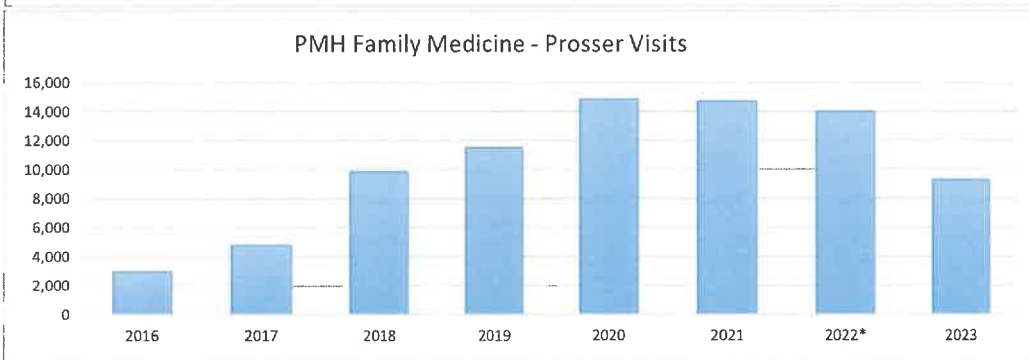
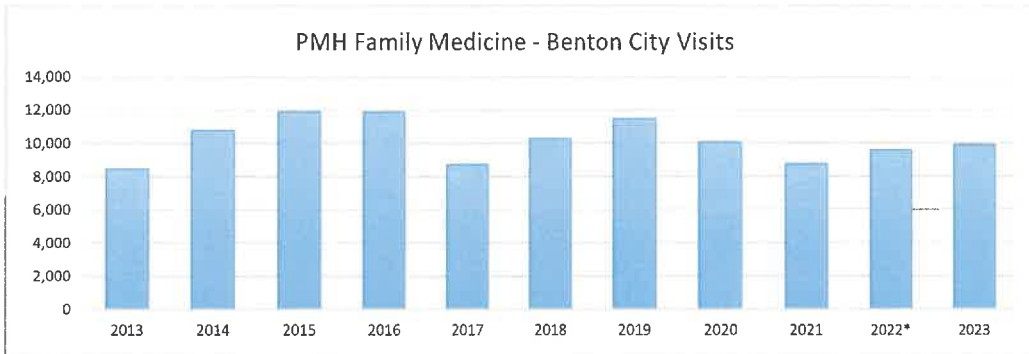
\*Annualized



# Prosser

Memorial Health  
Service Line Volume Graphs

Service Line Volume Graphs cont'd



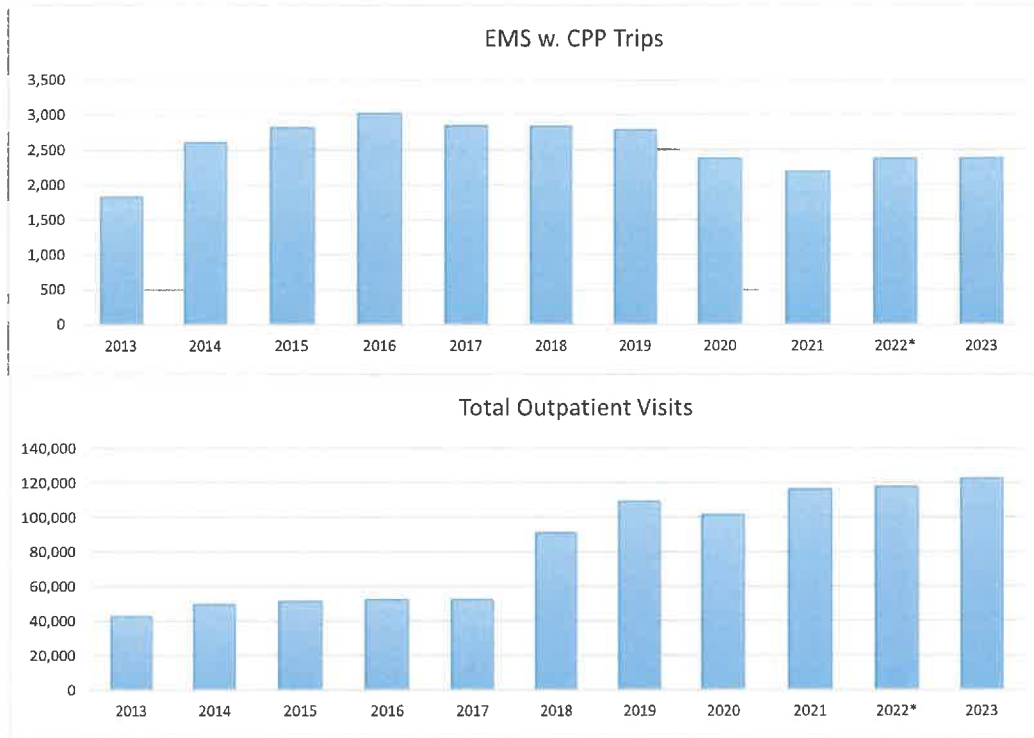
\*Annualized



# Prosser

## Memorial Health Service Line Volume Graphs

### Service Line Volume Graphs cont'd



\*Annualized

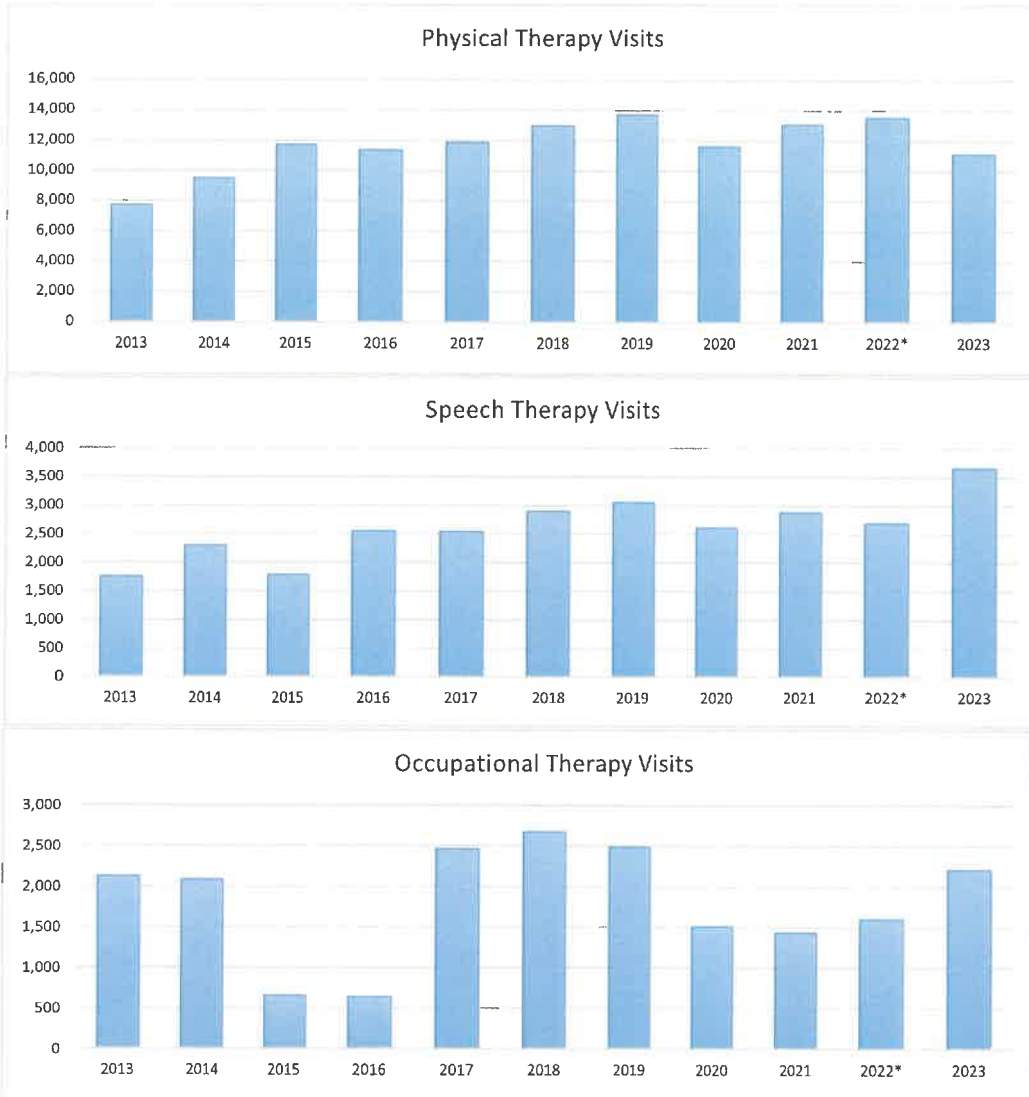


# Prosser

Memorial Health

Service Line Volume Graphs

Service Line Volume Graphs cont'd



\*Annualized



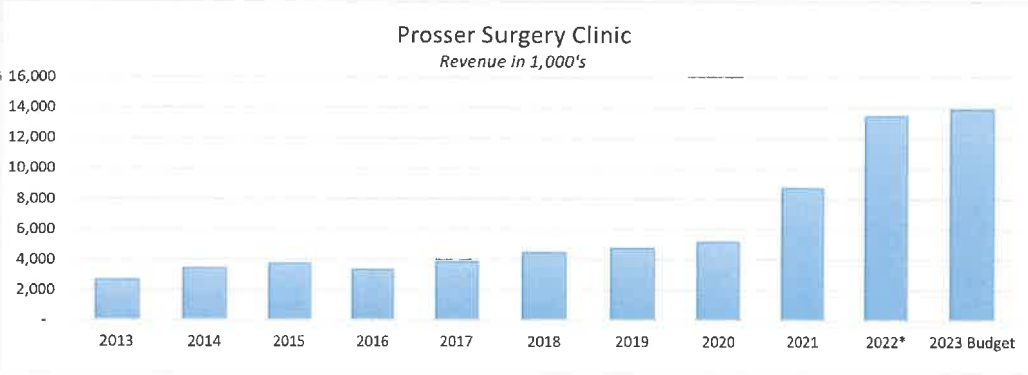
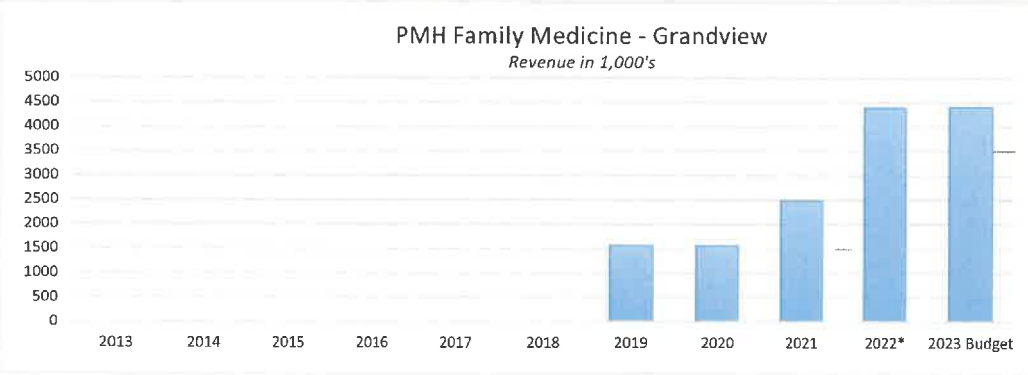
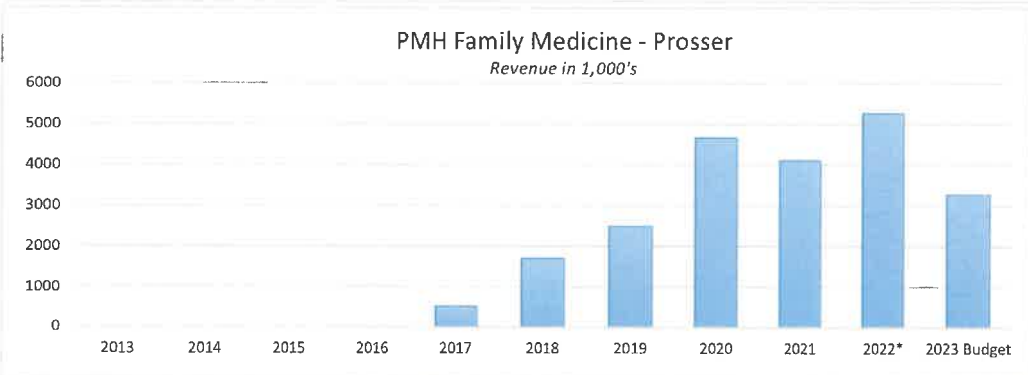
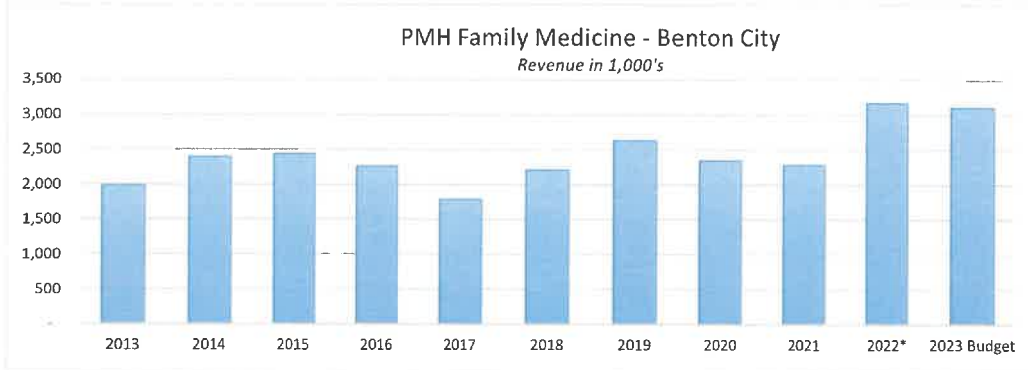


# Prosser

Memorial Health

Service Line Volume Graphs

Service Line Volume Graphs cont'd

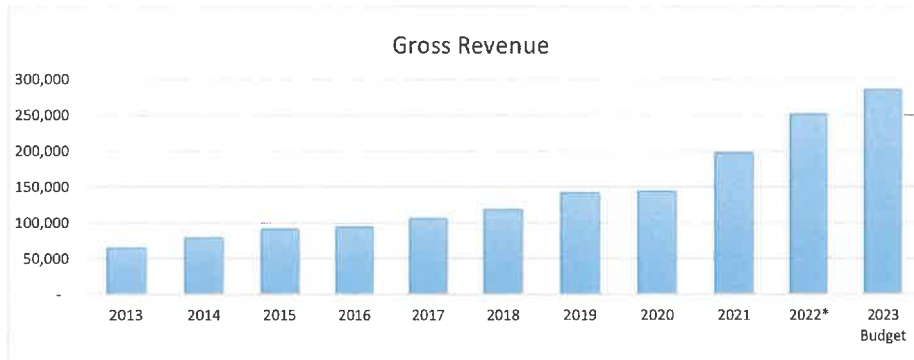


\*Annualized

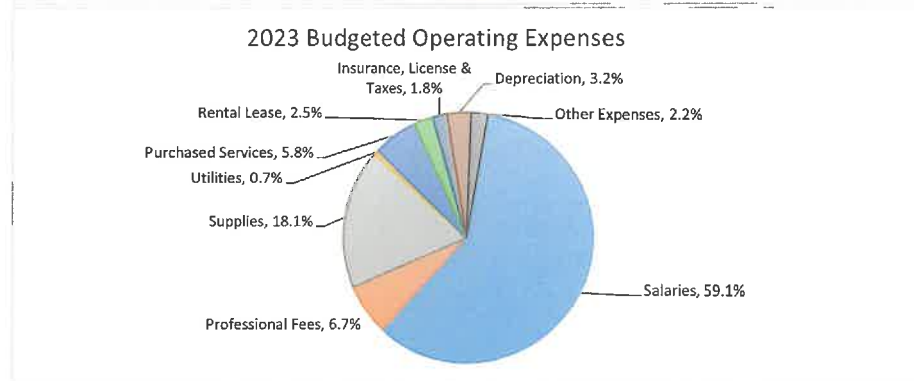
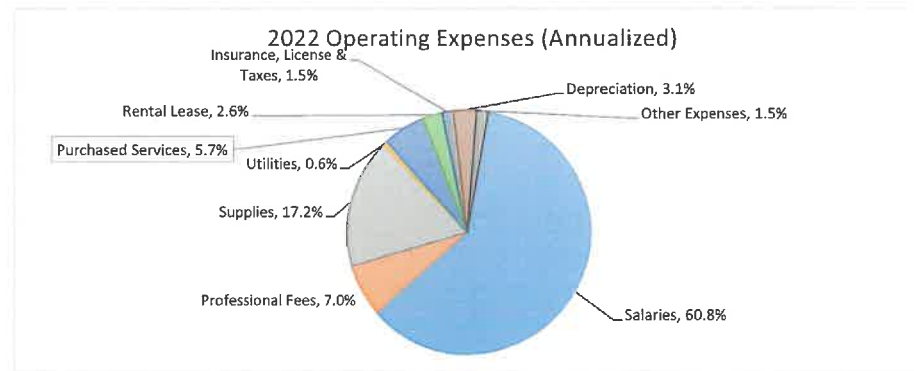


# Prosser

Memorial Health  
Financial Graphs



\*Annualized





# Prosser

Memorial Health  
Financial Trends



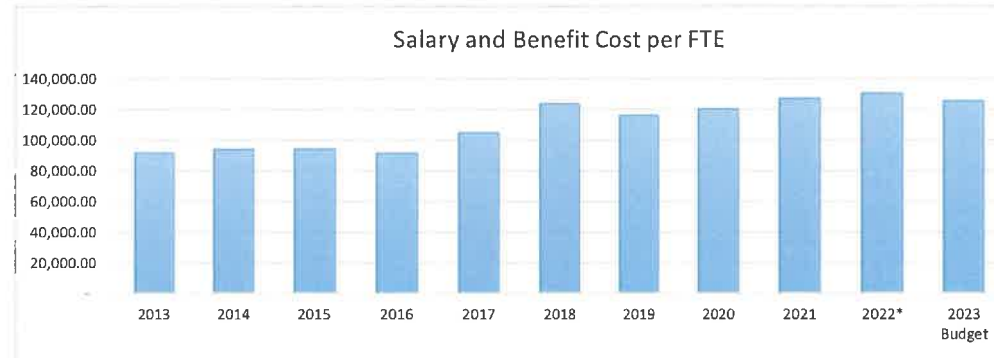
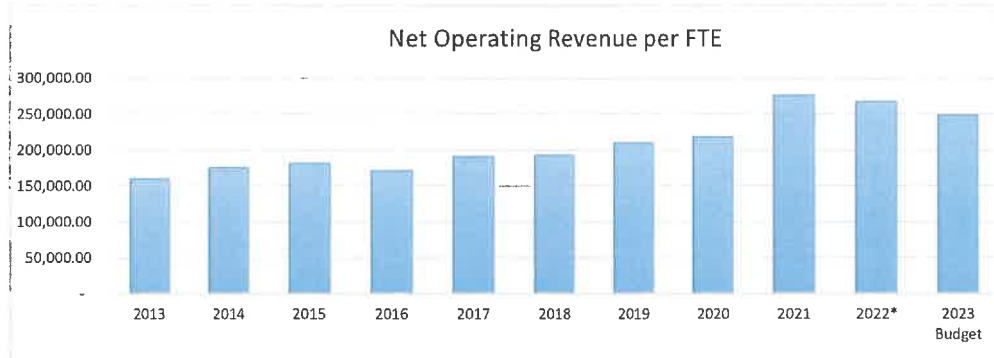
\*Annualized



# Prosser

## Memorial Health Financial Trends

### Financial Trends cont'd



\*Annualized

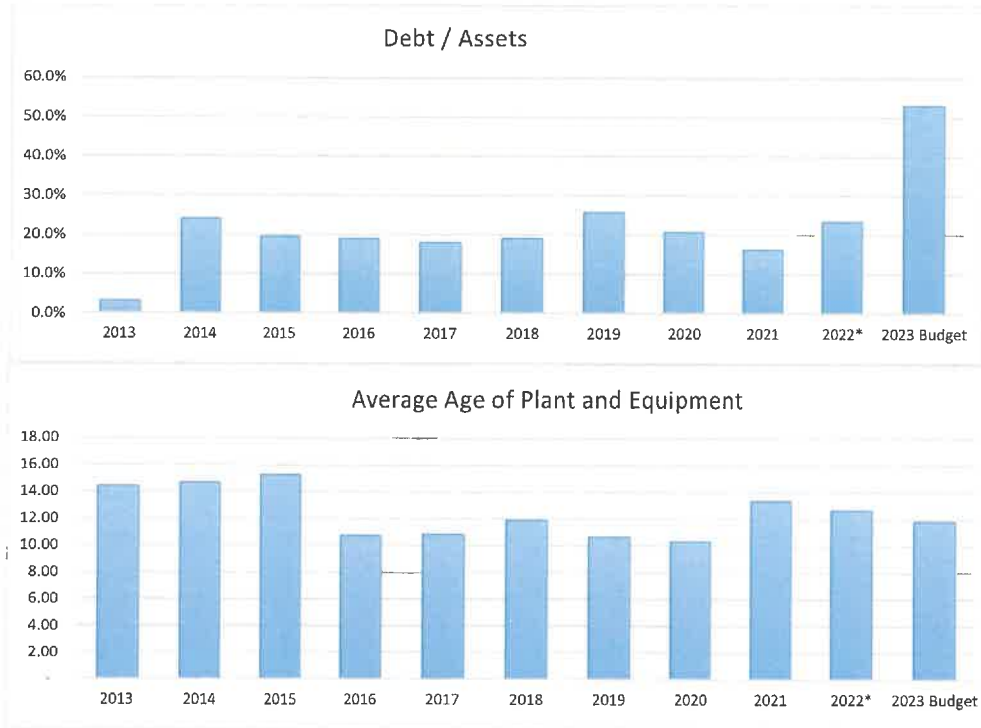


# Prosser

Memorial Health

Financial Trends

Financial Trends cont'd



\*Annualized

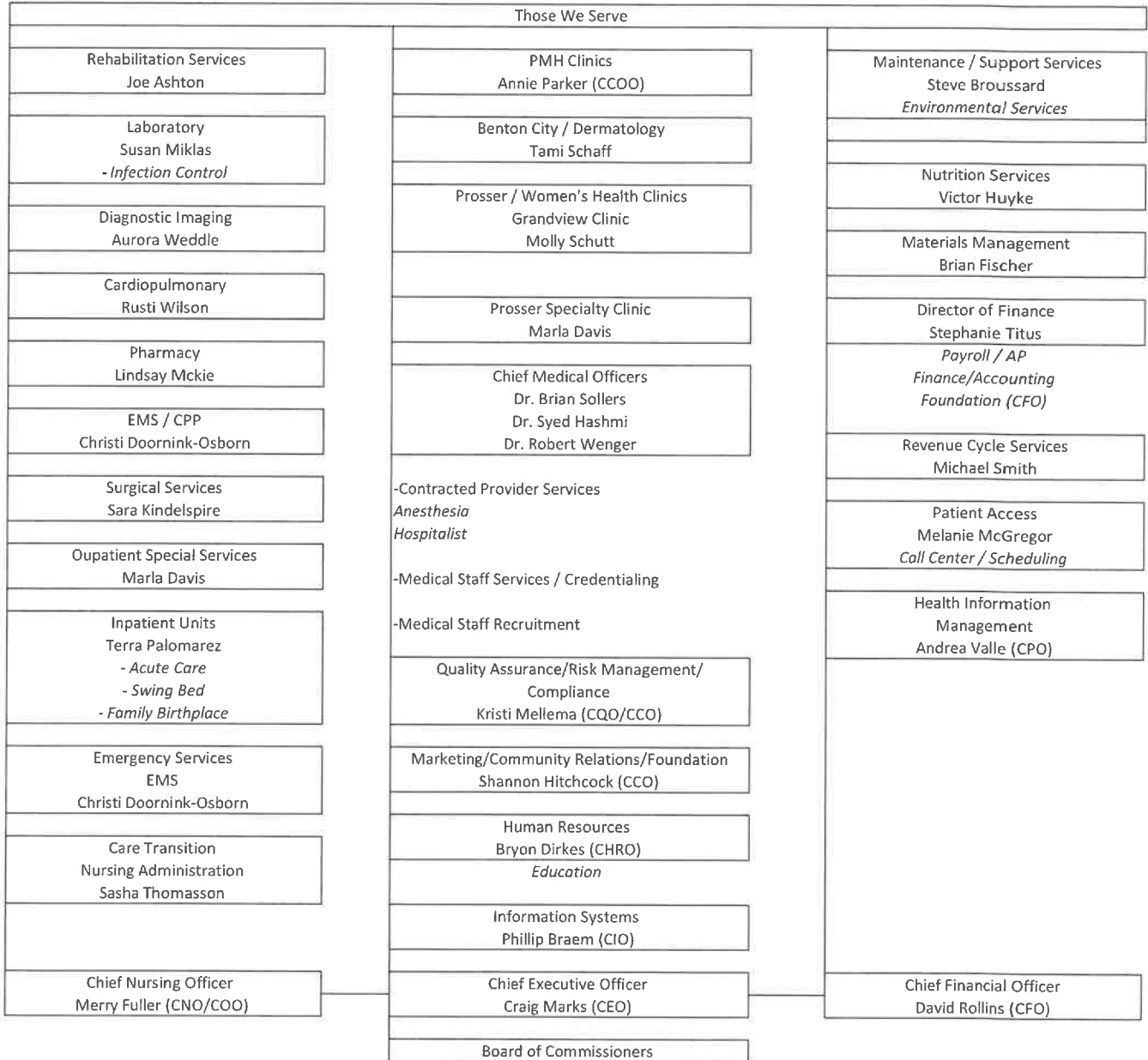


# Prosser Memorial Health

Mission:  
To improve the health of our community.

- \* Patients
  - \* Employees
  - \* Medical Staff
  - \* Quality
  - \* Services
  - \* Financial Stewardship
- Vision

- \* Accountability
  - \* Service
  - \* Promote Teamwork
  - \* Integrity
  - \* Respect
  - \* Excellence
- Values



2023 Exempt Grades									
Grade	Existing Pay Range Minimum	Existing Pay Range Midpoint	Existing Pay Range Maximum						
1	\$ 20.60	\$ 25.75	\$ 30.91	Busy Bean/ Gift Shop Coordinator	Credentialing Specialist				
2	\$ 21.68	\$ 27.11	\$ 32.54	Health & Wellness Coordinator					
3	\$ 22.83	\$ 28.54	\$ 34.25	Community Relations Coordinator / Physician Recruiter	HR Generalist				
4	\$ 23.97	\$ 29.97	\$ 35.96	Revenue Integrity Analyst	Staff Accountant				
5	\$ 25.17	\$ 31.47	\$ 37.76	Systems Support Specialist	Sr. Recruiter / Sr. HR Generalist	Sr. Systems Analyst			
6	\$ 26.43	\$ 33.04	\$ 39.65	Executive Assistant	Clinical Informatics Specialist	Medical Staff Coordinator			
7	\$ 27.75	\$ 34.69	\$ 41.63	Systems Analyst	Accounting / Payroll Technician	Sr. Benefits Specialist / HR Generalist	Sr. Recruiter / Sr. HR Generalist		
8	\$ 29.14	\$ 36.43	\$ 43.71	Senior Financial Analyst					
9	\$ 30.60	\$ 38.25	\$ 45.90	Senior Accountant	Director of Environmental Services				
10	\$ 31.67	\$ 40.35	\$ 49.03	Wound Infusion Supervisor					
11	\$ 33.42	\$ 42.57	\$ 51.72						
12	\$ 35.25	\$ 44.91	\$ 54.57	Sr. Data Analyst	Sr. Systems Analyst				
13	\$ 37.19	\$ 47.38	\$ 57.57	Director of Supply Chain	PMH Clinic Director	Director of Health Information Management	Patient Access Director / Call Center		
14	\$ 39.24	\$ 49.99	\$ 60.73	Patient Care Coordinator					
15	\$ 41.40	\$ 52.74	\$ 64.07						
16	\$ 43.67	\$ 55.64	\$ 67.60	Director of Care Coordination / Employee Health	Director of Revenue Cycle	Director of Cardiopulmonary	Director of Support Services		
17	\$ 45.41	\$ 58.97	\$ 72.54	Director of E.D. & EMS	Pharmacist	Director of Finance / Controller	Director of Diagnostic Imaging	Director Laboratory / Infection Preventionist	Director of Surgical Services
18	\$ 48.13	\$ 62.51	\$ 76.89	Chief Quality Officer	Chief Clinics Operations Officer 1/22	Director of Family Birth Place, Acute Care, Clinical Education & Regulatory Readiness	Director of Pharmacy / Pharmacist		
19	\$ 51.02	\$ 66.26	\$ 81.50	Chief Communications Officer					
20	\$ 54.08	\$ 70.24	\$ 86.39	Chief Information Officer					
21	\$ 57.33	\$ 74.45	\$ 91.58	Chief Human Resources Officer					
22	\$ 60.77	\$ 78.92	\$ 97.07						
23	\$ 64.42	\$ 83.66	\$ 102.90						
24	\$ 68.28	\$ 88.68	\$ 109.07	Chief Nursing Officer	Chief Financial Officer				
25	\$ 72.38	\$ 94.00	\$ 115.62						
26	\$ 76.72	\$ 99.64	\$ 122.55						
27	\$ 81.32	\$ 105.61	\$ 129.91						
28	\$ 86.20	\$ 111.95	\$ 137.70						
29	\$ 91.37	\$ 118.67	\$ 145.96						
30	\$ 96.86	\$ 125.79	\$ 154.72						
31	\$ 102.67	\$ 133.34	\$ 164.00						
32	\$ 108.83	\$ 141.34	\$ 173.84	Chief Executive Officer					

**AFSCME Wage Scale**  
01-01-2021 through 12-31-2023

GRADE	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18													
<b>D</b>	Clerk I (443824) Clerk II (443925) Courier (436702) Housekeeper (456704) Laundry (458705)																														
D - PerDiem	\$14.08	\$14.57	\$15.08	\$15.61	\$16.16	\$16.72	\$17.31	\$17.91	\$18.54	\$19.19	\$19.86	\$20.56	\$21.28	\$22.02	\$22.79	\$23.59	\$24.41	\$25.27													
<b>E</b>	Dietary Aide (434703) Floor Care Tech (435705)																														
E - PerDiem	\$14.28	\$14.78	\$15.30	\$15.83	\$16.39	\$16.96	\$17.55	\$18.17	\$18.80	\$19.46	\$20.14	\$20.85	\$21.58	\$22.33	\$23.11	\$23.92	\$24.76	\$25.63													
<b>F</b>	Cook (435701) Call Cook (435707) HIM Tech 1 Clinic/Hospital (442812) Lab Clerk (443914), PFS Clerical Support (445811), Barista (435705)																														
F - PerDiem	\$14.49	\$15.00	\$15.52	\$16.07	\$16.63	\$17.21	\$17.81	\$18.44	\$19.08	\$19.75	\$20.44	\$21.15	\$21.90	\$22.66	\$23.45	\$24.28	\$25.13	\$26.00													
<b>G</b>	DNA/US (431938) Inpatient/ICU (431954) Inventory Control Coordinator (441944) Patient Registrar (443816) CB Tech (431950) HIM Tech II (443831) Clinic Medical Receptionist (442800) Stenographer (443821)																														
G - PerDiem	\$14.70	\$15.21	\$15.75	\$16.30	\$16.87	\$17.46	\$18.07	\$18.70	\$19.36	\$20.03	\$20.74	\$21.46	\$22.21	\$22.99	\$23.79	\$24.63	\$25.49	\$26.38													
<b>H</b>	Patient Services Representative-Clinic (443817) Phlebotomist (431859) Physical Processing Clerk (443818) Wellness Coach (443891) Appointment Scheduler (443802) Appointment Scheduler-Clinic (443904) Medical Assistant - Registered (431830) Credit Balance/Cash Posting Clerk (443944) Grounds/Maintenance (c. 440651) Groundskeeper (4-48-051), Community Relations Outreach Asst (442807)																														
H - PerDiem	\$14.91	\$15.43	\$15.98	\$16.53	\$17.11	\$17.71	\$18.33	\$18.97	\$19.64	\$20.32	\$21.04	\$21.77	\$22.53	\$23.32	\$24.14	\$24.98	\$25.86	\$26.76													
<b>I</b>	Lab Asst II (431855) Certified MA (431851) ED Tech (429216) Surgery Scheduler/Coordinator (443822) Collector (443828) CBP Tech (429227) CMA/Translator-Clinic (431882) Acute Care Tech (429800) CB Tech / Nurse Technician																														
I - PerDiem	\$15.13	\$15.66	\$16.21	\$16.77	\$17.36	\$17.97	\$18.60	\$19.25	\$19.92	\$20.62	\$21.34	\$22.09	\$22.86	\$23.66	\$24.49	\$25.35	\$26.23	\$27.15													
<b>J</b>	AP Clerk (443801) Biller (443850)																														
J - PerDiem	\$15.89	\$16.44	\$17.02	\$17.61	\$18.23	\$18.87	\$19.53	\$20.21	\$20.92	\$21.65	\$22.41	\$23.19	\$24.00	\$24.84	\$25.71	\$26.61	\$27.55	\$28.51													
<b>K</b>	Pharmacy Technician (440698) Financial Coordinator (443851) Buyer (c. 440698)																														
K - PerDiem	\$16.68	\$17.26	\$17.87	\$18.49	\$19.14	\$19.81	\$20.50	\$21.22	\$21.96	\$22.73	\$23.53	\$24.35	\$25.20	\$26.09	\$27.00	\$27.94	\$28.92	\$29.93													
<b>L</b>	Maintenance Mechanic (c. 440682)																														
L - PerDiem	\$17.51	\$18.13	\$18.76	\$19.42	\$20.10	\$20.80	\$21.53	\$22.28	\$23.08	\$23.87	\$24.71	\$25.57	\$26.46	\$27.39	\$28.35	\$29.34	\$30.37	\$31.43													
<b>M</b>	Code-Verified (c. 440693) Pharmacy Tech (443803) (c. 431851) Prep Desk Technician (c. 443805) CD/Call Center/Outreach (c. 431841)																														
M - PerDiem	\$18.39	\$19.03	\$19.70	\$20.39	\$21.10	\$21.84	\$22.61	\$23.40	\$24.22	\$25.06	\$25.94	\$26.85	\$27.79	\$28.76	\$29.77	\$30.81	\$31.88	\$33.00													
<b>N</b>	OR Tech (c. 429210) Payroll Specialist (c. 443819)																														
N - PerDiem	\$19.31	\$19.88	\$20.68	\$21.41	\$22.16	\$22.93	\$23.74	\$24.57	\$25.43	\$26.32	\$27.24	\$28.19	\$29.18	\$30.20	\$31.26	\$32.35	\$33.48	\$34.65													
<b>O</b>	MLT (c. 429201)																														
O - PerDiem	\$20.27	\$20.98	\$21.72	\$22.48	\$23.27	\$24.08	\$24.92	\$25.79	\$26.70	\$27.63	\$28.60	\$29.60	\$30.64	\$31.71	\$32.82	\$33.97	\$35.16	\$36.39													
<b>P</b>																															
P - PerDiem	\$21.29	\$22.03	\$22.80	\$23.60	\$24.43	\$25.28	\$26.17	\$27.08	\$28.03	\$29.01	\$30.03	\$31.08	\$32.17	\$33.29	\$34.46	\$35.67	\$36.91	\$38.21													
<b>Q</b>	Certified Respiratory Therapist																														
Q - PerDiem	\$22.35	\$23.13	\$23.94	\$24.78	\$25.65	\$26.55	\$27.48	\$28.44	\$29.43	\$30.46	\$31.53	\$32.63	\$33.78	\$34.96	\$36.18	\$37.45	\$38.76	\$40.12													
<b>R</b>	Radiologic Technologist-Registered (c. 429226) Respiratory Therapist-Registry Eligible (c. 429215)																														
R - PerDiem	\$23.47	\$24.29	\$25.14	\$26.02	\$26.93	\$27.88	\$28.85	\$29.86	\$30.91	\$31.99	\$33.11	\$34.27	\$35.47	\$36.71	\$37.99	\$39.32	\$40.70	\$42.12													
<b>S</b>	Medical Technologist (c. 429208) MSW (c. 421902) Respiratory Therapist-Respirometry (c. 429211)																														
S - PerDiem	\$24.64	\$25.51	\$26.40	\$27.32	\$28.28	\$29.27	\$30.29	\$31.35	\$32.45	\$33.59	\$34.76	\$35.98	\$37.24	\$38.54	\$39.89	\$41.29	\$42.73	\$44.23													
<b>T</b>	Microbiologist (c. 429209) Social Worker (c. 421901)																														
T - PerDiem	\$25.88	\$26.78	\$27.72	\$28.69	\$29.69	\$30.73	\$31.81	\$32.92	\$34.07	\$35.27	\$36.50	\$37.78	\$39.10	\$40.47	\$41.89	\$43.35	\$44.87	\$46.44													
<b>U</b>	QA/QC/Technologist (c. 429230) CT Technologist-Registry Eligible (c. 429204) Mammographer (c. 429200)																														
U - PerDiem	\$27.17	\$28.12	\$29.10	\$30.12	\$31.18	\$32.27	\$33.40	\$34.57	\$35.78	\$37.03	\$38.33	\$39.67	\$41.06	\$42.49	\$43.98	\$45.52	\$47.11	\$48.76													
<b>V</b>	CT Technologist-Registered (c. 429204)																														
V - PerDiem	\$28.53	\$29.53	\$30.56	\$31.63	\$32.74	\$33.88	\$35.07	\$36.30	\$37.57	\$38.88	\$40.24	\$41.65	\$43.11	\$44.62	\$46.18	\$47.79	\$49.47	\$51.20													
<b>W</b>																															
W - PerDiem	\$29.95	\$31.00	\$32.09	\$33.21	\$34.37	\$35.58	\$36.82	\$38.11	\$39.44	\$40.83	\$42.25	\$43.73	\$45.26	\$46.85	\$48.49	\$50.18	\$51.94	\$53.76													
<b>X</b>	Ultrasoundographer - registry eligible (c. 429214) Echo Tech - registry eligible (c. 429209), MRI Tech (240302), Nuclear Medicine Technologist (429302)																														
X - PerDiem	\$31.45	\$32.55	\$33.69	\$34.87	\$36.09	\$37.36	\$38.66	\$40.02	\$41.42	\$42.87	\$44.37	\$45.92	\$47.52	\$49.19	\$50.91	\$52.69	\$54.54	\$56.45													
<b>Y</b>																															
Y - PerDiem	\$33.03	\$34.18	\$35.38	\$36.62	\$37.90	\$39.22	\$40.60	\$42.02	\$43.49	\$45.01	\$46.59	\$48.22	\$49.90	\$51.65	\$53.46	\$55.33	\$57.26	\$59.27													
<b>Z</b>	Ultrasound-Registered (c. 429213) Echo Tech-Registered (c. 429205)																														
Z - PerDiem	\$34.68	\$35.89	\$37.15	\$38.45	\$39.79	\$41.18	\$42.63	\$44.12	\$45.66	\$47.26	\$48.91	\$50.63	\$52.40	\$54.23	\$56.13	\$58.09	\$60.13	\$62.23													
<b>Premium Pay Schedule (1-2021)</b>	<table border="1"> <tr> <td>Weekends:</td> <td>\$3.50</td> </tr> <tr> <td>Evening Shift (9p-11p):</td> <td>\$2.75</td> </tr> <tr> <td>Night Shift (11p-7a):</td> <td>\$4.00</td> </tr> <tr> <td>On Call/Standby:</td> <td>\$4.25</td> </tr> <tr> <td>Leadperson:</td> <td>\$1.50</td> </tr> <tr> <td>Preceptor:</td> <td>\$2.00</td> </tr> </table>																			Weekends:	\$3.50	Evening Shift (9p-11p):	\$2.75	Night Shift (11p-7a):	\$4.00	On Call/Standby:	\$4.25	Leadperson:	\$1.50	Preceptor:	\$2.00
Weekends:	\$3.50																														
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On Call/Standby:	\$4.25																														
Leadperson:	\$1.50																														
Preceptor:	\$2.00																														

The Death & Bereavement Benefit Plan (DBP) provides a 10% additional step of benefits. The entire increase is 5% between steps 1 to 15.

WA State Minimum Wage 1/2021 = \$13.69/hour



# SEIU 1199 Wage Scale

July 1, 2021 THROUGH June 30, 2024

	PMH	PMH	PMH	PMH	PMH	PMH
	RN	RN	RN	LPN	LPN	LPN
Effective	7/2021	7/2022	7/2023	7/2021	7/2022	7/2023
	3.00%	3.00%	3.00%	3.00%	3.00%	3.00%
<b>Base</b>	33.59	34.60	35.64	22.53	23.21	23.91
<b>1</b>	34.32	35.35	36.41	23.03	23.72	24.43
<b>2</b>	35.08	36.13	37.21	23.54	24.25	24.98
<b>3</b>	35.86	36.94	38.05	24.06	24.78	25.52
<b>4</b>	36.64	37.74	38.87	24.58	25.32	26.08
<b>5</b>	37.44	38.56	39.72	25.12	25.87	26.65
<b>6</b>	38.27	39.42	40.60	25.68	26.45	27.24
<b>7</b>	39.11	40.28	41.49	26.23	27.02	27.83
<b>8</b>	39.97	41.17	42.41	26.81	27.61	28.44
<b>9</b>	40.85	42.08	43.34	27.41	28.23	29.08
<b>10</b>	41.75	43.00	44.29	28.01	28.85	29.72
<b>11</b>	42.67	43.95	45.27	28.62	29.48	30.36
<b>12</b>	43.61	44.92	46.27	29.25	30.13	31.03
<b>13</b>	44.58	45.92	47.30	29.91	30.81	31.73
<b>14</b>	45.56	46.93	48.34	30.55	31.47	32.41
<b>15</b>	46.56	47.96	49.40	31.22	32.16	33.12
<b>16</b>	47.58	49.01	50.48	31.91	32.87	33.86
<b>17</b>	48.63	50.09	51.59	32.62	33.60	34.61
<b>18</b>	49.70	51.19	52.73	33.33	34.33	35.36
<b>19</b>	50.79	52.31	53.88	34.06	35.08	36.13
<b>20</b>	51.91	53.47	55.07	34.82	35.86	36.94
<b>21</b>	53.05	54.64	56.28	35.59	36.66	37.76
<b>22</b>	54.22	55.85	57.53	36.37	37.46	38.58
<b>23</b>	55.41	57.07	58.78	37.16	38.27	39.42
<b>24</b>	56.63	58.33	60.08	37.99	39.13	40.30
<b>25</b>	57.89	59.63	61.42	38.91	40.08	41.28
<b>26</b>	59.33	61.11	62.94	39.88	41.08	42.31
<b>27</b>	60.81	62.63	64.51	40.88	42.11	43.37

## APPENDIX A

Hiring Wage Grid*	EMT	2019	2020	2021	2022
	A	13.37	13.84	14.32	14.82
B	13.77	14.25	14.75	15.27	
C	14.19	14.69	15.20	15.73	
D	14.61	15.12	15.65	16.20	
E	15.05	15.58	16.12	16.69	
F	15.50	16.04	16.60	17.19	
G	15.97	16.53	17.11	17.71	
H	16.45	17.03	17.62	18.24	
I	16.94	17.53	18.15	18.78	
J	17.45	18.06	18.69	19.35	
K	17.97	18.60	19.25	19.93	
L	18.51	19.16	19.83	20.53	
M	19.07	19.74	20.43	21.14	
N	19.64	20.33	21.04	21.78	
O	20.23	20.94	21.67	22.43	

Hiring Wage Grid*	AEMT	2019	2020	2021	2022
	A	14.01	14.50	15.01	15.53
B	14.43	14.94	15.46	16.00	
C	14.86	15.38	15.92	16.48	
D	15.31	15.85	16.40	16.97	
E	15.77	16.32	16.89	17.48	
F	16.24	16.81	17.40	18.01	
G	16.73	17.32	17.92	18.55	
H	17.23	17.83	18.46	19.10	
I	17.75	18.37	19.01	19.68	
J	18.28	18.92	19.58	20.27	
K	18.83	19.49	20.17	20.88	
L	19.40	20.08	20.78	21.51	
M	19.98	20.68	21.40	22.15	
N	20.58	21.30	22.05	22.82	
O	21.20	21.94	22.71	23.50	

Hiring Wage Grid*	Paramedic	2019	2020	2021	2022
	A	18.02	18.65	19.30	19.98
B	18.56	19.21	19.88	20.58	
C	19.12	19.79	20.48	21.20	
D	19.69	20.38	21.09	21.83	
E	20.28	20.99	21.72	22.48	
F	20.89	21.62	22.38	23.16	
G	21.52	22.27	23.05	23.86	
H	22.16	22.94	23.74	24.57	
I	22.83	23.63	24.46	25.31	
J	23.51	24.33	25.18	26.07	
K	24.22	25.07	25.95	26.85	
L	24.95	25.82	26.73	27.66	
M	25.70	26.60	27.53	28.49	
N	26.47	27.40	28.35	29.35	
O	27.26	28.22	29.21	30.23	

\*Wage scale set upon hire and is dependent upon credited experience. Employee annual increase moves right on the grid upon anniversary hire date. Lead Pay is \$1.25/hour.

## Vision

Patients  
Employees  
Medical Staff  
Quality  
Services  
Financial



**Prosser**  
Memorial Health

**Mission:** To improve the health of our community.

## Values

Accountability  
Service  
Promote Teamwork  
Integrity  
Respect  
Excellence

# Environment of Care 2022 Summary/2023 Work Plan

## Introduction

Environment of Care (EOC) management plans encompass seven areas of the healthcare environment:

- Emergency Preparedness
- Hazardous Materials
- Life Safety
- Patient Technologies
- Safety & Accident Prevention
- Security
- Utilities

EOC plans and accompanying policies and procedures are reviewed annually by the Director of Support Services and revised as needed to reflect current regulatory standards and conditions in District facilities. All Prosser Memorial Health (PMH) departments have Safety & EOC Manuals containing these documents and are always to make them available to PMH staff while they are on duty. EOC plans, policies and procedures are also available on the PMH SharePoint under the "Safety" tab along with a wealth of safety related resources and materials.

## EOC Plan Summaries

### *Emergency Preparedness Management Plan*

#### Objectives

This program describes how the organization will ensure an effective response to disasters or emergencies affecting the EOC. This objective remains valid and appropriate.

#### Scope:

The general scope of the plan remained the same for 2022, addressing emergency management needs at the hospital and its clinics.

#### Performance:

- The Emergency Preparedness Committee (EPC) met regularly with good attendance and was effective in managing aspects and requirements of this program.
- The EPC conducted the annual comprehensive Hazard Vulnerability Analysis (HVA) on February 9, 2022, for our region and service area. The HVA identified the areas of highest risk to include wildfires, severe winter storms and utility failures. Policies and procedures currently in place address these and other areas of risk and continue to be valid.

- PMH conducted a tabletop disaster exercise on May 4, 2022, in the Whitehead conference room. The exercise was well attended by PMH Leadership and EMS personnel. The exercise scenario was based on one of the high-risk areas identified in the HVA – wildfires. Simulated response to the incident was based on procedures found in the Shelter in Place/Evacuation Policy recently developed by the EPC. All players were actively engaged and took part in the lively discussion and problem-solving process. The exercise PowerPoint presentation and associated documentation is posted on the PMH SharePoint in the Emergency Preparedness section under the Safety tab.



- PMH and the Prosser School District renewed their Emergency Transfer Agreement on September 8, 2022. This agreement allows PMH the use of Housel Middle School as an alternate care facility for disaster related casualties should the hospital building become unusable or if the number of casualties exceeds the hospital's capacity to provide care for patients on site.

This agreement is in effect for a 2-year period and shall automatically be renewed for two successive 2-year periods. However, it may be terminated by either party upon 30 days written notice.

- The PMH Medical Staff Department has developed a Provider Emergency Call List that is to be used for contacting our providers during emergencies or disasters. The list is updated quarterly and is sent to the Human Resources Department and the Director of Support Services. The list was last updated on September 30, 2022, with the next update due in December 2022. The list is posted on the PMH SharePoint in the Emergency Preparedness section under the Safety tab.
- All PMH departments completed the annual review of and updates to their department specific emergency preparedness plans during the first quarter of 2022.
- Emergency preparedness annual training for all PMH employees was conducted during 2022. Current completion rate is 94% (401 assigned, 375 completed). This training is a regulatory requirement.
- Active shooter biannual training for all PMH employees was conducted during 2022. Current completion rate is 93% (233 assigned, 216 completed). This training is a not regulatory requirement, but in the interest of maintaining employee awareness on this subject, PMH has made it a requirement.
- Members of the PMH EPC are currently developing an unannounced, community based functional Mass Casualty Exercise (MCI) to be executed in mid-December 2022. Completion of this exercise will satisfy CMS requirements related to new emergency preparedness rules and participation in the Federal Medicare and Medicaid Programs.
- Regional integration of emergency preparedness planning continued through regular collaboration with the Benton Franklin Health District Emergency Response Division and the eastern Washington Regional Emergency and Disaster (REDi) Healthcare Coalition.
- Key PMH staff members participated (and continue to participate) in readiness surveys, phone and online status and planning meetings related to COVID-19 and emerging diseases with all its regional partners. These partners include:
  - Healthcare coalitions
  - Hospitals

- Long term care & nursing homes
- Emergency management agencies
- Health Districts
- EMS providers
- Law enforcement agencies
- Fire Districts with EMS

Effectiveness:

- The ability to respond to mass casualty incidents was enhanced by staff training, exercises, support, and participation of local and regional agencies.
- New Employee Orientation and annual refresher training on Emergency Preparedness are considered adequate based on staff knowledge assessed during departmental safety surveys.

2023 Work Plan

- Enhance the effective use of the InformaCast® mass communication system by developing preplanned notifications for a variety of emergencies.
- Continue collaborating with regional partners on COVID-19 related initiatives.
- Continue and enhance our relationships with regional agencies and local municipalities.
- Actively participate in regional and local drills and exercises as they become available.
- Continue to monitor and track employee participation in the emergency preparedness training program.
- Develop and conduct a tabletop disaster exercise based on one of the high-risk areas identified the PMH HVA.
- Develop and conduct a community based functional MCI exercise.

***Hazardous Materials & Waste Management Plan***

Objective:

This plan describes how the organization will maintain a program to safely control hazardous materials and waste. These objectives remain valid and appropriate.

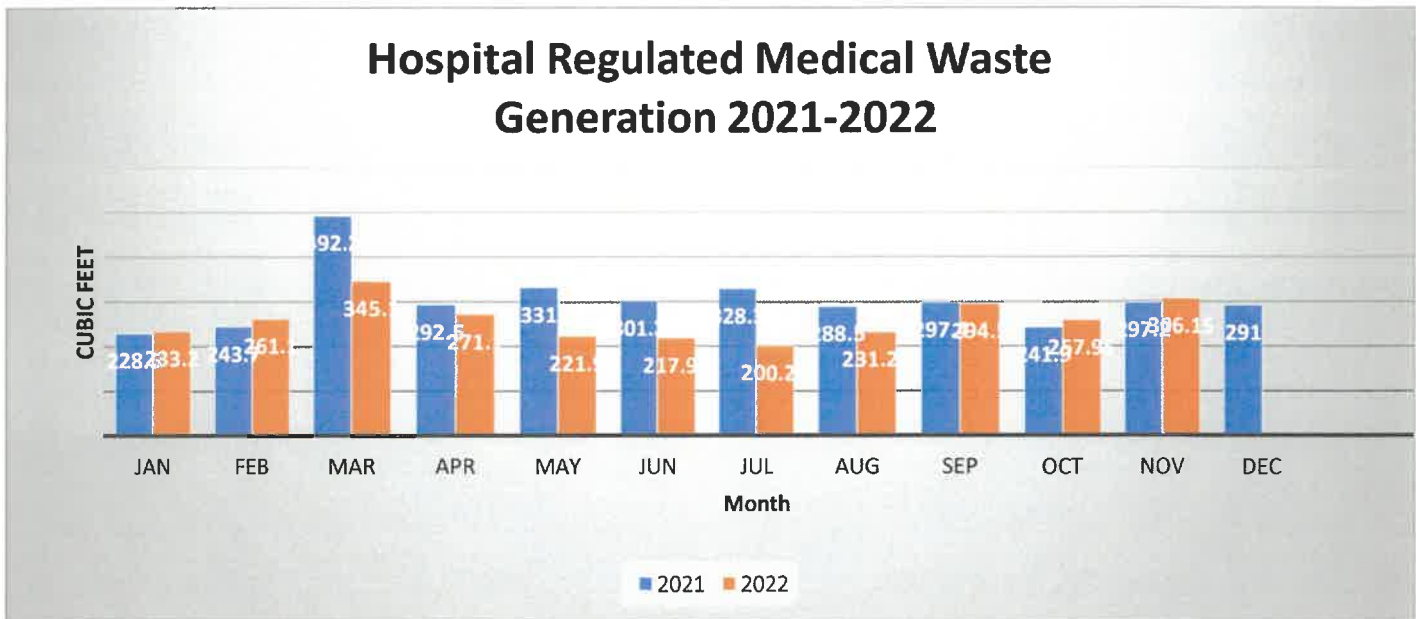
Scope:

- The overall scope of the plan did not change and continues to apply to current industry standards.
- There have been no significant changes in quantities or types of chemicals used in clinical or support operations, and the program continued unchanged in 2022.

Performance:

- Management and timely removal of hazardous wastes, i.e., universal, medical, and chemical has been effective in keeping District operations running smoothly.
- The recycling program continues to be effective in preventing certain types of wastes from entering our waste stream and out of landfills. The recycling program includes:
  - used fluorescent and HID lamps
  - mercury containing devices
  - magnetic lighting ballasts
  - chargeable and non-rechargeable batteries
  - cardboard
  - scrap metal

- Regulated medical waste (RMW) volumes decreased 2022. The average monthly generation rate in 2021 was 302.78 cubic feet. To date in 2022, the average monthly generation rate is 258.22 cubic feet and reflects a 15% overall decrease in generation as compared to 2021. This decrease can be attributed to efforts made to educate RMW generators on what does and what does not constitute this type of waste. Efforts to cap or reduce medical waste generation will continue into 2023.



- The Safety Officer remains responsible for the hazardous materials and waste program and continues to serve as a reliable and effective resource for directors and staff when needed.

Effectiveness:

- New Employee Orientation and annual refresher training in conjunction with training efforts as described above have been effective in raising staff awareness and knowledge of the Hazard Communication Program. Staff knowledge assessments conducted by the Safety & Environment of Care Committee (SEOCC) indicate an ongoing need to improve staff knowledge of medical waste handling and disposal protocol.

2023 Work Plan

- Closely monitor regulated medical waste sources, type, and volumes.
- Continue work in progress to monitor and report misuse of regular and medical waste receptacles.
- Provide training, materials and assistance where indicated.
- Work with Supply Chain to identify any changes in quantity, types and volumes of disposable supplies.
- Work with high volume users to find possible ways to reduce generation.

***Life Safety Management Plan***

Objectives:

- This program describes how the organization will provide a fire-safe environment of care. This objective remains valid and appropriate to current standards. Elements include regular fire drills, employee training and knowledge assessment, and procedures to ensure continued life safety during renovations and construction.

Scope:

- The scope of this plan continues to address all required life safety needs at the hospital and other District facilities as applicable.
- The management of the plan was enhanced by continued participation of the SEOCC.

#### Performance:

- An ongoing program for life safety systems inspection, testing, and preventive maintenance remains in place. All required inspections, testing and maintenance has been accomplished to date and include:
  - Hospital and service building fire alarm systems
  - Wet and dry fire suppression systems
  - Emergency generators
  - Emergency egress lights
  - Battery powered smoke and carbon monoxide detectors
- The condition and readiness of systems and equipment is considered good based on regular checks during inspections and a comprehensive, documented preventive maintenance program.
- Fire drills were conducted once per shift per quarter as required and documented. Areas needing improvement were brought to the attention of the department manager, with retraining and re-drilling provided as needed.
- Life Safety systems preventive maintenance completion and testing statistics are included in monthly quality improvement reports generated by the Director of Support Services.

#### Effectiveness:

- Overall management of the Life Safety Plan has been effective and has resulted in four consecutive “Zero Findings” statements from the State Fire Marshal’s office during past federal and state surveys.
- New Employee Orientation and annual refresher training on life safety, fire extinguishers, fire alarms, and exit locations are considered effective based on staff knowledge assessed during fire drill and safety surveys.

#### 2023 Work Plan

- Continue to track, document and report life safety equipment and systems testing and maintenance activities, identify trends in noncompliance, implement corrective actions where indicated.
- Raise staff awareness of proper fire and life safety practices using monthly safety newsletters and fire drills, especially during months with holidays when possibly hazardous decorations may be brought into our facilities.
- Revise the Fire Safety Program to align with changing organizational structure and departmental needs.

### **Patient Technologies Management Plan**

#### Objective:

This program describes how the organization will ensure the safe and effective use of medical equipment. This objective remains valid and appropriate to standards.

#### Scope:

The general scope of the plan remained the same for 2021, addressing needs at the hospital and associated clinics.

### Performance:

- Preventive maintenance (PM) services continued to be provided through a contractual agreement with Kadlec Regional Medical Center (KRMC) Clinical Engineering Department. This agreement becomes due for renewal on March 1, 2023.
- Performance by KRMC biomedical technicians remained dependable and effective in completing scheduled PMs on time, performing timely equipment repairs and responding to urgent service requests. These activities were tracked and documented. PM completion statistics are included in monthly quality assurance reports.
- PMH acquired an abundance of new medical equipment in 2022, most of which was replacement equipment for outdated patient beds, stretchers and patient monitoring equipment throughout the hospital. All new equipment was inspected, tested and added to the biomedical PM program for scheduled periodic preventive maintenance and testing as required by the manufacturer.
- The master biomedical equipment inventory was updated throughout the year to reflect additions to and deletions from the biomedical PM program.
- Equipment identified as missing, lost or out of service were removed from the biomedical equipment PM program.

### Effectiveness:

The ongoing biomedical preventive maintenance program was effective in maintaining patient care equipment in excellent condition throughout the year. Timely and reliable response by KRMC Clinical Engineering personnel to requests for routine and emergency service was effective in reducing down-time and interruption of patient care services.

### 2023 Work Plan:

- Work with department directors on the selection and installation of new biomedical equipment.
- Work with department directors and staff for identification of equipment that is overdue for maintenance or is lost, missing or out of service.
- Continue work in progress to ensure all new medical equipment is inspected, tested and added to the biomedical PM program.
- Provide affected department leaders with updated equipment inventories and preventive maintenance completion reports as they become available.

## ***Safety & Accident Prevention Management Plan***

### Objective:

This program describes how the organization provides a physical environment free of hazards and manages staff activities to reduce the risk of injuries to employees, patients, and visitors. These objectives remain valid and appropriate.

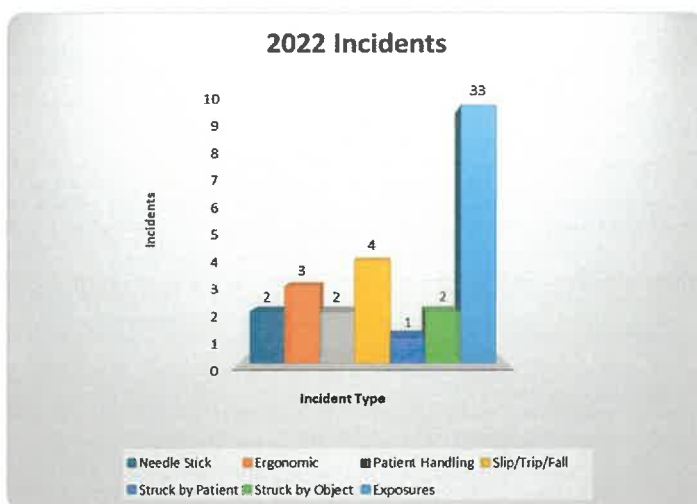
### Scope:

- The general scope of the plan is applied organization wide and addresses both general processes for injury and illness prevention and reporting.
- Priority continued to be assigned to our primary injury areas: slips/trips/falls (STF), ergonomics, and patient handling related incidents.

### Performance:



- Safety management process has been satisfactory with well attended monthly meetings of the SEOCC receiving reports from other committees, i.e., EPC and Safe Patient Handling. The SEOCC has been effective in ensuring continued coordination between the seven elements of the environment of care program.
- Annual hazard assessments for personal protective equipment (PPE) were completed by all departments in the first quarter of 2022. Hazard assessments are posted on the PMH intranet for easy access by all staff.
- Required annual respiratory protection training and mask fitting was conducted in 2022. Compliance rate for both activities to date is 94% (401 assigned, 375 completed and 356 assigned, 335 completed).
- Annual training for the proper use and care of powered air purifying respirators (PAPRs) was conducted in 2022. Compliance rate to date is 57% (356 assigned, 204 completed). PAPR training is still available to employees that need it, and we have until the end of the year to improve our completion rate for 2022.
- Employee accident and injury data was monitored through the year, including a historical perspective of data from past years to establish a baseline. Trends are identified through monthly review of incident reports. Exposures, slip/trip/falls (STF) and ergonomics are the top three concerns moving forward for the remainder of 2022 and in to 2023.



### Summary

- **Needle Stick (2)** – Syringe mishandling; syringe in trash
- **Ergonomic (3)** – Ankle twist; back strain during lifting; hand/wrist strain repetitive motion
- **Patient Handling (2)** – Back strain during patient repositioning; back strain during patient transfer
- **Slip/Trip/Fall (4)** – Slip/fall on ice (2); trip/fall on electrical cord; syncope fall
- **Struck by Patient (1)** – Wrist strain - grabbed by patient
- **Struck by/against object (2)** – Hand caught in door; eye struck by cardboard box
- **Exposure (33)** COVID-19 exposure (32); eye exposure - cleaning chemical vapors

### Effectiveness

- The PMH safety program brought visibility, attention, and resources to safety throughout this reporting period. The number of Workers' Compensation claims to date has increased significantly as compared to the same time period in 2021. The increase in claims is directly related to COVID-19 lost time exposures.

Important to note is that the 32 COVID-19 exposure claims submitted to Workers' Comp does not reflect the total number of exposures that occurred this year, as a significant number of them were not reported to them by PMH. Aside from the COVID-19 exposures, the common theme behind most of the other incidents is attributed to inattention and in some cases, failure to follow established procedures and protocols.

- New employee orientation, refresher, and departmental specific safety training is considered satisfactory based on employee knowledge assessments made during surveys and injury report analyses.
- Environmental rounds survey team members have remained effective and have been recognized as an asset in ensuring ongoing organizational safety and survey readiness.

### 2023 Work Plan

- Continue to raise employee awareness on overall safety in the workplace with emphasis placed on preventing exposures, STFs and ergonomic related injuries through monthly safety newsletters, emails and special publications.
- The success of the safety awareness program will be measured by ongoing evaluations of incident reports and the types and frequency of injuries as compared to data from 2022. The awareness program will continue to focus on identified trends, with safety articles targeting types of incidents as they occur throughout the year.
- Work in collaboration with the EPC on the development and execution of required tabletop and MCI exercises.

## **Security Management Plan**

### **Objective:**

This program describes how the organization will maintain a security management plan to protect staff, patients, and visitors from harm. The objectives remain valid and appropriate.

### **Scope:**

- The general scope of the plan continued to apply to hospital District operations.
- The management of the plan was enhanced by continued participation of the SEOCC.

### **Performance:**

Pac-Tac Protective Solutions (PTPS) continues to provide on-site security services for the hospital. Hours of coverage remained the same (1800-0600 on weekdays and 24-hour coverage on weekends and holidays). The security officers assigned to PMH have been very well received and appreciated by PMH staff. Activity reports are generated for each shift worked and are reviewed by the Director of Emergency Services and the Safety Officer. To date, no significant security related issues have been reported. However, the frequency of incidents related to disruptive patients seems to be on the increase and could be contributed to the increased utilization of our Emergency Room and Acute Care Services department over the past weeks and months. Security personnel have been effective in de-escalating these incidents and controlling tense situations in all areas of the hospital.

### **Effectiveness:**

- The hospital security camera system was upgraded in 2022 and continues to be an effective tool for investigating and assessing reported incidents. PTPS security officers have access to the camera system and monitor cameras throughout their shifts in addition to making hourly rounds of the facility and grounds. Additional cameras will be purchased and installed in 2023 to provide coverage for sensitive areas of the hospital that are not currently monitored.
- The organization-wide Compliance Hotline continued in place through 2022, providing another mechanism to report and control waste, fraud, and abuse throughout our hospital District. All employees receive training on Corporate Compliance annually and at New Employee Orientation.
- Reported security incidents to date in 2022 are few, relatively minor in nature and were resolved by staff on duty at the time of occurrence.

### **2023 Work Plan**

- Monitor and evaluate performance and effectiveness of security personnel and hours worked. Reduce or increase coverage if indicated by review of activity logs and feedback from staff.
- Investigate and assess all security incidents. Formulate and implement corrective actions where indicated.

- Work with the IT department on the purchase and installation of additional security cameras in the hospital and new cameras for PMH clinics.

## ***Utilities Management Plan***

### Objective:

- This program describes how the organization will promote a safe, controlled environment of care through reliable utility systems with minimum failures. This objective remains valid and appropriate to standards.

### Scope:

- This plan continues to address the utility system management needs at the hospital and associated District facilities.

### Performance:

- An ongoing program for utility system inspection, testing, and preventive maintenance was conducted.
- The overall number of equipment and system failures to date indicates a slight decrease as compared to this time in 2021. Equipment repairs and replacements occurred throughout the year and include, but are not limited to:
  - Hospital chilled water system – chiller compressor controls repair
  - Hospital medical air system - compressor failure
  - Hospital HVAC boilers – natural gas valve replacement
  - Hospital domestic hot water system – replacement of circulating pump and mixing valves
  - Miscellaneous HVAC split system repairs at PMH and clinics
- The present condition and readiness of utility systems and equipment is considered satisfactory based on regular checks during inspections and a comprehensive, documented preventive maintenance program.

However, some systems have become obsolete and there is no support or parts available for them at this time. Examples include the hospital's digital environmental control system and the house wide nurse call system. The maintenance department continues work diligently to cripple these systems along while we wait in earnest for our replacement facility to be completed.

- Emergency power generators and systems were inspected and tested in accordance with current NFPA standards throughout the year, with no problems or malfunctions encountered.
- Utility systems preventive maintenance completion and testing statistics are included in monthly quality assurance reports.
- The utilities management equipment inventory was updated throughout the year to reflect additions to and deletions from the preventive maintenance program.

### Effectiveness:

- Utility management, preventive maintenance and repairs proved to be effective throughout the year in maintaining a safe and comfortable environment for patient care despite the occasional disruption of services due to unexpected equipment failures.

## 2023 Work Plan

Due to the age of the hospital's plant operations equipment and systems, the maintenance department will continue to take proactive measures to ensure reliability and to extend the useful life of critical systems and equipment.

Examples include:

- Enhanced focus on the timely performance of preventive maintenance activities.
- Survey of equipment and systems to identify key replacement parts and controls that are or will become obsolete.
- Procure spare parts as indicated by the equipment/systems survey.
- Perform proactive equipment and component replacement on critical hospital systems.

**Submitted by:** Steve Broussard, Director of Support Services

**Date:** December 5, 2022

# PIPER | SANDLER

## FINAL CLOSING MEMORANDUM

**DATE:** December 3, 2022

**TO:** Finance Team Members

**FROM:** Keith Kleven (612) 303-6508  
Todd Van Deventer (913) 345-3352  
Frank Kaul (612) 303-6608

**RE:** Up to \$80,500,000  
Prosser Public Hospital District, Benton County, Washington (the "District")  
Hospital Revenue Bond Anticipation Note, 2022 ("Revenue Note")

### CLOSING SCHEDULE

<b>Pre-Closing:</b>	Monday, December 5, 2022 @ 12:00 p.m. PST (via videoconference)
<b>Closing:</b>	Tuesday, December 6, 2022 (via email)

**Closing Memorandum  
For Closing on December 6, 2022**

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*Wire #1 from the District to U.S. Bank NA*

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On **December 5, 2022**, the District will wire \$17,628,101.00 to U.S. Bank, the Construction Account holder, representing the District's remaining equity contribution:

Amount: \$17,628,101.00  
Bank: U.S. Bank  
Routing #: 125000105  
Account #: 153599119606  
Bank Address: U.S. Bank  
Wire Transfer Department  
PO Box 64830  
St. Paul, MN 55164-0830

The above wired amount will be deposited into the Construction Account and Subaccounts, as follows:

Construction Account (Project Costs)	\$12,007,868.00
Construction Account – Costs of Issuance Subaccount	444,241.00
Construction Account – Interest During Construction Subaccount	<u>5,175,992.00</u>
<b>Total Construction Account</b>	<b>\$17,628,101.00</b>

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*Wire #2 from Western Alliance Business Trust to U.S. Bank NA*

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On **December 6, 2022**, Western Alliance Business Trust as Purchaser of the Revenue Note will wire \$50,001.00 to U.S. Bank, the Construction Account holder, representing the initial draw on the Revenue Note:

Amount: \$50,001.00  
Bank: U.S. Bank  
Routing #: 125000105  
Account #: 153599119606  
Bank Address: U.S. Bank  
Wire Transfer Department  
PO Box 64830  
St. Paul, MN 55164-0830

The above wired amount will be deposited into the Construction Account and used to pay costs of the Project.

**Closing Memorandum  
For Closing on December 6, 2022**

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*Initial Disposition of Funds*

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**Funds Available for Distribution:**

Wire #1 – District wire to U.S. Bank	\$17,628,101.00
Wire #2 – Western Alliance wire to U.S. Bank	50,001.00
<b>Total Initial Funds Available for Distribution</b>	<b>\$17,678,102.00</b>

**Uses of Funds:**

Deposit to Construction Account (Purchaser)	\$50,001.00
Deposit to Construction Account (District)	17,628,101.00
<b>Total Uses of Initial Funds</b>	<b>\$17,678,102.00</b>


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*Costs of Issuance*

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If you have not already done so, please send invoices for services rendered to David Rollins ([drollins@prosserhealth.org](mailto:drollins@prosserhealth.org)) and Gary Hicks ([gary@glhicks.com](mailto:gary@glhicks.com)).

On **December 6, 2022**, the District will send checks and/or wire transfers to pay for the cost of issuance invoice amounts as directed in the respective invoices.

 <b>Prosser</b> Memorial Health	Title: Medical Staff Recruitment
	Department Manual(s): Board of Commissioners
Owner: CEO	Review date: The last review date will be automatically printed on the last page of the policy when a printed version is required.
Implementation date: 3/1/2022	

## POLICY

It is recognized that in the competitive healthcare environment of today, Prosser Memorial Health (PMH) is involved in the recruitment of healthcare providers.

It is preferable, but rare today, that providers recruit providers to their own practice. In the case of new services, or in the event there is not an existing practice that is willing or able to accept a desired provider, then PMH must recruit in order to assure that the number of providers serving the PMH Service Area is adequate in number and type of providers (physicians and Advanced Practice Clinicians). Toward that end, the Medical Staff and the PMH staff will annually review our current complement of providers and submit suggestions on specific provider needs as part of the strategic planning process.

Recommendations for recruitment reflecting the input of the Medical Staff will be made to the Board. Administration will prepare annually a Provider Recruitment Plan based on this input which will determine recruiting targets for the year which will be expressed in the PMH Strategic Plan and PMH Medical Staff Model.

When the Board of Commissioners decides to recruit another provider to the community, it will be with the full knowledge of the Medical Staff. Every effort will be made to work with an existing practice in this recruitment process.


## PROCEDURE

Annually, the Medical Staff and Administration shall recommend to the Board a list of provider recruitment targets which, upon Board approval, shall serve as Administration's guideline for recruitment. If necessary, during the year, Administration shall recommend to the Board the addition to or deletion from the approved list of recruitment targets as circumstances within the community or in the makeup of the Medical Staff warrant.

Business Plans and budgets for the practices shall be established in advance, approved by the Board, and reviewed annually with the Board.

Administration will report to the Board on any exceptions to the above policy.



 <b>Prosser</b> Memorial Health	Title: Exclusive Designated Medical Specialty Services
	Department Manual(s): Board of Commissioners
Owner: CEO	Review date: The last review date will be automatically printed on the last page of the policy when a printed version is required.
Implementation date: 3/1/2022	

## POLICY

Prosser Memorial Health (PMH) does, on occasion, enter into agreements with individual physicians or designated physician groups or other healthcare providers to provide certain specialized medical services and administrative services at PMH.

Such contracts may result, or have resulted, in instances whereby the contracting provider group may be designated to provide such services at PMH to the exclusion of other medical or administrative providers.


The Board of Commissioners and Administration of PMH have taken into consideration the overall best interests of PMH in making such determination that these services will be exclusive to Anesthesiology, Radiology, Emergency Medicine, Pathology and Hospitalists.

## IMPLEMENTATION

For the purpose of setting forth criteria considered by PMH in making such decisions in the past, as well as establishing guidance for further decisions, the PMH Board of Commissioners believes it is in the best interest of PMH to establish the rationale by means of Board resolution.

The following criteria are to be considered in making a determination as to whether such services need to be provided on an exclusive basis:


1. The nature of the specialized service by an individual provider or group of providers will benefit PMH and its patients in:
  - a. Providing a sufficient volume of provider services to allow the providers involved to maintain and improve their expertise in the specialty areas;
  - b. Provide for consistency in training of technicians and others working with or for the providers in the department;
  - c. Allowing the providers involved to keep current on the cases in the field;
  - d. Creating a pool of medical knowledge which will be available to all members of the staff to utilize in the specialty area; and
  - e. Providing a sufficient number of cases so as to establish medical care data to allow for a complete review of the quality of care provided by the provider(s) involved.
2. The providing of central control over and simplified scheduling of the use of the services and facilities of the department involved.
3. The providing of efficient and effective management of the services of the department involved, particularly the coordination with other departments of PMH so as to minimize disruption and provide for effective utilization of PMH facilities.
4. The providing of full coverage of the department involved for the purpose of Emergency Room support services, weekend and holiday coverage, and coverage during the entire 24-hour day if the nature of that specialty so requires.

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Implementation date: 3/1/2022	

5. The providing for effective and efficient consultation with attending providers so as to maximize the use of their time.
6. The providing for supervision of the clinical and/or other services of employees in the department involved, as well as such continuing education for employees and staff as may be required.

Administration is authorized to negotiate for specialized medical and administrative services on an exclusive basis with one or more providers when such services are deemed to be in the best interest of PMH and patient care at PMH.

Any such contracts, which provide for the engaging of provider(s) on an exclusive basis to provide such services at PMH, shall be for a reasonable period of time and shall be entered into only after consultation has been obtained with leadership of the Medical Staff, particularly if such will mean that existing staff providers will be precluded from performing certain functions at PMH as a result of such exclusive contract, and shall be entered into only with the approval of the Board of Commissioners after receiving the recommendation of Administration of Prosser Memorial Health.

 <b>Prosser</b> Memorial Health	Title: Affiliation
	Department Manual(s): Board of Commissioners
Owner: CEO	Review date: The last review date will be automatically printed on the last page of the policy when a printed version is required.
Implementation date: 3/1/2022	

### **POLICY**

Prosser Memorial Health (PMH) will pursue opportunities with providers, hospitals, insurance companies, and other healthcare providers that assist in integrating the delivery of healthcare services in our area for the benefit of the patients that we serve.

### **RATIONALE**


The changing demands and pressures of healthcare delivery have forced all providers to reconsider their position relative to the networks, affiliations, and arrangements that will result in an efficient and highly integrated system in Washington.

Therefore, PMH should attempt to enhance the linkage between PMH and the appropriate area healthcare providers and payers so that we can improve the transition system for our patients and providers when services are needed outside the community.

Examples of programs that PMH may pursue with area organizations include:

- Enhanced communication and systems between PMH and tertiary hospitals and between the local medical staff and out-of-town specialists to facilitate access to services for our patients and the information flow between all providers.
- Assess managed care options and products, especially as they would allow PMH to assist area employers in reducing healthcare costs and direct area patients to PMH for services.
- Continue to explore integration models in cooperation with our Medical Staff that will prepare us to respond to system or market opportunities.

We should also continue to explore other opportunities as they may arise. This current strategy would not preclude further possibilities of a more formal affiliation arrangement should that become more appropriate or desirable for PMH.

 <b>Prosser</b> Memorial Health	Title: Issue Resolution Procedure – Exempt Staff
	Department Manual(s): Board of Commissioners
Owner: CEO	Review date: The last review date will be automatically printed on the last page of the policy when a printed version is required.
Implementation date: 3/1/2022	

## PURPOSE

It is the policy of Prosser Memorial Health (PMH) to provide all exempt employees who have completed their 90-day probationary period with a formal method by which they can voice their dissatisfaction when they believe they have been treated unjustly, their issues have not been resolved to their satisfaction, or they have concerns about decisions that have been made anywhere in the organization. PMH wants to provide clear and open channels for the expression of employee concerns and/or complaints, based upon a formal Issue Resolution Policy, which contains the “right of appeal,” and promotes sound employee relations. Since employees do, on occasion, differ from management on important issues, PMH will provide employees with a mechanism for appealing or requesting further clarification of a management decision to a higher level within the organization.

Upon initiating a complaint/concern, it is the employee's responsibility to pursue it through each step of the Issue Resolution Policy. Informal complaints may be and are encouraged to be presented to the employee's supervisor, and every effort will be made to resolve such concerns within two (2) working days.

Management is aware of the importance of an open-door policy and is committed to be available to listen to employees' concerns and problems. Management will attempt to meet with employees within one (1) working day of being notified of their concern and desire to meet. No employee will be reprimanded or harassed by anyone as a result of initiating a formal or informal complaint in accordance with the Issue Resolution Policy.

Employees should remember that the Issue Resolution Policy is not intended to be a substitute for normal problem solving between the employee and his or her immediate supervisor.

## RESPONSIBILITY

All department directors and managers will be responsible for the application and enforcement of this policy within their respective departments. The Director of Human Resources will be responsible for the PMH-wide uniformity of application and enforcement, in addition to interpretation of this policy as determined by Administration.


## DEFINITION OF “ISSUES”

An “ISSUE”, for purposes of this Policy, shall be defined as when an employee:

- Believes he/she has been treated unjustly;
- Has complaints/concerns that have not been resolved to his/her satisfaction; or
- Has concerns about decisions that have been made anywhere in the organization.

## ISSUE RESOLUTION POLICY

- To provide the employee with a fair and easily accessible means of having problems solved as quickly as possible.
- To alert management by systematic means to causes of employee dissatisfaction and to provide the mechanism of prompt and equitable response.
- To contribute positively toward the development of mutual respect and trust between Management and employees.

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**STEP 1: INFORMAL – Managerial**

An employee who has an issue should make every effort to discuss the problem informally and orally with his/her immediate manager/director who will make every effort to reach a satisfactory solution to the problem. Most issues are solved at this level. An employee with an issue shall discuss the matter with the employee's director/manager within five (5) days from the time of occurrence giving rise to the issue; or within five (5) days from the time that the employee involved first knew of or could have known of the facts giving rise to the issue. It is the responsibility of the director/manager to act on the problem and respond to the employee orally within two (2) working days after receiving the issue. However, if the employee is not satisfied with the decision of the manager/director, he/she may proceed to the next step.

**STEP 2: FORMAL – Department Director/Manager**

Within three (3) working days after Step 1 is completed, it is the employee's responsibility to document the issue, in writing, on the Issue Resolution Form provided by the Human Resources Department. The Human Resources Department is available to provide assistance to an employee in filling out the Issue Resolution Form, if requested. The employee is to keep a copy, give one to the department director/manager and send one to the Director of Human Resources. After the department director/manager has received the written complaint, he/she has three (3) working days to further investigate the facts, make a decision, and report the response in writing on the Employee Issue Resolution Report form to the employee in a private meeting.

The department director/manager will keep one copy of this written decision, give one copy to the employee, send one copy to the Director of Human Resources, and send one copy along with the employee complaint to the individual to whom the department director/manager reports.


The department director/manager should inform the employee if he/she is not satisfied with the outcome of the issue at this step, the employee has the right to pursue this matter further to Step 3 of the Issue Resolution Policy.

**STEP 3: FORMAL – (CNO, CMO, CFO)**

If the written issue is not settled in Step 2, the issue may be submitted to the appropriate PMH individual who has administrative responsibility for the department involved within three (3) days following the completion of Step 2. The CNO/CMO/CFO will review all aspects of the issue with the employee and discuss the situation with the department director/manager. The CNO/CMO/CFO will then give his/her decision in writing and meet with the employee to discuss the decision within five (5) working days after receipt of the issue. One copy will be given to the employee involved, one copy will be given to the department director/manager involved, and one copy will be sent to the Director of Human Resources. If the complaint is still not settled to the employee's satisfaction, he/she will be told of his/her right to proceed to Step 4 of the Issue Resolution Procedure.

**STEP 4: FORMAL – CEO**


If the written issue is not settled in Step 3, the issue may be submitted to the CEO of PMH within three (3) days following completion of Step 3. The CEO shall render a final decision on all issues. The CEO shall investigate the issue and may meet with the employee, department director/manager, and any witnesses who are able to provide information useful in making his/her decision. The CEO shall meet with the employee within five (5)

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working days after receipt of the issue. One copy of this decision will be given to the employee involved, one copy will be given to the department director/manager involved, and one copy will be sent to the Director of Human Resources. The decision of the CEO at this level is binding on all parties concerned.

#### MISCELLANEOUS ISSUE RESOLUTION PROCEDURE GUIDELINES

1. The formal issue Resolution Policy, as outlined, may be used by all full-time and part-time exempt employees. Probationary employees are not eligible.
2. The time limits established in the procedure shall be followed by all parties. If the time procedure is not followed by an employee, the issue shall be considered settled. If the time procedure is not followed by Management, the issue shall automatically advance to the next step. The time limits established in this procedure may be extended by mutual agreement in writing, provided however, that the extension request shall be put in writing by the party requesting the extension.
3. All information involved in the investigation of any issue and ultimate final decision, shall be held in confidence by everyone involved. It is to be remembered that issues are individual differences between an employee and Management and shall be kept in confidence during the steps of the Issue Resolution Policy.
4. When an issue is orally presented to a director/manager at the first level of the Issue Resolution Policy, the director/manager may maintain an anecdotal record of the issue for his/her file for future reference.
5. Working days in the above steps are defined as Monday through Friday. Saturdays, Sundays, and PMH recognized fixed holidays are excluded.
6. This policy is a workable channel of communication for the employee's benefit. There shall be no recrimination by department directors/managers or Administration as a result of the use of this procedure. Formal written complaints filed by employees and written decisions shall not be made part of the employee's official personnel record but will be maintained in a separate file in the Human Resources Department.
7. Directors/managers are reminded to keep employees informed of rules and policies so that when a problem does arise, the action taken by a director/manager shall be handled in a fair and consistent manner.
8. At each step of the "Formal" Resolution Process, it will be at the discretion of the employee, director/manager, CNO/CMO/CFO to determine the need, if any, to include a witness(es) for assistance in resolving any given issue.

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## FORMS AND DIRECTIONS FOR COMPLETION

There are four (4) forms that are used for the Issue Resolution Policy. All four forms are available in the Human Resources Department.

1. The “Issue Resolution Procedure” form is available in the Human Resources Department. This form is to be completed by the employee initiating an issue. The employee is to explain his/her complaint and what he/she thinks should be done to resolve it. The employee is to keep one copy for his/her record and give one copy to the department director/manager will send one copy to the Director of Human Resources.
2. The department director/manager Issue Resolution Procedure Report form is to be completed by the department director/manager in Step 2 of the Issue Resolution Procedure.
3. The “CNO/CMO/CFO Issue Resolution Procedure Report” form is to be completed by the appropriate CNO/CMO/CFO in Step 3 of the Issue Resolution Procedure. This form is identical to the Department Director/Manager form with the exception that the employee may request referral to the CEO as the final step in solving his/her issue. One copy of the completed form must be given to and discussed with the employee in a private meeting; one copy will be sent to the department director/manager and the Director of Human Resources.
4. The “CEO Issue Resolution Procedure Report” form is to be completed by the CEO in Step 4 of the Issue Resolution Procedure. This form is identical to the “CNO/CMO/CFO Issue Resolution Procedure Report” form, with the exception that this is the last step of the procedure. One copy of this form is to be given to and discussed with the employee. One copy will be sent to the appropriate CNO/CMO/CFO, department director/manager, and to the Director of Human Resources.



November 21, 2022

Craig Marks  
Chief Executive Officer  
Prosser Memorial Health

Dear Craig,

As the pandemic stretched into its third year, our members continued to face new challenges with unity of purpose, proving time and again that we are stronger together. Our collaborative response to COVID surges and capacity challenges continues to save lives. We are all so proud to work on your behalf to maintain access to health care services across our state. Over the past year, your association has supported you in several key areas including:

- Advocating state agency use of emergency funds for incentive payments to post-acute care facilities to help move difficult to discharge patients out of the hospital.
- Securing \$8 million to ensure the state's most distressed hospitals were able to maintain services.
- Increasing awareness of the capacity, staffing, and financial challenges facing hospitals through media outreach and briefings, resulting in hundreds of supportive media stories.
- Obtaining grant funding to continue the association's Safety and Quality support of members' efforts in opioid stewardship and maternal health.
- Improving access to accurate and timely data through streamlined reporting to the Washington State Department of Health's CHARS system and the launch of WSHA's Data Analytics Service Hub (DASH).
- Welcoming members to in-person events and maintaining virtual opportunities for inspiration and education through the DEI workshop, Leadership Summit, CEO Retreat, and Annual Meeting.
- Offering expanded services to members through Washington Hospital Services to include credentialing and survey prep consulting. Profits from WHS resulted in an annual average of over \$300,000 of contributions over the last three years to the Hospitals for a Healthy Future PAC.

In a short legislative session where we faced long political odds, our membership united to defeat tremendously harmful proposals and successfully championed support for critical funding in several areas. Perhaps our greatest achievement during the last legislative session was the defeat of rigid hospital staffing laws, including mandated staff to patient ratios. Our collective advocacy efforts were unprecedented, from a statewide media campaign to hundreds of legislative contacts and compelling testimony. Joining our collective voices together made a difference and preserved access to health care across the state.

A few additional highlights from the 2022 legislative session include:

- Securing investments of nearly \$50 million in health care workforce development, including nursing program expansion and loan repayment for nurse educators.
- Funding of nearly \$550 million to address barriers to hospital discharge and ensure that patients who are ready to leave the hospital have an appropriate place to receive long-term services.
- Increasing access to behavioral health care through the establishment of Medicaid coverage for partial hospitalization and intensive outpatient treatment programs for children and youth with behavioral health conditions.
- Allowing nurses to distribute opioid overdose reversal medication in the emergency department.
- Clarifying that law enforcement officers are not precluded from carrying out their community caretaking role in state standards for use of force.

There is no better forum than the Washington State Hospital Association to move our collective work forward, and we understand that the financial return on your investment in the association is also important.



As one example, your benefit from the Hospital Safety Net Assessment over the last year was \$258,167.

In recognition of the financial distress our members are facing, we are capping application of our annual dues formula at 2% from its normal 5% cap.

The relationship between the association and hospital executives is at the foundation of our success. All the WSHA staff and I are so grateful for the time you spend engaging with us. We look forward to another year working on your behalf.

Sincerely,

A handwritten signature in black ink that reads "Cassie Sauer". The signature is written in a cursive, flowing style.

Cassie Sauer  
President & CEO  
Washington State Hospital Association

## Craig Marks

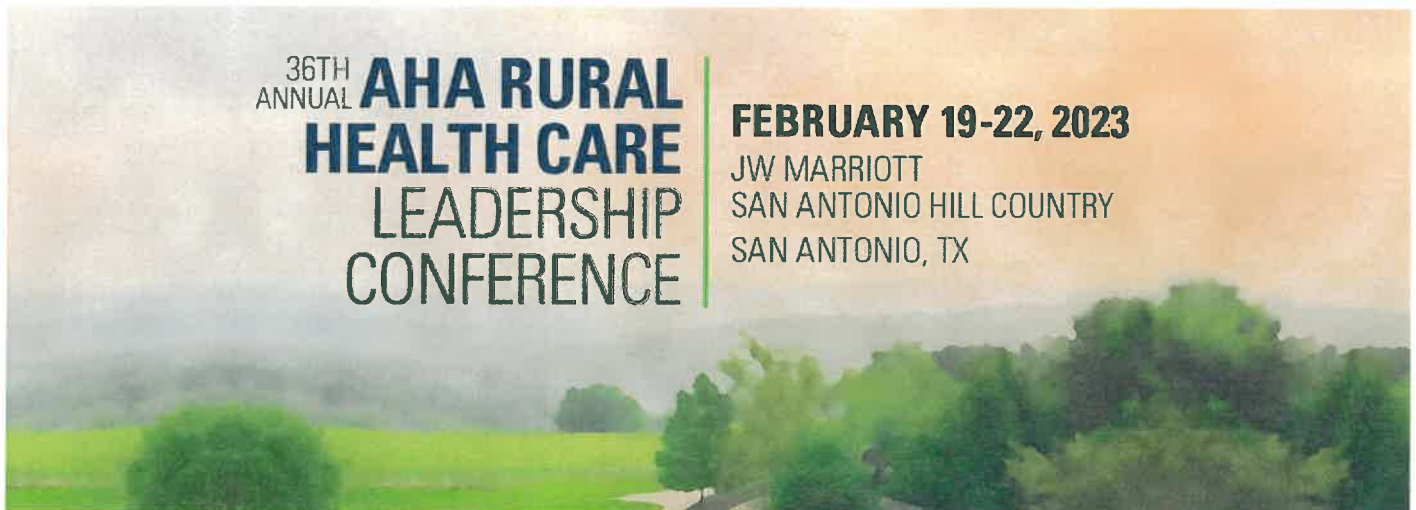
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**From:** Sarah Reusch from the American Hospital Association <marketing-noreply@aha.org>  
**Sent:** Thursday, December 1, 2022 7:31 AM  
**To:** Craig Marks  
**Subject:** 9 reasons to register for #AHARuralHealth...

### External Email: Please Proceed with Caution

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To view this email as a web page, [click here](#)



## EARLY BIRD DEADLINE NEXT WEEK

### Savings on Registration Ends December 9, 2022

Join the American Hospital Association for the **2023 AHA Rural Health Care Leadership Conference**, February 19-22, in San Antonio.

The conference brings together top practitioners and thinkers to share strategies and resources to tackle operational, financial, and environmental rural health challenges while presenting innovative approaches to transform care delivery and business practices.

Join leaders from rural hospitals and health care systems with a strong presence in rural communities, rural health clinics, associations, and community health organizations for two and a half days of education, networking, and collaboration. Previous participants have included administrators, trustees, physician executives, nursing administrators, public health officials, and community leaders.

RESERVE YOUR SPOT >>

## NINE REASONS TO ATTEND

Our #AHARuralHealth attendees can expect to:

- Gain practical strategies during our **pre-conference workshop** highlighting navigating threats, community partnerships and mental well-being.
- Be inspired by our thought-provoking **plenary sessions** that drive the pursuit of innovation and leadership excellence.
- Learn from lessons of your peers during strategy-focused Concurrent sessions.
- Discuss your experiences, challenges and successes during our Hot Topic Conversation Starters.
- Share your learnings with your team or better yet - **register your team!** Register four attendees and the fifth attends for free.
- Connect with **Sponsors** providing solutions specific to rural health.
- Chat with fellow attendees, share insights and 'ah-ha' moments during our dedicated **governance programming**.
- Grab key takeaways on rural health advocacy during the **Washington Update**.
- Use our conference hashtag **#AHARuralHealth** to join in the conversation on social media.

## FEATURED PLENARIES



**The Power of Leaving Your Comfort Zone**  
**Michael Easter**, author of *The Comfort Crisis: Embrace Discomfort to Reclaim Your Wild, Happy Healthy Self*



**Leading Through Uncertainty**  
**Nadja West**, *First African American Army Surgeon General and Former Commanding General, U.S. Army Medical Command*



**Powering Through the Super Storm: The Rural Governance Challenge**  
**Jamie Orlikoff**, *President, Orlikoff & Associates, Inc., National Advisor on Governance and Leadership to the American Hospital Association, and health care governance expert*



**Washington Update**  
**Lisa Kidder Hrobsky**, *Senior Vice President, Legislative and Political Affairs, American Hospital Association*, **Travis Robey**, *Vice President, Political Affairs, American Hospital Association*, and **Shannon Wu, PhD**, *Senior Associate Director of Payment Policy, American Hospital Association*

[VIEW SCHEDULE >>](#)



## REGISTRATION

**Early bird savings end December 9, 2022.**

**Bring your team! Register four and the fifth attends for free!**

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## SPECIAL OFFER FOR AHA MEMBERS

**Interested in receiving complimentary registration?**

The **Hosted Buyer Forum** offers a private showcase for hospital and health system leaders interested in connecting with solution providers addressing key hospital issues. Approved applicants are given