

Phone: 907-772-4291 Fax: 907-772-3085

BOARD MEETING Agenda

<u>DATE</u>: Thursday, August 27th, 2020

TIME: 5:00 p.m. LOCATION: Zoom

| I. | CALL TO ORDER | <u>Lead</u> Chair | Handout N/A |
|------|---|----------------------|----------------|
| II. | APPROVAL OF THE AGENDA | Chair | in packet |
| III. | APPROVAL OF BOARD MINUTES – June 25 th , 2020; July 30 th , 2020; August 7 th , 2020 | Chair | in packet |
| IV. | VISITOR COMMENTS | Chair | N/A |
| V. | BOARD MEMBER COMMENTS | Chair | N/A |
| VI. | REPORTS | | |
| | A. Quality & Infection Prevention Action required: Informational only | L. Bacom | at meeting |
| | B. Executive Summary Action required: Informational only | P. Hofstetter | in packet |
| | C. Financial Action required: Informational only | R. Tejera | in packet |
| | | | |

VII. UNFINISHED BUSINESS

VIII. NEW BUSINESS

A. CARES ACT FUNDING P. Hofstetter in packet

Action required: Approval

Motion: Petersburg Medical Center's Board of Directors approves Petersburg Medical Center to modify the original request for Petersburg Borough CARES Act funds from \$1,004,638.50 to \$608,345.25. The purpose of these funds is to cover additional support of personnel, technology and equipment to assist in the isolation, tracking, detection and treatment of SARS-CoV-2 during the COVID pandemic.

- B. EXECUTIVE COMMITTEE DISCUSSION P. Hofstetter at meeting Action required: Informational only
- IX. EXECUTIVE SESSION

 By motion, the Board will enter into Executive Session for a legal update.
- X. NEXT MEETING
- XI. ADJOURNMENT

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Meeting: Medical Center Board Meeting Date: June 25th, 2020 Time: 5:00 p.m.

Board Members Present: Joe Stratman, Cindi Lagoudakis, George Doyle, Marlene Cushing, Jerod Cook, Kathi Riemer, Jim Roberts (all members attended via Zoom)

Board Members Absent: None

- I. <u>CALL TO ORDER</u>: Member Cook called the meeting to order at 5:00 p.m.
- II. <u>APPROVAL OF THE AGENDA</u>: Member Cushing made a motion to approve the agenda as presented. Member Lagoudakis seconded. Motion passed unanimously.
- III. <u>APPROVAL OF BOARD MINUTES</u>: Member Stratman made a motion to approve the minutes as presented from the board meeting on May 28th, 2020. Motion seconded by Member Cushing. Motion passed unanimously.
- IV. VISITORS COMMENTS: None
- V. **BOARD MEMBER COMMENTS:** None

VI. REPORTS:

A. Quality & Infection Prevention. L. Bacom provided a verbal report. She noted that she continues to work with the Borough PIO and PMC's public relations to update websites to have consistent messaging. A lot of information can be found at Psgcovidinfo.net and the PMC website. She stated that airport screening is in place. She is working to provide more detailed reporting, such as the number of non-residents tested and the number of tests conducted at the canneries. KFSK Live is held weekly on Fridays. She added that she continues to encourage mitigation efforts in the community. B. Executive Summary. P. Hofstetter highlighted some key points noted in his written report (see copy). Additionally, he noted that there has been a focus on asymptomatic testing at the airport as mandated by the State. He commended the team for getting airport testing in place. A MOA with the Borough to provide testing is in place. Testing supplies in the facility have increased which has led to the ability to perform more inhouse testing. He stated that a reduction in volumes continues with the exception of

Home Health which has seen an increase in the census. The hospital census remains low and continue struggling to increase services. He stated that PMC was fortunate to receive financial assistance with federal funds. The budget has been drafted. He had a conversation with Sen. Murkowski regarding trends in rural healthcare and asked her to support telehealth. P. Hofstetter then discussed changes in staffing.

C. Financial. R. Tejera highlighted some areas on the statement of cash flow (see copy). She noted a net change in cash of over \$8.5 million which is not a surprise considering the CARES Act funding received and the loan from the Small Business Administration. May ended with over \$16 million in operating and investment cash which equals 342 days cash on hand. She added that volumes and revenue are down. She also noted that expenses are a little higher but have been fairly level.

VII. <u>UNFINISHED BUSINESS</u>

VIII. NEW BUSINESS

- A. Budget Presentation. R. Tejera presented the budget for fiscal year 2021 (see copy).
- **B.** Operating Budget. R. Tejera reviewed the operating budget for fiscal year 2021 as part of her budget presentation. Member Riemer made a motion to approve the Operating Budget for FY21 as presented. Motion seconded by Member Stratman. Motion passed unanimously.
- C. Capital Budget. R. Tejera reviewed the capital budget for fiscal year 2021as part of her budget presentation. Member Cushing made a motion to approve the Capital Budget for FY21 as presented. Motion seconded by Member Riemer. Motion passed unanimously.
- **D.** Quarterly Budget Review. Member Cushing made a motion to approve the establishment of a quarterly process to review and, if necessary, to modify, the operating and capital budgets for FY21 due to ongoing impacts of the COVID-19 pandemic. Motion seconded by Member Lagoudakis. Discussion followed. It was noted that any changes in the budget would go to the Resource Committee and would then be presented to the full board. Motion passed unanimously.
- **IX. EXECUTIVE SESSION.** Member Stratman made a motion to enter Executive Session for a legal update. Motion seconded by Member Lagoudakis. Motion passed unanimously. Board entered Executive Session at 6:01 pm. Member Roberts made a motion to come out of Executive Session. Motion seconded by Member Doyle. The Board came out of Executive Session at 6:31 p.m.
- X. <u>NEXT MEETING</u>: Board training with the Foraker Group was scheduled for Thursday, July 23rd, at 5:00 via Zoom. The next regularly scheduled meeting was set for Thursday, July 30th, 2020 at 5:00 p.m. via Zoom.
- XI. <u>ADJOURNMENT</u>: Member Lagoudakis made a motion to adjourn. Motion was seconded by Member Riemer. Motion passed unanimously. The meeting adjourned at 6:36 p.m.

| Respectfully submitted, | |
|----------------------------------|--|
| | |
| Marlene Cushing, Board Secretary | |

FO Box 589 Fetersburg, Alaska 99833 Fhone: (907) 772-4291 | Fax: (907) 772-3085



Meeting: Medical Center Board Meeting Date: July 30th, 2020 Time: 5:00 p.m.

<u>Board Members Present</u>: Joe Stratman, Cindi Lagoudakis, George Doyle, Marlene Cushing, Jerod Cook, Kathi Riemer, Jim Roberts (all members attended via Zoom)

Board Members Absent: None

- I. <u>CALL TO ORDER</u>: Member Cook called the meeting to order at 5:00 p.m.
- II. <u>APPROVAL OF THE AGENDA</u>: Member Doyle made a motion to add Discussion of legal matter under Executive Session. Motion seconded by Member Roberts. Motion passed unanimously. Member Cushing made a motion to approve the agenda as amended. Member Doyle seconded. Motion passed unanimously.
- III. VISITORS COMMENTS: None
- IV. <u>BOARD MEMBER COMMENTS</u>: Member Lagoudakis expressed sympathies and appreciation to staff because it has been a tough week.

V. REPORTS:

- A. Quality & Infection Prevention. No report available.
- **B.** Executive Summary. P. Hofstetter highlighted some key points noted in his written report (see copy). Additionally, there was discussion regarding testing capacity and turnaround times.
- C. Financial. R. Tejera reported that the preliminary audit starts next week and then it will be finalized the second week of September. The cost report will also be completed in September. COVID-19 continues to be the main factor impacting finances. June saw an increase in services except for long term care. The gross patient revenue increased by 17% from May but remains below pre-COVID levels so revenue is still down. Fiscal year 2020 ended in gross revenue of just over 20 million which was 1% over budget. The net revenue was around 17 million which was 2% over budget. In June the operating expenses were 1.6 million. FEMA funds and grants continue to be pursued. She then reviewed the balance sheet and the statement of cash flow (see copies).

VI. <u>UNFINISHED BUSINESS</u>

VII. <u>NEW BUSINESS</u>

A. Billing discussion. Member Lagoudakis explained concerns she received from a patient regarding the billing process.

- VIII. EXECUTIVE SESSION. Member Lagoudakis made a motion to enter Executive Session for a legal matter and the CEO Evaluation. Motion seconded by Member Riemer. Motion passed unanimously. Board entered Executive Session at 5:33 p.m. Member Riemer made a motion to come out of Executive Session. Motion seconded by Member Roberts. The Board came out of Executive Session at 6:41 p.m. Member Cushing made a motion that in recognition of exemplary performance as CEO the Petersburg Medical Center's Board of Directors authorizes to renegotiate the CEO's contract including terms and extension. Motion seconded by Member Roberts. Motion passed unanimously.
- IX. <u>NEXT MEETING</u>: The next regularly scheduled meeting was set for Thursday, August 27th, 2020 at 5:00 p.m. via Zoom.
- X. <u>ADJOURNMENT</u>: Member Riemer made a motion to adjourn. Motion was seconded by Member Doyle. Motion passed unanimously. The meeting adjourned at 6:48 p.m.

Respectfully submitted,

Marlene Cushing, Board Secretary

FV Box 589 Petersburg, Alaska 99833 Phone: (907) 772-4291 | Fax: (907) 772-3085



Meeting: Medical Center Board Meeting

Date: August 7th, 2020 Time: 12:00 p.m.

Board Members Present: Joe Stratman, Cindi Lagoudakis, George Doyle, Marlene Cushing, Jerod Cook, Kathi Riemer, Jim Roberts (all members attended via Zoom)

Board Members Absent: None

- I. <u>CALL TO ORDER</u>: Member Cook called the meeting to order at 12:00 p.m.
- II. <u>APPROVAL OF THE AGENDA</u>: Member Roberts made a motion to approve the agenda as presented. Motion seconded by Member Lagoudakis. Motion passed unanimously.
- CARES ACT FUNDING. Member Cushing made a motion that Petersburg Medical Center's Board of Directors approves Petersburg Medical Center to apply for Petersburg Borough CARES Act funds to cover additional support of personnel, technology and equipment to assist in the isolation, tracking, detection and treatment of SARS-CoV-2 during the COVID pandemic in the amount of \$1,004,638.50. Motion seconded by Member Stratman. Discussion followed. P. Hofstetter explained the expenditures between March 2020 and July 28, 2020 as well as expected expenditures for July 29, 2020 through December 2020 for a total request of funding in the amount of \$1,004,638.50. He noted that PMC is applying for almost \$800,000 in grants. If grant funding is received, then some of the Borough funding may not be required. Additionally, R. Tejera provided an explanation of FEMA reimbursement. Motion passed unanimously.
- IV. <u>ADJOURNMENT</u>: Member Roberts made a motion to adjourn. Motion was seconded by Member Lagoudakis. Motion passed unanimously. The meeting adjourned at 12:16 p.m.

| Respectfully submi | ittou, |
|--------------------|---------|
| Marlene Cushing, l | D 1 C 1 |



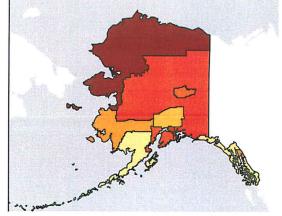
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CEO Report:

The following updates are not a comprehensive summary of activities due to the activation of the Emergency Preparedness Incident Command Center from the COVID-19 response since March 11th.

Petersburg Medical Center is now in the 5th month of Incident Command System since it was activated under the COVID pandemic on March 11th. We are reviewing our response, policies, and processes to strategize for long term planning. This operational period of SARS-COV-2 in Alaska has seen an increase of cases in AK residents and clusters are forming in various communities. Petersburg COVID cases remain low at this time and we hope to continue seeing this trend. Petersburg Medical Center continues to be involved the Borough Incident Command as a resource to assist with the school in addition to the airport and seafood worker asymptomatic testing. The clusters around the state strongly suggest the need for localized community response plans. PMC has been working with the Borough to assist in a plan for community review. Information changes as more is learned however, the mitigation factors are relatively unchanged: Physical distancing, temperature screening (and questionnaire), hand washing / hygiene, masking, and testing. Indoor spaces appear to have a stronger component to transmission than outdoor. Physical distance and masking make a big impact to prevent transmission. In addition to mitigation strategies the goal is to identify, isolate and track the virus within the community to eliminate spread. Below is a current visual (August 21st) that shows the 7-day average rate of COVID within Alaska.

Average Daily Case Rate in Last 7 Days



*Taken from State of Alaska Coronavirus Hub

Petersburg has 0 active cases currently at the time of this

writing. The recovered totals to-date are 3 community residents, 5 visitors from out of state, 2 seafood cannery workers and one resident who acquired and died out-of-state. PMC has implemented a number of



incident directive policies either required or recommended by the Centers for Disease Control and/or Centers for Medicare Medicaid Services.

The most recent is a policy for staff who will be traveling outside of the state of Alaska must follow the Mandate 10 protocol upon return. This essentially requires a test at the airport and a quarantine of 7 days before returning to work (provided tests are negative). In the facility the constant changes and directives continue to impose stress on staff.

Facility:



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<u>New Facility Planning</u>: The master plan was finalized in February and further developments have been on hold due to COVID. There are no new updates to this since last month's report. It is important to move this project forward and evaluate PMC's next steps for phase 2: Site selection, environmental study, space programming refinement and full architectural designs. As reported last month, I have reached out to potential funding programs through the USDA and Denali Commission as well as advocating support from legislature. New facility planning that incorporates a facility of post COVID access to care and economic development should be considered during this phase.

Existing Facility update: USP 800: the construction phase of the project has been mostly completed and commissioned for use.

Community Education/Outreach:

PMC serves on the Borough Incident Command under Operations Section and has participated in numerous communications to the community and Assembly throughout the pandemic. PMC continues to participate in the weekly informative live KFSK radio session for COVID updates. The PMC incident command has a briefing Monday, Wednesday and Friday that includes the Borough Incident Command, school, and public health.

- August 20th a small representative group from Borough and PMC emergency operations met with Dr. Zink (Medical Director) and Dr. McLaughlin (Epidemiology) with the State of Alaska to discuss the community response plan.
- August 19th teleconference with Commissioner Crum to update PMC's response and needs during the COVID response.
- August 18th, combined Zoom and small (4) in-person (masked / physical distanced) luncheon with the physicians.
- The wellness committee is working on providing opportunities for the community and hosting the Rainforest Run this September.
- August 17th PMC report to the Borough Assembly Meeting.

Integrated Healthcare:

The Premera AIMS grant, (despite COVID) has been moving the integrated care program forward. Our behavioral health team includes our clinic lead Dr. Hess, providers, behavioral health lead (Pat Sessa) and a Nurse Practitioner (Tina Pleasants). As reported last month, we are looking forward to continuing the PMC integration of mental health and specialty access through our clinic. This is a model of care with teams in the clinic that uses





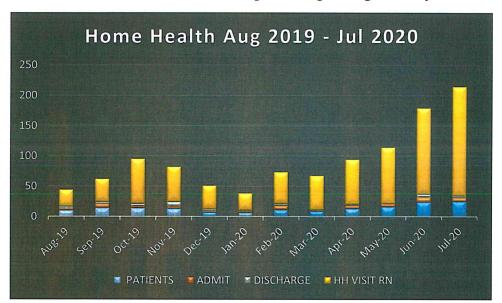
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case management and processes to improve gaps in care and access to care.

Nutrition therapy, diabetes education, audiology and management has increased through the clinic outpatient services. Chiropractor services have returned in the clinic while PMC maintains a Green or Yellow color code COVID status. The PMC wellness committee meets regularly to focus on employees and community outreach. The group provided a Healthy Community Series (runs, stress relief, gratitude challenge, etc.) and employee wellness challenges throughout COVID.

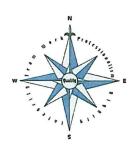
Workforce development:

PMC new Laboratory manager started August 10th, Violet Shimek. Home Health hired new manager Kirsten Rioux-Testoni and will transition from PMC travelling RN in home health to management in October. We are excited to see this department grow significantly.



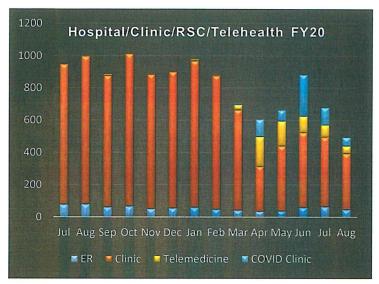
<u>Finance</u>: Rocio attached the update of the first month and the year for financials FY21. Overall, the COVID response continues to see a significant drop in revenue due to the reductions and restrictions imposed for pandemic response. The past 7 months PMC has spent considerable resources in not only increasing its' preparation for surge, infection control and testing but to safely see patients in the facility. Grant applications for various programs have met with mixed results. The most recent is a denial through the Community Foundation grant of \$800K towards the community efforts and response.

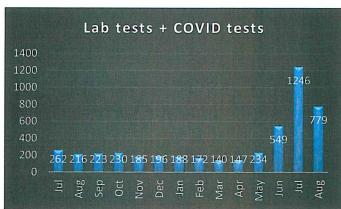
July totals we can see clinic volumes decreased about 45% in-person encounters; however, ER and inpatient census are back to "normal." There is a large increase in respiratory clinic, asymptomatic testing and telehealth visits that show 50% more volume of the facility overall compared to July 2019.



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PETERSBURG MEDICAL CENTER

FINANCIAL REPORTING PACKAGE

FISCAL YEAR 2021

For the one month ended July 31, 2020

| % Variance 31.8% -0.1% -32.7% -2.8% | -21.4% n/a -136.7% -11.2% -64.6% | -18.3% | 30.2% -100.0% n/a 1742.3% 987.3% | 28.9% | -24.0% -40.6% -10.1% 55.5% | -1.6% -60.5% | 76.3% -6.6% | -15.3% | -3.8% | 11.3% | 662.7% | 549.2% 68.2% n/a 642.4% 573.4% | 1682.8% |
|--|---|---------------------|---|-------------------------|--|---|--------------------|---------------------------------------|----------------------------------|---|-------------------------------|--|--------------------------------------|
| Prior YTD \$244,167 1,067,306 379,150 1,690,623 | 322,404 0 (91,879) 85,530 316,055 | 1,374,568 | 53,595 10,527 0 3,633 67,755 | 1,442,323 | 750,995 64,947 284,530 116,534 | 73,048 32,196 | 13,116 11,660 | 45,646 | 57,090 | 11,370 | (35,862) | 16,811 (629) 0 33 16,215 | (\$19,647) |
| % Variance 60.6% 46.8% -21.3% 31.4% | -80.2% n/a -381.5% -122.3% -94.8% | 14.2% | 12.0% -100.0% 0.0% 4846.9% 8.8% | 12.0% | -12.9% -7.5% 3.3% 47.8% | 24.3% -22.3% | 83.5% -6.8% | -15.0% 86.4% | 3.2% | 36.7% | 1029.3% | 1646.2% 3.8% n/a 0.0% 1707.1% | 1200.6% |
| \$ Variance \$121,485 340,026 (68,966) 392,545 | (174,172) 0 (26,715) (52,322) (253,209) | 139,336 | 7,482 (13,750) 0 65,579 59,311 | 198,647 | (106,213) (6,372) 10,813 47,434 | 23,841 (9,408) | 15,686 (793) | (6,873) 9,553 | 1,823 | 5,848 (14,726) | 183,921 | 102,889 8 0 245 103,142 | \$287,063 |
| YTD Budget \$200,385 725,973 324,049 1,250,407 | 217,195 0 7,002 42,792 266,989 | 983,418 | 62,276 13,750 600,000 1,353 677,379 | 1,660,797 | 824,721 84,958 324,202 99,247 | 98,089 42,282 | 18,788 11,633 | 45,740 11,060 | 57,519 8,756 | 15,934 | 17,868 | 6,250 (208) 0 0 0 0 6,042 | \$23,910 |
| YTD Actual \$321,870 1,065,999 255,083 1,642,952 | 391,367 0 33,717 95,114 520,198 | 1,122,754 | 69,758 0 600,000 66,932 736,690 | 1,859,444 | 930,934 91,330 313,389 51,813 | 74,248 51,690 | 3,102 12,426 | 52,613 1,507 | 55,696 8,821 | 10,086 | 201,789 | 109,139 (200) 0 0 245 109,184 | \$310,973 |
| | | | | | | | | | | | | | |
| Gross Patient Revenue: Inpatient Oulpatient Long-term Care Total gross patient revenue | Deductions from Revenue: Contractual adjustments Prior year settlements Bad debt expense Charity and other deductions Total deductions from revenue | Net patient revenue | Other Revenue Inkind Service - PERS/USAC Grant revenue Federal & State Relief Other revenue Total other operating revenue | Total operating revenue | Expenses: Salaries and wages Contract labor Employee benefits Supplies | Purchased services Repairs and maintenance | Rentals and leases | Utilities Training and travel | Depreciation Insurance | Other operating expense Total expenses | Income (loss) from operations | Nonoperating Gains(Losses): Investment income Interest expense Gain (loss) on disposal of assets Other non-operating revenue Net nonoperating gains (losses) | Change in Net Position (Bottom Line) |
| 9=01 | ν. φ. γ. φ. φ. Ο | 10. | £ 52 £ 5 £ 5 | 9. | Expenses: 17. Salaries an 18. Contract lal 19. Employee t 20. Supplies | 22. | 24. | 26. | 27. 28. | 30. | 31. | 32. IT | 37. |
| 9=01 | Q | | 0 0 0 | | Expenses: 17. Salaries an 18. Contract lal 19. Employee t 20. Supplies | 22. | 24. | 26. | 27. 28. | | | 8 = = 00 | |
| 9=01 | ν. φ. γ. φ. φ. Ο | 10. | £ 52 £ 5 £ 5 | 9. | Expenses: -12.9% 17. Salaries an -7.5% 18. Contract la 3.3% 19. Employee t 47.8% 20. Supplies | 24.3% 21. -22.3% 22. | -6.8% 24. | -15.0% 25. 86.4% 26. | 3.2% 27. -0.7% 28. | 30. | 31. | 32. IT | 37. |
| % Variance 6 60.6% 1. II 6 -21.3% 2. C 6 31.4% 4. | (174,172) -80.2% 5. 0 n/a 6. (26,715) -381.5% 7. (52,322) -122.3% 8. -34.8% 9. | 14.2% 10. | 12.0% 11. II. II. II. II. II. II. II. II. II. | 12.0% 16. | Expenses: (106,213) -12.9% 17. Salaries an (6,372) -7.5% 18. Contract lai 10,813 3.3% 19. Employee t 47,834 47,8% 20. Supplies | 24.3% 21. -22.3% 22. | (793) -6.8% 24. | (6,8/3) -15.0% 25. 9,553 86.4% 26. | 1,823 3.2% 27. (65) -0.7% 28. | 36.7% 29. | 1029.3% 31. | No 1646.2% 32. Ir 3.8% 33. Ir n/a 34. G 0.0% 35. C | 1200.6% 37. |

PETERSBURG MEDICAL CENTER Key Volume Indicators

For the one month ended July 31, 2020

| | Variance | % | i | 81.3% | -15.1% | 2.2% | 81.3% | -15.1% | 2.2% | 2.2% | | -35.7% | -35.7% | | -17.9% | -14.7% | -100.0% | -32.4% | -58.2% | 124.2% | -39.2% |
|---------------|----------|--------|--------------------|---------------------------|--------------------------|----------------------|-----------------------------------|----------------------------------|------------------------------|-------------------------|----------------|---------------|---|----------------|-----------------------|----------------------|--------------------------|----------------------|-------------------|--------------------|---------------|
| w | Prior | N C | 9 | 16 | 73 | 88 | 0.5 | 2.4 | 2.9 | 23.9% | | 434 | 93.3% | | 78 | 184 | 2,207 | 1,123 | 79 | 120 | 1,002 |
| Year-To-Date | | % | 3 | 81.3% | 6.9% | 23.0% | 81.3% | 6.9% | 23.0% | 23.0% | | -18.2% | -18.2% | | -16.9% | 42.7% | -100.0% | 149.7% | -44.1% | 79.3% | 28.2% |
| | Variance | Amount | Ş | 13 | 4 | 17 | 0.4 | 0.1 | 0.5 | 4.6% | į | (62) | (o) (0) | | (13) | 47 | (1,530) | 455 | (26) | 119 | 134 |
| | | Budget | 3 | 16 | 28 | 74 | 0.5 | 1.9 | 2.4 | 19.9% | Š | 341 | 73.3% | | 77 | 110 | 1,530 | 304 | 59 | 150 | 475 |
| | | Actual | ć | 67. | 62 | 91 | 0.9 | 2.0 | 2.9 | 24.5% | 0 | 6/2 | %0.09 | | 99 | 157 | | 759 | 33 | 269 | 609 |
| | | | Hospital Inpatient | Patient Days - Acute Care | Patient Days - Swing Bed | Patient Days - Total | Average Daily Census - Acute Care | Average Daily Census - Swing Bed | Average Daily Census - Total | Percentage of Occupancy | Long Term Care | Resident Days | Average Daily Cerbas Percentage of Occupancy | Other Services | Emergency Room Visits | Radiology Procedures | Lab Tests (excluding QC) | Rehab Services Units | OP Treatment Room | Home Health Visits | Clinic Visits |
| i | | | c | N, | რ | 4. | ć, | 9 | 7. | æί | ç | 5 5 | . 8 | | 22. | 26. | 27. | 28. | 29. | 30 | 31. |
| | | % | 700 700 | 01.5% | 6.9% | 23.0% | 81.3% | %6.9 | 23.0% | 23.0% | 900 | 18.2% | -18.2% | | -16.9% | 42.7% | -100.0% | 149.7% | -44.1% | 79.3% | 28.2% |
| Nonth | Variance | Amount | ç | 2 | 4 | 17 | 0.4 | 0.1 | 0.5 | 4.6% | (69) | (97) | (0) | | (13) | 47 | (1,530) | 455 | (26) | 119 | 134 |
| Current Month | | Budget | 4 | 2 1 | 28 | 74 | 0.5 | 1.9 | 2.4 | 19.9% | 20 | - 45 | 73.3% | | 77 | 110 | 1,530 | 304 | . 29 | 150 | 475 |
| | 3 | Actual | ç | 87 | 62 | 91 | 6.0 | 2.0 | 2.9 | 24.5% | 020 | 0.6 | 80.09 | | 64 | 157 | | 759 | 33 | 269 | 609 |

PETERSBURG MEDICAL CENTER Key Operational Indicators

For the one month ended July 31, 2020

| | Prior | YTD % | -24.9% | -14.4% | 137.8% | 536.5% | 1272.7% | 74.1% | | |
|---------------|----------|---------------|--|--|----------------------------------|------------------|--------------|---|-------------|--|
| | Prior | YTD \$ | 19.1% | 5.1% | -5.4% | -2.5% | -1.3% | 179.9 | | |
| o-Date | 90 | % | -37.1% | -69.2% | -266.5% | %2'806 | 1001.2% | | | |
| Year-To-Date | Variance | Amount | -6.5% | -2.4% | -1.5% | %8.6 | 14.4% | | | |
| | | Budget | 17.4% | 3.4% | %9.0 | 1.1% | 1.4% | | | |
| | | <u>Actual</u> | 23.8% | 2.8% | 2.1% | 10.9% | 15.8% | 313.2 | 44.4 | |
| | | | Contractual Adj. as a % of Gross Revenue | Charity/Other Ded. as a % of Gross Revenue | Bad Debt as a % of Gross Revenue | Operating Margin | Total Margin | Days Cash on Hand (Including Investments) | Days in A/R | |
| 1 | | | ÷ | Ę | 12 | 6. | 4. | 15. | 16. | |
| | g | % | -37.1% | -69.2% | -266.5% | %2'806 | 1001.2% | | | |
| Month | Variance | Amount | -6.5% | -2.4% | -1.5% | 8.6 | 14.4% | | | |
| Current Month | | Budget | 17.4% | 3.4% | %9.0 | 1.1% | 1.4% | | | |
| | | <u>Actual</u> | 23.8% | 2.8% | 2.1% | 10.9% | 15.8% | | | |

Future months to include FTE's and Salary related indicators.

PETERSBURG MEDICAL CENTER Balance Sheet July 31, 2020

| ASSETS | | | | | LIABILITIES & FUND BALANCE | | | | |
|--|--------------|--------------|--------------|--------------|--|--------------|--------------|--------------|--------------|
| | July 2020 | June 2020 | June 2020 | July 2019 | | July 2020 | June 2020 | June 2020 | July 2019 |
| Current Assets: | | | | | Current Liabilities: | | | | |
| | \$6,108,921 | \$6,977,720 | \$6,977,720 | \$2,352,398 | Accounts payable | \$657,668 | \$703,218 | \$703,218 | \$532,137 |
| Cash - insurance advances | 3,648,600 | 3,648,600 | 3,648,600 | 0 | 23. Accrued payroll | 165,415 | 473,575 | 473,575 | 434,010 |
| _ | 2,599,136 | 2,597,099 | 2,597,099 | 2,567,410 | 24. Accrued PTO and extended sick | 897,807 | 880,050 | 880,050 | 724,090 |
| 4. Total cash | 12,356,657 | 13,223,419 | 13,223,419 | 4,919,808 | Payroll taxes and other payables | 170,699 | 99,937 | 99,937 | 75,932 |
| | | | | | 26. Due to Medicare | 357,719 | 357,719 | 357,719 | 528,080 |
| Patient receivables | 4,763,435 | 4,398,097 | 4,398,097 | 5,042,793 | 27. Due to Medicare - Advance | 3,573,422 | 3,573,422 | 3,573,422 | 0 |
| 6. Allowance for contractuals & bad debt | (3,168,531) | (2,966,058) | (2,966,058) | (3,052,076) | 28. Due to Blue Cross - Advance | 52,000 | 52,000 | 52,000 | 0 |
| Net patient receivables | 1,594,905 | 1,432,039 | 1,432,039 | 1,990,717 | Deferred revenue | 1,664,317 | 2,005,000 | 2,005,000 | 0 |
| | | | | | 30. Loan Payable - SBA | 1,650,000 | 1,800,000 | 1,800,000 | 0 |
| Other receivables | 84,176 | 48,277 | 48,277 | 77,147 | 31. Current portion of long-term debt | 124,848 | 124,848 | 124,848 | 124,895 |
| 9. Inventories | 285,498 | 287,034 | 287,034 | 222,440 | Total current liabilities | 9,313,895 | 10,069,769 | 10,069,769 | 2,419,144 |
| Prepaid expenses | 256,397 | 100,432 | 100,432 | 263,643 | | | | | |
| Total current assets | 14,577,632 | 15,091,201 | 15,091,201 | 7,473,755 | Long-Term Debt: | | | | |
| The state of the s | | | | | 33. Capital leases payable | 19,893 | 30,525 | 30,525 | 145,171 |
| Property and Equipment: | 20, 911 00 | 20, 110 | 00,011.00 | | | | | | |
| 12. Assets III selvice | 77,118,023 | 77,118,073 | 77,118,073 | 797,178,17 | Pension Liabilities: | | | | |
| 13. Assets in progress | 452,031 | 441,798 | 441,798 | 63,697 | Net Pension Liability | 11,593,911 | 11,593,911 | 11,593,911 | 11,593,911 |
| Total property and equipment | 22,570,654 | 22,560,421 | 22,560,421 | 21,884,959 | | | | | |
| Less | (18,359,942) | (18,304,246) | (18,304,246) | (17,668,638) | 35. OPEB Liablity | 2,366,512 | 2,366,512 | 2,366,512 | 2,366,512 |
| Net propery and equipment | 4,210,712 | 4,256,175 | 4,256,175 | 4,216,321 | | | | | |
| Assets Limited as to Use by Board | | | | | 36. Total liabilities | 23,294,211 | 24,060,717 | 24,060,717 | 16,524,738 |
| 17. Investments | 2,579,760 | 2,495,153 | 2,495,153 | 2,494,560 | Deferred Inflows: | | | | |
| 18. Building fund | 544,672 | 525,783 | 525,783 | 522,285 | 37. Difference in pension costs | 1,185,483 | 1,185,483 | 1,185,483 | 1,185,483 |
| 19. Pension | 3,124,432 | 3,020,936 | 3,020,936 | 3,016,845 | | | | | |
| Deferred Outflows: | | | | | Net Position: 38. Unrestricted | 5 875 | (888) | (888) | (888 66) |
| 20. Pension | 2,883,764 | 2,883,764 | 2,883,764 | 2,883,764 | | 310,973 | 105,765 | 105,765 | (19,647) |
| | | | | | 40. Total net position | 316,847 | 5,876 | 5,876 | (119,536) |
| 21. Total assets | \$24,796,541 | \$25,252,076 | \$25,252,076 | \$17,590,685 | 41. Total liabilities and fund balance | \$24,796,541 | \$25,252,076 | \$25,252,076 | \$17,590,685 |
| | | | | | | | | | |

*** In July of each year, June of the prior year will appear twice, once representing the prior month and once representing the prior year-end.

PETERSBURG MEDICAL CENTER Statement of Cash Flows July 31, 2020

| | | FY21 | FY20 | Variance |
|-------------------|--|---|--|---|
| ← ci ci 4, ri | Cash Flows from Operating Activities Cash received from patient services Cash from other sources Cash paid to suppliers Cash paid to employees Net cash provided by (used for) operating activities | 959,889 31,033 (532,859) (1,418,964) | 1,487,117 3,660 (690,450) (909,291) | (527,229) 27,373 157,591 (509,673) |
| 9 | Cash Flows from Noncapital Financing Activities: Cash from grant programs | 109,317 | 10,527 | (98,790) |
| 7. | Cash from provider relief funds | 0 | 0 | 0 |
| ထ် ဝ | Cash (to)from providers - advances | 00 | 0 0 | 0 (|
| . 0 | Cash from non-operating revenue | 0 245 | 33 0 | 0 212 |
| . | Net cash provided by noncapital financing activities | 109,562 | 10,560 | 99,002 |
| 5. 6. 4. 6. | Cash Flows from Capital and Related Financing Activities Interest paid Cash payments on long-term debt Purchase of property and equipment Net cash used for capital and related financing activities | (200) (10,632) (10,233) (21,065) | (629) (10,202) (18,835) (29,666) | 429 (430) 8,602 8,601 |
| 16. | Net increase (decrease) in cash and cash equivalents | (872,405) | (128,070) | (744,335) |
| 17. | Cash and cash equivalents, beginning of year | 13,223,419 | 5,044,237 | 8,179,182 |
| 2 | Cash and cash equivalents, end of period | 12,351,014 | 4,916,167 | 7,434,847 |
| 19. 20. 21. | Days Cash on Hand - Operating/Investments Days Cash on Hand - Provider Advances Days Cash on Hand - Total Operating Cash & Investments | 176.2 73.8 250.0 | 11.5 | 64.6 73.8 138.4 |
| 22. | = Day Cash on Hand - Total Operating/Investment/Board | 313.2 | 179.9 | 133.3 |
| 23. | Days in Accounts Payable == | 38.3 | 23.9 | (14.4) |

| Petersburg Medical Center | Capital | FY21 |
|---------------------------|---------|------|
| Petersburg Medic | Capi | FY21 |

| | | (1) Approved | (2) | (3) Revised | (4) | (2) | (6) Total | (7) Budget |
|---------------------|---|-----------------|---------------|----------------|-----------|------|----------------|---------------|
| Dept Name | Description | Budget | Substitutions | Budget | Committed | Paid | Paid/Committed | Remaining |
| Ŀ | Fire Supporession - Server Room | 19,078 | | 19,078 | | | T | 19,078 |
| ⊨ | Server | 16,515 | | 16,515 | | | 1 | 16,515 |
| Acute/Swing/ER | Fetal Monitor | 22,000 | | 22,000 | | | 1 | 22,000 |
| Acute/Swing/ER | IV Smart Pumps (12) | 48,840 | | 48,840 | | | | 48,840 |
| Acute/Swing/ER | Ventilators | 25,000 | | 25,000 | | | , | 25,000 |
| LTC | Beds (4) | 10,671 | | 10,671 | | | ì | 10,671 |
| PT | Powermatic Mat Platform | 5,000 | | 5,000 | | | ì | 5,000 |
| Lab | Traction Plant | 7,795 | | 7,795 | | | ì | 7,795 |
| Lab | Glucometers (5) | 34,685 | | 34,685 | | | | 34,685 |
| Lab | Microscan | 25,000 | | 25,000 | | | | 25,000 |
| Imaging | Ultrasound | 190,024 | | 190,024 | | | | 190,024 |
| Plant | Industrial Washer | 12,618 | | 12,618 | | | | 12,618 |
| Plant | Plow Truck with Sander | 000'09 | | 000'09 | | | ı | 000'09 |
| Plant | Ice Makers (3) | 18,000 | | 18,000 | | | ı | 18,000 |
| Audiology | Audiology Equipment | 14,774 | | 14,774 | | | | 14,774 |
| Telehealth Admin | To Be Determined (see budget) Contingency | 100.000 | | 100 000 | | я | 1 1 | , 00 |
| | Total - FY21 | 610,000 | | 610,000 | ĸ | ı | , | 610,000 |
| | Funding Sources - FY21 | | | | | | | |
| | PMC Operations | 610,000 | 11) | 610,000 | | | | |
| | Grants | T | • | ı | | | | |
| | Cares Act | 1 | • | j | | | | |
| | Board Reserves | | | - | | | | |
| | Total | 610,000 | 1 | 610,000 | | | | |

Phone: 907-772-4291

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August 26, 2020

To: Stephen Giesbrecht, Borough Manager

Petersburg Assembly Members Jody Tow, Finance Director

cc: Jody Tow, Finance Director

From: Philip Hofstetter, CEO

Petersburg Medical Center

RE: Cares Act Funding Request

Under the authority of the Petersburg Medical Center Board of Directors, please accept this letter as PMC's formal request for CARES Act funding from the Borough of Petersburg.

As a result of the pandemic, the priority for PMC has been to manage the pandemic at a level that would keep community members safe while protecting the economy of Petersburg. PMC leadership and staff's efforts have shifted from revenue earning services to a more significant role in non-revenue earning activities such as prevention, safety and home care. This shift will be ongoing until the pandemic is no longer a threat to our community.

In addition to the loss of revenue that PMC has suffered, the initial costs to protect staff and continue to provide access to care have been significant. It is our hope that the CARES Act funding can assist with PMC's ongoing efforts to continue to keep our community safe and our economy strong.

The total amount of this request is \$608,345.25

For the last 50 years, Petersburg Medical Center has managed to financially be independent, but as a result of the pandemic, we have experienced a significant loss of revenue. It will be difficult to keep the level of care to manage the COVID without aid from outside sources.

PMC leadership will continue to apply for COVID Federal aid in order to respond to and recover from the impacts of the pandemic. Unfortunately, the results of grant and other funding requests are not certain. We also don't know how much longer preventative efforts will continue, and the resulting economic impact. Therefore, we are asking the Borough to reserve funds for PMC for the equipment and other costs listed in this letter in case other efforts to obtain funding fail, or have to be redirected for unforeseen situations as a result of the pandemic.

| We appreciate your consideration of this reque | est. |
|--|-----------------------------|
| Philip Hofstetter, CEO | Jerod Cook, PMC Board Chair |
| Petersburg Medical Center | Petersburg Medical Center |

PANDEMIC EXPENSES

| Request | Expenditures 03.01/20 - 07/28/20 | Expected Expenditures 07/29/20 - 12/30/20 | Total Request |
|---------------------------------------|----------------------------------|---|---------------|
| Payroll | 332,868.83 | 166,434.42 | 499,303.25 |
| Provider Emergency Hire | 38,600.00 | 19,300.00 | 57,900.00 |
| Cepheid | 38,322.00 | | 38,322.00 |
| Nu-Step Elliptical for Long Term Care | 8,070.00 | | 8,070.00 |
| 10 Covid in home monitoring Units | | 4,750.00 | 4,750.00 |
| | | Total request | 608,345.25 |

Payroll and Emergency Hire

- Incident command team, consisting of senior leadership, physicians, management, and other skilled professionals at Petersburg Medical Center, play key roles in the community in the following manner:
 - Assist the Borough's Incident Command team.
 - Provide communication and education for the community on COVID issues on a daily basis.
 - Developed a crisis COVID hotline at PMC that is staffed or monitored by Petersburg Medical Center RN's 24/7.
 - The laboratory staff specifically have had to run all on-site tests, setup protocols for COVID testing and manage the connections to commercial labs to provide results for Petersburg residents.
 - o PMC incident command team tasked to set up processes in the hospital to keep long term care residents, patients and employees safe while still providing care.
 - Advocate, obtain and provide reagents and equipment to provide systematic COVID testing and set up in multiple locations (ie. PMC respiratory clinic parking lot and airport).
 - Emergency hire of full-time additional staff to meet the immediate demands of addressing the pandemic, this includes a physician, home health RN and home health C.N.A.

Cepheid Test Equipment

The Cepheid equipment is used to perform COVID PCR rapid testing on-site. We have a 2- bay unit that can only test 2 samples an hour—not including the staff to run the test. This drastically restricts our testing capability in the lab. The current turnaround time from reference labs is 48 hours at best and 7-14 days at worst depending on the lab (national demand is impacting turnaround time). The request for a four-bay unit will allow us to test a maximum of 6 specimens in an hour (provided there is staff to run the unit). Symptomatic specimens and people in high risk situations like congregate housing (long term care, assisted living and cannery workers bunked together and working together). If there is a COVID outbreak in one of these settings, it will be important to identify cases and isolate people appropriately.

NuStep Elliptical for Long Term Care

• NuStep: Due to COVID-19 infection control precautions, LTC residents are more isolated to the LTC unit and there are restrictions to safely use equipment in the rehabilitation therapy department. The NuStep is a therapeutic exercise device to be used within the LTC unit to reestablish an essential activity for the elderly residents.

In-home Monitoring Units

Home Health services have quadrupled during COVID pandemic and to improve the
monitoring of patients in home these units can assist in tracking vital signs, glucose and pulse
oximeter. The units can be expanded for future COVID patients that need home monitoring as
well as patients with medical complex diseases (i.e. diabetes).