



TAHOE FOREST HOSPITAL DISTRICT

# 2023-08-24 Regular Meeting of the Board of Directors

Thursday, August 24, 2023 at 4:00 p.m.

Tahoe Forest Hospital - Eskridge Conference Room

10121 Pine Avenue, Truckee, CA 96161



# TAHOE FOREST HOSPITAL DISTRICT

## Meeting Book - 2023-08-24 Regular Meeting of the Board of Directors

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TAHOE  
FOREST  
HOSPITAL  
DISTRICT

## REGULAR MEETING OF THE BOARD OF DIRECTORS AGENDA

Thursday, August 24, 2023 at 4:00 p.m.

Tahoe Forest Hospital – Eskridge Conference Room  
10121 Pine Avenue, Truckee, CA 96161

1. **CALL TO ORDER**

2. **ROLL CALL**

3. **DELETIONS/CORRECTIONS TO THE POSTED AGENDA**

4. **INPUT AUDIENCE**

This is an opportunity for members of the public to comment on any closed session item appearing before the Board on this agenda. Please state your name for the record. Comments are limited to three minutes. Written comments should be submitted to the Clerk of the Board 24 hours prior to the meeting to allow for distribution.

5. **CLOSED SESSION**

**5.1. Hearing (Health & Safety Code § 32155)◆**

*Subject Matter: Second Quarter 2023 Corporate Compliance Report*

*Number of items: One (1)*

**5.2. Hearing (Health & Safety Code § 32155)◆**

*Subject Matter: Third and Fourth Quarter Fiscal Year 2023 Patient Complaint Report*

*Number of items: One (1)*

**5.3. Hearing (Health & Safety Code § 32155)◆**

*Subject Matter: Fiscal Year 2020-2023 Service Recovery Financial Summary Report*

*Number of items: One (1)*

**5.4. Hearing (Health & Safety Code § 32155)◆**

*Subject Matter: Third and Fourth Quarter Fiscal Year 2023 Service Excellence Report*

*Number of items: One (1)*

**5.5. Hearing (Health & Safety Code § 32155)◆**

*Subject Matter: Fourth Quarter Fiscal Year 2023 Quality Dashboard*

*Number of items: One (1)*

**5.6. Approval of Closed Session Minutes◆**

**5.6.1.** 07/21/2023 Special Meeting

**5.6.2.** 07/26/2023 Special Meeting

**5.6.3.** 07/27/2023 Regular Meeting

**5.7. TIMED ITEM – 5:30PM - Hearing (Health & Safety Code § 32155)◆**

*Subject Matter: Medical Staff Credentials*

**APPROXIMATELY 6:00 P.M.**

6. **DINNER BREAK**

**7. OPEN SESSION – CALL TO ORDER**

**8. REPORT OF ACTIONS TAKEN IN CLOSED SESSION**

**9. DELETIONS/CORRECTIONS TO THE POSTED AGENDA**

**10. INPUT – AUDIENCE**

This is an opportunity for members of the public to address the Board on items which are not on the agenda. Please state your name for the record. Comments are limited to three minutes. Written comments should be submitted to the Board Clerk 24 hours prior to the meeting to allow for distribution. Under Government Code Section 54954.2 – Brown Act, the Board cannot take action on any item not on the agenda. The Board Chair may choose to acknowledge the comment or, where appropriate, briefly answer a question, refer the matter to staff, or set the item for discussion at a future meeting.

**11. INPUT FROM EMPLOYEE ASSOCIATIONS**

This is an opportunity for members of the Employee Associations to address the Board on items which are not on the agenda. Please state your name for the record. Comments are limited to three minutes.

**12. MEDICAL STAFF EXECUTIVE COMMITTEE ♦**

**12.1. Medical Executive Committee (MEC) Meeting Consent Agenda** ..... ATTACHMENT

*MEC recommends the following for approval by the Board of Directors:*

*Revised Privilege Form:*

- *Urgent Care Privileges*

**13. CONSENT CALENDAR ♦**

These items are expected to be routine and non-controversial. They will be acted upon by the Board without discussion. Any Board Member, staff member or interested party may request an item to be removed from the Consent Calendar for discussion prior to voting on the Consent Calendar.

**13.1. Approval of Minutes of Meetings**

**13.1.1.** 07/21/2023 Special Meeting ..... ATTACHMENT

**13.1.2.** 07/26/2023 Special Meeting ..... ATTACHMENT

**13.1.3.** 07/27/2023 Regular Meeting ..... ATTACHMENT

**13.2. Financial Reports**

**13.2.1.** Financial Report – July 2023 ..... ATTACHMENT

**13.3. Board Reports**

**13.3.1.** President & CEO Board Report ..... ATTACHMENT

**13.3.2.** COO Board Report ..... ATTACHMENT

**13.3.3.** CNO Board Report ..... ATTACHMENT

**13.3.4.** CIO Board Report ..... ATTACHMENT

**13.3.5.** CMO Board Report ..... ATTACHMENT

**13.4. Approve Quarterly Corporate Compliance Report**

**13.4.1.** Second Quarter 2023 Corporate Compliance Report ..... ATTACHMENT

**14. ITEMS FOR BOARD DISCUSSION**

**14.1. Biannual Retirement Committee Update** ..... ATTACHMENT

The Board of Directors will receive a biannual Retirement Committee update from Multnomah Group.

**14.2. Truckee Tahoe Workforce Housing Agency Update**

The Board of Directors will receive an update from the Executive Director of Truckee Tahoe Workforce Housing Agency.

**15. DISCUSSION OF CONSENT CALENDAR ITEMS PULLED, IF NECESSARY**

**16. BOARD COMMITTEE REPORTS**

**17. BOARD MEMBERS REPORTS/CLOSING REMARKS**

**18. CLOSED SESSION CONTINUED**

**19. OPEN SESSION**

**20. REPORT OF ACTIONS TAKEN IN CLOSED SESSION, IF NECESSARY**

**21. ADJOURN**

*The next regularly scheduled meeting of the Board of Directors of Tahoe Forest Hospital District is September 28, 2023 at Tahoe Forest Hospital – Eskridge Conference Room, 10121 Pine Avenue, Truckee, CA, 96161. A copy of the board meeting agenda is posted on the District’s web site ([www.tfhd.com](http://www.tfhd.com)) at least 72 hours prior to the meeting or 24 hours prior to a Special Board Meeting. Materials related to an item on this Agenda submitted to the Board of Directors, or a majority of the Board, after distribution of the agenda are available for public inspection in the Administration Office, 10977 Spring Lane, Truckee, CA 96161, during normal business hours.*

\*Denotes material (or a portion thereof) may be distributed later.

Note: It is the policy of Tahoe Forest Hospital District to not discriminate in admissions, provisions of services, hiring, training and employment practices on the basis of color, national origin, sex, religion, age or disability including AIDS and related conditions. Equal Opportunity Employer. The telephonic meeting location is accessible to people with disabilities. Every reasonable effort will be made to accommodate participation of the disabled in all of the District’s public meetings. If particular accommodations for the disabled are needed or a reasonable modification of the teleconference procedures are necessary (i.e., disability-related aids or other services), please contact the Clerk of the Board at 582-3481 at least 24 hours in advance of the meeting.

**TAHOE FOREST HOSPITAL DISTRICT**  
**Department of Medicine**  
**Delineated Clinical Privilege Request**

**SPECIALTY:** URGENT CARE

**NAME:** \_\_\_\_\_  
Please Print

Check one or more:

Tahoe Forest Health System Urgent Care

Tahoe Forest Health System Ski Clinic

Check one:  Initial  Change in Privileges  Renewal of Privileges

To be eligible to request these clinical privileges, the applicant must meet the following threshold criteria:

<b>Basic Education:</b>	MD, DO
<b>Minimum Formal Training:</b>	Successful completion of an ACGME or AOA-approved residency training program in Family Medicine, Internal Medicine or Emergency Medicine
<b>Board Certification:</b>	Board qualification/certification required. Current ABFP/ABIM/ABEM Board Certification (or AOA equivalent Board); or attain Board Certification within five years of completion of training program. Maintenance of Board Certification required for reappointment eligibility. <i>Failure to obtain board certification within the required timeframe, or failure to maintain board certification, will result in automatic termination of privileges.</i>
<b>Required Previous Experience:</b> (required for new applicants)	Applicant must be able to document that he/she has managed minimum number of urgent care/primary care/ER patients as indicated for each core group within the past 24 months. Recent residency or fellowship training experience may be applicable. If training has been completed within the last 2 years, documentation will be requested from program director attesting to competency in the privileges requested including residency/fellowship log. If training completed greater than 2 years ago, documentation will be requested from chairman of department at hospital where you have maintained active staff privileges attesting to competency in the privileges requested.
<b>Clinical Competency References:</b> (required for new applicants)	Training director or appropriate department chair from another hospital where applicant has been affiliated within the past year; and two additional peer references who have recently worked with the applicant and directly observed his/her professional performance over a reasonable period of time and who will provide reliable information regarding current clinical competence, ethical character and ability to work with others. (At least one peer reference must be an Urgent Care practitioner.) Medical Staff Office will request the peer evaluation information.
<b>Proctoring Requirements:</b>	See in Proctoring P&P. Where applicable, additional proctoring and evaluation may be required if minimum number of cases cannot be documented, in addition to the proctoring requirements outlined in the proctoring policy.
<b>Other:</b>	<ul style="list-style-type: none"> <li>• Current, unrestricted license to practice medicine in CA and/or NV</li> <li>• Malpractice insurance in the amount of \$1m/\$3m</li> <li>• Current, unrestricted DEA certificate in CA (approved for schedules 2-5) and/or unrestricted Nevada State Board of Pharmacy Certificate and DEA to practice in NV</li> <li>• Ability to participate in federally funded program (Medicare or Medicaid)</li> <li>• <del>ATLS – required to provide services at all ski clinics. (ATLS required within 12 months of initial appointment to the Ski Clinic(s) and Current Thereafter)</del></li> <li>• ACLS – required to provide services at all Urgent Care sites. (ACLS required within 6 months of Initial Appointment and Current Thereafter)</li> </ul>

**If you meet the threshold criteria above, you may request privileges as appropriate to your training and current competence.**

# TAHOE FOREST HOSPITAL DISTRICT

## Department of Medicine

### Delineated Clinical Privilege Request

**Applicant:** Place a check in the (R) column for each privilege Requested. Initial applicants must provide documentation of the number and types of clinic cases treated during the past 24 months. **Granting of privileges is contingent upon meeting all general, specific, and threshold criteria defined above.**

**Recommending individual/committee must note:** (A) = Recommend Approval as Requested. **NOTE:** If conditions or modifications are noted, the specific condition and reason for same must be stated on the last page.

(R)	(A)	GENERAL PRIVILEGES – URGENT CARE	Estimate # of patients in the past 24 months	Setting	Proctoring	Reappointment criteria if no or insufficient cases, add'l proctoring or specific CME may be required
<input type="checkbox"/>	<input type="checkbox"/>	<p><b>BASIC – Urgent Care</b></p> <p>Basic privileges include</p> <ul style="list-style-type: none"> <li>• <del>the</del> <u>The ability to perform a history and physical exam</u></li> <li>• <del>Review</del> <u>Review medical records</u></li> <li>• <del>Order and interpreting</del> <u>Order and interpreting appropriate diagnostic tests and results; such as point of care and clinical laboratory tests, plain radiographs, ultrasound, CT, MRI, and electrocardiograms.</u></li> <li>• <u>Prescribing medications, DME and ordering immunizations</u></li> <li>• <u>Knowledge in recognizing and initial management of acute medical conditions, such as anaphylaxis, asthma, stroke, and acute coronary syndromes</u></li> <li>• <u>Use of infection control protocols, including use of appropriate level of PPE</u></li> <li>• <u>Performing minor medical procedures (see below)</u></li> <li>• <u>Referring patients to specialists and other healthcare providers to provide comprehensive patient care</u></li> <li>• <u>Participating in quality improvement initiatives</u></li> </ul> <p><del>outpatient labs and studies, and receive results of inpatient and/or</del></p>		<p><b>Urgent Care Clinic, MSC, Ski Clinics</b></p>	<p>Review of 10 representative cases, including 5 trauma cases</p>	<p>Evidence of Current Clinical Competency.</p>

**TAHOE FOREST HOSPITAL DISTRICT**  
**Department of Medicine**  
**Delineated Clinical Privilege Request**

~~outpatient lab/radiology studies, and records.~~ Must include management of at least 50 adults and 10 children (14 and under) within the last two years for initial appointment.

- ~~BLS for Healthcare Provider certification~~
- ACLS Required (Certification Required within 6 months of Initial Appointment and Current Thereafter)

CORE PROCEDURES:

- Local ~~and peripheral regional block~~ anesthesia
- Nasal ~~cautery and tamponade packing and cautery~~
- ~~Abscess~~ Incision and drainage
- Wound management and closure ~~methods~~
- Skin biopsy or excision
- Nail trephine and excision
- Joint, bursa, and trigger point injection
- Removal of ~~superficial foreign body from skin, and non-penetrating foreign body from eye, nose, ear, and vagina~~ non-penetrating foreign body from eye, nose, ear, skin and vagina
- ~~Urinary bladder catheterization~~
- Splinting ~~limb injuries and casting~~



**TAHOE FOREST HOSPITAL DISTRICT**  
**Department of Medicine**  
**Delineated Clinical Privilege Request**

(R)	(A)	<b>SPECIALIZED PRIVILEGES – URGENT CARE</b> These privileges will require documentation of experience and training prior to approval in addition to requirements outlined above.	Estimate # of patients or procedures performed in the past 24 months (indicate if other than hospital #s)	Setting	Proctoring See below plus add'l cases at discretion of proctor	Reappointment Criteria If no cases or insufficient cases, add'l proctoring may be required or privilege specific CME
- - <input type="checkbox"/> - -	- - <input type="checkbox"/> - -	<del>ATLS Required for Ski Clinics (Certification Required within 12 months of Initial Appointment and Current Thereafter)</del>	<del>_____</del>	<del>UC, Ski Clinics</del>	<del>-</del>	<del>Maintain current</del>
<input type="checkbox"/>	<input type="checkbox"/>	Preliminary interpretation of plain <del>films (required for ski clinic)</del> radiographs	_____	UC, Ski Clinics	5 cases	Current demonstrated competence and provision of care
<input type="checkbox"/>	<input type="checkbox"/>	Dislocation/fracture reduction/immobilization techniques, <del>including splinting and casting (required for ski clinic)</del>		UC, Ski Clinics	5 cases	Current demonstrated competence and provision of care
<input type="checkbox"/>	<input type="checkbox"/>	<del>Fracture Hematoma block (required for ski clinic)</del>	_____	UC, Ski Clinics	3 cases	Current demonstrated competence and provision of care
<input type="checkbox"/>	<input type="checkbox"/>	<del>Cervical spine clearance (required for ski clinic)</del>	<del>_____</del>	<del>UC, Ski Clinics</del>	<del>1 case</del>	<del>Current demonstrated competence and provision of care</del>
<input type="checkbox"/>	<input type="checkbox"/>	<del>IUD Insertion</del>	<del>_____</del>	<del>UC, MSC</del>	<del>3 cases</del>	<del>Current demonstrated competence and provision of care</del>
<input type="checkbox"/>	<input type="checkbox"/>	<del>IUD Insertion- Arthrocentesis/joint injection</del>	_____	UC, MSC, Ski clinics	<del>31 cases</del>	Current demonstrated competence and provision of care
<input type="checkbox"/>	<input type="checkbox"/>	<del>IUD Removal</del>	_____	UC	<del>1 case</del>	<del>Current demonstrated competence and provision of care</del>
<input type="checkbox"/>	<input type="checkbox"/>	<del>Endometrial Biopsy</del>		UC	<del>1 case</del>	<del>Current demonstrated competence and provision of care</del>
<input type="checkbox"/>	<input type="checkbox"/>	<del>Nexplanon Implant Removal</del>		UC	<del>1 case</del>	<del>Current demonstrated competence and provision of care</del>



**TAHOE FOREST HOSPITAL DISTRICT**  
**Department of Medicine**  
**Delineated Clinical Privilege Request**

Form Approval/Revision Dates:  
Board 8/27/20, 11/18/2021

## AGENDA ITEM COVER SHEET

<b>ITEM</b>	Medical Executive Committee (MEC) Consent Agenda
<b>RESPONSIBLE PARTY</b>	Johanna Koch, MD Chief of Staff
<b>ACTION REQUESTED</b>	For Board Action
<b>BACKGROUND:</b> During the August 17, 2023 Medical Executive Committee meeting, the committee made the following open session consent agenda item recommendations to the Board of Directors at the August 27, 2023 meeting.	
<u>Revised Privilege Form</u> <ul style="list-style-type: none"> <li>Urgent Care Privileges</li> </ul>	
<b>SUGGESTED DISCUSSION POINTS:</b> None.	
<b>SUGGESTED MOTION/ALTERNATIVES:</b> Move to approve the Medical Executive Committee Consent Agenda as presented.	

## SPECIAL MEETING OF THE BOARD OF DIRECTORS

### DRAFT MINUTES

Friday, July 21, 2023 at 1:00 p.m.  
Tahoe Forest Hospital – Labor & Delivery Conference Room  
10121 Pine Avenue, Truckee, CA 96161

#### 1. CALL TO ORDER

Meeting was called to order at 1:12 p.m.

#### 2. ROLL CALL

Board: Alyce Wong, Board Chair, Michael McGarry, Vice Chair; Robert (Bob) Barnett, Secretary; Dale Chamblin, Treasurer; Mary Brown, Board Member

Staff in attendance: Harry Weis, President & Chief Executive Officer; Martina Rochefort, Clerk of the Board

#### 3. CLEAR THE AGENDA/ITEMS NOT ON THE POSTED AGENDA

No changes were made to the agenda.

Open Session recessed at 1:12 p.m.

Clerk of the Board departed the meeting at 1:12 p.m.

#### 4. CLOSED SESSION

##### 4.1. Public Employee Performance Evaluation (Government Code § 54957)

*Title: President & Chief Executive Officer*

Discussion was held on a privileged item.

Open Session reconvened at 3:16 p.m.

#### 5. REPORT OF ACTIONS TAKEN IN CLOSED SESSION

David Ruderman, General Counsel, noted there was no reportable action taken in closed session.

#### 6. ADJOURN

Meeting adjourned at 3:16 p.m.



# SPECIAL MEETING OF THE BOARD OF DIRECTORS

## DRAFT MINUTES

Wednesday, July 26, 2023 at 12:00 p.m.

Tahoe Forest Hospital – Eskridge Conference Room  
10121 Pine Avenue, Truckee, CA 96161

### 1. CALL TO ORDER

Meeting was called to order at 12:12 p.m.

### 2. ROLL CALL

Board: Alyce Wong, Board Chair, Michael McGarry, Vice Chair; Robert (Bob) Barnett, Secretary; Dale Chamblin, Treasurer; Mary Brown, Board Member

Staff in attendance: Martina Rochefort, Clerk of the Board

Other: David Ruderman, General Counsel

### 3. CLEAR THE AGENDA/ITEMS NOT ON THE POSTED AGENDA

No changes were made to the agenda.

Open Session recessed at 12:12 p.m.

*Clerk of the Board departed the meeting at 12:12 p.m.*

### 4. CLOSED SESSION

#### 4.1. Public Employee Performance Evaluation (Government Code § 54957)

*Title: President & Chief Executive Officer*

Discussion was held on a privileged matter.

Open Session reconvened at 1:45 p.m.

### 5. REPORT OF ACTIONS TAKEN IN CLOSED SESSION

General Counsel noted there was no reportable action taken in closed session.

### 6. ADJOURN

Meeting adjourned at 1:45 p.m.



# REGULAR MEETING OF THE BOARD OF DIRECTORS **DRAFT** MINUTES

Thursday, July 27, 2023 at 4:00 p.m.  
Tahoe Forest Hospital – Eskridge Conference Room  
10121 Pine Avenue, Truckee, CA 96161

## **1. CALL TO ORDER**

Meeting was called to order at 4:00 p.m.

## **2. ROLL CALL**

Board: Alyce Wong, Board Chair; Michael McGarry, Vice Chair; Robert (Bob) Barnett, Secretary; Dale Chamblin, Treasurer; Mary Brown, Board Member

Staff in attendance: Harry Weis, President & Chief Executive Officer; Louis Ward, Chief Operating Officer; Crystal (Betts) Felix, Chief Financial Officer; Matt Mushet, In-House Counsel; Ted Owens, Executive Director of Governance; Martina Rochefort, Clerk of the Board

## **3. DELETIONS/CORRECTIONS TO THE POSTED AGENDA**

No changes were made to the agenda.

*David Ruderman, General Counsel, joined the meeting at 4:02 p.m.*

## **4. INPUT AUDIENCE**

No public comment was received.

**Open Session recessed at 4:02 p.m.**

## **5. CLOSED SESSION**

### **5.1. Conference with Legal Counsel; Initiation of Litigation (Gov. Code § 54956.9(d)(4))**

*Number of Potential Cases: One (1)*

Discussion was held on a privileged item.

### **5.2. Hearing (Health & Safety Code § 32155)**

*Subject Matter: Third and Fourth Quarter Fiscal Year 2023 Risk Summary Report*

*Number of items: One (1)*

Discussion was held on a privileged item.

### **5.3. Hearing (Health & Safety Code § 32155)**

*Subject Matter: Third and Fourth Quarter Fiscal Year 2023 Disclosure Report*

*Number of items: One (1)*

Discussion was held on a privileged item.

**5.4. Liability Claims (Gov. Code § 54956.95)**

*Claimant: Robert Mowris*

*Claim Against: Tahoe Forest Hospital District*

Discussion was held on a privileged item.

**5.5. Approval of Closed Session Minutes**

**5.5.1.** 06/22/2023 Regular Meeting

Discussion was held on a privileged item.

**5.6. TIMED ITEM – 5:30PM - Hearing (Health & Safety Code § 32155)**

*Subject Matter: Medical Staff Credentials*

Discussion was held on a privileged item.

**6. DINNER BREAK**

**7. OPEN SESSION – CALL TO ORDER**

Open Session reconvened at 6:00 p.m.

**8. REPORT OF ACTIONS TAKEN IN CLOSED SESSION**

General Counsel reported the board considered six items in closed session. Items 5.1. through 5.3. had no reportable action. Item 5.4. Claim by Robert Mowris was rejected on a 5-0 vote. Items 5.5. and 5.6. were both approved on a 5-0 vote.

**9. DELETIONS/CORRECTIONS TO THE POSTED AGENDA**

No changes were made to the agenda.

**10. INPUT – AUDIENCE**

No public comment was received.

**11. INPUT FROM EMPLOYEE ASSOCIATIONS**

No public comment was received.

**12. MEDICAL STAFF EXECUTIVE COMMITTEE**

**12.1. Medical Executive Committee (MEC) Meeting Consent Agenda**

*MEC recommended the following for approval by the Board of Directors:*

*New Privilege Form:*

- *Infectious Disease*

*New Policy:*

- *Treatment of Self, Family Members and Close Relations*

**ACTION:** Motion made by Director Brown to approve the MEC Meeting Consent Agenda as presented, seconded by Director Barnett.

**AYES:** Directors Brown, Chamblin, Barnett, McGarry and Wong

**Abstention:** None

**NAYS:** None

**Absent:** None



**13. CONSENT CALENDAR**

**13.1. Approval of Minutes of Meetings**

**13.1.1.** 06/22/2023 Regular Meeting

**13.1.2.** 06/27/2023 Special Meeting

**13.2. Financial Reports**

**13.2.1.** Financial Report – June 2023

**13.3. Board Reports**

**13.3.1.** President & CEO Board Report

**13.3.2.** COO Board Report

**13.3.3.** CNO Board Report

**13.3.4.** CIIO Board Report

**13.3.5.** CMO Board Report

**13.4. Approve Committee Charter**

**13.4.1.** Revised Board Executive Compensation Committee

**13.5. Approve Resolution Authorizing Application to and Participation in the Behavioral Health Continuum Infrastructure Program (BHCIP)**

**13.5.1.** Resolution 2023-07

No public comment was received.

**ACTION:** Motion made by Director Chamblin to approve the Consent Calendar as presented, seconded by Director Brown.

**AYES:** Directors Brown, Chamblin, Barnett, McGarry and Wong

**Abstention:** None

**NAYS:** None

**Absent:** None

**14. ITEMS FOR BOARD DISCUSSION**

**14.1. Annual Investment Update**

Don Penner & Alaynè Sampson of Chandler Asset Management, presented an annual investment portfolio update. Discussion was held.

**15. ITEMS FOR BOARD APPROVAL**

**15.1. Resolution 2023-08**

Peter Mayfield, Executive Director of Gateway Mountain Center, provided a program update. The Board of Directors reviewed and considered approval of a resolution endorsing funding support of the Gateway Mountain Center Expansion Plan, serving high risk youth in the Truckee Tahoe Community. Discussion was held.

**ACTION:** Motion made by Director Brown to approve Resolution 2023-08 as presented, seconded by Director McGarry.

**AYES:** Directors Brown, Chamblin, Barnett, McGarry and Wong

**Abstention:** None

**NAYS:** None

**Absent:** None

**15.2. Resolution 2023-09**

The Board of Directors reviewed and considered for approval a resolution setting the Tax Rate per \$100,000 of Assessed Value for the 2023-24 Fiscal Year for the debt service requirement of the District's General Obligation (GO) Bonds. Discussion was held.

**ACTION:** Motion made by Director Chamblin to set the 2023-24 fiscal year GO Bond tax rate per \$100,000 at \$16.09 and utilize approximately 75% (\$726,751.13) of the reserve (\$969,001.51) to fully cover the 2023-24 debt service requirement of \$5,579,431.26, leaving \$242,250.38 in reserve, seconded by Director Barnett.  
**AYES:** Directors Brown, Chamblin, Barnett, McGarry and Wong  
**Abstention:** None  
**NAYS:** None  
**Absent:** None

**15.3. Resolution 2023-10**

The Board of Directors reviewed and considered approval of a resolution approving the formation of a standing board committee on community engagement. Discussion was held.

**ACTION:** Motion made by Director McGarry to approve Resolution 2023-10 forming a standing board committee on community engagement, seconded by Director Brown.  
**AYES:** Directors Brown, Chamblin, Barnett, McGarry and Wong  
**Abstention:** None  
**NAYS:** None  
**Absent:** None

**16. DISCUSSION OF CONSENT CALENDAR ITEMS PULLED, IF NECESSARY**

Not applicable.

**17. BOARD COMMITTEE REPORTS**

Director Chamblin provided an update from the July 26, 2023 Board Finance Committee.

**18. BOARD MEMBERS REPORTS/CLOSING REMARKS**

No discussion was held.

**19. CLOSED SESSION CONTINUED**

Not applicable.

**20. OPEN SESSION**

Not applicable.

**21. REPORT OF ACTIONS TAKEN IN CLOSED SESSION, IF NECESSARY**

Not applicable.

**22. ADJOURN**

Meeting adjourned at 7:19 p.m.

**TAHOE FOREST HOSPITAL DISTRICT  
JULY 2023 FINANCIAL REPORT - PRELIMINARY  
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**Board of Directors**  
*Of Tahoe Forest Hospital District*  
**JULY 2023 FINANCIAL NARRATIVE - PRELIMINARY**

The following is the financial narrative analyzing financial and statistical trends for the one month ended July 31, 2023.

**Activity Statistics**

- ❑ TFH acute patient days were 373 for the current month compared to budget of 506. This equates to an average daily census of 12.0 compared to budget of 16.3.
- ❑ TFH Outpatient volumes were above budget in the following departments by at least 5%: Home Health visits, Lab Send Out tests, Oncology Lab, Diagnostic Imaging, Radiation Oncology procedures, Nuclear Medicine, Ultrasounds, Briner Ultrasound, CAT Scans, Drugs Sold to Patients, Respiratory Therapy, Gastroenterology cases, and Outpatient Physical Therapy, Physical Therapy Aquatic, and Occupational Therapy.
- ❑ TFH Outpatient volumes were below budget in the following departments by at least 5%: Emergency Department visits, Hospice visits, Surgery cases, Pathology, Blood units, Mammography, PET CT, and Tahoe City Occupational Therapy.

**Financial Indicators**

- ❑ Net Patient Revenue as a percentage of Gross Patient Revenue was 47.18% in the current month compared to budget of 47.95% and to last month's 45.89%. Year-to-Date Net Patient Revenue as a percentage of Gross Patient Revenue was 47.18% compared to budget of 47.95% and prior year's 43.60%.
- ❑ EBIDA was \$1,292,877 (2.6%) for the current month compared to budget of \$473,265 (1.0%), or \$819,612 (1.7%) above budget.
- ❑ Net Income was \$1,240,178 for the current month compared to budget of \$211,784 or \$1,028,394 above budget.
- ❑ Cash Collections for the current month were \$22,302,213, which is 91% of targeted Net Patient Revenue.
- ❑ EPIC Gross Accounts Receivables were \$99,274,126 at the end of July compared to \$93,023,010 at the end of June.

**Balance Sheet**

- ❑ Working Capital is at 38.3 days (policy is 30 days). Days Cash on Hand (S&P calculation) is 191.4 days. Working Capital cash decreased a net \$229,000. Accounts Payable decreased \$209,000 and Accrued Payroll & Related Costs increased \$1,579,000. Cash Collections were 9% below target.
- ❑ Net Patient Accounts Receivable decreased \$129,000 and cash collections were 91% of target. EPIC Days in A/R were 60.3 compared to 59.0 at the close of June, a 1.30 days increase.
- ❑ Estimated Settlements, Medi-Cal & Medicare increased a net \$942,000. The District recorded its monthly estimated receivables due from the Medi-Cal Rate Range, Hospital Quality Assurance Fee, and Medi-Cal PRIME/QIP programs.
- ❑ Unrealized Gain/(Loss) Cash Investment Fund decreased \$215,000 after recording the unrealized gains in its funds held with Chandler Investments in July.
- ❑ GO Bond Tax Revenue Fund decreased \$3,808,000 after remitting the Principal and Interest payments dues on the General Obligation Bonds.
- ❑ Investment in TSC, LLC decreased \$67,000 after recording the estimated loss for July.
- ❑ Accounts Payable decreased \$209,000 due to the timing of the final check run in July.
- ❑ Accrued Payroll & Related Costs increased a net \$1,579,000 due to additional accrued payroll days in July.
- ❑ Interest Payable decreased \$213,000 after remitting the Interest payment due on the 2015 Revenue Bonds.
- ❑ Interest Payable GO Bond decreased \$1,344,000 after remitting the Interest payments due on the General Obligation Bonds.

July 2023 Financial Narrative - Preliminary

- ❑ Other Long Term Debt Net of Current Maturities decreased \$1,279,000 after remitting the Principal payment due on the 2015 Revenue Bonds.
- ❑ GO Bond Debt Net of Current Maturities decreased \$2,213,000 after remitting the Principal payments due on the General Obligation Bonds.

**Operating Revenue**

- ❑ Current month’s Total Gross Revenue was \$49,056,156 compared to budget of \$48,591,374 or \$464,782 above budget.
- ❑ Current month’s Gross Inpatient Revenue was \$7,015,489, compared to budget of \$8,026,519 or \$1,011,030 below budget.
- ❑ Current month’s Gross Outpatient Revenue was \$42,040,667 compared to budget of \$40,564,855 or \$1,475,812 above budget.
- ❑ Current month’s Gross Revenue Mix was 40.03% Medicare, 14.39% Medi-Cal, .0% County, 1.06% Other, and 44.53% Commercial Insurance compared to budget of 37.75% Medicare, 15.21% Medi-Cal, .0% County, 2.01% Other, and 45.03% Commercial Insurance. Last month’s mix was 43.5% Medicare, 13.3% Medi-Cal, .0% County, 1.8% Other, and 41.4% Commercial Insurance.
- ❑ Current month’s Deductions from Revenue were \$25,915,859 compared to budget of \$25,295,428 or \$620,431 above budget. Variance is attributed to the following reasons: 1) Payor mix varied from budget with a 2.27% increase in Medicare, a .82% decrease to Medi-Cal, County at budget, a .95% decrease in Other, and Commercial Insurance was below budget .50%, 2) Revenues were above budget by 1.00%, and 3) the Business Office continues to clean up older claims in EPIC which is also causing a negative variance against budget in Contractual Allowances.

DESCRIPTION	July 2023 Actual	July 2023 Budget	Variance	BRIEF COMMENTS
Salaries & Wages	9,762,987	10,676,330	913,343	
Employee Benefits	3,839,513	3,278,465	(561,048)	We saw a greater use of PL for RNs, Clerical, Physicians, and Management. This is lending to the positive variance in Salaries & Wages.
Benefits – Workers Compensation	65,727	108,106	42,379	
Benefits – Medical Insurance	1,698,795	1,953,389	254,594	
Medical Professional Fees	545,706	568,823	23,117	Emergency Department and Hospitalist physician fees were below budget, creating a positive variance in Medical Professional Fees.
Other Professional Fees	202,745	281,720	78,975	Decreased use of Mercy resources and outsourced legal and consulting fees in Administration created a positive variance in Other Professional Fees.
Supplies	4,108,775	4,146,730	37,955	Non-Patient Chargeable supplies were below budget, creating a positive variance in Supplies.
Purchased Services	2,220,396	2,381,004	160,608	We saw positive variances in Purchased Services for the Wellness Neighborhood, Foundation Stewardship, outsourced billing and collection services in Patient Accounting, pre-employment health screenings, and department repairs.
Other Expenses	941,332	958,011	16,679	Human Resources recruitment expenses, Marketing campaigns, Utilities, and Outside Training & Travel were below budget, creating a positive variance in Other Expenses.
Total Expenses	23,385,976	24,352,578	966,602	

TAHOE FOREST HOSPITAL DISTRICT  
STATEMENT OF NET POSITION  
JULY 2023 - PRELIMINARY

	Jul-23	Jun-23	Jun-22	
<b>ASSETS</b>				
<b>CURRENT ASSETS</b>				
* CASH	\$ 28,989,011	\$ 29,218,479	\$ 19,561,558	1
PATIENT ACCOUNTS RECEIVABLE - NET	44,103,198	44,232,069	41,866,435	2
OTHER RECEIVABLES	11,925,244	10,548,788	8,605,310	
GO BOND RECEIVABLES	246,111	(199,024)	352,092	
ASSETS LIMITED OR RESTRICTED	11,072,313	11,140,119	11,491,431	
INVENTORIES	5,262,766	5,275,644	4,469,265	
PREPAID EXPENSES & DEPOSITS	4,554,258	3,593,663	2,661,331	
ESTIMATED SETTLEMENTS, M-CAL & M-CARE	17,984,906	17,043,239	16,747,301	3
<b>TOTAL CURRENT ASSETS</b>	<b>124,137,808</b>	<b>120,852,977</b>	<b>105,754,722</b>	
<b>NON CURRENT ASSETS</b>				
ASSETS LIMITED OR RESTRICTED:				
* CASH RESERVE FUND	10,245,543	10,165,848	54,505,988	1
* CASH INVESTMENT FUND	105,756,905	105,612,198	80,185,207	1
UNREALIZED GAIN/(LOSS) CASH INVESTMENT FUND	(3,138,220)	(3,353,217)	(3,510,138)	4
MUNICIPAL LEASE 2018			725,876	
TOTAL BOND TRUSTEE 2017	21,240	21,159	20,538	
TOTAL BOND TRUSTEE 2015	170,943	1,530,063	1,348,829	
TOTAL BOND TRUSTEE GO BOND	5,764	5,764	5,764	
GO BOND TAX REVENUE FUND	969,002	4,776,892	4,262,402	5
DIAGNOSTIC IMAGING FUND	3,431	3,404	3,350	
DONOR RESTRICTED FUND	1,153,846	1,148,980	1,139,077	
WORKERS COMPENSATION FUND	36,269	7,041	30,156	
TOTAL	115,224,722	119,918,132	138,717,049	
LESS CURRENT PORTION	(11,072,313)	(11,140,119)	(11,491,431)	
TOTAL ASSETS LIMITED OR RESTRICTED - NET	104,152,409	108,778,013	127,225,618	
NONCURRENT ASSETS AND INVESTMENTS:				
INVESTMENT IN TSC, LLC	(3,301,389)	(3,234,389)	(2,075,870)	6
PROPERTY HELD FOR FUTURE EXPANSION	1,694,072	1,694,072	1,694,072	
PROPERTY & EQUIPMENT NET	194,467,014	195,469,890	185,006,510	
GO BOND CIP, PROPERTY & EQUIPMENT NET	1,791,406	1,791,406	1,839,986	
<b>TOTAL ASSETS</b>	<b>422,941,318</b>	<b>425,351,969</b>	<b>419,445,037</b>	
DEFERRED OUTFLOW OF RESOURCES:				
DEFERRED LOSS ON DEFEASANCE	268,287	271,520	310,308	
ACCUMULATED DECREASE IN FAIR VALUE OF HEDGING DERIVATIVE	262,970	262,970	660,160	
DEFERRED OUTFLOW OF RESOURCES ON REFUNDING	4,537,101	4,560,805	4,845,262	
GO BOND DEFERRED FINANCING COSTS	442,408	444,728	472,579	
DEFERRED FINANCING COSTS	123,793	124,833	137,316	
INTANGIBLE LEASE ASSET NET OF ACCUM AMORTIZATION	7,324,541	7,464,402	9,151,929	
<b>TOTAL DEFERRED OUTFLOW OF RESOURCES</b>	<b>\$ 12,959,100</b>	<b>\$ 13,129,259</b>	<b>\$ 15,577,554</b>	
<b>LIABILITIES</b>				
<b>CURRENT LIABILITIES</b>				
ACCOUNTS PAYABLE	\$ 9,711,254	\$ 9,920,467	\$ 12,272,884	7
ACCRUED PAYROLL & RELATED COSTS	22,613,668	21,034,514	26,126,666	8
INTEREST PAYABLE	218,601	431,722	478,399	9
INTEREST PAYABLE GO BOND	(0)	1,344,075	1,380,701	10
ESTIMATED SETTLEMENTS, M-CAL & M-CARE	290,618	290,618	6,214,436	
HEALTH INSURANCE PLAN	2,722,950	2,722,950	2,224,062	
WORKERS COMPENSATION PLAN	3,287,371	3,287,371	2,947,527	
COMPREHENSIVE LIABILITY INSURANCE PLAN	2,586,926	2,586,926	2,082,114	
CURRENT MATURITIES OF GO BOND DEBT	2,195,000	2,195,000	1,945,000	
CURRENT MATURITIES OF OTHER LONG TERM DEBT	4,565,337	4,706,792	5,594,718	
<b>TOTAL CURRENT LIABILITIES</b>	<b>48,191,724</b>	<b>48,520,436</b>	<b>61,266,506</b>	
<b>NONCURRENT LIABILITIES</b>				
OTHER LONG TERM DEBT NET OF CURRENT MATURITIES	25,475,695	26,755,015	31,504,689	11
GO BOND DEBT NET OF CURRENT MATURITIES	90,741,321	92,954,277	95,364,744	12
DERIVATIVE INSTRUMENT LIABILITY	262,970	262,970	660,160	
<b>TOTAL LIABILITIES</b>	<b>164,671,711</b>	<b>168,492,699</b>	<b>188,796,099</b>	
<b>NET ASSETS</b>				
NET INVESTMENT IN CAPITAL ASSETS	270,074,861	268,839,550	245,087,415	
RESTRICTED	1,153,846	1,148,980	1,139,077	
<b>TOTAL NET POSITION</b>	<b>\$ 271,228,707</b>	<b>\$ 269,988,529</b>	<b>\$ 246,226,493</b>	

\* Amounts included for Days Cash on Hand calculation

TAHOE FOREST HOSPITAL DISTRICT  
NOTES TO STATEMENT OF NET POSITION  
JULY 2023 - PRELIMINARY

1. Working Capital is at 38.3 days (policy is 30 days). Days Cash on Hand (S&P calculation) is 191.4 days. Working Capital cash decreased a net \$229,000. Accounts Payable decreased \$209,000 (See Note 7) and Accrued Payroll & Related Costs increased \$1,579,000 (See Note 8). Cash Collections were below target by 9% (See Note 2).
2. Net Patient Accounts Receivable decreased a net \$129,000. Cash collections were 91% of target. EPIC Days in A/R were 60.3 compared to 59.0 at the close of June, a 1.30 days increase.
3. Estimated Settlements, Medi-Cal & Medicare increased \$942,000. The District recorded its monthly estimated receivables due from the Medi-Cal Rate Range, Hospital Quality Assurance Fee, and Medi-Cal PRIME/QIP programs.
4. Unrealized Gain/(Loss) Cash Investment Fund decreased \$215,000 after recording the unrealized gains in its funds held with Chandler Investments for the month of July.
5. GO Bond Tax Revenue Fund decreased \$3,808,000 after remitting the Principal and Interest payments due on the General Obligation Bonds.
6. Investment in TSC, LLC decreased a net \$67,000 after recording the estimated loss for July.
7. Accounts Payable decreased \$209,000 due to the timing of the final check run in July.
8. Accrued Payroll & Related Costs increased a net \$1,579,000 due to additional accrued payroll days in July.
9. Interest Payable decreased \$213,000 after remitting the Interest payment due on the 2015 Revenue Bonds.
10. Interest Payable GO Bond decreased \$1,344,000 after remitting the Interest payments due on the General Obligation Bonds.
11. Other Long Term Debt Net of Current Maturities decreased \$1,279,000 after remitting the Principal payment due on the 2015 Revenue Bonds.
12. GO Bond Debt Net of Current Maturities decreased \$2,213,000 after remitting the Principal payments dues on the General Obligation Bonds.

**Tahoe Forest Hospital District  
Cash Investment  
July 31, 2023 Preliminary**

<b>WORKING CAPITAL</b>			
US Bank	\$ 27,853,358	4.76%	
US Bank/Kings Beach Thrift Store	19,642		
US Bank/Truckee Thrift Store	100,289		
US Bank/Payroll Clearing	-		
Umpqua Bank	<u>1,015,722</u>	0.01%	
Total			\$ 28,989,011
 <b>BOARD DESIGNATED FUNDS</b>			
US Bank Savings	\$ -		
Chandler Investment Fund	<u>105,756,905</u>	4.87%	
Total			\$ 105,756,905
Building Fund	\$ -		
Cash Reserve Fund	<u>10,245,543</u>	3.32%	
Local Agency Investment Fund			\$ 10,245,543
Municipal Lease 2018			\$ -
Bonds Cash 2017			\$ 21,240
Bonds Cash 2015			\$ 170,943
GO Bonds Cash 2008			\$ 974,766
DX Imaging Education	\$ 3,431		
Workers Comp Fund - B of A	36,269		
Insurance			
Health Insurance LAIF	-		
Comprehensive Liability Insurance LAIF	<u>-</u>		
Total			<u>\$ 39,700</u>
<b>TOTAL FUNDS</b>			<b>\$ 146,198,108</b>
 <b>RESTRICTED FUNDS</b>			
Gift Fund			
US Bank Money Market	\$ 8,368	0.10%	
Foundation Restricted Donations	27,309		
Local Agency Investment Fund	<u>1,118,169</u>	3.32%	
<b>TOTAL RESTRICTED FUNDS</b>			<b><u>\$ 1,153,846</u></b>
<b>TOTAL ALL FUNDS</b>			<b><u><u>\$ 147,351,954</u></u></b>



TAHOE FOREST HOSPITAL DISTRICT  
STATEMENT OF REVENUES, EXPENSES, AND CHANGES IN NET POSITION  
JULY 2023 - PRELIMINARY

CURRENT MONTH					YEAR TO DATE					PRIOR YTD JULY 2022
ACTUAL	BUDGET	VAR\$	VAR%		ACTUAL	BUDGET	VAR\$	VAR%		
<b>OPERATING REVENUE</b>										
\$ 49,056,156	\$ 48,591,374	\$ 464,782	1.0%	Total Gross Revenue	\$ 49,056,156	\$ 48,591,374	\$ 464,782	1.0%	1 \$ 42,339,296	
<b>Gross Revenues - Inpatient</b>										
\$ 2,967,819	\$ 3,851,884	\$ (884,065)	-23.0%	Daily Hospital Service	\$ 2,967,819	\$ 3,851,884	\$ (884,065)	-23.0%	\$ 3,614,639	
4,047,670	4,174,635	(126,965)	-3.0%	Ancillary Service - Inpatient	4,047,670	4,174,635	(126,965)	-3.0%	3,977,136	
7,015,489	8,026,519	(1,011,030)	-12.6%	Total Gross Revenue - Inpatient	7,015,489	8,026,519	(1,011,030)	-12.6%	1 7,591,775	
42,040,667	40,564,855	1,475,812	3.6%	Gross Revenue - Outpatient	42,040,667	40,564,855	1,475,812	3.6%	34,747,521	
42,040,667	40,564,855	1,475,812	3.6%	Total Gross Revenue - Outpatient	42,040,667	40,564,855	1,475,812	3.6%	1 34,747,521	
<b>Deductions from Revenue:</b>										
25,114,665	23,582,627	(1,532,038)	-6.5%	Contractual Allowances	25,114,665	23,582,627	(1,532,038)	-6.5%	2 23,111,086	
219,282	971,827	752,545	77.4%	Charity Care	219,282	971,827	752,545	77.4%	2 447,167	
581,912	740,974	159,062	21.5%	Bad Debt	581,912	740,974	159,062	21.5%	2 321,104	
-	-	-	0.0%	Prior Period Settlements	-	-	-	0.0%	2 -	
25,915,859	25,295,428	(620,431)	-2.5%	Total Deductions from Revenue	25,915,859	25,295,428	(620,431)	-2.5%	23,879,357	
112,261	100,910	(11,351)	-11.2%	Property Tax Revenue- Wellness Neighborhood	112,261	100,910	(11,351)	-11.2%	92,716	
1,426,295	1,428,987	(2,692)	-0.2%	Other Operating Revenue	1,426,295	1,428,987	(2,692)	-0.2%	3 1,119,467	
24,678,853	24,825,843	(146,990)	-0.6%	TOTAL OPERATING REVENUE	24,678,853	24,825,843	(146,990)	-0.6%	19,672,122	
<b>OPERATING EXPENSES</b>										
9,762,987	10,676,330	913,343	8.6%	Salaries and Wages	9,762,987	10,676,330	913,343	8.6%	4 9,087,943	
3,839,513	3,278,465	(561,048)	-17.1%	Benefits	3,839,513	3,278,465	(561,048)	-17.1%	4 3,995,595	
65,727	108,106	42,379	39.2%	Benefits Workers Compensation	65,726	108,106	42,380	39.2%	4 87,757	
1,698,795	1,953,389	254,594	13.0%	Benefits Medical Insurance	1,698,795	1,953,389	254,594	13.0%	4 1,319,326	
545,706	568,823	23,117	4.1%	Medical Professional Fees	545,706	568,823	23,117	4.1%	5 438,954	
202,745	281,720	78,975	28.0%	Other Professional Fees	202,745	281,720	78,975	28.0%	5 257,585	
4,108,775	4,146,730	37,955	0.9%	Supplies	4,108,775	4,146,730	37,955	0.9%	6 2,862,165	
2,220,396	2,381,004	160,608	6.7%	Purchased Services	2,220,396	2,381,004	160,608	6.7%	7 1,945,734	
941,332	958,011	16,679	1.7%	Other	941,332	958,011	16,679	1.7%	8 1,129,107	
23,385,976	24,352,578	966,602	4.0%	TOTAL OPERATING EXPENSE	23,385,976	24,352,578	966,603	4.0%	21,124,166	
<b>1,292,877</b>	<b>473,265</b>	<b>819,612</b>	<b>173.2%</b>	<b>NET OPERATING REVENUE (EXPENSE) EBIDA</b>	<b>1,292,878</b>	<b>473,265</b>	<b>819,613</b>	<b>173.2%</b>	<b>(1,452,044)</b>	
<b>NON-OPERATING REVENUE/(EXPENSE)</b>										
750,239	761,590	(11,351)	-1.5%	District and County Taxes	750,239	761,590	(11,351)	-1.5%	9 701,873	
445,136	445,136	(0)	0.0%	District and County Taxes - GO Bond	445,136	445,136	(0)	0.0%	431,509	
339,851	174,753	165,098	94.5%	Interest Income	339,851	174,753	165,098	94.5%	10 75,628	
-	61,115	(61,115)	-100.0%	Donations	-	61,115	(61,115)	-100.0%	11 12,443	
(67,000)	(67,000)	-	0.0%	Gain/(Loss) on Joint Investment	(67,000)	(67,000)	-	0.0%	12 (30,000)	
226,540	100,000	126,540	-126.5%	Gain/(Loss) on Market Investments	226,540	100,000	126,540	-126.5%	13 74,314	
-	-	-	0.0%	Gain/(Loss) on Sale of Equipment	-	-	-	0.0%	14 -	
(1,372,450)	(1,366,262)	(6,188)	-0.5%	Depreciation	(1,372,450)	(1,366,262)	(6,188)	-0.5%	15 (1,201,183)	
(98,130)	(93,928)	(4,202)	-4.5%	Interest Expense	(98,130)	(93,928)	(4,202)	-4.5%	16 (94,038)	
(276,885)	(276,885)	(0)	0.0%	Interest Expense-GO Bond	(276,885)	(276,885)	(0)	0.0%	(284,210)	
(52,699)	(261,481)	208,782	79.8%	TOTAL NON-OPERATING REVENUE/(EXPENSE)	(52,699)	(261,481)	208,782	79.8%	(313,664)	
<b>\$ 1,240,178</b>	<b>\$ 211,784</b>	<b>\$ 1,028,394</b>	<b>485.6%</b>	<b>INCREASE (DECREASE) IN NET POSITION</b>	<b>\$ 1,240,178</b>	<b>\$ 211,784</b>	<b>\$ 1,028,394</b>	<b>485.6%</b>	<b>\$ (1,765,708)</b>	
<b>NET POSITION - BEGINNING OF YEAR</b>					<b>269,988,529</b>					
<b>NET POSITION - AS OF JULY 31, 2023</b>					<b>\$ 271,228,707</b>					
<b>2.6%</b>	<b>1.0%</b>	<b>1.7%</b>	<b>2.6%</b>	<b>RETURN ON GROSS REVENUE EBIDA</b>	<b>2.6%</b>	<b>1.0%</b>	<b>1.7%</b>		<b>-3.4%</b>	

**TAHOE FOREST HOSPITAL DISTRICT  
NOTES TO STATEMENT OF REVENUE, EXPENSES, AND CHANGES IN NET POSITION  
JULY 2023 - PRELIMINARY**

		<b>Variance from Budget</b>	
		<b>Fav / &lt;Unfav&gt;</b>	
		<b>JULY 2023</b>	<b>YTD 2023</b>
<b>1) Gross Revenues</b>			
Acute Patient Days were below budget 26.32% or 133 days. Swing Bed days were above budget 10.00% or 2 days. Inpatient Ancillary Revenues were below budget 3.00% due to the decrease in Patient Days.	Gross Revenue -- Inpatient	\$ (1,011,030)	\$ (1,011,030)
	Gross Revenue -- Outpatient	1,475,812	1,475,812
	Gross Revenue -- Total	\$ 464,782	\$ 464,782
<p>Outpatient volumes were above budget in the following departments: Home Health visits, Lab Send Out tests, Oncology Lab tests, Diagnostic Imaging, Radiation Oncology procedures, Nuclear Medicine, MRI, Ultrasound, Briner Ultrasound, CAT Scans, Drugs Sold to Patients, Respiratory Therapy, Gastroenterology cases, Tahoe City Physical Therapy, and Outpatient Physical Therapy, Physical Therapy Aquatic, and Occupational Therapy.</p> <p>Outpatient volumes were below budget in the following departments: Emergency Department visits, Hospice visits, Surgery cases, Laboratory tests, Pathology, Blood Units, Mammography, Medical Oncology procedures, PET CT, Oncology Drugs Sold to Patients, and Tahoe City Occupational Therapy.</p>			
<b>2) Total Deductions from Revenue</b>			
The payor mix for July shows a 2.27% increase to Medicare, a .82% decrease to Medi-Cal, .95% decrease to Other, County at budget, and a .50% decrease to Commercial when compared to budget. Revenues came in above budget 1.00%, we saw a shift in Payor Mix from Commercial to Medicare, and the Business Office continues their efforts in cleaning up older claims in EPIC, lending to the negative variance in Contractual Allowances.	Contractual Allowances	\$ (1,532,038)	\$ (1,532,038)
	Charity Care	752,545	752,545
	Charity Care - Catastrophic	-	-
	Bad Debt	159,062	159,062
	Prior Period Settlements	-	-
	Total	\$ (620,431)	\$ (620,431)
<b>3) Other Operating Revenue</b>			
Retail Pharmacy revenues were above budget 7.50%.	Retail Pharmacy	37,537	37,537
	Hospice Thrift Stores	2,468	2,468
	The Center (non-therapy)	(1,949)	(1,949)
Hospice Thrift Store revenues were above budget 2.33%.	IVCH ER Physician Guarantee	(8,425)	(8,425)
	Children's Center	5,052	5,052
	Miscellaneous	(22,043)	(22,043)
The Center (non-therapy) revenues were below budget 9.14% in the Fitness Center and PT Product Sales.	Oncology Drug Replacement	-	-
	Grants	(15,333)	(15,333)
Children's Center revenues were above budget 3.74%.	Total	\$ (2,692)	\$ (2,692)
Rebates & Refunds were below budget, creating a negative variance in Miscellaneous.			
<b>4) Salaries and Wages</b>			
	Total	\$ 913,343	\$ 913,343
<b>Employee Benefits</b>			
We saw greater use of Paid Leave in the categories of RNs, Clerical, Physicians, and Management, creating a negative variance in PL/SL. This is lending to the positive variance in Salaries and Wages.	PL/SL	\$ (592,085)	\$ (592,085)
	Nonproductive	71,679	71,679
	Pension/Deferred Comp	7,020	7,020
	Standby	(39,027)	(39,027)
	Other	(8,634)	(8,634)
	Total	\$ (561,048)	\$ (561,048)
<b>Employee Benefits - Workers Compensation</b>	Total	\$ 42,379	\$ 42,379
<b>Employee Benefits - Medical Insurance</b>	Total	\$ 254,594	\$ 254,594
<b>5) Professional Fees</b>			
Urology Locums fees created a negative variance in Multi-Specialty Clinics.	Multi-Specialty Clinics	\$ (9,786)	\$ (9,786)
	Miscellaneous	(8,435)	(8,435)
Anesthesiology Physician fees created a negative variance in Miscellaneous.	Marketing	(1,223)	(1,223)
	IVCH ER Physicians	(283)	(283)
Decreased use of Mercy resources for system implementations/integrations created a positive variance in Information Technology.	Home Health/Hospice	-	-
	TFH/IVCH Therapy Services	-	-
Outsourced legal and consulting services were below budget, creating a positive variance in Administration.	Patient Accounting/Admitting	-	-
	Respiratory Therapy	-	-
	Medical Staff Services	800	800
Emergency Department and Hospitalist physician fees were below budget, creating a positive variance in TFH Locums.	Multi-Specialty Clinics Administration	1,148	1,148
	Corporate Compliance	2,000	2,000
	Managed Care	6,667	6,667
	Oncology	6,775	6,775
	Human Resources	6,857	6,857
	Financial Administration	7,500	7,500
	Information Technology	20,113	20,113
	Administration	32,072	32,072
	TFH Locums	37,886	37,886
	The Center	-	-
	Total	\$ 102,092	\$ 102,092

**TAHOE FOREST HOSPITAL DISTRICT  
NOTES TO STATEMENT OF REVENUE, EXPENSES, AND CHANGES IN NET POSITION  
JULY 2023 - PRELIMINARY**

		<u>Variance from Budget</u>	
		<u>Fav / &lt;Unfav&gt;</u>	
		<u>JULY 2023</u>	<u>YTD 2023</u>
<b>6) <u>Supplies</u></b>			
Drugs Sold to Patients volumes were above budget 14%, creating a negative variance in Pharmacy Supplies.	Pharmacy Supplies	\$ (173,403)	\$ (173,403)
	Food	808	808
	Other Non-Medical Supplies	1,701	1,701
	Office Supplies	7,598	7,598
	Minor Equipment	20,915	20,915
	Patient & Other Medical Supplies	180,337	180,337
	<b>Total</b>	<b>\$ 37,955</b>	<b>\$ 37,955</b>
<b>7) <u>Purchased Services</u></b>			
Network Maintenance and Software services were above budget, creating a negative variance in Information Technology.	Information Technology	\$ (7,323)	\$ (7,323)
	Laboratory	(3,312)	(3,312)
	Pharmacy IP	(614)	(614)
	Home Health/Hospice	251	251
Lab Send Out tests were above budget, creating a negative variance in Laboratory.	Multi-Specialty Clinics	2,487	2,487
	Community Development	3,333	3,333
	The Center	4,920	4,920
	Medical Records	5,087	5,087
Wellness Neighborhood and Foundation Stewardship purchased services were below budget, creating a positive variance in Miscellaneous.	Diagnostic Imaging Services - All	9,754	9,754
	Miscellaneous	29,126	29,126
Outsourced billing and collections services in Patient Accounting were below budget, creating a positive variance in Patient Accounting	Patient Accounting	30,709	30,709
	Human Resources	33,496	33,496
Pre-Employment Health screenings were below budget, creating a positive variance in Human Resources.	Department Repairs	52,696	52,696
	<b>Total</b>	<b>\$ 160,608</b>	<b>\$ 160,608</b>
Information Technology maintenance costs came in below budget, creating a positive variance in Department Repairs.			
<b>8) <u>Other Expenses</u></b>			
Expense advances for the IVCH Foundation's Beach Boys Concert created a negative variance in Miscellaneous.	Miscellaneous	\$ (175,372)	\$ (175,372)
	Other Building Rent	(3,655)	(3,655)
	Multi-Specialty Clinics Bldg. Rent	(1,625)	(1,625)
	Multi-Specialty Clinics Equip Rent	(949)	(949)
Media Branding, Website Maintenance, and Yellow Page Advertising were below budget, creating a positive variance in Marketing.	Physician Services	139	139
	Insurance	3,203	3,203
	Dues and Subscriptions	6,715	6,715
	Equipment Rent	7,774	7,774
Natural Gas/Propane, Telephone, and Electricity costs were below budget, creating a positive variance in Utilities.	Human Resources Recruitment	10,000	10,000
	Marketing	39,475	39,475
	Utilities	41,840	41,840
	Outside Training & Travel	89,134	89,134
	<b>Total</b>	<b>\$ 16,679</b>	<b>\$ 16,679</b>
<b>9) <u>District and County Taxes</u></b>	Total	<b>\$ (11,351)</b>	<b>\$ (11,351)</b>
<b>10) <u>Interest Income</u></b>	Total	<b>\$ 165,098</b>	<b>\$ 165,098</b>
<b>11) <u>Donations</u></b>	IVCH	\$ (16,667)	\$ (16,667)
	Operational	(44,448)	(44,448)
	<b>Total</b>	<b>\$ (61,115)</b>	<b>\$ (61,115)</b>
<b>12) <u>Gain/(Loss) on Joint Investment</u></b>	Total	<b>\$ -</b>	<b>\$ -</b>
<b>13) <u>Gain/(Loss) on Market Investments</u></b>	Total	<b>\$ 126,540</b>	<b>\$ 126,540</b>
The District booked the value of unrealized gains in its holdings with Chandler Investments.			
<b>14) <u>Gain/(Loss) on Sale or Disposal of Assets</u></b>	Total	<b>\$ -</b>	<b>\$ -</b>
<b>15) <u>Depreciation Expense</u></b>	Total	<b>\$ (6,188)</b>	<b>\$ (6,188)</b>
<b>16) <u>Interest Expense</u></b>	Total	<b>\$ (4,202)</b>	<b>\$ (4,202)</b>

INCLINE VILLAGE COMMUNITY HOSPITAL  
STATEMENT OF REVENUE AND EXPENSE  
JULY 2023 - PRELIMINARY

CURRENT MONTH				YEAR TO DATE				PRIOR YTD JULY 2022			
ACTUAL	BUDGET	VAR\$	VAR%		ACTUAL	BUDGET	VAR\$	VAR%			
				<b>OPERATING REVENUE</b>							
\$ 3,832,925	\$ 3,534,359	\$ 298,566	8.4%	Total Gross Revenue	\$ 3,832,925	\$ 3,534,359	\$ 298,566	8.4%	1	\$ 3,139,004	
				<b>Gross Revenues - Inpatient</b>							
\$ -	\$ -	\$ -	0.0%	Daily Hospital Service	\$ -	\$ -	\$ -	0.0%		\$ -	
-	1,144	(1,144)	-100.0%	Ancillary Service - Inpatient	-	1,144	(1,144)	-100.0%		(473)	
-	1,144	(1,144)	-100.0%	Total Gross Revenue - Inpatient	-	1,144	(1,144)	-100.0%	1	(473)	
3,832,925	3,533,215	299,710	8.5%	Gross Revenue - Outpatient	3,832,925	3,533,215	299,710	8.5%		3,139,477	
3,832,925	3,533,215	299,710	8.5%	Total Gross Revenue - Outpatient	3,832,925	3,533,215	299,710	8.5%	1	3,139,477	
				<b>Deductions from Revenue:</b>							
1,539,067	1,590,467	51,400	3.2%	Contractual Allowances	1,539,067	1,590,467	51,400	3.2%	2	1,502,825	
18,574	70,687	52,113	73.7%	Charity Care	18,574	70,687	52,113	73.7%	2	15,217	
112,841	53,015	(59,826)	-112.8%	Bad Debt	112,841	53,015	(59,826)	-112.8%	2	2,803	
-	-	-	0.0%	Prior Period Settlements	-	-	-	0.0%	2	-	
1,670,481	1,714,169	43,688	2.5%	Total Deductions from Revenue	1,670,481	1,714,169	43,688	2.5%	2	1,520,845	
72,689	81,148	(8,459)	-10.4%	Other Operating Revenue	72,689	81,148	(8,459)	-10.4%	3	51,861	
2,235,132	1,901,338	333,794	17.6%	<b>TOTAL OPERATING REVENUE</b>	2,235,132	1,901,338	333,794	17.6%		1,670,020	
				<b>OPERATING EXPENSES</b>							
667,166	686,342	19,176	2.8%	Salaries and Wages	667,166	686,342	19,176	2.8%	4	607,113	
176,518	209,947	33,429	15.9%	Benefits	176,518	209,947	33,429	15.9%	4	255,808	
532	3,157	2,625	83.1%	Benefits Workers Compensation	532	3,157	2,625	83.1%	4	427	
104,137	119,744	15,607	13.0%	Benefits Medical Insurance	104,137	119,744	15,607	13.0%	4	83,667	
151,863	152,247	384	0.3%	Medical Professional Fees	151,863	152,247	384	0.3%	5	145,830	
2,306	2,306	(0)	0.0%	Other Professional Fees	2,306	2,306	(0)	0.0%	5	2,006	
58,242	65,705	7,463	11.4%	Supplies	58,242	65,705	7,463	11.4%	6	54,988	
145,693	174,559	28,866	16.5%	Purchased Services	145,693	174,559	28,866	16.5%	7	91,670	
176,136	59,230	(116,906)	-197.4%	Other	176,136	59,230	(116,906)	-197.4%	8	120,605	
1,482,593	1,473,237	(9,356)	-0.6%	<b>TOTAL OPERATING EXPENSE</b>	1,482,593	1,473,237	(9,356)	-0.6%		1,362,114	
<b>752,539</b>	<b>428,101</b>	<b>324,438</b>	<b>75.8%</b>	<b>NET OPERATING REV(EXP) EBIDA</b>	<b>752,539</b>	<b>428,101</b>	<b>324,438</b>	<b>75.8%</b>		<b>307,906</b>	
				<b>NON-OPERATING REVENUE/(EXPENSE)</b>							
-	16,667	(16,667)	-100.0%	Donations-IVCH	-	16,667	(16,667)	-100.0%	9	3,568	
-	-	-	0.0%	Gain/ (Loss) on Sale	-	-	-	0.0%	10	-	
(124,349)	(123,812)	(537)	0.4%	Depreciation	(124,349)	(123,812)	(537)	-0.4%	11	(77,026)	
(1,456)	(1,456)	-	0.0%	Interest Expense	(1,456)	(1,456)	-	0.0%	12	-	
(125,805)	(108,601)	(17,204)	-15.8%	<b>TOTAL NON-OPERATING REVENUE/(EXP)</b>	(125,805)	(108,601)	(17,204)	-15.8%		(73,458)	
<b>\$ 626,734</b>	<b>\$ 319,500</b>	<b>\$ 307,234</b>	<b>96.2%</b>	<b>EXCESS REVENUE(EXPENSE)</b>	<b>\$ 626,734</b>	<b>\$ 319,500</b>	<b>\$ 307,234</b>	<b>96.2%</b>		<b>\$ 234,448</b>	
<b>19.6%</b>	<b>12.1%</b>	<b>7.5%</b>		<b>RETURN ON GROSS REVENUE EBIDA</b>	<b>19.6%</b>	<b>12.1%</b>	<b>7.5%</b>			<b>9.8%</b>	

**INCLINE VILLAGE COMMUNITY HOSPITAL  
NOTES TO STATEMENT OF REVENUE AND EXPENSE  
JULY 2023 - PRELIMINARY**

		<u>Variance from Budget</u>	
		<u>Fav&lt;Unfav&gt;</u>	
		<u>JULY 2023</u>	<u>YTD 2023</u>
<b>1) <u>Gross Revenues</u></b>			
Acute Patient Days were at budget at 0 and Observation Days were at budget at 1. Prior period charge capture corrections created a negative variance in Gross Revenue-Inpatient.	Gross Revenue -- Inpatient	\$ (1,144)	\$ (1,144)
	Gross Revenue -- Outpatient	299,710	299,710
		<u>\$ 298,566</u>	<u>\$ 298,566</u>
Outpatient volumes were above budget in Surgery cases, Lab Send Out tests, Ultrasounds, CAT Scans, Drugs Sold to Patients, Physical, Speech, and Occupational Therapies.			
Outpatient volumes were below budget in Emergency Department visits, Laboratory tests, EKG, Diagnostic Imaging, Respiratory Therapy, and Gastroenterology cases.			
<b>2) <u>Total Deductions from Revenue</u></b>			
We saw a shift in our payor mix with a .12% increase in Medicare, a .89% decrease in Medicaid, a 1.05% increase in Commercial insurance, a .28% decrease in Other, and County was at budget. Outpatient Revenues were above budget 8.5% along with the shift into Commercial from Medicaid and an increase in Bad Debt over budget, which created a positive variance in Contractual Allowances.	Contractual Allowances	\$ 51,400	\$ 51,400
	Charity Care	52,113	52,113
	Charity Care-Catastrophic Event	-	-
	Bad Debt	(59,826)	(59,826)
	Prior Period Settlement	-	-
	Total	<u>\$ 43,688</u>	<u>\$ 43,688</u>
<b>3) <u>Other Operating Revenue</u></b>			
IVCH ER Physician Guarantee is tied to collections, coming in below budget in July.	IVCH ER Physician Guarantee	\$ (8,425)	\$ (8,425)
	Miscellaneous	(34)	(34)
	Total	<u>\$ (8,459)</u>	<u>\$ (8,459)</u>
<b>4) <u>Salaries and Wages</u></b>			
	Total	<u>\$ 19,176</u>	<u>\$ 19,176</u>
<b><u>Employee Benefits</u></b>			
	PL/SL	\$ 28,164	\$ 28,164
	Pension/Deferred Comp	(0)	(0)
	Standby	(5,066)	(5,066)
	Other	751	751
	Nonproductive	9,580	9,580
	Total	<u>\$ 33,429</u>	<u>\$ 33,429</u>
<b><u>Employee Benefits - Workers Compensation</u></b>			
	Total	<u>\$ 2,625</u>	<u>\$ 2,625</u>
<b><u>Employee Benefits - Medical Insurance</u></b>			
	Total	<u>\$ 15,607</u>	<u>\$ 15,607</u>
<b>5) <u>Professional Fees</u></b>			
	IVCH ER Physicians	\$ (283)	\$ (283)
	Therapy Services	-	-
	Administration	-	-
	Miscellaneous	-	-
	Foundation	-	-
	Multi-Specialty Clinics	667	667
	Total	<u>\$ 384</u>	<u>\$ 384</u>
<b>6) <u>Supplies</u></b>			
Non-Patient Chargeable Supplies were above budget, creating a negative variance in Patient & Other Medical Supplies.	Patient & Other Medical Supplies	\$ (4,475)	\$ (4,475)
	Office Supplies	158	158
	Food	215	215
	Non-Medical Supplies	261	261
	Minor Equipment	1,830	1,830
	Pharmacy Supplies	9,475	9,475
	Total	<u>\$ 7,463</u>	<u>\$ 7,463</u>
Drugs Sold to Patients volumes exceeded budget by 14%, however, the mix of drugs administered were lower in cost, creating a positive variance in Pharmacy Supplies.			

**INCLINE VILLAGE COMMUNITY HOSPITAL  
NOTES TO STATEMENT OF REVENUE AND EXPENSE  
JULY 2023 - PRELIMINARY**

		<b>Variance from Budget</b>	
		<b>Fav&lt;Unfav&gt;</b>	
		<b>JULY 2023</b>	<b>YTD 2023</b>
<b>7) <u>Purchased Services</u></b>			
Laboratory Send Out tests were above budget 15%, creating a negative variance in Laboratory.	Laboratory	\$ (3,491)	\$ (3,491)
	Diagnostic Imaging Services - All	(1,464)	(1,464)
	Engineering/Plant/Communications	(1,013)	(1,013)
	Miscellaneous	228	228
Department Repairs were below budget in Diagnostic Imaging, Ultrasound, and Engineering.	Pharmacy	383	383
	EVS/Laundry	535	535
	Multi-Specialty Clinics	581	581
Stewardship Purchased Services were below budget, creating a positive variance in Foundation.	Department Repairs	6,773	6,773
	Foundation	26,333	26,333
	<b>Total</b>	<b>\$ 28,866</b>	<b>\$ 28,866</b>
<b>8) <u>Other Expenses</u></b>			
Expenses advanced for the Foundation's Beach Boy's Concert created a negative variance in Miscellaneous.	Miscellaneous	\$ (129,760)	\$ (129,760)
	Other Building Rent	(4,020)	(4,020)
	Dues and Subscriptions	(2,012)	(2,012)
	Multi-Specialty Clinics Bldg. Rent	(438)	(438)
Dues & Subscriptions were above budget in MSC Ophthalmology, Physical Therapy, and Administration.	Physician Services	-	-
	Insurance	716	716
	Equipment Rent	1,969	1,969
Water/Sewer and Telephone expenses were below budget, creating a positive variance in Utilities.	Marketing	2,273	2,273
	Outside Training & Travel	4,767	4,767
	Utilities	9,600	9,600
	<b>Total</b>	<b>\$ (116,906)</b>	<b>\$ (116,906)</b>
<b>9) <u>Donations</u></b>			
	<b>Total</b>	<b>\$ (16,667)</b>	<b>\$ (16,667)</b>
<b>10) <u>Gain/(Loss) on Sale</u></b>			
	<b>Total</b>	<b>\$ -</b>	<b>\$ -</b>
<b>11) <u>Depreciation Expense</u></b>			
	<b>Total</b>	<b>\$ (537)</b>	<b>\$ (537)</b>
<b>12) <u>Interest Expense</u></b>			
	<b>Total</b>	<b>\$ -</b>	<b>\$ -</b>

TAHOE FOREST HOSPITAL DISTRICT  
STATEMENT OF CASH FLOWS

	PRELIMINARY FYE 2023		BUDGET FYE 2024	PROJECTED FYE 2024	ACTUAL JULY 2023	BUDGET JULY 2023	DIFFERENCE	PROJECTED 1ST QTR	BUDGET 2ND QTR	BUDGET 3RD QTR	PROJECTED 4TH QTR
Net Operating Rev/(Exp) - EBIDA	28,732,169		12,535,783	13,355,396	\$ 1,292,878	\$ 473,265	\$ 819,613	4,498,274	3,793,952	2,815,796	2,247,373
Interest Income	1,345,270		2,000,000	2,012,172	362,172	350,000	12,172	512,172	500,000	500,000	500,000
Property Tax Revenue	10,063,960		10,190,000	9,990,000	-	200,000	(200,000)	450,000	-	5,400,000	4,140,000
Donations	1,574,358		6,733,375	6,672,260	-	61,115	(61,115)	122,229	183,344	183,344	6,183,344
Debt Service Payments	(5,216,044)		(3,981,665)	(3,977,103)	(348,401)	(1,016,178)	667,777	(1,054,326)	(915,777)	(727,486)	(1,279,514)
Property Purchase Agreement	(811,927)		(811,927)	(811,928)	(67,662)	(67,661)	(1)	(202,983)	(202,982)	(202,982)	(202,982)
2018 Municipal Lease	(1,717,326)		(715,553)	(715,553)	(143,111)	(143,111)	-	(429,332)	(286,221)	-	-
Copier	(63,919)		(47,871)	(43,308)	(531)	(5,094)	4,563	(10,719)	(15,282)	(15,282)	(2,025)
2017 VR Demand Bond	(840,606)		(761,145)	(761,145)	-	(663,215)	663,215	-	-	(97,930)	(663,215)
2015 Revenue Bond	(1,782,266)		(1,645,169)	(1,645,169)	(137,097)	(137,097)	0	(411,292)	(411,292)	(411,292)	(411,292)
Physician Recruitment	(476,666)		(1,146,666)	(1,146,666)	-	(83,333)	83,333	(216,667)	(316,666)	(280,000)	(333,333)
Investment in Capital											
Equipment	(2,315,113)		(4,545,602)	(4,545,601)	(108,043)	(919,992)	811,949	(2,759,976)	(1,483,125)	(170,500)	(132,000)
IT/EMR/Business Systems	(710,081)		(2,818,739)	(2,818,739)	-	(226,383)	226,383	(679,149)	(885,420)	(922,920)	(331,250)
Building Projects/Properties	(21,471,856)		(21,287,010)	(21,287,010)	(120,629)	(1,315,500)	1,194,871	(3,946,500)	(4,678,500)	(7,327,260)	(5,334,750)
Change in Accounts Receivable	(2,365,689)	N1	(2,859,354)	(1,376,384)	128,871	(2,638,601)	2,767,472	(1,058,400)	620,615	(625,643)	(312,955)
Change in Settlement Accounts	(6,219,758)	N2	4,265,118	4,081,784	(941,667)	(758,333)	(183,334)	(1,775,834)	(981,259)	(4,874,080)	11,712,957
Change in Other Assets	(4,705,535)	N3	(3,500,000)	(4,527,065)	(1,427,065)	(400,000)	(1,027,065)	(2,127,065)	(1,050,000)	(100,000)	(1,250,000)
Change in Other Liabilities	(7,491,243)	N4	(4,400,000)	(2,743,181)	1,156,819	(500,000)	1,656,819	(1,843,181)	(3,000,000)	(2,900,000)	5,000,000
Change in Cash Balance	(9,256,228)		(8,814,760)	(6,310,135)	(5,065)	(6,773,940)	6,768,875	(9,878,421)	(8,212,836)	(9,028,750)	20,809,871
Beginning Unrestricted Cash	154,252,753		144,996,525	144,996,525	144,996,525	144,996,525	-	144,996,525	135,118,103	126,905,267	117,876,518
Ending Unrestricted Cash	144,996,525		136,181,765	138,686,389	144,991,460	138,222,585	6,768,875	135,118,103	126,905,267	117,876,518	138,686,389
Operating Cash	144,996,525		136,181,765	138,686,389	144,991,460	138,222,585	6,768,875	135,118,103	126,905,267	117,876,518	138,686,389
Expense Per Day	736,933		803,035	800,398	757,552	788,597	(31,045)	779,159	783,352	797,076	800,398
Days Cash On Hand	197		170	173	191	175	16	173	162	148	173

Footnotes:

N1 - Change in Accounts Receivable reflects the 30 day delay in collections.

N2 - Change in Settlement Accounts reflect cash flows in and out related to prior year and current year Medicare and Medi-Cal settlement accounts.

N3 - Change in Other Assets reflect fluctuations in asset accounts on the Balance Sheet that effect cash. For example, an increase in prepaid expense immediately effects cash but not EBIDA.

N4 - Change in Other Liabilities reflect fluctuations in liability accounts on the Balance Sheet that effect cash. For example, an increase in accounts payable effects EBIDA but not cash.



## Board Informational Report

**By: Harry Weis**  
President and CEO

**DATE: August 15, 2023**

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It is a bit early to evaluate year over year overall health system growth, so we will wait and report on growth or lack thereof in the future. The month of July was strong and exceeded our budget expectations.

It is great to see that our continual focus on patient access is showing some improvements as we have grown from 117,000 provider clinic visits in Fiscal Year 2022 to over 129,000 provider clinic visits in Fiscal Year 2023. Significant opportunities still exist to improve timely access.

Our 7-day a week urgent care program is showing strong daily visits and the Emergency Room seems to be showing strong visit levels as well.

As we talk to health systems, all health systems are reporting growing patient access challenges these days.

We will be looking at all patient care site options for patient access improvements in the communities within our healthcare district.

It is absolutely vital that we find a path to success for a large parking garage to restore function and order for the massive number of patients who seek our services daily.

We are excited to take a deep look at all health system processes as we have grown possibly more than any other health system over the last eight years and we need to remove all unnecessary steps for patient care and in the work our team provides. Our LEAN management improvement efforts are vital for us to move forward to be more sustainable.

We believe the only surviving health systems of the future will have to strongly demonstrate top quartile patient experience, quality of care and business efficiency/productivity.

It is also vital as we move forward that we operate as a “true team of one” across all functions in our health system. Healthcare was delivered over many years in the past in a more fractured, non-standardized model. Now, it has to be truly delivered via a very tight knit team offering standardized clinical approaches that are best practice in all possible functional areas.

We are offering important team engagement sessions with our managers, directors and board within the next month or so on the important longer-term outlook on healthcare and our critical next two years for improvement actions.



With many upcoming evolving state policies or laws, it is critical everyone in our system maximize the next two years to standardize and improve all patient functions to have a strong viability path available to our health system for the longer term.

SB 525 and the California Office of Healthcare Affordability's future actions pose major risks to us and the survival of many California hospitals. We must never take these very serious challenges for granted.

We have been active talking to our State Senator and even the California Governor recently on the present and future challenges that California hospitals face.

The health insurance plans being commonly sold today with very large patient and family deductibles and very high monthly premiums, coupled with record quarterly and annual profits by the health insurance companies only add to family budget problems and to the survival problems of hospitals.

There cannot be a "sacred circle of no action" drawn around the very high annual price increases for medical supplies, equipment and drug prices hospitals, consumers and businesses pay, and the very high annual health insurance premium increases with no actions in this "sacred circle" by regulators with the only regulatory attack being on physician and hospital operations and pricing, as this simply will not work and makes no sense.

We continue to monitor the complete disenrollment of all Medicaid enrollees in the US and in our area and their reenrollment success or challenges. It will take more time to comment on this nationwide change that is likely to really elevate bad debt or charity care for us and many health systems.

We will be tracking as a few more months unfold the year over year inflation in Fiscal Year 2024 versus the very high inflation levels experienced in Fiscal Year 2023. We hope to see inflation lessen year over year.

We actively use Artificial Intelligence (AI) to assist radiologists in our Mammography service line. AI will continue to be a large and growing topic for the future of healthcare.

We will continue to watch and monitor virtual healthcare patient and provider interactions and the use of equipment to monitor the health status of patients from home to observe viable and non-viable trends for rural health systems.

We have enjoyed several large community engagement events in the last month with our various communities and we value the comments that have been shared with us.

**By: Louis Ward**  
Chief Operating Officer

**DATE: August 2023**

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**Quality: Provide excellent patient focused quality care**

*Identify and promote best practice and evidence-based medicine*

- **Extended Care Center (ECC) California Department of Public Health annual survey**  
This month the ECC was visited by the California Department of Public Health (CDPH) for an unannounced annual survey. The ECC team performed wonderfully throughout the survey. The survey team from CDPH was very complimentary of our staff while they observed resident care. CDPH shared their findings with the team at the end of the week which was only one minor deficiency. Our thanks and congratulations goes out to the entire ECC team for a wonderful job taking care of our residents!

**Growth: Expand and foster community and regional relationships**

*Explore and engage beneficial collaborations and partnerships*

- **Memorandum of Agreement with the Town of Truckee**  
We are pleased to announce a Memorandum of Agreement (MOA), a document crafted to provide future road rules and responsibilities has been agreed to and executed by both the Town of Truckee and Tahoe Forest Health System.

**Service: Deliver Outstanding Patient & Family Experience**

*Implement an enterprise-wide master plan*

- **Tahoe Forest Master Plan has been put on pause for the foreseeable future.**  
Tahoe Forest Hospital District has decided to pause the Master Plan efforts for the foreseeable future. There are a multitude of reasons for this decision which are listed below:
  - A rapidly changing technological landscape in the delivery of Healthcare. We intend to develop a strategy to further expand our telehealth technologies as demand for a virtual healthcare delivery model is increasing in the area. Considering this recent shift in demand and adoption of virtual care for low acuity clinics visits, Administration needs to reexamine the size and scope of new patient care buildings are necessary to meet the community's future needs.
  - TFHD is rapidly adapting to a new regulatory environment in the State of California.
  - Administration is anticipating new legislation likely to become law that will impact employee compensation, structural seismic requirements and employee to patient ratios
  - Continuing inflationary impacts on supply costs (Nearly 20%), and growing labor costs, and new regulatory burdens need to be further examined

TFHD continues to focus on parking, workforce housing, seismic requirements and patient care access as immediate needs of the Health System. We intend to work with the Town of Truckee and the Department of Health Care Access and Information on these efforts.

**Service: Optimize Deliver Model to Achieve Operational and Clinical Efficiency**  
*Implement a focused master plan*

Report provided by Dylan Crosby, Director Facilities and Construction Management

**Active Moves:**

Wellness – Levon Professional Building on August 10<sup>th</sup>

**Active Projects:**

**Project:** Underground Storage and Day Tank Replacement.

**Background:** The existing Diesel underground storage is 30 years old in need of replacement. Staff analyzed if an above ground tank would be suitable, due to site constrained it was determined that a replacement underground tank would best serve the hospital.

**Summary of Work:** Removal of the existing Underground storage tank, day tank and day tank structure (not compliant). Excavate and install a new 15,000-gallon underground tank in the ambulance bay. A new day tank will be installed in the 500 KW generator room.

**Update Summary:** Project in 99% complete and Levon operations are back to normal. Staff are working on punchlist and HCAI closeout

**Start of Construction:** May 2022

**Estimated Completion:** July 2023

**Project:** Martis Outlook Plastics

**Background:** Staff have focused on providing health care services in the Eastern portion of Truckee. Property was acquired in 2021 at the Martis Outlook Building to realize this goal.

**Summary of Work:** Demo interiors of existing suite to build out new clinic space.

**Update Summary:** Utilities inspection ongoing, drywall is starting.

**Start of Construction:** Spring 2023

**Estimated Completion:** Winter 2023

**Project:** Martis Outlook Primary Care

**Background:** Staff have focused on providing health care services in the Eastern portion of Truckee. Property was acquired in 2021 at the Martis Outlook Building to realize this goal.

**Summary of Work:** Demo interiors of existing suite to build out new clinic space.

**Update Summary:** Utilities inspection ongoing, drywall is starting.

**Start of Construction:** Spring 2023

**Estimated Completion:** Winter 2023

**Project:** Incline Village Community Hospital X-Ray and CT Replacement

**Background:** Incline Village Community Hospital has been provided a grant opportunity to support the replacement of the X-Ray and CT at the Hospital. Various components of the X-Ray are end of service and end of support. The CT is approaching end of service. The new CT will be replaced with a new 128 slice machine, existing 16 slices.

**Summary of Work:** Provide temporary accommodations to ensure hospital can provide X-Ray and CT services during the project. Replace X-Ray and CT equipment and modify space for code compliance and improved staff and patient workflow.

**Update Summary:** Concrete and under slab utilities are wrapping up, transitioning to framing and utilities.

**Start of Construction:** Spring 2023

**Estimated Completion:** Fall 2023

## Projects in Planning:

**Project:** Tahoe Forest Hospital Seismic Improvement

**Background:** In 2012, Tahoe Forest Hospital completed an expansive seismic improvement job to extend the allowance of acute care service in many of the Hospital buildings up to and beyond the 2030 deadline determined by Senate Bill 1953. This project is Phase one of three in a compliance plan to meet the full 2030 deadline.

**Summary of Work:** Upgrade four buildings (the 1978, 1990, 1993 and Med Gas) to Non-Structural Performance Category “NPC” 4 status. Renovate the Diagnostic Imaging reception, waiting room and X-Ray to increase capacity and receive new equipment. Renovate Emergency Department beds 8-15 to provide addition patient privacy. Renovate Emergency Department beds 4-7 to private rooms. Aesthetic upgrades of the 1978 and 1990 buildings including but not limited to flooring, ceilings, signage and painting.

1978 Building – Diagnostic Imaging, portions of Emergency Department

1990 Building – Portions of the Surgical Department

1993 Building – Portions of the Dietary Department

Med Gas Building – Primary Med Gas distribution building.

**Update Summary** Project has been put on hold with the exception of the ATS emergency work. The replacement of this ATS has been moved forward on an emergency project status. Plans are approved by HCAI and project is kicking off.

**Start of Construction:** Summer 2023

**Estimated Completion:** Winter 2025

**Project:** Levon Parking Structure

**Background:** Demand for parking Tahoe Forest Hospital has far exceeded its capacity. This project is to create a staff parking structure to meet the current and future needs of staff and importantly provide accessible parking for our patients.

**Summary of Work:** Project intent is to concurrently work on this project thru the entitlements effort on the Tahoe Forest Master Plan effort. This project being dependent on the Master Plan approval. This project will provide upwards of 225 parking stalls and various biking parking opportunities to support the parking need of the Tahoe Forest campus. The use intent is for this structure to service staff being located off Levon Ave, the Hospital service corridor.

**Update Summary:** Start are working on the revises project program to solidify scope.

**Start of Construction:** TBD

**Estimated Completion:** TBD

**Project:** Lake Street Housing

**Background:** On-Call housing and On-Boarding housing are critical to district operations and recruitment of talented employees.

**Summary of Work:** Demolish 10151 & 10145 Lake Ave to create 2 new duplex houses to be utilized for recruitment and retention. As well as create 10 new studio apartments to support the Hospitals On Boarding needs.

**Update Summary:** Project has been withdrawn.

**Start of Construction:** Summer 2024

**Estimated Completion:** Fall 2025

**Project:** Gateway RHC Expansion

**Background:** With the longevity of the existing Gateway Building in the Master Plan staff are looking to maximize the utilization. Staff will be working to expand the current RHC to provide Dental, Opto, Behavioral Health and Out Patient Lab Services.

**Summary of Work:** Remodel 8 suites within the Building.

**Update Summary** Project is on hold for programming validation.

**Start of Construction:** Fall 2023

**Estimated Completion:** Winter 2025

**Project:** Med Surg/ICU Remodel.

**Background:** With the Med Surg/ICU in use for over 17 years, the rooms are in need of updates both for aesthetics and operational efficiency.

**Summary of Work:** Remove and replace all finishes with Patient rooms. Remodel portions of the support space to promote operational efficiency.

**Update Summary** Project has been withdrawn.

**Start of Construction:** TBD

**Estimated Completion:** TBD

**Project:** Incline Village Community Hospital Boiler and M1 Air Handler Replacement.

**Background:** Replacement of original 1980s equipment essential for air flow and heating the building to improve reliability and energy efficiency. This existing equipment is end of life.

**Summary of Work:** Remove and Replace, like in kind, the existing M1 air handler which feeds the Western Half of the Building. Remove and Replace, like in kind, the existing boilers which provide heating hot water and domestic hot water to the entire building.

**Update Summary** Staff have rejected all bids. Project is on hold.

**Start of Construction:** TBD

**Estimated Completion:** TBD



## Board CNO Report

**By: Jan Iida, RN, MSN, CEN, CENP**  
Chief Nursing Officer

**DATE: August 2023**

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**Service: Optimize delivery model to achieve operational and clinical efficiency**

- Surgical services continues implement efficiency's learned from Optum.

**Quality: Provide clinical excellence in clinical outcomes**

- The ECC just recently had the CDPH survey, which was long overdue. One deficiency, it has been corrected and approved. A week later ECC had a life safety CDPH survey, the two deficiency have been corrected and approved. The staff did an excellent job and CDPH was very complimentary about the unit.

**Growth: Meets the needs of the community**

- Tele-stroke program has a new go-live date of August 22.
- We are still waiting for the final word from the American College of Surgeons on our level III Trauma Center. Addie Brixey, Trauma Program Manager, received information this week that report is not ready.



## Board Informational Report

**By: Jake Dorst**  
Chief Information and Innovation Officer

**DATE: August 2023**

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### **Service: Optimize delivery model to achieve operational and clinical efficiency:**

#### *Global:*

1. July EPIC Update installed with no real issues.

#### *Ambulatory:*

1. IVMC NEUROLOGY Rural Health Clinic has been built and is live.
2. One on one review with EPIC Users for our Efficiency Project.
3. New provider first day elbow support.

#### *Lab:*

1. Continued work on the Blood Bank Wellsky Upgrade project. Call later this week to install an upgrade application to the back- up workstation.
2. Glooko Update- Spoke with Dr. Semrad and Jenny Palu and Ravi from Glooko. The two-factor authentication has been activated now for all users. The features of the upgrade which has already been installed were reviewed with Dr. Semrad. She mentioned that she would find the "One Click" integration of Glooko results displaying in Epic to be beneficial when this product is expanded for use in Primary Care. I mentioned to her that that would need to be a project initiated by Scott Baker. She said she would speak to him about that this month.

#### *Inpatient:*

1. BCA (downtime computers) project submitted (some outstanding tickets but should be wrapped up soon); Baxter Pump Workflow demo event complete; Sepsis Flowsheet required documentation project implemented; ICU daily weight SOW implemented
2. Assisted with CDPH surveyors with Extended Care Center.
3. Support for Cardiology service line – Dr. Carrea.
4. Epic refreshed for Dr. Wainstein, returning provider.
5. Work on Pediatric newborn admission order set.

#### *Surgery:*

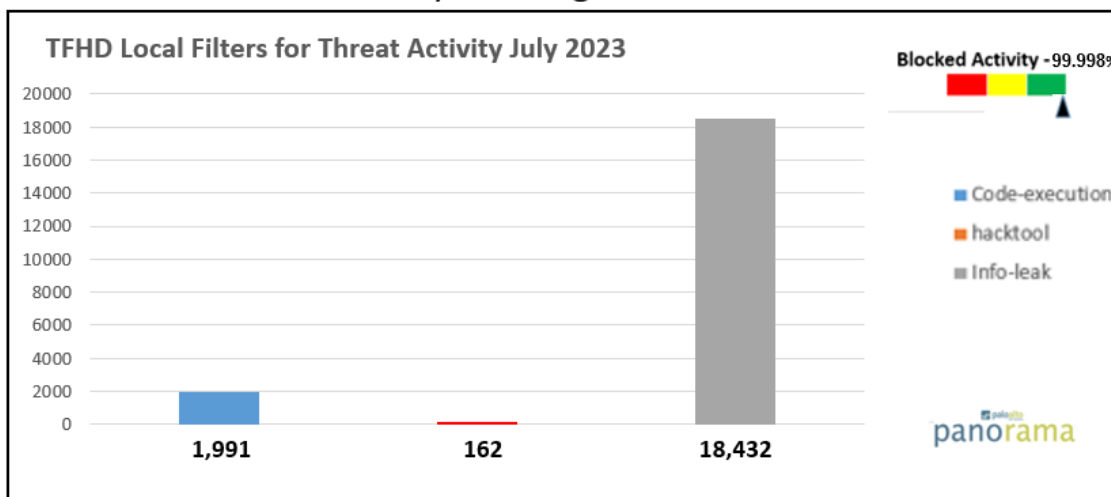
1. Continuing to make progress on PreOp workflow.
2. Multiple workflow demonstrations and testing with Mercy and TF ortho office.
3. Hyperdrive implementation/education.

4. Onboarded new anesthesiologist.

*Technical Team:*

1. CHSP department moved from Gateway to Lovan building.
2. CT remodel at IVCH
3. Moss Adams Audit in progress
4. Heavy Focus on Microsoft O365 Testing. Considering engaging alternative vendor to assist and expedite roll-out.
5. Tahoe Netscaler, systems used to access TFHD remotely, critical cyber vulnerability identified. Patches put in place. Efforts continue to future proof devices for greater security.
6. Total tickets for technical IT team, last 30 days = 898
7. Total tickets for Helpdesk = 402
8. Implementing “Intune” technology to ensure non-TFHD devices meet specific security requirements prior to joining the network (remote users, Mac users)
9. 3d Party software audit for versioning and security protections. All updated as needed.
10. Removed all non-essential software from servers, lowering attack surface due to unmaintained software exploits.
11. Single Sign on for O365. Greatly reduce overhead on users authenticating against the network via O365. Single Sign On across the environment
12. Evaluating vendors for Business Continuance and Disaster Recovery solution
13. Evaluating vendors for Privileged Access Management tool. This will protect the organization against cyber threats by monitoring, detecting, and preventing unauthorized privileged access to critical resources.
14. Testing replacement timeclock collection devices for UKG upgrade (iPads/Card Readers)
15. Received initial feedback from annual HIPPA audit. Executive review nearly finalized.
16. IT designed enhancements implemented on Stroke Carts. The systems are production ready and will be tested next week.

### Successfully Blocking Threat Execution



**Code Execution:** Attempts to identify execution vulnerabilities that can be run by a privileged user

**hacktool:** riskware that is intended to provide access to computers and networks

**Info-leak:** Attempt to detect software vulnerabilities and craft request exploits for unprotected data



## Incoming Mail Summary – Cyber

Message Category	%	Messages
Stopped by IP Reputation Filtering	79.8%	1,395,750
Stopped by Domain Reputation Filtering	0.0%	210
Stopped as Invalid Recipients	0.4%	6,316
Spam Detected	1.6%	27,353
Virus Detected	0.0%	6
Detected by Advanced Malware Protection	0.0%	3
Messages with Malicious URLs	0.1%	1,066
Stopped by Content Filter	0.2%	3,735
Stopped by DMARC	0.7%	12,432
S/MIME Verification/Decryption Failed	0.0%	0
<b>Total Threat Messages:</b>	<b>82.0%</b>	<b>1,434,439</b>
Marketing Messages	4.9%	85,364
Social Networking Messages	0.1%	1,385
Bulk Messages	3.4%	59,185
<b>Total Graymails:</b>	<b>8.3%</b>	<b>145,934</b>
S/MIME Verification/Decryption Successful	0.0%	0
Clean Messages	9.7%	169,506
<b>Total Attempted Messages:</b>		<b>1,749,879</b>



## Board CMO Report

**By: Brian Evans, MD, MBA**  
Chief Medical Officer

**DATE: August 16, 2023**

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### **People: Strengthen a highly-engaged culture that inspires teamwork & joy**

- Leadership rounding has been in place for one month, and provides a structured and goal-oriented process for senior leadership to follow. Goals include connecting with front line staff and developing stronger relationships, identifying opportunities for improvement, and celebrating wins. All areas of the health system are included with the goal of having all members of the administrative council round at each site monthly.
- Clinician Journal Club is planned for August 29<sup>th</sup>. These gatherings are designed as casual and social events, but also reviewing current relevant medical topics. This journal club will be in the theme of “brain hacking.”
- Dr. Josh Kreiss completed a 5-day Stanford Chief Wellness Officer training.

### **Service: Deliver Outstanding Patient & Family Experience**

- Updates regarding our “Access to Care” project: The four focused clinical areas had their kickoff on July 26<sup>th</sup>. The areas include Pediatrics, Women’s Health, Primary Care in Truckee and Diagnostic Imaging. I will provide executive oversight of the Access to Care Project going forward. Two full days of work with Vizient are scheduled for August 22 and 23.

### **Quality: Provide excellent patient focused quality care**

- The Quality Department welcomes Stephen Hicks to the quality analyst role. Stephen is well known to Tahoe Forest having worked in the District for 10 years, and is highly regarded.
- Tahoe Forest made the CMQCC Cal Hospital Compare Maternity Honor Roll for 2023. This is the 3<sup>rd</sup> consecutive year that we have received this distinction.

### **Finance: Ensure strong operational & financial performance for long term sustainability**

- Directors from Provider Services met with me August 16<sup>th</sup> to review staffing standards at each of the clinics across the system to ensure we are consistent with national benchmarks. These data will be reviewed with the administrative council on a regular basis to ensure labor stewardship.
- Provider and service line productivity reports are being developed across the system to improve access and revenues.

### **Growth: Expand and foster community and regional relationships**

- We are working with health systems outside Tahoe Forest to identify opportunities for growth.

- A review of six clinical partnerships that exist between TFHD and area ski resorts is underway with a focus on improving communication, quality and patient retention. The project is being led by Megan Shirley, PA-C



## **Board Informational Report**

**By: Garrett Smith**  
Corporate Compliance  
Consultant, The Fox Group

**DATE:** August 24, 2023

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### **2023 Compliance Program 2nd Quarter Report (Open Session)**

The Compliance Committee is providing the Board of Directors (BOD) with a report of the 2nd Quarter 2023 Compliance Program activities (Open Session). This report assists the BOD to meet its obligations to be knowledgeable about the content and operation of the seven components of the Compliance Program.

## 2023 Corporate Compliance Program 2nd Quarter Report

### OPEN SESSION

Period Covered by Report: **April 1, 2023 - June 30, 2023**  
Completed by: Garrett Smith, Compliance Officer, The Fox Group

#### **1. Written Policies and Procedures**

1.1. The District's Corporate Compliance Policies and Procedures are reviewed and updated as needed. No Compliance Policies were updated in the second quarter of 2023.

#### **2. Compliance Oversight / Designation of Compliance Individuals**

2.1. Corporate Compliance Committee Membership as of March 31, 2022:

Garrett Smith The Fox Group – Compliance Consultant

Kristina Watanabe-Hylton – Compliance Consultant

Louis Ward, Chief Operating Officer

Jan Iida, RN- Chief Nursing Officer

Harry Weis – Chief Executive Officer

Crystal Felix – Chief Financial Officer

Jake Dorst – Chief Information and Innovation Officer

Alex MacLennan – Chief Human Resources Officer

Matt Mushet – In-house Legal Counsel

Bernice Zander, Health Information Management Director

Scott Baker, Vice President of Physician Services

Theresa Crowe, RN, JD, Privacy Officer and Risk Manager

Tobriah Hale, Legal and Compliance Specialist

#### **3. Education & Training**

3.1. All employees are assigned annual HIPAA Privacy and Security Rule training, and Compliance Program training, via Health Stream.

3.2. Code of Conduct and Health Stream compliance and privacy training for new Medical staff members and physician employees are completed as part of initial orientation.

#### **4. Effective Lines of Communication/Reporting**

4.1. A Compliance log is maintained for all calls to the Compliance Hotline and other reports made to the Compliance Department. Three calls were made through the hot line in the 2<sup>nd</sup> Quarter of 2023. Resulting in no privacy or compliance investigations.

4.2. HIPAA violations are reported to the Privacy Officer. The Privacy Officer maintains a log of reported events and investigations. 5 reports were investigated by the Privacy Officer in the 2<sup>nd</sup> Quarter of 2023.

2023 Corporate Compliance Program 2nd Quarter Report

OPEN SESSION

Nature of Breach Reports 2023	No. of Reports YTD	No. of Reports 1st Quarter 2023	No. of Reports 2nd Quarter 2023	No. of Reports 3rd Quarter 2023	No. of Reports 4th Quarter 2023
Billing/Registrations	1	1	0	0	0
Patient Results	1	1	0	0	0
Mailings	1	0	1	0	0
Electronic File	0	0	0	0	0
Faxing	2	2	0	0	0
Patient Complaint	0	0	0	0	0
Record Disposal	1	1	0	0	0
Public Disclosure	2	0	2	0	0
Employee Access	5	4	1	0	0
BAA reported breach	0	0	0	0	0
Incorrect Registration	0	0	0	0	0
Incorrect Guarantor	0	0	0	0	0
Unsecure/misdirected email	3	2	1	0	0
Total	16	11	5	0	0
	Total YTD	Q1	Q2	Q3	Q4

4.3. The Compliance Department published one article in the Pacesetter in the second quarter of 2023.

**5. Enforcing Standards through well-publicized Disciplinary Guidelines**

- 5.1. 68 new hires completed 95.1% of the required Health Stream courses in Corporate Compliance and HIPAA in the 2<sup>nd</sup> quarter.
- 5.2. All new staff hires, and newly privileged physicians, receive criminal background checks and are checked against the OIG and GSA list of exclusions prior to hiring/appointment. Members of the Medical Staff are checked against the OIG/GSA exclusion lists each month. All employees are screened against the OIG/GSA exclusion list every quarter. All vendors are checked continuously using the vendor credentialing program.

OPEN SESSION

**6. Auditing & Monitoring**

6.1. Two audits were completed during the 2<sup>nd</sup> Quarter of 2023 as part of the 2023 Corporate Compliance Work Plan.

6.1.1. Employee Access Audit. An audit of 10 employed patients' charts, reviewed for possible inappropriate access by other employees, found no instances of inappropriate access.

6.1.2. Rural Health Clinic Consents. An audit of 51 charts of patients in the Rural Health Clinics (Pediatrics, Internal Medicine/Cardiology, etc.) showed 2 charts without patient consents on file.

**7. Responding to Detected Offenses & Corrective Action Initiatives**

7.1. There were no investigations of suspected and actual compliance incidents initiated during the 2nd Quarter of 2023.

**8. Routine Compliance Support**

8.1. The Compliance Department provides routine support to important TFHD initiatives, such as the terms and conditions of physician employment, and questions about billing, and compliance with other laws and regulations.



# MULTNOMAH GROUP

**Retirement Plans Oversight Presentation  
Tahoe Forest Hospital District Board of Directors  
Period Q1 & Q2, 2023**

August 24, 2023



# Q1, 2023 Activities

## Reviewed performance of Plan investments as of 6.30.2023

- The T.Rowe Price Blue Chip Growth was recommended for removal by Multnomah Group's Investment Committee:
  - ✓ The fund had recently changed its prospectus to characterize the fund as a non-diversified fund from a diversified fund allowing the Plan to invest 63% of its asset in 10 positions.
  - ✓ New portfolio manager has underperformed since taking over in October of 2021.
  - ✓ The Committee evaluated Multnomah Group's recommendation to replace this fund with the JPMorgan Large Cap Growth fund, approving the change.

## Committee conducted the bi-annual review of the Plans' Investment Policy Statement

- ✓ IPS determined to be in good order.

## Committee reviewed the Plans' assets to ensure the accuracy of reporting

- ✓ No issues were found.

## Committee Reviewed the Missing Participant Location Efforts

- ✓ For the 457b Plan: 126 w/ undeliverable addresses; 55 of them were updated.
- ✓ For the 401a Plan: 201 w/undeliverable addresses, and 83 were updated.

## Automatic Enrollment Re-solicitation Project

- ✓ On January 5, 2023, Fidelity & TFHD Management initiated a re-enrollment of participants deferring less than 6%
- ✓ 57 people who previously opted out were re-enrolled at 6%. Only one participant opted out.
- ✓ 116 participants were deferring less than 6%:
  - ✓ 11 decreased back down to below 6%
  - ✓ Two people increased to above 6%.
  - ✓ The remainder, 103, stayed at 6%

## Fiduciary Education

- ✓ Tier 3 – Investment Mapping.

# Q2, 2023 Activities

## Reviewed performance of Plan investments as of 6.30.2023

- ✓ All funds were rated Satisfactory by Multnomah Group's Investment Committee.

## Committee reviewed Multnomah Group's annual fee benchmarking report

- ✓ Participants pay \$72.95, which is between the range of \$60 - \$95.

## Committee reviewed new legislation; SECURE ACT 2.0

- ✓ Principal legislative changes take effect in 2024 and beyond.

## Committee reviewed the Plans' assets to ensure the accuracy of reporting

- ✓ No issues were found.

## Committee created an Administrative Working Group

- There are three areas of review for the meeting:
  1. Detailed review Plan administration.
  2. Review Fidelity administration and education services.
  3. Strategic goals for Plans and Committee.

## Fiduciary Education

- ✓ Tier 3 – Insurance and Bonding.

# Breakdown of Plans – June 30, 2023

401(1) Employer Contribution Plan	457(b) Employee Contribution Plan
<ul style="list-style-type: none"><li>Plan Assets increased from<ul style="list-style-type: none"><li>\$62.7 MM as of December 31, 2022, to</li><li>\$71.0 MM as of June 30, 2023</li><li>+8.3 MM</li></ul></li><li>All investments are scored “Satisfactory” by Multnomah Group’s Investment Committee.</li><li>At Q1 meeting, T. Rowe Price Blue Chip Growth was removed and replaced with JPMorgan Large Cap Growth</li></ul>	<ul style="list-style-type: none"><li>Plan Assets increased from<ul style="list-style-type: none"><li>\$75.3 MM as of December 31, 2022, to</li><li>\$87.5 MM as of June 30, 2023</li><li>+12.2 MM</li></ul></li><li>Investments: Same</li><li>Participation Rate <u>d</u>ecreased from:<ul style="list-style-type: none"><li>82.6% as of December 31, 2022, to</li><li>80% as of June 30, 2023</li></ul></li><li>Ave. Deferral Rate increased from:<ul style="list-style-type: none"><li>8.6% as of December 31, 2022, to</li><li>9.7% as of June 30, 2023</li></ul><p><i>*Auto-enrollment is set at 6%</i></p></li><li>Total Savings Rate (EE &amp; ER) <u>i</u>ncrease from:<ul style="list-style-type: none"><li>13.5% as of December 31, 2022, to</li><li>14% as of June 30, 2023</li></ul></li></ul>

# Questions

# Disclosures

Multnomah Group is a registered investment adviser, registered with the Securities and Exchange Commission. Any information contained herein or on Multnomah Group's website is provided for educational purposes only and does not intend to make an offer or solicitation for the sale or purchase of any specific securities, investments, or investment strategies. Investments involve risk and, unless otherwise stated, are not guaranteed. Multnomah Group does not provide legal or tax advice.