

Agenda
Estes Park Health Board of Directors' Regular Meeting by GoToWebinar
Monday, December 06, 2021
5:00 - 7:00 pm Board Meeting
Estes Park Health, 555 Prospect Avenue, Estes Park CO 80517

Regular Session		Mins.	Procedure	Presenter(s)
1	Call to Order and Welcome	1	Action	Dr David Batey
2	Approval of the Agenda	1	Action	Board
3	Appreciation of Dr John Meyer's Service as Chief of Staff	5	Action	Board and Others
4	Public Comments on Items Not on the Agenda	3	Information	Public
5	General Board Member Comments	3	Information	Board
6	Consent Agenda Items Acceptance:	2	Action	Board
6.1	Board Minutes			
6.1.1.	EPH Board Regular Meeting Minutes October 25, 2021			
6.1.2	EPH Executive Session Minutes 12 02 2021			
6.2	Other Documents			
7	Presentations:			
7.0	Estes Park Health May 2022 Election Preparation	10	Discussion	Ms Sarah Shepherd
7.1	EPH Home Health Review	10	Discussion	Ms Sarah Bosco
7.2	Estes Park Health Current Status, Covid-19 Updates, 2021 Tactical and Strategic Initiatives Updates	15	Discussion	Mr Vern Carda
7.3	EPH FY 2022 Budget	20	Discussion	Mr Dave Timpe
7.4	EPH Quality Initiatives	12	Discussion	Ms Kendra Simms
7.5	Chief of Staff Updates	12	Discussion	Dr Robyn Zehr
7.6	Chief Nursing Officer Updates	12	Discussion	Ms Pat Samples
7.7	Chief Human Resources Officer Updates including addressing the National Nursing Recruitment and Retention Challenge	12	Discussion	Ms Shelli Lind
8	Executive Summary - Significant Items Not Otherwise Covered	1	Discussion	Senior Leadership Team
9	Medical Staff Credentialing Report	2	Action	Board
10	Potential Agenda Items for January 31, 2022 Regular Board Meeting	1	Discussion	Board
11	Adjournment	1	Action	Board
Estimated Total Regular Session Mins.		123		
Next Regular EPH Board Meeting: Monday January 31, 2022 5:00 - 7:00 pm				



ESTES PARK HEALTH

ESTES PARK HEALTH BOARD OF DIRECTORS' Regular Meeting Minutes – October 25, 2021

Board Members in Attendance

Dr. David Batey, Chair
Dr. Steve Alper, Finance Committee Chair
Ms. Diane Munro, Member at Large
Mr. William Pinkham, Member at Large

Other Attendees

Mr. Vern Carda, CEO
Ms. Pat Samples, CNO
Mr. Gary Hall, CIO
Mr. David Timpe, Interim CFO
Ms. Shelli Lind, CHRO
Ms. Lesta Johnson
Mr. Adam Johnson
Ms. Wendy Ash
Ms. Leslie Roberts
Dr. Robyn Zehr (via webinar)

Community Attendees (via webinar):

Larry Leaming, Wendy Rigby (via webinar)

1. Call to Order

The Board meeting was called to order at 5:02 PM by Dr. Batey, Chairman of the Board of Directors; there was a quorum present. Notice of the Board meeting was posted in accordance with the Sunshine Law Regulation.

2. Approval of the Agenda

Bill Pinkham motioned to approve the agenda as submitted. Steve Alpers seconded the motion, which carried unanimously.

3. Public Comments on Items Not on the Agenda

No comments.

4. General Board Comments

David Batey welcomed Adam Johnson, the recently hired Executive Administrator Assistant, to the Board Members and Senior Leadership Team.

David Batey read a statement prepared by Monty Miller highlighting his care received at EPH. Additionally, David wished Monty a speedy recovery and well wishes.

5. Consent Agenda Items Acceptance

Bill Pinkham motioned to approve consent agenda item 5.1.1. Steve Alpers seconded the motion, which carried unanimously.

6. Presentations

6.1 Estes Park Health Current Status, Covid 19 Updates, On-Call Housing Update 2021 Tactical and Strategic Initiatives Updates – Vern Carda

- Testing continues to be available to all community members by calling (970)-586-2200 and pressing 1 to speak to the Covid Triage team. The State of Colorado has also set up a free testing site at the Community Center.
- Covid-19 Vaccines: The Moderna vaccine is available through EPH Physicians Clinic for adult patients as approved by the CDC. The EPH Physicians Clinic also now offers the Pfizer vaccine for the pediatric population ages 12-17.
- Booster Shots: Both the Pfizer-BioNTech and Moderna Vaccines have been approved for boosters. EPH is offering the Moderna Booster Vaccine to all who qualify with the CDC guidelines. However, EPH is currently only offering the Pfizer Booster Vaccine for the pediatric population ages 12-17. EPH strongly recommends that the general population seek the Pfizer Vaccine Booster shot.
- Covid Governing Team: As a quality improvement measure, EPH instituted a Covid-19 governing team who meets bi-weekly to review any new requirements put forth by the CDC, FDA, APIC, OSHA, and CDPHE.
- Physician Recruitment Updates:
 - Ophthalmology: An employment contract has been extended to an ophthalmologist. If negotiations are successful, it will take about 6 months until the ophthalmologist is to be on site seeing patients on a full-time basis at EPH.
 - EPH Hospitalist: EPH has extended three contract offers to its preferred hospitalist candidates. EPH anticipates employing, credentialing, and privileging to occur by January 1, 2022.
 - Radiologists: EPH is conducting on-site interviews with two candidates to replace retired radiologist, Dr. Hansen, by the end of October 2021. EPH is on target to complete this search and onboarding by end of month March 2022.
 - Podiatrist: The staff has conducted an onsite interview for the podiatrist position and the CEO is in the process of following up the effort with an additional interview to gauge culture fit. EPH is working ahead of its scheduled timeline on this activity and anticipates possible completion of this search by the end of March 2022.
 - Medical Staff Development Planning(MSDP): Post completion of the hiring of the aforementioned positions, EPH will re-evaluate recruitment needs for the community of Estes Park by conducting a medical staff development plan.

- Staff Recruitment Updates:
 - CFO: Working with recruitment group to screen applicants and find the right fit for EPH. EPH anticipates bringing the top two or three qualified candidates on site for interviews prior to the Thanksgiving Holiday.
 - Executive Assistant: This position has been filled. Welcome Adam Johnson.
 - Home Health: EPH has been recruiting for his department lead with limited success. EPH is both actively sourcing for a department director while also considering alternative management models (contracting) for this service.

- Operational/Tactical Updates
 - Patient Access Service Center (PASC) or “One Call”: This project, which is designed to make access to EPH easier for patients, is on track. The anticipated “go-live” date is 2/1/2022.
 - Productivity and Staffing Analysis: In process; expectation is to be completed by year end.
 - Strategic Plan Reporting Mechanism: A strategic plan management and reporting tool has been kicked off with an implementation date of January 1, 2022. The end goal of the plan is to concentrate all raw data into a single system thus enabling streamlined, complete, and transparent analysis to be used to deduce and track better decisions.
 - Chargemaster Review Project: EPH has initiated request for a chargemaster proposal. The anticipated start date for the project is first quarter 2022.
 - Quality Update: Continuous improvement as EPH pursues excellence.
 - Room Service Update: Launched on July 21st, 2021.

6.2 Population Health Management – Wendy Ash

Population Health Management’s inception, purpose, and its latest updates were presented.

Population Health Management is a program to mitigate and manage chronic disease. This goal is being achieved by EPH creating value-based programs that increase access, health, innovation, and affordability to the Estes Valley community.

6.3 EPH Urgent Care Visits, Visitors, Quality and Financial Update – Pat Samples and Dave Timpe

Summary and analysis of EPH’s Q3 Urgent Care’s financial position was presented. Additionally, daily and monthly census numbers, Covid lessons learned, physical facility ramifications and potential remedies, and plans going forward were discussed.

6.4 EPH Q3 Financials and Federal Covid Loans Status Updates – David Timpe

Summary and analysis of EPH’s Q3 financial position and Federal Covid Loans accounting methodology and timing were presented.

6.5 EPH Foundation Updates - Kevin Mullin

- Summary and benchmark comparisons of the foundation’s financial position were presented.

- Congratulations to Dr. Dwight Stanford and Sue Cooper, whom will be the two newest Directors of the Foundation starting January 1st, 2022.

6.6 EPH Chief Operations Officer Update – Gary Hall

- Congratulation given to Matt Makelky for filling the Pharmacy Director Role.
- The remodeling of Aspen Hall, on-call staff rooms, is on pace as scheduled. EPH expects the first on-call staff to be accommodated in the hall by Q1 2022.
- Facilities is actively searching for a new manager.

7. Motion to Excuse Sandy Begley Regular Board Meeting Absences

Per Article VI, Section 6 Colorado Revised Statutes Title 32. Special Districts § 32-1-905-1G Vacancies, the Board of Directors voted to excuse Sandy Begley’s absences for the months of August, September, and October. Bill Pinkham motioned to excused Sandy Begley and Steve Alper seconded the motion, which was carried unanimously.

8. Motion to Move Nov. 22, 2021 (Thanksgiving Week) EPH Board Regular Meeting to Dec. 6, 2021

Steve Alpert motions to move the November 22, 2021 EPH Board Regular Meeting to December 6, 2021 due to the Thanksgiving Holiday. Diane Muno seconded the motion, which carried unanimously.

9. Executive Summary – Significant Items Not Otherwise Covered

No comments.

10. Medical Staff Credentialing Report

Steve Alpers recommended the approval of the Medical Staff Credentialing Report. Bill Pinkham seconded the motion which was carried unanimously.

11. Potential Agenda Items for October 25, 2021 Regular Board Meeting

No comments.

12. Adjournment

David Batey motioned to adjourn the meeting at 7:20 PM. Bill Pinkham seconded the motion, which carried unanimously.

David M. Batey, Chair

Estes Park Health Board of Directors

Agenda

Estes Park Health Board of Directors' Executive Session - By TEAMS and In-Person

Tuesday, December 02, 2021

3:30 -5:15 p.m.

Estes Park Health, 555 Prospect Avenue, Estes Park CO 80517

Regular Session		Mins.	Procedure	Presenter(s)
1	Call to Order/Welcome (Time 3:33 pm)	1	Action	Dr David Batey
2	Approval of the Agenda (Motion Muno 2nd Alper)	1	Action	Board
3	Public Comments on Items Not on the Agenda	1	Information	Public
4	General Board Member Comments on Items Not on the Agenda	1	Information	Board
5	Entertain a motion to enter Executive Session Pursuant to Section 24-6-402(4)(e) C.R.S. for the purpose of determining positions relative to matters that may be subject to negotiations; developing strategy for negotiations and Section 24-6-402(4)(f) C.R.S for the purpose of discussing personnel matters (Motion Pinkham 2nd Alper)	100	Action	Dr David Batey
6	Adjournment (Motion Pinkham 2nd Alper Time 5:18 pm)	1	Action	Dr David Batey
<i>Total Regular Session Mins.</i>		105		



555 Prospect Ave.
Estes Park, CO 80517
p: 970-586-2317
eph.org

ESTES PARK (PARK) HOSPITAL DISTRICT

December 3, 2021

Memo Re: First Steps for the May 3, 2022 Election To:

Board of Directors, Park Hospital District

From: Sarah E. E. Shepherd

Dear Board:

Thank you for your consideration of our contract to administer your May 3, 2022 mail ballot election. Please note that it's our understanding that the preference for running the election is via an all-mail-ballot election, although the polling place election or mail-ballot election are both options with a "Director- only" election.

I am happy to answer questions today and discuss the proposed contract and timeline, which were included in your packet.

For us to begin working as you Elections Administrator, with myself as the Designated Election Official (DEO) we respectfully request the follow items be review and considered for approval at the Board meeting this evening of December 6, 2021:

1. The Circuit Rider of Colorado Contract;
2. The Election Resolution (with the detail that the election intended is a "Mail Ballot Election;")

Please note that materials and postage in 2020 totaled \$29,942.21. Printing and mailing costs have increased due to USPS rate increases and to some extent due to COVID and supply issues. These are reimbursement-only costs (no upcharge). We expect to have final pricing for these items to report on at the meeting this evening (December 6).

Since the Election may not be cancelled (there may be more than two candidates for the 2 director seats), our next items of business follow:

1. Coordinating the "Call for Nominations" publication in the legal papers of record and posting on the District's website;
2. Making Self-Nomination forms available to interested candidates on January 1 up through the end of the nomination filing deadline via email/phone/in-person request at our offices and the hospital administration offices, in coordination with Adam.
3. Obtaining voter and property owner lists from the County Clerk and Recorder's and Assessor's offices, as this is the most time-consuming portion of preparation.
4. Beginning ballot and mailing design, preparing for UOCAVA (overseas Voters) mailings and finalizing printing and mailing costs.

Thank you very much for your consideration and trust in our services. We are very excited to partner with you again to deliver a great election process and result, especially in these exciting times.

Sincerely, Sarah and Team

Circuit Rider of Colorado, LLC
mailing: P. O. Box 359 - Littleton, CO 80160

Telephone: 303-482-1002 - Email: sees@ccrider.us

Estes Park Health Home Health Care
Estes Park Health Home Care and
Estes Park Health Hospice
Professional Advisory Committee
Friday, December 3, 2021
Timberline Conference Room, Estes Park Health

AGENDA

- I. Welcome
- II. Approve of Previous Minutes, December 2, 2020
- III. People & Culture
 - Staff Recruitment and Retention
 - Personnel files
 - Education
 - Competencies
 - Organizational Structure
- IV. Excellence & Quality
 - Quality Management Program
 - OASIS-C Quality Indicators
 - Hospice Quality Measures--HIS
 - Home Care Quality Measures
 - CASPER Reports
 - Policies and Procedures
 - Computer System
 - Record Review
 - Contracts
 - Licenses
 - Surveys
- V. Customer Service
 - HHCAHPS/ Home Health Care Patient Satisfaction Surveys
 - Home Care Satisfaction Surveys
 - Hospice Satisfaction Surveys
- VI. Financial Management
 - Financial Figures Year to Date
- VII. Community & Services
 - Services We Provide
 - Grant-Funded Programs
 - Volume/Census/Graphs
 - Community



ESTES PARK HEALTH

*CEO Report
December 6, 2021*

Covid -19 Update.

Colorado Department of Public Health and Environment (CDPHE) has confirmed the presence of the **Omicron variant (B.1.1.529) of COVID-19 in Colorado.**

State health officials want to restate that all Coloradans (ages 5+) should get vaccinated with the COVID-19 vaccine. Anyone 18 or older who has received their second dose of Pfizer or Moderna at least six months ago or who has received the Johnson & Johnson vaccine for their initial dose is encouraged to get a booster dose as soon as possible. In addition, all Coloradans (ages 6 months+) should get vaccinated with the flu vaccine.

It's particularly critical that Coloradans heed caution and get vaccinated, get a booster dose, wear a mask in indoor public spaces, limit large gatherings, wash their hands frequently, get tested if they have symptoms or were exposed, and practice physical distancing. People who have recently traveled internationally should be tested 3-5 days after their return with a molecular or PCR test, regardless of symptoms or vaccination history. Anyone, regardless of vaccination status, who develops symptoms should get tested immediately and isolate.

What We Know about Omicron (Source CDC website):

Infection and Spread

- **How easily does Omicron spread?** The Omicron variant likely will spread more easily than the original SARS-CoV-2 virus and how easily Omicron spreads compared to Delta remains unknown. CDC expects that anyone with Omicron infection can spread the virus to others, even if they are vaccinated or don't have symptoms.
- **Will Omicron cause more severe illness?** More data is needed to know if Omicron infections, and especially reinfections and breakthrough infections in people who are fully vaccinated, cause more severe illness or death than infection with other variants.
- **Will vaccines work against Omicron?** Current vaccines are expected to protect against severe illness, hospitalizations, and deaths due to infection with the Omicron variant. However, breakthrough infections in people who are fully vaccinated are likely to occur. With other variants, like Delta, vaccines have remained effective at preventing severe illness, hospitalizations, and death. The recent emergence of Omicron further emphasizes the importance of vaccination and boosters.
- **Will treatments work against Omicron?** Scientists are working to determine how well existing treatments for COVID-19 work. Based on the changed genetic make-up of Omicron, some treatments are likely to remain effective while others may be less effective.

Testing. Estes Park Health has testing available for community members who need a Covid-19 test.

Community members with questions regarding Covid-19 or Covid-19 testing can call 970-586-2200 to speak with our Covid Triage Team during regular business hours. The results of a Covid-19 test are available within 24 hours. If your test result is positive, an EPH provider will contact you and discuss the results of your test and provide further Covid – 19 consultation.

Vaccinations. Estes Park Health supports efforts to protect all community members from contracting COVID-19. Please schedule your vaccination if you have already not done so. To receive your COVID-19 vaccine call 970-586-2200 to receive instructions on obtaining a vaccination.

EPH also has Pfizer vaccine available for pediatric population patients ages 5 - 17.

Physician Recruitment Updates:

EPH Hospitalist Update. Interviews have been completed with hospitalist candidates. EPH has employed three hospitalists to serve the needs of inpatients at EPH. The hospitalists will start serving inpatients on December 24, 2021.

Radiology Recruitment Update. EPH has conducted on-site interviews and offered preferred candidate position. An employment agreement has been completed. The start date for radiologist will be approximately May 1, 2021 pending licensure, credentialing, etc.

Podiatrist Recruitment Update. EPH has conducted on-site interviews and offered preferred candidate position. An employment agreement has been completed. The start date for radiologist will be between April 1, 2021 and May 1, 2021 pending licensure, credentialing, etc.

Ophthalmology Recruitment Update. An employment contract has been extended to an ophthalmologist. However, ophthalmologist has decided not to accept employment. I am currently spearheading efforts to secure locum coverage for the gap in service between the retiring Dr. Prochoda and whomever accepts the new position. EPH does have interview scheduled with a potential podiatrist next week.

Staff Recruitment Updates.

CFO. EPH has completed the search for the CFO position. EPH anticipates new CFO start date to be January 10, 2022. More information will be forthcoming as more details are sorted out.

Physician Credentialing Specialist. EPH is currently searching for a physician credentialing specialist.

Operational/Tactical Updates

Budget Process. During the past month, the budget process has consumed a significant amount of managements time to complete. More information will be presented on the budget at finance committee meeting on December 6, 2021 and the board meeting on the same day.

Medical Staff Development Planning (MSDP). The initial game plan for completion of the MSDP study has been built. EPH anticipates kickoff in January 2022 with completion slated for the end of the first quarter of FY 2022.

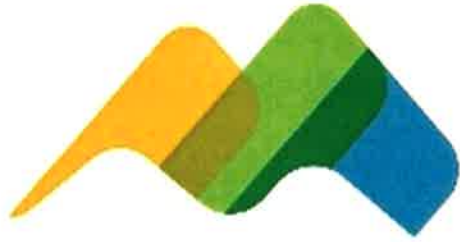
Productivity and Staffing Analysis. Productivity and staffing analysis Phase 1 data has been gathered. We anticipate the results first quarter of FY 2022 with some changes to be implemented starting second quarter of 2022. EPH is running slightly behind on this process.

Strategic Plan Reporting Mechanism. The scorecard development is in process. EPH anticipating rollout to other departments the first quarter of 2022.

Strategic Planning. A strategic planning review and planning session will be scheduled first quarter of 2022. The basic agenda will be to review the current plan and achievements and shortfalls. A revised plan will be created and implemented by the end of the first quarter 2022.

Chargemaster Review Project. EPH has received the proposals for chargemaster. Review of proposals will be completed prior to the completion of December 2021 with contract arrangements to be completed the first half of January 2022. EPH anticipates the completion of this study second quarter of FY 2022.

Quality update. EPH continues to move forward in implementing the new quality structure put in place after our DNV survey. We are implementing regular multi-disciplinary service line council meetings supported by a standard agenda to evaluate quality and practice within the service line. Patient Safety and Quality meet monthly to ensure each department and service line are receiving the support and education they need as well as identifying in system wide issues that need to be addressed. Standardized reporting dashboard being created across the organization.



ESTES PARK HEALTH

**Fiscal Year 2022
January 1, 2022 – December 31, 2022
Operating and Capital Budget**

**Board Meeting
December 6, 2021
5 – 7 PM**

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Estes Park Health (EPH) – Executive Summary
Operational and Capital Budget
Fiscal Year 2022
January 1, 2022 – December 31, 2022

The health care environment surrounding Covid – 19 at the national, state, and local level remains challenging and is expected to challenge the resources of EPH during the next year.

The proposed Fiscal Year 2022 Operating and Capital Budget for Estes Park Health demonstrates its dedication to taking care of people and improving the quality of care for people in the Estes Valley service area. This document contains the goals, assumptions, as well as a summary financial model outlining EPH's estimated financial performance for FY 2022.

EPH anticipates that the number of individuals who receive patient care will remain similar to FY 2021. Based upon the assumptions regarding revenue and service projections, EPH will navigate toward a decrease in net assets of (\$625,289) which represents an operating margin of (1.19%) for FY 2022.

A FY 2022 capital budget outlining the potential of \$3.2 MM in capital spending has been compiled and is included for review. EPH has committed to the purchase and installation of a new Magnetic Resonance Imaging Unit (MRI). The MRI install is scheduled for second quarter of FY 2022. Other capital items will be purchased, as needed, for patient safety purposes.

A Brief Look at Fiscal Year 2021

Two major events occurred during the past year that significantly impacted Estes Park Health finances. Covid-19 caused operational, human resource and fiscal challenges. Additionally, the Cameron Peak and East Troublesome fires caused EPH to evacuate and transfer all patient care activities to other health care entities. Although EPH reopened prior to the start of FY 2021, the recovery efforts due to the wildland fire extended well into FY 2021 with some business interruption issues not yet resolved.

Despite these major and highly unusual challenges, EPH managed its overall organizational expenses to approximately 1% of total projected expenses. In short, EPH controlled what it could in a very uncertain operating environment.

Activities and Initiatives Targeted for Achievement in Fiscal Year 2022

Estes Park Health has developed the Fiscal Year 2022 (FY 2022) budget based on the notion of “*take care of people.*” Throughout FY 2022, budget resources will be deployed to drive the organization to achieve the following items:

- 1. Pursuit of Quality.** Estes Park Health is committed to improving patient outcomes. Additionally, EPH will provide patients safe and person-centered care. EPH will challenge improvement of patient outcomes through quality measurement, continuous quality improvement (QI) and adoption of best practices. Critical to shaping and accelerating EPH’s pursuit of quality efforts are DNV (a quality accrediting organization) and the Centers for Medicare & Medicaid Services’ (CMS) via its specified Conditions of Participation (CoPs). Listed below are four of the major items that EPH will work on in FY 2022:
 - a. Continue to develop of EPH’s quality improvement programming and the deployment of appropriate resources to improve quality of care.
 - b. EPH will continue its endeavor to improve community health through population health programs and population health management. Population health management refers to the process of improving clinical health outcomes of a defined group of individuals through improved care coordination and patient engagement supported by appropriate financial and care models.
 - c. Deploy resources to navigate the vagaries of Covid – 19. For example, during the last year, EPH integrated multiple new policy, procedure, and techniques to care for people inflicted with Covid. Examples include swabbing clinic, streamlined urgent care, mAb process, remdesivir process, infection control practices, etc.
 - d. Implement solutions that improve patient relations and patient satisfaction.

- 2. Developing People Resources.** Recruitment and retention of all employees including licensed professionals presents challenges for rural community hospitals like Estes Park Health. The development and implementation of competitive wage and total compensation plans will be important to the EPH future state. Additionally, the shifting expectations of our work force will necessitate changes in EPH recruitment, retention, and educational programming. Key initiatives include:
 - a. Wage and compensation adjustments.
 - b. Employee education opportunities.
 - c. Employee performance management initiatives.

3. **Information Technology Improves Patient Outcomes.** Increasing expectations exist with patients, providers, and families to use information systems and technology as a tool to effectively manage care and improve care quality in an integrated, clinically driven system of care. EPH will:
 - a. Invest resources in training to maximize EPIC medical record to aide physicians and all staff in caring for patients.

4. **Fiscal Health.** Via operational expense elimination and revenue stream addition, EPH will engage key organizational stakeholders in the development and implementation of operational plans that will enable EPH to move *toward a break-even operating margin*. To achieve this goal EPH will:
 - a. Implement solutions to reduce overall organizational expenses.
 - b. Evaluate EPH partnerships to improve organizational quality and reduce cost.
 - c. Complete and implement findings generated via a chargemaster review.
 - d. Examine hospital service lines for efficiency and effectiveness and implement plans to improve the organizations operations.
 - e. Complete a Medical Staff Development Plan to analyze potential for new revenue stream opportunities.

Estes Park Health FY 2022 Budget Assumptions

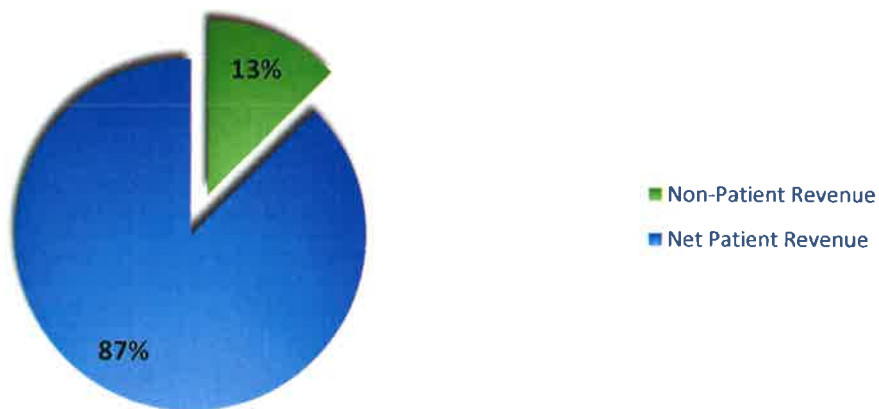
The FY 2022 operational budget has been modeled and forecasted using these important assumptions:

- a. The 2022 budget is developed considering local and national trends, especially the ongoing COVID-19 and related variants pandemic. The last two years established new “normal” in both years and which we expect to be replicated in 2022.
- b. New this year is the accountability of Department Directors and the Senior Leaders Team in producing their department’s budget.
- c. Most patient volumes are budgeted at the same approximate levels as projected 2021 levels.
- d. Increase average charges for Hospital services by approximately 6% and Clinic services by approximately 4%. **(There were no charge increases in 2021.)**
- e. Employment of a Radiologist (effective 04.01.22) and Podiatrist (effective 05.01.22), along with their related revenue and expenses.
- f. Employment of the Hospitalists as opposed to contracting for their services. Also included their professional services fees as revenue.
- g. Contractuals, bad debts and uncompensated care adjustments of 45.25% (43.50% for contractuals and 1.75% for bad debts and uncompensated care). These are slight increases over the 2021 experience. We continue to look for ways to legally maximize revenue and therefore decrease contractual allowances. We’re in the initial phase of hiring a consultant to review our chargemaster and cost report which should have a positive impact in reducing contractual allowances. Finally, as reported at Board meetings, our Patient Financial Services (business office) team does a phenomenal job of timely collection which increases cash flow and helps hold down bad debts and uncompensated care.
- h. Maintain overall salary expense consistent with market value and maintaining compensation levels for merit increases. Budgeted two salary increases in 2022 (3% on 05.01.22 and an additional 2% on 10.01.22) which are equivalent to a 2.5% increase for the entire year. We’re currently working with a consultant on a productivity study.

- i. Employee benefits will increase primarily due to salary increases and new employees (Radiologist, Podiatrist and Hospitalists). However, health insurance is relatively stable (very unusual in today's environment).
- j. Contract labor continues to be a major challenge!! Finding qualified employees is a significant challenge for us and other sectors of the economy. Therefore, we often need to turn to expensive contract labor to fill our staffing needs as we furnish quality patient care.
- k. Even with better purchasing contracts, we're still experiencing increased supply cost due to the continued need for COVID supplies and supply chain shortages.
- l. Mill levy of 7.505 yields budgeted net tax revenues of \$3,499,500.
- m. We'll aggressively pursue any local, state, or federal funding to reimburse the Hospital for COVID-19 expenses. Included is Phase 4 Provider Relief Funds of \$2,750,000 which we're confident we'll be able to justify that we've spent or will spend on COVID-19 expenses.
- n. Acquire, only where absolutely necessary, new capital equipment including radiology equipment, IT equipment, clinic equipment, lab equipment, plant equipment, rehab equipment, EMS equipment, med/surg equipment and various other smaller items. We have committed to purchase the Board approved new MRI which is scheduled to be installed in the second quarter of 2022.

EPH Revenue Graph #1

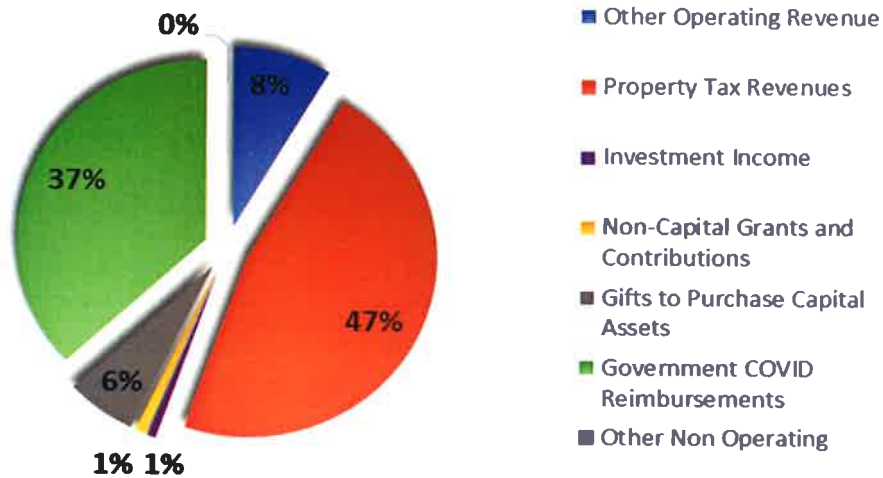
FY 2022 Budgeted Revenue



The total Estes Park Health revenue budget for FY 2022 is estimated to be \$95 MM. EPH anticipates a contractual discount rate of approximately 45.25 percent. The net revenue for FY 2022 will approximate \$52 MM. The \$52 MM in net revenue is approximately 9.47 percent greater than the projected FY 21 total of \$47.5 MM. The growth in net revenue modeled in FY 2022 budget is the result of employing hospitalists, a radiologist, and a podiatrist. These hires represent new revenue to EPH. EPH also modeled an increase in inpatient census and revenue. These increases have been facilitated by Covid – 19 and lack of bed availability down valley. Finally, some of the increase in revenue is attributed to charge increases of approximately 6% for Hospital services and approximately 4% for Clinic services.

EPH Revenue Graph #2

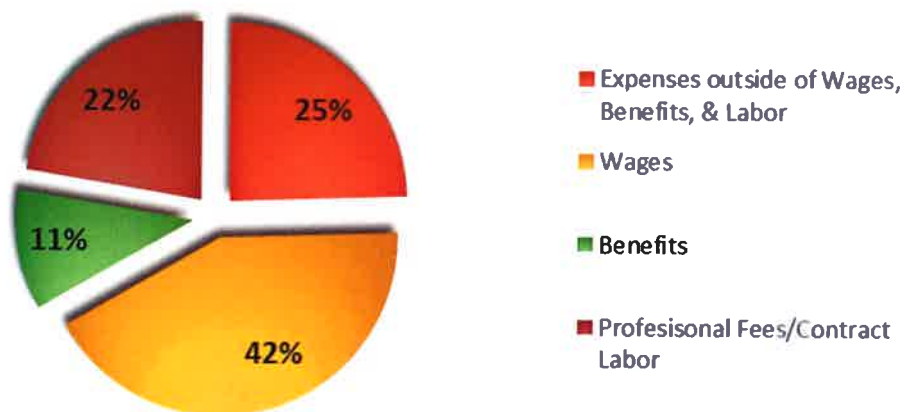
FY 2022 Budgeted Non-Patient Revenue



47 percent of the FY 2022 budgeted non-patient revenue is funded via a tax levy of 7.505 mills which is projected to generate approximately \$3.5 MM in FY 2022. Another large slice of non-patient revenue is Government COVID Reimbursements. This represents 37 percent of non-patient revenue or about \$2.7 MM in FY 2022. The combination of property tax revenues and government COVID reimbursements represent 84 percent of the non-patient revenue.

Expense Chart #1

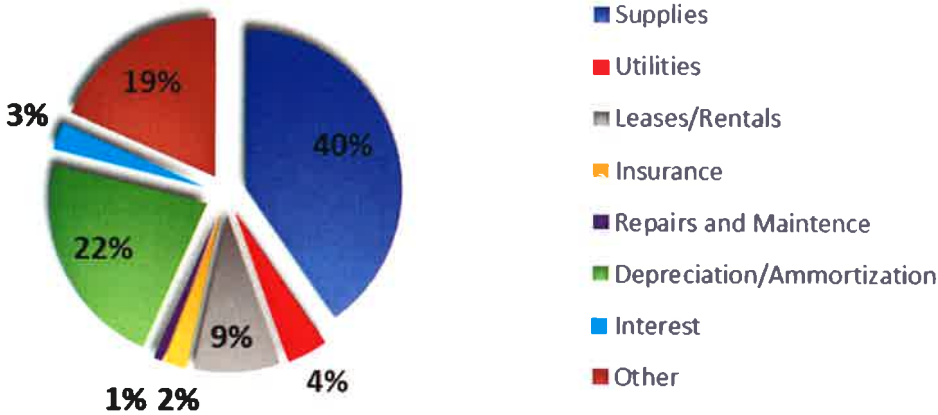
FY 2022 Budgeted Expenses



Expense Chart #1 depicts all Estes Park Health FY 2022 budgeted expenses broken into categories.

Expense Chart #2

FY 2022 Budgeted Expenses Excluding Wages, Benefits, and Labor



Expense Chart #2 is a graphical depiction of all Estes Park Health FY 2022 budgeted expenses less wages, benefits, and labor.

Uncertainties & Expense Challenges FY 2022

Total Estes Park Health operating expense is projected to increase by 9.35 percent or \$5.1 MM, from \$54.5 MM estimated in FY 2021, to \$59.7 MM in FY 2022.

Primarily, three items contributed to the 9.35 percent change in total operating expense illustrated via fiscal modeling:

1. Wages are expected to change in FY 2022 by approximately 8.11 percent, or approximately \$1.9 MM in FY 2022 to a total of \$25.4 MM. EPH has accounted for two salary increases in 2022 (3% on 05.01.22 and an additional 2% on 10.01.22) which are equivalent to a 2.5% increase for the entire year.
2. Supplies are estimated to change in FY 2022 by approximately 8.66 percent, or approximately \$468K in FY 2022 to a total of \$5.9 MM.
3. Contract Labor will likely change in FY 2022 by an estimated 15.65 percent, or \$1.9 MM which represents \$13.4 MM total expenditure in professional fees and contract labor.

Perhaps the most important idea to be gleaned from the change in these expenses is that this trend of expense increase is not sustainable by the organization. Estes Park Health will during FY 2022 examine expenses for reduction and examine opportunities for “new” revenue growth.

FY 2022 Capital Expenditures

The Capital Budget outlined for FY 2022 contains \$3.2 MM in *potential* expenditures. Estes Park Health has committed to the purchase of a Magnetic Resonance Imaging Unit (MRI). The MRI install is scheduled for second quarter of FY 2022.

Additionally, EPH is continuously assessing its facilities, equipment, and technology to determine the priorities for replacement, repair, and any new acquisitions. The assessment and prioritization methodology addresses patient safety, building safety and code compliance requirements, planned equipment obsolescence, and new technology. The process of determining capital allocation is a very involved process. However, during operations next year, capital purchases will be evaluated on an individual basis and purchase will be determined by EPH cash flow, cash availability, patient volumes and patient safety needs.

Conclusion

Together, the Fiscal Year 2022 Operating Budget and the Fiscal Year 2022 Capital Budget represent Estes Park Health's commitment to take care of people, patient safety and advancement of the health status of the citizens of the Estes Valley. The costs of navigating the Covid – 19 environment, the increasing costs of labor, labor shortages, and inflationary costs in supplies will create a challenging operating environment in FY 2022.

Draft operating Budget FY 2022

**ESTES PARK HEALTH
DRAFT OPERATING BUDGET 2022**

	APPROVED 2021 BUDGET	2021 PROJECTED	2022 BUDGET	DRAFT 2022 to PROJ 2021
PATIENT REVENUE				
Inpatient Revenue	14,442,457	10,410,254	12,647,532	\$ 2,237,278
Outpatient Revenue	72,543,230	76,782,655	82,378,529	5,595,874
Living Center Revenue				-
Clinic Revenue				-
TOTAL PATIENT REVENUE	86,985,687	87,192,909	\$ 95,026,061	7,833,152
Less: Contractual Adjustments	(36,533,988)	(37,822,132)	(41,336,337)	(3,514,205)
Less: Bad Debt	(1,304,786)	(1,855,054)	(1,662,956)	192,098
Contractual Adjustments	(37,838,774)	(39,677,186)	(42,999,293)	(3,322,107)
	-43.5%	-45.5%	-45.3%	
NET PATIENT REVENUE	49,146,913	47,515,723	52,026,768	4,511,045
Other	469,650	655,682	629,500	(26,182)
		54.5%	54.8%	
TOTAL OPERATING REVENUE	\$ 49,616,563	\$ 48,171,405	\$ 52,656,268	\$ 4,484,863
EXPENSES				
Wages	24,060,549	23,462,947	25,401,874	1,938,927
Benefits	6,878,585	6,162,319	6,543,320	381,001
Professional Fees/Contract Labor	9,465,295	11,564,358	13,456,966	1,892,608
Supplies	5,678,297	5,450,544	5,919,228	468,684
Utilities	591,550	626,840	622,257	(4,583)
Leases/Rentals	1,125,968	1,094,658	1,317,262	222,604
Insurance	311,442	344,347	343,865	(482)
Repairs & Maintenance	174,257	118,894	129,900	11,006
Depreciation/Amortication	3,147,937	3,203,966	3,261,108	57,142
Other	2,355,344	2,524,573	2,715,681	191,108
TOTAL OPERATING EXPENSES	\$53,789,224	\$54,553,446	\$59,711,461	5,158,015
OPERATING INCOME (LOSS)	(4,172,661)	(6,382,041)	(7,055,192)	(673,151)
Property Tax Revenues	3,137,600	3,137,599	3,499,500	361,901
Interest Expense	(396,000)	(414,524)	(402,597)	11,927
Investment Income	88,500	43,131	55,500	12,369
Gain on Disposal of Capital Assets	(10,000)	(10,000)	-	10,000
Noncapital Grants and Contributions	100,000	74,735	75,000	265
Other Net Non Operating	2,500	11,228,041	2,752,500	(8,475,541)
Total Non-Operating	2,922,600	14,058,982	5,979,903	(8,079,079)
EXCESS REVENUES/EXPENSES	(1,250,061)	7,676,941	(1,075,289)	(8,752,230)
Gifts to Purchase Capital Assets	300,000	255,888	450,000	194,112
INCREASE (DECREASE) IN NET ASSET	\$ (950,061)	\$ 7,932,830	\$ (625,289)	\$ (8,558,119)
			-1.19%	
EBITDA	\$ 2,593,876	\$ 11,551,320	\$ 3,038,416	
<i>Total Margin % INCREASE (DECREASE)</i>	<i>-1.91%</i>	<i>16.47%</i>	<i>-1.19%</i>	

ESTES PARK HEALTH

Capital Budget Summary

Fiscal Year 2022 Proposed Capital Budget


January 1, 2021 – December 31, 2022

Category	FY 2022 Budget	Percent Capital
Facility Projects	\$ 641,000	19.71%
Information Technology	\$ 347,000	10.67%
Medical Equipment	\$ 2,056,000	63.21%
Other	\$ 8,500	0.26%
Contingency Capital	\$ 200,000	6.15%
Total Capital Expenditures FY 2022	\$ 3,252,500	

Estes Park Health
3 Year Detail Draft Capital Budget
Fiscal Years 2022, 2023, 2024 Projected Capital Expenditures

ESTES PARK HEALTH CAPITAL BUDGETS FOR YEARS ENDING 12.31


Department	Description	2022	2023	2024
Lab	BioFire Molecular blood culture	\$ 35,000		
Lab	Bactec microbiology upgrade	\$ 45,000		
Lab	Microscan upgrade	\$ 95,000		
Lab	New benchtops		\$ 100,000	
Radiology	MRI**	\$ 1,540,000		
Radiology	Dexa unit		\$ 180,000	
Radiology	Refurbished C-arm		\$ 130,000	
Radiology	Radiology and fluoroscopy room			\$ 375,000
Plant	Radiology and lab HVAC	\$ 300,000		
Plant	Parking lot topcoat	\$ 85,000		
Plant	Speciality clinic automated doors	\$ 16,000		
Plant	Duress alarm system replacement	\$ 90,000		
Plant	Pickup with snow plow	\$ 60,000		
Plant	Bobcat		\$ 25,000	
Plant	Upgrade 200kw generator		\$ 45,000	
Plant	Fire alarm auto readout		\$ 45,000	
Plant	Automated OR doors		\$ 63,000	
Plant	Hot water system			\$ 270,000
IT	Parallel storage mirrored	\$ 165,000		
IT	Network component replacements	\$ 70,000	\$ 120,000	\$ 125,000
Rehab	Total gym power tower	\$ 7,000		
Rehab	Biodex balance system	\$ 13,000		
Rehab	Lite gait	\$ 17,000		
Rehab	Eliptical		\$ 5,000	
Dietary	Steam kettle with stand	\$ 8,500		
Dietary	Large ice machine		\$ 8,500	
Clinic	Ophthalmology upgrades		\$ 75,000	
Clinic	Ophthalmology equipment	\$ 20,000		
Clinic	Podiatry equipment	\$ 10,000		
Clinic	EKG Phillips		\$ 8,000	
Clinic	Hearing screening equipment	\$ 8,000		
Buildings	Four 2BR condos			\$ 1,000,000
Buildings	Office moves	\$ 80,000	\$ 80,000	
EMS	Three Stryker patient power cots	\$ 51,000		
EMS	Lucas CPR device	\$ 13,000		
EMS	Tempest cardiac monitor	\$ 20,000		
EMS	Type III ambulance		\$ 275,000	
EMS	Stryker patient power load system		\$ 30,000	
EMS	Type I transfer ambulance			\$ 175,000
Med/surg	10 beds	\$ 110,000		
Med/surg	ACLS mannequin	\$ 16,000		
Med/surg	PALS mannequin	\$ 16,000		
Med/surg	Alarm notification system	\$ 112,000		
Med/surg	OBIX fetal monitoring system		\$ 45,000	
Med/surg	Labor bed		\$ 20,000	
Med/surg	Replace PFT machine		\$ 30,000	
Med/surg	Labor bed			\$ 20,000
Med/surg	Replace nurse call light system			\$ 750,000
Med/surg	Replace two warmers			\$ 20,000
ED	Stryker OB/GYN stretcher	\$ 10,000		
ED	2 Stryker stretchers	\$ 30,000		
ED	Exam room ligh replacements (3)	\$ 10,000		
ED	2 Stryker stretchers		\$ 30,000	
ED	Exam room ligh replacements (3)		\$ 10,000	
ED	Stryker ED stretcher			\$ 15,000
ED	Trauma booms and light			\$ 150,000
HR	Applicant tracking and compensation system		\$ 110,000	
Various	Contingency/emergency items	\$ 200,000	\$ 300,000	\$ 400,000
TOTALS		\$ 3,252,500	\$ 1,734,500	\$ 3,300,000



**ESTES PARK
HEALTH**




Patient Safety & Quality Update

Kendra Simms RN, BSN
Dr. Ken Epstein, MD



1

Reminder: It is a journey, not a destination



2



6 Aims of High-Quality Health Care

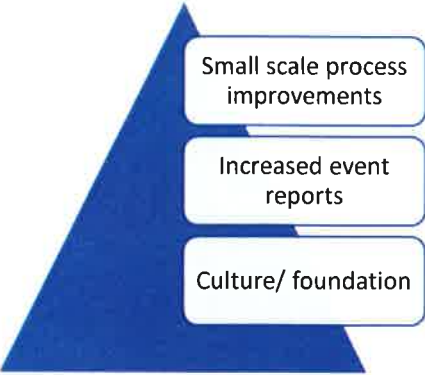
- Safe
- Effective
- Patient Centered
- Timely
- Efficient
- Equitable




ESTES PARK HEALTH

3

Continue to build a foundation



- Small scale process improvements
- Increased event reports
- Culture/ foundation



ESTES PARK HEALTH

4



DANGER
THIS EQUIPMENT
NEEDS REPAIR
NOT USE

Small Scale Process Improvements

ESTES PARK HEALTH

5

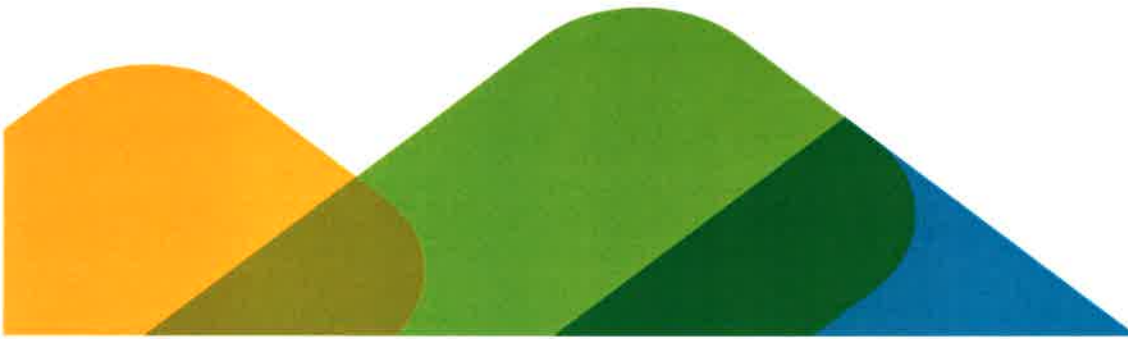
What is coming up in the future?

- Design and implementation of physician review process
- SHIP Grant
- HTP (Hospital Transformation Program)
- Continued small process improvement cycles

ESTES PARK HEALTH

6

Chief of Staff
Year in Review
Dr. Robyn Zehr
12.6.2021



1



January

- Vaccines, Vaccines, Vaccines!
 - Most frontline employees received their second vaccine in January, others started their series
 - First community vaccine clinic 1/31/21, ongoing efforts since then
- Confirmed current clinical service chiefs for next 2 years

2



7.5. |

February

- Board voted in favor of nursing home closure
- In anticipation of additional placement needs/concerns clinic requested additional social work support in clinic (*still a need)
- Reviewed COVID protocols- testing, isolation, etc



1

March

- Preparations for nursing home closure
- Ongoing COVID management- testing, vaccination, hospital care
- Physician and APP representation needed for Policy Management Committee



2

7.5.2

April

- Living Center officially closed- All residents relocated
- Approved privilege request for Lena Belleau PMHNP to start more focused behavioral health treatments at EPH
- Interviewing for new lab director
- DNV visit
- Started attending COVID ops



May

- Reviewed DNV survey in detail and the changes in structure- specifically quality management and reporting structure to MEC
 - Need to restart regular committees with physician oversight (Antibiotic stewardship, Pharmaceutical and Therapy)
- Last day of home school :)

2



June

- With change in MEC reporting- voted to separate MEC and Med Staff meetings to different days
- Initial peer review discussion in hopes to make more robust and educational
- Patient Safety Committee now combined with Quality



July

- No MEC
- Sweet spot of summer for a few weeks before Delta hit
- Retirement of CFO
- Rules and Regulations reviewed

2



7.5.4

August

- Reviewed new Quality Structure
- COVID vaccine mandate discussion
- Attempted to start educational presentations at Med Staff Meetings
- Reinstated Colorado Hospital Transfer Center (initially Tier 1)



September

- COVID/Delta
 - Nominated Dr. Koschnitzke as Infection Control and Prevention Committee Chair
- Quality updates- RCA squared process and RLDatix discussion with hopes to transition to different system with more capabilities
- Ophthalmology and Hospitalist interviews
- Discussion of potential COVID Surge/CHTC tiers
- Monoclonal Antibodies



October

- Peer review updates: PPEC informed of transition to new format- Clinical review team and then use MEC as functional Peer Review Committee
- COVID Governing
- Radiologist interviews
- Contracts signed by Hospitalists and Podiatry, initial contract to ophthalmology
- Membership dues to remain the same for 2022



November

- Reviewed budget for upcoming year
- Approval of Pfizer vaccine for Kids age 5-11
 - Initial school based vaccine clinic 11/12
- Boosters
- CFO interviews
- Kruger Rock Fire
- Group attended Peer Review Conference
 - Many of our initial recommendations are appropriate but will meet as a steering committee to review further structure needs, specifically trying to keep those with discipline authority outside of initial improvement plans



2

December

- COVID/Delta/?Omicron
- Ophthalmology interviews
- Clinical Review Committee will meet as steering committee to discuss peer review in our institution with plan to move forward in 2022



Action Items

- Obvious staffing crisis- What positions are essential for med staff functioning versus are there any areas we can adjust?
 - Need to support our long-time employees just as much as trying to recruit new staff
 - Service line review
- Peer Review
 - Plan to include APP
- Education
 - Would love to return to more regular educational platform at medical staff meetings
- Recommend transitioning Med Staff meeting to quarterly rather than monthly
- Rules and Regulations approval
- Bylaws review to update language, etc. after transition to employed hospitalists



Goals for 2022

- Continue to be a community resource for both pandemic needs and routine or emergent health care.
- Quality based approach in all areas- Systems, Peer Review, OPPE
- Improved Public Relations (Discussion back in 12/2020 and continue)



CNO Board Report December 2021



1

CNO Board Report August 2021

• COVID-19

- Current state for EPH
 - Hospital operations impact
 - Boosters
 - Outpatient impact (clinic, mAb)
- Swabbing clinic for Estes Park Community
- CHTC (Colorado hospital transfer center)
 - Partnering with UHealth
 - Crisis staffing plan
 - Executive orders

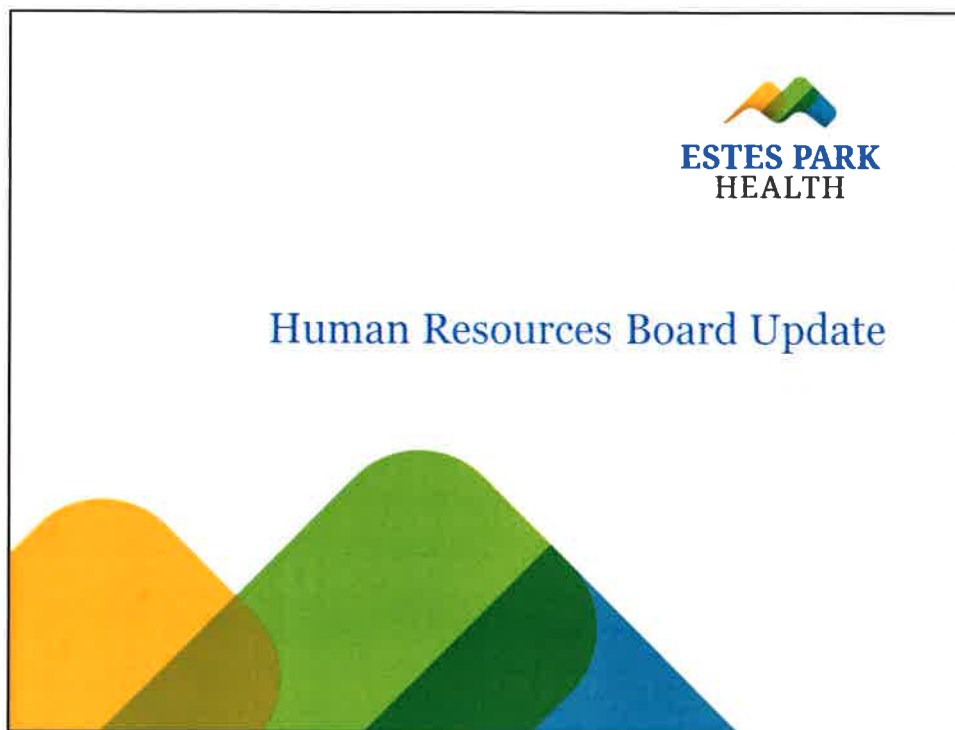


2

CNO Board Report August 2021

- Quality/Patient Safety structure/plan revision
 - Year 2 implementation
- Nursing Strategic plan-recruitment/retention/development of clinical staff
- Leader update
 - Perioperative Service line Director update
 - Home Health Care update
- DNV action plan update (survey in March/April)





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2

2022 High-level Focus Areas

- **RETENTION!!!**
 - Continue with the compensation process, with merit increases scheduled in second quarter (if approved) and any market adjustments needed in fourth quarter
 - Revamp Performance Management process
 - Review current benefits for possible improved offerings in 2023
 - Create a formal leadership development plan and begin implementing (including succession planning)
 - Implementing employee development programs

Continued Challenges

- Labor Pool and Market
- Learn and Implement Meaningful Retention Strategies

3

