Draft Agenda

Estes Park Health Board of Directors' Regular Meeting by GoToWebinar and In-Person

Wednesday August 28, 2024

5:30 pm - 7:20 pm

Estes Park Town Hall - Town Board Meeting Room, 170 MacGregor Ave, 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	EPH Board of Directors
3	Public Comments on Items Not on the Agenda	3	Information	Public
4	General Board Member Comments	3	Information	EPH Board of Directors
6	Consent Agenda Items Acceptance: 5.1 Board Minutes 5.1.1 EPH Board Regular Meeting Minutes July 24, 2024 5.1.2 EPH Board Executive Session Minutes July 23, 2024 5.1.3 EPH Board Executive Session Minutes July 30, 2024 5.1.4 EPH Board Executive Session Minutes Aug 06, 2024 5.1.5 EPH Board Executive Session Minutes Aug 13, 2024 5.1.6 EPH Board Executive Session Minutes Aug 20, 2024 5.1.7 EPH Board Executive Session Minutes Aug 23, 2024 5.2 Other Documents 5.2.1 Medical Staff Credentialing Report	2	Action Action	EPH Board of Directors
+	Presentations:	15	Discussion	Mr Vern Carda
	7.1 EPH CEO - Strategic Initiatives Update 7.2 EPH Chief Financial Officer - Q2 2024 Financial Summary and EPH Financial Performance Strategic Perspective	15		Ms Aysha Douglas & Vern Carda
İ	7.3 EPH Chief Nursing Officer Strategic Update	15	Discussion	Ms Pat Samples
Ì	7.4 Human Resources Manager Strategic Update and Overview of Systems to Ensure a Safe and Healthy Work Environment	15		Ms Anna Lipasek
	7.5 Park Hospital District Executive Sessions and Compliance with Colorado Open Meeting Law	15	Discussion	EPH Legal Counsel from Hall Render
	7.6 Possible Healthcare System Affiliation - Activity Update	4	Discussion	EPH Board of Directors
8	Executive Summary - Significant Items Not Otherwise Covered	2	Discussion	Senior Leadership Team
	All Attendee Conversation on Emerging Topics	15	Conversation	Community Attendees, EPH Board, EPH Senior Leadership Team
10	Potential Agenda Items: Wednesday Sep 25, 2024 Regular Board Meeting	1	Discussion	EPH Board of Directors
11	Adjournment	1	Action	EPH Board of Directors
	Estimated Total Regular Session Mins.	110		

Next Regular EPH Board Meeting: Wednesday September 25, 2024 5:30 - 7:30 pm

Possible Next Meeting Agenda Items



ESTES PARK HEALTH BOARD OF DIRECTORS' Regular Meeting Minutes – July 24, 2024

Board Members in Attendance

Dr. David Batey, Chair

Mr. Drew Webb, Vice Chair

Dr. Steve Alper, Finance Committee Chair

Ms. Brigitte Foust, Board Secretary

Dr. Cory Workman, Member at Large

Other Attendees

Mr. Vern Carda, CEO

Ms. Pat Samples, CNO

Ms. Aysha Reeves, CFO

Ms. Rachel Ryan (via webinar)

Ms. Michelle Gordon

Ms. Theresa Brynard

Dr. Jennifer McLellan

Dr. John Knudtson

Ms. Kaci Early

Mr. Kevin Mullin

Ms. Wendy Rigby

Dr. Bridget Dunn

Mr. Glen Gill

Ms. Iryna Irkliienko

Ms. Karlye Pope

Community Attendees (present and via webinar):

Randy Brigham

Emily Rhodes

William Crosby

Dennis Hoshiko

Larry Leaming

Max Salfinger

Andy Selig

Ian Stewart

Patti Brown

1. Call to Order

The board meeting was called to order at 5:33 PM by David Batey; there was a quorum present. Notice of the board meeting was posted in accordance with the Sunshine Law Regulation.

2. Approval of the Agenda

David Batey motioned to approve the agenda as submitted. Steve Alper seconded the motion, which carried unanimously.

3. <u>Appreciation of Dr. Nicholaus Mize's Service to the Estes Park Community and to Estes Park Health</u>

General accolades regarding Dr. Mize's years of service at Estes Park Health. He will be dearly missed, but all expressed appreciation for his talent, his care, and his dedication to his patients. All wished him the best for this new venture.

4. Public Comments on Items Not on the Agenda

No comments.

5. General Board Member Comments

No comments.

6. Consent Agenda Items Acceptance

David Batey motioned to approve consent agenda items as listed, which carried unanimously. Second by Drew Webb.

7. Medical Staff Credentialing Report

Brigitte Foust recommended the approval of the Medical Staff Credentialing Report. Cory Workman seconded the motion, which carried unanimously.

8. EPH Board Positions and Committee Assignments 2024-25 – EPH Board of Directors

Every year in May/June timeframe, the EPH Board of Directors determines these assignments. No changes have been made, apart from the liaison to the Estes Park Health Foundation; Vern Carda has now been appointed in place of Drew Webb.

9. Presentations

- 9.1 <u>Estes Valley Home Health and Hospice Services Update Ms. Pat Samples, Mr. Vern Carda</u>
 - Additional resources remain in place at the hospital, which include two social workers for full coverage, seven days a week. Needs vary depending on coverage, health conditions, family support, and diagnosis; but these items help the hospital determine what resources are available to individualize a support plan.
 - Social workers continue to work with those who "walk the continuum" and adjust the resources and care to achieve the outcome patients are planning for.

➤ EPH has also partnered with community agencies (Crossroads, for example) for assistance with rides, funding prescriptions, etc. Quota Club remains helpful as well for DME (walkers, wheelchairs, etc.). Those in need for these services may always call EPH for assistance.

9.2 <u>EPH CEO – Strategic Initiatives Update – Mr. Vern Carda</u>

Strategic Planning Process

- ➤ CrowdStrike outage occurred on July 19th, 2024; staff was well-prepared and adequately handled issue while maintaining excellent patient care.
- Locums coverage will arrive by the first week in August to see internal medicine patients; recruitment efforts are underway for both internal medicine and podiatry.

9.3 EPH Chief of Staff Strategic Update – Dr. Bridget Dunn

➤ See presentation. Updates included the items discussed at the Physician Strategic Planning Session on 6/6/24; the next steps for the above (regarding access to care, systemic changes to improve patient experience, etc.), and the implementation of plans once considered.

9.4 Possible Healthcare System Affiliation – Activity Update

David Batey addressed rumor regarding Vern Carda's alleged stance that Estes Park Health no longer needs to affiliate, as the organization is doing so well financially. Vern Carda noted, "I feel very strongly that our need is to affiliate." Rumor was confirmed as not true.

- Emily Rhodes: In the past, the benefits for the community and the EPH organization was shared by the board, but what about how the affiliation/merger will affect the employees/staff members of EPH. For example: Is staff going to keep their years of service? Are medical benefits going to be more affordable? Please share what EPH staff employees can expect with this merger. Generally speaking, these items are retained following a merger, though this is different with every organization. At this juncture, these items have not been discussed with potential affiliate partners.
- Emily Rhodes: Can you please share an update on the matching contributions benefits? Where are we in this process? Estes Park Health is continuing to work with the attorneys on this matter. Employees will be the owners of their contributions inside their benefits package, from day one of contribution.
- Max Salfinger: Can the Board provide an estimate when the letter of intent may be signed? Is it 3 months away, 6 months away, or even longer? The Board of Directors is currently engaged in that discussion as one half of the working relationship. The intention is to move through with the LOI as quickly as possible.

10. Executive Summary – Significant Items Not Otherwise Covered No comments.

11. All Attendee Conversation on Emerging Topics

Floor opened at 6:44 PM. No questions were asked.

12. Potential Agenda Items for Wednesday August 28, 2024, Regular Board Meeting No comments.

13. Adjournment

David Batey motioned to adjourn the meeting at 6:46 PM. Drew Webb and Steve Alper seconded the motion, which carried unanimously.

David M. Batey, Chair

Estes Park Health Board of Directors

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

Tuesday, July 23, 2024 08:00 am - 10:30 am

	Regular Session	Mins.	Procedure	Presenter(s)
1 C	all to Order/Welcome (Time 08:07 am)	1	Action	Dr David Batey
2 A	pproval of the Agenda (Motion Alper 2nd Webb - Unanimous)	1	Action	EPH Board
3 P	ublic Comments on Items Not on the Agenda - None	1	Information	Public
4 G	eneral Board Member Comments on Items Not on the Agenda - None		Information	EPH Board
5 St St St St re	ntertain a motion to enter Executive Session pursuant to Section 24-6-402(4)(e) C.R.S. for the urpose of determining positions relative to matters that may be subject to negotiations; developing trategy for negotiations; and instructing negotiators, with regard to Affiliation with a 3rd Party, EPH trategic Initiatives, EPH Quality Initiatives, the relationship with the EPH Foundation, and pursuant to ection 24-6-402(4)(b) C.R.S. to conference with an attorney for Estes Park Health for the purposes of eceiving legal advice on specific legal questions (Motion Alper 2nd Webb - Unanimous)	145	Action	EPH Board
6 A	djournment (Motion Workman 2nd Foust - Unanimous Time 10:32 am)	1	Action	EPH Board
	Total Regular Session Mins.	150		

Board Members Present: Alper, Batey, Foust, Webb, Workman

Estes Park Health Board of Directors' Executive Session - In Person and by TEAMS Tuesday, July 30, 2024 08:00 am - 10:30 am

	Regular Session	Mins.	Procedure	Presenter(s)
1	Call to Order/Welcome (Time am)	1_	Action	Dr David Batey
2	Approval of the Agenda (Motion 2nd -)	1	Action	EPH 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	EPH 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 instructing negotiators, with regard to Affiliation with a 3rd Party, EPH Strategic Initiatives, EPH Quality Initiatives, the relationship with the EPH Foundation, and pursuant to Section 24-6-402(4)(b) C.R.S. to conference with an attorney for Estes Park Health for the purposes of receiving legal advice on specific legal questions (Motion 2nd -)	145	Action	EPH Board
6	Adjournment (Motion 2nd - Time am)	1	Action	EPH Board
	Total Regular Session Mins.	150		

Estes Park Health Board of Directors' Executive Session - In Person and by TEAMS Tuesday, August 06, 2024 08:00 am - 09:30 am

Regular Session	Mins.	Procedure	Presenter(s)
Call to Order/Welcome (Time 08:04 am)	1	Action	Dr David Batey
Approval of the Agenda (Motion Alper 2nd Webb - Unanimous)	1	Action	EPH Board
Public Comments on Items Not on the Agenda - None	1	Information	Public
General Board Member Comments on Items Not on the Agenda - None	1	Information	EPH Board
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 instructing negotiators, with regard to Affiliation with a 3rd Party, EPH Strategic Initiatives, EPH Quality Initiatives, the relationship with the EPH Foundation, and pursuant to Section 24-6-402(4)(b) C.R.S. to conference with an attorney for Estes Park Health for the purposes of receiving legal advice on specific legal questions (Motion Alper 2nd Foust - Unanimous)	85	Action	EPH Board
Adjournment (Motion Alper 2nd Foust - Unanimous Time 09:41 am)	1	Action	EPH Board
Total Regular Session Mins.	90		

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

Tuesday, August 13, 2024 08:00 am - 10:30 am

Regular Session	Mins.	Procedure	Presenter(s)	
Call to Order/Welcome (Time 08:11 am)	1	Action	Dr David Batey	
Approval of the Agenda (Motion Alper 2nd Webb - Unanimous)	1	Action	EPH Board	
Public Comments on Items Not on the Agenda - None	1	Information	Public	
General Board Member Comments on Items Not on the Agenda - None	1	Information	EPH Board	
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 instructing negotiators, with regard to Affiliation with a 3rd Party, EPH Strategic Initiatives, EPH Quality Initiatives, and the relationship with the EPH Foundation. (Motion Alper 2nd Webb - Unanimous)	145	Action	EPH Board	
Adjournment (Motion Alper 2nd Foust - Unanimous Time 10:24 am)	1	Action	EPH Board	
Total Regular Session Mins.	150			

Board Members Present: Alper, Batey, Foust, Webb, Workman

Estes Park Health Board of Directors' Executive Session - In Person and by TEAMS Tuesday, August 20, 2024

08:00 am - 10:30 am

Regular Session	Mins.	Procedure	Presenter(s)
Call to Order/Welcome (Time 08:06 am)	1	Action	Dr David Batey
Approval of the Agenda (Motion Alper 2nd Foust - Unanimous)	1	Action	EPH Board
Public Comments on Items Not on the Agenda - None	1	Information	Public
General Board Member Comments on Items Not on the Agenda - None	1	Information	EPH Board
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 instructing negotiators, with regard to Affiliation with a 3rd Party, EPH Strategic Initiatives, EPH Quality Initiatives, and the relationship with the EPH Foundation. (Motion Alper 2nd Workman - Unanimous)	145	Action	EPH Board
Adjournment (Motion Alper 2nd Workman - Unanimous Time 10:34 am)	1	Action	EPH Board
Total Regular Session Mins.	150		

Estes Park Health Board of Directors' Executive Session - In Person and by TEAMS Tuesday, August 23, 2024

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03:30	Ę	m	-	06:	00	рm

Regular Session	Mins.	Procedure	Presenter(s)
1 Call to Order/Welcome (Time 03:30 pm)	1	Action	Dr David Batey
2 Approval of the Agenda (Motion Alper 2nd Webb - Unanimous)	1	Action	EPH Board
Public Comments on Items Not on the Agenda - None	1	Information	Public
4 General Board Member Comments on Items Not on the Agenda - None	1	Information	EPH Board
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 instructing negotiators, with regard to Affiliation with a 3rd Party, EPH Strategic Initiatives, EPH Quality Initiatives, and the relationship with the EPH Foundation. (Motion Alper 2nd Foust - Unanimous)	145	Action	EPH Board
6 Adjournment (Motion Alper 2nd Workman - Unanimous Time 05:51 pm)	1	Action	EPH Board
Total Regular Session Mins.	150		



Park Hospital District Board 28 August 2024

CREDENTIALING RECOMMENDATIONS

Credentials Committee approval:

July 31st, 2024

Present: Drs.: McLellan, Dunn, Zehr, Brigitte Foust, Iryna Irkliienko, Kate Cramer (T)

Medical Executive Committee approval:

August 7th, 2024

Initial Appointments:

Bianca Christensen, MD, Courtesy, Pathology

Reappointments:

Lori M. Truetzschler-Davis, PMHNP, NP, APP Psychiatry/Fam Med

LOCUM TENENS Initial Appointment:

Dr. Barbara E. Johnston, MD – Internal Medicine Locum (Clinic) – 8/8/2024

Credential By Proxy:

Robert 1. Hynecek, MD - Effective 8/15/2024

Resignations:

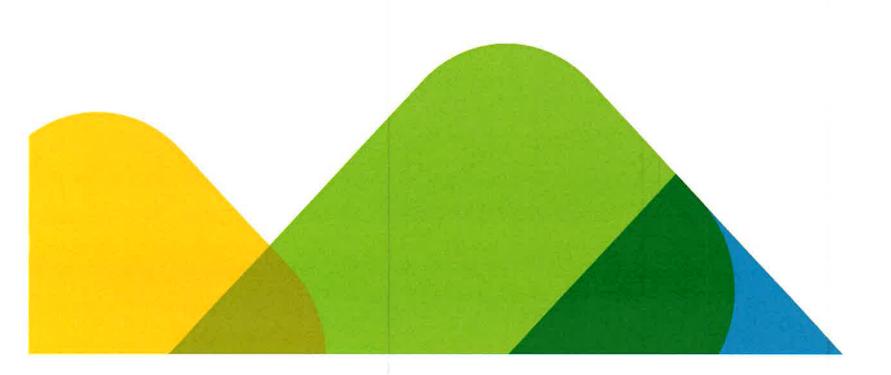
Nicholaus A. Mize, DO - resigned employment as of 07/31/2024

FPPE:

N/A



Quarterly Financials 08/28/2024



Overview

- 2nd Quarter 2024 financials
 - On target with budget
 - Continue to focus on revenue growth and expense management

Balance Sheet - Assets

Row								
5		2024 June	2	023 December			2023 June	
6		Actual	Actual	2024 Jun minus 2023 Dec	((2024 Jun) - (2023 Dec)) ÷ ABS(2023 Dec)	Acīual	2024 Jun minus 2023 Jun	((2024 Jun) - (2023 Jun)) ÷ ABS(2023 Jun)
7	ASSETS							
8								
9	CURRENT ASSETS				1			
10	Cash and Cash Equivalents	4,839,003	7,320,283	(2,481,280)	(33.9%)	2,399,341	2,439,662	101.7%
11	Restricted Cash Under Debt Agreements	3,215,598	3,314,166	(98,568)	(3.0%)	3,529,456	(313,858)	(8.9%)
12	Receivables							
	approximately \$1,398,000 in 2024 and \$1,442,000 in							
13	2023	6,524,652	5,717,496	807,156	14.1%	6,392,216	132,436	2.1%
14	Property Taxes and Other	4,816,739	6,411,344	(1,594,605)	(24.9%)	4,500,454	316,285	7.0%
15	Estimated Third-Party Payor Settlements	- / 5 / 1	-		no÷0	1,702,112	(1,702,112)	(100.0%)
16	Supplies	989,330	981,457	7,873	0.8%	1,476,910	(487,580)	(33.0%)
17	Prepaid Expenses	611,339	587,839	23,500	4.0%	778,752	(167,413)	(21.5%)
18	TOTAL CURRENT ASSETS (Sum Rows 10, 11, 13, 14, 15, 16, 17)	20,996,661	24,332,585	(3,335,924)	(13.7%)	20,779,241	217,420	1.0%
19								
20	LONG-TERM ASSETS							
21	Investments	10,039,404	9,880,498	158,906	1.6%	9,607,145	432,259	4.5%
22	Capital Assets							
23	Capital Assets Not Being Depreciated	968,529	518,272	450,257	86.9%	988,091	(19,562)	(2.0%)
	Depreciable Capital Assets, Net of Accumulated							
24	Depreciation	26,824,256	27,221,472	(397,216)	(1.5%)	27,758,009	(933,753)	(3.4%)
25	Total Capital Assets, Net	27,792,785	27,739,744	53,041	0.2%	28,746,100	(953,315)	(3.3%)
26	Right of Use Lease Assets, Net	6,626,043	7,057,509	(431,466)	(6.1%)	7,507,246	(881,203)	(11.7%)
27	Subscription-Based Assets, Net	503,490	635,438	(131,948)	(20.8%)		503,490	no÷0
28	TOTAL LONG-TERM ASSETS	44,961,722	45,313,189	(351,467)	(0.8%)	45,860,491	(898,769)	(2.0%)
29								
30	TOTAL ASSETS (Sum Rows 18, 28)	65,958,383	69,645,774	(3,687,391)	(5.3%)	66, 6 39,732	(681,349)	(1.0%)



Balance Sheet – Liabilities and Net Position

Row		Designation of the control of	/ Ed West See							
5		2024 June	2	023 December		2023 June				
6		Actual	Actual	2024 Jun minus 2023 Dec	((2024 Jun) - (2023 Dec)) ÷ ABS(2023 Dec)	Actual	2024 Jun minus 2023 Jun	((2024 Jun) - (2023 Jun)) ÷ ABS(2023 Jun)		
32	LIABILITIES, DEFERRED INFLOWS OF RESOURCES, AND NET POSITION							3011)		
33			1					1		
34	CURRENT LIABILITIES									
35	Current Portion of Long-Term Debt	246,097	1,389,528	(1,143,431)	(82.3%)	265.178	(19,081)	(7.2%)		
36	Current Portion of Lease Liability	530,416	937,326	(406,910)	(43.4%)	689,233	(158,817)	(23.0%)		
37	Current Portion of Subscription Liability	29,316	342,325	(313,009)	(91.4%)	=	29,316	no÷0		
38	Accounts Payable	1,315,770	1,564,339	(248,569)	(15.9%)	956,497	359,273	37.6%		
39	Estimated Third-Party Payor Settlements	350,000	1,135,970				350,000	no÷0		
40	Deferred Revenue		33,223	(33,223)	(100.0%)	13,744	(13,744)	(100.0%)		
41	Accrued Expenses	"				,		(
42	Salaries, Wages, and Related Liabilities	1,869,426	1,506,533	362,893	24.1%	1,503,420	366,006	24.3%		
43	Compensated Absences	832,335	907,863	(75,528)	(8.3%)	1,000,905	(168,570)	(16.8%)		
44	Other	854,952	972,709	(117,757)	(12.1%)	407,111	447,841	110.0%		
45	TOTAL CURRENT LIABILITIES	6,028,312	8,789,816	(2,761,504)	(31.4%)	4,836,089	1,192,223	24.7%		
46										
47	LONG-TERM LIABILITIES									
48	Long-Term Debt, Net of Current Portion	10,542,215	10,655,231	(113,016)	(1.1%)	11,890,565	(1,348,350)	(11.3%)		
49	Long-Term Lease Liability, Net of Current Portion	6,340,932	6,340,932	*	0.0%	7,003,792	(662,860)	(9.5%)		
50	Long-Term Subscription Liability, Net of Current Portion	273,957	241,825	32,132	13.3%	=	273,957	no÷0		
51	TOTAL LONG-TERM LIABILITIES	17,157,104	17,237,988	(80,884)	(0.5%)	18,894,357	(1,737,253)	(9.2%)		
52										
53	TOTAL LIABILITIES (Sum Row 45, 51)	23,185,416	26,027,804	(2,842,388)	(10.9%)	23,730,446	(545,030)	(2.3%)		
54										
55	DEFERRED INFLOWS OF RESOURCES - PROPERTY TAXES	4,386,455	4,386,455		0.0%	3,261,977	1,124,478	34.5%		
56										
57	NET POSITION									
58	Net Investment in Capital Assets	16,959,385	15,525,524	1,433,861	9.2%	16,404,578	554,807	3.4%		
59	Restricted, Expendable	3,215,598	3,314,166	(98,568)	(3.0%)	3,529,456	(313,858)	(8.9%)		
60	Unrestricted	18,211,529	20,391,826	(2,180,297)	(10.7%)	19,713,275	(1,501,746)	(7.6%)		
61	TOTAL NET POSITION	38,386,512	39,231,516	(845,004)	(2.2%)	39,647,309	(1,260,797)	(3.2%)		
62										
63	TOTAL LIABILITIES, DEFERRED INFLOWS OF RESOURCES, AND NET POSITION	65,958,383	69,645,774	(3,687,391)	(5.3%)	66,639,732	(681,349)	(1.0%)		



2nd Quarter 2024 Total Operating Revenue

Row											
!	;		2024 YEAR TO	D DATE		202	3 YEAR TO DAT	E	202	22 YEAR TO DA	TE
	5	Jan through Jun		Jan through Jun			Jan through Jun				
	1	Actual (A)	Budget (B)	Actual - Budget	Percent (A-B)÷ABS(B)	2023 Actual	2024 Actual - 2023 Actual	Percent (24- 23)÷ABS(23)	2022 Actual	2024 Actual - 2022 Actual	
	OPERATING INCOME							, , ,			
	3										
10	O OPERATING REVENUES										
1	L										
12	2 Charges for Patient Services										
13	3 Inpatient	3,313,780	2,884,905	428,875	14.9%	2,661,325	652,455	24.5%	4,514,009	(1,200,229)	(26.6%)
14	4 Outpatient	46,653,313	49,425,453	(2,772,140)	(5.6%)	45,501,328	1,151,985	2.5%	38,999,327	7,653,986	19.6%
15	Total Charges for Patient Services	49,967,093	52,310,358	(2,343,265)	(4.5%)	48,162,653	1,804,440	3.7%	43,513,336	6,453,757	14.8%
16	j										
17	7 Deductions from Charges for Patient Services										
18	Contracts (Medicare, Medicaid, Commercial)	(20,755,486)	(22,974,000)	2,218,514	9.7%	(20,730,211)	(25,275)	(0.1%)	(19,294,917)	(1,460,569)	(7.6%)
19	Charity, Bad Debt, Uncompensated	(1,734,055)	(1,343,870)	(390,185)	(29.0%)	(1,161,082)	(572,973)	(49.3%)	(961,914)	(772,141)	(80.3%)
20		(22,489,541)	(24,317,870)	1,828,329	7.5%	(21,891,293)	(598,248)	(2.7%)	(20,256,831)	(2,232,710)	(11.0%)
2:											
27	Net Patient Service Revenues	27,477,552	27,992,488	(514,936)	(1.8%)	26,271,360	1,206,192	4.6%	23,256,505	4,221,047	18.1%
23	3 ,	55.0%	53.5%			54.5%			53.4%		
24											
25		149,480	163,855	(14,375)	(8.8%)	155,771	(6,291)	(4.0%)	197,954	(48,474)	(24.5%)
26											
27	Total Operating Revenues (Row 22 + Row 25)	27,627,032	28,156,343	(529,311)	(1.9%)	26,427,131	1,199,901	4.5%	23,454,459	4,172,573	17.8%

2nd Quarter 2024 Total Operating Expenses

Row												
5		2024 YEAR TO DATE				207	23 YEAR TO DATE	E	20'	22 YEAR TO DA	,TE	
6			Jan through Jun			Jan through Jun]	Jan through Jun		
,		Astrol /A)	الماليد الداري	Actual -	Percent (A-	2022 4-4-4	2024 Actual -	Percent (24-	2222 4 - 4 - 4	2024 Actual -	Percent (24-	
'		Actual (A)	Budget (B)	Budget	B)÷ABS(B)	2023 Actual		23)÷ABS(23)	1 2022 Actual		22)÷ABS(22)	
28												
29	Operating Expenses							3				
30	Salaries and Wages	12,865,569	13,368,007	(502,438)	(3.8%)	13,264,978	(399,409)	(3.0%)	11,853,487	1,012,082	8.5%	
31	Employee Benefits	2,919,157	3,384,639	(465,482)	(13.8%)	3,061,933	(142,776)	(4.7%)	2,958,770	(39,613)	(1.3%)	
32	Professional Fees and Purchased Services	7,958,851	7,234,477	724,374	10.0%	7,795,854	162,997	2.1%	9,005,055	(1,046,204)	(11.6%)	
33	Supplies	2,886,084	2,732,538	153,546	5.6%	2,715,833	170,251	6.3%	2,871,148	14,936	0.5%	
34	Utilities	317,363	333,466	(16,103)	(4.8%)	334,448	(17,085)	(5.1%)	387,533	(70,170)	(18.1%)	
35	Leases and Rentals	132,574	136,704	(4,130)	(3.0%)	163,877	(31,303)	(19.1%)	592,743	(460,169)	(77.6%)	
36	Insurance	256,757	220,256	36,501	16.6%	205,026	51,731	25.2%	191,958	64,799	33.8%	
37	Repairs and Maintenance	62,617	229,476	(166,859)	(72.7%)	169,896	(107,279)	(63.1%)	85,040	(22,423)	(26.4%)	
38	Depreciation and Amortization	1,802,996	1,779,991	23,005	1.3%	1,709,354	93,642	5.5%	1,637,802	165,194	10.1%	
39	Other	1,466,492	1,519,760	(53,268)	(3.5%)	1,451,447	15,045	1.0%	1,700,656	(234,164)	(13.8%)	
40	Total Operating Expenses (Sum of Rows 30 to 39)	30,668,460	30,939,314	(270,854)	(0.9%)	30,872,646	(204,186)	(0.7%)	31,284,192	(615,732)	(2.0%)	
41												
42	TOTAL OPERATING INCOME (LOSS) (Row 27 minus Row 40)	(3,041,428)	(2,782,971)	(258,457)	(9.3%)	(4,445,515)	1,404,087	31.6%	(7,829,733)	4,788,305	61.2%	
43	Operating Margin = Total Operating Income (Loss) ÷ Total Operating	(11.0%)	(9.9%)			(16.8%)			(33.4%)			



2nd Quarter 2024 Non-Operating Revenues & Expenses

Row						A					
5			2024 YEAR TO	DATE		202	3 YEAR TO DATI		202	22 YEAR TO DA	TE
6			Jan through	Jun		Ja	ın through Jun		Ja	an through Jun	
7		Actual (A)	Budget (B)	Actual - Budget	Percent (A-B)÷ABS(B)	2023 Actual		Percent (24- 23)÷AB S (23)	2022 Actual	2024 Actual - 2022 Actual	Percent (24- 22)÷ABS(22)
45	NONOPERATING REVENUES (EXPENSES)										
46	Property Tax Revenues	2,149,119	2,161,314	(12,195)	(0.6%)	1,749,593	399,526	22.8%	1,758,709	390,410	22.2%
47	Interest Expense	(264,567)	(276,960)	12,393	4.5%	(259,353)	(5,214)	(2.0%)	(191,737)	(72,830)	(38.0%)
48	Investment Income (Loss)	208,670	151,650	57,020	37.6%	177,629	31,041	17.5%	(633,510)	842,180	_ 132.9%
49	Gain (Loss) on Disposal of Capital Assets		K	In:		(3,412)	3,412	100. 0 %			0.0%
50	Noncapital Grants and Contributions	6,940	12,504	(5,564)	(44.5%)	4,931	2,009	40.7%	17,207	(10,267)	(59.7%)
51	Other	(105,676)	(105,000)	(676)	(0.6%)	1,466,216	(1,571,892)	(107.2%)	331,020	(436,696)	(131.9%)
52	TOTAL NONOPERATING REVENUES, NET (Sum of Rows 46 to 51)	1,994,486	1,943,508	50,978	2.6%	3,135,604	(1,141,118)	(36.4%)	1,281,689	712,797	55.6%
53	DEFICIT OF REVENUES OVER EXPENSES BEFORE CAPITAL	(1,046,942)	(839,463)	(207,479)	(24.7%)	(1,309,911)	262,969	20.1%	(6,548,044)	5,501,102	84.0%
	CONTRIBUTIONS				` '		•				
55						4					
56	Capital Contributions	201,938		201,938			(201,938)		:-	201,938	0.0%
57											
58	NET POSITION INCREASE (DECREASE) (Row 54 + Row 56)	(845,004)	(839,463)	(5,541)	(0.7%)	(1,309,911)	464,907	35.5%	(6,548,044)	5,703,040	87.1%
59	Total Margin = Net Position ÷ Total Operating Revenues	(3.1%)	(3.0%)			(5.0%)			(27.9%)		
60											
10	Net Position - Beginning of Period	39,231,516				40,957,220			48,992,034		
62											
63	NET POSITION - END OF PERIOD	38,386,512				39,647,309			42,443,990		
64											
65	EBITDA - Earnings Before Interest, Depreciation, and Amortization	1,222,559	1,217,488	5,071	0.4%	658,796	563,763	85.6%	(4,718,505)	5,941,064	125.9%



Board Metrics

B .			
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Board		Cui	

			2024							2023			
	Jun	Мау	Apr	Mar	Feb	Jan	Dec	Nov	Oct	Sep	Aug	Jul	Jun
Days Cash on Hand with Year to Date Monthly Average	114.1	116.0	119.3	116.2	107.3	115.6	125.5	138.3	134.8	124.5	117.7	115.4	100.1
Gross Days in Receivables	48.8	46.4	48.7	45.4	48.6	51.2	46.2	43.0	45.8	47.4	48.7	47.6	49.5

Year to Date EBITDA	2024 Jun	2023 Jun	2022 Jun
(Earnings Before Interest, Depreciation, and Amortization)	1,222,559	658,796	(4,718,505)

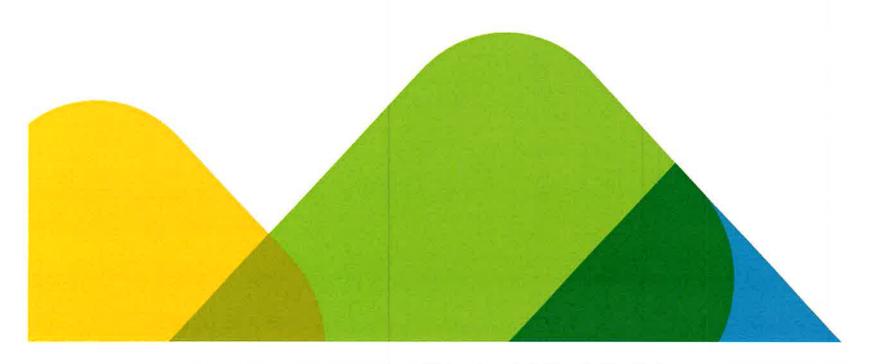


Summary – 2nd Quarter 2024

- Overall, EPH is on target with budget year to date for 2024. However, we need to continue to focus on revenue growth and expense management.
- Net patient service revenue (line 22) is right on budget for the year. Year over year, net patient service revenue increased \$1.2M or 4.6%.
- Salaries and Wages (line 30), Employee Benefits (line 31), and Professional Fess and Purchased Services (line 32) combined are slightly favorable to budget for the year.
- Total operating expenses (line 40) are right on budget for the year.
- Operating loss (line 42) is unfavorable to budget by \$258K or 9.3% for the year. Year over year, operating loss improved \$1.4M or 32%.
- Decrease in net position (line 58) is right on budget for the year. Year over year, decrease in net position improved by \$465K or 36%.
- Days cash increased 14 days year over year.

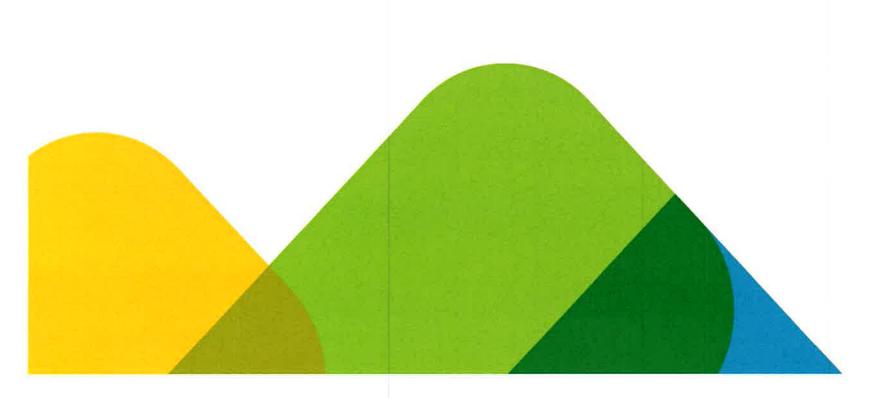


Questions?





EPH CNO Update 8-2024



DNV update...

- NC-1's = 10, NC-2's=7
- All from 2023 survey addressed
- Submitted 60-day update to DNV 8/30/2024
- Currently working on tracers and high-risk areas.



Emergency Preparedness update...

- Incident Command initiated on 8/6/2024 in preparation for wildfire evacuations.
 - Applied lessons learned from 2020 fire evacuation.
 - Identified roles and expectations.
 - De-activated Thursday 8/
 After action review completed.
- Avian flu preparation with CDPHE and WCHD (Emergency Preparedness).
 - Partnered with CDC.
- COVID and flu vaccination process initiated for all EPH employees.



ICS basic organization chart (ICS-100 level depicted)

- Pharmacy coverage to 24/7
 - Increase clinical support (take home medications, resuscitation medication needed, patient education).
 - Increase support for medication reconciliation at the bedside.
 - Increase support for infusion/chemotherapy service line.
- Relocated sleep lab on to EPH campus
 - Hired sleep technician
 - Partnering with UChealth to ensure adequate training, interpretation of test and scheduling.
 - Safer environment.
- Developed urology service line
 - Implementation 8/6/2024.
 - Clinic visits and surgery cases.



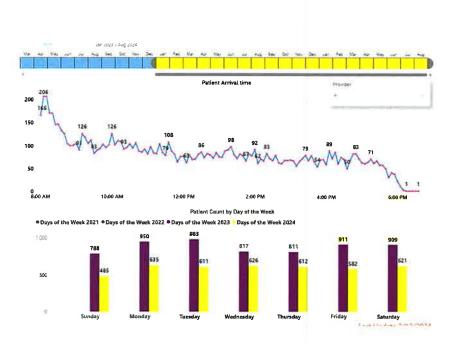
- Laboratory
 - Scheduled appointments an option (and can still do walk-in)
 - Additional support for nursing departments.
 - Additional testing to support new physicians.

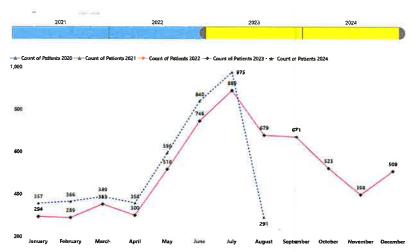
Clinical Laboratory - EPH	Goal	JAN	FEE	M	AR	APR	MAY	JUN	JUL
Pre- Analytical	Increase by 5%							-	
OP Lab- Staff Explained	70.1	% 🚱	80.0%	81.9% 🔗	86,6%	84.6%	⊗ 83.3	% 🔗 83.89	6
OP Lab- Test/procedure Began on Time	81.6	% 1	80.4% ①	81.3% (78,8%	84.6%	74.4	% (1) 79.29	6
OP Lab- Staff Listened	84.4	% 3	87.2%	91.5%	85.4%	84.6%	88.9	% Ø 89.09	6
OP Lab- Facility was Clean	88.5	96 8	95.7%	93.6% 🥡	87.2%	96.2%	Ø 91.1	% 💮 93.79	6
OP Lab- Trusted with care	85.8	% 3	87.2%	90.4% (85,3%	84.6%	84.4	% 🔗 86.69	6
OP Lab- Facility Would Recommend	86.4	% 1	84.4%	80.9% 🥡	83.9%	65.4%	® 82.4	% 🔗 88.29	6
OP Lab- When to Expect Results	68.8	% 🗐	69.4%	63.6% 🥡				% (I) 65.79	6
OP Lab- Total Volume 2023	4867 (2023 Avg)	10000	4950	4232	4679	4737	44:	.5 526	3
OP Lab- Total Volume 2024	500,000		4788	4166	4019	4946	466	7 507	3
			-3.30%	-1.60%	-14.10%	4.40%			
Volume Fiscal YOY % change									•
Blood Culture Contamination- MED SURG	<3%	8	0% 🔗	0% 🤗	0%		Ø 0	% Ø 09	ń
Blood Culture volume (MED SURG)	n/a	-	3	4	6	0	-		9
Blood Culture Contamination- ED	<3%	8	0% 🚫	3% 🤡	2%	Ø 0%	Ø 0	% 🚳 39	6
Blood Culture volume (ED)	n/a	-	56	38	44	26	4	9 5	3
Blood Culture Contamination- LAB	<3%	8	0% 🤣	0% 🤡	0%	∅	Ø 0°	% 🕢 D9	6
Blood Culture Volume (LAB)	n/a		2	0	4	6		2 :	2
Analytical									
STAT TROPONIN TAT	>90% within 45 mins	0	96.0% 🤣	97.0% 🤡	96.0%	95.0%		%	
STAT CBC TAT	>90% within 45mins	0	100.0%	99.0% 🤡	99.0%	200.0%	2 100.0	%	
STAT CMP TAT	>90% within 35mins	0	96.0%	100.0%	99.0%	3 100.0%	Ø 99.0	%	
STAT LACTATE TAT	>90% within 15mins	0	100.0%	100.0% 🤡	100.0%	2 100.0%	Ø 100.0	%	
STAT PT/INR TAT	>90% within 45mins	0	100.0%	100.0% (88.0%	91.0%	Ø 100.0	%	
Post-Analytical									
test volumes CY2023	COVID-19 (only)	_	7	5	1	8	1	0 19	•
	% pos covid only		16.7%	13.7%	8.9%	7.1%	18.1	% 18.8%	ó
	FLUVID/RSV		176	116	89	78	11	9 11:	L
	% pos FLU A		13.10%	9.90%	5.40%	8.20%	0.00	% 1.50%	6
	%pos FLU B		10.60%	9.90%	3.60%	1.20%	0.00	% 0.00%	6
	%pos RSV		9.10%	9.20%	3.60%	1.20%	0.00	% 0.00%	6
	RVP		15	7	7	6	1	4 13	3
	Total resp per month		198	131	112	85	13	8 133	3
Blood Utilization	# units issued/returned	NA	NA	8.	0 return	B. 3 return	4, no retu	rn 5, 1 waste	d 2. 0 returi
	Product Issued	NA	NA			5pRBC	4 pRBC	3 pRBC	2pRBC
		NA	NA	- '		2 FFP		2 PLT	
	return	NA	NA			BpRBC		O 1 PLT	



Each department has identified 2024 quality indicators to monitor and improve on.

Urgent care: Volume



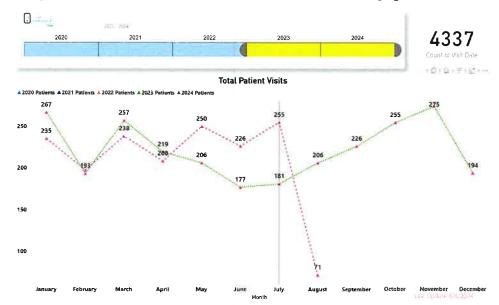




Each department has identified 2024 quality indicators to monitor and improve on.

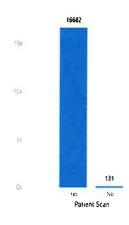
Infusion/Chemotherapy

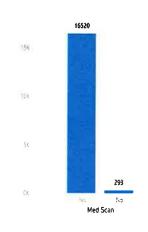
- Monitoring volume as strengthening program.
- New Oncologist coming to EPH.
 - May initiate some chemotherapy at EPH.

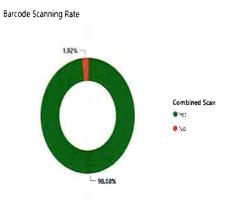


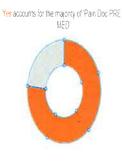


Medical/Surgical







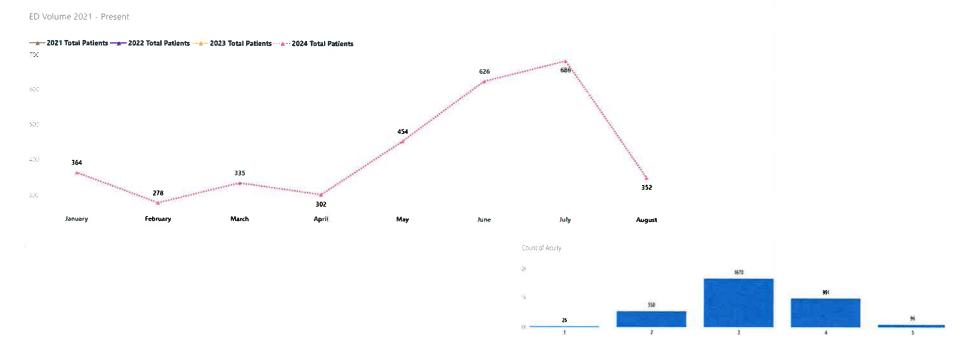


Row Labels	Count of Pain Doc PRE MED
Yes	23
No	7
blank	
Grand Total	30



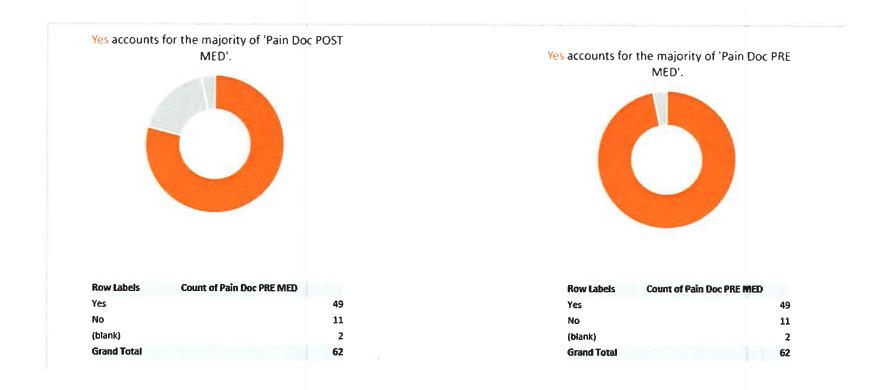
Bow Labets	Count of Pain Doc PRE MED
Yes	22
No	8
(blank)	
Grand Total	30

Emergency Department (as of 8/12/24)

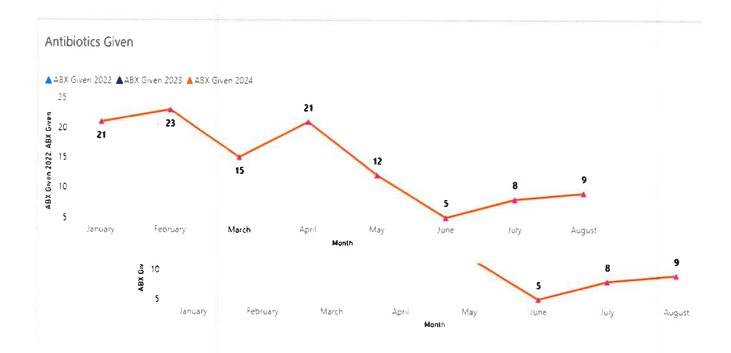




Emergency Department (as of 8/12/24)



Perioperative services





PATIENT EXPERIENCE Medical-Surgical

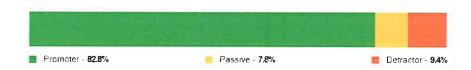
1. MedSurg

	Improvement Planning	Bench	marks	Calendar Year		_EPH MED S	URG UNIT
Overall		NRC 50th Percentile*	MRC 76th Percentile	Current YTD	Qtr 3 2034‡	Qtr 2 2024‡	Qtr 1 2024
Using any number from 0 to 10 where 0 is the worst hospital possible and 10 is the best hospital possible what number would you use to rate this hospital during your stay?	E. 7	73.2%	79 4%	75.0%▼ PR-57	100 0%7	71.4%	99.2%F
Key Drivers		NRC 50th Percentile*	NRC 75th Percentile	Current YTD	Ga 3 5054 \$	Obr 2 2024‡	Qtr 1 2024
ਲੇ Patient Safety		69 5%	77 2%	77.1% PR=74	100.0%	64 3%7	76.9%+
Patient Safety		67 8%	74.4%	77.1%1 PR=82	100.0% •	64 3%♡	76.9%*
Respect for Patient Preferences		82 6%	86 0%	83 5% * PR=36	100 0%	82.1%∇	88.5%+
Focus		NRC 50th Percentile*	NRC 75th Percentile	Current YTD	Qtr 3 2024‡	Qtr 2 2024\$	Qtr 1 2024
Would Recommend Hospital		72 9%	80 1%	79.2%¥ PR=71	75 0%¥	100,0% *	69.2%7
10 Information and Education		69 2%	74.5%	61 1%▽ PR=9	100 0% *	47 6%▽	56.4%♡
Continuity and Transition		86 5%	89.2%	94.4% * PR=95	87.5%	100.0%	95.0%+
Patient Safety		69 5%	77.2%	77.1%1 PR=74	100.0%	64.3%♡	76.9%*
Respect for Patient Preferences		82 0%	85 6%	88.5% * PR=88	100 0% 7	82.1%7	88.5%*
Physical Comfort		67 0%	73.3%	64.5%** PR=39	87.5%	64.3%0	58.9%▽
Information and Education		70 2%	75 T%	61 1% ¹⁷ PR+6	100 0%	47.6%0	56.4%♡
Continuity and Transition		87 5%	89 9%	94.4%* PR=94	87.5%	100.0%	95.0%
Physical Comfort		67 1%	73 5%	64.5%♥ PR=39	87.5%	64.3%♡	\$5.9%
Patient Safety		67.8%	74.4%	77.1% * PR=82	100.0%	64.3%♡	76.9%7
Respect for Palient Preferences		82 6%	86 0%	88 5% * PR+86	100.0%	82 1%7	88.5%7

PATIENT EXPERIENCE-EMERGENCY DEPARTMENT

2. ED - Last 12 Months





QUESTION SUMMARY

Question	YTD	Last 3 Months		n-size	Score	Bench mark	Gap
Family involved in visit	88.5	89 7	87.6	115	89.6	75_6	14.0
Care providers listened	78.4	60 6	78.9	136	79 4	84 7	-5.3
Trust providers w/ care	79 8	81 7	79.9	135	79 3	82 3	40.0
Care providers explain things	78 6	79 2	79.6	136	78.7	80.7	-2.0
Spent enough time with patient	77.2	78.0	78.3	136	78.7	74.5	4.2
Providers eased discomfort	75.4	78 2	75.2	127	77.2	67 2	10.0
Seen in timely manner	76.2	79 0	81 0	139	77 0	72 3	4.7
Received consistent info	77 2	79 9	79 5	134	76.1	65.6	10.5
Care provider explain-if not better	723	72 7	74 5	133	73 7	65 2	8 5
NPS: Facility would recommend	71 8	74 5	68.5	128	73 4	79 2	-5.8



PATIENT EXPERIENCE Peri-operative Services

3. OR - Last 12 Months

NET PROMOTER SCORE

93.2 n-size 161



QUESTION SUMMARY

Question	Υπο	Last 3 Months		n-size	Score	Bench mark	Gap
Trust providers w/ care	947	93 8	90 5	166	94.6	82 3	12.0
NPS: Facility would recommend	94.5	97 9	100 0	161	93,2	79 2	14 0
Care providers listened	90 4	93 8	90 5	167	92 2	64 7	7.5
Received consistent info	92 0	91 7	90 5	164	92.1	65.6	26 5
Family involved in visit	91.6	93.2	95.0	153	91.5	75.6	15.9
Got help as soon as wanted	93.8	92 9	94.7	141	91.5	73.7	17.8
Was told when could leave	90 2	95 8	95 2	163	90 2	83 0	7 2
Care providers explain things	86 2	91 8	86.4	168	88 7	80 7	8 0
Procedure began on time	63.8	73 5	72.7	168	63.7	64 7	1.0

4. UC - Last 12 Months



PATIENT EXPERIENCE Urgent Care

4. UC - Last 12 Months

NET PROMOTER SCORE

81.9 n-size: 1,662



QUESTION SUMMARY

uestion	YTD	Last 3 Months		n-size	Score	Bench mark	Gap
Care providers listened	87 1	87 2	86.0	1,737	87.0	84,7	2 3
Trust providers w/ care	86.3	86.6	86.3	1.728	85.7	82.3	3.4
Care providers explain things	83 6	83 5	81.9	1.750	84 6	80 7	3 9
Received right treatment	82 1	63 2	82.6	1,713	83.0	70.4	126
NPS: Facility would recommend	60 4	82 4	80 4	1,662	81 9	79 2	2 7
Providers eased discomfort	82 8	84 6	63.5	1,578	819	67 2	14.7
Care provider explain-if not better	77 4	77 5	742	1,702	76 3	65 2	11,1
Seen in timely manner	66.8	66 7	65.6	1.772	68 2	72.3	-4.1

WORKPLACE VIOLENCE

- De-escalation training of 5 staff members
 - DART
 - Developing 60-minute class with hands on training for staff.
- Partnering with state to work through current legislation.

SOCIAL WORK DEVELOPMENT

- Continue to work with EPH Physicians Clinic and Emergency Room Physicians to identify patients/families with psychosocial issues that need additional support/assistance.
- Partnering with community agencies to help at risk residents with social determinants of health and end of life care. (Crossroads, Harmony Foundation, Salud).



Developing People Resources...

- Leadership development
 - Continuation of two cohorts with regular classes/touch base.
 - Individual coaching.
- Recruitment and Retention Team
 - Identifying new and creative ways to recruit and retain.
 - Stay interviews, social media, etc.
 - Including recognition as a component of team.
- Partnering nursing leaders with state organizations to participate in Nursing 2030.

Fiscal Health...

- Contract staff, continue to manage to budget or better than budget.
 - Hired EPH Infection Prevention Nurse (an ex-traveler)
- 340-B program fully implemented.
 - All unit dose medication in all environments.
 - Include Urgent Care, Emergency Department, Physicians Clinic and Infusion/Chemotherapy.
 - Program fully implemented with certified staff to support.
- Continue to manage expenses with fluctuating volume.
- Leaders utilizing new soft ware for monthly budget management.



QUESTIONS?







MEMORANDUM

To:

Estes Park Health Board of

Directors

Date:

August 27, 2024

From:

Mark L. Sabey, Legal Counsel for

Estes Park Health

Subject:

Assessment of Estes Park Health

Board of Directors Executive Session Compliance with Colorado Open Meetings Law

I have received a request from the Estes Park Health Board of Directors ("Board") to assess the compliance of their Executive Session procedures with Colorado Open Meetings Law, C.R.S. § 24-6-402 ("COML").

The Executive Session portion of COML is an attempt to balance the need for transparency with the need for confidentiality regarding particularly sensitive matters that should not be addressed publicly. COML is revised from time to time, and over the past several years, I have received many requests from the Board to provide counsel about changes to COML or to address whether specific topics should be handled publicly or in executive session under the COML exceptions. The message from the Board has always been that it wants to fully comply with COML as an important part of maintaining public trust.

I have reviewed samples of the public agendas used by the Estes Park Health Board of Directors to enter into Executive Sessions, and the procedures used by the Estes Park Health Board of Directors comply with the requirements of the COML articulated in C.R.S. 24-6-402.

In response to two specific questions from the Estes Park Health Board of Directors:

1. COML requires disclosure beyond citation to the statutory exception (for example: "determining positions relative to matters that may be subject to negotiations; developing strategy for negotiations; and instructing negotiators") in as much detail as possible without compromising the purpose for which the executive session is authorized. In my experience, it requires careful judgment to specifically identify the subject matter without defeating the purpose of the executive session.

In my opinion, announcements by the Estes Park Health Board of Directors (see next paragraph), including specific citation of the statutory subsection authorizing them to meet in Executive Session followed by a more specific description of the subject matter, satisfy this requirement.

Example: "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 instructing negotiators, with regard to

Memo to Estes Park Health Board of Directors August 28, 2024 Page 2

Affiliation with a 3rd Party, EPH Strategic Initiatives, EPH Quality Initiatives, and the relationship with the EPH Foundation."

2. COML does not require disclosure of third-party visitors such as attorney or representatives of other organizations attending the executive session. Such disclosures would often defeat the purpose for which an executive session is authorized. For example, in dealing with employee discipline matters, a statement "the board will be considering discharge of CEO Jim Jones" would be detrimental for the CEO and would defeat the purpose for which executive session is authorized. Also, in negotiating affiliation with a third party, standard practice is to have a non-disclosure agreement prior to the signing of a letter of intent. If the representatives of the potentially affiliating entity had to be identified, it would violate the non-disclosure agreement and would defeat the purpose for which executive session is authorized. The examples could be multiplied.