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| <b>Meeting Title:</b> | Board of Trustees Meeting | <b>Chairperson:</b> | Jill Diane Edgett      |
| <b>Date/Time:</b>     | September 20, 2023        | <b>Location:</b>    | Norton County Hospital |

**Norton County Hospital  
Board of Trustees Meeting Minutes**

| <b>Attended</b>   | <b>Position</b>                          |
|-------------------|--|
| Jill Diane Edgett | Board President                          |
| James Moreau      | Board Member                             |
| Ron Fisher        | Board Vice President                     |
| Randa Vollertsen  | Board Member                             |
| Lee Juenemann     | Board Member                             |
| Jimmy Todd        | Board Member                             |
| Garrett Beydler   | Norton County Commissioner               |
| John McClymont    | Attorney                                 |
| Frankie Forbes    | Attorney (via Zoom)                      |
| Kellen Jacobs     | NCH Chief Executive Officer-Interim      |
| ReChelle Horinek  | NCH Chief Financial Officer              |
| Melody DeWitt     | NCH Clinic Manager/Risk Management       |
| Shannan Hempler   | NCH Director of Human Resources          |
| Mackenzie Blecha  | NCH HR Assistant/Marketing               |
| Klare Bliss       | NCH Chief Information Officer (via Zoom) |
| Melody DeWitt     | NMC Manager/NCH Risk Management          |
| Whitney Criqui    | NCH HIM Manager                          |

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|    | <b>Agenda Item</b>  | <b>Action and/or Time</b>   |
|----|---|---|
| 1. | <b>August 16, 2023 Board Meeting Minutes</b>  | Motion by <b>Jill Diane Edgett</b> to approve the amended minutes of the August 16, 2023 meeting. Second by <b>Randa Vollertsen</b> . Motion carries unanimously. |
| 2. | <b>Consent Agenda Items:</b><br>a) Personnel Information<br>b) Patient Satisfaction Survey Summary<br>c) Accounts Payable – Bills   | Motion by <b>Ron Fisher</b> to approve the Consent Agenda Items as presented. Second by <b>Jimmy Todd</b> . Motion carries unanimously.                           |
| 3. | <b>Medical Staff Credentialing Applications</b><br>None needed.   |   |
| 4. | <b>Signature Card Update</b><br>Board members updated the signature card for the banks. Jenny was not present tonight – Mackenzie will have her sign as soon as possible.   |   |
| 5. | <b>Corporate Compliance &amp; HIPAA Review</b><br>Whitney Criqui, Health Information Manager, passed the Confidentiality and Compliance Statements and Acknowledgments to Board members and reviewed the information. Whitney also discussed the HIPAA Review. Chief Information Officer, Klare Bliss, manages the technology side of HIPAA to make sure everything is secure along with Turner Tech. She runs monthly audits to make sure patient information stays within HIPAA. Health Information Management and Klare preach to employees to use common sense about accessing charts.<br>Employees sign these documents at their time of hire and then annually. They review these policies and procedures and sign off on The Beat at this time.<br>Present Board members signed.<br>Melody DeWitt, Risk Management, will have a group to bring policy/procedure changes annually in May. |   |

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| 6. | <p><b>CIO Report</b></p> <p>Klare Bliss, Chief Information Officer, gave the CIO Report for the month of August and emailed information to board members before the meeting.</p> <ul style="list-style-type: none"> <li>• The Cerner Blackout period is not allowing changes to contracts. They are currently changing the company name from Cerner to Oracle Health. This period should not affect us. If a new agreement were to come up, it would be delayed 4-6 weeks.</li> <li>• New link is set up internally and externally for users for more security and protection. Can set up users with VPN process.</li> <li>• Currently at Cerner conference in Vegas – great conversations and networking, the biggest takeaway is that NCH could be collaborating better and there is a lot of work to be done</li> <li>• 340B – should be seeing financial impact soon; MacroHelix, Turner Tech, and Cerner all working together</li> <li>• Learning Health Network – pulling data from patients and giving opportunity to join trial that patients would not need to travel for; can then utilize data as possible opportunities at NCH</li> <li>• Legacy System – the business office is finishing up account transfers; users will be set up and a final copy into the legacy system; train and unleash them into the Capstone legacy system; med staff will use the most in the next year and then HIM will use the most afterward</li> <li>• AMD Agnes, which was previously purchased, will be compatible with Eagle Telemedicine Group; need to upgrade the license and a few pieces of equipment</li> <li>• Vytalize for chronic care clinic/Medicare patients – Dr. Dakota Dreher and Klare are working on training; Vytalize has the patient roster and access to the EHR system; provide kickback incentives to see patients to keep them healthy rather than only seeing sick patients</li> <li>• Collaborating with the Health Department for the Health Fair to enroll patients into the portal for access to lab results and will ease the workload on HIM and Lab</li> <li>• Will be utilizing Cerner Dashboards for progress</li> </ul> |  |
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| 7. | <p><b>Ni2 Update</b><br/> ReChelle Horinek, Chief Financial Officer, reported for Jason Adams from Ni2 and answered questions regarding Ni2 services.</p> <ul style="list-style-type: none"> <li>• Charge optimization – contract was signed in 2021; Ni2 looks at charge master, checks that coding is correct, correcting revenue codes, and any need to change pricing; \$3125 a month to manage; Ni2 receives 35% of any optimization increases; this contract is up for renewal – the initial conversation was that this would not be renewed back in August when ReChelle was hired; she held off on signing/dropping this until she can speak to auditors when they are on-site first week of October; instead of using Ni2 this can be reviewed by the facility’s auditors or another company - most hospitals do this every 3-5 years; building a new charge code can take up to two weeks with Ni2 and most of the time we end up doing this ourselves; can save \$10K a month by not renewing</li> <li>• Ni2 does all insurance billing – paid on percentage of amount collected (2.5% of cash receipts); this is the largest invoice per month from Ni2; there is not enough staff or expertise to have this done in-house</li> <li>• Charge master and insurance billing are separate contracts</li> <li>• Cash trend back up – bank account shows \$1.1 million for August</li> <li>• A/R Trending for Legacy and Cerner doing as it should: legacy decreasing/Cerner increasing; Ni2 is doing a good clean-up in legacy system</li> </ul> |  |
| 8. | <p><b>CFO Report of Statistical/Financial Information</b><br/> ReChelle Horinek, CFO, presented the statistical and financial information for the month of August 2023 and answered questions from last month’s board meeting.</p> <p><u>Income statement</u><br/> Gross patient revenue for August was \$2,413,261, above budgeted gross revenue by \$161,102. Inpatient and Outpatient revenue both exceeded budgeted amounts for the month. Contractual adjustments are consistent with percentages of gross revenue and includes accrual. Operating expenses for August were \$1,517,537, over budget by \$127,175. Professional fees</p>  |  |

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continue to be high because of Locum ER providers, lab and nursing temp staffing.

Net Profit from Operations for the month is \$17,550. Other non-operating revenue in August totaled \$26,601. Net Profit for August 2023 is \$44,151. Not a significant profit, but does help with our YTD loss of (\$194,971).

Balance sheet

I'm unable to do year end close of accounts in Multiview and keep the year in an "open" status to start balancing activities for year-end audit. Previous system had an additional 14th GL period that would allow me to do a soft close. What this means is that the Balance Sheet amounts won't update correctly for the new year. Multiview is working on this now so hopefully I'll have a Balance Sheet by the August month end.

Cash balance at month end was \$294,384 and is around \$305K today 9/15/23. We did cash out the CD at Equity Bank for \$312,391.65. Which reduced our investments to just over \$500K. Cash collections were up over one million in August which puts us back to pre-conversion totals.

Statistics

August 2023 statistics were better than July. While inpatient numbers aren't back to what they were one year ago, we made improvements in August. Most outpatient departments show an increase in statistics YTD from 2023. Increased patient days will continue to help the bottom line.

Other Information

Interim Cost Report: FORVIS completed our interim cost report ending 3/31/23. We showed a receivable in both inpatient and swing bed, while outpatient percentage stayed constant. At the end of quarter 3, Medicare owes us just over \$300K. We asked for an interim settlement, but as expected, Medicare will not do so. In the meantime, we have asked for our daily per diem rates for inpatient and swing bed to increase to \$3,000 and \$2,800 per day respectively. Typically these rates wouldn't change until filing the cost report.

FORVIS will be on site October 2-6 to conduct the annual financial audit. The 2023 Medicare cost report is due November 30, 2024.

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Collections Totals: The amount reported on the Financial Affairs of Non-elected Personnel report is the total sent to collections for the month. The total of receipts on collection accounts is not reflected in this total. Bad debt recovery is included in the total of provision for uncollectible accounts on the P & L under Deductions from Revenue. I have included the recovery dollars on the FA report and will continue to do so going forward.

Ni2 Charge Optimization: We contract with Ni2 to keep our charge master compliant with coding as well as update pricing as reimbursement and cost changes. They do this constantly and make changes as needed throughout the month. The charge optimization report shows what we have gained in receipts based on charge improvements made by Ni2. We then share a percentage of that gain with them monthly.

Accounts Receivable: As with any conversion, we expected accounts receivable to increase for a period of time before leveling off. There was a problem with the monthly historical batch that was to pull to Cerner from Centriq at the end of each month automatically. This was causing AR to increase significantly on our Balance Sheet, since we are still posting cash amounts into claims on the Centriq accounts and these payments weren't reflecting on AR. I am now posting a manual batch to reflect payments into Centriq. AR at August 31 is \$5,549,844. One year ago, the AR total was \$4,763,922. While this is an increase, I'm confident that as we get more of the billing issues worked out in Cerner we will continue to get AR back to pre-conversion numbers. As reported above, our monthly cash collections have reached totals equal to those before the conversion.

Cerner Billing & Collecting Procedure Updates:

I know at the July meeting, Cerner reporting shows the Patient Accounting in a "caution" status based on accounts that are sitting in the claims scrubber. Below are changes we've made to improve the billing systems at NCH:

- Ni2 does not use the claim scrubber "work bucket" in the Cerner system. They have their own system they use along with the SSI scrubbing software to work claims. The claim bucket in Cerner will continue to be a revolving number and as claims are paid and new claims drop this number will fluctuate. Both Ni2 and I have no

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|     | <p>concern with this work bucket, as claims are being worked on daily in the Ni2 system.</p> <ul style="list-style-type: none"> <li>Utilization Review has a weekly call with Ni2 to work through claim denials. This process allows us to target accounts that may have been slated for write-off for appeal and ultimately insurance payment. Items such as prior authorization, coding, and charge changes can be updated so the denials can be resubmitted.</li> <li>The Billing Office has a weekly call with Ni2 to work through items in the claim scrubber for corrections. Items such as incorrect insurance, registration errors, and charge and coding errors can be fixed so the claims drop correctly for payment to insurance companies.</li> <li>Ni2 uses a "smart sheet" form that is protected to relay account errors back to NCH. Registration staff in both the hospital and clinic have been given access to make corrections to patient accounts based on scrubbing errors. This improves employee knowledge of the errors to prevent the same mistakes from being made in the future.</li> <li>The online bill pay link is still not working. We have a service request with Cerner and are actively working through this to get it corrected.</li> <li>Centriq accounts are being converted to Cerner accounts at this time. This is a large project that is being worked on by the billing office staff. Once completed, all statements will originate from NCH. We are no longer using Millennia for self-pay collections. This will save NCH \$10,000 per month on average in expenses.</li> </ul> |   |
| 9.  | <p><b>Financial Affairs of Non-Elected Personnel</b><br/> Financial Assistance YTD: \$49,174.88<br/> Bankruptcy YTD: \$ --</p>  | <p>Motion by <b>Ron Fisher</b> to send an amount not to <b>exceed \$41,362.01</b> for attempted collections. Second by <b>James Moreau</b>. Motion carries unanimously.</p> |
| 10. | <p><b>Provider Report</b><br/> There was no report provided.</p>  |   |

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| 11. | <p><b>Medical Clinic Update</b><br/>Melody DeWitt, Medical Clinic Manager, gave the Clinic update and provided reports for the month of August.</p> <ul style="list-style-type: none"> <li>• Providers have collaborated and covered shifts for October. ER Coverage will only need three shifts to be covered by Docs Who Care.</li> <li>• Mel spoke with Vicky Gibbs from Phillips County. They have twelve APPs that have been through school and there are a couple interested in working part-time or PRN for ER Coverage</li> <li>• Dr. Dreher is still doing 8-9am walk-ins for 18 and older patients. No complaints about patients not being seen when they want to be – the providers and staff make it work.</li> <li>• Clinic is trying to cut down on overtime now that Mel is trained in multiple areas.</li> <li>• ReChelle is going to train Mel on the financial side of the clinic.</li> <li>• Physical Therapy will be joining the clinic for Retainworks.</li> </ul> |  |
| 12. | <p><b>CEO Report</b><br/>Kellen Jacobs, Interim Chief Executive Officer, presented the CEO report from the last month.</p> <ul style="list-style-type: none"> <li>• Prior Auth meetings</li> <li>• UR meetings</li> <li>• Childcare aware meeting at NCF, Many organizations collaborating to find solutions to childcare struggles. Caryl Hale and foundation is also involved.</li> <li>• Upstairs apartment renovation is done. Thank you Jeff, Ty and Dan.</li> <li>• Meetings with pain management specialties, at this time HPM is recruiting some CRNAs and it will take some time to train them more to come for later '24.</li> <li>• Meeting with Plains Radiology on efficiencies and prior auth process</li> <li>• Nursing meeting. Good collaboration and working through processes</li> <li>• CNA graduation, thank you Heather Cave for teaching, Brenda for the cake, and all others who attended. Really nice feedback from members.</li> </ul>                        |  |



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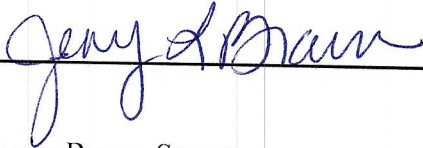
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|            | <ul style="list-style-type: none"> <li>• Collaboration with health department on Flu shot clinic, coming up in October.</li> <li>• Continued correspondence with CEO candidates and meetings set up</li> <li>• Lab meetings and lab directorship changes, much more to come.</li> <li>• Telemed capabilities for added specialty services Klare working through final tech piece</li> <li>• Vince Vandelaar consulting meeting for community health needs assessment and ability to add hospital strategic plan. Quote for 7400.00 CHNA, 6000.00 strategic plan. (For reference in 2021 NCH used WSU for CHNA totaling \$10,626.00, Strategic plan 2018 was 13,900.00 also through WSU) NRHF did have some involvement with this and did pay some of the cost.</li> <li>• 340B recertification completed</li> <li>• Dietary meeting working on their communication with nursing floor and efficiencies</li> <li>• EVS meeting</li> <li>• Nurses meeting continue working on efficiencies supporting new DON</li> <li>• Radiology walk-through meeting discussed MRI efficiencies and reached out to MRI truck to make things work more smoothly for patients.</li> <li>• Also will be bringing onsite a demo for 3D mammo as this is really current best practice.</li> <li>• Working through contracts for Gino and Melissa Matthews.</li> <li>• Meeting with Dallas Gosselin Norton City/County Econ development</li> <li>• Retainworks meeting/training</li> <li>• Upcoming meeting with Valley Hope</li> </ul> |  |
| <b>13.</b> | <p>Commissioner Report<br/>There was no commissioner report.</p>   |  |
| <b>14.</b> | <p>Board Member Reports<br/>Norton Regional Health Foundation meeting will be held this coming Monday at noon.</p>   |  |

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| 15. | <p><b>Other Business</b></p> <ul style="list-style-type: none"> <li>• Mackenzie Blecha, Public Relations/Human Resources, will be attending the JAGS class at Norton Community High School to show students the variety of career paths we employ.</li> <li>• NCH footballs will be thrown out at this Friday's football game.</li> <li>• Norton Regional Health Foundation Executive Director, Caryl Hale and Mackenzie attended the 2023 KHA Convention in Wichita.</li> </ul> |  |
| 16. | <p><b>Executive Session: Risk Management</b></p>   | <p><b>Jill Diane Edgett</b> moved to enter into executive session: K.S.A. 75-4319(b)(5) for discussion of personnel matters of non-elected personnel with the Board, Interim CEO and HR Director in attendance not to exceed 30 minutes. Seconded by <b>Ron Fisher</b>. Motion passed. Executive session begins at <b>8:27 p.m.</b> Exit at <b>8:37 p.m.</b></p> |
| 17. | <p><b>Executive Session: Non-Elected Personnel</b></p>   | <p><b>Jill Diane Edgett</b> moved to enter into executive session: K.S.A. 75-4319(b)(1) for discussion of personnel matters of non-elected personnel with the Board, Interim CEO and HR Director in attendance not to exceed 30 minutes. Seconded by <b>Ron Fisher</b>. Motion passed. Executive session begins at <b>8:39 p.m.</b> Exit at <b>9:09 p.m.</b></p> |
| 18. | <p><b>Board Action from executive session</b></p>  | <p><b>Jimmy Todd</b> moved to authorize Interim Chief Executive Officer, Kellen Jacobs, to offer contract to Melissa Mathews, Nurse Practitioner, when</p>   |

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|     |         | received from our legal counsel. Seconded by <b>Lee Juenemann</b> . Motion passed. |
| 19. | Adjourn | Meeting adjourned at <b>p.m.</b>   |



Jenny Braun, Secretary