



AGENDA

Board of Directors Meeting

6:00 PM - Wednesday, April 27, 2022

[Click link to join Zoom meeting](#)

Meeting ID: 878 0782 1015 Pwd: 931197

Phone Line: 669-900-9128 or 301-715-8592

Kelly Cooper, President		Keriann Baker		Aaron Weisser	
Melissa Jacobsen, Vice Pres.		M. Todd Boling, DO		Bernadette Wilson	
Julie Woodworth, Secretary		Matthew Hambrick		Beth Wythe	
Walter Partridge, Treasurer		Edson Knapp, MD		Ryan Smith, CEO	

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1. CALL TO ORDER

2. ROLL CALL

3. REFLECT ON LIVING OUR VALUES

4. WELCOME GUESTS & PUBLIC / INTRODUCTIONS / ANNOUNCEMENTS

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- 4.1. Rules for Participating in a Public Meeting
[Rules for Participating in a Public Meeting](#)

5. COMMENTS FROM THE AUDIENCE ON ITEMS OF ANY MATTER

6. APPROVAL OF THE AGENDA

7. APPROVAL OF THE CONSENT CALENDAR

- 5 - 10
- 7.1. Consideration to Approve the South Peninsula Hospital (SPH) Board of Directors meeting minutes for March 23, 2022
[Board of Directors - Mar 23 2022 - Minutes, draft](#)

- 11 - 14 7.2. Consideration to Approve March 2022 Financials
 [Balance Sheet March FY22](#)
 [Income Statement March FY22](#)
 [Cash Flows Statement March FY22](#)
- 15 7.3. Consideration to Approve SPH Board Resolution 2022-07, A Resolution of the South Peninsula Hospital Board of Directors Authorizing the CFO to Sign, File and Submit the IRS Form 990
 [SPH Resolution 2022-07](#)

8. PRESENTATIONS

9. UNFINISHED BUSINESS

10. NEW BUSINESS

- 16 - 17 10.1. Consideration to Approve SPH Board Resolution 2022-08, A Resolution of the South Peninsula Hospital Board of Directors Approving the Request of Unobligated Service Area Funds to Support Replacement of Domestic Water Tank
 [SPH Resolution 2022-08](#)

11. REPORTS

- 18 - 21 11.1. Chief Executive Officer
 Presenter: Ryan Smith
 [Balanced Scorecard - 1st Quarter 2022](#)
- 11.2. BOD Committee: Finance
 Presenter: Walter Partridge
- 22 - 24 11.3. BOD Committee: Education
 Presenter: Melissa Jacobsen
 [iProtean Subscription Agreement](#)
- 25 - 26 11.4. BOD Committee: CEO Evaluation
 Presenter: Keriann Baker
 [CEO Performance Evaluation Timeline - revised](#)
- 11.5. Service Area Board Representative
 Presenter: Amber Cabana

12. DISCUSSION

12.1. Board of Directors Work Session

13. COMMENTS FROM THE AUDIENCE ON ITEMS OF ANY MATTER

14. COMMENTS FROM THE BOARD

(Announcements/Congratulations)

14.1. Chief Executive Officer

14.2. Board Members

15. INFORMATIONAL ITEMS

16. ADJOURN TO EXECUTIVE SESSION (IF NEEDED)

17. ANNOUNCEMENTS AS A RESULT OF EXECUTIVE SESSION

17.1. Credentialing

18. ADJOURNMENT

To: Public Participants
From: Operating Board of Directors – South Peninsula Hospital
Re: Rules for Participating in a Public Meeting

The following has been adapted from the “Rules for Participating in a Public Meeting” used by Kenai Peninsula SAB of SPHI.

Each member of the public desiring to speak on any issue before the SPH Operating Board of Directors at tonight’s meeting will be given an opportunity to speak to the following guidelines:

- *Those who wish to speak will need to sign in on the sign in sheet being circulated. When the chair recognizes you to speak, you need to clearly give your name and the subject you wish to address.*
- *Please be concise and courteous, in time, so others present will have an opportunity to speak.*
- *Please observe normal rules of decorum and avoid disparaging by name the reputation or character of any member of the Operating Board of directors, the administration or personnel of SPHI, or the public. You cannot mention or use names of individuals.*
- *The Operating Board Directors may ask you to respond to their questions following your comments. You could be asked to give further testimony in “Executive Session” if your comments are directly related to a member of personnel, or management of SPHI, or dealing with specific financial matters, either of which could be damaging to the character of an individual or the financial health of SPHI, however, you are under no obligation to answer any question put to you by the Operating Board Directors.*
- *This is your opportunity to provide your support or opposition to matters that are within the areas of Operating Board of Directors governance. If you have questions, you may direct them to the chair.*

These rules for participating in a public meeting were discussed and approved at the Board Governance Committee meeting on February 24, 2013.

MINUTES

Board of Directors Meeting

6:00 PM - Wednesday, March 23, 2022

Conference Rooms 1 & 2/Zoom

The Board of Directors of the South Peninsula Hospital was called to order on Wednesday, March 23, 2022, at 6:00 PM, in SPH conference rooms 1 & 2 and via Zoom.

1. CALL TO ORDER

The BOD went into Executive Session at 5:00pm to discuss personnel and financial matters prior to the start of the regular meeting. Executive Session was adjourned at 5:55pm.

President Kelly Cooper called the regular meeting to order at 6:00 p.m.

2. ROLL CALL

BOARD PRESENT: President Kelly Cooper, Keriann Baker, Todd Boling, Matthew Hambrick, Vice President Melissa Jacobsen, Edson Knapp, Treasurer Walter Partridge, Aaron Weisser, Secretary Julie Woodworth, Beth Wythe, and CEO Ryan Smith. Bernadette Wilson was present for part of the meeting.

BOARD EXCUSED:

ALSO PRESENT: Angela Hinnegan, CFO; Derotha Ferraro, Marketing/PR Director; Maura Jones, Executive Assistant
**Due to the Zoom meeting format, only meeting participants who comment, give report or give presentations are noted in the minutes. Others may be present on the virtual meeting.*

2.1. A quorum was present.

3. REFLECT ON LIVING OUR VALUES

Derotha Ferraro, Marketing Director, shared a letter to the editor in the Homer News from a community member, thanking South Peninsula Hospital and the Home Health department in particular for their compassionate care at a family member's end of life. She also spoke about a recent leadership training, where five new managers were welcomed and there was a lot of open dialogue about our values as leaders.

4. WELCOME GUESTS & PUBLIC / INTRODUCTIONS / ANNOUNCEMENTS

4.1. Rules for Participating in a Public Meeting

The rules were included in the packet.

5. COMMENTS FROM THE AUDIENCE ON ITEMS OF ANY MATTER

There were no public comments.

6. APPROVAL OF THE AGENDA

Julie Woodworth made a motion to approve the agenda. Melissa Jacobsen seconded the motion. Motion Carried.

7. APPROVAL OF THE CONSENT CALENDAR

Ms. Woodworth read the consent calendar into the minutes.

7.1. Consideration to Approve the South Peninsula Hospital (SPH) Board of Directors meeting minutes for February 23, 2022.

7.2. Consideration to Approve the February FY22 Financials

Julie Woodworth made a motion to approve the consent calendar as read. Keriann Baker seconded the motion. Motion Carried.

8. PRESENTATIONS

There were no scheduled presentations.

9. UNFINISHED BUSINESS

There was no unfinished business to discuss.

10. NEW BUSINESS

10.1. Consideration to Approve SPH Board Resolution 2022-04, A Resolution of the South Peninsula Hospital Board of Directors Approving the Request of Unobligated Service Area Funds to Replace its Pulmonary Function Diagnostic Equipment in FY22

Staff Report by Angela Hinnegan, CFO. The pulmonary function diagnostic equipment was included in the FY23 capital budget, however we have now learned the machine cannot be maintained past May, and there is a 90 timeframe for purchase. We brought this request to the Service Area Board (SAB) last week and they approved, pending the Operating Board approval.

Discussion: Mr. Partridge noted the Finance Committee reviewed and approved this resolution in their meeting last week. Ms. Baker thanked the SAB for their support.

Walter Partridge made a motion to approve SPH Board Resolution 2022-04, A Resolution of the South Peninsula Hospital Board of Directors Approving the Request of Unobligated Service Area Funds to Replace its Pulmonary Function Diagnostic Equipment in FY22. Edson Knapp seconded the motion. Motion Carried.

There was a roll call vote:

<i>Melissa Jacobsen</i>	<i>Yes</i>
<i>Julie Woodworth</i>	<i>Yes</i>
<i>Walter Partridge</i>	<i>Yes</i>
<i>Keriann Baker</i>	<i>Yes</i>

Todd Boling	Yes
Matthew Hambrick	Yes
Edson Knapp	Yes
Aaron Weisser	Yes
Bernadette Wilson	Yes
Beth Wythe	Yes
Kelly Cooper	Yes

10.2. Consideration to Approve SPH Board Resolution 2022-05, A Resolution of the South Peninsula Hospital Board of Directors Approving the Request of Unobligated Service Area Funds to Support Phase 1, Security Project Expenditures

Staff Report by Angela Hinnegan. This is an effort to be more fiscally responsible. We have excess unobligated funds available, and this is a project we were planning to do with operating funds, but we have decided to request the unobligated service area funds. This resolution also went to the Service Area Board at their meeting last week.

Discussion: Mr. Partridge added that the Finance Committee reviewed and approved this resolution at their meeting last week. Mr. Weisser asked if there were additional phases to the security project. Ms. Hinnegan informed him there are - the project was broken into pieces and each piece will be brought to the board.

Vice President Melissa Jacobsen made a motion to approve SPH Board Resolution 2022-05, A Resolution of the South Peninsula Hospital Board of Directors Approving the Request of Unobligated Service Area Funds to Support Phase 1, Security Project Expenditures Edson Knapp seconded the motion. Motion Carried.

There was a roll call vote:

Melissa Jacobsen	Yes
Julie Woodworth	Yes
Walter Partridge	Yes
Keriann Baker	Yes
Todd Boling	Yes
Matthew Hambrick	Yes
Edson Knapp	Yes
Aaron Weisser	Yes
Bernadette Wilson	Excused
Beth Wythe	Yes
Kelly Cooper	Yes

10.3. Consideration to Approve SPH Board Resolution 2022-06, A Resolution Approving the Request of Cash from the Plant/Equipment Replacement and Expansion Fund to Supplement Operating Cash on Hand as of February 28, 2022

Staff Report by Angela Hinnegan. The operating cash dropped to 70 days cash on hand at the end of February, so we are requesting funds from the Plant/Equipment Replacement and Expansion Fund (PREF) in order to bring us back up to 90 days cash on hand. If we are back over 90 days cash by the end of the quarter, those funds would be transferred back to the PREF.

Discussion: Mr. Partridge noted that the Finance Committee reviewed and approved this resolution at the meeting last week. Mr. Weisser asked if there was a cap on the PREF, and there is not.

Vice President Melissa Jacobsen made a motion to approve SPH Board Resolution 2022-06, A Resolution Approving the Request of Cash from the Plant/Equipment Replacement and Expansion Fund to Supplement Operating Cash on Hand as of February 28, 2022 Keriann Baker seconded the motion. Motion Carried.

There was a roll call vote:

<i>Melissa Jacobsen</i>	<i>Yes</i>
<i>Julie Woodworth</i>	<i>Yes</i>
<i>Walter Partridge</i>	<i>Yes</i>
<i>Keriann Baker</i>	<i>Yes</i>
<i>Todd Boling</i>	<i>Yes</i>
<i>Matthew Hambrick</i>	<i>Yes</i>
<i>Edson Knapp</i>	<i>Yes</i>
<i>Aaron Weisser</i>	<i>Yes</i>
<i>Bernadette Wilson</i>	<i>Excused</i>
<i>Beth Wythe</i>	<i>Yes</i>
<i>Kelly Cooper</i>	<i>Yes</i>

11. REPORTS

11.1. Chief Executive Officer

Ryan Smith, CEO, reported. The balanced scorecard was provided in the packet, and is unchanged from last month. He congratulated Joelle Burdick on her new position as OB Director. Jane Nollar has been serving as the interim Acute Care Director and doing an excellent job. We are currently interviewing for the CNO position, and Rachael Kincaid has been doing an great job as the interim. He thanked the Service Area Board for their March meeting and for the budget approval. We've started the process of Master Facility Planning, and will have architects at the facility for a site visit in April.

11.2. BOD Committee: Finance

Walter Partridge reported. The Finance Committee met last week and reviewed the three resolutions on the agenda today. We went through the February finances. The team has a solid plan for the finances, but have not had time to see results. He reminded the board that any board member is welcome to attend the finance committee meetings to hear a deeper dive into the finances.

11.3. BOD Committee: Education

Melissa Jacobsen reported. The committee met on March 15th and had a demonstration from iProtean for a board education software platform. The new version is more streamlined and user-friendly, with new and updated content. Staff will get a quote and we'll bring that to the next meeting. We also talked a little about planning for our retreat. We're looking at dates and potential speakers.

11.4. BOD Committee: Governance

Aaron Weisser reported. The Governance Committee hasn't met yet, however the CEO Evaluation committee has been meeting, and has another meeting planned for next week.

11.5. Service Area Board Representative

Helen Armstrong reported for the Service Area Board. On March 10th, the SAB discussed the three resolutions on the agenda today and passed all three. The board also had a training with the borough, which was helpful and informative. They now have a power point to help train new members. They are also fine tuning the member manual and developing a manual for the chair. Ms. Cooper thanked Ms. Armstrong for organizing the training, as it was helpful for all parties.

12. DISCUSSION

There were no additional discussion items.

13. COMMENTS FROM THE AUDIENCE ON ITEMS OF ANY MATTER

There were no public comments.

14. COMMENTS FROM THE BOARD

(Announcements/Congratulations)

14.1. Chief Executive Officer

Mr. Smith had no additional comments.

14.2. Board Members

Melissa Jacobsen thanked the Service Area Board for all the work they do. She thanked the board for a great meeting. She added that dinner was delicious.

Julie Woodworth and Walter Partridge echoed Ms. Jacobsen's sentiments. Keriann Baker and Matthew Hambrick had nothing to add.

Todd Boling commented it was nice to be in the same room, and to be able to refocus on what we were doing before COVID hit. He is glad to have new surgeons Dr. Nathan Kincaid and Dr. Kurt Mentzer on board. Edson Knapp agreed it was nice to meet in person.

Aaron Weisser mentioned that Lucy Fisher, the new psychiatrist, is "our new superhero for Homer."

Bernadette Wilson had to leave the meeting early.

Kelly Cooper encouraged board members to attend the retreat.

15. INFORMATIONAL ITEMS

There were no informational items.

16. ADJOURN TO EXECUTIVE SESSION (IF NEEDED)

No additional executive session was needed.

17. ANNOUNCEMENTS AS A RESULT OF EXECUTIVE SESSION

17.1. Credentialing

After review of the applicants' files in Executive Session, Ms. Jacobsen moved to approve the following positions in the medical staff as requested and recommended by the Medical Executive Committee:

Appointment

Kevin Kollins, MD; Pediatric Cardiology; Courtesy Staff

Mohammad Hirzallah, MD; Neurology/Telestroke; Telemedicine

Cory Noel, MD; Pediatric Cardiology; Courtesy Staff

Reappointment

John Finley, MD; Cardiology; Courtesy Staff

Seth Krauss, MD; Cardiology; Courtesy Staff

Kim Madden, DO; Neurology/IONM; Courtesy Staff

William Mayer, MD; Cardiology; Courtesy Staff

Suneet Purohit, MD; Cardiology; Courtesy Staff

Helen Zhang, MD; Psychiatry/Telepsych; Telemedicine

18. ADJOURNMENT

The meeting was adjourned at 6:33pm.

Respectfully Submitted,

Accepted:

Maura Jones, Executive Assistant

Kelly Cooper, President

Minutes Approved:

Julie Woodworth, Secretary



DRAFT-UNAUDITED

BALANCE SHEET
As of March 31, 2022

	As of March 31, 2022	As of Mar 31, 2021	As of February 28, 2022	CHANGE FROM Mar 31, 2021
ASSETS				
CURRENT ASSETS:				
1 CASH AND CASH EQUIVALENTS	19,332,369	20,484,591	18,064,194	(1,152,222)
2 EQUITY IN CENTRAL TREASURY	7,533,159	6,280,501	7,763,337	1,252,658
3 TOTAL CASH	26,865,528	26,765,092	25,827,531	100,436
4 PATIENT ACCOUNTS RECEIVABLE	30,906,362	26,174,472	30,924,824	4,731,890
5 LESS: ALLOWANCES & ADJ	(14,402,878)	(13,467,223)	(14,281,276)	(935,655)
6 NET PATIENT ACCT RECEIVABLE	16,503,484	12,707,249	16,643,548	3,796,235
7 PROPERTY TAXES RECV - KPB	158,451	158,553	191,466	(102)
8 LESS: ALLOW PROP TAX - KPB	(3,599)	(3,048)	(3,598)	(551)
9 NET PROPERTY TAX RECV - KPB	154,852	155,505	187,868	(653)
10 OTHER RECEIVABLES - SPH	261,173	293,089	514,813	(31,916)
11 INVENTORIES	1,838,559	1,494,325	1,829,733	344,234
12 NET PENSION ASSET- GASB	9,450,712	4,139,836	9,350,712	5,310,876
13 PREPAID EXPENSES	915,598	842,266	957,940	73,332
14 TOTAL CURRENT ASSETS	55,989,906	46,397,362	55,312,145	9,592,544
ASSETS WHOSE USE IS LIMITED				
15 PREF UNOBLIGATED	10,441,196	8,956,967	10,598,237	1,484,229
16 PREF OBLIGATED	2,312,376	1,545,744	2,164,876	766,632
17 OTHER RESTRICTED FUNDS	90,451	18,403,156	82,317	(18,312,705)
	12,844,023	28,905,867	12,845,430	(16,061,844)
PROPERTY AND EQUIPMENT:				
18 LAND AND LAND IMPROVEMENTS	4,111,915	3,816,772	4,111,915	295,143
19 BUILDINGS	67,122,976	65,137,252	67,101,465	1,985,724
20 EQUIPMENT	29,796,835	28,188,077	29,579,388	1,608,758
21 IMPROVEMENTS OTHER THAN BUILDINGS	273,640	213,357	273,640	60,283
22 CONSTRUCTION IN PROGRESS	603,622	838,189	591,224	(234,567)
23 LESS: ACCUMULATED DEPRECIATION	(60,545,894)	(56,840,378)	(60,210,366)	(3,705,516)
24 NET CAPITAL ASSETS	41,363,094	41,353,269	41,447,266	9,825
25 GOODWILL	20,000	32,000	21,000	(12,000)
26 TOTAL ASSETS	110,217,023	116,688,498	109,625,841	(6,471,475)
DEFERRED OUTFLOWS OF RESOURCES				
27 PENSION RELATED (GASB 68)	(568,607)	1,743,772	(568,607)	(2,312,379)
28 UNAMORTIZED DEFERRED CHARGE ON REFUNDING	372,619	441,832	378,569	(69,213)
29 TOTAL DEFERRED OUTFLOWS OF RESOURCES	(195,988)	2,185,604	(190,038)	(2,381,592)
30 TOTAL ASSETS AND DEFERRED OUTFLOWS OF RESOURCES	110,021,035	118,874,102	109,435,803	(8,853,067)

	As of March 31, 2022	As of Mar 31, 2021	As of February 28, 2022	CHANGE FROM Mar 31, 2021
LIABILITIES & FUND BALANCE				
CURRENT LIABILITIES:				
31 ACCOUNTS AND CONTRACTS PAYABLE	1,971,162	1,288,564	1,811,190	682,598
32 ACCRUED LIABILITIES	7,978,679	8,677,599	7,583,724	(698,920)
33 DEFERRED CREDITS	730,235	966,271	699,646	(236,036)
35 CURRENT PORTIONS OF NOTES DUE	0	2,647,561	0	(2,647,561)
36 CURRENT PORTIONS OF BONDS PAYABLE	1,770,000	250,000	1,770,000	1,520,000
37 BOND INTEREST PAYABLE	90,679	107,054	49,410	(16,375)
38 DUE TO/(FROM) THIRD PARTY PAYERS	968,134	12,738,477	968,134	(11,770,343)
40 TOTAL CURRENT LIABILITIES	13,508,889	26,675,526	12,882,104	(13,166,637)
41 LONG-TERM LIABILITIES				
42 NOTES PAYABLE	0	3,881,070	0	(3,881,070)
43 BONDS PAYABLE NET OF CURRENT PORTION	8,740,000	11,955,000	8,740,000	(3,215,000)
44 PREMIUM ON BONDS PAYABLE	580,331	767,799	595,317	(187,468)
45 CAPITAL LEASE, NET OF CURRENT PORTION	26,531	35,127	26,531	(8,596)
46 TOTAL NONCURRENT LIABILITIES	9,346,862	16,638,996	9,361,848	(7,292,134)
	0	0	0	
47 TOTAL LIABILITIES	22,855,751	43,314,522	22,243,952	(20,458,771)
48 DEFERRED INFLOW OF RESOURCES	-	0	0	0
49 PROPERTY TAXES RECEIVED IN ADVANCE	0	0	0	0
50 NET POSITION				
51 INVESTED IN CAPITAL ASSETS	5,731,963	5,731,963	5,731,963	0
52 CONTRIBUTED CAPITAL - KPB	0	0	0	0
53 RESTRICTED	25,286	25,286	25,286	0
54 UNRESTRICTED FUND BALANCE - SPH	81,408,035	69,802,331	81,434,602	11,605,704
55 UNRESTRICTED FUND BALANCE - KPB	0	0	0	0
	-	-	-	
56 TOTAL LIAB & FUND BALANCE	110,021,035	118,874,102	109,435,803	(8,853,067)

INCOME STATEMENT
As of March 31, 2022
DRAFT-UNAUDITED

		MONTH			YEAR TO DATE			
		03/31/22		03/31/21	03/31/22		03/31/21	
		Actual	Budget	Var B/(W)	Actual	Budget	Var B/(W)	Actual
Patient Service Revenue								
1	Inpatient	3,288,326	2,463,333	33.49%	2,177,215	27,255,900	24,143,269	12.89%
2	Outpatient	11,778,238	9,403,921	25.25%	10,192,498	98,440,307	92,168,388	6.80%
3	Long Term Care	1,054,920	788,844	33.73%	545,182	7,612,799	7,731,510	-1.54%
4	Total Patient Services	16,121,484	12,656,098	27.38%	12,914,895	133,309,006	124,043,167	7.47%
Deductions from Revenue								
5	Medicare	3,119,424	2,737,859	-13.94%	2,392,484	26,908,803	26,833,915	-0.28%
6	Medicaid	2,250,328	1,735,257	-29.68%	1,655,862	17,947,324	17,007,355	-5.53%
7	Charity Care	253,589	194,883	-30.12%	8,185	671,494	1,910,056	64.84%
8	Commercial and Admin	1,248,136	878,931	-42.01%	1,248,615	11,459,761	8,614,459	-33.03%
9	Bad Debt	34,632	257,820	86.57%	229,897	2,149,784	2,526,916	14.92%
10	Total Deductions	6,906,109	5,804,750	-18.97%	5,535,043	59,137,166	56,892,701	-3.95%
11	Net Patient Services	9,215,375	6,851,348	34.50%	7,379,852	74,171,840	67,150,466	10.46%
12	USAC and Other Revenue	54,476	51,378	6.03%	51,931	498,611	454,115	9.80%
13	Total Operating Revenues	9,269,851	6,902,726	34.29%	7,431,783	74,670,451	67,604,581	10.45%
Operating Expenses								
14	Salaries and Wages	3,998,368	3,958,299	-1.01%	3,763,206	35,444,010	33,855,173	-4.69%
15	Employee Benefits	2,154,184	1,204,932	-78.78%	1,172,791	15,891,240	12,041,830	-31.97%
16	Supplies, Drugs and Food	1,199,209	835,012	-43.62%	917,339	9,625,768	7,380,427	-30.42%
17	Contract Staffing	288,000	118,270	-143.51%	205,032	3,240,463	1,045,352	-209.99%
18	Professional Fees	585,406	388,313	-50.76%	424,342	4,341,589	3,432,182	-26.50%
19	Utilities and Telephone	153,370	145,547	-5.37%	149,530	1,203,997	1,286,445	6.41%
20	Insurance (gen'l, prof liab, property)	57,698	55,169	-4.58%	54,117	529,144	487,619	-8.52%
21	Dues, Books, and Subscriptions	19,453	18,263	-6.52%	2,005	177,935	161,421	-10.23%
22	Software Maint/Support	158,763	147,288	-7.79%	137,089	1,393,594	1,301,833	-7.05%
23	Travel, Meetings, Education	36,810	61,232	39.88%	28,936	425,446	541,219	21.39%
24	Repairs and Maintenance	137,383	126,145	-8.91%	158,306	1,153,591	1,114,964	-3.46%
25	Leases and Rentals	77,980	76,704	-1.66%	60,072	640,540	677,966	5.52%
26	Other (Recruiting, Advertising, etc.)	95,340	80,442	-18.52%	102,343	834,047	711,003	-17.31%
27	Depreciation & Amortization	336,528	303,153	-11.01%	310,966	2,947,001	2,679,478	-9.98%
28	Total Operating Expenses	9,298,492	7,518,769	-23.67%	7,486,074	77,848,365	66,716,912	-16.68%
29	Gain (Loss) from Operations	(28,641)	(616,043)	-95.35%	(54,291)	(3,177,914)	887,669	-458.01%
Non-Operating Revenues								
30	General Property Taxes	40,978	50,130	-18.26%	50,308	4,626,941	4,598,072	0.63%
31	Investment Income	(2,678)	20,315	-113.18%	7,956	(3,613)	179,555	-102.01%
32	Governmental Subsidies	0	127,397	-100.00%	298,001	2,428,182	1,126,027	115.64%
33	Other Non Operating Revenue	0	0	100.00%	0	79,384	0	100.00%
34	Gifts & Contributions	0	0	0.00%	0	0	0	0.00%
35	Gain <Loss> on Disposal	0	(1,189)	-100.00%	0	0	(10,509)	-100.00%
36	SPH Auxiliary	2	0	0.00%	2	43	0	0.00%
37	Total Non-Operating Revenues	38,302	196,653	-80.52%	356,267	7,130,937	5,893,145	21.00%
Non-Operating Expenses								
38	Insurance	0	0	0.00%	0	0	0	0.00%
39	Service Area Board	8,067	9,427	14.43%	(19,975)	61,500	83,326	26.19%
40	Other Direct Expense	11,540	425	0.00%	1,611	36,919	3,753	0.00%
41	Administrative Non-Recurring	0	0	0.00%	0	0	0	0.00%
42	Interest Expense	32,233	32,851	1.88%	35,309	290,097	290,362	0.09%
43	Total Non-Operating Expenses	51,840	42,703	-21.40%	16,945	388,516	377,441	-2.93%
Grants								
44	Grant Revenue	28,120	0	100.00%	0	1,202,809	0	100.00%
45	Grant Expense	12,508	25,479	0.00%	0	588,158	225,205	0.00%
46	Total Non-Operating Gains, net	15,612	(25,479)	-161.27%	0	614,651	(225,205)	-372.93%
47	Income <Loss> Before Transfers	(26,567)	(487,572)	-94.55%	285,031	4,179,158	6,178,168	-32.36%
48	Operating Transfers	0	0	0.00%	0	0	0	0.00%
49	Net Income	(26,567)	(487,572)	-94.55%	285,031	4,179,158	6,178,168	-32.36%



Statement of Cash Flows
As of March 31, 2022

Cash Flow from Operations:

1	YTD Net Income	4,179,158
2	Add: Depreciation Expense	2,947,001
3	Adj: Inventory (increase) / decrease	(29,944)
4	Patient Receivable (increase) / decrease	(3,321,074)
5	Prepaid Expenses (increase) / decrease	(197,091)
6	Other Current assets (increase) / decrease	462,131
7	Accounts payable increase / (decrease)	(707,625)
8	Accrued Salaries increase / (decrease)	1,048,437
9	Net Pension Asset (increase) / decrease	(850,000)
10	Other current liability increase / (decrease)	632,611
11	Net Cash Flow from Operations	4,163,604

Cash Flow from Investing:

12	Cash paid for the purchase of property/equip	(2,255,087)
13	Cash transferred to plant replacement fund	(3,275,405)
14	Proceeds from disposal of equipment	-
15	Net Cash Flow from Investing	(5,530,492)

Cash Flow from Financing

16	Cash paid for Lease Payable	-
17	Cash paid for Debt Service	(1,445,000)
18	Net Cash from Financing	(1,445,000)
19	Net increase in Cash	\$ (2,811,888)
20	Beginning Cash as of July 1, 2021	\$ 29,677,416
21	Ending Cash as of March 31, 2022	\$ 26,865,528

Introduced by: Administration
Date: 4/27/2022
Action:
Vote: Yes - XX, No - XX, Excused – XX,

**SOUTH PENINSULA HOSPITAL
BOARD RESOLUTION
2022-07**

**A RESOLUTION OF THE SOUTH PENINSULA HOSPITAL BOARD OF DIRECTORS AUTHORIZING
THE CFO TO SIGN, FILE AND SUBMIT THE IRS FORM 990.**

WHEREAS South Peninsula Hospital is a 501(c)3 organization and is required to file IRS Form 990 annually by the 15th day of the fifth month after the end of the tax year; and

WHEREAS South Peninsula Hospital filed for an automatic 6-month extension which extended the filing deadline to May 15, 2022 for the 2020 tax year (2021 fiscal year); and

WHEREAS it is a best practice to provide a copy of IRS Form 990 to each member of the Board of Directors for review and approval prior to filing; and

WHEREAS IRS Form 990, Part VI, line 11a, states that we have in fact provided a complete copy to each member of the Board of Directors; and

WHEREAS it is the intent of the South Peninsula Hospital Administration to timely file IRS 990 and requires the approval of an authorized signer; and

WHEREAS the IRS Form 990 may be signed and submitted electronically by an officer of South Peninsula Hospital Inc., and Angela Hinnegan, CFO is able to do so.

NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF DIRECTORS OF SOUTH PENINSULA HOSPITAL:

1. That the South Peninsula Hospital, Inc. Board of Directors acknowledges that it has received a complete copy of IRS Form 990; and
2. That the South Peninsula Hospital, Inc. Board of Directors directs Management to timely file the IRS Form 990 on or before May 15, 2022; and
3. That the South Peninsula Hospital, Inc. Board of Directors authorizes Angela Hinnegan, CFO to sign and submit the IRS Form 990 electronically.

**PASSED AND ADOPTED BY THE BOARD OF DIRECTORS OF SOUTH PENINSULA HOSPITAL
THIS 27th DAY OF APRIL, 2022.**

ATTEST:

Kelly Cooper, President

Julie Woodworth, Secretary

Introduced by: Administration
Date: April 27, 2022
Action:
Vote: Yes - XX, No - X, Exc.-
X

**SOUTH PENINSULA HOSPITAL
BOARD RESOLUTION
2022-08**

**A RESOLUTION OF THE SOUTH PENINSULA HOSPITAL BOARD OF DIRECTORS
APPROVING THE REQUEST OF UNOBLIGATED SERVICE AREA FUNDS TO
SUPPORT REPLACEMENT OF DOMESTIC WATER TANK**

WHEREAS, South Peninsula Hospital Administration has identified a legacy need to replace our 350-gallon Domestic Water Tank in order to support long-term hot water generation, and

WHEREAS, the Hospital has two independent tank-type hot water heaters and one of those tanks is failing, and

WHEREAS, there is currently no redundancy or back up for these two water heaters and it is a strategic priority of Hospital management to provide the safest possible healing environment for our patients and staff, and

WHEREAS, RESPEC an independent design and engineering consultant was engaged to evaluate our hot water needs and develop a plan to address failure, redundancy, backup, efficiency, risks, and costs, and

WHEREAS, the cost replace and improve the hot water system is estimated at \$368,750; and

WHEREAS, SPH Management would like to request that unobligated monies from the Service Area Board Fund be appropriated to complete the replacement and upgrade of the SPH Hot Water System; and

WHEREAS, the Hot Water Upgrade Project was discussed at Finance Committee on March 21, 2022.

NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF DIRECTORS OF SOUTH PENINSULA HOSPITAL:

1. That the South Peninsula Hospital Board of Directors approves the Hot Water System Replacement and Upgrade Project in the amount of \$368,750.
2. That the South Kenai Peninsula Service Area Board make a recommendation to approve the use of unobligated Service Area Funds in the amount of \$368,750 for the SPH Hot Water System Replacement and Upgrade Project.
3. That the South Peninsula Hospital Board of Directors requests that the Kenai Peninsula Borough appropriate \$368,750 in unobligated Service Area Funds for the SPH Hot Water System Replacement and Upgrade Project.

**PASSED AND ADOPTED BY THE BOARD OF DIRECTORS OF SOUTH PENINSULA AT ITS
MEETING HELD ON THIS 27rd DAY OF APRIL 27, 2022.**

ATTEST:

Kelly Cooper, Board President

Julie Woodworth, Board Secretary

South Peninsula Hospital
Hospital Board of Trustees Balanced Scorecard Report
First Quarter Calendar 2022 (Jan, Feb, Mar)

Overall Indicators		Target	n	Note
Medicare Care Compare Overall Hospital Star Rating	N/A	5		
Medicare Care Compare Overall Hospital Survey Star Rating	4	5		
Medicare Care Compare Overall Nursing Home Star Rating	5	5		
Medicare Merit Based Incentive Payment System Total Score	81.34	75		2018- 87.3 2019- 60.6 2020- 75.2
The Chartis Group - iVantage Health Analytics Index Rank	70.9	75		2018- 82.1 2019- 34.6 2020-74.7
Quality of Care		Target	n	Note
Severe Sepsis & Septic Shock Care	50%	>75%	10	7/1/2021-9/30/2021 (Care Compare 69%, 7/1/20-3/31/21)
Measures the percentage of patients who received appropriate care for severe sepsis and septic shock.				# of cases passing/total # of cases-exceptions (3 pass, 3 fail, 4 exclusions)
Stroke Care	100%	>95%	7	7/1/2021-9/30/2021 (Care Compare N/A, 7/1/20-3/31/21)
Percentage of patients who came to ED w/Stroke symptoms and received CT/MRI within 45 minutes of arrival.				Numerator = CT/MRI within 45 min & documented last known well. Denominator = Patients with Stroke presenting within 2 hours of symptoms. (1 pass, 0 failed, 6 excluded)
Readmission	7%	<15%	290	1/1/2022-03/31/22 (Care Compare N/A, 7/1/17-12/01/19)
Unplanned readmission which occurs within 30 days of a previous discharge date.				# of patients with unplanned readmission within 30 days of discharge - exclusions/Eligible admissions
Elective Deliveries	0%	<0%	26	1/01/2022-3/31/22 (Care Compare N/A, 7/1/20-3/31/21)
% of non-medically indicated deliveries including caesarean delivery, inductions of labor, and cervical ripening occurring before 39 weeks gestation.				# of nomadically indicated deliveries before 39 weeks gestation / total deliveries.
Provider Quality Score (Group)	95%	>95%		Final Score Submitted to CMS for 2021
CMS Merit-Based Incentive Payment System (MIPS) for providers				
Patient Safety	1st Q 2022	Target	n	Note
Patient Fall Rate AC (injurious fall rate)	5.9 (2.5)	1	1185	# of patient falls / # patient days x 1000
Measures the number of patient falls per 1,000 patient days				n = IP, observations and swing bed patient days.
Resident Fall Rate LTC (injurious fall rate)	6.3 (1.6)	2	1897	# of resident falls / # resident days x 1000
Measures the number of resident falls per 1,000 patient days				
Medication Errors	0	0		
Measures the number of reported medication errors causing patient harm or death.				Classified according to the National Coordinating Council for Medication Error Reporting and Prevention/CMS
Never Events	0	0		
Measures the number of errors in medical care that are clearly identifiable, preventable and serious in their consequences as defined by CMS and NQF.				

Provider and Staff Alignment	1st Q 2022	Target	n	Note
Provider Satisfaction Percentile	74th	75th		
Measures the satisfaction of physician respondents as indicated by Press Ganey physician survey results. Measured as a percentile.				Result of provider survey 2021
Employee Satisfaction Percentile	70th	75th		
Measures the satisfaction of staff respondents as indicated in Press Ganey staff survey results Measured as a percentile.				Result of employee survey 2021
Patient Satisfaction Through Press Ganey	1st Q 2022	Target	n	Note
Inpatient Percentile	49th	75th	39	
Measures the satisfaction of inpatient patient respondents. Measures as a percentile ranking across Press Ganey clients.				Q3-2021: 55th, n = 32 Q4-2021: 67th, n = 42
Outpatient Percentile	22nd	75th	295	
Measures the satisfaction of outpatient patient respondents. Measures as a percentile ranking across Press Ganey clients.				Q3-2021: 43rd, n = 228 Q4-2021: 28th, n = 289
Emergency Department Percentile	89th	75th	51	
Measures the satisfaction of emergency patient respondents. Measures as a percentile ranking across Press Ganey clients.				Q3-2021: 85th, n = 86 Q4-2021: 98th, n = 48
Medical Practice Percentile	63rd	75th	523	
Measures the satisfaction of patient respondents at SPH Clinics. Measures as a percentile ranking across Press Ganey clients.				Q3-2021: 79th, n = 494 Q4-2021: 81st, n = 475
Ambulatory Surgery Percentile	70th	75th	65	
Measures the satisfaction of ambulatory surgery patient respondents. Measures as a percentile ranking across Press Ganey clients.				Q3-2021: 17th, n = 65 Q4-2021: 16th, n = 44
Home Health Care Percentile	21st	75th	29	*Running 12 months due to low quarterly returns
Measures the satisfaction of Home Health Care clients (or family) respondents. Measures as a percentile ranking across Press Ganey clients.				Q3-2021: 39th, n = 28 Q4-2021: 24th, n = 29
Consumer Assessment of Healthcare Providers and Services	1st Q 2022	Target	n	Note
HCAHPS Percentile	32th	75th	39	
Measures the 1-10 ranking received by inpatient client (or family) respondents. Measures as a percentile ranking across Press Ganey clients.				Q3-2021: 56th, n = 32 Q4-2021: 80th, n = 40
HHCAHPS Percentile	54th	75th	29	*Running 12 months due to low quarterly returns
Measures the 1-10 ranking received by Home Health Care client (or family) respondents. Measures as a percentile ranking across Press Ganey clients.				Q3-2021: 28th, n = 28 Q4-2021: 10th, n = 28

Workforce	1st Q 2022	Target	n	Note
Turnover: All Employees	4.02%	5.00%	522	<i>21 Terminations/522 Total Employees</i>
Percentage of all employees separated from the hospital for any reason				All Employees – National Hospital Rate for West Region is 23.1% (up 7.3% over PY), All Regions is 25.9%
Turnover: Voluntary All Employees	3.26%	4.75%	522	<i>17 Voluntary Terminations/522 Total Employees</i>
Measures the percentage of voluntary staff separations from the hospital				Voluntary Employees – National Hospital Rate is 95.5%
First Year Total Turnover	3.00%	7%	100	3 New Staff Terminated in Q1/100 Total New Hires from 4/1/2021-3/31/2022
Measures the percentage of staff hired in the last 12 months and who separated from the hospital for any reason during the quarter.				National Hospital Rate is 31.7%
Information System Solutions	1st Q 2022	Target	n	Note
Eligible Hospital (EH) Promoting Interoperability: hospital-based measures for inpatient and observation stays.	57	>50		CMS score 50 and above = pass
e-Prescribing: Electronic Prescribing (Rx)	8	10		
Health Information Exchange: Support Electronic Referral Loops by receiving and incorporating health information	0	20		
HIE: Support Electronic Referral Loops by sending health information (Summary of Care sent)	3	20		
Provider to patient exchange: Provide patients electronic access to their health information (timely access via the patient portal)	36	40		
Public Health & Clinical Data Exchange	10	10		
Eligible Provider (EP) - Promoting Interoperability (Group)	100%	95%		
Merit Based Incentive Payment System Promoting Interoperability score (<i>MIPS tracking is in Athena</i>)				Scoring tabulated as a running, annual score.
Electronic Medical Record (EMR) Adoption Stage	5	5		
Health Information Management & Systems Society (HIMSS) Electronic Medical Record Adoption Model (EMRAM) stage.				The current US average is 2.4 out of a possible 7.0 stages. Stage 6 and 7 require site visit validation.
IT Security Awareness Training Complete Rate	89%	100%	1599	
% of employees who have completed assigned security training				
Phishing Test Pass Rate	99%	100%	2665	
% of Phishing test emails that were not failed.				2665 test phishing emails sent out to staff. 29 of the email links were clicked, causing 29 potential security risks.

Financial Health	1st Q 2022	Target	n	Note
Operating Margin	-7.32%	-3.1%		
Measures the surplus (deficit) of operating income over operating expenses as a percentage of net patient service revenue for the quarter.				Target is based on budgeted operating margin for the period.
Adjusted Patient Discharges	946.46	910.52		
Measures the number of patients discharged, adjusted by inpatient revenues for the quarter divided by (<i>inpatient + outpatient revenues</i>).				Total Discharges: 203 (Acute, OB, Swing, ICU) LTC Revenue & discharges not included
Net Revenue Growth	12.5%	-2.2%		
Measures the percentage increase (decrease) in net patient revenue for the quarter compared to the same period in the prior year.				Target is based on budgeted net patient service revenue for the period compared to net patient service revenue for the same period in prior year.
Full Time Equivalents (FTEs) per Adjusted Occupied Bed	8.38	9.39		
Measures the average number of staff FTEs per adjusted occupied bed for the quarter.				Target is based on budgeted paid hours (FTE) divided by (budg gross patient revenue/budg gross inpatient rev) X budgeted average daily census for the quarter.
Net Days in Accounts Receivable	59.0	55		
Measures the rate of speed with which the hospital is paid for health care services.				
Cash on Hand	73	90		# Represents days
Measure the actual unrestricted cash on hand (excluding PREF and Service Area) that the hospital has to meet daily operating expenses.				Cash available for operations based average daily operating expenses during the quarter less depreciation for the quarter.
Uncompensated Care as a Percentage of Gross Revenue	0.9%	3-4.7%		
Measures bad debt & charity write offs as a percentage of gross patient service revenue				Target is based on industry standards.
Surgical Case Growth	0.8%	3.7%		
Measures the increase (decrease) in surgical cases for the quarter compared to the same period in the prior year.				Target is based on budgeted surgeries above actual from same quarter prior year.
Intense Market Focus to Expand Market Share	1st Q 2022	Target	n	Note
Outpatient Revenue Growth	8.8%	0%		
Measures percentage increase (decrease) in outpatient revenue for the quarter, compared to the same period in the prior year.				Target is based on budgeted outpatient revenue for the period compared to outpatient revenue for the same period in the prior year.

iProtean Subscription Agreement - Proposal

On behalf of Team iPro, we are very pleased to welcome **South Peninsula Hospital** ("*Hospital*") as partner to our virtual board education platform for hospital trustees, management, and physician leaders. Pursuant to our recent conversations, below please find a list of key terms and conditions for your review:

Subscription Includes

South Peninsula Hospital will be enrolled into the "iPro Best" subscription tier which includes:

- **Master Library:** Access to all video courses in Governance, Finance, Mission & Strategy, Quality, and Innovation & Technology. Your access will include, without limitation, all future content introduced during the agreement, and across new pillars of content.
- **Key Features:** Includes Mobile-ready; Star-rating; nudge notifications; digital certification; dashboard; quarterly reporting calls; concierge planning; as well as new features introduced for this tier during the term of this agreement.
- **Learning Modules:** Includes Individual Learning Pathways (ILPs) and Group Learning Pathways (GLP) for both self-directed and group learning settings.
- **Virtual Expert:** The service package will include virtual participation of iPro subject matter experts for your board meetings, including board retreats. This service is subject to mutual coordination of calendars and expert suitability. Hospital agrees to provide at least 30 days advance notice for scheduling purposes. Reference terms below.
- **Virtual Coach:** The service package will include access to our virtual coaching services to help counsel senior executives and board members with acute issues and with best-effort 'on-demand' availability, enjoyed in 60 minute sessions. Reference terms below.
- **Custom-Generated Content:** The service package may include end-to-end production of customer generated content featuring an executive leader from inside your organization and with the aim to feature content important to the organization, and for purposes of disseminating the finished product to your organization stakeholders. All expenses required to remote-design and remote-produce this content will be carried by iPro. Reference terms below.
- **Calendar:** Includes features to promote curriculum individualized for each learner. Hospital agrees to work with iPro during the onboarding period to co-design pathways and identify most suitable courses depending on goals and objectives.
- **Swapping:** iPro grants Hospital a right to "swap out" board members during the term without additional charge provided the seat becomes available as a result of a terming board member, resignation, or by special request. Reference terms below.
- **iProtean Pledge:** As part of our mission to create cultures of education excellence, iPro agrees to donate 2 free learner licenses for any subsequent year, if in the aggregate, the board completes its certification target of 80% or better to goal, as mutually determined by parties at the time of renewal.

- **Branded Dashboard:** Includes hospital logo, and digital marketing billboard featuring custom content for your organization.

Key Terms

Please review the three options, establish your preferred package, and check the acceptance box below.

Option #1:

- **Term:** One (1) year agreement commencing on **April 1**, and expiring one year from commencement.
- **Registrant Licenses:** Includes up to **15** registered learners across board members, executive management, and physician leaders.
- **Fee:** \$25,500, plus one-time onboarding fee of \$1,800.
- **Service upgrades during one year term:**
 - Virtual Expert: 1 over the term complimentary to your organization.
 - Virtual Coaching: Up to 8 hours over the term at a 50% discount off non-subscriber listed rates.
 - License swaps - Up to 3 during the term complimentary to organization.

Option #2:

- **Term:** Two (2) year agreement commencing on **April 1**, and expiring two years from commencement.
- **Registrant Licenses:** Includes up to **15** registered learners
- **Fee:** \$45,900. One-time onboarding fee of \$1,800 will be waived, and package also includes these additional upgrade services at no additional charge:
- **Complimentary service upgrades during two year term:**
 - Virtual Expert: Up to 2 experts complimentary to your organization over the term.
 - Virtual Coaching: Up to 4 hours complimentary to your organization over the term.
 - License swaps - Up to 7 during the term complimentary to organization over the term.

Option #3:

- **Term:** Three (3) year agreement commencing on **April 1**, and expiring three years from commencement.
- **Registrant Licenses:** Includes up to **15** registered learners

- **Fee:** \$60,750. One-time onboarding fee of \$1,800 is waived, and package also includes these additional upgrade features at no additional charge:

Complimentary service upgrades during 3 year term:

- Virtual Expert: Up to 4 experts complimentary to your organization over the term.
- Virtual Coaching: Up to 8 hours complimentary to your organization over the term.
- License swaps - Up to 12 complimentary to organization over the term.
- Customized Generated Content: One (1) professionally produced piece of content tailored to specifically meet the needs of your organization.
- Additional 5 learners added at any time during the term at no additional charge.

Other Key Terms:

- **Offer:** Discounts granted to your organization are subject to an agreement memorialized by **March 31, 2022**.
- **Confidentiality & Data Privacy:** Organization agrees to respect and preserve the confidentiality of this agreement and refrain from sharing the fee structure to third parties, including consultants and other industry executives, without the expressed consent of iPro. Similarly, iPro shall protect the individual privacy of data gathered during the relationship at all times, and if data is disseminated for educational purposes, such data shall remain anonymized, and treated in accordance with industry best practices.

CEO Performance Evaluation Timeline & Process

January: Board President appoints chair of the CEO Compensation Committee for approval at January Board Meeting.

A. Evaluation Packet Prepared - (February)

Board Executive Assistant prepares an Evaluation Packet & cover letter with deadlines for the CEO Compensation Chair to sign consisting of the following:

1. Cover letter with deadlines;
2. CEO Self Evaluation. (prepared by CEO);
3. Evaluation Forms: A unique assessment form will be provided to each group receiving the Evaluation Packet; and,
4. Key Performance Indicators for prior two years.

The Evaluation Packet is mailed or emailed to Medical Executive Committee, Senior Leadership Team and Board Members by February 20.

B. CEO Compensation Budget Amount (February)

CEO Compensation Chair will calculate the budget amount as follows:

% Salary Increase calculated at CPFI calculated at the highest allowed rate or other bonus based on contract. The budgeted amount will be sent to CFO and Board Chair.

C. Salary Review (March)

Governance Committee will compile current compensation information and comparable compensation data including national and state salary data from relevant trade organizations. CFO will review Form 990 for CEO salary data for Central Peninsula Hospital, Providence, Alaska Regional Hospital and St. Elias Hospital. This salary data will be compiled and provided to the CEO Compensation Committee.

D. Assessment Summary Compiled. (March)

The Assessments will be reviewed, and comments compiled verbatim with an “Executive Summary” prepared by Executive Assistant and presented to the Governance Committee. The Governance Committee will assign a member to categorize the Assessments to identify themes.

E. Assessment Comments Categorized. (April)

The Committee will review:

1. CEO Self Evaluation

2. Assessment Summary, and the proposed themes.
3. Key Performance Indicators.

CEO Compensation Committee will review the bonus calculations based on the Key Performance Indicators and prepare the Bonus Matrix. CEO Compensation Committee Governance Committee will compile current compensation information and comparable compensation data.

The committee will recommended bonus and compensation modifications to be presented to the Board.

F. Board Review of Compensation Recommendation (May)

Board approves compensation and bonus increases.

G. CEO Evaluation & Review (June)

Board Chair will provide the evaluation summary to the CEO, allowing time for review. A formal meeting to address the evaluation will then be conducted by the Board Chair.

2. A summarized assessment will be maintained as a permanent record.
3. The Board Chair will provide the Board a verbal report on Evaluation Review Meeting at the next scheduled Executive Session.