



AGENDA

Board of Directors Meeting

12:00 AM - Wednesday, October 25, 2023

[Click link to join Zoom meeting](#)

SPH Conference Rooms 1&2

Meeting ID: 878 0782 1015 Pwd: 931197

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

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

- 4 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 September 27, 2023

- 11 - 15 7.2. Consideration to Approve September FY24 Financials
[Balance Sheet Sept FY24](#)
[Income Statement Sept FY24](#)
[Cash Flows Statement Sept FY24](#)

8. PRESENTATIONS

9. UNFINISHED BUSINESS

10. NEW BUSINESS

- 16 - 17 10.1. Consideration to Approve SPH Resolution 2023-27, A Resolution
Approving the Transfer of Cash in Excess of 90 Days Cash on Hand to
the Plant/Equipment Replacement and Expansion Fund for the Period
Ending September 30, 2023
[SPH Resolution 23-27 Transfer to PREF over 90 days](#)

11. REPORTS

- 18 - 22 11.1. Chief Executive Officer
[3Q 2023 Balanced Scorecard](#)
- 11.2. BOD Committee: Finance
Presenter: Walter Partridge
- 11.3. BOD Committee: Governance
Presenter: Aaron Weisser
- 11.4. BOD Committee: Education
Presenter: Melissa Jacobsen
- 11.5. Chief of Staff
Presenter: Christopher Landess, MD
- 11.6. Service Area Board Representative
Presenter: Kathryn Ault

12. DISCUSSION

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

5:30 PM - Wednesday, September 27, 2023

Conference Rooms 1&2 and Zoom

The Board of Directors of the South Peninsula Hospital was called to order on Wednesday, September 27, 2023, at 5:30 PM, in the Conference Rooms 1&2 and Zoom.

1. CALL TO ORDER

President Kelly Cooper called the regular meeting to order at 5:30pm.

2. ROLL CALL

BOARD PRESENT: President Kelly Cooper, Keriann Baker, Todd Boling, Matthew Hambrick, Melissa Jacobsen, Edson Knapp, Walter Partridge, Aaron Weisser, Bernadette Wilson, Julie Woodworth and CEO Ryan Smith

BOARD EXCUSED: Beth Wythe

ALSO PRESENT: Ryan Smith (CEO) and 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.*

A quorum was present.

3. REFLECT ON LIVING OUR VALUES

Kelly Cooper shared an email she received from a patient about the wonderful care she received at South Peninsula Hospital.

4. WELCOME GUESTS & PUBLIC / INTRODUCTIONS / ANNOUNCEMENTS

Ms. Cooper welcomed everyone to the meeting.

5. COMMENTS FROM THE AUDIENCE ON ITEMS OF ANY MATTER

There were no comments from the audience.

6. APPROVAL OF THE AGENDA

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

7. APPROVAL OF THE CONSENT CALENDAR

Julie Woodworth read the consent calendar into the record.

7.1. Consideration to Approve the South Peninsula Hospital (SPH) Board of Directors meeting minutes for August 23, 2023.

7.2. Consideration to Approve August 2023 Financials

7.3. Consideration to Approve the revised South Peninsula Hospital Infection Prevention Plan

Secretary Julie Woodworth made a motion to approve the consent calendar as read. Aaron Weisser seconded the motion. Motion Carried.

8. PRESENTATIONS

There were no presentations.

9. UNFINISHED BUSINESS

There was no unfinished business.

10. NEW BUSINESS

10.1. Consideration to Approve SPH Resolution 2023-26, A Resolution of the Peninsula Hospital Board of Directors to Support Sole Sourcing the Acquisition of Epic, a New Electronic Medical Record Software

Staff Report: Ryan Smith, CEO. This resolution would allow South Peninsula Hospital to sole source the new electronic health record (EHR). The board has already approved the funding. The driving force for this change is for patient and medical staff continuity, so it is logical to use the EHR that is already used by the majority of the hospitals we work most closely with. The borough supports this plan, and the Service Area Board has already considered and approved a similar resolution.

Discussion: Mr. Partridge added that the resolution was reviewed and approved in Finance Committee.

Melissa Jacobsen made a motion to approve SPH Resolution 2023-26, A Resolution of the Peninsula Hospital Board of Directors to Support Sole Sourcing the Acquisition of Epic, a New Electronic Medical Record Software. Julie Woodworth seconded the motion. Motion Carried.

A roll call vote was conducted:

<i>Aaron Weisser</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>M. Todd Boling</i>	<i>Yes</i>
<i>Matthew Hambrick</i>	<i>Yes</i>
<i>Melissa Jacobsen</i>	<i>Yes</i>
<i>Edson Knapp</i>	<i>Excused</i>
<i>Bernadette Wilson</i>	<i>Yes</i>
<i>Beth Wythe</i>	<i>Excused</i>
<i>Kelly Cooper</i>	<i>Yes</i>

10.2. Consideration to Revise the Board of Directors Bylaws to Clarify Language Regarding Number of Votes Required for Censure or Removal of a Board Member (Second Reading)

Report: Aaron Weisser, Governance Committee Chair

This is the second reading of the bylaws amendment, as it was introduced at the August meeting. The amendment was recommended by the Governance Committee.

There was no additional discussion.

Aaron Weisser made a motion to approve revising the Board of Directors Bylaws to Clarify Language Regarding the Number of Votes Required for Censure or Removal of a Board Member. Julie Woodworth seconded the motion. Motion Carried.

A roll call vote was conducted:

<i>Aaron Weisser</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>M. Todd Boling</i>	<i>Yes</i>
<i>Matthew Hambrick</i>	<i>Yes</i>
<i>Melissa Jacobsen</i>	<i>Yes</i>
<i>Edson Knapp</i>	<i>Excused</i>
<i>Bernadette Wilson</i>	<i>Yes</i>
<i>Beth Wythe</i>	<i>Excused</i>
<i>Kelly Cooper</i>	<i>Yes</i>

11. REPORTS

11.1. Chief Executive Officer

Ryan Smith, CEO, gave a verbal report.

The Balanced Scorecard was included in the packet but was not updated from last month. We are taking Mako Haggerty's concerns about the coast guard drug screening process seriously, and are working to put together a fact sheet and new release form. We will meet with him when this is complete to see if this will resolve his concerns. We hired a new director for the SPH Foundation, which also recently received a large donation from a new donor. We've hired a Childcare Administrator, and we are recruiting for several positions on the medical staff.

11.2. BOD Committee: Finance

Walter Partridge, Finance Committee Chair, reported. The committee met and reviewed the EHR resolution, as well as the August finances. It was a strong revenue month with commensurate deductions. The net revenue was right on budget.

11.3. BOD Committee: Governance

Aaron Weisser, Governance Chair, reported. The committee did not meet this month, but will be looking at an agenda for the upcoming year, as well as member recruitment.

11.4. BOD Committee: Education

Melissa Jacobsen, Education Chair, reported. The committee didn't meet this month, but plans to start looking at a time for the 2024 retreat and considering an education plan for 2024.

11.5. Chief of Staff

Dr. Christopher Landess, Chief of Staff, reported. There are no major concerns on the medical staff at this time. They are happy with the decision to move forward with transition the medical record to Epic.

11.6. Service Area Board Representative - Judith Lund

Judith Lund, Service Area Board representative, had nothing additional to report. As Ms. Lund is serving the end of her last term on the SAB, several board members thanked her for her many years of service, and praised her for her calm and steady presence and leadership in that arena.

12. DISCUSSION

There were no items for discussion.

13. COMMENTS FROM THE AUDIENCE ON ITEMS OF ANY MATTER

14. COMMENTS FROM THE BOARD

(Announcements/Congratulations)

14.1. Chief Executive Officer

Mr. Smith thanked Ms. Lund for her service on the SAB. He congratulated our Long Term Care team on winning two awards at the AHHA Conference this month - the Front Line Service Award, as well as a quality award from Mountain Pacific. Dr. Eneboe was also honored with the Paton award, given to a physician with over 40 years of service in Alaska.

14.2. Board Members

Matthew Hambrick congratulated Ms. Lund and thanked her for her service to the SAB. Keriann Baker also thanked Ms. Lund, and thanked Melissa Jacobsen for her work at the city with the voting process. Julie Woodworth congratulated Dr. Eneboe on the recognition, and thanked Ms. Lund for her service. Aaron Weisser enjoyed the Doctors Dinner, and thanked the Administration team for their help with the planning. Walter Partridge thanked Ms. Lund and expressed appreciation for the Doctor's Dinner. Ms. Cooper also thanked Ms. Lund.

15. INFORMATIONAL ITEMS

There were no information items.

16. ADJOURN TO EXECUTIVE SESSION

The meeting was adjourned to Executive Session at 6:30pm.

17. ANNOUNCEMENTS AS A RESULT OF EXECUTIVE SESSION

17.1. Credentialing

After review of the applicant's files through the secure online portal, Julie Woodworth moved to approve the following positions in the medical staff as requested and recommended by the Medical Executive Committee. Melissa Jacobsen seconded the motion. Motion carried.

Reappointments (Telemed)

Klein, Jerome MD; Radiology/Vrad; Telemedicine
David Wong, MD; Radiology/Vrad; Telemedicine
Albert Ybasco, MD; Radiology/Vrad; Telemedicine
Aixa Espinosa Morales, MD; TeleNeuro/Stroke; Telemedicine
Robert Jackson, MD; TeleNeuro/Stroke; Telemedicine
Pawani Sachar, MD; TeleNeuro/Stroke; Telemedicine
Hanbing Wang, MD; TeleNeuro/Stroke; Telemedicine
Elizabeth Tieman, MD; Radiology/Vrad; Telemedicine
Larry Kessler, MD; Radiology/Vrad; Telemedicine
Eric Anding, MD; AHVI Remote Cardiology; Courtesy

Appointments

James Jordan, MD; Emergency Medicine; Courtesy Staff
Michael Larson, MD; Diagnostic Rad-RCI; Courtesy Staff
Michael Bergquist, MD; Diagnostic Rad-RCI; Courtesy Staff
Sarah Truitt, MD; Ob/GYN-Locum; Courtesy Staff
John Wuellner, MD; Ortho-Locum; Courtesy Staff
Claudia Thomas, MD; Ortho-Locum; Courtesy Staff

Reappointments

William Bell, MD; Family Medicine; Active Staff

18. ADJOURNMENT

The meeting was adjourned at 7:16pm.

Respectfully Submitted,

Accepted:

Maura Jones, Executive Assistant

Kelly Cooper, President

Minutes Approved:

Julie Woodworth, Secretary

DRAFT



South Peninsula Hospital

DRAFT-UNAUDITED
BALANCE SHEET
 As of September 30, 2023

	As of September 30, 2023	As of September 30, 2022	As of August 31, 2023	CHANGE FROM September 30, 2022
ASSETS				
CURRENT ASSETS:				
1 CASH AND CASH EQUIVALENTS	27,022,375	23,878,625	26,364,804	3,143,750
2 EQUITY IN CENTRAL TREASURY	10,212,213	9,195,847	9,232,929	1,016,366
3 TOTAL CASH	<u>37,234,588</u>	<u>33,074,472</u>	<u>35,597,733</u>	<u>4,160,116</u>
4 PATIENT ACCOUNTS RECEIVABLE	34,752,757	29,849,426	35,133,076	4,903,331
5 LESS: ALLOWANCES & ADJ	(17,386,907)	(14,571,124)	(17,341,000)	(2,815,783)
6 NET PATIENT ACCT RECEIVABLE	<u>17,365,850</u>	<u>15,278,302</u>	<u>17,792,076</u>	<u>2,087,548</u>
7 PROPERTY TAXES RECV - KPB	2,180,688	1,943,832	3,497,650	236,856
8 LESS: ALLOW PROP TAX - KPB	(4,165)	(4,165)	(4,165)	0
9 NET PROPERTY TAX RECV - KPB	<u>2,176,523</u>	<u>1,939,667</u>	<u>3,493,485</u>	<u>236,856</u>
10 OTHER RECEIVABLES - SPH	260,383	464,148	212,948	(203,765)
11 INVENTORIES	2,104,374	1,987,730	2,109,237	116,644
12 NET PENSION ASSET- GASB	3,559,619	4,831,084	3,559,619	(1,271,465)
13 PREPAID EXPENSES	<u>1,027,640</u>	<u>971,190</u>	<u>891,695</u>	<u>56,450</u>
14 TOTAL CURRENT ASSETS	<u>63,728,977</u>	<u>58,546,593</u>	<u>63,656,793</u>	<u>5,182,384</u>
ASSETS WHOSE USE IS LIMITED				
15 PREF UNOBLIGATED	6,156,930	7,216,301	6,156,930	(1,059,370)
16 PREF OBLIGATED	2,112,254	1,964,169	2,112,254	148,085
17 OTHER RESTRICTED FUNDS	44,857	46,527	44,795	(1,670)
	<u>8,314,041</u>	<u>9,226,996</u>	<u>8,313,979</u>	<u>(912,955)</u>
PROPERTY AND EQUIPMENT:				
18 LAND AND LAND IMPROVEMENTS	4,114,693	4,114,693	4,114,693	0
19 BUILDINGS	63,998,829	67,424,631	63,998,829	(3,425,802)
20 EQUIPMENT	27,857,105	30,349,300	27,858,476	(2,492,195)
21 BUILDINGS INTANGIBLE ASSETS	2,478,113	2,382,262	2,478,113	95,851
22 EQUIPMENT INTANGIBLE ASSETS	851,479	462,427	462,427	389,052
23 SOFTWARE INTANGIBLE ASSETS	1,986,711	0	1,986,711	1,986,711
24 IMPROVEMENTS OTHER THAN BUILDINGS	311,331	343,540	311,331	(32,209)
25 CONSTRUCTION IN PROGRESS	2,500,722	776,040	1,693,065	1,724,682
26 LESS: ACCUMULATED DEPRECIATION FOR FIXED ASSETS	(58,368,308)	(62,547,049)	(58,036,541)	4,178,741
27 LESS: ACCUMULATED AMORTIZATION FOR LEASED ASSETS	(1,905,417)	(529,188)	(1,838,926)	(1,376,229)
28 NET CAPITAL ASSETS	<u>43,825,258</u>	<u>42,776,656</u>	<u>43,028,178</u>	<u>1,048,602</u>
29 GOODWILL	2,000	14,000	3,000	(12,000)
30 TOTAL ASSETS	<u>115,870,276</u>	<u>110,564,245</u>	<u>115,001,950</u>	<u>5,306,031</u>
DEFERRED OUTFLOWS OF RESOURCES				
31 PENSION RELATED (GASB 68)	5,789,464	4,530,917	5,789,464	1,258,547
32 UNAMORTIZED DEFERRED CHARGE ON REFUNDING	271,298	337,854	276,572	(66,556)
33 TOTAL DEFERRED OUTFLOWS OF RESOURCES	<u>6,060,762</u>	<u>4,868,771</u>	<u>6,066,036</u>	<u>1,191,991</u>
34 TOTAL ASSETS AND DEFERRED OUTFLOWS OF RESOURCES	<u>121,931,038</u>	<u>115,433,016</u>	<u>121,067,986</u>	<u>6,498,022</u>

	<u>As of September 30, 2023</u>	<u>As of September 30, 2022</u>	<u>As of August 31, 2023</u>	<u>CHANGE FROM September 30, 2022</u>	
LIABILITIES & FUND BALANCE					
CURRENT LIABILITIES:					
35	ACCOUNTS AND CONTRACTS PAYABLE	1,409,635	1,135,887	1,674,696	273,748
36	ACCRUED LIABILITIES	9,942,194	8,978,297	11,886,839	963,897
37	DEFERRED CREDITS	64,691	54,821	64,958	9,870
38	CURRENT PORTION OF LEASE PAYABLE	589,886	385,206	507,790	204,680
39	CURRENT PORTION SOFTWARE INTANGIBLE PAYABLE	488,080	0	488,995	488,080
40	CURRENT PORTIONS OF NOTES DUE	0	0	0	0
41	CURRENT PORTIONS OF BONDS PAYABLE	1,850,000	1,510,000	1,850,000	340,000
42	BOND INTEREST PAYABLE	67,440	89,383	39,032	(21,943)
43	DUE TO/(FROM) THIRD PARTY PAYERS	1,440,709	1,388,761	1,465,506	51,948
44	TOTAL CURRENT LIABILITIES	<u>15,852,635</u>	<u>13,542,355</u>	<u>17,977,816</u>	<u>2,310,280</u>
LONG-TERM LIABILITIES					
45	NOTES PAYABLE	0	0	0	0
46	BONDS PAYABLE NET OF CURRENT PORTION	6,615,000	8,740,000	6,615,000	(2,125,000)
47	PREMIUM ON BONDS PAYABLE	359,988	498,871	369,782	(138,883)
48	CAPITAL LEASE, NET OF CURRENT PORTION	2,087,421	2,095,819	1,840,700	(8,398)
49	SOFTWARE INTANGIBLE LEASE, NET OF CURRENT PORTION	460,247	0	459,902	460,247
50	TOTAL NONCURRENT LIABILITIES	<u>9,522,656</u>	<u>11,334,690</u>	<u>9,285,384</u>	<u>(1,812,034)</u>
51	TOTAL LIABILITIES	25,375,291	24,877,045	27,263,200	498,246
52	DEFERRED INFLOW OF RESOURCES	0	0	0	0
53	PROPERTY TAXES RECEIVED IN ADVANCE	0	0	0	0
NET POSITION					
54	INVESTED IN CAPITAL ASSETS	5,731,963	5,731,963	5,731,963	0
55	CONTRIBUTED CAPITAL - KPB	0	0	0	0
56	RESTRICTED	25,286	25,286	25,286	0
57	UNRESTRICTED FUND BALANCE - SPH	90,798,498	84,798,722	88,047,537	5,999,776
58	UNRESTRICTED FUND BALANCE - KPB	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
59	TOTAL LIAB & FUND BALANCE	<u><u>121,931,038</u></u>	<u><u>115,433,016</u></u>	<u><u>121,067,986</u></u>	<u><u>6,498,022</u></u>

INCOME STATEMENT
As of September 30, 2023
DRAFT-UNAUDITED

	MONTH			YEAR TO DATE				
	09/30/23		09/30/22	09/30/23		09/30/22		
	Actual	Budget	Var B/(W)	Actual	Actual	Budget	Var B/(W)	Actual
Patient Service Revenue								
1 Inpatient	3,307,422	2,840,305	16.45%	2,684,238	9,648,772	8,342,790	15.65%	8,411,528
2 Outpatient	14,732,646	13,738,376	7.24%	12,674,489	44,668,821	41,414,958	7.86%	38,203,494
3 Long Term Care	994,788	1,182,413	-15.87%	1,072,393	3,282,757	3,547,238	-7.46%	3,191,015
4 Total Patient Services	19,034,856	17,761,094	7.17%	16,431,120	57,600,350	53,304,986	8.06%	49,806,037
Deductions from Revenue								
5 Medicare	4,560,122	3,336,681	-36.67%	2,875,588	13,476,720	10,022,555	-34.46%	10,307,164
6 Medicaid	2,171,998	2,100,050	-3.43%	2,932,716	6,442,334	6,308,024	-2.13%	7,055,866
7 Charity Care	230,544	185,590	-24.22%	222,906	683,766	557,466	-22.66%	599,619
8 Commercial and Admin	1,453,553	1,474,672	1.43%	1,290,979	4,710,973	4,429,545	-6.35%	4,267,320
9 Bad Debt	543,962	246,908	-120.31%	282,289	1,202,411	741,650	-62.13%	757,316
10 Total Deductions	8,960,179	7,343,901	-22.01%	7,604,478	26,516,204	22,059,240	-20.20%	22,987,285
11 Net Patient Services	10,074,677	10,417,193	-3.29%	8,826,642	31,084,146	31,245,746	-0.52%	26,818,752
12 USAC and Other Revenue	81,156	76,689	5.82%	57,904	254,724	230,068	10.72%	188,086
13 Total Operating Revenues	10,155,833	10,493,882	-3.22%	8,884,546	31,338,870	31,475,814	-0.44%	27,006,838
Operating Expenses								
14 Salaries and Wages	4,483,959	4,879,811	8.11%	5,156,195	14,189,055	13,993,063	-1.40%	12,952,185
15 Employee Benefits	1,432,016	2,054,598	30.30%	1,924,733	4,577,856	5,986,892	23.54%	5,401,478
16 Supplies, Drugs and Food	1,016,731	1,194,934	14.91%	958,457	3,591,276	3,548,040	-1.22%	3,262,913
17 Contract Staffing	180,862	111,129	-62.75%	299,382	607,351	332,106	-82.88%	814,388
18 Professional Fees	422,076	534,110	20.98%	638,817	1,677,057	1,565,379	-7.13%	1,584,738
19 Utilities and Telephone	173,999	124,648	-39.59%	148,969	497,839	360,793	-37.98%	405,748
20 Insurance (gen'l, prof liab, property)	73,592	70,658	-4.15%	63,798	216,025	241,905	10.70%	179,579
21 Dues, Books, and Subscriptions	14,043	21,827	35.66%	16,316	53,047	61,241	13.38%	46,693
22 Software Maint/Support	166,058	170,106	2.38%	188,551	511,249	500,992	-2.05%	521,317
23 Travel, Meetings, Education	67,036	90,491	25.92%	66,058	145,852	255,111	42.83%	136,257
24 Repairs and Maintenance	159,651	147,001	-8.61%	71,651	534,527	437,607	-22.15%	406,895
25 Leases and Rentals	62,887	76,489	17.78%	54,552	199,474	226,588	11.97%	173,887
26 Other (Recruiting, Advertising, etc.)	219,426	155,582	-41.04%	104,954	730,690	466,742	-56.55%	324,522
27 Depreciation & Amortization	332,778	345,139	3.58%	341,140	1,045,434	1,035,416	-0.97%	1,015,779
28 Total Operating Expenses	8,805,114	9,976,523	11.74%	10,033,573	28,576,732	29,011,875	1.50%	27,226,379
29 Gain (Loss) from Operations	1,350,719	517,359	-161.08%	(1,149,027)	2,762,138	2,463,939	-12.10%	(219,541)
Non-Operating Revenues								
30 General Property Taxes	1,369,419	1,060,281	29.16%	1,427,113	3,021,729	2,433,816	24.16%	3,012,521
31 Investment Income	63,496	34,521	83.93%	22,997	151,645	103,562	46.43%	60,276
32 Governmental Subsidies	0	0	0.00%	0	0	0	0.00%	0
33 Other Non Operating Revenue	60	419	100.00%	0	983	1,258	100.00%	952
34 Gifts & Contributions	0	0	0.00%	0	0	0	0.00%	0
35 Gain <Loss> on Disposal	0	0	0.00%	0	0	0	0.00%	0
36 SPH Auxiliary	284	375	-24.27%	1	1,400	1,125	24.44%	4
37 Total Non-Operating Revenues	1,433,259	1,095,596	30.82%	1,450,111	3,175,757	2,539,761	25.04%	3,073,753
Non-Operating Expenses								
38 Insurance	0	0	0.00%	0	0	0	0.00%	0
39 Service Area Board	1,667	3,179	47.56%	12,800	1,599	6,934	0.00%	27,920
40 Other Direct Expense	988	6,056	83.69%	0	988	18,169	94.56%	0
41 Administrative Non-Recurring	0	0	0.00%	0	0	0	0.00%	0
42 Interest Expense	43,185	34,394	-25.56%	39,226	110,657	103,182	-7.24%	118,096
43 Total Non-Operating Expenses	45,840	43,629	-5.07%	52,026	113,244	128,285	11.72%	146,016
Grants								
44 Grant Revenue	12,821	67,216	0.00%	0	62,791	201,649	0.00%	0
45 Grant Expense	0	2,501	100.00%	2,501	0	7,503	100.00%	7,505
46 Total Non-Operating Gains, net	12,821	64,715	-80.19%	(2,501)	62,791	194,146	67.66%	(7,505)
47 Income <Loss> Before Transfers	2,750,959	1,634,041	-68.35%	246,557	5,887,442	5,069,561	16.13%	2,700,691
48 Operating Transfers	0	0	0.00%	0	0	0	0.00%	0
49 Net Income	2,750,959	1,634,041	68.35%	246,557	5,887,442	5,069,561	16.13%	2,700,691



Statement of Cash Flows
As of September 30, 2023

Cash Flow from Operations:

1	YTD Net Income	5,887,442
2	Add: Depreciation Expense	1,045,434
3	Adj: Inventory (increase) / decrease	25,659
4	Patient Receivable (increase) / decrease	(2,332,663)
5	Prepaid Expenses (increase) / decrease	(290,411)
6	Other Current assets (increase) / decrease	(1,980,268)
7	Accounts payable increase / (decrease)	9,754
8	Accrued Salaries increase / (decrease)	1,606,732
9	Net Pension Asset (increase) / decrease	-
10	Other current liability increase / (decrease)	269,926
11	Net Cash Flow from Operations	4,241,605

Cash Flow from Investing:

12	Cash paid for the purchase of property/equip	(1,634,159)
13	Cash transferred to plant replacement fund	-
14	Proceeds from disposal of equipment	-
15	Net Cash Flow from Investing	(1,634,159)

Cash Flow from Financing

16	Cash paid for Lease Payable	-
17	Cash paid for Debt Service	-
18	Net Cash from Financing	-

19	Net increase in Cash	\$ 2,607,446
20	Beginning Cash as of July 1, 2022	\$ 34,627,142
21	Ending Cash as of September 30, 2023	\$ 37,234,588

**SOUTH PENINSULA HOSPITAL
BOARD RESOLUTION
2023-27**

**A RESOLUTION APPROVING THE TRANSFER OF CASH IN EXCESS OF 90 DAYS
CASH ON HAND TO THE PLANT/EQUIPMENT REPLACEMENT AND EXPANSION
FUND FOR THE PERIOD ENDING SEPTEMBER 30, 2023**

WHEREAS, the Kenai Peninsula Borough has entered into an Operating Agreement with South Peninsula Hospital Inc. ("SPH, Inc.") for the management and operation of South Peninsula Hospital and other Medical Facilities, and to provide other healthcare programs and services, on a nonprofit basis to ensure continued availability to the Service Area residents; and

WHEREAS, Section 13, Finances, Paragraph (a) Operating Revenue, SPHI shall maintain an operating reserve of not more than ninety (90) days "cash on hand", and requires that, on a quarterly basis, SPH, Inc. "shall transfer all cash on hand in excess of the operating reserve amount to the Borough for deposit into the South Peninsula Hospital Plant/Equipment Replacement and Expansion Fund;" and

WHEREAS, SPH has determined that the operating reserve is in excess of ninety (92.4) days "cash on hand" in the amount of **\$711,888.67 (2.4 days)** for the quarter ending September 30, 2023, which funds must be transferred for deposit into the PREF; and

WHEREAS, Attachment B, KPB Statement of Procedures for Deposit or Withdrawal of Funds, requires SPH, Inc. to notify the Borough Finance Director or designee of the date, method, and other necessary information to effectuate any deposit into the PREF; however, the date of transfer and deposit cannot occur until after the date of Assembly approval; and

WHEREAS, this resolution was reviewed and approved at the Board Finance Committee meeting held on October 19, 2023.

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

1. That Management is authorized and directed to initiate a transfer of **\$711,888.67 (2.4 days)** for the quarter ending September 30, 2023 for deposit into the South Peninsula Hospital Plant/Equipment Replacement and Expansion Fund (PREF), in order to reduce the operating reserve to 90 days cash on hand, with the date of transfer of the funds to be pending the date of the Borough Assembly's approval in accordance with Section 13, Finances, Paragraph (b) Plant/Equipment Replacement and Expansion Fund.

2. That Management is hereby authorized to take any other actions that are necessary or desirable to achieve the intent of these Resolutions.

PASSED AND ADOPTED BY THE BOARD OF DIRECTORS OF SOUTH PENINSULA HOSPITAL AT ITS MEETING HELD ON THIS 25th DAY OF OCTOBER, 2023.

ATTEST:

Aaron Weisser, Acting Board President

Julie Woodworth, Secretary

South Peninsula Hospital
Hospital Board of Trustees Balanced Scorecard Report
3rd Quarter Calendar 2023 (Jul, Aug, Sep)

Overall Indicators	3Q 2023	Target	n	Note
Medicare Care Compare Overall Hospital Star Rating	N/A	5		There are too few measures or measure groups reported to calculate.
Medicare Care Compare Overall Patient Survey Star Rating	4	5		
Medicare Care Compare Overall Nursing Home Star Rating	5	5		
Medicare Merit Based Incentive Payment System Total Score	60.38	50		2019-- 60.6; 2020--75.2; 2021--81.34
<u>Clinical & Service Excellence</u>				
Using evidence-based practices, South Peninsula Hospital is dedicated to achieving consistent and demonstrated excellence in clinical quality and safety.				
Quality of Care / Patient Safety	3Q 2023	Target	n	Note
Severe Sepsis & Septic Shock Care	81%	>75%	59	* (Care Compare : 33 cases - 76%, 10/1/21-9/30/22)
Sepsis (% of patients who received appropriate care for sepsis and/or septic shock.)				# of cases passing/total # of cases-exceptions (59 cases reviewed: 13 pass, 3 fail, 43 exclusions)
Stroke Care	64%	> 95%	26	* (Care Compare N/A, 10/1/21-9/30/22)
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. (9- pass, 5- failed, 12- exclusions)
Median Emergency Room Time	169	<180 min	1747	* Target (minutes) (Care Compare:152 min, 10/1/21-9/30/22)
Average time spent in department before leaving.				Average throughput time of all ED visits
Readmission	17%	< 15%	95	* (Care Compare 15.3%, 214 patients 7/1/21-6/30/22))
The readmission measures are estimates of the rate of unplanned readmission to an acute care hospital in 30 days after discharged from a hospitalization. Patients may have had an unplanned readmission for any reason.				% of patients with unplanned readmission to (IP/Obs) within 30 days of discharge - exclusions/Eligible admissions- 16 readmits/95 total admits
Elective Deliveries	0%	0%		* (Care Compare 0%, 18 patients 10/1/21-9/30/22)
Percentage of mothers whose deliveries were scheduled too early (1-2 weeks early), when a scheduled delivery wasn't medically necessary.				# of non-medically indicated deliveries before 39 weeks gestation / total deliveries.
Provider Quality Score (Group)	20	20 pts	N/A	Scoring tabulated as a running, annual score.
CMS Merit-Based Incentive Payment System (MIPS) for providers				Target to be adjusted Quarterly as appropriate
Patient Fall Rate AC	4.81	< 5	1247	# 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. Note: AC had 6 falls - 2 falls without injury and 4 near falls

Quality of Care / Patient Safety <i>(continued)</i>	3Q 2023	Target	n	Note
Medication Errors	0	0	N/A	
Measures the number of reported medication errors causing patient harm or death.				Reported errors classified as type E-I by the National Coordinating Council for Med Error Reporting and Prevention/CMS
Never Events	0	0	N/A	
Unexpected occurrence involving death/serious physiological or psychological injury, or the risk thereof.				
Home Health (HH)	3Q 2023	Target	n	Note
Improvement in Breathing	75%	> 80%	28	
Percentage of home health quality episodes patient became less short of breath.				100% of the patients stayed the same or improved. 21 Patients improved, 7 patients stayed the same.
Correct Medication Administration	75%	> 75%	32	
Percentage of home health quality episodes patients improved taking oral medication correctly.				100% of the patients stayed the same or improved. 24 Patients improved, 8 stayed the same (<i>all 8 were dependent on oral medications being administered by another person</i>).
Nursing Home	3Q 2023	Target	n	Note
Fall with Major Injury	0	< 3%	N/A	
Number of residents who sustained a fall resulting in fracture, dislocation, head injury w/alterated consciousness, or subdural hematoma.				Last fall with major injury: September 2021
Urinary Tract Infections (UTI)	3	< 3	N/A	
Number of residents diagnosed with a UTI.				

Patient & Resident Experience

As the patient and resident experience is a prime indicator of the organization's overall health, South Peninsula Hospital strives to tenaciously pursue patient and resident experience improvements.

Consumer Assessment of Healthcare Providers and Services	3Q 2023	Target	n	Note: Measures as a % ranking across PG clients.
HCAHPS Percentile	88th	75th	36	
Measures the 1-10 ranking received by inpatient client (<i>or family</i>) respondents.				Q1 -2023, 88th, n = 25 Q2 -2023, 97th, n = 35
HHAHPS Percentile	62nd	75th	31	*Running 12 months due to low quarterly returns
Measures the 1-10 ranking received by Home Health Care client (or family) respondents.				Q1 -2023, 96th, n = 33 Q2 -2023, 94th, n = 29

Patient Satisfaction Through Press Ganey (PG)	3Q 2023	Target	n	Note: % ranking across PG clients.
Inpatient Percentile	79th	75th	38	
Measures the satisfaction of inpatient pts. respondents.				Q1 -2023: 84th, n = 25 Q2 -2023: 82nd, n = 36
Outpatient Percentile	8th	75th	272	
Measures the satisfaction of outpatient pts. respondents.				Q1 -2023: 24th, n = 271 Q2 -2023: 15th, n = 290
Emergency Department Percentile	95th	75th	119	
Measures the satisfaction of emergency pts. respondents.				Q1 -2023: 88th, n = 59 Q2 -2023: 97th, n = 97
Medical Practice Percentile	59th	75th	357	
Measures the satisfaction of pts. respondents at SPH Clinics.				Q1 -2023: 62nd, n = 358 Q2 -2023: 60th, n = 425
Ambulatory Surgery (AS) Percentile	77th	75th	57	
Measures the satisfaction of AS pts. respondents.				Q1 -2023: 67th, n = 75 Q2 -2023: 38th, n = 83
Home Health Care Percentile (HHC)	97th	75th	32	*Running 12 months due to low quarterly returns
Measures the overall satisfaction of HHC clients (<i>or family</i>) respondents.				Q1 -2023: 99th, n = 33 Q2 -2023: 99th, n = 29
Information System Solutions	3Q 2023	Target	n	Note
Eligible Hospital (EH) Promoting Interoperability: hospital-based measures for inpatient and observation stays.	78	> 60		CMS score 60 and above = pass
e-Prescribing: Electronic Prescribing (<i>Rx</i>)	8	10	352	290 of 352
Query PDMP	10	10		PDMP Query via EHR interface
Health Information Exchange: Support Electronic Referral Loops by receiving and incorporating health information	10	15	3	3 of 3
HIE: Suppt. Electronic Referral Loops by sending health info. (<i>Sum.of Care sent</i>)	3	15	174	44 of 174
Provider to patient exchange: Provide patients electronic access to their health information (<i>timely access via the patient portal</i>)	22	25	226	203 of 226
Public Health & Clinical Data Exchange	25	25	4	4 of 4
Eligible Provider (EP) - Promoting Interoperability (Group)	25	30 pts		Target quarterly for annual score
Merit Based Incentive Payment System Promoting Interoperability score (<i>MIPS tracking is in Athena</i>)				Promoting Interoperability for Providers: N/A * Athena hasn't calculated our score yet
Electronic Medical Record (EMR) Adoption Stage	5	5		
Health Information Management & Systems Society (<i>HIMSS</i>) Electronic Medical Record Adoption Model (<i>EMRAM</i>) stage.				The current US average is 2.4 out of a possible 7.0 stages. Stage 6 and 7 require site visit validation.

Information System Solutions (Continued)	3Q 2023	Target	n	Note
IT Security Awareness Training Complete Rate	85%	97%	1759	
% of employees who have completed assigned security training				1759 videos training sent, 1488 completed.
Phishing Test Pass Rate	99.1%	97%	2971	
% of Phishing test emails that were not failed.				2971 test phishing emails sent out to staff. 26 of the email links were clicked, causing 26 potential security risks.
<u>Medical Staff Alignment</u>				
South Peninsula Hospital desires to be an employer and/or provider of choice for medical staff practitioners by fostering an atmosphere of continuous collaboration.				
Provider Alignment	2021	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
<u>Employee Engagement</u>				
South Peninsula Hospital desires to be an employer of choice that offers our staff an opportunity to make positive impact in our community.				
Staff Alignment	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
Workforce	3Q 2023	Target	n	Note
Turnover: All Employees	3.3%	< 5%	582	
Percentage of all employees separated from the hospital for any reason				20 Terminations / 602 Total Employees
Turnover: Voluntary All Employees	2.98%	< 4.75%	582	
Measures the percentage of voluntary staff separations from the hospital				18 Voluntary Terminations / 605 Total Employees
First Year Total Turnover	4.8%	< 7%	121	
Measures the percentage of staff hired in the last 12 months and who separated from the hospital for any reason during the quarter.				6 New Staff Terminated in Q2 125 Total New Hires from - 10/1/2022-9/30/2023
Travel Nursing Utilization	19	< 20	86	
Measure total travel staff utilized in a previous quarter (Internal & External)				0-2023 - External: 0 / Internal: 0, Total: 0

Financial Health

SPH is financially positioned to support our dedication to the Mission, Vision and Values, and our continued investment in our employees, medical staff, physical plant and equipment.

Financial Health	3Q 2023	Target	n	Note
Operating Margin	8.89%	7.9%		
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	1,075.23	1001.98		
Measures the number of patients discharged, adjusted by inpatient revenues for the quarter divided by (<i>inpatient + outpatient revenues</i>).				Total Discharges: 191 (<i>Acute, OB, Swing, ICU</i>) (<i>LTC Revenue & discharges not included</i>)
Net Revenue Growth	15.9%	16.5%		
Measures the percentage increase (<i>decrease</i>) 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	8.47	7.80		
Measures the average number of staff FTEs per adjusted occupied bed for the quarter.				Target is based on budgeted paid hours (<i>FTE</i>) divided by (<i>budget gross patient revenue/budget gross inpatient rev</i>) X budgeted average daily census for the quarter.
Net Days in Accounts Receivable	51.0	55		
Measures the rate of speed with which the hospital is paid for health care services.				
Cash on Hand	92.4	90		113.5 Total Days Cash on Hand, Operating +Unobligated PREF
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	3.3%	2.5-3.5%		
Measures bad debt & charity write offs as a percentage of gross patient service revenue				Target is based on industry standards & SPH Payer Mix Budgeted total is 2.9% Expected range of 2.5-3.5%
Average Age of Plant	13.9	8 yrs.		
Average age of assets used to provide services				Target is based on hospital optimal age of plant.
Intense Market Focus to Expand Market Share	3Q 2023	Target	n	Note
Outpatient Revenue Growth	-5.4%	8%		
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 prior year.
Surgical Case Growth	26.1%	12.9%		
Measures the increase (<i>decrease</i>) 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.