



## **June 28, 2024, Board Packet Table of Contents**

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**Quality Committee Meeting**  
**Friday, June 28, 2024, 1:00 p.m.**  
**George M. Medak Conference Room, Suite 207**  
**MCH Medical Office Building, 29099 Hospital Road, Lake Arrowhead, CA 92352**

*Or*

**Microsoft Teams meeting**  
**Join on your computer, mobile app or room device**

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**Meeting ID: 234 601 921 58 / Passcode: MWdfbE**

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**Or call in (audio only): +1 951-384-1117,,605686207# United States, Riverside**

**Phone Conference ID: 605 686 207#**

Members:	Barry Hoy, Committee Chairperson	Gerry Hinkley, Committee Member
	Mark Turner, Chief Executive Officer	Terry Peña, COO/CNO
	Leslie Plouse, Quality Director	Jeri Simpson, Community Member

**OPEN SESSION**

1:00 p.m.

**CALL TO ORDER**

Barry Hoy, Committee Member

**PREVIOUS MINUTES**

Barry Hoy, Committee Member  
 Action Probable

**PUBLIC COMMENTS**

Government Code  
 Section 54954.3 Sections A & B

The public has the right to address the legislative body on any item of interest to the public.  
 A time restraint may be implemented at the discretion of the Committee Chairperson.

**CLOSED SESSION - AGENDA ITEMS**

(According to section: (54956.9))

- |                                  |   |
|----------------------------------|---|
| 1. Hospital Acquired Harm        | Leslie Plouse, Quality Director<br>Information Only |
| 2. Event Reports – Level of Harm | Leslie Plouse, Quality Director<br>Information Only |
| 3. Complaints                    | Leslie Plouse, Quality Director<br>Information Only |
| 4. USACS Dashboard               | Leslie Plouse, Quality Director<br>Information Only |

**RETURN TO OPEN SESSION**

**Quality Committee Meeting  
Friday, June 28, 2024, 1:00 p.m.**

- |                               |                             |
|-------------------------------|-----------------------------|
| 1. Closed Session Report      | Barry Hoy, Committee Member |
| 2. Public Report of Decisions | Barry Hoy, Committee Member |

**OPEN SESSION – AGENDA ITEMS**

- |                                |   |
|--------------------------------|---|
| 1. Performance Improvement     | Leslie Plouse, Quality Director<br>Information Only |
| 2. Patient Experience Surveys  | Leslie Plouse, Quality Director<br>Information Only |
| 3. Regulatory Activity/Updates | Leslie Plouse, Quality Director<br>Information Only |

**ADJOURNMENT**

San Bernardino Mountains Community Hospital Quality Committee Meetings

Attendance Matrix - 2024

Committee Members	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
Barry Hoy	√	<b>C A N C E L L E D</b>	√	√	√							<b>D A R K</b>
Gerry Hinkley	√		√	A	√							
Terry Peña	√		√	E	√							
Mark Turner	√		√	√	√							
Leslie Plouse	√		E	√	E							
Jeri Simpson	--		--	√	√							
Cheryl Moxley	√		--	--	--	--	--	--	--	--	--	
Julie Atwood	√		√	--	--	--	--	--	--	--	--	
Don Larsen	√		A	A	--	--	--	--	--	--	--	
<b>Comment:</b>												
	√	Present	E	Excused	A	Absent						

<b>TOPIC</b>	<b>DISCUSSION/CONCLUSION/RECOMMENDATION</b>	<b>ACTION/FOLLOW-UP</b>
<p>1.0 Members Present:</p> <p>Absent:</p> <p>Recording Secretary:</p> <p>Guests:</p>	<p>Barry Hoy, Committee Chairperson Gerry Hinkley, Committee Member Mark Turner, Member, Chief Executive Officer Terry Peña, Member, Chief Operating Officer/Chief Nursing Officer Jeri Simpson, Community Member</p> <p>Leslie Plouse, Member, Quality Director</p> <p>Kristi McCasland, Executive Assistant</p> <p>Kieth Burkart, Board President Cheryl Robinson, Board Vice President Barry Smart, Board Treasurer Yvonne Waggener, Chief Financial Officer Kim McGuire, Community Development Director Peter Venturini, Foundation President Gary Hicks, G.L. Hicks Financial</p>	<p><b>Quorum present</b></p>
2.0 Call to Order:	Hoy called the meeting to order at 1:05 p.m.	<b>The meeting was called to order</b>
3.0 Previous Minutes	On a motion made and seconded, the Quality Committee Meeting Minutes of April 25, 2024 were approved as written.	<p><b>On a motion made and seconded, the Quality Committee Meeting Minutes of April 25, 2024 were approved as written</b></p> <p><b>M (Turner) / S (Hoy) / C</b></p>
4.0 Public Comment:	There was no public comment noted at this time.	<b>None</b>
5.0 Adjourn to Closed Session:	The Quality Committee Adjourned to “Closed Session” at approximately 1:06 p.m.	<b>None</b>

<b>TOPIC</b>	<b>DISCUSSION/CONCLUSION/RECOMMENDATION</b>	<b>ACTION/FOLLOW-UP</b>
	<p><b><u>CLOSED SESSION ATTENDEES:</u></b></p> <p>Barry Hoy, Committee Chairperson            Gerry Hinkley, Committee Member            Mark Turner, Member, Chief Executive Officer            Terry Peña, COO/CNO            Jeri Simpson, Community Member            Kristi McCasland, Executive Assistant            Kieth Burkart, Board President            Cheryl Robinson, Board Vice President            Barry Smart, Board Treasurer</p>	
6.0 Return to Open Session:	The Committee returned to “Open Session” at approximately 1:17 p.m.	<b>None</b>
6.1 Closed Session Report:	Per Hoy, the following items were reported on during “Closed Session” – Hospital Acquired Harm; Event Reports-Levels of Harm; Complaints; and USACS Dashboard.	<b>Information only</b>
7.0 Agenda Items 7.1 Performance Improvement	Nothing to report at this time; item tabled.	<b>Information only</b>
7.2 Patient Surveys	<p>Peña reported on the following Patient Satisfaction Survey Results:</p> <ul style="list-style-type: none"> <li>• <u>Inpatient</u>: In April 2024, there were three responses, with a 66.67% top box score.</li> <li>• <u>ED</u>: In April 2024, there were 34 responses with an 86.25% top box score.</li> <li>• <u>RHC Medical</u>: In April 2024, there were nine responses with a 70.15% top box score.</li> <li>• <u>RHC Dental</u>: In April 2024, there were no responses received.</li> </ul>	<b>Information only</b>

<b>TOPIC</b>	<b>DISCUSSION/CONCLUSION/RECOMMENDATION</b>	<b>ACTION/FOLLOW-UP</b>
7.3 Regulatory Activity/Updates	<p>Peña reported on the following Regulatory Activities and Updates:</p> <ul style="list-style-type: none"> <li>• <u>TJC Lab Reaccreditation Survey: 5/3/2022-5/5/2022</u> Peña reviewed the outcome/status of the plan of correction items for March 2024.</li> <li>• <u>SNF CMS Life Safety Survey: 4/9/2024-4/10/2024</u> Peña reviewed the progress report for the plan of correction.</li> <li>• <u>TJC Lab Reaccreditation Survey: 4/2/2024-4/2/2024</u> Our plan of correction is due by 6/2/2024.</li> </ul>	<b>Information only</b>
7.4 SCORE Survey (Annual Employee Survey) Results	<p>Peña reviewed the SCORE Survey Summary Report. She noted that we had 211 respondents with a 78% response rate. Peña reviewed what the SCORE Survey measures; reasoning on why the response rate dropped from 2022-2024; MCH Culture-Overall Scores; MCH Engagement-Overall Scores; Notable Insights; Narrative Topics/Themes; and the Next Steps.</p>	<b>Information only</b>
8.0 Final Adjournment:	<p>There being no further business to discuss, the meeting was adjourned at approximately 1:37 p.m.</p>	<b>Meeting adjourned</b>



**Human Resources Committee Meeting**  
**Friday, June 28, 2024, 1:30 p.m.**  
**George M. Medak Conference Room, Suite 207**  
**MCH Medical Office Building, 29099 Hospital Road, Lake Arrowhead, CA 92352**

*Or*

**Microsoft Teams meeting**  
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**Meeting ID: 234 601 921 58 / Passcode: MWdfbE**

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**Or call in (audio only): +1 951-384-1117,,605686207# United States, Riverside**

**Phone Conference ID: 605 686 207#**

Members:	Kieth Burkart, Committee Chairperson Mark Turner, Chief Executive Officer Terry Peña, Chief Operating Officer Jeri Simpson, Community Member	Barry Smart, Committee Member Yesenia DeLaCruz, Human Resources Director Don Larsen, Committee Member
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**OPEN SESSION**

1:30 p.m.

**CALL TO ORDER**

Kieth Burkart, Committee Chairperson

**PREVIOUS MINUTES**

Kieth Burkart, President  
 Action Probable

**PUBLIC COMMENTS**

Government Code  
 Section 54954.3 Sections A & B

The public has the right to address the legislative body on any item of interest to the public.  
 A time restraint may be implemented at the discretion of the Committee Chairperson.

**AGENDA ITEMS**

- |  |  |
|--|--|
| 1. Hospital Week   | Yesenia De La Cruz, Human Resources Director<br>Information Only |
| 2. Annual Salary & Benefits Review                       | Yesenia De La Cruz, Human Resources Director<br>Information Only |
| 3. Turnover  | Yesenia De La Cruz, Human Resources Director<br>Information Only |
| 4. Workers Compensation Experience Modification (Ex-Mod) | Yesenia De La Cruz, Human Resources Director<br>Information Only |

**ADJOURNMENT**



San Bernardino Mountains Community Hospital Human Resource Committee Meetings

Attendance Matrix - 2024

Committee Members	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
Kieth Burkart	F A C I L I T I E S	M A R K E T I N G	√	F A C I L I T I E S	M A R K E T I N G		F A C I L I T I E S	M A R K E T I N G		F A C I L I T I E S	M A R K E T I N G	D A R K
Barry Smart			√									
Yesenia De La Cruz			√									
Terry Peña			√									
Mark Turner			√									
Don Larsen			A									
Gerry Hinkley			--									
<b>Comment:</b>												
	√	Present		E	Excused		A	Absent				

<b>TOPIC</b>	<b>DISCUSSION/CONCLUSION/RECOMMENDATION</b>	<b>ACTION/FOLLOW-UP</b>
<p>1.0 Members Present:</p> <p>Absent:</p> <p>Recording Secretary:</p> <p>Guests:</p>	<p>Keith Burkart, Committee Chairperson Barry Smart, Committee Member Mark Turner, Chief Executive Officer Terry Peña, Chief Operating Officer/Chief Nursing Officer Yesenia De La Cruz, Human Resource Director</p> <p>Don Larsen, Community Member</p> <p>Kristi McCasland, Executive Assistant</p> <p>Cheryl Robinson, Board Member Barry Hoy, Board Member Yvonne Waggener, Chief Financial Officer Kim McGuire, Foundation/Community Development Director Julie Atwood, Human Resources Consultant Gerry Hinkley, Board Member John McLaughlin, Public Jeri Simpson, Public</p>	<p><b>Quorum present</b></p>
2.0 Call to Order:	Burkart called the meeting to order at 1:23 p.m.	<b>The meeting was called to order</b>
3.0 Previous Minutes	On a motion made and seconded, the Human Resources Committee Meeting Minutes of September 28, 2023 were approved as written.	<p><b>On a motion made and seconded, the Human Resources Committee Meeting Minutes of September 28, 2023 were approved as written.</b></p> <p><b>M (Peña) / S (Turner) / C</b></p>
4.0 Public Comment:	There was not public comment at this time.	<b>None</b>
5.0 Agenda Items 5.1 2023 Turnover	De La Cruz reported that we currently have 266 employees; 75.56% of which live on the mountain (Crestline to Green Valley Lake); and	<b>Information Only</b>

<b>TOPIC</b>	<b>DISCUSSION/CONCLUSION/RECOMMENDATION</b>	<b>ACTION/FOLLOW-UP</b>
	24.44% who live in Big Bear or down the hill. In 2023, our turnover was at 12.08%.	
5.2 2023 Work Injuries	De La Cruz reported that in 2023 we had six reportable injuries, with 290 days lost and 238 days on the job with restrictions.	<b>Information Only</b>
5.3 Q1 2024 Turnover	De La Cruz reported that in Q1 2024 our turnover was 2.6% (3 terminations, 1 another job, 1 unable to meet per diem requirements).	<b>Information Only</b>
6.0 Final Adjournment:	There being no further business to discuss, the meeting was adjourned at approximately 1:33 p.m.	<b>Meeting adjourned</b>



**Finance Committee Meeting**  
**Friday, June 28, 2024, 1:45 p.m.**  
**George M. Medak Conference Room, Suite 207**  
**MCH Medical Office Building, 29099 Hospital Road, Lake Arrowhead, CA 92352**

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**Phone Conference ID: 605 686 207#**

Members: Barrick Smart, Committee Chairperson  
 Yvonne Waggener, Chief Financial Officer  
 Mark Turner, Chief Executive Officer

Barry Hoy, Committee Member  
 Terry Peña, Chief Operating Officer  
 Jeri Simpson, Community Member

**OPEN SESSION**

1:45 p.m.

**CALL TO ORDER**

Barry Smart, Committee Chairperson

**PREVIOUS MINUTES**

Barry Smart, Committee Chairperson  
 Action Probable

**PUBLIC COMMENTS**

Government Code  
 Section 54954.3 Sections A & B

The public has the right to address the legislative body on any item of interest to the public.  
 A time restraint may be implemented at the discretion of the Committee Chairperson.

**AGENDA ITEMS**

- |                                   |   |
|-----------------------------------|---|
| 1. Financial Statements           | Yvonne Waggener, Chief Financial Officer<br>Action Probable |
| 2. Capital Purchases              | Yvonne Waggener, Chief Financial Officer<br>Action Possible |
| 3. Investments                    | Yvonne Waggener, Chief Financial Officer<br>Action Possible |
| 4. FY25 Proposed Operating Budget | Yvonne Waggener, Chief Financial Officer<br>Action Possible |

**ADJOURNMENT**

## San Bernardino Mountains Community Hospital Finance Committee Meetings

### Attendance Matrix - 2024

Committee Members	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
Barry Smart	√	√	√	√	√							D A R K
Barry Hoy	√	√	√	√	√							
Yvonne Waggener	√	√	√	√	√							
Mark Turner	√	√	√	√	√							
Terry Peña	√	√	√	E	√							
Jeri Simpson	--	--	--	√	√							
Don Larsen	√	A	A	A	--	--	--	--	--	--	--	
Gerry Hinkley	√	√	--	--	--	--	--	--	--	--	--	
<b>Comment:</b>												
	√	Present	E	Excused	A	Absent						

<b>TOPIC</b>	<b>DISCUSSION/CONCLUSION/RECOMMENDATION</b>	<b>ACTION/FOLLOW-UP</b>
<p>1.0 Members Present:</p> <p>Absent:</p> <p>Recording Secretary:</p> <p>Guests:</p>	<p>Barrick Smart, Committee Chairperson Barry Hoy, Committee Member Yvonne Waggener, Member, Chief Financial Officer Mark Turner, Member, Chief Executive Officer Terry Peña, Member, Chief Operating Officer/Chief Nursing Officer Jerri Simpson, Community Member</p> <p>Kristi McCasland, Executive Assistant</p> <p>Keith Burkart, Board President Gerry Hinkley, Board Member Cheryl Robinson, Board Vice President Kim McGuire, Foundation/Community Development Director Peter Venturini, Foundation President Gary Hicks, G.L. Hicks Financial</p>	<p><b>Quorum present</b></p>
<p>2.0 Call to Order:</p>	<p>Smart called the meeting to order at 1:55 p.m.</p>	<p><b>The meeting was called to order</b></p>
<p>3.0 Previous Minutes:</p>	<p>On a motion made and seconded, the Finance Committee Meeting Minutes of April 25, 2024 were approved.</p>	<p><b>On a motion made and seconded, the Finance Committee Meeting Minutes of April 25, 2024 were approved as written.</b></p> <p><b>M (Hoy) / S (Turner) / C</b></p>
<p>4.0 Public Comment:</p>	<p>There was no public comment noted at this time.</p>	<p><b>None</b></p>
<p>5.0 Agenda Items: 5.1 Financial Statements</p>	<p>Waggener presented the FY24 Financial Statements as of and for the ten (10) months ended April 30, 2024. Comparative statistics and selected financial indicators were reviewed with the committee.</p>	<p><b>A motion was made and seconded to recommend to the Board to accept the Financial Statements as of ten (10) months ended April 30, 2024.</b></p>

TOPIC	DISCUSSION/CONCLUSION/RECOMMENDATION	ACTION/FOLLOW-UP
		<b>M (Peña) / S (Simpson) / C</b>
5.2 Capital Purchases	Waggener presented and reviewed the FY24 Capital Purchases for the ten (10) months ended April 30, 2024.	<b>Information Only</b>
5.3 Investments	Waggener presented and reviewed the LAIF and UBS statements as of April 30, 2024.	<b>Information Only</b>
5.4 USDA Financing Update: Acute Care Wing Project	G. Hicks reviewed the Supplementary Information: Schedules of Financial Ratios, Days Cash on Hand; Annual Debt Service Coverage; and Other Key Financial Ratios from the DRAFT Feasibility Study that is being prepared by WIPFLI. The data covers Years Ended 2019-2023 (historical) and Years Ended 2024-2030 (forecasted). He noted that the District would be required to infuse money into the Acute Care Wing project up front and that would reduce the District's leverage as well as reduce its liquidity from previously discussed levels. He noted the 72-page Feasibility Study DRAFT document was submitted last week to the USDA for their review, and we are awaiting their response/comments (he expects they will take about three weeks to respond). The plan is to submit the final Feasibility Study as part of the USDA application on or about June 25, 2024.	<b>Information Only</b>
5.5 Paying off Existing Debt: 2007 COPs & MOB Financing	After discussion, the committee made the motion to recommend to the Board to authorize paying off the 2007 COPs and 2016 MOB Financing (totaling around \$8M) on the interest payment date of August 1, 2024.	<b>A motion was made and seconded to recommend to the Board to authorize paying off the 2007 COPs and 2016 MOB Financing (totaling around \$8M) on the interest payment date of August 1, 2024.</b>  <b>M (Peña) / S (Simpson) / C</b>
6.0 Adjournment:	There being no further business to discuss, the meeting was adjourned at approximately 3:03 p.m.	<b>Meeting adjourned</b>

Mountains Community Hospital  
Key Financial Indicators

	AUDITED								BENCHMARKS	
	06/30/17	06/30/18	06/30/19	06/30/20	06/30/21	06/30/22	06/30/23	05/31/24	FAR WEST CAH	CA CAH
<b><u>LIQUIDITY</u></b>										
Days cash on hand - All sources	161	241	345	524	490	491	454	459	124	222
Cash	909,787	944,823	625,817	15,242,086	8,242,632	4,168,498	3,476,666	5,041,020		
Board Designated	8,523,608	14,377,594	21,688,045	20,192,855	29,295,456	35,578,908	37,472,583	38,988,818		
Total	9,433,395	15,322,417	22,313,862	35,434,941	37,538,088	39,747,406	40,949,249	44,029,838		
Days gross revenue in gross AR	58	57	55	49	62	52	57	60		
Days net revenue in net AR	41	33	43	33	41	37	37	36	70	41
Days expense in AP	32	23	25	29	29	42	22	27		
Current ratio	1.6	2.3	1.6	2.1	1.8	1.8	1.9	1.9		
Cash to debt	91%	155%	236%	303%	443%	498%	485%	594%		
<b><u>CAPITAL STRUCTURE</u></b>										
Long-term debt to capitalization	38%	28%	24%	25%	16%	14%	14%	12%		
<b><u>PROFITABILITY</u></b>										
Total margin	12%	26%	19%	17%	29%	14%	11%	12%		
<b><u>OTHER</u></b>										
Paid full time equivalents (FTE's)	165.66	177.25	183.31	176.66	185.49	182.08	195.86	201.71		
<b>BENCHMARK - FAR WEST</b>	The Industry Benchmark is from the Optum 2023 Almanac of Hospital Financial and Operating Indicators. The Benchmark Average is for Critical Access Hospitals in the Far West Region.									
<b>BENCHMARK - CA</b>	The California Benchmark is from the Flex Monitoring Team Data Summary Report #33, CAH Financial indicators Report: Summary of Indicators Medians by State, April 2023.									



Mountains Community Hospital  
Comparative Statistics

	Patient Days				Average Daily Census				ER Visits		Surgery	
	Acute	Swing	Hospital	SNF	Acute	Swing	Hospital	SNF	Month	Day	Endo	Surg
Jul-22	45	7	52	589	1.5	0.2	1.7	19.0	841	27	18	24
Aug-22	46	28	74	605	1.5	0.9	2.4	19.5	814	26	20	19
Sep-22	50	14	64	585	1.7	0.5	2.1	19.5	760	25	3	7
Oct-22	30	38	68	594	1.0	1.2	2.2	19.2	786	25	-	1
Nov-22	80	56	136	562	2.7	1.9	4.5	18.7	802	27	-	6
Dec-22	47	4	51	558	1.5	0.1	1.6	18.0	786	25	-	12
Jan-23	46	39	85	585	1.5	1.3	2.7	18.9	712	23	-	9
Feb-23	44	46	90	532	1.6	1.6	3.2	19.0	565	20	-	11
Mar-23	56	45	101	584	1.8	1.5	3.3	18.8	497	16	-	9
Apr-23	54	27	81	535	1.8	0.9	2.7	17.8	602	20	-	14
May-23	81	43	124	513	2.6	1.4	4.0	16.5	692	22	-	9
Jun-23	55	48	103	548	1.8	1.6	3.4	18.3	774	26	4	7
	634	395	1,029	6,790	1.7	1.1	2.8	18.6	8,631	24	45	128
	Patient Days				Average Daily Census				ER Visits		Surgery	
	Acute	Swing	Hospital	SNF	Acute	Swing	Hospital	SNF	Month	Day	Endo	Surg
Jul-23	41	54	95	589	1.3	1.7	3.1	19.0	874	28	4	7
Aug-23	59	13	72	607	1.9	0.4	2.3	19.6	786	25	7	16
Sep-23	80	38	118	570	2.7	1.3	3.9	19.0	725	24	2	17
Oct-23	60	3	63	599	1.9	0.1	2.0	19.3	739	24	9	12
Nov-23	61	8	69	587	2.0	0.3	2.3	19.6	649	22	3	12
Dec-23	44	-	44	620	1.4	-	1.4	20.0	868	28	5	6
Jan-24	65	31	96	620	2.1	1.0	3.1	20.0	760	25	7	19
Feb-24	62	59	121	563	2.1	2.0	4.2	19.4	615	21	3	15
Mar-24	44	50	94	589	1.4	1.6	3.0	19.0	688	22	2	7
Apr-24	41	4	45	578	1.4	0.1	1.5	19.3	651	22	2	12
May-24	43	39	82	620	1.4	1.3	2.6	20.0	828	27	5	11
	600	299	899	6,542	1.79	0.89	2.7	19.47	8,183	24.35	49	134
Budget May-24	93	62	155	605	3.0	2.0	5.0	19.5	744	24	12	19

Mountains Community Hospital  
Comparative Statistics

	Lab	Radiology Exams						PT	Rural Health Clinics				
	Tests	X Ray	CT	Mammo	DXA	US	Total	Visits	LA Med	LA Dent	LA Tele	RS Med	Total
Jul-22	7,502	632	276	52	9	107	1,076	642	480	259	221	89	1,049
Aug-22	7,644	635	256	74	23	100	1,088	792	506	291	236	177	1,210
Sep-22	6,523	584	238	51	12	119	1,004	615	395	245	240	140	1,020
Oct-22	6,566	594	206	94	19	102	1,015	722	413	247	244	126	1,030
Nov-22	6,815	575	184	99	23	83	964	715	379	196	213	102	890
Dec-22	5,970	592	203	78	19	93	985	635	337	204	235	97	873
Jan-23	5,784	577	191	37	8	94	907	623	374	227	223	88	912
Feb-23	4,897	488	153	46	13	63	763	526	322	183	196	74	775
Mar-23	3,813	450	148	19	5	62	684	378	278	108	198	54	638
Apr-23	6,309	574	203	55	11	92	935	678	361	264	199	91	915
May-23	6,569	611	210	64	7	97	989	811	483	284	217	106	1,090
Jun-23	6,118	606	244	63	26	119	1,058	810	449	272	224	104	1,049
	74,510	6,918	2,512	732	175	1,131	11,468	7,947	4,777	2,780	2,646	1,248	11,451
	Lab	Radiology Exams						PT	Rural Health Clinics				
	Tests	X Ray	CT	Mammo	DXA	US	Total	Visits	LA Med	LA Dent	LA Tele	RS Med	Total
Jul-23	6,374	643	241	68	20	111	1,083	690	422	227	214	77	940
Aug-23	6,514	675	277	77	21	127	1,177	838	472	288	233	160	1,153
Sep-23	6,075	648	256	49	25	115	1,093	723	363	192	220	110	885
Oct-23	5,042	588	228	46	13	101	976	827	310	283	236	120	949
Nov-23	4,929	500	198	78	20	84	880	767	382	274	204	134	994
Dec-23	4,940	569	207	89	20	87	972	644	367	203	199	64	833
Jan-24	6,230	651	285	73	14	126	1,149	722	440	225	230	130	1,025
Feb-24	4,770	552	200	66	17	94	929	606	360	213	294	123	990
Mar-24	6,235	625	190	53	20	104	992	740	432	283	268	141	1,124
Apr-24	5,558	506	217	78	10	129	940	729	277	305	268	122	972
May-24	6,315	645	262	63	27	136	1,133	744	424	250	275	147	1,096
	62,982	6,602	2,561	740	207	1,214	11,324	8,030	4,249	2,743	2,641	1,328	10,961
Budget May-24	6,200	615	220	70	16	102	1,023	650	500	250	230	120	1,100

## Fiscal Calendar JULJUN

**MOUNTAINS COMMUNITY HOSPITAL**  
**STATEMENT OF REVENUE AND EXPENSES**  
**MAY 2024**

	ACTUAL	BUDGET	VARIANCE	YTD ACTUAL	YTD BUDGET	YTD VARIANCE	FY BUDGET	FY REMAINING
REVENUE								
GROSS PATIENT SERVICE REVENUE	5,676,726	5,609,047	(67,679)	57,307,643	59,633,011	2,325,368	65,148,058	7,840,415
DEDUCTIONS FROM REVENUE								
CONTRACTUAL DISCOUNTS	3,419,492	3,619,884	(200,392)	34,595,049	38,384,724	(3,789,675)	41,944,608	(7,349,559)
BAD DEBT	200,000	85,000	115,000	1,109,000	900,000	209,000	983,000	126,000
CHARITY CARE	7,188	6,000	1,188	65,976	66,000	(24)	72,000	(6,024)
SUPPLEMENTAL REIMBURSEMENT	(869,475)	(904,000)	34,525	(10,905,093)	(8,124,000)	(2,781,093)	(8,254,000)	(2,651,093)
TOTAL DEDUCTIONS FROM REVENUE	2,757,205	2,806,884	(49,679)	24,864,932	31,226,724	(6,361,792)	34,745,608	(9,880,676)
NET PATIENT SERVICE REVENUE	2,919,521	2,802,163	(117,358)	32,442,711	28,406,287	(4,036,424)	30,402,450	(2,040,261)
OTHER OPERATING REVENUE	28,052	30,835	2,783	520,921	393,813	(127,108)	424,648	(96,273)
TOTAL REVENUE	2,947,573	2,832,998	(114,575)	32,963,632	28,800,100	(4,163,532)	30,827,098	(2,136,534)
OPERATING EXPENSES								
SALARIES & WAGES	1,657,384	1,650,880	6,504	17,768,143	17,727,190	40,953	19,351,540	(1,583,397)
EMPLOYEE BENEFITS	374,256	332,260	41,996	3,817,902	3,618,530	199,372	3,948,200	(130,298)
PROFESSIONAL FEES	311,791	222,790	89,001	2,828,256	2,410,680	417,576	2,683,885	144,371
SUPPLIES	250,707	271,180	(20,473)	2,807,387	2,965,330	(157,943)	3,257,650	(450,263)
PURCHASED SERVICES	101,113	67,160	33,953	879,200	884,550	(5,351)	976,710	(97,511)
RENT/LEASE	19,491	16,435	3,056	233,776	180,785	52,991	199,220	34,556
REPAIRS & MAINTENANCE	96,595	56,486	40,109	953,261	759,548	193,713	858,579	94,682
UTILITIES	45,707	56,630	(10,923)	577,942	595,930	(17,988)	648,560	(70,618)
INSURANCE	46,185	45,638	547	508,881	502,010	6,871	547,648	(38,767)
DEPRECIATION	199,600	199,600	0	1,973,600	1,973,600	0	2,173,200	(199,600)
OTHER OPERATING EXPENSE	147,025	113,618	33,407	1,369,909	1,832,903	(462,994)	2,010,594	(640,685)
TOTAL EXPENSES	3,249,854	3,032,677	217,177	33,718,257	33,451,056	267,201	36,655,786	(2,937,529)
INCOME (LOSS) FROM OPERATIONS	(302,281)	(199,679)	102,602	(754,625)	(4,650,956)	(3,896,331)	(5,828,688)	(5,074,063)
NON-OPERATING REVENUE (EXPENSE)								
DISTRICT TAX REVENUE	258,000	258,000	0	2,838,000	2,838,000	0	3,096,000	258,000
INVESTMENT INCOME (LOSS)	177,702	76,200	(101,502)	1,596,795	838,200	(758,595)	914,400	(682,395)
INTEREST EXPENSE	(41,128)	(41,079)	49	(482,007)	(481,389)	618	(522,182)	(40,175)
DONATIONS/GRANTS FOR PROGRAMS	229,382	223,000	(6,382)	514,599	506,000	(8,599)	952,000	437,401
GAIN (LOSS) ON DISPOSAL OF PROPERTY	0	0	0	0	0	0	0	0
OTHER NON-OPERATING REVENUE	40,255	35,960	(4,295)	424,801	396,460	(28,341)	432,570	7,770
OTHER NON-OPERATING EXPENSE	18,090	(28,215)	(46,305)	(329,889)	(324,565)	5,324	(353,580)	(23,691)
NON-OPERATING REVENUE (EXPENSE)	682,301	523,866	(158,435)	4,562,299	3,772,706	(789,593)	4,519,208	(43,091)
NET INCOME (LOSS)	380,019	324,187	(55,832)	3,807,674	(878,250)	(4,685,924)	(1,309,480)	(5,117,154)

Fiscal Calendar JULJUN

**MOUNTIANS COMMUNITY HOSPITAL  
 BALANCE SHEET**

	05/31/24	06/30/23
<b>CURRENT ASSETS:</b>		
CASH & CASH EQUIVALENTS	5,041,020	3,490,303
RECEIVABLES: PATIENT - NET	3,518,481	3,211,642
RECEIVABLES: OTHER	162,362	81,856
INVENTORY	802,250	760,938
CURRENT PORTION OF LEASES RECEIVABLE	209,828	209,828
RECEIVABLES: INTERCOMPANY	309	0
PREPAID EXPENSES & DEPOSITS	755,548	590,636
	-----	-----
<b>TOTAL CURRENT ASSETS</b>	<b>10,489,798</b>	<b>8,345,204</b>
<b>ASSETS LIMITED AS TO USE - COP INVESTMENTS</b>		
ASSETS LIMITED AS TO USE - FUNDED DEPRECIATION	250,755	250,955
CAPITAL ASSETS - NET	38,988,818	37,472,583
OTHER ASSETS	19,881,807	18,796,112
	2,382,133	2,382,133
	-----	-----
<b>TOTAL ASSETS</b>	<b>71,993,311</b>	<b>67,246,987</b>
	=====	=====
<b>CURRENT LIABILITIES:</b>		
CURRENT PORTION LONG-TERM DEBT	1,099,403	1,036,629
ACCOUNTS PAYABLE & ACCRUED EXPENSES	1,109,875	907,080
ACCRUED PAYROLL & RELATED LIABILITIES	1,523,392	1,357,135
ACCRUED INTEREST	130,769	173,599
ESTIMATED THIRD-PARTY SETTLEMENTS, NET	528,355	199,284
UNEARNED REVENUE	51,854	41,221
PATIENT CREDIT BALANCES	1,159,368	627,197
	-----	-----
<b>TOTAL CURRENT LIABILITIES</b>	<b>5,603,016</b>	<b>4,342,144</b>
<b>LONG-TERM PORTION OF DEBT</b>		
DEFERRED INFLOWS - LEASES	7,406,700	8,445,994
	2,591,961	2,591,961
	-----	-----
<b>TOTAL LIABILITIES</b>	<b>15,601,677</b>	<b>15,380,099</b>
<b>NET ASSETS</b>	<b>56,391,634</b>	<b>51,866,889</b>
	-----	-----
<b>TOTAL LIABILITIES &amp; NET ASSETS</b>	<b>71,993,311</b>	<b>67,246,987</b>
	=====	=====

<b>FY24 CAPITAL BUDGET &amp; ASSET ADDITIONS AS OF 05/31/24</b>					
<b>Department</b>	<b>Item Description - CONSTRUCTION</b>	<b>Budget</b>	<b>Done</b>	<b>Actual</b>	<b>Funding (MCHF)</b>
FACILITIES	Pharmacy Relocation (Includes Hood)	900,000		254,274	
FACILITIES	Front of House & Gift Shop	565,000		253,192	514,500
FACILITIES	Seismic NPC3 (Anchor Equipment) & SPC 4D	200,000		23,452	
FACILITIES	Minor Use Permit (Parking Structure, Education Center, Acute Care Wing)	150,000		-	
FACILITIES	New Acute Care Wing	75,000		346,087	
FACILITIES	MOB Improvements	130,000		35,873	
FACILITIES	SNF Nurses' Station	50,000			
FACILITIES	Seal & Stripe Parking Lot	48,000	X	28,662	
FACILITIES	Keyless Entry Doors	45,000		6,055	
FACILITIES	Front of House & Med Surg HVAC	40,000		21,148	
FACILITIES	Chemistry Analyzers (2) Construction	25,000		31,682	
FACILITIES	Hospital Exterior Paint	25,000		9,984	
FACILITIES	OR Doors	20,000	X	14,246	
FACILITIES	MOB Electrical Panel	15,000			
FACILITIES	Med Surg Nursing Station (Pyxis)	10,000		1,710	
EVS	Soiled Linen Enclosure	6,500	X	6,350	
FACILITIES	RHC LA Interior Remodel/Retrofit	275,000		23,925	50,000
FACILITIES	SNF Renovations	150,000		17,706	
FACILITIES	Surgery Water Filtration System Construction	20,000			
FACILITIES	Med Surg Windows	200,000			
FACILITIES	SNF Windows	200,000			
FACILITIES	Hospital & MOB Flooring	75,000			
FACILITIES	Parking Lot Expansion	100,000			
FACILITIES	SNF Fence	24,000			
FACILITIES	PFS Remodel	125,000			
FACILITIES	Second Floor Remodel	60,000			
FACILITIES	Education Center	-			476,735
FACILITIES	Parking Solution	-			
		<b>\$ 3,533,500</b>		<b>\$ 1,074,346</b>	<b>\$ 1,041,235</b>

<b>FY24 CAPITAL BUDGET &amp; ASSET ADDITIONS AS OF 05/31/24</b>					
<b>Department</b>	<b>Item Description - EQUIPMENT</b>	<b>Budget</b>	<b>Done</b>	<b>Actual</b>	<b>Funding (MCHF)</b>
ED/MS/OR/SNF	Telemetry Monitoring Equipment	700,000	X	842,469	
IT	EHR System (Meditech Expanse)	600,000	X	170,220	
FACILITIES	Nurses' Call System	285,000			
IT	Voice & Messaging System	165,000		155,124	163,000
FACILITIES	Hospital Camera System	150,000			
ED/MS/OR/SNF	IV Pumps	104,000	X	108,205	109,300
FACILITIES	Fire Suppression (Server Room)	100,000			
FACILITIES	Patient Transfer Vehicle	90,000	X	88,839	90,000
ED/MS/OR/SNF	Defibrillators (4)	85,000	X	82,876	
FACILITIES	Chiller	80,000			
LAB	Coagulation Analyzer	67,000	X	53,875	
FACILITIES	Tractor	56,000			
IT	Med Surg & SNF IDF Cabinets	55,000	X	39,789	
IT	Microsoft Veem Cloud Backup	35,000	X	23,860	
IT	Cisco Firewalls	30,000		46,253	
IT	Cisco Catalyst Network Switches & Wireless Controller	32,000		34,348	
ED	Carbon Monoxide Monitor	8,000	X	7,426	
RESP	Blood Gas Analyzer	8,000			
DIET	Worktop Freezer	6,000			
FACILITIES	ER Exam Lights	50,000			
LAB	Phlebotomy Carts (2)	19,000			
EVS	ECH20 Scrubber	12,500			
EVS	T1B Scrubber for OR	7,300			
EVS	i-Mop	6,700			
FACILITIES	Storage Containers	60,000			
FACILITIES	Utility Vehicle	30,000			
OR	Endoscopes	28,000			
OR	Endoscope System	400,000	X	396,652	
ANESTH	Anesthesia Machines	146,000			
RESP	EKG Machine	15,000			
		<b>\$ 3,430,500</b>		<b>\$ 2,049,934</b>	<b>\$ 362,300</b>
		<b>\$ 6,964,000</b>		<b>\$ 3,124,280</b>	<b>\$ 1,403,535</b>
<b>Not Budgeted</b>					
MED SURG	Blanket Warmer		X	8,740	
DIET	Reach In Freezer		X	9,477	
LAB	Freezer (2)		X	15,872	
FACILITIES	MOB Boilers (2)		X	15,604	
FACILITIES	MOB Elevator Doors		X	28,485	
				<b>\$ 3,202,459</b>	

ASSUMPTIONS FOR GROSS CHARGES

REVENUE CENTER	STATISTIC	FY25 BUDGET	FY25 FEASIBILITY	FY24 ACTUAL
ACUTE BEDS	ADC	1.94	1.94	1.79
SWING BEDS	ADC	.90	.73	.89
SNF BEDS	ADC	19.68	19.69	19.47
EMERGENCY	VISITS PER DAY	25.60	25.61	24.35
RHC LA MEDICAL	VISITS PER MO	400	403	386
RHC LA DENTAL	VISITS PER MO	250	243	249
RHC LA TELE	VISITS PER MO	240	221	240
RHC RS MEDICAL	VISITS PER MO	120	114	121
SURGERY CASES	CASES PER MO	15	18	12
SURGERY ENDO	CASES PER MO	4	8	4
LABORATORY	TESTS PER MO	5,783	5,783	5,726
RADIOLOGY XR	EXAMS PER MO	616	616	600
RADIOLOGY CT	EXAMS PER MO	244	244	233
RADIOLOGY MG	EXAMS PER MO	70	70	67
RADIOLOGY BD	EXAMS PER MO	19	19	19
RADIOLOGY US	EXAMS PER MO	108	108	110
REHAB PT	VISITS PER MO	768	792	730

ASSUMPTIONS FOR DEDUCTIONS FROM REVENUE

CATEGORY	DESCRIPTION	FY25 BUDGET	FY25 FEASIBILITY	FY24 ACTUAL
CONTRACTUAL DISCOUNT	JULY THROUGH NOVEMBER	61%	62.4% (annual)	60.4% (annual)
CONTRACTUAL DISCOUNTS	DECEMBER THROUGH JUNE	63%	62.4% (annual)	60.4% (annual)
BAD DEBT EXPENSE	PERCENT OF GROSS CHARGES	1.8%	1.4%	1.8%
CHARITY CARE	PERCENT OF GROSS CHARGES	.1%	.1%	.1%
SUPPLEMENTAL REIMBURSEMENT	MEDI-CAL MGD RATE RANGE	\$7,145,000	\$7,145,000	\$7,145,000
SUPPLEMENTAL REIMBURSEMENT	MEDI-CAL MGD HQAF	\$700,000	\$700,000	\$1,368,000
SUPPLEMENTAL REIMBURSEMENT	MEDI-CAL MGD QIP	\$1,600,000	\$1,500,000	\$1,592,000
SUPPLEMENTAL REIMBURSEMENT	MEDI-CAL MGD P4P	\$785,875	\$177,574	\$537,000
SUPPLEMENTAL REIMBURSEMENT	MEDI-CAL TRAD INPATIENT	\$190,000	\$144,028	\$410,000
SUPPLEMENTAL REIMBURSEMENT	MEDI-CAL TRAD OUTPATIENT	\$200,000	\$212,570	\$283,000
SUPPLEMENTAL REIMBURSEMENT	DIRECTED PAYMENTS	\$350,000	\$350,000	N/A

ASSUMPTIONS FOR OPERATING EXPENSES

CATEGORY	DESCRIPTION
SALARIES AND WAGES	INCLUDES MARKET ADJUSTMENTS, MERIT INCREASES AND GROWTH IN FTES
EMPLOYEE BENEFITS	INCLUDES EMPLOYER SHARE OF FICA, UNEMPLOYMENT, HEALTH BENEFITS (10% INCREASE EFFECTIVE JANUARY 1 <sup>ST</sup> ), RETIREMENT (4% OF WAGES FOR ELIGIBLE EMPLOYEES), WORKERS COMPENSATION AND OTHER (EMPLOYEE EVENTS)
PROFESSIONAL FEES	INCLUDES MEDICAL DIRECTORS, VARIOUS PROVIDERS (RHC), PROVIDERS ON-CALL FOR THE ED, ED GROUP FEES, RADIOLOGISTS FEES, AUDIT, CONSULTING, LEGAL, REGISTRY
SUPPLIES	INCLUDES MEDICAL SUPPLIES, PHARMACEUTICALS, FOOD, CLEANING SUPPLIES, OFFICE SUPPLIES, MINOR EQUIPMENT BELOW THE CAPITALIZATION THRESHOLD
PURCHASED SERVICES	INCLUDES LAB SEND OUTS, PHARMACY AFTER HOURS COVERAGE, LINEN SERVICE, FLOOR CARE, LANDSCAPING, SNOW PLOW
RENT	INCLUDES COPIERS AND VARIOUS EQUIPMENT
REPAIRS AND MAINTENANCE	INCLUDES VARIOUS PREVENTATIVE MAINTENANCE AGREEMENTS AND REPAIRS NOT COVERED BY AGREEMENTS
UTILITIES	INCLUDES ELECTRICITY, GAS, WATER, INTERNET, TRASH
INSURANCE	INCLUDES PROPERTY AND CONTENTS, CYBER, POLLUTION, BUSINESS INTERRUPTIONS, AUTO, WORK PLACE VIOLENCE, COMMERCIAL CRIME FIDUCIARY LIABILITY
DEPRECIATION	BUILDING AND EQUIPMENT
OTHER OPERATING EXPENSES	INCLUDES SUBSCRIPTION AGREEMENTS, TRAINING, RECRUITING, ADVERTISING

ASSUMPTIONS FOR NON-OPERATING REVENUE AND EXPENSES

CATEGORIES	DESCRIPTION
DISTRICT TAX REVENUE	RECOGNIZE RATABLY THROUGHOUT THE YEAR
INVESTMENT INCOME	LAIF AND UBS INVESTMENTS (INCLUDES UNREALIZED)
INTEREST EXPENSE	2007 COPS AND 2016 MOB FINANCING PAID OFF AUGUST 1, 2024
LOSS (UNAMORTIZED BOND DISCOUNT)	LOSS RECOGNIZED AUGUST 1, 2024
DIRECT GRANTS	WILL RECEIVE 5 DIRECT GRANTS IN FY25
OTHER NON-OPERATING REVENUE	MOB AND CELL TOWER RENT
OTHER NON-OPERATING EXPENSES	MOB EXPENSES



SAN BERNARDINO MOUNTAINS COMMUNITY HOSPITAL DISTRICT - FY25 OPERATING BUDGET

	FY25 PROPOSED	FY24 ESTIMATED
REVENUE		
GROSS PATIENT SERVICE REVENUE	66,354,351	62,722,690
DEDUCTIONS FROM REVENUE	62.37%	60.4%
CONTRACTUAL DISCOUNTS	41,387,608	37,904,933
BAD DEBT	999,000	1,292,000
CHARITY CARE	72,000	71,976
SUPPLEMENTAL REIMBURSEMENT	(11,090,875)	(11,314,710)
	-----	-----
TOTAL DEDUCTIONS FROM REVENUE	31,367,733	27,954,199
	-----	-----
NET PATIENT SERVICE REVENUE	34,986,618	34,768,491
OTHER OPERATING REVENUE	534,764	579,070
	-----	-----
TOTAL REVENUE	35,521,382	35,347,561
OPERATING EXPENSES		
SALARIES & WAGES	20,965,903	19,399,493
EMPLOYEE BENEFITS	4,716,721	4,210,472
PROFESSIONAL FEES	2,837,108	3,367,261
SUPPLIES	3,548,230	3,092,942
PURCHASED SERVICES	1,087,931	1,011,360
RENT/LEASE	271,496	257,211
REPAIRS & MAINTENANCE	879,886	1,082,292
UTILITIES	644,100	630,572
INSURANCE	555,680	554,519
DEPRECIATION	2,547,000	2,173,200
OTHER OPERATING EXPENSE	1,581,411	1,588,600
	-----	-----
TOTAL EXPENSES	39,635,466	37,367,922
	-----	-----
LOSS FROM OPERATIONS	(4,114,084)	(2,020,361)
NON-OPERATING REVENUE (EXPENSE)		
DISTRICT TAX REVENUE	3,150,000	3,116,000
INVESTMENT INCOME (LOSS)	1,262,000	1,777,995
INTEREST EXPENSE	(91,679)	(522,800)
LOSS ON EXTINGUISHMENT OF DEBT	(195,208)	-
DONATIONS/GRANTS FOR PROGRAMS	1,122,910	514,599
GAIN (LOSS) ON DISPOSAL OF PROPERTY	-	-
OTHER NON-OPERATING REVENUE	483,041	460,911
OTHER NON-OPERATING EXPENSE	(374,110)	(358,904)
	-----	-----
NON-OPERATING REVENUE (EXPENSE)	5,356,954	4,987,801
	-----	-----
NET INCOME	1,242,870	2,967,440
	=====	=====



**“Mountains Community Hospital makes possible essential quality medical services to the residents and visitors of the local mountains.”**

**DISTRICT BOARD OF DIRECTORS MEETING**

**Friday, June 28, 2024, 2:45 p.m.**

**George M. Medak Conference Room, Suite 207**

**MCH Medical Office Building, 29099 Hospital Road, Lake Arrowhead, CA 92352**

*Or*

**Microsoft Teams meeting**

[Click here to join the meeting](#)

**Meeting ID: 234 601 921 58 / Passcode: MWdfbE**

**Or call in (audio only): [+1 951-384-1117](tel:+19513841117).,605686207# United States, Riverside**

**Phone Conference ID: 605 686 207#**

Members:	Kieth Burkart, President Barry Hoy, Secretary Gerald Hinkley, Director	Cheryl Robinson, Vice President Barrick Smart, Treasurer
Staff Members:	Mark Turner, Chief Executive Officer Bijan Motamedi, M.D., MEC President Kim McGuire, Community Development Director	Terry Peña, Chief Operating Officer Yvonne Waggener, Chief Financial Officer Kristi McCasland, Executive Assistant

**OPEN SESSION**

2:45 p.m.

**CALL TO ORDER**

Kieth Burkart, President

**PRESIDENTS COMMENTS**

Kieth Burkart, President  
Action Possible

**BOARD MEMBER REPORTS**

All Board Members

**PUBLIC COMMENTS**

Government Code  
Section 54954.3 Sections A & B

The public has the right to address the legislative body on any item of interest to the public.  
 A time restraint may be implemented at the discretion of the Board President.

**PREVIOUS MINUTES approval**

Kieth Burkart, President  
Action probable

**CONSENT AGENDA**

Kieth Burkart, President  
Action Probable

(Motion will be made to include all items listed)

1. Approval of Quality Committee minutes, meeting held May 23, 2024
2. Approval of Human Resources Committee minutes, meeting held March 28, 2024
3. Approval of Finance Committee minutes, meeting held May 23, 2024
4. Approval of the revised Policies and Procedures list that was sent June 17, 2024

**DISTRICT BOARD OF DIRECTORS MEETING**  
**Friday, June 28, 2024 2:45 p.m.**

Page 2 of 3

**AGENDA ITEMS**

- |  |   |
|--|---|
| 1. Legislative Update  | Megan Barajas, HASC, Regional VP<br>Information Only        |
| 2. Recommendation of Design Build Team Contract Award                          | Mark Turner, Chief Executive Officer<br>Action Possible     |
| 3. Resolution 2024-05 – Special Tax Levies for FY2024-25                       | Yvonne Waggener, Chief Financial Officer<br>Action Probable |
| 4. Resolution 2024-06 – Establishing Appropriations Limits for FY 2024-2025    | Yvonne Waggener, Chief Financial Officer<br>Action Possible |
| 5. Agreement for Collection of Special Taxes, Fees & Assessments for FY2024-25 | Yvonne Waggener, Chief Financial Officer<br>Action Probable |
| 6. CEO Report  | Mark Turner, Chief Executive Officer                        |
| a. Mission Moment  | Action Possible   |
| b. Internal Construction Updates   | Information Only  |
| c. Acute Care Wing Construction Updates  | Information Only  |
| d. Insurance Renewals  | Information Only  |
| 7. COO/CNO Report  | Terry Peña, Chief Operating Officer<br>Information only     |
| 8. Quality Committee Report<br>Report of Meeting held June 28, 2024            | Barry Hoy, Chairperson<br>Information Only                  |
| 9. Human Resources Committee Report<br>Report of Meeting held June 28, 2024    | Kieth Burkart, Chairperson<br>Information only              |
| 10. Finance Committee Report<br>Report of Meeting held June 28, 2024           | Barry Smart, Chairperson                                    |
| a. Financial Statements  | Action Probable   |
| b. Capital Purchases   | Action Possible   |
| c. Investments   | Action Possible   |
| d. FY25 Proposed Operating Budget  | Action Possible   |
| 11. Board Education  | Kieth Burkart, President                                    |
| a. MCH Board Member Annual Education (Relias)                                  | Information Only  |
| b. AHA Rural Health Care Leadership Conference<br>– February 23-26, 2025       |   |
| 12. Discussion Topic Suggestions   | Kieth Burkart, President                                    |

**ADJOURN TO CLOSED SESSION**

**DISTRICT BOARD OF DIRECTORS MEETING**  
**Friday, June 28, 2024 2:45 p.m.**

**CLOSED SESSION AGENDA ITEMS**

(Closed session pursuant to Govt. Code Section 54954.5

- |   |   |
|---|---|
| 1. <u>Hearings</u><br>Subject matter: Staff Privileges<br>Re: Credentialing Recommendations<br>Closed session pursuant to Cal. Health & Safety § 32155                              | Bijan Motamedi, M.D., MEC President<br>Action Probable  |
| 2. <u>Medical Executive Committee Report</u><br>Subject Matter: Report of Medical Executive Committee<br>Meeting minutes<br>Closed session pursuant to Cal. Health & Safety § 32155 | Bijan Motamedi, M.D., MEC President<br>Information only |

**RETURN TO OPEN SESSION**

- |                               |                          |
|-------------------------------|--------------------------|
| 1. Closed Session Report      | Kieth Burkart, President |
| 2. Public Report of Decisions | Kieth Burkart, President |

**NEXT BOARD-ATTENDED MEETINGS**

Regular Board of Directors Meeting:  
Thursday, July 25, 2024 at 1:00 p.m.  
*(Days & times are subject to change so please refer to the posted agenda for exact times)*

**FINAL ADJOURNMENT**

**San Bernardino Mountains Community Hospital Board of Directors Meetings**

**Attendance Matrix - 2024**

<b>Meeting Dates</b>	1/12/2024**	1/25/2024*	2/22/2024**	2/29/2024*	3/28/2024*	4/15/2024**	4/25/2024*	5/23/2024*	6/7/2024**	6/28/2024*	7/25/2024*	8/29/2024*	9/26/2024*	10/24/2024*	11/21/2024*	DEC*
<b>Board Members</b>																
<b>Kieth Burkart</b>	√	√	√	√	√	√	√	√	√							
<b>Cheryl Robinson</b>	√	√	√	√	√	√	√	√	√							
<b>Barry Hoy</b>	√	√	√	√	√	√	√	√	√							
<b>Barrick Smart</b>	JC	√	√	√	JC	√	√	√	A							
<b>Gerald Hinkley</b>	--	--	--	√	√	√	A	√	√							
<b>Cheryl Moxley</b>	√	√	--	--	--	--	--	--	--	--	--	--	--	--	--	
<b>Staff Members</b>																
<b>Mark Turner</b>	√	√	√	√	√	√	√	√	√							
<b>Terry Peña</b>	√	√	√	√	√	--	E	√	√							
<b>Yvonne Waggener</b>	√	√	√	√	√	√	√	√	√							
<b>Julie Atwood</b>	√	√	E	√	√	--	--	--	--	--	--	--	--	--	--	
<b>Kim McGuire</b>	√	√	E	E	√	--	√	√	√							
<b>Kristi McCasland</b>	√	√	E	√	√	√	√	√	E							
<b>Bijan Motamedi, M.D.</b>	E	√	E	E	√	--	√	√	--							
<b>Lawrence Walker, M.D.</b>	--	--	--	√	--	--	--	--	--							
<b>Comments</b>	* Regular Board of Directors Meeting / ** Special Board of Directors Meeting															
	√	Present	JC	Board Member Attended Remotely Under AB2449 "Just Cause" Provisions	EC	Board Member Attended Remotely Under AB2449 "Emergency Circumstances"										
	E	Excused	A	Absent												

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<b>TOPIC</b>	<b>DISCUSSION/CONCLUSION/RECOMMENDATION</b>	<b>ACTION/FOLLOW-UP</b>
1.0 Call to Order:	Kieth Burkart, Board President, called the Board of Directors meeting to order at approximately 3:04 p.m.	<b>The meeting was called to order</b>
2.0 Board Members Present:  Members Absent:  Recording Secretary  Staff Members Present:  Guests:	Kieth Burkart, Board President Cheryl Robinson, Vice President Barrick Smart, Board Treasurer Barry Hoy, Board Secretary Gerry Hinkley, Board Director  Kristi McCasland, Executive Assistant  Mark Turner, Chief Executive Officer Terry Peña, Chief Operating Officer/Chief Nursing Officer Yvonne Waggener, Chief Financial Officer Kim McGuire, Foundation/Community Development Director Bijan Motamedi, M.D., MEC Chief of Staff  Jeri Simpson, Community Member Peter Venturini, Foundation President	<b>Quorum present</b>
3.0 President's Comments:	Burkart discussed the history of the temporary paving of Hospital Road. It was noted that our land use attorney is working with the county to get the land use parcels cleaned up.	<b>None</b>
4.0 Board Member's Reports:	None	<b>None</b>
5.0 Public Comments:	Simpson noted that she is impressed by how well the hospital's finances are managed; kudos to the CFO and CEO.	<b>None</b>
6.0 Previous Minutes:	On a motion made and seconded the Minutes from the Board of Directors meeting of April 25, 2024 were approved as written.	<b>On a motion made and seconded the Minutes from the Board of Directors meeting of April 25,</b>

TOPIC	DISCUSSION/CONCLUSION/RECOMMENDATION	ACTION/FOLLOW-UP
		<p><b>2024 were approved as written.</b></p> <p><b>M (Smart) / S (Robinson) / C</b></p> <p><b>5 Ayes / 0 Nays / 0 Abstain / 0 Absent</b></p>
<p>7.0 Consent Agenda:</p>	<p>The following Consent Agenda items were reviewed:</p> <ol style="list-style-type: none"> <li>1. Approval of the Quality Committee minutes, meeting held April 25, 2024.</li> <li>2. Approval of Marketing Committee minutes, meeting held February 29, 2024.</li> <li>3. Approval of the Finance Committee minutes, meeting held April 25, 2024.</li> <li>4. Approval of the revised list of Policies and Procedures that was sent May 14, 2024 (<i>see list attached to the May Board Packet</i>).</li> </ol>	<p><b>On a motion made and seconded, the Consent Agenda items were approved as presented.</b></p> <p><b>M (Robinson) / S (Smart) / C</b></p> <p><b>5 Ayes / 0 Nays / 0 Abstain / 0 Absent</b></p>
<p>8.0 Agenda 8.1 FY 2023-2024 Annual Patient Care Contracted Evaluations</p>	<p>Turner presented the FY2023-2024 Patient Care Contracted Services Evaluation Summary. Turner noted that it is a regulatory requirement to review patient care contracts annually. He noted that through the evaluation process, one vendor (Sol Radiology) was rated as “improvement required”. Sol’s contract is up for renewal at the end of this month. Discussion was held at the Medical Executive Committee (MEC) earlier this week to get their input; the MEC recommended renewing Sol Radiology’s contract for 180 days to allow them time to improve.</p>	<p><b>On a motion made and seconded, the board recommended approving the FY 2023-2024 Patient Care Contracted Services Evaluation, as presented, and to extend the Sol Radiology contract for 180-days to allow them time to improve.</b></p> <p><b>M (Hoy) / S (Robinson) / C</b></p> <p><b>5 Ayes / 0 Nays / 0 Abstain / 0 Absent</b></p>
<p>8.2 CEO Report a. Mission Moment</p>	<p>Turner reported that he needs time to inform the workforce and develop a process to implement the Mission Moment; he should have an update to present at the July 2024 Board meeting.</p>	<p><b>Information only</b></p>

<b>TOPIC</b>	<b>DISCUSSION/CONCLUSION/RECOMMENDATION</b>	<b>ACTION/FOLLOW-UP</b>
b. Construction Updates	<p>Turner reported on the following construction projects:</p> <ul style="list-style-type: none"> <li>• Eligibility Office Project: This project is close to being done. The only thing pending is the air balancing; once resolved HCAI will come to inspect and hopefully grant occupancy.</li> <li>• Pharmacy Project: This project is moving along. We are hoping this project will be done by the end of the calendar year.</li> <li>• Gift Shop/Solarium: HCAI is still completing their second review of the project.</li> <li>• Solarium: We will be engaging an interior designer this summer to make the Solarium more inviting (lighting, fixtures, furniture, etc.).</li> <li>• RHC Remodel: Awaiting county permits for this project; this project will be planned in phases so to not disrupt the clinic operations.</li> <li>• Parking Solution: We are hoping to construct temporary parking on the flat land below the hospital sometime this summer. Our land use attorney is working with the county to determine what permit we need to construct the temporary parking.</li> <li>• New Acute Care Wing / Retrofit / SNF Wing Project: We are expecting bids from two Design Builder (DB) firms with their “not to exceed” pricing. Bids are due by June 6<sup>th</sup> and we will have 10 days to analyze/accept a bid.</li> </ul>	<b>Information only</b>
c. Construction Financing Update	<p>Turner reported that G. Hicks from G.L. Hicks Financial provided a USDA Financing Update: Acute Care Wing Project was provided at the 5/23/2024 Finance Committee Meeting (see 8.6.d. below). A Special Board of Directors meeting has been scheduled for June 21<sup>st</sup> so the Board can approve the USDA application prior to submission.</p>	<b>Information only</b>
8.3 COO/CNO Report	<p>Peña reported on the follow items:</p> <ol style="list-style-type: none"> <li>1. <u>BETA Heart</u>: We achieved our goal of <math>\geq 75\%</math> response rate on the annual BETA Heart employee satisfaction SCORE survey. Managers will be debriefed on the results on June 10; departments will be debriefed by June 30; departmental plans of corrections will</li> </ol>	<b>Information only</b>



TOPIC	DISCUSSION/CONCLUSION/RECOMMENDATION	ACTION/FOLLOW-UP
	<p>be developed based upon the staff's feedback.</p> <ol style="list-style-type: none"> <li>2. <u>BETA Heart "Culture of Safety" Validation Survey</u>: BETA conducted a "Culture of Safety" validation survey on May 13; and determined that we met the validation requirements. The hospital will receive 2% off our liability coverage as well as reimbursement from IEHP.</li> <li>3. <u>MediTech</u>: Clintek has been programmed and IT will be installing it today; the next step will be to validate it. The interfaces for the glucometers and MindRay are going well. The interface for LabCorp is now complete. The interface for Quest is still pending.</li> <li>4. <u>Equipment</u>: <ul style="list-style-type: none"> <li>• IV Pumps: The drug library has been installed on the new IV pumps; go live is scheduled for June 4. It was noted that six of the MindRay monitors we purchased were 3 lead monitors vs. the 12 lead monitors we purchased. We will need to add 6 more monitors to the next FY capital budget.</li> <li>• Vocera: IT staff have been trained on the new Vocera equipment; staff will be trained next.</li> </ul> </li> <li>5. <u>Journey Mapping Project</u>: WIPFLI has interviewed one patient; a list of additional patients was sent to WIPFLI.</li> <li>6. <u>Staffing</u>: Staffing is going well overall; we are working to fill 2 management positions (Case Manager and an interim Infection Control manager).</li> </ol>	
<p>8.4 Quality Committee Report Report of meeting held May 23, 2024</p>	<p>Hoy reported on the Quality Committee meeting:</p> <ol style="list-style-type: none"> <li>1. <u>Patient Satisfaction Surveys</u>: <ol style="list-style-type: none"> <li>a. <u>Inpatient</u>: In April 2024, there were three responses, with a <u>66.67% top box score.</u></li> <li>b. <u>ED</u>: In April 2024, there were 34 responses with an <u>86.25% top box score.</u></li> <li>c. <u>RHC Medical</u>: In April 2024, there were nine responses with a <u>70.15% top box score.</u></li> <li>d. <u>RHC Dental</u>: In April 2024, there were no responses received.</li> </ol> </li> </ol>	

TOPIC	DISCUSSION/CONCLUSION/RECOMMENDATION	ACTION/FOLLOW-UP
	<p>2. <u>Regulatory Activities and Updates:</u></p> <p>a. <u>TJC Lab Reaccreditation Survey: 5/3/2022-5/5/2022</u> Peña reviewed the outcome/status of the plan of correction items for March 2024.</p> <p>b. <u>SNF CMS Life Safety Survey: 4/9/2024-4/10/2024</u> Peña reviewed the progress report for the plan of correction.</p> <p>c. <u>TJC Lab Reaccreditation Survey: 4/2/2024-4/2/2024</u> Our plan of correction is due by 6/2/2024.</p> <p>3. <u>SCORE Survey Summary Report:</u> We had 211 respondents with a 78% response rate. The SCORE Survey measures; reasoning on why the response rate dropped from 2022-2024; MCH Culture-Overall Scores; MCH Engagement-Overall Scores; Notable Insights; Narrative Topics/Themes; and the Next Steps.</p>	
<p>8.5 Marketing Committee Report Report of meeting held May 23, 2024</p>	<p>Robinson reported on the Marketing Committee meeting:</p> <p>1. <u>Foundation/Fundraising:</u></p> <ul style="list-style-type: none"> <li>• So far in CY 2024, the Foundation has raised \$91k.</li> <li>• The LeGrand Picnic is scheduled for July 21, 2024 and will have a “Field of Dreams” theme. Sponsorship opportunities, current sponsors and specifics on the event were reviewed in detail.</li> <li>• The Summit Circle Dinner has been scheduled for June 6, 2024 at SkyPark.</li> <li>• The Foundation welcomed three new Board Members: Paul Medawar, Amy Doutt and Lynn Wilson.</li> <li>• Randall Hallett from Hallett Philanthropy will be assessing the Foundation’s capacity to raise money and develop a plan for the future.</li> </ul> <p>2. <u>Events:</u></p> <ul style="list-style-type: none"> <li>• MCH had a booth at the following community events: Rim High School Health Fair; SkyPark Locals Day; Loma Linda Job Fair; Lake Gregory Market Days; Game of Skate event.</li> </ul>	<p><b>Information only</b></p>

TOPIC	DISCUSSION/CONCLUSION/RECOMMENDATION	ACTION/FOLLOW-UP
	<ul style="list-style-type: none"> <li>• Upcoming events include:               <ul style="list-style-type: none"> <li>○ Summit Circle Dinner – June 6</li> <li>○ Lake Gregory Market Night – June 7</li> <li>○ Auxiliary Installation Brunch – June 14</li> <li>○ Mountain Health Fair in VOE – June 14</li> <li>○ LeGrand Picnic – July 21</li> <li>○ Lake Gregory Market Night – July 26</li> <li>○ Rose Memorial – August 17</li> </ul> </li> <li>3. <u>Marketing:</u> <ul style="list-style-type: none"> <li>• Mark’s Q2 CEO Video</li> <li>• From the Heart Newsletter, Spring Edition</li> <li>• Video about the impact of donations on the hospital to be shown at the LeGrand Picnic</li> <li>• Direct Mail piece with information about all of our providers to all of the PO Boxes</li> <li>• Community Health Needs Survey</li> </ul> </li> </ul>	
<p>8.6 Finance Committee Report Report of meeting held May 23, 2024 a. Financial Statement</p>	<p>Smart reported on the Finance Committee meeting:</p> <p>The FY24 Financial Statements as of and for the ten (10) months ended April 30, 2024. Comparative statistics and selected financial indicators were reviewed with the committee.</p>	<p><b>On a motion made and seconded, the Financial Statements as of ten (10) months ended April 30, 2024 were accepted as presented.</b></p> <p><b>M (Smart) / S (Hinkley) / C</b></p> <p><b>5 Ayes / 0 Nays / 0 Abstain / 0 Absent</b></p>
<p>b. Capital Purchases</p>	<p>The FY24 Capital Purchases for the ten (10) months ended April 30, 2024 was presented and reviewed.</p>	<p><b>Information only</b></p>
<p>c. Investment</p>	<p>The LAIF and UBS statements as of April 30, 2024 were presented and reviewed.</p>	<p><b>Information only</b></p>
<p>d. USDA Financing Update:</p>	<p>G. Hicks reviewed the Supplementary Information: Schedules of</p>	<p><b>Information Only</b></p>

<b>TOPIC</b>	<b>DISCUSSION/CONCLUSION/RECOMMENDATION</b>	<b>ACTION/FOLLOW-UP</b>
Acute Care Wing Project	Financial Ratios, Days Cash on Hand; Annual Debt Service Coverage; and Other Key Financial Ratios from the DRAFT Feasibility Study that is being prepared by WIPFLI. The data covers Years Ended 2019-2023 (historical) and Years Ended 2024-2030 (forecasted). He noted that the District would be required to infuse money into the Acute Care Wing project up front and that would reduce the District's leverage as well as reduce it liquidity from previously discussed levels. He noted the 72-page Feasibility Study DRAFT document was submitted last week to the USDA for their review, and we are awaiting their response/comments (he expects they will take about three weeks to respond). The plan is to submit the final Feasibility Study as part of the USDA application on or about June 25, 2024.	
e. Paying off Existing Debt: 2007 COPs and 2016 MOB Financing	The committee made the motion to recommend to the Board to authorize paying off the 2007 COPs and 2016 MOB Financing (totaling around \$8M) on the interest payment date of August 1, 2024.	<p><b>On a motion made and seconded, the Board authorized paying off the 2007 COPs and 2016 MOB Financing (totaling around \$8M) on the interest payment date of August 1, 2024.</b></p> <p><b>M (Hinkley) / S (Hoy) / C</b></p> <p><b>5 Ayes / 0 Nays / 0 Abstain / 0 Absent</b></p>
8.7 Board Education	<p>Burkart report on the following upcoming Board education opportunities:</p> <ul style="list-style-type: none"> <li>a. MCH Board Member Annual Education (Relias): Sent to Board members via email.</li> <li>b. 5/20-22/2024: HASC Annual Meeting. Hoy, Robinson, Hinkley, Turner and Peña attended; overall, it was an awesome, uplifting and a productive conference.</li> </ul>	<b>Information only</b>
8.8 Discussion Topic Suggestions:	Adding the Hospital Week Ice Cream Social as a Board sponsored event. This item will be added to the agenda in early 2025. Adding a	<b>Information only</b>

TOPIC	DISCUSSION/CONCLUSION/RECOMMENDATION	ACTION/FOLLOW-UP
	legislative update to next month’s agenda.	
9.0 Adjourn to Closed Session:	The Board adjourned to “Closed Session” at approximately 4:16 p.m.	<b>Information only</b>
10.0 Return to Open Session:	The Board returned to “Open Session” at approximately 5:10 p.m.	<b>Information only</b>
10.1 Closed Session Report:	<p>Per Burkart, the following items were reported on during “Closed Session”:</p> <ul style="list-style-type: none"> <li>• Medical Staff Report of May 23, 2024 and Credentialing from the May 21, 2024 Medical Executive Committee meeting.</li> <li>• Executive Session: Personnel Issues.</li> </ul>	<b>Information only</b>
<p>11.0 Public Report of Decisions 11.1 Hearings; Staff Privileges; Credentialing Recommendations</p>	<p>The Board accepted the Medical Staff Report of May 23, 2024, and Credentialing from the May 21, 2024 Medical Executive Committee meeting.</p> <p>Approvals were as follows:</p> <ul style="list-style-type: none"> <li>• <b><u>New Appointments/Provisional Staff:</u></b> <ul style="list-style-type: none"> <li>○ LAWRENCE R. BURCHETT, IV, MD – Emergency Medicine &amp; Family Practice</li> <li>○ JULIA C. GLAVINIC, MD – Emergency Medicine &amp; Family Practice</li> <li>○ DAVID M. KRAKOWSKI, MD – Tele-Radiology</li> <li>○ EVITA SINGH, MD – Tele-Radiology/Mammography</li> </ul> </li> <li>• <b><u>Provisional Extensions:</u></b> None</li> <li>• <b><u>Advancement from Provisional Staff/Regular Staff:</u></b> None</li> <li>• <b><u>Reappointments:</u></b> None</li> <li>• <b><u>Staff Status Changes:</u></b> None</li> <li>• <b><u>Revision/Increase of Privileges:</u></b> None</li> <li>• <b><u>Terminations/Resignations:</u></b> None</li> <li>• <b><u>Revision of Privileges:</u></b> None</li> <li>• <b><u>Leave of Absence Requests:</u></b> None</li> </ul>	<p><b>On a motion made and seconded, the Medical Staff Report of April 25, 2024, and Credentialing from the April 23, 2024 Medical Executive Committee meeting were accepted as recommended by the MEC.</b></p> <p><b>M (Hoy) / S (Robinson) / C</b></p> <p><b>5 Ayes / 0 Nays / 0 Abstain / 0 Absent</b></p>

<b>TOPIC</b>	<b>DISCUSSION/CONCLUSION/RECOMMENDATION</b>	<b>ACTION/FOLLOW-UP</b>
12.0 Next Board-Attended Meetings:	The next Special Board of Directors meeting will be on <u>Friday, June 7, 2024</u> at 1:00 p.m. Meeting to be held in the George M Medak Conference Room (Suite 207) in the Medical Office Building. The next Regular Board of Directors meeting will be on <u>Friday, June 28, 2024</u> at 1:00 p.m. Meeting to be held in the George M Medak Conference Room (Suite 207) in the Medical Office Building.	<b>Information only</b>
13.0 Final Adjournment:	There being no further business to discuss, the Board of Directors meeting adjourned at approximately 5:10 p.m.	<b>Meeting adjourned</b>

**By:** \_\_\_\_\_  
**Barry Hoy, Secretary of the Board**

**By:** \_\_\_\_\_  
**Kristi McCasland, Recording Secretary**

TOPIC	DISCUSSION/CONCLUSION/RECOMMENDATION	ACTION/FOLLOW-UP
1.0 Call to Order:	Kieth Burkart, Board President, called the Board of Directors meeting to order at approximately 1:08 p.m.	<b>The meeting was called to order</b>
2.0 Board Members Present:  Members Absent:  Recording Secretary:  Staff Members Present:  Guests:	Kieth Burkart, Board President Cheryl Robinson, Vice President Barry Hoy, Board Secretary Barrick Smart, Board Treasurer Gerry Hinkley, Board Director  Kristi McCasland, Executive Assistant  Mark Turner, Chief Executive Officer Yvonne Waggener, Chief Financial Officer Terry Peña, Chief Operating Officer/Chief Nursing Officer  Gary Hicks, G.L. Hicks Financial John McLaughlin, Public	<b>Quorum present</b>
3.0 President’s Comments:	None	<b>None</b>
4.0 Board Member’s Reports:	None	<b>None</b>
5.0 Public Comments:	None	<b>None</b>
6.0 Previous Minutes:	On a motion made and seconded, the Minutes from the Special Board of Directors Meeting-USDA Public Community Meeting of June 7, 2024 were approved as written.	<b>On a motion made and seconded, the Minutes from the Special Board of Directors Meeting-USDA Public Community Meeting of June 7, 2024 were approved as written.</b>  <b>M (Hoy) / S (Smart) / C</b>

TOPIC	DISCUSSION/CONCLUSION/RECOMMENDATION	ACTION/FOLLOW-UP
		<p><b>5 Ayes / 0 Nays / 0 Abstain / 0 Absent</b></p>
<p>7.0 Agenda 7.1 Financial Feasibility Study Approval</p>	<p>Hicks presented and reviewed in detail the “Sources and Use of Funds”, “Statements of Revenue”, “Days Cash on Hand Analysis” and “Debt Service Coverage Ratio” from the Financial Feasibility Study that was prepared by WIPFLI as part of the USDA financing for the Acute Care Wing project. He noted that the USDA interest rate is currently 3.5% and would increase to 4% on July 1, 2024, which equates to a difference of \$6M in interest fees. The USDA has elected to expedite our application and we will hopefully receive an issuance of a Letter of Condition from the USDA by the end of next week; if received, we would be locked in at the 3.5% interest rate.</p>	<p><b>On a motion made and seconded, the Board approved the Financial Feasibility Study as presented.</b></p> <p><b>M (Hinkley) / S (Smart) / C</b></p> <p><b>5 Ayes / 0 Nays / 0 Abstain / 0 Absent</b></p>
<p>7.2 Resolution 2024-04- Authorizing CEO/CFO/COO/CNO to Execute and Submit Loan Documents to USDA</p>	<p>Hicks reviewed Resolution 2024-04, noting that it would provide Board authorization to the Chief Executive Officer, the Chief Operating Officer/Chief Nursing Officer or the Chief Financial Officer of the District to prepare, execute and deliver to the USDA Form 1940-1 – Request for Obligation of Funds, and USDA Form 1942-46 – Letter of Intent to Meet Conditions.</p> <ul style="list-style-type: none"> <li>• <b>RESOLUTION NO. 2024-04</b></li> </ul> <p><b>RESOLUTION AUTHORIZING THE CHIEF EXECUTIVE OFFICER, THE CHIEF OPERATING OFFICER/CHIEF NURSING OFFICER OR THE CHIEF FINANCIAL OFFICER OF THE DISTRICT TO EXECUTE AND SUBMIT CERTAIN LOAN DOCUMENTS TO THE UNITED STATES DEPARTMENT OF AGRICULTURE IN CONNECTION WITH THE RURAL DEVELOPMENT COMMUNITY FACILITIES DIRECT LOAN PROGRAM, FOR FUNDING TO PAY THE COST OF THE EXPANSION</b></p>	<p><b>On a motion made and seconded, the Board approved the following Resolution as presented:</b></p> <p><b>RESOLUTION NO. 2024-04</b></p> <p><b>RESOLUTION AUTHORIZING THE CHIEF EXECUTIVE OFFICER, THE CHIEF OPERATING OFFICER/CHIEF NURSING OFFICER OR THE CHIEF FINANCIAL OFFICER OF THE DISTRICT TO EXECUTE AND SUBMIT CERTAIN LOAN DOCUMENTS TO THE UNITED STATES DEPARTMENT OF</b></p>



<b>TOPIC</b>	<b>DISCUSSION/CONCLUSION/RECOMMENDATION</b>	<b>ACTION/FOLLOW-UP</b>
	<p><b>OF AND IMPROVEMENTS TO THE DISTRICT'S HOSPITAL FACILITY</b></p> <p>See Resolution 2024-04 for entire text.</p>	<p><b>AGRICULTURE IN CONNECTION WITH THE RURAL DEVELOPMENT COMMUNITY FACILITIES DIRECT LOAN PROGRAM, FOR FUNDING TO PAY THE COST OF THE EXPANSION OF AND IMPROVEMENTS TO THE DISTRICT'S HOSPITAL FACILITY.</b></p> <p><b>M (Hinkley) / S (Smart) / C</b></p> <p><b>5 Ayes / 0 Nays / 0 Abstain / 0 Absent</b></p>
<p>7.3 Design Build Team Proposals &amp; Our Preliminary Recommendation</p>	<p>Turner reported that the District received two (2) proposals from Design Build (DB) teams for the Acute Care Wing / Retrofit / SNF Wing Project. He noted that the evaluation team, which consisted of, Mark Turner (CEO), Terry Peña (COO/CNO), Tom Madrigal (Facilities), Barry Hoy (Board) and Gerald Hinkley (Board) reviewed both proposals independently using criteria developed by JLL and approved by our legal counsel. Evaluation criteria included: Evaluation of: Design-Build Expertise; Team's Design and Construction Expertise; Proposal Overall Design; Proposal Overall Value; Proposal Project Execution; Proposal Interview and Presentation; and Proposal Exceptions to Design Build Agreement. Team members did not collaborate with each other during the evaluation process or see each other's individual scoring; the Executive Assistant to Administration compiled the scoring into an overall scoring sheet. The team met on Wednesday in the presence of our attorney and JLL (Project Manager), and everyone agreed that there was a clear winner. Turner reported that our attorney prepared a letter on June 19 to let both DB teams know that the District determined the following ranking of the proposals:</p> <p>1. Bernards/HMC Team</p>	<p><b>Information only</b></p>

TOPIC	DISCUSSION/CONCLUSION/RECOMMENDATION	ACTION/FOLLOW-UP
	<p>2. Perera/AO Team And, that in accordance with Public Contract Code and Article 10 of the Request for Proposal, the District issued a Notice of Intent of Recommendation or Contract Award, subject to negotiation with the Bernard/HMC team. Providing a deal is reached, a Recommendation of Award is expected to be presented to the Board of Directors for approval on June 28, 2024.</p>	
<p>8.0 Next Board-Attended Meetings:</p>	<p>The next Regular Board of Directors meeting will be on <u>Friday, June 28, 2024</u> at 1:00 p.m. Meeting to be held in the George M Medak Conference Room (Suite 207) in the Medical Office Building.</p>	<p><b>Information only</b></p>
<p>9.0 Final Adjournment:</p>	<p>There being no further business to discuss, the Board of Directors meeting adjourned at approximately 1:50 p.m.</p>	<p><b>Meeting adjourned</b></p>

By: \_\_\_\_\_  
**Barry Hoy, Secretary of the Board**

By: \_\_\_\_\_  
**Kristi McCasland, Recording Secretary**

**Board Approvals: (5 Documents)**

**I. New Policies / Forms / Attachments: (0)**

**II. Updated Policies / Forms / Attachments: (2)**

**a. Anesthesiology Department Policies: (1)**

[Anesthesia Lumbar Epidural Injections \(Policy\) - Anesthesiology Department](#)

**b. Perioperative Services Department Policies: (1)**

[Terminal Cleaning of the Surgical Suite \(Policy\) - Perioperative Services Department](#)

**III. Triennial Renewal Only (no / minor changes): (3)**

**a. Rights of the Patient (RI) Policies: (1)**

[Against Medical Advice/Elopement \(Policy\) - RI](#)

**b. Laboratory Department Policies: (1)**

[Blood Transfusion Criteria \(Policy\) - Laboratory Department](#)

**c. Patient Access Department Policies: (1)**

[MediCare Outpatient Observation Notice \(Policy\) - Patient Access Department](#)

# Evaluation of Design-Builder's Proposal in Response to RFP

## Scoring/Ranking, Recommendation and Approval of Award



**Project Name:** Mountains Community Hospital Seismic Upgrades and Expansion

**Address:** 29101 Hospital Road, Lake Arrowhead, CA

**Prepared by:** Mark Turner

**Date prepared:** 6/19/2024

Criteria #	Evaluation Criteria from RFP	Max. Score Possible	Bernards & HMC		Perera & AO	
			Score	Score	Score	Score
1	Design-Build Experience	200	183	155		
2	Team's Design and Construction Expertise	150	138	115		
3	Proposal- Overall Design	300	268	165		
4	Proposal- Overall Value	400	374	313		
5	Proposal- Project Execution	400	372	326		
6	Proposal Interview and Presentation	125	112	113		
7	Proposal- Exceptions to D-B Agreement	125	124	120		
<b>Total Points</b>		<b>1700</b>	<b>1571</b>	<b>1307</b>		

**Ranking** 1

**Ranking** 2

### Recommendation and Approval for Award

**Recommended Award to:**

Recommended by: Mark Turner

*Mark Turner*

Signature

Date

**Approval for Award to:**

Approver's Name: Mark Turner

Signature

Date

**RESOLUTION NO. 2024-05**

**RESOLUTION OF THE BOARD OF DIRECTORS OF THE  
SAN BERNARDINO MOUNTAINS COMMUNITY HOSPITAL DISTRICT  
DETERMINING, CERTIFYING, AND DIRECTING 2024-2025  
SPECIAL TAX LEVIES WITHIN THE DISTRICT**

WHEREAS, more than two-thirds (2/3rds) of the voters voting at a special election within the San Bernardino Mountains Community Hospital District on November 7, 1989, approved a measure authorizing this Board of Directors to adopt a resolution levying a special tax upon all taxable parcels of real property within the District in an amount not to exceed on an annual basis: (1) \$40 per unimproved parcel, (2) \$80 per parcel containing a single family residence or multiple dwelling units, and (3) \$200 per parcel developed for commercial use; and

WHEREAS, on February 9, 2021, the San Bernardino Mountains Community Hospital District and the County of San Bernardino entered into the Agreement to Transfer a Portion of Appropriations Limit, whereby the County of San Bernardino transferred \$2,000,000 of its appropriations limit to the San Bernardino Mountains Community Hospital District in recognition of the San Bernardino Mountains Community Hospital District's financial responsibility for providing service to areas within the County of San Bernardino's service area; and

WHEREAS, this Board of Directors finds that it is in the best interest of the District to impose the maximum special tax allowed by law for the Fiscal Year 2024/25;

NOW, THEREFORE, BE IT RESOLVED by the Board of Directors of the San Bernardino Mountains Community Hospital District as follows:

Section 1. The special tax for the Fiscal Year 2024/25 only shall be as follows:

Each unimproved parcel	\$40
Each parcel containing a single family residence or multiple dwelling units	\$80
Each parcel developed for commercial units	\$200

Section 2. The records of the San Bernardino County Assessor as of March 1, 2024, shall determine for the purposes of the special tax whether or not any particular parcel of taxable real property is unimproved or is improved for residential or commercial use. "Parcel of real property" as used in this

Resolution shall mean any contiguous unit of improved or unimproved property held in separate ownership, including, but not limited to, any single family residence, any condominium unit, as defined in Civil Code 786, or any other unit of real property subject to the California Subdivided Lands Act (Business and Professions Code Section 11000 and following).

Section 3. The special tax shall be levied upon all unimproved and improved parcels of real property, except for parcels owned by any other local, federal, or state government agency, or any parcel of property that is exempt from the special tax pursuant to any provision of the state or federal constitutions for any paramount law.

Section 4. The special tax imposed shall be collected in the same manner, on the same dates, and subject to the same penalties and interest in accordance with the established dates, as, or with, other charges and taxes fixed and collected by the County of San Bernardino on behalf of the San Bernardino Mountains Community Hospital District, and the County may deduct its reasonable costs incurred for such service before remittal of the balance to the District.

Section 5. The special tax, together with all penalties and interest thereon, shall constitute a lien upon the parcels upon which it is levied until it has been paid, and the special tax, together with all penalties and interest thereon, shall, until paid, constitute a personal obligation to the District by the persons who own the parcel on the date the tax is due.

Section 6. The Secretary of this Board of Directors shall certify to the adoption of this Resolution and transmit a certified copy thereof to the Clerk of the Board of Supervisors and to the County Auditor of the County of San Bernardino. The Secretary and the District's legal counsel are authorized and instructed to take further action as may be necessary to carry out the purpose of this Resolution.

ADOPTED, SIGNED AND APPROVED this 28<sup>th</sup> day of June, 2024

---

Kieth Burkart  
President of the Board of Directors  
San Bernardino Mountains Community Hospital District

ATTEST:

---

Barry Hoy  
Secretary of the Board of Directors  
San Bernardino Mountains Community Hospital District

CERTIFICATION

I, Barry Hoy, Secretary of the Board of Directors of the San Bernardino Mountains Community Hospital District, hereby certify that the foregoing is a full, true and correct copy of the Resolution 2024-05 adopted by the Board of Directors of the District at the Board Meeting held on June 28, 2024, by the following vote:

AYES:

NOES:

ABSENT:

ABSTAIN:

---

Barry Hoy  
Secretary of the Board of Directors  
San Bernardino Mountains Community Hospital  
District

**RESOLUTION NO. 2024-06**

**RESOLUTION OF THE BOARD OF DIRECTORS OF THE  
SAN BERNARDINO MOUNTAINS COMMUNITY HOSPITAL DISTRICT  
ESTABLISHING APPROPRIATIONS LIMITS  
FOR FISCAL YEAR 2024-2025**

WHEREAS, article XIII B of the California Constitution places an annual limitation upon appropriations from proceeds of taxes by each local government of the State of California; and

WHEREAS, Section 7910 of the California Government Code implements article XIII B of the California Constitution by requiring each local jurisdiction to establish, by resolution, its appropriations limit for each fiscal year, beginning with 1980-1981, and to make the documentation used in determining each year's appropriations limit available to the public 15 days prior to adoption of the resolution establishing each year's appropriations limit; and

WHEREAS, the San Bernardino Mountains Community Hospital District ("District") previously assumed the financial responsibility from the County of San Bernardino ("County") for providing service to certain areas within the County outside of the District's service area; and

WHEREAS, pursuant to article XIII B, section 3(a) of the California Constitution, the District and the County previously entered into that certain Agreement to Transfer a Portion of Appropriations Limit, whereby the County transferred \$2,000,000 of its appropriations limit to the District, creating an adjusted base appropriations limit of \$4,099,403 for fiscal year 2020-2021; and

WHEREAS, this Board of Directors is permitted to annually adjust its appropriations limit in accordance with inflation and population adjustment factors and certain per capita income changes, and has determined that its 2024-2025 appropriation limit should increase by 4.04%, or \$197,359; and

WHEREAS, the documentation used in the determination of the appropriations limit and other necessary determinations has been available to the public at least 15 days prior to the adoption of this Resolution, as required by Government Code section 7910(a).

NOW, THEREFORE, BE IT RESOLVED by the Board of Directors of the San Bernardino Mountains Community Hospital District that the appropriations limit applicable to this District pursuant to article XIII B of the California Constitution for Fiscal Year 2024-2025 is hereby established and determined to be the sum of \$5,064,175.



ADOPTED, SIGNED AND APPROVED this 28th day of June, 2024.

---

Kieth J Burkart  
President of the Board of Directors  
San Bernardino Mountains Community Hospital District

ATTEST:

---

Barry Hoy  
Secretary of the Board of Directors  
San Bernardino Mountains Community Hospital District

#### CERTIFICATION

I, Barry Hoy, Secretary of the Board of Directors of the San Bernardino Mountains Community Hospital District, hereby certify that the foregoing is a full, true and correct copy of the Resolution 2024-06 adopted by the Board of Directors of the District at the Board Meeting held on June 28, 2024, by the following vote:

AYES:

NOES:

ABSENT:

ABSTAIN:

---

Barry Hoy  
Secretary of the Board of Directors  
San Bernardino Mountains Community  
Hospital District

**San Bernardino Mountains Community Hospital District**  
**Article XIII B Appropriations Limit Calculation**  
**Fiscal Year 2024-2025**

Article XIII B Appropriations Limit Calculation		
2023-2024 Appropriations Limit		\$ 4,866,815
Per Capita income change	3.62%	1.0362
Population converted to ratio	0.42%	1.0042
Calculation factor		1.0406
Increase in limit		197,359
2024-2025 Appropriations Limit		\$ 5,064,175

\* Sums may not be exact due to rounding.



AUDITOR-CONTROLLER/TREASURER/TAX COLLECTOR  
AGREEMENT FOR COLLECTION OF SPECIAL  
TAXES, FEES, AND ASSESSMENTS  
FISCAL YEAR 2024-25

THIS AGREEMENT is made and entered into this 28th day of June, 2024, by and between the COUNTY OF SAN BERNARDINO, hereinafter referred to as "County" and the San Bernadino Mountains Community Hospital District, hereinafter referred to as "District".

WITNESSETH:

WHEREAS, Government Code Sections 29304 and 51800 authorize the County to recoup its collection costs when the County collects taxes, fees, or assessments for any city, school district, special district, zone or improvement district thereof; and

WHEREAS, the District and County have determined that it is in the public interest that the County, when requested by District, collect on the County tax rolls the special taxes, fees, and assessments for District.

NOW, THEREFORE, IT IS AGREED by and between the parties hereto as follows:

1. County agrees, when requested by District as hereinafter provided to collect on the County tax rolls the special taxes, fees, and assessments of District, and of each zone or improvement District thereof.

2. When County is to collect District's special taxes, fees, and assessments, District agrees to notify in writing the Auditor-Controller (268 W. Hospitality Lane, 4<sup>TH</sup> floor, San Bernardino, CA 92415) of the County on or before the 10<sup>th</sup> day of August of each fiscal year of the Assessor's parcel numbers and the amount of each special tax, fee, or assessment to be so collected. Any such notice, in order to be effective, must be received by the Auditor-Controller by said date.

3. County may charge District an amount per parcel for each special tax, fee, or assessment that is to be collected on the County tax rolls by the County for the District, not to exceed County's actual cost of collection.

4. District warrants that the taxes, fees, or assessments imposed by District and collected pursuant to this Agreement comply with all requirements of state law, including but not limited to, Articles XIIC and XIID of the California Constitution (Proposition 218).

5. District hereby releases and forever discharges County and its officers, agents, and employees from any and all claims, demands, liabilities, costs and expenses, damages, causes of action, and judgments, in any manner arising out of District's responsibility under

this agreement, or other action taken by District in establishing a special tax, fee, or assessment and implementing collection of special taxes, fees or assessments as contemplated in this agreement.

6. The County Auditor-Controller has not determined the validity of the taxes or assessments to be collected pursuant to this contract, and the undersigned District hereby assumes any and all responsibility for making such a determination. The undersigned District agrees to indemnify, defend, and hold harmless the County and its authorized officers, employees, agents, and volunteers from any and all claims, actions, losses, damages, and/or liability arising out of this contract or the imposition of the taxes or assessments collected pursuant to this contract, and for any costs or expenses incurred by the County on account of any claim therefore, except where such indemnification is prohibited by law. If any judgment is entered against County or any other indemnified party as a result of action taken to implement this Agreement, District agrees that County may offset the amount of any judgment paid by County or by any indemnified party from any monies collected by County on District's behalf, including property taxes, special taxes, fees, or assessments. County may, but is not required to, notify District of its intent to implement any offset authorized by this paragraph.

7. District agrees that its officers, agents and employees will cooperate with County by answering inquiries made to District by any person concerning District's special tax, fee, or assessment, and District agrees that its officers, agents, and employees will not refer such individuals making inquiries to County officers or employees for response.

8. District shall not assign or transfer this agreement or any interest herein and any such assignment or transfer or attempted assignment or transfer of this agreement or any interest herein by District shall be void and shall immediately and automatically terminate this agreement

9. This agreement shall be effective for the 2024-25 fiscal year.

10. Either party may terminate this agreement for any reason upon 30 days written notice to the other party. The County Auditor-Controller shall have the right to exercise County's right and authority under this contract including the right to terminate the contract.

11. County's waiver of breach of any one term, covenant, or other provision of this agreement, is not a waiver of breach of any other term, nor subsequent breach of the term or provision waived.

12. Each person signing this agreement represents and warrants that he or she has been fully authorized to do so.

IN WITNESS WHEREOF, the parties hereto have executed this agreement as of the day and year first above written.

District: San Bernadino Mountains Community Hospital District

By: \_\_\_\_\_

Printed Name: Mark Turner

Title: Chief Executive Officer

Date: \_\_\_\_\_

ENSEN MASON CPA, CFA,  
AUDITOR-CONTROLLER/TREASURER/TAX COLLECTOR  
SAN BERNARDINO COUNTY

By Authorized Deputy: \_\_\_\_\_

Printed Name: Franciliza Zyss

Title: Interim Chief Deputy, Property Tax

Date: \_\_\_\_\_

## Kristi Mccasland

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**From:** Mark Turner  
**Sent:** Friday, June 7, 2024 9:17 AM  
**To:** Kieth Burkart; Cheryl Robinson; Gerry Hinkley; Barrick Smart; Barry Hoy  
**Cc:** Kristi Mccasland  
**Subject:** FW: \*EXTERNAL\* ✉ Present your ideas at the 2025 AHA Rural Health Care Leadership Conference

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**From:** American Hospital Association <marketing-noreply@aha.org>  
**Sent:** Friday, June 7, 2024 7:07 AM  
**To:** Mark Turner <Mark.Turner@mchcares.com>  
**Subject:** \*EXTERNAL\* ✉ Present your ideas at the 2025 AHA Rural Health Care Leadership Conference

To view this email as a web page, [click here](#)



## CALL FOR PROPOSALS

The **AHA Rural Health Care Leadership Conference**, February 23-26, in San Antonio, brings together top practitioners and thinkers to share strategies and resources for accelerating the shift to a more integrated and sustainable rural health system.

We'll examine the most significant operational, financial and environmental challenges and present innovative approaches that will enable you to transform your organization's care delivery model and business practices.

# SPEAKING PROPOSALS NOW BEING ACCEPTED

We are now accepting **speaking proposals** for our 2025 conference. We are especially interested in presentations that feature rural hospital executives, clinical leaders, and trustees as presenters. The proposal deadline is **Friday, June 28, 2024**.

Topics of Interest:

- Improving quality, patient safety and performance.
- Emergency and cybersecurity disaster planning and response.
- Value-based care and advanced payment models.
- Improving equity and eliminating disparities in treatment, access and outcomes, particularly in behavioral, maternal or specialty services.
- Advancing community and population health and economic development.
- Inventive approaches to mergers, joint ventures and affiliations.
- Improving access through telehealth and virtual care.
- Cutting-edge technology and artificial intelligence adoption.
- Best practices in health care delivery for American Indians and Alaskan Natives.
- Best practices for achieving governance excellence.

**To submit a proposal, you must create an account to begin the proposal submission process.** The email used to create the account will be set as the default email for the primary contact or presenter. With our new submission process, you'll be able to go back and edit your submission if necessary.

[APPLY TO SPEAK TODAY >>](#)



## SPONSORSHIP OPPORTUNITIES

Looking to make lasting connections with rural health care leaders? Contact **Kip Karwoski** for information on sponsorship opportunities at the 2025 AHA Rural Health Care Leadership Conference.



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