| Meeting Title: | Board of Trustees Meeting | Chairperson: | Jimmy Todd |
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| Date/Time: | June 18, 2025 | Location: | Norton County Hospital |

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

| Attended | Position |
|---|---|
| James Moreau | Board President |
| Jimmy Todd | Board Vice President |
| Lee Jueneman | Board Secretary |
| Jerry Hawks | Board Member |
| Randa Vollertsen | Board Treasurer |
| Robert Wyatt | Board Member |
| Andrew Black | Board Member |
| Garrett Beydler | County Commissioner |
| Kevin Faughnder | NCH Chief Executive Officer |
| ReChelle Horinek | NCH Chief Financial Officer |
| Shannan Hempler | NCH Human Resources Director |
| Klare Bliss | NCH Chief Information Officer |
| Mel DeWitt | Norton Medical Clinic Manager |
| Amanda Kuxhausen | NCH Quality Control and Risk Management |
| Sarah Mohr | NCH Chief Nursing Officer |
| Tabetha Harris | NCH HR Assistant/ Public Relations/ Marketing |

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| | Agenda Item | Action and/or Time |
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| 1. | **May 21st, 2025 Board Meeting Minutes** | Motion by **Randa Vollertsen** to approve the minutes of the May 21st, 2025 meeting, with the revision of adding Lee Jueneman to the roster. Second by **Lee Juenemann.** Motion carries unanimously. |
| 2. | **Consent Agenda Items:**<br>a) Personnel Information<br>b) Payroll Briefing<br>c) Accounts Payable – Bills | Motion by **Randa Vollertsen** to approve the Consent Agenda Items as presented. Second by **Jerry Hawks.** Motion carries unanimously. |
| 3. | **Executive Session: Non-Elected Personnel** | **Robert Wyatt** moved to enter into executive session: K.S.A. 75-4319(b)(1) for the discussion of personnel matters of non-elected personnel; with the Board, CEO, CFO, and commissioner in attendance, not to exceed 5 minutes. Seconded by **Lee Juenemann**. Motion passed. The executive session begins at **6:36 p.m**. Exit at **6:38 p.m.** |
| 4. | **Board Action from Executive Session** | n/a |

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| 5. | **Risk Management/ Quality Assurance**<br>Amanda Kuxhausen, the Risk Management and Quality Assurance Coordinator, presented the following updates:<br>**Risk Management:**<br>The Risk Management Plan was sent to the Kansas Department of Health and Environment (KDHE) and received formal approval on the same day, May 22, 2025. This quick turnaround highlights both our preparedness and KDHE's responsiveness.<br>**Quality:**<br>**Patient Feedback & HCAHPS**<br>A total of 17 patient surveys have been received as of June 13, covering the ER, Physical Therapy, Outpatient Surgery, and PSG. Among them, two surveys stood out for the exceptional praise given to our Rehabilitation Department.<br>So far in 2025, 8 HCAHPS responses have been returned. Efforts are underway to address areas of concern, particularly through leadership engagement with nursing staff to improve all scores to the highest level possible.<br>The facility is continually reviewing the current stoplight report and priority matrix for HCAHPS data.<br>**QBRP and QHi Sunflower Network Report Highlights**<br>Performance data from February through April 2025 reflects strong outcomes across several indicators.<br>• Healthcare-Associated Infections: 0.00 (Best Practice Top Performer)<br>• Unassisted Patient Falls: ~0.30, lower than both state and QHi averages<br>• 30-Day All-Cause Readmissions: ~4.5%, outperforming state and QHi benchmarks<br>• Return ER's within 72 hours: ~1.2%, outperforming state and QHi benchmarks<br>**Strategic Initiatives & Survey Readiness**<br>Survey preparation efforts are ongoing in alignment with our strategic plan.<br>The initial round of test surveys is complete. The team is now expanding survey readiness to additional areas of the facility, to complete at least two departments per month.<br>A survey awareness video is being used to build engagement.<br>The Physical Therapy department continues to receive strong positive feedback and deserves recognition for their consistent performance.<br>**BCBS Quality Reimbursement Performance**<br>Norton County Hospital is on track to receive reimbursement for | |

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| | meeting or exceeding performance in most BCBS quality measures, including:<br>• Zero Adverse Drug Events<br>• Full compliance with Hand Hygiene and Antimicrobial Stewardship<br>• No Hospital-Acquired Infections, CAUTIs, or C. diff cases<br>• 100% performance in Emergency Transfer Communication and Sepsis Bundles<br>• Strong performance in Readmission Reduction, Health Equity, and Patient Engagement<br>• Educational Event 5 alone brings in 23% of the available incentive<br>The only deductions were in Falls with Injury and areas without qualifying cases, such as CMS Birthing Friendly.<br>**Next Steps & Recommendations**<br>Continue monitoring HCAHPS and reinforcing quality improvement efforts<br>Maintain the current survey readiness timeline and increase department involvement<br>Encourage continued support of quality measures tied to BCBS reimbursement | |
| **6.** | **CIO Report**<br>Klare Bliss, the Chief Information Officer (CIO), provided the following comprehensive updates for the last month:<br>**Laboratory and Equipment Updates**<br>The lab analyzer MDI interface is now connected and successfully passing information. While the initial go-live was planned for this week, late-arriving reagents have postponed the launch to next week. The new go-live date is set for Monday, June 16. Work is ongoing to ensure Quality Controls are set up and transferring properly into Cerner.<br>**Clinical Systems and Technology**<br>A seamless exchange through Oracle has been approved at a cost of $18,300. This upgrade will make it easier to share patient information with other hospitals, especially during ER transfers or specialist referrals.<br>Cerner's OH Patient Accounting rollout is scheduled for July–August 2026.<br>The Antimicrobial Usage Reporting (AUR) interface has officially kicked off. This system helps track microbes and infection patterns that enter the facility versus what is available in the pharmacy.<br>We are waiting on a team assignment to kick off the Clinical Data Exchange via Seamless Exchange. | Motion by **Lee Juenemann** to approve the Oracle Seamless Exchange as presented. Second by **Robert Wyatt**. Motion carries unanimously. |

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| | Ongoing optimization ideas under evaluation include an EKG interface, implementation of Clinical AI Agent for automated patient documentation, and Quality Control integration for all lab devices.<br>**Cerner Governance and Support**<br>The Cerner Change Governance process is active, with continued meetings across departments to address system changes and workflow improvements. These meetings result in formal Service Requests (SRs) for desired changes.<br>Currently, there are 9 open Support Requests:<br>• 5 tickets relate to new workflows or optimizations, including HPM orders and workflow updates<br>• 4 tickets are tied to system functionality or training issues Support tickets continue to be monitored; resolution times vary depending on the complexity of the request.<br>**Additional Updates**<br>Car Seat Lane had a great turnout. Five seats were adjusted and one was replaced.<br>Bachelor's Degree Milestone: Congratulations to [Your Name] for completing a Bachelor of Science in Healthcare Administration! | |
| 7. | **Medical Clinic Update**<br>Mel DeWitt, the Norton Medical Clinic Manager, shared the following Medical Clinic updates:<br>**Clinic Operations Update**<br>Clinic visits have seen a slight seasonal decline, which is typical for this time of year. However, we've made progress in addressing patient no-shows. A new no-show policy has been implemented: patients with four no-shows must walk in and wait for an acute spot to be seen.<br>**Clinic Visit Summary (April/May Comparison)**<br>• Total Patient Visits: 958 / 1006<br>• Acute/Same Day Appointments: 277 / 330<br>• Saturday Visits: 24 / 22<br>• Medicare Annual Wellness Visits: 18 / 30<br>• Follow-Up Visits: 140 / 119<br>• Established Care Visits: 28 / 27<br>• Physicals: 48 / 38<br>• Nurse Visits: 89 / 76<br>• DOT Physicals: 5 / 2<br>• No Shows: 37 / 33<br>• General Wellness Visits: 25 / 23<br>• Well Child Checks: 6 / 7<br>• Procedures: 15 / 13 | |

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| | **Vytalize Program**<br>• April Payment: $9,476.65<br>• March Payment: $10,520.35<br>**Staffing and Provider Updates**<br>We have hired a new receptionist who will begin in July.<br>Dr. Hatton will be on-site for 10 days beginning June 18. | |
| **8.** | **Ni2 Update**<br>ReChelle Horinek, the Chief Financial Officer, provided the following comprehensive updates for Ni2 from last month:<br><br>There was an upswing in financial activity driven by patients who required high-cost medications. This contributed to a noticeable increase in pharmacy-related billing.<br>Accounts Receivable (AR) days are currently at 34, reflecting the time from date of service to when patients receive their bill. | |
| **9.** | **CFO Report of Statistical/Financial Information**<br>ReChelle Horinek, the Chief Financial Officer, presented comprehensive financial and statistical updates from May 2025:<br>**Physician Medical Staff Appointments**<br>Medical Staff approval was granted for Brad Werts with HPM and Dr. Hatton.<br>**Financial and Administrative Update**<br>ReChelle Horinek, CFO, provided a comprehensive overview of May 2025 financial performance and related administrative updates.<br>**Monthly Financial Summary**<br>• Gross Patient Revenue for May: $3,591,455<br>• Net Loss for May: $310,173<br>• Year-to-Date Profit: $182,959<br>• Operating Expenses for May: $1,748,875<br>• Outpatient revenue was significantly high this month, driven by new infusion services involving high-dollar pharmaceuticals.<br>• Pharmacy revenue alone exceeded budget by over $1 million. This surge contributed to a higher contractual adjustment accrual for outpatient charges.<br>• A large portion of the loss is attributed to increased pharmaceutical costs and higher swing bed utilization, which has led to Medicare overpayments we are now accounting for.<br>• Medicare percentage remains lower to help offset anticipated payables. | Motion by **Randa Vollertsen** to approve the new providers as presented. Second by **Andrew Black**. Motion carries unanimously. |

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- No sales tax distribution was received in May; four total payments have been received so far in 2025.
- Cash on hand remains stable. Total cash and investments as of May 30 were $1,461,385, with 29.26 days of cash on hand.
- May included three payroll cycles, contributing to heavier-than-usual outflows.

**Balance Sheet Overview**

- Nothing outstanding noted.
- All other balances remain within normal operating ranges.
- Our CD with First State Bank has been renewed.

**Key Operational Statistics – May 2025**

- Over 100 acute patients seen
- Inpatient days YTD are up by 100 days over 2024
- Swing bed days are up 234 days over 2024
- Norton Medical Clinic visits are up 515 YTD compared to 2024

**Revenue Cycle Optimization and Compliance Initiatives**

- Experian Insurance Verification product is now live
- Patient Estimate Tool goes live June 23
    - Both tools support compliance with the No Surprises Act and pricing transparency regulations
    - Patients will be able to generate cost estimates via our website if procedures are scheduled more than 3 days in advance

**Eide Bailly Audit & USDA Requirements**

- Kick-off call with Eide Bailly held in early June
- Project expected to last 90 days
- Eide Bailly's engagement also fulfills USDA audit requirements necessary to maintain reimbursement eligibility
- View-only chart access has been granted to their remote review team
- Norton County Hospital will begin sending requested data as soon as the full document list is received

**Cerner Revenue Cycle Optimization**

- Final planning is in progress with Cerner to begin evaluating and enhancing the revenue cycle
- Aim is to complete the Cerner optimization alongside Eide Bailly's project prior to submitting audited financial statements

**Contract Negotiations for Professional Fees**

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| | • Contracting efforts with JG Consulting are underway to secure improved reimbursement rates for physician professional services<br>• Hospital facility contracts are performing well; professional fee rates have been identified as an area of opportunity<br>**FY 2026 Budget Planning**<br>• Paper copies of the proposed FY 2026 budget will be distributed at the June board meeting<br>• Final budget approval is scheduled for the July 2025 board meeting | |
| **10.** | **Financial Affairs of Non-Elected Personnel**<br>Financial Assistance YTD: $14,635.52<br>Bankruptcy YTD: -- | Motion by **Randa Vollertsen** to send an amount not to exceed $48,778.87 for attempted collections. Second by **Robert Wyatt**. Motion carries unanimously.<br><br>Motion by **Lee Juenemann** to approve May's financials. Second by **Randa Vollertsen**. Motion carries unanimously. |
| **11.** | **CNO Report**<br>Sarah Mohr, the Chief Nursing Officer (CNO), presented comprehensive updates for the reporting period of May 1st to May 31st:<br>**Key Metrics:**<br>• ER Visits increased significantly to 191 (↑ from 164 in April 2025)<br>• Inpatient Admissions rose to 19 (↑ from 17)<br>• Inpatient Days grew substantially to 130 (↑ from 85)<br>• Outpatient Visits increased to 243 (↑ from 186)<br>• Emergency Activations: 6 encounters<br>**Operations & Staffing:**<br>• JulieAnna Baker hired as Specialty Clinic Manager (start 6/23)<br>• Open day shift CNA position<br>• Lab Manager Julie Kitt focused on COLA inspection prep; smooth transition ongoing | |

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| | • New medication infusion (Vyvgart) for Myasthenia Gravis launched in outpatient therapy<br>• Specialty Clinic lost endocrinology provider; replacement efforts underway<br>• Psychiatric outpatient visits reduced due to high no-show rates<br>• Respiratory therapy reports sharp increase in PFTs and sleep studies<br>• Nursing orientation progressing well; new PRN CNA starting 6/12; safety improvements underway for psychiatric patients<br>• Radiology installed Dexa scanner, training starts 7/1; 467 exams completed in May<br>• Surgery completed 13 surgeries and 13 pain clinics; prepping for first holistic pain procedure on 7/8<br>• Pharmacy completed 340B mock audit with all claims passing; policy updates in progress<br>**Education & Customer Service:**<br>• Reviewed Q1 HCAHPS scores with nursing; strategies to enhance patient interactions<br>• Post-birth training to be completed by June end for ER nursing staff<br>• Emphasis on patient-centered communication: eye-level engagement, sitting during discharge instructions, active listening, and empathy<br>**Notable:**<br>• OP has made significant progress learning about new autoimmune meds, contributing to patient volume increase. | |
| **12.** | **CEO Report**<br>Kevin Faughnder, the Chief Executive Officer, provided a comprehensive report on various initiatives and updates:<br>**Physician & APP Recruiting:**<br>• Had a short meet and greet with a potential new provider on June 9th. He toured the facility and met providers; feedback to follow next week.<br>• Signed agreement with GO Staffing to recruit an APP replacement for Jonna, retiring October 1. No upfront fees; a candidate application is under provider review.<br>**Communications Campaign:**<br>• Held the third Destination Health event on May 28 focused on wellness and sleep hygiene. Attendees reported thoroughly enjoying the presentation.<br>**Modernization:** | Motion by **Jerry Hawks** to approve the purchase of the Falcon Xpress Machine for $26,095.00. Second by **Lee Juenemann**. Motion carries unanimously. |

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| | • Received a $23,000 donation from the Baird Memorial to purchase Falcon Xpress FX5 segmented vascular pressure machine for advanced blood flow testing. This service is unique in the region.<br>**Community Engagement:**<br>• Participating in "Match Day" on June 25, hosted by Norton Community Foundation.<br>• Meeting with NW Kansas hospital CEOs on June 26 to explore facility collaboration opportunities. | |
| **13.** | **Commissioner Report** | n/a |
| **14.** | **Board Member Reports**<br>Randa inquired about receiving donations directly through the hospital instead of the Norton Regional Health Foundation. Kevin confirmed this was discussed with the foundation. Since the hospital has its own 501(c)(3) status, it can receive donations directly and provide tax-deductible receipts to donors. | |
| **15.** | **Executive Session: Non-Elected Personnel** | **Andrew Black** moved to enter into executive session: K.S.A. 75-4319(b)(1) for the discussion of personnel matters of non-elected personnel; with the Board, CEO, and HR, and commissioner in attendance, not to exceed 20 minutes. Seconded by **James Moreau**. Motion passed. The executive session begins at **8:11 p.m**. Exit at **8:21 p.m**. |
| **16.** | **Board Action from Executive Session** | n/a |
| **17.** | **Executive Session: Non-Elected Personnel** | **Andrew Black** moved to enter into executive session: K.S.A. 75-4319(b)(1) for the discussion of personnel matters of non-elected |

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| | | personnel; with the Board, CEO, and HR, and commissioner in attendance, not to exceed 20 minutes. Seconded by **James Moreau**. Motion passed. The executive session begins at **8:21 p.m**. Exit at **8:41 p.m**. |
| **18.** | **Board Action from Executive Session** | n/a |
| **19.** | **Executive Session: Non-Elected Personnel** | **Andrew Black** moved to enter into executive session: K.S.A. 75-4319(b)(1) for the discussion of personnel matters of non-elected personnel; with the Board and commissioner in attendance, not to exceed 20 minutes. Seconded by **James Moreau**. Motion passed. The executive session begins at **8:41 p.m**. Exit at **9:09 p.m**. |
| **20.** | **Board Action from Executive Session** | n/a |
| **21.** | **Other Business** | n/a |
| **22.** | **Adjourn** | Meeting adjourned at **9:01 p.m.** |

Lee Jueneman, Secretary