

**Pine Eagle Health Planning Committee  
Board of Directors Meeting  
January 28, 2019**

**Call to Order:** Loren called the meeting to order at 6:01 pm.

**Attendance:** Board members Loren Goracke (chair), Bill Johnson (vice-chair), Dave Schmitt (Secretary), Shirley Meger, and Tom Nash; Terra Lewis (office manager), Terry Schmoe (Ambulance Representative). Brian Pennock arrived at 6:13 during the Ambulance Report.

**Approval of Minutes:** Board had not reviewed the minutes of last meeting (Dec. 3, 2018) and approval was moved to February agenda.

**Changes/Additions to Agenda:** Bill asked that an executive session be added to discuss personnel issues; all agreed.

**Public Correspondence:** None

**Ambulance Report:** Terry reported that the ambulance had 104 calls in 2018, about average. They are working on getting new coats for the crew. They will be available in March from the original manufacturer. Recertification is due this year. Everyone has their hours done, but the Oregon Board of Health will not complete the process until after March 1. The ambulance recertification will be in April. There will be some fees associated with the recertifications. In 2019, new batteries for the Striker gurneys will be purchased. We have two new members, Joe Sciarrino and Stephanie Beard. Terry talked about search and rescue and the time it takes them to arrive; sometimes it is not worth calling them, as it takes a long time for them to group up and come from Baker City. There is not much we can do, except think about that when we call them.

**Administrator's Report:** see attached Office Manager's Report.

Terra handed out the November and December 2018 profit and loss statements for the ambulance, the clinic, and the building fund. There was some discussion on the format, as there was confusion when trying to see spending in relation to budget. It was agreed to leave the 2018 statements since Terra has been doing it like this for the past year. Terra will be using a new system beginning January, 2019 with a new format that will be clearer. The statements do not show the true net profit because they are based on the billed fees, and all billed charges were not paid. We need to look at the accounts payable to get the real picture. Several areas that had significant overages were explained by Terra.

**Motion made by Bill** to accept the November and December financial reports, seconded by Tom, motion was passed 6-0.

## **Clinic**

### **Committees:**

**Finance:** The 2019 budget did not get finalized. It will be ready for the February meeting. The Board asked that there be a contingency line added to the budget so that all of our money is accounted for.

## **Old Business**

**Investments** – Tom confirmed that we are not investing any money until we get the 2019 budget finalized and our financial status is clear. All agreed.

## **New Business**

**Elections** – Loren noted that three positions will be up for renewal this year (Loren, Bill, and Dave) and an election needs to be completed before our June meeting. Loren is undecided, Bill is definitely not running again, Dave did not commit. The election needs to be open for 30 days and have at least one more person on the ballot than positions being filled. So four (4) people need to be on the ballot. We need to have the candidates identified by our April meeting so we can prepare and distribute ballots, have the election, and count the ballots before June 24. The new board members will be approved at the June meeting and begin their terms in July.

**Next meeting Topics:** 2019 Budget, funds to be invested, and Elections

**Adjourn to executive session at 7:41**

**Reconvened to general session at 8:01**

**Adjourn:** Chairman Loren Goracke adjourned the meeting at 8:02 pm.

Minutes prepared by Dave Schmitt (1-30-19)

**Pine Eagle Health Planning Committee Board Meeting**  
**01/28/2019**  
**Office Manager Report**  
**Terra Lewis**

**Provider Update:**

- Susan has been doing well since being back from leave.
- Dr. Defrees was here seeing patients on January 7<sup>th</sup> and everything is going well. He will be making a change in March. He will move his patient care day from a Thursday to Monday. This works better for his schedule. This shouldn't have any impact on patients since his day rotates in the month anyway. We just inform patients which day he will be in then schedule accordingly.

**Monthly Outstanding Accounts Receivable Report:**

**Nov 2018**

- Total outstanding guarantor balances are currently \$58,424.07 which represents 40% of the A/R.
- Of this amount, \$45,730 is over 120 Days

**Dec 2018**

- Total outstanding guarantor balances are currently \$60,256.69 which represents 44% of the A/R.
- Of this amount, \$49,274.53 is over 120 Days

**General Financial Information:**

- Nov 2018 Encounters:
  - Smithson-14
  - Berry-12
  - Wolf-71
  - MA Services-87
- Dec 2018 Encounters
  - Smithson-13
  - Berry-87
  - Wolf-11
  - MA Services-98

I've continued to work with the accountant's information to finalize the balance sheets for 2018. Once this is finished, I will have balance sheets for year end 2018 and each month in 2019.

The budget is undergoing formatting changes that will show in the 2019 financial statements.

**Patient Concern Report:**

- There was a patient concern reported at the clinic level. It was handled by the office manager and a brief overview was presented to the Board as an FYI only. All Protected Health Information was kept confidential.

**General Updates:**

- Jim Ferrell is an independent contractor which handles our grounds maintenance and snow removal on sidewalks. He has presented an increase in his fee. He is increasing from \$12.50/hour to \$\$13.50/hour.

- The clinic will be undergoing a free Risk Assessment through the State of Oregon. There will be a review of our policies and procedures around protecting health information in both our medical record and daily operations. This service in the private sector can cost over \$10,000. We were lucky to be able to get on the list. Once the assessment is complete, they will present their recommendations in a detailed report. With the report, they will also have editable policies and procedures we can use instead of having to find/create our own. They will also be making recommendations regarding the efficacy of our electronic health record. There may be opportunities to change programs through grants versus us purchasing a new program. All these details will be gone over with the Board once I receive them. From this, we can discuss any necessary changes that need to be made & the reasons/risk behind them.
- We will be closing the clinic from 12:00pm-12:45pm on the last Wednesday of the month during the lunch for a monthly staff meeting. Our Rural Health guidelines require us to have monthly trainings & it's a great time for us to get together & strategize on our processes & procedures. It is extremely difficult with everyone's schedules and can be costly to pay each employee additional time for before or after hour meetings. Having the meeting during the lunch period allows us all to be together to hear the same message. We will try it and if there are any issues, we can revisit the timing of the meeting.