

**SOUTH LIMESTONE HOSPITAL DISTRICT  
LIMESTONE MEDICAL CENTER  
701 McCLINTIC, GROESBECK, TX 76642**

**MINUTES**

**October 25, 2022**

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**On this 25<sup>th</sup> day of October, 2022 the Board of Directors of South Limestone Hospital District convened at the regular meeting place of said District. The meeting, open to the public, and notice of said Board in said District giving the date, place and subject thereof, has been posted as described by Article 6252-17, Section 3A,V.A.T.C.**

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**MEMBERS PRESENT**

Danny Hewitt  
Martha Stanton  
Glenda O'Neal  
Diana Diaz  
Arnold Gray  
Tyrell Hobbs  
Kent Wilson

**MEMBERS ABSENT**

None

**OTHERS PRESENT**

Larry Price  
Michael Williams  
Debbie Brewer  
Shelton Chapman  
Staci Doyle  
Leeann Freeman  
Courtney Harryman  
Jennifer Haynie  
Danielle Huh  
Emily Jones  
Brandy Kennedy  
Allec Lincoln

Kim McAlpine  
Michelle Mullinnix  
Adrianne Rettig  
Melanie Richard  
Linda Rojas  
Mike Thompson  
Corey Tunnell  
Jean Wragge  
Kody Yerger, M.D.  
Robert York  
Cathy Knouse

**CALL TO ORDER, ESTABLISH QUORUM AND EXCUSE ABSENTEES**

Mr. Danny Hewitt, President, called the meeting was called to order at 3:00 p.m. A quorum was present.

**INVOCATION**

Mr. Larry Price led those present in the invocation.

**PLEDGE TO THE FLAG**

Those present recited the Pledge of Allegiance to the United States flag.

### **COMMENTS FROM CONCERNED CITIZENS**

There were no concerned citizens in attendance.

### **CORRESPONDENCE**

A note of appreciation from Family Medicine Center staff was read.

A five star Google review from Mrs. Susan Loftice was read.

Mr. Arnold Gray conveyed Ms. Lisa Everman's verbal complimentary remarks concerning the Hospital.

### **CONSENT AGENDA ITEMS**

The Board minutes, Executive Committee minutes, Accounts Receivable report, Family Medicine Center report, Infection Control report, Kosse Community Health Clinic report, Marketing report, Nursing Home Maintenance and Operations report, Nursing report, Plant Operations report, Rettig Family Health Care report and Inservice were presented. The motion was made by Mrs. Glenda O'Neal, seconded by Mr. Gray and unanimously carried to approve the consent agenda.

### **APPOINTMENT AND OATH OF OFFICE FOR POSITION 3**

Statement of Elected/Appointed Officer was given to Mr. Tyrell Hobbs and he was given the oath of office and sworn into position 3 on the Board of Directors.

### **DISCUSSION AND ACTION ON POLICIES AND PROCEDURES**

#### **Administration**

The Physician/Provider Recruitment policy was updated to include provisions for provider retention to comply with National Health Service Corps requirements. The policy is renamed Physician/Provider Recruitment and Retention Plan.

#### **Business Office**

The Sliding Fee Procedures policy was updated to comply with National Health Service Corps requirements for:

- federal poverty guidelines,
- eligibility for uninsured and underinsured patients
- allowance for patients to be required to apply for Medicaid or be denied for Medicaid in order to qualify for Sliding Fee Services
- updating the application to remove social security number, insurance and marital status

The Charity Care policy was previously maintained in the Behavioral Health Program. The Behavioral Health Program Director is requesting to remove the Charity Care policy since it is now maintained in the Business Office.

## Exposure Control

### Section VI. A Exposure Plan Policy

- “FIRM” Healthcare Organization

### Section VI. B. Program Administrator

- Changed Human Resources to Employee Health for responsible persons for medical actions, record keeping and training.

### Section IX. Hepatitis B Vaccine Program

- Added “by follow up evaluation with employee PCP or Infection control Medical Director.” For clarification of what further testing entails for vaccine non responders.

### Section XII. Post-Exposure Evaluation and Follow Up

- Changes responsible persons from Human Resources to Employee Health.

### Section XV. Training Records

- Changed “Medical Records - In accordance with OSHA’s bloodborne pathogens standard, a medical record will be maintained by Human Resources to Employee Health.
- Added “Training records are maintained by Employee Health and stored in Human Resources. “

## Human Resources

E 108 Licenses and Certifications policy has been updated to include a two-step verification method in which the department manager and Human Resources will maintain records of current licensure for all staff.

## Radiology

The Operating and Safety procedures were updated to include that protective devices must not be included in the automatic exposure control (AEC) field during automatic exposures.

The Occurrence Reporting policy was updated to reflect risk manager’s involvement and follow-up.

CT      There were no changes.

MRI    There were no changes.

Nuclear Medicine      There were no changes.

#### Ultrasound

The Ultrasound policy was revised from filling bottles and cleaning bottles for ultrasound gel to using individual packets of gel. In addition, the chaperone verbiage was changed to reflect that female sonographers may be chaperoned by another health care individual while performing any penile, scrotal or endocavity procedures on a male patient at the patient's or sonographer's request.

The Contrast Echocardiography policy is new and provides for activated Definity RT (Perflutren Lipid Microsphere) Injectable Suspension indicated for use in patients with suboptimal echocardiograms to opacify the left ventricular chamber and to improve the delineation of the left ventricular endocardial border. Ultrasound Enhancing Agent (UEA) echocardiography is also helpful in other situations defined by the American Society of Echocardiography. Agitated saline contrast (or bubble study) is used to identify intracardiac and extracardiac shunts.

#### Specialty Clinic

The Outpatient Procedure Screening policy is being added to screen patients for outpatient colonoscopies and EGD procedures to make sure the physician is aware if a patient is at high risk for potential complications.

The Endoscopy Checklist policy is being added to provide a safety checklist that is completed for each procedure requiring anesthesia.

The members of the Board examined each policy and procedure and the motion was made by Mr. Kent Wilson to approve the revisions to the Administration, Business Office, Exposure Control, Human Resources, Radiology, Ultrasound and Specialty Clinic policies and procedures. The CT, MRI and Nuclear Medicine policies and procedures are approved as written. The motion was seconded by Mrs. Martha Stanton and unanimously approved.

#### **QUALITY, RISK AND REGULATORY DISCUSSION AND ACTION**

The October 19, 2022 minutes of the Quality Assurance and Performance Improvement Committee and the Risk Management/Safety Committee were presented and reviewed. Mr. Gray raised a question concerning the number of Rehabilitation Department patients no longer being reported. Mrs. Allec Lincoln responded by stating that she will speak with Ms. Julie Wilson about adding this to the newly revised reporting form. She provided the number of physical therapy, occupational therapy and speech therapy patients for the months of July, August and September.

#### **COMPLIANCE OFFICER REPORT**

Mr. Price informed the directors that Ms. Wilson has been out of the Hospital and will return tomorrow.

There are no policy and procedure updates and there are no incidents to report.

## **FINANCIAL REPORT**

Mr. Michael Williams presented the Financial Report for the month ending September 30, 2022. Total inpatient revenues for the month of September were \$148,428.74 and the amount budgeted was \$325,115, which is 54.35% less than budget. The prior year inpatient revenues were \$1,331,538.93. Swingbed revenues for the month of September were \$253,938.55 and the amount budgeted was \$320,745, which is 20.83% less than budget. The prior year Swingbed revenues were \$88,784.47. Outpatient revenues for the month of September were \$4,520,938.64 and the amount budgeted was \$4,401,344, which is 2.72% more than budget. The prior year outpatient revenues were \$4,794,310.65. The total revenues for the month of September was \$7,695,577.68 and the amount budgeted was \$6,023,093, which is 27.77% more than budget. The prior year total revenues were \$8,980,968.82. Total revenue deductions for the month of September were \$3,480,459.25 and the amount budgeted was \$3,301,184, which is 5.43% more than budget. The prior year deductions from revenue were \$4,108,811.93. Expenses for the month of September were \$2,367,842.47 and the amount budgeted was \$2,235,370, which is 5.93% more than budget. The prior year expenses were \$2,276,594.30. The actual net operating profit for the month of September was \$1,847,275.96 and the operating profit amount of \$486,539 was budgeted which is 279.68% more than budget. The prior year net operating profit was \$2,595,562.59. Special items affecting the profit and loss statement total \$962,149.72 and include recording receipts for earned COVID in the amount of \$439,220.31 and Medicaid Dispro in the amount of \$522,929.41. The net operating profit without the special items is \$885,126.24. A report of collections and expenses reflects that in the past twelve months collections total \$22,056,711.03 and expenses total \$26,278,974.38 and that 83.93% of Hospital expenses are covered by collections.

## **INVESTMENT REPORT**

The South Limestone Hospital District invested funds report was presented by Mr. Michael Williams. The Hospital has a total of \$54,822,540.31 invested in texpools and certificates of deposit as of September 30, 2022. Currently the Hospital has three texpool accounts, two for the general fund and one for the ambulance. The Hospital has five certificates of deposit in terms of 12 months or less. It was noted that interest rates are increasing. The year-to-date interest is calculated beginning with the first day of the Hospital's fiscal year October 1. The Hospital is in compliance with its investment strategy and the Public Funds Investment Act.

## **LMC FOUNDATION REPORT**

The LMC Foundation met Monday, October 17, 2022. At that meeting there was discussion concerning the fall raffle fundraiser. There will be three items included in the raffle: a \$1,500 Visa gift card, a \$750 Visa gift card and a \$250 gift card for Old Gin restaurant in Wortham. Tickets are \$10 apiece or six tickets for \$50. LMC Foundation members and the Hospital will sell tickets. The drawing will be held Monday, November 21, 2022.

## **ADMINISTRATION REPORT**

Management was saddened to learn that Greg Blaisdell, M.D. passed away on September 27, 2022. Dr. Blaisdell began seeing patients in the Behavioral Health Program on August 1, 2008. Cody McMahan, M.D., Ascension Medical Group, has expressed interest in treating patients at Limestone Medical Center.

Mr. Price informed the directors that the Transition Health managers of the Briarcliff Health Center and Chandler Nursing Center nursing homes are in agreement with the Hospital's decision to not proceed with an amendment to the existing management agreement.

Office space is being prepared for the arrival of David Fedro, D.O. and staff at Rettig Family Health Care. The provider services agreement with Dr. Fedro for home visits will become effective Tuesday, November 1, 2022.

The September 340B program profit is \$53,654.51. The Hospital and all three rural health clinics are participating in the 340B program and it has been very successful providing cost savings benefits for the patients. Management is considering adding Walmart pharmacy in Marlin. If a favorable decision is made, this pharmacy would be added in January 2023 to be effective in April 2023.

A reception in honor of Amy Silar, FNP-C will be hosted at Rettig Family Health Care on Tuesday, November 8, 2022, from 4:30 p.m. to 6:00 p.m. Management will send invitations to the patients of Dori Sims, PA-C to provide this time for introduction. Mrs. Sims will be leaving Rettig Family Healthcare on Wednesday, November 23, 2022.

The Hospital has received checks in the amount of \$114.11 and \$564.41 representing class member supplemental settlement payments.

Flu vaccine clinics are being conducted every Monday through Thursday from 9:00 a.m. to 12:00 p.m. and 1:00 p.m. to 4:00 p.m. and Friday from 9:00 a.m. to 12:00 p.m. in the Specialty Clinic.

Goldfish Partners continue to review candidates for the Family Medicine Center provider position. One physician expressed a strong desire to interview for the position; however, his spouse does not want to move to this area. The recruiter is reviewing four candidate applications at this time and three of the four candidates are currently in medical school. *Modern Healthcare* recently ranked the top ten recruiting firms in the nation and Goldfish Partners is fifth in the nation.

It is expected that Texas Department of State Health Services inspectors will return soon to follow-up concerning the July 26-27, 2022 survey. In addition a survey is also expected concerning the COVID-19 vaccines including a review of the exemption forms submitted.

Progress has slowed for the construction of the Limestone County Dialysis Center. The building foundation and parking lot have been constructed. Mr. Jim Micele, Project Superintendent, has assured Mr. Price that the project is indeed still in process. A builder from west Texas will constructing the facility. Mr. Alex Hagad, vascular consultant, stopped by Administration on Monday, October 24, 2022, and introduced Mr. Feddy Aquino, who trains dialysis center staff.

**DISCUSSION AND ACTION ON REVIEW AND AMENDMENT OF THE BYLAWS**

At the last meeting the Board members voted to amend the Bylaws to include that mandatory attendance is required for all special meetings that are called; all fiscal year goals will be re-evaluated semi-annually at a minimum and an employee of Limestone Medical Center will be charged with ensuring that all positions have successfully completed all required continuing education courses as well as mandatory education prescribed by the state. Mr. Kent Wilson made the motion to withdraw the amendments that he had proposed at the last meeting and to approve the Bylaws as written. The motion was seconded by Mrs. Stanton and approved.

**DISCUSSION AND ACTION ON APPROVAL OF 2021 TAX ROLL**

Pursuant to Chapter 26, Section 26.09 (e) Property Tax Code, the 2022 Tax Roll and total 2022 tax levy in the amount of \$4,470,288.39 was presented to the Board of Directors. Motion was made by Mr. Wilson, seconded by Mr. Gray and unanimously carried to approve the 2022 Tax Roll as assessed by Ms. Terri Lenamon, Chief Appraiser of Limestone County Appraisal District.

**EXECUTIVE SESSION**

The Board of Directors of South Limestone Hospital District did not enter into Executive Session pursuant to Section 551.074 of the Texas Government Code "Personnel Matters."

The Board of Directors of South Limestone Hospital District entered into Executive Session at 3:35 p.m. This closed session is held pursuant to Section 551.085 of the Texas Government Code "Governing Board of Certain Providers of Health Care Services."

**RETURN TO REGULAR SESSION**

The Board of Directors adjourned from closed session at 4:07 p.m. and returned to open session. There was no action.

**SETTING OF NEXT REGULAR BOARD MEETING**

The next regular meeting of South Limestone Hospital District Board of Directors was set for Tuesday, November 29, 2022, at 3:00 p.m. in the Hospital's Board Room.

**ADJOURN**

There was no further business and the meeting adjourned at 4:08 p.m.

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/s/  
Glenda O'Neal  
Secretary/Treasurer