

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

MINUTES

November 28, 2023

On this 28th day of November, 2023 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.

MEMBERS PRESENT

Danny Hewitt
Martha Stanton
Glenda O'Neal
Arnold Gray
Kent Wilson

MEMBERS ABSENT

Tyrell Hobbs

OTHERS PRESENT

Larry Price
Michael Williams
Debbie Brewer
Zac Buckner
Shelton Chapman
Leeann Freeman
Cheryl Hardin
Courtney Harryman
Jennifer Haynie
Anthony Holeman
Misty Hutchison

Emily Jones
Allec Lincoln
Michelle Mullinnix
Adrienne Rettig
Linda Rojas
Corey Tunnell
Hope Wallace
Julie Wilson
Jean Wragge
Robert York
Cathy Knouse

CALL TO ORDER, ESTABLISH QUORUM AND EXCUSE ABSENTEES

Mr. Danny Hewitt called the meeting to order at 3:05 p.m. A quorum was present.

The motion was made by Mrs. Martha Stanton to excuse the absence of Mr. Tyrell Hobbs. The motion was seconded by Mr. Kent Wilson and unanimously approved.

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

The Yager Foundation recognized the Hospital with a note of appreciation and a \$1,500 donation to support the Sexual Assault Forensic Examiner (SAFE) Program.

A positive Google review was posted by Mr. Charles Bratcher recognizing Rettig Family Health Care and Ms. Paula Mathison.

Mrs. Nohemi Howell and Mrs. Janie Marler sent a note of appreciation for the care provided by Limestone Medical Center staff.

CONSENT AGENDA ITEMS

The Board minutes, Accounts Receivable report, Family Medicine Center report, Infectious Disease report, Kosse Community Health Clinic report, Marketing report, Medical Staff minutes, Nursing report, Physician Credentialing Committee minutes, Plant Operations report, Rettig Family Health Care report, Rucker Clinic report and Inservice were presented.

The motion was made by Mr. Arnold Gray, seconded by Mr. Wilson and unanimously carried to approve the consent agenda.

DISCUSSION AND ACTION ON POLICIES AND PROCEDURES

There are no changes to the Environmental Services and Legal Compliance policies and procedures. The motion was made by Mrs. Glenda O'Neal that the Environmental Services and Legal Compliance policies and procedures are approved as written. The motion was seconded by Mrs. Stanton and unanimously approved.

DISCUSSION AND ACTION ON HOSPITAL AND CLINIC ROOFS

Mr. Zac Buckner and Mr. Anthony Holeman, Reclaim Construction, were introduced and provided information concerning the company. Mr. Holeman reviewed the Limestone Medical Center storm damage report including an overview of the roofs, hail damage and the reclaim construction process. An evaluation of the property has been conducted pertaining to the storm damage that was incurred in June 2023. The Hospital roof is the original roof that was installed in 2008 and has considerable hail stone damage that is covered by the Hospital's property insurance. All of the buildings were inspected and are covered by one policy. A question was raised concerning whether or not the insurance deductible amount pertains to the construction project in its entirety or if it pertains to per building renovation and that will have to be determined. There is a 15 year no dollar limit (NDL) warranty that is issued by the manufacturer, DuroLast Roofing Systems. Reclaim Construction has renovated approximately 18 hospitals and during the renovation process, construction staff is sensitive to patient care needs. The motion was made by Mr. Gray, seconded by Mr. Wilson and approved to contract with Reclaim Construction for the property insurance claim process filing and subsequent renovation and repair of all Hospital building roofs.

QUALITY, RISK AND REGULATORY DISCUSSION AND ACTION

The November 8, 2022 minutes of the Quality Improvement Committee and the Patient Safety/Risk Management/Workplace Violence Committee were presented and reviewed.

There are Quality Program changes for 2024. All departments will continue to attend the monthly Quality Assessment and Performance Improvement Committee (QAPI) meetings and seven departments will provide monthly reports each month on a rotating schedule. There will be a trial period for quarterly reporting detailed documentation. If this process is not successful through the implementation of changes and records of team meetings to facilitate changes, monthly reporting will resume. Managers will document Specific, Measurable, Achievable, Relevant and Time-bound (SMART) goals with a worksheet to document each departmental indicator. There will be documentation recording any recommendations made by the Medical Staff and the Board of Directors.

There were no patient and family engagement updates reported. There were no security, trends, significant events or department initiatives reported. All fire drills are current with after action reports received with specific notations concerning patient evacuation simulation. There were no hazardous communication incidents and no workplace violence incidents reported. There were no medication errors and no restraint usage. There was one patient fall in the Emergency Department examination room and there was one patient fall at the Emergency Room entrance.

COMPLIANCE OFFICER REPORT

There are no policy and procedures updates.

None of the Hospital associates are listed in the OIG Exclusion Database and none of the Hospital associates are listed with the Texas HHSC OIG.

An audit of 100 clinic charts was conducted for documentation completeness and accuracy and there were no problems noted. Mr. Jeremy Molnar, Cyber Trust Alliance, introduced the CEBA software program that is used to track compliance with HIPAA security and privacy rules. Management has purchased program utilization and will partner for a HIPAA Gap Analysis to identify a baseline and areas that require attention.

Education and training concerning the QAPI Program was provided to the department managers individually. The managers also received tools to assist with the development of meaningful indicators.

There were no compliance complaints, investigation and remedial action this month.

A review of the 340B Program compliance reveals 100% compliance for the claims reviewed. The 340B second sight report has been uploaded to the 340Besp website for review. All of the required paperwork has been submitted for the Health Resources and Services Administration (HRSA) 340B Audit. Management has contracted with FORVIS to perform a 340B audit and has submitted all of the required documentation to FORVIS.

The updated chargemaster has been uploaded to the Hospitals website. The Texas Department of Health and Human Services hospital price transparency online reporting form has been completed and receipt acknowledging continued compliance has been received.

Ms. Julie Wilson reported concerning the Rural Health Clinic Grant awarded by Health and Human Services Commission to promote immunizations. Two of the clinics have been approved and one clinic is awaiting final approval. When finalized, Rettig Family Health Care will receive \$299,593; Family Medicine Center will \$297,000 and Kosse Community Health Clinic will receive \$278,000. Grant funds may be utilized for salaries and marketing materials to promote immunizations.

INVESTMENT REPORT

The South Limestone Hospital District invested funds report was presented by Mr. Michael Williams. The Hospital has a total of \$75,266,847.76 invested in texpools and certificates of deposit as of October 31, 2023. 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. 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.

FINANCIAL REPORT

Mr. Michael Williams presented the Financial Report for the month ending October 31, 2023. Total inpatient revenues for the month of October were \$266,701.98 and the amount budgeted was \$292,773 which is 8.90% less than budget. The prior year inpatient revenues were \$71,595.38. Swingbed revenues for the month of October were \$190,904.18 and the amount budgeted was \$256,861 which is 25.68% less than budget. The prior year Swingbed revenues were \$108,110.61. Outpatient revenues for the month of October were \$5,633,551.68 and the amount budgeted was \$5,131,082 which is 9.79% more than budget. The prior year outpatient revenues were \$5,131,082. The total revenues for the month of October were \$7,248,593.44 and the amount budgeted was \$6,679,169 which is 8.53% more than budget. The prior year total revenues were \$5,671,924.95. The total deductions from revenue for the month of October were \$4,316,778.85 and the amount budgeted was \$4,040,753, which is 6.83% more than budget. The prior year deductions from revenue were \$3,307,296.59. Expenses for the month of October were \$2,357,057.42 and the amount budgeted was \$2,418,462 which is 2.54% less than budget. The prior year expenses were \$2,130,078.04. The actual net operating profit for the month of October was \$574,757.17 and the operating profit amount of \$219,964 was budgeted which is 161.30% more than budget. The prior year net operating profit was \$234,550.32. Special items affecting the profit and loss statement include recording Medicaid Dispro in the amount of \$17,237.89. There were no special items affecting the operating profit and loss. A report of collections and expenses reflects that in the past twelve months collections total \$24,909,312.51 and expenses total \$27,067,448.19 and that 92.03% of Hospital expenses are covered by collections. The Quality Incentive Payment Program for Nursing Homes report was reviewed.

LMC FOUNDATION REPORT

LMC Foundation met Monday, November 20, 2023, and discussed planning a monetary award fundraiser to be conducted in April 2024. LMC Foundation has donated \$3,500 to the Hospital to underwrite the cost of the annual employee appreciation and awards banquet. A special catered meal is being planned as the Hospital celebrates its 50 year anniversary.

DISCUSSION AND ACTION ON NURSING HOME MANAGEMENT AGREEMENT AMENDMENTS AND ADDITIONAL NURSING HOMES

In partnership with Fundamental Properties, South Limestone Hospital District will acquire two additional nursing homes namely Crimson Heights Health & Wellness in Humble and Terra Bella Health and Wellness Suites in Houston. The change of ownership documents will be filed by December 1, 2023. There will be additional nursing home and Hospital staffing requirements to support the change of ownership. Fundamental Properties has one additional nursing home being considered for change of ownership and is requesting that South Limestone Hospital District provide the monies up front for operations for this proposed facility. South Limestone Hospital District will charge a percentage fee for interest for this funding. The monies provided up front will be repaid once the change of ownership documents are filed and the monies released for funding.

The motion was made by Mr. Wilson to approve the opening of checking accounts for the Quality Incentive Payment Program (QIPP) for banking transactions with Mr. Larry N. Price and Mr. Michael F. Williams designated signers and to approve up front change of ownership funding with appropriate interest charges if management determines that the appropriate partnership criteria for the proposed addition of a nursing home with Fundamental Properties is met. The motion was seconded by Mr. Gray and approved.

Gulf Coast LTC Partners has conveyed to management that there may be an additional nursing home considered for change of ownership.

The motion was made by Mr. Wilson to approve the opening of checking accounts for the Quality Incentive Payment Program (QIPP) for banking transactions with Mr. Larry N. Price and Mr. Michael F. Williams designated signers if management determines that the appropriate partnership criteria for the proposed addition of a nursing home with Gulf Coast LTC Partners is met. The motion was seconded by Mr. Gray and approved.

Mr. Kenneth Broussard, Broussard Healthcare, has expressed his desire to speak with Mr. Price, however, Mr. Price is not aware of the conversation topic.

The motion was made by Mr. Wilson to authorize Mr. Larry N. Price to negotiate amendments to the Broussard Healthcare nursing home management agreements and to approve the opening of checking accounts for the Quality Incentive Payment Program (QIPP) for banking transactions with Mr. Larry N. Price and Mr. Michael F. Williams designated signers if management determines that the appropriate partnership criteria for the proposed addition of a nursing home(s) with Broussard Healthcare is met. The motion was seconded by Mr. Gray and approved.

ADMINISTRATION REPORT

In October, the 340B Program profit was \$4,276.61.

Kosse Community Health Clinic and City of Kosse hosted the expansion groundbreaking ceremony on Tuesday, November 7, 2023 at 10:00 a.m. The expansion construction is progressing.

The Vets, Rods and You car show hosted at Limestone Medical Center on Saturday, November 11, 2023 was very successful and was a positive community outreach opportunity. Plans are underway to host this event annually.

Representative Angelia Orr had to cancel her visit scheduled for Thursday, November 16, 2023. She has rescheduled that visit for Tuesday, January 9, 2024.

The LMC Volunteers met on Monday, November 20, 2023 for the last official LMC Volunteers meeting. The Volunteers are suspending organizational operations.

The Medical Staff met Tuesday, November 21, 2023. Mr. Wes Seidel, Vice President, Concord Medical Management, spoke with the physicians concerning the Hospital's hybrid program whereby Emergency Room physicians treat patients in the department and serve as hospitalists. Recently there have been issues recruiting physicians to work in the Emergency Room who are willing to also perform hospitalist duties. Management is considering available options to provide hospitalist coverage.

Health Resources and Services Administration (HRSA), Office of Pharmacy Affairs (OPA) is undertaking program integrity measures related to participation in the 340B Drug Pricing Program to ensure compliance with program requirements. Limestone Medical Center has been selected for audit and the preliminary site review for this audit will be conducted by telephone conference on Friday, December 1, 2023. The actual audit will be conducted January 8-9, 2024.

The Chartis Center for Rural Health has recognized Limestone Medical Center for performance leadership. As part of National Rural Health Day, LMC was recognized with a 2023 Performance Leadership Award for excellence in Quality and Patient Perspective. Chartis Center for Rural Health compiles top performance of 75th percentile or above and honors performance leadership among rural hospitals in quality, outcomes and/or patient perspective.

Construction is progressing for the Limestone County Dialysis Center. Uday Khosla, M.D. has interviewed an individual for the clinic manager position.

The Board members are invited to attend the Employee Christmas party on Friday, December 9, 2024, beginning at 5:00 p.m. at Living Proof Church.

The annual employee recognition banquet and awards ceremony will be hosted Saturday, January 27, 2024, at 5:00 p.m. at Central Baptist Church in Thornton.

EXECUTIVE SESSION

The Board of Directors of South Limestone Hospital District entered into Executive Session pursuant to Section 551.074 of the Texas Government Code “Personnel Matters-Evaluation of the Chief Executive Officer” at 4:12 p.m.

The Board of Directors of South Limestone Hospital District did not enter into Executive Session 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 4:39 p.m. and returned to open session.

The motion was made by Mrs. Stanton to approve the annual evaluation of the Chief Executive Officer and to compensate the Chief Executive Officer effective with the payroll period beginning January 14, 2024, a 5% pay increase and longevity bonus. The motion was seconded by Mr. Wilson and approved.

Mr. Larry Price joined the meeting at 4:42 p.m. The 2023 Chief Executive Officer Performance Appraisal was presented to Mr. Price for review. The directors expressed their appreciation for Mr. Price and the manner in which he performs his duties.

CANCEL DECEMBER MEETING

The motion was made by Mrs. O’Neal, seconded by Mrs. Stanton and unanimously approved to cancel the December 26, 2023 meeting of the Board of Directors.

SETTING OF NEXT REGULAR BOARD MEETING

The next regular meeting of South Limestone Hospital District Board of Directors was set for Tuesday, January 30, 2024, at 3:00 p.m. in the Hospital’s Board Room.

ADJOURN

There was no further business and the meeting adjourned at 5:00 p.m.

/s/

Glenda O’Neal
Secretary/Treasurer