



Agenda

Mangum City Hospital Authority

February 24, 2026 at 5:30 PM

City Administration Building at 130 N Oklahoma Ave.

The Trustees of the Mangum City Hospital Authority will meet in regular session on February 24, 2026, at 5:30 PM, in the City Administration Building at 130 N. Oklahoma Ave, Mangum, OK for such business as shall come before said Trustees.

CALL TO ORDER

ROLL CALL AND DECLARATION OF A QUORUM

CONSENT AGENDA

The following items are considered to be routine and will be enacted by one motion. There will be no separate discussion of these items unless a Board member (or a community member through a Board member) so requests, in which case the item will be removed from the Consent Agenda and considered separately. If any item involves a potential conflict of interest, Board members should so note before adoption of the Consent Agenda.

1. Approve January 27, 2026, regular meeting minutes as present.
2. Approve January 2026 Medical Staff Meeting Minutes
3. Approve January 2026 Clinic Report.
4. Approve January 2026 Quality Meeting Minutes
5. Approve January 2026 CCO Report.
6. Approve January 2026 CEO Report.
7. Discussion related to HIM Delinquencies-none to report.

FURTHER DISCUSSION

REMARKS

Remarks or inquiries by the audience not pertaining to any item on the agenda.

REPORTS

8. Financial Report for January 2026

OTHER ITEMS

9. Discussion and Possible Action to approve the Heartland Pathology Consultants, PC-Agreement for Anatomic Pathology Services for Medical Director Services
10. Discussion and Possible Action to Approve Meghan Smith as the MRMC Compliance Officer

11. Discussion and Possible Action to Approve Meghan Smith as the MRMC Risk Manager

EXECUTIVE SESSION

12. Discussion and possible action to enter into executive session for the review and approval of medical staff privileges/credentials/contracts for the following providers pursuant to 25 O.S. § 307(B)(1):
 - Credentialing
 - DIA Schedule 1 List of Providers 02/2026
 - Re-Credentialing
 - Dr. Laura Gilmore, MD-Courtesy Privileges

OPEN SESSION

13. Discussion and possible action in regard to executive session.

STAFF AND BOARD REMARKS

Remarks or inquiries by the governing body members, Hospital CEO, City Attorney or Hospital Employees

NEW BUSINESS

Discussion and possible action on any new business which has arisen since the posting of the Agenda that could not have been reasonably foreseen prior to the time of the posting (25 O.S. 311-10)

ADJOURN

Motion to Adjourn

Duly filed and posted at 3:30 p.m. on the 20th day of February 2026, by the Secretary of the Mangum City Hospital Authority.

Brittany McClintock Secretary



Minutes

Mangum City Hospital Authority Session

January 27, 2026 at 5:30 PM

City Administration Building at 130 N Oklahoma Ave.

The Trustees of the Mangum City Hospital Authority will meet in regular session on January 27, 2026, at 5:30 PM, in the City Administration Building at 130 N. Oklahoma Ave, Mangum, OK for such business as shall come before said Trustees.

CALL TO ORDER

Chairman Vanzant called the meeting to order at 5:30 p.m.

ROLL CALL AND DECLARATION OF A QUORUM

PRESENT

Trustee Cheryl Lively
Trustee Michelle Ford
Trustee Carson Vanzant
Trustee Lisa Hopper

ABSENT

Trustee Ronnie Webb
ALSO, PRESENT VIA PHONE INTERCOM
Dennis- Corporate CFO
Brandon- Chief Technology Officer
Adrienne- Mangum CFO
Chee- Corporate compliance
Robin- VP of Cohesive Operations
Cindy- COO hospital operations

CONSENT AGENDA

The following items are considered to be routine and will be enacted by one motion. There will be no separate discussion of these items unless a Board member (or a community member through a Board member) so requests, in which case the item will be removed from the Consent Agenda and considered separately. If any item involves a potential conflict of interest, Board members should so note before adoption of the Consent Agenda.

Before voting Trustee Lively made a statement about the November Quality Minutes. She stated that it was a "wild" month. She asked if it is standard procedure for somebody to have to sit at the nurse's station if they're prone to falls? CEO Martinez stated yes for safety.

Motion to approve.

Motion made by Trustee Vanzant, Seconded by Trustee Hopper.

Voting Yea: Trustee Lively, Trustee Ford, Trustee Vanzant, Trustee Hopper

1. Approve December 16, 2025, regular meeting minutes as present.
2. Approve November 2025 Medical Staff Meeting Minutes
3. Approve December 2025 Medical Staff Meeting Minutes

4. Approve December 2025 Clinic Report.
 5. Approve November 2025 Quality Meeting Minutes
 6. Approve December 2025 Quality Meeting Minutes
 7. Approve December 2025 CCO Report.
 8. Approve December 2025 CEO Report.
9. Approve the following forms, policies, appointments, and procedures previously approved on 1/15/2026 by Quality Committee and on 1/22/2026 by Medical Staff

Discussion and Possible Action to Approve the Policy and Procedure: MRMC-IV Line Management

Discussion and Possible Action to Approve the Policy and Procedure: MRMC- Oklahoma Physician Orders for Life-Sustaining Treatment (POLST) Form

Discussion and Possible Action to Approve the Policy and Procedure: MRMC- Information for Patients and Their Families- Your Medical Treatment Rights Under Oklahoma Law

Discussion and Possible Action to Approve the Policy and Procedure: MRMC- Indwelling Urinary Catheter Insertion/Removal Protocol

Discussion and Possible Action to Approve the Policy and Procedure: MRMC- Advance Directives Policy

Discussion and Possible Action to Approve the Policy and Procedure: MRMC- Foley Catheter Line Insertion/Removal Policy

Discussion and Possible Action to Approve the MRMC Blood Product Administration Policy.

Discussion related to HIM Delinquencies-none to report.

FURTHER DISCUSSION

No Further Discussion

REMARKS

Remarks or inquiries by the audience not pertaining to any item on the agenda.

No Remarks from the Public

REPORTS

10. Financial Report for December 2025

The average daily census for the month was 8.65. This is up one day from November and down one day from the year-to-date monthly average. The acute payer mix for December was 85% for Medicare and Medicare Managed Care with the prior month being 85% as well. The swing bed payer mix for December was 98% for Medicare and 2% for Medicare Managed care. The year-to-date for Medicare is 80% and Medicare Managed Care is 20%. The operating loss for December was \$111,000, which is up \$53,000 from November. The year-to-date operating margin was a loss of \$435,000. A lot of that is from the 2% Medicare pay mix from this month. Net patient revenue was \$1.37 million for the month, an increase of \$165,000 from last month and a decrease of \$61,000 from the year-to-date monthly average. 340B revenue was \$24,000 for December and expenses were \$14,000. Operating expenses were at \$1.52 million for December, which is up \$138,000 from the prior month and \$25,000 from the year-to-date monthly average. Patient days for December were at 268. That's up 37 days from November. Cash receipts for the month were \$1.41 million. That's a decrease of \$184,000 from the year-to-date monthly average and a decrease of \$638,000 from November. Cash disbursements were at \$2.48 million. Cash balance at the

December month end was \$1.1 million giving us about 24 days of cash on hand. The clinic average daily visits were 13, which is the highest they were all year. The year-to-date revenue for the clinic is \$597,000. Operating expenses were \$910,000, ending the year at a loss of \$313,000.

Trustee Ford asked what the Operating loss from the prior year was. It was answered that the net loss from last year was \$453,000.

OTHER ITEMS

11. Discussion and Possible Action to Approve the Master Affiliation Agreement Between Oklahoma Baptist University and Mangum Regional Medical Center

Motion to approve.

Motion made by Trustee Hopper, Seconded by Trustee Ford.

Voting Yea: Trustee Lively, Trustee Ford, Trustee Vanzant, Trustee Hopper

12. Discussion and Possible Action to Approve the Meraki Quote 37803 for a new access point for wireless connectivity with Port53 Technologies

Motion to approve.

Motion made by Trustee Vanzant, Seconded by Trustee Hopper.

Voting Yea: Trustee Lively, Trustee Ford, Trustee Vanzant, Trustee Hopper

13. Discussion and Possible Action to Approve the Meraki Quote 37894 for a new 48-port switch with license with Port53 Technologies

Motion to approve.

Motion made by Trustee Vanzant, Seconded by Trustee Hopper.

Voting Yea: Trustee Lively, Trustee Ford, Trustee Vanzant, Trustee Hopper

14. Discussion and Possible Action to Approve Amendment No.3 to 340B Contract Pharmacy Services Agreement with Puckett Discount Drug

Motion to approve Amendment No. 3.

Motion made by Trustee Hopper, Seconded by Trustee Vanzant.

Voting Yea: Trustee Lively, Trustee Ford, Trustee Vanzant, Trustee Hopper

15. Discussion and Possible Action to Approve the MRMC 2026 Budget

Motion to approve.

Motion made by Trustee Vanzant, Seconded by Trustee Ford.

Voting Yea: Trustee Lively, Trustee Ford, Trustee Vanzant, Trustee Hopper

16. Discussion and Possible Action to Approve Meghan Smith as the MRMC Infection Preventionist

Motion to Approve.

Motion made by Trustee Ford, Seconded by Trustee Vanzant.
Voting Yea: Trustee Lively, Trustee Ford, Trustee Vanzant, Trustee Hopper

17. Discussion and Possible Action to Approve Mark Chapman as the MRMC Safety Officer

Motion to approve.

Motion made by Trustee Lively, Seconded by Trustee Vanzant.
Voting Yea: Trustee Lively, Trustee Ford, Trustee Vanzant, Trustee Hopper

18. Discussion regarding the Big Beautiful Bill (Information Only)

It was stated that the projection is that Medicaid cuts to rural Oklahoma are going to be over \$5 million. It's projected that the cuts won't begin until 2029. In order to help mitigate part of that about 20%, beginning this year they put into effect the Rural Health Transformation Program (RHTP), which is \$50 billion from the federal government over the next 5 years. Oklahoma is getting \$223 million this year and is projected to get about \$1.1 million over the next 5 years. Currently there are no specific action for our hospital to take.

EXECUTIVE SESSION

19. Discussion and possible action to enter into executive session for the review and approval of medical staff privileges/credentials/contracts for the following providers pursuant to 25 O.S. § 307(B)(1):

- Credentialing
 - DIA Schedule 1 List of Providers 01/2026
- Re-Credentialing
 - David Arles, APRN-Courtesy Privileges

Motion to enter into Executive Session at 5:54 p.m.

Motion made by Trustee Vanzant, Seconded by Trustee Hopper.
Voting Yea: Trustee Lively, Trustee Ford, Trustee Vanzant, Trustee Hopper

OPEN SESSION

Motion to approve coming out of Executive Session at 5:55 p.m.

Motion made by Trustee Hopper, Seconded by Trustee Ford.
Voting Yea: Trustee Lively, Trustee Ford, Trustee Vanzant, Trustee Hopper

20. Discussion and possible action in regard to executive session.

Motion to approve the Credentialing and Re-Credentialing.

Motion made by Trustee Vanzant, Seconded by Trustee Hopper.
Voting Yea: Trustee Lively, Trustee Ford, Trustee Vanzant, Trustee Hopper

EXECUTIVE SESSION

21. Discussion and possible action to enter into executive session for the review and approval of discussing any matter where disclosure of information would violate confidentiality requirements of state or federal law pursuant to 25 O.S. § 307(B)(7):

- Trizetto Provider Solutions-Security Data Breach

Motion to approve entering into Executive Session.

Motion made by Trustee Vanzant, Seconded by Trustee Hopper.
Voting Yea: Trustee Lively, Trustee Ford, Trustee Vanzant, Trustee Hopper

OPEN SESSION

Motion to approve coming out of Executive Session at 6:02 p.m.

Motion made by Trustee Hopper, Seconded by Trustee Lively.
Voting Yea: Trustee Lively, Trustee Ford, Trustee Vanzant, Trustee Hopper

22. Discussion and possible action in regard to executive session.

No action.

STAFF AND BOARD REMARKS

Remarks or inquiries by the governing body members, Hospital CEO, City Attorney or Hospital Employees

Trustee Hopper stated that she would like to commend the Hospital for what they have been doing for the community. Hopper stated that she knew they did a lot of dinners and other things in December, had a toy drive, and now the cafeteria is open to the public Monday through Friday.

Trustee Vanzant stated that recently he has had a couple people reach out to him and let him know how unbelievable the care was.

NEW BUSINESS

Discussion and possible action on any new business which has arisen since the posting of the Agenda that could not have been reasonably foreseen prior to the time of the posting (25 O.S. 311-10)

No New Business.

ADJOURN

Motion to Adjourn

Motion to adjourn at 6:06 p.m.

Motion made by Trustee Vanzant, Seconded by Trustee Hopper.
Voting Yea: Trustee Lively, Trustee Ford, Trustee Vanzant, Trustee Hopper

Duly filed and posted at 12:30 p.m. on the 22nd day of January 2026, by the Secretary of the Mangum City Hospital Authority.

Carson Vanzant, Chairman

Brittany McClintock, Secretary

Mangum Regional Medical Center
Medical Staff Meeting
Thursday
January 22, 2026

MEMBERS PRESENT:

John Chiaffitelli, DO, Medical Director
Laura Gilmore, MD
Absent:
Guest:

ALLIED HEALTH PROVIDER PRESENT

Mary Barnes, APRN-CNP

NON-MEMBERS PRESENT:

Kelley Martinez, RN, CEO
Chelsea Church, PharmD
Nick Walker, RN, CCO
Meghan Smith, RN – Infection Control
Chasity Howell, RN – Utilization Review
Denise Shaw, RN – Quality
Lynda James, LPN – Drug Tech

1. Call to order
 - a. The meeting was called to order at 1:12 pm by Dr. John Chiaffitelli, Medical Director.
2. Acceptance of minutes
 - a. The minutes of the December 18, 2025, Medical Staff Meeting were reviewed.
i.Action: Dr.Chiaffitelli, Medical Director, made a motion to approve the minutes.
3. Unfinished Business
 - a. None.
4. Report from the Chief Executive Officer
 - o Operations Overview -
 - o Patient room remodeling continues

- Looking at clinic collections for November, we collected a total of \$416.44 up from \$575.36 at time of service.
 - Hospital upfront collections were at \$621.15 for the month of December down from \$827.00 in November.
 - Our toy drive concluded on 12/18/2025. We had a great turnout, all gifts donated were handed out.
 - We are also getting quotes from area contractors for repair work on our current lab that was struck by a vehicle.
 - We are now offering a breakfast and lunch menu to staff and the public.
 - We continue to work towards building a stronger reputation with our community
 - We have quotes to repair our signs.
 - Starting January 6th, 2026, rounds on swing bed patients will be completed 3 times a week by providers. This is to continually improve our patient care and satisfaction as well as staff satisfaction.
 - We are continually looking for new service lines to provide our community at the hospital and the clinic.
- Written report remains in the minutes.

5. Committee / Departmental Reports

a. Medical Records –

1. November – ER – 2 ER Note needed out of 130 - Completed

OBS – 0 out of 3

Acute – 1 Acute H&P and 2 DC summaries needed out of 13 -completed

SWB - 1 SWB H&P, 1 DC Summary out of 17 - completed

All notes were completed according to

Hospital By Laws.

2. December – ER – 1 ER Note needed out of 135 – Completed 1-7-2026

OBS – 0 OBS out of 3

Acute – 1 H&P in Acute note need out of 22 – Completed 1-07-2026

SWB – 0 SWB out of 19

OBS – 0 OBS out of 3

b. Nursing

Patient Care

- MRMC Education included:
 1. Nursing documentation updates are communicated to nursing staff weekly.
 2. Next nurse meeting to be held January 21st..
- MRMC Emergency Department reports 0 patients Left Without Being Seen (LWBS).
- MRMC Laboratory reports 1 contaminated blood culture set(s).

- With education completed on 01/02/206 with the lab tech by T. Bowen, Lab Director.
- MRMC Infection Prevention reports 0 CAUTI.
- MRMC Infection Prevention report 0 CLABSI.
- MRMC Infection Prevention reports 1 HAI, and 0 MDRO for the month of December, 2025.
 - Antibiotic associated C. Diff

Client Service

- Total Patient Days for December 2025 were 268. This represents an average daily census of 9.
- December 2025 COVID-19 statistics at MRMC: Swabs (0 PCR & 41 Antigen) with 1 positive.

Preserve Rural Jobs and Culture Development

- One-PM House Supervisor RN position is open. AM House Supervisor position is filled and is a great fit!
- Patients continue to voice their praise and appreciation for the care received at MRMC. We continue to strive for excellence and improving patient/community relations.

Written report remains in minutes.

c. Infection Control –

- Old Business
 - a. None
 - New Business
 - a. N/A
 - Data:
 - a. N/A
 - Policy & Procedures Review:
 - a. Completed July, 2024
 - Education/In Services
 - a. N/A
 - Updates: None at this time.
 - N95 Fit Tests – 0: N95 Fit Test
 - Annual Items:
 - a. Construction Risk Assessment - ICRA completed for OR to Lab conversion. Submitted to state by K. Martinez, CEO. No start date on this project at this time. Roof has been completed. ICRA for June 2024 completed.
 - b. Linen Services – No issues reported with new linen company.
- Written report remains in minutes.

d. Environment of Care and Safety Report

- i. Evaluation and Approval of Annual Plans
 - i.i. Old Business - -
 - a. Chrome pipe needs cleaned and escutcheons replaced on hopper

in ER – could not replace escutcheons due to corroded piping in wall – capped off leaking pipe under the floor to stop leak – hopper will be covered – remodel postponed.—Talked to contractor 10-4-2025 about cover for hopper – contractor measured and is making quote for cover.

- b. ER Provider office flooring needing replaced. Tile is onsite.- remodel is postponed.
- c. Stained ceiling tile throughout facility from leaking roof – Replacement Started 9-15-2025.
- d. Damaged wall and ceiling in X-Ray due to leaking roof – Repaired 9-15-2025 – Ready for paint. – Complete 12-1-2025.
- e. Damaged ceiling in OR2 due to leaking roof.
- f. New Hope Roof – Leak in Physical Therapy office after hail storm.
- g. Ceiling in CT area damaged due to leaking roof.- Repaired 9-15-2025 - -- Ready for Paint. Complete 12-01-2025
- i. Remove Velcro strips from data drops and replace with zip ties. Started 11-13-2025.
- j. Temperature Log on blanket warmer not current. Complete 10-24-2025.
- k. Camera Outside Pharmacy not working. Complete 11-07-2025.
- l. Alarm system and panic button for Pharmacy needing installed. – complete 11-13-2025
- m. Regulator on reserve oxygen manifold has small leak and needs replaced – APEX scheduled for repairs.
- i.i.i. New Business
 - a. Main entry has slight rise between ramp and sidewalk creating a possible trip hazard - contractor repairing quote to repair.
 - b. Blanket warmer log not current.
 - c. Need light installed for parking lot at New Hope.
 Written report remains in the minutes.

- e. Laboratory
 - i. Tissue Report – Approved
 - i.i. Transfusion Report – No transfusion report for December, 2025. Written report remains in minutes.

- f. Radiology
 - i. There was a total of – 183 X-Rays/CT/US
 - i.i. Nothing up for approval
 - i.i.i. Updates:
 - o PM completed on Medrad Power Injector
 Written report remains in minutes.

- g. Pharmacy
 - i. Verbal Report by Clinical Pharmacist
 - i.i. P & T Committee Meeting –

The P&T Committee Meeting was held on Tuesday, December 23, 2025.

i.i.i. Lorazepam injectable is available for order.

Demerol IV is unavailable.

i.v. Reviewing Policies & Procedures to be presented at a later date.

Written report remains in the minutes.

h. Physical Therapy

i. No report.

i. Emergency Department

i. No report

j. Quality Assessment Performance Improvement

- Risk Management

- Grievance – 0

- Fall with no injury – 2

- Fall with minor injury – 1

- Fall with major injury – 0

- Death – 0

- AMA/LWBS – 3-In Pt – 2- ER AMA -
OBS – SWB

- Quality – Minutes are in the minutes of Medical Staff Meeting.

- HIM – ED discharge instructions - Compliance

100% - D/C Note Compliance

100% - Progress Notes

100% - ED DC Instructions

100% - ED Provider Dx

- Med event – 3

- After hours access was – 36

Written report remains in the minutes.

k. Utilization Review

i. Total Patient days for November: 231

i.i. Total Medicare days for November: 185

i.i.i. Total Medicaid days for November: 5

iv. Total Swing Bed days for November: 197

v. Total Medicare Swing Bed days for November: 166

Written report remains in the minutes.

Motion made by Dr. John Chiaffitelli, Medical Director to approve Committee Reports for December, 2025.

6. New Business

- a. Review & Consideration of Approval of Policy & Procedure: MRMCC: –
Blood Product Administration Policy

- i.Motion:** made by John Chiaffitelli, DO, Medical Director, to approve the MRMC: Blood Product Administration Policy.
- b. Review & Consideration of Approval of Policy & Procedure: MRMC Appointment - 2026 MRMC Safety Officer – Mark Chapman
 - i.Motion:** made by John Chiaffitelli, DO, Medical Director, to approve the Appointment – 2026 MRMC Safety Officer – Mark Chapman.
- c. Review & Consideration of Approval of Policy & Procedure: MRMC – Appointment 2026 – Infection Preventionist – Meghan Smith
 - i.Motion:** made by John Chiaffitelli, DO, Medical Director, to approve the MRMC: - Appointment 2026 Infection Preventionist – Meghan Smith.
- d. Review & Consideration of Approval of Policy & Procedures: MRMC – IV Line Management Policy*
 - i.Motion:** made by John Chiaffitelli, DO, Medical Director, to approve the MRMC - IV Line Management Policy*.

7, Adjourn

- a, Dr Chiaffitelli made a motion to adjourn the meeting at 1:31 pm

Medical Director/Chief of Staff

Date



Clinic Operations Report

Mangum Family Clinic

January 2026

Monthly Stats	January 2025	January 2026
Total Visits	187	167
Provider Prod	157	160
RHC Visits	182	154
Nurse Visits	5	2
Televisit	0	0
Swingbed	11	47

Provider Numbers	RHC	TH	SB
Ogembo	134		
Sanda	33		
Chiaffitelli			47

Payor Mix	
Medicare	38
Medicaid	54
Self	7
Private	68

Visits per Geography	
Mangum	130
Granite	15
Altus	2
Duke	4

Month	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total
Visits	167												

Clinic Operations:

- Clinic was closed 01/01/2026 and did not have a provider on 01/02/2026.
- Clinic was closed due to hazardous weather conditions on 01/23/2026 and 01/26/2026 and did not have a provider on 01/27/2026.

Quality Report:

Improvement Measure	Actual	Goal	Comments
Reg Deficiencies	0	0	13 audited
Patient Satisfaction	5	5	3 excellent; 2 good
New Patients	13	10	good
No Show	6.68%	<12%	25 No shows
Expired Medications	0	0	None noted.

Outreach:

- Clinic Facebook postings.

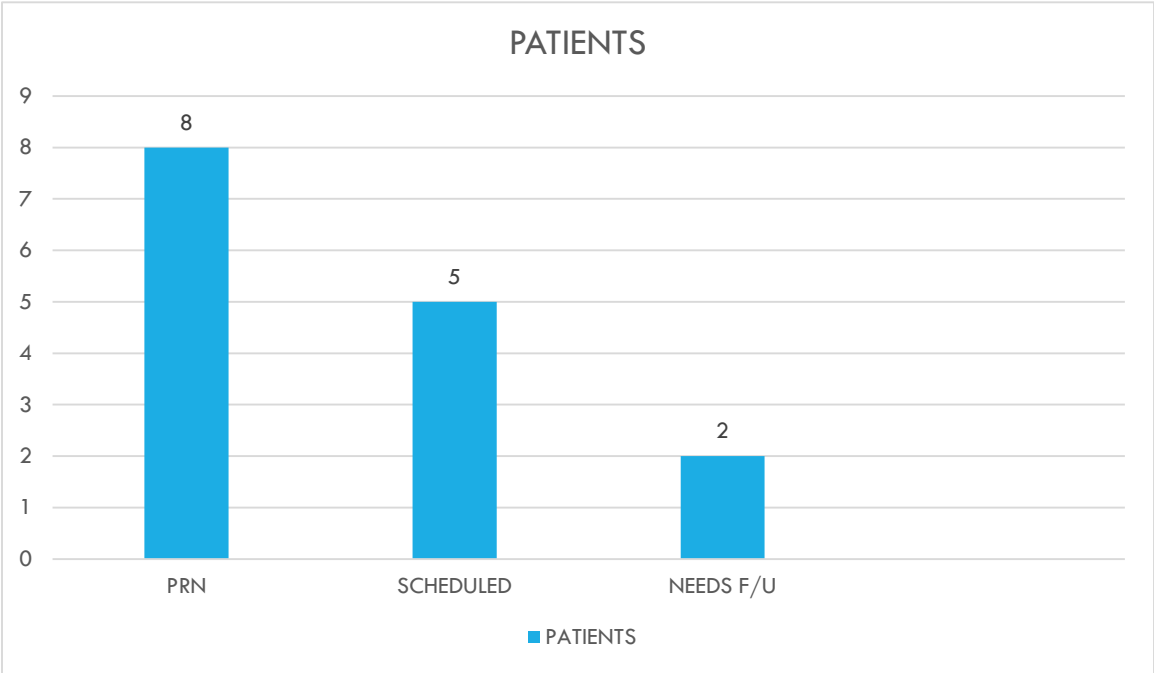
Summary :

Overall, the month performed at a decent level despite several operational challenges. Activity was impacted by winter storm–related closures and a public holiday, which reduced available service days. In addition, there were two days when the clinic remained open but operated without coverage. Considering these factors, performance for the month was solid and in line with expectations.

“You love, you serve, and you show people you care. It’s the simplest, most powerful, greatest, success model of all time.” Joe Gordon.

NEW PATIENT TRACKING

MANGUM FAMILY CLINIC



**Mangum Regional Medical Center
Quality and Patient Safety Committee
Meeting
Jan 2026 Meeting Minutes**

Meeting Location: OR	Reporting Period: Dec 2025	
Chairperson: Dr Gilmore	Meeting Date: 01/15/2026	Meeting Time: 14:00
Medical Representative: Dr Gilmore	Actual Start Time: 1404	Actual Finish Time: 1500
Hospital Administrator/CEO: Kelley Martinez	Next Meeting Date/Time: tentatively 02/12/2026 @ 14:00	

Mission: To provide our Mangum community and surrounding counties with convenient, gold-standard “dependable and repeatable” patient care, while assisting and supporting all their medical healthcare needs.

** Items in blue italics denote an item requiring a vote*

I. CALL TO ORDER				
Agenda Item	Presenter	Time Allotted	Discussion/Conclusions	Decision/Action Items
A. Call to Order	QM	1 min	Called to order at 1404	Approval: First – Nick, Second– Stephanie
II. COMMITTEE MEETING REPORTS & APPROVAL OF MINUTES				
Agenda Item	Presenter	Time Allotted	Discussion/Conclusions	Decision/Action Items
A. Quality and Patient Safety Committee <i>1. Approval of Meeting Minutes</i>	Denise Shaw	2 min	Meeting minutes – Dec 2025	Approval: First – Tonya , Second – Stephanie
B. Environment of Care (EOC) Committee <i>1. Approval of Meeting Minutes</i>	Mark Chapman	2 min	Meeting minutes – Dec 2025	Approval: First – Kelley , Second – Stephanie
C. Infection Control Committee <i>1. Approval of Meeting Minutes</i>	Meghan Smith	2 min	Meeting minutes – Dec 2025	Approval: First – Chasity , Second – Tonya
D. Pharmacy & Therapeutics (P&T) Committee <i>1. Approval of Meeting Minutes</i>	Chelsea Church/ Lynda James	2 min	Meeting minutes – None Next P&T – Jan 2026?	
E. Health Information Management (HIM)/Credentialing Committee <i>1. Approval of Meeting Minutes</i>	Jessica Pineda/ Kaye Hamilton	2 min	Meeting Min – Nov 2025/Dec 2025	1.) Approval: First – Tonya, Second – Meghan

**Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
Jan 2026 Meeting Minutes**

				2.) Approval: First – Stephanie, Second – Meghan
D. Utilization Review (UR) Committee 1. <i>Approval of Meeting Minutes</i>	Chasity Howell	2 min	Meeting Minutes – Dec 2025	Approval: First – Tonya, Second – Stephanie
III. DEPARTMENT REPORTS				
Agenda Item	Presenter	Time Allotted	Discussion/Conclusions	Decision/Action Items
A. Nursing/Emergency Department	Nick Walker	5 min	Blood utilization – 8 units/3 episodes Code Blue – 2 restraint - 1	Acute chart Chief complaint accuracy being added to the 2026 workbook for monitoring Hoover mat obtained for transfer/repositioning of obese patients Nurse meeting scheduled for 01/21/2026
B. Radiology	Pam Esparza	2 min	3 repeats; 1 marker, 1 clipped anatomy, 1 metal item on clothing	PM completed on injector with no issues
C. Laboratory	Tonya Bowan	8 min	79 – repeated labs, all critical repeats 1 repeat on aerobic/anaerobic culture from CHH due to rejection of expired swab	12/02/25 - changed back to ID Now 12/05/25 - Siemens replaced solenoid on EXL200
D. Respiratory Care	Heather Larson	2 min	0 vent day 14 neb changes	Director out – continued issues with EKG times
E. Therapy		2 min	Total # of Sessions Performed 192 -PT 126-OT 29 -ST	Director out – Corp covering until new director

**Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
Jan 2026 Meeting Minutes**

			Improved Standard Assessment Scores: 2- PT 2- OT 1- ST	
F. Materials Management		2 min		Director out – new hire in process
G. Business Office	Desarae Clinesmith	2 min	DL – 66%; pt did not provide ID, staff attempted Cost Share – 91%; afterhours, BO followed up the next day with attempts to collect	
H. Human Resources	Stephanie Hughes	2 min	1 new hire 2 open positions for the reporting period	
I. Environmental Services	Mark Chapman	2 min	100% terminal room cleans	
J. Facility/Plant Operations	Mark Chapman	2 min	24 extinguishers checked 1 boiler checks 1 generator/transfer switch inspection 15 – filter checks 6 egress inspections	Roof work on New Hope Building began today
K. Dietary	Treva Derr	2 min	Daily meal count – 100%	Stove in kitchen still having issues, no further updates on parts at this time
L. Information Technology		2 min	Director out – will defer	Local Director out – Corp filling in until new hire begins
M. Strong Minds	Brittany Nelms/Brittany Niles	2 min	1 active patient, missed appointments with staff attempts to reschedule	Working on outreach at nursing home and there have been some discussions about including other insurances as a benefit to increase patient numbers

IV. OLD BUSINESS

**Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
Jan 2026 Meeting Minutes**

V. NEW BUSINESS				
Agenda Item	Presenter	Time Allotted	Discussion/Conclusions	Decision/Action Items
A. New Business	QM	2 min	See policy/procedures below 2025 Workbook Review	Discussed areas that did not meet goal for the 2025 year and anticipated areas that will be reflected in the 2026 workbook as well as added area for monitoring of correct dx on acute charts at time of dc
VI. QUALITY ASSURANCE/PERFORMANCE IMPROVEMENT DASHBOARD REPORT				
Agenda Item	Presenter	Time Allotted	Discussion/Conclusions	Decision/Action Items
A. Volume & Utilization	CM	5 min	AMA – Pt to the ED for c/o. Seen and evaluated by provider with dx and provider recommendations for admission to inpatient for continued treatment. Patient is agreeable to treatment in the ED but declines inpatient admission for further treatment. Pt continues to decline inpatient admission. AMA signed and patient d/c from the ER home.	
B. Case Management	CM	8 min	CAH readmits – 4	
C. Risk Management	QM	10 min	Deaths - 3 1.) In-patient – Patient direct admit for SWB services. During hospitalization course patient received iv therapy/ABT, iv nutrition, etc. Patient continued to have decline and complications. Family met with provider and discussed patient current state and end of life care. Family was agreeable to comfort care, patient currently DNR.	Complaints - 1.) Nurse educated on therapeutic communication 2.) Tech apologized, patient proceeded with US as ordered with no other concerns or complaints other than being "triggered" by tech's name. Unable to offer another staff to preform US due to only one certified staff in US.

**Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
Jan 2026 Meeting Minutes**

		<p>Patient expired while inpatient as an expected death.</p> <p>2.) ER – Patient brought in the ER via EMS. EMS reports CPR efforts began when they arrived on scene. CPR efforts were not successful despite all exhausted efforts, pt expired in the ED.</p> <p>3.) ER – Patient brought to the ER via EMS. Patient asystole on arrival to ED, CRP attempts made while in the ED. CPR attempts were not successful, patient expired in the ED.</p> <p>Complaints – 2</p> <p>1.) Pt reports unprofessionalism by ER nurse during ER visit on 12/05/2025. CEO spoke with patient and is agreeable to education to nurse on therapeutic communication with ER patients. Denies any further concerns to CEO and satisfied with results</p> <p>2.) Inpatient with orders for US ordered by provider, upon tech arriving to get patient for US. US tech introduced herself " Hi my name is XX and I will be performing your ultrasound today", patient immediately became upset and told tech that they were "triggered". Tech</p>	<p>Falls -</p> <p>Falls with no injury -</p> <p>1.) Immediate actions taken – assisted up and back to the bed , assessment preformed, post fall assessment completed by nursing staff Post fall precautions added – bed rails x 3, increased rounding QM reviewed incident/post fall assessment</p> <p>2.) Immediate actions taken – assisted up and back to the bed, assessment preformed, post fall assessment completed by nursing staff, Nursing staff ensured functionality of bed alarm Post fall precautions added – bed rails x 3, increased rounding, fall precaution education QM reviewed incident/post fall assessment</p> <p>Fall with minor injury -</p> <p>1.) Immediate actions taken – assisted up and back to the bed, assessment preformed, post fall assessment completed by nursing staff, provider notified for xray orders of wrist/hip (xray results with no fx noted, soft tissue swelling on wrist xray) Post fall precautions added – recliner with pull out bar for feet, bed alarm, increased rounding</p>
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**Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
Jan 2026 Meeting Minutes**

		<p>apologized, patient states that they had a child who has passed with the same name.</p> <p>Grievances – 0</p> <p>Workplace Violence Events - 0</p> <p>Falls - 3</p> <p>Falls w/o injury -</p> <p>1.) Patient found on floor, reports that they were attempting to get out of bed to shut the door. No injuries noted. Fall precautions in place prior to fall – low bed, bed alarm, non-skid socks, routine rounding, room free of obstructions, call light in reach, pt/family education on fall precautions Risk factors - >60 years, impaired cognition, sensory impairment, physical impairment (unsteady gait), hx of falls</p> <p>2.) Pt found on the floor by the edge of the bed, pt reports scooting to the edge of the bed; "I didn't fall" No injuries noted. Fall precautions in place prior to fall – low bed, bed alarm, non-skid socks, routine rounding, room free of obstructions, call light in reach, close to nurse station</p>	<p>QM reviewed incident/post fall assessment</p> <p>Other -</p> <p>Skin tear –</p> <p>1.) Skin tears cleaned with steri strips applied, pics sent to wound care. HS/CCO/QM notified</p> <p>2.) Edges were approximated, steri-strips/telfa/kerlex applied. Provider/family/HS/CCO/QM notified.</p> <p>Delay in Care –</p> <p>1.) Med Director notified on 12/01/2025 @ 0956 with new orders received for Rocephin 1gm IV x 14 days. CCO and Lab director notified of delay in care. CNO reports that lab will now call the culture results to the HS.</p>
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**Mangum Regional Medical Center
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			<p>Risk factors - >60 years, impaired cognition, physical impairment (unsteady gait)</p> <p>Fall with minor injury - 1.) Staff reports chair alarm going off, upon entering room patient was found on the floor on left side. Noted to have bruise and abrasion to left side of nose from glasses with c/o left wrist pain. Fall precautions in place prior to fall – chair alarm, non-skid socks, routine rounding, room free of obstructions, call light in reach, close to nurse station Risk factors - >60 years, sensory impairment, impaired cognition, physical impairment, hx of falls</p> <p>Other – 3 Skin tears - 1.) During AM round LPN noted patient to have skin tears to 1.) (L) ring finger knuckle 2.) (L) middle finger knuckle. Patient was not able to recall events that lead to skin tears</p> <p>2.) Nurse was placing IV on patient while second nurse was assisting in holding patient arm still. Patient jerked arm and skin on left forearm tore.</p> <p>Delay in Care – 1</p>	
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**Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
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			1.) Patient had UA collected on 11/26/2025 due to provider order status post CT results. Urine resulted on 11/29/2025. Provider was not notified of results on 11/29/2025, resulting in no new orders obtained. Results were sent to IC nurse and no CH or floor nurse.	
D. Nursing	CCO	2 min	Med reconciliation – 100% Preferred Pharmacy – 100% Hospital Formulary – 100%	
E. Emergency Department	CCO/QM	5 min	1.) ER log compliance – 99% 2.) EDTC Data – 100% 3.) LWBS – 0	
F. Pharmacy & Therapeutics (P&T)	Pharmacy	2 min	Next P&T – Jan 2026 After hours access - 48 ADR - 0 Med errors – 2 1) The patient was scheduled to receive ABT IV BID, with this specific instance the am dose. The nurse did not pull the medication and stated that she overlooked it on the EMAR. (KP LPN, staffing) 2) The patient was scheduled to receive supplement. The nurse reported that she believe she mixed it in with the other medications, but it was found in the original packaging in the room. (KP LPN, staffing)	Med errors - 1) The nurses were educated on visually verifying that they have the correct medication. The nurse was also advised to take their time during med pass. 2) The nurse did not add the med to the medication slurry as she thought. The medication and patient were scanned appropriately, the nurse was educated on the need to take their time to ensure all medications are administered. Lorazepam injectable has been on back order but is now available.

**Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
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			Dose omissions – 9; inhalers not carried in house and had to be ordered from wholesaler	
G. Respiratory Care	RT	2 min	0 unplanned decannulation 100% resp assessments 100% on Chart checks	
H. Wound Care	WC	2 min	1 wound development for the month - 1 - deep tissue injury in the month of December. The patient was admitted to SWB. Wound care was notified 8 days post admit via Tiger connect of a wound. Patient was declining and discharged to a higher level of care. Nursing staff documented the patient was on an air mattress. Patient discharged to higher level of care 4 days before wound care could evaluate the patient.	
I. Radiology	RAD	2 min	Pt site verification - 100% - critical report for the period, reported within the 1 hour time period	
J. Laboratory	LAB	5 min	1 – Blood culture contaminates	2 sets drawn with 1 contamination, education with staff member. Annual data review with Director, verified staff involved with contaminations
K. Infection Control/Employee Health	IC/EH	5 min	1 – Inpt HAIs 0 – MRDO 0 – VAE 1 – Cdiff 0 – CAUTI 0 - CLASBI	Patient presented to the ED with c/o initial complaint. Patient had been admitted to SNF for IV antibiotics. Patient admitted to with dx to include CAUTI. Treatment plan to include IV hydration and IV antibiotics. During the hospitalization course the patient was incontinent of dark loose stools. Hemocult stools ordered and C. diff

**Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
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				<p>test. Positive C diff results were received. Contributing factors: Prolonged antibiotic therapy, over age 65, recent hospital/skilled nursing stay, weakened immune system.</p> <p>Outcome: Patient discharged with a prescription to complete PO ABT.</p> <p>Conclusion: Suspect antibiotic associated C. diff</p>
L. Health Information Management (HIM)	HIM	2 min	<p>100% - D/C Note Compliance</p> <p>100% - Progress Notes</p> <p>96% - ED DC Instructions</p> <p>100% - ED provider Dx</p>	
M. Dietary	Dietary	2 min	100% - daily meal count	
N. Therapy	Therapy	2 min	Gait belt usage – 100%	
O. Human Resources (HR)	HR	2 min	<p>90 day evals – 100%</p> <p>Annual evals – 100%</p>	
P. Business Office	BOM	2 min	<p>Cost Share Collections –</p> <p>Med Necessity Verification –</p> <p>Drivers Licenses –</p>	
Q. Environmental Services	EVS	2 min	10/10 on room cleans	
R. Materials Management	MM	2 min	Electronic Requisitions – 100%	
S. Life Safety	PO	2 min	<p>Fire extinguisher Inspections -100%</p> <p>Egress checks – 100%</p>	

**Mangum Regional Medical Center
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T. Emergency Preparedness	EP	2 min	None for the reporting period	
U. Information Technology	IT	2 min	Director out – will defer	
V. Outpatient Services	Therapy	2 min	Temp logs – 100%	
W. Strong Minds	SM	2 min	Continuing outreach to boost patient numbers	

VII. POLICIES & PROCEDURES

Agenda Item	Presenter	Time Allotted	Discussion/Conclusions	Decision/Action Items
A. Review and <i>Approve</i>	QM	10 min	<ol style="list-style-type: none"> 1) Blood Product Administration Policy 2) 2026 MRMC Safety Officer – Mark Chapman 3) 2026 Infection Preventionist – Meghan Smith 4) IV Line Management Policy* 	<ol style="list-style-type: none"> 1. Approval: First – Tonya , Second–Stephanie 2. Approval: First –Kelley , Second–Chasity 3. Approval: First – Chasity, Second–Pam 4. Approval: First –Meghan , Second–Nick

**Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
Jan 2026 Meeting Minutes**

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VIII. PERFORMANCE IMPROVEMENT PROJECTS

IX. OTHER

X. ADJOURNMENT

Agenda Item	Presenter	Time Allotted	Discussion/Conclusions	Decision/Action Items
A. Adjournment	QM	1 min	There being no further business, meeting adjourned at 300 by Chasity seconded by D. Clinesmith	

MEMBERS & INVITED GUESTS

Voting MEMBERS				
Nick Walker		Lynda James	Chrissy Smith	
Chasity Howell	D. Clinesmith	Meghan Smith	Pam Esparza	Mark Chapman
Tonya Bowen	Stephanie Hughes	Brittany Niles	Dr. G (teams)	Kelley Martinez
Jessica Pineda				
Non-Voting MEMBERS				
Denise Shaw	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
Jan 2026 Meeting Minutes**

Sign-In Sheet
Date of Meeting: 01/15/2026

Title	Print Name	Signature
Chairman		
Administrator		
CCO		
Quality Manager		
Respiratory Care		
Drug Room Supervisor		
Physical Therapy		
Dietary		
Case Management		
HIM		
Business Office		
Infection Control		
Radiology		
Plant Operations		
Materials Management		
Environmental Services		
Laboratory		
Human Resources		
Strong Minds		
Other		



Chief Clinical Officer Report January 2026

Patient Care

- MRMC Education included:
 1. Nursing documentation updates are communicated to nursing staff weekly.
 2. Nurse meeting was held on January 21.

- MRMC Emergency Department reports that there are 0 patients Left Without Being Seen (LWBS).
- MRMC Laboratory reports 0 contaminated blood culture set(s).
- MRMC Infection Prevention reports 1 CAUTI.
- MRMC Infection Prevention report 0 CLABSI.
- MRMC Infection Prevention reports 0 HAI and 0 MDRO for the month of January 2026.

Client Service

- Total Patient Days for January 2026 were 327. This represents an average daily census of 11.
- January 2026 COVID-19 statistics at MRMC: Swabs (0 PCR & 36 Antigen) with 1 Positive.

Mangum Regional Medical Center												
Monthly Census Comparison												
	Jan	Feb	Mar	April	May	June	July	Aug	Sept	Oct	Nov	Dec
Inpatient acute	14											
Swing Bed	17											
Observation	3											
Emergency Room	130											
Lab Completed	2018											
Rad Completed	205											
Ventilator Days	0											

Preserve Rural Jobs and Culture Development

- One- PM House Supervisor RN position is open.
- Patients continue to voice their praise and appreciation for the care received at MRMC. We continue to strive for excellence and improving patient/community relations.



Chief Executive Officer Report January 2026

Operations Overview

- We have hired a new IT employee.
- Looking at clinic collections for January, we collected a total of \$443.74 up from \$416.44 at time of service.
- Hospital upfront collections were at \$1,205.64 for the month of January up from \$621.15 in December.
- Swing Bed rounds three times a week are going very well. We hope to see continued great patient and staff satisfaction.
- We are continually looking for new service lines to provide our community at the hospital and the clinic.
- We continue to work towards a strategic plan for the hospital and clinic.
- We are also looking at doing a provider driven Facebook post where they talk briefly about the current month's health focus.
- We continue to work towards moving our lab into the facility. Please see electrical engineer agreements.
- We continue to try to find a contractor that will give us two more quotes for the lab building repair.

Mangum Board Meeting Financial Reports

January 31, 2026

	REPORT TITLE
1	Financial Summary (Overview)
2	Cash Receipts - Cash Disbursements - NET
3	Financial Update (page 1)
4	Financial Update (page 2)
5	Stats
6	Balance Sheet Trend
7	Cash Collections Trend
8	Medicare Payables (Receivables)
9	Current Month Income Statement
10	Income Statement Trend
11	RHC YTD Income Statement
12	AP Aging Summary

Mangum Regional Medical Center
Financial Summary
January 31, 2026

	Current Month	Mthly Avg Prior Year	Variance
ADC (Average Daily Census)	10.52	9.73	0.79
Payer Mix % (Acute):			
MCR	48.57%	54.62%	-6.05%
MCR Mgd Care	37.14%	22.34%	14.80%
All Others	14.29%	23.04%	-8.75%
Total	100.00%	100.00%	0.00%
Payer Mix % (SWB):			
MCR	67.35%	79.71%	-12.36%
MCR Mgd Care	32.65%	19.35%	13.30%
All Others	0.00%	0.94%	-0.94%
Total	100.00%	100.00%	0.00%
Operating margin	10,467	(435,422)	
<i>Operating Margin (monthly average)</i>	10,467	(36,285)	46,752
NPR (Net Patient Revenue)	1,572,267	17,161,266	
<i>NPR (monthly average)</i>	1,572,267	1,430,106	142,161
Operating Expenses	1,587,281	17,902,547	
<i>Operating Expense (monthly average)</i>	1,587,281	1,491,879	95,402
NPR % of Oper Exp	99.1%	95.9%	
Patient Days	326	3,550	(3,224)
Oper Exp / PPD	\$ 4,869	\$ 5,043	\$ (174)
# of Months	1	12	
Cash Receipts (rnd)	1,348,412	19,097,911	
<i>Cash Receipts (monthly average)</i>	1,348,412	1,591,493	(243,081)
Cash as a % of NPR (s/b 100% min)	85.8%	111.3%	
Days Cash-On-Hand (Net of MCR Pay / Restrictions):			
Calendar Days	31	365	
Operating Exp / Day	\$ 51,203	\$ 49,048	\$ 2,155
Cash - (unrestricted)	1,019,825	1,161,872	(142,047)
Days Cash-On-Hand	19.9	23.7	
Days Cash-On-Hand: Minimum during month	10.1	12.6	(2.4)
MCR Rec (Pay) - "as stated - but to be adjusted"	123,348	92,857	30,491
AP & Accrued Liab	16,353,964	16,244,681	109,283
Accounts Receivable (at net)	1,551,232	1,192,826	358,406
Per AP aging schedule (incl. accruals)	Jan-26	Prior FYE	Net Change
Account Payable - Cohesive	14,101,995	14,084,830	17,165
Account Payable - Other	1,359,245	1,267,128	92,118
Total	15,461,240	15,351,958	109,283
Cohesive Loan	4,497,430	4,528,447	(31,017)

Mangum Regional Medical Center
Cash Receipts - Cash Disbursements Summary
1/31/26

	Current Month	COVID	Total Less COVID
Cash Receipts	\$ 1,348,412	\$ -	\$ 1,348,412
Cash Disbursements	\$ 1,491,009	\$ -	\$ 1,491,009
NET	<u>\$ (142,597)</u>	<u>\$ -</u>	<u>\$ (142,597)</u>



**Board of Directors
Mangum Regional Medical Center**

February 24, 2026

January 2026 Financial Statement Overview

- **Statistics**
 - The average daily census (ADC) for January 2026 was **10.52**– (PY fiscal year end of **9.73**).
 - Year-To-Date Acute payer mix was approximately **86%** MCR/MCR Managed Care combined.
 - Year-To-Date Swing Bed payer mix was **67%** MCR & **33%** MCR Managed Care. For the prior year end those percentages were **80% & 20%**, respectively.

- **Balance Sheet Highlights**
 - The cash balance as of January 31, 2026, inclusive of both operating & reserves, was **\$1.02M**. This decreased **\$142K** from December 31, 2025.
 - Days cash on hand, inclusive of reserves, was **19.9** based on January expenses.
 - Net AR increased by **\$358K** from December.
 - Payments of approximately **\$1.49M** were made on AP (prior 3-month avg was **\$1.85M**).
 - Cash receipts were **\$59K** less than in the previous month (**\$1.41M vs \$1.35M**).
 - The Medicare principal balance was completely paid off in the month of August 2024.



- Income Statement Highlights
 - Net patient revenue for January 2026 was **\$1.57M**, which is approximately an increase of **\$203K** from the prior month.
 - Operating expenses, exclusive of interest & depreciation, were **\$1.59M**.
 - 340B revenue was **\$22K** in January, this is a decrease of **\$2K** from the prior month.

- Clinic (RHC) Income Statement Highlights - actual & projected (includes swing bed rounding):
 - Current month's average visits per day = **14.0**
 - YTD Operating revenues = **\$67K**
 - YTD Operating expenses = **\$78K**
 - YTD Operating loss = **-\$11K**

MANGUM REGIONAL MEDICAL CENTER

Admissions, Discharges & Days of Care

Fiscal Year 2026

12/31/2026

	January	YTD
Admissions		
Inpatient	14	14
Swingbed	17	17
Observation	4	4
	<u>35</u>	<u>35</u>
Discharges		
Inpatient	13	13
Swingbed	18	18
Observation	4	4
	<u>35</u>	<u>35</u>
Days of Care		
Inpatient-Medicare	17	17
Inpatient-Medicare Managed Care	13	13
Inpatient-Other	5	5
Swingbed-Medicare	196	196
Swingbed-Medicare Managed Care	95	95
Swingbed-Other	0	0
Observation	6	6
	<u>332</u>	<u>332</u>
Calendar days	31	31
ADC - (incl OBS)	10.71	10.71
ADC	10.52	10.52
ER	132	132
Outpatient	130	130
RHC	291	291

MANGUM REGIONAL MEDICAL CENTER
Comparative Balance Sheet - Unaudited
Fiscal Year 2025

Item 8.

	<u>January</u>	<u>12/31/25</u>
Cash And Cash Equivalents	1,019,825	1,161,872
Patient Accounts Receivable, Net	1,551,232	1,192,826
Due From Medicare	123,029	92,538
Inventory	233,694	230,865
Prepays And Other Assets	1,554,966	1,570,019
Capital Assets, Net	1,449,909	1,454,496
Total Assets	<u>5,932,655</u>	<u>5,702,615</u>
Accounts Payable	15,461,240	15,351,958
AHSO Related AP	892,724	892,724
Deferred Revenue	141,879	0
Due To Medicare	(319)	(319)
Covid Grant Funds	-	0
Due To Cohesive - PPP Loans	-	0
Notes Payable - Cohesive	4,497,430	4,528,447
Notes Payable - Other	17,948	17,948
Alliantz Line Of Credit	-	0
Leases Payable	250,514	251,087
Total Liabilities	<u>21,261,416</u>	<u>21,041,844</u>
Net Assets	<u>(15,328,762)</u>	<u>(15,339,229)</u>
Total Liabilities and Net Assets	<u>5,932,655</u>	<u>5,702,615</u>

**Mangum Regional Medical Center
Cash Receipts & Disbursements by Month**

2024			2025			2026		
Month	Receipts	Disbursements	Month	Receipts	Disbursements	Month	Receipts	Disbursements
Jan-24	1,187,504	1,150,522	Jan-25	1,105,099	996,372	Jan-26	1,348,412	1,491,009
Feb-24	708,816	995,157	Feb-25	1,184,447	1,231,249	Feb-26		
Mar-24	1,236,158	1,073,824	Mar-25	1,289,275	1,250,266	Mar-26		
Apr-24	1,645,373	1,483,022	Apr-25	1,225,184	1,060,130	Apr-26		
May-24	1,273,007	1,062,762	May-25	1,481,774	1,044,123	May-26		
Jun-24	950,928	1,216,556	Jun-25	1,530,626	1,607,511	Jun-26		
Jul-24	1,344,607	1,562,407	Jul-25	2,452,132	1,209,562	Jul-26		
Aug-24	2,089,281	2,176,381	Aug-25	1,271,486	2,373,927	Aug-26		
Sep-24	1,183,508	1,322,228	Sep-25	1,837,975	2,032,771	Sep-26		
Oct-24	1,779,690	1,154,658	Oct-25	2,266,799	1,772,799	Oct-26		
Nov-24	770,820	1,370,620	Nov-25	2,045,662	1,298,783	Nov-26		
Dec-24	888,776	1,027,058	Dec-25	1,407,450	2,482,755	Dec-26		
	<u>15,058,468</u>			<u>19,097,911</u>			<u>1,348,412</u>	
Subtotal FY 2024	<u><u>15,058,468</u></u>		Subtotal FY 2025	<u><u>19,097,911</u></u>		Subtotal FY 2026	<u><u>1,348,412</u></u>	

**Mangum Regional Medical Center
Medicare Payables by Year**

	Original Balance	Balance as of 01/31/26	Total Interest Paid as of 01/31/26
2016 C/R Settlement	1,397,906.00	-	205,415.96
2017 Interim Rate Review - 1st	723,483.00	-	149,425.59
2017 Interim Rate Review - 2nd	122,295.00	-	20,332.88
2017 6/30/17-C/R Settlement	1,614,760.00	-	7,053.79
2017 12/31/17-C/R Settlement	(535,974.00)	(318.61)	269,191.14
2017 C/R Settlement Overpayment	3,539,982.21	-	-
2018 C/R Settlement	1,870,870.00	-	241,040.31
2019 Interim Rate Review - 1st	323,765.00	-	5,637.03
2019 Interim Rate Review - 2nd	-	1,802,867.00	-
2019 C/R Settlement	(967,967.00)	-	-
2020 C/R Settlement	(3,145,438.00)	-	-
FY21 MCR pay (rec) estimate	(1,631,036.00)	-	-
FY22 MCR pay (rec) estimate	(318,445.36)	-	-
2016 C/R Audit - Bad Debt Adj	348,895.00	-	16,927.31
2018 MCR pay (rec) Audit est.	-	(34,322.00)	-
2019 MCR pay (rec) Audit est.	(40,612.00)	-	-
2020 MCR pay (rec) Audit	(74,956.00)	-	-
FY23 (8-month IRR)	-	95,225.46	-
FY23 (8-month IRR) L4315599	1,918,398.00	-	155,799.09
FY23 MCR pay (rec) remaining estimate	-	-	-
FY24 MCR pay (rec) estimate	-	(176,300.00)	-
FY25 MCR pay (rec) estimate	-	83,762.00	-
FY26 MCR pay (rec) estimate	-	(30,491.00)	-
Total	7,009,696.31	(123,347.61)	1,355,350.56

Mangum Regional Medical Center
Statement of Revenue and Expense
For The Month and Year To Date Ended January 31, 2026
Unaudited

MTD				YTD				
Actual	Budget	Variance	% Change		Actual	Budget	Variance	% Change
233,308	311,924	(78,616)	-25%	Inpatient revenue	233,308	311,924	(78,616)	-25%
1,240,427	1,150,704	89,722	8%	Swing Bed revenue	1,240,427	1,150,704	89,722	8%
630,118	707,801	(77,683)	-11%	Outpatient revenue	630,118	707,801	(77,683)	-11%
145,592	177,785	(32,193)	-18%	Professional revenue	145,592	177,785	(32,193)	-18%
<u>2,249,445</u>	<u>2,348,214</u>	<u>(98,770)</u>	<u>-4%</u>	Total patient revenue	<u>2,249,445</u>	<u>2,348,214</u>	<u>(98,770)</u>	<u>-4%</u>
827,609	716,400	111,209	16%	Contractual adjustments	827,609	716,400	111,209	16%
(30,491)	-	(30,491)	#DIV/0!	Contractual adjustments: MCR Settlement	(30,491)	-	(30,491)	#DIV/0!
(108,872)	(93,473)	(15,399)	16%	SHOPP revenue	(108,872)	(93,473)	(15,399)	16%
(11,068)	54,611	(65,679)	-120%	Bad debts	(11,068)	54,611	(65,679)	-120%
<u>677,178</u>	<u>864,484</u>	<u>(360)</u>	<u>0%</u>	Total deductions from revenue	<u>677,178</u>	<u>864,484</u>	<u>(360)</u>	<u>0%</u>
1,572,267	1,483,730	88,536	6%	Net patient revenue	1,572,267	1,483,730	88,536	6%
3,872	5,452	(1,580)	-29%	Other operating revenue	3,872	5,452	(1,580)	-29%
21,609	21,065	544	3%	340B REVENUES	21,609	21,065	544	3%
<u>1,597,748</u>	<u>1,510,248</u>	<u>87,500</u>	<u>6%</u>	Total operating revenue	<u>1,597,748</u>	<u>1,510,248</u>	<u>87,500</u>	<u>6%</u>
				Expenses				
459,105	452,246	6,859	2%	Salaries and benefits	459,105	452,246	6,859	2%
71,745	84,925	(13,180)	-16%	Professional Fees	71,745	84,925	(13,180)	-16%
524,512	444,988	79,524	18%	Contract labor	524,512	444,988	79,524	18%
107,537	124,423	(16,886)	-14%	Purchased/Contract services	107,537	124,423	(16,886)	-14%
225,000	225,000	-	0%	Management expense	225,000	225,000	-	0%
83,971	82,864	1,107	1%	Supplies expense	83,971	82,864	1,107	1%
19,350	16,403	2,947	18%	Rental expense	19,350	16,403	2,947	18%
14,051	13,139	912	7%	Utilities	14,051	13,139	912	7%
328	1,304	(977)	-75%	Travel & Meals	328	1,304	(977)	-75%
8,128	13,460	(5,333)	-40%	Repairs and Maintenance	8,128	13,460	(5,333)	-40%
16,664	13,720	2,944	21%	Insurance expense	16,664	13,720	2,944	21%
13,863	13,266	597	5%	Other Expense	13,863	13,266	597	5%
13,660	15,391	(1,732)	-11%	340B EXPENSES	13,660	15,391	(1,732)	-11%
<u>1,557,914</u>	<u>1,501,131</u>	<u>56,784</u>	<u>4%</u>	Total expense	<u>1,557,914</u>	<u>1,501,131</u>	<u>56,784</u>	<u>4%</u>
<u>39,834</u>	<u>9,117</u>	<u>30,716</u>	<u>337%</u>	EBIDA	<u>39,834</u>	<u>9,117</u>	<u>30,716</u>	<u>337%</u>
<u>2.5%</u>	<u>0.6%</u>	<u>1.89%</u>		EBIDA as percent of net revenue	<u>2.5%</u>	<u>0.6%</u>	<u>1.89%</u>	
119	100	18	18%	Interest	119	100	18	18%
29,247	28,257	990	4%	Depreciation	29,247	28,257	990	4%
<u>10,467</u>	<u>(19,240)</u>	<u>29,707</u>	<u>-154%</u>	Operating margin	<u>10,467</u>	<u>(19,240)</u>	<u>29,707</u>	<u>-154%</u>
-	-	-		Other	-	-	-	
-	-	-		Total other nonoperating income	-	-	-	
<u>10,467</u>	<u>(19,240)</u>	<u>29,707</u>	<u>-154%</u>	Excess (Deficiency) of Revenue Over Expenses	<u>10,467</u>	<u>(19,240)</u>	<u>29,707</u>	<u>-154%</u>
<u>0.66%</u>	<u>-1.27%</u>	<u>1.93%</u>		Operating Margin %	<u>0.66%</u>	<u>-1.27%</u>	<u>1.93%</u>	

MANGUM REGIONAL MEDICAL CENTER**Statement of Revenue and Expense Trend - Unaudited****Fiscal Year 2026**

Item 8.

	<u>January</u>
Inpatient revenue	233,308
Swing Bed revenue	1,240,427
Outpatient revenue	630,118
Professional revenue	145,592
Total patient revenue	<u>2,249,445</u>
Contractual adjustments	827,609
Contractual adjustments: MCR Settlement	(30,491)
SHOPP Revenue	(108,872)
Bad debts	(11,068)
Total deductions from revenue	<u>677,178</u>
Net patient revenue	1,572,267
Other operating revenue	3,872
340B REVENUES	21,609
Total operating revenue	<u>1,597,748</u>
	99.1%
Expenses	
Salaries and benefits	459,105
Professional Fees	71,745
Contract labor	524,512
Purchased/Contract services	107,537
Management expense	225,000
Supplies expense	83,971
Rental expense	19,350
Utilities	14,051
Travel & Meals	328
Repairs and Maintenance	8,128
Insurance expense	16,664
Other	13,863
340B EXPENSES	13,660
Total expense	<u>1,557,914</u>
EBIDA	<u>\$ 39,834</u>
EBIDA as percent of net revenue	<u>2.5%</u>
Interest	119
Depreciation	29,247
Operating margin	<u>\$ 10,467</u>
Other	-
Total other nonoperating income	<u>\$ -</u>
Excess (Deficiency) of Revenue Over Expenses	<u>10,467</u>

Mangum Family Clinic
For the Month Ended and Year To Date January 31, 2026

	Current			Last FYE	Net Change
	Month	Year-To-Date	12-Month Projected		
Gross Patient Revenue	30,367	30,367	364,407	342,640	21,767
Less: Revenue deductions	37,177	37,177	446,127	254,389	191,738
Net Patient Revenue	67,545	67,545	810,534	597,028	213,506
Other Income (if any)	-	-	-	-	-
Operating revenue	67,545	67,545	810,534	597,028	213,506
Operating Expenses:					
Leased Salaries	22,235	22,235	266,822	238,089	28,732
Contract labor	56	56	669	1,969	(1,300)
Benefits	4,726	4,726	56,711	44,085	12,625
Provider Fees	6,481	6,481	77,772	88,636	(10,864)
Purchased/Contract services	5,767	5,767	69,201	67,107	2,094
Management expense	11,250	11,250	135,000	135,000	-
Supplies expense	157	157	1,888	7,708	(5,820)
Rental expense	1,750	1,750	21,000	21,444	(444)
Utilities	382	382	4,588	7,335	(2,747)
Repairs and Maintenance	333	333	3,997	868	3,129
Insurance expense	248	248	2,971	2,845	126
Other expense	478	478	5,730	4,591	1,139
CAH Overhead Allocation	24,154	24,154	289,848	289,847	1
Total Operating Expenses	78,016	78,016	936,195	910,335	25,860
Net Income (loss)	(10,472)	(10,472)	(125,661)	(313,307)	187,646

340B					
Gross revenues	21,609.18	21,609	259,310	191,188	68,123
Operating expenses	13,659.55	13,660	163,915	149,534	14,381
Profit (loss)	7,950	7,950	95,396	41,654	53,742
Net Income (loss) with 340B	(2,522)	(2,522)	(30,266)	(271,653)	241,388

Stats					
Onsite Visits	166	166	1,992	2,268	(276)
Swing Bed Visits	125	125	1,500	379	1,121
Telehealth, CCM, Nurse Visits	0	0	-	-	-
Total Visits	291	291	3492	2647	845

Payor Mix based on Total Visits					
Medicare		39%	39%	34%	6%
Managed Medicare		20%	20%	6%	13%
Medicaid / Managed Medicaid		19%	19%	23%	-5%
Commercial/Other		23%	23%	37%	-14%
Total		100%	100%	100%	0%

Clinic Days	21	21	252	252	-
Average Visit Per Day	14	14	14	11	3
Cost Per Visit	\$ 268.10	\$ 268.10	\$ 268.10	\$ 343.91	\$ (75.82)
Medicare Visit Cap		\$ 292.54	\$ 292.54	\$ 282.65	
Over (Under) Cap		\$ (24.44)	\$ (24.44)	\$ 61.26	

VENDOR NAME	DESCRIPTION	0-30 Days	31-60 Days	61-90 Days	OVER 90 Days	1/31/2026	12/31/2025	11/30/2025	10/31/2025
AMERISOURCE RECEIVABLES (ARFC)	Pharmacy Supplies	7,543.78	-	-	-	7,543.78	4,641.12	2,445.89	14,501.84
AT&T	Fax Service	-	-	-	-	-	2,284.32	3,153.09	3,275.87
BADGE BUDDIES LLC	Office Supplies	-	-	-	-	-	-	-	127.97
BIO-RAD LABORATORIES INC	Lab Supplies	-	-	-	-	-	-	1,429.68	-
BRIAN SHIDELER	Repairs/maintenance	-	4,558.55	-	-	4,558.55	-	-	-
CARDINAL HEALTH 110, LLC	Patient Supplies	-	-	-	(144.30)	(144.30)	(144.30)	(144.30)	(144.30)
CAREFUSION	Rental Equipment	4,449.00	-	-	-	4,449.00	-	4,449.00	4,449.00
careLearning	Training	3,442.50	-	-	-	3,442.50	-	-	-
CARLOS MENDOZA	Education/Training	750.00	-	-	-	750.00	-	-	-
CITY OF MANGUM	Utilities	5,606.15	-	-	-	5,606.15	-	-	6,400.66
CLEAN THE UNIFORM HOLDING COMP	Linen Services	4,217.87	-	-	-	4,217.87	1,201.29	2,800.58	4,229.87
CLIFFORD POWER SYSTEMS INC	Repair and Maintenance	-	-	-	-	-	3,465.00	-	-
COHESIVE HEALTHCARE MGMT	Mgmt Fees	225,000.00	4,766.66	229,766.66	2,524,983.99	2,984,517.31	2,990,836.47	3,213,012.76	3,198,246.10
COHESIVE MEDIRYDE LLC	Patient Transportation Service	-	-	-	-	-	-	-	2,950.00
COHESIVE STAFFING SOLUTIONS	Agency Staffing Service	478,567.95	766,951.04	776,411.61	9,095,547.31	11,117,477.91	11,093,993.51	11,812,352.51	11,816,997.33
COMMERCIAL MEDICAL ELECTRONICS	Quarterly Maintenance	-	-	-	-	-	1,750.00	-	-
CONVATEC, INC	Patient Supplies	3,426.00	-	-	-	3,426.00	-	-	-
COONTZ ROOFING, INC.	Repair and Maintenance	-	-	-	-	-	8,500.00	-	-
CRITICAL ALERT	Software license	-	-	-	-	-	-	-	2,060.72
DAN'S HEATING & AIR CONDITIONI	Repairs/maintenance	-	-	-	-	-	-	1,434.09	-
DIAGNOSTIC IMAGING ASSOCIATES	Radiology Purch Svs	2,150.00	-	-	-	2,150.00	2,150.00	2,150.00	2,150.00
DIRECTV	Cable service	-	-	-	-	-	297.60	297.60	297.60
DP MEDICAL SERVICES	Rental	1,750.00	-	-	-	1,750.00	-	-	-
DTG MEDICAL ELECTRONICS	Patient Supplies	-	-	-	-	-	822.89	964.89	-
DYNAMIC ACCESS	Vascular Consultant	1,591.36	-	-	-	1,591.36	795.67	-	-
EARTHSAFE CHEMICAL ALTERNATIVE	Patient Supplies	838.36	-	-	-	838.36	-	-	-
eCLINICAL WORKS, LLC	RHC EHR	-	-	-	-	-	3,427.66	3,170.94	-
FEDEX	Shipping	17.92	-	-	-	17.92	-	32.17	78.82
FIRST DIGITAL COMMUNICATIONS	IT Support Services	-	-	-	-	-	-	-	(22.32)
FOX BUILDING SUPPLY	Repairs/maintenance	837.83	-	-	-	837.83	-	-	111.92
FUCHA RADIO, LLC	Advertising	110.00	-	-	-	110.00	110.00	-	-
GEORGE BROS TERMITE & PEST CON	Pest Control Service	-	-	-	-	-	-	-	200.00
GRAINGER	Maintenance Supplies	193.41	-	-	-	193.41	661.56	-	508.49
GREER COUNTY TREASURER	Insurance	-	-	4,680.00	-	4,680.00	9,360.00	-	-
HAC INC	Dietary Supplies	82.81	-	-	-	82.81	62.46	25.70	101.90
HENRY SCHEIN	Lab Supplies	-	-	-	-	-	-	1,307.35	-
HEWLETT-PACKARD FINANCIAL SERV	Computer Services	307.10	-	-	-	307.10	-	307.10	307.10
HSI	Materials Purch svcs	-	-	-	-	-	-	-	3,150.00
IN BLOOM FLOWERS AND GIFTS, LL	Supplies	-	-	-	-	-	65.00	-	-
INTEGO SOFTWARE, LLC	Software license	-	-	-	-	-	153.49	3,906.00	-
KELLEY MARTINEZ	Expense Reimbursement	-	-	-	-	-	-	-	613.16
LANDAUER	Radiology Purch Svs	-	-	-	-	-	1,847.40	-	-
LG PRINT CO	Advertising	-	-	-	-	-	165.00	-	-
LOCKE SUPPLY	Plant Ops supplies	223.23	-	-	-	223.23	-	-	1,737.20
LOWES	Patient Supplies	-	-	-	-	-	737.95	677.02	-
MCKESSON - 340 B	Pharmacy Supplies	-	-	-	-	-	937.45	937.45	937.45
MCKESSON / PSS - DALLAS	Patient Care/Lab Supplies	4,962.07	-	-	-	4,962.07	1,976.82	102.14	1,938.40
MEDLINE INDUSTRIES	Patient Care/Lab Supplies	21,299.91	10,282.12	-	-	31,582.03	27,675.83	13,782.29	23,914.09
MYHEALTH ACCESS NETWORK, INC	Compliance purch svcs	758.95	-	-	-	758.95	758.95	758.95	758.95
NUANCE COMMUNICATIONS INC	RHC purch svcs	-	123.00	-	-	123.00	-	123.00	123.00
OFMQ	Quality purch svcs	360.00	-	-	-	360.00	360.00	-	-
OKLAHOMA BLOOD INSTITUTE	Blood Bank	-	-	-	-	-	(332.90)	-	-
OKLAHOMA HOSPITAL ASSOCIATION	License	2,199.00	-	-	-	2,199.00	16,103.00	-	-
PHARMACY CONSULTANTS, INC.	PHARMACY CONSULTANTS, INC.	3,426.84	-	-	-	3,426.84	2,950.00	2,700.00	3,987.93
PHILADELPHIA INSURANCE COMPANY	OHA Insurance	-	-	-	-	-	3,215.58	3,215.58	3,215.58
PM BIOMEDICAL INC.	Repair and Maintenance	-	-	-	-	-	395.00	-	-
RUSSELL ELECTRIC & SECURITY	Repair and Maintenance	-	-	-	-	-	35.00	1,118.80	-

VENDOR NAME	DESCRIPTION	0-30 Days	31-60 Days	61-90 Days	OVER 90 Days	1/31/2026	12/31/2025	11/30/2025	10/31/2025
SIEMENS HEALTHCARE DIAGNOSTICS	Service Contract	1,067.39	-	-	-	1,067.39	-	28.58	-
SMAART MEDICAL SYSTEMS INC	Radiology interface/Radiologist provider	1,735.00	-	-	-	1,735.00	-	1,735.00	1,735.00
SPACELABS HEALTHCARE LLC	Telemetry Supplies	-	-	-	-	-	-	635.00	-
SPARKLIGHT BUSINESS	Cable service	141.43	-	-	-	141.43	-	-	-
STANDLEY SYSTEMS LLC	Printer lease	2,509.69	2,345.50	-	-	4,855.19	-	-	2,509.69
STAPLES ADVANTAGE	Office Supplies	-	-	-	-	-	-	2,234.22	949.59
STAPLES, INC.	Office Supplies	703.74	-	-	-	703.74	627.41	-	-
STERICYCLE / SHRED-IT	Waste Disposal Service	1,350.49	-	-	-	1,350.49	-	158.79	1,607.39
SUMMIT UTILITIES	Utilities	3,236.07	-	-	-	3,236.07	2,664.57	175.26	138.65
SYSMEX AMERICA INC	Repair and Maintenance	-	-	-	-	-	-	9,282.90	-
TECUMSEH OXYGEN & MEDICAL SUPP	Patient Supplies	-	-	-	-	-	-	2,902.03	-
TELEFLEX	Patient Supplies	-	-	-	-	-	-	-	900.00
TRIOSE INC	Freight	-	-	-	-	-	182.24	388.61	531.99
TRUBRIDGE	Software license	-	-	-	-	-	-	459.70	-
US FOODSERVICE-OKLAHOMA CITY	Food and supplies	459.73	-	-	-	459.73	3,150.57	3,781.29	632.93
Grand Total		785,315.58	789,026.87	1,010,858.27	11,620,387.00	14,205,587.72	14,187,883.61	15,098,291.66	15,106,209.57
					Conversion Variance	13,340.32	13,340.32	13,340.32	13,340.32
					AP Control	14,551,232.53	14,533,513.95	15,443,922.00	15,451,839.91
					Accrued AP	1,802,731.61	1,711,167.31	1,749,463.93	1,656,409.73
					AHSO Related AP	(892,723.76)	(892,723.76)	(892,723.76)	(892,723.76)
					TOTAL AP	15,461,240.38	15,351,957.50	16,300,662.17	16,215,525.88
						15,461,240.38	15,351,957.50	16,300,662.17	16,215,525.88
						-	-	-	-

Hospital Vendor Contract Summary Sheet

1. Existing Vendor New Vendor
2. **Name of Contract:** Heartland Pathology Consultants
3. **Contract Parties:** Heartland Pathology/MRMC.
4. **Contract Type Services :** Pathology and Consulting Services.
5. **Impacted Hospital Departments:** Lab
6. **Contract Summary:** Heartland Pathology and Consulting Services serves as our laboratory medical director and consultant. This contract also entails providing pathology services to MRMC facility and patients.
7. **Cost:** \$1,062/month for Medical Directorship
8. **Prior Cost:** \$1,050/month for Medical Directorship
9. **Term:** 12 months renews annually
10. **Termination Clause:** 30-day termination with material breach or dissolution or liquidation of either party.
11. **Other:**

Heartland Pathology Consultants, PC
2701 Coltrane Pl. Ste. 3
Edmond, Oklahoma 73034

Barry M. Rockler, M.D.
Ruth H. Oneson, M.D., M.P.H.
Ricky L. Reaves, M.D.
Sherrita C. Wilson, M.D.
M. Caroline Holmboe, M.D

Phone: (405) 715-4500

Fax: (405) 715-4519

AGREEMENT FOR ANATOMIC PATHOLOGY SERVICES
MEDICAL DIRECTORSHIP
MANGUM CITY HOSPITAL AUTHORITY
DBA: MANGUM REGIONAL MEDICAL CENTER
1 WICKERSHAM DRIVE
MANGUM, OK 73554

Heartland Pathology Consultants, PC (HPC), agrees to provide complete anatomic pathology services (surgical pathology and non-gynecologic cytology) and Medical Directorship to Mangum City Hospital Authority dba Mangum Regional Medical Center

DUTIES OF HPC:

1. Supply the facility with specimen containers and fixative, empty specimen containers, slides, lab request forms and zip lock bags with biohazard label for use on specimens sent to HPC.
2. Auto Fax completed reports to the facility and requesting physician as soon as available.
3. Provide facility with a copy of CLIA Registration, Medicare provider number, CAP certification.
4. Provide pathology consultations regarding HPC anatomic pathology results.
5. Will provide CPT codes on pathology reports.
6. Provide specimen pickup, delivery of supplies and courier service. Pickup service will sign completed specimen chain of custody log sheets when receiving specimen(s) for transport to HPC.
7. Agrees to meet all applicable regulatory standards (CAP, COLA, CLIA, JCAHO, CMS, etc.) as they apply to facility and services contracted to outside vendors.
8. Records maintained by HPC shall be sufficient to enable facility to comply with all governmental and CLIA record keeping and reporting requirements.
9. Monitor and provide feedback for quality issues.

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HPC BILLING

1. Provide a monthly invoice including the patient's name, date of service, referring physician, and procedure provided with CPT codes on or before the 10th of each month.
2. The facility agrees to pay the invoice within 30 days of receipt of the said invoice.
3. A service charge of 1.5% per month (18% per year) will be charged to any balance over 30 days.
4. Will bill patients and/or their insurance companies directly for all payers according to insurance guidelines and/or policies for anatomic pathology services provided upon receipt of appropriate billing information from facility.
5. Per CMS Regulations, HPC must bill facility for the Technical Component (TC) of the anatomical pathology services for the following payers: Tricare, Tricare Products, Medicare, Medicare Railroad, Medicare Replacement, Blue Cross and any other payer who contractually chooses to follow CMS guidelines.
6. Request additional billing information from the facility as needed.

DUTIES OF THE HOSPITAL/FACILITY:

1. Hospital/Facility will use HPC exclusively for anatomical pathology and Non-gynecological cytology pathology.
2. Provide appropriate patient demographics, specimen information, clinical history and proper specimen labeling to identify requisition/patient/sample discrepancy.
3. Provide appropriate and complete patient/insurance billing information to HPC with the specimen or in a timely manner.
4. Will stock requisitions and supplies to send specimens to HPC. Request restocking of supplies from HPC as needed.
5. Complete a Chain of Custody log sheet and prepare specimen for courier pick up.

MEDICAL DIRECTORSHIP OF LABORATORY

1. HPC agrees to provide laboratory Medical Directorship services to facility.
2. HPC agrees to bill the facility for these services on the first of each month.
3. The facility agrees to pay the amount of \$ 1062.00 per month for services.
4. The facility agrees to pay the invoice within 30 days of receipt of said invoice.
5. All past due balances are subject to service charge of 1.5% per month.
6. The facility and HPC will operate said services at all times in compliance with federal, state, and local laws, rules and regulations; the policies, rules and regulations of the facility; the Medical Staff bylaws; the applicable standards of CMS and all currently accepted and approved methods and practices of specialty.

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TERMINATION:

1. The above agreement shall be effective from the date of signing and shall renew itself annually.
2. In the event that either party materially breaches any term of this agreement the party may withdraw upon giving thirty (30) days written notice to the other party of its intention to terminate the above agreement.
3. The dissolution or liquidation of either party.
4. Each party recognizes that any breach of confidentiality or misuse of information may result in termination of this agreement. Unauthorized disclosure may cause irreparable injury to the patient or to the owner of such information.

Please acknowledge acceptance of this proposal by signing, dating and returning this original. A copy is attached for your files.



 M. Caroline Holmboe, M.D. Date 01/31/2026
 Pathologist/Medical Director
 Heartland Pathology Consultants, PC

 Kelly Martinez, CEO Date _____
 Mangum Regional Medical Center
 One Wickersham Drive
 Mangum, OK 73554

E-Mail Address

CLIA Number 37D0936596
CAP Number 7176311
Medicare Provider Number 73-1527740

Handwritten notes in blue ink, including the date "02/06/10" and other illegible scribbles.

Client Fee Schedule

**Company 1 – HEARTLAND PATHOLOGY CONSULTANTS PC
Routine: ARFC1**

**Payer: C Client: HPC Mangum Regional Medical Center
Effective Date: 5/2024**

Order Code	Description	Proc. Code	Net	List
88104-TC	Cytopath Fluid, Nongyn Smears with Interp	88104	\$34.63	\$34.63
88108-TC	Cytopath, Concentration, Smears and Interp	88108	\$42.21	\$42.21
88172-TC	FNA Immed Eval 1 st Each Site	88172	\$16.27	\$16.27
88173-TC	FNA Eval, Interp and Report	88173	\$60.85	\$60.85
88300-TC	Surg. Path Level I – Gross Only	88300	\$20.35	\$20.35
88302-TC	Surg. Path Level II – Gross and Micro	88302	\$42.21	\$42.21
88304-TC	Surg. Path Level III – Gross and Micro	88304	\$43.66	\$43.66
88305-TC	Surg. Path Level IV – Gross and Micro	88305	\$59.69	\$59.69
88307-TC	Surg. Path Level V- Gross and Micro	88307	\$133.11	\$133.11
88309-TC	Surg. Path level VI – Gross and Micro	88309	\$185.18	\$185.18
88311-TC	Decalcification	88311	\$6.08	\$6.08
88312-TC	Special Stains Group 1	88312	\$57.94	\$57.94
88313-TC	Special Stains Group 2	88313	\$46.29	\$46.29
88323-TC	Path Consult With Slide Prep	88323	\$47.74	\$47.74
88329-TC	Path Consult Intraoperative	88329	\$33.12	\$33.12
88331-TC	Path Consult Intraop 1 Frozen Section	88331	\$28.80	\$28.80
88332-TC	Path Consult Each Add Frozen Section	88332	\$9.86	\$9.86
88333-TC	Path Consult Intraop – Touch Prep	88333	\$31.72	\$31.72
88334-TC	Path Consult Intraop – Touch Prep Each Add	88334	\$20.06	\$20.06
88342-TC	Immunocytochemistry Each Antibody	88342	\$55.32	\$55.32
88358-TC	morphometric Analysis – Tumor (Ploidy)	88358	\$28.80	\$28.80
88361-TC	Tumor Imm.-Her-2,Er/Pr, etc. Ea Computer Asst	88361	\$81.83	\$81.83