



Agenda

Mangum City Hospital Authority

June 23, 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 June 23, 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 May 26, 2026, regular meeting minutes as present.
2. Approve May 2026 Medical Staff Meeting Minutes
3. Approve May 2026 Clinic Report.
4. Approve May 2026 Quality Meeting Minutes
5. Approve May 2026 CEO Report.
6. Approve the following forms, policies, appointments, and procedures previously approved on 6/11/2026 by Quality Committee and on 6/18/2026 by Medical Staff

Discussion and Possible Action to Approve the Policy and Procedure: MRMC-2026 Hazard and Vulnerability Assessment.
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 May 2026

OTHER ITEMS

9. Discussion and Possible Action to Approve the MRMC and BancFirst Agent of record Letter for CFC Underwriting Limited for Cyber insurance.

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 12:00 p.m. on the 22nd day of June 2026, by the Secretary of the Mangum City Hospital Authority.

Brittany McClintock Secretary



Minutes

Mangum City Hospital Authority Session

May 26, 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 May 26, 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

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.

Motion to approve consent agenda as presented.

Motion made by Trustee Vanzant, Seconded by Trustee Hopper.

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

1. Approve April 28, 2026, regular meeting minutes as present
2. Approve April 2026 Medical Staff Meeting Minutes
3. Approve April 2026 Clinic Report.
4. Approve April 2026 Quality Meeting Minutes
5. Approve April 2026 CCO Report.
6. Approve April 2026 CEO Report.
7. Approve the following forms, policies, appointments, and procedures previously approved on 5/14/2026 by Quality Committee and on 5/21/2026 by Medical Staff

Discussion and Possible Action to Approve the Policy and Procedure: MPMC-FIN-001:
Hospital Credit Card Policy

Discussion and Possible Action to Approve the Policy and Procedure: MPMC-FIN-002:
Account Reconciliations

Discussion and Possible Action to Approve the Policy and Procedure: MPMC-FMFN-001:
Acknowledgement of Credit Card Holder Responsibility

Discussion and Possible Action to Approve the Policy and Procedure: MPMC-FMFN-002:
Purchase Authorization Form

Discussion and Possible Action to Approve the Policy and Procedure: MPMC-FMFN-003:
Account Risk Table

Discussion and Possible Action to Approve the Policy and Procedure: MPMC-FMFN-004:
Balance Sheet Reconciliation

Discussion and Possible Action to Approve the Policy and Procedure: MPMC-Financial
Corporate Policy Review Feedback

Discussion and Possible Action to Approve the Policy and Procedure: MPMC- Corporate
Policy Review

Discussion and Possible Action to Approve the 2025 Annual Infection Control Risk
Assessment and Annual Infection Control Program Evaluation.

8. 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 public remarks.

REPORTS

9. Financial Report for April 2026

The average daily census for the month was 15.27. This is up 4 days from March and up 3 days from the year-to-date monthly average. The acute payer mix for April was 64% for Medicare and Medicare Managed Care with the prior month being 100%. The swing bed payer mix for April was 92% for Medicare and 8% for Medicare Managed care. The year-to-date average for Medicare is 82% and Medicare Managed Care is 18%. The operating margin was positive \$43,000, which is down \$63,000 from March. The year-to-date average is \$345,000. Net patient revenue was \$1.67 million for the month, an increase of \$10,000 from last month and a increase of \$50,000 from the year-to-date monthly average. 340B revenue was \$10,000 for April and expenses were \$10,000. Operating expenses were at \$1.66 million, that's up \$80,000 from the prior month and up \$108,000 from the year-to-date

monthly average. Patient days for April were at 455. This is up 107 days from March. Cash receipts for the month were \$2.2 million. That's a increase of \$650,000 from the year-to-date monthly average and a increase of \$1.08 million from March. Cash disbursements were at \$1.35 million. Cash balance at the April month end was \$1.54 million, giving 12.7 days of cash on hand. The clinic average daily visits were 17. The year-to-date revenue for the clinic is \$312,000. Operating expenses were \$359,000, with a year-to-date net loss of \$47,000.

OTHER ITEMS

10. Discussion and Possible Action to Approve the MRMC 2026 Millipore Sigma agreement for a service contract between MRMC and Millipore Sigma to provide preventive maintenance and repairs.

Motion to approve.

Motion made by Trustee Vanzant, Seconded by Trustee Hopper.

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

11. Discussion and Possible Action to Approve the MRMC and Oklahoma State Health Department Agreement to provide chest x-rays as ordered at an agreed upon rate.

Motion to approve.

Motion made by Trustee Hopper, Seconded by Trustee Lively.

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

12. Discussion and Possible Action to Approve the MRMC and Lofffield Management Group LLC for residential lease agreement for rental home.

Motion to approve.

Motion made by Trustee Hopper, Seconded by Trustee Ford.

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

13. Discussion and Possible Action to Approve the MRMC and Dragon Medical One-Wire ACH Form Agreement for Dictation Services

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 the MRMC and BancFirst Agent of record Letter for D & O and Entity Liability with Insurance Company: C.N.A Insurance

Aaron Capps with Banc First spoke on the details of this.

Motion to approve.

Motion made by Trustee Vanzant, Seconded by Trustee Hopper.

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

15. Discussion and Possible Action to Approve the MRMC and BancFirst Agent of record letter for Professional/General Liability Insurance with MedPro Group

Motion to approve.

Motion made by Trustee Vanzant, Seconded by Trustee Hopper.

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

16. Discussion and Possible Action to Approve the MRMC and BancFirst Agent of record letter for property/contents insurance with The Hartford Insurance

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 the MRMC and BancFirst Agent of record letter for auto insurance with Progressive Insurance.

Motion to approve.

Motion made by Trustee Vanzant, Seconded by Trustee Hopper.

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

EXECUTIVE SESSION

18. 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
 - Ashley Lindsey, APRN-Allied Health Professional Courtesy Privileges-Family Medicine
- Re-Credentialing

Motion to approve the credentialing without going into executive session.

Motion made by Trustee Vanzant, Seconded by Trustee Hopper.

Voting Yea: Trustee Ford, Trustee Vanzant, Trustee Hopper

Voting Abstaining: Trustee Lively

OPEN SESSION

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

Open session not needed.

STAFF AND BOARD REMARKS

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

No remarks.

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 5:55 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 3:00 p.m. on the 20th day of May 2026, by the Secretary of the Mangum City Hospital Authority.

Carson Vanzant, Chairman

Brittany McClintock, Interim City Clerk

Mangum Regional Medical Center
Medical Staff Meeting
Thursday
May 21, 2026

MEMBERS PRESENT:

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

ALLIED HEALTH PROVIDER PRESENT

None

NON-MEMBERS PRESENT:

Kelley Martinez, RN, CEO
Chelsea Church, PharmD
Nick Walker, RN, CCO
Megan Smith, RN – Quality
Lynda James, LPN – Drug Tech
Kaye Hamilton, Medical Staff Coordinator

1. Call to order
 - a. The meeting was called to order at 12:00 pm by Dr. John Chiaffitelli, Medical Director.
2. Acceptance of minutes
 - a. The minutes of the April 23, 2026, 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 We are continually looking for new service lines to provide our community at the hospital and the clinic.
 - o The lab is under construction by JAM currently.
 - o The state has received all reports needed for the functional plan awaiting responses.

- We continue to get all staff more involved during patient rounds with providers.
 - We continue small improvements at the facility. We have cleaned the main entrance at the hospital and are working towards repainting the interior of the facility.
 - We continue to make patient rounds on all patients in the hospital and continue to get great responses.
 - We have had two good months we look forward to continued progress.
 - We have hired a new case manager for the facility.
- Written report remains in the minutes.

5. Committee / Departmental Reports

a. Medical Records –

1. February – ER – 1 ER Notes needed out of 144– Completed
 OBS – 0 out of 2
 Acute – 1 H&P – Completed
 ER – 1 ER Note Needs to be H&P – Corrected
 DC – 1 DC Summary – Completed
 SWB - 1 out of 26 H&P - Completed

2. Old Business: 0

Written report remains in the minutes.

b. Nursing

Patient Care

- MRMC Education included:
 1. Nursing documentation updates are communicated to nursing staff weekly.
 2. Nurse meeting scheduled for May 6th.
- MRMC Emergency Department reports 0 patient Left Without Being Seen (LWBS).
- MRMC Laboratory reports 0 contaminated blood culture set(s).
- MRMC Infection Prevention reports 2 CAUTI.
- MRMC Infection Prevention report 0 CLABSI.
- MRMC Infection Prevention reports 2 HAI, for the month of April, 2026.

Client Service

- Total Patient Days for April 2026 were 422. This represents an average daily census of 14.
- April 2026 COVID-19 statistics at MRMC: Swabs (0 PCR & 24 Antigen) with 0 positive.

Preserve Rural Jobs and Culture Development

- One-PM House Supervisor RN, and 2 CNA positions are open currently.
- 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 HIBIHUBS bath product in-service completed for March 23 and 25, 2026 from 5 am to 7 am. Product has been added to supply room and is being utilized. CCO decided to keep ready bath wipes to help with incontinence care. These wipes are thicker than regular body wipes.
- New Business
 - a. N/A
- Data:
 - a, N/A
- Policy & Procedures Review:
 - a. N/A
- Education/In Services
 - a. Monthly Nursing Meeting March 4, 2026
 - b. Pediatric Sepsis screen updated in Cohesive Pediatric Ed Assessment.
 - c. Do not delete the Sepsis screen out of EHR. All patients seen in ER need to have a Sepsis screen due to Conditions of Participation for CMS.
 - d. Update on HIBIHUBS in-service scheduled for March 23 and 25 from 5 am to 7 am.
 - e. IP Only Training:
 - f. 5/05/26 Vaccine Reporting OSIIS w/Courtney Woodard w/ OSDH
 - g. 5/26/26 EPIC Monthly Meeting: “Hidden Risk: The Health, Regulatory, and Financial Implications of Bats in a Hospital,” presented by Mike Koski w/Get Bats Out and “Rabies Identification and Treatment,” presented by Mike Mannell and Ashlyn Wayman w/OSDH.
- Updates: None at this time.
- N95 Fit Tests – 0 completed
- Annual Items:
 - a. Construction Risk Assessment - ICRA will be presented to ICC once completed by former IP.
 - b. Linen Services – Annual site visit will be scheduled for September, 2026.

Written report remains in minutes.

- d. Environment of Care and Safety Report
 - i. Evaluation and Approval of Annual Plan
 - 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. – Contractor backed out on making cover - - Will check on repairing hopper.
 - 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. Need more tile. Started replacement on 3-9-2026.
 - d. Damaged ceiling in OR2 due to leaking roof.
 - e. New Hope Roof – Leak in Physical Therapy office after hail storm – City approved vendor to repair.-Roof replaced 1-15-2026 – Will get contractor to quote ceiling repair. Contractor will be here 3-10-2026.
 - f. Need light installed for parking lot at New Hope - - Contractor scheduled for week of 16th.
 - g. Front wall of lab building damaged from vehicle – Waiting on start date from contractor for repairs.
 - i.i.i. New Business
 - a. Chiller not cooling properly. 3-12-2026 Contractor repaired 3-20 2026.
Written report remains in the minutes.
- e. Laboratory
 - i. Tissue Report – Approved
 - i.i. Transfusion Report – Approved
Written report remains in minutes.
- f. Radiology
 - i. There was a total of – 223 X-Rays/CT/US
 - i.i. Matters for approval
 - o Nothing up for approval
 - i.i.i. Updates:
 - o No Updates
 Written report remains in minutes.
- g. Pharmacy
 - i. Verbal Report by Clinical Pharmacist
 - i.i. P & T Committee Meeting –
The P&T Committee Meeting will be held in June, 2026.

- i.i.i. Azithromycin injectable still on backorder but we were able to get an allocation. IV contrast is on backorder.
Demerol IV is unavailable. Morphine is on back order.
- i.v. List of meds recommended for standing order are tums, voltaren gel, nystatin powder, nystatin swish and swallow, and melatonin.
- 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 – 1
 - Fall with minor injury – 2
 - Fall with major injury –
 - Death – 3
 - AMA/LWBS – 0-In Pt – 1- ER - LWBS -
0-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 – 2
- After hours access was –

Written report remains in the minutes.

k. Utilization Review

- i. Total Patient days for
 - i.i. Total Medicare days for
 - i.i.i. Total Medicaid days for
 - iv. Total Swing Bed days for
 - v. Total Medicare Swing Bed days for
- No report for this month.

Motion made by Dr. John Chiaffitelli, Medical Director to approve Committee Reports for April, 2026.

6. New Business

- a. Review & Consideration of Approval of the Policy & Procedure: MRMC: –
FIN-001: Hospital Credit Card Policy
i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve the Policy & Procedure: MRMC-FIN-001: Hospital Credit Card Policy.
- b. Review & Consideration of Approval of the Policy & Procedure: MRMC – FIN-002:
Account Reconciliations
i.Motion: made by John Chiaffitelli, DO Medical Director to approve the Policy & Procedure: MRMC – FIN-002: Account Reconciliations.
- c. Review & Consideration of Approval of the Policy & Procedure: MRMC – FMFN-001:
Acknowledgement of Credit Card Holder Responsibility
i.Motion: made by John Chiaffitelli, DO Medical Director to approve the Policy & Procedure: MRMC – FMFN-001: Acknowledgement of Credit Card Holder Responsibility.
- d. Review & Consideration of Approval of the Policy & Procedure: MRMC – FMFN-002:
Purchase Authorization Form
i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve the Policy & Procedure MRMC – FMFN-002: Purchase Authorization Form.
- e. Review & Consideration of Approval of Policy & Procedure: MRMC – FMFN-003:
Account Risk Table
i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve the Policy & Procedure: MRMC – FMFN-003: Account Risk Table.
- f. Review & Consideration of Approval of the Policy & Procedure: MRMC - FMFN-004:
Balance Sheet Reconciliation.
i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve Policy and Procedure: MRMC – FMFN – 004: Balance Sheet Reconciliation.
- g. Review & Consideration of Approval of the Policy & Procedure: MRMC – Finance
Corporate Policy Review Feedback
i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve Policy & Procedure: MRMC – Finance Corporate Policy Review Feedback.
- h. Review & Consideration of Approval of the Policy & Procedure: MRMC EHP-001 -
Employee Health Program
i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve Policy & Procedure: MRMC- EHP – 001- Employee Health Program.
- i. Review & Consideration of Approval of the Policy & Procedure: MRMC EHP-003 –
Employee Occupational Illness and Injury
i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve Policy & Procedure: MRMC EHP-003 – Employee Occupational Illness and Injury.
- j. Review & Consideration of Approval of the Policy & Procedure: MRMC Employee
Health Standing Orders
i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve Policy & Procedure: MRMC Employee Health Standing Orders.
- k. Review & Consideration of Approval of the Policy & Procedure: MRMC Staff
Acknowledgement of Work Restrictions
i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve Policy & Procedure: MRMC Staff Acknowledgement of Work Restrictions.
- l. Review & Consideration of Approval of the Policy & Procedure: MRMC
FMEH-032 – Staff Refusal for Drug Alcohol Testing

- i.Motion:** made by John Chiaffitelli, DO, Medical Director, to approve Policy & Procedure: MRMC FMEH-032 – Staff Refusal for Drug Alcohol Testing.
- m. Review & Consideration of Approval of the Policy & Procedure: MRMC Corporate Policy Review
i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve Policy & Procedure: MRMC Corporate Policy Review.
- n. Review & Consideration of Approval of the Policy & Procedure: MRMC HR-012- Drug, Alcohol, and Substance Abuse Policy and Testing Program
i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve Policy & Procedure: MRMC HR-012 – Drug, Alcohol, and Substance Abuse Policy and Testing Program.
- o. Review & Consideration of Approval of the Policy & Procedure: MRMC Urine Drug Screen (UDS) Process
i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve Policy & Procedure: MRMC Urine Drug Screen (UDS) Process.
- p. Review & Consideration of Approval of the MRMC 2025 Annual Infection Control Risk Assessment and Annual Infection Control Program Evaluation
i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve the MRMC 2025 Annual Infection Control Risk Assessment and Annual Infection Control Program Evaluation.

7. Adjourn

- a. Dr Chiaffitelli made a motion to adjourn the meeting at 12:17 pm.

Medical Director/Chief of Staff

Date



Clinic Operations Report

Mangum Family Clinic

May 2026

Monthly Stats	May 2025	May 2025
Total Visits	205	135
Provider Prod	175	137
RHC Visits	180	129
Nurse Visits	0	2
Televisit	0	0
Swingbed	4	0

Provider Numbers	RHC
Ogembo	109
Dr. Sanda	24
Dr. C.	

Payor Mix	
Medicare	49
Medicaid	28
Self	7
Private	51

Visits per Geography	
Mangum	97
Granite	18
Duke	6

Month	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total
Visits	167	169	193	189	135								

Clinic Operations:

- Nelson Ogembo on PTO: 1st, 4th, 5th and 29th.
- Dr. Sanda in clinic for 3 days this month.
- Clinic did not have nursing staff on 5/27. Ogembo did admin work.
- Clinic was closed for Memorial Day.

Quality Report:

Improvement Measure	Actual	Goal	Comments
Reg Deficiencies	0	0	
Patient Satisfaction	6	5	6 Excellent
New Patients	6	10	
No Show	0.06%	<12%	18 no shows for the month
Expired Medications	0	0	None noted.

Outreach:

- Nothing specific to report. Clinic continues to support the community by providing compassionate quality care.

Summary :

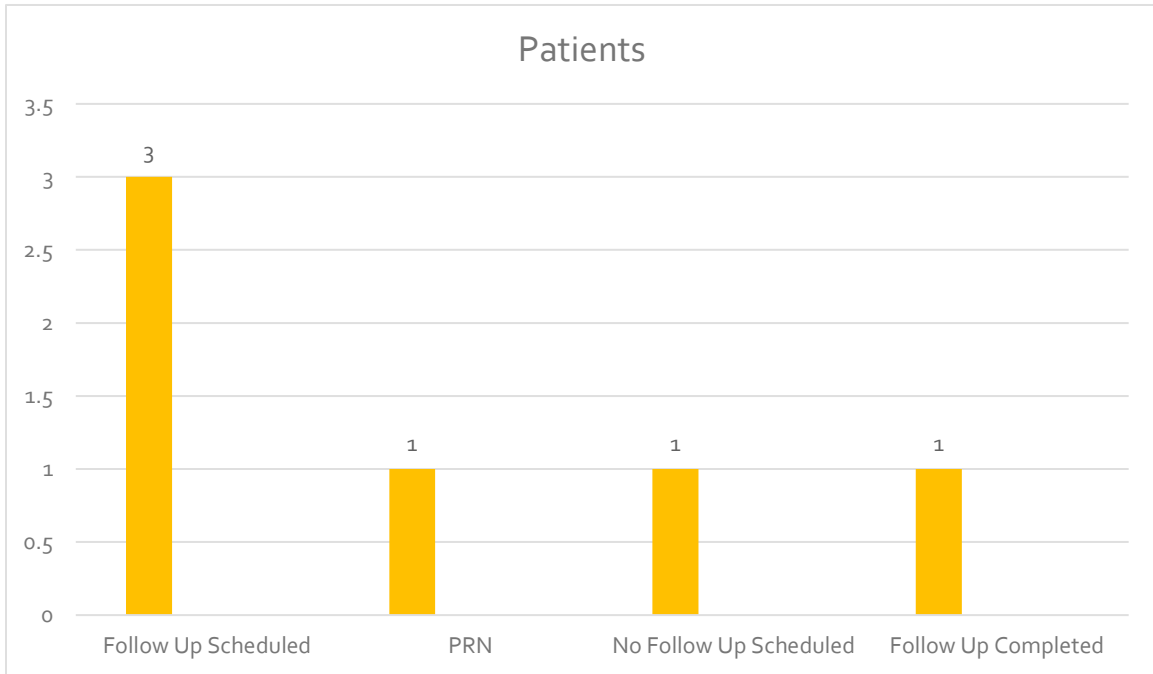
Mangum Family Clinic continues to support and provide quality care to Mangum and surrounding communities.

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

MANGUM FAMILY CLINIC

NEW PATIENT TRACKING

MAY 2026



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

Meeting Location: OR	Reporting Period: April 2026	
Chairperson: Dr Gilmore	Meeting Date: 05/14/2026	Meeting Time: 14:00
Medical Representative: Dr Gilmore	Actual Start Time: 1401	Actual Finish Time: 1500
Hospital Administrator/CEO: Kelley Martinez	Next Meeting Date/Time: 6/11/26	

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 1401	Approval: First – April Summerlin Second– Kaye Hamilton
II. COMMITTEE MEETING REPORTS & APPROVAL OF MINUTES				
Agenda Item	Presenter	Time Allotted	Discussion/Conclusions	Decision/Action Items
A. Quality and Patient Safety Committee 1. <i>Approval of Meeting Minutes</i>	Meghan Smith	2 min	Meeting minutes – April 2026	Approval: First – Tonya Bowen Second – April Summerlin
B. Environment of Care (EOC) Committee 1. <i>Approval of Meeting Minutes</i>	Mark Chapman	2 min	Meeting minutes – April 2026	Approval: First – Pamela Espraza Second – Laura Gilmore
C. Infection Control Committee 1. <i>Approval of Meeting Minutes</i>	April Summerlin	2 min	Meeting minutes – April 2026	Approval: First – Pam Esparza Second – Tonya Bowen
D. Pharmacy & Therapeutics (P&T) Committee 1. <i>Approval of Meeting Minutes</i>	Chelsea Church/ Lynda James	2 min	Meeting minutes – April 2026	Approval: First – None for this month Second –
E. Health Information Management (HIM)/Credentialing Committee 1. <i>Approval of Meeting Minutes</i>	Jessica Pineda/ Kaye Hamilton	2 min	Meeting Min – April 2026	Approval: First – Nick Walker Second- Pam Esparza

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

D. Utilization Review (UR) Committee 1. <i>Approval of Meeting Minutes</i>	Chasity Howell	2 min	Meeting Minutes – Will approve two months worth in May 2026	Approval: First – Second –
III. DEPARTMENT REPORTS				
Agenda Item	Presenter	Time Allotted	Discussion/Conclusions	Decision/Action Items
A. Nursing/Emergency Department	Nick Walker	5 min	Blood utilization – 3 Code Blue – 0 Restraint – 0 Emergent Intubations: 0	
B. Radiology	Pam Esparza	2 min	3 / 124 repeats	0/0 Contrast reactions 0/0 Critical Test reporting
C. Laboratory	Tonya Bowan	8 min	63 – repeated labs, all critical repeats 2- rejected specimen	
D. Respiratory Care	Heather Larsen	2 min	0 vent day 15 Trach days, no decannulations	
E. Therapy	Christopher Larsen	2 min	Total # of Sessions Preformed 410 -PT Inpatient/Outpatient 248 -OT Inpatient 25 -ST Inpatient	20/20 Temp checks 20/20 Gait belt Obs
F. Materials Management	Cory Ross	2 min	5 - Back Orders 0- Late Orders 0- Recalls	
G. Business Office		2 min	DL – Cost Share –	Director out
H. Human Resources	Stephanie Hughes	2 min	employees at end of month	Director out
I. Environmental Services	Mark Chapman	2 min	10/10 terminal room cleans	

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

J. Facility/Plant Operations	Mark Chapman	2 min	24 extinguishers checked 1 boiler checks 1 generator/transfer switch inspection – filter checks egress inspections	Boiler off for the summer
K. Dietary	Treva Derr	2 min	Daily meal count – 31	Director out
L. Information Technology	Hank Hunt	2 min	1 low priority ticket completed No IT issues or outages	
M. Strong Minds	Brittany Nelms/Brittany Niles	2 min	0 active patient	

IV. OLD BUSINESS

V. NEW BUSINESS

Agenda Item	Presenter	Time Allotted	Discussion/Conclusions	Decision/Action Items
A. New Business	QM	2 min		

VI. QUALITY ASSURANCE/PERFORMANCE IMPROVEMENT DASHBOARD REPORT

Agenda Item	Presenter	Time Allotted	Discussion/Conclusions	Decision/Action Items
A. Volume & Utilization	CM	5 min	AMA: Patient presented to MRMC ED on 4/14/26 chief complaint of chest pain for past 2 hours. Patient was promptly evaluated by ED nurse. EKG completed in triage; indicated sinus rhythm. Provider notified at @ 1229 and to bedside for evaluation at 1232. Chest xray completed @ 1238. Initial labs obtained. No abnormal lab values noted.	

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

			After initial findings patient requested to discharge. Patient reported to nursing and provider that he needed to return to work. Education provided on risks of leaving against medical advice. Patient signed appropriate AMA paperwork.	
B. Case Management	CM	8 min	Readmits – 3 1) Patient was admitted from 03/11-3/30/2026 with dx: Hypotension, CHF, dehydration, ams, and hyperkalemia. PT was discharged from inpatient to SWB on 3/18/2026 for debility. Pt then reached proper strength and was discharged home on 3/30/2026. Pt returned to ER on 4/05/2026 for unresponsiveness. Pt was transferred to OKC and then returned to MRMC on 4/10/2026 for debility, pneumonia. Pt reached proper strength potential and was discharged home on 4/22/2026 2) Patient was admitted from 03/03/2026-4/12/2026 with dx: sepsis, r hip cellulitis, UTI, debility, CHF, and hip/sacral wounds. Patient received IV antibiotics, wound care pt was improving and during stay his catheter became dislodged. pt was transferred at this time to SW Integrus. Patient was readmitted on 04/16/2026-4/25/2026 for CHF, wounds, debility, and AKI. On 04/25/2026 patient was transferred to SW Integrus for Anemia, GI Bleed, Health Care Associated Pneumonia with sepsis. Patient was then readmitted on 5/01/2026 with dx: CHF, CKD, Wounds,	

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

			and Debility. After wound care and physical therapy pt was discharged home with JCMH home health per patient request on 5/07/2026. 3) Patient admitted on 01/17/2026 from OUMC from 01/17/2026-03/26/2026 with dx: R MCA stroke with craniotomy and left hemiparesis. pt received parenteral nutrition and therapy. On 3/26/2026 pt was seen at her clinic visit and OUMC admitted the patient to OUMC for sunken flap syndrome. Pt readmitted on 4/13/2026 until present with dx: R MCA stroke, craniectomy, and CHF, mono VT	
C. Risk Management	QM	10 min	Deaths – 0 Complaints 0 Grievances –1. Grievance reported to QM and CEO in regard to care received from provider who also works at another facility. Patient reported that he felt his needs were not addressed at previous facility and that provider "didn't care and was covering her tracks." Patient was treated appropriately for osteomyelitis at MRMC with IV antibiotics. Patients reported being happy with care received from other providers while at MRMC. Patient requested to no longer receive any care from provider. Patient	Other - 0 Skin tear 0 Bodily Injury:0

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

			evaluated by oncoming provider on same day. No gaps in patient care. Workplace Violence Events –0 Falls - 3 Falls w/o injury: 1.) During vital signs rounds, patient was found on floor next to his bed. Patient's son had previously been at patient's bedside. At some point the bed alarm was not on. Education provided to patient and patient's family on fall prevention. Falls with Minor Injury: 2 1.) Patient's significant other used call light to call nurses' station. Patient's significant other attempted to assist patient to bathroom with walker. Nursing found patient on floor with his walker. Patient reported no injury. Assessment completed. Patient and significant other deny patient struck his head. Very small abrasion noted to right elbow. Education provided to significant other to prevent future falls. 2.) The patient was being assisted from the shower chair back to bedside chair following a successful x2 assisted walk to the shower immediately prior. The patient was wearing a gait belt and two staff members were providing standby assistance with 3 more standing by. During the transfer the patient became	
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**Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
May 2026 Meeting Minutes**

			non-compliant with verbal cues and refused to sue his legs or pivot to chair. Patient abruptly bent his legs intentionally lowering his center of gravity. Staff used gait belt to provide a controlled assisted descent to the floor to prevent a head strike or uncontrolled impact. Falls with Major Injury: Delay in Care Visitor Event: 1 1.) Visitor was visiting a patient admitted to MRMC facility. Visitor reported that her foot fell asleep while she was sitting and then she stood up too fast. Nursing assisted visitor to wheelchair and took visitor to ED for evaluation. Visitor reported that they did hit the back of their head. Patient assessed and treated in ED.	
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 – 100% 2.) EDTC Data 100% 3.) LWBS – 0	
F. Pharmacy & Therapeutics (P&T)	Pharmacy	2 min	Next P&T –	

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

			After hours access - ADR - 0 Med errors – 0	
G. Respiratory Care	RT	2 min	0 unplanned decannulation 100% resp assessments 100% on Chart checks	
H. Wound Care	WC	2 min	0 wound	
I. Radiology	RAD	2 min	Repeat tests: CT Stroke Alert within 45 min: 2 Contrast Reactions: 0	
J. Laboratory	LAB	5 min	0 – Blood culture contaminates	
K. Infection Control/Employee Health	IC/EH	5 min	2 – Inpt HAIs 0 – MRDO 0 – VAE 0– Cdiff 2– CAUTI 0 – CLASBI Sepsis screenings have improved. 16/18 screens completed correctly in ED	HAI 1.) 81 yo male patient admitted on 3/5/26 due to altered mental status, Hypertension emergency, Parkinson's, Chronic cerebral microvascular ischemia, Hyponatremia, Urinary Retention. On 4/11/26 the patient was reported to be confused and mildly agitated. Patient forcefully manipulated indwelling urinary catheter and tore at Y-port of the catheter collection bag, ballon deflated and patient removed catheter. No bleeding or urethral trauma noted. New Foley catheter placed without issue. 4/14/26 patient WBC elevated to 10.4. UA collected on 4/15/26 indicated infection (catheter day 24). Culture positive for Acinetobacter baumannii complex and enterococcus species. Patient recovered

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

Item 4.

				from infection and discharged into the care of long-term care at the VA. Risk Factors: • Incontinent of stool • Advanced age with intermittent confusion • Prolonged hospitalization Cause: • High risk for CAUTI due to continued need for invasive line device • Fecal contamination of urine • No other patients in house with similar infection Conclusion: Unavoidable infection due to possible fecal contamination of urine due to incontinence and physical removal of catheter by patient. 2. Summary of Findings: 89 yo female patient admitted on 3/9/2026 due to diagnosed with CVA, NSTEMI, Hypothyroidism, Pain, Nausea. Patient had foley catheter placed for strict intake and output. On 4/26/26, catheter day 49, nursing reported increased weakness for the patient. CBC shown WBC's elevated at 23.2. UA positive for infection. Urine culture positive for E. coli and Vancomycin Resistant Enterococcus faecium. Risk Factors: • Incontinence of stool • Bed Bound • Continued need for indwelling device • Prolonged hospitalization Cause: • Fecal contamination causing infection • Advanced age • Female Conclusion:
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**Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
May 2026 Meeting Minutes**

				Infection was unavoidable due to patients' inability to control bowels with continued need for foley catheter to monitor strict intake and output.
L. Health Information Management (HIM)	HIM	2 min	100% - D/C Note Compliance 100% - Progress Notes 100% - ED DC Instructions 100% - ED provider Dx	
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	90 day evals – 100% Annual evals – 100%	
P. Business Office	BOM	2 min	Cost Share Collections – Med Necessity Verification – Drivers Licenses –	
Q. Environmental Services	EVS	2 min	10/10 on room cleans	
R. Materials Management	MM	2 min	Electronic Requisitions – 56%	
S. Life Safety	PO	2 min	Fire extinguisher Inspections - 24 Egress checks – 2	
T. Emergency Preparedness	EP	2 min	None for the reporting period	
U. Information Technology	IT	2 min		
V. Outpatient Services	Therapy	2 min	Temp logs – 100%	

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

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	1. FIN-001: Hospital Credit Card Policy 2. FIN-002: Account Reconciliations 3. FMFN-001: Acknowledgement of Credit Card Holder Responsibility 4. FMFN-002: Purchase Authorization Form 5. FMFN-003: Account Risk Table 6. FMFN-004: Balance Sheet Reconciliation 7. Finance Corporate Policy Review Feedback 8. EHP-001 Employee Health Program 9. EHP-003 Emp Occu Illness 10. EHPR-001 EH Standing orders 11. FMEH-010 Staff Acknowledgement or Work Restrictions 12. FMEH-032 Staff Refusal for Drug/Alcohol 13. HR Drug, Alcohol, and Substance Abuse Policy and Testing Program 14. Urine Drug Screen Process	1. 1st Nick Walker 2nd Heather Larsen 2. 1st Nick Walker 2nd Heather Larsen 3. 1 Nick Walker 2nd Heather Larsen 4. 1st Nick Walker 2nd Heather Larsen 5. 1st Nick Walker 2nd Heather Larsen 6. 1st Nick Walker 2nd Heather Larsen 7. 1st Nick Walker 2nd Heather Larsen 8. 1st Lynda James 2nd Tonya Bowen 9. 1st Lynda James 2nd Tonya Bowen 10. 1st Lynda James 2nd Tonya Bowen 11. 1st Lynda James 2nd Tonya Bowen 12. 1st Lynda James 2nd Tonya Bowen 13. 1st Lynda James 2nd Tonya Bowen 14. 1st Lynda James 2nd Tonya Bowen

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

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 1500 by Nick Walker seconded by Pam Esparza	

MEMBERS & INVITED GUESTS				
Voting MEMBERS				
Kelley Martinez CEO (out)	Nick Walker CCO	Dr Gilmore (Teams)	Treva Derr Dietary Manager (out)	Lynda James DRS
	BO Manager (out)	Cory Ross Materials Management	Pam Esparza Radiology Manger	Mark Chapman Plant Ops/EVS
Tonya Bowen Lab Director	Stephanie Hughes HR (out)	Brittany Niles Strong Minds	Kaye Hamilton Credentialing	Jessica Pineda HIM
Dianna Sanders Wound Care Nurse	April Summerlin RN, IP	Heather Larsen Respiratory	Chris Larsen PT Director (out)	
Non-Voting MEMBERS				
Meghan Smith QM	☐	☐	☐	☐

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

Item 4.

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

Sign-In Sheet
Date of Meeting: 05/14/2026

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 Executive Officer Report May 2026

Operations Overview

- ARC Architecture Firm has submitted all forms to the State Department of Health, and we are awaiting a response regarding our Lab Relocation/Renovation project.
- We are continuing to still make improvements at the facility currently we are working on painting the inside of the facility starting with the lobby and then we will move down patient halls.
- Patient rounds being completed 3 times a week has had a great response from the patients and the staff.
- We continue to promote all our service lines at the hospital and at the clinic.
- Upfront collections for the hospital were at \$1,509.00 for the month of May.
- Upfront clinic collections for the month of May were \$281.07.
- The lab building is almost completed we are awaiting a few pieces of equipment such as the door and windows.

INSTRUCTIONS:

Evaluate potential for event and response among the following categories using the hazard specific scale.

Issues to consider for **probability** include, but are not limited to:

- 1 Known risk
- 2 Historical data
- 3 Manufacturer/vendor statistics

Issues to consider for **response** include, but are not limited to:

- 1 Time to marshal an on-scene response
- 2 Scope of response capability
- 3 Historical evaluation of response success

Issues to consider for **human impact** include, but are not limited to:

- 1 Potential for staff death or injury
- 2 Potential for patient death or injury

Issues to consider for **property impact** include, but are not limited to:

- 1 Cost to replace
- 2 Cost to set up temporary replacement
- 3 Cost to repair

Issues to consider for **business impact** include, but are not limited to:

- 1 Business interruption
- 2 Employees unable to report to work
- 3 Customers unable to reach facility
- 4 Company in violation of contractual agreements
- 5 Imposition of fines and penalties or legal costs
- 6 Interruption of critical supplies
- 7 Interruption of product distribution

Issues to consider for **preparedness** include, but are not limited to:

- 1 Status of current plans
- 2 Training status
- 3 Insurance
- 4 Availability of back-up systems
- 5 Community resources

Issues to consider for **internal resources** include, but are not limited to:

- 1 Types of supplies on hand
- 2 Volume of supplies on hand
- 3 Staff availability
- 4 Coordination with MOB's

Issues to consider for **external resources** include, but are not limited to:

- 1 Types of agreements with community agencies
- 2 Coordination with local and state agencies
- 3 Coordination with proximal health care facilities
- 4 Coordination with treatment specific facilities

Complete all worksheets including Natural, Technological, Human and Hazmat. The summary section will automatically provide your specific and overall relative threat.

APPENDIX 1 - 2026 HAZARD AND VULNERABILITY ASSESSMENT TOOL

NATURALLY OCCURRING EVENTS

EVENT	PROBABILITY	SEVERITY = (MAGNITUDE - MITIGATION)						RISK
		HUMAN IMPACT	PROPERTY IMPACT	BUSINESS IMPACT	PREPARED-NESS	INTERNAL RESPONSE	EXTERNAL RESPONSE	
	Likelihood this will occur	Possibility of death or injury	Physical losses and damages	Interruption of services	Preplanning	Time, effectiveness, resources	Community/ Mutual Aid staff and supplies	Relative threat*
SCORE	0 = N/A 1 = Low 2 = Moderate 3 = High	0 = N/A 1 = Low 2 = Moderate 3 = High	0 = N/A 1 = Low 2 = Moderate 3 = High	0 = N/A 1 = Low 2 = Moderate 3 = High	0 = N/A 1 = High 2 = Moderate 3 = Low or none	0 = N/A 1 = High 2 = Moderate 3 = Low or none	0 = N/A 1 = High 2 = Moderate 3 = Low or none	0 - 100%
Tornado	2	1	2	2	2	2	2	41%
Severe Thunderstorm	2	1	2	2	1	2	2	37%
Snow Fall	2	1	1	1	1	1	1	22%
Blizzard	1	1	1	1	1	1	1	11%
Ice Storm	2	2	1	1	1	1	1	26%
Earthquake	1	1	1	1	3	3	3	22%
Temperature Extremes	3	2	1	1	2	2	2	56%
Drought	3	1	1	1	2	2	2	50%
Flood, External	0	0	0	0	0	0	0	0%
Wild Fire	2	1	2	2	2	2	2	41%
Landslide	0	0	0	0	0	0	0	0%
Dam Inundation	1	0	0	0	0	0	0	0%
Epidemic	1	2	1	1	2	2	2	19%
AVERAGE SCORE	1.25	0.81	0.81	0.81	1.06	1.13	1.13	13%

*Threat increases with percentage.

RISK = PROBABILITY * SEVERITY		
0.13	0.42	0.32

APPENDIX 1 - 2026 HAZARD AND VULNERABILITY ASSESSMENT TOOL

TECHNOLOGIC EVENTS

Item 6.

EVENT	PROBABILITY	SEVERITY = (MAGNITUDE - MITIGATION)						RISK
		HUMAN IMPACT	PROPERTY IMPACT	BUSINESS IMPACT	PREPARED-NESS	INTERNAL RESPONSE	EXTERNAL RESPONSE	
	<i>Likelihood this will occur</i>	<i>Possibility of death or injury</i>	<i>Physical losses and damages</i>	<i>Interruption of services</i>	<i>Preplanning</i>	<i>Time, effectiveness, resources</i>	<i>Community/ Mutual Aid staff and supplies</i>	<i>Relative threat*</i>
SCORE	0 = N/A 1 = Low 2 = Moderate 3 = High	0 = N/A 1 = Low 2 = Moderate 3 = High	0 = N/A 1 = Low 2 = Moderate 3 = High	0 = N/A 1 = Low 2 = Moderate 3 = High	0 = N/A 1 = High 2 = Moderate 3 = Low or none	0 = N/A 1 = High 2 = Moderate 3 = Low or none	0 = N/A 1 = High 2 = Moderate 3 = Low or none	0 - 100%
Electrical Failure	1	1	2	2	2	1	1	17%
Generator Failure	1	2	2	3	2	2	1	22%
Transportation Failure	0	0	0	0	0	0	0	0%
Fuel Shortage	1	1	1	3	2	2	2	20%
Natural Gas Failure	1	1	2	3	3	3	3	28%
Water Failure	1	1	1	3	1	1	1	15%
Sewer Failure	1	1	1	3	3	3	3	26%
Steam Failure	0	0	0	0	0	0	0	0%
Fire Alarm Failure	1	1	1	2	2	2	2	19%
Communications Failure	2	2	2	2	2	2	2	44%
Medical Gas Failure	1	2	1	3	3	2	2	24%
Medical Vacuum Failure	1	1	2	3	2	2	2	22%
HVAC Failure	1	2	2	2	2	2	2	22%
Information Systems Failure	2	1	2	2	2	1	2	37%
Fire, Internal	1	2	1	2	1	1	1	15%
Flood, Internal	1	1	1	2	2	2	2	19%
Hazmat Exposure, Internal	1	1	0	2	2	2	2	17%
Supply Shortage	2	2	1	3	2	2	2	44%
Structural Damage	1	1	1	2	2	2	2	19%
AVERAGE SCORE	1.05	1.21	1.21	2.21	1.84	1.68	1.68	19%

*Threat increases with percentage.

RISK = PROBABILITY * SEVERITY
0.19 0.35 0.55

APPENDIX 1 - 2026 HAZARD AND VULNERABILITY ASSESSMENT TOOL

HUMAN RELATED EVENTS

EVENT	PROBABILITY	SEVERITY = (MAGNITUDE - MITIGATION)						RISK
		HUMAN IMPACT	PROPERTY IMPACT	BUSINESS IMPACT	PREPARED-NESS	INTERNAL RESPONSE	EXTERNAL RESPONSE	
	<i>Likelihood this will occur</i>	<i>Possibility of death or injury</i>	<i>Physical losses and damages</i>	<i>Interruption of services</i>	<i>Preplanning</i>	<i>Time, effectiveness, resouces</i>	<i>Community/ Mutual Aid staff and supplies</i>	<i>Relative threat*</i>
SCORE	0 = N/A 1 = Low 2 = Moderate 3 = High	0 = N/A 1 = Low 2 = Moderate 3 = High	0 = N/A 1 = Low 2 = Moderate 3 = High	0 = N/A 1 = Low 2 = Moderate 3 = High	0 = N/A 1 = High 2 = Moderate 3 = Low or none	0 = N/A 1 = High 2 = Moderate 3 = Low or none	0 = N/A 1 = High 2 = Moderate 3 = Low or none	0 - 100%
Mass Casualty Incident (trauma)	1	2	0	1	3	2	2	19%
Mass Casualty Incident (medical/infectious)	1	2	0	2	3	2	2	20%
Terrorism, Biological	1	2	1	3	3	2	2	24%
VIP Situation	1	1	0	0	2	2	2	13%
Infant Abduction	1	1	0	0	1	1	1	7%
Hostage Situation	1	1	0	2	2	2	2	17%
Civil Disturbance	1	1	1	2	2	2	2	19%
Labor Action	0	0	0	0	0	0	0	0%
Forensic Admission	0	0	0	0	0	0	0	0%
Cyber Attack	2	1	1	3	2	2	2	41%
Bomb Threat	1	1	1	2	2	2	2	19%
Workplace Violence	1	1	1	1	2	2	2	17%
AVERAGE	1.00	1.20	0.40	1.50	2.00	1.70	1.70	16%

*Threat increases with percentage.

RISK = PROBABILITY * SEVERITY		
0.16	0.33	0.47

APPENDIX 1 - 2026 HAZARD AND VULNERABILITY ASSESSMENT TOOL

EVENTS INVOLVING HAZARDOUS MATERIALS

Item 6.

EVENT	PROBABILITY	SEVERITY = (MAGNITUDE - MITIGATION)						RISK
		HUMAN IMPACT	PROPERTY IMPACT	BUSINESS IMPACT	PREPARED-NESS	INTERNAL RESPONSE	EXTERNAL RESPONSE	
	<i>Likelihood this will occur</i>	<i>Possibility of death or injury</i>	<i>Physical losses and damages</i>	<i>Interruption of services</i>	<i>Preplanning</i>	<i>Time, effectiveness, resources</i>	<i>Community/ Mutual Aid staff and supplies</i>	<i>Relative threat*</i>
SCORE	0 = N/A 1 = Low 2 = Moderate 3 = High	0 = N/A 1 = Low 2 = Moderate 3 = High	0 = N/A 1 = Low 2 = Moderate 3 = High	0 = N/A 1 = Low 2 = Moderate 3 = High	0 = N/A 1 = High 2 = Moderate 3 = Low or none	0 = N/A 1 = High 2 = Moderate 3 = Low or none	0 = N/A 1 = High 2 = Moderate 3 = Low or none	0 - 100%
Mass Casualty Hazmat Incident (From historic events at your MC with >= 5 victims)	1	1	1	2	3	3	3	24%
Small Casualty Hazmat Incident (From historic events at your MC with < 5 victims)	1	1	1	2	2	2	2	19%
Chemical Exposure, External	1	1	1	1	2	2	2	17%
Small-Medium Sized Internal Spill	1	1	1	2	2	2	2	19%
Large Internal Spill	1	1	1	2	3	3	2	22%
Terrorism, Chemical	1	1	1	2	3	3	2	22%
Radiologic Exposure, Internal	1	1	1	2	3	3	2	22%
Radiologic Exposure, External	1	1	1	2	3	3	2	22%
Terrorism, Radiologic	1	1	1	2	3	3	2	22%
AVERAGE	1.00	1.00	1.00	1.89	2.67	2.67	2.11	21%

*Threat increases with percentage.

RISK = PROBABILITY * SEVERITY

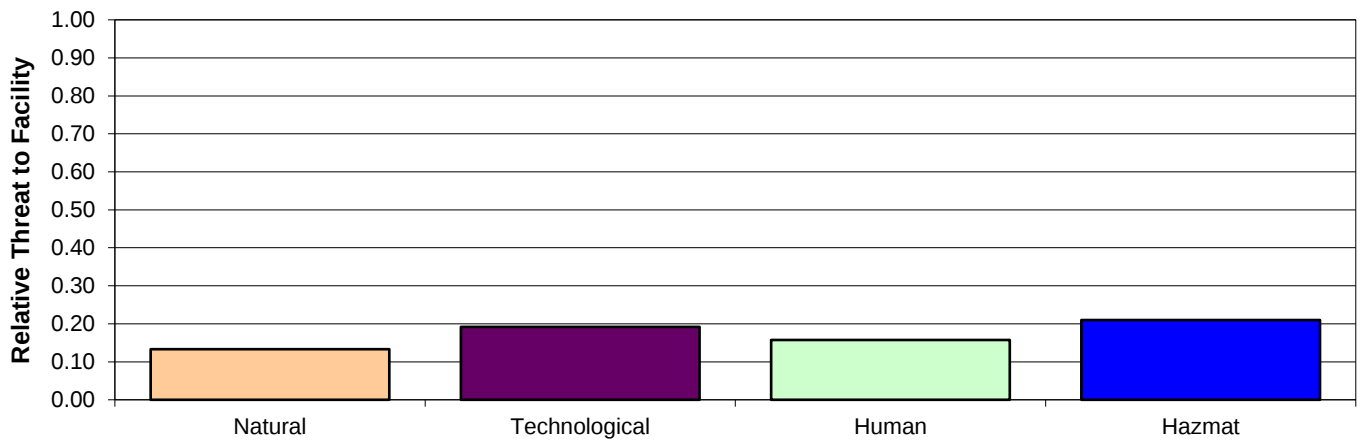
0.21 0.33 0.63

APPENDIX 1 - 2026 SUMMARY OF MEDICAL FACILITY HAZARDS ANALYSIS

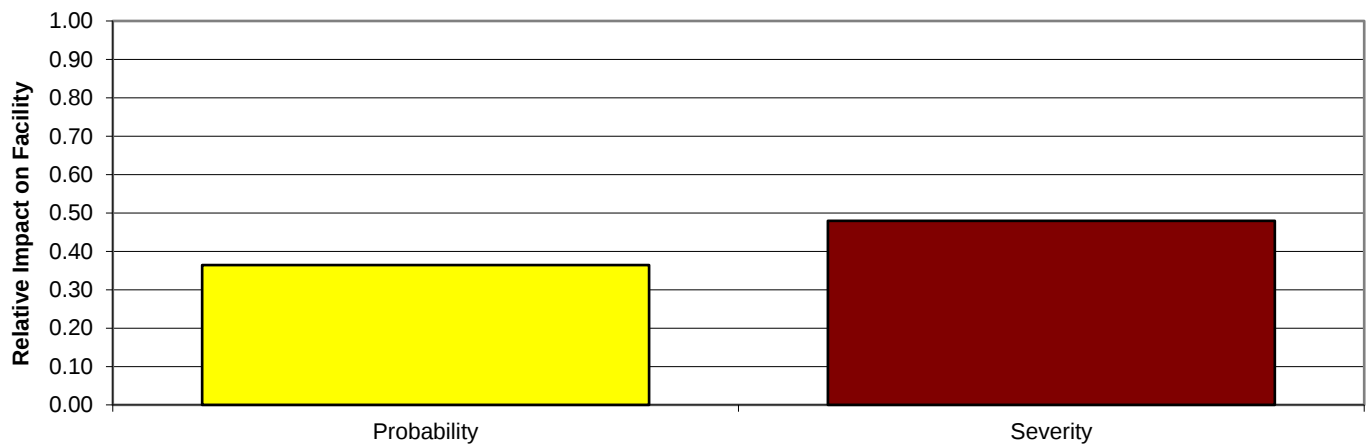
Item 6.

	Natural	Technological	Human	Hazmat	Total for Facility
Probability	0.42	0.35	0.33	0.33	0.36
Severity	0.32	0.55	0.47	0.63	0.48
Hazard Specific Relative Risk:	0.13	0.19	0.16	0.21	0.17

Hazard Specific Relative Risk to Medical Facility



Probability and Severity of Hazards to Medical Center



Mangum Board Meeting Financial Reports

May 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
May 31, 2026

	Current Month	May-26 Year-to-Date	Mthly Avg Prior Year	Variance
ADC (Average Daily Census)	12.55	11.80	9.73	2.82
Payer Mix % (Acute):				
MCR	28.57%	53.13%	54.62%	-26.05%
MCR Mgd Care	19.05%	25.00%	22.34%	-3.29%
All Others	52.38%	21.88%	23.04%	29.34%
Total	100.00%	100.00%	100.00%	0.00%
Payer Mix % (SWB):				
MCR	85.60%	82.61%	79.71%	5.89%
MCR Mgd Care	12.23%	16.89%	19.35%	-7.12%
All Others	2.17%	0.49%	0.94%	1.23%
Total	100.00%	100.00%	100.00%	0.00%
Operating margin	103,539	448,246	(435,422)	
Operating Margin (monthly average)	103,539	89,649	(36,285)	125,934
NPR (Net Patient Revenue)	1,711,571	8,187,693	17,161,266	
NPR (monthly average)	1,711,571	1,637,539	1,430,106	207,433
Operating Expenses	1,666,451	7,850,345	17,902,547	
Operating Expense (monthly average)	1,666,451	1,570,069	1,491,879	78,190
NPR % of Oper Exp	102.7%	104.3%	95.9%	
Patient Days	389	1,782	3,550	(3,161)
Oper Exp / PPD	\$ 4,284	\$ 4,405	\$ 5,043	\$ (638)
# of Months	1	5	12	
Cash Receipts (rnd)	2,068,532	8,252,106	19,097,911	
Cash Receipts (monthly average)	2,068,532	1,650,421	1,591,493	58,929
Cash as a % of NPR (s/b 100% min)	120.9%	100.8%	111.3%	
Days Cash-On-Hand (Net of MCR Pay / Restrictions):				
Calendar Days	31	151	365	
Operating Exp / Day	\$ 53,756	\$ 51,989	\$ 49,048	\$ 4,708
Cash - (unrestricted)	1,774,168	1,774,168	1,161,872	612,296
Days Cash-On-Hand	33.0	34.1	23.7	10.4
Cash - (Net MCR Payable)	1,020,451	1,020,451	1,161,872	
Days Cash-On-Hand	19.0	19.6	23.7	
Days Cash-On-Hand: Minimum during month	2.7	2.7	12.6	(9.9)
MCR Rec (Pay) - "as stated - but to be adjusted"	(753,717)	(753,717)	92,857	(846,573)
AP & Accrued Liab	16,535,183	16,535,183	16,244,681	290,502
Accounts Receivable (at net)	2,158,695	2,158,695	1,192,826	965,869
Per AP aging schedule (incl. accruals)	May-26	May-26	Prior FYE	Net Change
Account Payable - Cohesive	14,175,689	14,175,689	14,084,830	90,859
Account Payable - Other	1,466,770	1,466,770	1,267,128	199,643
Total	15,642,460	15,642,460	15,351,958	290,502
Cohesive Loan	4,342,346	4,342,346	4,528,447	(186,101)

Mangum Regional Medical Center
Cash Receipts - Cash Disbursements Summary
5/31/26

	Current Month	COVID	Total Less COVID
Cash Receipts	\$ 2,068,532	\$ -	\$ 2,068,532
Cash Disbursements	\$ 1,834,494	\$ -	\$ 1,834,494
NET	\$ 234,038	\$ -	\$ 234,038

Year-To-Date	COVID	Year-To-Date Less COVID
\$ 8,252,106	\$ -	\$ 8,252,106
\$ 7,642,383	\$ -	\$ 7,642,383
\$ 609,724	\$ -	\$ 609,724

	Prior Month	COVID	Total Less COVID
Cash Receipts	\$ 2,195,681	\$ -	\$ 2,195,681
Cash Disbursements	\$ 1,349,793	\$ -	\$ 1,349,793
NET	\$ 845,888	\$ -	\$ 845,888

Prior Month YTD	COVID	Prior Month YTD Less COVID
\$ 6,183,574	\$ -	\$ 6,183,574
\$ 5,807,889	\$ -	\$ 5,807,889
\$ 375,685	\$ -	\$ 375,685



**Board of Directors
Mangum Regional Medical Center**

June 23, 2026

May 2026 Financial Statement Overview

- Statistics
 - The average daily census (ADC) for May 2026 was **12.55**– (PY fiscal year end of **9.73**).
 - Year-To-Date Acute payer mix was approximately **78%** MCR/MCR Managed Care combined.
 - Year-To-Date Swing Bed payer mix was **83%** MCR & **17%** MCR Managed Care. For the prior year end those percentages were **80% & 20%**, respectively.
- Balance Sheet Highlights
 - The cash balance as of May 31, 2026, inclusive of both operating & reserves, was **\$1.02M**. This decreased **\$519K** from April 30, 2026.
 - Days cash on hand, inclusive of reserves, was **19** based on May expenses.
 - Net AR increased by **\$61K** from April.
 - Payments of approximately **\$1.83M** were made on AP (prior 3-month avg was **\$1.44M**).
 - Cash receipts were **\$127K** less than in the previous month (**\$2.2M vs \$2.07M**).
 - The Medicare principal balance was completely paid off in the month of August 2024.



- Income Statement Highlights

- Net patient revenue for May 2026 was **\$1.71M**, which is approximately an increase of **\$43K** from the prior month.
- Operating expenses, exclusive of interest & depreciation, were **\$1.66M**.
- 340B revenue was **\$7K** in May, this is a decrease of **\$3K** 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 = **\$387K**
- YTD Operating expenses = **\$460K**
- YTD Operating loss = **-\$73K**

MANGUM REGIONAL MEDICAL CENTER

Admissions, Discharges & Days of Care

Fiscal Year 2026

Item 8.

12/31/2026

	January	February	March	April	May	YTD
Admissions						
Inpatient	14	12	11	7	9	53
Swingbed	17	9	14	18	9	67
Observation	4	1	2	2	3	12
	35	22	27	27	21	132
Discharges						
Inpatient	13	11	11	10	8	53
Swingbed	18	9	12	14	12	65
Observation	4	1	2	2	3	12
	35	21	25	26	23	130
Days of Care						
Inpatient-Medicare	17	24	29	9	6	85
Inpatient-Medicare Managed Care	13	6	5	12	4	40
Inpatient-Other	5	7	0	12	11	35
Swingbed-Medicare	196	188	254	387	315	1,340
Swingbed-Medicare Managed Care	95	39	60	35	45	274
Swingbed-Other	0	0	0	0	8	8
Observation	6	2	6	2	4	20
	332	266	354	457	393	1,802
Calendar days	31	28	31	30	31	151
ADC - (incl OBS)	10.71	9.50	11.42	15.23	12.68	11.93
ADC	10.52	9.43	11.23	15.17	12.55	11.80
ER	132	121	126	144	164	687
Outpatient	293	292	306	336	358	1,585
RHC	291	253	321	367	277	1,509

MANGUM REGIONAL MEDICAL CENTER

Comparative Balance Sheet - Unaudited

Fiscal Year 2026

Item 8.

	January	February	March	April	May	12/31/25
Cash And Cash Equivalents	1,019,825	1,242,632	693,252	1,539,653	1,774,168	1,161,872
Patient Accounts Receivable, Net	1,551,232	1,518,902	2,021,275	2,098,047	2,158,695	1,192,826
Due From Medicare	123,029	187,043	139,266	92,538	18,167	92,538
Inventory	233,694	236,070	233,479	250,989	267,207	230,865
Prepays And Other Assets	1,554,966	1,535,715	1,534,910	1,513,284	1,524,497	1,570,019
Capital Assets, Net	1,449,909	1,421,726	1,393,748	1,365,771	1,357,794	1,454,496
Total Assets	5,932,655	6,142,086	6,015,930	6,860,283	7,100,528	5,702,615
Accounts Payable	15,461,240	15,550,680	15,458,474	15,775,440	15,642,460	15,351,958
AHSO Related AP	892,724	892,724	892,724	892,724	892,724	892,724
Deferred Revenue	141,879	108,872	-	80,317	77,237	0
Due To Medicare	(319)	(319)	(319)	435,225	771,883	(319)
Covid Grant Funds	-	-	-	-	-	0
Due To Cohesive - PPP Loans	-	-	-	-	-	0
Notes Payable - Cohesive	4,497,430	4,466,413	4,435,396	4,404,380	4,342,346	4,528,447
Notes Payable - Other	17,948	17,948	17,948	17,948	17,948	17,948
Alliantz Line Of Credit	-	-	-	-	-	0
Leases Payable	250,514	249,937	249,356	248,771	246,913	251,087
Total Liabilities	21,261,416	21,286,254	21,053,579	21,854,805	21,991,511	21,041,844
Net Assets	(15,328,762)	(15,144,168)	(15,037,650)	(14,994,522)	(14,890,983)	(15,339,229)
Total Liabilities and Net Assets	5,932,655	6,142,086	6,015,930	6,860,283	7,100,528	5,702,615

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	1,530,505	1,308,184
Mar-24	1,236,158	1,073,824	Mar-25	1,289,275	1,250,266	Mar-26	1,108,976	1,658,903
Apr-24	1,645,373	1,483,022	Apr-25	1,225,184	1,060,130	Apr-26	2,195,681	1,349,793
May-24	1,273,007	1,062,762	May-25	1,481,774	1,044,123	May-26	2,068,532	1,834,494
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>8,252,106</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>8,252,106</u></u>	

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

	Original Balance	Balance as of 05/31/26	Total Interest Paid as of 05/31/26
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	-	277,488.75
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) estimate	- (34,322.00)	-	-
2019 MCR pay (rec) Audit est.	(40,612.00)	-	-
2020 MCR pay (rec) Audit	(74,956.00)	-	-
FY23 (8-month IRR) estimate	- 95,225.46	-	7,038.71
FY23 (8-month IRR) L4315599	1,918,398.00	-	155,799.09
FY23 MCR pay (rec) remaining estimate	-	-	-
FY24 MCR pay (rec) estimate	-	(91,323.00)	
FY25 MCR pay (rec) estimate	-	73,156.25	
FY26 MCR pay (rec) estimate	-	772,202.00	
Total	7,009,696.31	753,716.64	1,355,350.56

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

Item 8.

MTD					YTD			
Actual	Budget	Variance	% Change		Actual	Budget	Variance	% Change
154,630	305,426	(150,795)	-49%	Inpatient revenue	1,121,605	1,507,632	(386,027)	-26%
1,646,464	1,150,704	495,760	43%	Swing Bed revenue	7,355,970	5,605,765	1,750,204	31%
761,990	707,801	54,189	8%	Outpatient revenue	3,536,090	3,455,779	80,311	2%
159,101	177,441	(18,341)	-10%	Professional revenue	751,009	864,353	(113,344)	-13%
<u>2,722,186</u>	<u>2,341,372</u>	<u>380,813</u>	<u>16%</u>	Total patient revenue	<u>12,764,674</u>	<u>11,433,530</u>	<u>1,331,144</u>	<u>12%</u>
757,681	712,700	44,981	6%	Contractual adjustments	4,156,565	3,400,902	755,663	22%
336,658	-	336,658	#DIV/0!	Contractual adjustments: MCR Settlement	772,202	-	772,202	#DIV/0!
(158,457)	(93,473)	(64,985)	70%	SHOPP revenue	(575,992)	(467,363)	(108,629)	23%
74,732	54,611	20,122	37%	Bad debts	224,205	273,054	(48,849)	-18%
<u>1,010,615</u>	<u>860,784</u>	<u>336,776</u>	<u>39%</u>	Total deductions from revenue	<u>4,576,981</u>	<u>4,141,319</u>	<u>1,370,387</u>	<u>33%</u>
1,711,571	1,480,588	230,982	16%	Net patient revenue	8,187,693	7,292,211	895,483	12%
2,619	5,452	(2,834)	-52%	Other operating revenue	46,574	27,295	19,279	71%
7,677	21,065	(13,388)	-64%	340B REVENUES	64,325	108,452	(44,127)	-41%
<u>1,721,866</u>	<u>1,507,106</u>	<u>214,760</u>	<u>14%</u>	Total operating revenue	<u>8,298,592</u>	<u>7,427,957</u>	<u>870,635</u>	<u>12%</u>
				Expenses				
531,620	450,879	80,741	18%	Salaries and benefits	2,339,073	2,205,189	133,884	6%
77,724	84,838	(7,114)	-8%	Professional Fees	379,600	421,043	(41,443)	-10%
452,386	443,574	8,813	2%	Contract labor	2,312,358	2,166,935	145,424	7%
147,671	124,421	23,250	19%	Purchased/Contract services	699,679	622,049	77,631	12%
225,000	225,000	-	0%	Management expense	1,125,000	1,125,000	-	0%
79,102	82,610	(3,509)	-4%	Supplies expense	429,690	403,260	26,429	7%
17,730	16,403	1,327	8%	Rental expense	92,673	82,014	10,659	13%
10,774	13,139	(2,365)	-18%	Utilities	57,447	65,695	(8,248)	-13%
1,828	1,304	524	40%	Travel & Meals	6,568	6,497	72	1%
8,481	13,460	(4,980)	-37%	Repairs and Maintenance	67,925	67,301	624	1%
18,756	13,720	5,036	37%	Insurance expense	81,827	68,602	13,225	19%
12,382	13,266	(883)	-7%	Other Expense	64,518	66,325	(1,807)	-3%
6,827	15,391	(8,564)	-56%	340B EXPENSES	52,201	77,811	(25,611)	-33%
<u>1,590,282</u>	<u>1,498,005</u>	<u>92,277</u>	<u>6%</u>	Total expense	<u>7,708,559</u>	<u>7,377,720</u>	<u>330,839</u>	<u>4%</u>
<u>131,584</u>	<u>9,101</u>	<u>122,484</u>	<u>1346%</u>	EBIDA	<u>590,032</u>	<u>50,237</u>	<u>539,795</u>	<u>1074%</u>
<u>7.6%</u>	<u>0.6%</u>	<u>7.04%</u>		EBIDA as percent of net revenue	<u>7.1%</u>	<u>0.7%</u>	<u>6.43%</u>	
68	100	(32)	-32%	Interest	424	100	324	323%
27,977	28,257	(280)	-1%	Depreciation	141,362	28,257	113,105	400%
<u>103,539</u>	<u>(19,257)</u>	<u>122,796</u>	<u>-638%</u>	Operating margin	<u>448,246</u>	<u>21,880</u>	<u>426,367</u>	<u>1949%</u>
-	-	-		Other	-	-	-	
-	-	-		Total other nonoperating income	-	-	-	
<u>103,539</u>	<u>(19,257)</u>	<u>122,796</u>	<u>-638%</u>	Excess (Deficiency) of Revenue Over Expenses	<u>448,246</u>	<u>21,880</u>	<u>426,367</u>	<u>1949%</u>
<u>6.01%</u>	<u>-1.28%</u>	<u>7.29%</u>		Operating Margin %	<u>5.40%</u>	<u>0.29%</u>	<u>5.11%</u>	

MANGUM REGIONAL MEDICAL CENTER

Item 8.

Statement of Revenue and Expense Trend - Unaudited
Fiscal Year 2026

	January	February	March	April	May	YTD
Inpatient revenue	233,308	235,271	265,042	233,353	154,630	1,121,605
Swing Bed revenue	1,240,427	1,132,789	1,503,209	1,833,081	1,646,464	7,355,970
Outpatient revenue	630,118	606,237	756,922	780,822	761,990	3,536,090
Professional revenue	145,592	125,414	166,712	154,191	159,101	751,009
Total patient revenue	2,249,445	2,099,711	2,691,884	3,001,448	2,722,186	12,764,674
Contractual adjustments	827,609	658,651	1,135,029	777,595	757,681	4,156,565
Contractual adjustments: MCR Settlement	(30,491)	(64,014)	47,777	482,272	336,658	772,202
SHOPP Revenue	(108,872)	(108,872)	(108,872)	(90,920)	(158,457)	(575,992)
Bad debts	(11,068)	37,583	(40,798)	163,755	74,732	224,205
Total deductions from revenue	677,178	523,349	1,033,137	1,332,702	1,010,615	4,576,981
Net patient revenue	1,572,267	1,576,362	1,658,748	1,668,745	1,711,571	8,187,693
Other operating revenue	3,872	3,245	6,120	30,719	2,619	46,574
340B REVENUES	21,609	10,205	14,719	10,114	7,677	64,325
Total operating revenue	1,597,748	1,589,812	1,679,587	1,709,578	1,721,866	8,298,592
	99.1%	112.2%	105.4%	100.1%	105.8%	104.3%
Expenses						
Salaries and benefits	459,105	400,592	468,239	479,517	531,620	2,339,073
Professional Fees	71,745	83,267	75,744	71,119	77,724	379,600
Contract labor	524,512	404,584	448,343	482,533	452,386	2,312,358
Purchased/Contract services	107,537	118,752	125,198	200,521	147,671	699,679
Management expense	225,000	225,000	225,000	225,000	225,000	1,125,000
Supplies expense	83,971	66,482	104,211	95,924	79,102	429,690
Rental expense	19,350	18,104	18,205	19,284	17,730	92,673
Utilities	14,051	11,001	10,994	10,627	10,774	57,447
Travel & Meals	328	891	1,267	2,255	1,828	6,568
Repairs and Maintenance	8,128	9,273	26,832	15,211	8,481	67,925
Insurance expense	16,664	19,509	13,449	13,449	18,756	81,827
Other	13,863	10,320	15,647	12,306	12,382	64,518
340B EXPENSES	13,660	9,193	11,844	10,677	6,827	52,201
Total expense	1,557,914	1,376,967	1,544,972	1,638,424	1,590,282	7,708,559
EBIDA	\$ 39,834	\$ 212,846	\$ 134,614	\$ 71,154	\$ 131,584	\$ 590,032
EBIDA as percent of net revenue	2.5%	13.4%	8.0%	4.2%	7.6%	7.1%
Interest	119	69	119	50	68	424
Depreciation	29,247	28,183	27,977	27,977	27,977	141,362
Operating margin	\$ 10,467	\$ 184,594	\$ 106,518	\$ 43,128	\$ 103,539	\$ 448,246
Other	-	-	-	-	-	-
Total other nonoperating income	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Excess (Deficiency) of Revenue Over Expenses	10,467	184,594	106,518	43,128	103,539	448,246

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

	Current			Last FYE	Net Change
	Month	Year-To-Date	12-Month Projected		
Gross Patient Revenue	38,390	191,921	460,609	342,640	117,970
Less: Revenue deductions	36,267	194,759	467,421	254,389	213,033
Net Patient Revenue	74,657	386,680	928,031	597,028	331,002
Other Income (if any)	-	-	-	-	-
Operating revenue	74,657	386,680	928,031	597,028	331,002
Operating Expenses:					
Leased Salaries	31,240	167,139	401,134	238,089	163,044
Contract labor	8,762	17,948	43,075	1,969	41,106
Benefits	6,901	21,722	52,132	44,085	8,046
Provider Fees	9,110	24,063	57,751	88,636	(30,885)
Purchased/Contract services	4,737	31,968	76,722	67,107	9,615
Management expense	11,250	56,250	135,000	135,000	-
Supplies expense	730	3,277	7,865	7,708	156
Rental expense	1,750	8,920	21,407	21,444	(36)
Utilities	593	3,070	7,367	7,335	32
Repairs and Maintenance	-	583	1,399	868	532
Insurance expense	248	1,238	2,971	2,845	126
Other expense	961	2,661	6,385	4,591	1,794
CAH Overhead Allocation	24,154	120,770	289,848	289,847	1
Total Operating Expenses	100,436	459,607	1,103,057	910,335	192,721
Net Income (loss)	(25,779)	(72,928)	(175,026)	(313,307)	138,281

340B

Gross revenues	7,676.97	64,325	154,379	234,025	(79,646)
Operating expenses	6,827.32	52,201	125,282	156,577	(31,295)
Profit (loss)	850	12,124	29,097	77,448	(48,351)
Net Income (loss) with 340B	(24,929)	(60,804)	(145,929)	(235,859)	89,930

Stats

Onsite Visits	130	847	2,033	2,268	(235)
Swing Bed Visits	147	662	1,589	379	1,210
Telehealth, CCM, Nurse Visits	0	0	-	-	-
Total Visits	277	1509	3622	2647	975

Payor Mix based on Total Visits

Medicare	46%	46%	34%	13%
Managed Medicare	15%	15%	6%	8%
Medicaid / Managed Medicaid	19%	19%	23%	-4%
Commercial/Other	20%	20%	37%	-17%
Total	100%	100%	100%	0%

Clinic Days	20	105	252	252	-
Average Visit Per Day	14	14	14	11	4

Cost Per Visit	\$ 362.58	\$ 304.58	\$ 304.58	\$ 343.91	\$ (39.33)
Medicare Visit Cap		\$ 292.54	\$ 292.54	\$ 282.65	
Over (Under) Cap		\$ 12.04	\$ 12.04	\$ 61.26	

VENDOR NAME	DESCRIPTION	0-30 Days	31-60 Days	61-90 Days	OVER 90 Days	5/31/2026	4/30/2026	3/31/2026	2/28/2026	1/31/2026
AMERISOURCE RECEIVABLES (ARFC)	Pharmacy Supplies	9,771.67	-	-	-	9,771.67	7,188.61	10,756.85	10,759.15	7,543.78
AT&T	Fax Service	2,008.37	-	-	-	2,008.37	-	-	(794.71)	-
BIO-RAD LABORATORIES INC	Lab Supplies	483.84	-	-	-	483.84	465.88	-	2,638.52	-
BRIAN SHIDELER	Repairs/maintenance	-	-	-	-	-	1,370.00	-	-	4,558.55
CARDINAL HEALTH 110, LLC	Patient Supplies	-	-	-	(144.30)	(144.30)	(144.30)	(144.30)	(144.30)	(144.30)
CAREFUSION	Rental Equipment	-	-	-	-	-	4,449.00	4,449.00	-	4,449.00
careLearning	Training	-	-	-	-	-	-	-	-	3,442.50
CARLOS MENDOZA	Education/Training	-	-	-	-	-	-	-	-	750.00
CARRIER CORP	Shipping	-	-	-	-	-	-	3,673.40	-	-
CASAD COMPANY INC	Supplies	-	-	-	-	-	282.50	-	-	-
CITY OF MANGUM	Utilities	-	-	-	-	-	6,021.31	-	-	5,606.15
CLEAN THE UNIFORM HOLDING COMP	Linen Services	4,466.93	-	-	-	4,466.93	4,256.17	3,012.78	4,132.87	4,217.87
CLIA LABORATORY PROGRAM	Lab Services	-	-	-	-	-	-	-	3,840.00	-
COHESIVE HEALTHCARE MGMT	Mgmt Fees	256,016.76	229,766.66	4,766.66	2,521,118.65	3,011,668.73	2,996,971.13	2,992,204.47	3,183,437.81	2,984,517.31
COHESIVE STAFFING SOLUTIONS	Agency Staffing Service	558,277.48	888,375.87	818,711.00	8,898,656.33	11,164,020.68	11,560,574.47	10,941,186.41	11,131,764.74	11,117,477.91
CONVATEC, INC	Patient Supplies	-	-	-	1,407.00	1,407.00	-	1,133.00	4,921.00	3,426.00
CORRY KENDALL, ATTORNEY AT LAW	Legal Fees	-	-	-	-	-	-	2,000.00	-	-
DAN'S HEATING & AIR CONDITIONI	Repairs/maintenance	-	-	-	-	-	2,650.00	295.44	-	-
DELL FINANCIAL SERVICES LLC	Server Lease	1,270.62	-	-	-	1,270.62	-	-	-	-
DIAGNOSTIC IMAGING ASSOCIATES	Radiology Purch Svs	2,150.00	-	-	-	2,150.00	2,150.00	2,150.00	2,150.00	2,150.00
DIRECTV	Cable service	297.60	-	-	-	297.60	297.60	-	-	-
DOYLE HOPPER	Repair and Maintenance	-	-	-	-	-	-	-	125.00	-
DP MEDICAL SERVICES	Rental	-	-	-	-	-	1,750.00	-	-	1,750.00
DTG MEDICAL ELECTRONICS	Patient Supplies	-	-	-	-	-	1,999.64	-	-	-
DYNAMIC ACCESS	Vascular Consultant	1,193.52	-	-	-	1,193.52	3,713.17	1,591.36	3,607.08	1,591.36
EARTHSAFE CHEMICAL ALTERNATIVE	Patient Supplies	-	-	-	-	-	-	-	-	838.36
ENTRUSTED TRANSPORT, LLC	Patient Transportation Service	-	-	-	-	-	678.75	-	-	-
FEDEX	Shipping	54.42	-	-	-	54.42	18.75	-	17.39	17.92
FOX BUILDING SUPPLY	Repairs/maintenance	-	-	-	-	-	-	-	-	837.83
FUCHA RADIO, LLC	Advertising	-	-	-	-	-	110.00	110.00	110.00	110.00
GEORGE BROS TERMITE & PEST CON	Pest Control Service	-	-	-	-	-	-	200.00	200.00	-
GE PRECISION HEALTHCARE LLC	Patient Supplies	-	-	-	-	-	-	-	606.40	-
GRAINGER	Maintenance Supplies	330.59	-	-	-	330.59	-	256.32	700.91	193.41
GREER COUNTY TREASURER	Insurance	-	-	-	-	-	-	4,680.00	4,680.00	4,680.00
HAC INC	Dietary Supplies	152.96	-	-	-	152.96	102.91	6.49	50.74	82.81
HEWLETT-PACKARD FINANCIAL SERV	Computer Services	307.10	-	-	-	307.10	307.10	307.10	307.10	307.10
INMAR RX SOLUTIONS INC.	Pharmacy Supplies	3,780.00	-	-	-	3,780.00	-	-	-	-
INTEGO SOFTWARE, LLC	Software license	-	-	-	-	-	-	481.36	-	-
KIRKS EMERGENCY MEDICAL SERVIC	Patient Transportation Service	-	-	-	-	-	19,632.00	-	-	-
LOCKE SUPPLY	Plant Ops supplies	-	-	-	-	-	99.10	156.08	-	223.23
MCKESSON - 340 B	Pharmacy Supplies	-	-	-	-	-	464.83	-	-	-
MCKESSON / PSS - DALLAS	Patient Care/Lab Supplies	1,441.71	-	-	-	1,441.71	-	-	-	4,962.07
MEDLINE INDUSTRIES	Patient Care/Lab Supplies	14,862.93	12,026.62	-	1,248.03	28,137.58	27,530.87	11,666.81	18,168.99	31,582.03
MYHEALTH ACCESS NETWORK, INC	Compliance purch svs	758.95	-	-	-	758.95	758.95	758.95	758.95	758.95
NICHOLAS WALKER	Expense Reimbursement	175.00	-	-	-	175.00	-	-	-	-
NUANCE COMMUNICATIONS INC	RHC purch svs	-	-	-	-	-	123.00	-	246.00	123.00
OFMQ	Quality purch svs	360.00	-	-	-	360.00	360.00	360.00	360.00	360.00
OK STATE DEPT OF HEALTH	License	-	-	-	-	-	-	-	180.00	-
OKLAHOMA DEPARTMENT OF LABOR	License	-	-	-	-	-	50.00	-	-	-
OKLAHOMA HOSPITAL ASSOCIATION	License	-	-	-	-	-	-	-	-	2,199.00
PHARMACY CONSULTANTS, INC.	PHARMACY CONSULTANTS, INC.	2,770.00	-	-	-	2,770.00	3,777.67	2,770.00	2,770.00	3,426.84
PHILADELPHIA INSURANCE COMPANY	OHA Insurance	-	-	-	-	-	-	-	3,215.58	-
PITNEY BOWES GLOBAL FINANCIAL	Postage rental	-	-	-	-	-	29.34	-	-	-
PM BIOMEDICAL INC.	Repair and Maintenance	-	-	-	-	-	-	-	595.00	-

VENDOR NAME	DESCRIPTION	0-30 Days	31-60 Days	61-90 Days	OVER 90 Days	5/31/2026	4/30/2026	3/31/2026	2/28/2026	1/31/2026
REYES ELECTRIC LLC	COVID Capital	-	-	-	-	-	775.00	-	-	-
RUSSELL ELECTRIC & SECURITY	Repair and Maintenance	35.00	-	-	-	35.00	-	-	35.00	-
SIEMENS HEALTHCARE DIAGNOSTICS	Service Contract	2,395.15	768.48	-	-	3,163.63	5,149.53	872.57	-	1,067.39
SMAART MEDICAL SYSTEMS INC	Radiology interface/Radiologist provider	1,735.00	-	-	-	1,735.00	1,735.00	1,735.00	1,735.00	1,735.00
SPARKLIGHT BUSINESS	Cable service	383.01	-	-	-	383.01	141.43	129.43	149.43	141.43
STANDLEY SYSTEMS LLC	Printer lease	2,509.69	-	-	-	2,509.69	2,345.50	2,345.50	2,509.69	4,855.19
STAPLES, INC.	Office Supplies	3,584.43	382.14	-	-	3,966.57	635.99	1,296.68	72.59	703.74
STERICYCLE / SHRED-IT	Waste Disposal Service	-	-	-	-	-	-	-	766.00	1,350.49
STERICYCLE INC	Waste Disposal Service	1,079.17	-	-	-	1,079.17	-	1,553.28	-	-
SUMMIT UTILITIES	Utilities	1,369.88	-	-	-	1,369.88	1,357.81	2,131.46	3,524.47	3,236.07
TECUMSEH OXYGEN & MEDICAL SUPP	Patient Supplies	4,222.00	-	-	-	4,222.00	4,598.23	-	2,133.23	-
TEJASMEX LLC	Carport	-	-	-	-	-	-	4,348.72	-	-
TOPIET SALES, INC	Software license	-	-	-	-	-	-	-	225.50	-
TRIOSE INC	Freight	131.83	114.92	-	-	246.75	114.92	-	-	-
T & S LAWN SERVICES	Repairs/maintenance	-	-	-	-	-	-	-	1,200.00	-
US FOODSERVICE-OKLAHOMA CITY	Food and supplies	3,312.13	-	-	-	3,312.13	7,655.08	4,857.85	4,246.29	459.73
Grand Total		881,687.74	1,131,434.69	823,477.66	11,422,285.71	14,258,885.80	14,672,546.94	14,003,332.01	14,396,001.42	14,205,587.72
					Conversion Variance	13,340.32	13,340.32	13,340.32	13,340.32	13,340.32
					AP Control	14,604,516.14	15,018,177.28	14,348,962.35	14,744,742.67	14,551,232.53
					Accrued AP	1,930,667.29	1,649,986.02	2,002,235.17	1,698,661.12	1,802,731.61
					AHSO Related AP	(892,723.76)	(892,723.76)	(892,723.76)	(892,723.76)	(892,723.76)
					TOTAL AP	15,642,459.67	15,775,439.54	15,458,473.76	15,550,680.03	15,461,240.38
						15,642,459.67	15,775,439.54	15,458,473.76	15,550,680.03	15,461,240.38

Insurance Company: CFC Underwriting Limited
Policy Type: Cyber
Policy Number: ESN0140300576
Policy Term Dates: 4/21/26– 4/21/27

RE: Agent of Record Assignment

To Whom It May Concern:

I, _____, an owner/officer/administrator of _____, hereby appoint BancFirst Insurance Services, Inc., as my agent/broker of record in regard to the captioned policy. They are hereby authorized to act on my behalf as my agent with your company. This includes my express authorization that you may provide my agent with any information associated with my policy.

I do not wish to assign this policy/quote to any other agent, nor do I wish to wait for the 10-day period to expire for other agents to procure a rescinding letter. Please release the captioned quote/policy to BancFirst Insurance Services, Inc., when completed.

This letter supersedes any other Agent of Record letter and is hereby effective until revoked in writing.

Sincerely,

Owner/Officer/CEO/President