



Agenda

Mangum City Hospital Authority

September 23, 2025 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 September 23, 2025, 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. August 26, 2025, regular meeting minutes as present.
2. Approve August 2025 Clinic Report.
3. Approve August 2025 Medical Staff Minutes.
4. Approve August 2025 Quality Report
5. Approve August 2025 CCO Report.
6. Approve August 2025 CEO Report.
7. Approve the following forms, policies, appointments, and procedures previously approved, on 08/14/2025 Quality Committee and on 08/21/2025 Medical Staff.

Discussion and Possible Action to Approve the Policy and Procedure: ADM-MRMC-Hospital Workplace Violence Prevention Program

Discussion and Possible Action to Approve the Policy and Procedure: MRMC-Hospital Workplace Violence Event Tracking Log

Discussion and Possible Action to Approve the Policy and Procedure: MRMC-Intimate Partner/Domestic Violence Assessment Tool

Discussion and Possible Action to Approve the Policy and Procedure: MRMC-Post-Threat or Event Report

Discussion and Possible Action to Approve the Policy and Procedure: MRMC-Violence/Aggression Assessment Checklist (VAAC)

Discussion and Possible Action to Approve the Policy and Procedure: MRMC- Workplace Violence Incident Report Form

Discussion and Possible Action to Approve the Policy and Procedure: MRMC- Hospital Violence Hazard Vulnerability Assessment Tool

Discussion and Possible Action to Approve the Policy and Procedure: MRMC- Workplace Violence Incident Immediate Debrief Form

Discussion and Possible Action to Approve the Policy and Procedure: MRMC- Hospital Workplace Violence Risk Assessment Analysis/Checklist

Discussion and Possible Action to Approve the Policy and Procedure: MRMC-Workplace Violence in the Healthcare Setting Educational Course

Discussion and Possible Action to Approve the Policy and Procedure: MRMC- Workplace Violence Prevention-New Hire Orientation Staff Education PowerPoint

Discussion and Possible Action to Approve the Policy and Procedure: MRMC-EDPR-010 Postpartum Hemorrhage Orders

Discussion and Possible Action to Approve the Policy and Procedure: MRMC-EDPR-011 Severe Intrapartum/Postpartum Hypertension Order Set

Discussion and Possible Action to Approve the Policy and Procedure: MRMC-EDPR-012 Magnesium Sulfate Infusion Protocol

Discussion and Possible Action to Approve the Policy and Procedure: MRMC- EDM-022 Obstetrical Triage, Screening, Stabilization, and Disposition

Discussion and Possible Action to Approve the Policy and Procedure: MRMC-EDM- 023 Obstetrical Emergencies- Precipitous Delivery (Code Labor)

Discussion and Possible Action to Approve the Policy and Procedures: MRMC- Emergency Department Policy and Procedure Manual Table of Contents (has been updated to include OB policy and procedures)

Discussion and Possible Action to Approve the Policy and Procedure: MRMC- Administrative Policy Manual Table of Contents (has been updated to include Workplace Violence)

Discussion and Possible Action to Approve the Policy and Procedure: MRMC- NUR-015 Intravenous Line Management Policy

Discussion and Possible Action to Approve the Policy and Procedure: MRMC- Conditions of Admission

8. 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

- [9.](#) Financial Report for August 2025

OTHER ITEMS

10. Discussion and Possible Action to Approve the termination of Vehicle Lease Agreement between Mangum Regional Medical Center and Cohesive MediRyde, LLC
- [11.](#) Discussion and Possible Action to Approve the Progressive Insurance Quote for the new Strong Minds Transport Van.
- [12.](#) Discussion regarding acquiring new building insurance for the hospital due to the cancellation of previous policy.

EXECUTIVE SESSION

13. Discuss 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):
 - Contracts:
 - Teisha Gallego APRN
 - Re-Credentialing
 - Dr. Barry Davenport, MD-Courtesy Privileges

OPEN SESSION

14. Discussion and Possible Action in Regard to Executive Session.

EXECUTIVE SESSION

15. Discussion and possible action to enter into executive session for discussing matters where disclosure of information would violate confidentiality requirements of state or federal law pursuant to 25 OK Stat § 307 (B7):
 - Complaints
 - Grievances

OPEN SESSION

16. 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 **3:00 p.m. on the 19th day of September 2025**, by the Secretary of the Mangum City Hospital Authority.

Brittany McClintock Secretary



Minutes

Mangum City Hospital Authority Session

August 26, 2025 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 August 26, 2025, 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

CALLED TO ORDER AT 5:30 p.m.

ROLL CALL AND DECLARATION OF A QUORUM

PRESENT

Trustee Cheryl Lively
Trustee Michelle Ford
Trustee Ronnie Webb

ABSENT

Trustee Lisa Hopper
Trustee Carson Vanzant

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.

Trustee Lively asked to remove item number 4 from the consent agenda. Attorney Kendall stated that item number 4 will be considered separately.

Motion to approve consent agenda.

Motion made by Trustee Lively, Seconded by Trustee Ford.

Voting Yea: Trustee Lively, Trustee Ford, Trustee Webb

1. July 22, 2025, regular meeting minutes as present.
2. Approve July 2025 Clinic Report.
3. Approve July 2025 Medical Staff Minutes.
4. Approve July 2025 Quality Report.
5. Approve July 2025 CCO Report.
6. Approve July 2025 CEO Report.
7. Approve the following forms, policies, appointments, and procedures previously approved, on 08/14/2025 Quality Committee and on 08/21/2025 Medical Staff.
Discussion and Possible Action to Approve the Policy and Procedure: Neutropenic Precaution Sign-English

Discussion and Possible Action to Approve the Policy and Procedure: Neutropenic Precaution Sign-Spanish

Discussion and Possible Action to Approve the Policy and Procedure: MRMC Transmission Based Precautions: Preventing Transmission of Infectious Agents Policy

Discussion and Possible Action to Approve the Policy and Procedure: MRMC Chest Pain/Acute Coronary Syndrome (ACS)/STEMI/NSTEMI Protocol

Discussion and Possible Action to Approve the Policy and Procedure: MRMC – Management of Acute Chest Pain and Acute Coronary Syndrome (ACS) Policy

Discussion and Possible Action to Approve the Policy and Procedure: MRMC – Management of ST-Elevation Myocardial Infarction (STEMI), Non-ST Elevation Myocardial Infarction (NSTEMI) and Unstable Angina (UA) Acute Coronary Syndrome (ACS) Policy

Discussion and Possible Action to Approve the Policy and Procedure: MRMC – Fibrinolytic Indications and Contraindications Checklist & TNKase/Activase Dosing Instructions

Discussion and Possible Action to Approve the Policy and Procedure: MRMC-Fibrinolytic Therapy Dosing.

Discussion and Possible Action to Approve the Policy and Procedure: MRMC-ECG Screening Criteria

Discussion and Possible Action to Approve the Policy and Procedure: MRMC- Chest Pain Assessment Tool

Discussion and Possible Action to Approve the Policy and Procedure: MRMC-Heart Score Evaluation Tool.

Discussion and Possible Action to Approve the Policy and Procedure: MRMC-Cardiac Chest Pain/ACS/NSTEMI Outcome Review Tool.

8. Discussion related to HIM Delinquencies- none to report.

FURTHER DISCUSSION

20. Approve July 2025 Quality Report

The nurse documented they notified the house supervisor. The house supervisor didn't put in any notes that they were notified or that they notified the provider until the next morning.

Motion to approve July 2025 Quality Report.

Motion made by Trustee Lively, Seconded by Trustee Ford.

Voting Yea: Trustee Lively, Trustee Ford, Trustee Webb

REMARKS

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

No remarks from the public.

REPORTS

9. Financial Report for July 2025

Average daily census 8.77 up 4 days from June and down 1 day from the year-to-date monthly average.

Acute payer mix from July 93% for Medicare and Medicare Managed Care with the prior month being 74%.

Swing bed payer mix for July was 92% Medicare and 10% Medicare Managed Care. The year-to-date percentage is 75% and Medicare Managed Care is 25%.

The operating margin loss of \$34,000 for the month of July this is up \$13,000 from June. Year-to-date operating margin is a loss of \$115,000.

Net patient revenue was \$1.43 million for the month. That's an increase of \$20,000 from last month and an increase of \$13,000 the year-to-date monthly average.

340B Revenue was \$22,000 for July and expenses were \$7,000.

Operating expenses were at \$1.48 million for July. This is up \$7,000 from last month and \$22,000 from the year-to-date monthly average.

Patient days for July were at 272. It's up 67 from June.

Cash receipts for the month were at 2.29 million. This is an increase of 1.1 million from the year-to-date monthly average and an increase of 922,000 from June. This is due to receiving the 2024 cost report settlement at the end of July.

Cash disbursements for the month were at 1.21 million.

Cash balance at the end of the month was 2.29 million, giving us about 45 days of cash on hand. Again, due to the cost report settlement timing.

For the clinic the average number of visits per day were 9.38.

Year- to -date revenue for the clinic was \$307,000.

Operating expenses are \$612,000 and the year-to-date net loss is \$305,000 as of July.

OTHER ITEMS

10. Discussion regarding and update on the Lab OR project.

Mr. Martinez stated We do have one architect's statement back for statement of work for what he is going to be doing. We are bringing another one in right now his preliminary is \$7,000 for us to just to say we are putting up wiring in the O.R. Again, this is something that the state is requiring, it's not us requiring it. It's the State Department of Health saying we have to have an architect stamp of approval on this. I've got one more to get Cohesive is already working with a vendor out of Kansas. So, we are going to reach out to them to see if they can help us out. Since it is over \$5,000, I am going to bring in 3.

11. Discussion and Possible Action to Approve the SWODA and MRMC memorandum of understanding for Naloxone vending machines to be placed at MRMC.

Motion to approve the SWODA and MRMC memorandum of understanding for Naloxone vending machines to be placed at MRMC

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

12. Discussion and Possible Action to Approve the Western Governors University (WGU) Education Affiliation Agreement for MRMC to become host site for students of WGU.

Motion to approve the Western Governors University (WGU) Education Affiliation Agreement for MRMC to become host site for students of WGU.

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

13. Discussion and Possible Action to Approve the Port53 Technologies Quote for Meraki Cloud Software subscription.

Motion to approve the Port53 Technologies Quote for Meraki Cloud Software subscription.

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

14. Discussion and Possible Action to Approve the Dell agreement for computer purchasing or leasing.

Motion to approve the Dell agreement for computer purchasing.

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

EXECUTIVE SESSION

15. 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 07/01/2025
- **Re-Credentialing**
 - Dr. Fei-Ling Yeh, DO-Courtesy Privileges

Motion to enter executive session 5:55pm.

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

OPEN SESSION

Motion to enter into open session 6:02pm.

Seconded by Trustee Lively.

Voting Yea: Trustee Lively, Trustee Ford, Trustee Webb

16. Discussion and Possible Action in Regard to Executive Session.

Approve credentialing and re-credentialing.

Seconded by Trustee Lively.

Voting Yea: Trustee Lively, Trustee Ford, Trustee Webb

EXECUTIVE SESSION

17. Discussion and possible action to enter into executive session for discussing matters where disclosure of information would violate confidentiality requirements of state or federal law pursuant to 25 OK Stat § 307 (B7):

- Complaints
- Grievances

Motion to enter executive session 6:02pm.

Motion made by Trustee Lively, Seconded by Trustee Webb.

Voting Yea: Trustee Lively, Trustee Ford, Trustee Webb

OPEN SESSION

Motion to enter into open session 6:05pm.

Motion made by Trustee Ford, Seconded by Trustee Lively.

Voting Yea: Trustee Lively, Trustee Ford, Trustee Webb

18. 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

Attorney Kendall stated that he received an open records request pertaining to a Brian Rich, MD. He stated that he had passed it on to the City Clerk.

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)

None.

ADJOURN

Motion to Adjourn

Motion to adjourn at 6:07pm.

Motion made by Trustee Webb, Seconded by Trustee Lively.

Voting Yea: Trustee Lively, Trustee Ford, Trustee Webb

Duly filed and posted at **3:00 p.m. on the 22nd day of August 2025**, by the Secretary of the Mangum City Hospital Authority.

Carson Vanzant, Chairman

Brittany McClintock, Secretary



Clinic Operations Report

Mangum Family Clinic

August 2025

Monthly Stats	August 2024	August 2025
Total Visits	167	218
Provider Prod	156	175
RHC Visits	157	202
Nurse Visits	4	5
Televisit	0	0
Swingbed	6	14

Provider Numbers	RHC	TH	SB
Ogembo	182		
Sanda	36		

Payor Mix	
Medicare	47
Medicaid	68
Self	12
Private	50

Visits per Geography	
Mangum	142
Granite	17
Willow	10

Month	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total
Visits	187	183	183	209	205	176	177	218					

Clinic Operations:

Item 2.

- Clinic visits are trending upwards.
- Abundant school physicals.

Quality Report:

Improvement Measure	Actual	Goal	Comments
Reg Deficiencies	0	0	12 audited
Patient Satisfaction	5	5	2-excellent; 3-good
New Patients	16	10	Excellent
No Show	11.5%	<12%	22 no shows for the month
Expired Medications	0	0	

Outreach:

- Prepping for flu season.
- School physical Facebook posting.

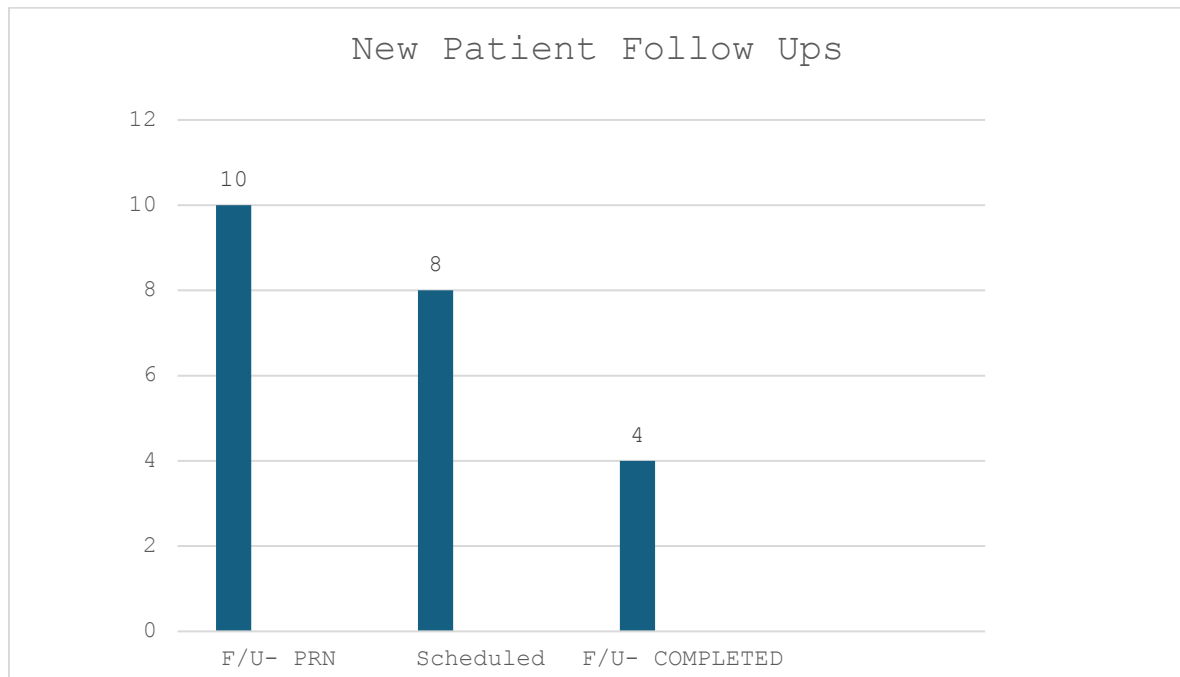
Summary :

Solid numbers for the month of August. Continuing to work on increasing availability of appointment slots. Clinic staff doing great at keeping “no shows” down. Dr. Sanda and Nelson Ogembo had a few slow days in the clinic but, Mangum Family clinic remains dedicated to quality and compassionate care to our community and neighbors.

“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 Regional Medical Center
Medical Staff Meeting
Thursday
August 21, 2025

MEMBERS PRESENT:

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

ALLIED HEALTH PROVIDER PRESENT

David Arles, APRN-CNP
Mary Barnes, APRN-CNP

NON-MEMBERS PRESENT:

Kelley Martinez, RN, CEO
Nick Walker, RN, CCO
Chelsea Church, PharmD
Denise Jackson, RN – Quality
Chasity Howell, RN – Utilization Review

1. Call to order
 - a. The meeting was called to order at 01:12 pm by Dr. John Chiaffitelli, Medical Director.
2. Acceptance of minutes
 - a. The minutes of the July 17, 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
 - Operations Overview
 - The roof repair is ongoing well. We have been working with electricians and heating and air companies during the roof repair because they have raised the height of the roof over 9 inches in some areas, some units have had to be raised, and new wiring ran to account for increase height.
 - We have had some increased leaking with the recent rain fall

mainly due to the progress of the repairs.

- Roof completion is still on track for the first of September.
- We did have to go on CT divert for 3 days due to leaking in the CT room. We had the GE service technician come out and inspect the CT machine prior to turning it back on to ensure it did not have any damage.
- Room remodeling is continuing.
- According to standards, since we are doing rewiring in the OR for the Lab, we do have to get an architect involved.
- Looking at clinic collections for July, we collected a total of \$349.22 down from \$695.64 at time of service.
- Upfront hospital collections for July were \$1685.68.
- We continue to work on our outreach and marketing within our community and surrounding areas.
- Patient rounds continue to provide positive feedback on patient care.

Written report remains in the minutes.

5. Committee / Departmental Reports

a. Medical Records –

1. June – ER – Two ER Provider notes were needed.

OBS - ER note instead of H&P

Acute - ER note instead of H&P

No DC Summary

SWB - 0

All notes were completed according to Hospital By Laws

2 July - ER - Three ER Provider notes were needed.

OBS - One H&P needed

Acute - Two ER note instead of H&P

One lacking Provider Note

SWB - 0

All notes were completed according to Hospital By Laws

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 August 20th.
- MRMC Emergency Department reports 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 1 HAI, and 0 MDRO for the month of July, 2025.

Client Service

- Total Patient Days for July, 2025 were 272.. This represents an average daily census of 8.8.
- July, 2025 COVID-19 statistics at MRMC: Swabs (0 PCR & 6 Antigen) with 0 positive.

Preserve Rural Jobs and Culture Development

- One-PM House Supervisor RN
- One CNA position filled!
- 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. N/A
- Education/In Services
 - a. Education pending for preventing non-ventilator associated pneumonia..
- Updates: Employees are offered flu shots through the influenza vaccine program. Influenza vaccinations and declinations completed for MRMC employees. 1 N95 Fit Test; EHN to begin annual Fit test in June and July 2025.

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 to be replaced, pending official start date.
ICRA for June 2024 completed.
- b. Linen Services – New linen company CLEAN to deliver new linen order June 24th, 2025.

No Report for the month of August, 2025

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.

- b. ER Provider office flooring needing replaced. Tile is onsite.- remodel is postponed.
- c. Stained ceiling tile throughout facility from leaking roof
- d. Damaged wall and ceiling in X-Ray due to leaking roof
- e. Damaged ceiling in OR2 due to leaking roof.
- f. Stained Ceiling tile in x-ray control room and office area due to leaking roof.
- g. New Hope Roof – Leak in Physical Therapy office after hail storm
- h. New Hope Window - - Window in south end of lobby broken from hail storm.
- i. Ceiling tile in Clinic stained due to leaking roof. Replaced some 6-10-2025.

i.i.i. New Business

- a. None

Written report remains in the minutes. .

e. Laboratory

- i. Tissue Report – No report for the month of July, 2025.
 - i.i. Transfusion Report – Approved
- Written report remains in minutes.

f. Radiology

- i. There was a total of – 231 X-Rays/CT/US
- i.i. Nothing up for approval
- i.i.i. Updates:
 - o No new updates.

Written report remains in minutes.

g. Pharmacy

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

The next P&T Committee Meeting will be held in September 18, 2025
- i.i.i. Lorazepam injectable is on national backorder and is unavailable to order. Will ask the providers to save lorazepam for seizure treatment only. Please use oral lorazepam or diazepam injectable for anxiety/agitation.

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 – 1
 - Fall with no injury – 1 – In Pt.
 - Fall with minor injury – 0 – ER Pt.
 - Fall with major injury – 0
 - Death – 0
 - AMA/LWBS – 1 ER AMA – 1 – SWB AMA
- Quality – Minutes are in the minutes of Medical Staff Meeting.
- HIM – ED discharge instructions - Compliance
 - 95% - D/C Note Compliance
 - 100% - Progress Notes
 - 99% - ED DC Instructions
 - 97% - ED Provider Dx
- Med event – 0
- After hours access was – 51

Written report remains in the minutes.

k. Utilization Review

- i. Total Patient days for June: 212
 - i.i. Total Medicare days for June: 134
 - i.i.i. Total Medicaid days for June: 0
 - iv. Total Swing Bed days for June: 177
 - v. Total Medicare SB days for June: 116
- Written reports remain in the Minutes.

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

6. New Business

- a. Review & Consideration of Approval of Sign: MRMC – Neutropenic Precautions Sign - English
 - i.Motion:** made by John Chiaffitelli, DO, Medical Director, to approve the MRMC: Neutropenic Precautions Sign – English.
- b. Review & Consideration of Approval of Sign: MRMC – Neutropenic Precautions Sign Spanish
 - i.Motion:** made by John Chiaffitelli, DO, Medical Director, to approve the MRMC – Neutropenic Precautions Sign – Spanish.
- c. Review & Consideration of Approval of Policy & Procedure: MRMC - Transmission Based Precautions: Preventing Transmission of Infectious Agents Policy
 - i.Motion:** made by John Chiaffitelli, DO, Medical Director, to approve the MRMC – Transmission-Based Precautions: Preventing Transmission of Infectious Agents Policy.
- d. Review & Consideration of Approval of Protocol: MRMC – Chest Pain/Acute Coronary

Syndrome (ACS) /STEMI/NSTEMI Protocol

- i.Motion:** made by John Chiaffitelli, DO, Medical Director, to approve the MRMC: Chest Pain/Acute Coronary Syndrome (ACS) /STEMI/NSTEMI Protocol
- e. Review & Consideration of Approval of Policy & Procedure: MRMC - Management of Acute Chest Pain and Acute Coronary Syndrome (ACS) Policy
i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve the MRMC: Management of Acute Chest Pain and Acute Coronary Syndrome (ACS) Policy.
- f. Review & Consideration of Approval of Policy & Procedure: MRMC: Management of ST-Elevation Myocardial Infarction (STEMI), Non-ST Elevation Myocardial Infarction (NSTEMI) and Unstable Angina (UA) Acute Coronary Syndrome (ACS) Policy
i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve the MRMC: Management of ST-Elevation Myocardial Infarction (STEMI), Non-ST Elevation Myocardial Infarction (NSTEMI) and Unstable Angina (UA) Acute Coronary Syndrome (ACS) Policy..
- g. Review & Consideration of Approval of Policy & Procedure: MRMC – Fibrinolytic Indications and Contraindications Checklist & TNKase/Activase Dosing Instructions
i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve the MRMC - Fibrinolytic Indications and Contraindications Checklist & TNKase/Activase Dosing Instructions.
- h. Review & Consideration of Approval of Policy & Procedure: MRMC – Fibrinolytic Therapy Dosing
i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve the MRMC - Fibrinolytic Therapy Dosing.
- i. Review & Consideration of Approval of Policy & Procedure: MRMC – ECG Screening Criteria
i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve the MRMC - ECG Screening Criteria.
- j. Review & Consideration of Approval of Policy & Procedure: MRMC – Chest Pain Assessment Tool
i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve the MRMC - Chest Pain Assessment Tool.
- k. Review & Consideration of Approval of Policy & Procedure: MRMC – Heart Score Evaluation Tool
i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve the MRMC: Heart Score Evaluation Tool.
- l. Review & Consideration of Approval of Policy & Procedure: MRMC – Cardiac Chest Pain/ACS/NSTEMI Outcome Review Tool
i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve the MRMC – Cardiac Chest Pain/ACS/NSTEMI Outcome Review Tool.

7. Adjourn

- a. Dr Chiaffitelli made a motion to adjourn the meeting at 1:30 pm.

Medical Director/Chief of Staff

Date

Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
Agenda for Aug 2025 and Meeting Minutes for Aug 2025

Other		
Other		
Other		

Meeting Location: OR	Reporting Period: July 2025	
Chairperson: Dr Gilmore	Meeting Date: 08/14/2025	Meeting Time: 14:00
Medical Representative: Dr Gilmore	Actual Start Time: 1402	Actual Finish Time: 1457
Hospital Administrator/CEO: Kelley Martinez	Next Meeting Date/Time: tentatively 09/11/2025 @ 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 1402	Approval: First – Jessica, Second– Chasity
II. COMMITTEE MEETING REPORTS & APPROVAL OF MINUTES				

Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
Agenda for Aug 2025 and Meeting Minutes for Aug 2025

Agenda Item	Presenter	Time Allotted	Discussion/Conclusions	Decision/Action Items
A. Quality and Patient Safety Committee 1. <i>Approval of Meeting Minutes</i>	Denise Jackson	2 min	Meeting minutes – July 2025	Approval: First – Chasity, Second – D. Clinesmith
B. Environment of Care (EOC) Committee 1. <i>Approval of Meeting Minutes</i>	Mark Chapman	2 min	Meeting minutes – July 2025	Approval: First – Kelley, Second – Nick
C. Infection Control Committee 1. <i>Approval of Meeting Minutes</i>	Meghan Smith	2 min	Meeting minutes – None	Director out – will defer until next month
D. Pharmacy & Therapeutics (P&T) Committee 1. <i>Approval of Meeting Minutes</i>	Chelsea Church/ Lynda James	2 min	Meeting minutes – None Next P&T – Sept 2025	
E. Health Information Management (HIM)/Credentialing Committee 1. <i>Approval of Meeting Minutes</i>	Jessica Pineda/ Kaye Hamilton	2 min	Meeting Minutes – July 2025	Approval: First – Chasity, Second – Kelley
D. Utilization Review (UR) Committee 1. <i>Approval of Meeting Minutes</i>	Chasity Howell	2 min	Meeting Minutes – July 2025	Approval: First – Pam, Second – D. Clinesmith
III. DEPARTMENT REPORTS				
Agenda Item	Presenter	Time Allotted	Discussion/Conclusions	Decision/Action Items
A. Nursing/Emergency Department	Nick Walker	5 min	Blood utilization – 3 units/2 episodes Code Blue – 0	HS continues to monitor PRN pain medication reassessments to ensure completion for inpatients Nurse meeting scheduled for 08/20/25
B. Radiology	Pam Esparza	2 min	No critical reports No CT reactions for the month Dosimeter – 5/0	3 repeats – 2 clipped imaged, 1 AEC not working so image was grainy. All repeated with no further issues
C. Laboratory	Tonya Bowan	8 min	88 – repeated labs	Pm done on Chemistry analyzer 7/8/25, Blood bank graph was not changed, tech was coached on proper procedure. Blood bank education to lab 08/04/25, Chemistry rerun education 7/21/25 and 08/01/25

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D. Respiratory Care	Heather Larson	2 min	Director out – will defer until next month	
E. Therapy	Chrissy Smith	2 min	Total # of Sessions Preformed 134 -PT 101 -OT 19 -ST Improved Standard Assessment Scores: 3 - PT 3 - OT 1 -ST	
F. Materials Management	Waylon Wigington	2 min	3 back orders – central line kit, secondary set, spectrum wipes 0 late orders 1 Recalls - Gabapentin – pharmacy aware	
G. Business Office	Desarae Clinesmith	2 min	DL – 98% Cost Share – 79%	DL – ER pm shift not collecting DL
H. Human Resources	Leticia Sanchez	2 min	2 new hires in the reporting period 3 open positions	
I. Environmental Services	Mark Chapman	2 min	100% terminal room cleans	
J. Facility/Plant Operations	Mark Chapman	2 min	24 extinguishers checked 0 boiler checks – Boiler off 04/30/25 for the season 1 generator/transfer switch inspection 15 – filter checks	No noted issues with inspections/check for the reporting period

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			6 egress inspections	
K. Dietary	Treva Derr	2 min	Daily meal count – 100%	
L. Information Technology	Desirae Galmore	2 min	Incidents include – AT&T issues, restarting of the Spacelabs.	IT reports that SAFER guides and SRA will be completed by October 1st
M. Strong Minds	Brittany Nelms/Brittany Niles	2 min	Services began in July 2025 with 1 patient	So far program is starting off with one patient who is coming routinely

IV. OLD BUSINESS

V. NEW BUSINESS

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

VI. QUALITY ASSURANCE/PERFORMANCE IMPROVEMENT DASHBOARD REPORT

Agenda Item	Presenter	Time Allotted	Discussion/Conclusions	Decision/Action Items
A. Volume & Utilization	CM	5 min	AMA – 1 inpatient / 2 AMA 1.) Inpatient was admitted for primary DX. During the stay patient intermittently refused treatment. Pt refused medications and stated that they wanted to go home. Discussed the need for continued treatment, pt was willing to stay “awhile longer” but still refused medication. Later in the day patient decided they wanted to go home. R/B were discussed with patient as well as the need to follow up with PCP the next day. AMA signed.	ER staff could benefit from redirection education for patients with anxiety while in the ER as this could benefit the patient with completion of treatments with completion of treatments

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			1.) ER – 1 pt to the ER for c/o S Pt seen and evaluated by provider with orders for hand held nebulizers. As patient was receiving hand held nebulizer treatment, they began refusing treatment, offered hand held instead of mask for comfort however patient continued to refuse, stating that they could do “this at home” Discussed treatment with patient who remained addiment that they wanted to go home without further treatment in the ER. R/B discussed with patient, signed AMA. 2.) ER – 1 pt to the ER with multiple complaints. During the assessment, pt became upset requesting that they only have a specific nurse. Nurse and provider attempted to assist/comfort patient however this was not successful and treatments were not able to be completed. Pt decided they wanted to d/c home without further care. Spouse was supportive with pt decision to leave AMA. R/B were discussed, provider felt further treatment would have been beneficial however as patient was not noted to be a risk to themselves or others at time of ER visit they were able sign out AMA/leave. AMA was not signed.	
B. Case Management	CM	8 min	0 - re-admit 100% SDOH data	

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C. Risk Management	QM	10 min	Deaths - 1 Pt admitted for multiple dx and treatment. Pt overall prognosis upon admit, poor. First week IDT with discussion of palliative care with family due to patient current state. Family was in agreeance with palliative care, DNR on admit. Continued with comfort care and wound care as ordered. Patient declined as expected per dx progression. Patient expired while in patient, as death was expected. Complaints - 0 Grievances – 1 CEO spoke with patient who reports being very upset that the call light system was down during the night and patients were not notified of this. CEO was notified of event at 0700 the next day with IT working on it at 0730. QM reviewed inpatient charts from the night of said event, CEO spoke with all staff on shift for the evening with multiple notifications that call lights had been out for the shift with no notification via the EP system. Workplace Violence Events - 0 Falls - 1 without injury; In patient fell while transferring self from chair to the bed. No injuries noted,	Deaths - 1; expected Grievances – 1; CEO met with charge nurse and HR regarding event, all staff reminded of the EP notification and where phone numbers are located, handheld bells purchased and stored in familiar location in the event of call light failure in the future with staff education on the bells and storage location. Grievance letter mailed to patient. Falls - 1 without injury; Fall precautions post call - education on calling for assist with transfers, bed/chair alarm Other – 1.) Skin tear- tele box removed/repositioned, area cleaned and left open to air 2.) Line event – Pt required transfer to higher level of care for nephrostomy replacement 3.) Delay in treatment – chart to Med Director for review 4.– 7.) Near Misses – All nursing staff involved noted, incident reports written. QM paired incident reports, psych tool findings and education for CNO to meet with each
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Mangum Regional Medical Center
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			assisted back to bed. Fall precautions in place prior to fall; low bed, call light in reach, clutter free room Other – 1.) Skin tear- Nurse reports skin tear to patient right side, reports that it was noted patient was laying on tele box and this resulted in skin tear to patient side 2.) Line event – Patient was in the shower when aide reported to charge nurse that nephrostomy tube was laying on the ground. 3.) Delay in treatment – Pt was seen in the ER. Provider ordered EKG, troponin while in the ER, troponin elevated and not rechecked while in the ER (recommended time -frame) no follow up ABG ordered as well, troponin was scheduled for the next day. Per nursing, er provider did not want to recheck the troponin but no documentation to support this. No mention of ekg or vitals in the H&P. Pt required bipap prior to transfer. 4.– 7.) Near Misses – 4 EOD charts where documentation was not	nurse 1:1 for education on proper documentation and psych policy review 8 - 12.) Lack of documentation – All findings noted and incident report written for each incident. Report/findings and education on documentation requirements for transfers given to CNO for 1:1 education with each nurse At time of this meeting; items 4-12 were still with CNO for completion
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Mangum Regional Medical Center
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			completed per policy. Missing data includes; Environmental safety sheets, observation sheets, line of site/one on one documentation and accurate triage level documented on admit to the ER 8 - 12.) Lack of documentation – 5 transfer charts lacked completed documentation that was sent to the receiving facility per the transfer chart to include; nurse notes, EOD documentation, provider note.	
D. Nursing	CCO	2 min	1 inpatient transfer - Patient transferred for nephrology tube replacement after it came out during the shower	
E. Emergency Department	CCO/QM	5 min	1.) ER log compliance – 98% 2.) EDTC Data – 67% 9 transfer charts had incomplete data	1.) QM continues to notify CNO and Nurse in real time of missing data 2.) CNO aware and given packets of incident reports and education for each nurse, CNO to met with each nurse for 1:1 education
F. Pharmacy & Therapeutics (P&T)	Pharmacy	2 min	Next P&T – Sept 2025 Afterhours access - 67 ADR - 1	ADR - 1 L of NS fluid bolus was given, along with flumazenil 0.4mg IVP. The patient was monitored closely and returned to baseline.

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			A patient received a 10mg IV dose of diazepam pushed over 1 minute. Patient became lethargic, hypotensive, and unresponsive, requiring a sternal rub. Med errors – 1 1) The patient was ordered to receive 2- Lyrica 50 mg capsules and received an extra 50 mg dose, causing the patient to receive 150 mg total, instead of the ordered 100 mg. Dose omissions – 0	Med errors - The nurse scanned the medication correctly but per the nurse, did not notice an extra scan when administering the medication. Nurse advised to slow down, ensure your medication scans are correct before administering to the patient.
G. Respiratory Care	RT	2 min	0 unplanned decannulation 100% resp assessments 100% on Chart checks	
H. Wound Care	WC	2 min	No wound development for the month	
I. Radiology	RAD	2 min	No issues in dept – ceiling doing better sine roof repair	
J. Laboratory	LAB	5 min	0 – Blood culture contaminates	
K. Infection Control/Employee Health	IC/EH	5 min	0 – Inpt HAIs 0 – MRDO 0 – VAE 0 – Cdiff 0 – CAUTI 0 - CLASBI	
L. Health Information Management (HIM)	HIM	2 min	100% - D/C Note Compliance 95% - Progress Notes; 1 incomplete note, provider has been notified	

Mangum Regional Medical Center
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			99% - ED DC Instructions; 1 note not signed by Nursing 97% - ED provider Dx; 1 note not completed, provider notified	
M. Dietary	Dietary	2 min	100%	
N. Therapy	Therapy	2 min	Gait belt usage – 100%	
O. Human Resources (HR)	HR	2 min	2 new hires for the reporting period	
P. Business Office	BOM	2 min	Cost shares – 79% 1.) 1 refusal to pay/sign agreement 2.) 3 transfer out prior to pay/agreement signature 3.) 1 pt was not corporative with BO staff 4.) % not able to make contact due to not updated contact patient by ER staff CNO aware of continued issues with information not being collected during non-business office hours Med Necessity Verification – 100%	
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	Fire extinguisher Inspections -100% Egress checks – 100%	

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Agenda for Aug 2025 and Meeting Minutes for Aug 2025

T. Emergency Preparedness	EP	2 min	2- new hires for the month all educated on EP plan	
U. Information Technology	IT	2 min	45 - IT events for the month	
V. Outpatient Services	Therapy	2 min	Temp logs – 100%	
W. Strong Minds	N/A	N/A		
VII. POLICIES & PROCEDURES				
Agenda Item	Presenter	Time Allotted	Discussion/Conclusions	Decision/Action Items
A. Review and <i>Approve</i>	QM	10 min	1.) Neutropenic Precautions Sign – English 2.) Neutropenic Precautions Sign – Spanish 3.) Transmission-Based Precautions: Preventing Transmission of Infectious Agents Policy 4.) Chest Pain/Acute Coronary Syndrome (ACS)/STEMI/NSTEMI Protocol 5.) Management of Acute Chest Pain and Acute Coronary Syndrome (ACS) Policy 6.) Management of ST-Elevation Myocardial Infarction (STEMI), Non-ST Elevation Myocardial Infarction (NSTEMI) and Unstable Angina (UA) Acute Coronary Syndrome (ACS) Policy	1.) Approval: First – Kelley, Second – Chasity 2.) Approval: First – Pam, Second – Leticia 3.) Approval: First – Kelley, Second – Nick 4.) Approval: First – Kelley, Second – Chaisty 5.) Approval: First – Kelley, Second – Nick 6.) Approval: First – Kelley, Second – Chasity 7.) NOT APPROVED 8.) Approval: First – Kelley, Second – Chasity 9.) Approval: First – Kelley, Second – Chasity 10.) Approval: First – Kelley, Second – Chasity

Mangum Regional Medical Center
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			7.) ACLS Acute Coronary Syndromes Algorithm 8.) Fibrinolytic Indications and Contraindications Checklist & TNKase/Activase Dosing Instructions 9.) Fibrinolytic Therapy Dosing 10.) ECG Screening Criteria 11.) Chest Pain Assessment Tool 12.) Heart Score Evaluation Tool 13.) Cardiac Chest Pain/ACS/NSTEMI Outcome Review Tool	11.) Approval: First – Kelley, Second – Chasity 12.) Approval: First – Kelley, Second – Chasity 13.) Approval: First – Kelley, Second – Chasity
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 1457 by Jessica seconded by Dr G.	

Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
Agenda for Aug 2025 and Meeting Minutes for Aug 2025

MEMBERS & INVITED GUESTS				
Voting MEMBERS				
Kelley Martinez	Nick Walker	Treva Derr	Chasity Howell	Jessica Pindea
D. Clinesmith	Pam Esparza	Tonya Bowen	Leticia Sanchez	Brittney Niles
Dr Gilmore (teams)	Kaye Hamilton (teams)	D. Galmor (teams)	Waylon Wigington (teams)	Chelsea Church (teams)
Non-Voting MEMBERS				
Denise Jackson	☐	☐	☐	☐



Chief Clinical Officer Report August 2025

Patient Care

- MRMC Education included:
 1. Nursing documentation updates are communicated to nursing staff weekly.
 2. Nurse meeting held on August 20th.
- MRMC Emergency Department reports that there are 0 patients Left Without Being Seen (LWBS).
- MRMC Laboratory reports 2 contaminated blood culture set(s).
- MRMC Infection Prevention reports 0 CAUTI.
- MRMC Infection Prevention report 0 CLABSI.
- MRMC Infection Prevention reports 0 HAI and 0 MDRO for the month of August 2025.

Client Service

- Total Patient Days for August 2025 were 419. This represents an average daily census of 13.5.
- August 2025 COVID-19 statistics at MRMC: Swabs (0 PCR & 15 Antigen) with 0 Positive.

Mangum Regional Medical Center												
Monthly Census Comparison												
	Jan	Feb	Mar	April	May	June	July	Aug	Sept	Oct	Nov	Dec
Inpatient acute	22	13	16	21	12	11	16	17				
Swing Bed	20	11	9	18	10	7	16	14				
Observation	1	2	1	2	3	2	3	7				
Emergency Room	146	142	134	148	135	140	169	149				
Lab Completed	2343	2069	1988	2345	2156	1745	2159	2298				
Rad Completed	178	174	170	236	198	192	231	207				
Ventilator Days	0	0	0	0	0	0	0	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 August 2025

Operations Overview

- Roof completion is still on track for the first of September.
- Room remodeling is continuing.
- Looking at clinic collections for August, we collected a total of \$696.66 up from \$349.22 at time of service.
- Hospital upfront collections were at \$709.43 for the month of August.
- We continue to work on our outreach and marketing for all our programs such as Strong Minds within our community and surrounding areas.
- Patient rounds continue to provide positive feedback on patient care.
- We continue to get feedback on how we can improve our facility to promote staff satisfaction.
- We also continue to get positive feedback from patients regarding the thank you cards we send out to patients, thanking them for choosing to be a patient at Mangum Regional Medical Center.
- We have recently hired a new HR representative and business office representative. These were positions both needed to be filled due to being vacant.

Mangum Board Meeting Financial Reports

August 31, 2025

	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
August 31, 2025

	Current Month	Aug-25 Year-to-Date	Mthly Avg Prior Year	Variance
ADC (Average Daily Census)	13.52	9.76	10.13	3.39
Payer Mix % (Acute):				
MCR	29.03%	52.72%	53.01%	-23.97%
MCR Mgd Care	20.97%	23.76%	24.05%	-3.08%
All Others	50.00%	23.51%	22.94%	27.06%
Total	100.00%	100.00%	100.00%	0.00%
Payer Mix % (SWB):				
MCR	77.03%	75.76%	87.67%	-10.64%
MCR Mgd Care	22.97%	24.24%	11.35%	11.62%
All Others	0.00%	0.00%	0.98%	-0.98%
Total	100.00%	100.00%	100.00%	0.00%
Operating margin	41,259	(73,512)	(673,482)	
Operating Margin (monthly average)	41,259	(9,189)	(56,124)	46,934
NPR (Net Patient Revenue)	1,606,401	11,533,059	16,708,837	
NPR (monthly average)	1,606,401	1,441,632	1,392,403	49,229
Operating Expenses	1,581,571	11,800,057	17,611,634	
Operating Expense (monthly average)	1,581,571	1,475,007	1,467,636	7,371
NPR % of Oper Exp	101.6%	97.7%	94.9%	
Patient Days	419	2,372	309	110
Oper Exp / PPD	\$ 3,775	\$ 4,975	\$ 4,752	\$ 223
# of Months	1	8	12	
Cash Receipts (rnd)	1,271,486	11,540,025	15,058,468	
Cash Receipts (monthly average)	1,271,486	1,442,503	1,254,872	187,631
Cash as a % of NPR (s/b 100% min)	79.2%	100.1%	90.1%	
Days Cash-On-Hand (Net of MCR Pay / Restrictions):				
Calendar Days	31	243	366	
Operating Exp / Day	\$ 51,018	\$ 48,560	\$ 48,119	\$ 2,899
Cash - (unrestricted)	1,189,862	1,189,862	418,015	771,846
Days Cash-On-Hand	23.3	24.5	8.7	
Days Cash-On-Hand: Minimum during month	14.0	14.0	4.6	9.4
MCR Rec (Pay) - "as stated - but to be adjusted"	705,964	705,964	176,300	529,664
AP & Accrued Liab	17,699,551	17,699,551	16,520,455	1,179,096
Accounts Receivable (at net)	1,931,061	1,931,061	1,316,379	614,682
Per AP aging schedule (incl. accruals)	Aug-25	Aug-25	Prior FYE	Net Change
Account Payable - Cohesive	15,367,313	15,367,313	14,328,203	1,039,110
Account Payable - Other	1,439,515	1,439,515	1,299,528	139,986
Total	16,806,827	16,806,827	15,627,731	1,179,096
Cohesive Loan	4,652,514	4,652,514	4,900,648	(248,134)

Mangum Regional Medical Center
Cash Receipts - Cash Disbursements Summary

8/31/25

	Current Month	COVID	Total Less COVID
Cash Receipts	\$ 1,271,486	\$ -	\$ 1,271,486
Cash Disbursements	\$ 2,373,927	\$ -	\$ 2,373,927
NET	\$ (1,102,441)	\$ -	\$ (1,102,441)

	Year-To-Date	COVID	Year-To-Date Less COVID
Cash Receipts	\$ 11,540,025	\$ -	\$ 11,540,025
Cash Disbursements	\$ 10,773,141	\$ -	\$ 10,773,141
NET	\$ 766,884	\$ -	\$ 766,884

	Prior Month	COVID	Total Less COVID
Cash Receipts	\$ 2,452,132	\$ -	\$ 2,452,132
Cash Disbursements	\$ 1,209,562	\$ -	\$ 1,209,562
NET	\$ 1,242,570	\$ -	\$ 1,242,570

	Prior Month YTD	COVID	Prior Month YTD Less COVID
Cash Receipts	\$ 10,268,539	\$ -	\$ 10,268,539
Cash Disbursements	\$ 8,399,214	\$ -	\$ 8,399,214
NET	\$ 1,869,324	\$ -	\$ 1,869,324



**Board of Directors
Mangum Regional Medical Center**

September 23, 2025

August 2025 Financial Statement Overview

- Statistics
 - The average daily census (ADC) for August 2025 was **13.52**– (PY fiscal year end of **10.12**).
 - Year-To-Date Acute payer mix was approximately **86%** MCR/MCR Managed Care combined.
 - Year-To-Date Swing Bed payer mix was **76%** MCR & **24%** MCR Managed Care. For the prior year end those percentages were **88% & 11%**, respectively.
- Balance Sheet Highlights
 - The cash balance as of August 31, 2025, inclusive of both operating & reserves, was **\$1.19M**. This decreased **\$1.1M** from July 31, 2025.
 - Days cash on hand, inclusive of reserves, was **23.3** based on August expenses.
 - Net AR increased by **\$469K** from July.
 - Payments of approximately **\$2.37M** were made on AP (prior 3-month avg was **\$1.28M**).
 - Cash receipts were **\$1.18K** less than in the previous month (**\$2.45M vs \$1.27M**).
 - The Medicare principal balance was completely paid off in the month of August 2024.



- Income Statement Highlights
 - Net patient revenue for August 2025 was **\$1.61M**, which is approximately an increase of **\$175K** from the prior month.
 - Operating expenses, exclusive of interest & depreciation, were **\$1.58M**.
 - 340B revenue was **\$14K** in August, this is a decrease of **\$8K** from the prior month.

- Clinic (RHC) Income Statement Highlights - actual & projected (includes swing bed rounding):
 - Current month's average visits per day = **9.91**
 - YTD Operating revenues = **\$368K**
 - YTD Operating expenses = **\$701K**
 - YTD Operating loss = **-\$333K**

MANGUM REGIONAL MEDICAL CENTER

Admissions, Discharges & Days of Care

Fiscal Year 2025

Item 9.

12/31/2025

	January	February	March	April	May	June	July	August	YTD
Admissions									
Inpatient	22	13	16	21	12	11	16	17	128
Swingbed	20	11	9	18	10	7	16	14	105
Observation	1	2	1	3	2	2	3	5	19
	43	26	26	42	24	20	35	36	252
Discharges									
Inpatient	23	13	15	22	13	9	17	13	125
Swingbed	19	12	9	13	15	10	6	16	100
Observation	2	2	1	3	2	2	3	5	20
	44	27	25	38	30	21	26	34	245
Days of Care									
Inpatient-Medicare	54	27	25	25	13	18	33	18	213
Inpatient-Medicare Managed Care	11	4	7	27	9	8	17	13	96
Inpatient-Other	12	12	8	10	9	9	4	31	95
Swingbed-Medicare	236	191	157	164	159	112	197	275	1,491
Swingbed-Medicare Managed Care	20	59	14	85	138	58	21	82	477
Swingbed-Other	0	0	0	0	0	0	0	0	0
Observation	4	7	2	4	4	6	6	7	40
	337	300	213	315	332	211	278	426	2,412
Calendar days	31	28	31	30	31	30	31	31	243
ADC - (incl OBS)	10.87	10.71	6.87	10.50	10.71	7.03	8.97	13.74	9.93
ADC	10.74	10.46	6.81	10.37	10.58	6.83	8.77	13.52	9.76
ER	146	142	134	148	135	140	169	149	1,163
Outpatient	108	146	140	154	150	126	151	153	1,128
RHC	197	187	188	243	229	201	197	253	1,695

MANGUM REGIONAL MEDICAL CENTER

Comparative Balance Sheet - Unaudited

Fiscal Year 2025

Item 9.

	January	February	March	April	May	June	July	August	12/31/24	YTD Variance
Cash And Cash Equivalents	521,074	481,402	519,779	682,095	1,120,535	1,044,262	2,291,727	1,189,862	418,015	771,846
Patient Accounts Receivable, Net	1,820,581	1,879,646	1,633,200	1,745,633	1,863,436	1,462,513	1,437,669	1,931,061	1,316,379	614,682
Due From Medicare	1,317,110	1,378,146	1,578,007	1,643,160	1,764,926	1,979,459	909,623	705,645	1,317,110	(611,465)
Inventory	207,642	192,025	230,062	222,929	231,085	231,146	232,065	232,917	222,062	10,856
Prepays And Other Assets	1,641,776	1,625,020	1,627,535	1,633,615	1,626,547	1,634,364	1,738,858	1,724,058	1,642,491	81,567
Capital Assets, Net	1,488,310	1,460,407	1,430,979	1,403,182	1,375,384	1,348,587	1,338,168	1,518,293	1,516,213	2,081
Total Assets	6,996,493	7,016,647	7,019,562	7,330,613	7,981,913	7,700,330	7,948,111	7,301,836	6,432,269	869,567
Accounts Payable	16,097,892	16,261,884	16,459,679	16,792,515	17,284,593	17,166,550	17,448,563	16,806,827	15,627,731	1,179,096
AHSO Related AP	892,724	892,724	892,724	892,724	892,724	892,724	892,724	892,724	892,724	-
Deferred Revenue	154,761	114,589	-	170,667	85,334	-	30,994	15,497	0	15,497
Due To Medicare	(319)	(319)	(319)	(319)	(319)	(319)	(319)	(319)	(319)	-
Covid Grant Funds	-	-	-	-	-	-	-	-	0	-
Due To Cohesive - PPP Loans	-	-	-	-	-	-	-	-	0	-
Notes Payable - Cohesive	4,869,631	4,838,614	4,807,598	4,776,581	4,745,564	4,714,547	4,683,531	4,652,514	4,900,648	(248,134)
Notes Payable - Other	17,948	17,948	17,948	17,948	17,948	17,948	17,948	17,948	17,948	-
Alliantz Line Of Credit	-	-	-	-	-	-	-	-	0	-
Leases Payable	257,371	256,837	256,300	255,759	255,214	254,666	254,114	254,830	258,209	(3,379)
Total Liabilities	22,290,008	22,382,278	22,433,929	22,905,874	23,281,058	23,046,117	23,327,555	22,640,021	21,696,942	943,079
Net Assets	(15,293,515)	(15,365,631)	(15,414,367)	(15,575,261)	(15,299,144)	(15,345,786)	(15,379,444)	(15,338,141)	(15,264,672)	(73,469)
Total Liabilities and Net Assets	6,996,493	7,016,647	7,019,562	7,330,613	7,981,913	7,700,330	7,948,111	7,301,880	6,432,269	869,610

Mangum Regional Medical Center
Cash Receipts & Disbursements by Month

2023			2024			2025		
Month	Receipts	Disbursements	Month	Receipts	Disbursements	Month	Receipts	Disbursements
Jan-23	1,290,109	1,664,281	Jan-24	1,187,504	1,150,522	Jan-25	1,105,099	996,372
Feb-23	1,506,708	1,809,690	Feb-24	708,816	995,157	Feb-25	1,184,447	1,231,249
Mar-23	1,915,435	1,109,683	Mar-24	1,236,158	1,073,824	Mar-25	1,289,275	1,250,266
Apr-23	2,005,665	1,365,533	Apr-24	1,645,373	1,483,022	Apr-25	1,225,184	1,060,130
May-23	1,436,542	2,237,818	May-24	1,273,007	1,062,762	May-25	1,481,774	1,044,123
Jun-23	1,777,525	1,506,459	Jun-24	950,928	1,216,556	Jun-25	1,530,626	1,607,511
Jul-23	1,140,141	1,508,702	Jul-24	1,344,607	1,562,407	Jul-25	2,452,132	1,209,562
Aug-23	1,600,786	1,352,905	Aug-24	2,089,281	2,176,381	Aug-25	1,271,486	2,373,927
Sep-23	1,490,569	1,295,680	Sep-24	1,183,508	1,322,228	Sep-25		
Oct-23	1,211,980	1,345,813	Oct-24	1,779,690	1,154,658	Oct-25		
Nov-23	985,475	1,355,224	Nov-24	770,820	1,370,620	Nov-25		
Dec-23	929,990	1,191,570	Dec-24	888,776	1,027,058	Dec-25		
	<u>17,290,925</u>	<u>17,743,359</u>		<u>15,058,468</u>			<u>11,540,025</u>	
Subtotal FY 2023	<u><u>17,290,925</u></u>		Subtotal FY 2024	<u><u>15,058,468</u></u>		Subtotal FY 2025	<u><u>11,540,025</u></u>	

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

	Original Balance	Balance as of 08/31/25	Total Interest Paid as of 08/31/25
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) Audit est.	(34,322.00)	-	-
2019 MCR pay (rec) Audit est.	(40,612.00)	-	-
2020 MCR pay (rec) Audit	(74,956.00)	-	-
<i>FY23 (8-month IRR) L4315598</i>	95,225.46	-	7,038.71
<i>FY23 (8-month IRR) L4315599</i>	1,918,398.00	-	155,799.09
<i>FY23 MCR pay (rec) remaining estimate</i>	-	-	-
<i>FY24 MCR pay (rec) estimate</i>	-	(176,300.00)	
<i>FY25 MCR pay (rec) estimate</i>	-	(529,345.00)	
Total	7,009,696.31	(705,963.61)	1,355,350.56

Mangum Regional Medical Center
Statement of Revenue and Expense
For The Month and Year To Date Ended August 31, 2025
Unaudited

Item 9.

MTD					YTD			
Actual	Budget	Variance	% Change		Actual	Budget	Variance	% Change
381,902	297,703	84,199	28%	Inpatient revenue	2,623,466	2,053,543	569,923	28%
1,539,770	1,308,462	231,308	18%	Swing Bed revenue	9,039,723	8,950,636	89,087	1%
778,421	680,554	97,868	14%	Outpatient revenue	5,424,622	4,672,280	752,342	16%
169,608	215,806	(46,199)	-21%	Professional revenue	1,429,673	1,477,532	(47,859)	-3%
<u>2,869,700</u>	<u>2,502,525</u>	<u>367,176</u>	<u>15%</u>	Total patient revenue	<u>18,517,484</u>	<u>17,153,991</u>	<u>1,363,494</u>	<u>8%</u>
1,131,187	1,139,533	(8,346)	-1%	Contractual adjustments	7,783,284	7,654,628	128,656	2%
121,523	-	121,523	#DIV/0!	Contractual adjustments: MCR Settlement	(611,800)	-	(611,800)	#DIV/0!
(72,275)	(107,231)	34,956	-33%	SHOPP revenue	(748,028)	(750,618)	2,591	0%
82,864	(102,057)	184,921	-181%	Bad debts	560,970	(714,396)	1,275,366	-179%
<u>1,263,299</u>	<u>1,144,707</u>	<u>333,055</u>	<u>29%</u>	Total deductions from revenue	<u>6,984,426</u>	<u>7,690,850</u>	<u>794,812</u>	<u>10%</u>
1,606,401	1,357,818	248,584	18%	Net patient revenue	11,533,059	9,463,141	2,069,918	22%
2,701	1,913	789	41%	Other operating revenue	38,835	13,389	25,446	190%
13,727	20,146	(6,419)	-32%	340B REVENUES	154,651	140,477	14,174	10%
<u>1,622,829</u>	<u>1,379,876</u>	<u>242,953</u>	<u>18%</u>	Total operating revenue	<u>11,726,545</u>	<u>9,617,008</u>	<u>2,109,537</u>	<u>22%</u>
				Expenses				
467,610	393,895	73,715	19%	Salaries and benefits	3,420,001	2,727,672	692,329	25%
112,111	74,095	38,016	51%	Professional Fees	638,226	514,843	123,383	24%
460,760	438,435	22,326	5%	Contract labor	3,396,769	3,062,954	333,815	11%
114,954	127,899	(12,945)	-10%	Purchased/Contract services	969,656	895,293	74,363	8%
225,000	225,000	-	0%	Management expense	1,800,000	1,575,000	225,000	14%
87,145	90,754	(3,608)	-4%	Supplies expense	681,262	625,533	55,730	9%
13,783	19,250	(5,467)	-28%	Rental expense	132,600	134,750	(2,150)	-2%
17,551	14,275	3,275	23%	Utilities	108,530	99,928	8,602	9%
1,414	918	496	54%	Travel & Meals	6,659	6,428	230	4%
15,897	11,219	4,678	42%	Repairs and Maintenance	102,265	78,533	23,732	30%
17,202	14,251	2,951	21%	Insurance expense	122,637	99,757	22,880	23%
10,669	11,796	(1,126)	-10%	Other Expense	91,508	82,570	8,938	11%
9,932	15,453	(5,521)	-36%	340B EXPENSES	104,854	107,754	(2,900)	-3%
<u>1,554,028</u>	<u>1,437,240</u>	<u>116,788</u>	<u>8%</u>	Total expense	<u>11,574,968</u>	<u>10,011,016</u>	<u>1,563,952</u>	<u>16%</u>
<u>68,802</u>	<u>(57,364)</u>	<u>126,166</u>	<u>-220%</u>	EBIDA	<u>151,577</u>	<u>(394,008)</u>	<u>545,584</u>	<u>-138%</u>
<u>4.2%</u>	<u>-4.2%</u>	<u>8.40%</u>		EBIDA as percent of net revenue	<u>1.3%</u>	<u>-4.1%</u>	<u>5.39%</u>	
116	-	116	#DIV/0!	Interest	1,030	-	1,030	#DIV/0!
27,427	26,559	868	3%	Depreciation	224,016	190,736	33,280	17%
<u>41,259</u>	<u>(83,923)</u>	<u>125,182</u>	<u>-149%</u>	Operating margin	<u>(73,469)</u>	<u>(584,743)</u>	<u>511,274</u>	<u>-87%</u>
-	-	-		Other	-	-	-	
-	-	-		Total other nonoperating income	-	-	-	
<u>41,259</u>	<u>(83,923)</u>	<u>125,182</u>	<u>-149%</u>	Excess (Deficiency) of Revenue Over Expenses	<u>(73,469)</u>	<u>(584,743)</u>	<u>511,274</u>	<u>-87%</u>
<u>2.54%</u>	<u>-6.08%</u>	<u>8.62%</u>		Operating Margin %	<u>-0.63%</u>	<u>-6.08%</u>	<u>5.45%</u>	

MANGUM REGIONAL MEDICAL CENTER

Statement of Revenue and Expense Trend - Unaudited

Fiscal Year 2025

Item 9.

	January	February	March	April	May	June	July	August	YTD
Inpatient revenue	525,995	250,434	351,806	383,704	182,461	177,026	370,138	381,902	2,623,466
Swing Bed revenue	1,203,067	1,237,078	722,978	1,261,902	1,321,036	745,121	1,008,771	1,539,770	9,039,723
Outpatient revenue	573,540	649,689	560,462	592,871	618,008	725,760	925,870	778,421	5,424,622
Professional revenue	206,082	179,651	147,487	193,268	145,315	172,089	216,173	169,608	1,429,673
Total patient revenue	2,508,685	2,316,852	1,782,733	2,431,745	2,266,820	1,819,997	2,520,952	2,869,700	18,517,484
Contractual adjustments	1,054,686	1,043,678	762,509	1,301,266	662,454	633,650	1,193,855	1,131,187	7,783,284
Contractual adjustments: MCR Settlement	-	(61,036)	(199,861)	(65,153)	(121,766)	(214,533)	(70,974)	121,523	(611,800)
SHOPP Revenue	(77,381)	(114,589)	(114,589)	(85,334)	(85,334)	(85,334)	(113,194)	(72,275)	(748,028)
Bad debts	106,576	113,834	(1,996)	73,791	29,918	75,657	80,325	82,864	560,970
Total deductions from revenue	1,083,881	981,887	446,064	1,224,570	485,272	409,441	1,090,012	1,263,299	6,984,426
Net patient revenue	1,424,804	1,334,965	1,336,670	1,207,175	1,781,548	1,410,556	1,430,940	1,606,401	11,533,059
Other operating revenue	15,410	(757)	4,171	2,632	17,751	2,173	(5,247)	2,701	38,835
340B REVENUES	23,868	18,212	22,824	15,161	23,471	15,315	22,073	13,727	154,651
Total operating revenue	1,464,083	1,352,420	1,363,664	1,224,968	1,822,770	1,428,044	1,447,767	1,622,829	11,726,545
	95.4%	93.7%	94.6%	87.1%	115.2%	95.7%	96.6%	101.6%	97.7%
Expenses									
Salaries and benefits	439,483	399,707	429,167	396,151	462,629	404,309	420,947	467,610	3,420,001
Professional Fees	65,648	65,452	70,812	77,625	88,531	73,881	84,210	112,111	638,270
Contract labor	428,978	404,116	416,774	403,022	420,060	416,853	446,206	460,760	3,396,769
Purchased/Contract services	107,620	108,704	127,775	101,833	150,387	132,591	125,792	114,954	969,656
Management expense	225,000	225,000	225,000	225,000	225,000	225,000	225,000	225,000	1,800,000
Supplies expense	98,866	101,239	65,720	74,156	72,166	106,426	75,544	87,145	681,262
Rental expense	17,598	13,094	21,026	15,207	19,248	15,677	16,968	13,783	132,600
Utilities	13,436	17,413	12,834	7,751	12,812	12,388	14,345	17,551	108,530
Travel & Meals	315	971	775	336	1,102	1,103	643	1,414	6,659
Repairs and Maintenance	11,240	10,981	12,906	14,947	11,645	14,123	10,526	15,897	102,265
Insurance expense	23,837	26,409	(12,321)	10,777	22,979	16,563	17,190	17,202	122,637
Other	18,752	11,003	(6,293)	20,999	16,959	10,823	8,596	10,669	91,508
340B EXPENSES	14,050	12,401	18,656	10,029	15,235	17,119	7,432	9,932	104,854
Total expense	1,464,823	1,396,491	1,382,831	1,357,832	1,518,751	1,446,856	1,453,399	1,554,028	11,575,012
EBIDA	\$ (740)	\$ (44,070)	\$ (19,167)	\$ (132,865)	\$ 304,018	\$ (18,812)	\$ (5,633)	\$ 68,802	\$ 151,533
EBIDA as percent of net revenue	-0.1%	-3.3%	-1.4%	-10.8%	16.7%	-1.3%	-0.4%	4.2%	1.3%
Interest	199	143	141	232	104	33	61	116	1,030
Depreciation	27,903	27,903	29,428	27,797	27,797	27,797	27,963	27,427	224,016
Operating margin	\$ (28,843)	\$ (72,116)	\$ (48,736)	\$ (160,894)	\$ 276,117	\$ (46,642)	\$ (33,657)	\$ 41,259	\$ (73,512)
Other	-	-	-	-	-	-	-	-	-
Total other nonoperating income	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Excess (Deficiency) of Revenue Over Expenses	(28,843)	(72,116)	(48,736)	(160,894)	276,117	(46,642)	(33,657)	41,259	(73,512)

Mangum Family Clinic
For the Month Ended and Year To Date August 31, 2025

	Current			Last FYE	Net Change
	Month	Year-To-Date	12-Month Projected		
Gross Patient Revenue	32,960	216,296	324,445	217,497	106,948
Less: Revenue deductions	27,456	151,471	227,207	118,420	108,787
Net Patient Revenue	60,416	367,768	551,652	335,917	215,735
Other Income (if any)	-	-	-	-	-
Operating revenue	60,416	367,768	551,652	335,917	215,735
Operating Expenses:					
Leased Salaries	35,692	270,362	405,542	177,825	227,717
Contract labor	(188)	6,000	9,000	8,191	809
Benefits	5,130	27,931	41,896	49,899	(8,003)
Provider Fees	5,427	45,407	68,110	41,078	27,032
Purchased/Contract services	4,239	37,380	56,071	70,882	(14,811)
Management expense	11,250	90,000	135,000	135,000	-
Supplies expense	50	4,419	6,629	11,788	(5,159)
Rental expense	1,750	14,331	21,497	23,700	(2,204)
Utilities	912	4,775	7,163	8,567	(1,404)
Travel & Meals	237	474	711	987	(276)
Repairs and Maintenance	280	761	1,141	1,239	(98)
Insurance expense	-	2,845	4,268	2,705	1,563
Other expense	600	3,122	4,682	6,469	(1,787)
CAH Overhead Allocation	24,154	193,231	289,847	250,979	38,868
Total Operating Expenses	89,533	701,037	1,051,555	789,309	262,246
Net Income (loss)	(29,117)	(333,269)	(499,903)	(453,392)	(46,511)

340B

Gross revenues	13,726.87	154,651	231,977	191,188	40,789
Operating expenses	9,932.22	104,854	157,281	149,534	7,747
Profit (loss)	3,795	49,797	74,696	41,654	33,042
Net Income (loss) with 340B	(25,322)	(283,472)	(425,208)	(411,738)	(13,469)

Stats

Onsite Visits	221	1523	2,285	1,768	517
Swing Bed Visits	32	172	258	76	182
Telehealth, CCM, Nurse Visits	0	0	-	20	(20)
Total Visits	253	1695	2543	1864	679

Payor Mix based on Total Visits

Medicare		31%	31%	28%	3%
Managed Medicare		5%	6%	4%	1%
Medicaid / Managed Medicaid		22%	22%	31%	-9%
Commercial/Other		41%	41%	37%	4%
Total		100%	100%	100%	0%

Clinic Days	22	171	257	257	-
Average Visit Per Day	12	10	10	7	3

Cost Per Visit	\$ 353.89	\$ 413.59	\$ 413.59	\$ 423.45	\$ (9.86)
Medicare Visit Cap		\$ 292.54	\$ 292.54	\$ 282.65	
Over (Under) Cap		\$ 121.05	\$ 121.05	\$ 140.80	

VENDOR NAME	DESCRIPTION	0-30 Days	31-60 Days	61-90 Days	OVER 90 Days	8/31/2025	7/31/2025	6/30/2025	5/31/2025
AMERISOURCE RECEIVABLES (ARFC)	Pharmacy Supplies	6,243.53	-	-	-	6,243.53	8,088.40	3,992.24	3,177.73
ANESTHESIA SERVICE INC	Patient Supplies	1,048.40	-	-	-	1,048.40	496.80	662.40	1,836.40
APEX MEDICAL GAS SYSTEMS, INC	Supplies	359.24	-	-	-	359.24	-	-	-
AT&T	Fax Service	3,270.35	-	-	-	3,270.35	3,255.25	-	2,897.70
BIO-RAD LABORATORIES INC	Lab Supplies	2,632.56	-	-	-	2,632.56	-	-	1,571.53
CARDINAL HEALTH 110, LLC	Patient Supplies	-	-	(144.30)	-	(144.30)	(144.30)	(144.30)	-
CAREFUSION	Rental Equipment	-	-	-	-	-	-	4,449.00	4,449.00
CITY OF ERICK	Patient Transportation Service	-	-	-	-	-	6,144.00	-	-
CITY OF MANGUM	Utilities	-	-	-	-	-	8,143.30	-	-
CLEAN THE UNIFORM HOLDING COMP	Linen Services	2,935.43	-	-	-	2,935.43	1,363.22	-	-
CLIA LABORATORY PROGRAM	Lab Services	248.00	-	-	-	248.00	-	-	-
CLINICAL PATHOLOGY LABS, INC	Lab Supplies	-	-	-	-	-	-	-	61.93
CNA	Insurance	-	-	-	-	-	-	-	933.09
COHESIVE HEALTHCARE MGMT	Mgmt Fees	226,755.00	6,566.66	230,554.16	2,903,456.61	3,367,332.43	3,177,066.68	2,994,255.38	3,360,782.59
COHESIVE HEALTHCARE RESOURCES	Payroll	-	-	-	-	-	1,776,746.77	2,001,745.92	2,184,521.67
COHESIVE STAFFING SOLUTIONS	Agency Staffing Service	397,283.07	799,265.39	902,399.48	9,901,032.22	11,999,980.16	11,506,162.81	10,784,169.28	10,523,198.53
CONTROL SOLUTIONS INC.	Patient Supplies	-	-	-	-	-	161.91	-	-
CORRY KENDALL, ATTORNEY AT LAW	Legal Fees	-	-	-	-	-	-	-	2,000.00
CRITICAL ALERT	Software license	-	-	-	(3,906.00)	(3,906.00)	(3,906.00)	(3,906.00)	(3,906.00)
CULLIGAN WATER CONDITIONING	Equipment Rental Agreement	-	-	-	-	-	-	(76.62)	(87.12)
DAN'S HEATING & AIR CONDITIONI	Repairs/maintenance	4,100.00	-	-	-	4,100.00	-	-	315.76
DIAGNOSTIC IMAGING ASSOCIATES	Radiology Purch Svs	2,150.00	-	-	-	2,150.00	2,150.00	2,150.00	-
DIRECTV	Cable service	291.40	-	-	-	291.40	-	-	291.40
DP MEDICAL SERVICES	Rental	-	-	-	-	-	-	-	202.00
DYNAMIC ACCESS	Vascular Consultant	795.68	-	-	-	795.68	1,723.97	1,545.00	2,832.50
EARTHSafe CHEMICAL ALTERNATIVE	Patient Supplies	-	-	-	-	-	105.00	-	-
FEDEX	Shipping	33.66	-	-	-	33.66	51.28	50.96	50.10
FFF ENTERPRISES INC	Pharmacy Supplies	654.23	-	-	-	654.23	-	-	-
FIRST DIGITAL COMMUNICATIONS	IT Support Services	-	-	-	-	-	-	-	1,006.35
FREEBORN DYSPHAGIA ASSOC LLC	Patient Services	550.00	-	-	-	550.00	-	-	-
FUCHA RADIO, LLC	Advertising	110.00	-	-	-	110.00	110.00	-	110.00
GEORGE BROS TERMITE & PEST CON	Pest Control Service	-	-	-	-	-	-	175.00	200.00
GLOBAL PAYMENTS INTEGRATED	IT Service	-	-	-	2,757.67	2,757.67	2,757.67	-	-
GRAINGER	Maintenance Supplies	-	-	-	-	-	816.84	-	123.80
GREER COUNTY CHAMBER OF	Advertising	-	-	-	-	-	-	300.00	-
HAC INC	Dietary Supplies	67.14	-	-	-	67.14	49.45	16.87	117.23
HENRY SCHEIN	Lab Supplies	-	-	-	-	-	1,809.35	-	1,307.35
HEWLETT-PACKARD FINANCIAL SERV	Computer Services	307.10	-	-	-	307.10	307.10	307.10	307.10
JANUS SUPPLY CO	Housekeeping Supplies, based in Altus	-	-	-	-	-	-	1,107.19	660.45
LAMPTON WELDING SUPPLY	Patient Supplies	-	-	-	-	-	-	-	1,392.81
MCKESSON - 340 B	Pharmacy Supplies	-	-	-	0.31	0.31	0.31	0.62	350.03
MCKESSON / PSS - DALLAS	Patient Care/Lab Supplies	1,092.01	-	-	1,162.10	2,254.11	-	-	-
MEDLINE INDUSTRIES	Patient Care/Lab Supplies	12,180.52	8,720.53	-	-	20,901.05	18,143.94	19,668.13	29,295.83
MYHEALTH ACCESS NETWORK, INC	Compliance purch svs	758.95	-	-	-	758.95	758.95	758.95	758.95
NATIONAL DATA BANK	IT Service	-	-	-	2.50	2.50	2.50	-	-
NUANCE COMMUNICATIONS INC	RHC purch svs	-	123.00	-	123.00	246.00	123.00	369.00	123.00
ORGANOGENESIS INC	Patient Care/Lab Supplies	1,855.00	-	-	-	1,855.00	2,690.00	2,880.00	-
PARA REV LOCKBOX	CDM purch svs	-	-	-	-	-	-	-	1,959.00
PHARMA FORCE GROUP LLC	340B purch svs	-	605.90	-	-	605.90	-	598.61	600.59
PHARMACY CONSULTANTS, INC.	PHARMACY CONSULTANTS, INC.	2,700.00	-	-	-	2,700.00	2,916.71	2,700.00	2,700.00
PHILADELPHIA INSURANCE COMPANY	OHA Insurance	3,215.59	-	-	-	3,215.59	-	-	-
PHILIPS HEALTHCARE	Supplies	257.19	-	-	-	257.19	-	-	-
PURCHASE POWER	Postage Fees	-	-	-	200.00	200.00	200.00	200.00	-
REYES ELECTRIC LLC	COVID Capital	4,250.00	-	-	-	4,250.00	-	-	-
RUSSELL ELECTRIC & SECURITY	Repair and Maintenance	507.50	-	-	-	507.50	-	-	-
SIEMENS HEALTHCARE DIAGNOSTICS	Service Contract	353.05	-	-	-	353.05	4,491.28	4,069.17	4,862.30
SMAART MEDICAL SYSTEMS INC	Radiology interface/Radiologist provider	1,735.00	-	-	-	1,735.00	1,735.00	1,735.00	1,735.00

VENDOR NAME	DESCRIPTION	0-30 Days	31-60 Days	61-90 Days	OVER 90 Days	8/31/2025	7/31/2025	6/30/2025	5/31/2025
SPACELABS HEALTHCARE LLC	Telemetry Supplies	-	-	-	-	-	245.50	-	-
SPARKLIGHT BUSINESS	Cable service	-	-	-	-	-	229.58	-	235.58
STANDLEY SYSTEMS LLC	Printer lease	-	-	-	-	-	2,345.50	210.87	-
STAPLES ADVANTAGE	Office Supplies	-	-	-	-	-	1,418.31	599.47	721.89
STERICYCLE / SHRED-IT	Waste Disposal Service	-	-	-	-	-	1,376.69	-	6,236.06
SUMMIT UTILITIES	Utilities	-	-	-	-	-	1,241.43	1,417.99	-
TECUMSEH OXYGEN & MEDICAL SUPP	Patient Supplies	-	-	-	-	-	4,212.80	-	-
TELEFLEX	Patient Supplies	-	-	-	-	-	-	1,800.00	-
TRIOSE INC	Freight	-	-	-	-	-	-	59.67	292.57
TRUBRIDGE	Software license	-	-	-	-	-	-	-	483.00
US FOODSERVICE-OKLAHOMA CITY	Food and supplies	-	-	-	-	-	(7.84)	3,610.10	(7.84)
VESTIS	Housekeeping Service	-	-	-	-	-	-	3,392.69	9,948.65
Grand Total		678,739.60	815,281.48	1,132,809.34	12,804,828.41	15,431,658.83	16,535,583.16	15,834,869.69	16,150,648.51
					Conversion Variance	13,340.32	13,340.32	13,340.32	13,340.32
					AP Control	15,781,298.71	16,880,801.00	16,180,087.53	16,495,866.35
					Accrued AP	1,918,252.44	1,460,485.76	1,879,186.60	1,681,450.36
					AHSO Related AP	(892,723.76)	(892,723.76)	(892,723.76)	(892,723.76)
					TOTAL AP	16,806,827.39	17,448,563.00	17,166,550.37	17,284,592.95
						16,806,827.39	17,448,563.00	17,166,550.37	17,284,592.95
						-	-	-	-

Angie K Brink

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	START	VEHICLES	DRIVERS	BUSINESS	COVERAGES	ADDITIONAL INSURED	CONTACT INFO	COMPLETE
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Named Insured: Mangum Regional Medical Center

Customize Your Coverages

\$4,442.00

Discounts Fees

per year

BOTH VEHICLES

Continue

View page by

Coverage Category

Cost Breakdown

Quote provided by: Progressive Northern Insurance Co

Policy Level Premium

Coverages	Limits	Premium
Uninsured Motorist Bodily Injury	\$1 million CSL	\$979.00
Vehicles		Premium
Vehicle 1 - 2019 DODGE GRAND CARAVAN (2C7WDGBG6KR605654)		\$1,087.00
Vehicle 2 - 2025 FORD ECONOLINE (1FDEE3FN3SDD10422)		\$2,356.00
Fees		\$20.00
Total Policy Premium		\$4,442.00

Vehicle Level Premium

Vehicle 1 - 2019 DODGE GRAND CARAVAN (2C7WDGBG6KR605654)

Coverages	Limits	Premium
Bodily Injury and Property Damage Liability	\$1 million CSL	\$397.00
Comprehensive	\$1,000 Deductible	\$301.00
Collision	\$1,000 Deductible	\$310.00
Rental Reimbursement	\$30 per day, \$900 max	\$52.00
Roadside Assistance	Selected w/ \$0 Deductible	\$27.00
Loan/Lease Gap	Included, up to vehicle's stated amount.	

Total Vehicle Premium

\$1,087.00

Item 11.

Vehicle 2 - 2025 FORD ECONOLINE (1FDEE3FN3SDD10422)

Coverages	Limits	Premium
Bodily Injury and Property Damage Liability	\$1 million CSL	\$426.00
Comprehensive	\$1,000 Deductible	\$865.00
Collision	\$1,000 Deductible	\$992.00
Rental Reimbursement	\$50 per day, \$1,500 max	\$73.00
Total Vehicle Premium		\$2,356.00

\$4,442.00

Discounts Fees

per year

+ 979.00 UM
\$ 3335⁰⁰ Per Year
1

BOTH VEHICLES

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Hospital Vendor Contract Summary Sheet

1. ☒ Existing Vendor ☐ New Vendor
2. **Name of Contract:** Progressive Van Insurance
3. **Contract Parties:** MRMC/Progressive Insurance
4. **Contract Type Services:** Vehicle Insurance
5. **Impacted Hospital Departments:** Hospital
6. **Contract Summary:** This insurance quote is for our 2025 Ford E350 transport van.
7. **Cost:** \$3,335.00 per year with uninsured motorist included
8. **Prior Cost:** \$1,097.00/year + \$979.00 for uninsured motorist = \$2076/year
9. **Term:** yearly renewal
10. **Termination Clause:** Can cancel 30 days prior to yearly renewal.
11. **Other:** We will have an additional premium of \$781.00 due 10/1/2025 We will be cancelling the 2019 Dodge Grand Caravan insurance once this is approved.

PHILADELPHIA INDEMNITY INSURANCE COMPANY

1-877-438-7459

ONE BALA PLAZA, SUITE 100

BALA CYNWYD PA 19004

NOTICE OF NONRENEWAL OF INSURANCE

Item 12.

Named Insured & Mailing Address:

Producer: 0016423

CITY OF MANGUM
201 N OKLAHOMA AVE
MANGUM OK 73554

WICHITA INSURANCE, LLC
PO BOX 63
ALTUS OK 73522

Policy No.: PHPK2616268-019

Type of Policy: MA :MEDICAL FACILITIES/HOSP PACKAGE

Date of Expiration: 11/01/2025; 12:01 A.M. Local Time at the mailing address of the Named Insured.

We will not renew this policy when it expires. Your insurance will cease on the Expiration Date shown above.

The reason for nonrenewal is **The 20 year loss ratio is 128.13% and the 3 year loss ratio not including the current year is 520.25%.**

This policy provides auto liability coverage. You should contact your agent concerning your possible eligibility for replacement coverage through another insurer or the Oklahoma Automobile Insurance Plan.

Named Insured



CITY OF MANGUM
201 N OKLAHOMA AVE
MANGUM OK 73554

Date Mailed:

3rd day of September, 2025

Madeline Barroso-Sesay

MADELINE BARROSO-SESAY