



Agenda

Mangum City Hospital Authority

July 23, 2024 at 5:00 PM

City Administration Building at 130 N Oklahoma Ave.

The Trustees of the Mangum City Hospital Authority will meet in regular session on July 23, 2024, at 5:00 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 June 25, 2024 regular meeting minutes as present.
- [2.](#) Approve June 2024 Medical Staff meeting minutes as presented.
- [3.](#) Approve May 2024 Quality Report.
- [4.](#) Approve June 2024 Quality Report.
- [5.](#) Approve June 2024 Clinic Report.
- [6.](#) Approve June 2024 CCO Report.
- [7.](#) Approve June 2024 CEO Report.
8. Approve the following forms, policies, appointments, and procedures previously approved _____ through Corporate Management, on July 11, 2024 Quality Committee and on July 18, 2024 Medical Staff.

Discussion and Possible Action to Approve the Policy and Procedure: MRMC-Infection Prevention Manual.

Discussion and Possible Action to Approve the Policy and Procedure: Clinical Consultant Moderate Complexity Job Description.

Discussion and Possible Action to Approve the Policy and Procedure: CA-600 Coagulation Instrument-Historical Standard Deviation.

Discussion and Possible Action to Approve the Policy and Procedure: Technical Consultant Moderate Complexity Job Description.

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 June 2024

OTHER ITEMS

- [10.](#) Discussion and Possible Action to Approve Quote between KHIM 97.7 and Mangum Regional Medical Center for Standard Package services.
- [11.](#) Discussion and Possible Action to Approve GPO Conversion Forms with Amgen, Genetech USA, GSK GlaxoSmithKline, Merck, Sanofi Pasteur, Sanofi Aventis for AmeriSource Bergen transition.
- [12.](#) Discussion and Possible Action to Approve Interface Agreement for Electronic Medical Record Interface with Clinical Pathology Laboratories and Mangum Regional Medical Center for interface services.
- [13.](#) Discussion and Possible Action to Approve Proposal between Boston Scientific for Holter Monitor services.
- [14.](#) Discussion and Possible Action to Approve Certificate of Ownership & Transfer of Title between Seimens Healthcare Diagnostics and Mangum Regional Medical Center for Dimension EXL 200 analyzer trade in.
15. Discussion and Possible Action to Approve Public Adjuster Contract between Insurance Adjusters Group, LLC and Mangum Regional Medical Center to advise and assist in the adjustment of the insurance claim services.

EXECUTIVE SESSION

16. 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

OPEN SESSION

17. Discussion and possible action regarding executive session, in needed.

STAFF AND BOARD REMARKS

Remarks or inquiries by the governing body members, City Manager, City Attorney or City 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 **5:00 p.m. on the 19th day of July 2024**, by the Secretary of the Mangum City Hospital Authority.

Codi Gutierrez Secretary



Minutes

Mangum City Hospital Authority Session

June 25, 2024 at 5:00 PM

City Administration Building at 130 N Oklahoma Ave.

The Trustees of the Mangum City Hospital Authority will meet in regular session on June 25th, 2024, at 5:00 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

Trustee Vanzant calls the meeting to order at 5:03pm.

ROLL CALL AND DECLARATION OF A QUORUM

PRESENT

Trustee Cheryl Lively
Trustee Michelle Ford
Trustee Carson Vanzant
Trustee Lisa Hopper arrived at 5:05pm.

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 items 1-5. Cheryl Lively is asking for quality minutes. Quality minutes were pulled due to not being passed. Medical staff.

Ford is asking about the policy for financial assistance and they need to review anything further.

Motion to approve item 6 after further discussion.

1. Approve May 28, 2024 regular meeting minutes as present.
2. Approve May 2024 Medical Staff meeting minutes as presented.
3. Approve May 2024 Clinic Report.
4. Approve May 2024 CCO Report.
5. Approve May 2024 CEO Report

6. Approve the following forms, policies, appointments, and procedures previously approved _____ through Corporate Management, on June 13, 2024 Quality Committee and on June 20, 2024 Medical Staff.

Discussion and Possible Action to Approve the Policy and Procedure: MRMC-Moderate Sedation Audit Tool

Discussion and Possible Action to Approve the Policy and Procedure: After Sedation Education for Child

Discussion and Possible Action to Approve the Policy and Procedure: After Sedation Education for Adult

Discussion and Possible Action to Approve the Policy and Procedure: Moderate Sedation Procedure-Nursing

Discussion and Possible Action to Approve the Policy and Procedure: Consent for Moderate Sedation

Discussion and Possible Action to Approve the Policy and Procedure: Moderate Sedation Self Study Guide

Discussion and Possible Action to Approve the Policy and Procedure: Moderate Sedation Policy

Discussion and Possible Action to Approve the Policy and Procedure: MRMC- Hospital Financial Assistance Policy

Discussion related to HIM Delinquencies

FURTHER DISCUSSION

None.

REMARKS

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

None.

REPORTS

7. Financial Report for May 2024

Dennis Boyd goes over financials for May 2024.

Trustee Lively asked if that is the actual money we have in our account. Cheryl Lively asked if they are allowed to stay in the swing bed if they have COVID. There was discussion about the clinic and whether it is causing a loss with the hospital. There was further discussion whether there may ever be a profit and what can be done to help this. There is a new internal medicine physician that will be in the clinic 2 days a week in the next few months. The hospital is looking at ways to promote his arrival.

May 2024 Financial Statement Overview

Statistics

The average daily census (ADC) fir May 2024 was 10.97-(Year-To-Date 11.47 PY fiscal year end of 11.47)

Year-To-Date Acute payer mix was approximately 70% MCR/MCR Managed Care combined & lower than the prior fiscal year end of 79%.

Year-To-Date Swing Bed payer mis was 91% MCR & 8% MCR Managed Care. For the prior year end those percentages were 90% & 10%, respectively/

Balance Sheet Highlights

The cash balance as of May 31, 2024, inclusive of both operating & reserves, was \$1,230M. This increase of \$234K from April 30, 2024, balance was primarily due to a decrease in disbursements.

Days cash on hand, inclusive of reserves, was 26.8 based on May expenses.

Net AR decreased by \$318K from April.

Cash receipts were \$372K less than in the previous month (\$1.6M vs \$1.2M).

The Medicare principal balance decreased by \$50K due to ERS loan payments.

Income Statement Highlights

Net patient revenue for May 2024 was \$1.26 M, which is approximately a drease of \$92K over the prior month.

Operating expenses, exclusive of interest & depreciation, were \$1.39M.

340b REVENUE WAS \$7k IN May, a decrease of \$4K from the prior month. YTD revenue was \$87K. Net profit from this service line YTD is \$23K.

Clinic (RHC) Income Statement Highlights-actual & projected (includes swing bed rounding):

Current month average visits per day=	6.5
Projected operating revenue (YTD)=	\$158K
Projected operating expenses (YTD)=	\$704K
Projected operating loss (YTD)=	-\$566K

OTHER ITEMS

8. Discussion and Possible Action to Approve OFMQ work order to provide medical record review of 12 charts.

Martinez explained that they do this for the hospital every year. They provide a service for case review or peer review which must be done as a condition of participation. They will do the minimum of 12 records for \$350 a month for a 12-month term. This is the same amount that was paid last year.

Motion made by Trustee Ford, Seconded by Trustee Vanzant.

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

9. Discussion and Possible Action to Approve: The Health Industry Business Communications Council application to obtain a Health Industry Number

Kelly states they will file that on the credit card and will help with the 340B participation program. This is a license that the hospital will apply for. It is a number that will help the hospital with their 340B prescription discount program. The hospital will have to be a part of this to be able to add a secondary pharmacy for the hospital and to add Puckett's and Granite Drug as 340B participants because we must have two now. Martinez confirmed this will be under Mangum Regional, not Cohesive. This will be \$100 initial cost and \$50 renewal. The hospital had it before but failed to renew it after COVID.

Motion to approve.

Motion made by Trustee Hopper, Seconded by Trustee Ford.

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

10. Discussion and Possible Action to Approve: MRMC/TruBridge Cloud services agreement for cloud computing.

Kelly explains that they have servers that are at end of life. He states Trubridge will provide services offsite in a cloud version. Cost is \$500 initial setup, then \$150 per month for 3 years. This will keep the hospital from having to purchase servers and having to support them. Vanzant asked if there have been tests run to make sure the current computer configuration is supported and enough bandwidth. Martinez stated he is not IT, they are switching from AT&T to Sparklight and will have 1 gig.

Motion to approve.

Motion made by Trustee Lively, Seconded by Trustee Ford.

Voting Yea: Trustee Lively, Trustee Ford, Trustee Hopper

Voting Nay: Trustee Vanzant

11. Discussion and Possible Action to Approve: MRMC and Port 53 Technologies agreement for PenTesting subscription.

Martinez confirmed the cost for the hospital is \$480 for 25 hits. This will be a 1-year contract.

Motion to approve.

Motion made by Trustee Vanzant, Seconded by Trustee Hopper.

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

12. Discussion and Possible Action to Approve: Sparklight Business Service Agreement for internet and modem services.

The current cost with AT&T is \$510 a month. The deal Skarklight has will be a 36-month agreement for \$125 per month with a higher speed.

Motion to approve.

Motion made by Trustee Lively, Seconded by Trustee Ford.

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

13. Discussion and Possible Action to Approve: Southwest Medical Quotation for Defibrillator Equipment.

Martinez discussed that the current defibrillators are very old and they are unable to get batteries for them. The Hospital needs to purchase new ones and brand new are around \$25000. This quote is for 2019 defibrillators at \$5800 each and the previous company quoted 2014 defibrillators at \$6800 each. Southwest will never sunset theirs, they will just update the software. There is also a 2-year parts and services included in the agreement.

Motion to approve.

Motion made by Trustee Hopper, Seconded by Trustee Lively.

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

14. Discussion and Possible Action to Approve: Heartland Pathology Consultants Agreement for Laboratory Directorship Services

The hospital is required to have a pathologist for the Laboratory Director and they will also consultants. This will be at the same cost as last year, \$1000 per month.

Motion to approve.

Motion made by Trustee Hopper, Seconded by Trustee Vanzant.

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

15. Discussion and Possible Action to Approve the Grant Application for Enhanced Mobility for Seniors and Individuals with Disabilities (Federal Transit Administration (FTA) Section 5310)

This Grant will help us purchase the van for Strong Minds. They will pay 85% and the hospital will pay 15%. The van can also be used for other services for the hospital like taking swing bed patients to and from doctor and specialist appointments. Grant due date is July 1 so we need to act quickly. Just looking for approval to apply for the grant.

Motion to approve.

Motion made by Trustee Vanzant, Seconded by Trustee Ford.

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

EXECUTIVE SESSION

16. 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

- o Schedule 1 list of providers for DIA services

Motion to enter into executive session 5:52pm.

Motion made by Trustee Vanzant, Seconded by Trustee Hopper.

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

Corry Kendall declares out of executive session at 5:58pm.

OPEN SESSION

17. Discussion and possible action regarding executive session, if needed.

Motion made to approve credentialing.

Motion made by Trustee Vanzant, Seconded by Trustee Ford.

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

STAFF AND BOARD REMARKS

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

None

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 made by Trustee Vanzant, Seconded by Trustee Ford.

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

Carson Vanzant, Chairman

Codi Gutierrez, City Clerk

Mangum Regional Medical Center
Medical Staff Meeting
Thursday
June 20, 2024

MEMBERS PRESENT:

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

ALLIED HEALTH PROVIDER PRESENT:

Mary Barnes, APRN-CNP
David Arles, APRN

NON-MEMBERS PRESENT:

Kelley Martinez, RN, CEO
Chelsea Church, PharmD
Nick Walker, RN, CCO
Meghan Smith, RN, Infection Control
Lynda James, LPN, Pharmacy Tech

1. Call to order
 - a. The meeting was called to order at 1:26 pm by Dr. John Chiaffitelli, Medical Director.
2. Acceptance of minutes
 - a. The minutes of the May 23, 2024, 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
 - a. Cohesive has signed a new MD to work in Carnegie and Mangum clinic.

- Operations Overview
 - We continue to have an ad posted for a Licensed Counselor for the Strong Minds program.
 - Patient rounds continue to provide positive feedback from our patients.
 - Looking at clinic collections for May we collected a total of \$1,801.44 at time of service.
 - The hospital collected \$11,946.30 in copays and collections for the month of May.
 - Conversations are ongoing over roof repairs.
 - We continue with improvements around the clinic and the hospital.
 - We continue to plan events for hospital and clinic staff. Written report remains in the minutes.

5. Committee / Departmental Reports

a. Medical Records

1. Checking that ERs are completed and correct with patient's information.
2. Correcting patient information that was entered incorrectly at registration. This will prevent patient charts from being held until corrected.

Written report remains in the minutes.

b. Nursing

Patient Care

- MRMC Education included:
 1. Updates regarding TruBridge documentation for nursing staff.
 2. Central supply updating floor stock based on nursing recommendations.
- 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 6 HAI, or 1 MDRO for the month of May.

Client Service

- Total Patient Days decreased with 342 patient days in May 2024 as compared to 358 patient days in April 2024. This represents an average daily census of 11.0. In addition, MRMC Emergency Department provided care to 144 patients in May 2024.

- MRMC Case Management reports 30 Total Admissions for the month of May 2024.
- May 2024 COVID-19 Stats at MRMC: Swabs (0 PCR & 20 Antigen) with 0 Positive.

Preserve Rural Jobs

- Nursing meeting scheduled for June 26, 2024.
- MRMC has LPN position 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.

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. Corporate Policy & Review Committee is currently looking at all policies associated with Influenza Vaccines.
- Education/In Services
 - a. Monthly EPIC meeting for IP education.
 - b. Weekly Call with Corp. IP.
 - c. Weekly Lunch and Learns.
 - d. Staff education
- Updates: No updates at this time.
- Annual Items:
 - a. Completed March 2023
 - b. ICRA approved by Board March, 2024.

Written report remains in minutes.

d. Environment of Care and Safety Report

- i. Evaluation and Approval of Annual Plans –
- i.i. Old Business - -

- a. Chrome pipe needs cleaned and escutcheons replaced on hopper in ER- could not replace escutcheons due to corroded piping in wall – capped off leaking pipe under the floor to stop leak – hopper will be covered – remodel postponed.
- b. ER Provider office flooring needing replaced. Tile is onsite.- Remodel is postponed.

- c. Damaged ceiling tile in patient area due to electrical upgrade-will need more tile to complete. - - No tile in stock at Lowes. Tile picked up 5/08/2024.
 - d. Replace ceiling tile that do not fit properly – will need more tile to complete. No tile in stock at Lowes. – Tile picked up 5/08/2024.
 - e. EOC, EM and Life Safety Plans will be evaluated and approved in the June EOC meeting.
 - f. Add additional sanitizer dispensers in patient wing – will need more dispensers.- - 3 Additional dispensers have been delivered. Complete 4/25/2024.
- i.i.i. New Business
 - a. None.

Written report remains in minutes.
- e. Laboratory
 - i. Tissue Report – None – May, 2024 – Approved
 - i.i. Transfusion Report – May, 2024 – Approved

Written report remains in minutes.
- f. Radiology
 - iv. There was a total of – 165 X-Rays/CT/US
 - i.i. Nothing up for approval
 - i.i.i. Updates:
 - o No updates

Written report remains in minutes.
- g. Pharmacy
 - i. Verbal Report by PharmD.
 - i.i. COVID-19 Medications-Have 1 dose of Bebtelovimab, 30 doses of Remdesivir and 18 Paxlovid doses in-house.
 - i.i.i. P & T Committee Meeting – P&T Committee Meeting Minutes for March 28, 2024 were approved/signed at the P&T Committee Meeting held on June 13, 2024. These minutes are included in this month’s Medical Staff Minutes.
 - iv. Solu-Medrol has been added to the shortage list. We have plenty in house at this time.

Written report remains in the minutes.
- h. Physical Therapy
 - i. No report.
- i. Emergency Department
 - i. No report
- j. Quality Assessment Performance Improvement Risk

- Risk Management
 - Grievance –
 - - Fall with no injury
 - - Fall with minor injury
 - – Fall with major injury
 - Death –
 - AMA/LWBS –
 - Quality
 - Quality Minutes from previous month included as attachment.
 - HIM – H&P –H&P completion
Progress Note completion –
 - Med event – P&T reports quarterly
 - Afterhours access was – P&T reports quarterly
 - Compliance
Quality Minutes for April, 2024
were rejected in the Medical Staff Meeting and sent back to Quality for amendments. The amended minutes will then be presented for approval in the July Quality Meeting and Medical Staff Meeting.
There will be two months of data to be approved at the Medical Staff Meeting in July, 2024.
- k. Utilization Review
- i. Total Patient days for May:
 - i.i. Total Medicare days for May:
 - i.i.i. Total Medicaid days for May:
 - iv. Total Swing Bed days for May:
 - v. Total Medicare SB days for May:
- May's report will be given next month.

Motion made by Dr. John Chiaffitelli, Medical Director to approve Committee Reports for May, 2024.

6. New Business

- a. Review & Consideration of Approval of Policy & Procedures: MRMC – Moderate Sedation Audit Tool
 - i.Motion:** made by John Chiaffitelli, DO, Medical Director, to approve MRMC – Moderate Sedation Audit Tool.
- b.Review & Consideration of Approval of Policy & Procedure: MRMC – After Sedation Education for Child
 - i.Motion:** made by John Chiaffitelli, DO, Medical Director, to approve MRMC - After Sedation Education for Child.
- c.Review & Consideration of Approval of Policy & Procedure: MRMC – After Sedation Education for Adult

- i.Motion:** made by John Chiaffitelli, DO, Medical Director, to approve MRMC – After Sedation Education for Adult
- d.Review & Consideration of Approval of Policy & Procedure: MRMC - Moderate Sedation Procedure – Nursing
- i.Motion:** made by John Chiaffitelli, DO, Medical Director, to approve MRMC - Moderate Sedation Procedure – Nursing.
- e.Review & Consideration of Approval of Policy & Procedure: MRMC – Moderate Sedation Procedure - Provider
- i.Motion:** made by John Chiaffitelli, DO, Medical Director, to approve MRMC - Moderate Sedation Procedure – Provider.
- f.Review & Consideration of Approval of Policy & Procedure: MRMC – Consent for Moderate Sedation
- i.Motion:** made by John Chiaffitelli, DO, Medical Director, to approve MRMC - Consent for Moderate Sedation.
- g.Review & Consideration of Approval of Policy & Procedure: MRMC – Moderate Sedation Self Study Guide
- i.Motion:** made by John Chiaffitelli, DO, Medical Director, to approve MRMC – Moderate Sedation Self Study Guide.
- h.Review & Consideration of Approval of Policy & Procedure: MRMC – Moderate Sedation Policy
- i.Motion:** made by John Chiaffitelli, DO, Medical Director, to approve MRMC – Moderate Sedation Policy.
- i.Review & Consideration of Approval of Policy & Procedure: MRMC – Hospital Financial Assistance Policy
- i.Motion:** made by John Chiaffitelli, DO, Medical Director, to approve MRMC – Hospital Financial Assistance Policy.
- j. Discussion: ER Providers checking PMP for all Patients and the Documentation
Discussed the fact that providers are required to check the Oklahoma PMP and document that they have checked it in CPSI. This includes any person they feel is under the influence or at risk of withdrawal or overdose, along with any patient that will be prescribed a controlled substance or given a controlled substance while in the ER. The providers need to be educated on the steps necessary to document this in CPSI. The report component of CPSI captures it if they click on the button during medication reconciliation. Evidently, there are some that are not being documented correctly and not captured on the report.
There is an education needed for all providers.

7. Adjourn

- a. Dr Chiaffitelli made a motion to adjourn the meeting at 1:47 pm.

Medical Director/Chief of Staff

Date

Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
Agenda for May 2024 and Meeting Minutes for April 2024

Meeting Location: OR	Reporting Period: April 2024	
Chairperson: Dr Gilmore	Meeting Date: 05/16/24	Meeting Time: 14:00
Medical Representative: Dr Gilmore	Actual Start Time: 1402	Actual Finish Time: 1437
Hospital Administrator/CEO: Kelley Martinez	Next Meeting Date/Time: 06/13/2024 @ 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 -- Danielle / Second – Melissa

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>	Denise Jackson	2 min	Meeting minutes – March 2024	Approval: First – Megan, Second – Tonya
B. Environment of Care (EOC) Committee 1. <i>Approval of Meeting Minutes</i>	Mark Chapman	2 min	Ceiling tiles are being replaced	Approval: First – Melissa, Second – Megan
C. Infection Control Committee 1. <i>Approval of Meeting Minutes</i>	Meghan Smith	2 min	2 subsequent UTIs for the reporting period, both pt has hx of Utis and cath usage	Approval: First – Heather, Second – Melissa

Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
Agenda for May 2024 and Meeting Minutes for April 2024

D. Pharmacy & Therapeutics (P&T) Committee 1. <i>Approval of Meeting Minutes</i>	Chelsea Church/ Lynda James	2 min	P&T scheduled for June 2024	
E. Health Information Management (HIM)/Credentialing Committee 1. <i>Approval of Meeting Minutes</i>	Jennifer Dryer/ Kaye Hamilton	2 min	Kaye only – Dr Langley/Dr Hawkins for credentialing this month	Approval; First – Danielle, Second - Megan
D. Utilization Review (UR) Committee 1. <i>Approval of Meeting Minutes</i>	Chasity Howell	2 min	Total ER – 125 Total SWB admits – 10 Total Acute admits – 10 Total OBS – 2 Total pt days – 358 Total pt days – 11.8 Re-admit – Pt admitted for post op ROIF explanation with spacer placement/wound care/ABT: Discharged to home for OP surgery; Readmitted: s/p Right Hip Revision. No issues identified	Approval: First – Danielle, Second – Megan

III. DEPARTMENT REPORTS

Agenda Item	Presenter	Time Allotted	Discussion/Conclusions	Decision/Action Items
A. Nursing/Emergency Department	Nick Walker	5 min	0 restraints 3 PRBC with no reactions 1 code blue,	
B. Radiology	Pam Esparza	2 min	Dept Director not present – will defer reporting for next month	
C. Laboratory	Tonya Bowan	5 min	1 rejected specimens – due to fecal contamination on a urine specimen 44 repeated labs – all critical labs repeated per policy Reagent/blood tubes – expired (replaced) Analyzer parts had to be replaced	Manual Diff Education/ Critical Rerun Education/ Patient Identifier Education with lab staff 04/23/2024

Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
Agenda for May 2024 and Meeting Minutes for April 2024

			Seimens did a site survey with no findings for new analyzer needs New Dimension machine/CPL/Medline all approved for lab	
D. Respiratory Care	Heather Larson	2 min	21 neb changes for the month No vent days RT is monitoring and maintaining suction set ups in all patient rooms Director to renew RT license this month	
E. Therapy	Chrissy Smith	2 min	Pt with assistive needs – 22 Total sessions for the month; 210 -PT 170 -OT 0 -ST Improved Standard Assessment Scores: 12 - PT 12- OT 0- ST	
F. Materials Management	Brittany Gray	2 min	5 - Back order No - late orders due to vendors None - recalls affecting the hospital Requisition training in process with all dept Dept Manager is removing inactive items from item master	

Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
Agenda for May 2024 and Meeting Minutes for April 2024

			<p>Waiting on chargeable/non-chargeable list</p> <p>Secondary location for supplies has been implemented, central will be locked starting 5/20, Director will stock floor supplies for nursing and other dept will begin using requisitions for all supplies</p>	
G. Business Office	Dannille Cooper	2 min	<p>1 – BO missed cost share/payment plan at TOS</p> <p>After hours documentation obtaining has improved</p>	BO employees educated on the need to obtain cost share at TOS
H. Human Resources	Bethany Moore	2 min	<p>1 - background check completed</p> <p>2 - license renewals</p>	HR with difficulty obtaining number of background checks preformed prior to new hire, on the go forward CEO/QM will be notified via email by HR when this is not being reported to local HR in a timely fashion
I. Environmental Services	Mark Chapman	2 min	100%	
J. Facility/Plant Operations	Mark Chapman	2 min	<p>24 extinguishers checked</p> <p>boiler inspections completed</p> <p>1 generator/transfer switch inspection</p> <p>generator inspections completed May, no issues reported at this time</p>	
K. Dietary	Treva Durr	2 min	<p>New Director</p> <p>1 cleaning schedule and 1 sanitizer log not documented for the reporting period</p>	Corporate discussed with New Director the need for daily monitoring of the log to make sure tasks are being completed and documented, new director reports this is in process and going well to date Vent hood cleaned in April

Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
Agenda for May 2024 and Meeting Minutes for April 2024

L. Information Technology	Tim Hopen	2 min	1 sever has bad battery that was replaced Received and replaced multiple monitors and other small IT items Ticketing system is no longer in use, IT is utilizing email for IT issues	
IV. OLD BUSINESS				
Agenda Item	Presenter	Time Allotted	Discussion/Conclusions	Decision/Action Items
A. Old Business	QM	5 min	Extravasation Management Strategies Conditions of Admission Enteral Tube Management Policy Intravenous (IV) Extravasation Management and Treatment Policy 2024 Mangum Annual Quality and Safety Plan 2024 Mangum Annual Quality Plan Evaluation MRMC Lab Policy Manual (see TOC) and the following lab policies: <ol style="list-style-type: none"> 1. Reporting COIVD to State 2. Specimen Labeling Policy 3. Lab Plan of Care 4. Quality Management Plan 5. Competency and Orientation Plan 6. Employee Signatures 	Approved April 2024

Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
Agenda for May 2024 and Meeting Minutes for April 2024

			<ul style="list-style-type: none"> 7. Lab Ergonomic Plan 8. Performance Improvement Plan 9. Blood and Urine Centrifuges 10. Delegation of Duties 11. Error Investigation and Documentation 12. Use and Care of PPE 13. Pathologist Review of Results 14. Proficiency Testing Policy 15. Reporting to OSDH 16. Specimen Rejection 17. Specimen Storage 18. Turn-Around Times 19. Corrected Reports 20. Chemical Hygiene and Exposure Control 21. Blood Bank Alarm System 22. Blood Culture Collection 23. Evacuated Tube Collection 24. FDA Medical Device Reporting Procedure 25. Look back for Transmitted Disease Policy 26. Platelet Poor Plasma <p>Strong Minds Policy Manual (see TOC)</p> <p>Annual TB Risk Assessment</p>	
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V. NEW BUSINESS

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

Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
Agenda for May 2024 and Meeting Minutes for April 2024

VI. QUALITY ASSURANCE/PERFORMANCE IMPROVEMENT DASHBOARD REPORT				
Agenda Item	Presenter	Time Allotted	Discussion/Conclusions	Decision/Action Items
A. Volume & Utilization	CM	5 min	<p>AMA 3 pts; 1 ER pt for c/o feeling ill, all exams/testing preformed, provider recommended admission however pt declined, R/B discussed with pt however they continued to decline hospital admission. AMA signed, pt left ER.</p> <p>1 pt to the ER with "asthma attack", testing and treatment preformed, provider recommended continued monitoring/treatment, however pt was "feeling better" and desired to leave. R/B discussed with pt, continues to express desire to leave. AMA signed.</p> <p>1 pt to the ER for c/o constipation, expresses that they do not want to have to wait longer than 20 min for entire visit. Seen by provider and again expressed they would not wait for exam/treatment. Advised of R/B, pt signed AMA.</p>	Noted 2 of 3 AMA in PM with same provider/nurse.
B. Case Management	CM	8 min	My Care Corner	QM/CM to meet with Leslie about MyCare Corner for further education on findings
C. Risk Management	QM	10 min	<p>0 complaint / 0 grievances Other – 3 other events (skin tears) 1.) in-pt noted to have skin tear to arm post transfer into chair.</p>	

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Agenda for May 2024 and Meeting Minutes for April 2024

			<p>2.) In-Pt noted to have new skin tear after repositioning self in chair after eating, bumped knee on over bed table with resulting skin tear noted.</p> <p>3.) 1 in-pt noted to have skin tear to leg, unknown cause</p> <p>Falls w/o injury - 4</p> <p>1.) 1 in-pt found on the floor during rounds, pt reports they were folding their blanket and fell backwards, reports hitting head. Eval post fall with no injuries or change in LOC noted. Pre-fall precautions in place; low bed, nonskid socks, rounding, call light in reach, education to patient.</p> <p>2.) 1 in-pt found on the floor in room in front of w/c. pt reports they were leaning over to pick up trash on the floor. No injuries noted post fall. Pre-fall precautions; rounding, room free of obstructions, call light in reach, education.</p> <p>3.) 1 in-pt found on the floor after trying to self-ambulate to the restroom. No injuries noted. Pre-fall precautions; low bed, non-skid socks, rounding, call light in reach, room free of obstacles, close to nurse station, bed alarm.</p> <p>4.) 1 in-pt being transferred from shower chair to wheelchair with walker and x 2 assist, during the transfer, pt became</p>	
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Mangum Regional Medical Center
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Agenda for May 2024 and Meeting Minutes for April 2024

			<p>weak and unable to complete transfer, assist to the floor. No injuries reported or noted post fall</p> <p>Pt fall w/minor injury – 1 1.) 1 in-pt found on the floor on hands/knees, assisted back to chair. Abrasions noted to knee and ankles with no other injuries noted. Pre-fall precautions; rounding, call light in reach, room free of obstructions, chair alarm (not on at time of fall)</p> <p>Mortality - 1 er; 1 ER pt brought into the ED for SHOB. During the er course, pt heartrate dropped suddenly with interventions preformed including intubation due to resp status. Air-vac arrived and pt simultaneously coded, all life saving measures were preformed, next of kin reported DNR and requested all measures be stopped. Patient expired while in the ER.</p>	
D. Nursing	CCO	2 min	Total number of charts with pain medication administration were accounted for, excluding duplicate charts. Post assessment, 2 PO and 2 IV, administration(s) not completed	CPSI continues to show past incomplete pain reassessment notifications. Nurses again educated on need to not rely on system for reminder to reassess the patients pain level. The charge nurse is now responsible for ensuring all nurses f/u with pain reassessments. Only a few were missed due to timing during shift and total patient acuity.

Mangum Regional Medical Center
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Agenda for May 2024 and Meeting Minutes for April 2024

E. Emergency Department	CCO/QM	5 min	5 ER readmits - No trends or patterns were identified, no further action needed 7 incomplete logs – QM notifying CNO and Nurse directly through Tiger Connect	Readmits were not due to lack of education, care on MRMC part CEO/CNO/QM discussed on-going issue, CNO will monitor charts and ER log in real time and notify nurses with missing data. Trend noted with ER nurse. CNO/QM to monitor real time log and notification of nursing staff, should this continue to be an issue with individual staff members, disciplinary actions to follow
F. Pharmacy & Therapeutics (P&T)	Pharmacy	2 min	Next P&T – June 2024	
G. Respiratory Care	RT	2 min	100% on chart checks	
H. Wound Care	WC	2 min	No in-pt wound development for the month	
I. Radiology	RAD	2 min	2 - delays in reads for the month (1 xray/1 CT)	
J. Laboratory	LAB	5 min	Seimens did site survey with nothing needed for new analyzer New dimension approved/CPL approved/ Medline approved Lab Education - 1. Manual Diff 2. Critical Rerun 3. Patient Identification	
K. Infection Control/Employee Health	IC/EH	5 min	2 hospital acquired; 1.UTI - high risk pt with foley, sepsis protocol initiated on admit with UTI found, treated appropriately 2. Pt treated with ABT for infection, began having loose stools with stool	1.) IP to continue to monitor culture results and reinforce importance of foley catheter care. 2.) IC to continue monitoring for C. diff cases in hospital. Reinforced education for proper isolation, prevention, and proper cleaning.

Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
Agenda for May 2024 and Meeting Minutes for April 2024

			culture ordered and c-diff dx, treated for c-diff	
L. Health Information Management (HIM)	HIM	2 min	100% H&P completion 95% Progress Note Completion – 1 swb not complete	Placed in providers box for completion, completed
M. Dietary	Dietary	2 min	75 % on cleaning scheduled – 1 task not documented for the month 98% on PPM Sanitizer – 1 task not documented for the month	Manager to monitor schedule daily for completion of tasks
N. Therapy	Therapy	2 min	100%	
O. Human Resources (HR)	HR	2 min	100% - 90-day competency Annual education – 9 employees have not completed education requirements; 3 CNAs/2LPNs/1 RN/ 1 PT/ 1 COTA/ 1 Maintenance	
P. Business Office	BOM	2 min	1 OP did not collect the cost share/payment agreement for the patient at TOS	Education to BO staff member on collecting this at TOS
Q. Environmental Services	EVS	2 min	10/10 on room cleans	
R. Materials Management	MM	2 min	5 back orders No late orders No recalls effecting the hospital Secondary supply location set up in room 18	
S. Life Safety	PO	2 min	Routine checks preformed with no issues noted	
T. Emergency Preparedness	EP	2 min	3 employees oriented	
U. Information Technology	IT	2 min	1 Server with bad battery, replacement ordered	

Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
Agenda for May 2024 and Meeting Minutes for April 2024

V. Outpatient Services	Therapy	2 min	Data tool being added to workbook	Email out to creator regarding this still not on workbook
W. Strong Minds	N/A	N/A	N/A	Policies were approved in April 2024 for the SM program, looking for Councilor?

VII. POLICIES & PROCEDURES

Agenda Item	Presenter	Time Allotted	Discussion/Conclusions	Decision/Action Items
A. Review and <i>Approve</i>	QM	10 min	MPMC 2024 Emergency Preparedness Plan and appendices (attached)	First approval – Megan Second approval – Heather
B. Review and <i>Approve to Retire</i>				

VIII. PERFORMANCE IMPROVEMENT PROJECTS

Agenda Item	Presenter	Time Allotted	Discussion/Conclusions	Decision/Action Items
A. Performance Improvement Project (PIP)	QM	2 min	1.) Bed side scanning 2.) Pain Assessment 3.) Stroke	

IX. OTHER

Agenda Item	Presenter	Time Allotted	Discussion/Conclusions	Decision/Action Items
A. Risk Manager Appointment	QM	1 min	Approved - Feb 2024	
B. Infection Preventionist	QM	1 min	Approved – March 2024	

Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
Agenda for May 2024 and Meeting Minutes for April 2024

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 1437 by Melissa seconded by Brittany	

MEMBERS & INVITED GUESTS				
Voting MEMBERS				
Melissa Tunstall	Nick Walker	Danielle Cooper	Meghan Smith <input type="checkbox"/>	
Kaye Hamilton (teams)	Mark Chapman	Heather Larson	Brittany Gray	
Dr C (phone)	Dr Gilmore (teams) <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Non-Voting MEMBERS				
Denise Jackson	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
INVITED GUESTS				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Date Minutes Approved:	
Signature of ChairPerson:	

Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
Agenda for June 2024 and Meeting Minutes for May 2024

Meeting Location: OR	Reporting Period: May 2024	
Chairperson: Dr Gilmore	Meeting Date: 06/13/24	Meeting Time: 14:00
Medical Representative: Dr Gilmore	Actual Start Time: 1402	Actual Finish Time: 1440
Hospital Administrator/CEO: Kelley Martinez	Next Meeting Date/Time: 07/11/2024 @ 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 -- Nick/ Second – Pam

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>	Denise Jackson	2 min	Meeting minutes – April 2024	Approval: First – Tonya, Second – Nick
B. Environment of Care (EOC) Committee 1. <i>Approval of Meeting Minutes</i>	Mark Chapman	2 min	Provider office flooring needs replaced, ceiling tiles need replaced in pt area/waiting on tiles. Reviewing policies for bi-annual review	Approval: First – Pam , Second – Brittany
C. Infection Control Committee 1. <i>Approval of Meeting Minutes</i>	Meghan Smith	2 min	Dept Director not present – will defer reporting for next month	

Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
Agenda for June 2024 and Meeting Minutes for May 2024

D. Pharmacy & Therapeutics (P&T) Committee 1. <i>Approval of Meeting Minutes</i>	Chelsea Church/ Lynda James	2 min	Meeting min – 3/28/24; annual formulary, ozempic/mounjaro will not be ordered through the hospital, pt will use home meds P&T scheduled for Sept 2024	Approval: First – Brittany, Second – Nick
E. Health Information Management (HIM)/Credentialing Committee 1. <i>Approval of Meeting Minutes</i>	Jennifer Dryer/ Kaye Hamilton	2 min	Chart under wrong name corrected, HP correction on chart, multiple HPs on one chart, wrong dates on chart to be corrected No credentialing	Approval; First – Heather, Second - Pam
D. Utilization Review (UR) Committee 1. <i>Approval of Meeting Minutes</i>	Chasity Howell	2 min	Dept Director not present – will defer reporting for next month	

III. DEPARTMENT REPORTS

Agenda Item	Presenter	Time Allotted	Discussion/Conclusions	Decision/Action Items
A. Nursing/Emergency Department	Nick Walker	5 min	0 restraints 10 PRBC with no reactions 0 code blue	
B. Radiology	Pam Esparza	2 min	4 films repeated	
C. Laboratory	Tonya Bowan	8 min	64 repeated labs, 2 expired orders that were not renewed by provider, applied for CLIA waved certificate for finger sticks d/t nursing completing theses. Education for the month; platelet, hypochromia, stool leukocyte	
D. Respiratory Care	Heather Larson	2 min	36 neb changes for the month 0 vent days PM on vents due	
E. Therapy	Chrissy Smith	2 min	Pt with assistive needs – 22 Total sessions for the month; 146 -PT 117 -OT	

Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
Agenda for June 2024 and Meeting Minutes for May 2024

			14 -ST Improved Standard Assessment Scores: 11 - PT 0 - OT 1 - ST OT supervisory visits completed for the quarter	
F. Materials Management	Brittany Gray	2 min	6 back orders, no late orders, no recalls affecting the hospital Requisition training in process, removing inactive items from the item master, waiting on list of chargeable v non-chargeable items CS locked 5/20 and RM 18/ER being stocked by MM	
G. Business Office	Dannille Cooper	2 min	1 er with paperwork not signed, pt left before completing, BO began using the COA form 5/2024	
H. Human Resources	Bethany Moore	2 min	1 - background check completed 3 RN/ 1 RRT - license renewals	
I. Environmental Services	Mark Chapman	2 min	100% terminal room cleans	
J. Facility/Plant Operations	Mark Chapman	2 min	24 extinguishers checked boiler turned off for warm weather months on 4/30/24; no inspections while boiler is not running 1 generator/transfer switch inspection	
K. Dietary	Treva Durr	2 min	Dept Director not present – will defer reporting for next month	
L. Information Technology	Tim Hopen	2 min	Dept Director not present – will defer reporting for next month	
IV. OLD BUSINESS				

Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
Agenda for June 2024 and Meeting Minutes for May 2024

Agenda Item	Presenter	Time Allotted	Discussion/Conclusions	Decision/Action Items
A. Old Business	QM	5 min	None	
V. NEW BUSINESS				
Agenda Item	Presenter	Time Allotted	Discussion/Conclusions	Decision/Action Items
A. New Business	QM	2 min	See Policy and Appointment below	
VI. QUALITY ASSURANCE/PERFORMANCE IMPROVEMENT DASHBOARD REPORT				
Agenda Item	Presenter	Time Allotted	Discussion/Conclusions	Decision/Action Items
A. Volume & Utilization	CM	5 min	<p>AMA 5 pts; 4 ER / 1 In-pt;</p> <p>1.) pt to the ER for c/o hypothermia. Pt family at bedside, there appears to be a lot of dynamics between family members. Pt became upset with family and demanded to leave the ER. Discussed r/b with pt, per provider pt was no in distress, no emergent symptoms at the time. Pt signed out AMA.</p> <p>2.) Pt to the ER for c/o NV/ab pain, PT evaluated and being treated, when pt suddenly wanted to leave, family requested assistance from nurse to talk to pt to stay in ER for further treatment. Nursing staff spoke with patient who was adamant in leaving, provider notified and spoke with pt as well. Pt began removing</p>	Noted Provider Trend, Kelley met with provider

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			<p>IV them self, nurse assisted and re-educated pt on R/B of leaving AMA. Pt signed AMA and left, nurse attempted to educate pt on labs in the parking lot without success, nurse then called pt phone with further results, unable to give results to person on the phone due to HIPPA and advised that they have pt call ASAP.</p> <p>3.) 1 pt to the ER for c/o vaginal bleeding, pt voices several gyn concerns. Provider discussed testing/tx for dx, pt voiced wanting to leave without testing/treatment, discussed R/B with patient, AMA signed</p> <p>4.) Pt sent to ER by HH for concern with lab results, pt and labs evaluated, discussed tx options with pt, pt declined stating that they wanted to go home, discussed R/B with pt, pt signed out AMA. 1 INPT)</p> <p>Pt in-pt for weakness, during the course of stay; pt reports a family emergency and needs to leave, spoke with pt about R/B of leaving, pt understands but needs to be with family. Signed out AMA</p>	
B. Case Management	CM	8 min	Dept Director not present – will defer reporting for next month	
C. Risk Management	QM	10 min	0 complaint / 0 grievances	

Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
Agenda for June 2024 and Meeting Minutes for May 2024

			<p>Other – 2 other events (skin tears)</p> <p>1. pt dislodged their IV, uncertain how this occurred, pt not able to recall event that may have lead to iv dislodge</p> <p>2.) Pt had incont episode, while turning pt they "bumped" hand on bed rail with skin tear occurring</p> <p>Falls w/o injury – 2</p> <p>1.) Pt family notified nursing of fall, pt found on bathroom floor, reports becoming weak and falling to the floor. No injuries noted</p> <p>2.)Pt assisted x 1 with gait belt from shower chair to bed, during transfer pt leg gave out and pt was not able to complete transfer, pt assisted to the floor. No injuries noted</p> <p>Mortality - None</p>	
D. Nursing	CCO	2 min	Total number of charts with pain medication administration were accounted for, excluding duplicate charts. Post assessment, 3 PO and 0 IV, administration(s) not completed	The charge nurse is now responsible for ensuring all nurses f/u with pain reassessments. Excluding ED. Will continue to remind nursing staff to reassess patients. The majority of reassessments are completed.

Mangum Regional Medical Center
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E. Emergency Department	CCO/QM	5 min	2 ER readmits - No trends or patterns were identified, no further action needed 3 incomplete logs – Real time monitoring as of last month, numbers decreased. All 3 are the provider seen by date/time, all different nurses	Readmits were not due to lack of education, care on MRMC part
F. Pharmacy & Therapeutics (P&T)	Pharmacy	2 min	Next P&T – Sept 2024 After hours access 100% to date 1 ADR in April; celexa, pt with rash, celexa was not reported as allergy, med stopped/tx treated for reaction Med errors - March – 9 April – 3 May – 2	CNO education on med errors as needed r/t med error
G. Respiratory Care	RT	2 min	100 % on chart checks	
H. Wound Care	WC	2 min	No in-pt wound development for the month	
I. Radiology	RAD	2 min	1 - delays in reads for the month (1 xray)	
J. Laboratory	LAB	5 min	Stat turn around time – 100% Corrected reports – 1, pt entered wrong by nursing and not caught by lab staff; lab had to be reran – educated staff on name/DOB verification No blood culture contaminations	

Mangum Regional Medical Center
Quality and Patient Safety Committee Meeting
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K. Infection Control/Employee Health	IC/EH	5 min	Dept Director not present – will defer reporting for next month
L. Health Information Management (HIM)	HIM	2 min	92% H&P completion – 1 SWB not complete 100% Progress Note Completion
M. Dietary	Dietary	2 min	Dept Director not present – will defer reporting for next month
N. Therapy	Therapy	2 min	100%
O. Human Resources (HR)	HR	2 min	100% - 90-day competency Annual education – 2 employees have not completed education requirements; 1 CNA/1 PT. CNA taken off schedule once past due until education completed
P. Business Office	BOM	2 min	100%
Q. Environmental Services	EVS	2 min	10/10 on room cleans
R. Materials Management	MM	2 min	Requisitions – 100% Editing stock sheets per dept to ensure dept has each item available to them to request
S. Life Safety	PO	2 min	Boiler was shut down due to warm weather season and will not be back in operation until fall, inspections are only required when boiler is in operation, shut off 4/30/24
T. Emergency Preparedness	EP	2 min	1 employee oriented
U. Information Technology	IT	2 min	Dept Director not present – will defer reporting for next month

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V. Outpatient Services	Therapy	2 min	Data tool being added to workbook	Email out to creator regarding this still not on workbook
W. Strong Minds	N/A	N/A	N/A	Policies were approved in April 2024 for the SM program, looking for Councilor?

VII. POLICIES & PROCEDURES

Agenda Item	Presenter	Time Allotted	Discussion/Conclusions	Decision/Action Items
A. Review and <i>Approve</i>	QM	10 min	Moderate Sedation Audit Tool After Sedation Education for Child After Sedation Education for Adult Moderate Sedation Procedure - Nursing Moderate Sedation Procedure – Provider Consent for Moderate Sedation Moderate Sedation Self Study Guide Moderate Sedation Policy Hospital Financial Assistance Policy	First approval – Nick Second approval – Dr. G
B. Review and <i>Approve to Retire</i>				

VIII. PERFORMANCE IMPROVEMENT PROJECTS

Agenda Item	Presenter	Time Allotted	Discussion/Conclusions	Decision/Action Items
A. Performance Improvement Project (PIP)	QM	2 min	1.) Bed side scanning 2.) Pain Assessment 3.) Stroke	

Mangum Regional Medical Center
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IX. OTHER				
Agenda Item	Presenter	Time Allotted	Discussion/Conclusions	Decision/Action Items
A. Risk Manager Appointment	QM	1 min	Approved - Feb 2024	
B. Infection Preventionist	QM	1 min	Approved – March 2024	
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 1440 by Tonya seconded by Mark	

MEMBERS & INVITED GUESTS				
Voting MEMBERS				
Melissa Tunstall	Nick Walker	Danielle Cooper	Lynda James	
Kaye Hamilton (teams)	Mark Chapman	Heather Larson	Brittany Gray	Chrissy Smith
Jennifer Dreyer	Pam Esparza	Tonya Bowen	Bethany Moore	Chelsea Church
Tim Hopen (teams) *left before reporting	Dr Gilmore (teams) <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Non-Voting MEMBERS				
Denise Jackson	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
INVITED GUESTS				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Date Minutes Approved:	
Signature of ChairPerson:	



Clinic Operations Report

Mangum Family Clinic

June 2024

Monthly Stats	June 2023	June 2024
Total Visits	127	141
Provider Prod	142	144
RHC Visits	117	135
Nurse Visits	0	2
Televisit	0	0
Swingbed	10	4

Provider Numbers	RHC	TH	SB
Ogembo	134		
Chiaffitelli			3
Langley			
Barnes	1		1

Payor Mix	
Medicare	44
Medicaid	50
Self	5
Private	41

Visits per Geography	
Mangum	107
Granite	14
Willow	5

Month	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total
Visits	177	178	150	140	124	141							

Clinic Operations:

- Nelson Ogembo has doubled his production from last month. Progressively increasing his numbers.
- Eagerly anticipating Dr. Sanda arriving in early August.

Quality Report:

Improvement Measure	Actual	Goal	Comments
Reg Deficiencies	0	0	12 audited
Patient Satisfaction	1	5	1-excellent
New Patients	20	10	Extremely impressive given the circumstances
No Show	7.8%	<12%	15 no shows for the month
Expired Medications	0	0	None noted.

Outreach:

- The clinic performed school physicals for the community during June. This was a great opportunity for the community to meet Nelson.

Summary :

The Clinic is progressively ramping up. Mr. Ogembo is becoming more familiar and confident with his computer documentation. We hope to continue this trend. Very excited to have Dr. Sanda joining the clinic in the first week of August. His hours of operations have yet to be determined but we will keep all in the loop as it becomes more clear.

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



Chief Clinical Officer Report June 2024

Patient Care

- MRMC Education included:
 1. Nurses meeting held. Updates including documentation, processes, and education.
 2. A new cleaning solution was identified and ordered that neutralizes C. auris. Recommendations from the State included this cleaning solution and care of infected patients.
- MRMC Emergency Department reports 0 patients Left Without Being Seen (LWBS).
- MRMC Laboratory reports 0 contaminated blood culture set(s).
- MRMC Infection Prevention reports 0 CAUTI.
- MRMC Infection Prevention report 0 CLABSI.
- MRMC Infection Prevention reports 2 HAI and 1 MDRO for the month of June.

Client Service

- Total Patient Days increased with 363 patient days in June 2024 as compared to 342 patient days in May 2024. This represents an average daily census of 12.1. In addition, MRMC Emergency Department provided care to 142 patients in June 2024.
- MRMC Case Management reports 34 Total Admissions for the month of June 2024.
- June 2024 COVID-19 statistics at MRMC: Swabs (0 PCR & 15 Antigen) with 1 Positive.

Mangum Regional Medical Center												
Monthly Census Comparison												
	Jan	Feb	Mar	April	May	June	July	Aug	Sept	Oct	Nov	Dec
Inpatient	30	36	25	20	30	34						
Swing Bed	10	18	10	10	12	19						
Observation	3	1	2	2	2	0						
Emergency Room	175	182	131	125	144	142						
Lab Completed	2377	2439	2004	1832	1961	1982						
Rad Completed	128	199	151	182	165	160						
Ventilator Days	0	0	0	0	0	0						

Preserve Rural Jobs and Culture Development

- Nurse meeting held on June 26, 2024 with great turnout and input from staff.
- MRMC has LPN positions and one CNA position open at this time.
- 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 June 2024

Operations Overview

- Cohesive has signed a new MD to work in Carnegie and Mangum clinic it appears he will be starting in the Mangum clinic location in September.
- We are getting closer to being ready to open the strong minds program.
- We are applying for the grant that was approved last month by the board. You will see an ad in the paper with a notice of an opportunity for a public hearing regarding this grant.
- Patient rounds continue to provide positive feedback from our patients.
- Looking at clinic collections for June we collected a total of \$1,834.61 at time of service.
- The hospital collected \$14,977.55 in copays and collections for the month of June.
- Conversations are ongoing over roof repairs.
- We continue to plan events for staff at the hospital for hospital and clinic staff.

Mangum Board Meeting Financial Reports

June 30, 2024

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
June 30, 2024

	Prior Month	Current Month	Jun-24 Year-to-Date	Mthly Avg Year-to-Date
ADC (Average Daily Census)	10.97	12.07	11.57	11.57
Payer Mix % (Acute):				
MCR	59.18%	74.42%	55.91%	
MCR Mgd Care	36.73%	6.98%	21.41%	
All Others	4.08%	18.60%	22.68%	
Total	100.00%	100.00%	100.00%	
Payer Mix % (SWB):				
MCR	94.85%	79.94%	88.96%	
MCR Mgd Care	3.78%	20.06%	10.82%	
All Others	1.37%	0.00%	0.22%	
Total	100.00%	100.00%	100.00%	
Operating margin	(116,893)	(75,660)	(716,730)	(119,455)
<i>Operating Margin (Current Month vs Mthly Avg)</i>	2,562	43,795		
NPR (Net Patient Revenue)	1,262,501	1,356,114	7,669,080	1,278,180
<i>NPR (Current Month vs Mthly Avg)</i>	(15,679)	77,934		
Operating Expenses	1,388,758	1,441,338	8,493,701	1,415,617
<i>Oper Exp (CM vs Mthly Avg)</i>	(26,859)	25,722		
NPR % of Oper Exp	90.9%	94.1%	90.3%	
Patient Days	340	362	2,106	351
Oper Exp / PPD	\$ 4,085	\$ 3,982	\$ 4,033	
# of Months	1	1	6	
Cash Receipts (rnd)	1,273,007	950,928	7,001,786	1,166,964
<i>Cash Receipts (CM vs Mthly Avg)</i>	106,043	(216,036)		
Cash as a % of NPR (s/b 100% min)	100.8%	70.1%	91.3%	
Calendar Days	31	30	182	
Operating Exp / Day	\$ 44,799	\$ 48,045	\$ 46,669	
Cash - (unrestricted)	1,230,088	966,740	966,740	
Days Cash-On-Hand	27.5	20.1	20.7	
Cash - (including restricted)	1,230,088	966,740	966,740	
Days Cash-On-Hand	27.5	20.1	20.7	
MCR Rec (Pay) - "as stated - but to be adjusted"	(1,555,700)	(1,434,460)		
AP & Accrued Liab	15,221,398	15,272,074		
Accounts Receivable (at net)	978,809	1,135,593		
Per AP aging schedule (incl. accruals)	May-24	Jun-24	Net Change	
Account Payable - Cohesive	13,063,785	13,341,633	277,848	
Account Payable - Other	989,605	886,450	(103,155)	
Total	14,053,390	14,228,083	174,693	
Cohesive Loan	5,148,782	5,117,765	(31,017)	

Mangum Regional Medical Center
Cash Receipts - Cash Disbursements Summary

06/30/24

	Current Month	COVID	Total Less COVID	Year-To-Date	COVID	Year-To-Date Less COVID
Cash Receipts	\$ 950,928	\$ -	\$ 950,928	\$ 7,001,786	\$ -	\$ 7,001,786
Cash Disbursements	\$ (1,216,556)	\$ -	\$ (1,216,556)	\$ (6,981,843)	\$ -	\$ (6,981,843)
NET	\$ (265,628)	\$ -	\$ (265,628)	\$ 19,943	\$ -	\$ 19,943
				0.00		

	Prior Month	COVID	Total Less COVID	Prior Month YTD	COVID	Prior Month YTD Less COVID
Cash Receipts	\$ 1,273,007	\$ -	\$ 1,273,007	\$ 6,050,858	\$ -	\$ 6,050,858
Cash Disbursements	\$ (1,062,762)	\$ -	\$ (1,062,762)	\$ (5,765,286)	\$ -	\$ (5,765,286)
NET	\$ 210,245	\$ -	\$ 210,245	\$ 285,572	\$ -	\$ 285,572



Jul 23, 2024

Board of Directors
Mangum Regional Medical Center

June 2024 Financial Statement Overview

- **Statistics**
 - The average daily census (ADC) for June 2024 was **12.07** - (Year-To-Date **11.57** PY fiscal year end of **11.47**).
 - Year-To-Date Acute payer mix was approximately **77%** MCR/MCR Managed Care combined & lower than the prior fiscal year end of **79%**.
 - Year-To-Date Swing Bed payer mix was **89%** MCR & **11%** MCR Managed Care. For the prior year end those percentages were **90% & 10%**, respectively.

- **Balance Sheet Highlights**
 - The cash balance as of June 31, 2024, inclusive of both operating & reserves, was **\$967K**. This a decrease of **\$263K** from May 31, 2024, balance was primarily due to an increase in disbursements.
 - Days cash on hand, inclusive of reserves, was **20.1** based on June expenses.
 - Net AR increased by **\$157K** from May.
 - Payments of approximately **\$1.217M** were made on AP (prior 3-month avg was **\$1.2M**).
 - Cash receipts were **\$322K** less than in the previous month (**\$951K vs \$1.3M**).
 - The Medicare principal balance decreased by **\$50K** due to ERS loan payments.



- Income Statement Highlights
 - Net patient revenue for June 2024 was **\$1.356M**, which is approximately an increase of **\$94K** over the prior month.
 - Operating expenses, exclusive of interest & depreciation, were **\$1.39M**.
 - 340B revenue was **\$8K** in June, a decrease of **\$1.5K** from the prior month. YTD revenue was **\$95K**. Net profit from this service line YTD is **\$23K**.

- Clinic (RHC) Income Statement Highlights - actual & projected (includes swing bed rounding):
 - Current month average visits per day = **6.595**
 - Projected operating revenues (YTD) = **\$362K**
 - Projected operating expenses (YTD) = **\$751K**
 - Projected operating loss (YTD) = **-\$389K**

MANGUM REGIONAL MEDICAL CENTER

Admissions, Discharges & Days of Care

Fiscal Year 2024

Item 9.

							12/31/2024	12/31/2023
	January	February	March	April	May	June	YTD	YTD
Admissions								
Inpatient	19	18	15	10	18	15	95	178
Swingbed	10	18	10	10	12	18	78	137
Observation	3	1	2	2	2	0	10	21
	32	37	27	22	32	33	183	336
Discharges								
Inpatient	20	17	12	12	18	17	96	178
Swingbed	8	12	8	13	13	14	68	132
Observation	3	1	2	2	2	0	10	21
	31	30	22	27	33	31	174	331
Days of Care								
Inpatient-Medicare	24	38	27	25	29	32	175	356
Inpatient-Other	67	15	17	8	20	11	138	274
Swingbed-Medicare	102	268	383	311	276	255	1,595	3,161
Swingbed-Other	56	31	21	11	15	64	198	340
Observation	4	1	3	3	4	0	15	21
	253	353	451	358	344	362	2,121	4,152
Calendar days	31	29	31	30	31	30	182	365
ADC - (incl OBS)	8.16	12.17	14.55	11.93	11.10	12.07	11.65	11.38
ADC	8.03	12.14	14.45	11.83	10.97	12.07	11.57	11.32
ER	227	237	145	125	150	140	1,024	1,677
Outpatient	106	98	103	127	134	118	686	1,832
RHC	177	176	148	137	123	140	901	1,978

MANGUM REGIONAL MEDICAL CENTER
Comparative Balance Sheet - Unaudited
Fiscal Year 2024

Item 9.

	January	February	March	April	May	June	12/31/23	Variance
Cash And Cash Equivalents	928,483	646,998	809,154	996,013	1,230,088	966,740	80,298	1,149,791
Reserved Funds	-	-	-	-	-	-	812,189	(812,189)
Patient Accounts Receivable, Net	1,029,644	1,482,640	1,457,086	1,296,358	978,809	1,135,593	1,410,015	(431,206)
Due From Medicare	300,000	150,000	150,000	150,000	262,000	333,000	0	262,000
Inventory	255,138	261,348	267,175	265,782	271,231	271,221	259,367	11,864
Prepays And Other Assets	1,866,039	1,838,554	1,801,875	1,782,687	1,837,325	1,789,629	1,897,615	(60,290)
Capital Assets, Net	1,829,169	1,799,080	1,768,991	1,738,903	1,708,814	1,678,726	1,859,246	(150,432)
Total Assets	6,208,472	6,178,619	6,254,282	6,229,743	6,288,268	6,174,908	6,318,729	(30,462)
Accounts Payable	13,278,998	13,580,039	13,938,685	14,065,705	14,328,675	14,379,350	12,876,396	1,452,278
AHSO Related AP	892,724	892,724	892,724	892,724	892,724	892,724	892,724	0
Due To Medicare	2,086,019	1,952,438	1,817,700	1,767,460	1,716,728	1,665,483	2,218,453	(501,725)
Covid Grant Funds	-	-	-	-	-	-	0	0
Due To Cohesive - PPP Loans	-	-	-	-	-	-	0	0
Notes Payable - Cohesive	5,241,832	5,210,815	5,179,799	5,148,782	5,117,765	5,086,748	5,272,849	(155,084)
Notes Payable - Other	30,675	23,247	23,247	23,247	17,948	12,649	38,045	(20,097)
Alliantz Line Of Credit	-	-	-	-	-	-	0	0
Leases Payable	271,991	271,189	270,384	269,576	269,072	268,257	272,789	(3,717)
Total Liabilities	21,802,238	21,930,451	22,122,538	22,167,493	22,342,911	22,305,212	21,571,256	771,656
Net Assets	(15,593,766)	(15,751,832)	(15,868,256)	(15,937,750)	(16,054,644)	(16,130,304)	(15,252,526)	(802,117)
Total Liabilities and Net Assets	6,208,472	6,178,619	6,254,282	6,229,743	6,288,268	6,174,908	6,318,729	(30,462)

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

2022				2023			2024		
Month	Receipts	Stimulus Funds	Disbursements	Month	Receipts	Disbursements	Month	Receipts	Disbursements
Jan-22	2,163,583		1,435,699	Jan-23	1,290,109	1,664,281	Jan-24	1,187,504	1,150,522
Feb-22	1,344,463	254,626	1,285,377	Feb-23	1,506,708	1,809,690	Feb-24	708,816	995,157
Mar-22	789,800		1,756,782	Mar-23	1,915,435	1,109,683	Mar-24	1,236,158	1,073,824
Apr-22	1,042,122		1,244,741	Apr-23	2,005,665	1,365,533	Apr-24	1,645,373	1,483,022
May-22	898,311		1,448,564	May-23	1,436,542	2,237,818	May-24	1,273,007	1,062,762
Jun-22	1,147,564		1,225,070	Jun-23	1,777,525	1,506,459	Jun-24	950,928	1,216,556
Jul-22	892,142		979,914	Jul-23	1,140,141	1,508,702	Jul-24		
Aug-22	890,601		1,035,539	Aug-23	1,600,786	1,352,905	Aug-24		
Sep-22	2,225,347		1,335,451	Sep-23	1,490,569	1,295,680	Sep-24		
Oct-22	1,153,073		1,233,904	Oct-23	1,211,980	1,345,813	Oct-24		
Nov-22	935,865		1,476,384	Nov-23	985,475	1,355,224	Nov-24		
Dec-22	1,746,862		1,073,632	Dec-23	929,990	1,191,570	Dec-24		
	<u>15,229,733</u>	254,626	<u>15,531,057</u>		<u>17,290,925</u>	<u>17,743,359</u>		<u>7,001,786</u>	<u>6,981,843</u>
Subtotal FY 2022	<u>15,484,359</u>			Subtotal FY 2023	<u>17,290,925</u>		Subtotal FY 2024	<u>7,001,786</u>	

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

	Original Balance	Balance as of 06/30/24	Total Interest Paid as of 06/30/24
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)	-	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)	-	-
<i>FY21 MCR pay (rec) estimate</i>	(1,631,036.00)	-	-
<i>FY22 MCR pay (rec) estimate</i>	(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	78,762.51	5,422.56
<i>FY23 (8-month IRR) L4315599</i>	1,918,398.00	1,586,720.98	109,242.02
<i>FY23 MCR pay (rec) remaining estimate</i>	-	-	-
<i>FY24 MCR pay (rec) estimate</i>	-	(333,000.00)	-
Total	7,009,696.31	1,332,483.49	1,307,177.34

Mangum Regional Medical Center
Statement of Revenue and Expense
For The Month and Year To Date Ended June 30, 2024
Unaudited

MTD					YTD			
Actual	Budget	Variance	% Change		Actual	Budget	Variance	% Change
253,385	255,404	(2,019)	-1%	Inpatient revenue	1,887,290	1,537,976	349,315	23%
1,563,284	1,153,013	410,271	36%	Swing Bed revenue	8,216,251	7,003,338	1,212,914	17%
538,539	537,370	1,169	0%	Outpatient revenue	3,917,276	3,489,434	427,842	12%
202,400	152,104	50,296	33%	Professional revenue	1,284,571	976,035	308,537	32%
<u>2,557,609</u>	<u>2,097,891</u>	<u>459,717</u>	<u>22%</u>	Total patient revenue	<u>15,305,389</u>	<u>13,006,782</u>	<u>2,298,607</u>	<u>18%</u>
1,268,964	669,835	599,129	89%	Contractual adjustments	8,625,636	4,359,708	4,265,927	98%
(71,000)	-	(71,000)	#DIV/0!	Contractual adjustments: MCR Settlement	(333,000)	-	(333,000)	#DIV/0!
3,530	75,595	(72,064)	-95%	Bad debts	(656,326)	472,569	(1,128,895)	-239%
<u>1,201,494</u>	<u>745,429</u>	<u>456,065</u>	<u>61%</u>	Total deductions from revenue	<u>7,636,309</u>	<u>4,832,277</u>	<u>2,804,032</u>	<u>58%</u>
1,356,114	1,352,462	3,653	0%	Net patient revenue	7,669,080	8,174,505	(505,426)	-6%
1,311	3,093	(1,782)	-58%	Other operating revenue	13,056	18,567	(5,511)	-30%
8,253	12,607	(4,354)	-35%	340B REVENUES	94,835	75,641	19,194	25%
<u>1,365,678</u>	<u>1,368,161</u>	<u>(2,483)</u>	<u>0%</u>	Total operating revenue	<u>7,776,971</u>	<u>8,268,714</u>	<u>(491,742)</u>	<u>-6%</u>
				Expenses				
359,502	389,736	(30,234)	-8%	Salaries and benefits	2,631,287	2,338,732	292,555	13%
94,261	143,994	(49,734)	-35%	Professional Fees	379,418	863,967	(484,549)	-56%
390,056	349,581	40,475	12%	Contract labor	2,010,672	2,142,611	(131,939)	-6%
158,021	141,413	16,607	12%	Purchased/Contract services	745,576	848,698	(103,122)	-12%
225,000	225,000	-	0%	Management expense	1,350,000	1,350,000	-	0%
97,324	95,038	2,286	2%	Supplies expense	552,883	580,539	(27,656)	-5%
18,683	30,300	(11,617)	-38%	Rental expense	156,806	181,802	(24,996)	-14%
11,211	18,358	(7,147)	-39%	Utilities	90,694	110,147	(19,454)	-18%
349	1,085	(736)	-68%	Travel & Meals	5,768	6,510	(743)	-11%
9,414	12,130	(2,716)	-22%	Repairs and Maintenance	62,120	72,780	(10,661)	-15%
8,901	11,415	(2,514)	-22%	Insurance expense	73,476	68,489	4,987	7%
12,932	20,773	(7,842)	-38%	Other Expense	66,414	124,640	(58,225)	-47%
8,124	8,135	(11)	0%	340B EXPENSES	71,479	48,915	22,563	46%
<u>1,393,776</u>	<u>1,446,959</u>	<u>(53,183)</u>	<u>-4%</u>	Total expense	<u>8,196,592</u>	<u>8,737,831</u>	<u>(541,239)</u>	<u>-6%</u>
<u>(28,098)</u>	<u>(78,798)</u>	<u>50,700</u>	<u>-64%</u>	EBIDA	<u>(419,621)</u>	<u>(469,118)</u>	<u>49,497</u>	<u>-11%</u>
<u>-2.1%</u>	<u>-5.8%</u>	<u>3.70%</u>		EBIDA as percent of net revenue	<u>-5.4%</u>	<u>-5.7%</u>	<u>0.28%</u>	
17,474	25,451	(7,977)	-31%	Interest	116,577	164,183	(47,606)	-29%
30,089	49,698	(19,609)	-39%	Depreciation	180,532	298,188	(117,656)	-39%
<u>(75,660)</u>	<u>(153,946)</u>	<u>78,286</u>	<u>-51%</u>	Operating margin	<u>(716,730)</u>	<u>(931,489)</u>	<u>214,759</u>	<u>-23%</u>
-	-	-		Other	-	-	-	
-	-	-		Total other nonoperating income	-	-	-	
<u>(75,660)</u>	<u>(153,946)</u>	<u>78,286</u>	<u>-51%</u>	Excess (Deficiency) of Revenue Over Expenses	<u>(716,730)</u>	<u>(931,489)</u>	<u>214,759</u>	<u>-23%</u>
<u>-5.54%</u>	<u>-11.25%</u>	<u>5.71%</u>		Operating Margin %	<u>-9.22%</u>	<u>-11.27%</u>	<u>2.05%</u>	

MANGUM REGIONAL MEDICAL CENTER
Statement of Revenue and Expense Trend - Unaudited
Fiscal Year 2024

Item 9.

	January	February	March	April	May	June	July	August	September	October	November	December	YTD
Inpatient revenue	553,917	328,884	236,205	196,935	317,963	253,385							1,887,290
Swing Bed revenue	691,403	1,305,865	1,741,728	1,452,094	1,461,877	1,563,284							8,216,251
Outpatient revenue	745,496	798,546	552,340	675,619	606,736	538,539							3,917,276
Professional revenue	191,359	268,737	196,841	210,516	214,718	202,400							1,284,571
Total patient revenue	2,182,175	2,702,032	2,727,115	2,535,164	2,601,295	2,557,609	-	-	-	-	-	-	15,305,389
Contractual adjustments	1,194,669	1,354,471	1,363,095	1,126,715	2,317,722	1,268,964							8,625,636
Contractual adjustments: MCR Settlement	(300,000)	150,000	-	-	(112,000)	(71,000)							(333,000)
Bad debts	66,677	56,019	13,598	70,776	(866,928)	3,530							(656,326)
Total deductions from revenue	961,346	1,560,491	1,376,693	1,197,491	1,338,794	1,201,494	-	-	-	-	-	-	7,636,309
Net patient revenue	1,220,829	1,141,541	1,350,421	1,337,672	1,262,501	1,356,114	0	0	0	0	0	0	7,669,080
Other operating revenue	2,507	1,439	1,671	3,522	2,606	1,311							13,056
340B REVENUES	37,399	17,167	14,616	10,643	6,757	8,253							94,835
Total operating revenue	1,260,735	1,160,148	1,366,708	1,351,837	1,271,864	1,365,678	0	0	0	0	0	0	7,776,971
	84.7%	86.6%	91.1%	94.1%	90.9%	94.1%	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	90.3%
Expenses													
Salaries and benefits	411,278	535,269	472,469	436,412	416,357	359,502							2,631,287
Professional Fees	158,386	(37,292)	62,832	64,972	36,261	94,261							379,418
Contract labor	298,317	291,650	364,102	320,557	345,990	390,056							2,010,672
Purchased/Contract services	91,358	88,301	119,963	141,455	146,479	158,021							745,576
Management expense	225,000	225,000	225,000	225,000	225,000	225,000							1,350,000
Supplies expense	88,273	75,565	103,550	86,191	101,981	97,324							552,883
Rental expense	33,505	28,767	26,139	36,564	13,147	18,683							156,806
Utilities	25,813	15,200	12,810	14,755	10,905	11,211							90,694
Travel & Meals	-	1,802	1,841	1,106	670	349							5,768
Repairs and Maintenance	12,246	10,628	10,277	11,356	8,198	9,414							62,120
Insurance expense	12,672	12,896	12,677	12,749	13,582	8,901							73,476
Other	10,525	8,288	11,834	11,225	11,611	12,932							66,414
340B EXPENSES	21,375	11,198	9,880	10,402	10,500	8,124							71,479
Total expense	1,388,748	1,267,272	1,433,374	1,372,743	1,340,679	1,393,776	-	-	-	-	-	-	8,196,592
EBIDA	\$ (128,013)	\$ (107,125)	\$ (66,665)	\$ (20,905)	\$ (68,815)	\$ (28,098)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ (419,621)
EBIDA as percent of net revenue	-10.2%	-9.2%	-4.9%	-1.5%	-5.4%	-2.1%	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	-5.4%
Interest	22,090	20,853	19,670	18,500	17,990	17,474							116,577
Depreciation	30,089	30,089	30,089	30,089	30,089	30,089							180,532
Operating margin	\$ (180,192)	\$ (158,066)	\$ (116,424)	\$ (69,494)	\$ (116,893)	\$ (75,660)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ (716,730)
Other	-	-	-	-	-	-							-
Total other nonoperating income	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Excess (Deficiency) of Revenue Over Expenses	(180,192)	(158,066)	(116,424)	(69,494)	(116,893)	(75,660)	0	0	0	0	0	0	(716,730)
Operating Margin % (excluding other misc. revenue)	-14.29%	-13.62%	-8.52%	-5.14%	-9.19%	-5.54%	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	-9.22%

	6/30/2024
On-Site Visits -->	843
On-Site Visit / Bus Day -->	6.59

	"Annualized"
On-Site Visits -->	1,686
On-Site Visit / Bus Day -->	6.51

Mangum Family Clinic

One Month Ended 06/30/2024

Description	YTD FS Per General Ledger	Eliminate Rev Deduct & Other Inc	Adj Rev Deduct to RHC Calc	Cost Report Allocations	6	FY 2024
					RHC Financial Statements	"Annualized" RHC Financial Statements
Gross Patient Revenue	103,058	-	-	-	103,058	206,116
Less: Revenue deductions	81,360	(81,360)	78,206	-	78,206	156,412
Net Patient Revenue	184,418	(81,360)	78,206	-	181,264	362,528
Other Income (if any)	1,449	(1,449)	-	-	-	-
Operating revenue	185,867	(82,809)	78,206	-	181,264	362,528
Operating Expenses:						
Salaries	90,129	-	-	-	90,129	180,258
Benefits	9,154	-	-	-	9,154	18,309
Prof Fees	750	-	-	20,761	21,511	43,022
Contract Labor	11,520	-	-	-	11,520	23,040
Purch Serv	34,183	-	-	-	34,183	68,366
Supplies	7,234	-	-	-	7,234	14,467
Rent	14,793	-	-	-	14,793	29,586
Utilities	4,147	-	-	-	4,147	8,293
Repairs	418	-	-	-	418	836
Other	923	-	-	-	923	1,846
Insurance	1,352	-	-	-	1,352	2,705
Travels & Meals	774	-	-	-	774	1,548
Management Fee Direct Exp	-	-	-	69,242	69,242	138,484
Critical Access Hospital Overhead Allocation (a)	-	-	-	110,468	110,468	220,936
Total Operating Expenses	175,378	-	-	200,471	375,849	751,696
Net Income (loss)	10,489	(82,809)	78,206	(200,471)	(194,584)	(389,168)

MGMT Fee Allocation est. 2023	1 months	11,540
IP Rounding allocation based on 8/31/22 IRR estimate	8 months	27,681
CAH Overhead Allocation - from Chris based on last filed cost report ----->	12 months	220,936
Total allocation ----->		260,157

Mangum RHC Reimbursement Analysis

4

(a) Will experience increased volumes from swing-bed rounding in FY2023

6.8

7

Payer	VOLUMES: Current Month			
	Clinic (On-Site)	Telehealth	Swing-Bed (a)	TOTAL
MCR	37		4	41
MCR Managed Care	4			4
Medicaid	33			33
BCBS	17			17
Commercial	40			40
Self-Pay	5			5
Other				-
	136	-	4	140

Payer	VOLUMES: Year-To-Date 06-30-24			
	Clinic (On-Site)	Telehealth	Swing-Bed (a)	TOTAL
MCR	191		38	229
MCR Managed Care	34		17	51
Medicaid	272			272
BCBS	138			138
Commercial	171			171
Self-Pay	37		3	40
Other	-			-
	843	-	58	901

Payer	Projected Reimbursement Rate			
MCR	\$ 282.62	\$ -	\$ 282.62	
MCR Managed Care	\$ 282.62	\$ -	\$ 282.62	338.62
Medicaid	\$ 282.62	\$ -	\$ 282.62	
BCBS	\$ 73.00		\$ -	51.51
Commercial	\$ 73.00		\$ -	72.45
Self-Pay	\$ 73.00		\$ -	11.93
Other	\$ 73.00		\$ -	135.7

Payer	Projected Reimbursement			
MCR	53,980	-	10,740	64,720
MCR Managed Care	9,609	-	4,805	14,414
Medicaid	76,873	-	-	76,873
BCBS	10,074			10,074
Commercial	12,483	-	-	12,483
Self-Pay	2,701	-	-	2,701
Other	-	-	-	-
	\$ 165,720	\$ -	\$ 15,544	\$ 181,264

VENDOR NAME	DESCRIPTION	0-30 Days	31-60 Days	61-90 Days	OVER 90 Days	6/30/2024	5/31/2024	4/30/2024	3/31/2024	2/29/2024	1/31/2024
ALCO SALES & SERVICE CO	Patient Supplies	-	-	-	-	-	-	-	-	-	-
AMERICAN HEART ASSOCIATION INC	Supplies	-	-	-	-	-	-	-	-	-	-
AMERICAN PROFICIENCY INSTITUTE	Lab Supplies	-	-	-	-	-	-	-	-	-	-
ANESTHESIA SERVICE INC	Patient Supplies	1,485.00	-	-	-	1,485.00	525.00	-	-	-	-
APEX MEDICAL GAS SYSTEMS, INC	Supplies	900.00	-	-	-	900.00	-	-	-	-	-
ARAMARK	Linen Services	-	-	-	-	-	-	6,099.60	3,049.80	6,099.60	-
ASPEN INSPECTION SERVICES	Repairs/maintenance	-	-	-	-	-	-	-	-	-	-
AT&T	Fax Service	-	171.47	-	-	171.47	-	1,888.89	-	-	-
AVANAN, INC.	COVID Capital	-	-	-	16,800.00	16,800.00	16,800.00	16,800.00	16,800.00	16,800.00	16,800.00
BARRY DAVENPORT	1099 Provider	4,680.00	-	-	-	4,680.00	4,680.00	-	-	-	-
BIO-RAD LABORATORIES INC	Lab Supplies	649.74	-	-	-	649.74	2,211.74	-	-	-	649.74
BRIGGS HEALTHCARE	Supplies	-	-	-	-	-	-	-	-	-	-
CARNEGIE EMS	Patient Transport Svs	5,700.00	5,610.00	-	-	11,310.00	5,610.00	-	-	-	-
CARNEGIE TRI-COUNTY MUN. HOSP	Pharmacy Supplies	6,897.10	-	-	-	6,897.10	-	78.62	-	-	-
CARRIER CORP	Shipping	-	-	-	-	-	-	1,880.00	-	-	-
CDW-G LLC	Supplies	-	-	-	-	-	-	-	-	3,059.84	3,059.84
CITY OF MANGUM	Utilities	6,961.37	-	-	-	6,961.37	5,769.79	300.00	-	-	-
CLIA LABORATORY PROGRAM	Lab Services	-	-	-	-	-	-	-	-	-	3,124.00
CliftonLarsonAllen LLP	Audit firm	-	-	-	-	-	-	-	-	-	-
COHESIVE HEALTHCARE MGMT	Mgmt Fees	453,420.00	1,518.48	225,112.50	2,030,849.98	2,710,900.96	2,514,615.11	2,575,527.57	2,350,415.07	2,124,687.04	1,899,474.64
COHESIVE HEALTHCARE RESOURCES	Payroll	245,504.28	643,161.27	429,346.87	4,546,204.17	5,864,216.59	6,212,888.40	5,745,727.13	5,667,380.26	5,803,811.23	5,270,642.14
COHESIVE MEDIRYDE LLC	Patient Transportation Service	(1,174.25)	-	-	-	(1,174.25)	3,988.75	-	395.25	-	2,905.75
COHESIVE STAFFING SOLUTIONS	Agency Staffing Service	435,397.33	627,691.21	263,669.39	3,440,931.68	4,767,689.61	4,332,292.28	4,102,526.35	4,162,840.20	4,260,282.33	4,033,723.20
COMMERCIAL MEDICAL ELECTRONICS	Quarterly Maintenance	-	-	-	-	-	-	-	-	-	-
CORRY KENDALL, ATTORNEY AT LAW	Legal Fees	-	-	-	-	-	19,980.95	19,980.95	19,980.95	21,980.95	19,980.95
CPSI	EHR Software	-	-	-	-	-	-	-	-	-	-
CURBELL MEDICAL PRODUCTS INC	Supplies	-	-	-	-	-	-	-	-	-	-
DELL FINANCIAL SERVICES LLC	Server Lease	-	-	-	-	-	-	-	-	-	-
DIAGNOSTIC IMAGING ASSOCIATES	Radiology Purch Svs	2,150.00	2,150.00	-	-	4,300.00	2,150.00	2,150.00	2,150.00	-	-
DOERNER SAUNDERS DANIEL ANDERS	Legal Fees	-	-	-	358,558.16	358,558.16	358,558.16	358,558.16	358,558.16	358,558.16	358,558.16
DR W. GREGORY MORGAN III	1099 Provider	-	-	-	-	-	-	-	-	-	-
DYNAMIC ACCESS	Vascular Consultant	3,000.00	875.00	-	-	3,875.00	2,500.00	-	-	2,550.00	-
eCLINICAL WORKS, LLC	RHC EHR	-	-	-	-	-	-	42.19	-	-	-
EMD MILLIPORE CORPORATION	Lab Supplies	-	-	-	-	-	-	-	-	-	-
F1 INFORMATION TECHNOLOGIES IN	IT Support Services	-	-	-	-	-	-	-	-	-	-
FEDEX	Shipping	-	85.24	-	-	85.24	109.42	42.89	-	-	-
FFF ENTERPRISES INC	Pharmacy Supplies	-	-	-	-	-	-	-	-	-	-
FIRE EXTINGUISHER SALES & SERV	Maintenance Supplies	-	-	-	-	-	-	685.00	-	-	-
FIRSTCARE MEDICAL SERVICES, PC	1099 Provider	-	11,910.44	-	-	11,910.44	14,679.66	-	-	-	-
FORVIS LLP	Finance Purch Svs(Formerly BKD)	-	-	-	-	-	782.25	-	-	-	-
FOX BUILDING SUPPLY	Repairs/maintenance	-	-	-	-	-	-	105.83	-	-	(151.19)
GEORGE BROS TERMITES & PEST CON	Pest Control Service	560.00	-	-	-	560.00	160.00	60.00	160.00	160.00	-
GLOBAL EQUIPMENT COMPANY INC.	Patient Supplies	-	-	-	-	-	-	-	-	-	-
GRAINGER	Maintenance Supplies	245.97	662.06	-	-	908.03	309.24	1,117.58	871.76	-	113.79
GREER COUNTY CHAMBER OF	Advertising	-	-	-	-	-	-	-	-	-	-
GREER COUNTY TREASURER	Insurance	-	-	-	-	-	-	-	-	5,650.00	5,650.00
HAC INC	Dietary Supplies	116.81	223.50	-	-	340.31	257.96	13.05	-	-	-
HEALTH CARE LOGISTICS	Pharmacy Supplies	-	-	-	-	-	-	-	-	-	-
HEARTLAND PATHOLOGY CONSULTANT	Lab Consultant	1,050.00	1,109.69	-	-	2,159.69	1,050.00	-	-	-	-
HENRY SCHEIN	Lab Supplies	-	-	-	-	-	-	-	-	1,755.65	-
HEWLETT-PACKARD FINANCIAL SERV	Computer Services	-	-	-	-	-	307.10	614.20	614.20	614.20	307.10
HILL-ROM COMPANY, INC	Rental Equipment	-	-	-	-	-	-	-	-	-	-
HOBART SERVICE	Repairs/maintenance	-	-	-	-	-	-	-	-	-	-
ICU MEDICAL SALES INC.	Supplies	-	-	-	-	-	-	-	-	-	-
HSI	Materials Purch svs	-	-	-	-	-	-	-	-	-	-
IMPERIAL, LLC.-LAWTON	Dietary Purchased Service	-	-	-	-	-	-	-	-	-	-
INQUIRELLC	RHC purch svs	-	-	-	225.00	225.00	225.00	225.00	225.00	225.00	225.00
INSIGHT DIRECT USA INC.	IT Minor Equipment	-	-	-	-	-	-	-	-	-	-
JANUS SUPPLY CO	Housekeeping Supplies, based in Altus	907.10	-	-	-	907.10	2,210.83	799.19	606.22	611.04	-

VENDOR NAME	DESCRIPTION	0-30 Days	31-60 Days	61-90 Days	OVER 90 Days	6/30/2024	5/31/2024	4/30/2024	3/31/2024	2/29/2024	1/31/2024
JIMALL & KANISHA' LOFTIS	Rent House	-	-	-	(850.00)	(850.00)	(850.00)	-	-	-	-
KCI USA	Rental Equipment	-	-	-	-	-	2,271.43	-	-	1,527.24	-
KING GUIDE PUBLICATIONS INC	Advertising	-	-	-	-	-	-	-	-	-	-
LABCORP	Lab purch svcs	-	-	-	-	-	1,750.84	-	-	2,430.86	-
LAMPTON WELDING SUPPLY	Patient Supplies	-	1,275.29	-	-	1,275.29	1,297.69	-	-	-	-
LANGUAGE LINE SERVICES INC	Translation service	130.00	130.00	-	-	260.00	260.00	-	-	-	-
LG PRINT CO	Advertising	-	75.00	-	-	75.00	-	115.00	-	-	-
LOCKE SUPPLY	Plant Ops supplies	-	-	-	-	-	-	-	-	-	-
MANGUM STAR NEWS	Advertising	-	294.00	-	-	294.00	294.00	-	-	60.00	-
MARK CHAPMAN	Employee Reimbursement	-	-	-	-	-	-	-	-	-	-
MCKESSON / PSS - DALLAS	Patient Care/Lab Supplies	15,901.64	-	-	-	15,901.64	10,489.72	9,090.51	1,079.72	1,648.61	771.17
MCKESSON - 340 B	Pharmacy Supplies	-	948.42	-	-	948.42	373.34	776.00	-	-	-
MEDLINE INDUSTRIES	Patient Care/Lab Supplies	16,502.02	6,892.46	-	-	23,394.48	17,219.47	17,135.20	15,372.46	5,697.49	-
MYHEALTH ACCESS NETWORK, INC	Compliance purch svcs	-	-	-	-	-	-	-	-	-	-
NATHAN ANDREW PERRY	Biomed Services	-	-	-	-	-	-	-	-	1,750.00	-
NATIONAL RECALL ALERT CENTER	Safety and Compliance	-	-	-	-	-	-	-	-	-	-
NEXTIVA, INC.	Phone Svcs	-	-	-	-	-	-	-	-	2,544.98	2,544.98
NUANCE COMMUNICATIONS INC	RHC purch svcs	-	-	-	-	-	325.00	-	-	-	-
OFMQ	Quality purch svcs	-	-	-	-	-	-	-	350.00	350.00	-
OHERI	Education/Training	-	-	-	-	-	-	-	-	-	-
OKLAHOMA BLOOD INSTITUTE	Blood Bank	5,878.30	-	-	-	5,878.30	-	-	-	-	-
OPTUM	Pharmacy Supplies	-	-	-	-	-	-	-	-	-	-
ORGANOGENESIS INC	Patient Care/Lab Supplies	-	-	-	-	-	450.00	255.00	-	-	-
ORTHO-CLINICAL DIAGNOSTICS INC	Lab purch svcs	-	-	-	-	-	-	-	-	-	-
PARA REV LOCKBOX	CDM purch svcs	-	1,959.00	-	-	1,959.00	1,959.00	-	-	-	-
PHARMA FORCE GROUP LLC	340B purch svcs	-	1,172.50	-	-	1,172.50	1,156.48	1,158.37	-	-	-
PHARMACY CONSULTANTS, INC.	PHARMACY CONSULTANTS, INC.	2,600.00	-	-	-	2,600.00	2,600.00	5,949.92	2,600.00	-	-
PHILADELPHIA INSURANCE COMPANY	OHA Insurance	2,573.50	-	-	-	2,573.50	-	-	-	2,321.00	-
PHILIPS HEALTHCARE	Supplies	-	-	-	-	-	-	-	-	-	-
PIPETTE COM	Lab maintenance	-	-	-	-	-	-	-	-	-	-
PITNEY BOWES GLOBAL FINANCIAL	Postage rental	-	-	-	-	-	-	-	-	-	-
PORT53 TECHNOLOGIES, INC.	Software license	-	-	-	-	-	-	-	-	-	-
PRESS GANEY ASSOCIATES, INC	Purchased Service	738.40	738.48	-	-	1,476.88	738.48	-	-	738.48	-
PUCKETT DISCOUNT PHARMACY	Pharmacy Supplies	-	62.80	-	-	62.80	62.80	-	-	-	-
PURCHASE POWER	Postage Fees	200.00	-	-	-	200.00	-	-	-	-	-
RADIATION CONSULTANTS	Radiology maintenance	-	-	-	-	-	-	-	-	-	-
RESPIRATORY MAINTENANCE INC	Repairs/maintenance	-	-	-	-	-	-	-	-	-	-
REYES ELECTRIC LLC	COVID Capital	-	-	-	10,000.00	10,000.00	12,000.00	12,000.00	14,000.00	16,000.00	-
RUSHMORE TRANSPORT LLC	Patient Transportation Service	580.98	-	-	-	580.98	-	-	-	503.25	-
RUSSELL ELECTRIC & SECURITY	Repair and Maintenance	-	-	-	-	-	-	-	-	600.00	-
SBM MOBILE PRACTICE, INC	1099 Provider	-	-	-	-	-	-	-	-	-	-
SCHAPEN LLC	Clinic Rent	-	-	-	(1,750.00)	(1,750.00)	(1,750.00)	-	-	-	-
SECURITY CHECK	Security	-	-	-	-	-	-	-	-	-	-
SHERWIN-WILLIAMS	Supplies	-	-	-	(11.78)	(11.78)	(11.78)	(11.78)	(11.78)	(11.78)	(11.78)
SHRED-IT USA LLC	Secure Doc disposal service	-	-	-	-	-	-	-	-	-	-
SIEMENS HEALTHCARE DIAGNOSTICS	Service Contract	-	-	-	-	-	-	-	-	-	-
SIZEWISE	Rental Equipment	-	-	-	-	-	-	-	-	-	-
SMAART MEDICAL SYSTEMS INC	Radiology interface/Radiologist provider	1,735.00	-	-	-	1,735.00	3,470.00	-	-	-	-
SOMSS LLC	1099 Provider	-	13,200.00	-	-	13,200.00	21,600.00	-	-	-	-
SPACELABS HEALTHCARE LLC	Telemetry Supplies	2,570.42	-	-	-	2,570.42	-	-	-	-	-
SPARKLIGHT BUSINESS	Cable service	-	520.94	-	-	520.94	-	-	-	-	-
STANDLEY SYSTEMS LLC	Printer lease	-	-	-	-	-	2,150.57	-	2,150.57	2,150.57	-
STAPLES ADVANTAGE	Office Supplies	717.63	722.14	-	-	1,439.77	458.18	342.42	1,677.45	-	-
STERICYCLE INC	Waste Disposal Service	1,550.80	-	-	-	1,550.80	1,539.68	-	896.53	1,961.17	-
STRYKER INSTRUMENTS	Patient Supplies	-	-	-	-	-	-	-	-	-	-
SUMMIT UTILITIES	Utilities	793.48	-	-	-	793.48	810.24	1,422.28	-	238.63	-
TECUMSEH OXYGEN & MEDICAL SUPP	Patient Supplies	-	-	-	-	-	-	-	-	-	-
TIGER ATHLETIC BOOSTERS	Advertising	500.00	-	-	-	500.00	-	-	-	-	-
TOUCHPOINT MEDICAL, INC	Med Dispense Monitor Support	-	-	-	3,285.00	3,285.00	3,285.00	3,285.00	3,285.00	3,285.00	3,285.00

VENDOR NAME	DESCRIPTION	0-30 Days	31-60 Days	61-90 Days	OVER 90 Days	6/30/2024	5/31/2024	4/30/2024	3/31/2024	2/29/2024	1/31/2024
TRIOSE INC	Freight	355.79	30.51	-	-	386.30	1,403.47	650.87	24.86	-	-
TRS MANAGED SERVICES	Agency Staffing-old	-	-	-	-	-	-	6,604.26	17,679.26	27,400.26	31,495.26
ULINE	Patient Supplies	917.40	-	-	-	917.40	1,103.72	628.60	1,831.50	-	-
ULTRA-CHEM INC	Housekeeping Supplies	-	-	-	-	-	-	-	-	-	-
US FOODSERVICE-OKLAHOMA CITY	Food and supplies	630.34	1,651.07	-	-	2,281.41	1,820.10	-	-	-	-
US MED-EQUIP LLC	Swing bed eq rental	-	-	-	-	-	1,169.20	-	-	-	-
VITAL SYSTEMS OF OKLAHOMA, INC	Swing bed purch service	-	-	-	-	-	-	-	1,600.00	4,855.00	7,255.00
WELCH ALLYN, INC.	Supplies	-	-	-	-	-	-	-	-	-	-
WORTH HYDROCHEM	semi-annual water treatment	-	-	-	-	-	-	-	-	-	-
BLUTH FAMILY MEDICINE, LLC	1099 Provider	-	-	-	-	-	750.00	-	-	-	-
CARDINAL HEALTH 110, LLC	Patient Supplies	-	6,123.60	-	-	6,123.60	5,478.38	-	-	-	-
CUSTOM MEDICAL SOLUTIONS	Equipment Rental Agreement	(3,564.00)	-	-	-	(3,564.00)	5,671.00	-	-	-	-
DATA CENTER WAREHOUSE LLC	Equipment Rental Agreement	-	-	-	-	-	1,115.75	-	-	-	-
DIRECTV	Cable service	-	288.30	-	-	288.30	294.55	-	-	-	-
SOUTHWEST TAB & COMMISSIONING	Repairs/maintenance	-	-	-	-	-	1,800.00	-	-	-	-
VESTIS	Housekeeping Service	6,494.70	6,494.70	-	-	12,989.40	9,149.40	-	-	-	-
ZOLL MEDICAL CORP.	Patient Supplies	-	-	-	-	-	-	2,316.41	-	-	-
BADGE BUDDIES LLC	Office Supplies	53.46	266.68	-	-	320.14	-	-	-	-	-
CARLOS MENDOZA	Education/Training	2,900.00	-	-	-	2,900.00	-	-	-	-	-
CULLIGAN WATER CONDITIONING	Equipment Rental Agreement	-	11.50	-	-	11.50	-	-	-	-	-
DELL MARKETING L.P	Server Lease	-	1,155.63	-	-	1,155.63	-	-	-	-	-
DP MEDICAL SERVICES	Rental	1,750.00	-	-	-	1,750.00	-	-	-	-	-
FEDEX FREIGHT	Shipping	-	141.00	-	-	141.00	-	-	-	-	-
FREEBORN DYSPHAGIA ASSOC LLC	1099 Provider	-	1,100.00	-	-	1,100.00	-	-	-	-	-
PYA, P.C.	Audit firm	22,000.00	-	-	-	22,000.00	-	-	-	-	-
Grand Total		1,252,960.31	1,340,422.38	918,128.76	10,404,242.21	13,915,753.66	13,616,367.35	12,896,940.26	12,646,582.44	12,689,575.29	11,653,723.26
			Reconciling Items:		Conversion Variance	13,340.32	13,340.32	13,340.32	13,340.32	13,340.32	13,340.32
					AP Control	14,808,477.66	14,508,545.79	14,666,060.65	14,880,461.29	14,060,308.08	13,279,936.59
					Accrued AP	312,328.90	437,567.79	292,368.25	(49,052.63)	433,248.93	730,737.67
AHSO Related AP	Description	5/31/2024			AHSO Related AP	(892,723.76)	(892,723.76)	(892,723.76)	(892,723.76)	(892,723.76)	(892,723.76)
ADP INC	QMI Payroll Service Provider	4,276.42			TOTAL AP	14,228,082.80	14,053,389.82	14,065,705.14	13,938,684.90	13,600,833.25	13,117,950.50
ADP SCREENING AND SELECTION	QMI Payroll Service Provider	1,120.00									
ALLIANCE HEALTH SOUTHWEST OKLA	Old Mgmt Fees	698,000.00									
AMERICAN HEALTH TECH	Rental Equipment-Old	22,025.36									
C.R. BARD INC.	Surgery Supplies-Old	3,338.95									
COMPLIANCE CONSULTANTS	Lab Consultant-Old	1,000.00									
ELISE ALDUINO	1099 AHSO consultant	12,000.00									
HEADRICK OUTDOOR MEDIA INC	AHSO Advertising	25,650.00									
HERC RENTALS-DO NOT USE	Old Rental Service	7,653.03									
IMEDICAL INC	Surgery Supplies-Old	1,008.29									
MEDSURG CONSULTING LLC	Equipment Rental Agreement	98,670.36									
MICROSURGICAL MST	Surgery Supplies-Old	2,233.80									
MID-AMERICA SURGICAL SYSTEMS	Surgery Supplies-Old	3,607.60									
NINJA RMM	IT Service-Old	2,625.00									
QUARTZ MOUNTAIN RESORT	Alliance Travel	9,514.95									
SUBTOTAL-AHSO Related AP		892,723.76									

Hospital Vendor Contract Summary Sheet

1. Existing Vendor New Vendor
2. **Name of Contract: Mangum Sports KHIM 97.7**
3. **Contract Parties: Classic Hits KHIM97.7 /MRMC**
4. **Contract Type Services: Marketing**
5. **Impacted Hospital Departments: Hospital**
6. **Contract Summary:** The hospital will get recognition during games and 6 commercials every week on 97.7.
7. **Cost: \$110.00/month**
8. **Prior Cost: 0**
9. **Term:** August 2024-July 2025
10. **Termination Clause: None**



Mangum Sports

2024-2025 Booster



Standard Package:

- One (1) - :30 commercial in every game.
 - Your business name in "Live" mentions during games.
 - Your business listed as sponsor in weekly game promos.
- 6 commercials every week on 97.7 to promote your business.

Level billing monthly of just \$110 per Month

August 2024 thru July 2025

***Yearly contract required**

Business Name

Authorized Signature

Date

****Email Address**



*Noncancellable
**Invoices will be emailed

Hospital Vendor Contract Summary Sheet

1. Existing Vendor New Vendor
2. **Name of Contract: Amerisource Bergen**
3. **Contract Parties: Amerisource Bergen/MRMC**
4. **Contract Type Services: Pharmacy**
5. **Impacted Hospital Departments: Hospital**
6. **Contract Summary:** These forms makes us eligible to receive discounts through Amerisource Bergen by using our Group Purchasing Organization.
7. **Cost: \$0**
8. **Prior Cost: 0**
9. **Term:**
10. **Termination Clause: None**

Pharmacy Conversion *Member Input Form*

Please provide the information requested below in preparation for documenting your choices in the various Pharmacy programs available through Premier contracted suppliers. The information on this form will be used to auto-populate the many forms in the Performance Program (LOC, LOP, etc.), Declarations, and if applicable, Auto-Sub and DSH.

The form fields will be filled in based on the information you supply here. This DOES NOT activate or imply approval of any of the agreements or commitments. You will have the opportunity to review and officially sign only the documents that you choose.

New GPO:	Effective Start Date:	Previous GPO:
PREMIER HEALTHCARE ALLIANCE, L.P.		Premier

Facility Name:	System Name:
Mangum Regional Medical Center	Cohesive Healthcare Management

Member Address:	Address Line 2:
1 Wickersham Drive	

City:	State:	Zipcode:
Mangum	Oklahoma	73554

DEA:	HIN:	DSH ID:	Entity Code:	Class of Trade:
FM7151777	730710IF2		834641	Acute Hospital

Pharmacy Authorized Signee:

Name:	Carson VanZant
Title:	Chairman of Board
Fax:	
Phone:	(580) 782-3353
Email:	kmartinez@chmcok.com

Distributor / Wholesaler:

Name:	AmerisourceBergen
City:	
State:	
Zip:	

Other Notes:

Please submit this form via e-mail upon completion. Thank-you for your participation and please ask your Premier contact if you have any questions throughout the process.

SELLER: Amgen USA Inc.
CONTRACT NUMBER: PPPH18AMG04 (Amgen #00106268)
PRODUCT CATEGORY: Brand Pharmaceuticals

Exhibit J
Amgen Eligible Member Declaration Form



Member Name: Mangum Regional Medical CenterCohesive Healthcare Management

Address: 1 Wickersham Drive

City: Mangum, State: Oklahoma, Zip: 73554

HIN # 730710IF2 or Other ID #: FM7151777

_____ this is an Affiliate (An Affiliate of an entity on contract with Amgen, is an entity that controls, is controlled by, or under common control with such given entity. "Control" shall mean ownership of more than fifty percent (50%) of the voting stock of an entity or, for non-stock entities, the right to more than fifty percent (50%) of the profits of such entity); **please specify the nature of affiliation and list affiliates on attached page.**

Dear Premier Member:

Premier Healthcare Alliance, L.P. ("Purchasing Group") has recently entered into a Group Purchasing Organization Agreement with Amgen, Agreement No. PPPH18AMG04 ("GPO Agreement") for availability of discounts and rebates for Purchasing Group's members on purchases of Amgen Product from Authorized Wholesalers. In order to participate under the GPO Agreement, please certify your request to be eligible for discounts on purchases of Amgen Product exclusively through Purchasing Group under the GPO Agreement by signing below. If you currently are eligible for discounts on purchases of Amgen Product through another group purchasing organization, you must terminate your affiliation with that group purchasing organization for your discounts on purchases of Amgen Product and agree to only participate in the eligibility for discounts on purchases of Product through Purchasing Group pursuant to the terms and conditions of the GPO Agreement. If you currently are eligible for discounts on purchases of Amgen Product through another agreement with Amgen, you are hereby terminating that agreement and agree to only participate in eligibility for the discounts on purchases of Amgen Product during the GPO Agreement term through Purchasing Group pursuant to the terms and conditions of the GPO Agreement. You will be required to execute a new Declaration Form for any change in your affiliation and each time a change in your affiliation occurs, for such change in your affiliation to be recognized by Amgen. If you have no current affiliation with a GPO, upon receipt of your executed Declaration Form by the Amgen Membership Department, the effective date of your requested change shall be as soon as practicable for Amgen and such effective date shall be disclosed in writing by Amgen to your Purchasing Group in advance of such effective date. All other requested affiliation changes will be effective thirty (30) days after your executed Declaration Form is received by the Amgen Membership Department, unless Amgen notifies your Purchasing Group in writing of a later date.

Declaration

On behalf of Member Name: Mangum Regional Medical Center ("Member") and its affiliates, the undersigned agrees to and certifies the following:

- 1) Member agrees to only participate in the eligibility for discounts on purchases of Amgen Product through Purchasing Group pursuant to the terms and conditions set forth in the GPO Agreement, unless Amgen is provided thirty (30) days written notice of Member's desire to discontinue participation under the GPO Agreement;

SELLER: Amgen USA Inc.
CONTRACT NUMBER: PPPH18AMG04 (Amgen #00106268)
PRODUCT CATEGORY: Brand Pharmaceuticals

- 2) Member hereby declares that it will not participate in the eligibility for discounts on purchases of Amgen Product under any other affiliation agreement or arrangement and will not avail itself of the discount and rebate terms on purchases of Amgen Product pursuant to any other agreement;
- 3) Member agrees that it will purchase Amgen Product from Authorized Wholesalers only for its “own use” in its hospital/office(s) for the exclusive treatment of its patients and shall not transfer Amgen Product made available pursuant to the terms of the GPO Agreement to any person or entity or to any third party other than the end user patient, nor make the terms set forth in the GPO Agreement available to or for the benefit of any person other than Member;
- 4) Member acknowledges and agrees that Member shall provide Amgen and membership@amgen.com with notice of any changes to Member’s information including the addition of any affiliate hospitals or the removal of any closed affiliate hospital and/or the removal of affiliate hospitals with no patients no less than thirty (30) days prior to the effective date of such change;
- 5) Member shall provide Amgen with written notice of any changes to the Control, as defined in this Declaration Form and in the GPO Agreement, for either the member or its affiliates. Member must provide Amgen notice by email notification transmitted to membership@amgen.com within thirty (30) days after the effective date of such change; and
- 6) The undersigned has the full power and authority to execute this Declaration on behalf of Member and its legal affiliates. A list of Member’s legal affiliates that will participate under the GPO Agreement, including name, address, phone number and Health Industry Number (HIN) has been attached to this Declaration Form.

Signature: _____

Print Name: Carson VanZant

Print Title: Chairman of Board

Date: _____

HIN or other ID: 730710IF2 FM7151777

Email to: Amgen Membership at membership@amgen.com with copy to Rosters@Premierinc.com (Attn: Premier/Amgen Declaration Form)

GPO/BUYING GROUP DESIGNATION FORMTO: Mangum Regional Medical Center Cohesive Healthcare Management
(Company Name)RE: _____
(Contract Name) (Supplier Internal Contract Number)FOR: _____
(Product Category)GPO: PREMIER HEALTHCARE ALLIANCE, L.P.
(GPO Affiliation)

Please be advised that this Member chooses to use Products covered under the contract referenced above. Please take steps necessary to ensure this Member receives correct contract pricing.

Designated Authorized Distributor*: AmerisourceBergen

Branch Location: _____ Account #: _____

Member Name*: Mangum Regional Medical Center**Address*:** 1 Wickersham Drive**City, State, Zip*:** Mangum Oklahoma 73554 **Telephone*:** (580) 782-3353**Authorized By (Print Name)*:** Carson VanZant**E-Mail Address*:** kmartinez@chmcok.com**Signature*:** _____**Title*:** Chairman of Board**Date*:** _____ **DEA or HIN#*:** FM7151777 730710IF2**Member Facility Type*:** Acute Hospital**Approval/effective date*** for above Member: _____***Indicates required field**

Return completed form to:

BTG International (attn. Com Ops Strategic Contracting)
 Street Address: 300 Four Falls Corporate Center, Suite 300
 300 Conshohocken State Road
 West Conshohocken, PA, 19428-2998 USA
 Fax: 610 943 6018 (Attention: Com Ops Strategic Contracting)
 Email: rebates@btgplc.com



Group Declaration – New Premier Member

Dear Customer:

To comply with contract requirements and ensure proper pricing is in place prior to placing orders, it is Baxter Healthcare Corporation’s policy that you purchase our products through only one GPO contract.

By signing this document, you are indicating that **Premier Purchasing Partners, L.P.** is your preferred GPO to purchase Baxter Healthcare Corporation’s Multisource Pharmaceuticals, Anesthesia & Critical Care products, as well as the wholesaler(s) you use, if applicable. If a wholesaler is not designated, Baxter Healthcare Corporation will not be responsible for any price adjustments that may be required since the information was not supplied.

Please return your response either by mail to the address above, via fax at 224-270-3881 or by email to [RoundLake MD ACC Membership@baxter.com](mailto:RoundLake_MD_ACC_Membership@baxter.com).

Sincerely,

Baxter Membership Team

Please complete the information below for Multisource Pharmaceuticals, Anesthesia & Critical Care products:

Premier Member Name: Mangum Regional Medical CenterCohesive Healthcare Management

Address: 1 Wickersham Drive

City, ST, Zip Code: Mangum Oklahoma73554

Baxter Account No.: _____

Customer DEA No.: FM7151777 730710IF2

Former Group Affiliation: Premier

- **Primary Wholesaler** AmerisourceBergen
- **Secondary Wholesaler** _____

Signature of Premier Member

Carson VanZant

Print Name

kmartinez@chmcok.com

Email Address

Date

Chairman of Board

Title

**PREMIER HEALTHCARE ALLIANCE, L.P.
PREMIER AMENDMENT #45 (ELI LILLY AMENDMENT #41) TO GROUP
PURCHASING AGREEMENT - PHARMACEUTICALS**

Attachment 3 to the Forty-First Amendment

Exhibit J-1: Eli Lilly and Company Group Purchasing Organization Declaration Form

Legal Name of Member: Mangum Regional Medical Center Cohesive Healthcare Management

To be valid, form must be completed by an authorized individual employed by the Member.

Address: 1 Wickersham Drive

City, State, Zip Code: Mangum Oklahoma 73554

Phone #: (580) 782-3353 **Pharmacy HIN:** 730710IF2

Pharmacy DEA #: FM7151777

Class of Trade ("COT"): Please check the box(es) below that best describes your Institution or the Institution you serve. Consult the COT definitions on pg 2 for further detail.

Acute Care:

- | | |
|---|--|
| <input type="checkbox"/> Acute Care Hospital (Employee Pharmacy <input type="checkbox"/>) | <input type="checkbox"/> System Affiliated Closed Door Outpatient Clinic |
| <input type="checkbox"/> Acute Care Children's Hospital (Employee Pharmacy <input type="checkbox"/>) | <input type="checkbox"/> System Affiliated Surgery Center |
| <input type="checkbox"/> Long Term Acute Care Hospital (LTACH) | |

Alternate Care:

- Long Term Care Facility

Group Purchasing Organization ("GPO") Selection Declaration:

By signing this document, Institution is authorizing Lilly to change its group purchasing affiliation. Institution is selecting or changing its GPO selection for buying Lilly Products through a group purchasing agreement ("GPO Agreement") between Lilly and GPO. All discount programs available with Current GPO Affiliation will be terminated upon receipt and acceptance by Lilly of this Declaration Form.

Current GPO Affiliation: Premier New GPO Affiliation: PREMIER HEALTHCARE ALLIANCE, L.P.

GPO Requested Pricing Effective Date: _____

Lilly will use the GPO Affiliation Effective Date to calculate pricing eligibility. Pricing eligibility will begin on the first (1st) or the fifteenth (15th) of a month based on the date that Lilly receives the Dec Form from the GPO. The Declaration Form must be received by Lilly at least fifteen (15) days prior to the proposed GPO Affiliation Effective Date; if not, pricing eligibility will begin the next occurring first (1st) or the fifteenth (15th) of the month that is at least fifteen (15) days prior to the date Lilly receives the completed Declaration Form.

Institution hereby represents and warrants to Lilly that it shall only utilize Lilly Products purchased under the GPO Agreement for its "OWN USE" as that term is used in Abbott Laboratories vs. Portland Retail Druggists Association, Inc., 96 S.Ct. 1305 (1976). Additionally, the above-named Institution acknowledges that Lilly will only recognize its affiliation with one GPO in relation to discount and/or rebate pricing of its Products.

Institution acknowledges its obligation to comply with all applicable laws and regulations regarding the purchase of Products under this Agreement. Institution is hereby informed that there may be an obligation to report discounts to the Department of Health and Human Services or applicable state agency. See United States Code of Regulations, Vol. 42, Part 1001 and Sec. 1001.952 (h) (1), (3). Institution agrees to forgo all other discounts for the same Products. Institution hereby recognizes that, should any discount be provided by Lilly to Institution in error, Lilly is hereby authorized to invoice Institution to collect any discount provided in error to Institution. Institution agrees to pay such invoice within thirty (30) days of receipt of an invoice. Institution reserves the right to review all information used by Lilly in determining the amount of discounts provided in error. Institution agrees to allow Lilly and/or its auditor to have access to any information in Institution's control that relates to Lilly Products necessary to audit GPO within the limits imposed by the GPO Agreement.

Current GPO Affiliation Programs:

For any Letter of Commitment or Letter of Participation (hereinafter referred to collectively as "LOC") executed by Institution for a discount program offered through Institution's Current GPO Affiliation, the discount pricing available under the LOC shall remain effective; provided however, (i) the same discount program for the same Lilly Product must be available through the Institution's New GPO Affiliation for the same Class of Trade, (ii) Institution must be eligible for participation in the same discount program for the same Lilly Product under New GPO Affiliation's GPO Agreement with Lilly; (iii) Institution agrees by signature below to comply with all terms and conditions of the New GPO Affiliation's discount program; and, (iv) in the event that Institution has executed an LOC for a discount program that is not available with the Institution's New GPO Affiliation, LOC for Institution will be terminated upon receipt and acceptance by Lilly of this GPO Declaration Form.

Chairman of Board

Authorized Representative of Institution
(Signature)

Carson VanZant

Authorized Representative of Institution
(Printed Name)

Title of Authorized Representative

Date of Signature

*Lilly retains the sole right to determine eligibility of Institution signing this Declaration Form.
Retail pharmacies are not eligible for pricing pursuant to this GPO Agreement.*

GPO must send Completed Form to Eli Lilly and Company at GPOinfo@lilly.com. Declarations sent to GPOinfo@lilly.com directly from Premier Members will not be accepted.

Acute Care Class of Trade Definitions:

Acute Care Hospital: A hospital facility whose purpose is to provide immediate or short-term (acute) care in an inpatient setting (operating 365 days per year 24 hours per day and listed in the American Hospital Association Directory). Pharmaceuticals are dispensed under the direction of a registered pharmacist and the pharmacy is NEITHER owned NOR operated by any federal, city, state, or county government. A hospital in this Class of Trade may purchase products either through a Group Purchasing Organization (GPO), through a wholesaler/distributor, or directly from the manufacturer.

Acute Care Children's Hospital: A hospital facility servicing only minors whose purpose is to provide immediate or short-term (acute) care in an inpatient setting (operating 365 days per year 24 hours per day and listed in the American Hospital Association Directory). Pharmaceuticals are dispensed under the direction of a registered pharmacist and the pharmacy is NEITHER owned NOR operated by any federal, city, state, or county government. A hospital in this Class of Trade may purchase products either through a Group Purchasing Organization (GPO), through a wholesaler/distributor, or directly from the manufacturer.

Long Term Acute Care Hospital (LTACH): Any Medicare-participating hospital with an average length of stay exceeding 25 days that is not otherwise classified as a rehabilitation or psychiatric hospital designed to provide extended medical and rehabilitation care for patients who are clinically complex and have multiple acute or chronic conditions. LTACH's differ from nursing home/sub-acute programs in that their patients are much more acutely ill, often critically ill, and require more specialized treatment programs and intensive nursing interventions that are generally not available within sub-acute programs. Services for such facilities may include, but are not limited to, ventilation weaning programs, chronic respiratory care, rehabilitation and medical, post-operative, and pain and wound management services. There is to be clear separation of ownership from a host hospital for the LTACH hospital within a hospital model. Long Term Care Facilities do not fall within this class of trade definition.

System Affiliated Closed Door Outpatient Clinic: A closed door (pharmacy is closed to access by the general public and does not compete with retail trade) outpatient facility dedicated to the provision of various forms of treatment which maintains a separate pharmacy from a hospital. This facility will have a unique HIN/DEA from the hospital. Such facilities operate during set business hours (not 24 hours per day). Examples include drug rehab clinics, alcohol treatment centers. Patients receiving care at this facility are associated with the facility's hospital system.

System Affiliated Surgery Center: A closed door (pharmacy is closed to access by the general public and does not compete with retail trade) outpatient facility, other than a physician's office, where surgical services are provided on an ambulatory basis which maintains a separate pharmacy from a hospital. This facility will have a unique HIN/DEA from the hospital. Such facilities operate during set business hours (not 24 hours per day). Patients receiving care at this facility are associated with the facility's hospital system.

Alternate Care Class of Trade Definitions:

Long Term Care Facility: Residential care facilities providing active patient care (skilled and non-skilled) over an extended period of time (generally greater than thirty (30) days) in an attempt to achieve the goals of treatment, rehabilitation and discharge; and/or residential assisted-living facilities that combine housing, personalized supportive services and health care designated to meet the individual needs of persons in need of assistance with the activities of daily living; and/or behavioral health facilities that provide active patient care over an extended period of time (residential, non-residential, or a hybrid model) where individuals receive all pharmacy services at the behavioral health facility. In each case, patient care services are not based in the patient's home (ie/ home health). Such facilities (1) provide health care to residents or aligned patients and provide pharmaceutical products only to its own residents or aligned patients (ie/ closed door); (2) have an agreement with a long term care pharmacy to provide pharmacy consulting for and dispense pharmaceuticals to residents or aligned patients of such facilities, but not via mail order; and (3) have authorized a long term care pharmacy to provide access to Lilly Products for such facilities pursuant to the terms in the GPO Agreement, solely for "OWN USE" by such facilities (i.e. use or dispensing of Lilly Products by such facilities only for its own residents or aligned patients at such facilities and under no circumstances for use with or for resale to non-residents/non-aligned patients or any other person or party).

EXHIBIT J
GENENTECH USA OWN USE CERTIFICATION

SELLER: Genentech USA, Inc.
CONTRACT NUMBER: PPPH18GNT01
PRODUCT CATEGORY: Brand Pharmaceuticals

Participant Name: Mangum Regional Medical Center
Address: 1 Wickersham Drive
City, State, and Zip Code: Mangum Oklahoma 73554
Class of Trade/Type of Provider: Acute Hospital
DEA/HIN: FM7151777 730710IF2
Contact Number/Email: (580) 782-3353 kmartinez@chmcok.com

This Own Use Certification is executed and delivered pursuant to Section 4 of the Agreement. Capitalized terms not otherwise defined in this Own Use Certification shall have the meaning ascribed to such terms in the Agreement. Any alterations or modifications to this form will render it null and void.

I, Carson VanZant, hereby certify that I am the Chairman of Board of Mangum Regional Medical Center and that I am duly qualified and authorized to sign this Own Use Certification on behalf of the Participant, as specified above and all sites listed on Own Use Certification Attachment, as applicable. I hereby represent and certify as follows:

1. The information provided herein is true and correct;
2. Participant shall purchase Product through an "Authorized Wholesaler" meaning a distributor of Products that has a direct agreement with Genentech and whom has entered into arrangements for the distribution of Products;
3. The Products purchased by the Participant under the Agreement are only for dispensing to its patients in connection with, and on the same day for injectable or infused products, the provision of treatment and/or evaluation, and not for resale to any wholesaler, retailer, internet pharmacy, institution, physician or any other person or entity, within or outside of the U.S. Participant shall maintain records of its Product purchases and the circumstances of dispensing same to adequately reflect its compliance with the terms of this provision;
4. If Participant fails to observe the terms of this Own Use Certification, Genentech may, at its option, remove such Participant from the Agreement, or immediately cease providing the Discounts and/or Contract Prices made available to Participant under any agreement with Genentech, and Genentech may at its option, take other action that Genentech deems appropriate; and
5. Participant agrees to indemnify Genentech and hold Genentech harmless from and against any loss, damage, cost and expense, including attorneys' fees, with respect to any claim or demand arising from the breach of this Own Use Certification by Participant. This provision shall survive termination of the Agreement with Genentech.

IN WITNESS WHEREOF, the undersigned has executed and delivered this Own Use Certification as of the date set forth below.

Signature: _____ Title: Chairman of Board
Print Name: Carson VanZant Date: _____

Please send this "Own Use Certification" form:

Via email to: contractops@gene.com
Via eFax to: (877) 228-1912
Via Fax to: (650) 225-7715

Via Mail to: Genentech USA, Inc.
Attention: Contract Operations
1 DNA Way, Mailstop 312B
South San Francisco, CA 94080

**EXHIBIT K
LETTER OF COMMITMENT**

SELLER: Genentech USA, Inc.
 CONTRACT NUMBER: PPPH18GNT01
 PRODUCT CATEGORY: Brand Pharmaceuticals

Participant Name: Mangum Regional Medical Center
Address: 1 Wickersham Drive
City, State, Zip Code: Mangum Oklahoma 73554
Class of Trade/Type of Provider: Acute Hospital
DEA/HIN: FM7151777 730710IF2
Contact Number/Email: (580) 782-3353 kmartinez@chmcok.com

Dear Carson VanZant:

Genentech USA, Inc. (“Genentech”), has entered into agreements with various group purchasing organizations for the purpose of setting the terms and conditions for purchase of certain Genentech Products by Participants under the applicable agreements. Currently, Genentech has your facility listed under more than one such group purchasing organization (“GPO”). Under the agreements we have with the GPO, Participants are allowed membership and participation with only one GPO for the purchase of Genentech Products. This “Letter of Commitment” is executed and delivered pursuant to the agreements between Genentech and the GPOs. In order to participate under the agreements in question, please identify below the GPO through which you shall be purchasing Genentech Products. You will be required to execute a new “Letter of Commitment” for any change in your affiliation to the GPO, and your new affiliation shall be effective forty-five (45) days after your request for such change has been made, subject to approval by Genentech. Capitalized terms not otherwise defined in this “Letter of Commitment” shall have the meaning ascribed to such terms in the applicable agreement between Genentech and the GPO in question.

I, Carson VanZant, hereby certify that I am the Chairman of Board of Mangum Regional Medical Center and that I am duly qualified and authorized to sign this Letter of Commitment form on behalf of the Participant as specified above, and all Participants listed on Attachment 1, incorporated herein to this Exhibit K by reference (collectively referred to herein as “Participants”). I hereby represent and certify as follows:

1. The information provided herein is true and correct;
2. Participants shall purchase all of its future requirements of Genentech Products solely through the GPO pursuant to the terms and conditions set forth in the agreement between Genentech and GPO;
3. Participants shall not purchase Genentech Products under any other affiliation agreement or arrangement and will not avail itself of the Discount and/or Contract Price terms for the purchase of Genentech Products pursuant to any other agreement;
4. If Participants fail to observe the terms of this “Letter of Commitment”, Genentech may, at its option, immediately cease providing the Discounts and/or Contract Prices made available to Participants under the agreement between Genentech and the GPO, or any other agreement with Genentech, and Genentech may at its option, take other action that Genentech deems appropriate; and
5. Participants shall terminate any other current affiliation agreement or arrangement to purchase Genentech Products prior to purchasing Genentech Products under the agreement between Genentech and GPO.

Previous GPO Affiliation	Current GPO Affiliation	Current Affiliation Start Date
Premier	PREMIER HEALTHCARE ALLIANCE, L.P	

IN WITNESS WHEREOF, the undersigned has executed and delivered this “Letter of Commitment” as of the date set forth below.

Signature: _____ Title: Chairman of Board
 Print Name: Carson VanZant Date: _____

Please send this “Letter of Commitment” form to:
 via email to: contractops@gene.com
 via mail to: Genentech USA, Inc.
 Attention: Contract Operations
 1 DNA Way, Mailstop 312B
 Via eFax (877) 228-1912
 Via fax to: (650) 225-7715
 South San Francisco, CA 94080



GROUP PURCHASING ORGANIZATION DESIGNATION AND BUSINESS TYPE ELIGIBILITY FORM

In order to access the available pricing and/or rebates under a Group Purchasing Organization (GPO) agreement, GSK requires that each eligible facility designate a GPO that currently has a contract with GSK. GSK permits each eligible facility to designate one Non Specialty GPO and multiple Specialty GPOs. If an eligible facility designates more than one Non Specialty GPO, GSK will consider the most recently received form notification as the operative Non Specialty GPO designation. GSK reserves the right to decline a facility's new or altered GPO designation.

Designations may be changed but will require thirty (30) days advance written notice to GSK. GSK reserves the right to refuse to extend a contract price to a facility that has failed to designate a GPO or does not meet contract eligibility requirements. A facility will be added to the designated GPO's contract(s) within thirty (30) days, if GSK determines that all contract eligibility requirements are met. (Declaration forms must be submitted for each location. "Blanket" declaration forms are not accepted.

I. COMPLETE ALL REQUESTED INFORMATION: (PLEASE PRINT) (INCOMPLETE FORMS WILL NOT BE PROCESSED)

FACILITY NAME: Mangum Regional Medical Center

DEA# (Must be current & match facility address): FM7151777 HIN: 730710IF2

STATE LICENSE #: _____ DR NAME (if applicable): _____

DSH ELIGIBLE INPATIENT ACUTE FACILITY: YES NO DSH ID (if applicable): _____

PHYSICAL ADDRESS: 1 Wickersham Drive SUITE #: _____

CITY: Mangum STATE: Oklahoma ZIP: 73554

TELEPHONE #: (580) 782-3353 EMAIL: kmartinez@chmcok.com

II. MUST DESIGNATE SOLE GROUP PURCHASING ORGANIZATION (GPO): PREMIER HEALTHCARE ALLIANCE, L.P.

III. PLEASE CERTIFY (*) TYPE OF BUSINESS FOR ABOVE FACILITY BY CHECKING ONE OF THE BOXES BELOW: (Business Type will be confirmed via research, telephone surveys, and site surveys, etc.)

- | | | |
|--|--|---|
| <input type="checkbox"/> Ambulatory Surgical Center | <input type="checkbox"/> Hospital Employee Pharmacy | <input type="checkbox"/> On-site Outpatient Hospital Pharmacy |
| <input type="checkbox"/> Combo Pharmacy Vaccines | <input type="checkbox"/> Inpatient Treatment Center | <input type="checkbox"/> Outpatient Clinic in a Hospital |
| <input type="checkbox"/> Correctional Facility Provider | <input type="checkbox"/> Inpatient Psychiatric Facility | <input type="checkbox"/> Physician Clinic/Doctor's Office |
| <input type="checkbox"/> Correctional Facility | <input type="checkbox"/> Nursing Home Provider Pharmacy | <input type="checkbox"/> Renal Dialysis Center |
| <input type="checkbox"/> Emergency Care/Urgent Care Center | <input type="checkbox"/> Nursing Home | <input type="checkbox"/> Retail |
| <input type="checkbox"/> Health Clinic | <input type="checkbox"/> Occupational Med/Workman's Comp | <input type="checkbox"/> Specialty Pharmacy: Hospital/Health System Owned |
| <input type="checkbox"/> Home Health Care/Home Infusion | <input type="checkbox"/> Oncology Clinic | <input type="checkbox"/> Student Health Center |
| <input type="checkbox"/> Hospice | <input type="checkbox"/> On-site Inpatient Hospital | <input type="checkbox"/> Visiting Nurse |

IV. (*) CERTIFICATION: By signing below, Facility certifies, under penalty of perjury, that all of the above information is true and correct. Further, Facility certifies and agrees that (1) any GSK product purchased under any agreement shall be for its "Own Use," as defined by the United States Supreme Court in its opinions report at Abbott Laboratories et al. v. Portland Retail Druggist Association, Inc., 425 U.S. 1 (1976), and Jefferson County Pharmaceutical Association, Inc., v. Abbott Laboratories, et al., 103 S. Ct. 1011 (1983), and (2) GSK may, in its sole discretion, contact Facility's staff, and/or visit Facility's locations to verify that the above information is correct, and Facility agrees to provide such information to GSK as is reasonably necessary for GSK to make such a determination.

<u>Carson VanZant</u>	<u>Chairman of Board</u>	_____	_____
Print Name (Required)	Title (Required)	Signature (Required)	Date (Required)

Email Form to uxx44702@gsk.com

A

Product Program Letter of Participation – Appendix 1 to Schedule A

REQUEST for GPO Affiliation Update

The purpose of this form is to request an update of the selected Group Purchasing Organization (GPO) for Product Programs. Terms and Conditions, including effective date of GPO affiliation updates, will be determined as set forth in Schedule B to the LOP. This form should be completed in its entirety and emailed to Merck Customer Contract Management (lopprocessingcenter@merck.com) or submitted via other approved electronic means. Incomplete requests cannot be processed. If more space is required, please submit a list in MS Excel, formatted as below.

The newly selected GPO will be effective for all enrolled Product Programs. For entities in a Participant System, the newly selected GPO will be effective for all entities in the Participant System and for all enrolled Product Programs.

Mangum Regional Medical Center

Participant/Participant System Name: Cohesive Healthcare Management New GPO Name: PREMIER HEALTHCARE ALLIANCE, L.P.

Please update the GPO affiliation for the following entities/locations:

Entity/Location Name	Complete Address (Street address, City, State, Zip)	Director of Pharmacy	DEA or HIN	Name of Merck Representative
Mangum Regional Medical Center	1 Wickersham Drive	Carson VanZant	FM7151777	
	Mangum Oklahoma 73554		730710IF2	

By signing below, you are representing and warranting that you have authority to change the GPO affiliation for all entities/locations or Participant Systems listed:

Authorized Signature:	Printed Name: Carson VanZant	Title: Chairman of Board	Email address: kmartinez@chmcok.com	Date:
For Merck CCM Use only	Accepted and Approved by:	Date:	Merck Internal System Name:	Merck Internal System ID:

Exhibit G-2

Novo Nordisk Inc. Group Declaration Form

This document serves as a written confirmation of a primary group purchasing relationship with Novo Nordisk. Novo Nordisk only allows a single group (GPO) relationship, therefore, a primary GPO and Pharmacy Start Date is requested below. This document will supersede any prior GPO relationship.

Participating Member DEA/HIN#: FM7151777 730710IF2

Participating Member National Provider ID #: _____

Primary Wholesaler: AmerisourceBergen

Secondary Wholesaler: _____

Primary GPO: PREMIER HEALTHCARE ALLIANCE, L.P.

Former GPO: Premier

Pharmacy Start Date: _____

Participating Member Name: Mangum Regional Medical CenterCohesive Healthcare Management

Participating Member Address: I Wickersham Drive
Mangum Oklahoma 73554

Contact Name: Carson VanZant

Title: Chairman of Board

Email: kmartinez@chmcok.com

Phone: (580) 782-3353

Signature: _____

Date: _____

Novo Nordisk shall have up to five (5) business days from the date the completed Group Declaration Form is received, to process any changes in primary GPO designation. Return completed forms to nnbidnotification@novonordisk.com.

**PREMIER HEALTHCARE ALLIANCE, L.P. TO GROUP PURCHASING AGREEMENT
PREMIER CONTRACT # PPPH18SNA01**

MUST READ

SANOFI AVENTIS

MEMBER REQUIREMENTS TO BE ATTACHED TO PREMIER AGREEMENT

New members and members switching GPOs, must send an email notification to Sanofi Aventis inclusive of the information required as noted below to: membership.application@sanofi.com.

Participating Member Facility Name:	Mangum Regional Medical CenterCohesive Healthcare Management
Participating Member Address:	1 Wickersham Drive Mangum Oklahoma73554
Participating Member DEA/HIN#:	FM7151777 730710IF2
Participating Members Class of Trade:	Acute Hospital
Primary Wholesaler:	AmerisourceBergen
Secondary Wholesaler:	
Primary GPO:	PREMIER HEALTHCARE ALLIANCE, L.P.
Former GPO:	Premier
Pharmacy Start Date:	
Contact Name:	Carson VanZant
Contact Title:	Chairman of Board
Contact Email:	kmartinez@chmcok.com
Contact Phone:	(580) 782-3353
If multiple sites, you must attach a list of facilities that will be purchasing Sanofi Aventis contracted products.	



CONTRACT COMMITMENT FORM (CCF)

General Information

Note: Include Sanofi Pasteur Inc. customer number and name. If Sanofi Pasteur Inc. customer number is not known please provide business address and Drug Enforcement Administration (DEA) and/or Health Information Number (HIN) information below. If adding more than 5 accounts, please fill out the attached spreadsheet and include it in your request

Sanofi Pasteur Inc. Customer Number	Business Name	Business Address (include city, state and zip code)	DEA and/or HIN Number
	Mangum Regional Medical Center	1 Wickersham Drive	FM7151777
		Mangum Oklahoma 73554	730710IF2

Group Affiliation

Buying Group or Contract Name: PREMIER HEALTHCARE ALLIANCE, L.P.

Note: **By signing this form, the customer is acknowledging that they will be removed from any other affiliation that they are currently associated with (i.e. GPO, PBGs, etc.).** Customer acknowledges that by choosing the above buying group, it will only be eligible to purchase products from Sanofi Pasteur Inc. under the contract which Sanofi Pasteur Inc. has with this buying group, and will not be eligible to purchase products under any other contract, which Sanofi Pasteur Inc. may have with other buying groups. A customer is limited to changing its designated buying group once every sixty (60) days.

Authorized Representative Name: Carson VanZant Chairman of Board

Authorized Representative Contact Information – phone/email: (580) 782-3353 kmartinez@chmcok.com

Authorized Representative Signature: _____

Date: _____

Please fax completed form to 1-866-462-6737 or email to membership.administration@sanofi.com. Incomplete forms will not be accepted.

PREMIERProRx®

“Opt-Out” submission form for 340B GPO Statutory Prohibition

As a member of the Premier group purchasing organization and an automatic participant in the PREMIERPrRx® program, the facility designated below requests to NOT participate in (“Opt-Out of”) the PREMIERPrRx program’s automatic substitution logic and certifies that it meets the following criteria:

Participates in the 340B program and is prohibited from purchasing items through a GPO in the outpatient setting (DSH, Children’s or freestanding cancer hospital only)

By the signature below, the facility requests the Premier group purchasing organization to authorize the indicated prime vendor to deactivate and not make substitutions to products in the PremierProRx program whenever a brand or generically equivalent pharmaceutical product is ordered by the facility.

Once this request is approved by Premier, your prime vendor will be notified with a request to remove your facility from the PremierProRx program. It is important that Premier understands the purpose for this request. Please provide any details that support this request.

Details:

Date:		Premier Entity Code:	834641
Participating facility name:	Mangum Regional Medical Center		
DEA#:	FM7151777	HIN# (optional):	730710IF2
HRSA 340B Id #			
Address:	1 Wickersham Drive	Mangum	Oklahoma 73554
Phone:	(580) 782-3353	Fax:	
E-mail:	kmartinez@chmcok.com		
Participating facility contact Name (printed):	Carson VanZant Chairman of Board		
Participating facility contact Signature:			
Prime vendor (Wholesaler):	AmerisourceBergen	Account number(s) (optional):	
Prime vendor distribution center:			

**** Be sure to provide all applicable account numbers with your prime vendor. Attach on separate list if necessary.**

“Opt-Out” submission form for 340B GPO Statutory Prohibition

A participating facility is required to provide 30 days written notice to Premier if it elects to opt out of the PremierProRx Product program.

All standard wholesaler terms and conditions apply.

Please e-mail (preferable) or fax completed and signed document to:

PREMIERProRx® Program

Chris_Johnson@premierinc.com

Attn: Chris Johnson

Fax: 704-733-2123

**** Communication in response to this request to NOT participate in the PREMIERProRx® program should follow no more than two (2) weeks after receipt of this request. If communication is not received after two (2) weeks, please follow-up via E-mail: Chris_Johnson@premierinc.com, or call 704.816.5595.**

Please note the defined eligibility or non-eligibility to participate in PREMIERProRx for 340B hospital accounts:

<p>▶ Eligible:</p> <ul style="list-style-type: none"> • Non 340B facility • Rural referral • Sole community • Critical access • DSH in-patient that <u>CAN</u> separate inventory • Children’s in-patient that <u>CAN</u> separate inventory • Freestanding cancer in-patient that <u>CAN</u> separate inventory 	<p>▶ Non-eligible:</p> <ul style="list-style-type: none"> • DSH out-patient • Children’s out-patient • Freestanding cancer out-patient
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Client Name: MANGUM REGIONAL MEDICAL CTR

Client Account Number: 85998

INTERFACE AGREEMENT For Electronic Medical Record Interface

THIS AGREEMENT is made this 31 day of MAY, 2024 by and between MANGUM REGIONAL MEDICAL CTR with its place of business at 1 WICKERSHAM DR, MANGUM, OK, 73554 (hereinafter called "Client"), and Clinical Pathology Laboratories, Inc., a Texas Corporation having its principal place of business at 9200 Wall Street, Austin, TX 78754, (hereinafter called "CPL").

WHEREAS CPL is a reference laboratory that performs laboratory tests for health care providers or organizations, including physicians, hospitals, ACO's, clinics and other laboratories, and

WHEREAS Client is a health care provider or organization which orders clinical laboratory tests for its patients, and

WHEREAS the parties desire to enter into an Agreement whereby CPL will provide an interface for providing laboratory test results and/or ordering laboratory tests

WHEREAS Client acknowledges that CPL has incurred implementation fees in the sum of \$0.00 in furnishing the interface to Client,

NOW THEREFORE, in consideration of the foregoing premises and the mutual covenants and conditions herein stated, Client and CPL agree as follows:

1. INTERFACE

- 1.1 CPL agrees to provide, at CPL's expense, an interface between CPL Laboratory Information System (LIS) and the Client's Electronic Medical Record system or Laboratory Information System, located at the address set forth above, to allow the sending of laboratory orders and/or importing of CPL laboratory results into the Client's Electronic Medical Record (hereinafter called "EMR") software entitled **TRUBRIDGE/CPSI**
- 1.2 The Interface shall be installed and used at the Client's location specified herein, and shall not be removed therefrom without CPL's prior written consent.
- 1.3 Client agrees that it is being provided with the Interface only for transmitting orders for laboratory tests and/or importing CPL laboratory results into the Client's EMR software.
- 1.4 Client agrees that Client is solely responsible for maintaining the data integrity of the laboratory results as transferred by CPL through the interface. If for some reason the laboratory results do not appear reasonable or accurate as to format or disclosure within the electronic medical records system, Client should notify CPL immediately.
- 1.5 In the event that Client is issuing orders and receiving test results solely via an electronic medium, Client will notify CPL in writing prior to any change in or software modification to its electronic medical record system and/or its laboratory information system. Client will then supply CPL documentation of the orders being issued and the results being received into its system after any such change or modification so that CPL may review the test order and result data for accuracy. During such time orders may be furnished by Client and results may be transmitted to Client by an alternate method.
- 1.6 Implementation of the stated interface will follow all guidelines of the College of American Pathologists (CAP) to insure integrity of the electronic communication of orders and transmitted results. To maintain CPL's accreditation with the CAP, CPL is required to continue to verify the integrity of data flowing through the interface every two (2) years. Client will be compliant and responsive to CPL's future requests for data to complete the audit process timely.

2. TERM AND TERMINATION

- 2.1 This Agreement shall remain in force and effect for two (2) years from the date set forth above, and shall renew for successive annual periods unless terminated by either party. Either the Client or CPL may terminate this Agreement at

any time, with or without cause, by providing thirty (30) days written notice.

- 2.2** If Client should terminate this agreement or discontinue using CPL's services prior to the end of the initial two year term, then Client shall immediately reimburse CPL for the implementation and service fees incurred by CPL in proportion to the time remaining on the two year term.
- 2.3** CPL agrees to pay the initial maintenance fees charged by Client EMR vendor for support of the interface. Client shall assume responsibility and be billed directly by Client EMR for all subsequent maintenance and support.

3. NO REFERRAL CONDITIONS

The parties acknowledge and agree that this Agreement was not entered into under any conditions other than as set forth herein, and that this Agreement is not conditioned upon the referral of Medicare, and/or Medicaid testing by Client to CPL.

4. SEVERABILITY

It is the intention of the parties that the provisions of this Agreement will be enforceable to the fullest extent permissible under applicable laws and regulations, and that the unenforceability of any provision or provisions under such laws or regulations will not render unenforceable, or impair, the remainder of the Agreement. If any provisions hereof are deemed invalid or unenforceable, either in whole or in part, this Agreement will be deemed amended to delete or to modify, as necessary, the offending provision or provisions and to alter the bounds thereof in order to render it valid and enforceable.

5. INDEPENDENT CONTRACTOR

It is understood that CPL and Client are independent contractors engaged in the operation of their own respective businesses. Neither party is, or is to be considered as, the agent or employee of the other party for any purposes whatsoever. Neither party has authority to enter into contracts or assume any obligations for or on behalf of the other party or to make any warranties or representations for or on behalf of the other party.

6. WAIVER

No waiver of any breach or failure by either party to enforce any of the terms or conditions of this Agreement at any time will, in any manner, limit or waive such party's right thereafter to enforce, and to compel strict compliance with every term and condition hereof.

7. FORCE MAJEURE

No delay in or failure of performance by either party under this Agreement will be considered to be a breach hereof if, and to the extent that such delay or failure of performance is caused by an occurrence or occurrences beyond the reasonable control of the party affected.

8. NOTICES

All notices hereunder must be in writing, addressed to the respective parties at the address set forth in the initial paragraph of this Agreement hand delivered, or sent via email, certified mail or recognized overnight courier service. Notice shall be effective two days after mailing or on the date of receipt, whichever date is earlier. Notices to CPL shall be sent to CPL Account Executive, CPL Connectivity Group or to clienthelpdesk@cpllabs.com.

9. ENTIRE AGREEMENT

This Agreement constitutes the entire understanding between the parties hereto with regard to the subject matter hereof, and no amendment or modification of its terms shall be valid or binding upon any party unless reduced to writing and signed by authorized representative of both parties hereto.

IN WITNESS WHEREOF, the parties have executed this Agreement as of the date stated above.

Clinical Pathology Laboratories, Inc.

Client:

By: _____

By: _____

Name (printed): _____

Name (printed): Carson VanZant

Title: _____

Title: Chairman of the Board

Hospital Vendor Contract Summary Sheet

1. Existing Vendor New Vendor
2. **Name of Contract:** CPL (Clinical Pathology Laboratories)
3. **Contract Parties:** CPL/MRMC
4. **Contract Type Services:** Lab Interface
5. **Impacted Hospital Departments:** Hospital
6. **Contract Summary:** This agreement is an interface agreement between Mangum and CPL. It allows for CPL results to be generated in CPSI.
7. **Cost:** \$0
8. **Prior Cost:** 0
9. **Term:**
10. **Termination Clause:** None

Hospital Vendor Contract Summary Sheet

1. Existing Vendor New Vendor
2. **Name of Contract: Boston Scientific**
3. **Contract Parties: Boston Scientific/MRMC**
4. **Contract Type Services: Service**
5. **Impacted Hospital Departments: Clinic**
6. **Contract Summary:** Boston Scientific will provide holter monitors to the clinic for placement on patients that the clinic provider feels will benefit the patient. After which Boston Scientific will provide the provider with a report.
7. **Cost: \$0**
8. **Prior Cost: 0**
9. **Term:**
10. **Termination Clause: None**



COMPLETE SERVICE OFFERING SCALED TO YOUR NEEDS

SPLIT BILL MODEL

- Preventice performs technical portion of the billing service
- Preventice is responsible for the monitoring service, device ownership and refurbishment

PURCHASE MODEL*

- Customer purchases monitors from Preventice and owns the devices
- Customer is responsible for cleaning, maintenance and standard troubleshooting
- Preventice provides the remote cardiac monitoring services for a fee per patient study

PATIENTCARE SALE

PatientCare is a self-managed, cloud-based, HIPAA-compliant platform that allows to gather, interpret and manage near real-time patient data independently and rapidly

- Preventice sells the BodyGuardian® Remote Monitoring System to the account
- Customer is responsible for the ownership and refurbishment
- Customer utilizes PatientCare (similar to Holter software) to generate reports
- Report triage is driven by a high level of accuracy through machine learning
- A flat rate software subscription fee per device is charged monthly
- Customer may select an additional option of having Preventice monitoring center serve as a support system for monitoring and troubleshooting
- All physiologic data is available to the Customer, regardless of service modality

*Optional Services: EMR Integration, Report Personalization, Customizable Web Portal. Service charges may apply.

CERTIFICATE OF OWNERSHIP & TRANSFER OF TITLE

Sellers Account Name: Mangum Regional Medical Center ("Seller") hereby certifies that the following equipment is owned by Seller, free and clear of all claims, liens, encumbrances, and security interests.

<u>EQUIPMENT TYPE</u>	<u>SERIAL NO</u>
Dimension EXL 200	DR275414

For and in consideration in the amount of \$1.00, title to above system (s) is hereby transferred to Siemens Healthcare Diagnostics ("Siemens Diagnostics") as a trade-in, in connection with Seller's acquisition of other Siemens Diagnostics equipment.

All property is sold FOB Seller's facility. Title and risk of loss shall pass to Buyer upon delivery.

AGREED TO BY SELLER

Signature: _____

Print Name:

Print Title:

Institution:

Address: One Wickersham Drive
Mangum, OK 73554

Date: 6/25/24

Siemens Healthcare Diagnostics Inc.

511 Benedict Ave
Tarrytown, NY 10591

Hospital Vendor Contract Summary Sheet

1. Existing Vendor New Vendor
2. **Name of Contract: Siemens Dimension Release**
3. **Contract Parties: Siemens/MRMC**
4. **Contract Type Services: Lab Interface**
5. **Impacted Hospital Departments: Hospital**
6. **Contract Summary:** Certificate of Ownership and Trustee of Title, releases the title of the Dimension EXL200 serial number DR275414.
7. **Cost: \$0**
8. **Prior Cost: 0**
9. **Term:**
10. **Termination Clause: None**