



**Petersburg Borough  
Petersburg Medical Center**

**Meeting Agenda  
Hospital Board  
Regular Meeting**

12 South Nordic Drive  
Petersburg, AK 99833



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Thursday, July 24, 2025

5:30 PM

Assembly Chambers

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Please copy and paste the link below into your web browser to join the webinar:  
<https://us06web.zoom.us/j/83266592300?pwd=a27LWfE0i7s8RfNaPIOU9QZi6CYOjb.1>  
Webinar Id: 832 6659 2300  
Passcode: 692470

**1. Call to Order/Roll Call**

- A. Call to Order
- B. Roll Call

**2. Approval of the Agenda**

**3. Approval of June 26, 2025 Board Minutes**

- A. Approval of the June 26, 2025, Hospital Board Minutes

**4. Visitor Comments**

**5. Board Member Comments**

**6. Committee Reports**

- A. Board Vice President Cindi Lagoudakis with verbal report.
- B. Board Member Stratman will report out in August.
- C. Board Member Stratman will report out in August.

**7. Reports**

- A. Home Health  
Laura Holder submitted a written report.
- B. Imaging  
Sonja Paul submitted a written report.

- C.** Lab  
Violet Shimek submitted a written report.
- D.** Long Term Care  
Helen Boggs submitted a written report.
- E.** Patient Financial Services  
Carrie Lantiegne submitted a written report.
- F.** New Facility  
J. Wetzel with Arcadis submitted a written report.
- G.** Quality and Infection Prevention  
Stephanie Romine and Rachel Kandoll submitted written reports.
- H.** Executive Summary  
CEO, P. Hofstetter, submitted a written report.
- I.** Financial  
J. McCormick submitted a written report

## **8. Old Business**

## **9. New Business**

## **10. Next Meeting**

- A.** Next meeting scheduled for August 28th, 2025, in Borough Chambers.

## **11. Executive Session**

- A.** By motion, the Board will enter into Executive Session to consider medical staff appointments/reappointments and/or any legal concerns.

## **12. Adjournment**



**Petersburg Borough**  
**Petersburg Medical Center**

12 South Nordic Drive  
 Petersburg, AK 99833

**Meeting Minutes**  
**Hospital Board**  
**Regular Meeting**



Thursday, June 26, 2025

5:30 PM

Assembly Chambers

**1. Call to Order/Roll Call**

Board President Cook called the meeting to order at 5:30PM.

Board President Cook conducted Roll Call:

**PRESENT**

Board President Jerod Cook  
 Board Vice President Cindi Lagoudakis  
 Board Secretary Marlene Cushing  
 Board Member Kimberley Simbahon  
 Board Member Joe Stratman  
 Board Member Jim Roberts

**ABSENT**

Board Member Heather Conn

**2. Approval of the Agenda**

Motion made by Board Vice President Lagoudakis to approve the agenda, Seconded by Board Member Simbahon. Voting Yea: Board President Cook, Board Secretary Cushing, Board Vice President Lagoudakis, Board Member Simbahon, Board Member Stratman, and Board Member Roberts.

**3. Approval of Board Minutes**

A. Approval of May 29, 2025, Hospital Board Minutes.

Motion made by Board Member Stratman to approve May 29, 2025, Hospital Board Minutes, Seconded by Board Secretary Cushing. Voting Yea: Board President Cook, Board Secretary Cushing, Board Vice President Lagoudakis, Board Member Simbahon, Board Member Stratman, and Board Member Roberts.

**4. Visitor Comments**

Christopher Ramlogan commented on work performed by his business for PMC and expressed dissatisfaction with the process.

Laura Holder commented on her leaving PMC Home Health to pursue other endeavors and expressed her gratitude for fellow employees and the importance of Home Health in Petersburg.

## **5. Board Member Comments**

Board Secretary Cushing announced that the Paddle/Pedal Battle fundraiser for the Petersburg Medical Center Foundation will take place on July 19, 2025. Proceeds will support scholarships for high school students and staff pursuing continued education.

## **6. Old Business**

A. PMC Water System Isolation and RPZ Assembly Replacement

## **7. Committee Reports**

A. Resource

Board Vice President Lagoudakis reported:

PMC's financial position remains strong, supported by slightly increased patient volumes across service areas. A Medicare interim rate review is underway, which may result in repayment of funds received in January. Seasonal financial fluctuations are expected, though certain offsetting expenses—such as small equipment purchases—can help balance the impact. While Medicare and Medicaid reimburse at cost, commercial insurers do not, which continues to influence revenue.

The in-house billing team is performing well, and the 340B program remains a steady revenue source, with possible retroactive reimbursements for approved medications. This program plays a vital role in supporting care for low-income and uninsured patients.

Following the discontinuation of HRG billing services, operating expenses have decreased and PMC's days cash-on-hand have improved. A previous issue related to PERS retirement payments has also been resolved.

PMC's investment fund continues to grow under a conservative management strategy. The organization is actively pursuing both annual and multi-year grants, including a collaborative HRSA grant with two other critical access hospitals in Alaska. Although a school-based grant was recently recalled, PMC is working with the State to explore alternative funding sources.

Special thanks were extended to the Elks Lodge for their generous donation of kayaks to support PMC's Orca Camps.

## B. LTC

Board Secretary Cushing reported:

At the June 18 Long-Term Care Quality meeting, progress was reported on addressing polypharmacy—ensuring long-term care patients on multiple medications have appropriate, streamlined prescriptions. A visiting psychiatrist who typically provides telemedicine services conducted in-person visits, trained providers, and met with several residents.

The main focus of the meeting was developing a fair and transparent waitlist process for long-term care beds, given the growing demand. The next meeting is scheduled for July 16; Board Member Stratman has offered to attend in place of Board Secretary Cushing.

## 8. Reports

### A. Human Resources

Cindy Newman submitted a written report.

Board President Cook noted the report of 13 vehicles and 18 apartments in use as a reflection of the significant number of traveling and contracted employees at PMC, highlighting the resources required to support them.

### B. New Facility

Justin Wetzel with Arcadis submitted a written report.

Board Member Roberts asked about the grand opening date for the WERC building. Justin Wetzel from Arcadis responded that there is no exact date yet, as they are still awaiting FF&E and the MRI magnet. Ideally, the opening would take place in September, but no exact date is confirmed.

### C. Quality and Infection Prevention

Stephanie Romine and Rachel Kandoll submitted written reports.

### D. Executive Summary

CEO Phil Hofstetter submitted a written report with supporting documents.

Board Member Roberts asked if the staircase shown in a WERC building site photo would have handrails. Justin Wetzel from Arcadis confirmed that handrails are currently being manufactured.

Over the past month, efforts focused heavily on communication and advocacy. An op-ed was published—written with support from grant writer Katie—addressing concerns about potential Medicaid cuts and their impact on rural communities. Letters were also sent to Senators Murkowski and Sullivan, which are included in the board packet.

The CEO participated in a press conference hosted by the Alaska Cancer Association via Zoom from Anchorage. Summer programs, including the Kinderskog program and various camps, are in full swing and seeing strong engagement.

Patient volumes have remained steady and high, particularly in the ER and inpatient departments, with fewer fluctuations than usual. Swing bed usage is slightly down from previous months but still above historical norms.

Dr. Sonkiss, PMC's telepsychiatry partner, visited on site, strengthening collaboration with providers and patients. His visit was successful and further engagement is planned. The dermatology clinic, led by PA French, also returned and saw over 100 patients, receiving highly positive feedback.

On-site visits to the WERC building continued, including walkthroughs with the superintendent and both Wolf and Justin with Arcadis. These visits helped deepen understanding of the layout and future potential of the facility.

Lastly, the CEO noted that much was covered in the recent Resource Committee meeting, particularly on financials, which will be presented by CFO, J. McCormick.

#### E. Financial

J. McCormick submitted a written report.

*Action Required: Approval of revised budget for FY25*

J. McCormick gave overview of submitted report.

K. Bryson gave overview of submitted grants report.

Motion made by Board Secretary Cushing to approve revised budget for FY25 as presented, Seconded by Board Member Roberts.

Roll Call Vote:

Board President Jerod Cook- YEA

Board Vice President Cindi Lagoudakis- YEA

Board Secretary Marlene Cushing- YEA

Board Member Kimberley Simbahon- YEA

Board Member Joe Stratman- YEA

Board Member Jim Roberts- YEA

ABSENT

Board Member Heather Conn

By motion, Petersburg Medical Center's Board of Directors approved the revised operating budget for FY 2025 as presented.

## 9. New Business

#### A. Budget Presentation: Informational only

J. McCormick presented overview of submitted budget for Fiscal Year 2026.

#### B. Operating Budget

*Action Required: Approval*

J. McCormick submitted the Operating Budget for board approval.

Motion made by Board Vice President Lagoudakis to approve operating budget for FY26 as presented, seconded by Board Member Roberts.

Roll Call Vote:

Board President Jerod Cook- YEA  
 Board Vice President Cindi Lagoudakis- YEA  
 Board Secretary Marlene Cushing- YEA  
 Board Member Kimberley Simbahon- YEA  
 Board Member Joe Stratman-YEA  
 Board Member Jim Roberts- YEA

ABSENT

Board Member Heather Conn

By motion, Petersburg Medical Center's Board of Directors approved the final operating budget for FY 2026 as presented.

#### C. Capital Budget

*Action Required: Approval*

J. McCormick submitted the Capital Budget for board approval.

Motion made by Board Member Simbahon to approve the capital budget for FY26 as presented, seconded by Board Vice President Lagoudakis.

Roll Call Vote:

Board President Jerod Cook- YEA  
 Board Vice President Cindi Lagoudakis- YEA  
 Board Secretary Marlene Cushing- YEA  
 Board Member Kimberley Simbahon- YEA  
 Board Member Joe Stratman-YEA  
 Board Member Jim Roberts- YEA

ABSENT

Board Member Heather Conn

By motion, Petersburg Medical Center's Board of Directors approved the final capital budget for FY 2026 as presented.

### 10. Next Meeting

- A. Propose meeting change to July 24, 2025, at 5:30pm at Borough Chambers.

Next meeting confirmed: July 24, 2025, at 5:30pm at Borough Chambers.

### 11. Executive Session

- A. By motion the Board will enter into Executive Session to discuss legal matters, medical appointments or reappointments.

Motion made by Board Member Stratman to enter into Executive Session to discuss legal matters, medical appointments and/or reappointments, Seconded by Board Member Roberts. Voting Yea: Board President Cook, Board Secretary Cushing, Board Vice President Lagoudakis, Board Member Simbahon, Board Member Stratman, and Board Member Roberts.

Reconvened post Executive Session.

Motion made by Board Member Cushing to reappoint Dr. Courtney Hess, Dr. Mark Tuccillo, and Dr. John Raster to medical staff, Seconded by Board Member Roberts. Voting Yea: Chairman Cook, Board Member Cushing, Board Member Lagoudakis, Board Member Simbahon, Board Member Stratman, and Board Member Roberts.

## **12. Adjournment**

Motion to adjourn made by Board Vice President Lagoudakis, Seconded by Board Member Roberts.

Voting Yea: Board President Cook, Board Secretary Cushing, Board Vice President Lagoudakis, Board Member Simbahon, Board Member Stratman, and Board Member Roberts.

Meeting adjourned at 6:50pm.





## Home Health Report July 2025

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### **Workforce Wellness**

Ruby Shumway RN has accepted the position of home health manager and will be taking over in a leadership role at the end of July 2025. Laura Holder RN has resigned her position but remains available to assist in the transition period. Ruby has been a wonderful addition to our team and will make an excellent leader. Jacque Grone retired July 1, 2025. We would like to thank her for her service, and we hope she enjoys her much deserved retirement. Bex Keys has taken on her role of office manager after a long orientation period with her predecessor. We are glad to have her in her new role! Huddles remain on the schedule three mornings a week to review caseloads and collaborate. This also helps to improve patient care and creates cohesiveness among staff. Twice a month the therapy department joins us for case review and coordination. (IDT meetings.) These are documented in the patient electronic medical record and have improved continuity of care. We have no travel staff in the department, which was a primary goal for 2025.

### **Community Engagement**

The priority of this department is to reach as many community members as possible. Whether through traditional home health services, program extensions or working directly with other community agencies. Ongoing projects include- partnering with Mountain View Manor, waiver and care coordinating services, and assistance with the quality programs throughout the hospital.

### **Patient Centered Care**

We continue to see high acuity patients in our community as our community ages with limited infrastructure in place to meet needs. We are happy to share that Brandy Boggs has provided workshops in the community to educate about planning ahead for care needs and aging. We encourage locals to participate! It has been well received with positive feedback.

### **Facility**

PIA continues to be our home base of operations, though our clinical nurses are working from home offices. We look forward to sharing space with PMC within the primary building once public health is relocated to the new facility space. We continue to value and appreciate our collaboration with PIA.

### **Financial Wellness**

Currently our finances benefit from the removal of the travel staffing which was a large portion of our staffing budget. We are stable at 22+ patients on caseload.

*Lastly, I'd like to thank PMC for the opportunity to care for our community. It was an honor. I think Ruby Shumway is a fantastic leader and I look forward to seeing where she takes the department moving forward. She, and the rest of the team at home health, have my sincere and ongoing gratitude and support. Thank you.*

**Submitted by:** Laura Holder, RN Home Health Manager

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## Radiology Report July 2025

### Workforce Wellness

Staffing remains three full-time technologists currently one being filled by a contract technologist. This level of staffing allows employees to comfortably take PTO while the other two can cover with a little higher call hour volume while the third technologist is gone. Technologists have been using PTO this spring which has made for some tight staffing for the last couple months but has been alright. One full-time technologist position is still listed. We are also preparing to post a full-time MRI technologist position. We are also working with staffing companies to bring in a travel MRI technologist while we try and fill a full-time position. Two technologists took a 40-hour academic MRI training course and continue to work on self-study MRI training when time permits.

### Community Engagement

We continue to work with physicians with ordering and finding preventative screening exams that patients could benefit from. I spoke on KFSK live regarding an MRI introduction and update.

### Patient Centered Care

Lots of work has been put into MRI coming to PMC. We have been working on formulating policies and procedures, exam protocols and talking through patient workflows. We are working closely with the building crews, architects, radiologists, and Siemens during this project.

### Facility



The new MRI machine has officially been delivered and set into place as of 7/14. This build is continuing to look like it is on track. Mechanical install will continue, calibrations will start. After that is all complete application training with staff will happen and a physicist inspection will take place.

**Financial Wellness**

Patient exam statistics remain consistent and gross patient revenues are on track. MRI exams are being built and priced with CFO input and getting ready for use.

**Submitted by:** Sonja Paul RT(R)(M), ARDMS

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## Laboratory Report July 2025

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### **Workforce Wellness**

Staffing remains relatively stable in the Laboratory. One part-time Lab Assistant and one full-time Lab Assistant each transferred to different departments, however we were able to hire a new full-time Lab Assistant who has previous experience in phlebotomy and specimen processing.

Our Laboratory Technician is in the final months of her online program to become a 4-year Medical Laboratory Scientist. One Lab Assistant is currently enrolled in an online 2-year Medical Laboratory Technician program and will begin his clinical rotations here at PMC in January.

### **Community Engagement**

One of the Medical Laboratory Scientists, along with staff from other departments throughout PMC, attended the Petersburg High School Career Fair on March 21st. It was great to share job options and career development opportunities within the Lab!

### **Patient Centered Care**

We received notification from one of our vendors earlier this year that they will stop manufacturing the cartridges we use to track heart failure. This prompted Lab to search for a new platform that would meet our community's needs and improve the quality of our test menu. Beginning in August, the following tests will be available: High-sensitivity Troponin I, NT-proBNP (heart failure monitoring), high-sensitivity CRP (cardiovascular and peripheral vascular disease risk), and quantitative D-Dimer (more accurate and better management of pulmonary embolism and deep vein thrombosis).

### **Facility**

Our current chemistry instrument is aging out and the operating system can no longer be updated. Additionally, it is difficult to bring in new chemistry tests since our current instrument is at capacity for onboard reagents. In the next two years we plan to bring in a new chemistry analyzer that will allow us to expand our in-house test menu to include Vitamin D, as well as various hormones (ex. Testosterone, LH, and FSH).

### **Financial Wellness**

Lab and Ancillary registration continue to optimize the prior authorization process, so prior authorizations don't become a barrier to our patients receiving care. Additionally, HIM and Lab continue to meet and review coding queries to prevent claim denials by insurance companies. The discussions continue to be extremely educational for both departments, and we hope it will allow us to stay a step ahead of changes that affect reimbursement, keeping out of pocket expenses for our patients as low as possible.

**Submitted by:** Violet Shimek, MLS (ASCP)<sup>CM</sup>

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## Long Term Care Report – July 2025

### **Workforce Wellness**

#### **Nursing:**

0800 – 1700 Mon-Fri: 1 LTC DON

0600 – 1830: 1 Staff Nurse

1800 – 0630: 1 Staff Nurse

0600 – 1830: 2 CNA

1800 – 0630: 2 CNA

0700 – 1900: 1 CNA

0800 – 2000: 1 CNA (Sat-Sun)

#### **Activities Current Schedule:**

Activities Coordinator: Monday-Friday (0800 – 1700)

Activities Aide: Tue-Fri (1100-1900) and Saturday (1200-1900)

Activities Aide: Mon-Thurs (0700-1500) and Sunday (0700-1000)

Floor shifts are usually 12.5 hours - staff who are working typically do not leave the facility. We encourage participating in the wellness opportunities that are available through the organization. We have had changes to our activities department which makes it difficult to staff on the weekend. Due to this, we have added CNA staff on the weekend.

### **Community Engagement**

LTC welcomes visitors and families. Volunteers have been coming in to play music, bingo, sing to and with residents, read to residents, etc. Staff work with residents to get them out into the community as often as they would like. Some residents have been enjoying Bingocize, celebration of life gatherings, church of choice, volunteering at the pilot etc. It is a goal to have activities staff working on Sunday to help accommodate participation in church of choice.

### **Patient Centered Care**

PMC LTC is currently in our survey window (December 2024 – June 2025). Surveyors can come at any time unannounced during this timeframe, or after if they are late. The previous survey results are below:

PMC LTC had Survey with federal oversight March 4<sup>th</sup>-8<sup>th</sup>. We received 5 tags on the survey.

Free from Unnecessary Psychotropic Meds/PRN Use F758 CFR(s): 483.45(c)(3)(e)(1)-(5).

Food in Form to Meet Individual Needs F805 CFR(s): 483.60(d)(3).

Payroll Based Journal F851 CFR(s): 483.70(q)(1)-(5).

Infection Prevention & Control F880 CFR(s): 483.80(a)(1)(2)(4)(e)(f)

7 AAC 10.900(b) Background Check N100

PMC LTC was put back into substantial compliance for the health side of the survey effective 4/25/24 after the health revisit.

The LTC State survey is overdue at this point. We have been expecting them to show up at any time. Typically, they arrive on a Monday afternoon.

The departments that touch LTC are all fantastic. Rehab, dietary, lab, physicians, etc. go above and beyond for the residents to make sure that they are happy, healthy, and cared for. Each resident has a specific plan in these

areas. PMC truly delivers resident centered care. On Monday, Wednesday, and Friday we have a multidisciplinary meeting to discuss each resident and their needs/concerns/changes. Dr. Hess has been in attendance for some of these meetings as well. Staff know the residents and are advocates for their care. It is not a one size fits all system.

With summer finally arriving, LTC will have a picnic on 7/16/25 at Sandy Beach. Most residents and patients are planning to attend.

Petersburg Medical Center Nursing home has a 5-Star rating on Nursing Home Compare as of June 25, 2025. Health inspection = 5/5 stars, Staffing = 4/5 stars, and Quality measures = 4/5 stars.

### **Facility**

LTC continues to purchase the items that are needed for residents when the need arises. Two new recliners have been ordered, one has arrived.

We have an obsolete pressure alarm system for falls safety and prevention. PMC has been working with a new vendor, VirtuSense, as a new solution for fall prevention.

Continued issue: Due to the age of the building, there are no oxygen connections in the three rooms in the older part of LTC (212, 215, 216). If residents require oxygen in those rooms a concentrator is used. We were unable to move a resident into one of the larger single rooms due to there not being oxygen connections in those rooms.

PMC staff have been preparing for a survey by keeping hallways clean, items labeled, clutter level low, etc.

### **Financial Wellness**

As of today, the LTC census is 14 residents. 13/14 residents have Medicaid. The average wait time for Medicaid continues to be long – about 3-6 months. The nursing department currently has 4 CNA travelers and 7 RN travelers. When staff call out sick for a shift, managers look at the census and current staffing then decide if the shift should be filled. During high census times, this leads to an increase in overtime hours.

**Submitted by:** Helen Boggs, RN

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## Patient Financial Services Report July 2025

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### **Workforce Wellness**

Patient Financial Services (PFS) is fully staffed with the addition of a Cash Poster in July 2025. PFS, Billing, and Cash Posting are working together to maintain consistent claim submissions and reimbursements. We are seeing a steady decline in AR days due to prompt processing and routine cleanup of Cerner Aging AR issues. PFS and remote billers Zoom daily to troubleshoot claim issues in Cerner and SSI (claim scrubber), enabling immediate resolution and submission to payers.

Full staffing enables PTO flexibility, with team members cross-trained to cover absent colleagues. This gives our team a much-needed break and helps reduce burnout. We continue to fine tune our processes as our team is fully trained and getting comfortable with their workflows.

### **Community Engagement**

Our team continues to streamline the Rev Cycle process. We are currently working on a deep dive into Aged AR – both billed and unbilled. We are identifying encounter-related issues and collaborating with departments for resolution and prevention in the future. PFS collaborates daily with Coding, IT, and Registration on current procedures, system functions, and policy.

We also have weekly virtual meetings between PFS and Home Health to address claim submission issues, reimbursement challenges, and opportunities for mutual support.

One area we are closely monitoring is the Clean Claim Rate, which currently sits at 82%. While this is below our target, we are actively addressing key issues preventing claims from being submitted to insurance. The most frequent challenges involve coding (incompatible billing codes), NDCs (National Drug Codes), and NPIs (National Provider Identifiers). In some cases, the required information exists in the encounter but does not flow correctly to the claim.

To help catch these issues before a claim is submitted and potentially denied, we have implemented edits in both Cerner and SSI. These stops allow billers to make necessary corrections before the claim reaches the payer. As we identify new patterns or issues, we continue to build additional edits to improve the process and raise our Clean Claim Rate.

### **Patient Centered Care**

In June 2025, PFS and Accounts Payable finalized the retirement of CPSI (the legacy EHR), allowing full focus on current systems.

PFS is actively engaged in Digital Engagement Planning: Upcoming collaborations with IT are planned to explore features in Cerner for Digital Patient Engagement, enhancing patient interaction through digital platforms.



The Self-Pay team in the PFS office continues to make a huge contribution to patient care. They are reaching out to patients with aging balances to offer help such as interest free pay plans, financial assistance, and Medicaid enrollment assistance. These personalized calls improve patient experiences, patient satisfaction and support financial well-being.

**Facility**

The PFS business office space is functioning well for our team. Everyone has a dedicated workspace and the tools they need to be productive. As we've grown and welcomed new team members, the overall noise level has increased. To support a quieter and more focused environment, we've introduced portable sound panels and noise-cancelling headphones for use during calls and meetings. These adjustments are helping minimize distractions and maintain a comfortable workspace for everyone.

**Financial Wellness**

The PFS teams are thriving—fully staffed, operationally efficient, and deeply focused on patient-centered care. We are not just managing claims—we are enhancing patient access, streamlining financial workflows, and strengthening organizational resilience. Our department is truly blessed to have a great team that works well together.

**Submitted by:** Carrie Lantiegne

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**Petersburg**  
MEDICAL CENTER

**ARCADIS**

## New Facility Construction Report July 2025

### **Sitework**

The Wellness Drive up to the WERC/Future Hospital delineation line is now a complete concrete drive, and the entire parking area has also been paved with concrete and striped with paint lines. This had previously been designed/planned for gravel only for budget reasons, but cost savings during construction allowed for this to be included within the total budget allotment. The total amount of additional work completed at no increase in the contract GMP is a value of \$420,000, and is another win and validation of positive outcomes with using the CM/GC to deliver the project. The new focus for exterior work will transition to landscaping efforts of finalizing the layout and details.

### **WERC Building**

The Substantial completion certificate for the base building was issued on June 2<sup>nd</sup>. Punch list items for adjustments or corrections will be ongoing through July. This is also tied to ASI-19, which has minor modifications to the building to accommodate add-ons and adjustments within the FF&E package. The Certificate of Occupancy was issued by the SOA at the end of June as planned, and some early setup occupancy has begun. The primary focus for July has been I.T. set up, MRI magnet arrival, and the FFE installation, all planned for near completion by the end of July.

The MRI Addition is now 98% complete. The magnet arrived in Petersburg one day earlier than planned on July 14th. The magnet was successfully offloaded and installed in the building by the end of the following day. The contractor is collaborating with ETS Lindgren and Siemens to rebuild the interior/exterior area where the magnet came in. Siemens will stay on site for the next couple of weeks to install their support equipment for the MRI magnet. After the magnet has gone through a regeneration cycle, Siemens will then begin testing and calibration, which should take an additional week or more.

Furniture, Fixtures, and Equipment (FF&E) will be installed on July 20<sup>th</sup>; this will be a joint effort by Arcadis, Dawson, Capitol Office, and PMC. Originally, there were 3 waves of FFE planned, but the first two waves have now been consolidated in Seattle and will arrive at the same time and create additional efficiencies for the project team and overall installation time frame.

### **New Hospital Design**

Phase 5 Permit for the continuation of the Wellness drive to Excel Street has been approved, and the credit for the Natzuhini Bay Mitigation Bank has been paid to offset the impacts of the wetlands following ACOE requirements. Bettisworth North is creating an updated design package specifically for this work, and then the contractor will provide pricing for this additional work. This work will be paid for with reserved HRSA grants as part of the overall future Hospital/LTC pre-construction sitework.

### **Upcoming Construction Activities**

- July – Punch list, Exterior siding (MRI Addition), FFE Install Wave 1/Wave 2
- August – Landscaping, FFE Install Wave 3

- Sep – Final Set up and Completion

### **Budget**

- WERC budget – \$22.7M (Stacked)
  - CCPF Treasury Grant – \$20M
  - HRSA Grant – \$2.7M
- Hospital Sitework & 35% Schematic Design – \$5.3M
  - HRSA Grant – \$5.3M

### **Siemens FreeMax MRI Magnet**



**Parking Lot – Southeast View**



**Submitted by:** Justin Wetzel- Arcadis Project Manager





## Quality Report July 2025

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### **Workforce Wellness**

Since returning from vacation on July 1st, I have increased support activities to the home health department and team during this time of transition that coincides with staff being out on PTO. We thank Laura Holder for her service to PMC and the community. We welcome Ruby Shumway to the Home Health leadership position.

I continue to work towards a Certified Professional in Healthcare Quality (CPHQ) certification supported by Alaska Hospital & Healthcare Association. This certification focuses on several domains including quality leadership and integration, performance and process improvement, regulatory and accreditation, health data analytics, and patient safety.

### **Community Engagement**

Fall Prevention-the Wellness department is currently evaluating a new evidence-based class that is likely to be offered to the public this fall.

### **Patient Centered Care**

Currently reviewing LTC QAPI plan to incorporate new guidance released by CMS.

Home health continues to utilize the End-of-life physician order set to streamline communication, orders, and provide timely interventions for care. Ongoing input collected from nursing staff to ensure processes in place remain effective.

Continue working to connect to departments within PMC, share resources, and offer support with quality improvement initiatives. Assistance is provided with incident review to help in identifying potential processes or areas where improvement could be reached or is needed. There is increasing emphasis on the collection, maintenance, and availability of actionable data to help guide efforts.

### **Facility**

LTC and CAH Quality Committee will meet on the 16th to review recent data and quality metrics. Updates will be provided on quality improvement projects underway. The new meeting structure for LTC Quality Committee seems to be working well by allowing more time for in-depth discussion on priority topics and decreasing the reporting burden.

### **Financial Wellness**

No new updates in this area.

**Submitted by:** Stephanie Romine, RN

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## Infection Prevention Board Report July 2025

**Workforce Wellness**

I am the lone Infection Preventionist for PMC.

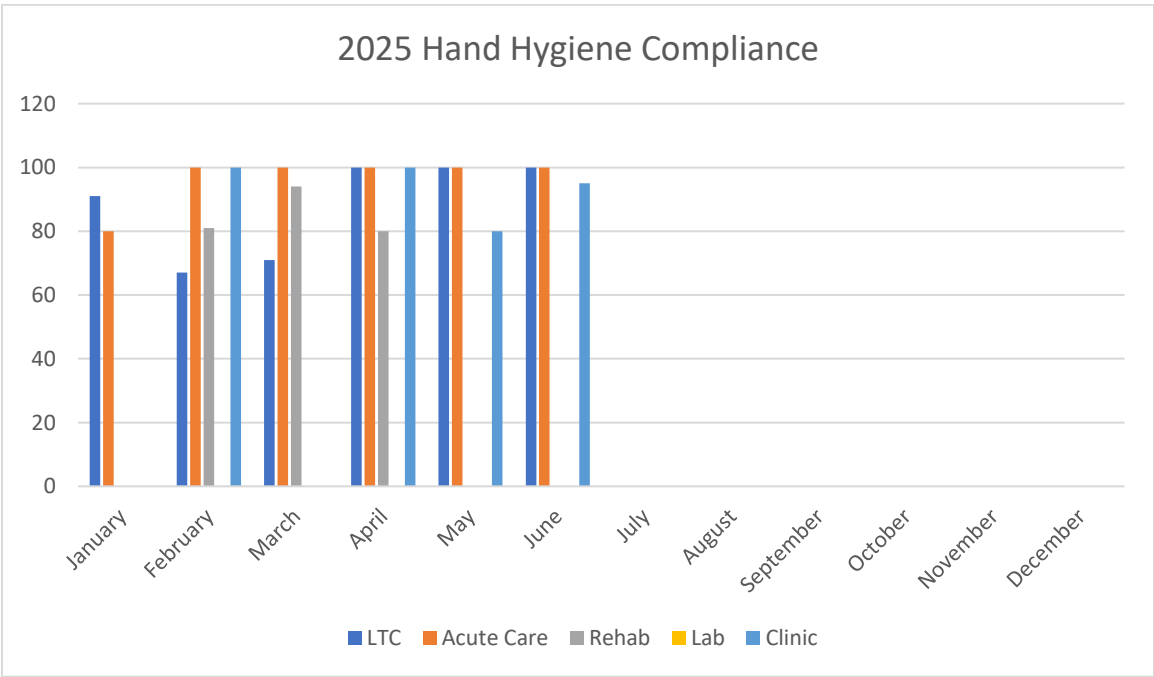
**Community Engagement**

I have been continuing to look for ways to update and improve PMC. I work with many different departments at PMC to ensure compliance with regulations. Last month in Environment of Care Rounds, our team of nursing, EVS, and management focused on making sure our PMC signage was compliant with CMS and HIPPA. This month we will do general rounds, in addition to rounds in the lab.

I will continue working with our PMC’s contracted pharmacist to improve our Antimicrobial Stewardship program.

**Patient Centered Care**

*2025 Hand Hygiene Compliance*



*LTC 2025 Infection Prevention Metrics*

- Urinary Tract Infections (UTI): 2
- Catheter associated Urinary Tract Infections (CAUTI): 0
- Clostridium Difficile Infections: 0
- Covid-19 Infections: 0
- Influenza Infections: 0
- RSV Infections: 0

**Facility**

I continue to work closely with the maintenance department to identify and correct any damage, structural or cosmetic, that I find in our facility. Our aging facility continues to cause many obstacles to meet current IPC standards.

**Financial Wellness**

No changes to this area.

**Submitted by:** Rachel Kandoll, RN, BSN, Infection Preventionist

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## PMC CEO Board Report July 2025

Mission Statement: Excellence in healthcare services and the promotion of wellness in our community.

Guiding Values: Dignity, Integrity, Professionalism, Teamwork, and Quality

Workforce Wellness: *Goal: To create a supportive work environment and promote the physical and mental well-being of hospital staff to improve retention and overall productivity.*

- July 2: Coworkers recognized Erica O'Neil for her dedication to teamwork and patient care through paylocity employee awards and recognition.
- July 9: Medstaff meeting
- July 10: Employee meals available for purchase in house- employees can now buy healthy meals while at work. Salad wraps, fruit cups, yogurt parfait, numerous salad options, and more to come.
- July 17 : Office Hours/Coffee with Phil
- July 18: Environmental Care Rounds focusing on lab department.
- July 18: Manager Meeting
- The Employee Health Personify program remains active. Over the past month, employees participated in a team-based step challenge to see which group could accumulate the highest total number of steps.



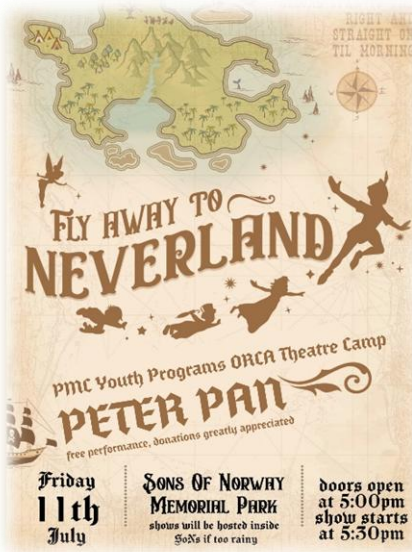
Community Engagement: *Goal: To strengthen the hospital's relationship with the local community and promote health and wellness within the community.*

- July 2: Kinderskog Mud Day!
- July 7: Submitted report for Borough Noon Assembly Meeting.
- July 8: Published quarterly newsletter to our PMC public website [PMC Quarterly Newsletter](#)

- July 9: KFSK broadcast regarding PMC offering Medicaid and Medicare information sessions amid federal cuts.
- July 9, 11, 12(x2): Asset Protection Planning and Long-Term Medicaid sessions offered to public. Brandy Boggs saw 29 people in sessions and plans to return in October.
- July 16: LTC Picnic at Sandy Beach, open to public
- July 20: Walk with a Doc -Dr. Justin Morgan leads discussion on gut health, fiber, and bacteria.



- July 24: KFSK Live
- July 24: Hospital Board Meeting open to the public
- Ongoing this summer: Kinderskog programs and ORCA camps launch featuring theater camps, FUEL Up, Kayak Expedition, Wiffleball, Flyfishing, and Wild Trails.
- Ongoing: Bingocize and Tai Ji Quan, part of fall prevention programs





## July 19<sup>th</sup>, 2025: Pedal/Paddle Battle

- The 2025 Pedal/Paddle Battle was a huge success – raising more funds than ever! Participants included 23 paddlers and 15 bikers this year, who together raised \$8,501 for the cause. Corporate sponsors included several returning and new sponsors this year, totaling \$15,700.



- The total funds raised was \$24,201 – surpassing all past Pedal/Paddle Battle fundraisers by several thousand dollars.
- This year's luck prize winners were Nancy Berg (dry bag), Pat Sessa (paddle board), and Brenna McMahon (AK Airlines tickets).



- A huge thank you to all the volunteers from the PMC Foundation, PMC Board, Rotary, USCG Auxiliary, Wheelhouse Bikes, and our safety boats for making this a safe and successful event!



- Corporate sponsors included: Alaska Airlines, Lee's Clothing, Rocky's Marine, Rexall Drug, Petersburg Properties, Anchor Properties, First Bank, USI, AP&T, PMHS, Last Frontier Eye Care, Dawson, Arcadis, and Bettisworth North.





Patient Centered Care: Goal: To provide high-quality, patient-centered care, and promote wellness for patients.

- Currently we are advertising for an additional physician to join our team.

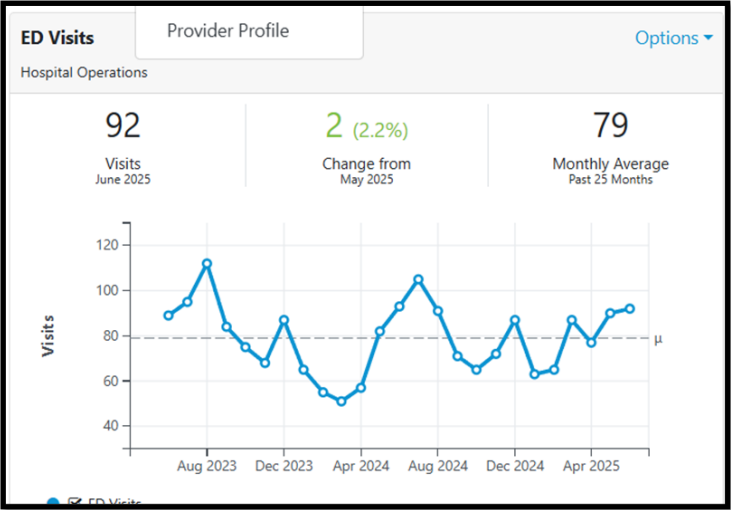


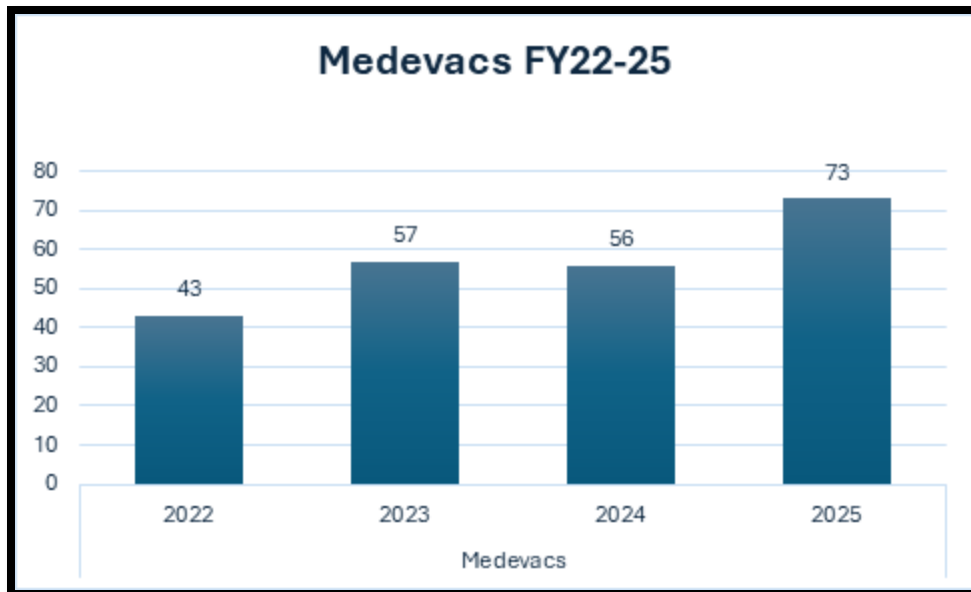
- Joy Janssen Clinic Access to Primary Care: We remain fully staffed with 4 Physicians but are actively looking for a provider to fill Dr. Morgan's position as he is leaving Petersburg later this fall. We are also staffed with 2 mid-level practitioners. Clinic is open and available M-F 8AM-5PM, and Saturday 8AM-12, 1PM-4:30PM
  - Same day appointments for urgent care are readily available.
  - Next available appointment with primary care provider averages 12 business day wait time
  - Third available appointment with primary care remains an average 14 business days. -The change in average wait times is due to provider PTO over the summer months. In July we have two providers taking time off so their next



available is much farther out which lowers the overall average. Clinic is maintaining same day availability for acute and time sensitive appointments.

- Psychiatry services are ongoing via telehealth.
- Audiologist, Phil Hofstetter, continues to see patients in Specialty Clinic and WERC building.





New Facility: *Goal: To expand the capacity and capabilities of the community borough-owned rural hospital through the construction of a new facility, while taking into account the needs and priorities of the local community.*

- Arcadis submitted a report with a detailed update on the new facility: Phase 5 permit for the continuation of the Wellness drive to Excel St has been approved.
- Base sitework nearing completion.
- Meetings regarding landscaping for WERC building are in process.
- Initial furniture, fixtures, and equipment have been ordered and some fixtures are being installed (July 20<sup>th</sup>).
- MRI addition is 98% complete. (See MRI magnet photos in Arcadis and Imaging reports)
- We continue to be on track and on budget for the WERC building.
- Transition planning with the departments that will move into WERC building, as well as departments that will occupy the vacated space in our existing facility, continue monthly. Public Health has a move in start date of August 1<sup>st</sup>.
- Updates: Project updates are available on the PMC website under the “New Facility & Planning” tab. Photos are updated on social media every Friday afternoon.
- Official opening date is still pending as we await the arrival of key elements.
- CON has been completed and submitted

Financial Wellness: *Goal: To achieve financial stability and sustainability for the hospital.*  
*FY25 Benchmarks for Key Performance Indicators (KPIs): Gross A/R days to be less than 55, DNFB < then 5 days, and 90 Days Cash on Hand*

- Accounts Receivables (AR) Update: This number was at 96 in March, down to 88 at the end of April, down to 78 mid-June, and currently at 76 for July.
- Grants; See *attached Grants Report*

- Medicaid Funding; there are still a lot of unknowns around how CAH will be affected. Responsive to media inquiries.
- The Fiscal Year 2025 ended showing gains on both an operating and net basis, *financial report attached*.



Submitted by: Phil Hofstetter, CEO

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## FISCAL YEAR 2026 GRANTS UPDATE

*To date, grants fund 3.3 FTE in FY26 staff time across 10 PMC positions.*

### 4 Pending Grant Requests: \$6,590,000

- ◆ **Alaska Community Foundation    GCI Suicide Prevention Grant**  
Community Wellness request for *Sources of Strength* training, supplies, and more.  
1 Award      |      **\$15,000** total requested – *Decision anticipated August 2025*
- ◆ **Exact Sciences    FOCUS Program Grant**  
Support with relaunching visiting colonoscopy clinics with contracted providers.  
18 Months      |      **\$75,000** total requested – *Decision August 2025*
- ◆ **Senate Appropriations    Congressionally Directed Funds (Rep. Begich)**  
New Facility Phase 3 costs. Requested in FY24, still pending budget appropriation  
1 Award      |      **\$3,000,000** total requested – *Decision now anticipated FY26*
- ◆ **Senate Appropriations    Borough Transportation Project Request**  
PMC provided a proposal item to widen & pave Excel Rd./pave & light Wellness Dr.  
1 Award      |      **\$3,500,000** total requested – *Decision anticipated FY26*

### 2 New Facility Grants Operating in FY25 \$28,000,000

- ◆ **HRSA    Congressionally Directed Spending: Community Project**  
No-Cost Extension of grant for new health campus sitework and construction.  
Year 4 of 4      |      **\$8,000,000** (total single award); Project housed in: Finance
- ◆ **US Department of Treasury    Coronavirus Capital Projects Fund Grant**  
Wellness, Education & Resource Center building construction including MRI Suite.  
Year 5 of 6      |      **\$20,000,000** (total single award); Project housed in: Finance

### 9 Program & Personnel\* Grants Operating in FY26 \$800,739

\* FY26 Grant contributions to PMC's Admin & Finance costs: \$70,132

- ◆ **Alaska Children's Trust    Cultural Activities Grant**  
Community Wellness request to fund PIA guest educators & Elders in Kinder Skog  
1 Year      |      **\$1,000** (total single award)
- ◆ **Alaska Community Foundation    Camps Initiative**  
Community Wellness request supporting the Summer 2025 ORCA Kayaking Camp.  
1 Year      |      **\$20,000** (total single award)

- ◆ **ACL Communities Deliver & Sustain Evidence-Based Falls Prevention**  
Provides evidence-based falls prevention programs to older adults, people with disabilities, & others with mobility challenges. Connects community to CW/HH.  
Year **3** of **4** | **\$147,076** in FY25
- ◆ **HRSA Rural Community Opioid Response Project – Overdose Response**  
No-Cost Extension of FY24 project establishing PMC’s telepsychiatry pilot project.  
Year **2** of **2** | **\$65,000** in FY25
- ◆ **HRSA Rural Health Network Development Planning Program**  
Planning with independent AK CAHs to improve rural health access & efficiency.  
**1** Year | **\$100,000** (total single award)
- ◆ **Petersburg Community Foundation Community Support Grant**  
Community Wellness request for *Sources of Strength* training, supplies, and more.  
**1** Award | **\$10,000** (total single award)
- ◆ **State Health Department Adult Day Services Grant**  
Supports Cedar Social Club staffing & \$33K+ per year in participant scholarships.  
Year **2** of **3** | **\$149,855** in FY25
- ◆ **State Health Department Community Tobacco Prevention & Control Grant**  
Funds evidence-based Million Hearts® Change Package for Tobacco Cessation.  
Year **3** of **3** | **\$145,000** in FY25
- ◆ **State Health Department Opioid Settlement Funds Grant**  
Sustain telepsychiatry access pilot program established by 2023 HRSA grant.  
Year **2** of **3** | **\$142,828** in FY25



# ***PETERSBURG MEDICAL CENTER***

## **FINANCIAL REPORTING PACKAGE**

**For the month ended June 30, 2025**

## PETERSBURG MEDICAL CENTER

## Key Volume Indicators

FISCAL YEAR 2025

	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	YTD	Prior YTD	% Change
1. Clinic Visits	847	874	860	986	782	827	855	804	749	832	865	862	10,143	9,975	1.7%
<i>Primary Clinic</i>	833	752	855	974	763	801	835	794	724	806	849	736	9,722	9,488	2.5%
<i>Specialty Clinics</i>	14	122	5	12	19	26	20	10	25	26	16	126	421	487	-13.6%
2. Radiology Procedures	259	202	211	231	247	240	194	190	221	265	238	227	2,725	2,444	11.5%
3. Lab Tests (excluding QC)	2,057	1,754	1,753	1,720	1,489	1,861	1,714	1,808	1,602	2,074	2,536	1,933	22,301	23,516	-5.2%
4. Rehab Services Units	1,028	789	788	1,129	1,132	1,186	1,057	841	1,318	1,249	1,237	1,137	12,891	10,249	25.8%
<i>Physical</i>	687	629	643	857	865	1,024	916	678	982	1,009	995	901	10,186		
<i>Occupational</i>	281	112	123	272	251	152	123	146	300	213	220	206	2,399		#DIV/0!
<i>Speech</i>	60	48	22	-	16	10	18	17	36	27	22	30	306		#DIV/0!
5. Home Health Visits	155	168	175	227	196	160	230	197	184	189	192	223	2,296	1,717	33.7%
<i>Nursing Visits</i>	110	119	136	150	109	110	135	130	121	109	119	111	1,459		#DIV/0!
<i>PT/OT Visits</i>	45	49	39	77	87	50	95	67	63	80	73	112	837		
6. Emergency Room Visits	95	88	65	64	67	86	63	60	62	77	86	94	907	872	4%
<i>Hospital Inpatient</i>															
7. Patient Days - Acute	34	49	27	24	23	30	21	28	25	42	41	29	373	351	6.3%
8. Patient Days - Swing Bed (SNF)	113	79	75	67	66	44	4	58	133	97	58	33	827	441	87.5%
9. Patient Days - Swing Bed (ICF)	7	36	60	38	30	31	31	20		7	54	60	374	11	3300.0%
10. Patient Days - Total	154	164	162	129	119	105	56	106	158	146	153	122	1,574	803	96.0%
11. Average Daily Census - Acute	1.1	1.6	0.9	0.8	0.8	1.0	0.7	1.0	0.8	1.4	1.3	1.0	1.0	1.0	6.2%
12. Average Daily Census - Swing Bed (SNF)	3.6	2.5	2.5	2.2	2.2	1.4	0.1	2.1	4.3	3.2	1.7	2.0	2.3	1.2	87.4%
13. Average Daily Census - Swing Bed (ICF)	0.2	1.2	2.0	1.2	1.0	1.0	1.0	0.7		0.2	1.7	2.0	1.0	0.0	3301.8%
14. Average Daily Census - Total	5.0	5.3	5.4	4.2	4.0	3.4	1.8	3.8	5.1	4.9	4.9	4.1	4.3	2.2	96.0%
15. Percentage of Occupancy	41.4%	44.1%	45.0%	34.7%	33.1%	28.2%	15.1%	31.5%	42.5%	40.6%	41.1%	33.9%	35.9%	18.3%	96.0%
<i>Long Term Care</i>															
16. LTC Days	372.0	418.0	410.0	392.0	420.0	434.0	434.0	384.0	434.0	412	426	403	4,939	4,776	3.4%
17. Average Daily Census	12.0	13.5	13.7	12.6	14.0	14.0	14.0	13.7	14.0	13.7	13.7	13.4	13.5	13.1	3.4%
18. Percentage of Occupancy	80.0%	89.9%	91.1%	84.3%	93.3%	93.3%	93.3%	91.4%	93.3%	91.6%	91.6%	89.6%	90.2%	87.2%	3.4%

**PETERSBURG MEDICAL CENTER**  
**Statement of Revenues and Expenses**  
For the month ended June 30, 2025

Month Actual	Month Budget	\$ Variance	% Variance		YTD Actual	YTD Budget	\$ Variance	% Variance	Prior YTD	% Variance
				<i>Gross Patient Revenue:</i>					#	
\$482,520	\$335,253	\$147,267	43.9%	1. Inpatient	\$7,224,074	\$4,023,048	\$3,201,026	79.6%	\$4,113,476	75.6%
891,240	971,221	(79,981)	-8.2%	2. Outpatient	10,807,636	11,654,648	(847,012)	-7.3%	# 10,658,407	1.4%
623,536	521,473	102,063	19.6%	3. Long Term Care	7,385,166	6,257,665	1,127,501	18.0%	6,380,023	15.8%
532,028	447,677	84,351	18.8%	4. Clinic	5,548,127	5,372,147	175,980	3.3%	# 5,143,507	7.9%
48,193	44,314	3,879	8.8%	5. Home Health	547,712	531,774	15,938	3.0%	512,317	6.9%
2,577,517	2,319,938	257,580	11.1%	6. <b>Total gross patient revenue</b>	31,512,715	27,839,282	3,673,433	13.2%	# 26,807,730	17.6%
				<i>Deductions from Revenue:</i>					#	
311,941	496,978	185,037	37.2%	7. Contractual adjustments	5,389,236	5,963,731	574,495	9.6%	4,604,947	-17.0%
0	(84,770)	(84,770)	100.0%	8. Prior year settlements	(454,791)	(1,017,240)	(562,449)	55.3%	# (501,026)	9.2%
(32,926)	12,500	45,426	363.4%	9. Bad debt expense	392,883	150,000	(242,883)	-161.9%	131,832	198.0%
7,720	16,667	8,947	53.7%	10. Charity and other deductions	291,546	200,004	(91,542)	-45.8%	# (8,408)	3567.7%
286,735	441,375	154,640	35.0%	<b>Total revenue deductions</b>	5,618,875	5,296,495	(322,380)	-6.1%	4,227,345	-32.9%
									#	
2,290,782	1,878,563	412,219	21.9%	11. <b>Net patient revenue</b>	25,893,840	22,542,787	3,351,053	14.9%	22,580,385	14.7%
				<i>Other Revenue</i>					-	n/a
58,835	33,333	25,502	76.5%	12. 340b Revenue	277,361	400,000	(122,639)	-30.7%	-	n/a
91,605	84,246	7,359	8.7%	13. Inkind Service - PERS/USAC	1,150,981	1,010,963	140,018	13.8%	990,792	16.2%
55,530	52,180	3,350	6.4%	14. Grant revenue	852,333	626,149	226,184	36.1%	776,230	9.8%
(972,154)	9,562	(981,716)	-10266.8%	15. Federal & State Relief	1,961,273	1,147,750	1,846,523	1609.2%	75,000	2515.0%
50,221	38,203	12,018	31.5%	16. Other revenue	339,651	458,425	(118,774)	-25.9%	432,342	-21.4%
(715,963)	184,191	(958,990)	-520.6%	17. <b>Total other operating revenue</b>	4,581,599	2,210,287	2,093,951	94.7%	2,274,363	101.4%
1,574,819	2,062,754	(487,935)	-23.7%	18. <b>Total operating revenue</b>	30,475,439	24,753,074	5,722,365	23.1%	24,854,748	22.6%
				<i>Expenses:</i>						
1,055,220	985,954	(69,266)	-7.0%	19. Salaries and wages	12,559,561	11,831,458	(728,103)	-6.2%	11,236,272	-11.8%
209,530	105,319	(104,211)	-98.9%	20. Contract labor	2,035,415	1,263,821	(771,594)	-61.1%	1,325,524	-53.6%
430,940	366,659	(64,281)	-17.5%	21. Employee benefits	4,759,212	4,399,916	(359,296)	-8.2%	4,200,597	-13.3%
160,872	136,753	(24,119)	-17.6%	22. Supplies	1,866,291	1,641,047	(225,244)	-13.7%	1,594,048	-17.1%
(52,613)	127,280	179,893	141.3%	23. Purchased services	1,953,645	1,527,367	(426,278)	-27.9%	1,460,527	-33.8%
66,808	45,700	(21,108)	-46.2%	24. Repairs and maintenance	618,461	548,389	(70,072)	-12.8%	548,169	-12.8%
23,896	21,720	(2,176)	-10.0%	25. Minor equipment	400,915	260,631	(140,284)	-53.8%	264,037	-51.8%
31,601	21,137	(10,464)	-49.5%	26. Rentals and leases	366,978	253,652	(113,326)	-44.7%	263,130	-39.5%
90,564	91,623	1,059	1.2%	27. Utilities	1,039,954	1,099,470	59,516	5.4%	1,061,164	2.0%
7,979	10,191	2,212	21.7%	28. Training and travel	128,045	122,298	(5,748)	-4.7%	114,719	-11.6%
85,703	100,765	15,062	14.9%	29. Depreciation	1,081,004	1,209,189	128,185	10.6%	1,145,947	5.7%
15,746	22,211	6,465	29.1%	30. Insurance	210,443	266,540	56,097	21.0%	191,822	-9.7%
38,283	34,576	(3,707)	-10.7%	31. Other operating expense	354,598	414,905	60,307	14.5%	421,295	15.8%
2,164,530	2,069,888	(94,642)	-4.6%	32. <b>Total expenses</b>	27,374,523	24,838,683	(2,535,840)	-10.2%	23,827,251	-14.9%
(589,711)	(7,134)	(582,577)	-8166.3%	33. <b>Income (loss) from operations</b>	3,100,917	(85,608)	3,186,525	3722.2%	1,027,497	-201.8%
				<i>Nonoperating Gains(Losses):</i>						
138,860	11,323	127,537	1126.4%	34. Investment income	452,613	135,883	316,730	233.1%	422,813	-7.0%
(9,975)	(4,438)	(5,537)	-124.8%	35. Interest expense	(129,741)	(53,266)	(76,475)	-143.6%	(139,542)	7.0%
0	0	0	n/a	36. Gain (loss) on disposal of assets	0	0	0	n/a	-	n/a
905,555	1,016,666	(111,111)	-10.9%	37. Other non-operating revenue	13,349,481	12,200,000	1,149,481	9.4%	8,395,058	59.0%
1,034,441	1,023,551	10,890	1.1%	38. <b>Net nonoperating gains (losses)</b>	13,672,353	12,282,617	1,389,736	11.3%	8,678,329	57.5%
\$444,730	\$1,016,417	(\$571,687)	-56.2%	39. <b>Change in Net Position (Bottom Line)</b>	\$16,773,270	\$12,197,009	\$4,576,261	37.5%	\$9,705,826	72.8%

## PETERSBURG MEDICAL CENTER

## Balance Sheet

June, 2025

**ASSETS****Current Assets:**

	June 2025	May 2025	June 2024	June 2024
1. Cash	1,544,710	2,264,699	356,249	356,249
2. Cash - insurance advances	0	0	0	0
3. Investments	2,097,227	1,093,183	1,057,873	1,057,873
4. Total cash	3,641,937	3,357,881	1,414,122	1,414,122
5. Patient receivables	7,548,114	7,445,932	6,821,298	6,821,298
6. Allowance for contractuals & bad debt	(2,615,075)	(2,709,819)	(2,363,151)	(2,363,151)
7. Net patient receivables	4,933,039	4,736,113	4,458,147	4,458,147
8. Other receivables	2,701,066	5,401,809	2,231,342	2,231,342
9. Inventories	364,788	362,109	319,404	319,404
10. Prepaid Expenses	169,095	173,110	161,762	161,762
11. Total current assets	11,809,926	14,031,022	8,584,777	8,584,777

**Property and Equipment:**

12. Assets in service	28,677,563	28,670,924	28,601,075	28,601,075
13. Assets in progress	22,776,724	21,853,258	9,368,246	9,368,246
14. Total property and equipment	51,454,287	50,524,182	37,969,321	37,969,321
15. Less: accumulated depreciation	(23,379,960)	(23,294,258)	(22,298,956)	(22,298,956)
16. Net property and equipment	28,074,326	27,229,924	15,670,365	15,670,365

**Assets Limited as to Use by Board**

17. Investments	3,668,961	3,556,087	3,337,912	3,337,912
18. Building fund	799,968	776,329	724,158	724,158
19. Total Assets Limited as to Use	4,468,928	4,332,416	4,062,069	4,062,069

**Pension Assets:**

20. OPEB Asset	7,338,848	7,338,848	6,685,608	6,685,608
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**Deferred Outflows:**

21. Pension	2,428,790	2,428,790	2,554,803	2,554,803
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22. Total assets	\$54,120,818	\$55,361,000	\$37,557,622	\$37,557,622
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**LIABILITIES & FUND BALANCE****Current Liabilities:**

	June 2025	May 2025	June 2024	June 2024
23. Accounts Payable - Trade	\$1,299,836	\$1,463,625	\$3,255,927	\$3,255,929
24. Accounts Payable - New Facility	831,368	2,263,450	0	(1)
25. Accrued Payroll	319,625	245,347	240,920	240,920
26. Payroll taxes and other payables	143,596	238,545	236,514	(1)
27. Accrued PTO and extended sick	1,196,902	1,215,261	1,018,401	1,018,401
28. Deferred revenue	131,961	144,710	152,525	(1)
29. Due to Medicare	1,466,833	1,466,833	160,798	160,798
30. Due to Medicare - Advance	0	0	0	#DIV/0!
31. Due to Blue Cross - Advance	0	0	0	0
32. Other current liabilities	3,323	3,203	4,145	(1)
33. Current portion of long-term debt	459,791	459,407	618,244	618,244
34. Total current liabilities	5,853,235	7,500,380	5,687,476	(1)

**Long-Term Debt:**

35. Capital leases payable	1,826,846	1,864,610	2,283,594	#DIV/0! 2,283,594
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**Pension Liabilities:**

36. Net Pension Liability	15,526,950	15,526,950	16,521,607	16,521,607
37. OPEB Liability	-	-	-	-
38. Total pension liabilities	15,526,950	15,526,950	16,521,607	16,521,607

39. Total liabilities	23,207,031	24,891,940	24,492,677	18,805,200
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**Deferred Inflows:**

40. Pension	413,688	413,688	623,594	623,594
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**Net Position:**

41. Unrestricted	13,726,830	13,726,830	2,751,845	2,751,845
42. Current year net income (loss)	16,773,270	16,328,540	9,689,507	9,689,507
43. Total net position	30,500,099	30,055,370	12,441,352	12,441,351

44. Total liabilities and fund balance	\$54,120,818	\$55,360,998	\$37,557,622	\$31,870,145
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\*\*Note: Cash on line 1 is for presentation purposes only. The total cash in bank is the sum of Lines 1 and 2.

**PETERSBURG MEDICAL CENTER**

**Key Operational Indicators**

**For the month ended June 30, 2025**

	<b>July</b>	<b>Aug</b>	<b>Sept</b>	<b>Oct</b>	<b>Nov</b>	<b>Dec</b>	<b>Jan</b>	<b>Feb</b>	<b>Mar</b>	<b>Apr</b>	<b>May</b>	<b>June</b>	<b>YTD</b>	<b>Prior Year</b>	<b>% Change</b>
1. Contractual Adj. as a % of Gross Revenue	14.2%	11.2%	12.5%	22.5%	16.1%	36.8%	10.5%	31.7%	18.6%	8.0%	12.4%	12.1%	17.1%	16.6%	3.2%
2. Charity/Other Ded. As a % of Gross Revenue	0.0%	-0.1%	0.0%	0.0%	0.0%	0.0%	5.1%	1.0%	0.3%	2.4%	2.1%	0.3%	0.9%	0.6%	61.1%
3. Bad Debt as a % of Gross Revenue	1.2%	3.7%	1.6%	-0.3%	0.0%	6.4%	3.1%	-6.4%	2.0%	2.3%	1.3%	-1.3%	1.2%	0.5%	153.5%
4. Operating Margin	9.1%	12.8%	8.0%	1.9%	-4.4%	-26.6%	1.0%	-13.1%	49.3%	23.1%	12.9%	-37.4%	10.2%	4.1%	149.9%
5. Total Margin	47.5%	39.0%	39.0%	29.6%	28.7%	-0.6%	38.0%	26.5%	60.2%	44.2%	39.5%	17.0%	38.0%	39.0%	-2.6%
6. Days Cash on Hand (Including Investments)	83.3	87.9	89.8	92.4	96.9	100.5	117.6	110.3	102.1	99.7	110.7	117.1	100.5	81.3	23.7%
7. Days in A/R (Net)	68.5	65.9	67.8	62.6	65.6	77.7	75.4	78.9	80.1	65.1	58.7	58.8	58.8	62.0	-5.3%
8. Days in A/R (Gross)	85.3	85.3	87.1	81.0	82.8	87.6	88.8	86.5	96.1	87.7	82.2	82.9	82.9	79.2	4.7%
9. Days in Accounts Payable	104	58	32	29	30	38	40	44	48	34	32	31	31		