



**Petersburg Borough  
Petersburg Medical Center**

12 South Nordic Drive  
Petersburg, AK 99833

**Meeting Agenda  
Hospital Board  
Regular Meeting**



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Thursday, February 22, 2024

5:30 PM

Assembly Chambers

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Please click the link below to join the webinar:

<https://us06web.zoom.us/j/87928521866?pwd=IAD0dS3l2Qx4jRfA-Zpjzw5qFsltDg.eYj2-04thrbt7bB->

Passcode: 092872

Or One tap mobile :

+17193594580,,87928521866# US

+17207072699,,87928521866# US (Denver)

**1. Call to Order**

**2. Approval of the Agenda**

**3. Approval of Board Minutes**

**A.** Approval of minutes for the January 18, 2024, board meeting.

**4. Visitor Comments**

**5. Board Member Comments**

**6. Committee Reports**

**A.** Resource

**B.** Infection Control

**C.** LTC

**7. Reports**

**A.** Imaging

S. Paul provided a written report.

**B.** Lab

V. Shimek provided a written report.

- C.** Long Term Care  
H. Boggs provided a written report.
- D.** Patient Financial Services  
C. Lantiegne provided a written report.
- E.** New Facility  
Jay Farmwald, PMC project manager, provided a written report.
- F.** Quality & Infection Prevention  
S. Romine / J. Bryner provided a written report.
- G.** Executive Summary  
P. Hofstetter provided a written report.
- H.** Financial  
J. McCormick provided a written report.

**8. Old Business**

**9. New Business**

**10. Executive Session**

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

**11. Next Meeting**

**12. Adjournment**



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

12 South Nordic Drive  
 Petersburg, AK 99833

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



Thursday, January 18, 2024

5:30 PM

Assembly Chambers

**1. Call to Order**

Member Cook called the meeting to order at 5:30 pm.

**2. Approval of the Agenda**

A motion was made to amend the agenda to add "Audit Report" under New Business and approve the agenda as amended.

Motion made by Board Member Lagoudakis, Seconded by Board Member Stratman.  
 Voting Yea: Chairman Cook, Board Member Cushing, Board Member Lagoudakis, Board Member Simbahon, Board Member Stratman  
 Voting Abstaining: Board Member Hasbrouck

**3. Approval of Board Minutes**

A. Approval of minutes for the October 26, 2023, board meeting.

Motion made by Board Member Stratman, Seconded by Board Member Cushing.  
 Voting Yea: Chairman Cook, Board Member Cushing, Board Member Lagoudakis, Board Member Simbahon, Board Member Stratman  
 Voting Abstaining: Board Member Hasbrouck

B. Approval of minutes for the December 7, 2023, board meeting.

Motion made by Board Member Stratman, Seconded by Board Member Lagoudakis.  
 Voting Yea: Chairman Cook, Board Member Cushing, Board Member Lagoudakis, Board Member Simbahon, Board Member Stratman  
 Voting Abstaining: Board Member Hasbrouck

**4. Visitor Comments**

None

**5. Board Member Comments**

None

**6. Committee Reports**

A. Resource

Member Cook attended and noted that the committee reviewed financials and the annual audit.

B. Infection Control

Member Stratman attended and noted that this was a good meeting with no issues of note.

C. CAH

Member Stratman attended and noted that departments provided reports and they reviewed action items and updates.

D. LTC

Member Cushing attended and noted that updates were provided based on department reports. No areas of concern.

E. Kinder Skog Advisory

Member Lagadoukis attended. The committee discussed the benefits provided to the community and Kinder Skog because of this collaboration with the hospital. The program is maxed out, however, some participants do not use it every day. Because of the great demand for childcare, the committee discussed attendance requirements to allow access to participants who would be active every day.

**7. Reports**

A. Home Health

K. Testoni provided a written report and was available to answer questions.

B. Human Resources

C. Newman provided a written report.

C. J. Farmwald, PMC project manager, provided a written report. Updates to note included:

Work will restart soon after a break from the holidays and weather.

The \$20M from treasury was official in December.

Several department areas came out of main hospital plan and were moved to WERC building. More details of these changes will be provided at the Jan. 31 open house.

D. S. Romine / J. Bryner provided a written report. In response to Member Cook's question, the Cedar Social Club is up and running with a soft opening and the team is working through a few hiccups associated with opening.

E. P. Hofstetter provided a written report. Updates provided included:

Treasury grant funds are now available for the WERC.

Borough Assembly voted this project as the #1 on priority list for federal and state capital projects.

Mayor Jenson and Assembly Member Lynn will be joining the PMC team for the Feb. 6 meeting with Senator Stedman. The team will review and discuss funding and financial aspects of a critical access hospital. led by PMC CFO J. McCormick.

The annual Borough/Hospital Work session will be on January 30, with a focus on funding and the new facility.

A public open house on the new facility project is scheduled for January 31.

Specialty care has been growing, with PMC and SEARHC just completing a scope clinic. A pain clinic is happening tomorrow. PMC is looking at orthopedic options with Juneau, SEARHC and other facilities.

F. J. McCormick provided a written report. He provided clarification on revenue and expenses, bad debt expenses, and expectations for financial wellness benchmarks and KPIs. AR work continues and there has been some improvement.

**8. Old Business**

A. Board committee appointments are as follows:

- Quality Improvement:
- LTC: Member Cushing
- CAH: Member Stratman
- Infection Control: Member Stratman

Resource Committee: Members Cook, Lagadoukis, Conn

Joint Conference Committee: Board president (standing appointment)

Foundation Committee: Member Conn

Community Engagement: Members Cook, Cushing, Hasbrouck

Evaluation Committee: Members Cook, Cushing, Simbahon

Bylaws Committee: Members Cook, Stratman, Lagadoukis

Kinder Skog Advisory Committee: Member Lagadoukis

**9. New Business**

A. Audit report

D. Hanni provided an overview of the audit process and summary results. He also provided an overview of the financial statements auditing process and basis for the written opinion.

**10. Executive Session**

A. Executive Session

*By motion, the Board will enter into Executive Session to consider medical staff appointments/reappointments.*

Motion made by Board Member Cushing, Seconded by Board Member Stratman  
Voting Yea: Chairman Cook, Board Member Cushing, Board Member Lagoudakis, Board Member Simbahon, Board Member Stratman  
Voting Abstaining: Board Member Hasbrouck

The board came out of executive session. Board Member Cushing motioned to appoint/reppoint to medical staff: Erik Woelber, MD; Ryan Tade, MD, Radiology; Brandon Roller, MD, Radiology; John Tarim, MD, Psychiatry; Tae Ok, PA. Seconded by Board Member Stratman.

Voting Yea: Chairman Cook, Board Member Cushing, Board Member Lagoudakis, Board Member Simbahon, Board Member Stratman  
Voting Abstaining: Board Member Hasbrouck

**11. Next Meeting**

The next meeting will be February 22, 2023.

**12. Adjournment**

The meeting was adjourned.

Motion made by Board Member Lagoudakis, Seconded by Board Member Stratman.  
Voting Yea: Chairman Cook, Board Member Cushing, Board Member Lagoudakis, Board Member Simbahon, Board Member Stratman  
Voting Abstaining: Board Member Hasbrouck



# Petersburg Medical Center

Imaging Report February 2024

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## **Workforce Wellness**

Staffing remains three full-time technologists, currently one being filled by a travel 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. All three technologists have been able to use PTO or have PTO scheduled. The full-time technologist position is still listed.

## **Community Engagement**

We had two, third-grade classrooms visit the department. We looked at the x-ray and CT equipment and looked at x-ray images. We talked about bones, bone health and some differences in technologists and radiologists. The kids had great questions and were excited to be in the radiology rooms. We plan on setting up a booth for the upcoming health fair about the new mammography machine and information on breast health and density.

## **Patient Centered Care**

The mammography department went through the yearly MQSA inspection in August. This inspection had one finding that was then fixed and resubmitted to the FDA resulting in a passing inspection and the ability to continue mammograms.

Yearly Mammography Medical Audit Shows:

Total Mammography Cases 211  
 Total Screening Cases 201  
 BiRad 0 –Needs more imaging 11  
 BiRad 1 –Negative 98  
 BiRad 2 –Benign 101  
 BiRad 3 –Probably benign 1

The new patient project we are working on is a new system for electronic image transmission. This new online portal will allow us to send radiology studies in their diagnostic state electronically to more facilities in a HIPAA compliant way. This will reduce time that it would take to mail these studies for many referrals.

## **Facility**

We are in the process of the new mammography unit installation. We had a delay in the project due to some shipping delays which affected the whole project, pushing the timeline back. The machine is in place and operational, the physicist is scheduled for inspection the last week of February and then application training and patient exams will start. We also have a Windows 10 upgrade scheduled in February for the x-ray equipment and portable machine.

## **Financial Wellness**

Our current patient volumes are slightly under budgeted projections. This time of year does come with a normal dip in volumes; the lack of winter weather may also play into some loss of acute x-ray needs. With mammography also in transition there is a dip in financials there as well, although I feel this will be made up once the new equipment is operational.

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

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# Petersburg Medical Center

Laboratory Report February 2024

## Workforce Wellness

Staffing remains stable with one Med Tech still on leave, and one Medical Technologist position vacant. However, due to the continuing education our staff is undertaking, there is potential for the vacant position to be filled in the next two years; one of our techs is progressing through an online bridge program for her 4-year Medical Laboratory Scientist degree, and our new Lab Assistant who started in December is currently enrolled in a 2-year online program to become a Medical Technician. His clinical rotations will be completed here at PMC.

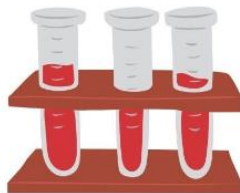
In November three lab staff, including a recent high school grad who was hired as a Lab Assistant after graduating, spoke at the high school Careers Class in November. It was a great opportunity for her to share her experience getting to work straight out of high school and continuing her education while she worked. These online programs and outreach to the high school are being incorporated into the “grow our own” pathway for the Laboratory to ensure local, long-term sustainability for staffing.

## Community Engagement

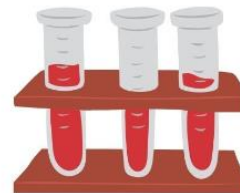
Health Fair 2024 blood draws are taking place February 20-22, February 27-29, and March 5-7 from 7am to 10am in the Dorothy Ingle Conference Room. A huge thank you to all our volunteer phlebotomists! We couldn't do it without you!

# HEALTH FAIR BLOOD DRAWS

TO SCHEDULE YOUR BLOOD DRAW VISIT  
[WWW.PMCAK.ORG](http://WWW.PMCAK.ORG)



**Week 1:** Feb 20-26  
**Week 2:** Feb 27-29  
**Week 3:** March 5-7



Testing is for adults 18 years or older.

If you need assistance please email [healthfair@pmcak.org](mailto:healthfair@pmcak.org)  
 or call 772-5552.

Payments can be made online with credit card or day of appointment  
 with cash or check.

**Community Health & Safety Fair**  
**“Nurture your Health with Nature”**  
**Saturday, March 23rd 10am-1pm**



**Patient Centered Care**

The lab's CLIA survey (conducted every two years) took place on October 24-25, 2023. During the 1.5 day inspection, our Surveyor only found two minor deficiencies. One was corrected the same day that it was identified, and the other was resolved in December. Neither of the deficiencies impacted patient care or safety.

The surveyor emphasized not to let the two deficiencies overshadow the fact that our lab does "awesome work," especially in light of the fact that we offer a huge test menu for a lab our size and many labs like ours are now sending all microbiology out for testing. She also said she felt "good vibes in the lab."

**Facility**

The new patient specimen refrigerator arrived and is working well. The large chemistry refrigerator did a good job of temporarily storing patient specimens and additional testing supplies.

**Financial Wellness**

As more and more insurance companies require prior authorizations for laboratory tests, the lab and registration continue to work together on streamlining the prior authorization process, so patients do not have to wait as long to get their laboratory work done. It is an important process that helps ensure the patient doesn't end up having to pay entirely out of pocket if their health plan requires prior authorization for certain laboratory tests.

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

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# Petersburg Medical Center

## Long Term Care Report - February 2024

### 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

#### Activities Current Schedule:

- One Activities Coordinator: Monday-Friday (0700 – 1500) Interim Activities Coordinator while permanent coordinator is on FMLA.
- One Activities Aid: Saturday - Wednesday (1200 – 2000)
- The activities department is running with two staff while one person is on FMLA. Working to hire another activities staff member.
- Managers will cover during the shift and assist as needed to make sure that staff are getting time away from the floor to recharge. 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.

### Community Engagement

LTC welcomes visitors and families. Volunteers have been coming back in to play music, bingo, sing to and with residents, read to residents, etc. Kinder Skog kiddos are visiting about once per month and working on activities with the residents. Girl Scouts as well as other community groups have stopped by for visits with residents. Staff work with residents to get them out into the community as often as they would like. Some residents have been enjoying Bingocize and participating in sporting events, celebration of life gatherings, etc. This month there is a Valentines luncheon, Superbowl party, ice cream social with the Pioneers of Alaska, and Kinder Skog cookie decorating.

### Patient Centered Care

PMC LTC is currently in the survey window. Surveyors from State can come any time during the survey window to observe care, go over policies and procedures, observe for infection control deficiencies, go over infection control program and emergency preparedness program, walk through building, and look for life safety issues, etc. They spend one week on site. Sometimes, a federal surveyor will come with them. Or, a federal surveyor may follow up later.

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 at that time. Staff know the residents and are advocates for their care. It is not a one size fits all system in LTC. Each resident can tell us what they want and how they want to do it. We will do our best to make that happen for them.

Petersburg Medical Center Nursing home has a 4-Star rating on Nursing Home Compare. Health inspection = 5/5 stars, Staffing = 1/5 stars, and Quality measures = 4/5 stars. Reporting issues with Staffing Data Submission and Payroll Based Journal (PBJ).

Currently, we have less residents who are behaviorally complex. For many months we had multiple residents struggling with dementia with behavioral disturbances causing them to be extremely combative and aggressive with caregivers and at times other residents. This was difficult for everyone but was very hard on morale. Staff worked very hard to work through the dementia training they have learned while providing quality person-centered care. All LTC staff are currently taking a training through CMS called “Hand-in-Hand.” This is a 5-module (15 hour) high quality training program that emphasizes person-centered care in the care of persons with dementia and the prevention of abuse.

**Facility**

When a need arises in LTC with residents we need to fix the problem and/or purchase the appropriate equipment. For example, we cannot have a resident in a wheelchair if they exceed the weight limit. We then need to make sure that we have the appropriate equipment to care for our residents. Recently, we purchased a bariatric standard wheelchair with leg rests, a bariatric commode, bariatric lift, and a bariatric bed with mattress.

We have been working with Materials to come up with items that we will need soon that we can also move into a new facility.

An issue that continues to come up with equipment is insurance coverage. It has become increasingly difficult to get custom Durable Medical Equipment (DME) for residents in LTC. Medicare/Medicaid will not pay for DME such as custom wheelchairs if the person resides in a nursing home. Regulation wise, we are required to provide appropriate and safe equipment for residents to safely get in and out of bed and spend time out of bed.

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.

**Financial Wellness**

As of today, the LTC census has 12 residents. LTC has had a higher census recently. This is the lowest that it has been in months. 11/12 residents have Medicaid. The average Medicaid wait time is 6 months. Seasonal staff have returned to work at PMC this summer (3 CNAs). The nursing department currently has 3 CNA travelers and 3 RN travelers. We have 1 Activities/CNA out on FMLA. Looking ahead, we will have at least 2 FTE staff out on FMLA. When staff call out sick for a shift, managers look at the census and current staffing and then determine if the shift should be filled. During high census times, this leads to an increase in overtime hours.

**Submitted by:** Helen Boggs, RN – LTC DON

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# Petersburg Medical Center

## Patient Financial Services February 2024

**HRG** – Healthcare Resource Group. PMC’s third-party billing agency.

**PFS** – Patient Financial Services

**EHR** – Electronic Health Record

### Workforce Wellness

Patient Financial Services has been busy keeping up with the recent increase in billing and payments due to new service lines. Both patient and non-patient payments flow through PFS. We are noticing a large increase in patients coming into the facility for questions and to make payments.

Our department had a team member out of the office from the end of December through the first week of February on PTO/working remote. PFS was able to pull together and help cover areas as needed due to international connection issues with some of our billing sites. Some of our billing tools did not allow connections outside of the US. It was a good lesson to learn for remote workers. The team is very happy to have staffing back to normal and to be able to catch up on regular duties.

The clearinghouse PMC uses for claim submission offers seminars on billing, claims and reimbursement. Our team will be taking advantage of these learning opportunities to better understand the claim process for billing. Knowledge is power.

### Community Engagement

Meetings have started with facility managers and administration for Centralized Registration in the new facility. We are working to understand what this model will look like for staffing and patients. We are working with Sheena Cole, an associate of CFO Jason McCormick’s, to look at our current registration processes and assess any areas for improvement. This will be a huge project but also an exciting opportunity to work with all departments to better our revenue cycle.

PFS is also working with Sheena Cole and HIM to review our credentialing process and to update any information that has not been recently revalidated. Adding new service line providers to the facility has shown us that a review is needed to make sure we are keeping up with all the changes insurances require.

### Patient Centered Care

PFS has brought the Cerner statement preview back in-house to better review statement balances being sent to patients. This gives us the opportunity to reach out to patients who may need assistance with larger balances – such as payment plans, help with Medicaid enrollment, and Financial Assistance.

The team has continued to work on the sunsetting of our historical EHR, CPSI, by completing the review and appropriate adjustments for all debit balances and completing the review and refund of any patient credit balances. We are reviewing the last of the insurance credits to verify if they are true credits or posting/adjustment errors. Once these accounts are verified, they will be worked accordingly and PFS will be finished with the sunsetting process. This has been a bigger job than anticipated, but PFS is committed to the accuracy of each balance so that the accounts can be resolved correctly.

### Facility

PFS was glad to see the printer repair man come through our facility. The IT department was able to schedule service for the large printers in the facility and made many staff members very happy. The large printer in our

office is older and will need to be replaced in the next few years. The service on the printer has greatly improved its function and we are crossing our fingers it will continue.

PFS is working with IT to create a workspace in our back office for our reception staff to have a quiet place to work when needed. The lobby area can be quite noisy at times and a lot of our work is patient account issues that require concentration and quiet. We are happy to have the room to make this happen when space is in high demand facility wide. Reception staff will be able to see and hear the front desk and any persons who may need assistance from the desk in the back.

### **Financial Wellness**

PFS continues to work with each department in the facility for the health of our revenue cycle. Registration questions and training, review and build of charges, documents for claim submission, follow-up on any denials and payments are some of our daily workflows. We continually review for any updates or process improvements that will make the patient's visit as smooth as possible and to ensure that we are getting reimbursed for our services in a timely manner.

In our Revenue Cycle Task Force meetings with our billing company, we are starting a deep dive into denial reasons on submitted claims. Our goal is to identify issues and resolve them with process improvement or Cerner build corrections. We expect to see a better clean claim rate, less denials, and quicker reimbursement in the coming months.

**Submitted by:** Carrie Lantiegne

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**New PMC Project Report**  
*22 February 2024*

**Sitework**

- RNR currently finishing development of the Borough pit
- RNR plans to resume work at both the WERC and Main Hospital on or about February 19th

**Wellness, Education & Resource Center (WERC)**

- Two advance grant payments totaling \$1 million received from the state to date
- NTP in March for procurement of long lead items (structural steel, mechanical & electrical equipment), and foundation work (approximately \$3 million)
- 65% design documents due 22 March 2024
- Start foundation construction in April 2024
- Execute Guaranteed Maximum Price amendment to Dawson contract for full project in May
- Final design documents due 7 June 2024
- Goal is to have the roof on by the end of September

**Main Hospital Building**

- Dawson and the design team currently working on detailed cost estimates based on 35% design documents
- CEO and CFO met this month with Senator Stedman and others in Juneau regarding a State capital grant to complete design and start shell & core construction





# Petersburg Medical Center

## Quality Report February 2024

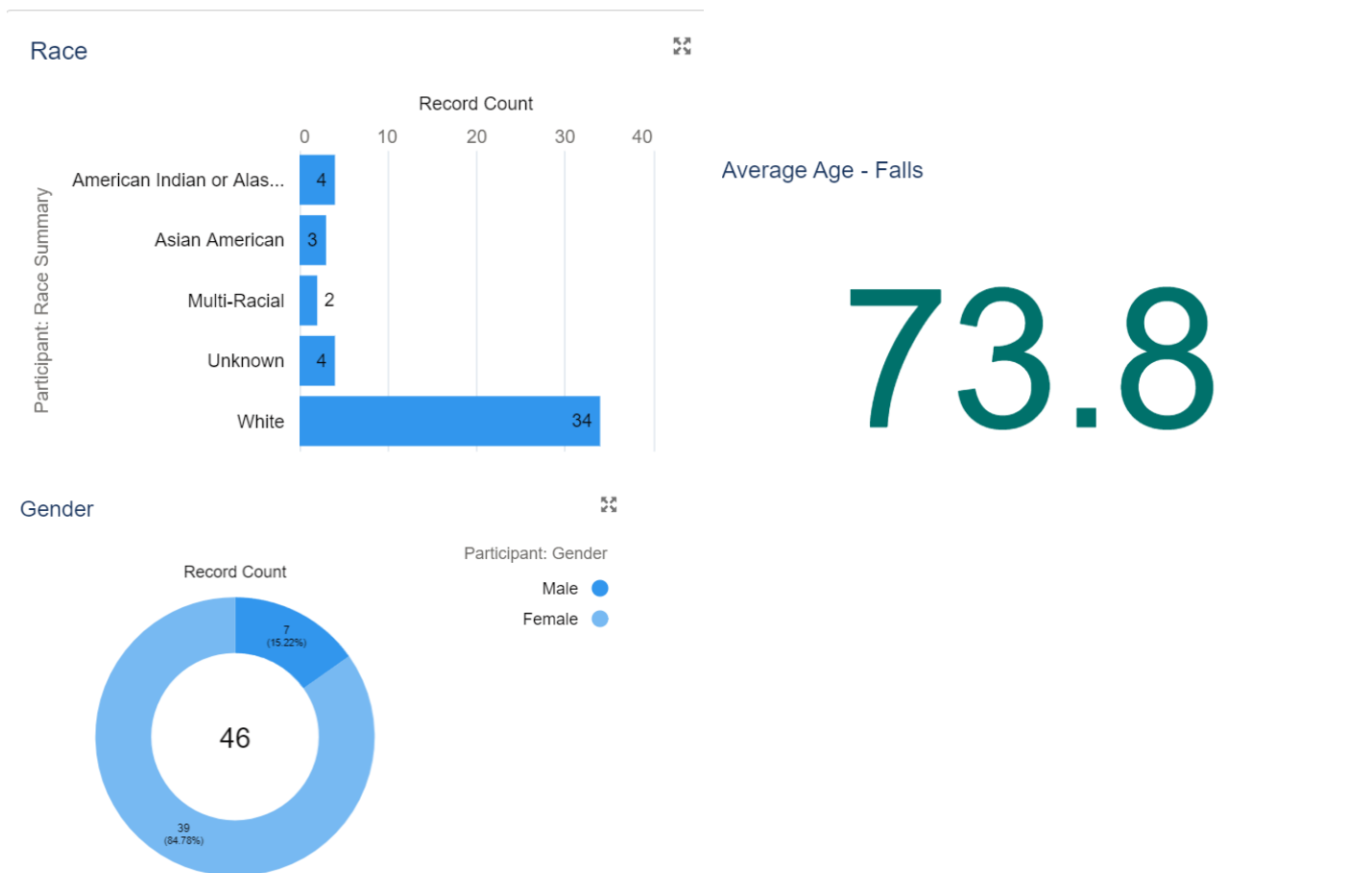
### Workforce Wellness

The interim Quality Director oversees shared initiatives led by department heads and Home Health Quality.

A draft of the workplace satisfaction survey has been completed. Next steps include administrative review and implementation through the Paylocity program. The survey is intended to gather valuable employee perspectives on their work environment and provides information to address several PMC board objectives related to workforce wellness. Potential Key performance indicators have been identified within the survey questions. There is a tentative plan for implementation prior to the next employee forum where results can be shared and explored.

### Community Engagement

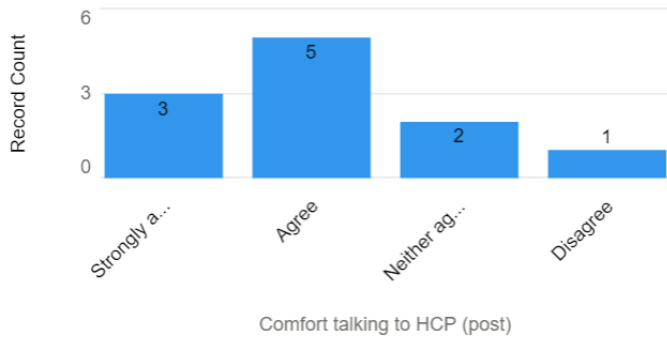
Petersburg Evidence-Based Fall Prevention Programs Data from HAPI-D (Healthy Aging Programs Integrated Database)



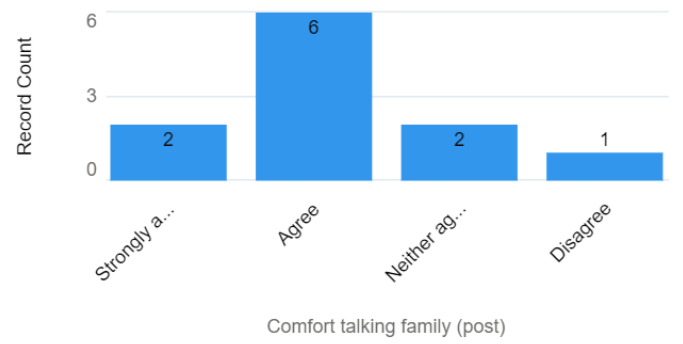
- The final participant count on the first round of workshops of Bingo-cize and Tai Ji Quan is 47.
- Approximately 18% of participants were referred to the fall prevention program by their health care provider.

As part of the grant requirement, pre and post surveys were collected from the first round of Bingocize participants. The following data reflects their responses when asked how they felt as a result of participating in the program.

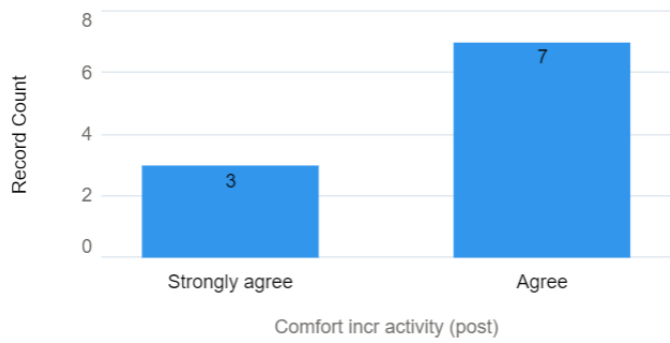
...more comfortable talking to health care provider  
(2021-2024)



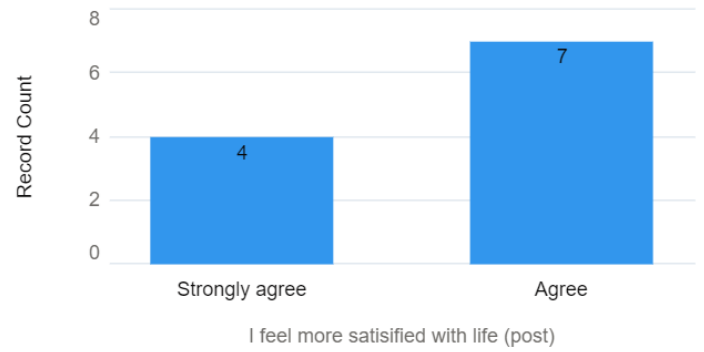
...more comfortable talking to friends, family  
(2021-2024)



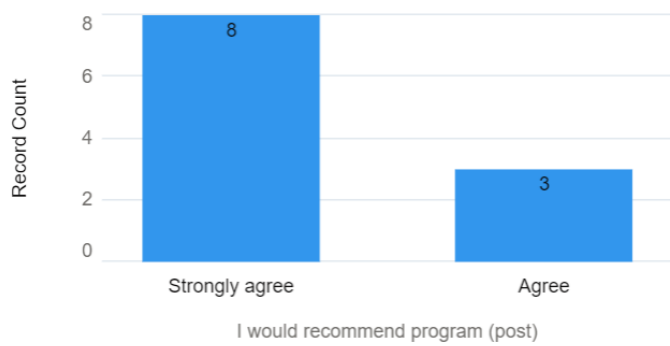
...more comfortable increasing activity  
(2021-2024)



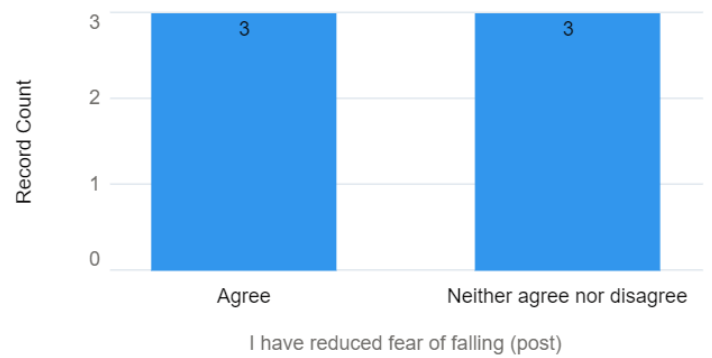
...more satisfied with life  
(2021-2024)



...would recommend program to friends, family  
(2021-2024)

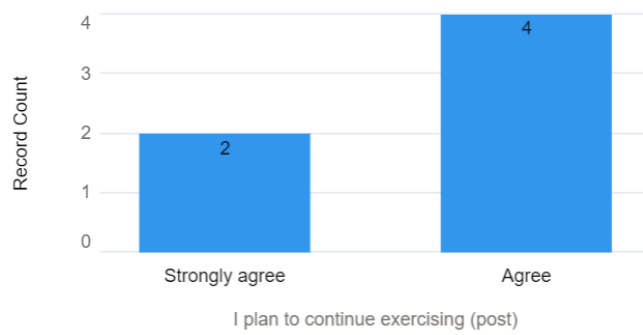


...reduced fear of falling  
(2021-2024)

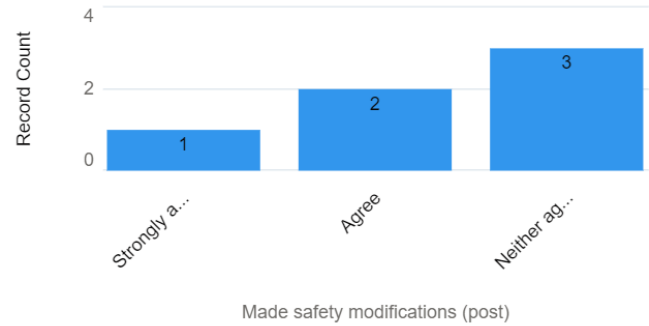




...plan to continue exercise  
(2021-2024)



...made safety modifications in home  
(2021-2024)



- The second Bingocize class has had 10 participants so far – some are repeats from the first class.
- Fall prevention programming has reached 19% of its 4 year participant goal in just under 10 months (6 months of actual classes/4 months of program development.)

### Patient Centered Care

Strategic Plan-Key performance indicator identification project-in progress.

The Adult Day Program-Cedar Social Club began on December 11 with ½ day services at the PIA location on Monday, Wednesday, and Friday afternoons. Enrollment has been increasing and is currently at 6 participants. With current staffing and space available this program is now at capacity until construction is completed on the expanded space or more operation hours are added. The expanded space once completed will be able to accommodate up to 19 participants. We do not have a clear timeline for this project. Further development and refinement of additional policies and procedures continue as the program becomes better defined through practice.

The Home Health department began their annual performance improvement project last month. The goal of the project is to improve the efficiency and timeliness of end-of-life care coordination by standardizing orders, communications, and processes. A standard order set draft is near completion. Next steps include physician review and input, pharmacy collaboration, and EMR integration.

### Facility

I had the opportunity to visit an award-winning adult day program last week. The Grace Center in Corvallis, Oregon was recognized by the National Adult Day Service Association with the “2022 Annual Center of Distinction Award.” This program began in 1983 and now serves approximately 60 local participants. The staff at the Grace Center were very welcoming and provided a wealth of information on their programs, activities, resources, and expertise in establishing an environment where all participants can thrive. Information learned will help to serve the Cedar Social Club. The Grace Center is available as a current and future resource.

<https://gracecenter-corvallis.org/>

### Financial Wellness

Adult Day Program and Senior In-Home services program staff have been working with PMC billing and financial staff to ensure the infrastructure and processes are identified for appropriate reimbursement of these newly offered services. This collaboration continues but is not yet complete.

**Submitted by:** Stephanie Romine, RN



# Petersburg Medical Center

## Infection Prevention and Control Report February 2024

### Workforce Wellness

There have been no changes in staffing.

### Community Engagement

#### 2024 Employee Health

PMC Staff influenza vaccine: 83% current

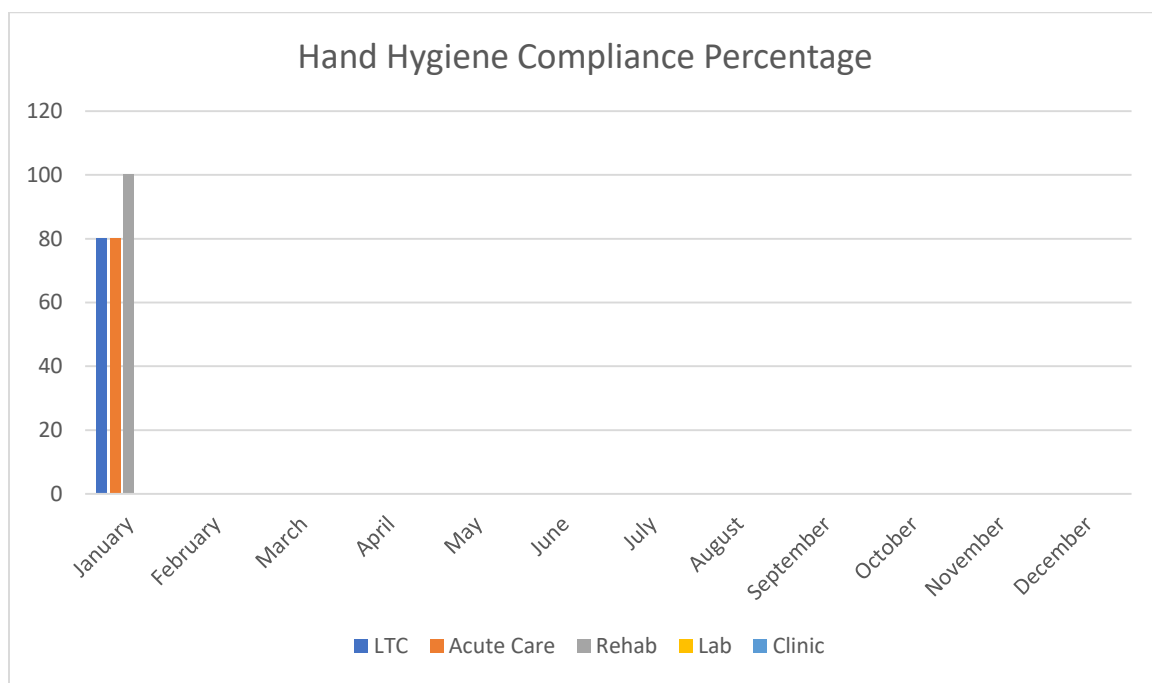
PMC Staff Covid vaccine: 9% up to date

PMC Respiratory Program: 100% of staff required to wear an N-95 respirator have been fit tested within 1 year.

Bloodborne Pathogen Exposures: No PMC employee exposures. 1 contract employee (non-sharps related).

### Patient Centered Care

#### **2024 Hand Hygiene Compliance**



#### **LTC 2024 Infection Prevention Metrics:**

Urinary Tract Infections (UTI): 0

Catheter associated Urinary Tract Infections (CAUTI): 0

Clostridium Difficile infections: 0

Covid-19 infections: 0

Influenza infections: 0

#### **Current Residents**

LTC Resident Flu Shots: All residents offered vaccines, 93% up to date.

LTC Covid Vaccine 2023-2024 booster: All residents offered vaccines, 85% up to date.

LTC Pneumococcal Vaccine: All residents offered vaccines, 85% are up to date.

**Facility**

Nothing new to report.

**Financial Wellness**

No changes have occurred in this area.

**Submitted by:** Jennifer Bryner, MSN, RN

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# Petersburg Medical Center

## CEO Board Report February 2024

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

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

### Highlights:

- A community health and safety fair will be held March 23, 2024, with blood draws being available at the lab from late February through early March. Over 200 community members have already signed up for the blood draw!
- A February 6 meeting with Senator Stedman was held to discuss the need for legislative capital support of the PMC replacement project. Assembly Member Lynn, PMC board president Jerod Cook, PMC CFO consultant Jason McCormick and PMC CEO Phil Hofstetter attended the meeting, along with the Borough’s state lobbyist. We also met with Senator Claman’s office on the Department of Justice Report and advocating for mental health initiatives in rural areas (i.e., removing administrative burden on the 1115 waiver) and updated him on challenges we are seeing in our community. We had a scheduled meeting with Rep Zach Fields on his initiatives with childcare in the state and discussed the burden on licensure limitations. He was very interested in hearing about the Kinder Skog outdoor program.
- The annual joint Borough/PMC work session was held January 30. Topics of discussion included key operational milestones, strategic plan, financial performance and new building update.
- About 80 community members attended an open house on the new facility project hosted by Bettisworth North, project architects, and PMC on January 31. The day-long event featured updates and presentations from Bettisworth North architects and PMC CFO consultant Jason McCormick on CAH Medicare case-based reimbursement.
- February 19 – 21, I am attending the Alaska Hospital and Healthcare Association (AHHA) Legislative Fly-In during February. These sessions are an opportunity to review legislative priorities and meet with legislators to discuss healthcare policy and legislation. I will follow up with Senator Olson and Hoffman to discuss capital budget for replacement facility.



**Financial Wellness: Goal:** To achieve financial stability and sustainability for the hospital.

**FY23 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

- FY23 Audit completed the annual financial audit and was presented and reviewed at the January 18 board meeting.
- In January the AR days have increased primarily in the hospital inpatient due to large number of claims in inpatient and swing bed. These are starting to improve, and our # of AR days dropped down to 73 as of this writing compared to recurring mid 80’s throughout the month. This has improved cashflow and HRG is working with our team to continue to address the goals for AR.
- Financial performance continues to improve albeit slowly and steadily. PMC is waiting on cost report settlement with Medicare and repayment almost \$900,000.
- Jason McCormick CFO consultant spent 2 weeks in Petersburg to provide training to the assembly and board at the work session, training to the community at the open house, training to managers throughout the timeframe and training to Senator Stedman at the legislative meeting. The focus has been addressing the understanding of the CAH designation and cost-based allocation particularly as it relates to expenses by department and depreciation of a new facility.

**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.

- An open house was held January 31 to share the latest design drawings on both the WERC building and the main hospital building.
- Updates: Project updates are available on the PMC website under the “New Facility & Planning” tab: <https://www.pmcak.org/new-building.html>.



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

- In January, PMC nursing and medical staff received training from Airlift Northwest (ALNW) Medevac group focused on patient airway. ALNW provides training to help ensure that those involved in critical care and transportation services stay updated on the latest best practices and standards of care should such an incident occur.



- PMC conducted an employee survey to better understand current and future childcare needs of PMC employees. The anonymous survey was a request from the Kinder Skog advisory committee and ran from mid- to late-January.
- PMC values the health and wellness of our staff. During this year's community Health Fair, PMC will cover employees' basic health fair panel (value \$50) for all employees. This benefit is also available to spouses who are on PMC insurance. Additional screening tests can be ordered to check for diabetes, thyroid function, prostate health, vitamin D and more (employee pays for additional tests).

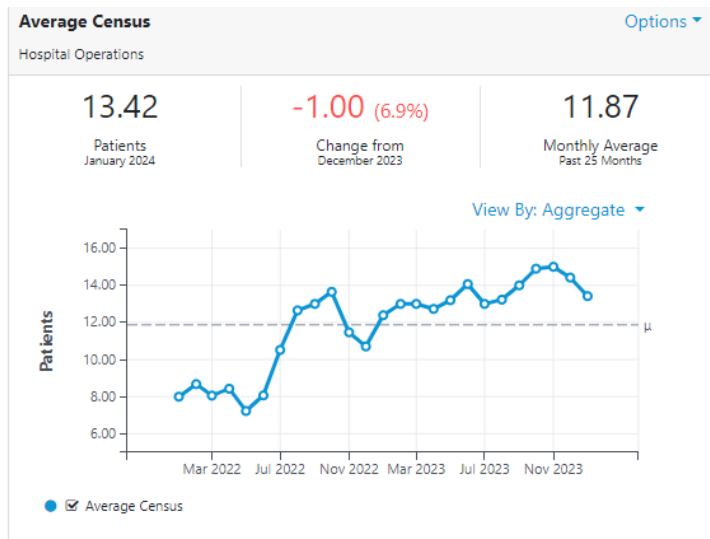
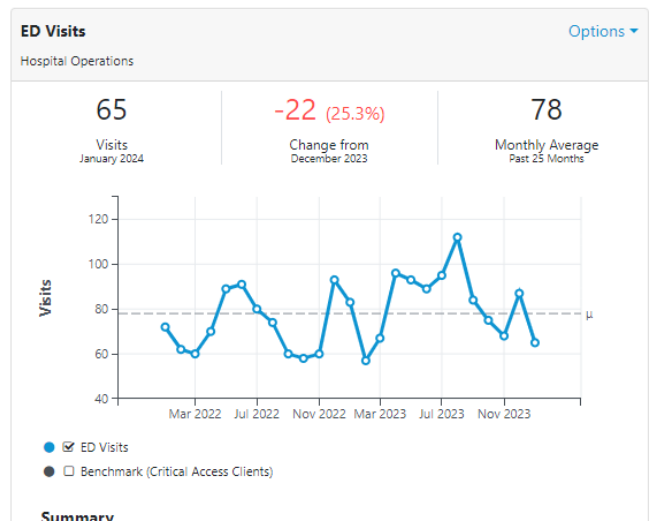
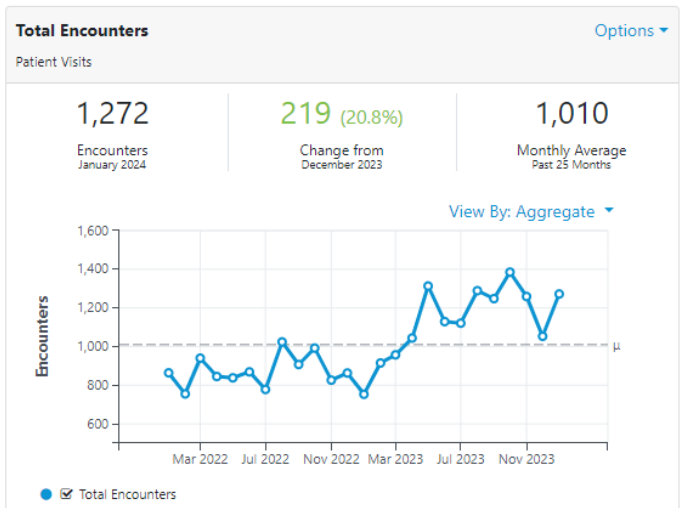


**Community Engagement:** Goal: To strengthen the hospital's relationship with the local community and promote health and wellness within the community.

- [PMC fourth quarter newsletter](#)
- January 30: Borough/Hospital annual work session
- January 31: Open house on new hospital project
- February 6: Meeting with Senator Stedman
- February 19-21: AHHA Legislative Fly-In
- February 22: KFSK Radio PMC Live
- March 23: Community Health and Safety Fair

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

- Scope clinic occurred in collaboration with SEARHC and our nursing staff in mid-January for another successful clinic. Optometry was very busy and here the last week in January at PMC's Specialty Clinic. Orthopedic Clinic will occur Feb 29 – March 1 with a collaboration with Juneau Bone and Joint. Dr. Tarim, Psychiatrist will be onsite in March and again in May. Dermatology Clinic is scheduled for its second clinic in May.
- A community health and safety fair will be held March 23, 2024, with blood draws being available at the lab from late February through early March. The basic health fair panel includes important indicators of overall health including a complete blood count, glucose, lipids, and much more. In addition to the basic panel, these tests are also available: HgbA1c, TSH, Vitamin D (\$75), PSA and iFOB. Blood draws will occur Feb. 20-22, Feb. 27-29, and March 5-7. To schedule a blood draw or learn more information, visit <https://www.pmcak.org/health-fair.html>.
- Our inpatient and observations units in January, while showed routine volumes, the acuity and types of patients in our facility have increased considerably with patients with substance use and almost 80% were admissions due to mental health.



Submitted by: Phil Hofstetter, CEO

# ***PETERSBURG MEDICAL CENTER***

## **FINANCIAL REPORTING PACKAGE**

**FISCAL YEAR 2024**

**For the month ended January 31, 2024**



**PETERSBURG MEDICAL CENTER**  
 Statement of Revenues and Expenses  
 For the month ended January 31, 2024

				FY24						
Month Actual	Month Budget	\$ Variance	% Variance		YTD Actual	YTD Budget	\$ Variance	% Variance	Prior YTD	% Variance
				<b>Gross Patient Revenue:</b>						
\$326,216	\$390,955	(\$64,739)	-16.6%	1. Inpatient	\$2,224,172	\$2,380,660	(\$156,488)	-6.6%	\$2,005,217	10.9%
1,347,714	\$1,687,204	(339,490)	-20.1%	2. Outpatient	9,491,008	11,576,437	(2,085,429)	-18.0%	9,750,771	-2.7%
596,303	\$562,248	34,055	6.1%	3. Long-term Care	3,780,148	3,598,719	181,429	5.0%	3,031,180	24.7%
2,270,233	2,640,407	(370,174)	-14.0%	4. <b>Total gross patient revenue</b>	15,495,328	17,555,816	(2,060,488)	-11.7%	14,787,168	4.8%
				<b>Deductions from Revenue:</b>						
357,451	701,402	343,951	49.0%	5. Contractual adjustments	3,304,060	3,288,484	(15,576)	-0.5%	3,040,259	-8.7%
0	0	0	n/a	6. Prior year settlements	(664,863)	0	664,863	n/a	-	n/a
139,331	(56,151)	(195,482)	348.1%	7. Bad debt expense	(428,308)	432,220	860,528	199.1%	364,057	-217.6%
(7,537)	12,316	19,853	161.2%	8. Charity and other deductions	(13,979)	520,614	534,593	102.7%	168,123	108.3%
489,245	657,567	168,322	25.6%	9. <b>Total deductions from revenue</b>	2,196,910	4,241,318	2,044,408	48.2%	3,572,439	38.5%
1,780,988	1,982,840	(201,852)	-10.2%	10. <b>Net patient revenue</b>	13,298,419	13,314,498	(16,079)	-0.1%	11,214,729	18.6%
				<b>Other Revenue</b>						
82,508	82,831	(323)	-0.4%	11. Inkind Service - PERS/USAC	578,251	589,868	(11,617)	-2.0%	566,774	2.0%
41,190	23,145	18,045	78.0%	12. Grant revenue	329,789	153,193	176,596	115.3%	165,872	98.8%
0	0	0	n/a	13. Federal & State Relief	75,000	0	75,000	n/a	-	n/a
27,864	13,318	14,546	109.2%	14. Other revenue	216,797	265,056	(48,259)	-18.2%	959,702	-77.4%
151,562	119,294	32,268	27.0%	15. <b>Total other operating revenue</b>	1,199,837	1,008,117	191,720	19.0%	1,692,348	-29.1%
1,932,551	2,102,134	(169,583)	-8.1%	16. <b>Total operating revenue</b>	14,498,256	14,322,615	175,641	1.2%	12,907,077	12.3%
				<b>Expenses:</b>						
873,084	988,630	115,546	11.7%	17. Salaries and wages	6,695,466	7,278,012	582,546	8.0%	6,957,258	3.8%
142,064	106,215	(35,849)	-33.8%	18. Contract labor	597,705	478,561	(119,144)	-24.9%	455,772	-31.1%
344,075	391,360	47,285	12.1%	19. Employee benefits	2,483,633	2,615,635	132,002	5.0%	2,466,564	-0.7%
120,740	145,400	24,660	17.0%	20. Supplies	892,237	1,145,170	252,933	22.1%	1,060,343	15.9%
124,419	145,238	20,819	14.3%	21. Purchased services	887,768	1,033,937	146,169	14.1%	984,700	9.8%
37,108	69,441	32,333	46.6%	22. Repairs and maintenance	321,209	356,280	35,071	9.8%	339,314	5.3%
23,777	12,357	(11,420)	-92.4%	23. Minor equipment	165,133	112,117	(53,016)	-47.3%	106,778	-54.7%
22,061	22,396	335	1.5%	24. Rentals and leases	143,012	148,583	5,571	3.7%	144,254	0.9%
85,526	95,879	10,353	10.8%	25. Utilities	612,023	645,134	33,111	5.1%	641,924	4.7%
7,787	12,203	4,416	36.2%	26. Training and travel	60,669	85,421	24,752	29.0%	42,848	-41.6%
91,560	88,976	(2,583)	-2.9%	27. Depreciation	644,604	622,833	(21,771)	-3.5%	706,759	8.8%
15,770	16,107	337	2.1%	28. Insurance	112,829	115,601	2,772	2.4%	105,092	-7.4%
36,681	35,502	(1,179)	-3.3%	29. Other operating expense	226,520	229,610	3,090	1.3%	217,145	-4.3%
1,924,651	2,129,704	205,053	9.6%	30. <b>Total expenses</b>	13,842,808	14,866,894	1,024,086	6.9%	14,228,751	2.7%
7,900	(27,570)	35,470	128.7%	31. <b>Income (loss) from operations</b>	655,448	(544,279)	1,199,727	220.4%	(1,321,674)	149.6%
				<b>Nonoperating Gains(Losses):</b>						
(14,195)	70,975	(85,170)	-120.0%	32. Investment income	200,535	90,492	110,043	121.6%	245,595	-18.3%
(11,586)	(16,636)	5,050	30.4%	33. Interest expense	(83,756)	(31,390)	(52,366)	-166.8%	(146,755)	42.9%
0	0	0	n/a	34. Gain (loss) on disposal of assets	0	0	0	n/a	-	n/a
194,735	1,041	193,694	18606.5%	35. Other non-operating revenue	2,425,653	7,550	2,418,103	32027.9%	(143,883)	-1785.9%
168,954	55,380	113,574	205.1%	36. <b>Net nonoperating gains (losses)</b>	2,542,432	66,652	2,475,780	3714.5%	(45,043)	5744.5%
\$176,854	\$27,810	\$149,044	535.9%	37. <b>Change in Net Position (Bottom Line)</b>	\$3,197,880	(\$477,627)	\$3,675,507	-769.5%	(\$1,366,717)	334.0%

## PETERSBURG MEDICAL CENTER

## Balance Sheet

January, 2024

**ASSETS**

	Jan 2023	Dec 2023	June 2023	Jan 2022
<b>Current Assets:</b>				
1. Cash - operating	\$447,695	\$476,438	\$422,951	\$118,055
2. Cash - insurance advances	0	0	0	352,973
3. Investments	47,441	47,309	47,174	793,209
4. Total cash	495,136	523,747	470,125	1,264,237
5. Patient receivables	5,902,385	5,428,667	6,030,712	7,480,826
6. Allowance for contractals & bad debt	(1,745,685)	(1,577,053)	(2,891,731)	(3,749,583)
7. Net patient receivables	4,156,700	3,851,614	3,138,980	3,731,243
8. Other receivables	1,368,495	1,727,151	938,719	53,793
9. Inventories	324,048	323,908	317,650	326,286
10. Prepaid expenses	169,094	241,516	113,382	276,566
11. Total current assets	6,513,472	6,667,935	4,978,857	5,652,125
<b>Property and Equipment:</b>				
12. Assets in service	28,196,810	28,196,052	28,056,475	28,298,828
13. Assets in progress	3,636,698	3,451,390	1,322,767	305,902
14. Total property and equipment	31,833,507	31,647,441	29,379,242	28,604,730
15. Less: accumulated depreciation	(21,797,613)	(21,706,053)	(21,153,009)	(20,731,189)
16. Net property and equipment	10,035,895	9,941,388	8,226,233	7,873,541
<b>Assets Limited as to Use by Board</b>				
17. Investments	3,160,521	3,177,119	3,008,055	2,945,539
18. Building fund	685,450	687,429	649,250	634,817
19. Total Assets Limited as to Use	3,845,971	3,864,547	3,657,306	3,580,356
<b>Pension Assets:</b>				
20. OPEB Asset	6,685,608	6,685,608	8,781,677	8,781,677
<b>Deferred Outflows:</b>				
21. Pension	2,554,803	2,554,803	2,756,254	2,756,254
22. Total assets	\$29,635,749	\$29,714,282	\$28,400,326	\$28,643,953

**LIABILITIES & FUND BALANCE**

	Jan 2023	Dec 2023	June 2023	Jan 2022
<b>Current Liabilities:</b>				
23. Accounts payable	\$2,615,905	\$2,831,754	\$1,756,006	\$1,964,654
24. Accrued payroll	322,046	232,066	187,957	317,502
25. Payroll taxes and other payables	195,960	225,411	235,857	257,363
26. Accrued PTO and extended sick	1,010,446	1,057,805	1,069,103	1,009,400
27. Deferred revenue	107,606	128,368	206,868	438,461
28. Due to Medicare	(398,008)	(398,008)	99,999	382,790
29. Due to Medicare - Advance	0	0	0	352,973
30. Due to Blue Cross - Advance	0	0	0	0
31. Other current liabilities	3,517	3,517	3,069	3,515
32. Loan Payable - SBA	0	0	0	0
33. Current portion of long-term debt	394,169	392,489	347,641	366,807
34. Total current liabilities	4,251,642	4,473,402	3,906,501	5,093,465
<b>Long-Term Debt:</b>				
35. Capital leases payable	2,289,182	2,322,807	2,435,762	2,640,303
<b>Pension Liabilities:</b>				
36. Net Pension Liability	16,521,607	16,521,607	12,053,763	12,053,763
37. OPEB Liability	-	-	-	-
38. Total pension liabilities	16,521,607	16,521,607	12,053,763	12,053,763
39. Total liabilities	23,062,431	23,317,816	18,396,026	19,787,531
<b>Deferred Inflows:</b>				
40. Pension	623,594	623,594	9,613,036	9,613,036
<b>Net Position:</b>				
41. Unrestricted	5,949,724	5,772,870	391,263	610,104
42. Current year net income (loss)	0	0	0	(1,366,717)
43. Total net position	5,949,723	5,772,870	391,263	(756,614)
44. Total liabilities and fund balance	\$29,635,749	\$29,714,281	\$28,400,325	\$28,643,953

\*\*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 Volume Indicators**  
**FISCAL YEAR 2024**

	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	Total	Prior YTD	% Change
<b>Hospital Inpatient</b>															
1. Patient Days - Acute Care	32	32	26	8	40	33	30						201	190	5.8%
2. Patient Days - Swing Bed	46	31	26	53	49	40	35						280	293	-4.4%
3. Patient Days - Total	78	63	52	61	89	73	65						481	483	-0.4%
4. Average Daily Census - Acute Care	1.0	1.0	0.9	0.3	1.3	1.1	1.0						0.9	0.9	5.8%
5. Average Daily Census - Swing Bed	1.5	1.0	0.9	1.7	1.6	1.3	1.1						1.3	1.4	-4.4%
6. Average Daily Census - Total	2.5	2.0	1.7	2.0	3.0	2.4	2.1						2.2	2.2	-0.4%
7. Percentage of Occupancy	21.0%	16.9%	14.4%	16.4%	24.7%	19.6%	17.5%						18.6%	18.7%	-0.4%
<b>Long Term Care</b>															
8. Resident Days	403	410	420	461	450	444	414						3,002	2,553	17.6%
9. Average Daily Census	13.0	13.2	14.0	14.9	15.0	14.3	13.4						14.0	11.9	17.6%
10. Percentage of Occupancy	86.7%	88.2%	93.3%	99.1%	100.0%	95.5%	89.0%						93.1%	79.2%	17.6%
<b>Other Services</b>															
11. Emergency Room Visits	92	102	81	71	60	82	61						549	463	18.6%
12. Radiology Procedures	206	189	199	262	211	168	183						1,418	1,473	-3.7%
13. Lab Tests (excluding QC)	1,891	1,959	1,581	1,775	1,514	1,699	1,663						12,082	12,550	-3.7%
14. Rehab Services Units	1,043	1,071	768	675	608	665	743						5,573	6,123	-9.0%
15. Home Health Visits	212	152	118	142	145	120	114						1,003	1,702	-41.1%
16. Clinic Visits	**	794	821	729	874	784	725	812					5,539	4,996	10.9%

\*\* Stats under review

**PETERSBURG MEDICAL CENTER**  
**Key Operational Indicators**  
**For the month ended January 31, 2024**

	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	YTD	Prior YTD	% Change
1. Contractual Adj. as a % of Gross Revenue	37.9%	25.1%	15.9%	23.4%	9.1%	20.9%	15.7%						21.3%	20.6%	-3.7%
2. Charity/Other Ded. as a % of Gross Revenue	1.0%	0.0%	0.0%	-0.4%	-0.7%	-0.2%	-0.3%						-0.1%	1.1%	107.9%
3. Bad Debt as a % of Gross Revenue	-13.2%	-0.1%	-9.2%	5.1%	-11.3%	2.6%	6.1%						-2.8%	2.5%	-212.3%
4. Operating Margin	-3.3%	-2.0%	4.6%	-23.3%	41.4%	-12.5%	0.4%						4.5%	-10.2%	144.1%
5. Total Margin	-0.1%	10.0%	17.6%	-19.4%	51.5%	28.4%	8.4%						18.8%	-10.6%	276.6%
6. Days Cash on Hand (Including Investments)	79.7	74.8	69.7	69.1	68.0	73.8	73.5	-	-	-	-	-	62.0	81.3	-23.7%
7. Days in A/R	58.5	62.8	61.9	59.7	56.1	58.2	61.0	-	-	-	-	-	61.0	68.9	11.4%