

POSTED

DATE 1-27-2020
A.M. 3:23 P.M.

Michelle Reynolds
BY AB Deputy

MICHELLE REYNOLDS
COUNTY CLERK
SOMERVELL CO., TEXAS

AGENDA

2020 JAN 27 PM 3:18

SOMERVELL COUNTY HOSPITAL DISTRICT
REGULAR BOARD MEETING
JANUARY 30, 2020 AT 7:00PM
HOSPITAL BOARD ROOM
1021 HOLDEN STREET, GLEN ROSE, TEXAS

DEPUTY


BY AB

Mission Statement

Somervell County Hospital District Board is dedicated to providing an environment in which the GRMC Hospital can deliver excellent quality of care and safety to its patients, while maintaining financial viability.

- I. Call to Order
- II. Record of Attendance
- III. Pledge of Allegiance
- IV. Discuss and if necessary take action on Amending/Approval of minutes from previous meetings
 - a. December 30, 2019
- V. CFO Report
 - a. Report on Monthly and Year-to-Date Financials
- VI. Annual Board Quality Report
- VII. CEO Report
 - a. Report on Roger E Marks Foundation/Public Relations activity
 - b. Report on Blue Cross Blue Shield billing and contract issues
- VIII. Discuss and if necessary take action on the Order of Election to elect five (5) members of the Board of Directors of Somervell County Hospital District and to appoint an Early Voting Clerk for the Somervell County Hospital District Election to be held on May 2, 2020
- IX. Discuss and if necessary take action on the authorization of Board President to sign an InterLocal Cooperation Contract for the lease and use of voting equipment between Somervell County and Somervell County Hospital District pursuant to the provisions of Chapter 791 of the Texas Government Code entitled "InterLocal Cooperation Contracts"
- X. Public Comments
- XI. Adjourn

THIS BUILDING IS WHEELCHAIR ACCESSIBLE, ANY REQUESTS FOR SIGN LANGUAGE INTERPRETATION OR OTHER SPECIAL SERVICES MUST BE MADE 48 HOURS AHEAD OF MEETING. TO MAKE ARRANGEMENTS, CALL RAY REYNOLDS 254-897-1471 OR (TDD) 1-800-RELAY-TX (1-800-735-2989)


Mina Douglas, Secretary of the Board of Directors

SOMERVELL COUNTY HOSPITAL DISTRICT
D/B/A GLEN ROSE MEDICAL CENTER
REGULAR BOARD MEETING
MONDAY, DECEMBER 30, 2019 AT 7:00 P.M.
HOSPITAL BOARD ROOM

MINUTES

- I. Meeting was called to order at 7:00 pm.
- II. All members were present with the exception of Brett Nabors, Pat Bruce and Dr. Steven Vacek.
- III. Discuss and if necessary take action on Amending/Approval of minutes from previous meetings
 - a. December 5, 2019
 - b. December 19, 2019

Margaret Drake made a motion to accept the minutes as written. Dwayne Griffin seconded the motion, and motion carried 4-0.
- IV. CFO Report – Becky Whitsitt
 - a. **November 2019 financials were presented and discussed.**
- V. CEO Report – Ray Reynolds
 - a. **Report on Roger E Marks Foundation and Public Relations activity was presented. CNO Kathryn Placide also mentioned emergency care kits that are being put together for all GRISD and Brazos River Charter School classrooms through donations from LDL, Careflite, Medline and GRMC.**
 - b. **Report on Lab Outsource– nothing new to report.**
 - c. **Report on Blue Cross Blue Shield billing and contract issues – State Legislature will only allow 35% contingency, and Blevins has agreed to reduce his fee from 40 to 35%. Still working on spreadsheet of information attorney will need if contingency agreement is approved by Attorney General; bringing in two Business Office temps to help with this task. 90-day deadline is February 6. Waiting to hear more from Caldwell-Little River arbitration.**
 - d. **Report on I-35 Capital – met with them last week. Made commitment for regular payments to them to catch up on amount behind.**
- VI. Discuss and if necessary take action on Annual Evaluation of CEO
Only two turned in so far; get them to Mina to be tallied. No action taken.
- VII. Public Comments
None
- VIII. Adjourn
Motion was made by Dwayne Griffin and seconded by Pam Parsons to adjourn meeting at 7:24 pm. Motion carried 4-0.

THIS BUILDING IS WHEELCHAIR ACCESSIBLE, AND REQUESTS FOR SIGN LANGUAGE INTERPRETATION OR OTHER SPECIAL SERVICES MUST BE MADE 48 HOURS AHEAD OF MEETING. TO MAKE ARRANGEMENTS, CALL RAY REYNOLDS 254-897-1471 OR (TDD) 1-800-RELAY-TX (1-800-735-2989)

Ron Hankins, President

Brett Nabors, Vice President

Pat Bruce

Pam Parsons

Margaret Drake

Dr. Steven Vacek

Dwayne Griffin

GLEN ROSE MEDICAL CENTER - HOSPITAL PAGE 1
 BALANCE SHEET
 AS OF: 12/31/19

01/28/20 04:20 PM

	Current Month	Prior Month
ASSETS		
CURRENT ASSETS		
CASH AND INVESTMENTS		
CASH	635,272.04	621,637.69
	-----	-----
TOTAL CASH AND INVESTMENTS	635,272.04	621,637.69
ACCOUNTS RECEIVABLE		
PATIENT ACCOUNTS RECEIVABLES	78,524,466.41	79,272,482.09
LESS DISCOUNTS AND ALLOWANCES	(68,946,078.34)	(69,988,470.51)
	-----	-----
NET PATIENT ACCOUNTS RECEIVABLE	9,578,388.07	9,284,011.58
OTHER CURRENT ASSETS		
OTHER RECEIVABLES	4,066,376.69	4,389,699.68
INVESTMENT IN NURSING HOME	(1,972,080.00)	(1,972,080.00)
INVENTORY	680,922.85	677,145.01
PREPAIDS	110,076.48	121,040.74
	-----	-----
TOTAL OTHER CURRENT ASSETS	2,885,296.02	3,215,805.43
INTERCOMPANY RECEIVABLE	15,626,889.35	15,535,501.02
	-----	-----
TOTAL CURRENT ASSETS	28,725,845.48	28,656,955.72
PROPERTY PLANT AND EQUIPMENT		
REAL PROPERTY	19,386,994.71	19,386,994.71
FIXED EQUIPMENT	2,604,089.21	2,594,841.46
MAJOR MOVABLE EQUIPMENT	7,622,283.24	7,620,756.25
LEASEHOLD IMPROVEMENTS	237,755.82	237,755.82
LESS ACCUMULATED DEPRECIATION	(15,006,167.27)	(14,904,015.19)
	-----	-----
TOTAL PROPERTY PLANT AND EQUIPMENT	14,844,955.71	14,936,333.05
	-----	-----
TOTAL ASSETS	43,570,801.19	43,593,288.77
	=====	=====
LIABILITIES		
CURRENT LIABILITIES		
ACCOUNTS PAYABLE	1,737,715.67	1,445,975.77
ACCRUED AND OTHER LIABILITIES	5,383,283.99	5,680,285.81
	-----	-----
TOTAL CURRENT LIABILITIES	7,120,999.66	7,126,261.58
LONG TERM DEBT	11,530,825.90	11,556,820.69
	-----	-----
TOTAL LIABILITIES	18,651,825.56	18,683,082.27
	-----	-----
FUND BALANCE		
NET INCOME (LOSS)	250,792.28	242,023.15
PRIOR YEAR FUND BALANCE	24,668,183.35	24,668,183.35
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TOTAL FUND BALANCE	24,918,975.63	24,910,206.50
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TOTAL LIABILITIES AND FUND BALANCE	43,570,801.19	43,593,288.77
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GLEN ROSE MEDICAL CENTER - HOSPITAL
 OPERATING/INCOME STATEMENT
 FOR THE 3 MONTHS ENDING 12/31/19

01/28/20 04:20 PM

----- M O N T H -----			----- Y E A R T O D A T E -----		
ACTUAL	BUDGET	VARIANCE	ACTUAL	BUDGET	VARIANCE
REVENUES					
435,704.26	499,656.33	(63,952.07)	1,070,283.36	1,498,968.99	(428,685.63)
4,059,432.16	3,563,522.49	495,909.67	13,641,694.15	10,690,567.47	2,951,126.68
94,801.82	108,519.31	(13,717.49)	354,325.83	325,557.93	28,767.90
340,914.02	433,102.17	(92,188.15)	2,190,494.99	1,299,306.51	891,188.48
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4,930,852.26	4,604,800.30	326,051.96	17,256,798.33	13,814,400.90	3,442,397.43
DISCOUNTS AND ALLOWANCES					
1,475,367.59	1,403,237.81	(72,129.78)	5,163,432.14	4,209,713.43	(953,718.71)
419,015.52	383,529.03	(35,486.49)	1,427,026.98	1,150,587.09	(276,439.89)
1,670,410.24	1,583,294.93	(87,115.31)	5,843,038.41	4,749,884.79	(1,093,153.62)
1,192.48	6,584.16	5,391.68	7,389.89	19,752.48	12,362.59
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3,565,985.83	3,376,645.93	(189,339.90)	12,440,887.42	10,129,937.79	(2,310,949.63)
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1,364,866.43	1,228,154.37	136,712.06	4,815,910.91	3,684,463.11	1,131,447.80
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EXPENSES					
599,220.83	604,043.12	4,822.29	1,847,942.51	1,812,129.36	(35,813.15)
176,193.05	188,856.79	12,663.74	533,599.44	566,570.37	32,970.93
102,924.75	128,598.11	25,673.36	495,120.45	385,794.33	(109,326.12)
477,422.53	236,119.68	(241,302.85)	1,621,889.54	708,359.04	(913,530.50)
53,198.59	52,344.70	(853.89)	179,557.31	157,034.10	(22,523.21)
13,635.27	14,082.25	446.98	38,576.93	42,246.75	3,669.82
24,951.70	24,610.69	(341.01)	71,144.45	73,832.07	2,687.62
42,135.58	46,452.23	4,316.65	110,689.49	139,356.69	28,667.20
102,152.08	102,152.08	.00	306,456.24	306,456.24	.00
82,424.44	79,204.22	(3,220.22)	235,700.72	237,612.66	1,911.94
26,370.75	21,970.83	(4,399.92)	51,693.68	65,912.49	14,218.81
25,239.19	27,480.52	2,241.33	84,061.75	82,441.56	(1,620.19)
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1,725,868.76	1,525,915.22	(199,953.54)	5,576,432.51	4,577,745.66	(998,686.85)
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(361,002.33)	(297,760.85)	(63,241.48)	(760,521.60)	(893,282.55)	132,760.95
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OTHER INCOME					
293,619.76	293,632.31	(12.55)	881,995.59	880,896.93	1,098.66
13,273.52	17,449.92	(4,176.40)	40,458.99	52,349.76	(11,890.77)
.00	50,000.00	(50,000.00)	.00	150,000.00	(150,000.00)
(8,241.92)	.00	(8,241.92)	(80,666.10)	.00	(80,666.10)
10,571.27	11,883.00	(1,311.73)	30,346.54	35,649.00	(5,302.46)
60,548.83	52,573.44	7,975.39	139,178.86	157,720.32	(18,541.46)
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369,771.46	425,538.67	(55,767.21)	1,011,313.88	1,276,616.01	(265,302.13)
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8,769.13	127,777.82	(119,008.69)	250,792.28	383,333.46	(132,541.18)
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GLEN ROSE HEALTHCARE INC 501A
 BALANCE SHEET
 AS OF: 12/31/19

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	Current Month	Prior Month
ASSETS		
CURRENT ASSETS		
CASH AND INVESTMENTS		
CASH	131,512.41	88,137.52
	-----	-----
TOTAL CASH AND INVESTMENTS	131,512.41	88,137.52
	-----	-----
ACCOUNTS RECEIVABLE		
PATIENT ACCOUNTS RECEIVABLES	618,701.08	637,844.08
LESS DISCOUNTS AND ALLOWANCES	(369,272.70)	(376,677.07)
	-----	-----
NET PATIENT ACCOUNTS RECEIVABLE	249,428.38	261,167.01
	-----	-----
OTHER CURRENT ASSETS		
INVENTORY	78,312.66	78,312.66
PREPAID EXPENSES	13,827.34	16,087.19
	-----	-----
TOTAL OTHER CURRENT ASSETS	92,140.00	94,399.85
TOTAL CURRENT ASSETS	473,080.79	443,704.38
	-----	-----
PROPERTY PLANT AND EQUIPMENT		
FIXED EQUIPMENT	16,281.02	16,281.02
MAJOR MOVABLE EQUIPMENT	112,617.68	112,617.68
LESS ACCUMULATED DEPRECIATION	(74,583.20)	(73,583.20)
TOTAL PROPERTY PLANT AND EQUIPMENT	54,315.50	55,315.50
	-----	-----
TOTAL ASSETS	527,396.29	499,019.88
	=====	=====
LIABILITIES		
CURRENT LIABILITIES		
ACCOUNTS PAYABLE	864,073.54	846,753.80
ACCRUED AND OTHER LIABILITIES	102,374.98	115,101.92
	-----	-----
TOTAL CURRENT LIABILITIES	966,448.52	961,855.72
INTERCOMPANY LIABILITY	13,654,820.99	13,563,432.66
	-----	-----
TOTAL LIABILITIES	14,621,269.51	14,525,288.38
	-----	-----
FUND BALANCE		
NET INCOME (LOSS)	(392,935.38)	(325,330.66)
PRIOR YEAR FUND BALANCE	(13,700,937.84)	(13,700,937.84)
	-----	-----
TOTAL FUND BALANCE	(14,093,873.22)	(14,026,268.50)
	-----	-----
TOTAL LIABILITIES AND FUND BALANCE	527,396.29	499,019.88
	=====	=====

GLEN ROSE HEALTHCARE, INC. (501A)
OPERATING/INCOME STATEMENT
FOR THE 3 MONTHS ENDING 12/31/19

01/28/20 04:20 PM

Table with columns: MONTH (ACTUAL, BUDGET, VARIANCE) and YEAR TO DATE (ACTUAL, BUDGET, VARIANCE). Rows include REVENUES (REVENUE - OUTPATIENT, TOTAL REVENUE), DISCOUNTS AND ALLOWANCES (MANAGED CARE/OTHER, TOTAL D & A), NET REVENUE, EXPENSES (SALARIES AND WAGES, EMPLOYEE BENEFITS, SUPPLIES, PROFESSIONAL SERVICES, RENT/LEASE PAYMENTS, INSURANCE, UTILITIES, REPAIRS/MAINTENANCE, DEPRECIATION/AMORTIZATION, OTHER OPERATING EXPENSES), TOTAL OPERATING EXPENSES, NET OPERATING INCOME, OTHER INCOME, and NET INCOME/LOSS.

SOMERVELL COUNTY HOSPITAL DISTRICT PAGE 1
 BALANCE SHEET - CONSOLIDATED
 AS OF: 12/31/19

01/28/20 04:20 PM

	Current Month	Prior Month
ASSETS		
CURRENT ASSETS		
CASH AND INVESTMENTS		
CASH	766,784.45	709,775.21
	-----	-----
TOTAL CASH AND INVESTMENTS	766,784.45	709,775.21
	-----	-----
ACCOUNTS RECEIVABLE		
PATIENT ACCOUNTS RECEIVABLES	79,515,210.02	80,282,368.70
LESS DISCOUNTS AND ALLOWANCES	(69,687,393.57)	(70,737,190.11)
	-----	-----
NET PATIENT ACCOUNTS RECEIVABLE	9,827,816.45	9,545,178.59
	-----	-----
OTHER CURRENT ASSETS		
OTHER RECEIVABLES	4,066,376.69	4,389,699.68
INVESTMENT IN NURSING HOME	(1,972,080.00)	(1,972,080.00)
INVENTORY	759,235.51	755,457.67
PREPAIDS	123,903.82	137,127.93
	-----	-----
TOTAL OTHER CURRENT ASSETS	2,977,436.02	3,310,205.28
INTERCOMPANY RECEIVABLE	13,654,810.97	13,563,422.64
TOTAL CURRENT ASSETS	27,226,847.89	27,128,581.72
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PROPERTY PLANT AND EQUIPMENT		
REAL PROPERTY	19,386,994.71	19,386,994.71
FIXED EQUIPMENT	2,620,370.23	2,611,122.48
MAJOR MOVABLE EQUIPMENT	7,734,900.92	7,733,373.93
LEASEHOLD IMPROVEMENTS	237,755.82	237,755.82
LESS ACCUMULATED DEPRECIATION	(15,080,750.47)	(14,977,598.39)
TOTAL PROPERTY PLANT AND EQUIPMENT	14,899,271.21	14,991,648.55
	-----	-----
TOTAL ASSETS	42,126,119.10	42,120,230.27
	=====	=====
LIABILITIES		
CURRENT LIABILITIES		
ACCOUNTS PAYABLE	2,601,789.21	2,292,729.57
ACCRUED AND OTHER LIABILITIES	5,485,658.97	5,795,387.73
	-----	-----
TOTAL CURRENT LIABILITIES	8,087,448.18	8,088,117.30
INTERCOMPANY LIABILITY	13,654,820.99	13,563,432.66
	-----	-----
LONG TERM DEBT	11,530,825.90	11,556,820.69
TOTAL LIABILITIES	33,273,095.07	33,208,370.65
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FUND BALANCE		
NET INCOME (LOSS)	(142,143.10)	(83,307.51)
PRIOR YEAR FUND BALANCE	8,995,167.13	8,995,167.13
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TOTAL FUND BALANCE	8,853,024.03	8,911,859.62
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TOTAL LIABILITIES AND FUND BALANCE	42,126,119.10	42,120,230.27
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SOMERVELL COUNTY HOSPITAL DISTRICT
 OPERATING/INCOME STMT - CONSOLIDATED 01/28/20 04:20 PM
 FOR THE 3 MONTHS ENDING 12/31/19

----- M O N T H -----			----- Y E A R T O D A T E -----			
ACTUAL	BUDGET	VARIANCE		ACTUAL	BUDGET	VARIANCE
REVENUES						
435,704.26	499,656.33	(63,952.07)	HOSPITAL INPATIENT	1,070,283.36	1,498,968.99	(428,685.63)
4,495,148.00	4,105,143.97	390,004.03	HOSPITAL OUTPATIENT	16,186,514.97	12,315,431.91	3,871,083.06
629,698.94	758,159.55	(128,460.61)	GLEN ROSE HEALTHCARE (501A)	1,917,303.15	2,274,478.65	(357,175.50)
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5,560,551.20	5,362,959.85	197,591.35	TOTAL REVENUE	19,174,101.48	16,088,879.55	3,085,221.93
DISCOUNTS AND ALLOWANCES						
1,475,367.59	1,403,237.81	(72,129.78)	MEDICARE/MEDICAID	5,163,432.14	4,209,713.43	(953,718.71)
419,015.52	383,529.03	(35,486.49)	BAD DEBTS	1,427,026.98	1,150,587.09	(276,439.89)
1,992,123.79	1,988,705.04	(3,418.75)	MANAGED CARE/OTHER	6,810,001.80	5,966,115.12	(843,886.68)
1,192.48	6,584.16	5,391.68	CHARITY CARE	7,389.89	19,752.48	12,362.59
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3,887,699.38	3,782,056.04	(105,643.34)	TOTAL D & A	13,407,850.81	11,346,168.12	(2,061,682.69)
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1,672,851.82	1,580,903.81	91,948.01	NET REVENUE	5,766,250.67	4,742,711.43	1,023,539.24
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EXPENSES						
804,714.40	873,244.69	68,530.29	SALARIES AND WAGES	2,614,182.48	2,619,734.07	5,551.59
245,169.47	275,179.15	30,009.68	EMPLOYEE BENEFITS	772,730.50	825,537.45	52,806.95
122,521.63	155,023.12	32,501.49	SUPPLIES	604,210.01	465,069.36	(139,140.65)
526,543.53	279,678.77	(246,864.76)	PROFESSIONAL SERVICES	1,764,666.98	839,036.31	(925,630.67)
65,386.30	64,772.53	(613.77)	RENT/LEASE PAYMENTS	216,429.66	194,317.59	(22,112.07)
19,317.71	19,925.06	607.35	INSURANCE	56,737.35	59,775.18	3,037.83
27,834.01	27,869.03	35.02	UTILITIES	80,164.93	83,607.09	3,442.16
42,206.60	46,510.56	4,303.96	REPAIRS AND MAINTENANCE	110,760.51	139,531.68	28,771.17
103,152.08	103,152.08	.00	DEPRECIATION/AMORTIZATION	309,456.24	309,456.24	.00
94,623.76	88,307.92	(6,315.84)	OTHER OPERATING EXPENSES	260,101.50	264,923.76	4,822.26
26,370.75	21,970.83	(4,399.92)	INDIGENT CARE PROGRAM	51,693.68	65,912.49	14,218.81
25,239.19	27,480.52	2,241.33	SENIOR ADULT PROGRAM	84,061.75	82,441.56	(1,620.19)
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2,103,079.43	1,983,114.26	(119,965.17)	TOTAL OPERATING EXPENSES	6,925,195.59	5,949,342.78	(975,852.81)
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(430,227.61)	(402,210.45)	(28,017.16)	NET OPERATING INCOME	(1,158,944.92)	(1,206,631.35)	47,686.43
371,392.02	442,622.01	(71,229.99)	OTHER INCOME	1,016,801.82	1,327,866.03	(311,064.21)
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(58,835.59)	40,411.56	(99,247.15)	NET INCOME/LOSS	(142,143.10)	121,234.68	(263,377.78)
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GLEN ROSE MEDICAL CENTER COLLECTIONS TREND

FY 2020						
HOSPITAL	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20
Net Revenue	2,008,959	1,442,085	1,364,866			
Collections	1,297,506	1,378,454	1,067,473			
%	65%	96%	78%	#DIV/0!	#DIV/0!	#DIV/0!
Collections - Lab Outsourced	(12,156)	712	(5,354)			
Total A/R Collections	1,285,350	1,379,166	1,062,118	-	-	-

YEAR END TOTALS
4,815,911
3,743,433
77.73%

YEARLY AVG
1,605,304
1,247,811
77.73%

(16,798)
3,726,635

FY 2019						
HOSPITAL	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19
Net Revenue	1,006,513	867,172	2,018,607	1,456,594	2,654,777	5,511,728
Collections	737,155	850,853	1,067,809	1,705,751	1,687,361	1,969,796
%	73%	98%	53%	117%	64%	36%
Collections - Lab Outsourced	312,747	181,677	367,721	356,887	208,904	96,223
Total A/R Collections	1,049,902	1,032,530	1,435,530	2,062,638	1,896,265	2,066,020

YEAR END TOTALS
31,284,958
26,152,143
83.59%

YEARLY AVG
2,607,080
2,179,345
83.59%

2,183,852
28,335,995

GLEN ROSE MEDICAL CENTER
 COST CENTER SCHEDULE
 FOR THE 3 MONTHS ENDING 12/31/19
 ANCILLARY CLINIC CONSOLIDATED

01/28/20 10:01 PM

----- M O N T H -----			----- Y E A R T O D A T E -----		
ACTUAL	BUDGET	VARIANCE	ACTUAL	BUDGET	VARIANCE
(331.00)	.00	(331.00)	PLANO CLINIC-OUTPATIENT REVE	.00	(6,278.55)
(7,553.11)	.00	(7,553.11)	MCKIN CLINIC-OUTPATIENT REVE	.00	(47,304.07)
(7,273.60)	.00	(7,273.60)	FRISCO CLINIC-OUTPATIENT REV	.00	(18,261.61)
(3,374.38)	.00	(3,374.38)	ALLEN CLINIC-OUTPATIENT REVE	.00	(50,339.96)
(21,154.69)	.00	(21,154.69)	CLBRN THERAPY-OUTPATIENT REV	.00	282,334.77
(4,835.53)	.00	(4,835.53)	ASID SELECT-OUTPATIENT REVEN	.00	1,592.48
398,445.50	433,102.17	(34,656.67)	CLBRN IMAGING-OUTPATIENT REV	1,299,306.51	5,210.93
(130.00)	.00	(130.00)	DENTON CLINIC-OUTPATIENT REV	.00	(3,341.89)
(75.00)	.00	(75.00)	CRSS RD CLINIC-OUTPATIENT RE	.00	3,840.00
(3,220.62)	.00	(3,220.62)	ALEDO CLINIC-OUTPATIENT REVE	.00	172,552.16
(9,583.55)	.00	(9,583.55)	WTHRFRD CLINIC-OUTPATIENT RE	.00	551,184.22
-----	-----	-----	-----	-----	-----
340,914.02	433,102.17	(92,188.15)	TOTAL OPERATING REVENUE	1,299,306.51	891,188.48
-----	-----	-----	-----	-----	-----
245,560.21	373,023.28	127,463.07	DISCOUNTS AND ALLOWANCES	1,119,069.84	(459,857.71)
-----	-----	-----	-----	-----	-----
95,353.81	60,078.89	35,274.92	NET REVENUE	180,236.67	431,330.77
-----	-----	-----	-----	-----	-----
-----	-----	-----	EXPENSES	-----	-----
12,785.79	14,915.33	2,129.54	SALARIES & WAGES	44,745.99	3,954.46
841.76	1,435.84	594.08	EMPLOYEE BENEFITS	4,307.52	822.01
2,872.34	1,512.50	(1,359.84)	SUPPLIES	4,537.50	(5,998.05)
232,990.11	14,699.75	(218,290.36)	PROFESSIONAL SERVICES	44,099.25	(893,051.00)
19,896.42	19,850.00	(46.42)	RENT/LEASE PAYMENTS	59,550.00	(26,079.26)
937.03	378.51	(558.52)	OTHER OPERATING EXPENSES	1,135.53	(2,478.52)
-----	-----	-----	-----	-----	-----
270,323.45	52,791.93	(217,531.52)	TOTAL OPERATING EXPENSES	158,375.79	(922,830.36)
-----	-----	-----	-----	-----	-----
-----	-----	-----	OTHER REVENUE AND EXPENSE	-----	-----
-----	-----	-----	-----	-----	-----
(174,969.64)	7,286.96	(182,256.60)	TOTAL REVENUE OVER EXPENSE	21,860.88	(491,499.59)
=====	=====	=====	=====	=====	=====

GLEN ROSE MEDICAL CENTER PATIENT STATISTICAL REPORT

	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	2019/2020	PYTD
	2019	2019	2019	2020	2020	2020	2020	2020	2020	2020	2020	2020		2018 - 2019
ACUTE ADMISSIONS:														
MEDICARE	11	7	18										36	140
MEDICARE ADV/HMO	3	3	5										11	66
MEDICAID	1	0	0										1	5
MEDICAID STAR	1	1	1										3	2
COMM. INS.	1	1	3										5	30
OTHER	3	0	0										3	18
TOTAL	20	12	27	0	0	0	0	0	0	0	0	0	59	261
ACUTE PATIENT DAYS:														
MEDICARE	44	23	45										112	402
MEDICARE ADV/HMO	12	9	10										31	205
MEDICAID	1	0	0										1	13
MEDICAID STAR	0	7	1										8	9
COMM. INS.	3	1	5										9	74
OTHER	9	0	0										9	43
TOTAL	69	40	61	0	0	0	0	0	0	0	0	0	170	746
OCCUPANCY %	14%	8%	12%	0%	0%	0%	0%	0%	0%	0%	0%	0%	3%	13%
ACUTE DISCHARGES:														
MEDICARE	13	8	15										36	139
MEDICARE ADV/HMO	3	3	4										10	67
MEDICAID	1	0	0										1	4
MEDICAID STAR	0	2	1										3	2
COMM.INS.	1	1	3										5	31
OTHER	3	0	0										3	18
TOTAL	21	14	23	0	0	0	0	0	0	0	0	0	58	261
CASE MIX INDEX:														
MEDICARE	1.115	1.087	0.858										1.020	0.959
MEDICARE ADV/HMO	1.222	0.777	0.911										0.970	0.934
MEDICAID	0.988	1.074	0.046										0.702	1.103
ALL PAYOR	1.083	1.038	0.870										0.997	0.958
A.L.O.S.														
MEDICARE	3.38	2.88	3.00	-	-	-	-	-	-	-	-	-	3.09	2.89
MEDICARE ADV/HMO	4.00	3.00	2.50	-	-	-	-	-	-	-	-	-	3.17	3.05
MEDICAID	1.00	3.50	1.00	-	-	-	-	-	-	-	-	-	1.83	3.70
COMM.INS.	3.00	1.00	1.67	-	-	-	-	-	-	-	-	-	1.89	2.63
OTHER	3.00	-	-	-	-	-	-	-	-	-	-	-	3.00	2.23

	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	2019/2020	PYTD 2018 - 2019
	2019	2019	2019	2020	2020	2020	2020	2020	2020	2020	2020	2020	2.84	2.84
TOTAL	3.00	2.86	2.65	-	-	-	-	-	-	-	-	-	2.84	2.84
SWINGBED:														
ADMISSIONS	0	0	0	0	0	0	0	0	0	0	0	0	0	0
(MCR Admissions)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
PATIENT DAYS	0	0	0	0	0	0	0	0	0	0	0	0	0	0
DISCHARGES	0	0	0	0	0	0	0	0	0	0	0	0	0	0

	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	2019/2020	PYTD 2018 - 2019
	2019	2019	2019	2020	2020	2020	2020	2020	2020	2020	2020	2020		
HOSPICE:														
ADMISSIONS	0	0	0	0	0	0	0	0	0	0	0	0	0	0
PATIENT DAYS	0	0	0	0	0	0	0	0	0	0	0	0	0	0
DISCHARGES	0	0	0	0	0	0	0	0	0	0	0	0	0	0
OBSERVATION														
ADMISSIONS	18	15	16										49	142
ADMIT TO IP	3	0	0										3	3
DISCHARGES	19	14	16										49	140
PATIENT DAYS	22	16	25										63	187
TOTAL PT DAYS (IP,OBS,SWB,HOSP)														
	91	56	86	0	0	0	0	0	0	0	0	0	233	933
SURGERIES:														
IP SURGERIES	1	2	0										3	7
SWB SURGERIES	0	0	0										0	0
OBS SURGERIES	0	0	1										1	0
OP SURGERIES	59	46	37										142	227
TOTAL SURGERIES	60	48	38	0	0	0	0	0	0	0	0	0	146	234
SCOPES:														
IP SCOPES	0	1	2										3	6
SWB SCOPES	0	0	0										0	0
OBS SCOPES	0	0	1										1	3
OP SCOPES	78	58	76										212	502
TOTAL SCOPES	78	59	79	0	0	0	0	0	0	0	0	0	216	511
PROCEDURES OTHER	6	3	3										12	69
TOTAL PATIENTS	134	104	114										352	734
TOTAL SRGS/SCOPES	138	107	117	0	0	0	0	0	0	0	0	0	362	745
EMERGENCY ROOM:														
ER VISITS D/C, AMA, EXP	354	420	541										1315	4922
ER TRANSFERS	26	17	32										75	306
ER OBSERVATION-ADM	17	13	8										38	149
ER IP-ADMITTS	14	10	25										49	190
TOTAL ER	411	460	606	0	0	0	0	0	0	0	0	0	1477	5567
SR CARE VISITS (Billed Visits)	557	408	350										1315	4613
PT/OT/ST	438	386	435										1259	8319
Cryotherapy	81	78	73										232	203
E/R ROOM LEVELS CASE MIX	3,933	3,672	3,553										3,719	3,780
Average Daily Census	2.23	1.33	1.97	-	-	-	-	-	-	-	-	-	1.84	2.04

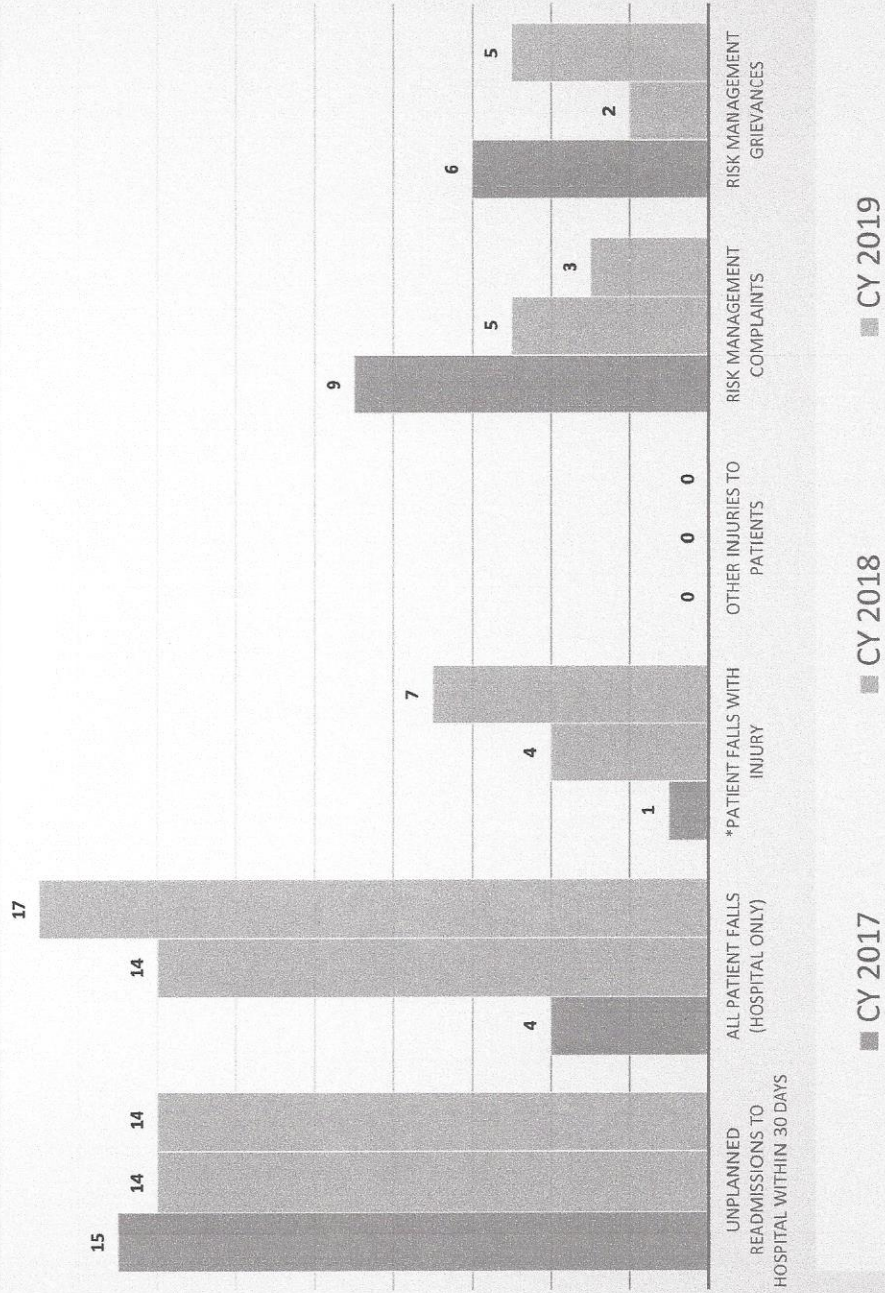
Annual Quality Report

CY 2019

Board Quality Report CY 2019

Quality Initiative:	Benchmark (CY)	Totals CY 2019	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Trend
Unplanned Readmissions to hospital within 30 days	2017 - 15 2018 - 14	14	1	3	3	7	↔
Healthcare Associated Infections	2017 - 0 2018 - 0	2	1	0	1	0	↗
Invasive Procedure related Infections	2017 - 0 2018 - 0	0	0	0	0	0	↔
Total HAI rate	2017 - 0 2018 - 0	2%	1%	0	1%	0	↗
All Patient Falls (Hospital only)	2017 - 4 2018 - 14	17	7	3	3	4	↗
* Patient falls with injury	2017 - 1 2018 - 4	7	3	1	0	3	↗
Other injuries to patients	2017 - 0 2018 - 0	0	0	0	0	0	↔
Never or Sentinel Events	2017 - 0 2018 - 0	0	0	0	0	0	↔
Risk Management Complaints	2017 - 9 2018 - 5	3	0	2	1	0	↘
Risk Management Grievances	2017 - 6 2018 - 2	5	1	2	2	0	↗

Annual Board Quality Report 2019



OP Core Measures FY 2019	Oct	Nov	Dec	Jan	Feb	March	April	May	June	July	Aug	Sept	Total Submitted	GRMC % Passed	State % passed (3qtrs)	National % passed (3qtrs)
AMI: Total Accounts	3	4	4	4	5	1	1	1	1	3	2	2	3	30		
Failures:																
OP-2: Fibrinolytic Therapy rec'd within 30 mins			1											2	91%	58%
OP-3: Median Time to transfer to another facility for acute coronary intervention														0	100%	64 minutes
OP-5 Median time to ECG (EKG)														0	100% / 6 minutes	8 minutes
ED Throughput: Sampled Accounts								20	42	47	62	25	23	219		
Failures:																
OP-18: Median time from ED Arrival to ED departure for D/C ED patients														0	100% / 90 minutes	112 minutes
Stroke: Total Accounts	2	1	1	1	1				1	4	1	0	11			
Failures:																
OP-23: Head CT or MRI Scan Results for All Stroke or Hemorrhagic Stroke patients who rec'd Head CT or MRI Scan within 45 mins of arrival			1											1	83%	72%

IP Core Measures FY 2019	Oct	Nov	Dec	Total Submit	Q1% Pass	Jan	Feb	March	Total Submit	Q2% Pass	April	May	June	Total Submit	Q3% Pass	July	Aug	Sept	Total Submit	Q4% Pass	Total Submit	Total % pass	State % pass (3qtrs)	National % pass (3qtrs)
SEPSIS: Early Management Total Accounts Submitted	1	0	0	1		1	0	1	2		1	3	1	5		2	1	1	4		12			
Failures:				0	100%				0	100%				0	100%	2	0	0	2	50%	2	83%	58%	57%
Venous Thromboembolism: Hospital Acquired (VTE) Total Accounts Submitted	0	0	0	0		0	1	0	1		0	0	0	0		0			0		1			
Failures:				0	N/A				0	100%					N/A				0	N/A	0	0%	2%	3%
IMMUNIZATION: Flu Total Accounts Submitted	7	3	21	31		0	0	0	0		0	0	0	0					0	N/A	31			
Failures:	1	1	2	4	87%				0	N/A	Not applicable	Not applicable	Not applicable	Not applicable					Not applicable					

Public Relations/REM Report
January 2020

Daily check with surgery department (surgeon's needs)

Local marketing/networking meetings

Health Fair Comanche Peak (labs, carotid artery, bone density, thyroid)

Senior Center monthly screening

Working with Pecan EMS for health fair in May

Sponsor with Tractor Pull

RECAP Meeting

Discussion with Moncrief, will be offering mammograms again (limited space)

Delivering first aid bags to all GRISD campus' (working with LDL, CareFlite, SOCO Sheriff Dept.)

Working on patient portal cards for online payments

Working with Kim Lawrence on Specialty Clinic prep for opening

Working with Kim Lawrence getting information out about Elizabeth Weaver to Pecan Residents

Zack and Tom from Outpatient Therapy spoke to the group at the Men's Breakfast in Pecan about available services.

REM

Monthly meeting

GRISD Senior Scholarship (\$4,000 this year to 1 graduate)

Future event, possible partnership with Barnard's Mill

**ORDER OF ELECTION
(ORDEN DE ELECCIÓN)**

An election is hereby ordered to be held on May 2, 2020, for the purpose of:

The election of five (5) members of the Board of Directors of Somervell County Hospital District.

(Por la presente se ordena que se llevará a cabo una elección el 2 de mayo de 2020 con el proposito de:

La elección de cinco (5) miembros de la Mesa Directiva de Somervell County Hospital District.)

Early voting by personal appearance will be conducted each weekday between the hours of 8:00 a.m. and 5:00 p.m. beginning on April 20, 2020, and ending on April 28, 2020 at:

Glen Rose Medical Center
1021 Holden Street
Glen Rose, TX 76043

(La votación adelantada en persona se llevará a cabo de lunes a viernes entre las 8:00 de la mañana y las 5:00 de la tarde empezando el 20 de abril de 2020 y terminando el 28 de abril de 2020 en:

*Glen Rose Medical Center
1021 Holden Street
Glen Rose, TX 76043)*

Applications for ballot by mail shall be mailed to:

(Las solicitudes para boletas que se votarán en ausencia por correo deberán enviarse a:)

Early Voting Clerk
P.O. Box 2099
Glen Rose, Texas 76043

Applications for ballot by mail must be received no later than the close of business on April 20, 2020.

(Las solicitudes para boletas que se votarán en ausencia por correo deberán recibirse para el fin de las horas de las horas de negocio el 20 de abril de 2020.)

Issued this the _____ day of January, 2020.
(Emitida este día _____ de enero de 2020.)

Member
Miembro

Signature of Presiding Officer
Firma del Oficial que Preside

Member
Miembro

Member
Miembro

Member
Miembro

Member
Miembro

Member
Miembro

INTERLOCAL COOPERATION CONTRACT
FOR
LEASE AND USE OF VOTING EQUIPMENT BETWEEN
SOMERVELL COUNTY AND SOMERVELL COUNTY HOSPITAL DISTRICT
FOR
MAY 2, 2020 ELECTION

THIS AGREEMENT is made and entered into by and between the COUNTY OF SOMERVELL, hereinafter referred to as "County or Lessor" and SOMERVELL COUNTY HOSPITAL DISTRICT, hereinafter referred to as "Hospital or Lessee", pursuant to the provisions of Chapter 791 of the Texas Government Code entitled "InterLocal Cooperation Contracts".

RECITALS

WHEREAS, County owns certain electronic voting equipment, more specifically described hereinafter; and

WHEREAS, Hospital has a need for the use of such equipment; and

WHEREAS, County and Hospital wish to make provisions setting out the rights and obligations of each of the parties hereto in connection with such an agreement.

NOW THEREFORE, for and in consideration of the mutual promises, covenants and conditions contained herein, and other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, County and Hospital hereby agree as follows:

AGREEMENT

1. **Purpose of Agreement and Authority:** Lessor and Lessee have determined that it is in the public interest of the residents living within the jurisdiction of Lessor and Lessee that the following InterLocal Agreement be made and entered into wherein, Lessee hires from Lessor its electronic voting equipment to be used by Lessee in certain elections which Lessee shall conduct.
2. **Term:** The term of this Agreement shall begin upon the approval of this Agreement by both Lessor and Lessee and shall continue for a period of one (1) year from that date. This Agreement may be modified at any time during its term, by a writing signed by duly appointed representatives of each party.
3. **Rental:** The rental fee for one set of electronic voting equipment shall be the sum of Three Hundred and No/100 Dollars (\$300.00) per day of use; or the sum of One Hundred Fifty and No/100 Dollars (\$150.00) per day for the use of only the state mandated ADA, AutoMARK Voter Assist Terminal.

Note: A "day of use" shall be defined as any day in which Lessee is actually conducting an election. It does not include any day when the equipment may be in Lessee's possession, but is not actually being used by Lessee for election purposes. In addition, Lessee shall pay to Lessor the sum of Two Hundred Fifty and No/100 Dollars (\$250.00) per election for labor for the term of this Agreement.

Note: The term "labor", as used herein, refers to time spent by employee(s) of Lessor in order to "make ready" the leased equipment for the conduct of an election by the Lessee. In the event that another Lessee (or other Lessees) are also conducting an election at the same time, and are using equipment belonging to Lessor, then the \$250.00 fee shall be divided equally between all Lessees.

The rental fee for any additional voting machines shall be the sum of One Hundred Fifty and No/100 Dollars (\$150.00) per day of use, per machine.

4. **Use:** Lessee shall use the electronic election equipment and supplies described in Exhibit "A", which is attached hereto and incorporated herein for all purposes, in a careful and proper manner. Lessee agrees to comply with any and all reasonable instructions given by the Elections Administrator of Somervell County, Texas, and the Manufacturer's manual as to the use and operation of said electronic election equipment, as well as any laws, ordinances, or regulations relating to the possession, use, and maintenance of the electronic election equipment, and shall limit its use only for the purposes of holding the election described herein.
5. **Condition of Equipment Upon Receipt:** Lessee shall inspect the electronic election equipment within eight (8) hours after receipt of same. Unless Lessee gives written notice to Lessor within said period of time, specifying any defects in, or other proper objections to the condition of said equipment, Lessee agrees that it shall be conclusively presumed, between Lessor and Lessee, that Lessee has fully inspected the equipment and that same is in good condition and repair, and that Lessee is satisfied with and has accepted the equipment as such.
6. **Inspection:** Lessor shall at all reasonable times, during the election being conducted by Lessee, have the right to enter on the premises where the election is being held for the purposes of inspecting the equipment and observing its use.
7. **Alterations:** Lessee acknowledges that the equipment is technical and Lessee shall make no alterations, nor attempt to make alterations to the equipment without obtaining prior written permission from the Elections Administrator of Somervell County, Texas.
8. **Maintenance and Repair:** Lessee at its own cost and expense shall keep the leased equipment in good repair, condition and working order and shall see that the election equipment is not subject to careless use or abuse.
9. **Loss and Damage:** Lessee assumes all risk of loss or damage to the electronic election equipment from any cause. In the event of loss or damage to the equipment, Lessee shall, at the option of Lessor:
 - (a) repair the equipment, at the sole cost of Lessee, subject to any coverage of warranty by the manufacturer;
 - (b) replace the equipment with like equipment in good repair, which equipment shall then become subject to this Agreement;
 - (c) pay Lessor for the equipment at the value listed for such equipment in Exhibit "A", attached hereto, which value shall be accepted as the "stipulated loss value". Upon such payment by Lessee, this Agreement shall terminate as to such equipment. In the event that the equipment paid for by Lessee under this subparagraph is "damaged", upon such payment by Lessee, Lessee shall become the owner of such "damaged" equipment.

10. **Indemnity:** Subject to the provisions of the Texas Tort Claims Act, Lessee shall indemnify Lessor against and hold Lessor harmless from all claims, actions, proceedings, costs, damages and liabilities, including attorney's fees arising out of, connected with, or resulting from the lease of the electronic election equipment, including without limitation the selection, delivery, use, operation, or return of the property.
11. **Default:** In the event of any noncompliance by Lessee of any term, covenant, or condition of this Agreement, shall, at the option of the Lessor, be deemed a "default", and Lessor may immediately terminate this Agreement and shall have the right to repossession of the equipment leased hereunder. Upon written notice to Lessee by Lessor of Lessor's option to terminate this Agreement, Lessee shall immediately surrender possession of the equipment to Lessor.
12. **Assignment of Lease:** This Agreement may not be assigned, or otherwise transferred, without the prior written consent of Lessor. Ownership of the electronic election equipment shall at all times remain the sole property of Lessor, and Lessee shall have no right, title or interest in the property, other than its use under the strict conditions of this Agreement.
13. **Applicable law:** This Agreement shall be governed by and construed in accordance with the laws of the State of Texas.

Please One

- Hospital District elects to use the ES&S AutoMARK Voter Assist Terminal (Version 1.0.121), the M-100 Precinct Scanner (Version 5.0.0.0) with Steel Ballot Box, the Electronic Poll book (Version 3.0) with driver's license swiper, barcode scanner & Brother label printer QL-570.
- Hospital District elects to use only the ES&S AutoMARK Voter Assist Terminal (Version 1.0.121) and the Electronic Poll book (Version 3.0) with driver's license swiper, barcode scanner & Brother label printer QL-570.

DATED THE _____ DAY OF _____, 2020

SOMERVELL COUNTY
LESSOR

By: _____
Danny L. Chambers, County Judge

DATED THE _____ DAY OF _____, 2020

SOMERVELL COUNTY HOSPITAL DISTRICT
LESSEE

By: _____
Authorized Officer

EXHIBIT "A"

- 1 – ES&S ADA AutoMARK Voter Assist Terminal (Version 1.0.121)
Value: \$ 5,400.00

- 1 – M100 Precinct Scanner (Version 5.0.0.0) with Steel Ballot Box
Value: \$ 4,750.00

- 1 – Knowink Poll Pads (32GB) with Stand and Driver's License holder.
Value: \$ 310.00