

**POSTED**  
DATE 10-25-21  
A.M. 3:25 P.M.  
*Mission Report*  
BY AB Deputy

FILED FOR RECORD  
A.M. 3:20 P.M.

OCT 25 2021

OCT 25 2021

AGENDA

SOMERVELL COUNTY HOSPITAL DISTRICT  
REGULAR BOARD MEETING  
OCTOBER 28, 2021 AT 7:00PM  
HOSPITAL BOARD ROOM  
1021 HOLDEN STREET, GLEN ROSE, TEXAS

*Michelle Reynolds*  
COUNTY CLERK  
SOMERVELL COUNTY, TEXAS  
BY AB DEPUTY

**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. September 30, 2021
- V. Hear presentation from CHC and if necessary take action to approve contract with CHC for CEO Evaluation
- VI. CFO Report
  - a. Report on Monthly and Year-to-Date Financials
- VII. CEO Report
  - a. Roger E Marks Foundation/Public Relations
  - b. Blue Cross Blue Shield billing and contract issues
  - c. QIPP Update
  - d. ER Contract Update
  - e. CHC GPO Update
  - f. Bond Refi Update
  - g. Surgery Update
  - h. COVID Update
- VIII. Discuss and if necessary take action on the Official Ballot for election of the Somervell Central Appraisal District Board of Directors for 2022-2023
- IX. Discuss and if necessary take action on changes in the Senior Care department operations
- X. Discuss and if necessary take action on changes in the Business Office department operations
- XI. Discuss and if necessary take action to change the dates of November and December Regular Board Meetings
- XII. Public Comments
- XIII. 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 MICHAEL HONEA 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  
THURSDAY, SEPTEMBER 30, 2021 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, Margaret Drake and Jeannie Simpson.
- III. Discuss and if necessary take action on Amending/Approval of minutes from previous meetings
  - a. August 26, 2021 6PM
  - b. August 26, 2021 7PM
  - c. September 23, 2021 6PM
  - d. September 23, 2021 6:30PM

**Dr. Steven Vacek made a motion to accept the minutes as written. Joe Cathey seconded the motion, and motion carried 4-0.**
- IV. CFO Report – Becky Whitsitt
  - a. **August 2021 financials were presented and discussed. Volunteer Program has agreed to purchase two special reclining wheelchairs for GRMC. End of year inventory was today, plus working on Provider Relief Fund Audit (which was extended), our regular audit and PPP loan forgiveness application, so the next few months will be really busy.**
- V. CEO Report – Becky Whitsitt for Michael Honea
  - a. **Roger E Marks Foundation and Public Relations report was presented. Of special note: REM has agreed to purchase a CPR compression machine (thumper) for GRMC.**
  - b. **Quality Report will be presented quarterly, so no report this month.**
  - c. **Blue Cross Blue Shield billing and contract issues – had phone call with them; will cover more later in agenda item.**
  - d. **QIPP Update – covered in financial report-have a \$400K payment to make in December, plus for Accelerated Payment Plan recoupment, Medicare has been recouping from the nursing home too now since we are linked. We have to reimburse them, but even though it affects our cash flow, it will be paid off sooner this way.**
  - e. **ER Contract Update – Concord to take over December 1 and will be in-network.**
  - f. **COVID Update – numbers going down; patient transfers getting easier.**
- VI. Discuss and if necessary take action to approve the resolution to affirm the nomination of candidates to serve on the Board of Directors of the Somervell Central Appraisal District for the years 2022 and 2023  
**Dr. Steven Vacek made a motion to nominate Nemo Britton to serve on the Board of Directors of the Somervell Central Appraisal District for the years 2022 and 2023. Max Bly seconded the motion, and motion carried 4-0.**
- VII. Discuss and if necessary take action to accept resignation of Board Member Jeannie Simpson  
**After some discussion, Joe Cathey made a motion to accept the resignation of Board Member Jeannie Simpson. Max Bly seconded the motion, and motion carried 4-0.**

- VIII. Consider and take action, if needed, to appoint Mary Collier to the Board of Directors to fill a vacancy created by the resignation of Jeannie Simpson, for the remainder of Ms. Simpson's term ending in May 2022  
**Max Bly made a motion to appoint Mary Collier to the Board of Directors to fill a vacancy created by the resignation of Jeannie Simpson, for the remainder of Ms. Simpson's term ending in May 2022. Joe Cathey seconded the motion, and motion carried 4-0.**
  
- IX. Oath of Office  
**Oath of Office was administered to Mary Collier by Notary Public Mina Douglas.**
  
- X. Consider and take action, if needed, to appoint a new Wellness Center subcommittee member to fill a vacancy created by the resignation of Jeannie Simpson  
**After some discussion, Dr. Steven Vacek made a motion to appoint Mary Collier to the Wellness Center subcommittee member to fill a vacancy created by the resignation of Jeannie Simpson. Joe Cathey seconded the motion, and motion carried 5-0.**
  
- XI. Consider and if necessary take action to approve attorney sending a demand letter to Blue Cross-Blue Shield for unpaid hospital claims  
**After some discussion, Mary Collier made a motion to approve attorney sending a demand letter to Blue Cross-Blue Shield for unpaid hospital claims. Joe Cathey seconded the motion, and motion carried 5-0.**
  
- XII. Public Comments  
**None.**
  
- XIII. Adjourn  
**Motion was made by Dr. Steven Vacek and seconded by Max Bly to adjourn meeting at 7:44 pm. Motion carried 5-0.**

**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

\_\_\_\_\_  
 Margaret Drake

\_\_\_\_\_  
 Dr. Steven Vacek

\_\_\_\_\_  
 Max Bly

\_\_\_\_\_  
 Joe Cathey

\_\_\_\_\_  
 Mary Collier



October 25, 2021

Margaret Drake ([mdrake8955@gmail.com](mailto:mdrake8955@gmail.com))  
Board of Trustee  
Glen Rose Medical Center  
████████████████████  
Glen Rose, TX 76043

***Re: Proposal Letter for CEO Evaluation Services for Glen Rose Medical Center***

Ms. Drake:

Per your recent conversation(s) with Laurie Breedlove, it is my understanding that the Glen Rose Medical Center ("GRMC") Board seeks assistance in developing a CEO Evaluation program. With that in mind, the purpose of this letter is to outline the process for Community Hospital Consulting, Inc. ("CHC Consulting"), the management and consulting arm of Community Hospital Corporation ("CHC"), to provide such CEO Evaluation Services to GRMC.

**Scope of Services**

CHC Consulting Human Resources and Hospital Operations executives can work with the Board in utilizing the CHC Board Evaluation tool of the CEO or the American Hospital Association CEO evaluation tool to ask each Board member to evaluate the CEO based on functional and leadership competencies. CHC Consulting can also provide the results of those evaluations in a format that allows for an understanding of Board perceptions in each area, as well as offer opportunities for anonymous comments. Based on the scoring of this tool, CHC Consulting can also offer recommended merit pay increases as well as suggestions for the CEO to enhance Board perceptions.

CHC Consulting Human Resources and Hospital Operations executives can also work with the Board in utilizing the CHC Evaluation tool of the CEO modified for physicians and direct reports of the CEO based on functional and leadership competencies. CHC Consulting can also provide the results of these evaluations in a format that allows for an understanding of physician and direct report perceptions in each area, as well as offer opportunities for anonymous comments. Based on the scoring of this tool, CHC Consulting can also offer suggestions for the CEO to enhance physician and direct report perceptions.

Finally, CHC Consulting Human Resources executives can provide market data for the CEO role based on the revenue size of the organization for both base pay and total cash pay, including a compensation range (minimum, mid-point and maximum) based on the compensation philosophy of the organization. CHC Consulting can also provide a proposed executive compensation philosophy as needed.

{00021143.2}Community Hospital Consulting | 7800 N. Dallas Parkway, Suite 200 | Plano, Texas 75024 |  
972-943-6400  
[www.communityhospitalcorp.com](http://www.communityhospitalcorp.com)

**Community Hospital Consulting Engagement Team**

Leading this team will be Laurie Breedlove, SVP of Human Resources. Supporting Laurie in this engagement will be the management team of CHC Consulting. This includes, but is not limited to: Joe Thomason, SVP of Hospital Operations.

**Additional Community Hospital Consulting Resources**

Should additional CHC Consulting management resources be utilized as a part of this engagement, they will be utilized as needed by the CHC Consulting team to complete the proposed project scope of work. The use of additional resources for services under this proposal letter will be supported through the professional fees schedule noted below and will be applicable to this engagement only.

**PROFESSIONAL ARRANGEMENTS**

**Professional Fees and Expenses.** The professional fees for this Proposal are detailed in Schedule A.

**Billing Procedures.** CHC Consulting will bill for its services in two equal installments related to the services outlined above and as further defined in the Standard Terms and Conditions. One-half of the fee is due upon acceptance of this proposal, and the balance is billable upon completion of the services as outlined above.

Direct out-of-pocket expenses as noted in Schedule A will be billed as incurred with payment due within ten (10) business days.

**Additional Services.** Any additional services requested by GRMC not noted in this proposal may be provided at an additional cost, to be mutually agreed upon in writing by both GRMC and CHC Consulting at the time of the request.


Thank you for the opportunity to provide this proposal to you. I would be happy to answer any questions you might have about the proposal or to fine-tune our approach to achieve the results you desire.

*(The remainder of this page is intentionally left blank.)*

If you agree with the terms outlined in this proposal, please indicate your acceptance by signing in the space provided below and returning one signed original Proposal Letter to:

David Domingue, SVP of Business Development  
Community Hospital Consulting  
7800 N. Dallas Parkway, Suite 200  
Plano, TX 75024

Sincerely,



David Domingue  
Senior Vice President

ACCEPTANCE OF TERMS:  
GRMC

By: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

cc: Laurie Breedlove, SVP Human Resources  
Joe Thomason, SVP Hospital Operations

Enclosures: Schedule A – Fees and Expenses  
Community Hospital Consulting, Inc. Standard Terms and Conditions  
Business Associate Agreement

**SCHEDULE A**

**FEE AND EXPENSES**

**PROFESSIONAL FEES**

ITEM <sup>(1)</sup>	PROFESSIONAL FEE
CEO Evaluation Services	\$3,000

*(1) In general, the services provided are noted in the above Proposal Letter. If further engagement is desired additional cost(s) would be incurred and proposed under a separate proposal letter(s).*

**EXPENSES**

In addition to fees noted above, CHC Consulting will invoice GRMC in a timely fashion, for out-of-pocket expenses incurred by CHC Consulting in performing the services under this proposal including, but not limited to, airfare, hotel, rental car, meals, taxi, mileage to and from airport and parking, production of reports, postage and/or overnight courier expenses, long distance and facsimile transmissions charges, and data acquisition costs.



**Community Hospital Consulting, Inc.**  
**Standard Terms and Conditions**

1. **Services.** It is understood and agreed that the services of Community Hospital Consulting, Inc. ("CHC Consulting") may include advice and recommendations; but all decisions in connection with the implementation of such advice and recommendations shall be the responsibility of, and made by Glen Rose Medical Center ("Client"). In the event of a claim by a third party relating to the services under the proposal letter, including any exhibits or attachments thereto and to which these Standard Terms and Conditions are attached (collectively, the "Proposal Letter").
2. **Payment of Invoices.** CHC Consulting will invoice Client its fees related to the scope of work and services provided under the Proposal Letter. One half of the fee is due upon receipt of the signed proposal. The final invoice will be billed upon delivery of the final report as outlined in the Proposal Letter. All such invoices for service fees are due upon receipt and payable within fifteen (15) days thereafter. Out-of-pocket expenses as defined in the Proposal Letter will be separately invoiced, are due upon receipt and payable within ten (10) days thereafter. Invoices upon which payment is not received within thirty (30) days of the invoice date shall accrue a late charge of the lesser of (i) one and one half percent (1½%) per month or (ii) the highest rate allowable by law, in each case compounded monthly to the extent allowed by law. Without limiting its rights and remedies, CHC Consulting shall have the right to halt or terminate entirely its services until payment is received on past due invoices.
3. **Term.** Unless terminated sooner in accordance with its terms, the term of the Proposal Letter shall commence upon the date of last signature thereon and terminate with the completion of the scope of work and services as set forth in the Proposal Letter.
4. **Ownership.**
  - a) CHC Consulting Technology. CHC Consulting has created, acquired or otherwise has rights in, and may, in connection with the performance of services in the Proposal Letter, employ, provide, modify, create, acquire or otherwise obtain rights in various concepts, ideas, methods, methodologies, procedures, processes, know-how, and techniques; models (including, without limitation, function, process, system and data models); templates; and logic, coherence and methods of operation of systems (collectively, the "CHC Consulting Technology").
  - b) Ownership of Deliverables. Except as provided below, upon full and final payment to CHC Consulting of amounts due under the Proposal Letter, (i) the tangible items specified as deliverables or work product in the Proposal Letter (the "Deliverables") will become the property of Client and (ii) to the extent that any CHC Consulting Technology is contained in any of the Deliverables, CHC Consulting hereby grants Client, a royalty-free paid up, world-wide, non-exclusive license to use such CHC Consulting Technology in connection with the Deliverables.

c) Ownership of CHC Consulting Property. To the extent that CHC Consulting utilizes any of its property (including, without limitation, the CHC Consulting Technology) in connection with the performance of services in the Proposal Letter, such property shall remain the property of CHC Consulting and, except for the license expressly granted in the preceding paragraph, Client shall acquire no right or interest in such property. Nothing in the Proposal Letter shall be construed as precluding or limiting in any way the right of CHC Consulting to provide consulting or other services of any kind or nature whatsoever to any person or entity as CHC Consulting, in its sole discretion, deems appropriate. In addition, and notwithstanding anything in the Proposal Letter to the contrary, the parties acknowledge and agree that (i) CHC Consulting will own all right, title, and interest, including, without limitation, all rights under all copyright, patent and other intellectual property laws, in and to the CHC Consulting Technology; and (ii) CHC Consulting may employ, modify, disclose, and otherwise exploit the CHC Consulting Technology.

5. **Non-Solicitation.** During the term of the Proposal Letter and for a period of one (1) year after the latter of its expiration or termination, neither party, nor any of its employees, will solicit or hire away any of the other party's employees or contractors who were involved with any aspect of the Proposal Letter without the prior written consent of the employing or contracting party.

6. **Limitation on Warranties. THIS IS A SERVICES ENGAGEMENT. CHC CONSULTING WARRANTS THAT IT WILL PERFORM SERVICES HEREUNDER IN GOOD FAITH. CHC CONSULTING DISCLAIMS ALL OTHER WARRANTIES, EITHER EXPRESS OR IMPLIED, INCLUDING, WITHOUT LIMITATION, WARRANTIES OF MERCHANTABILITY AND FITNESS FOR A PARTICULAR PURPOSE.**

7. **Limitation on Damages.** Client agrees that CHC Consulting, its partners, principals, agents, representatives, officers and employees (collectively, the "CHC Representatives") shall not be liable to Client for any actions, damages, claims, liabilities, costs, expenses, or losses in any way arising out of or relating to the services performed in the Proposal Letter for an aggregate amount in excess of the professional fees paid by Client to CHC Consulting under the Proposal Letter. In no event shall CHC Consulting and the CHC Representatives be liable for consequential, special, indirect, incidental, punitive or exemplary damages, costs, expenses, or losses (including, without limitation, lost profits and opportunity costs). In furtherance and not in limitation of the foregoing, CHC Consulting will not be liable in respect of any decision made by Client as a result of the performance by CHC Consulting of its services hereunder. The provisions of this paragraph shall apply regardless of the form of action, damage, claim, liability, cost, expense, or loss, whether in contract, statute, tort (including, without limitation, negligence), or otherwise.

8. **Cooperation.** Client shall cooperate with CHC Consulting in the performance by CHC Consulting of its services in the Proposal Letter, including, without limitation,

providing CHC Consulting with reasonable facilities and timely access to data, information and personnel of Client. Client shall be responsible for the performance of its employees, representatives and agents for the accuracy and completeness of all data and information provided to CHC Consulting for purposes of the performance by CHC Consulting of its services.

9. **Not a Healthcare Provider.** Client acknowledges that CHC Consulting is not a healthcare provider, is not licensed or certified as a healthcare provider, and does not provide, directly or indirectly, patient care. Client agrees that all responsibility and liability for the provision of patient care lies solely with Client.
10. **Force Majeure.** Neither Client nor CHC Consulting shall be liable for any delays resulting from circumstances or causes beyond its reasonable control, including, without limitation, fire or other casualty, act of God, pathogens or outbreaks, epidemics or pandemics, strike or labor dispute, war or other violence, or any law, order or requirement of any governmental agency or authority; provided, however, the inability to meet financial obligations is expressly excluded.
11. **Limitation on Actions.** No action, regardless of form, arising under or relating to the Proposal Letter may be brought by either party more than one (1) year after the cause of action has accrued, except that an action for nonpayment may be brought by a party not later than one (1) year after the date such payment became past due.
12. **Independent Contractor.** It is understood and agreed that each of the parties hereto is an independent contractor and that neither party is, nor shall be considered to be, an agent, distributor or representative of the other. Neither party shall act or represent itself, directly or by implication, as an agent of the other or in any manner assume or create any obligation on behalf of, or in the name of, the other.
13. **Confidentiality.** Client and CHC Consulting acknowledge and agree that all information communicated to a party by the other party in connection with the performance by a party under the Proposal Letter shall be received in confidence, shall be used only for the purposes set forth in the Proposal Letter, and no such confidential information shall be disclosed by the respective party or its agents, representatives or personnel without the prior consent of the other party. This provision does not apply to information that (i) is or becomes generally available to the public through no fault of the receiving party; (ii) was already known to the receiving party prior to the disclosure by the disclosing party; (iii) is subsequently disclosed to the receiving party without restriction on disclosure by a third party who has a lawful right to make such disclosure; (iv) is independently developed by the receiving party without the use of benefit of any confidential information of the other party; or (v) is required by law to be disclosed as part of a judicial process, governmental investigation, legal proceeding or other similar process, including a request for confidential information of Client under the Texas Public Information Act, chapter 552, Texas Government Code (the "Public Information Act"). If either party receives a subpoena or other validly issued administrative or judicial demand requiring it to disclose the other party's confidential

information or either party receives a request for confidential information under the Public Information Act, such party shall provide prompt written notice to the other party of such demand to permit such party to seek a protective order. Client acknowledges that CHC Consulting is not subject to the Public Information Act.

14. **HIPAA Business Associate Requirement.** To comply with the applicable federal and state laws and regulations governing the confidentiality of all patient health information, the parties agree to the terms and conditions of the Business Associate Addendum, attached hereto and incorporated herein by reference.
15. **Survival.** It is understood and agreed that the parties' respective obligations under the Proposal Letter which by their nature continue beyond the termination or expiration of the Proposal Letter shall so survive, including, without limitation, paragraphs 1, 2, 4, 5, 6, 7, 9, 10, 11, 12, 13, 14, 15 and 17 of these Standard Terms and Conditions.
16. **Assignment.** Except as provided below, neither party may assign, transfer or delegate any of the rights or obligations hereunder without the prior written consent of the other party. CHC Consulting may assign its rights and obligations hereunder to any affiliate that is a successor in interest to all or substantially all of the assets or business of CHC Consulting without the consent of Client.
17. **Governing Law.** The Proposal Letter shall be governed by and construed in accordance with the laws of the State of Texas without regard to its conflict of laws principles.
18. **Counterparts.** This Proposal Letter may be executed in one or more counterparts, each of which shall be deemed an original and all of which taken together shall constitute one and the same instrument. The parties agree that a facsimile or electronic transmission of an executed counterpart of the Proposal Letter shall have the same binding effect on the signatory as an executed and delivered original thereof.
19. **Entire Agreement.** These Standard Terms and Conditions, and the Proposal Letter to which they are appended, including any exhibits or attachments, constitute the entire agreement between CHC Consulting and Client with respect to the subject matter hereof and supersede all other oral and written representation, understandings or agreements relating to the matter hereof.

**BUSINESS ASSOCIATE  
ADDENDUM  
TERMS AND OBLIGATIONS  
(See definitions below.)**

This Business Associate Addendum is attached to, incorporated in, and made a part of the Proposal Letter between Client (as defined in the Proposal Letter) and Community Hospital Consulting, Inc., (“CHC Consulting”) and is made effective as of the effective date of the Proposal Letter.

1. Protected Health Information. The privacy and security regulations of the Health Insurance Portability and Accountability Act of 1996 (“HIPAA”) contemplate that health providers and others called “covered entities” may be required to enter into certain “business associate agreements” with persons or entities that assist in treatment, payment, or health care operations and who have access to “protected health information.” The provisions of this Business Associate Addendum Schedule (“BAA Schedule”) are intended to meet the requirements of HIPAA for the treatment of protected health information that may be disclosed by Client or its affiliated organizations to CHC Consulting, as well as the Health Information Technology for Economic and Clinical Health (“HITECH”). CHC Consulting will adhere to the terms of this Schedule “C” with respect to each health care provider which is affiliated with Client and is a Covered Entity.
  - A. Definitions. Terms used, but not otherwise defined, in this Proposal Letter shall have the same meaning as given those terms in 45 CFR 160.103

and 164.501, and/or HITECH. For purposes of clarification, the following terms shall have the definitions set forth below:

1.1 ““Privacy Rule” shall mean the Standards for Privacy of Individually Identifiable Health Information at 45 CFR part 160 and part 164, subparts A and E.

1.2 “Security Rule” shall be defined herein as the standards of security requirements of the HIPAA Regulations at 45 CFR §§302 through 164.31.

**B. Obligations and Activities of CHC Consulting.**

1. CHC Consulting agrees not to use or disclose or permit the use or disclosure of Protected Health Information other than as permitted or required by the Proposal Letter or as required by law or in a manner that would violate the requirements of the Privacy Rules or the Security Rules.
2. CHC Consulting agrees that it will abide by any limitations set forth in the Privacy Notice of Client, as it may be amended from time to time, of which it has knowledge. An amended Notice shall not affect permitted Uses and Disclosures on which CHC Consulting has relied prior to receipt of such Notice.
3. CHC Consulting will (i) implement Administrative, Physical and Technical Safeguards that reasonably and appropriately protect the confidentiality, integrity and availability of the Electronic Protected Health Information that it creates, receives, maintains, or transmits on behalf of Client; and

- (ii) ensure that any agent, including a subcontractor, to whom it provides Electronic Protected Health Information agrees to implement reasonable and appropriate safeguards to protect such information. Further, CHC Consulting shall comply with the standards and implementation specifications set forth in 45 C.F.R. §§ 164.308, 164.310, 164.312 and 164.316 with respect to such Administrative, Physical and Technical Safeguards.
4. CHC Consulting agrees to mitigate, to the extent practicable, any harmful effect that is known to CHC Consulting of a use or disclosure of Protected Health Information by CHC Consulting in violation of the requirements of this Proposal Letter.
  5. CHC Consulting agrees to report to Client any use or disclosure of the Protected Health Information not provided for by this Proposal Letter of which it becomes aware within five (5) business days of becoming aware of such unauthorized use or disclosure.
  6. CHC Consulting agrees to ensure that any agent, including a subcontractor, to whom it provides Protected Health Information received from, or created or received by CHC Consulting on behalf of Client, agrees in writing to the same restrictions and conditions that apply through this Proposal Letter to CHC Consulting with respect to such information.
  7. CHC Consulting agrees to provide access, at the request of Client, and in the time and manner designated by Client, to Protected Health Information in a Designated Record Set, to Client or, as directed by Client, to an Individual in order to meet the requirements under 45 CFR 164.524, as it may be amended from time to time.
  8. If CHC Consulting maintains a Designated Record Set on behalf of Client, CHC Consulting shall permit an Individual to inspect or copy PHI contained in that set about the Individual in accordance with the Privacy Rules set forth in 45 C.F.R. § 164.524, as it may be amended from time to time, unless excepted or a basis for denial exists under 45 C.F.R. § 164.524, as determined by Client. In the event CHC Consulting uses or maintains an Electronic Health Record on behalf of Client, then, as of the date required by HITECH, an Individual's right of access under 45 C.F.R. § 164.524 shall include the right to obtain a copy of the PHI in an electronic format and, if the Individual chooses in a clear, conspicuous and specific manner, to direct the CHC Consulting to transmit such copy to any person designated by the Individual. CHC Consulting shall respond to any request from Client for access by an Individual within five (5) days of such request unless otherwise agreed to by Client. The information shall be provided in the form or format requested, if it is readily producible in such form or format, or in summary, if the Individual has agreed in advance to accept the information in

summary form. A reasonable, cost based fee may be charged for copying PHI or providing a summary of PHI in accordance with 45 C.F.R. § 164.524(c)(4), provided that any such fee relating to a copy or summary of PHI provided in an electronic form may not be greater than the labor costs incurred in response to the request for the copy or summary.

9. CHC Consulting agrees to make any amendment(s) to Protected Health Information in a Designated Record Set that the Client direct or agree to pursuant to 45 CFR 164.526, as the same may be amended from time to time, at the request of Client or an Individual, and in the time and manner designated by Client.
10. CHC Consulting shall accommodate an Individual's right to amend PHI or a record about the Individual in a Designated Record Set in accordance with the Privacy Rules set forth at 45 C.F.R. § 164.526, as it may be amended from time to time, unless excepted or a basis for denial exists under 45 C.F.R. § 164.526, as determined by the Client. Client shall determine whether a denial to an amendment request is appropriate or an exception applies. CHC Consulting shall notify Client within five (5) days of receipt of any request for amendment by an Individual and shall make any amendment requested by Client within ten (10) days of such request. CHC Consulting shall have a process in place for requests for

amendments and for appending such requests to the Designated Record Set.

11. CHC Consulting shall make available to Client and to the Secretary or her agents, its internal practices, books, and records relating to the Use and Disclosure of PHI received from, or created or received by, CHC Consulting on behalf of Client for the purpose of determining Client's compliance with the Privacy Rules and the Security Rules or any other health oversight agency, in a timely manner designated by Client or the Secretary. Except to the extent prohibited by law, CHC Consulting agrees to notify Client immediately upon receipt by CHC Consulting of any and all requests served upon CHC Consulting by or on behalf of any and all government authorities relating to PHI received from, or created or received by, CHC Consulting on behalf of Client.
12. CHC Consulting agrees to document such disclosures of Protected Health Information and information related to such disclosures as would be required for Client to respond to a request by an Individual for an accounting of disclosures of Protected Health Information in accordance with 45 CFR 164.528, as it may be amended from time to time.
13. CHC Consulting agrees to provide to Client or an Individual, in time and manner designated by Client, information collected in accordance with this Section of this Proposal Letter, to permit Client to respond to a request by

an Individual for an accounting of disclosures of Protected Health Information in accordance with 45 CFR 164.528, as it may be amended from time to time, unless an exception to such Accounting exists under 45 C.F.R. § 164.528. Such Accounting is limited to Disclosures that were made in the six (6) years prior to the request and shall not include any Disclosures that were made prior to the compliance date of the Privacy Rules. CHC Consulting shall provide such information necessary to provide an accounting within thirty (30) days of Client' request.

14. As of the date required by HITECH, if Client uses or maintains an Electronic Health Record with respect to PHI and if CHC Consulting makes Disclosures of PHI for Treatment, Payment or Health Care Operations purposes through such Electronic Health Record, CHC Consulting will provide an accounting of Disclosures that Client has determined were for Client's Treatment, Payment and/or Health Care Operations purposes to Individuals who request an accounting directly from CHC Consulting. Any accounting made pursuant to this shall be limited to Disclosures made in the three (3) years prior to the Individual's request for the accounting. The content of the accounting shall be in accordance with 45 C.F.R. § 164.528, as it may be amended from time to time.
15. Any accounting provided under

this Section must be provided without cost to the Individual or to Client if it is the first accounting requested by an Individual within any twelve (12) month period; however, a reasonable, cost based fee may be charged for subsequent accountings if CHC Consulting informs the Client and the Client informs the Individual in advance of the fee, and the Individual is afforded an opportunity to withdraw or modify the request.

16. If the use or disclosure of PHI in this Proposal Letter is based upon an Individual's specific consent or authorization for the use of his or her PHI, and (i) the Individual revokes such consent or authorization in writing, (ii) the effective date of such authorization has expired, or (iii) the consent or authorization is found to be defective in any manner that renders it invalid, CHC Consulting agrees, if it has notice of such revocation or invalidity, to cease the Use and Disclosure of any such Individual's PHI except to the extent it has relied on such Use or Disclosure, or where an exception under the Privacy Rules expressly applies.

- C. General Use and Disclosure Provisions. Except as otherwise limited in the Proposal Letter, CHC Consulting may use or disclose Protected Health Information to perform functions, activities, or services for, or on behalf of, Client as specified in the Proposal Letter, provided that such use or disclosure would not violate the Privacy Rules if done by Client or the minimum



necessary policies and procedures of the Client.

D. Specific Use and Disclosure Provisions

1. Except as otherwise limited in this Proposal Letter, CHC Consulting may use Protected Health Information for the proper management and administration of CHC Consulting or to carry out the legal responsibilities of CHC Consulting, provided in each case that such uses are permitted under federal and state law.
2. Except as otherwise limited in the Proposal Letter, CHC Consulting may disclose Protected Health Information for the proper management and administration of CHC Consulting and to perform the services under the Proposal Letter, provided that disclosures are required by law, or CHC Consulting obtains reasonable assurances from the person to whom the information is disclosed that it will remain confidential and used or further disclosed only as required by law or for the purpose for which it was disclosed to the person, and the person notifies CHC Consulting of any instances of which it is aware in which the confidentiality of the information has been breached.
3. Except as otherwise limited in the Proposal Letter, CHC Consulting may use Protected Health Information to provide Data Aggregation services to Client as permitted by 42 CFR 164.504(e)(2)(i)(B), as it may be amended from time to time.
4. CHC Consulting may use Protected Health Information to

report violations of law to appropriate Federal and State authorities consistent with § 164.502(j)(1), as it may be amended from time to time.

E. Obligations of Client

1. Client shall provide CHC Consulting with a copy of its Notice of Privacy, including amendments to the Notice and notify CHC Consulting of any limitations in its notice of privacy practices of Client in accordance with 45 CFR 164.520, to the extent that such limitation may affect CHC Consulting's use or disclosure of Protected Health Information.
2. Client shall notify CHC Consulting of any changes in, or revocation of, permission by Individual to use or disclose Protected Health Information, to the extent that such changes may affect CHC Consulting's use or disclosure of Protected Health Information.
3. Client shall notify CHC Consulting of any restriction to the use or disclosure of Protected Health Information that Client has agreed to in accordance with 45 CFR 164.522 to the extent that such restriction may affect CHC Consulting's use or disclosure of Protected Health Information.

F. Permissible Requests by Client.

Client shall not request CHC Consulting to use or disclose Protected Health Information in any manner that would not be permissible under the Privacy Rules or Security Rules if done by Client, except in connection with Data Aggregation or management and administrative activities of CHC Consulting

otherwise permitted under this Proposal Letter.

G. Security of Electronic Protected Health Information.

1. Security. CHC Consulting will establish and maintain appropriate administrative, physical and technical safeguards that reasonably and appropriately protect the confidentiality, integrity and availability of electronic protected health information. CHC Consulting will follow generally accepted system security principles and the requirements of the final HIPAA rule pertaining to the security of health information (“the Security Rule”, published at 45 CFR Parts 160 – 164). Further, as of the date required by HITECH, CHC Consulting shall comply with the standards and implementation specifications set forth in 45 C.F.R. §§164.308, 164.310, 164.312 and 164.316 with respect to such Administrative, Physical and Technical Safeguards.
2. Agents and Subcontractors. CHC Consulting will ensure that any agent, including a subcontractor, to whom it provides electronic protected health information agrees in writing to implement reasonable and appropriate safeguards to protect that information and to adhere to the same restrictions and conditions that apply to CHC Consulting under this Proposal Letter.
3. Security Incidents. CHC Consulting will report any security incident of which it becomes aware to the Client within five (5) business days. For purposes of this agreement, a

“security incident” means the attempted or successful unauthorized access, use, disclosure, modification, or destruction of information or interference with system operations. This does not include trivial incidents that occur on a daily basis, such as scans, “pings”, or unsuccessful attempts to penetrate computer networks or servers maintained by CHC Consulting.

4. Breach Notification. A report of each Breach of Unsecured PHI Discovered by CHC Consulting, to the extent CHC Consulting accesses, maintains, retains, modifies, records, stores, destroys or otherwise holds, Uses or Discloses Unsecured PHI, unless delayed for law enforcement purposes, shall be made to Client without delay and in no case later than ten (10) business days after discovery of the Breach, and shall include the identification of each Individual whose Unsecured PHI has been, or is reasonably believed by CHC Consulting to have been, accessed, acquired or Disclosed during such Breach.

- H. Effect of Termination. The parties acknowledge that it may not be feasible for CHC Consulting to return or destroy all Protected Health Information upon termination because of CHC Consulting’s responsibilities related to the services rendered at the Client. CHC Consulting shall extend the protections of this agreement to such Protected Health Information and limit further uses and disclosures of such Protected Health Information to those purposes that make the return or

destruction infeasible, for so long as CHC Consulting maintains such Protected Health Information. Except as permitted herein, CHC Consulting shall return or destroy all Protected Health Information received from Client, or created or received by CHC Consulting on behalf of Client. This provision shall apply to Protected Health Information that is in the possession of subcontractors or agents of CHC Consulting. CHC Consulting shall retain no copies of the Protected Health Information.

I. Miscellaneous

1. Regulatory References. A reference in this Proposal Letter to a section in the Privacy Rules, Security Rules or HITECH means the section as in effect or as amended.
2. Amendment. The parties agree that it is their intention (i) to comply with the privacy and security provisions contained in Title XIII of HITECH and (ii) to incorporate those provisions into this BAA Schedule to the extent required by HITECH. The parties further agree to amend this BAA Schedule to the extent necessary to comply with state and federal laws, including without limitation, the Health Insurance Portability and Accountability Act of 1996 ("HIPAA") and HITECH, and any regulations promulgated or other guidance issued pursuant to HIPAA and HITECH.
3. Survival. The respective rights and obligations of CHC Consulting under this BAA Schedule shall survive the termination of the Proposal

Letter.

4. Interpretation. Any ambiguity in this BAA Schedule shall be resolved in favor of a meaning that permits Client and CHC Consulting to comply with the privacy and security provisions under HIPAA and HITECH, and any regulation promulgated or other guidance issued pursuant to HIPAA and HITECH.

## SEP 2021 FINANCIAL ANALYSIS

### REVENUE

#### INPATIENT/OUTPATIENT:

We have finished out our fiscal year with our Inpatient Revenue having a YTD favorable variance of \$3,004,648. There were 24 admissions in September with a budget of 18 per month. As of October 28<sup>th</sup>, the census for the current month is at 15 admissions.

Hospital Outpatient Revenue had an unfavorable variance of \$8,785 and an unfavorable variance of \$3,626,556 year to date. Surgeries and scopes dropped from 79 procedures in August to 52 procedures in September. Year to date, Surgeries and Scopes are at 830 procedures, a decline from 1,050 procedures in FY 2020. Other procedures dropped from 96 procedures in August to 87 procedures in September. Of the 87 Other procedures, 84 of those were for COVID infusions. Emergency Room visits also declined from 655 visits in August to 551 in September.

#### SENIOR CARE:

Sr. Care is below budget by \$23,396 for the month of September. The number of visits year to date are 3,037 compared to 3,892 in FY 2020.

### NET REVENUE

In September we had an unfavorable variance of \$3,376,873. Of that, \$2,968,625 is Presumptive Charity adjustments made for the year. Presumptive Charity are accounts that meet criteria like patients that have filed for bankruptcy, are deceased, or have never made one payment towards their account. At the end of the year, we can write these accounts off as Presumptive Charity and we then use that number towards our Uncompensated Care. For example, the IGT that we sent up to the state, in October, in the amount of \$296,060 provided a return of \$925,477 which is a net of \$629,417. That was the first of two payments we will receive for DY10, the next one slated for December 2021.

### EXPENSES

#### SALARY, WAGE AND EMPLOYEE BENEFIT EXPENSE:

In September we had a favorable variance of \$37,655 in salary, wage, and benefit expense. Year to date a favorable variance of \$357,639.

#### SUPPLIES EXPENSE:

Supply Expense in September was \$197,365 with an unfavorable variance of \$39,839. Year to date, we have an unfavorable variance of \$280,639. The majority of the variance was in Pharmacy drugs and Lab Reagents. The variance in Plant Minor Equipment is due to the new lights being installed around the outside of the building. Drive by at night and you will see a major difference to the appearance of the hospital!

#### PROFESSIONAL SERVICES:

Professional Services had a favorable variance of \$1,700.

TOTAL OPERATING EXPENSES:

In September we had an unfavorable variance of \$22,312 for total operating expenses. Year to date, our operating expenses show an unfavorable variance of \$487,520. The variance is due to COVID related expenses and an increase to our depreciation expense from the purchase of capital items.

1115/UC REVENUE

There was \$0 revenue in September as the state pushed the IGT and payment of Uncompensated Care for DY10 to October and December 2021.

OTHER INCOME

In September, the balance of the deferred stimulus revenue recognized was \$510,928. This means that we have fully recognized our deferred stimulus revenue received in FY 2020. Also included in Other Income is a grant from THA (Texas Hospital Association) in the amount of \$8,600. This is the 4<sup>th</sup> ASPR (Assistant Secretary for Preparedness and Response) grant we have received from THA since the pandemic began. ASPR's Hospital Preparedness Program (HPP) enables the health care delivery system to save lives during emergencies and disaster events that exceed the day-to-day capacity and capability of existing health and emergency response systems (and yes, I had to google that).

NET INCOME/LOSS

In September we had total net loss of \$2,838,451 as explained by the adjustments for Presumptive Charity under the "Net Revenue" section. Our YTD Net Income is \$1,743,467. The Business Office collected \$1,288,873 in Patient A/R in September.

The balance in the reserves was \$3,214,026 and Days of Cash on Hand was 64 days on 9/30/21.

Please let me know if you have any questions regarding the information above.

B. Whitsitt

Becky Whitsitt

CFO

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GLEN ROSE MEDICAL CENTER - HOSPITAL PAGE 1  
BALANCE SHEET  
AS OF: 09/30/21

	Current Month	Prior Month
<b>ASSETS</b>		
<b>CURRENT ASSETS</b>		
<b>CASH AND INVESTMENTS</b>		
CASH	332,929.03	118,483.05
FINANCIAL RESERVE ACCT	2,881,097.17	4,030,658.41
<b>TOTAL CASH AND INVESTMENTS</b>	<b>3,214,026.20</b>	<b>4,149,141.46</b>
<b>ACCOUNTS RECEIVABLE</b>		
PATIENT ACCOUNTS RECEIVABLES	75,770,119.16	78,536,716.52
LESS DISCOUNTS AND ALLOWANCES	(72,703,875.12)	(72,077,815.68)
<b>NET PATIENT ACCOUNTS RECEIVABLE</b>	<b>3,066,244.04</b>	<b>6,458,900.84</b>
<b>OTHER CURRENT ASSETS</b>		
OTHER RECEIVABLES	434,368.30	425,623.62
INVENTORY	719,432.88	729,233.35
PREPAIDS	653,071.55	609,486.80
<b>TOTAL OTHER CURRENT ASSETS</b>	<b>1,806,872.73</b>	<b>1,764,343.77</b>
INTERCOMPANY RECEIVABLE	1,443,077.19	1,321,880.81
<b>TOTAL CURRENT ASSETS</b>	<b>9,530,220.16</b>	<b>13,694,266.88</b>
<b>PROPERTY PLANT AND EQUIPMENT</b>		
REAL PROPERTY	19,675,196.19	19,675,196.19
FIXED EQUIPMENT	2,773,326.83	2,773,326.83
MAJOR MOVABLE EQUIPMENT	7,885,248.16	7,885,248.16
LEASEHOLD IMPROVEMENTS	292,253.52	292,253.52
LESS ACCUMULATED DEPRECIATION	(17,183,272.99)	(17,063,623.99)
<b>TOTAL PROPERTY PLANT AND EQUIPMENT</b>	<b>13,442,751.71</b>	<b>13,562,400.71</b>
<b>TOTAL ASSETS</b>	<b>22,972,971.87</b>	<b>27,256,667.59</b>
<b>LIABILITIES</b>		
<b>CURRENT LIABILITIES</b>		
ACCOUNTS PAYABLE	3,007,518.36	3,671,203.22
ACCRUED AND OTHER LIABILITIES	2,869,301.02	3,640,330.06
<b>TOTAL CURRENT LIABILITIES</b>	<b>5,876,819.38</b>	<b>7,311,533.28</b>
LONG TERM DEBT	12,349,812.36	12,360,343.56
<b>TOTAL LIABILITIES</b>	<b>18,226,631.74</b>	<b>19,671,876.84</b>
<b>FUND BALANCE</b>		
NET INCOME (LOSS)	1,743,467.30	4,581,917.92
PRIOR YEAR FUND BALANCE	3,002,872.83	3,002,872.83
<b>TOTAL FUND BALANCE</b>	<b>4,746,340.13</b>	<b>7,584,790.75</b>
<b>TOTAL LIABILITIES AND FUND BALANCE</b>	<b>22,972,971.87</b>	<b>27,256,667.59</b>

GLEN ROSE MEDICAL CENTER - HOSPITAL  
 OPERATING/INCOME STATEMENT  
 FOR THE 12 MONTHS ENDING 09/30/21

10/27/21 11:15 PM

M O N T H			Y E A R T O D A T E			
ACTUAL	BUDGET	VARIANCE		ACTUAL	BUDGET	VARIANCE
REVENUES						
782,194.44	374,361.20	407,833.24	HOSPITAL INPATIENT	7,496,986.74	4,492,338.80	3,004,647.94
4,821,870.12	4,830,654.64	(8,784.52)	HOSPITAL OUTPATIENT	54,341,296.01	57,967,851.72	(3,626,555.71)
81,830.68	105,226.86	(23,396.18)	SENIOR ADULT PROGRAM	834,641.10	1,262,722.43	(428,081.33)
-----	-----	-----		-----	-----	-----
5,685,895.24	5,310,242.70	375,652.54	TOTAL REVENUE	62,672,923.85	63,722,912.95	(1,049,989.10)
DISCOUNTS AND ALLOWANCES						
1,647,128.57	1,688,190.94	41,062.37	MEDICARE/MEDICAID	18,277,666.71	20,258,291.28	1,980,624.57
667,705.82	461,411.60	(206,294.22)	BAD DEBTS	5,547,866.43	5,536,939.20	(10,927.23)
2,531,401.90	1,904,811.95	(626,589.95)	MANAGED CARE/OTHER	24,661,197.81	22,857,743.51	(1,803,454.30)
2,968,624.88	7,921.16	(2,960,703.72)	CHARITY CARE	3,189,720.93	95,054.25	(3,094,666.68)
-----	-----	-----		-----	-----	-----
7,814,861.17	4,062,335.65	(3,752,525.52)	TOTAL D & A	51,676,451.88	48,748,028.24	(2,928,423.64)
-----	-----	-----		-----	-----	-----
(2,128,965.93)	1,247,907.05	(3,376,872.98)	NET REVENUE	10,996,471.97	14,974,884.71	(3,978,412.74)
-----	-----	-----		-----	-----	-----
EXPENSES						
585,404.81	596,564.49	11,159.68	SALARIES AND WAGES	6,971,309.16	7,158,775.86	187,466.70
173,004.87	199,500.55	26,495.68	EMPLOYEE BENEFITS	2,223,840.38	2,394,012.43	170,172.05
197,365.28	157,526.10	(39,839.18)	SUPPLIES	2,170,950.22	1,890,311.00	(280,639.22)
255,665.94	257,362.06	1,696.12	PROFESSIONAL SERVICES	3,405,978.33	3,088,350.00	(317,628.33)
53,163.08	51,527.86	(1,635.22)	RENT/LEASE PAYMENTS	649,821.95	618,333.44	(31,488.51)
13,283.39	13,380.75	97.36	INSURANCE	161,426.84	160,569.00	(857.84)
21,028.12	25,356.61	4,328.49	UTILITIES	319,236.57	304,278.00	(14,958.57)
49,080.57	49,292.89	212.32	REPAIRS AND MAINTENANCE	493,181.59	591,514.35	98,332.76
119,649.00	100,000.00	(19,649.00)	DEPRECIATION/AMORTIZATION	1,258,947.00	1,200,000.00	(58,947.00)
115,550.28	97,900.47	(17,649.81)	OTHER OPERATING EXPENSES	1,446,936.72	1,174,810.48	(272,126.24)
6,833.67	15,166.25	8,332.58	INDIGENT CARE PROGRAM	189,675.24	181,995.00	(7,680.24)
23,332.69	27,471.26	4,138.57	SENIOR ADULT PROGRAM	288,822.66	329,657.10	40,834.44
-----	-----	-----		-----	-----	-----
1,613,361.70	1,591,049.29	(22,312.41)	TOTAL OPERATING EXPENSES	19,580,126.66	19,092,606.66	(487,520.00)
-----	-----	-----		-----	-----	-----
(3,742,327.63)	(343,142.24)	(3,399,185.39)	NET OPERATING INCOME	(8,583,654.69)	(4,117,721.95)	(4,465,932.74)
-----	-----	-----		-----	-----	-----
OTHER INCOME AND EXPENSE						
317,829.18	315,912.12	1,917.06	DISTRICT TAX REVENUE	3,813,464.20	3,790,946.76	22,517.44
22,013.19	17,449.88	4,563.31	LUMINANT REVENUE	232,431.48	209,399.00	23,032.48
.00	50,000.00	(50,000.00)	1115/UC REVENUE	157,151.45	600,000.00	(442,848.55)
12,807.24	12,883.00	(75.76)	MOB-RENTAL INCOME	165,950.15	154,596.00	11,354.15
551,227.40	189,392.17	361,835.23	OTHER INCOME	5,958,124.71	2,272,705.93	3,685,418.78
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903,877.01	585,637.17	318,239.84	TOTAL OTHER INCOME AND EXP	10,327,121.99	7,027,647.69	3,299,474.30
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(2,838,450.62)	242,494.93	(3,080,945.55)	NET INCOME/LOSS	1,743,467.30	2,909,925.74	(1,166,458.44)
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GLEN ROSE HEALTHCARE INC 501A  
 BALANCE SHEET  
 AS OF: 09/30/21

	Current Month	Prior Month
<b>ASSETS</b>		
<b>CURRENT ASSETS</b>		
<b>CASH AND INVESTMENTS</b>		
CASH	97,818.56	108,675.85
	-----	-----
TOTAL CASH AND INVESTMENTS	97,818.56	108,675.85
	-----	-----
<b>ACCOUNTS RECEIVABLE</b>		
PATIENT ACCOUNTS RECEIVABLES	756,922.12	636,441.14
LESS DISCOUNTS AND ALLOWANCES	(530,220.05)	(458,895.62)
	-----	-----
NET PATIENT ACCOUNTS RECEIVABLE	226,702.07	177,545.52
	-----	-----
<b>OTHER CURRENT ASSETS</b>		
INVENTORY	64,099.93	64,099.93
PREPAID EXPENSES	21,029.43	17,252.19
	-----	-----
TOTAL OTHER CURRENT ASSETS	85,129.36	81,352.12
TOTAL CURRENT ASSETS	409,649.99	367,573.49
	-----	-----
<b>PROPERTY PLANT AND EQUIPMENT</b>		
FIXED EQUIPMENT	16,281.02	16,281.02
MAJOR MOVABLE EQUIPMENT	112,617.68	112,617.68
LESS ACCUMULATED DEPRECIATION	(94,503.20)	(93,593.20)
	-----	-----
TOTAL PROPERTY PLANT AND EQUIPMENT	34,395.50	35,305.50
	-----	-----
TOTAL ASSETS	444,045.49	402,878.99
	=====	=====
<b>LIABILITIES</b>		
<b>CURRENT LIABILITIES</b>		
ACCOUNTS PAYABLE	142,443.67	195,063.46
ACCRUED AND OTHER LIABILITIES	43,721.12	53,132.07
	-----	-----
TOTAL CURRENT LIABILITIES	186,164.79	248,195.53
INTERCOMPANY LIABILITY	1,443,077.20	1,321,880.82
	-----	-----
TOTAL LIABILITIES	1,629,241.99	1,570,076.35
	-----	-----
<b>FUND BALANCE</b>		
NET INCOME (LOSS)	(1,392,534.89)	(1,374,535.75)
PRIOR YEAR FUND BALANCE	207,338.39	207,338.39
	-----	-----
TOTAL FUND BALANCE	(1,185,196.50)	(1,167,197.36)
	-----	-----
TOTAL LIABILITIES AND FUND BALANCE	444,045.49	402,878.99
	=====	=====



GLEN ROSE HEALTHCARE, INC. (501A)  
 OPERATING/INCOME STATEMENT  
 FOR THE 12 MONTHS ENDING 09/30/21

10/27/21 11:15 PM

----- M O N T H -----			----- Y E A R T O D A T E -----			
ACTUAL	BUDGET	VARIANCE	ACTUAL	BUDGET	VARIANCE	
REVENUES						
695,473.23	641,515.88	53,957.35	REVENUE - OUTPATIENT	6,395,409.56	7,698,192.98	(1,302,783.42)
-----	-----	-----	TOTAL REVENUE	6,395,409.56	7,698,192.98	(1,302,783.42)
DISCOUNTS AND ALLOWANCES						
227,834.21	141,747.06	(86,087.15)	MEDICARE/MEDICAID	2,146,831.33	1,700,968.02	(445,863.31)
(10,107.61)	112,753.45	122,861.06	BAD DEBTS	(252,644.30)	1,353,042.72	1,605,687.02
113,871.08	67,652.09	(46,218.99)	MANAGED CARE/OTHER	1,083,049.86	811,825.63	(271,224.23)
-----	-----	-----	TOTAL D & A	2,977,236.89	3,865,836.37	888,599.48
363,875.55	319,363.28	44,512.27	NET REVENUE	3,418,172.67	3,832,356.61	(414,183.94)
-----	-----	-----	EXPENSES			
195,207.16	254,194.96	58,987.80	SALARIES AND WAGES	2,854,244.12	3,050,340.29	196,096.17
72,924.31	85,367.48	12,443.17	EMPLOYEE BENEFITS	932,094.95	1,024,409.65	92,314.70
39,266.81	28,875.12	(10,391.69)	SUPPLIES	265,740.28	346,503.97	80,763.69
47,086.46	46,002.17	(1,084.29)	PROFESSIONAL SERVICES	560,008.86	552,030.00	(7,978.86)
12,269.00	12,208.77	(60.23)	RENT/LEASE PAYMENTS	147,165.31	146,505.02	(660.29)
5,186.13	5,136.76	(49.37)	INSURANCE	60,126.62	61,642.00	1,515.38
3,842.41	3,116.50	(725.91)	UTILITIES	42,605.36	37,399.98	(5,205.38)
870.00	16.52	(853.48)	REPAIRS/MAINTENANCE	870.00	200.00	(670.00)
910.00	910.00	.00	DEPRECIATION/AMORTIZATION	10,920.00	10,920.00	.00
5,764.70	9,351.20	3,586.50	OTHER OPERATING EXPENSES	99,186.76	112,216.27	13,029.51
-----	-----	-----	TOTAL OPERATING EXPENSES	4,972,962.26	5,342,167.18	369,204.92
(19,451.43)	(125,816.20)	106,364.77	NET OPERATING INCOME	(1,554,789.59)	(1,509,810.57)	(44,979.02)
-----	-----	-----	OTHER INCOME AND EXPENSE			
186.00	166.63	19.37	MISCELLANEOUS INCOME	2,168.68	2,000.00	168.68
1,261.49	5,909.10	(4,647.61)	INCENTIVE PAYMENTS	141,043.99	70,909.09	70,134.90
.00	.00	.00	GRANTS	18,693.74	.00	18,693.74
.00	.00	.00	RECOVERY - BAD DEBT	305.69	.00	305.69
4.80	100.00	(95.20)	INTEREST INCOME	42.60	1,200.00	(1,157.40)
-----	-----	-----	TOTAL OTHER INCOME AND EXP	162,254.70	74,109.09	88,145.61
1,452.29	6,175.73	(4,723.44)	NET INCOME/LOSS	(1,392,534.89)	(1,435,701.48)	43,166.59
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SOMERVELL COUNTY HOSPITAL DISTRICT PAGE 1  
 BALANCE SHEET - CONSOLIDATED  
 AS OF: 09/30/21

	Current Month	Prior Month
<b>ASSETS</b>		
<b>CURRENT ASSETS</b>		
<b>CASH AND INVESTMENTS</b>		
CASH	430,747.59	227,158.90
FINANCIAL RESERVE ACCT	2,881,097.17	4,030,658.41
	-----	-----
TOTAL CASH AND INVESTMENTS	3,311,844.76	4,257,817.31
	-----	-----
<b>ACCOUNTS RECEIVABLE</b>		
PATIENT ACCOUNTS RECEIVABLES	76,527,041.28	79,173,157.66
LESS DISCOUNTS AND ALLOWANCES	(73,234,095.17)	(72,536,711.30)
	-----	-----
NET PATIENT ACCOUNTS RECEIVABLE	3,292,946.11	6,636,446.36
	-----	-----
<b>OTHER CURRENT ASSETS</b>		
OTHER RECEIVABLES	434,368.30	425,623.62
INVENTORY	783,532.81	793,333.28
PREPAIDS	674,100.98	626,738.99
	-----	-----
TOTAL OTHER CURRENT ASSETS	1,892,002.09	1,845,695.89
INTERCOMPANY RECEIVABLE	1,443,077.19	1,321,880.81
TOTAL CURRENT ASSETS	9,939,870.15	14,061,840.37
	-----	-----
<b>PROPERTY PLANT AND EQUIPMENT</b>		
REAL PROPERTY	19,675,196.19	19,675,196.19
FIXED EQUIPMENT	2,789,607.85	2,789,607.85
MAJOR MOVABLE EQUIPMENT	7,997,865.84	7,997,865.84
LEASEHOLD IMPROVEMENTS	292,253.52	292,253.52
LESS ACCUMULATED DEPRECIATION	(17,277,776.19)	(17,157,217.19)
TOTAL PROPERTY PLANT AND EQUIPMENT	13,477,147.21	13,597,706.21
	-----	-----
TOTAL ASSETS	23,417,017.36	27,659,546.58
	=====	=====
<b>LIABILITIES</b>		
<b>CURRENT LIABILITIES</b>		
ACCOUNTS PAYABLE	3,149,962.03	3,866,266.68
ACCRUED AND OTHER LIABILITIES	2,913,022.14	3,693,462.13
	-----	-----
TOTAL CURRENT LIABILITIES	6,062,984.17	7,559,728.81
INTERCOMPANY LIABILITY	1,443,077.20	1,321,880.82
	-----	-----
LONG TERM DEBT	12,349,812.36	12,360,343.56
TOTAL LIABILITIES	19,855,873.73	21,241,953.19
	-----	-----
<b>FUND BALANCE</b>		
NET INCOME (LOSS)	350,932.41	3,207,382.17
PRIOR YEAR FUND BALANCE	3,210,211.22	3,210,211.22
	-----	-----
TOTAL FUND BALANCE	3,561,143.63	6,417,593.39
	-----	-----
TOTAL LIABILITIES AND FUND BALANCE	23,417,017.36	27,659,546.58
	=====	=====

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SOMERVELL COUNTY HOSPITAL DISTRICT  
 OPERATING/INCOME STMT - CONSOLIDATED 10/27/21 11:15 PM  
 FOR THE 12 MONTHS ENDING 09/30/21

----- M O N T H -----			----- Y E A R T O D A T E -----			
ACTUAL	BUDGET	VARIANCE	ACTUAL	BUDGET	VARIANCE	
REVENUES						
782,194.44	374,361.20	407,833.24	HOSPITAL INPATIENT	7,496,986.74	4,492,338.80	3,004,647.94
4,903,700.80	4,935,881.50	(32,180.70)	HOSPITAL OUTPATIENT	55,175,937.11	59,230,574.15	(4,054,637.04)
695,473.23	641,515.88	53,957.35	GLEN ROSE HEALTHCARE (501A)	6,395,409.56	7,698,192.98	(1,302,783.42)
-----	-----	-----	TOTAL REVENUE	69,068,333.41	71,421,105.93	(2,352,772.52)
6,381,368.47	5,951,758.58	429,609.89	DISCOUNTS AND ALLOWANCES			
1,874,962.78	1,829,938.00	(45,024.78)	MEDICARE/MEDICAID	20,424,498.04	21,959,259.30	1,534,761.26
657,598.21	574,165.05	(83,433.16)	BAD DEBTS	5,294,916.44	6,889,981.92	1,595,065.48
2,642,556.82	1,969,242.51	(673,314.31)	MANAGED CARE/OTHER	25,704,791.67	23,630,910.78	(2,073,880.89)
2,971,341.04	11,142.69	(2,960,198.35)	CHARITY CARE	3,229,176.93	133,712.61	(3,095,464.32)
-----	-----	-----	TOTAL D & A	54,653,383.08	52,613,864.61	(2,039,518.47)
8,146,458.85	4,384,488.25	(3,761,970.60)	NET REVENUE	14,414,950.33	18,807,241.32	(4,392,290.99)
(1,765,090.38)	1,567,270.33	(3,332,360.71)	EXPENSES			
780,611.97	850,759.45	70,147.48	SALARIES AND WAGES	9,825,553.28	10,209,116.15	383,562.87
245,929.18	284,868.03	38,938.85	EMPLOYEE BENEFITS	3,155,935.33	3,418,422.08	262,486.75
236,632.09	186,401.22	(50,230.87)	SUPPLIES	2,436,690.50	2,236,814.97	(199,875.53)
302,752.40	303,364.23	611.83	PROFESSIONAL SERVICES	3,965,987.19	3,640,380.00	(325,607.19)
65,432.08	63,736.63	(1,695.45)	RENT/LEASE PAYMENTS	796,987.26	764,838.46	(32,148.80)
18,469.52	18,517.51	47.99	INSURANCE	221,553.46	222,211.00	657.54
24,870.53	28,473.11	3,602.58	UTILITIES	361,841.93	341,677.98	(20,163.95)
49,950.57	49,309.41	(641.16)	REPAIRS AND MAINTENANCE	494,051.59	591,714.35	97,662.76
120,559.00	100,910.00	(19,649.00)	DEPRECIATION/AMORTIZATION	1,269,867.00	1,210,920.00	(58,947.00)
121,314.98	107,255.80	(14,059.18)	OTHER OPERATING EXPENSES	1,546,191.63	1,287,076.75	(259,114.88)
6,833.67	15,166.25	8,332.58	INDIGENT CARE PROGRAM	189,675.24	181,995.00	(7,680.24)
23,332.69	27,467.13	4,134.44	SENIOR ADULT PROGRAM	288,754.51	329,607.10	40,852.59
-----	-----	-----	TOTAL OPERATING EXPENSES	24,553,088.92	24,434,773.84	(118,315.08)
1,996,688.68	2,036,228.77	39,540.09	NET OPERATING INCOME	(10,138,138.59)	(5,627,532.52)	(4,510,606.07)
(3,761,779.06)	(468,958.44)	(3,292,820.62)	OTHER INCOME	10,489,071.00	7,101,756.78	3,387,314.22
905,329.30	591,812.90	313,516.40	NET INCOME/LOSS	350,932.41	1,474,224.26	(1,123,291.85)
-----	-----	-----	=====	=====	=====	=====
(2,856,449.76)	122,854.46	(2,979,304.22)				

**GLEN ROSE MEDICAL CENTER  
COLLECTIONS TREND**

FY 2021												
	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21						
<b>HOSPITAL</b>												
Net Revenue	1,141,994	1,039,231	972,116	1,321,668	1,077,819	(2,128,966)						
Collections	1,264,975	1,071,305	980,247	1,225,693	1,137,750	1,288,873						
%	111%	103%	101%	93%	106%	-61%						
							<b>YEAR END TOTALS</b>					
							10,996,472					
							13,767,979					
							125.20%					
							<b>YEARLY AVG</b>					
							916,373					
							1,147,332					
							125.20%					

GLEN ROSE MEDICAL CENTER  
 COST CENTER SCHEDULE 10/27/21 11:23 PM  
 FOR THE 12 MONTHS ENDING 09/30/21  
 DEPARTMENT 230 - CLEBURNE IMAGING CLINIC

----- M O N T H -----			----- Y E A R T O D A T E -----			
ACTUAL	BUDGET	VARIANCE		ACTUAL	BUDGET	VARIANCE
140,975.22	411,333.33	(270,358.11)	CLBRN IMAGING-OUTPATIENT REV	3,710,785.33	4,936,000.18	(1,225,214.85)
140,975.22	411,333.33	(270,358.11)	TOTAL OPERATING REVENUE	3,710,785.33	4,936,000.18	(1,225,214.85)
140,975.22	411,333.33	(270,358.11)	NET REVENUE	3,710,785.33	4,936,000.18	(1,225,214.85)
EXPENSES						
8,192.72	12,363.00	4,170.28	CLBRN IMAGING-STAFF-SALARY	127,353.06	148,356.00	21,002.94
1,517.62	1,373.63	(143.99)	CLBRN IMAGING-STAFF-PTO	15,501.19	16,484.00	982.81
1,523.96	632.74	(891.22)	CLBRN IMAGING-STAFF-HEALTH E	6,874.57	7,592.88	718.31
818.06	1,050.80	232.74	CLBRN IMAGING-STAFF-PR TAX	10,527.36	12,610.26	2,082.90
116.88	90.36	(26.52)	CLBRN IMAGING-STAFF-ER SHARE	1,850.01	1,083.88	(766.13)
.00	53.60	53.60	CLBRN IMAGING-NONCHARGEABLES	633.17	643.75	10.58
.00	180.25	180.25	CLBRN IMAGING-PATIENT CHARGE	73.08	2,163.00	2,089.92
.00	8.62	8.62	CLBRN IMAGING-DRUGS	132.54	103.00	(29.54)
.00	515.00	515.00	CLBRN IMAGING-CONTRAST MEDIA	2,442.57	6,180.00	3,737.43
.00	472.12	472.12	CLBRN IMAGING-GENERAL SUPPLI	4,556.15	5,665.00	1,108.85
.00	41.63	41.63	CLBRN IMAGING-TRAVEL EXPENSE	23.44	500.00	476.56
19,850.00	19,850.00	.00	CLBRN IMAGING-LEASE EXPENSE	238,200.00	238,200.00	.00
.00	41.63	41.63	CLBRN IMAGING-MINOR EQUIPMEN	.00	500.00	500.00
32,041.14	31,983.00	(58.14)	CLBRN IMAGING-PURCHASED SERV	404,924.38	383,796.00	(21,128.38)
629.94	146.25	(483.69)	CLBRN IMAGING-BANK & CC FEES	2,917.79	1,755.00	(1,162.79)
.00	16.63	16.63	CLBRN IMAGING-POSTAGE/FREIGH	60.00	200.00	140.00
64,690.32	68,819.26	4,128.94	TOTAL OPERATING EXPENSES	816,069.31	825,832.77	9,763.46
OTHER REVENUE AND EXPENSE						
76,284.90	342,514.07	(266,229.17)	TOTAL REVENUE OVER EXPENSE	2,894,716.02	4,110,167.41	(1,215,451.39)

**GLEN ROSE MEDICAL CENTER PATIENT STATISTICAL REPORT**

	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	2020/2021	PYTD 2019 - 2020
	2020	2020	2020	2021	2021	2021	2021	2021	2021	2021	2021	2021		
<b>ACUTE ADMISSIONS:</b>														
MEDICARE	6	10	11	10	10	11	5	3	10	11	11	8	106	133
MEDICARE ADV/HMO	7	6	7	11	11	7	6	10	7	7	10	7	96	46
MEDICAID	0	0	2	1	1	0	1	0	1	0	0	0	6	3
MEDICAID STAR	1	2	0	0	0	1	1	1	1	0	0	0	7	6
COMM. INS.	2	8	4	4	3	4	3	0	6	9	8	5	56	15
OTHER	1	1	6	1	2	0	1	2	0	2	2	4	22	10
<b>TOTAL</b>	<b>17</b>	<b>27</b>	<b>30</b>	<b>27</b>	<b>27</b>	<b>23</b>	<b>17</b>	<b>16</b>	<b>25</b>	<b>29</b>	<b>31</b>	<b>24</b>	<b>293</b>	<b>213</b>
<b>ACUTE PATIENT-DAYS:</b>														
MEDICARE	13	22	30	42	43	25	22	5	25	20	33	29	309	423
MEDICARE ADV/HMO	22	18	20	47	33	22	21	23	27	26	31	34	324	143
MEDICAID	0	0	4	2	1	0	2	0	3	0	0	0	12	5
MEDICAID STAR	4	5	0	0	0	2	3	2	3	0	0	0	19	17
COMM. INS.	10	14	11	11	8	10	6	0	17	22	39	31	179	37
OTHER	1	2	21	4	2	4	1	3	0	11	6	14	69	26
<b>TOTAL</b>	<b>50</b>	<b>61</b>	<b>86</b>	<b>106</b>	<b>87</b>	<b>63</b>	<b>55</b>	<b>33</b>	<b>75</b>	<b>79</b>	<b>109</b>	<b>108</b>	<b>912</b>	<b>651</b>
<b>OCCUPANCY %</b>	<b>10%</b>	<b>13%</b>	<b>17%</b>	<b>21%</b>	<b>19%</b>	<b>13%</b>	<b>11%</b>	<b>7%</b>	<b>16%</b>	<b>16%</b>	<b>22%</b>	<b>23%</b>	<b>16%</b>	<b>11%</b>
<b>ACUTE DISCHARGES:</b>														
MEDICARE	5	9	10	13	10	9	6	4	10	9	12	9	106	136
MEDICARE ADV/HMO	7	5	7	11	12	7	6	9	7	8	8	8	95	46
MEDICAID	0	0	2	1	1	0	1	0	1	0	0	0	6	3
MEDICAID STAR	1	2	0	0	0	1	1	1	1	0	0	0	7	6
COMM.INS.	2	6	6	4	3	4	3	0	6	7	8	7	56	15
OTHER	1	1	6	1	1	1	1	2	0	2	2	4	22	10
<b>TOTAL</b>	<b>16</b>	<b>23</b>	<b>31</b>	<b>30</b>	<b>27</b>	<b>22</b>	<b>18</b>	<b>16</b>	<b>25</b>	<b>26</b>	<b>30</b>	<b>28</b>	<b>292</b>	<b>216</b>
<b>CASE MIX INDEX:</b>														
MEDICARE	0.839	1.372	1.156	1.699	1.134	1.266	0.844	1.288	0.998	1.098	1.158	1.165	1.168	1.120
MEDICARE ADV/HMO	1.229	1.739	1.531	1.736	1.225	1.082	1.015	0.941	1.294	0.942	1.404	1.650	1.316	1.124
MEDICAID	0.845	1.530	1.618	0.665	0.753	1.225	1.341	0.879	0.799	-	-	-	1.073	0.832
ALL PAYOR	1.108	1.574	1.502	1.583	1.124	1.170	1.071	0.999	1.085	1.215	1.424	1.342	1.266	1.102
A.L.O.S.														
MEDICARE	2.60	2.44	3.00	3.23	4.30	2.78	3.67	1.25	2.50	2.22	2.75	3.22	2.83	3.13
MEDICARE ADV/HMO	3.14	3.60	2.86	4.27	2.75	3.14	3.50	2.56	3.86	3.25	3.88	4.25	3.42	3.00
MEDICAID	4.00	2.50	2.00	2.00	1.00	2.00	2.50	2.00	3.00	-	-	-	2.33	2.14
COMM.INS.	5.00	2.33	1.83	2.75	2.67	2.50	2.00	-	2.83	3.14	4.88	4.43	3.12	2.72
OTHER	1.00	2.00	3.50	4.00	2.00	4.00	1.00	1.50	-	5.50	3.00	3.50	2.82	2.50

	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	2020/2021	PYTD 2019 - 2020
	2020	2020	2020	2021	2021	2021	2021	2021	2021	2021	2021	2021	3.07	3.01
TOTAL	3.13	2.65	2.77	3.53	3.22	2.86	3.06	2.06	3.00	3.04	3.63	3.86	3.07	3.01
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	2020/2021	PYTD
	2020	2020	2020	2021	2021	2021	2021	2021	2021	2021	2021	2021		2019 - 2020
<b>HOSPICE:</b>														
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
<b>OBSERVATION</b>														
ADMISSIONS	15	5	7	4	9	7	7	7	3	10	4	6	84	121
ADMIT TO IP	0	1	0	0	1	0	0	0	0	1	1	0	4	4
DISCHARGES	15	4	7	4	8	8	5	9	3	9	3	5	80	130
PATIENT DAYS	20	5	13	4	10	12	6	12	4	11	4	6	107	168
<b>TOTAL PT DAYS (IP, OBS, SWB, HOSP)</b>	<b>70</b>	<b>66</b>	<b>99</b>	<b>110</b>	<b>97</b>	<b>75</b>	<b>61</b>	<b>45</b>	<b>79</b>	<b>90</b>	<b>113</b>	<b>114</b>	<b>1019</b>	<b>819</b>
<b>SURGERIES:</b>														
IP SURGERIES	1	0	0	6	2	3	2	1	0	1	4	1	21	14
SWB SURGERIES	0	0	0	0	0	0	0	0	0	0	0	0	0	0
OBS SURGERIES	1	2	0	0	0	0	0	1	0	1	0	0	5	6
OP SURGERIES	24	11	27	27	11	21	30	20	13	21	22	16	243	350
<b>TOTAL SURGERIES</b>	<b>26</b>	<b>13</b>	<b>27</b>	<b>33</b>	<b>13</b>	<b>24</b>	<b>32</b>	<b>22</b>	<b>13</b>	<b>23</b>	<b>26</b>	<b>20</b>	<b>272</b>	<b>370</b>
<b>SCOPES:</b>														
IP SCOPES	0	0	1	1	1	1	1	0	1	0	0	0	1	7
SWB SCOPES	0	0	0	0	0	0	0	0	0	0	0	0	0	0
OBS SCOPES	0	0	0	0	1	0	0	0	2	0	0	0	3	1
OP SCOPES	47	54	42	36	32	48	43	49	60	53	53	31	548	672
<b>TOTAL SCOPES</b>	<b>47</b>	<b>54</b>	<b>43</b>	<b>37</b>	<b>34</b>	<b>49</b>	<b>44</b>	<b>49</b>	<b>63</b>	<b>53</b>	<b>53</b>	<b>32</b>	<b>558</b>	<b>680</b>
<b>PROCEDURES OTHER</b>	<b>1</b>	<b>4</b>	<b>17</b>	<b>99</b>	<b>14</b>	<b>7</b>	<b>2</b>	<b>8</b>	<b>6</b>	<b>9</b>	<b>96</b>	<b>87</b>	<b>350</b>	<b>44</b>
<b>TOTAL PATIENTS</b>	<b>74</b>	<b>71</b>	<b>87</b>	<b>166</b>	<b>61</b>	<b>80</b>	<b>78</b>	<b>79</b>	<b>82</b>	<b>85</b>	<b>176</b>	<b>139</b>	<b>1178</b>	<b>1022</b>
<b>TOTAL SRGS/SCOPES</b>	<b>73</b>	<b>67</b>	<b>70</b>	<b>70</b>	<b>47</b>	<b>73</b>	<b>76</b>	<b>71</b>	<b>76</b>	<b>76</b>	<b>79</b>	<b>52</b>	<b>830</b>	<b>1050</b>
<b>EMERGENCY ROOM:</b>														
ER VISITS D/C, AMA, EXP	344	377	365	350	287	380	375	424	435	546	605	508	4996	4405
ER TRANSFERS	44	19	20	25	17	35	22	35	30	42	15	16	320	312
ER OBSERVATION-ADM	11	5	8	6	9	8	5	8	9	12	11	10	102	106
ER IP-ADMITTS	18	21	26	20	23	17	17	11	17	22	24	17	233	177
<b>TOTAL ER</b>	<b>417</b>	<b>422</b>	<b>419</b>	<b>401</b>	<b>336</b>	<b>440</b>	<b>419</b>	<b>478</b>	<b>491</b>	<b>622</b>	<b>655</b>	<b>551</b>	<b>5651</b>	<b>5000</b>
<b>SR CARE VISITS (Billed Visits)</b>	<b>271</b>	<b>196</b>	<b>222</b>	<b>223</b>	<b>229</b>	<b>260</b>	<b>327</b>	<b>256</b>	<b>267</b>	<b>273</b>	<b>217</b>	<b>296</b>	<b>3037</b>	<b>3892</b>
<b>PT/OT/ST</b>	<b>578</b>	<b>571</b>	<b>367</b>	<b>406</b>	<b>487</b>	<b>729</b>	<b>742</b>	<b>761</b>	<b>290</b>				<b>4931</b>	<b>1259</b>
Cryotherapy													<b>0</b>	<b>232</b>
<b>E/R ROOM LEVELS CASE MIX</b>	<b>3.779</b>	<b>3.658</b>	<b>3.809</b>	<b>3.708</b>	<b>3.827</b>	<b>3.652</b>	<b>3.568</b>	<b>3.567</b>	<b>3.670</b>	<b>3.682</b>	<b>3.657</b>	<b>3.605</b>	<b>3.682</b>	<b>3.732</b>
<b>Average Daily Census</b>	<b>1.61</b>	<b>2.03</b>	<b>2.77</b>	<b>3.42</b>	<b>3.11</b>	<b>2.03</b>	<b>1.83</b>	<b>1.06</b>	<b>2.42</b>	<b>2.63</b>	<b>3.52</b>	<b>3.60</b>	<b>2.50</b>	<b>1.78</b>



Public Relations/REM Report  
October 2021

Attended Lions Club, Chamber meetings.

Attended RECAP meeting, Granbury.

Recorded new commercials with Hank FM, we run a weekly Medical Minute highlighting different departments/services.

We are working with a company Coast to Coast productions, they are producing a musical "jingle" lyric for the hospital. We will own the jingle and can use it for various advertising.

Rosa Yelverton, Mina Douglas and Alison Yelverton and myself manned the first rest stop for Paluxy Pedal earlier this month.

Cathey Miller, Alison Yelverton, Mira and Annelise from the Pecan Clinic will provide a treats for the Trunk and Treat in Pecan Plantation this Saturday.

I will have a table at Safe Treat in Glen Rose this Saturday 4-6.

We were not able to provide flu shots to the community this year, LDL the sponsor for the shots was not able to contribute financially, donations have been down and expenses to other commitments have increased.

New website is up and running, we are still working out a few changes and corrections. This will be a work in progress for a bit. The healthcare site is near completion and will work with Julie before we go live to make changes and updates.

GRMC, sponsored many community events this month, the "arts" at the Wine and arts Festival, GRHS golf tournament, GRHS FFA, sports on KHITS radio.

REM

Will purchase the "THUMPER" for the ER.

Kickstart My Heart has been scheduled for February 26<sup>th</sup>. We will begin working to get sponsors.

Concert 2022 is in discussion, artist and dates TBA.

**Somervell Central Appraisal District**

**112 Allen Drive**

**Glen Rose, Texas 76043**

**Election of Board of Directors For 2022-2023**

# **OFFICIAL BALLOT**

**VOTES**

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**CANDIDATES**

**Nemo Britton**

**Brady Brown**

**Wade Busch**

**Jim Bob Hawthorne**

**Bill Moore**

**Kelly Snodgrass**

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Senior Care 10212021 - Trended Ops

	YE 9/30/2017	YE 9/30/2018	YE 9/30/2019	YE 9/30/2020	YE 9/30/2021	5 Years Total
Glen Rose Medical Center Senior Care Operations						
Gross Revenue	1,010,719.83	1,055,693.58	1,338,721.43	1,030,692.50	834,641.10	5,270,468.44
Deductions from Revenue	748,741.25 74.08%	804,649.65 76.22%	1,022,515.43 76.38%	754,569.98 73.21%	613,628.14 73.52%	3,944,104.44 74.83%
Net Revenue	261,978.58 25.92%	251,043.93 23.78%	316,206.00 23.62%	276,122.52 26.79%	221,012.96 26.48%	1,326,364.00 25.17%
Salaries and Wages	196,056.67	190,296.11	255,693.21	211,637.53	196,895.87	1,050,579.39
Employee Benefits	19,481.09	19,004.28	32,341.97	38,001.81	25,740.86	134,570.01
Supplies	919.33	2,254.29	6,728.13	779.88	982.20	11,663.83
Purchased Services	69,783.21	69,716.18	90,688.47	67,300.02	63,740.80	361,228.68
Repairs & Maintenance	13.78	0.00	190.42	0.00	0.00	204.20
Utilities	3,305.36	0.00	0.00	0.00	0.00	3,305.36
Rents and Leases	500.00	360.00	1,260.00	979.87	1,181.86	4,281.73
Other Opr Expense	25.00	28.72	576.45	166.18	259.43	1,055.78
Total Expenses	290,084.44	281,659.58	387,478.65	318,865.29	288,801.02	1,566,888.98
Operating Margin	(28,105.86) -10.73%	(30,615.65) -12.20%	(71,272.65) -22.54%	(42,742.77) -15.48%	(67,788.06) -30.67%	(240,524.98) -18.13%

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