



ECTOR COUNTY HOSPITAL DISTRICT  
BOARD OF DIRECTORS MEETING  
FEBRUARY 6, 2024 – 5:30 p.m.  
MEDICAL CENTER HOSPITAL BOARD ROOM (2<sup>ND</sup> FLOOR)  
500 W 4<sup>TH</sup> STREET, ODESSA, TEXAS

AGENDA (p.1-2)

- I. **CALL TO ORDER**..... Wallace Dunn, President
- II. **ROLL CALL AND ECHD BOARD MEMBER ATTENDANCE/ABSENCES** ..... Wallace Dunn
- III. **INVOCATION**..... Chaplain Doug Herget
- IV. **PLEDGE OF ALLEGIANCE** ..... Wallace Dunn
- V. **MISSION / VISION / VALUES OF MEDICAL CENTER HEALTH SYSTEM** Richard Herrera (p.3)
- VI. **AWARDS AND RECOGNITION**
  - A. **February 2024 Associates of the Month** ..... Russell Tippin
    - Nurse - Rhodora C. Velasco
    - Clinical – Rosio C. Bickerstaff
    - Non-Clinical - Abigail Garcia
  - B. **Net Promoter Score Recognition**..... Russell Tippin
    - 5 West Pediatrics
    - Dr. Santiago Giraldo
- VII. **CONFLICT OF INTEREST DISCLOSURE BY ANY BOARD MEMBER**
- VIII. **PUBLIC COMMENTS ON AGENDA ITEMS**
- IX. **CONSENT AGENDA** ..... Wallace Dunn (p.4-43)  
(These items are considered to be routine or have been previously discussed, and can be approved in one motion, unless a Director asks for separate consideration of an item.)
  - A. **Consider Approval of Regular Meeting Minutes, January 4, 2024**
  - B. **Consider Approval of Joint Conference Committee, January 30, 2024**
  - C. **Consider Approval of Federally Qualified Health Center Monthly Report, December 2023**
  - D. **Consider Approval of 2024 Charter for Compliance Committee**
  - E. **Consider Approval of the Compliance Program Resolution**

**X. COMMITTEE REPORTS**

- A. Finance Committee** .....Don Hallmark (p.44-100)
1. Quarterly Investment Report – Quarter 1, FY 2024
  2. Quarterly Investment Officer’s Certification
  3. Financial Report for Month Ended December 31, 2023
  4. Consent Agenda
    - a. Consider Approval of Addendum to SOFIE Agreement
    - b. Consider Approval of Vizient Amendment/Renewal to Statement of Work (CBD)
    - c. Consider Approval of Siemens Industry, Inc. Contract Extension
  5. Consider Approval of the Purchase of the Phillips Fetal Monitoring System

**XI. TTUHSC AT THE PERMIAN BASIN REPORT** .....Dr. Timothy Benton

**XII. 2024 QAPI PLAN AND PATIENT SAFETY SURVEY RESULTS** ..... Courtney Davis (p.101-109)

**XIII. PRESIDENT/CHIEF EXECUTIVE OFFICER’S REPORT AND ACTIONS**  
..... Russell Tippin (p.110-111)

- A. Dr. Hulsey - Update**
- B. Ad hoc Report(s)**

**XIV. EXECUTIVE SESSION**

*Meeting held in closed session involving any of the following: (1) Consultation with attorney regarding legal matters and legal issues pursuant to Section 551.071 of the Texas Government Code; (2) Deliberation regarding Real Property, pursuant to Section 551.072; and (3) Deliberation regarding negotiations for health care services, pursuant to Section 551.085 of the Texas Government Code.*

**XV. ITEMS FOR CONSIDERATION FROM EXECUTIVE SESSION**

- A. Consider Approval of MCH ProCare Provider Agreements**
- B. Consider Approval of MCH Lease Agreements**

**XVI. ADJOURNMENT** ..... Wallace Dunn

*If during the course of the meeting covered by this notice, the Board of Directors needs to meet in executive session, then such closed or executive meeting or session, pursuant to Chapter 551, Texas Government Code, will be held by the Board of Directors on the date, hour and place given in this notice or as soon after the commencement of the meeting covered by this notice as the Board of Directors may conveniently meet concerning any and all subjects and for any and all purposes permitted by Chapter 551 of said Government Code.*

## **MISSION**

***Medical Center Health System is a community-based teaching organization dedicated to providing high quality and affordable healthcare to improve the health and wellness of all residents of the Permian Basin.***

## **VISION**

***MCHS will be the premier source for health and wellness.***

## **VALUES**

***I-ntegrity***

***C-ustomer centered***

***A-ccountability***

***R-espect***

***E-xcellence***

**ECTOR COUNTY HOSPITAL DISTRICT  
BOARD OF DIRECTORS  
REGULAR BOARD MEETING  
JANUARY 4, 2024 – 5:30 p.m.**

**MINUTES OF THE MEETING**

**MEMBERS PRESENT:** Wallace Dunn, President  
Don Hallmark, Vice President  
Will Kappauf  
Richard Herrera  
David Dunn  
Kathy Rhodes

**MEMBERS ABSENT:** Bryn Dodd

**OTHERS PRESENT:** Russell Tippin, Chief Executive Officer  
Matt Collins, Chief Operating Officer  
Steve Ewing, Chief Financial Officer  
Steve Steen, Chief Legal Counsel  
Kim Leftwich, Chief Nursing Officer  
Dr. Meredith Hulseley, Chief Medical Officer  
Dr. Jeff Pinnow, Chief of Staff  
Dr. Nimat Alam, Vice Chief of Staff  
Grant Trollope, Assistant Chief Financial Officer  
Kerstin Connolly, Paralegal  
Lisa Russell, Executive Assistant to the CEO  
Various other interested members of the  
Medical Staff, employees, and citizens

**I. CALL TO ORDER**

Wallace Dunn, President, called the meeting to order at 5:30 p.m. in the Ector County Hospital District Board Room at Medical Center Hospital. Notice of the meeting was properly posted as required by the Open Meetings Act.

**II. ROLL CALL AND ECHD BOARD MEMBER ATTENDANCE/ABSENCES**

Wallace Dunn called roll, Bryn Dodd's absence was excused.

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**III. INVOCATION**

Chaplain Doug Herget offered the invocation.

**IV. PLEDGE OF ALLEGIANCE**

Wallace Dunn led the Pledge of Allegiance to the United States and Texas flags.



## **V. MISSION/VISION OF MEDICAL CENTER HEALTH SYSTEM**

Will Kappauf presented the Mission, Vision and Values of Medical Center Health System.

## **VI. AWARDS AND RECOGNITION**

### **A. January 2024 Associates of the Month**

Russell Tippin, President/Chief Executive Officer, introduced the January 2024 Associates of the Month as follows:

- Clinical – Kimberly Hellmann
- Non-Clinical – Sarah Corley
- Nurse – Ashley Stewart

### **B. Net Promoter Score Recognition**

Russell Tippin, President/Chief Executive Officer, introduced the Net Promoter Score High Performer(s).

- Dr. Jorge Alamo
- Dr. Merry Hart

### **C. 2023 Associates of the Year**

- Dr. H.E. Hestand Humanitarian Award: Sandra Reyes, Respiratory Therapist
- Florence Nightingale Award: Kim Leftwich, Chief Nursing Officer
- Chaplain Jimmy Wilson Service Excellence Award: Sonya Garcia, Care Coordinator
- Ted Crowe People's Choice Award: Ted Crowe, Nutrition Services Director

## **VII. CONFLICT OF INTEREST DISCLOSURE BY ANY BOARD MEMBER**

No conflicts were disclosed.

## **VIII. PUBLIC COMMENTS ON AGENDA ITEMS**

No comments from the public were received.

## **IX. CONSENT AGENDA**

- A. Consider Approval of Regular Meeting Minutes, December 5, 2023**
- B. Consider Approval of Federally Qualified Health Center Monthly Report, November 2023**
- C. Consider Approval of Investment Policy Annual Review**
- D. Consider Approval of Appointing Kathy Rhodes to the Community Giving Committee (replacement for Wallace Dunn)**

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Don Hallmark moved, and David Dunn seconded the motion to approve the items listed on the Consent Agenda as presented. The motion carried unanimously.

**X. COMMITTEE REPORTS**

**A. Finance Committee**

1. Financial Report for Month Ended November 30, 2023
2. Consider Approval of Intuitive Surgical, Inc. Lease Agreement.

Don Hallmark moved, and Will Kappauf seconded the motion to approve the Finance Committee report as presented. The motion carried.

**XI. TTUHSC AT THE PERMIAN BASIN REPORT**

No report was provided.

**XII. PRESIDENT/CHIEF EXECUTIVE OFFICER'S REPORT AND ACTIONS**

**A. United Healthcare Update**

Russell Tippin, President/CEO, reported that a three (3) year agreement has been reached with United Healthcare.

This report was informational only. No action was taken.

**B. DNV Update**

The corrective action plan has been submitted to DNV.

This report was informational only. No action was taken.

**C. Dr. Hulseley - Update**

No report was provided.

**D. Ad hoc Reports**

Russell Tippin, Chief Executive Officer reported that the Odessa City Council Meeting is at 6:00 p.m. on Tuesday, January 9<sup>th</sup>, 2024. On the agenda will be use of ARPA funds of \$1 Million to the Permian Basin Behavioral Health Center and funds, possibly in the amount of \$500,000, for the free diabetes clinic on 42<sup>nd</sup> Street.

The Lions Club – Downtown donated money for the Gazelle's bike club shade structure located at the Center for Health and Wellness at Hwy 191.

Grant Trollope, Assistant Chief Financial Officer, provided an update on the reimbursement of funds from the State.

These reports were informational only. No action was taken.

### **XIII. EXECUTIVE SESSION**

Wallace Dunn stated that the Board would go into Executive Session for the meeting held in closed session involving any of the following: (1) Consultation with attorney regarding legal matters and legal issues pursuant to Section 551.071 of the Texas Government Code; and (2) Deliberation regarding negotiations for health care services, pursuant to Section 551.085 of the Texas Government Code.

ATTENDEES for the entire Executive Session: ECHD Board members, Will Kappauf, Richard Herrera, David Dunn, Don Hallmark, Wallace Dunn, Kathy Rhodes, Russell Tippin, President/CEO, Steve Steen, Chief Legal Counsel, Gingie Sredanovich, Chief Compliance Officer, and Kerstin Connolly, Paralegal.

Adiel Alvarado, President of ProCare, presented the ProCare provider agreements to the ECHD Board of Directors during Executive Session. He was excused from the remainder of Executive Session.

Gingie Sredanovich, Chief Compliance Officer, presented the annual compliance report to the ECHD Board of Directors during Executive Session.

Steve Steen, Chief Legal Counsel, and Gingie Sredanovich, Chief Compliance Officer, reported to the board about a possible HIPAA complaint and provided an update on the Cardiology Compliance.

Russell Tippin, Chief Executive Officer, Wallace Dunn, ECHD Board President, and Don Hallmark, ECHD Board Vice President, led the board in discussion about their meeting with the CEO of Advanced Odessa Hospital.

Wallace Dunn, ECHD Board President, led the board in discussion about setting up a meeting either in June or July with all elected officials in Ector County to have a board training for everyone.

Steve Steen, Chief Legal Counsel, led the board in discussion about limiting discussions with ECHD Board members.

**Executive Session began at 5:51 p.m.**

**Executive Session ended at 7:13 p.m.**

No action was taken during Executive Session

### **XIV. ITEMS FOR CONSIDERATION FROM EXECUTIVE SESSION**

#### **A. Consider Approval of MCH ProCare Provider Agreement(s).**

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Wallace Dunn presented the following new agreements:

- Sung-Wook Jesse Bang, M.D. – This a three (3) year Hospitalist Contract.
- Taeyoung Kim, M.D.. – This is a three (3) year Hospitalist Contract.
- Hanah Lee Yee, N.P. – This is a three (3) year Pain Management Contract.
- Nancy Baquirin, N.P. – This is an hourly Urgent Care Contract.
- Vipul Mody, M.D. – This is a monthly Hospitalist Contract.

Wallace Dunn presented the following renewals:

- Ramcharitha Kandikatla, M.D. – This is a three (3) year renewal of a Hospitalist Contract
- Sung Hwang, M.D. – This is a three (3) year renewal of a Anesthesia Contract.
- Jeffrey Freyder, M.D. – This is a three (3) year renewal of an Orthopedics Contract.

Wallace Dunn presented the following amendments:

- Fernando Boccalandro, M.D. – This is an amendment to a Cardiology Contract.
- Abdul Alarhayem, M.D. – This is an amendment to a Vascular Surgery Contract.

Kathy Rhodes moved, and Will Kappauf seconded the motion to approve the MCH ProCare Provider Agreements as presented. The motion carried.

#### **XV. ADJOURNMENT**

There being no further business to come before the Board, Wallace Dunn adjourned the meeting at 7:14 p.m.

Respectfully submitted,



David Dunn, Secretary  
Ector County Hospital District Board of Directors



February 6, 2024

**ECTOR COUNTY HOSPITAL DISTRICT  
BOARD OF DIRECTORS**

**Item to be considered:**

Medical Staff and Allied Health Professionals Staff Applicants

**Statement of Pertinent Facts:**

Pursuant to Article 7 of the Medical Staff Bylaws, the application process for the following Medical Staff and Allied Health Professional applicants is complete. The Joint Conference Committee and the Medical Executive Committee recommend approval of privileges or scope of practice and membership to the Medical Staff or Allied Health Professionals Staff for the following applicants, effective upon Board Approval.

**Medical Staff:**

Applicant	Department	Specialty/Privileges	Group	Dates
*Aseem Bhandari, MD	Radiology	Diagnostic Radiology	ProCare	02/06/2024-02/05/2025
Kyungho Choi, MD	Emergency Department	Emergency Department	BEPO	02/06/2024-02/05/2025
Rickey Hamby, MD	Family Medicine	Family Medicine		02/06/2024-02/05/2025
Roy Jacob, MD	Radiology	Telemedicine	VRAD	02/06/2024-02/05/2026
Jahinover Mazo, MD	Radiology	Telemedicine	VRAD	02/06/2024-02/05/2026
*Vipul Mody, MD	Hospitalist	Hospitalist	ProCare	02/06/2024-02/05/2025
*John Molland, MD	OB/GYN	OB/GYN		02/06/2024-02/05/2025
Adeyinka Owoyele, MD	Radiology	Telemedicine	VRAD	02/06/2024-02/05/2026
Jennifer Punnoose, MD	Hospitalist	Hospitalist	ProCare	02/06/2024-02/05/2025
*Tejaswi Thippeswamy, MD	Hospitalist	Hospitalist	ProCare	02/06/2024-02/05/2025
*Heather Webb, MD	Radiology	Telemedicine	American Radiology	02/06/2024-02/05/2026

**Allied Health:**

Applicant	Department	AHP Category	Specialty/Privileges	Group	Sponsoring Physician(s)	Dates
Abidemi Adeniran,	Hospitalist	AHP	Nurse Practitioner	ProCare	Hospitalist	02/06/2024-02/05/2026
Nancy Baquirin, NP	Family Medicine	AHP	Nurse Practitioner	ProCare	Dr. Aberra	02/06/2024-02/05/2026
*Jaqueline Battjes, NP	Family Medicine	Nurse Practitioner	Family Medicine	ProCare	Dr. Jorge Alamo	02/06/2024-02/05/2026
*Michael Gonzales, NP	Emergency Medicine	AHP	Nurse Practitioner	BEPO	Dr. Slater	02/06/2024-02/05/2026



*Donna Hernandez, NP	Emergency Medicine	Nurse Practitioner	Emergency Medicine	BEPO	Dr. Jeff Pinnow	02/06/2024-02/05/2026
Melanie Jones, NP	Medicine	AHP	Nurse Practitioner		Dr. Varsha Gillila	02/06/2024-02/05/2026
Luis Rodriguez, NP	Hospitalist	AHP	Nurse Practitioner	ProCare	Hospitalist	02/06/2024-02/05/2026
Hanah Yee, NP	Medicine	AHP	Nurse Practitioner	ProCare	Dr. Othee	02/06/2024-02/05/2026

\*Please grant temporary Privileges

**Advice, Opinions, Recommendations and Motions:**

If the Hospital District Board of Directors concurs, the following motion is in order: Accept the recommendation of the Medical Executive Committee and the Joint Conference Committee and approve privileges and membership to the Medical Staff as well as scope of practice and Allied Health Professional Staff membership for the above listed applicants.

Jeffrey Pinnow, MD  
 Chief of Staff Executive  
 Committee Chair  
 /MM



February 6, 2024

**ECTOR COUNTY HOSPITAL DISTRICT  
BOARD OF DIRECTORS**

**Item to be considered:**

Reappointment of the Medical Staff and/or Allied Health Professional Staff

**Statement of Pertinent Facts:**

The Medical Executive Committee and the Joint Conference Committee recommends approval of the following reappointments of the Medical Staff and Allied Health Professional Staff as submitted. These reappointment recommendations are made pursuant to and in accordance with Article 5 of the Medical Staff Bylaws.

**Medical Staff:**

Applicant	Department	Status Criteria Met	Staff Category	Specialty/ Privileges	Group	Changes to Privileges	Dates
Kevan Akrami, MD	Medicine	Yes	Active	Infectious Disease	Eagle Telemedic	No	02/01/2024-01/31/2026
Deephak Swaminath, MD	Cardiology	Yes	Associate to Active	Electrophysiology/Cardiology	ProCare	No	02/01/2024-01/31/2026
Cynthia Baca, MD	Pediatrics	Yes	Associate to Active	Pediatrics	TTU	No	03/01/2024-02/28/2026
Mary Bridges, MD	OB/GYN	Yes	Active	OB/GYN		No	03/01/2024-02/28/2026
Jaya Chadalavada, MD	Hospitalist	Yes	Active	Hospitalist	ProCare	No	03/01/2024-02/28/2026
Charles Henry, MD	Radiology	Yes	Telemedicine	Radiology	VRAD	No	03/01/2024-02/28/2026
Mary Huff, MD	Radiology	Yes	Telemedicine	Radiology	VRAD	No	03/01/2024-02/28/2026
Sonya Kella, MD	Radiology	Yes	Telemedicine	Radiology	VRAD	No	03/01/2024-02/28/2026
Faraz Khan, MD	Radiology	Yes	Telemedicine	Radiology	VRAD	No	03/01/2024-02/28/2026
Kavitha Kumbum, MD	Medicine	Yes	Associate to Active	Gastroenterology	Curative	No	03/01/2024-02/28/2026
Armugam Mekala, MD	Medicine	Yes	Associate	Internal Medicine	ProCare	No	03/01/2024-02/28/2025
John Parker, MD	Medicine	Yes	Associate to Active	Interoperative	Real Time Neuromon	No	03/01/2024-02/28/2026
Cynthia Tortorelli, MD	Radiology	Yes	Telemedicine	Radiology	VRAD	No	03/01/2023-02/28/2026
Hao Wu, MD	Surgery	Yes	Active	Vascular Surgery		No	03/01/2024-02/28/2026



**Allied Health Professionals:**

Applicant	Department	AHP Category	Specialty / Privileges	Group	Sponsoring Physician(s)	Changes to Privileges	Dates
Graciela Flores, NP	OB/GYN	AHP	Nurse Practitioner	TTUHSC	Dr. Bennion	None	03/01/2024-02/28/2026
Michael Hester, NP	Surgery	AHP	Nurse Practitioner		Dr. Kirit Patel & Dr. Staton Awtrey	None	03/01/2024-02/28/2026
Heather Zamarron,	Emergency Medicine	AHP	Physician Assistant	BEPO	Dr. Rolando Diaz	None	03/01/2024-02/28/2026

**Advice. Opinions. Recommendations and Motions:**

If the Hospital District Board of Directors concurs, the following motion is in order Accept and approve the recommendations of the Medical Executive Committee and the Joint Conference Committee relating to the reappointment of the Medical Staff and/or Allied Health Professional Staff.

Jeffrey Pinnow, MD Chief of Staff Executive  
 Committee Chair  
 /MM





February 6, 2024

**ECTOR COUNTY HOSPITAL DISTRICT  
BOARD OF DIRECTORS**

**Item to be considered:**

Change in Clinical Privileges

**Statement of Pertinent Facts:**

The Medical Executive Committee and the Joint Conference Committee recommends the request below on change in clinical privileges. These clinical changes in privileges are recommendations made pursuant to and in accordance with Article 4 of the Medical Staff Bylaws.

**Additional Privileges:**

Staff Member	Department	Privilege
None		

**Advice, Opinions, Recommendations and Motions:**

If the Hospital District Board of Directors concurs, the following motion is in order: Accept and approve the recommendations of the Medical Executive Committee and the Joint Conference Committee relating to the change in clinical privileges of the Allied Health Professional Staff.

Jeffrey Pinnow, MD Chief of Staff Executive  
Committee Chair  
/MM



February 6, 2024

**ECTOR COUNTY HOSPITAL DISTRICT  
BOARD OF DIRECTORS**

**Item to be considered:**

Change in Medical Staff or AHP Staff Status– Resignations/Lapse of Privileges

**Statement of Pertinent Facts:**

The Medical Executive Committee and the Joint Conference Committee recommends approval of the following changes in staff status. These resignations/lapses of privileges are recommendations made pursuant to and in accordance with Article 4 of the Medical Staff Bylaws.

**Resignation/Lapse of Privileges:**

Staff Member	Staff Category	Department	Effective Date	Action
Abdul Alarhayem, MD	Active	Surgery	1/11/2024	Resignation
Robert Chappell, MD	Affiliate	Medicine	10/24/2023	Resignation requesting honorary Status
Parina Cho, MD	Telemedicine	Radiology	11/08/2023	Resignation
Yarines Gonzales-Mendoza, NP	AHP	Medicine	10/27/2023	Resignation
Landis Griffeth, MD	Telemedicine	Radiology	11/30/2023	Lapse in Privileges
Paul Guisler, MD	Telemedicine	Radiology	02/04/2023	Resignation
Irma Gutierrez, NP	AHP	Hospitalist	11/16/2023	Resignation
Bharat Kakarala, MD	Active	Radiology	08/01/2023	Resignation
Callie McKinney, NP	AHP	OB/GYN	02/02/2023	Resignation
Merissa Ramirez, NP	AHP	Family Medicine	11/30/2023	Resignation
Terry Unruh, MD	Active	Surgery	12/31/2023	Resignation

**Advice, Opinions, Recommendations and Motion:**

If the Hospital District Board of Directors concurs, the following motion is in order: Accept and approve the recommendations of the Medical Executive Committee and the Joint Conference Committee to approve the Resignation/Lapse of Privileges.

Jeffrey Pinnow, MD Chief of Staff  
Executive Committee Chair  
/MM



February 6, 2024

**ECTOR COUNTY HOSPITAL DISTRICT  
BOARD OF DIRECTORS**

**Item to be considered:**

Change in Medical Staff or AHP Staff Category

**Statement of Pertinent Facts:**

The Medical Executive Committee and the Joint Conference Committee recommend approval of the following changes in staff status category. The respective departments determined that the practitioners have complied with all Bylaws requirements and are eligible for the changes as noted below.

**Staff Category Change:**

Staff Member	Department	Category
Cynthia Baca, MD	Pediatrics	Associate to Active
Kavitha Kumbum, MD	Medicine	Associate to Active
John Parker, MD	Medicine	Associate to Active

**Changes to Credentialing Dates:**

Staff Member	Staff Category	Department	Dates
None			

**Changes of Supervising Physician(s):**

Staff Member	Group	Department
None		

**Leave of Absence:**

Staff Member	Staff Category	Department	Effective Date	Action
None				



February 6, 2024

**ECTOR COUNTY HOSPITAL DISTRICT  
BOARD OF DIRECTORS**

**Removal of I-FPPE**

Staff Member	Department	Removal/Extension
Kavitha Kumbum, MD	Medicine	Removal of I-FPPE
Sabino Lopez, CRNA	Anesthesia	Removal of I-FPPE

**Change in Privileges**

Staff Member	Department	Privilege
None		

**Proctoring Request(s)/Removal(s)**

Staff Member	Department	Privilege(s)
None		

**Advice, Opinions, Recommendations and Motion:**

If the Hospital District Board of Directors concurs, the following motion is in order: Accept and approve the recommendations of the Medical Executive Committee and the Joint Conference Committee to approve the staff category changes, changes to the credentialing dates, changes of supervising physicians, leave of absence, removal of I-FPPE, proctoring requests/removals, and change in privileges.

Jeffrey Pinnow, MD Chief of Staff Executive  
Committee Chair  
/MM



February 6, 2024

**ECTOR COUNTY HOSPITAL DISTRICT  
BOARD OF DIRECTORS  
Item to be considered:**

**Statement of Pertinent Facts:**

The Medical Executive Committee recommends approval of the following:

- Cardiology Department Chair Criteria

**Advice, Opinions, Recommendations and Motion:**

- Cardiology Department Chair Criteria

Advice, Opinions, Recommendations and Motion:

If the Joint Conference Committee concurs, the following motion is in order: Accept the recommendation of the Medical Executive Committee to approve the Cardiology Department Chair. Forward this recommendation to the Ector County Hospital District Board of Directors.

Jeffrey Pinnow, MD, Chief of Staff Executive Committee  
Chair  
/MM



February 6, 2024

**ECTOR COUNTY HOSPITAL DISTRICT  
BOARD OF DIRECTORS**

**Item to be considered:**

**Statement of Pertinent Facts:**

The Medical Executive Committee recommends approval of the following:

- UR Plan Update

**Advice, Opinions, Recommendations and Motion:**

- UR Plan Update

Advice, Opinions, Recommendations and Motion:

- If the Joint Conference Committee concurs, the following motion is in order: Accept the recommendation of the Medical Executive Committee to approve the UR Plan Update. Forward this recommendation to the Ector County Hospital District Board of Directors.

Jeffrey Pinnow, MD, Chief of Staff Executive Committee  
Chair  
/MM

## Utilization Review Plan

### I. Definitions:

**Utilization Review Plan** – the hospital-wide plan that contains the essential requirements for the establishment and implementation of a utilization management process to ensure the quality, appropriateness and efficiency of care and resources furnished by the hospital and medical staff.

**Physician Advisor or “PA”** – a physician working under contract with Medical Center Hospital or in a medical staff position with the authority delegated by the Utilization Review Committee for the review of cases for clinical appropriateness and medical necessity of admissions, continued stays and services provided by the hospital.

**Secondary Physician Review** – a clinical review performed by a physician on the Utilization Review Committee other than the ordering physician when Cortex or other Medical Center Hospital approved clinical screening criteria guidelines suggest a different Patient Status of Level of Care than that ordered.

**Cortex** – clinical decision support guidelines that use an evidence-based clinical decision support tool approved for use by the Medical Executive Committee, to assist in clinically appropriate medical utilization decisions regarding patient status and level of care determinations. This decision support tool serves as guideline to prompt feedback and discussion. The physician order determines Patient Status and Level of Care determinations.

### II. Purpose (42 CFR § 456.105)

The general aim of this plan is to codify the obligations of the utilization review (UR) committee, the hospital, its medical staff, and its associates to advance evidence-based, high-quality, cost effective, and safe care to our patients and our community.

The Utilization Review Plan is reviewed annually and revised as appropriate.

### III. Scope

Utilization management is realized through the use of processes and procedures that assess, analyze, and evaluate medical necessity and appropriateness of the services provided.

Recognized clinically applicable review criteria, trended patient population clinical care data, patterns of hospital resource utilization and clinical areas of the plan’s scope include, but are not limited to:





- Delineation of the responsibilities and authority of personnel for conducting internal utilization review, conducting delegated review under managed care contracts, and facilitating external review under managed care and other payer contracts
- Establishes the protocols for the review of medical necessity of admissions, extended stays, professional services, and appropriateness of setting
- Outlines processes to review outlier cases based on extended length of stay and/or extraordinarily high costs
- Defines processes to review potential over-utilization, under-utilization, and inefficient utilization of resources
- Defines processes for coverage determination(s) denials, appeals and peer review within the organization
- Identifies the framework for reporting corrective action and documentation requirements for the utilization management process
- Establishes processes to identify patients with discharge planning needs or requests for discharge planning with timely evaluation of post-acute care services and availability of services to allow appropriate arrangements to be completed
- Optimizing efficient resource utilization through integration and coordination within the multi-interdisciplinary health care teams while maintaining optimal patient outcomes
- Reporting the results of resource management opportunities and efficiencies, patient clinical outcome data collection and reporting to the Utilization Review Committee, Medical Executive Committee, Quality Monitoring Committee, and Quality Assurance Performance Improvement Committee.

#### **Objectives**

- Review hospital inpatient admissions, observation stays, direct admissions and post-operative ambulatory procedure patients with a request for inpatient admission or observation, regardless of payer source.
- Conduct initial and concurrent medical record reviews to determine the medical necessity of the hospital stay and ensure the appropriate level of care is provided.
- Conduct individualized discharge planning screens to ensure early and timely identification of post-acute services required.
- Initiate and monitor any revisions in policies and procedures based on the Utilization Review's Plan scope, objectives and recommendations of the Utilization Review Committee.
- Professional and therapeutic services reviews are carried out to ensure availability, timeliness of delivery and medical necessity.

#### **IV. Authority, Leadership and Accountability (42 CFR § 456.106 and 482.30(b))**



### **The Utilization Review Committee**

The Board of Directors of Medical Center Hospital recognizes its authority and responsibility for the delivery of effective and efficient medical care in keeping with professionally recognized standards and available resources. The Board has delegated the responsibility for monitoring the appropriate use of hospital resources to the Utilization Review Committee.

The UR committee has the authority to perform prospective, concurrent, or retrospective review of the medical record of any patient admitted to the hospital or treated on an outpatient basis; to review documents certifying medical necessity for acute care admission; to review resource utilization data to evaluate service line and/or physician performance; and to discuss findings with the physician or physicians concerned but does not have the authority to take disciplinary action.

Findings and recommendations of the UR committee are reported to the president of the medical staff, board of directors, and chief executive officer, who have the authority and responsibility for considering and acting on them.

- The Utilization Review Committee is a standing committee of the Medical Center Hospital Medical Staff (Medical Staff Bylaws, Article 3.R. Utilization Review Committee, 1 and 2) and must comprise three or more active physician (MD/DO) members of the medical staff, and other practitioners to perform the utilization management function as well as administrative and departmental representatives of the hospital.
- The Medical Director of Utilization and Outcomes Management will serve as chairperson of the committee (Medical Staff Bylaws, Article 3.R.(c))
- A copy of the Conflict-of-Interest Statement is to be completed by Utilization Review committee members. A conflict of interest (aside from ownership in the hospital) does not automatically disqualify a member from participating in any given review. Rather, the conflict is a factor for the UR Committee Chairperson to evaluate when weighing decisions about specific member recusals.
- No person on the committee (or on a committee performing functions delegated by the UR committee) may have a financial interest in the hospital
- No person may participate in the case review of any care in which he or she was professionally involved in providing care. (42 CFR § 456.106 (d)(2) and 42 CFR § 482.30 (b)(3))
- Conflict of Interest Statements are completed annually.

### **Utilization Review Committee Functions**

- Advance the practice of evidence-based care. Promote cost-effective utilization of hospital resources and services in accordance with the patient's acute medical needs and preferences
- Provide educational opportunities to engage the medical staff and hospital associates
- Identify and correct patterns of care and situational factors that may contribute to under-, over-, and/or inappropriate utilization of hospital resources and services

- Use objective data to assess physician practice trends and patterns regarding length of stay and resource utilization for the purpose of improving quality of care and service delivery
- Recommend and/or take corrective actions to improve resource utilization and the quality of care
- Performs focused reviews with accompanying action plan and reports results.
- Monitors the implementation of corrective action to achieve improvement
- Establishes procedures for external utilization management representatives who perform on site reviews.
- Reports at least semi-annually to the Medical Executive Committee, Quality Assurance Performance Improvement Committee, Quality Monitoring Committee and the Governing Board.
- Reports findings from the QIO to the Medical Staff.
- Delegates to case management staff, any UM subcommittee(s), a physician member of the Utilization Review Committee, and/or the Physician Advisor the authority to act on a day-to-day utilization management matters including, but not limited to, using screening criteria to evaluate the appropriateness of stay and level of care, making determinations regarding the medical necessity / appropriateness of an admission/continued stay, and issuing notices of non-coverage or causing the admission category to be revised in accordance with CMS guidelines.

#### **Committee Membership**

- At least two physicians who broadly represent the composition of the medical staff.
- Three physicians of the committee will be appointed by the Utilization Review Director, Inpatient Operations Medical Director, in consultation with the Vice Chief of Staff and the Chief Medical Officer.
- Administrative and clinical members of the committee are appointed by the Chief Executive Officer, and service as ex officio, without vote. (Article 3.R.(b))
  - Additional members may include the following: Physician Advisor, medical department chairpersons, the Chief Operating Officer, and Chief Nursing Officer.
  - Representatives of the following departments: Quality Improvement, Patient Care Services/Nursing, Emergency Department, Health Information Management Services, Case Management Services, Compliance, Utilization Review, Denial Management, pharmacy, laboratory, diagnostic imaging, respiratory, behavioral health, revenue integrity.

#### **Utilization Review Committee Meeting**

- The committee will meet four times per year.
- Changes to the meeting schedule are made at the discretion of the chairperson.
- Additional meetings may be prompted as needed, at the call of its chair to manage the utilization management process.

Family Health Clinic  
February 2024  
ECHD Board Update

**ECTOR COUNTY HOSPITAL DISTRICT  
FAMILY HEALTH CENTERS COMBINED - OPERATIONS SUMMARY  
DECEMBER 2023**

	CURRENT MONTH					YEAR TO DATE				
	ACTUAL	BUDGET	BUDGET VAR	PRIOR YR	PRIOR YR VAR	ACTUAL	BUDGET	BUDGET VAR	PRIOR YR	PRIOR YR VAR
<b><u>PATIENT REVENUE</u></b>										
Outpatient Revenue	\$ 1,363,710	\$ 1,622,406	-15.9%	\$ 562,923	142.3%	\$ 4,432,264	\$ 4,770,912	-7.1%	\$ 1,694,726	161.5%
<b>TOTAL PATIENT REVENUE</b>	<b>\$ 1,363,710</b>	<b>\$ 1,622,406</b>	<b>-15.9%</b>	<b>\$ 562,923</b>	<b>142.3%</b>	<b>\$ 4,432,264</b>	<b>\$ 4,770,912</b>	<b>-7.1%</b>	<b>\$ 1,694,726</b>	<b>161.5%</b>
<b><u>DEDUCTIONS FROM REVENUE</u></b>										
Contractual Adjustments	\$ 580,688	\$ 798,143	-27.2%	\$ 311,858	86.2%	\$ 1,985,365	\$ 2,353,077	-15.6%	\$ 889,236	123.3%
Self Pay Adjustments	48,656	100,791	-51.7%	93,141	-47.8%	129,844	298,615	-56.5%	178,742	-27.4%
Bad Debts	43,191	51,814	-16.6%	(21,292)	-302.8%	108,263	145,709	-25.7%	20	553107.6%
<b>TOTAL REVENUE DEDUCTIONS</b>	<b>\$ 672,534</b>	<b>\$ 950,748</b>	<b>-29.3%</b>	<b>\$ 383,707</b>	<b>75.3%</b>	<b>\$ 2,223,472</b>	<b>\$ 2,797,401</b>	<b>-20.5%</b>	<b>\$ 1,067,997</b>	<b>108.2%</b>
	<b>49.32%</b>	<b>58.60%</b>		<b>68.16%</b>		<b>50.17%</b>	<b>58.63%</b>		<b>63.02%</b>	
<b>NET PATIENT REVENUE</b>	<b>\$ 691,176</b>	<b>\$ 671,658</b>	<b>2.9%</b>	<b>\$ 179,215</b>	<b>285.7%</b>	<b>\$ 2,208,791</b>	<b>\$ 1,973,511</b>	<b>11.9%</b>	<b>\$ 626,728</b>	<b>252.4%</b>
<b><u>OTHER REVENUE</u></b>										
FHC Other Revenue	\$ 33,454	\$ 18,570	80.2%	\$ 29,653	12.8%	\$ 119,670	\$ 55,710	114.8%	\$ 237,688	-49.7%
<b>TOTAL OTHER REVENUE</b>	<b>\$ 33,454</b>	<b>\$ 18,570</b>	<b>80.2%</b>	<b>\$ 29,653</b>	<b>12.8%</b>	<b>\$ 119,670</b>	<b>\$ 55,710</b>	<b>114.8%</b>	<b>\$ 237,688</b>	<b>-49.7%</b>
<b>NET OPERATING REVENUE</b>	<b>\$ 724,630</b>	<b>\$ 690,228</b>	<b>5.0%</b>	<b>\$ 208,868</b>	<b>246.9%</b>	<b>\$ 2,328,461</b>	<b>\$ 2,029,221</b>	<b>14.7%</b>	<b>\$ 864,416</b>	<b>169.4%</b>
<b><u>OPERATING EXPENSE</u></b>										
Salaries and Wages	\$ 190,532	\$ 231,121	-17.6%	\$ 101,636	87.5%	\$ 599,448	\$ 684,492	-12.4%	\$ 319,522	87.6%
Benefits	32,310	43,934	-26.5%	33,955	-4.8%	100,289	121,134	-17.2%	101,297	-1.0%
Physician Services	369,871	470,200	-21.3%	148,794	148.6%	1,163,706	1,401,272	-17.0%	426,555	172.8%
Cost of Drugs Sold	20,606	19,391	6.3%	6,358	224.1%	131,280	59,108	122.1%	57,334	129.0%
Supplies	27,056	56,033	-51.7%	26,327	2.8%	53,759	163,625	-67.1%	55,647	-3.4%
Utilities	6,262	4,726	32.5%	6,495	-3.6%	16,870	14,918	13.1%	17,480	-3.5%
Repairs and Maintenance	1,146	2,241	-48.9%	608	88.5%	2,451	6,723	-63.5%	3,362	-27.1%
Leases and Rentals	2,449	4,477	-45.3%	460	432.1%	6,245	13,431	-53.5%	1,408	343.6%
Other Expense	1,000	1,352	-26.0%	1,000	0.0%	3,000	6,332	-52.6%	3,000	0.0%
<b>TOTAL OPERATING EXPENSES</b>	<b>\$ 651,233</b>	<b>\$ 833,475</b>	<b>-21.9%</b>	<b>\$ 325,634</b>	<b>100.0%</b>	<b>\$ 2,077,050</b>	<b>\$ 2,471,035</b>	<b>-15.9%</b>	<b>\$ 985,606</b>	<b>110.7%</b>
Depreciation/Amortization	\$ 24,948	\$ 23,981	4.0%	\$ 23,338	6.9%	\$ 74,889	\$ 71,316	5.0%	\$ 70,147	6.8%
<b>TOTAL OPERATING COSTS</b>	<b>\$ 676,180</b>	<b>\$ 857,456</b>	<b>-21.1%</b>	<b>\$ 348,972</b>	<b>93.8%</b>	<b>\$ 2,151,938</b>	<b>\$ 2,542,351</b>	<b>-15.4%</b>	<b>\$ 1,055,753</b>	<b>103.8%</b>
<b>NET GAIN (LOSS) FROM OPERATIONS</b>	<b>\$ 48,450</b>	<b>\$ (167,228)</b>	<b>-129.0%</b>	<b>\$ (140,104)</b>	<b>-134.6%</b>	<b>\$ 176,523</b>	<b>\$ (513,130)</b>	<b>-134.4%</b>	<b>\$ (191,337)</b>	<b>-192.3%</b>
Operating Margin	6.69%	-24.23%	-127.6%	-67.08%	-110.0%	7.58%	-25.29%	-130.0%	-22.13%	-134.2%

	CURRENT MONTH					YEAR TO DATE				
	ACTUAL	BUDGET	BUDGET VAR	PRIOR YR	PRIOR YR VAR	ACTUAL	BUDGET	BUDGET VAR	PRIOR YR	PRIOR YR VAR
Total Visits	3,203	3,884	-17.5%	1,868	71.5%	10,720	11,508	-6.8%	5,498	95.0%
Average Revenue per Office Visit	425.76	417.72	1.9%	301.35	41.3%	413.46	414.57	-0.3%	308.24	34.1%
Hospital FTE's (Salaries and Wages)	44.1	53.2	-17.1%	23.6	87.0%	46.8	53.1	-11.9%	25.9	80.7%

**ECTOR COUNTY HOSPITAL DISTRICT  
FAMILY HEALTH CLINIC - SOUTH - OPERATIONS SUMMARY  
DECEMBER 2023**

	CURRENT MONTH					YEAR TO DATE				
	ACTUAL	BUDGET	BUDGET VAR	PRIOR YR	PRIOR YR VAR	ACTUAL	BUDGET	BUDGET VAR	PRIOR YR	PRIOR YR VAR
<b>PATIENT REVENUE</b>										
Outpatient Revenue	\$ 100,984	\$ 183,534	-45.0%	\$ 199,204	-49.3%	\$ 437,637	\$ 559,488	-21.8%	\$ 564,457	-22.5%
<b>TOTAL PATIENT REVENUE</b>	<b>\$ 100,984</b>	<b>\$ 183,534</b>	<b>-45.0%</b>	<b>\$ 199,204</b>	<b>-49.3%</b>	<b>\$ 437,637</b>	<b>\$ 559,488</b>	<b>-21.8%</b>	<b>\$ 564,457</b>	<b>-22.5%</b>
<b>DEDUCTIONS FROM REVENUE</b>										
Contractual Adjustments	\$ 47,759	\$ 99,466	-52.0%	\$ 106,015	-55.0%	\$ 213,833	\$ 303,213	-29.5%	\$ 286,394	-25.3%
Self Pay Adjustments	11,904	23,129	-48.5%	31,476	-62.2%	45,870	70,400	-34.8%	84,421	-45.7%
Bad Debts	3,267	(13,172)	-124.8%	(1,412)	-331.4%	16,798	(40,154)	-141.8%	2,814	497.0%
<b>TOTAL REVENUE DEDUCTIONS</b>	<b>\$ 62,929</b>	<b>\$ 109,423</b>	<b>-42.5%</b>	<b>\$ 136,079</b>	<b>-53.8%</b>	<b>\$ 276,501</b>	<b>\$ 333,459</b>	<b>-17.1%</b>	<b>\$ 373,628</b>	<b>-26.0%</b>
	<b>62.3%</b>	<b>59.6%</b>		<b>68.3%</b>		<b>63.2%</b>	<b>59.6%</b>		<b>66.2%</b>	
<b>NET PATIENT REVENUE</b>	<b>\$ 38,054</b>	<b>\$ 74,111</b>	<b>-48.7%</b>	<b>\$ 63,125</b>	<b>-39.7%</b>	<b>\$ 161,136</b>	<b>\$ 226,029</b>	<b>-28.7%</b>	<b>\$ 190,829</b>	<b>-15.6%</b>
<b>OTHER REVENUE</b>										
FHC Other Revenue	\$ 33,454	\$ 18,570	0.0%	\$ 29,653	12.8%	\$ 119,670	\$ 55,710	0.0%	\$ 237,688	-49.7%
<b>TOTAL OTHER REVENUE</b>	<b>\$ 33,454</b>	<b>\$ 18,570</b>	<b>80.2%</b>	<b>\$ 29,653</b>	<b>12.8%</b>	<b>\$ 119,670</b>	<b>\$ 55,710</b>	<b>114.8%</b>	<b>\$ 237,688</b>	<b>-49.7%</b>
<b>NET OPERATING REVENUE</b>	<b>\$ 71,508</b>	<b>\$ 92,681</b>	<b>-22.8%</b>	<b>\$ 92,778</b>	<b>-22.9%</b>	<b>\$ 280,805</b>	<b>\$ 281,739</b>	<b>-0.3%</b>	<b>\$ 428,517</b>	<b>-34.5%</b>
<b>OPERATING EXPENSE</b>										
Salaries and Wages	\$ 63,393	\$ 59,535	6.5%	\$ 77,640	-18.4%	\$ 190,190	\$ 181,489	4.8%	\$ 227,043	-16.2%
Benefits	10,750	11,317	-5.0%	25,939	-58.6%	31,701	32,118	-1.3%	71,978	-56.0%
Physician Services	51,936	65,850	-21.1%	109,636	-52.6%	169,758	197,550	-14.1%	277,044	-38.7%
Cost of Drugs Sold	-	3,439	-100.0%	2,312	-100.0%	9,362	10,483	-10.7%	13,229	-29.2%
Supplies	1,880	6,914	-72.8%	2,547	-26.2%	9,506	21,028	-54.8%	9,728	-2.3%
Utilities	2,937	2,119	38.6%	3,124	-6.0%	7,744	7,870	-1.6%	8,546	-9.4%
Repairs and Maintenance	527	2,028	-74.0%	608	-13.3%	1,321	6,084	-78.3%	1,662	-20.5%
Leases and Rentals	488	537	-9.2%	460	6.0%	1,641	1,611	1.9%	1,408	16.6%
Other Expense	1,000	1,227	-18.5%	1,000	0.0%	3,000	5,957	-49.6%	3,000	0.0%
<b>TOTAL OPERATING EXPENSES</b>	<b>\$ 132,912</b>	<b>\$ 152,966</b>	<b>-13.1%</b>	<b>\$ 223,267</b>	<b>-40.5%</b>	<b>\$ 424,224</b>	<b>\$ 464,190</b>	<b>-8.6%</b>	<b>\$ 613,638</b>	<b>-30.9%</b>
Depreciation/Amortization	\$ 4,048	\$ 2,744	47.5%	\$ 2,484	62.9%	\$ 12,191	\$ 8,182	49.0%	\$ 7,586	60.7%
<b>TOTAL OPERATING COSTS</b>	<b>\$ 136,960</b>	<b>\$ 155,710</b>	<b>-12.0%</b>	<b>\$ 225,751</b>	<b>-39.3%</b>	<b>\$ 436,415</b>	<b>\$ 472,372</b>	<b>-7.6%</b>	<b>\$ 621,224</b>	<b>-29.7%</b>
<b>NET GAIN (LOSS) FROM OPERATIONS</b>	<b>\$ (65,452)</b>	<b>\$ (63,029)</b>	<b>-3.8%</b>	<b>\$ (132,974)</b>	<b>50.8%</b>	<b>\$ (155,610)</b>	<b>\$ (190,633)</b>	<b>18.4%</b>	<b>\$ (192,707)</b>	<b>-19.3%</b>
Operating Margin	-91.53%	-68.01%	34.6%	-143.33%	-36.1%	-55.42%	-67.66%	-18.1%	-44.97%	23.2%

	CURRENT MONTH					YEAR TO DATE				
Medical Visits	359	661	-45.7%	721	-50.2%	1,574	2,015	-21.9%	2,029	-22.4%
Average Revenue per Office Visit	281.29	277.66	1.3%	276.29	1.8%	278.04	277.66	0.1%	278.19	-0.1%
Hospital FTE's (Salaries and Wages)	11.5	12.1	-5.0%	10.1	13.5%	11.9	12.4	-4.4%	11.8	0.6%

**ECTOR COUNTY HOSPITAL DISTRICT  
FAMILY HEALTH CLINIC - WEST UNIVERSITY - OPERATIONS SUMMARY  
DECEMBER 2023**

	CURRENT MONTH					YEAR TO DATE				
	ACTUAL	BUDGET	BUDGET VAR	PRIOR YR	PRIOR YR VAR	ACTUAL	BUDGET	BUDGET VAR	PRIOR YR	PRIOR YR VAR
<b><u>PATIENT REVENUE</u></b>										
Outpatient Revenue	\$ 183,039	\$ 190,685	-4.0%	\$ 183,053	0.0%	\$ 563,825	\$ 581,092	-3.0%	\$ 582,313	-3.2%
<b>TOTAL PATIENT REVENUE</b>	<b>\$ 183,039</b>	<b>\$ 190,685</b>	<b>-4.0%</b>	<b>\$ 183,053</b>	<b>0.0%</b>	<b>\$ 563,825</b>	<b>\$ 581,092</b>	<b>-3.0%</b>	<b>\$ 582,313</b>	<b>-3.2%</b>
<b><u>DEDUCTIONS FROM REVENUE</u></b>										
Contractual Adjustments	\$ 77,690	\$ 105,548	-26.4%	\$ 105,652	-26.5%	\$ 272,427	\$ 321,646	-15.3%	\$ 318,788	-14.5%
Self Pay Adjustments	24,942	17,496	42.6%	23,135	7.8%	52,694	53,318	-1.2%	56,458	-6.7%
Bad Debts	13,368	1,374	872.9%	872	1433.6%	24,421	4,187	483.3%	9,401	159.8%
<b>TOTAL REVENUE DEDUCTIONS</b>	<b>\$ 116,000</b>	<b>\$ 124,418</b>	<b>-6.8%</b>	<b>\$ 129,658</b>	<b>-10.5%</b>	<b>\$ 349,542</b>	<b>\$ 379,151</b>	<b>-7.8%</b>	<b>\$ 384,646</b>	<b>-9.1%</b>
	<b>63.37%</b>	<b>65.25%</b>		<b>70.83%</b>		<b>61.99%</b>	<b>65.25%</b>		<b>66.05%</b>	
<b>NET PATIENT REVENUE</b>	<b>\$ 67,040</b>	<b>\$ 66,267</b>	<b>1.2%</b>	<b>\$ 53,395</b>	<b>25.6%</b>	<b>\$ 214,283</b>	<b>\$ 201,941</b>	<b>6.1%</b>	<b>\$ 197,667</b>	<b>8.4%</b>
<b><u>OTHER REVENUE</u></b>										
FHC Other Revenue	\$ -	\$ -	0.0%	\$ -	0.0%	\$ -	\$ -	0.0%	\$ -	0.0%
<b>TOTAL OTHER REVENUE</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.0%</b>	<b>\$ -</b>	<b>0.0%</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.0%</b>	<b>\$ -</b>	<b>0.0%</b>
<b>NET OPERATING REVENUE</b>	<b>\$ 67,040</b>	<b>\$ 66,267</b>	<b>1.2%</b>	<b>\$ 53,395</b>	<b>25.6%</b>	<b>\$ 214,283</b>	<b>\$ 201,941</b>	<b>6.1%</b>	<b>\$ 197,667</b>	<b>8.4%</b>
<b><u>OPERATING EXPENSE</u></b>										
Salaries and Wages	\$ 18,492	\$ 24,570	-24.7%	\$ 7,122	159.6%	\$ 62,029	\$ 74,874	-17.2%	\$ 33,557	84.8%
Benefits	3,136	4,671	-32.9%	2,379	31.8%	10,339	13,250	-22.0%	10,639	-2.8%
Physician Services	42,966	55,733	-22.9%	31,133	38.0%	134,283	167,199	-19.7%	109,116	23.1%
Cost of Drugs Sold	3,631	3,042	19.4%	3,593	1.1%	5,714	9,269	-38.4%	11,852	-51.8%
Supplies	2,942	2,964	-0.7%	9,393	-68.7%	5,381	9,013	-40.3%	18,190	-70.4%
Utilities	3,325	2,607	27.6%	3,371	-1.4%	9,126	7,048	29.5%	8,935	2.1%
Repairs and Maintenance	-	213	-100.0%	-	100.0%	-	639	-100.0%	1,700	-100.0%
Other Expense	-	125	-100.0%	-	0.0%	-	375	-100.0%	-	0.0%
<b>TOTAL OPERATING EXPENSES</b>	<b>\$ 74,533</b>	<b>\$ 93,925</b>	<b>-20.6%</b>	<b>\$ 56,992</b>	<b>30.8%</b>	<b>\$ 226,992</b>	<b>\$ 281,667</b>	<b>-19.4%</b>	<b>\$ 193,989</b>	<b>17.0%</b>
Depreciation/Amortization	\$ 20,824	\$ 21,071	-1.2%	\$ 20,779	0.2%	\$ 62,473	\$ 62,639	-0.3%	\$ 62,337	0.2%
<b>TOTAL OPERATING COSTS</b>	<b>\$ 95,358</b>	<b>\$ 114,996</b>	<b>-17.1%</b>	<b>\$ 77,771</b>	<b>22.6%</b>	<b>\$ 289,465</b>	<b>\$ 344,306</b>	<b>-15.9%</b>	<b>\$ 256,325</b>	<b>12.9%</b>
<b>NET GAIN (LOSS) FROM OPERATIONS</b>	<b>\$ (28,318)</b>	<b>\$ (48,729)</b>	<b>-41.9%</b>	<b>\$ (24,376)</b>	<b>16.2%</b>	<b>\$ (75,182)</b>	<b>\$ (142,365)</b>	<b>-47.2%</b>	<b>\$ (58,659)</b>	<b>28.2%</b>
Operating Margin	-42.24%	-73.53%	-42.6%	-45.65%	-7.5%	-35.09%	-70.50%	-50.2%	-29.68%	18.2%

	CURRENT MONTH					YEAR TO DATE				
	ACTUAL	BUDGET	BUDGET VAR	PRIOR YR	PRIOR YR VAR	ACTUAL	BUDGET	BUDGET VAR	PRIOR YR	PRIOR YR VAR
Total Visits	606	633	-4.3%	630	-3.8%	1,884	1,929	-2.3%		0.0%
Average Revenue per Office Visit	302.05	301.24	0.3%	290.56	4.0%	299.27	301.24	-0.7%	306.32	-2.3%
Hospital FTE's (Salaries and Wages)	6.7	6.5	2.2%	6.4	3.8%	7.0	6.7	4.7%	6.6	6.1%



**ECTOR COUNTY HOSPITAL DISTRICT  
FAMILY HEALTH CLINIC - JBS - OPERATIONS SUMMARY  
DECEMBER 2023**

	CURRENT MONTH					YEAR TO DATE				
	ACTUAL	BUDGET	BUDGET VAR	PRIOR YR	PRIOR YR VAR	ACTUAL	BUDGET	BUDGET VAR	PRIOR YR	PRIOR YR VAR
<b>PATIENT REVENUE</b>										
Outpatient Revenue	\$ 334,256	\$ 253,139	32.0%	\$ 180,666	85.0%	\$ 1,000,251	\$ 771,677	29.6%	\$ 547,955	82.5%
<b>TOTAL PATIENT REVENUE</b>	<b>\$ 334,256</b>	<b>\$ 253,139</b>	<b>32.0%</b>	<b>\$ 180,666</b>	<b>85.0%</b>	<b>\$ 1,000,251</b>	<b>\$ 771,677</b>	<b>29.6%</b>	<b>\$ 547,955</b>	<b>82.5%</b>
<b>DEDUCTIONS FROM REVENUE</b>										
Contractual Adjustments	\$ 166,975	\$ 138,026	21.0%	\$ 100,192	66.7%	\$ 500,200	\$ 420,762	18.9%	\$ 284,054	76.1%
Self Pay Adjustments	9,464	11,661	-18.8%	38,531	-75.4%	15,574	35,549	-56.2%	37,864	-58.9%
Bad Debts	13,331	(6,126)	-317.6%	(20,752)	-164.2%	31,472	(18,674)	-268.5%	(12,195)	-358.1%
<b>TOTAL REVENUE DEDUCTIONS</b>	<b>\$ 189,769</b>	<b>\$ 143,561</b>	<b>32.2%</b>	<b>\$ 117,970</b>	<b>60.9%</b>	<b>\$ 547,245</b>	<b>\$ 437,637</b>	<b>25.0%</b>	<b>\$ 309,723</b>	<b>76.7%</b>
	<b>56.77%</b>	<b>56.71%</b>		<b>65.30%</b>		<b>54.71%</b>	<b>56.71%</b>		<b>56.52%</b>	
<b>NET PATIENT REVENUE</b>	<b>\$ 144,486</b>	<b>\$ 109,578</b>	<b>31.9%</b>	<b>\$ 62,696</b>	<b>130.5%</b>	<b>\$ 453,006</b>	<b>\$ 334,040</b>	<b>35.6%</b>	<b>\$ 238,232</b>	<b>90.2%</b>
<b>OTHER REVENUE</b>										
FHC Other Revenue	\$ -	\$ -	0.0%	\$ -	0.0%	\$ -	\$ -	0.0%	\$ -	0.0%
<b>TOTAL OTHER REVENUE</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.0%</b>	<b>\$ -</b>	<b>0.0%</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.0%</b>	<b>\$ -</b>	<b>0.0%</b>
<b>NET OPERATING REVENUE</b>	<b>\$ 144,486</b>	<b>\$ 109,578</b>	<b>31.9%</b>	<b>\$ 62,696</b>	<b>130.5%</b>	<b>\$ 453,006</b>	<b>\$ 334,040</b>	<b>35.6%</b>	<b>\$ 238,232</b>	<b>90.2%</b>
<b>OPERATING EXPENSE</b>										
Salaries and Wages	\$ 32,002	\$ 32,865	-2.6%	\$ 16,873	89.7%	\$ 96,176	\$ 100,188	-4.0%	\$ 58,922	63.2%
Benefits	5,427	6,247	-13.1%	5,637	-3.7%	16,031	17,730	-9.6%	18,680	-14.2%
Physician Services	55,323	59,458	-7.0%	8,024	589.4%	161,331	178,374	-9.6%	40,394	299.4%
Cost of Drugs Sold	6,831	12,910	-47.1%	453	1407.3%	63,867	39,356	62.3%	32,253	98.0%
Supplies	10,667	4,922	116.7%	14,387	-25.9%	14,983	14,985	0.0%	27,730	-46.0%
Utilities	-	-	0.0%	-	100.0%	-	-	0.0%	-	100.0%
Repairs and Maintenance	-	-	0.0%	-	100.0%	-	-	0.0%	-	100.0%
Other Expense	-	-	0.0%	-	0.0%	-	-	0.0%	-	0.0%
<b>TOTAL OPERATING EXPENSES</b>	<b>\$ 110,250</b>	<b>\$ 116,402</b>	<b>-5.3%</b>	<b>\$ 45,375</b>	<b>143.0%</b>	<b>\$ 352,388</b>	<b>\$ 350,633</b>	<b>0.5%</b>	<b>\$ 177,979</b>	<b>98.0%</b>
Depreciation/Amortization	\$ 75	\$ 75	-0.2%	\$ 75	0.0%	\$ 225	\$ 225	-0.2%	\$ 225	0.0%
<b>TOTAL OPERATING COSTS</b>	<b>\$ 110,325</b>	<b>\$ 116,477</b>	<b>-5.3%</b>	<b>\$ 45,450</b>	<b>142.7%</b>	<b>\$ 352,613</b>	<b>\$ 350,858</b>	<b>0.5%</b>	<b>\$ 178,204</b>	<b>97.9%</b>
<b>NET GAIN (LOSS) FROM OPERATIONS</b>	<b>\$ 34,161</b>	<b>\$ (6,899)</b>	<b>-595.2%</b>	<b>\$ 17,246</b>	<b>98.1%</b>	<b>\$ 100,393</b>	<b>\$ (16,818)</b>	<b>-696.9%</b>	<b>\$ 60,029</b>	<b>67.2%</b>
Operating Margin	23.64%	-6.30%	-475.5%	27.51%	-14.0%	22.16%	-5.03%	-540.2%	25.20%	-12.0%

	CURRENT MONTH					YEAR TO DATE				
Total Visits	864	702	23.1%	517	67.1%	2,483	2,140	16.0%		0.0%
Average Revenue per Office Visit	386.87	360.60	7.3%	349.45	10.7%	402.84	360.60	11.7%	349.46	15.3%
Hospital FTE's (Salaries and Wages)	9.1	8.9	1.3%	7.0	29.1%	9.2	9.2	0.0%	7.4	23.4%

**ECTOR COUNTY HOSPITAL DISTRICT  
FAMILY HEALTH CLINIC - WOMENS CLINIC- OPERATIONS SUMMARY  
DECEMBER 2023**

	CURRENT MONTH					YEAR TO DATE				
	ACTUAL	BUDGET	BUDGET VAR	PRIOR YR	PRIOR YR VAR	ACTUAL	BUDGET	BUDGET VAR	PRIOR YR	PRIOR YR VAR
<b>PATIENT REVENUE</b>										
Outpatient Revenue	\$ 745,432	\$ 995,048	-25.1%	\$ -	100.0%	\$ 2,430,550	\$ 2,858,655	-15.0%	\$ -	100.0%
<b>TOTAL PATIENT REVENUE</b>	<b>\$ 745,432</b>	<b>\$ 995,048</b>	<b>-25.1%</b>	<b>\$ -</b>	<b>100.0%</b>	<b>\$ 2,430,550</b>	<b>\$ 2,858,655</b>	<b>-15.0%</b>	<b>\$ -</b>	<b>100.0%</b>
<b>DEDUCTIONS FROM REVENUE</b>										
Contractual Adjustments	\$ 288,264	\$ 455,103	-36.7%	\$ -	100.0%	\$ 998,906	\$ 1,307,456	-23.6%	\$ -	100.0%
Self Pay Adjustments	2,346	48,505	-95.2%	-	100.0%	15,707	139,348	-88.7%	-	100.0%
Bad Debts	13,226	69,738	-81.0%	-	100.0%	35,572	200,350	-82.2%	-	100.0%
<b>TOTAL REVENUE DEDUCTIONS</b>	<b>\$ 303,836</b>	<b>\$ 573,346</b>	<b>-47.0%</b>	<b>\$ -</b>	<b>100.0%</b>	<b>\$ 1,050,184</b>	<b>\$ 1,647,154</b>	<b>-36.2%</b>	<b>\$ -</b>	<b>100.0%</b>
	<b>40.76%</b>	<b>57.62%</b>		<b>0.00%</b>		<b>43.21%</b>	<b>57.62%</b>		<b>0.00%</b>	
<b>NET PATIENT REVENUE</b>	<b>\$ 441,596</b>	<b>\$ 421,702</b>	<b>4.7%</b>	<b>\$ -</b>	<b>100.0%</b>	<b>\$ 1,380,366</b>	<b>\$ 1,211,501</b>	<b>13.9%</b>	<b>\$ -</b>	<b>100.0%</b>
<b>OTHER REVENUE</b>										
FHC Other Revenue	\$ -	\$ -	0.0%	\$ -	0.0%	\$ -	\$ -	0.0%	\$ -	0.0%
<b>TOTAL OTHER REVENUE</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.0%</b>	<b>\$ -</b>	<b>0.0%</b>	<b>\$ -</b>	<b>\$ -</b>	<b>0.0%</b>	<b>\$ -</b>	<b>0.0%</b>
<b>NET OPERATING REVENUE</b>	<b>\$ 441,596</b>	<b>\$ 421,702</b>	<b>4.7%</b>	<b>\$ -</b>	<b>100.0%</b>	<b>\$ 1,380,366</b>	<b>\$ 1,211,501</b>	<b>13.9%</b>	<b>\$ -</b>	<b>100.0%</b>
<b>OPERATING EXPENSE</b>										
Salaries and Wages	\$ 76,645	\$ 114,151	-32.9%	\$ -	100.0%	\$ 251,053	\$ 327,941	-23.4%	\$ -	100.0%
Benefits	12,997	21,699	-40.1%	-	100.0%	42,218	58,036	-27.3%	-	100.0%
Physician Services	219,645	289,159	-24.0%	-	100.0%	698,334	858,149	-18.6%	-	100.0%
Cost of Drugs Sold	10,144	-	0.0%	-	100.0%	52,337	-	100.0%	-	100.0%
Supplies	11,566	41,233	-71.9%	-	100.0%	23,889	118,599	-79.9%	-	100.0%
Utilities	-	-	0.0%	-	100.0%	-	-	0.0%	-	100.0%
Repairs and Maintenance	619	-	0.0%	-	100.0%	1,130	-	0.0%	-	100.0%
Other Expense	-	-	0.0%	-	0.0%	-	-	0.0%	-	0.0%
<b>TOTAL OPERATING EXPENSES</b>	<b>\$ 333,537</b>	<b>\$ 470,182</b>	<b>-29.1%</b>	<b>\$ -</b>	<b>100.0%</b>	<b>\$ 1,073,445</b>	<b>\$ 1,374,545</b>	<b>-21.9%</b>	<b>\$ -</b>	<b>100.0%</b>
Depreciation/Amortization	\$ -	\$ 91	-100.0%	\$ -	100.0%	\$ -	\$ 270	-100.0%	\$ -	100.0%
<b>TOTAL OPERATING COSTS</b>	<b>\$ 333,537</b>	<b>\$ 470,273</b>	<b>-29.1%</b>	<b>\$ -</b>	<b>100.0%</b>	<b>\$ 1,073,445</b>	<b>\$ 1,374,815</b>	<b>-21.9%</b>	<b>\$ -</b>	<b>100.0%</b>
<b>NET GAIN (LOSS) FROM OPERATIONS</b>	<b>\$ 108,059</b>	<b>\$ (48,571)</b>	<b>-322.5%</b>	<b>\$ -</b>	<b>100.0%</b>	<b>\$ 306,921</b>	<b>\$ (163,314)</b>	<b>-287.9%</b>	<b>\$ -</b>	<b>100.0%</b>
Operating Margin	24.47%	-11.52%	-312.5%	0.00%	100.0%	22.23%	-13.48%	-264.9%	0.00%	100.0%

	CURRENT MONTH					YEAR TO DATE				
	ACTUAL	BUDGET	BUDGET VAR	PRIOR YR	PRIOR YR VAR	ACTUAL	BUDGET	BUDGET VAR	PRIOR YR	PRIOR YR VAR
Total Visits	1,374	1,888	-27.2%	-	0.0%	4,779	5,424	-11.9%	-	0.0%
Average Revenue per Office Visit	542.53	527.04	2.9%	-	0.0%	508.59	527.04	-3.5%	-	0.0%
Hospital FTE's (Salaries and Wages)	16.9	25.6	-34.1%	-	0.0%	18.7	24.8	-24.6%	-	0.0%



**ECTOR COUNTY HOSPITAL DISTRICT  
FAMILY HEALTH CLINIC COMBINED  
DECEMBER 2023**

	MONTHLY REVENUE						YTD REVENUE					
	Clements	West	JBS	Womens	Total	%	Clements	West	JBS	Womens	Total	%
Medicare	\$ 34,389	\$ 42,196	\$ (895)	\$ 45,462	\$ 121,152	8.9%	\$ 139,459	\$ 142,652	\$ 68	\$ 156,593	\$ 438,772	9.9%
Medicaid	15,675	31,738	229,791	264,985	542,188	39.8%	79,184	95,435	693,021	884,202	1,751,842	39.5%
FAP	-	-	-	-	-	0.0%	-	-	-	-	-	0.0%
Commercial	19,761	51,616	84,772	409,889	566,039	41.5%	77,104	161,832	258,817	1,282,721	1,780,473	40.2%
Self Pay	30,758	50,453	18,134	16,554	115,899	8.5%	141,882	139,585	39,770	63,470	384,708	8.7%
Other	400	7,036	2,454	8,542	18,433	1.4%	8	24,321	8,576	43,564	76,469	1.7%
<b>Total</b>	<b>\$ 100,984</b>	<b>\$ 183,039</b>	<b>\$ 334,256</b>	<b>\$ 745,432</b>	<b>#####</b>	<b>100.0%</b>	<b>\$ 437,637</b>	<b>\$ 563,825</b>	<b>\$ 1,000,251</b>	<b>\$ 2,430,550</b>	<b>\$ 4,432,264</b>	<b>100.0%</b>

	MONTHLY PAYMENTS						YEAR TO DATE PAYMENTS					
	Clements	West	JBS	Womens	Total	%	Clements	West	JBS	Womens	Total	%
Medicare	\$ 24,111	\$ 19,094	\$ -	\$ 6,141	\$ 49,346	13.4%	\$ 60,949	\$ 56,597	\$ -	\$ 17,838	\$ 135,385	11.3%
Medicaid	14,559	9,722	80,612	\$ 22,330	127,223	34.7%	39,707	38,789	253,231	76,256	407,982	34.2%
FAP	-	-	-	\$ -	-	0.0%	-	-	-	-	-	0.0%
Commercial	9,587	19,221	34,038	\$ 87,574	150,420	41.0%	29,141	62,251	100,229	256,607	448,228	37.6%
Self Pay	3,777	4,090	3,311	\$ 27,227	38,405	10.5%	17,704	19,995	14,889	136,741	189,329	15.9%
Other	211	672	332	\$ 379	1,594	0.4%	403	5,616	1,995	4,566	12,581	1.1%
<b>Total</b>	<b>\$ 52,245</b>	<b>\$ 52,799</b>	<b>\$ 118,292</b>	<b>\$ 143,651</b>	<b>\$ 366,988</b>	<b>100.0%</b>	<b>\$ 147,905</b>	<b>\$ 183,249</b>	<b>\$ 370,344</b>	<b>\$ 492,008</b>	<b>\$ 1,193,505</b>	<b>100.0%</b>

**ECTOR COUNTY HOSPITAL DISTRICT  
FAMILY HEALTH CLINIC CLEMENTS  
DECEMBER 2023**

**REVENUE BY PAYOR**

	CURRENT MONTH				YEAR TO DATE			
	CURRENT YEAR		PRIOR YEAR		CURRENT YEAR		PRIOR YEAR	
	GROSS REVENUE	%	GROSS REVENUE	%	GROSS REVENUE	%	GROSS REVENUE	%
Medicare	\$ 34,389	34.0%	\$ 46,883	23.5%	\$ 139,459	31.9%	139,441	24.7%
Medicaid	15,675	15.5%	55,300	27.8%	79,184	18.1%	150,045	26.6%
PHC	-	0.0%	-	0.0%	-	0.0%	-	0.0%
Commercial	19,761	19.6%	29,343	14.7%	77,104	17.6%	87,865	15.6%
Self Pay	30,758	30.5%	58,949	29.6%	141,882	32.4%	174,139	30.8%
Other	400	0.4%	8,729	4.4%	8	0.0%	12,969	2.3%
<b>TOTAL</b>	<b>\$ 100,984</b>	<b>100.0%</b>	<b>\$ 199,204</b>	<b>100.0%</b>	<b>\$ 437,637</b>	<b>100.0%</b>	<b>564,459</b>	<b>100.0%</b>

**PAYMENTS BY PAYOR**

	CURRENT MONTH				YEAR TO DATE			
	CURRENT YEAR		PRIOR YEAR		CURRENT YEAR		PRIOR YEAR	
	PAYMENTS	%	PAYMENTS	%	PAYMENTS	%	PAYMENTS	%
Medicare	24,111	46.2%	\$ 20,598	26.3%	\$ 60,949	41.2%	72,474	32.8%
Medicaid	14,559	27.9%	28,006	35.9%	39,707	26.8%	72,115	32.5%
PHC	-	0.0%	-	0.0%	-	0.0%	-	0.0%
Commercial	9,587	18.3%	15,705	20.1%	29,141	19.7%	38,094	17.2%
Self Pay	3,777	7.2%	13,190	16.9%	17,704	12.0%	36,866	16.7%
Other	211	0.4%	596	0.8%	403	0.3%	1,814	0.8%
<b>TOTAL</b>	<b>\$ 52,245</b>	<b>100.0%</b>	<b>\$ 78,096</b>	<b>100.0%</b>	<b>\$ 147,905</b>	<b>100.0%</b>	<b>221,363</b>	<b>100.0%</b>

**ECTOR COUNTY HOSPITAL DISTRICT  
FAMILY HEALTH CLINIC WEST UNIVERSITY  
DECEMBER 2023**

**REVENUE BY PAYOR**

	CURRENT MONTH				YEAR TO DATE			
	CURRENT YEAR		PRIOR YEAR		CURRENT YEAR		PRIOR YEAR	
	GROSS REVENUE	%	GROSS REVENUE	%	GROSS REVENUE	%	GROSS REVENUE	%
Medicare	\$ 42,196	23.1%	\$ 41,508	22.7%	\$ 142,652	25.3%	\$ 118,211	20.3%
Medicaid	31,738	17.3%	\$ 51,438	28.1%	95,435	16.9%	172,919	29.7%
PHC	-	0.0%	\$ -	0.0%	-	0.0%	-	0.0%
Commercial	51,616	28.2%	\$ 40,690	22.2%	161,832	28.7%	146,986	25.2%
Self Pay	50,453	27.6%	\$ 44,639	24.4%	139,585	24.8%	122,669	21.1%
Other	7,036	3.8%	\$ 4,778	2.6%	24,321	4.3%	21,527	3.7%
<b>TOTAL</b>	<b>\$ 183,039</b>	<b>100.0%</b>	<b>\$ 183,053</b>	<b>100.0%</b>	<b>\$ 563,825</b>	<b>100.0%</b>	<b>\$ 582,313</b>	<b>100.0%</b>

**PAYMENTS BY PAYOR**

	CURRENT MONTH				YEAR TO DATE			
	CURRENT YEAR		PRIOR YEAR		CURRENT YEAR		PRIOR YEAR	
	PAYMENTS	%	PAYMENTS	%	PAYMENTS	%	PAYMENTS	%
Medicare	\$ 19,094	36.2%	\$ 20,186	24.2%	\$ 56,597	30.9%	\$ 63,645	25.4%
Medicaid	9,722	18.4%	32,002	38.4%	\$ 38,789	21.2%	86,822	34.7%
PHC	-	0.0%	-	0.0%	-	0.0%	-	0.0%
Commercial	19,221	36.4%	18,922	22.7%	62,251	33.9%	62,235	24.9%
Self Pay	4,090	7.7%	9,698	11.6%	19,995	10.9%	30,019	12.0%
Other	672	1.3%	2,535	3.0%	5,616	3.1%	7,710	3.1%
<b>TOTAL</b>	<b>\$ 52,799</b>	<b>100.0%</b>	<b>\$ 83,344</b>	<b>100.0%</b>	<b>\$ 183,249</b>	<b>100.0%</b>	<b>\$ 250,431</b>	<b>100.0%</b>

**ECTOR COUNTY HOSPITAL DISTRICT  
FAMILY HEALTH CLINIC JBS  
DECEMBER 2023**

**REVENUE BY PAYOR**

	CURRENT MONTH				YEAR TO DATE			
	CURRENT YEAR		PRIOR YEAR		CURRENT YEAR		PRIOR YEAR	
	GROSS REVENUE	%	GROSS REVENUE	%	GROSS REVENUE	%	GROSS REVENUE	%
Medicare	\$ (895)	-0.3%	\$ 39	0.0%	\$ 68	0.0%	\$ 42	0.0%
Medicaid	229,791	68.8%	\$ 115,561	64.0%	693,021	69.2%	369,441	67.4%
PHC	-	0.0%	\$ -	0.0%	-	0.0%	-	0.0%
Commercial	84,772	25.4%	\$ 58,946	32.6%	258,817	25.9%	162,431	29.6%
Self Pay	18,134	5.4%	\$ 4,095	2.3%	39,770	4.0%	7,545	1.4%
Other	2,454	0.7%	\$ 2,025	1.1%	8,576	0.9%	8,496	1.6%
<b>TOTAL</b>	<b>\$ 334,256</b>	<b>100.0%</b>	<b>\$ 180,666</b>	<b>100.0%</b>	<b>\$ 1,000,251</b>	<b>100.0%</b>	<b>\$ 547,955</b>	<b>100.0%</b>

**PAYMENTS BY PAYOR**

	CURRENT MONTH				YEAR TO DATE			
	CURRENT YEAR		PRIOR YEAR		CURRENT YEAR		PRIOR YEAR	
	PAYMENTS	%	PAYMENTS	%	PAYMENTS	%	PAYMENTS	%
Medicare	\$ -	0.0%	\$ -	0.0%	\$ -	0.0%	\$ -	0.0%
Medicaid	80,612	68.1%	82,629	65.5%	253,231	68.4%	223,472	65.6%
PHC	-	0.0%	-	0.0%	-	0.0%	-	0.0%
Commercial	34,038	28.8%	35,872	28.4%	100,229	27.1%	97,523	28.6%
Self Pay	3,311	2.8%	6,729	5.3%	14,889	4.0%	15,783	4.6%
Other	332	0.3%	882	0.7%	1,995	0.5%	3,772	1.1%
<b>TOTAL</b>	<b>\$ 118,292</b>	<b>100.0%</b>	<b>\$ 126,112</b>	<b>100.0%</b>	<b>\$ 370,344</b>	<b>100.0%</b>	<b>\$ 340,551</b>	<b>100.0%</b>

**ECTOR COUNTY HOSPITAL DISTRICT  
FAMILY HEALTH CLINIC - WOMENS CLINIC  
DECEMBER 2023**

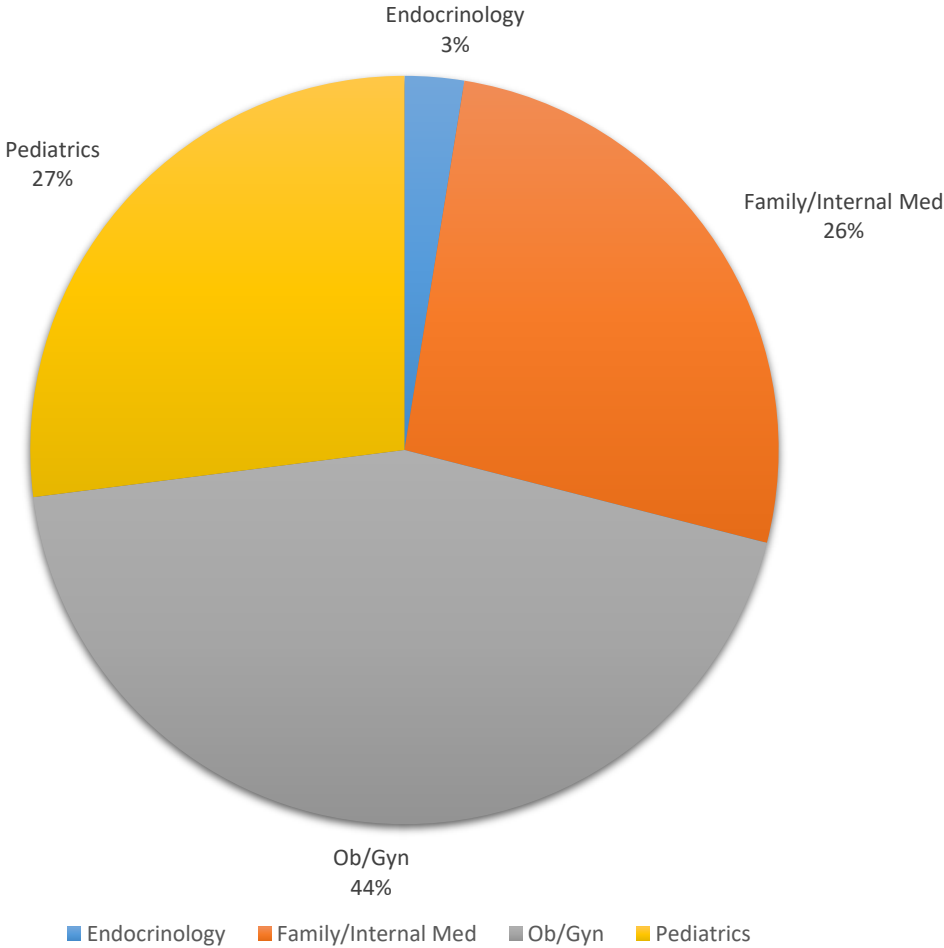
**REVENUE BY PAYOR**

	CURRENT MONTH				YEAR TO DATE			
	CURRENT YEAR		PRIOR YEAR		CURRENT YEAR		PRIOR YEAR	
	GROSS REVENUE	%	GROSS REVENUE	%	GROSS REVENUE	%	GROSS REVENUE	%
Medicare	\$ 45,462	6.1%	\$ -	0.0%	\$ 156,593	6.4%	\$ -	0.0%
Medicaid	264,985	35.5%	\$ -	0.0%	884,202	36.4%	-	0.0%
PHC	-	0.0%	\$ -	0.0%	-	0.0%	-	0.0%
Commercial	409,889	55.1%	\$ -	0.0%	1,282,721	52.8%	-	0.0%
Self Pay	16,554	2.2%	\$ -	0.0%	63,470	2.6%	-	0.0%
Other	8,542	1.1%	\$ -	0.0%	43,564	1.8%	-	0.0%
<b>TOTAL</b>	<b>\$ 745,432</b>	<b>100.0%</b>	<b>\$ -</b>	<b>0.0%</b>	<b>\$ 2,430,550</b>	<b>100.0%</b>	<b>\$ -</b>	<b>0.0%</b>

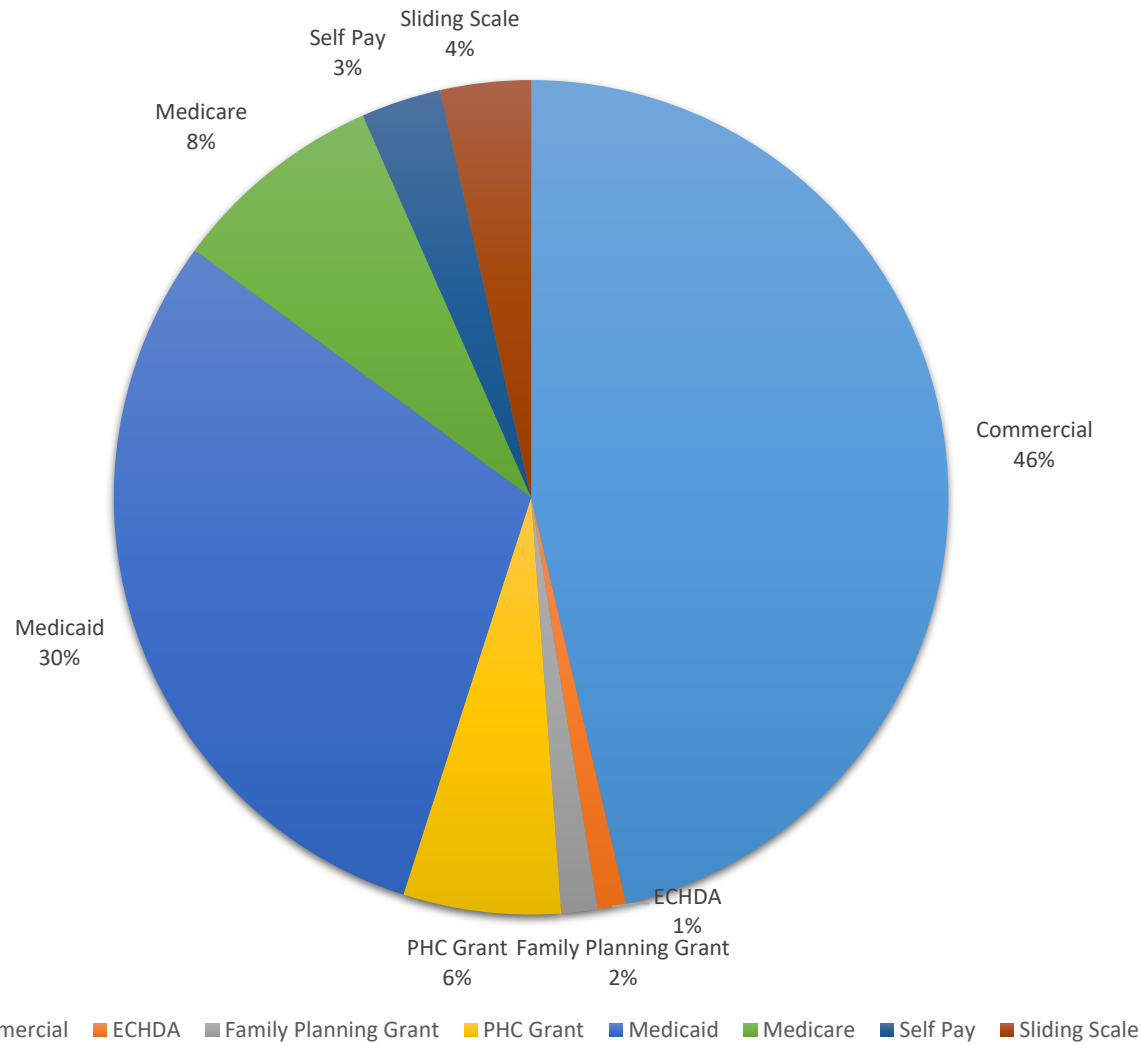
**PAYMENTS BY PAYOR**

	CURRENT MONTH				YEAR TO DATE			
	CURRENT YEAR		PRIOR YEAR		CURRENT YEAR		PRIOR YEAR	
	PAYMENTS	%	PAYMENTS	%	PAYMENTS	%	PAYMENTS	%
Medicare	\$ 6,141	4.3%	\$ -	0.0%	\$ 17,838	3.6%	\$ -	0.0%
Medicaid	22,330	15.5%	-	0.0%	76,256	15.5%	-	0.0%
PHC	-	0.0%	-	0.0%	-	0.0%	-	0.0%
Commercial	87,574	60.9%	-	0.0%	256,607	52.2%	-	0.0%
Self Pay	27,227	19.0%	-	0.0%	136,741	27.9%	-	0.0%
Other	379	0.3%	-	0.0%	4,566	0.9%	-	0.0%
<b>TOTAL</b>	<b>\$ 143,651</b>	<b>100.0%</b>	<b>\$ -</b>	<b>0.0%</b>	<b>\$ 492,008</b>	<b>100.1%</b>	<b>\$ -</b>	<b>0.0%</b>

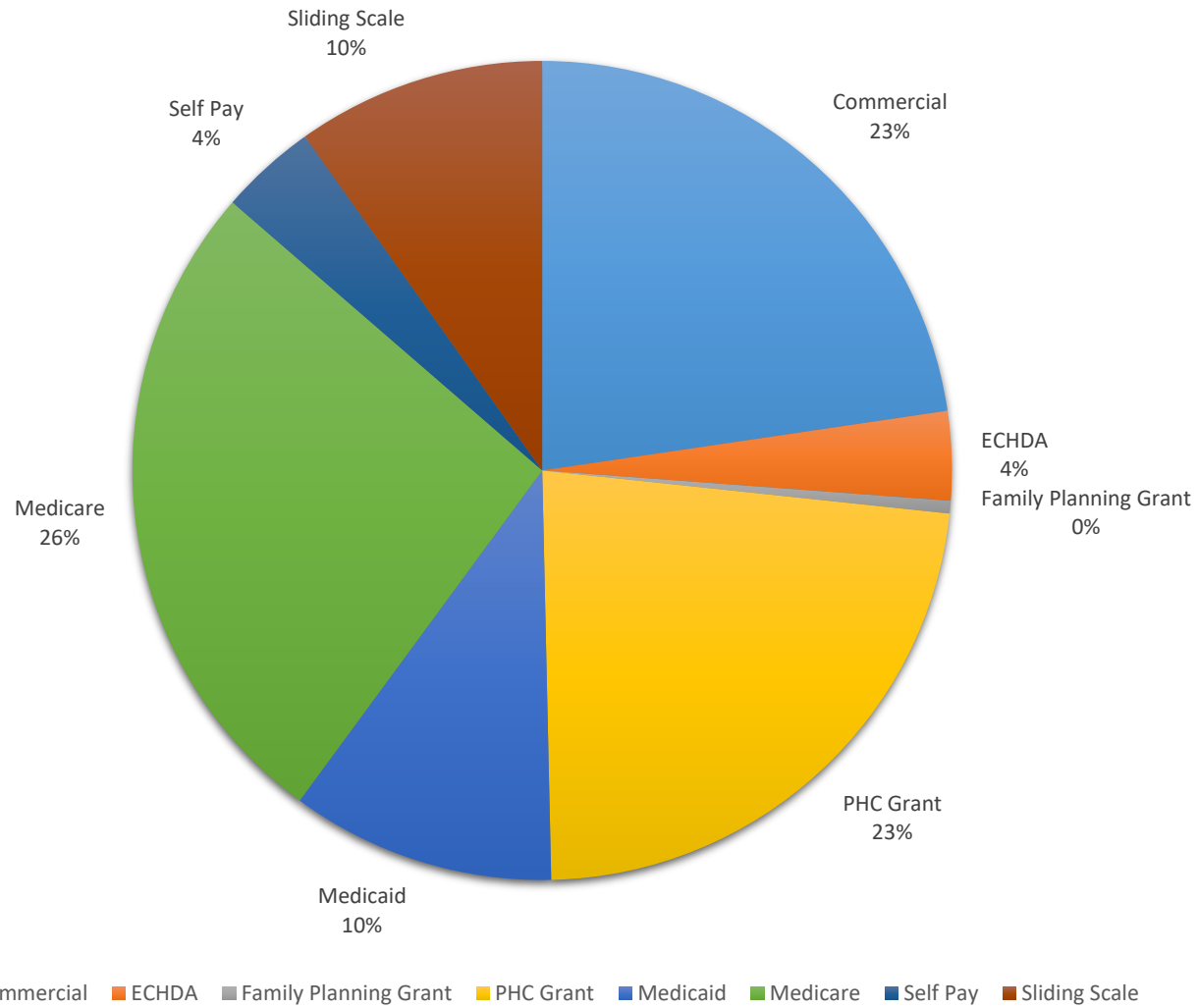
### FHC December Visits By Service



### Total FHC December Visits by Financial Class

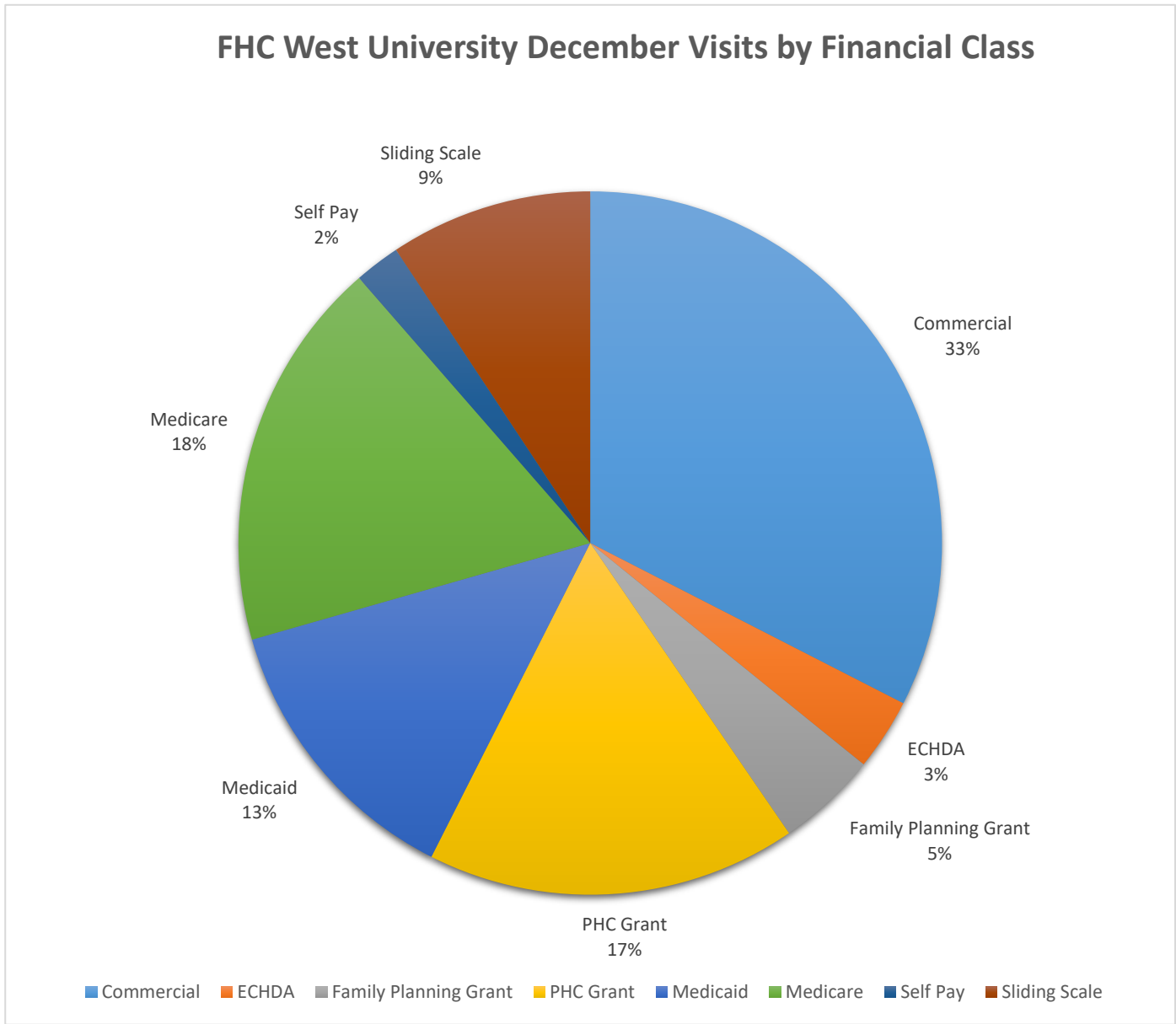


### FHC Clements December Visits by Financial Class

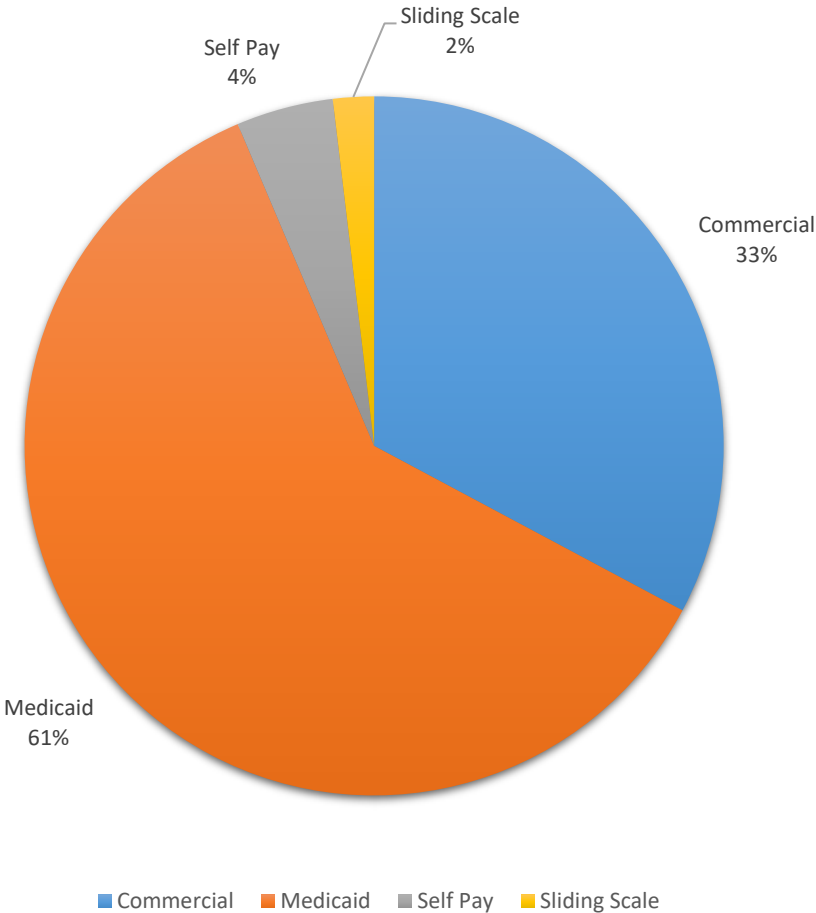




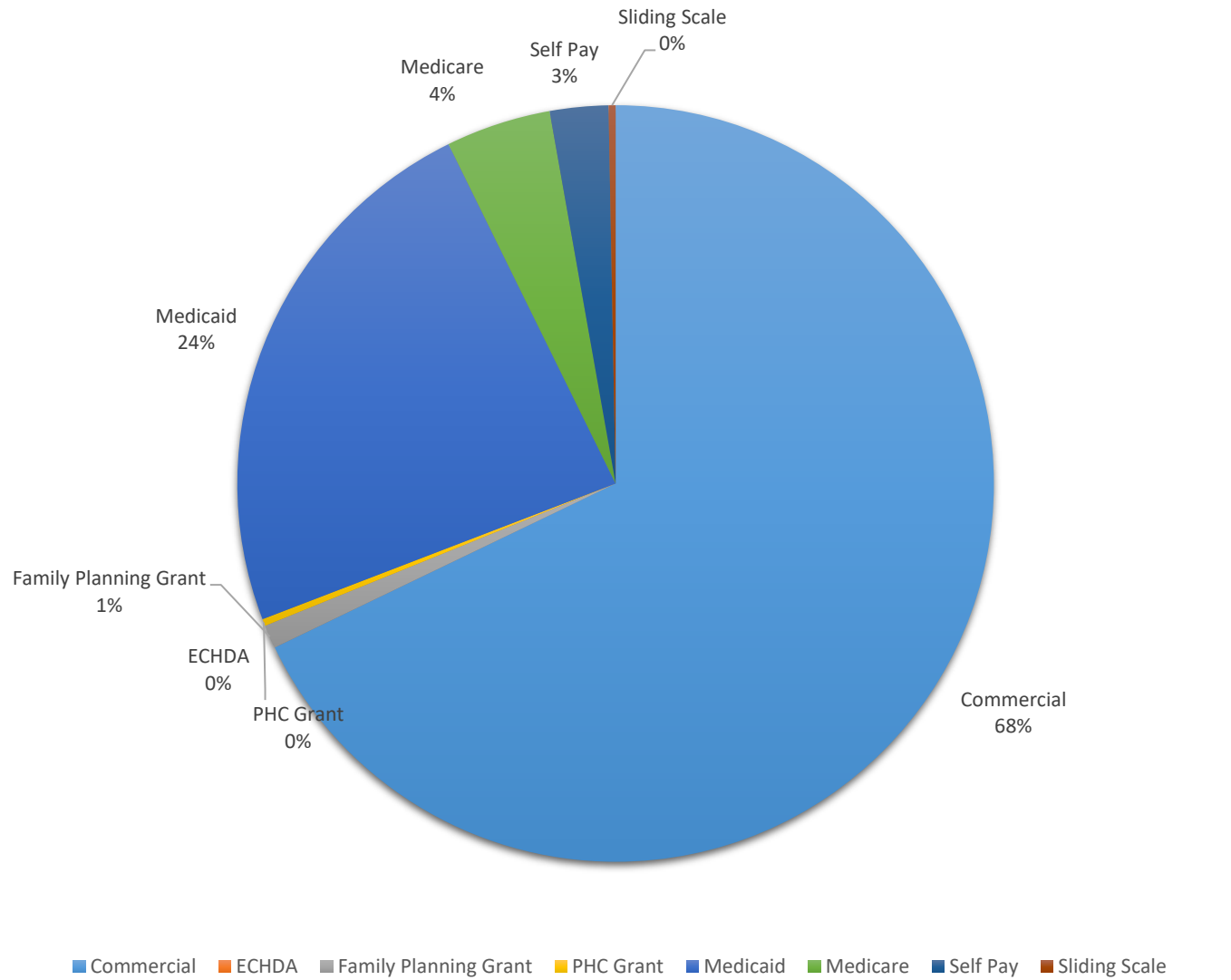
### FHC West University December Visits by Financial Class



### Healthy Kids Clinic December Visits by Financial Class



### Womens Clinic December Visits by Financial Class



## FHC Executive Director's Report-February 2024

- **Staffing Update:**
  - **Women's Clinic**-The Women's Clinic is currently in search of one Ultrasound Tech.
  - **Healthy Kids Clinic**-The Healthy Kids Clinic is currently searching for a Medical Assistant and LVN.
  - **Family Health Clinic**-The FHC West University is currently searching for a Quality Coordinator and LVN positions.
  
- **Provider Update:**
  - **West University**-We are currently searching for an additional physician for our West University location. Merritt Hawkins is assisting in the search.
  - **Women's Clinic**- Dr. Garcia returned January 8, 2024, after being out for six months. Dr. Martinez will be out January 12-February 5<sup>th</sup>. Both Merritt Hawkins and Curative are assisting with the search to recruit another physician for the Women's Clinic.

February 2024

## MEDICAL CENTER HEALTH SYSTEM

### COMPLIANCE COMMITTEE CHARTER

#### I. PURPOSE

As an expression of our commitment to act with integrity and ethics and to institute a program to ensure compliance with all applicable laws, Medical Center Health System (“MCHS”) has created a Board approved Compliance Committee to (i) oversee the implementation, operation, and effectiveness of MCHS’s Compliance Program and the performance of the Compliance Officer in effectuating the Compliance Program, and (ii) assist the Board in fulfilling its fiduciary responsibility and accountability relating to its compliance oversight responsibilities, the Mission and Values of MCHS and the MCHS Compliance Standards of Conduct.

#### II. AUTHORITIES AND RESPONSIBILITIES

The Compliance Committee is continuously composed of representatives from multiple disciplines. At a minimum, the Compliance Committee will include the Chief Compliance and Privacy Officer, President and Chief Executive Officer (Pres./CEO), Chief Legal Counsel, Chief Financial Officer, Chief Operating Officer, Chief Medical Officer, Chief Information Officer and two Ector County Hospital District Board Members. The Pres./CEO shall also appoint such ex officio members of the Compliance Committee as he or she deems necessary or advisable to assist the committee in the performance of its duties. Ex officio members of the committee may not vote on matters before the committee.

The Compliance Committee will receive reports from ad-hoc guests which will be related to Human Resources, Information Technology/Security, Revenue Cycle/Integrity, or others as deemed necessary.

#### III. DUTIES OF THE COMPLIANCE COMMITTEE

The duties of the Compliance Committee shall include:

1. Advising the Chief Compliance Officer and assisting in the implementation and maintenance of the Compliance Program;
2. Working with appropriate departments of the Health System to develop standards of conduct and policies and procedures to promote adherence to the Compliance Program;

3. Recommending and monitoring, in conjunction with the relevant departments, the development of internal systems and controls to carry out MCHS's standards, policies and procedures;
4. Determining the appropriate strategy and/or approach to promote adherence to the Compliance Program and the detection of potential violations;
5. Developing a system to solicit, evaluate and respond to complaints and problems;
6. Overseeing the education and training of employees and systems for communication with and by employees;
7. Analyzing the legal requirements with which MCHS must comply and locating and analyzing specific risk areas within the Health System; and
8. Establishing confidentiality standards and requirements for committee members and those persons requested to provide assistance to the committee.

#### IV. MEETINGS

The Committee shall meet at least quarterly in order to perform its responsibilities. The Committee shall keep agendas, minutes and attendance of its meetings.



**THE BOARD OF DIRECTORS OF THE  
ECTOR COUNTY HOSPITAL DISTRICT  
MEDICAL CENTER HEALTH SYSTEM**

**WHEREAS:** The Ector County Hospital District/Medical Center Health System (ECHD/MCHS), is committed to ethical and legal business practices as essential to the advancement of its Mission of service to the Ector County community.

**WHEREAS:** Pursuant to this commitment, as set forth in the minutes of July 14, 1998 and subsequent minutes, the Board of Directors of ECHD/MCHS has previously directed the establishment and maintenance of a Corporate Compliance Program as a continuous process for the improvement of its business policies and practices, and oversight of its responsibilities under local, state and federal rules, laws, and regulations.

**WHEREAS:** It is the policy of the ECHD/MCHS that the implemented Corporate Compliance Program assure a collaborative participation of all elements of the hospital in the prevention of violations of Medical Center Health System’s policies, local, state and federal laws. The expectations of this policy are to:

- Reaffirm this hospital’s commitment to its stated principles and beliefs.
- Assure the hospital acts in a manner consistent with its Mission and Values.
- Have the hospital meet its ethical and legal requirements.
- Decrease the risk of inappropriate behavior.

**RESOLVED:** That the Board of Directors, ECHD/MCHS reaffirms its commitment to the expectations of ethical and legal conduct stated herein, and to the continuous effective monitoring of the hospital’s responsibilities and business practices by its leadership, managers, and employees, and through the processes and procedures of the Corporate Compliance Program.

**FURTHER RESOLVED:** To assure that the Board’s expectations are adhered the Board directs that:

- That the Audit Committee monitor the performance of the Corporate Compliance Program and receive regular reports in Executive Session, but no less than quarterly in each calendar year, from the Chief Compliance Officer, on the program’s initiatives, training, education, audits and reviews, and such other matters as should be brought to the Board’s attention.
- That the Chief Executive Officer and the Chief Compliance Officer jointly report to the full Board on the status and effectiveness of the Corporate Compliance Program on no less than an annual basis.
- That the Chief Executive Officer establishes such policies and procedures as necessary to accomplish the goals and objectives stated herein.

**Passed and Approved** this day 6 of February 2024

\_\_\_\_\_  
Wallace Dunn, President

\_\_\_\_\_  
Richard Herrera

\_\_\_\_\_  
Don Hallmark, Vice President

\_\_\_\_\_  
Will Kappauf

\_\_\_\_\_  
Bryn Dodd

\_\_\_\_\_  
Kathy Rhodes

\_\_\_\_\_  
David Dunn



## Investor Statement

September 30, 2023 - December 31, 2023

Prepared for

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**ECTOR COUNTY HOSPITAL DISTRICT**

ECTOR COUNTY HOSPITAL DISTRICT  
PO BOX 7239  
Odessa, TX 79761

Advisor

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**Charles Brown & Jarrod Patterson**

Momentum Independent Network Inc.



**ECTOR COUNTY HOSPITAL DISTRICT  
December 31, 2023**

**Yield Summary**

<b>Sector</b>	<b>Cost Basis</b>	<b>Weighted Avg Yield</b>	<b>Market Value</b>	<b>Unrealized Gain/Loss</b>
Treasuries/Agencies/CDs	\$ 50,642,840	1.67%	\$ 49,208,754	\$ -1,434,085
Money Market/Cash	\$ 8,351,462	4.96%	\$ 8,351,350	\$ -112
<b>Total</b>	<b>\$ 58,994,302</b>	<b>2.14%</b>	<b>\$ 57,560,104</b>	<b>\$ -1,434,197</b>

	<b>12/31/2023</b>	<b>12/31/2022</b>
<b>3 MONTH TREASURY BILL</b>	5.40%	4.42%
<b>5 YEAR TREASURY BILL</b>	3.84%	3.99%
<b>10 YEAR TREASURY NOTE</b>	3.88%	3.88%
<b>30 YEAR TREASURY NOTE</b>	4.03%	3.97%

The information is based on data received. Information supporting the recommendation is enclosed. Mutual funds, ETFs and variable products are sold by prospectus. Please consider the investment objectives, risks, charges, and expenses of the investment company carefully before investing. The prospectus contains this and other information about the investment company. Prospectuses may be obtained from the investment company or from your registered representative. Please read the prospectus carefully before investing. Investors should consider their individual investment time horizon and income tax brackets, both current and anticipated, when making an investment decision. ETFs trade like a stock and may trade for less than their net asset value. Asset allocation and Diversification does not ensure a profit and may not protect against loss in declining markets.

**ECTOR COUNTY HOSPITAL DISTRICT Reports: Rollup of All Accounts**



Holdings Detail As of Dec 31, 2023

Holdings	Units	Cost <sup>1</sup>	Portfolio Value	Gain/Loss <sup>2</sup>	Gain/Loss %	% of Portfolio	Dur	Mat. Date	Price	YTM
26761549		\$ 3,153,216	\$ 3,025,265	\$ -127,950	-4.06 %	5.26 %				
US Treasury 0.250 06/15/24   91282CCG4	1,600,000	1,600,001	1,565,056	-34,945	-2.18	2.72	0.39	Jun 15, 2024	\$ 97.82	0.25 %
FHLBanks 0.860 10/27/25 '23   3130APGW9	1,500,000	1,497,680	1,404,690	-92,990	-6.21	2.44	1.72	Oct 27, 2025	93.65	0.90
Dreyfus Government Cash Mgmt Inv   DGVXX	55,514.2	55,529	55,514	-15	-0.03	0.10			1.00	—
Cash		5	5			0.00				—
38285456		15,726,996	15,683,986	-43,010	-0.27	27.25				
US Treasury 0.250 06/15/24   91282CCG4	2,700,000	2,700,002	2,641,032	-58,970	-2.18	4.59	0.39	Jun 15, 2024	97.82	0.25
US Treasury Bill 01/18/24 MATd   912797GD3	5,075,000	5,016,079	5,063,074	46,995	0.94	8.80	0.00	Jan 18, 2024	99.77	5.12
FHLBanks 0.860 10/27/25 '23   3130APGW9	500,000	499,240	468,230	-31,010	-6.21	0.81	1.72	Oct 27, 2025	93.65	0.90
Dreyfus Government Cash Mgmt Inv   DGVXX	7,511,644.93	7,511,670	7,511,645	-25	0.00	13.05			1.00	—
Cash		5	5			0.00				—
26761610		2,319,706	2,247,541	-72,165	-3.11	3.90				
US Treasury 0.250 06/15/24   91282CCG4	1,600,000	1,600,001	1,565,056	-34,945	-2.18	2.72	0.39	Jun 15, 2024	97.82	0.25
FHLBanks 0.860 10/27/25 '23   3130APGW9	600,000	599,084	561,876	-37,208	-6.21	0.98	1.72	Oct 27, 2025	93.65	0.90
Dreyfus Government Cash Mgmt Inv   DGVXX	120,604.42	120,616	120,604	-12	-0.01	0.21			1.00	—
Cash		5	5			0.00				—
26761530		5,526,432	5,201,489	-324,943	-5.88	9.04				
Freddie Mac 0.600 10/15/25 '24 MTN   3134GWYS9	750,000	740,772	699,878	-40,895	-5.52	1.22	1.69	Oct 15, 2025	93.32	0.92
Federal Farm 1.300 12/01/25 '24   3133ENGA2	4,600,000	4,611,892	4,327,864	-284,028	-6.16	7.52	1.80	Dec 1, 2025	94.08	1.03
Dreyfus Government Cash Mgmt Inv   DGVXX	173,742.87	173,763	173,743	-20	-0.01	0.30			1.00	—
Cash		5	5			0.00				—
26761506		29,220,565	28,456,118	-764,447	-2.62	49.44				
Federal Farm 2.580 04/18/24 '24   3133ENUS7	3,502,000	3,504,989	3,473,389	-31,601	-0.90	6.03	0.24	Apr 18, 2024	99.18	1.42
Freddie Mac 0.600 10/15/25 '24 MTN   3134GWYS9	2,700,000	2,666,729	2,519,559	-147,170	-5.52	4.38	1.69	Oct 15, 2025	93.32	0.92
Federal Farm 1.300 12/01/25 '24   3133ENGA2	3,000,000	3,007,759	2,822,520	-185,239	-6.16	4.90	1.80	Dec 1, 2025	94.08	1.03
FHLBanks 0.860 10/27/25 '23   3130APGW9	2,300,000	2,296,432	2,153,858	-142,574	-6.21	3.74	1.72	Oct 27, 2025	93.65	0.90
FHLBanks 1.050 07/25/24 '24   3130AQJ38	9,725,000	9,467,308	9,485,570	18,263	0.19	16.48	0.50	Jul 25, 2024	97.54	2.27
US Treasury 1.750 03/15/25   91282CED9	6,859,000	6,845,054	6,628,881	-216,173	-3.16	11.52	1.11	Mar 15, 2025	96.64	1.82
Dreyfus Government Cash Mgmt Inv   DGVXX	441,063.6	441,089	441,064	-25	-0.01	0.77			1.00	—
Morgan Stanley Bk N A Cd 1.1000% 11/19/202   61765Q6N4	250,000	241,192	224,720	-16,472	-6.83	0.39		Nov 19, 2026	89.89	1.89

# ECTOR COUNTY HOSPITAL DISTRICT Reports: Rollup of All Accounts



Holdings Detail As of Dec 31, 2023

Holdings	Units	Cost <sup>1</sup>	Portfolio Value	Gain/Loss <sup>2</sup>	Gain/Loss %	% of Portfolio	Dur	Mat. Date	Price	YTM
Goldman Bank USA 1.800 03/09/26   38149M2P7	250,000	250,003	234,528	-15,475	-6.19	0.41	2.05	Mar 9, 2026	93.81	1.80
MIDWEST INDPT BANKERSBANK JEFFERSON CITY MO CTF DEP 1.800% 03/16/26 DTD 03/16/22 CLB   59833LAY8	250,000	250,003	234,258	-15,745	-6.30	0.41			93.70	1.80
Live Oak Banking 1.900 09/15/25   538036VN1	250,000	250,002	237,768	-12,235	-4.89	0.41	1.60	Sep 15, 2025	95.11	1.90
Cash		5	5			0.00				—
<b>38285461</b>		<b>3,047,387</b>	<b>2,945,705</b>	<b>-101,683</b>	<b>-3.34</b>	<b>5.12</b>				
US Treasury 0.250 06/15/24   91282CCG4	2,100,000	2,100,002	2,054,136	-45,866	-2.18	3.57	0.39	Jun 15, 2024	97.82	0.25
FHLBanks 0.860 10/27/25 '23   3130APGW9	900,000	898,616	842,814	-55,802	-6.21	1.46	1.72	Oct 27, 2025	93.65	0.90
Dreyfus Government Cash Mgmt Inv   DGVXX	48,749.73	48,765	48,750	-15	-0.03	0.08			1.00	—
Cash		5	5			0.00				—
<b>Total</b>		<b>58,994,302</b>	<b>57,560,104</b>	<b>-1,434,197</b>	<b>-2.43</b>					

<sup>1</sup> Cost basis values are not provided by the custodian in all cases, and should be independently verified from your original purchase records.

<sup>2</sup> Capital gain/loss data presented here is a general guide and should not be relied upon in the preparation of your tax returns.

<sup>3</sup> Sector information is provided by Morningstar.

<sup>4</sup> An indication of the current dividends and interest vs. the current market value of the holdings. The yield represents the current amount of income that is being generated from the portfolio without liquidating the principal or capital gains on the portfolio. However, the yield will fluctuate daily and current or past performance is not a guarantee of future results.

<sup>5</sup> Net and Gross expense ratio data is obtained from a third party data provider and is believed to be accurate, but has not been verified by Envestnet.

These reports are not to be construed as an offer or the solicitation of an offer to buy or sell securities mentioned herein. Information contained in these reports is based on sources and data believed reliable. The information used to construct these reports was received via a variety of sources. These reports are for informational purposes only. These reports do not take the place of any brokerage statements, any fund company statements, or any tax forms. You are urged to compare this report with the statement you receive from your custodian covering the same period. Differences in positions may occur due to reporting dates used and whether certain assets are not maintained by your custodian. There may also be differences in the investment values shown due to the use of differing valuation sources and methods.

Note regarding loan balance: Your group annuity contract loan balance (if applicable) is not itemized in this report although it is reflected in your Contract Value. For more details regarding your loan balance please review your most recent group annuity statement or contact your Advisor who can assist you in obtaining this information.

# ECTOR COUNTY HOSPITAL DISTRICT Reports: Rollup of All Accounts



Bond Analysis As of Dec 31, 2023

## Overview <sup>1 2</sup>

Total Number of Issues	17
Face Value	50,011,000
Market Value	\$ 48,277,482
Long/Intermediate Term Average S&P Rating <sup>3</sup>	AA+
Long/Intermediate Term Average Moody's Rating <sup>3</sup>	#Aaa

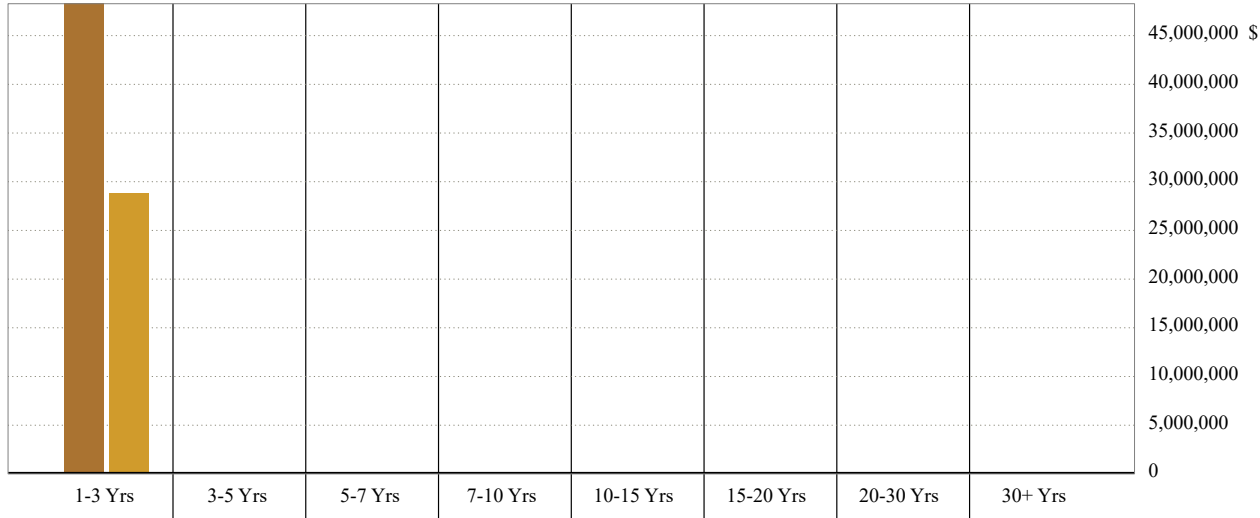
## Statistics <sup>1 2</sup>

Average Bond Yield <sup>4</sup>	1.04 %
Average Yield to Maturity <sup>5</sup>	4.99 %
Average Yield to Worst <sup>6</sup>	4.99 %
Average Coupon	1.00 %
Average Modified Duration (Years) <sup>7</sup>	0.91
Average Effective Duration (Years) <sup>8</sup>	0.90
Average Duration to Worst <sup>9</sup>	0.91
Average Convexity (par) <sup>10</sup>	0.02

Bond Analysis As of Dec 31, 2023

**Bond Maturity vs. Call Date Distribution**

Maturity | Call Date

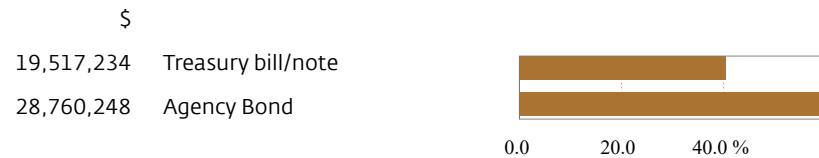


Period	Bond Maturity	Total %	Callable	Total %
1 to 3 Years	\$ 48,277,482	100.00 %	\$ 28,760,248	59.57 %

**Bond Coupon Concentration <sup>11</sup>**



**Bond Distribution by Type <sup>112</sup>**



# ECTOR COUNTY HOSPITAL DISTRICT Reports: Rollup of All Accounts



Bond Analysis As of Dec 31, 2023

## Bond Distribution by S&P Rating <sup>1 13 14</sup>



## Bond Distribution by Moody Rating <sup>1 15 14</sup>



These reports are not to be construed as an offer or the solicitation of an offer to buy or sell securities mentioned herein. Information contained in these reports is based on sources and data believed reliable. The information used to construct these reports was received via a variety of sources. These reports are for informational purposes only. These reports do not take the place of any brokerage statements, any fund company statements, or any tax forms. You are urged to compare this report with the statement you receive from your custodian covering the same period. Differences in positions may occur due to reporting dates used and whether certain assets are not maintained by your custodian. There may also be differences in the investment values shown due to the use of differing valuation sources and methods.

- 1 Bond type, statistics and rating information is provided by Refinitiv.
- 2 Data is weighted and calculated, if information is available on at least 50% of holdings in total bond market value. If information is available on less than 50%, the data is shown as 'n/a'.
- 3 Average credit quality gives a snapshot of the portfolio's overall credit quality. It is an average of each bond's credit rating, adjusted for its relative weighting in the portfolio. Bonds with one year to maturity at the time of issuance are considered cash and are not include in the Average Credit ratings.
- 4 Average Bond Yield is an indication of the interest earned vs. the current market value of the holdings. The yield represents the current amount of income that is being generated from the portfolio without liquidating the principal or capital gains on the portfolio. The Average Bond Yield will fluctuate daily and current or past performance is not a guarantee of future results.
- 5 Average Yield to Maturity is the yield of the bonds taking into account the price discount or premium over face value. It is calculated with the cash-flow assumption that the instruments trade to maturity and is averaged with the corresponding weights of the constituent bonds.
- 6 Average Yield To Worst is an arithmetic average of the Daily Yield To Worst which is the lowest amount an investor could earn if the bond is purchased at the current price and held until the bond matures or is called.
- 7 Average Modified Duration is a measurement of change in the value of a bond to a change in interest rates; it determines the effect a 100 basis point (1%) change in interest rates will have on the price of the bond. It is calculated with the cash-flow assumption that the instrument trades to maturity and is averaged with the corresponding weights of the constituent bonds.
- 8 Average Effective Duration is a simulated measure of duration which measures change in price for given change in rates. It is calculated using an option based model that accounts for embedded options and is averaged with the corresponding weights of the constituent bonds.
- 9 Average Duration to Worst represents the percentage change in value per unit shift in the yield curve. It is calculated using certain cash flow assumptions and is averaged with the corresponding weights of the constituent bonds.
- 10 Convexity is the measure of the sensitivity of a bond's price to a change in yield. A high convexity bond is more sensitive to changes in interest rates and should consequently witness larger fluctuations in price when interest rates move. The opposite is true of low convexity bonds, whose prices don't fluctuate as much when interest rates change. Average convexity is calculated using certain cash flow assumptions and is averaged with the corresponding weights of the constituent bonds.
- 11 The Group By Bond Coupon Concentration Holdings Report includes only Bonds Holdings.
- 12 The Group By Bond Distribution by Type Holdings Report includes only Bonds Holdings.
- 13 The Group By Bond Distribution by S&P Rating Holdings Report includes only Bonds Holdings.
- 14 Parent style classifications are provided by Morningstar, Inc. and mapped into one of the style classifications supported on this platform. Sector information is provided by Morningstar. Bond type and rating information is provided by Refinitiv.
- 15 The Group By Bond Distribution by Moody Rating Holdings Report includes only Bonds Holdings.



# ECTOR COUNTY HOSPITAL DISTRICT

Investment Portfolio  
December 31, 2023

Charles Brown, Jarrod Patterson  
Momentum Independent Network

*All prices and values reflected in this report are captured from the current Hilltop Securities statements.*

*"This report is given as a courtesy to our clients. Hilltop Securities makes no warranties as to the completeness or accuracy of this information and specifically disclaims any liability arising from your use or reliance on this information. Hilltop Securities does not offer tax advice. You are solely responsible for the accuracy of cost basis and gain/loss information reported to tax authorities."*

**ECTOR COUNTY HOSPITAL DISTRICT**  
**December 31, 2023**

**Yield Summary**

<b>Sector</b>	<b>Cost Basis</b>	<b>Weighted Avg Yield</b>	<b>Market Value</b>	<b>Unrealized Gain/Loss</b>
Treasuries/Agencies/CDs	\$ 50,642,840	1.67%	\$ 49,208,754	\$ -1,434,085
Money Market/Cash	\$ 8,351,462	4.96%	\$ 8,351,350	\$ -112
<b>Total</b>	<b>\$ 58,994,302</b>	<b>2.14%</b>	<b>\$ 57,560,104</b>	<b>\$ -1,434,197</b>

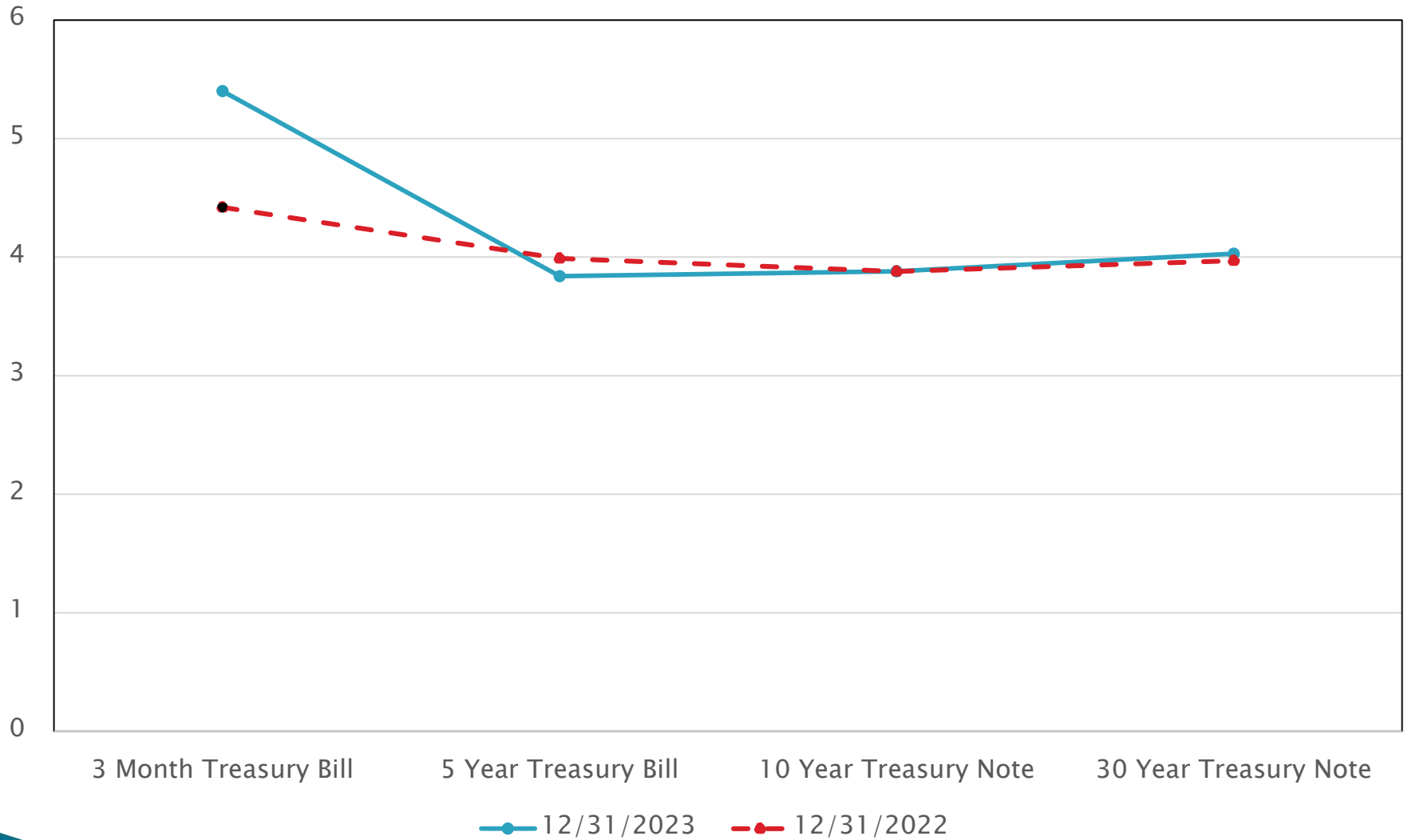
	<b>12/31/2023</b>	<b>12/31/2022</b>
<b>3 MONTH TREASURY BILL</b>	5.40%	4.42%
<b>5 YEAR TREASURY BILL</b>	3.84%	3.99%
<b>10 YEAR TREASURY NOTE</b>	3.88%	3.88%
<b>30 YEAR TREASURY NOTE</b>	4.03%	3.97%

The information is based on data received. Information supporting the recommendation is enclosed.

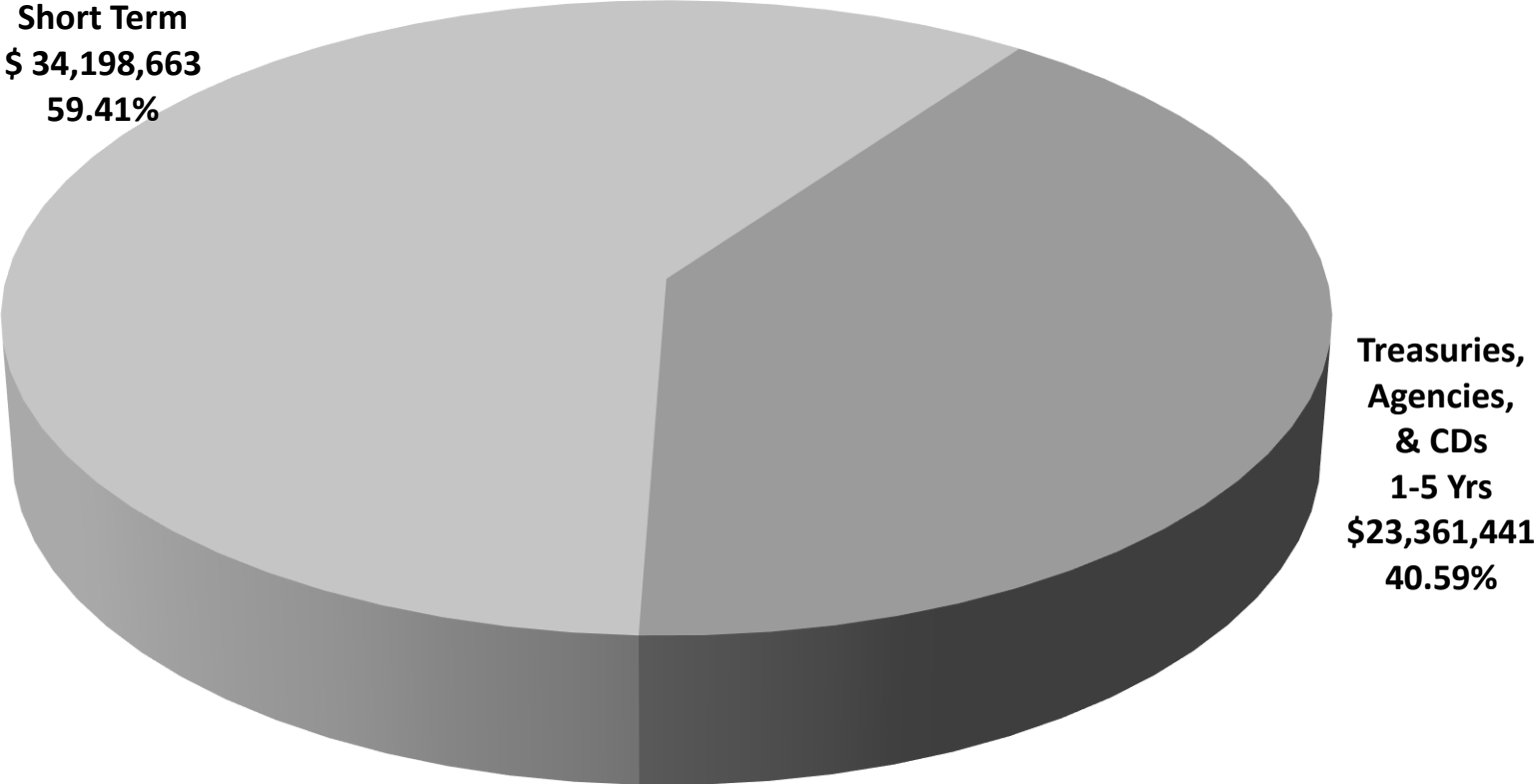
Mutual funds, ETFs and variable products are sold by prospectus. Please consider the investment objectives, risks, charges, and expenses of the investment company carefully before investing. The prospectus contains this and other information about the investment company. Prospectuses may be obtained from the investment company or from your registered representative. Please read the prospectus carefully before investing. Investors should consider their individual investment time horizon and income tax brackets, both current and anticipated, when making an investment decision. ETFs trade like a stock and may trade for less than their net asset value. Asset allocation and Diversification does not ensure a profit and may not protect against loss in declining markets.



# Yield Curve



# Asset Distribution by Market Value



**Charles Brown and Jarrod Patterson,  
Financial Consultants  
600 Strada Circle Suite 210  
Mansfield, TX 76063  
979-249-2545**

This information is provided for informational purposes only and as a courtesy to the customer and may include assets that the firm does not hold on behalf of the customer and which are not included on the firm's books and records.

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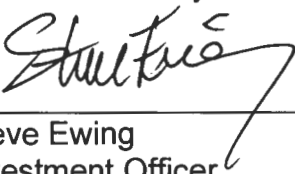


**MEMORANDUM**

TO: Russell Tippin, President and Chief Executive Officer  
FROM: Steve Ewing, Chief Financial Officer  
RE: **Quarterly Investment Report – First Quarter 2024**  
DATE: February 6, 2024

The Investment Report of Ector County Hospital District for the first quarter ended December 31, 2023, will be presented at the Finance Committee meeting February 6, 2024. This report was prepared to provide the Hospital President and Chief Financial Officer and Board of Directors information as required under the Public Funds Investment Act. Investments purchased during the first quarter of fiscal 2024 met the requirements of the Investment Policy and the Public Funds Investment Act.

To the best of my knowledge, as of December 31, 2023, the investment portfolio is in compliance with the Public Funds Investment Act and with the District's Investment Policy.

  
\_\_\_\_\_  
Steve Ewing  
Investment Officer

**ECTOR COUNTY HOSPITAL DISTRICT  
MONTHLY STATISTICAL REPORT  
DECEMBER 2023**

	CURRENT MONTH					YEAR-TO-DATE				
	BUDGET			PRIOR YEAR		BUDGET			PRIOR YEAR	
	ACTUAL	AMOUNT	VAR.%	AMOUNT	VAR.%	ACTUAL	AMOUNT	VAR.%	AMOUNT	VAR.%
<b><u>Hospital InPatient Admissions</u></b>										
Acute / Adult	1,184	1,013	16.9%	1,169	1.3%	3,414	3,087	10.6%	3,178	7.4%
Neonatal ICU (NICU)	22	25	-12.0%	28	-21.4%	66	75	-12.0%	85	-22.4%
<b>Total Admissions</b>	<b>1,206</b>	<b>1,038</b>	<b>16.2%</b>	<b>1,197</b>	<b>0.8%</b>	<b>3,480</b>	<b>3,162</b>	<b>10.1%</b>	<b>3,263</b>	<b>6.7%</b>
<b><u>Patient Days</u></b>										
Adult & Pediatric	4,554	3,995	14.0%	4,590	-0.8%	12,904	12,173	6.0%	12,384	4.2%
ICU	472	410	15.1%	484	-2.5%	1,329	1,250	6.3%	1,323	0.5%
CCU	461	376	22.6%	415	11.1%	1,313	1,146	14.6%	1,185	10.8%
NICU	256	401	-36.2%	440	-41.8%	835	1,205	-30.7%	1,396	-40.2%
<b>Total Patient Days</b>	<b>5,743</b>	<b>5,182</b>	<b>10.8%</b>	<b>5,929</b>	<b>-3.1%</b>	<b>16,381</b>	<b>15,774</b>	<b>3.8%</b>	<b>16,288</b>	<b>0.6%</b>
Observation (Obs) Days	662	485	36.5%	313	111.5%	1,938	1,478	31.1%	966	100.6%
Nursery Days	278	243	14.4%	323	-13.9%	913	741	23.2%	866	5.4%
<b>Total Occupied Beds / Bassinets</b>	<b>6,683</b>	<b>5,910</b>	<b>13.1%</b>	<b>6,565</b>	<b>1.8%</b>	<b>19,232</b>	<b>17,993</b>	<b>6.9%</b>	<b>18,120</b>	<b>6.1%</b>
<b><u>Average Length of Stay (ALOS)</u></b>										
Acute / Adult & Pediatric	4.63	4.72	-1.8%	4.70	-1.3%	4.55	4.72	-3.5%	4.69	-2.8%
NICU	11.64	16.04	-27.5%	15.71	-26.0%	12.65	16.07	-21.3%	16.42	-23.0%
<b>Total ALOS</b>	<b>4.76</b>	<b>4.99</b>	<b>-4.6%</b>	<b>4.95</b>	<b>-3.9%</b>	<b>4.71</b>	<b>4.99</b>	<b>-5.6%</b>	<b>4.99</b>	<b>-5.7%</b>
Acute / Adult & Pediatric w/o OB	5.33			5.71	-6.7%	5.35			5.77	-7.3%
<b>Average Daily Census</b>	<b>185.3</b>	<b>167.2</b>	<b>10.8%</b>	<b>191.3</b>	<b>-3.1%</b>	<b>178.1</b>	<b>171.5</b>	<b>3.8%</b>	<b>177.0</b>	<b>0.6%</b>
<b>Hospital Case Mix Index (CMI)</b>	<b>1.7146</b>	<b>1.7500</b>	<b>-2.0%</b>	<b>1.6929</b>	<b>1.3%</b>	<b>1.6885</b>	<b>1.7500</b>	<b>-3.5%</b>	<b>1.7007</b>	<b>-0.7%</b>
<b>CMI Adjusted LOS</b>	<b>2.78</b>	<b>2.85</b>	<b>-2.6%</b>	<b>2.93</b>	<b>-5.1%</b>	<b>2.79</b>	<b>2.85</b>	<b>-2.2%</b>	<b>2.94</b>	<b>-5.0%</b>
<b><u>Medicare</u></b>										
Admissions	491	391	25.6%	439	11.8%	1,356	1,194	13.6%	1,163	16.6%
Patient Days	2,703	2,199	22.9%	2,545	6.2%	7,420	6,702	10.7%	6,622	12.1%
Average Length of Stay	5.51	5.62	-2.1%	5.80	-5.0%	5.47	5.61	-2.5%	5.69	-3.9%
Case Mix Index	2.0599	2.0200	2.0%	1.9022	8.3%	1.9971	2.0200	-1.1%	1.9754	1.1%
<b><u>Medicaid</u></b>										
Admissions	124	132	-6.1%	146	-15.1%	373	402	-7.2%	442	-15.6%
Patient Days	454	627	-27.6%	690	-34.2%	1,495	1,909	-21.7%	2,113	-29.2%
Average Length of Stay	3.66	4.75	-22.9%	4.73	-22.5%	4.01	4.75	-15.6%	4.78	-16.2%
Case Mix Index	1.1050	1.1800	-6.4%	1.1489	-3.8%	1.0588	1.1800	-10.3%	1.1389	-7.0%
<b><u>Commercial</u></b>										
Admissions	365	286	27.6%	328	11.3%	1,070	871	22.8%	872	22.7%
Patient Days	1,467	1,284	14.3%	1,409	4.1%	4,378	3,910	12.0%	3,944	11.0%
Average Length of Stay	4.02	4.49	-10.5%	4.30	-6.4%	4.09	4.49	-8.9%	4.52	-9.5%
Case Mix Index	1.5238	1.7000	-10.4%	1.6174	-5.8%	1.5912	1.7000	-6.4%	1.6010	-0.6%
<b><u>Self Pay</u></b>										
Admissions	203	197	3.0%	247	-17.8%	592	599	-1.2%	672	-11.9%
Patient Days	967	892	8.4%	1,081	-10.5%	2,614	2,713	-3.6%	2,947	-11.3%
Average Length of Stay	4.76	4.53	5.2%	4.38	8.8%	4.42	4.53	-2.5%	4.39	0.7%
Case Mix Index	1.5749	1.5800	-0.3%	1.6174	-2.6%	1.5000	1.5800	-5.1%	1.6037	-6.5%
<b><u>All Other</u></b>										
Admissions	23	32	-28.1%	37	-37.8%	89	96	-7.3%	114	-21.9%
Patient Days	152	181	-16.0%	204	-25.5%	474	543	-12.7%	662	-28.4%
Average Length of Stay	6.61	5.66	16.8%	5.51	19.9%	5.33	5.66	-5.8%	5.81	-8.3%
Case Mix Index	2.2696	2.2500	0.9%	2.3772	-4.5%	2.0266	2.2500	-9.9%	2.3326	-13.1%
<b><u>Radiology</u></b>										
InPatient	4,998	3,981	25.5%	4,449	12.3%	13,777	12,116	13.7%	12,002	14.8%
OutPatient	7,652	7,982	-4.1%	7,120	7.5%	24,515	24,321	0.8%	22,413	9.4%
<b><u>Cath Lab</u></b>										
InPatient	723	591	22.3%	667	8.4%	2,095	1,802	16.3%	1,787	17.2%
OutPatient	416	456	-8.8%	418	-0.5%	1,418	1,391	1.9%	1,443	-1.7%
<b><u>Laboratory</u></b>										
InPatient	81,856	69,578	17.6%	79,350	3.2%	234,902	211,793	10.9%	217,161	8.2%
OutPatient	66,311	66,146	0.2%	64,931	2.1%	203,797	201,556	1.1%	195,431	4.3%
<b><u>Other</u></b>										
Deliveries	176	167	5.4%	214	-17.8%	558	509	9.6%	588	-5.1%
<b><u>Surgical Cases</u></b>										
InPatient	232	240	-3.3%	243	-4.5%	668	731	-8.6%	690	-3.2%
OutPatient	490	543	-9.8%	504	-2.8%	1,562	1,655	-5.6%	1,584	-1.4%
<b>Total Surgical Cases</b>	<b>722</b>	<b>783</b>	<b>-7.8%</b>	<b>747</b>	<b>-3.3%</b>	<b>2,230</b>	<b>2,386</b>	<b>-6.5%</b>	<b>2,274</b>	<b>-1.9%</b>
<b><u>GI Procedures (Endo)</u></b>										
InPatient	129	139	-7.2%	144	-10.4%	413	423	-2.4%	365	13.2%
OutPatient	208	281	-26.0%	199	4.5%	608	857	-29.1%	555	9.5%
<b>Total GI Procedures</b>	<b>337</b>	<b>420</b>	<b>-19.8%</b>	<b>343</b>	<b>-1.7%</b>	<b>1,021</b>	<b>1,280</b>	<b>-20.2%</b>	<b>920</b>	<b>11.0%</b>

**ECTOR COUNTY HOSPITAL DISTRICT  
MONTHLY STATISTICAL REPORT  
DECEMBER 2023**

	CURRENT MONTH					YEAR-TO-DATE				
	BUDGET			PRIOR YEAR		BUDGET			PRIOR YEAR	
	ACTUAL	AMOUNT	VAR. %	AMOUNT	VAR. %	ACTUAL	AMOUNT	VAR. %	AMOUNT	VAR. %
<b>OutPatient (O/P)</b>										
Emergency Room Visits	5,191	4,756	9.1%	5,531	-6.1%	15,890	14,494	9.6%	16,327	-2.7%
Observation Days	662	485	36.5%	313	111.5%	1,938	1,478	31.1%	966	100.6%
Other O/P Occasions of Service	19,728	19,883	-0.8%	19,779	-0.3%	60,976	60,587	0.6%	60,370	1.0%
<b>Total O/P Occasions of Svc.</b>	<b>25,581</b>	<b>25,124</b>	<b>1.8%</b>	<b>25,623</b>	<b>-0.2%</b>	<b>78,804</b>	<b>76,559</b>	<b>2.9%</b>	<b>77,663</b>	<b>1.5%</b>
<b>Hospital Operations</b>										
Manhours Paid	286,578	263,089	8.9%	276,994	3.5%	850,863	795,711	6.9%	820,603	3.7%
FTE's	1,617.8	1,485.2	8.9%	1,563.7	3.5%	1,618.5	1,513.6	6.9%	1,560.9	3.7%
Adjusted Patient Days	10,662	10,330	3.2%	10,782	-1.1%	31,529	31,445	0.3%	31,055	1.5%
Hours / Adjusted Patient Day	26.88	25.47	5.5%	25.69	4.6%	26.99	25.30	6.6%	26.43	2.1%
Occupancy - Actual Beds	53.1%	47.9%	10.8%	53.7%	-1.2%	51.0%	49.1%	3.8%	50.7%	0.6%
FTE's / Adjusted Occupied Bed	4.7	4.5	5.5%	4.5	4.6%	4.7	4.4	6.7%	4.6	2.1%
<b>Family Health Clinic - Clements</b>										
Total Medical Visits	359	661	-45.7%	721	-50.2%	1,574	2,015	-21.9%	2,029	-22.4%
Manhours Paid	2,035	2,142	-5.0%	1,793	13.5%	6,238	6,528	-4.4%	6,203	0.6%
FTE's	11.5	12.1	-5.0%	10.1	13.5%	11.9	12.4	-4.4%	11.8	0.6%
<b>Family Health Clinic - West University</b>										
Total Medical Visits	606	633	-4.3%	630	-3.8%	1,884	1,929	-2.3%	1,901	-0.9%
Manhours Paid	1,184	1,159	2.2%	1,141	3.8%	3,699	3,533	4.7%	3,488	6.1%
FTE's	6.7	6.5	2.2%	6.4	3.8%	7.0	6.7	4.7%	6.6	6.1%
<b>Family Health Clinic - JBS</b>										
Total Medical Visits	864	702	23.1%	517	67.1%	2,483	2,140	16.0%	1,568	58.4%
Manhours Paid	1,605	1,584	1.3%	1,243	29.1%	4,828	4,828	0.0%	3,912	23.4%
FTE's	9.1	8.9	1.3%	7.0	29.1%	9.2	9.2	0.0%	7.4	23.4%
<b>Family Health Clinic - Womens</b>										
Total Medical Visits	1,374	1,888	-27.2%	-	0.0%	4,779	5,424	-11.9%	-	0.0%
Manhours Paid	2,987	4,533	-34.1%	-	0.0%	9,815	13,023	-24.6%	-	0.0%
FTE's	16.9	25.6	-34.1%	-	0.0%	18.7	24.8	-24.6%	-	0.0%
<b>Total ECHD Operations</b>										
Total Admissions	1,206	1,038	16.2%	1,197	0.8%	3,480	3,162	10.1%	3,263	6.7%
Total Patient Days	5,743	5,182	10.8%	5,929	-3.1%	16,381	15,774	3.8%	16,288	0.6%
Total Patient and Obs Days	6,405	5,667	13.0%	6,242	2.6%	18,319	17,252	6.2%	17,254	6.2%
Total FTE's	1,661.9	1,538.3	8.0%	1,587.3	4.7%	1,665.2	1,566.7	6.3%	1,586.8	4.9%
FTE's / Adjusted Occupied Bed	4.8	4.6	4.7%	4.6	5.9%	4.9	4.6	6.0%	4.7	3.4%
<b>Total Adjusted Patient Days</b>	<b>10,662</b>	<b>10,330</b>	<b>3.2%</b>	<b>10,782</b>	<b>-1.1%</b>	<b>31,529</b>	<b>31,445</b>	<b>0.3%</b>	<b>31,055</b>	<b>1.5%</b>
<b>Hours / Adjusted Patient Day</b>	<b>27.61</b>	<b>26.38</b>	<b>4.7%</b>	<b>26.08</b>	<b>5.9%</b>	<b>27.77</b>	<b>26.19</b>	<b>6.0%</b>	<b>26.86</b>	<b>3.4%</b>
<b>Outpatient Factor</b>	<b>1.8565</b>	<b>1.9934</b>	<b>-6.9%</b>	<b>1.8186</b>	<b>2.1%</b>	<b>1.9247</b>	<b>1.9935</b>	<b>-3.4%</b>	<b>1.9066</b>	<b>0.9%</b>
<b>Blended O/P Factor</b>	<b>2.0402</b>	<b>2.2292</b>	<b>-8.5%</b>	<b>2.0443</b>	<b>-0.2%</b>	<b>2.1203</b>	<b>2.2240</b>	<b>-4.7%</b>	<b>2.1446</b>	<b>-1.1%</b>
<b>Total Adjusted Admissions</b>	<b>2,239</b>	<b>2,069</b>	<b>8.2%</b>	<b>2,177</b>	<b>2.9%</b>	<b>6,698</b>	<b>6,303</b>	<b>6.3%</b>	<b>6,221</b>	<b>7.7%</b>
<b>Hours / Adjusted Admisssion</b>	<b>130.15</b>	<b>129.51</b>	<b>0.5%</b>	<b>129.17</b>	<b>0.8%</b>	<b>129.24</b>	<b>128.60</b>	<b>0.5%</b>	<b>134.09</b>	<b>-3.6%</b>
<b>FTE's - Hospital Contract</b>	<b>50.3</b>	<b>41.0</b>	<b>22.9%</b>	<b>43.2</b>	<b>16.5%</b>	<b>50.3</b>	<b>42.0</b>	<b>19.7%</b>	<b>50.4</b>	<b>-0.2%</b>
<b>FTE's - Mgmt Services</b>	<b>52.2</b>	<b>42.8</b>	<b>22.1%</b>	<b>42.2</b>	<b>23.6%</b>	<b>52.9</b>	<b>42.8</b>	<b>23.7%</b>	<b>40.3</b>	<b>31.4%</b>
<b>Total FTE's (including Contract)</b>	<b>1,764.4</b>	<b>1,622.1</b>	<b>8.8%</b>	<b>1,672.7</b>	<b>5.5%</b>	<b>1,768.4</b>	<b>1,651.4</b>	<b>7.1%</b>	<b>1,677.4</b>	<b>5.4%</b>
<b>Total FTE'S per Adjusted Occupied Bed (including Contract)</b>	<b>5.1</b>	<b>4.9</b>	<b>5.4%</b>	<b>4.8</b>	<b>6.7%</b>	<b>5.2</b>	<b>4.8</b>	<b>6.8%</b>	<b>5.0</b>	<b>3.9%</b>
<b>ProCare FTEs</b>	<b>199.7</b>	<b>227.0</b>	<b>-12.0%</b>	<b>218.5</b>	<b>-8.6%</b>	<b>201.6</b>	<b>227.2</b>	<b>-11.3%</b>	<b>218.0</b>	<b>-7.5%</b>
<b>TraumaCare FTEs</b>	<b>9.4</b>	<b>9.6</b>	<b>-2.6%</b>	<b>9.2</b>	<b>1.7%</b>	<b>9.4</b>	<b>9.5</b>	<b>-0.4%</b>	<b>9.4</b>	<b>0.5%</b>
<b>Total System FTEs</b>	<b>1,973.5</b>	<b>1,858.7</b>	<b>6.2%</b>	<b>1,900.5</b>	<b>3.8%</b>	<b>1,979.4</b>	<b>1,888.1</b>	<b>4.8%</b>	<b>1,904.8</b>	<b>3.9%</b>
<b>Urgent Care Visits</b>										
JBS Clinic	1,670	1,502	11.2%	1,818	-8.1%	4,489	4,577	-1.9%	5,619	-20.1%
West University	1,233	1,010	22.1%	1,231	0.2%	3,145	3,078	2.2%	3,504	-10.2%
<b>Total Urgent Care Visits</b>	<b>2,903</b>	<b>2,512</b>	<b>15.6%</b>	<b>3,049</b>	<b>-4.8%</b>	<b>7,634</b>	<b>7,655</b>	<b>-0.3%</b>	<b>9,123</b>	<b>-16.3%</b>
<b>Retail Clinic Visits</b>										
Retail Clinic	126	409	-69.2%	313	-59.7%	247	1,007	-75.5%	1,030	-76.0%

**ECTOR COUNTY HOSPITAL DISTRICT  
BALANCE SHEET - BLENDED  
DECEMBER 2023**

	CURRENT YEAR	PRIOR FISCAL YEAR END			CURRENT YEAR CHANGE
		HOSPITAL UNAUDITED	PRO CARE UNAUDITED	TRAUMA CARE UNAUDITED	
<b>ASSETS</b>					
<b>CURRENT ASSETS:</b>					
Cash and Cash Equivalents	\$ 17,853,676	\$ 16,567,281	\$ 4,400	\$ -	\$ 1,281,995
Investments	57,691,355	56,460,783	-	-	1,230,572
Patient Accounts Receivable - Gross	252,747,526	247,541,752	29,112,091	2,371,321	(26,277,639)
Less: 3rd Party Allowances	(160,339,915)	(154,534,985)	(16,400,026)	(1,845,686)	12,440,783
Bad Debt Allowance	<u>(53,262,282)</u>	<u>(59,928,158)</u>	<u>(8,542,555)</u>	<u>(400,000)</u>	<u>15,608,432</u>
Net Patient Accounts Receivable	39,145,330	33,078,609	4,169,509	125,635	1,771,576
Taxes Receivable	11,755,805	13,086,087	-	-	(1,330,282)
Accounts Receivable - Other	7,827,455	9,070,588	35,402	-	(1,278,534)
Inventories	10,298,054	9,697,439	477,883	-	122,732
Prepaid Expenses	<u>3,723,933</u>	<u>4,096,117</u>	<u>112,263</u>	<u>37,639</u>	<u>(522,086)</u>
Total Current Assets	<u>148,295,607</u>	<u>142,056,903</u>	<u>4,799,457</u>	<u>163,274</u>	<u>1,275,973</u>
<b>CAPITAL ASSETS:</b>					
Property and Equipment	514,861,690	514,690,689	399,150	-	(228,149)
Construction in Progress	<u>6,274,562</u>	<u>4,378,451</u>	<u>-</u>	<u>-</u>	<u>1,896,111</u>
	521,136,252	519,069,140	399,150	-	1,667,962
Less: Accumulated Depreciation and Amortization	<u>(364,115,043)</u>	<u>(359,843,697)</u>	<u>(321,730)</u>	<u>-</u>	<u>(3,949,615)</u>
Total Capital Assets	<u>157,021,210</u>	<u>159,225,443</u>	<u>77,420</u>	<u>-</u>	<u>(2,281,653)</u>
<b>LEASE ASSETS</b>					
Leased Assets	53,343	53,343	-	-	0
Less Accumulated Amortization Lease Assets	<u>(5,443)</u>	<u>(4,355)</u>	<u>-</u>	<u>-</u>	<u>(1,089)</u>
Total Lease Assets	<u>47,899</u>	<u>48,988</u>	<u>-</u>	<u>-</u>	<u>(1,089)</u>
<b>SUBSCRIPTION ASSETS</b>					
Subscription Assets	11,891,971	11,891,971	-	-	0
Less Accumulated Amortization Subscription Assets	<u>(2,505,451)</u>	<u>(2,132,109)</u>	<u>-</u>	<u>-</u>	<u>(373,342)</u>
Total Subscription Assets	<u>9,386,521</u>	<u>9,759,863</u>	<u>-</u>	<u>-</u>	<u>(373,342)</u>
LT Lease Receivable	7,145,239	7,245,067	-	-	(99,828)
<b>RESTRICTED ASSETS:</b>					
Restricted Assets Held by Trustee	4,896	4,896	-	-	-
Restricted Assets Held in Endowment	6,340,215	6,192,628	-	-	147,587
Restricted TPC, LLC	1,668,033	1,668,033	-	-	-
Restricted MCH West Texas Services	2,278,086	2,289,594	-	-	(11,508)
Pension, Deferred Outflows of Resources	19,214,396	19,214,396	-	-	-
Assets whose use is Limited	<u>245,415</u>	<u>-</u>	<u>239,765</u>	<u>-</u>	<u>5,650</u>
TOTAL ASSETS	<u>\$ 351,647,515</u>	<u>\$ 347,705,810</u>	<u>\$ 5,116,641</u>	<u>\$ 163,274</u>	<u>\$ (1,338,210)</u>
<b>LIABILITIES AND FUND BALANCE</b>					
<b>CURRENT LIABILITIES:</b>					
Current Maturities of Long-Term Debt	\$ 2,335,626	\$ 2,331,892	\$ -	\$ -	\$ 3,734
Self-Insurance Liability - Current Portion	3,651,369	3,651,369	-	-	-
Current Portion of Lease Liabilities	3,531	3,492	-	-	39
Current Portion of Subscription Liabilities	1,380,061	1,394,632	-	-	(14,571)
Accounts Payable	30,214,555	28,496,986	179,825	(122,858)	1,660,601
A/R Credit Balances	1,712,503	1,728,310	-	-	(15,807)
Accrued Interest	492,574	316,680	-	-	175,894
Accrued Salaries and Wages	13,324,499	6,721,029	4,737,246	243,053	1,623,171
Accrued Compensated Absences	4,310,519	4,623,356	-	-	(312,837)
Due to Third Party Payors	1,085,299	1,085,299	-	-	-
Deferred Revenue	<u>(1,031,309)</u>	<u>329,369</u>	<u>232,401</u>	<u>-</u>	<u>(1,593,079)</u>
Total Current Liabilities	<u>57,479,228</u>	<u>50,682,414</u>	<u>5,149,472</u>	<u>120,195</u>	<u>1,647,341</u>
ACCRUED POST RETIREMENT BENEFITS	52,024,436	54,025,950	-	-	(2,001,514)
LESSOR DEFERRED INFLOWS OF RESOURCES	8,048,946	8,144,265	-	-	(95,319)
SELF-INSURANCE LIABILITIES - Less Current Portion	2,469,073	2,469,073	-	-	-
LEASE LIABILITIES	45,586	46,484	-	-	(898)
SUBSCRIPTION LIABILITIES	7,299,354	8,081,410	-	-	(782,056)
LONG-TERM DEBT - Less Current Maturities	<u>31,166,022</u>	<u>31,456,952</u>	<u>-</u>	<u>-</u>	<u>(290,930)</u>
Total Liabilities	<u>158,532,645</u>	<u>154,906,548</u>	<u>5,149,472</u>	<u>120,195</u>	<u>(1,643,569)</u>
FUND BALANCE	<u>193,114,870</u>	<u>192,799,263</u>	<u>(32,831)</u>	<u>43,079</u>	<u>193,147,701</u>
TOTAL LIABILITIES AND FUND BALANCE	<u>\$ 351,647,515</u>	<u>\$ 347,705,810</u>	<u>\$ 5,116,641</u>	<u>\$ 163,274</u>	<u>\$ (1,338,210)</u>

**ECTOR COUNTY HOSPITAL DISTRICT  
BLENDED OPERATIONS SUMMARY  
DECEMBER 2023**

	CURRENT MONTH					YEAR TO DATE				
	ACTUAL	BUDGET	BUDGET VAR	PRIOR YR	PRIOR YR VAR	ACTUAL	BUDGET	BUDGET VAR	PRIOR YR	PRIOR YR VAR
<b>PATIENT REVENUE</b>										
Inpatient Revenue	\$ 56,780,938	\$ 49,330,121	15.1%	\$ 56,134,885	1.2%	\$ 164,518,051	\$ 149,964,434	9.7%	\$ 155,363,249	5.9%
Outpatient Revenue	59,065,486	60,638,978	-2.6%	58,621,466	0.8%	184,317,271	183,562,267	0.4%	177,832,228	3.6%
<b>TOTAL PATIENT REVENUE</b>	<b>\$ 115,846,424</b>	<b>\$ 109,969,099</b>	<b>5.3%</b>	<b>\$ 114,756,352</b>	<b>0.9%</b>	<b>\$ 348,835,322</b>	<b>\$ 333,526,701</b>	<b>4.6%</b>	<b>\$ 333,195,478</b>	<b>4.7%</b>
<b>DEDUCTIONS FROM REVENUE</b>										
Contractual Adjustments	\$ 74,180,561	\$ 68,762,321	7.9%	\$ 77,294,718	-4.0%	\$ 226,013,159	\$ 208,586,748	8.4%	\$ 212,520,376	6.3%
Policy Adjustments	1,001,901	1,435,400	-30.2%	2,686,350	-62.7%	3,275,062	4,272,107	-23.3%	7,061,076	-53.6%
Uninsured Discount	9,069,564	10,404,383	-12.8%	12,134,614	-25.3%	25,709,784	31,619,127	-18.7%	31,059,946	-17.2%
Indigent	127,584	1,144,261	-88.9%	587,817	-78.3%	1,649,225	3,468,349	-52.4%	2,650,811	-37.8%
Provision for Bad Debts	6,695,267	4,105,054	63.1%	4,279,661	56.4%	19,068,490	12,552,031	51.9%	17,040,628	11.9%
<b>TOTAL REVENUE DEDUCTIONS</b>	<b>\$ 91,074,878</b>	<b>\$ 85,851,419</b>	<b>6.1%</b>	<b>\$ 96,983,160</b>	<b>-6.1%</b>	<b>\$ 275,715,720</b>	<b>\$ 260,498,362</b>	<b>5.8%</b>	<b>\$ 270,332,837</b>	<b>2.0%</b>
	<b>78.62%</b>	<b>78.07%</b>		<b>84.51%</b>		<b>79.04%</b>	<b>78.10%</b>		<b>81.13%</b>	
<b>OTHER PATIENT REVENUE</b>										
Medicaid Supplemental Payments	\$ 1,551,832	\$ 1,551,832	0.0%	\$ 2,094,222	-25.9%	\$ 4,655,496	\$ 4,655,496	0.0%	\$ 6,282,666	-25.9%
DSRIP/CHIRP	1,611,687	1,116,944	44.3%	5,107,149	-68.4%	4,018,451	3,350,832	19.9%	4,748,221	-15.4%
Medicare Meaningful Use Subsidy	-	-	0.0%	-	0.0%	-	-	0.0%	-	0.0%
<b>TOTAL OTHER PATIENT REVENUE</b>	<b>\$ 3,163,519</b>	<b>\$ 2,668,776</b>	<b>18.5%</b>	<b>\$ 7,201,371</b>	<b>-56.1%</b>	<b>\$ 8,673,947</b>	<b>\$ 8,006,328</b>	<b>8.3%</b>	<b>\$ 11,030,887</b>	<b>-21.4%</b>
<b>NET PATIENT REVENUE</b>	<b>\$ 27,935,065</b>	<b>\$ 26,786,456</b>	<b>4.3%</b>	<b>\$ 24,974,563</b>	<b>11.9%</b>	<b>\$ 81,793,549</b>	<b>\$ 81,034,667</b>	<b>0.9%</b>	<b>\$ 73,893,528</b>	<b>10.7%</b>
<b>OTHER REVENUE</b>										
Tax Revenue	\$ 5,831,823	\$ 5,913,914	-1.4%	\$ 7,175,450	-18.7%	\$ 19,789,867	\$ 17,748,548	11.5%	\$ 19,782,381	0.0%
Other Revenue	1,199,513	1,302,110	-7.9%	891,494	34.6%	4,781,587	3,902,346	22.5%	2,706,519	76.7%
<b>TOTAL OTHER REVENUE</b>	<b>\$ 7,031,336</b>	<b>\$ 7,216,024</b>	<b>-2.6%</b>	<b>\$ 8,066,944</b>	<b>-12.8%</b>	<b>\$ 24,571,453</b>	<b>\$ 21,650,894</b>	<b>13.5%</b>	<b>\$ 22,488,900</b>	<b>9.3%</b>
<b>NET OPERATING REVENUE</b>	<b>\$ 34,966,401</b>	<b>\$ 34,002,480</b>	<b>2.8%</b>	<b>\$ 33,041,506</b>	<b>5.8%</b>	<b>\$ 106,365,002</b>	<b>\$ 102,685,561</b>	<b>3.6%</b>	<b>\$ 96,382,429</b>	<b>10.4%</b>
<b>OPERATING EXPENSES</b>										
Salaries and Wages	\$ 14,536,866	\$ 14,461,015	0.5%	\$ 13,699,452	6.1%	\$ 44,326,707	\$ 43,726,046	1.4%	\$ 42,084,437	5.3%
Benefits	2,272,319	2,471,553	-8.1%	3,738,999	-39.2%	6,452,353	6,630,882	-2.7%	10,469,622	-38.4%
Temporary Labor	1,869,725	1,336,247	39.9%	1,208,849	54.7%	5,442,572	4,065,997	33.9%	4,167,271	30.6%
Physician Fees	1,062,564	1,173,902	-9.5%	1,161,026	-8.5%	3,252,307	3,521,706	-7.6%	3,410,191	-4.6%
Texas Tech Support	976,161	954,677	2.3%	861,677	13.3%	2,904,106	2,864,031	1.4%	2,606,933	11.4%
Purchased Services	4,966,543	4,508,637	10.2%	4,627,573	7.3%	13,853,946	13,526,998	2.4%	12,979,815	6.7%
Supplies	6,333,375	5,915,912	7.1%	5,899,523	7.4%	19,838,269	17,890,987	10.9%	16,912,377	17.3%
Utilities	330,950	304,953	8.5%	332,317	-0.4%	1,051,524	912,028	15.3%	1,038,891	1.2%
Repairs and Maintenance	671,648	924,310	-27.3%	867,743	-22.6%	2,235,618	2,773,603	-19.4%	2,911,166	-23.2%
Leases and Rent	98,888	98,931	0.0%	93,945	5.3%	337,747	294,585	14.7%	359,919	-6.2%
Insurance	189,080	190,806	-0.9%	193,191	-2.1%	565,287	572,418	-1.2%	551,898	2.4%
Interest Expense	98,151	93,081	5.4%	70,015	40.2%	299,200	279,549	7.0%	210,344	42.2%
ECHDA	246,496	182,272	35.2%	192,376	28.1%	616,654	546,816	12.8%	619,812	-0.5%
Other Expense	143,614	181,632	-20.9%	623,065	-77.0%	426,838	545,145	-21.7%	873,939	-51.2%
<b>TOTAL OPERATING EXPENSES</b>	<b>\$ 33,796,381</b>	<b>\$ 32,797,928</b>	<b>3.0%</b>	<b>\$ 33,569,751</b>	<b>0.7%</b>	<b>\$ 101,603,128</b>	<b>\$ 98,150,791</b>	<b>3.5%</b>	<b>\$ 99,196,615</b>	<b>2.4%</b>
Depreciation/Amortization	\$ 1,978,543	\$ 1,870,410	5.8%	\$ 1,695,276	16.7%	\$ 5,927,775	\$ 5,587,605	6.1%	\$ 5,086,415	16.5%
(Gain) Loss on Sale of Assets	(1,000)	-	0.0%	(112,644)	-99.1%	(28,000)	-	0.0%	(112,644)	-75.1%
<b>TOTAL OPERATING COSTS</b>	<b>\$ 35,773,924</b>	<b>\$ 34,668,338</b>	<b>3.2%</b>	<b>\$ 35,152,383</b>	<b>1.8%</b>	<b>\$ 107,502,903</b>	<b>\$ 103,738,396</b>	<b>3.6%</b>	<b>\$ 104,170,387</b>	<b>3.2%</b>
<b>NET GAIN (LOSS) FROM OPERATIONS</b>	<b>\$ (807,524)</b>	<b>\$ (665,858)</b>	<b>-21.3%</b>	<b>\$ (2,110,876)</b>	<b>61.7%</b>	<b>\$ (1,137,900)</b>	<b>\$ (1,052,835)</b>	<b>8.1%</b>	<b>\$ (7,787,958)</b>	<b>-85.4%</b>
Operating Margin	-2.31%	-1.96%	17.9%	-6.39%	-63.9%	-1.07%	-1.03%	4.3%	-8.08%	-86.8%
<b>NONOPERATING REVENUE/EXPENSE</b>										
Interest Income	\$ 210,448	\$ 92,032	128.7%	\$ 82,038	156.5%	\$ 511,743	\$ 276,096	85.3%	\$ 239,786	113.4%
Tobacco Settlement	-	-	0.0%	-	0.0%	-	-	0.0%	-	0.0%
Trauma Funds	-	-	0.0%	-	0.0%	-	-	0.0%	-	0.0%
Donations	-	1,820	-100.0%	-	-	(3,000)	5,460	-154.9%	-	-
COVID-19 Stimulus	-	-	0.0%	-	0.0%	-	-	0.0%	-	0.0%
						5,089,075	4,814,319		(2,491,199)	
<b>CHANGE IN NET POSITION BEFORE INVESTMENT ACTIVITY</b>	<b>\$ (597,075)</b>	<b>\$ (572,006)</b>	<b>-4.4%</b>	<b>\$ (2,028,838)</b>	<b>70.6%</b>	<b>\$ (629,158)</b>	<b>\$ (771,279)</b>	<b>18.4%</b>	<b>\$ (7,548,172)</b>	<b>91.7%</b>
Unrealized Gain/(Loss) on Investments	\$ 396,810	\$ -	0.0%	\$ 204,479	94.1%	\$ 924,959	\$ -	0.0%	\$ 380,748	142.9%
Investment in Subsidiaries	14,238	149,961	-90.5%	(2,997)	-575.0%	9,558	449,883	-97.9%	125,191	-92.4%
<b>CHANGE IN NET POSITION</b>	<b>\$ (186,027)</b>	<b>\$ (422,045)</b>	<b>55.9%</b>	<b>\$ (1,827,357)</b>	<b>89.8%</b>	<b>\$ 305,359</b>	<b>\$ (321,396)</b>	<b>195.0%</b>	<b>\$ (7,042,233)</b>	<b>104.3%</b>



**ECTOR COUNTY HOSPITAL DISTRICT  
HOSPITAL OPERATIONS SUMMARY  
DECEMBER 2023**

	CURRENT MONTH					YEAR TO DATE				
	ACTUAL	BUDGET	BUDGET VAR	PRIOR YR	PRIOR YR VAR	ACTUAL	BUDGET	BUDGET VAR	PRIOR YR	PRIOR YR VAR
<b>PATIENT REVENUE</b>										
Inpatient Revenue	\$ 56,780,938	\$ 49,330,121	15.1%	\$ 56,134,885	1.2%	\$ 164,518,051	\$ 149,964,434	9.7%	\$ 155,363,249	5.9%
Outpatient Revenue	48,632,031	49,003,160	-0.8%	45,949,528	5.8%	152,131,784	148,984,726	2.1%	140,858,549	8.0%
<b>TOTAL PATIENT REVENUE</b>	<b>\$ 105,412,969</b>	<b>\$ 98,333,281</b>	<b>7.2%</b>	<b>\$ 102,084,413</b>	<b>3.3%</b>	<b>\$ 316,649,835</b>	<b>\$ 298,949,160</b>	<b>5.9%</b>	<b>\$ 296,221,798</b>	<b>6.9%</b>
<b>DEDUCTIONS FROM REVENUE</b>										
Contractual Adjustments	\$ 68,508,333	\$ 62,803,449	9.1%	\$ 71,246,878	-3.8%	\$ 209,596,260	\$ 190,909,438	9.8%	\$ 194,093,756	8.0%
Policy Adjustments	54,645	478,634	-88.6%	1,051,809	-94.8%	140,828	1,457,768	-90.3%	3,844,625	-96.3%
Uninsured Discount	8,962,718	9,978,384	-10.2%	10,884,546	-17.7%	25,007,329	30,353,777	-17.6%	29,112,958	-14.1%
Indigent Care	134,001	1,128,557	-88.1%	565,988	-76.3%	1,619,963	3,424,444	-52.7%	2,621,341	-38.2%
Provision for Bad Debts	5,765,075	3,248,238	77.5%	3,218,700	79.1%	16,146,405	9,865,983	63.7%	13,809,477	16.9%
<b>TOTAL REVENUE DEDUCTIONS</b>	<b>\$ 83,424,772</b>	<b>\$ 77,637,262</b>	<b>7.5%</b>	<b>\$ 86,967,921</b>	<b>-4.1%</b>	<b>\$ 252,510,785</b>	<b>\$ 236,011,410</b>	<b>7.0%</b>	<b>\$ 243,482,158</b>	<b>3.7%</b>
			<b>79.14%</b>					<b>78.95%</b>		<b>82.20%</b>
<b>OTHER PATIENT REVENUE</b>										
Medicaid Supplemental Payments	\$ 1,551,832	\$ 1,551,832	0.0%	\$ 2,094,222	-25.9%	\$ 4,655,496	\$ 4,655,496	0.0%	\$ 6,282,666	-25.9%
DSRIP/CHIRP	1,611,687	1,116,944	44.3%	5,107,149	-68.4%	4,018,451	3,350,832	19.9%	4,748,221	-15.4%
Medicare Meaningful Use Subsidy	-	-	0.0%	-	0.0%	-	-	0.0%	-	0.0%
<b>TOTAL OTHER PATIENT REVENUE</b>	<b>\$ 3,163,519</b>	<b>\$ 2,668,776</b>	<b>18.5%</b>	<b>\$ 7,201,371</b>	<b>-56.1%</b>	<b>\$ 8,673,947</b>	<b>\$ 8,006,328</b>	<b>8.3%</b>	<b>\$ 11,030,887</b>	<b>-21.4%</b>
<b>NET PATIENT REVENUE</b>	<b>\$ 25,151,715</b>	<b>\$ 23,364,795</b>	<b>7.6%</b>	<b>\$ 22,317,863</b>	<b>12.7%</b>	<b>\$ 72,812,997</b>	<b>\$ 70,944,078</b>	<b>2.6%</b>	<b>\$ 63,770,527</b>	<b>14.2%</b>
<b>OTHER REVENUE</b>										
Tax Revenue	\$ 5,831,823	\$ 5,913,914	-1.4%	\$ 7,175,450	-18.7%	\$ 19,789,867	\$ 17,748,548	11.5%	\$ 19,782,381	0.0%
Other Revenue	1,014,481	1,080,118	-6.1%	726,105	39.7%	4,121,752	3,238,120	27.3%	2,148,684	91.8%
<b>TOTAL OTHER REVENUE</b>	<b>\$ 6,846,304</b>	<b>\$ 6,994,032</b>	<b>-2.1%</b>	<b>\$ 7,901,554</b>	<b>-13.4%</b>	<b>\$ 23,911,619</b>	<b>\$ 20,986,668</b>	<b>13.9%</b>	<b>\$ 21,931,066</b>	<b>9.0%</b>
<b>NET OPERATING REVENUE</b>	<b>\$ 31,998,020</b>	<b>\$ 30,358,827</b>	<b>5.4%</b>	<b>\$ 30,219,417</b>	<b>5.9%</b>	<b>\$ 96,724,616</b>	<b>\$ 91,930,746</b>	<b>5.2%</b>	<b>\$ 85,701,593</b>	<b>12.9%</b>
<b>OPERATING EXPENSE</b>										
Salaries and Wages	\$ 10,208,952	\$ 9,848,342	3.7%	\$ 9,498,963	7.5%	\$ 31,158,367	\$ 29,798,003	4.6%	\$ 28,849,547	8.0%
Benefits	1,731,135	1,872,111	-7.5%	3,173,464	-45.4%	5,193,512	5,273,340	-1.5%	9,146,050	-43.2%
Temporary Labor	823,647	660,059	24.8%	874,962	-5.9%	2,464,653	2,008,333	22.7%	3,253,799	-24.3%
Physician Fees	1,160,162	1,192,549	-2.7%	1,216,239	-4.6%	3,447,274	3,577,647	-3.6%	3,594,623	-4.1%
Texas Tech Support	976,161	954,677	2.3%	861,677	13.3%	2,904,106	2,864,031	1.4%	2,606,933	11.4%
Purchased Services	5,280,618	4,844,778	9.0%	4,688,767	12.6%	14,737,267	14,545,421	1.3%	13,173,584	11.9%
Supplies	6,250,645	5,830,409	7.2%	5,783,739	8.1%	19,637,636	17,643,100	11.3%	16,530,569	18.8%
Utilities	329,700	304,263	8.4%	331,630	-0.6%	1,049,221	909,838	15.3%	1,036,701	1.2%
Repairs and Maintenance	671,400	922,410	-27.2%	867,727	-22.6%	2,231,800	2,767,903	-19.4%	2,910,999	-23.3%
Leases and Rentals	(47,041)	(47,469)	-0.9%	(71,702)	-34.4%	(92,295)	(142,407)	-35.2%	(141,217)	-34.6%
Insurance	128,970	129,036	-0.1%	126,775	1.7%	383,948	387,108	-0.8%	371,907	3.2%
Interest Expense	98,151	93,081	5.4%	70,015	40.2%	299,200	279,549	7.0%	210,344	42.2%
ECHDA	246,496	182,272	35.2%	192,376	28.1%	616,654	546,816	12.8%	619,812	-0.5%
Other Expense	81,966	116,281	-29.5%	562,791	-85.4%	273,857	338,652	-19.1%	725,725	-62.3%
<b>TOTAL OPERATING EXPENSES</b>	<b>\$ 27,940,963</b>	<b>\$ 26,902,799</b>	<b>3.9%</b>	<b>\$ 28,177,425</b>	<b>-0.8%</b>	<b>\$ 84,305,202</b>	<b>\$ 80,797,244</b>	<b>4.3%</b>	<b>\$ 82,889,377</b>	<b>1.7%</b>
Depreciation/Amortization	\$ 1,972,502	\$ 1,863,286	5.9%	\$ 1,689,558	16.7%	\$ 5,907,800	\$ 5,566,233	6.1%	\$ 5,069,270	16.5%
(Gain)/Loss on Disposal of Assets	(1,000)	-	0.0%	(112,137)	-99.1%	(28,000)	-	0.0%	(112,137)	-75.0%
<b>TOTAL OPERATING COSTS</b>	<b>\$ 29,912,464</b>	<b>\$ 28,766,085</b>	<b>4.0%</b>	<b>\$ 29,754,845</b>	<b>0.5%</b>	<b>\$ 90,185,002</b>	<b>\$ 86,363,477</b>	<b>4.4%</b>	<b>\$ 87,846,509</b>	<b>2.7%</b>
<b>NET GAIN (LOSS) FROM OPERATIONS</b>	<b>\$ 2,085,555</b>	<b>\$ 1,592,742</b>	<b>30.9%</b>	<b>\$ 464,571</b>	<b>-348.9%</b>	<b>\$ 6,539,615</b>	<b>\$ 5,567,269</b>	<b>17.5%</b>	<b>\$ (2,144,917)</b>	<b>-404.9%</b>
Operating Margin	6.52%	5.25%	24.2%	1.54%	324.0%	6.76%	6.06%	11.6%	-2.50%	-370.1%
<b>NONOPERATING REVENUE/EXPENSE</b>										
Interest Income	\$ 210,448	\$ 92,032	128.7%	\$ 82,038	156.5%	\$ 511,743	\$ 276,096	85.3%	\$ 239,786	113.4%
Tobacco Settlement	-	-	0.0%	-	0.0%	-	-	0.0%	-	0.0%
Trauma Funds	-	-	0.0%	-	0.0%	-	-	0.0%	-	0.0%
Donations	-	1,820	-100.0%	-	0.0%	(3,000)	5,460	-154.9%	-	0.0%
COVID-19 Stimulus	-	-	0.0%	-	0.0%	-	-	-	-	0.0%
<b>CHANGE IN NET POSITION BEFORE CAPITAL CONTRIBUTION</b>	<b>\$ 2,296,004</b>	<b>\$ 1,686,594</b>	<b>36.1%</b>	<b>\$ 546,610</b>	<b>320.0%</b>	<b>\$ 7,048,357</b>	<b>\$ 5,848,825</b>	<b>20.5%</b>	<b>\$ (1,905,130)</b>	<b>-470.0%</b>
Procure & Trauma Care Capital Contribution	(2,919,250)	(2,266,960)	28.8%	(2,604,662)	12.1%	(7,868,205)	(6,630,445)	18.7%	(5,636,991)	39.6%
<b>CHANGE IN NET POSITION BEFORE INVESTMENT ACTIVITY</b>	<b>\$ (623,247)</b>	<b>\$ (580,366)</b>	<b>-7.4%</b>	<b>\$ (2,058,052)</b>	<b>69.7%</b>	<b>\$ (819,848)</b>	<b>\$ (781,620)</b>	<b>-4.9%</b>	<b>\$ (7,542,121)</b>	<b>89.1%</b>
Unrealized Gain/(Loss) on Investments	\$ 396,810	\$ -	0.0%	\$ 204,479	94.1%	\$ 924,959	\$ -	0.0%	\$ 380,748	142.9%
Investment in Subsidiaries	14,238	149,961	-90.5%	(2,997)	-575.0%	9,558	449,883	-97.9%	125,191	-92.4%
<b>CHANGE IN NET POSITION</b>	<b>\$ (212,198)</b>	<b>\$ (430,405)</b>	<b>50.7%</b>	<b>\$ (1,856,571)</b>	<b>88.6%</b>	<b>\$ 114,668</b>	<b>\$ (331,737)</b>	<b>134.6%</b>	<b>\$ (7,036,182)</b>	<b>101.6%</b>

**ECTOR COUNTY HOSPITAL DISTRICT  
PROCARE OPERATIONS SUMMARY  
DECEMBER 2023**

	CURRENT MONTH					YEAR TO DATE				
	ACTUAL	BUDGET	BUDGET VAR	PRIOR YR	PRIOR YR VAR	ACTUAL	BUDGET	BUDGET VAR	PRIOR YR	PRIOR YR VAR
<b>PATIENT REVENUE</b>										
Outpatient Revenue	\$ 10,240,150	\$ 11,374,343	-10.0%	\$ 12,324,184	-16.9%	\$ 31,518,938	\$ 33,946,449	-7.2%	\$ 36,409,018	-13.4%
<b>TOTAL PATIENT REVENUE</b>	\$ 10,240,150	\$ 11,374,343	-10.0%	\$ 12,324,184	-16.9%	\$ 31,518,938	\$ 33,946,449	-7.2%	\$ 36,409,018	-13.4%
<b>DEDUCTIONS FROM REVENUE</b>										
Contractual Adjustments	\$ 5,581,460	\$ 5,804,512	-3.8%	\$ 5,852,839	-4.6%	\$ 16,147,356	\$ 17,304,749	-6.7%	\$ 18,107,120	-10.8%
Policy Adjustments	907,104	910,626	-0.4%	1,578,542	-42.5%	3,038,294	2,702,977	12.4%	3,125,451	-2.8%
Uninsured Discount	106,846	425,999	-74.9%	1,250,068	-91.5%	702,454	1,265,350	-44.5%	1,946,988	-63.9%
Indigent	(6,417)	15,704	-140.9%	21,829	-129.4%	29,262	43,905	-33.4%	29,469	-0.7%
Provision for Bad Debts	908,845	826,915	9.9%	1,032,961	-12.0%	2,847,559	2,613,880	8.9%	3,188,151	-10.7%
<b>TOTAL REVENUE DEDUCTIONS</b>	\$ 7,497,838	\$ 7,983,756	-6.1%	\$ 9,736,239	-23.0%	\$ 22,764,926	\$ 23,930,861	-4.9%	\$ 26,397,179	-13.8%
	73.22%	70.19%		79.00%		72.23%	70.50%		72.50%	
<b>NET PATIENT REVENUE</b>	\$ 2,742,313	\$ 3,390,587	-19.1%	\$ 2,587,945	6.0%	\$ 8,754,012	\$ 10,015,588	-12.6%	\$ 10,011,839	-12.6%
<b>OTHER REVENUE</b>										
Other Income	\$ 185,032	\$ 221,952	-16.6%	\$ 165,389	11.9%	\$ 655,265	\$ 664,106	-1.3%	\$ 557,835	17.5%
<b>TOTAL OTHER REVENUE</b>	\$ 185,032	\$ 221,952	-16.6%	\$ 165,389	11.9%	\$ 655,265	\$ 664,106	-1.3%	\$ 557,835	17.5%
<b>NET OPERATING REVENUE</b>	\$ 2,927,344	\$ 3,612,539	-19.0%	\$ 2,753,334	6.3%	\$ 9,409,277	\$ 10,679,694	-11.9%	\$ 10,569,674	-11.0%
<b>OPERATING EXPENSE</b>										
Salaries and Wages	\$ 4,076,797	\$ 4,361,506	-6.5%	\$ 3,944,855	3.3%	\$ 12,420,629	\$ 13,177,388	-5.7%	\$ 12,483,943	-0.5%
Benefits	530,618	579,791	-8.5%	533,800	-0.6%	1,224,773	1,298,893	-5.7%	1,214,088	0.9%
Temporary Labor	1,046,079	676,188	54.7%	333,887	213.3%	2,977,919	2,057,664	44.7%	913,472	226.0%
Physician Fees	161,650	240,601	-32.8%	204,034	-20.8%	582,776	721,803	-19.3%	593,312	-1.8%
Purchased Services	(316,110)	(336,843)	-6.2%	(62,006)	409.8%	(887,195)	(1,020,529)	-13.1%	(195,208)	354.5%
Supplies	82,731	84,820	-2.5%	115,784	-28.5%	199,814	246,260	-18.9%	379,760	-47.4%
Utilities	1,251	690	81.2%	688	81.9%	2,303	2,190	5.2%	2,189	5.2%
Repairs and Maintenance	247	1,900	-87.0%	16,01	1443.0%	3,818	5,700	-33.0%	167	2183.1%
Leases and Rentals	143,935	144,407	-0.3%	163,654	-12.0%	424,061	431,013	-1.6%	495,157	-14.4%
Insurance	51,834	54,425	-4.8%	58,483	-11.4%	156,513	163,275	-4.1%	156,195	0.2%
Other Expense	61,522	64,890	-5.2%	59,591	3.2%	152,096	205,110	-25.8%	146,951	3.5%
<b>TOTAL OPERATING EXPENSES</b>	\$ 5,840,553	\$ 5,872,375	-0.5%	\$ 5,352,785	9.1%	\$ 17,257,508	\$ 17,288,767	-0.2%	\$ 16,190,026	6.6%
Depreciation/Amortization	\$ 6,041	\$ 7,124	-15.2%	\$ 5,718	5.7%	\$ 19,975	\$ 21,372	-6.5%	\$ 17,145	16.5%
(Gain)/Loss on Sale of Assets	-	-	0.0%	(506)	-100.0%	-	-	0.0%	(506)	-100.0%
<b>TOTAL OPERATING COSTS</b>	\$ 5,846,595	\$ 5,879,499	-0.6%	\$ 5,357,996	9.1%	\$ 17,277,483	\$ 17,310,139	-0.2%	\$ 16,206,664	6.6%
<b>NET GAIN (LOSS) FROM OPERATIONS</b>	\$ (2,919,250)	\$ (2,266,960)	28.8%	\$ (2,604,662)	12.1%	\$ (7,868,205)	\$ (6,630,445)	18.7%	\$ (5,636,991)	39.6%
Operating Margin	-99.72%	-62.75%	58.9%	-94.60%	5.4%	-83.62%	-62.08%	34.7%	-53.33%	56.8%
COVID-19 Stimulus	\$ -	\$ -	0.0%	\$ -	0.0%	\$ -	\$ -	0.0%	\$ -	0.0%
MCH Contribution	\$ 2,919,250	\$ 2,266,960	28.8%	\$ 2,604,662	12.1%	\$ 7,868,205	\$ 6,630,445	18.7%	\$ 5,636,991	39.6%
<b>CAPITAL CONTRIBUTION</b>	\$ -	\$ -	0.0%	\$ -	0.0%	\$ -	\$ -	0.0%	\$ -	0.0%

**MONTHLY STATISTICAL REPORT**

	CURRENT MONTH					YEAR TO DATE				
Total Office Visits	6,764	7,354	-8.02%	8,449	-19.94%	21,700	22,234	-2.40%	26,704	-18.74%
Total Hospital Visits	6,729	6,242	7.80%	6,070	10.86%	19,593	17,328	13.07%	16,811	16.55%
Total Procedures	11,234	12,008	-6.45%	12,782	-12.11%	36,637	36,706	-0.19%	39,540	-7.34%
Total Surgeries	874	931	-6.12%	909	-3.85%	2,353	2,526	-6.85%	2,438	-3.49%
Total Provider FTE's	82.9	88.6	-6.51%	88.7	-6.63%	84.2	88.6	-4.99%	88.5	-4.83%
Total Staff FTE's	104.0	126.7	-17.94%	117.2	-11.32%	105.2	126.9	-17.10%	117.0	-10.08%
Total Administrative FTE's	12.9	11.7	10.34%	12.6	2.69%	12.2	11.7	4.55%	12.6	-2.87%
Total FTE's	199.7	227.0	-12.02%	218.5	-8.61%	201.6	227.2	-11.26%	218.0	-7.53%

**ECTOR COUNTY HOSPITAL DISTRICT  
TRAUMACARE OPERATIONS SUMMARY  
DECEMBER 2023**

	CURRENT MONTH					YEAR TO DATE				
	ACTUAL	BUDGET	BUDGET VAR	PRIOR YR	PRIOR YR VAR	ACTUAL	BUDGET	BUDGET VAR	PRIOR YR	PRIOR YR VAR
<b>PATIENT REVENUE</b>										
Outpatient Revenue	\$ 193,305	\$ 261,475	-26.1%	\$ 347,755	-44.4%	\$ 666,548	\$ 631,092	5.6%	\$ 564,662	18.0%
<b>TOTAL PATIENT REVENUE</b>	\$ 193,305	\$ 261,475	-26.1%	\$ 347,755	-44.4%	\$ 666,548	\$ 631,092	5.6%	\$ 564,662	18.0%
<b>DEDUCTIONS FROM REVENUE</b>										
Contractual Adjustments	\$ 90,769	\$ 154,360	-41.2%	\$ 195,000	-53.5%	\$ 269,543	\$ 372,561	-27.7%	\$ 319,500	-15.6%
Policy Adjustments	40,153	46,140	-13.0%	56,000	-28.3%	95,940	111,362	-13.8%	91,000	5.4%
Uninsured Discount	-	-	0.0%	-	0.0%	-	-	0.0%	-	0.0%
Indigent	-	-	0.0%	-	0.0%	-	-	0.0%	-	0.0%
Provision for Bad Debts	21,347	29,901	-28.6%	28,000	-23.8%	74,525	72,168	3.3%	43,000	73.3%
<b>TOTAL REVENUE DEDUCTIONS</b>	\$ 152,268	\$ 230,401	-33.9%	\$ 279,000	-45.4%	\$ 440,009	\$ 556,091	-20.9%	\$ 453,500	-3.0%
	78.77%	88.12%		80.23%		66.01%	88.12%		80.31%	
<b>NET PATIENT REVENUE</b>	\$ 41,037	\$ 31,074	32.1%	\$ 68,755	-40.3%	\$ 226,540	\$ 75,001	202.0%	\$ 111,162	103.8%
						34.0%				
<b>OTHER REVENUE</b>										
Other Income	\$ -	\$ 40	-100.0%	\$ -	100.0%	\$ 4,570	\$ 120	3707.9%	\$ -	100.0%
<b>TOTAL OTHER REVENUE</b>	\$ -	\$ 40	-100.0%	\$ -	100.0%	\$ 4,570	\$ 120	3707.9%	\$ -	100.0%
<b>NET OPERATING REVENUE</b>	\$ 41,037	\$ 31,114	31.9%	\$ 68,755	-40.3%	\$ 231,109	\$ 75,121	207.6%	\$ 111,162	107.9%
<b>OPERATING EXPENSE</b>										
Salaries and Wages	\$ 251,118	\$ 251,167	0.0%	\$ 255,634	-1.8%	\$ 747,711	\$ 750,655	-0.4%	\$ 750,947	-0.4%
Benefits	10,567	19,651	-46.2%	31,735	-66.7%	34,068	58,649	-41.9%	109,484	-68.9%
Temporary Labor	-	-	0.0%	-	0.0%	-	-	0.0%	-	0.0%
Physician Fees	(259,248)	(259,248)	0.0%	(259,248)	0.0%	(777,744)	(777,744)	0.0%	(777,744)	0.0%
Purchased Services	2,034	702	189.8%	813	150.3%	3,874	2,106	84.0%	1,439	169.3%
Supplies	-	683	-100.0%	-	0.0%	818	1,717	-52.3%	2,048	-60.0%
Utilities	-	-	0.0%	-	0.0%	-	-	0.0%	-	0.0%
Repairs and Maintenance	-	-	0.0%	-	0.0%	-	-	0.0%	-	0.0%
Leases and Rentals	1,993	1,993	0.0%	1,993	0.0%	5,980	5,979	0.0%	5,980	0.0%
Insurance	8,275	7,345	12.7%	7,932	4.3%	24,826	22,035	12.7%	23,796	4.3%
Other Expense	125	461	-72.8%	682	-81.6%	885	1,383	-36.0%	1,263	-29.9%
<b>TOTAL OPERATING EXPENSES</b>	\$ 14,865	\$ 22,754	-34.7%	\$ 39,541	-62.4%	\$ 40,418	\$ 64,780	-37.6%	\$ 117,213	-65.5%
Depreciation/Amortization	\$ -	\$ -	0.0%	\$ -	0.0%	\$ -	\$ -	0.0%	\$ -	0.0%
(Gain)/Loss on Sale of Assets	-	-	0.0%	-	0.0%	-	-	0.0%	-	0.0%
<b>TOTAL OPERATING COSTS</b>	\$ 14,865	\$ 22,754	-34.7%	\$ 39,541	-62.4%	\$ 40,418	\$ 64,780	-37.6%	\$ 117,213	-65.5%
<b>NET GAIN (LOSS) FROM OPERATIONS</b>	\$ 26,172	\$ 8,360	213.1%	\$ 29,214	-10.4%	\$ 190,691	\$ 10,341	1744.0%	\$ (6,051)	-3251.5%
Operating Margin	63.78%	26.87%	137.4%	42.49%	50.1%	82.51%	13.77%	499.4%	-5.44%	-1615.8%
COVID-19 Stimulus	\$ -	\$ -	0.0%	\$ -	0.0%	\$ -	\$ -	0.0%	\$ -	0.0%
MCH Contribution	\$ -	\$ -	0.0%	\$ -	0.0%	\$ -	\$ -	0.0%	\$ -	0.0%
<b>CAPITAL CONTRIBUTION</b>	\$ 26,172	\$ 8,360	213.1%	\$ 29,214	-10.4%	\$ 190,691	\$ 10,341	1744.0%	\$ (6,051)	-3251.4%

**MONTHLY STATISTICAL REPORT**

	CURRENT MONTH					YEAR TO DATE				
Total Procedures	609	972	-37.35%	793	-23.20%	1,886	2,346	-19.61%	1,914	-1.46%
Total Provider FTE's	8.3	8.2	2.02%	8.4	-0.84%	8.4	8.3	1.47%	8.4	-0.38%
Total Staff FTE's	1.0	1.5	-28.41%	0.8	27.72%	1.0	1.2	-13.63%	0.9	8.43%
Total FTE's	9.4	9.6	-2.58%	9.2	1.68%	9.4	9.5	-0.42%	9.4	0.50%

**ECTOR COUNTY HOSPITAL DISTRICT  
DECEMBER 2023**

**REVENUE BY PAYOR**

	CURRENT MONTH				YEAR TO DATE			
	CURRENT YEAR		PRIOR YEAR		CURRENT YEAR		PRIOR YEAR	
	GROSS REVENUE	%	GROSS REVENUE	%	GROSS REVENUE	%	GROSS REVENUE	%
Medicare	\$ 41,725,502	39.6%	\$ 37,410,793	36.7%	\$ 123,991,562	39.1%	109,255,135	36.9%
Medicaid	12,774,642	12.1%	13,901,894	13.6%	39,448,529	12.5%	42,451,926	14.3%
Commercial	35,396,516	33.6%	32,336,485	31.7%	109,222,234	34.5%	89,676,312	30.3%
Self Pay	11,460,428	10.9%	14,709,392	14.4%	32,231,381	10.2%	43,066,324	14.5%
Other	4,055,881	3.8%	3,725,848	3.6%	11,756,129	3.7%	11,772,102	4.0%
<b>TOTAL</b>	<b>\$ 105,412,969</b>	<b>100.0%</b>	<b>\$ 102,084,413</b>	<b>100.0%</b>	<b>\$ 316,649,835</b>	<b>100.0%</b>	<b>296,221,798</b>	<b>100.0%</b>

**PAYMENTS BY PAYOR**

	CURRENT MONTH				YEAR TO DATE			
	CURRENT YEAR		PRIOR YEAR		CURRENT YEAR		PRIOR YEAR	
	PAYMENTS	%	PAYMENTS	%	PAYMENTS	%	PAYMENTS	%
Medicare	\$ 7,903,864	36.8%	\$ 8,002,111	37.4%	\$ 23,998,192	37.0%	19,783,107	36.1%
Medicaid	2,791,211	13.0%	3,313,627	15.5%	7,977,002	12.3%	8,524,659	15.6%
Commercial	8,330,214	38.8%	8,352,117	39.0%	26,646,094	41.0%	21,220,351	38.8%
Self Pay	1,154,408	5.4%	803,057	3.8%	3,568,395	5.5%	2,743,118	5.0%
Other	1,290,160	6.0%	922,820	4.3%	2,698,310	4.2%	2,481,430	4.5%
<b>TOTAL</b>	<b>\$ 21,469,857</b>	<b>100.0%</b>	<b>\$ 21,393,731</b>	<b>100.0%</b>	<b>\$ 64,887,994</b>	<b>100.0%</b>	<b>54,752,666</b>	<b>100.0%</b>

**ECTOR COUNTY HOSPITAL DISTRICT  
STATEMENT OF CASH FLOW  
DECEMBER 2023**

	Hospital	ProCare	TraumaCare	Blended
<b>Cash Flows from Operating Activities and Nonoperating Revenue:</b>				
Excess of Revenue over Expenses	\$ 114,668	-	190,691	\$ 305,359
Noncash Expenses:				
Depreciation and Amortization	4,319,677	4,368	-	4,324,046
Unrealized Gain/Loss on Investments	924,959	-	-	924,959
Accretion (Bonds) & COVID Funding	(153,115)	-	-	(153,115)
Changes in Assets and Liabilities				
Patient Receivables, Net	(1,729,766)	18,117	(59,927)	(1,771,576)
Taxes Receivable/Deferred	(150,407)	(112,389)	-	(262,796)
Inventories, Prepays and Other	1,662,004	26,535	(10,651)	1,677,887
LT Lease Rec	99,828	-	-	-
Deferred Inflow of Resources	-	-	-	-
Accounts Payable	2,149,591	(386,581)	(118,216)	1,644,794
Accrued Expenses	1,028,503	453,972	(1,897)	1,480,578
Due to Third Party Payors	-	-	-	-
Accrued Post Retirement Benefit Costs	(2,096,832)	-	-	(2,096,832)
Net Cash Provided by Operating Activities	<u>\$ 6,169,110</u>	<u>4,022</u>	<u>-</u>	<u>\$ 6,173,132</u>
<b>Cash Flows from Investing Activities:</b>				
Investments	\$ (2,155,531)	-	-	\$ (2,155,531)
Acquisition of Property and Equipment	(1,663,940)	(4,022)	-	(1,667,962)
Net Cash used by Investing Activities	<u>\$ (3,819,471)</u>	<u>(4,022)</u>	<u>-</u>	<u>\$ (3,823,493)</u>
<b>Cash Flows from Financing Activities:</b>				
Current Portion Debt	\$ 3,734	-	-	\$ 3,734
Principal Paid on Subscription Liabilities	\$ (14,571)	-	-	-
Principal Paid on Lease Liabilities	\$ 39	-	-	-
Intercompany Activities	-	-	-	-
LT Liab Subscriptions	(782,056)	-	-	-
LT Liab Leases	(898)	-	-	-
Net Repayment of Long-term Debt/Bond Issuance	(137,815)	-	-	(137,815)
Net Cash used by Financing Activities	<u>(931,566)</u>	<u>-</u>	<u>-</u>	<u>(931,566)</u>
Net Increase (Decrease) in Cash	1,418,073	0	-	1,418,073
Beginning Cash & Cash Equivalents @ 9/30/2023	<u>26,722,432</u>	<u>4,400</u>	<u>-</u>	<u>26,726,832</u>
Ending Cash & Cash Equivalents @ 12/31/2023	<u>\$ 28,140,505</u>	<u>\$ 4,400</u>	<u>\$ -</u>	<u>\$ 28,144,905</u>

**ECTOR COUNTY HOSPITAL DISTRICT  
MEDICAID SUPPLEMENTAL PAYMENTS  
FISCAL YEAR 2024**

CASH ACTIVITY	TAX (IGT) ASSESSED	GOVERNMENT PAYOUT	BURDEN ALLEVIATION	NET INFLOW
<b>DSH</b>				
1st Qtr	\$ (1,373,346)	\$ 3,581,085		\$ 2,207,739
2nd Qtr	-	-		-
3rd Qtr	-	-		-
4th Qtr	-	-		-
<b>DSH TOTAL</b>	<b>\$ (1,373,346)</b>	<b>\$ 3,581,085</b>		<b>\$ 2,207,739</b>
<b>UC</b>				
1st Qtr	-	\$ 5,793,766		5,793,766
2nd Qtr	-	-		-
3rd Qtr	-	-		-
4th Qtr	-	-		-
<b>UC TOTAL</b>	<b>\$ -</b>	<b>\$ 5,793,766</b>		<b>\$ 5,793,766</b>
<b>DSRIP</b>				
1st Qtr	-	-		-
2nd Qtr	-	-		-
3rd Qtr	-	-		-
4th Qtr	-	-		-
<b>DSRIP UPL TOTAL</b>	<b>\$ -</b>	<b>\$ -</b>		<b>\$ -</b>
<b>UHRIP</b>				
1st Qtr	-	-		-
2nd Qtr	-	-		-
3rd Qtr	-	-		-
4th Qtr	-	-		-
<b>UHRIP TOTAL</b>	<b>\$ -</b>	<b>\$ -</b>		<b>\$ -</b>
<b>GME</b>				
1st Qtr	-	-		-
2nd Qtr	-	-		-
3rd	-	-		-
4th Qtr	-	-		-
<b>GME TOTAL</b>	<b>\$ -</b>	<b>\$ -</b>		<b>\$ -</b>
<b>CHIRP</b>				
1st Qtr	\$ (3,062,668)	\$ 2,406,764		\$ (655,904)
2nd Qtr	-	-		-
3rd	-	-		-
4th Qtr	-	-		-
<b>CHIRP TOTAL</b>	<b>\$ (3,062,668)</b>	<b>\$ 2,406,764</b>		<b>\$ (655,904)</b>
<b>HARP</b>				
1st Qtr	-	-		-
2nd Qtr	-	-		-
3rd	-	-		-
4th Qtr	-	-		-
<b>HARP TOTAL</b>	<b>\$ -</b>	<b>\$ -</b>		<b>\$ -</b>
<b>TIPPS</b>				
1st Qtr	-	-		-
2nd Qtr	-	-		-
3rd	-	-		-
4th Qtr	-	-		-
<b>TIPPS TOTAL</b>	<b>\$ -</b>	<b>\$ -</b>		<b>\$ -</b>
<b>MCH Cash Activity</b>	<b>\$ (4,436,014)</b>	<b>\$ 11,781,615</b>		<b>\$ 7,345,601</b>
<b>ProCare Cash Activity</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>
<b>Blended Cash Activity</b>	<b>\$ (4,436,014)</b>	<b>\$ 11,781,615</b>	<b>\$ -</b>	<b>\$ 7,345,601</b>

**INCOME STATEMENT ACTIVITY:**

FY 2024 Accrued / (Deferred) Adjustments:	BLENDED
DSH Accrual	\$ 2,197,500
Uncompensated Care Accrual	2,060,001
Regional UPL Accrual	-
URIP	-
GME	219,501
CHIRP	4,018,451
HARP	104,001
TIPPS	74,493
Regional UPL Benefit	-
<b>Medicaid Supplemental Payments</b>	<b>8,673,947</b>
DSRIP Accrual	-
<b>Total Adjustments</b>	<b>\$ 8,673,947</b>

**ECTOR COUNTY HOSPITAL DISTRICT  
SUPPLEMENTAL SCHEDULE OF HOSPITAL TEMPORARY LABOR FTE'S  
DECEMBER 2023**

TEMPORARY LABOR DEPARTMENT	CURRENT MONTH					YEAR TO DATE				
	ACTUAL	BUDGET	VAR	PRIOR YR	PRIOR YR VAR	ACTUAL	BUDGET	VAR	PRIOR YR	PRIOR YR VAR
Cardiopulmonary	12.9	11.0	17.9%	9.8	32.1%	13.1	11.3	16.2%	10.8	21.1%
Operating Room	12.5	3.9	216.6%	9.3	33.6%	11.8	4.0	192.2%	10.0	18.2%
Labor & Delivery	4.7	4.7	-1.4%	2.7	69.5%	4.1	4.9	-15.5%	2.3	77.3%
Laboratory - Chemistry	3.8	4.3	-10.9%	5.4	-29.3%	4.1	4.4	-6.2%	6.7	-38.6%
Imaging - Diagnostics	2.5	2.7	-6.6%	2.1	18.2%	2.8	2.7	2.2%	2.4	14.4%
Recovery Room	2.2	-	0.0%	-	0.0%	2.1	-	0.0%	-	0.0%
PM&R - Occupational	1.2	1.9	-33.4%	0.8	57.2%	1.5	1.9	-18.9%	0.6	152.5%
4 East - Post Partum	1.5	1.8	-17.7%	0.9	71.5%	1.3	1.9	-32.7%	1.3	-1.2%
Imaging - Ultrasound	1.0	0.9	13.1%	1.5	-29.5%	1.1	1.0	18.2%	1.5	-26.8%
Laboratory - Histology	1.0	-	0.0%	-	0.0%	1.1	-	0.0%	-	0.0%
Center for Health and Wellness - Sports Medici	0.9	0.9	-2.8%	0.8	11.9%	0.8	1.0	-14.7%	0.3	199.7%
Neonatal Intensive Care	0.9	-	0.0%	-	0.0%	0.7	-	0.0%	0.0	3084.5%
Imaging - Cat Scan	0.6	1.0	-37.1%	-	0.0%	0.6	1.0	-37.2%	0.2	301.8%
Intensive Care Unit (ICU) 2	0.5	1.8	-73.3%	1.3	-62.3%	0.4	1.9	-76.4%	1.6	-71.6%
Nursing Orientation	-	-	0.0%	-	0.0%	0.2	-	0.0%	0.1	231.5%
6 West	-	0.0	-100.0%	-	0.0%	0.2	0.0	359.1%	0.1	144.3%
Intensive Care Unit (CCU) 4	0.2	1.4	-85.1%	0.8	-73.7%	0.2	1.4	-88.0%	1.5	-88.5%
Care Management	-	-	0.0%	2.6	-100.0%	0.2	-	0.0%	2.9	-94.7%
UTILIZATION REVIEW	0.4	1.0	-54.7%	-	0.0%	0.1	1.0	-84.9%	-	0.0%
7 Central	-	0.0	-100.0%	1.0	-100.0%	0.1	0.0	272.8%	0.6	-76.9%
9 Central	-	0.0	-100.0%	-	0.0%	0.1	0.0	205.1%	0.2	-51.5%
6 Central	-	0.0	-100.0%	-	0.0%	0.1	0.0	153.5%	0.1	-22.7%
4 Central	0.3	0.0	601.0%	0.7	-57.7%	0.1	0.0	145.4%	0.7	-86.7%
5 Central	0.1	0.0	244.6%	0.4	-61.7%	0.1	0.0	81.2%	0.4	-81.9%
3 West Observation	-	-	0.0%	0.1	-100.0%	0.0	-	0.0%	0.7	-96.6%
Emergency Department	-	1.4	-100.0%	0.4	-100.0%	-	1.4	-100.0%	1.6	-100.0%
Laboratory - Hematology	-	1.3	-100.0%	-	0.0%	-	1.3	-100.0%	-	0.0%
PM&R - Physical	-	-	0.0%	0.1	-100.0%	-	-	0.0%	0.5	-100.0%
Engineering	-	-	0.0%	1.1	-100.0%	-	-	0.0%	1.3	-100.0%
8 Central - Moved Back to 6140	-	-	0.0%	0.4	-100.0%	-	-	0.0%	0.9	-100.0%
5 West - Pediatrics	-	-	0.0%	-	0.0%	-	-	0.0%	0.0	-100.0%
Food Service	-	0.8	-100.0%	-	0.0%	-	0.8	-100.0%	-	0.0%
<b>SUBTOTAL</b>	<b>47.3</b>	<b>41.0</b>	<b>15.4%</b>	<b>42.1</b>	<b>12.4%</b>	<b>46.9</b>	<b>42.0</b>	<b>11.8%</b>	<b>49.2</b>	<b>-4.6%</b>
<b>TRANSITION LABOR</b>										
Laboratory - Chemistry	3.1	-	0.0%	1.2	164.7%	3.3	-	0.0%	1.2	183.2%
<b>SUBTOTAL</b>	<b>3.1</b>	<b>-</b>	<b>0.0%</b>	<b>1.2</b>	<b>164.7%</b>	<b>3.3</b>	<b>-</b>	<b>0.0%</b>	<b>1.2</b>	<b>183.2%</b>
<b>GRAND TOTAL</b>	<b>50.3</b>	<b>41.0</b>	<b>22.9%</b>	<b>43.2</b>	<b>16.5%</b>	<b>50.3</b>	<b>42.0</b>	<b>19.7%</b>	<b>50.4</b>	<b>-0.2%</b>



# Financial Presentation

For the Month Ended

December 31, 2023

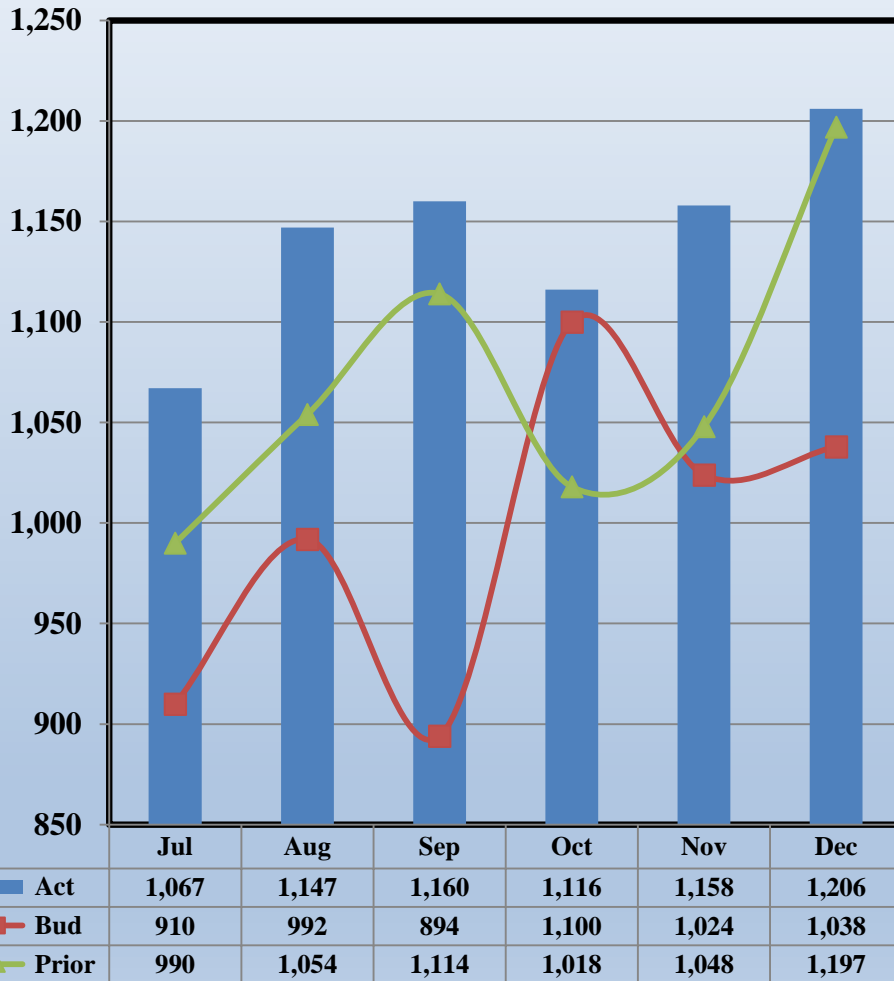


# Volume



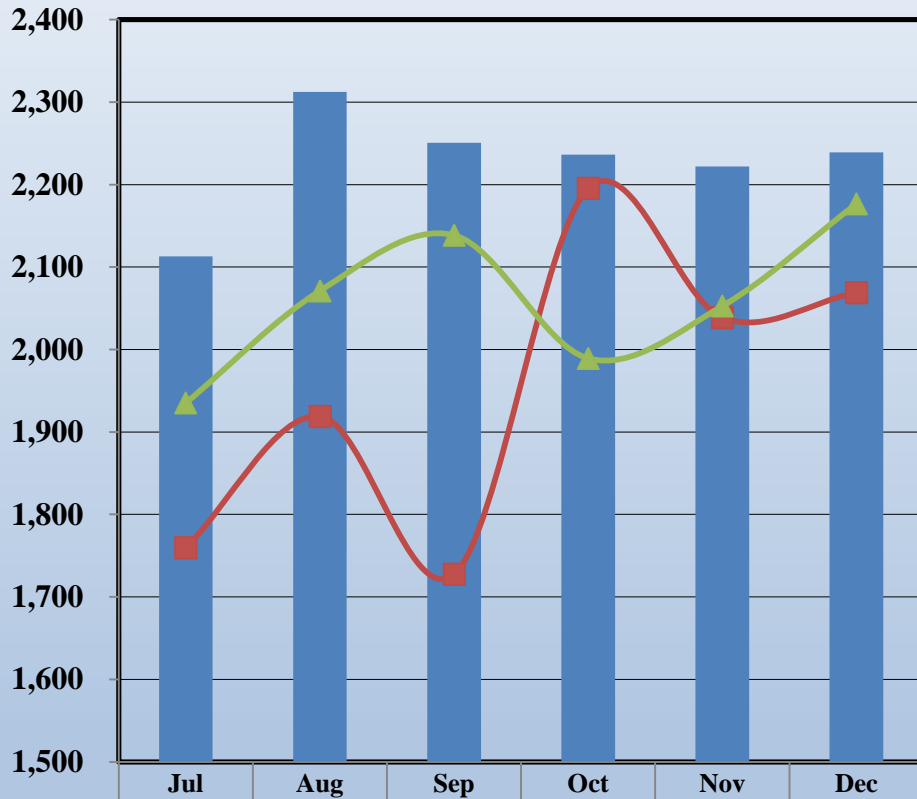
# Admissions

## *Total – Adults and NICU*



	<u>Actual</u>	<u>Budget</u>	<u>Prior Year</u>
Month	1,206	1,038	1,197
Var %		16.2%	0.8%
Year-To-Date	3,480	3,162	3,263
Var %		10.1%	6.7%
Annualized	13,290	12,972	12,092
Var %		2.5%	9.9%

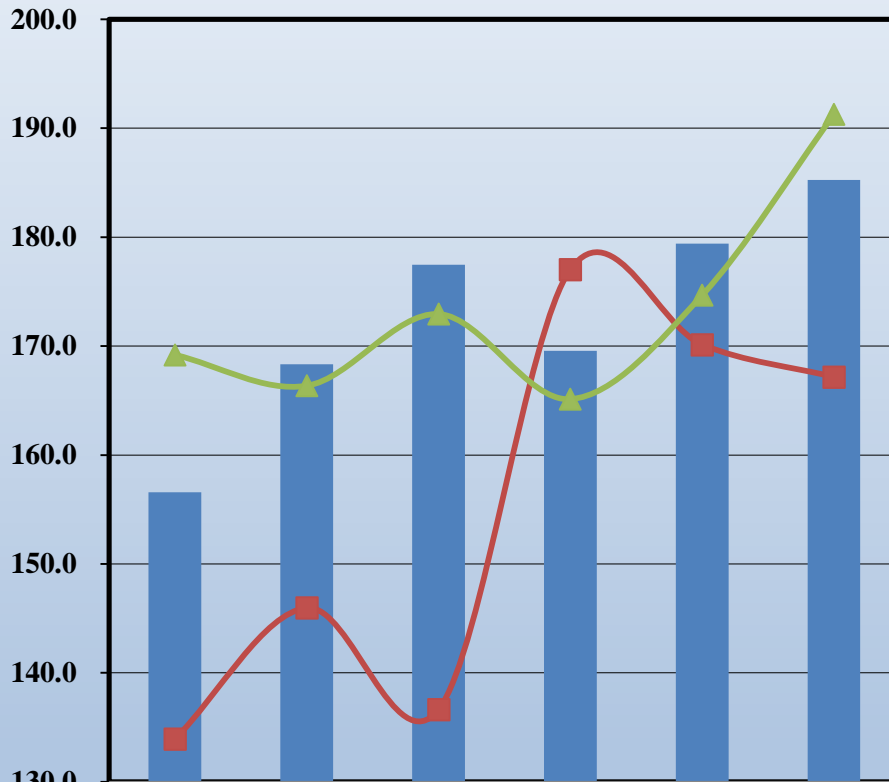
# Adjusted Admissions



Act	2,113	2,313	2,251	2,236	2,222	2,239
Bud	1,760	1,919	1,728	2,195	2,039	2,069
Prior	1,935	2,071	2,139	1,989	2,053	2,177

	<u>Actual</u>	<u>Budget</u>	<u>Prior Year</u>
Month	2,239	2,069	2,177
Var %		8.2%	2.9%
Year-To-Date	6,698	6,303	6,221
Var %		6.3%	7.7%
Annualized	25,766	25,372	22,840
Var %		1.6%	12.8%

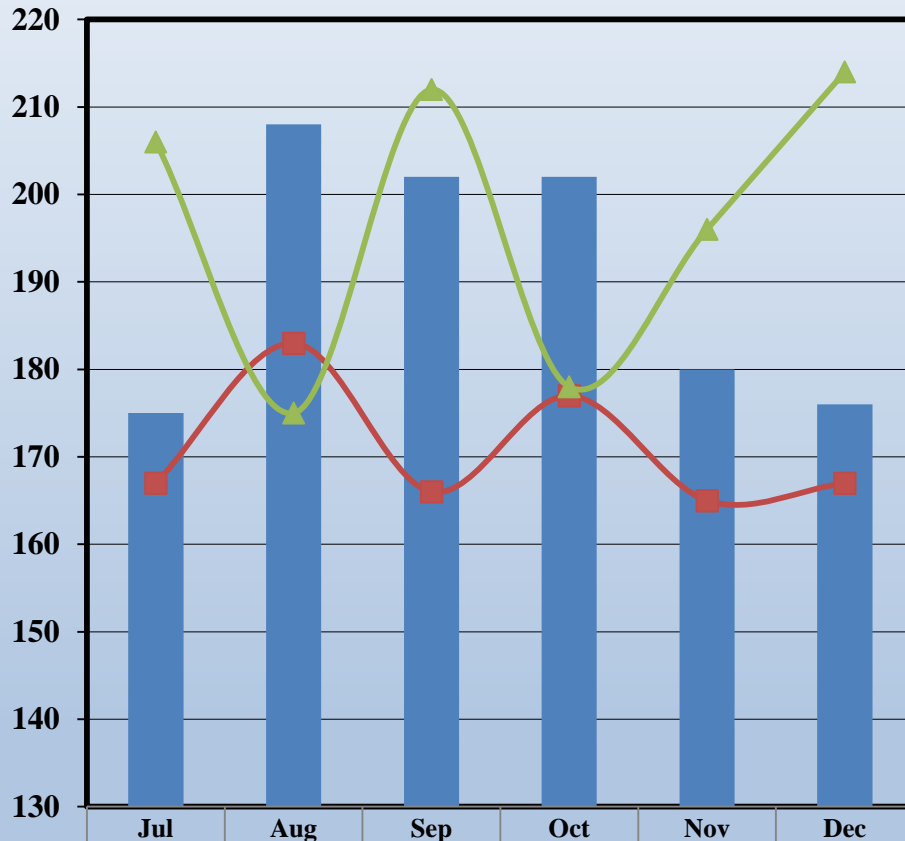
# Average Daily Census



	Jul	Aug	Sep	Oct	Nov	Dec
Act	156.6	168.3	177.5	169.5	179.4	185.3
Bud	133.9	146.0	136.6	177.0	170.1	167.2
Prior	169.2	166.4	172.9	165.1	174.7	191.3

	<u>Actual</u>	<u>Budget</u>	<u>Prior Year</u>
Month	185.3	167.2	191.3
Var %		10.8%	-3.1%
Year-To-Date	178.1	171.5	177.0
Var %		3.8%	0.6%
Annualized	174.9	173.8	173.3
Var %		0.7%	0.9%

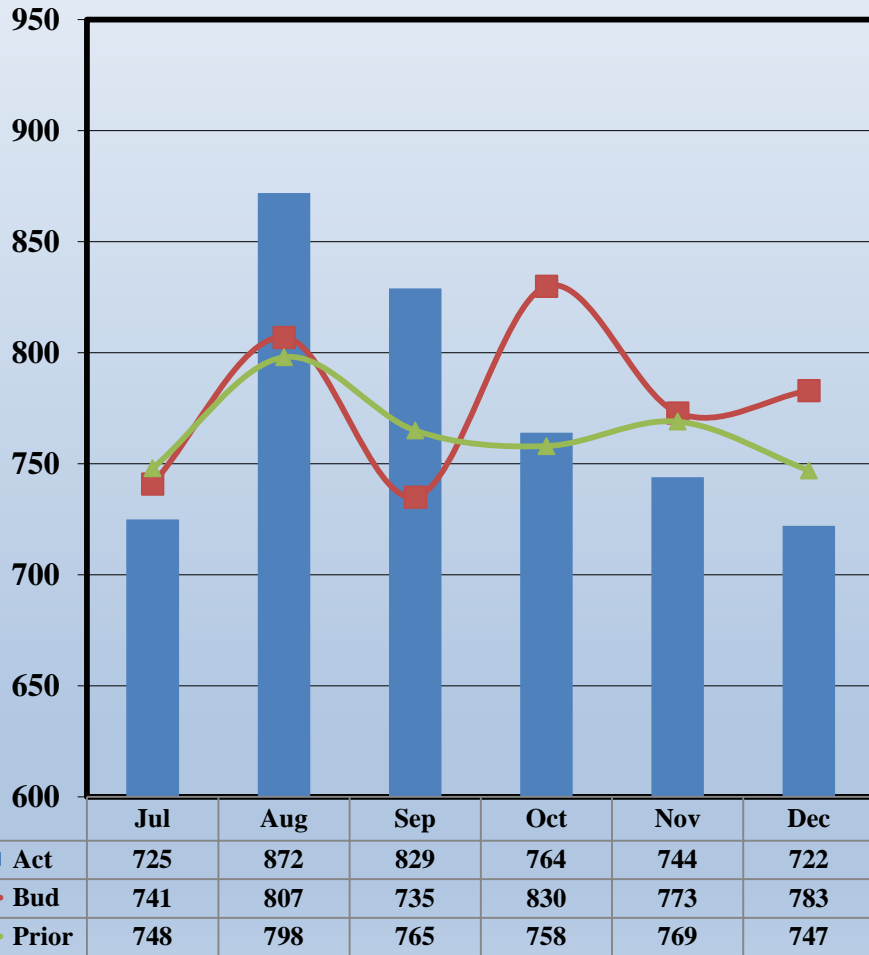
# Deliveries



■ Act	175	208	202	202	180	176
■ Bud	167	183	166	177	165	167
▲ Prior	206	175	212	178	196	214

	<u>Actual</u>	<u>Budget</u>	<u>Prior Year</u>
Month	176	167	214
Var %		5.4%	-17.8%
Year-To-Date	558	509	588
Var %		9.6%	-5.1%
Annualized	2,147	2,098	2,239
Var %		2.3%	-4.1%

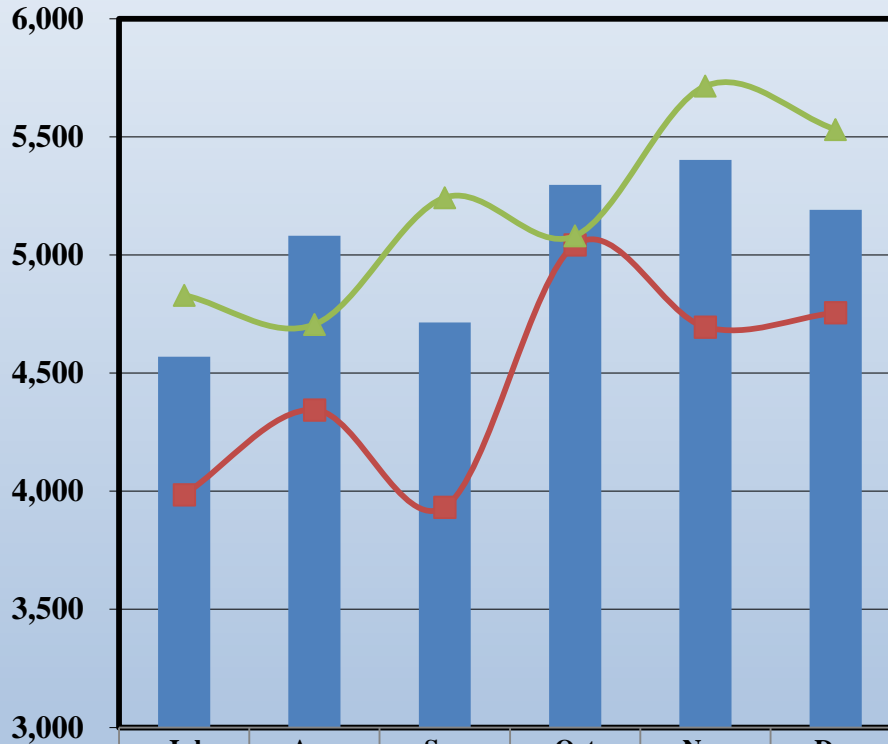
# Total Surgical Cases



	<u>Actual</u>	<u>Budget</u>	<u>Prior Year</u>
Month	722	783	747
Var %		-7.8%	-3.3%
Year-To-Date	2,230	2,386	2,274
Var %		-6.5%	-1.9%
Annualized	9,458	9,614	8,807
Var %		-1.6%	7.4%



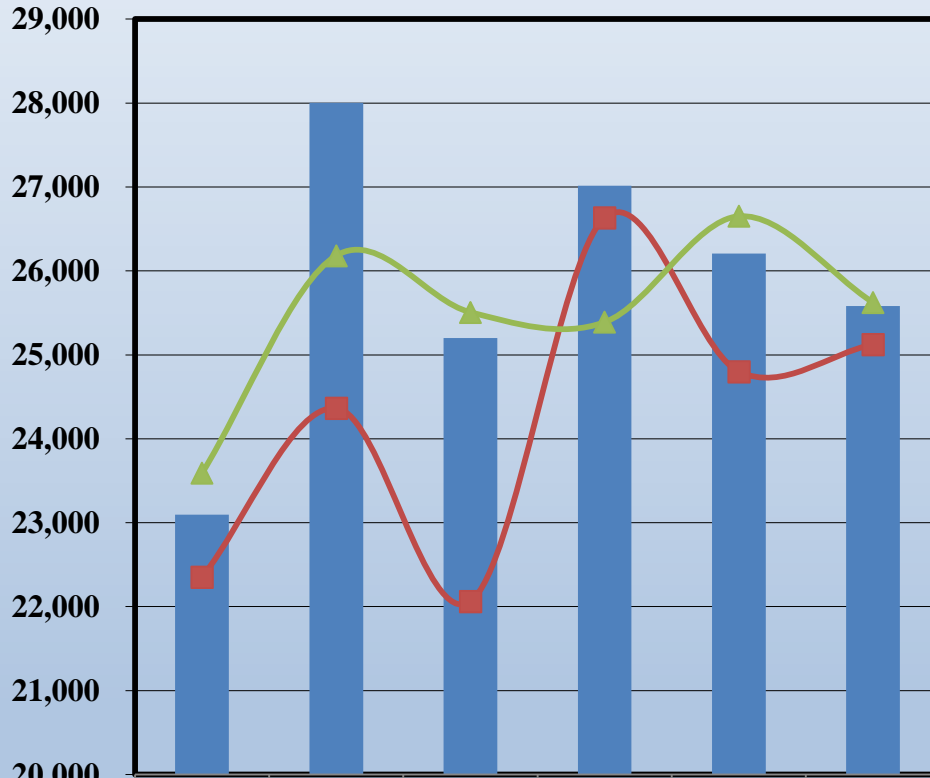
# Emergency Room Visits



	Jul	Aug	Sep	Oct	Nov	Dec
■ Act	4,570	5,082	4,715	5,297	5,402	5,191
■ Bud	3,986	4,345	3,933	5,043	4,695	4,756
▲ Prior	4,830	4,706	5,243	5,081	5,715	5,531

	<u>Actual</u>	<u>Budget</u>	<u>Prior Year</u>
Month	5,191	4,756	5,531
Var %		9.1%	-6.1%
Year-To-Date	15,890	14,494	16,327
Var %		9.6%	-2.7%
Annualized	60,470	59,074	56,518
Var %		2.4%	7.0%

# Total Outpatient Occasions of Service



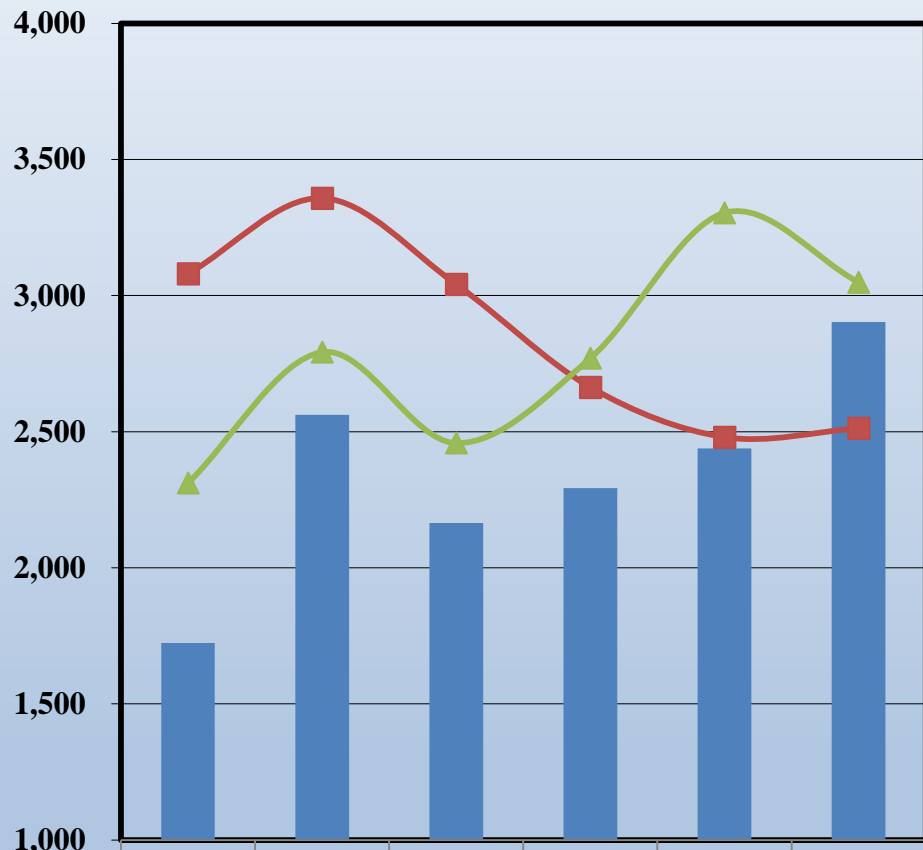
	<u>Actual</u>	<u>Budget</u>	<u>Prior Year</u>
Month	25,581	25,124	25,623
Var %		1.8%	-0.2%
Year-To-Date	78,804	76,559	77,663
Var %		2.9%	1.5%
Annualized	305,431	303,186	290,422
Var %		0.7%	5.2%

	Jul	Aug	Sep	Oct	Nov	Dec
Act	23,097	28,001	25,201	27,016	26,207	25,581
Bud	22,351	24,365	22,062	26,634	24,801	25,124
Prior	23,590	26,182	25,507	25,389	26,651	25,623



# Urgent Care Visits

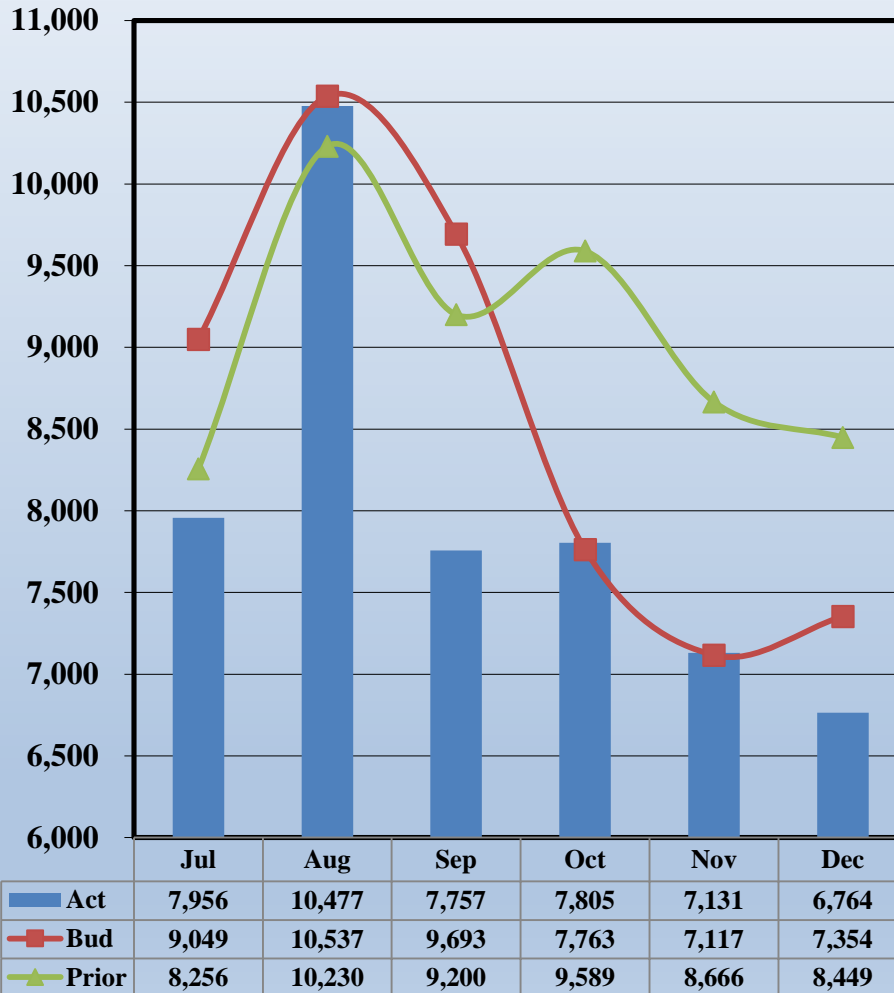
*(JBS Clinic, West University & 42<sup>nd</sup> Street)*



■ Act	1,724	2,562	2,165	2,293	2,438	2,903
■ Bud	3,080	3,358	3,041	2,663	2,480	2,512
▲ Prior	2,311	2,792	2,458	2,770	3,304	3,049

	<u>Actual</u>	<u>Budget</u>	<u>Prior Year</u>
Month	2,903	2,512	3,049
Var %		15.6%	-4.8%
Year-To-Date	7,634	7,655	9,123
Var %		-0.3%	-16.3%
Annualized	27,384	27,405	32,434
Var %		-0.1%	-15.6%

# Total ProCare Office Visits



	<u>Actual</u>	<u>Budget</u>	<u>Prior Year</u>
Month	6,764	7,354	8,449
Var %		-8.0%	-19.9%
Year-To-Date	21,700	22,234	26,704
Var %		-2.4%	-18.7%
Annualized	104,514	105,048	107,499
Var %		-0.5%	-2.8%

# Staffing



# Full Time Equivalent Employees

## *Breakdown of Hospital Only FTEs Including Contract Labor*

	<u>FY23 Total Proj FTEs</u>	<u>Percent of Tot FTEs</u>	<u>Adj FY24 Total Bud FTEs</u>	<u>Percent of Tot FTEs</u>	<u>Act FY24 Total FTEs</u>	<u>Percent of Tot FTEs</u>	<u>Variance from FY24 Budget</u>	<u>Percent Variance from FY24 Budget</u>
<b>FIXED STAFFING</b>								
Admin	102.1	6.3%	104.4	6.1%	104.4	6.1%	0.0	0.0%
Finance	114.7	7.1%	118.0	6.9%	117.8	6.9%	(0.2)	-0.1%
NSG/ANC Clinical	103.0	6.3%	108.2	6.4%	115.1	6.8%	6.9	6.4%
NSG/ANC Non-Clinical	307.7	18.9%	319.4	18.7%	310.6	18.2%	(8.8)	-2.8%
Total	627.6	38.6%	650.0	38.1%	647.9	38.0%	(2.1)	-0.3%
<b>VAR STAFFING</b>								
Ancil. Clinical	244.6	15.1%	252.0	14.8%	253.0	14.9%	1.0	0.4%
NSG - Acute	424.9	26.2%	430.6	25.3%	452.6	26.6%	22.0	5.1%
NSG - ED	106.2	6.5%	116.2	6.8%	110.7	6.5%	(5.5)	-4.7%
NSG - Surgical	124.6	7.7%	130.6	7.7%	127.8	7.5%	(2.8)	-2.1%
Respiratory	43.6	2.7%	48.7	2.9%	45.9	2.7%	(2.8)	-5.7%
UC/FHC	53.3	3.3%	75.7	4.4%	71.3	4.2%	(4.4)	-5.8%
Total	997.1	61.4%	1,053.7	61.9%	1,061.3	62.3%	7.6	0.7%



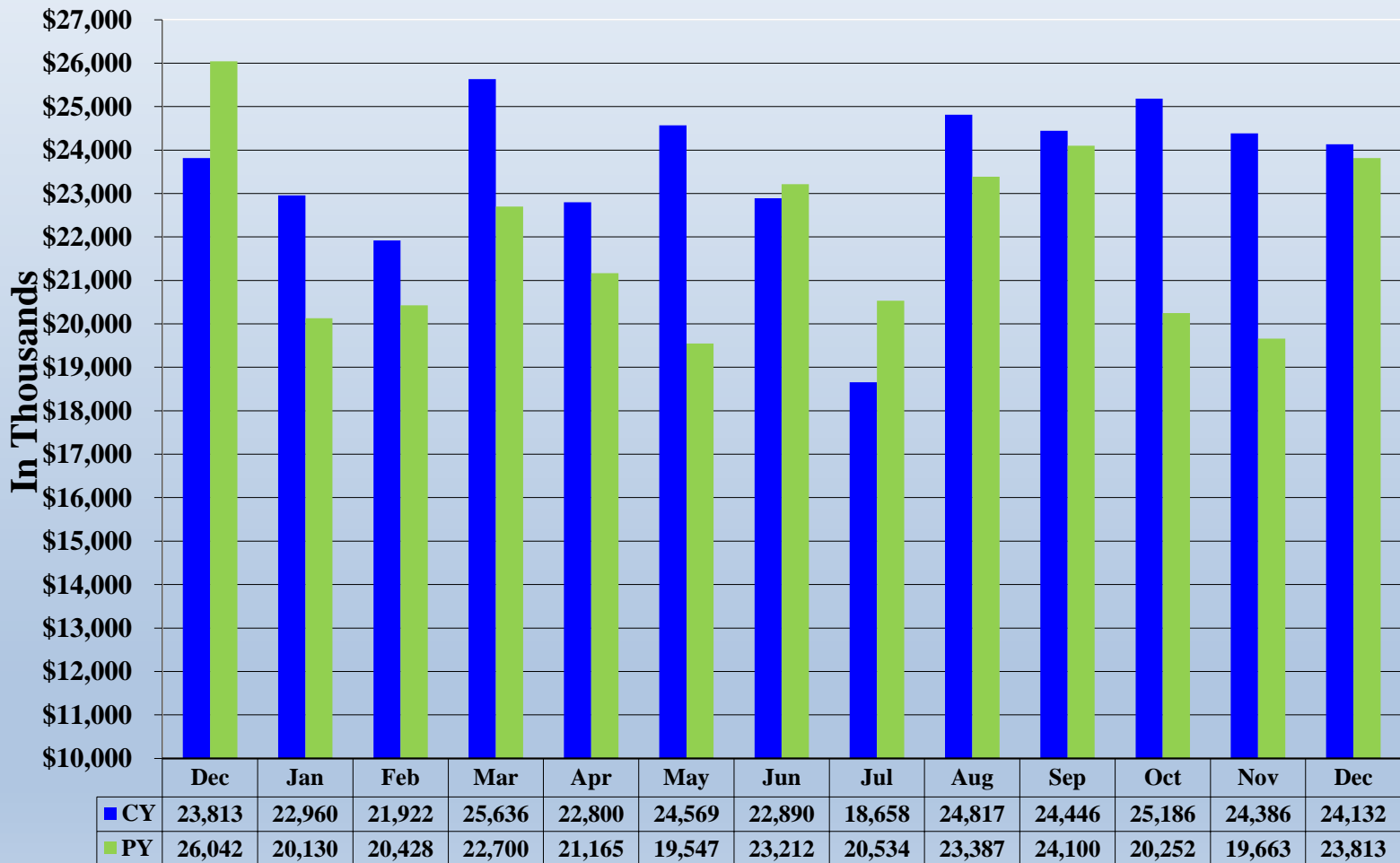
# Accounts Receivable





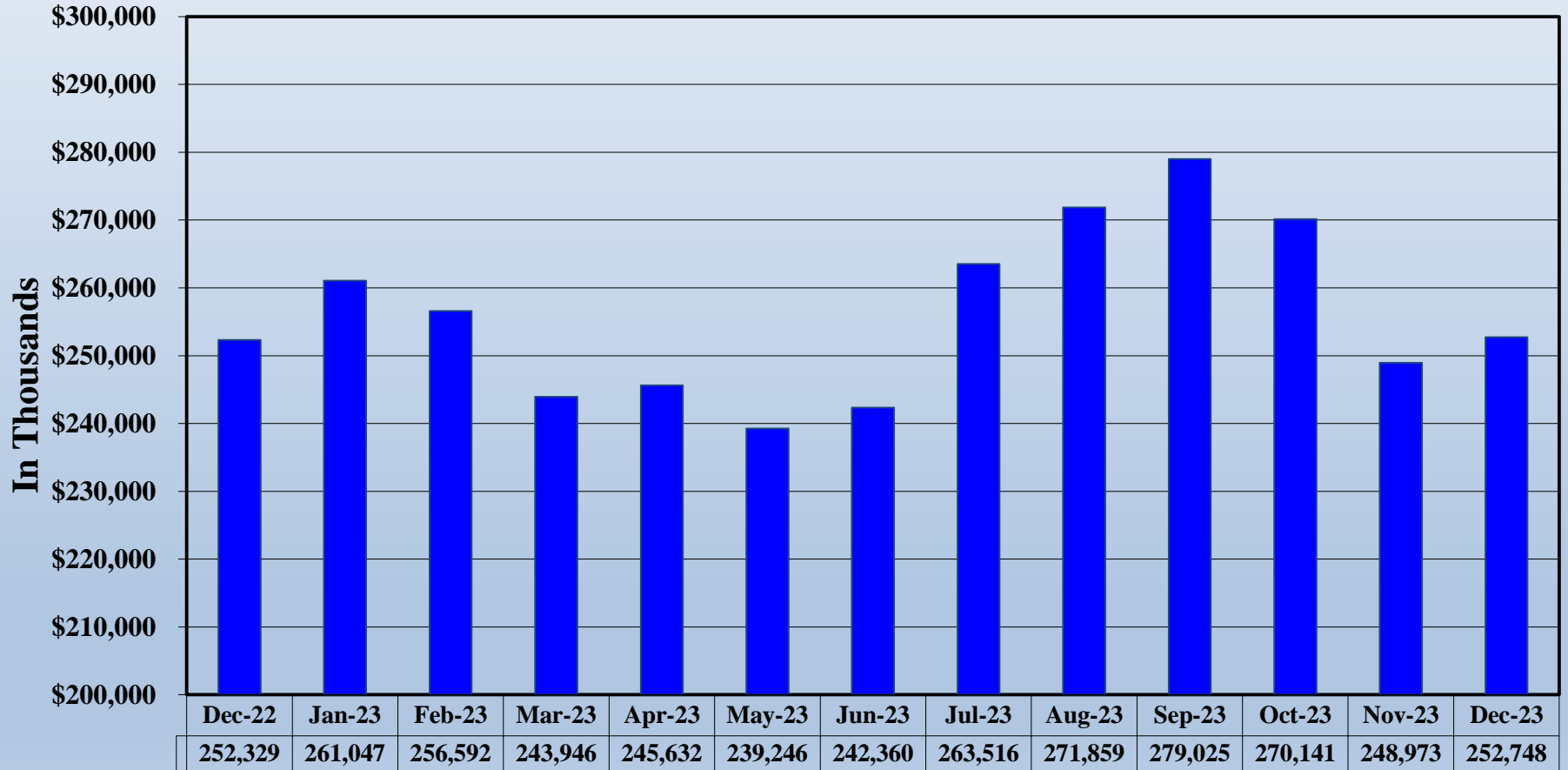
# Total AR Cash Receipts

## 13 Month Trending



# Total Accounts Receivable – Gross

## Thirteen Month Trending



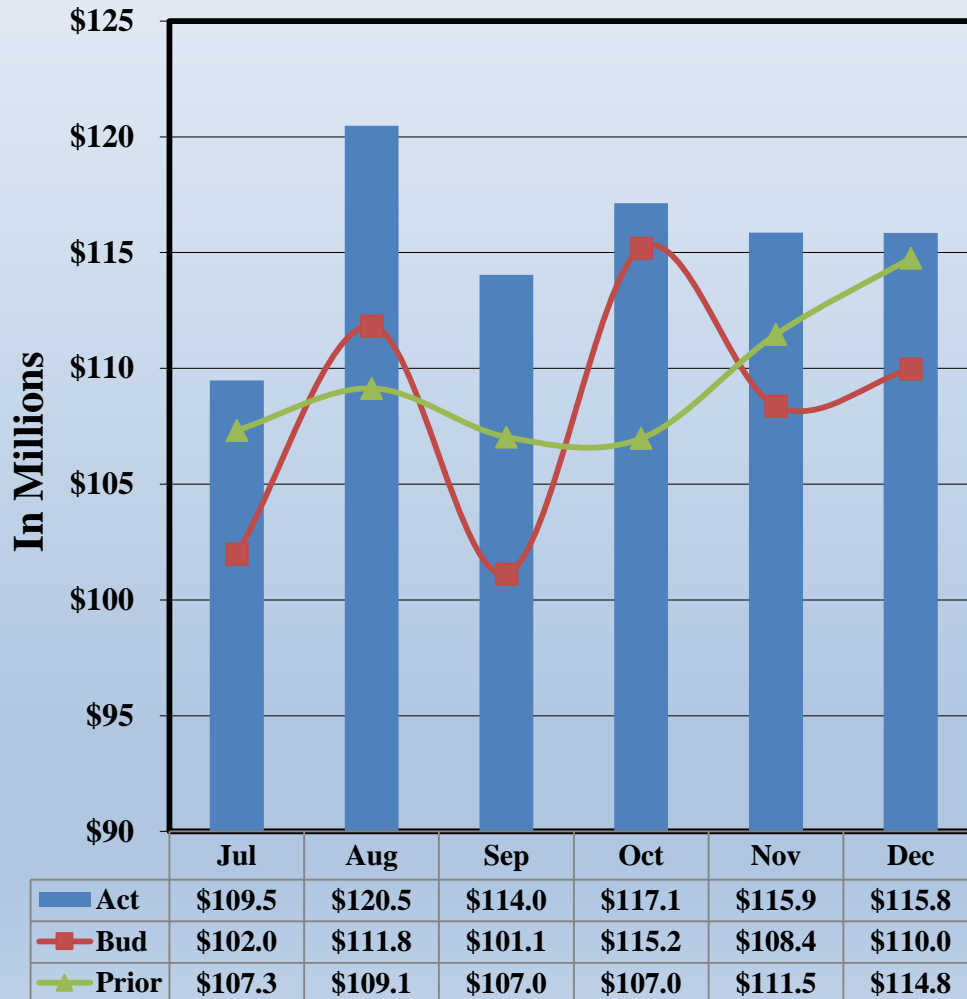
# Revenues & Revenue Deductions





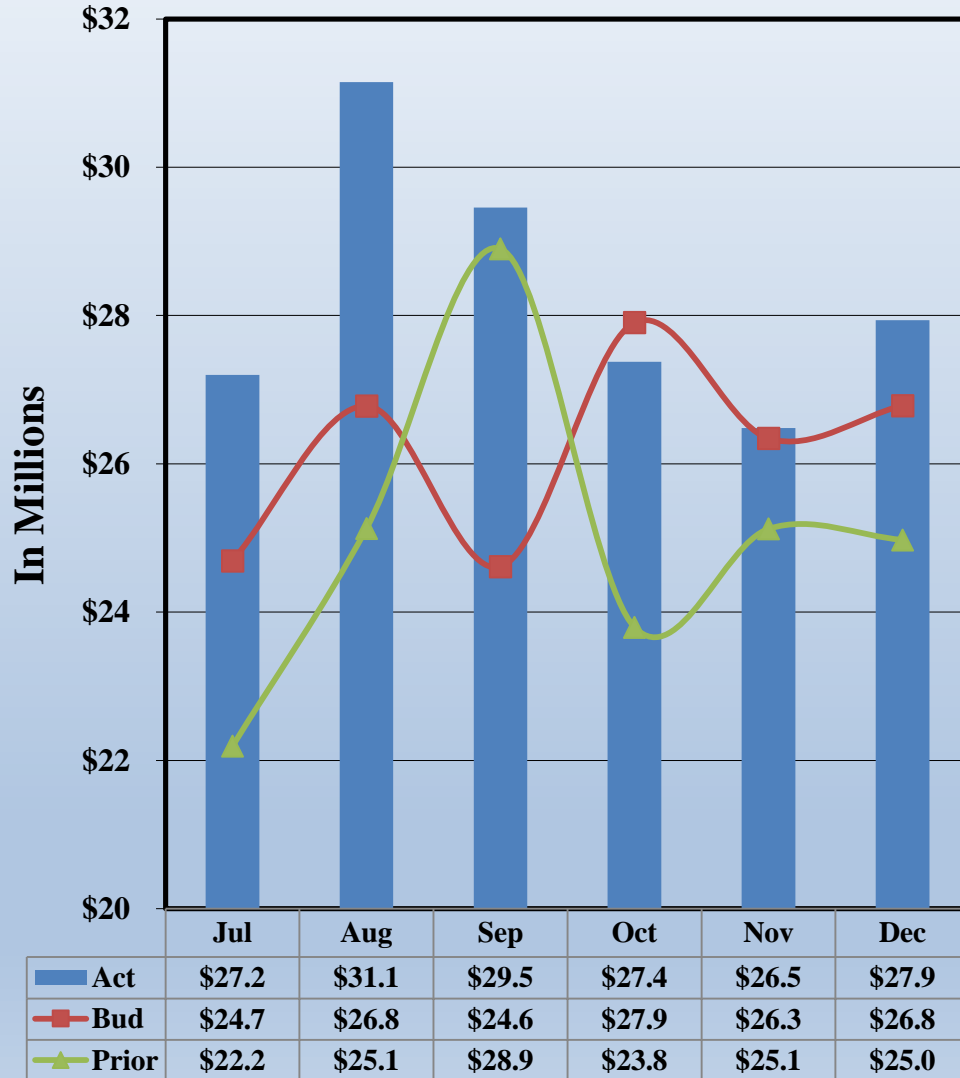
# Total Patient Revenues

## *(Ector County Hospital District)*



	<u>Actual</u>	<u>Budget</u>	<u>Prior Year</u>
Month	\$ 115.8	\$ 110.0	\$ 114.8
Var %		5.3%	0.9%
Year-To-Date	\$ 348.8	\$ 333.5	\$ 333.2
Var %		4.6%	4.7%
Annualized	\$ 1,372.9	\$ 1,357.6	\$ 1,299.0
Var %		1.1%	5.7%

# Total Net Patient Revenues

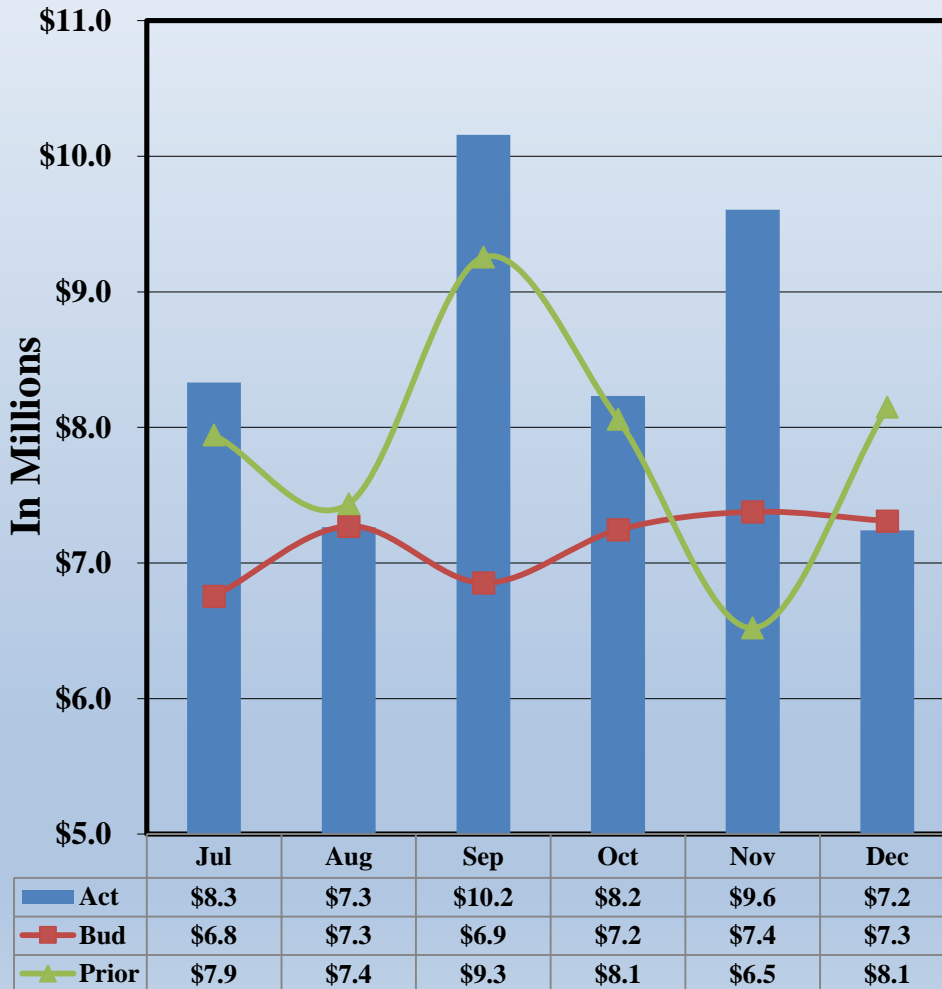


	<u>Actual</u>	<u>Budget</u>	<u>Prior Year</u>
Month	\$ 27.9	\$ 26.8	\$ 25.0
Var %		4.3%	11.9%
Year-To-Date	\$ 81.8	\$ 81.0	\$ 73.9
Var %		0.9%	10.7%
Annualized	\$ 326.3	\$ 327.9	\$ 292.1
Var %		-0.5%	11.7%

# Other Revenue

*(Ector County Hospital District)*

*Including Tax Receipts, Interest & Other Operating Income*



	<u>Actual</u>	<u>Budget</u>	<u>Prior Year</u>
Month	\$ 7.2	\$ 7.3	\$ 8.1
Var %		-0.9%	-11.1%
Year-To-Date	\$ 25.1	\$ 21.9	\$ 22.7
Var %		14.4%	10.3%
Annualized	\$ 97.6	\$ 74.4	\$ 70.7
Var %		31.2%	38.1%

# Operating Expenses



# Salaries, Wages & Contract Labor (Ector County Hospital District)

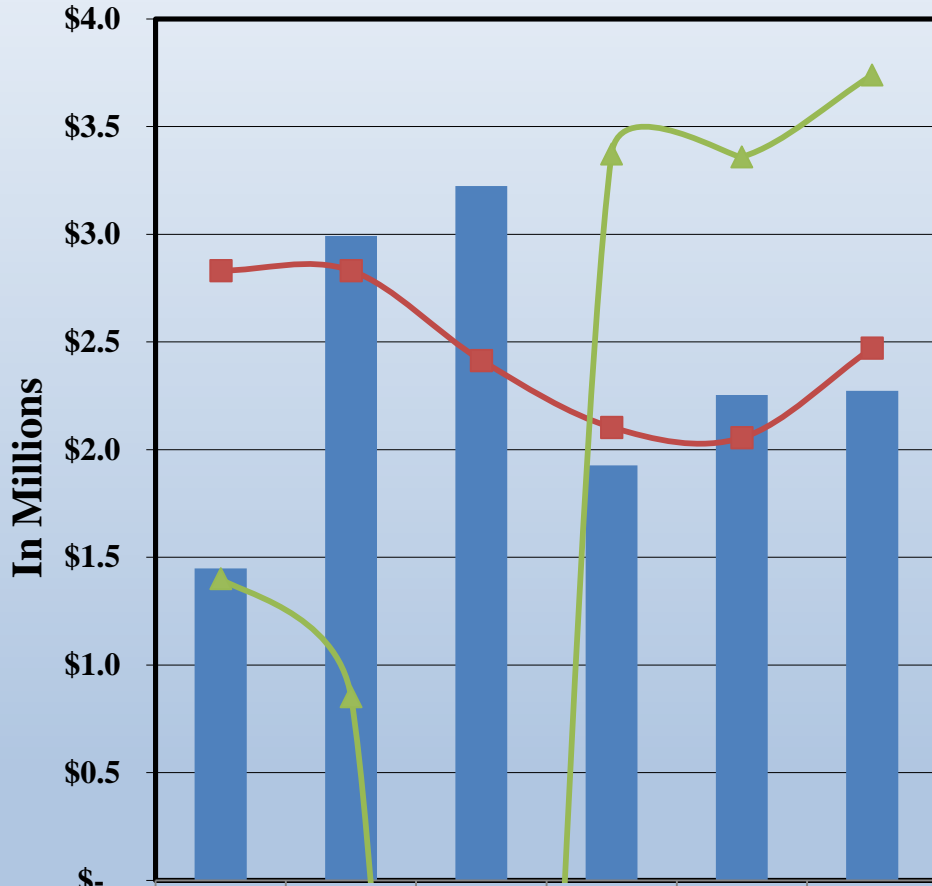


	<u>Actual</u>	<u>Budget</u>	<u>Prior Year</u>
Month	\$ 16.4	\$ 15.8	\$ 14.9
Var %		3.8%	10.1%
Year-To-Date	\$ 49.8	\$ 47.8	\$ 46.3
Var %		4.2%	7.6%
Annualized	\$ 195.1	\$ 193.1	\$ 195.7
Var %		1.0%	-0.3%



# *Employee Benefit Expense*

## *(Ector County Hospital District)*

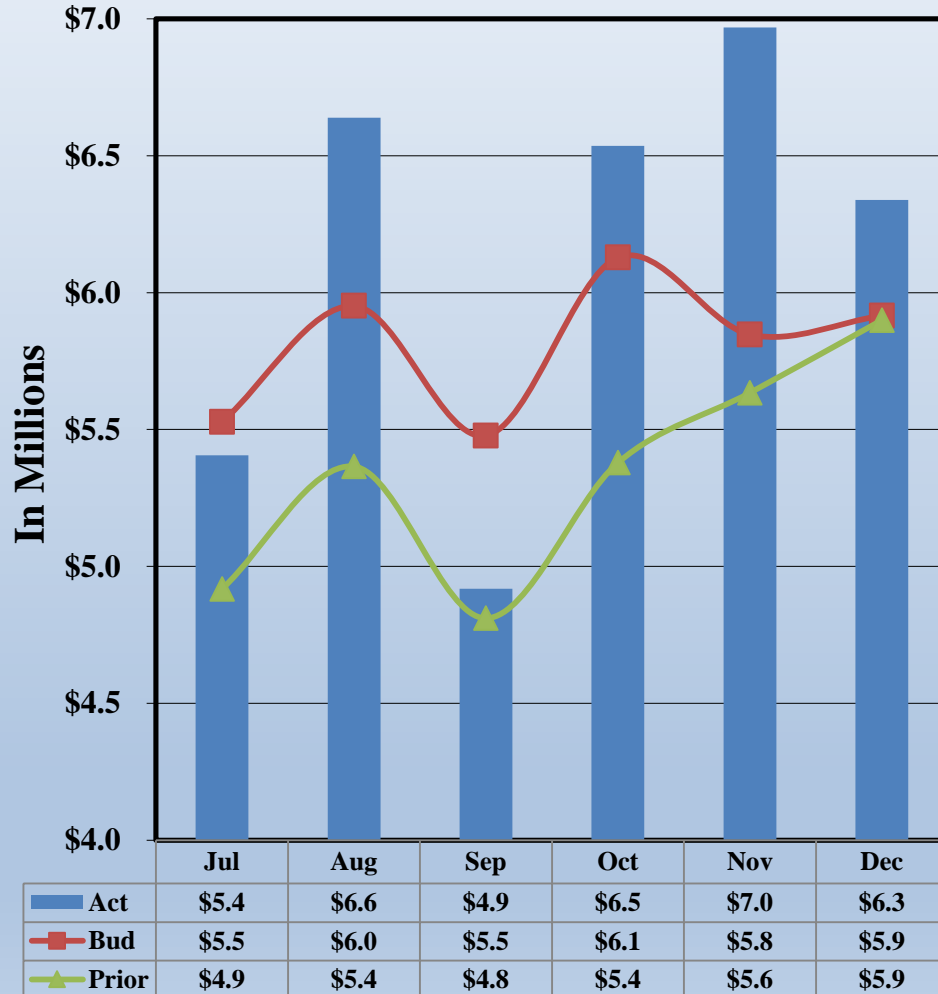


	Jul	Aug	Sep	Oct	Nov	Dec
<span style="color: blue;">■</span> Act	\$1.4	\$3.0	\$3.2	\$1.9	\$2.3	\$2.3
<span style="color: red;">■</span> Bud	\$2.8	\$2.8	\$2.4	\$2.1	\$2.1	\$2.5
<span style="color: green;">▲</span> Prior	\$1.4	\$0.9	\$(6.1)	\$3.4	\$3.4	\$3.7

	<u>Actual</u>	<u>Budget</u>	<u>Prior Year</u>
Month	\$ 2.3	\$ 2.5	\$ 3.7
Var %		-8.1%	-39.2%
Year-To-Date	\$ 6.5	\$ 6.6	\$ 10.5
Var %		-2.7%	-38.4%
Annualized	\$ 43.2	\$ 30.5	\$ 22.7
Var %		41.6%	90.3%

# *Supply Expense*

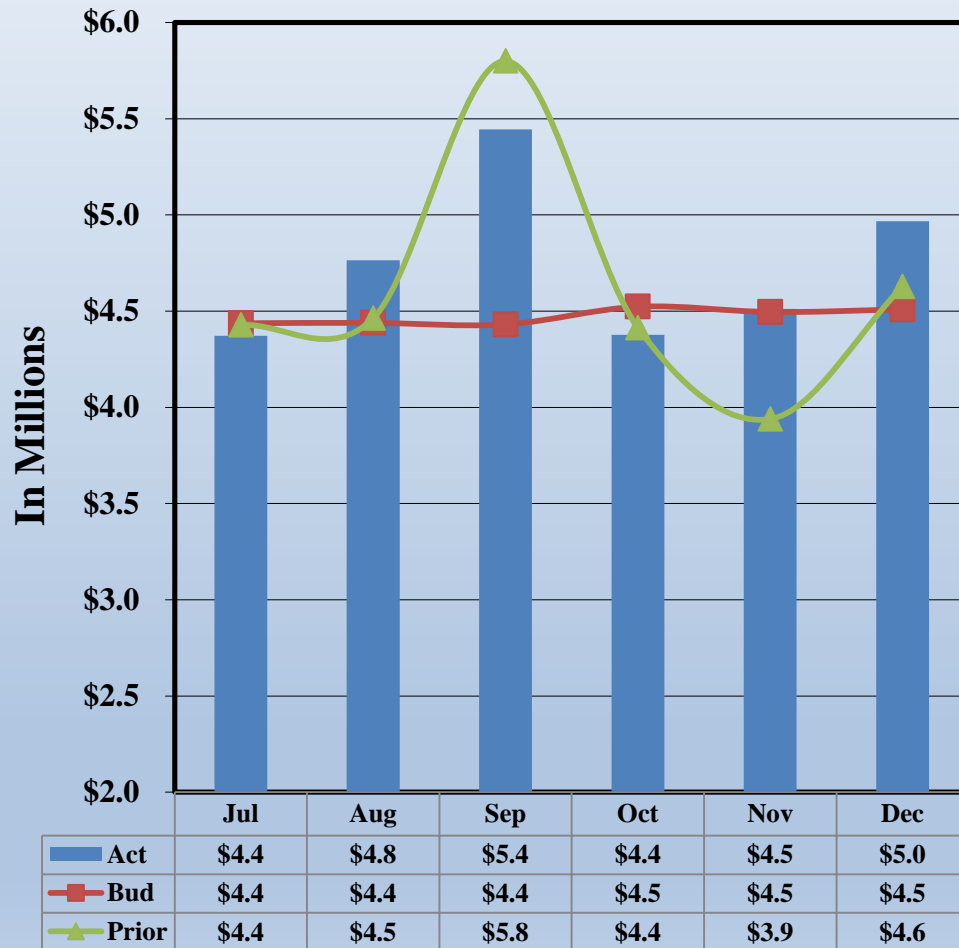
## *(Ector County Hospital District)*



	<u>Actual</u>	<u>Budget</u>	<u>Prior Year</u>
Month	\$ 6.3	\$ 5.9	\$ 5.9
Var %		7.1%	7.4%
Year-To-Date	\$ 19.8	\$ 17.9	\$ 16.9
Var %		10.9%	17.3%
Annualized	\$ 72.5	\$ 70.5	\$ 63.0
Var %		2.8%	15.1%

# Purchased Services

## *(Ector County Hospital District)*

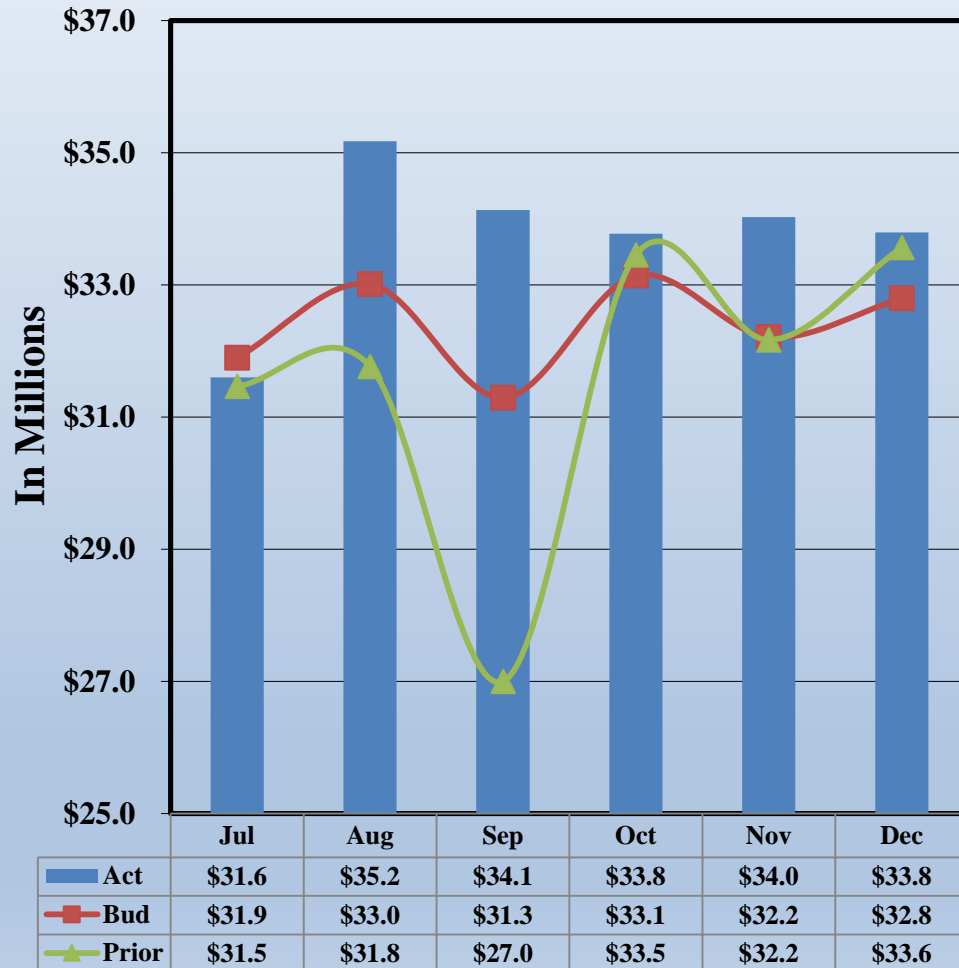


	<u>Actual</u>	<u>Budget</u>	<u>Prior Year</u>
Month	\$ 5.0	\$ 4.5	\$ 4.6
Var %		10.2%	7.3%
Year-To-Date	\$ 13.9	\$ 13.5	\$ 13.0
Var %		2.4%	6.7%
Annualized	\$ 54.8	\$ 54.1	\$ 54.5
Var %		1.3%	0.6%



# Total Operating Expense

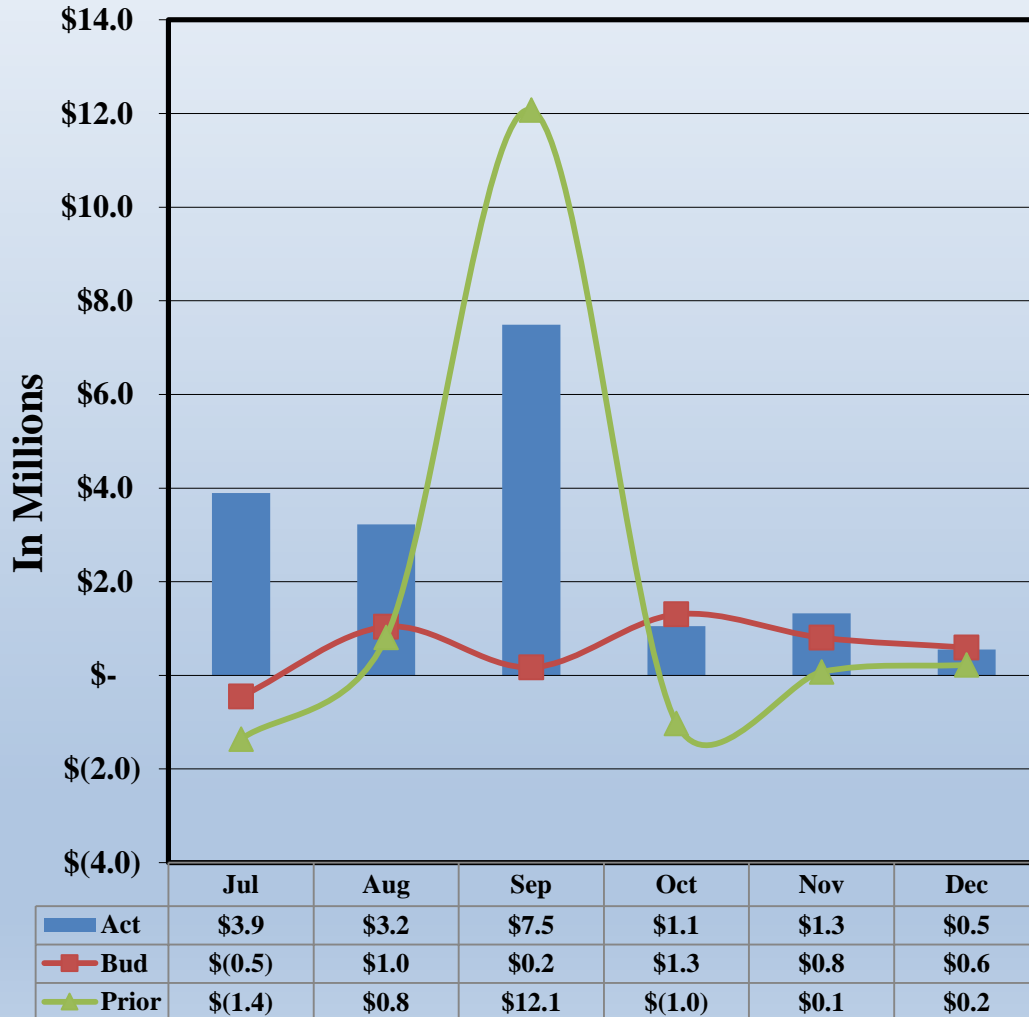
## *(Ector County Hospital District)*



	<u>Actual</u>	<u>Budget</u>	<u>Prior Year</u>
Month	\$ 33.8	\$ 32.8	\$ 33.6
Var %		3.0%	0.7%
Year-To-Date	\$ 101.6	\$ 98.2	\$ 99.2
Var %		3.5%	2.4%
Annualized	\$ 412.8	\$ 396.3	\$ 388.2
Var %		4.2%	6.3%

# Adjusted Operating EBIDA

## *Ector County Hospital District Operations*

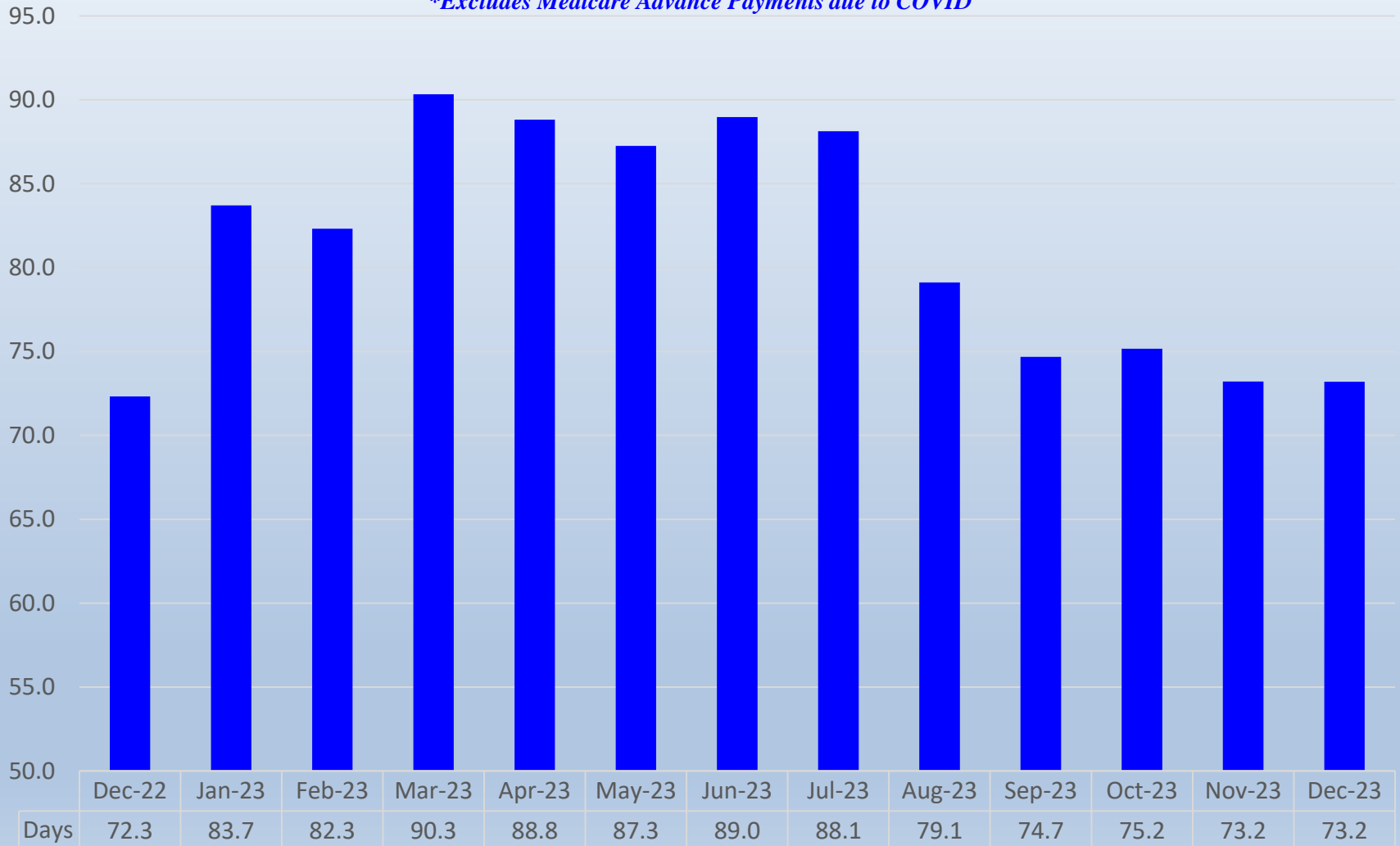


	<u>Actual</u>	<u>Budget</u>	<u>Prior Year</u>
Month	\$ 0.5	\$ 0.6	\$ 0.2
Var %		-16.7%	150.0%
Year-To-Date	\$ 2.9	\$ 2.7	\$ (0.7)
Var %		7.4%	-514.3%
Annualized	\$ 25.3	\$ 21.4	\$ (1.3)
Var %		18.2%	-2046.2%

# Days Cash on Hand

## Thirteen Month Trending

*\*Excludes Medicare Advance Payments due to COVID*



mch





To: ECHD Board of Directors  
Through: Russell Tippin, President & CEO  
Through: Matt Collins, COO  
From: Jerry Hild, Divisional Director of Radiology  
Date: January 18, 2024  
RE: Addendum to SOFIE Contract 001-8420-S-2021R2

Operational Cost: \$200,000 Not Budgeted  
Term: 1/1/2024 – 2/2/2024 (month-to-month auto renewal)

**REQUEST**

The Radiology Department is requesting approval for an amendment to the existing SOFIE contract (001-8420-S-2021R2) for additional funds to the purchase order. Approximate annual expenditure is \$200,000/yr. Contract term is on a month-to-month basis with approximate annual expenditure of \$200,000/yr.

**PURPOSE OF CONTRACT**

Current PO has run out of funds and we are unable to pay outstanding invoices. SOFIE has agreed to provide radiopharmaceuticals for PET until such time that IsoRX obtains FDA approval. The time frame of FDA approval is unknown and has been in process for over 2 years. I have requested a longer extension with SOFIE contract but, Sophie denied this request and wishes to continue the month-to-month option.

**RECOMMENDATION**

Due to existing PO having limited funds we will not be able to provide PET exams once those funds are depleted. All patients requiring PET exams will be on deferral to Midland Memorial Hospital.



## Contract Memo

Date: February 2, 2024

To: Ector County Hospital District Board of Directors

Through: Russell Tippin, President / CEO.  
Courtney Look, CXO

Re: Statement of Work with TPC for TPC Contracted Vizient Clinical Data Base

### **Request**

The Performance Improvement Division is requesting approval for the Statement of Work with TPC for the implementation and sustainment of the Vizient Clinical Database. TPC currently holds the primary agreement with Vizient, and this Statement of Work is an agreement to cover the specifics relating to the implementation and the continued sustainment of the Vizient CDB platform at MCHS.

### **Cost**

The contracted price between TPC and Vizient for the CDB platform is currently \$107,649 for CY2024. The cost of this platform has been budgeted in the FY2024 budget, and the cost will be deducted from the profits accumulated through TPC.

### **Benefits**

This system is a database that utilizes our claims based data, and performs algorithms which are predictive of how we are performing in regards to quality metrics defined by CMS. This system will provide benchmarking across TPC and many other facilities to show how we are performing in these quality metrics and resource usage. This system will also provide internal performance improvement insights that will help us achieve our strategic goals for Quality.

### **Historical**

The implementation of this quality database platform began in April of 2023 and is completed as of 1/15/2024. We are currently in the process of training and establishing workflow now that it is implemented.

### **Recommendation**

The Performance Improvement Division recommends proceeding with renewal of this contract and the partnership with TPC and Vizient to provide these services.

**MEMORANDUM**

TO: ECHD Board of Directors

FROM: Carlos Aguilar, Director of Engineering  
Through Matt Collins, Chief Operating Officer

SUBJECT: Siemens Industry, INC.

DATE: January 9, 2024

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**Cost:**

Proposal Price Total	<b>\$191,064.00</b>
Paid quarterly	\$47,766.00

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**Background:**

- Contract extension would begin on March 1, 2024 and continue until February 28, 2029.
- HVAC control services – automation and preventive maintenance.
- Room pressure monitor calibration and certification
  - On-going performance assurance annually.

**Staffing:**

No additional FTE's required

**Disposition of Existing Equipment:**

N/A

**Implementation Time Frame:**

N/A

**Funding:** budgeted operational expense

**MEMORANDUM**

TO: ECHD Board of Directors  
FROM: Kim Leftwich, DNP, RN – Chief Nursing Officer  
SUBJECT: Phillips Fetal Monitoring System  
DATE: January 1, 2024

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**Cost:**

Phillips Fetal Monitoring System \$358,524.01

**Budget Reference:**

CMN Funds

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**Background:**

Our current Phillips Fetal Monitoring System is 14 years old. The staff are having to send the monitors for repairs often and the parts are becoming obsolete. The needed repairs are not possible, and we are having to close rooms until the parts are located and our monitors are refurbished. Purchasing this system will allow MCH to keep all labor rooms open, and we will have the ability to safely provide care to our laboring moms and their babies.

**Staffing:**

No additional FTE's will be required.

**Implementation Time Frame:**

June of 2024

**Funding:**

CMN Funds



**Plan:** The organization-wide QAPI Plan encompasses major important aspects of care provided by the hospital in support of the achievement of MCH’s mission and strategic goals. This includes continual quality data measurement, assessment and process improvement activities. The Plan describes the overall process for Departments and Services to collaboratively perform QAPI activities in a systematic manner, including the communication of activities and outcomes directed towards improving quality care and services.

**Goal:** The goals of the Quality Plan of Medical Center Health System are as follows:

- To make gradual improvements across a minimum of 80% of the department specific QAPI projects which are in support and improvement of the MCH strategic plan.
- Educate 100% of MCH department leaders on how to write effective corrective action plans and measurable goals for CY2024.

**Authority & Responsibility:** The ECHD Board of Directors has the authority and responsibility to require and support a Quality Assurance and Performance Improvement Program (QAPI) at Medical Center Hospital. The ECHD Board of Directors has delegated the responsibility of implementing an organization-wide QAPI program to the CEO and Quality and Patient Safety Department.

**ECHD Board of Directors:** The ECHD Board of Directors receives QAPI reports from the council or council designee at minimum annually.

**CEO:** The CEO oversees the development and implementation of the QAPI activities to assure the integration and coordination of service-specific activities into the organization- program. The CEO delegates authority to the Quality and Patient Safety Department for coordinating and implementing the program.

**Medical Staff Responsibility:** Medical Staff Members are assigned by the MEC to serve on the Quality Assurance and Performance Improvement Committee (QAPI). QAPI monitors the approved QAPI Plan indicators and reports actions and findings to the MEC and Leadership defined above.

**Department Leader Responsibility:** Every department, both clinical and non-clinical, within MCHS is responsible for implementing quality assurance and performance improvement projects within their departments. Department Leaders will identify quality indicators, collect and analyze data, develop and implement changes with their frontline staff to impact their identified QAPI goal for the year. Individual department’s QAPI goal progress should be reported out to the QAPI Committee as scheduled, at minimum yearly.

**QAPI Committee:** The QAPI Committee is an interdisciplinary team that oversees the Quality Assurance Performance Improvement activities throughout MCHS.

Committee Role:

- Drive monthly meetings

- Provide QAPI education
- Find ways to remove identified barriers
- Provide and identify cross-functional support needs
- Ensure on-going compliance within the QAPI program
- Annually approve the organizational wide QAPI Plan including individualized department goals or service line specific indicators to improve quality of care utilizing evidence-based practices.
- Receive and act on reports of QAPI outcomes and communicate findings and actions to the Executive team and ECHD Board of Directors.
- Assure QAPI monitoring outcomes are communicated to hospital and medical staff members.
- Assure the effectiveness of sentinel event corrective action through QAPI monitoring.
- Facilitate integration of risk reduction strategies into the QAPI program to reduce medical errors.

The members shall include representation from the following areas: Administration, Nursing, Pharmacy, Ancillary Services, Health Information Management, Information Risk/Safety Management, Quality Facilitator / Management Representative, Physical Environment / Life Safety, Volunteer / Community Member and Medical Staff.

#### **Facility Wide QAPI Integration**

Quality Assurance and Performance Improvement is utilized in many areas of Medical Center Hospital, it is important that all areas of performance improvement are integrated into Hospital Wide QAPI plan.

- Departmental Reports
- Accreditation Reports and Corrective Action Plans
- Service Line QAPI Programs
- Risk/Quality Review Outcomes and Action Plans

**Quality Improvement Processes and Methodology:** Departments/Services should utilize the DMAIC or PDCA processes to benchmark, collect data, trend data, and form action plans to achieve attainable goals. Other lean tools may be utilized as needed.

Outside sources, comparative databases, professional practice standards, national and state benchmarks along with specialty (like stroke, chest pain, cath lab, lab, AIM, etc.) accreditation standards will be utilized to compare outcomes, processes, and to set benchmarks and goals.

**Annual Evaluation:** An annual report, summarizing outcomes of the QAPI program will be submitted to the Executive Leadership Team for approval at the end of the plan year. The report will contain information regarding opportunities identified to improve care through the QAPI process and the effectiveness of actions taken. The Executive Leadership Team shall forward the annual summary and any recommendations they may have to the Quality Medical Committee, Medical Executive Committee,



**Quality Assurance, Performance Improvement  
(QAPI) Plan  
CY 2024**

and The Board of Trustees for final review. The annual report and any recommendations received shall serve as a basis for development of the subsequent QAPI Plan.

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**Associate Chief Patient Experience Officer**

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**Chief Medical officer**

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**Chief Executive Officer**

Department	Lead	FY 2023 Goal	Baseline	Goal Line	Q1	Q2	Q3	Q4
Accreditation	C. Sanchez	***Corrective Action Plans: Ensure monitoring, tracking and sustainability for deficiencies			In good standing	In good standing	In good standing	In good standing
Administration	L. Russell	Administration will increase monthly rounding from 41 rounds to 96 rounds	41	96	29	0	12	0
Biomedical/ Clinical Engineering	Betty Andrews	Biomed/ Clinical Engineering will decrease the number of days for Mission Critical Repairs from 10 days to 7 days.	10	7	8	5	7	7
Business Office	M. Kirby-Davis	Business office will decrease overall denials (focusing on eligibility, authorization, medical necessity) from 12% to 8%.	12%	8%	Did not participate	Did not participate	Did not participate	Did not participate
Cardiac Rehab	R. Rodriguez	Cardiac Rehab will increase the number of patients completing the 36-week Cardiac Rehab sessions from 17% to 22% as per AACVPR compliance criteria.	17%	22%	35%	55%	49%	30%
Cath Lab/CV Services	R. Rodriguez	Cath Lab will increase Same Day Discharge patients from 25% to 30% as per NCDR PCI Metric 4970	25%	30%	29.10%	Delay in obtaining data	Delay in obtaining data	Delay in obtaining data
Care Management	L. Duncan	Care Management will increase care transition scores from 43% to 50%	43%	50%	52%	45%	44%	43%
CDI	Jennifer Sosa	***Discharge planning with ongoing reassessment: One indicator of the effectiveness of the discharge plan is whether or not the discharge was followed by a preventable readmission						
Clinical Nutrition	K. Cannan	The CDI department will increase the physician agree rate from 63.55% to 75%	64%	75%	68%	65%	71%	79%
CMN	H. Howey	Clinical nutrition will go from 50% to 90% of our critical care patients started on Enteral or Parenteral nutrition by LOS day 3 after fluid resuscitation.	50%	90%	48.48%	82.35%	79.75%	90.48%
Communications	T. Tankersley	Will no longer have stand alone goal, will fall under foundation						
Compliance	G. Sredanovich	Communications/Marketing will increase website traffic by 10% from 25,158 to 41,000 visitors/month.	25,158	41,000	37,467	37,550	39,778	--
Dialysis	N. Hays	Compliance will increase Performance Tool from 40% to 80%.	40%	80%	46.70%	58.20%	70.80%	80.00%
ED	S. Bagwell	***Every Contracted Service Evaluated						
Patient Access	R. Gallego	Decrease monthly charges associated with after hours/weekends/holiday from 24% of monthly invoice total (\$27,000) to 18% of total invoice total (\$20,000).	24%	18%	34.93%	22.36%	27.65%	25.13%
Emergency Management	A. Everett	The Emergency Department will decrease blood culture contamination rate from 3.43% to National CAP standard of 3%.	3.43%	3.00%	2.56%	1.71%	1.79%	1.17%
Engineering	C. Aguilar	***ED Policies must by current and revised as necessary						
Family Health Clinic	D. Garcia	*** Hospital with Throughput						
Fiscal Services	G. Trollope	Patient Access will increase Medicare Secondary Payor (MSP) Questionnaire completion from 85% to 95%	75%	95%	93.34%	88.53%	92.30%	94.50%
Foundation	A. Pradon	EM will increase Executive team completion of ICS 300 and 400 for advanced education during disaster from 0% to 100.	0%	100%	0%	0%	0%	0%
Health Information Management	A. Mancha	Engineering will increase the amount of completed daily workorders per month from 63% to 75%	63%	75%	95.30%	92.20%	No Report	No Report
Environmental Services	J. Montes	***Routine and Preventative Maintenance on buildings and patient equipment						
Human Resources	D. Chancellor	FHC will increase the number of wellness visits from 28% to 40%.	28.00%	40%	15.12%	21.15%	27.18%	30.56%
Infection Prevention	Brenda Dalrymple	Fiscal Services will decrease month end close from 9.5 business days to 9 business days.	9.5	9	12	9	9	9
Information Technology	A. Morann	The foundation will increase employee giving participation from 26% to 40%.	26%	40%	25.73%	25.75%	25.42%	19.67%
Infusion Services	V. Lucero	Health Information Management will increase timely completion of operative reports within 24 hours of surgery from 92.7% to 98%.	92.70%	98%	95.40%	95.80%	96.80%	95.70%
Laboratory	T. Ward	*** Medical Record delinquencies						
		EVS will increase the cleanliness rating of all discharge rooms from 92% from 96%.	92%	96%	92%	92%	95%	95%
		Human Resources will implement the 30 Day New Employee Meetings with a director response rate of 0% to 50%.	0%	50%	6%	14%	29%	17%
		Human Resources will implement the 60 Day New Employee Meetings with a director response rate of 0% to 50%.	0%	50%	2%	13%	18%	17%
		Human Resources will implement the 90 Day New Employee Meetings with a director response rate of 0% to 50%.	0%	50%	2%	10%	16%	16%
		Infection Prevention will decrease hospital-wide CLABSI infection rates by 30% from 1.72% to 1.38%.	1.72%	1.38%	1.20%	1.39%	1.23%	0.33%
		***Hospital wide program for the surveillance, prevention and control of HAIs and other infectious diseases						
		Information Technology will increase rounding per employee from 9 events/month to 12 events/month.	9	12	10	9	7	10
		Infusion Services will increase the number of inpatient Midline insertions by 25% from 8 to 10	8	10	12	8	9	10
		*** Must be consistent in quality with inpatient care						
		Lab will increase inpatient STAT CMP TAT within 60 minutes from 80% to 88%.	80%	88%	86.44%	83.08%	85.50%	90.29%
		***Blood Products Adverse Events and Usage (Will work with Risk Management)						
		*** Pathology Discrepancies						

Marketing	T. Coke	Will no longer have stand alone goal, will fall under communications							
Materials Management	M. Duran/ C. McQueen	Materials Management will increase contract compliance from a baseline of 78.6% to 90%.	78.60%	90%	● 80.20%	● 83.92%	● 89.71%	● 91.45%	
Materials Management- Storeroom	J. Vizcaino/ C. McQueen	MM Storeroom will increase to 90% cart compliance on 7 cart types by reviewing 156 of 174 total carts	0%	90%	● 0.00%	● 8.05%	● 36.21%	● 36.21%	
Medical Staff Services	M. Mendoza	Med Staff will increase the percentage of timely operative reports from 92.58% to 98%	92.58%	98%	● 5.90%	● 5.10%	● 3.80%	● 13.60%	
Nuclear Medicine Services	C. Evans	*** Individual Practitioner: Evaluate training, education, experience and competence							
Nursing Services: (See All Below)	K. Leftwich	*** Monitor the quality and safety of nuclear medicine services							
	N. Chapman	*** Track medical errors and adverse events related to NMS. (Will work with Risk Management)							
	N. Mc Quitty	*** Pain Management							
Nursing Education	G. Arroyo	*** Safe Harbor and Sitter hours							
Nursing Unit - 3W	A. Solis	*** Organ, Tissue, Eye Procurement: Annual employee training when policies/procedures change or problems are determined, number of conversions							
Nursing Unit- 4C Medicine	K. Alexander	Nursing Education will increase the one-year retention rate of Prosper residents from 70% to 75%	70%	75%	● 67.59%	● 91.50%	● 92.30%	● 90.41%	
Nursing Unit- 5C Medical/Oncology	K. Pierce	*** Restraints: Assess and monitor the use of restraint or seclusion in the facility, implement actions to ensure that restraint or seclusion is used only to ensure the physical safety of the patient, staff, others.							
Nursing Unit-Pediatrics	J. Navarrete	3W will decrease LOS hours from 30.5 hours to 24 hours.	30.50	24.00	● 28.01	● 27.6	● 27.43	● 28.82	
Nursing Unit-NICU	J. Navarete	4C will improve Nursing Communication Top Box by 26% from 68.1 to 76.5	68.1	76.5					
Nursing Unit- 6C Surgical	M. Schnuriger	5C will decrease the fall rate by 20% from 1.02 to 0.82	1.02	0.82	● 0.66	● 1.18	● 1.23	● 0	
Nursing Unit- 6W Ortho/Neuro	M. Schnuriger	Reduce IV infiltration rate to <2%	5.77%	2%	No Data Obtainable	No Data Obtainable	● 2.47%	● 1.64%	
Nursing Unit- 7C DEU/Tele	K. Pierce	Reduce IV infiltration rate to <5%	9.82%	5%	No Data Obtainable	No Data Obtainable	● 9.15%	● 5.50%	
Nursing Unit- 8C Tele	D. Rodriguez	6C will decrease the fall w/ injury rate by 20% from 0.66 to 0.66	0.66	0.53	● 1.25	● 1.09	● 1.53	● 0	
Nursing Unit- 9C Tele	N. Hays	6W will increase post medication pain score compliance from 85% to 95%	85%	95%	● 88%	● 93%	● 97%	● 100%	
Nursing Unit- ICU2	L. Mota	7C will decrease the fall rate with injury by 20% from 0.62 to 0.50	0.62	0.5	● 0.00	● 0.00	● 0.00	● 0.83	
Nursing Unit- ICU4	L. Mota	To increase compliance of administration of correct pain meds to be in compliance with the pain scale and physician orders from 79% to 95%.	79%	95%	● 83.00%	● 97.00%	● 93.00%	● 97.00%	
Nursing Unit- LD and Post-Partum	M. Conant	9C will decrease the fall rate by 20% from 2.83 to 2.26	2.83	2.26	● 1.91	● 2.45	● 2.76	● 3.27	
Nutrition Services	T. Crowe	ICU2 will decrease their CLABSI rate by 20% from 2.95 to 2.36.	2.95	2.36	● 1.77	● 0	● 0	● 0	
Pastoral Care	D. Herget	ICU4 will decrease their CLABSI rate by 20% from 3.32 to 2.65.	3.32	2.65	● 1.89	● 1.61	● 1.67	● 0	
Patient Experience	M. Loya	Labor & Delivery/Postpartum will increase the amount of severe hypertensive (Systolic >160 or Diastolic >110 or both) patients treated within 60 minutes or less from 62% to 75%	62%	75%	● 79.41%	● 60.00%	● 64.71%	● 88.24%	
PBX/Operator	B. Timmons	Will no longer have stand alone goal, will fall under Pediatrics							
Quality and Patient Safety	K. Bairrington	Nutrition will increase modified diet logs checked by Supervisor prior to trays leaving the kitchen from 90% to 95%	90%	95%	● 90.40%	● 94.11%	● 95.72%	● 96.39%	
	K. Bairrington	Pastoral Care will increase the amount of Fireback consults (spending at minimum 12 minutes with patients) from 63% to 80%	63%	80%	● 74.50%	● 72.75%	● 85.19%	● 82.18%	
	K. Bairrington	Increase patient experience impact observations from 8/mo. to 24/mo. for FY23.	8	24	No Data Obtainable	● 24	● 33	● 26	
	K. Bairrington	*** Patient Grievances and Patient Complaints: All data collected regarding patient grievances, as well as other complaints that are not defined as grievances							
	K. Bairrington	PBX will decrease dropped calls from 3% to 1%	3.0%	2.0%	● 2.60%	● 1.93%	● 1.75%	● 1.72%	
	K. Bairrington	Decrease falls with injury by 20% from 0.46 to 0.37	0.46	0.37	● 0.37	● 0.42	● 0.44	● 0.32	
	K. Bairrington	*** • Medicare quality, met reporting measures • Hospital Wide Readmissions Data • Fall Committee Data • Moderate Sedation/Adverse Anesthesia Events • Ambulatory Quality • Critical Lab Value Reporting							
	K. Bairrington	To decrease the % anti-Xa levels out of therapeutic range from 51% to less than 40% during heparin drip management by end of FY23 (when managed for more than 2 levels).	51%	40%	● 49.91%	● 50.89%	● 52.16%	● 49.90%	

Pharmacy	M. Hong	<p>***Will work with Risk Management</p> <ul style="list-style-type: none"> <li>Evaluate Medication Administration Timing Policies</li> <li>Safe and Effective Medication Administration</li> <li>Adverse Patient Reactions</li> <li>Drug Administration Errors</li> <li>Adverse Drug Reactions</li> <li>Medication Errors: Near Misses</li> </ul> <p>*** Medication reconciliation, high risk drugs, look alike/sound alike drugs, dangerous abbreviations</p> <p>***Adopt policies and procedures that identify the types of events that must be reported immediately to the attending physician or to QAPI</p> <p>***Hospital wide program for the optimization of antibiotic use through stewardship (Will work with Infection Prevention)</p>						
Radiology Services	C. Evans	<p>Radiology will increase compliance with contrast medication scanning rates from 75.5% to 90%</p> <p>***Improper patient preparation: inadequate IV access or lack of pre-medication, such that procedures must be cancelled or reordered</p> <p>*** Poor image quality: Repeats of the same studies in the hospital for the same patient within a short time span</p> <p>***Diagnostic imaging studies or procedures inconsistent with the applicable hospital written protocol</p> <p>*** Must be consistent in quality with inpatient care</p> <p>***CT dose index/MRI Safety</p>	75.5%	90.0%	● 98.80%	● 98.77%	● 99.71%	● 99.26%
Regional Development/ Outreach	M. Hutson	Will fall under Administration moving forward						
Rehabilitation Services: Acute IP Physical Therapy	E. Garcia	From Baseline Inpatient THERAPY Services will complete stroke evals within 24 hours of orders being placed of 67% to 100%	67%	100%	● 85.20%	● 84.50%	-	-
Rehabilitation Services: OP Physical Therapy	E. Garcia	Outpatient Therapy Services will increase the volume of patients seen by 7% from 1300 visits to 1391 visits	1,300	1,391	● 1275	● 1347	-	-
Respiratory Services	R. Galindo	Respiratory Therapy will increase Critical Value reporting from 86% to 96% to meet CAP standards	86%	96%	● 92%	● 93%	● 89%	● 92%
Risk Management	M. Gallegos	<p>Risk Management will increase system wide medication event reporting by 42% from 123 reports to 155 reports</p> <p>***Will work with multiple Departments on QAPI Requirements</p> <ul style="list-style-type: none"> <li>Threats to Safety (Falls, ID issues, Injuries)</li> <li>Unanticipated Deaths</li> <li>Adverse Events and Near Misses</li> <li>RCA Follow-up</li> </ul>	123	155	● 140	● 142		
Safety	A. Everett	Safety will increase the compliance of preassessment time for an engineering/construction project from a baseline of 1 day to 3 days.	70%	100%	● 80%	● 100%	● 100%	● 100%
Surgical Services: (See all below)	M. Sullivan	*** Unplanned return to surgeries						
Perioperative Services	J. Ambrose/M. Sullivan	***Surgery Errors (Wrong Site/Wrong Surgery) (Will work with Risk Management)						
Endoscopy	T. Carroll	***To maintain anesthesia adverse events rate of 0%.						
Day Surgery/Pre-Op	T. Carroll	Perioperative Services will increase Colon SSI Bundle compliance from 0% to 50%.	0%	50%	● 0%	● 22.20%	● 63.20%	● 72.70%
OR Ambulatory	J. Barroquillo	Will roll up into "Perioperative Services."						
OR Main	J. Barroquillo	Will roll up into "Perioperative Services."						
OR PACU	T. Carroll	Will roll up into "Perioperative Services."						
Endoscopy	T. Carroll	Will roll up into "Perioperative Services."						
Sterile Processing	M. Sullivan	Sterile Processing will increase compliance of Colon SSI Bundle: sterile indicators from 0% to 50%	0%	50%	● 0%	● 0%	● 0%	● 0%
Transport Services	J. Hild	Transport Services will clean transport equipment after patient use will increase by 10% from ___ to ___.	87%	97%	● 83.40%	● 92.40%	n/a	n/a
Trauma Services	J. McKee	The Trauma Service Department increase Loop Closure on OFIs from ___50_% to 80%	50%	80%	● 71.10%	● 66.90%	● 81.90%	● 60.60%
Urgent Care	C. Tovar	Urgent care will increase NRC score by 5.58 points from 60.5 to 66.	60.5	66.0	● 59.30	● 59.60	● 59.20	● 58.90
Wound Care	V. Lucero	Wound Care will decrease the average wait time of our patients from 50 min to 35 minutes.	50	35	Data Not Obtainable	● 44	● 43	● 40
ECHD Police Department	K. Cecil	*** Must be consistent in quality with inpatient care						
		ECHD Police Department will increase CWI Rounds to 10/day at 83%.	0.00%	83%	● 84%	● 98%	● 97%	● 100%

**Health and Wellness**

A. Tyler

Employee Health and Wellness Department will increase flu vaccination compliance from 57% to 85%.

57%

85%

● 34%

● 54.90%

-

-

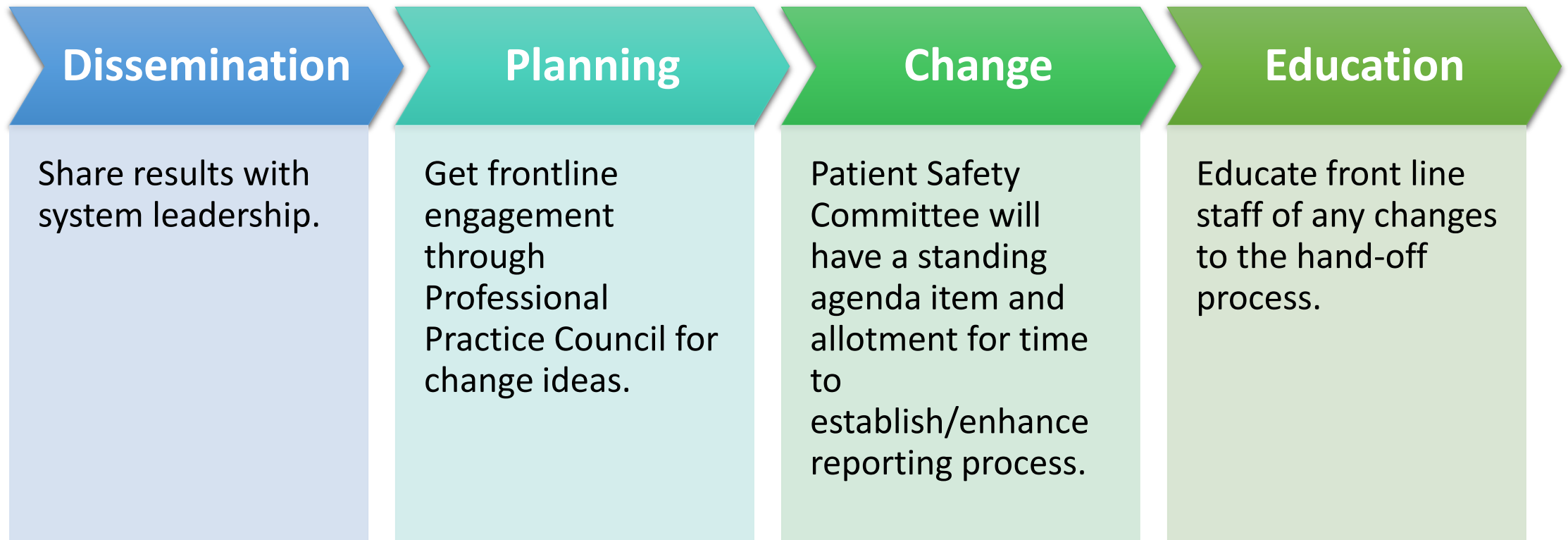
# 2023 Patient Safety Survey Results

Domain	Critical Information Index	Culture Management and Policy Index	Error Information and Remediation Index	Teamwork Index
Question Asked	Problems often occur in the exchange of information across hospital units.	The actions of the hospital management show that patient safety is a top priority	In this unit, we discuss ways to prevent errors from happening again.	When a lot of work needs to be done quickly, we work together as a team to get the work done.
	Important patient care information is often lost during shift changes.	Our procedures and systems are good at preventing errors from happening	We are informed about errors that happen in this unit.	When one area in this unit gets really busy, others help out.
			We are given feedback about changes put into place based on event reports.	
Percentile Score Ranking:	50-74 <sup>th</sup>	25-49 <sup>th</sup>	50-74 <sup>th</sup>	25-49 <sup>th</sup>



Area of Performance Improvement Focus:  
Important patient care information is often lost during shift changes.

## Action Plan Steps



## Regional Services

### February 2024 Board Report

#### Community Outreach-

Pediatrics- Dr Hart outreach to all urgent cares in Ector County along with MCH Pediatric and Women's hospital services

Infusion outreach to primary care and neurologist in Ector County

MCH pharmacy outreach to urgent care and primary care Ector County

#### Regional Site Visits-

Ward Memorial- myself and Cortney Smith met with CEO and CNO to discuss MCH Acute Teleservices. Ward will discuss with team members and get back with us.

Ward staff also working closely with IT testing commonwell connection to assure providers in Monahan's are receiving all documentation necessary. This will help with larger rollout to community providers.

Kermit- met with med surge staff and director along with case management, they have had no issues transferring patients and swing bed referrals seem to be going well. Kary stated she will be retiring soon. I also met with ED, they stated they did have issue with transfer a few days ago with a stroke patient, meeting with MCH staff and will get back to Kermit.

Andrews- met with Dr Nayaks office, provided a few updates on providers. Theresa not in the office but staff had no reports of any issues with referrals.

Seminole- met with ED staff, they have had no issues with transfers. Provided information on waiting list and how that works within our facility.

Ft Stockton- spoke with ED staff, they had no issues to report with transfers. Rachel not onsite for regional visits but spoke with her over the phone to discuss MCH Acute Teleservices. She stated her and Betsy will review packet and get back with us for another potential site visits to discuss in more detail.

Reeves- spoke with ED staff no issues with transfers. Met with Shawn med surge director as Faye was not available. We discussed MCH acute teleservices. Shawn will get with Faye, and we will discuss more in detail, he states he believes this is something they would be interested in. He stated swing bed referrals are going well and believes since he works with our case mgt department he thinks its really helping get those referrals over. No issues currently.

All facilities were also given updates on MCH no longer using Xferall for transfers and instructed to call MCH transfer Cetner.

<b>Month 23'</b>	<b>On Demand</b>	<b>Scheduled</b>
January	20	95
February	24	65
March	21	76

April	20	70
May	24	70
June	10	64
July	16	37
August	17	89
September	21	29
October	18	TBD (issues running report)
November	24	TBD
December	36	TBD