

**ECTOR COUNTY HOSPITAL DISTRICT
BOARD OF DIRECTORS MEETING
APRIL 1, 2025 – 5:30 p.m.
MEDICAL CENTER HOSPITAL BOARD ROOM (2ND FLOOR)
500 W 4TH STREET, ODESSA, TEXAS**

AGENDA (p.1-2)

- I. CALL TO ORDERWallace Dunn, President**
- II. ROLL CALL AND ECHD BOARD MEMBER ATTENDANCE/ABSENCESWallace Dunn**
- III. INVOCATIONChaplain Doug Herget**
- IV. PLEDGE OF ALLEGIANCEWallace Dunn**
- V. MISSION / VISION / VALUES OF MEDICAL CENTER HEALTH SYSTEM ... Don Hallmark (p.3)**
- VI. AWARDS AND RECOGNITION**
 - A. April 2025 Associates of the MonthRussell Tippin**
 - Nurse - Tausha Martinez
 - Clinical – Amanda Fuentes
 - Non-Clinical - Gilbert Leonico
 - B. Net Promoter Score RecognitionRussell Tippin**
 - Dr. Santiago Giraldo
 - Gastroenterology
- VII. CONFLICT OF INTEREST DISCLOSURE BY ANY BOARD MEMBER**
- VIII. PUBLIC COMMENTS ON AGENDA ITEMS**
- IX. CONSENT AGENDA..... Wallace Dunn (p.4-66)**

(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, March 4, 2025**
 - B. Consider Approval of Joint Conference Committee, March 25, 2024**
 - C. Consider Approval of Federally Qualified Health Center Monthly Report, February 2025**
- X. COMMITTEE REPORTS**
 - A. Finance Committee Don Hallmark (p.67-109)**
 - 1. Financial Report for Month Ended February 28, 2025
 - 2. FEMA Funds Update
 - 3. Consent Agenda
 - a. Consider Approval of MedSharps Agreement Renewal

- 4. Consider Approval of MedImpact Amendment
- 5. Consider Ratification of the Emergency Purchase of Dell UPS 3W Replacement

- B. Audit Committee** Don Hallmark (p.110-128)
- C. Executive Policy Committee**.....Don Hallmark/Bryn Dodd
- D. Real Estate Committee** Don Hallmark
- XI. TTUHSC AT THE PERMIAN BASIN REPORT** Dr. Timothy Benton
- XII. TRAUMA RESOLUTION** Dr. Gregory York (p.129)
- XIII. CONSIDERATION/APPOINTMENT OF DISTRICT 5 DIRECTOR**.....Wallace Dunn
- XIV. PUBLIC HEARING - AUTHORIZE A LOCAL PROVIDER PARTICIPATION FUND AND CONSIDER FISCAL YEAR 2025 MANDATORY PAYMENT RATE**Wallace Dunn
- XV. ORDER AUTHORIZING AND IMPLEMENTING A LOCAL PROVIDER PARTICIPATION FUND UNDER CHAPTER 300 OF THE TEXAS HEALTH AND SAFETY CODE** Steve Steen (p.130-131)
- XVI. PRESIDENT/CHIEF EXECUTIVE OFFICER’S REPORT AND ACTIONS**
.....Russell Tippin
 - A. Measles Update**
 - B. Trash Pick up – April 26th**
 - C. Ad hoc Report(s)**

XVII. 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; (3) Deliberations regarding Economic Development Negotiations and (4) Deliberation regarding negotiations for health care services, pursuant to Section 551.085 of the Texas Government Code.

XVIII.ITEMS FOR CONSIDERATION FROM EXECUTIVE SESSION

- A. Consider Approval of MCH ProCare Provider Agreements**
- B. Consider Approval of MCH TraumaCare Provider Agreements**
- C. Consider Approval of MCH Lease Agreement**
- D. Consider Approval of Enterprise Zone Tax Abatement Agreement**

XIX. ADJOURNMENTWallace 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
MARCH 4, 2025 – 5:30 p.m.**

MINUTES OF THE MEETING

MEMBERS PRESENT: Don Hallmark, Vice President
Bryn Dodd
Richard Herrera
David Dunn
Will Kappauf

MEMBERS ABSENT: Wallace Dunn
Kathy Rhodes

OTHERS PRESENT: Russell Tippin, Chief Executive Officer
Matt Collins, Chief Operating Officer
Steve Steen, Chief Legal Counsel
Kim Leftwich, Chief Nursing Officer
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

Don Hallmark, 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

Don Hallmark called roll, Wallace Dunn and Kathy Rhodes were absent.

David Dunn moved, and Bryn Dodd seconded the motion to approve the absences for Wallace Dunn and Kathy Rhodes as excused. The motion carried.

III. INVOCATION

Chaplain Doug Herget offered the invocation.

IV. PLEDGE OF ALLEGIANCE

Don Hallmark led the Pledge of Allegiance to the United States and Texas flags.

V. MISSION/VISION OF MEDICAL CENTER HEALTH SYSTEM

David Dunn presented the Mission, Vision and Values of Medical Center Health System.

VI. AWARDS AND RECOGNITION

A. March 2025 Associates of the Month

Russell Tippin, Chief Executive Officer, introduced the March 2025 Associates of the Month as follows:

- Clinical – Teresa Sanchez Deleon
- Non-Clinical – Maria Guadalupe Lopez Garcia
- Nurse – Abigail Levario Carrasco

B. Net Promoter Score Recognition

Matt Collins, Chief Operating Officer, introduced the Net Promoter Score High Performer(s).

- MCH ProCare Walk-in Clinic

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, February 11, 2025**
- B. Consider Approval of Joint Conference Committee, February 25, 2025**
- C. Consider Approval of Federally Qualified Health Center Monthly Report, January 2025**

David Dunn moved, and Richard Herrera 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 January 31, 2025
2. Consent Agenda
 - a. Consider Approval of Morrison Agreement Renewal.
 - b. Consider Approval of the Newborn Hearing Screening Services Contract Renewal.

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

B. Executive Policy Committee

The Executive Policy Committee met on February 27, 2025 to review and approve three (3) MCH policies meeting the committee guidelines. The committee recommends approval of the submitted policies as presented.

Bryn Dodd moved, and David Dunn seconded the motion to approve the Executive Policy Committee report as presented. The motion carried.

XI. CONSIDER APPROVAL OF ENDOWMENT FUNDS DISTRIBUTION

Russell Tippin, Chief Executive Officer, presented the Endowment Funds Distribution Agreement from Prosperity Bank for approval.

As noted in the investment agreement, the total net income for Odessa Junior College Trust is \$39,112.52. Ninety percent of that amount is \$35,201.27, and this amount will be paid to Odessa Junior College. Ten percent, \$3,911.25 will be retained as an addition to principal.

The total net for the TTUHSC-PB Trust is \$138,602.71. Ninety percent of that amount is \$124,742.44, and this amount will be paid to TTUHSC-PB. Ten percent, \$13,860.27 will be retained as an addition to principal.

The total net income for University of Texas-PB is \$32,697.13. Ninety percent of that amount is \$29,427.42, and this amount will be paid to University of Texas-PB. Ten percent, \$3,269.71 will be retained as an addition to principal.

David Dunn moved, and Richard Herrera seconded the motion to approve the Endowment Funds Distribution Agreement from Prosperity Bank as presented. The motion carried.

XII. TTUHSC AT THE PERMIAN BASIN REPORT

Dr. Timothy Benton provided the TTUHSC at the Permian Basin report. This report was informational only and no action was taken.

XIII. CONSIDER CERTIFICATION OF UNOPPOSED CANDIDATES

Bryn Dodd moved, and David Dunn seconded the motion to table this agenda item until after Executive Session. The motion carried.

XIV. CONSIDER ORDER OF CANCELLATION OF ELECTION OF DIRECTORS DISTRICT 1 AND 5

Bryn Dodd moved, and David Dunn seconded the motion to table this agenda item until after Executive Session. The motion carried.

XV. PRESIDENT/CHIEF EXECUTIVE OFFICER'S REPORT AND ACTIONS

A. Measles Update

Russell Tippin, President/CEO, reported to the Board that the measles numbers in Ector County remain low. They continue to increase in Gaines County, Texas.

This report was informational only. No action was taken.

B. FEMA Funds

Grant Trollope, Assistant Chief Financial Officer, reported that \$800,000 has been received in FEMA funds, but MCH is holding the funds in case FEMA decides to pull back any of the funds. This report was informational only and no action was taken.

C. Pilot Payment – 1PointFive

No report was given.

D. Ad hoc Reports

The Communications and Marketing report was provided In the board packet. This report was informational only and no action was taken.

XVI. EXECUTIVE SESSION

Don Hallmark 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, Bryn Dodd, Will Kappauf, Richard Herrera, David Dunn, Don Hallmark, and Russell Tippin, President/CEO, Steve Steen, Chief Legal Counsel, Matt Collins, Chief Operating Officer, Adiel Alvarado, President MCH ProCare, and Kerstin Connolly, Paralegal.

Adiel Alvarado, President ProCare, presented the ProCare provider agreement to the ECHD Board of Directors during Executive Session.

Steve Steen, Chief Legal Counsel, led the board in discussion about the upcoming election.

Steve Steen, Chief Legal Counsel, provide the board an update on the CCU Compliance matter.

Russell Tippin, President/CEO, led the board in discussion about the PAC.

Russell Tippin, President/CEO, and Steve Steen, Chief Legal Counsel, led the board in discuss amount the ECHD insurance renewal process.

Executive Session began at 5:52 p.m.

Executive Session ended at 6:43 p.m.

No action was taken during Executive Session.

XVII. ITEMS FOR CONSIDERATION FROM EXECUTIVE SESSION

A. Consider Approval of MCH ProCare Provider Agreements.

Don Hallmark presented the following new contracts:

- Tochukwu Noh, M.D. – This is a new three (3) year Hospitalist Contract.

- Keren Preciado Guiab, M.D. – This is a new three (3) year Hospitalist Contract.
- Harika Thummala, M.D. – This is a new one (1) year Hospitalist Contract.

Don Hallmark presented the following renewal:

- Bertha Nunez, FNP-C – This is three (3) year renewal of a Pediatrics Contract.

Don Hallmark presented the following amendment:

- Elias Marquez, NP – This an amendment to a Urgent Care Contract

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

B. Consider Approval of Enterprise Zone Tax Abatement Agreement

No action taken.

C. CONSIDER CERTIFICATION OF UNOPPOSED CANDIDATES

Steve Steen, Chief Legal Counsel, presented the Certification of Unopposed Candidates (District 1 and 6). This certification confirms that the Ector County Hospital Board Member for District 1 is running unopposed in the May 3, 2025 election. The Certification is as follows:

13-1
Prescribed by Secretary of State
Section 2.051 – 2.053, Texas Election Code
9/2023

**CERTIFICATION OF UNOPPOSED CANDIDATES FOR OTHER
POLITICAL SUBDIVISIONS (NOT COUNTY) CERTIFICACIÓN DE
CANDIDATOS ÚNICOS
PARA OTRAS SUBDIVISIONES POLÍTICAS (NO EL CONDADO)**

To: Presiding Officer of Governing Body
Al: Presidente de la entidad gobernante

As the authority responsible for having the official ballot prepared, I hereby certify that
the following candidates are unopposed for election to office for the election scheduled to be
held on May 3, 2025.

*Como autoridad a cargo de la preparación de la boleta de votación oficial, por la presente
certifico que los siguientes candidatos son candidatos únicos para elección para un cargo en
la elección que se llevará a cabo el 3 de mayo 2025.*

List offices and names of candidates:
Lista de cargos y nombres de los candidatos:

Office(s) Cargo(s)	Candidate(s) Candidato(s)
Ector County Hospital District, District 1 Distrito del Hospital del Condado de Ector, Distrito 1	Bryn Dodd

Lisa Sertuche
Signature (Firma)

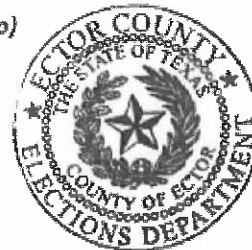
LISA SERTUCHE
Printed name (Nombre en letra de molde)

ELECTIONS ADMINISTRATOR
Title (Puesto)

2-25-25
Date of signing (Fecha de firma)

See reverse side for instructions
(Instrucciones en el reverso)

(Seal) (sello)



Richard Herrera moved, and Bryn Dodd seconded the motion to approve the Certification of Unopposed Candidates. The motion carried.

D. CONSIDER ORDER OF CANCELLATION OF ELECTION OF DIRECTORS DISTRICT 1 AND 5

Steve Steen presented the Order of Cancellation of Election of Directors District 1 and 5. This order cancels the election for those districts. District 1 candidate is unopposed and thereby elected. District 5 does not have an eligible candidate running The Order is as follows:

**ORDER OF CANCELLATION OF ELECTION
(DIRECTOR DISTRICT 1 AND 5)
ORDEN DE CANCELACIÓN DE LA ELECCIÓN
(DIRECTOR DE DISTRITO 1 y 5)**

The Ector County Hospital District hereby cancels the election for Director District 1 scheduled to be held on May 3, 2025 in accordance with Section 2.053(a) of the Texas Election Code. The following candidates have been certified as unopposed and are hereby elected as follows:

El Distrito Hospitalario del Condado de Ector cancela la elección para el Director del Distrito 1 programada para el 3 de mayo de 2025 de acuerdo con la Sección 2.053(a) del Código Electoral de Texas. Los siguientes candidatos han sido certificados como sin oposición y por la presente se eligen de la siguiente manera:

<u>Candidate (Candidato)</u>	<u>Office Sought (Cargo al que presenta candidatura)</u>
Bryn Dodd	Board of Directors - District 1 (Junta de Directores – Distrito 1)

The Ector County Hospital District hereby cancels the election for Director District 5 scheduled to be held on May 3, 2025 as no eligible candidates have filed for the position.

El Distrito Hospitalario del Condado de Ector cancela la elección para el Director del Distrito 5 programada para el 3 de mayo de 2025 ya que no se han presentado candidatos elegibles para el puesto.

A copy of this order will be posted on Election Day at each polling place that would have been used in the election.

El día de las elecciones se exhibirá una copia de esta orden en todos los centros electorales que se hubieran utilizado en la elección.

President (Presidente)

Secretary (Secretario)

Date of adoption (Fecha de adopción)

Richard Herrera moved, and Kathy Rhodes seconded the motion to approve the Order of Cancellation of Election of Directors District 4 and 6. The motion carried.

XVIII.ADJOURNMENT

There being no further business to come before the Board, Don Hallmark adjourned the meeting at 6:45 p.m.

Respectfully submitted,

A handwritten signature in cursive script, appearing to read "David Dunn", written in dark ink. The signature is fluid and extends to the right.

David Dunn, Secretary
Ector County Hospital District Board of Directors



April 1,2025

**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
Bilal Ahmed, MD	Radiology	Telemedicine	VRAD	04/01/2025-03/31/2027
Nkechi Ezirim, MD	OB/GYN	MFM		04/01/2025-03/31/2026
Lon Hayne, MD	Radiology	Telemedicine	VRAD	04/01/2025-03/31/2027
John Jackson, MD	Radiology	Telemedicine	VRAD	04/01/2025-03/31/2027
Joseph Mallory, MD	Radiology	Telemedicine	VRAD	04/01/2025-03/31/2027

Allied Health:

Applicant	Department	AHP Category	Specialty/Privileges	Group	Sponsoring Physician(s)	Dates
Bienvenido Baquirin, NP	Family Medicine	AHP	Nurse Practitioner	ProCare	Dr. Getnet Aberra	04/01/2025-03/31/2027
Jessica Mendoza, NP	Medicine	AHP	Nurse Practitioner	ProCare	Dr. Azarov and Dr. Ayyagari	04/01/2025-03/31/2027
Amber Vetter, NP	Cardiology	AHP	Nurse Practitioner	ProCare	Dr. Fernando Boccalandro, Dr. Adam Farber	04/01/2025-03/31/2027

*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



April 1,2025

**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's 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	Staff Category	Specialty / Privilege	Group	Changes to Privileges	Dates
Kenneth Batch, MD	Anesthesia	Yes	Active	Anesthesia	ProCare	Yes Updated Privilege Form	05/01/2025- 04/30/2027
Ramchander Chari, MD	Anesthesia	Yes	Associate	Anesthesia	ProCare	Yes Updated Privilege Form	05/01/2025- 04/30/2026
Rebecca Diaz, MD	Emergency Medicine	Yes	Active	Emergency Medicine	BEPO	Yes Updated Privilege Form	05/01/2025- 04/30/2027
Bradley Dyrstad, MD	Surgery	No	Active to Courtesy	Orthopedics		Yes	05/01/2025- 04/30/2027
Amir Fassihi, MD	Radiology	Yes	Telemedicine	Telemedicine	VRAD	None	05/01/2025- 04/30/2027
Megha na Gillala, MD	Anesthesia	Yes	Active	Anesthesia	ProCare	Yes Updated Privilege Form	05/01/2025- 04/30/2027
John Goffigan, MD	Radiology	Yes	Telemedicine	Telemedicine	VRAD	None	05/01/2025- 04/30/2027
Clifford Janke, MD	Emergency Medicine	Yes	Active to Courtesy	Emergency Medicine	BEPO	None	05/01/2025- 04/30/2027
Kingsley Okonkwo, MD	Pediatrics	Yes	Active to Courtesy	Hospitalist		Yes	05/01/2025- 04/30/2027
Jeffery Pinnow, MD	Emergency Medicine	Yes	Active	Emergency Medicine	BEPO	Yes Updated Privilege Form	05/01/2025- 04/30/2027
Frank Rembert, MD	Radiology	Yes	Telemedicine	Telemedicine	VRAD	None	05/01/2025- 04/30/2027
Gregory Shipkey, MD	Emergency Medicine	Yes	Active	Emergency Medicine	BEPO	Yes Updated Privilege Form	05/01/2025- 04/30/2027
Neill Slater, MD	Emergency Medicine	Yes	Active	Emergency Medicine	BEPO	Yes Updated Privilege Form	05/01/2025- 04/30/2027



Luke Young, MD	Anesthesia	Yes	Affiliate	Anesthesia	ProCare	None	05/01/2025-04/30/2027
Cordell Cunningham, MD	Emergency Medicine	Yes	Active	Emergency Medicine	BEPO	Yes Updated Privilege Form	06/01/2025-05/31/2027



Allied Health Professionals:

Applicant	Department	AHP Category	Specialty / Privileges	Group	Sponsoring Physician	Changes to Privilege	Dates
Beverly Gifford, NP	Family Medicine	AHP	Nurse Practitioner	ProCare	Dr. Mavis Twum Barimah	None	Beverly Gifford, NP
Joshua Jordan, CRNA	Anesthesia	AHP	CRNA	Midwest Anesthesia	Dr. Putta Shankar Bangalore, Dr. Abhishek Jayadevappa, Dr. Marlys Munnell, Dr. Hwang, Dr. Skip Batch, Dr. Joe Bryan, Dr. Jannie Tang, Meghan Gillala, Dr. P. Reddy	None	Joshua Jordan, CRNA
Tiffany Vaught, NP	Medicine	AHP	Nurse Practitioner	ProCare	Dr. Anand Reddy, Dr. Asif Ansari, Dr. Raja Naidu, Dr. Sridhar Allam	None	Tiffany Vaught, NP

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

April 1,2025

**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
Bradley Dyrstad, MD	Surgery	ADDING: Autologous Chondrocyte Implantation (ACI)
Emily Jones, NP	Surgery	REMOVING: ACLS

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



April 1, 2025

**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
Jordan Abel, MD	Active	Medicine	03/15/2025	Resignation
Elisa Brown, MD	Active	OB/GYN	09/01/2023	Resignation
Daniel Eurman, MD	Telemedicine	Radiology	09/08/2023	Resignation
Douglas Hughes, MD	Telemedicine	Radiology	12/27/2023	Resignation
Sonia Estes, CRNA	AHP	Anesthesia	02/26/2025	Resignation
Yulia Moskvina, CRNA	AHP	Anesthesia	02/26/2025	Resignation
Hanah Lee Pleines, NP	AHP	Medicine	02/07/2025	Resignation
Lucas Jacomides, MD	Associate	Surgery	12/04/2025	Laps in Privileges
Catherine Roberts, MD	Telemedicine	Radiology	07/27/2024	Resignation
Luis Rodriguez, NP	AHP	Medicine	03/17/2025	Resignation
Steven Wegert, MD	Telemedicine	Radiology	03/11/2025	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



April 1, 2025

**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 noted below.

Staff Category Change:

Staff Member	Department	Category
Bradley Dyrstad, MD	Surgery	Active to Courtesy
Clifford Janke, MD	Emergency Medicine	Active to Courtesy
Kingsley Okonkwo, MD	Pediatrics	Active to Courtesy

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				



April 1, 2025

**ECTOR COUNTY HOSPITAL DISTRICT
BOARD OF DIRECTORS**

Removal of I-FPPE

Staff Member	Department	Removal/Extension
Mohannad Anbarserri, MD	Hospitalist	I-FPPE Removal
Carlos Avila, NP	Family Medicine	I-FPPE Extension
Ramchandra Chari, MD	Anesthesia	I-FPPE Removal
Gustavo Del Toro, MD	Hospitalist	I-FPPE Removal
Melissa Freeman, NP	Family Medicine	I-FPPE Removal
Momin Islam, MD	Hospitalist	I-FPPE Removal
Melanie Larson, NP	Medicine	I-FPPE Extension
Rathnavali Katragadda, MD	Medicine	I-FPPE Extension
Viktor Miro, MD	Hospitalist	I-FPPE Removal
Darrell Parsons, MD	Medicine	I-FPPE Extension
Kevin Porter, DDS	Surgery	I-FPPE Extension
Esperanza Salinas, NP	Medicine	I-FPPE Extension
Raghavendra Sanivarapu, MD	Medicine	I-FPPE Extension
Madhuri Jakkam Setty, MD	Medicine	I-FPPE Extension
Victor Tackett, CRNA	Anesthesia	I-FPPE Removal

Change 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 motions 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



April 1, 2025

Item to be considered:

Statement of Pertinent Facts:

The Medical Executive Committee recommends approval of the following:

- Trauma Center Resolution Letter

Advice, Opinions, Recommendations and Motion:

- Trauma Center Resolution Letter

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 Trauma Center Resolution Letter. Forward this recommendation to the Ector County Hospital District Board of Directors.

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



April 1, 2025

Item to be considered:

Statement of Pertinent Facts:

The Medical Executive Committee recommends approval of the following:

- Cardiovascular Disease Privilege Form
- Oral & Maxillofacial Privilege Form
- Otolaryngology Privilege Form
- NP & PA Orthopedic Privilege Form

Advice, Opinions, Recommendations and Motion:

- Cardiovascular Disease Privilege Form
- Oral & Maxillofacial Privilege Form
- Otolaryngology Privilege Form
- NP & PA Orthopedic Privilege Form

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 Cardiovascular Disease Privilege Form, Oral & Maxillofacial Privilege Form, Otolaryngology Privilege Form, NP & PA Orthopedic Privilege Form

Forward this recommendation to the Ector County Hospital District Board of Directors.

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

Cardiovascular Disease

Delineation of Privileges

Applicant's Name: Test, Provider

Instructions:

1. Click the **Request** checkbox to request a group of privileges such as *Primary Privileges* or a Privilege Cluster.
2. Uncheck any privileges you do not want to request in that group.
3. Check off any special privileges you want to request.
4. Sign form electronically and submit with any required documentation.

Facilities

☒ **MCH**

Required Qualifications

Education/Training	Successful completion of an ACGME/AOA-accredited residency training program in internal medicine followed by an ACGME/AOA-accredited residency or fellowship training program in cardiology.
Certification	<p>Current certification in Cardiovascular Disease by the American Board of Internal Medicine or in Cardiology by the American Osteopathic Board of Internal Medicine or its equivalent.</p> <p>OR Within five years of completion of an approved residency or fellowship in cardiology by the American Board of Cardiology or the American Osteopathic Board of Internal Medicine with Certification of Special Qualifications in Cardiology.</p> <p>2.A.1 THRESHOLD ELIGIBILITY CRITERIA The applicant is board certified as that term is defined in the Article 2.A.1.(q) of the Medical Staff Bylaws, and pursuant to any other applicable Medical Staff Bylaws provision, by a board recognized by the American Board of Medical Specialties or the American Bureau of Osteopathic Specialties 6/11/13.</p>
Clinical Experience - Initial Privileges	<p>An applicant who has just completed a residency or fellowship shall provide his/her residency or fellowship log.</p> <p>OR An applicant who is not applying directly out of a residency or fellowship shall provide a quality profile from hospital(s) where he/she currently has privileges showing his or her clinical activity for the past 12 months, numbers of procedures performed, morbidity, mortality, infection rates and other complications.</p> <p>OR If a quality profile is not available from the hospital(s) where the applicant currently has privileges, documentation of the applicant's hospital-based clinical activity for the past 12 months.</p> <p>If applicant is not able to demonstrate the minimum requirements the application will be reviewed by the department in Executive Session.</p>
Clinical Experience - Renewal of Privileges	Applicant must provide documentation of provision of clinical services representative of the scope and complexity of privileges requested during the previous 24 months.
Additional Qualifications for	Applicant must have completed manufacturer designated training including human subjects experience when device related privileges are requested OR provide documentation of training and current clinical competence if training occurred during fellowship.

Device Related
Privileges

Primary Privileges

Cardiovascular Disease or Cardiology is the subspecialty of Internal Medicine focused on the prevention, evaluation, diagnosis, treatment, and management of conditions, disorders, and diseases affecting the cardiovascular system. Cardiologists manage complex cardiac conditions such as heart attacks and abnormal rhythms of the heart. In addition, they perform complicated diagnostic procedures such as cardiac catheterization.

Request	
	<input type="checkbox"/> - Newly Requested privileges <input type="checkbox"/> - Currently Granted privileges
	Evaluation and Management
<input type="checkbox"/>	Admit to inpatient or appropriate level of care
<input type="checkbox"/>	Evaluate, diagnose, provide consultation, medically manage and provide treatment to patients presenting with cardiovascular diseases, disorders, and conditions, including complex cardiac conditions. Privileges also include medical management of general medical conditions which are encountered in the course of caring for the cardiovascular patient.
<input type="checkbox"/>	Perform history and physical examination
	Procedures
<input type="checkbox"/>	Cardioversion, electrical and elective
<input type="checkbox"/>	Electrocardiogram (EKG) interpretation, including ambulatory monitoring
<input type="checkbox"/>	Insertion and management, arterial catheterization or cannulation for sampling, monitoring, or transfusion
<input type="checkbox"/>	Insertion and management of central venous catheters, pulmonary artery catheters, and arterial lines
<input type="checkbox"/>	Nuclear cardiology
<input type="checkbox"/>	Pericardiocentesis, with or without imaging guidance
<input type="checkbox"/>	Pulmonary angiography
<input type="checkbox"/>	Pulmonary embolism, evaluation and management of Pulmonary thrombectomy
<input type="checkbox"/>	Stress echocardiography, exercise or pharmacologic, including supervision and interpretation
<input type="checkbox"/>	Tilt table testing/evaluation
<input type="checkbox"/>	Transthoracic echocardiography
<input type="checkbox"/>	Transesophageal Echocardiogram

Privilege Cluster: Interventional Cardiology

Interventional Cardiology is a subspecialty of Cardiovascular Disease which uses specialized imaging and other diagnostic techniques to evaluate blood flow and pressure in the coronary arteries and chambers of the heart and technical procedures and medications to treat abnormalities that impair the function of the cardiovascular system.

Qualifications

Education/Training	Successful completion of a residency or fellowship training program in interventional cardiology accredited by the ACGME.
Certification	<p>Current certification in Interventional Cardiology by the American Board of Internal Medicine or in Interventional Cardiology by the American Osteopathic Board of Internal Medicine or its equivalent.</p> <p>OR Advanced Cardiac Life Support (ACLS) and, within five years of completion of an approved residency or fellowship in interventional cardiology, certification in interventional cardiology by the American Board of Internal Medicine or a certificate of added qualifications in interventional cardiology by the American Osteopathic Board of Internal Medicine.</p> <p>2.A.1 THRESHOLD ELIGIBILITY CRITERIA The applicant is board certified as that term is defined in the Article 2.A.1.(q) of the Medical Staff Bylaws, and pursuant to any other applicable Medical Staff Bylaws provision, by a board recognized by the American Board of Medical Specialties or the American Bureau of Osteopathic Specialties 6/11/13.</p>
Clinical Experience - Initial Privileges	<p>Should demonstrate performance of 250 coronary interventions to inpatients or outpatients in the past 12 months. This can be demonstrated in one of the following ways:</p> <p>An applicant who has just completed a residency or fellowship shall provide his/her residency or fellowship log.</p> <p>OR An applicant who is not applying directly out of a residency or fellowship shall provide a quality profile from hospital(s) where he/she currently has privileges showing his or her clinical activity for the past 12 months, including numbers of procedures performed, morbidity, mortality, infection rates and other complications.</p> <p>OR If a quality profile is not available from the hospital(s) where the applicant currently has privileges, documentation of the applicant's hospital-based clinical activity for the past 12 months.</p> <p>If applicant is not able to demonstrate the minimum requirements the application will be reviewed by the department in Executive Session.</p>
Clinical Experience - Renewal of Privileges	Applicant must provide documentation of provision of clinical services (100 cases) representative of the scope and complexity of privileges requested during the previous 24 months.
Additional Qualifications	<p>Applicant must be qualified for and granted Primary Privileges in Cardiovascular Disease.</p> <p>AND If percutaneous VAD placement privileges are requested the applicant must provide documentation of prior training in the previous 24 months OR meet any stated volume criteria.</p>

Request

☐ - Newly Requested privileges ☐ - Currently Granted privileges

Procedures

☐ CardioMems implant

<input type="checkbox"/>	Coronary angioplasty and stent placement
<input type="checkbox"/>	Coronary flow reserve measurement
<input type="checkbox"/>	Coronary fractional flow reserve
<input type="checkbox"/>	Coronary atherectomy (e.g., extraction, rotational, directional), with/without stent placement
<input type="checkbox"/>	Intracoronary lithotripsy
<input type="checkbox"/>	Intravascular administration of peripheral, intra-cranial or pulmonary thrombolysis
<input type="checkbox"/>	Intravascular ultrasound (IVUS) of coronary vessel or graft
<input type="checkbox"/>	Insertion and management of percutaneous left ventricular assist device (VAD)
<input type="checkbox"/>	Insertion and management of percutaneous right ventricular assist device
<input type="checkbox"/>	Laser angioplasty
<input type="checkbox"/>	Percutaneous transluminal coronary thrombectomy
<input type="checkbox"/>	Thrombolysis, coronary; by intracoronary infusion

Privilege Cluster: Clinical Cardiac Electrophysiology

Clinical Cardiac Electrophysiology encompasses the special knowledge and skills required of cardiologists who care for patients with complex cardiac rhythm disorders, particularly those receiving diagnostic and therapeutic intervention electrophysiologic procedures. Clinical cardiac electrophysiology focuses on diagnosis, consultation and treatment of atrial and ventricular arrhythmias, including the use of cardiac implantable electrical devices (CIEDs), and the application of other interventional ablative techniques and pharmacologic treatments.

Qualifications

Education/Training	Successful completion of an ACGME-accredited fellowship in cardiovascular disease, followed by successful completion of an additional year of accredited residency training in clinical cardiac electrophysiology.
Certification	<p>Current certification in Clinical Cardiac Electrophysiology by the American Board of Internal Medicine or in Clinical Cardiac Electrophysiology by the American Osteopathic Board of Internal Medicine or its equivalent.</p> <p>OR Within five years of completion of training in clinical cardiac electrophysiology, certification in clinical cardiac electrophysiology by the American Board of Internal Medicine or the American Osteopathic Board of Internal Medicine.</p> <p>2.A.1 THRESHOLD ELIGIBILITY CRITERIA The applicant is board certified as that term is defined in the Article 2.A.1.(q) of the Medical Staff Bylaws, and pursuant to any other applicable Medical Staff Bylaws provision, by a board recognized by the American Board of Medical Specialties or the American Bureau of Osteopathic Specialties 6/11/13.</p>
Clinical Experience - Initial Privileges	<p>Should demonstrate performance of at least 150 intracardiac procedures in at least 75 inpatients or outpatients in the past 12 months, including</p> <ul style="list-style-type: none"> * 75 catheter ablation procedures, including post-diagnostic testing, and * 25 initial implantable cardioverter-defibrillator procedures that included programming. <p>An applicant who has just completed a residency shall provide his/her residency log.</p> <p>OR An applicant who is not applying directly out of residency shall provide a quality profile from hospital(s) where he/she currently has privileges showing his or her clinical activity for the past 12 months, including numbers of procedures performed, morbidity, mortality, infection rates and other complications.</p> <p>OR If a quality profile is not available from the hospital(s) where the applicant currently has privileges, documentation of the applicant's hospital-based clinical activity for the past 12 months.</p> <p>If applicant is not able to demonstrate the minimum requirements the application will be reviewed by the department in Executive Session.</p>
Clinical Experience - Renewal of Privileges	Applicant must provide documentation of provision of clinical services ("N" cases) representative of the scope and complexity of privileges requested during the previous 24 months. If ablation privileges are requested a the total number of cases must include the performance of a minimum of ("N") ablation cases in the previous year.
Additional Qualifications	<p>Applicant must qualify for and be granted privileges in Primary Privileges in Cardiovascular Disease.</p> <p>AND Applicant must have completed manufacturer designated training including human subjects experience when device related privileges are requested OR provide documentation of training and current clinical competence if training occurred during fellowship.</p>

Request

☐ - Newly Requested privileges ☐ - Currently Granted privileges

Electrophysiology Procedures

☐ Comprehensive EP (electrophysiologic) studies

☐ Implantation of pacemaker including programming, reprogramming, and interrogation

<input type="checkbox"/>	Implantation of biventricular ICD including programming, reprogramming and interrogation
<input type="checkbox"/>	Insertion or replacement of permanent cardiac contractility modulation system, including contractility evaluation when performed, and programming of sensing and therapeutic parameters; with or without pulse generator and/or with or without transvenous electrodes
<input type="checkbox"/>	Operative ablation of supraventricular arrhythmogenic focus or pathway (e.g., Wolff-Parkinson-White, atrioventricular node re-entry), tract(s) and/or focus (foci)
<input type="checkbox"/>	Pacemaker or ICD lead extraction
<input type="checkbox"/>	Therapeutic catheter ablation procedures

Privilege Cluster: Adult Congenital Heart Disease

Adult Congenital Heart Disease (ACHD) encompasses the unique knowledge and skills required to care for adult patients who experienced defects in one or more structures of the heart or blood vessels. This care regularly requires coordination of multiple health-related influences or providers, potentially over a prolonged or indefinite timeframe.

Qualifications

Education/Training	Completion of an ACGME or AOA accredited Fellowship training program in Interventional Cardiology, AND Completion of a formal Structural Heart fellowship sponsored by a recognized organization that included documentation of level 2 training in the specific privileges requested.
Certification	Current certification in Interventional Cardiology by the American Board of Internal Medicine or in Interventional Cardiology by the American Osteopathic Board of Internal Medicine or its equivalent.
Clinical Experience - Initial Privileges	Applicant must provide documentation of performance of structural heart cases ("N" cases) representative of the privileges requested during the previous 24 months (waived for applicants who completed fellowship training in the privileges requested during the previous year).
Clinical Experience - Renewal of Privileges	Applicant must provide documentation of provision of clinical services ("N" cases) representative of the scope and complexity of privileges requested during the previous 24 months.
Criteria for Transcatheter Mitral Valve Repair (TMVR)	Requires concurrent privileges in transeptal catheterization, ASD and PFO. Must have performed a minimum of 100 varied structural heart cases in the previous 2 years.
Criteria for Application of a Transcatheter Mitral Valve Clip	Completion of 2 day manufacturer designated/sponsored training that included simulation/observation. Training must be followed by (#) supervised cases on human subjects by a qualified preceptor.
Additional Qualifications	Applicant must be qualified for and granted Primary Privileges in Cardiovascular Disease. AND Applicant must agree to restrict usage of devices to only those devices for which they have completed manufacturer sponsored or approved training.

Request	<input checked="" type="checkbox"/> - Newly Requested privileges <input type="checkbox"/> - Currently Granted privileges
	Structural Heart Disease Procedures
<input type="checkbox"/>	Intracardiac echocardiography
<input type="checkbox"/>	Left heart catheterization by transseptal or transapical puncture
<input type="checkbox"/>	Percutaneous balloon valvuloplasty
<input type="checkbox"/>	Percutaneous transcatheter closure of paravalvular leak
<input type="checkbox"/>	Percutaneous transcatheter septal reduction therapy (e.g., alcohol septal ablation)
<input type="checkbox"/>	Percutaneous transcatheter closure of atrial septal defect (ASD) and patent foremen ovale (PFO)
<input type="checkbox"/>	Percutaneous transcatheter closure of patent ductus arteriosus (PDA)

☐ Percutaneous transcatheter closure of a congenital ventricular septal defect (VSD)

Privilege Cluster: Transcatheter Heart Valve Implantation

The use of a catheter to perform endovascular or transapical implantation of a heart valve.

Qualifications

Education/Training	The practitioner must complete manufacturer designated training which includes didactic, observational, simulation and supervised implantation of a minimum of (n) cases or until the supervising physician can determine that the practitioner is ready for independent practice.
Clinical Experience - Initial Privileges	At a minimum, the heart team performing the transcatheter aortic valve replacement (cardiovascular surgeon and an interventional cardiologist) meets the organization's team procedure requirements in the previous 12 months or completion of training in the previous 12 months. AND Practitioners applying for privileges for procedures that do not require a team approach must provide documentation of ongoing clinical practice in the specific privilege requested or completed training in the previous 12 months.
Clinical Experience - Renewal of Privileges	At a minimum, the heart team performing the transcatheter aortic valve replacement (cardiovascular surgeon and an interventional cardiologist) meets the organization's team procedure requirements in the previous 24 months. AND Practitioners applying for privileges for procedures that do not require a team approach must provide documentation of ongoing clinical practice in the specific privilege requested.
Additional Qualifications	Concurrent privileging in left sided transcatheter structural heart procedures including valvuloplasty in the specific procedural area requested. AND Transcatheter aortic valve replacement must be performed as a team procedure with a qualified cardiothoracic surgeon who is also privileged in this procedure and must participate in the national TAVR registry.

Request

☐ - Newly Requested privileges ☐ - Currently Granted privileges

Transcatheter Heart Valve Procedure(s)

☐ Transcatheter aortic valve implantation/replacement (TAVR/TAVI) with prosthetic valve

Privilege Cluster: Cardiac CT or CTA

Computed Tomography Interpretation or Computed Tomography Angiography of the Heart

Qualifications

Education/Training	<p>Completion of an ACGME or AOA residency or fellowship program that included Level 2 training in cardiac CT and CTA. Program director must confirm training as well as current competency.</p> <p>OR Practitioner is qualified by virtue of recent clinical experience (see initial clinical experience).</p>
Clinical Experience - Initial Privileges	<p>Meet the clinical experience requirements to become board certified by the Society of Cardiovascular Computed Tomography</p> <p>OR Meet the training requirements of the American College of Radiology for the Certificate of Advanced Proficiency in Cardiac CT</p> <p>OR Meet requirements for certification in Cardiac CT by the Certification Board of Cardiovascular Computed Tomography (CBCCT)</p>
Clinical Experience - Renewal of Privileges	<p>Documentation of clinical practice representative of the scope of clinical privileges requested during the previous 24 months.</p>

Request

☐ - Newly Requested privileges ☐ - Currently Granted privileges

☐ Cardiac CT or CTA

Privilege Cluster: Cardiac MR or MRA

Magnetic Resonance or Magnetic Resonance Angiography of the Heart Magnetic resonance imaging (MRI) is a noninvasive medical test that helps physicians diagnose and treat medical conditions. In magnetic resonance, a magnetic field, radio waves and a computer produce the detailed images. MR does not use ionizing radiation (x-rays). MR angiography may be performed with or without contrast material.

Qualifications

Education/Training	<p>Completion of an ACGME or AOA residency or fellowship program that included Level 2 training in cardiac MR and MRA. Program director must confirm training as well as current competency.</p> <p>OR Practitioner is qualified by virtue of recent clinical experience (see initial clinical experience).</p>
Clinical Experience (Initial)	<p>Documentation of clinical practice representative of the scope of clinical privileges requested during the previous 24 months.</p>
Clinical Experience (Reappointment)	<p>Documentation of clinical practice representative of the scope of clinical privileges requested during the previous 24 months.</p>

Request	<input type="checkbox"/> - Newly Requested privileges <input type="checkbox"/> - Currently Granted privileges
	<input type="checkbox"/> Cardiac MR or MRA

Privilege Cluster: Carotid Ultrasound Interpretation

Ultrasound examination of the carotid vessels and interpretation of results.

Qualifications	
Education/Training	Completion of an ACGME or AOA fellowship program that included training in carotid ultrasound interpretation. OR Completion of a formal training program that included supervised experience in the interpretation of 100 carotid ultrasounds.
Clinical Experience - Initial Privileges	Interpretation of carotid ultrasounds in the previous 24 months or completion of training in the past year.
Clinical Experience - Renewal of Privileges	Interpretation of carotid ultrasounds during the previous 24 months.

Request	<input type="checkbox"/> - Newly Requested privileges <input type="checkbox"/> - Currently Granted privileges
	<input type="checkbox"/> Carotid ultrasound including interpretation

Privilege Cluster: Peripheral Endovascular Procedures (excluding heart, aorta, carotid and intracranial vessels)

Minimally invasive peripheral endovascular procedures using catheters to treat conditions such as aneurysm, atherosclerosis, carotid artery disease, deep vein thrombosis (DVT), or peripheral artery disease.

Qualifications

Education/Training	<p>Successful completion of an ACGME-accredited fellowship that included 12 months training in peripheral catheter based interventions</p> <p>OR An applicant may qualify by completing a training program that includes extensive experience in diagnostic angiography and percutaneous transluminal angioplasty of peripheral vessels. At a minimum, this experience must include performance of 100 diagnostic peripheral angiograms; 50 peripheral angioplasties/stents; 10 peripheral thrombolytic infusions/thrombectomy and ("N") varied non-invasive vascular studies.</p>
Clinical Experience - Initial Privileges	Applicant must provide documentation of provision of clinical services ("N" cases) representative of the privileges requested (waived for applicants who completed fellowship training in peripheral vascular intervention during the previous year).
Clinical Experience - Renewal of Privileges	Applicant must provide documentation of provision of clinical services ("N" cases) representative of the scope and complexity of privileges requested during the previous 24 months.
Additional Qualifications	Meet IAC (Intersocietal Accreditation Commission) standards for noninvasive vascular testing if privileges to interpret noninvasive vascular studies are requested.

Request	<input type="checkbox"/> - Newly Requested privileges <input type="checkbox"/> - Currently Granted privileges
	Procedures
<input type="checkbox"/>	Arterial and venous thrombectomy and thrombolysis, including AV fistulas and grafts
<input type="checkbox"/>	Carotid Angiography
<input type="checkbox"/>	Carotid Angioplasty stenting **Please contact Medical Staff Office for Criteria**
<input type="checkbox"/>	Cerebral Angiography
<input type="checkbox"/>	Diagnostic peripheral angiography
<input type="checkbox"/>	Endovascular repair with graft
<input type="checkbox"/>	Creation of fistula
<input type="checkbox"/>	Insertion and management of intravascular vena cava filter
<input type="checkbox"/>	Interpretation of non-invasive vascular studies
<input type="checkbox"/>	Peripheral Intravascular lithotripsy (IVL), endovascular, open or percutaneous, any vessel(s)
<input type="checkbox"/>	Peripheral angioplasty with or without stent placement Arterial or venous
<input type="checkbox"/>	Peripheral atherectomy, with or without stent placement

Invasive procedures excluding therapeutic heart catheterization

Qualifications

Clinical Experience - Initial Privileges	Applicant must provide documentation of provision of invasive cardiology services representative of the scope and complexity of privileges requested during the previous 24 months (waived for applicants who completed fellowship training in cardiovascular disease during the previous year).
Clinical Experience - Renewal of Privileges	Applicant must provide documentation of provision of invasive cardiology services representative of the scope and complexity of privileges requested in the previous 24 months.
Additional Qualifications	Applicant must be qualified for and granted Primary Privileges in Cardiovascular Disease.

Request

☐ - Newly Requested privileges ☐ - Currently Granted privileges

Procedures

- ☐ Coronary angiography
- ☐ Diagnostic right and left heart catheterization
- ☐ Endomyocardial biopsy
- ☐ Insertion and placement of balloon flotation catheter (e.g., Swan-Ganz) for hemodynamic monitoring
- ☐ Insertion and management of intra-aortic balloon assist device
- ☐ Insertion and management of temporary transvenous pacemaker
- ☐ Insertion and management of subcutaneous cardiac rhythm monitor (i.e., implantable loop recorder)
- ☐ Pericardial drainage, including pericardiocentesis and percutaneous catheter drainage, including imaging guidance
- ☐ Transcatheter implantation of wireless pulmonary artery pressure sensor for long-term hemodynamic monitoring via right heart catheterization (i.e., CardioMEMs device)

Acknowledgment of Applicant

I have requested only those privileges for which by education, training, current experience, and demonstrated competency I believe that I am competent to perform and that I have no mental or physical condition which would limit my clinical abilities. I wish to exercise at Medical Center Hospital, and I understand that: A. In exercising any clinical privileges granted, I am constrained by applicable Hospital and Medical Staff policies and rules applicable generally and any applicable to the particular situation. B. Any restriction on the clinical privileges granted to me is waived in an emergency situation and in such situation my actions are governed by the applicable section of the Medical Staff Bylaws or related documents.

Practitioner's Signature

MCH

Department Chair/Designee Recommendation - Privileges

I have reviewed the requested clinical privileges and supporting documentation and my recommendation is based upon the review of supporting documentation and/or my personal knowledge regarding the applicant's performance of the privileges requested:

Privilege	Condition/Modification/Deletion/Explanation
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Oral and Maxillofacial Surgery

Delineation of Privileges

Applicant's Name: Test, Provider

Instructions:

1. Click the **Request** checkbox to request a group of privileges such as *Primary Privileges* or a Privilege Cluster.
2. Uncheck any privileges you do not want to request in that group.
3. Check off any special privileges you want to request.
4. Sign form electronically and submit with any required documentation.

Facilities

☒ **MCH**

Required Qualifications

Education/Training	Successful completion of an American Dental Association-accredited residency in oral and maxillofacial surgery.
Certification	<p>Current certification in oral and maxillofacial surgery from the American Board of Oral and Maxillofacial Surgery.</p> <p>OR Within five years of completion of an approved residency, certification by the American Board of Oral and Maxillofacial Surgery.</p> <p>2.A.1 THRESHOLD ELIGIBILITY CRITERIA The applicant is board certified as that term is defined in the Article 2.A.1.(q) of the Medical Staff Bylaws, and pursuant to any other applicable Medical Staff Bylaws provision, by a board recognized by the American Board of Medical Specialties or the American Bureau of Osteopathic Specialties 6/11/13.</p>
Clinical Experience - Initial Privileges	<p>Should demonstrate performance, as the operating surgeon or supervised by a credentialed oral and maxillofacial surgeon, of a minimum of 50 procedures in the past 24 months, with no more than five dentoalveolar surgical procedures. (The hospital should determine the final number based on demographics and patient volume.) This can be demonstrated in one of the following ways:</p> <p>An applicant who has just completed a residency shall provide his/her residency log.</p> <p>OR An applicant who is not applying directly out of a residency shall provide a quality profile from hospital(s) where the applicant currently has privileges showing his/her clinical activity for the past 12 months, including numbers of procedures performed, morbidity, mortality, infection rates and other complications.</p> <p>OR If a quality profile is not available from the hospital(s) where the applicant currently has privileges, documentation of the applicant's hospital-based clinical activity for the past 12 months.</p> <p>If applicant is not able to demonstrate the minimum requirements the application will be reviewed by the department in Executive Session.</p>
Clinical Experience - Renewal of Privileges	Applicant must provide documentation of provision of clinical services representative of the scope of privileges requested during the past 24 months.

Primary Privileges

The subspecialty of Oral and Maxillofacial Surgery is focused on the evaluation, diagnosis, surgical treatment, and management of diseases, injuries, and defects affecting the function and esthetics of the hard and soft tissues of the oral and maxillofacial region, including wisdom teeth issues, facial pain, dental implants, facial cosmetic procedures, and providing care to patients with oral cancer, tumors, and cysts of the jaw.

Request	<input type="checkbox"/> - Newly Requested privileges <input type="checkbox"/> - Currently Granted privileges
	Evaluation and Management
<input type="checkbox"/>	Admit to inpatient or appropriate level of care
<input type="checkbox"/>	Evaluate, diagnose, provide consultation, medically and/or surgically manage, and provide surgical and/or non-surgical treatment to patients presenting with injuries, diseases, disorders, and conditions of both the functional and aesthetic aspects of the hard and soft tissues of the head, mouth, teeth, gums, jaws, and neck.
<input type="checkbox"/>	Perform history and physical examination
	General Procedures
<input type="checkbox"/>	Administration of local anesthesia, including peripheral nerve blocks
<input type="checkbox"/>	Administration of nitrous oxide (for anxiety)
<input type="checkbox"/>	Management of dentoalveolar diseases, deformities, or injuries, including surgical management and implants
	Trauma Related Procedures
<input type="checkbox"/>	Open and closed reductions of fractures of the mandible, maxilla, zygomatico-maxillary, nose, naso-frontal-orbital-ethmoidal and midface region
<input type="checkbox"/>	Repair of facial, oral, and soft tissue injuries
<input type="checkbox"/>	Tracheostomy placement, revision, and closure
	Pathology Related Procedures
<input type="checkbox"/>	Diagnosis and management of benign pathological conditions and localized malignant disease of the facial skeleton and soft tissues of the head, neck and parotid glands and eyes)
<input type="checkbox"/>	Surgical treatment of head and neck infections, including incision and drainage procedures
	Orthognathic Procedures - Surgical correction of functional and cosmetic orofacial and craniofacial deformities of the mandible, maxilla, zygoma and other facial bones
<input type="checkbox"/>	Le Fort I, II and III procedures
<input type="checkbox"/>	Surgical correction of dentofacial deformities of the mandible, maxilla, zygoma, and other facial bones
	Reconstructive Procedures
<input type="checkbox"/>	Harvesting of cartilage (locally), skin, and mucosa, bone from Cranium, Tibia iliac crest

<input type="checkbox"/>	Secondary cleft lip and/or palate repair
<input type="checkbox"/>	Surgically address deformities and defects of the facial skeleton and soft tissue including grafts (allo-, xeno-, and auto-), flaps, and implants
	Temporomandibular Joint Related Procedures
<input type="checkbox"/>	Temporomandibular joint arthroscopy (including lysis and lavage), arthrotomy, and arthroplasty
<input type="checkbox"/>	Temporomandibular prosthetic joint replacement
	Elective Cosmetic Procedures
<input type="checkbox"/>	Blepharoplasty **must be able to demonstrate 50 cases within the past 24 months**
<input type="checkbox"/>	Genioplasty **must be able to demonstrate 50 cases within the past 24 months**
<input type="checkbox"/>	Lipectomy **must be able to demonstrate 50 cases within the past 24 months**
<input type="checkbox"/>	Otoplasty, protruding ear, with or without size reduction **must be able to demonstrate 50 cases within the past 24 months**
<input type="checkbox"/>	Rhinoplasty **must be able to demonstrate 50 cases within the past 24 months**
<input type="checkbox"/>	Rhytidectomy **must be able to demonstrate 50 cases within the past 24 months**
<input type="checkbox"/>	Scar revision

Acknowledgment of Applicant

I have requested only those privileges for which by education, training, current experience, and demonstrated competency I believe that I am competent to perform and that I have no mental or physical condition which would limit my clinical abilities. I wish to exercise at Medical Center Hospital, and I understand that: A. In exercising any clinical privileges granted, I am constrained by applicable Hospital and Medical Staff policies and rules applicable generally and any applicable to the particular situation. B. Any restriction on the clinical privileges granted to me is waived in an emergency situation and in such situation my actions are governed by the applicable section of the Medical Staff Bylaws or related documents.

Practitioner's Signature

MCH

Department Chair/Designee Recommendation - Privileges

I have reviewed the requested clinical privileges and supporting documentation and my recommendation is based upon the review of supporting documentation and/or my personal knowledge regarding the applicant's performance of the privileges requested:

Privilege	Condition/Modification/Deletion/Explanation
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Medical Center Health System

Your One Source for Health

Otolaryngology

Delineation of Privileges

Applicant's Name: Test, Provider

Instructions:

1. Click the **Request** checkbox to request a group of privileges such as *Primary Privileges* or a Privilege Cluster.
2. Uncheck any privileges you do not want to request in that group.
3. Check off any special privileges you want to request.
4. Sign form electronically and submit with any required documentation.

Facilities

☒ **MCH**

Required Qualifications

Education/Training	Successful completion of an ACGME-accredited residency in otolaryngology or an AOA-approved training program in otolaryngology and facial plastic medicine.
Certification	<p>Current certification in Otolaryngology by the American Board of American Board of Otolaryngology.</p> <p>OR Within five years of completion of an approved residency, certification in otolaryngology by the American Board of Otolaryngology or the American Osteopathic Boards of Ophthalmology and Otolaryngology / Head and Neck Surgery.</p> <p>2.A.1 THRESHOLD ELIGIBILITY CRITERIA The applicant is board certified as that term is defined in the Article 2.A.1.(q) of the Medical Staff Bylaws, and pursuant to any other applicable Medical Staff Bylaws provision, by a board recognized by the American Board of Medical Specialties or the American Bureau of Osteopathic Specialties 6/11/13.</p>
Clinical Experience - Initial Privileges	<p>Should demonstrate performance of at least 50 procedures in the past 12 months in the areas of head and neck, plastic, reconstructive, and otologic surgery. This can be demonstrated in one of the following ways:</p> <p>An applicant who has just completed a residency shall provide his/her residency log.</p> <p>OR An applicant who is not applying directly out of a residency shall provide a quality profile from hospital(s) where he/she currently has privileges showing his or her clinical activity for the past 12 months, including numbers of procedures performed, morbidity, mortality, infection rates and other complications.</p> <p>OR If a quality profile is not available from the hospital(s) where the applicant currently has privileges, documentation of the applicant's hospital-based clinical activity for the past 12 months.</p> <p>If applicant is not able to demonstrate the minimum requirements the application will be reviewed by the department in Executive Session.</p>
Clinical Experience - Renewal of Privileges	Applicant must provide documentation of provision of clinical services representative of the scope and complexity of privileges requested during the past 24 months.

Primary Privileges

Otolaryngologists - head and neck surgeons, provide comprehensive medical and surgical care to patients with deformities, diseases, disorders and/or injuries that affect the ears, nose, sinuses, throat, the respiratory and upper alimentary systems, face, jaws and other related structures of the head and neck. Head and neck oncology, facial plastic and reconstructive surgery and the treatment of disorders of hearing and voice are fundamental areas of expertise.

Request	<input type="checkbox"/> - Newly Requested privileges <input type="checkbox"/> - Currently Granted privileges
	Management and Evaluation
<input type="checkbox"/>	Admit to inpatient/ Discharge to appropriate level of care
<input type="checkbox"/>	Evaluate, diagnose, provide consultation, medically and/or surgically manage, and provide surgical and/or non-surgical treatment to patients presenting with injuries, diseases, disorders, deformities, or conditions of the ears, nose, allergies, sinuses, throat, respiratory and upper alimentary systems, face, jaws and other related structures of the head and neck, including head and neck oncology, facial plastic and reconstructive surgery, and disorders affecting hearing and voice
<input type="checkbox"/>	Perform history and physical examination
	Procedures
<input type="checkbox"/>	Audiologic, vestibular, and laryngeal testing, including speech evaluation
<input type="checkbox"/>	Adjunctive use of a navigational tool /device in an otolaryngology procedure where the applicant is a concurrent privilege holder
<input type="checkbox"/>	Conventional head and neck surgery involving the maxilla and/or mandible bones, including repair and reconstruction, trachea, cervical lymph nodes, salivary glands, tonsils, and/or adenoids, thyroid gland, and parathyroid glands (excludes malignancy)
<input type="checkbox"/>	Esophageal surgery, including cervical esophagectomy with graft and hypopharynx or esophageal diverticulectomy with or without myotomy
<input type="checkbox"/>	Excision, including radical excision of malignant head and neck tumors, with and without radical neck dissection, parathyroidectomy, and temporal bone resection
<input type="checkbox"/>	Excision of benign lesion(s) or tumor(s) of the head and neck
<input type="checkbox"/>	Fine needle aspiration biopsy of lesion(s) or tumor(s), with or without imaging guidance
<input type="checkbox"/>	Harvesting and implantation of grafts and myocutaneous flaps, including free flaps
<input type="checkbox"/>	Nasal and sinus surgery, including nasal/sinus endoscopy and balloon sinuplasty
<input type="checkbox"/>	Open and closed reductions of fractures of the mandible, maxilla, zygomatico-maxillary, nose, nasofrontal- orbital-ethmoidal and midface region **ADD**
<input type="checkbox"/>	Repair of wounds or injuries of the pharynx, esophagus, and upper airway
<input type="checkbox"/>	Repair of penetrating head and neck injuries

<input type="checkbox"/>	Reconstruction of vascular malformation (lymphatic, venous, hemangioma)
<input type="checkbox"/>	Rhinoplasty **ADD**
<input type="checkbox"/>	Surgery of the external ear, including mastoidectomy, meatoplasty, reconstruction, and excision exostosis(es)
<input type="checkbox"/>	Surgery of the larynx, including laryngotomy, laryngectomy (partial or total), pharyngolaryngectomy, laryngoscopy (indirect, direct, flexible), and laryngoplasty
<input type="checkbox"/>	Surgery of the middle ear, including, myringotomy, tympanostomy, mastoidectomy, tympanomastoidectomy, and myringoplasty
<input type="checkbox"/>	Tracheostomy placement, revision, and closure
<input type="checkbox"/>	Use of radiofrequency or cryo in an Otolaryngology procedural area where the applicant is a concurrent privilege holder
<input type="checkbox"/>	Use of lasers in an Otolaryngology procedural area where the applicant is a concurrent privilege holder
<input type="checkbox"/>	Use of minimally invasive technique in a procedural area where the applicant is a concurrent privilege holder
	Endoscopy
<input type="checkbox"/>	Bronchoscopy with biopsy, excision, or ablation of tumor or polyp(s), or foreign body removal
<input type="checkbox"/>	Endoscopy including nasopharyngeal or laryngoscopy with biopsy and/or removal of lesion(s) or foreign body
<input type="checkbox"/>	Esophagoscopy with biopsy, excision, or ablation of tumor or polyp(s) or foreign body removal
	Elective facial cosmetic surgery
<input type="checkbox"/>	Blepharoplasty **must be able to demonstrate 50 cases within the past 24 months**
<input type="checkbox"/>	Cochlear implantation (contact the Medical Staff Office for Criteria)
<input type="checkbox"/>	Genioplasty, sliding osteotomies or implant (autograft, allograft, prosthetic) augmentation **must be able to demonstrate 50 cases within the past 24 months**
<input type="checkbox"/>	Implantation of autogenous, homologous, and allograft materials **must be able to demonstrate 50 cases within the past 24 months**
<input type="checkbox"/>	Liposuction **must be able to demonstrate 50 cases within the past 24 months**
<input type="checkbox"/>	Management of alopecia, including scalp reconstruction and hair transplant **must be able to demonstrate 50 cases within the past 24 months**
<input type="checkbox"/>	Rhytidectomy **must be able to demonstrate 50 cases within the past 24 months**
<input type="checkbox"/>	Scar revision

Privilege Cluster: Neurotology

Neurotology relates to the diagnosis and management of cosmetic disorders of the temporal bone, lateral skull base, and related anatomical structures, as well as advanced diagnostic expertise and advanced medical and surgical management skills beyond those attained in otolaryngology - head and neck surgery residency.

Qualifications

Education/Training	Completion of an ACGME accredited Fellowship training program in Neurotology
Certification	Current certification in Neurotology by the American Board of Otolaryngology.
Clinical Experience - Initial Privileges	Applicant must provide documentation of provision of neurotology services representative of the scope and complexity of the privileges requested during the previous 24 months (waived for applicants who completed training during the previous year).
Clinical Experience - Renewal of Privileges	Applicant must provide documentation of provision of clinical services representative of the scope and complexity of privileges requested during the past 24 months.

Request	
	<input type="checkbox"/> - Newly Requested privileges <input type="checkbox"/> - Currently Granted privileges
	Evaluation and Management
<input type="checkbox"/>	Evaluate, diagnose, provide consultation, medically manage and provide treatment to patients presenting with diseases, disorders, and conditions of the petrous apex, infratemporal fossa, internal auditory canals, associated cranial nerves; and lateral skull base (including the occipital bone, sphenoid bone, temporal bone, mesial aspect of the dura and intradural management)
	Procedures
<input type="checkbox"/>	Cochlear device implantation
<input type="checkbox"/>	Craniectomy for cerebellopontine angle tumor excision
<input type="checkbox"/>	Electrophysiologic monitoring of cranial nerves VII, VIII, X, XI, and XII
<input type="checkbox"/>	Endolymphatic sac operation, with or without shunt
<input type="checkbox"/>	Excision aural glomus tumor
<input type="checkbox"/>	Excision of skull base lesions or tumors via middle or posterior cranial fossa
<input type="checkbox"/>	Labyrinthectomy
<input type="checkbox"/>	Implantation and management of osseointegrated implant for auricular prosthesis, for bone anchored hearing aid
<input type="checkbox"/>	Petrous apicectomy including radical mastoidectomy
<input type="checkbox"/>	Oval or round window fistula repair
<input type="checkbox"/>	Radical excision of benign and malignant lesions of the ear and skull base
<input type="checkbox"/>	Reconstruction external auditory canal for congenital atresia
<input type="checkbox"/>	VII (facial) nerve repair, with or without grafting, and/or decompression
<input type="checkbox"/>	VIII (vestibular) nerve section

Acknowledgment of Applicant

I have requested only those privileges for which by education, training, current experience, and demonstrated competency I believe that I am competent to perform and that I have no mental or physical condition which would limit my clinical abilities. I wish to exercise at Medical Center Hospital, and I understand that: A. In exercising any clinical privileges granted, I am constrained by applicable Hospital and Medical Staff policies and rules applicable generally and any applicable to the particular situation. B. Any restriction on the clinical privileges granted to me is waived in an emergency situation and in such situation my actions are governed by the applicable section of the Medical Staff Bylaws or related documents.

Practitioner's Signature

MCH

Department Chair/Designee Recommendation - Privileges

I have reviewed the requested clinical privileges and supporting documentation and my recommendation is based upon the review of supporting documentation and/or my personal knowledge regarding the applicant's performance of the privileges requested:

Privilege	Condition/Modification/Deletion/Explanation
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Medical Center Health System

Your One Source for Health

Nurse Practitioner-Acute Care-Orthopedic Surgery

Delineation of Privileges

Applicant's Name: Test, Provider

Instructions:

1. Click the **Request** checkbox to request a group of privileges such as *Primary Privileges* or a Privilege Cluster.
2. Uncheck any privileges you do not want to request in that group.
3. Check off any special privileges you want to request.
4. Sign form electronically and submit with any required documentation.

Facilities

☒ **MCH**

Required Qualifications

Education/Training	<p>RN with post-baccalaureate academic preparation, evidenced by successful completion of a Nurse Practitioner (NP) master's degree (accredited by the American Academy of Nurse Practitioners).</p> <p>AND Current certification by the Board of Nurse Examiners for the State of Texas to practice as an Advanced Practice Nurse;</p> <p>AND Evidence of adequate professional liability insurance consistent with Medical Center Hospital policy;</p>
Certification	<p>Current certification by the American Nurses Credentialing Center (ANCC) or American Academy Nurse Practitioner (AANP) to practice as an Adult Gerontology Acute Care Nurse Practitioner (AGACNP-BC)</p>
Clinical Experience - Initial Privileges	<p>Applicant must be able to provide documentation of provision of clinical services in the specific privileges requested during the previous 24 months (waived for applicants who completed training within the past year)</p> <p>AND Applicant must provide documentation of previous experience of requested privileges</p> <p>OR Applicant may require Direct supervision before privilege is granted.</p> <p>If applicant is not able to demonstrate the minimum requirements the application will be reviewed by the department in Executive Session.</p>
Clinical Experience - Renewal of Privileges	<p>Applicant must have provided clinical services in the specific privileges requested during the past 24 months</p>
Additional Qualifications	<p>Applicant must have a supervising or collaborating physician currently practicing in the specialty of Orthopedic Surgery</p> <p>AND Current DEA Registration with schedules 3, 3N, 4 and 5 and State issued prescribing authority, as applicable</p>

Primary Privileges

Description:	
Request	<input type="checkbox"/> - Newly Requested privileges <input type="checkbox"/> - Currently Granted privileges
	Assessment of Health Status, Diagnosis and Development of Treatment Plan
<input type="checkbox"/>	Perform history and physical examination
<input type="checkbox"/>	Perform, order and interpret preventive and non-invasive diagnostic tests
<input type="checkbox"/>	Formulate a diagnosis and establish priorities to meet the patient's health and medical needs
<input type="checkbox"/>	Prescribe/order pharmacologic and non-operative therapeutic interventions
	Procedures - General
<input type="checkbox"/>	Privileges to perform deep and simplified tissue closure/cautery, cutting tissue; application of appliances and any other action delegated and directly supervised by the physician
<input type="checkbox"/>	Administration of local anesthetic nerve block ** Under Physician Direct Supervision**
<input type="checkbox"/>	Arthrocentesis, aspiration and/or injection, with or without image guidance ** Under Physician Direct Supervision**
<input type="checkbox"/>	Care and casting/immobilization of simple fractures including extremity, rib and clavicle; simple closed reduction
<input type="checkbox"/>	Care and management of simple strains and sprains, including immobilization and application of splints
<input type="checkbox"/>	Closed reduction of simple dislocation including digital, radial head, shoulder, hip and patellar
<input type="checkbox"/>	Incision and drainage or aspiration of palpable,
<input type="checkbox"/>	Injection of steroids into the following joints shoulder, elbow, wrist, hip and knee plus, subacromial bursa, lateral and medial epicondyle tendon insertion about the elbow, greater trochanteric bursa, and olecranon bursa ** Under Physician Direct Supervision**
<input type="checkbox"/>	Insertion of wire or pin with application of skeletal traction, including removal
<input type="checkbox"/>	Insertion of non-indwelling bladder catheter (straight catheterization)
<input type="checkbox"/>	Order orthopedic devices
<input type="checkbox"/>	Removal of groin sheaths
<input type="checkbox"/>	Sharp debridement, including muscle and bone
<input type="checkbox"/>	Vascular access, including insertion, management and removal of central venous catheters, arterial lines and pulmonary artery catheters***** REMOVE*****
<input type="checkbox"/>	Wound care management, including local anesthetic techniques, superficial debridement, placement and removal of drains, selection of specialized dressings, including liquid or spray occlusive materials as well as soft or rigid immobilizing dressings, and wound closure

Acknowledgment of Applicant

I have requested only those privileges for which by education, training, current experience, and demonstrated competency I believe that I am competent to perform and that I have no mental or physical condition which would limit my clinical abilities. I wish to exercise at Medical Center Hospital, and I understand that: A. In exercising any clinical privileges granted, I am constrained by applicable Hospital and Medical Staff policies and rules applicable generally and any applicable to the particular situation. B. Any restriction on the clinical privileges granted to me is waived in an emergency situation and in such situation my actions are governed by the applicable section of the Medical Staff Bylaws or related documents.

Practitioner's Signature

MCH

Department Chair/Designee Recommendation - Privileges

I have reviewed the requested clinical privileges and supporting documentation and my recommendation is based upon the review of supporting documentation and/or my personal knowledge regarding the applicant's performance of the privileges requested:

Privilege	Condition/Modification/Deletion/Explanation
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Medical Center Health System

Your One Source for Health

Physician Assistant-Acute Care-Orthopaedic Surgery

Delineation of Privileges

Applicant's Name: Test, Provider

Instructions:

1. Click the **Request** checkbox to request a group of privileges such as *Primary Privileges* or a Privilege Cluster.
2. Uncheck any privileges you do not want to request in that group.
3. Check off any special privileges you want to request.
4. Sign form electronically and submit with any required documentation.

Facilities

☒ **MCH**

Required Qualifications

Education/Training	Successful completion from a physician assistant program accredited by the Accreditation Review Commission on Education for the Physician Assistant (ARC-PA) or by one of its predecessor agencies (The Committee on Allied Health Education and Accreditation or the Commission on Accreditation of Allied Health Education Programs).
	AND Current state licensure by the Texas State Board of Physician Assistants Examiners.
Certification	Certification by the National Commission on Certification of Physician Assistants (NCCPA). (NCCPA Certification is required for initial licensure in Texas but not for renewal of an active Texas Physician Assistant License);
	AND Current state licensure by the Texas State Board of Physician Assistants Examiners.
Clinical Experience - Initial Privileges	Applicant must provide documentation of provision of clinical care, treatment and services in the specific privileges requested during the previous 24 months (waived for applicants who completed training within the past year)
	AND Applicant must provide documentation of previous experience of requested privileges
	OR Applicant may require Direct supervision before privilege is granted.
	If applicant is not able to demonstrate the minimum requirements the application will be reviewed by the department in Executive Session.
Clinical Experience - Renewal of Privileges	Applicant must provide documentation of provision of clinical care, treatment, and services in the specific privileges requested during the past 24 months
Additional Qualifications	Applicant must have a supervising or collaborating physician currently practicing in the specialty of Orthopedic Surgery.
	AND Current DEA Registration with schedules 3, 3N, 4 and 5, as applicable

Primary Privileges

Description:

Request	<input type="checkbox"/> - Newly Requested privileges <input type="checkbox"/> - Currently Granted privileges
	Evaluation and Management
<input type="checkbox"/>	Formulate a diagnosis and establish priorities to meet the patient's health and medical needs
<input type="checkbox"/>	Perform history and physical examination
<input type="checkbox"/>	Perform, order and interpret preventive and non-invasive diagnostic tests
<input type="checkbox"/>	Prescribe/order pharmacologic and non-operative therapeutic interventions
	Procedures
<input type="checkbox"/>	Act as surgical first assistant, including privileges to perform deep and simplified tissue closure/cautery, cutting tissue; application of appliances and any other action delegated and directly supervised by the physician
<input type="checkbox"/>	Arthrocentesis, aspiration and/or injection, with or without image guidance ** Under Physician Direct Supervision**
<input type="checkbox"/>	Administration of local anesthetic nerve block ** Under Physician Direct Supervision**
<input type="checkbox"/>	Care and management of simple strains and sprains, including immobilization and application of splints
<input type="checkbox"/>	Care and casting/immobilization of simple fractures including extremity, rib and clavicle; simple closed reduction
<input type="checkbox"/>	Closed reduction of simple dislocation including digital, radial head, shoulder, hip and patellar
<input type="checkbox"/>	Incision and drainage or aspiration of palpable, superficial soft tissue mass
<input type="checkbox"/>	Insertion of non-indwelling bladder catheter (straight catheterization)
<input type="checkbox"/>	Injection of steroids into the following joints: shoulder, elbow, wrist, hip and knee plus, subacromial bursa, lateral and medial epicondyle tendon insertion about the elbow, greater trochanteric bursa, and olecranon bursa ** Under Physician Direct Supervision**
<input type="checkbox"/>	Insertion of wire or pin with application of skeletal traction, including removal
<input type="checkbox"/>	Order orthopedic devices
<input type="checkbox"/>	Removal of groin sheaths
<input type="checkbox"/>	Sharp debridement including muscle and bone
<input type="checkbox"/>	Vascular access, including insertion, management and removal of central venous catheters, arterial lines and pulmonary artery catheters*****REMOVE*****
<input type="checkbox"/>	Wound care: simple superficial debridement; wound closure; general care for wounds including performance of topical or field infiltration of anesthetic solutions. Select and apply appropriate wound dressings including liquid or spray occlusive materials, staple removal, removal of drains, application of immobilizing dressing (soft or rigid)

Acknowledgment of Applicant

I have requested only those privileges for which by education, training, current experience, and demonstrated competency I believe that I am competent to perform and that I have no mental or physical condition which would limit my clinical abilities. I wish to exercise at Medical Center Hospital, and I understand that: A. In exercising any clinical privileges granted, I am constrained by applicable Hospital and Medical Staff policies and rules applicable generally and any applicable to the particular situation. B. Any restriction on the clinical privileges granted to me is waived in an emergency situation and in such situation my actions are governed by the applicable section of the Medical Staff Bylaws or related documents.

Practitioner's Signature

MCH

Department Chair/Designee Recommendation - Privileges

I have reviewed the requested clinical privileges and supporting documentation and my recommendation is based upon the review of supporting documentation and/or my personal knowledge regarding the applicant's performance of the privileges requested:

Privilege	Condition/Modification/Deletion/Explanation
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Family Health Clinic
April 2025
ECHD Board Update

**ECTOR COUNTY HOSPITAL DISTRICT
FAMILY HEALTH CENTERS COMBINED - OPERATIONS SUMMARY
FEBRUARY 2025**

	CURRENT MONTH					YEAR TO DATE				
	ACTUAL	BUDGET	BUDGET VAR	PRIOR YR	PRIOR YR VAR	ACTUAL	BUDGET	BUDGET VAR	PRIOR YR	PRIOR YR VAR
<u>PATIENT REVENUE</u>										
Outpatient Revenue	\$ 1,883,321	\$ 1,754,579	7.3%	\$ 1,864,983	1.0%	\$ 9,108,944	\$ 8,483,690	7.4%	\$ 8,034,956	13.4%
TOTAL PATIENT REVENUE	\$ 1,883,321	\$ 1,754,579	7.3%	\$ 1,864,983	1.0%	\$ 9,108,944	\$ 8,483,690	7.4%	\$ 8,034,956	13.4%
<u>DEDUCTIONS FROM REVENUE</u>										
Contractual Adjustments	\$ 952,012	\$ 825,082	15.4%	\$ 739,633	28.7%	\$ 4,490,042	\$ 3,968,903	13.1%	\$ 3,498,259	28.4%
Self Pay Adjustments	208,636	83,651	149.4%	61,592	238.7%	792,289	396,825	99.7%	243,669	225.1%
Bad Debts	(16,211)	62,063	-126.1%	54,735	-129.6%	10,839	297,625	-96.4%	218,572	-95.0%
TOTAL REVENUE DEDUCTIONS	\$ 1,144,438	\$ 970,796	17.9%	\$ 855,961	33.7%	\$ 5,293,171	\$ 4,663,353	13.5%	\$ 3,960,500	33.6%
	60.77%	55.33%		45.90%		58.11%	54.97%		49.29%	
NET PATIENT REVENUE	\$ 738,883	\$ 783,783	-5.7%	\$ 1,009,022	-26.8%	\$ 3,815,774	\$ 3,820,337	-0.1%	\$ 4,074,456	-6.3%
<u>OTHER REVENUE</u>										
FHC Other Revenue	\$ 31,998	\$ 39,174	-18.3%	\$ 37,713	-15.2%	\$ 152,357	\$ 195,870	-22.2%	\$ 192,089	-20.7%
TOTAL OTHER REVENUE	\$ 31,998	\$ 39,174	-18.3%	\$ 37,713	-15.2%	\$ 152,357	\$ 195,870	-22.2%	\$ 192,089	-20.7%
NET OPERATING REVENUE	\$ 770,881	\$ 822,957	-6.3%	\$ 1,046,735	-26.4%	\$ 3,968,130	\$ 4,016,207	-1.2%	\$ 4,266,545	-7.0%
<u>OPERATING EXPENSE</u>										
Salaries and Wages	\$ 205,610	\$ 199,977	2.8%	\$ 181,258	13.4%	\$ 1,014,682	\$ 945,020	7.4%	\$ 970,057	4.6%
Benefits	26,669	28,307	-5.8%	32,777	-18.6%	165,189	139,453	18.5%	164,647	0.3%
Physician Services	484,517	498,196	-2.7%	459,306	5.5%	2,691,086	2,490,980	8.0%	2,120,542	26.9%
Cost of Drugs Sold	60,752	64,521	-5.8%	68,798	-11.7%	455,264	304,418	49.6%	237,416	91.8%
Supplies	29,010	20,207	43.6%	30,259	-4.1%	102,937	98,630	4.4%	91,754	12.2%
Utilities	6,241	6,305	-1.0%	6,632	-5.9%	26,003	30,579	-15.0%	28,376	-8.4%
Repairs and Maintenance	1,392	2,099	-33.7%	1,362	2.2%	8,122	10,495	-22.6%	7,061	15.0%
Leases and Rentals	717	1,212	-40.9%	1,048	-31.6%	5,045	6,060	-16.7%	7,859	-35.8%
Other Expense	1,000	1,427	-29.9%	1,000	0.0%	6,219	7,135	-12.8%	5,000	24.4%
TOTAL OPERATING EXPENSES	\$ 815,908	\$ 822,251	-0.8%	\$ 782,440	4.3%	\$ 4,474,546	\$ 4,032,770	11.0%	\$ 3,632,713	23.2%
Depreciation/Amortization	\$ 21,510	\$ 23,447	-8.3%	\$ 24,947	-13.8%	\$ 107,911	\$ 124,098	-13.0%	\$ 124,784	-13.5%
TOTAL OPERATING COSTS	\$ 837,418	\$ 845,698	-1.0%	\$ 807,388	3.7%	\$ 4,582,457	\$ 4,156,868	10.2%	\$ 3,757,496	22.0%
NET GAIN (LOSS) FROM OPERATIONS	\$ (66,537)	\$ (22,741)	192.6%	\$ 239,348	-127.8%	\$ (614,327)	\$ (140,661)	336.7%	\$ 509,049	-220.7%
Operating Margin	-8.63%	-2.76%	212.4%	22.87%	-137.7%	-15.48%	-3.50%	342.0%	11.93%	-229.8%

	CURRENT MONTH					YEAR TO DATE				
	3,992	4,061	-1.7%	4,056	-1.6%	19,997	19,392	3.1%	18,275	9.4%
Total Visits										
Average Revenue per Office Visit	471.77	432.06	9.2%	459.81	2.6%	455.52	437.48	4.1%	439.67	3.6%
Hospital FTE's (Salaries and Wages)	51.6	50.5	2.2%	44.5	15.8%	47.5	44.2	7.6%	45.9	3.5%

**ECTOR COUNTY HOSPITAL DISTRICT
FAMILY HEALTH CLINIC - SOUTH - OPERATIONS SUMMARY
FEBRUARY 2025**

	CURRENT MONTH					YEAR TO DATE				
	ACTUAL	BUDGET	BUDGET VAR	PRIOR YR	PRIOR YR VAR	ACTUAL	BUDGET	BUDGET VAR	PRIOR YR	PRIOR YR VAR
PATIENT REVENUE										
Outpatient Revenue	\$ 205,851	\$ 178,644	15.2%	\$ 161,236	27.7%	\$ 895,375	\$ 808,363	10.8%	\$ 733,829	22.0%
TOTAL PATIENT REVENUE	\$ 205,851	\$ 178,644	15.2%	\$ 161,236	27.7%	\$ 895,375	\$ 808,363	10.8%	\$ 733,829	22.0%
DEDUCTIONS FROM REVENUE										
Contractual Adjustments	\$ 83,787	\$ 62,205	34.7%	\$ 58,588	43.0%	\$ 316,672	\$ 281,478	12.5%	\$ 337,320	-6.1%
Self Pay Adjustments	55,984	17,467	220.5%	35,912	55.9%	287,410	79,038	263.6%	93,213	208.3%
Bad Debts	(791)	9,990	-107.9%	10,974	-107.2%	1,796	45,205	-96.0%	33,543	-94.6%
TOTAL REVENUE DEDUCTIONS	\$ 138,980	\$ 89,662	55.0%	\$ 105,473	31.8%	\$ 605,878	\$ 405,721	49.3%	\$ 464,077	30.6%
	67.5%	50.2%		65.4%		67.7%	50.2%		63.2%	
NET PATIENT REVENUE	\$ 66,871	\$ 88,982	-24.8%	\$ 55,763	19.9%	\$ 289,498	\$ 402,642	-28.1%	\$ 269,752	7.3%
OTHER REVENUE										
FHC Other Revenue	\$ 31,998	\$ 39,174	0.0%	\$ 37,713	-15.2%	\$ 152,357	\$ 195,870	0.0%	\$ 192,089	-20.7%
TOTAL OTHER REVENUE	\$ 31,998	\$ 39,174	-18.3%	\$ 37,713	-15.2%	\$ 152,357	\$ 195,870	-22.2%	\$ 192,089	-20.7%
NET OPERATING REVENUE	\$ 98,869	\$ 128,156	-22.9%	\$ 93,476	5.8%	\$ 441,854	\$ 598,512	-26.2%	\$ 461,841	-4.3%
OPERATING EXPENSE										
Salaries and Wages	\$ 61,828	\$ 57,610	7.3%	\$ 50,129	23.3%	\$ 297,227	\$ 260,684	14.0%	\$ 298,094	-0.3%
Benefits	8,019	8,155	-1.7%	9,065	-11.5%	48,388	38,468	25.8%	50,595	-4.4%
Physician Services	79,615	69,696	14.2%	66,102	20.4%	397,091	348,480	13.9%	285,841	38.9%
Cost of Drugs Sold	25,127	10,209	146.1%	24,928	0.8%	169,677	46,195	267.3%	43,055	294.1%
Supplies	4,351	6,443	-32.5%	14,863	-70.7%	17,130	31,416	-45.5%	41,410	-58.6%
Utilities	2,723	3,976	-31.5%	3,128	-12.9%	11,506	16,066	-28.4%	13,531	-15.0%
Repairs and Maintenance	601	1,278	-53.0%	527	14.0%	3,316	6,390	-48.1%	3,642	-9.0%
Leases and Rentals	456	606	-24.7%	1,008	-54.7%	3,351	3,030	10.6%	3,175	5.5%
Other Expense	1,000	1,427	-29.9%	1,000	0.0%	6,219	7,135	-12.8%	5,000	24.4%
TOTAL OPERATING EXPENSES	\$ 183,722	\$ 159,400	15.3%	\$ 170,749	7.6%	\$ 953,904	\$ 757,864	25.9%	\$ 744,343	28.2%
Depreciation/Amortization	\$ 4,048	\$ 3,937	2.8%	\$ 4,048	0.0%	\$ 20,242	\$ 20,220	0.1%	\$ 20,288	-0.2%
TOTAL OPERATING COSTS	\$ 187,770	\$ 163,337	15.0%	\$ 174,798	7.4%	\$ 974,145	\$ 778,084	25.2%	\$ 764,631	27.4%
NET GAIN (LOSS) FROM OPERATIONS	\$ (88,901)	\$ (35,181)	-152.7%	\$ (81,322)	-9.3%	\$ (532,291)	\$ (179,572)	-196.4%	\$ (302,789)	-75.8%
Operating Margin	-89.92%	-27.45%	227.6%	-87.00%	3.4%	-120.47%	-30.00%	301.5%	-65.56%	83.7%

	CURRENT MONTH					YEAR TO DATE				
	ACTUAL	BUDGET	BUDGET VAR	PRIOR YR	PRIOR YR VAR	ACTUAL	BUDGET	BUDGET VAR	PRIOR YR	PRIOR YR VAR
Medical Visits	655	640	2.3%	550	19.1%	3,196	2,896	10.4%	2,616	22.2%
Average Revenue per Office Visit	314.28	279.13	12.6%	293.16	7.2%	280.15	279.13	0.4%	280.52	-0.1%
Hospital FTE's (Salaries and Wages)	12.8	12.0	6.1%	9.0	41.6%	10.7	10.1	6.0%	11.2	-4.4%

**ECTOR COUNTY HOSPITAL DISTRICT
FAMILY HEALTH CLINIC - WEST UNIVERSITY - OPERATIONS SUMMARY
FEBRUARY 2025**

	CURRENT MONTH					YEAR TO DATE				
	ACTUAL	BUDGET	BUDGET VAR	PRIOR YR	PRIOR YR VAR	ACTUAL	BUDGET	BUDGET VAR	PRIOR YR	PRIOR YR VAR
<u>PATIENT REVENUE</u>										
Outpatient Revenue	\$ 256,326	\$ 209,492	22.4%	\$ 233,200	9.9%	\$ 1,138,074	\$ 993,192	14.6%	\$ 1,020,529	11.5%
TOTAL PATIENT REVENUE	\$ 256,326	\$ 209,492	22.4%	\$ 233,200	9.9%	\$ 1,138,074	\$ 993,192	14.6%	\$ 1,020,529	11.5%
<u>DEDUCTIONS FROM REVENUE</u>										
Contractual Adjustments	\$ 112,811	\$ 155,853	-27.6%	\$ 90,336	24.9%	\$ 476,348	\$ 738,892	-35.5%	\$ 483,369	-1.5%
Self Pay Adjustments	50,304	36,943	36.2%	4,917	923.0%	240,060	175,145	37.1%	72,419	231.5%
Bad Debts	(5,238)	11,247	-146.6%	5,229	-200.2%	3,085	53,320	-94.2%	34,295	-91.0%
TOTAL REVENUE DEDUCTIONS	\$ 157,877	\$ 204,043	-22.6%	\$ 100,483	57.1%	\$ 719,492	\$ 967,357	-25.6%	\$ 590,084	21.9%
	61.59%	97.40%		43.09%		63.22%	97.40%		57.82%	
NET PATIENT REVENUE	\$ 98,449	\$ 5,449	1706.7%	\$ 132,716	-25.8%	\$ 418,582	\$ 25,835	1520.2%	\$ 430,446	-2.8%
<u>OTHER REVENUE</u>										
FHC Other Revenue	\$ -	\$ -	0.0%	\$ -	0.0%	\$ -	\$ -	0.0%	\$ -	0.0%
TOTAL OTHER REVENUE	\$ -	\$ -	0.0%	\$ -	0.0%	\$ -	\$ -	0.0%	\$ -	0.0%
NET OPERATING REVENUE	\$ 98,449	\$ 5,449	1706.7%	\$ 132,716	-25.8%	\$ 418,582	\$ 25,835	1520.2%	\$ 430,446	-2.8%
<u>OPERATING EXPENSE</u>										
Salaries and Wages	\$ 24,409	\$ 33,940	-28.1%	\$ 19,332	26.3%	\$ 129,123	\$ 160,906	-19.8%	\$ 100,079	29.0%
Benefits	3,166	4,804	-34.1%	3,496	-9.4%	21,021	23,744	-11.5%	16,986	23.8%
Physician Services	55,148	57,658	-4.4%	47,589	15.9%	279,957	288,290	-2.9%	236,678	18.3%
Cost of Drugs Sold	13,774	4,005	243.9%	8,731	57.8%	33,746	18,987	77.7%	16,704	102.0%
Supplies	4,021	1,864	115.7%	861	367.2%	9,563	8,931	7.1%	6,758	41.5%
Utilities	3,517	2,329	51.0%	3,505	0.4%	14,497	14,513	-0.1%	14,845	-2.3%
Repairs and Maintenance	-	-	0.0%	-	100.0%	-	-	0.0%	-	100.0%
Leases and Rentals	33	40	-16.3%	40	-16.3%	224	200	12.0%	200	12.0%
Other Expense	-	-	0.0%	-	0.0%	-	-	0.0%	-	0.0%
TOTAL OPERATING EXPENSES	\$ 104,070	\$ 104,640	-0.5%	\$ 83,553	24.6%	\$ 488,131	\$ 515,571	-5.3%	\$ 392,251	24.4%
Depreciation/Amortization	\$ 17,387	\$ 19,435	-10.5%	\$ 20,824	-16.5%	\$ 87,295	\$ 103,503	-15.7%	\$ 104,122	-16.2%
TOTAL OPERATING COSTS	\$ 121,457	\$ 124,075	-2.1%	\$ 104,378	16.4%	\$ 575,427	\$ 619,074	-7.1%	\$ 496,373	15.9%
NET GAIN (LOSS) FROM OPERATIONS	\$ (23,008)	\$ (118,626)	-80.6%	\$ 28,339	-181.2%	\$ (156,845)	\$ (593,239)	-73.6%	\$ (65,927)	137.9%
Operating Margin	-23.37%	-2177.02%	-98.9%	21.35%	-209.4%	-37.47%	-2296.26%	-98.4%	-15.32%	144.6%

	CURRENT MONTH					YEAR TO DATE				
	746	691	8.0%	678	10.0%	3,704	3,276	13.1%	3,255	13.8%
Total Visits										
Average Revenue per Office Visit	343.60	303.17	13.3%	343.95	-0.1%	307.26	303.17	1.3%	313.53	-2.0%
Hospital FTE's (Salaries and Wages)	9.6	9.3	3.8%	6.6	47.1%	9.3	8.2	13.2%	6.8	36.6%

**ECTOR COUNTY HOSPITAL DISTRICT
FAMILY HEALTH CLINIC - JBS - OPERATIONS SUMMARY
FEBRUARY 2025**

	CURRENT MONTH					YEAR TO DATE				
	ACTUAL	BUDGET	BUDGET VAR	PRIOR YR	PRIOR YR VAR	ACTUAL	BUDGET	BUDGET VAR	PRIOR YR	PRIOR YR VAR
<u>PATIENT REVENUE</u>										
Outpatient Revenue	\$ 417,800	\$ 429,627	-2.8%	\$ 470,302	-11.2%	\$ 2,140,433	\$ 1,861,437	15.0%	\$ 1,882,167	13.7%
TOTAL PATIENT REVENUE	\$ 417,800	\$ 429,627	-2.8%	\$ 470,302	-11.2%	\$ 2,140,433	\$ 1,861,437	15.0%	\$ 1,882,167	13.7%
<u>DEDUCTIONS FROM REVENUE</u>										
Contractual Adjustments	\$ 210,025	\$ 215,350	-2.5%	\$ 244,892	-14.2%	\$ 1,043,162	\$ 933,044	11.8%	\$ 955,810	9.1%
Self Pay Adjustments	31,273	9,625	224.9%	7,751	303.5%	98,215	41,701	135.5%	34,815	182.1%
Bad Debts	(1,268)	13,507	-109.4%	11,337	-111.2%	12,740	58,521	-78.2%	49,482	-74.3%
TOTAL REVENUE DEDUCTIONS	\$ 240,030	\$ 238,482	0.6%	\$ 263,980	-9.1%	\$ 1,154,118	\$ 1,033,266	11.7%	\$ 1,040,107	11.0%
	57.45%	55.51%		56.13%		53.92%	55.51%		55.26%	
NET PATIENT REVENUE	\$ 177,770	\$ 191,145	-7.0%	\$ 206,322	-13.8%	\$ 986,316	\$ 828,171	19.1%	\$ 842,060	17.1%
<u>OTHER REVENUE</u>										
FHC Other Revenue	\$ -	\$ -	0.0%	\$ -	0.0%	\$ -	\$ -	0.0%	\$ -	0.0%
TOTAL OTHER REVENUE	\$ -	\$ -	0.0%	\$ -	0.0%	\$ -	\$ -	0.0%	\$ -	0.0%
NET OPERATING REVENUE	\$ 177,770	\$ 191,145	-7.0%	\$ 206,322	-13.8%	\$ 986,316	\$ 828,171	19.1%	\$ 842,060	17.1%
<u>OPERATING EXPENSE</u>										
Salaries and Wages	\$ 38,061	\$ 42,819	-11.1%	\$ 29,745	28.0%	\$ 145,106	\$ 185,521	-21.8%	\$ 157,613	-7.9%
Benefits	4,937	6,061	-18.5%	5,379	-8.2%	23,623	27,377	-13.7%	26,752	-11.7%
Physician Services	59,245	63,193	-6.2%	63,287	-6.4%	340,725	315,965	7.8%	298,035	14.3%
Cost of Drugs Sold	4,552	24,293	-81.3%	26,851	-83.0%	97,775	105,255	-7.1%	97,756	0.0%
Supplies	15,236	3,861	294.6%	2,595	487.2%	37,312	17,040	119.0%	10,904	242.2%
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%
TOTAL OPERATING EXPENSES	\$ 122,030	\$ 140,227	-13.0%	\$ 127,856	-4.6%	\$ 644,542	\$ 651,158	-1.0%	\$ 591,060	9.0%
Depreciation/Amortization	\$ 75	\$ 75	-0.2%	\$ 75	0.0%	\$ 374	\$ 375	-0.2%	\$ 374	0.0%
TOTAL OPERATING COSTS	\$ 122,105	\$ 140,302	-13.0%	\$ 127,931	-4.6%	\$ 644,916	\$ 651,533	-1.0%	\$ 591,434	9.0%
NET GAIN (LOSS) FROM OPERATIONS	\$ 55,666	\$ 50,843	9.5%	\$ 78,390	-29.0%	\$ 341,400	\$ 176,638	93.3%	\$ 250,625	36.2%
Operating Margin	31.31%	26.60%	17.7%	37.99%	-17.6%	34.61%	21.33%	62.3%	29.76%	16.3%

	CURRENT MONTH					YEAR TO DATE				
Total Visits	923	1,028	-10.2%	1,061	-13.0%	4,993	4,454	12.1%		0.0%
Average Revenue per Office Visit	452.65	417.93	8.3%	443.26	2.1%	428.69	417.92	2.6%	415.95	3.1%
Hospital FTE's (Salaries and Wages)	9.6	12.9	-26.0%	9.2	4.3%	7.9	10.4	-24.1%	9.0	-12.8%

**ECTOR COUNTY HOSPITAL DISTRICT
FAMILY HEALTH CLINIC - WOMENS CLINIC- OPERATIONS SUMMARY
FEBRUARY 2025**

	CURRENT MONTH					YEAR TO DATE				
	ACTUAL	BUDGET	BUDGET VAR	PRIOR YR	PRIOR YR VAR	ACTUAL	BUDGET	BUDGET VAR	PRIOR YR	PRIOR YR VAR
<u>PATIENT REVENUE</u>										
Outpatient Revenue	\$ 1,003,344	\$ 936,816	7.1%	\$ 1,000,245	0.3%	\$ 4,935,062	\$ 4,820,698	2.4%	\$ 4,398,431	12.2%
TOTAL PATIENT REVENUE	\$ 1,003,344	\$ 936,816	7.1%	\$ 1,000,245	0.3%	\$ 4,935,062	\$ 4,820,698	2.4%	\$ 4,398,431	12.2%
<u>DEDUCTIONS FROM REVENUE</u>										
Contractual Adjustments	\$ 545,389	\$ 391,674	39.2%	\$ 345,818	57.7%	\$ 2,653,861	\$ 2,015,489	31.7%	\$ 1,721,760	54.1%
Self Pay Adjustments	71,075	19,616	262.3%	13,011	446.3%	166,604	100,941	65.1%	43,222	285.5%
Bad Debts	(8,914)	27,319	-132.6%	27,195	-132.8%	(6,782)	140,579	-104.8%	101,251	-106.7%
TOTAL REVENUE DEDUCTIONS	\$ 607,551	\$ 438,609	38.5%	\$ 386,024	57.4%	\$ 2,813,683	\$ 2,257,009	24.7%	\$ 1,866,232	50.8%
	60.55%	46.82%		38.59%		57.01%	46.82%		42.43%	
NET PATIENT REVENUE	\$ 395,793	\$ 498,207	-20.6%	\$ 614,221	-35.6%	\$ 2,121,378	\$ 2,563,689	-17.3%	\$ 2,532,198	-16.2%
<u>OTHER REVENUE</u>										
FHC Other Revenue	\$ -	\$ -	0.0%	\$ -	0.0%	\$ -	\$ -	0.0%	\$ -	0.0%
TOTAL OTHER REVENUE	\$ -	\$ -	0.0%	\$ -	0.0%	\$ -	\$ -	0.0%	\$ -	0.0%
NET OPERATING REVENUE	\$ 395,793	\$ 498,207	-20.6%	\$ 614,221	-35.6%	\$ 2,121,378	\$ 2,563,689	-17.3%	\$ 2,532,198	-16.2%
<u>OPERATING EXPENSE</u>										
Salaries and Wages	\$ 81,312	\$ 65,608	23.9%	\$ 82,052	-0.9%	\$ 443,226	\$ 337,909	31.2%	\$ 414,271	7.0%
Benefits	10,547	9,287	13.6%	14,837	-28.9%	72,157	49,864	44.7%	70,314	2.6%
Physician Services	290,509	307,649	-5.6%	282,328	2.9%	1,673,312	1,538,245	8.8%	1,299,987	28.7%
Cost of Drugs Sold	17,299	26,014	-33.5%	8,288	108.7%	154,066	133,981	15.0%	79,901	92.8%
Supplies	5,402	8,039	-32.8%	11,941	-54.8%	38,932	41,243	-5.6%	32,682	19.1%
Utilities	-	-	0.0%	-	100.0%	-	-	0.0%	-	100.0%
Repairs and Maintenance	791	821	-3.7%	835	-5.3%	4,806	4,105	17.1%	3,419	40.6%
Leases and Rentals	227	566	-59.9%	-	0.0%	1,470	2,830	-48.0%	4,484	-67.2%
Other Expense	-	-	0.0%	-	0.0%	-	-	0.0%	-	0.0%
TOTAL OPERATING EXPENSES	\$ 406,087	\$ 417,984	-2.8%	\$ 400,281	1.5%	\$ 2,387,969	\$ 2,108,177	13.3%	\$ 1,905,059	25.3%
Depreciation/Amortization	\$ -	\$ -	0.0%	\$ -	100.0%	\$ -	\$ -	0.0%	\$ -	100.0%
TOTAL OPERATING COSTS	\$ 406,087	\$ 417,984	-2.8%	\$ 400,281	1.5%	\$ 2,387,969	\$ 2,108,177	13.3%	\$ 1,905,059	25.3%
NET GAIN (LOSS) FROM OPERATIONS	\$ (10,293)	\$ 80,223	-112.8%	\$ 213,940	-104.8%	\$ (266,591)	\$ 455,512	-158.5%	\$ 627,140	-142.5%
Operating Margin	-2.60%	16.10%	-116.2%	34.83%	-107.5%	-12.57%	17.77%	-170.7%	24.77%	-150.7%

	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	1,668	1,702	-2.0%	1,767	-5.6%	8,104	8,766	-7.6%	7,879	2.9%
Average Revenue per Office Visit	601.53	550.42	9.3%	566.07	6.3%	608.97	549.93	10.7%	558.25	9.1%
Hospital FTE's (Salaries and Wages)	19.6	16.3	20.8%	19.8	-0.9%	19.7	15.5	26.9%	18.9	4.2%

**ECTOR COUNTY HOSPITAL DISTRICT
FAMILY HEALTH CLINIC COMBINED
FEBRUARY 2025**

	MONTHLY REVENUE						YTD REVENUE					
	Clements	West	JBS	Womens	Total	%	Clements	West	JBS	Womens	Total	%
Medicare	\$ 77,876	\$ 61,109	\$ (645)	\$ 59,838	\$ 198,179	10.5%	\$ 296,600	\$ 262,313	\$ -	\$ 237,039	\$ 795,952	8.7%
Medicaid	27,557	60,480	275,485	285,545	649,068	34.5%	140,277	193,370	1,458,880	1,513,102	3,305,629	36.3%
FAP	-	-	-	-	-	0.0%	-	-	-	-	-	0.0%
Commercial	35,211	70,844	116,033	626,560	848,648	45.1%	141,211	350,346	569,920	3,016,840	4,078,318	44.8%
Self Pay	58,734	47,448	25,227	19,496	150,905	8.0%	297,988	263,726	103,340	88,405	753,459	8.3%
Other	6,474	16,445	1,700	11,905	36,523	1.9%	19,299	68,318	8,293	79,676	175,586	1.9%
Total	\$ 205,851	\$ 256,326	\$ 417,800	\$ 1,003,344	\$ 1,883,321	100.0%	\$ 895,375	\$ 1,138,074	\$ 2,140,433	\$ 4,935,062	\$ 9,108,944	100.0%

	MONTHLY PAYMENTS						YEAR TO DATE PAYMENTS					
	Clements	West	JBS	Womens	Total	%	Clements	West	JBS	Womens	Total	%
Medicare	\$ 21,604	\$ 19,749	\$ -	\$ 15,856	\$ 57,209	9.3%	\$ 119,456	\$ 99,392	\$ -	\$ 77,108	\$ 295,956	9.5%
Medicaid	16,237	19,575	136,783	\$ 80,450	253,045	41.2%	54,319	86,454	698,541	437,316	1,276,629	41.0%
FAP	-	-	-	\$ -	-	0.0%	-	-	-	-	-	0.0%
Commercial	9,474	22,475	42,044	\$ 131,419	205,413	33.4%	44,410	137,782	250,666	689,254	1,122,112	36.0%
Self Pay	8,788	12,875	10,370	\$ 57,788	89,821	14.6%	44,306	61,289	50,073	225,956	381,625	12.2%
Other	976	4,652	180	\$ 2,947	8,756	1.4%	2,177	16,853	4,358	15,756	39,143	1.3%
Total	\$ 57,080	\$ 79,326	\$ 189,378	\$ 288,460	\$ 614,244	100.0%	\$ 264,667	\$ 401,769	\$ 1,003,638	\$ 1,445,391	\$ 3,115,464	100.0%

**ECTOR COUNTY HOSPITAL DISTRICT
FAMILY HEALTH CLINIC CLEMENTS
FEBRUARY 2025**

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	\$ 77,876	37.9%	\$ 60,704	37.7%	\$ 296,600	33.0%	245,553	33.5%
Medicaid	27,557	13.4%	19,416	12.0%	140,277	15.7%	122,283	16.7%
PHC	-	0.0%	-	0.0%	-	0.0%	-	0.0%
Commercial	35,211	17.1%	25,067	15.5%	141,211	15.8%	125,887	17.2%
Self Pay	58,734	28.5%	55,595	34.5%	297,988	33.3%	239,277	32.5%
Other	6,474	3.1%	455	0.3%	19,299	2.2%	829	0.1%
TOTAL	\$ 205,851	100.0%	\$ 161,236	100.0%	\$ 895,375	100.0%	733,829	100.0%

PAYMENTS BY PAYOR

	CURRENT MONTH				YEAR TO DATE			
	CURRENT YEAR		PRIOR YEAR		CURRENT YEAR		PRIOR YEAR	
	PAYMENTS	%	PAYMENTS	%	PAYMENTS	%	PAYMENTS	%
Medicare	21,604	37.9%	\$ 13,602	38.5%	\$ 119,456	45.2%	91,394	40.9%
Medicaid	16,237	28.4%	8,806	25.0%	54,319	20.5%	57,314	25.7%
PHC	-	0.0%	-	0.0%	-	0.0%	-	0.0%
Commercial	9,474	16.6%	8,428	23.9%	44,410	16.8%	49,170	22.0%
Self Pay	8,788	15.4%	4,320	12.3%	44,306	16.7%	25,034	11.2%
Other	976	1.7%	94	0.3%	2,177	0.8%	364	0.2%
TOTAL	\$ 57,080	100.0%	\$ 35,249	100.0%	\$ 264,667	100.0%	223,276	100.0%

**ECTOR COUNTY HOSPITAL DISTRICT
FAMILY HEALTH CLINIC WEST UNIVERSITY
FEBRUARY 2025**

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	\$ 61,109	23.8%	\$ 64,024	27.5%	\$ 262,313	23.0%	\$ 258,115	25.3%
Medicaid	60,480	23.6%	\$ 34,333	14.7%	193,370	17.0%	178,344	17.5%
PHC	-	0.0%	\$ -	0.0%	-	0.0%	-	0.0%
Commercial	70,844	27.7%	\$ 75,503	32.4%	350,346	30.8%	297,982	29.2%
Self Pay	47,448	18.5%	\$ 50,062	21.5%	263,726	23.2%	243,187	23.8%
Other	16,445	6.4%	\$ 9,279	4.0%	68,318	6.0%	42,902	4.2%
TOTAL	\$ 256,326	100.0%	\$ 233,200	100.0%	\$ 1,138,074	100.0%	\$ 1,020,529	100.0%

PAYMENTS BY PAYOR

	CURRENT MONTH				YEAR TO DATE			
	CURRENT YEAR		PRIOR YEAR		CURRENT YEAR		PRIOR YEAR	
	PAYMENTS	%	PAYMENTS	%	PAYMENTS	%	PAYMENTS	%
Medicare	\$ 19,749	24.9%	\$ 19,709	28.8%	\$ 99,392	24.7%	\$ 93,629	29.3%
Medicaid	19,575	24.7%	13,077	19.1%	\$ 86,454	21.5%	72,069	22.5%
PHC	-	0.0%	-	0.0%	-	0.0%	-	0.0%
Commercial	22,475	28.3%	26,778	39.1%	137,782	34.3%	110,994	34.7%
Self Pay	12,875	16.2%	4,584	6.7%	61,289	15.3%	30,074	9.4%
Other	4,652	5.9%	4,307	6.3%	16,853	4.2%	13,149	4.1%
TOTAL	\$ 79,326	100.0%	\$ 68,455	100.0%	\$ 401,769	100.0%	\$ 319,915	100.0%

**ECTOR COUNTY HOSPITAL DISTRICT
FAMILY HEALTH CLINIC JBS
FEBRUARY 2025**

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	\$ (645)	-0.2%	\$ (324)	-0.1%	\$ -	0.0%	\$ (256)	0.0%
Medicaid	275,485	66.0%	\$ 329,433	70.0%	1,458,880	68.2%	1,288,703	68.5%
PHC	-	0.0%	\$ -	0.0%	-	0.0%	-	0.0%
Commercial	116,033	27.8%	\$ 122,800	26.1%	569,920	26.6%	508,175	27.0%
Self Pay	25,227	6.0%	\$ 13,907	3.0%	103,340	4.8%	71,044	3.8%
Other	1,700	0.4%	\$ 4,487	1.0%	8,293	0.4%	14,501	0.8%
TOTAL	\$ 417,800	100.0%	\$ 470,302	100.0%	\$ 2,140,433	100.0%	\$ 1,882,167	100.0%

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	136,783	72.2%	139,173	73.2%	698,541	69.6%	495,900	70.1%
PHC	-	0.0%	-	0.0%	-	0.0%	-	0.0%
Commercial	42,044	22.2%	44,422	23.4%	250,666	25.0%	182,891	25.9%
Self Pay	10,370	5.5%	4,690	2.5%	50,073	5.0%	23,902	3.4%
Other	180	0.1%	1,864	1.0%	4,358	0.4%	4,345	0.6%
TOTAL	\$ 189,378	100.0%	\$ 190,149	100.0%	\$ 1,003,638	100.0%	\$ 707,038	100.0%

**ECTOR COUNTY HOSPITAL DISTRICT
FAMILY HEALTH CLINIC - WOMENS CLINIC
FEBRUARY 2025**

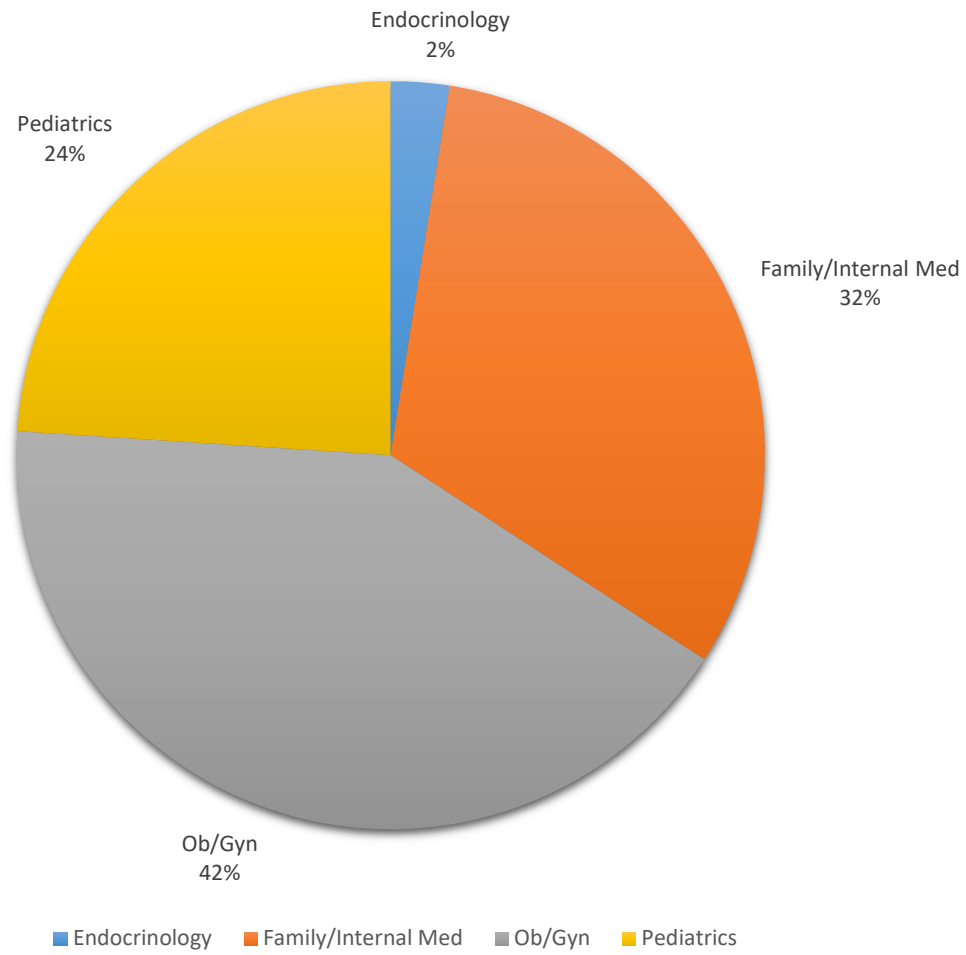
REVENUE BY PAYOR

	CURRENT MONTH				YEAR TO DATE			
	CURRENT YEAR		PRIOR YEAR		CURRENT YEAR		PRIOR YEAR	
	GROSS REVENUE	%	GROSS REVENUE	%	GROSS REVENUE	%	GROSS REVENUE	%
Medicare	\$ 59,838	6.0%	\$ 48,461	4.8%	\$ 237,039	4.8%	\$ 194,738	4.4%
Medicaid	285,545	28.5%	\$ 347,146	34.7%	1,513,102	30.7%	1,488,035	33.8%
PHC	-	0.0%	\$ -	0.0%	-	0.0%	-	0.0%
Commercial	626,560	62.4%	\$ 560,567	56.0%	3,016,840	61.1%	2,519,911	57.3%
Self Pay	19,496	1.9%	\$ 25,248	2.5%	88,405	1.8%	131,746	3.0%
Other	11,905	1.2%	\$ 18,823	1.9%	79,676	1.6%	63,999	1.5%
TOTAL	\$ 1,003,344	100.0%	\$ 1,000,245	100.0%	\$ 4,935,062	100.0%	\$ 4,398,431	100.0%

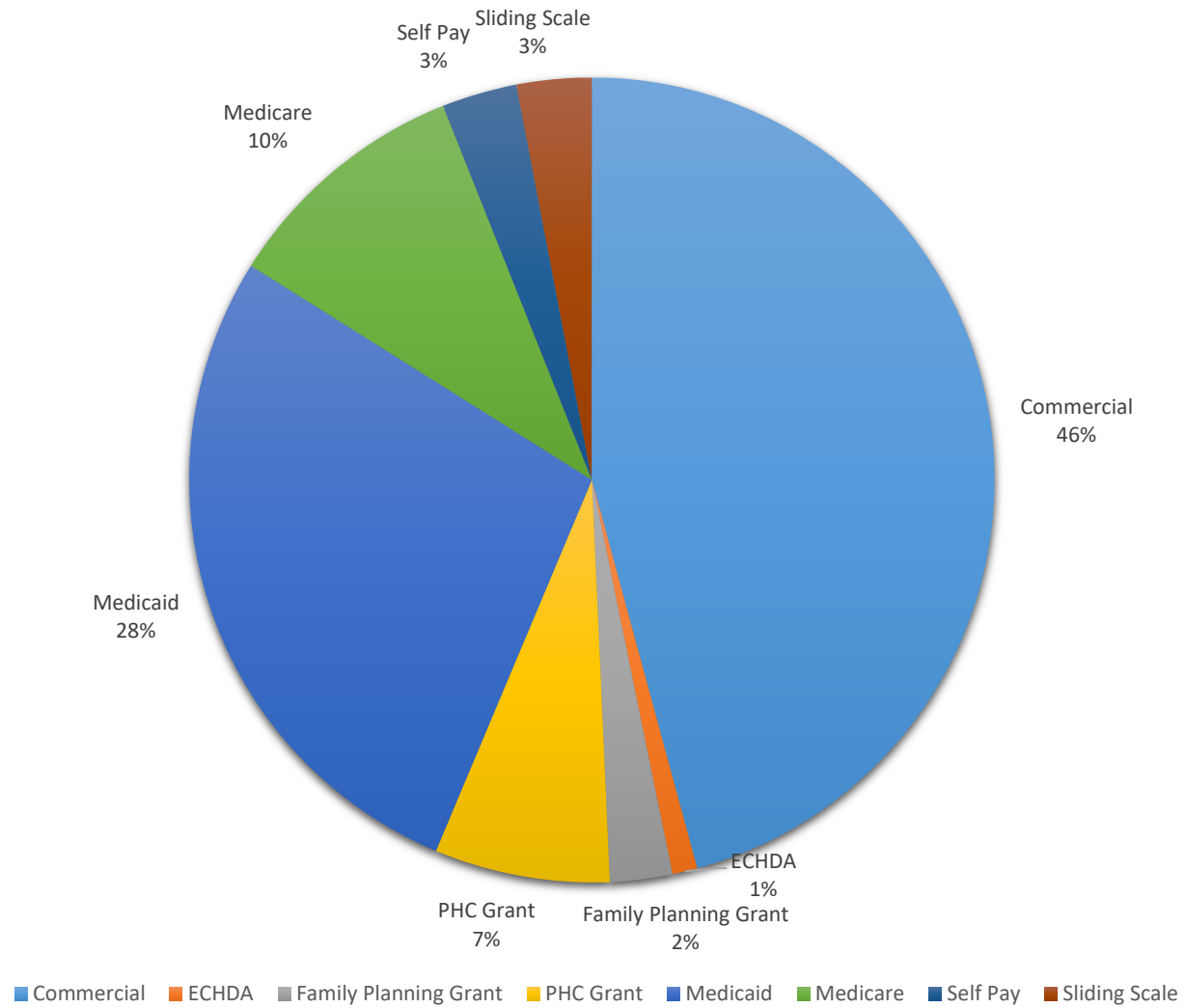
PAYMENTS BY PAYOR

	CURRENT MONTH				YEAR TO DATE			
	CURRENT YEAR		PRIOR YEAR		CURRENT YEAR		PRIOR YEAR	
	PAYMENTS	%	PAYMENTS	%	PAYMENTS	%	PAYMENTS	%
Medicare	\$ 15,856	5.5%	\$ 6,486	2.2%	\$ 77,108	5.3%	\$ 31,556	3.1%
Medicaid	80,450	27.9%	115,426	39.0%	437,316	30.3%	256,179	24.9%
PHC	-	0.0%	-	0.0%	-	0.0%	-	0.0%
Commercial	131,419	45.6%	117,147	39.6%	689,254	47.7%	506,555	49.2%
Self Pay	57,788	20.0%	52,097	17.6%	225,956	15.6%	222,798	21.6%
Other	2,947	1.0%	4,844	1.6%	15,756	1.1%	12,902	1.3%
TOTAL	\$ 288,460	100.0%	\$ 296,000	100.0%	\$ 1,445,391	100.0%	\$ 1,029,989	100.0%

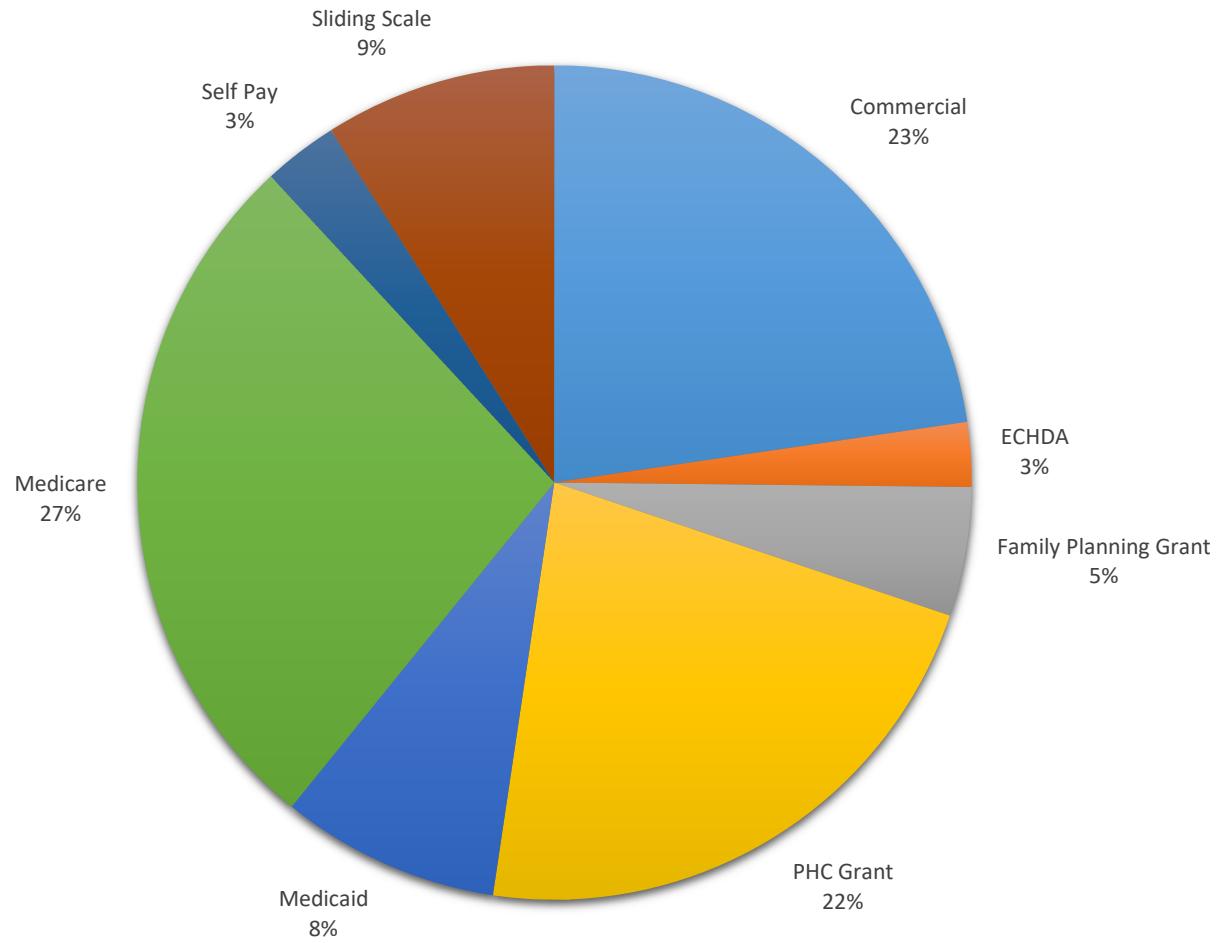
FHC February Visits By Service



Total FHC February Visits by Financial Class

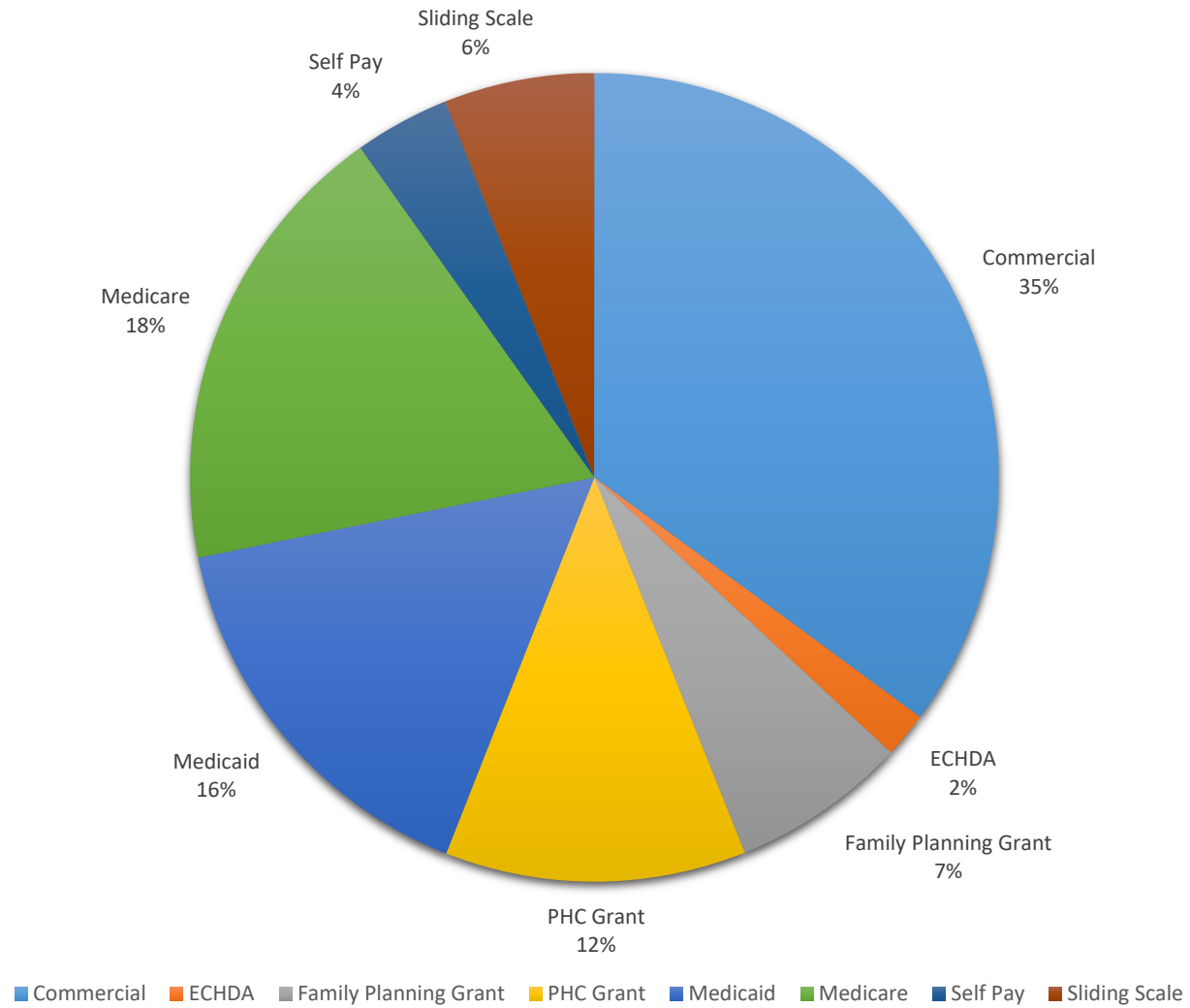


FHC Clements February Visits by Financial Class

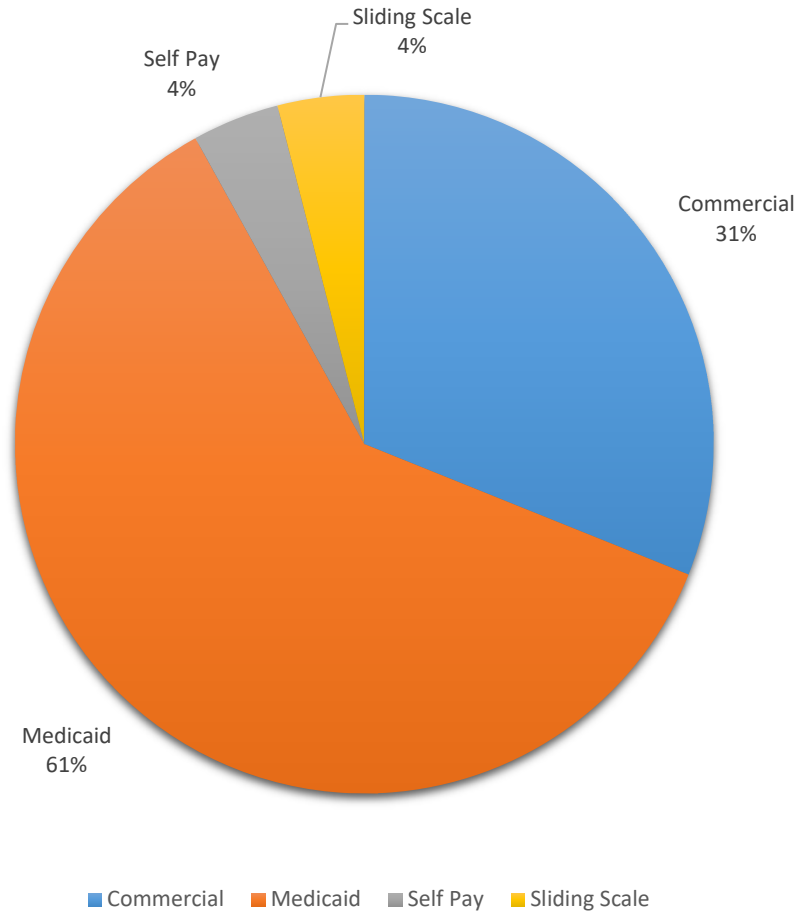


Commercial ECHDA Family Planning Grant PHC Grant Medicaid Medicare Self Pay Sliding Scale

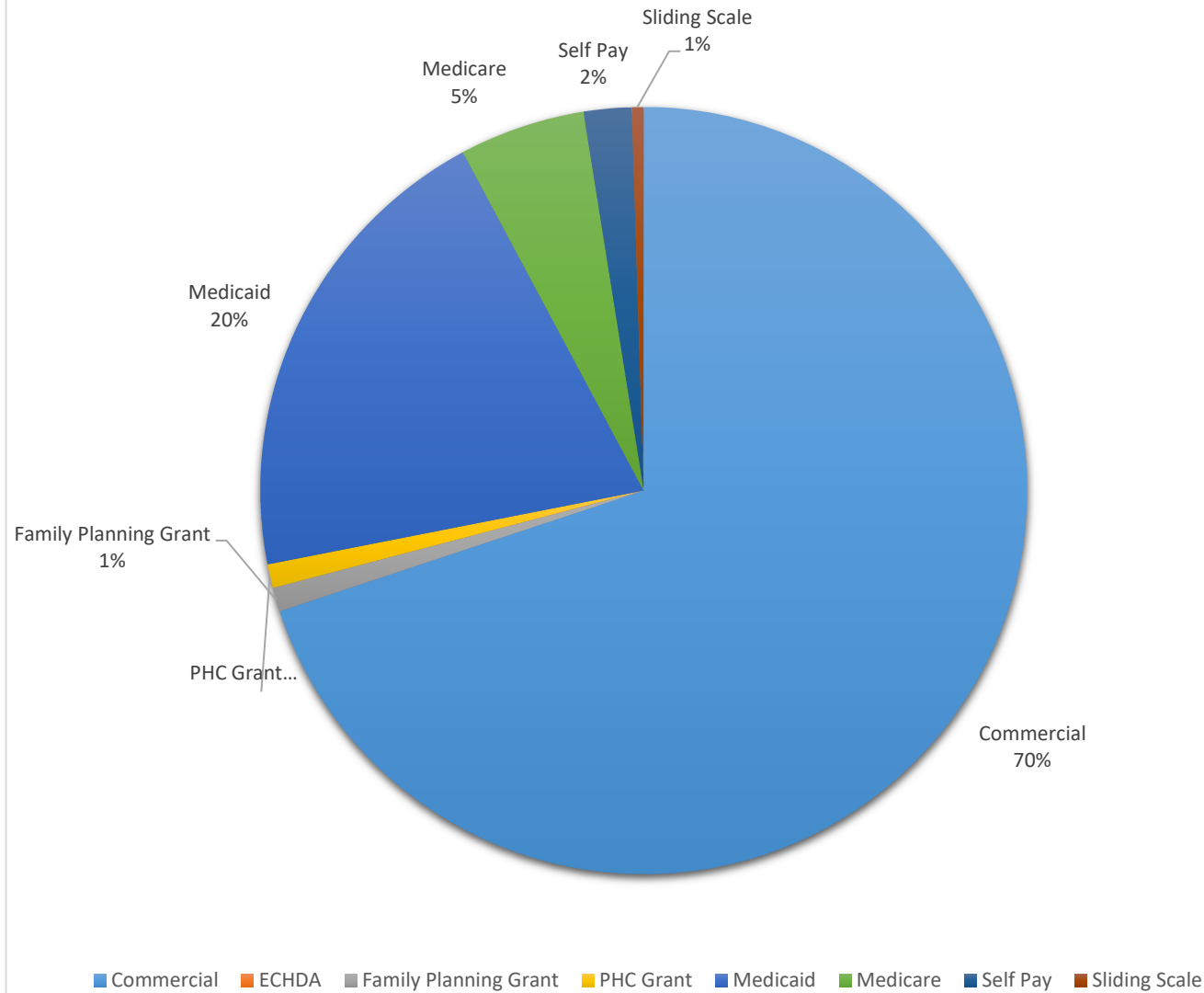
FHC West University February Visits by Financial Class



Healthy Kids Clinic February Visits by Financial Class



Womens Clinic February Visits by Financial Class



FHC Executive Director's Report-April 2025

- **Staffing Update:**
 - **Women's Clinic:** The Women's Clinic is currently in search of an Ultrasound Tech and LVN.
 - **Healthy Kids Clinic:** The Healthy Kids Clinic is currently in search of an LVN and Medical Assistant.
 - **Family Health Clinic:** FHC Clements is currently in search of a front desk position. West University is currently in search of a front desk and medical assistant positions.
- **Provider Update:**
 - **West University:** We are currently searching for a Family Medicine physician, Pediatrician, and Nurse Practitioner for our West University location.
 - **Women's Clinic:** The Women's Clinic is currently searching for two OB/Gyns.
- **Community Health Needs Assessment (CHNA)Update:** Our 2025 CHNA is well under way. Thank you to those that participated in the survey process. We completed four weeks of internal patient surveys as part of the CHNA process with remarkable results. We are on track to have a completed CHNA in the summer of 2025.
- **Annual Mock 340B Audit:** Our annual 340B mock audit was conducted on March 26-27, 2025. Spendmend, our 340B consultant, conducted our mock audit. Overall, it was a great mock audit, we anticipate a formal report in the upcoming weeks.

**ECTOR COUNTY HOSPITAL DISTRICT
MONTHLY STATISTICAL REPORT
FEBRUARY 2025**

	CURRENT MONTH					YEAR-TO-DATE				
	ACTUAL	BUDGET		PRIOR YEAR		ACTUAL	BUDGET		PRIOR YEAR	
		AMOUNT	VAR. %	AMOUNT	VAR. %		AMOUNT	VAR. %	AMOUNT	VAR. %
<u>Hospital InPatient Admissions</u>										
Acute / Adult	1,095	1,226	-10.7%	1,152	-4.9%	5,723	6,169	-7.2%	5,807	-1.4%
Neonatal ICU (NICU)	17	19	-10.5%	21	-19.0%	105	94	11.7%	105	0.0%
Total Admissions	1,112	1,245	-10.7%	1,173	-5.2%	5,828	6,263	-6.9%	5,912	-1.4%
<u>Patient Days</u>										
Adult & Pediatric	4,374	4,491	-2.6%	4,354	0.5%	22,149	22,607	-2.0%	21,985	0.7%
ICU	418	447	-6.5%	397	5.3%	2,214	2,251	-1.6%	2,219	-0.2%
CCU	445	434	2.5%	407	9.3%	2,224	2,182	1.9%	2,212	0.5%
NICU	293	297	-1.3%	309	-5.2%	2,001	1,476	35.6%	1,467	36.4%
Total Patient Days	5,530	5,669	-2.5%	5,467	1.2%	28,588	28,516	0.3%	27,883	2.5%
Observation (Obs) Days	781	672	16.2%	637	22.6%	3,962	3,381	17.2%	3,092	28.1%
Nursery Days	256	293	-12.6%	304	-15.8%	1,363	1,474	-7.5%	1,519	-10.3%
Total Occupied Beds / Bassinets	6,567	6,634	-1.0%	6,408	2.5%	33,913	33,371	1.6%	32,494	4.4%
<u>Average Length of Stay (ALOS)</u>										
Acute / Adult & Pediatric	4.78	4.38	9.1%	4.48	6.8%	4.65	4.38	6.0%	4.55	2.1%
NICU	17.24	15.63	10.3%	14.71	17.1%	19.06	15.70	21.4%	13.97	36.4%
Total ALOS	4.97	4.55	9.2%	4.66	6.7%	4.91	4.55	7.7%	4.72	4.0%
Acute / Adult & Pediatric w/o OB	5.59			5.24	6.6%	5.54			5.32	4.1%
Average Daily Census	197.5	202.5	-2.5%	188.5	4.8%	189.3	188.8	0.3%	183.4	3.2%
Hospital Case Mix Index (CMI)	1.7765	1.7180	3.4%	1.7076	4.0%	1.7779	1.7180	3.5%	1.6990	4.6%
CMI Adjusted LOS	2.80	2.65	5.6%	2.73	2.6%	2.76	2.65	4.1%	2.78	-0.6%
<u>Medicare</u>										
Admissions	455	502	-9.4%	464	-1.9%	2,301	2,523	-8.8%	2,319	-0.8%
Patient Days	2,432	2,597	-6.4%	2,392	1.7%	12,472	13,035	-4.3%	12,612	-1.1%
Average Length of Stay	5.35	5.17	3.3%	5.16	3.7%	5.42	5.17	4.9%	5.44	-0.3%
Case Mix Index	2.0408	1.9465	4.8%	1.8423	10.8%	2.0075	1.9465	3.1%	1.9702	1.9%
<u>Medicaid</u>										
Admissions	110	124	-11.3%	113	-2.7%	568	625	-9.1%	622	-8.7%
Patient Days	443	480	-7.7%	473	-6.3%	2,611	2,420	7.9%	2,449	6.6%
Average Length of Stay	4.03	3.87	4.0%	4.19	-3.8%	4.60	3.87	18.7%	3.94	16.8%
Case Mix Index	1.1012	1.1174	-1.4%	1.2137	-9.3%	1.2201	1.1174	9.2%	1.1074	10.2%
<u>Commercial</u>										
Admissions	362	393	-7.9%	393	-7.9%	1,913	1,977	-3.2%	1,855	3.1%
Patient Days	1,634	1,628	0.4%	1,708	-4.3%	8,553	8,192	4.4%	7,816	9.4%
Average Length of Stay	4.51	4.14	9.0%	4.35	3.9%	4.47	4.14	7.9%	4.21	6.1%
Case Mix Index	1.6216	1.6559	-2.1%	1.7380	-6.7%	1.6806	1.6559	1.5%	1.6146	4.1%
<u>Self Pay</u>										
Admissions	156	195	-20.0%	178	-12.4%	879	982	-10.5%	978	-10.1%
Patient Days	847	820	3.3%	771	9.9%	4,022	4,130	-2.6%	4,309	-6.7%
Average Length of Stay	5.43	4.21	29.1%	4.33	25.4%	4.58	4.21	8.8%	4.41	3.9%
Case Mix Index	1.6951	1.5885	6.7%	1.5985	6.0%	1.7419	1.5885	9.7%	1.5412	13.0%
<u>All Other</u>										
Admissions	29	31	-6.5%	25	16.0%	167	156	7.1%	138	21.0%
Patient Days	174	148	17.6%	123	41.5%	930	747	24.5%	697	33.4%
Average Length of Stay	6.00	4.77	25.7%	4.92	22.0%	5.57	4.79	16.3%	5.05	10.3%
Case Mix Index	2.6697	2.0742	28.7%	1.9085	39.9%	2.1670	2.0742	4.5%	1.9897	8.9%
<u>Radiology</u>										
InPatient	4,634	4,729	-2.0%	4,681	-1.0%	23,333	23,787	-1.9%	23,586	-1.1%
OutPatient	7,859	8,778	-10.5%	8,181	-3.9%	42,270	44,175	-4.3%	40,644	4.0%
<u>Cath Lab</u>										
InPatient	732	674	8.6%	629	16.4%	3,352	3,394	-1.2%	3,312	1.2%
OutPatient	344	553	-37.8%	640	-46.3%	1,895	2,782	-31.9%	2,556	-25.9%
<u>Laboratory</u>										
InPatient	81,226	81,132	0.1%	78,493	3.5%	410,939	408,103	0.7%	398,878	3.0%
OutPatient	73,138	71,402	2.4%	73,311	-0.2%	367,147	359,343	2.2%	350,478	4.8%
<u>Other</u>										
Deliveries	164	172	-4.7%	175	-6.3%	890	867	2.7%	913	-2.5%
<u>Surgical Cases</u>										
InPatient	216	250	-13.6%	207	4.3%	1,189	1,259	-5.6%	1,105	7.6%
OutPatient	492	537	-8.4%	489	0.6%	2,663	2,701	-1.4%	2,504	6.3%
Total Surgical Cases	708	787	-10.0%	696	1.7%	3,852	3,960	-2.7%	3,609	6.7%
<u>GI Procedures (Endo)</u>										
InPatient	123	145	-15.2%	160	-23.1%	659	730	-9.7%	712	-7.4%
OutPatient	158	190	-16.8%	200	-21.0%	843	958	-12.0%	962	-12.4%
Total GI Procedures	281	335	-16.1%	360	-21.9%	1,502	1,688	-11.0%	1,674	-10.3%

**ECTOR COUNTY HOSPITAL DISTRICT
MONTHLY STATISTICAL REPORT
FEBRUARY 2025**

	CURRENT MONTH					YEAR-TO-DATE				
	ACTUAL	BUDGET		PRIOR YEAR		ACTUAL	BUDGET		PRIOR YEAR	
		AMOUNT	VAR. %	AMOUNT	VAR. %		AMOUNT	VAR. %	AMOUNT	VAR. %
<u>OutPatient (O/P)</u>										
Emergency Room Visits	4,883	5,208	-6.2%	5,579	-12.5%	26,888	26,210	2.6%	27,184	-1.1%
Observation Days	781	672	16.2%	637	22.6%	3,962	3,381	17.2%	3,092	28.1%
Other O/P Occasions of Service	19,593	19,827	-1.2%	20,968	-6.6%	99,957	99,782	0.2%	103,244	-3.2%
Total O/P Occasions of Svc.	25,257	25,707	-1.8%	27,184	-7.1%	130,807	129,373	1.1%	133,520	-2.0%
<u>Hospital Operations</u>										
Manhours Paid	275,627	291,889	-5.6%	272,628	1.1%	1,468,097	1,468,424	0.0%	1,411,021	4.0%
FTE's	1,722.7	1,824.3	-5.6%	1,645.2	4.7%	1,701.4	1,701.8	0.0%	1,624.5	4.7%
Adjusted Patient Days	10,446	11,021	-5.2%	10,802	-3.3%	54,259	55,134	-1.6%	53,501	1.4%
Hours / Adjusted Patient Day	26.39	26.49	-0.4%	25.24	4.5%	27.06	26.63	1.6%	26.38	2.6%
Occupancy - Actual Beds	53.7%	58.0%	-7.5%	51.2%	4.8%	51.4%	54.1%	-4.9%	49.8%	3.2%
FTE's / Adjusted Occupied Bed	4.6	4.6	-0.4%	4.4	4.5%	4.7	4.7	1.6%	4.6	2.6%
<u>Family Health Clinic - Clements</u>										
Total Medical Visits	655	640	2.3%	550	19.1%	3,196	2,896	10.4%	2,616	22.2%
Manhours Paid	2,041	1,924	6.1%	1,492	36.7%	9,229	8,707	6.0%	9,718	-5.0%
FTE's	12.8	12.0	6.1%	9.0	41.6%	10.7	10.1	6.0%	11.2	-4.4%
<u>Family Health Clinic - West University</u>										
Total Medical Visits	746	691	8.0%	678	10.0%	3,704	3,276	13.1%	3,255	13.8%
Manhours Paid	1,543	1,487	3.8%	1,086	42.1%	7,983	7,050	13.2%	5,882	35.7%
FTE's	9.6	9.3	3.8%	6.6	47.1%	9.3	8.2	13.2%	6.8	36.6%
<u>Family Health Clinic - JBS</u>										
Total Medical Visits	923	1,028	-10.2%	1,061	-13.0%	4,993	4,454	12.1%	4,525	10.3%
Manhours Paid	1,529	2,068	-26.0%	1,518	0.7%	6,802	8,959	-24.1%	7,855	-13.4%
FTE's	9.6	12.9	-26.0%	9.2	4.3%	7.9	10.4	-24.1%	9.0	-12.8%
<u>Family Health Clinic - Womens</u>										
Total Medical Visits	1,668	1,702	-2.0%	1,767	-5.6%	8,104	8,766	-7.6%	7,879	2.9%
Manhours Paid	3,142	2,601	20.8%	3,284	-4.3%	16,996	13,394	26.9%	16,416	3.5%
FTE's	19.6	16.3	20.8%	19.8	-0.9%	19.7	15.5	26.9%	18.9	4.2%
<u>Total ECHD Operations</u>										
Total Admissions	1,112	1,245	-10.7%	1,173	-5.2%	5,828	6,263	-6.9%	5,912	-1.4%
Total Patient Days	5,530	5,669	-2.5%	5,467	1.2%	28,588	28,516	0.3%	27,883	2.5%
Total Patient and Obs Days	6,311	6,341	-0.5%	6,104	3.4%	32,550	31,897	2.0%	30,975	5.1%
Total FTE's	1,774.3	1,874.8	-5.4%	1,689.7	5.0%	1,749.0	1,746.0	0.2%	1,670.4	4.7%
FTE's / Adjusted Occupied Bed	4.8	4.8	-0.2%	4.5	4.8%	4.9	4.8	1.8%	4.7	2.6%
Total Adjusted Patient Days	10,446	11,021	-5.2%	10,802	-3.3%	54,259	55,134	-1.6%	53,501	1.4%
Hours / Adjusted Patient Day	27.18	27.22	-0.2%	25.92	4.8%	27.81	27.32	1.8%	27.12	2.6%
Outpatient Factor	1.8890	1.9440	-2.8%	1.9758	-4.4%	1.8980	1.9335	-1.8%	1.9188	-1.1%
Blended O/P Factor	2.1002	2.1316	-1.5%	2.1782	-3.6%	2.0961	2.1282	-1.5%	2.1233	-1.3%
Total Adjusted Admissions	2,101	2,420	-13.2%	2,318	-9.4%	11,061	12,109	-8.7%	11,344	-2.5%
Hours / Adjusted Admisssion	135.14	123.94	9.0%	120.82	11.9%	136.43	124.41	9.7%	127.90	6.7%
FTE's - Hospital Contract	47.5	60.6	-21.6%	62.7	-24.2%	46.6	56.6	-17.7%	53.5	-12.9%
FTE's - Mgmt Services	69.6	53.7	29.5%	70.1	-0.7%	58.8	53.7	9.4%	57.5	2.2%
Total FTE's (including Contract)	1,891.4	1,989.2	-4.9%	1,822.5	3.8%	1,854.3	1,856.3	-0.1%	1,781.4	4.1%
<u>Total FTE'S per Adjusted Occupied Bed (including Contract)</u>										
	5.07	5.05	0.3%	4.89	3.6%	5.16	5.08	1.5%	5.06	2.0%
ProCare FTEs	206.7	238.9	-13.5%	211.4	-2.2%	206.4	238.3	-13.4%	204.2	1.1%
TraumaCare FTEs	8.4	9.5	-11.6%	9.1	-8.4%	8.4	9.1	-7.7%	9.4	-10.8%
Total System FTEs	2,106.5	2,237.5	-5.9%	2,043.0	3.1%	2,069.1	2,103.6	-1.6%	1,994.9	3.7%
<u>Urgent Care Visits</u>										
JBS Clinic	1,649	1,324	24.5%	1,547	6.6%	7,711	6,661	15.8%	7,740	-0.4%
West University	1,034	889	16.3%	1,140	-9.3%	5,193	4,472	16.1%	5,562	-6.6%
Total Urgent Care Visits	2,683	2,213	21.2%	2,687	-0.1%	12,904	11,133	15.9%	13,302	-3.0%
<u>Retail Clinic Visits</u>										
Retail Clinic	238	126	88.9%	120	98.3%	869	464	87.3%	443	96.2%

**ECTOR COUNTY HOSPITAL DISTRICT
BALANCE SHEET - BLENDED
FEBRUARY 2025**

	CURRENT YEAR	HOSPITAL UNAUDITED	PRO CARE UNAUDITED	TRAUMA CARE UNAUDITED	CURRENT YEAR CHANGE
ASSETS					
CURRENT ASSETS:					
Cash and Cash Equivalents	\$ 18,554,028	\$ 39,080,496	\$ 4,500	\$ -	\$ (20,530,967)
Investments	71,398,033	51,625,680	-	-	19,772,353
Patient Accounts Receivable - Gross	244,194,203	214,878,735	20,514,645	2,184,343	6,616,480
Less: 3rd Party Allowances	(154,172,815)	(137,537,477)	(11,562,038)	(1,672,339)	(3,400,961)
Bad Debt Allowance	(50,087,093)	(38,524,192)	(5,030,483)	(410,000)	(6,122,418)
Net Patient Accounts Receivable	39,934,294	38,817,066	3,922,124	102,004	(2,906,899)
Taxes Receivable	11,271,362	11,080,895	-	-	190,467
Accounts Receivable - Other	3,103,661	4,024,723	84,681	-	(1,005,743)
Inventories	10,639,208	9,707,477	481,637	-	450,094
Prepaid Expenses	5,583,318	5,310,963	154,463	24,531	93,360
Total Current Assets	160,483,904	159,647,300	4,647,405	126,535	(3,937,336)
CAPITAL ASSETS:					
Property and Equipment	527,039,414	521,685,955	403,173	-	4,950,286
Construction in Progress	20,458,859	17,368,743	-	-	3,090,117
	547,498,273	539,054,698	403,173	-	8,040,402
Less: Accumulated Depreciation and Amortization	(386,522,130)	(377,031,484)	(338,723)	-	(9,151,923)
Total Capital Assets	160,976,143	162,023,214	64,449	-	(1,111,521)
LEASE ASSETS					
Leased Assets	2,337,842	4,190,843	-	-	(1,853,000)
Less Accumulated Amortization Lease Assets	(1,963,402)	(1,956,677)	-	-	(6,726)
Total Lease Assets	374,440	2,234,166	-	-	(1,859,726)
SUBSCRIPTION ASSETS					
Subscription Assets	8,788,862	8,410,917	-	-	377,945
Less Accumulated Amortization Subscription Assets	(3,362,175)	(2,749,774)	-	-	(612,401)
Total Subscription Assets	5,426,688	5,661,144	-	-	(234,456)
LT Lease Recieivable	5,737,328	6,227,920	-	-	(490,592)
INTANGIBLE ASSETS / GOODWILL - NET	-	-	-	-	-
RESTRICTED ASSETS:					
Restricted Assets Held by Trustee	4,896	4,896	-	-	-
Restricted Assets Held in Endowment	6,499,074	6,469,359	-	-	29,715
Restricted TPC, LLC	1,707,903	1,707,903	-	-	-
Investment in PBBHC	44,756,193	30,997,988	-	-	13,758,205
Restricted MCH West Texas Services	2,384,411	2,356,263	-	-	28,148
Pension, Deferred Outflows of Resources	10,795,764	10,795,764	-	-	-
Assets whose use is Limited	324,084	-	271,068	6,480	46,536
TOTAL ASSETS	\$ 399,470,827	\$ 388,125,916	\$ 4,982,922	\$ 133,015	\$ 6,228,973
LIABILITIES AND FUND BALANCE					
CURRENT LIABILITIES:					
		-	0	0	
Current Maturities of Long-Term Debt	\$ 1,880,000	\$ 1,880,000	\$ -	\$ -	\$ -
Self-Insurance Liability - Current Portion	2,941,169	3,640,526	-	-	(699,357)
Current Portion of Lease Liabilities	601,401	627,362	-	-	(25,961)
Current Portion of Subscription Liabilities	1,388,023	1,325,425	-	-	62,598
Accounts Payable	26,242,097	35,655,859	(1,957,165)	(531,939)	(6,924,657)
A/R Credit Balances	2,393,854	2,596,359	-	-	(202,505)
Accrued Interest	747,023	214,256	-	-	532,767
Accrued Salaries and Wages	10,619,234	5,947,335	6,995,870	232,095	(2,556,067)
Accrued Compensated Absences	5,321,234	5,326,543	-	-	(5,309)
Due to Third Party Payors	8,683,192	8,683,192	-	-	-
Deferred Revenue	10,800,362	261,004	(22,952)	-	10,562,311
Total Current Liabilities	71,617,589	66,157,860	5,015,753	(299,844)	443,977
ACCRUED POST RETIREMENT BENEFITS	29,339,994	31,003,241	-	-	(1,663,247)
LESSOR DEFERRED INFLOWS OF RESOUCES	6,516,833	7,050,609	-	-	(533,776)
SELF-INSURANCE LIABILITIES - Less Current Portion	1,799,851	2,422,562	-	-	(622,711)
LEASE LIABILITIES	40,943	2,097,459	-	-	(2,056,517)
SUBSCRIPTION LIABILITIES	3,744,879	3,919,443	-	-	(174,564)
LONG-TERM DEBT - Less Current Maturities	28,121,973	28,360,398	-	-	(238,424)
Total Liabilities	141,182,063	141,011,572	5,015,753	(299,844)	(4,545,419)
FUND BALANCE	258,288,764	247,114,344	(32,831)	432,859	258,321,595
TOTAL LIABILITIES AND FUND BALANCE	\$ 399,470,827	\$ 388,125,916	\$ 4,982,922	\$ 133,015	\$ 6,228,973

**ECTOR COUNTY HOSPITAL DISTRICT
BLENDED OPERATIONS SUMMARY
FEBRUARY 2025**

	CURRENT MONTH					YEAR TO DATE				
	ACTUAL	BUDGET	BUDGET VAR	PRIOR YR	PRIOR YR VAR	ACTUAL	BUDGET	BUDGET VAR	PRIOR YR	PRIOR YR VAR
<u>PATIENT REVENUE</u>										
Inpatient Revenue	\$ 56,454,439	\$ 59,894,281	-5.7%	\$ 53,633,008	5.3%	\$ 291,539,945	\$ 301,241,832	-3.2%	\$ 276,990,244	5.3%
Outpatient Revenue	62,110,173	67,778,033	-8.4%	63,191,473	-1.7%	319,556,965	339,866,481	-6.0%	311,149,037	2.7%
TOTAL PATIENT REVENUE	\$ 118,564,612	\$ 127,672,314	-7.1%	\$ 116,824,481	1.5%	\$ 611,096,909	\$ 641,108,313	-4.7%	\$ 588,139,281	3.9%
<u>DEDUCTIONS FROM REVENUE</u>										
Contractual Adjustments	\$ 74,628,564	\$ 83,034,299	-10.1%	\$ 76,718,005	-2.7%	\$ 391,781,216	\$ 417,770,490	-6.2%	\$ 382,846,044	2.3%
Policy Adjustments	804,032	1,214,899	-33.8%	1,280,602	-37.2%	5,666,278	6,381,317	-11.2%	6,113,958	-7.3%
Uninsured Discount	8,425,051	7,411,494	13.7%	6,903,368	22.0%	47,113,714	37,088,618	27.0%	40,960,984	15.0%
Indigent	677,978	1,059,533	-36.0%	1,129,210	-40.0%	5,976,353	5,286,678	13.0%	2,823,566	111.7%
Provision for Bad Debts	6,581,759	7,747,107	-15.0%	5,990,251	9.9%	28,528,844	39,301,330	-27.4%	32,852,811	-13.2%
TOTAL REVENUE DEDUCTIONS	\$ 91,117,384	\$ 100,467,332	-9.3%	\$ 92,021,436	-1.0%	\$ 479,066,405	\$ 505,828,433	-5.3%	\$ 465,597,363	2.9%
	76.85%	78.69%		78.77%		78.39%	78.90%		79.16%	
<u>OTHER PATIENT REVENUE</u>										
Medicaid Supplemental Payments	\$ 2,191,929	\$ 1,810,333	21.1%	\$ 553,424	296.1%	\$ 9,511,427	\$ 9,051,665	5.1%	\$ 6,760,752	40.7%
DSRIP/CHIRP	22,979	494,167	-95.3%	1,376,525	-98.3%	(390,625)	2,470,835	-115.8%	7,107,529	-105.5%
Medicare Meaningful Use Subsidy	-	-	0.0%	-	0.0%	-	-	0.0%	-	0.0%
TOTAL OTHER PATIENT REVENUE	\$ 2,214,908	\$ 2,304,500	-3.9%	\$ 1,929,949	14.8%	\$ 9,120,802	\$ 11,522,500	-20.8%	\$ 13,868,282	-34.2%
NET PATIENT REVENUE	\$ 29,662,136	\$ 29,509,482	0.5%	\$ 26,732,994	11.0%	\$ 141,151,307	\$ 146,802,380	-3.8%	\$ 136,410,199	3.5%
<u>OTHER REVENUE</u>										
Tax Revenue	\$ 6,915,662	\$ 6,693,589	3.3%	\$ 5,969,989	15.8%	\$ 34,887,741	\$ 33,467,945	4.2%	\$ 32,032,286	8.9%
Other Revenue	1,309,314	1,502,684	-12.9%	1,137,282	15.1%	7,408,588	7,855,985	-5.7%	7,776,297	-4.7%
TOTAL OTHER REVENUE	\$ 8,224,976	\$ 8,196,273	0.4%	\$ 7,107,271	15.7%	\$ 42,296,329	\$ 41,323,930	2.4%	\$ 39,808,582	6.2%
NET OPERATING REVENUE	\$ 37,887,112	\$ 37,705,755	0.5%	\$ 33,840,265	12.0%	\$ 183,447,637	\$ 188,126,310	-2.5%	\$ 176,218,782	4.1%
<u>OPERATING EXPENSES</u>										
Salaries and Wages	\$ 15,075,917	\$ 15,967,754	-5.6%	\$ 14,600,930	3.3%	\$ 78,935,616	\$ 80,103,826	-1.5%	\$ 74,468,396	6.0%
Benefits	1,921,392	2,073,478	-7.3%	2,320,066	-17.2%	11,514,039	10,602,135	8.6%	11,178,239	3.0%
Temporary Labor	1,311,378	1,481,225	-11.5%	1,646,158	-20.3%	6,712,416	7,380,389	-9.1%	8,869,487	-24.3%
Physician Fees	1,179,210	1,199,487	-1.7%	1,243,574	-5.2%	6,344,354	5,995,335	5.8%	5,710,636	11.1%
Texas Tech Support	1,039,631	1,002,447	3.7%	955,345	8.8%	5,044,377	5,012,235	0.6%	4,816,653	4.7%
Purchased Services	4,710,072	4,826,879	-2.4%	4,292,346	9.7%	24,284,417	24,036,128	1.0%	23,339,539	4.0%
Supplies	6,213,556	6,911,928	-10.1%	6,042,057	2.8%	35,280,184	34,732,886	1.6%	32,598,881	8.2%
Utilities	286,297	388,991	-26.4%	419,553	-31.8%	1,612,232	1,907,502	-15.5%	1,893,265	-14.8%
Repairs and Maintenance	919,883	1,039,521	-11.5%	807,728	13.9%	4,477,727	5,198,280	-13.9%	3,788,663	18.2%
Leases and Rent	128,730	106,909	20.4%	107,448	19.8%	682,513	536,073	27.3%	542,419	25.8%
Insurance	212,925	207,411	2.7%	192,503	10.6%	1,136,160	1,037,055	9.6%	933,760	21.7%
Interest Expense	81,914	117,840	-30.5%	54,151	51.3%	401,750	589,200	-31.8%	450,675	-10.9%
ECHDA	126,538	283,446	-55.4%	222,670	-43.2%	444,855	1,417,230	-68.6%	912,022	-51.2%
Other Expense	202,132	242,914	-16.8%	145,203	39.2%	1,002,551	1,290,886	-22.3%	881,883	13.7%
TOTAL OPERATING EXPENSES	\$ 33,409,574	\$ 35,850,230	-6.8%	\$ 33,049,732	1.1%	\$ 177,873,190	\$ 179,839,160	-1.1%	\$ 170,384,518	4.4%
Depreciation/Amortization	\$ 2,043,966	\$ 1,954,301	4.6%	\$ 2,030,975	0.6%	\$ 10,117,279	\$ 9,974,592	1.4%	\$ 9,933,324	1.9%
(Gain) Loss on Sale of Assets	-	-	0.0%	-	0.0%	(300)	-	0.0%	(28,000)	-98.9%
TOTAL OPERATING COSTS	\$ 35,453,539	\$ 37,804,531	-6.2%	\$ 35,080,708	1.1%	\$ 187,990,169	\$ 189,813,752	-1.0%	\$ 180,289,842	4.3%
NET GAIN (LOSS) FROM OPERATIONS	\$ 2,433,573	\$ (98,776)	2563.7%	\$ (1,240,442)	296.2%	\$ (4,542,532)	\$ (1,687,442)	169.2%	\$ (4,071,060)	11.6%
Operating Margin	6.42%	-0.26%	-2551.9%	-3.67%	-275.2%	-2.48%	-0.90%	176.1%	-2.31%	7.2%
<u>NONOPERATING REVENUE/EXPENSE</u>										
Interest Income	\$ 244,095	\$ 137,303	77.8%	\$ 137,679	77.3%	\$ 783,274	\$ 686,515	14.1%	\$ 812,923	-3.6%
Tobacco Settlement	-	-	0.0%	-	0.0%	-	-	-	-	-
Opioid Abatement Fund	-	-	0.0%	-	0.0%	-	-	-	-	-
Trauma Funds	-	-	0.0%	-	0.0%	-	-	0.0%	-	0.0%
Donations	-	-	-	-	-	64,243	-	-	(3,000)	-2241.4%
COVID-19 Stimulus	-	-	0.0%	-	0.0%	78,390	-	0.0%	-	0.0%
						6,054,886	8,876,350		6,312,939	
CHANGE IN NET POSITION BEFORE INVESTMENT ACTIVITY	\$ 2,677,668	\$ 38,527	-6850.1%	\$ (1,102,764)	342.8%	\$ (3,616,625)	\$ (1,000,927)	-261.3%	\$ (3,261,137)	-10.9%
Unrealized Gain/(Loss) on Investments	\$ 101,239	\$ -	0.0%	\$ 4,133	2349.6%	\$ 466,535	\$ -	0.0%	\$ 1,032,862	-54.8%
Investment in Subsidiaries	12,755	96,879	-86.8%	5,148	147.8%	152,428	484,395	-68.5%	5,118	2878.1%
CHANGE IN NET POSITION	\$ 2,791,662	\$ 135,406	-1961.7%	\$ (1,093,483)	355.3%	\$ (2,997,663)	\$ (516,532)	-480.3%	\$ (2,223,156)	-34.8%

**ECTOR COUNTY HOSPITAL DISTRICT
HOSPITAL OPERATIONS SUMMARY
FEBRUARY 2025**

	CURRENT MONTH					YEAR TO DATE				
	ACTUAL	BUDGET	BUDGET VAR	PRIOR YR	PRIOR YR VAR	ACTUAL	BUDGET	BUDGET VAR	PRIOR YR	PRIOR YR VAR
<u>PATIENT REVENUE</u>										
Inpatient Revenue	\$ 56,454,439	\$ 59,894,281	-5.7%	\$ 53,633,008	5.3%	\$ 291,539,945	\$ 301,241,832	-3.2%	\$ 276,990,244	5.3%
Outpatient Revenue	50,188,782	56,542,159	-11.2%	52,334,761	-4.1%	261,794,581	281,196,299	-6.9%	254,488,529	2.9%
TOTAL PATIENT REVENUE	\$ 106,643,221	\$ 116,436,440	-8.4%	\$ 105,967,768	0.6%	\$ 553,334,526	\$ 582,438,131	-5.0%	\$ 531,478,773	4.1%
<u>DEDUCTIONS FROM REVENUE</u>										
Contractual Adjustments	\$ 67,932,899	\$ 77,499,107	-12.3%	\$ 71,262,897	-4.7%	\$ 361,215,172	\$ 388,422,952	-7.0%	\$ 354,067,374	2.0%
Policy Adjustments	52,188	79,071	-34.0%	158,987	-67.2%	400,447	397,030	0.9%	347,560	15.2%
Uninsured Discount	8,142,705	7,164,681	13.7%	6,723,979	21.1%	45,996,366	35,793,537	28.5%	39,823,305	15.5%
Indigent Care	676,974	1,049,047	-35.5%	1,125,342	-39.8%	5,925,633	5,232,439	13.2%	2,787,157	112.6%
Provision for Bad Debts	5,596,610	6,706,881	-16.6%	4,779,552	17.1%	23,238,691	33,583,673	-30.8%	26,923,322	-13.7%
TOTAL REVENUE DEDUCTIONS	\$ 82,401,376	\$ 92,498,787	-10.9%	\$ 84,050,757	-2.0%	\$ 436,776,309	\$ 463,429,631	-5.8%	\$ 423,948,719	3.0%
	77.27%	79.44%		79.32%		78.94%	79.57%		79.77%	
<u>OTHER PATIENT REVENUE</u>										
Medicaid Supplemental Payments	\$ 2,191,929	\$ 1,810,333	21.1%	\$ 553,424	296.1%	\$ 9,511,427	\$ 9,051,665	5.1%	\$ 6,760,752	40.7%
DSRIP/CHIRP	22,979	494,167	-95.3%	1,376,525	-98.3%	(390,625)	2,470,835	-115.8%	7,107,529	-105.5%
TOTAL OTHER PATIENT REVENUE	\$ 2,214,908	\$ 2,304,500	-3.9%	\$ 1,929,949	14.8%	\$ 9,120,802	\$ 11,522,500	-20.8%	\$ 13,868,282	-34.2%
NET PATIENT REVENUE	\$ 26,456,753	\$ 26,242,153	0.8%	\$ 23,846,961	10.9%	\$ 125,679,018	\$ 130,531,000	-3.7%	\$ 121,398,337	3.5%
<u>OTHER REVENUE</u>										
Tax Revenue	\$ 6,915,662	\$ 6,693,589	3.3%	\$ 5,969,989	15.8%	\$ 34,887,741	\$ 33,467,945	4.2%	\$ 32,032,286	8.9%
Other Revenue	1,138,733	1,301,709	-12.5%	978,248	16.4%	6,267,455	6,782,210	-7.6%	6,668,449	-6.0%
TOTAL OTHER REVENUE	\$ 8,054,395	\$ 7,995,298	0.7%	\$ 6,948,237	15.9%	\$ 41,155,196	\$ 40,250,155	2.2%	\$ 38,700,735	6.3%
NET OPERATING REVENUE	\$ 34,511,148	\$ 34,237,451	0.8%	\$ 30,795,198	12.1%	\$ 166,834,214	\$ 170,781,155	-2.3%	\$ 160,099,071	4.2%
<u>OPERATING EXPENSE</u>										
Salaries and Wages	\$ 10,499,357	\$ 11,145,573	-5.8%	\$ 10,307,268	1.9%	\$ 55,523,706	\$ 55,971,379	-0.8%	\$ 52,527,105	5.7%
Benefits	1,361,805	1,577,677	-13.7%	1,863,822	-26.9%	9,039,213	8,259,471	9.4%	8,915,382	1.4%
Temporary Labor	600,408	872,833	-31.2%	956,798	-37.2%	3,398,994	4,392,429	-22.6%	4,258,200	-20.2%
Physician Fees	1,222,933	1,240,268	-1.4%	1,286,413	-4.9%	6,650,179	6,201,340	7.2%	6,040,829	10.1%
Texas Tech Support	1,039,631	1,002,447	3.7%	955,345	8.8%	5,044,377	5,012,235	0.6%	4,816,653	4.7%
Purchased Services	4,994,213	5,123,815	-2.5%	4,556,565	9.6%	25,761,327	25,573,108	0.7%	24,828,809	3.8%
Supplies	6,140,421	6,839,500	-10.2%	5,958,855	3.0%	34,932,927	34,375,974	1.6%	32,252,979	8.3%
Utilities	285,760	388,152	-26.4%	418,659	-31.7%	1,607,974	1,904,048	-15.5%	1,889,632	-14.9%
Repairs and Maintenance	919,636	1,038,229	-11.4%	807,481	13.9%	4,476,841	5,191,820	-13.8%	3,784,350	18.3%
Leases and Rentals	(17,345)	(38,486)	-54.9%	(39,235)	-55.8%	(52,396)	(192,430)	-72.8%	(183,441)	-71.4%
Insurance	149,815	145,158	3.2%	132,138	13.4%	809,480	725,790	11.5%	642,782	25.9%
Interest Expense	81,914	117,840	-30.5%	54,151	51.3%	401,750	589,200	-31.8%	450,675	-10.9%
ECHDA	126,538	283,446	-55.4%	222,670	-43.2%	444,855	1,417,230	-68.6%	912,022	-51.2%
Other Expense	154,278	174,969	-11.8%	84,007	83.6%	682,856	891,746	-23.4%	604,422	13.0%
TOTAL OPERATING EXPENSES	\$ 27,559,364	\$ 29,911,421	-7.9%	\$ 27,564,936	0.0%	\$ 148,722,081	\$ 150,313,340	-1.1%	\$ 141,740,398	4.9%
Depreciation/Amortization	\$ 2,032,008	\$ 1,942,074	4.6%	\$ 2,019,800	0.6%	\$ 10,057,534	\$ 9,913,457	1.5%	\$ 9,892,385	1.7%
(Gain)/Loss on Disposal of Assets	-	-	0.0%	-	0.0%	(300)	-	0.0%	(28,000)	-98.9%
TOTAL OPERATING COSTS	\$ 29,591,372	\$ 31,853,495	-7.1%	\$ 29,584,736	0.0%	\$ 158,779,315	\$ 160,226,797	-0.9%	\$ 151,604,783	4.7%
NET GAIN (LOSS) FROM OPERATIONS	\$ 4,919,776	\$ 2,383,956	106.4%	\$ 1,210,461	-306.4%	\$ 8,054,899	\$ 10,554,358	-23.7%	\$ 8,494,288	5.2%
Operating Margin	14.26%	6.96%	104.7%	3.93%	262.7%	4.83%	6.18%	-21.9%	5.31%	-9.0%
<u>NONOPERATING REVENUE/EXPENSE</u>										
Interest Income	\$ 244,095	\$ 137,303	77.8%	\$ 137,679	77.3%	\$ 783,274	\$ 686,515	14.1%	\$ 812,923	-3.6%
Tobacco Settlement	-	-	0.0%	-	0.0%	-	-	-	-	0.0%
Opioid Abatement Fund	-	-	0.0%	-	0.0%	-	-	-	-	0.0%
Trauma Funds	-	-	0.0%	-	0.0%	-	-	0.0%	-	0.0%
Donations	-	-	0.0%	-	0.0%	64,243	-	-	(3,000)	-224.4%
COVID-19 Stimulus	-	-	0.0%	-	0.0%	78,390	-	-	-	0.0%
CHANGE IN NET POSITION BEFORE CAPITAL CONTRIBUTION	\$ 5,163,871	\$ 2,521,259	104.8%	\$ 1,348,141	283.0%	\$ 8,980,806	\$ 11,240,873	-20.1%	\$ 9,304,211	-3.5%
Procure Capital Contribution	(2,525,157)	(2,495,716)	1.2%	(2,483,011)	1.7%	(12,742,910)	(12,391,322)	2.8%	(12,777,329)	-0.3%
CHANGE IN NET POSITION BEFORE INVESTMENT ACTIVITY	\$ 2,638,714	\$ 25,543	-10230.4%	\$ (1,134,870)	332.5%	\$ (3,762,104)	\$ (1,150,449)	-227.0%	\$ (3,473,118)	-8.3%
Unrealized Gain/(Loss) on Investments	\$ 101,239	\$ -	0.0%	\$ 4,133	2349.6%	\$ 466,535	\$ -	0.0%	\$ 1,032,862	-54.8%
Investment in Subsidiaries	12,755	96,879	-86.8%	5,148	147.8%	152,428	484,395	-68.5%	5,118	2878.1%
CHANGE IN NET POSITION	\$ 2,752,708	\$ 122,422	-2148.5%	\$ (1,125,590)	344.6%	\$ (3,143,141)	\$ (666,054)	-371.9%	\$ (2,435,137)	-29.1%

**ECTOR COUNTY HOSPITAL DISTRICT
PROCARE OPERATIONS SUMMARY
FEBRUARY 2025**

	CURRENT MONTH					YEAR TO DATE				
	ACTUAL	BUDGET	BUDGET VAR	PRIOR YR	PRIOR YR VAR	ACTUAL	BUDGET	BUDGET VAR	PRIOR YR	PRIOR YR VAR
PATIENT REVENUE										
Outpatient Revenue	\$ 11,755,056	\$ 11,070,751	6.2%	\$ 10,653,662	10.3%	\$ 56,968,625	\$ 57,536,154	-1.0%	\$ 55,601,054	2.5%
TOTAL PATIENT REVENUE	\$ 11,755,056	\$ 11,070,751	6.2%	\$ 10,653,662	10.3%	\$ 56,968,625	\$ 57,536,154	-1.0%	\$ 55,601,054	2.5%
DEDUCTIONS FROM REVENUE										
Contractual Adjustments	\$ 6,613,489	\$ 5,455,899	21.2%	\$ 5,351,254	23.6%	\$ 30,170,711	\$ 28,802,970	4.7%	\$ 28,324,023	6.5%
Policy Adjustments	730,025	1,110,586	-34.3%	1,103,724	-33.9%	5,162,012	5,810,927	-11.2%	5,610,315	-8.0%
Uninsured Discount	282,346	246,813	14.4%	179,389	57.4%	1,117,348	1,295,081	-13.7%	1,137,679	-1.8%
Indigent	1,005	10,486	-90.4%	3,867	-74.0%	50,720	54,239	-6.5%	36,409	39.3%
Provision for Bad Debts	959,745	1,014,877	-5.4%	1,177,589	-18.5%	5,163,171	5,543,564	-6.9%	5,780,838	-10.7%
TOTAL REVENUE DEDUCTIONS	\$ 8,586,610	\$ 7,838,661	9.5%	\$ 7,815,823	9.9%	\$ 41,663,962	\$ 41,506,781	0.4%	\$ 40,889,263	1.9%
	73.05%	70.81%		73.36%		73.13%	72.14%		73.54%	
NET PATIENT REVENUE	\$ 3,168,446	\$ 3,232,090	-2.0%	\$ 2,837,839	11.6%	\$ 15,304,662	\$ 16,029,373	-4.5%	\$ 14,711,791	4.0%
OTHER REVENUE										
Other Income	\$ 168,565	\$ 199,900	-15.7%	\$ 159,017	6.0%	\$ 1,134,499	\$ 1,068,400	6.2%	\$ 1,100,894	3.1%
TOTAL OTHER REVENUE										
NET OPERATING REVENUE	\$ 3,337,011	\$ 3,431,990	-2.8%	\$ 2,996,856	11.4%	\$ 16,439,161	\$ 17,097,773	-3.9%	\$ 15,812,685	4.0%
OPERATING EXPENSE										
Salaries and Wages	\$ 4,354,019	\$ 4,577,801	-4.9%	\$ 4,056,952	7.3%	\$ 22,226,286	\$ 22,905,612	-3.0%	\$ 20,700,220	7.4%
Benefits	534,814	469,944	13.8%	429,382	24.6%	2,398,510	2,237,318	7.2%	2,172,962	10.4%
Temporary Labor	710,970	608,392	16.9%	689,361	3.1%	3,313,422	2,987,960	10.9%	4,611,288	-28.1%
Physician Fees	215,525	218,467	-1.3%	216,409	-0.4%	990,415	1,090,235	-9.2%	966,048	2.5%
Purchased Services	(284,571)	(298,439)	-4.6%	(264,827)	7.5%	(1,482,612)	(1,544,495)	-4.0%	(1,495,177)	-0.8%
Supplies	72,313	72,259	0.1%	82,705	-12.6%	344,884	355,853	-3.1%	344,586	0.1%
Utilities	536	839	-36.1%	894	-40.1%	4,259	3,454	23.3%	3,633	17.2%
Repairs and Maintenance	247	1,292	-80.9%	247.05	0.0%	886	6,460	-86.3%	4,312	-79.4%
Leases and Rentals	145,422	143,402	1.4%	144,690	0.5%	730,301	718,538	1.6%	715,893	2.0%
Insurance	53,388	54,021	-1.2%	52,090	2.5%	278,072	270,105	2.9%	249,602	11.4%
Other Expense	47,547	67,501	-29.6%	60,788	-21.8%	317,904	396,920	-19.9%	275,708	15.3%
TOTAL OPERATING EXPENSES	\$ 5,850,211	\$ 5,915,479	-1.1%	\$ 5,468,691	7.0%	\$ 29,122,326	\$ 29,427,960	-1.0%	\$ 28,549,075	2.0%
Depreciation/Amortization	\$ 11,957	\$ 12,227	-2.2%	\$ 11,175	7.0%	\$ 59,746	\$ 61,135	-2.3%	\$ 40,939	45.9%
(Gain)/Loss on Sale of Assets	-	-	0.0%	-	0.0%	-	-	0.0%	-	0.0%
TOTAL OPERATING COSTS	\$ 5,862,168	\$ 5,927,706	-1.1%	\$ 5,479,867	7.0%	\$ 29,182,071	\$ 29,489,095	-1.0%	\$ 28,590,014	2.1%
NET GAIN (LOSS) FROM OPERATIONS	\$ (2,525,157)	\$ (2,495,716)	1.2%	\$ (2,483,011)	1.7%	\$ (12,742,910)	\$ (12,391,322)	2.8%	\$ (12,777,329)	-0.3%
Operating Margin	-75.67%	-72.72%	4.1%	-82.85%	-8.7%	-77.52%	-72.47%	7.0%	-80.80%	-4.1%
COVID-19 Stimulus	\$ -	\$ -	0.0%	\$ -	0.0%	\$ -	\$ -	0.0%	\$ -	0.0%
MCH Contribution	\$ 2,525,157	\$ 2,495,716	1.2%	\$ 2,483,011	1.7%	\$ 12,742,910	\$ 12,391,322	2.8%	\$ 12,777,329	-0.3%
CAPITAL CONTRIBUTION	\$ -	\$ -	0.0%	\$ -	0.0%	\$ -	\$ -	0.0%	\$ -	0.0%

MONTHLY STATISTICAL REPORT

	CURRENT MONTH					YEAR TO DATE				
Total Office Visits	8,122	8,611	-5.7%	8,088	0.42%	38,730	40,161	-3.6%	37,856	2.31%
Total Hospital Visits	6,777	6,881	-1.5%	6,515	4.02%	33,406	35,369	-5.6%	33,043	1.10%
Total Procedures	12,855	13,611	-5.6%	12,422	3.49%	65,890	68,688	-4.1%	63,510	3.75%
Total Surgeries	896	784	14.3%	765	17.12%	4,084	3,713	10.0%	3,862	5.75%
Total Provider FTE's	83.8	89.7	-6.6%	83.7	0.15%	86.5	89.7	-3.6%	84.1	2.92%
Total Staff FTE's	114.6	137.7	-16.8%	114.0	0.48%	111.6	137.0	-18.5%	107.8	3.60%
Total Administrative FTE's	8.4	11.5	-27.3%	13.6	-38.75%	8.3	11.5	-28.2%	12.3	-33.10%
Total FTE's	206.7	238.9	-13.5%	211.4	-2.18%	206.4	238.3	-13.4%	204.2	1.10%

**ECTOR COUNTY HOSPITAL DISTRICT
TRAUMACARE OPERATIONS SUMMARY
FEBRUARY 2025**

	CURRENT MONTH					YEAR TO DATE				
	ACTUAL	BUDGET	BUDGET VAR	PRIOR YR	PRIOR YR VAR	ACTUAL	BUDGET	BUDGET VAR	PRIOR YR	PRIOR YR VAR
<u>PATIENT REVENUE</u>										
Outpatient Revenue	\$ 166,335	\$ 165,123	0.7%	\$ 203,050	-18.1%	\$ 793,759	\$ 1,134,028	-30.0%	\$ 1,059,453	-25.1%
TOTAL PATIENT REVENUE	\$ 166,335	\$ 165,123	0.7%	\$ 203,050	-18.1%	\$ 793,759	\$ 1,134,028	-30.0%	\$ 1,059,453	-25.1%
<u>DEDUCTIONS FROM REVENUE</u>										
Contractual Adjustments	\$ 82,176	\$ 79,293	3.6%	\$ 103,854	-20.9%	\$ 395,332	\$ 544,568	-27.4%	\$ 454,647	-13.0%
Policy Adjustments	21,818	25,242	-13.6%	17,891	22.0%	103,819	173,360	-40.1%	156,083	-33.5%
Uninsured Discount	-	-	0.0%	-	0.0%	-	-	0.0%	-	0.0%
Indigent	-	-	0.0%	-	0.0%	-	-	0.0%	-	0.0%
Provision for Bad Debts	25,404	25,349	0.2%	33,110	-23.3%	126,981	174,093	-27.1%	148,651	-14.6%
TOTAL REVENUE DEDUCTIONS	\$ 129,398	\$ 129,884	-0.4%	\$ 154,856	-16.4%	\$ 626,133	\$ 892,021	-29.8%	\$ 759,381	-17.5%
	77.79%	78.66%		76.26%		78.88%	78.66%		71.68%	
NET PATIENT REVENUE	\$ 36,937	\$ 35,239	4.8%	\$ 48,194	-23.4%	\$ 167,627	\$ 242,007	-30.7%	\$ 300,072	-44.1%
						21.1%				
<u>OTHER REVENUE</u>										
Other Income	\$ 2,016	\$ 1,075	87.5%	\$ 17	11913.5%	\$ 6,634	\$ 5,375	23.4%	\$ 6,954	-4.6%
TOTAL OTHER REVENUE										
NET OPERATING REVENUE	\$ 38,953	\$ 36,314	7.3%	\$ 48,211	-19.2%	\$ 174,261	\$ 247,382	-29.6%	\$ 307,026	-43.2%
<u>OPERATING EXPENSE</u>										
Salaries and Wages	\$ 222,540	\$ 244,380	-8.9%	\$ 236,710	-6.0%	\$ 1,185,625	\$ 1,226,835	-3.4%	\$ 1,241,071	-4.5%
Benefits	24,773	25,857	-4.2%	26,862	-7.8%	76,316	105,346	-27.6%	89,894	-15.1%
Temporary Labor	-	-	0.0%	-	0.0%	-	-	0.0%	-	0.0%
Physician Fees	(259,248)	(259,248)	0.0%	(259,248)	0.0%	(1,296,240)	(1,296,240)	0.0%	(1,296,240)	0.0%
Purchased Services	430	1,503	-71.4%	608	-29.3%	5,701	7,515	-24.1%	5,907	-3.5%
Supplies	822	169	386.3%	497	65.3%	2,374	1,059	124.2%	1,316	80.4%
Utilities	-	-	0.0%	-	0.0%	-	-	0.0%	-	0.0%
Repairs and Maintenance	-	-	0.0%	-	0.0%	-	-	0.0%	-	0.0%
Leases and Rentals	653	1,993	-67.2%	1,993	-67.2%	4,607	9,965	-53.8%	9,967	-53.8%
Insurance	9,722	8,232	18.1%	8,275	17.5%	48,608	41,160	18.1%	41,376	17.5%
Other Expense	307	444	-30.9%	408	-24.8%	1,791	2,220	-19.3%	1,753	2.1%
TOTAL OPERATING EXPENSES	\$ (1)	\$ 23,330	-100.0%	\$ 16,105	-100.0%	\$ 28,783	\$ 97,860	-70.6%	\$ 95,045	-69.7%
Depreciation/Amortization	\$ -	\$ -	0.0%	\$ -	0.0%	\$ -	\$ -	0.0%	\$ -	0.0%
(Gain)/Loss on Sale of Assets	-	-	0.0%	-	0.0%	-	-	0.0%	-	0.0%
TOTAL OPERATING COSTS	\$ (1)	\$ 23,330	-100.0%	\$ 16,105	-100.0%	\$ 28,783	\$ 97,860	-70.6%	\$ 95,045	-69.7%
NET GAIN (LOSS) FROM OPERATIONS	\$ 38,954	\$ 12,984	200.0%	\$ 32,106	21.3%	\$ 145,478	\$ 149,522	-2.7%	\$ 211,981	-31.4%
Operating Margin	100.00%	35.75%	179.7%	66.60%	50.2%	83.48%	60.44%	38.1%	69.04%	20.9%
COVID-19 Stimulus	\$ -	\$ -	0.0%	\$ -	0.0%	\$ -	\$ -	0.0%	\$ -	0.0%
MCH Contribution	\$ -	\$ -	0.0%	\$ -	0.0%	\$ -	\$ -	0.0%	\$ -	0.0%
CAPITAL CONTRIBUTION	\$ 38,954	\$ 12,984	200.0%	\$ 32,106	21.3%	\$ 145,478	\$ 149,522	-2.7%	\$ 211,981	-31.4%

MONTHLY STATISTICAL REPORT

	CURRENT MONTH					YEAR TO DATE				
Total Procedures	342	484	-29.34%	648	-47.22%	1,951	3,324	-41.31%	3,134	-37.75%
Total Provider FTE's	7.4	8.6	-14.81%	8.1	-9.46%	7.4	8.0	-8.26%	8.3	-11.94%
Total Staff FTE's	1.0	0.8	23.07%	1.0	0.00%	1.0	1.0	-3.59%	1.0	-1.65%
Total FTE's	8.4	9.5	-11.56%	9.1	-8.43%	8.4	9.1	-7.72%	9.4	-10.82%

**ECTOR COUNTY HOSPITAL DISTRICT
DIABETES SCREENING CLINIC - SOUTH - OPERATIONS SUMMARY
FEBRUARY 2025**

	CURRENT MONTH					YEAR TO DATE				
	ACTUAL	BUDGET	BUDGET VAR	PRIOR YR	PRIOR YR VAR	ACTUAL	BUDGET	BUDGET VAR	PRIOR YR	PRIOR YR VAR
PATIENT REVENUE										
Outpatient Revenue	\$ 7,179	\$ 4,078	76.0%	\$ 1,268	466.2%	\$ 30,898	\$ 20,099	53.7%	\$ 1,268	2336.8%
TOTAL PATIENT REVENUE	\$ 7,179	\$ 4,078	76.0%	\$ 1,268	466.2%	\$ 30,898	\$ 20,099	53.7%	\$ 1,268	2336.8%
DEDUCTIONS FROM REVENUE										
Contractual Adjustments	\$ -	\$ -	0.0%	\$ -	0.0%	\$ -	\$ -	0.0%	\$ -	0.0%
Self Pay Adjustments	-	2,439	-100.0%	-	0.0%	21,185	12,195	73.7%	-	0.0%
Bad Debts	-	-	0.0%	-	0.0%	-	-	0.0%	-	0.0%
TOTAL REVENUE DEDUCTIONS	\$ -	\$ 2,439	-100.0%	\$ -	0.0%	\$ 21,185	\$ 12,195	73.7%	\$ -	0.0%
	0.0%	59.8%		0.0%		68.6%	60.7%		0.0%	
NET PATIENT REVENUE	\$ 7,179	\$ 1,639	338.0%	\$ 1,268	466.2%	\$ 9,713	\$ 7,904	22.9%	\$ 1,268	666.0%
OTHER REVENUE										
Other Revenue	\$ -	\$ -	0.0%	\$ -	0.0%	\$ -	\$ -	0.0%	\$ -	0.0%
TOTAL OTHER REVENUE	\$ -	\$ -	0.0%	\$ -	0.0%	\$ -	\$ -	0.0%	\$ -	0.0%
NET OPERATING REVENUE	\$ 7,179	\$ 1,639	338.0%	\$ 1,268	466.2%	\$ 9,713	\$ 7,904	22.9%	\$ 1,268	666.0%
OPERATING EXPENSE										
Salaries and Wages	\$ 551	\$ 530	3.9%	\$ 564	-2.5%	\$ 3,088	\$ 2,611	18.3%	\$ -	0.0%
Benefits	71	75	-5.3%	102	-30.4%	503	385	30.6%	-	0.0%
Physician Services	2,000	937	113.4%	180	1011.1%	10,500	4,685	124.1%	-	0.0%
Cost of Drugs Sold	-	-	0.0%	-	0.0%	-	-	0.0%	-	0.0%
Supplies	418	722	-42.1%	992	-57.9%	817	3,567	-77.1%	3,133	-73.9%
Utilities	-	-	0.0%	-	0.0%	-	-	0.0%	-	0.0%
Repairs and Maintenance	-	3,061	-100.0%	10,835	-100.0%	40	15,305	-99.7%	24,160	-99.8%
Leases and Rentals	-	-	0.0%	-	0.0%	-	-	0.0%	-	0.0%
Other Expense	-	-	0.0%	-	0.0%	-	-	0.0%	-	0.0%
TOTAL OPERATING EXPENSES	\$ 3,039	\$ 5,325	-42.9%	\$ 12,674	-76.0%	\$ 14,947	\$ 26,553	-43.7%	\$ 27,293	-45.2%
Depreciation/Amortization	\$ 905	\$ 2,135	-57.6%	\$ 2,769	-67.3%	\$ 4,525	\$ 10,683	-57.6%	\$ 13,847	-67.3%
TOTAL OPERATING COSTS	\$ 3,944	\$ 7,460	-47.1%	\$ 15,443	-74.5%	\$ 19,472	\$ 37,236	-47.7%	\$ 41,140	-52.7%
NET GAIN (LOSS) FROM OPERATIONS	\$ 3,235	\$ (5,821)	155.6%	\$ (14,175)	122.8%	\$ (9,759)	\$ (29,332)	66.7%	\$ (39,872)	75.5%
Operating Margin	45.06%	-355.16%	-112.7%	-1117.90%	-104.0%	-100.47%	-371.10%	-72.9%	-3144.48%	-96.8%

	CURRENT MONTH					YEAR TO DATE				
Medical Visits	23	14	64.3%	-	0.0%	103	69	49.3%	-	0.0%
Hospital FTE's (Salaries and Wages)	0.1	0.2	-32.0%	0.1	10.4%	0.1	0.2	-23.5%	0.0	499.9%

**ECTOR COUNTY HOSPITAL DISTRICT
FEBRUARY 2025**

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	\$ 41,202,194	38.6%	\$ 40,600,812	38.3%	\$ 214,318,908	38.8%	207,942,858	39.1%
Medicaid	11,877,638	11.1%	13,252,224	12.5%	60,930,439	11.0%	67,788,540	12.8%
Commercial	40,119,345	37.6%	38,895,201	36.7%	203,718,465	36.8%	185,624,906	34.9%
Self Pay	10,082,349	9.5%	8,961,304	8.5%	56,535,508	10.2%	50,794,160	9.6%
Other	3,361,695	3.2%	4,258,227	4.0%	17,831,206	3.2%	19,328,309	3.6%
TOTAL	\$ 106,643,221	100.0%	\$ 105,967,768	100.0%	\$ 553,334,526	100.0%	531,478,773	100.0%

PAYMENTS BY PAYOR

	CURRENT MONTH				YEAR TO DATE			
	CURRENT YEAR		PRIOR YEAR		CURRENT YEAR		PRIOR YEAR	
	PAYMENTS	%	PAYMENTS	%	PAYMENTS	%	PAYMENTS	%
Medicare	\$ 8,273,825	35.2%	\$ 9,643,325	42.7%	\$ 44,945,439	37.6%	41,887,950	38.3%
Medicaid	3,285,596	14.0%	2,726,568	12.1%	12,653,302	10.6%	13,816,410	12.6%
Commercial	9,194,447	39.1%	8,023,615	35.5%	49,106,607	41.2%	42,721,267	39.1%
Self Pay	1,362,016	5.8%	1,374,714	6.1%	6,497,011	5.4%	6,516,284	6.0%
Other	1,376,802	5.9%	821,690	3.6%	6,219,534	5.2%	4,376,736	4.0%
TOTAL	\$ 23,492,687	100.0%	\$ 22,589,911	100.0%	\$ 119,421,894	100.0%	109,318,648	100.0%

**ECTOR COUNTY HOSPITAL DISTRICT
STATEMENT OF CASH FLOW
FEBRUARY 2025**

	Hospital	ProCare	TraumaCare	Blended
Cash Flows from Operating Activities and Nonoperating Revenue:				
Excess of Revenue over Expenses	\$ (3,143,141)	-	145,478	\$ (2,997,663)
Noncash Expenses:				
Depreciation and Amortization	9,943,832	6,541	-	9,950,373
Unrealized Gain/Loss on Investments	466,535	-	-	466,535
Accretion (Bonds) & COVID Funding	(238,424)	-	-	(238,424)
Changes in Assets and Liabilities				
Patient Receivables, Net	2,974,491	(64,313)	(3,279)	2,906,899
Taxes Receivable/Deferred	10,397,268	(25,425)	-	10,371,844
Inventories, Prepaids and Other	794,155	(35,953)	4,922	763,124
LT Lease Rec	490,592	-	-	-
Deferred Inflow of Resources	-	-	-	-
Accounts Payable	(8,806,600)	1,513,263	(112,252)	(7,405,589)
Accrued Expenses	(599,427)	(1,394,038)	(34,869)	(2,028,334)
Due to Third Party Payors	(646,399)	-	-	(646,399)
Accrued Post Retirement Benefit Costs	(3,107,383)	-	-	(3,107,383)
Net Cash Provided by Operating Activities	\$ 8,525,499	75	-	\$ 8,525,574
Cash Flows from Investing Activities:				
Investments	\$ (20,238,888)	-	-	\$ (20,238,888)
Acquisition of Property and Equipment	(8,418,347)	-	-	(8,418,347)
Net Cash used by Investing Activities	\$ (28,657,235)	-	-	\$ (28,657,235)
Cash Flows from Financing Activities:				
Current Portion Debt	\$ -	-	-	\$ -
Principal Paid on Subscription Liabilities	\$ 62,598	-	-	\$ -
Principal Paid on Lease Liabilities	\$ 46,927	-	-	\$ -
Intercompany Activities	-	-	-	-
LT Liab Subscriptions	(174,564)	-	-	-
LT Liab Leases	(276,405)	-	-	-
Net Repayment of Long-term Debt/Bond Issuance	-	-	-	-
Net Cash used by Financing Activities	(341,443)	-	-	(341,443)
Net Increase (Decrease) in Cash	(20,473,179)	75	-	(20,473,104)
Beginning Cash & Cash Equivalents @ 9/30/2024	49,618,916	4,500	-	49,623,416
Ending Cash & Cash Equivalents @ 2/28/2025	\$ 29,145,737	\$ 4,575	\$ -	\$ 29,150,312

**ECTOR COUNTY HOSPITAL DISTRICT
MEDICAID SUPPLEMENTAL PAYMENTS
FISCAL YEAR 2025**

CASH ACTIVITY	TAX (IGT) ASSESSED	GOVERNMENT PAYOUT	BURDEN ALLEVIATION	NET INFLOW
DSH				
Oct/11	\$0	\$0		\$0
Nov 11	\$0	\$0		\$0
Dec/11	\$0	\$0		\$0
1st Qtr	\$ (4,984,427)	\$ 12,442,343		\$ 7,457,916
Jan /12				-
Feb /12				-
Mar /12				-
2nd Qtr	-	-		-
Apr /12				-
May /12				-
June /12				-
3rd Qtr	-	-		-
July /12				-
Aug /11				-
Sept/11				-
4th Qtr	-	-		-
DSH TOTAL	\$ (4,984,427)	\$ 12,442,343		\$ 7,457,916
UC				
1st Qtr	\$ (1,903)	\$ -		(1,903)
2nd Qtr	(3,541,947)	8,859,960		5,318,013
3rd Qtr	-	-		-
4th Qtr	-	-		-
UC TOTAL	\$ (3,543,850)	\$ 8,859,960		\$ 5,316,110
APHRIQA				
1st Qtr	\$ -	\$ -		\$ -
2nd Qtr	-	-		-
3rd	-	-		-
4th Qtr	-	-		-
APHRIQA TOTAL	\$ -	\$ -		\$ -
DSRIP				
1st Qtr	\$ -	\$ -		\$ -
2nd Qtr	-	-		-
3rd Qtr	-	-		-
4th Qtr	-	-		-
DSRIP UPL TOTAL	\$ -	\$ -		\$ -
ATLAS				
1st Qtr	\$ -	\$ -		\$ -
2nd Qtr	(1,472,873)	-		(1,472,873)
3rd Qtr	-	-		-
4th Qtr	-	-		-
ATLAS TOTAL	\$ (1,472,873)	\$ -		\$ (1,472,873)
GME				
1st Qtr	\$ -	\$ -		\$ -
2nd Qtr	(651,186)	1,627,965		976,779
3rd	-	-		-
4th Qtr	-	-		-
GME TOTAL	\$ (651,186)	\$ 1,627,965		\$ 976,779
CHIRP				
1st Qtr	\$ (6,004,341)	\$ 461,991		\$ (5,542,350)
2nd Qtr	-	1,635,063		1,635,063
3rd	-	-		-
4th Qtr	-	-		-
CHIRP TOTAL	\$ (6,004,341)	\$ 2,097,055		\$ (3,907,286)
HARP				
1st Qtr	\$ -	\$ -		\$ -
2nd Qtr	(804,258)	2,010,644		1,206,387
3rd	-	-		-
4th Qtr	-	-		-
HARP TOTAL	\$ (804,258)	\$ 2,010,644		\$ 1,206,387
TIPPS				
1st Qtr	\$ -	\$ -		\$ -
2nd Qtr	-	-		-
3rd	-	-		-
4th Qtr	-	-		-
TIPPS TOTAL	\$ -	\$ -		\$ -
MCH Cash Activity	\$ (17,460,935)	\$ 27,037,967		\$ 9,577,032
ProCare Cash Activity	\$ -	\$ -	\$ -	\$ -
Blended Cash Activity	\$ (17,460,935)	\$ 27,037,967	\$ -	\$ 9,577,032

INCOME STATEMENT ACTIVITY:

FY 2025 Accrued / (Deferred) Adjustments:

	BLENDED
DSH	\$ 4,071,734
UC	3,606,431
APHRIQA	-
ATLAS	-
GME	715,000
CHIRP	(390,625)
HARP	620,000
TIPPS	116,665
Regional UPL Benefit	-
Medicaid Supplemental Payments	8,739,206
DSRIP Accrual	-
Total Adjustments	\$ 8,739,206

ECTOR COUNTY HOSPITAL DISTRICT
SUPPLEMENTAL SCHEDULE OF HOSPITAL TEMPORARY LABOR FTE'S
FEBRUARY 2025

TEMPORARY LABOR DEPARTMENT	CURRENT MONTH					YEAR TO DATE				
	ACTUAL	BUDGET	BUDGET VAR	PRIOR YR	PRIOR YR VAR	ACTUAL	BUDGET	BUDGET VAR	PRIOR YR	PRIOR YR VAR
Cardiopulmonary	11.0	12.7	-13.8%	14.9	-26.6%	11.0	11.9	-7.5%	13.7	-19.8%
Operating Room	7.5	13.2	-43.1%	14.5	-48.2%	9.2	12.3	-25.3%	12.5	-26.4%
Imaging - Diagnostics	4.7	3.6	27.7%	3.3	42.7%	4.2	3.4	22.5%	2.8	49.3%
Labor & Delivery	4.0	5.3	-25.2%	5.4	-26.4%	3.7	5.0	-24.8%	4.5	-16.5%
Intensive Care Unit (ICU) 2	2.9	1.7	75.3%	1.5	90.3%	1.8	1.6	13.6%	0.8	125.3%
4 East - Post Partum	1.3	1.6	-18.6%	1.7	-22.3%	1.3	1.5	-11.4%	1.4	-6.5%
Laboratory - Chemistry	1.0	7.0	-85.8%	4.6	-78.6%	1.2	6.5	-81.3%	4.2	-71.0%
7 Central	0.9	1.1	-13.8%	0.9	0.2%	1.1	1.0	14.7%	0.3	338.0%
Intensive Care Unit (CCU) 4	0.9	1.3	-28.9%	1.0	-6.0%	1.1	1.2	-3.8%	0.6	105.2%
UTILIZATION REVIEW	1.0	0.6	55.6%	1.0	2.7%	0.9	0.6	53.1%	0.5	92.1%
Imaging - Ultrasound	0.9	1.1	-11.2%	1.1	-13.4%	0.9	1.0	-12.6%	1.1	-20.9%
PM&R - Physical	1.9	0.5	265.6%	-	0.0%	0.8	0.5	64.0%	-	0.0%
Center for Health and Wellness - Sports Medici	0.7	1.8	-62.6%	1.0	-32.2%	0.6	1.7	-63.4%	0.9	-30.6%
PM&R - Speech	1.0	-	0.0%	-	0.0%	0.6	-	0.0%	-	0.0%
Laboratory - Histology	1.0	1.0	8.0%	1.1	-1.8%	0.6	0.9	-36.7%	1.0	-40.5%
Imaging - Nuclear Medicine	-	-	0.0%	-	0.0%	0.5	-	0.0%	-	0.0%
Pharmacy - Retail	1.0	-	0.0%	-	0.0%	0.4	-	0.0%	-	0.0%
6 Central	0.2	0.3	-26.0%	0.2	0.2%	0.3	0.3	17.4%	0.1	190.6%
3 West Observation	0.3	0.5	-43.5%	-	0.0%	0.3	0.5	-38.0%	0.0	1920.0%
Emergency Department	-	0.5	-100.0%	0.3	-100.0%	0.3	0.5	-39.5%	0.1	333.3%
5 Central	0.3	0.4	-18.1%	0.2	97.4%	0.2	0.3	-44.5%	0.1	166.0%
Recovery Room	-	0.5	-100.0%	0.8	-100.0%	0.2	0.5	-64.9%	1.7	-89.8%
9 Central	0.4	0.3	48.1%	0.1	398.2%	0.2	0.2	-35.5%	0.1	80.8%
4 Central	-	0.5	-100.0%	0.7	-100.0%	0.1	0.5	-74.6%	0.2	-36.0%
Nursing Orientation	-	-	0.0%	0.5	-100.0%	0.1	-	0.0%	0.3	-63.7%
6 West	-	0.1	-100.0%	-	0.0%	0.1	0.1	24.0%	0.1	-19.8%
Neonatal Intensive Care	-	-	0.0%	-	0.0%	0.0	-	0.0%	0.6	-95.2%
5 West - Pediatrics	-	-	0.0%	-	0.0%	0.0	-	0.0%	-	0.0%
Laboratory - Hematology	-	2.2	-100.0%	-	0.0%	-	2.1	-100.0%	-	0.0%
Cardiopulmonary - Neonatal Intensive Care Uni	-	0.7	-100.0%	-	0.0%	-	0.7	-100.0%	-	0.0%
Care Management	-	-	0.0%	-	0.0%	-	-	0.0%	0.1	-100.0%
Imaging - Cat Scan	-	-	0.0%	1.9	-100.0%	-	-	0.0%	0.9	-100.0%
Imaging - CVI	-	1.1	-100.0%	-	0.0%	-	1.0	-100.0%	-	0.0%
PM&R - Occupational	-	1.1	-100.0%	1.8	-100.0%	-	1.0	-100.0%	1.6	-100.0%
SUBTOTAL	43.0	60.6	-29.2%	58.3	-26.4%	41.7	56.6	-26.3%	49.9	-16.4%
TRANSITION LABOR										
Laboratory - Chemistry	4.6	-	0.0%	4.4	4.6%	4.8	-	0.0%	3.5	36.9%
SUBTOTAL	4.6	-	0.0%	4.4	4.6%	4.8	-	0.0%	3.5	36.9%
GRAND TOTAL	47.5	60.6	-21.6%	62.7	-24.2%	46.6	56.6	-17.7%	53.5	-12.9%



Financial Presentation

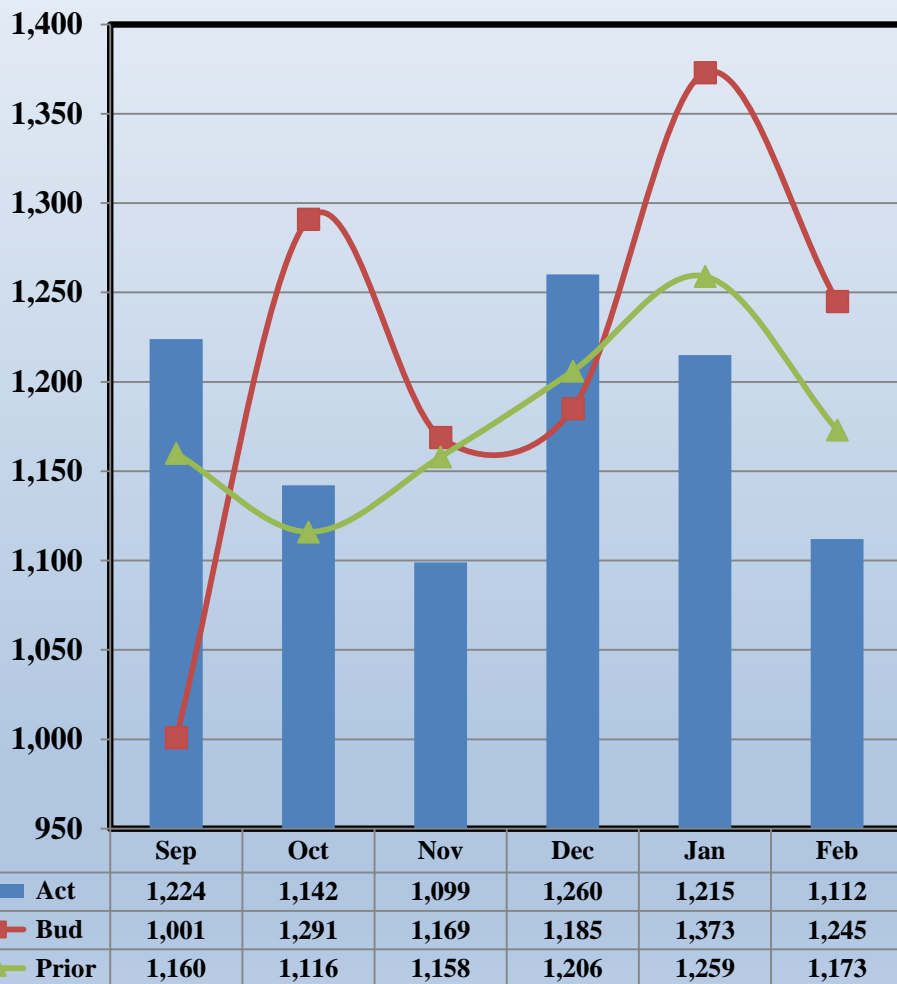
For the Month Ended February 28, 2025

Volume



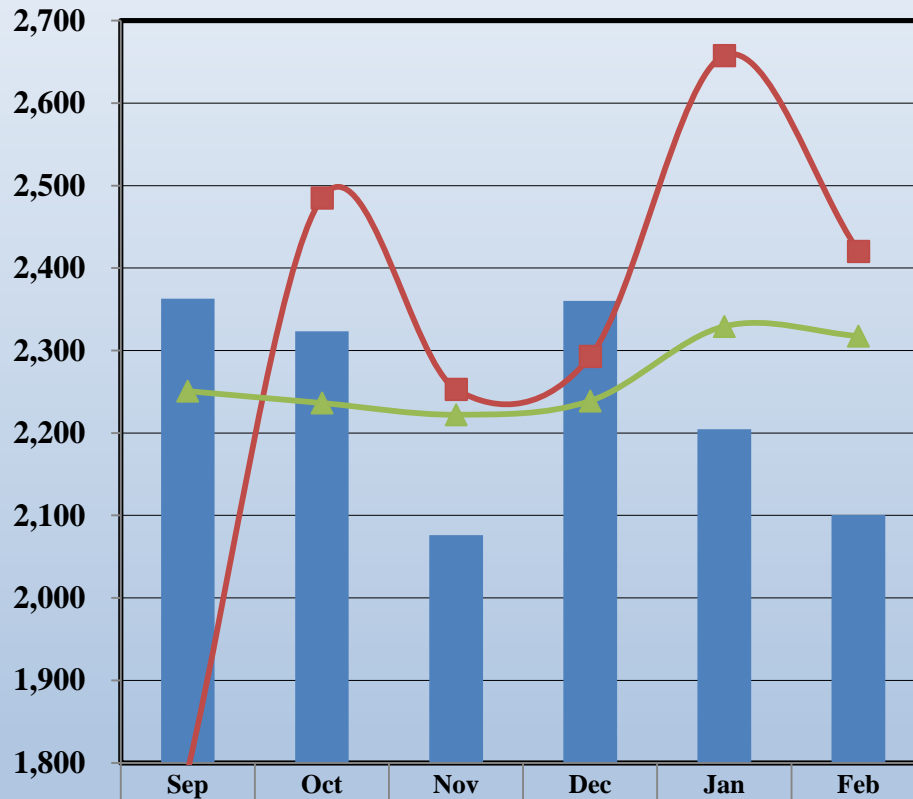
Admissions

Total – Adults and NICU



	Actual	Budget	Prior Year
Month	1,112	1,245	1,173
Var %		-10.7%	-5.2%
Year-To-Date	5,828	6,263	5,912
Var %		-6.9%	-1.4%
Annualized	14,331	13,967	13,562
Var %		2.6%	5.7%

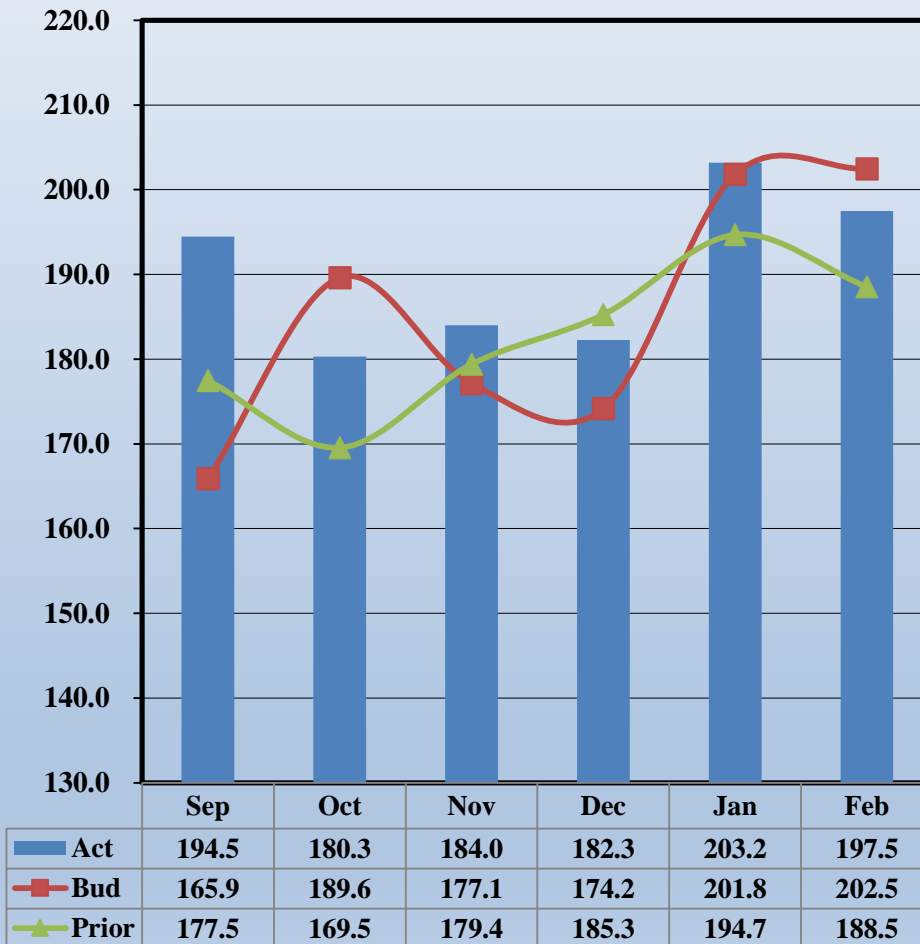
Adjusted Admissions



Act	2,363	2,323	2,076	2,360	2,204	2,101
Bud	1,791	2,485	2,253	2,293	2,658	2,420
Prior	2,251	2,236	2,222	2,239	2,329	2,318

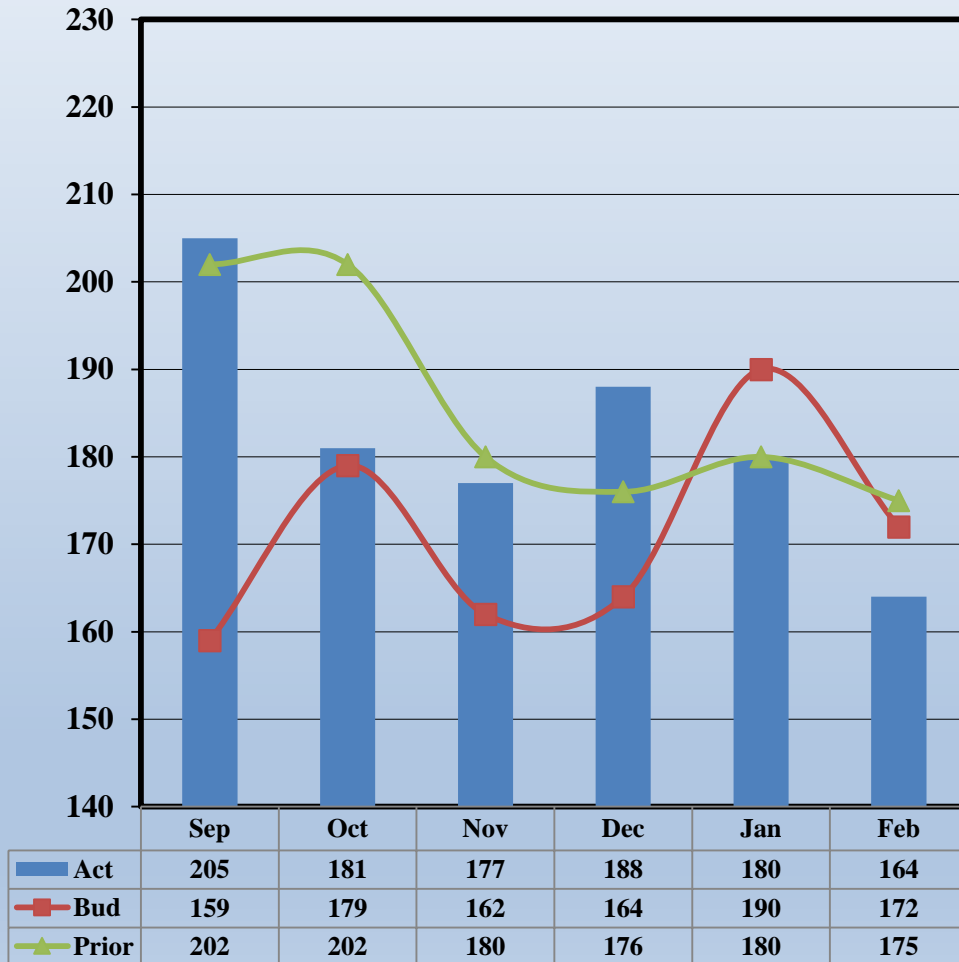
	Actual	Budget	Prior Year
Month	2,101	2,420	2,318
Var %		-13.2%	-9.4%
Year-To-Date	11,061	12,109	11,344
Var %		-8.7%	-2.5%
Annualized	27,320	27,272	26,361
Var %		0.2%	3.6%

Average Daily Census



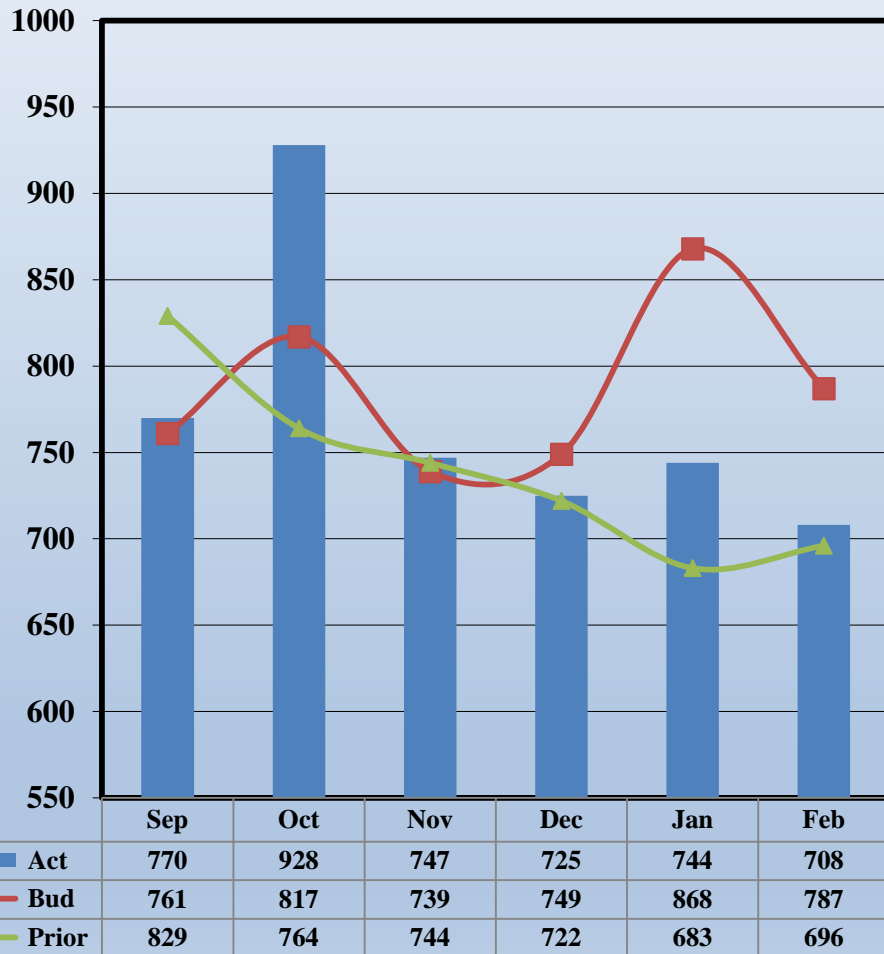
	Actual	Budget	Prior Year
Month	197.5	202.5	188.5
Var %		-2.5%	4.8%
Year-To-Date	189.3	188.8	183.4
Var %		0.3%	3.2%
Annualized	191.0	183.5	176.4
Var %		4.1%	8.3%

Deliveries



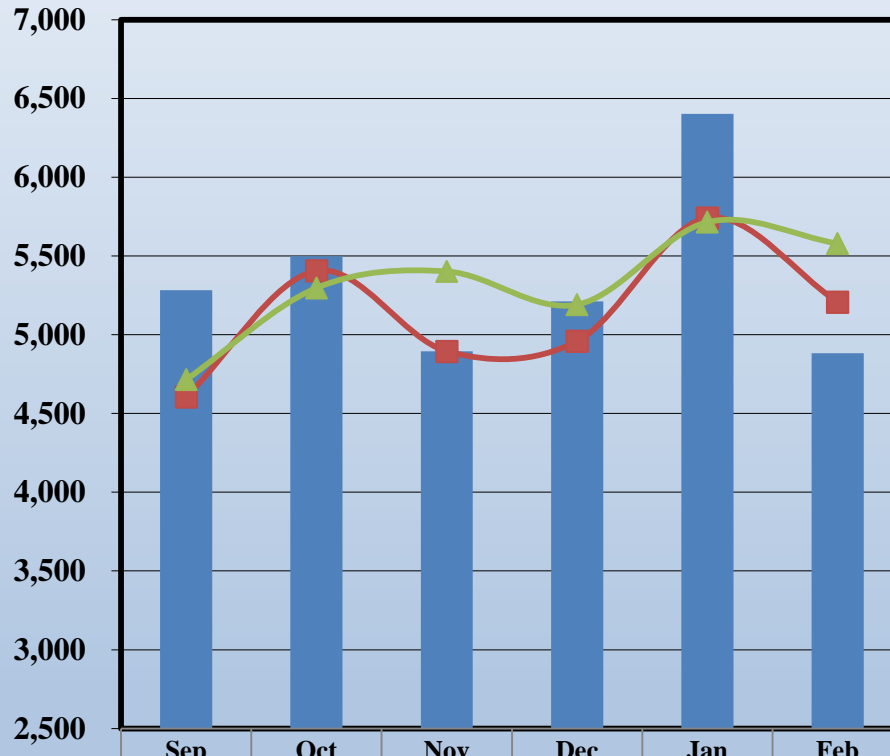
	Actual	Budget	Prior Year
Month	164	172	175
Var %		-4.7%	-6.3%
Year-To-Date	890	867	913
Var %		2.7%	-2.5%
Annualized	2,199	2,106	2,129
Var %		4.4%	3.3%

Total Surgical Cases



	Actual	Budget	Prior Year
Month	708	787	696
Var %		-10.0%	1.7%
Year-To-Date	3,852	3,960	3,609
Var %		-2.7%	6.7%
Annualized	9,513	9,779	9,371
Var %		-2.7%	1.5%

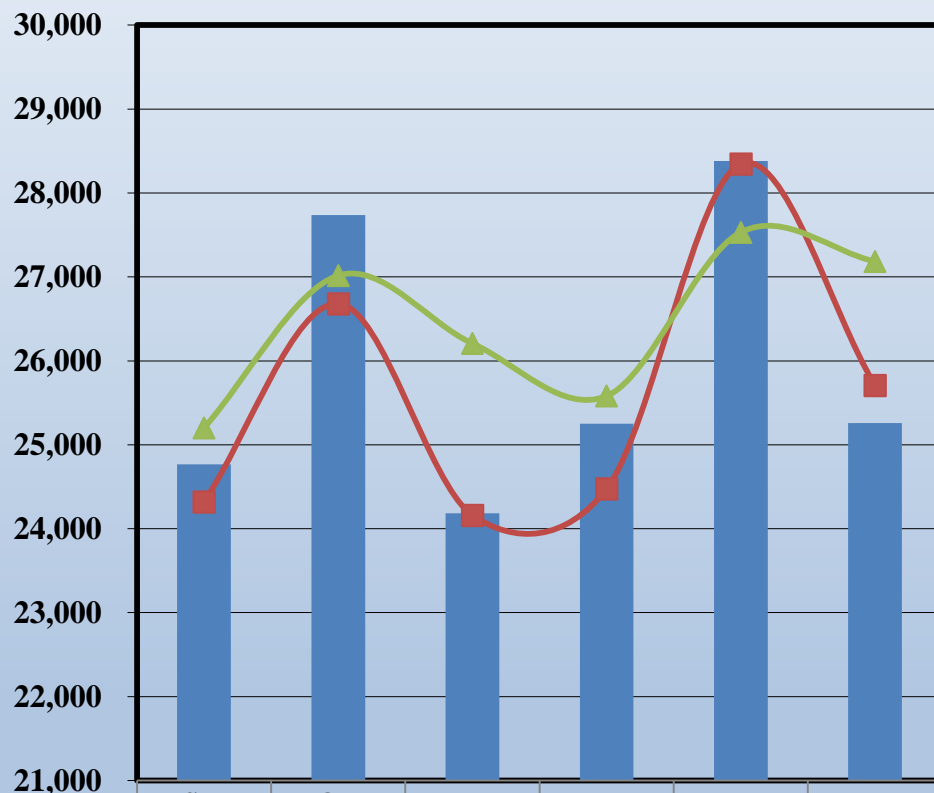
Emergency Room Visits



	Actual	Budget	Prior Year
Month	4,883	5,208	5,579
Var %		-6.2%	-12.5%
Year-To-Date	26,888	26,210	27,184
Var %		2.6%	-1.1%
Annualized	63,190	61,529	61,831
Var %		2.7%	2.2%

	Sep	Oct	Nov	Dec	Jan	Feb
Act	5,283	5,498	4,894	5,211	6,402	4,883
Bud	4,607	5,406	4,895	4,959	5,742	5,208
Prior	4,715	5,297	5,402	5,191	5,715	5,579

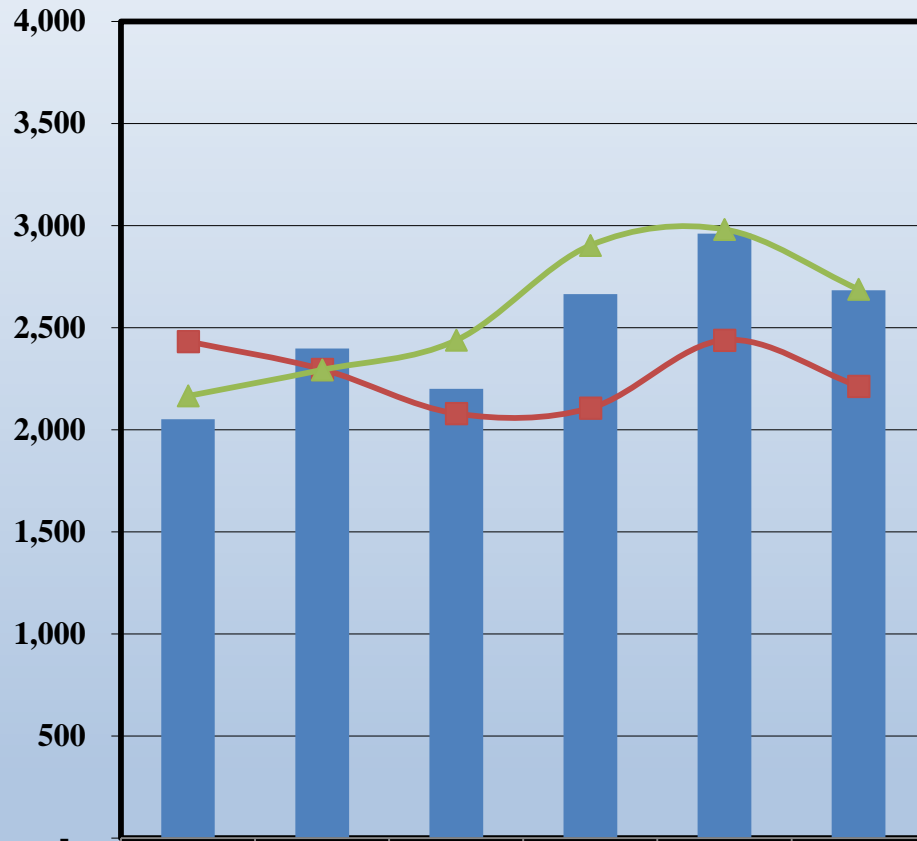
Total Outpatient Occasions of Service



	Actual	Budget	Prior Year
Month	25,257	25,707	27,184
Var %		-1.8%	-7.1%
Year-To-Date	130,807	129,373	133,520
Var %		1.1%	-2.0%
Annualized	305,025	315,933	310,737
Var %		-3.5%	-1.8%

Act	Sep	Oct	Nov	Dec	Jan	Feb
Bud	24,766	27,736	24,182	25,251	28,381	25,257
Prior	24,322	26,682	24,161	24,477	28,346	25,707
	25,201	27,016	26,207	25,581	27,532	27,184

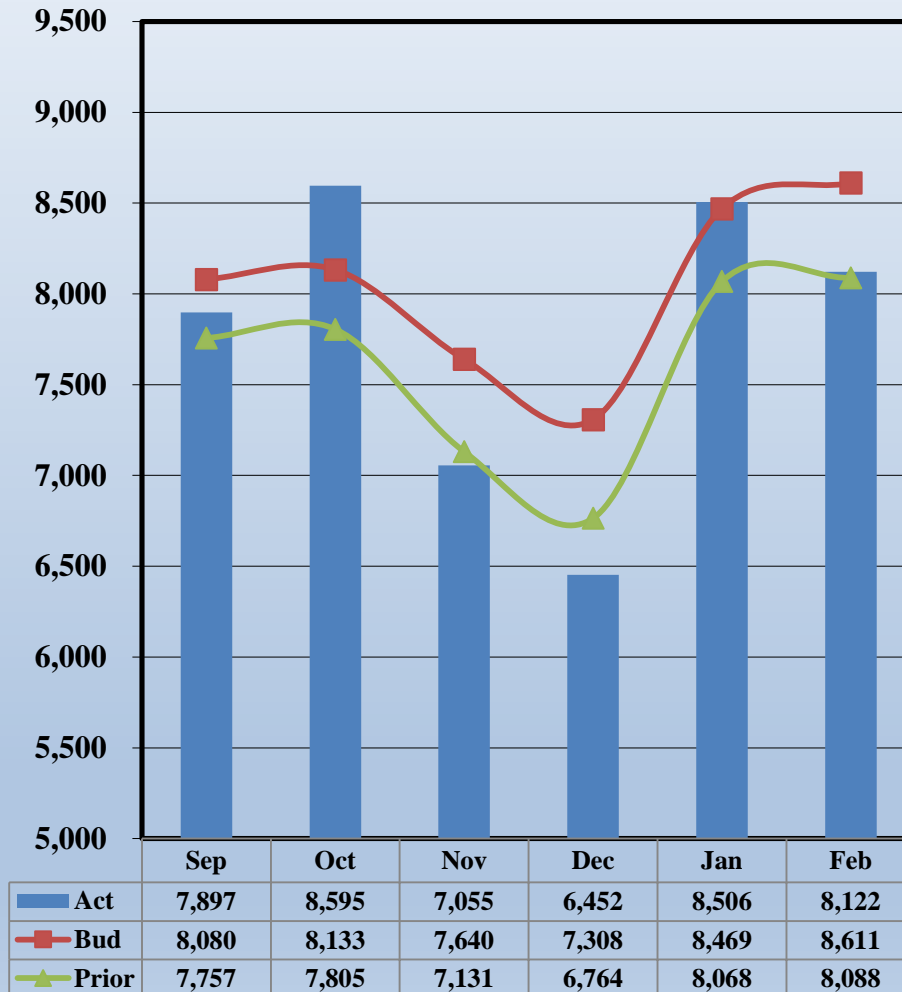
Urgent Care Visits



■ Act	2,051	2,397	2,200	2,664	2,960	2,683
■ Bud	2,432	2,296	2,079	2,106	2,439	2,213
▲ Prior	2,165	2,293	2,438	2,903	2,981	2,687

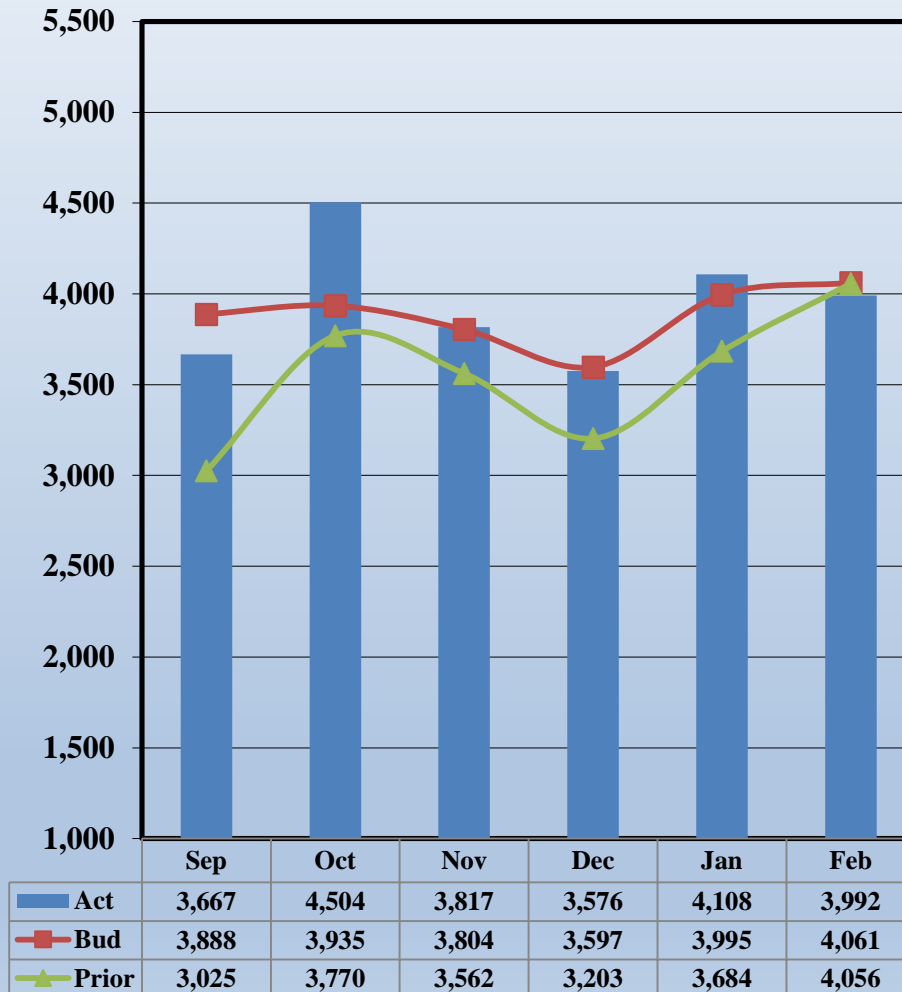
	<u>Actual</u>	<u>Budget</u>	<u>Prior Year</u>
Month	2,683	2,213	2,687
Var %		21.2%	-0.1%
Year-To-Date	12,904	11,133	13,302
Var %		15.9%	-3.0%
Annualized	26,510	29,787	28,115
Var %		-11.0%	-5.7%

Total ProCare Office Visits



	Actual	Budget	Prior Year
Month	8,122	8,611	8,088
Var %		-5.7%	0.4%
Year-To-Date	38,730	40,161	37,856
Var %		-3.6%	2.3%
Annualized	94,833	95,529	102,607
Var %		-0.7%	-7.6%

Total Family Health Clinic Visits



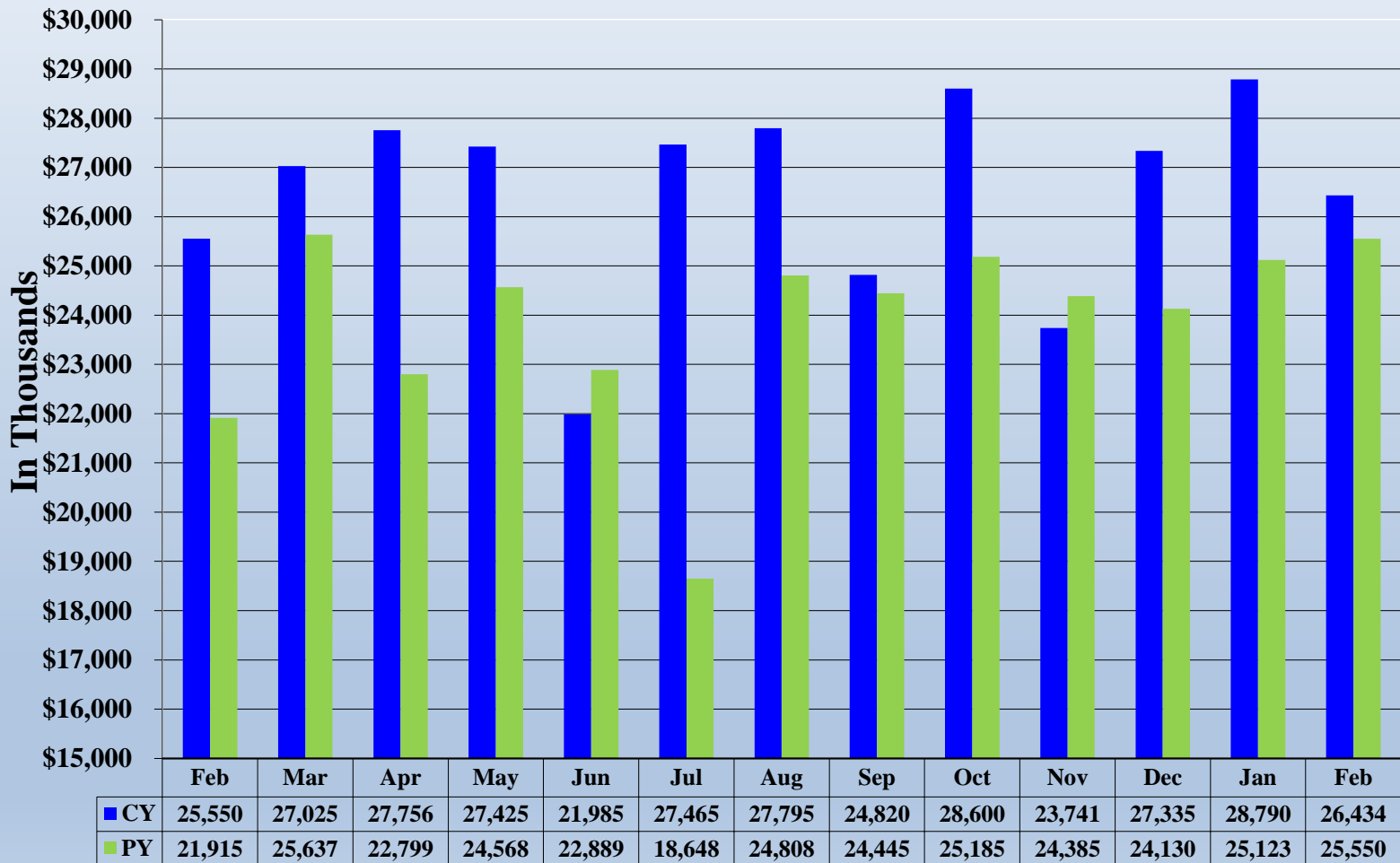
	Actual	Budget	Prior Year
Month	3,992	4,061	4,056
Var %		-1.7%	-1.6%
Year-To-Date	19,997	19,392	18,275
Var %		3.1%	9.4%
Annualized	46,464	48,563	33,315
Var %		-4.3%	39.5%

Accounts Receivable



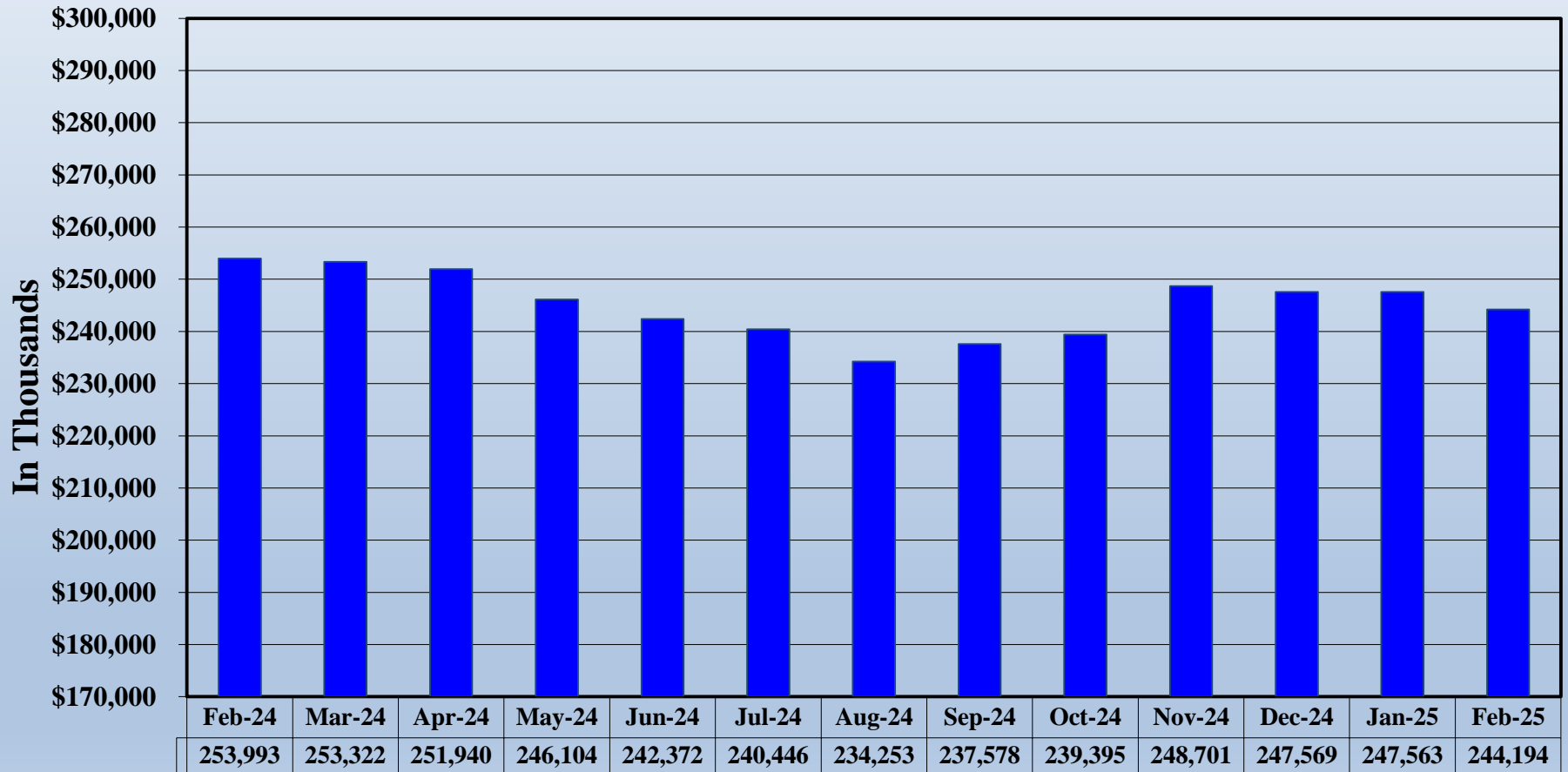
Total AR Cash Receipts

13 Month Trending



Total Accounts Receivable – Gross

Thirteen Month Trending

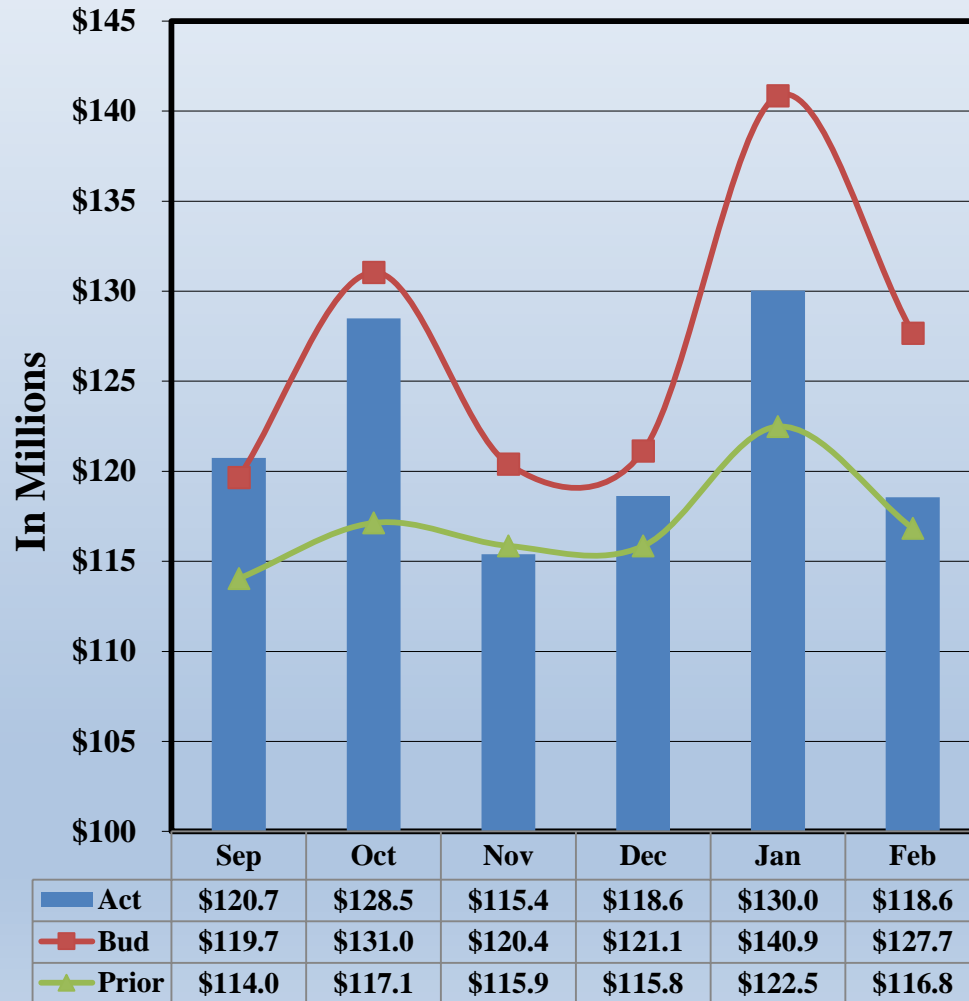


Revenues & Revenue Deductions



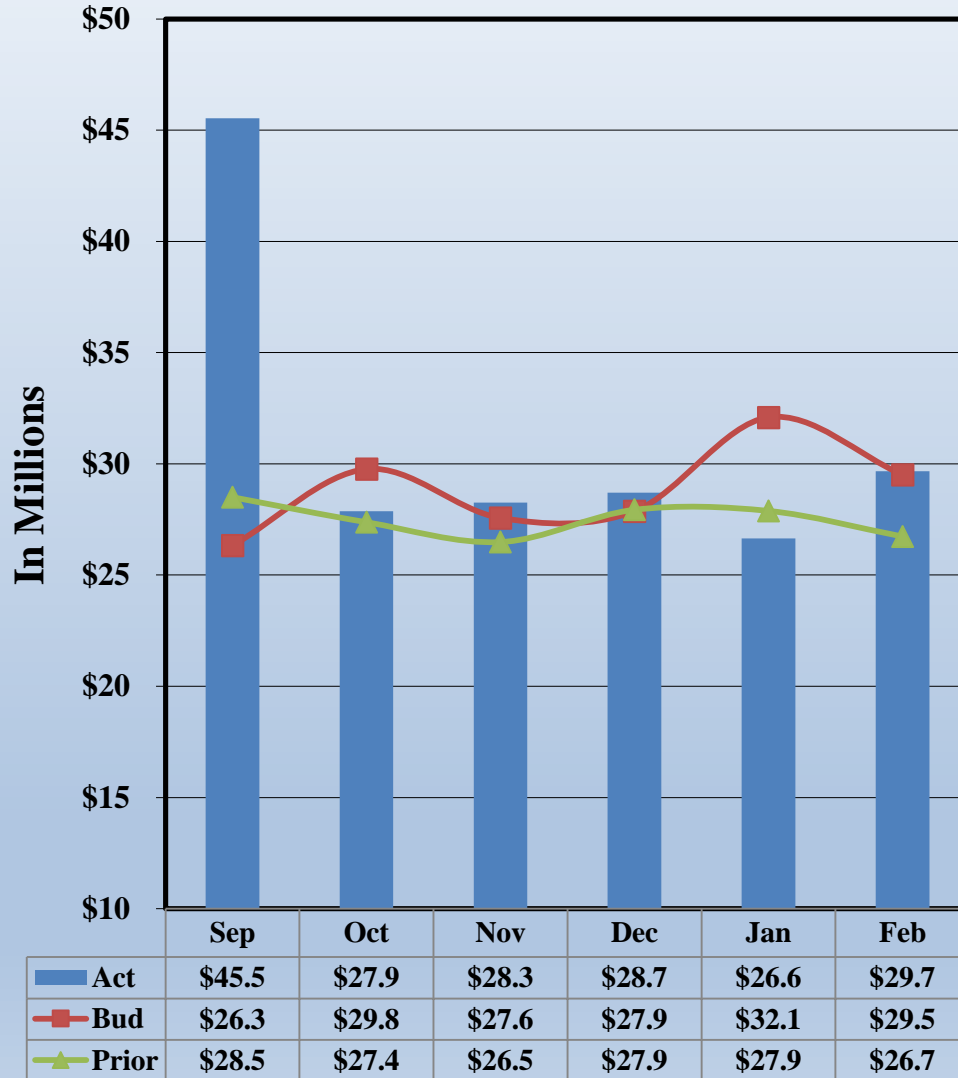
Total Patient Revenues

(Ector County Hospital District)



	<u>Actual</u>		<u>Budget</u>		<u>Prior Year</u>	
Month	\$	118.6	\$	127.7	\$	116.8
Var %				-7.1%		1.5%
Year-To-Date	\$	611.1	\$	641.1	\$	588.1
Var %				-4.7%		3.9%
Annualized	\$	1,474.7	\$	1,461.1	\$	1,389.0
Var %				0.9%		6.2%

Total Net Patient Revenues

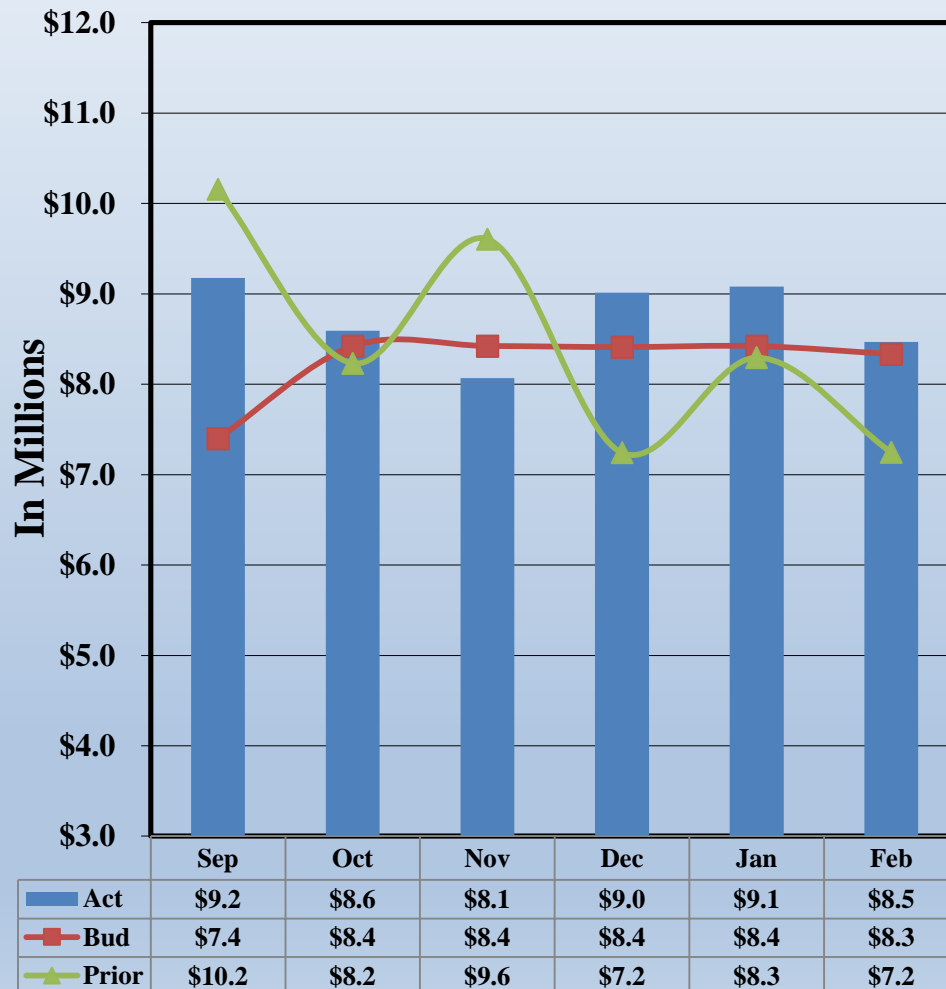


	<u>Actual</u>		<u>Budget</u>		<u>Prior Year</u>	
Month	\$	29.7	\$	29.5	\$	26.7
Var %				0.5%		11.0%
Year-To-Date	\$	141.2	\$	146.8	\$	136.4
Var %				-3.8%		3.5%
Annualized	\$	355.9	\$	342.8	\$	331.1
Var %				3.8%		7.5%

Other Revenue

(Ector County Hospital District)

Including Tax Receipts, Interest & Other Operating Income



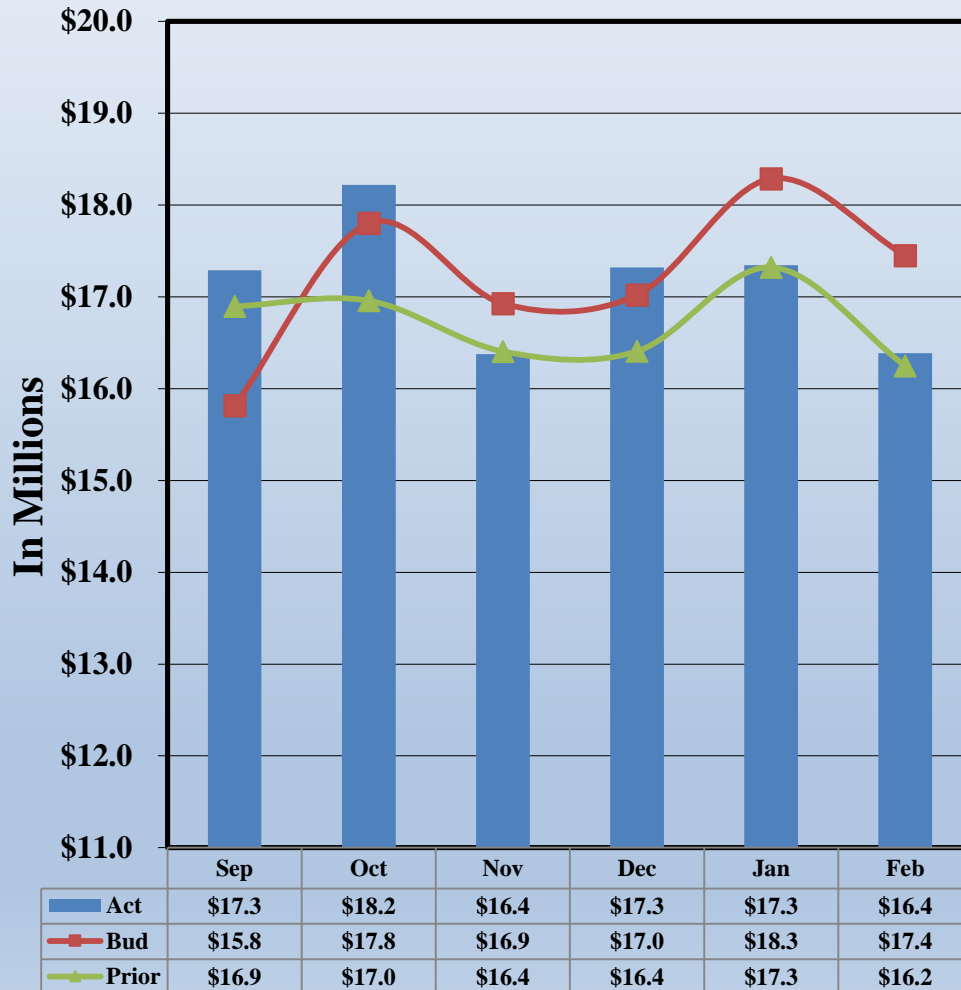
	<u>Actual</u>		<u>Budget</u>		<u>Prior Year</u>	
Month	\$	8.5	\$	8.3	\$	7.2
Var %				1.6%		16.9%
Year-To-Date	\$	43.2	\$	42.0	\$	40.6
Var %				2.9%		6.4%
Annualized	\$	102.3	\$	95.6	\$	98.5
Var %				7.0%		3.8%

Operating Expenses



Salaries, Wages & Contract Labor

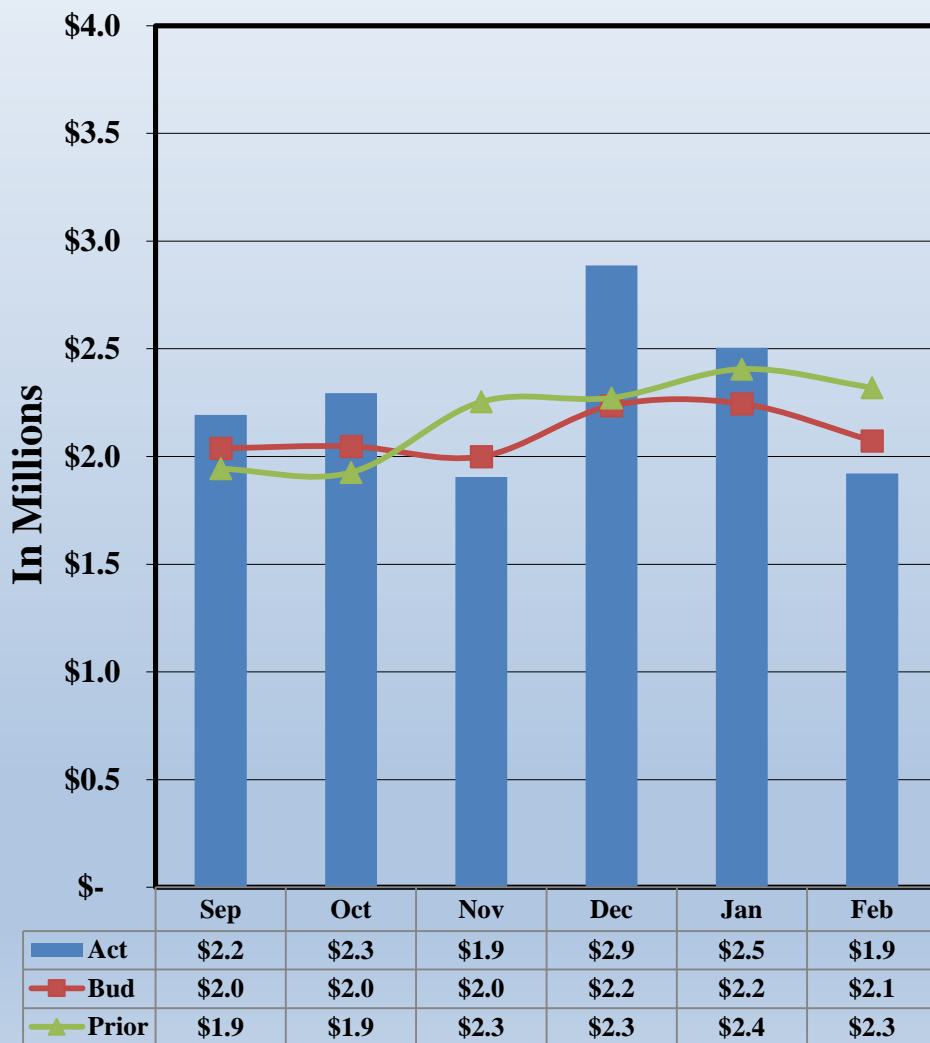
(Ector County Hospital District)



	<u>Actual</u>		<u>Budget</u>		<u>Prior Year</u>	
Month	\$	16.4	\$	17.4	\$	16.2
Var %				-5.7%		1.2%
Year-To-Date	\$	85.6	\$	87.5	\$	83.3
Var %				-2.2%		2.8%
Annualized	\$	208.2	\$	203.1	\$	198.0
Var %				2.5%		5.2%

Employee Benefit Expense

(Ector County Hospital District)



	<u>Actual</u>		<u>Budget</u>		<u>Prior Year</u>	
Month	\$	1.9	\$	2.1	\$	2.3
Var %				-7.3%		-17.2%
Year-To-Date	\$	11.5	\$	10.6	\$	11.2
Var %				8.6%		3.0%
Annualized	\$	23.9	\$	25.4	\$	27.8
Var %				-5.7%		-13.9%

Supply Expense

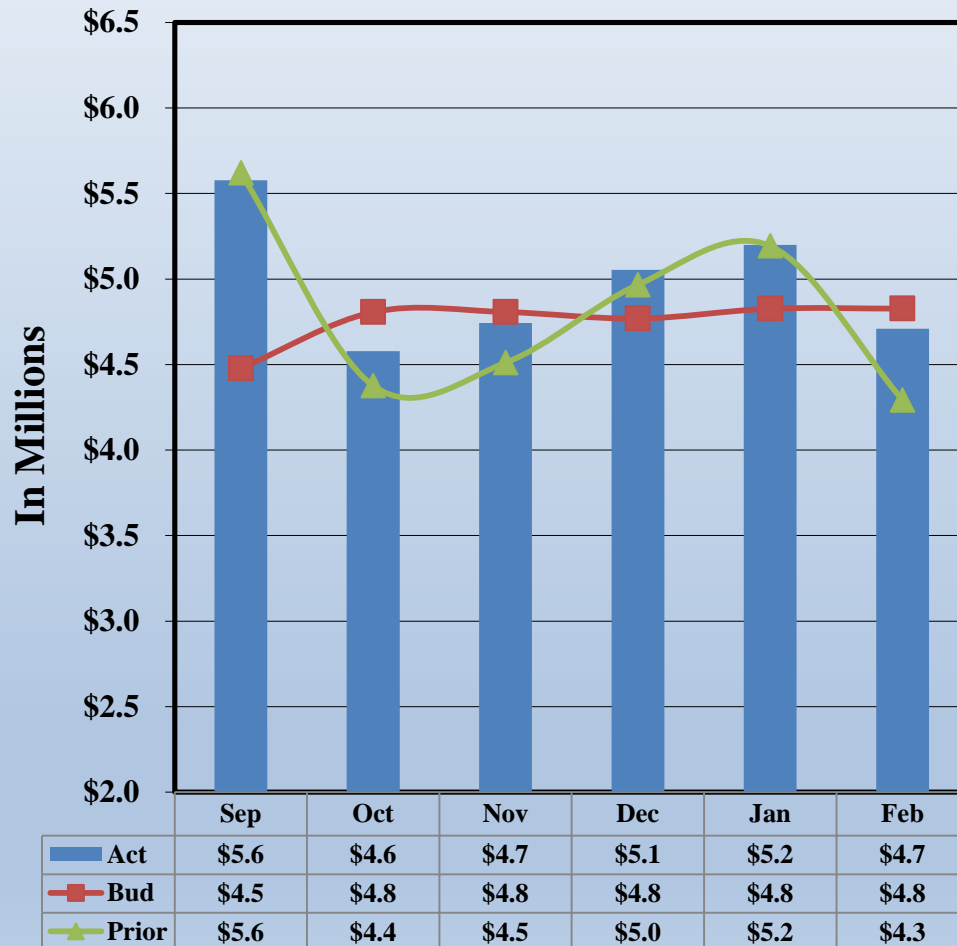
(Ector County Hospital District)



	<u>Actual</u>		<u>Budget</u>		<u>Prior Year</u>	
Month	\$	6.2	\$	6.9	\$	6.0
Var %				-10.1%		2.8%
Year-To-Date	\$	35.3	\$	34.7	\$	32.6
Var %				1.6%		8.2%
Annualized	\$	81.3	\$	78.1	\$	74.3
Var %				4.1%		9.4%

Purchased Services

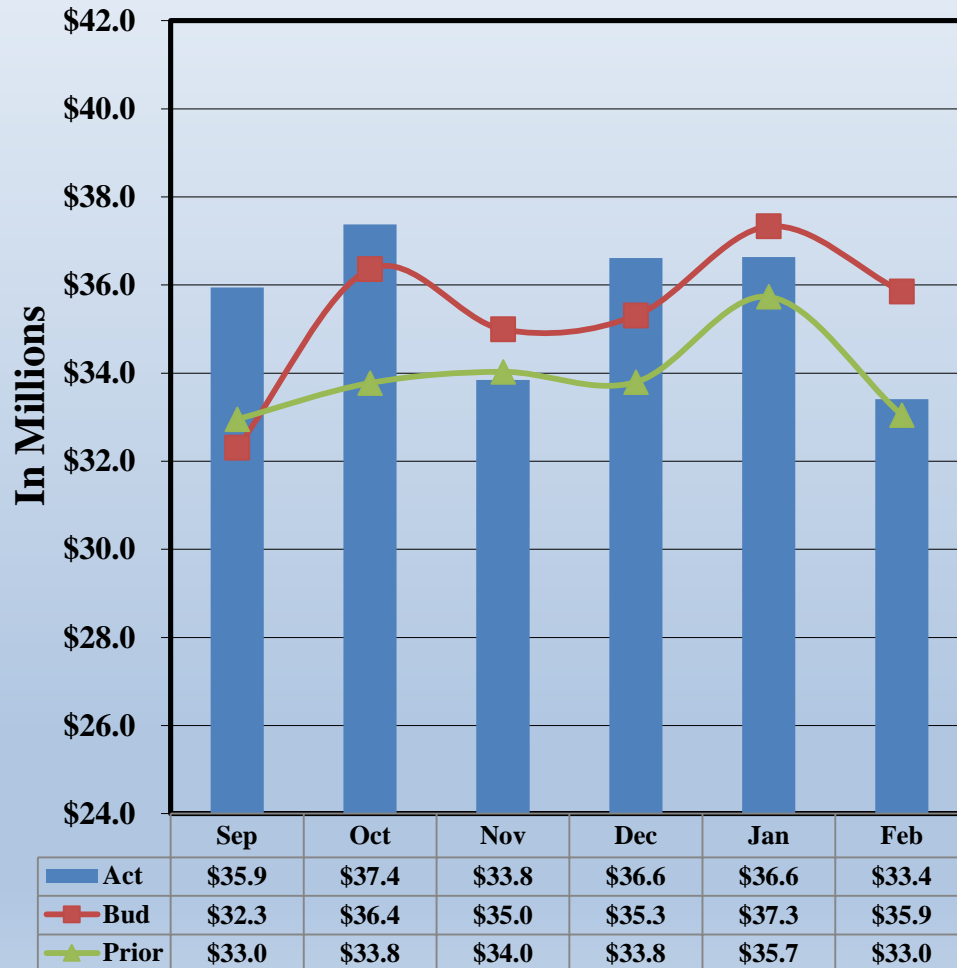
(Ector County Hospital District)



	<u>Actual</u>		<u>Budget</u>		<u>Prior Year</u>	
Month	\$	4.7	\$	4.8	\$	4.3
Var %				-2.4%		9.7%
Year-To-Date	\$	24.3	\$	24.0	\$	23.3
Var %				1.0%		4.0%
Annualized	\$	57.7	\$	55.7	\$	55.1
Var %				4.2%		5.3%

Total Operating Expense

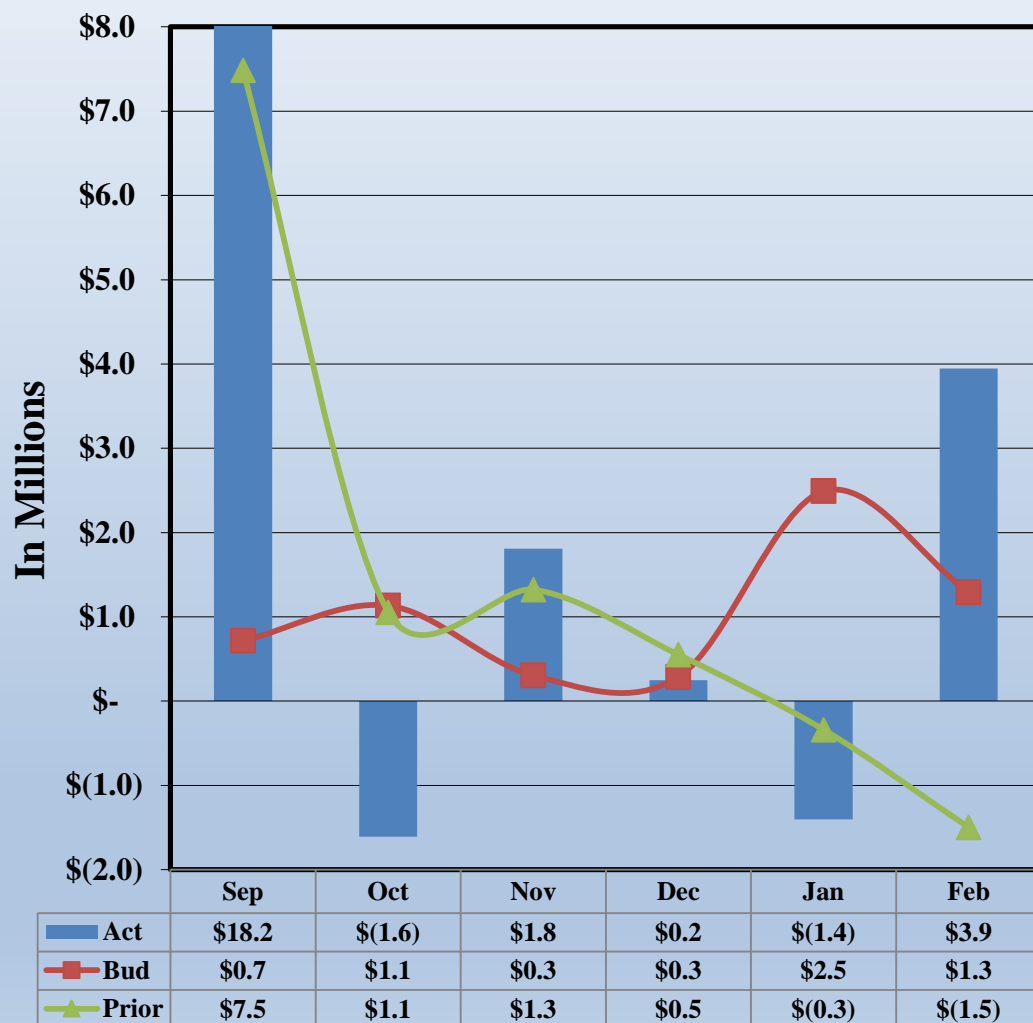
(Ector County Hospital District)



	<u>Actual</u>		<u>Budget</u>		<u>Prior Year</u>	
Month	\$	33.4	\$	35.9	\$	33.0
Var %				-6.8%		1.1%
Year-To-Date	\$	177.9	\$	179.8	\$	170.4
Var %				-1.1%		4.4%
Annualized	\$	416.6	\$	414.1	\$	402.9
Var %				0.6%		3.4%

Adjusted Operating EBIDA

Ector County Hospital District Operations

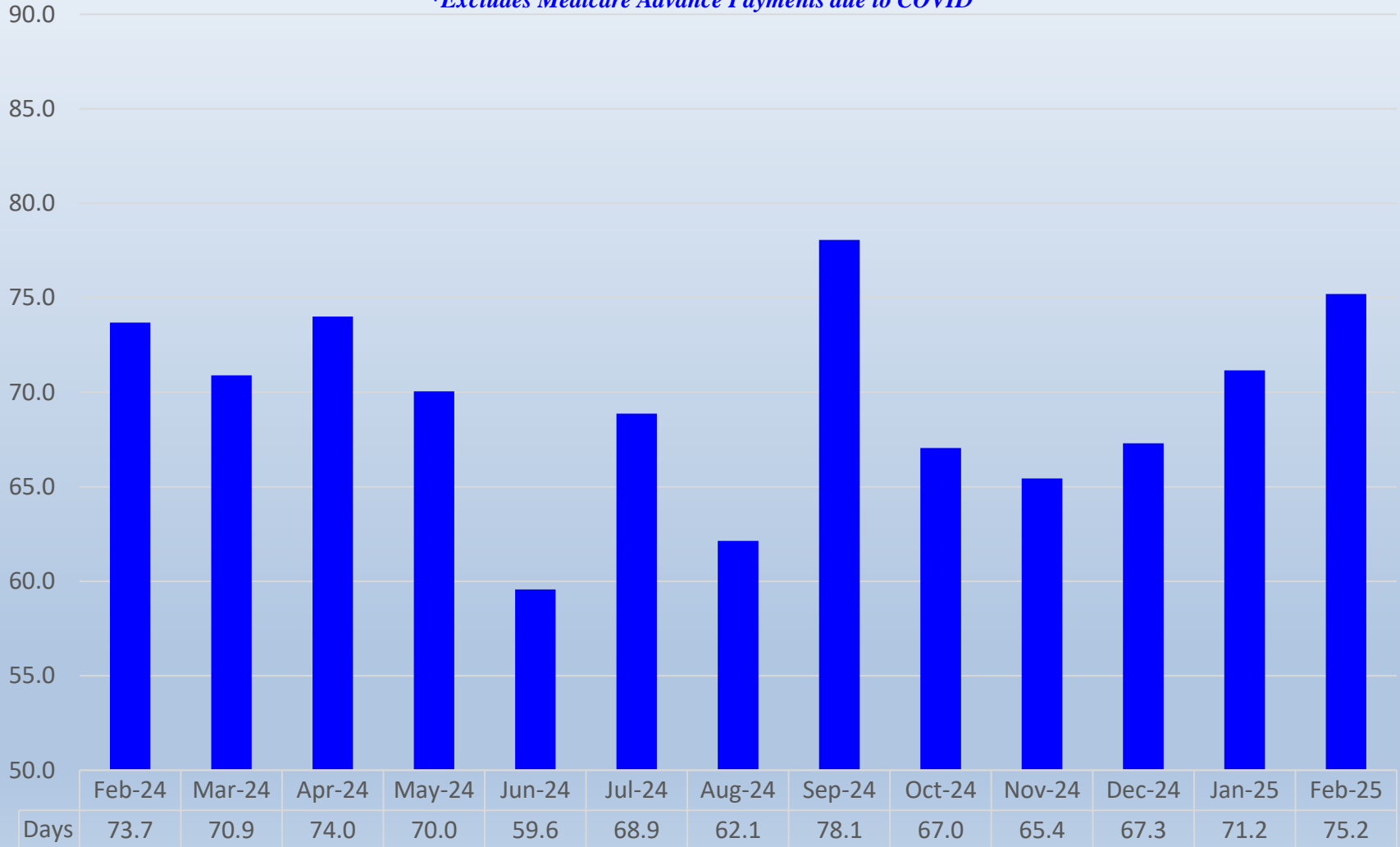


	Actual		Budget		Prior Year	
Month	\$	3.9	\$	1.3	\$	(1.5)
Var %				200.0%		-360.0%
Year-To-Date	\$	3.0	\$	5.5	\$	1.1
Var %				-45.5%		172.7%
Annualized	\$	24.1	\$	14.6	\$	20.8
Var %				65.1%		15.9%

Days Cash on Hand

Thirteen Month Trending

**Excludes Medicare Advance Payments due to COVID*





COVID-19 FEMA Claim Status

Proj #	Project Description	Begin Date	End Date	Submitted	Received
550812	COVID Emergency Equipment Purchases	7/14/2020	11/24/2021	1,707,306	949,967
663337	Contract Labor Through 9/25/2021	6/27/2021	9/25/2021	2,879,487	-
663722	Contract Labor 9/26/2021 to 11/27/2021	9/26/2021	11/27/2021	4,661,822	-
701207	Contract Labor 2/6/2022 to 3/26/2022	2/6/2022	3/26/2022	4,188,332	-
691742	Contract Labor 11/21/2021 to 2/5/2022	11/21/2021	2/5/2022	4,680,691	-
Total				18,117,638	949,967

Notes:

- Awaiting results of disputed RAND Review with corrected calculations
- Equipment amount received includes \$872K for ventilators, vaccine freezers, and air handler rentals. Claim amount reduced for FMV of ventilators at conclusion of PHE on May 11, 2023.
- Original RAND Review recommended reduction of \$14M to result in payment of \$4.1M based on duplication of benefits using pre-COVID expenses as a percent of net revenue.

MEMORANDUM

TO: ECHD Board of Directors

FROM: Joe Montes, Director of Housekeeping
Through Matt Collins, Chief Operating Officer

SUBJECT: Regulated Medical Waste Disposal Contract

DATE: January 29, 2025

Cost:

Cost-per-Reportable contract (annual)

2025	~\$314,494.67
2026	~\$314,494.67
2027	~\$314,494.67

Contract Total (Estimate for 36 months)	\$943,484.00
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Background:

This MedSharps contract renewal for 36 months, will provide Medical Center Health System with transport, manifestation, and disposal of Regulated Medical Waste, Pharmaceutical Waste, Pathological Waste, Trace Chemo Waste, Battery Waste, and Reusable Sharps Container Program.

(pricing will increase 3% from previous contract pricing)

Staffing:

No additional FTE's required.

Disposition of Existing Equipment:

NA

Implementation Time Frame:

Operations currently ongoing

Funding: budgeted operational expense

MEMORANDUM

TO: ECHD Board of Directors

FROM: Linda Carpenter, Chief Information Officer

SUBJECT: UPS 3W Replacement

DATE: April 1, 2025

Cost:

Dell UPS Replacement	\$53,401.34
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Budget Reference:

Contingency Funds	\$53,401.34
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Background:

An Uninterruptible Power Supply (UPS), is a power supply unit that is crucial for ensuring patient safety and continuous operations by providing backup power during outages or fluctuations, safeguarding critical medical equipment and data.

Objective:

The UPS in server room on 3W, was irreparably damaged due to a water leak that occurred directly above and into the unit.

The objective is to replace the UPS so that systems have a secondary power source to protect servers and networking equipment from power disturbances and outages.

Staffing:

No additional FTE's required.

Implementation Time Frame:

30 days

Funding:

UPS replacement from Dell will come from contingency funds.

Audit Presentation

Ector County Hospital District
d/b/a Medical Center Health System
September 30, 2024

Sharing Our Results

Forvis Mazars' audit opinion is based on the evidence gathered.

Professional standards drive the content of our opinion & the required communication about any deficiencies & other items we may identify during the audit.

Forvis Mazars Responsibility & Opinion

UNMATCHED CLIENT
EXPERIENCE

▪ Auditor's Responsibility

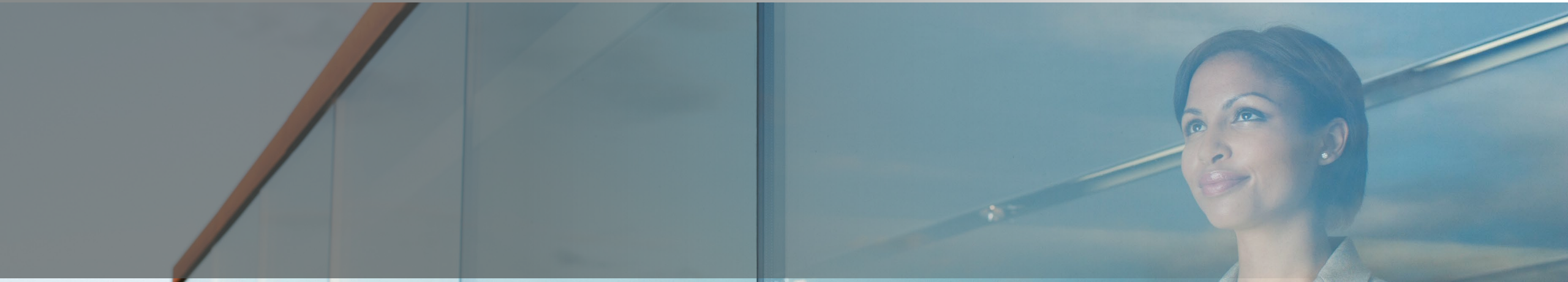
- Draft report is presented for board consideration
- We are prepared to issue an unmodified, or clean opinion

▪ Qualitative Components of the Audit

- Significant accounting policies were reviewed and compared to industry practice
- Accounting treatments were reviewed for variations from GAAP
- Financial statement disclosures were reviewed for completeness and accuracy
- Methodologies for developing accounting estimates were challenged and recorded estimates were reviewed for reasonableness and evidence of management bias

▪ There were no

- Difficulties encountered by our team when conducting the audit
- Disagreements with management
- Contentious accounting issues
- Consultations with other accountants



Significant Judgements & Accounting Estimates

- Allowances for contractual adjustments and uncollectible accounts
- Estimates for third party payer settlements
- Supplemental Medicaid funding revenue and related settlements



Financial Disclosures

- Patient service revenue recognition
- Medicaid supplemental funding programs
- Defined benefit pension plan
- OPEB

■ **Proposed Audit Adjustments Recorded**

- ✓ Summarized on next slide
 - PBBHC equity method investment (\$13.7M – increase assets and non-operating revenue)
 - GASB 87 adjustment

■ **Proposed Audit Adjustments Not Recorded**

- Prior year impact of additional Permian Basin Behavioral Health Center contribution revenue identified in the current year (\$1.6M increase in FY24 Net Position)

Financial Statement Adjustments

Increase in net position, per start of audit	\$ 22,015,845
<u>Audit Entries with Net Position Impact</u>	
PBBHC equity method investment	13,758,205
GASB 87 adjustment	226,133
Impact of audit entries	<u>13,984,338</u>
<u>Client provided entries ("PBC")</u>	
True up pharmacy inventory	286,130
Misc. AP accruals	(86,750)
True up to actuary report - OPEB	(910,360)
True up to actuary report - WC/GL/PL	1,322,068
UC DY10 recoupment	(191,677)
To reflect the 9/30/24 cost report settlement	<u>(631,694)</u>
Impact of PBC entries	<u>(212,283)</u>
Impact of adjustments recorded during the audit	13,772,055
Increase in net position, per audit report	<u><u>\$ 35,787,900</u></u>

Industry Comparison (000's omitted)

	Total Assets	Total Debt	NPSR + Supplemental	Tax Revenue
Ector County	\$410,000	\$30,000	\$359,000	\$77,000
Parkland (Dallas)	\$3,963,000	\$546,000	\$2,074,000	\$816,000
Harris Health (Houston)	\$2,922,000	\$283,000	\$1,446,000	\$874,000
JPS (Tarrant)	\$2,947,000	\$460,000	\$1,149,000	\$539,000
UHS – San Antonio	\$5,058,000	\$1,413,000	\$1,614,000	\$620,000
UMC - Lubbock	\$1,266,000	\$0	\$862,000	\$33,000
El Paso County	\$708,000	\$356,000	\$663,000	\$148,000
Midland County	\$620,000	\$231,000	\$353,000	\$81,000

Balance Sheets Assets and Deferred Outflows of Resources (In Thousands)

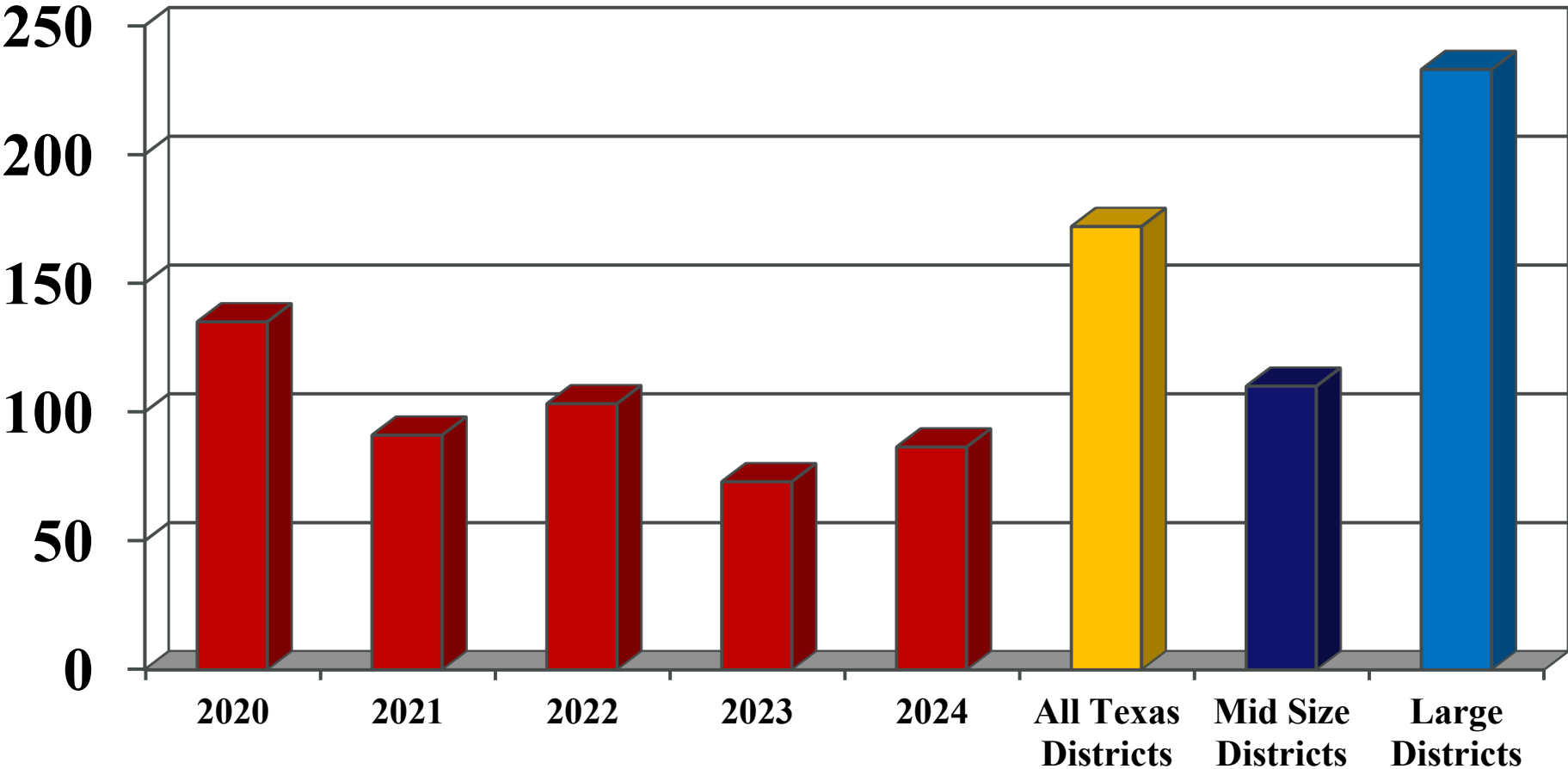
	2020	2021	2022	2023	2024
Current Assets					
Cash and cash equivalents	\$ 83,916	\$ 51,191	\$ 32,038	\$ 16,572	\$ 39,085
Patient accounts receivable, net	31,231	35,747	29,613	37,854	43,395
Taxes receivable	6,690	8,122	11,105	13,086	11,081
Other current assets	<u>18,188</u>	<u>26,406</u>	<u>20,398</u>	<u>24,466</u>	<u>23,088</u>
Total current assets	<u>140,025</u>	<u>121,466</u>	<u>93,154</u>	<u>91,978</u>	<u>116,649</u>
Noncurrent Cash and Investments	46,513	70,105	74,084	62,493	57,935
Capital Assets, Net	176,633	170,330	162,434	157,769	162,088
Lease Assets, Net	-	-	2,188	690	560
Subscriptions Assets, Net	-	-	3,319	5,678	5,661
Net Pension Asset	-	-	29,997	-	-
Other Assets	3,495	5,140	4,955	43,422	56,300
Deferred Outflows of Resources	<u>6,439</u>	<u>29,138</u>	<u>19,348</u>	<u>19,214</u>	<u>10,796</u>
Total assets and deferred outflows of resources	<u>\$ 373,105</u>	<u>\$ 396,179</u>	<u>\$ 389,479</u>	<u>\$ 381,244</u>	<u>\$ 409,989</u>

Balance Sheets Liabilities, Deferred Inflows of Resources and Net Position (In Thousands)

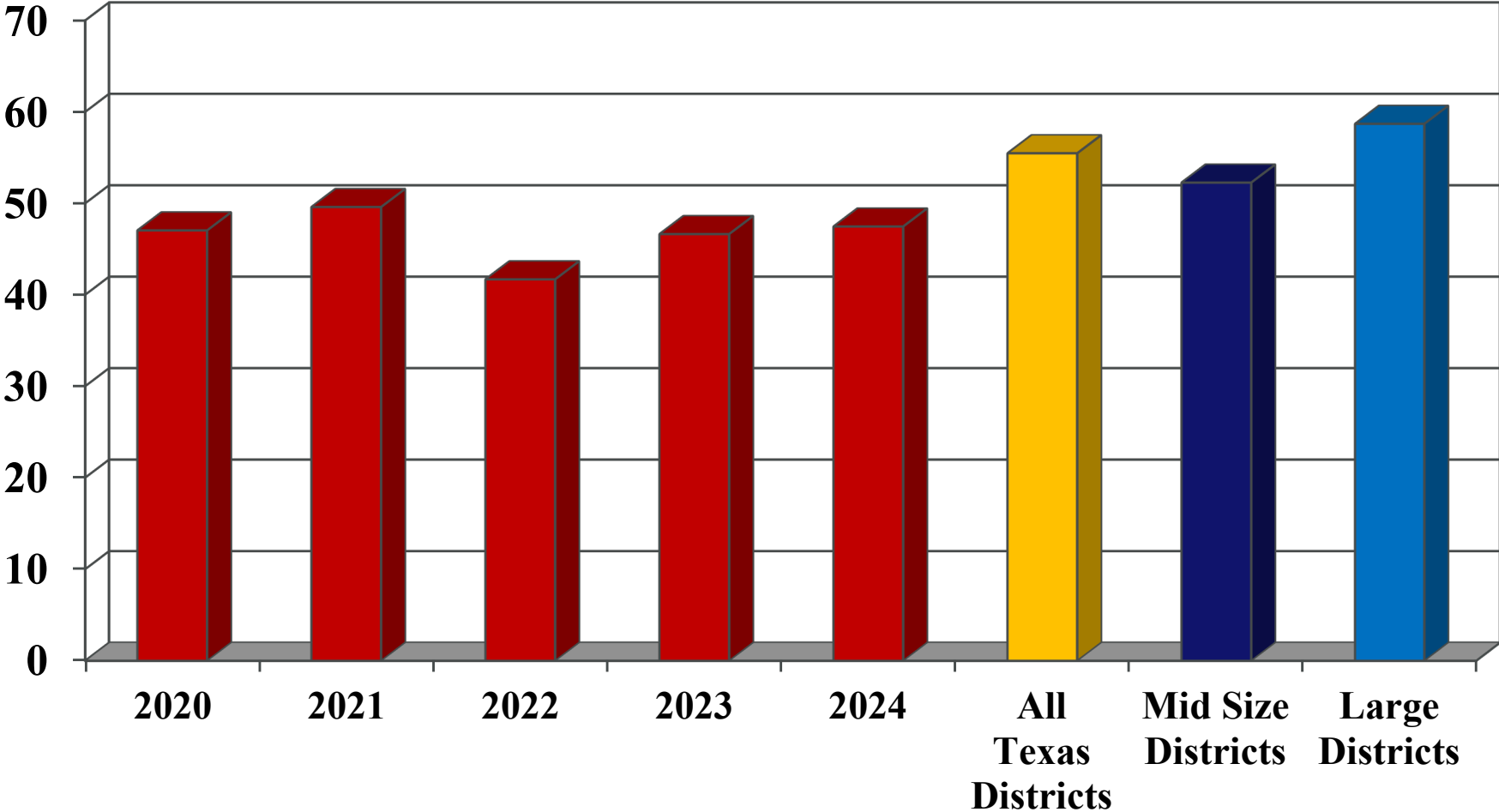
	2020	2021	2022	2023	2024
Liabilities					
PRF received in advance	\$ 23,041	\$ -	\$ -	\$ -	\$ -
Medicare advance payments	31,971	31,541	16,200	-	-
Other current liabilities	46,968	36,214	54,211	54,290	64,678
Long-term debt	40,603	39,915	34,999	32,643	36,355
Net pension liability	22,684	44,515	-	44,111	22,207
OPEB liability	23,213	20,950	12,633	9,916	9,381
Other liabilities	<u>2,194</u>	<u>1,793</u>	<u>6,415</u>	<u>7,065</u>	<u>8,772</u>
	<u>190,674</u>	<u>174,928</u>	<u>124,458</u>	<u>148,025</u>	<u>141,393</u>
Deferred Inflows of Resources	11,332	19,386	71,694	7,619	7,209
Net Position	<u>171,099</u>	<u>201,865</u>	<u>193,327</u>	<u>225,600</u>	<u>261,387</u>
Total liabilities and deferred inflows of resources	<u>\$ 373,105</u>	<u>\$ 396,179</u>	<u>\$ 389,479</u>	<u>\$ 381,244</u>	<u>\$ 409,989</u>

Days Cash on Hand

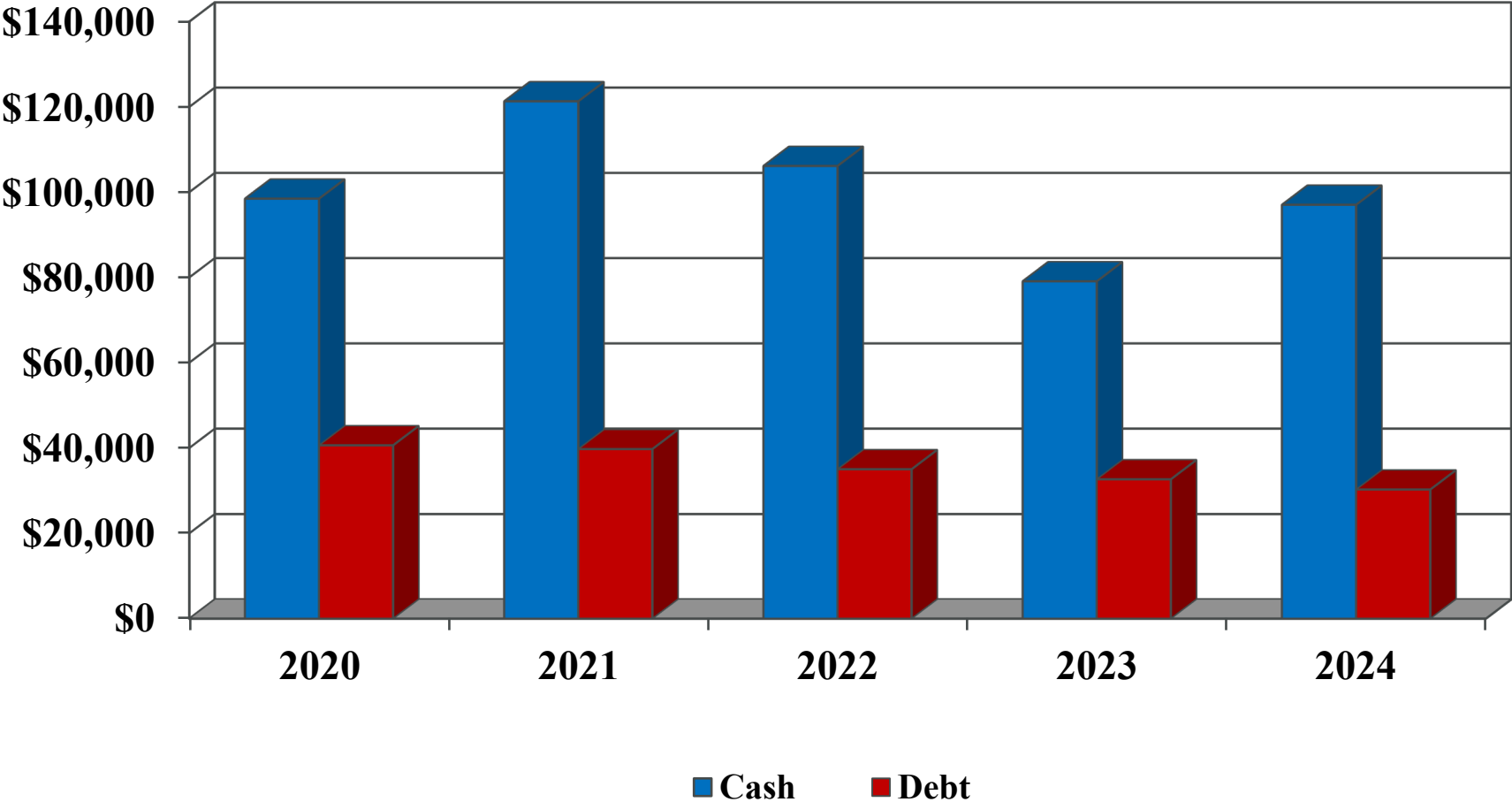
2020 excludes Medicare Advance Medicare Payments of \$32M that were received in September 2020 and are unexpended at year end. If these were included, days cash on hand would increase to 135.



Days in Accounts Receivable



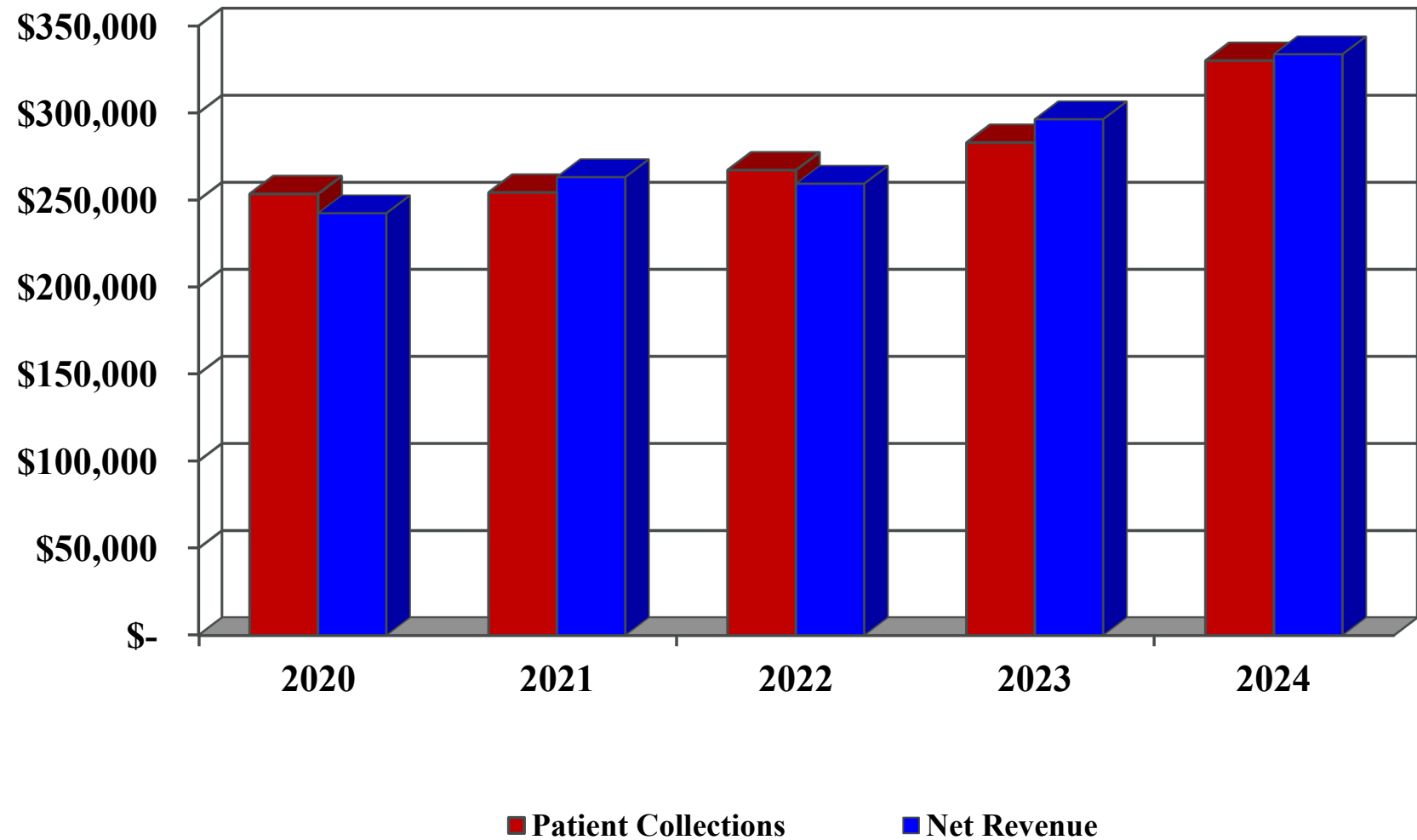
Cash to Long-Term Debt



Statement of Revenues, Expenses and Changes in Net Position (In Thousands)

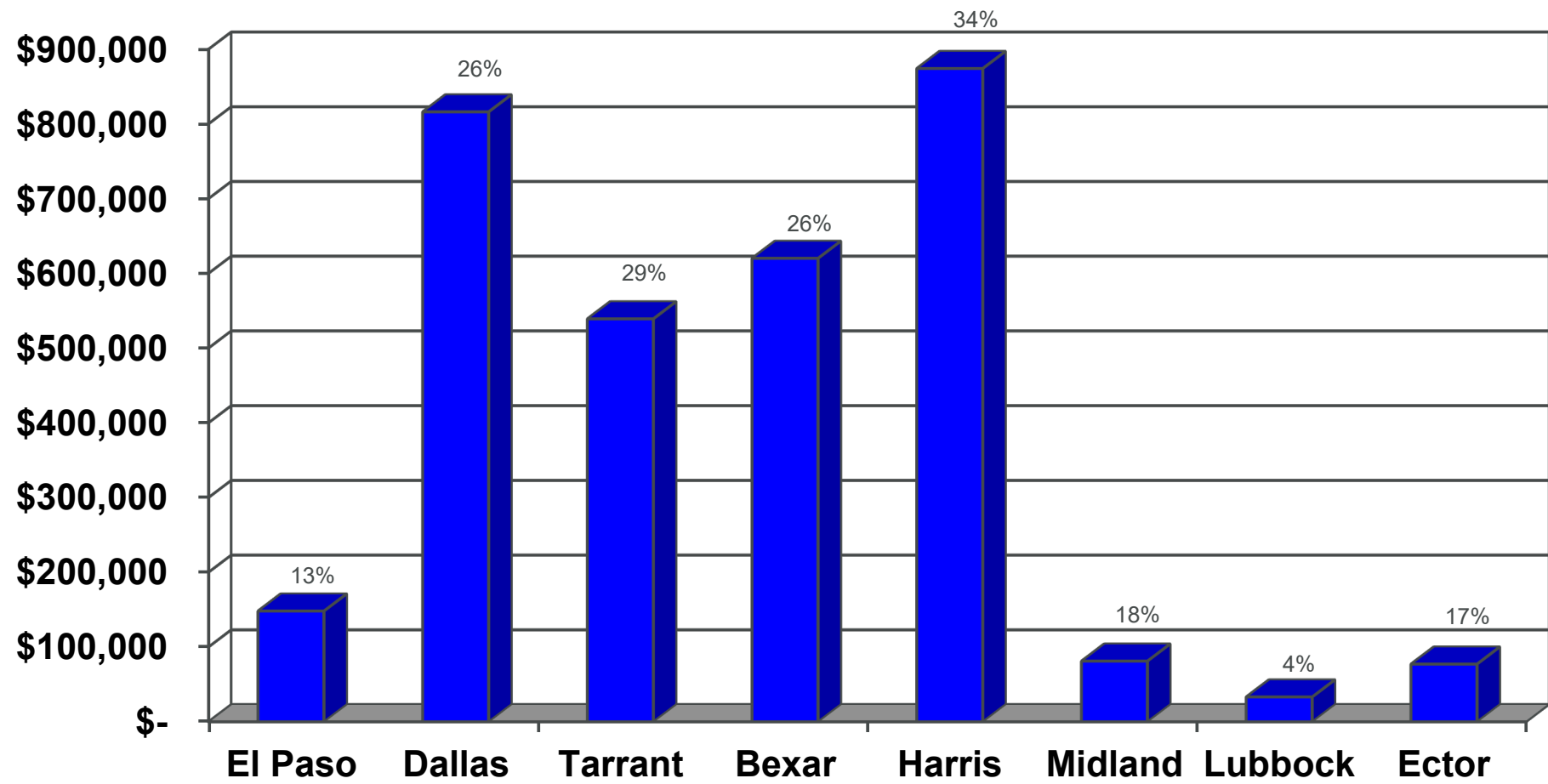
	2020	2021	2022	2023	2024
Net Patient Service Revenue	\$ 242,373	\$ 263,116	\$ 259,341	\$ 296,335	\$ 333,716
Supplemental Medicaid Funding	41,179	42,318	36,496	26,998	24,825
Other Revenue	10,040	11,045	11,966	11,977	12,265
	<u>293,592</u>	<u>316,479</u>	<u>307,803</u>	<u>335,310</u>	<u>370,806</u>
Expenses					
Salaries and employee benefits	182,308	187,358	173,536	209,378	203,727
Purchased services and pro fees	95,975	90,029	115,631	96,680	105,137
Supplies/other	71,562	79,847	85,769	87,166	98,554
IGT Expense	-	-	-	-	-
Depreciation and amortization	18,541	19,309	19,967	23,749	24,014
	<u>368,386</u>	<u>376,543</u>	<u>394,903</u>	<u>416,973</u>	<u>431,432</u>
Operating Loss	(74,794)	(60,064)	(87,100)	(81,663)	(60,626)
Tax revenues, net	59,344	64,420	77,829	78,171	77,344
CARES Act/PRF Revenue	3,488	23,708	3,114	-	-
Other Revenue (Expense)	1,113	2,701	(2,389)	35,764	19,070
Increase (Decrease) in Net Position	<u>\$ (10,849)</u>	<u>\$ 30,765</u>	<u>\$ (8,546)</u>	<u>\$ 32,272</u>	<u>\$ 35,788</u>

Patient Collections VS. Net Revenue

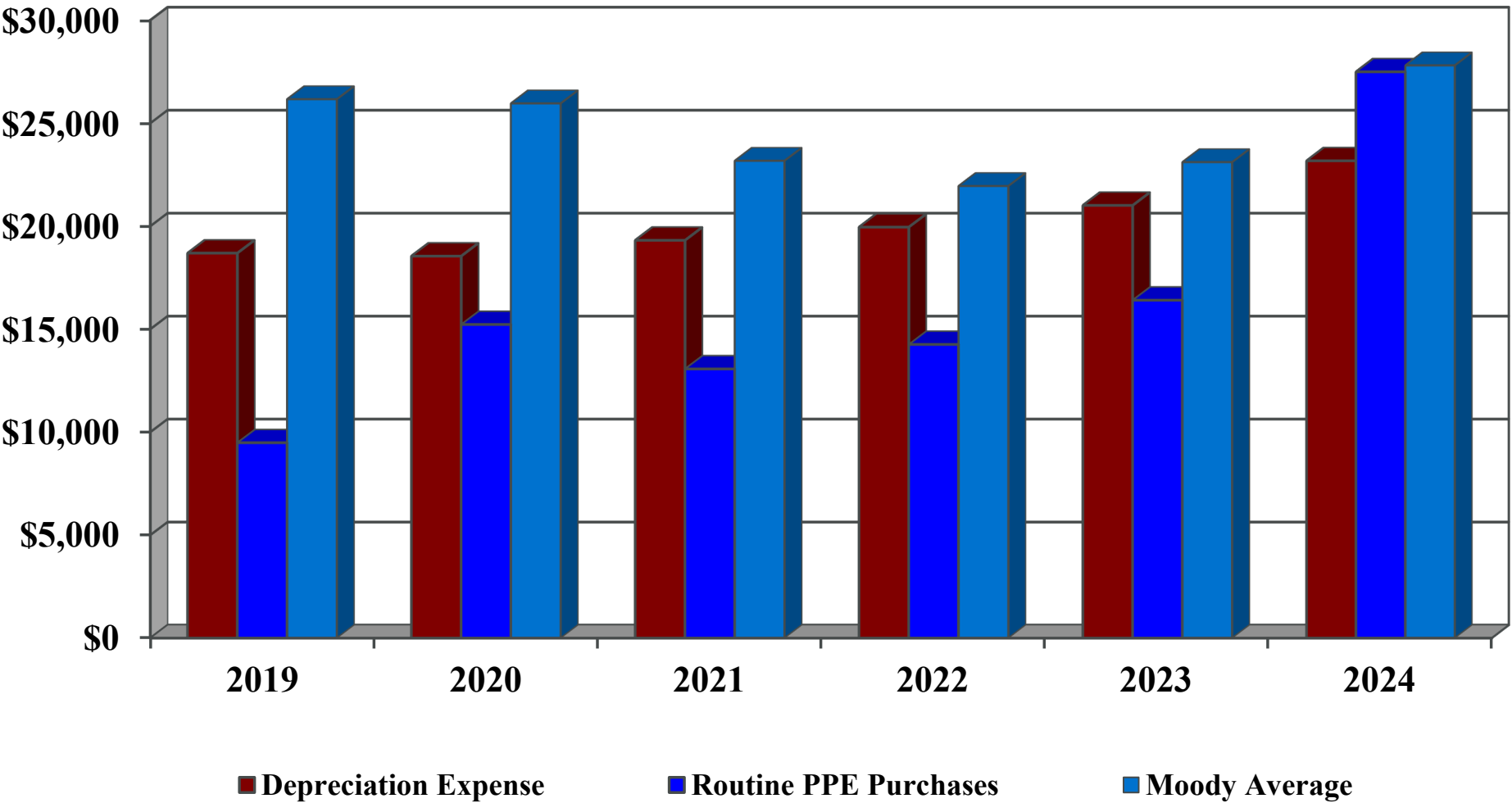


Property Tax Revenue

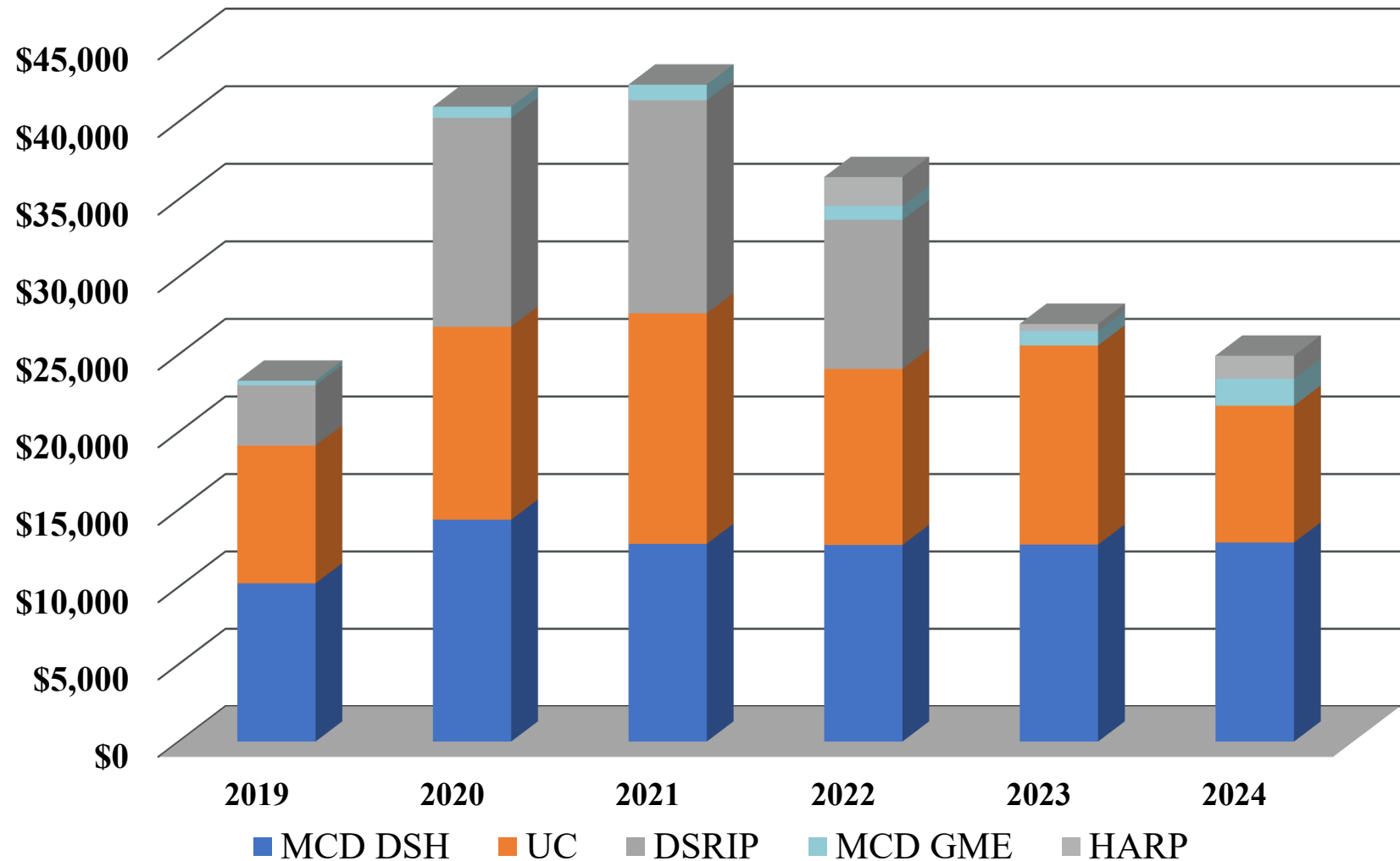
Total Collections and % of Total Revenue



Capital Asset Purchases vs. Depreciation Expense



1115 Waiver Support



Industry Highlights

- Alternative Participating Hospital Reimbursement for Improving Quality Award (APHRIQA)
- Opioid Settlement
- DSH and UC Pool Allocation
- Continued OIG scrutiny over the LPPF funding model
- Cyber-security and data breaches
- Upcoming accounting standard change - GASB Statement No 101- *Compensated Absences*
 - Defines compensated absences and requires liabilities be estimated for leave that is more likely than not to be used for time off or otherwise paid in cash or settled through noncash means
 - Reported retroactively to all periods presented
 - Effective for the year ending September 30, 2025



Questions?

Contact

Forvis Mazars

Thank you!

Danielle Zimmerman, Partner
danielle.zimmerman@us.forvismazars.com
469.341.0790

The information set forth in this presentation contains the analysis and conclusions of the author(s) based upon his/her/their research and analysis of industry information and legal authorities. Such analysis and conclusions should not be deemed opinions or conclusions by Forvis Mazars or the author(s) as to any individual situation as situations are fact-specific. The reader should perform their own analysis and form their own conclusions regarding any specific situation. Further, the author(s)' conclusions may be revised without notice with or without changes in industry information and legal authorities.

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**THE BOARD OF DIRECTORS
OF THE
ECTOR COUNTY HOSPITAL DISTRICT

RESOLUTION**

We, the Board of Directors of the Ector County Hospital District, resolve that we will support the Trauma Program at Medical Center Hospital attaining Level II Trauma verification and designation. We will be committed to providing the resources necessary to ensure quality care of the trauma patient to achieve optimal outcomes throughout the continuum of care. This we do to further our commitment as the lead trauma facility for all citizens of Ector County and Trauma Service Area “J”.

The Trauma Program is the cornerstone of our regional outreach plan and an integral component of our hospital strategic plan. Our support encompasses funding for uncompensated care, physician coverage, contracts, professional education, injury prevention education, clinical facilities, modern technologies, and dedicated staff.

Medical Center Hospital will continue to be active in leadership roles in Texas “J” Regional Advisory Council. Our Trauma Program staff will be supported in participating at the state level in the Texas Trauma Coordinators Forum, The Texas Emergency, Trauma, and Acute Care Foundation, and the Governor’s Emergency and Trauma Advisory Council and Committee. We are committed to furthering the development of the Texas Trauma System in our region and the state.

PASSED AND APPROVED by the Board of Directors of the Ector County Hospital District of Odessa, Texas this 1st day of April 2025.

Wallace Dunn
ECHD Board President

ECTOR COUNTY HOSPITAL DISTRICT

ORDER AUTHORIZING AND IMPLEMENTING A LOCAL PROVIDER PARTICIPATION FUND UNDER CHAPTER 300 OF THE TEXAS HEALTH AND SAFETY CODE

WHEREAS, the Ector County Hospital District (the "District") is a political subdivision of the State of Texas responsible for ensuring access to hospital services for the residents of Ector County, Texas; and

WHEREAS, Chapter 300 of the Texas Health and Safety Code (the "Code") authorizes certain hospital districts to establish a Local Provider Participation Fund ("LPPF") as a means of generating local funding to support intergovernmental transfers for the non-federal share of Medicaid supplemental and directed payment programs; and

WHEREAS, the District seeks to enhance the availability of hospital services by implementing an LPPF in accordance with the provisions of Chapter 300 of the Code; and

WHEREAS, the District Board of Directors has determined that establishing an LPPF is in the best interests of the community and will provide financial support for local hospitals;

NOW, THEREFORE, BE IT ORDERED BY THE BOARD OF DIRECTORS OF THE ECTOR COUNTY HOSPITAL DISTRICT THAT:

1. The District hereby authorizes the creation and implementation of an LPPF pursuant to Chapter 300 of the Code.
2. The District shall impose a mandatory payment on the net patient revenue of each institutional health care provider within its jurisdiction, consistent with the limitations established by Chapter 300 of the Code.
3. The mandatory payment rate shall be determined annually by the Board of Directors and for fiscal year 2025 shall be six percent (6%) of net patient revenue.
4. All revenue collected through the LPPF shall be deposited into a segregated fund within the District's accounts and shall be used exclusively for the purposes authorized under Chapter 300 of the Code.

PASSED AND APPROVED this ____ day of April, 2025, by the Board of Directors of the Ector County Hospital District.

Bryn Dodd
Board Member, District 1

Will Kappauf
Board Member, District 2

Richard Herrera
Board Member, District 3

David Dunn
Board Member, District 4

Don Hallmark
Board Member, District 5

Wallace Dunn
Board Member, District 6

Kathy Rhodes
Board Member, District 7