



Mason Health

Mason General Hospital • Mason Clinic

To: Board of Hospital Commissioners

From: Eric Moll

Date: August 23, 2022

Subject: Consent Agenda

Consent agenda for Tuesday, August 23, 2022

Approval of the Bills:

General Fund 2231077-2231511, 242905 – 242918 \$3,738,950.76

Employee Medical 20079 – 20080 \$ 389,687.32

Mason General Hospital write offs for the month of July 2022 in the amount of \$406,261.87,

Mason Clinic Eye Care, Orthopedics, Pediatrics, Women’s Health, Podiatry General Surgery write offs for the month of July 2022 in the amount of \$30,286.67.

Mason General Hospital Family Health Clinic, Olympic Physicians, Shelton Family Medicine write offs for the month of July 2022 in the amount of \$36,749.98.

Hoodsport Clinic write offs for the month of July 2022 in the amount of (\$585.97).

Walk-In Clinic write offs for the month of July 2022 in the amount of \$16,596.96.

Miscellaneous

Accountable Care Organization (ACO):

In 2023, our ACO will transition from a Direct Contract Model to the ACO Realizing Equity, Access and Community Health Model (ACO REACH Model). CMS will incorporate new Health Equity components in 2023 and one of those components will affect the ACOs quality more in the future. In 2023, ACOs will receive a bonus to their quality score for collecting and reporting beneficiary demographic data. Beneficiaries have the option not to provide this information and we would just report to CMS that the beneficiary has declined.

In the amendment reflecting the transition to the ACO REACH Model, the ACO’s administrative expense will decrease from \$10 per beneficiary per month (PBPM) to \$6 PBPM (an approximate savings of \$150,000 per year). Our risk corridor decreases from 4% to 2.5%, which is good (we can’t lose as much on the downside) and bad (we can’t gain as much on the upside).

Similar to how the ACO has previously ignited important transformation in population health (i.e., Annual Wellness Visits), this new ACO will help stimulate greater strategic integration around health equity.

Limited Liability Partnership Agreement:

The Rural Health Collaborative is forming a limited liability partnership among its members. The purpose of this for-profit entity is to create a company that could develop shared services and joint contracts that are outside the scope of a 501C3 to serve rural healthcare organizations. Mason Health and the other rural members would contribute \$2,000 as an initial funding.

CNO

Health Science Academy- SDS is sending three of our leaders to tour the Nashville Health Science Academy models- Kelly North, Lindsay Roberts (lab supervisor), and Carol Williamson at the end of September. We have hired one of the nursing candidates into Culinary Services while she completes her prerequisites, this will give her a great introduction into the many job roles we have to offer. We continue to work with Bates College, and Olympic College on strengthening our partnership. Both Bates and OCC offer CNA courses which could lead to immediate job opportunities in the nursing units after graduating high school.

Recruitment/Retention: Two Passport USA RN's are onboarding Monday the 29th. Both will be working on MSP, night shift. We look forward to working with them. We currently have CNA: 0.6nights MSP; RN: BC- 0.6FTE, Surg- 0.8FTE, ED- 0.3FTE nights, per diem, ICU- per diem; Surg Tech- 0.8; sterilization tech- 1.0; RT- 1.5. **Total RN-1.7FTE. Total other- 3.9FTE's.** We will be holding two separate Labor Management meetings with the Phlebotomy Assistants and RN's to work through some questions with the contracts. These meetings are invaluable for relationship building with not only staff, but the Union as well.

Jan Batty and I are currently recruiting for ED leadership replacement. Kristyn Criss would like to focus on the Walk In Clinic and use her skills as a provider. Renee is looking to reduce hours to per diem and seek more teaching opportunities. Both have offered to stay until we can find and transition new leadership.

Covid: Although the CDC has updated their guidance for the general public, they have not changed their recommendations for HCW. The state DOH is currently working on 'updating' their guidelines and we're hopeful the updates align with public recommendations more closely. Example: social distancing and masking is no longer strongly recommended. Asymptomatic Covid + persons no longer need to isolate.

Patient Volumes continue to be above 'norm'. We are seeing less Covid patients and Covid + staff as well.

Community: Sgt. Rengal (MCSO) and I speak frequently as we try and navigate through how we manage BH community members jointly. I will be volunteering at Bikers for Babies on the 27th and at the Chamber Golf Tourney on Friday 19th.