



**CCMC AUTHORITY BOARD OF DIRECTORS AGENDA
ZOOM MEETING OR TELECONFERENCE
September 29, 2022 at 6:00PM REGULAR MEETING**

AT CCMC, WE BELIEVE THAT HEALTHY PEOPLE CREATE A HEALTHY
COMMUNITY.

Board of Directors

Linnea Ronnegard	exp. 3/24
Ann Linville	exp. 3/25
Liz Senear	exp. 3/24
Kelsey Hayden	exp. 3/23
Chris Iannazzone	exp. 3/23

CEO

Hannah Sanders, M.D.

OPENING: Call to Order

Roll Call – Linnea Ronnegard, Kelsey Hayden, Liz Senear, Ann Linville, and Chris Iannazzone.

Establishment of a Quorum

**A. COMMUNICATIONS BY AND PETITIONS FROM VISITORS
(Speaker must give name and agenda item)**

1. Audience Comments
2. Guest Speaker

B. BOARD DEVELOPMENT - None

C. CONFLICT OF INTEREST

D. APPROVAL OF AGENDA

E. APPROVAL OF MINUTES

- | | |
|--|---------|
| 1. July 28, 2022 Regular Meeting Minutes | Pgs 1-2 |
| 2. August 23, 2022 Regular Meeting Minutes | Pgs 3-4 |

F. REPORTS OF OFFICERS OR ADVISORS

- | | |
|-----------------------|-----------|
| 1. Board Chair Report | |
| 2. CEO Report | Pgs. 5-7 |
| 3. CFO Report | Pgs. 8-10 |

G. DISCUSSION ITEMS - None

H. ACTION ITEMS

- | | |
|---|------------|
| 1. Delineation of Privileges for CarePoint tele Neurology Providers | Pgs. 11-25 |
| 2. Delineation of Privileges for MindCare tele Psychiatry Providers | Pgs. 26-43 |
| 3. Delineation of Privileges for Richard Harper, MD | Pgs. 44-46 |
| 4. Delineation of Privileges for Paul Gloe, III, MD | Pgs. 47-49 |

I. AUDIENCE PARTICIPATION (limited to 3 minutes per speaker) Members of the public are given the opportunity to comment on matters which are within the subject matter authority of the Board and are appropriate for discussion in an open session.

J. BOARD MEMBERS COMMENTS

K. EXECUTIVE SESSION ~ None

L. ADJOURNMENT

This Board of Directors meeting will be held via ZOOM:

<https://us02web.zoom.us/j/4675701050?pwd=TXEvSFVHOHhIL1JvOGNua1RUUjdQUT09>

Meeting ID: 467 570 1050; Passcode: 379187

To call in: 1-253-215-8782

Meeting ID: 467 570 1050; Passcode: 379187

For a full packet, go to www.cityofcordova.net/government/boards-commissions/health-services-board

*Executive Session: Subjects that may be considered in executive session are: 1) Matters, immediate knowledge of which would clearly have an adverse effect upon the finances of the public entity; 2) Subjects that tend to prejudice the reputation and character of any person, provided that the person may request a public discussion; 3) Matters which by law, municipal charter, or ordinance are required to be confidential; 4) Matters involving consideration of governmental records that by law are not subject to public disclosure; 5) Direction to an attorney or labor negotiator regarding the handling of specific legal matters or labor negotiations.

Minutes
CCMC Authority – Board of Directors
Via ZOOM Meeting or Teleconference
July 28, 2022 at 6:00pm
Regular Meeting

CALL TO ORDER AND ROLL CALL –

Linnea Ronnegard called the Board Meeting to order at 6:00pm.

Board members present: **Linnea Ronnegard, Kelsey Hayden, Liz Senear, Chris Iannazzone, and Ann Linville.**

Quorum was established. 5 members present.

CCMC staff present: Dr. Hannah Sanders, CEO; Tamara Russin, Director of Ancillary Services; Eric Price, CFO; Denna Stavig, Controller; and Faith Wheeler-Jeppson, Executive Assistant to the CEO.

A. COMMUNICATIONS BY AND PETITIONS FROM VISITORS

- 1. Audience Comments** ~ None
- 2. Guest Speaker** ~ None

B. CONFLICT OF INTEREST ~ None

C. APPROVAL OF AGENDA

M/Hayden S/Senear "I move to approve the Agenda."

Hayden- yea, Ronnegard – yea, Senear-yea, Linville-yea, and Iannazzone – yea. 5 yeas, 0 nay, 0 absent; Motion passed.

D. APPROVAL OF MINUTES

1. June 30, 2022 Regular Meeting Minutes

M/Hayden S/Iannazzone "I move to approve the June 30, 2022 Regular Meeting Minutes."

Ronnegard – yea, Senear-yea, Linville-yea, Iannazzone – yea, and Hayden – yea. 5 yeas, 0 nay, 0 absent; Motion passed.

E. REPORTS OF OFFICERS and ADVISORS

- 1. Board Chair report** – No Board Chair report at this time.
- 2. CEO Report** – Dr. Sanders CEO reported that her reports are in the packet, the most notable thing to mention is that we've increased our swing bed with wound care capabilities. Being that we're increasing our capabilities also means that we're going to need to increase our staff. It's been incredibly challenging to find more staff right now. People don't seem to be looking for jobs and the salary expectations are very high. Our Nursing team is working really hard
- 3. CFO Report** – Eric Price reported that the financials are in the packet. Additional items to mention are that there has been a high jump in Acute, part of that was an adjustment in the rates, the other part is that we also had higher volumes of Acute Patients. We're still processing through Charity Care. In 2020 we had a lot of unreconciled accounts that had been on the books for some time. I think that we had budgeted for a few vacancies that we haven't filled. Net AR is up significantly.

- 4. Nursing Quarterly Report** – Dr. Sanders reported that Kadee was unable to attend the meeting this evening. We are in need of a new set of Nurses that we haven't traditionally needed. They've been working really hard in the department, there's a lot of over-time in that department. A lot of our Nursing staff is stepping up to fill in shifts, and if you know anyone in town who has a Nursing license, send them our way. Long Term Care got a 5-star Quality rating again this quarter.
- 5. Ancillary Services Quarterly Report** – Tamara Russin reported that her report is in the packet, and she would like to reiterate that the hospital has been very busy and
- 6. Sound Alternatives Quarterly Report** - Dr. Sanders reported that Barb was unable to attend the meeting this evening. Beyond Barb's report, we continue to struggle to find a clinician. The Sound Alternatives staff is doing a good job of filling in the gaps, recruiting for that position is challenging. Barb is finishing up the Community Health Needs Assessment and will be compiling the data from the survey soon. Also, we will be having a Celebrate Recovery Month event, August 26th.

F. AUDIENCE PARTICIPATION ~ None

G. BOARD MEMBERS COMMENTS

Ronnegard ~ Thank you again to everybody! And it was such a great report from the Auditors, the hospital is in such a different place since I first started on the Board and that's not been that long, so great job!

Hayden ~ Thank you all for your work, and hopefully we can get some nurses and other folks in here soon!

Iannazzone ~ Really excited for the celebration, and I'll help get the word out there about the floating positions. Thanks again for all of your guys' hard work, I appreciate it. And the conference room looks great over there!

Senear ~ Sounds like a really challenging environment and you guys are hanging in there. I might be able to make it to the September meeting, I'll be in Indonesia, but I think there is internet that I can use. October, I know I won't be available.

Linville ~ Sorry I wasn't here last month, but I have been using the services and you guys are doing great.

H. EXECUTIVE SESSION ~ None

I. ADJOURNMENT

M/Hayden S/Linville "I move to adjourn"

Linnea Ronnegard declared the meeting adjourned at 6:28pm.

Prepared by: Faith Wheeler-Jeppson

Minutes
CCMC Authority – Board of Directors
Via ZOOM Meeting or Teleconference
August 25th, 2022 at 6:00pm
Regular Meeting

CALL TO ORDER AND ROLL CALL –

Linnea Ronnegard called the Board Meeting to order at 6:00pm.

Board members present: **Linnea Ronnegard, Kelsey Hayden, Liz Senear (6:12PM), Chris Iannazzone, and Ann Linville.**

Quorum was established. 5 members present.

CCMC staff present: Dr. Hannah Sanders, CEO; Tamara Russin, Director of Ancillary Services; Eric Price, CFO; Denna Stavig, Controller; Barb Jewell, Director of Community Programs and Faith Wheeler-Jeppson, Executive Assistant to the CEO.

A. COMMUNICATIONS BY AND PETITIONS FROM VISITORS

- 1. Audience Comments** ~ None
- 2. Guest Speaker** ~ None

B. BOARD DEVELOPMENT

1. Swing Bed- Dr. Sanders stated that since we always talk about Swing Beds that she wanted to provide more information on what a Swing Beds is.

C. CONFLICT OF INTEREST ~ None

D. APPROVAL OF AGENDA

M/Linville S/Hayden "I move to approve the Agenda."

Hayden- yea, Ronnegard – yea, Linville-yea, and Iannazzone – yea.

4 yeas, 0 nay, 1 absent; Motion passed.

E. APPROVAL OF MINUTES ~ None

F. REPORTS OF OFFICERS and ADVISORS

- 1. Board Chair report** – No Board Chair report at this time.
- 2. CEO Report** – Dr. Sanders CEO reported that her reports are in the packet, and that the reason why the Swing Bed information was included in the packet was we've been successfully recruiting Swing Beds to come do Rehab or bridge the gap between Swing Bed and people that need Long Term Care. As we've done that it's put a lot of pressure on staff. If you know of anybody looking for a job, send them our way.
- 3. CFO Report** – Eric Price reported that the financials are in the packet. A few highlights to mention are that we had to reapply for the NTS grant. The Sound Alternatives grant has been approved. Eric mentioned that is was odd that it was the end of August and we haven't received those funds yet. Overall, the indicators are favorable for the month of July.

G. DISCUSSION ITEMS ~ None

H. ACTION ITEMS

- 1. Resolution 2022-03 Clarification on Casual Status Employees**

M/Senear S/Iannazzone "I move that the CCMC Authority Board of Directors approve Resolution 2022-03 A Resolution of the Cordova Community Medical Center Authority Board of Directors for clarification on casual status employees."

Hayden- yea, Ronnegard – yea, Linville-yea, Senear - yea, and Iannazzone – yea.

5 yeas, 0 nay, 0 absent; Motion passed.

2. Resolution 2022-04 Support Initiation of Search for new Electronic Medical Record Vendor

M/Senear S/Hayden "I move that the CCMC Authority Board of Directors approve Resolution 2022-04 A Resolution of the Cordova Community Medical Center Authority Board of Directors recommends CCMC leadership work with health information technology experts and CCMC staff to evaluate deficiencies in current electronic medical record system. And authorizes issuing a request for proposal to replace the existing electronic medical record if needed."

Hayden- yea, Ronnegard – yea, Linville-yea, Senear - yea, and Iannazzone – yea.

5 yeas, 0 nay, 0 absent; Motion passed.

I. AUDIENCE PARTICIPATION

J. BOARD MEMBERS COMMENTS

Ronnegard ~ Thank you! And if I hear of anyone looking for a job, I'll definitely point them towards the hospital. Thank you for all of the work on getting more Swing Beds. Thank you for a great month on the financials.

Hayden ~ Thank you all for all of your efforts and I am looking forward to the Recovery event.

Iannazzone ~ Thanks again everyone for your hard work, especially staff at CCMC. Recovery Outloud, this weekend. I'll be out with Pastor Steve cooking some hotdogs and hamburgers. Thanks to Sound Alternatives, Barb and CCMC. I think this is going to be a cool event for the community, we'll see you there.

Senear ~ I wanted to remind you that I will try to be on for the September meeting as long as I have wi-fi, I will not be available in October as I'll be on a sailboat, and I'll be coming back to town right before Thanksgiving. And sorry for being late.

Linville ~ I've been spending a lot of time in the new rehab room, it's a lot nicer than downstairs was. Thank you!

K. EXECUTIVE SESSION ~ None

L. ADJOURNMENT

M/Senear S/Hayden "I move to adjourn"

Linnea Ronnegard declared the meeting adjourned at 6:32pm.

Prepared by: Faith Wheeler-Jeppson

CEO Report Board Meeting September 2022

September is Suicide Prevention Awareness Month. All month long, the American Hospital Association is shining a national spotlight on suicide as a national public health issue and how hospitals and health systems are finding solutions to ensure that people at risk feel supported and connected. A number of health care professionals experience burnout, depression and other forms of distress, and are at increased risk for suicide as compared to the general population. I am including this for awareness, education and to spotlight the importance of Suicide awareness. The National Academy Medicine 2022 plan for workforce wellbeing recommends board and healthcare facilities prioritize the following:

- 1. Education and training.** To teach clinicians and colleagues how to recognize a colleague in crisis and intervene effectively and promote self-reflection and early intervention in ourselves when we need help.
- 2. Support resources.** Enhance access and proactively connect clinicians and colleagues to the behavioral health continuum of care, including peer support. This might include funding to support the mental health of health care workers and providing mental health care that is opt-out instead of opt-in.
- 3. Creating a culture of well-being.** This includes removing structural barriers such as licensing and credentialing issues that prevent health care workers from getting help, dispelling myths and fears that prevent people from seeking mental health treatment and supporting leaders as they set an example by seeking help for themselves and talking openly about it.
- 4. Advocacy.** At a local and national level, conduct research to better understand the causes and solutions of health care worker burnout and create a road map for other health care organizations to follow.
- 5. Policies and procedures.** Measure the burnout of our workforce annually, reporting and acting on the results, and creating policies and procedures for training the workforce and intervening proactively when someone's in trouble.

CCMC intends to work on these important initiatives and integrate them into our practice. We appreciate having Board support.

Services:

LTC: We are currently in the middle of our LTC Medicaid/Medicare recertification survey. We have a full census for our LTC beds. All staff are doing an excellent job providing care and operating in a team environment.

ER/ Hospital/SWING: We continue to have fluctuation in our swing bed use. The positive side is that our year to date, we continue to be slightly above average for our census. With the census fluctuations we are working to keep an appropriately sized staff to ensure we are able to provide safe care. With staff shortages this can be a challenge. We have had to rely on increased travelers over the past 2 months.

Clinic: We have bivalent Pfizer vaccine and high dose flu for patients over 65 years old. We continue to wait regular flu vaccine and Moderna Bivalent. We will notify the community as soon as these are available.

Sound Alternatives: The need for behavioral health is very significant right now. We were able to secure a travel

Administrative: We continue to work on our billing, coding, clinical documentation education and denials management processes. There is plenty of work to do and we are currently short staffed with multiple vacancies in the business office.

Cordova Community Medical Center Statistics

	31	28	31	30	31	30	31	31	30	31	30	31	Cumulative Monthly	
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total	Average
Hosp. Admits-SWB Avg. Census														
FY 2019	3.5	1.6	1.2	1.4	1.2	1.1	2.4	3.3	3.3	3.2	4.0	4.3		2.5
FY 2020	3.3	2.1	2.4	2.7	1.7	1.1	1.0	0.3	0.7	1.0	1.8	1.0		1.6
FY 2021	1.3	3.2	2.2	1.7	2.2	1.6	2.1	2.4	3.3	5.6	4.3	1.4		2.6
FY 2022	1.6	3.3	2.8	2.1	1.5	1.9	3.5	3.5	0.0	0.0	0.0	0.0		
Acute Admits														
FY 2019	6	0	2	4	2	1	3	6	4	2	3	3	36	3.0
FY 2020	2	0	1	3	0	2	7	5	4	1	6	2	33	2.8
FY 2021	2	6	4	1	8	7	4	4	4	3	1	2	46	3.8
FY 2022	6	1	2	3	5	7	8	4						
Acute Patient Days														
FY 2019	33	0	6	12	7	4	13	10	12	3	10	11	121	10.1
FY 2020	4	0	4	14	4	4	17	9	8	3	36	6	109	9.1
FY 2021	4	13	8	2	17	11	9	14	15	18	13	2	126	10.5
FY 2022	15	11	7	10	8	10	21	9						
SWB Admits														
FY 2019	2	0	0	0	0	0	3	0	0	2	1	1	9	0.8
FY 2020	1	1	1	1	0	0	0	0	1	1	0	1	7	0.6
FY 2021	2	2	0	1	1	0	2	2	4	3	1	0	18	1.5
FY 2022	1	3	0	1	2	2	3	2						
SWB Patient Days														
FY 2019	75	44	31	30	31	30	61	93	86	95	109	121	806	67.2
FY 2020	99	61	70	67	49	30	14	0	13	29	19	24	475	39.6
FY 2021	37	77	60	49	50	36	55	60	85	155	117	40	821	68.4
FY 2022	34	81	79	54	37	48	89	101						
GCMC LTC Admits														
FY 2019	2	0	1	0	0	0	0	0	0	0	1	0	4	0.3
FY 2020	0	1	0	0	1	0	2	0	0	0	3	0	7	0.6
FY 2021	0	0	0	0	0	0	2	0	0	0	1	1	4	0.3
FY 2022	0	0	0	0	0	1	0	0						
GCMC LTC Resident Days														
FY 2019	299	278	308	300	310	300	280	310	300	310	300	303	3,598	299.8
FY 2020	310	289	310	293	296	300	301	310	300	309	277	310	3,605	300.4
FY 2021	300	300	298	300	310	299	298	310	300	310	298	309	3,632	302.7
FY 2022	310	280	310	300	310	299	310	310						
GCMC LTC Avg. Census														
FY 2019	10	9	10	10	10	10	9	10	10	10	10	10		9.8
FY 2020	10	10	10	10	10	10	10	10	10	10	9	10		9.8
FY 2021	10	10	10	10	10	10	10	10	10	10	10	10		9.9
FY 2022	10	10	10	10	10	10	10	10						
ER Visits														
FY 2019	31	41	47	54	60	55	68	81	64	43	22	28	594	49.5
FY 2020	35	38	34	23	52	51	49	47	35	35	29	38	466	38.8
FY 2021	38	42	35	44	77	61	74	78	67	34	32	40	622	51.8
FY 2022	38	38	42	50	75	85	76	97						
PT Procedures														
FY 2019	443	423	438	440	381	358	305	352	294	295	321	311	4,361	363.4
FY 2020	404	409	314	218	285	279	201	242	322	363	320	338	3,695	307.9
FY 2021	327	494	646	372	352	444	471	337	413	602	493	310	5,261	438.4
FY 2022	275	459	551	394	307	352	396	384						
OT Procedures														
FY 2019	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0
FY 2020	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0
FY 2021	25	223	183	49	36	115	174	118	161	350	309	120	1,863	0.0
FY 2022	122	190	251	134	120	229	243	200						
Lab Tests														
FY 2019	330	356	255	361	423	244	404	473	378	310	392	406	4,332	361.0
FY 2020	277	295	233	355	657	1,441	2,229	1,895	1,319	1,084	1,263	1,165	12,213	1,017.8
FY 2021	885	1,010	1,004	805	682	637	1,261	1,115	853	605	614	549	10,020	835.0
FY 2022	825	576	671	902	958	699	610	822						
X-Ray Procedures														
FY 2019	46	48	83	0	0	98	94	79	77	59	59	46	689	57.4
FY 2020	46	49	55	42	52	62	62	58	63	44	47	39	619	51.6
FY 2021	48	50	49	64	64	70	79	86	88	68	53	72	791	65.9
FY 2022	82	63	64	94	60	82	69	77						
CT Procedures														
FY 2019	19	12	13	15	26	11	24	35	21	6	12	19	213	17.8
FY 2020	12	14	13	18	20	23	19	23	22	20	20	20	224	18.7
FY 2021	24	27	26	20	27	32	28	38	25	16	12	22	297	24.8
FY 2022	21	21	36	25	29	42	31	24						
GCMC Clinic Visits														
FY 2019	162	161	144	178	250	205	247	252	207	360	183	173	2,522	210.1
FY 2020	184	193	141	112	121	151	150	150	152	138	128	127	1,747	145.6
FY 2021	125	134	161	157	188	224	265	277	296	452	303	275	2,857	238.1
FY 2022	288	196	199	237	260	241	221	212						
Behavioral Hlth Visits														
FY 2019	62	98	69	60	89	86	82	94	101	148	112	108	1,108	92.4
FY 2020		138	138	124	113	126	98	104	102	115	123	116	1,297	117.9
FY 2021	85	82	65	74	90	96	60	97	50	35	63	76	853	71.1
FY 2022	84	74	83	79	82	67								

CORDOVA COMMUNITY MEDICAL CENTER
OPERATING/INCOME STATEMENT
FOR THE 8 MONTHS ENDING 08/31/22

09/23/22 01:45 PM

	----- S I N G L E M O N T H -----				----- Y E A R T O D A T E -----			
	ACTUAL	BUDGET	\$ VARIANCE	% VAR	ACTUAL	BUDGET	\$ VARIANCE	% VAR
REVENUE								
ACUTE	102,140	60,400	41,740	69	751,792	471,500	280,292	59
SWING BED	516,748	198,200	318,548	160	2,129,122	1,565,200	563,922	36
LONG TERM CARE	401,711	407,700	(5,988)	(1)	3,135,839	3,195,700	(59,860)	(1)
CLINIC	67,165	70,200	(3,034)	(4)	546,149	546,400	(250)	(0)
ANCILLARY DEPTS	201,748	285,900	(84,151)	(29)	1,774,710	2,232,200	(457,489)	(20)
EMERGENCY DEPART	411,112	202,100	209,012	103	1,840,697	1,598,800	241,897	15
BEHAVIORAL HEALT	13,733	21,400	(7,666)	(35)	140,252	165,900	(25,647)	(15)
RETAIL PHARMACY	128,144	116,600	11,544	9	918,895	907,600	11,295	1
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PATIENT SERVIC	1,842,505	1,362,500	480,005	35	11,237,459	10,683,300	554,159	5
DEDUCTIONS								
CHARITY	4,177	8,450	4,272	50	169,387	66,600	(102,787)	(154)
CONTRACTUAL ADJU	295,001	221,600	(73,401)	(33)	2,350,094	1,730,200	(619,894)	(35)
ADMINISTRATIVE A	58,543	33,700	(24,843)	(73)	333,957	266,400	(67,557)	(25)
BAD DEBT	343,000	8,500	(334,500)	(3935)	118,000	191,000	73,000	38
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DEDUCTIONS TOT	700,722	272,250	(428,472)	(157)	2,971,439	2,254,200	(717,239)	(31)
COST RECOVERIES								
GRANTS	32,388	141,300	(108,911)	(77)	490,264	570,900	(80,635)	(14)
IN-KIND CONTRIBU	333,325	15,600	317,725	2036	445,154	122,900	322,254	262
OTHER REVENUE	14,351	25,000	(10,648)	(42)	153,101	200,000	(46,898)	(23)
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COST RECOVERIE	380,065	181,900	198,165	108	1,088,520	893,800	194,720	21
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TOTAL REVENUES	1,521,848	1,272,150	249,698	19	9,354,540	9,322,900	31,640	0
EXPENSES								
WAGES	413,818	528,900	115,081	21	3,586,943	4,153,800	566,856	13
TAXES & BENEFITS	287,837	233,900	(53,937)	(23)	2,147,416	1,831,600	(315,816)	(17)
PROFESSIONAL SER	161,314	93,900	(67,414)	(71)	1,295,799	732,200	(563,599)	(76)
SUPPLIES	157,074	130,200	(26,874)	(20)	1,154,047	1,015,400	(138,647)	(13)
MINOR EQUIPMENT	3,731	4,150	418	10	35,464	33,400	(2,064)	(6)
REPAIRS & MAINT	6,778	22,200	15,421	69	85,629	173,000	87,370	50
RENTS & LEASES	10,368	11,300	931	8	84,415	89,500	5,084	5
UTILITIES	66,380	41,950	(24,430)	(58)	416,900	328,600	(88,300)	(26)
TRAVEL & TRAININ	11,079	4,350	(6,729)	(154)	78,261	33,200	(45,061)	(135)
INSURANCES	18,162	19,200	1,037	5	129,854	149,800	19,945	13
RECRUIT & RELOCA	3,794	4,800	1,005	20	19,057	38,000	18,942	49
DEPRECIATION	53,388	55,100	1,711	3	422,891	432,100	9,208	2
OTHER EXPENSES	11,142	29,650	18,507	62	229,909	233,000	3,090	1
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TOTAL EXPENSES	1,204,873	1,179,600	(25,273)	(2)	9,686,591	9,243,600	(442,991)	(4)
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OPERATING INCO	316,975	92,550	224,425	242	(332,051)	79,300	(411,351)	(518)
NET INCOME	316,975	92,550	224,425	242	(332,051)	79,300	(411,351)	(518)
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09/23/22 01:45 PM

CORDOVA COMMUNITY MEDICAL CENTER
BALANCE SHEET
FOR THE MONTH ENDING: 08/31/22

	Current Year	Prior Year	Net Change
ASSETS			
CURRENT ASSETS			
CASH	904,942	653,969	250,972
NET ACCOUNT RECEIVABLE	2,842,757	1,355,807	1,486,950
THIRD PARTY RECEIVABLE	212,748	699,890	(487,141)
CLEARING ACCOUNTS	245,763	652,733	(406,970)
PREPAID EXPENSES	137,451	142,036	(4,585)
INVENTORY	521,926	436,717	85,209
	-----	-----	-----
TOTAL CURRENT ASSETS	4,865,589	3,941,154	924,435
PROPERTY PLANT & EQUIPMENT			
LAND	122,010	122,010	
BUILDINGS	7,680,171	7,664,341	15,830
EQUIPMENT	9,583,624	9,023,105	560,518
CONSTRUCTION IN PROGRESS	977,683	973,271	4,411
	-----	-----	-----
SUBTOTAL PP&E	18,363,489	17,782,728	580,760
LESS ACCUMULATED DEPRECIATION	(13,858,162)	(13,250,230)	(607,931)
	-----	-----	-----
TOTAL PROPERTY & EQUIPMENT	4,505,326	4,532,497	(27,171)
OTHER ASSETS			
GOODWILL - PHARMACY	150,000	150,000	
GOODWILL - PHARMACY	(70,000)	(55,000)	(15,000)
PERS DEFERRED OUTFLOW	1,178,466	1,149,806	28,660
TOTAL OTHER ASSETS	1,258,466	1,244,806	13,660
	-----	-----	-----
TOTAL ASSETS	10,629,382	9,718,459	910,923
	=====	=====	=====

09/23/22 01:45 PM

CORDOVA COMMUNITY MEDICAL CENTER
BALANCE SHEET
FOR THE MONTH ENDING: 08/31/22

	Current Year	Prior Year	Net Change
LIABILITIES AND FUND BALANCE			
CURRENT LIABILITIES			
ACCOUNTS PAYABLE	175,156	281,492	(106,336)
PAYROLL & RELATED LIABILITIES	705,807	695,680	10,127
INTEREST & OTHER PAYABLES	1,283	(18,624)	19,908
LONG TERM DEBT - CITY	5,466,458	5,466,458	
OTHER CURRENT LONG TERM DEBT	117,652	237,198	(119,546)
	-----	-----	-----
TOTAL CURRENT LIABILITIES	6,466,359	6,662,206	(195,846)
LONG TERM LIABILITIES			
2015 NET PENSION LIABILITY	6,825,636	6,428,846	396,790
TOTAL LONG TERM LIABILITIES	6,825,636	6,428,846	396,790
DEFERRED INFLOWS OF RESOURCES			
PENSION DEFERRED INFLOW	601,203	43,715	557,488
TOTAL DEFERRED INFLOWS	601,203	43,715	557,488
TOTAL LIABILITIES	13,893,198	13,134,767	758,431
NET POSITION (EQUITY)			
UNRESTRICTED FUND BALANCE	(2,950,277)	(6,891,073)	3,940,795
TEMPORARY RESTRICTED FUND BALANCE	18,513	18,513	
CURRENT YEAR NET INCOME	(332,051)	843,799	(1,175,850)
	-----	-----	-----
TOTAL NET POSITION	(3,263,815)	(6,028,760)	2,764,944
TOTAL LIABILITIES & NET POSITION	10,629,382	7,106,006	3,523,376
	=====	=====	=====



Memorandum

To: CCMC Authority Board of Directors

From: Administration

Subject: Approval of Tele Neurology Privileges for CarePoint Providers

Date: 09/28/2022

Suggested Motion: "I move that the CCMC Authority Board of Directors approve the Delineation of Tele Neurology Privileges for Alicia Bennett, DO, Robert Weir, MD, Scott Caganap, MD, Christopher Fanale, MD, Adam Graham, MD, Matthew Grantz, MD, Saad Sami Mir, MD, Zachary Norman, MD, Byron Spencer, JR., MD, Jeffrey Wagner, MD, and Robert Weir, MD with CarePoint providers as presented."



P: (907) 424-8000 | F: (907) 424-8116
P.O. Box 160 | 602 Chase Ave., Cordova, AK 99574-0160

September 29, 2022

RE: Care Point
Alaska Regional Neurology/TeleNeurology

Medical Staff Recommendation & Confirmation

Cordova Community Medical Center (CCMC) Medical Staff recommends Facility issue Telemedicine privileges to the added Physicians, per each Physician's Alaska Regional Hospital Delineation of Privileges. The other Physicians names on the roster currently hold active Telemedicine privileges at CCMC.

Medical Staff has:

{ } conducted its own full review of credentials of the added Physicians.

{ } relied upon the decisions of Telemedicine Entity.

DocuSigned by:

Curtis Bejes

E7A9D84105A3B7400

Authorized Representative of Medical Staff

26 September 2022 | 10:56 AM AKDT

Date

Curtis Bejes, MD
Medical Director
Cordova Community Medical Center

DocuSigned by:

Hannah Sanders

A9259C1E5177488...

Authorized Representative of Cordova Community Medical Center

26 September 2022 | 12:39 PM AKDT

Date

Hannah Sanders, MD CEO
Chief Executive Officer
Cordova Community Medical Center

Issuance of Privileges

Effective the date signed below, CCMC governing body has issued the added Physicians the same privileges shown on the Physician's Delineation of Privileges received from Telemedicine Entity.

Authorized Governing Body Representative

Date

Print Name and Title



November 23, 2021

Alicia Erin Bennett, DO
Blue Sky Neurology, A Division of CarePoint Health
5600 S Quebec St Ste 312A
Greenwood Village, CO 80111

Dear Doctor Bennett:

The Governing Board of Trustees of our facility, upon the recommendation of the Medical Executive Committee, has approved your request for reappointment. You have been reappointed to **Associate / Affiliate** staff status and assigned to the **Medicine Department**. This appointment is effective **12/1/2021** through **11/30/2023** with clinical privileges as delineated on the enclosed form. If you have any questions or concerns about privileges approved, deferred or denied, please contact the department chairman and discuss your concerns.

This reappointment and the clinical privileges granted are subject to all terms and conditions of your initial appointment, previous reappointments, the Bylaws, Rules and Regulations and policies of the Medical Staff and Hospital.

I would like to thank you on behalf of the Governing Board and Administration for your past and continued support, as well as the part you play in the well being of the Hospital and your contribution to quality healthcare in the community.

Should you have any questions or concerns, please feel free to contact our Medical Staff Services at AKAR.MedicalStaff@HCAHealthcare.com or 907-264-1582.

Sincerely,


Timothy Ballard, MD
Chief Medical Officer
Alaska Regional Hospital



7/22/2022

Scott D Caganap, MD
Blue Sky Neurology, A Division of CarePoint Health
5600 S Quebec St Ste 312A
Greenwood Village, CO 80111

Dear Dr. Caganap:

On behalf of the Board of Trustees of Alaska Regional Hospital, I am pleased to inform you of your approved appointment as a member of the Medical Staff. You have been assigned to the **Associate/Affiliate** Status of the Medical Staff in the Department of **Medicine** with clinical privileges as delineated in the attached. This appointment is effective **7/22/2022 through 1/31/2024**.

The Medical Staff Bylaws and other Medical Staff policies that govern your practice at the Hospital are posted on the Hospital's confidential intranet and/or available through the Medical Staff Office. While it is important that you abide by all of these documents, we wanted to take this opportunity to specifically highlight a few policies and procedures that are critical to your appointment and your success at the Hospital.

Change in Status/Information Provided on Application Form

Your appointment and clinical privileges were granted based upon a careful assessment of your current qualifications and background. If there is any change in your status or any change to the specific information that you provided on your application form, it is your responsibility to inform the Chief of Staff and Medical Staff Office **within seven business days** of when the change occurs. This would include, but not be limited to, change in your licensure status or professional liability insurance coverage, the filing of a lawsuit against you, the initiation of an investigation or change in your Medical Staff status at any other hospital, exclusion or preclusion from participation in Medicare or any sanctions imposed, and any change in your health status that may affect your ability to safely and competently exercise clinical privileges.

Medical Staff Professionalism Policy

The Medical Staff and Board have adopted a Medical Staff Professionalism Policy that applies to all individuals who work and practice at the Hospital. That Policy is based on the expectation that all individuals will be treated with courtesy, respect, and dignity. We believe that such conduct is essential to the provision of safe and competent care.

Focused Professional Practice Evaluation

In accordance with the FPPE Policy to Confirm Practitioner Competence and Professionalism, all initial clinical privileges are subject to focused evaluation. The FPPE requirements for core privileges in your specialty are:

- Chart Review of patients, number and types of cases to be determined, will be reviewed by the department chair to confirm competency

It is expected that your required FPPE will be completed within 12 months of your initial,



or before your initial privileges expire, based on your birth month/year.

Professional Practice Evaluation Process (Peer Review)

The goal of our professional practice evaluation process is to be educational and our Medical Staff leaders make every effort to address identified patient care concerns through collegial methods. All practitioners who practice at the Hospital are subject to review, and it is expected that you will participate constructively in the review process when one of your cases is under review. From time to time, you may also be asked to share your expertise and review a case, and we appreciate your cooperation and willingness to do so. This is an essential aspect of our responsibilities to each other and to our patients.

Reporting of Quality Concerns

Hospital employees and Medical Staff members are encouraged to report quality of care concerns so that they can be reviewed and any identified opportunities for improvement implemented promptly. Please discuss any quality concerns with your Department Chair or the Chief of Staff or report them to the Medical Staff Office.

Medical Record Completion

While we certainly understand the time pressures and demands upon your practice, it is essential that you understand that timely and appropriate medical record completion is not a meaningless, administrative task. It is a fundamental component of quality patient care. It also has implications for Hospital and physician liability, effective performance review, accreditation and licensure, and reimbursement. We stand ready to assist you in this record keeping responsibility in any manner that may be helpful, but please understand that the medical record completion policy will be strictly enforced.

On behalf of the CEO, Jennifer Opsut, congratulations on your appointment and welcome to Alaska Regional Hospital. We appreciate your affiliation and look forward to working with you.

Should you have any questions or concerns, please feel free to contact our Medical Staff Office at AKARMedicalStaff@HCAHealthcare.com or 907-264-1582.

Sincerely,

Timothy Ballard, MD
Chief Medical Officer
Alaska Regional Hospital



July 22, 2022

Christopher V. Fanale, MD
Blue Sky Neurology
5600 S Quebec St Ste 312A
Englewood, CO 80111

Dear Dr. Fanale:

The Governing Board of Trustees of our facility, upon the recommendation of the Medical Executive Committee, has approved your request for reappointment. You have been reappointed to **Associate / Affiliate** staff status and assigned to the **Medicine Department**. This appointment is effective **8/1/2022** through **7/31/2024** with clinical privileges as delineated on the enclosed form. If you have any questions or concerns about privileges approved, deferred or denied, please contact the department chairman and discuss your concerns.

This reappointment and the clinical privileges granted are subject to all terms and conditions of your initial appointment, previous reappointments, the Bylaws, Rules and Regulations and policies of the Medical Staff and Hospital.

I would like to thank you on behalf of the Governing Board and Administration for your past and continued support, as well as the part you play in the well being of the Hospital and your contribution to quality healthcare in the community.

Should you have any questions or concerns, please feel free to contact our Medical Staff Services at AKARMedicalStaff@HCAHealthcare.com or 907-264-1582.

Sincerely,

Timothy Ballard, MD
Chief Medical Officer
Alaska Regional Hospital



May 26, 2021

Adam Kristopher Graham, MD
Blue Sky Neurology A Div of CarePoint PC
499 East Hampden Avenue Suite 360
Englewood, CO 80113

Dear Adam Kristopher Graham, MD:

The Governing Board of Trustees of our facility, upon the recommendation of the Medical Executive Committee, has approved your request for reappointment. You have been reappointed to Associate/Affiliate Staff status and assigned to the Medicine Department. This appointment is effective 06/01/2021 through 05/31/2023 with clinical privileges in Neurology.

This reappointment and the clinical privileges granted are subject to all terms and conditions of your initial appointment, previous reappointments, the Bylaws, Rules and Regulations and policies of the Medical Staff and Hospital.

I would like to thank you on behalf of the Governing Board and Administration for your past and continued support, as well as the part you play in the well being of the Hospital and your contribution to quality healthcare in the community.

Should you have any questions or concerns, please feel free to contact us.

Sincerely,

A handwritten signature in black ink that reads "Jennifer Opsut".

Jennifer Opsut
Chief Executive Officer



December 22, 2021

Matthew Ryan Grantz, MD
Blue Sky Neurology, A Division of CarePoint Health
5600 S Quebec Street Ste. 312A
Greenwood Village, CO 80111

Dear Dr. Grantz:

The Governing Board of Trustees of our facility, upon the recommendation of the Medical Executive Committee, has approved your request for reappointment. You have been reappointed to **Associate / Affiliate** staff status and assigned to the **Medicine Department**. This appointment is effective **1/1/2022** through **12/31/2023** with clinical privileges as delineated on the enclosed form. If you have any questions or concerns about privileges approved, deferred or denied, please contact the department chairman and discuss your concerns.

This reappointment and the clinical privileges granted are subject to all terms and conditions of your initial appointment, previous reappointments, the Bylaws, Rules and Regulations and policies of the Medical Staff and Hospital.

I would like to thank you on behalf of the Governing Board and Administration for your past and continued support, as well as the part you play in the well being of the Hospital and your contribution to quality healthcare in the community.

Should you have any questions or concerns, please feel free to contact our Medical Staff Services at AKAR.MedicalStaff@HCAHealthcare.com or 907-264-1582.

Sincerely,

Timothy Ballard, MD
Chief Medical Officer
Alaska Regional Hospital



August 30, 2021

Saad Abdul Sami Mir, MD
499 East Hampden Avenue Suite 360
Englewood, CO. 80113

Dear Saad Abdul Sami Mir, MD

It is my pleasure to inform you that the Governing Board of Trustees, upon the recommendation of the Medical Executive Committee, has approved your request for appointment to the Medical Staff of Alaska Regional Hospital on 8/24/2021. You have been appointed to the Associate/Affiliate Staff Category and assigned to the Medicine Department. This appointment is effective through 3/31/2023 with clinical privileges in Neurology as delineated on the enclosed privilege form.

Focused Professional Practice Evaluation

In accordance with the FPPE Policy to Confirm Practitioner Competence and Professionalism, all initial clinical privileges are subject to focused evaluation. The FPPE requirements for core and advanced privileges in your specialty are defined on your enclosed approved clinical privileges. It is expected that the initial evaluation will be completed within 12 months of your appointment. It is your responsibility to contact your assigned proctors and work with those providers to ensure availability for concurrent (direct observation) proctoring. Individuals who find their proctors routinely unavailable should contact their Department Chairperson or Medical Staff Services for assistance and resolution.

You shall remain subject to proctoring until the Medical Executive Committee has been furnished with the required number of cases and your Department Chairpersons assessment and recommendation. If you have any questions or need assistance, contact Medical Staff Services at 907-264-1261.

I am happy to take this opportunity to welcome you to our hospital and look forward to working with you in the service of our community.

Sincerely,

Jennifer Opsut

Chief Executive Officer



10/26/2021

Zachary I. Norman, MD
Blue Sky Neurology
5600 S. Quebec St. Suite 312A
Englewood, CA 80111

Dear Dr. Norman:

On behalf of the Board of Trustees of Alaska Regional Hospital, I am pleased to inform you of your approved appointment as a member of the Medical Staff. You have been assigned to the **Associate/Affiliate** Status of the Medical Staff in the Department of **Medicine** with clinical privileges as delineated in the attached. This appointment is effective **10/26/2021 through 3/31/2023**.

The Medical Staff Bylaws and other Medical Staff policies that govern your practice at the Hospital are posted on the Hospital's confidential intranet and/or available through the Medical Staff Office. While it is important that you abide by all of these documents, we wanted to take this opportunity to specifically highlight a few policies and procedures that are critical to your appointment and your success at the Hospital.

Change in Status/Information Provided on Application Form

Your appointment and clinical privileges were granted based upon a careful assessment of your current qualifications and background. If there is any change in your status or any change to the specific information that you provided on your application form, it is your responsibility to inform the Chief of Staff and Medical Staff Office **within seven business days** of when the change occurs. This would include, but not be limited to, change in your licensure status or professional liability insurance coverage, the filing of a lawsuit against you, the initiation of an investigation or change in your Medical Staff status at any other hospital, exclusion or preclusion from participation in Medicare or any sanctions imposed, and any change in your health status that may affect your ability to safely and competently exercise clinical privileges.

Medical Staff Professionalism Policy

The Medical Staff and Board have adopted a Medical Staff Professionalism Policy that applies to all individuals who work and practice at the Hospital. That Policy is based on the expectation that all individuals will be treated with courtesy, respect, and dignity. We believe that such conduct is essential to the provision of safe and competent care.

Focused Professional Practice Evaluation

In accordance with the FPPE Policy to Confirm Practitioner Competence and Professionalism, all initial clinical privileges are subject to focused evaluation. The FPPE requirements for core privileges in your specialty are:

- Chart Review of patients, number and types of cases to be determined, will be reviewed by the department chair to confirm competency

It is expected that your required FPPE will be completed within 12 months of your initial,



or before your initial privileges expire, based on your birth month/year.

Professional Practice Evaluation Process (Peer Review)

The goal of our professional practice evaluation process is to be educational and our Medical Staff leaders make every effort to address identified patient care concerns through collegial methods. All practitioners who practice at the Hospital are subject to review, and it is expected that you will participate constructively in the review process when one of your cases is under review. From time to time, you may also be asked to share your expertise and review a case, and we appreciate your cooperation and willingness to do so. This is an essential aspect of our responsibilities to each other and to our patients.

Reporting of Quality Concerns

Hospital employees and Medical Staff members are encouraged to report quality of care concerns so that they can be reviewed and any identified opportunities for improvement implemented promptly. Please discuss any quality concerns with your Department Chair or the Chief of Staff or report them to the Medical Staff Office.

Medical Record Completion

While we certainly understand the time pressures and demands upon your practice, it is essential that you understand that timely and appropriate medical record completion is not a meaningless, administrative task. It is a fundamental component of quality patient care. It also has implications for Hospital and physician liability, effective performance review, accreditation and licensure, and reimbursement. We stand ready to assist you in this record keeping responsibility in any manner that may be helpful, but please understand that the medical record completion policy will be strictly enforced.

On behalf of the CEO, Jennifer Opsut, congratulations on your appointment and welcome to Alaska Regional Hospital. We appreciate your affiliation and look forward to working with you.

Should you have any questions or concerns, please feel free to contact our Medical Staff Office at AKAR.MedicalStaff@HCAHealthcare.com or 907-264-1582.

Sincerely,

Timothy Ballard
Chief Medical Officer
Alaska Regional Hospital



October 26, 2021

Byron Roderick Spencer, Jr., MD
Blue Sky Neurology, A Division of CarePoint Health
5600 S Quebec Street Ste 312A
Greenwood Village, Colorado 80111

Dear Dr. Spencer:

The Governing Board of Trustees of our facility, upon the recommendation of the Medical Executive Committee, has approved your request for reappointment. You have been reappointed to **Associate / Affiliate** staff status and assigned to the **Medicine Department**. This appointment is effective **11/1/2021** through **10/31/2023** with clinical privileges as delineated on the enclosed form. If you have any questions or concerns about privileges approved, deferred or denied, please contact the department chairman and discuss your concerns.

This reappointment and the clinical privileges granted are subject to all terms and conditions of your initial appointment, previous reappointments, the Bylaws, Rules and Regulations and policies of the Medical Staff and Hospital.

I would like to thank you on behalf of the Governing Board and Administration for your past and continued support, as well as the part you play in the well being of the Hospital and your contribution to quality healthcare in the community.

Should you have any questions or concerns, please feel free to contact our Medical Staff Services at AKAR.MedicalStaff@HCAHealthcare.com or 907-264-1582.

Sincerely,


Timothy Ballard
Chief Medical Officer
Alaska Regional Hospital



December 22, 2021

Jeffrey Charles Wagner, MD
Blue Sky Neurology, A Division of CarePoint Health
5600 S Quebec Street Ste 312A
Greenwood Village, CO 80111

Dear Dr. Wagner:

The Governing Board of Trustees of our facility, upon the recommendation of the Medical Executive Committee, has approved your request for reappointment. You have been reappointed to **Associate / Affiliate** staff status and assigned to the **Medicine Department**. This appointment is effective **1/1/2022** through **12/31/2023** with clinical privileges as delineated on the enclosed form. If you have any questions or concerns about privileges approved, deferred or denied, please contact the department chairman and discuss your concerns.

This reappointment and the clinical privileges granted are subject to all terms and conditions of your initial appointment, previous reappointments, the Bylaws, Rules and Regulations and policies of the Medical Staff and Hospital.

I would like to thank you on behalf of the Governing Board and Administration for your past and continued support, as well as the part you play in the well being of the Hospital and your contribution to quality healthcare in the community.

Should you have any questions or concerns, please feel free to contact our Medical Staff Services at AKAR.MedicalStaff@HCAHealthcare.com or 907-264-1582.

Sincerely,

Timothy Ballard, MD
Chief Medical Officer
Alaska Regional Hospital



4/20/2022

Robert A. Weir, MD
Blue Sky Neurology
5600 S. Quebec St Ste 312A
Greenwood Village, CO 80111

Dear Dr. Weir:

On behalf of the Board of Trustees of Alaska Regional Hospital, I am pleased to inform you of your approved appointment as a member of the Medical Staff. You have been assigned to the **Associate/Affiliate** Status of the Medical Staff in the Department of **Medicine** with clinical privileges as delineated in the attached. This appointment is effective **4/20/2022 through 9/30/2023**.

The Medical Staff Bylaws and other Medical Staff policies that govern your practice at the Hospital are posted on the Hospital's confidential intranet and/or available through the Medical Staff Office. While it is important that you abide by all of these documents, we wanted to take this opportunity to specifically highlight a few policies and procedures that are critical to your appointment and your success at the Hospital.

Change in Status/Information Provided on Application Form

Your appointment and clinical privileges were granted based upon a careful assessment of your current qualifications and background. If there is any change in your status or any change to the specific information that you provided on your application form, it is your responsibility to inform the Chief of Staff and Medical Staff Office **within seven business days** of when the change occurs. This would include, but not be limited to, change in your licensure status or professional liability insurance coverage, the filing of a lawsuit against you, the initiation of an investigation or change in your Medical Staff status at any other hospital, exclusion or preclusion from participation in Medicare or any sanctions imposed, and any change in your health status that may affect your ability to safely and competently exercise clinical privileges.

Medical Staff Professionalism Policy

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Focused Professional Practice Evaluation

In accordance with the FPPE Policy to Confirm Practitioner Competence and Professionalism, all initial clinical privileges are subject to focused evaluation. The FPPE requirements for core privileges in your specialty are:

- Chart Review of patients, number and types of cases to be determined, will be reviewed by the department chair to confirm competency

It is expected that your required FPPE will be completed within 12 months of your initial,



or before your initial privileges expire, based on your birth month/year.

Professional Practice Evaluation Process (Peer Review)

The goal of our professional practice evaluation process is to be educational and our Medical Staff leaders make every effort to address identified patient care concerns through collegial methods. All practitioners who practice at the Hospital are subject to review, and it is expected that you will participate constructively in the review process when one of your cases is under review. From time to time, you may also be asked to share your expertise and review a case, and we appreciate your cooperation and willingness to do so. This is an essential aspect of our responsibilities to each other and to our patients.

Reporting of Quality Concerns

Hospital employees and Medical Staff members are encouraged to report quality of care concerns so that they can be reviewed and any identified opportunities for improvement implemented promptly. Please discuss any quality concerns with your Department Chair or the Chief of Staff or report them to the Medical Staff Office.

Medical Record Completion

While we certainly understand the time pressures and demands upon your practice, it is essential that you understand that timely and appropriate medical record completion is not a meaningless, administrative task. It is a fundamental component of quality patient care. It also has implications for Hospital and physician liability, effective performance review, accreditation and licensure, and reimbursement. We stand ready to assist you in this record keeping responsibility in any manner that may be helpful, but please understand that the medical record completion policy will be strictly enforced.

On behalf of the CEO, Jennifer Opsut, congratulations on your appointment and welcome to Alaska Regional Hospital. We appreciate your affiliation and look forward to working with you.

Should you have any questions or concerns, please feel free to contact our Medical Staff Office at AKAR.MedicalStaff@HCAHealthcare.com or 907-264-1582.

Sincerely,

Timothy Ballard, MD
Chief Medical Officer
Alaska Regional Hospital



Memorandum

To: CCMC Authority Board of Directors

From: Administration

Subject: Approval of Privileges for MindCare Providers

Date: 09/27/2022

Suggested Motion: "I move that the CCMC Authority Board of Directors approve the Delineation of Telemedicine Privileges for Hope Beatte, MD, Kevin Carmen, MD, Christine Charles, MD, Michelle DeNault, MD, Venkata Diddi, MD, Ali Samee, MD, Kelly Stinson, MD, and Daron Watts, MD with MindCare as presented."



P: (907) 424-8000 | F: (907) 424-8116
P.O. Box 160 | 602 Chase Ave., Cordova, AK 99574-0160

September 29, 2022


RE: MindCare
Alaska Regional TelePsych

Medical Staff Recommendation & Confirmation

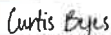
Cordova Community Medical Center (CCMC) Medical Staff recommends Facility issue Telemedicine privileges to the added Physicians, per each Physician's Alaska Regional Hospital Delineation of Privileges. The other Physicians names on the roster currently hold active Telemedicine privileges at CCMC.

Medical Staff has:

{ } conducted its own full review of credentials of the added Physicians.

 { } relied upon the decisions of Telemedicine Entity.

DocuSigned by:



67350148043C30

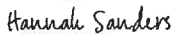
Authorized Representative of Medical Staff

27 September 2022 | 2:36 AM AKDT

Date

Curtis Bejes, MD
Medical Director
Cordova Community Medical Center

DocuSigned by:



A025BC1E5172AB0

Authorized Representative of Cordova Community Medical Center

27 September 2022 | 6:20 AM AKDT

Date

Hannah Sanders, MD CEO
Chief Executive Officer
Cordova Community Medical Center

Issuance of Privileges

Effective the date signed below, CCMC governing body has issued the added Physicians the same privileges shown on the Physician's Delineation of Privileges received from Telemedicine Entity.

Authorized Governing Body Representative

Date

Print Name and Title



P: (907) 424-8000 | F: (907) 424-8116
P.O. Box 160 | 602 Chase Ave., Cordova, AK 99574-0160

TELEMEDICINE PRIVILEGES (Delegated)

Telemedicine privileges for consult services are provided by organizations contracted with Cordova Community Medical Center. Process for credential verification and privileges is delegated to the contracted entity. Quality improvement is also monitored and maintained by the contracted entity.

To be eligible to apply for telemedicine specialty consult privileges at CCMC, the initial applicant must meet the following criteria:

- Degree: MD or DO, PA or NP
- Successful completion of a residency or fellowship training program approved by the specialty specific governing board
- Maintain active privileges with a contracted organization, with copy of privileges provided to Cordova Community Medical Center.
- Participate in quality improvement and peer review through contracted organization

Telemedicine privileges may be granted to a practitioner pursuant to credentialing performed by the distant site hospital, distant site telemedicine entity, or through credentialing performed by the Hospital.

If a practitioner's credentialing and privileging are performed under a contractual agreement with a distant site hospital or distant site telemedicine entity and the Hospital terminates its telemedicine agreement with the distant site hospital or distant site telemedicine entity, the practitioner's telemedicine privileges will automatically terminate.

Telemedicine privileges shall be for a period of not more than three years.

CCMC's peer review committee will maintain evidence of its internal peer review of the distant site hospital. CCMC's peer review committee will send information related to all adverse events that result from the telemedicine services provided by the distant site hospital or distant site telemedicine entity practitioner to a Hospital patient and all complaints the

Hospital has received about a distant site hospital or distant site telemedicine entity practitioner. Any information exchanged between the Hospital and a distant site hospital or distant site telemedicine entity in connection with a distant site hospital or distant site telemedicine entity practitioner's credentialing or performance will be handled by the CCMC's peer review committee.

All telemedicine practitioners will be categorized as "telemedicine staff" and will not be eligible to vote or hold office. Practitioners will follow other medical staff or hospital requirements that apply only to practitioners that provide direct patient care.

Please provide a copy of credential and privileges from the contracted organization along with this application.

Acknowledgement of Practitioner

I have requested privileges for telemedicine practitioner in Psychiatry (field of specialty). I have only requested those privileges for which by education, training, current experience, and demonstrated performance I am qualified to perform and for which I wish to exercise via telemedicine on behalf of Cordova Community Medical Center. I understand that in exercising any clinical privileges granted, I am constrained by Medical Staff bylaws, policies and rules applicable generally and any applicable to the particular situation.

DocuSigned by:


5C740A3D773D489...

Practitioner Signature

9/22/2022

Date

Hope Beatte, MD

Practitioner Print

CEO

Date

Chief of Staff or Designee Verification

Date



P: (907) 424-8000 | F: (907) 424-8116
P.O. Box 160 | 602 Chase Ave., Cordova, AK 99574-0160

TELEMEDICINE PRIVILEGES (Delegated)

Telemedicine privileges for consult services are provided by organizations contracted with Cordova Community Medical Center. Process for credential verification and privileges is delegated to the contracted entity. Quality improvement is also monitored and maintained by the contracted entity.

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- Degree: MD or DO, PA or NP
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Please provide a copy of credential and privileges from the contracted organization along with this application.

Acknowledgement of Practitioner

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DocuSigned by:



Practitioner Signature

9/23/2022

Date

Kevin Carmen, MD

Practitioner Print

CEO

Date

Chief of Staff or Designee Verification

Date



P: (907) 424-8000 | F: (907) 424-8116
P.O. Box 160 | 602 Chase Ave., Cordova, AK 99574-0160

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<div>DocuSigned by:  EA8759B22BC2471</div> <div>Practitioner Signature</div>	<div>9/23/2022</div> <div>Date</div>
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Christine Charles, MD
Practitioner Print

<div></div> <div>CEO</div>	<div></div> <div>Date</div>
----------------------------	-----------------------------

<div></div> <div>Chief of Staff or Designee Verification</div>	<div></div> <div>Date</div>
--	-----------------------------



P: (907) 424-8000 | F: (907) 424-8116
P.O. Box 160 | 602 Chase Ave., Cordova, AK 99574-0160

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DocuSigned by:

Practitioner Signature

9/22/2022
Date

Dr. Michelle DeNault
Practitioner Print

CEO

Date

Chief of Staff or Designee Verification

Date



P: (907) 424-8000 | F: (907) 424-8116
P.O. Box 160 | 602 Chase Ave., Cordova, AK 99574-0160

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DocuSigned by:
Venkata Durga Prasad Diddi
Practitioner Signature

9/22/2022
Date

Venkata Durga Prasad Diddi
Practitioner Print

CEO

Date

Chief of Staff or Designee Verification

Date



P: (907) 424-8000 | F: (907) 424-8116
P.O. Box 160 | 602 Chase Ave., Cordova, AK 99574-0160

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<div>DocuSigned by: <u>Ali Samee, MD</u> 812DD33278724ED</div> <div>Practitioner Signature</div>	<div><u>9/22/2022</u></div> <div>Date</div>
--	---

<div><u>Ali Samee, MD</u></div> <div>Practitioner Print</div>

<div>_____ CEO</div>	<div>_____ Date</div>
--------------------------	---------------------------

<div>_____ Chief of Staff or Designee Verification</div>	<div>_____ Date</div>
--	---------------------------



P: (907) 424-8000 | F: (907) 424-8116
P.O. Box 160 | 602 Chase Ave., Cordova, AK 99574-0160

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DocuSigned by:
Kelly Stinson, MD
DACCACC6823F474...

Practitioner Signature

9/23/2022

Date

Kelly Stinson, MD

Practitioner Print

CEO

Date

Chief of Staff or Designee Verification

Date



P: (907) 424-8000 | F: (907) 424-8116
P.O. Box 160 | 602 Chase Ave., Cordova, AK 99574-0160

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DocuSigned by:
Daron Watts, MD
503C19E1EA0044C0
Practitioner Signature

9/22/2022
Date

Daron Watts, MD
Practitioner Print

CEO

Date

Chief of Staff or Designee Verification

Date



Memorandum

To: CCMC Authority Board of Directors

From: Administration

Subject: Approval of Privileges for Richard Harper, MD

Date: 09/26/2022

Suggested Motion: "I move that the CCMC Authority Board of Directors approve the Delineation of Privileges for Richard Harper, MD as presented."



P: (907) 424-8000 | F: (907) 424-8116
P.O. Box 160 | 602 Chase Ave., Cordova, AK 99574-0160

PRACTITIONER RE-CREDENTIALING

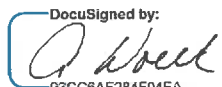
September 29, 2022

Linnea Ronnegard, Chair
Hospital Authority Board
Cordova Community Medical Center
Cordova, AK 99574

Dear Chairperson and Hospital Authority Board,

Cordova Community Medical Center has reviewed Dr Richard Harper application for privileges to our hospital. In accordance with our medical staff bylaws, the credentialing committee has reviewed the application including practitioner licenses, professional references, and case logs. We recommend Dr Richard Harper for privileges at Cordova Community Medical Center.

Sincerely,

DocuSigned by:

93CC8AF284F04FA...

Chief of Staff

20 September 2022 | 1:30 PM CDT

Date

DocuSigned by:

A9259C1E51774B6...

Chief Executive Officer

20 September 2022 | 12:12 PM AKDT

Date

**Cordova Community Medical Center
Request for Clinical Privileges**

Practitioner Name: **Dr Richard Harper**

MEDICAL DIRECTOR REVIEW

The Medical Director has reviewed the attached list of requested privileges and the following information related to the applicant:

<input type="checkbox"/>	Pertinent results of performance improvements activities	<input type="checkbox"/>	Peer Review results
<input type="checkbox"/>	Mortality data	<input type="checkbox"/>	Peer Recommendations
<input type="checkbox"/>	Professional performance	<input type="checkbox"/>	Outcomes of procedures and treatment
<input type="checkbox"/>	Clinical judgement and technical skills in performing procedures and treating and managing patient		

Recommendation:

- ☒ Approved as requested
☐ Approve with conditions/modifications (see explanation below)
☐ Deny (see explanation below)

Reasons for recommendation, Reasons for conditions, Reasons for modifications and/or denial:

curtis bejes

DocuSigned by:

E73DD11B943F429...
Medical Director Signature

20 September 2022 | 12:07 PM AKDT

Date

CCMC BOARD OF AUTHORITY

- ☐ Approved as requested
☐ Approve with conditions/modifications (see explanation below)
☐ Deny (See explanation below)

Reasons for recommendation, Reasons for conditions, Reasons for modifications and/or denial:

Board of Authority Chair

Date



Memorandum

To: CCMC Authority Board of Directors

From: Administration

Subject: Approval of Privileges for Paul Gloe III, MD

Date: 09/26/2022

Suggested Motion: "I move that the CCMC Authority Board of Directors approve the Delineation of Privileges for Paul Gloe III, MD as presented."



P: (907) 424-8000 | F: (907) 424-8116
P.O. Box 160 | 602 Chase Ave., Cordova, AK 99574-0160

PRACTITIONER CREDENTIALING

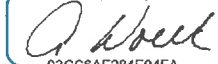
September 29, 2022

Linnea Ronnegard, Chair
Hospital Authority Board
Cordova Community Medical Center
Cordova, AK 99574

Dear Chairperson and Hospital Authority Board,

Cordova Community Medical Center has reviewed Paul B. Gloe III, MD re-credentialing application for privileges to our hospital. In accordance with our medical staff bylaws, the credentialing committee has reviewed the application including practitioner licenses, professional references, and case logs. We recommend Paul B. Gloe III, MD for privileges at Cordova Community Medical Center.

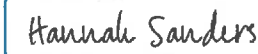
Sincerely,

DocuSigned by:

93CC6AF284F04FA...

Chief of Staff

23 September 2022 | 12:54 PM CDT

Date

DocuSigned by:

A9259C1E5177485...

Chief Executive Officer

23 September 2022 | 10:37 AM AKDT

Date

**Cordova Community Medical Center
Request for Clinical Privileges**

Practitioner Name: **Paul B. Gloe III, MD**

MEDICAL DIRECTOR REVIEW

The Medical Director has reviewed the attached list of requested privileges and the following information related to the applicant:

<input type="checkbox"/>	Pertinent results of performance improvements activities	<input type="checkbox"/>	Peer Review results
<input type="checkbox"/>	Mortality data	<input type="checkbox"/>	Peer Recommendations
<input checked="" type="checkbox"/>	Professional performance	<input type="checkbox"/>	Outcomes of procedures and treatment
<input checked="" type="checkbox"/>	Clinical judgement and technical skills in performing procedures and treating and managing patient		

Recommendation:

<input checked="" type="checkbox"/>	Approved as requested
<input type="checkbox"/>	Approve with conditions/modifications (see explanation below)
<input type="checkbox"/>	Deny (see explanation below)

Reasons for recommendation, Reasons for conditions, Reasons for modifications and/or denial:

Curtis M Bejes, M.D. 9/23/2022

Approved as requested

DocuSigned by:
Curtis Bejes
E73DD11B943F429
Medical Director Signature

24 September 2022 | 4:21 PM AKDT

Date

CCMC BOARD OF AUTHORITY

<input type="checkbox"/>	Approved as requested
<input type="checkbox"/>	Approve with conditions/modifications (see explanation below)
<input type="checkbox"/>	Deny (See explanation below)

Reasons for recommendation, Reasons for conditions, Reasons for modifications and/or denial:

Board of Authority Chair

Date

October 2022						
◀ Sep 2022						Nov 2022 ▶
Sun	Mon	Tue	Wed	Thu	Fri	Sat
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

Board Mtg
6pm

November 2022							Dec 2022 ▶
◀ Oct 2022	Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4	5
6	7	8	9	10	11	12	
13	14	15	16	17	18	19	
				Proposed meeting date			
20	21	22	23	24	25	26	
				Closed Thanksgiving Holiday	Closed Thanksgiving Holiday		
27	28	29	30				