

Sierra Vista Hospital
Regular Joint Powers Commission Minutes
March 20, 2025 @ 2:00pm

1. The Joint Powers Commission of Sierra Vista Hospital met March 20, 2025, at 2:00pm in the boardroom at Sierra Vista Hospital for a regular meeting. Jim Paxon, Chairperson, called the meeting to order at 2:07pm.

2. **Pledge of Allegiance** Jim Paxon, Chairperson

3. **Roll Call** Jennifer Burns, Recorder

Joint Powers Commission

Attendees: City of Elephant Butte

Kim Skinner, Present by phone
Phillip Mortensen, **Vice Chair**, Present
Cathy Harmon, Present
Janet Porter-Carrejo, CM EB, Absent

City of T or C

Rolf Hechler, Present
Amanda Forister, Absent
Ingo Hoepfner, Present
Gary Whitehead, City Manager, Present

Sierra County

Travis Day, Present by phone
Jim Paxon, **Chair**, Present
Hank Hopkins, Present
Amber Vaughn, County Manager, Absent

Village of Williamsburg

Vacant
Magorie Powey, Present
Deb Stubblefield, Present
Amanda Cardona, Absent

Sierra Vista Hospital

Don Bates, CEO, Present
Ming Huang, CFO, Present
Sheila Adams, CNO, Present
Kathi Pape, **Governing Board Chair**, Present
Lisa Boston, Present
Aaron Dow, CIO, Present

AGENDA ITEMS

PRESENTER

ACTION REQUIRED

4. Approval of Agenda

Jim Paxon, Chairperson

Deb Stubblefield motioned to approve the agenda. Magorie Powey seconded. Motion carried unanimously.

5. Approval of Minutes

Jim Paxon, Chairperson

A. November 12, 2024, Joint Meeting Minutes

Rolf Hechler motioned to approve the November 12, 2024 minutes. Deb Stubblefield seconded. Motion carried unanimously.

6. Public Comment – None

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7. Old Business

Jim Paxon, Chairperson

None

8. New Business

A. Governing Board Report - Kathi Pape, Chairperson, reported that SVH experienced a computer issue at the end of January. Three board members and CNO, Sheila Adams, attended the Ovation board education event in February. Rural hospitals are facing challenging times regarding reimbursement issues. SVH is situated in a good position to deal with these issues currently and we will continue to be educated and think forward. Thank you all for your support of Sierra Visat Hospital, our patients and the employees.

B. October, November December Financials - Ming Huang, CFO, directed members to page JPC 17 of their packets. At the end of December, total cash on hand was \$5,131,298. In October, gross patient revenue was \$6,068,566. After subtracting deductions and adding other revenue, we ended October with total operating revenue of \$2,865,781. Total operating expenses were \$3,294,489 and we ended with a loss of (\$428,708). In November, gross revenue was \$5,958,328. Total operating revenue was \$2,928,971. Total operating expenses were \$3,025,023. November ended with (\$96,051). In December, gross patient revenue was \$5,742,437. Total operating revenue was \$2,904,387 and total operating expenses were \$2,973,480. December ended with (\$69,093). Year to date for the first six months of FY25, we have \$84,511 EBITDA.

C. Funds for EMS - Mayor Mortensen. Jim Paxon stated that this is for Rehab services as well. Mayor Mortensen expressed concern that the \$1.5 million received for these projects was only good for one year and that in the last report, this wasn't enough money. A modular concept alternative would cost around \$700,000 and Mayor Mortensen asked for further clarification on this project. Don Bates explained that several architects have been on site this week to submit RFPs for the build out project as per the master plan. The overall expense far exceeds \$1.5. The modular build would not meet CMS regulations. If we do not start using the funds by July, it will be harder for us to go back and get additional money. There are also concerns for the Medicare cost report. The square footage that you can be reimbursed for is hospital based and must be provided within the hospital footprint. A new building must be connected to the existing facility. If the new structure is a stand-alone, it would have to have a new address. When you have a new address, you must credential the new location with all payors. We are trying to get answers to all our questions as soon as possible. Ming stated that we published the RFP for the project two weeks ago. The architects have two weeks to submit their proposal. The committee will select the architect firm, there will be a protest period and most likely by the end of April this will be done. We will have another RFP to select the General Contractor which will take another one to two months to complete. The expiration date of the \$1.5 million is 2027 but we need to start drawing down those funds before July.

D. CEO Report - Dr. Don Bates, CEO, reported that in January, we received funds from SB 161 in the amount of \$1.5 million. We received close to \$800,000 from our Medicare cost report receivable and the employee retentions credit for \$2.85 million. In January, we started our DNFB with 11 days. The DNFB accounts are discharged but not final billed. They are held up for billing for various reasons. At the end of January, we got it down to 3.19 days. AR days at the beginning of January were 91 days.

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The national standard is 45 days or less and by January 21st we were down to 52 days. We received a couple of Rural Health Care delivery grants. One for \$541,000 to offset some of our behavioral health salaries and the other for about \$270,000 to expand our crisis response behavioral health team.

Zach Heard has taken on the role of Patient Experience Officer to help improve our public relation issues. We are reviewing our Community Health Needs Assessment and will move into the strategic planning phase and action plan. We are working with 3 Crosses including Dr. Kamali and Dr. Robinson to bring back surgical services. Dr. Mysore is an independent who is interested in doing colonoscopies here. There is a possibility of adding women's services and cardiology. Dr. Sardar may be interested in coming back as well. Our CHNA indicates that cardiology is the number one need in our community.

Discussion was held regarding Cerner, the Medicare cost settlement report receivable and monthly loss improvement.

Discussion was held regarding billing errors and issues.

Deb Stubblefield motioned to close the meeting for Executive Session. Magorie Powey seconded.

Chairperson, Jim Paxon read the following:

9. Executive Session – In accordance with Open Meetings Act, NMSA 1978, Chapter 10, Article 15, Section 10-15-1 (H) 7 the JPC will vote to close the meeting to discuss the following items:

10-15-1 (H) 7 – Attorney Client Privilege / Pending Litigation

A. EHR Outage Update

Aaron Dow, CIO

Discussion

Roll call vote:

Phillip Mortensen- Y

Cathy Harmon- Y

Travis Day- Y

Kim Skinner- Y

Ingo Hoepfner- Y

Jim Paxon- Y

Majie Powey- Y

Rolf Hechler – Y

Deb Stubblefield - Y

10. Re-Open Meeting – As required by Section 10-15-1 (J), NMSA 1978 matters discussed in executive session were limited only to those specified in the motion to close the meeting.

10-15-1 (H) 7 – Attorney Client Privilege / Pending Litigation

A. EHR Outage Update

No Action

11. Other

Next meeting: June 19, 2025

12. Adjournment

Deb Stubblefield motioned to adjourn. Philip Mortensen seconded. Motion carried unanimously.

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JB _____
Jennifer Burns, Recording Secretary

_6/19/25_____

JP _____
Jim Paxon, Chairperson