

**BOARD OF COMMISSIONERS  
MEETING MINUTES  
MAY 27, 2021**

The Board of Commissioners of Franklin Foundation Hospital, Hospital Service District No. 1, St. Mary Parish, met in regular session at 6:00 p.m., May 27, 2021.

MEMBERS PRESENT

Allen Randle, Sr., Chairman  
Eugene Foulcard  
Don T. Caffery, Jr.  
Didi Battle  
Dr. Roland Degeyter  
Robert Judice, Jr.

ALSO PRESENT

Stephanie Guidry, CEO  
Ron Bailey, CFO  
Michelle Skillings, CNO  
Dr. Brian Baesler  
Joyce Andrico, Risk Manager  
Collette Vaccarella, Director of Business  
Office & Co-Director of Physician Services  
Bart Folsie, Chief Development Officer  
Tina Petry, Director of HIM  
Don Smithburg, SVP, CHC  
Sharon Procell, Executive Assistant

ABSENT

Robert Allain, II

Conference Call

Lanzi Meyers, Legal Counsel  
Russell Cremaldi, Legal Counsel

GUEST

Gayla Russo, CPA, Partner with Langlinais, Broussard & Kohlenberg

**I. CALL TO ORDER**

With a quorum present, the meeting was called to order by the Board Chairman, Mr. Allen Randle, Sr. at 6:02 p.m.

**II. INVOCATION**

Mr. Allen Randle, Sr. opened the meeting with a prayer.

**III. PLEDGE OF ALLEGIANCE**

Members recited the "Pledge of Allegiance".

**IV. PUBLIC COMMENT**

NONE

**V. OLD BUSINESS**

**A. Approval of Minutes – April 29, 2021**

**Ms. Didi Battle moved to approve the minutes of the Board of Commissioners meeting held on April 29, 2021, with Mr. Don T. Caffery, Jr. seconding the motion. The motion carried unanimously.**

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**B. Minor correction to March 25, 2021 minutes**

Ms. Sharon Procell reported that she made a minor error on the approved minutes from March 25, 2021. She stated the minor correction is when the meeting was adjourned it was not Dr. Roland Degeyter making the motion, it was Mr. Robert Judice, Jr. Ms. Procell requested that the Board approve the minor correction to the March 25, 2021 minutes.

**Mr. Eugene Foulcard made motion to approve the minor correction to the March 25, 2021, minutes with Ms. Didi Battle seconding the motion. The motion carried unanimously.**

**VI. MEDICAL STAFF REPORT**

**A. Credentials & Medical Executive Reports**

Dr. Brian Baesler reported on behalf of Dr. Kennan Buechter. He reported the recommendations of the Medical Executive Committee (the "MEC") to the Governing Board related to Credentialing and Privileging as follows:

**Initial Appointments:**

- **Amanda Berdon, PA-C – Advance Practice Professional (OrthoLa)**

Dr. Baesler requested that the Board approve the Initial Appointments.

**Ms. Didi Battle moved to approve the initial appointment of Amanda Berdon, PA-C - Advance Practice Professional (OrthoLa.) with Mr. Eugene Foulcard seconding the motion. The motion carried unanimously.**

Dr. Brian Baesler stated that MEC accepted the changes from Virtual Radiology Telemedicine to remove the following:

- **Yoskin Maurice, MD - Consulting – VRad**

Dr. Brian Baesler stated that MEC accepted the changes from Ochsner Telemedicine to remove the following:

- **Mark Taylor, MD – Consulting – Psychiatry**
- **Ramneeshe Baweja, MD – Consulting – Psychiatry**
- **Yusef Canaan, MD – Consulting – Psychiatry**
- **Harold McGrade, MD- Consulting – Neuro**

to Reappoint the following:

- **Eric West, MD – Consulting – Psychiatry**

to Add the following:

- **David Galaneau, MD – Consulting – Psychiatry**

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**B. Approved Policies & Procedures / Protocols / Orders**

- 1. Emergency Operation Plans**
- 2. Quality Improvement Plan**
- 3. Patient Safety Plan**
- 4. Ongoing and Focused Professional Practice Evaluation**
- 5. Occurrence / Incident Reporting**
- 6. Management of OB Hemorrhage Policy**
- 7. Stage 1, Stage 2, Stage 3 Protocol**
- 8. OB Labor Orders**

Dr. Brain Baesler stated that MEC approved the listed policies & procedures, protocols, and orders with minor changes and/or due for annual review. Dr. Baesler requested that the Board approve the listed policies & procedures, protocols, and orders.

**Dr. Roland Degeyter made motion to approve the Emergency Operation Plans, Quality Improvement Plan, Patient Safety Plan, Ongoing and Focused Professional Practice Evaluation, Occurrence/Incident Reporting, Management of OB Hemorrhage Policy, Stage1, Stage 2, and Stage 3 Protocol, and OB labor Orders with Ms. Didi Battle seconding the motion. The motion carried unanimously.**

**VII. NEW BUSINESS**

**A. Discuss and Approve:**

**1. Tax Millage Assessment for Calendar Year 2021**

Mr. Ron Bailey discussed the Tax Millage Assessment for Calendar Year 2021. He noted that the proceeds are estimated at \$2,240,516 net of an estimated uncollectible amount and the Assessor's pension contribution. He explained that the CY 2021 millage includes the 2013 Maintenance Tax at 3.100 mills and the 2019 Maintenance Tax at 10.000 mills for a total of 13.100 mills. Mr. Bailey explained that 2020 was a reassessment year and that as a result of reassessment, the 2013 Maintenance Tax that was originally 3.10 mills increased to 3.59 mills. Mr. Bailey noted that in order to levy the 3.590 maximum mills the Hospital would need to roll forward the millage and that historically the Hospital does not roll forward. Mr. Bailey requested that the Board approve the tax millage rates to be assessed for Calendar Year 2021.

Mr. Allen Randle opened the floor for Public Comments concerning the Tax Millage Assessment for Calendar Year 2020. There was no public comment.

**Ms. Didi Battle made motion to approve the Tax Millage Assessment for Calendar Year 2021 with Mr. Don T. Caffery, Jr. seconding the motion. The motion carried unanimously.**

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**2. Cost Report & Audit Report**

Ms. Gayla Russo, CPA, and partner with Langlinais Broussard & Kohlenberg CPAs (“LBK”) noted that the cost report was still in draft form awaiting a final adjustment that would be finalized after the meeting ahead of the required filing date. She advised that the Hospital was owed approximately \$367,000 from Medicare and approximately \$933,000 from Medicaid and the Medicaid MCOs.

Ms. Russo presented the Fiscal Year (“FY”) 2020 Audit report. She stated that her firm’s responsibility is to express an opinion on the financial statements based on their audit. Ms. Russo reviewed the statement of net position, the statement of revenues, expenses, and changes in fund net position and statement of cash flows for FY 2020. She stated her firm issued a clean opinion that indicates that the Hospital’s financial statements do not contain any material miss-statements. She noted that a clean opinion is the best that could be expected from the audit.

Ms. Russo then discussed the main line items on the Statement of Position (the balance sheet) noting that cash and cash equivalents was over \$8.9 million due to physician UPL, cost report settlements and patient revenue. She reported that amounts due from third party payors had increased from \$738,765 in FY 2019 to \$1,799,086 in FY 2020.

Ms. Russo reported that assets whose use is limited (restricted assets) was up to \$13.776 million in FY 2020 compared to \$10 million in FY 2019. The increase is due to receipts from the Full Medicaid Capacity grant. She reported the total assets were \$52.219 million in FY 2020 compared to \$38.560 million in FY 2019.

Ms. Russo discussed several items in the liabilities section of the statement. She noted the increase in the current portion of long-term debt. Ms. Falcon also noted that amounts due to third party payors \$2,611,855 in FY 2020 compared to \$885,000 in FY 2019. The increase is due to the amounts received under the CARES Act (also known as “stimulus” funds and “Provider Relief Funds”). She next discussed the components of net position and finished by noting a significant increase to \$52.219 million in FY 2020 compared to \$38.560 million in the prior year.

Ms. Russo briefly discussed the Statement of Revenues, Expenses and Changes in Net Position (the income statement) noting that the Hospital’s net position was up \$36,999,205 in FY 2020 compared to a \$30,293,362 in FY 2019.

Ms. Russo discussed the findings on internal control noting that there were the same two findings as in prior years: segregation of duties and audit adjustments. Ms. Russo again noted that in small hospitals it is difficult to maintain strict segregation of duties due to the small number of staff. She discussed audit adjustments again noting as in prior years that management uses its best judgement in recording FYE entries that estimate cost report amounts, but those amounts are not final until the cost report is completed.

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**Ms. Didi Battle made motion to approve the Cost & Audit Report with Mr. Don T. Caffery, Jr seconding the motion. The motion carried unanimously.**

**B. Discuss and Approve Capital Requests**

**1. Evident PURE Replication Server**

Mr. Bailey reported this request is to purchase an Evident PURE replication server and data storage. He stated the server resides at a secure data center and replicates the Hospital's live CPSI server in real time. He explained that if a server crashes the Hospital can redirect to the offsite server with minimal down time. He noted this server would also function as the live sever to provide business continuity as part of the Hospital's disaster recovery plan. He stated the total purchase price was \$62,031 and that the purchase was included in the approved FY 2021 capital budget. Mr. Bailey requested that the Board approve the purchase of the Evident PURE replication Server.

**Dr. Roland Degeyter made motion to approve the Evident PURE Replication Server with Mr. Robert Judice, Jr. seconding the motion. The motion carried unanimously.**

**2. GE Miniview Mobile C-Arm**

Ms. Stephanie Guidry reported on this request is for a GE OEC Elite Miniview model mobile C-Arm. She stated this unit will be used for smaller surgical cases while taking up much less room in the OR. She noted that the unit provides precise and clear imaging capability for small structures and will also reduce the use of the existing larger unit that should add to the current unit's useful life. She stated the total purchase price at \$57,000 and that this purchase was not included in the approve FY 2021 capital budget. Ms. Guidry requested that the Board approve the GE Miniview Mobile C-Arm.

**Dr. Roland Degeyter made motion to approve the GE Miniview Mobile C-Arm with Mr. Robert Judice, Jr. seconding the motion. The motion carried unanimously.**

**3. C-Arm Monitor Upgrade Kit and Laser Aimer**

Ms. Guidry reported this request is for a GE LCD monitor upgrade kit and a 9" laser pointer for the Hospital's large C-arm unit. She stated this upgrade will allow the unit to be used for total hip and other large-bone procedures and will also help to extend the current C-arm's estimated useful life. The total purchase price is \$13,536. Mr. Bailey noted that the request was included in the approved FY 2021 capital budget but at a lower amount. Ms. Guidry requested that the Board approve the C-Arm Monitor upgrade kit and laser aimer.

**Dr. Roland Degeyter made a motion to approve the C-Arm Monitor Upgrade Kit and Laser Aimer with Mr. Robert Judice, Jr. seconding the motion. The motion carried unanimously.**

**4. Stryker Camera Head, Scopes and Accessories**

Ms. Guidry reported that this request is to purchase a Stryker camera head and coupler kit with scopes and other accessories. She stated the unit is needed due to an increase in cases. She also noted that it is becoming more common that where

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there are three or more cases per day there is a need for faster turnover in the OR. This purchase would help with faster turnover. The total purchase price \$24,256. This purchase was not included in the FY 2021 approved capital budget. Ms. Guidry requested that the Board approve the Stryker camera head, scopes and accessories.

**Dr. Roland Degeyter made motion to approve the Stryker Camera Head, Scopes, and Accessories with Mr. Robert Judice, Jr. seconding the motion. The motion carried unanimously.**

**VIII. FINANCE REPORT**

**A. April 2021 Financial Report**

Mr. Bailey presented the Financial Report for April 2021, the seventh month of Fiscal Year ("FY") 2021. He reported that the Hospital recorded revenues in excess of expenses in the amount of \$86,695 for the month compared to budget of \$110,331.

Mr. Bailey discussed the April 2021 operating statement noting total patient revenue of \$3,706,929 was over budget for the month. He stated the April's total revenue was down (4.50%) compared to March but was up 13.43% compared to February 2021.

Mr. Bailey discussed total deductions from revenue that were \$105,143 over budget for the month of April noting that Medicare and Medicaid Adjustments were \$(3,995) under budget for the month. He advised also that the Hospital's Medicaid contractual adjustments were over budget for the month by a combined \$105,000 primarily due to increased contractual adjustments as a percent of cash receipts in April. He noted, as previously discussed, each month's Medicaid adjustments include a reduction of (\$194,197) for FY 2021 budgeted Physician Rate Enhancement Funds ("PREP") UPL program.

Mr. Bailey reported that other operating revenues were (7.86%) under budget for April. He explained the decrease is primarily due to a reduction in the estimated monthly accrual UPL (formerly DSH). As previously discussed, in March the Hospital received the first FY 2021 rural UPL payment that represented six months of the state's current fiscal year. He noted that based on that receipt the fiscal year total was estimated to be lower than budget and as such he reduced the monthly accrual to match the new estimated total.

Mr. Bailey discussed the balance sheet for April 2021 noting that operating cash was \$4,976,670, a decrease of (\$1,757,976) from the prior month. He reported included in April's operating cash was \$220,081 of rural UPL for December and \$75,635 of millage and state revenue sharing. He reported in the operating cash in April also includes \$56,061 of funds transferred from Medicare Accelerated and Advance Payment funding to operating cash. In addition, the Hospital made a (\$591,816) IGT under the physician UPL program; he noted that the funds were returned as part of a physician UPL receipt in May 2021.

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Mr. Bailey noted days cash on hand in April were 122.4 days compared to 144.9 days of cash at the end of the prior month.

**Mr. Robert Allain, II made a motion to approve the March 2021 Financial Report with Mr. Eugene Foulcard seconding the motion. The motion carried unanimously.**

**B. Reimbursement Requests from Restricted Funds**

Mr. Bailey discussed Reimbursement Request #4 for the Wellness Center project. The funds for the Wellness Center project are restricted to that purpose and as such require Board approval to transfer funds to the operating account. Mr. Bailey stated that the current request totals \$270,685.23.

**IX. QUALITY COMMITTEE REPORT**

**A. Organizational Quality Data – Ms. Joyce Andrico, Director of Quality**

Ms. Joyce Andrico gave a presentation of Quality Data.  
(see attached presentation for details)

**Ms. Didi Battle made motion to approve the Quality Data Report with Mr. Robert Judice, Jr. seconding the motion. The motion carried unanimously.**

**X. MANAGEMENT REPORTS**

**A. Administration Report – Ms. Stephanie Guidry, CEO**

- Medical Staff Development Plan in process with CHC, ongoing
- Thibodaux Regional Medical Center, Mr. Greg Stock, CEO in discussions related to specialty coverage in Franklin ongoing
- Wellness Center – DonahueFavret is working on the dirt pad; rain slowing down the process
- Wellness Center – Executive summary being presented to the Secretary of Health to do a pre/post evaluation of the Wellness Center on the overall improvement of the health of our community. Funding available
- We have reinstated Senior Huddles weekly
- Productivity Program
- CHC Inventory Control, Material Management, Pharmacy and Surgery
- Several Community Events coming up – 100 Black Men Health Fair, Why Fitness Triathlon
- Donation to India
- Open the café - June 1<sup>st</sup>
- Dr. Patricio Lucio – here July 1<sup>st</sup>
- Phone interviewed with Dr. Yanick Ekortarh, (2<sup>nd</sup> year)
- Dr. Taylor Phillipi – she has accepted – working on contract
- See CEO report for details

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**B. Nursing Report – Ms. Michelle Skillings, CNO**

- Reduction in COVID-19 activity this past month
- COVID-19 positivity rate is 6.10% for St. Mary Parish
- Total of 5,789 vaccines have been administered
- ED – with NRC Health – educate on opportunities for improvement
- Med/Surg – Acuity and needs of the patients continue to be high
- New case manager – Joshua Abshire – started May 24<sup>th</sup>
- Respiratory – team has been very busy with COVID-type patients (utilizing more vapotherm and BiPap)
- Physical Therapy – volumes continue to be
- See CNO report for details

**C. Clinic Report – Ms. Collette Vaccarella**

Ms. Vaccarella discussed the clinic report for April noting a decrease in clinic accounts receivable compared to the prior month. She discussed clinic visit for April were up from the prior year. Mr. Bailey presented the consolidated clinic cost center income statement noting that the clinics posted a consolidated loss for the month. Mr. Bailey also discussed the Hospital activity generated by the clinic physicians.

**D. Marketing Report – Mr. Bart Folsie, Chief Development Officer**

Mr. Bart Folsie gave a little bio of himself. Him and his wife just welcomed their baby girl. He stated to the Board his ninety (90) day Goals which will be (1) define the metrics that make his department successful (2) streamline processes to make his department run more efficiently and effectively (3) create one year marketing plan and goals based on measures of success. He briefly explained about “rebranding”.

**E. CHC Management Report - Mr. Don Smithburg, CHC Sr. VP Hospital Operations**

See the CHC Board report for details.

Mr. Don Smithburg deferred his report for Executive Session.

**Mr. Robert Judice, Jr. made a motion to accept the Management Reports with Mr. Don T. Caffery, Jr. seconding the motion. The motion carried unanimously.**

**XI. EXECUTIVE SESSION**

**Mr. Robert Judice, Jr. made a motion to move into Executive Session at 7:17 p.m. with Mr. Don. T. Caffery, Jr. seconding the motion. The motion carried unanimously.**

- A. Compliance Report**
- B. Strategic Planning**



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With no further business to discuss in Executive Session, a motion was made by Mr. Robert Judice, Jr. and seconded by Ms. Didi Battle to exit Executive Session at 7:27 p.m. The motion carried unanimously.

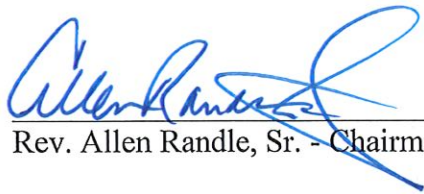
**XII. ACTION(S) TAKEN**

**A. Compliance Report**

Dr. Roland Degeyter made a motion to approve the Compliance Report with Mr. Don T. Caffery, Jr. seconding the motion. The motion carried unanimously.

**XIII. ADJOURN**

With no further business to discuss, Mr. Robert Judice, Jr. moved with Ms. Didi Battle seconding the motion to adjourn at 7:33 p.m. The motion carried unanimously.

  
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Rev. Allen Randle, Sr. - Chairman

  
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Stephanie A. Guidry, CEO