

TRMC Board of Managers

Meeting Minutes

May 21, 2025

The Titus County Hospital District Board of Managers met for a regularly scheduled meeting on Monday, Wednesday, May 21, 2025, at 5:30PM in the Williams Conference Room on the 3rd floor of Titus Regional Medical Center in Mount Pleasant, TX.

ATTENDEES: Don Lowry, Rob Holliday, Kevin Rose, Trent Abbott, Steve Courreges, Ricky Baker, Jeff Drummond, Patricia Boeckmann (CEO), Dr. Milan Sekulic (CPE), and Dr. William Hooks (CMO)

ADMINISTRATION: Kathy Griffis (COO/CNO), Andy Fortenberry (CFO), Tracie Smith (Sr Director Marketing), Kim Parrish (Revenue Cycle)

VISITORS: Shirley Dickerson (Titus County Chief Appraiser), Dr. Stephen Sigal (Cardiology), Meagan Barrett (RN/ICU Director)

ABSENTEES: Tony Rundles, Dr. James Bove (COS)

CALL TO ORDER: Don Lowry called the meeting to order at 5:34PM.

Opening prayer was officiated by Dr. William Hooks. The Pledge of Allegiance was led by Andy Fortenberry.

CONSENT AGENDA

- I. Approval of Minutes of TCHD Regular Board Meeting – 4/28/25
- II. Approval of Minutes of TCHD Called Board Meeting – 5/5/25
- III. Approval of Finance Committee Recommendation of Minutes of the TCHD Board Finance Committee Meeting – 4/24/25
- IV. Discussion, Consideration, and Action Regarding Recommendation of MEC for Medical Staff Privileges including approval of Gastroenterology and Hyperbaric Oxygen Therapy, Nurse Practitioner Delineation of Privileges
- V. Executive reports – current month
- VI. TRMC Finance Report
 - a. Presentation of Financial Report as of April 30, 2025
 - b. Discussion, Consideration, and Approval of Finance Committee Recommendation to Approve April 2025 Financial Reports
- VII. Patient Experience – QAPI current month
- VIII. 2025 Infection Prevention Risk Assessment
- IX. Community Health Needs Assessment

 Don Lowry asked for a **motion** to approve the Consent Agenda listed above.

 **Motion:** A **motion** was made by Trent Abbott and seconded by Ricky Baker to approve the listed Consent Agenda items. The motion carried with a unanimous vote.

❖ **PUBLIC COMMENTS FROM REGISTERED VISITORS**

- Shirley Dickerson, Titus County Chief Appraiser, presented a refund check to Titus County Hospital District in the amount of \$12,796.40. The check was accepted by Patricia Boeckmann, CEO.

❖ **RECOGNITION AND APPRECIATION OF TRMC TEAM MEMBERS**

- Dr. Stephen Sigal and Meagan Barrett were recognized by Patricia Boeckmann, Kathy Griffis, and Dr. William Hooks for their participation in the Artemis trial
- Dr. Stephen Sigal provided insight into the Artemis trial and its importance. The trial is multi-national and includes novel anti-inflammatory agents vs placebos to produce positive outcomes; the trial will take approximately two years to complete; future participation by Dr. Abbas, Dr. Black, and Teresa Townes
- Meagan Barret was involved in a site visit on 5/20 and reported that it went very well
- The American Heart Association has asked the Cardiology team to join in another effort over the next three years regarding heart failure
- Kathy Griffis was featured in the Mount Pleasant Tribune; she was approached by a reporter from New Boston that wanted to write an article regarding her promotion to Chief Operating Officer

❖ **UPCOMING AND PAST EVENTS/MARKETING UPDATES**

- Upcoming Events
 - Priefert Ranch Open – 5/27-5/31
 - Kids Safe Saturday – 5/31
 - Coffee Chat – 6/4 and 6/18
 - Titus Regional Medical Foundation Gala – 6/7
 - Lunch and Learn – 6/11
 - Pilgrims Health Fair – 6/14
 - Baby Fair – 6/28
- Past Events
 - 1st Annual Cinco de Mayo Health Fair
 - TRMC Team takes 1st place in 10th annual Cinco de Mayo Mount Pleasant Soccer Tournament
 - Hospital Week Celebration
 - Nurses Week Celebration
 - Skills Fair

❖ **NEW BUSINESS**

- Conflict of Interest Statement - Each member of the board and members of the executive team received their annual conflict of interest disclosure form to sign
- Board Education – Artemis study protocols

❖ **OPERATIONS UPDATES**

- Business opportunities
 - TRMC is not moving forward with Reyes building purchase opportunity
 - Minadeo property – pending additional details
 - Downie building – will list in July dependent on VMG process or possible lease agreement with 3rd party
 - Cancelled Internal Medical Rural Residency Program
 - Three pulmonology candidates declined their offers; suspending search and will work with intensivists to provide coverage
 - Offer letter was signed by Dr. Mark Smith (Neuro/spine)
 - Operations improvements, expense management – operating margin above \$0 for the first time; hugely impacted by expense control measures

❖ **BOARD RESOLUTION – QIPP**

- Quality Incentive Payment Program – Texas based program designed to encourage nursing facilities to improve quality and innovation of their services.
- Potential annual income of \$200k with little TRMC administrative oversight

👉 Don Lowry asked for a **vote** to approve the QIPP Board Resolution. The resolution passed with a unanimous vote.

❖ **REVENUE CYCLE OPTIMIZATION**

- Revenue Cycle Plan Status
 - Completed this period – current Rural Health Clinic claims released, OR/endo and ED charge capture, CRNA rate increase, expanded CDI (clinical documentation improvement) to all payers, referral processes
 - Referral process – central support area; 7 days was previous standard but have decreased to 1.6 days
 - Ortho clinic lost surgery scheduler but position will move under centralized support services; position will work on scheduling and prior authorizations
 - Goal for prior authorizations is no more than 5 days; same day goal is 70% and currently in the 50% range
 - Working on more than \$1M in held claims
- Centralized Support Services
 - Top three impact areas – rapid task shifts (interruptions in workflow), constant HMO primary care provider changes, diagnosis errors delay authorization
- HB Key Performance Indicators
 - Exceeded cash target by 12%
 - Andy and Kim created a calculation for a rolling three-month target
 - Cash as a percentage of gross profit decreased by 2.3%, mostly due to price increase

- Below target in gross accounts receivable days, self-pay AR days, and percent of AR > 90 days attributed; progress is being made with self-pay automation (on new accounts); backlog to be cleaned up by end of month; overall denial rate is decreasing
- PB Key Performance Indicators
 - Exceeded cash target by 11%; rural health claims going out will continue to drive this figure up
 - Unbilled days increasing primarily due to open encounters; clean up of self-pay/bad debt will decrease receivable days
- TRMC Benefit Progress
 - Cash improvement goal – currently at \$1.8M
 - Net revenue improvement goal – currently at \$1.08M
 - Progress the result of less denials and clinical documentation
- ❖ **CLINICAL REVENUE CYCLE IMPROVEMENTS/UTILIZATION MANAGEMENT**
 - Length of stay down from 3.4 to 3 days
 - Cost of stay for 24 hours is approximately \$1K
 - Length of stay reduction results in a savings of \$105K per month
 - Reduction in transfers of almost 15%
 - ER documenting critical care charges
 - Focus on conversion of observation to inpatient on 4th and 5th floors
- ❖ **QUALITY IMPROVEMENT/STERILE PROCESSING**
 - Report made to Joint Commission and HHSC of rust in lumened instruments in OR
 - Implementation of interim “instrument plan”
 - HHSC and Joint Commission determined there was no “immediate jeopardy”
 - Consulting company brought in to assist with plan
 - Creation of new position for Manager of Sterile Processing and Purchasing
 - Costs include ACL Tray \$17K, consultants \$6K, and minor equipment \$2K
 - Likely to incur additional \$57K in costs for water treatment system and other unknowns to ensure issue is corrected
- ❖ **PATIENT EXPERIENCE**
 - Emergency Department patient experience has been steadily increasing
 - Meetings occurred with individual providers and tools discussed to continue increasing patient experience scores
- ❖ **OVERTIME REDUCTION**
 - Overtime reduction has made a huge impact on the bottom line
 - Overtime percentage of productive hours - 3.04% vs goal of \leq 3%
 - Overtime percentage of productive dollars – 3.59% vs goal of \leq 3%
 - Cannot eliminate all overtime, as some overtime is built in

❖ FTE ANALYSIS

- Initial analysis shows that 9 clinics are overstaffed and 5 are understaffed; outlier is CCC
- Imaging has 5 overstaffed and 4 understaffed; outlier is ortho x-ray but needed for throughput
- OR has 4 overstaffed and 2 understaffed; outlier is cath lab which has low productivity but highest clinical impact
- Inpatient tower needs further analysis due to staffing/floating/time allocation model for all inpatient units
- Opportunity to increase volumes in clinics

❖ CHIEF MEDICAL OFFICER UPDATE

- Cost mitigation strategies
 - Transition from Microsoft Office 365 to Google Workspace – annual savings \$152K; immediate savings of \$48K
 - Google Workspace – increased savings will be realized as removal of licenses for Microsoft add-on applications occurs (Teams, Zoom, DocuSign, DuoMFA)
 - Anesthesia – contract savings of \$461K in June 2025; if additional anesthesiologist is hired, potential for additional \$806K annually

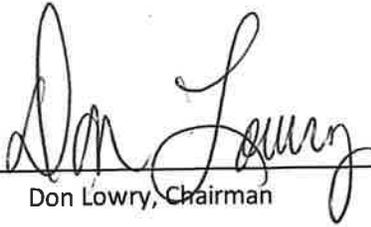
❖ REFERRALS

- Top 10 providers show decrease in out-referral trending
- Most providers referring outside of TRMC are TRMG primary care providers
- Reasons for referrals out of TRMC
 - Services are not provided at TRMC
 - Potential opportunities – HMO patients previously established with outside provider and non-HMO patients who prefer to be referred to an outside provider
 - Opportunities – personal reference by the referring provider, prolonged wait time to be seen by TRMC providers, and perceived suboptimal quality of provider service or care at TRMC
- Value of referrals out of TRMC
 - Physical therapy – annualized opportunity of \$886K
 - General surgery – annualized opportunity of \$227K
 - Additional opportunities in orthopedic surgery, cardiology, and GI
 - Value doesn't take into account expenses which reduces opportunity to about \$500K annually
- Texarkana providers' practice growth
 - Cardiology – slight increase over prior month, with two less clinic days
 - General surgery – all providers showing steady increase in workload within the last three months; Dr. Peterson and Dr. Kincaid increase in workload partly due to transition of Dr. Cuenca's patients
 - Neurology – workload is showing steady growth
 - Clinic encounters continue to increase across all lines

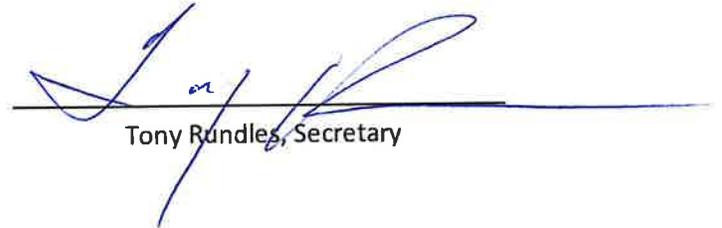
EXECUTIVE SESSION: The Board convened to Executive Session at 7:03PM with a unanimous vote.

REGULAR SESSION: Regular session reconvened at 8:09PM with a unanimous vote.

ADJOURNMENT: Regular session adjourned at 8:09PM with a unanimous vote.



Don Lowry, Chairman



Tony Rundles, Secretary