

# **TRMC Board of Managers**

## **Minutes**

March 31, 2025





The Titus County Hospital District Board of Managers met for a regularly scheduled meeting on Monday, Monday, March 31, 2025, at 5:30PM in the Williams Conference Room on the 3<sup>rd</sup> floor of Titus Regional Medical Center in Mount Pleasant, TX.

**ATTENDEES**: Don Lowry, Tony Rundles, Rob Holliday, Kevin Rose, Trent Abbott, Steve Courreges, Patricia Boeckmann (CEO), Dr. James Bove (COS), Dr. Milan Sekulic (CPE), and Dr. Will Hooks (CMO)

ADMINISTRATION: Kathy Griffis (COO/CNO), Andy Fortenberry (CFO)

VISITORS: Tracie Smith, Dr. Christopher Mason, Nichole Quezada, Mia Rundles, Holly Parr, Jaime Hart

ABSENTEES: Ricky Baker

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

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

#### **CONSENT AGENDA:**

#### Recommendations

- I. Approval of Minutes of TCHD Regular Board Meeting 2/24/2025
- II. Approval of Minutes of TCHD Called Board Meeting 3/6/2025
- III. Approval of Finance Committee Recommendation of Minutes of the TCHD Board Finance Committee Meeting -2/21/2025
- IV. Approval of Minutes of Joint Conference 2/25/2025
- V. Approval of Opening Accounts and Signers for Bond Series 2025 Pilgrim Bank
- VI. Discussion and Consideration regarding Reduction in Overtime Expenses
- VII. Approval of DSHS EMS/TS Uncompensated Trauma Care Application Discharged Patients Data Calendar Year 2023
- VIII. Discussion, Consideration, and Action Regarding Recommendation of MEC for Medical Staff Privileges

#### **REPORTS**

- 1. Executive reports current month
- II. Patient Experience QAPI current month
- III. Utilization Management
  - Don Lowry asked for a motion to approve the Consent Agenda listed above.
  - Motion: A motion was made by Steve Courreges and seconded by Tony Rundles to approve the listed Consent Agenda items. The motion carried with a unanimous vote.



#### \* RECOGNITION AND APPRECIATION OF TRMC TEAM MEMBERS

- Kathy Griffis introduced the Maternal team and their involvement in recent surveys
  - Dr. Mason, Nichole Quezada, Mia Rundles, Holly Parr, and Jaime Hart
  - Team achieved a zero-deficiency survey
- Dr. Hooks recognized the team's efforts with designations and how they helped in the development of training simulations for other departments
- Dr. Mason recognized Nichole Quezada and Mia Rundles for their efforts, as well as the support received from the Administration team
  - Feedback from surveyors included praise for all departments and Administration involvement
  - Maternal team provided gratitude for staff and support which aided in the success of the survey and provided the team with a blueprint to success for future surveys
- o Dr. Bove and Don Lowry expressed their gratitude to the team for all of their hard work
- Megan Knight named Social Worker of the Year by Greater East Texas Marketing Association

### ❖ UPCOMING AND PAST EVENTS/MARKETIN UPDATES

- Doctor's Day Celebration 4/1
- Coffee Chats 4/2 and 4/16
- Chamber Ranch Run 4/5
- Lunch and Learn 4/9
- AHA Celebration 4/22
- Social Media (Facebook) Increase in new likes, total reach, and content interactions
- Pounds Down Finale

#### **❖** FOUNDATION BOARD

- Grand Gala "Out of This World" on 6/7; benefitting the Pediatric Unit
- Foundation Board of Directors
  - Election of new Board of Directors for any that are not returning; Don Lowry is stepping down from his role on the Foundation Board
  - Board will convene in June to plan for 2025-2026

#### **❖** CHIEF OF STAFF UPDATE

- Dr. James Bove provided the medical staff update
  - Block time will start on 4/1 which helps in optimization of OR time
  - Potential for neuro-spine surgeon add to staff
  - Dr. Sigal has been appointed as the program director for the Internal Medicine program
  - Working on medical staff privileges for gastrointestinal doctors from Sulphur Springs
  - Organizational chart updates provided to team members
- Kathy Griffis and Dr. Bove discussed the roll out of the three-way call system between the Emergency Department, hospitalists, and specialists with a goal of minimizing transfers

#### **\* TRMG PRESIDENT UPDATE**

- Dr. Sekulic provided updates for Titus Regional Medical Group
  - The Cause clinical excellence, accountable performance, and compassionate care
  - Continued focus on accountable performance "what we do"; we all play a role in the success of TRMC



- Foster a culture of accountability across the organization; intention focused on accountability loop vs victim loop
- Provider accountability culture, production (wRVU), referrals, and patient access
- Referrals keep referrals within the organization if possible; data is being reviewed to determine process gaps

#### **❖ NEW BUSINESS**

- Epic contract build load of all of our contracts into EPIC for more visibility into patient and procedure costs
- Rural Hospital Grants
  - Rural Hospital Improvement provides time-limited financial support during the term of the grant agreement for any qualified Rural Hospital in Texas to support hospital improvement activities aimed to improve the financial stability of the hospital
    - Deadline is 4/9
    - Estimated maximum reward amount \$350K
  - Rural Hospital Labor and Delivery provides time-limited financial support during the term of the grant agreement for any qualified Rural Hospital in Texas to sustain and improve their inpatient labor and delivery services
    - Deadline is 4/8
    - Estimated maximum reward amount \$250K
- CHNA (Community Health Needs Assessment)
  - Discovered this assessment is not a requirement but TRMC will continue to utilized this survey to improve patient experience
  - Received almost 900 responses so far and survey closes on 4/8
  - Estimated publication in June 2025

#### **❖ FINANCIAL UPDATE**

- Andy Fortenberry provided February's Financial Results
  - Hospital admissions acute YTD down 20% from budget; overall admissions down 16% from budget; current month up 6% from prior year
    - Behavioral health unit intentional limit in February and March due to patient issue
    - Labor and Delivery national statistics trending down on number of births
  - Surgery volume YTD down 10% from budget and down 9% from prior year
    - Cath lab down 26%
    - Staff reduction of two surgeons impacted volume as well as decreased volume for one surgeon
    - Impact of irrigation/IV shortage; Urology impacted significantly more than other areas
  - Imaging volume YTD up 1% from budget and down 4% from prior year
    - Catastrophic MRI failure impact to budget and 8 week down time



- Salaries
  - Over budget in physician line item due to additions of doctors in January
  - Agency salaries continue to decrease
  - Severance payment impact
- Professional fees \$1.5M February actual
- Supplies increase due to COVID, strep, and flu tests; medical costs impacted by chemotherapy drugs
- Don Lowry asked for a vote to approve February's Financial Results as presented. The vote carried unanimously.

## ❖ REVENUE CYCLE IMPROVEMENT/OPERATIONS ACTIONS

- Benefit progress
  - Cash improvement goal \$4M
  - Net revenue improvement goal \$2.6M
  - Improvements needed and identified in self-pay new plan year with unmet deductibles, manual bad debt process, unapplied or inappropriately applied payments
  - \$477K improvement untimely filing write-offs, increase CDI outcomes, improvement is emergency department level charge capture
- Hospital Admissions
  - Implementation of transfer mediation process to improve acute capture
  - Implementation of ED/Hospitalist expectations document and roll out and enforcement
  - Assessment of referrals and consultation process and development of plan for targeted improvement
- Emergency department patients converted to admissions
  - Average conversion rate for rural hospitals is 13-18% of patients with high performing hospitals at 20-30%
  - TRMC first pass goal of 16% and stretch goal of 20%
  - Executive team goals review of three-month trend for transfers with exclusions
- Surgery Volume
  - Optimize general surgery volume via service line development; dyad implementation
  - Alignment of physicians with organizational goals
  - Focus on marketing efforts for general surgery
  - Sorenson and Peterson completing complex abdominal/bowel surgeries with low length of stay due to the type of surgery performed
  - Surgery Dyad goals include improved access, increased surgery volume, decreased transfers, and cost reduction in the operating room
  - Referrals out of system
    - Dr. Sekulic provided preliminary figures for January 1, 2024 to present
    - Analyze types of referrals outside of TRMC
  - Third next available appointment improvement of access to the providers with goal of single digit days for specialists and zero for primary care



- Reviewing all clinics and developing scorecards for each TITUS REGIONAL MEDICAL CENTER
- Emphasis on team care approach

#### Salaries

- Span of control analysis
- Evaluation of vacancy factor by department and establish new staffing standards
- Analyze medical director payments and return on investment
- Focus on minimizing overtime costs

#### Professional Fees

- Replacement of locums providers with permanent providers and analyzation of cost/benefit
- Analyzation of provider spend and return on investment
- Evaluation of contracts vs market
- Analysis of imaging, hospitalists, intensivists, and specialty tele services
- Target completion of revenue cycle infrastructure and exit of consultants beginning of FY 2026

#### Anesthesia evaluation

- Cost analysis received for FYs 2022, 2023, 2024, and FYTD 2025
- Analysis of actual cost compared to the market
- Analyze costs of outsourcing vs costs of keeping internal and recommendations based on findings
- Contracting directly with anesthesia providers vs using agencies
- Reduction in utilization based on contract expense

#### Purchased services

- Analysis of all vendor relationships in excess of \$100K
- Researching potential new linen service vendor
- Maintenance service contracts comprised of software and hardware providers

#### Supplies

- Removal of lower-level approval process and tight control on all purchases
- Engagement of physicians in cost containment efforts
- Continue with Value Analysis Team process (VAT) led by Dr. Hester
- Implementation of project evaluation process and evaluation of all projects in flight

**EXECUTIVE SESSION**: The Board convened to Executive Session at 6:52PM with a unanimous vote.

**REGULAR SESSION**: Regular session reconvened at 7:47PM with a unanimous vote.

**ADJOURNMENT**: Regular session adjourned at 7:48PM with a unanimous vote.

Tony Rundles, Secretary