



**Board Meeting Agenda
January 31, 2022 at 6:30 p.m.**

In Person	Pioneer Memorial Clinic - Conference Room 130 Thompson Street, Heppner, OR 97836
Zoom	https://us06web.zoom.us/j/86979977050?pwd=UjNReGpXRWFYT1NxckhnOGQyTHprQT09 Audio Only: +1-669-900-6833 Meeting ID: 869 7997 7050 Passcode: 472872

1. Call to Order

2. Public Comments

Maximum of 3 minutes per person/topic. Multiple items on the same topic need to be combined through one speaker. A maximum of 30 minutes may be allotted for public comment.

3. Approval of Meeting Minutes

- A. November 29, 2021 – Regular Session
- B. January 5, 2022 – Special Session

4. Promise of Excellence Review – John Murray

5. Chief of Staff Report – Dr. Ed Berretta

6. CEO Report – Emily Roberts

7. CNO Report – Kathleen Greenup, RN

8. HR Director Report – Patti Allstott

9. Financial Report – Nicole Mahoney

10. New Business

- A. Pipeline Pharmacy Agreement
- B. Nurse Practitioner Services Agreement
- C. Board Designated Funds
- D. Behavioral Health Consultant Position at Pioneer Memorial Clinic
- E. Physician Compensation

11. Old Business

12. Adjourn



MORROW COUNTY HEALTH DISTRICT

Excellence in Healthcare

Board of Directors Meeting Minutes

Meeting Information		Committee Members		
Meeting Date/Time:	November 29, 2021 @ 6:30 p.m.	Board Members:	John Murray, Carri Grieb, Aaron Palmquist, Marie Shimer, Diane Kilkenny	
Location	Pioneer Memorial Clinic 130 Thompson Ave Heppner, OR 97836	Guests:	Staff Members: Emily Roberts, Nicole Mahoney, Sam Van Laer, Patti Allstott, Molly Rhea, Danielle Mateleska, Betsy Anderson (Zoom), Todd Schmidt (Zoom) Guests: David Imus, WIPFLI, Eric Volk, WIPFLI (Zoom) Press: None	
Video Dial In:	Zoom	Leader:	John Murray, Board Chairman	Recorder: Jodi Ferguson

Vision:
Be the first choice for quality, compassionate care and lead the way in promoting wellness and improving health in Morrow County

Mission:
Working together to provide excellence in healthcare

Values:
Integrity, Compassion, Quality, Respect, Teamwork, Financial Responsibility

Agenda Item	Notes/Minutes
1. Call to Order	<ul style="list-style-type: none"> Chairman John Murray called the meeting to order at 6:30 p.m.
2. Public Comments	<ul style="list-style-type: none"> None.
3. Approval of Minutes	<p>MOTION: Marie Shimer moved to approve the minutes for the October 4 and October 5, 2021 work session and October 25, 2021 regular session meeting minutes as presented. Carri Grieb seconded the motion. The motion passed unanimously by all board members present.</p>
4. Promise of Excellence Review	<ul style="list-style-type: none"> John Murray reviewed some of the topics of the District's Promise of Excellence.
5. Presentation of 2021 Audit	<ul style="list-style-type: none"> David Imus, WIPFLI presented the 2021 MCHD audited financials. <p>MOTION: Aaron Palmquist moved to approve the 2021 audited financials as presented. Carri Grieb seconded the motion. The motion passed unanimously by all board members present.</p> <ul style="list-style-type: none"> The single audit is not due until 03/31/2021 and is not yet completed.
6. Medical Staff Report	<ul style="list-style-type: none"> Betsy Anderson stated that the medical staff report is included in the CEO report.
7. CEO Report	<ul style="list-style-type: none"> CEO report was presented by Emily Roberts (see board packet).
8. CNO Report	<ul style="list-style-type: none"> CNO report by Kathleen Greenup is included in the board packet.
9. HR Director Report	<ul style="list-style-type: none"> HR Director Report was presented by Patti Allstott (see board packet).

10. Financial Report	<ul style="list-style-type: none"> Financials for October were presented by Nicole Mahoney. The district had a \$101,850 loss for the month.
11. New Business	
A. Appointment to Medical Staff – Dr. Lion	<ul style="list-style-type: none"> Emily presented a permanent appointment to medical staff for Dr. Rio Lion. <p>MOTION: Aaron Palmquist moved to approve the appointment of Rio Lion to medical staff. Diane Kilkenny seconded the motion. The motion passed unanimously by all board members present.</p>
B. Professional Service Agreement – Imaging Center or Idaho	<ul style="list-style-type: none"> Emily presented the service agreement with Imaging Center of Idaho. Emily is requesting to be able to negotiate the service agreement. <p>MOTION: Aaron Palmquist moved to approve the service agreement with Imaging Center of Idaho and to allow Emily Roberts to negotiate the agreement on behalf of MCHD. Diane Kilkenny seconded the motion. The motion passed unanimously by all board members present.</p>
C. Nurse Practitioner & Physician Services Agreements for Hospice	<ul style="list-style-type: none"> Emily presented Nurse Practitioner Service Agreements for Eileen McElligott and Joyce Barklow and a Physician Service Agreement for Dr. Seals for hospice for approval. <p>MOTION: Aaron Palmquist moved to approve the service agreements for Eileen McElligott, Joyce Barklow, and Dr. Seals contingent on medical staff privileges approval. Carri Grieb seconded the motion. The motion passed unanimously by all board members present.</p>
D. Merritt Hawkins Recruiting Contract	<ul style="list-style-type: none"> Emily presented a recruiting contract with Merritt Hawkins. <p>MOTION: Carri Grieb moved to approve the recruiting contract with Merritt Hawkins as presented. Marie Shimer seconded the motion. The motion passed unanimously by all board members present.</p>
E. CEO Contract	<ul style="list-style-type: none"> Carrie Grieb noted that the CEO interim contract is due to expire and the board wishes to take next steps to execute a permanent contract. <p>MOTION: Carrie Grieb moved to offer a permanent CEO contract to Emily Roberts giving John Murray and Marie Shimer the authority to negotiate and execute a contract based on the draft contract previously approved by the District’s legal counsel. Aaron Palmquist made an amendment to consider modifications to the contract per his notes to the board. Carrie Grieb accepted the amendment and added that the contract should be executed within the next two weeks. Diane Kilkenny seconded the motion. The motion passed unanimously by all board members present.</p>
F. 2022 Board Meeting Schedule	<ul style="list-style-type: none"> Emily presented the 2022 board meeting schedule. There was discussion about whether the provider dinners should continue to occur in 2022. The board and provider relationship is important, but a different time and place with a strategic goal in mind may better allow the fostering of this relationship. Emily will present a plan in a future meeting.
12. Old Business	
Irrigon Ambulance Hall	<ul style="list-style-type: none"> Aaron would like Emily to find out what the next steps are to acquire the property for the Irrigon ambulance hall.
13. Adjourn	<p>With no further business to come before the board, the meeting adjourned at 8:32 p.m.</p> <p>Minutes taken and submitted by Jodi Ferguson.</p> <p>Approved_____</p>



MORROW COUNTY HEALTH DISTRICT

Excellence in Healthcare

Board of Directors Meeting Minutes

Meeting Information		Committee Members			
Meeting Date/Time:	January 5, 2022 @ 12 p.m.	Board Members:	John Murray, Carri Grieb, Aaron Palmquist, Marie Shimer, Diane Kilkenny		
Location	Pioneer Memorial Clinic 130 Thompson Ave Heppner, OR 97836	Guests:	Staff Members: Emily Roberts, Nicole Mahoney, Kathleen Greenup, Troy Soenen (Guest) Press: None		
Video Dial In:	Zoom	Leader:	John Murray, Board Chairman	Recorder:	Emily Roberts

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Agenda Item	Notes/Minutes
1. Call to Order	<ul style="list-style-type: none"> Chairman John Murray called the meeting to order at 12:03 p.m.
2. Executive Session	<ul style="list-style-type: none"> John Murray declared a conflict for the topic to be discussed in executive session and excused himself from attendance. Executive session convened at 12:06 p.m. under ORS 192.660(2)(f) to consider information or records that are exempt from public inspection.
3. Open Session	<ul style="list-style-type: none"> Open session reconvened at 12:45 p.m. John Murray rejoined the meeting.
A. Physician Contract	<ul style="list-style-type: none"> Emily Roberts presented a revised physician services agreement for Dr. Rio Lion. <p>MOTION: Carri Grieb moved to approve the contract with permission for CEO to have latitude to negotiate terms. Diane Kilkenny seconded the motion. The motion passed unanimously by all board members present.</p>
4. Adjourn	<p>With no further business to come before the board, the meeting adjourned at 1:00 p.m.</p> <p>Minutes taken and submitted by Emily Roberts.</p> <p>Approved _____</p>

Welcome and Good Evening,

I have prepared a brief commentary for your consideration. I hope it may prove useful perhaps even prophetic. Please indulge my literary narrative. I recount a familiar phrase.

These are the Best of Times, These are the Worst of Times.

Is the glass half-empty or half-full?

Naturally, that depends on one's perspective and WorldView.

I think there is ample evidence to support both extremes. I won't go into detail on all the specifics, save perhaps to acknowledge the heartbreaking loss of our long tenured and beloved EMS Director. Yet, we can happily report a capable successor has already assumed the reins.

As for me, I observe green shoots on the near horizon and faithfully anticipate a vibrant and flourishing Health Care Environment that is not only inclusive, but responsive to a vast array of constituent needs and challenges.

What will be required to give it breath is the Will, Tenacity and Fortitude to fully realize the Vision.

I can not speak to all of the specifics; but assuredly, our incomparable CEO, CFO and CNO will serve up a banquet of statistics and particulars for you to digest as you advance along this path.

I fully trust the team in place can and will succeed in this formidable but undeniably vital endeavor and bring it to fruition. In so doing embrace and reconcile the Naysayers.

This will surely demand some time, but when we arrive

It will Truly be The Best of Times.

Thank You, and enjoy a constructive meeting. Dr. Ed

January 31, 2022

To: Morrow County Health District Board of Directors

From: Emily Roberts, CEO

Re: CEO Board Report

Electronic Medical Record:

- The District is continuing its search for a new electronic medical record. The three EMRs under consideration are:
 - Epic via OCHIN
 - Thrive (CPSI)
 - Meditech
- The information gathering phase is expected to conclude by mid-February.

Provider Recruitment:

- The District has open searches for permanent candidates with Merritt Hawkins, Pacific Companies, and Healthcare Recruitment Link and open searches for locum candidates with CompHealth and AMN Healthcare.
- The District is currently recruiting for the following provider positions:
 - Irrigon Medical Clinic:
 - 1 Family Practice Physician (MD/DO)
 - Currently 1 DO candidate with second interview scheduled in February.
 - 1 Advanced Practice Provider (PA/NP)
 - Currently 1 NP candidate under consideration.
 - Pioneer Memorial Clinic:
 - 1 Family Practice Physician (MD/DO)
 - Currently 1 MD candidate under consideration.
 - 1 Advanced Practice Provider (PA/NP)
 - Currently 1 PA candidate under consideration.

EMS:

- Donna Sherman has assumed responsibility for EMS on a permanent basis and is now the Director of Laboratory and EMS Services. Donna started with the District's EMS program 13 years ago and brings a wealth of knowledge and experience.

Community Survey:

- The District is putting together a community survey to better understand the needs of Morrow County residents. Troy Soenen, the District's new Chief Operating Officer will head up this effort.



January 31, 2022

To: Morrow County Health District Board of Directors

From: Kathleen Greenup, RN, CNO

RE: CNO Board Report

Pioneer Memorial Hospital Report:

- MCHD has remained compliant with their staffing plans at the hospital level.
- Oregon Health Authority has granted MCHD 3 contract RNs and are hoping to get them oriented and working ASAP.
- Four new PRN RNs have joined PMH. Each have been orienting and will begin working independently very soon!

COVID-19 Vaccination and Updates:

- We have adequate PPE and testing supplies at all MCHD locations.
- MCHD has been able to offer multiple community members the Regen-CoV monoclonal antibody treatment for COVID-19. We have ample doses available to continue this treatment option. Additionally, Laurie Wood (Pharmacist) has worked hard to obtain the Sotrovimab infusion treatment and Paxlovid oral treatment for our community!

Quality Performance Improvement Projects:

- All 2021 PMH quality measure targets were met and new measures for 2022 are underway.

Pioneer Memorial Clinic Report:

- PMC and IMC have begun seeing patients extended hours: 8:30 a.m. – 6 p.m.
- The District has extended an offer to a candidate for the clinic director position.
- A “Meet and Greet” with Dr. Sirucek is scheduled for 2/22/22 @ 6:30 p.m. in the PMC Conference Room.

Human Resources Report
Morrow County Health District Board of Directors
January 31,2022

The HR Department continues to be very busy with recruitment, interviews, onboarding and various other department duties.

New hires since the November board meeting, 16 total, include:

- Part-time Physician for Hospice Directorship
- Part-time Family Nurse Practitioner for Hospice
- A full-time Certified Medical Assistant for PMC
- Community Relations & Communications Director
- Fill-in Radiology Technician
- Floating Clinic Medical Assistant for all three clinics
- Full-time Paramedic and ED Technician
- 4 Temporary Status Hospital RNs
- Hospital Screener
- Chief Operating Officer
- Full-time Lab Technician
- Home Health & Hospice Clerk
- Dr. Sirucek is here!

It is noted that Laboratory Director Donna Sherman, MLT and EMT-Intermediate, accepted the Directorship of the EMS Department and will now oversee both departments.

We currently have an accepted offer for the PMC/ICC Clinic Director position, contingent upon an on-site visit on 1/28/22.

We have interviews scheduled for the following positions:

- Second interview for Jennifer Follwell, DO for IMC.

The HR Department is recruiting for the following positions:

- PMH RN - FT
- Home Health & Hospice RN – FT or PT
- Information Technology Technician
- 1 EMT Intermediate or Paramedic – Boardman Ambulance Station
- 1 EMT Basic – Boardman Ambulance Station
- Fill-in Cook for PMH

Patti Allstott, SHRM-CP
HR Director

20:44

Profit & Loss Statement

User Login Name:mahoneni

Application Code : GL

Through December 2021

Current Month	Last Month	Dollar Variance		Current Year to Date	Budget Year to Date	Dollar Variance
PATIENT SERVICES REVENUE						
62,218	46,389	15,829	Hospital Inpatient Revenue	390,190	563,699	-173,510
54,175	37,619	16,556	Inpatient Ancillary Revenue	331,177	409,955	-78,778
781,430	681,996	99,434	Outpatient Revenue	4,426,500	4,569,099	-142,599
193,412	200,652	-7,239	Clinic Revenue	1,274,039	2,438,443	-1,164,404
74,458	104,652	-30,194	Home Health/Hospice Revenue	610,635	574,012	36,623
1,165,693	1,071,306	94,386	Gross Patient Revenue	7,032,541	8,555,209	-1,522,668
LESS DEDUCTIONS FROM REVENUE						
8,840	15,940	-7,100	Provision for Bad Debts	42,079	0	42,079
59,214	8,247	50,967	Contractual & Other Adjustment	678,538	707,304	-28,766
68,054	24,187	43,867	Total Revenue Deductions	720,617	707,304	13,313
1,097,639	1,047,119	50,519	NET PATIENT REVENUE	6,311,924	7,847,905	-1,535,981
218,296	218,296	0	Tax Revenue	1,248,018	1,185,784	62,233
6,774	3,536	3,238	Other Operating Revenue	55,388	193,167	-137,779
1,322,709	1,268,951	53,758	TOTAL OPERATING REVENUE	7,615,330	9,226,857	-1,611,527
OPERATING EXPENSES						
771,768	699,806	71,962	Salaries & Wages	4,400,596	5,007,172	-606,576
245,480	227,865	17,615	Employee Benefits & Taxes	1,437,076	1,846,485	-409,409
68,322	92,452	-24,130	Professional Fees	630,578	418,684	211,893
105,622	68,106	37,515	Supplies & Minor Equipment	665,215	700,805	-35,589
4,431	1,572	2,858	Education	33,783	94,280	-60,497
17,130	18,222	-1,093	Repairs & Maintenance	64,794	82,357	-17,563
8,595	8,574	21	Recruitment & Advertising	77,875	91,089	-13,213
77,993	72,743	5,249	Purchased Services	507,942	453,151	54,792
57,192	57,890	-698	Depreciation	351,899	404,381	-52,483
19,939	20,113	-174	Utilities, Phone & Propane	102,528	94,961	7,567
14,046	10,536	3,511	Insurance	63,952	67,330	-3,378
4,361	9,199	-4,838	Taxes & Licenses	14,694	13,210	1,484
6,633	7,164	-531	Interest	42,677	41,081	1,596
2,370	4,204	-1,834	Dues & Subscriptions	18,448	26,725	-8,277
12,045	12,942	-897	Travel	68,028	78,152	-10,125
15,070	17,314	-2,244	Other Expenses	92,764	79,590	13,174
1,430,996	1,328,703	102,293	Total Operating Expenses	8,572,849	9,499,452	-926,603
-108,287	-59,752	-48,535	GAIN/LOSS FROM OPERATIONS	-957,519	-272,595	-684,923
40,532	54,723	-14,191	NON-OPERATING NET GAIN/LOSS	255,740	358,833	-103,093
-67,755	-5,028	-62,726	GAIN/LOSS	-701,779	86,238	-788,017

(\$116,963) Ave monthly
ytd loss

December 2021

Description	Current Year
Assets	
Current Assets	
Cash & Investments	7,952,490
A/R Hospital, Swing, Clinic	1,860,096
A/R Home Health & Hospice	270,844
Gross Patient Receivables	2,130,940
Less: Clearing Accounts	0
Less: Allow for Contractual	124,053
Less: Allow for Uncollectible	270,503

Net Patient Accounts Receivabl	1,736,384
Employee Advances	0
Employee Purchases Receivable	406
Receivable 340B SunRx	57,782
Taxes Receivable - Prior Year	31,614
Taxes Receivable - Current Yr	-1,209,527
Other Receivable	5,265
Grants Receivable	0
MC/MD Receivable	559,796
Assisted Living Receivable	5,128

Other Receivable Total	0
Inventory and Prepaid	434,261

Total Current Assets	9,573,598
Long Term Assets	
Land	135,701
Land Improvements	301,596
Building & Improvements	5,852,175
Equipment	7,814,544
Amortizable Loan Costs	0
Construction in Progress	140,399
Less: Accum Depreciation	9,536,945

Total Long Term Assets	4,707,469

Total Assets	14,281,067
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December 2021

Description	Current Year
Liabilities	
Current Liabilities	
Accounts Payable	397,243
Refunds Payable-Hospital	0
Refunds Payable-Clinic	0
Misc Payable	0
Short Term Notes Payable	0

Accounts Payable Total	397,243
Accrued Wages & Liabilities	657,322
Accrued Interest	4,389
Suspense Account	0
TCAA Suspense	45
Deferred Income	1,506
Unearned Revenue for COVID 19	1,735,065
MC/MD Settlement Payable	388,168
Contingency Settlement Payable	200,000

Other Liabilities	2,329,173

Total Current Liabilities	3,383,738
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Longterm Liabilities	
STRYKER CAPITAL LEASE	0
BEO 2019 BOILERS LOAN	84,349
BEO 2018 BOARDMAN BLDG LOAN	114,421
BEO 2018 OMNICELL/US LOAN	122,901
BEO 2020 AMBULANCE LOAN	99,475
Morrow Co 2016 Annex Loan	0
BEO Loan AMB/LAB 2016	0
MORROW CO 2018 BOARDMAN BLDG	63,429
BEO ENDO RM/MISC LOAN 2017	29,045
Morrow Co 2013 IMC Loan	14,612
BEO IMC EXPANSION 2018	354,322
GEODC 2021 HOUSE LOAN	86,159
MORROW CO 2021 CHURCH LOAN	64,834
BEO 2008 Hosp Remodel Loan	72,947
USDA Remodel Loan	809,303

Total Long Term Liabilities	1,915,796
Equity/Fund Balance	
General Fund Unrestricted Bal	9,683,311
Equity/Fund Bal Period End	-701,779

Total Liab+Equity/Fund Bal	14,281,067
	=====

Description	Current Year
Assets	
Current Assets	
1002-100 GENERAL CHECKING (S NOW)	-17,156
1002-102 CHECKING-PAYROLL	3,002
1002-104 PREMIUM CHECKING (E BEST)	1,257,835
1002-106 SAVINGS	0
1002-108 WELLS FARGO ACCOUNT	0
1002-110 LOCAL GOVT INVESTMENT POOL	6,708,009
1002-112 CERT. OF DEPOSIT	0
1002-114 PETTY CASH	800
<hr/>	
Cash & Investments	7,952,490

\$3,269,308 Restricted
\$171,661 Board Designated

Account Name	GL #	6 - Dec 2021 Budget	6 - Dec 2021 Actual	Variance	YTD Budget	YTD Actual	YTD Variance
Department: HEPPNER CLINIC							
PIONEER MEMORIAL CLINIC OP SELF PAY	4070-020	5853.41	1794.90	-4058.51	35120.43	12557.34	-22563.09
PIONEER MEMORIAL CLINIC OP COMMERCIAL	4070-022	78631.95	25925.69	-52906.26	472991.75	180010.77	-292980.98
PIONEER MEMORIAL CLINIC OP WORK COMP	4070-023	3342.25	1278.54	-2063.71	20053.45	7049.66	-13003.79
PIONEER MEMORIAL CLINIC OP MEDICARE	4070-024	88555.98	24542.84	-64013.14	531335.88	170068.29	-361267.59
PIONEER MEMORIAL CLINIC OP MEDICAID	4070-025	34336.68	7635.97	-26700.71	206020.04	78776.51	-127243.53
PIONEER MEMORIAL CLINIC TOTAL REVENUE	4070-998	210920.27	61177.94	-149742.33	1265521.55	448462.57	-817058.98
PIONEER MEMORIAL CLINIC WAGES MANAGEMENT	7070-101	6233.59	00.00	-6233.59	37401.53	11945.66	-25455.87
PIONEER MEMORIAL CLINIC WAGES PHYSICIAN	7070-105	29046.63	59022.38	29955.75	174279.74	156404.47	-17875.27
PIONEER MEMORIAL CLINIC WAGES OTHER PROVIDER	7070-110	20379.84	11344.00	-9035.84	122279.09	84012.86	-38266.23
PIONEER MEMORIAL CLINIC WAGES RN	7070-120	00.00	00.00	00.00	00.00	00.00	00.00
PIONEER MEMORIAL CLINIC WAGES LPN	7070-130	00.00	00.00	00.00	00.00	00.00	00.00
PIONEER MEMORIAL CLINIC WAGES CLERICAL	7070-150	18196.47	12229.14	-5967.33	109178.80	86896.21	-22282.59
PIONEER MEMORIAL CLINIC WAGES ENVIRONMENTAL	7070-160	323.79	420.59	96.80	1942.71	2925.95	983.24
PIONEER MEMORIAL CLINIC OTHER MED PERS	7070-180	24818.49	26234.62	1416.13	148910.89	148058.91	-851.98
PIONEER MEMORIAL CLINIC FICA	7070-200	7140.81	5339.24	-1801.57	42844.85	30107.77	-12737.08
PIONEER MEMORIAL CLINIC UNEMPLOYMENT TAX	7070-211	104.87	107.68	02.81	629.27	351.78	-277.49
PIONEER MEMORIAL CLINIC PAID TIME OFF	7070-220	972.11	-36090.58	-37062.69	5832.67	-66214.67	-72047.34
PIONEER MEMORIAL CLINIC HEALTH INS	7070-230	27779.22	18061.71	-9717.51	166675.29	116458.25	-50217.04
PIONEER MEMORIAL CLINIC LIFE/DISABILITY INS	7070-240	260.98	149.99	-110.99	1565.87	1434.94	-130.93
PIONEER MEMORIAL CLINIC RETIREMENT	7070-250	5600.59	5452.78	-147.81	33603.56	23289.44	-10314.12
PIONEER MEMORIAL CLINIC WORK COMP INS	7070-260	833.00	740.09	-92.91	4998.00	4351.92	-646.08
PIONEER MEMORIAL CLINIC WORK COMP TAX	7070-270	24.32	15.90	-8.42	145.96	103.07	-42.89
PIONEER MEMORIAL CLINIC PROFESSIONAL FEES	7070-301	18742.50	4547.00	-14195.50	112455.00	35205.30	-77249.70
PIONEER MEMORIAL CLINIC COLLECTION FEES	7070-306	00.00	00.00	00.00	00.00	00.00	00.00
PIONEER MEMORIAL CLINIC CHARGEABLE SUPPLIES	7070-410	541.45	475.06	-66.39	3248.70	3800.25	551.55
PIONEER MEMORIAL CLINIC DRUGS	7070-425	791.35	163.33	-628.02	4748.10	5884.18	1136.08
PIONEER MEMORIAL CLINIC OFFICE SUPPLIES	7070-460	979.61	153.15	-826.46	5877.64	3567.81	-2309.83
PIONEER MEMORIAL CLINIC MINOR MED EQUIP	7070-482	416.50	00.00	-416.50	2499.00	308.63	-2190.37
PIONEER MEMORIAL CLINIC MINOR OTH EQUIP	7070-490	124.95	178.53	53.58	749.70	178.53	-571.17
PIONEER MEMORIAL CLINIC NONCHARGE SUPPLIES	7070-500	833.00	866.09	33.09	4998.00	5439.63	441.63
PIONEER MEMORIAL CLINIC OXYGEN / MED GASES	7070-510	33.32	14.24	-19.08	199.92	83.85	-116.07
PIONEER MEMORIAL CLINIC EDUCATION	7070-570	1332.80	00.00	-1332.80	7996.80	368.84	-7627.96
PIONEER MEMORIAL CLINIC REPAIR/MAINT BLDG	7070-621	41.65	00.00	-41.65	249.90	00.00	-249.90
PIONEER MEMORIAL CLINIC REPAIR/MAINT MED EQP	7070-622	00.00	00.00	00.00	00.00	00.00	00.00
PIONEER MEMORIAL CLINIC REPAIR/MAINT EQUIP	7070-627	00.00	00.00	00.00	00.00	-271.35	-271.35
PIONEER MEMORIAL CLINIC ADVERTISING	7070-663	416.50	00.00	-416.50	2499.00	2952.42	453.42
PIONEER MEMORIAL CLINIC PURCHASED SERVICES	7070-680	1915.90	1212.27	-703.63	11495.40	7014.80	-4480.60
PIONEER MEMORIAL CLINIC DEPR LAND IMPROVE	7070-710	106.71	147.75	41.04	640.23	830.94	190.71
PIONEER MEMORIAL CLINIC DEPR BLDG IMPROVE	7070-720	478.14	478.37	00.23	2868.86	2870.22	01.36

PIONEER MEMORIAL CLINIC DEPR FIXED EQUIP	7070-725	120.70	120.73	00.03	724.22	724.38	00.16
PIONEER MEMORIAL CLINIC DEPR MAJOR MOVE EQP	7070-741	394.18	394.37	00.19	2365.03	2366.22	01.19
PIONEER MEMORIAL CLINIC DEPR MINOR EQUIP	7070-742	00.00	00.00	00.00	00.00	00.00	00.00
PIONEER MEMORIAL CLINIC TELEPHONE	7070-755	249.90	168.70	-81.20	1499.40	1013.07	-486.33
PIONEER MEMORIAL CLINIC UTILITIES	7070-770	791.35	871.73	80.38	4748.10	4236.76	-511.34
PIONEER MEMORIAL CLINIC MALPRACTICE INS	7070-811	00.00	00.00	00.00	00.00	00.00	00.00
PIONEER MEMORIAL CLINIC INSURANCE	7070-820	424.08	424.54	00.46	2544.48	2547.24	02.76
PIONEER MEMORIAL CLINIC TAXES & LICENSES	7070-830	416.50	3890.00	3463.50	2499.00	5212.00	2713.00
PIONEER MEMORIAL CLINIC INTEREST EXPENSE	7070-846	00.00	00.00	00.00	00.00	00.00	00.00
PIONEER MEMORIAL CLINIC DUES & SUBSCRIPTION	7070-860	416.50	00.00	-416.50	2499.00	109.99	-2389.01
PIONEER MEMORIAL CLINIC TRAVEL GENERAL	7070-880	1141.21	817.92	-323.29	6847.26	4373.60	-2473.66
PIONEER MEMORIAL CLINIC TRAVEL EDUCATION	7070-882	666.40	00.00	-666.40	3998.40	3114.30	-884.10
PIONEER MEMORIAL CLINIC POSTAGE/FREIGHT	7070-898	16.66	00.00	-16.66	99.96	59.15	-40.81
PIONEER MEMORIAL CLINIC MISCELLANEOUS	7070-900	916.30	2077.54	1161.24	5497.80	4856.23	-641.57
PIONEER MEM CLINIC TOTAL EXPENSES	7070-998	174022.87	119998.86	-54024.01	1044137.13	696973.55	-347163.58
PIONEER MEM CLINIC GAIN/LOSS	7070-999	36897.40	-58820.92	-95718.32	221384.42	-248510.98	-469895.40

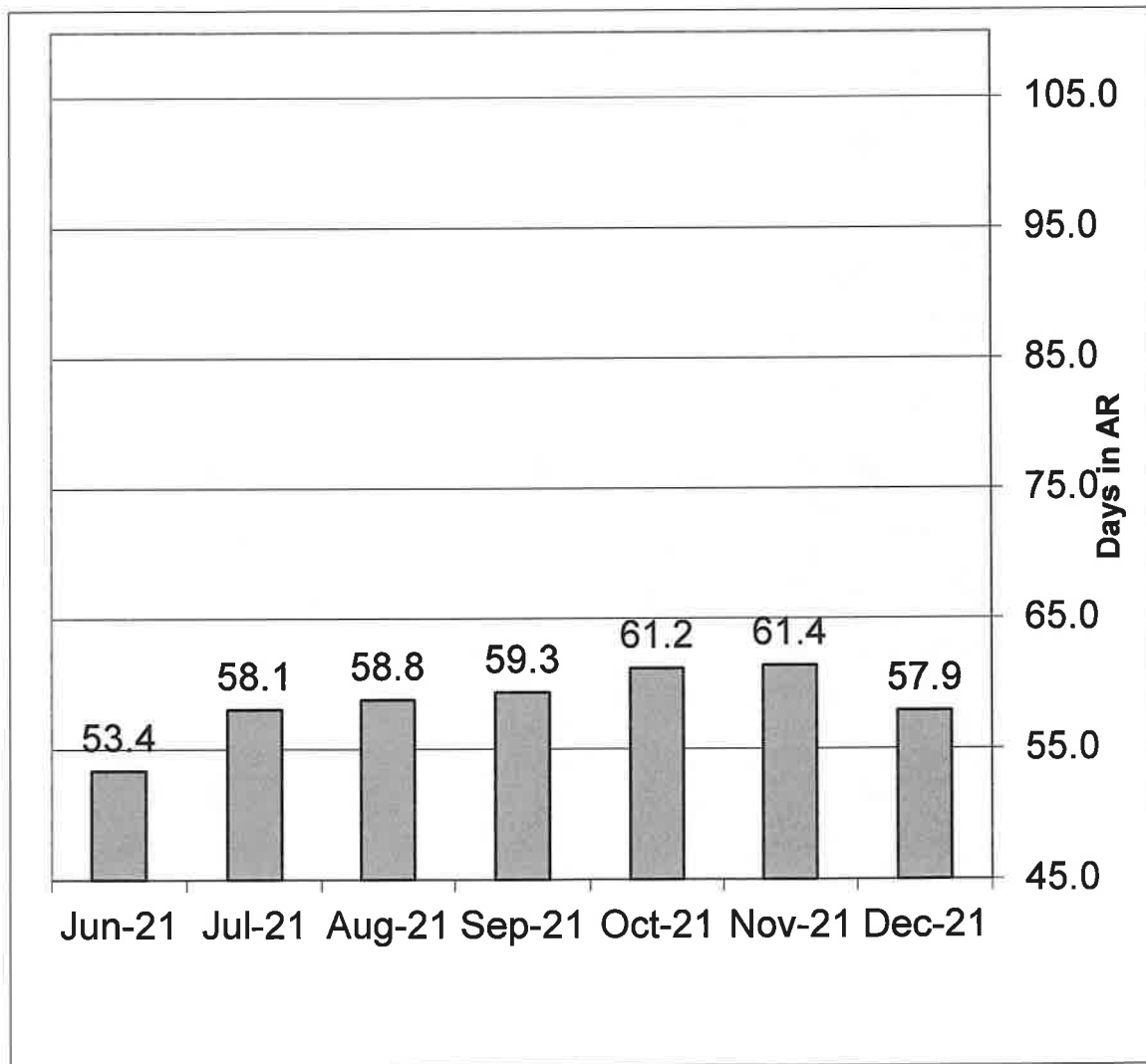
Account Name	GL #	6 - Dec 2021 Budget	6 - Dec 2021 Actual	Variance	YTD Budget	YTD Actual	YTD Variance
Department: IONE CLINIC							
IONE COMMUNITY CLINIC OP SELF PAY	4090-020	790.35	1019.77	229.42	4742.10	3568.55	-1173.55
IONE COMMUNITY CLINIC OP COMMERCIAL	4090-022	11774.37	7998.31	-3776.06	70646.24	57252.70	-13393.54
IONE COMMUNITY CLINIC OP WORK COMP	4090-023	00.00	00.00	00.00	00.00	00.00	00.00
IONE COMMUNITY CLINIC OP MEDICARE	4090-024	5952.62	7205.29	1253.67	35715.70	39565.08	3849.38
IONE COMMUNITY CLINIC OP MEDICAID	4090-025	4380.33	6187.53	1807.20	25281.99	33540.22	7258.23
IONE COMMUNITY CLINIC TOTAL REVENUE	4090-998	22897.67	22411.90	-485.77	137386.03	133926.55	-3459.48
IONE COMMUNITY CLINIC WAGES MANAGEMENT	7090-101	933.00	00.00	-933.00	4998.00	00.00	-4998.00
IONE COMMUNITY CLINIC WAGES PHYSICIAN	7090-105	499.80	500.00	00.20	2998.80	1000.00	-1998.80
IONE COMMUNITY CLINIC WAGES PAF/NP	7090-110	4556.76	5190.62	633.86	27340.56	30784.01	3443.45
IONE COMMUNITY CLINIC WAGES CLERICAL	7090-150	4269.29	3487.91	-781.38	25615.76	23980.19	-1735.57
IONE COMMUNITY CLINIC WAGES OTHER MED PERS	7090-180	1721.73	2573.20	851.47	10330.35	12652.64	2322.29
IONE COMMUNITY CLINIC FICA	7090-200	908.55	894.87	-13.68	5451.33	5200.97	-250.36
IONE COMMUNITY CLINIC UNEMPLOY TAX	7090-211	11.16	11.79	00.63	66.98	68.43	01.45
IONE COMMUNITY CLINIC PAID TIME OFF	7090-220	66.99	-222.09	-289.08	401.34	-193.32	-594.66
IONE COMMUNITY CLINIC HEALTH INS	7090-230	2833.62	2053.83	-779.79	17001.68	14266.22	-2735.46
IONE COMMUNITY CLINIC LIFE/DISABILITY INS	7090-240	30.57	15.80	-14.77	183.43	127.92	-55.51
IONE COMMUNITY CLINIC RETIREMENT	7090-250	682.56	316.66	-365.90	4095.36	2037.99	-2057.37
IONE COMMUNITY CLINIC WORKERS COMP INS	7090-260	63.89	57.59	-6.30	383.35	287.95	-95.40
IONE COMMUNITY CLINIC WORKERS COMP TAX	7090-270	04.16	03.73	-0.43	25.02	21.41	-3.61
IONE COMMUNITY CLINIC PROFESSIONAL FEES	7090-301	00.00	00.00	00.00	00.00	00.00	00.00
IONE COMMUNITY CLINIC CHARGEABLE SUPPLIES	7090-410	37.48	51.33	13.85	224.94	146.30	-78.64
IONE COMMUNITY CLINIC DRUGS	7090-425	208.25	769.46	560.21	1249.50	1398.10	148.60
IONE COMMUNITY CLINIC OFFICE SUPPLIES	7090-460	416.50	15.54	-400.96	2499.00	972.22	-1526.78
IONE COMMUNITY CLINIC MINOR MED EQUIP	7090-482	259.88	00.00	-259.88	1799.28	00.00	-1799.28
IONE COMMUNITY CLINIC MINOR OTHER EQUIP	7090-490	166.60	509.85	343.25	999.60	509.85	-489.75
IONE COMMUNITY CLINIC NONCHARG SUPPLIES	7090-500	333.20	89.56	-244.64	1999.20	2107.55	108.35
IONE COMMUNITY CLINIC EDUCATION	7090-570	83.30	00.00	-83.30	499.80	00.00	-499.80
IONE COMMUNITY CLINIC REPAIR/MAINT MED EQUIP	7090-622	00.00	00.00	00.00	00.00	00.00	00.00
IONE COMMUNITY CLINIC REPAIR/MAINT NON MED EQUIP	7090-627	00.00	00.00	00.00	00.00	00.00	00.00
IONE COMMUNITY CLINIC ADVERTISING	7090-663	20.82	00.00	-20.82	124.98	00.00	-124.98
IONE COMMUNITY CLINIC PURCHASED SERVICES	7090-680	124.95	21.70	-103.25	749.70	436.20	-313.50
IONE COMMUNITY CLINIC DEPR MAJOR MOVE EQUIP	7090-741	49.81	49.86	00.05	298.50	299.16	00.26
IONE COMMUNITY CLINIC DEPR MINOR EQUIP	7090-742	00.00	00.00	00.00	00.00	00.00	00.00
IONE COMMUNITY CLINIC RENT	7090-750	599.76	600.00	00.24	3598.95	3600.00	01.44
IONE COMMUNITY CLINIC TELEPHONE	7090-755	489.80	610.91	111.11	2598.80	3683.54	684.74
IONE COMMUNITY CLINIC UTILITIES	7090-770	166.60	142.93	-23.67	999.60	889.35	-110.25
IONE COMMUNITY CLINIC INSURANCE	7090-820	10.50	10.22	-0.28	62.95	61.32	-1.63
IONE COMMUNITY CLINIC TAXES & LICENSES	7090-830	00.00	00.00	00.00	00.00	00.00	00.00
IONE COMMUNITY CLINIC TRAVEL GENERAL	7090-880	24.99	00.00	-24.99	149.94	00.00	-149.94
IONE COMMUNITY CLINIC TRAVEL EDUCATION	7090-882	83.30	00.00	-83.30	499.80	-200.00	-699.80
IONE COMMUNITY CLINIC POSTAGE	7090-988	08.33	00.00	-08.33	49.98	51.00	01.02
IONE COMMUNITY CLINIC MISCELLANEOUS	7090-900	374.85	09.45	-365.40	2249.10	3688.22	1440.12
IONE COMMUNITY CLINIC TOTAL EXPENSES	7090-998	19990.90	17782.72	-2228.18	119945.59	107778.22	-12167.37
IONE COMMUNITY CLINIC GAIN/LOSS	7090-999	2906.77	4649.18	1742.41	17440.44	26148.33	8707.89

Account Name	GL #	6 - Dec 2021 Budget	6 - Dec 2021 Actual	Variance	YTD Budget	YTD Actual	YTD Variance
Department: IRRIGON CLINIC							
IRRIGON MEDICAL CLINIC OP SELF PAY	4085-020	5367.10	918.87	-4448.23	32202.63	16153.55	-16049.08
IRRIGON MEDICAL CLINIC OP COMMERCIAL	4085-022	74917.52	47956.40	-26961.12	449505.13	289332.71	-161172.42
IRRIGON MEDICAL CLINIC OP WORK COMP	4085-023	3210.88	694.99	-2515.89	19265.30	2096.35	-17168.95
IRRIGON MEDICAL CLINIC OP MEDICARE	4085-024	43741.50	27022.17	-16719.33	262448.96	163461.01	-98987.95
IRRIGON MEDICAL CLINIC OP MEDICAID	4085-025	45352.27	33230.09	-12122.18	272113.60	221606.15	-50507.45
IRRIGON MED CLINIC TOTAL REVENUE	4085-998	172589.27	109822.52	-62766.75	1035535.62	691649.77	-343885.85
IRRIGON MEDICAL CLINIC WAGES MANAGEMENT	7085-101	6125.88	00.00	-6125.88	36755.30	00.00	-36755.30
IRRIGON MEDICAL CLINIC WAGES PHYSICIAN	7085-105	17859.52	1372.96	-16486.56	107157.12	19638.00	-87519.12
IRRIGON MEDICAL CLINIC WAGES OTHER PROVIDER	7085-110	23461.20	20032.69	-3428.51	140767.15	153243.07	12475.92
IRRIGON MEDICAL CLINIC WAGES RN	7085-120	00.00	00.00	00.00	00.00	00.00	00.00
IRRIGON MEDICAL CLINIC WAGES LPN	7085-130	00.00	00.00	00.00	00.00	00.00	00.00
IRRIGON MEDICAL CLINIC WAGES CLERICAL	7085-150	18139.74	18895.83	756.09	108838.45	107063.24	-1775.21
IRRIGON MEDICAL CLINIC WAGES ENVIRONMENTAL	7085-160	00.00	00.00	00.00	00.00	00.00	00.00
IRRIGON MEDICAL CLINIC OTHER MED PERS	7085-180	22688.67	31207.29	8518.62	136132.03	168445.88	32313.85
IRRIGON MEDICAL CLINIC FICA	7085-200	6549.05	5401.63	-1147.42	39294.26	33714.43	-5579.83
IRRIGON MEDICAL CLINIC UNEMPLOYMENT TAX	7085-211	95.88	71.29	-24.59	575.26	444.07	-131.19
IRRIGON MEDICAL CLINIC PAID TIME OFF	7085-220	833.00	554.10	-278.90	4998.00	-1448.33	-6446.33
IRRIGON MEDICAL CLINIC HEALTH INS	7085-230	24052.21	13932.54	-10119.67	144313.24	90728.81	-53584.43
IRRIGON MEDICAL CLINIC LIFE/DISABILITY INS	7085-240	300.30	197.70	-102.60	1801.76	1654.30	-147.46
IRRIGON MEDICAL CLINIC RETIREMENT	7085-250	5136.53	3255.31	-1881.22	30819.16	22369.59	-8449.57
IRRIGON MEDICAL CLINIC WORK COMP INS	7085-260	491.64	467.91	-23.73	2949.80	2930.62	-19.18
IRRIGON MEDICAL CLINIC WORK COMP TAX	7085-270	27.66	24.79	-2.87	165.91	132.10	-33.81
IRRIGON MEDICAL CLINIC PROFESSIONAL FEES	7085-301	416.50	1298.00	881.50	2499.00	1408.00	-1091.00
IRRIGON MEDICAL CLINIC COLLECTION FEES	7085-306	00.00	00.00	00.00	00.00	00.00	00.00
IRRIGON MEDICAL CLINIC CHARGEABLE SUPPLIES	7085-410	499.80	22.90	-476.90	2998.80	3623.76	824.96
IRRIGON MEDICAL CLINIC DRUGS	7085-425	1249.50	02.94	-1246.56	7497.00	5752.93	-1744.07
IRRIGON MEDICAL CLINIC OFFICE SUPPLIES	7085-460	1124.55	1490.51	365.96	6747.30	3737.34	-3009.96
IRRIGON MEDICAL CLINIC MINOR MED EQUIP	7085-482	99.96	00.00	-99.96	599.76	1497.13	897.37
IRRIGON MEDICAL CLINIC MINOR OTH EQUIP	7085-490	62.48	00.00	-62.48	374.82	320.54	-54.28
IRRIGON MEDICAL CLINIC NONCHARGE SUPPLIES	7085-500	1249.50	948.36	-301.14	7497.00	6461.60	-1035.40
IRRIGON MEDICAL CLINIC EDUCATION	7085-570	541.45	00.00	-541.45	3248.70	755.90	-2492.80
IRRIGON MEDICAL CLINIC REPAIR/MAINT BLDG	7085-621	41.65	00.00	-41.65	249.90	1486.00	1236.10
IRRIGON MEDICAL CLINIC REPAIR/MAINT MED EQP	7085-622	208.25	00.00	-208.25	1249.50	2085.00	835.50
IRRIGON MEDICAL CLINIC REPAIR/MAINT EQUIP	7085-627	41.65	00.00	-41.65	249.90	76.50	-173.40
IRRIGON MEDICAL CLINIC REPAIR/MAINT VEHICLE	7085-628	00.00	00.00	00.00	00.00	00.00	00.00
IRRIGON MEDICAL CLINIC ADVERTISING	7085-663	458.15	00.00	-458.15	2748.90	176.50	-2572.40
IRRIGON MEDICAL CLINIC PURCHASED SERVICES	7085-680	3456.95	1348.66	-2108.29	20741.70	17686.62	-3055.08
IRRIGON MEDICAL CLINIC DEPR LAND IMPROVE	7085-710	1223.43	1223.90	00.47	7340.55	7343.40	02.85
IRRIGON MEDICAL CLINIC DEPR BLDG IMPROVE	7085-720	5873.98	5876.37	02.39	35243.91	35258.22	14.31

IRRIGON MEDICAL CLINIC DEPR FIXED EQUIP	7085-725	313.79	369.30	55.51	1882.75	2105.14	222.39
IRRIGON MEDICAL CLINIC DEPR MAJOR MOVE EQP	7085-741	1480.66	00.00	-1480.66	8883.93	00.00	-8883.93
IRRIGON MEDICAL CLINIC DEPR MINOR EQUIP	7085-742	384.43	79.03	-305.40	2306.57	474.18	-1832.39
IRRIGON MEDICAL CLINIC TELEPHONE	7085-755	1332.80	1911.73	578.93	7996.80	11586.17	3589.37
IRRIGON MEDICAL CLINIC UTILITIES	7085-770	916.30	736.08	-180.22	5497.80	5193.51	-304.29
IRRIGON MEDICAL CLINIC GAS & OIL	7085-780	00.00	00.00	00.00	00.00	00.00	00.00
IRRIGON MEDICAL CLINIC MALPRACTICE INS	7085-811	00.00	00.00	00.00	00.00	00.00	00.00
IRRIGON MEDICAL CLINIC INSURANCE	7085-820	416.50	446.56	30.06	2499.00	2679.36	180.36
IRRIGON MEDICAL CLINIC TAXES & LICENSES	7085-830	208.25	436.00	227.75	1249.50	872.00	-377.50
IRRIGON MEDICAL CLINIC INTEREST EXPENSE	7085-846	1359.79	1349.25	-10.54	8158.73	8452.04	293.31
IRRIGON MEDICAL CLINIC DUES & SUBSCRIPTION	7085-860	62.48	00.00	-62.48	374.82	460.25	85.43
IRRIGON MEDICAL CLINIC TRAVEL GENERAL	7085-880	374.85	00.00	-374.85	2249.10	1058.32	-1190.78
IRRIGON MEDICAL CLINIC TRAVEL EDUCATION	7085-882	624.75	00.00	-624.75	3748.50	00.00	-3748.50
IRRIGON MEDICAL CLINIC VEHICLE GAS & OIL	7085-888	00.00	00.00	00.00	00.00	00.00	00.00
IRRIGON MEDICAL CLINIC POSTAGE/FREIGHT	7085-898	20.82	00.00	-20.82	124.98	142.00	17.02
IRRIGON MEDICAL CLINIC MISCELLANEOUS	7085-900	833.00	254.00	-579.00	4998.00	2153.06	-2844.94
IRRIGON MED CLINIC TOTAL EXPENSES	7085-998	150637.50	113207.63	-37429.87	903824.66	721961.25	-181863.41
IRRIGON MED CLINIC GAIN/LOSS	7085-999	21951.77	-3385.11	-25336.88	131710.96	-30311.48	-162022.44

**PIONEER MEMORIAL HOSPITAL, CLINICS, HOME HEALTH & HOSPICE
NUMBER OF DAYS IN ACCOUNTS RECEIVABLE**

Months	Days in A/R	A/R BAL	Charges	Days in Month
Dec-20		\$2,494,669	\$1,485,896	31
Jan-21		\$2,352,651	\$1,141,279	31
Feb-21	56.3	\$2,314,761	\$1,071,642	28
Mar-21	57.6	\$2,233,276	\$1,278,369	31
Apr-21	52.5	\$2,090,962	\$1,193,166	30
May-21	53.9	\$2,120,199	\$1,149,644	31
Jun-21	53.4	\$2,034,366	\$1,127,228	30
Jul-21	58.1	\$2,177,872	\$1,174,627	31
Aug-21	58.8	\$2,322,804	\$1,333,904	31
Sep-21	59.3	\$2,352,394	\$1,138,995	30
Oct-21	61.2	\$2,408,162	\$1,148,015	31
Nov-21	61.4	\$2,265,929	\$1,071,306	30
Dec-21	57.9	\$2,130,940	\$1,165,693	31



Morrow County Health District
Period End Aging Analysis Report - Summary as of December, 2022
Summarized by Financial Class

Application Code: AR

User Login Name: mahoneni

Financial Class	0 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Balance					
3C - Blue Cross/Blue	92,401.67	28,421.27	1,796.14	1,701.72	16,938.41	141,259.21					
Unbilled	2,596.07	0.00	0.00	0.00	0.00	2,596.07					
3C	94,997.74	28,421.27	1,796.14	1,701.72	16,938.41	143,855.28					
3C - Commercial	175,971.37	71,308.59	17,499%	23,215.81	5.69%	32,505.74	7.97%	104,768.31	25.69%	407,769.82	
Unbilled	5,522.86	100.00%	0.00	0.00%	0.00	0.00%	0.00	0.00%	5,522.86		
3C	181,494.23	43.91%	71,308.59	17.25%	23,215.81	5.62%	32,505.74	7.87%	104,768.31	25.35%	413,292.68
3A - Medicare Advan	29,200.66	37.49%	10,354.13	13.29%	20,329.05	26.10%	9,794.92	12.57%	8,215.25	10.55%	77,894.01
Unbilled	347.20	50.00%	347.20	50.00%	0.00	0.00%	0.00	0.00%	0.00	694.40	
3A	29,547.86	37.60%	10,701.33	13.62%	20,329.05	25.87%	9,794.92	12.46%	8,215.25	10.45%	78,588.41
3C - Medicare	457,589.93	81.44%	50,815.40	9.04%	25,091.98	4.47%	14,526.83	2.59%	13,877.52	2.47%	561,901.66
Unbilled	127,356.58	99.01%	1,269.04	0.99%	0.00	0.00%	0.00	0.00%	0.00	128,625.62	
3C	584,946.51	84.71%	52,084.44	7.54%	25,091.98	3.63%	14,526.83	2.10%	13,877.52	2.01%	690,527.28
3D - Medicaid	15,012.69	36.38%	11,585.25	28.07%	3,895.19	9.44%	14.14	0.03%	10,759.49	26.07%	41,266.76
Unbilled	0.00	0.00%	0.00	0.00%	0.00	0.00%	0.00	0.00%	0.00	0.00	
3D	15,012.69	36.38%	11,585.25	28.07%	3,895.19	9.44%	14.14	0.03%	10,759.49	26.07%	41,266.76
3O - Medicaid CCO	75,586.60	49.38%	29,518.46	19.28%	20,612.58	13.47%	4,983.03	3.26%	22,377.61	14.62%	153,078.28
Unbilled	23,374.62	100.00%	0.00	0.00%	0.00	0.00%	0.00	0.00%	0.00	23,374.62	
3O	98,961.22	56.08%	29,518.46	16.73%	20,612.58	11.68%	4,983.03	2.82%	22,377.61	12.68%	176,452.90
3P - Monthly Paymei	0.00	0.00%	2,716.27	1.17%	704.61	0.30%	2,521.71	1.09%	226,254.23	97.44%	232,196.82
Unbilled	0.00	0.00%	0.00	0.00%	0.00	0.00%	0.00	0.00%	0.00	0.00	
3P	0.00	0.00%	2,716.27	1.17%	704.61	0.30%	2,521.71	1.09%	226,254.23	97.44%	232,196.82
3P - Self Pay	73,328.20	21.51%	71,449.26	20.96%	57,292.68	16.81%	31,418.30	9.22%	107,337.43	31.49%	340,825.87
Unbilled	0.00	0.00%	1,148.76	100.00%	0.00	0.00%	0.00	0.00%	0.00	1,148.76	
3P	73,328.20	21.44%	72,598.02	21.23%	57,292.68	16.75%	31,418.30	9.19%	107,337.43	31.39%	341,974.63
3C - Work Comp	2,390.57	18.70%	3,180.34	24.88%	50.24	0.39%	1,593.52	12.46%	5,570.18	43.57%	12,784.85
Unbilled	0.00	0.00%	0.00	0.00%	0.00	0.00%	0.00	0.00%	0.00	0.00	
3C	2,390.57	18.70%	3,180.34	24.88%	50.24	0.39%	1,593.52	12.46%	5,570.18	43.57%	12,784.85

Morrow County Health District
 Period End Aging Analysis Report - Summary as of December, 2022
 Summarized by Financial Class

Application Code: AR

User Login Name: mahoneni

Financial Class	0 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Balance
Billed Total:	921,481.69	279,348.97	152,988.28	99,059.91	516,098.43	1,968,977.28
Outstanding Charges:	159,197.33	2,765.00	0.00	0.00	0.00	161,962.33
Grand Totals:	1,080,679.02	282,113.97	152,988.28	99,059.91	516,098.43	2,130,939.61

Number of Bills Processed : 3,119

Report Type : Period End Aging Analysis Summarized by Financial Class

Financial Class : All
 Facility : All
 Patient Type : All
 Patient Class : All
 Bad Debt Status : All bills, except bad debt bills
 Period : 6 Fiscal Year: 2022

MORROW COUNTY HEALTH DISTRICT
 PIONEER MEMORIAL HOSPITAL & ANCILLARY STAIRS
 FISCAL YEAR 2021-2022

ACUTE (INPATIENT)	JULY	AUG	SEPT	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUNE	YTD
ADMISSIONS	3	4	1	1	0	3							12
DISCHARGES	3	3	2	1	0	0							9
Admits- MED/CARE	3	1	1	1	0	2							8
MEDICAID	0	1	0	0	0	1							2
OTHER	0	0	0	0	0	0							0
SELF PAY	0	0	0	0	0	0							0
TOTAL	3	4	1	1	0	3	0	0	0	0	0	0	12
Dischs- MED/CARE	3	0	2	1	0	0							6
MEDICAID	0	1	0	0	0	0							1
OTHER	0	0	0	0	0	0							0
SELF PAY	0	0	0	0	0	0							0
TOTAL	3	3	2	1	0	0	0	0	0	0	0	0	9
PATIENT DISCHARGE DAYS													
MEDICARE	10	0	11	3	0	0							24
MEDICARE ADVANTAGE	0	0	0	0	0	0							0
MEDICAID	0	0	0	0	0	0							0
MEDICAD MANAGED CARE	0	2	0	0	0	0							2
OTHER	0	4	0	0	0	0							4
SELF PAY	0	0	0	0	0	0							0
TOTAL	10	6	11	3	0	0	0	0	0	0	0	0	30
PATIENT ADMISSION DAYS													
Adults	10	10	7	3	0	7							37
Pediatric	0	0	0	0	0	0							0
TOTAL	10	10	7	3	0	7	0	0	0	0	0	0	37
AVG LENGTH OF STAY	3.3	3.3	3.5	3.0	0.0	0.2							4.1
AVG DAILY CENSUS	0.3	0.3	0.2	0.1	0.0	0.2							0.2
DEATHS	0	0	0	0	0	0							0
SWING BED (Skilled)													
ADMISSIONS	1	3	4	3	5	3							19
DISCHARGES	2	1	4	4	4	3							18
Dischs- MED/CARE	2	1	3	4	3	2							15
MEDICAID	0	0	0	0	1	1							1
OTHER	0	0	1	0	0	0							1
SELF PAY	0	0	0	0	0	0							0
TOTAL	2	1	4	4	4	3	0	0	0	0	0	0	18
PATIENT DISCHARGE DAYS													
MEDICARE	18	12	37	72	19	42							200
MEDICARE ADVANTAGE	0	0	18	0	0	0							18
MEDICAID	0	0	0	0	0	0							0
MEDICAD MANAGED CARE	0	0	0	0	14	0							14
OTHER	0	0	14	0	0	3							17
SELF PAY	0	0	0	0	0	0							0
TOTAL	18	12	69	72	33	45	0	0	0	0	0	0	249
PATIENT ADMISSION DAYS													
MEDICARE	13	30	62	47	35	44							231
MEDICAID	0	0	0	11	3	0							14
OTHER	0	0	14	0	0	3							17
SELF PAY	0	0	0	0	0	0							0
TOTAL	13	30	76	58	38	47	0	0	0	0	0	0	262
AVG DAILY CENSUS	0.42	0.97	2.53	1.87	1.27	1.52							1.42
SWING BED REVENUE	\$ 5,044	\$ 11,640	\$ 29,488	\$ 22,504	\$ 14,744	\$ 18,236							\$101,656
SWING \$ DAYS	13	30	76	58	38	47							262
DEATHS	0	0	1	1	0	0							2

MORROW COUNTY HEALTH DISTRICT
 PIONEER MEMORIAL HOSPITAL & ANCILLARY STAFFS
 FISCAL YEAR 2021-2022

	JULY	AUG	SEPT	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUNE	YTD
OBSERVATION													
ADMISSIONS	3	4	4	6	2	5							24
DISCHARGES	4	4	4	6	2	5							25
HOURS	69	98	64	233	72	89							625
REVENUE	\$ 9,105	\$ 12,383	\$ 8,975	\$ 28,949	\$ 9,009	\$ 11,805	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 80,227
AVG LENGTH OF STAY (hours)	23.0	24.5	16.0	38.8	36.0	17.8	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	26.0
DEATHS	0	0	0	0	0	1	0	0	0	0	0	0	1
HOSPITAL RESPIRE													
ADMISSIONS	2	0	0	1	2	0							5
DISCHARGES	2	0	0	0	2	0							4
PATIENT ADMISSION DAYS	10	0	0	3	3	0							16
DEATHS	0	0	0	0	1	0							1
SWING (Non-Skilled)													
ADMISSIONS	1	0	0	1	0	0							2
DISCHARGES	1	0	1	1	0	0							3
Discharge-MEDICAID	1	0	0	0	0	0							1
SELF PAY	0	0	1	1	0	0							2
TOTAL	1	0	1	1	0	0	0	0	0	0	0	0	3
PATIENT DISCHARGE DAYS													
MEDICAID	6	0	0	0	0	0							6
SELF PAY	0	0	140	297	0	0							437
TOTAL	6	0	140	297	0	0	0	0	0	0	0	0	443
PATIENT ADMISSION DAYS													
MEDICAID	6	0	0	11	30	31							78
SELF PAY	124	124	111	92	60	62							573
TOTAL	130	124	111	103	90	93	0	0	0	0	0	0	651
AVG DAILY CENSUS	4.2	4.0	3.7	3.3	3.0	3.0	0.0	0.0	0.0	0.0	0.0	0.0	3.5
SWING BED REVENUE	\$ 45,709	\$ 43,600	\$ 39,029	\$ 36,216	\$ 31,665	\$ 32,700	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 228,918
SWING \$ DAYS	130	124	124	111	90	93	0	0	0	0	0	0	651
DEATHS	0	0	0	1	0	0	0	0	0	0	0	0	2
SUMMARY STATS													
TOTAL/AVERAGE % OCCUPANCY	25.0%	25.2%	30.8%	25.7%	20.8%	22.6%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	26.3%
TOTAL OUTPATIENTS (Admits) w/ ER	613	739	651	635	528	600							3766
TOTAL ER (Encounters)	98	110	89	96	95	100							588
LAB TESTS													
INPATIENT	22	73	91	65	67	112							430
OUTPATIENT	1604	1592	1419	1272	1340	1344							8571
TOTAL	1626	1665	1510	1337	1407	1456	0	0	0	0	0	0	9001
XRAY/ULTRASOUND TESTS													
INPATIENT	1	8	7	3	7	6							32
OUTPATIENT	108	114	82	116	88	120							628
TOTAL	109	122	89	119	95	126	0	0	0	0	0	0	660
CT SCANS													
MRI SCANS	4	4	1	4	1	4							18
EKG TESTS	36	32	30	22	32	24							176
TREADMILL PROCEDURES	0	0	0	0	0	0							0
LOWER ENDOSCOPY PROCEDURES	0	0	0	0	0	0							0
UPPER ENDOSCOPY PROCEDURES	0	0	0	0	0	0							0
LOWER/UPPER ENDOSCOPY PROCEDURES	0	0	0	0	0	0							0
RESPIRATORY THERAPY													
INPATIENT	6	8	5	10	1	0							30
OUTPATIENT	3	0	1	1	2	2							9
TOTAL	9	8	6	11	3	2	0	0	0	0	0	0	39

MORROW COUNTY HEALTH DISTRICT
 PIONEER MEMORIAL HOSPITAL & ANCILLARY STAFF
 FISCAL YEAR 2021-2022

	JULY	AUG	SEPT	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUNE	YTD
PROVIDER VISITS													
HEPNER CLINIC	327	249	226	203	224	202							1431
IRRIGON CLINIC	340	425	427	340	317	299							2148
IONE CLINIC	56	60	75	72	62	65							390
ALL PROVIDER ENCOUNTERS AT HOSPITAL**	133	146	121	136	119	123							778
TOTAL	856	880	849	751	722	689	0	0	0	0	0	0	4747
REVENUE OF HOSPITAL ENCOUNTERS	\$ 65,997	\$ 82,304	\$ 63,913	\$ 75,078	\$ 69,005	\$ 72,194	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 5428,489
AMBULANCE													
HEPNER AMBULANCE TRANSPORTS	19	38	19	21	21	26							144
BOARDMAN AMBULANCE TRANSPORTS	17	35	14	22	25	25							138
IRRIGON AMBULANCE TRANSPORTS	24	29	31	20	14	22							140
IONE AMBULANCE TRANSPORTS	0	0	0	0	0	0							0
TOTAL	60	102	64	63	60	73	0	0	0	0	0	0	422
HEPNER AMB REVENUE	\$ 31,774	\$ 66,467	\$ 32,368	\$ 33,579	\$ 36,341	\$ 46,576	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 247,104
BOARDMAN AMB REVENUE	\$ 33,969	\$ 71,133	\$ 29,319	\$ 45,241	\$ 50,102	\$ 56,478	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 286,241
IRRIGON AMB REVENUE	\$ 42,648	\$ 51,891	\$ 54,689	\$ 35,265	\$ 23,779	\$ 39,378	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 247,639
IONE AMB REVENUE	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 0
TOTAL	\$ 108,391	\$ 189,480	\$ 116,376	\$ 114,084	\$ 110,221	\$ 142,432	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 780,984
HOME HEALTH VISITS													
SKILLED NURSING VISITS	82	87	55	34	30	70							358
AIDE VISITS	5	5	5	10	8	16							49
MSW VISITS	0	0	0	0	0	0							0
OCCUPATIONAL THERAPY	10	9	6	16	8	5							54
PHYSICAL THERAPY	23	42	18	33	26	19							161
SPEECH THERAPY	3	4	4	2	5	4							22
IN HOME CARE VISITS-PRIVATE PAY	32	27	37	42	44	32							214
TOTAL	155	174	125	137	121	146	0	0	0	0	0	0	858
HOSPICE													
ADMITTS	3	3	4	5	4	1							20
DISCHARGE	1	0	0	0	1	1							3
DEATHS	2	4	4	4	5	4							23
TOTAL DAYS	192	201	168	216	198	79							1054
PHARMACY													
DRUG Doses	1563	2431	2368	3087	2357	3316							15,122
DRUG REVENUE	\$ 137,123	\$ 110,214	\$ 143,635	\$ 148,267	\$ 114,441	\$ 169,514	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 823,193

PIONEER MEMORIAL CLINIC - DECEMBER 2021

Provider	Measure	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	Total	
Dr. Lion	Patient Hours Available	6.5					6.5	6.5	6.5					6.5	6.5	6.5																		45.5
	Patients Seen	7					7	6	1					5	5	3																		34
	No Shows	0					0	0	1					2	1	0																		4
	Patient Cancellations	0					1	1	0					0	1	0																		3
	Clinic Cancellations	1					2	8	8					3	4	7																		33
	Pts. Per Available Hour	1.1					1.1	0.9	0.2					0.8	0.8	0.5																		0.7
	No Show Rate	0%					0%	0%	10%					20%	9%	0%																		5%
	Patient Cancel Rate	0%					10%	7%	0%					0%	9%	0%																		4%
Clinic Cancel Rate	13%					20%	53%	80%					30%	36%	70%																		45%	
Danielle Mateleska	Patient Hours Available	6	6.5	6.5			6	3	6.5	6.5						6.5	6.5	6.5			5.75	6.5	5.5	2.5				6.5	6.5	6.5	4.5		104.75	
	Patients Seen	7	6	6			12	5	10	9						9	11	11			9	7	9	5				8	9	10	7		150	
	No Shows	0	2	1			1	0	1	0						0	0	0			0	2	1	0				1	1	0	0		10	
	Patient Cancellations	1	0	1			0	1	0	2						0	1	0			1	1	1	0				1	0	0	1		11	
	Clinic Cancellations	0	0	0			0	0	0	0						1	1	0			0	0	0	0				1	0	0	0		3	
	Pts. Per Available Hour	1.2	0.9	0.9			2.0	1.7	1.5	1.4						1.4	1.7	1.7			1.6	1.1	1.6	2.0				1.2	1.4	1.5	1.6		1.4	
	No Show Rate	0%	25%	13%			8%	0%	9%	0%						0%	0%	0%			0%	20%	9%	0%				9%	10%	0%	0%		6%	
	Patient Cancel Rate	13%	0%	13%			0%	17%	0%	18%						0%	8%	0%			10%	10%	9%	0%				9%	0%	0%	13%		6%	
Clinic Cancel Rate	0%	0%	0%			0%	0%	0%	0%						10%	8%	0%			0%	0%	0%	0%				9%	0%	0%	0%		2%		
Antoinette Teixeira	Patient Hours Available	6.5	4.5	6.5			6.5	6.5	6.5	6.5	6.5				6.5	6.5	6.5				6.5	6.5	6.5	3						6.5	6.5		105	
	Patients Seen	3	0	0			2	2	1	1	0				0	3	1				0	3	0	1						1	0		18	
	No Shows	0	0	0			0	0	0	0	0				0	0	0				0	0	0	0						0	0		0	
	Patient Cancellations	0	0	0			0	2	0	0	0				0	0	0				0	0	0	0						0	1		3	
	Clinic Cancellations	0	0	0			0	0	0	0	0				0	0	0				0	0	0	0						0	0		0	
	Pts. Per Available Hour	0.5	0.0	0.0			0.3	0.3	0.2	0.2	0.0				0.0	0.5	0.2				0.0	0.5	0.0	0.3						0.2	0.0		0.2	
	No Show Rate	0%	N/A	N/A			0%	0%	0%	0%	N/A				N/A	0%	0%				N/A	0%	N/A	0%						0%	0%		0%	
	Patient Cancel Rate	0%	N/A	N/A			0%	50%	0%	0%	N/A				N/A	0%	0%				N/A	0%	N/A	0%						0%	100%		14%	
Clinic Cancel Rate	0%	N/A	N/A			0%	0%	0%	0%	N/A				N/A	0%	0%				N/A	0%	N/A	0%						0%	0%		0%		
PMC TOTALS	Patient Hours Available	19	11	13			19	16	19.5	13	6.5			6.5	13	19.5	13	6.5			12.25	13	12	5.5				6.5	6.5	13	11		255.25	
	Patients Seen	17	6	6			21	13	12	10	0			5	5	15	12	11			9	10	9	6				8	9	11	7		202	
	No Shows	0	2	1			1	0	2	0	0			2	1	0	0	0			0	2	1	0				1	1	0	0		14	
	Patient Cancellations	1	0	1			1	4	0	2	0			0	1	0	1	0			1	1	1	0				1	0	0	2		17	
	Clinic Cancellations	1	0	0			2	8	8	0	0			3	4	8	1	0			0	0	0	0				1	0	0	0		36	
	Pts. Per Available Hour	0.9	0.5	0.5			1.1	0.8	0.6	0.8	0.0			0.8	0.4	0.8	0.9	1.7			0.7	0.8	0.8	1.1				1.2	1.4	0.8	0.6		0.8	
	No Show Rate	0%	25%	13%			4%	0%	9%	0%	N/A			20%	9%	0%	0%	0%			0%	15%	9%	0%				9%	10%	0%	0%		5%	
	Patient Cancel Rate	5%	0%	13%			4%	16%	0%	17%	N/A			0%	9%	0%	7%	0%			10%	8%	9%	0%				9%	0%	0%	22%		6%	
Clinic Cancel Rate	5%	0%	0%			8%	32%	36%	0%	N/A			30%	36%	35%	7%	0%			0%	0%	0%	0%				9%	0%	0%	0%		13%		

IRRIGON MEDICAL CLINIC - DECEMBER 2021

Provider	Measure	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	Total	
Taylor Muenchow	Patient Hours Available	8	8	8				7.5	8	8	8				7.5	7	8	8				8	8	3.5					7.5	8	8		129	
	Patients Seen	9	10	8				7	9	8	5				7	10	8	9				10	12	5					12	4	8		141	
	No Shows	1	1	2				1	0	3	0				1	1	1	2				2	0	0					1	2	0		18	
	Patient Cancellations	0	1	0				1	1	0	1				1	0	1	1				0	0	0					0	1	0		8	
	Clinic Cancellations	0	0	0				0	0	0	0				0	0	0	0				0	0	2					0	0	0		2	
	Pts. Per Available Hour	1.1	1.3	1.0				0.9	1.1	1.0	0.6				0.9	1.4	1.0	1.1				1.3	1.5	1.4					1.6	0.5	1.0		1.1	
	No Show Rate	10%	8%	20%				11%	0%	27%	0%				11%	9%	10%	17%				17%	0%	0%					8%	29%	0%		11%	
	Patient Cancel Rate	0%	8%	0%				11%	10%	0%	17%				11%	0%	10%	8%				0%	0%	0%					0%	14%	0%		5%	
Clinic Cancel Rate	0%	0%	0%				0%	0%	0%	0%				0%	0%	0%	0%				0%	0%	29%					0%	0%	0%		1%		
Jamie Reed	Patient Hours Available	3.5	6.5	6.5				6.5	6	6.5	5.5	6.5			5.5	6	6.5	6.5	6.5			6.5											85	
	Patients Seen	2	1	1				1	3	0	1	1			1	3	1	3	1			2												21
	No Shows	0	0	0				2	0	0	0	0			0	0	0	0	2			1												5
	Patient Cancellations	0	0	0				0	0	0	0	0			0	0	0	0	2			1												3
	Clinic Cancellations	0	0	0				0	0	0	0	0			0	0	0	0	0			0												0
	Pts. Per Available Hour	0.6	0.2	0.2				0.2	0.5	0.0	0.2	0.2			0.2	0.5	0.2	0.5	0.2			0.3												0.2
	No Show Rate	0%	0%	0%				67%	0%	N/A	0%	0%			0%	0%	0%	40%	N/A			25%												17%
	Patient Cancel Rate	0%	0%	0%				0%	0%	N/A	0%	0%			0%	0%	0%	0%	40%			25%												10%
Clinic Cancel Rate	0%	0%	0%				0%	0%	N/A	0%	0%			0%	0%	0%	0%	0%			0%												0%	
Jon Watson	Patient Hours Available							8	7.5	8	8				8	7.5	7	8											7.5	8			77.5	
	Patients Seen							13	14	14	15				13	14	13	15											11	15			137	
	No Shows							0	2	0	0				2	2	0	0										4	2			12		
	Patient Cancellations							0	0	0	0				0	0	1	1										1	1			4		
	Clinic Cancellations							0	0	0	0				0	0	0	0										0	0			0		
	Pts. Per Available Hour							1.6	1.9	1.8	1.9				1.6	1.9	1.9	1.9											1.5	1.9			1.8	
	No Show Rate							0%	13%	0%	0%				13%	13%	0%	0%											25%	11%			8%	
	Patient Cancel Rate							0%	0%	0%	0%				0%	0%	7%	6%											6%	6%			3%	
Clinic Cancel Rate							0%	0%	0%	0%				0%	0%	0%	0%											0%	0%			0%		
IMC TOTALS	Patient Hours Available	11.5	14.5	14.5				14.5	21	22.5	21.5	14.5			13.5	21	20.5	22.5	14.5			6.5	8	8	3.5				15	16	8		291.5	
	Patients Seen	11	11	9				14	24	23	24	6			14	24	24	26	10			2	10	12	5				23	19	8		299	
	No Shows	1	1	2				2	3	0	3	0			2	3	1	1	4			1	2	0	0				5	4	0		35	
	Patient Cancellations	0	1	0				0	1	1	0	1			0	1	1	2	3			1	0	0	0				1	2	0		15	
	Clinic Cancellations	0	0	0				0	0	0	0	0			0	0	0	0	0			0	0	0	2			0	0	0		2		
	Pts. Per Available Hour	1.0	0.8	0.6				1.0	1.1	1.0	1.1	0.4			1.0	1.1	1.2	1.2	0.7			0.3	1.3	1.5	1.4				1.5	1.2	1.0		1.0	
	No Show Rate	8%	8%	18%				13%	11%	0%	11%	0%			13%	11%	4%	3%	24%			25%	17%	0%	0%				17%	16%	0%		10%	
	Patient Cancel Rate	0%	8%	0%				0%	4%	4%	0%	14%			0%	4%	4%	7%	18%			25%	0%	0%	0%				3%	8%	0%		4%	
Clinic Cancel Rate	0%	0%	0%				0%	0%	0%	0%	0%			0%	0%	0%	0%	0%			0%	0%	0%	29%				0%	0%	0%		1%		

IONE COMMUNITY CLINIC - DECEMBER 2021

Provider	Measure	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	Total
Eileen McElligott	Patient Hours Available		8				8			8				8							8			4				1.5			8		53.5
	Patients Seen		9				9			12				14							8			4				3			6		65
	No Shows		0				0			0				0							0			0				0			0		0
	Patient Cancellations		1				0			0				0							0			0				0			0		1
	Clinic Cancellations		0				0			0				0							0			0				0			0		0
	Pts. Per Available Hour		1.1				1.1			1.5				1.8							1.0			1.0				2.0			0.8		1.2
	No Show Rate		0%				0%			0%				0%							0%			0%				0%			0%		0%
	Patient Cancel Rate		10%				0%			0%				0%							0%			0%				0%			0%		2%
	Clinic Cancel Rate		0%				0%			0%				0%							0%			0%				0%			0%		0%

AGREEMENT FOR REMOTE PHARMACIST SERVICES

This Agreement for Remote Pharmacist Services ("Agreement"), is made and entered into by and between Morrow County Health District dba Pioneer Memorial Hospital and Nursing Facility, a critical access hospital with its principal place of business at 564 E Pioneer Drive, Heppner, OR 97836 ("Hospital") on behalf of its licensed pharmacies listed on **Exhibit A** hereto (each referred to individually as a "Hospital Pharmacy") and **Pipeline Health Holdings LLC**, Delaware limited liability company with an office located at **88 Kearny Street, 21st Floor, #2103, San Francisco, CA 94108** ("Pipeline") to be effective as of the _____ day of _____, 2022 (the "Effective Date").

WHEREAS, Hospital wishes to expand the capabilities of the Hospital's Pharmacies through the 24-hour availability of qualified pharmacists to review, verify, evaluate, supervise the fulfillment of and provide consultation on medications dispensed through the Hospital Pharmacies, as described in detail on **Exhibit B** ("Pharmacy Services"), and Pipeline is agreeable to providing such services through the qualified pharmacists that Pipeline employs for the performance of such services via remote connection to the Hospital's Pharmacies pharmacy information systems ("Pharmacy Systems"); and

WHEREAS, Hospital is willing to grant access to its Pharmacy and Clinical Systems for the performance of Pharmacy Services on the terms and conditions set forth below.

NOW, THEREFORE, in consideration of the mutual covenants and agreements contained herein, the parties agree as follows:

AGREEMENT

ARTICLE 1. PIPELINE'S OBLIGATIONS

1.1 Remote Pharmacy Services.

Pipeline shall use commercially reasonable efforts to provide the services of pharmacists (the "Pipeline Pharmacists") to provide Pharmacy Services in designated scheduled shifts. Pharmacy Services shall be performed in accordance with the requirements of this Article 1.

1.2 Access by Pipeline Pharmacists to Pharmacy Systems. In the provision of Pharmacy Services, Pipeline shall at all times observe all of the following terms and conditions:

1.2.a Pipeline shall reasonably cooperate with the Hospital Pharmacy's Health Information Management (HIM) Manager to obtain and maintain, at all times in accordance with Hospital policy, unique user identification and password-protected access to the hospital information system and electronic health record system for each Pipeline Pharmacist. Pipeline will provide reasonable assistance in the completion of security documentation necessary for Pipeline Pharmacists to maintain Pharmacy System access.

1.2.b Pipeline shall inform the Hospital Pharmacy in the event a Pipeline Pharmacist with a Hospital user identification separates from Pipeline or ceases to provide Pharmacy Services for one or more Hospital Pharmacies, and Pipeline shall cooperate as requested by Hospital to terminate that Pipeline Pharmacist's authorization for access to the Hospital Pharmacy System.

1.3 **Pipeline Pharmacists.** Pipeline represents and warrants that the Pipeline Pharmacists are properly licensed to perform the Pharmacy Services. Pipeline shall immediately discontinue the provision of Pharmacy Services by any Pipeline Pharmacist who: (a) has any disciplinary action taken against him or her, including but not limited to, revocation, suspension, or any limitation imposed on his or her pharmacists license; (b) has been excluded from participation in any state or federal health care program, including but not limited to, Medicare or Medicaid; (c) has been convicted of any criminal offense involving controlled substances; or (d) fails to observe the data security and password protection procedures implemented by Hospital of which Pipeline and the Pipeline Pharmacist have notice. Pipeline shall immediately notify Hospital concerning the occurrence of any of the events described in this Section 1.4.

1.4 **Supervision; Place of Performance.** Pipeline shall provide a Pharmacy Director responsible for oversight of the performance of the Pharmacy Services. The Pharmacy Director shall be available to Hospital on a regular basis to address matters relating to the provision of professional pharmacist services. Pipeline represents and warrants that each Pipeline Pharmacist shall perform Pharmacy Services in a work environment containing administrative, technical and physical safeguards that fully protect medical records, protected health information ("PHI") and data from use or disclosure other than to the extent necessary to perform Pharmacy Services.

1.5 **Background Checks.** Pipeline shall perform reasonable background checks, pre-employment drug screening and credentialing processes on Pipeline Pharmacists to assure their qualifications and continuing eligibility to perform Pharmacy Services. Pipeline agrees to provide an attestation as to the successful completion of all background checks.

1.6 **Employer Responsibilities.** Pipeline shall be solely responsible for the satisfaction of any and all obligations, including employment obligations, with respect to any Pipeline Pharmacist that it employs to assist in its performance of this Agreement.

1.7 **Independent Contractor.** It is agreed that Hospital and Pipeline are independent contractors. It is understood that no relationship of employment, partnership, joint venture or agency is created or intended to be created by the Agreement and that no employee or contractor of Pipeline shall have any claim under this Agreement against Hospital for wages or employee benefits of any kind such as paid time off, social security contributions, workers' compensation, disability or unemployment insurance. Pipeline shall be solely responsible for any claim, liability or expense related to, any and all income tax withholding, social security tax, unemployment tax or any other tax obligations related to the compensation payable by Hospital to Pipeline under this Agreement or the compensation payable by Pipeline to any Pipeline Pharmacist.

1.8 Covered Entity/Business Associate. Each Pipeline Pharmacist shall be deemed a member of Hospital's "workforce" for purposes of compliance with the Health Insurance Portability and Accountability Act of 1996 as subsequently amended, and all regulations promulgated thereunder (altogether referred to as "HIPAA"). To the extent that Pipeline's performance of Pharmacy Services requires Pipeline separate and apart from a Pipeline Pharmacist to generate or receive protected health information regarding Hospital's patients, Pipeline shall be a "Business Associate" of Hospital and each Hospital Pharmacy as that term is defined under HIPAA, and will execute a Business Associate Agreement in mutually acceptable form documenting such Business Associate relationship with Hospital. Pipeline agrees to access only the minimum amount of data necessary to perform Pharmacy Services.

1.9 Retention of Data.

1.9.a Pipeline acknowledges and agrees that the Hospital Pharmacy is the sole owner of all data derived from a Hospital Pharmacy's medical records ("Hospital Data") accessed by the Pipeline Pharmacists. Pipeline shall be entitled to use aggregated Hospital Data for its own business purposes, provided such use (a) complies with all applicable laws, and (b) in no way identifies any patient or hospital, directly or indirectly.

1.9.b Following the execution of a Business Associate Agreement as required by section 1.9 above, Pipeline shall be allowed to download that portion of Hospital Data involving prescriptions reviewed, entered or filled by Pipeline Pharmacists, as necessary to comply with Pharmacy Board requirements. Such downloaded records shall be retained by Pipeline for the period required by Pharmacy Board regulations.

1.9.c Pipeline shall work cooperatively with Hospital to assure that Hospital's data security policies and procedures are followed in connection with Pipeline's downloading and retention of Hospital Data.

1.10 Compliance with Hospital Policies and Applicable Laws and Standards.

1.10.a Pipeline shall ensure that all Pipeline Pharmacists comply with Hospital's applicable pharmacy policies and procedures, which shall be furnished to Pipeline upon execution of this Agreement. In the event of changes or updates to the Hospital's policies and procedures, it is the responsibility of the hospital to provide this information to Pipeline. It is then Pipeline's responsibility to ensure that all Pipeline Pharmacists are aware and act in accordance with these new or changed policies.

1.10.b Pipeline Pharmacists shall provide all Pharmacy Services in conformance with applicable laws, rules and regulations. Pipeline shall provide assistance as reasonably requested by Hospital in order for Hospital to comply with applicable accrediting bodies as well as federal, local, and state laws and regulations, including the requirements relating to participation in the Medicare and Medicaid programs and applicable standards of The Joint Commission. Pipeline shall not differentiate or discriminate in the employment or engagement of Pipeline Pharmacists or the provision of Pharmacy Services on any basis in violation of any

applicable state, federal or local law or regulation or Hospital policy of which Pipeline has notice.

1.11 **Accreditation Standards.** Pipeline shall cooperate with Hospital in meeting or exceeding the standards of The Joint Commission or other regulatory agencies. Pipeline shall provide to the hospital evidence that each Pipeline Pharmacist has successfully completed an ongoing professional competency assessment program that meets the requirements of appropriate regulatory agencies. If the hospital requires a Pipeline pharmacy staff member to complete additional competency assessment or clinical training programs above and beyond the standard Pipeline programs, the hospital will be charged an hourly fee to complete these programs. The fee will be equivalent to the Remote Supplemental Staffing fee listed in Exhibit D.

ARTICLE 2. **HOSPITAL'S OBLIGATIONS**

2.1 **Hospital Policies and Procedures.** Hospital shall provide Pipeline with applicable Hospital policies, procedures and guidelines pertaining to the performance of Pharmacy Services and shall be responsible for orienting each Pipeline Pharmacist in such policies and procedures, including without limitation HIPAA and other corporate compliance policies. Hospital shall designate an individual who shall be responsible for coordinating review and feedback to Pipeline on the Pharmacy Services and shall serve as the Hospital contact person for Pipeline.

2.2 **IT Interface.** Hospital agrees to the following in order to enable EMR integration with Pipeline.

2.2.a Permit and facilitate the necessary interfaces from Customer EMR(s) to enable transmission of data via HL7 interface, or similar means in order for PipelineRx to capture a minimum of patient demographic data (ADT), Pharmacy Order data (OMP, RDE), and Lab Data (ORM, ORU).

2.2.b Facilitate the transmission of this order to Pipeline using industry standard and approved protocols. Pipeline's standard process is to add/modify interfaces to include a point to point communication to the appropriate Pipeline server, through an encrypted VPN connection.

2.3 **Billing and Collection.** Hospital shall retain all right and responsibility for billing and collecting payment from patients and other responsible parties including health plans, health insurance companies and government healthcare payments programs for medications and other pharmacy items dispensed by the Hospital Pharmacy.

2.4 **Recruitment Restrictions.** Hospital acknowledges that Pipeline has incurred substantial recruitment, screening, and marketing expenses with respect to Pipeline Pharmacists, and that the identity, address, work history, and any other personal information of

the Pipeline Pharmacists constitute trade secrets of Pipeline. During the two (2) year period after either the presentation of Pipeline Pharmacist to Hospital or the completion of the Pipeline Pharmacist's assignment to Hospital, whichever occurs later (the "Non-Solicitation Period"), Hospital agrees not to solicit, employ, or engage such Pipeline Pharmacist's services, either directly or through any non-employee direct or indirect contractor, subcontractor, or staffing firm relationship, other than through Pipeline, unless Pipeline and Hospital arrive at mutually agreeable terms for any such employment or engagement sought by Hospital, including a recruiting fee payable to Pipeline.

2.5 Remote access for the Pipeline Pharmacists will be provided through mutually agreed upon remote access technologies. Remote access will be established for all applicable Pipeline Pharmacists no later than 2 weeks prior to the agreed upon date for implementation of remote pharmacy services.

2.6 For the delivery of Pharmacy Services by Pipeline, medication orders will be transmitted to Pipeline by the Hospital.

ARTICLE 3. BILLING AND PAYMENT

3.1 **Invoice and Payment.** Pipeline shall bill Hospital monthly for shifts of Pharmacy Services performed, at the rate specified in **Exhibit C**, and payment in full shall be due within 30 days of Hospital's receipt of each invoice. Pipeline invoices reflect payroll already paid to Pipeline Pharmacists for the Pharmacy services provided to Hospital. A finance charge of 18% APR (or the maximum rate allowed by law, if lower) will be assessed on amounts outstanding for more than 30 days. In the event that there is a dispute regarding any invoice, Hospital must bring it to Pipeline's attention within 30 days of the date of invoice. Pipeline shall work promptly with Hospital to review and resolve any question or dispute regarding any invoice. In the event that the hospital falls more than 90 days in arrears on any invoices that are not being disputed, all on-going Pharmacy Services pricing will be temporarily increased by 25% until such time as the account is brought back in to good standing. In the event that service is suspended by PipelineRx due to lack of payment, there may be a fee assessed for the recommencement of service.

3.1a **Value Added Services.** Please see Exhibit D for additional services offered by Pipeline for this Agreement.

ARTICLE 4. TERM AND TERMINATION

4.1 **Term.** This Agreement shall commence on the Effective Date and continue in effect for 3 years thereafter ("Term"). This Agreement will be automatically renewed for one year periods unless terminated by either party by written notice at least ninety (90) days prior to the end of the then applicable term.

4.2 **Insolvency.** This Agreement may be terminated by the other party in the event that a party becomes bankrupt, seeks protection from its creditors, or invokes protection under any federal or state insolvency legislation.

ARTICLE 5. **CONFIDENTIALITY**

5.1 **This Agreement.** This Agreement and all Pipeline materials, manuals, reports, and documents are personal and confidential between the parties, except as to the Hospital Pharmacies or a party's own legal counsel or financial advisors. Except as required by law, the parties hereto shall not release information concerning this Agreement to any person without the consent of the other party. This prohibition against release of information shall not apply to: (a) any information required to be released to fiscal intermediaries, public agencies or commissions with the power to compel disclosure of such information; or (b) any information otherwise compelled to be released by process of law.

5.2 **Proprietary Information.** Each party acknowledges that, in connection with its performance under this Agreement, such party may or will have access to proprietary business information and trade secrets of the other party (the "Confidential Information"). Accordingly, each party shall protect the Confidential Information received from the other with the same level of diligence that it protects its own Confidential Information. The foregoing obligation shall not apply to any portion of the Confidential Information that is required to be disclosed by law, provided that the party receiving a demand for disclosure shall notify the other of any such disclosure required by law, as soon as possible after receipt of legal process, and shall cooperate with efforts of the owner of the Confidential Information to protect it from disclosure to the extent possible.

ARTICLE 6. **ACCESS TO BOOKS AND RECORDS**

In the event Pipeline provides services to Hospital valued at \$10,000 or more over a 12-month period, Pipeline shall make available its books, documents and records to Hospital or to the Secretary of the U.S. Department of Health & Human Services, the U.S. Comptroller General, and their representatives, upon the request of any of them, to the extent necessary to certify the nature and extent of Hospital's costs and payment for services provided by Pipeline. Such books, documents and records shall be preserved and available for four (4) years after the furnishing of services. If Pipeline provides such services through a sub-contract with a related organization worth \$10,000 or more over a 12-month period, the subcontract shall also contain a clause permitting access by Hospital, the Secretary, the Comptroller General, and their representatives to books and records of the related organization.

ARTICLE 7. **CHANGES IN LAW**

In the event either party determines in good faith, based on written advice of qualified legal counsel, that this Agreement or the transactions contemplated hereunder, or a party's conduct or performance hereunder, poses a material risk of illegality or a party's restriction or

exclusion from any government or private health care payment program, the party receiving such counsel advice shall provide notice to the other party and the parties shall promptly meet and confer to agree upon revised terms to this Agreement to remove such illegality or other jeopardy. In the event the parties are unable in good faith to agree upon revised terms and conditions, or to otherwise correct the offending conduct, within 30 days of the notice, either party may terminate this Agreement immediately upon written notice to the other party.

ARTICLE 8. **INSURANCE AND INDEMNIFICATION**

8.1 **Pipeline Insurance.** Throughout the term of this Agreement, Pipeline shall maintain professional liability coverage for Pipeline Pharmacists with an aggregate limit of not less than \$3 million, and per occurrence limits of not less than \$1 million. Pipeline shall also provide general liability coverage for the provision of Pharmacy Services, with an aggregate limit of not less than \$3 million, and per occurrence limits of not less than \$1 million. Pipeline will provide Workers' Compensation insurance coverage for Pipeline Pharmacists in accordance with applicable state laws.

8.2 **Hospital Pharmacy Insurance.** Throughout the term of this Agreement, Hospital shall maintain general and professional liability coverage for Hospital Pharmacy and its staff and all activities, with aggregate limits of not less than \$3 million, and per occurrence limits of not less than \$1 million.

8.3 **Indemnification.** Each party shall indemnify, defend, and hold harmless the other and its owners, affiliates, directors, trustees, officers, and employees from and against any and all liability, loss, expense (including reasonable attorneys' fees), damages or claims for injury or damages arising out of or relating to its own performance of this Agreement, but only in proportion to and to the extent such liability, loss, expense, or claim for injuries or damages are caused by or result from the negligent or willful acts or omissions of the indemnifying party, its directors, trustees, officers, or employees.

8.4 **Limitation of Liability.** Hospital agrees that Pipeline's total liability for any claims, losses, expenses, or damages whatsoever arising out of, or in any way related to this Agreement shall not exceed the lesser of the total amount paid by Hospital to Pipeline under this Agreement during the preceding 12 month period for the involved Pipeline Pharmacist's assignment, or the total amount paid on behalf of Pipeline by insurers under coverages applicable to the claim. This shall be the Hospital's exclusive remedy at law or in equity. HOSPITAL FURTHER AGREES THAT PIPELINE SHALL NOT BE LIABLE FOR INCIDENTAL OR CONSEQUENTIAL DAMAGES, INCLUDING LOST PROFITS, WHETHER OR NOT FORSEEABLE.

ARTICLE 9. **GENERAL PROVISIONS**

9.1 **Binding on Successors in Interest.** This Agreement shall be binding upon and inure to the benefit of the assigns and successors of the parties.

9.2 **Notice.** All notices, requests, demands or other communications required or permitted to be given under this Agreement shall be in writing and shall be delivered to the party to whom notice is to be given either (a) by personal delivery (in which case such notice shall be deemed given on the date of delivery); (b) by next business day courier service (e.g., Federal Express, UPS or other similar service) (in which case such notice shall be deemed given on the first business day following the date of deposit with the courier service); or (c) by United States mail, certified and first class postage prepaid (in which case such notice shall be deemed given on the third (3rd) day following the date of deposit with the United States Postal Service), and properly addressed as follows:

If to **Hospital:** Morrow County Health District dba
Pioneer Memorial Hospital and Nursing Facility
564 E Pioneer Drive
Heppner, OR 97836

If to **Pipeline:** Pipeline Health Holdings LLC
88 Kearny Street, 21st Floor, #2103
San Francisco, CA 94108
Attn: Chief Executive Officer

9.3 **Severability.** The provisions of this Agreement shall be deemed severable and if any portion shall be held invalid, illegal or unenforceable for any reason, the remainder of this Agreement shall be effective and binding upon the parties.

9.4 **Captions.** Any captions to or headings of the articles, sections, subsections, paragraphs, or subparagraphs of this Agreement are solely for the convenience of the parties, are not part of this Agreement, and shall not be used for interpretation or determination of the validity of this Agreement.

9.5 **Entire Agreement.** The making, execution and delivery of this Agreement by the parties has not been induced by any representations, statements, warranties or agreements other than those herein expressed. This Agreement and all exhibits attached hereto embodies the entire understanding of the parties with respect to the Agreement's subject matter, and there are no further or other agreements or understandings, written or oral, in effect between the parties relating to the subject matter of this Agreement. This Agreement supersedes and terminates any previous oral or written agreements between Pipeline and Hospital, or between Pipeline and any Hospital Pharmacy, relating to the Pharmacy Services. This Agreement may be amended or modified only by an instrument in writing signed by both parties to this Agreement.

9.6 **Waiver of Provisions.** Any waiver of any terms, covenants and/or conditions hereof must be in writing and signed by the party to be bound. A waiver of any of the terms, covenants and/or conditions hereof shall not be construed as a waiver of any other terms, covenants and/or conditions hereof, nor shall any waiver constitute a continuing waiver.

9.7 **Governing Law; Dispute Resolution.** This Agreement shall be governed by and construed in accordance with the laws of the State of California, without regard to conflicts of laws. In the event any disagreement, dispute or claim (collectively, a "Dispute") arises between the parties with respect to the enforcement or interpretation of this Agreement or any specific terms and provisions set forth in this Agreement or an alleged breach hereof, such Dispute shall be settled by binding arbitration before one arbitrator in accordance with the rules of the American Arbitration Association or such other procedures as the parties mutually agree using a single arbitrator. In rendering a decision, the arbitrator shall be bound by the terms of this Agreement and California law. Arbitration shall be held in San Francisco, California.

9.8 **Force Majeure.** Neither party shall be liable nor deemed to be in default for any delay, interruption or failure in performance under this Agreement that results, directly or indirectly, from Acts of God, civil or military authority, war, accidents, fires, explosions, earthquakes, floods, failure of transportation, machinery or supplies, vandalism, riots, civil disturbances, strike or other work interruptions by either party's employees, or any similar or dissimilar cause beyond the reasonable control of either party. However, both parties shall make good faith efforts to perform under this Agreement upon the occurrence of any such event.

9.9 **Gender and Number.** Whenever the context hereof requires, the gender of all words shall include the masculine, feminine, and neuter, and the number of all words shall include the singular and plural.

9.10 **Counterparts; Electronic Signatures.** This Agreement may be executed in any number of counterparts and by facsimile, e-mail, pdf or other electronic medium, each of which electronic counterparts shall be deemed an original, and all such counterparts together shall constitute but one and the same instrument.

9.11 **Authority.** The parties represent and warrant that they are free to enter into this Agreement and to perform each of the terms and conditions of the Agreement. Hospital expressly acknowledges and agrees that no Pipeline Pharmacist is authorized to execute or enter into any binding commitment on behalf of Pipeline.

9.12 **Third Parties.** This Agreement is not intended and shall not be construed to create any rights for any third party.

9.13 **Incorporation of Exhibits.** All schedules, exhibits, addenda, and recitals referred to in this Agreement are an integral part of this Agreement and are incorporated herein by this reference.

[SIGNATURES FOLLOW]

IN WITNESS WHEREOF, the parties have signed this Agreement for Remote Pharmacist Services as of the date last signed below, to be effective as of the Effective Date.

HOSPITAL:
Morrow County Health District dba
Pioneer Memorial Hospital and Nursing Facility

PIPELINE:
Pipeline Health Holdings LLC

By: _____

By: _____

Name: _____

Name: _____

Title: _____

Title: _____

Date of Execution by Hospital:

Date of Execution by Pipeline:

**AGREEMENT FOR
REMOTE PHARMACIST SERVICES**

**EXHIBIT A
HOSPITAL PHARMACIES**

**Morrow County Health District dba
Pioneer Memorial Hospital and Nursing Facility
564 E Pioneer Drive
Heppner, OR 97836**

**EXHIBIT B
PHARMACY SERVICES**

**AGREEMENT FOR
REMOTE PHARMACIST SERVICES**

Basic Pharmacy Services will be defined as the following: 1. Medication orders will be transmitted to PipelineRx by Hospital. The Hospital will provide PipelineRx with the required system access necessary to review medication orders transmitted to PipelineRx. 2. Review of medication orders for appropriateness. 3. Entry or verification of medication orders into client pharmacy computer systems. 4. Follow up with appropriate members of the client hospital nursing, pharmacy or other medical staff to clarify any issues with the medication orders. 4. Drug information provided to medical staff or other members of the healthcare team at hospital.

A Medication Line Order is defined as any single pharmacist action in reference to an individual drug therapy transmitted to PipelineRx which shall include but is not limited to: medication orders received, reviewed, entered, or verified; modification in orders; or discontinuation of a therapy. Line items may also include time change requests, duplicate orders, and patient demographic changes/additions that may or may not involve a physician order form. Furthermore, requirement for Pipeline Pharmacist to create duplicate documentation of pharmacist clinical activity or interventions in the hospital information system will result in an additional line order charge to the hospital. There are no additional charges or line order charges for calls to/from nursing/hospital staff; therapeutic substitution or other formulary initiatives; IV to PO or other clinical initiatives; review of labs, allergy, renal dosing, drug/drug interactions and other interventions.

Telepharmacy/remote medication order entry and verification with the following hours:

Monday-Friday	12:00 AM to 12:00 AM (24 Hours)
Saturday and Sunday	12:00 AM to 12:00 AM (24 Hours)
Holidays (6)	12:00 AM to 12:00 AM (24 Hours)

1. Holidays

- a. PipelineRx holidays are the following: New Year's Day, Memorial Day, Fourth of July, Labor Day, Thanksgiving Day, and Christmas Day, unless specified in this contract.
- b. All coverage during the specified holidays are billed at twice the normal rate specified in Exhibit C.
- c. All coverage of holidays not specified in the contract are billed at the emergency staffing/on-demand rate as described in Exhibit D.

2. Scheduled downtime and outages

- a. Any scheduled system downtime or outage in which Pipeline remote pharmacist services will not be required must be communicated to PipelineRx in writing no less than 30 days in advance to avoid billing during these hours.
- b. In the event that 30 days' notice is not given, PipelineRx staff will be available for phone support to the client and the hours will be billed at the normal rate.

Turnaround Times*

- 90-day average routine order turnaround time will be 20 minutes
- 90-day average STAT order turnaround time will be 10 minutes

**Any order that requires pharmacist Intervention will not be calculated as part of the Turn Around Time formula, however, if Customer is unhappy with Pipeline's turnaround time performance, Customer may initiate termination of this Agreement provided PipelineRx is allowed 60 days to correct the non-performance issue.*

Pipeline, as a clinical services company will provide the following information about Pipeline pharmacists upon request to our clients in order to receive access codes to the Hospitals' information system(s):

1. Full name of staff, including maiden name or previous name, if changed
2. Date of birth
3. Pipeline employee number
4. A list of all States in which staff hold a license
5. A copy of these licenses
6. City and State of residence
7. PipelineRx telephone number
8. PipelineRx job description

In addition to the above information, PipelineRx will provide a signed attestation verifying the following has been checked and the staff has met or exceeded PipelineRx's requirements for employment:

1. OIG check
2. EPLS check
3. 9 panel drug screen
4. Clinical Competency test
5. Background Check

On an annual basis, Pipeline will provide upon request confirmation that the following has been successfully completed:

1. Annual OIG check
2. Annual EPLS check
3. Annual Clinical Competency test

EXHIBIT C FEE SCHEDULE

- Fee of \$3.70/ per order with a minimum of 480 medication order lines per month
- Double time billing rate for Six PipelineRx Holidays (\$7.40/order)
- Fee of \$40 per patient per event for Remote IV Admixture Camera Review with a minimum fee of two (2) reviews charged per month. Hospital to utilize Pipeline's software as the program, on hospital resources.
- Antimicrobial Stewardship Services
 - For each patient that meets the client-defined antimicrobial stewardship inclusion criteria, the PipelineRx pharmacists will perform the clinical activities listed below upon initial patient identification and subsequent reviews at clinically appropriate intervals thereafter for a fee of \$60 per patient review with a minimum of five (5) patient reviews per month ASP Patient Review Includes:
 - Patient Clinical evaluation
 - Antimicrobial Therapy evaluation
 1. Antimicrobial Dose and frequency
 2. Antimicrobial Duration of Therapy
 3. Therapy Optimization per guidelines or culture results
 4. Evaluate for De-escalation
 5. IV to PO Evaluation
 6. Therapeutic Recommendations given to provider or adjustments are made per protocol (If Applicable)
- Fee of \$3.70/per medication for Admission Medication Reconciliation
 - For each patient that PipelineRx receives an Admission Medication Reconciliation request for, the PipelineRx pharmacist will compare the home medication list sent by nursing to the active medications ordered for the patient. If the pharmacist finds any discrepancies between what has been ordered for the patient and the prescription medications and/or clinically significant over-the-counter medications the patient was taking at home, he/she will contact the nurse who will reach out to the provider to clarify if it was an intended discrepancy. Discrepancies may include omitted medications or differences in formulation, dose, and/or frequency.
- Web Cam Clinical Oversight or Drug ID - \$5.00 per med

- Pipeline may increase its fees for Services, including License Fees, at the start of each calendar year. The amount of such increase will not exceed five percent (5%) per annum or the Consumer Price Index: Medical Care cost index per annum, whichever is less. Notification of price increases will be delivered in writing by Pipeline on or before December 1 of every year prior to price increases which will go into effect on January 1 of following year.
- Billing will commence ninety (90) days from contract execution or go-live whichever is earlier. If Customer is not live, a charge equal to the minimum charge above will be invoiced.

Please note: The prices included in this cost proposal are for remote medication order entry and verification services. This also includes all phone calls, management reports, clinical interventions and substitutions at no additional cost.

Please note: Any changes to mutually agreed-upon implementation or go-live dates by Client may be subject to penalties including forfeiting of designated discounts and the assessment of an additional implementation fee. All IT systems and pharmacist log-ins from Hospital must be confirmed by Pipeline as stable for no less than 2 weeks prior to go-live date. If this is not the case, then Pipeline reserves the right to reschedule the go-live date at the client's expense. Any Hospital changes to IT infrastructure, IT systems, Queuing Systems, Connectivity to Hospital, or order transmissions process may be subject to fee adjustment. Any changes to Hospital's Clinical Information Systems that necessitate retraining of Pipeline staff will be billed at the designated rate for Remote Supplemental Staffing.

**AGREEMENT FOR
REMOTE PHARMACIST SERVICES**

**EXHIBIT D
VALUE ADDED OPTIONAL SERVICES**

PipelineRx is pleased to offer additional services to the Hospital. These services will be billed on a monthly basis as requested by the Hospital. These services are in addition to the Pharmacy Services as outlined in Schedule 1.

- **Emergency Staffing (Less than 3 days' notice) - \$105.00 per hour**
- **On-Demand Short Term Coverage**
 1. **3 -14 days' notice** – 200% of contracted rate
 2. **14 – 30 days' notice** – 175% of contracted rate
 3. **30 – 60 days' notice** – 150% of contracted rate
 4. **60 – 90 days' notice** – 125% of contracted rate
- **EMR systems conversion, System Cut-over, system enhancement – \$7,500**
- **Other optional, Advanced Remote clinical pharmacy services include (priced separately):**
 - Medication Reconciliation
 - Discharge / post-discharge patient counseling
 - Transitional care management
 - Antibiotic Stewardship
 - Formulary Management
 - Pharmacy Information System set-up/ consulting (order set development)
 - Long Term Care consulting and chart review

**NURSE PRACTITIONER SERVICES AGREEMENT
BETWEEN MORROW COUNTY HEALTH DISTRICT
AND VICKI KENT, ARNP**

This is an agreement between the MORROW COUNTY HEALTH DISTRICT (“District”) and **VICKI KENT** (“Provider”). The District requires the services of medical professionals to adequately serve patients in the District area. The District wishes to employ Provider to provide such services. Provider is a Nurse Practitioner, who will be licensed to practice in the state of Oregon, and will be qualified to provide such services.

Therefore, the parties agree as follows:

1. **Employment**: The District hereby employs Provider to provide patient care services at the District’s Irrigon Medical Clinic as their primary work site. Provider accepts said employment and agrees to provide such services. Provider shall assume and discharge all of their responsibilities hereunder on an ethical and professional basis consistent with the policies and objectives of the District, the Bylaws and Rules of the Medical Staff of the District, the requirements of Provider’s professional societies, and all applicable laws and regulations governing the services to be provided.
2. **Supervision**: In all matters concerning the performance and administration of this agreement, the District shall act through the CEO of the District (“CEO”). In administrative matters, Provider shall conform to the policies prescribed by the District’s Board of Directors and the CEO and shall report to the CEO. In regard to medical matters, Provider shall conform to the policies and directions of the Board, the CEO, and the Medical Staff.
3. **Duties**: Provider shall see patients two days per week at Irrigon Medical Clinic as scheduled and agreed upon between Provider and District.
4. **Paid Time Off and Continuing Education**: In each 12-month period of employment, Provider shall be entitled to:
 - a. Thirteen (13) days of paid time off (inclusive of vacation and sick time) to be “dumped” at the start of the contract. For the purposes of PTO payout upon termination of the employment relationship, 40% of PTO is considered “sick time” and will not be paid out.

- b. Expenses associated with CME programs up to a maximum of \$2,000 and 7 days per year.
 - c. District-recognized holidays which fall on the Provider's regularly scheduled work days.
- 5. **Benefits**: Provider shall be entitled to a \$1,500 per month stipend to independently purchase health insurance.
- 6. **Oregon Registration**: During the term of this agreement, Provider shall maintain their license as a Nurse Practitioner in Oregon. District will pay any fees required to maintain their Oregon license and their certification, including DEA licensing. Other fees may be covered upon approval from CEO. Failure on the part of Provider to keep their Oregon license current shall render this agreement null and void.
- 7. **Assistance with Collections**: All professional fees due or collected from patients for services rendered during the term of this Agreement shall be the property of the District. If necessary, Provider agrees to cooperate with the administration to facilitate the billing process. Patient discounted services or charity care are the sole responsibility of the Administration. Provider may make recommendations for patient discounted services.
- 8. **Compensation**: The District shall pay Provider compensation for their services hereunder in equal bi-weekly installments in accordance with the attached nurse practitioner compensation scale, plus annual cost of living (COLA) increases received by District employees each July. Providers employed part time (two days per week or less) shall be entitled to pro-rated compensation reflective of their FTE.
- 9. **Space, Utilities, Supplies and Equipment**: All space, utilities, office furniture, equipment and supplies for Provider to provide medical services hereunder shall be furnished by the District.
- 10. **Nonphysician Personnel**: All personnel required for Provider to meet their responsibilities hereunder shall be employed by the District and shall be subject to established District policies. The District shall determine, in consultation with Provider, the necessity for employment of additional personnel, if any.

11. **Insurance**: As to all activities of Provider within the scope of their responsibilities hereunder, Provider will be included within the public liability and malpractice insurance coverage carried by the District for its officers and employees. If, at the District's discretion, existing plans and procedures relating to public liability and malpractice insurance coverage are revised during the term of this agreement, Provider shall be subject to such revised plans and procedures. Provider shall not be responsible for any fees in connection herewith; any such fee shall be the responsibility of the District. If the District switches to another carrier and tail coverage would be needed for Provider, all fees associated with the switch would be paid for by the District.

12. **Reports and records**: Provider shall promptly, completely and accurately prepare and maintain or cause to be promptly, completely and accurately prepared and maintained all reports, claims, correspondence and records including all medical records, as required by District related to Professional Services rendered by Provider at District, which reports, claims, correspondence records and medical records shall belong solely to District. Failure to comply may result in suspension or fines pursuant to district policies.

Documentation must be completed within seven (7) days of the date the service was provided. Failure to comply with documentation requirements may result in contract termination.

13. **Evaluations**: Provider performance will be reviewed by District annually. District shall not be in breach of this Agreement if it fails to conduct the performance evaluation within the stated time periods.

14. **Term**: Unless otherwise terminated per this agreement, the term of this agreement shall be for the period beginning March 1, 2022 and shall expire one year later, February 28, 2023. The agreement may be renewed by consent of both parties.

15. **Termination**: This agreement may be terminated by either party without cause upon 90 days written notice. This agreement may be terminated for good cause at any time without notice. If either party is unable to fulfill its part of the agreement due to circumstances beyond its control, or if the District's annual tax base fails to provide sufficient funds to meet its

obligations hereunder, this agreement may be terminated without obligation on the part of either party.

16. **Resignation**: Provider agrees to give District a 90-day advance resignation notice in writing. District may terminate Provider's employment at any time following such notice if determined to be in the best interest of District. District will pay Provider through the notification period of 90 days if Provider was and remains in full conformance with all applicable District policies and provisions of this Agreement. At no time, including during the notification period, shall Physician:
 - a. Solicit District patients or inform District patients of their impending departure other than through District-authorized communication methods and content;
 - b. Offer employment or a contract to any District employee or contractor prior to one year after Provider's termination from employment by District or solicit or encourage any such person to leave the District;
 - c. Use District resources or time to compete or to prepare to compete.
17. **Governing Law**: This agreement shall be governed by, and construed in accordance with, the laws of the state of Oregon. To the extent permitted by law, all disputes arising from this agreement shall be filed in the Circuit Court of Morrow County, Oregon, to the exclusion of all courts which might have jurisdiction apart from this provision.
18. **Severability**: If any provision of this agreement or the application of any such provision shall be held invalid or unenforceable, the remainder of this agreement shall not be affected thereby.
19. **Attorney Fees**: In any litigation arising out of this agreement, the prevailing party shall be entitled to recover all reasonable expenses of litigation, including such attorney fees as the court may judge reasonable at trial and on any appeal.
20. **Assignment**: Neither party's rights and obligations pursuant to this agreement may be assigned or delegated without the other party's written consent.

21. **Entire Agreement:** As of the date of execution hereof, the provisions contained in this agreement set forth the entire agreement of the parties.

No other document, agreement, understanding, or otherwise shall be of any effect with respect to the parties unless specifically made a written part of this agreement. The District's personnel policies shall apply to the extent they do not conflict with this agreement, but such policies are not contractual and may be amended from time-to-time by the District.

22. **Notices:** Any notice required or permitted under this agreement shall be given in writing and shall be deemed effectively given upon personal delivery or upon deposit with the United States Post Office, by certified mail, postage prepaid, addressed as follows:

If to: Vicki Kent

If to: Morrow County Health District
Attention: CEO
PO Box 9
Heppner, OR 97836

Or at such other address as a party may designate by notice given in the manner provided herein

IN WITNESS WHEREOF, the parties have executed or caused to be executed this agreement on the dates set forth below.

PROVIDER

MORROW COUNTY HEALTH DISTRICT

Vicki Kent, ARNP

Emily Roberts, CEO

Provider Type	Medicaid Eligible	Medicare Eligible	Private Pay Eligible	Meets RHC Minimum Provider Requirement	Practices Independently
Licensed Clinical Social Worker (LCSW)	YES	YES	YES	YES	YES
Licensed Professional Counselor (LPC)	YES	NO	VARIES	NO	YES
Licensed Marriage & Family Therapist (LMFT)	YES	NO	VARIES	NO	YES
Doctor of Psychology (PsyD)	YES	YES	YES	YES	YES

Emily Roberts

From: Leah Grant <Leah.Grant@merrithawkins.com>
Sent: Thursday, January 6, 2022 3:07 PM
To: Emily Roberts; Nicole Mahoney
Cc: David Walker
Subject: Compensation Follow-Up: Morrow County Health District Virtual Profile - Merritt Hawkins
Attachments: mha2021compbrochure.pdf

***** CAUTION! This email came from outside the Morrow County Health District network. Do not open attachments or click links if you do not recognize the sender. *****

Good afternoon,

Thank you so much for taking the time to speak with us. Per our discussion, the below is the closest thing I can find in regard to a compensation model provided by a health system that tiers the compensation package, similar to your teams structure.

Tier Based on Experience		
Years	Base Salary (1.0 FTE)	Comp %ile*
0 – 2	\$250,000	51.9%
2 – 5	\$257,000	55.7%
5 – 10	\$265,000	60.1%
10 – 15	\$275,000	64.5%
15 – 20	\$287,000	69.8%
20 +	\$300,000	73.7%

**Compensation percentile is not to be shared outside of Human Resources*

Years	Base Salary (1.0 FTE)	Rate
0 – 2	\$250,000	\$120.20
2 – 5	\$257,000	\$123.56
5 – 10	\$265,000	\$127.41
10 – 15	\$275,000	\$132.22
15 – 20	\$287,000	\$137.99
20 +	\$300,000	\$144.24

As discussed, a compensation package starting at \$250,000 would be needed to recruit for your model (*this is not considering any inpatient duties*).

I am also attaching the Merritt Hawkins 2021 Comp Brochure. This compilation includes physician average compensation numbers from several of these organizations, including Merritt Hawkins. Merritt Hawkins' numbers, however, are distinct from those of other organizations in that we track average starting salary offers made to physicians being recruited by hospitals, medical groups and other organizations, rather than total gross income as it appears on a physicians' tax return. Merritt Hawkins' numbers include only the salary or income guarantee amount and are not inclusive of production bonuses or benefits.



Examining topics affecting the recruitment and retention of physicians and advanced practice professionals

Physician Compensation Data

A resource provided by Merritt Hawkins, the nation's leading physician search and consulting firm and a company of AMN Healthcare (NYSE: AMN), the largest healthcare workforce solutions company in the United States.

Corporate Office:
Merritt Hawkins
8840 Cypress Waters Blvd
#300
Dallas, Texas 75019
800-876-0500

Eastern Regional Office:
Merritt Hawkins
100 Mansell Ct. E,
Suite 500
Roswell, Georgia 30376
800-306-1330

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www.merrithawkins.com



Introduction

At one time, the majority of physicians in the United States were independent contractors who paid themselves from profits derived from their practices. Little information about physician compensation was generated during the era when physicians were typically small business owners.

Today, the majority of physicians are paid salaries by medical groups, hospitals, and other healthcare organizations. Consequently, there is more interest in physician compensation and the question of what to pay physicians, and a number of organizations now track physician compensation trends.

This compilation includes physician average compensation numbers from several of these organizations, including Merritt Hawkins. Merritt Hawkins' numbers, however, **are distinct from those of other organizations in that we track average starting salary offers made to physicians being recruited by hospitals, medical groups and other organizations**, rather than total gross income as it appears on a physicians' tax return. Merritt Hawkins' numbers include only the salary or income guarantee amount and are not inclusive of production bonuses or benefits.

In addition to base salaries, physicians are commonly offered signing bonuses, production bonuses, CME allowances and other incentives. More information on this topic is provided in Merritt Hawkins' annual *Review of Physician and Advanced Practitioner Recruiting Incentives*.

AVERAGE ANNUAL PHYSICIAN COMPENSATION BY SPECIALTY

Anesthesiology

Cardiology (Inv.)

Cardiology (Non-Inv.)

MGMA	\$464,131		Sullivan	\$894,886		Sullivan	\$536,658
AMGA	\$453,683		AMGA	\$643,906		MGMA	\$521,248
Sullivan	\$452,228		MGMA	\$637,377		AMGA	\$518,750
ECG	\$437,747		Merritt	\$637,37		ECG	\$514,126
Merritt	\$367,000		ECG	\$541,185		Merritt	\$446,000

Dermatology

Emergency Medicine

Family Practice

Sullivan	\$501,976		ECG	\$449,811		Sullivan	\$276,070
AMGA	\$498,331		Sullivan	\$394,789		AMGA	\$273,291
ECG	\$470,495		AMGA	\$380,099		ECG	\$267,085
MGMA	\$449,782		MGMA	\$360,771		MGMA	\$263,964
Merritt	\$378,000		Merritt	\$N/A		Merritt	\$243,000

Gastroenterology

General Surgery

Hospitalist

Sullivan	\$546,278		Sullivan	\$470,261		Sullivan	\$309,529
AMGA	\$538,908		ECG	\$452,222		MGMA	\$308,636
ECG	\$539,961		MGMA	\$442,508		AMGA	\$308,201
MGMA	\$530,807		AMGA	\$439,196		ECG	\$307,507
Merritt	\$453,000		Merritt	\$400,000		Merritt	\$284,000

Intensivist

Internal Medicine

Neonatology

Sullivan	\$458,983		Sullivan	\$289,971		MGMA	\$345,330
MGMA	\$440,000		AMGA	\$288,558		ECG	\$342,973
ECG	\$432,570		MGMA	\$276.00		Sullivan	\$339,065
AMGA	\$429,577		ECG	\$273,985		AMGA	\$325,874
Merritt	\$385,300		Merritt	\$244,000		Merritt	N/A

Neurology

OB/GYN

Oncology

Sullivan	\$344,371		Sullivan	\$378,981		MGMA	\$481,250
MGMA	\$330,756		AMGA	\$357,266		AMGA	\$462,644
AMGA	\$325,278		MGMA	\$355,885		Sullivan	\$458,412
ECG	\$315,267		ECG	\$333,331		ECG	\$447,686
Merritt	\$332,000		Merritt	\$291,000		Merritt	\$385,000

Ophthalmology

Orthopedic Surgery

Pathology

Sullivan	\$424,047		Sullivan	\$667,808		Sullivan	\$409,524
AMGA	\$416,333		MGMA	\$629,360		AMGA	\$400,404
ECG	\$407,061		AMGA	\$626,297		ECG	\$374,000
MGMA	\$385,169		ECG	\$598,363		MGMA	\$359,811
Merritt	\$335,000		Merritt	\$546,000		Merritt	\$287,000

Pediatrics

Plastics

Psychiatry

Sullivan	\$257,992.00		Sullivan	\$599,177.00		AMGA	\$299,250.00
ECG	\$257,027.00		MGMA	\$542,671.00		Sullivan	\$292,297.00
AMGA	\$255,352.00		AMGA	\$537,288.00		MGMA	\$277,808.00
MGMA	\$245,159.00		ECG	\$535,078.00		Merritt	\$272,900.00
Merritt	\$236,000.00		Merritt	\$450,000.00		ECG	\$258,527.00

Radiology

Urology

Sullivan	\$533,173.00		Sullivan	\$511,032.00
AMGA	\$416,333.00		AMGA	\$500,698.00
MGMA	\$385,169.00		Merritt	\$497,000.00
ECG	\$407,061.00		MGMA	\$494,317.00
Merritt	\$335,000.00		ECG	\$477,109.00

AMGA: American Medical Group Association
MGMA: Medical Group Management Association
Sullivan: Sullivan Cotter
ECG: ECG Management Consultants
Merritt: Merritt Hawkins

If you would like additional information about physician compensation, including Merritt Hawkins' 2021 Review of Physician Recruiting Incentives, please call us or visit our website.



About Merritt Hawkins

Established in 1987, Merritt Hawkins is the leading physician search and consulting firm in the United States and is a company of AMN Healthcare (NYSE: AMN), the largest healthcare workforce solutions organization in the nation. Merritt Hawkins' provides physician and advanced practitioner recruiting services to hospitals, medical groups, community health centers, telehealth providers and many other types of entities nationwide.

The thought leader in our industry, Merritt Hawkins produces a series of surveys, white papers, books, and speaking presentations internally and produces research and thought leadership for third parties. Organizations for which Merritt Hawkins has completed research and analysis projects include **The Physicians Foundation, the Indian Health Service, Trinity University, the American Academy of Physician Assistants, the Association of Academic Surgical Administrators, the North Texas Regional Extension Center, The Society For Vascular Surgery, the Maryland State Medical Society** and others.

Merritt Hawkins' white papers include:

- ❖ Psychiatry: "The Silent Shortage"
- ❖ Supply, Demand and Recruiting Trends in Family Medicine
- ❖ Nurse Practitioners and Physician Assistants: Supply, Distribution, and Scope of Practice Considerations
- ❖ Supply, Demand and Recruiting Trends in Internal Medicine
- ❖ Physician Supply Considerations: The Emerging Shortage of Medical Specialists
- ❖ Ten Keys to Physician Engagement and Retention
- ❖ The Economic Impact of Physicians
- ❖ Supply, Demand and Recruiting Trends in Urology

For additional information about Merritt Hawkins' services, white papers, speaking presentations or related matters, contact:

Corporate Office:

Merritt Hawkins
8840 Cypress Waters Blvd #300
Dallas, Texas 75019
800-876-0500

Eastern Regional Office:

Merritt Hawkins
100 Mansell Ct. E, Ste. 500
Roswell, Georgia 90076
800-306-1330



**MORROW COUNTY
HEALTH DISTRICT**
Excellence in Healthcare

Physician Compensation Model - DRAFT

	Contract Years			
	1 - 3	4 - 6	7 - 9	10 -12
Clinic/Hospital Patient Hours	\$120.00	\$124.00	\$128.00	\$132.00
<i>Annualized (2080 Hours)</i>	<i>\$250,000.00</i>	<i>\$257,920.00</i>	<i>\$266,240.00</i>	<i>\$274,560.00</i>
Clinic/Hospital Hours with ER Call	\$135.00	\$139.00	\$143.00	\$147.00
Evening & Weekend ER/Hospital Call	\$90.00	\$90.00	\$90.00	\$90.00
ER/Hospital Call on Holidays	\$135.00	\$135.00	\$135.00	\$135.00