



**Board of Trustees**  
**Commonwealth Healthcare Corporation**  
Commonwealth of the Northern Mariana Islands  
1 Lower Navy Hill Road Navy Hill, Saipan, MP 96950



CHCC Board of Trustees Regular Meeting  
Thursday, October 15, 2020 at 5:30pm  
Conference Rm 3

Present: Lauri B. Ogumoro, Chair/Vice Chair/Polly Masga, Trustee/Corinne Santos, Trustee/Fermin Atalig, Trustee (zoom)/Esther Muna, CEO/Derek Sasamoto, CFO/Krishna Sebangiol/Trinidad Diaz/Subroto Banerji/Chavel Green/Halina Palacios/Tiffany Sablan

Absent: Edward DLGuerrero, Vice Chair (excused)

- I. Call to Order:** Meeting called to order at 5:31pm
- II. Determination of Quorum:** Quorum was determined with the Trustees present.
- III. Approval of Agenda:** A motion to approve the Agenda was made. Motion was seconded. Agenda was approved.
- IV. Adoption of Minutes:** A motion was made to approve Meeting Minutes from August 6, September 18, and October 2, 2020. Was seconded. Listed Minutes approved.
- V. Public Comments:** None
- VI. Credentials Privileges:** New applicants were introduced as follows below. All were approved by a majority vote from the Trustees.

**New Applicants:**

1. Jonathan Holloway, Nurse Practitioner (Oncology) – no issues presented. Credentials approved for two year privileges.
2. Leslie Brady, Nurse Practitioner (Oncology) – no issues presented. Credentials approved for two year privileges.

**Renewal Applicants:**

3. Alexander Johanson, Physician Assistant (ER) – no issues presented. Credentials approved for two year privileges.
4. David Knabel, Physician Assistant (ER) – no issues presented. Credentials approved for two year privileges.
5. Christine Kapileo, Midwife – no issues presented. Credentials approved for two year privileges.

6. Flaviana Saimon, Midwife – no issues presented. Credentials approved for two year privileges.

## **VII. Reports:**

**A. Management & Operations:** CMS Certification – Because we were activated in March, there is no need for a full scale disaster exercise that is required to be conducted every 2 years. Due to the ongoing pandemic CHCC was exempted pursuant to the new Guidance received from CMS. Tabletop exercise is scheduled to be conducted on October 27-29,2020, to make sure that we meet the requirements for the Emergency Plan. The Emergency Plan has been updated, and will be forwarded to the Board of Trustees for approval. Update on Tags: Credentialing Coordinator - will continue to push forward; Electronic Health Records – go live date is January.

Community Vulnerability Level – now is at Blue, with restrictions implemented. Since there has been no community transmission, should be Level Green – with most of the restrictions still in place. One issue being pushed by the Governor’s Economic Council is to stop testing passengers on arrival for tourist from Korea. Since 60 days has passed with no community transmission, they are bringing the issue up again. Travel Bubble – will have tourist stay in Kensington or PIC; they will go to specific places only. Another concern is that no one from the health filed is a member Council. The protocol as of today has not changed and has remained the same.

Kagman Community Health Center – after meeting several times with KCHC frustration still exist. The proposed Agreement that was sent to them was not signed. No word after so many follow up.

Federally Qualified Health Center – Region 9 recommended that an application for FQHC be submitted which we are eligible. A request for technical assistance was submitted. An application will be submitted for consideration. The Board component will be the existing Board with the addition of persons from the community. It was also recommended that an application be submitted to Pacific Islands Primary Care Association (PIPCA) for consideration, whose president is Vince Castro. We will be in competition with their application.

COVID-19 Response – vaccine planning: weekly planning meetings being held with CDC, Homeland Security and the Task Force; meetings will continue.

Parking Lot – funded by DOI; Public Works to supply flashing walkway; will continue to follow up.

Germ Free Lab – separate Public Health Lab – still pending.

Emergency Room – department modernization; additional trauma rooms that are private; more convenient; 2 nursing stations; designed to look like a hospital ward – should the ER move to the northern end of the building.

PWD (Prevailing Wage Determination) – will write a letter to Justin Andrew to make clear how the rates for the hospital staff are determined and for clarification.

Opioid use - information shared that male athletes between the ages of 15 to 30 are addicted to opioid, and have been using it because of sports. Working with several grants – prescription drug monitoring (OD2A); and MAT (Medical Assistance Treatment)– medical requirements not yet met to monitor individuals.

**B. Financial Statement:** Data is as of September 30, 2020: FY2020 Operations Budget Authority – Personnel \$55.3M; Operations \$32.7M; total \$88M. Actual Expenses – Personnel \$51.2M; Operations \$28.1M. Spending was within the Budget. Revenue by island: Total revenue \$73.2M: Saipan \$72.3M - Expense \$72M, Obligation \$3.9M, total cost \$80.3M. Tinian \$306K – Expense\$1.4M, Obligation \$53K. Rota - \$502K, Expenses \$1.7M, Obligation \$37K; Total \$1.73M. Total shortfall for the year is \$6M. Ways to mitigate the shortfall other than enhancing revenue is to control cost, and to push for the legislation that is pending for commercial water/waste water rates for CUC; this will save about 66% of utility cost which is about \$3 to \$3.6 M a year.

This year is the last year for the \$60M Medicaid funding under the Health Territory Equity Act and the 83% FMAP. After this FY it will revert back to being capped at \$5.2M.

Revenue Breakdown: Medicare and Medicaid 58%; Aetna 14%; Calvo's and TakCare 8.1% due to successful negotiation for prior billings – settled at 90% of total bills outstanding; Staywell & Moylan's – less than 1%; self-pay \$3.2M at the end of FY20 – has gone down, prior years at \$7M or more a year. Total collection as of the end of FY20 is \$73.2M an increase from last year.

Expense Breakdown: Personnel - \$51.2M = 65% of all expenses; Medical Supply - \$13.3M = 17%; Professional Services - \$2.9M = 4%. Impact of COVID-19 through 9/30/2020 is \$7.7M: Personnel Cost - \$2.4M; Operational Cost - \$5.3M.

Funding received for COVID-19: CARES Act - \$5.2M; Provider Relief - \$869K; Rural Providers Funds - \$4.3M. Shortfall of \$2.5M. At this time working on Medicaid CHIP funding and Provider Relief Phase 3 Funding.

Revenue Advances: Medicaid was advanced. Medicare Advance received in April 2020 will be repaid through recoupment in August 2020. With the Continuing Resolution the payback period was extended and will begin in August 2021. The first payment recouped at 25% for the first 12 months. Recoupment impact will be reflected in FY22 – will 10 months to pay off. Current Medicare revenue per year is \$8M.

FEMA Reimbursement – submitted reimbursement request of \$1.6M; approved for \$1.2M and is pending receipt at 75/25 matching.

Uncompensated Care – FY2020 year to date - \$13.6M; averaging \$1.135M per month; number of bills is 33% less than FY19.

Medicaid Update – FMAP for CNMI is 83%, Public Health Emergency added 6.2%; PHE extended 90 days from October 23 – which is January 2021, including Presumptive Eligibility. Expected CPE monthly payment about \$2.5M - \$30M annually.

FY20 Appropriation – received \$156K in general appropriation; \$73K for IIMR stipends; \$50K prior years betelnut cessation program; \$2.5M for CUC (mandated obligation from previous budget act). Still being owed about \$5.5M from FY19 including restricted and unrestricted funds; no Compact Impact funding received as well.

**C. COVID-19 Update** – there are currently 4 positive in-bound passengers.

**D. CUC Update** – Chair asked for proof of payments for CUC. Payments are current and being made on time.

**E. CMS & ECRI Update** – Dashboard continuously on Green. Everyone working together as a team to get things done. Compliances presentations are being done for new nurses, as well as been taken on tours. Trying different ways of orientation. One Yellow – a requirement that the Dietary notification is to be signed by the Provider within 24 hrs. Some Providers

are not doing as requested. Working with IT on the notification so that they only get what they need to sign. Incompliance 75 out of 100.

- F. QAPI Report** – Third Quarter Summary of some of the challenges and success of CQPM. A Patient Educator is on board after being vacant for a while. HIPPA – in compliance (continuous training being held). Hospital Quality Mortality Review – total deaths = 34; death on arrival = 14; chart reviewed = 18; no review is done for death on arrival cases. Incident Reports – 39 incident reports received: Grievances: July - 3 = all resolved; August – 2 = all resolved; September – 3 = 1 resolution pending. 6 out of 8 are communication complaints, as well as some customer service. After conducting an investigation, and before responding to the complaint, the CEO needs to approve on the resolution. Patients are notified within 48 hours of receiving the grievances.
- Infection Control: Hospital Acquired Infections (HAI): Surgical Infection: July = 2; August = 1; September = 1. CAUTI: July = 1; September = 2; CLABS and VAE = none; MDRO = none.
- Utilization Review: for the third quarter – general readmission rate is 8.4%; Medicare readmission rate is 13.4%.
- Highlights: Homeless discharge patient – continue working with NMHC on housing assistance; HIPPA training for COVID-19 staff – training held for the state communication staff. On boarding of Patient Education and continued work with ASTH for Hypertension Control Program. QAPI 2021 – Proposal beginning Dec 2020; Program meetings will continue as schedule; CMS compliance is continuously led by the Compliance Officer.
- G. ESRD Update** – the new RO system was received and awaiting installation.

### **VIII. New Business**

- A. Chargemaster** – Radiology codes that were revised to relate to the CMS reimbursement, as well as other fees. Fees to be posted on CHCC website, while we work on including the fee in the Commonwealth Register. A motion was made to approve the fees on the Chargemaster as presented. Was seconded. A majority of the Trustees voted to approve. Motion was approved.
- IX. Executive Session** – A motion was made to move into Executive Session was made. Was seconded. Executive Session started at 7:30 pm. Executive Session ended at 8:13 pm.
- X. Adjournment:** Motion to adjourn was made. Motion was seconded. Adjourned at 8:13 pm.



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**PRIVILEGED AND CONFIDENTIAL**

CHCC Board of Trustee  
Executive Session  
Thursday, October 15, 2020 7:30 pm  
Conference Rm 3

Present: Lauri B. Ogumoro, Chair/Polly Masga, Trustee/Corinne Santos, Trustee/Nancy Gottfried (via phone)/Trinidad Diaz

Absent: Edward DLGuerrero, Vice Chair (excused)  
Fermin Atalig, Trustee (lost zoom connection)

- I. Call to Order at 7:30 pm
- II. Executive Session: Motion was made to move into Executive Session. Was seconded. Meeting went into Executive Session.
- III. Motion was made to move out of Executive Session. Was seconded. Meeting moved to regular session.
- IV. Executive Session adjourned at 8:13 pm