

# CHCC Board of Trustees

Minutes of February 22, 2024

Prepared by: Trinidad S. Diaz	Approved by: Board of Trustees
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Present:

Juan Babauta, Chair	Jesse Tudea
Polly Masga, Trustee	Tiffany Crisostomo
Mariah Barcinas, Trustee	Trinidad Diaz
Corinne Santos, Trustee	Krishna Sebangiol
Phyllis Chong, Vice Chair	Warren Villagomez
Esther Muna, CEO	Eleanor Cabrera
Perlie Santos, CFO	
Stephen Anson, AAG	

Topic	Discussion	Resolution/Action
I. Meeting called to order	Meeting called to order.	Start time is 5:02pm
II. Quorum	Five (5) Trustees present: Juan Babauta, Chairman; Phyllis Chong, Vice-Chair; Polly Masga, Trustee; Mariah Barcinas, Trustee; and Corinne Santos, Trustee.	Quorum determined with five (5) Trustees present.
III. Approval of Agenda	Motion was made to Approve Agenda. With no objections from the Trustees present, Agenda was approved.	Agenda approved.
IV. Approval of Minutes for 11/30/23 and 12/13/23	After discussion on the Minutes from 11/30/23 and 12/13/23, and without objection from the Trustees, Minutes are approved.	Minutes from 11/30/23 and 12/13/23 are approved.
V. Public Comments	No public present, and no written comment received.	
VI. Credentials	<p>Credentials documents for each applicant were sent to all the Trustees for review.</p> <p><b><u>New Applicants</u></b></p> <ol style="list-style-type: none"> <li>1. Dr. Verrad Nyame, Neurosurgery/Locum – pursuant to discussion and without objection from the Trustees, applicant is approved with conditions.</li> <li>2. Dr. Roy Kaplan, Anesthesiology/Locum – pursuant to discussion and without objection from the Trustees, applicant is approved with conditions.</li> <li>3. Dr. Maged Hussein, Nephrology/Locum - without objection from the Trustees, applicant is approved.</li> <li>4. Dr. Zebulon Taintor, Psychiatry/Locum – without objections from the Trustees, applicant is approved.</li> <li>5. Dr. Mary Gwayi-Chore, Family Medicine – there was recommendation to update the Employment Application; Attestation part of the application should be updated to include name and date on each page; without objections from the Trustees, applicant is approved.</li> </ol>	<ol style="list-style-type: none"> <li>1. Approved with conditions up to the expiration of License – expires 4/30/25</li> <li>2. Approved with conditions which may be modified pending additional information.</li> <li>3. Privileges approved for the duration of Locum term – expires 4/24/2024.</li> <li>4. Privileges approved for the duration of Locum term – expires 5/3/24</li> <li>5. Privileges approved up to expiration of License – expires 7/31/25</li> </ol>

	<p>6. Jacqueline Channell, Nurse Practitioner/ER – pursuant to discussion and without objection from the Trustees, applicant is approved.</p> <p>7. Joanne Murphy, Physician Assistant/ER – without objections from the Trustees, applicant is approved.</p> <p>8. Caroline Lo, Physician Assistant/FCC – without objection from the Trustees, applicant is approved.</p> <p><b>Renewal Applicants</b></p> <p>9. Dr.Mohamed Salhi, Family Medicine – without objection from the Trustees, applicant is approved.</p> <p>10. Dr. Michael Chen, Psychiatry – without objection from the Trustees, applicant is approved.</p>	<p>6. Privileges approved up to expiration of License – expires 6/21/25</p> <p>7. Privileges approved up to expiration of License – expires 11/30/25</p> <p>8. Privileges approved up to the expiration of License - expires 1/31/26</p> <p>9. Privileges approved up to 12/23/24</p> <p>10.Privileges approved up to expiration of Contract. Expires 2/28/25.</p>
<p>VII. Review &amp; Approve Chargemaster Fees</p>	<p>Submitted fees are for new services, and new fees for Dental services. Fees are comparable to other hospitals in the region. With no objections from the Trustees, the Chargemaster Fee Edits are approved.</p>	<p>Fees for new services and Dental services for the Chargemaster Fees are approved.</p>
<p>VIII. Budget Development Discussion</p>	<p>-Met with all the business units to discuss their budget request for this fiscal year – was announced that FY24 budget will be carried forward to FY25.</p> <p>-Trustee Chong invited a community member, as well as the CFO, Tiffany, and a staff from HNP to be in the Finance committee. Once Budget is finalized by the Finance Committee it will be submitted to the Governor.</p> <p>-Performance against FY24 budget will show how we are doing now: 870 positions filled, 268 vacant for a total of 1075 positions; as of last payroll there were 800 filled, and 165 positions vacant. Payroll was budgeted at \$77.3M – last payroll was \$33.8M; annualized year to date payroll projection is \$65M; operating expenses budgeted at \$43.9M – year to date is \$11.9M. Projected revenue is \$99.2M – annualized year to date as of January 31, is \$33.5M. Enough revenue is being generated to cover the monthly expenses for this year. September 30, 2023 ended with accounts payable and deficit due to the \$8.6M uncollected Medicaid federal match.</p> <p>-Trustee Chong would like to see what revenue is being generated in the outpatient clinics versus the inpatient clinics. The process of how outstanding bills are collected and the issue of patients having to pay double deductibles. To resolve the double deductible, a tracker is put on those who have made up-front payment on their deductible and prioritize billing the insurance so that it is reported timely. EHR issues and other factors are behind delayed billings. Current action item is to issue suspension notice to the current EHR system. Funding obtained from multiple federal agencies to support a new EHR and billing system. Anticipating new EHR system in a year or two.</p> <p>-Chairman Babauta: are the amounts owing vendors in FY24 going to be paid out of the FY24 or FY25 budget. FY25 budget will be used to pay vendors owed in FY24. Once the \$8.6M is collected from Medicaid, payments will be up to date.</p> <p>-Travel: Employee travel for meetings, PA coverage and Specialty Provider for THC and RHC - \$100K; HNP Patients - \$2.8M; Inter Island Medical Referral - \$300K. Other travels are usually zero TAs</p>	

	<p>funded by federal grants. Local funding for travel is available but majority of travels performed are for training and are federally funded.</p> <p>-Travel to Guam and Hawaii performed by the Chairman: travelled to Guam to have one on one meetings with the staffs; met with some patients; the Guam trip result - a reduction in force was implemented; need to be knowledgeable with the services for the patients. Hawaii trip: met with the staffs; felt that the staffs are over worked; majority of the patients are sent to Hawaii; met with several patients as well. One thing lacking from both locations is more contacts with Providers. Would also like to travel to San Diego to understand why there are patients there for a year or two; to also visit the facilities being used, and to speak with Providers to see how we can improve the program in terms of services.</p> <p>-Staff travels are mainly for professional development, as well as patient quality. Significant travels performed are for PA coverage; training; dental coverage; and outreach for services available at CHCC. Trip reports could be made available upon request. With the concerns about excessive travels by CHCC - information needs to be provided to the public and explain travel policies.</p> <p>-The legislature is welcome to call for an oversight hearing to give information for them and the general public.</p>	
<p>IX. Board Committee Reports</p>	<p>-Quality &amp; Patient Safety: Committee have met twice; plan to meet quarterly. Activities covered: approved QAPI quarterly performance indicator for 2024 for CHCC; recommended that THC and RHC follow the same steps as Saipan. In collaboration Quality Council Committee and the Environment of Care Committee – will continue to monitor and improve the hospital physical environment citations as required by CMS, as well as updating policies as needed.</p> <p>Committee members will report on patient safety events; currently working on 2024 National Patient Safety goals to address areas of concerns in patient safety.</p> <p>Commend the current members for their hard work. Will request for a special Board meeting should the need arise.</p> <p>*Question: Committee meeting – is it a violation of the Open Government Act should two or three Board members attend a committee meeting? The Open Government Act only applies to the Board of Trustees meeting which requires a published notice. The committees can meet independently without a published notice.</p> <p>-Governance: held first meeting; drafted the Governance Committee Charter – defining the mission of the Board’s role and setting clear guidelines for policy reviews; there is plan for future meetings.</p> <p>Members: Trustee Barcinas, Trustee Santos, CEO, CFO, RHC and THC Resident Director, and Eleanor Cabrera. No recommendation for the Board at present time.</p> <p>-Finance &amp; Audit: Suggested members for this committee are: one person from Billing, CFO, and a member of the community. Recommended member of the community is Mike Sablan, CPA. The Board or the Committee may interview a candidate, but is not requirement. Mike Sablan, CPA – mentioned as a potential member to represent as a member of the community. Discussion on conflict of interest for members – the Board Bylaws states that the Trustees should avoid conflict of interest; selected community member – the Board shall determine if there is a conflict of interest. It is recommended that the selected member should be requested to sign an NDA.</p>	

<p>X. CFO Report</p>	<p>HNP update: CHCC currently using its revenue to pay for Subsistence – no additional budget from central government at this time; no funding last year – decision was made to cut some services such as blocked rooms. In communication with the Saipan Northern Islands Legislative Delegation (SNILD) and the Legislature to get additional appropriation. Discussion during the fiscal affairs committee meeting in the Senate – a portion of the tax for alcohol, bettlenut and tobacco Bill will go to HNP.</p> <p>-Regulation 75-50: saves CHCC from having to spend more, or to make changes in the policies.</p> <p>-Medicaid Spend Down provision: many are not qualified for medical referral because of income pursuant to the regulations. The Spend Down covers the patient’s copay if they pay a spend down amount per month as determined by Medicaid. It is for people who do not meet the federal income level. If you are covered under Medicaid, you automatically qualify for medical referral as per the Directive. Medicaid needs to do outreach and send out information to the public that this assistance is available.</p>	
<p>XI. CEO Report</p>	<p>*Vice Chair Phyllis Chong leaves the meeting at 7:21pm.</p> <p>-Micro-grid Presentation: Tiffany, Warrant and Mr. Tudela travelled to Fort Worth Dallas to attend the session on January 24.</p> <p>Advantages: more storage capacity; energy storage; scalable to size; cost effective in the long run; 24/7 monitoring (software); measures the usage and storage that is saved; gives forecast on utilization of power; zero dependency on CUC; low maintenance and environmentally friendly.</p> <p>Disadvantages: up- front cost required.</p> <p>MOU presented will do a thorough assessment on what the actual financial obligation should the system be purchased. There is no financial obligation by signing the MOU – it is only for assessment. In order to seek federal funding an estimate of the cost is needed for the application process. Legal Counsel will do a final review before the Chairman signs the MOU.</p> <p>-Organization Restructure: Changes: Chief Executive Officer – Chief Operations Officer Public Health Services; Chief Operations Officer Business &amp; Quality; Chief Operations Officer Ancillary &amp; Support Services.</p> <p>Population Health – integration of Public Health Services and Clinics: Mental Health Services – clinical and non-clinical; Tinian Health and Rota Health Centers. Halina handles Public Health. Ancillary and Facilities are handled by Mr. Tudela; and Business &amp; Quality Assurance is handled by Tiffany.</p> <p>Leadership change effect on CMS: no effect as long as patient care and patient safety are being maintained; compliance of the conditions of participation are being met, and as long as the person in charge is identified.</p> <p>-MRI Project: getting a smaller MRI funded by the anonymous doner; it is refurbished; a house needs to be built for it. A foundation award of \$6.4M was awarded which will pay for a bigger MRI; will be located across the street by the parking lot. Herb Yamada has informed that if US Congress passes the FY24 budget, CHCC is awarded \$1M for MRI. Services need: training of staff for pain management. Currently have two Radiologist – one is asking for additional pay; getting harder to negotiate with Providers, reason \$8.6M is really needed.</p>	

	<p>-Some updates: Medicaid Funding – putting together a presentation for a meeting at the White House and some HHS officials and Congressman Sablan – in need of the \$8.6M to pay vendors and also to push out some of the things in the budget.</p> <p>-HNP Funding: working with the SNILD committee.</p> <p>-CUC: agreement was pulled from the utility committee and moved to the fiscal affairs in the Senate. Rep. Attao working on a bill that would off set CUC’s bill to CDA that would pacify the write off of CHCC’s account.</p> <p>-Strategic Plan: working on getting the detail down on the goals and objectives. Once ready, it will be submitted for final approval.</p> <p>-THC multipurpose building that was funded by the Mayor of Tinian – to be used as a chapel or for hospital outreach services. Recommend that Trustees travel to Tinian for the Ribbon Cutting.</p> <p>-Septic Tank: being shared by THC and DFEMS sometimes overflow. CHCC has been covering the cost of having it drained to avoid overflow and the stench. Reached out to Harry Elliot, DOD head and requested if they could include the repair of the septic tank when their squadron is on island.</p> <p>-Peritoneal Dialysis: is now ongoing in Rota – will be implemented by June 2024.</p> <p>-Ongoing projects: roof coating; HVAC replacements; shutter installation – all funded by either CIP or hazard mitigation.</p> <p>-Medical Clinical Workforce: very difficult to hire a perfect Provider. Looking at Health Alliance for Equitable World (HAEW) – they work with telehealth, as well as provide training to clinical staff.</p> <p>-CGC: actively doing prevention and outreach services and some family support.</p>	
XII. Board Bylaws	No discussion on this item.	
XIII. Executive Session	With no objections from the Trustees present, the meeting moved into Executive Session to discuss employee grievance with the Legal Counsel.	Meeting moved into executive session at 746pm to 822pmpm.
XIV. Adjournment	Motion to adjourn was made, was seconded.	Meeting adjourned at 822pm.