

Board Informational Report

By: Harry Weis DATE: 4/13/18

CEO

Well March did turn out to be one of the highest precipitation months in many years. That being said, our patient volumes seem to be in an approximate range that is 1 to 2% below the overall volumes of the prior year which was a heavy influence on our budgeted revenues this year.

We are still working closely with Mercy EPIC to nail down key statistical volumes for all aspects of our health system. This remains one of the very highest priorities for us to obtain post go live.

Further, our teams continue to work on post go live "tuning of the EPIC tool," or training of our personnel, and other issues to fully optimize all aspects of this new IT system. We have a very focused goal to restore a full equilibrium mode which would mean our Days in AR would be reduced to where it was before go live and our AR would be also reduced to the levels we were prior to go live along with many other relevant indicators. We are continuing to make real progress each month in this journey to reach operational equilibrium by June 30.

We are happy to be in the black YTD through February 28, an 8 month period with Net Income of \$3.2 M. We await the March monthly and YTD financial information which should be available momentarily.

We are excited to share that no later than this summer we will see "hammers swinging" and construction begin for several critical "early" topic areas of our Master Plan. We will be doing some remodeling in the Internal Medicine/Cardiology building to create more exam rooms for more provider activity. We will begin to remodel the 3rd floor of our medical office building and begin build out of the 2nd floor of the cancer center. Further, the Administration building will be going away and staff are relocating to the former quality and home health houses near the ECC. This will allow us to add more patient parking in front of the hospital which is vital for all of our patients. There are several other activities happening as well.

We will likely have an "Open House" event after these staffing moves happen so that our healthcare team can see where key members have relocated at an appropriate time as well.

The second half of this calendar year will likely be the busiest half year ever relative to the arrival of several new physicians to our health system. We have two new family practice physicians, a gastroenterologist, and an urologist joining us this summer and we are hoping to be able to keep our locums ENT physician for the long term which could be known later this year.

Tahoe Forest Hospital District • 10121 Pine Avenue • Truckee, CA 96161 • 530/587-6011 Incline Village Community Hospital • 880 Alder Avenue • Incline Village, Nevada 89451-8215 • 775/833-4100 Moving forward on our Rural Health Clinic strategy is underway and remains a very high priority for our health system.

We are actively looking and planning for external board education either late summer or early fall.

We will share the beginning of a multi-session presentation on telemedicine, how it is being used in healthcare and in rural settings, and what are some of the real challenges that are holding it back from it reaching its full potential.

At an upcoming board meeting we will circle back with a more in-depth discussion on our Community Health Needs Assessment. We will review prior board goals and the impacts of our wellness work since the previous update.

From a strategic planning perspective, we are in the "input from stakeholder and data gathering stage" of our journey. Several interviews have been conducted of key stakeholders and several more are scheduled. We have many internal and external stakeholder surveys that are going out now as well.

We are actively monitoring state level bills in both Nevada and California as there are several of serious concern that we must voice our views on so that healthcare is not unreasonably harmed. We are also watching and engaging on federal changes as well. We cannot overstate how important these actions are for our health system and for healthcare in general.

We believe California is positioning itself to see if it can implement material change in how healthcare is going to be paid for within the next 5 years or so.

Keeping you informed!

Harry