## MONTEZUMA COUNTY HOSPITAL DISTRICT BOARD MEETING EMS Training Room, Southwest Health System WEDNESDAY, February 12, 2025 Meeting Starts: 6:00pm

## AGENDA

6:00pm Call to Order	- 5 minutes
Roll Call	
Changes or additions to agenda	
<b>Public Comment:</b> <i>Public is invited to attend and provide comments plea as seating is limited.</i>	ase RSVP bjabour@swhealth.org
<ul> <li><u>CONSENT AGENDA</u> (Enclosure 1)</li> <li>January 8, 2025 Regular Meeting Minutes</li> <li>Payment of Bills</li> </ul>	- 5 minutes
<b><u>REPORTS and ACTION ITEMS</u></b> <b>SHS Report (</b> Enclosure 2)	
<ul> <li>SHS Report (Enclosure 2)</li> <li>SHS Board Report</li> <li>Operations Report</li> <li>Finance Report</li> </ul>	- 5 minutes - 10 minutes
<ul> <li>Financial Report, Rob Dobry, Scty/Treas (Enclosure 3)</li> <li>December &amp; January Financials</li> <li>CSD Property &amp; Liability Pool</li> </ul>	- 20 minutes
Capital Infrastructure Committee Report (verbal)	- 10 minutes
Foundation Update (verbal)	- 5 minutes
<b>Optional Board Member Presentation/Report</b> (verbal)	- 5 minutes
Attorney Report (verbal)	- 10 minutes
Executive Session, (if needed).	

Adjournment

## **Mission Statement**

It is the mission of the Montezuma County Hospital District to assure high quality healthcare facilities for the community, Montezuma County, and the surrounding areas and to provide support and assistance in a manner which is consistent with a high standard of healthcare.





# **Consent Agenda**

**Mission Statement** 

It is the mission of the Montezuma County Hospital District to assure high quality healthcare facilities for the community, Montezuma County, and the surrounding areas and to provide support and assistance in a manner which is consistent with a high standard of healthcare.

## Montezuma County Hospital District Regular Board Meeting EMS Training Room January 8, 2025

Present:	Also Present:		
Brandon Johnson, Chairperson	Rob Owens, SHS Plant Operations Dir	<b><u>Recorded by</u></b> :	
Bill Thompson, Vice-Chairperson	Joe Theine, CEO	Bridgett Jabour, Secretary	
Robert Dobry, Secretary/Treasurer	Adam Conley, SHS CFO		
Sean Flaherty, Director	Eric Croke, SHS Vice-Chair	Excused/Absent:	
		Orly Lucero, Director	
	Counsel:	Bob Ower, Director	
	Keenen Lovett, MCHD Attorney		

Agenda Item/Topic	Findings and Discussions	Conclusions, Recommendations, Actions, and/or Motions	Follow-up Responsible Party
Call to order	MCHD Chair Brandon Johnson called the meeting to order at 6:00 pm.		
Public Comment	None.		
Introductions	SHS Vice-Chair Eric Croke was introduced to the board as the SHS Board representative who would be attending their meetings monthly going forward.		
Consent Agenda	December 11, 2024 Regular Meeting Minutes Payment of Bills	It was moved and seconded to approve the consent agenda with correction to minutes as described. Motion: Robert Dobry Second: Sean Flaherty Motion carried.	
<b><u>REPORTS and</u></b> <u>ACTION ITEMS</u>			
SHS Board Report	SHS Vice Chair Eric Croke was introduced to the Board. Mr. Croke has been on the SHS board for 1 year and has been a member of the Capital Infrastructure Committee for one year as well; he has a background in engineering. Mr. Croke reported the 3 new board members came on: David Dull,		

Agenda Item/Topic	Findings and Discussions	Conclusions, Recommendations, Actions, and/or Motions	Follow-up Responsible Party
	Margi Strangl, and Mary Dodd. Their term began January 1 and their first meeting is January 30 <sup>th</sup> . The SHS Board has prepared a Board Development plan and has scheduled training and orientations to get the new members up to speed.		
SHS Operating Report – CEO Joe Theine	SHS CEO Joe Theine reviewed provided a report to the MCHD board through PowerPoint, in which, he reviewed recruiting, retention, review of statistics and volumes, capital expenses, Medicare advantage updates, strategic planning and timeline, SHS board-approved objectives overview and strategic objectives. Leadership is focusing on employee retention and becoming a high reliability organization, as well as safety/quality objectives. These initiatives are expected to build growth in services. Mr. Theine advised that SHS is partnering with Montrose Regional in which they are leasing space within the facility to provide Cardiology services full-time. Mr. Theine advised that SHS will be providing their annual letter to the MCHD board following SHS board approval at their Jan 30 <sup>th</sup> meeting. Additionally, SHS is leasing approx. 1700sf of space on the 2 <sup>nd</sup> floor to Montrose Regional Health beginning 2/1/25. While not required by the lease, SHS wanted to make the Board aware.		
Finance Report – CFO Adam Conley	SHS CFO Adam Conley reviewed the enclosed aggregate budget for 2025, including expected changes in days' cash throughout the year. One of the capital expenditures enclosed includes the purchase of equipment for cardiology services by the Montrose team. Mr. Conley reviewed timing, strategies and anticipated challenges for 2025 related to the budget presented. It includes an EBIDA of \$8.3m. Gross revenue of \$83m and operating expenses of \$82m.		

Agenda Item/Topic	Findings and Discussions	Conclusions, Recommendations, Actions, and/or Motions	Follow-up Responsible Party
	Capital Equipment/Expenditure total for 2025 is \$1.225 million, with most purchases happening after the clinic Cerner conversion when it can be determined cash level available for purchases. Lower income budgeted is due to anticipated revenue loss during EHR (Cerner) conversion.		
Financial Report –	Scty/Treas Robert Dobry handed out December financials to	In addition to the consent agenda bills	
Robert Dobry MCHD Financial	the board. The reporting format has changed with the new accountant. Walston Accounting, the new MCHD	approved above, Mr. Dobry motioned to approve the addition of two invoices.	
Report – Robert Dobry, Scty/Treas	Accounting firm, has prepared financials back to January 1, 2024.	One to Mazzetti Engineering for \$9,247.50 as well as reimbursement to Southwest Health System, Inc. to	
	There is a "gap" in which there is no bank statement for 1 week in July, due to Vectra Bank's system software conversion. Statement dates will now follow the calendar months, instead of beginning the 16 <sup>th</sup> of each month.	reimburse for expenses for electrical work to hook up emergency generators for both the Mancos Clinic and Southwest Walk In Care for \$7,287.50. MOTION: Robert Dobry	
	Payments to the accountant will be done through their portal instead of a hard check being cut after Board approval at each meeting.	SECOND: Sean Flaherty Motion carried.	
	Due to how early the meeting is in January, no sales tax numbers are available. These will be reported at the February meeting.		
Capital Infrastructure Committee Report	Mr. Flaherty reported that the District closed on a 28-acre parcel adjacent to the main hospital campus on the 7 <sup>th</sup> of January. This property is now owned by the District.		
	Mr. Flaherty advised the status of the Inpatient Pharmacy leak. Nunn Construction's proposed resolution to the issue is not acceptable. The elevation needs to be changed in order to truly fix the problem causing the leak.		Mr. Lovett

Agenda Item/Topic	Findings and Discussions	Conclusions, Recommendations, Actions, and/or Motions	Follow-up Responsible Party
	Mr. Flaherty advised that the Reverse Osmosis system was installed.		
	Additionally, the HVAC parts for south campus have been		
	ordered. They're expected to take 20 weeks for delivery.		
	There will be an addendum for additional work to complete		
	this project and anticipate having final numbers for the next		
	board meeting.		
	The work to repair the leak issue at inpatient pharmacy is not		
	fully resolved. Nunn expects MCHD to pay for some of the		
	work needed, but Nunn will provide the work to install the		
	flashing and raise the scuffer. No cost estimates are available until next meeting.		
Foundation Report	Mr. Theine reported as Mr. Ower is excused from the		
I oundution Report	meeting as follows:		
	The Foundation board met in December, and had pushed to		
	maximize year-end donations to the Foundation. The OB		
	ultrasound for the Mancos clinic was purchased and the first		
	day seeing patients by FPOB Megan Viquez is Friday, Jan		
	10 <sup>th.</sup> The Mancos clinic will now be open on Fridays.		
Optional Board	Mr. Johnson advised that he had been in contact with Jan		
Member Report	Garner, owner of the Beehive Memory Care center regarding		
	her request for installing a container to store food needs for her residents and staff.		
	MCHD has agreed that they will allow a temporary storage		
	building for 24 months and is required to be approved and		
	permitted by the city of Cortez. Must be a single, neutral		
	color.		
	SHS will also have to abide by the rules above; SHS will		
	need to remove their containers within the next 24 months.		
	This will be a PUD-wide ruling.		

Agenda Item/Topic	Findings and Discussions	Conclusions, Recommendations, Actions, and/or Motions	Follow-up Responsible Party
Attorney Report	<ul> <li>MCHD Attorney Keenen Lovett reviewed the RFP for Owner's Rep presented to the Board. Timing was discussed as well as language edits.</li> <li>Mr. Lovett presented the 2025-01 Posting Resolution that confirms that meeting agendas will be posted at the County building on Main Street and on the website.</li> <li>2025-02 Adoption Resolution for the 2025 Budget 2025-03 Appropriation Resolution for the 2025 Budget, specifically appropriating all sales tax revenue to bond repayment as approved by voters.</li> </ul>	It was moved and seconded to approve the RFP with edits discussed. MOTION: Robert Dobry SECOND: Sean Flaherty Motion carried. It was moved and seconded to approve Resolution 2025-01 for Postings for the year of 2025 as presented. MOTION: Robert Dobry SECOND: Sean Flaherty Motion carried. It was moved and seconded to approve the 2025 Budget Adoption and Appropriation Resolutions as presented. MOTION: Robert Dobry SECOND: Sean Flaherty MOTION: Robert Dobry SECOND: Sean Flaherty MOTION: Robert Dobry SECOND: Sean Flaherty Motion carried.	
Adjournment	Next meeting to take place February 12, 2025.	It was moved and seconded to adjourn the meeting at 7:24pm. Motion carried.	

Bridgett Jabour, MCHD Secretary

Robert Dobry, Secretary/Treasurer

## CONSENT AGENDA PAYMENT OF BILLS

## FEB 2025 Bills

## Vendor

## Description

## Amount

12,378.20

\$

Kelly R. McCabe, PC	Invoice 5254 2/6/25	\$ 3,366.45
Mazzetti, Inc.	0107065 Proj 024-000152 1/23/25	\$ 1,676.25
Walston Bookkeeping, LLC	Inv 3569 1/28/25	\$ 292.50
Walston Bookkeeping, LLC	Inv 3516 1/9/25	\$ 975.00
Colo SDA Prop & Liab Ann Invoic	25PL-22023-3238	\$ 6,068.00



Total

Mazzetti, Inc. 220 Montgomery Street, Suite 640 San Francisco, CA 94104-3402 TEL: 415-362-3266 FEIN: 94-1722463 AccountsReceivable@mazzetti.com PLEASE NOTE OUR SUITE NUMBER HAS CHANGED ACH Payment is now our preferred payment method

## PAY BY ACH

Heritage Bank of Commerce ABA Routing: 121142287 Bank Account: 1101011755 Send remittance to: accountsreceivable@mazzetti.com

Brandon Johnson MCHD Board 1311 N. Mildred Rd. Cortez, CO 81321 January 23, 2025 Project No: 024-000152 Invoice No: 0107064

roject r <b>ofessional Serv</b>	024-000152 vices from Decem		outhwest Memoria December 28, 2024		d	
<b></b> Phase		Concept Design				
Consultants						
ATHANASIOS	ASTERIADIS					
12/5/2024	ATHANASIOS	SASTERIADIS	Invoice #35 - serv 11/1/24-11/30/24	rices for	1,676.25	
	Total Consult	ants			1,676.25	1,676.25
Billing Limits			Current	Prior	To-Date	
Total Billings			1,676.25	13,673.75	15,350.00	
Limit					15,350.00	
				Total this	Phase	\$1,676.25
				Total this I	nvoice	\$1,676.25
Dutstanding Invo	ices					
-	Number	Date	Balance			
-						

9,247.50

Billings to Date						
	Current	Prior	Total			
Labor	0.00	7,723.75	7,723.75			
Consultant	1,676.25	16,450.00	18,126.25			
Totals	1,676.25	24,173.75	25,850.00			

Project	024-000152	MCHD Microgrid	Invoice	0107064
Billir	ng Backup		Thursday, Jan	uary 23, 2025
Mazzet	ti, Inc.	Invoice 0107064 Dated 1/23/2025		12:55:28 PM
Project	024-000152	MCHD Southwest Memorial Hospital Microg	grid	
Phase	001	Concept Design		
Consult	tants			
ATHAN	ASIOS ASTERIADIS			
AP 0	0079464 12/5/2024	ATHANASIOS ASTERIADIS / Invoice #35 - services for 11/1/24-11/30/24 / Invoice: 35, 11/30/2024	1,676.25	
	Total Cor	nsultants	1,676.25	1,676.25
		Total th	is Phase	\$1,676.25
		Total this	s Project	\$1,676.25
		Total thi	s Report	\$1,676.25



MCCABE · LONE ATTORNEYS AT LAW

Invoice # 5254 Date: 02/06/2025 Due On: 03/08/2025

22 E. Main Street Cortez, Colorado 81321 United States Phone: 970-565-7209 Fax: 970-565-6355 www.mccabelawcortez.com

MONTEZUMA C. HOSPITAL DISTRICT PO BOX 1034 CORTEZ, CO 81321

## **Statement of Account**

	Outstanding Balance		New Charges		Payments Received		Total Amount Outstanding
(	\$1,340.00	+	\$2,026.45	) - (	\$0.00	) =	\$3,366.45

Please make all amounts payable to: Kelly R. McCabe P.C. Invoice includes 2% credit card service charge. (If paying by check or cash please take 2% off payment) Please pay within 30 days of receipt of this invoice.

## Montezuma C. Hospital District - 9001

## Services

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Туре	Date	Notes	Quantity	Attorney	Rate	Total
Service	12/16/2024	Review Seller Disclosures and Property Record Research	0.50	KDL	\$335.00	\$167.50
Service	12/19/2024	Communications Re: Waiving OEC and Communication with Nunn.	0.50	KDL	\$335.00	\$167.50
Service	01/03/2025	Preparation of DEO Resolution	0.30	KDL	\$335.00	\$100.50
Service	01/06/2025	Draft Request for Proposal for Owner's Representative and Resolution Re: PUD	0.70	CEW	\$155.00	\$108.50
Service	01/07/2025	Draft Resolution Re: Property Purchase	0.30	CEW	\$155.00	\$46.50

				Services Su	ubtotal	\$1,794.00
Service	01/22/2025	Preparation for Call of Nominations	0.40	KDL	\$335.00	\$134.00
Service	01/20/2025	Prepare call for nominations	0.20	CEW	\$155.00	\$31.00
Service	01/17/2025	Preparation of Letter to Nunn	0.80	KDL	\$335.00	\$268.00
Service	01/08/2025	Preparation for January Meeting, Request for Proposal and Resolutions	1.00	KDL	\$335.00	\$335.00
Service	01/08/2025	January 2025 Meeting	1.30	KDL	\$335.00	\$435.50

## Expenses

Туре	Date	Notes	Quantity	Rate	Total
Expense	01/13/2025	Publication Fees for Request for Proposals for Owner Representative	1.00	\$168.15	\$168.15
Expense	01/27/2025	Publication Fees for Call of Nominations	1.00	\$24.57	\$24.57
			Expenses S	ubtotal	\$192.72

Time Keeper	Quantity	Rate	Total
Keenen Lovett	4.8	\$335.00	\$1,608.00
Caitlin Willbanks	1.2	\$155.00	\$186.00
		Subtotal	\$1,986.72
	Credit Card Servic	e Charge (2.0%)	\$39.73
		Total	\$2,026.45

## **Detailed Statement of Account**

## Other Invoices

Invoice Number	Due On	Amount Due	Payments Received	Balance Due
4959	02/06/2025	\$1,340.00	\$0.00	\$1,340.00
Current Invoice				
Invoice Number	Due On	Amount Due	Payments Received	Balance Due

5254	03/08/2025	\$2,026.45	\$0.00	\$2,026.45
			Outstanding Balance	\$3,366.45
			Total Amount Outstanding	\$3,366.45

Please make all amounts payable to: Kelly R. McCabe, PC

Please pay within 30 days.

## Walston Bookkeeping, LLC

204 E Fort Union Blvd Ste 202 Midvale, Utah 84047 Phone: (801) 263-0400 Fax: (435) 292-4048

## Bill to: Montezuma County Hospital District

INVOICE #3569	
Invoice date:	Jan 28, 2025
Terms:	Due on Receipt
Due date:	Jan 28, 2025
BALANCE DUE:	\$292.50

Service	Description	Total
Bookkeeping	January - Reconciliation of bank accounts, preparation of management reports, and write checks.	\$292.50
	Subtotal	\$292.50
	Invoice Total	\$292.50
	BALANCE DUE	\$292.50

#### Late Fee Notice:

Invoices are subject to a late fee of up to 4% when they are past due.

#### Walston Bookkeeping, LLC

204 E Fort Union Blvd Ste 202 Midvale, Utah 84047 Phone: (801) 263-0400 Fax: (435) 292-4048

#### Bill to: Montezuma County Hospital District



INVOICE #3516	
Invoice date:	Jan 9, 2025
Terms:	Due on Receipt
Due date:	Jan 9, 2025
BALANCE DUE:	\$975.00

Service	Description	Total
Agreed-upon Procedure Engagement	Setup chart of accounts, enter and reconcile 3 bank accounts for 2024.	\$975.00
	Subtotal	\$975.00
	Invoice Total	\$975.00
	BALANCE DUE	\$975.00

#### Late Fee Notice:

Invoices are subject to a late fee of up to 4% when they are past due.



## Renewal Documents and Invoice 1/1/2025 to EOD 12/31/2025

Acceptance of this coverage is evidenced only by payment of the enclosed invoice by January 1, 2025.

The following renewal documents are attached where applicable:

- 1. Invoice: Payment is due by January 1, 2025. Please return a copy of the invoice with your payment to ensure it is applied correctly. We have attached Payment Instructions providing details on how to make payment and when cancellation could occur.
- 2. Comparison of Annual Contributions.
- 3. Deductible Options:
  - Provides the difference in cost by coverage line if you were to increase or decrease the deductible for that specific coverage.
- 4. Quote for Excess Liability limits for your consideration:
  - Limits of up to \$8 million, in excess of the primary \$2 million Liability limit, are available. Although the primary \$2 million Liability limit is sufficient to cover the CGIA tort cap, we do recommend you consider purchasing higher limits primarily due to special districts' unlimited liability to federal civil rights, discrimination, harassment, whistle blowing, and other employment-related practices claims.
- 5. Coverage Declaration Pages: Informational page summarizing the key points about the coverage provided including limits and deductible descriptions for all coverage provided. Full coverage forms will be available at <u>csdpool.org/documents</u> by January 1, 2025.
- 6. Schedules: Lists of exposures and values.
- 7. Certificates of coverage: Originals are mailed directly to each Certificate Holder when applicable.
- 8. Automobile identification cards: Hard copies will be mailed when applicable.



## **Property and Liability Coverage**

## Invoice

**Record:** 

Named Member:	Broker of Re
Montezuma County Hospital District	NO BROKER
PO Box 1034	
Cortez, CO 81321	

Coverage No.	Entity ID	Effective Date	Expiration Date	Invoice Date
25PL-22023-3238	22023	1/1/2025	EOD 12/31/2025	1/31/2025

erage	Contribution
General Liability	\$732.00
Property	\$4,284.00
Non-Owned Auto Liability	\$132.00
Hired Auto Physical Damage	\$65.00
Equipment Breakdown	\$329.00
No-Fault Water Intrusion & Sewer Backup	\$39.00
Public Officials Liability	\$487.00
Pollution	\$0.00

Total Contribution	\$6,068.00
Estimated Annualized Contribution (for budgeting purposes only)	\$6,068.00

Please note: where included above, Hired Auto Physical Damage and Non-Owned Auto Liability are mandatory coverages and may not be removed. No-Fault Water Intrusion & Sewer Backup coverage may only be removed with completion of the No-Fault Opt Out Endorsement.

The following discounts are applied (Not applicable to minimum contributions):

15.02% Continuity Credit Discount 10% Direct Discount

Payment Due by January 1, 2025

Payment evidences "acceptance" of this coverage. The terms of the Intergovernmental Agreement (IGA) require timely payment to prevent automatic cancellation of coverage. Please return this invoice and reference the coverage number on your check to help us apply your payment correctly. Only prior notice to the board of directors of the Colorado Special Districts Property and Liability Pool and subsequent approval may extend cancellation provision.

Remit checks to: Colorado Special Districts Property and Liability Pool PO Box 1539 Portland, OR 97207-1539

We accept online payments at E-Bill Express c/o McGriff, A Marsh & McClennan Agency, LLC Company Refer to Payment Instructions page for additional options billing@csdpool.org 800-318-8870 ext. 3



## **Payment Instructions**

We accept the following payment methods:

- 1. Online using **E-Bill Express** (<u>www.e-billexpress.com/ebpp/CSDPool</u>). An FAQ is available at the bottom of the landing page. For detailed instructions, please click <u>here</u>.
- 2. Mail your check to:

Colorado Special Districts Property and Liability Pool c/o McGriff, A Marsh & McClennan Agency, LLC Company PO Box 1539 Portland, OR 97207

For express or overnight mail services, please use the address below:

Colorado Special Districts Property and Liability Pool c/o McGriff, A Marsh & McClennan Agency, LLC Company 5400 Meadows Road, Suite 240 Lake Oswego, OR 97035

## To ensure your payment is accurately applied, always include a copy of the invoice.

3. Wire or ACH transfer from your own bank account. Let us know if you wish to use this method and we will be happy to provide you with these instructions.

In accordance with the Intergovernmental Agreement (IGA), you have sixty (60) days after the due date shown on the invoice to make your contribution payment. If you fail to make payment, automatic cancellation of coverage will occur on the 61<sup>st</sup> day. If you wish to reinstate your district's coverage after cancellation has occurred, a \$100 reinstatement fee will apply.

If your district requires a payment extension, please submit a written request within ten (10) business days from the date of the invoice, for consideration by the CSD Pool Board of Directors.

Finally, all members of the Pool must be members in good standing with the Special District Association of Colorado (SDA). Please visit the SDA website at sdaco.org for member information.

Please contact us at <u>billing@csdpool.org</u> or 800-318-8870 ext. 3 for billing questions.



# **SHS Report**

**Mission Statement** 

It is the mission of the Montezuma County Hospital District to assure high quality healthcare facilities for the community, Montezuma County, and the surrounding areas and to provide support and assistance in a manner which is consistent with a high standard of healthcare.

## **Resolution 2024 - 10**

A RESOLUTION BY THE BOARD OF DIRECTORS OF SOUTHWEST HEALTH SYSTEM, INC., A COLORADO NONPROFIT CORPORATION, SUMMARIZING EXPENDITURES FOR AND ADOPTING A BUDGET FOR SOUTHWEST MEMORIAL HOSPITAL, CORTEZ, COLORADO, FOR CALENDAR YEAR BEGINNING ON THE FIRST DAY OF JANUARY 2025, AND ENDING THE LAST DAY OF DECEMBER, 2025.

WHEREAS, the Board of Directors of Southwest Health System, Inc., has submitted a prepared and proposed budget for said governing body on the 18th<sup>th</sup> day of December, 2024, for its consideration; and

WHEREAS, whatever increases have been made in the expenditures, like increases were added to the revenue so that the budget remains in balance.

NOW, THEREFORE, BE IT RESOLVED by the Board of Directors of Southwest Health System, Inc., as follows:

1. That the estimated expenditures for Southwest Memorial Hospital are EIGHTY-TWO MILLION ELEVEN THOUSAND SIX HUNDRED EIGHTY-FIVE Dollars (\$82,011,685).

2. That estimated revenues, net of revenue deductions, for Southwest Memorial Hospital are EIGHTY-THREE MILLION FIFTY-FOUR THOUSAND FOUR HUNDRED **FOURTEEN Dollars (\$83,054,414).** 

3. That the budget as submitted and amended, be, and the same, hereby is approved and adopted as the budget for Southwest Memorial Hospital for the year above stated.

4. That the budget hereby approved and adopted shall be signed by the Board of Directors of Southwest Health System, Inc. and made a part of the public records of said Board.

Approved and Adopted this 18<sup>th</sup> day of December, 2025.

Southwest Health System, Inc., doing business as Southwest Memorial Hospital

Shirley Jones, Chairperson Shirley Jones, Chairperson

ATTEST:

Signed by:

Dan Valverde, Schy/Treas Dan Valverde, Secretary/Treasurer

## **Resolution #2024-11**

A RESOLUTION BY THE BOARD OF DIRECTORS OF SOUTHWEST HEALTH SYSTEM, INC., A COLORADO NONPROFIT CORPORATION, APPROPRIATING SUMS OF MONEY IN THE AMOUNTS AND FOR THE PURPOSES AS SET FORTH BELOW FOR SOUTHWEST HEALTH SYSTEM, INC., CORTEZ, COLORADO, FOR THE 2025 BUDGET YEAR.

WHEREAS, the Board of Directors of Southwest Health System, Inc., approved and adopted its annual budget on the 18<sup>th</sup> day of December, 2024; and

WHEREAS, the Board of Directors of Southwest Health System, Inc., has made provisions therein for revenues in an amount equal to or greater than the total proposed expenditures as set forth in said budget; and

WHEREAS, it is necessary to appropriate the revenues provided in the budget for the purposes described below, so as not to impair the operations of Southwest Health System, Inc.

NOW, THEREFORE, BE IT RESOLVED by the Board of Directors for Southwest Health System, Inc., that the sum of EIGHTY-TWO MILLION ELEVEN THOUSAND SIX HUNDRED EIGHTY-FIVE Dollars (\$82,011,685) is hereby appropriated from the revenues to Southwest Health System, Inc., for the purposes and in accordance with the provisions of said budget.

Approved and Adopted this  $18^{th}$  day of December, 2024.

Southwest Health System, Inc. Board of Directors Shirley Jones, Chairperson Barrousser 470410... Shirley Jones, Chairperson

ATTEST

Signed by: Dan Valverde, Sety/Treas

Dan Valverde, Secretary/Treasurer

STATE OF COLORADO

) ss.

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COUNTY OF MONTEZUMA

## CEO Report

Board Meeting Date: January 25, 2025 Committee or Staff Completing Report: Joe Theine Date of Committee Meeting (if applicable): n/a



Physic	cian   APP Recruiting
•	Kameo Smith, DO signed Letter of Intent. Tentative start July 2025.
٠	Completed two in-person interviews with internal medicine physicians. Offer extended to one candidate.
Oper	ations Updates
•	Gallup Q12 Small Book Club reading "12: The Elements of Great Managing"
•	RN vacancies remain lower, 5 current openings. Highest was 24. R12 Retention End of December remains
	greater than 90%
•	Generators for Walk-In Clinic, Mancos Clinic and Mancos EMS barn installed. Thank you MCHD for funding a
	portion of the hookup for Mancos Clinic and Walk-In Clinic. Thank you for Town of Mancos funding portion of
	hookup for Mancos Clinic and EMS station.
Comn	nunity Engagement
٠	Duke Underwood OD and Tyler Underwood OD Hospital/Operating Room Tour
٠	Montezuma County Board of County Commissioners Update Presentation
٠	Southwest Colorado Education Collaborative Board Meeting
٠	SW Colorado Economic Outlook
٠	Town of Mancos Trustees Update Presentation
•	SWORD (SW Opioid Response) Funding Retreat
Staff I	Veetings & Internal Engagement
٠	Emergency Department "CEO Walk in the Shoes" Shadowing Pilot
٠	Lean Training for Senior Leadership Team
•	Inpatient Physician Services Meeting – Consulting Physicians
•	Southwest Health System Holiday Party
Other	Meetings / Engagement
•	Rhonda Webb MD, Pagosa Springs Medical Center CEO
•	US Department of Energy Outreach
•	Kameo Smith, MD
٠	Capitan Katrina Leslie Puhuyaoma, Nothern Navajo Medical Center CEO
٠	Josh Dellinger, Empire Electric CEO
٠	Senator Hickenlooper Virtual Meeting to Discuss CO Rural Futures
Other	Notable Items
٠	Reviewed First Draft Medical Staff Development Plan with Executive Leadership & Community Hospital
	Corporation, Commented and Final Draft Will Be Presented to SHS Board Provider Recruiting, Contracting &
	Retention Commitee.

Memo	SOUTHWEST HEALTH SYSTEM
То:	SHS Board of Directors and MCHD Board of Directors
From:	Adam Conley, CPA CFO
Subject:	November Financial Statements
Date:	November 30, 2024

The November Financial Statements were reviewed by the SHS Finance Committee on January 23, 2025. Included in the Board Book are the financial statements. The purpose of this Memo is to highlight the major items that occurred in the month of November.

## <u>Stats</u>

- November volumes were below the averages we have seen during fiscal 2024.
- (1) Adjusted Patient Days, overall metric of hospital volume, was at a 6 month low, however we are 5% favorable as compared to prior year.
- Volume and Utilization page 1.
  - (2) Admissions are unfavorable as compared to both budget and prior year. See notes on Case Mix
     Related to acute admissions.
  - o (3) Patient Days are unfavorable as compared to budget but favorable to prior year
    - Related to acute patient days.
    - Swing bed patient days exceed both budget and prior year
  - o (4) Births
    - 11 Births in November
      - Still exceeding prior year and budget.
  - (5) Case mix index
    - Measure of the sickness of patients
    - Slightly behind budget but exceeding prior year. Taking care of sicker patients
- Volume and utilization page 2.
  - (6) Surgeries
    - Set a 6 month low in total and inpatient surgeries.
    - Variance has improved from a highpoint of 27% to 16% in the back half of the year
  - o (7) ER Visits
    - Unfavorable as compared to budget and flat with prior year
    - Moving out of the busiest season and expect lower volumes through the end of the year
  - o (8) Clinic Visits
    - Need to combine RHC and specialty based on prior year classifications.
    - Under budget by 3.2k visits. Under prior year by 2.3k visits
      - Have been making up ground each of the last 3 months.

## **Operating Performance**

- Earnings Before Interest Depreciation and Amortization (EBIDA)
  - (9) Bottom line EBIDA is \$8.3M vs a budget of \$5.9M and prior year of \$5.8M
- Revenue

0

- (10) Gross revenue flat with budget but favorable as compared to prior year
  - Indicative of the increase in case mix index, favorable variance in adjusted patient days (as compared to prior year) and longer length of stay currently being incurred
- · Deductions from Revenue
  - o (11) Deductions from revenue are favorable as compared budget and flat as compared to prior year

- Had a one time pick up of 664k related to a 2022 Medicare Cost Report Settlement
  - Without the onetime item we would have had a negative Operating and Total Margin
- Net Patient Service Revenue
  - (12) Favorable as compared to both budget and prior year.
  - Expect to collect more in cash on fully adjudicated claims than budgeted or prior year 529% in Navamber and 47% XTD
  - 53% in November and 47% YTD
    - November is increased by 664k pickup. Without the pickup NPSR% would be 47%
- Expenses
  - (13) Overall operating expenses are favorable as compared to budget and unfavorable with prior year
    - Contract labor increased related to coverage following Dr. Schmitt's departure.
- Income Statement (EBIDA Adj)
  - o (14) Our \$8.3M in EBITDA has to be adjusted for known expenses resulting in \$2.1M EBIDA
    - See adjustments in yellow in packet
- Balance Sheet
  - Current ration (current assets/current liabilities) = 1.85
    - Increase from prior two months is mostly related to a decrease in accounts payable and Third party settlements
  - Days cash on hand
    - Bank requires 60
    - (15) Currently at 73 with no add backs.
    - (16) 93 days total reportable Days Cash On Hand
      - Bank allows for an additional 21 days added back for bond and capital infrastructure reserve.



#### Patient Volumes and Utilization Statistics

## Southwest Health System Consolidated

Through the Period Ending Nov-24

		Fis	scal-Year	-to-Date					Six-Mont	h Trend				Cı	urrent Mon	th	
	Current	Budget	# Var	% Var	Prior	% Var	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Budget	# Var	% Var P	rior Year	% Var
2 Admissions, Total	781	977	(196)	( <b>20.1%</b> )	868	(10.0%)	73	93	69	73	78	62	87	(25)	(28.7%)	61	1.6%
Acute	711	895	(184)	(20.6%)	805	(11.7%)	65	86	64	66	70	57	76	(19)	(25.0%)	57	0.0%
SNF	70	82	(12)	(14.6%)	63	11.1%	8	7	5	7	8	5	11	(6)	(54.5%)	4	25.0%
Discharges, Total	809	0	809	0.0%	875	(7.5%)	70	89	74	79	76	67	0	67	0.0%	69	(2.9%)
Acute	736	0	736	0.0%	811	(9.2%)	64	84	66	72	69	60	0	60	0.0%	64	(6.3%)
SNF	73	0	73	0.0%	64	14.1%	6	5	8	7	7	7	0	7	0.0%	5	40.0%
3 Patient Days, Total	3,636	3,921	(285)	(7.3%)	3,611	0.7%	337	399	325	319	309	291	366	(75)	(20.5%)	329	(11.6%)
Acute	2,709	3,161	(452)	(14.3%)	2,925	(7.4%)	266	301	232	249	234	222	293	(71)	(24.2%)	238	(6.7%)
SNF	927	760	167	22.0%	686	35.1%	71	98	93	70	75	69	73	(4)	(5.5%)	91	(24.2%)
ALOS, Total Discharges	4.49	0.00	(4.49)	0.0%	4.13	(8.9%)	4.81	4.48	4.39	4.04	4.07	4.34	0.00	(4.34)	0.0%	4.77	8.9%
Acute	3.68	0.00	(3.68)	0.0%	3.61	(2.1%)	4.16	3.58	3.52	3.46	3.39	3.70	0.00	(3.70)	0.0%	3.72	0.5%
SNF	12.70	0.00	(12.70)	0.0%	10.72	(18.5%)	11.83	19.60	11.63	10.00	10.71	9.86	0.00	(9.86)	0.0%	18.20	45.8%
Adj Admissions	5,576	6,583	(1,007)	(15.3%)	5,951	(6.3%)	512	634	529	538	701	423	588	(165)	(28.1%)	438	(3.3%)
Adj Discharges 🖌	5,776	0	5,776	0.0%	5,999	(3.7%)	491	606	568	583	683	457	0	457	0.0%	495	(7.6%)
Adj Patient Days	25,961	26,420	(460)	(1.7%)	24,758	4.9%	2,366	2,719	2,493	2,353	2,778	1,987	2,475	(489)	(19.7%)	2,360	(15.8%)
4 Births	133	128	5	3.9%	120	10.8%	11	18	13	17	17	11	12	(1)	(8.3%)	15	(26.7%)
Observation Days	450	505	(55)	(10.9%)	431	4.4%	36	31	36	46	48	59	37	22	59.5%	26	126.9%
5 Case Mix Index, Total	1.2238	1.2576	(0.0338)	(2.7%)	1.2134	0.9%	1.2909	1.2783	1.2502	1.0842	1.1700	1.1108	1.2576	(0.1468)	(11.7%)	1.1002	1.0%
Case Mix Index, Medicare	1.3321	1.2017	0.1304	10.8%	1.2242	8.8%	1.4920	1.2509	1.3774	1.2321	1.2883	1.4232	1.2017	0.2215	18.4%	1.2332	15.4%



#### Patient Volumes and Utilization Statistics

Southwest Health System Consolidated

Through the Period Ending Nov-24

			Fiscal-Year-	-to-Date					Six-Montl	h Trend		[	Current Month					
	Current	Budget	# Var	% Var	Prior	% Var	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Budget	# Var	% Var P	rior Year	% Var	
Total O/P Registrations	56,142	0	56,142	0.0%	55,178	1.7%	4,762	5,080	5,207	5,170	5,469	4,802	0	4,802	0.0%	4,753	1.0%	
6 Surgeries, Total	748	888	(140)	(15.8%)	890	(16.0%)	65	65	77	85	89	64	81	(17)	(21.0%)	79	(19.0%)	
Inpatient	174	227	(53)	(23.3%)	223	(22.0%)	15	21	19	19	16	10	16	(6)	(37.5%)	12	(16.7%)	
Outpatient	574	661	(87)	(13.2%)	667	(13.9%)	50	44	58	66	73	54	65	(11)	(16.9%)	67	(19.4%)	
Total GI Procedures	920	988	(68)	(6.9%)	973	(5.4%)	76	105	86	84	100	79	104	(25)	(24.0%)	77	2.6%	
7 Emergency Visits	12,457	12,984	(527)	(4.1%)	12,601	(1.1%)	1,160	1,182	1,217	1,181	1,089	1,057	1,138	(81)	(7.1%)	1,112	(4.9%)	
ER Conversion Rate	6.5%	6.0%		0.5%	7.0%	(0.5%)	6.3%	7.9%	5.7%	6.2%	7.2%	5.9%	6.0%		(0.1%)	7.0%	(1.1%)	
ER Transfers Out	608	0	608	0.0%	573	6.1%	56	46	41	63	52	46	0	46	0.0%	60	(23.3%)	
Rural Health Clinic Visits	38,838	41,632	(2,794)	(6.7%)	38,285	1.4%	2,906	3,566	3,891	3,262	3,806	3,236	3,651	(415)	(11.4%)	3,434	(5.8%)	
Provider Based or Specialty Clinic Visits	8,846	9,335	(489)	(5.2%)	11,762	(24.8%)	812	963	813	862	969	725	818	(93)	(11.4%)	981	(26.1%)	
Lab Tests	135,990	0	135,990	0.0%	132,764	2.4%	11,500	13,437	12,843	12,682	13,585	11,164	0	11,164	0.0%	11,655	(4.2%)	
Total Therapy Treatments	32,509	0	32,509	0.0%	30,753	5.7%	2,365	2,943	2,863	2,917	3,548	2,821	0	2,821	0.0%	3,144	(10.3%)	
Occupational Therapy Treatments	597	0	597	0.0%	2,161	(72.4%)	0	0	0	0	0	0	0	0	0.0%	263	(100.0%)	
Physical Therapy Treatments	26,400	0	26,400	0.0%	23,744	11.2%	1,965	2,623	2,563	2,485	2,856	2,237	0	2,237	0.0%	2,373	(5.7%)	
Respiratory Therapy Treatments	0	0	0	0.0%	0	0.0%	0	0	0	0	0	0	0	0	0.0%	0	0.0%	
Speech Therapy Treatments	5,512	0	5,512	0.0%	4,848	13.7%	400	320	300	432	692	584	0	584	0.0%	508	15.0%	
Wound Care Procedures	1,189	1,351	(162)	(12.0%)	1,290	(7.8%)	128	116	75	98	80	84	164	(80)	(48.8%)	167	(49.7%)	
Pain Management Cases	194	229	(35)	(15.3%)	223	(13.0%)	15	17	20	9	16	15	22	(7)	(31.8%)	24	(37.5%)	
Sleep Studies	482	495	(13)	(2.6%)	485	(0.6%)	44	47	43	24	28	29	55	(26)	(47.3%)	42	(31.0%)	
Total Imaging Procedures	24,964	24,786	178	0.7%	23,928	4.3%	2,232	2,203	2,512	2,302	2,269	2,029	2,163	(134)	(6.2%)	2,088	(2.8%)	
CT Procedures	5,708	5,927	(219)	(3.7%)	5,551	2.8%	535	568	552	520	500	484	502	(18)	(3.6%)	470	3.0%	
MRI Procedures	1,440	1,420	20	1.4%	1,365	5.5%	121	139	150	131	141	99	127	(28)	(22.0%)	91	8.8%	
Inpatient	44	11	33	300.0%	54	(18.5%)	4	7	2	7	3	4	1	3	300.0%	2	100.0%	
Outpatient	1,396	1,409	(13)	(0.9%)	1,311	6.5%	117	132	148	124	138	95	126	(31)	(24.6%)	89	6.7%	
Mammography	3,621	0	3,621	0.0%	3,534	2.5%	272	198	372	337	262	333	0	333	0.0%	375	(11.2%)	
Ultrasound	3,958	0	3,958	0.0%	3,099	27.7%	359	427	405	354	392	267	0	267	0.0%	240	11.3%	
Nuclear Medicine	280	0	280	0.0%	221	26.7%	25	39	36	34	25	8	0	8	0.0%	25	(68.0%)	
Other Imaging	644	0	644	0.0%	555	16.0%	53	46	68	70	69	61	0	61	0.0%	71	(14.1%)	



#### **Operating Performance Summary**

Southwest Health System Consolidated

Through the Period Ending Nov-24

			Fiscal-Year	-to-Date			Six-Month Trend						Current Month					
	Actual	Budget	\$ Var	% Var	Prior	% Var	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Budget	\$ Var	% Var	Prior Year	% Var	
Inpatient Revenue	\$20,148	\$21,535	(\$1,387)	(6.4%)	\$20,555	(2.0%)	\$1,742	\$2,080	\$1,827	\$1,766	\$1,556	\$1,735	\$1,934	(\$199)	(10.3%)	\$1,736	(0.0%)	
Outpatient Revenue	123,704	123,572	132	0.1%	120,375	2.8%	10,485	12,092	12,187	11,259	12,430	10,110	11,149	(1,039)	(9.3%)	10,716	(5.7%)	
10 Gross Patient Revenue	143,852	145,107	(1,255)	(0.9%)	140,930	2.1%	12,227	14,172	14,014	13,025	13,986	11,845	13,083	(1,238)	(9.5%)	12,452	(4.9%)	
Revenue Deductions																		
Medicare	23,601	23.625	24	0.1%	23,758	0.7%	2.216	2.283	2.837	2.161	2.248	1,996	2.135	139	6.5%	2,167	7.9%	
Medicaid	24,402	29,757	5,355	18.0%	29,040	16.0%	2,056	2,384	1,343	2,084	2,420	2,072	2,690	618	23.0%	2,316	10.5%	
Prior Year Cost Report Adi-MCARE	(807)	0	807	0.0%	305	364.6%	0	0	40	(1)	(30)	(664)	0	664	0.0%	173	483.8%	
Prior Year Cost Report Adj-MCAID	(27)	0	27	0.0%	54	150.0%	0	0	(18)	0	0	0	0	0	0.0%	0	0.0%	
Other Directed Payment Programs	(12,429)	(11,024)	1,405	12.7%	(11,078)	12.2%	(949)	(1,526)	(1,521)	(1,564)	(1,068)	(1,057)	(1,002)	55	5.5%	(951)	11.1%	
Managed Medicare	16,756	15,670	(1,086)	(6.9%)	15,541	(7.8%)	1,587	1,610	1,310	1,537	1,619	1,356	1,416	60	4.2%	1,199	(13.1%)	
Managed Care (HMO/PPO) Discounts	9,678	7,735	(1,943)	(25.1%)	6,572	(47.3%)	934	965	1,202	989	559	761	695	(66)	(9.5%)	411	(85.2%)	
Charity & Indigent care	4,473	3,232	(1,241)	(38.4%)	3,397	(31.7%)	435	448	502	390	536	238	291	53	18.2%	598	60.2%	
Other Discounts	5,274	4,958	(316)	(6.4%)	4,980	(5.9%)	474	456	681	467	678	402	447	45	10.1%	431	6.7%	
Self Pay Discounts	0	690	690	100.0%	0	0.0%	0	0	0	0	0	o	62	62	100.0%	0	0.0%	
Implicit Price Concessions	5,685	3,724	(1,961)	(52.7%)	3,624	(56.9%)	519	671	582	565	656	444	337	(107)	(31.8%)	648	31.5%	
1 1 Total Deductions	76,606	78,367	1,761	2.2%	76,193	(0.5%)	7,272	7,291	6,958	6,628	7,618	5,548	7,071	1,523	21.6%	6,992	20.7%	
Net Patient Revenue 12	67,246	66,740	506	0.8%	64,737	3.9%	4,955	6,881	7,056	6,397	6,368	6,297	6,012	285	4.7%	5,460	15.3%	
Other Revenue	6,983	5,780	1,203	20.8%	5,774	21.0%	548	594	724	625	638	772	534	238	44.5%	677	14.0%	
Net Operating Revenue	74,229	72,520	1,709	2.4%	70,511	5.3%	5,503	7,475	7,780	7,022	7,006	7,069	6,546	523	8.0%	6,137	15.2%	
0																		
Operating Expenses		00 5 40			00.074			0.070		0.550	0.007				(0.00()		(0.00()	
Salaries	29,601	32,543	2,942	1.6%	29,071	(1.7%)	2,410	2,672	2,918	2,559	3,007	2,843	2,934	91	(2.2%)	2,319	(9.6%)	
Contract Labor	5,909	3,556	(2,353)	0.0%	5,846	(1.1%)	557	548	513	640	369	460	299	(161)	0.0%	694	33.8%	
Employee Benefits	6,564	6,212	(352)	(5.7%)	5,918	(10.9%)	646	617	636	607	660	614	564	(50)	(8.8%)	162	(277.7%)	
Professional Fees	1,412	1,431	19	1.3%	1,346	(4.9%)	118	173	132	152	90	44	127	83	65.4%	147	70.1%	
Medical Supplies	3,744	3,730	(14)	(0.4%)	3,568	(4.9%)	161	302	347	425 823	418 798	359	353	(6)	(1.9%)	340	(5.5%)	
Pharmaceutical Supplies	8,218	7,369	(849)	(11.5%)	7,620	(7.9%)	650	708	809			863	679	(184)	(27.2%)	894	3.4%	
Other Supplies	983	1,203	220	18.3%	1,046	6.1%	73	122	104	113	90	66	111	45	40.6%	110	40.4%	
Purchased Services	3,479	3,699	220	6.0%	3,637	4.3%	260	398	283	353	320	367	332	(35)	(10.5%)	328	(11.7%)	
Lease and Rent	261	299	38	12.9%	344	24.3%	24	18	27	24	10	26	27	18	67.0%	24	62.4%	
Insurance	930	1,019	89	8.7%	918	(1.3%)	87	85	133	79	77	72	96	24	25.6%	94	23.8%	
Utilities	901	1,121	220	19.6%	1,035	12.9%	65	86	124	59	66	115	103	(12)	(11.0%)	80	(43.2%)	
Depreciation & Amortization	3,181	3,243	62	1.9%	3,836	17.1%	282	293	295	283	265	256	272	16	5.7%	319	19.6%	
Interest	1,232	1,129	(103)	(9.2%)	1,237	0.4%	110	110	111	109	108	104	98	(6)	(6.2%)	125	16.6%	
13 <sup>Other</sup> Total Operating Expenses	6,613 73.028	6,791 73.345	178 317	2.6% 0.4%	6,399 71.821	(3.3%) (1.7%)	601 6.044	642 6.774	476 6.908	515 6.741	628 6.906	628 6.800	615 6.610	(13) (190)	(2.2%) ( <b>2.9%)</b>	629 6.265	0.2% (8.5%)	
Operating Margin	1,201	(825)	2,026	(245.6%)	(\$1,310)	191.5%	(541)	701	872	281	100	269	(\$64)	333	521.8%	(\$128)	305.6%	
Non-Operating Revenue (Exp)																		
Investment Income	448	379	69	18.2%	(8)	5,700.0%	53	130	81	92	(54)	33	31	2	6.5%	87	(62.1%)	
Other	2,222	1,957	265	13.5%	2,004	10.9%	192	217	219	223	257	226	203	23	11.3%	214	5.6%	
Total Non-Operating Revenue (Exp)	2,670	2,336	334	14.3%	1,996	33.8%	245	347	300	315	203	259	234	25	10.7%	301	(14.0%)	
Net Margin	\$3,871	\$1,511	\$2,360	156.2%	\$686	464.3%	(\$296)	\$1,048	\$1,172	\$596	\$303	\$528	\$170	\$358	210.6%	\$173	210.0%	
9 EBIDA	\$8,284	\$5,883	\$2,401	40.8%	\$5,759	43.8%	\$96	\$1,451	\$1,578	\$988	\$676	\$888	\$540	\$348	64.4%	\$617	43.9%	
Total Profit Margin EBIDA Margin	5.2% 11.2%	2.1% 8.1%			1.0% 8.2%		<mark>(5.4%)</mark> 1.7%	14.0% 19.4%	15.1% 20.3%	8.5% 14.1%	4.3% 9.6%	7.5% 12.6%	2.6% 8.2%			2.8% 10.1%		



## Income Statement

Southwest Health System Consolidated

Through the Period Ending Nov-24

					ent Month				
			_	Varia	nce *	Prior	_	Varia	
ctual	%GPR	Budget	%GPR	\$	%	Year	%GPR	\$	
1,735	14.6%	\$1,934	14.8%	(\$199)	(10.3%)	\$1,736		(\$1)	
0,110	85.4%	11,149	85.2%	(1,039)	(9.3%)	10,716		(606)	
1,845	100.0%	13,083	100.0%	(1,238)	(9.5%)	12,452 	100.0%	(607)	
1,996	16.9%	2,135	16.3%	139	37.6%	   2,167	17.4%	171	
2,072	17.5%	2,133	20.6%	618	23.0%			244	
	-5.6%	2,690	20.0%	664	23.0%	2,316   173		244 837	
(664)									
0	0.0%	0	0.0%	0	0.0%	0		0	
1,057)	-8.9%	(1,002)	-7.7%	55	5.5%	(951	•	106	
1,356	11.4%	1,416	10.8%	60	4.2%	1,199		(157)	
761	6.4%	695	5.3%	(66)	(9.5%)	411	3.3%	(350)	
238	2.0%	291	2.2%	53	18.1%	598	4.8%	360	
402	3.4%	447	3.4%	45	10.1%	431	3.5%	29	
0	0.0%	62	0.5%	62	100.0%	0		0	
444	3.7%	337	2.6%	(107)	(31.6%)	648		204	
5,548	46.8%	7,071	54.0%	1,523	21.6%	6,992	56.2%	1,444	
6,297	53.2%	6,012	46.0%	285	4.7%	5,460	43.8%	837	
772	6.5%	534	4.1%	238	44.5%	677	5.4%	95	
7,069	59.7%	6,546	50.0%	523	8.0%	6,137	49.3%	932	
	%NOR		%NOR				%NOR		
2,843	40.2%	2,934	44.8%	91	(2.2%)	2,319		(524)	
460	6.5%	2,004	4.6%	(161)	0.0%	694	11.3%	234	
400 614	8.7%	299 564	4.0 % 8.6%	(101)	(8.8%)	1 162		(452)	7
44	0.6%	127	1.9%	83	65.4%	147	2.0%	103	1
359	5.1%	353	5.4%	(6)	(1.9%)	340		(19)	
863	12.2%	679	10.4%	(184)	(1.9%)	894	14.6%	31	
66	0.9%	111	1.7%	45	40.6%	•	14.0%	44	
367	5.2%	332	5.1%	(35)	(10.5%)	110   328		(39)	
9	0.1%	27	0.4%	(33)	67.0%	•	0.4%	(39)	
9 72	1.0%					•		22	
115	1.6%	96 103	1.5% 1.6%	24 (12)	25.6%	•		(35)	
256				(12)	(11.0%) 5.7%	•			
256 104	3.6% 1.5%	272 98	4.2% 1.5%	(6)	5.7% (6.2%)	319   125		63 21	
628	8.9%	615	9.4%	(13)	(0.2%)	629		1	
6,800	96.2%	6,610	101.0%	(190)	(2.2%)	6,265		(535)	
269	3.8%	(64)	-1.0%	333	521.8%	(128	) -2.1%	397	
	0.070	(0.)					,,		
33	0.5%	31	0.5%	2	6.5%	   87	1.4%	(54)	
226	3.2%	203	3.1%	23	11.3%	214		12	
259	3.7%	234	3.6%	25	10.7%	301	4.9%	(42)	
\$528	7.5%	\$170	2.6%	\$358	210.6%	  \$173	2.8%	\$355	
\$888	12.6%	\$540	8.2%	\$348	64.4%	\$617	10.1%	\$271	

					Fiscal-Ye	ar-to-Date				
				_	Variar	nce *	Prior	_	Varia	
	Actual	%GPR	Budget	%GPR	\$	%	Year	%GPR	\$	%
Inpatient Revenue	\$20,148	14.0%	\$21,535	14.8%	(\$1,387)	(6.4%)	\$20,555	14.6%	(\$407)	(2.0%
Outpatient Revenue	123,704	86.0%	123,572	85.2%	132	0.1%	120,375	85.4%	3,329	2.89
TOTAL GROSS PATIENT REVENUE	143,852	100.0%	145,107	100.0%	(1,255)	(0.9%)	140,930	100.0%	2,922	2.1%
REVENUE DEDUCTIONS										
Medicare Contractual	23,601	16.4%	23,625	16.3%	24	3.5%	23,758	16.9%	157	5.3
Medicaid Contractual	24,402	17.0%	29,757	20.5%	5,355	18.1%	29,040	20.6%	4,638	16.29
Prior Year Medicare Cost Report Adj.	(807)	-0.6%	0	0.0%	807	0.0%	305	0.2%	1,112	364.3
Prior Year Medicaid Cost Report Adj.	(27)	0.0%	0	0.0%	27	0.0%	54	0.0%	81	150.2
Other Directed Payment Programs	(12,429)	-8.6%	(11,024)	-7.6%	1,405	12.7%	(11,078)	-7.9%	1,351	12.2
Managed Medicare	16,756	11.6%	15,670	10.8%	(1,086)	(6.9%)	15,541	11.0%	(1,215)	(7.8%
Managed Care (HMO/PPO) Discounts	9,678	6.7%	7,735	5.3%	(1,943)	(25.1%)	6,572	4.7%	(3,106)	(47.3%
Charity & Indigent Discounts	4,473	3.1%	3,232	2.2%	(1,241)	(38.4%)	3,397	2.4%	(1,076)	(31.79
Other Discounts	5,274	3.7%	4,958	3.4%	(316)	(6.4%)	4,980	3.5%	(294)	(5.9%
Self Pay Discounts	0	0.0%	690	0.5%	690	100.0%	0	0.0%	0	0.0
Implicit Price Concessions	5,685	4.0%	3,724	2.6%	(1,961)	(52.7%)	3,624	2.6%	(2,061)	(56.9%
TOTAL REVENUE DEDUCTIONS	76,606	53.3%	78,367	54.0%	1,761	2.2%	76,193	54.1%	(413)	(0.5%
TOTAL NET PATIENT REVENUE	67,246	46.7%	66,740	46.0%	506	0.8%	64,737	45.9%	2,509	3.99
Other Revenue	6,983	4.9%	5,780	4.0%	1,203	 20.8%	5,774	4.1%	1,209	21.0
TOTAL NET REVENUE	74,229	51.6%	72,520	50.0%	1,709	2.4%	70,511	50.0%	3,718	5.3
OPERATING EXPENSE		%NOR		%NOR				%NOR		
Salary and Wages	29,601	39.9%	32,543	44.9%	2,942	1.6%	29,071	41.2%	(530)	(1.79
Contract Labor	5,909	8.0%	3.556	4.9%	(2,353)	0.0%	5.846	8.3%	(63)	(1.19
Employee Benefits	6,564	8.8%	6,212	8.6%	(352)	(5.7%)	- ,	8.4%	(646)	(10.99
Professional Fees	1.412	1.9%	1.431	2.0%	(552)	1.3%		1.9%	(66)	(10.3)
Medical Supplies	3,744	5.0%	3,730	5.1%	(14)	(0.4%)		5.1%	(176)	(4.99
Pharmaceutical Supplies	8.218	11.1%	7.369	10.2%	(849)	(0.4%)		10.8%	(598)	(7.99
Other Supplies	983	1.3%	1,203	1.7%	220			1.5%	63	6.1
Purchased Services	3.479	4.7%	3.699	5.1%	220	18.3%   6.0%	3.637	5.2%	158	4.3
Lease and Rent	261	0.4%	299	0.4%	38	12.9%		0.5%	83	24.3
Insurance	930	1.3%	1.019	1.4%	30 89	8.7%		1.3%	(12)	(1.39
Utilities	930 901	1.3%	1,019	1.4%	89 220	- 1		1.3%	(12)	(1.3
Depreciation & Amortization	3.181					19.6%				
Interest		4.3% 1.7%	3,243 1,129	4.5% 1.6%	62 (103)	1.9%		5.4% 1.8%	655 5	17.1 0.4
	1,232				· · · · ·	(9.2%)				
Other Total Operating Expenses TOTAL OPERATING EXPENSES	6,613 73,028	8.9% 98.4%	6,791 73,345	9.4% 101.1%	178 <b>317</b>	<u>2.6%</u>   0.4%	6,399 71,821	9.1% 101.9%	(214) (1,207)	(3.39 (1.79
	1.201	1.6%	(825)	-1.1%	2.026	245.5%		-1.9%	2.511	191.5
OPERATING MARGIN	1,201	1.6%	(825)	-1.1%	2,026	245.5%	(1,310)	-1.9%	2,511	191.5
NON-OPERATING REVENUE (EXP)						I				
Investment Income	448	0.6%	379	0.5%	69	18.2%	(8)	0.0%	456	######
ther Total Non-Operating Expenses (EXP)	2,222	3.0%	1,957	2.7%	265	13.5%	2,004	2.8%	218	10.9
OTAL NON-OPERATING REVENUE (EXP)	2,670	3.6%	2,336	3.2%	334	14.3%	1,996	2.8%	674	33.8
NET MARGIN	\$3,871	5.2%	\$1,511	2.1%	\$2,360	156.2%	\$686	1.0%	\$3,185	464.3
EBIDA	\$8,284	11.2%	\$5,883	8.1%	\$2,401	40.8%	\$5,759	8.2%	\$2,525	43.89

(164) (64) (161) (8)

492

Bond Debt Payment	(1,800)
Line of Credit Payments	(838)
Reserve for Capital Infrastructure	(1,568)
Capital Purchases	(759)
Medicare Overpayment - Repayment	(1,186)
Grand Total	2,133

14



## Balance Sheet

## Southwest Health System Consolidated

	Nov-24 Current	Oct-24 Previous	Varia	nce*	Nov-23 Last Year	Varia	nce	Dec-23 Last Year	Varia	nce*
ASSETS	Month	Month	\$	%	Last real	\$	%	End	\$	%
Current Assets										
Cash and Cash Equivalents	\$4,519	\$4,865	(\$346)	(7.1%)	\$10,531	(\$6,012)	(57.1%)	\$3,612	\$907	25.19
Short-Term Investments	\$4,519 10.795	\$4,805 10,780	(\$340)	0.1%	3,539	7,256	205.0%	33,012 10,539	3907 256	2.4
Patient Accounts Receivable, Net	6,979	6,960	15	0.1%	6,035	944	15.6%	6,199	780	12.6
Inventories	1,546	1,524	22	1.4%	1,329	944 217	16.3%	1,437	109	7.6
Other Current Assets	1,536	1,638	(102)	(6.2%)	1,329	56	3.8%	1,489	47	3.29
Total Current Assets	25,375	25,767	(392)	(1.5%)	22,914	2,461	10.7%	23,276	2,099	9.09
		,	()	()	,• · · ·	_,		,	_,	
Assets Whose Use is Limited or Donor-Restricted Net of Amount Required for Current Liabilities	5,784	5,615	169	3.0%	3,693	2,091	56.6%	3,996	1,788	44.79
Property, Plant, and Equipment, Net	29,496	29,731	(235)	(0.8%)	32,198	(2,702)	(8.4%)	31,890	(2,394)	(7.5%
Other Assets	245	236	9	4.4%	163	82	50.7%	192	53	27.6%
Total Assets	\$60,900	\$61,349	(\$449)	(0.7%)	\$58,968	\$1,932	3.3%	\$59,354	\$1,546	2.6
LIABILITIES AND FUND BALANCES										
Current Liabilities										
Accounts Payable	\$2,133	\$2,605	(\$472)	(18.1%)	\$3,476	(\$1,343)	(38.6%)	\$3,956	(\$1,823)	(46.1%
Accrued Expense Payable	4,140	3,725	415	11.1%	2,564	1,576	61.4%	2,839	1,301	45.89
Estimated Third Party Payor Settlements	2,534	3,166	(632)	(20.0%)	4,789	(2,255)	(47.1%)	4,281	(1,747)	(40.8%
Other Current Liabilities	4,350	4,363	(13)	(0.3%)	2,600	1,750	67.3%	2,934	1,416	48.3
Current Portion of Long-Term Debt	537	660	(123)	(18.6%)	2,015	(1,478)	(73.3%)	2,353	(1,816)	(77.2%
Short Term Lease Obligations	0	0	0	0.0%	0	0	0.0%	0	0	0.0
Total Current Liabilities	13,694	14,519	(825)	(5.7%)	15,444	(1,750)	(11.3%)	16,363	(2,669)	(16.3%
Long-Term Debt, Net of Current Portion	25,137	25,198	(61)	(0.2%)	25,232	(95)	(0.4%)	24,771	366	1.59
Total Liabilities	38,831	39,717	(886)	(2.2%)	40,676	(1,845)	(4.5%)	41,134	(2,303)	(5.6%
Fund Balances										
Unrestricted	22,243	21,708	535	2.5%	\$18,436	\$3,807	20.6%	\$18,364	\$3,879	21.1
Temporarily Donor-Restricted	(174)	(76)	(98)	(129.1%)	(144)	(30)	(21.1%)	(144)	(\$30)	20.8
Total Fund Balances	22,069	21,632	437	2.0%	18,292	3,777	20.6%	18,220	3,849	21.1
Total Liabilities and Fund Balances	\$60,900	\$61,349	(\$449)	(0.7%)	\$58,968	\$1,932	3.3%	\$59,354	\$1,546	2.6
Days Cash on Hand	73	74	(2)	(2.5%)	70	3	3.7%	69	4	5.4
Restricted for Bond Debt Reserve	6	1,341	()	()		2	/0			
Restricted for Capital Infrastructure Reserve	15	3,139								
Total Reportable Days Cash on Hand $16$	93									



Statement Of Cash Flows

outhwest Health System Consolidat

Nov-24

	Current Month	Fiscal YTD
Cash Flows From Operating Activities		
Net Margin	\$528	\$3,871
Adjustment for Depreciation and Amortization	256	3,181
Change in Working Capital		
Short-Term Investments	(15)	(256)
Assets Whose Use Is Limited	0	0
Patient Accounts Receivable (Net)	(19)	(780)
Inventories	(22)	(109)
Other Current Assets	102	(47)
Accounts Payable	(472)	(1,823)
Accrued Expense Payable	415	1,301
Estimated Third-Party Payor Settlements	(632)	(1,747)
Other Current Liabilities	(13)	1,416
Net Cash Provided (Used) by Operating Activities	128	5,007
Changes in Noncurrent Assets and Liabilities		
Assets Whose Use is Limited or Donor-Restricted	(169)	(1,788)
Noncurrent Investments (Unrestricted)	0	0
Other Assets	(9)	(53)
Other Liabilities	0	0
Net Cash Provided by Noncurrent Operating Activities	(178)	(1,841)
Capital and Related Financing Activities		
Property, Plant & Equipment	(21)	(787)
Inter-Company	0	0
Current Portion of Long-Term Debt	(123)	(1,816)
Long-Term Debt	(61)	366
Short Term Lease Obligations	0	0
Long Term Lease Obligations	0	0
Donor Restricted Contributions Received	0	0
Other Fund Balance Changes	(91)	(22)
Net Capital & Related Financing Activities	(296)	(2,259)
Net Increase (Decrease) in Cash	(346)	907
Cash at Beginning of Period	4,865	3,612
Cash at End of Period	\$4,519	\$4,519

### Southwest Health System, Inc Schedule of Debt Payments 11/30/2024

	District						
	Sales Tax	Hosp Portion	Total Debt	Restricted for	Dis	bursement	Interest Earned
2022	MCHD	SWHS	Payment	Capital Imprvmnt			Capital Imprvmnt
Jan-22	167,985.86	134,726.31	302,712.17				
Feb-22	280,228.83	22,223.62	302,452.45				
Mar-22	139,780.84	162,935.04	302,715.58				
Apr-22	139,048.74	163,545.48	302,624.22				
May-22	173,697.25	129,012.06	302,709.11				
Jun-22	171,334.44	130,791.41	302,125.85				
Jul-22	185,064.66	117,619.79	302,684.45				
Aug-22	205,825.45	96,803.89	302,629.34				
Sep-22	195,991.81	106,516.59	302,508.40				
Oct-22	202,652.82	99,993.51	302,646.33				
Nov-22	203,107.00	95,781.49	298,888.49				
Dec-22	190,835.07	111,643.33	302,479.40				
	2,255,552.77	1,371,592.52	3,627,175.79				
	62.2%	37.8%	100%				
2023							
Jan-23	161,584.44	120,159.11	281,743.55				
Feb-23	184,839.65	117,470.50	302,310.15				
Mar-23	137,543.23	165,097.63	302,640.86				
Apr-23	137,628.31	164,960.23	302,588.54				
May-23	159,286.51	143,231.35	302,517.86				
Jun-23	164,346.28	97,069.92	261,416.20				
Jul-23	192,819.87	109,615.48	302,435.35				
Aug-23	212,821.08	165,000.00	163,672.92	214,148.16			
Transfer from Bond	Reserve *New Agre			501,560.84			
Sep-23	199,996.83	165,000.00	163,672.92	201,323.91			1,097.55
Oct-23	191,742.64	165,000.00	163,672.92	193,069.72			3,237.51
Nov-23	208,249.00	165,000.00	163,672.92	209,576.08			4,249.14
Dec-23	196,447.24	165,000.00	163,672.92	197,774.32			4,905.81
Dec-23 Int	from Bond Debt Re	S					40,661.13
YTD	2,147,305.08	1,742,604.22	2,874,017.11	1,517,453.03		-	54,151.14
2024							
Jan-24	178,384.07	165,000.00	163,672.92	179,711.15			6,273.64
Feb-24	184,406.61	165,000.00	163,672.92	185,733.69			7,224.13
Mar-24	141,586.09	165,000.00	163,672.92	142,913.17		(5,527.03)	7,404.17
Apr-24	143,071.51	165,000.00	163,672.92	144,398.59		(507,603.00)	8,965.31
May-24	168,289.71	165,000.00	163,672.92	169,616.79			8,772.22
, Jun-24	178,686.12	165,000.00	163,672.92	180,013.20		(28,613.50)	43,054.09
Jul-24	204,292.71	165,000.00	163,672.92	205,619.79		. , ,	8,601.90
Aug-24	203,478.86	165,000.00	163,672.92	204,805.94			9,831.61
Sep-24	207,268.98	165,000.00	163,672.92	208,596.06			10,472.66
Oct-24	203,966.64	165,000.00	163,672.92	205,293.72			10,928.61
Nov-24	202,684.29	165,000.00	163,672.92	204,011.37	\$	(54,420.00)	11,431.63
Dec-24	,	,	,	,	•		,
YTD	2,016,115.59	1,815,000.00	1,800,402.12	3,548,166.50		(596,163.53)	187,111.11
				Available for Capital	Impro	vements	3,139,114.08

Re-amortization of Debt occurred on Aug 17th. At this time the Debt Prin amount was decreased for the next 40 months. In addition the calculation for DCOH changed to a 3 month avearge of expenses and now includes the Bond Reserve and Restricted for Capital Improvement accounts.

Southwest Health System Operational Analysis	<b>Qtr End</b> <b>31</b> Actual 3/31/2023	<b>Qtr End</b> <b>30</b> Actual 6/30/2023		<b>Qtr End</b> <b>30</b> Actual 9/30/2023	<b>Qtr End</b> <b>31</b> Actual 12/31/2023	<b>Qtr End</b> <b>31</b> Actual 3/31/2024	<b>Qtr End</b> <b>30</b> Actual 6/30/2024	<b>Qtr End</b> <b>30</b> Actual 9/30/2024	<b>Qtr End</b> <b>31</b> Actual 10/31/2024	<b>Qtr End</b> <b>30</b> Actual 11/30/2024
Return on Assets 🧌	6.86%	<b>أ</b> 5.72%	♠	10.01%	10.11%	<b>9.95%</b>	<b>9.01%</b>	1.58%		
25th Percentile	1.15%	1.15%		1.15%	1.15%	1.15%	1.15%	1.15%		
37 1/2th Percentile	1.73%	1.73%		1.73%	1.73%	1.73%	1.73%	1.73%		
50th Percentile	2.30%	2.30%		2.30%	2.30%	2.30%	2.30%	2.30%		
75th Percentile	2.88%	2.88%		2.88%	2.88%	2.88%	2.88%	2.88%		
Acid Test Ratio Cash and Cash Equivalents	13,783,678	14,244,937		14,974,148	14,151,422	13,489,967	14,708,660	16,682,581	15,645,417	15,313,766
Accounts Receivable	6,934,439	5,509,664		5,855,165	6,199,239	7,963,525	6,576,725	7,434,147	6,960,389	6,979,087
Unrestricted Investments	1,131,110	1,180,793		1,186,233	1,303,804	1,381,570	1,424,474	1,427,067	1,536,924	1,549,966
	18,044,197	16,620,586		16,675,836	16,525,284	16,467,918	16,444,750	16,577,158	14,519,685	13,694,459
Acid Test Ratio 4 25th Percentile	<b>1.21</b> 0.33	<b>1.26</b>	T	1.32 0.33	1.31 0.33	1.39 0.33	1.38 0.33	1.54 0.33	1.66	<b>1.74</b>
37 1/2th Percentile	0.33	0.33 0.49		0.33	0.33	0.33	0.33	0.33	0.33 0.49	0.33 0.49
50th percentile	0.49	0.65		0.49	0.49	0.49	0.65	0.65	0.65	0.65
75th Percentile	0.81	0.81		0.81	0.81	0.81	0.81	0.81	0.81	0.81
Current Ratio	0.01	0.01		0.01	0.01	0.01	0.01	0.01	0.01	0.01
Total Current Assets Unrestricted Investments	23,968,195 1,131,110	22,911,541 1,180,793		23,698,427 1,186,233	23,276,391 1,303,804	24,526,181 1,381,570	24,613,214 1,424,474	27,436,295 1,427,067	25,768,114 1,536,924	25,374,649 1,549,966
Curent Liabilities	18,044,197	16,620,586		16,675,836	16,525,284	16,467,918	16,444,750	16,577,158	14,519,685	13,694,459
Current Ratio		<b>1.45</b>	21	1.49	<b>1.49</b>	<b>1.57</b>	<b>1.58</b>	1.74	≥ 1.88	1.97
25th Percentile	1.32	1.32		1.32	1.32	1.32	1.32	1.32	1.32	1.32
37 1/2th Percentile	1.97	1.97		1.97	1.97	1.97	1.97	1.97	1.97	1.97
50th percentile	2.63	2.63		2.63	2.63	2.63	2.63	2.63	2.63	2.63
75th Percentile	3.29	3.29		3.29	3.29	3.29	3.29	3.29	3.29	3.29
Days Cash on Hand										
	13,783,678	14,244,937		14,974,148	14,151,422	13,489,967	14,708,660	16,682,581	15,645,417	15,313,766
aily Cash Operating Expense (Rolling 3 mos)				196,745	212,739	205,016	206,471	212,569	213,654	215,208
aily Cash Operating Expense (Rolling 6 mos)				201,347	204,605	208,898	205,743	209,537	208,784	210,077
ily Cash Operating Expense (Rolling 12 mos)	199,000	204,143		203,701	205,737	205,123	205,240	209,217	209,233	210,854
DCOH (Unrestricted Cash)	52	53		58	17	26	31	27	23	21
OH (Self-Restricted/Restricted Investments)	18	17		30	63	57	57	70	71	71
DCOH OLD *	69	70		74	69	66	72	80	75	73
DCOH CHC **	67	70		74	69	65	71	80	75	73
DCOH NEW *** Debt Service Coverage Ratio (Rolling 12 months)				88	80	83	88	98	93	92
Total Available for Debt Service	4,158,932	4,037,100		4,608,999	6,038,633	7,001,022	6,543,169	8,351,709	8,421,641	8,498,479
Investment Value Change	45,951	24,123		-109,336	52,969	21,839	41,426	64,005	-120,673	22,135
MADS	3,629,172	3,629,172		2,626,048	2,626,048	2,626,048	2,626,048	2,626,048	2,626,048	2,626,048
Debt Service Coverage Ratio	1.15	1.11		2.35	2.30	2.67	2.49	3.18	3.21	3.24
Debt to Capitalization										
Debt to Capitalization Long Term Debt	26,075,139	25,503,776		25,289,882	24,770,872	25,145,137	25,155,497	25,165,895	25,197,942	25,258,428
	26,075,139 -1,796,952	25,503,776 -1,796,952		25,289,882 -1,796,952	24,770,872 -1,796,952	25,145,137 -1,796,952	25,155,497 -1,796,952	25,165,895 -1,796,952	25,197,942 -1,796,952	25,258,428 -1,796,952
Long Term Debt District Funded Per Agreement Long Term Debt Adjusted	-1,796,952 24,278,188	-1,796,952 23,706,825		-1,796,952 23,784,054	-1,796,952 22,973,921	-1,796,952 23,348,185	-1,796,952 23,358,545	-1,796,952 23,368,944	-1,796,952 23,400,991	-1,796,952 23,461,476
Long Term Debt District Funded Per Agreement	-1,796,952	-1,796,952		-1,796,952	-1,796,952	-1,796,952	-1,796,952	-1,796,952	-1,796,952	-1,796,952

\*DCOH OLD utilizes a rolling 12 month daily cash operating expense and does not include restricted investment but does include self restricted

\*\*DCOH CHC utilizes a rolling 6 month daily cash operating expense and does not include restricted investments \*\*\*DCOH NEW utilizes a 3 month daily cash operating expense and includes both self restricted and restricted investments.

Memo	SOUTHWEST HEALTH SYSTEM
То:	SHS Board of Directors and MCHD Board of Directors
From:	Adam Conley, CPA CFO
Subject:	December Financial Statements
Date:	December 31, 2024

The December Financial Statements were reviewed by the SHS Finance Committee on January 23, 2025. Included in the Board Book are the financial statements. The purpose of this Memo is to highlight the major items that occurred in the month of December.

## <u>Stats</u>

- December volumes were below the averages we have seen during fiscal 2024 but still a bounce back as compared to November.
- (1) Adjusted Patient Days, overall metric of hospital volume ended the year slightly behind budget but 5% above prior year. Consistent with taking care of more patients.
- Volume and Utilization page 1.
  - (2) Admissions are unfavorable as compared to both budget and prior year. See notes on Case Mix
     Related to acute admissions.
  - (3) Patient Days are unfavorable as compared to budget and prior year
    - Related to acute patient days.
    - Swing bed patient days exceed both budget and prior year
  - o (4) Births
    - 10 Births in December
      - Still exceeding prior year and budget.
  - o (5) Case mix index
    - Measure of the sickness of patients
    - Slightly behind budget flat with prior year.
- Volume and utilization page 2.
  - (6) Surgeries
    - Set a 6 month low in total and inpatient surgeries.
    - Variance has improved from a highpoint of 27% to 16% in the back half of the year
  - o (7) ER Visits
    - Unfavorable as compared to budget and prior year
    - Moving out of the busiest season. Expected lower volumes through the end of the year.
  - o (8) Clinic Visits
    - Need to combine RHC and specialty based on prior year classifications.
    - Under budget by 3.1k visits. Under prior year by 2.2k visits
      - Have been making up ground each of the last 3 months.

## **Operating Performance**

- Earnings Before Interest Depreciation and Amortization (EBIDA)
  - (9) Bottom line EBIDA is \$9.9M vs a budget of \$6.4M and prior year of \$6.1M
- Revenue
  - (10) Gross revenue unfavorable as compared to budget but favorable as compared to prior year
    - Indicative of favorable variance in adjusted patient days (as compared to prior year) and longer length of stay currently being incurred
- Deductions from Revenue

- o (11) Deductions from revenue are favorable as compared budget and to prior year
  - Had a one time pick up of \$1.1M related to Colorado Medicaid (CHASE) increasing the upper payment limit (UPL) form 97.25% to 99.5%. This payment was retroactive to State year 2022-2023 and 2023-2024. This increase is included in the 2025 budget no additional UPL adjustment expected.
    - Without the onetime item we would have had minimal Operating and Net
      - Margin in December. Significantly below budgeted figures.
- Net Patient Service Revenue
  - $\circ$  (12) Favorable as compared to both budget and prior year.
    - Expect to collect more in cash on fully adjudicated claims than budgeted or prior year 53% in December and 47% YTD
  - 53% in December and 47% YTD
    - December is increased by \$1.1M pickup. Without the pickup NPSR% would be 44%
- Expenses
  - (13) Overall operating expenses are favorable as compared to budget and flat with prior year
    - Contract labor fell back off as compared to increase in November.
    - Salaries are down related to PTO usage for the holidays.
- Income Statement (EBIDA Adj)
  - o (14) Our \$9.9M in EBITDA has to be adjusted for known expenses resulting in \$3.6M EBIDA
    - See adjustments in yellow in packet
- Balance Sheet
  - Current ration (current assets/current liabilities) = 1.98
    - Increase from prior two months is mostly related to a decrease in accounts payable and Third party settlements
  - Days cash on hand
    - Bank requires 60
    - (15) Currently at 78 with no add backs.
    - (16) 99 days total reportable Days Cash On Hand
      - Bank allows for an additional 21 days added back for bond and capital infrastructure reserve.



## Patient Volumes and Utilization Statistics

#### Southwest Health System Consolidated

Through the Period Ending Dec-24
High

HEALTH SYSTEM								niougn ine	Penou Enuir		Hiah L	_ow														
		Fi	scal-Year	-to-Date					Six-Month					С	urrent Mon	th										
	Current	Budget	# Var	% Var	Prior	% Var	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Budget	# Var	% Var P	rior Year	% Var									
2 Admissions, Total	845	1,076	(231)	(21.5%)	932	(9.3%)	93	69	73	78	62	64	99	(35)	(35.4%)	64	0.0%									
Acute	773	986	(213)	(21.6%)	861	(10.2%)	86	64	66	70	57	62	91	(29)	(31.9%)	56	10.7%									
SNF	72	90	(18)	(20.0%)	71	1.4%	7	5	7	8	5	2	8	(6)	(75.0%)	8	(75.0%)									
Discharges, Total	861	0	861	0.0%	956	(9.9%)	89	74	79	76	67	52	0	52	0.0%	81	(35.8%)									
Acute	787	0	787	0.0%	879	(10.5%)	84	66	72	69	60	51	0	51	0.0%	68	(25.0%)									
SNF	74	0	74	0.0%	77	(3.9%)	5	8	7	7	7	1	0	1	0.0%	13	(92.3%)									
3 Patient Days, Total	3,877	4,352	(475)	(10.9%)	3,971	(2.4%)	399	325	319	309	291	241	431	(190)	(44.1%)	360	(33.1%)									
Acute	2,912	3,519	(607)	(17.2%)	3,173	(8.2%)	301	232	249	234	222	203	358	(155)	(43.3%)	248	(18.1%)									
SNF	965	833	132	15.8%	798	20.9%	98	93	70	75	69	38	73	(35)	(47.9%)	112	(66.1%)									
ALOS, Total Discharges	4.50	0.00	(4.50)	0.0%	4.15	(8.4%)	4.48	4.39	4.04	4.07	4.34	4.63	0.00	(4.63)	0.0%	4.44	(4.3%)									
Acute	3.70	0.00	(3.70)	0.0%	3.61	(2.5%)	3.58	3.52	3.46	3.39	3.70	3.98	0.00	(3.98)	0.0%	3.65	(9.1%)									
SNF	13.04	0.00	(13.04)	0.0%	10.36	(25.8%)	19.60	11.63	10.00	10.71	9.86	38.00	0.00	(38.00)	0.0%	8.62	(341.1%)									
Adj Admissions	6,181	7,170	(989)	(13.8%)	6,369	(3.0%)	634	529	538	701	423	635	592	43	7.3%	421	50.9%									
Adj Discharges	6,298	0	6,298	0.0%	6,533	(3.6%)	606	568	583	683	457	516	0	516	0.0%	533	(3.1%)									
Adj Patient Days	28,359	29,000	(641)	(2.2%)	27,138	4.5%	2,719	2,493	2,353	2,778	1,987	2,392	2,576	(185)	(7.2%)	2,368	1.0%									
4 Births	144	140	4	2.9%	129	11.6%	18	13	17	18	11	10	12	(2)	(16.7%)	9	11.1%									
Observation Days	524	539	(15)	(2.8%)	471	11.3%	31	36	51	48	60	68	34	34	100.0%	40	70.0%									
5 Case Mix Index, Total	1.2162	1.2576	(0.0414)	(3.3%)	1.2165	(0.0%)	1.2783	1.2502	1.0842	1.1700	1.1108	1.1330	1.2576	(0.1246)	(9.9%)	1.2499	(9.4%)									
Case Mix Index, Medicare	1.3274	1.2017	0.1257	10.5%	1.2448	6.6%	1.2509	1.3774	1.2321	1.2883	1.4232	1.2763	1.2017	0.0746	6.2%	1.4719	(13.3%)									



#### Patient Volumes and Utilization Statistics

Southwest Health System Consolidated

Through the Period Ending Dec-24

			Fiscal-Y	ear-to-Date					Six-Mont	h Trend				С	urrent Mon	nth						
	Current	Budget	# Var	% Var	Prior	% Var	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Budget	# Var	% Var F	Prior Year	% Var					
Total O/P Registrations	61,244	0	61,244	0.0%	59,861	2.3%	5,080	5,207	5,170	5,469	4,802	5,102	0	5,102	0.0%	4,683	8.9%					
6Surgeries, Total	808	966	(158)	(16.4%)	956	(15.5%)	65	77	85	89	64	60	78	(18)	(23.1%)	66	(9.1%)					
Inpatient	181	250	(69)	(27.6%)	235	(23.0%)	21	19	19	16	10	7	23	(16)	(69.6%)	12	(41.7%)					
Outpatient	627	716	(89)	(12.4%)	721	(13.0%)	44	58	66	73	54	53	55	(2)	(3.6%)	54	(1.9%)					
Total GI Procedures	981	1,083	(102)	(9.4%)	1,057	(7.2%)	105	86	84	100	79	61	95	(34)	(35.8%)	84	(27.4%)					
7 Emergency Visits	13,529	14,218	(689)	(4.8%)	13,689	(1.2%)	1,182	1,217	1,181	1,089	1,057	1,072	1,234	(162)	(13.1%)	1,088	(1.5%)					
ER Conversion Rate	6.4%	6.0%		0.5%	6.9%	(0.5%)	7.9%	5.7%	6.2%	7.2%	5.9%	6.0%	6.0%		0.0%	5.9%	0.1%					
ER Transfers Out	651	0	651	0.0%	626	4.0%	46	41	63	52	46	43	0	43	0.0%	53	(18.9%)					
Rural Health Clinic Visits	42,381	45,071	(2,690)	(6.0%)	41,681	1.7%	3,566	3,891	3,262	3,806	3,236	3,543	3,439	104	3.0%	3,396	4.3%					
8 Provider Based or Specialty Clinic Visits	9,664	10,105	(441)	(4.4%)	12,608	(23.4%)	963	813	862	969	725	818	770	48	6.2%	846	(3.3%)					
Lab Tests	148,835	0	148,835	0.0%	143,408	3.8%	13,437	12,843	12,965	13,585	11,164	12,562	0	12,562	0.0%	10,644	18.0%					
Total Therapy Treatments	35,100	0	35,100	0.0%	33,242	5.6%	2,943	2,863	2,917	3,548	2,821	2,591	0	2,591	0.0%	2,489	4.1%					
Occupational Therapy Treatments	597	0	597	0.0%	2,286	(73.9%)	0	0	0	0	0	0	0	0	0.0%	125	(100.0%)					
Physical Therapy Treatments	28,531	0	28,531	0.0%	25,716	10.9%	2,623	2,563	2,485	2,856	2,237	2,131	0	2,131	0.0%	1,972	8.1%					
Speech Therapy Treatments	5,972	0	5,972	0.0%	5,240	14.0%	320	300	432	692	584	460	0	460	0.0%	392	17.3%					
Wound Care Procedures	1,281	1,471	(190)	(12.9%)	1,412	(9.3%)	116	75	98	80	85	91	120	(29)	(24.2%)	122	(25.4%)					
Pain Management Cases	210	244	(34)	(13.9%)	239	(12.1%)	17	20	9	16	15	16	15	1	6.7%	16	0.0%					
Sleep Studies	511	533	(22)	(4.1%)	514	(0.6%)	47	43	24	28	29	29	38	(9)	(23.7%)	29	0.0%					
Total Imaging Procedures	27,118	26,930	188	0.7%	25,998	4.3%	2,203	2,512	2,302	2,269	2,029	2,154	2,144	10	0.5%	2,070	4.1%					
CT Procedures	6,216	6,397	(181)	(2.8%)	5,991	3.8%	568	552	520	500	484	508	470	38	8.1%	440	15.5%					
MRI Procedures	1,555	1,550	5	0.3%	1,476	5.4%	139	150	131	141	99	115	130	(15)	(11.5%)	111	3.6%					
Inpatient	51	12	39	325.0%	56	(8.9%)	7	2	7	3	4	7	1	6	600.0%	2	250.0%					
Outpatient	1,504	1,538	(34)	(2.2%)	1,420	5.9%	132	148	124	138	95	108	129	(21)	(16.3%)	109	(0.9%)					
Mammography	3,985	0	3,985	0.0%	3,899	2.2%	198	372	337	262	333	364	0	364	0.0%	365	(0.3%)					
Ultrasound	4,286	0	4,286	0.0%	3,333	28.6%	427	405	354	392	267	328	0	328	0.0%	234	40.2%					
Nuclear Medicine	286	0	286	0.0%	244	17.2%	39	36	34	25	8	6	0	6	0.0%	23	(73.9%)					
Other Imaging	706	0	706	0.0%	610	15.7%	46	68	70	69	61	62	0	62	0.0%	55	12.7%					



#### **Operating Performance Summary**

Southwest Health System Consolidated

Through the Period Ending Dec-24

			Fiscal-Yea	r-to-Date					Six-Month	Trend				6	Current Montl	1	
	Actual	Budget	\$ Var	% Var	Prior	% Var	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Budget	\$ Var	% Var	Prior Year	% Var
Inpatient Revenue	\$21,497	\$23,875	(\$2,378)	(10.0%)	\$22,334	(3.7%)	\$2,080	\$1,827	\$1,766	\$1,556	\$1,735	\$1,349	\$2,340	(\$991)	(42.3%)	\$1,780	(24.2%)
Outpatient Revenue	135,746	135,221	525	0.4%	130,300	4.2%	12,092	12,187	11,259	12,430	10,110	12,041	11,649	392	3.4%	9,925	21.3%
10 Gross Patient Revenue	157,243	159,096	(1,853)	(1.2%)	152,634	3.0%	14,172	14,014	13,025	13,986	11,845	13,390	13,989	(599)	(4.3%)	11,705	14.4%
Revenue Deductions																	
Medicare	25,865	25,938	73	0.3%	25,208	(2.6%)	2,283	2,837	2,161	2,248	1,996	2,264	2,314	50	2.2%	1,450	(56.1%)
Medicaid	26,748	32,673	5,925	18.1%	31,075	13.9%	2,384	1,343	2,084	2,420	2,072	2,347	2,917	570	19.5%	2,035	(15.3%)
Prior Year Cost Report Adj-MCARE	(807)	0	807	0.0%	305	364.6%	0	40	(1)	(30)	0	0	0	0	0.0%	0	0.0%
Prior Year Cost Report Adj-MCAID	(27)	0	27	0.0%	54	150.0%	0	(18)	0	0	0	0	0	0	0.0%	0	0.0%
Other Directed Payment Programs	(14,582)	(12,026)	2,556	21.3%	(12,027)	21.2%	(1,526)	(1,521)	(1,564)	(1,068)	(1,057)	(2,152)	(1,002)	1,150	114.8%	(949)	126.8%
Managed Medicare	18,527	17,207	(1,320)	(7.7%)	16,586	(11.7%)	1,610	1,310	1,537	1,619	1,356	1,770	1,537	(233)	(15.2%)	1,045	(69.4%)
Managed Care (HMO/PPO) Discounts	10,565	8,461	(2,104)	(24.9%)	7,355	(43.6%)	965	1,202	989	559	761	886	726	(160)	(22.0%)	783	(13.2%)
Charity & Indigent care	4,872	3,533	(1,339)	(37.9%)	3,802	(28.1%)	448	502	390	536	238	399	301	(98)	(32.6%)	404	1.2%
Other Discounts	5,796	5,437	(359)	(6.6%)	5,321	(8.9%)	456	681	467	678	402	522	479	(43)	(9.0%)	341	(53.1%)
Self Pay Discounts	0	756	756	100.0%	0	0.0%	0	0	0	0	0	0	67	67	100.0%	0	0.0%
Implicit Price Concessions	6,008	4,090	(1,918)	(46.9%)	3,905	(53.9%)	671	582	565	656	444	323	366	43	11.7%	281	(14.9%)
<b>1 1</b> Total Deductions	82,965	86,069	3,104	3.6%	81,584	(1.7%)	7,291	6,958	6,628	7,618	6,212	6,359	7,705	1,346	17.5%	5,390	(18.0%)
Net Patient Revenue $12$	74,278	73,027	1,251	1.7%	71,050	4.5%	6,881	7,056	6,397	6,368	5,633	7,031	6,284	747	11.9%	6,315	11.3%
Other Revenue	7,564	6,420	1,144	17.8%	6,339	19.3%	594	724	625	638	772	581	640	(59)	(9.3%)	565	2.8%
Net Operating Revenue	81,842	79,447	2,395	3.0%	77,389	5.8%	7,475	7,780	7,022	7,006	7,069	7,612	6,924	688	9.9%	6,880	10.7%
Operating Expenses																	
Salaries	32,109	35,641	3,532	3.0%	31,309	(1.3%)	2,672	2,918	2,559	3,007	2,843	2,507	3,098	591	17.5%	2,238	1.3%
Contract Labor	6.226	3.881	(2.345)	0.0%	6.522	4.6%	548	513	640	369	460	317	325	8	0.0%	625	49.4%
Employee Benefits	7,171	6,789	(382)	(5.6%)	6,839	(4.9%)	617	636	607	660	614	607	577	(30)	(5.2%)	921	34.1%
Professional Fees	1,609	1,549	(60)	(3.9%)	1,443	(11.5%)	173	132	152	90	44	197	118	(79)	(66.9%)	148	(33.1%)
Medical Supplies	4,030	4.070	40	1.0%	3,958	(1.8%)	302	347	425	418	359	286	339	53	15.7%	390	26.7%
Pharmaceutical Supplies	9,102	8,176	(926)	(11.3%)	8,296	(9.7%)	708	809	823	798	863	883	807	(76)	(9.5%)	676	(30.7%)
Other Supplies	1,057	1,326	269	20.3%	1,126	6.1%	122	104	113	90	66	74	124	50	40.0%	79	6.3%
Purchased Services	3,857	4,056	199	4.9%	4,293	10.2%	398	283	353	320	367	378	357	(21)	(6.0%)	656	42.3%
Lease and Rent	268	330	62	18.8%	356	24.8%	18	27	24	10	9	7	31	24	75.9%	12	37.5%
Insurance	1,005	1,114	109	9.8%	1,004	(0.1%)	85	133	79	77	72	75	95	20	21.4%	86	12.4%
Utilities	996	1,243	247	19.9%	1,135	12.3%	86	124	59	66	115	94	123	29	23.1%	100	5.4%
Depreciation & Amortization	3,445	3,522	77	2.2%	4,168	17.3%	293	295	283	265	256	265	280	15	5.3%	332	20.3%
Interest	1,339	1,223	(116)	(9.5%)	1,360	1.5%	110	111	109	108	104	107	94	(13)	(13.8%)	123	12.9%
Other	7,300	7,435	135	1.8%	7,229	(1.0%)	642	476	515	628	628	688	644	(44)	(6.8%)	830	17.1%
13 Total Operating Expenses	79,514	80,355	841	1.0%	79,038	(0.6%)	6,774	6,908	6,741	6,906	6,800	6,485	7,012	527	7.5%	7,216	10.1%
Operating Margin	2,328	(908)	3,236	(356.4%)	(\$1,649)	241.2%	701	872	281	100	269	1,127	(\$88)	1,215	1,411.1%	(\$336)	434.6%
Non-Operating Revenue (Exp)																	
Investment Income	441	410	31	7.6%	21	2,000.0%	130	81	92	(54)	33	(7)	31	(38)	(122.6%)	29	(124.1%)
Other	2,383	2,147	236	11.0%	2,239	6.4%	217	219	223	257	226	160	191	(31)	(16.2%)	235	(31.9%)
Total Non-Operating Revenue (Exp)	2,824	2,557	267	10.4%	2,260	25.0%	347	300	315	203	259	153	222	(69)	(31.1%)	264	(42.0%)
Net Margin	\$5,152	\$1,649	\$3,503	212.4%	\$611	743.2%	\$1,048	\$1,172	\$596	\$303	\$528	\$1,280	\$134	\$1,146	855.2%	(\$72)	1,868.5%
9 <sub>ebida</sub>	\$9,936	\$6,394	\$3,542	55.4%	\$6,139	61.9%	\$1,451	\$1,578	\$988	\$676	\$888	\$1,652	\$508	\$1,144	225.2%	\$383	331.3%
Total Profit Margin EBIDA Margin	6.3% 12.1%	2.1% 8.0%			0.8% 7.9%		14.0% 19.4%	15.1% 20.3%	8.5% 14.1%	4.3% 9.6%	7.5% 12.6%	16.8% 21.7%	1.9% 7.3%			<mark>(1.0%)</mark> 5.6%	



#### Income Statement

Southwest Health System Consolidated

Through the Period Ending Dec-24

				Varia	ance *	Prior		Varia	ance *
Actual	%GPR	Budget	%GPR	\$	%	Year	%GPR	\$	%
\$1,349	10.1%	\$2,340	16.7%	(\$991)	(42.3%)	\$1,780	15.2%	(\$431)	(24.2%)
12,041	89.9%	11,649	83.3%	392	3.4%	9,925	84.8%	2,116	21.3%
13,390	100.0%	13,989	100.0%	(599)	(4.3%)	11,705	100.0%	1,685	14.4%
2,264	16.9%	2,314	16.5%	50	2.1%	   1,450	12.4%	(814)	(56.1%)
2,347	17.5%	2,917	20.9%	570	19.6%	2,035	17.4%	(312)	(15.3%
0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
(2,152)	-16.1%	(1,002)	-7.2%	1,150	114.8%	(949)	-8.1%	1,203	126.8%
1,770	13.2%	1,537	11.0%	(233)	(15.2%)	1,045	8.9%	(725)	(69.4%
886	6.6%	726	5.2%	(160)	(22.1%)	783	6.7%	(103)	(13.2%
399	3.0%	301	2.2%	(98)	(32.4%)	404	3.5%	5	1.3%
522	3.9%	479	3.4%	(43)	(9.0%)	341	2.9%	(181)	(53.0%
0	0.0%	67	0.5%	67	100.0%	0	0.0%	0	0.0%
323	2.4%	366	2.6%	43	11.7%	281	2.4%	(42)	(14.9%
6,359	47.5%	7,705	55.1%	1,346	17.5%	5,390	46.0%	(969)	(18.0%)
7,031	52.5%	6,284	44.9%	747	11.9%	6,315	54.0%	716	11.4%
581	4.3%	640	4.6%	(59)	(9.3%)	565	4.8%	16	2.8%
7,612	56.8%	6,924	49.5%	688	9.9%	6,880	58.8%	732	10.7%
	%NOR		%NOR				%NOR		
2,507	32.9%	3,098	44.7%	591	17.5%	2,238	32.5%	(269)	1.3%
317	4.2%	325	4.7%	8	0.0%	625	9.1%	308	49.4%
607	8.0%	577	8.3%	(30)	(5.2%)	921	13.4%	314	34.1%
197	2.6%	118	1.7%	(79)	(66.9%)	148	2.2%	(49)	(33.1%
286	3.8%	339	4.9%	53	15.7%	390	5.7%	104	26.7%
883	11.6%	807	11.7%	(76)	(9.5%)	676	9.8%	(207)	(30.7%
74	1.0%	124	1.8%	50	40.0%	79	1.1%	5	6.3%
378	5.0%	357	5.2%	(21)	(6.0%)	656	9.5%	278	42.3%
7	0.1%	31	0.4%	24	75.9%	12	0.2%	5	37.5%
75	1.0%	95	1.4%	20	21.4%	86	1.3%	11	12.4%
94	1.2%	123	1.8%	29	23.1%	100	1.5%	6	5.4%
265	3.5%	280	4.0%	15	5.3%	332	4.8%	67	20.3%
107	1.4%	94	1.4%	(13)	(13.8%)	123	1.8%	16	12.9%
688	9.0%	644	9.3%	(44)	(6.8%)	830	12.1%	142	17.1%
6,485	85.2%	7,012	101.3%	527	7.5%	7,216	104.9%	731	10.1%
1,127	14.8%	(88)	-1.3%	1,215	1,411.1%	(336)	-4.9%	1,463	434.6%
(7)	-0.1%	31	0.4%	(38)	(122.6%)		0.4%	(36)	(124.1%)
160	2.1%	191	2.8%	(30)	(122.0%)	235	3.4%	(75)	(31.9%)
153	2.1%	222	3.2%	(69)	(31.1%)	264	3.8%	(111)	(42.0%)
\$1,280	16.8%	\$134	1.9%	\$1,146	855.2%	  (\$72)	-1.0%	\$1,352	1,877.8%
\$1,652	21.7%	\$508	7.3%	\$1,144	225.2%	   \$383	5.6%	\$1,269	331.3%

Inpatient Revenue	Antical				Variar	nce *	Prior		Varia	nce *
Innotiont Devenue										
	Actual	%GPR	Budget	%GPR	\$	%	Year	%GPR	\$	%
•	\$21,497	13.7%	\$23,875	15.0%	(\$2,378)	(10.0%)	\$22,334	14.6%	(\$837)	(3.7%)
Outpatient Revenue	135,746	86.3%	135,221	85.0%	525	0.4%	130,300	85.4%	5,446	4.2%
TOTAL GROSS PATIENT REVENUE	157,243	100.0%	159,096	100.0%	(1,853)	(1.2%)	152,634	100.0%	4,609	3.0%
REVENUE DEDUCTIONS										
Medicare Contractual	25,865	16.4%	25,938	16.3%	73	3.4%	25,209	16.5%	(656)	1.8%
Medicaid Contractual	26,748	17.0%	32,673	20.5%	5,925	18.2%	31,075	20.4%	4,327	14.2%
Prior Year Medicare Cost Report Adj.	(807)	-0.5%	0	0.0%	807	0.0%	305	0.2%	1,112	364.3%
Prior Year Medicaid Cost Report Adj.	(27)	0.0%	0	0.0%	27	0.0%	54	0.0%	81	150.2%
Other Directed Payment Programs	(14,582)	-9.3%	(12,026)	-7.6%	2,556	21.3%	(12,027)	-7.9%	2,555	21.2%
Managed Medicare	18,527	11.8%	17,207	10.8%	(1,320)	(7.7%)	16,586	10.9%	(1,941)	(11.7%
Managed Care (HMO/PPO) Discounts	10,565	6.7%	8,461	5.3%	(2,104)	(24.9%)	7,355	4.8%	(3,210)	(43.6%)
Charity & Indigent Discounts	4,872	3.1%	3,533	2.2%	(1,339)	(37.9%)	3,802	2.5%	(1,070)	(28.2%)
Other Discounts	5,796	3.7%	5,437	3.4%	(359)	(6.6%)	5,321	3.5%	(475)	(8.9%)
Self Pay Discounts	0	0.0%	756	0.5%	756	100.0%	0	0.0%	0	0.0%
Implicit Price Concessions	6,008	3.8%	4,090	2.6%	(1,918)	(46.9%)	3,905	2.6%	(2,103)	(53.8%
TOTAL REVENUE DEDUCTIONS	82,965	52.8%	86,069	54.1%	3,104	3.6%	81,585	53.5%	(1,380)	(1.7%
TOTAL NET PATIENT REVENUE	74,278	47.2%	73,027	45.9%	1,251	1.7%	71,049	46.5%	3,229	4.5%
Other Revenue	7,564	4.8%	6,420	4.0%	1,144	 17.8%	6,339	4.2%	1,225	19.3%
TOTAL NET REVENUE	81,842	52.0%	79,447	49.9%	2,395	3.0%	77,388	50.7%	4,454	5.8%
			,						,	
OPERATING EXPENSE		%NOR		%NOR		I		%NOR		
Salary and Wages	32,109	39.2%	35,641	44.9%	3,532	3.0%	31,309	40.5%	(800)	(1.3%
Contract Labor	6,226	7.6%	3,881	4.9%	(2,345)	0.0%	6,522	8.4%	296	4.6%
Employee Benefits	7,171	8.8%	6,789	8.5%	(382)	(5.6%)		8.8%	(332)	(4.9%
Professional Fees	1,609	2.0%	1,549	1.9%	(60)	(3.9%)	1,443	1.9%	(166)	(11.5%
Medical Supplies	4,030	4.9%	4,070	5.1%	40	1.0%	3,958	5.1%	(72)	(1.8%
Pharmaceutical Supplies	9,102	11.1%	8,176	10.3%	(926)	(11.3%)	8,296	10.7%	(806)	(9.7%
Other Supplies	1,057	1.3%	1,326	1.7%	269	20.3%	1,126	1.5%	69	6.19
Purchased Services	3,857	4.7%	4,056	5.1%	199	4.9%	4,293	5.5%	436	10.2%
Lease and Rent	268	0.3%	330	0.4%	62	18.8%	356	0.5%	88	24.8%
Insurance	1,005	1.2%	1,114	1.4%	109	9.8%	1,004	1.3%	(1)	(0.1%
Utilities	996	1.2%	1,243	1.6%	247	19.9%	1,135	1.5%	139	12.3%
Depreciation & Amortization	3,445	4.2%	3,522	4.4%	77	2.2%	4,168	5.4%	723	17.3%
Interest	1,339	1.6%	1,223	1.5%	(116)	(9.5%)	1,360	1.8%	21	1.5%
Other Total Operating Expenses	7,300	8.9%	7,435	9.4%	135	1.8%	7,229	9.3%	(71)	(1.0%
TOTAL OPERATING EXPENSES	79,514	97.2%	80,355	101.1%	841	1.0%	79,038	102.1%	(476)	(0.6%
OPERATING MARGIN	2,328	2.8%	(908)	-1.1%	3,236	355.5%	(1,650)	-2.1%	3,978	241.2%
NON-OPERATING REVENUE (EXP)										
Investment Income	441	0.5%	410	0.5%	31	7.6%	21	0.0%	420	######
her Total Non-Operating Expenses (EXP)	2,383	2.9%	2,147	2.7%	236	11.0%	2,239	2.9%	144	6.4%
TAL NON-OPERATING REVENUE (EXP)	2,824	3.5%	2,557	3.2%	267	10.4%	2,260	2.9%	564	25.0%
NET MARGIN	\$5,152	6.3%	\$1,649	2.1%	\$3,503	212.4%	\$610	0.8%	\$4,542	744.6%
EBIDA	\$9,936	12.1%	\$6,394	8.0%	\$3,542	55.4%	\$6,138	7.9%	\$3,798	61.9%

100 (35)

0

1,490

Bond Debt Payment	
Line of Credit Payments	
Reserve for Capital Infrastructure	
Capital Purchases	
Medicare Overpayment - Repayment	
Grand Total	

(1,468)

(793)

(1,186)

3,623

14



## Balance Sheet

## Southwest Health System Consolidated

	Dec-24 Current Month	Nov-24 Previous Month	<u>Varia</u> \$	<u>nce*</u> %	Dec-23 Last Year	<u>Varia</u> \$	nce %	Dec-23 Last Year End	<u>Varia</u> \$	nce* %
ASSETS		Month	<b>\$</b>	70		<b>\$</b>	70		ې ب	70
Current Assets										
Cash and Cash Equivalents	\$5,936	\$4,519	\$1,417	31.4%	\$3,612	\$2,324	64.3%	\$3,612	\$2,324	64.3%
Short-Term Investments	10,771	10,795	(24)	(0.2%)	10,539	232	2.2%	10,539	232	2.2%
Patient Accounts Receivable, Net	7,189	6,979	210	3.0%	6,199	990	16.0%	6,199	990	16.0%
Inventories	1,597	1,546	51	3.3%	1,437	160	11.1%	1,437	160	11.1%
Other Current Assets	1,625	1,536	89	5.8%	1,489	136	9.1%	1,489	136	9.1%
Total Current Assets	27,118	25,375	1,743	6.9%	23,276	3,842	16.5%	23,276	3,842	16.5%
Assets Whose Use is Limited or Donor-Restricted Net of Amount Required for Current Liabilities	5,657	5,784	(127)	(2.2%)	3,996	1,661	41.6%	3,996	1,661	41.6%
Property, Plant, and Equipment, Net	29,306	29,496	(190)	(0.6%)	31,890	(2,584)	(8.1%)	31,890	(2,584)	<b>(8</b> .1%)
Other Assets	196	245	(49)	(20.4%)	192	4	2.0%	192	4	2.1%
Total Assets	\$62,277	\$60,900	\$1,377	2.3%	\$59,354	\$2,923	4.9%	\$59,354	\$2,923	4.9%
LIABILITIES AND FUND BALANCES Current Liabilities										
Accounts Payable	\$2,352	\$2,133	\$219	10.3%	\$3,956	(\$1,604)	(40.5%)	\$3,956	(\$1,604)	<b>(</b> 40.5%)
Accrued Expense Payable	3,526	4,140	(614)	(14.8%)	2,839	687	24.2%	2,839	687	24.2%
Estimated Third Party Payor Settlements	3,049	2,534	515	20.3%	4,281	(1,232)	(28.8%)	4,281	(1,232)	(28.8%
Other Current Liabilities	4,388	4,350	38	0.9%	2,934	1,454	49.5%	2,934	1,454	49.6%
Current Portion of Long-Term Debt	408	537	(129)	(24.1%)	2,353	(1,945)	(82.7%)	2,353	(1,945)	(82.7%
Total Current Liabilities	13,723	13,694	29	0.2%	16,363	(2,640)	(16.1%)	16,363	(2,640)	(16.1%
Long-Term Debt, Net of Current Portion	25,141	25,137	4	0.0%	24,771	370	1.5%	24,771	370	1.5%
Total Liabilities	38,864	38,831	33	0.1%	41,134	(2,270)	(5.5%)	41,134	(2,270)	(5.5%
Fund Balances										
Unrestricted	23,522	22,243	1,279	5.8%	\$18,364	\$5,158	28.1%	\$18,364	\$5,158	28.1%
Temporarily Donor-Restricted	(109)	(174)	65	37.4%	(144)	35	24.1%	(144)	\$35	(24.4%
Total Fund Balances	23,413	22,069	1,344	6.1%	18,220	5,193	28.5%	18,220	5,193	28.5%
Total Liabilities and Fund Balances	\$62,277	\$60,900	\$1,377	2.3%	\$59,354	\$2,923	4.9%	\$59,354	\$2,923	4.9%
Days Cash on Hand	78	73	6	7.8%	69	9	13.6%	69	9	13.6%
Capital Infrastructure	14	3,039								
Bond Debt Reserve	6	1,313								



Statement Of Cash Flows

outhwest Health System Consolidat

Dec-24

	Current Month	Fiscal YTD
Cash Flows From Operating Activities		
Net Margin	\$1,280	\$5,152
Adjustment for Depreciation and Amortization	265	3,445
Change in Working Capital		
Short-Term Investments	24	(232)
Assets Whose Use Is Limited	0	0
Patient Accounts Receivable (Net)	(210)	(990)
Inventories	(51)	(160)
Other Current Assets	(89)	(136)
Accounts Payable	219	(1,604)
Accrued Expense Payable	(614)	687
Estimated Third-Party Payor Settlements	515	(1,232)
Other Current Liabilities	38	1,454
Net Cash Provided (Used) by Operating Activities	1,377	6,384
Changes in Noncurrent Assets and Liabilities		
Assets Whose Use is Limited or Donor-Restricted	127	(1,661)
Noncurrent Investments (Unrestricted)	0	0
Other Assets	49	(4)
Other Liabilities	0	0
Net Cash Provided by Noncurrent Operating Activities	176	(1,665)
Capital and Related Financing Activities		
Property, Plant & Equipment	(75)	(861)
Inter-Company	0	0
Current Portion of Long-Term Debt	(129)	(1,945)
Long-Term Debt	4	370
Short Term Lease Obligations	0	0
Long Term Lease Obligations	0	0
Donor Restricted Contributions Received	0	0
Other Fund Balance Changes	64	41
Net Capital & Related Financing Activities	(136)	(2,395)
Net Increase (Decrease) in Cash	1,417	2,324
Cash at Beginning of Period	4,519	3,612
Cash at End of Period	\$5,936	\$5,936

## Southwest Health System, Inc Schedule of Debt Payments 12/31/2024

	District					
	Sales Tax	Hosp Portion	Total Debt	Restricted for	Disbursement	Interest Earned
2022	MCHD	SWHS	Payment	Capital Imprvmnt		Capital Imprvmnt
Jan-22	167,985.86	134,726.31	302,712.17			
Feb-22	280,228.83	22,223.62	302,452.45			
Mar-22	139,780.84	162,935.04	302,715.58			
Apr-22	139,048.74	163,545.48	302,624.22			
May-22	173,697.25	129,012.06	302,709.11			
Jun-22	171,334.44	130,791.41	302,125.85			
Jul-22	185,064.66	117,619.79	302,684.45			
Aug-22	205,825.45	96,803.89	302,629.34			
Sep-22	195,991.81	106,516.59	302,508.40			
Oct-22	202,652.82	99,993.51	302,646.33			
Nov-22	203,107.00	95,781.49	298,888.49			
Dec-22	190,835.07	111,643.33	302,479.40			
	2,255,552.77	1,371,592.52	3,627,175.79			
·	62.2%	37.8%	100%			
2023						
Jan-23	161,584.44	120,159.11	281,743.55			
Feb-23	184,839.65	117,470.50	302,310.15			
Mar-23	137,543.23	165,097.63	302,640.86			
Apr-23	137,628.31	164,960.23	302,588.54			
May-23	159,286.51	143,231.35	302,517.86			
Jun-23	164,346.28	97,069.92	261,416.20			
Jul-23	192,819.87	109,615.48	302,435.35			
Aug-23	212,821.08	165,000.00	163,672.92	214,148.16		
Transfer from Bond	Reserve *New Agre	eement		501,560.84		
Sep-23	199,996.83	165,000.00	163,672.92	201,323.91		1,097.55
Oct-23	191,742.64	165,000.00	163,672.92	193,069.72		3,237.51
Nov-23	208,249.00	165,000.00	163,672.92	209,576.08		4,249.14
Dec-23	196,447.24	165,000.00	163,672.92	197,774.32		4,905.81
Dec-23 Int	from Bond Debt Re	S				40,661.13
YTD	2,147,305.08	1,742,604.22	2,874,017.11	1,517,453.03	-	54,151.14
2024						
Jan-24	178,384.07	165,000.00	163,672.92	179,711.15		6,273.64
Feb-24	184,406.61	165,000.00	163,672.92	185,733.69		7,224.13
Mar-24	141,586.09	165,000.00	163,672.92	142,913.17	(5,527.03)	
Apr-24	143,071.51	165,000.00	163,672.92	144,398.59	(507,603.00)	8,965.31
May-24	168,289.71	165,000.00	163,672.92	169,616.79	( , , ,	8,772.22
Jun-24	178,686.12	165,000.00	163,672.92	180,013.20	(28,613.50)	
Jul-24	204,292.71	165,000.00	163,672.92	205,619.79	( -,,	8,601.90
Aug-24	203,478.86	165,000.00	163,672.92	204,805.94		9,831.61
Sep-24	207,268.98	165,000.00	163,672.92	208,596.06		10,472.66
Oct-24	203,966.64	165,000.00	163,672.92	205,293.72		10,928.61
Nov-24	202,684.29	165,000.00	163,672.92	204,011.37	\$ (54,420.00)	
Dec-24	194,790.61	165,000.00	163,672.92	196,117.69	(340,850.00)	44783.62
YTD	2,210,906.20	1,980,000.00	1,964,075.04	3,744,284.19	(937,013.53)	
	, ,,,,,	, ,		Available for Capital		3,039,165.39
				since of capital	1	-,,

Re-amortization of Debt occurred on Aug 17th. At this time the Debt Prin amount was decreased for the next 40 months. In addition the calculation for DCOH changed to a 3 month avearge of expenses and now includes the Bond Reserve and Restricted for Capital Improvement accounts.

Southwest Health System Operational Analysis	<b>Qtr End</b> <b>31</b> Actual 3/31/2023	<b>Qtr End</b> <b>30</b> Actual 6/30/2023		<b>Qtr End</b> <b>30</b> Actual 9/30/2023	<b>Qtr End</b> <b>31</b> Actual 12/31/2023	<b>Qtr End</b> <b>31</b> Actual 3/31/2024	<b>Qtr End</b> <b>30</b> Actual 6/30/2024	<b>Qtr End</b> <b>30</b> Actual 9/30/2024	<b>Qtr End</b> <b>31</b> Actual 12/31/2024
Return on Assets	-	<b>أ</b> 5.72%	1	10.01%	10.11%	<b>9.95%</b>	<b>9.01%</b>	1.58%	<b>8.67%</b>
25th Percentile	1.15%	1.15%		1.15%	1.15%	1.15%	1.15%	1.15%	1.15%
37 1/2th Percentile	1.73%	1.73%		1.73%	1.73%	1.73%	1.73%	1.73%	1.73%
50th Percentile	2.30%	2.30%		2.30%	2.30%	2.30%	2.30%	2.30%	2.30%
75th Percentile	2.88%	2.88%		2.88%	2.88%	2.88%	2.88%	2.88%	2.88%
Acid Test Ratio Cash and Cash Equivalents	13,783,678	14,244,937		14,974,148	14,151,422	13,489,967	14,708,660	16,682,581	16,706,845
Accounts Receivable	6,934,439	5,509,664		5,855,165	6,199,239	7,963,525	6,576,725	7,434,147	7,189,199
Unrestricted Investments	1,131,110	1,180,793		1,186,233	1,303,804	1,381,570	1,424,474	1,427,067	1,501,408
Current Liabilites	18,044,197	16,620,586		16,675,836	16,525,284	16,467,918	16,444,750	16,577,158	13,722,766
Acid Test Ratio	-	1.26	T	1.32	1.31	1.39	1.38	1.54	1.85
25th Percentile	0.33	0.33		0.33	0.33	0.33	0.33	0.33	0.33
37 1/2th Percentile	0.49	0.49		0.49	0.49	0.49	0.49	0.49	0.49
50th percentile 75th Percentile	0.65 0.81	0.65 0.81		0.65 0.81	0.65 0.81	0.65 0.81	0.65 0.81	0.65 0.81	0.65 0.81
Current Ratio	0.01	0.81		0.81	0.81	0.81	0.81	0.81	0.01
Total Current Assets	23,968,195	22,911,541		23,698,427	23,276,391	24,526,181	24,613,214	27,436,295	27,117,651
Unrestricted Investments	1,131,110	1,180,793		1,186,233	1,303,804	1,381,570	1,424,474	1,427,067	1,501,408
Curent Liabilities	18,044,197	16,620,586		16,675,836	16,525,284	16,467,918	16,444,750	16,577,158	13,722,766
Current Ratio		<b>1.45</b>	2	1.49	<b>1.49</b>	2 1.57	<b>1.58</b>	<b>1.74</b>	→ 2.09
25th Percentile	1.32	1.32		1.32	1.32	1.32	1.32	1.32	1.32
37 1/2th Percentile	1.97	1.97		1.97	1.97	1.97	1.97	1.97	1.97
50th percentile 75th Percentile	2.63 3.29	2.63 3.29		2.63 3.29	2.63 3.29	2.63 3.29	2.63 3.29	2.63 3.29	2.63 3.29
Days Cash on Hand	3.29	3.25		5.25	5.25	3.29	3.29	5.29	5.25
Total Cash and Equivalents	13,783,678	14,244,937		14,974,148	14,151,422	13,489,967	14,708,660	16,682,581	16,706,845
Daily Cash Operating Expense (Rolling 3 mos)	10,700,070	1,21,333		196,745	212,739	205,016	206,471	212,569	210,294
Daily Cash Operating Expense (Rolling 5 mos)				201,347	204,605	208,898	205,743	209,537	211,431
aily Cash Operating Expense (Rolling 12 mos)	199,000	204,143		203,701	205,737	205,123	205,240	209,217	208,603
DCOH (Unrestricted Cash)	52	53	_!!	58	17	26	31	27	28
COH (Self-Restricted/Restricted Investments)	18	17		30	63	57	57	70	72
		±,		50			57		, _
DCOH OLD *	69	70		74	69	66	72	80	80
DCOH OLD * DCOH CHC **	69 67	70 70		74 74	69 69	66 65	72 71	80 80	80 79
DCOH CHC **				74	69	65	71	80	79
DCOH CHC ** DCOH NEW ***				74	69	65	71	80	79
DCOH CHC ** DCOH NEW *** Debt Service Coverage Ratio				74	69	65	71	80	79
DCOH CHC ** DCOH NEW *** Debt Service Coverage Ratio (Rolling 12 months)	67	70		74 88	69 80	65 83	71 88	80 98	79 100
DCOH CHC ** DCOH NEW *** Debt Service Coverage Ratio (Rolling 12 months) Total Available for Debt Service Investment Value Change MADS	67 4,158,932 45,951 3,629,172	70 4,037,100 24,123 3,629,172		74 88 4,608,999 -109,336 2,626,048	69 80 6,038,633 52,969 2,626,048	65 83 7,001,022 21,839 2,626,048	71 88 6,543,169 41,426 2,626,048	80 98 8,351,709 64,005 2,626,048	79 100 9,848,471 -31,468 2,626,048
DCOH CHC ** DCOH NEW *** Debt Service Coverage Ratio (Rolling 12 months) Total Available for Debt Service Investment Value Change	67 4,158,932 45,951	70 4,037,100 24,123		74 88 4,608,999 -109,336	<i>69</i> <i>80</i> 6,038,633 52,969	65 83 7,001,022 21,839	71 88 6,543,169 41,426	80 98 8,351,709 64,005	79 100 9,848,471 -31,468
DCOH CHC ** DCOH NEW *** Debt Service Coverage Ratio (Rolling 12 months) Total Available for Debt Service Investment Value Change MADS Debt Service Coverage Ratio	67 4,158,932 45,951 3,629,172	70 4,037,100 24,123 3,629,172		74 88 4,608,999 -109,336 2,626,048	69 80 6,038,633 52,969 2,626,048	65 83 7,001,022 21,839 2,626,048	71 88 6,543,169 41,426 2,626,048	80 98 8,351,709 64,005 2,626,048	79 100 9,848,471 -31,468 2,626,048
DCOH CHC ** DCOH NEW *** Debt Service Coverage Ratio (Rolling 12 months) Total Available for Debt Service Investment Value Change MADS Debt Service Coverage Ratio Debt to Capitalization	67 4,158,932 45,951 3,629,172 1.15	70 4,037,100 24,123 3,629,172 1.11		74 88 4,608,999 -109,336 2,626,048 <b>2.35</b>	69 80 6,038,633 52,969 2,626,048 2.30	65 83 7,001,022 21,839 2,626,048 2.67	71 88 6,543,169 41,426 2,626,048 2.49	80 98 8,351,709 64,005 2,626,048 <b>3.18</b>	79 100 9,848,471 -31,468 2,626,048 3.75
DCOH CHC ** DCOH NEW *** Debt Service Coverage Ratio (Rolling 12 months) Total Available for Debt Service Investment Value Change MADS Debt Service Coverage Ratio Debt to Capitalization Long Term Debt	67 4,158,932 45,951 3,629,172 1.15 26,075,139	70 4,037,100 24,123 3,629,172 1.11 25,503,776		74 88 4,608,999 -109,336 2,626,048 <b>2.35</b> 25,289,882	69 80 6,038,633 52,969 2,626,048 2.30 24,770,872	65 83 7,001,022 21,839 2,626,048 2,67 25,145,137	71 88 6,543,169 41,426 2,626,048 2,49 25,155,497	80 98 8,351,709 64,005 2,626,048 <b>3.18</b> 25,165,895	79 100 9,848,471 -31,468 2,626,048 3.75 25,140,805
DCOH CHC ** DCOH NEW *** Debt Service Coverage Ratio (Rolling 12 months) Total Available for Debt Service Investment Value Change MADS Debt Service Coverage Ratio Debt to Capitalization Long Term Debt District Funded Per Agreement	67 4,158,932 45,951 3,629,172 1.15 26,075,139 -1,796,952	70 4,037,100 24,123 3,629,172 1.11 25,503,776 -1,796,952		74 88 4,608,999 -109,336 2,626,048 2.35 25,289,882 -1,796,952	69 80 6,038,633 52,969 2,626,048 <b>2.30</b> 24,770,872 -1,796,952	65 83 7,001,022 21,839 2,626,048 2.67 25,145,137 -1,796,952	71 88 6,543,169 41,426 2,626,048 2.49 25,155,497 -1,796,952	80 98 8,351,709 64,005 2,626,048 <b>3.18</b> 25,165,895 -1,796,952	79 100 9,848,471 -31,468 2,626,048 <b>3.75</b> 25,140,805 -1,796,952
DCOH CHC ** DCOH NEW *** Debt Service Coverage Ratio (Rolling 12 months) Total Available for Debt Service Investment Value Change MADS Debt Service Coverage Ratio Debt to Capitalization Long Term Debt	67 4,158,932 45,951 3,629,172 1.15 26,075,139	70 4,037,100 24,123 3,629,172 1.11 25,503,776		74 88 4,608,999 -109,336 2,626,048 <b>2.35</b> 25,289,882	69 80 6,038,633 52,969 2,626,048 2.30 24,770,872	65 83 7,001,022 21,839 2,626,048 2,67 25,145,137	71 88 6,543,169 41,426 2,626,048 2,49 25,155,497	80 98 8,351,709 64,005 2,626,048 <b>3.18</b> 25,165,895	79 100 9,848,471 -31,468 2,626,048 3.75 25,140,805

\*DCOH OLD utilizes a rolling 12 month daily cash operating expense and does not include restricted investment but does include self restricted

\*\*DCOH CHC utilizies a rolling 6 month daily cash operating expense and does not include restricted investments \*\*\*OCOH NEW utilizes a 3 month daily cash operating expense and includes both self restricted and restricted investments.

# **MCHD Finance Report**



**Mission Statement** 

# **General Ledger Detail**

# Montezuma County Hospital District

# For the period January 1, 2025 to January 31, 2025

DATE		DESCRIPTION	REFERENCE	DEBIT	CREDIT	RUNNING BALANCE	RELATED ACCOUNT
100 - Busine	ess Checking - 71	89					
Opening Balan	ce			1,647,187.53	-	1,647,187.53	
Jan 6, 2025	Payable Payment	Payment: Colorado Title and Closing Services	3005	-	198,198.92	1,448,988.61	200 - Accounts Payable
Jan 9, 2025	Receive Money	Southwest Health	System	4,630.00	-	1,453,618.61	403 - Lease Income
Jan 16, 2025	Payable Payment	Payment: Southwest Health System	3006	-	7,287.50	1,446,331.11	200 - Accounts Payable
Jan 16, 2025	Payable Payment	Payment: Mazzetti, Inc.	3007	-	9,247.50	1,437,083.61	200 - Accounts Payable
Jan 17, 2025	Spend Money	Vectra Bank		-	3.00	1,437,080.61	630 - Other Fees/Bank Fees
Jan 17, 2025	Receive Money	NOW Account Inte	rest	2,883.80	-	1,439,964.41	470 - Interest Income
Jan 24, 2025	Payable Payment	Payment: Walston Bookkeeping	Dec 13 invoice	-	937.50	1,439,026.91	200 - Accounts Payable
Jan 30, 2025	Receive Money	Southwest Health	System	4,630.00	-	1,443,656.91	403 - Lease Income
Jan 31, 2025	Spend Money	Vectra Bank		_	3.00	1,443,653.91	630 - Other Fees/Bank Fees
Jan 31, 2025	Receive Money	NOW Account Inte	rest	1,280.91	-	1,444,934.82	470 - Interest Income
Total 100 - Bus	iness Checking - 718	9		13,424.71	215,677.42	1,444,934.82	
Net movement	t .			-	202,252.71	-	
Closing Balanc	e			1,444,934.82	-	1,444,934.82	
102 - MCHD	Health Facilities	Checking - 897					
Opening Balan		0		301,765.61	-	301,765.61	
Jan 9, 2025	Receive Money	State of Colorado		158,746.87	-	460,512.48	406 - Sales Tax.
Jan 13, 2025	Receive Money	CO DOR Sales Tax		1,064.84	-	461,577.32	406 - Sales Tax.
Jan 13, 2025	Receive Money	CO DOR Sales Tax		15,797.66	-	477,374.98	406 - Sales Tax.
Jan 16, 2025	Payable Payment	Payment: Southwest Health System	1101	-	181,478.36	295,896.62	200 - Accounts Payable
Jan 17, 2025	Spend Money	Vectra Bank		-	3.00	295,893.62	630 - Other Fees/Bank Fees
Jan 31, 2025	Spend Money	Vectra Bank		-	3.00	295,890.62	630 - Other Fees/Bank Fees
Total 102 - MCI	HD Health Facilities C	hecking - 897		175,609.37	181,484.36	295,890.62	
Net movement				-	5,874.99	-	
Closing Balanc	e			295,890.62	-	295,890.62	
103 - Public	Funds Savings						
Opening Balan				1,930.14	-	1,930.14	

DATE	SOURCE	DESCRIPTION	REFERENCE	DEBIT	CREDIT	RUNNING BALANCE	RELATED ACCOUNT
Jan 8, 2025	Receive Money	Vectra Bank		3.00		1,933.14	630 - Other Fees/Bank Fees
Jan 31, 2025	Receive Money	Savings Interest		0.02	-	1,933.16	470 - Interest Income
Total 103 - Pub	lic Funds Savings			3.02	-	1,933.16	
Net movement	:			3.02	-	-	
Closing Balanc	e			1,933.16	-	1,933.16	
Total				189,037.10	397,161.78	(208,124.68)	



## Renewal Documents and Invoice 1/1/2025 to EOD 12/31/2025

Acceptance of this coverage is evidenced only by payment of the enclosed invoice by January 1, 2025.

The following renewal documents are attached where applicable:

- 1. Invoice: Payment is due by January 1, 2025. Please return a copy of the invoice with your payment to ensure it is applied correctly. We have attached Payment Instructions providing details on how to make payment and when cancellation could occur.
- 2. Comparison of Annual Contributions.
- 3. Deductible Options:
  - Provides the difference in cost by coverage line if you were to increase or decrease the deductible for that specific coverage.
- 4. Quote for Excess Liability limits for your consideration:
  - Limits of up to \$8 million, in excess of the primary \$2 million Liability limit, are available. Although the primary \$2 million Liability limit is sufficient to cover the CGIA tort cap, we do recommend you consider purchasing higher limits primarily due to special districts' unlimited liability to federal civil rights, discrimination, harassment, whistle blowing, and other employment-related practices claims.
- 5. Coverage Declaration Pages: Informational page summarizing the key points about the coverage provided including limits and deductible descriptions for all coverage provided. Full coverage forms will be available at <u>csdpool.org/documents</u> by January 1, 2025.
- 6. Schedules: Lists of exposures and values.
- 7. Certificates of coverage: Originals are mailed directly to each Certificate Holder when applicable.
- 8. Automobile identification cards: Hard copies will be mailed when applicable.



# **Property and Liability Coverage**

## Invoice

Named Member:	Broker of Record:
Montezuma County Hospital District	NO BROKER
PO Box 1034	
Cortez, CO 81321	

Coverage No.	Entity ID	Effective Date	Expiration Date	Invoice Date
25PL-22023-3238	22023	1/1/2025	EOD 12/31/2025	1/31/2025

erage	Contribution
General Liability	\$732.00
Property	\$4,284.00
Non-Owned Auto Liability	\$132.00
Hired Auto Physical Damage	\$65.00
Equipment Breakdown	\$329.00
No-Fault Water Intrusion & Sewer Backup	\$39.00
Public Officials Liability	\$487.00
Pollution	\$0.00

Total Contribution	\$6,068.00
Estimated Annualized Contribution (for budgeting purposes only)	\$6,068.00

Please note: where included above, Hired Auto Physical Damage and Non-Owned Auto Liability are mandatory coverages and may not be removed. No-Fault Water Intrusion & Sewer Backup coverage may only be removed with completion of the No-Fault Opt Out Endorsement.

The following discounts are applied (Not applicable to minimum contributions):

15.02% Continuity Credit Discount 10% Direct Discount

Payment Due by January 1, 2025

Payment evidences "acceptance" of this coverage. The terms of the Intergovernmental Agreement (IGA) require timely payment to prevent automatic cancellation of coverage. Please return this invoice and reference the coverage number on your check to help us apply your payment correctly. Only prior notice to the board of directors of the Colorado Special Districts Property and Liability Pool and subsequent approval may extend cancellation provision.

Remit checks to: Colorado Special Districts Property and Liability Pool PO Box 1539 Portland, OR 97207-1539

We accept online payments at E-Bill Express c/o McGriff, A Marsh & McClennan Agency, LLC Company Refer to Payment Instructions page for additional options billing@csdpool.org 800-318-8870 ext. 3



## **Payment Instructions**

We accept the following payment methods:

- 1. Online using **E-Bill Express** (<u>www.e-billexpress.com/ebpp/CSDPool</u>). An FAQ is available at the bottom of the landing page. For detailed instructions, please click <u>here</u>.
- 2. Mail your check to:

Colorado Special Districts Property and Liability Pool c/o McGriff, A Marsh & McClennan Agency, LLC Company PO Box 1539 Portland, OR 97207

For express or overnight mail services, please use the address below:

Colorado Special Districts Property and Liability Pool c/o McGriff, A Marsh & McClennan Agency, LLC Company 5400 Meadows Road, Suite 240 Lake Oswego, OR 97035

## To ensure your payment is accurately applied, always include a copy of the invoice.

3. Wire or ACH transfer from your own bank account. Let us know if you wish to use this method and we will be happy to provide you with these instructions.

In accordance with the Intergovernmental Agreement (IGA), you have sixty (60) days after the due date shown on the invoice to make your contribution payment. If you fail to make payment, automatic cancellation of coverage will occur on the 61<sup>st</sup> day. If you wish to reinstate your district's coverage after cancellation has occurred, a \$100 reinstatement fee will apply.

If your district requires a payment extension, please submit a written request within ten (10) business days from the date of the invoice, for consideration by the CSD Pool Board of Directors.

Finally, all members of the Pool must be members in good standing with the Special District Association of Colorado (SDA). Please visit the SDA website at sdaco.org for member information.

Please contact us at <u>billing@csdpool.org</u> or 800-318-8870 ext. 3 for billing questions.



Loss Ratio

0.00%

Colorado Special Districts Property and Liability Pool

Annual Comparison of 2025 and 2024 contributions.

Loss Ratios based on participation years from 2017 to 2024

			Montezuma County H			
			Year	Contribution		
			2025	\$6,068.00		
			2024	\$5,823.00		
			Difference	\$245.00		
			% Difference	4.21%		
General Liab	ility (	Contribution	TOE	Equipment Breakdown	Contribution	
Yr. 2	2025	\$732.00	\$159,114.00	Yr. 2025	\$329.00	
Yr. 2	2024	\$704.00	\$159,114.00	Yr. 2024	\$321.00	
Differe	ence	\$28.00	NaN	Difference	\$8.00	_
% Differe	ence	3.98%	0.00%	% Difference	2.49%	
Loss F	tatio	0.00%		Loss Ratio	0.00%	_
Auto Liab	ilitv (	Contribution	Auto Count	Crime	Contribution	
Yr. 2	-	\$132.00	0	Yr. 2025	\$0.00	
Yr. 2		\$132.00	0	Yr. 2024	\$0.00	
Differe	ence		0	Difference	\$0.00	
% Differe	ence	NaN	0.00%	% Difference	0.00%	
Loss F	latio	0.00%		Loss Ratio	0.00%	
Auto Physical Dam	age (	Contribution	TIV	Public Officials Liability	Contribution	EE Cour
Yr. 2	-	\$65.00	\$0.00	Yr. 2025	\$487.00	
Yr. 2	2024	\$65.00	\$0.00	Yr. 2024	\$487.00	
Differe			\$0.00	Difference	\$0.00	
% Differe	ence	NaN	0.00%	% Difference	0.00%	0.00
Loss F	tatio	0.00%		Loss Ratio	0.00%	
Property/Inland Ma	rino (	Contribution	TIV	Excess Liability	Contribution	
Yr. 2		\$4,284.00	\$1,724,223.00	Yr. 2025	\$0.00	
	2024	\$4,077.00	\$1,715,645.00	Yr. 2024	\$0.00 \$0.00	
Differe		\$207.00	\$8,578.00			
% Differe			\$8,578.00 0.50%	Difference	\$0.00	
		5.08%	0.50%	% Difference	0.00%	
Loss F		138.87%		Loss Ratio	0.00%	=
Farthquako	Contri	hution	Flood	Contribution	No Fault	Contributi
Earthquake	Contri	<b>bution</b>	Flood	Contribution	No Fault	
Yr. 2025	Contri	\$0.00	Yr. 2025	\$0.00	Yr. 2025	Contributio \$39. \$37
-	Contri					

Loss Ratio

0.00%

Loss Ratio

0.00%



# **Deductible Options**

## Montezuma County Hospital District

Based on Coverage 25PL-22023-3238 data as of 1/31/2025

Auto Liability	General Liabi	ity
	\$0.00	\$732.00
	\$500.00	\$571.00
	\$1,000.00	\$546.00
	\$2,500.00	\$546.00
	\$5,000.00	\$546.00
	\$7,500.00	\$546.00
	\$10,000.00	\$546.00
Auto Physical Damage	Property	
nprehensive and Collision Deductibles	Property and Inland Marine Deduc	tibles (IM Max
	Both \$250.00	\$5,000.00
	Both \$500.00	\$4,284.00
	Both \$1,000.00	\$4,216.00
	Both \$2,500.00	\$4,158.00
	Both \$5,000.00	\$4,115.00
	Property \$7,500.00	\$4,072.00
	Property \$10,000.00	\$4,019.00
	Property \$25,000.00	\$3,834.00
	Property \$50,000.00	\$3,647.00
	Property \$100,000.00	\$3,429.00
	\$5,000)	

Public Officials Liability				
EPLI \$100,000 &:				
POL \$1,000.00	\$487.00			
POL \$2,500.00	\$487.00			
POL \$5,000.00	\$487.00			
POL \$7,500.00	\$487.00			
POL \$10,000.00	\$487.00			
POL \$1,000 &:				
EPLI \$5,000.00	\$487.00			
EPLI \$7,500.00	\$487.00			
EPLI \$10,000.00	\$487.00			
EPLI \$25,000.00	\$487.00			
EPLI \$50,000.00	\$487.00			
EPLI \$100,000.00	\$487.00			

No-	Fault
\$500.00	\$39.00
\$1,000.00	\$35.00
\$2,500.00	\$35.00
\$5,000.00	\$35.00
\$7,500.00	\$35.00

Equipment Breakdown				
\$1,000.00	\$329.00			
\$2,500.00	\$322.00			
\$5,000.00	\$293.00			
\$7,500.00	\$286.00			
\$10,000.00	\$276.00			



## **2025 Excess Liability Options Proposal**

## This Proposal Does Not Bind Coverage

This report demonstrates what it would cost your district to increase coverage from your current limit of liability to a higher limit.

Named Member: Montezuma County Hospital District

•

Excess Limit	Annual Excess Contribution	Change in Contribution
\$1,000,000	\$330	\$330
\$2,000,000	\$570	\$570
\$3,000,000	\$810	\$810
\$4,000,000	\$1,020	\$1,020
\$5,000,000	\$1,250	\$1,250
\$6,000,000	\$1,500	\$1,500
\$7,000,000	\$1,750	\$1,750
\$8,000,000	\$2,000	\$2,000

Note: This is not your Coverage Document. It was created solely for informational purposes. 1/31/2025

# Colorado Special Districts Property and Liability Pool

## Public Entity Liability and Auto Physical Damage Certificate Holder Declaration

Master Coverage Document Number: CSD Pool CT C 01 01 25 and CSD Pool PEL 01 01 25  $\,$ 

Certificate Number: 25PL-22023-3238 Named Member: Montezuma County Hospital District PO Box 1034 Cortez, CO 81321 Coverage Period: 1/1/2025 to EOD 12/31/2025 Broker of Record: NO BROKER

Coverage is provided only for those coverages indicated below for which a contribution is shown.

Coverage	Per Occurrence Limit	Annual Aggregate Limit	Deductible	Contribution
Public Entity Liability Coverage including:	\$2,000,000	None		
General Liability	Included	None	None	\$732
Medical Payments - Premises	\$10,000	None	None	Included
Employee Benefits Liability	Included	None	None	Included
Public Officials Liability	Included	None	\$1,000	\$487
Employment Practices Liability	Included	None	*\$\$100,000	Included
Pre Loss Legal Assistance	\$5,000	\$10,000	None	Included
No-Fault Water Intrusion & Sewer Backup	\$200,000 limited to \$10,000 Any One Premises	***\$1,000,000	\$0	\$39
Cyber	\$200,000	**\$200,000	\$1,000	Included
Fiduciary Liability	\$200,000	**\$200,000	\$1,000	Included
Excess Liability - Coverage agreements A,B,C,D	No Coverage	No Coverage	N/A	No
Auto Liability	No Coverage	No Coverage	N/A	No
Medical Payments – Auto	No Coverage	No Coverage	N/A	No
Non-Owned and Hired Auto Liability	Included	None	None	\$132
Uninsured/Underinsured Motorists Liability	No Coverage	No Coverage	N/A	No
Auto Physical Damage	No Coverage	No Coverage	N/A	No
Hired Auto Physical Damage	\$50,000	N/A	\$500/\$500	\$65
Auto Physical Damage – Employee Deductible Reimbursement	\$2,500	N/A	None	Included

Total Contribution \$1,455

\*Employment Practices Liability Deductible: 50% of loss including Indemnity and Legal Expenses subject to a maximum deductible of \$\$100,000 each occurrence.

\*\*A \$5,000,000 All Member Annual Aggregate Limit shall apply to Cyber.

\*\*A \$1,000,000 All Member Annual Aggregate Limit shall apply to Fiduciary Liability.

\*\*\*No-Fault Water Intrusion & Sewer Backup has \$1,000,000 All Member Annual Aggregate Limit.

Additional Endorsements applicable to Member:

This Certificate Holder Declaration is made and is mutually accepted by the CSD Pool and the Named Member subject to all terms which are made a part of the Public Entity Liability Coverage Document. This Certificate represents only a brief summary of coverages. Please refer to the Master Coverage Document for actual coverage, terms, conditions, and exclusions.

Countersigned by:

Authorized Representative



## **Property Certificate Holder Declaration**

Master Coverage Document Number: CSD Pool CTC 01 01 25 and CSD Pool Property 01 01 25 Certificate Number: 25PL-22023-3238 Coverage Period: 1/1/2025 to EOD 12/31/2025

#### Named Member:

**Broker of Record:** NO BROKER

Montezuma County Hospital District PO Box 1034 Cortez, CO 81321

### Limit of Coverage per Occurrence:

\$1,724,223 Reported Buildings, Business Personal Property, Other Scheduled Items, Outdoor Property and EDP per Schedule.

- \$250,000 Business Income including Extra Expense/Rental Income sublimit unless a higher amount is specified on Schedule. \$ Inland Marine Scheduled items.
  - \$0 Excess of \$2,000,000 Earthquake Limit per occurrence and annual aggregate per Property Schedule.
  - 50 Excess of \$2,000,000 Flood Limit per occurrence and annual aggregate per Property Schedule. Flood Zone A and Flood Zone V are subject to an all member combined limit of \$60,000,000 per occurrence and annual aggregate.

#### Locations Per Schedules on file. Property in Course of Construction must be shown on the Schedule to be covered. Covered:

- Report of Annual Statement of Values must be submitted and additions/deletions are to be reported as they Values: occur.
- Risk of Direct Physical Loss subject to the terms, conditions, and exclusions in the Master Property **Perils Covered:** Coverage Document.
- **Deductibles:** \$500 Per Occurrence, except where noted on Member's Schedules

\$5,000 minimum and \$50,000 maximum.

Earthquake - 2% Per Occurrence of the value of the covered damaged property at the time of loss, subject to a \$5,000 minimum and \$50,000 maximum. Flood - 2% Per Occurrence of the value of the covered damaged property at the time of loss, subject to a

**Contribution:** \$4,284

## Additional Endorsements applicable to Member:

**Cosmetic Damage Exclusion** Wind and Hail Deductible Endorsement

This Certificate Holder Declaration is made and is mutually accepted by the CSD Pool and the Named Member subject to all terms which are made a part of the Property Coverage Document. This Certificate represents only a brief summary of coverages. Please refer to the Master Coverage Document for actual coverage, terms, conditions, and exclusions.

hay h h d oge uthorized Representative

Countersigned by:



Named Member:	Endorsement:	
Montezuma County Hospital District	CSD Pool Wind Hail Deductible 01 01 23	
Certificate Number:	Effective Date of Endorsement:	
25PL-22023-3238	1/1/2025	
Issued By:	•	
Colorado Special Districts Property and Liability Pool		

This endorsement modifies coverage provided under the following:

#### **PROPERTY COVERAGE DOCUMENT**

## WIND AND HAIL DEDUCTIBLE

### PLEASE READ IT CAREFULLY

The following is added to Section 2. DEDUCTIBLE:

E. Wind and/or Hail damage to a building or structure identified in the **Member District** property schedule as **Real Property** or **Outdoor Property**:

In respect to Member District's whose total scheduled property values are below \$25M, 2% per **Occurrence** of the value of the covered damaged property and applicable business income at the time the loss occurs, subject to a \$5,000 minimum and \$50,000 maximum per **Occurrence**, unless a higher deductible is scheduled at the damaged location.

In respect to Member District's whose total scheduled property values are over \$25M, 2% per **Occurrence** of the value of the covered damaged property and applicable business income at the time the loss occurs, subject to a \$5,000 minimum and \$75,000 maximum per **Occurrence**, unless a higher deductible is scheduled at the damaged location.

## ALL OTHER TERMS AND CONDITIONS OF THE PROPERTY COVERAGE FORM REMAIN UNCHANGED.



Named Member:	Endorsement:
	CSD Pool Cosmetic Damage Exclusion 01 01 25
Montezuma County Hospital District	
Certificate Number:	Effective Date of Endorsement:
25PL-22023-3238	1/1/2025
Issued By:	

Colorado Special Districts Property and Liability Pool

This endorsement modifies the coverage provided under the following:

## PROPERTY COVERAGE DOCUMENT

## COSMETIC DAMAGE EXCLUSION

## PLEASE READ IT CAREFULLY

The following is added to Section 8 PERILS EXCLUDED:

V. Against Cosmetic Damage to Roof Surfacing caused by or resulting from wind and/or hail to a building or structure identified in the Member District property schedule as Real Property or Outdoor Property.

For purposes of this endorsement, the following is added to SECTION 35 ADDITIONAL DEFINITIONS:

**Roof Surfacing** means the shingles, tiles, cladding, metal or synthetic sheeting or similar materials covering the roof and includes all materials used in securing the roof surface and all materials applied to or under the roof surface for moisture protection, as well as roof flashing, vent covers and gutters.

**Cosmetic Damage** means that the wind and/or hail caused marring, pitting or other superficial damage that altered the appearance of the roof surfacing, but such damage does not prevent the roof from continuing to function as a barrier to entrance of the elements to the same extent as it did before the cosmetic damage occurred.

However, this exclusion shall not apply to **Cosmetic Damage** to the front entry, areas of **Roof Surfacing** visibly apparent to a pedestrian from the street or sidewalk composing less than 25% of the roof area of a **Member District's** scheduled building or structure identified as **Real Property** or **Outdoor Property**. The **Pool** will pay for **Cosmetic Damage** to such areas, limited to less than 25% of the roof area of the scheduled building or structure, subject to all other terms, conditions and exclusions of the Property Coverage Form.

## ALL OTHER TERMS AND CONDITIONS OF THE PROPERTY COVERAGE FORM REMAIN UNCHANGED.



## **Equipment Breakdown Declarations**

#### Master Coverage Document Number: CSD Pool EB 01 01 21 Certificate Number: 25PL-22023-3238

**Coverage Period:** 1/1/2025 to EOD 12/31/2025

#### Named Member:

PO Box 1034 Cortez, CO 81321 Broker of Record: NO BROKER

# Covered Equipment:

Montezuma County Hospital District

Equipment that (1) generates, transmits or utilizes energy, including electronic communications and data processing equipment; or (2) which during normal usage, operates under vacuum or pressure, other than the weight of its contents.

#### Locations:

Property must be at a location described in the Named Member's current Schedule of Property on file with the CSD Pool and must be owned, leased, or operated under the control of the Member District.

Equipment Breakdown Limit: \$1,724,223 Scheduled Property

#### Sub Limits:

Newly Acquired Locations (90 Days Reporting)	\$2,500,000
Business Income / Extra Expense	\$1,000,000
Expediting Expenses	\$1,000,000
Rental Income	\$1,000,000
Demolition & Increased Cost of Construction	\$1,000,000
Off-Premises Equipment Breakdown	\$500,000
Service Interruption	\$250,000
Hazardous Substances	\$250,000
Perishable Goods	\$250,000
Data Restoration	\$250,000
Green Property Upgrade	\$100,000
Public Relations Coverage	\$5,000

**Deductible:** \$1,000 per Occurrence

Contribution: \$329

This Equipment Breakdown Declarations is made and is mutually accepted by the CSD Pool and the Member District subject to all terms which are made a part of the Equipment Breakdown Coverage Document. This Certificate represents only a brief summary of coverages. Please refer to the Equipment Breakdown Coverage Document for actual coverage, terms, conditions, and exclusions.

Countersigned by:

Authorized Representative



## **Environmental Legal Liability Certificate Holder Declaration**

Master Policy Number: ER00A9V25 Certificate Number: 25PL-22023-3238 Named Member: Montezuma County Hospital District PO Box 1034 Cortez, CO 81321 Insurer: Aspen Specialty Insurance Company Coverage Period: 1/1/2025 to EOD 12/31/2025 Broker of Record: NO BROKER

### Claims-Made Coverage:

- First Party Protection: For coverages 1.a 1.d, the pollution incident must be first discovered by the responsible insured and reported to the insurer during the policy period.
  - a. **Clean up**: Covers clean-up costs resulting from a pollution incident on, at, under, or migrating from or through an insured location.
  - b. Emergency Response: Covers emergency response cost resulting from a Pollution Incident.
  - c. **Pollution Incident**: (i) on, at, under or migrating from or through an insured location; (ii) caused by transportation; or (iii) caused by covered operations.
  - d. Environmental Crisis: Covers crisis cost resulting from a crisis event.
  - e. **Business Interruption**: Covers business interruption cost and extra expense incurred by the insured and solely and directly by a pollution incident on, at or under an insured location, provided the pollution incident results in clean-up cost covered by this policy.
- Legal Liability Protection: For coverages 2.a 2.d, the claim for damages because of such bodily injury or property damage, or a claim for such clean-up cost, is first made against an insured and reported to the insurer during the policy period.
  - a. Insured Location: Covers sums the insured becomes legally obligated to pay:
    (i) as damages because of bodily injury or property damage; or (ii) for cleanup costs, resulting from a pollution incident on, at under, or migrating from or through an insured location.
  - b. Non-owned Site: Covers sums the insured becomes legally obligated to pay (i) as damages because of bodily injury or property damage; or (ii) for clean- up costs, resulting from a pollution incident on, at under, or migrating from or through any non-owned site.
  - c. **Transportation**: Covers sums the insured becomes legally obligated to pay (i) as damages because of bodily injury or property damage; or (ii) for clean- up costs, resulting from a pollution incident caused by transportation.
  - d. **Covered Operations**: Covers sums the insured becomes legally obligated to pay (i) as damages because of bodily injury or property damage; or (ii) for clean-up costs, resulting from a pollution incident caused by covered operations or completed operations.

Limits of Liability:	<ul> <li>\$1,000,000 Each Pollution Incident</li> <li>\$5,000,000 Total Policy and Program Aggregate – Shared All Members</li> <li>Sublimits: \$500,000 Environmental Crisis Aggregate</li> <li>\$250,000 Business Interruption Aggregate</li> <li>\$100,000 Perfluorinated Compounds Aggregate</li> </ul>
Member Deductible:	\$1,000 Each Pollution Incident
Retroactive Date:	January 1, 2009 (unless otherwise specified)

#### **Defense Costs:** Legal defense expenses and settlement shall erode the Limits of Liability

## Partial List of Exclusions:

Asbestos, Contractual Liability, Criminal Fines and Criminal Penalties, Cross Liability (Insured vs. Insured), Damage to Insured's Product/Work, Divested Property, Employers Liability, Fraud or Misrepresentation, Intentional Non-Compliance, Internal Expenses, Known Conditions, Lead-Based Paint, Material Change in Risk, Non-Owned Disposal Sites, Underground Storage Tanks and Above Ground Storage Tanks excluded unless scheduled, Vehicle Damage, War or Terrorism, Workers Compensation, Lead at all gun or shooting ranges, Maintenance, Upgrades, Improvements or Installations where required by law, Microbial Matter with carveback for sudden and accidental water intrusion; 10-day discovery period/30 day reporting period, Prior Claims, Communicable Disease

#### **Policy Forms:**

ASPENV110 06 17	Environmental Legal Liability Policy
ASPENV098 11 17	Cap on Losses from Certified Acts of Terrorism
ASPENV340 05 17	Insured Location(s) Schedule Endorsement
ASPENV310 05 17	Known Conditions Exclusion Endorsement
ASPENV316 05 17	Legal Expense Aggregate Limit of Liability Endorsement
ASPENV117 11 17	Self-Insured Retention Aggregate (Erosion by Underlying Policies)
ASPENV117 11 17	Sewage Back-up Deductible Amendatory Endorsement
ASPENV117 11 17	Perfluorinated Compounds, Sublimit and Retroactive Date Amendatory Endorsement
ASPENV117 11 17	Cancellation Amendatory Endorsement
ASPENV117 11 17	Microbial Matter Exclusion Endorsement
ASPENV117 11 17	Maintenance, Upgrade, Improvements or Installations Exclusion Endorsement
ASPENV117 11 17	Retroactive Date All Coverage Endorsement
ASPENV117 11 17	Microbial Matter Sudden and Accidental Coverage Limitation Amendatory Endorsement
ASPENV117 11 17	Insured Location/Acquired Property Endorsement
ASPENV117 11 17	Public Entity Amendatory Endorsement
ASPENV322 05 17	Minimum Earned Premium Endorsement
ASPENV341 05 17	Named Insured Schedule Endorsement
ASPENV118 11 17	Nuclear, Biological, Chemical, or Radiological Terrorism Exclusion
ASPENV003 05 17	Other Insurance Condition Amendatory Endorsement
ASPER334 01 14	Prior Claim Exclusion Endorsement
ASPENV338 04 19	Schedule of Crisis Management Firms Endorsement
ASPENV431 11 17	Aspen Environmental Emergency Response Hotline
SNCO 1021	Colorado Surplus Lines Notice
ASPENV117.EL.0920.X	Communicable Disease Exclusion

#### Additional Endorsements Applicable to Named Member:

This Certificate Holder Declaration is made and is mutually accepted by the CSD Pool and the Named Member subject to all coverage terms under the Pollution Liability Policy #EV00A9V25 issued by Aspen Specialty Insurance Company. This Certificate represents a brief summary of coverages. Please refer to the Master Coverage Document for all coverage terms, conditions and exclusions.

Countersigned by: fresh & Willoge

Authorized Representative



## Terrorism, Sabotage and Malicious Attack Certificate Holder Declaration

Master Coverage: Physical Loss or Physical Damage Terrorism Liability Malicious Attack Malicious Attack combined liability	<b>Insurer:</b> Lloyds, Hiscox Syn	dicate 33
Certificate Number: 25PL-22023-3238	Coverage Period:	1/1/2025 to EOD 12/31/2025
Named Member:	Broker of Record:	
Montezuma County Hospital District	NO BROKER	
PO Box 1034		
Cortez, CO 81321		

Coverage for All CSD Pool Members combined	Per Occurrence Limit	Annual Aggregate Limit	Deductible
All Coverages Combined	n/a	\$105,000,000	n/a
Terrorism and Sabotage – Physical Loss or Damage	\$100,000,000	\$100,000,000	\$10,000
Terrorism – Combined Liability	\$10,000,000	\$10,000,000	\$10,000
Malicious Attack – Physical Loss or Damage & Combined Liability	\$5,000,000	\$5,000,000	\$5,000
Malicious Attack Sub-limits applicable:			
Prevention or Restriction of Access	\$2,500,000	\$2,500,000	\$5,000
Utilities	\$2,500,000	\$2,500,000	\$5,000
Personal Accident Costs	\$250,000	\$250,000	\$5,000
Crisis Management Costs	\$250,000	\$250,000	\$5,000

Report all Claims to: Phone: (800) 318-8870, ext. 1 Email: claims@csdpool.org

This Certificate Holder Declaration is made and is mutually accepted by the CSD Pool and the Named Member subject to all terms which are made a part of the Terrorism, Sabotage and Malicious Attack Coverage Policy. This Certificate represents only a brief summary of coverages. Please refer to the Master Coverage document for actual coverage, terms, conditions, and exclusions.

Countersigned by: August & Willoge \_\_\_\_\_

Authorized Representative



## General Liability Schedule Hospital / Health District

Policy Number: Named Member: 25PL-22023-3238 Montezuma County Hospital District Coverage Period: Broker: 1/1/2025 – EOD 12/31/2025 NO BROKER

Code	Description	Unit	Amount	Effective Date	Expiration Dat
4	4-Maximum Bond Issued	Dollars	0.00	1/1/2025	12/31/2025
5	5-Number of Bonds Issued	Total	0.00	1/1/2025	12/31/2025
98	98-Additional First Named Members	Total	0.00	1/1/2025	12/31/2025
105	105-Total Operating Expenses - Any other	Dollars	110,913.00	1/1/2025	12/31/2025
134	134-Total Operating Expenses - Hospital / Health	Dollars	48,201.00	1/1/2025	12/31/2025
215	215-Buildings & Premises Occupied by District	Sq. Ft.		1/1/2025	12/31/2025
270	270-Number of Aboveground Storage Tanks (excluding water tanks)	Total	0.00	1/1/2025	12/31/2025
341	341-Time Spent by Club/Recreation/Camp Volunteers	Hours	0.00	1/1/2025	12/31/2025
342	342-Time Spent by Day Care Volunteers	Hours	0.00	1/1/2025	12/31/2025
343	343-Time Spent by Hospital Volunteers	Hours	0.00	1/1/2025	12/31/2025
344	344-Time Spent by Event Organizer Volunteers	Hours	0.00	1/1/2025	12/31/2025
345	345-Time Spent by General Volunteers	Hours	0.00	1/1/2025	12/31/2025
348	348-Number of Board Members	Total	7.00	1/1/2025	12/31/2025
350	350-Number of Permanent Employees - Full-Time	Total	0.00	1/1/2025	12/31/2025
351	351-Number of Permanent Employees - Part-Time	Total	0.00	1/1/2025	12/31/2025
366	366-Total Payroll	Dollars		1/1/2025	12/31/2025
420	420-Vacant Land	Acres		1/1/2025	12/31/2025
602	602-Area Served (Square Miles)	Sq Miles		1/1/2025	12/31/2025
900	900-Services Contracted out to Others	Dollars	62,712.00	1/1/2025	12/31/2025

997	997-Number of district sponsored Events/Fundraisers - No Alcohol Served	Total	1/1/2025	12/31/2025
998	998-Number of District sponsored Events/Fundraisers – With Alcohol Served	Total	1/1/2025	12/31/2025
999	999-Prior Acts Coverage Under a Previous "Claims Made" Policy	Premium	1/1/2025	12/31/2025
999	999-Prior Acts Coverage Under a Previous "Claims Made" Policy	Premium	1/1/2025	12/31/2

If your district has exposures not listed on the General Liability schedule above, such as airplanes, security staff, bridges, drones, etc., please furnish details. Certain activities may be excluded or restricted.



**Property Schedule** 

### Coverage Period: 1/1/2025-EOD 12/31/2025

Named Member:

<u>Broker</u>: NO BROKER

Montezuma County Hospital District

Per Occurrence Deductible: \$500.00

Location/Premise Address / Description	Construction Class	Prot.	Valuation	Values	Property	Quake	Flood
		Class			Contrib.	Contrib.	Contrib.

Location / Premise#	Unique#	PROP- 00000164	Frame	6	Replace	ement	Buildings:	\$1,133,134.00	\$2,955	\$ \$
Medical/Dental Clinic	Year Built:	1965	Term:	1/1/2025 to 12/31/2025		Contents:	\$ 0.00			
111 Railroad Avenue	Sq. Feet:	4692	County:	Monte zuma	Ded:		EDP: Business Inc:	\$ 0.00 \$ 0.00		
Mancos, CO 81328	# Stories	1.00	Flood Zone:	Zone X			UG Pipes:	\$ 0.00		
NOC Equipment Breakdown Applies: No	Excess Qu No	ake Applies:	Excess Flood Applies: No				Otherwise Classified:	\$ 0.00		

Location / Premise# 002-001	Unique#	PROP- 00104961	Frame	4	Replacement	Buildings:	\$591,089.00	\$1,329	\$ \$
Heyl Clinic	Year Built:	1990	Term:	1/1/2025	to 12/31/2025	Contents:	\$ 0.00		
1413 N. Mildred Rd.	Sq. Feet:	3492	County:	Monte zuma	Ded:	EDP: Business Inc:	\$ 0.00 \$ 0.00		
Cortez, CO 81321	# Stories	1.00	Flood Zone:	Zone X		UG Pipes:	\$ 0.00		
NOC Equipment Breakdown Applies: No	Excess Qu No	ake Applies:	Excess Flood Applies: No			Otherwise Classified:	\$ 0.00		

Totals:	Buildings:	\$1,724,223.00	\$4,284.00	\$0.00	\$0.00
	Contents:	\$0.00			
	EDP:	\$0.00			
	Business Inc:	\$0.00			
	UG Pipes:	\$0.00			
	Otherwise Classified:	\$0.00			

Minimum Property Contribution: \$425



**Property Schedule** 

## **Coverage Period**: 1/1/2025-EOD 12/31/2025

Named Member:

Montezuma County Hospital District

<u>Broker</u>: NO BROKER

Per Occurrence Deductible: \$500.00

Location/Premise Address / Description	Construction Class	Prot.	Valuation	Values	Property	Quake	Flood
		Class			Contrib.	Contrib.	Contrib.



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# **CERTIFICATE OF COVERAGE**

Certificate Number CERT-011625

Colorado Special Districts Property and Liability Pool c/o McGriff, A Marsh & McClennan Agency, LLC Company PO Box 1539 Portland, OR 97207-1539	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.			
NAMED MEMBER Montezuma County Hospital District	COMPANIES AFFORDING COVERAGE			
P.O. Box 1034	COMPANY A: Colorado Special Districts Property and Liability Pool			
Cortez, CO 81321	COMPANY B:			
	COMPANY C:			

## COVERAGES

THIS IS TO CERTIFY THAT COVERAGE DOCUMENTS LISTED HEREIN HAVE BEEN ISSUED TO THE NAMED MEMBER HEREIN FOR THE COVERAGE PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE COVERAGE AFFORDED BY THE COVERAGE DOCUMENTS LISTED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH COVERAGE DOCUMENTS.

CO LTR	Type of Coverage	Coverage #	Effective Date	Expiration Date	LIMITS		
	General Liability	25PL-22023- 3238	01/01/25	12/31/25	General Aggregate	Unlimited	
А	<ul> <li>☑ Commercial General Liability</li> <li>☑ Public Officials Liability</li> <li>☑ Employment Practices</li> <li>☑ Occurrence</li> </ul>	*Except that for claims, occurrences or suits to which the monetary limits of the Colorado Immunity Act, C.R.S. & 24-10-101, et.seq., as amended, apply, there shall be a further sublimit of (a) \$387,000 for an injury to any one person in any single occurrence; and (b) \$1,093,000 for an injury to two or more persons in any single occurrence; but in the event of an injury to two or more persons in any single occurrence, the sublimit shall not exceed \$387,000 for each injured person.			Each Occurrence*	\$2,000,000	
	Automobile Liability Scheduled Autos Hired Autos Non-Owned Autos				Each Occurrence*		
	Auto Physical Damage						
	Excess Liability				General Aggregate Each Occurrence*		
	Property					L	
Description: Evidence of coverage only.							

CERTIFICATE HOLDER	CANCELLATION
To Whom It May Concern	SHOULD ANY OF THE ABOVE DESCRIBED COVERAGES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE COVERAGE FORM PROVISIONS.
	AUTHORIZED REPRESENTATIVE: June 2007 By: Joseph E. DePaepe Date: January 31, 2025



**Mission Statement** 

# **Foundation Report**



**Mission Statement** 



**Mission Statement** 



# **Attorney Report**

**Mission Statement**