

March 15, 2024

**MINERS' COLFAX MEDICAL CENTER  
MEETING OF THE BOARD OF TRUSTEES**

**Call to Order**

Chairman Shawn Jeffrey called the meeting of the Miners' Colfax Medical Center Board of Trustees to order on March 15, 2024, at 1:00 p.m. The meeting was held in person at the Miners Colfax Medical Center Acute Conference Room at 203 Hospital Dr., Raton, NM, with the option of virtually attending via Facebook.

**Members:** Shawn Jeffrey, Chairman  
Loretta Conder, MD, Vice Chairman  
Roy Fernandez, Secretary/Treasurer  
Jolene "Jo" Greene, Member (via phone)

A roll call vote was taken to acknowledge all Board Members present.

**Staff:** Bo Beames, CEO  
Lonny Medina, CFO  
Victor Cruz, MD, CMO  
Jayna Saiz, Recorder

**Pledge of Allegiance & State Flag Pledge**

Chairman Shawn Jeffrey, led Board Members, staff, and visitors present in reciting the Pledge of Allegiance and the State of New Mexico Pledge.

**Correction/Approval of Agenda**

The Board Members reviewed the Agenda for March 15, 2024.

*Motion:* Loretta Conder, MD, made a motion to approve the agenda as presented. With a second from, Roy Fernandez, a roll call was taken, and the motion carried.

**Correction/Approval of Minutes**

Minutes from the BOT Meeting on February 16, 2024, were read and approved with the correction added just after "A quorum of three members present was declared." A roll call vote was taken.

*Motion:* Roy Fernandez, made a motion to approve the minutes, with a second from Loretta Conder, MD a roll call was taken, and the motion carried.

**Recognition of Visitors**

**Visitors:** Barbara Duran, HR Manager, Rhonda Moniot, CNO, Elizabeth Newman, MD, Rae Hager, Quality Manager, Steve Kelley, LTC Administrator, Meghan Herman, RN, Bruce Swanson, CRNA

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### **Recognition of Cares Champion**

Jennifer Espinoza has been employed with MCMC for 22 1/2 years. She started as a Ward Clerk on Med/Surge while attending college.

MCMC CEO Bo Beames presented the "C.A.R.E.S. Champion" certificate to Jennifer Espinoza during the MCMC monthly Board of Trustees meeting on Friday, March 15, 2024, after an introduction by Barbara Duran, HR Manager. She will also receive a \$100.00 gift card from the MCMC Auxiliary.

Mrs. Duran, presented Jennifer to the Board of Trustees. In 2002 Jennifer obtained her LPN certification and continued working on Med/Surge. Jennifer didn't stop there she continued on until she received her RN Licensure in 2006.

Jennifer transferred to the Surgery Department in 2014 and continues to work in this department.

### **Executive Session**

Chairman Shawn Jeffrey, announced that the Board of Trustees will go into Executive Session for the purpose of limited personnel matters pursuant to Section 10-15-1 (H) of the Open Meetings Act. This is a closed session for matters pertaining to Medical Staff Credentialing.

*Motion:* At 1:09 pm Mr. Roy Fernandez made a motion to go into Executive Session for the purpose of limited personnel matters pursuant to Section 10-15-1 (H) of the Open Meetings Act. With a second from Loretta Conder, MD, a roll call was taken, and the motion carried.

*The Board of Trustees returned to regular open session at 1:20 pm.*

It is affirmed that the matters discussed in the closed session were limited to those matters stated in the previous motion. (10-15-1(J)).

### **Medical Staff Privileges and Appointments**

Victor Cruz, MD, Chief Medical Officer, informed the Board that one (1) provider is recommended by the Credentials Committee for re-appointment in March: Kenneth Lee, CST, Certified Surgical Technologist.

Victor Cruz, MD, Chief Medical Officer, informed the Board that six (6) providers were recommended by the Credentials Committee for appointment in March: Sheila Eshraghi, MD, TeleNeurology, Stephen Johnston, MD, TeleRadiology, Nicholas Lambert, MD, TeleRadiology, Michael Rolan, MD, TeleRadiology, Morgan Shier, MD, FP/OB, and David Fairbanks, MD, Emergency Medicine and Family Medicine,.

*Motion:* Loretta Conder, MD made a motion to accept the Credentials Committee's recommendations as presented. With a second from Roy Fernandez, a roll call was taken, and the motion carried.

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### **\*Medical Staff Report**

Dr. Cruz shared that today he would like to forgo the Medical Staff Report as his presentation to the Board is what he would like to discuss today.

### **Policies**

Roles and Responsibilities of the Board of Trustees was presented to the Board of Trustees for final review, approval, and signature by CEO Bo Beames. Dr. Conder had some concerns with the wording and ambiguity of wording in some paragraphs delegating responsibility. It was decided to rework and reword those areas of the document and bring it back to the next meeting for the final review.

CEO Job Description was presented to the Board for informational purposes. This document had been approved and filed on 3/18/22 by William Jarrell, Chairman of the Board of Trustees. The Board reviewed the CEO Job Description, they discussed it briefly and thanked CEO Beames, for the information.

### **Presentations:**

#### **Strategic Initiative-Medical Staff**

Dr. Victor Cruz, MD, CMO provided an overview of his educational background, focusing on quality, safety, efficiency, and regulatory readiness and compliance.

- **CERNER OPTIMIZATION:**  
Efforts are being made to optimize CERNER through Clinical Documentation Improvement (CDI) and Care Practice Monitoring & Improvement initiatives.
- **Improve Care Via PPEC (Professional Practice Evaluation Committee):**  
The PPEC, facilitated by Peer Review and feedback mechanisms, is dedicated to the continuous improvement of care. Quality and/or patient safety concerns are referred to the Medical Executive Committee (MEC). Additionally, opportunities for more focused education are being identified.
- **Design, Develop, and Implement Utilization Review Process:**  
Key considerations include the effectiveness and efficiency of the utilization review process, its alignment with medical necessity and best determination of appropriate level of care, and ensuring justifiability and reimbursement.
- **Establish Transitional Care Program & Processes:**

A Transitional Care Program is being established, focusing on selected inpatient discharges. The program aims to identify complex patients to prevent their return to hospital care. Key components include conducting discharge phone calls within 48 hours to identify any concerns and ensure continuity of treatment changes. Additionally, clinic follow-up within 7 to 14 days is being organized based on patient complexity.

#### **MCMC UTILIZATION REVIEW (UR) TEAM:**

- **Purpose:**  
*The purpose of the assessment is to evaluate the medical necessity and duration of hospital stays, considering the diagnosis and treatment plans. This assessment aims to decrease clinical denials and enhance payer reimbursement while ensuring patients are allocated to the appropriate level of care as per payer expectations.*
- **Care Management MCMC- Crystal Armstrong:**  
*Crystal Armstrong oversees various tasks including reviewing records before admission, conducting patient rounds, obtaining insurance authorization, reviewing charts with MCG software support, conducting monthly random chart reviews, and appealing denials. Additionally, physicians perform secondary reviews to ensure a comprehensive evaluation.*
- **(MCG) Milliman Care Guidelines:**  
*The MCG software aids in determining appropriate diagnosis-related group (DRG) assignments and provides guidelines for patient management. It assists in placing patients in a suitable level of care, which could range from outpatient to skilled nursing facilities (SNF), based on predefined criteria. The guidelines cover the length of stay, discharge readiness, and criteria for extended stays.*
- **Conclusion:**  
*Utilization review ensures the delivery of safe, high-quality, and efficient patient care that is justifiable and reimbursable. It also ensures compliance with regulatory standards, although the process is resource-intensive and requires effective teamwork to achieve desired outcomes.*

#### **Financial Health Report**

The Board of Trustees was presented with an update from Lonny Medina, CFO of Financial Health. The following updates were given as follows:

- CERNER/ Revenue Cycle Optimization
- Multi-view Implementation (Budgeting and Financial Reporting Module)
- Clifton Larson Allen (CLA) Recommendations
- Capital Equipment and Projects
- Revenue Expense Plan

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\$50,972 in cash  
.5 days of cash on hand  
Net patient revenue \$17,017,839. previous year \$15,559,686.  
Total gross revenue \$40,357,537.  
Actual cash received from patient services Y.T.D. \$19,073,663.  
Surgical Cases this month Y.T.D. 163  
LTC admissions this month Y.T.D. 6  
Observations this month Y.T.D. 184  
Clinic admissions this month Y.T.D. 8,239  
ER admissions this month Y.T.D. 3,508  
MCMC Land Grant Permanent Fund Balance \$180,569,881

### **Administrator's Report**

Mr. Beames, CEO provided the following update to the Board as follows:

#### **Governance**

- MCMC continues to have an open Board seat for a former miner
- NMHA is offering a Board Education session at "The Blake" at Taos Ski Area as part of its annual NMHA Strategic Planning Event

#### **Medical Staff**

- MCMC has active searches underway for Family Practice (or Internal Medicine) and for Family Practice Nurse Practitioner/Physician Assistant. MCMC has a recruitment agreement in place with Delta Recruiting based in Dallas, TX. Donna White, Certified Nurse Practitioner will be on-site to interview on March 27

#### **Workforce Development /Human Resources**

- Current RN Agency Staffing stands at 12RN (4 ER, 2 Med-Surg & 4 OB, 0 OR and 2 LTC which is the same as the month prior. Current Radiology Tech Agency Staffing stands at 4(same), Laboratory at 3(+1) and Respiratory at 1 (same)
- Ray Luna, PharmD has been hired as the new MCMC Pharmacy Director. His first day was Tuesday, February 27, 2024.

#### **Quality & Patient Safety**

- MCMC Quality and Clinical Staff participated in the required training sessions for the State Medicaid Program VBP (Value Based Purchasing) payment model which provided more detail on the SBIRT Model being implemented for New Mexico Frontier Hospitals (the category that MCMC falls into).
- MCMC Quality Director, Rae Hager, RN led the first meeting of the MCMC Quality Committee which was held on Thursday, February. Topics covered included the updates

and edits to the MCMC Quality Plan, Quality Charter, and schedule for department manager presentations and education.

- The Medical Staff PPEC committee continues to meet monthly to conduct case reviews. Currently, the committee is working to define prioritization criteria and refine case review processes

#### **Facilities, Equipment & Construction**

- Automatic Transfer switches for the MCMC acute care generators are in the process of being repaired/upgraded with a cost of approximately \$28,000.
- The electrical breaker system for the ACF continues to malfunction and is recommended for repair/replacement at an approximate cost of \$55,000.
- Updated cost estimates for the refurbishment of the LTC elevator system are in the process of being requested.
- Quotes and estimates for a new LTC Transportation Van are being requested from vendors on the State approved list
- The HVAC replacement project is on track and vendor Western Mechanical is expecting delivery of the new unit in late March or early April
- Emergency Room parking barrier utilizing a combination of concrete bumpers and landscaping boulders in being researched in effort to create a protective barrier to the ER waiting room

#### **MCMC Long-Term Care**

- Current Census at LTC is 19 Miners and 4 Non-Miners for a total census of 23 with an additional 2 residents out on pass.

#### **Outreach & Community**

- The Black Lung Mobile staff members are meeting weekly to continue to work on planning and preparation for the DOL mobile exams/clinic that are required to be conducted over the course of the current & future grant year. A “mock” mobile DOL exam is planned for mid-April and early May of 2024
- CEO Beames and Administrative Assistant Saiz made a presentation to the local Rotary Club on March 5<sup>th</sup> at K-Bob’s restaurant. A variety of topics were covered including the history of MCMC, services offered, governance, and strategic planning. Recent events and the success of the most recent legislative session were shared as well.

#### **Emergency Preparedness**

- The MCMC Emergency Preparedness Plan has been updated and reviewed by the Senior Leadership Team to ensure key contact information is up to date.
- Emergency Preparedness Tabletop Drill is being planned tentatively for June/July of 2024.
- Emergency Preparedness Actual Drill is being planned tentatively for Thursday, September 12, 2024.

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### Key Dates

- MCMC Board Meeting, Friday, April 19, 2024
- ( A date for the May Board of Trustees meeting has not been decided)
- The June 21, 2024, Board of Trustees meeting will be held at LTC, with resident BBQ.

### Executive Session

Chairman Shawn Jeffrey, announced that the Board of Trustees will go into Executive Session for the purpose of limited personnel matters pursuant to for the purpose of limited personnel matters pursuant to Section 10-15-1 (H) (2) of the Open Meetings Act. Section 10-15-1 (H) (7) meetings subject to the attorney-client privilege pertaining to threatened or pending litigation in which the public body is or may become a participant;- So the Board can be informed of any pending litigation

Section 10-15-1 (H) (9) those portions of meetings of committees or boards of public hospitals where strategic and long-range business plans or trade secrets are discussed; and- For any strategic planning items we need to discuss. Section 10-15-1 (H) of the Open Meetings Act. This is a closed session for matters pertaining to a Risk Management, Personnel, and Strategic Planning.

*Motion:* At 3:23 pm Mr. Roy Fernandez made a motion to go into Executive Session for the purpose of limited personnel matters pursuant to Section 10-15-1 (H) of the Open Meetings Act. Section 10-15-1 (H) (7) meetings subject to the attorney-client privilege pertaining to threatened or pending litigation in which the public body is or may become a participant;- So the Board can be informed of any pending litigation. Section 10-15-1 (H) (9) those portions of meetings of committees or boards of public hospitals where strategic and long-range business plans or trade secrets are discussed; and- For any strategic planning items we need to discuss. Section 10-15-1 (H) of the Open Meetings Act. This is a closed session for matters pertaining to Risk Management, Personnel, and Strategic Planning.

With a second from Loretta Conder, MD, a roll call was taken, and the motion carried.

### Open Session/Announcements

Chairman Shawn Jeffrey, announced that the Board of Trustees will come out of Executive Session for the purpose of coming back to open session pursuant to Section 10-15-1 (I) of the Open Meetings Act. This was a closed session for matters pertaining to the sections mentioned in the previous motion to enter a closed session.

*Motion:* At 6:35 pm Mr. Roy Fernandez made a motion to come out of the Executive Session for the purpose of coming back to open session pursuant to Section 10-15-1 (I) of the Open Meetings Act; With a second from Loretta Conder, MD, a roll call was taken, and the motion carried.

*It is affirmed that the matters discussed in the closed session were limited to those matters stated in the previous motion. (10-15-1(J)).*

*The Board of Trustees returned to regular open session at 6:35 pm.*

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**Adjournment**

With no further business and no action taken, a motion was made by Roy Fernandez, with a second from Loretta Conder, MD, to adjourn the Board of Trustees Regular Meeting. The motion carried, and the Board of Trustees Regular Meeting adjourned at 6:35 pm.

**Attest:**

SK 3/15/24  
Shawn Jeffrey, Chair

Roy Fernandez  
Roy Fernandez, Secretary/Treasurer

3-19-24  
Date

4-19-24  
Date