



## Administrator's Report January 25, 2022

**General Hospital District Information Update:** I will be attending the AHA's Rural Health Care Leadership Conference in Phoenix in February. This event brings together rural health leaders from across the country to share strategies and resources for accelerating the shift to a more integrated and sustainable rural health system.

### COVID -19 State and Local Update:

#### Vaccine Mandates:

- The U.S. Supreme Court on January 13, 2022, allowed the Centers for Medicare and Medicaid Services (CMS) vaccine mandate to go into effect nationwide, while blocking the Occupational Safety and Health Administration's (OSHA) vaccine requirements for businesses with 100 or more employees. The American Hospital Association (AHA) has consistently urged all health care workers to be vaccinated and supports hospitals that require them for their workforce, to better protect them, their patients and the communities they care for. However we all also recognize that a vaccine requirement will create critical workforce staffing issues, at a time when our workforce is already exhausted by the many demands of COVID-19.
- If a healthcare facility is not 100% compliant with the mandate, CMS will consider them in violation of their Conditions of Participation and will withhold all Medicare and Medicaid funding as a penalty. This will force healthcare facilities to close altogether, creating a significant barrier to accessing healthcare, and putting the health and wellbeing of especially our rural communities a great risk.
- GCHD does have 6 employees who are unvaccinated and of those 5 have had COVID-19 and are recovered. This mandate requires these employees, to receive their initial vaccination by Friday, January 28, 2022 or be terminated. There is the option of filing a request for exemption, however this must be approved by our review committee. A meeting is scheduled for tomorrow with our employees to discuss our next steps and develop a strategy to address this potential loss of our valued staff members.

#### OMICRON:

- Omicron remains the dominant variant and has been reported in all 50 states.
- The clinical severity profile of Omicron appears to be less virulent than the Delta variant, however is more contagious, spreading across communities much faster than Delta.
- Current vaccines are highly effective at preventing severe illness, hospitalizations, and deaths due to infection with the Omicron variant. However, breakthrough infections in people who are fully vaccinated are now widespread.

#### CDC Recommendations:

- On Friday January 7, 2022 CDC adjusted their recommendation for when people can receive any mRNA booster shot, shortening the interval from 6 months to 5 months.

#### Treatments:

- HHS announced yesterday that the only post exposure monoclonal antibody brand currently authorized for use is Sotrovimab. GCHD has 6 doses on hand and supplies are extremely limited throughout the country. The REGEN-COV that we also have in stock, is being held since recent data has not shown it to be ineffective against Omicron.
- Evushield, the only pre-exposure prophylaxis is expected to be effective against Omicron, however it is only intended for the highest risk immunocompromised patients at high risk for severe disease and is in limited supply.

- Molnupiravir and Paxlovid are the newly authorized oral antivirals shown to be effective against COVID-19 and DPHHS is working with Federal Retail Pharmacy Programs to distribute these across the state. They will be available by prescription only.

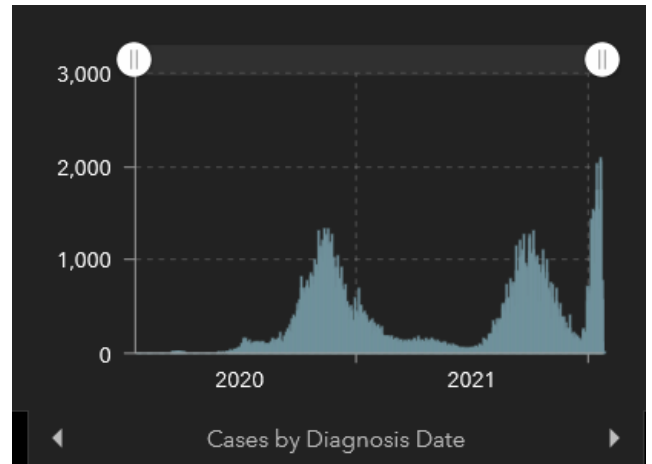
As of this morning, Granite County has **29** active case and a total of 6 deaths since the start of the pandemic.

There were **5,057** new confirmed cases in Montana yesterday.

According to the Montana Response map:

- 227,094 Total cases from Montana(Dec=196,044)
- 114,602 Active cases in Montana (Dec=1,775)
- 292 Active Hospitalizations (Dec=112)
- 2,985 Deaths (Dec=2,899)

You can see from these numbers how fast it is spreading and thankfully the hospitalization and death rate is not rising as dramatically.



According to the Montana Response map:

Granite County now has **39%** of its eligible population fully vaccinated and **54%** of Montanans are fully vaccinated. These percentages have increased by 1% each from last month.

#### Activities /Life Enrichment:

- December kept our patients busy with planning Christmas parties and celebrating. Beginning the month of December there was a decorating party. While they decorated, they ate homemade cookies and drank cocoa. Then they spent the next few days decorating every open space they could find.
- They participated in the Festival of Trees with a wreath this year. It had dried fruit of cranberries, oranges, lemons, apples and rosehips on it with three strings of lights. Our decorators were so very proud of it.
- Our patients participated in the Yule Night Parade this year. They look forward to doing this. Our van is completely full of patients and at the end they drove around town looking at decorations and lights that were on the houses.
- We had two Christmas Parties. The first one was for staff to give our patients gifts. Our staff are wonderfully generous. They draw Patient names and take the time to select the perfect gift for each person. The second party was for Santa gifts. Santa always brings each person something wonderful.
- For Christmas Dinner, a Prime Rib was served and or the New Year's party the request was simply Cookies and Milk.
- Now that the holidays are done, the conversation is shifting to spring and summer travels.

#### Business Department/ Revenue Cycle Team:

- Effective Jan. 1, 2022, our RHC Montana Medicaid per visit rate will increase 2.1% based on the Medicare Economic Index as established by CMS. The rate is calculated based on the cost of services divided by the number of visits. The new rate will be \$315.82 per visit.
- The Montana Medicaid LTC daily rate has also been adjusted effective January 1, 2022. The daily rate is now \$211.62 and is based on the statewide average Medicaid nursing facility per diem rates for calendar year 2021. The previous rate was \$207.36.

Central Supply: No Report

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**Clinics:** Edward Amberg, PA-C, will be assuming additional responsibilities to coordinate, ensure and oversee patient care, optimize workflow between departments, monitor programs to identify unmet needs, develop new programs, revenue streams and long range plans to meet those needs.

Dietary: No Report  
Grants: No Report  
Emergency Preparedness: No Report  
Environmental Services: No Report

**Human Resources:** Our open positions include; Director of Nursing, Night Shift Charge Nurse, CNAs, per diem Housekeeping and Maintenance and a full time cook

IT: No Report  
Laboratory: No Report  
Maintenance / Transportation: No Report  
Marketing: No Report

**Medical Staff:**

- New Credentials: None
- Temporary Privileges: Jessica Martin, FNP and Lynn Graham, PA-C
- Re-credentialed Providers: None
- Resignations: None

**Nursing:**

- **Montana Health Network**, one of our staffing companies has issued us a 2% credit based on our 2021 utilization of their service. We appreciate their partnership and are grateful for the credit issued in the amount of \$2,675.51
- **Utilization Review** – attached
- **December Patient Census**
  - ER Visits = 16
  - Intermediate Swing Bed (LTC) = 21
  - Swing Bed billable days = 18 (3)
  - Acute billable days = 12 (5)
  - Observation Days = 1
  - Outpatient Nurse Visit = 0
  - Adult Day Care Visits = 0
  - Deaths = 1

**Physical Therapy:**

December had a total: 94 Visits  
Outpatient: 74  
Acute Inpatient: 3  
Swing Bed: 10  
LTC: 7

**Radiology:**

- We completed 4 CT Scans in December.
- The X Ray Equipment has been installed, but we are still waiting on last minute construction items to be completed, which includes the lead glass for the control room, finish work in the main hallway and the removal of a couple lingering gas lines in the floor.

Respectfully submitted,  
Maria Stoppler CEO/DON

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