

**BEAUFORT MEMORIAL HOSPITAL BOARD OF TRUSTEES
BOARD MEETING– OPEN SESSION**

MINUTES – March 26, 2025

BY ZOOM: Vernita Dore, Allison Coppage, Shawna Doran, Ashley Hildreth, Chris Ketchie, Lynsey Rini

PRESENT: Bill Himmelsbach (chair), Tommy Harmon, Eric Billig, MD, Jane Kokinakis, DO, Richardson LaBruce, Carolyn Banner, PhD., William Jessee, MD, Alice Howard, Anna Tabernik, Doug Folzenlogen, MD, Russell Baxley, Kurt Gambla, D.O., Karen Carroll, Ken Miller, Dee Robinson, Courtney Smith, Kim Yawn, and Victoria Tinsley

Absent:

Guest: Kelly Smith (FORVIS), Amanda Penland (FORVIS)

Public/Open Session CALL TO ORDER: Mr. Himmelsbach called the meeting to order at 7:30 a.m. The meeting has been posted. Victoria Tinsley took roll call. A quorum of the Board is confirmed.

MOTION: A motion was made Mr. Harmon for Board Members to go into Executive Session for the following purpose: Discussion of Personnel matters, Medical Staff recruitment and contracting, strategic matters related to facility expansion and contractual arrangements with related partners. The motion was seconded by Dr. Banner and unanimously approved.

Public/Open Session MOTION: A motion was made by Mr. Harmon to re-commence into Public/Open Session at 9:12 a.m. The motion was seconded by Mr. LaBruce and unanimously approved.

Mr. Himmelsbach provided the mission statement.

MOTION TO AMEND THE AGENDA, MOVING THE QUALITY IMPROVEMENT COMMITTEE REPORT TO THE NEXT ITEM ON THE AGENDA AS REQUESTED BY DR. BILLIG, QIC CHAIR. The motion was made by Mr. LaBruce and seconded by Dr. Jessee. Unanimous approval.

Quality Improvement Committee: Dr. Billig noted there is an influx of hospitalist and ER locums providers during this transition period. For medical executive committee, meditech expense went live. Joint commission report had 100% compliance in tracers. Continue to work on sustained compliance report for the Joint Commission. Reviewed the Environment of Care Plan and the Utilization Management Plan and recommend to the board for approval. Reviewed HCAHPS scores, overall maintaining 3 out of 5 stars. Surveys have gone virtual, which will hopefully increase the response rate of the surveys compared to having to mail one in. Service excellence report had some increased complaints, could be due to how busy the ER has been, and some access complaints for appointments in the physician practices that are a few months out for a new patient visit.

Mr. Himmelsbach invited Ms. Howard to introduce Mr. Michael Moore, Beaufort County Administrator, who will be participating in today's board meeting. The board members provided introductions to Mr. Moore and thanked him for being here.

Karen Carroll provided a patient story.

Mr. Harmon introduced the FORVIS team, Ms. Kelly Smith and Ms. Amanda Penland to provide the Report to the Board for the FY24 Financial Audit.

In summary, the auditors issued an unmodified opinion on the financial statements prepared in accordance with GAAP, no material weaknesses identified, and one significant deficiency identified for the foundation internal control. No non-compliance material to the financial statements noted. No material weaknesses or significant deficiencies for the federal awards and an unmodified opinion issued on compliance for major federal programs, and no findings needing to be disclosed in accordance with 2 CFR 200.516(a). In addition, considered a low risk auditee.

Ms. Smith presented the required Report to the Board and all required communications regarding the audit strategy and approach. There were no reportable matters for significant accounting policies, no reportable matters for unusual policies or methods and no reportable matters for alternative accounting treatments, no reportable matters for financial statement disclosures or judgement about the quality of the entity's accounting principles. There was only one proposed and recorded adjustment related to the foundation donor restricted assets. This was:

- Entry posted to increase Foundation net assets with donor restrictions and decrease net assets without donor restrictions by approximately \$186,000 for investment earnings on the Coastal Blood Endowed Fund, as required by the funding agreement. Earnings on this fund are restricted for sickle cell research.

Ms. Smith noted to the board, operationally the funds were being used as they were intended to. The disconnect came from operations and third-party accounting on reporting, to re-iterate not a misuse of funds. Corrective action is in place moving forward. Ms. Smith identified one other required communication regarding the HAWQ payments. Quarterly revenue received from the HAWQ program has been recognized through June 30th 2024, while the hospital license tax expense has been recognized through September 30th 2024, creating a one quarter lag in the revenue recognition. Management has elected to defer revenue recognition by one quarter, until there is more clarity on the program and the State's program evaluation. Management is taking a conservative approach in the fact they do not want to recognize revenue that could potentially be owed back. If management were to have recognized the revenue through 9/30 the net patient service revenue would have been approximately \$5.1M higher and estimated third party payor settlement liability would have been approximately \$5.1M lower. Mr. Harmon noted the Finance committee has had multiple conversations on this topic and are all in agreeance on the stance management has taken. No further questions or discussion from the board on the FY24 audit.

Ms. Smith and Ms. Penland exited the meeting.

CONSENT AGENDA – Approval of Minutes for February 26, 2025 and March 14, 2025 Board Retreat Minutes. Approval of Committee Reports, Patient Flow and Staff Reports – Mr. LaBruce made a motion, which was seconded by Ms. Dore to adopt the agenda and reports as presented. Unanimous approval/no opposition.

MEDICAL STAFF: Dr. Gambla reported no issues on the credentials report.

MEDICAL STAFF – *Credentials*: The following practitioners requested Appointment:

Amin, David MD, Requesting Appointment: Active/Locums; Department of Emergency Medicine; Emergency Medicine; BMH Emergency Medicine; Bassiouni, Hisham, PA, Requesting Appointment: APP/Locums; Department of Emergency Medicine; Emergency Medicine; BMH Emergency Medicine; Blind, Kenneth, PA, Requesting Appointment: APP/Locums Department of Emergency Medicine; Emergency Medicine; BMH Emergency Medicine; Bostic, Robert, PA-C, Requesting Appointment: APP/Locums; Department of Emergency Medicine; Emergency Medicine; BMH Emergency Medicine; Gloster, Charles, NP, Requesting Appointment: APP/Locum; Department of Medicine; Hospitalist; BMH Hospitalist; Johnson, William, MD, Requesting Appointment: Active/Locums; Department of Emergency Medicine; Emergency Medicine; BMH Emergency Medicine; Mathieson, Bryan, DNP, Requesting Appointment: APP/Locum; Department of Medicine; Hospitalist; BMH Hospitalist; Sonmezturk, Hasan, MD, Requesting Appointment: Telemedicine; Department of Medicine; Remote Neuromonitoring; Specialty Care Group; Wagner, Denise, CNW, Requesting Appointment: APP; Department of Obstetrics; Obstetrics; BJH Comp Health Services-Obstetrics

Reappointment:

Chabrier- Rosello, Jorge O., MD, Requesting Reappointment: Active; Department of Medicine; Internal Medicine; BMH Internal Medicine; Haines, Timothy C., PA-C, Requesting Reappointment: APP; Department of Medicine; Infectious Disease; Lowcountry Infectious Disease; Jones, Nathaniel R., MD, Requesting Reappointment: Active; Department of Radiology; Radiology; Beaufort Medical Imaging; Kaup, Michael, MD, Requesting Reappointment: Community Active; Family Medicine; Department of Ambulatory Primary Care; BMH Express Care and Occupational Health; Manos, Peter N., MD, Requesting Reappointment: Active; Department of Medicine; Pulmonology Care; MUSC Health Pulmonary & Sleep; Mazzeo, Paul, MD, MS, BS, Requesting Reappointment: Active; Department of Medicine; Neurology; Coastal Neurology; McElveen, Cecil T., MD, Requesting Reappointment: Active; Department of Emergency Medicine; Emergency Medicine; BMH Emergency Medicine; McEvoy, John R., MD, Requesting Reappointment: Consulting; Department of Surgery; Pathology; Coastal Pathology Laboratories; Medbery, Robena E., MD, Requesting Reappointment: Active/Locums; Department of Medicine; Radiation Oncology; BMH Radiation Oncology; Anderson, Fredrick, DO, Requesting Reappointment: Consulting; Department of Radiology; Virtual Radiology; vRad; Hellfeld, Megan, MD, Requesting Reappointment: Consulting; Department of Radiology; Virtual Radiology; vRad; Jaindl, Jeffrey, DO, Requesting Reappointment: Consulting; Department of Radiology; Virtual Radiology; vRad; Lerro, Desiree, DO, Requesting Reappointment: Consulting; Department of Radiology; Virtual Radiology; vRad; Shapoval, Anton, MD, Requesting Reappointment: Consulting; Department of Radiology;

Virtual Radiology; vRad; Mszyco, Steven, MD, Requesting Reappointment: Consulting; Department of Radiology; Virtual Radiology; vRad

Requesting Modifications to Privileges

Resignations:

Ebner, Colleen CRNA, Anesthesia, Non-Renewal, Farrell, Michael, MD, Ambulatory Primary Care, Reflex Resignation, 2/24/25, Goldsmith, Dawn H., CRNA, BS, Anesthesia, Non-Renewal (retired), Huntley, Joel, CRNA, Anesthesia,, Non-Renewal Okeke, Okechukwu J., MD, Pediatric Hospitalist, Non-Renewal, Schreffler, William, NP, Orthopedics, Letter of Resignation, 3/4/25, Sullivan, Brittany, DO, Hospitalist, Reflex Resignation, 12/31/24

MOTION: After review and the recommendation by MEC and then QIC, Dr. Jessee made a motion, which was seconded by Mr. Harmon to accept the Credentials Committee recommendations as presented. Unanimous approval. \

MOTION TO APPROVE THE UTILIZATION MANAGEMENT PLAN AS PRESENTED BY THE QI COMMITTEE. Mr. LaBruce made the motion, which was seconded by Mr. Harmon. Unanimous approval.

MOTION FOR THE BOARD OF TRUSTEES TO RECEIVE AND ACCEPT THE FINAL AUDIT FOR FISCAL YEAR ENDING SEPTEMBER 30, 2024 AS PRESENTED BY THE FINANCE COMMITTEE. Mr. Harmon made the Motion, which was seconded by Mr. LaBruce. Unanimous approval.

COMMITTEE CHAIR ISSUE IDENTIFICATION:

Finance Committee: Mr. Harmon noted February performed as expected financially due to being a short month. Financial reports were provided in the board packet.

Governance Committee: Mr. LaBruce noted there is still one vacancy on the board. There is an interview for an interested board member after the board meeting today. Two names will need to be submitted to the County for review.

Compliance Committee: Mr. Himmelsbach reported no concerns from the compliance committee.

Legislative and Community Outreach Committee: Dr. Banner referenced the board retreat, where the Moore & Van Allen team provided an update on current legislation affecting hospitals and health systems. Dr. Banner provided an update on S244 Tort Reform that is out of committee, S46 for non-competes and the corporate practice of medicine is in Committee, S54 medical freedom for informed consent is in committee, 24069 itemized billing is out of the Senate is in the house, as well as B170 Surgical Smoke and S236 for anesthesiology assistants. Mr. Baxley shared the hospital's stance on a few of the items including the anesthesiology assistant bill that the hospital is in favor in to expand access to anesthesiology.

CMO REPORT: Dr. Gambla provided an update on Palliative care, noting it will be going to a 7 day a week service. Medical Addiction Treatment continues to grow its panel, State data shows a decrease in opioid related deaths YoY. Bird Flu is being followed in conjunction with the department of health and tracking as needed.

BMH FOUNDATION: Ms. Yawn noted current year fundraising is \$2.7M, grants making up a little under \$700k of the total. Valentine's Ball net proceeds were \$243k, going towards the vision campaign for the Bluffton Hospital. There is about \$1M pending in grant applications. There is a \$50k matching gift committed for mental health, there is a \$300k deficit for the Crisis Stabilization Unit that is currently under construction. Doctor's day appeal is underway, and Dr. Billig was recognized as an honored caregiver by the foundation.

MANAGEMENT REPORT:

Workforce Development: Mr. Baxley shared there is a lot of internal interest in the surgical tech program. This is advantageous for the hospital, as there is still contract labor for surgical techs now. Also working with TCL to support their surgical tech program, and looking into a skills lab on the second floor education suite. Mr. Baxley reported the dual enrollment program with the Beaufort County School District is going well.

Construction Update: The Crisis Stabilization Unit construction is underway. In the first phase of a 2 phase project (4 months each). This is a pilot program mostly funded through the state of SC. The Foundation is doing a nice job to raise the remaining amount of money for the project. The OR project has gone well with good feedback so far from the surgeons. There is an interventional radiology lab mobile unit in front of the hospital as the IR lab is being replaced.

Affordable Housing Update: Beaufort County has officially approved the transfer land on Buckwalter Parkway for the affordable housing project pending the deed transfer to Beaufort Memorial. In parallel, will round back on next steps for a conceptual plan on single unit family housing on land off of Ribaut rd. This would be in partnership with Clayton homes, although still in conceptual phase. Discussion ensued briefly around affordable housing.

The growth and balanced scorecards are available for review in the board packet.

DISCUSSION OR SUPPLEMENTAL INFORMATION:

ADJOURN – A motion was made by Ms. Dore and was seconded by Dr. Banner, to adjourn the meeting. Unanimous approval. The meeting adjourned 10:18 a.m.

Respectfully submitted,

Vernita Dore, Secretary