



TAHOE FOREST HOSPITAL DISTRICT

2022-06-15 Regular Meeting of the Truckee Surgery Center Board of Managers

Wednesday, June 15, 2022 at 12:00 p.m.

Pursuant to Assembly Bill 361 and Resolution 2022-04 approved by the Tahoe Forest Hospital District, the Regular Meeting of the Truckee Surgery Center Board of Managers for June 15, 2022 will be conducted telephonically through Zoom.

Please be advised that pursuant to legislation and to ensure the health and safety of the public by limiting human contact that could spread the COVID-19 virus, the Eskridge Conference Room will not be open for the meeting.

Board Members will be participating telephonically and will not be physically present in the Eskridge Conference Room.

If you would like to speak on an agenda item, you can access the meeting remotely: Please use this web link: <https://tfhd.zoom.us/j/84314101291>

If you prefer to use your phone, you may call in using the numbers listed: (346) 248 7799 or (301) 715 8592, Meeting ID: 843 1410 1291



2022-06-15 Regular Meeting of the Truckee Surgery Center Board of Managers

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ITEMS 8 - 9: See Agenda

10. ADJOURN



TRUCKEE SURGERY CENTER REGULAR MEETING OF THE BOARD OF MANAGERS

AGENDA

Wednesday, June 15, 2022 at 12:00 p.m.

Pursuant to Assembly Bill 361 and Resolution 2022-04 approved by the Tahoe Forest Hospital District, the Regular Meeting of the Truckee Surgery Center Board of Managers for June 15, 2022 will be conducted telephonically through Zoom. Please be advised that pursuant to legislation and to ensure the health and safety of the public by limiting human contact that could spread the COVID-19 virus, the Eskridge Conference Room will not be open for the meeting. Board Members will be participating telephonically and will not be physically present in the Eskridge Conference Room.

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Please use this web link: <https://tfhd.zoom.us/j/84314101291>

Or join by phone:

If you prefer to use your phone, you may call in using the numbers listed: (346) 248 7799 or (301) 715 8592, Meeting ID: 843 1410 1291

Public comment will also be accepted by email to mrochefort@tfhd.com. Please list the item number you wish to comment on and submit your written comments 24 hours prior to the start of the meeting.

Oral public comments will be subject to the three minute time limitation (approximately 350 words). Written comments will be distributed to the board prior to the meeting but not read at the meeting.

- 1. **CALL TO ORDER**
- 2. **ROLL CALL**
- 3. **CLEAR THE AGENDA/ITEMS NOT ON THE POSTED AGENDA**
- 4. **INPUT – AUDIENCE**

This is an opportunity for members of the public to address the Board on items which are not on the agenda. Please state your name for the record. Comments are limited to three minutes. Written comments should be submitted to the Board Clerk 24 hours prior to the meeting to allow for distribution. Under Government Code Section 54954.2 – Brown Act, the Board cannot take action on any item not on the agenda. The Board may choose to acknowledge the comment or, where appropriate, briefly answer a question, refer the matter to staff, or set the item for discussion at a future meeting.

- 5. **APPROVAL OF MINUTES OF: 03/07/2022** ♦ ATTACHMENT

- 6. **ITEMS FOR BOARD ACTION** ♦

- 6.1. **Policy/Procedure Review** ♦

Truckee Surgery Center Board of Managers will review the following policies and procedures:

- 6.1.1. **Adult Modified Warning Score (MEWS)** ATTACHMENT
- 6.1.2. **Pediatric Early Warning Score (PEWS)** ATTACHMENT

Regular Meeting of the Truckee Surgery Center Board of Managers
June 15, 2022 AGENDA – Continued

- 6.1.3. Resignation/Separation of Employment ATTACHMENT
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- 6.1.10. Receiving Payments..... ATTACHMENT
- 6.1.11. Credit Balance Refunds & Adjustments ATTACHMENT
- 6.1.12. Payment Plans ATTACHMENT

6.2. Fiscal Year 2023 Budget ♦ ATTACHMENT
Truckee Surgery Center Board of Managers will review and consider for approval the Fiscal Year 2023 Budget.

6.3. Signature Approval for Payor Contracts ♦
Truckee Surgery Center Board of Managers will consider approving TSC Administrator to execute payor contracts.

7. ITEMS FOR BOARD DISCUSSION

7.1. Financial Reports

Truckee Surgery Center Board of Managers will review the following financial reports:

- 7.1.1. TSC Balance Sheet Q3 FY22 ATTACHMENT
- 7.1.2. TSC Profit & Loss Q3 FY22 ATTACHMENT
- 7.1.3. Medbridge Quarterly Report Q1 CY22 ATTACHMENT

7.2. Fire and Disaster Drill Update

Truckee Surgery Center Board of Managers will receive an update on recent fire and disaster drills.

7.3. Facility/Equipment Update

Truckee Surgery Center Board of Managers will receive an update on facility and equipment needs.

7.4. Staffing Update

Truckee Surgery Center Board of Managers will receive an update on staffing.

8. CLOSED SESSION

8.1. Approval of Closed Session Minutes ♦

03/07/2022

8.2. Hearing (Health & Safety Code § 32155) ♦

Subject Matter: First Quarter 2022 Infection Control Data Summary

Number of items: One (1)

8.3. Hearing (Health & Safety Code § 32155) ♦

Subject Matter: First Quarter 2022 Quality Assurance Performance Improvement Data

Number of items: Five (5)

8.4. Hearing (Health & Safety Code § 32155) ♦

Subject Matter: First Quarter 2022 California Ambulatory Surgery Association (CASA)

Benchmarking Survey

Number of items: One (1)

8.5. Hearing (Health & Safety Code § 32155) ♦

Regular Meeting of the Truckee Surgery Center Board of Managers
June 15, 2022 AGENDA – Continued

Subject Matter: First Quarter 2022 Ambulatory Surgery Center Association (ASCA) Clinical Benchmarking Survey

Number of items: One (1)

8.6. Hearing (Health & Safety Code § 32155) ◆

Subject Matter: Medical Staff Credentials Report

7. REPORT OF ACTIONS TAKEN IN CLOSED SESSION

9. ITEMS FOR NEXT MEETING

10. ADJOURN

*Denotes material (or a portion thereof) may be distributed later.

Note: It is the policy of Tahoe Forest Hospital District to not discriminate in admissions, provisions of services, hiring, training and employment practices on the basis of color, national origin, sex, religion, age or disability including AIDS and related conditions.

Equal Opportunity Employer. The meeting location is accessible to people with disabilities. Every reasonable effort will be made to accommodate participation of the disabled in all of the District's public meetings. If particular accommodations for the disabled are needed (i.e., disability-related aids or other services), please contact the Executive Assistant at 582-3481 at least 24 hours in advance of the meeting.



Origination N/A
Last Approved N/A
Last Revised N/A
Next Review 1 year after approval

Owner Heidi Fedorchak
Department Nursing Services
Applicabilities Truckee Surgery Center

Adult Modified Early Warning Score (MEWS) and Algorithm NS-2201

PURPOSE:

The purpose of this policy is to provide clear guidance and instruction to the staff to the use of the Adult Modified Early Warning Score (MEWS) tool to identify clinical deterioration of patients.

POLICY:

- A. The MEWS tool assists with the recognition and appropriate management of clinically deteriorating patients and the patient at risk of clinical deterioration. It is complimentary to skilled clinical assessment and decision making.
- B. The MEWS tool will help decision making for staff when there has been acute change(s) in patient status (vital signs, consciousness).
- C. This tool does not replace clinical judgment and if a patient is deteriorating acutely, call a code blue.

PROCEDURE:

A. The MEWS criteria score will be calculated when there is an acute change or an abnormality developed in any of the following parameters:

1. Pulse
2. Respiratory Rate
3. Oxygenation Saturation
4. Temperature

- 5. Blood Pressure
- 6. Conscious State
- 7. Urine Output

B. Once the MEWS score has been calculated, staff will refer to the intervention algorithm for the appropriate interventions/management of patient.

- 1. Total score of 1-3, recommend increasing observations and notify nurse in charge.
- 2. Total score of 4-5, notify nurse in charge and physician.
- 3. Total score of 6 or more, immediately call the physician and nurse in charge and call for assistance.

Attachments

[Modified Early Warning Score \(MEWS\).docx](#)

Approval Signatures

Step Description

Approver

Date

Courtney Leslie: Administrator

Pending

Heidi Fedorchak: Nurse
Manager

06/2022

Modified Early Warning Score (MEWS) for Adult Patients at Risk Scoring Criteria

Instructions: Use for patients who have an acute change in vital signs or consciousness. Calculate score for each parameter and add the total. Follow the Intervention Algorithm.

	3	2	1	0	1	2	3
Respiratory Rate		≤ 8		9-14	15-20	21-29	>29
Heart Rate		≤ 40	41-50	51-100	101-110	111-129	>129
BP Systolic (SBP)	≤ 70	71-80	81-100	101-199		≥200	
Urine output	Nil	<0.5					
Temperature		≤ 95	95.1-96.8	96.9— 100.4	100.5- 101.4	≥ 101.5	
Response to Stimuli				Alert	Reacting to voice	Reacting to pain	Unresponsive

Intervention Algorithm:

Total score **1-3**: Increase observations and notify nurse in charge

Total score **4-5**: Notify nurse in charge and physician

Total score **6 or more**: Immediately call physician and nurse in charge and call for help

Pediatric Early Warning Score (PEWS) for Pediatric Patients at Risk Scoring Criteria

	0	1	2	3
Behavior	Playing/appropriate	Irritable, but consolable	Irritable, but NOT consolable	Lethargic Confused Reduced response to pain
Cardiovascular System				
Heart Rate	Within normal range for age	Tachycardia less than 20 above normal for age	Tachycardia 20-29 above normal for age	Tachycardia at least 30 above or bradycardia at least 10 below for normal age
Color	Pink/ normal	Pale or dusky	Mottled	Gray
Perfusion	Capillary refill 1-2 seconds	Capillary refill 3 seconds	Capillary refill 4 seconds	Capillary refill 5 or more seconds
Respiratory System				
Respiratory Rate	Within normal range for age	Tachypnea 10-19 above normal range for age	Tachypnea at least 20 above normal range for age with retractions	Bradypnea at least 5 below normal range for age with retractions Or Tachypnea at least 30 above normal range with retractions
Effort	No retractions	Mild retractions/ accessory muscle use	Moderate retractions/ accessory muscle use (including tracheal tugging)	Severe retractions/ accessory muscle use, including tracheal tugging AND grunting
Oxygen	Normal SpO ₂ , no oxygen required	Oxygen 2L required to maintain normal SpO ₂	Oxygen 3L required to maintain normal SpO ₂	Oxygen at least 4L required to maintain normal SpO ₂

Intervention Algorithm:

Total score of **0-2**, continue routine assessment, reassess as needed.

Total score of **3**, notify nurse in charge and agree on reassessment plan.

Total score of **4**, notify nurse in charge and physician.

Total score of **5** or greater or a 3 in any one category, immediately notify nurse in charge and request evaluation by physician at the bedside, call for additional assistance.

Normal Pediatric Vital Signs

Age	Heart Rate	Respiratory Rate	Blood Pressure
Infant (1-12 months)	120-160	30-53	85/54
Toddler (1-2 years)	90-140	22-37	95/65
Preschooler (3-5 years)	80-110	20-28	95/65
School-Age Child (6-9 years)	75-100	18-25	105/65
Adolescent	60-90	12-20	110/65-119/75



Origination	N/A
Last Approved	N/A
Last Revised	N/A
Next Review	1 year after approval

Owner	Heidi Fedorchak
Department	Nursing Services
Applicabilities	Truckee Surgery Center

Pediatric Early Warning Score (PEWS) and Algorithm NS-2202

PURPOSE:

The purpose of this policy is to provide clear guidance and instruction to the staff to the use of the Pediatric Modified Early Warning Score (PEWS) tool to identify clinical deterioration of pediatric patients.

POLICY:

- A. The PEWS tool assists with the recognition and appropriate management of clinically deteriorating pediatric patients and the patient at risk of clinical deterioration. It is complimentary to skilled clinical assessment and decision making.
- B. The PEWS tool will help decision making for staff when there has been acute change(s) in patient status (vital signs, consciousness, appearance).
- C. This tool does not replace clinical judgment and if a patient is deteriorating acutely, call a code blue.

PROCEDURE:

- A. The PEWS criteria score will be calculated when there is an acute change or abnormality developed in any of the following parameters:
 - 1. Respiratory rate calculated over one minute
 - 2. Respiratory effort
 - 3. Pulse oximetry and oxygen requirements
 - 4. Heart rate for at least 30 seconds

- 5. Skin color
- 6. Capillary refill time
- 7. Behavior
- 8. Temperature

B. Once the PEWS score has been calculated, staff will refer to the intervention algorithm for the appropriate interventions/mangaement of the patient.

- 1. Total score of 0-2, continue routine assessment, reassess as needed.
- 2. Total score of 3, notify nurse in charge and agree on reassessment plan.
- 3. Total score of 4, notify nurse in charge and physician.
- 4. Total score of 5 or greater or a 3 in any one category, immediately notify nurse in charge and request evaluation by physician at the bedside, call for additional assistance.

COPY

Attachments

[Pediatric Early Warning Score \(PEWS\).docx](#)

Approval Signatures

Step Description	Approver	Date
	Courtney Leslie: Administrator	Pending
	Heidi Fedorchak: Nurse Manager	06/2022



Origination N/A
Last Approved N/A
Last Revised N/A
Next Review 07/2022

Owner Courtney Leslie
Department Human Resources
Applicabilities Truckee Surgery Center

Resignation/Separation of Employment- HR-2202

POLICY:

Truckee Surgery Center (TSC) strives to provide an orderly procedure for separation of employment from the Surgery Center.

PROCEDURE:

- A. The Administrator will be notified as soon as an employee intends to resign from their position. A Personnel Action Form must be completed and forwarded to the Administrator with a copy of the resignation letter. The employee will also schedule an appointment with the Administrator to complete final paperwork related to benefits. At this time, the Administrator will notify the Tahoe Forest Hospital IT department of the employee's final date of employment.
- B. Employees are expected to return their photo identification badge, keys, and any other Surgery Center property to their Manager on their final day of work.
- C. Final checks will be available to employees on their last day of employment if the employee has provided at least 72 hours notice of resignation or involuntary termination. If not requested sooner, final checks will be processed through the regular payroll cycle. Final checks will be issued within 72 hours for employees who have given less than 72 hours notice. A final check will include all accrued but unpaid Personal Leave (PL).
- D. **Definitions:** Resignation is defined as a voluntary separation. Employees are asked to give at least two weeks written notice to their Manager. Management employees are asked to give four weeks written notice.
 - 1. Resignation without notice is applied when an employee leaves their job without notice or walks off of the job. Two consecutive days of no call/no show will constitute a resignation without notice.
 - 2. Discharge is defined as termination from TSC for infractions/behaviors not consistent with policy and procedures and/or professional conduct. Refer to policy

Discipline and Discharge, HR-2203.

E. The last day an employee works is considered the final date of employment.

Related Policies/Forms:

Discipline and Discharge, HR-2203

Approval Signatures

Step Description

Approver

Date

DRAFT



Origination N/A
Last Approved N/A
Last Revised N/A
Next Review 07/2022

Owner Courtney Leslie
Department Human Resources
Applicabilities Truckee Surgery Center

Discipline and Discharge, HR-2203

RISK:

The risks associated with not following the procedure below are that employees may be disciplined or discharged without cause, or inappropriately disciplined or discharged for issues that do not warrant such actions, could lead to a breakdown in trust between employees and management.

PROCEDURE:

- A. During their initial probationary period, employees may be disciplined or discharged at the Surgery Center's discretion without reason.
- B. Managers may provide coaching in a discussion regarding behaviors and shall not be considered discipline. Coaching is intended to provide an informal method for direct interaction for addressing perceived issues.
 - 1. Coaching may be used to substantiate a disciplinary action for up to one (1) year. If there is a demonstrated pattern of behavior, the coaching may be kept for up to two (2) years.
 - 2. Written documentation may be created to identify the behaviors discussed. This documentation regarding coaching may be kept in the manager's files, but will not be retained in the employee's personnel file.
- C. The Surgery Center may discipline the employee in any of the following ways. Depending on the nature of the behavior, the Surgery Center may choose the level of discipline appropriate.
 - 1. Written Warning: This is a documented discussion signed by the employee and manager. The documentation is part of the employee's permanent personnel file and may be used to substantiate a disciplinary action for up to one (1) year. If there is a demonstrated pattern of behavior, the written warning may be kept for up to two (2) years.
 - 2. Final Written Warning: This is a documented discussion signed by the employee and

manager. The documentation is part of the employee's permanent personnel file and may be used to substantiate disciplinary action for up to one (1) year. This is a final opportunity for the employee to correct behaviors. If behaviors continue, termination may result.

3. **Suspension Without Pay:** This is a period of time, not to exceed three (3) scheduled shifts or 24 hours, whichever is less, when the employee is removed from the work schedule without pay. Documentation is kept in the employee's permanent personnel file and may be used in further disciplinary actions for up to two (2) years.
4. **Termination:** Misconduct may be cause for immediate discharge when behaviors are found to be a continued pattern of behavior, reckless behavior, or other behavior supporting just cause for termination.

D. The Disciplinary Process is described as follows:

1. **Fact Finding Interview:** This is a meeting between an employee and manager to obtain information so that the manager may understand the issues and decide if disciplinary action is warranted. A second manager may also be present.
 - a. This meeting should be scheduled as soon as it is determined that a fact finding meeting is needed.
2. The manager will inform the employee within five (5) business days from the conclusion of the fact finding interview if discipline is appropriate. This time frame may be extended by mutual agreement of both parties.
 - a. **Notification of Disciplinary Action:** If the manager decides to impose discipline, documentation provided to the employee shall include copies of any written materials that will be placed in the employee's personnel file reflecting the planned discipline (for example, a copy of the planned written warning), an explanation of the proposed discipline and an explanation of any documents or other evidence leading to the planned discipline.

3.	Event	Timeline	Parties Present
	Coaching	Prior to Disciplinary Process	Employee and Manager(s)
	Fact Finding Interview	As soon as it is determined that a fact finding meeting is needed	Employee and Manager(s)
	Notification of Disciplinary Action	Within five (5) business days from Fact Finding Interview	Employee and Manager(s)

- E. Copies of written warnings and documentation of disciplinary action will be placed in the employee's personnel file. Refusal to sign and/or rebuttal by the employee will also be placed in the file.

Approval Signatures

Step Description

Approver

Date

DRAFT



Origination N/A
Last Approved N/A
Last Revised N/A
Next Review 07/2022

Owner Courtney Leslie
Department Human Resources
Applicabilities Truckee Surgery Center

Performance Improvement Plan, HR-2204

PURPOSE:

Truckee Surgery Center (TSC) has made a commitment to fair employment practices and maximum organizational support to our employees. As part of this commitment, we want to ensure that every employee is given the support they need through both materials and management to meet, if not exceed, the expectations of their role.

POLICY:

- A. If Management is recognizing that an employee is exhibiting repetitive human error issues, non-behavioral issues with failures to meet expectations, or other risk related errors, and believes a Performance Improvement Plan (PIP) would assist the employee with producing better outcomes, the Manager may choose to implement a performance improvement plan.
 1. Performance improvement plans are not intended to be negative and do not reflect poorly on the individual.
 2. When Management believes that through a collaborative effort, the employee may be able to identify and mitigate personal and/or system components that are currently preventing them from meeting organizational expectations a written performance improvement plan will be put in place.
 3. Throughout the course of the Performance Improvement Plan, Management commits to the employee as much interaction, support, and training as possible and practicable to assist the employee in meeting performance standards and excelling in their role. The employee is expected to invest all possible efforts to meet the standards set fourth in their job description and the elements of the plan.
 4. The Performance Improvement Plan will include the following:
 - a. Outline the reasons/concerns that led to implementation of a Performance Improvement Plan.

- b. Clearly defined manager initiated plan for improvement with elements being measurable as complete with assigned due dates.
 - c. Additional Employee Support Requested, if any (completed at the time of reviewing plan with employee)
 - d. Interim review schedule with a time frame for expected improvement and scheduled meetings with the manager to review progress.
 - e. Signature of both the employee and manager.
5. This is a documented discussion and plan for performance improvement. The documentation is part of the employee's permanent personnel file.
 6. If at any time during the course of the Performance Improvement Plan it becomes clear that the employees performance will not improve to meet the minimum expectations of their role, employment may be discontinued.

Related Policies/Forms:

Attachments

[Performance Improvement Plan.docx](#)

Approval Signatures

Step Description

Approver

Date



Performance Improvement Plan

EMPLOYEE INFORMATION

Employee

Name: _____ Date Delivered: _____

Job Title: _____ Manager: _____

ISSUE HISTORY

Truckee Surgery Center (TSC) has made a commitment to fair employment practices and maximum organizational support to our employees. As part of this commitment, we want to ensure that every employee is given the support they need through both materials and management to meet, if not exceed, the expectations of their role.

At this time your management has recognized that **[enter either repetitive human error issue, or non-behavioral failures to meet expectations issue & related risk (ex. Your data input on patient encounters is incorrect 23% of the time, resulting in significant time correcting these errors as well as potential harm to patients if historical medical information is inaccurate)]**. Due to these concerns, we believe that it is beneficial to both you and the organization to formulate a performance improvement plan to assist you with producing better outcomes.

We want to emphasize that performance improvement plans are not intended to be negative and do not reflect poorly on you as an individual. Rather, we implement performance improvement plans when we believe that through a collaborative effort with your management, you may be able to identify and mitigate personal and/or system components that are currently preventing you from meeting organizational expectations.

Throughout the course of the Performance Improvement Plan, your management commits to you as much interaction, support, and training as possible and practicable to assist you in meeting performance standards and excelling in your role. We also expect that you will invest all possible efforts to meet the standards set forth in your job description and the supportive benchmarks set forth below.

MANAGER INITIATED PLAN

[Each element of the plan should be a measurable as "complete" task and have an assigned due date (i.e. you will review with your manager a minimum of five charts as chosen by your manager at the conclusion of each shift to check for accuracy and areas for improvement (2) you will spend a minimum of one hour with a risk management specialist reviewing encounter selection & the risks of data failures no later than [date]. Elements should NOT read "make 15% less errors within the next five days" – this gives no guidance to the employee on specific elements on which they can focus their efforts to produce better outcomes.

ADDITIONAL EMPLOYEE REQUESTED SUPPORT

If you believe that there are additional reasonable supports that have not been included in this plan that may support you in meeting the above outlined expectations, you may add them below with the agreement of your management.

1.



- 2.
- 3.

INTERIM REVIEW SCHEDULE

This PIP is your opportunity to engage with your work in a renewed and supported manner. We believe that given the scope of the issues needing improvement, that within [30/60/90/180] days, we expect to see improvement not only met but sustained.

You will meet with your manager on [dates/once a week/etc] to review your progress]

We have every reason to believe that you will successfully complete this performance improvement plan. If, however, at any time up to and including the final day of this performance improvement plan, it becomes clear that your performance will not improve to meet the minimum expectations of your role, either despite best efforts or pursuant to your choices not to participate in this plan, Truckee Surgery Center reserves the right to discontinue your employment.

ADDITIONAL EMPLOYEE REQUESTED SUPPORT

_____ /s/ Employee	_____ Date
_____ /s/ Representative for Employee (if applicable)	_____ Date
_____ /s/ Manager	_____ Date



Origination N/A
 Last Approved N/A
 Last Revised N/A
 Next Review 07/2022

Owner Courtney Leslie
 Department Human Resources
 Applicabilities Truckee Surgery Center

Pay and Differentials, HR-2206

PURPOSE:

To provide fair, competitive salaries based on previous experience and differential for work out of classification.

PAY SCALE PLACEMENT:

To provide fair, competitive salaries based on previous experience, management may hire licensed and certified personnel into the salary structure above the minimum on the salary range based on qualifications and experience.

- A. During the interview process the Nurse Manager and/or Administrator must determine an applicant's years of relevant previous experience and take into account an applicant's breaks in employment, or employment in other areas. Based on the applicable years of previous experience, the Administrator will determine the range in which they can offer a hiring wage.

B.

YEARS OF EXPERIENCE	MINIMUM STARTING PAY RATE
0 - 2 years	Between pay range minimum, up to 5% above pay range minimum
3 - 5 years	Between pay range minimum, up to 10% above pay range minimum
5 + years	Between pay range minimum, up to 15% above pay range minimum

- C. The Administrator will review internal equity of existing staff to determine a wage within the above guidelines.
- D. The Administrator **may not** pay over guidelines without approval from the Administrative Director of Surgical Services. In certain circumstances, including hard-to-fill positions or

applicants with considerable experience, an employee may be hired over the mid-point in the salary range.

PAY SCALE PLACEMENT FOR CHANGE OF STATUS OR PROMOTION:

- A. Employees changing status from per diem to full or part time status will be placed on the salary range based on previous experience and years of employment.
- B. Employees transferring to a job in a higher pay range may receive an increase of at least 2.5% in base hourly rate by virtue of any promotion. A promotion shall mean a position in a different and higher paying job classification. The determination of salary increase will be based on skills, ability and experience.

DIFFERENTIALS:

Employees who are assigned to work in a higher paying hourly job classification may be eligible for higher rate of pay.

A. Procedure for Licensed Job Classification:

1. Employees scheduled to work, or accepting positions outside of their job classification, will be paid in addition to their base hourly rate based on the following guidelines:
 - a. Lead; charge nurse roles 5% differential
 - i. Responsibilities
 - a. Day to day operations
 - b. Represent area in meetings
 - c. In-service department employees
 - d. Update policies and procedures
 - e. Ordering
 - f. Staff Scheduling
 - g. After hours responsibilities

B. Procedure for Non-Licensed Job Classifications:

1. Employees who are assigned to work in a higher job classification by their Manager shall be paid 5% above their base pay, or the pay range minimum of the higher classification, whichever is higher.
2. Employees covering for a Manager for a period of greater than three (3) days will be paid 5% above their base pay unless such coverage is required by their job description.
3. Employees who assume responsibility on an interim basis shall have the right to negotiate, with their Manager and the Administrator, for an increase related to the amount of management responsibilities assumed.

Approval Signatures

Step Description

Approver

Date

DRAFT



Origination N/A
Last Approved N/A
Last Revised N/A
Next Review 07/2022

Owner Courtney Leslie
Department Business Office
Applicabilities Truckee Surgery Center

Prompt Payment Discount, BO-2201

PURPOSE:

To assist patients in meeting their financial obligations Truckee Surgery Center (TSC) offers a discount for prompt payments.

POLICY:

TSC offers a 30 percent (30%) discount for self-pay patients who pay the full estimated balance due with discount applied prior to or at the time of service.

Patient's who are ready for collections will be given one last call to attempt a settlement, which may include a prompt pay discount to pay their balance in full to avoid being sent to collections. The discount will not exceed twenty percent (20%).

PROCEDURE:

Self-Pay

- A. Self-pay patients will be contacted by the Business Office to review estimated charges for their upcoming procedure. This contact will be made no later than 3 days from the date of receiving the request to schedule from the provider's office. All conditions below must be met in order for the discount to apply:
 - 1. Patients must be self-pay or elect not to bill their insurance.
 - 2. Patients must pay seventy percent (70%) of estimated charges prior to or at the time of service. This discount cannot be combined with a payment plan.
 - 3. Patients must pay off any remaining balance within fourteen (14) days of the first statement.
 - a. If the remaining balance is not paid within fourteen (14) days, the discount

will be reversed and the patient will receive a bill for the entire amount minus any payments.

Patient who are ready for collections

- A. Patients who are ready to be sent to collections will be contacted by the Billing Company for a final attempt to collect their past due balance. They may be offered a twenty percent (20%) discount if they are able to pay in full at the time of the call.
 - 1. No discounts are to be given for deductibles. This discount applies only to the coinsurance portion.
 - 2. If a prompt pay discount is given, the Prompt Pay Discount journal code will be utilized to adjust the discounted amount.
 - a. If the patient does not pay the account is noted that the discount was offered but not accepted and the account is sent to collections.

Attachments

[Self-Pay Prompt Pay Discount Election](#)

Approval Signatures

Step Description

Approver

Date



Prompt Pay Discount Election

In order to assist self-pay patients, Truckee Surgery Center offers a discount for prompt payment. In order to qualify for the discount, you must be self-pay or elect to not bill your insurance. You will be asked for the full amount of anticipated charges with 30% off at the time of service.

Anticipated charges are an estimate only, final billed charges will be determined by services rendered. Any additional balance, such as implants, allografts, or additional procedures, must be paid off within two weeks of the first patient statement. If this balance is not paid off within two weeks, the discount will be reversed, and you will be billed for the full amount. Once you have elected to utilize the discount, you cannot bill your insurance plan (if applicable). This discount applies only to charges from Truckee Surgery Center.

Procedure: _____ DOS: _____

Estimated Charges	
30% Discount	
Estimated amount due with discount applied	

By signing, I understand the above qualifications of the prompt pay discount and agree to remit payment of any additional balances within 2 weeks upon receiving my first statement.

Patient Signature: _____ Date: _____

Responsible Party (If different than patient): _____

Responsible Party Signature: _____ Date: _____

Witness Signature: _____ Date: _____

Witness Name _____

[PATIENT STICKER]



Origination N/A
Last Approved N/A
Last Revised N/A
Next Review 07/2022

Owner Courtney Leslie
Department Business Office
Applicabilities Truckee Surgery Center

Intent to Proceed, BO-2203

PURPOSE:

To ensure that patients seeking services with authorizations pending from their insurance carrier are educated on the potential financial liabilities if their insurance does not authorize the procedure(s) being performed.

POLICY:

Procedures may be postponed until authorization is in place. If we are unable to postpone, all patients seeking to proceed with authorization pending from their insurance carrier will need to sign an Intent to Proceed prior to having services rendered.

PROCEDURE:

- A. If the date of service is within two business days and an authorization is pending, the Business Office Coordinator will reach out to the providers authorization department to inquire on the status of the authorization. If authorization is still pending the Business Office coordinator will contact the providers office to see if the procedure can be postponed until an authorization can be obtained.
 - 1. The providers authorization department may have already contacted the providers office. If so, request they forward the information along with the letter of urgency.
- B. If the services can be postponed the procedure may be rescheduled.
- C. If the procedure cannot be postponed or it is an urgent add-on the Business Office Coordinator will create an Intent to Proceed and request a letter of urgency from the provider.
- D. The Intent to Proceed outlines that at the time of their service their insurance company has not given authorization for their service. If they choose to proceed with the service it may not be paid by their insurance. By signing the form they understand that authorization has not been secured and that they agree to pay the liability if their insurance denies the authorization

- E. The Business Office Coordinator will explain to the patient that their insurance has not authorized the service and they will be required to sign an Intent to Proceed if they want to proceed with services at Truckee Surgery Center. The Business Office Coordinator will explain how to utilize the Prompt Pay Discount, their insurance benefits and estimated cost if they do obtain authorization.
- F. If the patient does not agree to sufficient payment arrangements the Business Office Coordinator will complete the Insurance Authorization Pending Form, Intent to Proceed, and obtain a letter of urgency from the surgeon and submit to the Administrator for review.
- G. If denied, the Business Office Coordinator will communicate to the patient that they cannot proceed with the scheduled procedure unless a sufficient payment arrangement is set up or authorization has been secured.
- H. If approved, the Business Office Coordinator will make sure the Intent to Proceed is signed and answer any remaining questions the patients may have.
- I. The Business Office Coordinator will be in close communication with the providers authorization department regarding the timeline of events, as they will be completing the same process on their end for the professional fees.

Special Instructions / Definitions:

Urgent: For the purposes of this policy, urgent services are those that are designated as urgent by the provider.

DRAFT

Attachments

[INSURANCE AUTHORIZATION PENDING FORM.docx](#)

[INTENT TO PROCEED WITH NON AUTHORIZED SERVICE.docx](#)

Approval Signatures

Step Description	Approver	Date
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INSURANCE AUTHORIZATION PENDING- INTENT TO PROCEED

Date: _____

Patient Name: _____ DOB: _____

Date of Scheduled Service: _____

Service Scheduled: _____

CPT Code (s): _____

Estimated Charges: _____ Estimated Patient Liability: _____

Date Authorization started: _____ Auth Status: _____

Insurance Primary: _____ Secondary: _____

Is this related to a recent injury/ER visit? _____

Explanation of why Intent to Proceed is requested:

APPROVED DECLINED

Administrator Signature: _____

Date: _____



NOTICE OF INTENT TO PROCEED WITH NON AUTHORIZED SERVICE

Date: _____

Patient Name: _____ DOB: _____

Date of Scheduled Service: _____

Service Scheduled: _____

CPT Code (s): _____

Estimated Charges: _____ Estimated Patient Liability: _____

Your insurance company has been provided the necessary information to obtain your authorization, at this time your insurance company has not given authorization for the scheduled service noted above. If you choose to proceed with this service, it may not be paid by your insurance.

The estimated charges above are for **the facility fee only** and does not include any Surgeon, Physician Assistant, Anesthesiologist, Pathology, Laboratory, or Durable Medical Equipment charges. They will bill you separately for their services.

By signing below you understand that the facility/surgeons office has not been able to secure an authorization for your services at this time and you agree to pay your estimated liability noted above for these services should you insurance deny this claim.

Please remember this is an ESTIMATE ONLY. Charges may change once the service has been performed.

Signature

Date



Origination N/A
Last Approved N/A
Last Revised N/A
Next Review 07/2022

Owner Courtney Leslie
Department Business Office
Applicabilities Truckee Surgery Center

Insurance Verification, Authorizations & Estimates, BO-2205

PURPOSE:

To validate patient insurance eligibility, benefits, authorization and create an estimate for the scheduled procedure.

POLICY:

Insurance benefits will be obtained for all patients seeking services. Eligibility and benefits will be verified by the Business Office. Authorization requirements and status will be confirmed with the providers office. An estimate will be provided to the patient prior to services.

PROCEDURE:

- A. The Business Office will obtain insurance information and validate coverage at the time of scheduling. The provider's office will include the insurance information they have on file with the scheduling request.
- B. Insurance must be checked for the month in which services are occurring.
- C. Coverage and other applicable information will be entered into the insurance tab in HST.
 1. Payer Information:
 - a. Payer name
 - b. Claims mailing address
 - c. Claims phone number
 - d. Policy number (Claim number if workers compensation)
 - e. Group number

2. Subscriber Information:
 - a. Full Name
 - b. Social Security Number
 - c. Date of Birth
 - d. Sex
 - e. Address
 - f. Relationship to patient
3. Authorization Info:
 - a. Authorization status
 - b. Authorization number
 - c. Auth dates
 - d. Call Reference number (if no auth was required)
 - e. Contact
 - f. Authorization phone number
 - g. Scheduled-Authorized CPT codes
 - i. Load CPT default to pull from schedule
 - ii. Check auth complete once received
4. Network Information:
 - a. Indicate in or out of network
 - b. Deductible amount
 - c. Deductible amount met
 - d. Co-pay amount
 - e. Out of pocket maximum amount
 - f. Out of pocket maximum amount met
 - g. Co-insurance percentage
5. Military & Worker's Compensation:
 - a. Check employment related if worker's compensation
 - b. DOI for worker's compensation

Eligibility & Benefit Verification

- A. Eligibility can be checked in the following ways:
 1. Real Time Eligibility (RTE):
 - a. Some payers are able to return an electronic eligibility response within HST.
 - b. This is the preferred method to check eligibility.

- c. Most payers will stay verified in the system for 30 days.
- d. RTE automatically stores the eligibility response.
- e. RTE provides plan information such as covered services and benefits. that a plan may have been input incorrectly.
- f. The verification status in the system is automatically updated to "E-Verified".

2. Payer Websites:

- a. If a payer is not RTE enabled, users may be able to check for insurance verification on the payer website.
 - i. Users may need a login to access the site.
- b. Print eligibility from website.
- c. Verification status will be checked "Verified"
 - i. Verify Date: enter date of verification
 - ii. Verify By: enter employee name who completed the verification.
 - iii. Verify With: enter the website used to complete the verification.

3. Phone call to insurance company:

- a. If a payer is not RTE eligible and does not have a website, or the website did not provide sufficient information, a call to the insurance company will be required by calling the provider phone number on the back of the insurance card.
- b. Make an account note including:
 - i. Phone number called
 - ii. Name of representative or automated line
 - iii. Date and time called
 - iv. Information provided such as:
 - a. Eligibility
 - b. If services are a covered benefit
 - c. Benefits and how they are applied (deductible, coinsurance, copay, etc.)
 - d. If services are considered in-network.
 - e. If prior authorization is required.
 - f. Reference number for the call.
- c. A fax containing the eligibility and benefit information will be requested if available.
- d. Verification status will be checked "Verified"
 - i. Verify Date: enter date of verification.

- ii. Verify By: enter employee name who completed the verification.
- iii. Verify With: enter call ref#.

B. Business Office Personnel are responsible for understanding all eligibility responses

- 1. Check for any plan limitations such as:
 - a. Out of network benefits
 - b. Maximum payment amounts for travel insurance plans
 - c. Coverage limitations
 - i. Example: A patient with Medicare Part A only would not be eligible for coverage of outpatient services.

C. If a patient's provided insurance information is not eligible:

- 1. Contact the provider's office to verify the information provided is what they currently have.
- 2. Contact the patient to obtain the correct insurance information.
- 3. Once the correct information is obtained follow the above steps to complete verification.

D. Payer status of "Verified with the patient" will not be used.

Authorizations

Authorization is obtained by the providers office and status updates are communicated to the Business Office on a daily basis.

A. Authorization information will be entered into HST

- 1. Auth status will either be "Authorization not Required", "Authorization Completed", "Authorization Pending", or "Authorization Denied"
- 2. Enter in the authorization number if completed.
- 3. Enter in the call reference number if authorization was not required.
- 4. Load CPT defaults to pull the scheduled CPT codes
- 5. Check auth completed for the CPT codes covered under the authorization

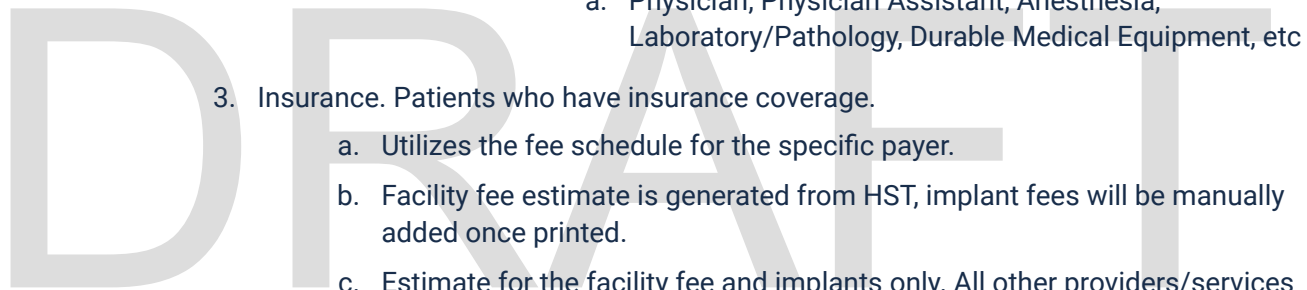
B. If authorization is pending 2 days prior to the DOS the Intent to Proceed process will be started. See Intent to Proceed, BO-2203

Estimates

The Business Office will create estimates as part of the scheduling and benefit verification process. The estimate will be provided to the patient prior to their procedure date, at least 2 weeks in advance when possible.

Estimates are completed for all patients except Workers Compensation.

A. There are 3 different types of estimates:



1. Self-Pay. Patients without insurance coverage or choose not to use their insurance.
 - a. Utilizes the self-pay fee schedule.
 - b. A good-faith estimate must be completed and given to the patient within the specified time frames of the No Surprises Act.
 - i. All anticipated charges related to the procedure must be included on the estimate.
 - a. Physician, Physician Assistant, Anesthesia, Laboratory/Pathology, Durable Medical Equipment, etc
2. Cosmetic/Hourly. Patients who are having cosmetic procedures or are scheduled for an unlisted procedure for which they do not have coverage for. (Example: Pediatric Dental 41899)
 - a. Utilizes the Cosmetic/Hourly fee schedule.
 - b. A good-faith estimate must be completed and given to the patient within the specified time frames of the No Surprises Act.
 - i. All anticipated charges related to the procedure must be included on the estimate.
 - a. Physician, Physician Assistant, Anesthesia, Laboratory/Pathology, Durable Medical Equipment, etc
3. Insurance. Patients who have insurance coverage.
 - a. Utilizes the fee schedule for the specific payer.
 - b. Facility fee estimate is generated from HST, implant fees will be manually added once printed.
 - c. Estimate for the facility fee and implants only. All other providers/services will complete their own estimates and communicate them to the patient.

B. The benefits obtained in the eligibility and benefit verification process will be used to formulate the estimate for patient responsibility.

1. The estimator in HST will automatically generate the estimated patient responsibility.
2. Load CPT default to pull CPT codes from the scheduled procedure.
3. Run estimate and determine the amount due on DOS. (at least 1/2 due prior to or on DOS)
4. Contact the patient via phone to review their estimated responsibility and payment due prior to or on the DOS.
 - a. Explain the insurance benefits
 - b. Explain the estimated charges, patient responsibility for the scheduled procedure, and amount due.
 - c. Explain that their physician and other providers bill separately from the facility including but not limited to; Surgeon, Physician Assistant, Anesthesiology, Pathology.

- d. Provide payment options and collect their payment during this call or upon check in on their DOS.
 - 5. Document the patient communication and amount due in HST.
 - 6. Upon arrival on the DOS the patient will sign and initial the estimate and make any required payments.
- C. In the event that HST is down estimates will be created manually and entered in once the system is back up.
 - 1. Use the surgical-procedure quote form
 - 2. Enter in benefit information
 - 3. Enter in procedure fee and implant costs
 - 4. Formula: Total cost - remaining deductible x co-insurance % + remaining deductible = total estimated patient responsibility

Approval Signatures

Step Description	Approver	Date



Origination N/A
Last Approved N/A
Last Revised N/A
Next Review 07/2022

Owner Courtney Leslie
Department Business Office
Applicabilities Truckee Surgery Center

Receiving Payments, BO 2204

PURPOSE:

To outline the process of receiving payments.

POLICY:

Payments will be processed and recorded accurately and timely. The Business Office will receive and process patient payments, insurance remits, and non A/R payments. Payments will be recorded on the Daily Deposit Log and sent to billing each day with copies of each payment. The billing company will reconcile the daily deposit log with the bank account. All payments are posted to HST by the billing company.

PROCEDURE:

Patient Payments

A patient may make a payment over the phone, in person, or via mail. Accepted forms of payment are; cash, check, or credit card.

- A. Date of Service (DOS) Payments:
 - 1. Payments made on the DOS for the procedure being performed.
 - 2. Payment amounts are predetermined by the Business Office when the financial counseling phone call is made.
- B. Payments after DOS
 - 1. Payments made after the DOS for remaining balances due.
 - 2. Payments could be for multiple visits.
- C. Processing Payments:

1. Credit Card

- a. Select sale
- b. Enter amount due, enter
- c. Inster/swip card
- d. If a PIN is required the patient will enter that in on the terminal
- e. Patient signs the merchant copy
- f. A customer copy is given to the patient
- g. Write the PT account number, including visit number, on the merchant copy
- h. Record payment on the daily deposit log
- i. Put the receipt in the deposit folder in the Business Office file cabinet
- j. If DOS payment:
 - i. Enter amount paid on DOS in the appointment in HST
 - ii. Reference: CC to indicate credit card payment
- k. If phone, mail, or in person payment not on the DOS:
 - i. Mail/give the patient a receipt
 - ii. Create a note in HST with payment amount, type, and DOS pertaining to

2. Check

- a. Create a payment receipt for the patient. Include PT name, account/visit number, check number, amount, and DOS the payment applies to on receipt.
- b. Write PT account and visit number on the memo line of the check
- c. Record payment on the daily deposit log
- d. Put the check in the deposit folder in the Business Office file cabinet
- e. If DOS payment:
 - i. Enter amount paid on DOS in the appointment in HST
 - ii. Reference: Check with check number
- f. If phone, mail, or in person payment not on the DOS:
 - i. Mail/give the patient a receipt
 - ii. Create a note in HST with payment amount, type, and DOS pertaining to

3. Cash

- a. Create a payment receipt for the patient. Include PT name, account/visit number, check number, amount, and DOS the payment applies to on receipt. Make 2 copies.

- b. Write PT account and visit number on the memo line of the check
- c. Record payment on the daily deposit log
- d. Put the cash along with a copy of the payment receipt in the deposit folder in the Business Office file cabinet
- e. If DOS payment:
 - i. Enter amount paid on DOS in the appointment in HST
 - ii. Reference: Cash
- f. If phone, mail, or in person payment not on the DOS:
 - i. Mail/give the patient a receipt
 - ii. Create a note in HST with payment amount, type, and DOS pertaining to

Insurance Remits

Insurance carriers who are not set up for EFT/ERA will mail remits directly to the Surgery Center.

- A. The Business Office will process checks at a minimum of twice per week
- B. Checks will be deposited via the check scanner in the Business Office
- C. Record each remit on the daily deposit log
- D. A copy of all checks deposited each day will be retained and submitted to billing with the daily deposit log

Virtual Credit Card payments will not be accepted. The billing company will reject the virtual credit card payment and begin the enrollment process for EFT/ERA.

Daily Deposit Log

Payments received will be recorded on the daily deposit log per the posting date to the bank account. Copies of each receipt/check deposited will be attached to the log.

The daily deposit log will include:

- A. Date deposit hit bank account
- B. Patient account number
- C. Amount of payment
- D. Form of payment
- E. A/R and non A/R amounts

The daily deposit log with backup will be uploaded to Sharepoint for the billing company to retrieve.

Non A/R Payments

Occasionally non A/R payments will be recieved. For example, tax refunds. Non A/R payments will be

received and recorded in the same way as A/R payments.

Approval Signatures

Step Description

Approver

Date

DRAFT



Origination N/A
Last Approved N/A
Last Revised N/A
Next Review 07/2022

Owner Courtney Leslie
Department Business Office
Applicabilities Truckee Surgery Center

Credit Balance Refunds & Adjustments, BO-2206

POLICY:

It is the policy of Truckee Surgery Center (TSC) to refund, to the proper payer, credit balances on patient accounts that are created by overpayment, duplicate payments, or multiple patient payments. If the credit is due to patient money, credit balances will be transferred to any patient account with a debit balance. Refunds are sometimes also required on accounts with debit balances when an audit has been done, an insurance company requests to have the payment returned, or an incorrect amount has been paid.

PROCEDURE:

TSC will refund all patient credit balances of \$5.00 or more to the patient/guarantor who has overpaid on his/her account. Commercial insurance over payments will be refunded for credit balances of \$25.00 or more when requested by the insurance company and in accordance with California Insurance Code Section 10133.66. Government and public payer over payments will be refunded for credit balances greater than \$0.00.

The Billing Company will submit a refund request log to the Administrator for review and approval no later than the 15th of each month.

The Administrator will:

- A. Review all accounts on the refund request log.
- B. Determine accounts' eligibility for a refund by further research including all receivable files, bad debt files, or current accounts.
 - 1. Credits involving patient payments will pay off all of the patient's outstanding accounts before refunds are issued, unless the patient specifically directed the payment to be posted to a specific account.
- C. The refund request log will be sent back to the billing company prior to the end of the month.

Issuing the Refund:

- A. Patient refunds will be made within 30 days of overpayment.
- B. Government payers will generally be refunded within 30 days of overpayment, but not later than 60 days.
- C. Refunds to credit cards will be processed by the billing company.
- D. Refund checks, whether personal or insurance, are processed and mailed by the TSC Business Office.
- E. If a refund check is requested to be picked up in person instead of being mailed, sufficient identification and signature of the person picking up the refund check must be obtained before releasing the check.

Small Balance Adjustment

Patient accounts with a balance less than \$5.00 will be written off.

Small balance adjustment journal code will be used

Approval Signatures		
Step Description	Approver	Date
DRAFT		



Origination N/A
Last Approved N/A
Last Revised N/A
Next Review 07/2022

Owner Courtney Leslie
Department Business Office
Applicabilities Truckee Surgery Center

Payment Plans, BO-2202

PURPOSE:

To assist patients in meeting their financial obligations, Truckee Surgery Center (TSC) offers flexible payment plan options to patients.

POLICY:

- A. TSC offers two (2) options for payments plans.
 - 1. An internal payment plan of up to six (6) months with a ninety (90) day payment plan being offered first.
 - a. In certain cases an internal payment plan of up to nine (9) months may be offered with prior approval from the Administrator.
 - 2. A long-term payment plan through HELP Financial.
 - a. HELP Financial plans cost TSC a percentage based upon the duration of the payment plan. Every effort will be made to keep payment plans internal before referring to HELP Financial.
- B. At no time will payment plans be set up automatically. The patient/gaurentor must request each account the wish to have on a payment plan.
- C. Payment plans may be set up on self-pay balances including:
 - 1. Remaining balances after insurance processing
 - 2. Balances for patients without insurance.
 - a. Only if they did not elect to use the prompt pay discount.
 - b. The patient will be required to pay fifty percent (50%) at the time of service and the remaining set up on automatic payments.
- D. The Business Office and the Billing Company can set up payment plans.

- E. Accounts from collection agencies may not be set up on a payment plan, unless it has been determined the account was sent to collections in error.

PROCEDURE:

Internal Payment Plans

- A. May be established for up to six (6) months, ninety (90) day payment plans are to be offered first.
 - 1. Every effort will be made to keep payment plans in house.
- B. Automatic payments are set up through our payment portal.
- C. Multiple visit balances for the same patient can be on one payment plan.
- D. The patient will continue to receive statements from TSC.
- E. The balance will not accrue interest.
- F. Patient balances that are not paid off within the six (6) months may be eligible for collections.
 - 1. Patients will only be sent to collections after review and approval by the Administrator.
- G. Procedure for setting up an internal payment plan:
 - 1. Payment plans are set up through the Elavon merchant services portal, Converge.
 - 2. Once logged in:
 - a. Select the correct terminal in the right hand corner
 - b. Select Recurring on the left hand side then add a new recurring button at the top right
 - c. Enter in the recurring amount
 - d. Payment Type: debit/credit
 - e. Transaction type: recurring
 - f. Enter Type: enter on keyboard
 - g. Select Start Transaction
 - h. Search for the customer and select if in the system. If not you will enter details below.
 - i. Invoice Number: patient account number including the visit number
 - j. Billing Cycle: frequency of charge. Select monthly
 - k. Next Payment Date: enter the next payment date
 - l. Description: enter DOS
 - m. End of Month: not required
 - n. Skip Payment: not required
 - o. Enter in card details

- p. Enter billing address information.
 - q. Enter in an email address for the patient to receive receipts via email.
 - r. Shipping: same as billing address
 - s. Create
3. Advise the patient of the monthly date the payment will be processed and the duration of the payment plan.
 4. Advise patient/guarantor that all future services are payable in the usual manner and will not be automatically added to the patient's current payment plan unless requested.
 5. Add a note to the patient account in HST with date of payment plan, duration, and monthly amount.
 6. If the Business Office sets up the payment plan the Billing Company needs to be notified.

HELP Financial

- A. Truckee Surgery Center partners with HELP Financial in order to provide long-term payment plans for patients who are not able to afford the monthly payment amount of an internal payment plan.
- B. HELP Payment Plan terms:
 1. 1 year (12 months)
 2. 2 years (24 months)
 3. 3 years (36 months)
 4. 4 years (48 months)- Requires Administrator approval
 5. 5 years (60 months)- Requires Administrator approval
 6. 6 years (72 months)- Requires Administrator approval
- C. The patient will receive statements from HELP Financial.
- D. The patient will remit payment to HELP Financial directly.
- E. The balance will not accrue interest.
- F. There are no credit requirements to qualify for HELP Financial.
- G. Account balances must be greater than \$100.00
 1. Balances may be combined to reach a cumulative total of \$100.00

Account balances must be less than \$10,000.
- H. HELP Payment plans are set up at the guarantor level.
 1. Family members may combine accounts on to one HELP Payment Plan at the patient's request.
- I. Patients with balances in Bad Debt must pay all monies prior to setting up a HELP Payment

Plan.

- J. Patients may set up HELP Payment Plans by contacting HELP Financial Directly if they choose to do so.
- K. Patients with previous HELP Payment Plans that have been recoured are not eligible for future HELP Payment Plans.
 - 1. Recourse is defined as: Accounts that have defaulted at HELP Financial and sent back to the Surgery Center due to no payment activity.
 - 2. Recourse accounts from HELP Financial will be sent to collections as soon as the Surgery Center is notified of this status.
 - 3. Recourse HELP accounts will not be reinstated.
- L. The patient must make first payment and sign the contract in order for the payment plan to become active.
 - 1. The patient will be asked for the first payment at the time the contract is signed.
 - 2. A contract will be cancelled when a contract has been signed, but no payment was made on the account ninety (90) days from the signature date.
 - a. The Billing Company or Business Office will make a courtesy call to these patients to obtain first payment, if there is no response within ten (10) days the account(s) will be forwarded to collection agencies. HELP Payment Plan may be reinstated if patient responds within ten (10) days and makes payment.
 - 3. A HELP account will become archived at HELP Financial after 60 days from the payment plan creation date if a contract has not been signed.
 - a. The Billing Company or Business Office will review the archived accounts and attempt to reach out to the patient. Patients will begin to receive statements from the Surgery Center again. HELP Payment Plan may be reinstated if patient signs contract and makes first payment within 10 days.
- M. Procedure for setting up a HELP Payment Plan
 - 1. HELP Payment Plans are set up through HELP Financial's portal
 - 2. After logging in:
 - a. Search for the patient/guarantor. If new to HELP Financial, create a New Contract
 - b. Confirm information on file for patient
 - c. Select terms for the Payment Plan
 - d. Select contract option
 - e. Collect first payment from the patient within HELP portal
 - f. Email the contract for signature if the patient is not in person at the Surgery Center.

3. Advise patient/guarantor that all future services are payable in the usual manner and will not be automatically added to the patient's current payment plan unless requested.
4. Advise patient that future payments need to be paid to HELP Financial directly.
5. Advise the patient that their TSC HELP Financial account is separate from any other facility.
 - a. Tahoe Forest Hospital accounts and Truckee Surgery Center accounts cannot be combined on one payment plan.
6. Add a note to the patient account in HST with date of the account being referred to HELP Financial.
7. If the Business Office sets up the HELP Payment Plan the Billing Company needs to be notified.

Approval Signatures

Step Description	Approver	Date

		<u>FYTD22</u>	<u>Annualized FY22</u>	<u>Budget FY23</u>	
Ordinary Income/Expense					
Income					
	Patient Revenue				
	Private Pay	21,127.60	36,218.74	40,000.00	
	Medbridge (Net Est Collections)	1,018,820.08	1,746,548.71	2,078,000.00	Set For Break Even Net Income. FY22 Projecting Only \$1,373,000 in Collections. Will Have to Collect Add1 \$705k in FY23 For Budget To Work
	Total Patient Revenue	1,039,947.68	1,782,767.45	2,118,000.00	
	Refunds				
	Patient Refund	(6,271.11)	(10,750.47)	(11,000.00)	
	Total Refunds	(6,271.11)	(10,750.47)	(11,000.00)	
	Total Income	1,033,676.57	1,772,016.98	2,107,000.00	
Gross Profit		1,033,676.57	1,772,016.98	2,107,000.00	
Expense					
	Service Fee	-	-	-	
	Purchased Services	25,771.00	44,178.86	42,000.00	Includes Chancellor Consulting Group, Synergy Environmental Svcs, Expenses Paid by TFH
	Bad Debt	56,112.66	96,193.13	114,290.00	Revenue Driven
	Collection Agency Reimbursement	292.58	501.57	600.00	
	General Office				
	Dues and Subscriptions	18,448.56	31,626.10	24,000.00	CalChamber, SiriusXM, ASCA, CASA, iContracts, QuickBooks, MedBridge, Google, Zoom, Job Posting Sites
	Office Supplies	8,006.59	13,725.58	6,000.00	Need to control costs in this category
	Postage and Delivery	1,415.06	2,425.82	2,600.00	FedEx, UPS
	Printing and Reproduction	45.00	77.14	90.00	
	Total General Office	27,915.21	47,854.65	32,690.00	
	Liability Gen'l, Prof Insurance	2,060.05	3,531.51	5,438.53	Paid by TFH
	Licenses and Permits	871.00	1,493.14	1,000.00	Board of Pharmacy, CDPH Tissue Bank Fund
	Linen	26,611.13	45,619.08	56,907.18	Revenue Driven
	Medical Supplies Total				
	Gas Medical	8,306.33	14,239.42	17,762.86	Revenue Driven
	Implants	123,138.70	211,094.91	263,328.78	Revenue Driven
	Instrument Expense	4,749.04	8,141.21	9,000.00	
	Medical Supplies	24,172.46	41,438.50	51,692.15	Revenue Driven
	Pharmacy	23,422.03	40,152.05	50,087.38	Revenue Driven
	Patient Nutrition	992.40	1,701.26	2,021.16	Revenue Driven
	Total Medical Supplies Total	184,780.96	316,767.36	393,892.34	
	Other Expenses				
	Bank Charges	312.68	536.02	600.00	
	Educational	2,252.66	3,861.70	3,600.00	Seminars, Mandatory Continuing Education for Clinical Staff
	Equipment Rental/Lease	-	-	-	
	Interest Expense	122.51	210.02	227.00	US Bank Copier Lease
	Meals & Entertainment	577.42	989.86	600.00	
	Merchant Fees	1,978.92	3,392.43	3,600.00	
	Total Other Expenses	5,244.19	8,990.04	8,627.00	
	Payroll Expenses				
	Health Insurance Total				
	Health	52,378.56	89,791.82	90,000.00	Blue Shield of California - See Benefits Tab
	Dental	3,493.24	5,988.41	6,000.00	Principal Financial Group - See Benefits Tab
	Vision	594.70	1,019.49	900.00	Small Business Benefit Plant Trust - See Benefits Tab
	Total Health Insurance Total	56,466.50	96,799.71	96,900.00	
	Employee Benefit	1,877.79	3,219.07	2,400.00	Includes TFH Child Care Discount
	Payroll Taxes	35,069.16	60,118.56	62,019.24	Percent of Total Wages. August included back payment on prior year payroll taxes due
	Retirement Contribution	4,243.08	7,273.85	7,200.00	FY21 TSC Monthly Match = \$527.17
	Service Fee	200.00	342.86	400.00	Mass Mutual - \$100 quarterly
	Wages	384,397.08	658,966.42	679,800.00	See Salaries Tab
	Work Comp	1,144.44	1,961.90	5,635.34	December included WC Audit refund from prior FY
	Payroll Expenses - Other	1,790.37	3,069.21	3,200.00	Includes QuickBooks Payroll Fees
	Total Payroll Expenses	522,582.42	895,855.58	857,554.58	
	Professional Fees				
	Consulting	2,000.00	3,428.57	2,000.00	Daniel Ohan. \$500 per quarter
	Pension Fees	860.00	1,474.29	1,650.00	NH Hicks-Includes annual contract and fees for 5500 extension if needed
	Transcription Services	2,263.48	3,880.25	4,840.39	Revenue Driven
	Total Professional Fees	5,123.48	8,783.11	8,490.39	
	Rent & CAM	100,014.00	171,452.57	174,704.23	Rent increases each December
	Repairs				
	Instrument Refurbishing	953.50	1,634.57	1,800.00	
	Instrument Repairs	3,072.09	5,266.44	5,800.00	
	Maintenance-Preventative	12,479.55	21,393.51	21,600.00	WAGS, Emcor, Cashman Equipment, Hologic, Sutter Health, Medical Gas Diagnostica
	Total Repairs	16,505.14	28,294.53	29,200.00	
	Taxes				
	Property	16,532.49	28,341.41	28,000.00	Gateway East, Nv County Personal Property Tax
	State	6,035.70	10,346.91	8,000.00	FTB
	Taxes - Other	1,869.50	3,204.86	2,400.00	IRS
	Total Taxes	24,437.69	41,893.18	38,400.00	
	Utilities				
	Alarm Monitor	665.36	1,140.62	900.00	California Security
	Cable	420.84	721.44	744.00	Suddenlink
	Gas and Electric	22,807.04	39,097.78	40,479.00	Southwest Gas, Truckee Donner PUD
	Medical Waste	-	-	-	
	Telephone	3,374.50	5,784.86	6,000.00	AT&T
	Total Utilities	27,267.74	46,744.70	48,123.00	

	Depreciation Expense	18,130.07	31,080.12	33,600.00
	Total Expense	<u>1,043,719.32</u>	<u>1,789,233.12</u>	<u>1,845,517.26</u>
	Net Ordinary Income	(10,042.75)	(17,216.14)	261,482.74
	Other Income/Expense			
	Other Income			
	Other Income	150.00	257.14	-
	Total Other Income	<u>150.00</u>	<u>257.14</u>	<u>-</u>
	Other Expense			
	Amortization Expense	152,224.03	260,955.48	260,955.48
	Total Other Expense	<u>152,224.03</u>	<u>260,955.48</u>	<u>260,955.48</u>
	Net Other Income	(152,074.03)	(260,698.34)	(260,955.48)
	Net Income	<u>(162,116.78)</u>	<u>(277,914.48)</u>	<u>527.26</u>

Truckee Surgery Center LLC

Balance Sheet

06/07/22

As of January 31, 2022

Accrual Basis

	Jan 31, 22	Jan 31, 21	% Change
ASSETS			
Current Assets			
Checking/Savings			
Bank of the West	135,617.50	28,819.89	370.6%
Petty Cash	498.49	176.10	183.1%
Total Checking/Savings	136,115.99	28,995.99	369.4%
Accounts Receivable			
Accounts Receivable			
Allowance for Doubtful Accounts	-175,738.17	-89,456.94	-96.5%
Accounts Receivable - Other	558,709.50	282,557.69	97.7%
Total Accounts Receivable	382,971.33	193,100.75	98.3%
Total Accounts Receivable	382,971.33	193,100.75	98.3%
Other Current Assets			
Prepaid Expense			
Preventative Maint	1,966.69	2,191.66	-10.3%
Worker's Comp	2,134.56	2,123.75	0.5%
Prepaid Expense - Other	562.26	1,950.67	-71.2%
Total Prepaid Expense	4,663.51	6,266.08	-25.6%
Total Other Current Assets	4,663.51	6,266.08	-25.6%
Total Current Assets	523,750.83	228,362.82	129.4%
Fixed Assets			
Computer/Office Equipment	7,051.91	7,051.91	0.0%
Furniture & Fixtures	14,087.00	14,087.00	0.0%
Instruments	27,805.38	27,805.38	0.0%
Leasehold Improvements	1,003,817.04	991,765.18	1.2%
Machinery & Equipment	138,316.27	87,129.12	58.8%
Surgical & Medical Equipment	215,098.69	215,098.69	0.0%
Accumulated Depreciation	-603,627.00	-567,105.70	-6.4%
Goodwill	3,914,333.00	3,914,333.00	0.0%
Accumulated Amortization	-2,892,257.63	-2,631,302.15	-9.9%
Total Fixed Assets	1,824,624.66	2,058,862.43	-11.4%
Other Assets			
Rent Deposit	20,256.00	20,256.00	0.0%
Total Other Assets	20,256.00	20,256.00	0.0%
TOTAL ASSETS	2,368,631.49	2,307,481.25	2.7%
LIABILITIES & EQUITY			
Liabilities			
Current Liabilities			
Accounts Payable			
Accounts Payable	702,803.83	354,464.97	98.3%
Total Accounts Payable	702,803.83	354,464.97	98.3%
Credit Cards			
BankCard	4,974.84	1,087.88	357.3%
Total Credit Cards	4,974.84	1,087.88	357.3%

Truckee Surgery Center LLC

Balance Sheet

06/07/22

As of February 28, 2022

Accrual Basis

	Feb 28, 22	Feb 28, 21	% Change
ASSETS			
Current Assets			
Checking/Savings			
Bank of the West	120,170.86	31,237.64	284.7%
Petty Cash	498.49	176.10	183.1%
Total Checking/Savings	120,669.35	31,413.74	284.1%
Accounts Receivable			
Accounts Receivable			
Allowance for Doubtful Accounts	-122,004.66	-88,558.91	-37.8%
Accounts Receivable - Other	523,126.18	330,535.12	58.3%
Total Accounts Receivable	401,121.52	241,976.21	65.8%
Total Accounts Receivable	401,121.52	241,976.21	65.8%
Other Current Assets			
Prepaid Expense			
Preventative Maint	2,763.36	1,808.33	52.8%
Worker's Comp	1,707.64	1,699.00	0.5%
Prepaid Expense - Other	389.18	1,728.00	-77.5%
Total Prepaid Expense	4,860.18	5,235.33	-7.2%
Total Other Current Assets	4,860.18	5,235.33	-7.2%
Total Current Assets	526,651.05	278,625.28	89.0%
Fixed Assets			
Computer/Office Equipment	7,051.91	7,051.91	0.0%
Furniture & Fixtures	14,087.00	14,087.00	0.0%
Instruments	27,805.38	27,805.38	0.0%
Leasehold Improvements	1,003,817.04	991,765.18	1.2%
Machinery & Equipment	138,316.27	87,129.12	58.8%
Surgical & Medical Equipment	215,098.69	215,098.69	0.0%
Accumulated Depreciation	-606,217.01	-570,198.75	-6.3%
Goodwill	3,914,333.00	3,914,333.00	0.0%
Accumulated Amortization	-2,914,003.92	-2,653,048.44	-9.8%
Total Fixed Assets	1,800,288.36	2,034,023.09	-11.5%
Other Assets			
Rent Deposit	20,256.00	20,256.00	0.0%
Total Other Assets	20,256.00	20,256.00	0.0%
TOTAL ASSETS	2,347,195.41	2,332,904.37	0.6%
LIABILITIES & EQUITY			
Liabilities			
Current Liabilities			
Accounts Payable			
Accounts Payable	731,967.17	417,900.29	75.2%
Total Accounts Payable	731,967.17	417,900.29	75.2%
Credit Cards			
BankCard	169.69	3,232.27	-94.8%
Total Credit Cards	169.69	3,232.27	-94.8%

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Truckee Surgery Center LLC

Balance Sheet

As of February 28, 2022

06/07/22

Accrual Basis

	Feb 28, 22	Feb 28, 21	% Change
Other Current Liabilities			
US Bank Equipment Lease	3,889.66	5,234.10	-25.7%
Due to TFH	1,330,720.03	1,143,668.17	16.4%
Franchise Tax Payable	-4,100.00	-4,100.00	0.0%
Billing Fee Accrued	-107,795.03	-37,907.89	-184.4%
Compensated Absenses	41,006.12	23,836.89	72.0%
Payroll Liabilities	8,124.01	5,839.02	39.1%
Pension Payable	2,266.30	1,491.22	52.0%
Total Other Current Liabilities	1,274,111.09	1,138,061.51	12.0%
Total Current Liabilities	2,006,247.95	1,559,194.07	28.7%
Total Liabilities	2,006,247.95	1,559,194.07	28.7%
Equity			
Tahoe Forest Hospital			
Tahoe Forest Hospital Equity	2,986,307.79	2,986,307.79	0.0%
Total Tahoe Forest Hospital	2,986,307.79	2,986,307.79	0.0%
Truckee Surgery Center Inc			
Truckee Surgery Cntr Inc Equity	604,650.70	604,650.70	0.0%
Total Truckee Surgery Center Inc	604,650.70	604,650.70	0.0%
Retained Earnings	-3,015,526.02	-2,501,841.71	-20.5%
Net Income	-234,485.01	-315,406.48	25.7%
Total Equity	340,947.46	773,710.30	-55.9%
TOTAL LIABILITIES & EQUITY	2,347,195.41	2,332,904.37	0.6%

Truckee Surgery Center LLC

Balance Sheet

As of March 31, 2022

06/07/22

Accrual Basis

	Mar 31, 22	Mar 31, 21	% Change
ASSETS			
Current Assets			
Checking/Savings			
Bank of the West	106,572.63	78,215.90	36.3%
Petty Cash	498.49	176.10	183.1%
Total Checking/Savings	107,071.12	78,392.00	36.6%
Accounts Receivable			
Accounts Receivable			
Allowance for Doubtful Accounts	-121,518.08	-87,454.78	-39.0%
Accounts Receivable - Other	453,689.48	340,728.59	33.2%
Total Accounts Receivable	332,171.40	253,273.81	31.2%
Total Accounts Receivable	332,171.40	253,273.81	31.2%
Other Current Assets			
Prepaid Expense			
Preventative Maint	1,996.28	1,425.00	40.1%
Worker's Comp	1,294.81	1,274.25	1.6%
Prepaid Expense - Other	216.10	1,505.33	-85.6%
Total Prepaid Expense	3,507.19	4,204.58	-16.6%
Total Other Current Assets	3,507.19	4,204.58	-16.6%
Total Current Assets	442,749.71	335,870.39	31.8%
Fixed Assets			
Computer/Office Equipment	7,051.91	7,051.91	0.0%
Furniture & Fixtures	14,087.00	14,087.00	0.0%
Instruments	27,805.38	27,805.38	0.0%
Leasehold Improvements	1,003,817.04	991,765.18	1.2%
Machinery & Equipment	138,316.27	87,129.12	58.8%
Surgical & Medical Equipment	215,098.69	215,098.69	0.0%
Accumulated Depreciation	-608,807.02	-573,291.80	-6.2%
Goodwill	3,914,333.00	3,914,333.00	0.0%
Accumulated Amortization	-2,935,750.21	-2,674,794.73	-9.8%
Total Fixed Assets	1,775,952.06	2,009,183.75	-11.6%
Other Assets			
Rent Deposit	20,256.00	20,256.00	0.0%
Total Other Assets	20,256.00	20,256.00	0.0%
TOTAL ASSETS	2,238,957.77	2,365,310.14	-5.3%
LIABILITIES & EQUITY			
Liabilities			
Current Liabilities			
Accounts Payable			
Accounts Payable	770,531.97	489,864.06	57.3%
Total Accounts Payable	770,531.97	489,864.06	57.3%
Credit Cards			
BankCard	1,475.67	2,049.75	-28.0%
Total Credit Cards	1,475.67	2,049.75	-28.0%

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Truckee Surgery Center LLC

Balance Sheet

As of March 31, 2022

06/07/22

Accrual Basis

	Mar 31, 22	Mar 31, 21	% Change
Other Current Liabilities			
US Bank Equipment Lease	3,889.66	5,126.26	-24.1%
Due to TFH	1,330,720.03	1,218,668.17	9.2%
Franchise Tax Payable	-4,100.00	-4,100.00	0.0%
Billing Fee Accrued	-115,013.28	-41,535.65	-176.9%
Compensated Absenses	38,131.14	15,130.71	152.0%
Payroll Liabilities	8,635.48	6,395.24	35.0%
Pension Payable	4,617.92	702.24	557.6%
Total Other Current Liabilities	1,266,880.95	1,200,386.97	5.5%
Total Current Liabilities	2,038,888.59	1,692,300.78	20.5%
Total Liabilities	2,038,888.59	1,692,300.78	20.5%
Equity			
Tahoe Forest Hospital			
Tahoe Forest Hospital Equity	2,986,307.79	2,986,307.79	0.0%
Total Tahoe Forest Hospital	2,986,307.79	2,986,307.79	0.0%
Truckee Surgery Center Inc			
Truckee Surgery Cntr Inc Equity	604,650.70	604,650.70	0.0%
Total Truckee Surgery Center Inc	604,650.70	604,650.70	0.0%
Retained Earnings	-3,015,526.02	-2,501,841.71	-20.5%
Net Income	-375,363.29	-416,107.42	9.8%
Total Equity	200,069.18	673,009.36	-70.3%
TOTAL LIABILITIES & EQUITY	2,238,957.77	2,365,310.14	-5.3%

Truckee Surgery Center LLC
Profit & Loss YTD Comparison
January 2022

06/07/22

Accrual Basis

	Jan 22	Jan 21
Ordinary Income/Expense		
Income		
Patient Revenue		
Private Pay	0.00	7,055.88
Medbridge	190,463.01	70,040.39
Total Patient Revenue	190,463.01	77,096.27
Total Income	190,463.01	77,096.27
Gross Profit	190,463.01	77,096.27
Expense		
Purchased Services	12,723.00	0.00
Bad Debt	0.00	-2,034.31
General Office		
Dues and Subscriptions	726.44	3,034.23
Office Supplies	1,563.63	2,757.68
Postage and Delivery	66.43	641.48
Total General Office	2,356.50	6,433.39
Liability Gen'l, Prof Insurance	412.01	896.59
Linen	3,369.15	2,772.07
Medical Supplies Total		
Gas Medical	903.28	520.24
Implants	14,939.18	31,320.65
Medical Supplies	2,952.08	4,947.74
Pharmacy	383.87	6,001.36
Patient Nutrition	191.28	85.04
Total Medical Supplies Total	19,369.69	42,875.03
Other Expenses		
Bank Charges	13.00	13.00
Educational	249.29	1,302.97
Equipment Rental/Lease	0.00	94.62
Interest Expense	28.47	0.00
Merchant Fees	146.87	183.46
Total Other Expenses	437.63	1,594.05
Payroll Expenses		
Health Insurance Total		
Health	9,077.08	10,784.37
Dental	652.20	182.87
Vision	82.10	128.70
Total Health Insurance Total	9,811.38	11,095.94
Employee Benefit	290.00	-30.88
Payroll Taxes	6,089.60	3,502.57
Retirement Contribution	904.72	468.52
Wages	47,096.89	29,854.62
Work Comp	426.92	424.75
Payroll Expenses - Other	199.25	169.75
Total Payroll Expenses	64,818.76	45,485.27
Professional Fees		
Transcription Services	220.60	157.75
Professional Fees - Other	0.00	100.00
Total Professional Fees	220.60	257.75
Rent & CAM	14,432.40	13,723.44

Truckee Surgery Center LLC
Profit & Loss YTD Comparison
January 2022

	Jan 22	Jan 21
Repairs		
Maintenance-Preventative	1,509.58	3,751.45
Total Repairs	1,509.58	3,751.45
Taxes		
Property	1,710.32	1,710.32
Total Taxes	1,710.32	1,710.32
Utilities		
Alarm Monitor	74.62	144.90
Cable	52.57	37.52
Gas and Electric	5,984.81	3,486.67
Telephone	482.04	475.84
Total Utilities	6,594.04	4,144.93
Depreciation Expense	2,590.01	3,093.05
Total Expense	130,543.69	124,703.03
Net Ordinary Income	59,919.32	-47,606.76
Other Income/Expense		
Other Expense		
Amortization Expense	21,746.29	21,746.29
Total Other Expense	21,746.29	21,746.29
Net Other Income	-21,746.29	-21,746.29
Net Income	38,173.03	-69,353.05

Truckee Surgery Center LLC
Profit & Loss YTD Comparison
January 2022

06/07/22

Accrual Basis

	<u>% Change</u>
Ordinary Income/Expense	
Income	
Patient Revenue	
Private Pay	-100.0%
Medbridge	171.9%
Total Patient Revenue	147.1%
Total Income	147.1%
Gross Profit	147.1%
Expense	
Purchased Services	100.0%
Bad Debt	100.0%
General Office	
Dues and Subscriptions	-76.1%
Office Supplies	-43.3%
Postage and Delivery	-89.6%
Total General Office	-63.4%
Liability Gen'l, Prof Insurance	-54.1%
Linen	21.5%
Medical Supplies Total	
Gas Medical	73.6%
Implants	-52.3%
Medical Supplies	-40.3%
Pharmacy	-93.6%
Patient Nutrition	124.9%
Total Medical Supplies Total	-54.8%
Other Expenses	
Bank Charges	0.0%
Educational	-80.9%
Equipment Rental/Lease	-100.0%
Interest Expense	100.0%
Merchant Fees	-19.9%
Total Other Expenses	-72.6%
Payroll Expenses	
Health Insurance Total	
Health	-15.8%
Dental	256.7%
Vision	-36.2%
Total Health Insurance Total	-11.6%
Employee Benefit	1,039.1%
Payroll Taxes	73.9%
Retirement Contribution	93.1%
Wages	57.8%
Work Comp	0.5%
Payroll Expenses - Other	17.4%
Total Payroll Expenses	42.5%
Professional Fees	
Transcription Services	39.8%
Professional Fees - Other	-100.0%
Total Professional Fees	-14.4%
Rent & CAM	5.2%

Truckee Surgery Center LLC
Profit & Loss YTD Comparison
January 2022

	<u>% Change</u>
Repairs	
Maintenance-Preventative	-59.8%
Total Repairs	-59.8%
Taxes	
Property	0.0%
Total Taxes	0.0%
Utilities	
Alarm Monitor	-48.5%
Cable	40.1%
Gas and Electric	71.7%
Telephone	1.3%
Total Utilities	59.1%
Depreciation Expense	-16.3%
Total Expense	4.7%
Net Ordinary Income	225.9%
Other Income/Expense	
Other Expense	
Amortization Expense	0.0%
Total Other Expense	0.0%
Net Other Income	0.0%
Net Income	155.0%

Truckee Surgery Center LLC
Profit & Loss YTD Comparison
February 2022

06/07/22

Accrual Basis

	Feb 22	Feb 21
Ordinary Income/Expense		
Income		
Patient Revenue		
Private Pay	0.00	839.00
Medbridge	66,327.03	124,327.68
Total Patient Revenue	66,327.03	125,166.68
Total Income	66,327.03	125,166.68
Gross Profit	66,327.03	125,166.68
Expense		
Purchased Services	5,722.71	888.05
Bad Debt	-53,733.51	-898.03
General Office		
Dues and Subscriptions	1,159.14	1,321.21
Office Supplies	1,195.04	3,767.24
Postage and Delivery	127.29	513.10
Total General Office	2,481.47	5,601.55
Liability Gen'l, Prof Insurance	412.01	896.59
Licenses and Permits	180.00	0.00
Linen	3,080.56	2,815.84
Medical Supplies Total		
Gas Medical	1,250.16	1,630.92
Implants	20,402.44	39,620.32
Medical Supplies	5,745.08	13,012.17
Pharmacy	1,224.16	789.30
Patient Nutrition	0.00	283.62
Total Medical Supplies Total	28,621.84	55,336.33
Other Expenses		
Bank Charges	102.68	13.00
Educational	700.00	0.00
Equipment Rental/Lease	0.00	-21.28
Interest Expense	-194.84	74.53
Meals & Entertainment	183.02	0.00
Merchant Fees	168.39	198.83
Total Other Expenses	959.25	265.08
Payroll Expenses		
Health Insurance Total		
Health	7,471.13	5,216.11
Dental	534.27	298.41
Vision	76.50	77.10
Total Health Insurance Total	8,081.90	5,591.62
Employee Benefit	1,014.00	265.99
Payroll Taxes	5,848.08	3,523.27
Retirement Contribution	961.26	491.53
Wages	60,982.26	33,724.53
Work Comp	426.92	424.75
Payroll Expenses - Other	40.25	85.00
Total Payroll Expenses	77,354.67	44,106.69
Professional Fees		
Consulting	500.00	0.00
Transcription Services	660.03	201.36
Total Professional Fees	1,160.03	201.36
Rent & CAM	14,432.40	13,723.44

Truckee Surgery Center LLC
Profit & Loss YTD Comparison
February 2022

	Feb 22	Feb 21
Repairs		
Maintenance-Preventative	767.08	8,588.08
Total Repairs	767.08	8,588.08
Taxes		
Property	1,710.32	1,710.32
Total Taxes	1,710.32	1,710.32
Utilities		
Alarm Monitor	74.62	72.45
Gas and Electric	3,269.04	914.51
Telephone	483.78	476.33
Total Utilities	3,827.44	1,463.29
Depreciation Expense	2,590.01	3,093.05
Total Expense	89,566.28	137,791.64
Net Ordinary Income	-23,239.25	-12,624.96
Other Income/Expense		
Other Expense		
Amortization Expense	21,746.29	21,746.29
Total Other Expense	21,746.29	21,746.29
Net Other Income	-21,746.29	-21,746.29
Net Income	-44,985.54	-34,371.25

Truckee Surgery Center LLC
Profit & Loss YTD Comparison
February 2022

	<u>% Change</u>
Ordinary Income/Expense	
Income	
Patient Revenue	
Private Pay	-100.0%
Medbridge	-46.7%
Total Patient Revenue	-47.0%
Total Income	-47.0%
Gross Profit	-47.0%
Expense	
Purchased Services	544.4%
Bad Debt	-5,883.5%
General Office	
Dues and Subscriptions	-12.3%
Office Supplies	-68.3%
Postage and Delivery	-75.2%
Total General Office	-55.7%
Liability Gen'l, Prof Insurance	-54.1%
Licenses and Permits	100.0%
Linen	9.4%
Medical Supplies Total	
Gas Medical	-23.4%
Implants	-48.5%
Medical Supplies	-55.9%
Pharmacy	55.1%
Patient Nutrition	-100.0%
Total Medical Supplies Total	-48.3%
Other Expenses	
Bank Charges	689.9%
Educational	100.0%
Equipment Rental/Lease	100.0%
Interest Expense	-361.4%
Meals & Entertainment	100.0%
Merchant Fees	-15.3%
Total Other Expenses	261.9%
Payroll Expenses	
Health Insurance Total	
Health	43.2%
Dental	79.0%
Vision	-0.8%
Total Health Insurance Total	44.5%
Employee Benefit	281.2%
Payroll Taxes	66.0%
Retirement Contribution	95.6%
Wages	80.8%
Work Comp	0.5%
Payroll Expenses - Other	-52.7%
Total Payroll Expenses	75.4%
Professional Fees	
Consulting	100.0%
Transcription Services	227.8%
Total Professional Fees	476.1%
Rent & CAM	5.2%

Truckee Surgery Center LLC
Profit & Loss YTD Comparison
February 2022

	<u>% Change</u>
Repairs	
Maintenance-Preventative	-91.1%
Total Repairs	-91.1%
Taxes	
Property	0.0%
Total Taxes	0.0%
Utilities	
Alarm Monitor	3.0%
Gas and Electric	257.5%
Telephone	1.6%
Total Utilities	161.6%
Depreciation Expense	-16.3%
Total Expense	-35.0%
Net Ordinary Income	-84.1%
Other Income/Expense	
Other Expense	
Amortization Expense	0.0%
Total Other Expense	0.0%
Net Other Income	0.0%
Net Income	-30.9%

Truckee Surgery Center LLC
Profit & Loss YTD Comparison
March 2022

	Mar 22	Mar 21
Ordinary Income/Expense		
Income		
Patient Revenue		
Private Pay	17,851.02	2,354.10
Medbridge	62,775.50	94,149.97
Total Patient Revenue	80,626.52	96,504.07
Refunds		
Insurance Refund	-588.85	0.00
Patient Refund	0.00	-316.50
Total Refunds	-588.85	-316.50
Total Income	80,037.67	96,187.57
Gross Profit	80,037.67	96,187.57
Expense		
Purchased Services	25,887.50	857.25
Bad Debt	-486.58	-1,104.13
General Office		
Document Destruction	655.18	0.00
Dues and Subscriptions	628.37	1,850.01
Office Supplies	-11,073.65	8,398.84
Postage and Delivery	0.00	695.34
Printing and Reproduction	155.03	0.00
General Office - Other	961.22	0.00
Total General Office	-8,673.85	10,944.19
Liability Gen'l, Prof Insurance	412.01	896.59
Licenses and Permits	113.00	113.00
Linen	3,946.55	3,533.12
Medical Supplies Total		
Gas Medical	1,387.28	570.84
Implants	15,263.12	52,270.58
Medical Supplies	31,949.39	13,983.18
Pharmacy	4,746.40	3,615.20
Patient Nutrition	97.74	167.27
Total Medical Supplies Total	53,443.93	70,607.07
Other Expenses		
Bank Charges	13.00	108.57
Cleaning Supplies	147.13	0.00
Educational	1,206.00	399.99
Equipment Rental/Lease	12,300.00	36.56
Interest Expense	0.00	36.16
Meals & Entertainment	158.80	0.00
Merchant Fees	805.95	287.29
Total Other Expenses	14,630.88	868.57
Payroll Expenses		
Health Insurance Total		
Health	7,471.13	7,508.83
Dental	534.27	298.41
Vision	76.50	96.70
Total Health Insurance Total	8,081.90	7,903.94

Truckee Surgery Center LLC
Profit & Loss YTD Comparison
March 2022

	Mar 22	Mar 21
Employee Benefit	-2,442.82	100.00
Payroll Taxes	5,481.00	4,582.26
Retirement Contribution	982.71	409.53
Service Fee	100.00	100.00
Wages	59,368.44	40,486.19
Work Comp	412.83	424.75
Payroll Expenses - Other	2,699.25	465.25
Total Payroll Expenses	74,683.31	54,471.92
Professional Fees		
Transcription Services	711.16	361.91
Total Professional Fees	711.16	361.91
Rent & CAM	14,432.40	14,229.84
Repairs		
Instrument Repairs	0.00	1,615.00
Maintenance-Preventative	3,127.08	4,395.83
Total Repairs	3,127.08	6,010.83
Taxes		
Property	1,710.32	1,710.32
State	3,133.07	-2,633.19
Taxes - Other	3,719.84	4,729.08
Total Taxes	8,563.23	3,806.21
Utilities		
Alarm Monitor	74.62	72.45
Cable	120.24	188.84
Gas and Electric	5,110.20	5,715.18
Telephone	483.97	476.33
Total Utilities	5,789.03	6,452.80
Depreciation Expense	2,590.01	3,093.05
Total Expense	199,169.66	175,142.22
Net Ordinary Income	-119,131.99	-78,954.65
Other Income/Expense		
Other Expense		
Amortization Expense	21,746.29	21,746.29
Total Other Expense	21,746.29	21,746.29
Net Other Income	-21,746.29	-21,746.29
Net Income	-140,878.28	-100,700.94

Truckee Surgery Center LLC
Profit & Loss YTD Comparison
March 2022

	% Change
Ordinary Income/Expense	
Income	
Patient Revenue	
Private Pay	658.3%
Medbridge	-33.3%
Total Patient Revenue	-16.5%
Refunds	
Insurance Refund	-100.0%
Patient Refund	100.0%
Total Refunds	-86.1%
Total Income	-16.8%
Gross Profit	-16.8%
Expense	
Purchased Services	2,919.8%
Bad Debt	55.9%
General Office	
Document Destruction	100.0%
Dues and Subscriptions	-66.0%
Office Supplies	-231.9%
Postage and Delivery	-100.0%
Printing and Reproduction	100.0%
General Office - Other	100.0%
Total General Office	-179.3%
Liability Gen'l, Prof Insurance	-54.1%
Licenses and Permits	0.0%
Linen	11.7%
Medical Supplies Total	
Gas Medical	143.0%
Implants	-70.8%
Medical Supplies	128.5%
Pharmacy	31.3%
Patient Nutrition	-41.6%
Total Medical Supplies Total	-24.3%
Other Expenses	
Bank Charges	-88.0%
Cleaning Supplies	100.0%
Educational	201.5%
Equipment Rental/Lease	33,543.3%
Interest Expense	-100.0%
Meals & Entertainment	100.0%
Merchant Fees	180.5%
Total Other Expenses	1,584.5%
Payroll Expenses	
Health Insurance Total	
Health	-0.5%
Dental	79.0%
Vision	-20.9%
Total Health Insurance Total	2.3%

Truckee Surgery Center LLC
Profit & Loss YTD Comparison
March 2022

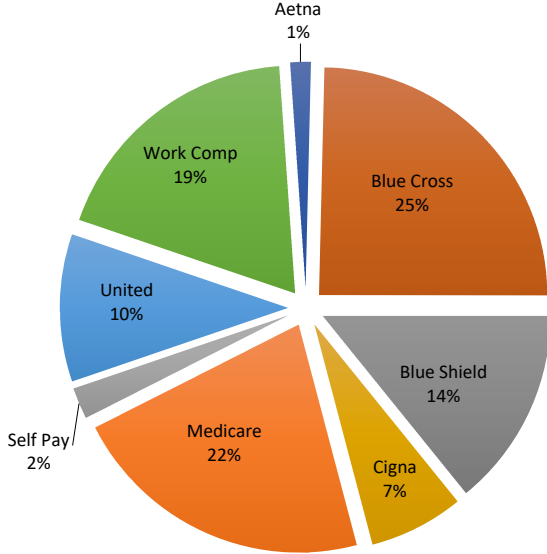
	% Change
Employee Benefit	-2,542.8%
Payroll Taxes	19.6%
Retirement Contribution	140.0%
Service Fee	0.0%
Wages	46.6%
Work Comp	-2.8%
Payroll Expenses - Other	480.2%
Total Payroll Expenses	37.1%
Professional Fees	
Transcription Services	96.5%
Total Professional Fees	96.5%
Rent & CAM	1.4%
Repairs	
Instrument Repairs	-100.0%
Maintenance-Preventative	-28.9%
Total Repairs	-48.0%
Taxes	
Property	0.0%
State	219.0%
Taxes - Other	-21.3%
Total Taxes	125.0%
Utilities	
Alarm Monitor	3.0%
Cable	-36.3%
Gas and Electric	-10.6%
Telephone	1.6%
Total Utilities	-10.3%
Depreciation Expense	-16.3%
Total Expense	13.7%
Net Ordinary Income	-50.9%
Other Income/Expense	
Other Expense	
Amortization Expense	0.0%
Total Other Expense	0.0%
Net Other Income	0.0%
Net Income	-39.9%

Cases and Collections by Payer

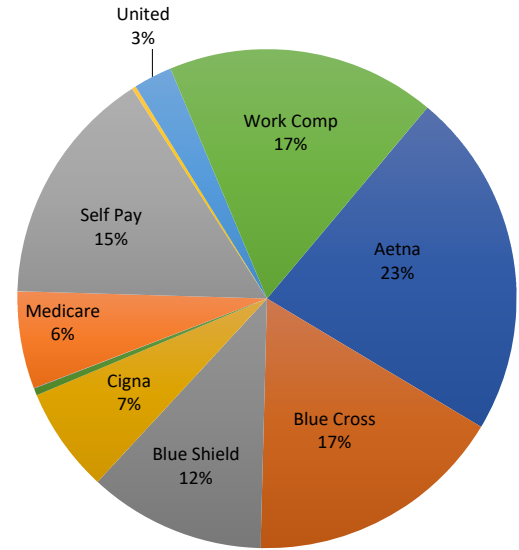
Payer	January 2022			February 2022			March 2022			1st Quarter 2022		
	Cases	Collections	% Total	Cases	Collections	% Total	Cases	Collections	% Total	Cases	Collections	% Total
Aetna	0	\$61,348.28	53.97%	0	\$18,194.19	17.09%	2	\$10,560.00	5.84%	2	\$90,102.47	22.5%
Blue Cross	5	\$16,710.92	14.70%	12	\$16,870.97	15.85%	16	\$33,850.75	18.72%	33	\$67,432.64	16.8%
Blue Shield	3	\$2,976.97	2.62%	12	\$14,964.50	14.06%	4	\$28,053.10	15.52%	19	\$45,994.57	11.5%
Cigna	2	\$4,381.74	3.85%	3	\$0.00	0.00%	4	\$22,884.15	12.66%	9	\$27,265.89	6.8%
Collections	0	\$0.00	0.00%	0	\$0.00	0.00%	0	\$0.00	0.00%	0	\$0.00	0.00%
Commercial	0	\$1,203.38	1.06%	0	\$0.00	0.00%	0	\$640.62	0.35%	0	\$1,844.00	0.5%
Healthnet	0	\$95.81	0.08%	0	\$0.00	0.00%	0	\$0.00	0.00%	0	\$95.81	0.0%
Medicare	11	\$6,589.93	5.80%	12	\$9,617.16	9.03%	6	\$9,127.59	5.05%	29	\$25,334.68	6.3%
Self Pay	1	\$8,162.96	7.18%	0	\$21,935.97	20.61%	2	\$31,731.79	17.55%	3	\$61,830.72	15.4%
Tricare	0	\$0.00	0.00%	0	\$301.87	0.28%	0	\$816.67	0.45%	0	\$1,118.54	0.3%
United	1	\$377.14	0.33%	5	\$95.81	0.09%	8	\$9,552.98	5.28%	14	\$10,025.93	2.5%
Work Comp	7	\$11,831.65	10.41%	3	\$24,466.72	22.98%	15	\$33,563.55	18.57%	25	\$69,861.92	17.4%
Painblocks	0	\$0.00	0.00%	0	\$0.00	0.00%	0	\$0.00	0.00%	0	\$0.00	0.0%
Totals	30	\$113,678.78		47	\$106,447.19		57	\$180,781.20		134	\$400,907.17	

Cases by Payer

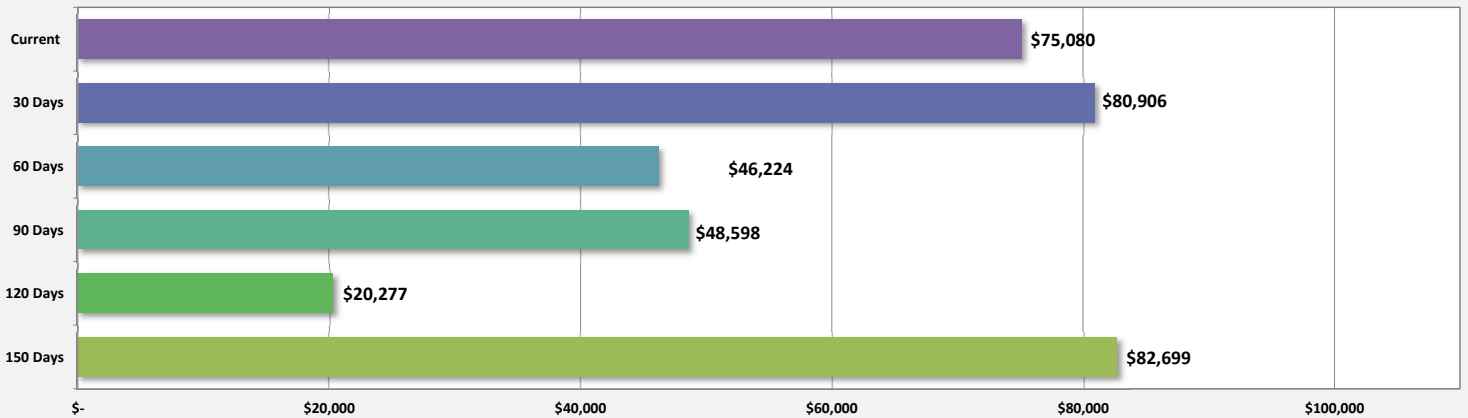
- Aetna
- Blue Cross
- Blue Shield
- Cigna
- Collections
- Commercial
- Healthnet
- Medicare
- Self Pay
- Tricare
- United
- Work Comp



Collections by Payer



Accounts Receivable Aging





Truckee Surgery Center

Monthly Comparison & Quarterly Totals
As of March 31, 2022

Cases and Revenue by Physician

Physician	4th Quarter 2021					1st Quarter 2022				
	Cases	% Total	Net Revenue	% Total	Rev/Case	Cases	% Total	Net Revenue	% Total	Rev/Case
Condon	2	1.5%	\$ 5,981.02	1.5%	\$2,990.51	3	2.2%	\$ 4,916.36	1.2%	\$1,638.79
Dodd	26	19.4%	\$ 96,536.60	24.4%	\$3,712.95	21	15.7%	\$ 75,132.75	19.0%	\$3,577.75
Ganong	35	26.1%	\$ 34,485.02	8.7%	\$985.29	20	14.9%	\$ 20,794.59	5.3%	\$1,039.73
Gustafsson	1	0.7%	\$ 1,418.37	0.4%	\$1,418.37	3	2.2%	\$ 3,184.02	0.8%	\$1,061.34
Haeder	0	0.0%	\$ -	0.0%	\$0.00	0	0.0%	\$ -	0.0%	\$0.00
Hagen	27	20.1%	\$ 92,673.26	23.4%	\$3,432.34	26	19.4%	\$ 139,823.89	35.3%	\$5,377.84
Jernick	12	9.0%	\$ 73,214.84	18.5%	\$6,101.24	14	10.4%	\$ 45,097.68	11.4%	\$3,221.26
Ringnes	25	18.7%	\$ 80,494.80	20.3%	\$3,219.79	24	17.9%	\$ 105,463.90	26.7%	\$4,394.33
Stanec	0	0.0%	\$ -	0.0%	\$0.00	0	0.0%	\$ -	0.0%	\$0.00
Taylor	0	0.0%	\$ -	0.0%	\$0.00	1	0.7%	\$ 1,304.93	0.3%	\$1,304.93
Ward	3	2.2%	\$ -	0.0%	\$0.00	0	0.0%	\$ -	0.0%	\$0.00
Watson	0	0.0%	\$ -	0.0%	\$0.00	0	0.0%	\$ -	0.0%	\$0.00
Painblocks	7	5.2%	\$ -	0.0%	\$0.00	22	16.4%	\$ -	0.0%	\$0.00
Totals	138		\$ 384,803.91		\$ 2,788.43	134		\$ 395,718.12		\$2,953.12

Cases and Collections - Rolling 12 Months

Collection Min
\$75,955.22

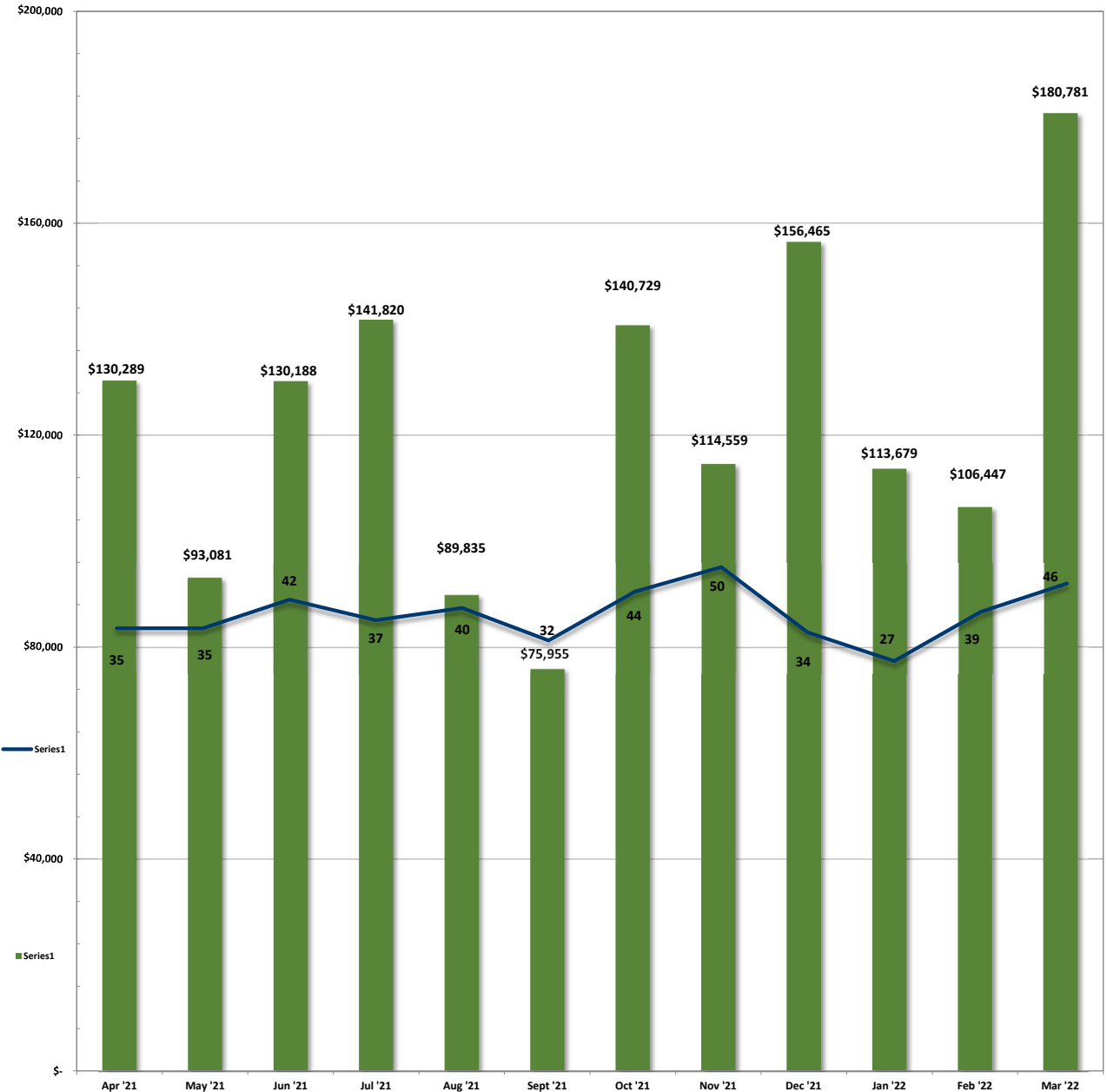
Collection Max
\$180,781.20

Collection Average
\$122,819.01

Cases Min
27

Cases Max
50

Cases Average
38



Truckee Surgery Center

Monthly Comparison & Quarterly Totals

As of March 31, 2022

Revenue - Booked vs Collected

Month	Cases	Revenue	Rev/Case	Open A/R	% Open	Collected	% Collected
Apr 2021	45	\$ 141,162.86	\$3,136.95	\$ -	0%	\$ 146,345.06	104%
May 2021	44	\$ 138,798.62	\$3,154.51	\$ 14,396.22	10%	\$ 124,402.40	90%
Jun 2021	49	\$ 133,094.43	\$2,716.21	\$ -	0%	\$ 133,271.04	100%
Jul 2021	38	\$ 84,707.63	\$2,229.15	\$ 871.60	1%	\$ 83,836.03	99%
Aug 2021	48	\$ 110,622.98	\$2,304.65	\$ -	0%	\$ 114,176.35	103%
Sept 2021	43	\$ 118,004.07	\$2,744.28	\$ 5,892.79	5%	\$ 112,111.28	95%
Oct 2021	47	\$ 73,867.36	\$1,571.65	\$ 2,678.55	4%	\$ 71,188.81	96%
Nov 2021	56	\$ 161,222.95	\$2,878.98	\$ 8,229.22	5%	\$ 152,993.73	95%
Dec 2021	35	\$ 149,713.60	\$4,277.53	\$ 56,098.29	37%	\$ 93,615.31	63%
Jan 2022	30	\$ 73,537.64	\$2,451.25	\$ 21,504.24	29%	\$ 52,033.40	71%
Feb 2022	47	\$ 129,339.75	\$2,751.91	\$ 27,345.26	21%	\$ 101,994.49	79%
Mar 2022	57	\$ 192,840.73	\$3,383.17	\$ 152,637.71	79%	\$ 40,203.02	21%
Totals	539	\$ 1,506,912.62	\$2,795.76	\$ 289,653.88	19%	\$ 1,226,170.92	81%

1st Quarter QuickFacts

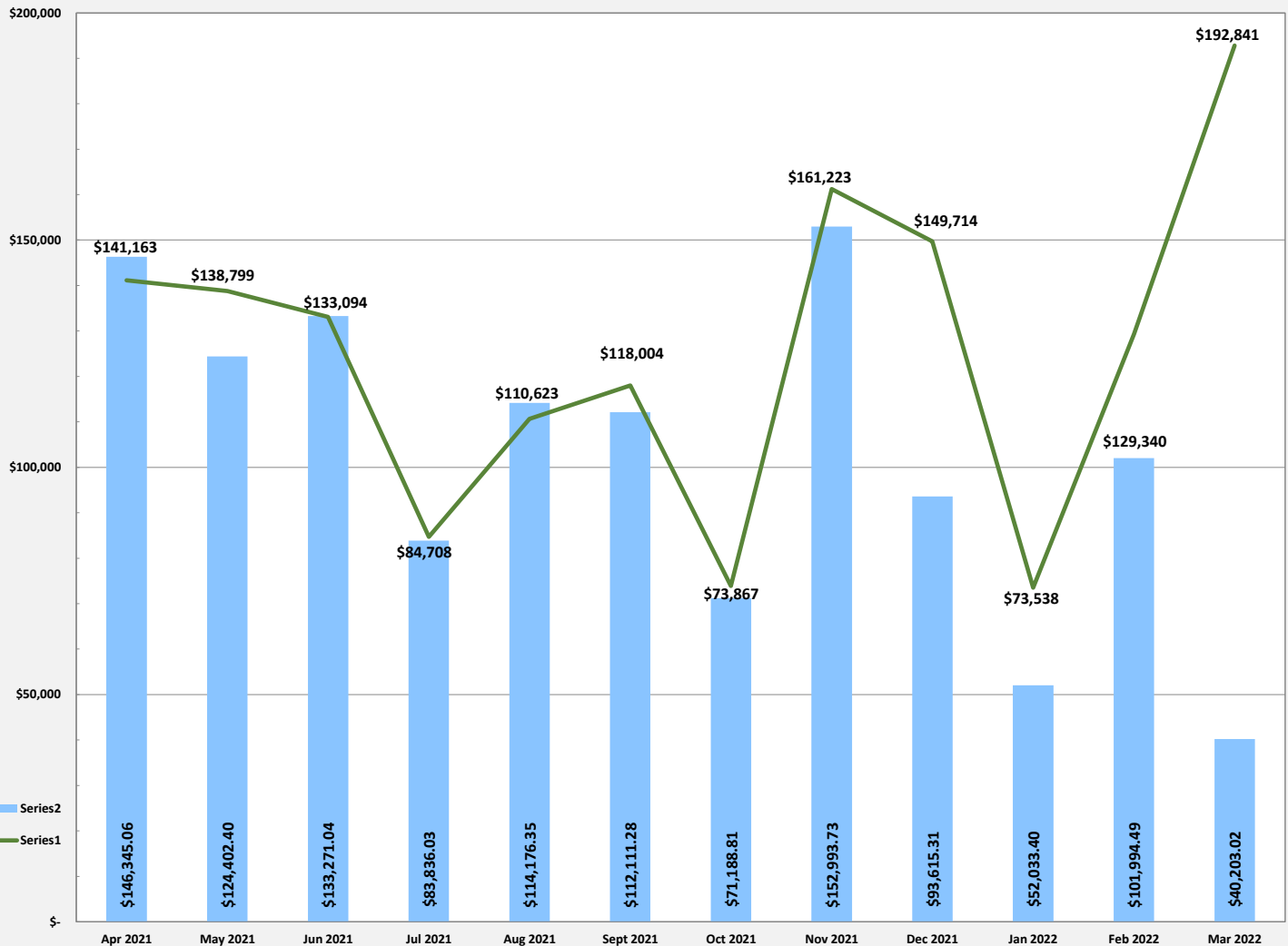
Cases: 134

Revenue: \$ 395,718.12

Collections: \$400,907.17

Outstanding Physician: Hagen
19.4% of cases, 35.3% of revenue

Outstanding Payer: Aetna 1.49% of cases, 22.5% of collections



Truckee Projects & Changes

~ Quarterly Updates ~