

Board Meeting Agenda November 27, 2023 at 6:30 p.m.

In Person	Morrow County Grain Growers – Conference Room 350 Main Street, Lexington, OR 97839
Zoom	https://us06web.zoom.us/j/82577122266?pwd=gx3PziuX3nTfwZYBT7CGOK8dnTHJ6X.1 Meeting ID: 825 7712 2266 Passcode: 644755

1. Call to Order

2. Public Comments

Maximum of 3 minutes per person/topic. Multiple items on the same topic need to be combined through one speaker. A maximum of 30 minutes may be allotted for public comment.

3. Approval of Meeting Minutes

- A. October 30, 2023 Regular Session
- B. November 16, 2023 Special Session
- 4. CEO Report & Dashboard Emily Roberts
- 5. Financial Report Nicole Mahoney
- 6. Consent Agenda
 - A. EMS Stats October 2023
- 7. New Business
 - A. Surplus OHV Park Equipment
- 8. Old Business

9. Executive Session

- A. ORS 192.660(2)(f) to consider information or records that are exempt from public inspection pertaining to ongoing or anticipated litigation exempt from disclosure under ORS 192.345(1).
- B. ORS 192.660(2)(f) to consider information or records that are exempt from public inspection pertaining to ongoing or anticipated litigation exempt from disclosure under ORS 192.345(1).
- C. ORS 192.660(2)(f) to consider information or records that are exempt from public inspection pertaining to trade secrets exempt from disclosure under ORS 192.345(2).

Promise of Excellence

Compassion: Being motivated with a desire to assist patients and staff with empathy and kindness and committed to going the extra mile to ensure patients and staff feel comfortable and welcomed.

Respect: Recognizing and valuing the dignity and uniqueness of everyone. Respect creates a work environment based on teamwork, encouragement, trust, concern, honesty, and responsive communication among all employees and our patients.

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10. Adjourn

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Meeting	Board of Directors					
Date / Time	October 30, 2023 at 6:30 p.m.	Location	Pioneer Memorial Clinic Conference Room, 130 Thompson Ave, Heppner, OR 97836			
Chair	Diane Kilkenny, Board Vice Chair Recorder Sam Van Laer, Julie Baker					
Board Members	Present: Diane Kilkenny, John Murray, Stephen Munkers, Trista Seastone					
Attendees	Staff: Emily Roberts, Nicole Mahoney, Julie Baker, Tiffany LaHue, John LaHue, Katelin Tellechea, Kami Ridling, Heidi Wimer, Diane Hardy, Mindy Smith, Lisa Paquet, Heather Smith (Zoom), Kathleen Greenup (Zoom), Dr. Everts (Zoom), Jodi Ferguson (Zoom), Sam Van Laer Guests: Eric Volk (WIPFLI) Press: Andrea Di Salvo (Heppner-Gazette)					

Mission

Bring essential health services to our rural communities that meet the unique needs of the people we serve.

Vision

Be the first choice for quality, compassionate care, and lead the way in promoting wellness and improving health in our communities.

Values

Integrity, Compassion, Quality, Respect, Financial Responsibility

Agenda Item	Minutes
1. Call to Order	Diane Kilkenny called the meeting to order at 6:30 p.m. Kilkenny stated that public comment can be submitted in writing or at the next meeting as there will not be public comment tonight due to the WIPFLI presentation. WIPFLI will present before the other agenda items.
2. Audited Financial Presentation - WIPFLI	Eric Volk, Independent Auditor with WIPFLI, presented the District's financial audit (see Board packet).
	MOTION: John Murray moved to approve the audited financials. Stephen Munkers seconded the motion. The motion passed unanimously by all Board members present.
3. Financial Report - Nicole Mahoney	Nicole Mahoney relayed that the actual tax certifications for FY 2023-24 have been received from the County and came in slightly less than estimated by the Assessor for the budget because of a lower total assessed value. She explained that tax compression due to Measures 5 and 50 sets limits on the amount of tax that can be levied. The District is subject to loss of tax revenue due to compression in the amount of \$42,000 on the tax base and \$239,000 on the operating levy. For the operating levy that is currently up for a renewal vote, 91% of the District's tax compression is from the City of Boardman and only 7% is from the City of Heppner with the remainder spread across the county in small amounts.
	Mahoney updated the Board on the tax revenue anticipation line of credit which allows the District to borrow up to \$2.5 million in anticipation of tax revenues not yet received. The District has only drawn \$500,000 and does not foresee the need to draw any further funds due to the increased collections from accounts receivable. The District anticipates the \$500,000 being paid back in November after the first tax



		-
		payments are received. Mahoney reports it is a common practice for Critical Access Hospitals to get revenue anticipation notes and it was not because of a budget shortfall. The \$2.5 million is not recorded as a liability since it is a line of credit, but the \$500,000 will be in October. The District needed the line of credit for this fiscal year's operations because tax revenues are not received until the 5 th month of this fiscal year.
		Eric Volk discussed cost-based reimbursement. Critical Access Hospitals are eligible for allowable cost plus 1% reimbursement, however this does not cover all costs just the Medicare and Medicaid share of patients. Eric further explained that in general, ambulance services are not profitable, especially rural providers. Critical Access Hospitals are the only entities able to receive cost-based reimbursement for ambulance services, but only if there is no other ambulance provider within 35 miles.
		The Financial Report was presented by Nicole Mahoney (see Board packet). Mahoney reviewed the September financial statements.
4.	Approval of Meeting Minutes	MOTION: John Murray moved to approve the minutes for the September 25, 2023 regular session as presented. Stephen Munkers seconded the motion. The motion passed unanimously by all Board members present.
		MOTION: John Murray moved to approve the minutes for the October 2, 2023 special session as presented. Stephen Munkers seconded the motion. The motion passed unanimously by all Board members present.
5.	CEO Report & Executive Team Dashboard - Emily Roberts	The Executive Team Dashboard was presented by Emily Roberts (see Board packet).
6.	Consent Agenda A. EMS Stats - September 2023	Emily Roberts presented the Consent Agenda (see Board packet). Transfers are split out from emergency calls. Response times are excellent and better than the parameters listed in the ASA.
		MOTION: John Murray moved to accept the Consent Agenda as presented. Stephen Munkers seconded the motion. The motion passed unanimously by all Board members present.
7.	New Business	
	A. Cerner Agreement	The Cerner Agreement is not included in the Board packet and was sent to the Board in advance of the meeting. The District is bound by a non-disclosure agreement and is only able to disclose the Agreement via a public records request to view the document.
		Emily Roberts reports that the District requested substantial changes to the original contract proposal. This includes moving the location to Oregon for venue of law and arbitration, and adding language that only allows the CEO to execute purchase agreements with Cerner so no one can change the terms or extend the



	agreement inadvertently. Additionally, the original proposal listed price increases as CPI plus 5%, however, Roberts is trying to negotiate this to a lower rate.
	Roberts reports that the Executive Team has been looking at different EHRs. EPIC is significantly out of the District's price range. The Team looked at every EHR system that is being used in Oregon hospitals. Cerner seems to be the next best option from EPIC. The safety issues with the current EHR should not persist on Cerner. The soonest Go Live date for Cerner implementation would be July 1, 2024, but only if the Agreement is signed by November 9, 2023. Legal counsel is working towards getting out of the current Thrive EHR contract.
	The Board discussed Thrive's pain points. These pain points have been evaluated on the Cerner system to ensure they will not persist after transition.
	MOTION: John Murray made a motion to move forward with the Cerner Agreement assuming legal can move forward with a contract exit plan for Thrive. Stephen Munkers seconded the motion. The Board asked about the timeline for implementation and training. Roberts explained the process and reports it is much better than Thrive was and believes the project timeline provided by Cerner to be reasonable. The plan includes hard stops and steps that must be completed to move forward through the implementation process. The motion passed unanimously by all Board members present.
B. Community Benefit Request - Ione	Ione Community Church is requesting an AED and LifeVac.
Community Church	MOTION: John Murray moved to approve the AED and LifeVac community benefit for lone Community Church. Stephen Munkers seconded the motion. The motion passed unanimously by all Board members present.
C. Community Benefit Request - Irrigon Elementary School	Irrigon Elementary School is requesting \$2,089.60 for student sleeping bags for outdoor school. The students would keep the sleeping bags. The outdoor school event has already occurred since the initial request for funds.
	MOTION: John Murray moved to pay the unfunded balance of the initial request. Trista Seastone seconded the motion. The motion passed unanimously by all Board members present.
D. Community Benefit - Food Pantry Donations	Emily Roberts recommends a \$1,500 donation to each food bank in Boardman, Irrigon, and Heppner. MOTION: John Murray moved to make a \$1,500 donation to the Boardman, Irrigon, and Heppner food banks. Stephen Munkers seconded the motion. The motion passed unanimously by all Board members present.
E. 2024 Board Meeting Calendar	Emily Roberts presented the proposed 2024 Board Meeting Calendar.



	MOTION: John Murray moved to accept the proposed 2024 Board Meeting Calendar. Stephen Munkers seconded the motion. The motion passed unanimously by all Board members present.		
8. Old Business	None.		
9. Executive Session	At 7:52 p.m. Diane Kilkenny prescribed a five-minute break. At 7:57, Kilkenny called to order Executive Sessions under: A. ORS 192.660(2)(f) to consider information or records that are exempt from public inspection pertaining to ongoing or anticipated litigation exempt from disclosure under ORS 192.345(1). B. ORS 192.660(2)(f) to consider information or records that are exempt from public inspection pertaining to trade secrets exempt from disclosure under ORS 192.345(2). C. ORS 192.660(2)(i) to review and evaluate the employment-related performance of a public employee who does not request an open hearing. The Executive Session adjourned at 9:30 p.m.		
10. Open Session	MOTION: John Murray moved to appoint Trista Seastone and Stephen Munkers to develop a CEO evaluation form with input from consultant Mary Sheehan. Stephen Munkers seconded the motion. The motion passed unanimously by all Board members present.		
11. Adjourn	With no further business to come before the Board, regular session adjourned at 9:17 p.m. Minutes taken and submitted by Sam Van Laer and Julie Baker. Approved		

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Meeting	Board of Directors				
Date / Time	November 16, 2023 at 1:00 p.m. Location Pioneer Memorial Clinic Conference Room 130 Thompson Street, Heppner, OR 97836				
Chair	Diane Kilkenny, Board Vice Chair Recorder Sam Van Laer				
Board Members	Present: Diane Kilkenny, John Murray, Stephen Munkers, Trista Seastone				
Attendees	Staff: Emily Roberts, Nicole Mahoney, Sam Van Laer				
	Guests: None				
	Press: None				

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Agenda Item Minutes					
1.	Call to Order	Diane Kilkenny called the meeting to order at 1:04 p.m.			
2.	Open Session				
	A. Vice Chair Position	Diane Kilkenny announced that Marie Shimer has resigned from the Board of Directors for personal reasons. The Board thanks her for her service and wishes her the best. As Vice Chair, Diane Kilkenny fills the Chair position when the position is absent or vacant. The Board will need to elect a new Vice Chair and is asked to formally elect Diane Kilkenny as Chair.			
MOTION: John Murray moved to elect Trista Seastone as Board Vice Chair. Stephen Munkers seconded the motion. The massed unanimously by all Board members present.					
		MOTION: John Murray moved to elect Diane Kilkenny as Board Chair. Stephen Munkers seconded the motion. The motion passed unanimously by all Board members present.			
	B. Process to Fill Board	Diane Kilkenny discussed the process for filling Board vacancies. The position is open to all Morrow County Residents and will be posted in the North Morrow Times, Heppner-Gazette, and on the Morrow County Health District website and Facebook page.			
	Vacancy	The application will include a position description, Board bylaws, and the District mission statement and strategic plan. The application will include inquiries into candidates' experience, community involvement, specialized skills, vision for the District, and if the candidate has any conflicts of interest. The candidate screening process will be dependent on the number of applications received.			
		MOTION: John Murray made the motion to move forward with the above described process to fill the Board vacancy. Stephen Munkers seconded the motion. The motion passed unanimously by all Board members present.			
3.	Adjourn	With no further business to come before the Board, regular session adjourned at 1:19 p.m.			



Minutes taken and submitted by Sam Van Laer. Approved ______.

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November 2023

HUMAN RESOURCES			
Turnover Rate (Rolling 3 Months)	4.9%		
Vacancy Rate	3.8%		
Number of Open Positions	8		
Newly Created Open Positions	1		

FINANCIAL		
Days Cash on Hand	20	Goal ≥ 90
Days in AR	80	Goal ≤ 60

The average hospital turnover rate for 2020 was 19.5% (Statista). The annual total separations rate for health care and social assistance for 2021 was 39.4% (Bureau of Labor Statistics).

RURAL HEALTH CLINICS					
MEASURE PMC ICC IMC BIC					
Third Next Available (Current Month)	5	1	11	N/A	
Total Visits (Previous Month)	353	92	492	133	

[&]quot;Third Next Available" is an industry standard measurement of primary care access. It is defined as the average length of time in days between the day a patient makes a request for an appointment with a provider and the third available appointment for a new patient physical, routine exam, or return visit exam. Values shown are clinic averages.

CAHPS (PATIENT SATISFACTION SCORES)

Using any number from 0 to 10, where 0 is the worst provider possible and 10 is the best provider possible, what number would you use to rate this provider?

rate this provider:			
	Qtr 3 2023	Qtr 2 2023	Qtr 1 2023
Boardman Immediate Care	86%	25%	100%
	N = 7	N = 4	N = 2
Ione Community Clinic	100%	92%	86%
	N = 9	N = 13	N = 14
Irrigon Medical Clinic	91%	77%	58%
	N = 35	N = 22	N = 36
Pioneer Memorial Clinic	67%	73%	77%
	N = 24	N = 41	N = 51
NRC Average	84%		

Would you recommend this provider's office to your famil	y and
friends?	

	Qtr 3 2023	Qtr 2 2023	Qtr 1 2023
Boardman Immediate Care	86%	25%	100%
	N = 7	N = 4	N = 2
Ione Community Clinic	100%	100%	100%
	N = 9	N = 13	N = 13
Irrigon Medical Clinic	97%	86%	79%
	N = 35	N = 21	N = 34
Pioneer Memorial Clinic	92%	87%	88%
	N = 24	N = 39	N = 51
NRC Average	91%		

Using any number from 0 to 10, where 0 is the worst facility possible and 10 is the best facility possible, what number would you use to rate this emergency department?

	Qtr 3 2023	Qtr 2 2023	Qtr 1 2023
ER Adult	100%	71%	65%
	N = 2	N = 7	N = 20
NRC Average	65%		
Bed Size 6 - 24 Average	79%		

Using any number from 0 to 10, where 0 is the worst facility possible and 10 is the best facility possible, what number would you use to rate this emergency department?

	Qtr 1 2023	Qtr 4 2022	Qtr 3 2022
ER Pediatric	100%	0%	75%
	N = 1	N = 1	N = 4
NRC Average	*Insufficient data to benchmark.		

Using any number from 0 to 10, where 0 is the worst hospital possible and 10 is the best hospital possible, what number would you use to rate this hospital during your stay?

	Qtr 3 2023	Qtr 2 2023	Qtr 1 2023
Inpatient	75%	67%	67%
	N = 4	N = 6	N = 3
NRC Average	72%		
Bed Size 6 - 24 Average	81%		

Using any number from 0 to 10, where 0 is the worst hospital possible and 10 is the best hospital possible, what number would you use to rate this hospital during your stay?

	Qtr 3 2023	Qtr 2 2023	Qtr 1 2023
Hospital	50%	100%	100%
	N = 2	N = 1	N = 1
NRC Average	71%		
Bed Size 6 - 24 Average	81%		

Would you recommend this emergency department to your friends and family?

	Qtr 3 2023	Qtr 2 2023	Qtr 1 2023
ER Adult	100%	75%	61%
	N = 2	N = 8	N = 18
NRC Average	66%		
Bed Size 6 - 24 Average	77%		

Would you recommend this emergency department to your friends and family?

	Qtr 1 2023	Qtr 4 2022	Qtr 3 2022
ER Pediatric	100%	0%	50%
	N = 1	N = 1	N = 4
NRC Average	*Insufficient	data to bench	mark.

Would you recommend this hospital to your friends and family?

	Qtr 3 2023	Qtr 2 2023	Qtr 1 2023
Inpatient	50%	33%	33%
	N = 4	N = 6	N = 3
NRC Average	72%		
Bed Size 6 - 24 Average	80%		

Would you recommend this hospital to your friends and family?

	Qtr 3 2023	Qtr 2 2023	Qtr 1 2023
Hospital	50%	0%	100%
	N = 2	N = 1	N = 1
NRC Average	72%		
Bed Size 6 - 24 Average	80%		

Score is equal to or greater than the NRC Average

Score is less than the NRC Average, but may not be significantly

Score is significantly less than the NRC Average

BALANCE SHEET

FOR THE MONTH ENDING: 10/31/23

Current Year Prior Year Net Change

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ASSETS			
CURRENT ASSETS			
CASH & INVESTMENTS			
CASH & INVESTMENTS	1,737,098.03	5,798,553.47	(4,061,455.44)
TOTAL CASH & INVESTMENTS	1,737,098.03	5,798,553.47	(4,061,455.44)
PATIENT ACCOUNTS RECEIVABLE			
A/R HOSPITAL SWING CLINIC	511.785.38	2,000,830.47	(1,489,045,09)
A/R HOME HEALTH & HOSPICE	119,993.10		
A/R THRIVE	2,809,177.53		
GROSS PATIENT RECEIVABLES	3,440,956.01	2,296,575.00	1,144,381.01
LESS CLEARING ACCOUNTS	(50.00)	(50.00)	
LESS ALLOW FOR CONTRACTUAL	103,358.00	41,788.00	61,570.00
LESS ALLOW FOR UNCOLLECTIBLE	300,382.00	270,503.00	29,879.00
NET PATIENT ACCOUNTS RECEIVABLE	3,037,266.01	1,984,334.00	1,052,932.01
OTHER RECEIVABLES		7,0	
	(0.060.64)	(2.107.20)	000 54
EMPLOYEE ADVANCES	(2,268.64)		
EMPLOYEE PURCHASES RECEIVABLE	.00	5,077.41	
RECEIVABLE 340B SUNRX	54,316.57	43,176.28	
TAXES RECEIVABLE - PRIOR YEAR	53,310.49	48,250.01	5,060.48
TAXES RECEIVABLE - CURRENT YR OTHER RECEIVABLE	1,192,828.64 24,744.12		
MC/MD RECEIVABLE	1,284,719.12	.00	10,704.12 1,284,719.12
ASSISTED LIVING RECEIVABLE	12,383.66	13,098.47	(714.81
1.0010112 211110 1.00111.021			
TOTAL OTHER RECEIVABLE	2,620,033.96	1,146,671.43	1,473,362.53
INVENTORY & PREPAID			
INVENTORY AND PREPAID	626,019.24		
TOTAL INVENTORY & PREPAID		492,611.10	133,408.14
TOTAL CURRENT ASSETS		9,422,170.00	
10112 0014211 110221		=======================================	
LONG TERM ASSETS			
LAND	135,700.55	135,700.55	.00
LAND IMPROVEMENTS	322,353.71		
BUILDING & IMPROVEMENTS	5,979,588.17	5,893,274.48	
EQUIPMENT	8,512,367.55	8,323,770.73	188,596.82
AMORTIZABLE LOAN COSTS	.00		
CONSTRUCTION IN PROGRESS	468,675.40	394,838.47	73,836.93
LESS ACCUM DEPRECIATION		9,996,218.22	
TOTAL LONG TERM ASSETS	4,703,051.30	5,073,719.84	
		=======================================	
TOTAL ASSETS		14,495,889.84	
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MORROW COUNTY HEALTH DISTRICT

BALANCE SHEET

FOR THE MONTH ENDING: 10/31/23

	Current Year	Prior Year	Net Change
LIABILITIES			
CURRENT LIABILITIES			
ACCOUNTS PAYABLE			
ACCOUNTS PAYABLE	398,311.28	306,681.84	91,629.44
MISC PAYABLE	.00	(.04)	
SHORT TERM NOTES PAYABLE	500,000.00	.00	500,000.00
ACCOUNTS PAYABLE TOTAL	898,311.28	306,681.80	591,629.48
ACCRUED WAGES & LIABILITIES			
ACCRUED WAGES & LIABILITIES	1,316,821.89	940,805.56	376,016.33
TOTAL ACCRUED WAGES & LIABILITIES	1,316,821.89	940,805.56	376,016.33
OTHER LIABILITIES			CK,
ACCRUED INTEREST	2,560.21	3,052.04	(491.83)
SUSPENSE ACCOUNT	4,524.63	1,236.55	3,288.08
TCAA SUSPENSE	2,475.00	1,935.00	540.00
DEFERRED INCOME	1,505.82	1,505.82	.00
UNEARNED REVENUE FOR COVID 19	.00	1,108,671.42	(1,108,671.42)
MC/MD SETTLEMENT PAYABLE	.00	260,144.00	(260,144.00)
CONTINGENCY SETTLEMENT PAYABLE	100,000.00	200,000.00	(100,000.00)
TOTAL OTHER LIABILITIES	111,065.66	1,576,544.83	(1,465,479.17)
TOTAL CURRENT LIABILITIES	2,326,198.83	2,824,032.19	(497,833.36)
LONGTERM LIABILITIES			
BEO 2019 BOILERS LOAN	34,024.02	61,944.17	(27,920.15)
BEO 2018 BOARDMAN BLDG LOAN	82,805.02	100,331.29	(17,526.27)
BEO 2018 OMNICELL/US LOAN	.00	59,310.97	(59,310.97)
BEO 2020 AMBULANCE LOAN	44,981.86	75,214.18	(30,232.32)
MORROW CO 2018 BOARDMAN BLDG	45,183.18	55,201.24	(10,018.06)
MORROW CO 2013 IMC LOAN	.00	6,051.01	(6,051.01)
BEO IMC EXPANSION 2018	272,027.45		
GEODC 2021 HOUSE LOAN	71,675.91		
MORROW CO 2021 CHURCH LOAN	53,132.50	·	
BEO 2008 HOSP REMODEL LOAN	.00	•	
BEO REFINANCE LOAN		789,098.95	
TOTAL LONG TERM LIABILITIES	1,366,316.71		(271,427.15)
EQUITY/FUND BALANCE			
GENERAL FUND UNRESTRICTED BAL	10,406,359.52	10,398,041.30	8,318.22
EQUITY/FUND BAL PERIOD END	(1,375,406.52)	(363,927.51)	(1,011,479.01)
TOTAL LIAB & EQUITY/FUND BAL	12,723,468.54	14,495,889.84	(1,772,421.30)

MORROW COUNTY HEALTH DISTRICT OPERATING/INCOME STATEMENT FOR THE 4 MONTHS ENDING 10/31/23

11/21/23 05:14 PM

	M O N T H			У Е	AR TO DA	T E
ACTUAL	BUDGET	VARIANCE		ACTUAL	BUDGET	VARIANCE
			PATIENT SERVICES REVENUE			
74,052.36	86,862.34	(12,809.98)	INPATIENT ANCILLARY REVENUE	227,170.51	347,449.36	(120,278.85)
158,994.44	98,735.51	60,258.93	HOSPITAL INPATIENT REVENUE	412,927.50	394,942.04	17,985.46
697,795.94	907,192.63	(209,396.69)	OUTPATIENT REVENUE	2,721,940.34	3,628,770.52	(906,830.18)
331,769.39	438,490.99	(106,721.60)	CLINIC REVENUE	1,230,185.13	1,753,963.96	(523,778.83)
92,732.82	99,775.75	(7,042.93)	HOME HEALTH/HOSPICE REVENUE	435,757.28	399,103.00	36,654.28
1,355,344.95	1,631,057.22	(275,712.27)	GROSS PATIENT REVENUE	5,027,980.76	6,524,228.88	(1,496,248.12)
					(2)	
			LESS DEDUCTIONS FROM REVENUE	_	70	
(10,019.36)	.00	10,019.36	PROVISION FOR BAD DEBTS	(27,590.23)	.00	27,590.23
143,999.94	31,278.17	(112,721.77)	CONTRACTUAL & OTHER ADJUSTME	552,030.22	125,112.68	(426,917.54)
133,980.58	31,278.17	(102,702.41)	TOTAL REVENUE DEDUCTIONS	524,439.99	125,112.68	(399,327.31)
				,-()		
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1,221,364.37	1,599,779.05	(378,414.68)	NET PATIENT REVENUE	4,503,540.77	6,399,116.20	(1,895,575.43)
298,207.16	298,207.17	(.01)	TAX REVENUE	1,192,828.64	1,192,828.68	(.04)
58,509.17	137,863.16	(79,353.99)	OTHER OPERATING REVENUE	89,984.99	551,452.64	(461,467.65)
1,578,080.70	2,035,849.38	(457,768.68)	TOTAL OPERATING REVENUE	5,786,354.40	8,143,397.52	(2,357,043.12)
========	========	========	TOTAL OF ENATING REVENUE	========	========	=========
			5			
			OPERATING EXPENSES			
1,148,783.82	1,044,627.88	(104,155.94)	SALARIES & WAGES	4,438,083.02	4,178,511.52	(259,571.50)
333,781.62	428,595.52		EMPLOYEE BENEFITS & TAXES	1,341,463.16	1,714,382.08	372,918.92
99,643.86	91,904.44	(7,739.42)	PROFESSIONAL FEES	376,560.15	367,817.76	(8,742.39)
110,230.78	146,160.91	35,930.13	SUPPLIES & MINOR EQUIPMENT	445,724.56	584,643.64	138,919.08
9,770.42	14,896.16	5,125.74	EDUCATION	28,609.18	59,584.64	30,975.46
19,822.48	17,975.20	(1,847.28)	REPAIRS & MAINTENANCE	68,678.45	71,900.80	3,222.35
1,182.25	11,896.10	10,713.85	RECRUITMENT & ADVERTISING	24,827.00	47,584.40	22,757.40
87,786.53	81,624.08		PURCHASED SERVICES	366,508.02	326,496.32	(40,011.70)
60,750.20	67,010.02	6,259.82	DEPRECIATION	249,884.32	268,040.08	18,155.76
15,729.63	18,603.40	2,873.77		69,393.01	74,413.60	5,020.59
15,610.66	13,355.01			61,014.77	53,420.04	
		(2,255.65)				(7,594.73)
11,827.73	2,066.91	(9,760.82)	TAXES & LICENSES	16,124.23	8,267.64	(7,856.59)
4,674.06	4,817.16	143.10	INTEREST	18,874.25	19,268.64	394.39
2,030.13	3,377.42	1,347.29	DUES & SUBSCRIPTIONS	13,419.50	13,509.68	90.18
17,043.92	15,806.26	(1,237.66)		58,672.47	63,225.04	4,552.57
32,957.66	19,991.00	(12,966.66)	OTHER EXPENSES	97,509.63	79,964.00	(17,545.63)
1,971,625.75	1,982,707.47	11,081.72	TOTAL OPERATING EXPENSES	7,675,345.72	7,931,029.88	255,684.16
========	========	========		========	========	========
(393,545.05)	53,141.91	(446,686.96)	GAIN/LOSS FROM OPERATIONS	(1,888,991.32)	212,367.64	(2,101,358.96)
406,771.83	62,275.01	344,496.82	NON-OPERATING NET GAIN/LOSS	513,652.88	249,100.04	264,552.84
13,226.78	115,416.92 =======	(102,190.14)	GAIN/LOSS	(1,375,338.44) ========	461,467.68	(1,836,806.12)

PIONEER MEMORIAL CLINIC - OCTOBER 2023

Provider	Measure	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Total
Dr. Schaffer	Patient Hours Available		8	8	8	7				8	8	7	8				8	8	8	8											8	8	110
	Patients Seen		15	16	14	9				11	7	6	9				6	13	11	10											12	16	155
	No Shows		2	0	2	1				0	0	0	0				0	0	0	0											2	0	7
	Patient Cancellations		0	0	0	2				2	0	0	1				0	0	0	0											2	1	8
	Clinic Cancellations		0	0	0	0				0	0	0	0				0	0	0	0											0	0	0
	Pts. Per Available Hour		1.9	2.0	1.8	1.3				1.4	0.9	0.9	1.1				0.8	1.6	1.4	1.3											1.5	2.0	1.4
	No Show Rate		12%	0%	13%	8%				0%	0%	0%	0%				0%	0%	0%	0%											13%	0%	4%
	Patient Cancel Rate		0%	0%	0%	17%				15%	0%	0%	10%				0%	0%	0%	0%											13%	6%	5%
	Clinic Cancel Rate		0%	0%	0%	0%				0%	0%	0%	0%				0%	0%	0%	0%											0%	0%	0%
Provider	Measure	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Total
Amanda Roy, PA	Patient Hours Available				6.5	6.5	8					6.5	6.5						6	8	8					7.5	7.5	7					78
	Patients Seen				15	9	12					13	15						12	16	13					16	20	14					155
	No Shows				1	4	1					2	1						0	1	0					1	0	1					12
	Patient Cancellations				0	0	1					1	1						1	0	0					0	0	1					5
	Clinic Cancellations				0	0	0					0	0						0	0	0					0	0	0					0
	Pts. Per Available Hour				2.3	1.4	1.5					2.0	2.3						2.0	2.0	1.6					2.1	2.7	2.0					2.0
	No Show Rate				6%	31%	7%					13%	6%						0%	6%	0%					6%	0%	6%					7%
	Patient Cancel Rate				0%	0%	7%					6%	6%						8%	0%	0%					0%	0%	6%					3%
	Clinic Cancel Rate				0%	0%	0%					0%	0%						0%	0%	0%					0%	0%	0%					0%
Provider	Measure	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Total
Rebecca Humphries	Patient Hours Available			8	3.5	5	8			3	3		4							2	8			8	4	8	7.5					6	78
	Patients Seen			1	2	3	5			2	1		3							2	5			6	1	3	6					3	43
	No Shows			0	1	1	1			0	0		1							0	4			1	0	0	0					0	9
	Patient Cancellations			0	0	0	3			0	0		1							0	0			1	0	0	2					0	7
	Clinic Cancellations			0	0	0	0			0	0		0							0	0			0	0	0	0					0	0
	Pts. Per Available Hour			0.1	0.6	0.6	0.6			0.7	0.3		0.8							1.0	0.6			0.8	0.3	0.4	0.8					0.5	0.6
	No Show Rate			0%	33%	25%	11%			0%	0%		20%							0%	44%			13%	0%	0%	0%					0%	15%
	Patient Cancel Rate			0%	0%	0%	33%			0%	0%		20%							0%	0%			13%	0%	0%	25%					0%	12%
	Clinic Cancel Rate			0%	0%	0%	0%			0%	0%		0%							0%	0%			0%	0%	0%	0%					0%	0%
Occ. Health	Measure	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Total
MA Chargeable Visit	Patients Seen		0	0	0	0	0			0	0	0	0				0	0	0	0	0			0	0	0	0	0			0	0	0
PMC TOTALS	Measure	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Total
	Patient Hours Available		8	16	18	18.5	16			11	11	13.5	18.5				8	8	14	18	16			8	4	15.5	15	7			8	14	266
	Patients Seen		15	17	31	21	17			13	8	19	27				6	13	23	28	18			6	1	19	26	14			12	19	353
	No Shows		2	0	4	6	2			0	0	2	2				0	0	0	1	4			1	0	1	0	1			2	0	28
	Patient Cancellations		0	0	0	2	4			2	0	1	3				0	0	1	0	0			1	0	0	2	1			2	1	20
	Clinic Cancellations		0	0	0	0	0			0	0	0	0				0	0	0	0	0			0	0	0	0	0			0	0	0
	Pts. Per Available Hour		1.9	1.1	1.7	1.1	1.1			1.2	0.7	1.4	1.5				0.8	1.6	1.6	1.6	1.1			0.8	0.3	1.2	1.7	2.0			1.5	1.4	1.3
	No Show Rate		12%	0%	11%	21%	9%			0%	0%	9%	6%				0%	0%	0%	3%	18%			13%	0%	5%	0%	6%			13%	0%	7%
	Patient Cancel Rate		0%	0%	0%	7%	17%			13%	0%	5%	9%				0%	0%	4%	0%	0%			13%	0%	0%	7%	6%			13%	5%	5%
1	Clinic Cancel Rate		0%	0%	0%	0%	0%			0%	0%	0%	0%				0%	0%	0%	0%	0%			0%	0%	0%	0%	0%			0%	0%	0%

IONE COMMUNITY CLINIC - OCTOBER 2023

Provider	Measure	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Total
Eileen McElligott	Patient Hours Available										8		6.5				8	8		6.5				8	6		5				8	7	71
	Patients Seen										16		9				7	7		11				16	4		10				7	5	92
	No Shows										0		0				0	0		0				0	0		0				0	1	1
	Patient Cancellations										1		0				0	0		0				0	0		0				0	0	1
	Clinic Cancellations										0		0				0	0		0				0	0		0				0	0	0
	Pts. Per Available Hour										2.0		1.4				0.9	0.9		1.7				2.0	0.7		2.0				0.9	0.7	1.3
	No Show Rate										0%		0%				0%	0%		0%				0%	0%		0%				0%	17%	1%
	Patient Cancel Rate										6%		0%				0%	0%		0%				0%	0%		0%				0%	0%	1%
	Clinic Cancel Rate										0%		0%				0%	0%		0%				0%	0%		0%				0%	0%	0%

IRRIGON MEDICAL CLINIC - OCTOBER 2023

Amen Reed, CAVIA, Patient Flouring Availabile but 1	Provider	Measure	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Total
Patients Seem 1			1					0	,	•	9	10				14	15					20	21	22	25					20	29			
No Shown Current Current Language (1) 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Jannie Reed, CSWA				1	-	'											- 1										-	· 1					
Parlies Cancellations (Fig. 2 1				l .	l	I	I								-			- 1		I	l							_						
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Patient Cancellation 1					_	_												_			-							-					-	
Clinic Cuench Rates 1 2 3 3 4 5 5 7 7 8 5 7 8 5 7 8 5 7 8 8					_	_												_									_					_	-	
New Meter No.				_	_	_												\rightarrow											_				-	
Particular Non-Wilson, Non-Wilson, Particular Non-Wilson, N		Clinic Cancel Rate		0%	0%	0%	0%						0%	0%	0%			0%	0%	0%	0%					U%	0%	0%	0%			0%	0%	U%
Patient Seem	Provider	Measure	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Total
No Show Repert Cancellations No Show Rate	Jon Watson, PA	Patient Hours Available		8	8	8	4.3				8	8	8												8	8	8	8				8	8	100.3
Patient Cancellations		Patients Seen		16	13	14	12				15	18	20												22	17	14	17				21	17	216
Chic Carcollations		No Shows		1	3	1	0				6	2	1												1	4	2	2				1	1	25
## Provision Pro		Patient Cancellations		0	3	0	0				0	0	3												1	1	1	2				1	0	12
Ne Show Rate 0, 51, 10% 7% 7% 7% 7% 7% 7% 7%		Clinic Cancellations		0	0	0	0				0	0	0												0	0	0	0				0	0	0
Provider Measure 1 2 3 4 5 6 7 8 9 10 10 10 10 10 10 10 10 10 10 10 10 10		Pts. Per Available Hour		2.0	1.6	1.8	2.8				1.9	2.3	2.5												2.8	2.1	1.8	2.1				2.6	2.1	2.2
Provider Patient Scienary Available Patient Scie		No Show Rate		6%	16%	7%	0%				29%	10%	4%												4%	18%	12%	10%				4%	6%	10%
Provider Measure 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 Total Measure No.5hows hate Science Rate 1 2 3 4 5 5 6 7 8 9 9 10 11 12 23 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 Total Adolgo Patient Science No.5hows hate Patient Cancellations Clinic Cancel Rate 1 2 3 4 5 5 6 7 8 9 9 10 11 12 23 14 15 16 17 18 18 19 20 21 22 23 24 25 26 27 28 29 30 31 Total Adolgo Patient Science No.5hows hate Patient Cancellations Clinic Cancel Rate 1 2 3 4 5 5 6 7 8 9 9 10 11 12 23 14 15 16 17 18 18 19 20 21 22 23 24 25 26 27 28 29 30 31 Total Adolgo Patient Science No.5hows hate Patient Cancellations Clinic Cancel Rate 1 2 3 4 5 5 6 7 8 9 9 10 11 12 23 14 15 16 17 8 8 18 18 18 18 18 18 18 18 18 18 18 18		Patient Cancel Rate		0%	16%	0%	0%				0%	0%	13%												4%	5%	6%	10%				4%	0%	5%
Patient bours Available Patient Sure Nursing Patient bours Available Patient Sure Nursing Pat		Clinic Cancel Rate		0%	0%	0%	0%				0%	0%	0%												0%	0%	0%	0%				0%	0%	0%
Patient baser Available Patient baser Available Patient baser Available Patient Seen No Shows Are Patient Seen No Show Are No No No Water No No No Water No No No Water No No No Water No	Provider	Measure	1	2	3	1	5	6	7	Q	۵	10	11	12	12	1/1	15	16	17	18	10	20	21	22	23	2/1	25	26	27	28	20	30	31	Total
Patient Cancel Rate Patient Cancel Rate			_		3	7			,		,	10	-11			17	13	10	1,	10			21		23		23	20	2,	20	23	30	31	
No Shows Assert Cancellations Clinic Cancellations	VICKI KEIIL, FINF																					I												
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Provider Measure 1 2 3 4 5 6 7 12 2 3 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8															_						-													
No. Show Rate Patient Cancel Rate 1								_						_	_						_													·
Provider Measure No. No. Shows Rate No.																		-																
Clinic Cancel Rate							_								_																			
Provider Measure 1 2 3 4 5 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 12 2 3 24 25 26 27 28 29 30 31 Total Patient Foundation Clinic Cancel Rate																																		
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Patients Seen No Shows O D D 1 D D D D D D D D D D D D D D D D	Provider	Measure	1	2		4	5	6	7	8	9		11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	
No Shows Patient Cancellations	Justin Cameron, PA					I									-						_							8	8					
Patient Cancellations Clinic Cancellation					9	5	7	12				-	8	8				- 1		8	5					15	6	4	7				8	128
Clinic Cancellations 0 0 0 0 0 0 0 0 0		No Shows			0	0	1	1				0	0	1	2			0	2		1					1	0	0	1				0	14
Pts. Per Available Hour No Show Rate					ı	1 -												- 1										_						17
No Show Rate 0 0% 0% 11% 7% 0 0% 0% 11% 33% 0 0% 18% 33% 14% 0 0 0 0% 11% 14% 20% 11% 0 0% 0% 11% 13% 0 0% 11% 13% 0 0% 0% 14% 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0					_	-						_						_									_						_	
Patient Cancel Rate 1 18% 0% 11% 13% 18% 0% 11% 13% 18% 0% 0% 0% 0% 0% 0% 0%					_	_												\rightarrow									_		-				-	
Clinic Cancel Rate					_	_												_											_					
Coc. Health Measure 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 Total Patients Seen 20 27 22 24 25 25 26 27 28 29 30 31 Total Patient Seen 20 27 22 24 25 25 26 27 28 29 30 31 Total Patient Hours Available Patient Hours Available Patient Accellations 20 27 22 24 25 25 25 25 27 28 29 30 31 Total Patient Accellations 20 27 22 24 25 25 25 25 25 25					_	_												_																
MA Chargeable Visit Patients Seen		Clinic Cancel Rate			0%	0%	0%	0%				0%	0%	0%	0%			0%	0%	0%	0%					0%	0%	0%	0%				0%	0%
MA Chargeable Visit Patients Seen	Occ. Health	Measure	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Total
Patient Hours Available Patients Seen 16 24 24 20.6 16 8 16 24 23.6 24 16 16 16 24 21.2 21.2 22 24 25 15 25 34 27 21 11 14 10 24 11 22 41 27 27 11 24 30 492 No Shows 2 3 1 1 3 6 2 3 6 7 4 2 5 2 1 1 5 3 2 4 1 1 6 2 3 6 7 4 2 5 2 1 1 5 3 2 4 1 1 6 5 4 2 5 2 1 1 5 3 2 4 1 1 6 5 4 1 1 5 3 2 4 <	MA Chargeable Visit																																	
Patient Hours Available Patients Seen 16 24 24 20.6 16 8 16 24 23.6 24 16 16 16 24 24 16 16 24 412.2 Patient Seen 20 27 22 24 25 15 25 34 27 21 11 14 10 24 11 22 41 27 27 11 24 30 492 No Shows 2 3 1 1 3 6 2 3 6 7 4 2 5 2 1 1 5 3 2 4 1 1 65 Patient Cancellations 0 6 0 3 3 0 1 6 3 3 1 0 0 4 1 3 4 4 1 1 5 3 2 4 1 1 6 <th< th=""><td>IMCTOTALS</td><th>Measure</th><td>1</td><td>2</td><td>9</td><td>1</td><td>E</td><td>6</td><td>7</td><td></td><td>ο Ι</td><td>10</td><td>11</td><td>12</td><td>12</td><td>14</td><td>15</td><td>16</td><td>17</td><td>10</td><td>10</td><td>20</td><td>21</td><td>22</td><td>22</td><td>24</td><td>25</td><td>26</td><td>27</td><td>20</td><td>20</td><td>30</td><td>21</td><td>Total</td></th<>	IMCTOTALS	Measure	1	2	9	1	E	6	7		ο Ι	10	11	12	12	14	15	16	17	10	10	20	21	22	22	24	25	26	27	20	20	30	21	Total
Patients Seen 20 27 22 24 25 15 25 34 27 21 11 14 10 24 11 22 41 27 27 11 24 30 492 No Shows 2 3 1 1 3 6 7 4 2 5 2 1 1 5 3 2 4 1 1 65 Patient Cancellations 0 6 0 3 3 0 1 6 3 3 1 0 0 6 4 1 3 4 4 1 1 5 3 2 4 1 1 65 Patient Cancellations 0	IIVIC TOTALS		1						,	•	-					14	13						21	22						20	25			
No Shows 2 3 1 1 3 6 2 3 6 7 4 2 5 2 1 1 5 3 2 4 1 1 65 Patient Cancellations 0 6 0 3 3 0 1 6 3 3 1 0 0 6 4 1 3 4 4 1 1 0 50 Clinic Cancellations 0 <th< th=""><th></th><th></th><th></th><th></th><th>l</th><th>I</th><th></th><th></th><th></th><th></th><th></th><th></th><th></th><th></th><th></th><th></th><th></th><th>- 1</th><th></th><th></th><th></th><th></th><th></th><th></th><th>-</th><th></th><th></th><th></th><th></th><th></th><th></th><th></th><th></th><th></th></th<>					l	I												- 1							-									
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Patient Cancel Rate 0% 17% 0% 11% 10% 0% 4% 14% 8% 10% 6% 0% 0% 19% 25% 4% 6% 12% 12% 6% 4% 0% 8%		Pts. Per Available Hour		1.3	1.1	0.9	1.2	1.6			1.9	1.6	1.4	1.1	0.9			0.7	0.9	0.6	1.0	1.4			2.8	1.7	1.1	1.1	0.7			1.5	1.3	1.2
		No Show Rate		9%	8%	4%	4%	10%			29%	7%	7%	17%	23%			25%	13%	33%	6%	6%			4%	10%	9%	6%	25%			4%	3%	11%
Clinic Cancel Rate 0%		Patient Cancel Rate		0%	17%	0%	11%	10%			0%	4%	14%	8%	10%			6%	0%	0%	19%	25%			4%	6%	12%	12%	6%			4%	0%	8%
		Clinic Cancel Rate		0%	0%	0%	0%	0%			0%	0%	0%	0%	0%			0%	0%	0%	0%	0%			0%	0%	0%	0%	0%			0%	0%	0%

BOARDMAN IMMEDIATE CARE - OCTOBER 2023

Selectivistics in properties of the properties o	Provider	Measure	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Total
Provider Monotone Shows Provider Carelisions	Jennifer Barden, NP	Patient Hours Available								8	8	8	8	8	8									8	8	8			8	8				112
Provider Minor Provider Controllars Minor Provider Contr		Patients Seen								4	3	6	5	4	7	4								1	8	0	1	6	4	6				59
Profession Concessions 1										0		0		0	0	0								- 1	- 1	0				0				
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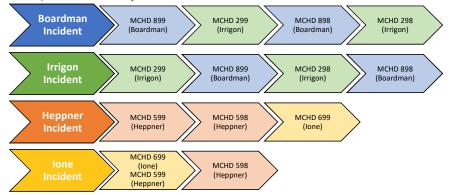


			BOAR	DMAN					IRRI	GON					HEPF	PNER				IONE	
2023		899			898			299			298			599			598			699	
	Dispatch to En Route	Response Time	Number of Runs	Dispatch to En Route	Response Time	Number of Runs	Dispatch to En Route	Response Time	Number of Runs	Dispatch to En Route	Response Time	Number of Runs	Dispatch to En Route	Response Time	Number of Runs	Dispatch to En Route	Response Time	Number of Runs	Dispatch to En Route	Response Time	Number of Runs
January	0.2	3.8	47	1.0	10.2	6	1.0	3.5	52	0.1	3.9	4	3.5	8.7	26	6.0	11.5	2	N/A	N/A	0
February	0.2	5.8	43	1.1	12.4	1	1.0	3.3	33	5.0	5.0	3	5.6	21.5	22	9.0	10.0	7	N/A	N/A	0
March	0.3	4.5	31	0.1	4.6	8	1.0	4.0	28	1.5	3.0	1	4.2	7.7	24	0.8	1.2	2	N/A	N/A	0
April	0.2	4.9	44	0.3	3.3	4	1.0	3.9	30	0.4	5.0	17	3.6	7.0	26	6.0	7.0	3	N/A	N/A	0
May	0.2	3.8	65	0.2	5.8	1	1.0	4.3	35	0.5	5.4	15	3.4	10.0	27	6.0	15.0	3	N/A	N/A	0
June	0.4	3.9	12	0.3	3.6	40	1.0	4.0	43	1.0	5.0	7	4.5	4.0	28	N/A	N/A	0	N/A	N/A	0
9-1-1 July	0.2	3.9	17	0.5	5.0	28	1.0	5.7	10	1.0	3.0	55	3.0	5.0	30	N/A	N/A	0	N/A	N/A	0
Transfers July	N/A	N/A	0	5.0	3.0	7	N/A	N/A	0	N/A	N/A	0									
9-1-1 August	0.3	4.1	56	2.2	5.8	2	1.0	3.0	14	1.0	4.0	20	4.3	4.0	25	5.0	5.0	1	N/A	N/A	0
Transfers August	N/A	N/A	0	N/A	N/A	0	N/A	N/A	0	3.0	13.0	1	4.0	7.0	6	12.0	0.0	3	N/A	N/A	0
9-1-1 September	0.3	4.1	52	0.9	4.0	11	1.0	3.7	11	1.0	3.8	34	2.2	5.2	30	0.3	0.2	1	N/A	N/A	0
Transfers September	0.5	2.1	6	1.0	2.1	2	N/A	N/A	0	N/A	N/A	0	5.0	0.1	2	4.0	0.1	2	N/A	N/A	0
9-1-1 October	0.5	4.1	68	0.8	4.7	2	1.0	3.2	46	1.0	5.3	4	2.0	2.3	29	N/A	N/A	0	N/A	N/A	0
Transfers October	1.9	10.0	9	N/A	N/A	0	N/A	N/A	0	1.6	9.4	1	6.9	18.0	6	15.0	0.5	2	N/A	N/A	0
9-1-1 November					·			·			·						•			·	
Transfers November																					
9-1-1 December																					
Tranfers December					·						·						•			·	
TOTAL			450			105			302			162			288			26			0

Dispatch to en route means the length of time between when the ambulance is dispatched to when the ambulance leaves the garage.

Response time means the length of time between the notification to the ambulance and the arrival of the ambulance at the incident scene.*

^{*}Note that response times are not adjusted for miles traveled.



	ATV 12-06	ATV 12-06	ATV 08-17	ATV 08-17	ATV 07-39	ATV 06-31
)	2012 ATV	2012 ATV				
	ATV	ATV	Polaris	Ranger	Polaris	Polaris
	Quad - Bronz	Quad - Green	RZR - Red	Ranger Crew - Red	Polaris 500 EFI -Blk/Slvr	Polaris 500 - Blue
	4XAZN5EA4CA535507	4XAZN5EA4CA500384	4XAVH76A39D816513	4XAWH68A582704320 Good 8/2023 623 miles	Polaris 500 EFI -BIK/SIvr 4XAMH50A962077678	4XAMH50A358693942
	Good 8/2023	Good 8/2023	Fair 8/2023 3,227 miles	Good 8/2023	Fair 8/2023	Poor 8/2023
	Good 8/2023 441 hours/3,815 miles	Good 8/2023 464 hours/4,024 miles	3,227 miles	623 miles	2,905 miles/432 hours	Poor 8/2023 605 hrs/4,405 miles

Morrow County EMS

ATV 03-40

side Side-by-

Polaris

Ranger

4XARD058A84D159625 Fair 8/2023

1,832 miles

RX Ka