

**ANNUAL BUSINESS MEETING MINUTES**

**OCTOBER 6, 2015**

**HILTON GARDEN INN, FARGO**

**Members Present**: Pete Antonson, Roger Baier, Cody Barnhart, Bruce Bowersox, Everett Butler, K.C. DeBoer, Mariann Doeling, Louise Dryburgh, Tod Graeber, Matt Grimshaw, Becky Hansen, Keith Heuser, Nikki Johnson, Dan Kelly, Mark Kerr, Craig Lambrecht, Andrew Lankowicz, Jerry Lepp, Jim Long, Jac McTaggart, Ivan Mitchell, Alan O’Neil, Peggy Reinke, Reed Reyman, Tim Sayler, Theo Stoller, Sandy Teubner, and Bev Vilhauer,

Quorum is present.

Meeting called to order by Darrold Bertsch, NDHA Board Chair.

**Award Presentations**: Kathy Geist from LifeSource presented hospital awards for outstanding achievement on organ and tissue donations. Reed Reyman accepted the 2014 Tissue Partner of the Year on behalf of CHI St. Joseph’s Health, Dickinson and Tim Sayler and Rob Cunningham accepted the 2014 Organ and Tissue Partner of the Year on behalf of Essentia Health, Fargo.

Paul Muraca, AHA Region 6 Exec presented the AHA Membership Awards. The 50 year membership plaque was presented to McKenzie County Healthcare System and 75 year membership plaques went to Sanford Medical Center Bismarck, St. Aloisius Medical Center – Harvey, and Cavalier County Memorial Hospital – Langdon. AHA Grassroots Champion Award was presented to Darrold Bertsch, CEO from Sakakawea Medical Center in Hazen.

**Approval of Minutes**: The October 7, 2014 meeting minutes were included in the packets. Motion made by Roger Baier to accept the minutes as written. Dan Kelly seconded. Motion carried.

**Reports**:

* Board Chair – Darrold Bertsch told his personal story about his recent health scare while going four a walk and having shortness of breath and chest pain. He reflected on the positive difference we as hospitals make to the patients and their families. He also mentioned that the association had a busy year. We were successful during this year’s legislative session. We need to be ready to move forward in the future from Volume to Value. Darrold ended by stating that we all need to ask ourselves, “What have I done for the association to make them stronger”.
* President - Jerry Jurena recognized Pam Cook and the Education Committee for putting together this year’s convention. Jerry touched base on the greatest challenge each hospital faces is maintaining the viability of the organization that each CEO is entrusted with. The survival of a hospital will be based on how adaptable the hospital’s management team and heir Board of Directors are. Each hospital has the same basic operational challenges. He mentioned he would like to suggest that we open the door to the future and create a series of meaningful discussions on changing the delivery of service hospital are providing. Discussion need to be multi-focused. Need regulatory people, legislators, consumers and third party payers as well as hospital people at the table. The outcome has to be a new process of delivering health care that is integrated and very transparent. One of the first items we will have to focus on is how hospitals can survive on the limited resources coming from State and Federal programs. Communities need to start asking what is it that they need in medical services and how do they meet those needs? Are communities discussing the possibility of a network or partnership with other providers? How much risk is the community willing to put on the table?
* 2015/2016 Proposed Budget – Callen Cermak, Finance Manager presented the Annual Budget. Proposed is a 2% dues increase. NDHA’s for profit subsidiary Hospital Services Inc. had a very successful year. NDHA dividend is 30% of after tax profit which is estimated to be a payment to NDHA of between $225,000 - $250,000. NDHA Foundation is financially very sound. Beyond the grant responsibilities, the Foundation paid out over $30,000 directly to members and budgeted $48,000 for 2015-2016, monies used are from investment earnings.
* Foundation report given by Pete Antonson, Chair. The board met twice this year. Investment balance as of August 2015 is over 4 million. The 2015/2016 budget is projecting a positive margin of $129,920. Sources of income come from a charitable contribution from NDHA’s subsidiary HSIsolutions and investment income. This past year the Foundation projects included the salary/benefit survey, economic hospital impact report, hospital indicators report, $750 NDHA member funding requests, website redesign and responsive website and provided funding for education speakers. The foundation is the mechanism through which all grants are administered. There are currently 6 grants that help support the not-for-profit status of the foundation and are administered on a “break-even” basis (pass-thru). For 2015/2016 the board approved in their budget to again to a one time NDHA member funding request with an increase of up to $1,000, provide up to $5000 for education costs for speakers, provide up to $5000 for the NDHA Board long term planning session and continue to provide financial support for the salary/benefit survey, economic hospital impact report and hospital indicators report.
* HSIsolutions report given by Kim Granfor, Vice President. HSIsolutions is a subsidiary of NDHA. They provide the following services: physician peer review, collections, group purchasing, Business Linx and physician recruitment. Milestones of HSIsolutions is that all divisions are profitable, is the largest contributor to the NDHA Foundation, dividend of 30% of bottom line goes to NDHA and is a diamond sponsor for the NDHA convention.

**Business Updates:**

* Paul Muraca, AHA Region 6 Exec and John Flink, NDHA Washington Consultant gave an AHA Advocacy and ND Delegation update of federal issues. On the “defense” we need to protect access and essential resources, extend critical programs and improve existing policies and programs. They mentioned the “triple cliff” – budget, debt ceiling and the highway bill.
* Hospital Engagement Network (HEN) – Barb Groutt from Quality Health Associates of ND gave an update on the HEN project. On September 24th AHA/HRET was awarded a contract by CMS to conduct HEN 2.0 for another year. The goals are the same, to reduce harm by 40% and reduce preventable readmissions by 20% through work on a variety of safety topics. A commitment letter will be coming out soon for your review and signature. By agreeing to participate in HEN 2.0 your hospital team will not only be working to provide the best patient care possible, but will have access to education, tools, and resources supplied by AHA/HRET.
* Loan Repayment Program – Mary Amundson, UND gave a brief update on the loan repayment program which offers primary care medical, dental, and mental and behavioral health care providers the opportunity to have their student loans repaid, while earning a competitive salary, in exchange for providing health care in urban, rural or frontier communities with limited access to care. She discussed the eligible disciplines, site eligibility, and provider eligibility.
* Physician Recruitment – Kevin Malee, Recruiter gave an overview of the NDHA Physician Recruitment Program. This cost saving collaborative project addresses physician shortages statewide, in an effort to better serve the healthcare needs of the people of ND. The 2015 program summary currently has 9 hospital searches, had over 100 candidate inquiries, 20 site visits scheduled and one candidate placed. Challenges we face: too cold, too isolated, amenities (shopping, airports, concerts and athletic events). Attractions are economy, housing, schools and quality of life.

Meeting adjourned.