

A G E N D A
Lander County Hospital District – Board of Trustees
Regular Session
May 14, 2025 - 5:30 P.M.
John Peters Health Services Center
Board Room
555 West Humboldt Street
Battle Mountain, NV

5:30 PM Call to Order – Regular Session

Pledge of Allegiance

Persons are invited to submit comments in writing and/or attend and make comments on any non-agenda items at the Board Meeting. All public comment may be limited to three (3) minutes per person, at the discretion of the Board. Reasonable restrictions may be placed on public comments based upon time, place and manner, but public comment based upon viewpoint may not be restricted.

Public Comment

❖ **Motion to Consent** – (Lemaire) - (Discussion for Possible Action)

- 1) May 14, 2025 Agenda Notice – Posted May 8, 2025
- 2) Infection Control report – April 2025
- 3) Emergency Operations Program/Policy & Procedure – April 2025
- 4) Board meeting minutes – April 9, 2025
- 5) Medical Staff appointments/reappointments:
 - Teleradiology Services, Tahoe Carson Radiology - Initial appointment:
Dr. Ivan Jambor
 - Teleradiology Services, Tahoe Carson Radiology – 2 year reappointments:
Dr. Farres Ahmed
Dr. John Erogul
Dr. Earl Jay Landrito
Dr. Stephen Loos
Dr. Gary Turner

Public Comment

❖ **Unfinished Business**

6) Critical Access Hospital Construction – (Lemaire) - (Discussion for Possible Action)

The Board will review and discuss updates on the hospital construction project and all other matters properly related thereto.

Public Comment

❖ **New Business**

- 7) Construction Change Order for an Updated Door Security System at the cost of \$101,722.00 – (Lemaire) – (Discussion for Possible Action)

The Board will review and discuss the need for an updated door security system in the construction project that will function throughout the hospital facility. Due to the time constraints of construction that exist, the Finance Committee approved the purchase of the new system on May 1, 2025, and now seek approval from the Board and all other matters properly related thereto.

Public Comment

- 8) BMGH 2025 Scholarship Committee Report - (Lemaire) – (Discussion for Possible Action)

The Board will review and discuss the Scholarship Committee's recommendations for awarding hospital scholarships to graduating high school students, hospital employees and returning college students, and all other matters properly related thereto.

Public Comment

❖ **Financials – (Lemaire) - (Discussion for Possible Action)**

- 9) March 2025 Financial Reports

The Board will review and discuss financial reports for March 2025 and all other matters properly related thereto.

Public Comment

❖ **Chief Executive Officer Summary – (Lemaire) - (Discussion only)**

- 10) Summary Report

Chief Executive Officer Jason Bleak, will present a summary of hospital activities to the Board of Trustees, and all other matters properly related thereto.

Public Comment

❖ **ADJOURN OPEN MEETING**

❖ **CLOSED SESSION**

❖ **A CLOSED SESSION WILL BE HELD IN ACCORDANCE WITH THE PROVISIONS OF NRS 241.033 to consider, review and ratify the employment agreement for Chalee Mullin, Advanced Practice Registered Nurse (APRN).**

Board will review and discuss the ratification of the employment agreement for Chalee Mullin to be an Advanced Practice Registered Nurse (APRN) when training and licensure are completed.

❖ **ADJOURN CLOSED SESSION**

❖ **CALL TO ORDER OPEN MEETING**

Discussion and Action approving the ratification of the employment agreement for Chalee Mullin, APRN, as presented.

Public comment

❖ **ADJOURNMENT REGULAR SESSION**

This is the tentative schedule for the meeting. The Board reserves the right to take items out of order to accomplish business in the most efficient manner. The Board may combine two or more agenda items for consideration. The Board may remove an item from the agenda or delay discussion relating to an item on the agenda at any time.

AFFIDAVIT OF POSTING

State of Nevada _____)

) ss

County of Lander _____)

Jessica Ceja, Recording Secretary of the Lander County Hospital District Board of Trustees, states that on the 04th day of May 2025, A.D., she was responsible for posting a notice, of which the attached is a copy, at the following locations: 1) Battle Mountain General Hospital, 2) Lander County Courthouse, 3) Battle Mountain Post Office, and 4) Austin Courthouse, all in said Lander County where the proceedings are pending.

RECORDING SECRETARY _____

Subscribed and sworn to before me on this 04th day of May 2025

WITNESS _____

Hepi L Boe

NOTICE TO PERSONS WITH DISABILITIES: Members of the public who wish to attend this meeting by teleconference or who may require assistance or accommodations at the meeting are required to notify the Hospital Board Recording Secretary in writing at Battle Mountain General Hospital, 535 South Humboldt Street, Battle Mountain, NV 89820, or telephone (775) 635-2550, Ext. 1111, at least two days in advance of pending meeting.

NOTICE: Any member of the public that would like to request any supporting material from the meeting, please contact, Jessica Ceja, Recording Secretary of the Lander County Hospital District Board of Trustees 535 South Humboldt Street, Battle Mountain, NV 89820 (775) 635-2550, Ext. 1111.

Via Zoom

(Barring technical difficulties)

Topic: Board - Regular Session 04 09 2025

Time: Apr 9, 2025 05:30 PM Pacific Time (US and Canada)

Join Zoom Meeting

<https://us02web.zoom.us/j/84281165814?pwd=8ebGcFnEdSvXxkoWHySxvHaOCph32R.1>

Meeting ID: 842 8116 5814

Passcode: 862508

Dial by your location

1-669-444-9171

Meeting ID: 842 8116 5814

Passcode: 862508

INFECTION CONTROL REPORT MEDICAL STAFF MEETING

APRIL 2025

1. Clinic had 9 procedures with 0 wound infection.
2. ER had 17 procedures with 3 wound infection.
3. 0 Needle sticks in APRIL, a total of 1 for the year.
4. Immunization shots:
 - ❖ 80% of the BMGH employees received the flu shot.
 - ❖ 1 LTC Residents received any vaccinations.
5. Flu Test:
 - ❖ 46 Positive A; 2 Positive B 0
 - ❖ 4 RSV Positive 0
 - ❖ 44 Influenza-like symptoms
6. Yearly TB testing:
 - ❖ 1 New hire employee tested positive for TB Quantiferon/TST; X-ray is clear.
7. House Cultures site:
 - ❖ Working closely with Nursing and Environmental Services and Maintenance on insect control. Infection control rounds have been conducted in Long Term Care. Corrective actions have been applied.
8. Hand Hygiene monitor is ongoing in Hospital and Clinic.
9. Complete hand washing and PPE in-service for the LTC residents and staff, as well as additional training for the CNAs at meal times.
10. Total Long Term Care Residents: 24; 3 Infection/s 3 SSTI; 4 UTI.
11. APRIL Acute 12 6 Infection/s
12. APRIL 1 Swing 1 Infection/s
13. Immunizations are recorded in Web IZ administered at BMGH. Required by State of Nevada.
14. Cultures need to be reported ASAP.
15. Infection Control – COVID-19 Reports:

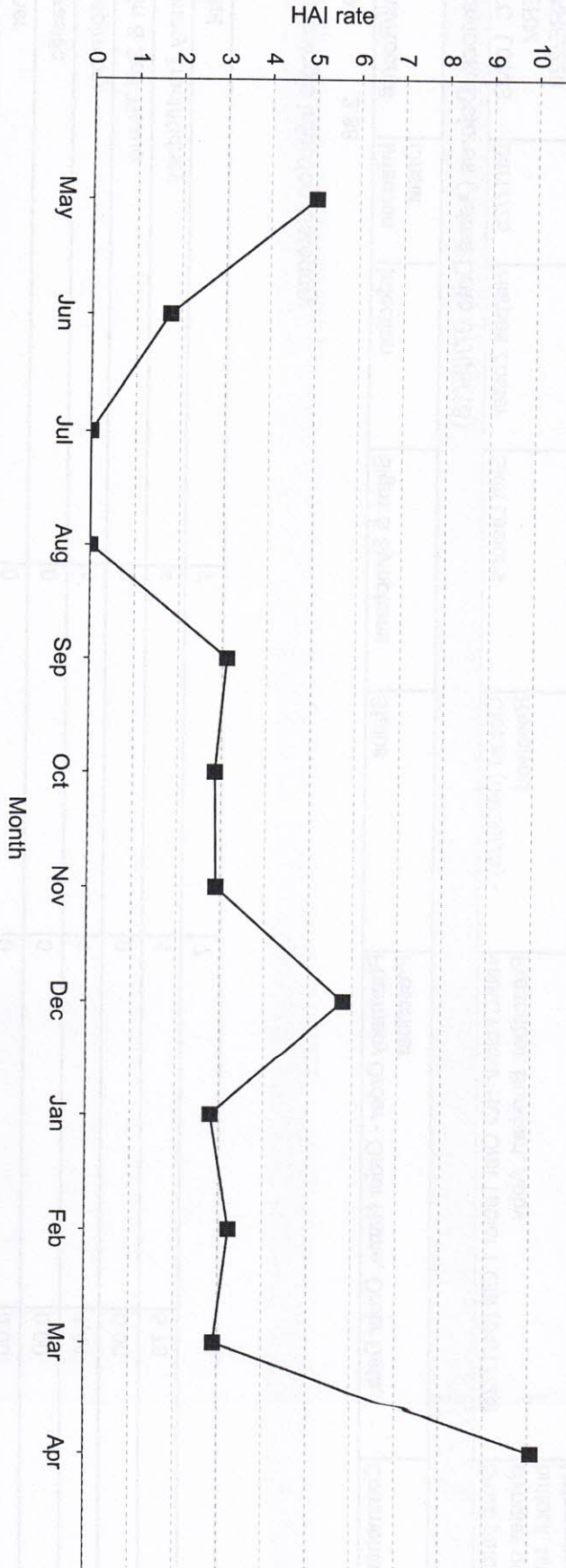
Tested: 44 Negative: 42 Positives: 2 Invalid: 0

No COVID positive case for all LTC residents and employees for the month of . APRIL
16. The policy in effect for masking during covid outbreak - if there is a positive employee or resident, whole facility needs to mask up.
17. As per CDC the 5 days' isolation for COVID positive patients is no longer mandatory; Less than 5 days of isolation is now allowed as long as the symptoms are resolved. This is for the general public only; no change on isolation policy for hospital settings, still 10 days for LTC.
18. Policy in effect for masking during Flu season- unvaccinated staff must wear mask around staff and patients.

Summary

Total Infection	CAI	HAI	HAI Rate	Number Of MDRO
7	0	7	10.07	0

HAI Rate 12-Month Trend



Summary By Infection Category

Infection Category	Total	HAI	HAI Rate
Blood/Systemic	0	0	0.00
Bone & Joint	0	0	0.00
Cardiovascular	0	0	0.00
Ear Nose, Mouth & Throat	0	0	0.00
Eye	0	0	0.00

Summary By Infection Category

Infection Category	Total	HAI	HAI Rate
Gastrointestinal	0	0	0.00
Genital	0	0	0.00
MDRO	0	0	0.00
Neurologic	2	2	2.88
Other	0	0	0.00
Parasitic	0	0	0.00
Respiratory	1	1	1.44
Skin & Soft Tissue	0	0	0.00
Urinary Tract/Kidney	4	4	5.76
Total	7	7	

Neurologic Infection Category

HAI 2.88

Unit/Room#	Infection Onset	Infection	Signs & Symptoms	Status	Pharmacy Order - Order Name, Order Date, Prescriber	Comments
LTC, LONG TERM CARE/	04/17/25	Herpes Zoster	Skin Lesions	Closed (04/26/25) - Resolved	ValACYclovir HCl Oral Tablet 1 GM (04/17/25) Prescriber: Burkhardt, Abby	Small patch of shingles on L buttock, take Valacyclovir BID x 7 days.
LTC, LONG TERM CARE/	09/03/24	Herpes Zoster	Skin Lesions	Closed (04/10/25) - Resolved	ValACYclovir HCl Oral Tablet 500 MG (09/12/24) Prescriber: Burkhardt, Abby	Started on Acyclovir 800mg PO every 5 hours x 5 days. Starting to come back, put on Valacyclovir 500mg PO QHS for preventative measures.

Respiratory Infection Category

HAI 1.44

Unit/Room#	Infection Onset	Infection	Signs & Symptoms	Status	Pharmacy Order - Order Name, Order Date, Prescriber	Comments
LTC. LONG TERM CARE/	04/25/25	Pneumonia	Difficulty breathing / Shortness of breath	Closed (05/04/25) - Resolved		Started on Z pack x 5 days.

Urinary Tract/Kidney Infection Category

HAI 5.76

Unit/Room#	Infection Onset	Infection	Signs & Symptoms	Status	Pharmacy Order - Order Name, Order Date, Prescriber	Comments
LTC. LONG TERM CARE/	04/23/25	Urinary Tract Infection	Confusion	Closed (05/01/25) - Resolved	Macrobid Oral Capsule 100 MG (04/23/25) Prescriber: Potterjones, Christine	Started on Macrobid 100mg PO BID x 7 days.
LTC. LONG TERM CARE/	04/28/25	Urinary Tract Infection	Confusion, New or marked increase in urgency	Closed (04/28/25) - Discharged	Macrobid Oral Capsule 100 MG (04/27/25) Prescriber: Potterjones, Christine	Started on Macrobid 100mg PO BID x 7 days.
LTC. LONG TERM CARE/	04/29/25	Urinary Tract Infection	Confusion, Extreme, unexplained tiredness, Loss of appetite	Closed (05/06/25) - Resolved	Doxycycline Hyclate Oral Capsule (04/29/25) Prescriber: Burkhart, Abby	Started on Doxycycline 100mg PO BID x 7 days.
LTC. LONG TERM CARE/	04/17/25	Urinary Tract Infection		Closed (04/22/25) - Resolved	Amoxicillin-Pot Clavulanate Tablet 875-125 MG (04/17/25) Prescriber: Burkhart, Abby	Starting augmentin 875-125mg PO BID x 5 days.



Battle Mountain
General Hospital

Board of Governance
Emergency Operation Program and Policy and Procedure Summary

Date: April 9, 2025

Policy and Procedure Committee Meeting Summary:

Coordinator is in the year long process of updating and revamping the MCN policy manager system. Getting all the formatting done to meet the CAH tag as part of the Conditions of participation. We have talked about creating a facility wide grouping for BMGH. Combine all the departmental policies to one facility wide policy. Example: Handwashing instead of having 26 departmental handwashing policy we would now have one for the whole facility. Another grouping would be forms so that all forms would carry a standardized message logo and clear communications with our public/patients and residents.

- **Nursing ED:**
Presented no major policy changes.
- **Risk Management/ Quality Assurance/ Patient Safety:**
Presented no major policy changes. Looking at changing the QAPI program in closing the circle. No new changes to the policies except the CMS Tag Number.
- **CAH Governance:**
All policies have stayed the same.

May Reporting Departments:

- **Infection Control- CAH & LTC**
- **CLIA Laboratory Clinic**
- **Physical Therapy**
- **Pharmacy**
- **Respiratory therapy**
- **ABG**

BMGH Policy and Procedure meeting meets CMS Conditions of Participation 42 CFR §485.635, (CAH Tag) & HIPAA Hi-Tech Regulations HIPAA 164.316 (a), [NIST SP 800-53 RA-1], [NIST SP 800-53 RA-3]

Emergency Operations Committee Meeting Summary:

MINUTES:

The BMGH Emergency Operations Program Committee Meeting, called to order at 09:09 am by Holly Heese.

- ♦ **Following up with the SERC Grant:** I have applied for state grants from the SERC the State Emergency Response Commission. BMGH is requesting 12,00 dollars for Papr's to replace ours outdated ones for Hazmat decon events.
- ♦ **Following up with Adrian Arnold Administer:** from Nevada Shared Radio Systems regarding the ED Radio System. Somehow I was left out of the communication with L3Harris so When Adrian Arnold asked what the holdup was I wasn't sure. I am in the process of fixing the situation to get BMGH in compliance for state radio pricing.



Battle Mountain
General Hospital

Board of Governance

Emergency Operation Program and Policy and Procedure Summary

- ◆ **Following up on BMGH Legionella Issue:** Court Coons Chem-Aqu, Inc. sent a proposal and agreements as well as several follow-up calls from Dave Merhi from Legionella Specialties concerning proposal and agreements. All information given to Jason. This quarter we only failed one of the four test sites.
- ◆ **Jason gave and update on the Construction Egress:** the interception between the Acute, ER, Radiology, Laboratory and business office is going to close for construction starting Monday April 14th. This closure should only be 30 days. Hopefully sooner than later. The different departments have made plans on how to handle situations that could arise during the closure. Jason has offered a hospital vehicle for Environmental Services, Food Nutritional Services and Materials Management to transport supplies and food. LTC has different plans depending on the situation. Closing signage is posted, uploaded on BMGH Website, and on BMGH socials.

MONTHLY UPDATES OF POLICIES/TRAININGS:

Hazmat training provided by Amanda Allegre Quality Assurance/Risk Manager

- ◆ Hazmat Spills Checklist
- ◆ Hazard Communications Program
- ◆ Hazmat spill
- ◆ Decontamination-Receiving and Handling
- ◆ Hazardous Waste Management
- ◆ Use of Handling of Supplies

All of the policies are separate and need to stay separate as that they identify departmental needs as well as things that are facility wide. One question is on the SDS Safety Data Sheet. A discussion was had on how to obtain the information and the need for an updated way to gather the information. Brynn will be working on the SDS books later this year. A suggestion was made that if a department is using chemicals on a regular basis they keep those SDS sheets easily available.

Example: Environmental Services SDS Cavicide.

Completed by: Holly Heese, Compliance Coordinator

- ◆ Policy and Procedure Coordinator
- ◆ Certified Hospital Emergency Coordinator

**LANDER COUNTY HOSPITAL DISTRICT BOARD OF TRUSTEES
REGULAR SESSION
JOHN PETERS HEALTH SERVICES CENTER
BOARD ROOM
555 W HUMBOLDT STREET
BATTLE MOUNTAIN, NV
April 9, 2025**

BOARD PRESENT:

Lyle Lemaire, Chairman
Shawn Mariluch, Vice Chair
Lyle Farr, Board Secretary via Zoom
Alicia Price, Commissioner Trustee

BOARD ABSENT:

Paula Tomera, Trustee

STAFF PRESENT:

Jason Bleak, Chief Executive Officer
Wayne Allen, Chief Financial Officer
Cindy Fagg, Director of Finance

GUESTS:

James Matheus via Zoom
Suzanne Lemaire
Wendy Naveran
Jodi Price
Hope Bauer
Kathy Freeman
Emily Benso

CALL TO ORDER

Chairman Lemaire called the April 9, 2025, Regular Session to order at 5:30 p.m.

PUBLIC COMMENT

No public comment.

MOTION TO CONSENT

By motion duly made (Mariluch), seconded (Price), and the Board unanimously passed the Agenda Notice for April 9, 2025, was approved.

Addendum 1

By motion duly made (Mariluch), seconded (Price), and the Board unanimously passed the Infection Control Report for March 2025 as discussed was approved.

Addendum 2

By motion duly made (Mariluch), seconded (Price), and the Board unanimously passed the Emergency Operations Program/Policy & Procedure meeting minutes for March 2025 as discussed was approved.

Addendum 3

By motion duly made (Mariluch), seconded (Price), passed the Board meeting minutes from March 12, 2025 as discussed was approved.

Addendum 4

UNFINISHED BUSINESS

Finance Subcommittee

Vice Chair Mariluch would like to nominate two Trustees for the Finance Subcommittee and he would like to request a different Trustee to attend if one of the Finance Subcommittee members' is not available.

By motion duly made (Mariluch), seconded (Price), and the Board unanimously passed that Lyle Lemaire and Shawn Mariluch serve on the 2025 Finance Subcommittee as discussed was approved.

NEW BUSINESS

Discontinuation of Payment for Board Subcommittee Participation

By motion duly made (Price), seconded (Mariluch), and the Board unanimously passed the discontinuation of payment for Board Subcommittee participation as discussed was approved.

Request for a Memorial Rose Garden

Chief Executive Officer Bleak met with Kathy Ancho's Pinochle Club to discuss a memorial rose garden and bench. The old Ancho memorial plaque located in front of the Battle Mountain Clinic has been replaced with a new Ancho memorial plaque. Additional benches will be purchased and placed around the facility. A group of Long Term Care Residents like to walk around the facility and asked CEO Bleak for additional benches. One bench will be located by the new sign; another two benches will be placed at the patio by the Battle Mountain Clinic. Another two benches will be placed by the front entrance of the hospital and one bench will be placed by the emergency entrance.

By motion duly made (Mariluch), seconded (Price), and the Board unanimously passed the request for the Memorial Rose Garden and benches dedicated to Kathy Lee Ancho as discussed was approved.

Addendum 5

Declaration of Critical Shortage PERS Eligibility for Part-Time Infection Preventionist Position

Battle Mountain General Hospital is seeking to fill a Part-time Infection Preventionist position, which is essential for ensuring the hospital's compliance with infection control standards, patient safety, and regulatory requirements. Due to the specialized nature of this role, the hospital has been unable to secure qualified candidates within the local labor market.

The Board of Trustees is requested to declare the Part-time Infection Preventionist position as a critical shortage position for purposes of PERS eligibility. This declaration will allow BMGH to consider and potentially rehire a qualified PERS retiree into the position, in accordance with NRS guidelines. It is recommended that the Board approve the declaration of the part-time Infection Preventionist position as a PERS critical shortage position, effective immediately.

Kathy Freeman, Human Resource Director explained that the Part-time Infection Preventionist position will need to be posted for fifteen days to declare the part-time Infection Preventionist position as a critical shortage position. This position has specific qualifications and requires a qualified individual with specialized training and education.

By motion duly made (Mariluch), seconded (Price), and the Board unanimously passed the declaration of the part-time Infection Preventionist position as a PERS critical shortage position as discussed was approved.

UNFINISHED BUSINESS

Critical Access Hospital Construction

Chief Executive Officer Bleak addressed the progress of the construction project. He reported the old air handlers are being removed and will be replaced with the new air handlers. The old generator will be removed as well. The Construction group is working on the new interior walls of Phase 3 and shared they are on target to be complete by June 30, 2025.

Construction Closure in front of the Physical Therapy department will be closed for 30 days starting on April 14, 2025. Once this area is closed, this will separate the building into two. In order to utilize services at the hospital from the clinic, an alternate route will need to be taken.

The new Long Term Care call system is almost fully installed.

CEO Bleak shared there was an area that had been overlooked during Construction and needs to be addressed. This is a small office that will need to be painted, new flooring and tiles for the ceiling will need to be installed. Per Mike Sheppard, this project will be a very minimal charge. In addition to the small office there is another room that needs to be repainted and will be utilized as an office for the Respiratory Therapist. Last, the double doors towards the Long Term Care area will be relocated down the hall and additional ceiling and flooring will need to be installed in that area as well.

CEO Bleak continued to report that BMGH currently utilizes an electronic key card system which needs to be updated. BMGH will need to decide which direction to take. BMGH will need to move away from this system, entirely or BMGH will need to upgrade the whole electronic key card system. CEO Bleak will provide more details as soon as it is available.

FINANCIALS

Chief Financial Officer Allen addressed the February 2025 Financial Reports with the Board. On page 4, displayed the Balance Sheet Summary for the month of February 2025. The Cash and Liquid Capital totaled \$18,931,629.33, the Short Term Investments displayed an amount of \$11,548,157.05, and the Long Term Investments totaled \$28,426,055.50.

Chief Financial Officer Allen continued to address page 5 of the February 2025 Financial Reports. The Gross Patient Revenue displayed an amount of \$1,488,197, which is less than last year and less than the budget. Same for the Year to Date categories. The Total Revenue Deductions displayed an amount of \$463,654, which is lower than budget, lower than last year and lower, year to date, which is good per Allen.

Chief Financial Officer Allen addressed the total Operating Expenses, which was lower than last year and lower than the budget. The Operating Expenses displayed a total of an estimated amount of \$11,500,000. The Net income totaled an amount of \$2,667,836.00

By motion duly made (Mariluch), seconded (Price), and the Board unanimously passed to accept the financial reports for February 2025 as discussed was approved.

Addendum 6

Chief Executive Officer Summary

Chief Executive Officer Bleak presented a summary of hospital activities to the Board of Trustees.

Tentative Budget: The Tentative Budget is prepared to be sent to the Board of Taxation. As the tentative budget, it does not require any specific approval. Each of the department managers have been involved by submitting their budget during individual budget meetings. Cindy Fagg, Wayne Allen and CEO Bleak have gone through the aggregated numbers to make sure they fit. Like the past few years, BMGH's budget has come together pretty nicely. Though BMGH is experiencing a downward trend in patient revenues, BMGH feels that the facility is situated nicely to receive good investment income. BMGH subtracted the requested expenses from the revenues, and have found that BMGH can again offer the staff a 2% merit bonus along with a 3% wage increase. BMGH will also provide a list of the capital expenditures that are needed in the next year. BMGH will continue to work with the budget to ensure it completeness. As requested, BMGH will schedule a Budget Workshop for the Board to look at the detailed budget in preparation for the final budget approval.

Cost Report Rejection: On April 7, 2025, BMGH was notified by CMS/Noridian that they were rejecting the last three cost reports due to a problem with the closure of the Kingston Clinic. These rejections have also resulted in CMS holding funds until the corrections are made and resubmitted. Along with the auditors(CLA), BMGH feels that this mistake was caused through procedural mistakes by CMS/Noridian. Though operations that tie out was effective 12/31/2020, the cost report reminder letters continued to instruct BMGH to include the Kingston Clinic on the facility's cost reports. If BMGH would have not followed the instructions of these letters, the cost report would have been rejected. CEO Bleak has requested that the cash flow be turned back on while BMGH makes the corrections. The resubmittal will happen within the next week.

Agape Hospice: In September 2023 the BMGH Board of Trustees took action to help Agape Hospice financially to get them over some organizational and certification hurdles. At that time, \$165,682 was approved for their assistance out of reserves and savings. At this point, \$104,279.99 has been paid toward their efforts. Mandy from Agape Hospice informed CEO Bleak that they have been focused on education, quality and compliance. Their consultant is coming to perform a mock survey in preparation for their licensure survey.

Provider Recruitment: BMGH is currently recruiting for clinic providers to join the team. On April 18, 2025, BMGH will welcome a nurse practitioner and her family from Texas to visit Battle Mountain. BMGH is putting together an agenda that will include a school tour, real estate tour, staff meeting and employment interviews. CEO Bleak is also meeting with one of the nurses that will complete her nurse practitioner training in November and has a desire to work as a provider here at BMGH.

CEO Bleak received notice from the Attorney General's Office regarding immigration policies for public facilities, more details will be provided per CEO Bleak.

NHA Day at the Legislature: On April 23, 2025, CEO Bleak will be participating with other hospital CEO's from around the state at the Nevada Hospital Association Day at the Legislature. This is an organized effort to meet with all of the legislators to advocate for the strengthening of Nevada hospitals and healthcare industry.

Think Health Thursday: April 3, 2025, BMGH began a new program for the benefit of the community. BMGH began Think Health Thursday in which the facility offered a Comprehensive Metabolic Panel, CBC, HBA1c and TSH tests all for \$65. Males can also have a PSA for an additional \$15. At this point, BMGH is planning to offer these services on the 1st Thursday of each month from 8 – 10am. This requires payment at the time of service. Results do not go to any provider. It is the responsibility of the patient to follow up with their provider for questions/concerns. In the first Think Health Thursday, BMGH ran labs for 14 patients.

Chili Cook Off: April 16, 2025, the various departments of the hospital will compete in the 1st Annual Team Chili Cook-Off. The chili dishes will be judged by a group of distinguished judges and then BMGH will enjoy a meal together. The festivities will begin around 11:30a.

National Hospital Week: From May 12 – 17, BMGH will celebrate National Hospital Week with a bunch of fun activities to bring the team together as BMGH salutes the good that is done every day here at BMGH. A list of activities will be sent out to Board Members as an invitation to join in the festivities. One of the final activities for the week is the BMGH Golf Tournament on May 17, 2025. All funds raised from the golf tournament benefit the Long Term Care Residents.

BMGH is scheduled to participate in two upcoming disaster drills. The first drill is a State Wide Disaster Drill that tests BMGH's emergency systems throughout the State. The second drill is the upcoming FEMA drill. BLM, Federal government entities, Elko County as well as the mines will participate.

Addendum 7

The Regular Session adjourned at 6:48 p.m. and a Closed Session was held to discuss the employment agreement/resignation for Dr. Genadi Maltinski.

The Closed Session adjourned at 7:05 p.m. and the Regular Session was called to order.

By motion duly made (Mariluch), seconded (Price), and the Board unanimously passed the employment agreement/resignation for Dr. Genadi Maltinski as discussed was approved.

PUBLIC COMMENT

No public comment.

ADJOURNMENT

With no further business, Vice Chairman Mariluch adjourned the Regular Session at 7:07 p.m.


Respectfully Submitted,

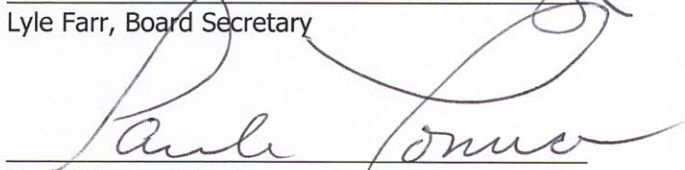
Jessica Ceja, Recording Secretary


BOARD SIGNATURES:


Lyle Lemaire, Board Chairman


Shawn Mariluch, Vice Chairman

APPROVED VIA ZOOM 
Lyle Farr, Board Secretary


Paula Tomera, Trustee


Alicia Price, Commissioner Trustee

Proposal

April 2, 2025

Tyson Zacharias
Battle Mountain General Hospital
535 S Humbolt Street
Battle Mountain, Nevada, 89820

RE:

Briggs Electric, Inc. (BEI) respectfully submits the following proposal based on the Job Walk on 3-12-25.

BASE BID \$101,722.00

CLARIFICATIONS

GENERAL:

- Below is a proposal per our discussion and site visit for the installation of a new hybrid wireless and wired access control system based on Paxton manufactured componentry and our layout drawing. We will provide you with the below listed materials for replacement installation of the antiquated Bright Blue system at the hospital location only as well as the new remodel/construction area.
- The Net2 plus control unit, plenum rated, connects to the central administration PC using an RJ45 plug into a standard TCP/IP Ethernet network. Net2 PaxLock is a battery powered Net2 access control unit in a secure door handle and comes ready to install with a C Keyway lock. Communication between Net2 PaxLock and the Net2 server is done wirelessly through Net2Air bridges, providing all the advantages of a wireless access control system. Net2 PaxLock is simple to use and fast to fit because it has a self-contained power source, making it ideal for internal doors.
- Net2 Software is designed to run on a PC with Windows operating systems. It is designed to feel familiar to any Windows user. It will organize and report on up to 50,000 users and 1,000 doors. Net2 Pro has advanced features like timesheet and timeline, which are time management bolt-ons, fire alarm and multi-zone intruder alarm integration, security lockdown, anti-passback and print card designer. This includes free upgrades, no license fees, and unlimited client workstations.
- Briggs Electric to provide installation of all materials, copper and fiber cabling, furnish POE switches and connection to four existing wired perimeter doors using existing hardware.
- Protect-A-Biz will kit new materials with enrollment to the Pro software as well as any firmware updates and assign an IP address to each device, readying for plug and play field installation. Due to the daily fluctuations of material prices, proposal is valid for (30) thirty days from the date above. Award after the (30) thirty-day period will require reassessment of proposal cost from time of bid.
- Proposal is based on using Cat 6 cable for wireless access points Backbone conductors.
- Proposal Switches are for Ubiquity Switches.



Parts:

• Paxton 682-610-US Two Door Access Kit, Net2 Plus in Metal Cabinet with 24 VAC Input Power Supply, Plenum Rated	2
• Paxton Net2 Pro Software	1
• Paxton Net2 Desktop USB Card Reader	1
• Paxton P50 Mullion Readers	4
• 120vac/24vac Plug In Transformer	4
• 12v/7AH Backup Battery	4
• Paxton NET2Air Bridge	13
• Paxton PaxLock C Keyway, Eclipse Wireless Lock, 921-131-US	31
• Paxton NET2 PaxLock Door Installation Jig	1
• Import User Furnished .CSV Existing Database	1
• Drawings, Floor Plans, Installation & Connection Details	1
• Paxton Proximity Cards, 10Pk	13
• Ubiquity Switches	3

Exclusions:

- Bond cost, permits, permit fees, and/or plan check fees.
- Overtime, Night Work, 2nd Shift, 3rd Shift, and/or accelerated schedule.
- Handling, containment, and hauling of hazardous material.
- X-ray, core drilling, cutting, painting, and patching of architectural materials.
- Access panels.
- Jobsite Security Personnel.
- Temporary power, heating, and lighting.
- Providing trash containers, hauling, and dump fees.
- Fireproofing, fire caulking, and/or fire stopping.
- Spare Parts

Thank you for giving Briggs Electric the opportunity to work with you on this project. If there are any questions, please contact me.

Briggs Electric has an Unlimited License.

This proposal is valid for Thirty (30) days.

Sincerely,

Kris Lott

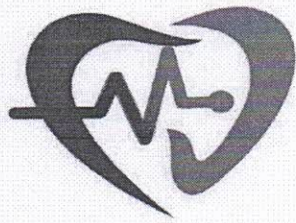
Systems Division Manager

775-444-6331

KrisL@briggselectric.com

Payment terms are net 30

Customer Signature: _____ **Date:** _____



Battle Mountain General Hospital

FINANCIALS

MARCH 2025

BATTLE MOUNTAIN GENERAL HOSPITAL
MARCH 2025
FINANCIAL STATEMENT REVIEW

BALANCE SHEET

ASSETS

- *Operating Cash at the end of March 2025 was \$1,449,110, with an additional \$1,416,299, in money market funds, LGIP Accounts of \$5,152, in the Construction Reserve, \$231,381, in the Capital Expenditures, and \$1,978,070, in the Operations Reserve, \$577,512 in the Savings Reserve, with long-term cash investments equal to an additional \$29,532,750. Balance of short-term investment accounts were, Operations Reserve \$11,000,795, Cap Ex Reserve \$3,095,777, Construction Reserve \$9,524,885.*
- *Gross accounts receivable had a balance of \$4,745,055 (total) and net accounts receivable (what we expect to collect) had a balance of \$576,099. The balance of the accounts receivable is made up of Athena A/R, \$4,784,610, Point Click Care A/R, \$251,419, Sharp Ambulance Billing A/R, 14,924, and (\$305,898) in Athena A/R Clearing accounts.*
- *Accounts payable balance at March month end was \$798,011.*
- *Total payroll liabilities were \$304,923, and is comprised mostly of accrued payroll and accrued vacation totals.*
- *Deferred Revenues are sitting at 620,000, which is the Helmsley Grant that was received but not all equipment has been purchased.*

INCOME STATEMENT

REVENUES

- Gross patient revenue for March was \$1,564,858 compared to a budget of \$1,640,595. March revenues came in under budget by \$75,737. March 's gross revenues were \$76,661 more than February's.

Month Ending 03/31/2024	Month To Date 03/31/2025			Prior Year To Date 03/31/2024	Year To Date 03/31/2025	
Actual	Actual	Budget 2025		Actual	Actual	Budget 2025
606,243	697,584	629,066	Emergency	5,647,038	5,905,645	5,661,590
0	14,929	24,235	Inpatient	35,598	105,296	218,121
519,862	411,586	540,128	Outpatient	5,022,854	4,221,455	4,861,152
5,437	43,196	6,226	Observation	51,283	88,662	56,029
173,409	134,996	177,153	Clinic	1,483,786	1,289,934	1,594,382
20,470	32,236	26,172	Swing bed	202,589	178,938	235,546
			Skilled nursing			
201,810	230,331	237,615	(SNF)	1,922,697	1,987,185	2,138,535
			Total Patient			
1,527,231	1,564,858	1,640,595	Revenue	14,365,845	13,777,115	14,765,355

- In March ER, OBS, and Swing were the only level of care that exceeded the budgeted amount. All other levels were under budget.
- Gross Clinic revenues were under budget in March at \$134,996, compared to a budget of \$177,153. The Clinic had a decrease in revenues of \$7,466, when compared to February's revenue numbers.

DEDUCTIONS

- Contractual Adjustments for March were \$335,132, with a budgeted amount of \$533,193.
- Bad debt was \$106,055, which is made up of Athena accounts, Bad Debt recovery, AR Allowance adjustment, and return on equity that is received from Noridian. Bad Debt Passthrough from Noridian was (\$5,096), EMS(SHARP) B/D write offs were 3,577, Athena write offs were \$466,766. Allowance adjustment was (350,000) and B/D recovery was (\$9,192).

EXPENSES

- Total Operating Expenses for March were \$1,484,699 compared to a budget of \$1,590,038, under budget, or a difference of \$105,339.
- Employee Related Expenses were \$893,359 as compared to a budget of \$927,382 which is 4% under budget for the month.
-

OPERATING INCOME AND NET INCOME

- During the month of March BMGH overall experienced (Loss)/Gain from operations of (\$302,093) as compared to a budgeted net loss of (\$543,180), YTD as of March (\$3,103,498).
- The Overall (Loss)/Gain for the month of March was 225,114 compared to a budget of \$2,103 YTD (Loss)Gain was 2,892,950, compared to the budgeted amount of 18,928.

Battle Mountain General Hospital
Balance Sheet -- Summary
As of March 31, 2025

Reporting Book:

As of Date:

Location:

ACCRUAL

03/31/2025

Battle Mountain General Hospital

	Month Ending 03/31/2025 Actual	Month Ending 06/30/2024 Actual
Assets		
Current Assets		
Cash and Liquid Capital	17,744,285.89	27,289,977.59
Short Term Investments		
TBILL-Operations Reserve	5,400,000.00	3,500,000.00
TBILL-Construction Reserve	4,700,000.00	0.00
TBILL-Capital Expenditures Reserve	1,500,000.00	0.00
Mark to Market - TBILLS	(12,317.81)	(5,089.59)
Total Short Term Investments	11,587,682.19	3,494,910.41
Accounts Receivable, Net of Allowance		
Accounts Receivable	4,745,054.93	4,991,493.76
Allowances against Receivables	4,168,956.27	3,903,956.27
Total Accounts Receivable, Net of Allowance	576,098.66	1,087,537.49
Other Receivables	(141,156.45)	6,184,701.63
Inventory	629,734.82	593,324.05
Prepaid Expenses	83,552.05	100,783.96
Total Current Assets	30,480,197.16	38,751,235.13
Long Term Assets		
Fixed Assets, Net of Depreciation		
Fixed Assets	41,108,972.16	40,340,500.83
Accumulated Depreciation	26,288,096.06	24,897,903.79
Construction in Progress	16,339,042.50	14,639,484.57
Total Fixed Assets, Net of Depreciation	31,159,918.60	30,082,081.61
Total Long Term Assets	31,159,918.60	30,082,081.61
Long Term Investments		
Wells Fargo - Long Term Investments	29,580,000.00	20,987,000.00
Mark to Market - Long Term Investments	(47,250.00)	(392,028.34)
Total Long Term Investments	29,532,750.00	20,594,971.66
Deferred Outflow (Pension Liability)		
Deferred Outflow (Pension Liability)	4,975,083.00	4,975,083.00
Total Deferred Outflow (Pension Liability)	4,975,083.00	4,975,083.00
Total Assets	96,147,948.76	94,403,371.40
Liabilities		
Current Liabilities		
Accounts Payable	798,011.17	1,479,815.47
Accrued Taxes	(0.03)	(0.02)
Accrued Payroll and Related	304,923.06	392,155.85
Deferred Revenue	620,000.00	952,000.00
Total Current Liabilities	1,722,934.20	2,823,971.30
Suspense Liabilities	(222,294.26)	(174,958.70)
Uncategorized Liabilities	14,607,890.00	14,607,890.00
Total Liabilities	16,108,529.94	17,256,902.60
Retained Earnings	79,814,304.43	71,910,386.43
Net Income	225,114.30	5,236,082.37

See Accompanying Notes to the Financial Statements

Battle Mountain General Hospital
Income Statement - Detail against Budget
As of March 31, 2025

Reporting Book: ACCRUAL
As of Date: 03/31/2025

Month Ending 03/31/2024	Month To Date 03/31/2025			Prior Year To Date 03/31/2024	Year To Date 03/31/2025	
Actual	Actual	Budget 2025		Actual	Actual	Budget 2025
606,243	697,584	629,066	Emergency	5,647,038	5,905,645	5,661,690
0	14,929	24,235	Inpatient	35,598	105,296	218,121
519,862	411,586	540,128	Outpatient	5,022,854	4,221,455	4,861,152
5,437	43,196	6,226	Observation	51,283	88,662	56,029
173,409	134,996	177,153	Clinic	1,483,786	1,289,934	1,594,382
20,470	32,236	26,172	Swing bed	202,589	178,938	235,546
201,810	230,331	237,615	Skilled nursing (SNF)	1,922,697	1,987,185	2,138,535
1,527,231	1,564,858	1,640,595	Total Patient Revenue	14,365,845	13,777,115	14,765,355
86,905	335,132	533,193	Contractual Adjustments	4,025,976	3,786,582	4,798,734
208,303	115,247	98,435	Bad Debt	1,161,047	805,497	885,921
(4,738)	(9,192)	0	Bad Debt Write Off Hospital/Clinic	(42,426)	(59,463)	0
203,565	106,055	98,435	Bad Debt Recovery	1,118,621	746,034	885,921
0	1,726	0	Total Bad Debt	(10,056)	2,396	0
290,470	442,913	631,628	Revenue Deductions	5,134,541	4,535,012	5,684,655
0	3,515	333	Total Revenue Deductions			
0	0	0	Incentive Revenue	1,525	4,173	3,000
0	3,515	333	Capitalized Revenue	0	(60)	0
1,236,761	1,125,460	1,009,300	Total Other Patient Revenue	1,525	4,113	3,000
59,233	57,146	37,558	Total Net Patient Revenue	9,232,829	9,246,216	9,083,700
376,417	387,449	387,450	Other Operating Revenue	502,497	629,953	338,025
121,239	140,043	158,333	Non-Operating Revenue	3,340,812	3,918,587	3,487,046
497,656	527,492	545,783	Interest Income	1,875,957	2,080,449	1,425,000
1,793,650	1,710,098	1,592,641	Total Non-Operating Revenue	5,216,769	5,999,036	4,912,046
28,515	16,423	24,765	Total Income before Expenses	14,952,095	15,875,205	14,333,771
4,971	5,557	3,694	Repairs and Maintenance	193,098	189,782	222,890
893,158	893,359	927,382	Leases and Rental Expenses	41,246	63,660	33,244
99,150	133,213	110,821	Employee Related Expenses	7,701,340	7,712,029	8,346,434
332,342	214,712	227,922	Supplies	910,286	986,088	997,393
2,167	3,186	11,625	Contract Services	2,385,788	2,032,444	2,051,293
1,360,303	1,266,450	1,306,209	Other Department Expenses	89,387	89,754	104,531
22,015	20,260	27,059	Total Departmental Expenses	11,321,145	11,073,757	11,755,885
35,552	23,060	40,203	Hospital Insurance Expenses	205,013	180,363	243,525
159,926	157,476	210,583	Utilities	331,462	217,098	361,829
10	5,366	4,169	Depreciation and Amortization	1,443,870	1,401,911	1,895,250
7,244	5,411	1,565	Recruitment and Credentialing	8,150	34,708	37,519
0	6,676	250	Other Fees	15,484	21,452	14,085
224,747	218,249	283,829	Other Operating Expenses	35,596	50,378	2,250
1,585,050	1,484,699	1,590,038	Total General and Administrative Expenses	2,039,575	1,905,910	2,554,458
418	285	500	Total Operating Expenses	13,360,720	12,979,667	14,310,343
1,585,468	1,484,984	1,590,538	Non-Operating Expenses	3,739	2,588	4,500
208,182	225,114	2,103	Total Expenses	13,364,459	12,982,255	14,314,843
			Total Net Income	1,587,636	2,892,950	18,928

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See Accompanying Notes to the Financial Statements

**Battle Mountain General Hospital
Wells Fargo - Operating Account
MARCH 2025**

Beginning Balance:

Cash in Operating Account for Operations	4,176,340.52	
Petty Cash - Hospital	1,700.00	4,178,040.52

Deposits

Ad Valorem	191,444.76	
Net Proceeds of Mines	0.00	
Consolidated Tax	62,229.92	
County JPHSC EMS Rent	4,000.00	
340B	34,197.52	
DSH	0.00	
Cost Report 2024	0.00	
Misc/Rebates/Dietary	11,955.34	
Hospital/Clinic Receipts	1,195,088.28	
		1,498,915.82

Expenditures:

Accounts Payable	507,926.67	
Construction	295,338.44	
Athena	29,113.68	
Allied Insurance	44,286.52	
Payroll (Net)	624,194.83	
Payroll Taxes	125,049.59	
Transfer to Money Market for investments	1,300,000.00	
Transfer to LGIP Operating Reserves	1,300,000.00	
Merchant Charges	236.25	
		4,226,145.98

Ending Balance:

Cash in Operating Account for Operations	1,449,110.36	
Petty Cash - Hospital	1,700.00	<u>1,450,810.36</u>
	1,450,810.36	

*Operations Reserve*Wells Fargo Securities, LLC
Wells Fargo Bank, N.A.

Combined Account Summary

Statement Period
03/01/2025 - 03/31/2025BATTLE MOUNTAIN GENERAL HOSPITAL
535 S HUMBOLDT ST
Account Number
141223644**Total Account Value Summary - US Dollar (USD)**This summary does not reflect the
value of unpriced securities.
Repurchase agreements are reflected
at par value.

	Amount Last Statement Period	Amount This Statement Period	% Portfolio
Cash	\$ 0.00	\$ 0.00	0%
Money Market Mutual Funds	5,588,383.23	5,606,528.74	51%
Bonds	5,375,866.21	5,394,265.85	49%
Stocks	0.00	0.00	0%
Total Account Value	\$ 10,964,249.44	\$ 11,000,794.59	100%
Value Change Since Last Statement Period		\$ 36,545.15	0%
Percent Increase Since Last Statement Period			0%
Value Last Year-End		\$ 10,878,424.85	1%
Percent Increase Since Last Year-End			1%

***Includes amortized Par value of municipal leases and notes.

Total Income Summary USD

	This Period	Year-To-Date
Interest	\$ 0.00	\$ 0.00
Dividends/Capital Gains	0.00	0.00
Money Market Mutual Funds Dividends	18,145.51	66,984.96
Other	0.00	0.00
Income Total	\$ 18,145.51	\$ 66,984.96

Total Interest Charged USD

Description	This Period
Debit Interest For March 2025	0.00
Total Interest Charged	\$ 0.00

Total Money Market Mutual Funds Summary USD

Description	Amount
Opening Balance	\$ 5,588,383.23
Deposits and Other Additions	0.00
Distributions and Other Subtractions	0.00
Dividends Reinvested	18,145.51
Change in Value	0.00
Closing Balance	\$ 5,606,528.74

Construction Reserve

Wells Fargo Securities, LLC
Wells Fargo Bank, N.A.

Combined Account Summary

Statement Period
03/01/2025 - 03/31/2025

BATTLE MOUNTAIN GENERAL HOSPITAL
535 S HUMBOLDT ST

Account Number
1462250148

Total Account Value Summary - US Dollar (USD)

This summary does not reflect the value of unpriced securities. Repurchase agreements are reflected at par value.

	Amount Last Statement Period	Amount This Statement Period	% Portfolio
Cash	\$ 0.00	\$ 0.00	0%
Money Market Mutual Funds	4,814,243.83	4,829,875.70	51%
Bonds	4,678,994.67	4,895,009.16	49%
Stocks	0.00	0.00	0%
Total Account Value	\$ 9,493,238.50	\$ 9,524,884.86	100%
Value Change Since Last Statement Period		\$ 31,646.36	0%
Percent Increase Since Last Statement Period			0%
Value Last Year-End		\$ 9,418,904.02	1%
Percent Increase Since Last Year-End			1%

***Includes amortized Par value of municipal leases and notes.

Total Income Summary USD

	This Period	Year-To-Date
Interest	\$ 0.00	\$ 0.00
Dividends/Capital Gains	0.00	0.00
Money Market Mutual Funds Dividends	15,631.87	57,775.58
Other	0.00	0.00
Income Total	\$ 15,631.87	\$ 57,775.58

Total Interest Charged USD

Description	This Period
Debt Interest For March 2025	0.00
Total Interest Charged	\$ 0.00

Total Money Market Mutual Funds Summary USD

Description	Amount
Opening Balance	\$ 4,814,243.83
Deposits and Other Additions	0.00
Distributions and Other Subtractions	0.00
Dividends Reinvested	15,631.87
Change in Value	0.00
Closing Balance	\$ 4,829,875.70

CAP-EX

Wells Fargo Securities, LLC
Wells Fargo Bank, N.A.

Combined Account Summary

Statement Period
03/01/2025 - 03/31/2025

BATTLE MOUNTAIN GENERAL HOSPITAL
535 S HUMBOLDT ST

Account Number
#0000000000

Total Account Value Summary - US Dollar (USD)

This summary does not reflect the value of unpriced securities. Repurchase agreements are reflected at par value.

	Amount Last Statement Period	Amount This Statement Period	% Portfolio
Cash	\$ 0.00	\$ 0.00	0%
Money Market Mutual Funds	1,592,199.85	1,597,369.73	52%
Bonds	1,493,296.17	1,498,407.18	48%
Stocks	0.00	0.00	0%
Total Account Value	\$ 3,085,496.02	\$ 3,095,776.91	100%
Value Change Since Last Statement Period		\$ 10,280.89	0%
Percent Increase Since Last Statement Period			0%
Value Last Year-End		\$ 3,061,363.37	1%
Percent Increase Since Last Year-End			1%

***Includes amortized Par value of municipal leases and notes.

Total Income Summary USD

	This Period	Year-To-Date
Interest	\$ 0.00	\$ 0.00
Dividends/Capital Gains	0.00	0.00
Money Market Mutual Funds Dividends	5,169.88	19,028.88
Other	0.00	0.00
Income Total	\$ 5,169.88	\$ 19,028.88

Total Interest Charged USD

Description	This Period
Debit Interest For March 2025	0.00
Total Interest Charged	\$ 0.00

Total Money Market Mutual Funds Summary USD

Description	Amount
Opening Balance	\$ 1,592,199.85
Deposits and Other Additions	0.00
Distributions and Other Subtractions	0.00
Dividends Reinvested	5,169.88
Change in Value	0.00
Closing Balance	\$ 1,597,369.73



Long term Money Market

Wells Fargo Securities, LLC
Wells Fargo Bank, N.A.

Statement Period
03/01/2025 - 03/31/2025

Combined Account Summary

BATTLE MOUNTAIN GENERAL HOSPITAL
535 S HUMBOLDT ST

Account Number
1115000002

Total Account Value Summary - US Dollar (USD)

This summary does not reflect the
value of unpriced securities.
Repurchase agreements are reflected
at par value.

	Amount Last Statement Period	Amount This Statement Period	% Portfolio
Cash	\$ 55,846.88	\$ 247,778.90	1%
Money Market Mutual Funds	1,114,030.00	1,168,519.89	4%
Bonds	28,426,055.50	29,532,750.00	95%
Stocks	0.00	0.00	0%
Total Account Value	\$ 29,595,932.38	\$ 30,949,048.79	100%
Value Change Since Last Statement Period	\$	\$ 1,353,116.41	5%
Percent Increase Since Last Statement Period			5%
Value Last Year-End	\$	\$ 28,975,909.77	7%
Percent Increase Since Last Year-End			7%

***Includes amortized Par value of municipal leases and notes.

Total Income Summary USD

	This Period	Year-To-Date
Interest	\$ 5,879.99	\$ 432,674.10
Dividends/Capital Gains	0.00	0.00
Money Market Mutual Funds Dividends	3,497.40	6,500.75
Other	0.00	0.00
Income Total	\$ 9,377.39	\$ 439,174.85

Total Interest Charged USD

Description	This Period
Debit Interest For March 2025	0.00
Total Interest Charged	\$ 0.00

Total Money Market Mutual Funds Summary USD

Description	Amount
Opening Balance	\$ 1,114,030.00
Deposits and Other Additions	1,358,947.97
Distributions and Other Subtractions	(1,307,955.48)
Dividends Reinvested	3,497.40
Change in Value	0.00
Closing Balance	\$ 1,168,519.89

Battle Mountain General Hospital
LGIP - Reserve Accounts
MARCH 2025

Beginning Balance:

LGIP - Operations Reserve	672,622.76	
LGIP - Construction Reserve	5,132.82	
LGIP - Capital Expenditures Reserve	230,526.50	
LGIP - SAVINGS	575,379.15	1,483,661.23

Deposits:

Interest Operations Reserve	5,447.50	
Transfer in from Operating Acct	1,300,000.00	
Interest Construction Reserve	19.03	
Interest Capital Expenditures Reserve	854.63	
Interest Savings	2,133.10	1,308,454.26

Expenditures:

<i>Purchase of Treasury Bills</i>	LGIP - Operations Reserve	0.00	
<i>Purchase of Treasury Bills</i>	LGIP - Construction Reserve	0.00	
<i>Purchase of Treasury Bills</i>	LGIP - Capital Expenditures Reserve	0.00	
	LGIP - Savings	0.00	0.00

Ending Balance:

LGIP - Operations Reserve	1,978,070.26	
LGIP - Construction Reserve	5,151.85	
LGIP - Capital Expenditures Reserve	231,381.13	
LGIP - Savings	577,512.25	2,792,115.49
	2,792,115.49	

Battle Mountain General Hospital
Schedule of Patient Revenue vs. Patient Payments
Fiscal Years ending June 30, 2024 & 2025

Fiscal Year ending June 30, 2024

Month/Year	Gross Patient Monthly Revenue	Three Month Rolling Average	Patient Payments	Patient Pymts % vs. Rolling Avg.
Jul-23	\$1,744,249	\$1,496,730	\$1,129,987	75.5%
Aug-23	\$1,646,627	\$1,576,053	\$1,185,199	75.2%
Sep-23	\$1,605,096	\$1,665,324	\$939,528	56.4%
Oct-23	\$1,639,373	\$1,630,365	\$1,033,439	63.4%
Nov-23	\$1,518,939	\$1,587,803	\$1,279,843	80.6%
Dec-23	\$1,442,194	\$1,533,502	\$960,516	62.6%
Jan-24	\$1,723,518	\$1,561,550	\$904,238	57.9%
Feb-24	\$1,518,618	\$1,561,443	\$1,047,944	67.1%
Mar-24	\$1,527,231	\$1,589,789	\$945,921	59.5%
Apr-24	\$1,504,163	\$1,516,671	\$730,309	48.2%
May-24	\$1,408,658	\$1,480,017	\$828,687	56.0%
Jun-24	\$1,337,284	\$1,416,702	\$719,662	50.8%
YTD 12 mo. AVG	\$1,551,329	\$1,551,329	\$975,439	62.9%

Fiscal Year ending June 30, 2025

Month/Year	Gross Patient Monthly Revenue	Three Month Rolling Average	Patient Payments	Patient Pymts % vs. Rolling Avg.
Jul-24	\$1,455,416	\$1,400,453	\$796,186	56.9%
Aug-24	\$1,449,563	\$1,414,088	\$888,117	62.8%
Sep-24	\$1,674,162	\$1,526,380	\$985,409	64.6%
Oct-24	\$1,616,094	\$1,579,940	\$1,896,715	120.0%
Nov-24	\$1,432,407	\$1,574,221	\$1,113,188	70.7%
Dec-24	\$1,672,675	\$1,573,725	\$1,050,996	66.8%
Jan-25	\$1,423,743	\$1,509,608	\$1,093,255	72.4%
Feb-25	\$1,488,197	\$1,528,205	\$931,967	61.0%
Mar-25	\$1,564,858	\$1,492,266	\$1,195,088	80.1%
Apr-25				
May-25				
Jun-25				
YTD 9 mo. AVG	\$1,530,791	\$1,510,987	\$1,105,658	73.2%

MARCH

NINE Month Year-to-date 2024		NINE Month Year-to-date 2025		Changes Greater than \$5K FY 2023 Increase (Decrease)	
	Sum of Charges		Sum of Charges		
Ambulance	538,253.70	Ambulance	0.00	(538,253.70)	100%
Outpatient	538,253.70	Outpatient	0.00	(538,253.70)	100%
CM - Blood Bank	19,075.19	CM - Blood Bank	55,486.03	36,410.84	191%
Emergency	10,552.29	Emergency	29,801.81	19,249.52	182%
Outpatient	8,522.90	Outpatient	25,684.22	17,161.32	201%
Swing bed	0.00	Swing bed	0.00		
CM - Central Supply	8,976.53	CM - Central Supply	7,877.02		
Emergency	8,927.66	Emergency	7,877.02		
Observation	-34.65	Observation	0.00		
Outpatient	83.52	Outpatient	0.00		
CM - CT Scan	1,808,210.35	CM - CT Scan	2,049,164.98	240,954.63	13%
Emergency	1,381,674.92	Emergency	1,624,199.25	242,524.33	18%
Inpatient	0.00	Inpatient	6,739.18	6,739.18	100%
Observation	1,593.44	Observation	0.00		
Outpatient	424,841.99	Outpatient	414,967.85	(9,874.14)	-2%
Swing bed	0.00	Swing bed	3,258.70		
CM - Infusion	507,313.40	CM - Infusion	581,609.28	74,295.88	15%
Emergency	412,266.58	Emergency	487,862.18	75,595.60	18%
Inpatient	2,143.27	Inpatient	513.90		
Observation	9,336.31	Observation	15,134.69	5,798.38	62%
Outpatient	82,891.18	Outpatient	75,498.80	(7,392.38)	-9%
Swing bed	676.06	Swing bed	2,599.71		
CM - Laboratory	2,829,094.83	CM - Laboratory	2,610,905.67	(218,189.21)	-8%
Emergency	717,753.62	Emergency	745,595.48	27,841.86	4%
Inpatient	765.38	Inpatient	4,831.33		
Observation	2,939.17	Observation	10,420.03	7,480.86	255%
Outpatient	2,100,726.51	Outpatient	1,845,782.14	(254,944.37)	-12%
Swing bed	6,910.20	Swing bed	4,276.69		
CM - MRI	302,744.55	CM - MRI	282,458.46	(20,286.09)	-7%
Emergency	0.00	Emergency	2,933.19		
Inpatient	0.00	Inpatient	0.00		
Outpatient	302,744.55	Outpatient	279,525.27	(23,219.28)	-8%
CM - Observation	16,976.79	CM - Observation	30,325.14	13,348.35	79%
Observation	16,976.79	Observation	30,325.14	13,348.35	79%
CM - Pharmacy	497,051.00	CM - Pharmacy	504,971.34	7,920.34	2%
Emergency	191,854.75	Emergency	157,215.81	(34,638.94)	-18%
Inpatient	517.85	Inpatient	10,063.87	9,546.02	1843%
Observation	2,272.24	Observation	8,380.78	6,108.54	269%
Outpatient	288,230.94	Outpatient	311,052.29	22,821.35	8%
Swing bed	14,175.22	Swing bed	18,258.59		
CM - Physical Therapy	813,301.26	CM - Physical Therapy	732,652.61	(80,648.65)	-10%
Emergency	0.00	Emergency	1,693.25		
Inpatient	147.00	Inpatient	7,513.33	7,366.33	5011%
Observation	0.00	Observation	696.93		
Outpatient	786,682.96	Outpatient	697,053.25	(89,629.71)	-11%
Swing bed	26,471.30	Swing bed	25,695.85		
CM - Professional Fees	59,958.94	CM - Professional Fees	39,708.66	(20,250.28)	-34%
Emergency	59,924.21	Emergency	39,026.82	(20,897.39)	-35%
Observation	0.00	Observation	681.84		
Outpatient	34.73	Outpatient	0.00		
CM - Radiology	480,384.04	CM - Radiology	513,771.49	33,387.45	7%
Emergency	205,176.05	Emergency	194,192.63	(10,983.42)	-5%
Inpatient	0.00	Inpatient	2,439.91		
Observation	0.00	Observation	2,006.12		
Outpatient	274,508.86	Outpatient	313,137.34	38,628.48	14%
Swing bed	1,199.13	Swing bed	1,995.49		
CM - Ultrasound	187,188.92	CM - Ultrasound	174,629.71	(12,559.21)	-7%
Emergency	20,872.83	Emergency	22,460.33		
Inpatient	0.00	Inpatient	0.00		
Observation	0.00	Observation	0.00		
Outpatient	166,316.09	Outpatient	152,169.38	(14,146.71)	-9%

MARCH

NINE Month Year-to-date 2024 Sum of Charges		NINE Month Year-to-date 2025 Sum of Charges		Changes Greater than \$5K FY 2023 Increase (Decrease)	
OM-Swing Bed	7,422.50	OM-Swing Bed	11,120.14		
Swing bed	7,422.50	Swing bed	11,120.14		
Emergency	2,451,958.61	Emergency	2,414,126.25	(37,832.36)	-2%
Emergency	2,444,261.18	Emergency	2,409,391.36	(34,869.82)	-1%
Inpatient	1,368.20	Inpatient	2,873.22		
Observation	3,046.83	Observation	240.79		
Outpatient	3,282.40	Outpatient	1,784.47		
Swing bed	0.00	Swing bed	-163.59		
Med/Surg	38,532.08	Med/Surg	85,031.38	46,499.30	121%
Emergency	0.00	Emergency	550.87		
Inpatient	25,815.52	Inpatient	69,354.34	43,538.82	169%
Observation	12,716.56	Observation	15,126.17		
Swing bed	0.00	Swing bed	0.00		
Respiratory Therapy	206,566.85	Respiratory Therapy	215,100.94	8,534.09	4%
Emergency	147,283.21	Emergency	157,714.95	10,431.74	7%
Inpatient	745.30	Inpatient	966.55		
Observation	2,336.38	Observation	5,649.62		
Outpatient	40,167.72	Outpatient	45,926.49	5,758.77	14%
Swing bed	16,034.24	Swing bed	4,843.33	(11,190.91)	-70%
OP Lab/Rad	989.64	OP Lab/Rad	3,417.75		
Outpatient	989.64	Outpatient	3,417.75		
SNF/Respite	122,482.50	SNF/Respite	107,835.66	(14,646.84)	-12%
Inpatient	0.00	Inpatient	0.00		
Swing bed	122,482.50	Swing bed	107,835.66	(14,646.84)	-12%
Clinic	1,546,166.00	Clinic	1,369,737.56	(176,428.44)	-11%
Clinic	1,483,786.12	Clinic	1,289,933.85	(193,852.27)	-13%
Emergency	46,490.64	Emergency	21,712.70	(24,777.94)	-53%
Inpatient	4,095.22	Inpatient	-0.04		
Observation	4,576.84	Observation	0.00		
Outpatient	0.00	Outpatient	58,873.72	58,873.72	100%
Swing bed	7,217.18	Swing bed	-782.67	(7,999.85)	-111%
LTC	1,922,697.40	LTC	1,987,185.00	64,487.60	3%
Grand Total	14,365,845.13	Grand Total	13,777,115.07	(588,730.06)	-4%

Company name: Battle Mountain General Hospital
 Report name: Check register
 Created on: 4/14/2025

Bank	Date	Vendor	Document no.	Amount
	3/9/2025	810--mChed	4253990125W	1,324.45
	3/11/2025	9006--HERMAN, PAUL	ACH	35,344.50
	3/13/2025	100100--FARMER BROS. CO.	ACH	230.75
	3/13/2025	100141--PUBLIC EMPLOYEES BENEFIT PROGRAM	111457	2,563.14
	3/13/2025	1079--SIEMENS HEALTHCARE DIAGNOSTICS	ACH	1,333.77
	3/13/2025	10--NOVARAD CORPORATION	111465	1,037.13
	3/13/2025	11--CORCOM COMMUNICATION	111432	699.00
	3/13/2025	120015--LIDON	111459	8,490.94
	3/13/2025	12--QUEST DIAGNOSTICS	111469	64.20
	3/13/2025	130031--MCKESSON DRUG COMPANY	ACH	3,662.00
	3/13/2025	130044--MEDLINE INDUSTRIES, INC.	111460	5,911.15
	3/13/2025	130049--MIDWAY MARKET	111462	377.70
	3/13/2025	136--BRACCO DIAGNOSTICS INC.	111419	420.95
	3/13/2025	1391--WYNSTAR/ ZIMMED INC	ACH	1,256.55
	3/13/2025	140027--RELIASTAR LIFE INSURANCE COMPANY	111470	550.00
	3/13/2025	140045--INORCO, INC	111454	45.00
	3/13/2025	1441--CTA INC/ CUSHING TERRELL	ACH	24,297.99
	3/13/2025	150000--OFFICE PRODUCTS INC (OPI)	ACH	581.00
	3/13/2025	1551--RT TECHNOLOGIES	111471	2,115.00
	3/13/2025	1601--WERRIN USA LLC	ACH	1,394.70
	3/13/2025	180008--LANDIER HARDWARE	111458	283.96
	3/13/2025	190016--SOUTHWEST GAS	111472	12,988.96
	3/13/2025	190033--US FOODSERVICE, INC.	ACH	4,479.72
	3/13/2025	195--BAUER, HOPE	ACH	4,107.62
	3/13/2025	201--AULIER, JODY	ACH	1,508.00
	3/13/2025	220006--VITALANT	ACH	624.00
	3/13/2025	240000--ETCHEVERRYS FOODSTOCK	111439	150.36
	3/13/2025	278--HEALTH ASSURE BY ALSCO	ACH	6,112.84
	3/13/2025	2963--QUEST DIAGNOSTICS	111458	10,684.45
	3/13/2025	3015--LANDER COUNTY GATEFEES	111457	20.00
	3/13/2025	3035--DESERT DISPOSAL	111434	66.00
	3/13/2025	318--BATTLE MOUNTAIN GENERAL HOSPITAL ATHENA	111427	250.00
	3/13/2025	324--HENRY SCHEIN	ACH	143.48
	3/13/2025	366--CORIUS PHARMACY SYSTEMS	ACH	1,287.95
	3/13/2025	367--CARDINAL HEALTH 110, LLC	111430	13,383.41
	3/13/2025	3--MICHAEL CLAY CORPORATION	111461	122,619.11
	3/13/2025	435--DR. AJEET MAHENDERNATH	ACH	11,448.00
	3/13/2025	437--TROPHY PEAK FIRE PROTECTION	111475	2,077.00
	3/13/2025	500413--EMPLOYEE FUND BNGH	ACH	186.00
	3/13/2025	54--COMMUNITY CARE SERVICE, LLC	111431	657.00
	3/13/2025	550--SILVERTON MANAGEMENT COMPANY, LLC	ACH	3,419.62
	3/13/2025	562--DISH NETWORK LLC	111435	753.44
	3/13/2025	564--LINDSE GAS & EQUIPMENT INC	ACH	856.97
	3/13/2025	569--HEALTHSURE INS SERVICES, INC	ACH	3,950.00
	3/13/2025	606--UNITED AD LABEL	111476	163.74
	3/13/2025	650--HEALTHSTREAM, INC	ACH	2,721.61
	3/13/2025	652--CCP BUSINESS SOLUTIONS LLC	ACH	17.87
	3/13/2025	655--FIDELITY INVESTMENTS	ACH	1,045.00
	3/13/2025	669--MICHIEL, SYLVIA	ACH	100.00
	3/13/2025	678--EMCOR SERVICES	111438	604.25
	3/13/2025	708--DR. PELLEGRINI	ACH	15,264.00
	3/13/2025	712--MCCUNNAHAN, SHARINNE	ACH	245.00
	3/13/2025	732--CARDINAL HEALTH MEDICAL PRODUCTS & SERVICE	ACH	468.53
	3/13/2025	745--RIDGEMAN MEDICAL SCHOOL ASSOCIATES NORTH, INC	ACH	1,550.00
	3/13/2025	754--DR. JONES, DANIEL C	ACH	7,632.00
	3/13/2025	757--CONSENSUS CLOUD SOLUTION, LLC	ACH	826.33
	3/13/2025	767--OPTUM BANK	ACH	70.00
	3/13/2025	808--ClearlyUp INC	ACH	844.14
	3/13/2025	814--HSA	ACH	75.00
	3/13/2025	852--ARGENTA RIM APARTMENTS	111425	994.86

Company name: Battle Mountain General Hospital
 Report name: Check register
 Created on: 4/14/2025

Bank	Date	Vendor	Document no.	Amount
	3/13/2025			20.00
	3/13/2025			44.10
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	3/13/2025			203.45
	3/13/2025			20.75
	3/13/2025			45.25
	3/13/2025			88.20
	3/13/2025			30.00
	3/13/2025			225.80
	3/13/2025			68.25
	3/13/2025			25.00
	3/13/2025			38.00
	3/13/2025	80--PANACEA SOLUTIONS, LLC	ACH	1,600.00
	3/13/2025			35.00
	3/13/2025			63.42
	3/13/2025			89.25
	3/13/2025			25.00
	3/13/2025			51.81
	3/13/2025			25.00
	3/13/2025			104.85
	3/13/2025			106.00
	3/13/2025			40.69
	3/13/2025	900851--BAER DISTRIBUTING INC	ACH	166.95
	3/13/2025	902502--GRADNER	ACH	129.57
	3/13/2025	92180--BATTLE MTN. WATER & SEWER	111428	536.30
	3/13/2025	9271--KINGSTON WATER UTILITY	111456	50.10
	3/13/2025	9304--POINTCLICKCARE TECHNOLOGIES	ACH	3,609.05
	3/13/2025	94300--FISHER HEALTHCARE	ACH	4,243.62
	3/13/2025	9442--AT&T	111426	363.71
	3/13/2025	9539--PHARMERICA	ACH	310.57
	3/13/2025	9615--PACIFIC STATES COMMUNICATIONS	111466	1,205.20
	3/13/2025	9630--NETWORK SERVICES CO	ACH	325.84
	3/13/2025	9716--DONALD CARTER HANSEN MD PC	ACH	19,080.00
	3/13/2025	9762--ICU MEDICAL	ACH	3,519.44
	3/13/2025	9776--NEVADA RURAL HOSPITAL PARTNER	111463	3,051.40
	3/13/2025	98541--STATE OF NV DEPT OF PUBLIC SAFETY RECORDS	111473	312.00
	3/13/2025	98723--BECKMAN COULTER, INC.	ACH	702.06
	3/13/2025	98738--TEAM OF NEVADA	111474	4,002.00
	3/28/2025	100100--FARMER BROS. CO.	ACH	282.00
	3/28/2025	1078--SIEMENS HEALTHCARE DIAGNOSTICS	ACH	1,745.47
	3/28/2025	130031--MCKESSON DRUG COMPANY	ACH	2,224.20
	3/28/2025	130044--MEDLINE INDUSTRIES, INC.	111516	8,204.61
	3/28/2025	130049--MIDWAY MARKET	111518	475.48
	3/28/2025	1323--BOUND TREE MEDICAL, LLC	ACH	12.50
	3/28/2025	1326--ANTHEM BLUE CROSS AND BLUE SHIELD	111479	3,841.77
	3/28/2025	138--BRACCO DIAGNOSTICS INC.	111483	420.95
	3/28/2025	139--STRYKER SALES CORPORATION	ACH	779.06
	3/28/2025	140025--NEW YORK LIFE INS CO	111520	1,296.08
	3/28/2025	140027--RELIASTAR LIFE INSURANCE COMPANY	111525	550.00
	3/28/2025	140046--NORCO, INC.	111521	45.00
	3/28/2025	1563--WEX BANK	ACH	234.35
	3/28/2025	1598--VERIZON WIRELESS	111532	299.36
	3/28/2025	177--DEPARTMENT OF HEALTH AND HUMAN SERVICES	111486	201.42
	3/28/2025	180008--LANDER HARDWARE	111515	86.71
	3/28/2025	180009--NV ENERGY	111522	9,821.96
	3/28/2025	180033--US FOODSERVICE, INC.	ACH	4,031.58
	3/28/2025	19--PHARMERICA	111523	16.43
	3/28/2025	207--US DEPARTMENT OF HOMELAND SECURITY I	111531	600.00
	3/28/2025	209--US DEPARTMENT OF HOMELAND SECURITY	111530	2,805.00
	3/28/2025	220006--VITALANT	ACH	2,853.00

Company name: Battle Mountain General Hospital
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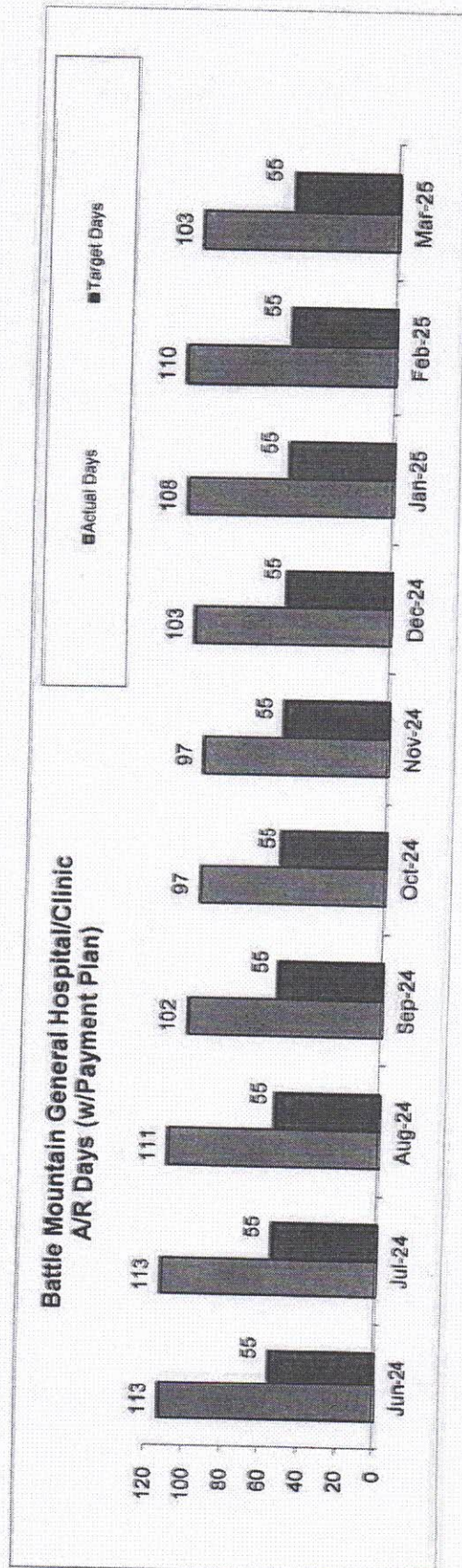
Bank	Date	Vendor	Document no.	Amount
	3/28/2025	240010--ETCHEVERRYS FOODSTOCK	111488	264.11
	3/28/2025	249--AETNA LIFE INSURANCE COMPANY	111477	140.68
	3/28/2025	265--TRD-AKON	111527	59.77
	3/28/2025	271--FLYERS ENERGY LLC	111499	1,921.90
	3/28/2025	279--HEALTH ASSURE BY AUSCO	ACH	3,031.82
	3/28/2025	302--ANTHEM BLUE CROSS BLUE SHIELD	111481	161.01
	3/28/2025	316--WALTER, STEPHANIE	ACH	173.00
	3/28/2025	318--BATTLE MOUNTAIN GENERAL HOSPITAL ATHENA	111482	250.00
	3/28/2025	324--HENRY SCHEIN	ACH	96.36
	3/28/2025	35--GALLAGHER BENEFIT SERVICES	111490	521.80
	3/28/2025	367--CARDINAL HEALTH LTD, LLC	111484	5,541.80
	3/28/2025	3--MICHAEL CLAY CORPORATION	111517	148,221.34
	3/28/2025	435--DR. AJEET MAHENDRANATHI	ACH	11,448.00
	3/28/2025	437--TROPHY PEAK FIRE PROTECTION	111528	4,729.75
	3/28/2025	473--THE LINDA W. LAY FIRM, PC	111526	5,000.00
	3/28/2025	496--KnowBe4, Inc	ACH	3,901.00
	3/28/2025	498--READ, CAROL	ACH	75.00
	3/28/2025	500433--EMPLOYEE FUND BMGH	ACH	195.00
	3/28/2025	516--HAMILTON MEDICAL	111482	2,765.00
	3/28/2025	564--LINDS GAS & EQUIPMENT INC	ACH	4,940.93
	3/28/2025	625--GERBER LAW OFFICES, LLP	111491	90.00
	3/28/2025	652--ODP BUSINESS SOLUTIONS LLC	ACH	2,174.12
	3/28/2025	655--FIDELITY INVESTMENTS	ACH	1,000.00
	3/28/2025	658--COSMA HEALTHCARE	111485	70.22
	3/28/2025	678--EMCOR SERVICES	111487	1,676.00
	3/28/2025	679--CHEMQUA	ACH	506.66
	3/28/2025	712--McCLAIN-HALL, SHAWNIEE	ACH	227.50
	3/28/2025	732--CARDINAL HEALTH MEDICAL PRODUCTS & SERVICE	ACH	284.35
	3/28/2025	747--PPHSJ	111524	104.75
	3/28/2025		111513	45.93
	3/28/2025	764--INNOVATION PROVIDER, INC	ACH	3,301.96
	3/28/2025	767--OPTUM BANK	ACH	25.00
	3/28/2025	784--ANTHEM BLUE CROSS BLUE SHIELD	111480	90.96
	3/28/2025	806--SKY FIBER NETWORK	ACH	99.00
	3/28/2025	813--US DEPARTMENT OF HOMELAND SECURITY	111529	780.00
	3/28/2025	814--HSA	ACH	30.00
	3/28/2025	833--NUANCE COMMUNICATION INC	ACH	123.00
	3/28/2025	889--MedMed Inc	ACH	777.51
	3/28/2025			66.59
	3/28/2025			36.00
	3/28/2025			120.75
	3/28/2025			25.00
	3/28/2025			83.79
	3/28/2025			20.00
	3/28/2025			104.98
	3/28/2025			25.00
	3/28/2025			20.00
	3/28/2025			70.00
	3/28/2025	900851--BAIR DISTRIBUTING INC	ACH	324.13
	3/28/2025			28.39
	3/28/2025			30.18
	3/28/2025			242.97
	3/28/2025			1,373.44
	3/28/2025			105.71
	3/28/2025			49.56
	3/28/2025			25.00
	3/28/2025			329.50
	3/28/2025			25.00
	3/28/2025			24.15
	3/28/2025			70.00

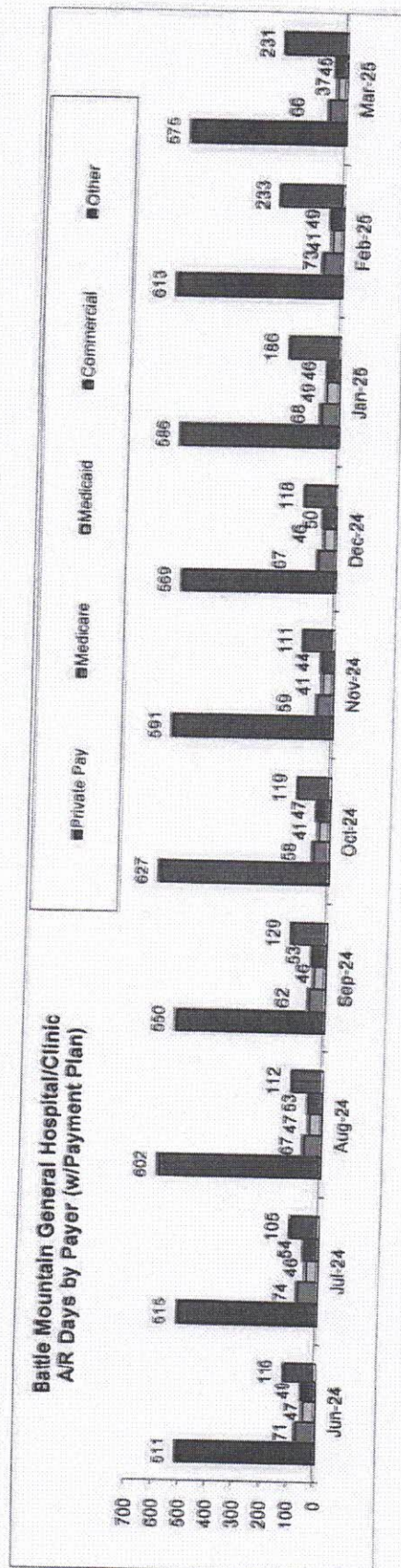
Company name: Battle Mountain General Hospital

Report name: Check register

Created on: 4/14/2025

Bank	Date	Vendor	Document no.	Amount
	3/25/2025			34.65
	3/25/2025	912--NATIONAL RURAL HEALTH ASSOCIATION	111519	1,245.00
	3/25/2025	94300--FISHER HEALTHCARE	ACH	4,886.32
	3/25/2025	9630--NETWORK SERVICES CO	ACH	266.35
	3/25/2025	9716--DONALD CARTER HANSEN MD PC	ACH	7,632.00
	3/25/2025	9762--ICU MEDICAL	ACH	802.18
	3/25/2025	98723--BECKMAN COULTER, INC	ACH	1,100.79
	3/25/2025	98844--ALACORN TEMP-RITE LLC	ACH	144.00
	3/25/2025	99984--PUBLIC EMPLOYEES RETIREMENT SYSTEM	ACH	167,358.35
Operating Account - Wells Fargo				
Total for Operating Account				803,265.11





BATTLE MOUNTAIN GENERAL HOSPITAL BATTLE MOUNTAIN CLINIC

PHYSICIAN	DAYS WORKED Mar-25	PATIENTS SEEN Mar-25	PATIENTS SEEN PER DAY (AVERAGE)	PATIENTS SEEN	
				YTD	YTD
Dr Maltinski Telehealth	15	261	17	2,281	8,154
Dr Potter Jones (Includes LTC) Telehealth	13	0	20	2	125
Abby Burkhardt (Includes LTC) Telehealth	10	254	23	2,270	334
Charloth Bledsoe, NP Telehealth	16	0	2	28	2
Katlynn Hymas, MHNP Telehealth	0	228	#DIV/0!	2,764	8,615
Jennifer Douglas, LCSW-I Telehealth	8	0	5	22	
Denise Roeman-Kramer, NP Telehealth	0	34	#DIV/0!	60	
Della Physician Group Rosales, Romeo PA Telehealth	0	2	#DIV/0!	34	
Jodi Allen, RD Injections	1	0	#DIV/0!	20	
Total		42	0	22	
		857		293	
				17	
				17	
				0	
				449	
				0	
				2	
				334	
				8,615	

PATIENTS SEEN MARCH 2025 1033

PATIENTS SEEN YTD MARCH 2025 9,316

**LANDER COUNTY HOSPITAL DISTRICT
DBA: BATTLE MOUNTAIN GENERAL HOSPITAL
NOTES TO MARCH 31, 2025
FINANCIAL STATEMENTS**

NATURE OF OPERATIONS AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Nature of Operations and Reporting Entity

Lander County Hospital District dba: Battle Mountain General Hospital (the Hospital or District) is a hospital district formed under the provisions of the Nevada Revised Statutes. The Hospital primarily earns revenues by providing inpatient, outpatient, long-term care and emergency care services to patients in Battle Mountain, Nevada. It also operates a primary care clinic in Battle Mountain.

Basis of Accounting and Presentation

The financial statements of the Hospital have been prepared on the accrual basis of accounting using the economic resources measurement focus. Revenues, expenses, gains, losses, assets, and liabilities from exchange and exchange-like transactions are recognized when the exchange transaction takes place, while those from government-mandated nonexchange transactions (principally federal and state grants) are recognized when all applicable eligibility requirements are met. Operating revenues and expenses include exchange transactions and program-specific, government-mandated nonexchange transactions. Government-mandated nonexchange transactions that are not program specific (such as county appropriations), property taxes, and investment income are included in nonoperating revenues and expenses. The Hospital first applies restricted net position when an expense or outlay is incurred for purposes for which both restricted and unrestricted net position are available.

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America (U.S. GAAP) requires management to make estimates and assumptions that affect the reported amounts of assets, deferred outflows of resources, liabilities and deferred inflows of resources and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

Cash Equivalents

The Hospital considers all liquid investments, other than those limited as to use, with original maturities of three months or less to be cash equivalents. At June 30, 2022 and 2021, cash equivalents consisted primarily of money market accounts with brokers and certificates of deposit.

Risk Management

The Hospital is exposed to various risks of loss from torts; theft of, damage to and destruction of assets; business interruption; errors and omissions; employee injuries and illnesses; natural disasters; medical malpractice; and employee health, dental and accident benefits. Commercial insurance coverage is purchased for claims arising from such matters other than medical malpractice and employee health claims. Settled claims have not exceeded this commercial coverage in any of the three preceding years.

Investments and Investment Income

The Hospital maintains fixed income investments and certificate of deposits with an investment broker. Investments are carried at fair value. Fair value is determined using quoted market prices. Investment income includes dividend and interest income and the net change for the year in fair value of investments carried at fair value.

**LANDER COUNTY HOSPITAL DISTRICT
DBA: BATTLE MOUNTAIN GENERAL HOSPITAL
NOTES TO MARCH 31, 2025
FINANCIAL STATEMENTS**

**NATURE OF OPERATIONS AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES
(CONTINUED)**

Fair Value Measurements

To the extent available, the District's investments are recorded at fair value. GASS Statement No. 72 - *Fair Value Measurement and Application*, defines fair value as the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. This statement establishes a hierarchy of valuation inputs based on the extent to which inputs are observable in the marketplace. Inputs are used in applying the various valuation techniques and take into account the assumptions that market participants use to make valuation decisions. Inputs may include price information, credit data, interest and yield curve data, and other factors specific to the financial instrument. Observable inputs reflect market data obtained from independent sources.

In contrast, unobservable inputs reflect an entity's assumptions about how market participants would value the financial instrument. Valuation techniques should maximize the use of observable inputs to the extent available. A financial instrument's level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement.

The following describes the hierarchy of inputs used to measure fair value and the primary valuation methodologies used for financial instruments measured at fair value on a recurring basis:

Level 1 - Inputs that utilize quoted prices (unadjusted) in active markets for identical assets or liabilities that the district has the ability to access.

Level 2 - Inputs that include quoted prices for similar assets and liabilities in active markets and inputs that are observable for the asset or liability, either directly or indirectly, for substantially the full term of the financial instrument. Fair values for these instruments are estimated using pricing models, quoted prices of securities with similar characteristics, or discounted cash flows.

Level 3 - Inputs that are unobservable inputs for the asset or liability, which are typically based on an entity's own assumptions, as there is little, if any, related market activity.

**LANDER COUNTY HOSPITAL DISTRICT
DBA: BATTLE MOUNTAIN GENERAL HOSPITAL
NOTES TO MARCH 31, 2025
FINANCIAL STATEMENTS**

**NATURE OF OPERATIONS AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES
(CONTINUED)**

Patient Accounts Receivable

Patient accounts receivable are obligations that are stated at the amount management expects to collect for outstanding balances. These obligations are primarily from patients whom are insured under third-party payor agreements. The District bills third-party payors on the patients' behalf, or if a patient is uninsured, the patient is billed directly. Once claims are settled with the primary payor, any secondary insurance is billed, and patients are billed for copay and deductible amounts that are the patients' responsibility. Payments on patient receivables are applied to the specific claim identified on the remittance advice or statement. The district does not have a policy to charge interest on past due accounts.

Patient accounts receivable are recorded on the accompanying financial statements at an amount net of contractual adjustments and an allowance for doubtful accounts, which reflect management's estimate of the amounts that will not be collected. Management provides for contractual adjustments under terms of third-party reimbursement agreements through a reduction of gross revenue and a credit to patients accounts receivable.

In addition, management provides for probable uncollectible amounts, primarily for uninsured patient and amounts for which patient are personally responsible, through a reduction of gross revenue and a credit to an allowance for doubtful accounts.

In evaluating the collectability of patient accounts receivable, the District analyzes past results and identifies trends for each of its major payor sources of revenue to estimate the appropriate allowance for doubtful accounts and provision for bad debts. Management regularly reviews data about these major payor sources of revenue in evaluating the sufficiency of the allowance for doubtful accounts. Specifically, for receivables associated with services provided to patients who have third-party coverage, the district analyzes contractually due amounts and provides an allowance for doubtful accounts and a provision for bad debts for expected uncollectible deductibles and copayments on accounts for which the third-party payor has not yet paid for payors who are known to be having financial difficulties that make the realization of amounts due unlikely.

For receivables associated with self-pay patients (which includes patients without insurance and patients with deductible and copayment balances due for which third-party coverage exists for part of the bill), the District records a significant provision for bad debts in the period of service on the basis of its past experience, which indicates that many patients are unable or unwilling to pay the portion of their bill for which that are financially responsible. The difference between the standard rates and the amounts collected after all reasonable collection efforts have been exhausted is charged off against the allowance for doubtful accounts.

Supplies

Supply inventories are stated at the lower of cost, determined using the first-in, first-out method or market.

**LANDER COUNTY HOSPITAL DISTRICT
DBA: BATTLE MOUNTAIN GENERAL HOSPITAL
NOTES TO MARCH 31, 2025
FINANCIAL STATEMENTS**

**NATURE OF OPERATIONS AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES
(CONTINUED)**

Capital Assets

The District capitalizes assets whose cost exceeds \$5,000 and have an estimated life of at least three years. Capital assets are recorded at cost at the date of acquisition, or fair value at the date of donation if acquired by gift. Depreciation is computed using the straight-line method over the estimated useful life of each asset. Assets under capital lease obligations and leasehold improvements are depreciated over the shorter of the lease term or their respective estimated useful lives. The following estimated useful lives are being used by the Hospital:

Buildings and Leasehold Improvements	5 to 40 Years
Equipment	3 to 20 Years

Compensated Absences

Hospital policies permit most employees to accumulate vacation and sick leave benefits that may be realized as paid time off or, in limited circumstances, as a cash payment. Expense and the related liability are recognized as vacation benefits are earned whether the employee is expected to realize the benefit as time off or in cash. Expense and the related liability for sick leave benefits are recognized when earned to the extent the employee is expected to realize the benefit in cash determined using the termination payment method. Sick leave benefits expected to be realized as paid time off are recognized as expense when the time off occurs, and no liability is accrued for such benefits employees have earned but not yet realized. Compensated absence liabilities are computed using the regular pay and termination pay rates in effect at the statement of net position date plus an additional amount for compensation-related payments such as Medicare taxes computed using rates in effect at that date. The estimated compensated absences liability expected to be paid more than one year after the statement of net position date is included in other long-term liabilities.

Pension Plan

The Hospital participates in the Public Employees Retirement System of the state of Nevada, (PERS), a cost-sharing multiple employer defined benefit pension plan. For purposes of measuring the net pension liability, deferred outflows of resources and deferred inflows of resources related to pensions, and pension expense, information about the fiduciary net position of the plan and additions to/deductions from the plan's fiduciary net position have been determined on the same basis as they are reported by the plan. For this purpose, benefit payments (including refunds of employee contributions) are recognized when due and payable in accordance with the benefit terms. Investments are reported at fair value.

Deferred Outflow of Resources

Deferred outflows of resources represent a consumption of net position that applies to a future period(s) and will not be recognized as an outflow of resources (expense) until then. Deferred outflows of resources consist of unrecognized items not yet charged to pension expense and contributions from the employer after the measurement date but before the end of the employer's reporting period.

**LANDER COUNTY HOSPITAL DISTRICT
DBA: BATTLE MOUNTAIN GENERAL HOSPITAL
NOTES TO MARCH 31, 2025
FINANCIAL STATEMENTS**

**NATURE OF OPERATIONS AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES
(CONTINUED)**

Deferred Inflow of Resources

Although certain revenues are measurable, they are not available. Available means collected within the current period or expected to be collected soon enough thereafter to be used to pay liabilities of the current period. Deferred inflows of resources represent the amount of assets that have been recognized, but the related revenue has not been recognized since the assets are not collected within the current period or expected to be collected soon enough thereafter to be used to pay liabilities of the current period. Deferred inflows of resources consist of pension related deferred inflows.

Unearned Revenue

Revenue received in advance of the performance of services deemed to be exchange transactions are deferred until such time as related expenditures are incurred and then recognized as revenue.

Net Position

Net position of the Hospital is classified in two components. Net investment in capital assets consists of capital assets net of accumulated depreciation. Unrestricted net position is the remaining net position that does not meet the definition of net investment in capital assets or restricted net position.

Net Patient Service Revenue

The Hospital has agreements with third-party payors that provide for payments to the Hospital at amounts different from its established rates. Net patient service revenue is reported at the estimated net realizable amounts from patients, third-party payors and others for services rendered and includes estimated retroactive revenue adjustments and a provision for uncollectible accounts.

Net Patient Service Revenue (Continued)

Retroactive adjustments are considered in the recognition of revenue on an estimated basis in the period the related services are rendered, and such estimated amounts are revised in future periods as adjustments become known.

Charity Care

The Hospital provides care without charge or at amounts less than its established rates to patients meeting certain criteria under its charity care policy. Because the Hospital does not pursue collection of amounts determined to qualify as charity care, these amounts are not reported as net patient service revenue.

Income Taxes

As an essential government function, the Hospital is generally exempt from federal income taxes under Section 115 of the Internal Revenue Code. However, the Hospital is subject to federal income tax on any unrelated business taxable income.

**LANDER COUNTY HOSPITAL DISTRICT
DBA: BATTLE MOUNTAIN GENERAL HOSPITAL
NOTES TO MARCH 31, 2025
FINANCIAL STATEMENTS**

**NATURE OF OPERATIONS AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES
(CONTINUED)**

Net Patient Service Revenue

The Hospital has agreements with third-party payors that provide for payments to the Hospital at amounts different from its established rates. These payment arrangements include:

Medicare - The Hospital is certified as a Medicare critical access hospital. The Hospital is reimbursed under a cost reimbursement methodology for inpatient and most outpatient services. The Hospital is reimbursed for certain services at tentative rates with final settlement determined after submission of annual cost reports by the Hospital and audits thereof by the Medicare administrative contractor. The Hospital's Medicare cost reports have been audited by the Medicare administrative contractor through June 30, 2021.

Medicaid - Inpatient and nursing home services rendered to Medicaid program beneficiaries are reimbursed under cost reimbursement methodologies. Outpatient services are reimbursed at prospectively determined rates. The Hospital is reimbursed at tentative rates with final settlement determined after submission of annual cost reports by the Hospital and audits thereof by the Medicaid administrative contractor. The Hospital's Medicaid cost reports have been audited by the Medicaid administrative contractor through June 30, 2023.

Approximately 50% and 44% of net patient service revenues are from participation in the Medicare and state-sponsored Medicaid programs for the years ended June 30, 2024 and 2023, respectively. Laws and regulations governing the Medicare and Medicaid programs are complex and subject to interpretation and change. As a result, it is reasonably possible that recorded estimates will change materially in the near term.

CEO Credit Card Expenses

3/22 - 4/21

	Dreez (Breakfast with Tahoe Carson	
4/3/2025	Radiology)	\$37.81
4/3/2025	Car Wash for Hospital RAM Truck	\$12.00
4/14/2025	Walmart (Rose Bushes, Car Cleaning Items)	\$84.87
4/14/2025	Big R (Weed Killer Chemicals)	\$660.30
	The Hideaway (Recruitment Dinner for Nicole	
4/17/2025	Shutts and Family)	\$179.36
	Total	\$974.34

**All Receipts Submitted for Payment with
the Statement.**



535 South Humboldt Street Battle Mountain, Nevada 89820
Phone: 775-635-2550

Executive Summary

May 13, 2025

- **National Hospital Week:** This week we have been celebrating National Hospital Week through a long menu of activities. We began Monday with a staff breakfast and will end the week with the Golf Tournament. Like years past, it's fun to see the participation and excitement from our staff as we all celebrate our professions.
- **School Health Fair:** The planning ended and this week it has all come together. As a team, the School Nurse, County Health Office, County EMS and BMGH worked together to provide the third annual School Health Fair. Each school received good health related education through active participation. This year, the Hope Squad, LYT Club and the HOSA Club helped by providing peer lead discussion and activities. This is an event that we hope will continue for many years as we try to keep our kids safe through education.
- **Day at the Legislature:** In April, I was able to participate in the Nevada Hospital Association Day at the Legislature. While in Carson City, I worked closely with Blayne Osborn from NRHP. We met with a variety of legislators, State employees, hospital CEO's and other lobbyists to talk about the rural hospital concerns. We spoke about Nurse Staffing Requirements, Medical Debt Collections, PERS and other suggested staffing requirements. There is a lot of movement in these areas and still a lot of work to be done before the end of the session.
- **Statewide Measles Outbreak Drill:** On April 29th, BMGH participated in a statewide drill to test state emergency communications and preparedness. The scenario was a state wide measles outbreak which required the use of the state system called "Have Bed." This system maintains an updated list of all hospitals and open beds available for referral. We had good participation by staff and a provider.
- **Tri-County Disaster Drill Next Week:** On May 21st, BMGH will be joining other County entities, Mines, FEMA and other Counties for a multi-county disaster drill. This drill will test organization and communication processes as well as our use of a large incident command system.
- **CHIC Annual Meeting:** This last week, I attended the annual meetings for the Community Hospital Insurance Coalition. This is the group that we work with for our self-insured health plans. We also work through them for our workers comp. provider. I have been asked to sit as one of five CEO's on their Advisory Committee for CHIC. During these meetings, I learned more about the 340b drug program, a cancer consultation service and a service to help employees and families navigate public programs to save money. The group also provided information and discussion regarding employee wellness programs.
- **Provider Recruitment:** This past month, we brought two different providers to Battle Mountain for on-site interviews and an introduction to BMGH. We will continue searching for providers that are mission driven and have a desire to live and work in our rural location. With the departure of Dr. Maltinski, we are bringing in a temporary nurse practitioner to work in the clinic to ensure that we can continue to take care of our patients and community.
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