

**A G E N D A**  
**Lander County Hospital District – Board of Trustees**  
**Regular Session**  
**November 12, 2025 - 5:30 P.M.**  
**John Peters Health Services Center**  
**Board Room**  
**555 West Humboldt Street**  
**Battle Mountain, NV**

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**5:30 PM      Call to Order – Regular Session**

**Pledge of Allegiance**

People are invited to submit comments in writing and/or attend and make comments on any non-agenda items at the Board Meeting. All public comments 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** – (Discussion for Possible Action)

- 1) November 12, 2025, Agenda Notice – Posted November 6, 2025
- 2) Infection Control Reports – September & October 2025
- 3) Emergency Operations Program/Policy & Procedure – September & October 2025
- 4) Board meeting minutes – October 8, 2025, Regular Session
- 5) Medical Staff appointments/reappointments:  
Battle Mountain Clinic – PRN Coverage  
Sarah Pehrson, APRN

*Public Comment*

❖ **New Business** – (Lemaire) – (Discussion for possible action)

- 6) Clifton Larson Allen, LLP Financial Audit

Board presentation provided by Clifton Larson Allen, LLP for Fiscal Year 2024-2025 Financial Audit and all other matters properly related thereto.

*Public Comment*

- 7) Chief Executive Officer Resignation – (Lemaire) – (Discussion for possible action)

The Board will review and discuss the possible approval of resignation and severance agreement between Jason Bleak and Lander County Hospital District, and all other matters properly related thereto.

*Public Comment*

8) Appoint new Chief Executive Officer – (Lemaire) – (Discussion for possible action)

The Board will review and discuss the possible approval and appointment of Hope Bauer as the Chief Executive Officer of Battle Mountain General Hospital and all other matters properly related thereto.

*Public Comment*

9) Chief Executive Officer Contract – (Lemaire) – (Discussion for possible action)

The Board will review and discuss the possible approval and appointment of two (2) Board members to work with Hope Bauer and Legal Council to negotiate and prepare a Chief Executive Officer contract for Board review and approval and all other matters properly related matters.

*Public Comment*

10) Wage and Labor Analysis – (Lemaire) – (Discussion for possible action)

The Board will review and discuss Battle Mountain General Hospital's Wage and Labor Analysis developed by Kathy Freeman, Human Resource Director and all other matters properly related thereto.

*Public Comment*

❖ **Unfinished Business**

11) 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*

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

12) September 2025 Financial Reports

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

*Public Comment*

❖ **Chief Executive Officer Report – (Lemaire) – (Discussion for Possible Action)**

13) Chief Executive Officer will present monthly report to the Board of Trustees and all other matters properly related thereto.

*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

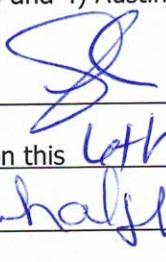
State of Nevada \_\_\_\_\_ )  
) ss  
County of Lander \_\_\_\_\_ )

Jessica Ceja, Recording Secretary of the Lander County Hospital District Board of Trustees, states that on the 10th day of November 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 me on this 10th day of November 2025

WITNESS



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 Trustee 535 South Humboldt Street, Battle Mountain, NV 89820 (775) 635-2550, Ext. 1111.

### **Via Zoom**

(Barring technical difficulties)

Topic: Board Regular Session 11 12 2025

Time: November 12, 2025, 05:30 PM Pacific Time (US and Canada)

Join Zoom Meeting

<https://us02web.zoom.us/j/81455745990?pwd=hRFawMulwzRydfwP4QkHqWCAc25l5W.1>

Meeting ID: 814 5574 5990

Passcode: 219288

Join instructions

[https://us02web.zoom.us/meetings/81455745990/invitations?signature=2Y2aNt\\_AjL5CXFIQI-vs\\_GtZCG5EGQ2S63J7qsgZF7g](https://us02web.zoom.us/meetings/81455745990/invitations?signature=2Y2aNt_AjL5CXFIQI-vs_GtZCG5EGQ2S63J7qsgZF7g)

# INFECTION CONTROL REPORT MEDICAL STAFF MEETING

## SEPTEMBER 2025

1. Clinic had 8 procedures with 0 wound infection.
2. ER had 18 procedures with 0 wound infection.
3. 0 Needle sticks in SEPTEMBER, a total of 0 for the year.
4. Immunization shots:
  - ❖ 75% of the BMGH employees received the flu shot.
  - ❖ 19 LTC Residents received any vaccinations.
5. Flu Test:
  - ❖ 29 Positive A; 0 Positive B
  - ❖ 11 RSV Positive
  - ❖ 88 Influenza-like symptoms
6. Yearly TB testing:
  - ❖ 2 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: 22; 5 SSTI; 3 UTI. 2
11. SEPT 8 Acute 5 Infection/s
12. SEPT 2 Swing 2 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: 80 Negative: 62 Positives: 18 Invalid: 0

No COVID positive case for all LTC residents and employees for the month of SEPTEMBER
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 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	0	0	0.00
Other	0	0	0.00
Parasitic	0	0	0.00
Respiratory	0	0	0.00
Skin & Soft Tissue	1	1	1.71
Urinary Tract/Kidney	2	2	3.41
<b>Total</b>	<b>5</b>	<b>5</b>	

## Ear Nose, Mouth &amp; Throat Infection Category

HAI	1.71	Unit/Room#	Infection Onset	Infection	Signs & Symptoms	Status	Pharmacy Order - Order Name, Order Date, Prescriber	Comments
LTC. LONG TERM CARE	09/07/25	Strep Throat	(Admit Date 05/06/25)	Sore throat, Sore throat that can start very quickly, White patches on inner cheek, tongue, roof of mouth or throat	Closed (09/13/25) - Resolved	Doxycycline Hyclate Oral Capsule 100 MG (09/07/25) Prescriber: Burkhardt, Abby	Started on Doxycycline 100mg PO BID x 7 days	

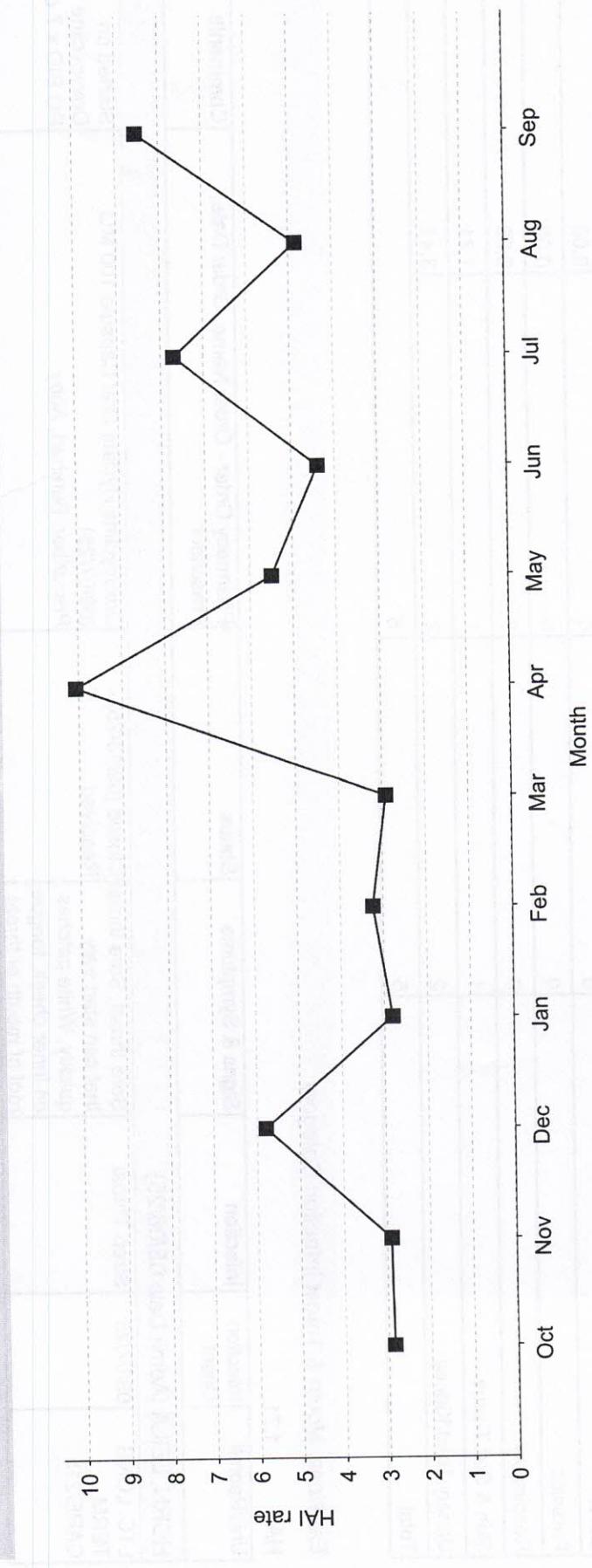
## Eye Infection Category

HAI	1.71	Unit/Room#	Infection Onset	Infection	Signs & Symptoms	Status	Pharmacy Order - Order Name, Order Date, Prescriber	Comments
LTC. LONG TERM CARE	09/19/25	Conjunctivitis	(Admit Date 09/18/18)	Eye redness	Closed (09/24/25) - Resolved	Erythromycin Ophthalmic Ointment 5 MG/GM (09/19/25) Prescriber: Burkhardt, Abby	Started on erythromycin eye ointment TID x 5	

## Summary

Total Infection	CAI	HAI	HAI Rate	Number Of MDRO
5	0	5	8.53	0

## HAI Rate 12-Month Trend



## Summary By Infection Category

Infection Category	Total	HAI Rate
Blood/Systemic	0	0.00
Bone & Joint	0	0.00
Cardiovascular	0	0.00
Ear Nose, Mouth & Throat	1	1.71
Eye	1	1.71

# INFECTION CONTROL REPORT MEDICAL STAFF MEETING

## OCTOBER 2025

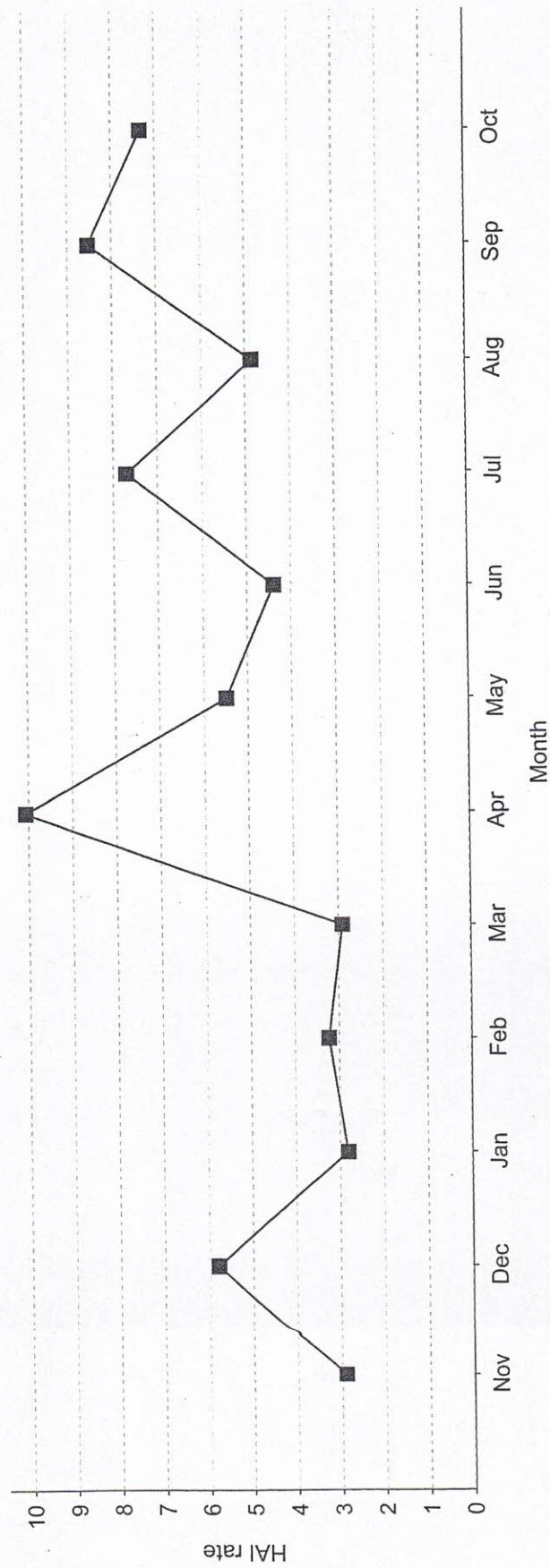
1. Clinic had 10 procedures with 0 wound infection.
2. ER had 22 procedures with 3 wound infection.
3. 0 Needle sticks in OCTOBER, a total of 1 for the year.
4. Immunization shots:
  - ❖ 75 of the BMGH employees received the flu shot.
  - ❖ 20 LTC Residents received any vaccinations.
5. Flu Test:
  - ❖ 28 Positive A; 1 Positive B 0
  - ❖ 7 RSV Positive 0
  - ❖ 28 Influenza-like symptoms
6. Yearly TB testing:
  - ❖ 2 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: 22; 2 Infection/s 2 SSTI; 4 UTI.
11. OCT Acute 8 5 Infection/s
12. OCT 2 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: 52 Negative: 49 Positives: 3 Invalid: 0  
No COVID positive case for all LTC residents and employees for the month of OCTOBER
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
6	1	5	7.33	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	1	1	1.47

## Battle Mountain General Hospital

535 S Humboldt St

BATTLE MOUNTAIN, NV 89820

PH: (775) 635 2550 ext 1135 FX: (775) 635 3048

## BMGH Lab October 2025 Antibiogram Report: Date Range 10/01/2025 - 10/31/2025

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<i>Enterococcus faecalis</i>	<i>Sensitive</i>		<i>Intermediate</i>		<i>Resistant</i>	
Ampicillin	1	100.00%	0	0.00%	0	0.00%
Gent. Synergy	0	0.00%	0	0.00%	1	100.00%
Levofloxacin	1	100.00%	0	0.00%	0	0.00%
Nitrofurantoin	1	100.00%	0	0.00%	0	0.00%
Penicillin	1	100.00%	0	0.00%	0	0.00%
Tetracycline	1	100.00%	0	0.00%	0	0.00%
Vancomycin	1	100.00%	0	0.00%	0	0.00%
<b>Total Isolates: 1</b>						

<i>Escherichia coli</i>	<i>Sensitive</i>		<i>Intermediate</i>		<i>Resistant</i>	
Amp/Sulbactam	14	82.35%	3	17.65%	0	0.00%
Ampicillin	14	82.35%	0	0.00%	3	17.65%
Cefazolin	17	100.00%	0	0.00%	0	0.00%
Ceftazidime	17	100.00%	0	0.00%	0	0.00%
Ceftriaxone	17	100.00%	0	0.00%	0	0.00%
Cefuroxime	17	100.00%	0	0.00%	0	0.00%
Ciprofloxacin	16	94.12%	0	0.00%	1	5.88%
Gentamicin	17	100.00%	0	0.00%	0	0.00%
Levofloxacin	16	94.12%	0	0.00%	1	5.88%
Nitrofurantoin	16	100.00%	0	0.00%	0	0.00%
Pip/Tazo	17	100.00%	0	0.00%	0	0.00%
Tobramycin	17	100.00%	0	0.00%	0	0.00%
Trimeth/Sulfa	16	94.12%	0	0.00%	1	5.88%
<b>Total Isolates: 17</b>						

<i>Escherichia hermannii</i>	<i>Sensitive</i>		<i>Intermediate</i>		<i>Resistant</i>	
Amp/Sulbactam	1	100.00%	0	0.00%	0	0.00%
Cefazolin	1	100.00%	0	0.00%	0	0.00%
Ceftazidime	1	100.00%	0	0.00%	0	0.00%
Ceftriaxone	1	100.00%	0	0.00%	0	0.00%
Cefuroxime	1	100.00%	0	0.00%	0	0.00%
Ciprofloxacin	1	100.00%	0	0.00%	0	0.00%
Gentamicin	1	100.00%	0	0.00%	0	0.00%
Levofloxacin	1	100.00%	0	0.00%	0	0.00%
Nitrofurantoin	1	100.00%	0	0.00%	0	0.00%
Pip/Tazo	1	100.00%	0	0.00%	0	0.00%
Tobramycin	1	100.00%	0	0.00%	0	0.00%
Trimeth/Sulfa	1	100.00%	0	0.00%	0	0.00%
<b>Total Isolates: 1</b>						

<i>Klebsiella pneumoniae</i>	<i>Sensitive</i>		<i>Intermediate</i>		<i>Resistant</i>	
Amp/Sulbactam	1	100.00%	0	0.00%	0	0.00%
Cefazolin	1	100.00%	0	0.00%	0	0.00%
Ceftazidime	1	100.00%	0	0.00%	0	0.00%
Ceftriaxone	1	100.00%	0	0.00%	0	0.00%
Cefuroxime	1	100.00%	0	0.00%	0	0.00%
Ciprofloxacin	1	100.00%	0	0.00%	0	0.00%
Gentamicin	1	100.00%	0	0.00%	0	0.00%
Levofloxacin	1	100.00%	0	0.00%	0	0.00%
Nitrofurantoin	1	100.00%	0	0.00%	0	0.00%
Pip/Tazo	1	100.00%	0	0.00%	0	0.00%
Tobramycin	1	100.00%	0	0.00%	0	0.00%
Trimeth/Sulfa	1	100.00%	0	0.00%	0	0.00%
<b>Total Isolates: 1</b>						

**Battle Mountain General Hospital**  
 535 S Humboldt St  
 BATTLE MOUNTAIN, NV 89820  
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**BMGH Lab October 2025 Antibiogram Report: Date Range 10/01/2025 - 10/31/2025**

Page 2

<i>Proteus mirabilis</i>	<i>Sensitive</i>	<i>Intermediate</i>		<i>Resistant</i>	
Amp/Sulbactam	1	100.00%	0	0.00%	0
Ampicillin	0	0.00%	0	0.00%	1
Cefazolin	1	100.00%	0	0.00%	0
Ceftazidime	1	100.00%	0	0.00%	0
Ceftriaxone	1	100.00%	0	0.00%	0
Cefuroxime	1	100.00%	0	0.00%	0
Ciprofloxacin	0	0.00%	0	0.00%	1
Gentamicin	1	100.00%	0	0.00%	0
Levofloxacin	0	0.00%	0	0.00%	1
Pip/Tazo	1	100.00%	0	0.00%	0
Tobramycin	1	100.00%	0	0.00%	0
Trimeth/Sulfa	0	0.00%	0	0.00%	1
<b>Total Isolates: 1</b>					

<i>Pseudomonas aeruginosa</i>	<i>Sensitive</i>	<i>Intermediate</i>		<i>Resistant</i>	
Ceftazidime	1	100.00%	0	0.00%	0
Ciprofloxacin	1	100.00%	0	0.00%	0
Levofloxacin	1	100.00%	0	0.00%	0
Pip/Tazo	1	100.00%	0	0.00%	0
Tobramycin	1	100.00%	0	0.00%	0
<b>Total Isolates: 1</b>					

<i>Shigella sonnei</i>	<i>Sensitive</i>	<i>Intermediate</i>		<i>Resistant</i>	
Amp/Sulbactam	1	100.00%	0	0.00%	0
Ampicillin	1	100.00%	0	0.00%	0
Ceftazidime	1	100.00%	0	0.00%	0
Ceftriaxone	1	100.00%	0	0.00%	0
Ciprofloxacin	1	100.00%	0	0.00%	0
Levofloxacin	1	100.00%	0	0.00%	0
Nitrofurantoin	1	100.00%	0	0.00%	0
Pip/Tazo	1	100.00%	0	0.00%	0
Trimeth/Sulfa	1	100.00%	0	0.00%	0
<b>Total Isolates: 1</b>					

<i>Staphylococcus epidermidis</i>	<i>Sensitive</i>	<i>Intermediate</i>		<i>Resistant</i>	
Gentamicin	2	100.00%	0	0.00%	0
Levofloxacin	2	100.00%	0	0.00%	0
Nitrofurantoin	2	100.00%	0	0.00%	0
Oxacillin	0	0.00%	0	0.00%	2
Penicillin	0	0.00%	0	0.00%	2
Rifampin	2	100.00%	0	0.00%	0
Tetracycline	2	100.00%	0	0.00%	0
Trimeth/Sulfa	1	50.00%	0	0.00%	1
Vancomycin	2	100.00%	0	0.00%	0
<b>Total Isolates: 2</b>					



Board of Governance  
Emergency Operation Program and Policy and Procedure Summary

Date: **September 10, 2025**

**Policy and Procedure Committee Meeting Summary:**

- **Medical Records** No changes currently.
- **Medical-Staff By-laws-** No changes currently
- **Activities:** No changes currently
- **Policy & Procedures-** worked with the following departments on new and update policies for surveys.
  - ◆ **Infection Control/Employee Health**
  - ◆ **Pharmacy**
  - ◆ **Mammography Services**
  - ◆ **Nursing**

*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:**

A Hazard Vulnerability Analysis (HVA) shall be performed by the Emergency Operation Program and Committee identify areas of vulnerability so that provisions may be undertaken to lessen the severity and/or impact of an emergency/disaster.

- The Hazard Vulnerability Analysis (HVA) shall identify potential emergencies/ disasters that could affect the need for the facility's services or the facility's ability to provide said services; the likelihood of the emergencies/disasters occurring and the consequences of the emergencies/disasters
- The HVA shall include facility-based and community-based risk assessments annually.
  - ❖ CMS conditions of participation emergency preparedness E-006
  - ❖ §483.73, Requirement for Long-Term Care (LTC) Facilities
  - ❖ §485.625, Condition of Participation for Critical Access Hospitals (CAHs)
  - ❖ §491.12, Conditions for Certification for Rural Health Clinics (RHCs)

See attached 2024/2025 BMGH HVA Report

**Completed by:** Holly Heese, Compliance Coordinator

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



## Board of Governance

### Emergency Operation Program and Policy and Procedure Summary

Date: October 15, 2025

## Policy and Procedure Committee Meeting Summary:

### Policy and Procedure

#### MINUTES:

- **Coordinator-Holly Heese-** presented that:
  - Working with Infection Control for the Flu Covid Policies and declinations.
  - Worked with Food & Nutrition Manager on understanding of the policy procedures, regarding the way other departments interact.
  - Worked and finished all Mammography Policies waiting on Caryn to finish approving the program policies. Brought to forms committee that we will need the results letter translated into Spanish for our Spanish speaking patients. Rosa Vaquez will help with the translation.
  - Working with acute nursing to set up a monitoring policy and consent form.
- **Long-Term Care Nursing:** reported that all policies are up to date Cayla.
- **Laboratory:** Approvals done verbally. Will meet with Doctor Mockler when he is in the hospital October 23, 2025.

*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:

- **FLU POD Thursday October 17, 2024pm to 8pm**
- **Tri County Mitigation Plan (Humboldt, Lander & Pershing)**
- **FEMA Region 9 Drill in conjunction with Humboldt County**  
The FEMA after-action report was presented and discussed.
- **RHPP Critical Access Hospital Training Compliance Manual**  
The Nevada Hospital Association's Rural Healthcare Preparedness Partners (RHPP) distributed its newly updated Comprehensive Training Compliance Manual for Critical Access Hospitals (2025 Edition) to members earlier this week.
- **Lander County LEPC:**  
BMGH Emergency Operation Coordinator will conduct a drill for homeschool students of Lander County at the REC Center Thursday October 16 from 12:30 to 1:30 pm. This will meet the reach out processes needed for our Grants.
- **BMGH:**  
Code Blue drills have resumed mitigation plan needed to meet the following after action items.



Board of Governance

Emergency Operation Program and Policy and Procedure Summary

- Overhead paging system. All members of staff do not receive/or can hear the message
- Using the overhead paging system is hard. Training needs to be done so that when emergent situations arise it's second nature. Discussion on having guides on how to use the system next to each phone or having and all page button on each phone available.
- EMS used to manage the AED. During the code blue drill, it was noticed that the AED in the hallway had expired. Brynn will map and set a schedule for inspection to discuss at November's meeting.
- **Pandemics, Epidemics Influenza:**  
Review of policies and procedures for emergency preparation for and in avoidance of spreading infection diseases during cold and Flu season. Guidance for Jen Connolly Health Program Specialist I Nevada Health Authority. Protocols for masking and vaccination through the facility and in Longterm Care. Staff members have until Oct 31<sup>st</sup> to get the vaccination, or they must wear a surgical mask from November 1<sup>st</sup> 2025 to April 1<sup>st</sup>, 2026. The pharmacist informed the committee of the new vaccination that that state 2025-2026 covid season. Each season all residents must be given the choice of whether to vaccinate or not. If the resident chooses not to vaccinate for Covid a declination must be completed annually and uploaded into the EHR. Per LTC F tag.

**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  
October 8, 2025**

**BOARD PRESENT:**

Lyle Lemaire, Chairman  
Shawn Mariluch, Vice Chair  
Alicia Price, Commissioner Trustee  
Paula Tomera, Trustee

**STAFF PRESENT:**

Hope Bauer, Interim Chief Executive Officer  
Wayne Allen, Chief Financial Officer  
Cindy Fagg, Director of Finance

**GUESTS:**

Jodi Price  
Suzanne Lemaire  
Linda Lauritzen  
Lori Price  
Tracy Price  
Mike Sheppard  
Tyson Zacharias  
Roy Campbell  
Cat Beggs  
Carynn Conder

**CALL TO ORDER**

Chairman Lemaire called the October 8, 2025, Regular Session to order at 5:30 p.m.

**PUBLIC COMMENT**

No public comment.

**MOTION TO CONSENT**

By motion duly made (Mariluch), seconded (Tomera), and the Board unanimously passed the Agenda Notice for October 8, 2025, as discussed was approved.

*Addendum 1*

By motion (Mariluch), seconded (Tomera), and the Board unanimously passed the Board meeting minutes from September 10, 2025, as discussed, was approved.

*Addendum 2*

By motion duly made (Mariluch), seconded (Tomera), and the Board unanimously passed the Medical Staff two-year reappointment for Dr. Jeffery Gardner, as discussed, was approved.

By motion duly made (Mariluch), seconded (Tomera), and the Board unanimously passed the Medical Staff one-year initial appointment for Dr. Christopher O. Hampson, as discussed, was approved.

**NEW BUSINESS**

**Notice of Resignation**

Chairman Lemaire presented the resignation letter on behalf of Lyle Farr, Board Trustee. Chairman Lemaire made a public comment in regard to Farr's resignation, Chairman Lemaire stated with our deepest appreciation, Lander County Hospital District, Board of Trustees honors Lyle Farr, in recognition of his years of guidance, leadership and commitment serving as a member of the Battle Mountain General Hospital Board of Directors. Farr's Years of Service began in 2015 until 2025.

By motion duly made (Mariluch), seconded (Price), and the Board unanimously passed to accept the Letter of Resignation for Lyle Farr, Trustee's Board Seat B, as discussed, was approved.

*Addendum 3*

**UNFINISHED BUSINESS**

**Critical Access Hospital Construction**

Mike Sheppard, Project Manager, reported Battle Mountain General Hospital received the Certificate of Occupancy by Lander County as well as the approval from the State of Nevada. Per Sheppard there are a few items that need to be addressed as far as paint and the electronics for the Acute doors. The Mechanical Engineer suggested relocating the fan on the roof and adding more electrical. This task has been completed. The vent fan is currently on a stand but will be addressed with the Roof Contractor and Designer. Last, the specialized equipment is under warranty for one year on specialized equipment. RHP will provide a service contract.

By motion duly made (Mariluch), seconded (Price), and the Board unanimously passed to accept the update on the Construction Project, as discussed, was approved.

**Governing Board Bylaws for the Grievance Committee**

Chairman Lemaire addressed the new Governing Board Bylaw verbiage for Article VII, Section 2: Grievance Committee. The Board of Trustees shall be empowered to sit as a Grievance Committee upon request by the Chief Executive Officer. The revision will state, (in addition to the current statement), "In the event of a grievance against the Chief Executive Officer, the Board of Trustees shall be empowered to sit as a Grievance Committee.

By motion duly made (Mariluch) seconded (Price), and the Board unanimously passed the Governing Board Bylaw verbiage for Article IX, Section 2: Grievance Committee, as presented, was approved.

*Addendum 4*

## **Governing Board Bylaws for Granting Medical Staff/Clinic Privileges**

Chairman Lemaire addressed the Governing Board Bylaw verbiage for Article IX, Section 2: Granting Medical Staff/Clinical Privileges.

The revision will read, "The Chief Executive Officer shall negotiate the terms of employment with potential medical staff and shall memorialize the negotiated terms in a Letter of Intent that the CEO shall have the potential medical staff member sign. The Chief Executive Officer shall prepare a draft contract based upon the terms of the Letter of Intent. The Chief Executive Officer shall present the signed Letter of Intent and draft contract to the Board of Trustees at the next Board meeting."

"Medical Staff shall make recommendations concerning initial appointments, reappointments, termination of appointments, delineation of clinical privileges, and/or curtailment of clinical privileges to the Board of Trustees."

Appointment and reappointment to the Medical Staff shall occur in accordance with the Medical Staff Bylaws, as acknowledged by the Board of Trustees.

"The signed Letter of Intent, the draft contract, and Medical Staff recommendation shall be placed as an action item on the next meeting of the Board of Trustees for approval, denial, or modification and direction to the Chief Executive Officer to comply with the Board of Trustees direction, including entering into the draft contract between the Medical Staff and the Hospital."

By motion duly made (Mariluch) seconded (Tomera), and the Board unanimously passed the Governing Board Bylaw verbiage for Article IX, Section 2: Granting Medical Staff/Clinical Privileges, as presented, was approved.

*Addendum 5*

## **FINANCIALS**

Chief Financial Officer Allen addressed the August 2025 Financial Reports with the Board. Page 4 displayed the Balance Sheet Summary for the month of August 2025. He addressed the Cash and Liquid Capital - interest bearing, treasury bills and money market funds, Short-Term, Long-Term investments, and Construction in Progress amounts.

Chief Financial Officer Allen addressed the Income Statements on page 5. He explained the gross revenue total income before expenses, non-operating revenue and the investments income which is strong in the month of August 2025.

Chief Financial Officer Allen continued to address page 14 of the August 2025 Financial Reports. The Schedule of Patient Revenue vs. Patient Payments for fiscal years ended June 30, 2026, and 2025, and fiscal year 2025. This breakdown displayed the gross patient monthly revenue, three month rolling average, patient payments, and the patient payment percentage versus monthly rolling average.

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

*Addendum 6*

## Chief Executive Officer Summary

Interim Chief Executive Officer Bauer discussed a summary of hospital activities to the Board of Trustees. She asked the Board what information they would like her to present during the monthly Board meetings.

CEO Bauer, Jodi Price, Director of Business Services and Cindy Fagg, Director of Finance, have addressed the Chargemaster. Per CEO Bauer the company that addressed BMGH's Chargemaster stated that Price and Fagg have done an excellent job and that BMGH's chargemaster review was the easiest review the company has performed. CEO Bauer shared that additional Department Managers were present at tonight's Board meeting and these Managers will present their Department reports personally.

Price reported the results of the Chargemaster review. BMGH is below "saf" - standard analytic file and below surrounding peers. The peer hospitals included Pershing General Hospital, Humboldt General Hospital, Mesquite, Northeastern Nevada Regional Hospital and Banner. As soon as the Chargemaster results are available the Board will have a chance to review the information.

BMGH's overall price increase will be 2.28%. This increase will enable the facility to bill out an extra \$2,000,000 in charges. Per Price Medicare will roughly collect \$362,000 as well as Commercial insurances. BMGH will collect an estimated amount of \$725,000. Physical Therapy was 30% lower than surrounding peer and below "saf".

Price continued to discuss coding, procedure coding, CT charges with and without contrast and E and M levels. BMGH's E and M levels are lower than "saf" and lower than surrounding peers. BMGH's Laboratory rates are below peers. If BMGH increased lab pricing, BMGH would collect an extra \$359,000.

BMGH's room rates are extremely low per Price. Currently BMGH's swing room rate is \$1135 and the room rate for the Acute rooms is \$1362. BMGH does not charge for any Nursing services provided by the Registered Nurse. The proposed increased rate would be an estimated \$2700.

Xray pricing is particularly good and BMGH is underpriced. BMGH had 31 codes that have been deleted, 133 codes that are below surrounding peers and 7 codes that were overpriced compared to the surrounding peers. Price recommended that BMGH delay the price increases for 7 codes that are currently over the peers.

Lastly, Price reported that BMGH's Procedure Codes need to be addressed. The step in charges needs to be corrected. i.e.: suture removal skin tag removal, etc.

The Board discussed advertising for the new radiology machines and services. Chairman Lemaire shared in the month of August 2025, BMGH had a loss from Operations of \$456,000. BMGH continues to lose from Operations. Per Lemaire, BMGH is a hospital because of taxes, mine proceeds, investment income and because of the Citizens of Lander County. Chairman Lemaire would like to address and discuss BMGH's price increases and decide how to continue to produce revenues.

CEO Bauer reported that she recently had a Department Managers meeting and encouraged the Department Managers to attend monthly meetings to address the Board with any updates regarding their Departments.

Chief Financial Officer Allen reported a fast moving situation and would like to address the Board regarding the Big Beautiful Bill and the Rural Health Transformation fund. Allen would like to present this information during the next Board meeting.

CEO Bauer shared Danny Itza, Maintenance Manager, who recently retired and did not want any special recognition. BMGH planned a surprise BBQ scheduled for October 9, 2025. CEO Bauer extended this invitation to the Board.

BMGH had a recent Pharmacy Board inspection and passed.

Holly Heese, Compliance and Emergency Operations Planner scheduled an Earthquake drill for the County on October 16, 2025.

Emergency Medical Services would like to purchase the EMS truck from BMGH. Per CEO Bauer, BMGH has not used this vehicle since it was purchased. This item will be addressed during a future Board meeting.

Per CMS, BMGH's Price transparency needs to be completed in November and has to be posted on the facility's website. This information will be presented to the Board as soon as it is available.

#### **PUBLIC COMMENT**

No public comment.

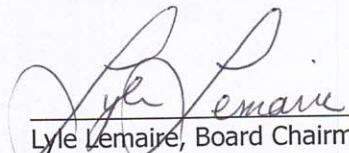
#### **ADJOURNMENT**

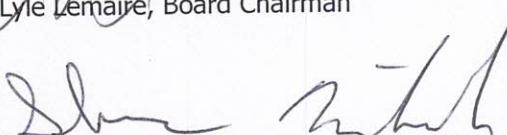
With no further business, Chairman Lemaire adjourned the Regular Session at 6:35 p.m.

Respectfully Submitted,

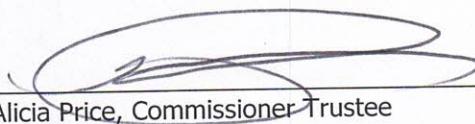
  
Jessica Ceja, Recording Secretary

#### BOARD SIGNATURES:

  
\_\_\_\_\_  
Lyle Lemaire, Board Chairman

  
\_\_\_\_\_  
Shawn Mariluch, Vice Chairman

  
\_\_\_\_\_  
APPROVED VIA ZOOM  
Paula Tomera, Trustee

  
\_\_\_\_\_  
Alicia Price, Commissioner Trustee