

**MINUTES OF MEETING  
BOARD OF COMMISSIONERS  
CALCASIEU CAMERON HOSPITAL SERVICE DISTRICT  
d/b/a WEST CALCASIEU CAMERON HOSPITAL  
TUESDAY, MARCH 22, 2022  
12:00 Noon - BOARD ROOM**

A regular meeting of the Board of Commissioners of Calcasieu Cameron Hospital Service District d/b/a West Calcasieu Cameron Hospital was held on Tuesday, March 22, 2022, in the hospital Board Room. Mr. Bobby LeTard called the meeting to order at 12:00 p.m.

COMMISSIONERS PRESENT: Bob Davidson; Frank LaBarbera; Bobby LeTard; Rick Watson; Joe Devall

COMMISSIONERS ABSENT: None

OTHERS PRESENT: Janie Fruge'; Jobie James; Christi Kingsley; Kris Lyons; JW Peloquin; Mike Klenke; Robbin Odom; Dondra Zaunbrecher;

GUESTS PRESENT: Dr. Brian Gamborg

Mrs. Janie Fruge' announced that Mrs. Fran Landry was the recipient of the February CEO Shining Star Award. Fran was recognized for her resilience and dedication during a time of numerous challenges, such as being extremely short-staffed for a long period of time and grieving the loss of an employee. Fran has excelled in providing support and comfort to her staff while stepping into many staff roles to ensure continued operations.

Mrs. Janie Fruge' then shared two (2) Patient Experience stories. She shared a message received from a member of our community *"My wife had an endoscopy procedure this morning. The young man promptly brought us back and began gathering information. Over the next few minutes, the other nurses were on the job and the Anesthetist began getting her ready. During that 30-40 minutes, all four were very kind to her and made her very comfortable. Dr. Ledet showed up, did the procedure, at the scheduled time, and cared for my wife like he always has. To sum up ..... why would you ever go anywhere else? We have the best staff here at WCCH!"*

The second experience came from a gentleman who stopped by the Administrative Office earlier today. *"My wife and I have lived in Carlyss for 50 years. Anytime we needed to go to an emergency room, we always went to Lake Charles. I recently had reason to bring my wife to WCCH ER. It was very nice having a hospital so close without having to drive too far. We got very good care here and there wasn't a person who wasn't top notch. The staff were out-of-this-world."* That concluded the Patient Experience report.

Mrs. Jobie James presented Board Education on The No Surprises Act (NSA). This Act establishes federal protections against surprise medical bills. Surprise medical bills happen when insured consumers inadvertently receive care from out-of-network hospitals, doctors, or

other providers they did not choose. Surprise medical bills pose financial burdens on consumers when health plans deny out-of-network claims or apply higher out-of-network cost sharing; consumers also face a “balance billing” from out-of-network providers that have not contracted to accept discounted payment rates from the health plan. The federal government estimates the NSA will apply to about 10 million out-of-network surprise medical bills a year. This Act will protect consumers from surprise medical bills by requiring private health plans to cover out-of-network claims and apply in-network cost sharing; and prohibit doctors, hospitals, and other covered providers from billing patients more than in-network cost sharing amount for surprise medical bills. The NSA applies to most emergency services and air ambulance transportation (emergency and non-emergency), as well as post-emergency stabilization services. In addition, the NSA covers non-emergency services provided at in-network facilities by out-of-network providers. The regulation defines these services to include treatment, equipment and devices, telemedicine services, imaging and lab services, and pre-operative and post-operative services. Enforcement of the NSA rests with the U.S. Department of Labor and the Department of Treasury. Fully insured group plans and individual health plans will be primarily regulated by the states. The Department of Labor and Health & Human Services will be required to conduct annual audits of claims data. The impact of the NSA on our hospital is likely to be minor. All our service providers are contractually obligated to negotiate contracts to provide services as in-network providers with all third-party payers contracted with WCCH. Our annual out-of-network claims are less than 1% of total claims. Blue Cross currently performs a review to pre-approve potential out-of-network claims to be paid at in-network rates and works to negotiate claims at contracted rates through other third-party contracts. That concluded This Board’s On Board Education.

Mr. LeTard presented the minutes from the meeting of the Board of Commissioners held on February 22, 2022, for approval. Mr. Frank LaBarbera made a motion to approve the minutes as presented. Mr. Rick Watson seconded the motion. The motion passed unanimously. Mr. LeTard announced the next meeting of the Board of Commissioners will be held on April 26, 2022. The Doctor’s Day luncheon is scheduled for March 30, 2022, from 11 – 1:30 p.m.

Mrs. Frugé presented the Chief Executive Officer’s report. She began by reporting that we have begun the process of removing the HEPA Air Scrubbers that were installed in patient rooms. New window frames are being built and glass will be ordered and installed. Next, Mrs. Fruge’ reported on a few of the bills currently in Legislative Session, a few of which are pertaining to rights of employees. The Nursing Safe Harbor is one of these, which would create a safe harbor from adverse employment action when a nurse refuses to accept an assignment because either: (1) In the nurse’s good faith judgement, the nurse lacks the basic knowledge, skills, or abilities necessary to deliver care that is safe and that meets the minimum standards of care to such an extent that accepting the assignment would expose one or more patients to an unjustifiable risk of harm or would constitute a violation of the law or rules promulgated by the Louisiana State Board of Nursing. (2) The nurse questions the medical reasonableness of another healthcare provider’s order that the nurse is required to execute. This bill would require healthcare facilities to develop a process by which a nurse may invoke safe harbor. The Physician Gold Card (SB 112) is another bill currently in session. This would remove the prior authorization roadblocks required by health plans when the provider can meet certain conditions. Physicians can earn a continuous gold card by earning approvals on at least 80% of their pre-authorization’s on a given service over a six-month period, and guarantees payment. This Legislation is modeled after Texas legislation enacted last year. The Louisiana Hospital

Association supports this bill. HB 286 – Medicaid Credentialing - is being proposed. This would exempt healthcare professional that maintain hospital privileges or membership on a hospital medical staff from Medicaid managed care plan credentialing requirements. In addition, SB 59 – Medicaid Prepayment Review – is being proposed which would limit the application of prepayment review by Medicaid managed care plans. Prepayment review would only be allowed when ordered directly by LDH pursuant to the Medical Assistance Program Integrity Law. Next, Mrs. Fruge’ announced that the Office of Public Health plans to move their office into the leased space inside the Community Health Center starting April 1, 2022. Lastly, Mrs. Fruge’ reminded everyone that the Korn Ferry/Lake Charles Championship Golf Tournament begins this week. WCCH, in partnership with Collins Orthopaedics & Sports Medicine and Stelly Physical & Occupational Therapy, is the Official Sports Medicine Sponsor. WCCH has a team competing. That concluded the CEO report.

Mrs. Jobie James, Chief Financial Officer, presented the Financial Reports for the hospital through February 28, 2022. She reported a balance of \$17,537,810.12 in cash, compared to \$16,919,583.93 in January. Contributing factors include CEA and UPL funds. Mrs. James explained that the days outstanding in A/R are at 50.77 for February, falling below the set goal of 55 days outstanding in A/R. Mrs. James continued by reporting \$15,290,240.95 in Gross Revenue in February, compared to a \$13,066,601.00 budget. Net Revenue was \$4,418,837.06. Mrs. James then reported Operating Expenses of \$6,432,443.39 compared to a budget of \$6,063,297.00. Contributing factors include increased salaries, benefits, supplies and contract labor. Net Income for February was (\$737,594.64), compared to a budget of \$131,749.00 and (\$145,982.52) at this time last year. She continued by reporting that admissions were decreased with 168 admissions in February compared to a budget of 188 and 188 this time last year. Census Days were decreased with 744 compared to a budget of 904. Average Length of stay was 4.4 days compared to 4.8 days budgeted and 4.8 in prior year; and Average Daily Census was 26.6 compared to 32.3 in prior year. Readmissions percentage was at 6.5% which is decreased from last year. Next, Mrs. James reviewed the Monthly Dashboard stating as of the end of February in the area of Safety – Hospital Inpatient Readmissions, where patients are readmitted within 30 days of discharge for any reason, percentage is 6.5% for February with 11 readmissions and 7.7% YTD. The Annual Net Income is (\$1,702,629.00) with an YTD budget of \$2,000,000.00. In the area of Efficiency comparing Full Time Equivalents per Adjusted Average Daily Census to prior year, is 9.4 compared to 7.0 in prior year. Contributing factor is a spike in out-patient volume. Mrs. James then presented the year-to-date audit schedule and summary.

Next, Mrs. Kris Lyons reviewed the HCAHPS report for February. Scores indicate 68.2% positive comments for inpatients with 34 responses received; 57.4% positive comments for ED with 34 responses received; and 66.7% positive comments in ambulatory surgery with 7 responses received. That concluded the Financials report.

Mr. JW Peloquin then presented a Facilities report. He began with an update on the Carlyss Medical Clinic. The storefront has been installed and we are waiting on shipment of the door. There is a change order in an amount between \$17,000.00 - \$25,000.00 for counter tops. Projected completion is June 2022. Next, Mr. Peloquin reported a Cath lab change order in the amount of \$18,860.27 for flooring and painting. In addition, there is a no cost change order to the Cath Lab project for an upgrade to the platform. Since our purchase of the Cath Lab, an upgrade became available. Only ten (10) will be available in the United States. Our Sales Rep

selected WCCH for the upgrade due to her confidence, positive impression and experience with the Cardiology Staff, led by Mrs. Cathy Patton, and because we were her first customer. That concluded the Facilities report.

Mrs. Robbin Odom gave a Patient Care Report. She began with an update regarding the installation of the new Nurse Call System. We are 80% complete with installation on Second Floor. When that is completed, installation will begin on Third Floor. Next, Mrs. Odom announced that Mrs. Shelley Downs has transferred to another position within our organization. Ms. Angela Ames, RN, is transitioning into the 2<sup>nd</sup>/3<sup>rd</sup> Floor Manager role. She has been a staff RN in those Units, and this is her first time as a manager. Mrs. Odom then reported the Odyssey House Navigator Program for substance abuse is going well. This program is offered to us, and to Lake Charles Memorial Hospital, through a grant. Since inception here, we have had three referrals and one treatment program placement. Mrs. Odom then reported on the Nurse Extern Program. There were six (6) externs in the first rotation and we have hired two (2) at this time, who will begin work following graduation in May. We continue our participation in recruiting events at McNeese and Sowella. That concluded the Patient Care report.

Next, Mrs. Kristine Lyons presented the High Reliability and Performance Improvement Report. She began with a report on Patient Satisfaction. The Press Ganey website has been reviewed with the Director of Surgery and ICU. Survey flyers were created by Marketing using guidelines from Press Ganey. These were implemented on February 14, 2022. Stoplight brochures: The Director of Surgery is working with the IT Analyst to have the form included in the Paragon System. The Analyst will meet with the day surgery staff to determine best workflow. The Director of Surgery is researching scripting for post-op calls done 2-3 days postoperatively. Managed Care Incentive Payment Program: LSU's MCIP has transitioned to a team. Deadlines for project year 4 are being re-assessed and assigned to evenly distribute the workload. Q4 LVC Grand Rounds video and slide deck were sent to PEMM for distribution to providers. Performance Improvement Committee: QAPI dashboard has been created with quarterly indicators. The new PI tool and dashboard will be implemented for April reporting. Joint Commission survey preparation: Our survey is due April 13, 2022. The Regulatory Readiness Workgroup is responsible for overseeing preparations. The Workgroup aligns with strategic goals of the organization and meets weekly to review progress on preparations. The Vizient follow-up survey is scheduled for March 23<sup>rd</sup> and 24<sup>th</sup>. That concluded the High Reliability and Performance Improvement Report.

Mr. Mike Klenke gave an IT report. He began by reporting on the AT&T circuit upgrades affecting our Johnson Bayou and Hackberry Rural Health Clinics. This is 80% completed. Next, Mr. Klenke reported enhanced security filtering on our servers. That concluded the IT report.

Mrs. Robbin Odom gave a Compliance Report. She began by presenting the revised Patient Complaint & Grievance Resolution Policy. There was a motion by Mr. Bob Davidson, seconded by Mr. Joe Devall to approve the Patient Complaint & Grievance Resolution Policy as presented. Motion passed unanimously. That concluded the Compliance Report.

Moving into New Business, Mrs. Janie Fruge' presented the board with a list of Medical Staff Appointments, Reinstatements and Resignations, FPPE, and Committee Assignments:

**ITEMS REQUIRING APPROVAL FROM THE  
BOARD OF COMMISSIONERS – March 22, 2022  
(Approved/recommended by Medical Executive Comt.  
meeting held – March 15, 2022)**

**A. Appointments**

Courtesy Staff

Alice Babst-Prestia, M.D. (OB/GYN) – CHRISTUS Lake Area Medical Center (*Temporary Privileges effective 2/18/2022*)

James Brown III, M.D. (OB/GYN) – CHRISTUS Lake Area Medical Center (*Temporary Privileges effective 3/4/2022*)

Locum Tenens/Temporary Privileges

Bose Cheeran, M.D. (IM/Interventional Cardiology) Iberia Medical Center  
*\*(Assignment date 2/25/2022-2/27/2022)*

Report of Teleradiology Services

Radiology Partners, Inc.: Physician Credentialing Agreement  
Schedule 1: Telemedicine Providers; Agreement between WCCH and Access Radiology  
Additional Providers: **Nha Phong Tran, M.D.**

Allied Health Professionals

Matthew Lovejoy, APRN – WCCH Clinics (*Temporary Privileges granted 3/8/2022*)  
Brianna Olmsted, APRN – Collins Orthopaedics / Supervising Physician: G. Collins, M.D.

**B. Resignation of Clinical Privileges**

Medical Staff

Adetoun Faniyan – Emergency Medicine/PEMM (*effective 2/25/2022*)

Michael Jegart, M.D. – Emergency Medicine/PEMM (*effective 2/16/2022*)

**C. FPPE/OPPE Review: FPPE Assessment Reviews – Completed (Attachment)**

**D. Report of Medical Staff Committees (Attachment)**

**E. Advanced Practice RN Guidelines**

1. Clinical Care Guidelines for Prescribing Controlled Substances
2. Patient Opioid / Controlled Substance Agreement

**MEDICAL STAFF/ALLIED HEALTH PROFESSIONALS**

**Focused Professional Practice Evaluations**

SUBMITTED TO MEDICAL EXECUTIVE COMT. – MARCH 15, 2022

SUBMITTED TO BOARD OF COMMISSIONERS – MARCH 22, 2022

The FPPE process occurs when a practitioner is granted privileges for the first time, either at initial appointment or as a current member of the medical staff.

The following providers have completed their initial period of focused evaluation by their physician advisor, in which no trends were identified.

Emergency Room Staff

**Chantel Burns, M.D.** - PEMM / Emergency Medicine

**Asma Khan, M.D.** – PEMM / Emergency Medicine

Hospital Medicine Staff

**Adetoun Faniyan, M.D.** – PEMM / Hospital Medicine

**Arian Haxhillari, M.D.** - PEMM / Hospital Medicine

Allied Health Professionals

**Lauren Courville, APRN** – PEMM / Emergency Medicine

**Christopher K. Guillory, APRN** – PEMM / Emergency Medicine

**Matthew Lovejoy, APRN** – PEMM / Emergency Medicine

**MEDICAL EXECUTIVE COMMITTEE REPORT TO THE  
BOARD OF COMMISSIONERS – March 22, 2022  
2022 Medical Staff Committees and Officers**

**A. Medical Executive Committee**

- a. Dr. Kelly Fuqua, President
- b. Dr. Ashley Mullins, Sec./Treasurer, PI Chairman, HM Advisor
- c. Dr. Andrew Davies, Vice President, Medication Safety Chairman, RHC Advisor
- d. Dr. Scott Bergstedt, Past President, OB/Gyn Advisor
- e. Dr. Maureen Lannan, Medicine Advisor
- f. Dr. Timothy Quattrone, ER Advisor
- g. Dr. Christopher Thompson, Cardiology Advisor
- h. Dr. Adam Olsan, Member at Large/Radiology Advisor
- i. Dr. John VanHoose, Member at Large/Pathology Advisor

**B. Performance Improvement Committee**

- a. Dr. Ashley Mullins, Chairman

**C. Nominating Committee**

- a. Consists of three active staff members, appointed by the President of the Organized Medical Staff at the October Medical Executive Committee meeting.

**D. Bylaws Committee**

- a. Consists of seven persons appointed from the Active Staff.

**E. Physician Health Committee**

- a. Dr. Maureen Lannan, Chairman, Family Medicine Advisor
- b. Dr. Timothy Quattrone, ER Physician Advisor
- c. Dr. Stephen Castleberry, Surgery Advisor

## **F. Department/Specialty Physician Advisors**

- a. Surgery – Geoffrey Collins, M.D.
- b. Medicine – Maureen Lannan, M.D.
- c. Emergency Medicine – Timothy Quattrone, M.D.
- d. Hospital Medicine – Ashley Mullins, M.D.
- e. OB/GYN – Scott Bergstedt, M.D.
- f. Pediatrics – Albert Richert, Jr., M.D.
- g. Radiology – Adam Olsan, M.D.
- h. Cardiology – Christopher Thompson, M.D.
- i. Anesthesia – William Dedo, M.D.
- j. Pathology – Robert Rumsey, M.D.
- k. WCCCH Health Clinics – Andrew Davies, M.D.; Jody George, M.D.; Kevin Schlamp, M.D.

Mr. Rick Watson made a motion to approve and accept the Medical Staff appointments, resignations, recommendations, FPPE, and Committee assignments as submitted by the Medical Executive Committee. Mr. Bob Davidson seconded the motion. Motion passed unanimously.

The following capital requests were then presented for approval:

1. Microsoft SQL Database Software for Lab System (Orchard): \$11,627.82

Mr. Frank LaBarbera made a motion, seconded by Mr. Joe Devall to approve the purchase of the Microsoft SQL Database Software for Lab System (Orchard) in the amount of \$11,627.82. Motion passed unanimously.

2. Philips IntelliSpace CT Workstation: \$38,935.00

Mr. Bob Davidson made a motion, seconded by Mr. Rick Watson to approve the purchase of the Philips IntelliSpace CT Workstation in the amount of \$38,935.00. Motion passed unanimously.

Mr. Joe Devall made the motion at 1:13 pm, seconded by Mr. Frank LaBarbera, to move into Executive Session for the purposes of strategic planning, marketing, and personnel matters in keeping with Louisiana revised Statutes 42:6, 42:6.1, 46: 1073. The motion passed unanimously.

Mr. Frank LaBarbera made a motion at 2:11 pm to move back into Regular Session. Mr. Bob Davidson seconded the motion. The motion passed unanimously.

There being no further business, Mr. Frank LaBarbera made the motion, seconded by Mr. Rick Watson to adjourn the meeting. The meeting was adjourned at 2:12 pm.

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Chairman of the Board

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Secretary of the Board