

Exhibit “A”

Census	2018					2019							Texas Average
	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July	
ER Visits	234	211	233	217	223	240	183	202	206	198	215	226	
Conversion to Inpatient/observation	17	20	18	19	17	20	15	10	10	9	10	9	
<i>Percentage</i>	7%	9%	8%	9%	8%	8%	8%	5%	5%	5%	5%	4%	
Transferred out	22	16	13	20	18	16	12	15	11	11	12	10	
<i>Percentage</i>	9%	8%	6%	9%	8%	7%	7%	7%	5%	6%	6%	4%	
ER shifts covered by doctors	0%	40%	45%	65%	72%	55%	61%	63%	78%	92%	77%	74%	
Average Inpatient days per day	1.61	1.50	3.61	2.60	2.45	1.68	2.71	1.61	2.33	1.90	1.37	3.43	1.63
CTs	75	82	74	71	52	52	35	45	57	46	63	74	
Xrays	286	253	295	235	245	257	266	244	239	250	218	294	
Ultrasounds	41	34	39	30	32	18	33	28	28	28	23	45	
Encounters - Adult Clinic	653	614	789	606	602	673	643	618	635	616	525	557	
Encounters - Pediatric Clinic	323	331	425	276	284	334	346	320	341	287	217	235	
Behavioral Health patients	78	79	74	65	67	75	77	74	76	76	70	64	
Physical Therapy	5	6	7	6	10	8	3	4	6	5	7	9	

Additional Items:

*Dr. Watkins- Emergency Room

*Dr. Sweeney- Podiatry

*Health Fair- Planning Phase

Exhibit “B”

Hubert Oxford IV

Subject: FW: DY 8 UC IGT Commitments - Due 8/22/19
Attachments: Master Affiliation as of 8_15_19 for publication.xlsx; DY 8 UC IGT Commitments by Provider.xlsx; DY 8 UC IGT Commitments by Affiliation Allocation Form.xlsx
Importance: High

From: Fine,Mance (HHSC) <Mance.Fine@hhsc.state.tx.us> on behalf of HHSC Uncompensated Care Tools <uctools@hhsc.state.tx.us>

Sent: Thursday, August 15, 2019 5:04 PM

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'hplyler@wghospital.com' <hplyler@wghospital.com>; 'richard.ford@steward.org' <richard.ford@steward.org>; 'Kenny.Russo@hcahealthcare.com' <Kenny.Russo@hcahealthcare.com>; 'charles.mallon@hcahealthcare.com' <charles.mallon@hcahealthcare.com>; 'virgil.winslow@hcahealthcare.com' <virgil.winslow@hcahealthcare.com>; 'accounting@igh-hospital.com' <accounting@igh-hospital.com>; 'derrick.flowers@claritycgc.org' <derrick.flowers@claritycgc.org>; 'juana.giralt@uhsinc.com' <juana.giralt@uhsinc.com>; 'MaryJo.Sullins@uhsinc.com' <MaryJo.Sullins@uhsinc.com>; 'bblevins@fchtexas.com' <bblevins@fchtexas.com>; 'mhernandez@vvrnc.org' <mhernandez@vvrnc.org>; 'CharlotteWard@texashealth.org' <CharlotteWard@texashealth.org>; 'broland@muensterhospital.com' <broland@muensterhospital.com>; 'stephen.kuehler@knoxhospital.org' <stephen.kuehler@knoxhospital.org>; 'tracy.betts@hcmhosp.com' <tracy.betts@hcmhosp.com>; 'Steve.Roussel@BSWHealth.org' <Steve.Roussel@BSWHealth.org>; 'thomas.sledge@ntmconline.net' <thomas.sledge@ntmconline.net>; 'mschaefer@sonora-hospital.org' <mschaefer@sonora-hospital.org>; 'v.lopez@umhtx.org' <v.lopez@umhtx.org>; 'pstewart@gonzaleshealthcare.com' <pstewart@gonzaleshealthcare.com>; 'monicak@parkviewhosp.org' <monicak@parkviewhosp.org>; 'parker.pridgen@ahss.org' <parker.pridgen@ahss.org>; 'cfo@hamiltonhospital.org' <cfo@hamiltonhospital.org>; 'tanderson@rankincountyhospital.org' <tanderson@rankincountyhospital.org>; 'renae.thomas@reaganhealth.com' <renae.thomas@reaganhealth.com>; 'john.armour@hcahealthcare.com' <john.armour@hcahealthcare.com>; 'ismiga@jchd.org' <ismiga@jchd.org>; 'sohail.jalil@hcahealthcare.com' <sohail.jalil@hcahealthcare.com>; 'kirk.pogue@lpnt.net' <kirk.pogue@lpnt.net>; 'Tim.Carr@MHSHealth.com' <Tim.Carr@MHSHealth.com>; 'paul.veillon@uhsinc.com' <paul.veillon@uhsinc.com>; 'jimh@mangoldmemorial.org' <jimh@mangoldmemorial.org>; 'sclark03@jpshealth.org' <sclark03@jpshealth.org>; 'craigbjerke@mhd.com' <craigbjerke@mhd.com>; 'CandyPowell@collingsworthgeneral.net' <CandyPowell@collingsworthgeneral.net>; 'James.McNatt@BSWHealth.org' <James.McNatt@BSWHealth.org>; 'bob.copeland@covplv.org' <bob.copeland@covplv.org>; 'Kris.Kavasch@uthct.edu' <Kris.Kavasch@uthct.edu>; 'lmedovich@petersonrnc.com' <lmedovich@petersonrnc.com>; 'Richard.Humphrey@phhs.org' <Richard.Humphrey@phhs.org>; 'mdockery@permianregional.com' <mdockery@permianregional.com>; 'wpack@stlukeshealth.org' <wpack@stlukeshealth.org>; 'jhammel@obmc.org' <jhammel@obmc.org>; 'lmeekins@noconageneral.com' <lmeekins@noconageneral.com>; 'cklein@lambhc.org' <cklein@lambhc.org>; 'jgrigson@covhs.org' <jgrigson@covhs.org>; 'antoinettes@bmhd.org' <antoinettes@bmhd.org>; 'randy.slack@tenethealth.com' <randy.slack@tenethealth.com>; 'jwren@wisehealthsystem.com' <jwren@wisehealthsystem.com>; 'stevenrose@texashealth.org' <stevenrose@texashealth.org>; 'rureta@pcmhfs.com' <rureta@pcmhfs.com>; 'paulg@brownfield-rmc.org' <paulg@brownfield-rmc.org>; 'joeb@dhchd.org' <joeb@dhchd.org>; 'bprochnow@matagordaregional.org' <bprochnow@matagordaregional.org>; 'Mccaber@nacmem.org' <Mccaber@nacmem.org>; 'lboles@huntregional.org' <lboles@huntregional.org>; 'Leonard_Binkley@QuorumHealth.com' <Leonard_Binkley@QuorumHealth.com>; 'Michelle.Ramirez@dchstx.org' <Michelle.Ramirez@dchstx.org>; 'rhonda@rpmh.net' <rhonda@rpmh.net>; 'klatimer@childresshospital.com' <klatimer@childresshospital.com>; 'susan_popp@chs.net' <susan_popp@chs.net>; 'bwhite@covhs.org' <bwhite@covhs.org>; 'michael.norby@harrishealth.org' <michael.norby@harrishealth.org>; 'bbrewer@fallshospital.com' <bbrewer@fallshospital.com>; 'jeff.barnhart@dschd.org' <jeff.barnhart@dschd.org>; 'cjones@cmhos.org' <cjones@cmhos.org>; 'rwick@columbusch.com' <rwick@columbusch.com>; Rebecca McCain <rebecca.mccain@electrahospital.com>; 'dglassburn@primehealthcare.com' <dglassburn@primehealthcare.com>

Cc: Jacques,Robert (HHSC) <Robert.Jacques@hhsc.state.tx.us>

Subject: DY 8 UC IGT Commitments

DY 8 UC Providers,

Attached to this email are the DY 8 UC maximum IGT amounts for all eligible providers for the upcoming final payment. Providers can find their maximum IGT commitment amount by hospital in column Q of the attached "DY 8 UC IGT Commitment by Provider" spreadsheet. The total costs that the commitment amounts were based on can be found in column O, while the detail behind these costs can be found by unhiding the columns between F and O. If you have questions or concerns about your total UC costs, please email uctools@hhsc.state.tx.us.

The total costs referenced above were calculated using an interim hospital specific limit that does not offset eligible costs by commercial or Medicare payments. However, due to a federal court ruling from earlier this week, HHSC is assessing if the interim hospital specific limit for the final DY8 UC payment should change. The figures included in this commitment are the highest possible under any alternative interim hospital specific limit scenario. Consequently, this represents the largest IGT that you might have to transfer. HHSC will continue to update providers as it considers the methodology for the final DY8 UC payment.

Also attached to this email is the "DY 8 UC IGT Commitment by Affiliation Allocation Form" and the most current Master Affiliation Listing. **Providers should coordinate with their affiliated government entities to complete and submit the allocation form by provider (and not by government entity) to HHSC.** When submitting the form, please use the naming convention **TPI_HospitalName_DY8AllocationForm**. Providers will use the affiliation numbers from the Master Affiliation Listing and the total UC costs and maximum IGT amounts from the "DY 8 UC IGT Commitment by Provider" spreadsheet to populate the allocation form. If you are aware that your hospital does not have its maximum IGT fully funded, please note this in the email when submitting the allocation form to HHSC.

Please be aware that due to new reporting requirements, HHSC will not accept LPPF funds for a non-LPPF affiliation, nor will HHSC allocate LPPF funds to a non-LPPF affiliation. Please note, LPPF affiliations now begin with 450. Non-LPPF affiliations were not changed.

Please submit your allocation form to uctools@hsc.state.tx.us by 5:00 pm, Thursday, August 22, 2019. Please also email the UC Tools mailbox with any questions you have.

Thank you,

HHSC Rate Analysis



NOTICE OF CONFIDENTIALITY: *The information transmitted is intended only for the person or entity to which it is addressed and may contain CONFIDENTIAL material. If you receive this material/information in error, please contact the sender and delete or destroy the material/information.*

Exhibit “C”

WSHD Treasurer's Report and Supporting Documents

Reporting Date: Wednesday, August 21, 2019

Pending Expenses		For	Amount	Funds Summary	Totals
Brookshire Brothers	Indigent Care		\$7,721.40	Prosperity Operating	\$699,514.31
Brookshire Brothers-Winnie	Indigent Care Medicare		\$6.80	Interbank (Restricted-Comp. 1 and Prepaid Int.)	\$4,926,738.14
Wilcox Pharmacy	Indigent Care		\$1,914.95	Interbank (Unrestricted)	\$728,549.84
UTMB at Galveston	Indigent Care		\$5,709.32	Prosperity CD	\$106,930.21
UTMB Faculty Group	Indigent Care		\$1,579.53	TexStar	\$681,770.00
Indigent Healthcare Solutions	IC Inv #68189		\$1,109.00	Allegiance Bank LOC (Available)	\$700,000.00
American Education Services	S Stern-Student Loan		\$150.14	Net Cash Position (less Interbank)	\$2,916,764.36
Penelope (Polly) Butler	Youth Counseling		\$85.00	Pending Expenses	(\$39,727.90)
Grace Nichols	Youth Counseling		\$0.00	Ending Balance	\$2,877,036.46
Benckenstein & Oxford		49362	\$18,725.00	Last Month	
Hubert Oxford	1/2 Legal Retainer		\$500.00	Prosperity Operating	\$716,045.54
Josh Heinz	1/2 Legal Retainer		\$500.00	Interbank-restricted	\$3,641,321.40
David Sticker	Inv #21326		\$843.75	Interbank-unrestricted	\$100.00
Hometown Press	Inv# 2135		\$343.12	Prosperity CD	\$106,930.21
Seabreeze Beacon	Inv# 3872		\$507.64	TexStar	\$680,389.90
Prosperity Bank	Credit Card (ACH)		\$0.00	Allgeiance Bank LOC (Available)	\$700,000.00
Function 4	Copier		\$32.25	Net Cash Position (less Interbank)	\$2,203,465.65
Total Pending Expenses			\$39,727.90	Pending Expenses	(\$42,127.96)
				Ending Balance	\$2,161,337.69

Interbank Account Reconciliation

GIB Balance 8/19/2019	\$5,655,287.98
QIPP 2, Qtr 3 CP 1 Mar 2019	(\$1,008,264.45)
QIPP 2, Qtr 3 CP 1 Apr 2019	(\$1,050,964.48)
QIPP 2, Qtr 3 CP 1 May 2019	(\$1,001,377.93)
QIPP 2, Qtr 4 CP 1 Jun 2019	(\$992,973.08)
QIPP 2, Qtr 4 CP 1 July 2019 (\$978,943.13 total due-Pay to Allegiance)	(\$134,770.44)
QIPP 1-A2 Adjustment (\$88,552.64 total due and 1/2 due to NHs)	(\$8,797.46)
(Non-Qipp funds due to NHs)	(\$20,300.00)
Accrual for Loan 14 Interest 4 Pmts @ \$60,794.06 (June to Sept)	(\$121,588.12)
Accrual for Loan 15 Interest 5 Pmts @ \$99,583.09 (June to Oct)	(\$298,749.27)
Reserve for Loan 14	(\$288,852.91)
Balance to keep in GIB	(\$100.00)
	<u>\$728,549.84</u>

Transactions Since Last Meeting

Date	To	For	Amount	
7/31/2019	Salt Creek Capital	Loan 14-Int (Month 8 of 10)	(\$60,794.02)	<i>(Transfer was short .04 added to Aug 31st)</i>
7/31/2019	Salt Creek Capital	Loan 15-Int (Month 2 of 10)	(\$99,583.09)	
8/7/2019	Allegiance Bank	Interest	(\$6,027.78)	
8/8/2019	LTC Group	May, June & July 2019	(\$410,400.00)	
8/9/2019	Managers	Payment of Incentive Fees	(\$1,427,782.84)	
Total Transactions Since Last Meeting			<u>(\$2,004,587.73)</u>	

Upcoming Transactions				
Anticipated Date	For	Upcoming Transactions	Income	Expenses
8/22/2019	State of Texas	IGT-Uncompensated Care		(\$1,519,957.40)
8/31/2019	MCO	QIPP 1-A2 Adjustment	\$88,552.64	
8/31/2019	Managers	Pay 1/2 of QIPP 1-A2 Adjustment		(\$44,276.32)
8/31/2019	Allegiance Bank	Line of Credit		(\$978,943.13)
8/31/2019	Salt Creek Capital	Loan 14-Interest (Month 9/10)		(\$60,794.10)
8/31/2019	Salt Creek Capital	Loan 15-Interest (Month 3/10)		(\$99,583.09)
	Managers	Payment of Incentive Fees QIPP A1 Adjustment		(\$44,276.32)
9/7/2019	Allegiance Bank	Interest Payment		(\$6,027.78)

Outstanding Short Term Revenue Note					
Loan 14-Principle	\$4,342,432.85				
Interest	16.80%				
Fund Received	11/29/2018				
	Date	Balance	Interest	Principal Revd.	Payment
1	1/2/2019	\$4,342,432.85	\$60,794.06	\$0.00	\$60,794.06
2	1/31/2019	\$4,342,432.85	\$60,794.06	\$0.00	\$60,794.06
3	2/28/2019	\$4,342,432.85	\$60,794.06	\$0.00	\$60,794.06
4	3/31/2019	\$4,342,432.85	\$60,794.06	\$0.00	\$60,794.06
5	4/30/2019	\$4,342,432.85	\$60,794.06	\$1,008,264.45	\$1,069,058.51
6	5/31/2019	\$4,342,432.85	\$60,794.06	\$1,050,964.48	\$1,111,758.54
7	6/30/2019	\$4,342,432.85	\$60,794.06	\$1,001,377.93	\$1,062,171.99
8	7/31/2019	\$4,342,432.85	\$60,794.06	\$992,973.08	\$1,053,767.14
Reserve	8/31/2109	\$4,342,432.85	\$0.00	\$288,852.91	\$288,852.91
9	8/31/2019	\$4,342,432.85	\$60,794.06	\$0.00	\$60,794.06
10	9/30/2019	\$4,342,432.85	\$60,794.06	\$0.00	\$60,794.06
Amount Paid	9/30/2019	\$0.00	\$607,940.60	\$4,342,432.85	\$4,950,373.45
Amount Remaining				\$0.00	

Outstanding Short Term Revenue Note					
Loan 15-Principle	\$7,113,077.80				
Interest	16.80%	10 Months: \$1,009,253.89		Set Aside: \$504,626.95	
Fund Received	5/29/2019				
	Date	Balance	Interest	Principal Revd.	Payment
1	6/29/2019	\$7,113,077.80	\$99,583.09	\$0.00	\$99,583.09
2	7/31/2019	\$7,113,077.80	\$99,583.09	\$0.00	\$99,583.09
3	8/29/2019	\$7,113,077.80	\$99,583.09	\$0.00	\$99,583.09
4	9/29/2019	\$7,113,077.80	\$99,583.09	\$0.00	\$99,583.09
5	10/29/2019	\$7,113,077.80	\$99,583.09	\$1,083,931.42	\$1,183,514.51
6	11/29/2019	\$7,113,077.80	\$99,583.09	\$1,090,704.44	\$1,190,287.53
7	12/29/2019	\$7,113,077.80	\$99,583.09	\$1,222,224.71	\$1,321,807.80
8	1/29/2020	\$7,113,077.80	\$99,583.09	\$1,231,424.35	\$1,331,007.44
Reserve	2/29/2020	\$7,113,077.80	\$0.00	\$85,159.65	\$85,159.65
9	2/28/2020	\$7,113,077.80	\$99,583.09	\$1,202,095.44	\$1,301,678.53
10	3/29/2020	\$7,113,077.80	\$99,583.09	\$1,197,537.79	\$1,297,120.88
Amount Paid	3/29/2020	\$0.00	\$995,830.90	\$7,113,077.80	\$8,108,908.70
Amount Remaining				\$0.00	\$0.00

Allegiance Bank Line of Credit					
Principle	\$2,700,000.00	Principle Balance Owed	\$2,000,000.00		
Interest	3.25%	LOC Funds Available	\$700,000.00		
	Date	Description	Withdrawal / Advance	Principle Payment	Interest
	3/7/2019	Interest Payment			(\$5,444.45)
	4/7/2019	Interest Payment			(\$6,027.78)
	5/7/2019	Interest Payment			(\$5,833.33)
	6/7/2019	Interest Payment			(\$6,027.78)
	7/7/2019	Interest Payment			(\$6,027.78)
	8/7/2019	Interest Payment			
	8/30/2019	Principle Payment		\$978,943.13	
	9/7/2019	Interest Payment			
	9/30/2019	Principle Payment		\$1,021,056.87	

District's Investments					
	Amount	Percentage	From	To	Interest
*CD at Allegiance Bank C.D. #9503	\$2,733,749.99	1.50%	7/1/2019	7/31/2019	\$33,749.99
CD at Prosperity (Qtr.) C.D. #0447	\$106,930.21	0.75%	7/1/2019	7/31/2019	Paid \$454.35 May 2019
Texstar C.D. #1110	\$681,770.00	1.90%	7/1/2019	7/31/2019	\$1,380.10

TO THE BEST OF MY KNOWLEDGE, THESE FIGURES IN THE WSDH TREASURER'S REPORT AND SUPPORTING DOCUMENTS CORRECT AND IN COMPLIANCE WITH THE

Edward Murrell,
President

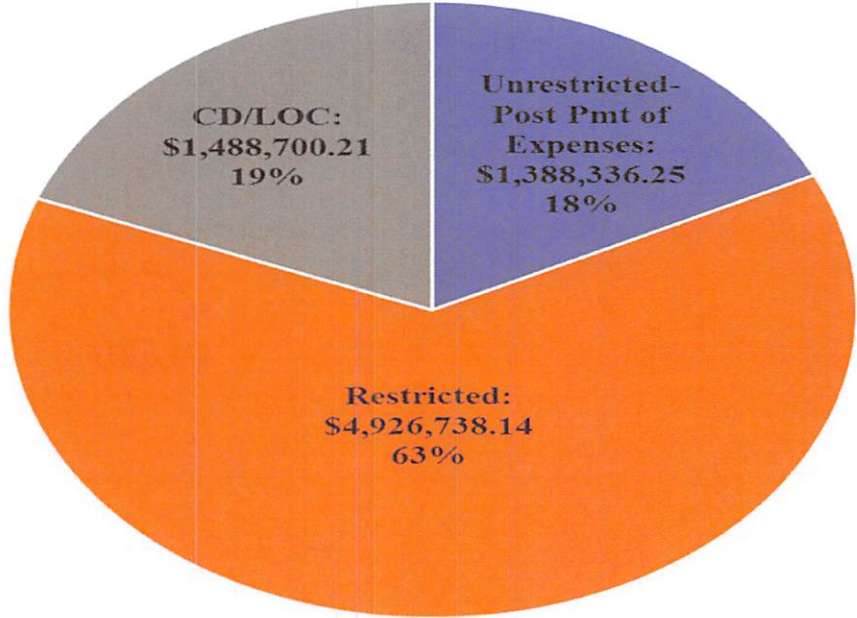
Date

Robert "Bobby" Way
Treasurer/Investment Officer

Date

* Estimated amounts

WSHD-Account Balances
Total Funds \$7,803,774.60
 August 21, 2019



Interbank Account Breakdown
\$5,655,287.98
 August 21, 2019

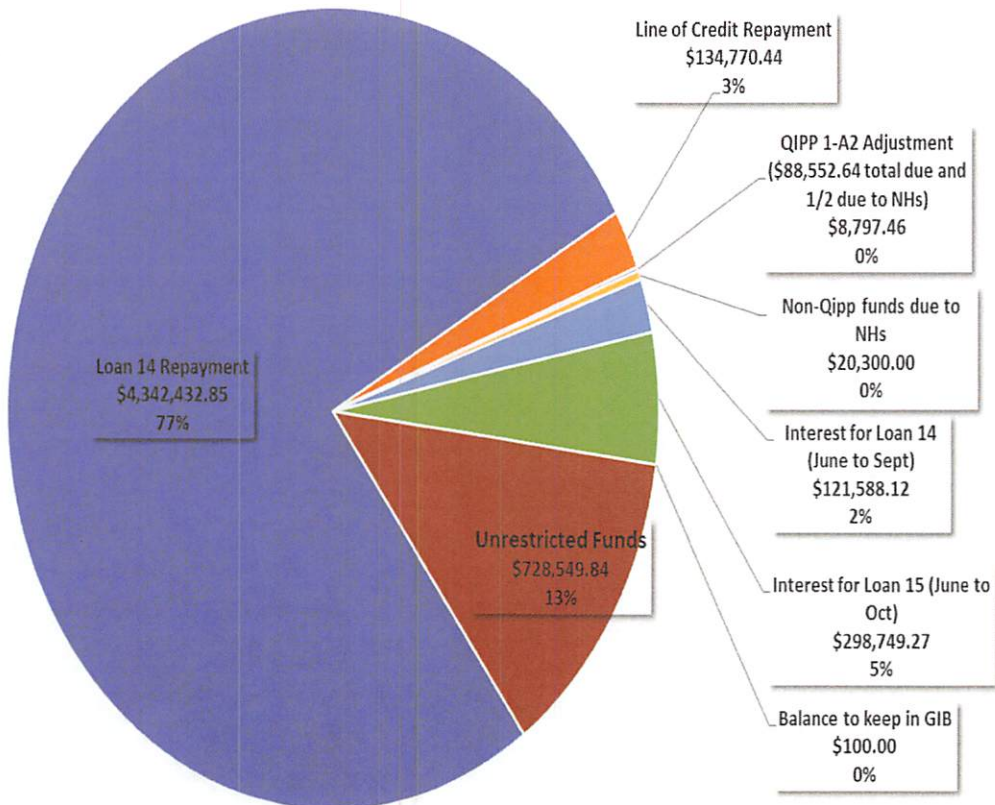


Exhibit “D”

1115 Uncompensated Care Program					
Year	IGT Date	Projected IGT	IGT Amount	Haircut	Uncompensated Care Payment
DY 2					
First Payment	June 17, 2013	\$0.00	\$1,378.92		\$3,388.01
Second Payment	June 4, 2014	\$226,248.00	\$176,813.00	-21.85%	\$434,429.98
Total		\$226,248.00	\$178,191.92		\$437,817.99
DY 3					
First Payment	November 14, 2014	\$71,074.50	\$71,074.50		172.051.56%
Second Payment	June 3, 2015	\$94,961.98	\$83,752.27	-11.80%	\$202,740.91
Total		\$166,036.48	\$154,826.77		\$202,740.91
DY 4					
First Payment	October 5, 2015	\$48,867.10	\$48,867.10		\$116,488.92
Second Payment	February 3, 2016	\$250,541.73	\$211,857.30	-15.44%	\$505,023.37
Total		\$299,408.83	\$260,724.40		\$621,512.29
DY 5					
First Payment	May 4, 2016	\$61,492.71	\$61,492.71		\$143,440.00
Second Payment	August 30, 2016	\$310,431.26	\$239,678.18	-22.79%	\$559,081.36
Total		\$371,923.97	\$301,170.89		\$702,521.36
DY 6					
First Payment	February 2, 2017	\$91,335.09	\$91,335.09		\$208,432.42
*Second Payment	September 7, 2017	\$310,431.26	\$404,191.89	30.20%	\$922,391.37
**Total		\$401,766.35	\$495,526.98		\$1,130,823.79
DY 7					
First Payment	February 1, 2018	\$138,515.86	\$138,516.86		\$321,233.45
Second Payment	September 1, 2018	\$321,234.00	\$289,788.02	-9.79%	\$672,051.72
Third Payment	December 1, 2018	\$841,338.00	\$576,676.13	-31.46%	\$1,337,375.08
		\$1,301,087.86	\$1,004,981.01		\$2,330,660.25
DY8					
First Payment	February 1, 2019	\$321,233.45	\$162,920.28	-49.28%	\$389,668.21
Second Payment	September 1, 2019	\$1,519,957.40			\$2,696,789.89
Total		\$1,841,190.85	\$162,920.28		\$3,086,458.10
Totals Through DY8			\$2,558,342.25		\$8,512,534.69

Exhibit “E”

Riceland Hospital 2016 & 2017 Cost Report Comparison for Uncompensated Care Categories

	2016		2017		Change (↑↓)
	Subtotal	Total	Subtotal	Total	
Inpatient Routine Services Cost Centers					
Adult & Pediatrics	\$1,777,104.00	\$1,777,104.00	\$2,042,760.00	\$2,042,760.00	14.95%
Ancillary Service Cost Centers					
Radiology-Diagnostic	\$401,240.00	\$401,240.00	\$417,025.00	\$417,025.00	3.93%
CT Scan	\$0.00	\$0.00	\$0.00	\$0.00	
Laboratory	\$1,082,043.00	\$1,082,043.00	\$1,216,207.00	\$1,216,207.00	12.40%
Blood Storing, Processing & Trans.	\$0.00	\$0.00	\$0.00	\$0.00	
Respiratory Therapy	\$34,927.00	\$34,927.00	\$26,420.00	\$26,420.00	-24.36%
Physical Therapy	\$235,150.00	\$235,150.00	\$249,548.00	\$249,548.00	6.12%
Electrocardiology	\$30,116.00	\$30,116.00	\$21,990.00	\$21,990.00	-26.98%
Medical Supplies Charged to Patient	\$144,734.00	\$144,734.00	\$167,683.00	\$167,683.00	15.86%
Drugs Charged to Patient	\$197,262.00	\$197,262.00	\$227,660.00	\$227,660.00	15.41%
Treatment Room	\$0.00	\$0.00	\$5,401.00	\$5,401.00	5401.00%
Behavioral Health	\$1,709,338.00	\$1,709,338.00	\$2,008,593.00	\$2,008,593.00	17.51%
Outpatient Service Cost Centers					
Rural Health Clinic	\$2,932,492.00	\$2,932,492.00	\$3,734,392.00	\$3,734,392.00	27.35%
Emergency	\$1,902,336.00	\$1,902,336.00	\$2,011,601.00	\$2,011,601.00	5.74%
Observation Beds	\$0.00	\$0.00	\$0.00	\$0.00	
Reimbursable Cost Centers					
Ambulance Services	\$9,915.00	\$9,915.00	\$13,993.00	\$13,993.00	41.13%
Special Purpose Cost Centers					
Interest Expenses	\$0.00	\$0.00	\$0.00	\$0.00	
Subtotals	\$10,456,657.00	\$10,456,657.00	\$12,143,273.00	\$12,143,273.00	16.13%

CR 2016

Health Financial Systems

RICELAND MEDICAL CENTER

In Lieu of Form CG-2552-10

COST ALLOCATION - GENERAL SERVICE COSTS

Provider CCN: 45-1328

Period:
From: 01/01/2016
To: 12/31/2016

Date/Time Prepared:
5/3/2017 3:01 pm

Cost Center Description	Subtotal	Intern & Residents Cost & Post-Stepdown Adjustments	Total	
	24.00	25.00	29.00	
GENERAL SERVICE COST CENTERS				
1.00 00100 CAP REL COSTS-BLDG & FIXT				1.00
2.00 00200 CAP REL COSTS-MVBLE EQUIP				2.00
4.00 00400 EMPLOYEE BENEFITS DEPARTMENT				4.00
5.00 00500 ADMINISTRATIVE & GENERAL				5.00
6.00 00600 MAINTENANCE & REPAIRS				6.00
7.00 00700 OPERATION OF PLANT				7.00
8.00 00800 LAUNDRY & LINEN SERVICE				8.00
9.00 00900 HOUSEKEEPING				9.00
10.00 01000 DIETARY				10.00
11.00 01100 CAFETERIA				11.00
13.00 01300 NURSING ADMINISTRATION				13.00
16.00 01600 MEDICAL RECORDS & LIBRARY				16.00
17.00 01700 SOCIAL SERVICE				17.00
INPATIENT ROUTINE SERVICE COST CENTERS				
30.00 03000 ADULTS & PEDIATRICS	1,777,104	0	1,777,104	30.00
ANCILLARY SERVICE COST CENTERS				
54.00 05400 RADIOLOGY-DIAGNOSTIC	401,240	0	401,240	54.00
57.00 05700 CT SCAN	0	0	0	57.00
60.00 06000 LABORATORY	1,082,043	0	1,082,043	60.00
63.00 06300 BLOOD STORING, PROCESSING, & TRANS.	0	0	0	63.00
65.00 06500 RESPIRATORY THERAPY	34,927	0	34,927	65.00
66.00 06600 PHYSICAL THERAPY	235,150	0	235,150	66.00
69.00 06900 ELECTROCARDIOLOGY	30,116	0	30,116	69.00
71.00 07100 MEDICAL SUPPLIES CHARGED TO PATIENT	144,734	0	144,734	71.00
73.00 07300 DRUGS CHARGED TO PATIENTS	197,262	0	197,262	73.00
76.00 03020 TREATMENT ROOM	0	0	0	76.00
76.01 03030 BEHAVIORAL HEALTH	1,709,338	0	1,709,338	76.01
OUTPATIENT SERVICE COST CENTERS				
88.00 08800 RURAL HEALTH CLINIC	2,932,492	0	2,932,492	88.00
91.00 09100 EMERGENCY	1,902,336	0	1,902,336	91.00
92.00 09200 OBSERVATION BEDS (NON-DISTINCT PART		0		92.00
OTHER REIMBURSABLE COST CENTERS				
95.00 09500 AMBULANCE SERVICES	9,915	0	9,915	95.00
SPECIAL PURPOSE COST CENTERS				
113.00 11300 INTEREST EXPENSE				113.00
118.00 SUBTOTALS (SUM OF LINES 1-117)	10,456,657	0	10,456,657	118.00

DURBIN & COMPANY, L. L. P.

Certified Public Accountants

2930 50th Street
Lubbock, Texas 79413
(806) 791-1591
Fax (806) 791-3974

May 9, 2017

**Board of Directors
Riceland Medical Center
Winnie, Texas**

The accompanying Unaudited Hospital Cost Report, Form CMS 2552-10 for Riceland Medical Center, Contract Number 45-1328, for the year ended December 31, 2016, has been compiled by us.

A compilation is limited to presenting information that is the representation of management. We have not audited or reviewed the accompanying Unaudited Hospital Cost Report and, accordingly, do not express an opinion or any other form of assurance on it.



Durbin & Company, L.L.P.

CK 2011

Health Financial Systems

RICELAND MEDICAL CENTER

In Lieu of Form CMS-2552-10

COST ALLOCATION - GENERAL SERVICE COSTS

Provider CCN: 45-1328

Period:
From 01/01/2017
To 12/31/2017

Worksheet B
Part I
Date/Time Prepared:
5/25/2018 11:42 am

Cost Center Description		Subtotal	Intern & Residents Cost & Post Stepdown Adjustments	Total	
		24.00	25.00	26.00	
GENERAL SERVICE COST CENTERS					
1.00	00100	CAP REL COSTS-BLDG & FIXT			1.00
2.00	00200	CAP REL COSTS-MVBLE EQUIP			2.00
4.00	00400	EMPLOYEE BENEFITS DEPARTMENT			4.00
5.00	00500	ADMINISTRATIVE & GENERAL			5.00
6.00	00600	MAINTENANCE & REPAIRS			6.00
7.00	00700	OPERATION OF PLANT			7.00
8.00	00800	LAUNDRY & LINEN SERVICE			8.00
9.00	00900	HOUSEKEEPING			9.00
10.00	01000	DIETARY			10.00
11.00	01100	CAFETERIA			11.00
13.00	01300	NURSING ADMINISTRATION			13.00
16.00	01600	MEDICAL RECORDS & LIBRARY			16.00
17.00	01700	SOCIAL SERVICE			17.00
INPATIENT ROUTINE SERVICE COST CENTERS					
30.00	03000	ADULTS & PEDIATRICS	2,042,760	0	2,042,760
ANCILLARY SERVICE COST CENTERS					
54.00	05400	RADIOLOGY-DIAGNOSTIC	417,025	0	417,025
57.00	05700	CT SCAN	0	0	0
60.00	06000	LABORATORY	1,216,207	0	1,216,207
63.00	06300	BLOOD STORING, PROCESSING, & TRANS.	0	0	0
65.00	06500	RESPIRATORY THERAPY	26,420	0	26,420
66.00	06600	PHYSICAL THERAPY	249,548	0	249,548
69.00	06900	ELECTROCARDIOLOGY	21,990	0	21,990
71.00	07100	MEDICAL SUPPLIES CHARGED TO PATIENT	167,683	0	167,683
73.00	07300	DRUGS CHARGED TO PATIENTS	227,660	0	227,660
76.00	03020	TREATMENT ROOM	5,401	0	5,401
76.01	03030	BEHAVIORAL HEALTH	2,008,593	0	2,008,593
OUTPATIENT SERVICE COST CENTERS					
88.00	08800	RURAL HEALTH CLINIC	3,734,392	0	3,734,392
91.00	09100	EMERGENCY	2,011,601	0	2,011,601
92.00	09200	OBSERVATION BEDS (NON-DISTINCT PART		0	
OTHER REIMBURSABLE COST CENTERS					
95.00	09500	AMBULANCE SERVICES	13,993	0	13,993
SPECIAL PURPOSE COST CENTERS					
113.00	11300	INTEREST EXPENSE			113.00
118.00		SUBTOTALS (SUM OF LINES 1 through 117)	12,143,273	0	12,143,273

Exhibit “F”

Hubert Oxford IV

From: Karen Horn <khorn@ricelandhealthcare.com>
Sent: Tuesday, August 20, 2019 4:26 PM
To: Hubert Oxford IV; mo@starcoimpex.com
Subject: Re: August/September IGT

The way I interpret it is as follows:

1. If the original IGT commitment is greater than the final IGT due (post haircut) then the UC payment would not be effected. For example, if we pledge \$1.2M as the original IGT commitment and the final IGT commitment comes in at \$1.1M, then there would be no reduction in our UC payment.
2. If we pledge \$1.2M as the original IGT commitment and the final IGT commitment (post haircut) comes in at \$1.3M, then our UC payment would be effected. By how much, I don't know, but according to Mance's statement probably by much.

Hope this helps. I've got to run to a meeting and will be off the grid the rest of the day. If you need anything else, I'll be back at it first thing tomorrow.

Karen Horn
Financial Analyst
Riceland Medical Center
(formerly Winnie Community Hospital)
225-267-6966 Office
225-715-9840 Cell

From: Hubert Oxford IV <hoxfordiv@benoxford.com>
Sent: Tuesday, August 20, 2019 3:04:24 PM
To: Karen Horn <khorn@ricelandhealthcare.com>; mo@starcoimpex.com <mo@starcoimpex.com>
Subject: RE: August/September IGT

What does that mean in a nutshell?

Hubert Oxford, IV
Benckenstein & Oxford, L.L.P.
3535 Calder Avenue, Suite 300
Beaumont, Texas 77706
(409) 951-4721 Direct
(409) 351-0000 Cell
(409) 833-8819 Fax

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From: Karen Horn <khorn@ricelandhealthcare.com>
Sent: Tuesday, August 20, 2019 2:59 PM
To: Hubert Oxford IV <hoxfordiv@benoxford.com>; mo@starcoimpex.com
Subject: Re: August/September IGT

Here is the question I asked:

If they reduce their IGT payment from the maximum of \$1,519,957.40 to \$1,200,000 what would that make the UC payment? I realize any number you give me would most likely be before the haircut. Is there a way for you to estimate after the haircut as well?

Here is the response I received:

It is likely that change would not affect your bottom line, and if it does, not by much. The final IGT amount post-haircut then it will not affect the payment. Hope this helps.

Mance Fine

Manager, Hospital Supplemental Payments
Hospital Rate Analysis, State of Texas HHSC
Cell: 512-461-3512
Office Phone: 512-462-6386
Mance.Fine@hhsc.state.tx.us

If you would like me to follow up with Mance, please let me know.

Karen Horn
Financial Analyst
Riceland Medical Center
(formerly Winnie Community Hospital)
225-267-6966 Office
225-715-9840 Cell

From: Karen Horn <khorn@ricelandhealthcare.com>
Sent: Tuesday, August 20, 2019 2:50:27 PM
To: Hubert Oxford IV <hoxfordiv@benoxford.com>; mo@starcoimpex.com <mo@starcoimpex.com>
Subject: Re: August/September IGT

I asked them to estimate both before and after haircut. We'll see what they come back with.

Karen Horn
Financial Analyst
Riceland Medical Center
(formerly Winnie Community Hospital)
225-267-6966 Office
225-715-9840 Cell

From: Hubert Oxford IV <hoxfordiv@benoxford.com>
Sent: Tuesday, August 20, 2019 2:48:17 PM
To: Karen Horn <khorn@ricelandhealthcare.com>; mo@starcoimpex.com <mo@starcoimpex.com>
Subject: RE: August/September IGT

And after the haircut. Meaning, if they commit to \$1,200,000.00 and the post haircut number is \$1,200,000.00, will the post haircut number be reduced?

Hubert Oxford, IV
Benckenstein & Oxford, L.L.P.
3535 Calder Avenue, Suite 300
Beaumont, Texas 77706
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From: Karen Horn <khorn@ricelandhealthcare.com>
Sent: Tuesday, August 20, 2019 2:46 PM
To: Hubert Oxford IV <hoxfordiv@benoxford.com>; mo@starcoimpex.com
Subject: Re: August/September IGT

And that is also the number I came up with roughly back in the spring. But, let me reach out to HHSC first and give them an IGT of \$1.2M and see if they can tell us what that would do to our UC payment before the haircut.

Karen Horn
Financial Analyst
Riceland Medical Center
(formerly Winnie Community Hospital)
225-267-6966 Office
225-715-9840 Cell

From: Hubert Oxford IV <hoxfordiv@benoxford.com>
Sent: Tuesday, August 20, 2019 2:44:46 PM
To: Karen Horn <khorn@ricelandhealthcare.com>; mo@starcoimpex.com <mo@starcoimpex.com>
Subject: FW: August/September IGT

Karen,

See below. We are not crazy. We keep coming up with roughly the same numbers. It seems to me that a save amount to approve is \$1,200,000.00, if they are willing to do that.

Hubert Oxford, IV
Benckenstein & Oxford, L.L.P.
3535 Calder Avenue, Suite 300
Beaumont, Texas 77706
(409) 951-4721 Direct
(409) 351-0000 Cell
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From: Karen Horn <khorn@ricelandhealthcare.com>
Sent: Thursday, May 16, 2019 11:40 AM
To: Julie Haire <jhaire@ricelandhealthcare.com>; mo@starcoimpex.com; Saad Javed <saad.javed@ricelandhealthcare.com>; Hubert Oxford IV <hoxfordiv@benoxford.com>; Tammy Sachitano <tsachitano@portnerbond.com>; Tammy Sachitano <cportner@portnerbond.com>
Subject: Re: August/September IGT

I wish I had an easy answer on how much the IGT will be in the fall, but honestly, it's anyone's guess. There are too many what if's to make an accurate estimate.

Will HHSC go back to the old computations that take the "Urban Rural" hospitals out of the rural hospital mix? This would greatly reduce our UC amount for DY8. Please remember that the overall pool determines the payout, and these large urban rurals have very large numbers. If they have big swings in UC costs, it will effect our UC compensation. We have no way to predict this.

Additionally, with the switch for uncompensated care being based off Medicare's S-10 worksheet rather than the previous calculations, this too would greatly reduce our UC payment.

I did a couple of scenarios on the attached worksheet.

Scenario 1 is based on the HSL (Hospital Specific Limit) from HHSC's February advance payment IGT worksheet. Please note that the HSL UC cost listed on their worksheet is the same as that used for DY7. They did not update this amount to the amounts submitted on the DY8 applications when they did the advance payment calculation. I then applied the historical percentages of IGT funding vs. UC payment received to this HSL number and estimated an August/September IGT amount of \$883,325.40 and a UC payment of \$1,972,760.06. I think this is the mid-range to expect for IGT.

Year	IGT Date	HSL From UC Tool	Initial IGT Estimate	Final IGT	IGT % of HSL	UC %
DY 8 (FFY 10/1/18-9/30/2019)		SCENARIO 1-STAYS THE SAME AS D7 WITH THE URBAN I				
First Payment	February 1, 2019			\$162,920.00	6%	1
Second Payment	September 1, 2019	\$ 2,944,418.00		\$883,325.40	30%	6
DY 8 Total-Scenario 1				\$1,046,245.40		

Scenario 2 is based off the same type of calculation, but I substituted the HSL from the actual DY8 application into the formula. I think this would be considered the high end with an IGT of \$1,207,518 and a UC payment of \$2,696,790.

Year	IGT Date	HSL From UC Tool	Initial IGT Estimate	Final IGT	IGT % of HSL	UC %
DY 8 (FFY 10/1/18-9/30/2019)		SCENARIO 2-STAYS THE SAME AS D7 WITH THE URBAN I				
First Payment	February 1, 2019			\$162,920.00	4%	1
Second Payment	September 1, 2019	\$ 4,025,060.00		\$1,207,518.00	30%	1
DY 8 Total-Scenario 1				\$1,370,438.00		

I attempted to adjust the HSL down to the uncompensated care reported on the S-10, but kept coming up with a negative number, so until we get the final determination from HHSC and some payment history, I can't really come up with an amount that incorporates the S-10 numbers at this time. I would guess that number to be significantly lower though, somewhere in the DY5-DY6 range (see the worksheet).

So Hubert, if you are planning budgets, I would suggest at least \$1.2 million as a fall IGT amount, but know that this is not a hard number. Just my best guess based on historical data and the application we submitted. The actual number could be a little higher or significantly lower.

Karen Horn
 Financial Analyst
 Riceland Medical Center
 (formerly Winnie Community Hospital)
 225-267-6966 Office
 225-715-9840 Cell

From: Julie Haire
 Sent: Thursday, May 16, 2019 9:07:22 AM
 To: Karen Horn
 Subject: Fw: August/September IGT

Can you estimate?

Julie Haire
 Accounting Manager
 Riceland Medical Center

(formerly Winnie Community Hospital)
538 Broadway
Winnie, TX 77665
Mobile- (254) 855-4267

From: Chris Portner <cportner@portnerbond.com>
Sent: Wednesday, May 15, 2019 7:16 PM
To: mo@starcoimpex.com; Saad Javed
Cc: Julie Haire; tsachitano@portnerbond.com
Subject: August/September IGT

Hubert asked us to estimate what we think the IGT will be

Sent from my iPhone



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Hubert Oxford IV

Subject: FW: Agenda for Regular Meeting and Possible Special Meeting

From: Karen Horn <khorn@ricelandhealthcare.com>

Sent: Tuesday, August 20, 2019 8:20 AM

To: Hubert Oxford IV <hoxfordiv@benoxford.com>

Cc: mo@starcoimpex.com

Subject: Re: Agenda for Regular Meeting and Possible Special Meeting

Historically, HHSC has used uninsured and charity care as its basis for the non-Medicaid portion of the 1115 / Uncompensated Care program. The uninsured calculation was a product of self pay bad debt and Winnie Stowell Hospital District accounts. The hospital has always filed charity care as \$0 in the past, because by definition, charity care can only be claimed if there is a formal charity care policy in place and the hospital did not have a policy.

Starting with Uncompensated Care payments in 2020, HHSC has updated the basis to only include charity care, which is rumored to significantly reduce UC payments going forward. The hospital has proactively put a charity care policy in place that uses presumptive testing by a third party vendor to test uninsured accounts for qualification under the formal charity care policy. Based on the S-10 Worksheet filed with our 2018 Medicare Cost Report, we estimate the charity care portion to be \$1.4 million, roughly half of what was claimed as uninsured on the DY8 UC application.

Please remember that this is an estimate. We won't know for sure how things fall until we see the DY9 application.

Hope this helps.

Karen Horn

Financial Analyst

Riceland Medical Center

(formerly Winnie Community Hospital)

225-267-6966 Office

225-715-9840 Cell

From: Hubert Oxford IV <hoxfordiv@benoxford.com>
Sent: Monday, August 19, 2019 6:50:02 PM
To: Karen Horn <khorn@ricelandhealthcare.com>
Cc: mo@starcoimpex.com <mo@starcoimpex.com>
Subject: Re: Agenda for Regular Meeting and Possible Special Meeting

Would you mind putting your explanation to me in an email. I am fairly certain the Board will want to know how the Charity Care calculation goes from a \$0 to \$1.2 million. What you told me on the phone made sense.

Hubert Oxford, IV
Cell: 409-351-0000

On Aug 19, 2019, at 4:30 PM, Karen Horn <khorn@ricelandhealthcare.com> wrote:

Hubert,

This might be a mute point by now, but I just got the OK to send to you. See email below regarding bad debt vs. charity care. Let me know if you have any questions. I'm in a meeting for the rest of the day, but will be available tomorrow.

Karen Horn

Financial Analyst

Riceland Medical Center

(formerly Winnie Community Hospital)

225-267-6966 Office

225-715-9840 Cell

From: Karen Horn <khorn@ricelandhealthcare.com>
Sent: Friday, August 16, 2019 2:10 PM
To: mo@starcoimpex.com <mo@starcoimpex.com>
Subject: Re: Agenda for Regular Meeting and Possible Special Meeting

Can I send the below to Hubert?

Hubert,

I did a comparison between uninsured reported on prior UC applications vs. the charity care that was reported on the 2018 cost report. (See below). If the DY9 application only looks at those that qualify under our charity care policy the uninsured will be cut roughly in half. However, please note that is only one piece of the UC puzzle, which also includes Medicaid utilization. So while I believe it is safe to say that we will likely see a significant decrease in DY9 payments, it is too early to say what that reduction will be.

1		DY9	DY8	DY7	DY6	DY5	DY4
2	DEMONSTRATON YR	2018	2017	2016	2015	2014	2013
3	COST REPORT YR FOR APPLICATION						
0	BAD DEBT (UNINSURED PER UC APPLICATION)		2,229,493	1,134,713	1,480,748	1,298,849	1,445,193
1	CHARITY CARE (PER COST RPT)	1,426,721					
2		1,426,721	2,229,493	1,134,713	1,480,748	1,298,849	1,445,193
3							

Karen Horn

Financial Analyst

Riceland Medical Center

(formerly Winnie Community Hospital)

225-267-6966 Office

225-715-9840 Cell

From: Hubert Oxford IV <hoxfordiv@benoxford.com>

Sent: Friday, August 16, 2019 11:45:25 AM

To: Tammy Sachitano <cportner@portnerbond.com>; mo@starcoimpex.com <mo@starcoimpex.com>;

Karen Horn <khorn@ricelandhealthcare.com>; Saad Javed <saad.javed@ricelandhealthcare.com>

Subject: RE: Agenda for Regular Meeting and Possible Special Meeting

Also, something that will be helpful is if you have any information on the Charity Care amounts for 2018 Cost Report after the numbers have been revised post Discovery's review of the cost report. The reason being, the District will need to revise the budget for next year but most importantly, if the number is going to be far less, this will impact cash flow in the

positive. Therefore, while this IGT may be a big hit to cash availability, I would expect that if the Board knows next year, the amount they will be asked to IGT is going to be a lot smaller, it may soften the blow for this IGT.

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From: Hubert Oxford IV
Sent: Friday, August 16, 2019 11:08 AM
To: 'cportner@portnerbond.com' <cportner@portnerbond.com>; 'mo@starcoimpex.com' <mo@starcoimpex.com>; Karen Horn (khorn@ricelandhealthcare.com) <khorn@ricelandhealthcare.com>; 'Saad Javed' <saad.javed@ricelandhealthcare.com>
Cc: 'sherrie@wshd-tx.com' <sherrie@wshd-tx.com>; 'murrelledward@yahoo.com' <murrelledward@yahoo.com>
Subject: FW: Agenda for Regular Meeting and Possible Special Meeting

All,

Please see attached and below. This is the District's plan of action for the upcoming IGT. From your perspective, please be prepared Wednesday night to make presentation on any outstanding issues with the understanding that it may be tabled until Thursday morning.

How does this sound?

Sincerely,

Hubert Oxford, IV
Benckenstein & Oxford, L.L.P.
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From: Hubert Oxford IV

Sent: Friday, August 16, 2019 11:01 AM

To: 'murrelledward@yahoo.com' <murrelledward@yahoo.com>; 'rolloier@yahoo.com' <rolloier@yahoo.com>; 'Bobby Way' <bobw1212@aol.com>; 'espinosa307@yahoo.com' <espinosa307@yahoo.com>; 'sherrie@wshd-tx.com' <sherrie@wshd-tx.com>; 'anthony@stramecki.com' <anthony@stramecki.com>; David Sticker (davidbsticker@gmail.com) <davidbsticker@gmail.com>

Subject: Agenda for Regular Meeting and Possible Special Meeting

All,

Attached, please find a draft agenda for the Regular Meeting on Wednesday, August, 21, 2019. Included in this agenda, is an agenda item for the IGT Commitment Form that is due the next day, August 22, 2019. As of now, Bobby is unsure he cannot be at the meeting on August 21, 2019 because he may be coming in from out of town for work later that evening. Therefore, in the event that Bobby cannot make it on August 21, 2019, I have prepared an agenda to post for a Special Meeting on August 22, 2019 at 9:00 a.m. to make sure everyone was there when you discuss this IGT. If Bobby can be there on the 21st, then we will cancel the meeting on the 22nd but we wanted to file it out of an abundance of caution. I believe it is essential that Bobby be there when this is discussed because the payments to the Hospital are of special interest to him. Plus, he has been very effective in holding them to their commitments.

In addition, I am re-submitted the e-mail below that was prepared following the July 2019 meeting. The purpose of the e-mail to verify uncompensated care numbers presented by the Hospital during the last meeting in the attached two page report. (*See* attached).

Furthermore, below is a chart that illustrates a running tab on the IGTs made and Uncompensated Care Payments received for each DY year. In this chart, we added a column to show you the initial IGT Commitment we were asked to pay in the final payment for each DY year compared to the reduced amount of the actual IGT actually made. For example, when you made the last IGT for DY7, we were initially told the amount of the IGT was going to be \$841,338.00 but the final amount paid for the IGT was reduced substantially to \$576,676.13. We make this point because we have been forecasting an IGT of \$1,000,000.00 and despite the maximum amount you are being asked to make of \$1,519,957.40, I still believe our forecasted amount is going to be correct.

Please recall, the forecast were made by comparing the Cost Report numbers for 2016 and comparing them to the 2017 cost report. In DY 7, the IGT amounts are based on the 2016 cost report while the DY 8 numbers are based on the 2017 cost report. The relevant pages for these cost reports and our analysis is attached. (*See* 2016 & 2017 Cost Reports and Comparison).

1115 Uncompensated Care Program

Year	IGT Date	Maximum IGT (IGT Commitment)	Actual IGT
DY 2			
First Payment	June 17, 2013	\$0.00	\$1,378.92
Second Payment	June 4, 2014	\$226,248.00	\$176,813.00
Total		\$226,248.00	\$178,191.92
DY 3			
First Payment	November 14, 2014	\$71,074.50	\$71,074.50
Second Payment	June 3, 2015	\$94,961.98	\$83,752.27
Total		\$166,036.48	\$154,826.77
DY 4			
First Payment	October 5, 2015	\$48,867.10	\$48,867.10
Second Payment	February 3, 2016	\$250,541.73	\$211,857.30
Total		\$299,408.83	\$260,724.40
DY 5			
First Payment	May 4, 2016	\$61,492.71	\$61,492.71
Second Payment	August 30, 2016	\$310,431.26	\$239,678.18
Total		\$371,923.97	\$301,170.89
DY 6			
First Payment	February 2, 2017	\$91,335.09	\$91,335.09
*Second Payment	September 7, 2017	\$310,431.26	\$404,191.89
Total		\$401,766.35	\$495,526.98
DY 7			
First Payment	February 1, 2018	\$138,515.86	\$138,516.86
Second Payment	September 1, 2018	\$321,234.00	\$289,788.02
Third Payment	December 1, 2018	\$841,338.00	\$576,676.13
Total		\$1,301,087.86	\$1,004,981.01
DY8			
*First Payment	February 1, 2019	\$138,515.86	\$162,920.28
Second Payment	August 22, 2019	\$1,519,957.40	
Total			\$162,920.28

* The request for IGT for DY 8 (2) is subject to change as the IGT and the Uncompensated Care are the maxim

I hope this helps and if anyone has any questions, please feel free to contact me.

Sincerely,
Hubert Oxford, IV
Benckenstein & Oxford, L.L.P.

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 Beaumont, Texas 77706
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From: Hubert Oxford IV
Sent: Thursday, July 18, 2019 1:44 PM
To: 'mo@starcoimpex.com' <mo@starcoimpex.com>; 'Saad Javed' <saad.javed@ricelandhealthcare.com>; 'cportner@portnerbond.com' <cportner@portnerbond.com>; 'bobw1212@aol.com' <bobw1212@aol.com>; 'murrelledward@yahoo.com' <murrelledward@yahoo.com>; 'anthony@stramecki.com' <anthony@stramecki.com>
Subject: DY7 and DY 8 Uncompensated Care Payments

All,

See the attached spreadsheets received by the State of Texas for the final three (3) DY 7 Uncompensated Care payment amounts. Also attached is a spreadsheet we have been keeping to record the amounts of the IGTs and the Uncompensated Care payments.

At last night's meeting, Mo gave the District the attached Report to illustrate the funds received from the December 2018 Uncompensated Care payment (i.e., \$1,337,375.08) and an explanation of how the Hospital spent the funds. When he presented this document, myself and a couple of the other Board members were confused because we thought the amount paid for this IGT was closer to \$2,300,000.00. As it turns out, Mo's number was correct for the December 2018 IGT but the \$2,300,000.00 was correct for the total annual Uncompensated Care payments received.

1115 Uncompensated Care Program			
Year	IGT Date	IGT Amount	Uncompensated Care
DY 2			
First Payment	June 17, 2013	\$1,378.92	\$3,388.01
Second Payment	June 4, 2014	\$176,813.00	\$434,429.98
Total		\$178,191.92	\$437,817.99
DY 3			
First Payment	November 14, 2014	\$71,074.50	\$172,051.56
Second Payment	June 3, 2015	\$83,752.27	\$202,740.91
Total		\$154,826.77	\$374,792.47

DY 4				
First Payment	October 5, 2015	\$48,867.10		\$116,488.92
Second Payment	February 3, 2016	\$211,857.30		\$505,023.37
Total		\$260,724.40		\$621,512.29
DY 5				
First Payment	May 4, 2016	\$61,492.71		\$143,440.00
Second Payment	August 30, 2016	\$239,678.18		\$559,081.36
Total		\$301,170.89		\$702,521.36
DY 6				
First Payment	February 2, 2017	\$91,335.09		\$208,432.42
*Second Payment	September 7, 2017	\$404,191.89		\$922,391.37
**Total		\$495,526.98		\$1,130,823.7
DY 7				
First Payment	February 1, 2018	\$138,516.86		\$321,233.45
Second Payment	September 1, 2018	\$289,788.02		\$672,051.72
Third Payment	December 1, 2018	\$576,676.13		\$1,337,375.0
		\$1,004,981.01		\$2,330,660.2
DY8				
*First Payment	February 1, 2019	\$162,920.28		\$389,668.21
Second Payment	September 1, 2019	\$0.00		\$0.00
Total		\$162,920.28		\$389,668.21
Totals Through DY8		\$2,558,342.25		\$5,987,796.3

After reviewing e-mails and spreadsheets, the reason the payment was so much less than we recalled is because we were informed by the State of Texas that the original IGT amount, before the haircut, was of \$841,338.00 but it dropped to \$576,676.13. If the IGT would have remained at \$841,338.00, the Uncompensated Care payment would have been \$1,935,077.40.

Looking forward to September, 2019, I estimate that the final IGT amount that the District could pay would be \$1,000,000.00. If that is the case, the return on this IGT in Uncompensated Care Payment would be \$2,300,000.00 using the standard multiplier of 2.3%. I based the calculations on a comparison of the cost reports for 2016 and 2017. If this is correct, for the year (i.e., DY 8), the Hospital will have received roughly \$2,700,000.00 in Uncompensated Care payments.

Hopefully, this answers your questions, but if there is any questions, please feel free to contact me.

Sincerely,
 Hubert Oxford, IV
 Benckenstein & Oxford, L.L.P.
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ALLOCATION OF FUTURE IGT FUNDS

PROJECT/EQUIPMENT	AMOUNT	COMMENTS
Glidascope for Intubation (King Vision product preferred)– Carried by McKesson	\$ 5,000.00	Needed for ED–Will need regular disposable replacements!! Easier visualization for intubation. Currently using old style, metal manual intubation blades.
CPAP/Bipap Machine (Go-Pap with Bountree)	\$ 4,000.00	Needed for ED & Acute Floor. Will need regular disposable replacements –Used for respiratory stabilization BEFORE intubation required. Currently do not have in our ER–EMS used a CPAP style mask capable of stabilization that we could utilize as well to allow us to keep some patients here if stable enough and did not need intubation.
NIO Injectors (Adult & Pediatric)–Individual Disposable Kits	\$ 1,000.00	Pneumatic shot osseous needle systems for emergency bone "IV" access–MUST ORDER INDIVIDUAL DISPOSABLE KITS–WILL NEED REGULAR DISPOSABLE REPLACEMENTS
Capnography Measuring system	\$ 3,000.00	Needed for ED–Helps determine status of respiratory patients. Could potentially keep some patients here if stable enough and did not need intubation.
Bedside ISTAT Machine–ARTERIAL BLOOD GAS CASSETTE	\$ 11,000.00	Needed for ED–Helps determine status of respiratory patients. Could potentially keep some patients here if stable enough and did not need intubation.
Bedside ISTAT Machine–HEMAGLOBIN/HEMATOCRIT	\$ 15,000.00	Needed for ED–Helps determine status of HEMATOLOGY BASICS. Would serve as back up process when Sysmick Hematology machine not functioning well or for patients that are difficult stick waiting on Vascular Access Team.
Bedside ISTAT Machine–BASIC CHEMISTRY CASSETTE	\$ 15,000.00	Needed for ED–Helps determine status of BASIC CHEMISTRY. Would serve as back up process when Integra Roche machine not functioning well or for patients that are difficult stick waiting on Vascular Access Team.
Updated suction equipment–Constant & Intermittent	\$ 10,000.00	Current suction machines are minimum standards and power, need better portable suction power and availability for both ED and Acute Floor Emergencies and Inpatients
Blanket warmer	\$ 2,000.00	Needed for ER and Acute Floor, currently nothing available for rapid warming of patients or infants
IV warmer	\$ 1,500.00	Needed for ER and Acute Floor, currently nothing available for rapid warming of IV fluids for patients
Updated Patient Lift Scale	\$ 6,000.00	Based on previous purchase > 5 years (2014)–needed for safe patient lift handling and transfer in ER, Acute & BH and source for weighing of bed bound patients. Currently sharing same machine for ER, Acute Floor and Behavioral Health departments. Need additional machine for safer patient handling in all areas and more rapid access to all departments for concurrent use.
Patient transfer Dolly	\$ 2,000.00	Safe patient handling and safer patient transferring from bed to chair, innovative system would be nice to have.
Uplifting the front of the hospital	\$ 500,000.00	The front part needs remodelled to uplift the morale of the employees and the community as a whole.
ER Physicians Budget for following year	\$ 788,400.00	
Nurse call system	\$ 80,000.00	Current system functional but not able to update or have system repair or upgrades/updates due to age. Current system is obsolete.
Pyxis system	\$ 250,000.00	Currently do not have any type of electronic delivery system for patient medications in place at hospital. This type of system is typical current mainstream practice in most facilities for patient safety, reduction of errors & cost containment of supplies and pharmaceuticals.

TOTAL

\$ 1,693,900.00

Exhibit “G”



**Provider Audit and Reimbursement
532 Riverside Avenue
Jacksonville, FL 32202**

August 5, 2019

Julie Haire
Riceland Medical Center
538 Broadway
Winnie, TX 77665

Regarding: Audit Entrance
Provider Name: Riceland Medical Center
Provider Number: 451328
Fiscal Period: 01/01/2017 - 12/31/2017

Dear Julie Haire:

This is to inform you that your facility has been scheduled for an in-house audit of the Medicare cost report for the fiscal year ending 12/31/2017. The major area being audited is 1. Medicare Bad Debts. 2. Other Issues..

The audit will commence on 08/27/2019, with a telephone entrance conference to be held at 10:00 a.m. (Central Time).. We ask that at the least, the Chief Financial Officer, the person who prepared the cost report and the person designated as your liaison for the audit to be present for the telephone entrance conference. In addition, we are asking that the information listed on the attached schedule be sent to our offices, in electronic format if possible, by 08/20/2019, one week prior to our scheduled entrance conference on 08/27/2019. This list will enable you to accumulate the necessary documentation we will need for the audit prior to the entrance conference.

If you need to reschedule the entrance date, please notify us 2 weeks prior to the scheduled date and we will attempt to accommodate your request. This is necessary as our work plan has been set and we will need time to reschedule the audit staff. Again, all documentation found on the attached list must be sent, in electronic format if possible, one week prior to the telephone conference. This will enable us to review the information and expedite our review process while minimizing the impact on your personnel. Be aware that this list is not all-inclusive and that we may request additional documentation necessary to

532 Riverside Avenue Jacksonville, FL 32202 www.novitas-solutions.com

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conduct and complete our review. If the information is not provided, we will make audit adjustments to disallow the costs associated with the requests.

Any proposed audit adjustments will be sent to you during the course of the audit. You may request the work papers that support the adjustments at any time. A pre-exit telephone conference is tentatively planned to be on 11/12/2019 (within a week of the anticipated completion date of all audit review work). During the telephone conference, we will go over outstanding information requests and all of the adjustments available at that time (other adjustments may result either from a supervisory review of the work or additional information provided for outstanding items). You will have 4 weeks to provide any outstanding information or information to refute any previously proposed audit adjustment. (We do not need to consider any additional documentation that you furnish after the expiration of the 4-week period in the Notice of Amount of Program Reimbursement (NPR)). We will schedule a telephone exit conference within 12 weeks following the pre-exit conference. Prior to the exit conference we will provide you with new or modified audit adjustments that we propose after the pre-exit conference and allow you two (2) weeks to comment on them. If you wish to waive a formal exit conference, please notify us of this decision in writing (e-mail note will be acceptable).

The notice of the Amount of Program Reimbursement will be issued within 60 days from the exit conference or within 60 days from the date that we finalize the audit adjustments if an exit conference is waived.

We believe these time frames and requirements will help expedite the completion of the in-house audit and settlement of your cost report. These provisions will be uniformly applied to all providers. We believe that with your cooperation, we will have better in-house audits and more accurate settlements of cost reports.

If you have any questions, please contact **Jeff Nawrocki** at **414-918-2668** or **Jeffrey.Nawrocki@novitas-solutions.com**.

Sincerely,

----- /s/ -----

Christine Gibson
PARD Manager
Provider Audit & Reimbursement

Exhibit “H”

DISCOVERY

Healthcare Consulting Group

Memo

To: Mo Danishmund, MAcc
Chief Financial Officer
Riceland Healthcare
Via e-mail: mo@starcoimpex.com

From: Brent Fuller
Member *Brent Fuller*

Date: August 19, 2019

RE: In-House Audit – Riceland Medical Center (45-1328, 12/31/2017 FYE)

Riceland Hospital received a notice from Novitas, a Medicare Administrative Contractor (MAC), on August 5, 2019, that the 2017 Cost Report was being audited. A copy of the notice is attached hereto.

The 2017 Cost Report is the first cost report submitted by Riceland Hospital in which Riceland Hospital was notified that the cost report was being reviewed at this level of review. However, Riceland has submitted cost reports that have been through desk audit (a lesser scope of review) and MACs do perform routine audits of all of the filed Medicare cost reports, at various levels of review/scoping, and this audit is certainly a routine part of the cost report submission and settlement process.

Furthermore, audits, such as this one, are designed as a verification tool for certain cost and charges reported in the cost report, but it is also to reconcile, or update, the Medicare charges to the most current Medicare payment data, known as the Medicare payment logs. Much of these audits becomes a reconciliation of timing differences between the Medicare charge data available when the cost report was filed and the more recent paid claims at the time of the audit.

Since Discovery prepared the 2017 Cost Report, Discovery was hired by the Hospital to respond to the audit request. We have reviewed the audit request list as well as the scope of the audit and do not anticipate any problems in submission of the supporting documentation requested as a part of the audit. We have not received any of the proposed adjustments related to the audit at this time, but we also do not anticipate any material adjustments as a result of our prior review of the supporting information or scope of the audit, at this time.

Lastly, we can confirm that the Medicare deductible and coinsurance reported on the cost report does not have any impact on the reported uncompensated care charges for fiscal year (FY) 2017. We can also confirm, based on our preparation of the 2017 Cost Report that the uncompensated care charges for fiscal year 2017 on the Cost Report do not include any deductibles from Medicare; Medicaid, or any other private insurers. That is, any failure to collect deductibles and coinsurance from any specific payor did not impact the uncompensated care supplemental payments eligibility resulting from the Hospital's 2017 Cost Report.

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Please let me know if I can be of further assistance in responding to questions in regard to the audit of the FY 2017 cost report. We will continue in the routine support of the audit.