

**FRANKLIN COUNTY BOARD OF COUNTY COMMISSIONERS
PUBLIC WORKSHOP
COURTHOUSE ANNEX – COMMISSION MEETING ROOM
JUNE 21, 2016
1:30 P.M.
MINUTES**

Commissioners Present: William Massey-Chairman, Joseph Parrish – Vice Chairman, Noah Lockley, Cheryl Sanders, Rick Watson

Others Present: Alan Pierce – Director of Administrative Services, Michael Morón – County Coordinator, Michael Shuler – County Attorney, Marcia M. Johnson-Clerk of Court, Lori P. Hines-Deputy Clerk to the Board.

Mr. Moron said there are two items scheduled for the Workshop this afternoon but Mr. Mark O'Bryant will appear first to discuss Weems Memorial Hospital management and then the Sheriff's Inmate Medical Discussion.

Weems Hospital - TMH Management Proposal Discussion

Mr. Mike Cooper, Weems Memorial Hospital, said several people have contacted him about where they are with the possibilities with Tallahassee Memorial Hospital (TMH). He stated he approached Mr. O'Bryant several months ago about additional possibilities and he has been working on it and is here to talk with the Board. Mr. Mark O'Bryant, TMH, appeared before the Board and said he is here to open a dialogue about their perspective on healthcare in Franklin County. He said when people look at their quality of life one of the components is the quality of health. He reported the proper infrastructure has to be created to allow a high quality of care. Mr. O'Bryant stated the hospital is an asset to the County and the community and the Board plays a big part of making sure it stays a viable asset. He said looking forward there is a lot of options and health care is under stress now, particularly hospitals and critical access hospitals. He explained at the federal level, they always seem to be in the target. He reported in looking at the responsibilities, some items are not options such as the requirement for the County to provide EMS support. He went on to say this could be the only item the County provides from the healthcare perspective but this is a big county and relatively far away from tertiary acute care services. Mr. O'Bryant said it is almost critical to have some level of acute care support in the community. He explained the County could just have EMS support and transport patients out of the county. He said another option is just an emergency room and clinics. Mr. O'Bryant reported clinics usually deal with primary care issues and not secondary emergent issues or urgent issues. He reported the County could have a high level free-standing emergency room and they can be relatively cost effective but require some volume to

move forward. He pointed out if the county took that option, they would lose the critical access status. He explained the County is in a unique position of having a hospital that falls under a federal status called critical access. He reported with that designation comes funding that can be drawn down from the federal government to help support the hospital. Mr. O'Bryant said a standalone free-standing emergency room separate from a critical access will probably have similar costs to a critical access hospital if it is run correctly. He stated the other option is to maintain the relationship with the critical access hospital. Mr. O'Bryant said in looking at critical hospitals across the country, the ones that are successful and are going to survive are supported and sponsored by their community. He pointed out Franklin County elected to engage in a tax referendum that would support healthcare in the community. He said part of it goes toward operation of the hospital and part of it goes to facilities, clinics, etc. He said if the County moves forward with the hospital, the one thing they recognize at TMH is the relationship with health care starts with the physician. He explained the physician leads the clinical process and directs how health care is provided. He reported the health of the community is driven by the physicians leading it and the facility determines what kind of physician you get or if you get physicians. Mr. O'Bryant stated as the County looks forward, the ability to recruit and keep high quality physicians will be tied to the infrastructure. He said the County has invested well in Carrabelle and it is a beautiful facility. He stated when you look at the higher level of acute care and urgent care, then you need a facility that draws physicians in. He reported this is when the investment in the facility adds value. Mr. O'Bryant reported TMH views this community as part of a broader region that has options to bounce between areas based on the choice of the community and access. He stated they are trying to move toward the quaternary academic center concept. Mr. O'Bryant reported they are very different from Weems in that they are a high level general acute hospital and Weems is a critical access hospital. He stated there are two different languages, two different ways these hospitals are run and different rules that apply. Mr. O'Bryant said TMH is not an expert in critical access hospitals but would like to open a dialogue about how they can move forward. He said they can provide partnerships in the clinical areas where they do have expertise and can provide support. He went on to say on the financial, regulatory side they are very different and the optimum approach is to find an organization that is a risk partner and a critical access expert. He said he has talked with Mr. Cooper about ways to help and strengthen Weems. He stated they would like to bring in an expert partner for critical access on the regulatory side to provide the piece they cannot provide. He stated TMH can provide support for the clinic areas. Mr. O'Bryant recommended they look collectively for a partner in this area. Commissioner Parrish asked Mr. O'Bryant to explain what clinic support consists of. Mr. O'Bryant stated clinical support refers to nursing, laboratory, pharmacy, and anything relating to physicians. He reported they have an opportunity long term to plan and use the residency programs to help recruit physicians. He explained clinical is the provision of care and regulatory refers to how the hospital is reimbursed and what rules apply to the organization relating to keeping the license. He said in relation to a critical access partner, there are a number of organizations. Mr. O'Bryant stated he is not suggesting a certain partner as he thinks it will be a collective decision. He suggested when the partner is selected it should be a shared risk relationship meaning they would share in the losses and gains. He explained this mitigates some of the losses for the

county. Mr. O'Bryant said they can start looking at the possible organization for partnerships and bring options to the Board if they are interested. He stated they will also work with the local hospital board on the recommendations. Commissioner Lockley asked who the boss of the group will be. Mr. O'Bryant reported the Board should be the boss. He explained in a partnership there should be a contract as to who is responsible for what and performance requirements for the organization. He went on to say the organization would be accountable back to the Board concerning their performance. Mr. O'Bryant said for the partnership to work, there must be some oversight by the Board and from the day to day management stand point; it would probably be the partner. He stated it is a County asset so they must report back to the Board. Commissioner Lockley asked what the role of the expert would be. Mr. O'Bryant said they have to find a critical access organization and develop the structure. He explained his thought is the CEO would report up through that organization from the employment standpoint. He said if it is through TMH then it would be through a contract with them but the organization has to be engaged in the process. He went on to say if they are a risk partner then they are going to want to have some ability to help manage the facility. Commissioner Lockley inquired if there would be two CEO's. Mr. O'Bryant answered no; the one will just have deeper responsibilities. He explained right now Weems has one CEO, a finance person, a nursing person, and a human resources person but they do not draw on the expertise of a lot of people. Mr. O'Bryant explained from the regulatory side, the rules are changing every day and it requires an expert in this area. He stated the Medicare rules are changing daily and critical access is in its own field. He reported the management at Weems would probably stay the same but you would have more expertise with training, education and they can bring resources down when needed to strengthen the programs. He said TMH cannot provide the critical access regulatory piece. Commissioner Lockley asked about doctors. Mr. O'Bryant stated they would be involved as they train a lot of doctors. He explained he met with the new incoming residents for academic practice this morning and the internal medicine residency doctors yesterday. He reported you cannot wait to the end to start recruiting doctors. He said the area here that needs early focus is physician recruitment. He commented strong doctors bring strong hospitals. Commissioner Lockley inquired if this includes specialist. Mr. O'Bryant said specialists go where they can find enough business to survive. He reported that may be a group that rotates here but does not live as the population may not support their business. He explained it also goes back to having primary doctors. He discussed their partnership with the hospital in Perry. He explained once you bring in primary doctors, then you can bring specialists. He stated the first focus would be to strength the primary base and then they can look at bringing down specialists. Commissioner Lockley asked about the cost involved. Mr. O'Bryant said he was not sure about the money for a risk partner. He stated the only item he is addressing today is whether the Board wants to investigate the concept and bringing some suggestions forward. He explained anything they bring forward would have to have a return. He stated he is not suggesting the County increase their tax or support because he does not think that is needed. He stated in any relationship, their expertise would strengthen the return they are receiving on the institution. Mr. O'Bryant suggested the Board continue to move forward with the facility as it will help on the recruitment side with physicians. He reported it will also inspire confidence within the community and the facilities the County has. He said a

new facility and the right physicians will help the hospital move forward. Mr. O'Bryant stated he is not suggesting spending additional money but creating infrastructure that falls within the current resources in place. He said there is a strong structure in place with the tax program. Commissioner Watson asked Mr. O'Bryant to expand on the structure he anticipates and described their relationship with the hospital in Perry. Mr. O'Bryant explained the Perry hospital is different because it is not critical access. He reported the facility in Perry is owned by the County but they lease the facility to Doctors Memorial Hospital, Inc., a private 401C3. He said they provide capital support but the facility was paid for by the County. Mr. O'Bryant stated the County has money that goes to support capital resources within the facility. He explained Doctors Memorial, Inc. is a private board and the members are appointed by the county and city commissioners. He reported TMH has gone in as a risk partner with Doctors Memorial, Inc. and have seats on their board along with the county representatives. Mr. O'Bryant stated Perry is a general acute care hospital so they are the same as TMH and they understand that kind of hospital. He reported critical access is much different and that is why he feels a third party is needed to share as a risk partner and have them as the subject matter experts to strength what they do and how they perform. Commissioner Watson asked if this will be structured as a joint venture. Mr. O'Bryant said it is more like a contractual partnership, a shared risk relationship. Commissioner Watson stated there would be three parties: TMH, Weems and a critical access expert. Mr. O'Bryant answered yes, and there would be a hospital board that would oversee and report back to this Board on the performance. He said there would also be a shared risk to take some of the risk away from the County. Commissioner Parrish asked where TMH will be in the structure if a third party is included for critical access. He asked if they will remain a partner and be more of a partner than they are now. Mr. O'Bryant said they are a limited partner in the relationship now, not a risk partner. He did not want to provide a structure now as he would like the management company to hold a substantial part of the risk but they would like to be in the relationship as well. Commissioner Parrish stated the Board puts a lot of faith in TMH even though they are not down here managing the facility. He explained the County will not know the third party and he would like to know how much of a partner TMH will be in trying to make this successful. He stated Weems is having problems with billing and asked if the third party will help with this issue. Mr. O'Bryant answered yes, this would be the third party. Commissioner Parrish stated Mr. Pierce went to the facility last year and just received the bill last week. Mr. Pierce reported the bill was received 7 months later. Commissioner Parrish explained this is the kind of problem that cause the down falls they have right now. Mr. O'Bryant agreed these are the problems. He said that is why you get someone who understands the critical access business and regulatory side and have a risk in the partnership so they are likely to want a return on the risk side. He went on to say it will drive them to get the bill out in a timely manner followed by the appropriate payment. Commissioner Parrish asked if the partnership will increase efficiency so the hospital is more economically stable. Mr. O'Bryant said this will probably be an expectation and that is why you bring in a group that understands how to operate these organizations. He explained then you can learn from everyone's shared experience and have this written into the agreement. Commissioner Parrish stated the structure is going to have to change to make the hospital economically sustainable. He agreed the new facility is crucial as

doctors are not going to want to participate in a 60 year old facility. He reported the new facility will increase the confidence of the community and hopefully increase revenues. Commissioner Parrish said they have been talking about this for 10 years since the healthcare tax has been passed. He stated the first thing was to build a facility in Carrabelle and that has been done. He explained it is time to move forward here but he does not feel like the current structure is going to allow the County to do what they promised the people they would do. He informed Mr. O'Bryant he is very interested in hearing their proposal and moving forward to improve the quality of health care services. He reported they are concerned about the current structure. Commissioner Parrish stated they have confidence in the ability of TMH but will not know about the other partner so it is critical they have TMH's participation to help oversee the other organization. He stated the Board has had some bad experiences with leasing the hospital. Mr. O'Bryant said they are not proposing a lease for the hospital. He stated the County needs to maintain control of the hospital. He reported they are open to having a stronger risk relationship but if they are going to be in that position, they need someone who understands the risk side to make sure they are successful. Mr. O'Bryant stated TMH is not building primary and secondary services they are building at a higher level. He said they are becoming more of a tertiary, quaternary center. He stated they do not want the primary and secondary services; they would like the county to keep them. He reported they do not want to fill up their beds because usually they are looking for beds for patients who really need them. He explained they would like the patients to stay in the communities they originate in. Commissioner Parrish asked if they are looking at Weems as a primary care facility. Mr. O'Bryant answered a primary, secondary and acute care facility. He commented they do not want patients sent to them that can be treated here. Commissioner Parrish said he understands if a resident doctor graduate spends two years in rural care then there is a program where their loans are forgiven. Mr. O'Bryant agreed there is a program like this. Commissioner Parrish said he is looking for a stronger relationship with TMH to try and help get some primary care physicians. He stated TMH would not be a critical access provider but could strengthen other items. Mr. O'Bryant agreed on the clinical side as this is where their strengths are. Commissioner Parrish asked if they have a commitment from TMH to move forward and make this work. Mr. O'Bryant said they would be part of the structure they bring back to the County but their willingness and ability to feel comfortable with being a risk partner is linked to someone who understands this area better than they do. Mr. O'Bryant said they will be able to show how this structure will work and how the risk will look when they come back with a proposal. He stated they are requesting permission to start looking at something to bring back to the Board. Commissioner Parrish said they are not health care professionals and the hospital is not their area of expertise. Mr. O'Bryant said in the circle around Tallahassee, all critical access hospitals are struggling. He informed the Board Weems Hospital is doing better than the other hospitals. He said it is hard to plan ahead when you are just trying to keep the doors open. He reported creating this kind of partnership gives them the opportunity to deal with the problems of today and start planning for the future. Commissioner Parrish asked if Mr. O'Bryant considers this partnership a structural support for the CEO. Mr. O'Bryant said yes, and for the hospital and the community at large. He went on to say there is Board member training that can also go into place and it will give the hospital access to services they do not

have. Chairman Massey stated they need the help as the trust fund is not to run the hospital. He explained it was to build a hospital and clinics. He said if it had not been used over the years there would be enough money to build the hospital with cash. Mr. O'Bryant reported they are looking for someone who invests in their organization. He explained the funding is focused on two things with one being facility infrastructure and the other operations. He suggested the County keep the funding for operating as this will attract companies who feel the County is investing in the facility. Chairman Massey reported the trust fund can't keep the hospital going. Mr. O'Bryant explained when he came to TMH they were going through problems, losing money and cuts were necessary to draw expenses in to what they could afford but long term it is growth that give prosperity. Commissioner Lockley stated when the trust fund was created half of it was for building and half for operations and that is for running the hospital. He said the Hospital does not owe the trust fund anything. Commissioner Lockley reported they are using too much money unnecessarily and someone needs to show them how to use it. He explained they should not just get the money because it is there. He said this is the worse year yet and it needs to get cleared up but it is taking a long time to clear up. Commissioner Lockley stated the trust fund is the back up to keep from having to go to ad valorem taxes. He explained they have not had to use ad valorem taxes since the trust fund was established. He went on to say it had built up but they are tearing it down so fast and something is wrong. Commissioner Lockley reported it has not been going this fast and he does not know what is happening now. Commissioner Watson inquired what they need to do if they are interesting in proceeding with this proposal. Mr. O'Bryant said just let them know because they do not want to waste time if the County is not interested. Chairman Massey asked Mr. O'Bryant to see what he can do to help the hospital. Commissioner Sanders reported she is concerned about good adequate health care for the people. She stated she does not like it when the people here have to go to Sacred Heart or Tallahassee because she would like to take care of our own people. She said there are some problems but the Board does not try to micromanage the hospital. Commissioner Sanders reported the Board does have to protect the people's money. She said she does not have a problem pursuing this but she wants to make sure they do the right thing for Franklin County to take care of the people. Commissioner Sanders reported she has contacted Mr. O'Bryant before about the problems. She explained TMH would have 75 days cash on hand and Weems would have 7. She went on to say TMH's a/r days would be 45-47 and Weems would be 86. She said there are problems and sometimes she is sure it is overwhelming to Mr. Cooper and Mr. Graham. Commissioner Sanders stated she is not against moving forward but the hospital needs to be on good solid financial footing. She explained Taylor County voted for a 2 cents health care tax and that was too much money. Commissioner Sanders asked how many facilities TMH partners with for management. Mr. O'Bryant answered just Perry. He stated they have to grow this facility and make it a place people want to go to. Commissioner Sanders said they only have 1.6-2.6 patients and they cannot carry the facility and expect to have a profit. Mr. O'Bryant reported this problem goes back to having physicians. Commissioner Sanders agreed the hospital has to get doctors and the community has to have trust in the doctors or it will not get any better. Chairman Massey stated the hospital has got to have the money to get the doctors. Commissioner Lockley reported he would like to see the current management go away because they are hurting the County more

than helping. Mr. Pierce asked about the structure of the proposal. He said TMH has strength on the clinical side so they can help with the nursing and the patient care. He asked Mr. O'Bryant to describe the third party role and if they will be an expert in critical access billing. Mr. O'Bryant reported on the regulatory side with cost accounting, billing and collections. Mr. Cooper stated it would basically be around the cost based reimbursement. Mr. O'Bryant said they are not experts in this area. Mr. Cooper explained as a critical access hospital they file a cost report and he needs to tell the Board every month what the bottom line is. He reported unless you have a good analysis, then it is a guess. He reported these companies they are talking about do this every day and they monitor the Legislation on what is changing with critical access hospitals and help implement programs that enhance the cost reimbursement structure. He stated he brought to the Board the adult outpatient geriatric site as a program and this kind of program would come from this company as they are experts in these areas. Mr. O'Bryant explained the rules change all the time and just keeping up with the changes is difficult. Chairman Massey stated the County is not making a payment now out of the trust fund but when a payment is being made and payroll is needed then there will be a problem. Commissioner Sanders asked if there is a possibility some of the management will not be needed. Mr. O'Bryant said a lot of the management may not be needed. Commissioner Lockley stated the management contract they have now is not needed. Mr. O'Bryant agreed this new agreement would replace that management contract. Chairman Massey reported there have been three billing companies since Mr. Cooper has been present and none of them have pulled the County out of this problem. Mr. O'Bryant reported the County must have a risk partner so everyone wants the hospital to succeed and if it doesn't then everyone loses money. Commissioner Parrish agreed they need incentive to provide the structure to make the hospital operate more efficiently. He said they cannot continue to use the same structure and go downhill but need to find a place where they can break even and deliver a better health care system. He reported he is not looking to make money but see the hospital is sustainable and the people get the services they deserve. He said the County has Capital Health Plan insurance and needs a strong partner in Tallahassee. Commissioner Parrish agreed the hospital cannot keep losing money at this rate. Mr. O'Bryant said the goal is to make sure Franklin County continues and improves as a destination community. He explained you have to have a high quality of health for people to want to stay here. Mr. O'Bryant reported as health care grows in the community it can also provide more jobs. Chairman Massey said the two biggest items in a community are the hospital and school. He explained if the County builds the hospital and TMH cannot help them and then they are trying to make the payment and payroll, it will not work. Commissioner Sanders stated when they had the rural health survey done in the economic development area, the hospital drives in between \$6-7 million a year. Commissioner Parrish reported he would also like TMH to go forward. Commissioner Lockley asked how long it will take for this to happen. Mr. O'Bryant stated they have already starting to identify who the potential partners are and then they will need to sit down with them to see who is interested in a risk relationship and then look at structure. He estimated the timeframe to be 3 months. All of the Board members agreed for Mr. O'Bryant to look into this proposal.

The meeting recessed at 2: 30 p.m.

The meeting reconvened at 2:40 p.m.

Sherriff's Office - Inmate Medical Discussion

Sheriff Mike Mock appeared before the Board. He discussed the three proposals for inmate medical the Board received a month or two ago. He recommended the proposal they received from Weems Memorial Hospital as it is a good proposal. He said they have done the best they can with the medical side and have an LPN, a part time doctor and a Physician's Assistant (PA). He informed the Board the nurse has turned in her notice and Friday is her last day. He asked the Board to select one of the proposals and then the company can hire someone of their choosing. He said the inmate medical has been an ongoing problem and the staff has done a good job of trying to look after the taxpayers' money. Sheriff Mock reported they had a good meeting with Weems and their staff and he feels like this is the direction to go. He reported the private medical contractor is the most expensive proposal. Sheriff Mock stated the hospital will also save some money with this proposal. He reported they are at a point where they need to make a move on this proposal. He said it is a little over what they have budgeted for but it will be better in the long run for everyone. He stated they have a responsibility to make sure the inmates receive medical care. Sheriff Mock reported he cut some positions and Ms. Ginger Coulter handles the financial items but she is also having to handle these billings and is overwhelmed. He said if Weems is selected he would like the proposal to also include the billing even though it is not in their proposal. He stated they may need another position to do this. Commissioner Sanders asked Mr. Mike Cooper, Weems Memorial Hospital, to address this issue. Mr. Cooper said they did discuss it and he did add in their proposal about \$15,000 for hospital staff support for this matter. He said it was not vetted completely so it may go up a little. He stated they think they can do a pretty good job on this as they do this every day. Commissioner Parrish asked what Sheriff Mock is going to do the rest of the fiscal year if the nurse is leaving Friday. Sheriff Mock stated he has a temporary plan that will last a while but he would like to move forward. Commissioner Parrish reported in the proposal it says the next 3-4 months. Mr. Pierce stated he assumes the new plan will start October 1st with the new fiscal year. Sheriff Mock said they will start as soon as they can. Commissioner Parrish asked for clarification on who is being billed. Ms. Coulter explained they are talking about claims that come through that she has to review and payment of the bill and filing. Mrs. Coulter said they would like someone else to handle this and keep the records. Commissioner Parrish asked about non-violent offenders being placed on house arrest and keeping their medical benefits as long as they are not incarcerated for more than 3 days. He inquired if they have ever looked at these diversionary problems. Mrs. Coulter said the captains have tried in the past working with the State Attorney's Office and they tried doing something like this once but the judge said no. She explained they cannot determine if a person can be on house arrest. Commissioner Parrish reported they are doing this in other places. Sheriff Mock said this does happen on a regular basis but it does not always work out. He explained the dialysis patient they had could not get out so they worked it out with Leon County as they have their own dialysis center and it saved a lot of money. Sheriff Mock reported there is liability in this item and he thinks this is their best option. Commissioner Parrish said they need to alleviate the burden on the

taxpayers. Sheriff Mock stated Weems will help as they have the staff to make determinations. He reported they have a requirement to make sure the inmates are taken care of and they have worked hard to try and keep the costs down. Sheriff Mock informed the Board they might be looking for some help with the inmate medical costs as it has been tough this year. He said they can maintain and have a backup plan but they need to move forward and he thinks Weems has come up with a good proposal. Mrs. Erin Griffith, Finance Department, asked about the \$90,000 in the current budget for inmate medical and the cost for the nurse, part-time doctor and PA and if they are planning to reduce their budget by that amount. Mrs. Coulter said they have provided for that in the contract. Mrs. Griffith explained in the budget that was submitted the \$90,000 was taken out but the budget increased. Sheriff Mock said the increase will be in other areas. Mrs. Coulter reported the budget does have an increase. Sheriff Mock advised the Board they will cut that amount out of the budget. Mrs. Coulter reported the \$90,000 has already been removed. Sheriff Mock said the \$134,000 will be removed also. Mr. Moron asked if the Sheriff's budget will be reduced by \$134,000 if Weems gets the \$134,000. Sheriff Mock agreed his budget will be reduced. Mrs. Coulter stated there is not \$134,000 in their proposed budget for this item. She stated the \$90,000 was removed from their proposed budget. Mrs. Coulter reported if the Weems contract is approved, it does include medical services and 2 LPN's and a provider. She explained the provider the Sheriff's Office has on staff and the LPN will come out of their budget. She reported the total is not \$134,000 as \$32,500 in insurance is being paid by the County. She explained that \$32,500 is not in their budget. Mr. Moron clarified the Sheriff's Office does not have \$90,000 in their budget for inmate medical. Mrs. Coulter agreed. Mr. Moron asked if the County now has to come up with the \$90,000 outside of the Sheriff's budget. Mrs. Coulter answered yes, as this does not include any of the medical billing just addresses staffing. She said the \$32,500 will not be paid by Weems as it is paid by the County. Mr. Moron asked what the \$90,000 is for. Mrs. Coulter explained this was what is budgeted for inmate medical but they took it out of the proposed budget as they knew they were going in a different direction. Mr. Pierce pointed out their proposed budget did not go down by \$90,000. Mrs. Coulter agreed it was not reduced but that should be addressed at the budget hearing. Mr. Pierce stated if this contract is approved, then the Board has to add some money in their budget for inmate medical. Mrs. Coulter reported they have spent \$223,844.00 so far this fiscal year on medical costs and this does not include June and is only a partial for May. She said this is with the 50% contract in place with Weems ambulance and emergency services and 30% discounts with TMH and Bay Medical. Mrs. Coulter said they also have a third party insurance negotiator for other bills but some bills cannot be negotiated. She stated most of these are discounted prices. She reported the cost is way up and she hopes Weems can help save some money. She said they are way over on medical and just cannot spend any more on medical costs. She stated they applied the inmate meal and medical reimbursement toward the cost and it brought it down to a net of \$190,000. Mrs. Coulter reported three insurance claims have been submitted so they are hoping to get some reimbursement but she is not sure when it will be received. Commissioner Parrish reported they could easily incur another \$100,000 in bills by the end of the year. He stated he would like to see the contract with Weems work but the Board needs to understand that if Weems runs out of money the County will have to help them too. He said if Weems cannot

perform the duties for the money they are proposing then the taxpayers are going to have to reimburse the hospital or they will be in a worse position. Mrs. Coulter pointed out the \$134,000 is not for paying the claims just for staffing. Commissioner Parrish reported they cannot expect the hospital to assume a \$150,000 shortfall every year to try and operate this contract with the jail. Commissioner Parrish reported there is no way to control costs if they have to go out of the county for services as they are a lot of services Weems cannot provide. Mr. Pierce said the County has major medical insurance to cover big issues if they are incarcerated and hospitalized. Mrs. Coulter said it does not cover doctor bills, physical therapy or other items of this kind. Mr. Moron asked if the hospital will need to keep a separate set of books for inmate claims in case they need more money for the claims. Mr. Cooper informed the Board he has never run the medical services for a Sheriff's office. He said they will be learning but he does feel like Weems is the County's best asset that is underutilized. He said they already have the infrastructure of administration, finance and practitioners. He stated they have the ability to reduce the cost of the overall claims and move a higher percentage of the claims into Weems. Mr. Cooper reported they will keep a separate set of books and it will show up on the financials. Commissioner Lockley asked if most of these bills will be indigent bills. Mr. Cooper answered probably not. Chairman Massey stated it will not be indigent if they are incarcerated. Mr. Cooper reported indigent care only starts when they get to the hospital. He explained if they come from the jail then they are considered institutional care. Commissioner Parrish reminded the Board they do not know what this cost will be just like the Sheriff does not know. He said if the hospital incurs some large debt for this item, then the County will have to help them out because the hospital cannot assume the debt. Sheriff Mock said the issue is how much to budget for medical costs. He reported the liability changes also because they have the staff to handle this item. Mr. Cooper praised the Sheriff's Office for the work they have been doing and said the work of the LPN is an unsustainable model. He said she carried a cell phone 24/7 and is making medical calls she does not want to make. He felt they had the infrastructure to take some of the burden off and have a doctor make a decision as opposed to a nurse. Attorney Shuler informed the Board the surtax is not available to fund inmate medical so it will come from ad valorem taxes just like the ambulance service. Commissioner Parrish reported just like they do now for the Sheriff. Mr. Moron explained this is why he asked about the separate set of books. He asked how they know what is surtax and what comes out of ad valorem taxes. Chairman Massey said they will have to bill separately for each inmate. Commissioner Sanders reported it will have to be a separate line item. Mrs. Johnson questioned if it could be part of hospital operations. Attorney Shuler answered no, they have never funded inmate medical. Mrs. Johnson said it would become part of hospital operations. Attorney Shuler disagreed but said the Board would have to decide. Mrs. Johnson pointed out it would be hospital operations, if they start doing this as a service. Commissioner Parrish said it cannot be added because there is not enough money and the Hospital will show they are losing more money to help save the County money. He disagreed with addressing this as hospital operations. Mr. Cooper said the money will go into hospital operations but they will account for it separately. He went on to say they keep separate revenue for each unit and separate expenses but the money is all in the same bank account. Commissioner Sanders reported it does need to be kept separate as ad valorem tax dollars are one thing and surtax

dollars are different. Commissioner Parrish stated the next closest bid to provide inmate medical services is \$300,000. Mr. Pierce said the \$300,000 covers everything but the \$134,000 does not cover pharmaceuticals. Ms. Coulter reported the \$300,000 contract has an aggregate total of \$40,000 so the County would still assume liability for everything over \$40,000. She said they were confident they could keep these costs under \$40,000 including pharmaceuticals. Mrs. Coulter reminded the Board \$32,500 of the \$134,000 is already paid by the County. Commissioner Parrish said the actual costs are \$102,000.00. Mr. Pierce asked if this is for the major medical. Mrs. Coulter answered yes. Mr. Pierce reported the County still has to pay for whatever care the inmate needs. Mrs. Coulter agreed. Mr. Cooper reported the cost of drugs is not included in this proposal. Mrs. Griffith pointed out it is not in the Sheriff's budget either. Mr. Pierce stated the private provider included \$40,000 because they thought that would cover the costs. He reported the hospital did not include this item so the County needs to understand they cannot do these services for this cost. Commissioner Parrish said this proposal is not the bottom line so they cannot hold the hospital to this amount. Mr. Pierce said there are items missing from this proposal. Mrs. Coulter agreed the County would be liable after the \$40,000 aggregate but the company thinks they can keep the costs under \$40,000. Commissioner Parrish reported he does not want the Board to hold the hospital to \$102,000. Chairman Massey asked if Mr. Cooper can come up with another figure. Commissioner Parrish said there is no way to know how much this will be each year. Mr. Cooper explained they had two weeks to put this contract together. He said if he spent more time with Mrs. Coulter then he could make this number more meaningful. Chairman Massey asked Mr. Cooper to work with Mrs. Coulter to get this number closer to the costs. Commissioner Sanders reported the Sheriff has agreed this is the best proposal. She suggested they move forward and allow Mr. Cooper to meet with Mrs. Coulter and come back with some more accurate overall costs. Mr. Cooper agreed to try and do his best. Mrs. Coulter said they just need some help with these costs.

There being no further business to come before the Board, the workshop was adjourned.

William Massey - Chairman

Attest:

Marcia M. Johnson - Clerk of Courts