GUAM MEMORIAL HOSPITAL AUTHORITY
Aturidåt Espitåt Mimuriåt Guåhån

A Report to our Citizens
Fiscal Year 2018

OVERVIEW

The Guam Memorial Hospital Authority (GMHA), a component unit of the Government of Guam, was created on July 26, 1977 pursuant to Public Law 14-29 as an autonomous agency. The hospital provides acute, outpatient, long-term, urgent care, mother and child health, and emergency care treatment to all patients who seek medical services. GMHA serves as a “safety net” hospital for every individual, regardless of one’s coverage or ability to pay. The hospital has 161 licensed acute care beds and 40 beds for long-term care at its Skilled Nursing Unit (SNU). GMHA’s operating revenue sources are primarily from Medicare, Medicaid, Medically Indigent Program (known as 3M’s), and other commercial insurers.

Mission Statement
To provide quality patient care in a safe environment.

Vision Statement
Quality service and standards compliance.
Open and consistent communication.
Fiscal responsibility and accountability at all levels.

Strategic Goals
Achieve Financial Stability
Leadership Team Development
Establish and sustain safety & quality culture
Training and education assessment & implementation
Capital improvement, planning, and implementation

GMHA Staffing - Full Time Equivalents (FTE)

<table>
<thead>
<tr>
<th></th>
<th>FY 2016</th>
<th>FY 2017</th>
<th>FY 2018</th>
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<tbody>
<tr>
<td>Total Employee FTE Count</td>
<td>985</td>
<td>1,001</td>
<td>947</td>
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<tr>
<td>Budgeted FTE Count</td>
<td>1,212</td>
<td>1,234</td>
<td>1,232</td>
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<tr>
<td>Total Personnel Costs</td>
<td>$89 M</td>
<td>$81 M</td>
<td>$69 M</td>
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Governance

Board of Trustees
Eloy Lizama, Chairperson
Lillian Perez-Posadas, Vice Chairperson
Melissa Waibel, Secretary
Sharon Davis, Trustee
Sonia Siliang, Trustee
Dr. Ricardo Terlaje, Trustee

Executive Management
Peter John D. Camacho,
CEO/Administrator
Dr. Vincent A. Duenas,
Assoc. Hospital Administrator of Medical Services/ Professional Support Services, Acting
Zennia Pecina,
Assistant Administrator of Nursing Services
Benita Manglona,
Chief Financial Officer
Dr. James Last
Medical Staff President
GMHA’s exhaustive efforts finally paid off after the Centers for Medicare and Medicaid Services (CMS) in January 2019, approved GMHA’s request to rebase, or update its base year cost per discharge, retroactively to October 1, 2013. GMHA's base rate was over 20 years old and did not reflect current costs of delivering patient care. Medicaid and Medically Indigent Program (MIP) payments are also expected to increase because they mirror Medicare payment methodology.

In the FY 2018 financial audit, GMHA’s improved cash flows for FY 2019 prompted the independent auditors to remove the going concern emphasis that existed in prior years’ audit opinions because of substantial doubt about GMHA’s financial health and ability to continue.

Collection Rates
For every $1 billed, GMHA collects the following per payer type:

- **Medicaid**: 52¢
- **Medicare**: 33¢
- **Medically Indigent Program**: 61¢
- **Insurance & Others**: 71¢
- **Self-Pay**: 26¢

**23 Minutes**
Average Length of Time from ER Door to Doctor as of September 2018

**1,693**
Birth Certificates Issued

**142**
Death Certificates Issued

**Select Performance Indicator Compliance (September 2018)**
- Physician Time Study Forms Signed: 90%
- Pain Management at all MCH Units: 98%
- Utilization Review - Appropriateness of Admission: 100%
- Hemodialysis Infection Control & Disinfection Monitoring: 100%
- NICU Expressed Breast Milk Monitoring: 98%
- Labor & Delivery & OB Fall Risk Assessment: 98%
- Social Services Cases Closed w/in 7 Days of Discharge: 98%

**Patient Census Mix**
- Inpatient: 24%
- Emergency: 60%
- Outpatient: 16%

**$1.04M**
Medicaid incentive payment for the successful appeal of GMHA’s late submission of Meaningful Use Stage 2.
The Payer Mix chart reflects the percentage of GMHA revenue from different sources. Of the Hospital’s $150 million (M) of gross patient revenues, the 3 M’s constitute 55% (Medicare $42M, 28%; Medicaid $30M, 20%; and MIP $11M, 7%), followed by Third-Party Payers and Others at 30% or $45M, and Self-Pay at 15% or $22M. The Payer Mix is consistent with the prior year.

An independent audit report of GMHA’s financial statements prepared by Deloitte & Touche, LLP resulted in a clean audit opinion. The Office of Public Accountability released GMHA’s financial audit on June 11, 2019. You may obtain more information and view the audit in its entirety on our website at www.gmha.org.
GMHA continues to provide quality patient care despite decades of financial and staffing limitations. Its continued efforts to improve efficiencies, contain costs, and generate internal revenue enhancements will continue to strengthen GMHA’s sustainability. These efforts include:

Maintaining CMS Certification. GMHA was surveyed in April 2018 by the Centers for Medicare and Medicaid Services (CMS). GMHA must be ready for any follow-up surveys in order to maintain CMS certification and continue to receive Medicare and Medicaid reimbursements. GMHA continues to improve operations and address the deficiencies noted in the CMS surveys.

3Ms Rebasing Advocacy. GMHA continues to submit timely reports, and demonstrate with its filings of Adjustments and Rebasing requests of reimbursement inequities and its detrimental impact to the hospital. GMHA projects $11M in additional reimbursements from Medicare. GMHA also projects an additional $6M in reimbursements annually from the 3Ms beginning in FY 2020.

Increasing Collections Efforts. GMHA continues to work with the Department of Revenue & Taxation to garnish income taxes for overdue accounts. GMHA will also work with the Office of the Attorney General as part of its collection strategy.

Family Birth Center Project. The U.S. Department of Agriculture approved a loan of $9.2M to finance the design and construction of a new Family Birth Center within the hospital with additional Federal grant funds of up to $3M to finance new equipment for this facility. The center will offer an improved delivery of care to support approximately 250 babies born at GMHA each month. GMHA is working with the Guam Economic Development Authority for the interim financing required by USDA before this project can proceed.

Pyxis Medication Distribution System. The installation of Pyxis in FY 2019 will automate and improve medication distribution processes, which will reduce errors and insurance denials. This will also address previous audit findings on inventory controls.

New EHR System Needed. The hospital needs to procure a new Electronic Health Records (EHR) system which integrates clinical, demographic, and financial information seamlessly. GMHA recognizes this will require a substantial capital investment and has requested assistance from the Guam Legislature to identify and appropriate funds. This is a critical project to ensure GMHA continues to meet regulatory compliance with CMS in addressing accurate and complete documentation of patient care and retrieving QAPI data.

Hospital Structure Assessment. GMHA will work with the newly elected Governor Lou Leon Guerrero and Lt. Governor Josh Tenorio in coordinating the visit of the Army Corps of Engineers to assess GMHA’s structure to determine whether it will need to be demolished to build a new hospital or renovated and strengthened.

URGENT PROJECTS
- Electronic Health Records System
- Electrical Distribution Panel
- Rooftop Repair
- Relocation & upgrade of Communication Center
- Demolition of Z-Wing
- HVAC System

The GMH Volunteers Assoc. (GMHVA) annually donates various critically needed equipment and services to the hospital. In FY 2018, GMHVA donated a cardiac monitoring system, ventilator, echocardiogram system, and two blood gas analyzers.

Do you like our report? Would you like to see other information? Please let us know by contacting Benita Manglona @ (671) 647-2367 or by email at benita.manglona@gmha.org. Visit our website at www.gmha.org for more information.