MINUTES MEDICAL UNIVERSITY HOSPITAL AUTHORITY BOARD OF TRUSTEES MEETING February 13, 2015

The Board of Trustees of the Medical University Hospital Authority convened Friday, February 13, 2015, with the following members present: *Dr. Donald R. Johnson II, Chairman; Mr. William H. Bingham, Sr., Vice-Chairman; Dr. Stanley C. Baker, Jr.; Mr. William A. Baker, Jr.; Ms. Terri R. Barnes; The Honorable James A. Battle; Dr. Harold W. Jablon; Dr. James Lemon; Ms. Barbara Johnson-Williams; Dr. Ragin C. Monteith; Dr. E. Conyers O'Bryan, Jr.; Mr. Charles W. Schulze; Dr. G. Murrell Smith, Sr.; Dr. Charles B. Thomas, Jr.; Mr. Michael E. Stavrinakis. Absent: Thomas L. Stephenson, Esquire*

The following administrative officials were present: Dr. David Cole, President; Dr. Bruce Elliott, Interim Vice President for Medical Affairs, Dr. Deborah Deas, Interim Dean, College of Medicine; Ms. Lisa Montgomery, Executive Vice President for Finance and Operations; Dr. Pat Cawley, Vice President for Clinical Operations and Executive Director, MUHA; Dr. Frank Clark, Vice President for Information Technology and CIO; Mr. Jim Fisher, Vice President for Development.

Item 1. Call to Order-Roll Call.

There being a quorum present, Chairman Johnson called the meeting to order. Ms. Celeste Jordan called the roll. She announced the following: *In compliance with the Freedom of Information Act, notice of meetings and agendas were furnished to all news media and persons requesting notification.*

Item 2. Secretary to Report Date of Next Meeting.

The date of the next regularly scheduled meeting is April 10, 2015

<u>Approval of Minutes of the Regular Meeting of the Medical University Hospital Authority of December 12, 2014.</u>

Board Action: It was moved that the Minutes be approved. The motion was seconded, voted on and unanimously carried.

RECOMMENDATIONS AND INFORMATIONAL REPORTS OF THE PRESIDENT

OLD BUSINESS: None.

NEW BUSINESS:

<u>Item 4.</u> General Informational Report of the President.

Dr. David Cole called on Dr. Pat Cawley to introduce the speakers. Dr. Cawley introduced Mr. Anton Gunn, the Chief Diversity Officer for the Medical Center where he is responsible for oversight and execution of the Medical Center's diversity initiatives and community health programs. He previously served as a senior official in the Obama Administration as the Director of External Affairs at the US department of Health and Human Services. He advised President Obama and Secretary Kathleen Sebelius on public engagement strategies to introduce Main

Street to the Affordable Care Act. Mr. Gunn was also a 2014 Resident Fellow at the Institute of Politics in the Kennedy School of Government at Harvard. Mr. Gunn has also served in the SC House of Representatives where he served on a White House Health Care Task Force of State Legislators for Health Reform. Mr. Gunn is a professional speaker, coach and author . He holds a BA in History and a Master's in Social Work from the University of South Carolina.

Mr. Gunn provided information on the past, present and future impact of the Affordable Care Act. He discussed the implementation timeline; reviewed the primary workforce; as well as, major challenges to academic medical centers.

At the conclusion of Mr. Gunn's presentation, Dr. Cawley introduced Dr. Cassandra Salgado. She received her BA and MD degrees from West Virginia University where she also completed a residency in internal medicine and pediatrics. She served as Chief Resident for the Department of Internal Medicine at West Virginia University Hospital. She earned her Master's of Science Degree in Health Evaluation Sciences and Epidemiology from UVA in Charlottesville. She is Board-certified in infectious diseases, internal medicine and pediatrics and is active in numerous professional societies. She currently serves as MUHA's Epidemiologist and Medical Director for Infection Control and co-directs the hospital's Epidemiology Laboratory.

Due to the recent measles outbreak in the US, Dr. Salgado was asked to discuss the disease with the board. She reviewed the disease; the epidemiology; vaccine development and recent statistics. She discussed the 2014-2015 outbreaks the vaccination to prevent the disease and the controversy regarding the vaccine. MUSC supports the vaccination for measles in order to prevent sustained transmission of the disease.

Recommendation of Administration: That the reports be received as information.

Board Action: Received as information.

Item 5. Other Business. None.

OPERATIONS, QUALITY AND FINANCE COMMITTEE. CHAIRMAN: DR. STANLEY C. BAKER, JR. (Detailed Committee Minutes Are Attached To These Minutes)

OLD BUSINESS: None.

NEW BUSINESS:

<u>Item 6.</u> <u>Medical University Hospital Authority Status Report.</u>

Statement: Dr. Baker said Dr. Cawley had presented a report to committee.

Recommendation of Administration: Received as information.

Recommendation of Committee: Received as information.

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Board Action: Received as information.

Item 7. Medical University Hospital Authority Financial and Statistical Report.

Statement: Dr. Baker stated Mr. Steve Hargett had presented a report to committee.

Recommendation of Administration: That the report be received as information.

Recommendation of Committee: Received as information.

Board Action: Received as information.

Item 8. Major Purchase.

Statement: Dr. Baker presented the following major purchase for approval:

 RobertRX APS Ultra, RobertRX Envelope Delivery System and RobertRX Robot Workstation in the amount of \$675,000.

Recommendation of Administration: That the purchase be approved.

Recommendation of Committee: That the purchase be approved.

Board Action: A motion was made, seconded and unanimously voted to approve the major purchase.

Item 9. Report on Quality and Patient Safety.

<u>Statement:</u> Dr. Baker stated Dr. Scheurer had reported to committee.

Recommendation of Administration: That the report be received as information.

Recommendation of Committee: That the report be received as information.

Board Action: Received as information.

Item 10. Update on MUSC Physicians.

Statement: No report provided.

Recommendation of Administration: That this be received as information.

Recommendation of Committee: That this be received as information.

Board Action: Received as information.

Item 11. Legislative Update.

<u>Statement:</u> Dr. Baker stated Mr. Sweatman had provided a report to committee.

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Recommendation of Administration: That this report be received as information.

Recommendation of Committee: That this report be received as information

Board Action: Received as information.

Item 12. Other Committee Business. None

Item 13. Medical University Hospital Authority Appointments, Reappointments and Delineation of Privileges (Consent Item).

<u>Statement:</u> An updated list of appointments, reappointments and delineation of privileges to the medical staff were presented for approval.

<u>Recommendation of Administration:</u> That the appointments, reappointments and delineation of privileges to the medical staff be approved.

<u>Recommendation of Committee:</u> That the appointments, reappointments and delineation of privileges to the medical staff be approved.

Board Action: Dr. Baker moved that the list of appointments, reappointments and delineation of privileges to the medical staff for November and December 2014 be approved. The motion was seconded, voted on and unanimously carried.

<u>Item 14.</u> <u>Medical Executive Committee Minutes (Consent Item).</u>

<u>Statement:</u> Minutes of the Medical Executive Committee for were presented for information.

Recommendation of Administration: That this be received as information.

Recommendation of Committee: That this be received as information.

Board Action: The minutes of the Medical Executive Committee for November and December 2014 were received as information.

Item 15. Medical Center Contracts and Agreements (Consent Item).

<u>Statement:</u> Contracts and Agreements which have been signed since the last board meeting were presented for information.

Recommendation of Administration: That this be received as information.

Recommendation of Committee: That this be received as information.

Board Action: Received as information.

MEDICAL UNIVERSITY HOSPITAL AUTHORITY PHYSICAL FACILITIES COMMITTEE. CHAIRMAN: MR. WILLIAM H. BINGHAM, SR. (Detailed Committee Minutes Are Attached To These Minutes)

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OLD BUSINESS: None

NEW BUSINESS:

<u>Item 16.</u> <u>Facilities Procurements/Contracts Proposed.</u>

Statement: Mr. Bingham asked for approval of the following:

- Budget increase for OR 2 and OR 5. Increase from \$990,000 to total project cost of \$1.34M
- Right of Way Easement to Charleston County for the construction, improvement, operation and maintenance of a public road know as SC Route 30 (Calhoun Street) and S-550 (Courtenay Drive) as part of the RoadWise Project.

Recommendation of Administration: That the procurements/contracts be approved.

Recommendation of Committee: That the procurements/contracts be approved.

Board Action: A motion was made, seconded and unanimously voted to approve the procurements/contracts as presented.

Item 17. Project Update.

Statement: Mr. Bingham stated an update had been provided to committee.

Recommendation of Administration: Report to be received as information.

Recommendation of Committee: Report to be received as information.

Board Action: Received as information.

Item 18. Other Committee Business. None

Item 19. Facilities Contracts Awarded (Consent Item).

<u>Statement:</u> Facilities Contracts awarded since the last meeting were presented for information.

Recommendation of Administration: That this be received as information.

Recommendation of Committee: That this be received as information.

Board Action: Received as information.

CHILDREN'S HOSPITAL COMMITTEE. CHAIRMAN: DR. DONALD R. JOHNSON II (Detailed Committee Minutes Are Attached To These Minutes)

OLD BUSINESS: None.

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NEW BUSINESS:

Item 20. Operations and Facilities Report.

<u>Statement:</u> Dr. Johnson stated everyone had attended the committee meeting and had heard the reports. He asked for approval of the following items:

- Design of the Exterior of the new hospital to be submitted to the Charleston Board of Architectural Review for approval.
- Approval to continue the new hospital project with filing the HUD application.

Recommendation of Administration: That these two items be approved.

Recommendation of Committee: That these two items be approved.

Board Action: A motion was made, seconded and unanimously voted to approve the two requests as presented.

Item 21. Women's Services Update.

Statement: No report.

Recommendation of Administration: Received as information.

Recommendation of Committee: Received as information.

Board Action: Received as information.

Item 22. Clinical Overview.

Statement: No Report.

Recommendation of Administration: received as information.

Recommendation of Committee: Received as information.

Board Action: Received as information.

Item 23. Children's Hospital Financial Report.

Statement: No Report.

Recommendation of Administration: Received as information.

Recommendation of Committee: Received as information.

Board Action: Received as information.

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Item 24. Development Activity Report.

Statement: Mr. Jim Fisher reported to committee.

Recommendation of Administration: Received as information.

Recommendation of Committee: Received as information.

Board Action: Received as information.

Item 25. Other Committee Business. None

AUDIT COMMITTEE. CHAIRMAN: Thomas L. Stephenson, Esq. (Detailed Committee Minutes Are Attached To These Minutes)

OLD BUSINESS: None

NEW BUSINESS:

In Mr. Stephenson's absence, Dr. Lemon chaired the committee.

Item 26. Legal Office Update.

<u>Statement:</u> Dr. Lemon reported that Ms. Annette Drachman had provided an Annual report to the committee on the activities of the legal office.

Recommendation of Administration: That this report be received as information.

Recommendation of Committee: That this report be received as information.

Board Action: Received as information.

Item 27. Compliance Update.

<u>Statement:</u> Dr. Lemon reported that Ms. Reece Smith provided the annual enterprise-wide compliance update to committee.

Recommendation of Administration: That this report be received as information.

Recommendation of Committee: That this report be received as information.

Board Action: Received as information.

Item 28. Information Security (IS) Update.

<u>Statement:</u> Dr. Lemon stated Dr. Frank Clark had updated the committee on the hiring of the new CISC.

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Recommendation of Administration: That the report be received as information.

Recommendation of Committee: That the report be received as information.

Board Action: Received as information.

Item 29. Report of the Office of Internal Audit.

<u>Statement:</u> Dr. Lemon stated Ms. Susan Barnhart had provided a report to committee.

Recommendation of Administration: That this report be received as information.

Recommendation of Committee: That this be received as information.

Board Action: Received as information.

Item 30. Other Committee Business. None

OTHER BUSINESS FOR THE BOARD OF TRUSTEES:

Item 31. Approval of Consent Agenda.

Statement: Approval of the Authority Consent Agenda was requested.

Recommendation of Administration: That the consent agenda be approved.

Board Action: It was moved, seconded and unanimously voted that the consent agenda be approved.

Item 32. New Business for the Board of Trustees. None

Item 33. Report from the Chairman. None.

There being no further business, the Medical University Hospital Authority meeting was adjourned and the University Board of Trustees meeting was convened.

Respectfully submitted,

Mmb C Swedden

Mark C. Sweatman

Secretary

MCS:wci

Attachments

Medical University Hospital Authority Hospital Operations, Finance and Quality Committee February 12, 2015

Attendees:

Dr. Stanley Baker, Chair

Mr. Bill Baker Ms. Terri Barnes Mr. Jim Battle

Mr. William Bingham, Sr.

Dr. Harold Jablon Dr. Donald Johnson, II

Ms. Barbara Johnson-Williams

Dr. James Lemon Dr. Ragin Monteith Dr. Conyers O'Bryan Mr. Charles Schulze Dr. Murrell Smith

Mr. Michael Stavrinakis Thomas Stephenson, Esq. Dr. Charles Thomas

Dr. Charles Thomas Dr. Jim Wiseman

Dr. Cotesworth Fishburne

Dr. Cotesworth Tishout Dr. David Cole Dr. Patrick Cawley Dr. Bruce Elliott Mr. Jim Fisher Dr. Deborah Deas Ms. Lisa Montgomery

Dr. Mark Sothmann

Dr. Frank Clark

Dr. Scott Reeves Dr. Dan Handel

Dr. Danielle Scheurer

Dr. Mark Scheurer

Ms. Darlene Shaw

Mr. Matt Wain

Mr. Dennis Frazier

Mr. Steve Hargett

Annette Drachman, Esq.

Mr. Tom Anderson David McLean, Esq. Ms. Susan Barnhart

Mr. John Cooper Dr. Marilyn Schaffner Mr. Mark Sweatman

Ms. Sarah King Mr. Greg Weigle

Mr. Steve Valerio Ms. Gina Ramsey Ms. Robin Mutz

Ms. Emzee Hillard
Ms. Haley Henderson

Ms. Kayla Wu Ms. Ginny Taylor Ms. Lauren Sausser

The meeting was called to order at 8:02 am by Dr. Stanley Baker, Chair.

Item 6. Medical University Hospital Authority Status Report

Dr. Cawley reported on the following:

FY2015 Goal Performance:

Service: Dr. Cawley reported that we are currently in the red under this goal. There are many different areas that we measure patient satisfaction including adult inpatient, outpatient, pediatrics, etc. Under these subgroups, things are moving well. For the last quarter of FY14, we had the best performance on the Adult inpatient side that we've ever had at MUSC. We did slip the first quarter of FY15, so we need to work on improving those scores. Under the outpatient side, under the current quarter, we are in the green.

People: The employee and physician surveys start this Sunday, February 15 and run for a two-week. Results from this survey will be shared at the April board meeting.

Quality: Under the Ideal Care composite goal, we are green in some areas, some in yellow and some in red. Under Central Line Infections most of this is driven by the oncology unit; however, they

have had much improvement over the last quarter of FY14 so we expect this to improve. The other area that we are not doing so well on is Patient Safety Indicators which Danielle Scheurer will be reporting on in more detail.

Finance: Under the finance pillar, we are hitting green on margin. Under cash, we are still in red but we are feeling good about this and Steve Hargett will go over this in his presentation. We are still unsure about the direct cost results. There may be a data issue and Dr. Cawley will update the board at the next meeting.

Growth: Telehealth is doing very well. An updated reported on the Telehealth goal was received yesterday and all areas are now in the green.

Action: Report received as information.

Initiant Update:

Dr. Cawley gave an update on the Initiant collaborative which is made up of MUSC, Self, Greenville, McLeod, and Palmetto. The collaborative has been meeting for about nine months now and things are going fairly well. Dr. Cawley commented that there has been a little new conflict related to many members of the groups setting up new relationships with other hospitals and some of the other hospitals are bordering on some of the other Initiant members' areas. This resulted in conflict at the end of 2014, but this has been resolved to some degree and all want to continue to move forward and still want the collaborative to work. There were first-year deliverables and five-year deliverables. The only two that we haven't hit on yet are early wins from a financial perspective and a return on investment methodology. Those should be done within the next three months. From the CEO of Initiant, we are meeting are short-term goals and we are positioning for the long-term. There is still some concern around anti-trust with the five hospitals working together so anti-trust counsel has been retained.

Action: Report received as information.

Item 7. Medical University Hospital Authority Financial and Statistical Report

Steve Hargett reported on the following items:

MUHA Financial Update:

Through December 2014 our margin at 3.68% is down compared to last year at 5.95%. Deterioration for the first six months is driven mainly by salary increases; cost of drugs skyrocketing; and since we are now using Epic, which is a \$50-60 million in capital investment, we are now beginning the quick, five-year depreciation. Inpatient surgeries are up by almost 12% and outpatient surgeries almost 3% over this same time last year. Net margin of 3.71% is close to where we were last year. Days cash on hand at the end of December were at 16 days compared to 22 days at the end of January. In December, we had \$64 million in the bank; today we \$67 million in the bank which equates to approximately 21.6 days cash. Hargett reported that based on the current rolling thirteen-week financial projection, we should hit about 90 million in the bank which give us another forty days to get to the magic number of 100 million.

Steve Hargett also shared with the board some of the challenges the hospital faces in relation to Medicare Disproportionate Share (DSH). Hargett explained that Medicare DSH is an add-on to our DRG. With the ACA, states were supposed to expand Medicaid which means you would see less uninsured/charity care cases, so Medicare said hospitals would no longer need DSH so they were going to start reducing DSH

over time. Since South Carolina was one of the states that chose not to expand Medicaid and this would result in a double hit, so CMS delayed the reduction for a while. This year began the reduction of DSH but formula also changed. The pool used to be calculated one way and now due to the change to the 75/25 pool split and the high Medicaid utilization in this formula, MUHA saw an increase in DSH add-on for FY15. From FY14 to FY15, the pool is being reduced by 1.3%. Hargett commented that due to the timing of release of CMS data for FY16, MUHA will initially budget for this 1.3% reduction in our share of the pool. With knowing utilization changes for all hospital receiving Medicare DSH, it is impossible to know what the impact will be by individual hospital for the FY1 budget process.

Action: Report received as information.

Item 8. Major Purchase

Steve Hargett requested approval to purchase a pharmacy robot to replace a twenty-year piece of equipment. Cost to purchase this piece of equipment is approximately \$654,000.

Action: Recommend approval.

Item 9. Report on Quality and Patient Safety

Dr. Scheurer reported on the following primary inpatient pay for performance programs currently in play which include the Hospital Acquired Condition (HAC) program; Hospital Value Based Purchase program; and the Readmission Reduction Program. There are also four other alternative programs that are currently not mandatory but will most likely become mandatory. Dr. Scheurer also shared a depiction of how each of these programs has primarily evolved. Dr. Scheurer pointed out how this shows how over time the increase in the amount of payment at risk.

Hospital Acquired Condition (HAC) program: Program started in the 2005 with the Deficit Reduction Act that required identification of conditions that are: high cost/high volume; have higher payment when present as a secondary diagnosis; reasonably prevented by evidenced based guidelines. In 2008, CMS selected ten categories for the HAC program. In FY2014, the metrics completely changed and CMS came up with what is called a HAC penalty. This year there are two total domains, Patient Safety Indicators and central line and urinary catheter infections. Beginning next fiscal year and beyond, the percentage weight will decrease on the PSI domain and increase on the infection domain. Each year other hospital acquired infections including surgical site infections, C.Diff and staph bloodstream infections will be added to the infection domain. Our HAC opportunities are CAUTI, which we have a good plan in place and are making progress, and Patient Safety Indicators. Dr. Scheurer shared graphs depicting the results on the following PSIs: PSI 90 – Composite Patient Safety Indicator; ICU Central Line-Associate Blood Stream Infections; and ICU Catheter-Associate Urinary Tract infections.

Hospital Value Based Purchase program: In FY2013, payment reductions were implemented. The measures are a combination of: safety (similar to HAC program); process (core measures); outcome (mortality); cost (Medicare spend per beneficiary); experience (HCAHPS). Dr. Scheurer reported that MUSC received higher payments in FY14-15.

Readmission Reduction Program: In FY2016, the following conditions will be included in determining penalties: heart failure; acute MI; pneumonia; COPD; and total hip and knee replacements. In FY17, cardiac bypass (CABG) will be added. In FY14-15, MUSC received lower payments. Dr. Scheurer pointed out that the readmission penalty academic medical centers disproportionately due to the complexity of cases. Future quality risks to manage include the continued move by health care payers to move to pay for performance based on quality and value metrics.

Action: Report received as information

Item 10. Update on MUSC Physicians

No report from MUSC Physicians.

Item 11: Legislative Update

Mr. Mark Sweatman gave an update on legislative activities. Sweatman reported that the House Ways and Means will finish their full committee budget next week so we should know more then. Sweatman reported that President Cole made a great presentation to the Higher Ed Subcommittee and President Cole and Dr. Cawley made a great presentation to the Healthcare Subcommittee. Legislative items we are currently working on are telemedicine, dental school and Children's Hospital so maybe we will receive good news next week.

Action: Report received as information

Item 12: Other Committee Business

No other committee business.

CONSENT ITEM FOR APPROVAL

Item 13. Medical University Hospital Authority Appointments, Reappointments and Delineation of Privileges

The committee reviewed the appointments, reappointments and delineation of privileges requests for the months of November and December 2014. These have been recommended for approval by all appropriate committees.

Action: Recommend approval

CONSENT ITEMS FOR INFORMATION

Item 14. Medical Executive Committee Minutes

The Medical Executive Committee minutes from November and December 2014 were reviewed by the committee.

Action: Received as information

Item 15. Medical Center Contracts and Agreements

Contracts and agreements entered into since the last meeting of the board were presented for information.

Action: Received as information

There being no further business, the committee adjourned at 8:50 a.m.

Respectfully Submitted,

Jane L. Scutt

Medical University Hospital Authority Physical Facilities Committee February 12, 2015 Minutes

Board Members Attending:

Mr. William H. Bingham, Sr., Chair

Dr. Stanley C. Baker, Jr.

Mr. William A. Baker, Jr.

Ms. Terri R. Barnes

Mr. James A. Battle

Dr. Harold Jablon

Dr. Donald R. Johnson II

Ms. Barbara Johnson-Williams

Dr. James Lemon

Dr. Ragin C. Monteith

Dr. E. Conyers O'Bryan, Jr.

Mr. Charles W. Schulze

Dr. G. Murrell Smith, Sr.

Mr. Thomas L. Stephenson

Mr. Michael E. Stavrinakis

Dr. Charles B. Thomas, Jr.

Mr. Bingham called the meeting to order.

REGULAR Items

<u>Item 16</u> <u>Facilities Procurements/Contracts Proposed.</u>

Mr. Dennis Frazier presented the following for approval:

- Budget increase for OR 2 and OR 5. Increase from \$990,000 to total project cost of \$1.34M
- Right of Way Easement to Charleston County for the construction, improvement, operation and maintenance of a public road know as SC Route 30 (Calhoun Street) and S-550 (Courtenay Drive) as part of the RoadWise Project.

Recommendation of Committee: A motion was made, seconded and unanimously voted to approve the procurements/contracts.

Item 17 Update on Projects.

Mr. Frazier provided an update on the following projects: Medical Waste Treatment; Rutledge Tower Emergency Electrical Power Generator Replacement and OR's 2 and 5.

Recommendation of Committee: Received as information.

Item 18 Other Committee Business. None

CONSENT Items for Information:

Item 19 Facilities Contracts Awarded

The facilities contracts since the last board meeting were presented for information.

Recommendation of Committee: That this report be received as information.

With no further business, the meeting was adjourned.

Respectfully submitted,

Celeste Jordan

Medical University Hospital Authority Children's Hospital Committee February 12, 2015 Minutes

Attendees:

Dr. Donald Johnson, II, Chair

Mr. Bill Baker Ms. Terri Barnes Mr. Jim Battle

Mr. William Bingham, Sr.

Dr. Harold Jablon Dr. Stanley Baker

Ms. Barbara Johnson-Williams

Dr. James Lemon
Dr. Ragin Monteith
Dr. Conyers O'Bryan
Mr. Charles Schulze
Dr. Murrell Smith
Mr. Michael Stavrinakis
Thomas Stephenson, Esq.
Dr. Charles Thomas

Dr. Jim Wiseman
Dr. Cotesworth Fishburne

Dr. David Cole
Dr. Patrick Cawley
Dr. Bruce Elliott
Mr. Jim Fisher
Dr. Deborah Deas

Ms. Lisa Montgomery

Dr. Mark Sothmann

Dr. Frank Clark

Dr. Scott Reeves

Dr. Dan Handel

Dr. Danielle Scheurer

Dr. Mark Scheurer

Ms. Darlene Shaw

Mr. Matt Wain

Mr. Dennis Frazier

Mr. Steve Hargett

Annette Drachman, Esq.

Mr. Tom Anderson

David McLean, Esq.

Ms. Susan Barnhart

Mr. John Cooper

Dr. Marilyn Schaffner

Mr. Mark Sweatman

Ms. Sarah King

Mr. Greg Weigle

Mr. Steve Valerio

Ms. Gina Ramsey

Ms. Robin Mutz

Ms. Emzee Hillard

Ms. Haley Henderson

Ms. Kayla Wu

Ms. Ginny Taylor

Ms. Lauren Sausser

The meeting was called to order at 8:57am by Dr. Donald Johnson, Chair.

Item 20. Operations and Facilities Report

Matt Wain presented the external view of the new Children's Hospital / Women's Pavilion. The main differences will be the focus on family centered care and open area on the 7th and 8th floors. This allows for green space and open courtyard. The design planning will continue to move forward. Views of new hospital from ground level and lateral view were shown.

Dennis Frazier discussed the project flow of the new hospital. Schedule currently on track with construction beginning early next year and completion in 2019. Next step is to take design to the Charleston Board of Architectural Review where they will review the exterior, materials, height restraints and how the building sits on the property.

Dennis requested approval on design exterior for submittal to Charleston Board of Architectural Review and requested approval to continue project with filing HUD application.

ACTION: Approved

Dr. Mark Scheurer discussed the design development phase. All 20 teams which include physicians, nurses and families have agreed on stacking diagram which was reviewed. Teams are now reviewing the design development that takes a look inside in rooms to decide the flow which will be complete in May.

Dr. Mark Scheurer discussed the strategic shift of Children's Brand from MUSC Children's Hospital to MUSC Children's Health. Reasons for the shift are:

- Brand alignment mirrors organizational alignment
- Aligned with planned growth of pediatric services
- Aligned with MUSC Health affiliation strategy and movement towards population health
- Supports brand extension in the community
- Supports our unique position as an advocate for children's health and wellness in the region

Next Steps:

- Further engagement of MUSC providers
- Presentation to SC Children's Hospital Collaborative
- Development of branding/marketing campaign
- Full presentation to the Board for approval in April

Discussion on any possible pushback from the South Carolina Children's Hospital Collaborative.

Dr. Mark Scheurer provided a communications update.

- Communications Subcommittee Goals:
 - o Raise awareness of the value that a top-ranked children's hospital brings to South Carolina's children
 - o Raise the \$50M+ needed to support this transformational care
 - o Engage community/stakeholders in building the vision
 - o Elevate the brand of beyond "the walls" of the facility
 - o Align key messages throughout comprehensive plan
 - o Strengthen strategic hire efforts by sharing the vision for the children's and women's clinical delivery systems
 - o Align internal audiences
- Fundraising strategic recommendations:
 - o Leverage break through moment in time
 - o Support and align the University strategic vision Imagine 2020
 - O Align messaging with overall brand message
- The fundraising identity and campaign theme used with MUSC Children's Hospital logo were reviewed as well the fundraising identity for construction (funding campaign elements as seen on construction site wall; orange accent color ties to MUSC Health brand identity) and fundraising identity for collateral (potential fundraising collateral materials; stationery, folder, buttons, pencils).
- Fundraising Deliverables and Timeline:
 - o February 17th Darius Rucker Event
 - Press Event Media Toolkits
 - CHWP Fact sheet
 - Social media campaign launch (#IamPossible #I'mChangingWhat'sPossible)

- Launch Imagine What's Possible Theme for campaign
- MUSCkids.org homepage modified with links to campaign
- Go Live for Campaign Landing Page
- Align CH fund video with Imagine What's Possible
- Patient Identified
- Pre-sell in news center
- Fundraising Campaign: "Imagine" Strategic direction for messaging not final

 creative thought utilized to develop the patient testimonial campaign.

Jim Fisher provided a Philanthropy Update. Children's Hospital and Women's Pavilion Building Campaign progress as of February 6, 2015 was reviewed. Good news is it has been a very good two months since December board meeting. In December the total fundraising was approximately \$6.2M, now it is over \$14M. The pyramid of giving was reviewed that included the \$5M Boeing gift and the doubled number of \$1M gifts.

Jim Fisher further discussed the Darius Rucker event. Daruis has only done this concert five times and it has always been for the Children's Hospital. One positive is he has over a million followers on social media which gives MUSC a lot of exposure.

Item 21. Women's Services Update No update

Item 22. Clinical Overview No update

Item 23. Children's Hospital Financial ReportNothing to report

Item 24. Development Activity Report No update

Item 25. Other Committee Business

None

There being no further business, the committee adjourned at 9:17am.

Respectfully Submitted,

Angie Baldwin

Medical University Hospital Authority Audit Committee February 12, 2015 Minutes

Board Members Attending:

Mr. Thomas L. Stephenson, Chair

Dr. Stanley C. Baker

Mr. William A. Baker. Jr.

Ms. Terri R. Barnes

Mr. James A. Battle

Mr. William H. Bingham, Sr.

Dr. Harold Jablon

Dr. Donald R. Johnson II

Ms. Barbara Johnson-Williams

Dr. James Lemon

Dr. Ragin C. Monteith

Dr. E. Conyers O'Bryan, Jr.

Mr. Charles W. Schulze

Dr. G. Murrell Smith, Sr.

Mr. Michael E. Stavrinakis

Dr. Charles B. Thomas, Jr.

Mr. Stephenson called the meeting to order.

REGULAR Items

Item 26. Legal Office Annual Report.

Ms. Annette Drachman provided an annual report on the activities of the legal office. She reviewed the trends of medical malpractice claims opened and money paid to patients. She reported that Insurance Reserve Fund premiums have increased due to increase in the number of employees and services and property values as well as increased business interruption insurance. However, the premiums remain low for the coverage that the institution has.

Recommendation of Committee: Received as information.

Item 27. Compliance Update.

Ms. Reece Smith provided the annual enterprise compliance update. She reported 92 HIPAA breaches for the calendar year 2014. Most of the breaches come from the medical records area; however, there are over 1 million going out each year so 92 is a relatively small number of breaches. There is on-going compliance training and privacy rounding to keep breaches low.

Recommendation of Committee: Received as information.

Item 28. Information Security (IS) Update.

Dr. Frank Clark reported John Rasmussen has been hired as the new Chief Information Security Officer. He is coming from the Oregon Health Sciences University March 1. His focus will be on the soft components of the cyber security network. Security breaches can be very expensive and everyone is encouraged to help with security by avoiding phishing attacks.

Recommendation of Committee: That the report be received as information

Item 29. Report of the Office of Internal Audit.

Ms. Susan Barnhart had distributed the results of recent internal audit reports and there being no questions, the reports were received as information.

Recommendation of Committee: That the report be received as information

<u>Item 30.</u> <u>Other Committee Business.</u> None

With no further business, the meeting was adjourned.

Respectfully Submitted,

Celeste Jordan