

November 6, 2023

The regular meeting of the Board of Texas County Commissioners was called to order by Ted Keeling, Chairman. Dolan Sledge, Levi Bickford, members and Wendy Johnson, County Clerk were present. Bill Ermann, CEO, Tano Tovilla, VP of Operations and Provider Services, Sandra Montes, VP of Finance, Ray Davis, VP of Patient Care, Bea Rosales, VP of HR, Housekeeping, Dietary Services, Materials Management of Memorial Hospital of Texas County, Mike Boring, Jack Strain, Robert Carter, John Reid, Spencer Leiter, Board of Trustees for MHTC, Grant Wadley, Guymon Fire Chief, Tonde Christian, Emergency Manager, Matt Boley, Sheriff, Erica Maddox, Chamber of Commerce, and Dr. Emmanuel Barias, were also present.

The agenda was filed on November 3, 2023, at 10:00 a.m. in compliance with the Open Meeting Act.

Keeling verified we were in compliance with the Open Meeting Act with all board members present.

Motion by Bickford, second by Sledge to approve the following claims and purchase orders for payment.

GENERAL: 241987, 695, **\$223.12**, District Attorney, reimbursement for supplies; 240610, 711, **\$314.00**, Relex Inc DBA Lexis Nexis, October charges; 242050, 718, **\$12.00**, Water Barrel, water; 242024, 710, **\$59.20**, Jenny Pena, meal reimbursement; 242022, 706, **\$412.68**, Colleen Michael, travel reimbursement; 242023, 712, **\$72.58**, Susanna Ritter, meal reimbursement; 241840, 697, **\$107.00**, Hampton Inn Shawnee, lodging; 241990, 701, **\$89.73**, Jennifer Johnson, travel reimbursement; 240043, 708, **\$900.00**, Mungias Heating & Air Cond Inc, services; 240648, 713, **\$360.75**, Sirchie, supplies; 241368, 702, **\$280.00**, Long & McKinnon Inc, renewal notary stamp; 241994, 703, **\$1406.35**, Mathis Oil Co Inc, fuel; 241787, 715, **\$248.00**, State of Oklahoma, certifications; 240145, 716, **\$606.82**, Tri County Electric Coop Inc, utilities; 240171, 694, **\$75.00**, Tonde Christian, phone stipend; 241435, 709, **\$25.00**, Panhandle Regional Planning Commission, 2023 Prep Conference; 241983, 696, **\$211.15**, Fast Lane Tires LLC, supplies & services; 241984, 692, **\$491.25**, A&D Pest & Lawn Spray Service LLC, services; 242032, 700, **\$925.75**, Arleen James, October travel; 242041, 699, **\$34.45**, Britt Hicks, October travel; 242034, 705, **\$674.26**, Lisa McBride, October travel; 242035, 707, **\$689.70**, Ashley Ming, October travel; 242033, 698, **\$423.13**, Britt Hick, September travel; 242031, 717, **\$190.23**, Tri County Electric Coop Inc, utilities.

DISTRICT #1: 241633, 694, **\$93.00**, Seward County Landfill & Waste Management Services, roll off; 241165, 683, **\$75.00**, Darrell Edwards, phone stipend; 241777, 690, **\$1019.20**, McConnell & Associates Corp, supplies; 241889, 687, **\$150.07**, Hooker Hardware & Auto LLC, parts; 242016, 695, **\$452.26**, SPC Office Products, supplies; 242030, 692, **\$265.00**, New Iron & Metal of Liberal LLC, parts; 241025, 691, **\$595.99**, MSC Industrial Supply, parts; 242037, 689, **\$245.21**, Keating Tractor & Equipment Inc, parts; 241811, 685, **\$1171.56**, Forestry Suppliers Inc, parts; 241883, 682, **\$70.00**, The Compliance Resource Group Inc, testing; 240120, 681, **\$109.60**, City of Hooker, utilities; 241867, 684, **\$192.50**, Ergon Asphalt & Emulsions Inc, demurrage; 241885, 686, **\$13,967.63**, Fronk Oil Company Inc, fuel.

HIGHWAY D1 CBRI: 240969, 6, **\$6092.25**, Circuit Engineering Dist. #8, crack seal.

DISTRICT #2: 241967, 707, **\$11.79**, Kelsey Shroul, meal reimbursement; 241977, 702, **\$11.03**, Hayden Danner, meal reimbursement; 241819, 703, **\$442.50**, Ekkel Diesel Repair, repairs; 241874, 708, **\$2379.57**, Warren Cat, supplies; 241463, 700, **\$138.18**, City of Guymon, utilities; 241715, 711, **\$2044.69**, Yellowhouse Machinery Co of Ok, repairs.

DISTRICT #3: 241886, 712, **\$391.82**, Levi Bickford, travel reimbursement; 241989, 714, **\$77.93**, Texhoma Public Works Authority, utilities; 241876, 717, **\$40.17**, West Texas Gas Inc, utilities.

COUNTY CLERK LIEN FEE: 240023, 23, **\$52.00**, Advanced Water Solutions LLC, services.

FREE FAIR: 242038, 14, **\$507.85**, City of Guymon, utilities.

HEALTH MILL LEVY: 241727, 117, **\$336.44**, Sharon Robbins, travel; 241793, 118, **\$91.25**, Shine Early Program, supplies; 241988, 119, **\$20.82**, SPC Office Products, supplies; 242021, 120, **\$1353.08**, Tri County Electric Coop Inc, utilities; 241694, 113, **\$52.00**, Advanced Water Solutions LLC, cooler; 241792, 116, **\$171.92**, Guymon Daily Herald, publication; 241690, 115, **\$1040.00**, Blanca & Sebastian Casas, services; 241985, 121, **\$225.00**, Woodward County Health Dept, building rental.

SHERIFF SERVICE FEE: 241685, 57, **\$37.50**, Goodwell Car Wash, services; 241964, 60, **\$76.55**, Tri County Electric Coop Inc, utilities; 241868, 59, **\$8331.42**, Texas County 911 Trust Authority, services; 241986, 58, **\$39.99**, Sound Service/Radio Shack Dealer, parts.

HOSPITAL SALES TAX: 242067, 14, **\$39,000.00**, Memorial Hospital of Texas County, November payroll; 242058, 12, **\$16,523.75**, Wendling, Noe, Nelson & Johnson, LLC, services; 242059, 13, **\$39,000.00**, Memorial Hospital of Texas County, October payroll.

60% JAIL SALES TAX: 241734, 283, **\$2849.63**, Security Transport Services Inc, services; 241966, 285, **\$3722.39**, Tri County Electric Coop Inc, utilities; 241706, 286, **\$6632.22**, Turn Key Health Clinic LLC, October services.

Aye: Bickford, Sledge, Keeling. Nay: none.

Motion by Sledge, second by Bickford to approve blanket purchase orders for usage.

GENERAL: 242068, Mathis Oil Co Inc, \$400.00; 242069, Mathis Oil Co Inc, \$400.00; 242070, Unifirst Corporation, \$330.00; 242071, SPC Office Products, \$500.00; 242072, Tisdal & O'Hara PLLC, \$10,000.00.

DISTRICT #1: 242073, Hooker Hardware & Auto LLC, \$1200.00; 242074, Hooker Hardware & Auto LLC, \$400.00; 242075, Keating Tractor & Equipment Inc, \$800.0; 242076, Mayfield Paper Company, \$400.00; 242077, NKC Tire, \$1000.00; 242078, Prairiefire Coffee Roasters, \$300.00; 242079, Southern Office Supply Inc, \$200.00; 242080, Unifirst Corporation, \$1200.00.

DISTRICT #2: 242081, Guymon Tire, \$2000.00; 242082, O'Reilly Auto Parts, \$1000.00.

DISTRICT #3: 242083, A&I Parts Center, \$300.00; 242084, Baber Supply Inc, \$3000.00; 242085, Guymon Tire, \$3000.00; 242086, Linde Gas & Equipment Inc, \$600.00; 242087, Lumber Mart, \$300.00; 242088, Texhoma Supply LLC, \$3000.00; 242089, Texhoma Wheat Growers Inc, \$1000.00; 242090, Unifirst First Aid & Safety, \$200.00; 242091, Unifirst Corporation, \$1500.00; 242092, Warren Cat, \$5000.00; 242093, Western Equipment LLC, \$5000.00; 242094, Yellowhouse Machinery Co of Ok, \$5000.00.

60% SALES TAX: 242095, Sysco Oklahoma, \$1250.00; 242096, US Foodservice Inc, \$1250.00; 242097, Affiliated Foods, \$1250.00.

Aye: Bickford, Sledge, Keeling. Nay: none.

Motion by Bickford, second by Sledge to approve the minutes of the previous meeting as written. Aye: Bickford, Sledge, Keeling. Nay: none.

Christian reported that the Safety Meetings will be the last week of the month. She is going to take a tour of Seaboard. And Wednesday they are coming out to look at the building to see if they can hold their staging programs here.

There was no Transfer of Appropriations to be approved.

Motion by Bickford, second by Sledge to approve the following officer's reports and cash book summary for the month of October subject to audit: Judyth Campbell, Assessor - \$78.00, Matt Boley, Sheriff - \$2,014.05, Health Department - \$425.00, Aimee Midkiff, Treasurer - \$3,986.13, Wendy Johnson, County Clerk - \$25,860.85, 911 - \$4,815.89. Aye: Bickford, Sledge, Keeling. Nay: none.

Motion by Sledge, second by Bickford to approve the Treasurer's Monthly Fee Report for the month of October in the amount of \$1,391.75. Aye: Bickford, Sledge, Keeling. Nay: none.

Steve Smith, Controller at MHTC joined the meeting.

Motion by Sledge, second by Bickford to approve the Sheriff's Report for Board of County Prisoners for the month of October consisting of 1,424-man day. Aye: Bickford, Sledge, Keeling. Nay: none.

Motion by Bickford, second by Sledge to approve the claim to the state for reimbursement of salary for the Election Board for the month of October in the amount of \$3,375.00. Aye: Bickford, Sledge, Keeling. Nay: none.

Motion by Sledge, second by Bickford to approve the Oklahoma Economic Development Authority REAP Reimbursement for Hardesty Fire in the amount of \$759.80. Aye: Bickford, Sledge, Keeling. Nay: none.

Motion by Bickford, second by Sledge to approve **Resolution #88-23-24**

RESOLUTION FOR DISPOSING OF EQUIPMENT

WHEREAS, in compliance with 19 O.S. §§ 339, & 421, the Board of County Commissioners of Texas County, Oklahoma, are required and have power to make all orders respecting the property of the county, and to do and perform such other duties and acts as may be required by law and

WHEREAS, the Board of County Commissioners of Texas County, Oklahoma has under its management and control an item of equipment described as follows:

1976 TYPEWRITER DESK 3 DRAWER #120105.01 DATE ACQUIRED 6/1/76 \$300.00

AND, upon proper and careful consideration, find that the above equipment is obsolete and not economical to continue to use for county purposes.

THEREFORE, after due consideration and deeming it to be for the best interest of County, the Board of County Commissioners hereby orders the above described property.

X JUNKED

And that the title to the same be transferred by the Chairman of the Board of County Commissioners upon receipt of the above amount by the County Treasurer.

Passed and approved in open meeting this 6th day of November 2023.

ATTEST: s/Wendy Johnson, County Clerk Texas County Oklahoma

SEAL Chairman, s/Ted Keeling
 Member, s/Dolan Sledge
 Member, s/Levi Bickford

Resolution #89-23-24

RESOLUTION FOR DISPOSING OF EQUIPMENT

WHEREAS, in compliance with 19 O.S. §§ 339, & 421, the Board of County Commissioners of Texas County, Oklahoma, are required and have power to make all orders respecting the property of the county, and to do and perform such other duties and acts as may be required by law and

WHEREAS, the Board of County Commissioners of Texas County, Oklahoma has under its management and control an item of equipment described as follows:

1980 SUPPLY CABINET TAN #120109.03 DATE ACQUIRED 7/1/80 \$50.00

AND, upon proper and careful consideration, find that the above equipment is obsolete and not economical to continue to use for county purposes.

THEREFORE, after due consideration and deeming it to be for the best interest of County, the Board of County Commissioners hereby orders the above described property.

X JUNKED

And that the title to the same be transferred by the Chairman of the Board of County Commissioners upon receipt of the above amount by the County Treasurer.

Passed and approved in open meeting this 6th day of November 2023.

ATTEST: s/Wendy Johnson, County Clerk Texas County Oklahoma

SEAL Chairman, s/Ted Keeling
 Member, s/Dolan Sledge
 Member, s/Levi Bickford

Resolution #90-23-24

RESOLUTION FOR DISPOSING OF EQUIPMENT

WHEREAS, in compliance with 19 O.S. §§ 339, & 421, the Board of County Commissioners of Texas County, Oklahoma, are required and have power to make all orders respecting the property of the county, and to do and perform such other duties and acts as may be required by law and

WHEREAS, the Board of County Commissioners of Texas County, Oklahoma has under its management and control an item of equipment described as follows:

1978 CALCULATOR SHARP #120203.01 DATE ACQUIRED 4/1/78 \$145.00

AND, upon proper and careful consideration, find that the above equipment is obsolete and not economical to continue to use for county purposes.

THEREFORE, after due consideration and deeming it to be for the best interest of County, the Board of County Commissioners hereby orders the above described property.

X JUNKED

And that the title to the same be transferred by the Chairman of the Board of County Commissioners upon receipt of the above amount by the County Treasurer.

Passed and approved in open meeting this 6th day of November 2023.

ATTEST: s/Wendy Johnson, County Clerk Texas County Oklahoma

SEAL Chairman, s/Ted Keeling
 Member, s/Dolan Sledge
 Member, s/Levi Bickford

Resolution #91-23-24**RESOLUTION FOR DISPOSING OF EQUIPMENT**

WHEREAS, in compliance with 19 O.S. §§ 339, & 421, the Board of County Commissioners of Texas County, Oklahoma, are required and have power to make all orders respecting the property of the county, and to do and perform such other duties and acts as may be required by law and

WHEREAS, the Board of County Commissioners of Texas County, Oklahoma has under its management and control an item of equipment described as follows:

1980 FILING CABINET #120104.06 DATE ACQUIRED 7/1/80 \$50.00

AND, upon proper and careful consideration, find that the above equipment is obsolete and not economical to continue to use for county purposes.

THEREFORE, after due consideration and deeming it to be for the best interest of County, the Board of County Commissioners hereby orders the above described property

X JUNKED

And that the title to the same be transferred by the Chairman of the Board of County Commissioners upon receipt of the above amount by the County Treasurer.

Passed and approved in open meeting this 6th day of November 2023.

ATTEST: s/Wendy Johnson, County Clerk Texas County Oklahoma

SEAL Chairman, s/Ted Keeling
 Member, s/Dolan Sledge
 Member, s/Levi Bickford

Aye: Bickford, Sledge, Keeling. Nay: none.

Motion by Sledge, second by Bickford to approve **Resolution #92-23-24**

**A RESOLUTION DISSOLVING DORMANT ACCOUNTS AND
 TRANSFERRING MONIES TO DESIGNATED ACCOUNTS**

WHEREAS, The Texas County Clerk and Texas County Treasurer have identified several accounts maintained by Texas County which have been inactive for a number of years and for which there is no record of the purpose of the accounts (the "Dormant Accounts"); and

WHEREAS, The source of the funds contained within the Dormant Accounts is unknown, and the funds currently in the Dormant Accounts are not being used for any purpose of Texas County and

WHEREAS, The Oklahoma State Auditor and Inspector has recommended that Texas County dissolve said accounts and consolidate the funds into designated accounts within the same fund; and

WHEREAS, The Oklahoma State Auditor and Inspector has recommended that Texas County dissolve said accounts and consolidate the funds into designated accounts within the same fund; and

WHEREAS, The Board of County Commissioners has determined that such dissolution and consolidation would advance the efficient and transparent operation of Texas County government.

NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF COUNTY COMMISSIONERS OF TEXAS COUNTY, STATE OF OKLAHOMA;

SECTION 1, That the funds contained within the Dormant Accounts listed in "Schedule A," attached hereto, shall be transferred to the designated accounts as listed on "Schedule A".

SECTION 2, That upon completion of the funds transfer, the "Dormant Accounts" listed in "Schedule A" shall be dissolved.

PASSED AND APPROVED this 6th day of November 2023.

ATTEST: (SEAL)

s/Ted Keeling, Chairman

s/Dolan Sledge, Member

s/Levi Bickford, Member

s/Wendy Johnson

County Clerk

"Schedule A" to Resolution #92-23-24

Unencumbered Appropriation Account Balances as of November 6, 2023

Account #	Name of Account	Office/Dept	Unencumbered Balance
1217-2-1800-1224	Matching	Juv. Det.	\$ 1,025.00
1217-2-1800-4110	Capital Outlay	Juv. Det.	\$ 2,493.89
1217-2-1800-1210	FICA	Juv. Det.	\$ 15.61
1217-2-1800-1222	Hospitalization	Juv. Det.	\$ 116.38
1217-2-1800-2005	M&O	Juv. Det.	\$14,884.46
1217-2-1800-1130	Part Time	Juv. Det.	\$ -
1217-2-1800-1110	Personal Services	Juv. Det.	\$ 184.88
1217-2-1800-1221	Retirement	Juv. Det.	\$ 3.73
1217-2-1800-1310	Travel	Juv. Det.	\$ 1,360.12
1217-2-1800-1233	Unemployment	Juv. Det.	\$ 2,032.68
1217-2-1800-1234	Workers Comp.	Juv. Det.	\$ 7,513.84
1217-2-1800-2065	Property & Liability	Juv. Det.	\$ 1,305.10

Appropriations Moved to Dissolving Accounts as of November 6, 2023

Account #	Name of Account	Office/Dept	Unencumbered Balance
	General Revenue		\$30,935.69

Aye: Bickford, Sledge, Keeling. Nay: none.

Motion by Bickford, second by Sledge to approve **Resolution #93-23-24**

Be it Resolved that Texas County shall observe the following holidays for 2024:

New Year's	January 1
Martin Luther King Jr.	January 15
President's Day	January 19
Good Friday	March 29
Memorial Day	May 27
Independence Day	July 4
Labor Day	September 2
Columbus Day	October 14
Veterans Day	November 11
Thanksgiving	November 28 & 29
Christmas	December 25 & 26

Passed this 6th of November 2023.

Attest (SEAL)

s/Ted Keeling, Chairman
Board of County Commissioners

s/Wendy Johnson, County Clerk

Aye: Bickford, Sledge, Keeling. Nay: none.

Motion by Sledge, second by Bickford to approve **Resolution #94-23-24**

Be it resolved that the Board of County Commissioners' meeting dates shall be as follows for 2024:

January	2, 8, 16, 22, 29
February	5, 12, 20, 26
March	4, 11, 18, 25
April	4, 8, 15, 22, 29
May	6, 13, 20, 28
June	3, 10, 17, 27
July	1, 8, 15, 22, 29
August	5, 12, 19, 26
September	3, 9, 16, 23, 30
October	7, 15, 21, 28
November	4, 12, 18, 25
December	2, 9, 16, 23, 30

Passed this 6th of November 2023.

Attest (SEAL)

s/Ted Keeling, Chairman
Board of County Commissioners

s/Wendy Johnson, County Clerk

Aye: Bickford, Sledge, Keeling. Nay: none.

Motion by Sledge, second by Bickford to approve **Resolution #95-23-24**

**A RESOLUTION TO APPROVE THE EXPENDITURE
OF CERTAIN OPIOID SETTLEMENT PROCEEDS**

WHEREAS, pharmaceutical opioids have harmed Texas County, Oklahoma. This harm has caused and placed large financial burdens on the Texas County Sheriff's Office, the Texas County EMS Departments, and required the need of paying for the services of Dr. Calmes to provide counseling.

WHEREAS, Texas County has settled opioid claims against the following entities: Johnson & Johnson, Janssen Pharmaceuticals, Inc., Ortho-McNeil Janssen Pharmaceuticals, Inc., Janssen Pharmaceuticals, Inc., McKesson Corporation, Cardinal Health Inc, AmerisourceBergen, Teva, Allergan, CVS, Walgreens, and Walmart.

WHEREAS, Texas County has already received a portion of the settlement proceeds and will continue receiving settlement proceeds pursuant to distribution agreements for years to come.

WHEREAS, Texas County, pursuant to the settlement agreements, intends to use the settlement proceeds for reimbursement for monies spent or to be spent on the Texas County Sheriff's Office, the Texas County EMS Departments, and on the services provided by Dr. Calmes that have been in part directly attributable to pharmaceutical opioids.

WHEREAS, The above-referenced opioid settlement proceeds are to be used for reimbursement of the following expenditures:

First: Expenditures for Dr. Calmes since 10/1/2018 through 10/31/2023: \$62,447.18;

Second: Expenditures for Texas County EMS Departments since 01/01/2017 through 06/30/2023: \$74,194.66; and

Third: Expenditures for doctor and nursing services contracted by the Texas County Sheriff's Office since 06/30/2017 through 06/30/2023: \$243,673.38.

THEREFORE, it was moved and seconded that the following resolutions be adopted.

THEREFORE, BE IT RESOLVED that Texas County, Oklahoma elects to and approves that the above-referenced opioid settlement proceeds are to be used for reimbursement of the following expenditures:

First: Expenditures for Dr. Calmes since 10/1/2018 through 10/31/2023: \$62,447.18;

Second: Expenditures for Texas County EMS Departments since 01/01/2017 through 06/30/2023: \$74,194.66; and

Third: Expenditures for doctor and nursing services contracted by the Texas County Sheriff's Office since 06/30/2017 through 06/30/2023: \$243,673.38.

The Board of County Commissions of Texas County, Oklahoma, adopted the above resolution on the 6th day of November, 2023.

ATTEST: (SEAL) *s/Ted Keeling, Chairman*
s/Dolan Sledge, Member
s/Wendy Johnson
 County Clerk *s/Levi Bickford, Member*

Aye: Bickford, Sledge, Keeling. Nay: none.

Motion by Bickford, second by Sledge to approve the Agreement between Central Salt and Texas County for the purchase of Bulk Deicing Salt for \$84.46 per ton plus fuel surcharge. Aye: Bickford, Sledge, Keeling. Nay: none.

Dr. Hianto Te and Dr. Martin Batista joined the meeting.

Motion by Sledge, second by Bickford to approve the Key System and PBX Sales Contract between Panhandle Telecommunication Systems, Inc. and Texas County for Telephone System as approved by the District Attorney. Aye: Bickford, Sledge, Keeling. Nay: none.

Motion by Sledge, second by Bickford to approve the Managed services Agreement between PTCI and Texas County for Services as approved by the District Attorney. Aye: Bickford, Sledge, Keeling. Nay: none.

Wadly reported that we are not in the criteria of a Burn Ban yet, but we are going to be under Red Flag Warning tomorrow and the next few days.

Judyth Campbell, Assessor joined the meeting.

Dr. Batista

As a citizen, taxpayer and as a physician of Texas County, I am personally opposed to the proposed tax increase. On account of my objecting to the proposed plan of the hospital board and the hospital administration in how they're going to pay for the \$15 million bond in the future, what it's going to go to when the last year that I've been chief of staff, I've been telling them from the beginning of time not to recruit physicians without bringing it to the attention of the physicians who work here. So, to our dismay, the administration hires 2 hospitalists without interviewing us and without giving us a chance to interview them. They interview and hire a surgeon without getting it to pass through us. They interview and hire an orthopedic surgeon without letting it pass through the physician. So, all that money has been wasted, in my humble opinion, only because

the administration will not allow the doctors to get involved in the process. We've been here longer than the administration has been here, and they yet consider us. I personally told Bill Ermann after he hired that first hospitalist and I understand there was a commission paid for that hiring that I was not good with, that we were opposed to that kind of assistance. He does it again and again and again, I have a problem with that considering the plan of the hospital. We're going to recruit physicians and we're going to let these recruits stay in town for more than 15 years, handle everything, pay for everything, use the MRI and use the CT scan. That's the plan of this administration, ignoring the fact that six physicians have been here, loyally admitting taking care of their patients over all these years, and they expect us to just give them our patients to these physicians. Who will not stay? I mean, we've had doctor Quadrado and more. I've been here for so long. The hospital has been unable to recruit any physician who lasted more than 15 years since doctor Hianto Te I was not recruited by the hospital. Lim was not recruited by the hospital. Barias was recruited by me. The last successful recruit of this hospital is Hianto and Debbie Te and they got a guarantee for a few years, and then that's it. Over here we've been paying these people, all these physicians and not learning a lesson. We recruit them and I mean they don't get us involved and yet they expect us to shower them with all our patients. These are not industrious physicians who stay here for as little time as they want or as they can and see as few patients as they can, I mean they can get away with it, so there's no hunger in it so as far as these recruits are concerned. #2 MRI, I just saw it. You're going to pay a lawyer \$25,000. We were banking to partner with the community, here's an MRI. We're going to send patients to them. That was 2020. Bill Ermann was just brand new, so it's not really his fault this time. But, I mean, we were telling them we know which patients use the MRI. Why don't you use it here? Now, this is a lawsuit that we'll probably lose anyway. But anyway, we're again asking you, you the Commissioners, for \$20,000 so I'm just here to tell you that I am philosophically opposed to the idea of just throwing away my money. It's not the county commissioner's money, it's the taxpayer's money. I understand more than \$3 million you've given the hospital from the beginning of the year, over \$3,000,000 for what we're going to ask for \$15,000,000 more. We're throwing away too much good money towards something that has not worked.

Dr. Barias

I was asked by Casey to be here today and from a point of view of the citizen I wrote my spiel. We are here today to discuss the future of the hospital amidst the backdrop of failed policies and business plans. The hospital is currently failing as a business and is seeking financial assistance from citizens of Texas County through a bond (higher property taxes) and an increase in sales tax. I want to address this as a community physician, a former hospital administrator, and small business owner. AS COMMUNITY PHYSICIAN, Before I begin, I want to give context to the role of physicians in the hospital organization. We have heard people- including hospital administrators, commissioners and hospital board members say that the management and financial issues of the hospital is because of the doctors not supporting the hospital. It should be noted here that doctors volunteer as medical staff in the hospital. We volunteer time and expertise to provide medical direction. Without our medical expertise, the hospital cannot possibly run its business and comply with state and federal regulations. Community physicians also are critical to the hospital in that they refer private patients for services including the ER. Not every doctor in our community is involved with MHTC- only a few who have remained to volunteer as active staff. As Active Staff, our responsibility ends at serving at hospital medical committees. However, the Administration is blaming the Community Physicians for not admitting patients. This is actually

inaccurate. Do you know that the hospital administration has implemented a system that refers patients for admission under their employed hospitalists? Hospitalists are employed physicians taking care of admitted patients, they do not have their own clinics nor private patients. They created this system so that they can charge both Professional Fee and Technical Fee per admission. If a Community Physician admits, the hospital can only collect technical fee. With this hospitalist system, when Community Physicians send their patients to the ER for admission, the in-house hospitalist physician admits the patients under their name, thereby omitting the name of the referring Community Physician. This is why you don't see our names listed as admitting physicians. Reports on admitting physician name will not provide you an accurate picture. And despite this fact and the fact that community physicians are important partners in the success of the hospital, the current hospital leadership continued to blame and alienate them. If I was running a business, why would I blame my customers? Can I say that the reason I am failing is because those customers do not cooperate? If I had a business and I was looking at its poor performance, what would I do if my hired manager defended themselves by saying, "I would have been a success if I had customers. It is the customer's fault!". That sounds ludicrous, doesn't it? By blaming the community physicians, the current administration is saying the same thing: "If I had more customers, I would have been more successful". This seems to be the CEO's job. AS A FORMER HOSPITAL ADMINISTRATOR, speaking as a former hospital administrator, let me talk simply about basic business management and executive performance. A CEO is hired to run the business of the hospital, he/she is responsible for executing a viable business plan. If the CEO fails to run the hospital viably, then we must address this poor performance. The board must address this incompetence. This current hospital administration has indisputably implemented a failed growth plan, a failed restructuring plan and now an unclear path forward. To be more specific: This administration used additional funding to fund its "growth plan" from a sales tax increase in 2019. Even with additional COVID funding and the sales tax revenues, this plan has not shown to be viable. The growth plan included "hiring" specialists. These specialists were eliminated this year because they were not able to increase revenues. Because of the failed growth plan, this administration implemented a restructuring plan utilizing the sales tax increase and ARPA funds. This restructuring eliminated the surgery department and still failed to balance the books. This administration is asking for a \$15 million bond and an additional 1% sales tax increase to pay for it with no business plan. As community trustees, by tolerating this poor performance and incompetence you have failed our community. You are complicit to this and by supporting a scheme to raise more money through more taxes, you are merely increasing the burden for our citizens. AS A BUSINESS OWNER, from an economic perspective, you have to consider the ripple effects of increased taxes. Higher property tax increases the cost of doing business. More property taxes can lead to higher product prices. An increase in sales tax increases the cost of goods for consumers. Customers will tend to lower spending to fund higher property taxes and will be discouraged from buying locally due to higher sales tax. This affects not just my businesses but all businesses in the county. CONCLUSION, In the past months, I have seen a lot of fingers pointing blame and conflict. What I have not seen is leadership. Leadership is necessary to resolve issues of performance. Leadership is also necessary to drive a commitment to an informed assessment and plan. Leadership is needed from county officials and the hospital board to perform its fiduciary responsibilities to the people of Texas County. **You can't keep on blaming other people when you are clearly holding on to the reins.**

Dr. Te

Thank you for your input for my query. My name is officially Dr. Te. I've been here for the last 34 years, at least three decades. So, with my wife and Dr. Batista and Doctor Barias already elucidated them on this plan for the bond issuance of bond, And tax increase, boss. It might help the hospital for three years and the county will still be committed for another 17 years to pay for the remaining amount, which would total probably about 30 million. We physicians have written a letter that Rural Emergency Hospital might be an option. It's not necessarily the best option, but that might be the most practical option for money or financial reasons. However, the big drawback is the hospital cannot have any more inpatient admission. And the hospital also cannot do any more acute care. In other words, if the hospital needs to reapply later on, we might not be able to open an acute care because this building right now is Grandfathered in. The other problem is the swing bed status. It's possible the hospital might be able to keep the swing bed status. Might be difficult because it could be a distinct entity and it might be very important because especially that nursing home is not here anymore and there's any patient with acute care surgery after a few days of the acute illness and may have to have swing care, swing nursing, skilled nursing care and it, we will not be able to provide it and that's a very big drawback for our community now. As mentioned again earlier. The hospital board administration and administration were in the expansion phase. Until, as of recently in April of this year, end of April, the board has a meeting at the end of April. And in less than two weeks attended those three meetings, suddenly the hospital changed from expansion phase to conservative phase. Due to "financial difficulty", and the administration recommended to the board to cut off anesthesia services because, "we cannot afford it" and consequently it cuts off General Basic surgical services. The board has been blindsided by this. The administration put that as a priority to cut surgery first. I could not imagine how would a competent CEO think that way. I'll elucidate it in the next few minutes. Fast forward six months later. We're supposed to "cut costs", so we'll be more or less viable, and we are increasing our debt burden, accounts payable going up. A good example like what was mentioned is that orthopedist. There's no involvement of the medical staff. You know how Orthopedics was recruited? He'll come two weeks at a time in a month. And he had about 3 or 4 stints here and you know how much we paid literally every day to cover those 14 days? It averaged at least \$3000 a day, times 14. That's about \$42,000. \$42,000 about 3 or 4 stint. We spent an easy \$140,000 to \$150,000 just like that and it did not work. Had it been discussed with the medical staff we, the private physicians who are taking care of patients, have business acumen. We can tell that it will not work. The medical staff is being vilified and demonized by this administration with the support of the board members. With the board members being misguided, instead of looking at these different doctors as allies because we are providing the same intention, the same clientele to provide medical care for our patients.

Dr. Barias

That's our ultimate goal.

Dr. Te

And who has been vilified as medical doctors providing these services? Let me give you statistics, which the CEO and the eligible CEO should have already known this. For every primary care physician in a small town. It's about 2,500 people for every five primary physicians, so I'm not sure now about the statistics in Guymon, it might be 15,000 or 20,000. Let's just say we have 20,000 including the rest of the county 20,000. You need about 8 primary care physicians. Our

town has 8 physicians. Not to mention the nurse practitioners that the different clinics have. We have 9 nurse practitioners. When you go to the big city, you might see the specialist for the first time, but subsequent visits you might be seeing the nurse practitioner and the doctor. The patient does not even know the difference. They just say, oh, I saw my specialist again because that's how effective now some of the nurse practitioners are. And in addition to that we have 3 subspecialties that come to our town. We have Doctor Schifferdecker, the cardiologist, once a week we have two orthopedists from liberal who come here weekly on a Friday. They will have another doctor from Oklahoma City who comes here every two weeks. So, we had three orthopedists coming to our town. Now as far as general surgery. These are the statistics. Nowadays it's more difficult to get general surgeons. The statistics now are 1 general surgeon for every 20,000 to 30,000 population in the rural area. The rural area is divided into two categories. There's a bigger rural area which has a population of about 50,000 population and another one 30,000 or less. We probably belong to the 30,000. What did our administration do and recommended to the Board? Cut off basically anesthesia consequently, cutting off general surgical services. The way I look at it, it's a waste of resources myself being here not able to provide the service for that kind of action. And again, this board together with this administration keep reiterating, we need to recruit precision sounds like it's a big priority. Did they ever think that to me, having been here for the last 34 years at least, with the service being cut off and if I'm not able to provide the service, I get bored and leave town. They keep saying that Dr. Te has always been proven to support the hospital, if that happens, you know only two proven doctors who "support the hospital" in their mind. Did they ever think that? Did they? The doctors explained that to the board because the board needs guidance from a competent CEO. The surgeon in a small community is a basic pillar for the survival and success of a small-town hospital, that is a given. Let me give you the statistics of general surgeons. Being trained in the states, OK. 90% of general surgeons are being trained, stay in the big city. Because 90% of them, after finishing general surgery for five years, they go to subspecialty, they go to open heart surgery, become open heart surgeon, they become vascular surgeon, they become plastic surgeon, they become bariatric surgeon. So, you are left with 10% of that general surgeon who are trained to become a general surgeon, 10% now remember there's a small rural and a bigger rural. That being a rural take about more than 6% of that the remaining 10%. So, as a small-town hospital or small-town community less than 30%, we are left with about less than 4% of the population of surgeons available to come to small town. Now it should have been known by our press competent if the CEO is eligible or competent enough, this should have been already a well-known fact. Now with the surgical services being cut off. I mean our financial condition is worse than what I've ever seen in my career here. And lesser service the likes of which I have not seen. Of course, with this administration, who I think is incompetent, our CEOs in the hospital in Guymon have been through different CEOs. All along my career here they come and go for different reasons. I know of a CEO who went for retirement and a year or two after I started here, some relocated for their betterment. Some for personal issues. Some for family issues, so that's a fact. The average tenure of the CEO is about two to three years. Now to recapitulate. This administration has flawed, incompetent ideas regarding recruitment. Making decision to cut off anesthesia services instead of looking for the best and other solution to keep these basics general surgical service which is you know should be basic knowledge as a competent CEO, and guess what? With the anesthesia and surgical services was literally cut off, there was no communication, no rhombus communication with the staff, involving myself. Having been here for the last 34 years, none. Zip. No communication is required. No communication from the CEO, which is the only sole employee of this board. The minimum change that is needed as far as how I look at it being here, having been here for a number of years,

some of you might have been born here when I started here is you need to have and change of CEO leadership, a CEO who can and will work cooperatively with the medical staff who are your customers like what was mentioned earlier. Not to vilify them so that optimally available quality care is rendered to the patient in our community and in addition to that, the CEO serves as a liaison and conveys all communication between the board and the medical staff. Both of these are mentioned in the Board of Control bylaws as expected from the CEO, it's a board of Control bylaws, and which is not happening. It's a basic business 101 like what my colleague said here. You need to have a CEO who is acting as manager for this hospital to get along with your customers, which are the doctors, but the ultimate customers are our patients. We have a common ultimate customer, the patient, because we want to provide the best care and the CEO has failed miserably at this. So, to remind the hospital if you look at the logo of MHTC. The mission statements. "Working together to provide compassionate healthcare in our hometown." and involving medical staff through good communication for quality healthcare. Which is totally lacking in this leadership. In fairness to the Board of Control, they rely on a lot from a competent, knowledgeable CEO and their only employee is the CEO. So, if in their assessment the CEO is not able to fulfill his duty. They had an obligation to make a decision and I hope this information that I have provided you will help the Board of Control and the County Commissioners in moving forward positively. Thank you.

Keeling

Thank you, Dr. Te. Thank you, doctor. Go to item 25 receiving report regarding operation of Memorial Health with six county authority.

Dr. Batista left the meeting.

Ermann

OK, I provided the handout to you. You know, just some highlights. Many of these are items that we look at each patient access planning market share growth, you know, talks about the recruiting for internal medicine, family medicine, pediatric nurse practitioners, you know, to build primary care access to work, to increase market share within Community recruitment staffing. You know just ongoing there's a national shortage with nursing and many other areas in addition to, you know, cost of recruiting and so you know with the cost reduction plan that we implemented in June, one of the items that we did was to basically, rework the processes in admissions while still having 24/7 access, and so that was done through creating unit clerk positions which work on the floor in the ER and on the medical in-patient medical side and they assist the nursing staff as well, so that they do 2 tasks that are very important in mission of patients as well as assisting the nurses with care and of course the third item that I believe that comes later is just the board approved funding request that we'll be bringing to you. Today for payroll operations, meaning repairs, planners etcetera and then any capital versus the going concern plan you know this will be another item too. So, I won't get into that. You know we'll be presenting the resolution for the sales tax and then the collaborative plan we did, you know, discuss it at several board meetings. The Board had a meeting with medical staff as well as you know, we have a medical staff for meetings, and so we were discussing with chief of staff doctor Batista. A collaborative plan and so, you know. Basically, we had a couple meetings and ran over that we finally did come to an agreement that we would go to a plan that the hospitalist would cover the ER and the inpatient side, and we looked at some different models. One was bringing in PAs to assist the hospitalist if they were

busy with the ER because they can't be in both places at the same time to and we'd have PAs on board to help with admission discharge and rounding and working and talking with Doctor Batista at that meeting, he did say that the medical staff that would be unnecessary, that the medical staff, active medical staff with privileges would be able to take care of their assigned patients, those are the patients that go see them at their clinic on a regular basis, that they would handle those admissions and that we could put together a call schedule and on call schedule with the other active medical staff for those non assigned patients that you may need admitted and don't have a primary care physician. So, we were working on that. We were drafting letters of agreement, and we were just in the final review and approval stage of those, as well as changes to the in-patient care policy and then once those were approved, then we had those signed by the active medical staff physicians that we would go to the hospitalists to do the addendums to their contracts. You know, as far as the additional services, they would be providing in the hospital and so you know, unfortunately it looks like that model's not going to work at this time so we may need to step back, and I'll discuss this with the board at their next meeting to the idea of PA's. You know the whole idea behind this is that we could reduce costs in the ER. We spend about \$1.3 million bringing in Locum Dr for the ER positions and combining that into our hospitals program and bringing in PAs would have a cost reduction of about \$900,000 a year. If we didn't need to bring the PA's in, then we'd be looking at a cost reduction of about 1.3 million a year and so, you know, we'll continue working forward with that and hopefully can get that done as soon as possible. Of course, like everything else we do, there's a lead in time where once you have all the pieces in place to ensure there's no interruption in coverage, then we must give proper notice through our contracts to make all these changes and so, you know, I would expect 45 to 60 days is the really difficult part of the whole thing is, if we bring in PAs to assist the hospitalist and it would just be 8 hours a day, seven days a week is what they think they would need is recruiting those individuals into the community and so that's part of that would be built into the position recruiting were you know as well as I do what I'd already discussed, so that's just the update unless you have any questions.

Keeling

#26 request funds for weed eater, door, pay roll, and door latch.

Ermann

And Ted, I would actually like to say I had a discussion with the team this morning. I'd actually like to remove the weed eater request.

Keeling

I mean all this shows is the incompetence of. What's going on? \$359 for a weed eater? You had an account to help take care of something. Over \$3,000,000 from January. You guys look at this switch will do.

Bickford

They're withdrawing.

Johnson

He's withdrawing it.

Motion by Bickford, second by Sledge to approve paying \$429.00 to Royal Architectural Products for an electronic strike for the pharmacy door from the Hospital Sales Tax Funds. Aye: Bickford, Sledge, Keeling. Nay: none.

Motion by Bickford, second by Sledge to approve paying \$1,489.00 to Royal Architectural Products for a fire door into the laundry room from the Hospital Sales Tax Funds. Aye: Bickford, Sledge, Keeling. Nay: none.

Motion by Sledge, second by Bickford to approve paying \$78,000.00 for payroll from the Hospital Sales Tax Funds. Aye: Bickford, Sledge, Keeling. Nay: none.

Dr. Barias left the meeting.

Smith

Each morning. When I come in, I check a couple of things. I check emails and I look at the bank and I get online and see what kind of money is being deposited with respect to private pay and insurance and things like that. The administration has a good idea of the money that's going to be deposited each day from insurances, but you don't know until it actually hits the bank and so for the last several days equity banks have had a problem with updating their daily account information the last time they updated something was November 4th, at like 4:47 in the morning or something there and so this is the 6th. We don't have any idea of when they're going to drop that money into the account and actually post it to the account. and there are a couple of good deposits that are going to come in this month or excuse me in this week that we can already see. But if the bank doesn't update their records, we really don't have access to any of it. So, sitting right here, right this minute. You know, if I was at my desk and I could get onto the computer and see what the bank balances are. Then I'd have a better idea of where we stand, but the fact is we can't get anything that they don't deposit, and they make it interesting last Friday we couldn't access it, they didn't update anything. You got a list of pending deposits? Most days, they show pending deposits, and you have access to that money. But. Show the pending deposits, but there was no access to it, even though there was a substantial deposit there. You don't have access to it. Does that make sense? And so, I don't know what's well. Yeah, I know what's going on. Equity bank with your damn computers.

Ermann

Do you have questions about that litigation?

Keeling

No, I've actually talked with some people involved in that. I've talked to some of the people there at the hospital. They've explained the contracts and how they work, and they also explained that keeping that maintenance contract up was part of our contract or liability due. They also pointed out the fact that after repairs we would pay for the recharging of the machine. And we challenged that and that threw us into a tailspin. That's the documents they showed me. I'm willing to do what needs to be done to protect the hospital from further lawsuits. Well, I think we put ourselves there by bullying attitudes. It's my personal opinion.

Motion by Bickford, second by Sledge to approve the payment of \$25,000.00 retainer fee to John Kennyhertz, Attorney Platte County to represent MHTCA service agreement vs Radsource Magnetic for radiology equipment. Aye: Bickford, Sledge, Keeling. Nay: none.

Keeling

As you guys know, I did request an audit. Before we went out for the bond.

Boring

The resolution is not a request for the \$15 million bond. That request is just straight for the one cent sales tax. That's what that resolution is for.

Keeling

I can't personally put that through to the people myself. I won't approve it. You all have the right to vote your conscience. It's my personal feeling that we brought Bill here and we got the .45. We were going to take care of old debt. We were going to get on board with the docs, we were going to turn this thing around. We were going to advertise. We were going to get the community back involved with our hospital. I haven't seen any of that happen just create more debt.

Sledge

This is just for the one cent sales tax and no bond?

Boring

I'm sorry. Yes, sir, there has to be. There's one provision in there as far as the security thing in that language, that's got to be in there, because if we do the one cent that sales tax, it would replace the .45 and we have to continue that security with Anchor D Bank. We have to have that in if we're going to repeal the .45, which this would do. We have to have the ability to repledge that at least that part of the one sent back to Anchor D Bank to continue that security. In order to continue that loan.

Sledge

To be honest, after visiting with the District Attorney, I believe since the board voted to bring us the bond issue, I think this is probably going to have to be voted on by the board of trustees first before we can do anything with it, I believe.

Boring

I think the bond issue is a secondary thing that can come up in the future. Then in talking with the bond attorney and the bonding people, the one cent sales tax is something that if approved, then at a later date, if you want to do a bond issue, you can but you don't do the bond issue on the front end. I mean you got to have the sales tax in place if we want to do a sales tax on them. Or a bond issue on the point .45 We could do that because it's in place.

Keeling

Well, and Mike for me. Anything that involves possibly going out for a bond issue with the current administration I will not support it.

Boring

That's the reason that you guys expressed yourself. I mean the board and I feel like the bond would help, but the thing that they've got to have been the cash flow. That the other .55 would bring in this and we've got to do a sales tax before we do anything. The bond issue would be a separate thing because it would require the county to back up that bond and that would have to be addressed back to the Commissioners if the board would come back and present something to you guys to do a bond issue.

Bickford

That would have to be approved by the Commission.

Keeling

I'll give you all these copies.

Sledge

Well, I believe that we are going to have to table it until the board makes a decision to go into this with just a sales tax I think, I'm pretty sure.

Keeling

I agree with you, but it's still hard for me to ever change my mind on where we're at now. I just see the debt growing.

Sledge

I would agree with that.

Keeling

When we brought Bill here, I had total 100% confidence that things were going to change. I was totally wrong. It's gone completely backwards in my opinion, and I don't blame it all necessarily on Bill. I'm sitting in board meetings, and I know as a Commissioner, I rely on my DA as I did like in the past, and I do Buddy now for advice and I do my best to follow that advice because they're more knowledgeable than I am. But I feel like this board has been misled in a lot of ways and has not got all the facts on the numbers which the Commissioners still don't get and have gotten. This board I feel has got the same thing. I feel like we got board members who stepped up and volunteered to serve this Community and have been misled.

Ermann

And Ted, if you have documentation or lists of things that you feel were misleading, if you could provide that to me and I'll follow up on them.

Keeling

How many times have we requested numbers? How many times has the board requested numbers?

Ermann

Are there numbers that somebody wasn't provided? I'm not aware of that, so I am aware that there was not an audit of this hospital for decades in that.

Keeling

You sat right there and told us a couple weeks ago, there's not been an audit and then you came in last week and request us to pay for the audit.

Ermann

Right. And we will have it. However, you know, I think that was quite a challenge and to get that and finally you have it like so yes, there we just have some documents assigned. We sent them the final payment at the end of last week. They've sent over some documents that we'll sign today and then we should be good to go.

Bickford

So, there is one we just don't, have it?

Ermann

We don't have it yet, so we don't have a vital document.

Bickford

So, the one question I have, are we going to have the audit soon?

Ermann

So, I guess the check still has been provided so they did send us the final documents to sign.

Smith

They have issued some draft audit reports. They are an unmodified opinion, which is the new term from when I was in school, but it's a clean opinion. It's not an adverse opinion. It's a clean opinion now. They'll always find something that they object to but take it as a whole of the financial statements present fairly the financial position and the results of operations of Memorial Hospital and I think that says a lot, since it hadn't been prepared in quite a while and frankly, we need to give Michelle Reust the former controller a big pat on the back to work to get there and I've got big shoes to fill.

Keeling

I agree.

Smith

I'm trying to build it up.

Keeling

Michelle did a heck of a job, and she did her best to be honest with us.

Smith

She had 20 years, some years' worth of experience doing this thing. She's amazing.

Bickford

Yeah. So, you had said in a couple of prior meetings that if it was a Bond and the bond and a sales tax resolution passed that funds for the sale of the bonds could be available, you know, 45 days after the election.

Boring

It's my understanding from talking with the bonding attorney. It generally takes around 45 days, If the Commissioners and the trustees agreed to go out and try to do bonds from the time that decision was made, then it would take like 45 days or so.

Bickford

Just say.

Boring

It can take a little longer. It can be a little quicker, but generally what he told me is 45 days is a really good target time to look at. If you do a bond and that's from when you make the decision to do it.

Bickford

So, what do we know about the timelines from when a ballot initiative passes to everything going through the OTC to get funds off of a sales tax?

Boring

That's the reason it's critical. There's a delay process in there. If this is voted on January the 9th, then we would need to immediately notify the Oklahoma Tax Commission. They have to have like 60 days to send out notice. It takes them a while to go through their process. They have to send a notice to all of the tax collectors, businesses, in Oklahoma that collect taxes to notify them of the change and then the actual change starts on the first day of the next quarter after that. That's the reason we use the April 1 day. That would be the start of the next quarter. The approval of the tax and of course, if it starts April 1, we wouldn't see anything until May.

Keeling

Have we also requested you to show us how you're going to survive till that happens and make a plan to get there. At this rate, there's no way we're going to be making payroll that long but there's just no way the .45. Is going to be gone.

Bickford

And one of the only ways I mean things to possibly make some more cost savings right now, is to get rid of the ER Company.

Ermann

To modify the physician coverage?

Bickford

Right. And now it's looking less or unlikely that we'll get this collaborative plan in place.

Ermann

Right. So, you know that would require recruiting PA's. You know that and it's a time process because I probably have somebody, I can call who would help us out in a crunch, but they have to be licensed in the state of Oklahoma, and then you have to get privileges for them to provide services as a PA.

Sledge

Well, I don't believe we can approve this anyway because this is not what was approved through the board.

Motion by Keeling, second by Sledge to disapprove putting the Bond and Sales Tax on the ballot until the board of trustees approves it.

Matt Boley, Sheriff left the meeting.

Ermann

If the board was able to have a special meeting and bring that back prior to the 9th, would it be possible for the Commissioners to have a special meeting and reconsider?

Keeling

We can sure look at it and I'm going to have to see some things showing them how you're going to survive till then. Hang on. You know, while this isn't Field of Dreams it isn't going to build it and we'll come. We keep buying equipment instead of taking care of the current employees and trying to work with what we do have available. Without customers, you can't grow a business. Aside from the doctors I've seen, aside from the board, I've said 17 years I've watched this battle go on and there's got to be some way. To put the community first. To heal this and actually go to serve the community instead of the everybody is trying to prove a point. It's just a battle that isn't going to stop and if it isn't going to stop, it has to. There has to be a change.

Ermann

I would agree. I would agree 17 years is a long time to be dealing with the same problems.

Bickford

Alright, so now I got to just throw it out there. We have got to consider this all has to be figured out by tonight. So, if they're going to have a special meeting, 48 hours is on the 8th. We're going to have to have a Special meeting.

Boring

There's only one possible way of doing it, because if this is not approved and delivered to the election board by Wednesday. Then we're looking at least another three months. So, we're talking about instead of possibly getting tax revenue in in May we're probably looking at September or October and I don't know how you're going to make it that long. So, the only way I see this could work is one of two ways. I think it is an emergency. The hospital board would have to have an emergency meeting either tonight or tomorrow. You guys, what I would ask you to consider not trying to schedule a special meeting because you don't have the notice time or anything to do anything between now and Wednesday is to simply continue this item on your

agenda and continue your meeting after this item on the agenda to Tuesday afternoon or Wednesday morning where you could consider it.

Keeling

I've got doctor's appointments tomorrow.

Boring

I mean, Wednesday would work as long as we could meet, talk about it and get it over there, otherwise we're talking an additional delay. That continues creating further burdens on the county and the hospital.

Keeling

And I realized that the board did vote on this and not everybody was there. I'd like them to bring it to us, but I'd still recognize the ones that were not there and listen to what they had to say about their fears of where it's going. I'm right there with them. You know, at one point in time, the Commissioners could have stopped the bleeding and that's coming from me. I'm not speaking for the other two. I personally can't go out there and talk to my constituents and look them in the eye and say if we do this it's going to turn around. It hadn't turned around in three years. It's not going to; I've seen it over and over again. Not in the direction we're going. That's just my personal opinion.

Strain

So, we found out that moving the \$15 million bond was not part of our deal and that should not have happened. So, you're saying that we didn't approve the one cent?

Keeling

Well, I don't know. I wasn't there for that meeting. I saw the other one and I listened to the board members that had something to say.

Sledge

The only thing I could say would be to call our DA.

Keeling

It's up to y'all.

Sledge

I was understanding correctly what it was approved as a one cent and the \$15 million bond issue. Am I correct?

Bickford

All in all, in one, I mean, I'm sorry. That's what I thought was in front of this today.

Boring

We approved to one cent and to do the bond. But we can't do the bond until the one cent approved. We found out over the weekend.

Keeling

Well, and to me, that's another deal. You do this first and then we can push this.

Boring

I mean the one cent sales tax was approved. To request that.

Sledge

I need to talk to the DA.

Keeling

Yeah, we have to visit with him a little bit. He kind of voiced his opinion.

Bickford

I thought he had an engagement.

Johnson

Yeah, he's gone.

Sledge

But my understanding was we cannot.

Dr. Te

Chairman, you allow me to speak. I was in that.

Sledge

But we can't send anything besides what was approved by the trustees.

Dr. Te

It's a combination. The resolution is for both for bond and the tax together. Because I personally asked it might be a good consideration just for the tax and it was never brought up just for the tax.

Boring

And then I'm sure boggled.

Strain

So don't sit there and say what you don't know.

Dr. Te

Well, that's how I heard it.

Bickford

I'll be honest. My greatest concern, honestly, is it's a 1 cent sales tax and or bond. I'm very concerned if we aren't sure that we're going to make it to the end of November or December that if any of this were to possibly pass, but especially with this just doing the sales tax and not having

any of these proceeds available until May really even once it's on the books. So, we could have a failure with the current plan I mean if we had, you know, for sure collaborative planning, we could do some more cost savings by not having to pay the Locum contracts or whatever and we were you know tighter. Somewhat more sure that we can really make it until any of this was in place. I'd be more likely to vote on it.

Keeling

I apologize if I sound to be a little hostile and I don't mean to be that way. I have no hard feelings against anybody, but I am really tired. I'm sitting here when we tell the hospital board we're struggling, we're struggling. We have got a whole county to protect, and the money level goes up and up every time you show up and we buy new equipment. We're updating things and what's your volume, we don't have any patients, but we're building. We're spending all throwing all the taxpayer's money away, buying equipment. That isn't going to be used. To me, it's just no common sense to it at all. That's my personal opinion. I think there's two other guys here that have seen what's going on. I think Mike can tell you himself. I have done my best to save this hospital and fight for it and I thought we was doing the right thing but when I have employees contacting me about what's going on in the background and where the numbers really are and I have no faith in that.

Ermann

And again, Ted, you know there's two sides to every story. There's because one person says something doesn't mean it's factual, and that's where if we could, if you could speak to us about those things. And then we could handle them.

Keeling

Now it doesn't mean it's factual, but I can't get a hold of you. I mean, I've had board members tell me that, you know, they called Bill. I've called the hospital and there's no answer. There are people in this room who can tell you that.

Bickford

We have a lot to figure out really quick though. With a motion that included the discussion with the DA, correct. So, which leaves the door open to a question being answered. About what? What we only presented there, which leads them to know whether they do or don't need to have a meeting and whether or not we need to continue. This one so I can move forward. Are we just going to go with that motion in that process? Or are we going to resend that and make any sort of other?

Boring

If you guys aren't going to vote to do something to have the ability to address this, I'd say 2:00 or so Wednesday, there's a little point in the board having a meeting because it isn't going to happen for months at best.

Sledge

I mean, I'd be willing to look at this, but I think it needs to be approved by the trustees first and then whatever we need to do.

Bickford

I mean I understand what Jack's more or less saying. I don't know what your discussion was to be, yet I don't have any idea what he advised you to know how to sway your vote. But I will just be honest that when I thought because I got my history as a voting member of society, I thought that quite often, not always, maybe but quite often when a bond issue proposed that there's a spot on your ballot for the bond and then immediately after that is another spot for the tax mechanism. Whether it's ad-valorem or sales tax. And so, I don't know if it matters. Like I said, I don't know what anybody talked about, but I just in my mind with what was approved at the meeting, I thought that's what we were going to more or less have in front of us with the bond and the tax mechanism.

Boring

I think it may be the way the difference between a bond issue with ad-valorem tax and a bond issue with sales tax is my understanding. There's got to do the sales tax 1st and then whether you do a bond issue later or not, that's a separate deal.

Keeling

We all see this coming. Why do we wait? Wait till the last minute? Every one of the board members', administration has seen this coming for quite a while, why was the action taken to do it diligent time and not put us in this situation?

Sledge

And the question I had was the and/order. This is a \$15 million bond and/or county sales tax. And so, I asked about that and basically, I was told that however it was approved in the board meeting was what we needed to approve or disapprove. I could be wrong. Maybe I misunderstood, but I don't see how we can pass it as is.

Keeling

It seems to me there's a lot of misunderstandings all the way around and maybe there's some on my part too.

Ermann

Is your concern that this is approving the bond as well?

Bickford

No, no. I know exactly what it is this says. I'm just saying. I'm trying to help Dolan. Yeah. The conversation with our DA to be advised is a good idea.

Sledge

Well, do you remember correctly too? And it was brought up strictly just a sales tax, and that was shut down and they come up with the bond and sales tax, that's what was funded.

Keeling

To me if you go the 1st way, it leaves the opening door.

Bickford

Right.

Keeling

To get around and get the money in there, I can't give this board \$15 million. This administration is a failure. We're not going to end up stuck with the taxpayers paying for this for something that's not making it. I just can't personally go to the public and look at somebody in the eye and tell them this is going to change.

Smith

One of the game changers is in the last board meeting was Dr. Batista mentioned Dr. Barias, Dr. Tan and Dr. Lim by name and said get rid of all these other positions and they'll provide coverage for the hospital free of charge. Now it wouldn't necessarily be 24 hours. So, they've got to see patients. So, you got to have a certain level of staff, he said, didn't he, Levi? You were there that they would provide this free of charge and I've said everybody here has heard him say that they will provide this free of charge.

Ermann

And that was the discussion at the time. However, the rest of the medical staff was not in the room.

Smith

Oh, I get it. But he speaks for everybody.

Ermann

However, I talked to Dr. Barias prior to the meeting because Dr. Barias and Dr. Lim above requested that their privileges be moved from active to courtesy and I talked to Dr. Barias prior to the meeting about that and I said, well, is there any possibility that you would consider changing that, I said because based on the collaborative plan that we discussed with Dr. Batista, you wouldn't be able to take all. He said, well, I'm not going to and so when they move to our courtesy, they will no longer take home so that is thought the plan of Dr. Batista and Dr. Lim and so he said that Dr. Batista had not communicated with him on that plan, so that's why I'm saying that collaborative plan is going to change.

Bickford

That that right. Exactly. So, you have another plan if you could work on the PA about that? Work in that APA's, right?

Ermann

Correct.

Bickford

In place right now I'm selling me out. I'm sorry. I don't feel comfortable trying to pass this without a better clear plan.

Sledge

To get through till the tax comes in.

Boring

It wouldn't take but about 30 minutes to have the bond issue in here. If you want to consider the bond issue now to approve. I mean, I could word that in there it's still would have to. It's all going to be contingent on the passage of the sales tax. But I mean we could add that wording in there.

Bickford

To be clear. Just to be clear on my part. My issue is not having a clear enough plan to get us through till any of these proceeds would be.

Sledge

I would agree with that.

Ermann

Of course, the big part of that plan is the reduction of ER costs, right?

Bickford

And that's one of my major issues.

Ermann

Right. And that would take us close to breaking even but it wouldn't get us all the way there and just to keep in mind that you know there is a lot of outstanding debt still that's going to exist whether this is passed or not passed.

Keeling

And it keeps growing.

Ermann

And if you want to keep a hospital here in another fashion, whether you're doing inpatient care with the doctor or not.

Keeling

It's vital to the board that the board looks at saving an emergency room because for the past three years the emergency room has patched people up and got them where they need to go. It's done its job.

Ermann

I mean, you're still going to, even if you're just running the emergency room and your diagnostic services, you still have the problems of an age building that needs a lot of issues we bring to all of you, are life safety issues for us. There remains an accredited hospital. We have to have a secure pharmacy. We have to have the fire doors.

Keeling

Have you been?

Ermann

All those things.

Keeling

Out in advertising, talking to the public radio, letting the public know what's going.

Ermann

On what we're doing because I can't go out and say we're working on a bond issue or that we're working on a sales tax issue. Once we get past the resolution, then we work towards getting the voter approval later.

Sledge

My personal opinion is I'd like to go back with your board and look at maybe adjusting the sales tax without the bond issue and move on. I just don't feel comfortable doing anything at this moment.

Keeling

I believe wholeheartedly that you know when we passed the 60/40, I don't know how many people talked to me it says you get the hospital off there, we'll support it. It was about the Sheriff's Department. It is about rural fire. It's about EMS and the people in this community are fed up with the hospital, nobody has faith.

Ermann

I wouldn't say nobody; there are a lot of people who do support it.

Keeling

Why didn't we get out and talk to the public and get a petition and bring to us and show us that support? Because I don't believe it's there right now.

Ermann

Well, and the vote will show. That or not.

Keeling

Yeah, the vote will show that. I can't be one to support that though. I can't be the one to go out there and sell it and I can't ask the people to vote for something that I can't sell because I can't look somebody in the eye and lie to them. But what happened in the past?

Boring

I don't think the board's asking you to.

Sledge

Right.

Boring

Ask the public to do anything. I think all the boards asking the Commissioners to do is to submit this so that people can decide what they want to do and by not submitting it, you're not giving the people of this community an opportunity to make that choice.

Keeling

Some of them are going to say, what the hell were you thinking? I apologize I if you know I've just seen it over and over again and It's up to the other two. We need to resend the motion, or we need to accept that motion and move on to new business.

Bickford

Well, I mean, I'm just trying to be as clear as possible. The motion itself was just to not approve, right?

Sledge

Though cannot approve the \$15 million bond.

Keeling

The motion would.

Sledge

Approved the motion.

Keeling

Make a new motion too.

Bickford

Well, I'm just trying to. I don't know that. It matters, but I'm trying to in motion is just to disapprove it.

Keeling

To not approve but was prevented.

Bickford

The whole hatch reserved about his discussion with the death of the second was a second contingent upon. So, does that second carry any weight? Over the initial motion. Because if the initial motion was just to disapprove and we all voted yes on that motion, then this is done. We just turned it down.

Keeling

The way I see it, I realize the position you guys are in. I know where I'm at and where I'm at is, I haven't been shown any by the administration or the board to get on it. When we started this stuff a while back, Mike was our District Attorney. He comes us, the guys. You got to move your butts. You have got to do it now. We met on a regular basis. We got in gear; we got it done. This should have happened months ago. While we are tasked with if this goes forward from here. Is

trying to figure out how we're going to pay a bunch of people to sit around at the Hospital and not doing enough. And how we're going to take care of those AP's.

Bickford

I mean what? We just got to figure out exactly where we're at and what are we're doing? Today.

Keeling

The board needs to make their decisions.

Bickford

As honest as I can, if everybody is in this room. I'm not in favor of one thing or a bond issue. Right now, with. The current plan on how to try to go forward. That means you can't bring me another something. But as Mike has told us at the hospital board meeting and just not today, the next ballot and it wouldn't be available until...

Boring

I'm not sure I'd have to check. I think probably April 1st.

Bickford

Good enough. So, then the whole deal is, my concern, honestly, a lot of my concern is they're getting from here to when any of this would be available. So once again, getting from here to where that would even be discussed to do anything else to the voters. It's the task of the board to figure out how we get to any of them, and I'm buying it. Not totally, but part of my issue is how do we get from here to win any of these? I don't see it being a clear enough plan. I understand we're saying we're back down without the local docs and try to do PA's and everything else. So, all I'm saying is right this second, I can't in good conscience vote to take this to the people without a clear, clear enough plan.

Keeling

Well, I mean meetings this started with before they cut surgery that I come, I told Bill sitting right there show us a direction give us a direction to show us the plan. What are we going to do it. It's been delayed and delayed and delayed and now at the last minute, I'm like, how are we going to survive? To get to that point. Look at the numbers.

Bickford

My question to you. With our, with our salary going to back up and make a clear-cut decision disapprove this right now, any and all discussion on item 27. Or are we going? To try to have them have a special meeting to come back to us with something other than.

Keeling

We already made a vote to disprove this now if you want to continue this meeting to reconvene and see what further information we get and a plan that shows how you're going to survive without draining the entire county. Till this comes to a vote and then show us the plan, what's going to happen once that vote passes? What direction are you going? How are we going to change and improve? Or if it doesn't pass, how are we going to clean up the mess we created?

We've got to have something. Giving us options and knowing which direction we're going to go when it's done. It's up to you guys. I'll entertain a motion. If you want to make one or we can leave it as is and we're done. As far as I'm concerned, we're done.

Sledge

Understanding relatively disapproved was the \$15 million bonding and/or County sales tax. Does that mean they can't come back for us?

Bickford

Well, it doesn't mean that I can't come back depending on how soon they want. Is there a burden on them to get something back in front of us and we either continue or have this special meeting? Because if we're done, we're done.

Keeling

You know, passing because they can always come back.

Bickford

They'll have their next regular board meeting, or a special meeting and they'll decide where they want to go, or they'll have an emergency meeting sometime between now and Wednesday and expect us to come back and revisit.

Boring

Yeah, there's no want to have an emergency meeting if you aren't going to come back in time to consider for Wednesday.

Sledge

I might try to come back.

Bickford

All right well, that's all I'm asking is.

Sledge

OK

Bickford

You are OK coming back then I'll be there too.

Keeling

I can be here.

Keeling

I'll make myself available by Wednesday morning.

Bickford

I mean, I'll continue to report to meeting call. Then I'll be there.

Boring

If you all can continue to Wednesday Some time, then that will give the hospital board some time to do it and I do want to point out one thing, the hospital was talking about presenting sales tax issue to the county but in light of the counties, once cent sales tax coming up, they deferred to even mentioning it. Because they didn't want to impact the counties one cent sales tax and that's, I mean the hospital talked about getting one cent sales tax a long time back and knew they needed it, but they didn't want it. They didn't want to interfere with the counties, once cent sales tax, so they just they just benched it and put it on. Right. And now that that's over with, here we are so, there are some reasons. I mean, it's not like they just waited till yesterday to decide what they needed the sales tax.

Keeling

Well, we had a committee with a few people on board and the only ones that got out and pushed it or advertised anything were the sheriff, me and Levi. That committee that worked so hard was going to take care of it. Didn't show up.

Strain

Because they were never notified when those meetings were.

Keeling

Who, who is chairman of that board?

Strain

I have no idea, but I was on the board, and I never knew they had a meeting. You were on that board too.

Keeling

I was on that board, and you were the chairman, and we met a couple times.

Strain

Well, I wasn't that chairman. I wasn't the chairman of that board.

Keeling

That's what I understood, and MM was absolutely.

Boring

I don't know that there was chairman, if we ever had a chairman, we had a committee. Just trying to get everything in place and.

Keeling

Well, you two remember what happened with that committee.

Boring

Getting moving forward it was.

Sledge

So, what are we extending our meeting to?

Keeling

I would say 8:00 Wednesday morning. I mean that works for me. I'll be here.

Sledge

OK.

Keeling

I will tell you now, I'm not opposed to a sales tax that is not going to be used other than on a monthly basis to help live within your means, and I will never support a bond issue because I have no faith that money will last. I do need some positive proof of how we're going to survive till then and what written plans you have had and what the board is going to do to work with to make that happen so we can survive. I can't support anything that's going to commit to taxpayers to something that I don't believe in. Now, if you all go out and get a petition with the majority of the voters saying we want this, you don't need us. We'll put it on the ballot. I'm just trying to be as honest as I can. I don't mean to sound blunt or hurt feelings. I'm just speaking from my heart and my past experience.

Bickford

So, you know effectively where we're at is, we need to go to #28 on the agenda and to have Wendy put them in the minutes to continue this meeting.

Matt Boley, Sheriff left the meeting.

Keeling

Yeah, and if we're going to do that, we need to finish our agenda and then go ahead and schedule a continuation, take a vote then. So, I'm going to drop down the new business and continue on with the meeting. Do we have any new business, Wendy?

Jack Strain and Bill Ermann left the meeting.

Johnson

No, I don't think so.

There was no Executive Meeting required.

Buddy Leach, the District Attorney, was not present.

There was no Charity Request to be approved.

Motion by Bickford, second by Sledge to recess the meeting until Wednesday November 8, 2023, at 8:00 a.m. Aye: Bickford, Sledge, Keeling. Nay: none.

Motion by Bickford, second by Sledge to reconvene the November 6th meeting. Aye: Bickford, Sledge, Keeling. Nay: none.

Board of Texas County Commissioners was called to order by Ted Keeling, Chairman. Dolan Sledge, Levi Bickford, members and Wendy Johnson, County Clerk were present. Jack Strain, Mike Boring, Grant Wadley, Robert Carter, Bill Ermann, Buddy Leach, Steve Smith, Sandra Montes, Spencer Leiter, Marsha Strong, Julie Hulsey, Sarah Atha, Dr. Hianto Te, Ray Davis, Bea Resales and Judyth Campbell was also present.

Keeling

OK, the reason we're here today. Is to go back and address. Item 27, we would vote on your request to approve a \$15 million bond and/or county sales tax we voted unanimously not to do a bond issue. So now we're addressing the possible sales tax. To start out with I am going to remind everybody kind of where we're at and I was reminded last night at the board meeting that the serious consequences of this on the ballot getting it passed. The possibility of upcoming lawsuits, the \$2.4 million worth of AP that's out there. It is going to be very tough to deal with if it doesn't pass. We've asked for a plan showing "how do we survive to get there with the shortfall of the .45?" I was reminded about the .40 was also on there to take care of the hospital as well as the other entities. I had made a statement in the past that I wasn't willing to continue getting into the .40 that it would affect EMS, 911, rural fire and the Sheriff's Department. As Commissioner, I was elected to do my due diligence to manage the taxpayer's money to the best of my ability. Over \$8 million went to that hospital from that 40% so far. All the other entities combined don't even come close to that. Three years ago, we got the .45 and it did its job. It took care of the old debt. Three years later, we're right back with tons of debt. I want to remind the other two commissioners, it's up to them. We all have the freedom to vote our conscience. But there are consequences for this board too. I was reminded of that. The county is going to be responsible for making payroll. We're taking care of a AP's and getting through to the time that if it passes we can survive in that time. We're going to clean the rest of our accounts out, which I feel is going to put other entities in harm's way. I was reminded that we had lost an account with somebody because we didn't fix the whole parking lot. I was reminded that in order to make things work, the Hooker Clinic would have to close. The conflict would have to be combined here. I have also been told by people that go to this clinic, they're going to Hooker now. I don't know how you're going to change the numbers or increase that. That's just my opinion. I've sat here and seen this board, Jack Strain here in the past, go through the same situation three other times. Every time we've got the same results. I'm not pointing the blame at the administration or the docs. But for some reason we keep pouring money into the hospital and cutting services. We spent a fortune on the OR. I was there to inspect the hospital one day and at that day, Doctor Bravo had five surgeries. I was told they had to cut that once we put that money into it. Because anesthesia being too costly. I could personally support a sales tax that was going to maintain an emergency room that has done its job over the past three years. I've seen they've stabilized people and got them to the right place where they could be properly taken care of. Mr. Ermann, if you would like to present your plan and tell us how you're going to turn this around you have the floor.

Ermann. OK! Well, thank you and you know, and I would just also remind you that you know of the .45 over 60% of it does go to provide payment for debt that was assumed prior to the three-year period currently that. Then this is a little over \$1.7 million. So that leaves a small

portion of that available for operating and we did present a plan last night. We've been working the last few meetings we've had a discussion with the medical staff with I should say the chief of staff to discuss the collaborative model with the hospital where we could reduce cost of ER services and you know use the hospitalists to provide the ER and then have the active medical staff that provide on call coverage for the patients that they see in their offices on a regular basis, they're assigned patients as well as non-assigned patients who don't have a primary care provider. How we looked at that model, it doesn't look as if that's going to work so you know, we'll continue and adjust that just a little bit as we discussed last night and you know, then look at if the sales tax does pass, we could add, you know, PA's to assist those providers so that you know they could continue doing both the inpatient and the ER services, but you know we have a goal of assuring that we keep the inpatient open and you know the ER running 24/7 as we have been doing since we put the hospitals program in place three years ago and so with that, you know that would create about \$50,000 in positive cash flow over time as we move past the current contract we have with the our doctors. We'll put that program in place. We looked at a reduction in force you know where the administrative team members would be released and so that would create a savings of approximately \$800,000 over you know a year's time. You know there was a lot of discussion about it, so you know if you didn't have leadership at the hospital is the hospital going to continue? So, the board didn't entertain that very strongly. You know that in a really dire situation, that would be something that we would have to look at, but again, I was working towards, you know, achieving a number and removing the negative cash flow. We also looked at other reductions where we may be able to then staff until the funding was sufficient because we're looking at that \$150,000 shortfall each month and how do we, you know, reduce that even if it's temporarily? If and when the sales tax passes and so this plan, you know, with administration and other individuals in the hospital would put us there along with the \$39,000 that we're using right now from the .45 sales tax fund and that would put us positive on a monthly basis you know based on all things remaining equal and trending that forward if we were to do the .55, that would be an additional 1.3 million a year or 112,000 a month based on the current collections and so of course that wouldn't begin until May and that would further enhance the positive cash flow, if you did all of those other things in that plan. The difficulty would be that you know there's existing debt. Close to 5 million including that 1.7, we already talked about and so it would be difficult to make those payments going forward on the debt as well as you have an aged plant, you know the plant was built in 1948 and we have continued issues with plumbing, heating, and cooling with the roof and we had a study done in 2020. Which indicated about \$3.8 million in infrastructure upgrades and so you know, the county was trying to as things would break we to fix them, but it puts quite a burden on that .40 cent sales tax that Ted was talking about. If we keep pulling from that to fix the heating and air to fix the plumbing, you know, because we're having to close down areas where the plumbing just can't be repaired, it has to be replaced and the cost is very high, and that's why we brought up the bond issue, because the bond issue would allow a consolidating of the debt, it would allow to replace leased equipment that's very expensive, it would be able to purchase and reduce the annual operating costs of the leases which would improve cash flow as well as that provide the dollars needed for the infrastructure upgrades and allow for marketing efforts to bring in more primary care that's affiliated with the hospital so that we could regain market share that's been lost for our imaging, for our lab and for our inpatient and that's basically a summary.

Keeling

OK and I understand that if this passes as soon as possible, board is going to look at a bond issue, and if that doesn't work, then you're going to borrow against the .45?

Ermann

We've not had that discussion.

Keeling

That was last night you guys talked about it.

Ermann

We have not taken it to the board meeting yet. It's a possibility. Right. And until the board has further discussion and approves that then you know I always look at his just discussion.

Keeling

Well, are you aware of that? You know, we just signed and gave you all two checks Monday for \$39,000 to take care of payroll. We also gave you a check for \$25,000 to hire an attorney in Missouri to defend the lawsuit from a vendor, are you aware of that vendor has not taken that case and has not decided whether he's going to take it or not, even though we've already cut the check?

Ermann

So, I've not had that communication from legal on that.

Keeling

We were going to get with him to pay and he has not accepted the case?

Ermann

Yeah, the emails I saw yesterday didn't indicate that he was stepping away. They were just waiting for payment.

Johnson

That's what we got, he said that he hadn't even accepted the case yet, so he didn't know. Why were we asking for the information? Like mailing address and such.

Boring

Well, that's not the communication he's had with our attorney in Oklahoma City that's handling the companion case. Now I've got the emails if you want to look at them. He's not going to say he's accepted the case, until he gets the retainer fee.

Johnson

He didn't know why we needed the information right now because he hadn't accepted the case. So, we're like, we got to have it to make the check.

Ermann

An e-mail I thought he was asking about the payment so; it looked like he was ready to come.

Boring

Yeah. I mean if I need to get a hold of him I can.

Keeling

As far as six months ago, we requested an audit, and we can hear just recently it hadn't been done in 20 years and then gave the border control \$16,000 to pay for the audit. I realize you didn't get the check until Monday but we're being told now as Commissioners, there is no time to get all this in place we have to have it by 5:00 to the election board in order to get it on the ballot and get it passed and get the monies in as soon as possible. I personally don't believe it will pass and an easy out for me as Commissioners to put it on the ballot. And let the public decide. As I mentioned in the past meeting, I can't campaign on something I don't believe in. I was told you I

wouldn't have to campaign, but as a commissioner people call me and ask what do you think? I can't lie to anybody. I have to tell them what I think. I think this is unsustainable. It's proven to be unsustainable. We can't continue on this path and my advice has been to the board, has been in the past. Find a way to save the emergency room. That is what's going to protect the lives in this county right now. They can stabilize people and get them where they need to go. But we're playing a game with the taxpayers. I feel we're misusing their funds. I can't sit here and do that. That's me. I'm not speaking for the other two at this time. I want to drop to 28 and give the public time. Excuse me? It's not 28, but I'm going to open up a public comment. I want to hear public comments from people who are concerned about the future of the hospital before we go to vote.
Dr. Te.

Dr. Te

Yeah. My name is Dr. Te. I've been with this town hospital for the last 34 years as a surgeon and a physician sort of like general practice position being here for the last 34 years, I was present last night in the board meeting the resolution made was literally run to the Commissioners. The board members, specifically Mr. Carter who proposed that resolution describe it as an income for the hospital I couldn't understand income it's not an income, it's an assistance which we know for a fact as a hospital to be able to provide the service that we need some kind of financial assistance, not as an income, do not regard it as an income. That is a big misconception. Then it was seconded by the other board member, Mr. Garrison, who made a comment that by passing this resolution, this is to keep the heat out of the Commissioners. So, by approving this to be put on the vote for the community, by the Commissioners. That this will keep the heat out of the Commissioners. To me, it's like they're trying to save their own skin, the border control. So, then it comes to the question that should these Commissioners rubber stamp this? Or the Commissioners will make their own judgment. Which I think you can do as you're right as Commissioners. This Board of Control, guided by the CEO, has a proven poor track record. Being guided and misled by this CEO. I personally would ask appeal to the board of County Commissioners to have this plan modified because their plan is flawed. They do not embrace the medical staff, the physicians who are the core of this kind of business model. The physicians are the customers, but our ultimate customers are the patients that we serve in the Community. You think about the basic concept as a business model. If you have a CEO who is the manager for this MHTC who cannot get along and does not embrace the medical staff which are the customers with the ultimate customers the patients in the community it is doomed to fail 100% that is a given, it's a basic business 101.

Bickford

I just want to remind everybody; our agenda points out that everyone will have 3 minutes to speak.

Dr. Te

Alright, let me just finish this quick. I'm sorry. That's my fault. I would appeal to the Commissioners to do the right thing, to demand the modification of their business plan, which is very flawed, very flawed. Thank you for the opportunity to speak up.

Keeling

Anybody else have anything they would like to say?

Ermann

I would like to add something because I also, you know, live work in this community and pay taxes in this Community and I would just say is as somebody in this Community that I would

prefer to vote and make that decision myself than to have other people's personal beliefs, Dr. that I think putting it to the vote of the community is very, very important.

Strain

I'd say one thing just to address what you said, Ted, about keep an emergency room open and in that spreadsheet that Mr. Ermann gave to you, he has outlined a plan to keep that emergency room open by moving the hospitalists in there to take care of that emergency room as well as cover the floor and then if at some time if we get to vote on this tax and it does pass, then we can hopefully one to two PA's to help them either cover the ER if they have to go see somebody on the floor or vice versa. So, he has outlined a plan to keep that emergency room open, and I'd just like to point that out.

Keeling

OK! And, then we're still paying some very costly salaries for a hospital that has no services. That's my opinion.

Sledge

I'd like to ask a question. We're talking about a lot of plans and everything else that I still haven't heard how you're going to get by between now and if it does pass. Are you making any changes? Because there's no way that we can fund what you've been coming to us for.

Ermann

One of the changes that we'll be making is to the ER and Hospitalists which has a savings of about \$900,000 a year so I mean that will help. You know, we'll also have to look at staffing that you know is I think somebody said last night at the meeting you know that we may need to make some temporary changes where we slim down and then as things get better, you know Rebuild back to some of those things. We have to be very careful with staffing because we have a lot of Regulatory and compliance issues that we have to address on a daily basis, and we have to have people in those positions to assure that. We have the supplies we need to have meals for the patients that we are looking at infection control. When we're looking at quality I mean, there's a lot of things that we report on a daily, weekly, monthly basis. If nobody's there to do that, then you start to run into some of the issues that you've previously handed you back in you know, the 2015 to 2020 where the State Department of Health, CMS are coming in and you know doing audits of the hospital. You know, looking at operations and whether we can continue since 2020 when we've stepped in, there have been none of those issues. We've had three clean accreditations through the DMV and so it continues to improve, and you know there's a lot of that we can look at as far as service quality as well as the financial and the service and quality are really what drives the financial, so we had to focus on those, and we have to make sure we're providing safe quality care. We don't want to do anything to jeopardize that. So, we have to be careful with the staffing because we are tight right now. We have already made the reductions and we're seeing the benefit of those. You know when we put that first plan in place and presented that back in May or June, it included, we knew that there would be this shortfall and that's why we had requested ARPA funds to pay for the ER services. So, you know, that 150,000 if you go back to that initial plan we had in there, I think it was 112,000 for ARPA funds each month for the year services to pay for the year positions. Then looking at using this 30,000 and so you know, that's basically what we're still dealing with going forward. So, you know, we've done a lot of cost cutting with contracts. We've done staff reductions and we're running very efficiently with a very low number of FTE's. So, you know, we'll continue doing that as well as working to change this model with the hospitalist in the ER and that'll be 30 days to go into effect and then we'll, you know, consolidate. You talked about the clinic you know we have been

asked to reach the first clinic when I came here, and we did that. So, you know, now you know it's obvious it was when we knew then it would be difficult because volumes wouldn't be there and that's why we said, well, we could run it two to three days a week. However, we did lose one of the providers to the college. So, that's kind of made it very difficult to continue to run the Guymon clinic and the Hooker Clinic at the same time, and so we do have plans to consolidate those and that was discussed last night as well.

Sledge

I mean, I understand all that, but I guess what I'm trying to say is it's been mentioned several times over the 40% and yes, we know some of that does go to the hospital, but we do have a lot of other entities that have to provide for them. That I did want to know. Are we going to be seeing \$39,000 for payroll every two weeks?

Ermann

Until such time that we make these changes, and we further reduce the cost and have additional revenues coming in. This isn't what you're seeing here really isn't an uncommon thing across 50% of the rural hospitals in Oklahoma are at risk of closing.

Sledge

And I understand but at the same time, like I said, are we going to sustain without depleting the 40%?

Ermann

Right, and that's why we're bringing this because obviously for all that needs to be done in the hospital and you know, with the capital repairs with the growing debt and the previous debt you know, it's just going to take more funding and that's what a lot of communities have had to look at is you know, how do you maintain the hospital and the community? We've been very fortunate we haven't closed, and you know, we're not going beyond the funds that we're given.

Keeling

Well, and the only reason I haven't closed is the County Commissioners have supported it and fed it money and fed it money to the point that we're starting to endanger other services. We've got 911 now they're just struggling to get on their feet, and we just need to make things work.

Ermann

And if we had use of the full .45 that would give us an additional 53,000, but we don't that's being used for that previous debt from that management group.

Keeling

There are no plans for how things are going to be dealt with if this fails.

Ermann

Well, I think the plan I gave you last night will address it.

Keeling

And if this vote fails, then what? What are you going to do?

Ermann

So, then we'll go to this plan. That's why we provided this last night.

Keeling

If it fails, you can do this?

Ermann

This will move you where you need to go. Then this will get you to a positive number with or without the additional funds.

Keeling

In the meantime, we still have no vendors. We've got a lot of vendors that have cut us off. Is that right?

Ermann

We're still working with them and we're working on payment plans with them. As you know when you brought me here, Ted, you know we talked about the foundational issue for the hospital, and I was assured that the resources and the support would be there. I said, this isn't going to be easy. It won't be done in a year. It won't be done in three. It's going to take a lot of work but there's some foundational issues with the aged plant that's 75 years old and hasn't been well maintained, as well as the physician relations and the reputation in the community.

Keeling

I agree with that Bill, I do but we brought in a lot of higher paid employees in higher positions when there's a lot of hospitals, Cimarron, and Beaver County don't have all those extra physicians with that high pay.

Ermann

And they're struggling.

Keeling

Yeah, I spoke to Beaver County Commissioner and there at the same place we are right now.

Bickford

I've got questions, but I don't even know where to start. One question just from my own knowledge, just because I'm interested, the audit that we just said we would pay for, when was it initiated?

Ermann

We began that process close to over six months ago.

Bickford

And there was no audit performed prior to that?

Ermann

No, that's what made it so lengthy and so expensive because there had been a previous audit and prior to me becoming they were working with a group called BKD. BKD stepped away and said we can't do the audit for you guys. It was going to be too much work and too costly and they weren't sure they could get to the point that they could feel assured of where we were. So, we did find a different audit firm who audits hospitals, and they came in and they gave this animates of what it would cost and explained that because the hospital had not had audits in the past. You know, it would have to go back where their clean starting point, which they did. So, they basically began looking at 2020 numbers 2021-2022 and they audited to 2022. Once they had clean numbers in 21 so that's where we're at right now. Of course, they got to the completion and the auditors don't release or present the audit until they're paid. So, we did get the check until Monday. They're willing to present by phone once they have the payment in hand and everything is paid so it was just a timing issue with this meeting and them being able to complete their work. There were several delays in the process with the audit and so that was just something we moved forward because if we were looking at any type of loan or bond thing. I don't know how the hospital obtained any kind of financing or sales tax in the past without it on it so, you know, we begin that process. You know because we were going to need those going forward and so that's why we started that. That was just part of the strategic plan when we started this so.

Bickford

Thank you, Bill. So, I guess next I have just got a few questions about what it is I'm being asked to strap the taxpayers with and exactly the structure of all this will be so the .45 was structured to where every bit of the sales tax proceeds go into an account held by the county and then the County Commissioners administer those funds I'm trying to make sure that you know, we're not walking into something blind. We're not signing up because we don't see exactly what we just said yes to are asking the people to say yes to within this resolution.

Leach

It says the.

Bickford

Funds will be deposited into a revolving fund. I want to make sure I get it all right here. Sales tax revenues collected were sent to this resolution shall not be deposited into the General Revenue Fund to Texas County. All sales tax revenues collected subsequent to this resolution shall be deposited into a designated county sales tax revolving fund maintained for dispersal. All sales tax revenue received pursuant to this resolution by the County Commissioners of Texas County for the benefit and use of Memorial Hospital of Texas County for purposes set forth in this resolution. So, it still sounds like it's coming into a revolving fund and it, you know, shall be released by the County Commissioners but is that saying that? It's going to be our job and what we'll basically all will be allowed to do is every month give every amount that's come into the hospital directly.

Boring

Well, it says it's for the benefit of the hospital that comes into the county. I mean that gives the County Commissioners oversight to make sure that money is being spent properly for the hospital it's dedicated to. In other words, you can't take that money and use it for remodeling the courthouse or for other purposes; it is set aside for the hospital, but it's just like the .45 that comes into your account. It's set up the same way through the County Commissioners for approval for dispersal of those funds. So, you have some oversight into how that money is being spent, and what it's being spent for. I mean, it's not just a pass through. You write a check every month.

Bickford

That's what I'm just doing, OK? Because that's what I'm asking, because if I'm understanding right, that has been asked before, it shouldn't all the sales tax proceeds. That's my understanding to the .45 go directly into one of the hospitals accounts and the answer was that no, because of the way the original resolution was worded in 2019 that I mean, and I'll make sure I get all this right. I'll make sure I don't misquote it, but you know the way it was supposedly worded then was deposited in a designated revolving fund. Also, you know, getting through it says with the approval and authorization of the Board of Texas County Commissioner, all sales tax revenue deposit there and shall be dispersed only for the stated purposes of the sales tax for the benefit of the Memorial Hospital of Texas County. So, I mean, I just wanted to make sure nothing's changed because it's not worded exactly the same here. There is a little, you know, the line with the approval and authorization of the board of County Commissioners and so I want to make sure that hasn't changed. The other thing that I feel a little bit like is all kind of open-ended. We know pretty well, exactly what was or wasn't allowed with the .45. Capital improvement, repairs and maintenance of the facility, buildings, fixtures, of Memorial Hospital, Texas County, during any periods of time, Memorial Hospital of Texas County has operated and managed by Memorial Hospital, Texas County Authority. The cost and expenses of maintaining and operating Memorial Hospital of Texas County in order to provide services necessary and for the

health, safety, security and well-being of the citizens of Texas County and we're still pretty close to that. But it's, you know, a little bit shorter when you know purpose of the revenues is the sales tax levied by this resolution is hereby declared to provide necessary funding for the purposes of funding capital outlay, maintenance and or operations of Memorial Hospital. So, I understand that if it's still coming to us, we'll have discretion over what we do or don't approve, I guess, but there's no breakdown as to a guarantee on what capital improvements will be made. We have got this 48-year-old building that the Commissioners haven't properly maintained at this point. Well, there's no restriction here as to how much of it goes to operations and how much of it goes to maintenance of the building. So, I'm just slightly worried that you know it'll all get on another runner, right course and the building will never be maintained and I understand that if this is worded the way I understand that falls on us to make those decisions but I think that the taxpayers have felt like that they were, you know, paying for one thing and getting something or not getting something on them. Maybe not to the level of a Ponzi scheme that you're paying somebody to do something for you and then you find out you were never getting it. I was at the public, town hall meeting in 2018 to sell the .45. It was all about saving our hospital and you know, it was. I wasn't in any of the slides, wasn't in the handouts. But I do believe I remember Mike saying that in the event that it happened to revert back to the management of the authority that this money could be allowed for the operations, and it was definitely in the resolution and the ballot. So, I don't think that there was ever you know anything wrong? But I'm just letting everybody in this room know from the time before my time here, there were a large number of citizens that said, man, that was a baited switch. We thought this management firm was going to come in here and we thought we were paying to fix the building and do these upgrades to pay off the old debt, and now we're just managing the hospital. So, I just want to make sure that I'm as clear as I can be because I am like Ted. Okay, so maybe you're not going to ask me to go out and sell this and campaign, but the people feel like they ought to be able to come to the County Commissioners that are passing this resolution and ask a question and get an honest answer. And so, I just want to make sure that if I give them an answer as to what it is, I think this is going to achieve that we're all on the same page and hopefully we'll fix the building, but we're just authorizing more money for the purpose of running the hospital and hope some of it goes to the repairs of the building.

Keeling

You know, Levi, our County Clerk has had a really hard time getting proper documentation of how that money was dispersed and where it went to and where it was spent. She's had a hard time doing that to protect us as a board and this county. We put things in place over the past few months to make sure the documentation was there and was paying visitors direct so we know exactly where it went and that's another challenge that we've got to draft some new regulations or whatever in order to be able to document that because at the end of the day the courthouse is going to be the ones responsible for any money that was not going to the place we were told it was going. Now whether that's happened or not, I don't know. I'm not accusing anybody of anything I'm saying for this to work and for the county to be able to protect this courthouse and the other accounts we've got to have your documentation in hand before that PO is closed out. She's been under pressure over again you need to check we need it now. There are proper channels we have to go through, that's what she's trying to protect.

Boring

I would like to address your question. I think it was the wording that the County Commissioners were questioning. Going back to the original sales tax, many years ago, the

initial sales tax that the county had. Basically, the excise board had controlled that money. OK. That didn't work out too well from the Commissioners perspective and I don't remember the year, but it's been a long time ago the Commissioners asked that that the sales tax proposition be changed to where the County Commissioners had that oversight over any sales tax revenues. That's the reason that the wording has been like it's been in all the subsequent county sales tax issues is to maintain that oversight that the County Commissioners clearly expressed and have expressed continuously that the County Commissioners have some oversight over that money to make sure it's going where it needs to go. Okay, that's the intention of that work is, in other words, you know you don't want the money foolishly spent of course. Your primary control over that is if the trustees aren't doing their job, remove them and replace them I mean, we have a vacancy on the board of trustees now that's still vacant. But if these guys aren't doing their job, I mean they voted 4 to 4 to nothing last night to present this sales tax. If this is not what you think they need, then fire their ass and hire somebody else or either take it back yourself and figure out these guys have looked at this. That's what they think the best option is and what's necessary and you know, I get irritated, excuse me for being irritated. I'm not irritated at you or anybody else, but I'm just irritated when I keep hearing this crap about how that money was spent on the .40. I've got that presentation, and I can almost recite it to you right now. The primary purpose of that .45 was to get the money to pay off that old debt. Which was about 3 1/2 million dollars and we have done that and when people say that money hasn't been used the way for the purpose it was presented, that's just, to put it mildly, crap, because that money has been used and continues to be used for that very pure. In addition to that, at that point in time, you know, we had issues with SRP, OK? And quite honestly, I expected that was not going to last and that was going to be dumped back to the authority. We knew that there was probably going to be some excess revenue that was required from the bank to get the loan, that there be a reserve fund, that there be some excess to cover any drops in the sales tax. So that was specifically worded in there that any excess revenues could be used if the county got it back and only if the county got it back not that SRP could use it, but the county could use it or the trust authority for general operations, whatever it was needed for. I mean, I don't think anybody in this room can tell you what the priorities are going to be. To say, yeah, three years from now, if we get the sales tax, we're going to do this to the building and that to the building and something else to this. We don't know that today. I mean what we know is what needs to be repaired today. But you got to make payroll, you know, and that's reason that's worded broad enough to cover everything.

Bickford

No, I agree. I agree. I don't feel like they're saying I don't believe that there's been any deviation necessarily from what was or wasn't outlined as to what the sales tax could and can do. I'm not arguing that. But I know when and you know, I'm not an attorney. That's why we have you and Buddy here. But I still think that just as a citizen and a voter that there is the letter of the law and the spirit of the law. I'm just saying here that I believe that, yes, the letter of the law allows for every bit of that, but I think the spirit of the law was to hopefully have in times of you know a positive revenue at the hospital that would be doing the other parts of its job. But number one primary was paying off the whole debt and it does that. That's the number one thing that before anything else happened, it does that. So, I'm not arguing that, but that excess revenue then would do other things, and if there was positive revenue, the first thing it would do was go to upgrade to the building and as Ted said, when we toured that building, a few months ago because we were starting to, you know, you guys as a board and we as Commissioners were all starting to feel major complaints from citizens that were going in there for services and heat wasn't

working, air conditioner wasn't working, something wasn't working, you know, we were trying to figure out before we address first what? And we found out that there was an assessment in 2020. Maybe I'm way wrong, but when I first started gathering information about the hospital a couple of years ago there was some positive revenue through COVID. Yeah, there were, you know, injections from, you know, federal stimulus but there was also I think you know, had there been some amount of revenue being generated for utilization strictly because we got into pandemic and people had no choice but to utilize the hospital and so there was a bit of time that where there was positive revenue and yet it appears nothing was done towards that assessment done in 2020. We just sit there and let go and then until things are at catastrophic failure level and all of a sudden, we're in an emergency, we got to start tapping into the .45 and the .40 every maybe not every week, but multiple times a month, sometimes to try to fix things. I think could have been addressed a little bit sooner during that positive revenue stream. Now we'd still probably be exactly where we are today with the overall process of where you know why we're here and where we're at, so. You know.

Keeling

I apologize, I guess I'm confused. Mike just said the old AP was all taken care of. Bill said a lot of that debt is the old app we're trying to take care of.

Ermann

1.7 million of it.

Johnson

I think he is talking about the bank note.

Bickford

They're saying the same thing. The .45 is doing its job in paying the old debt that was accrued before 2018 through the .45 by paying the note at Anchor D. Bank.

Keeling

OK.

Boring

That's clearly in that presentation, you know, people didn't have to read too hard between the lines to get a clear message. That if that sales tax didn't pass, those doors were going to be locked pretty damn quick because there was no money for operations. There was no money to fix anything. There was no money to pay bills and what we were doing was just assuring that if we had to close the doors, all that whole debt was going to get taken care of. That that's really what we were doing, and I don't know that we promised anybody that all of a sudden, we were going to have a positive cash flow I don't remember ever saying that.

Keeling

You're saying that, but I'm saying we are repeating the same thing with the same results.

Bickford

No, and I'm not saying that you attenuated that at all. I'm just saying that the course of events at this point have been, there were times that I personally thought that there could have been more being done towards what the people thought they were getting out of their sales tax money right then.

Keeling

And we're being told that if this vote fails and we've depleted what money we have we still got to figure out how we're going to pay the rest of that off.

Leach

What are they going to feel they aren't going to get out of this?

Keeling

So, between now and the time of the vote. We're going to waste a lot of money. I don't know how we're going to have anything in reserve to take care of a lot of things that we're going to have to clean up.

Carter

Mike, I think the comments that are relevant, that the trustees, I've been as a Treasurer since we've had brought on board is we have been very careful and dispersing any of the money that came in from .45 sales tax. It's always been approved totally by the board. Any payment we made to vendors; the only exception might be with any other vendors. We have paid attorney fees at times. We have made settlements with some vendors to get produced so that I don't have an exact figure from where we started. We owed a lot more and we actually ended up paying vendors because we were able to make a lot of deals with them. We were also looking at things to ride to the expiration of time. But today we had, and we've written off all these expenses through the hospital as of today, all the monies that was expended with directly to the hospital from the trustees, they then expended it to purchase or to pay off the vendors. We now have written off all those debts we have \$40 thousand still on the account to remain and we have about \$35,000 to \$30,000 thousand of old debt that has not been terminated mean these people \$30,000 worth of vendors could come in to us and ask for payment it's probably 99% sure they won't, and that will be written off at this next July or next June, and one of the things we did run into it and you touched on when we took over from the swims group. They had done major cost cutting around the hospital. I mean, they had let people go like you wouldn't believe personnel were gone they had cut the OB ward. All these things had happened and so when the county took back over and one of the things that we saw really early we had to fulfill key positions that we didn't have people in and that took a period of time. Then we come along, we get COVID. I would take my hat off to the administration at the hospital in this sense, I know of a lot of hospitals were COVID went out because what you had to have been coverage of personnel before you could even take patients and we had to divert some patient because we didn't, we didn't have enough personnel. There wasn't that much, but we did divert some to other hospitals, and had to divert patients too. What we did not do in this hospital, that a lot of other hospitals did, and they're still paying big bucks for it, is we didn't hire contract labor and that saved this us and allowed us in this case to stockpile a lot of money a lot of because you can go out, you pay the bucks, you can get a nurse. We didn't do that. Hospitals that did incurred a lot of money. So, I think we did a lot of effort through the COVID, and the repairs of the property were done. We had some help From for the Corps of Engineers different times and I don't think what Bill is saying is that it's just that the bill is not ready to fall in today obviously it does need some work. It will take work overtime going to continue. It doesn't show I can't take any building It doesn't need to be somewhat maintained throughout its life but no, I just wanted to reiterate to you guys that money, that's been there that's been well protected by the trustees and all of us gone directly to hospitals. But on the other side of the coin when we look at John Garrison and myself has spent a lot of time with the hospital on finance meetings for several years now. We spend probably. And as much time with that finance as we do with the board, and I just keep on coming back to it. I believe that the county has done real well since we took back over this hospital. I mean truth, Ted says that like, it was amazing.

Keeling

I agree it's been better. But you know, I've repeatedly been told. By the public and by some of you all. If this fails. It's the commissioner's fault. I don't know how you can put that off

on us. When we've expended to the point that there's barely nothing in the .45. Over \$8 million at the 40%. We've done our best. Okay, for 17 years I've sat in this office, and I've fought to save this hospital, but I can't agree personally. That's where we're going now, I see this repeating the same thing. Over and over again. And I believe if it passes, if we put it on the ballot, if it passes, the public's going to be told, and all of us have this fear. What happens when we have a loved one has no place to go? That's going to be put out there. It's going to be scaring these people into voting. And at the end of the day, if it passes, if we allow it to go to vote and it passes, I see the same thing happening. We got to get a bond issue, we got to borrow money. We got expended. I see it's being expended without being able to heal the relationship between the doctors and the administration. In three years, whoever is sitting in these chairs are going to be in the same boat, and if it fails, the taxpayers are going to be stuck. Until this resolution is done. They're going to be paying for something that isn't there. He knows the public is going to be aware of that.

Ermann

Can I clarify about the COVID money? We couldn't use those funds for repairs and maintenance. They were restricted use funds. They had to be used for direct care of COVID, you know, supplies. They were those types of things so we could use those.

Bickford

I'm not saying that they could have. I'm saying that you have that you're supposed to do other things, so it should have freed up the .45 money to maybe concentrate on upgrades to the building.

Ermann

Well, without those funds, the hospital was already operating at a loss. It wasn't positive.

Bickford

OK, I understand.

Ermann

So, the funds weren't there. They did assist us with supplies, labor, and those types of things, and that's why we didn't make any requests to the point for by fund for so long and it was able to build up to the balance that we're drawing from them.

Carter

The last thing too, Levi. Exactly when some of those last sales taxes ran out, they did run out. And the only thing we were left with was the .45 coming to the hospital and I think that's going to be the important part for the residents of the county to understand is that the only and I call it income, it's called dispersed funds or whatever. But the only funding that's been available to the hospital where they've been the county's part for there's no others. There's no other sales tax or revenue source going to the hospital for a number of years. That that's just not just the last three. It started that right. Now quite a while back.

Bickford

No. And Mike illustrated that in the town hall meetings is there at one at one point in history been a full one cent to the hospital and better judgment that was allowed to be split up and what is now the 60/40 and it did leave the hospital in a bit of alert, but it never would have 100% taken care of itself.

Boring

Back in the early 80s, there was no county sales tax. There wasn't a county sales tax until the hospital was on the brink of closure and has ever been as bad a shape as it is right now, and the hospital board asked the Commissioners, and the Commissioners presented the people's request for once. Its sales tax, which was passed in a matter of about five years, the hospital had

built the east wing patient, that whole east wing patient room and paid for it. They bought over \$3 or \$4 million worth of equipment and paid for it. They had about the start of the 90s, they had several \$1,000,000 in the bank to do the addition on the west end, where the new ER is and then they had quite a lot of money in CD's. I mean, I'm talking more that way, more than \$1,000,000 in CD somewhere. The hospital was doing quite well. A big part of that was initially in immediately when that sales tax was performed because the doctors then we're not using the hospital, the hospital board immediately started recruiting physicians. In fact, the first two physicians were Dr. Hianto Te and his wife and there were considerable number of recruitments following that of general practitioners, mainly OBGYN, pediatrician, I mean things like that. The hospital did quite well at that point, and it was making a lot of money. Plus, it had the sales tax revenue coming in. It was approached by the County Commissioners to give up that one cent sales tax, which I think was the biggest mistake the hospital board ever made and probably the County Commission in order to build and a big part of that was, there would be some revenue there and the 40% money left over for the hospital. I think, quite honestly, the hospital has every right to expect that if that 30% is needed to keep the hospital open and provide those critical services to people in Texas County, that that money be by golly, available to do that.

Keeling

That even at the cost of putting 911 at risk as well as rural fire and EMS?

Boring

Well, 911 wasn't getting any of that original one cent money. That was all going to the hospital. To keep the hospital open. That's all I'm saying. I don't know that they're asking for all of that money. I mean, I think rural fire is doing quite well.

Bickford

The Sheriff's Department?

Boring

Well, and there, I mean they've done quite well, I think. 911's done pretty well, I think these other people are doing pretty well. I don't know that replacing the signage on the fair building out there, those two letters is quite as critical as having an ER and a place to put patients. I think that's the decision County Commissioners have to make. But I think it's worth noting that this sales tax stuff was originally devoted to the hospital and all I know from experience I mean, literally, I've been on the hospital board for a year. When I got on the hospital board, there was just like three of us and one died and one moved, and I was somehow in charge of the hospital board and barely knew where the hospital was, and I went by to check on it one morning out there and the lights were off. The administrator said yeah, I was just fixing to call you. We're going to have to close the hospital. We don't have the money to make payroll. That was on a Monday morning, and I came directly here and the Commissioners at that time and said guys, I got to have a board. We've gone on without a board. We haven't been able to have a meeting for I think it was four or five months and the Commissioners told me you get the board members, and we'll appoint them today. I went and got those board members, and we started meeting and we came with the sales tax and that hospital turned around very quickly but it was because we had the assured revenue coming in from the sales tax, that's critical, but nobody understands that the hospital needs to know kind of what revenue it's got coming in just like the Commissioners and the Sheriff. You guys pretty well know what money is going to come in from the sales tax now. Yeah, it can change, but that money is consistent enough for you to know. I can kind of count on this much revenue coming in the hospital's not in that position. They need that position, it's critical for them to plan and do a budget and to have something that

they can kind of say, OK, we can count on this much coming in every month. So now we can kind of plan what we can do, kind of plan fixing the roof or replacing an air conditioner, or recruiting a physician, or keeping the clinic open in Hooker, but right now? They don't have that ability. I mean they know what they got coming in from the .45 but that's not enough excess revenue for them to really plan to do anything and I personally think if the people approve just a straight full one cent sales tax that it gives this board and this administration the ability to put together a plan to start getting the hospital back in a positive direction. Without it, I think it's hopeless and I'm not sure quite honestly, if the .55 is not added to what they're getting, the .45 is going to run out pretty soon, and I don't think you're 40% if you used all of it, it's going to keep just ER open out there I mean you, better scratch your head on that one.

Keeling

It's pretty tight and that's why I've said I can see supporting the sales tax. To be used to sustain the ER until we can get into better times, because right now, with the economy and the way things are going the cost to run a hospital is crazy and like you said, Mike, there's hospitals all over the state, county hospitals are failing. The only ones that are surviving are corporate hospitals, and we've talked to them about a merger with them. But with the way this hospital has been managed and the debt that's there, nobody's interested.

Boring

Yeah. Well, and plus location, we're so far away from other places, but it's just not feasible.

Keeling

I'm sorry. It's my opinion that we're just repeating the same process and getting in the same place.

Wadley

Like to comment on the on the fire, EMS, 911. It seems like the fire, EMS and 911 we are reactive to things that go on in our communities, not just Guymon, not just Goodwill or Texhoma, but the fire departments in Texas County, there's eleven of them and they're served by volunteers. One of the things that's just like everything else that's going across the country, including like medical care, is the lack of people. We don't have the volunteer ranks that we did over the last three to four years, the Texas County fire departments have joined on high fire days and other days when there's a fire, we all have to come together. We are not able to handle or take care of events without each other's help without the small support of the 40%. That 40%, regardless of what would happen to the hospital, must maintain what goes on outside in the rural areas, EMS for the last three to four years, Guymon EMS, along with Hooker, we have plans if certain patients have certain conditions, we cannot bring them to Guymon hospital we have to either go to Liberal, Amarillo or calling air support. We have to do certain things. I can't tell you how many. I think we're up to probably 3 to 5 baby deliveries on the side of the road or in the back of an ambulance or in curbs here in the Guymon area and elsewhere Texhoma because OB services were struck down. Guys, that 40% is very vital for outside the hospital, it is absolutely 100% vital for every citizen in Texas County and anybody that drives through Texas County to know that they have that. I understand the .45 goes to the hospital and that's fine. I think it just needs to continue. I think if a proposal comes up for the sales tax, it needs to go to the people. But understand because I'm fighting for everybody that's on that 40%. Because it's vital no matter what happens. We have to have things in place whether the hospital stays afloat, and we have to do that also, so please understand this 40% of how important it is to us.

Keeling

Any further discussion?

Boring

Let me clarify, I agree with Grant totally. I think that 40% is vital for rural fire and the other services in the area. The point I was just trying to make is things are going to be tight for two or three more months at the hospital and regardless of what's been spent in the past, I don't think any of it's been foolishly spent. I think Commissioners have been wise and what they've done. I think they've spent money on what's been necessary and required and I think it may take another two or three months to this plan, I mean these numbers. It may take that commitment for a couple of three months until this all gets kicked in and this cash flow gets lined out. I don't think that's necessarily to the detriment of 911 or real fire or anybody else.

Leach

A couple things on that resolution, the reason that there's wording out of it is because at some point in time the election board with regard to the ballots, they require it to be a minimum limit number of words. So last time we did it and we had to reduce it by a bunch so that they would put it on a ballot. So, there was terminology that's been removed, but it wasn't done for its substance it was just words we had to get out of it, so they put it on the ballot, it's all still there.

Bickford

The current wording doesn't change how the money is administered or what happens.

Leach

You know the only thing with regard to the document expense that you guys brought by to me everything is set up for the 6th. So, the resolution and stuff we probably want to change it to the 8th. Bill, no one wants anything to be confrontational on this, so the Commissioners aren't really talking about everything. So, when you guys look at a few things as far as what their concerns are, and then you can address it and then we can talk to them. When we ran the numbers, it looked like that in the last 22 months that not including the money was paid to Anchor D Bank but that the County Commissioner had given the hospital about \$3.7 million. So, you take 3.7 million dollars and then you take your current APs whatever they are. I'm guessing it's more than 1.4 when all is said and done. It's going to be over 5 million. So, you divide that by 22 and you have \$227,000 a month, so it would appear that \$227,000 a month being spent on the hospital was not enough to get the hospital in any better position but in fact the hospital has gotten in a worse position so the thinking in their own minds that if this sales tax passes and it brings in if it's \$119,000 a month, whatever it may be. That's not \$227,000 a month. So, you've talked about and said that the hospital's losing money. You told me at one time like \$140,000 a month today, you may have said \$150,000 a month and I may have missed it. So, you changed the ER coverage and that's going to save \$75,000 a month, so one of the other items that you're cutting back on in order to address the \$150,000 shortfall.

Ermann

You know right here using this model it would be a lot in labor with administration and non-administration on the \$227,000 a month. I think the reason your number may be high is that I've not seen that report and I'd love to see it just to see what they paid for it on, because if they were capital items and not operating because when we request money out of .40, it's not for operation. No, I mean that's what that plan is. It's for capital items and so that would make a big difference if those were our funds that are you. When you say the 277,000 does that include .45.

Leach

No, it was total monies that were spent on the hospital.

Ermann

OK, so a lot of those monies were spent on operations then they were used for capital.

Leach

Money that the hospital needed to survive, whether it's capital whether it's anything else.

Ermann

Well, it could have been \$250 for a roof.

Leach

But it runs out of money. The county is running out of money, so it doesn't matter how much money has been invested so that's the investment.

Ermann

We wouldn't need those monies again once the roof is fixed. It's fixed. It's not a repeating expense. So, when you make those repairs, that's much different than spending money on operations.

Keeling

And my point was. We rebuilt an operating room. Once it got up and go and you closed it, we've updated replaced things. With nobody to use them, no vendors to supply. To take care.

Ermann

Right.

Keeling

And what? You have two choices. We keep talking about volume. We're going to increase this volume well, the people who live in this community has been seeing Dr. Te for 25 years. You're going to tell me we're going to bring a new guy in, say, come see him instead. I'm not leaving, Dr. Te, he took care of me most of my life.

Ermann

It doesn't quite work like that, though. When we came in, you know, we were looking at a \$4.8 million loss. So, what do we cut? There were three consultants here. You know making 350 to 400 thousand of the year working 3 weeks a month, we were covering their housing, I mean.

Keeling

Now we're doing the same thing with administration.

Ermann

Well, no, they had a cost of 1.2 million. 3 VP's that came in to replace them at a cost of 360,000. So, I think there's quite a bit of savings there that first year, just in removing the consultant that they placed here to run the hospital and we're accomplishing anything. No bills have been dropped in six months. That was a result of that revenue cycle consultant that was here. We haven't had an audit that was the result of the financial consultant. It was here, and so things weren't getting done and we would have, had they come in to do our accreditation survey. We probably would have felt because there was nothing being done there. There were no quality meetings, there was no focus on service and so there were a lot of problems walking in and so we got all that low hanging fruit and fixed it. We fixed it quickly when I came in. There was snow on the roof that started melting. We had probably 50 buckets throughout the hospital catching leaking leaks in the roofs and in common. Patients by patients, patient rooms we came to you and requested funds for that out of the .40 and we got that fixed. We had holes in the parking lot. People couldn't safely walk through the parking lot. You all came in and you fixed that. Those are the things that we were requesting from the .40. We weren't requesting money for operations and so and we didn't request anything from .45 for up until this past year. So, we went a couple of years without having those issues other than the age building and making repairs and maintenance that we couldn't afford to pay for out of operations and so, you know, and we were

working very closely with all of you, and we appreciate all the items that you did help us fix. But it's an ongoing list and you know and so the 227, yeah, that's a real number the three million. But a lot of that those types of items.

Bickford

Buddy said that was just a need period.

Ermann

Right.

Bickford

And we only have so much money to cover the need. Whatever it may be, what can we do to make sure that that either the .55 or the .45 All the need. Well, I don't I think what we're trying to say, we don't 100% see that we're going to be able to work with it.

Ermann

The .45 will not fix the plant. It will not pay off the debt. There's not enough of it. We don't get the .45. We get about 38% of that. And so, that you know, the .40 is not enough to support the hospital, the EMS, so we can't keep pulling from that to fix all the things that need done in the hospital without the additional funding, there's no way to. I mean you could, if you know, with just the sales tax and no bond issue at 1.8 million. If all of that went into paying the debt, you would have the debt paid in four to five years and then you could use the 1.8. Another, after all the debts paid to purchase the new imaging equipment and get out of the high-cost leases, you're still not addressing any of the infrastructure issues. Everything is just getting older and so then maybe in five years you will be able to use that sales tax to begin making some of those 3.8 million in repairs. That's that 1.8 million that's going to take another two or three years. Assuming that list doesn't grow, so it's not possible. Out the point that additional .55 to be able to address everything the hospital has to address with operations or with capital improvement.

Bickford

I want to I want to make sure everybody gets to finish his thoughts instance, but I guess. It's just personal again. It's my thoughts and beliefs here, but what you're saying is that basically we're just trying to ensure that no matter what happens with the management of the hospital, that it functions to a level that we're saying that it has the function to and what I'm getting out here I guess is, I wasn't there last night and I apologize, but with the plan that you're saying is if this goes to the people and it doesn't get voted in, then these measures would basically be implemented. And I think what I'm not, I'll let him clarify but I think what that's what's on my mind and I appreciate Buddy bring it up because I had been in a fog, and I forgot all this aspect. How do we make sure we get to January 9th or the point in May where the proceeds become available? If that isn't implemented sooner than that to get us down below this 227 number because we don't know what needs are going to arise, it could all of a sudden shoot up over 227 in one month and we don't have that. And so, you know, one other thing that's basically I'd say that with this plan, this is, yeah, it's a safety net. If it's an assurance that if nothing else goes right, there's enough sales tax money to operate the hospital. So, I mean, pardon me, but I just want to know anybody in this room at all. A fan of and happy to have ever had the Affordable Care Act implemented. And why not? Because it's socialized healthcare. So, if nobody's a fan of the Affordable Care Act and why are we being asked to shove the available healthcare act down our taxpayers, still at the same time? Now, I'll let Buddy continue because I think he has some very pertinent information and some questions I think I'm going to yield to Buddy Leach.

Leach

So basically Bill, what your thoughts are is that by reducing basically employees, I mean if the county is giving you approximately 36,000 a month and you can control the other 39,000 that way.

Ermann

If I'm following you, yes.

Leach

Well, you reduce the 150 by 75. You're doing that with ER coverage and then the county gives you approximately 36,000 a month or whatever. And then that would still yield -39,000 approximately, maybe that's correct.

Ermann

The Commissioners and the board have and that might help.

Leach

So, your plan was to do that basically give employees that you had to.

Ermann

So currently for the last two months we've been operating at this level without additional .55, right? So, we would continue doing what we're doing now relying on the 39,000 that are getting from the .45. Well, the reason that there were two is because we weren't able to get it.

Ermann

The previous period, because of the timing of board meetings and Commissioner meetings, makes it difficult and with that, we just had a request for the previous period to pay it with the current period.

Leach

I guess that you all are probably into to a certain degree, and this is just speculation, but you all are having to work with the vendors in some fashion so that they're not suing the hospital for the monies that are owed to them. So, are you all also getting a certain amount of money to them in order to kind of keep the wolves at bay?

Ermann

So, we have payment plans with some of the vendors where we pay the current plus the payment plan.

Leach

And the \$150,000 shortfall, is that part of that shortfall or is that something that the hospital needs on top of the \$150,000?

Ermann

No, the 150,000 is the short and all it includes.

Leach

It includes that. That one of the concerns were if the hospital starts getting sued from the vendors, then basically there would be more cost and expense with regard to staying off those lawsuits. The hospital owes the money. So, I mean, you're defending something. But still, the hospital owes the money that you know, I think if they ever start and garnish any of your accounts receivable or hitting your bank account with regard to judgments, and at that point in time the game would probably, up. I mean it be so look at that.

Ermann

Just like if you don't make a payroll, if you.

Leach

That's what they were thinking.

Ermann

Don't make pay your energy.

Leach

About as far as looking at the whole picture, right? So that's what's been running through their mind? So, then they were looking at the sales tax and because of all those numbers, they were just concerned that it was going to be, you know, more than a drop in the bucket but it just wasn't going to be sufficient. We might not ever get there and if it was passed it, it may not be sufficient in order basically get the hospital in the black and keep it operating. So that's what the thought process is and that's what their concerns are there.

Ermann

And yeah, and that's why, you know, having the bond issue tied to it, which we're not doing, is important because you can pale that down immediately. You can get it at a lower interest rate, and you can spread the payments out over more time, which could be done on an easier basis through the proceeds.

Leach

But the benefit though and if you can cash flow, it on the bond issue. And you're spending \$15 million in interest, you cash flow it over with sales tax, you're not spending that \$15 million in interest, you're getting all that money to use for operation.

Ermann

Over 20 years.

Ermann

Although paying it now, I mean the Anchor D Bank Loan, you are paying interest now.

Leach

But very little compared to what?

Ermann

The dollars that you're paying at 10.5% interest. So, if you refinance them at 8, you save 2.5, you're actually reducing interest expense. The AP amount you could pay all at once and you could take the vendor you know, take the vendors out of the picture and you wouldn't have to worry about the lawsuits that you're talking about or the cost of working with that and so it makes it all much more manageable over a long period of time.

Leach

The thought process in the past and I believe what was what came forward was that the hospital can make it and it could cash flow, it could just get rid of those AP's. Those accounts payables were killed in the hospital because they just couldn't make it. They got to pay, they got to have money for the vendors, they had to count payable. It just it wasn't going to work so.

Leach

Took care of all that old debt the hospital, the cash flow. So, they go in there, the people support it, and you take care of the old debt. That the hospital didn't cash flow. The problem with the bond is that's not helping your cash flow. In the future, you're paying \$15 million for interest, so if you not worry about the bond and if you can get this money, so you have a constant revenue stream forever for 20 years then that money is always coming in, as opposed to that money not coming in because you use all of it today, and then you have to cash flow.

Ermann

We all understand that. But sometimes you know, you can't afford to go forward. I mean, if we don't do that and we just go off the sales tax, we still have all the issues with the capital improvements. And how will you afford to do those? Unless we keep coming asking for the .40 money. And there's just it's not sufficient. It's not sufficient for the jail, the hospital, for EMS,

when we're all sharing that, it's just coming to the point that, you know, as we've talked about it at the meetings, you know many communities are providing additional support for their hospitals because of the hyperinflation that we've had to deal with on our supplies, our labor costs, we don't get paid the way other businesses do. Our reimbursements are tied to contracts with Medicare and Medicaid and so on. Those reimbursements haven't increased at the rate that our costs have increased. And so that's one of the things that all hospitals are dealing with right now. And so many are struggling and so communities are just deciding, do we pair down the services that our hospital provides at a reduced cost that way? Or do we get additional funding so that we can continue providing services to the community at the level that they expect that that provides them good access to care. So, access to care could be in the hospital. It could just be it could be in patient services. You're diagnosed with it. It could be your just your ER. It could be just your EMS it just depends on. On what the goals of the county are for the hospital and for access to care in this community. So, we'll work around whatever parameters we're given. If the direction is to go just the ER, then we'll look at that model. That's not been a model that a lot of hospitals have moved to. There's concern because it's such a new model that you know, everybody doesn't understand yet. Will it really work long term? Or will it just reduce the services on that continually have downward and so you know, we'll continue to work at our options that are there. I presented a plan that would reduce this administration and you know, but there's concern that there would be no leadership in the hospital to move things forward once they're gone. So, if that's the direction that you would like to go then.

Keeling

That's why that's not our decision. That's the board's decision.

Sledge

The board that likes they're saying remove all the administration like that and that's all that was ever said.

Ermann

We'll move that forward. Well, our part of this is just a discussion draft and so you can take all parts of this. We don't make the decisions, you know, we're asked to present plans and so we present plans that have different options. And if the, you know, if the strategy or the direction of the board and the Commissioners is to go a different way than you know, that direction would help us too. You know, set of places that affect.

Leach

It's not about anything that has the source quote.

Ermann

Because I provided a plan.

Leach

They said it's not about anything that anyone didn't do or anything like that, it's just a question of just a question of making it. So, I visited with you. We were in here about, I don't know, year and year and a half ago and I told you I said you need to get with the County Commissioner because there's going to be a day where they're going to tell you no with regard to additional money, you needed to know what where that line was at. You need to know where the line was and how it goes. You need to know where the line was that you guys were on the exact same page so you wouldn't come in here one day and they say there's no more money and the hospital closes. So really what they need. You deal with whether it's just making an emergency room, if that's all it is, you're the administrator. You have to make this thing work, and if in your opinion to make it work, it's just going to be an ER, then it's just an ER.

Ermann

You do understand, I work at the direction of the board. I can't just say we're going to just open an ER; I can't just say we're closed in surgical services. Yes, Sir.

Leach

You can visit with the Board, but you see what I'm saying. It has to make it. We tried this; it didn't work. Maybe we should have just done an ER. We're going to redo now, and we need more money from you, but there is no more money, so I think here at the point right now, they're not going to tell you what to do, but what you have got to do is you have to make the thing work. You know what the limitations are, you know what the money is, you just need to make it work.

Ermann

We've been making it work and I understand that we had the discussion back in May, when we did the cost reduction. The reason we started down that process is because I was told by the Commissioner's we have no more money to give you, we have to reduce cost. So, we put a reduction in force in place. We closed surgical services which we had previously in this direction. Let's rebuild surgical services because when we came in, it was not, it was not sustainable. You can't sustain a department that size with 60 to 70 surgeries a year, so our plan then was we either increase the number of surgeons and the number of procedures we're doing to cover cost, or we close it. So, the first attempt was to build those services. That failed. We didn't have the support for the positions that we were brought in. They can't get busy if they don't have support from local physicians. That's one of the foundational problems that you've dealt with for years here so then the decision was because there's a ramp up period with surgery and the Commissioner said we have no more money to give you. That is completely understandable. They work with limited resources the same way we did so then we put in a plan to reduce those costs, that not all of that plan was approved. We did not get the funds we requested from ARPA to cover the cost of ER services, which would have controlled this number while we saw well, what else will be reworked. The plan, whatever that may be, whether that's going to just emergency services or something else. And so, we now are working to move this plan forward, but we have to bridge the gap because part of that plan is there's just not enough resources to support the operations of the hospitals based on the volumes that we have, based on the sales tax revenues that we have. So, to make this work, we have to bring forward another source of funding. While we're also looking at how do we control the gap, do we continue just working hard to keep things made like we've done in a few months? Do we reduce staff? So, I brought that plan. Whatever is approved to do from that plant we will make work but again, I work in the direction of the county and the Board, so whatever direction we have, that's what we will make work.

Leach

They just wanted the cash flow.

Ermann

OK.

Leach

They're not going to give you any directions.

Boring

Gentlemen, excuse me, I need to be in court now. If you all have any other questions that you want to direct to me, I need to go.

Keeling

I believe we're done.

Boring

I'm not trying to rush you, but I have to be in court.

Keeling

Myself, I've got one in mind.

Bickford

You don't want in mind, I mean. Or whether we can counter motion. I mean, whatever's on your mind.

Keeling

Yeah, my motion is to deny this request, to not approve it. I need a second where it fails for no second, it's your decision and you have the right to make the decision you want. Just as I have my right to what I feel. So, do I have a second?

Sledge

I don't like this anymore than any of the rest of you do, but I don't know what y'all feelings are, but I kind of feel like maybe needs the good and the people to let them speak their mind. Well, I mean, I'll.

Keeling

Have a second if you want to make that motion. I feel like with what's proposed. It's not going to make it. We'll be right back where we are. But if you want to make my motion fail for no second. Then I'll accept your motion with the 2nd.

Sledge

Your thoughts Levi?

Keeling

I can't second.

Bickford

My thoughts are that it's been on a bit of a crash course for a while and if we don't, you know at least let it go to the people. If we just stop right now then the course of action will be to throttle up, gain as much altitude as you can till the engine stalls and then come in hard like a Tojo 0 coming into Pearl Harbor. We do still live in a democracy for now, and I'm proud of that, and I want to defend that. So, I will second motion to take this to the people and let them decide.

Motion by Sledge, second by Bickford to approve **Resolution #96-23-24. A RESOLUTION AUTHORIZING AND DIRECTING THE CALLING AND HOLDING OF A SPECIAL ELECTION IN TEXAS COUNTY, OKLAHOMA, FOR THE PURPOSE OF SUBMITTING TO THE REGISTERED, QUALIFIED VOTERS OF SAID COUNTY THE QUESTION OF LEVYING AND COLLECTING A COUNTY SALES TAX OF ONE PERCENT (1%) UPON THE GROSS PROCEEDS OR GROSS RECEIPTS DERIVED FROM ALL SALES AND SERVICES TAXABLE UNDER THE OKLAHOMA SALES TAX CODE; PROVIDING FOR THE EFFECTIVE DATE OF APRIL 1, 2024, WITH A DURATION OF THE SALES TAX FOR A PERIOD OF TWENTY (20) YEARS; FOR THE PURPOSES OF FUNDING CAPITAL OUTLAY, MAINTENANCE, AND/OR OPERATIONS OF MEMORIAL HOSPITAL OF TEXAS COUNTY, INCLUDING BUT NOT LIMITED TO EQUIPPING, MAINTAINING, REMODELING, REPAIRING, FURNISHING, AND/OR SECURING AND APPLYING SALES TAX PROCEEDS TOWARD THE PAYMENT OF PRINCIPAL AND INTEREST ON ANY INDEBTEDNESS, INCLUDING REFUNDING INDEBTEDNESS, INCURRED BY OR ON BEHALF OF SAID HOSPITAL FOR SUCH PURPOSES; PROVIDING A BALLOT**

TITLE; PROVIDING FOR THE REPEALING AND ELIMINATING THE EXISTING FORTY-FIVE HUNDREDTHS OF ONE PERCENT (.45%) SALES TAX CURRENTLY BEING LEVIED AND COLLECTED FOR THE BENEFIT OF MEMORIAL HOSPITAL OF TEXAS COUNTY EFFECTIVE APRIL 1, 2024, IF THIS RESOLUTION IS APPROVED BY THE REGISTERED VOTERS OF TEXAS COUNTY; PROVIDING FOR NOTICE TO TEXAS COUNTY ELECTION BOARD, POLLING PLACES AND THE CONDUCT OF SUCH ELECTION; PROVIDING SEVERABILITY OF PROVISIONS; AND REQUIRING APPROVAL BY MAJORITY OF REGISTERED VOTERS VOTING AT AN ELECTION HELD FOR SUCH PURPOSE AS PROVIDED BY LAW.

WHEREAS, it is deemed necessary and advisable by the County Commissioners of Texas County, Oklahoma, to provide funding necessary to continue and provide for the capital improvement, maintenance, operations, including but not limited to equipping, maintaining, remodeling, repairing, furnishing, and/or securing and applying sales tax proceeds toward the payment of any indebtedness incurred by or on behalf of Memorial Hospital of Texas County; and

WHEREAS, there are insufficient county and hospital funds available for such purposes and power is granted to said County by Title 68, Oklahoma Statutes, Section 1370, as amended to levy and collect a sales tax to provide for such purposes providing the same be authorized by a majority of the registered voters thereof voting at an election duly held for such purposes;

WHEREAS, it is the intention and purpose of this Resolution that if approved by a majority of the registered voters of Texas County, Oklahoma, voting on the same in the manner prescribed by law, the current .45% sales tax levied by Resolution No. 50-18-19 and approved by the voters of Texas County at an election called for such purpose on march 15, 2019, shall terminate and cease effective April 1, 2024, and from and after said date only the one percent sales tax as provided by this Resolution shall be levied and collected.

BE IT HEREBY RESOLVED BY THE BOARD OF COUNTY COMMISSIONERS OF TEXAS COUNTY, STATE OF OKLAHOMA:

Section 1. Citation and Codification: This Resolution shall be known and may be cited as the Memorial Hospital of Texas County Sales Tax Resolution of 2024 and is hereinafter referred to as the "Resolution".

Section 2. Proposition: There is hereby called a special election in Texas County to be held on the 9th day of January 2024, for the purpose of submitting to the registered voters thereof the following proposition:

PROPOSITION

"Shall the County of Texas, Oklahoma, by its Board of County Commissioners, levy and collect a one percent (1%) sales tax upon the gross proceeds or gross receipts derived from all sales and services taxable under the Oklahoma Sales Tax Code for the purpose of funding capital outlay, maintenance, and/or operations of Memorial Hospital of Texas County, including but not limited to equipping, maintaining, remodeling, repairing, furnishing, and/or securing and applying sales tax proceeds toward the payment of principal and interest on any indebtedness, including refunding, indebtedness, incurred by or on

behalf of Memorial Hospital of Texas County for such purposes with such sales tax to commence on April 1, 2024, and continuing for a period of twenty (20) years thereafter until April 1, 2044; and if approved the existing forty-five hundredths of one percent (.45%) sales tax currently being levied and collected for the benefit of Memorial Hospital of Texas County shall be repealed and eliminated effective April 1, 2024?”

Section 3. Ballot – Registered Qualified Voters – Polling Places and Conduct of Election – Certification: The ballot setting forth the above proposition shall also contain in connection with the said proposition the following words:

FOR

The Above Proposition

AGAINST

The Above Proposition

Only the registered, qualified voters of Texas County, Oklahoma may vote upon the proposition as above set forth.

The polls shall be opened at 7:00 o'clock A.M. and shall remain open continuously until and be closed at 7:00 o'clock P.M.

The number and location of the polling places for said election shall be the same as the regular precinct polling places as designated for statewide and county elections by the Texas County Election Board. Such elections shall be conducted by those officers designated by the Texas County Election Board, which officers shall also act as counters and certify the election results as required by law.

Section 4. Clerk to Transmit Resolution to Election Board: The County Clerk of Texas County is hereby directed to transmit a copy of this Resolution to the Secretary of the Texas County Election Board immediately upon approval hereof by the Board of County Commissioners of Texas County.

Section 5. Tax Rate – Sales and Services Subject to Tax: If this Resolution is approved by a majority of the registered voters of Texas County voting thereon as herein provided, there is hereby levied and imposed a sales tax of one percent (1%) to be levied upon the gross proceeds or gross receipts derived from all sales or services in Texas County upon which a consumers sales tax is levied by the State of Oklahoma for the purposes set forth in Section 7 hereof.

Section 6. Effective Date and Duration: Subject to approval of a majority of the registered voters of Texas County, Oklahoma, voting on the same in the manner prescribed by law, the sales tax levied pursuant to this Resolution shall become and be effective on and after April 1, 2024, continuing thereafter for a period of twenty (20) years until April 1, 2044.

Section 7. Repeal and Elimination of Existing Forty-Five Hundredths of One Percent (.45%) Sales Tax: If this Resolution is approved by a majority of the registered voters of Texas County, Oklahoma, voting on the same in the manner prescribed by law, the current .45% sales

tax levied by Resolution No. 50-18-19 and approved by the voters of Texas County at an election called for such purpose on March 15, 2019, shall terminate and cease effective April 1, 2024.

Section 8. Purpose of Revenues: The purpose of the sales tax levied by this Resolution is hereby declared to be to provide necessary funding for the purposes of funding capital outlay, maintenance, and/or operations of Memorial Hospital of Texas County, including but not limited to equipping, maintaining, remodeling, repairing, furnishing, and/or securing and applying sales tax proceeds toward the payment of principal and interest on any indebtedness, including refunding indebtedness, incurred by or on behalf of Memorial Hospital of Texas County.

Section 9. Deposit of Tax Revenue In Designated Revolving Funds: Sales tax revenues collected pursuant to this resolution shall not be deposited in the general revenue fund of Texas County. All sales tax revenues collected pursuant to this resolution shall be deposited in a designated county sales tax revolving fund maintained for the disbursement of all sales tax revenue received pursuant to this Resolution by the County Commissioners of Texas County for the benefit and use of Memorial Hospital of Texas County for the purposes set forth in this Resolution.

Section 10. Subsisting State Permits: All valid and subsisting permits to do business by the Oklahoma Tax Commission pursuant to the Oklahoma Sales Tax Code, as amended from time to time, are for the purposes of this Resolution hereby ratified, confirmed, and adopted in lieu of any requirement for any additional permit for the same purpose.

Section 11. Exemptions: There is hereby specifically exempted from the tax levied by this Resolution the gross receipts or gross proceeds exempted from the Oklahoma Sales Tax Code, as set out therein.

Section 12. Other Exempt Transfers: Also, there is hereby specifically exempted from the tax levied by this Resolution the transfer of tangible personal property exempted from the Oklahoma Sales Tax Code, as set out herein.

Section 13. Tax Due When – Returns – Records: The tax levied hereunder shall be due and payable at the time and in the manner and form prescribed for payment of the state sales tax under the Oklahoma Sales Tax Code.

Section 14. Payment of Tax: There tax herein levied shall be paid to the Tax Collector at the time in form and manner provided for payment of state sales tax under the Oklahoma Sales Tax Code.

Section 15. Tax Constitutes Debt: All sales tax, penalty, and interest due hereunder shall at all times constitute a prior, superior, and paramount claim as against the claim of unsecured creditors and may be collected by suit as any other debt.

Section 16. Classification of Taxpayers: For the purpose of this Resolution the classification of taxpayers hereunder shall be as prescribed by State law for the purpose of the Oklahoma Sales Tax Code.

Section 17. Consumer to Pay Tax – Vendor to Collect Tax – Penalties for Failure to Collect: All vendors in Texas County shall be required to collect the sales tax required by this

resolution upon all taxable sales occurring and services provided in Texas County that are subject to sales tax as follows:

- (a) The tax levied hereunder shall be paid by the consumer or user to the vendor, and it shall be the duty of each and every vendor in this County to collect from the consumer or user, the full amount of the tax levied by this Resolution, or an amount equal as nearly as possible or practicable to the average equivalent thereof.
- (b) Vendors shall add the tax imposed hereunder or the average equivalent thereof, to the sales price, charge, consideration, gross receipts or gross proceeds of the sale of tangible personal property or services taxed by this Resolution, and when added such tax shall constitute a part of such price or charge, shall be a debt from the consumer or user to the vendor until paid, and shall be recoverable at law in the same manner as other debts.
- (c) A vendor who willfully or intentionally fails, neglects or refuses to collect the full amount of the tax levied herein, or willfully or intentionally fails, neglects or refuses to comply with the provisions hereunder, or remits or rebates to a consumer or user, either directly or indirectly, and by whatsoever means, all or any part of the tax levied by this Resolution, or makes in any form of advertising, verbally or otherwise, any statement which implied that he is absorbing the tax, or paying the tax for the consumer or user by an adjustment of prices or at a price including the tax, or in any manner whatsoever, shall be deemed guilty of a misdemeanor, and upon conviction thereof shall be fined not more than Five Hundred Dollars (\$500.00), and upon conviction for a second or other subsequent offense shall be fined not more than One Thousand Dollars (\$1,000.00), or incarcerated for not more than sixty (60) days, or both. Provided, sales by vending machines may be made at a stated price which includes state and any municipal sales tax.
- (d) Any sum or sums collected or required to be collected hereunder shall be deemed to be held in trust for the State of Oklahoma, and as trustee, the collecting vendor shall have a fiduciary duty to the State of Oklahoma in regard to such sums and shall be subject to the trust laws of this state. Any vendor who willfully or intentionally fails to remit the tax, after the tax levied by this article was collected from the consumer or user and appropriates the tax held in trust to this own use, or to the use of any person not entitled thereto, without authority of law shall be guilty of embezzlement.

Section 18. Returns and Remittances – Discounts: Returns and remittances of the tax levied herein and collected shall be made to the Tax Collector at the time, and in the manner, form and amount as prescribed for returns and remittances required by the Oklahoma Sales Tax Code; and remittances of tax collected hereunder shall be subject to the same discount as may be allowed by said Code for collection of state sales taxes.

Section 19. Interest and Penalties When Tax Due – Reports – Records – Delinquency: Section 1365 of Title 68, Oklahoma Statutes, as amended is hereby adopted, and made part of this

Resolution, including but not limited to the requirements and provisions for the collection of all tax to be levied, together with reports, payments of taxes collected, and records related hereto. Provided that the failure or refusal of any taxpayer to make and transmit the reports and remittances of tax in the time and manner required by this Resolution shall cause such tax to be delinquent.

Section 20. Waiver of Interest and Penalties: The interest or penalty or any portion thereof accruing by reason of taxpayer's failure to pay the tax herein levied may be waived or remitted in the same manner as provided for said waiver or remittance as applied in administration of the state sales tax provided by the Oklahoma Sales Tax Code, as amended; and to accomplish the purpose of this section, the applicable provisions of said Oklahoma Sales Tax Code are hereby adopted by reference and made a part of this Resolution.

Section 21. Erroneous Payments – Claims for Refund: Refund of erroneous payment of the sales tax herein levied may be made to any taxpayer making such erroneous payment in the manner and pursuant to the procedures, and under the same limitations of time, as provided for administration of the state sales tax as set forth in Title 68, Oklahoma Statutes, Section 1354.26, as amended, and to accomplish the purposes of this section, the applicable provisions of said Section 1354.26 are hereby adopted by reference and made a part of this Resolution.

Section 22. Fraudulent Returns: In addition to all civil penalties provided by this Resolution, the willful failure or refusal of any taxpayer to make reports and remittances herein required, or the making of any false or fraudulent report for the purpose of avoiding or escaping payment of any tax or portion thereof rightfully due under this Resolution shall be an offense, and upon conviction thereof the offending taxpayer shall be subject to such fines as set out under Title 68, Oklahoma Statutes, Section 1361, as amended.

Section 23. Records Confidential: The confidential and privileged nature of the records and files concerning the administration of this sales tax is legislatively recognized and declared, and to protect the same, the provisions of the Oklahoma Sales Tax Code, as amended and each subsection thereof is hereby adopted by reference and made fully effective and applicable to the administration of this sales tax as if herein set forth in full.

Section 24. Tax Collector Defined: The term "Tax Collector" as used herein means the department of the County government or the official agency of the State duly designated according to the law by contract and authorized by law to administer the collection of the tax herein levied.

Section 25. Definitions: The definition of words, terms, and phrases contained in the Oklahoma Sales Tax Code, Title 68, Oklahoma Statutes, Section 1352, as amended, are hereby adopted by reference, and made part of this Resolution.

Section 26. Provisions Severable: The provisions hereof are hereby declared to be severable, and if any section, paragraph, sentence, or clause of this Resolution is for any reason held invalid or inoperative by a court of competent jurisdiction such decision shall not affect any other section, paragraph, sentence, or clause hereof.

Section 27. Amendments: The people of Texas County, Oklahoma, by their approval of this Resolution at the election hereinabove provided for, hereby authorize the Board of County Commissioners of Texas County, Oklahoma, by Resolutions duly enacted to make such

administrative and technical changes or additions in the method and manner of administration and enforcing this Resolution as may be necessary or proper for efficiency and fairness, except that the rate of tax herein provided shall not be changed without approval of the qualified electors of the County as provided by law.

Section 28. Provisions Cumulative: The provisions hereof shall be cumulative, and in addition to any and all other taxing provisions adopted by Texas County, Oklahoma.

PASSED AND APPROVED BY THE BOARD OF COUNTY COMMISSIONERS OF TEXAS COUNTY, OKLAHOMA THIS 8TH DAY OF NOVEMBER 2023.

s/Ted Keeling, Commissioner, Chairman

ATTEST:

s/Dolan Sledge, Commissioner, Member

SEAL

s/Levi Bickford, Commissioner, Member

s/Wendy Johnson, County Clerk, Texas County

ORDER FOR SALES TAX ELECTION

“AN ORDER AUTHORIZING THE CALLING AND HOLDING OF A SPECIAL ELECTION IN TEXAS COUNTY, STATE OF OKLAHOMA, FOR THE PURPOSE OF SUBMITTING TO THE REGISTERED, QUALIFIED VOTERS OF SAID COUNTY THE QUESTION OF APPROVAL OR DISAPPROVAL BY SAID VOTERS OF RESOLUTION 96-23-24 OF THE BOARD OF COUNTY COMMISSIONERS OF TEXAS COUNTY ADOPTED NOVEMBER 8, 2023, LEVYING AND ASSESSING A COUNTY SALES TAX OF ONE PRECENT (1%) UPON THE GROSS PROCEEDS OR GROSS RECEIPTS DERIVED FROM ALL SALES AND SERVICES TO ANY PERSON TAXABLE UNDER THE OKLAHOMA SALES TAX CODE FOR THE BENEFIT OF MEMORIAL HOSPITAL OF TEXAS COUNTY, WITH SAID TAX TO BE COLLECTED BEGINNING APRIL 1, 2024, FOR A PERIOD OF TWENTY (20) YEARS ENDING ON APRIL 1, 2044; REPEALING AND ELIMINATING THE EXISTING FORTY-FIVE HUNDRETHS OF ONE PERCENT (.45%) SALES TAX CURRENTLY BEING LEVIED AND COLLECTED FOR THE BENEFIT OF MEMORIAL HOSPITAL OF TEXAS COUNTY; AND CONTANING OTHER PROVISIONS RELATED THERETO.”

NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF COUNTY COMMISSIONERS OF TEXAS COUNTY, STATE OF OKLAHOMA:

Section 1. That the Chairman of said Board of County Commissioners be and he is hereby authorized and directed to call a special election to be held in Texas County, State of Oklahoma, on the 9th day of January 2024, for the purpose of submitting to the registered qualified voters of Texas County the following proposition:

PROPOSITION

“Shall the County of Texas, Oklahoma, by its Board of County Commissioners, levy and collect a one percent (1%) sales tax upon the gross proceeds or gross receipts derived from all sales and services taxable under the Oklahoma Sales Tax Code for the purposes of funding capital outlay, maintenance, and/or operations of Memorial Hospital of Texas County, including but not limited to equipping, maintaining, remodeling, repairing, furnishing, and/or securing and applying sales tax proceeds toward the payment of principal and interest on any indebtedness, including refunding indebtedness, incurred by or on behalf of Memorial Hospital of Texas County for such purposes with such sales tax to commence on April 1, 2024, and continuing for a period of twenty (20) years thereafter until April 1, 2044; and, if approved, the existing forty-five hundredths of one percent (.45%) sales tax currently being levied and collected for the benefit of Memorial Hospital of Texas County shall be repealed and eliminated effective April 1, 2024?”

Section 2. That such call for said election shall be by Notice of Election attached hereto and approved hereby to be signed by the Chairman of the Board of County Commissioners of Texas County, State of Oklahoma, and attested by the County Clerk, setting forth the Proposition to be voted upon and the hours of opening and closing the polls and other provisions related to the conduct of such election; that the ballots shall set forth the Proposition to be voted upon substantially as set out in Section 1 hereof; and that the returns of said election shall be made to and canvassed by the Texas County Election Board.

ORDERED BY THE BOARD OF COUNTY COMMISSIONERS OF TEXAS COUNTY, STATE OF OKLAHOMA, THIS 8TH DAY OF NOVEMBER 2023.

s/Ted Keeling, Commissioner, Chairman

ATTEST:

s/Dolan Sledge, Commissioner, Member

SEAL

s/Levi Bickford, Commissioner, Member

s/Wendy Johnson,

County Clerk, Texas County

NOTICE OF ELECTION

Under and by virtue of Title 68, Oklahoma Statutes, Section 1370, and the Resolution of the Board of County Commissioners of Texas County, State of Oklahoma, authorizing the calling of a special election for the purpose hereinafter set forth, as approved by said Board of County Commissioners on November 8, 2023, I, the undersigned, Chairman of said Board of County Commissioners of Texas County, hereby give notice of the Order and call of a special election to be held in Texas County on the 9th day of January, 2024, for the purpose of submitting to the registered, qualified voters of Texas County the following Proposition:

PROPOSITION

“Shall the County of Texas, Oklahoma, by its Board of County Commissioners, levy and collect a one percent (1%) sales tax upon the gross proceeds or gross receipts derived from all sales and services taxable under the Oklahoma Sales Tax Code for

the purpose of funding capital outlay, maintenance, and/or operations of Memorial Hospital of Texas County, including but not limited to equipping, maintaining, remodeling, repairing, furnishing, and/or securing, and applying sales tax proceeds toward the payment of principal and interest of any indebtedness including refunding indebtedness, incurred by or on behalf of Memorial Hospital of Texas County for such purposes with such sales tax to commence on April 1, 2024, and continuing for a period of twenty (20) years thereafter until April 1, 2044; and, if approved, the existing forty-five hundredths of one percent (.45%) sales tax currently being levied and collected for the benefit of Memorial Hospital of Texas County shall be repeated and eliminated effective April 1, 2024?"

The ballot used at said election shall set out Proposition as above set forth, and shall also contain the words:

- 1- **FOR** the above Proposition
- 2- **AGAINST** the above Proposition

(If the voter desires to vote for the above Proposition, he or she shall stamp an "X" in the first square, #1 above; if the voter desires to vote against the above Proposition, he or she shall stamp an "X" in the second square, #2 above).

Said special election shall be held at the same places and in the same manner prescribed for the conduct of state and county elections and the polls shall be opened at 7:00 o'clock A.M. and remain open continuously until and be closed at 7:00 o'clock P.M. on January 9, 2024.

By order of the Board of County Commissioners of Texas County, State of Oklahoma.

WITNESS my hand as Chairman of the Board of Commissioners of said County, affixed to this Notice of Election in said County this 8th day of November 2023.

s/Ted Keeling, Chairman
Board of County Commissioners
Texas County, State of Oklahoma

ATTEST:

s/Wendy Johnson
County Clerk, Texas County

SEAL

Aye: Bickford, Sledge. Nay: Keeling.


Boring

I do have a question that calls for the County Clerk Wendy Johnson to take that over to the election board. I think one of us be happy to do that if you would.


Adjourned.

I, Wendy Johnson, the duly elected and qualified County Clerk in and for Texas County, Oklahoma, do certify the above is a true and complete statement of the proceedings of the Board of County Commissioners held in this office on November 6th, 2023.


Wendy Johnson, County Clerk


Ted Keeling, Chairman


Dolan Sledge, Member


Levi Bickford, Member