

Service Above Self

THE SILVER SAGE

BULLETIN OF THE ROTARY CLUB OF SILVER CITY

Helen Shoup, Editor

Rotary
Club of Silver City



May 15, 2018

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www.silvercityrotary.org

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President:	Joe Heidrick
President-Elect:	Peter Herzberg
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Vocational Service:	Wendy Spurgeon
Sgt-at-Arms:	Jim Tindall
Senior Advisor:	Peter Fallev



ROTARY:
MAKING A
DIFFERENCE

Schedule: Future Meetings, Service Projects, and Special Events

Date: 2018	What's Happening
Tuesday, May 22	12:00 pm: Dr. Gilbert Arizaga – Holistic Medicine
Tuesday, May 29	12:00 pm: Jeff Goin – Single Socks
Tuesday, June 5	12:00 pm: Karen Beckenbach – The GCCCA 2018-19 Season
June 23-26	Rotary International Convention in Toronto, Canada
Tuesday, June 26	12:00 pm: Club Assembly
Thursday, June 28	5:30 pm: Joe Heidrick's Demotion Party [Peter Herzberg's Home]

Meeting Notes



President Joe Heidrick rang the bell at 12:10 pm after we had socialized for a few minutes. **Kate Watson** led the Pledge of Allegiance, **Paul Moore** gave the Invocation, and **Maggie Veeder** led the Four-Way Test.

Visiting Rotarians

Bill Harrison, Honorary member of Rotary Club of Silver City



*Ray Davis (left)
Kathy Eaton
Bill Harrison (seated)*

*Vladimir
Gnilozubov*



Rotaract Representative

WNMU Rotaract President **Vladimir Gnilozubov** (just graduated) joined us again to give a slide show of the Rotaract trip to Juarez, Mexico.

Guests

- **Bill Harrison** welcomed Ray Davis.
- **Peter Falley** introduced Karen Beckenbach, president of GCCCA



Ray Davis



*Linda Telaak (left)
Karen Beckenbach*

- Alicia Edwards, Grant County Commissioner



*Joe Heidrick (standing),
Suzanne Kavanagh (left),
Alicia Edwards (right)*

Rotary Announcements

Joe Heidrick stated

- There are 2 spots open for speakers in June.
- There will be a Rotary club board meeting after the meeting today.
- Volunteer hours form is being passed around.

Kathy Eaton announced that **Mark Richard** will deliver the last of the books.

Sunny Kellerman

- Announced that the last 5 trees have been ordered and will be planted, 29 trees in total.
- Discovered that the district grant only has to have a lasting benefit to the target population. So the books for kids can be a viable grant. A District grant has to stay in this area and can be for \$1,000 - \$3,000 in total with the club matching the amount. Books for kindergarteners is the current project suggested. A show of hands looked like a Yes, and the Board can decide at the meeting. **Kate Watson** is the incoming Foundation Grant Chair and will be involved.

Helen Shoup stated that the RFE from India has been cancelled so we don't need to provide housing.

Special Presentation

Ray Davis stated that Grant County has a lot of Veterans. A big supporter is **James Tindall**, and he was given an award from The American Legion of Veterans.

*Jim Tindall (left) and
Ray Davis (right)*



Brags and/or Happy Dollars

- **Nkechi Nwachuku** is celebrating a birthday.
- **Paul Moore** put in \$3, one for each year he spent working on his doctorate. He will get hooded on Thursday for completing his doctorate program.

Program



Alicia Edwards, Grant County Commissioner, attended the meeting as a listener and to answer our questions.

What is the current plan of the hospital, "The State of the hospital"? The County Commission is doing a lot of work on the hospital, looking at all the possibilities to ensure that Grant County has the best medical care. Some of the alternatives being considered are: Going into partnership with one or more other hospitals, being taken over by a for-profit organization, becoming a non-profit hospital as opposed to being a county hospital, or continuing in its present status. The Commission has hired a consulting group, Jupiter Advisory, to help navigate through the options. One option is to have the hospital remain independent. The consulting group has met with hospital staff, physicians, and the public. The hospital shared the same information with the public that it shared with the

Commission. The current hospital board and administration have recommended that the hospital remain independent.

Commissioner Edwards has no opinion yet but has done lots of research. At this point, 83 rural community hospitals have closed, and 80% of hospitals in the US are considering forming a partnership to survive the healthcare environment. Up to 25% of our local population is seniors and

65% of the county are on Medicaid, so it's a huge challenge to serve a lot of people on Medicare and Medicaid because of the low reimbursement rates under those programs. The National average to remain viable is 35%.

Should the hospital be for profit or non-profit? A consideration regarding non-profit status: The mill levy proposed a few years ago was defeated and no other financing can be obtained through the county. As a county hospital, the hospital cannot do its own fundraising. That is a problem that would be addressed by becoming a non-profit hospital, since the non-profit status would allow it to do its own fundraising. Currently trustees are not being compensated, despite their heavy workload. However, if the hospital were a 501(c)(3), trustees could be given stipends, and it might be easier to find people to serve in that capacity.

What about the Indigent fund? Sole provider money can take care of people, but there is not as much as previously. The county makes up the difference. The Commission is committed to keep providing service to everyone, even those that cannot pay.

Is there any possibility of conflict of interest with the consultants? Juniper Advisory can facilitate whatever transaction is eventually decided on. Juniper has done this kind of consulting work for a large number of hospitals. In 47% of those cases, the final decision was for the hospital to remain independent.

A plan is being created to address the revenues of the hospital, proposing to go to critical access. They are looking at the pharmacy. The hospital wants to raise \$11.2 million. Currently the hospital has 77 job openings, 15% short on nurses. Salaries of care-giving staff are 15% below market. They need a new roof and new HVAC units.

The County looked at it a year ago after the cancer center issue. Under state law, the County has no authority over the hospital as long as it remains a county hospital, except for the appointment of its board of trustees. The only way for the Commission to have greater authority is to change the structure.

Another way to give the County Commission greater authority over the hospital would be for the legislature to change the state law. The intent of the present law was to insulate the hospital from political meddling, but that has hamstrung the Commission in its efforts to affect the way the hospital is run.

What about increments in gross receipts tax? It is already maxed out. Mill levy is another way. Supposedly, the Mill levy was only for the infrastructure, not for operations, but the public didn't see it that way. The County can do general obligation bonds, but the County is so far behind on all other infrastructure needs, they can't bond enough to do everything.

The structure of the hospital hurts the financial aspect. Trustees serve a 3-year term. The hospital has had 5 CFOs and 4 CEOs in the last 10 years. They have also had new commissioners. This is not good for stability. The current state of healthcare in this country is not helping the problem.

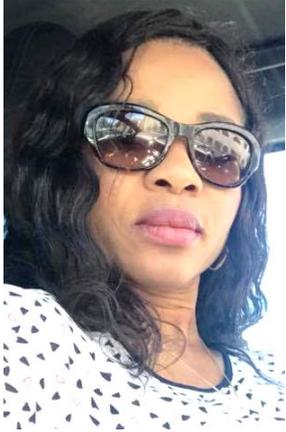
Raffle

Mark Richard won the raffle.

Attendance

We had 21 of 29 active members in attendance, or 72%.

Gallery



Nkechi Nwachuku