

Welcome

## Behind the Green

From a physician who gives her time to soccer players in Rome to a medical coding specialist in Centre whose photography skills landed one of his pictures on a United States postage stamp, Floyd is filled with people who provide care with extraordinary compassion, insight and attention to detail.

It is the stories of those individuals, like Konda Dizon, our longest-serving nurse, that best tell the story of Floyd. It happens in a series of moments of caring, like the 20,000 miracles Konda has witnessed, or the eureka moment that led Joe Miller to change careers. Along the way, we'll share statistics that attest to our financial performance and volume, the awards and accreditations that underscore our commitment to quality, and the areas of growth and community benefit that point to our strategy.

Combined, these profiles give you a glimpse behind the iconic green that has been our standard for the past 15 years. Together, these stories are Floyd's story. We are an organization of more than 3,300 employees, 200 volunteers and more than 500 physicians and advanced practice providers who have dedicated their careers to providing health care, whether in one of our hospitals, at a Primary Care office or in someone's home.

Keep reading for a look Behind the Green.





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## Nurse Konda Dizon Has Witnessed 20,000 Miracles

It's fair to say that Konda Dizon, Clinical Manager for the Neonatal Intensive Care Unit (NICU) at Floyd Medical Center, has witnessed 20,000 births. And, for this nurse, that's 20.000 miracles.

"Every birth is a miracle from God and a blessing for parents, and being a nurse, we get to see these miracles every day. I feel like I am just blessed to be in that position," said Konda, who celebrated her 45th year as a Floyd employee in 2019.

Konda started work at Floyd in 1974. Most of those years have been spent working with Floyd's tiniest patients, either in Labor and Delivery, the newborn nursery or Floyd's state-of-the-art Level III NICU.

While no one kept count of how just many babies Konda has taken care of, 20,000 is certainly within reason. That's 20,000 first breaths, first yawns, first sighs and first coos. More than 150,000 babies have been born at Floyd Medical Center since the hospital first opened in 1942.

Konda comes from a family of nurses. Both her mother and her aunt were nurses. She said she always knew she wanted to follow in their footsteps. She fell in love with caring for expectant mamas and newborns during her obstetrics rotation as a nursing student.

"That is where I wanted to be. They say you either love it or you don't want any part of it, and that's true," Konda said. "I love it."

When she began her career, the practice of obstetrical nursing was far different from today's family-oriented birthing center. Most moms didn't have natural childbirth, and epidurals as anesthesia had not yet entered the labor and delivery suite. Most laboring mothers were completely anesthetized for the births of their babies, she said. They were asleep before, during and after the birth of their baby.

"They didn't really remember much of anything for two to three days. The mom would be so sleepy, and we would be trying to wake her up to tell her, 'you had a girl' or 'you had a boy.' It wouldn't be until the next day or two that the whole picture was coming together," Konda said.

Dads were even less involved. Until a nurse peeked into the father's waiting room, no expectant dad had any idea of what was happening down the hall.

The change in the nursing approach to childbirth and newborn care is better for the entire team: parents, grandparents, nurses and physicians. "It's really good how it has changed over time," Konda said. "Birth is a family process now, rather than mom being by herself and dad being outside, not really knowing what is going on. Today, the daddy is right there, able to experience the birth, the first cry."

That same approach to care is demonstrated in the NICU. "I remember when parents could only come see their babies during certain hours. Now, we want parents here. We want them to be a part of our rounding. It brings families together now from the beginning," she said.

Konda, a mother of three, said having children of her own enhanced her understanding and ability to care for young parents and their babies. "You feel differently after you have kids of your own because you have experienced it," she said. "You don't have to have babies to work here, but it does change your perspective of how things are."

Her advancement to nurse leadership roles and changes in nursing practice also have changed over the years. Staff now take ownership and advocate for their patients.

For the first time in several decades, Floyd soon will have direct competition for obstetrical care in the community. Konda said even if she was not Floyd's longest-tenured nurse, it would be difficult to advise a new mom to come anywhere but Floyd.

"It is very important to realize that even if it's a good, calm, healthy pregnancy, you don't know what can occur in labor or what can occur in delivery," she said. "If it was my family, I would want my baby or grandbaby to be born where you a have a NICU."

"We have a team here that is available for any emergencies that happen, and we have long-term nurses who have been here to take care of our patients. You never know what can occur that could mean you are going to need emergency care for your baby, and being able to be at the same hospital as your baby provides such peace of mind.

## This Floyd Pediatrician is Leading by Serving Others

Dr. Sylvia Washington's resume is quickly filling with awards and accomplishments, but you'll have to ask her specifically about the honors to get her to mention them. Bragging about personal achievements just isn't her style.

Dr. Washington was named Floyd Physician of the Year in January 2019 and was listed among *Rome Life* magazine's 20 under 40 (along with Floyd Director of Corporate Health Chris Butler) in May of that year. Most recently, she was named Georgia Young Physician of the Year by the Georgia chapter of the American Academy of Pediatrics in October 2019.

But those accolades aren't the topic of conversation if you ask the pediatrician about her life and her work. Instead, she'll tell you about her family, about her passion for work in Ghana with the George Faile Foundation, the soccer team she and her husband coach, or the Bible study she leads for other health care providers. Dr. Washington said that serving and helping others, especially children, has been her focus since childhood.

"I've always loved working with children," she said. "Even as a child — I was the oldest of five — I was always watching my younger sisters. I was always the babysitter, the camp counselor, so I naturally gravitated toward caring for children."

"I loved my pediatrician," she said with a broad smile. "I loved what he did. I watched him caring for these children and helping them, making them feel better. I love that when something is wrong, we can fix it. I look at doctors as heroes in the community."

"I believe that to whom much is given, much is required," she said. "If you have something extra, then it is your responsibility to share that with someone who may be in need."

She learned that lesson from her parents, she said. As an elementary school student, young Sylvia was proud of her grades and excelled in the classroom. A younger sister did not have her natural academic ability. Her mother affirmed her ability but told her she had that skill for a reason.

Your sister is failing a subject, her mother pointed out. Why don't you take some of that and help your sister? "That was like a light bulb in my mind: If I am good at this, I should be able to help my sister." Since that day years ago, Dr. Washington's definition of sister has grown beyond her siblings. "If I am good at something, I want to help someone else do it. After my time, there will be people who come behind me, and they need to be able to know how to do these things as well."

That same give-back attitude motivated Dr. Washington to go to Ghana with other physicians to provide medical services to people in desperate need of help.

When she served as a medical missionary in Ghana with the George Faile Foundation, Dr. Washington found great need and inspiration to get more deeply involved there.

"None of the babies had diapers. They just cannot afford to sustain something that is disposable," she explained. "They also don't have formula. They don't have bottles. They don't have a reliable clean water source. Families are living in a one-room hut. They cook outside on top of coal, but the appreciation and the gratitude that someone would come and help, is so genuine and moving."

Now a board member of the George Faile Foundation, which supports the medical work at the Baptist hospital in Ghana where she served, Dr. Washington has designs on returning with her family one day, when her children are older.

"I want my kids to be able to see what it is like in another country," she said. "When you see how people live without our massive grocery stores, without cars or appropriate clothing, it is humbling."

She and her husband, Marcus, also volunteer locally. The couple coaches their daughter's soccer team, motivating the young athletes with colorful socks and red bows.

She and her husband, a professor at Shorter University, also like it that the young people they serve see them in the community, not just in the office or the classroom.

The Washingtons met in the college band at Howard University, a match that was divinely appointed and established on a foundation of shared faith. Together, they have three children, Christian, Daniel and Stephanie. The three are patient supporters of her busy life.

When she's not caring for her young patients, coaching soccer, helping the George Faile Foundation, or caring for her family, you may find Dr. Washington nose-deep in a book.

She hosts a Bible study in her office for other medical professionals that gives them the opportunity to have deeper, important conversations that touch the heart and the soul.

"Doing this once a month allows people to come for something besides medicine," she said. "We can ask, 'How are you doing, not just how is your practice?' The rates of burnout suicide are skyrocketing among physicians. We often are the primary breadwinner. People come to us for advice and help a lot of time. There are not a lot of places we can go for advice or help without violating someone's privacy. People out there feel like they are alone. The purpose of bringing them together is to ask, 'How is your day, really?' When they meet other similarly minded people, they can say, 'Yes, it was a rough day.' No one else is really doing that."



### Giving Back at a Glance

Floyd Medical Center has served Floyd County for nearly 80 years. Today, Floyd has grown to become a not-for-profit network of community hospitals that is vital to our four-county primary service area of Chattooga, Floyd and Polk counties in Georgia and Cherokee County, Alabama, as well as the additional three counties that make up Floyd's secondary service area: Bartow and Gordon counties in Georgia and Calhoun County, Alabama.

In 2019, Floyd provided nearly \$50 million in indigent and charity care to patients, \$50.2 million in unreimbursed care to Medicaid and Medicare patients, and nearly \$3 million in free health-related services in our communities, ranging from athletic trainers and ambulance coverage at athletic events to childbirth classes, diabetes education, health fairs, screenings and bereavement support. The total value of the services provided for the benefit of the community for which Floyd receives no payment is \$103.7 million.

Any measurement of community benefit must also include the economic impact Floyd has on the communities we serve. Floyd is an economic engine in northwest Georgia and northeast Alabama. The Georgia Hospital Association estimates that the Floyd health system generates more than \$722.3 million in economic activity in Georgia alone, including \$300.1 million in annual payroll and benefits, as well as purchases and other business relationships. The organization also is Floyd County's largest employer, with approximately 3,300 employees.

As a health system, Floyd is committed to investing our resources into understanding and meeting the diverse health care needs of northwest Georgia and northeast Alabama. We continually strategize to ensure quality health care services are available to everyone, regardless of their ability to pay. Our mission is to provide the communities we serve with a comprehensive and technologically advanced health care system committed to the delivery of care that is characterized by continually improving quality, accessibility, affordability and personal dignity.

Community Benefit Statistics July 1, 2018 - June 30, 2019

Community Benefit Services

\$103,721,786

Unreimbursed Indigent Care

\$49,959,824

#### Breakdown

Floyd Medical Center

Unreimbursed Medicare
Unreimbursed Medicaid

\$41.18 million \$36.41 million \$17.66 million

\$95.25 million

Polk Medical Center

Indigent
Unreimbursed Medicare
Unreimbursed Medicaid

Total

\$6.87 million \$6.44 million \$930,000

\$1.36 million

Cherokee Medical Center

Indigent Care Unreimbursed Medicare Unreimbursed Medicaid \$1.89 million \$790,000 \$880,000

Total \$3.56 million

Total



177,000

People encounters



576

Low-income residents assisted by Floyd financial counselors



227,747

Hours contributed by Floyd employees and volunteers to community endeavors



\$2.94M

Total value of community service activities



24,000

Students covered by the school nurses provided in Floyd County, Rome City and Polk County schools



422

People received CPR and first-aid training



189,572

Total hours of education. 1,318 nursing students received 119,332 hours of clinical education. 1,859 allied health students received 64,552 hours of training. 155 medical students studying to become physicians received 5,688 hours of clinical education



7,816

Miles traveled by the Mobile Mammography Coach. 5,167 mammograms provided on the Mobile Mammography Coach



**500** 

Hours of free diabetes education



84

Childbirth education class participants



16,791

Prescription pharmaceuticals to low-income, uninsured patients



145,240

People benefited from medical care and support at community events. 4,642 individuals received health information at health fairs



# Floyd Providing Full Circle of Care to Our Communities Around the Clock, Every Day

The Floyd health care system provides a complete continuum of medical care to serve the health care needs of the communities we serve. Our Primary Care network includes 47 physicians and 34 advance practice providers at 26 Primary Care and Urgent Care locations. Floyd also provides inpatient and outpatient diagnostic, hospice, behavioral health and hospital services.

At the hub of the health system is Floyd Medical Center, a 304-bed, full-service acute care hospital that provides Joint Commission-certified specialty programs in advanced palliative care, heart failure, inpatient diabetes, stroke care, hip replacement surgery, knee replacement surgery and spine surgery. In addition, Floyd Medical Center is a certified Chest Pain Center and a designated Bariatric Surgery Center of Excellence, and The Breast Center at Floyd is a Breast Imaging Center of Excellence and a Quality Breast Center of Excellence. Floyd also is home to a state-designated Level II Trauma Center and a Level III Neonatal Intensive Care Unit and has specialty centers for Pediatrics, Wound Care and Hyperbarics. The health system also includes Floyd Polk Medical Center, a 25-bed critical access hospital in Cedartown, Georgia, and 60-bed Floyd Cherokee Medical Center in Centre, Alabama. Floyd also operates Floyd Behavioral Health Center.

Through these locations Floyd is uniquely positioned to provide the full circle of care, including the following medical specialties:

- Alcohol and Chemical Dependency Services
- Bariatric Medicine, Surgery and Aftercare
- Behavioral Health
- Breast Health
- Cardiac Catheterization
- Cardiology
- Cardiac Rehabilitation
- Corporate Health
- Diabetes Care
- Diagnostic Radiology
- Echocardiography
- Emergency Care
- Family Medicine
- Family Medicine Residency
- Hospice
- Hospitalist Care
- Hyperbarics and Wound Care
- Intensive Care
- Interventional Cardiology
- Infusion Therapy
- Laboratory Services
- Level III Neonatal Intensive Care Unit

- Level II Trauma Care
- Maternity Services
- Neurology
- Neuropsychology
- Neurosurgery
- Newborn care
- Occupational Medicine
- Oncology
- Orthopedics
- Palliative Care
- Pediatrics
- Pediatric Intermediate Care
- Pharmacy, Inpatient and Outpatient
- Radiology
- Inpatient Rehabilitation Services
- Outpatient Rehabilitation Services
- Senior Enrichment Program
- Sleep Disorders
- Subacute Rehabilitation
- Surgery, Inpatient and Outpatient
- Urgent Care
- Vascular Surgery



## Family Medicine Faculty Tackling Childhood Obesity with Fun and Education

A growing epidemic of childhood obesity is well documented in media and in science, but Dr. Pamela Obi, faculty member for the Floyd Family Medicine Residency program, knew that just documenting the problem won't fix it.

Dr. Obi took action, developing a program that would help her young patients learn the value of eating healthy and physical activity. She secured a grant from the Georgia Academy of Family Physicians to help fund it.

Twenty young Eat, Play, Learn participants, all patients of the Floyd Family Medicine Residency Clinic, had the opportunity to attend 18 classes over a nine-month period where they learned about establishing healthy life habits. Topics included making healthy food choices, how to shop for quality food, how to turn exercise into fun, the importance of sleep and the benefits of drinking water. Participants rediscovered, or perhaps discovered for the first time, the joy of jumping rope and learned how to use an agility ladder. The rope ladders are placed horizontally on the ground. Users quickly step in the spaces between the rungs to improve footwork and agility.



Dr. Obi said the program was born from the overwhelming data indicating that Georgia is facing a health crisis from obesity, and the health issues that are caused by it. In Georgia, 1 in 3 adults are obese. Nationally, the prevalence of obesity among children and adolescents is about 18.5 percent or about 13.7 million children.



Participants attending the 18 classes over a nine-month period learned about healthy life habits.

The Eat, Play, Learn program aims to equip young patients with information and life skills now to prevent obesity and its complications now in and in the future. Two graduates of the program, Jessica Morales and Marvin Portuguez, received Fitbit fitness trackers for attending all 18 classes.

"I really liked running and the exercising," said Jessica. "The coloring was fun, too."

Marvin said he enjoyed playing soccer and using the agility ladder.

Dr. Obi said she also made a few discoveries herself.

"It was really rewarding to get to know the kids and their families, and I learned from them," she said. "You can't tell them they need to eat better when you're holding a soft drink in your hand."

All the young participants received an agility ladder and a jump rope to use at home, and their families took home bags of fruits and vegetables at the closing ceremony for the program.

Dr. Obi said more Eat, Play, Learn programs are planned for the future.

# Tifani Kinard is Polk County's Homegrown Chief Nurse and Hospital Administrator

Floyd Polk Medical Center's Administrator and Chief Nursing Officer is home-grown and Polk-loyal, a career nurse who worked her way up at Floyd from an 18-year-old transporter to her current position.

Tifani Kinard often shares her story with students to show them that a professional career is attainable, even if resources are limited.

Along her journey, she's earned a nursing degree, a bachelor's degree in nursing, a Master of Public Health and a Master of Business Administration.

A product of Polk County's Cherokee Elementary School, Purks Middle School and Cedartown High School, Tifani's introduction to the Floyd family came when her dad, who sold insurance during the day, moonlighted on the 3 - 11 p.m. shift in Floyd Medical Center's Environmental Services department.

"On the weekends, I would hang out at the hospital with my dad," Tifani said. "That was before people cared if you brought your kids to work."

Tifani's father became friends with Dr. Ed Malcolm, an emergency physician at the hospital, and the three of them often ate breakfast together in the hospital cafeteria. It was Dr. Malcolm who first planted the seed of a career in nursing for Tifani.

After graduating from high school, Tifani was hired as a transporter at Floyd Medical Center, wheeling patients from one location to another on gurneys and in wheelchairs. After about a year in that role, Nellie Shirey, who supervised the Emergency Care Center's registration clerks, offered Tifani a job.

"That is where a couple of nurses from the ER (emergency room) just sort of took me under their wings and said, 'OK Tifani, you need to be a nurse. This is your career. This is what you need to do,'" Tifani said. She heeded the nurses' advice and entered nursing school at Georgia Highlands College while continuing to work full time.

That's a work ethic she was taught early on. Her father always worked two jobs, and her grandparents were hard workers. "My grandmother worked at Arrow, and my grandfather worked at Goodyear," Tifani said. "We were just a very blue-collar family. You go to work every day. That's just what you do. My husband's family is the same way."

Accustomed to squeezing out every bit of effort out of every day, Tifani also threw in the extra challenge of getting married into the mix. Her busy schedule resulted in her working a full-time job, taking semester-end finals and getting married all in the same week. She was 19.

"I left my biology final and drove straight to my wedding rehearsal," she laughed.

After Tifani graduated from nursing school, Kenna Baker, who was the director of the ECC at Floyd at the time, hired her as a nurse. "People like Barbara Burnes, Kenna, and Barbie Townsell, a lot of the senior nurses, kind of took me under their wings," she said.

Tifani's work ethic and willingness to learn gained her opportunities at Floyd Medical Center with increasing levels of responsibility. She served as a nurse, Charge Nurse, Trauma Program Manager, Assistant Director and ultimately Director of the ECC. She left the ECC to take on the role of Safety Coordinator for Floyd Medical Center and became Chief Nursing Officer at Polk Medical Center in 2017. She added the role of Hospital Administrator in 2019.

While serving in these leadership roles, Tifani continued her education and grew her family. She graduated nursing school in 1997 and had her first child, Elizabeth, in 1999. Her son, Ethan, was born in 2005, the same year she returned to college at the University of West Georgia. She completed her bachelor's degree in nursing in 2007, and she again returned to school, earning double master's degrees in public health and business administration in 2011 from Georgia State University (GSU).

Tifani is quick to say that her career and her educational accomplishments are the work of a village. "It was not just me. It was a family effort, between me, my husband, my grandmother, my daddy and others. Over the years, we just made it work," she said. "Had I not had the support of my family, I wouldn't have been able to manage it."

Her fellow nurses were also central to helping her achieve her goals. When she entered the master's degree program at GSU, Tifani was working for Winnie Cullens, the administrator responsible for accreditation and compliance for the Floyd health system. Tifani had classes two days each week in Atlanta from 5 - 9 p.m. That meant she needed to leave work at 3 p.m. to make it to class in time.

"She was very flexible with my schedule to allow me to get my hours but also to go to school. And before that, Kenna had done the same," Tifani said. "Floyd has always been extremely supportive of education and opportunities, and I do feel a significant appreciation for the opportunities that I have had. It always seems like Floyd has had an opportunity for me whenever I've been ready."

Returning to Polk County to continue her career was icing on the cake, she said. "It is nice to come back to Polk County and be able to give back to the community that raised me," she said. "Sometimes, I have to pinch myself and ask, 'are they really willing to pay me a salary to do this?' I'm not the only person here who feels that way, and that makes it fantastic to work at Polk Medical Center. Our ER director is local. Our Director of Inpatient Nursing Services is local. I am local."

Having those local connections makes it easy to engage the Polk team in the community, she said. "They feel the same way I do. This is our community. This is their moms or dads who are coming to the ER, or it's their grandfather who is going to the Swing Bed program, or their neighbor they are going to have to face about the service they received here. This our community, and we want to do it right."

Her message to Polk County students is that anything is possible, and you don't have to go into debt to make your dream happen.

"You don't necessarily have to go to a huge college and spend \$100,000, and the truth is, it really doesn't matter if your degree is from Georgia Highlands or Emory. It's a nursing degree. Your pay is going to be the same when you get out of school. Between the HOPE Grant, the Zell Miller Scholarship and all the things that the College and Career Academies are doing, a career in health care is something that kids can do that can change their lives forever," Tifani said.

Community involvement is a cornerstone of Polk Medical Center's vision, she said. Matt Gorman, Vice President of Corporate and Network Services, had this vision for a community engagement strategy. It is really his vision that he allowed us to take part in, and it became our vision as well.

"It has opened up our hearts for what the community needs," Tifani said. "When we looked at the Community Health Needs Assessment, we tried to follow it. Our partnership with the Farmers Market helps people have access to healthier foods. We participate in things like Summer Fest, where we do cooking demonstrations for people and donate school supplies. We constantly are looking for opportunities to partner with the community to make it a healthier place to live."



## Joe Miller Proclaims Alabama's Beauty from Nature's Pulpit

Most weekdays you'll find Joe Miller working as a medical coder at Floyd Cherokee Medical Center, but if life doesn't pull him in another direction that's the only time you'll find Joe behind a desk. When he's not working, he'll likely be on a trail with his camera looking for a waterfall, creek or river to photograph. "My passion is landscapes, waterfalls and outdoor stuff," Joe said. "I do a little bit of wildlife, but I love moving water."

It is one of his landscapes that brought Joe a little bit of fame. In February 2019, his photograph of a sunset from Pulpit Rock at Cheaha State Park in Delta, Alabama, was selected by the U.S. Postal Service to be used on a stamp celebrating the 200th anniversary of Alabama's statehood.



Joe poses with his photograph chosen by the U.S. Postal Service for a stamp celebrating the 200th anniversary of Alabama becoming becoming a state.

Photography has been a passion for Joe since childhood. "I had a couple of little cameras as a kid and always thought I would want to do photography," Joe said. "When I was younger, I thought I would like to be a photojournalist." That thought ended when Joe realized that working for a daily newspaper or magazine probably wasn't a good match for his personality. "I'm not that much of a people person," Joe confessed.

It is nature that calls Joe's name. He grew up in the outdoors, and his father was an outdoorsman. Joe, who was a Boy Scout, came to enjoy the camping and hiking that came with earning his merit badges. "I love the outdoors, camping, kayaking, biking and hiking. I have always just loved rivers, waterfalls and mountains. I like my solitude."

Rather than study photography in college or make it a career, Joe made it his hobby and instead found a career in route sales, servicing store shelves from a snack truck. He drove the truck for 30 years until he realized it was time for a change. "I didn't want to be jumping in and out of a truck in the heat and the rain anymore, so I made a bold decision to do something different," he said.

With his two children grown and out of college, Joe went back to school and became a medical coder. He started his new career at Cherokee Medical Center in April 2016, and he's never once regretted it. Working at Cherokee took him off the truck and out of the elements. It also gave him a schedule that matches his wife's and gives him time with his family.

Joe said he loves working at the hospital because of the atmosphere. "It has a real sense of community," he said.

The hospital's management agreement with Floyd has improved the community's perception of Cherokee Medical Center, he said. "I have heard many good things from patients coming into our office," Joe said.

His job as a medical coder involves reviewing medical charts and then applying alphanumeric codes to each of the procedures and diagnoses noted on the chart. Those codes are how insurance companies, Medicaid and Medicare determine how much the hospital should be paid for the services patients receive. Like the moving water that he loves to photograph, a medical coder's day is constantly changing, Joe said. "It keeps me busy, and that is the way I like it," he said.



Joe likes the constantly changing landscape of a medical coder's day. It keeps him busy.

These days, Joe has fewer weekends available for his hobby, but when he does get a weekend, he takes his camera and heads outside. "I love to go to scenic locations and get the scene in the best light. Early morning or toward the end of the day is always the best light, and the low-angle light gives a whole lot more pleasing look to whatever subject you are shooting," he said.

Joe carries his camera wherever he goes, and his supportive wife indulges his hobby. "She really lets me pick where we go on vacation, and I do consider the photographic opportunity," he acknowledged.

On an upcoming vacation, he and his wife are planning to go to West Virginia's New River Gorge area where he plans to shoot more of his favorite subjects. And when he retires, Joe said he has a list of national parks he hopes to visit. Naturally, he'll have his camera in hand. It may come as a surprise that Joe does not like to photograph people. Although he gets requests for weddings, senior pictures and family portraits, Joe politely declines them. "I've done a couple just for my extended family, but that is not really my passion. That is a totally different type of photography. It is fascinating, but it is not my cup of tea," he said. While Joe hasn't photographed many people in the past, that changed when his first grandson came along. Joe now takes a lot of pictures of his first grandchild, regardless of whether he's standing in front of a beautiful sunset or a waterfall, but in a world where iPhone selfies rule, Joe rarely includes himself in his photos. The selfie exception, he said, is when he positions himself in a landscape to show scale and perspective, and maybe that says more about Joe than all his photographs combined.

### **Quality Awards**

#### Women's Choice America's Best Hospital

Floyd Medical Center was one of America's Best Hospitals for both obstetrics and bariatric surgery, according to the 2019 and 2020 Women's Choice Awards.



The nationwide awards are aimed at helping women make smart health choices and

WOMEN'S CHOICE AWARD

AMERICA'S BEST HOSPITALS

OBSTETRICS

are focused on aspects of care that are important to women. Women are the primary health care decision-makers in America.

#### CareChex - Medical, Patient Safety Excellence Recognition

In 2020, CareChex, an information service of Quantros Inc., honored Floyd Medical Center for being a top hospital in the nation in the following categories:

Medical Excellence:

- Overall medical care
- Gastrointestinal care
- Neurological care
- Spinal fusion
- Spinal surgery
- Women's health

#### Patient Safety:

- Overall medical care
- Chronic obstructive pulmonary disease
- Gastrointestinal care
- Heart attack treatment
- Major bowel procedures
- Pneumonia care
- Pulmonary care
- Sepsis care
- Spinal fusion
- Spinal surgery





#### Forbes Best-in-State Employer

Floyd was among six health systems and hospitals in Georgia ranked by *Forbes* magazine on its list of America's Best-in-State Employers for 2019. The health system was one of only 56 Georgia employers ranked in the list.

Rankings are based on a survey of more than 80,000 U.S. employees working for companies employing at least 500 people. Survey questions focused on topics such as working conditions, salary and potential for development as well as whether employees would recommend their employer to job seekers. Participants also were asked to evaluate other employers either positively or negatively.

Floyd joined Piedmont Healthcare, Emory Healthcare, Shepherd Center, Phoebe Putney Health System and Houston Healthcare among the ranked hospitals and health care systems.

## Heart/Stroke Association Gold Awards

Floyd Medical Center and Polk Medical Center earned the Get With The Guidelines®-Heart Failure Gold Plus Quality Achievement Awards in 2019 and 2020.

Floyd Medical Center also received the Get With The Guidelines\*-Stroke Gold Plus Quality Achievement Award.

The hospitals were recognized for meeting quality achievement measures for the diagnosis and treatment of patients.

Get With The Guidelines® is an American Heart Association/ American Stroke Association hospital-based, quality-improvement program that provides research-based guidelines for patient care.





#### Top Rural Hospital

Polk Medical Center was named a national Top Rural Hospital by The Leapfrog Group in 2018 and 2019. The honor recognizes the hospital's



accomplishments in patient safety and quality care.

The selection of Top Hospitals is based on surveys from nearly 1,900 hospitals, covering such topics as infection rates, maternity care and the hospital's capacity to prevent medication errors.

The award is one of the most competitive honors American hospitals can receive from Leapfrog, an independent hospital watchdog organization. Only 17 rural hospitals in the United States received Top Rural Hospital distinction in 2018.

#### Level IV Trauma Center

Polk Medical Center became a state-designated Level IV Trauma Center in 2019.



Level IV Trauma Centers have demonstrated the ability to provide advanced trauma life support prior to transfer of patients to a higher-level trauma center. They provide evaluation, stabilization and diagnostic capabilities for injured patients.

Level IV Trauma Centers must have 24-hour laboratory coverage, trauma nurses and physicians available when a patient arrives. They are also required to have a transfer agreement with a Level I or Level II Trauma Center, incorporate a quality assessment program and be involved with prevention and outreach efforts.

Polk is the only Level IV Trauma Center in northwest Georgia and is among seven Level IV Trauma Centers in the state. There are 32 state-designated trauma and specialty care centers in Georgia.

#### Top 20 Critical Access Hospital list

Polk Medical Center is one of the country's Top 20 Critical Access Hospitals, according to the National Rural Health Association.



The distinction recognizes critical access hospitals scoring best in a review by The Chartis Center for Rural Health for Quality.

The Top 20 Critical Access Hospitals have achieved success in overall performance based on a composite rating from eight areas of strength:

- Inpatient market share
- Outpatient market share
- Quality
- Outcomes
- Patient perspectives
- Cost
- Charge
- Financial stability

#### Hospice Honors Elite

Heyman HospiceCare at Floyd was recognized in 2018 and 2019 with the Hospice Honors Elite award, recognizing hospice programs that provide the highest level of quality as measured from patient and family members' points of view. This was the fifth consecutive year Heyman HospiceCare has received this award.



### **Board Members**



George Bosworth, M.D. Chairman, Floyd Healthcare Management Inc.; Member, Floyd Healthcare Resources Inc.; Member, Polk Medical Center Inc.; Member, Floyd Cherokee Medical Center LLC



Mark Manis Chairman, Floyd Healthcare Resources Inc.; Member, Floyd Healthcare Management Inc.



**David Johnson**Chairman, Hospital Authority of Floyd County; Member, Floyd Healthcare Management Inc.



Frank Shelley
Chairman, Polk Medical
Center Inc.; Chairman,
Cedartown-Polk County
Hospital Authority; Member,
Floyd Healthcare Management Inc.



Kay Chumbler Chairman, Floyd Cherokee Medical Center LLC; Vice Chairman, Floyd Healthcare Management Inc.



Wright Bagby Member, Floyd Healthcare Management Inc.; Member, Hospital Authority of Floyd County



John Bennett Member, Floyd Healthcare Resources Inc.; Member, Hospital Authority of Floyd County



**Todd Bussey** Member, Polk Medical Center Inc.; Member, Cedartown-Polk County Hospital Authority



**James Collins, M.D.** Member, Floyd Healthcare Management Inc.



**Lee Cummings**Member, Polk Medical Center
Inc.; Member, Cedartown-Polk
County Hospital Authority



**Katie Dempsey** Member, Floyd Healthcare Resources Inc.



Denise Downer-McKinney Member, Hospital Authority of Floyd County; Member, Floyd Healthcare Resources Inc.



**David Early** Member, Floyd Cherokee Medical Center LLC



Darroll Freeman Member, Polk Medical Center Inc.; Member, Cedartown-Polk County Hospital Authority



**Garry Fricks** Member, Floyd Healthcare Management Inc.



Neil E. Gordon, M.D. Member, Polk Medical Center Inc.; Member, Cedartown-Polk County Hospital Authority



**Dan Hanks, M.D.** Member, Floyd Healthcare Resources Inc.; Member, Hospital Authority of Floyd County



**Carl Herring, M.D.** Member, Floyd Healthcare Management Inc.



**Robert Holcombe, M.D.** Member, Floyd Healthcare Management Inc.



**Chad A. Hopper** Member, Floyd Cherokee Medical Center LLC



James J. Howell Jr. Member, Floyd Cherokee Medical Center LLC



**Trey Kelley**Member, Polk Medical Center
Inc.; Member, Cedartown-Polk
County Hospital Authority



Larry Kuglar Member, Floyd Healthcare Management Inc.; Member, Polk Medical Center Inc.; Member, Cedartown-Polk County Hospital Authority



**Johna M. Lindsey** Member, Floyd Cherokee Medical Center LLC



**Britt Madden, Jr.** Member, Polk Medical Center Inc.; Member, Cedartown-Polk County Hospital Authority



**David Newby**Member, Floyd Healthcare
Management Inc.; Member,
Hospital Authority of Floyd
County



**Dee B. Russell, M.D.** Member, Floyd Healthcare Resources Inc.



**Joel Snider** Member, Floyd Healthcare Resources Inc.; Member, Hospital Authority of Floyd County



Roger Sumner Chairman Emeritus, Floyd Healthcare Management Inc. Chairman Emeritus, Floyd Healthcare Resources Inc.



Kurt Stuenkel
Secretary, ex-officio voting
member, Floyd Healthcare
Management Inc., Secretary,
ex-officio non-voting officer,
Floyd Healthcare Resources
Inc., Secretary, ex-officio
non-voting officer, Hospital
Authority of Floyd County,
Member, Polk Medical Center
Inc.; Secretary, ex-officio
voting member, Floyd
Cherokee Medical Center LLC



Shannon Joe Vaughn, M.D. Member, Floyd Healthcare Management Inc



**Sondi Smith Vest** Member, Polk Medical Center Inc.; Member, Cedartown-Polk County Hospital Authority



Rhonda Wallace Member, Floyd Healthcare Management Inc. Member, Hospital Authority of Floyd County



Harold Wyatt, Jr. Chairman Emeritus, Polk Medical Center Inc.; Chairman Emeritus, Cedartown-Polk County Hospital Authority

## **Executive Leadership**

**Kurt Stuenkel** President and Chief Executive Officer

Warren "Sonny" Rigas Executive Vice President and Chief Operating Officer

**Sheila Bennett** Executive Vice President and Chief of Patient Services **Tommy Manning**Executive Vice President and Chief Legal Officer

**Beth Bradford** Chief Human Resources Officer

**Jeff Buda** Vice President and Chief Information Officer

Clarice Cable Interim Chief Financial Officer **Rick Childs** Vice President, Revenue Cycle Management

**David Early** Vice President, Support Services and Operations

**Taunya Faulkner** Vice President for Performance Improvement Matt Gorman Vice President of Corporate and Network Services

Ken Jones, M.D.
Interim Chief Medical Officer

Julie Rogers Corporate Compliance Officer

## Health Care **Delivery Statistics**

FLOYD MEDICAL CENTER	2017	2018	2019
Bariatric Surgery Cases	126	144	194
Births	2,294	2,213	2,192
Cardiac Cath Lab Cases	1,750	1,822	1,929
Emergency Care Center Visits	74,434	73,295	72,550
Total Floyd Medical Center and Behavioral Health Admissions	24,668	25,870	26,812
Floyd Medical Center Inpatient Admissions	15,880	16,510	16,499
Floyd Medical Center Observation Admissions	7,880	7,786	8,675
Behavioral Health Inpatient Admissions	908	1,574	1,638
Floyd Medical Center and Behavioral Health Patient Days	91,888	98,694	99,614
Floyd Medical Center Inpatient Days	74,521	78,230	77,239
Floyd Medical Center Observation Patient Days	11,788	11,456	12,705
Behavioral Health Inpatient Patient Days	5,579	9,008	9,670
Floyd Primary Care Visits	132,032	131,919	156,568
Family Practice Visits	16,451	14,191	14,359
Floyd Urgent Care Visits, Rome	22,930	24,049	22,610
Floyd Urgent Care Visits, Cedartown	11,346	10,568	10,744
Floyd Urgent Care Visits, Cartersville	15,608	16,654	18,686
Floyd Urgent Care Visits, Summerville	23,582	22,585	21,005
Floyd Urgent Care Visits, Rockmart	15,524	16,561	16,824
Floyd Urgent Care Visits, Calhoun	12,161	12,193	14,443
Floyd Urgent Care Visits, Centre	9,625	11,566	12,335
Heyman HospiceCare Patient Days	29,502	31,904	32,369
Laboratory Billable Tests	1,124,377	1,102,996	1,084,775
Outpatient Visits*	202,738	206,030	226,669
Radiology Procedures	134,737	140,491	144,928
Floyd Medical Center Surgeries	18,725	18,140	19,667

\*Outpatient Excludes Emergency Care Center visits.

Outpatient includes: EKG Outpatient Visits, Outpatient Radiology Visits, Outpatient Rehab Visits, Family Practice Patient Visits, Outpatient Respiratory Therapy Visits, Outpatient Laboratory Visits, Preoperative Evaluation Clinic Visits, Outpatient Surgery Visits, Sleep Lab, Congestive Heart Failure Clinic, Wound Care, Outpatient Behavioral Health, Infusion Therapy

POLK MEDICAL CENTER	2017	2018	2019
Emergency Department Visits	28,870	28,645	27,393
Total Admissions	843	849	902
Inpatient Admissions	85	103	129
Swing Bed Admissions	463	477	466
Observation Admissions	295	269	307
Patient Days	7,797	7,975	8,186
Inpatient Days	199	232	322
Observation Days	387	354	399
Swing Bed Days	7,211	7,389	7,465
Outpatient Visits*	12,499	9,999	12,056
Radiology Procedures	18,084	19,244	19,990
Surgery Cases	100	84	97

\*Outpatient Excludes Emergency Care Center visits.

Outpatient includes: EKG Outpatient Visits, Outpatient Radiology Visits, Outpatient Rehab Visits, Family Practice
Patient Visits, Outpatient Respiratory Therapy Visits, Outpatient Laboratory Visits, Preoperative Evaluation Clinic
Visits, Outpatient Surgery Visits, Sleep Lab, Congestive Heart Failure Clinic, Wound Care, Outpatient Behavioral Health,
Infusion Therapy

Emergency Department Visits       8,413       9,243         Total Admissions       967       986         Medical Admissions       369       317         Detox Admissions       289       342         Swing Bed Admissions       134       124         Observation Admissions       175       203         Patient Days       4,127       4,513         Medical Patient Days       1,376       977         Detox Patient Days       1,344       1,676         Swing Bed Patient Days       1,317       1,539         Observation Patient Days       290       321         Outpatient Visits*       9,649       4,576         Radiology Procedures       10,429       11,818         Surgery Cases       922       1,141	CHEROKEE MEDICAL CENTER	2018	2019
Medical Admissions       369       317         Detox Admissions       289       342         Swing Bed Admissions       134       124         Observation Admissions       175       203         Patient Days       4,127       4,513         Medical Patient Days       1,176       977         Detox Patient Days       1,344       1,676         Swing Bed Patient Days       1,317       1,539         Observation Patient Days       290       321         Outpatient Visits*       9,649       4,576         Radiology Procedures       10,429       11,818	Emergency Department Visits	8,413	9,243
Detox Admissions       342         Swing Bed Admissions       134       124         Observation Admissions       175       203         Patient Days       4,127       4,513         Medical Patient Days       1,176       977         Detox Patient Days       1,344       1,676         Swing Bed Patient Days       1,317       1,539         Observation Patient Days       290       321         Outpatient Visits*       9,649       4,576         Radiology Procedures       10,429       11,818	Total Admissions	967	986
Swing Bed Admissions       134       124         Observation Admissions       175       203         Patient Days       4,127       4,513         Medical Patient Days       1,176       977         Detox Patient Days       1,344       1,676         Swing Bed Patient Days       1,317       1,539         Observation Patient Days       290       321         Outpatient Visits*       9,649       4,576         Radiology Procedures       10,429       11,818	Medical Admissions	369	317
Observation Admissions       175       203         Patient Days       4,127       4,513         Medical Patient Days       1,176       977         Detox Patient Days       1,344       1,676         Swing Bed Patient Days       1,317       1,539         Observation Patient Days       290       321         Outpatient Visits*       9,649       4,576         Radiology Procedures       10,429       11,818	Detox Admissions	289	342
Patient Days       4,127       4,513         Medical Patient Days       1,176       977         Detox Patient Days       1,344       1,676         Swing Bed Patient Days       1,317       1,539         Observation Patient Days       290       321         Outpatient Visits*       9,649       4,576         Radiology Procedures       10,429       11,818	Swing Bed Admissions	134	124
Medical Patient Days1,176977Detox Patient Days1,3441,676Swing Bed Patient Days1,3171,539Observation Patient Days290321Outpatient Visits*9,6494,576Radiology Procedures10,42911,818	Observation Admissions	175	203
Detox Patient Days       1,344       1,676         Swing Bed Patient Days       1,317       1,539         Observation Patient Days       290       321         Outpatient Visits*       9,649       4,576         Radiology Procedures       10,429       11,818	Patient Days	4,127	4,513
Swing Bed Patient Days1,3171,539Observation Patient Days290321Outpatient Visits*9,6494,576Radiology Procedures10,42911,818	Medical Patient Days	1,176	977
Observation Patient Days290321Outpatient Visits*9,6494,576Radiology Procedures10,42911,818	Detox Patient Days	1,344	1,676
Outpatient Visits* 9,649 4,576 Radiology Procedures 10,429 11,818	Swing Bed Patient Days	1,317	1,539
Radiology Procedures 10,429 11,818	Observation Patient Days	290	321
	Outpatient Visits*	9,649	4,576
Surgery Cases         922         1,141	Radiology Procedures	10,429	11,818
	Surgery Cases	922	1,141

note: discontinued performing clinic labs in June 2018 note: Feb 18 - May 18 Radiology Procedures were estimated due to data being unavailable

## **Financial Statements**

Assets	2017	2018	2019
Current assets:			
Cash and cash equivalents	\$ 60,618,716	\$ 55,850,678	\$ 85,698,246
Assets limited as to use, current	6,610,990	6,669,804	6,734,056
Patient accounts receivable, net	61,014,044	70,599,612	76,045,306
Inventories	8,997,435	9,804,907	11,768,534
Other current assets	9,932,266	13,288,949	_ 12,637,989
Total current assets	147,173,451	156,213,950	192,884,131
Assets limited as to use:			
By board for capital improvements	110,534,511	125,967,383	149,459,503
Under indenture agreement – held by trustee	28,306,468	28,411,752	7,471,057
457 F Plan - held by trustee	26,306,466	1,150,404	7,471,057
Total assets limited as to use	138,840,979	155,529,539	157,715,834
Less amount required to meet current obligations	6,610,990	6,669,804	6,734,056
Noncurrent assets limited as to use	132,229,989	148,859,735	150,981,778
Property, plant and equipment, net	196,406,428	184,742,293	170,242,002
Other assets:			
Other	3,363,793	4,114,043	3,514,410
Total other assets			
Total assets	\$479,173,661	\$493,930,021	\$517,622,321

Liabilities and Net Assets	2017	2018	2019
Current liabilities:  Current portion of long-term debt		\$ 3,841,697	\$ 4,954,286
Accounts payable Estimated third-party payor settlements	17,888,631 1,794,740	16,342,275 3,300,333	17,202,485 2,551,130
Accrued expenses: Salaries and compensation	6,141,318	6,307,184	7,284,104
Employee benefits Other	11,745,196 8,773,512	15,103,984 12,261,507	16,560,222 14,482,240
Total current liabilities	50,122,179	57,156,980	63,034,467
Long-term debt, net of current portion Noncurrent post-retirement liability Due to the Hospital Authority of Floyd County	194,696,635 30,779,640 10,055,532	190,026,683 25,874,197 9,211,994	183,532,556 30,183,428 9,057,258
Total liabilities	285,653,986	282,269,854	285,807,709
Net assets without donor restrictions	193,519,675	211,660,167	231,814,612
Total liabilities and net assets	\$479,173,661	\$493,930,021	\$517,622,321
Income Statement Operating revenues: Net patient service revenue	413,859,589	429,348,199	470,876,951
Other operating revenue	2,720,685	4,068,282	3,416,741
Total revenues, gains and other support	416,580,274	433,416,481	474,293,692
Expenses: Operating expenses	375,133,859	396,147,502	426,896,370
Depreciation and amortization Interest	24,301,524 6,524,279	24,505,509 <u>7,201,936</u>	23,893,543 
Total expenses	405,959,662	427,854,947	457,908,847
Operating income	10,620,612	5,561,534	16,384,845
Nonoperating income (expenses): Investment income and other Pension expense	6,497,616 	6,867,833 (2,313,135)	9,638,454 (65,417)
Total nonoperating income	6,497,616	4,554,698	9,573,037
Excess revenues over expenses	17,118,228	10,116,232	25,957,882

## **Financial Statements**

Assets	2017	2018	2019
Current assets:  Cash and cash equivalents	\$ 7,636,794	\$ 6,380,212	\$ 4,877,195
Assets limited as to use, current portion	850,410	838,126	838,126
Patient accounts receivable, net	5,836,762	8,146,009	6,279,828
Supplies Other current assets	237,146 539,821	298,048 2,053,080	311,879 1,954,938
Total current assets	15,100,933	17,715,475	14,261,966
		17,710,170	11,201,300
Assets limited as to use:  By board for capital improvements  Under indenture agreement -	12,001,567	21,513,064	38,629,519
held by trustee Less amount required to meet current obligations	850,410 <u>850,140</u>	838,126 <u>838,126</u>	836,207 838,126
Noncurrent assets limited as to use	12,001,567	21,513,064	_38,627,600
Property, plant and equipment, net	30,210,194	27,389,056	24,629,973
Total assets	\$57,312,694	\$ 66,617,595	\$ 77,519,539
Liabilities and Net Assets			
Current liabilities:			
Current portion of long-term debt	\$ 154,146	\$ 152,299	\$ 152,299
Accounts payable	556,542	550,274	582,348
Accrued salary Accrued benefits	157,440 794,854	187,526 800,234	230,064 833,732
Other accrued expenses	760,375	1,487,915	1,355,016
Estimated third-party payor settlements	711,740	1,265,000	1,624000
Due to Floyd Healthcare Management Inc.	1,457,692	1,360,209	1,672,120
Total current liabilities	4,620,789	5,803,457	6,449,579
Long-term debt, net of current portion	36,966,665	36,608,759	36,251,396
Total liabilities	41,587,454	42,412,216	42,700,975
Net assets without donor restrictions	15,725,240	24,205,379	34,818,564
Total liabilities and net assets	\$57,312,694	\$66,617,595	<u>\$77,519,539</u>
Income Statement			
Operating revenues:			
Net patient service revenue Provision for bad debts	46,539,362 (16,220,297)	33,057,454	32,213,785
Other operating revenue	219,789	92,336	11
Total revenues, gains and other support	30,538,854	33,149,790	32,213,796
Expenses:			
Operating expenses	20,472,911	21,101,750	20,222,508
Depreciation	3,110,822	2,848,319	2,843,083
Interest	1,317,280	1,428,071	1,423,907
Total expenses	24,901,013	25,378,140	24,489,498
Operating income	5,637,841	7,771,650	7,724,298
Nonoperating income (expenses): Investment income Pension expense	19,268	480,536 227,953	2,056,559 805,402
Total nonoperating income	19,268	708,489	2,861,961
Excess revenues	\$ 5,657,109	\$ 8,480,139	\$ 10,586,259
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## **Financial Statements**

Current laseitts	Assets	2018	2019
Property, plant and equipment, net	Cash and cash equivalents Patient accounts receivable, net Supplies	898,704 -	1,500,409 314,706
Total assets	Total current assets	2,667,086	3,254,545
Liabilities and Net Assets           Current liabilities           Accounts payable         \$ 352,014         \$ 558,498           Accrued salary         114,201         110,227           Accrued benefits         36,624         318,783           Other accrued expenses         191,535         150,000           Total current liabilities         1,045,374         1,137,508           Due to Floyd Healthcare Management, Inc.         2,103,959         8,326,133           Total liabilities         3,149,333         9,463,641           Net assets (deficit) without donor restrictions         482,247         4,838,174           Total liabilities and net assets         \$ 2,667,086         \$ 4,625,467           Income Statement           Operating revenues:           Net patient service revenue         \$ 934,796         \$ 9,842,027           Contribution from Cherokee Authority for operations         1,000,000         250,000           Other operating revenues         1,943,069         10,206,505           Expenses:         3         1,478           Total operating revenues         1,943,069         10,206,505           Expenses:         3	Property, plant and equipment, net		1,370,922
Current liabilities:           Accounts payable         \$ 352,014         \$ 558,498           Accrued salary         114,201         10,227           Accrued benefits         387,624         318,783           Other accrued expenses         191,535         150,000           Total current liabilities         1,045,374         1,137,508           Due to Floyd Healthcare Management, Inc.         2,103,959         8,326,133           Total liabilities         3,149,333         9,463,641           Net assets (deficit) without donor restrictions         (482,247)         (4,838,174)           Total liabilities and net assets         \$ 2,667,086         \$ 4,625,467           Income Statement           Coperating revenues           Net patient service revenue         \$ 934,796         \$ 9,842,027           Contribution from Cherokee Authority for operations         1,000,000         250,000           Other operating revenue         \$ 934,796         \$ 9,842,027           Total operating revenue         \$ 9,842,027         250,000           Expenses:           Salaries and benefits         7 24,296         6,444,960           Professional fees	Total assets	\$ 2,667,086	<u>\$ 4,625,467</u>
Accounts payable         \$ 352,014         \$ 558,498           Accrued salary         114,201         387,624         318,783           Other accrued expenses         191,335         150,000           Total current liabilities         1,045,374         1,137,508           Due to Floyd Healthcare Management, Inc.         2,103,959         8,326,133           Total liabilities         3,149,333         9,463,641           Net assets (deficit) without donor restrictions         (482,247)         (4,838,174)           Total liabilities and net assets         5 2,667,086         \$ 4,625,467           Income Statement         5 2,667,086         \$ 9,842,027           Contribution from Cherokee Authority for operations         1,000,000         250,000           Other operating revenue         8,273         114,478           Total operating revenues         1,943,069         10,206,505           Expenses:         1,943,069         10,206,505           Expenses:         130,556         2,397,129           Supplies and benefits         724,296         6,444,960           Professional fees         130,556         2,397,129           Supplies and other         481,088         5,237,03           Depreciation         41,617	Liabilities and Net Assets		
Accrued salary         114,201         110,227           Accrued benefits         387,624         318,783           Other accrued expenses         191,535         150,000           Total current liabilities         1,045,374         1,137,508           Due to Floyd Healthcare Management, Inc.         2,103,959         8,326,133           Total liabilities         3,149,333         9,463,641           Net assets (deficit) without donor restrictions         (482,247)         (4,838,174)           Total liabilities and net assets         \$ 2,667,086         \$ 4,625,467           Income Statement           Operating revenues:         \$ 934,796         \$ 9,842,027           Contribution from Cherokee Authority for operations         1,000,000         250,000           Other operating revenue         \$ 934,796         \$ 9,842,027           Total operating revenue         \$ 934,796         \$ 9,842,027           Expenses:         \$ 1,943,069         10,000,000         250,000           Other operating revenue         \$ 934,796         6,444,950         6,444,950           Expenses:         \$ 2346,832,703         114,677         9           Expenses:         \$ 2,397,129         8,237,703         1,224         1,224         1,224	Current liabilities:		
Due to Floyd Healthcare Management, Inc.         2,103,959         8,326,134           Total liabilities         3,149,333         9,463,641           Net assets (deficit) without donor restrictions         (482,247)         (4,838,174)           Total liabilities and net assets         \$ 2,667,086         \$ 4,625,467           Income Statement           Operating revenues           Net patient service revenue         \$ 934,796         \$ 9,842,027           Contribution from Cherokee Authority for operations Other operating revenue         1,000,000         250,000           Other operating revenues         1,943,069         10,206,505           Expenses:         2         4,24296         6,444,960           Salaries and benefits         724,296         6,444,960         2,597,129           Supplies and other         481,088         5,823,703         2,297,129           Start up costs         1,110,490          4,1617           Start up costs         2,446,430         14,707,409           Operating loss         (503,361)         (4,500,904)           Nonoperating income:         1,102,490          527           Undesignated gifts and bequests         2,1,114         19,450           Excess expenses <th>Accrued salary Accrued benefits</th> <th>114,201 387,624</th> <th>110,227 318,783</th>	Accrued salary Accrued benefits	114,201 387,624	110,227 318,783
Total liabilities         3,149,333         9,463,641           Net assets (deficit) without donor restrictions         (482,247)         (4,838,174)           Total liabilities and net assets         \$ 2,667,086         \$ 4,625,467           Income Statement           Operating revenues:	Total current liabilities	1,045,374	1,137,508
Net assets (deficit) without donor restrictions         (482,247)         (4,838,174)           Total liabilities and net assets         \$ 2,667,086         \$ 4,625,467           Income Statement           Operating revenues:	Due to Floyd Healthcare Management, Inc.		8,326,133
Income Statement         \$ 2,667,086         \$ 4,625,467           Operating revenues:         \$ 934,796         \$ 9,842,027           Contribution from Cherokee Authority for operations Other operating revenue         \$ 9,842,027         250,000           Other operating revenue         8,273         114,478           Total operating revenues         1,943,069         10,206,505           Expenses:         \$ 130,556         2,397,129           Salaries and benefits         724,296         6,444,960           Professional fees         130,556         2,397,129           Supplies and other         481,088         5,823,703           Depreciation         -         41,617           Start up costs         1,110,490         -           Total expenses         2,446,430         14,707,409           Operating loss         (503,361)         (4,500,904)           Nonoperating income:         1         527           Interest income         -         527           Undesignated gifts and bequests         21,114         19,450           Excess expenses         \$ (4,480,927)         \$ (4,480,927)	Total liabilities	3,149,333	9,463,641
Commain	Net assets (deficit) without donor restrictions	(482,247)	(4,838,174)
Operating revenues:         \$ 934,796         \$ 9,842,027           Contribution from Cherokee Authority for operations Other operating revenue         1,000,000         250,000           Other operating revenue         8,273         114,478           Total operating revenues         1,943,069         10,206,505           Expenses:         \$ 724,296         6,444,960           Professional fees         130,556         2,397,129           Supplies and other         481,088         5,823,703           Depreciation         441,617         41,617           Start up costs         1,110,490         -           Total expenses         2,446,430         14,707,409           Nonoperating income:           Interest income         -         527           Undesignated gifts and bequests         2,1114         19,450           Excess expenses         \$ (482,247)         \$ (4,480,927)	Total liabilities and net assets	\$ 2,667,086	\$ 4,625,467
Net patient service revenue Contribution from Cherokee Authority for operations Other Operating revenue         \$ 934,796 250,000 250,	Income Statement		
Salaries and benefits       724,296       6,444,960         Professional fees       130,556       2,397,129         Supplies and other       481,088       5,823,703         Depreciation       -       41,617         Start up costs       1,110,490       -         Total expenses       2,446,430       14,707,409         Nonoperating income:         Interest income       -       527         Undesignated gifts and bequests       21,114       19,450         Excess expenses       \$ (482,247)       \$ (4,480,927)	Net patient service revenue Contribution from Cherokee Authority for operations Other operating revenue	1,000,000 8,273	250,000 114,478
Professional fees       130,556       2,397,129         Supplies and other       481,088       5,823,703         Depreciation       -       41,617         Start up costs       1,110,490       -         Total expenses       2,446,430       14,707,409         Operating loss       (503,361)       (4,500,904)         Nonoperating income:       -       527         Undesignated gifts and bequests       21,114       19,450         Excess expenses       \$ (482,247)       \$ (4,480,927)	·		
Depreciation Start up costs       - 41,617         Total expenses       2,446,430       14,707,409         Operating loss       (503,361)       (4,500,904)         Nonoperating income:       - 527         Undesignated gifts and bequests       21,114       19,450         Excess expenses       \$ (482,247)       \$ (4,480,927)			
Start up costs         1,110,490         -           Total expenses         2,446,430         14,707,409           Operating loss         (503,361)         (4,500,904)           Nonoperating income: Interest income Undesignated gifts and bequests         -         527           Undesignated gifts and bequests         21,114         19,450           Excess expenses         \$ (482,247)         \$ (4,480,927)		481,088 -	
Operating loss         (503,361)         (4,500,904)           Nonoperating income:         -         527           Interest income         -         527           Undesignated gifts and bequests         21,114         19,450           Excess expenses         \$ (482,247)         \$ (4,480,927)		1,110,490	<u>-</u>
Nonoperating income:       -       527         Interest income       -       527         Undesignated gifts and bequests       21,114       19,450         Excess expenses       \$ (482,247)       \$ (4,480,927)	Total expenses	2,446,430	14,707,409
Interest income       -       527         Undesignated gifts and bequests       21,114       19,450         Excess expenses       \$ (482,247)       \$ (4,480,927)	Operating loss	(503,361)	(4,500,904)
	Interest income	- 21,114	
		\$ (482,247)	

