

**NOTICE OF MEETING
OF THE
BOARD OF DIRECTORS
OF
HOME HEALTH AND HOSPICE CARE, INC.**

TO: Dr. Shirley Harkey, DHA, FACHE, Chair
Mike Davis, Vice-Chair
Harold Brashear, Treasurer
Dr. Donna Lake, PhD RN NEA, Secretary
Lauren Wiggs

Greg Eloshway
Dr. John Adams
Dr. Jay Carraway
Vince J. Watson

Please take notice that a regular meeting of the Board of Directors of Home Health and Hospice Care, Inc., will be held at the time, on the date, and at the place described below:

Type of Meeting: Regular Board Meeting

Day, Date and Time: Monday, June 9, 2025, 6:00pm

Place: Home Health and Hospice Care, Inc.
2402 Wayne Memorial Drive
Goldsboro, NC 27534

Subject of Meeting: A proposed Agenda, a copy of the proposed Minutes of March 10, 2025, meeting of Directors, a copy of the proposed Minutes of May 28, 2025, Finance/Building and Grounds Committee Meeting, a copy of the proposed Minutes of May 22, 2025, Human Resources Committee Meeting, and a copy of the proposed Minutes of May 12, 2025, Compliance and Quality Committee Meeting.

This meeting is held pursuant to Article III Section 6 of the Bylaws of the Corporation dated March 13, 2023, and this Notice is being given pursuant to Article III, Section 7 of said Bylaws.

This is the 4th day of June 2025.

By: Crystal Raiford
Crystal Raiford, Recording Secretary

AGENDA
HOME HEALTH AND HOSPICE CARE, INC. (3HC)
BOARD OF DIRECTORS' BOARD MEETING
CORPORATE BOARD ROOM
MONDAY, JUNE 9, 2025
6:00PM

- A. CALL TO ORDER HARKEY
- B. APPROVAL OF MINUTES (*March 10, 2025*) HARKEY
- C. CONSENT AGENDA BROWN/WHITLEY
Motion required to move any standing committee reports submitted in advance of the Board Meeting to the full agenda and to accept the consent agenda.
 - 1. Committee Meeting Minutes
 - a. Compliance and Quality
- D. EXECUTIVE COMMITTEE REPORT HARKEY
 - 1. Nominating Committee Update
 - 2. Community Advisory Board
- E. FINANCE COMMITTEE REPORT BRASHEAR
 - 1. Financial Report YTD
 - 2. Building and Grounds
 - 3. Philanthropy
- F. HUMAN RESOURCES COMMITTEE REPORT WILSON
 - 1. Tenure Bonus and Increases (were budgeted)
 - 2. Virtual Hiring Event
- G. CEO UPDATES WHITLEY
 - 1. Strategic Plan Update – in portal - visual
 - 2. CCHH
 - 3. Partnerships
 - 4. Board Portal
- H. CLOSED SESSION HARKEY
 - 1. Attorney's Report – Darrell Brown
 - 2. Strategic Partnerships – Jennifer Whitley
- I. RETURN TO OPEN SESSION HARKEY
- J. NEXT BOARD MEETING DATE (*September 8, 2025*) HARKEY
- K. ADJOURNMENT HARKEY

**Minutes of
Home Health and Hospice Care, Inc.
Board of Directors Meeting
Goldsboro, NC
Monday, March 10, 2025
6:00PM**

Members Present: Dr. Shirley Harkey, Chair
Harold Brashear, Treasurer
Dr. Donna Lake, Secretary
Dr. Jay Carraway
Vince Watson
Dr. John Adams – Teams
Lauren Wiggs – Teams

Members Absent: Mike Davis, Vice-Chair
Greg Eloshway

Corporate Attorney: Darrell Brown

Staff Present: Jennifer Whitley, Chief Executive Officer
Sarah Wilson, Chief Financial Officer
Kristy Grady, Chief Quality Officer
Jamie Simmons, Chief Clinical Officer
Stephanie Harris, Senior Director of Quality, Regulation and Compliance

Guest: Nicole Frost, VP of Patient Care Services, Carteret Healthcare

The Board of Directors of Home Health and Hospice Care, Inc., met Monday, March 10, 2025, at 6:00pm.

Dr. Shirley Harkey called the meeting to order at 6:01pm.

On motion made by Dr. Shirley Harkey, seconded by Harold Brashear, and carried, the Board

RESOLVED to approve January 13, 2025, Board meeting minutes.

Consent Agenda presented by Jennifer Whitley

- Human Resources/Retirement and Philanthropy Committee meeting minutes were approved and no action needed.

On motion made by Dr. Shirley Harkey, seconded by Dr. Donna Lake and carried, the Board

RESOLVED to accept the Consent Agenda.

Nicole Frost, a potential Board member, was welcomed to the Board Meeting. The Board members introduced themselves.

Dr. Shirley Harkey congratulated Lauren Wiggs on her promotion.

Financial Committee Report presented by Harold Brashear

Harold Brashear stated we are doing better YTD. Net operating income through January 31, 2025, (\$260,000); budgeted for a loss of (\$660,000). Found some billing issues that have caught us up. Positive impacts.

Jennifer Whitley shared the following:

- **Cost Containment**
 - Medical supplies are down 21% – formulary – patient supplies – quarterly Medline review
- **Revenue**
 - HH census has rebounded – above budget for our payor mix – PDGM

- **UHC**
 - We will no longer have to obtain prior authorization – increase in revenue
 - We have been asked to work with UHC on a pilot for PDGM methodology vs. cost per visit reimbursement. Potentially, this will cover our direct costs and our overhead – will be talking with them on Wednesday.
- **PDGM – Patient Driven Grouping Model**

Building and Grounds Committee Report presented by Jennifer Whitley

- The Center of Excellence has been placed on the market
- Henderson Office closed February 28th and our lease is up next year. The landlord has found someone to pick up the lease. The furniture that was left is being offered to the new tenant.
- Fayetteville Waystation has officially closed and has moved to our Fayetteville Hospice Office.

Board of Directors Portal presented by Kristy Grady

Kristy Grady shared a demo of the new Board of Directors Portal with the Board. This will innovate our sharing of information with the Board. Lauren Wiggs presented this idea. The Board was impressed with the portal. Jennifer Whitley stated we will upload some documents to the Board Portal before the next Board meeting. Jennifer Whitley's goal is to not mail anything but add it to the portal instead. Lauren Wiggs questioned having a feature added to approve minutes through the portal.

Spring Soiree presented by Kristy Grady

Kristy Grady stated as of today, we have received \$34,750 in sponsorships, which is three times the sponsorships we raised for Mardi Gras, over 250 tickets sold. Eight departments have committed to making silent auction baskets; 14 auction items have been donated, and 12 silent auction items have been received. Kristy Grady thanked the Board for their donations. Dr. Shirley Harkey asked the Board to think about attending.

Philanthropy Report presented by Kristy Grady

The goal of \$1,000,000 has been set; \$366,000 in donations received to date.

Compliance and Quality Committee Report presented by Stephanie Harris

Stephanie Harris gave a summary of the 2025 Compliance Policy Plan changes:

- Pg. 5: Update to the Federal False Claims Civil Penalties
- Pg. 26: Update to FCA penalty amounts
- Pg. 33: Update to reflect current amount limit for non-monetary compensation (Education/Gifts for Referral Sources)
- Pg. 44: Changed Annual compliance audit to bi-annual

The Compliance and Quality Committee made a motion to approve the 2025 Compliance Policy Plan changes. Unanimously approved by the Board.

Stephanie Harris conducted the Annual Board Compliance Education

Duties of the Governing Body

- Appoint a Compliance Officer to provide oversight and carry out functions outlined in the Corporate Compliance Plan.
- Ensure that the Company complies with all civil and criminal laws pertaining to health care fraud.
- On at least an annual basis, the members of the Governing Body will also address the issues described in the Company's Policy on Governing Body Compliance Activities.
- Will receive quarterly written reports on compliance activities related to prevention and/or correction of possible fraudulent or abusive conduct.
- The Board of Directors will review the Company's Code of Conduct and Compliance Plan and related policies and procedures at least annually and shall make appropriate modifications in consultation with legal counsel.
- Will ensure that an audit is conducted bi-annually by a neutral third party knowledgeable in the area of healthcare fraud and abuse to help ensure compliance with applicable requirements.

Dr. Donna Lake stated, in January, 3HC received a 5 Star rating from CMS for patient satisfaction. Goldsboro Hospice received a strong rating with patient satisfaction. Fayetteville Hospice, not eligible for a rating, but are still being evaluated; they are achieving outstanding volumes.

Dr. Donna Lake stated the meeting minutes are extensive and there is a great amount of improvement in the agency. Stephanie Harris keeps us well informed.

Dr. Shirley Harkey thanked Nicole Frost for joining the meeting as a guest. Jennifer Whitley will be reaching out to Nicole Frost regarding the Board. Nicole Frost left the meeting.

DHSR Complaint presented by Stephanie Harris

On February 17th, a call was received from the Assistant Clinical Director in Clinton, stating state surveyors showed up on a complaint. The wife of a patient reported the complaint and said we did not resolve her complaint timely. The surveyors reviewed three charts, and we received two Standard Level Deficiencies – not following the grievance process. This incident was not reported

to Risk Management. A review of the chart showed a wound had declined and the clinician did not report it to the doctor. Plan of Correction was accepted by the state.

Executive Score Card presented by Jennifer Whitley

Fiscal YTD, we are beating our budget with a negative bottom line

- **Philanthropy** – we are 1/3 of the way there; goal was \$700,000 – the new goal is set at \$1,000,000
- **Career Development** – Employee Opinion Survey in June
- **Cultivate Partnerships** – 3 executed contracts
- **Projects** – 28 active

Jennifer Whitley recognized the Executive Management Team for their support and input. Moving in the right direction in outcomes. Dr. Shirley Harkey thanked the team for putting it in a format where they can see progress.

On motion made by Dr. Donna Lake, seconded by Dr. Jay Carraway and carried, the Board

RESOLVED to go into Closed session at 6:53pm.

On motion made by Dr. Donna Lake, seconded by Dr. Jay Carraway and carried, the Board

RESOLVED to return to Open Session at 7:30pm.

On motion made by Vince Watson, seconded by Dr. Jay Carraway, and carried, the Board

RESOLVED to approve the annual performance appraisal from September 17, 2024, for Jennifer Whitley.

On motion made by Vince Watson, seconded by Dr. Jay Carraway, and carried, the Board

RESOLVED to approve the ninety (90) day evaluation from February 25, 2025, as amended for "Quality, Safety, Patient Experience".

On motion made by Dr. Jay Carraway, seconded by Vince Watson and carried, the Board

RESOLVED to adjourn the meeting.

There being no further business, the meeting was adjourned at 7:36pm.

Respectfully submitted,



Crystal Raiford
Recording Secretary

Dr. Shirley Harkey, Chair

Dr. Donna Lake, Secretary

341602 (*Fayetteville Hospice CCN*) **341551** (*Goldsboro Hospice CCN*) **347104** (*Goldsboro HH CCN*) **347062** (*Henderson HH CCN*) **K245** (*Palliative Care*)