

MISSION STATEMENT

The mission of the Pine Eagle Health Planning Committee is to assure our community access to the best possible health care that we can provide.

This manual received final approval from the Board of Directors for the complete page-by-page revision started September, 1998 and completed July, 1999, The Board of Directors can, at any time, pass an amendment to change a line, page, or section and have the change noted at any public meeting.

We, the Board, recognize the need to use this policy book as a reference to problems with management and staff. When an issue needs clarification or change, the Board will notify the policy committee to research and re-write. Before a final decision on an issue is passed, it must be backed by whatever is written into policy and approved at a public meeting.

This Mission Page has been reviewed this 26st day of December, 2009

CURRENT BOARD OF DIRECTORS AND TERM OF SERVICE

| | | |
|---|--|-----------|
| Rose Darting – Chairman PO Box 634 Halfway, OR 97834 rdarting@gmail.com | 541-742-5066 | 2009-2012 |
| Loren Goracke - Treasurer PO Box 501 Halfway, OR 97834 lgoracke@pinetel.com | 541-742-4004 | 2008-2011 |
| Tom Warmath PO Box 472 Halfway, OR 97834 warmatht@yahoo.com | 541742-5758 | 2007-2010 |
| Duane Miles 36232 Holbrook Spur Ln. Halfway, OR 97834 dmiles007@yahoo.com | 541-742-5151 | 2006-2012 |
| Bill Johnson-Vice Chair 36359 Valley View Halfway, OR 97834 bj5005@hotmail.com | 541-742-5005 home 503-635-1040 cell | 2008-2011 |
| Tony Sowers PO Box 910 Halfway, OR 97834 tony_sowers@ansonics.com | 541-742-4115 home 575-770-0148 cell | 2009-2012 |
| Carolyn Coble - Secretary 49619 Clear Creek Rd. Halfway, OR 97834 myemail@pinetel.com | 541-742-6978 | 2009-2011 |
| Penny Sabin 36301 Valley View Lane Halfway, OR 97834 psabin@pinetel.com | 541-742-6315 | 2007-2010 |
| Charles Peterson 46866 Fish Lake Rd Halfway, OR 97834 petersc@pinetel.com | 541-742-7755 | 2007-2010 |

Halfway Oxbow Ambulance Service

Office Phone **742-7425**
Halfway Ambulance **2122**
Cell Halfway **541-540-1911**
Oxbow Ambulance **2021**
Cell Oxbow **541-540-2911**

Drivers

| | | | |
|------|----------------|----------|-------------------|
| 2108 | Jodel Thatcher | 742-6590 | cell 541-540-6591 |
| 2109 | Jill Bridges | 742-4418 | cell 541-227-8080 |
| 2102 | Rick Simpson | 742-6254 | cell 541-540-7200 |
| 2112 | Mike Butner | 742-6822 | |

First Responders

| | | | |
|------|------------|----------|--|
| 2107 | Rod Tarter | 742-4085 | |
|------|------------|----------|--|

Basics

| | | | |
|------|--------------------|----------|-------------------|
| 2104 | Rachelle Robinette | 742-5301 | cell 541-403-1167 |
| 2103 | Francis Tyler | 742-5802 | |
| 2106 | Tammy Tyler | 742-5602 | |
| 2105 | Robin Kearns | 742-5366 | |
| 2111 | Andrea Bryan | 742-2456 | cell 541-540-1410 |
| 2110 | Susan Schmoe | 742-5895 | cell 541-540-5895 |
| 2101 | Brianna Kossler | 742-5345 | cell 541-540-3386 |
| 2116 | Phyllis Tomas | 742-7071 | |

Intermediates

| | | | |
|------|--------------|----------|---------------------------|
| 2113 | Ben Bishop | 742-5234 | |
| 2114 | Dana Simrell | 742-4595 | cell 541-519-7592 or 7580 |
| 2115 | Terry Schmoe | 742-5895 | cell 541-540-6857 |

ACLS

| | | | |
|------|--------------------|----------|-------------------|
| 2118 | Kate Grace | 742-5344 | cell 541-540-3387 |
| 2119 | Mari Jo St. Claire | 742-2323 | |

Dispatch 541-523-6415

SECTION I:

ACCOUNTING PRACTICES

1. Billing and Collection Policy

Statements will be sent out the first of each month.

Bills 60 days overdue: The office staff will contact patients with bills 60 days overdue. If no payment is forthcoming, the first collection letter, signed by the billing manager, will be sent.

Bills 90 days overdue: If no payment has been made in response to the first collection letter, a second collection letter will be sent. If there is still no response or payment, a third collection letter will be drafted and reviewed by the Clinic Administrator. In extenuating circumstances, those reviewing the account have the authority to grant more time or to contact the debtor in person. The third collection letter, when sent, is signed by the Administrator.

Ten days after the third letter is mailed, the billing manager is authorized to assign the account to the Credit Bureau if there has been no response from the debtor. At the time the account is turned over, the Clinic will add its collection cost fees to the balance. Copies of the patient's statement or ledger showing the charges that were incurred for the debt due will be pulled and kept in a collection file for future reference between patient and the Credit Bureau.

SAMPLE COLLECTION LETTERS

Pine Eagle Health Clinic
PO Box 647
Halfway, OR 97834
Telephone: (541) 742-5023
Fax: (541) 742-7210

Date: _____

Dear Patient:

It is the policy of this office to contact patients who have received two billing statements but have not replied. We are certainly aware of the difficult financial times in which we are now living, and because of this we think communication between our office and patients regarding past-due bills is most important.

We ask that you cooperate in calling our office to communicate with us about your outstanding balance. We are certain we can work out a suitable written payment arrangement with due dates, amounts, etc., to the benefit of all. Keep in mind that we accept VISA/MasterCard for payment in full on accounts. *If you are on a limited income, we have a program to help you, but you must commit to being punctual with a payment each month.*

We thank you for your cooperation and look forward to assisting you.

Sincerely,

Billing Manager

**Pine Eagle Health Clinic
PO Box 647
Halfway, OR 97834
Telephone: (541) 742-5023
Fax: (541) 742-7210**

Date: _____

Re:

Dear:

An audit of your account indicates an overdue balance of \$ _____

If this is correct, please pay it immediately by cash, check, or credit card.

If it is Incorrect, please call our office at 742-5023.

This balance may consist of a previously unpaid fee, copayment after insurance, or insurance payment denied or unable to be collected from your insurance company. Payments unpaid by your insurance company are your responsibility.

If you are on a limited income, we have a program to help you, but you must commit to being punctual with a payment each month.

IF THIS ACCOUNT IS NOT PAID OR IS NOT CORRECTED, OR IF PAYMENT ARRANGEMENTS ARE NOT MADE AS SOON AS POSSIBLE, WE WILL BEGIN THE COLLECTION PROCESS.

You may incur additional costs and be reported to a national credit reporting agency.

We certainly hope you give this matter your immediate attention.

Sincerely,

Billing Manager

**Pine Eagle Health Clinic
PO Box 647
Halfway, OR 97834
Telephone: (541) 742-5023
Fax: (541) 742-7210**

Date:

To:

Final Notice

Your account in the amount of \$_____ is considerably past due. We have sent you several prior statements with no response. We are more than happy to set up payment terms with you, but you must make contact with us and follow through with a payment each month. *Also, if you are on a limited income, we have a program to help you, bid you must commit to being punctual each month with a payment of some kind.* Please read and check one of the options below and return this signed form to us as soon as possible

1. I would prefer to settle this account. Please find full payment enclosed.
2. I would prefer to make monthly payments. Please call me to set up a payment plan.
3. I prefer to have this balance paid in full by my:

VISA/MasterCard (circle one)

Credit Card # _____

Exp. date _____

Exact Name on Acct _____

Total amount authorized \$ _____

IF WE HAVE NOT RECEIVED A RESPONSE BACK FROM YOU WITHIN 10 DAYS OF RECEIPT OF THIS NOTICE, YOUR ACCOUNT WILL AUTOMATICALLY BE TURNED OVER TO A COLLECTION AGENCY. AN ADDITIONAL COLLECTION FEE OF \$28.00 WILL BE ADDED TO YOUR EXISTING BALANCE.

If you have any questions, call the office at 742-5023.

Sincerely,

Lisa Butler
Finance Manager

SECTION I:

ACCOUNTING PRACTICES

2. Schedule of Discounts Policy

The Pine Eagle Clinic has a schedule of discounts to assist those with low incomes. These discounts do not apply for prescriptions or unnecessary surgery.

No one will be refused service at the Clinic because of the inability to pay.

Anyone using the schedule of discounts must sign a form confirming his or her eligibility for each month of use. This form will ask for the number of persons in the immediate family, total income for the family, and place of employment.

The Billing Manager will use the information from the form to calculate the discount for which the patient qualifies. The most recent poverty income guidelines will be used to assign the percentage.

The Billing Manager has the authority to request proof of income from anyone applying for the discount.

The Billing Manager will set up the schedule of discounts based on income from the poverty guidelines and present it to the Board for authorization. The Billing Manager will present any needed changes to the Board for its review. A copy of the authorized discount policy will be kept on file in this policy book.

All patients qualifying for the discounts are asked to pay \$30.00 at the time of each visit.

PINE EAGLE CLINIC

APPLICATION FOR DISCOUNTS

It is the policy of the Pine Eagle Clinic to provide essential services regardless of the patient's ability to pay. Discounts are offered depending upon household income and size. Please complete the following information and return to the front desk to determine if you or members of your family are eligible for a discount.

The discount will apply to all services received at our office, but not those services which are purchased from outside, such as reference laboratory testing, prescription drugs, x-ray interpretation by a consulting radiologist, and similar services. Please inquire at the front desk if you have questions.

Number of persons living in your household: _____

Total household income: (complete one column)

| Household Member | Household Income | (Complete one column) | |
|------------------|------------------|-----------------------|------------------|
| | | | |
| | Annual | Monthly | Bi-weekly |
| Self | | | |
| Spouse | | | |
| Relative | | | |
| Others | | | |
| TOTAL | | | |

NOTE: Include income from all persons in household and income from all sources, including gross wages, tips, social security, disability, pensions, annuities, veterans' payments, net business or self employment, alimony, child support, military, unemployment, public aid, and other.

I certify that the household size and income information shown above is correct. Copies of tax returns, pay stubs, and other information verifying income may be required before a discount is approved and will be provided as may be requested.

Name

Signature

Date

Office Use Only

Patient Name: _____

Discount: _____

Date of Service: _____

Approved by: _____

SECTION I:

ACCOUNTING PRACTICES

3. Internal Audit Policy

The Administrator is responsible for internal audits. Separation of duties will be adhered to as much as possible considering current staffing levels.

4. Outside Review Policy

An independent accounting firm will do an outside review of the clinic finances annually or as deemed necessary by the Board.

5. Fee Schedule

Fees should be in line with the surrounding area. The chargemaster shall be developed by the Clinic Office Manager in consultation with the Administrator and updated annually in June. The fees will become effective on July 1 of each year. The new fee schedule will be presented to the PEHPC Board for review and approval.

The fee schedule will be based on the current Blue Cross RVU's and is available at the clinic office upon request.

SECTION II: ADMINISTRATIVE OPERATING POLICY

1. Employment Policy

The Pine Eagle Health Planning Committee provides job opportunities, salaries and benefits, promotions, and other conditions of employment without regard to a person's gender, age, religion, race, color, national origin, disability, or veteran's status in compliance with federal and state laws and regulations.

For specific information concerning employment practices and employee benefits, refer to the current copy of the employee handbook.

Non-Discrimination/Non-Harassment

The PEHPC is committed to providing all employees with a work environment free of discrimination or harassment of any kind, including harassment from or to customers. The purpose of this policy statement is to reaffirm our commitment to equal employment opportunity and to provide a harassment-free work environment for all employees.

Harassment or discriminatory conduct of any kind, whether physical or verbal, committed by supervisors or non-supervisory personnel, is prohibited. Prevention of discriminatory activities must be practiced at all times, especially by supervisors. In those cases where discrimination can be established, disciplinary action up to and including dismissal may be taken.

Taking reprisal action against any employee because he or she has filed a discrimination or harassment complaint, furnished information or participated in any manner in an investigation, compliance review or hearing, is prohibited. In those cases where reprisal action can be established, disciplinary action up to and including dismissal may be taken.

Harassment Defined

Disparate and unfair treatment of any employee or individual because of his or her race, color, sex, religion, national origin, age, disability or protected group status as defined by federal and state laws is prohibited. This includes harassment and intimidation. Harassment is behavior perceived by the receiver as unwelcome and includes, but is not limited to, the use of verbal or practical jokes, unwelcome touching, offensive remarks or put-downs, displays of objects and materials, which create an offensive environment. Actions such as these are prohibited and if repeated they are also unlawful.

SECTION II:

ADMINISTRATIVE OPERATION POLICY

Compensation

It is the policy of the PEHPC to follow the Federal Wage Law guidelines as much as possible, do extensive research with other clinics our size, and compare the pay scales in the surrounding area in order to be fair to each employee. Any time an employee feels their pay is not adequate, they can petition the Board to instruct the policy committee to re-evaluate. If the committee finds the clinic standards are below average, the scales will be rewritten and brought to a public meeting for the Board to review and vote upon. An employee can also do their own research and bring the information to the Board and request a review. The information must have exact reference to a comparable clinic, or any Doctor's office in Baker City or La Grande area. Addresses and phone numbers are also required in order that the policy committee may follow up.

The wage scale will be set by the Board. *(See separate documents file for current scale).*

Grievance policy in regard to Compensation

The grievance policy is addressed in its own section of this manual. The PEHPC Board strives to set standards and pay within the guidelines of the surrounding area. Policies will be reviewed periodically and updated every 3 years. Employees will be given a copy of the policy manual at the time of hire and revisions whenever they are made. The staff and Provider are encouraged to submit ideas for changes to the Policy Committee or members of the Board

Health Insurance Portability and Accountability Act

Members of the PEHPC and the Pine Eagle Clinic are required by law to maintain the privacy of health information. In an effort to keep patient information confidential, we will abide by the Policies and Procedures in the HIPAA binder, located in the clinic office. This document is available to patrons upon request.

Resignation

Resignation is initiated by the employee and is an end to the employment. Professional and supervisory employees are requested to give a minimum of one (1) month notice and preferably two months notice to allow for a replacement search. Other employees are

SECTION II:

ADMINISTRATIVE OPERATING POLICY

expected to give two weeks advance notice to allow for replacement search. The Pine Eagle Health Planning Committee Board may elect to accept an employee's resignation effective immediately.

Discharge

Discharge is termination initiated by The Pine Eagle Clinic, the Halfway Oxbow Ambulance Service, or the Pine Eagle Health Planning Committee Board. If termination is initiated by the Clinic or the Ambulance it must be approved by the PEHPC Board. Discharged employees are entitled to all pay earned through the time of discharge including payroll and accrued personal time off. The employee's final paycheck will be available no later than the end of the first business day after the discharge.

2. Grievance Policy:

A. For Provider, Clinic, and Ambulance Staff

Complaints will be resolved in the following manner.

1. Staff should first try to resolve an issue with his/hers Supervisor.
2. If the Clinic Provider is having a problem, they should try to resolve the issue with the Medical Director.
3. If a staff member or Provider contacts someone on the Board first, the Board member must notify the appropriate person designated in item #1 or #2 to resolve the issue first.
4. If not satisfied with results, the Provider or staff member may file a written grievance with the Board within 30 days of the first attempt to resolve the problem. The written grievance should include a description of the complaint, the date it was first discussed for resolution, a statement of adverse affect this problem is causing, and the complainant's signature.
5. Within ten days of receipt of written complaint, the Chairperson will appoint a Board member(s) to investigate the grievance. The Board member(s) will discuss the issue with all parties and resolve the problem, if possible. The Board member(s) will report back to the Board at the next meeting or to the Chairperson, if action needs to be taken before then.
6. No minutes will be kept of the grievance or the investigation. The grievance and its resolution will be kept confidential.

SECTION II:

ADMINISTRATIVE OPERATING POLICY

7. A majority opinion of the Board shall be the final arbitration of the grievance.

B. For Clinic Patients

Complaints will be resolved in the following manner:

1. Depending on the problem, the patient may discuss it with the office staff or the medical staff.
2. The staff member dealing with the issue is responsible for trying to resolve problems and complaints under the guidance of the appropriate supervisor.
3. If the grievance is not satisfactorily resolved or involves the Provider, the patient may request, by submitting a signed complaint, a Board investigation of the issue at the next regularly scheduled meeting. If necessary, a special Board meeting will be convened at an earlier date.
4. The Board Chairperson will appoint a Board member(s) to investigate the grievance. The member will discuss the issue with all parties and resolve it, if possible. The Board member will report back to the Board at the next meeting or to the Chairperson, if action needs to be taken before then.
5. No minutes will be kept of the grievance or the investigation. The grievance and its resolution will be kept confidential.
6. A majority opinion of the Board shall be the final arbitration of the grievance.

C. For PEHPC Board Members

Complaints will be resolved in the following manner.

1. Signed complaints are to be submitted in writing to the chairman of the board (vice-chairman if the chairman is involved) in a sealed envelope for review in executive session
2. At a Board executive session the issue will be discussed with the particular board member.

SECTION II:

ADMINISTRATIVE OPERATING POLICY

3. The Board chairperson (vice-chair if the issue involves the chairman) will appoint a Board member(s) to investigate the grievance. The Board member(s) will discuss the issue with all parties and resolve it, if possible.
4. The Board member(s) will report back to the Board at the next meeting. If action needs to take place before then, the Board chairperson will call an emergency meeting.
5. If, within 10 days, the grievance is not satisfactorily resolved, an executive session will be called to resolve the grievance with both parties present. If the grievance involves the chairperson, the vice-chair will conduct the meeting.
6. No minutes will be kept of the grievance or the investigation. The grievance and its resolution will be kept confidential.
7. A majority opinion of the Board shall be the final arbitration of the grievance.

3. Staff Administrative Procedures

A. Medical Records Availability and Transfer

Patient medical records are available to any party that the patient so designates in writing. If the patient is a minor, or legally incompetent, the parent or legal guardian must also sign. The only exception to this rule is by legal court action through a subpoena. Upon request records will be released directly to the patient once a release has been signed.

B. Maintenance of Records

1. Appropriate records shall be maintained on all clinic patients either on paper or by electronic medical records using the S.O.A.P. format. In the case of screening, findings may be kept on summarized roster sheets. Each patient encounter shall be signed by the health provider, or when dictated or transcribed, may be initialed. The provider shall also mark the proper encounter number for billing on the patient encounter sheet and write in proper information for the diagnosis code.

2.

SECTION II:

ADMINISTRATIVE OPERATING POLICY

3. All patient records for adults (21 years or older) shall be kept a minimum of 10 years from the last date of entry. Patient records for all minors shall be kept until their 21st birthday. At that time, the file will come under adult guidelines. It is the responsibility of the Clinic administrator to see that records are kept in accordance with this policy.
4. Workmen's Compensation records will be kept indefinitely.
5. The record storage area will be secure during and after hours of operation and charts will be stored electronically in an off-site location.

C. Fraud and Abuse

These guidelines are available to patrons upon request at the front desk.

D. Infection Control

These guidelines are available to patrons upon request at the front desk

E. Hazardous Materials

These guidelines are available to patrons upon request at the front desk

4. Outside Professional Services Policy:

The Medical Director and Provider may pick the laboratories and radiology facilities of their choice with approval of the Board. All facilities shall be of high quality service and meet the Clinic's standards. Any time changes are proposed, the Board must approve them.

The Board will select the pharmacy to serve the Clinic's needs based on reputation, reliability, cost factors, and patient and staff input.

5. Program Evaluation:

In order to comply with Federal RHC regulations, the clinic shall conduct an annual evaluation of all clinic policies and procedures, utilization, and medical charts.

SECTION II:

ADMINISTRATIVE OPERATING POLICY

6. Policy on Signatures of Insurance and Other Forms:

The clinic provider will sign for all patients examined by him or her.

It is contrary to the philosophy and policy of the Clinic to attempt to mislead patients, insurance companies or others into believing services were provided or directly supervised by a physician when, in fact, they are not.

SECTION III

PEHPC POLICY RESOLUTIONS

1. Duties of the Board of Directors:

- a. Direct overall management of the Pine Eagle Clinic.
- b. Monitor the management and progress of development of the practice through a monthly review of all indexes available i.e. income, expenses, purchases of supplies and equipment, patient load rate, collection ratio, and procedures.
- c. Oversee maintenance of the building and equipment and the workload of staff.
- d. Be aware of community reaction to service provided with resolution to any problems thereof.
- e. Formulate long-term mission goals for expansion and improvement of the practice and the management of finances, investments, and the overall financial well being of the Clinic. Insure that accurate records of operation are maintained and proper accounting procedures are used.
- f. Authorize all expenditures for equipment and other expendables in excess of \$2,000.00 for the Clinic.
- g. Insure that proper credentials, licenses, and permits are current for Clinic and staff.
- h. Pursue other avenues for financial needs, i.e. grants, fundraisers, donations.
- i. Administer all gifts, grants, donations or endowments.
- j. Provide all required insurance coverage for the building, staff, and the Board.

2. Physician Supervision:

The physician supervisor is responsible for direct medical care, quality assurance, medical direction, and Provider supervision as outlined in Section 491.8 of the Code of Federal Register of the Centers for Medicare and Medicaid Services guidelines.

SECTION III

PEHPC POLICY RESOOLUTIONS

3. Staff Training:

- a. Supervisors will have job descriptions written and available for staff.
- b. Procedures for all work assignments, such as insurance billing, input of daily encounters transactions, daily deposits, drug billing, medical requirements, reports needed to agencies, etc., will be written and on file for all employees to refer to.
- c. All staff will be encouraged to attend workshops or seminars to augment their training.
- d. Provider will attend and use funds provided for continuing education classes.
- e. Staff will be given a copy of this policy manual and all updates. They will sign the master office copy of this manual as proof that this information was provided for their use.

4. Annual Review Policy

- a. The Clinic's Medical Director will carry out an annual review each January of its total program.
The evaluation will include:
 1. The utilization of Clinic Services, including at least the number of patients served and the cost per encounters.
 2. A representative sample of both active and closed clinic records
 3. The Clinic's health care polices

The purpose of the evaluation is to determine whether:

1. The utilization of services was appropriate.
2. The established policies were followed
3. Any changes are needed.

The Clinic staff and Board will consider the findings of the evaluation and take corrective action if necessary.

PEHPC BYLAWS

1. MEMBERSHIP OF THE COMMITTEE:

Residents of the service area of the Pine Eagle Clinic who would be legally entitled to vote (whether or not registered) are members of the Committee and are entitled to one vote at Committee meetings.

2. MEETINGS:

The Board of Directors will meet once a month for general business and staff issues. There shall be one annual committee meeting each year no later than June. The Clinic's Medical Administrator and the Chairperson of the Board will give yearly evaluation reports. Election of new Board officers will take place. The monthly and annual meeting(s) are open to the general public. (**amended 4/21/03**)

3. GOVERNING BODY:

A. The governing body shall be a Board of Directors ("The Board"), consisting of nine members, one of which will be selected by the board to serve as Chairperson of the Board and of the Committee. At least 50% of the Board members shall be active users (at least one visit in the previous 12 months) of the Pine Eagle Clinic.

B. The officers of the Board shall consist of a Chairperson, Vice Chairperson, Secretary, and Treasurer. Each will have responsibilities appropriate to their position. These offices shall be filled and maintained in a manner deemed proper by the Board.

C. Board members are expected to be active participants in the management of the Ambulance and the Clinic including regular attendance at Board meetings. Any member who is absent from more than three monthly meetings over a period of twelve continuous months without good cause shown shall be dismissed from the Board.

D. The term of office for Board members shall be three years. Any vacancies created by resignation, incapacity, or board removal will be filled by a majority vote of the Board. The person appointed to fill a vacated seat shall serve the remainder of time left in the position they are filling.

E. No person can be elected to the Board of Directors if s/he is employed by the Pine Eagle Clinic or engaged as a volunteer for the Halfway/Oxbow Ambulance (**amended 4/21/03**)

F. Board members are expected to give of their time on a voluntary basis, but can be compensated for time without any conflict of interest if they are performing a certain duty or service within the operation of the clinic that they have a skill and knowledge for and that someone else, doing the same job, would be paid for. Any such arrangement requires a unanimous vote of the board members present at a meeting.

4. NOMINATIONS:

- A. Each year by the February meeting, the Board shall appoint three persons as a nominating committee. The members of the nominating committee shall be persons who are citizens of the service area and may not be Board members.
- B. The nominating committee shall give public notice of its membership and invite persons interested in being nominated for a position on the Board to contact them. The nominating committee shall select at least one candidate for each open position, plus at least one extra. Incumbents may run if he/she wishes.
- C. If there are more than four candidates expressing interest, the nominating committee will require additional candidates to be supported by a petition from thirty other members of the committee.

5. ELECTIONS:

- A. Election of the Board members shall take place by written ballot over a period of 30 days, preceding the annual meeting of the committee each year. Persons wishing to vote may register on a record to be kept at the polling place and simultaneously fill out a ballot. The ballot shall list all candidates and identify those candidates who are incumbent. In addition, the ballot shall include an instruction of “vote for three candidates only.” A single write-in slot will be provided to accommodate a possible write-in candidate. All completed ballots shall be inserted into a locked box, the key to which is held by a member of the nominating committee.
- B. The Board of Directors is responsible for notifying the public of their opportunity to vote and the location of balloting stations. At a minimum, there will be one balloting location in the town of Halfway, but an effort will be made to place a ballot box in Eagle Valley and somewhere near or in Oxbow. No electioneering may be engaged in the vicinity of any ballot box.
- C. Voting shall be closed 3 days prior to the annual June meeting to allow the nominating committee sufficient time to tabulate the ballots. There shall be no nominations from the floor or open voting at the meeting. Ballots in which more than the specified number of votes have been filled in shall be discarded and the votes not counted. The candidates receiving the highest number of votes will be confirmed as Board members for the succeeding three-year terms. The nominating committee will notify the Board Chair prior to meeting time. The Chair, in turn, will notify the winning candidates and invite them to attend the meeting.
- D. If, for any reason, a newly elected Board member cannot take their seat on the Board, the person receiving the next highest number of votes shall fill the position. Voting tabulations will be kept for one year, or until there is a new election.

6. RECALL:

- A. Board members are subject to recall by a two-thirds vote of members present at the annual Committee meeting. Such a recall must be confirmed by a special meeting of the Committee, to take place not sooner than 10 day nor later than 30 days after the meeting in which the recall vote is taken. In the interim, the recalled Board member(s) shall remain on the Board. Said second meeting must have proper public notice and must confirm again by a two-thirds vote for the recall to stand. In such a case, a new Board member must be elected at said second meeting by open nominations and secret voting.

7. DUTIES OF THE BOARD OF DIRECTORS:

- A. The Board will manage or arrange for the management and efficient operation of the Pine Eagle Clinic and the Halfway Oxbow Ambulance service.
- B. The Board will maintain a complete and accurate set of minutes of each Board meeting, accurate financial records based on the accrual method of accounting, and such other financial records as may be appropriate or required by Medicare and Medicaid. These records shall be open to inspection by any citizen upon request.
- C. The Board will take all reasonable steps to keep the community informed of the Clinic and Ambulance activities through regular news releases or advertising in appropriate media.

8. BOARD MEETINGS:

- A. The Board has the authority to conduct Committee business between annual Committee meetings. The Chairperson or any three Board members may call special Board meetings at any time. It is recommended that meetings follow Robert's Rules of Order.
- B. All Board meetings shall be open to the public. The Board shall, one week in advance, give public notice for all meetings including the date, time, place and proposed agenda. The Board may retire into executive session, which is closed to the public, for discussion of personnel issues.
- C. The subject matter and all related discussions of executive sessions is deemed confidential and shall not be disclosed except under penalty of contempt or other court order after the advice of legal counsel is obtained. Any breach of this provision shall be grounds for immediate removal from the Board and render the disclosing parties subject to liability for damages arising from such disclosure.
- D. A quorum of five Directors shall be required for the Board to take any action.
- E. The Board may delegate its authority to community members not on the Board. Such authority shall be limited to that needed to carry out the responsibilities of the delegated job. And such delegation should be done in writing where possible.
- F. Proposals for Board consideration may be presented in writing at any Board meeting. The proposal will be considered at the following meeting. Such proposals must include:
 - (1) The proposal
 - (2) How much revenue it will generate
 - (3) How much it will cost
 - (4) What is the benefit to the clinic or ambulance
 - (5) What line item it affects
 - (6) What committee or person is involved

9. AMENDMENTS:

A. The public shall be notified at least one week in advance of the annual committee meeting if any changes to the bylaws are proposed.

B. These bylaws may be amended at the annual committee meeting by a two-thirds majority vote of committee members present. The results of the voting shall be made public.

(Bylaws amended 06/21/05)

(Bylaws amended 06/20/06)