

PIONEERS MEMORIAL HEALTHCARE DISTRICT  
207 West Legion Road, Brawley, CA 92227  
**SUPPLEMENTAL MEETING OF THE BOARD OF DIRECTORS**

Wednesday, January 17, 2024  
5:00 pm  
PMH Auditorium

## Minutes

**PMHD MISSION: Quality healthcare and compassionate service for families of the Imperial Valley**

In compliance with the Americans with Disabilities Act, if you require special accommodations to participate in a board meeting, please contact the District at (760) 351-3250 at least 48 hours prior to the meeting

### I. **CALL TO ORDER** (time: 5:00 pm – 5:15 pm)

President Santillan called the meeting to order at 5:00 pm in the PMH Auditorium

#### A. Roll Call

Board Members:

Katy Santillan, President  
Enola Berker, Vice President  
Rachel Fonseca, Secretary  
Linda Rubin, Treasurer  
Nick Aguirre, Asst. Secretary/Treasurer

Staff:

Damon Sorensen, Interim CEO  
Carly Loper, CFO  
Sally Nguyen, General Counsel  
Carol Bojorquez, CNO

Guests:

Carly Zamora, CCO  
Charity Dale, CHRO  
Carrie Teague, Director of Information Systems

#### B. Approval of Agenda

A motion was made to approve the agenda by Director Berker, seconded by Director Aguirre. **The motion was unanimously carried.**

### II. **BOARD MEMBER COMMENTS**

Director Rubin mentioned that Mr. Rod Smart passed away. He was very active in the PMH Foundation. The Board sends their condolences to the family of Mr. Smart. Director Santillan asked that he be acknowledged for his all contributions in the next PMHD Newsletter.

Director Aguirre thanked the community for their response related to the tragic accident that occurred recently in Brawley.

Director Santillan advised that Pioneers is holding a fundraiser for the families affected by the tragic loss.

SECTION

- III. PUBLIC COMMENTS** – At this time, the Board will hear comments on any agenda item and on any item not on this agenda. If any person wishes to be heard, he or she shall stand; address the chairperson and state the subject, or subjects, upon which he or she desires to comment. Time limit for each speaker is 5 minutes. A total of 15 minutes shall be allocated for each item. *(time: 5:15 pm – 5:30 pm)*

Mr. Franc Brabec noted that he is a member of the Imperial Valley Coalition for Sustainable Healthcare Facilities (IVCSHF). They presented themselves at the last LAFCO meeting and since then they have received a lot of nice support from the community. They will be participating in assisting with the healthcare needs assessment that is being hosted by the County of Imperial. The IVCSHF has sent ECRMC and the City of El Centro a public records request for the Kaufman Hall study. This study has been called out in the legislation but has not been released. They also sent a letter to LAFCO to discuss their study. Mr. Brabec mentioned that IVCSHF supports the idea of Pioneers remaining independent; however, if that is not possible, recommendations will be sent to Assemblymember Garcia on revisions to AB 918. Ms. Tina Aguirre, also a member of the IVCSHF, read the proposed amendments to AB 918 made by their organization. The document is attached to the bottom of these minutes.

- IV. OLD BUSINESS** *(time: 5:30 pm – 5:45 pm)*

**There was no old business.**

- V. REVIEW OF OTHER ITEMS FOR CONSIDERATION** – The Board will consider and may take action on the following: *(time: 5:45 pm – 6:45 pm)*

**A. December 2023 Finance Report**

Ms. Loper reported that there was a slight decrease in the average daily census from November to December. Revenue did decrease slightly because of that. At the same time in December 2022, PMHD had \$33 million in revenue. In December 2023, the District had \$42.7 million in revenue; \$1.9 million of that is from the skilled nursing facility (SNF). This translates to a 30% increase year over year in revenue. There was higher than normal bad debt; private pay and self-pay AR were higher in December. This trend is usually seen in the months of January and February, so the staff will review in further detail. Employee benefits increased from November to December. There was a claim that was higher than stop loss coverage, so discussions are ongoing with the carrier to see if that can be covered. Year-to-date operating expenses are at \$13 million, \$922,000 of that is related to the SNF. There was a profit of \$1.3 million to the bottom line for the month of December. The first six months of this fiscal year, PMHD has a profit of \$4.3 million compared to last fiscal year when there was a loss of \$7.2 million. Ms. Loper noted that across the board the census and admissions have increased by about 25%. The average daily census for the SNF is still at the mid-80's; there were a few days when it reached 88-89, but it's been consistently in the mid-80's. Days cash on hand was 95.6 for the month of December. Ms. Loper advised that quite a bit of cash will be going out soon. It's that time of year when the District must pay its IGT's. In February, we have the QIP and Rate Rage IGT's due which total \$4.2 million. The District should receive about \$13 million in return for those IGT's sometime in April or May. The District has to pay back its first CHAFFA loan that was received from the state, which is due in March in the amount of \$1.5 million. There is another payment that will potentially be due in May of

SECTION

the same amount; however, conversations are happening at the state-level by lobbyists advocating for hospitals to maybe have the repayment plan modified or delayed. Expenses per day went up from \$374,000 to \$397,000; this is due to the District taking on the SNF from April until now.

## B. Human Resources Report

Ms. Dale reported that out of the voluntary terminations for the month, six of those were per diems who had not worked shifts, three left for more money and two were no call-no shows. She noted that the second phase of reviewing wages has started in order to stay competitive. HR has identified a candidate for Training and Education. Candidate is a nurse practitioner who used to work at Pioneers and is excited to return in this capacity. Director Berker asked if the candidate will be a full-time educator, or will she still be doing her nurse practitioner practice. Ms. Dale advised it would be a full-time position. She noted that she has been looking at different employee surveys that focus on employee satisfaction at the front end. At the back end, it focuses on the staff providing feedback regarding the leadership skills of the management team. This will allow the management team to receive anonymous feedback and work on areas in need of improvement. Ms. Dale has also been reviewing different applications that offer leadership training. Manager/Leadership orientation training has been scheduled for February 1<sup>st</sup>. The New Hire Orientation program was reviewed and updated. There has been a lot more progress in the recruiting efforts for staffing. PMHD is starting to see a lot more applicants. Director Berker noted that the Board has received HR reports for the last several months about different projects. She would like to see some type of scorecard that shows the type of project, status, who is responsible and completion dates. With the many different initiatives out there, it is difficult for the Board to keep track of what happened to those projects. Director Santillan referenced the contract list report, and the facilities report that was presented monthly as a good template. Director Aguirre also noted the revenue cycle report that is provided monthly.

A motion was made to approve the finance and HR report by Director Aguirre, seconded by Director Berker. **The motion was unanimously carried.**

**VI. CONSENT AGENDA** – The following items will be acted upon by one motion, without discussion, unless a director, or other person, requests that an item be considered separately. In the event of such a request, the item will be addressed, considered, and acted upon, separately. *(time: 6:45 pm – 7:15 pm)*

### A. Approval of Minutes

1. 12/6/23 Special Meeting
2. 12/14/23 Regular Meeting

### B. Authorize Renewal of Point of Care Analyzer Interface with Abbot Rapid Diagnostics Informatics, Inc.

Contract Value: \$118,075.<sup>50</sup>; Contract Term: Five (5) years; Budgeted: Yes; Budget Classification: Repairs & Maintenance

### C. Authorize Service Agreement for Vitros 5600 with Ortho-Clinical Diagnostics

Contract Value: \$51,750; Contract Term: One (1) year; Budgeted: Yes; Budget Classification: Repairs and Maintenance

### D. Authorize Product Pricing Agreement with Howmedica Osteonics Corp/Stryker

Contract Value: approx. \$270,153.<sup>23</sup>/yr; Contract Term: Three (3) years; Budgeted: Yes; Budget Classification: Surgical Implants/Supplies

SECTION

- E. Authorize Purchase of a Venue Go R4 Ultrasound System with GE Healthcare  
Contract Value: \$49,996.<sup>60</sup> + SH +Taxes; Contract Term: Purchase; Budgeted: No; Budget Classification: Capital
- F. Authorize Pricing Agreement for Surgical Implants with Encore Medical, L.P dba Enovis Surgical/DJO  
Contract Value: \$788,862.<sup>50</sup>; Contract Term: Two (2) years; Budgeted: Yes; Budget Classification: Supplies
- G. Authorize Renewal of Microsoft Enterprise Agreement and Office 365 Subscription with Insight Public Sector SLED  
Contract Value: \$296,683.<sup>12</sup>/yr; Contract Term: Three (3) years; Budgeted: Yes; Budget Classification: Subscription
- H. Authorize QCPR Data Migration Supplemental Service Form with Harris Healthcare  
Contract Value: \$49,500; Contract Term: One-time purchase; Budgeted: cost estimated, but exact cost unknown at time; Budget Classification: Purchased Services
- I. Authorize Subscription Agreement for Phase 2 Data Archive with EllKay  
Contract Value: \$1,107,360; Contract Term: Ten (10) years; Budgeted: Yes; Budget Classification: Licenses
- J. Authorize Subscription Agreement for Interface Engine with InterSystems Corporation  
Contract Value: \$33,948; Contract Term: One (1) year; Budgeted: Yes; Budget Classification: Subscription
- K. Authorize Master Services Agreement with Healthcare IT Leaders  
Contract Value: 25% salary; Contract Term: six months; Budgeted: No; Budget Classification: Capital
- L. Authorize Capital Equipment Primary Vendor Agreement with Boston Scientific  
Contract Value: \$3,537.<sup>50</sup>/mo; Contract Term: Three (3) years; Budgeted: No; Budget Classification: Capital
- M. Authorize Ancillary Provider Services Agreement with Molina Healthcare of California  
Contract Value: based on volumes; Contract Term: One (1) year with yearly renewals; Budgeted: Yes; Budget Classification: Revenue
- N. Authorize Consultant Services Agreement with Healthcare Resource Management  
Contract Value: estimated \$40,000/yr.; Contract Term: One (1) year; Budgeted: No; Budget Classification: Purchased Services
- O. Authorize Proposal for Professional Services with Walter P. Moore & Associates, Inc.  
Contract Value: estimated \$185,000; Contract Term: approx. six (6) months; Budgeted: No; Budget Classification: Purchased Services
- P. Authorize Consulting Services Agreement with enhanceHCM, LLC  
Contract Value: not to exceed 420 hrs. or \$71,000; Contract Term: Project Completion; Budgeted: No; Budget Classification: Purchased Services
- Q. Authorize and Approve Construction Proposal with Trifecta Construction  
Contract Value: not to exceed \$110,414.<sup>10</sup>; Contract Term: Project Completion; Budgeted: No; Budget Classification: Purchased Services

A motion was made to approve items A, B, C, D, F, G, J, and M by Director Aguirre, seconded by Director Berker. **The motion was unanimously carried.**

Item E – Ms. Bojorquez: advised that this is the ultrasound system that the ED providers are requesting. They held back the request for a while to ensure that they did need the equipment and have confirmed that they do need it in order to provide adequate patient care.

Item H – Ms. Teague reported that this item is for the QCPR data migration. The goal is to decommission QCPR by April 30, 2024. We cannot decommission without having a data retention plan of patient health information. It was noted that phase three is decommissioning the Soft Bloodbank and Wound Care eMr. It was proposed

SECTION

that a summary sheet be created so the Board has a better idea of where we are financially with the Cerner project.

Item I – This is phase two of the Ellkay project which is the archiving of eMr systems which include Bottomline Option for HIM, Perigen for OB, and Onco eMR which is the oncology system.

Item K – This is a consulting agreement should we need consultants to assist with the Cerner implementation. We are still on target for the 4/15/24 deadline but would like to have this in place should there be a need for support for physicians or any departments as we get closer to that target date. Currently, there are some weak areas, but there is no definitive need to bring anyone in at this time.

Item L – This is a visualization system that was used when Dr. Lopez was here. The equipment was sent back when we were no longer using it. Now with Dr. Hassanein at Pioneers, it will be needed so she can do ERCPs/MRCPs.

Item N & O – Ms. Loper noted that this item is to bring in a consultant to assist with the compliance work required by HCAi related to seismic and water. Last month, a quote for an architect was brought to the Board; however, we decided to look for more options. There is a committee that reviewed both options and selected these as the best options based on services and pricing.

Item P – This is for a consultant to assist HR in finalizing the ADP build. With the IT team being stretched thin with the Cerner implementation, HR has reached the point where it is crucial that a subject matter expert comes in to assist.

Item Q – Ms. Loper advised that there are trailers behind the hospital being used for storage. The District is anticipating having to house some seasonal nurses in the future. The thought was that hotels are expensive and by remodeling one of the trailers, lodging could be offered to seasonal employees. Ms. Loper reported that the amount should be changed to “not to exceed \$121,000” on the request to have a 10% buffer for any unexpected construction costs.

A motion was made to approve Items E, I, H, K, L, N, O, P, and Q by Director Aguirre, seconded by Director Fonseca. **The motion was unanimously carried.**

**VII. CLOSED SESSION** – The following matters will be considered by the Board in closed session; the Board will reconvene in open session to announce any action taken on matters considered in closed session. (*time: 7:15 pm – 7:55 pm*)

A. **CONSIDERATION OF MATTERS INVOLVING TRADE SECRETS** – Safe Harbor: Health and Safety Code §32106, subparagraph (b)

1. Based on the Board’s prior findings regarding Trade Secret classification, as contained in Resolution 2023-01, consideration, and discussion of possible initiation of the following:
  - a. Updating Certain District Strategic Planning Initiatives

SECTION

B. PENDING OR THREATENED LITIGATION – Safe Harbor: Subdivision (b) of Government Code Section 54956.9

1. Potential Cases: 2

C. PUBLIC EMPLOYMENT (§ 54957)

1. Chief Executive Officer

**VIII. RECONVENE TO OPEN SESSION** (*time: 7:55 – 8:00 pm*)

A. Take Actions as Required on Closed Session Matters

**There were no reportable actions taken in closed session.**

**IX. ADJOURNMENT** (*time: 8:00 pm*)

The meeting was adjourned to the next meeting.



\_\_\_\_\_  
Clerk of the Board

  
\_\_\_\_\_  
Board Secretary



## PROPOSED AMENDMENTS TO AB 918

The Imperial Valley Coalition for Sustainable Healthcare Facilities is committed to the foundational principle that healthcare is a common need for all residents of the Imperial Valley. It requires a unified effort to achieve our shared goal of creating a strong, equitable, and sustainable healthcare system that prepares the Imperial Valley for growth. We support a single Imperial Valley Healthcare District, and we applaud the efforts of Assemblymember Eduardo Garcia and Senator Steve Padilla to establish its framework.

We believe the clear intent of this new law is to put Imperial Valley healthcare back on stable footing. It is also clear that the law has flaws that can be rectified through amendments.

### General recommendations

We believe that the safest path is to build on Pioneers Memorial Healthcare's existing district and proven funding model. Creating a district from whole cloth introduces considerable risk.

Regardless, at a minimum, existing districts should not be dissolved unless/until the interim Board has created:

- An adequate voter-approved funding mechanism
- A merger plan for ensuring continuity of care
- The successful transfer of necessary licensing to the new district

While we fully understand the need for urgency, the milestone deadlines specified in the law are not feasible. The interim Board needs time for due diligence to successfully integrate these three complex entities.

For example, analyzing the financial needs of a new district (including the costs of an El Centro Regional Medical Center (ECRMC) acquisition and the considerable costs associated with merging staff, medical services, records, equipment, and systems), determining a sustainable and politically-viable funding source, writing the ballot measure for an early August deadline, and educating the public in time for a November 2024 election seems unlikely.

Most pressingly, the negotiation and acquisition process for ECRMC needs to be clarified, as do contingencies in the event a transaction does not occur.

To address the concerns of employees, we also urge the inclusion of:

- **An Anti-Discrimination Clause**, explicitly prohibiting discrimination against any healthcare provider to include all employees and physicians based on their status as an existing facility or their affiliations.
- **A Safeguard for Workers' Rights**, including provisions to protect the rights and benefits of healthcare workers during any transitions, acquisitions, or dissolutions.

Our recommendations for amendments follow, and we hope they spur further discussion. Once amended, we believe the law will create a stronger healthcare district and will support a much smoother transition. We look forward to working with the community, Assemblymember Garcia, and Senator Padilla to ensure that the people of the Imperial Valley have the safe and reliable healthcare network they deserve.

***—The Imperial Valley Coalition for Sustainable Healthcare Facilities***

## **SECTION 2**

### **32499.5 (b)**

**Existing:** “The territory of the district shall include all of the County of Imperial, including those areas under the jurisdiction of the Pioneers Memorial Healthcare District and the Heffernan Memorial Healthcare District.”

**Proposed Change:** Amend to include to clarify the area of new district.

“The territory of the district shall include all of the County of Imperial, including areas under the jurisdiction of the PMHD, ~~and~~ the HMHD, **all areas of jurisdiction of ECRMC and City of El Centro, and other areas of the County of Imperial not under the jurisdiction of city owned hospital or special healthcare districts.**”

### **32499.6 (c) (4) (A)**

**Existing:** “The initial board of directors shall enter negotiations with the El Centro Regional Medical Center to decide the terms of the acquisition of the hospital. Upon reviewing the financial feasibility studies conducted by the Imperial County LAFCO and Kaufman Hall and confirming the financial viability of integrating the El Centro Regional Medical Center into the district, the initial board of directors shall determine the terms of the acquisition of the hospital. If the initial board of directors chooses to acquire the El Centro Regional Medical Center, the hospital shall be acquired with all of its assets and liabilities. All existing hospital licenses and certifications of the Pioneers Memorial Hospital and Healthcare District shall be transferred to the Imperial Valley Healthcare District when applicable in order to avoid a disruption in providing health care services. The initial board of directors shall initiate the process of applying for any licenses and certifications that cannot be transferred to the Imperial Valley Healthcare District within a year of formation. The initial board of directors shall finalize the terms of acquiring the hospital by November 5, 2024. The City of El Centro shall negotiate in good faith with the district, but is not required to sell the hospital to the district or agree to the terms that the initial board of directors finalizes.”

**Proposed Change:** Amend to clarify negotiations and acquisition.

“The initial board of directors shall enter negotiations with ECRMC **via the City of El Centro** to decide the terms of acquisition of the hospital. Upon reviewing the financial feasibility studies conducted by the Imperial County LAFCO, ~~and~~ Kaufman Hall, **and other studies as needed and confirming to determine** the financial viability of integrating the ECRMC into the

district, the initial board of directors shall determine the terms of the acquisition of the hospital. ~~If the initial board of directors chooses to acquire the ECRMC, the hospital shall be acquired with all of its assets and liabilities.~~ **After an agreement on acquisition terms**, all existing hospital licenses and certifications of the PMHD, **HMHD, and ECRMC** shall be transferred to the IVHD when applicable in order to avoid a disruption in providing health care services. The initial board of directors shall initiate the process of applying for any licenses and certifications that cannot be transferred to the IVHD within a year of formation. ~~The initial board of directors shall finalize the terms of acquiring the hospital by November 5, 2024. The City of El Centro shall negotiate in good faith with the district, but is not required to sell the hospital to the district or agree to the terms that the initial board of directors finalizes.~~

### **32499.6 (c) (4) (B)**

**Existing:** "The terms of the acquisition shall include the district or any successor entity assuming the duties and obligations of El Centro Regional Medical Center's collective bargaining agreements and retirement plans, at the El Regional Medical Center. This paragraph does not require any successor entity to adopt the collective bargaining agreement and retirement plan across to other facilities owned by the same operator."

**Proposed Change:** We request that existing language be deleted.

The first sentence interferes with the initial board of directors' negotiation processes. Further, the provision implies all bargaining agreements and retirement plans will be "transferred" to IVHD without a vote from the existing PMHD employees and implies a successor (yet to be named) does NOT have to accept the same "transfer."

### **32499.6 (c) (5)**

**Existing:**

"(A) The initial board of directors shall recommend to the Imperial County LAFCO a date for the dissolution of the Pioneers Memorial Healthcare District. The dissolution date shall be between July 1, 2024, and January 1, 2025. The initial board of directors may recommend a date that differs from the dissolution date of the Heffernan Memorial Healthcare District.

"(B) The initial board of directors shall recommend to the Imperial County LAFCO a date for the dissolution of the Heffernan Memorial Healthcare District. The dissolution

date shall be between July 1, 2024, and January 1, 2025. The initial board of directors may recommend a date that differs from the dissolution date of the Pioneers Memorial Healthcare District.”

**Proposed Change:** Changes proposed to protect continuity of care.

“(A) The initial board of directors shall recommend to the Imperial County LAFCO a date for the dissolution of the Pioneers Memorial Healthcare District and Heffernan Memorial Healthcare District when it has been determined that there will be no interruption in healthcare delivery. Additionally, the dissolution date shall be set only after an adequate voter-approved funding mechanism is established. ~~be between July 1, 2024, and January 1, 2025. The initial board of directors may recommend a date that differs from the dissolution date of the Heffernan Memorial Healthcare District.”~~

~~“(B) The initial board of directors shall recommend to the Imperial County LAFCO a date for the dissolution of the Heffernan Memorial Healthcare District. The dissolution date shall be between July 1, 2024, and January 1, 2025. The initial board of directors may recommend a date that differs from the dissolution date of the Pioneers Memorial Healthcare District.”~~

### 32499.9

**Existing:** “It is the intent of the Legislature that the Imperial Valley Healthcare District maximize the use of its assets to provide direct health care services to individuals within the district through direct operation of or funding provided to organizations that own or operate hospitals, medical clinics, ambulance services, transportation programs for seniors or persons with disabilities, wellness centers, health education services, promotoras, mental health services, veterans’ health services, and other similar services.”

**Proposed Change:** We request that mandated funding for specific services be removed since they require allocations prior to establishing solvency and sustainability of the new district and do not provide the board of directors’ appropriate oversight.

“It is the intent of the Legislature that the Imperial Valley Healthcare District maximize the use of its assets to provide direct health care services to individuals within the district through direct operation of or ~~funding provided to~~ **contracting with** organizations that own or operate hospitals, medical clinics, ambulance services, transportation programs for seniors

or persons with disabilities, wellness centers, health education services, promotoras, mental health services, veterans' health services, and other similar services.”

### **32499.95 (a)**

**Existing:** “Upon receipt of the recommendation from the Board of Directors of the Imperial Valley Healthcare District pursuant to paragraph (5) of subdivision (c) of Section 32499.6, the Imperial County Local Agency Formation Commission (LAFCO) shall determine the appropriate dates to dissolve the Heffernan Memorial Healthcare District and the Pioneers Memorial Healthcare District. The Imperial County LAFCO may decide on different dissolution dates for the Heffernan Memorial Healthcare District and the Pioneers Memorial Healthcare District. The Imperial County LAFCO shall dissolve the Heffernan Memorial Healthcare District and the Pioneers Memorial Healthcare District by January 1, 2025.”

**Proposed Change:** Update to be consistent with 32499.6 (c)(5) changes above.

“Upon receipt of the recommendation from the Board of Directors of the Imperial Valley Healthcare District pursuant to paragraph (5) of subdivision (c) of Section 32499.6, the Imperial County Local Agency Formation Commission (LAFCO) shall determine the appropriate dates to dissolve the Heffernan Memorial Healthcare District and the Pioneers Memorial Healthcare District **when it has been determined that there will be no interruption in healthcare delivery. Additionally, the dissolution date shall be set only after an adequate voter-approved funding mechanism is established.** ~~The Imperial County LAFCO may decide on different dissolution dates for the Heffernan Memorial Healthcare District and the Pioneers Memorial Healthcare District. The Imperial County LAFCO shall dissolve the Heffernan Memorial Healthcare District and the Pioneers Memorial Healthcare District by January 1, 2025.~~”

### **32499.95 (b)**

**Existing:** “The Imperial Valley Healthcare District shall be the successor to the Heffernan Memorial Healthcare District and the Pioneers Memorial Healthcare District. Effective on the respective date of their dissolution, all assets, rights, and responsibilities of the Heffernan Memorial Healthcare District and the Pioneers Memorial Healthcare District are transferred to the Imperial Valley Healthcare District. As of the effective date of the dissolution, the Imperial Valley Healthcare District shall

have ownership, possession, and control of all books, records, papers, offices, equipment, supplies, moneys, funds, appropriations, licenses, permits, entitlements, agreements, contracts, claims, judgments, land, and other assets and property, real or personal, owned or leased by, connected with the administration of, or held for the benefit or use of the Heffernan Memorial Healthcare District or Pioneers Memorial Healthcare District. Accounts payable and all other contract obligations shall be transferred to the Imperial Valley Healthcare District.”

**Proposed Change:** We request that the section be deleted or amended to better address the possibility of the acquisition of ECRMC by IVHD.  
“The IVHD shall be the successor to the HMHD and the PMHD **and to the ECRMC if acquired.** Effective on the respective date of their dissolution, all assets, rights, and responsibilities of the HMHD and the PMHD are transferred to the IVHD. **Effective on the date of acquisition the ECRMC, all assets, rights, and responsibilities are transferred to the IVHD.** As of the effective date of the dissolution **or acquisition,** the IVHD shall have ownership, possession, and control of all books, records, papers, offices, equipment, supplies, moneys, funds, appropriations, licenses, permits, entitlements, agreements, contracts, claims, judgments, land, and other assets and property, real or personal, owned or leased by, connected with the administration of, or held for the benefit of use of the HMHD, PMHD, **or ECRMC.** Accounts payable and all other contractual obligations shall be transferred to the IVHD.”

**End of Proposed Changes**