

Form 641 – Parts A, B & C
ASHNHA Quarterly Project Budget Summary
& Performance Analysis Reporting Form

For All 2010 Denali Commission Approved Projects –
Projects No. 1265 – A through 1265 – L

Project Name: Petersburg Medical Center CR Reader

Name of Hospital / Grant Sub-Recipient: Petersburg Medical Center

Reporting Period: April 1 – June 30, 2011

Sub-Recipient Grant No.: 1265 – A

Part 641 – A. Project Budget Summary (provide the following information requested; use additional pages as necessary):

1. Original Project Budget Information:

a. The *original total* approved project budget:

i. Amount of Denali Commission Grant Award: \$36,733.00

ii. Amount of Facility Cost Share Match (CSM): \$36,733.00

iii. Original Total Project Cost [line 1(a)(i) plus line 1(a)(ii)]: \$73,466.00

2. Actual Project Costs Recorded During the Current Reporting Period:

a. Amount of the Facility's own Project CSM Expended (non-reimbursed expenditures) during the current reporting period:

0

b. Amount of Facility funds expended during the current reporting period for which Denali Commission grant funds are being requested this period on Form 642 (Part B) to reimburse your hospital for its project expenditures:

0

c. Total amount of project costs recorded during the reporting period, whether expended facility CSM or reimbursement for facility expenditures is being sought (add lines 2a & 2b):

0

3. Total Denali Commission Grant Funds Received to Date:

Please report the **total** amount of Denali Commission grant funds **received** (whether received as an advance or as reimbursement for expenses) as of the end of the current reporting period (i.e., the total grant funds received to-date):

\$30,827.50

4. Total Facility Cost Share Match Funds Expended to Date:

Please report the **total** amount of hospital funds **expended** (i.e., the hospital's share of the cost of the project *for which reimbursement was not and cannot be sought* from the Denali Commission) as of the end of the current reporting period (i.e., the total hospital matching funds expended to-date for which you did not seek reimbursement):

\$27,387.50

5. Project Schedule:

Please state the anticipated start and end dates of this funded 2010 Denali Commission Primary Care Improvements in Hospitals project, and provide a list of appropriate milestone dates for the major phases or activities of your project.

Start date: June 2, 2010

End date: September, 2010

Description of Milestone Or Activity	Anticipated Completion Date
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1. Purchase and install ADT interface – part of the PCA/Transcription interface: June 2010.
2. Purchase and install CR reader, cassettes, monitors, computers: Sept/Oct 2010.
3. Purchase and install PAC/Transcription interface: through September, 2011 (timeline dependent on manufacturer development of software)

Part 641 – B. Project Performance Analysis (add line items to the chart as appropriate):

2010 Project Budget Line Items:	Approved Budget:	Actual Cost:	Scheduled Completion Date:	Actual Work Performed:
PMC CR Reader	\$73,466.00	\$58,275.00		
Totals:	\$73,466.00	\$58,275.00		

Part 641 – C. Facility Certification:

The preparer of this report, by signing below, certifies on behalf of his or her employer, that the information contained herein is accurate and complete to the best of his or her knowledge.



 Signature

7/13/2011

 Date

Leon Walsh, Acting CEO

 Printed Name and Official Title

Project Fund Disbursement Request

Form 642 – Parts A & B

ASHNHA's Quarterly Project Reporting Form

Covering All 2010 Denali Commission Approved Projects Projects No. 1265 – A through 1265 – L

Please Use this Form to Make a Fund Disbursement Request

Project Name: Petersburg Medical Center CR Reader

Name of Hospital / Grant Sub-Recipient: Petersburg Medical Center

Reporting Period: April 1 – June 30, 2011

Sub-Recipient Grant No.: 1265 - A

Part 642 – A. Project Narrative (use additional pages as necessary) :

1. What is the status of your D/C 2010 "Primary Care Improvements in Hospitals" project? (Please list all project phases completed or milestones achieved during the reporting period.)

After much research and consultation, the interface between Centricity (Clinic EMR) and RAPC (radiologist) will require a third party vendor to provide the interface. The initial assumption that our current EMR vendors may develop an interface did not occur and they were unable to develop the interface. Research and quotes are currently being sought for a third part vendor.

2. Is your 2010 project on schedule? If not, what kind of problem(s) does the delay present? How will this be dealt with? Will the delay potentially extend the project beyond 9/30/2012?

The project has been delayed from the initial projected completion date due to difficulties associated with the interface between the clinic EMR and the RAPC radiology group (who interprets and reports on our radiographs). Purchase and implementation of the interface has not been determined at this time, however the project will not go beyond 9/30/12 and we anticipate a decision by 9/30/11.

3. Is the 2010 project on budget, or over or under budget? If over budget, how will this be dealt with? What funds is your facility using to cover the additional project costs?

If there are costs above the original budget, PMC will absorb those costs.

4. Other comments, problems and solutions:

Part 642 – B. Project Fund Disbursement Request (Advance or Reimbursement)

We are requesting ASHNHA to release \$ 0 in Denali Commission Grant Funds for our project at this time. *This funding request is:*

1. ___ a request for an *Advance* against our Project Grant Award Funds; **or**
2. ___ a request for *Reimbursement* from Project Grant Award Funds in order to cover project expenses incurred by our hospital during the reporting period.

Copies of all invoices submitted and checks written in payment must accompany any request for reimbursement; copies of purchase orders or other commitment documents must accompany any request for an advance.