1	Susan N. Goodman, RN JD	Honorable Whitman L. Holt
2	Pivot Health Law, LLC P.O. Box 69734	
3	Oro Valley, AZ 85737	
4	Ph: (520) 744-7061 Email: sgoodman@pivothealthaz.com	
5	Patient Care Ombudsman	
6	UNITED	STATES BANKRUPTCY COURT
7	EASTERN	N DISTRICT OF WASHINGTON
8	In re:	
9	In re:	Chapter 11
10	ASTRIA HEALTH, et.al. <sup>1</sup>	Lead Case No. 19-01189 WLH
11		Jointly Administered
12		MONTHLY FEE APPLICATION OF
13	Debtors in Possession,	SUSAN N. GOODMAN, OMBUDSMAN, FOR ALLOWANCE AND PAYMENT OF
14		INTERIM COMPENSATION AND REIMBURSEMENT OF EXPENSES FOR
15		THE PERIOD JUNE 1 - 30, 2020
16		
17	1. Susan N. Goodman (th	e "PCO") submits her Monthly Fee Application (the
18	"Application") for Allowance and Payr	nent of Interim Compensation and Reimbursement of Expenses
19	for the Period June 1, 2020 through Jun	ne 30, 2020 (the "Application Period") for work performed as
20	the Healthcare Ombudsman. In suppo	ort of the Application, the PCO respectfully represents as
21	follows:	
22		
23		
24		s, are as follows: Astria Health (19-01189), Glacier Canyon, LLC (19-
25	01196), SHC Medical Center-Toppenish (19-	(19-01149), Oxbow Summit, LLC (19-01195), SHC Holdco, LLC (19- -01190), SHC Medical Center-Yakima (19-01192), Sunnyside Community
26		Community Hospital Home Medical Supply, LLC (19-01197), Sunnyside sional Services, LLC (19-01199), Yakima Home Care Holdings, LLC (19-
	1201), and 1 aking rivia rolle realfi, LL	
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1	2. Susan N. Goodman is the Healthcare Ombudsman and hereby applies to the Court for								
2	allowance and payment of interim compensation for services rendered and reimbursement of expenses								
3	incurred during the Application Period.								
4	3. The PCO billed a total of \$34,500.00 in fees and \$2,433.74 in expenses during the								
5	Application Period. The total	fees r	epresent 98.4 hour	rs expended du	ring the p	eriod covered by this			
6	Application. These fees and e	expense	es break down as f	follows:					
7	Period		Fees	Expens	es	Total			
8	June 1 - 30, 2020		\$34,500.00	\$2,433.	74	\$36,933.74			
9	4. Accordingly, P	PCO se	eks allowance of i	nterim comper	isation in	the amount of a total of			
10	\$30,033.74 at this time. This	total is	80% of the total	fees for service	s rendered	l (\$27,600.00) and 100%			
11	of expenses this period.								
12	5. For the post-p	etition	period, PCO has	been paid to d	ate as follo	ows:			
13	Application Period		Amou	int		Description			
14	June 17 to July 31, 2019	(1 <sup>st</sup> )	\$37,932.64		100% fees, 100% expenses				
15	August 1 to 31, 2019 (2	2 <sup>nd</sup> )	\$16,200.00		100% fees (no expenses)				
16	Sept. 1 to 30, 2019 (3 <sup>rt</sup>	<sup>d</sup> )	\$39,179	0.62	100% d	fees, 100% expenses			
17	Oct. 1 – 31, 2019 (4 <sup>th</sup> )	)	\$18,424	4.76	100% d	fees, 100% expenses			
18	Nov. 1 – 30, 2019		\$37,964	1.86	100% d	fees, 100% expenses			
19	Dec. 1 – 31, 2019		\$24,601	.46	100% 1	fees, 100% expenses			
20	Jan. 1 – 31, 2020		\$17,988	3.78	100% 1	fees, 100% expenses			
21	Feb. 1 – 29, 2020         \$19,060.73         100% fees, 100% expense					fees, 100% expenses			
22	Mar. 1 – 31, 2020	\$6,228	.30	100% 1	fees, 100% expenses				
23	Apr. 1 – 30, 2020		\$7,537	.50	100%	fees (no expenses)			
24	May 1 – 31, 2020		\$13,331	.90	77% f	ees, 100% expenses			
25									

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6. To date, PCO is owed as follows (excluding those amounts owed pursuant to this Application):

Application Period	Total Amount Owing	Description
Eleventh (May 2020)	\$3,950.00	20% fee holdback plus \$500.00

PCO is the only professional from Pivot Health Law, LLC who performed services in connection with this Chapter 11 case during the period covered by this Application. The breakdown of PCO hours, by month, is attached as **Exhibit A**. Attached as **Exhibit B** are the detailed invoices showing the time and expenses for the Application Period.

8. Pursuant to this Court's August 6, 2019 Order on Debtors' Motion Establishing Procedures for
Monthly and Interim Payment of Fees and Expense Reimbursement [Docket No. 453] (the "Interim Payment
Order"), PCO has served a copy of this Application on Debtors, counsel to the Debtors, counsel to the
Official Committee of Unsecured Creditors (the "Committee") appointed in this Chapter 11 Case,
counsel to the secured creditors, and the Office of the United States Trustee (the "US Trustee")
(collectively, the "Noticed Parties"). The Application was mailed by first class mail, postage prepaid, on
or about July 27, 2020 to the addresses noted in Exhibit C.

17 9. Pursuant to the Interim Payment Order, the Debtors are authorized to make the 18 payment requested herein without a further hearing or order of this Court unless an objection to this 19 Application is filed with the Court and served upon the Noticed Parties within fourteen (14) calendar 20 days after the date of mailing of the Notice of this Application. If such an objection is filed, the 21 Debtors are authorized to pay 80% of the uncontested fees and 100% of the uncontested expenses 22 without further order of the Court. If no objection is filed, the Debtors are authorized to pay 80% of 23 all fees requested in the Application and 100% of all expenses requested in the Application without 24 further order of the Court.

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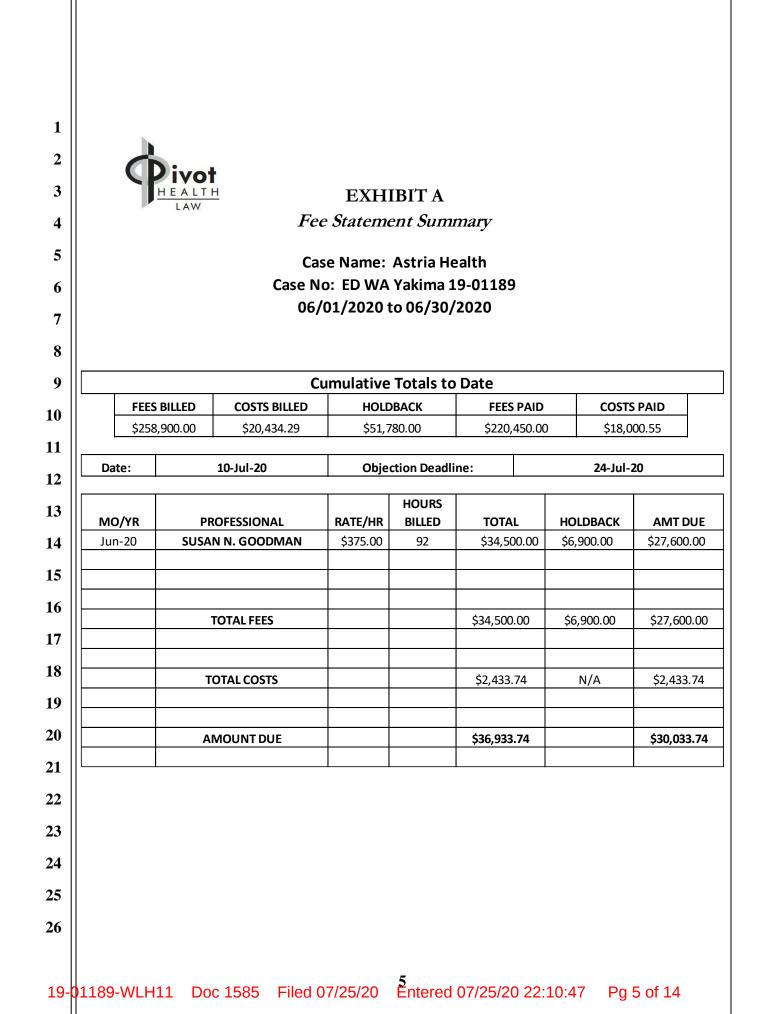
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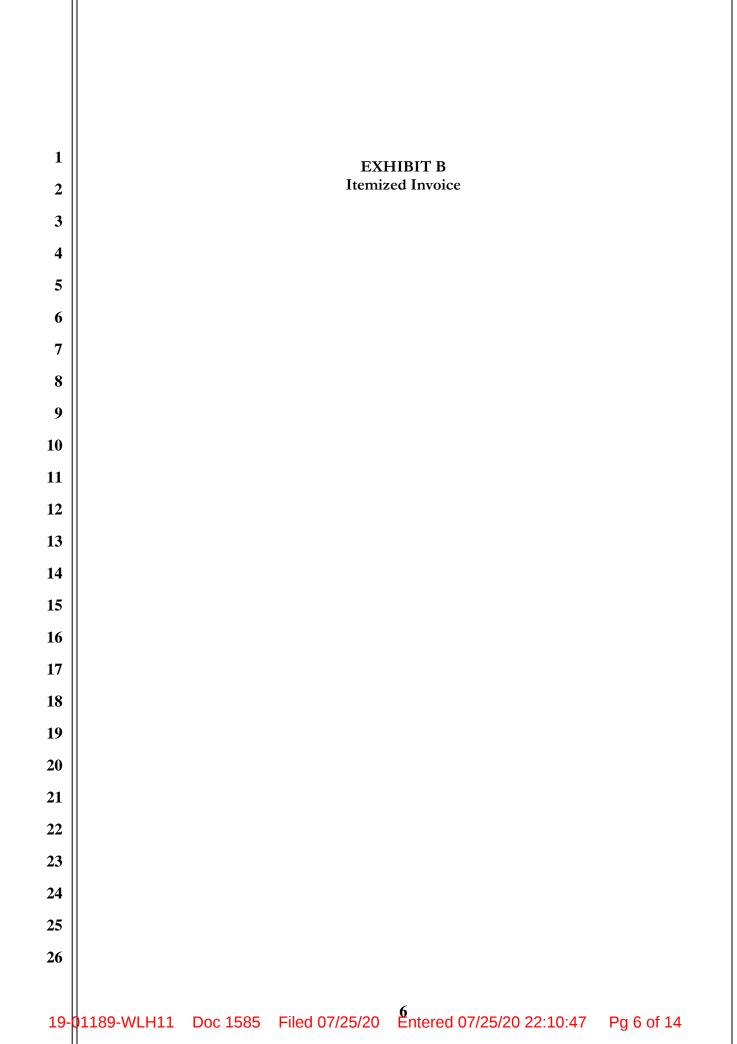
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1	10. The interim compensation and reimbursement of expenses sought in this Application is						
2	not final. Upon the conclusion of this Chapter 11 Case, the PCO will seek final approval for the fees						
3	and reimbursement of the expenses incurred for the totality of the services rendered in this case. Any						
4	interim fees or reimbursement of expenses approved by this Court and received by PCO will be						
5	credited against such final fees and expenses as may be allowed by this Court.						
6	WHEREFORE, the PCO respectfully requests that the Debtors pay compensation to Pivot						
7	Health Law, LLC on her behalf as requested herein pursuant to and in accordance with the terms of the						
8	Interim Payment Order.						
9	DATED: July 25, 2020 By: <u>/s/ Susan N. Goodman, AZ Bar # 019483</u>						
10	Pivot Health Law, LLC P.O. Box 69734						
11	Oro Valley, AZ 85737 Ph: (520) 744-7061						
12	sgoodman@pivothealthaz.com						
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Invoice #: 1099 Invoice Date: 7/9/2020

Period: June 1 - 30, 2020

**Bill To:** Astria Health ED WA Yakima Case No. 19-01189

Date	Description	Hours/Qty	Rate	Amount
6/1/2020	New EML patient complaint and initial EML response (#24 spreadsheet)	0.6	375.00	225.00
6/1/2020	follow up UST vand clinic management via EML re complaints (.2); attempt to call back patient who left msg (no VMX set up) (.1); msg and follow up pts rows 25 - 27 (1.4); call follow up row 9 patient (1.0); call and follow up patient row 21(.6); follow up re PT (.4); call with UST (.8) EML follow-up Debtors counsel et al (.3); attempted HIM calls (.2);	5	375.00	1,875.00
6/1/2020	Call with Debtor counsel, CRO, Debtor, UST (.4); review EMLs x3 with attach from Debtors (.5); research re notice requirements with call (.8); follow up call with pt on row 8 (.2); update clinic management (.2); EML follow up re missed call HIM (.2);	2.3	375.00	862.50
6/1/2020	review DE 1328 re contract rejections relative to clinic consolidations and complaints	0.4	375.00	150.00
6/1/2020	Collective review of 3 - 4 messages and attachments from counsel and consolidated response	1	375.00	375.00
6/2/2020	Strategy call with AHLA colleague who serves as PCO	0.2	375.00	75.00
6/2/2020	respond to EML row 28 patient (.1); review YH article (.2); update ShareFile (.1)	0.4	375.00	150.00
6/2/2020	EML from row 29 with concern re 2 patients and response with update to management (1.1)	1.1	375.00	412.50
6/3/2020	Call with pt row 1 re reaching clinic for special visit and follow up (.1); follow up patient row 20 (.2); review DE 1337 (.2);	0.5	375.00	187.50

### Total

**Payments/Credits** 

Balance Due

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Invoice #: 1099 Invoice Date: 7/9/2020

Period: June 1 - 30, 2020

**Bill To:** Astria Health ED WA Yakima Case No. 19-01189

Date	Description	Hours/Qty	Rate	Amount
6/4/2020	New pt complaint msg (2 patients) with 2 calls in follow up (.8); EML follow up re same (.2); behavioral health concern (.2); EML and follow up new complaint line 31 (.3); DEs 1347 and 1348 with updates to notice docs (.3); clinician follow up call (.6); listen hearing recording for PCO concerns (.3); clinic manager report to (.2)	2.9	375.00	1,087.50
6/5/2020	Begin 2d supp report (.5); call with row 6 (one with no VMX set up) (.5); call from former EE with concerns and follow up (.4); request print follow up fr patient line 30 (.2); docket management and updates DEs 1349 - 1353 (.2);	1.8	375.00	675.00
6/5/2020	Finish drafting supplemental report; discuss with UST (1.3); respond to debtor counsel EML (.2); file and notice report (.2); call former APRN re pt call to cell with medication need (.2)	1.9	375.00	712.50
6/6/2020	EML Debtor counsel (.1); EML follow up clinical team re report (.2)	0.3	375.00	112.50
6/7/2020	Review DE 1350 for implications r/t PCO role	0.3	375.00	112.50
6/7/2020	Call with quality re current state	0.2	375.00	75.00
6/8/2020	EML to clinical/quality team re ways track weekly staffing, supplies, etc (.2);EML re patient safety concern (.2); follow-up with clinical team (.7); field pt/family BH concern (.2); call and follow-up with reporting clinician (.6); review, analysis, and eml Deb/CRO/UST re same (.5); additional follow up clinical team (.4); draft and file 2015.1 (.3); respond pt request for medical record request form (.2)	3.3	375.00	1,237.50
6/8/2020	docket management consistent with PCO role DEs 1350 mod through 1358	0.2	375.00	75.00

Total

## **Payments/Credits**

Invoice #: 1099 Invoice Date: 7/9/2020

Period: June 1 - 30, 2020

**Bill To:** Astria Health ED WA Yakima Case No. 19-01189

Date	Description	Hours/Qty	Rate	Amount
6/9/2020	EML exchg CNO re update methods (.1); new physician concern email review and analysis (.4); patient calls x2 and follow up re needs for equipment and medications post MD contract rejection and follow-up (.9); update UST (.4); EML follow-up re pt/clinician concerns (0.5); begin tracking spreadsheet for GVM f/u (.3);update previous pt complainants with medical record address (.2)	2.8	375.00	1,050.00
6/9/2020	Update COS (.2); follow up clinician (.2); update CRO re website for medical record requests (.2); update notice documents per DE 1361 (.1)	0.7	375.00	262.50
6/10/2020	Preparation Exhibit B May fees	0.3	375.00	112.50
6/10/2020	Call with physician re patient safety concerns	0.5	375.00	187.50
6/10/2020	Update UST (.3); draft motion employ counsel (2.0) and emergency hearing motion (2.0)	4.3	375.00	1,612.50
6/11/2020	Follow up call from patient (.2); update UST (.1)	0.3	375.00	112.50
6/11/2020	Initial call with proposed counsel re pleadings needed and follow-up	0.8	0.00	0.00
6/12/2020	Call with clinic management re patient follow up (.4); update call with interim CNO (.6); update add concerns from physician and follow-up (.4); update clinical leadership Topp (.7); docket management - review DE 1372 for patient/clinician impacts (.4) (and DE 1370); msg UST (.1)	2.6	375.00	975.00
6/12/2020	Begin review and analysis Topp quality data upload (21 files)	0.4	375.00	150.00
6/13/2020 6/15/2020	follow up ED mgr; manage travel physician call (.5); staff follow up x2 calls (.4); message and attempted follow up patient (.1);	0.4 1	375.00 375.00	150.00 375.00

### Total

**Payments/Credits** 

Balance Due

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#### Invoice #: 1099 Invoice Date: 7/9/2020

Period: June 1 - 30, 2020

**Bill To:** Astria Health ED WA Yakima Case No. 19-01189

Date	Description	Hours/Qty	Rate	Amount
6/16/2020	Patient call re self and spouse (.2); follow up team (.5); Second patient call and follow-up (.2); third patient call and follow-up (.2); review and analyze DE 1405 (.4); receipt new written MD concern and analyze implications (.4); Calls re EVS staffing x2 (.3);	2	375.00	750.00
6/17/2020	Prepare for (1.3) and attend status hearing (2.1); follow up calls after hearing (.4)+ (.3)+ (.3) (staff and MD)	4.4	375.00	1,650.00
6/18/2020	follow up Toppenish re MD concern (.5); initial msg re tribal contact (.2) and follow up call later re same (.7); patient call re referral problems and follow up issues with clinic (.3); docket management consistent with role (.3 - bill .1); EML follow up re trival contact (.1)	1.9	375.00	712.50
6/19/2020	1/2 rate nonworking travel TUS to PDX (TUS to LAS to SJC to PDX); auto travel PDX to Hood River	3.9	375.00	1,462.50
6/19/2020	SV 8 Toppenish (weekend): ED (1.0); Kitchen (.3); ANS, OB, housekeeping (1.6); Lab (.7); ICU, Respiratory, more ANS (2.0); document notes visit (.8); 1/2 NW travel to YAK (.3); follow up CNO (1.0)	6.1	375.00	2,287.50
6/21/2020	Site visit Sunnyside: visit with ANS; Hospitalist; ED; ICU; M/S; Radiology; Respiratory (2.1); 1/2 rate NW travel to and back Sunnyside (41 min x2 /2) (.7); follow up Toppenish CNO (.2); review clinic notes/locations in preparation visit (.7)	3.7	375.00	1,387.50
6/21/2020	EML from concerned Robertson patient and response re same	0.3	375.00	112.50
6/22/2020	Site visit: facilities (.4); materials (.7); lab follow up and notes (.4); 1/2 rate NW travel Yakima to Prosser (55 min/2) (.5); Prosser clinic (.4);	2.4	375.00	900.00

### Total

### **Payments/Credits**

Invoice #: 1099 Invoice Date: 7/9/2020

Period: June 1 - 30, 2020

Bill To:

Astria Health ED WA Yakima Case No. 19-01189

Date	Description	Hours/Qty	Rate	Amount
6/22/2020	Site visit 8: 1/2 travel Prosser to Grandview (13 min/2) (.2); GMC site visit with staff, clinic mgr, and MD interaction (1.3); follow up UST (.8); Birch site visit with staff and APRN (1.0); VIM to check patient notice with find of PHI in	4.9	375.00	1,837.50
6/22/2020	dumpster and follow up associated with (1.6) Site visit 8: Lincoln Ave site visit with manager, PA, and staff interaction (1.0 - discount to 0.5); concerned staff follow-up (2.0 - discounted 0.8)	1.3	375.00	487.50
6/22/2020	Site visit 8 - travel Sunnyside to Toppenish (35 min/2) (.3); Toppenish ED visit (1.3); Travel Toppenish to Yakima (35 min/2) (.3)	1.9	375.00	712.50
6/22/2020	Call from board member re Toppenish concerns r/t patient safety	0.5	375.00	187.50
6/23/2020	Site visit 8: follow up biomed re toppenish (.5); ASC (.5); 1/2 rate travel to Selah (.4/2) (.2); check on patient notice at Selah (absent) (.2); Creekside site visit with staff and surgeon (.5); 1/2 rate NW travel Creekside to Sunnyside (.7/2) (.4); Lincoln/Miller clinics with staff, manager, physician (1.8); follow up Sunnyside Int DON and OR Dir (1.1); 1/2 rate travel to Ahtanum (37 min/2) (.3); Ahtanum visit with providers, staff, manager (1.4); follow up call with Toppenish clinical leadership (.5); update counsel (.2 NC)	7.4	375.00	2,775.00
6/24/2020	follow up proposed counsel (.2 NC); follow up staff concerns (.3 NC); docket monitoring relative to role (.2); Call with tribe gen counsel (.3); EVS follow up (.3)	0.8	375.00	300.00
6/24/2020	1/2 rate NW travel Yakima to Zillah clinic (.4/2) (.2); Zillah clinic visit (.7); 1/2 rate NW travel Zillah to PDX (2.8/2) (1.4); travel PDX-LAS-TUS (2.5)	4.8	375.00	1,800.00

Total

**Payments/Credits** 

Invoice #: 1099 Invoice Date: 7/9/2020

Period: June 1 - 30, 2020

Bill To:

Astria Health ED WA Yakima Case No. 19-01189

Date	Description	Hours/Qty	Rate	Amount
6/25/2020	Call with proposed counsel and debtor counsel (.8); follow up proposed counsel (.2 NC); summary EML (.2);	1	375.00	375.00
6/25/2020	Prepare, file (11th mo and NOBD), certificate of service and notice	1	375.00	375.00
6/29/2020	follow up call clinical leadership x2 (1.1); selah/sumit postings (.4); staff f/u calls (.2); review notes and prior reports draft 6th report(5.7)	7.4	375.00	2,775.00
6/30/2020	Pre (.2) and post (.3) counsel calls	0.5	0.00	0.00
6/30/2020	Update call with lead debtor counsel	0.4	375.00	150.00
6/30/2020	Update to UST	0.2	375.00	75.00
	Subtotal Professional Fees			34,500.00
6/5/2020	Mail information to patient per request (row 30)		1.40	1.40
6/9/2020	Astria POSTAGE Patient Form Requests		0.55	0.55
6/13/2020	Astria AIRFARE SV8 return		513.48	513.48
6/14/2020	Astria SV8 AIRFARE revised schedule outbound		513.48	513.48
6/19/2020	Astria SV8 MEALS TUS Hudson		2.69	2.69
6/19/2020	Astria SV8 MEALS Chick fil A SJC		12.56	12.56
6/19/2020	Astria SV 8 MEALS Chevron Goldendale		3.20	3.20
6/20/2020	Astria SV 8 HOTEL		189.29	189.29
6/20/2020	Astria SV 8 MEALS		7.26	7.26
6/20/2020	Astria SV 8 MEALS Mod Pizza		20.68	20.68
6/21/2020	Astria SV8 MEALS (Popeyes)		10.83	10.83
6/21/2020	Astria SV8 MEALS		14.13	14.13
6/22/2020	Astria SV8 CAR RENTAL (fuel Zillah Chevron)		27.71	27.71
6/22/2020	ASTRIA SV8 MEALS (McDonalds)		8.31	8.31
6/22/2020	Astria SV8 MEALS (Maverick Sunnyside)		10.52	10.52
6/23/2020	Astria SV8 HOTEL		351.03	351.03
6/23/2020	Astria SV8 CAR RENTAL fuel (Chevron Hood River)		40.00	40.00
6/23/2020	Astria SV8 MEALS (hotel food/drink)		16.23	16.23

Total

**Payments/Credits** 

Invoice

Invoice #: 1099 Invoice Date: 7/9/2020

Period: June 1 - 30, 2020

**Bill To:** Astria Health ED WA Yakima

Case No. 19-01189

Date	Description	Hours/Qty	Rate	Amount
6/23/2020 6/23/2020 6/24/2020 6/24/2020 6/24/2020 6/24/2020 6/24/2020 6/25/2020	Astria SV8 MEALS (Jamba YAK) Astria SV8 MEALS (Mod Pizza) Astria SV8 HOTEL Astria SV8 CAR RENTAL Astria SV8 PARKING FEES/TOLLS TIA Astria SV8 MEALS (LAS Fresh Mkt) Astria SV8 Meals - Starbucks Astria POSTAGE (11 monthly fee stmt) Total Reimbursable Expenses		7.25 13.02 130.75 454.52 60.00 8.85 9.40 6.60	7.25 13.02 130.75 454.52 60.00 8.85 9.40 6.60 2,433.74
	1	Tota	۱ــــــــــــــــــــــــــــــــــــ	\$36 933 74

### **Total** \$36,933.74

Payments/Credits \$0.00

#### EXHIBIT C

#### **Mailing List**

Astria Health Cary Rowan 900 West Chestnut Ave Yakima WA 98902

Mintz Levin Cohen Ferris Glovsky & Popeo Ian Hammel One Financial Center Boston MA 2111 Dentons US LLP Sam Alberts 1900 K Street NW Washington DC 20006

Arent Fox LLP Andrew Silfen 1301 Avenue of the Americas 42nd Flr New York NY 10019 Sills Cummis & Gross PC Andrew Sherman One Riverfront Plaza Newark NJ 7102

Office of the United States Trustee Gary Dyer 920 W Riverside Ave, Ste 593 Spokane WA 99201