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CASCADE MEDICAL
PARTNERS IN YOUR HEALTH

Minutes of the Board of Commissioners Meeting
Chelan County Public Hospital District No. 1
Administration Conference Room & Zoom Connection
February 25, 2026

Present: Shari Campbell, President; Cary Ecker, Vice President; Dr. Knight, Commissioner; Tom Baranouskas, Commissioner; Diane Blake, Chief Executive Officer; Pat Songer; Chief Operating Officer/Chief of EMS; Marianne Vincent, Chief Financial Officer; Melissa Grimm, Chief Human Resources Officer; Natasha Piestrup, Senior Director of Nursing; Megan Baker, Executive Assistant

Zoom: Jessica Kendall, Commissioner; Mike Stanford, EMS; Lester Stoltz, EMS

Guests: Jennifer Andrews, MSO- EMS; Justin Stoltzfus, NP

Topics	Actions/Discussions
Call to Order	• President Shari Campbell called the meeting to order at 5:01 PM and then led the Pledge of Allegiance.
Consent Agenda	• Dr. Knight moved to approve the consent agenda. Cary seconded the motion; motion unanimously approved.
Community Input	• Tom Baranouskas announced his plans to retire at the end of March or early April and shared that the transition timeline will remain flexible to support organizational continuity.
CM Values	Diane Blake provided the report. • Diane highlighted the organization's shared value of *Commitment*, emphasizing continuous individual and organizational growth and a dedication to pursuing answers, understanding root causes, and advocating for the best course of action. Appreciation was expressed to Tom for his long-standing service and supportive board leadership. Gratitude was also shared for the extensive coordination across teams to support recent recruitment efforts led by Melissa, reflecting strong collaboration among clinical and operational staff. These efforts underscore the organization's culture of teamwork and commitment to excellence.
Introduction	• Justin Stoltzfus, NP shared his background, noting prior experience in Quincy with a focus on preventive care, chronic disease management, and serving a large pediatric population. He expressed enthusiasm for the opportunity to care for patients in the Upper Valley and a goal of expanding pediatric access locally. He also shared his passion to making a meaningful impact in the broader community.
Committee Reports	**A. Quality Oversight Committee** Jessica Kendall provided the report. • The Quality Committee met in early February to finalize its annual work plan and discuss the potential development of a quality dashboard. Members supported focusing on readily available, reliable data and identified possible measures such as treatment timeliness, patient safety indicators, infection rates, and emergency department wait times. The discussion centered on whether the Commission would find value in a dashboard and which body should lead its development. The Committee plans to seek additional input from the Community Outreach and Awareness Committee. **B. Medical Staff** Shari Campbell provided the report. • The group met in early February and received an update from the

	Rehabilitation team, which has expanded service hours to 6:30 AM–6:00 PM to improve patient access. Appointments remain readily available, with patient follow-through on scheduling identified as the primary operational challenge. A new department director is expected to begin in March. Treadmill testing services continue and remain open to referrals. Emergency Department recruitment efforts are ongoing, and the Behavioral Health team has launched a caregiver support group. **C. Community Outreach and Awareness Committee** Shari Campbell provided the report. • The group discussed early planning for a September public event, including potential locations and community engagement opportunities, as well as continued efforts to support onboarding for new members. Marketing strategy was reviewed with a focus on measuring campaign effectiveness, supporting growth in Family Practice, and tracking patient experience through Net Promoter Score. The group also explored practical ways to gather community feedback at summer events to help inform decisions such as potential clinic hour expansion. **D. Governance Committee** Shari Campbell provided the report. • The Governance Committee reviewed its annual work plan, including the education plan provided in the meeting packet. Upcoming retreat logistics and timing were discussed, along with opportunities to strengthen the Board's strategic focus and clarify annual objectives. In considering future board members, the group highlighted the value of bringing individuals with financial knowledge and a strong understanding of hospital operations to support effective governance.
Discussion	**A. Foundation Golf Tournament Sponsorship** Shari Campbell led the discussion**.** • Historically, the Commissioners have donated $125 per person to share in a large sponsorship with the medical staff and executive team to help support the CM Foundation and their annual golf tournament. The group agreed to partake in the sponsorship again this year. **B. Introduce Capital Purchase for Budgeted Monitors** Diane Blake led the discussion. • The organization has planned a system-wide defibrillator replacement to ensure all equipment is standardized and up to date. • Tom made a motion to approve the purchase, Dr. Knight seconded the motion, and the group unanimously agreed.
Break	• The group took a break at 6:10 PM and resumed at 6:25 PM.
December 2025 & January 2026 Financial Reports	**Marianne Vincent led the reports.** **December 2025 Financials** • Cascade Medical typically keeps year-end financials open until the end of January to capture all 2025 revenue. • December closed with a positive margin of $375K, exceeding the budgeted $115K. • Preliminary year-to-date margin totaled $1.5M, with additional entries anticipated, to include an additional Medicare cost report settlement entry that could be either a payment from Medicare or a payment to Medicare, • Patient volumes were moderate toward the end of the year. • A planned entry for retiree benefits will be recorded as part of the final entries. • Supply costs showed a large positive variance, driven by 340B program entries that are made annually at year end.

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	• Other operating expenses: depreciation was over budget, and leases/rentals were $85K over, related to EMS housing and interim Rehab Director lodging. • November and December cash collections were below budget, but the year ended with $2.3M more cash collected. • Yearend cash balances ares $385K greater than our budgeted cash balances for year end. • Net days in accounts receivable continue to increase due to Medicare contractual allowance adjustments and our larger Account Receivable balances. • The 340B program is moving to a new vendor, with an April 1 planned go-live. • Overall, the organization ended the year in a strong financial position. **January 2026 Financials** • January closed with a negative margin of approximately $330K, about $230K below budget; expenses are expected to normalize in the coming months. • Weather conditions, including recent storms and limited snowfall, impacted patient volumes. • Audit work continued through January and February, with results expected to be presented at the May Board meeting. • Contractual allowances showed a positive variance, consistent with lower gross revenue. • Other operating revenue variance of ($185K) was primarily related to timing of the receipt of quarterly SNAP program funds. • Salaries and benefits showed a positive variance due in part to the use of outside resources to cover a physician and other staff vacancies. • Cash receipts were lower in January (approximately $629K), including about $180K less than expected in Medicare payments. • An error was identified in the EMS worksheet and is being addressed. • Days in net accounts receivable have increased and are expected to improve as collections normalize.
Administrator Report	**Diane Blake provided the report**. • A water heater was replaced as a planned maintenance expense at a cost of approximately $15K. • **Rural Health Transformation Program**: The Washington State Hospital Association Rural Hospital Committee is finalizing the distribution approach for the Rural Health Transformation Program. Approximately 70% of funds will be distributed as a base allocation with adjustments for hospital size and Medicaid population. Cascade Medical anticipates receiving roughly $600K annually over the next five years to support innovation, technology, and capital infrastructure. Additional details are expected in the coming weeks. • **Legislative Update:** Early proposals from the state legislative session indicate healthcare funding may fare better than initially anticipated, and the organization remains cautiously optimistic as the process continues. • **Recruitment Update:** Efforts are ongoing to fill the full-time physician and clinic medical director role. An Emergency Department physician candidate recently interviewed, and an offer was be extended. A dermatology provider agreement has also been finalized. An interim remote medical director has also been engaged to support clinical leadership. • **Rehab Services**: The department has adjusted workflows and extended clinic hours to 6:30 AM – 6:00 PM to improve patient access. Operational changes, including updated door access and support from patient service representatives, have been implemented to support the expanded schedule.
Board Follow Up Items / Meeting Evaluation / Commissioner Comments	• Please check your email and calendars.
Action Items	**MOTION: Approve Credentialing** • **Credentialing Candidates** ○ **Matthew Bourne, DO**

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	○ **Naveed Majd, DO** ○ **Theodore Baker, MD** • Dr. Knight moved to approve, Tom seconded, and the motion unanimously approved. **MOTION: Approve 2026-2028 Organizational Objectives and 2026 Annual Objectives** • Jessica moved to approve, Dr. Knight seconded, and the motion unanimously approved. **MOTION: Approve Resolution 2026-02: CEO Employment Agreement** • The Board discussed the proposed CEO compensation adjustment, including considerations related to prior discussions about staff wage increases and recent efforts to enhance staff compensation. • A motion was made and seconded to approve the resolution. The motion passed with Shari Campbell, Cary Ecker, Dr. Knight, and Tom Baranouskas in favor, and Jessica Kendall against.
Executive Session: Performance of a Public Employee (RCW 42.30.110(1)(g)	• Shari called the executive session to order at 7:22 PM for 30 minutes. • At 7:52 PM, the group extended the meeting for another 30 minutes. • The group exited the executive session at 8:22 PM
Adjournment	• Tom moved to adjourn the meeting at 8:23 PM, Cary seconded, and the group unanimously approved.

Signed by:
Shari Day-Campbell
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Shari Campbell, President

Signed by:
Jessica Kendall
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Jessica Kendall, Secretary