Docusign Envelope ID: 1544BB4B-D128-410C-80B7-1D7C6EDAD110

CASCADE MEDICAL
PARTNERS IN YOUR HEALTH

Minutes of the Board of Commissioners Meeting
Chelan County Public Hospital District No. 1
Arleen Blackburn Conference Room & Video Conference Connection
April 23, 2025

Present: Shari Campbell, President; Tom Baranouskas, Vice President; Jessica Kendall, Cmmissioner, Cary Ecker, Commissioner; Dr. Jesse Knight, 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, Director of Nursing; Whitney Lak, Clinic Director; Megan Baker, Executive Assistant; Madison McNeil, HR Coordinator

Guests:

Zoom: Clint Strand, Director of Public Relations
Anonymous Participant

Topics	Actions/Discussions
Call to Order	• President Shari Campbell called the meeting to order at 5:30 PM. Cary then led the Pledge of Allegiance.
Consent Agenda	• Jessica moved to approve the consent agenda. Cary seconded the motion, and the group unanimously approved.
(Action Item) New Commissioner Appointment, Position No.4	• Jessica Kendall moved to appoint Dr. Jesse Knight to Position No.4. Shari seconded and the group of 4 Commissioners unanimously approved.
Oath of Office	• Megan Baker administered the oath of office to Dr. Jesse Knight, who affirmed her commitment as a commissioner to Cascade Medical.
Community Input	• None
CM Values	Diane Blake provided the report. • Diane shared that Clinic Director Whitney Lak used ChatGPT to explore how CM's Shared Values are interpreted, revealing their deep interconnection and role in shaping CM's culture. • Examples of values in action included: a clerkship student who stayed well beyond their shift out of engagement and was invited to dinner by the ED team, and a parent who praised the ED for providing affirming care without misgendering or misnaming their child.
Committee Reports	**Finance Committee** Tom Baranouskas provided the report. • The group reviewed financial topics including land valuation and whether reappraisal is appropriate. Management is nearing completion of the long-term planning document, which outlines key assumptions like depreciation and ties into annual risk stratification. Discussions also covered Q1 financials, high bad debt linked to suspended statements, and how componentized depreciation has impacted Medicare reimbursements. **Governance Committee** Shari Campbell provided the report. • The annual board retreat likely to be scheduled for October. The committee opted to postpone the full-board assessment, with plans to revisit the process in Q4 and aim for completion in 2026. In May, the board will review a decision-making matrix included in the meeting materials. New commissioner orientation plan was reviewed, with the WSHA/AWPHD governance portal identified as a valuable resource.

Docusign Envelope ID: 1544BB4B-D128-410C-80B7-1D7C6EDAD110

	The committee also recapped the CEO evaluation process, noting that performance evaluation training was completed in March, and confirmed that the board's annual objectives are all on track.
	• **Motion: Approve Board Committee and Liaison Appointments**
	  o Proposed board committee assignments: Tom (chair) and Cary on the Finance Committee; Shari (chair) and Tom on the Governance Committee; Jessica (chair) and Jesse on the Quality Committee. Shari on the Community Outreach and Awareness Committee, with the second seat remaining open for now.
	  o Tom moved to approve; Cary seconded. Motion unanimously approved.
	
	Board Quality Rounding
	Tom Baranouskas and Cary Ecker provided the report.
	• **Infection Control**
	  o Goal: Decrease our hospital acquired infection (HAI) rate to be equal or less than 6 per 1000 patient days.
	  o Challenge: A treatment-resistant fungus is on the rise in our region. Alex R. is developing a response plan to ensure preparedness and effective management.
	• **Business Services**:
	  o Goal: Decrease net AR days to an average of 52 or less for all financial classes by the end of 2025.
	  o Note: Four staff were awarded the Mark Judy Caregiver Scholarships to be Certified Revenue Cycle Representatives. This commitment to improving professional skills demonstrates a high level of dedication.
	
	Part-time Resident Advisory Council
	Shari Campbell provided the report.
	• The group shared input on how CM can better promote services to patients and part-time residents, identified which services are most valued by this population, and discussed aligning space planning with community needs for the Master Facilities Plan. Recruitment of part-time residents to contribute to this work is ongoing, with interested individuals encouraged to connect with Diane.
	• **Motion: Approve Part-time Resident Council Member Appointments**
	  o Tom moved to approve appointment of Theres Campion; Jessica seconded. Motion unanimously approved.

Discussions & Reports	**A. Q1 2025 Organizational Dashboard Review** Diane Blake led the review. • CM has transitioned the dashboard back to a previous format, for hope of improved readability. **Patient & Family Centered Care** • Explore accreditation options with goal of ending 2025 with recommendation of program and timeline to become accredited. o Currently, CM is surveyed by the Washington State Department of Health approximately every 18 months. Pursuing accreditation represents an additional, more rigorous level of review, involving an external body conducting evaluations. The benefits include supporting CM's ongoing growth in quality and reinforcing a culture of continuous improvement. • Integrate care delivery by developing and implementing a plan to coordinate mobile clinic, school clinic, mobile integrated health, clinic expansion of hours, telehealth and hospitalist programs under the umbrella of Team-Based Care, with continued emphasis on enhancing

Docusign Envelope ID: 1544BB4B-D128-410C-80B7-1D7C6EDAD110

patients' first touch experience with CM.
    - The rollout of Luma, CM's patient scheduling and communication tool, experienced some delays last year but is now successfully implemented and operational. CM is currently working on the final phase, which includes integrating patient forms that will be available electronically and automatically populated into the patient chart.

Financial Stewardship

- Explore tools that appropriately leverage artificial intelligence and implement at least one before end of 2025.
    - Providers have expressed interest in a tool called AvoMD, an ambient listening solution designed to support charting and clinical documentation. Following the approval of an internal AI policy, CM established an AI Governance Committee to guide the implementation of this tool. A proposal for AvoMD has been received, and a full clinical evaluation is scheduled to begin soon. Pending successful evaluation, a purchase approval request is anticipated soon.
- Focused hospital service line optimization and growth (Swing Bed, Infusion, and Rehab Services)
    - While some components may still be in progress by the of 2025, forward progress is expected throughout the year.

Community Connections

- Implement structured, robust plan for bilingual community dialogue to inform Community Health Needs Assessment (CHNA), which will, in turn, inform the next strategic plan.
    - Community input is underway, with opportunities to deepen engagement. COAC is exploring the addition of a community representative to help strengthen connections and ensure diverse perspectives are included.
- Implement structured communication and outreach plan that is consistently on message, including communications about first touch improvements; maintains focus on priority areas; strengthen connection to Spanish-speaking population; and utilizes regular measurement to adapt work as needed.
    - The Commission recommended the opportunity to collaborate with Upper Valley MEND to distribute the survey using a QR code.
    - CM's CHNA consultant, is ready to offer incentives to encourage participation among Spanish-speaking community members.

B. CHNA Update

Diane Blake provided the update.

- CM is actively progressing through its CHNA, a key requirement for maintaining its non-profit designation. So far, 128 survey responses have been received toward the goal of 200, with continued outreach underway. CM is also preparing to host focus groups with key partners including CM EMS, CM Behavioral Health, the Cascade School District, Upper Valley MEND, and is working to engage additional groups such as the Plain Pantry, local city representatives, the Leavenworth Chamber, and other community leaders. Community feedback and data collected through this process will help shape CM's priority areas and guide the upcoming strategic planning efforts.

C. EMS Levy Results

All commissioners participated in the discussion, expressing gratitude for the

Docusign Envelope ID: 1544BB4B-D128-410C-80B7-1D7C6EDAD110

	community's continued support. • Thank you to Shari for participating in several community outreach efforts and representing the board, and to Diane, Pat and Brian for their consistent presence and support. The group shared appreciation for the collective efforts that helped contribute to the successful passage of the EMS Levy.
Action Items	**Motion: Approve Credentialing** • Jessica moved to approve; Cary seconded. Motion unanimously approved. **Motion: Approve Ambulance Purchase** • The Demers Type II Aid/Medic Unit will replace the oldest ambulance in District 3. It will primarily serve as a backup vehicle, support Basic Life Support (BLS) calls, and be utilized for long-distance transports. • Tom moved to approve; Cary seconded. Motion unanimously approved. **Motion: Approve Master Facilities Planning** • The Master Facilities Plan (MFP) leverages data to help CM understand market demand and identify opportunities. It is a collaborative process centered on team and community vision for care and will guide the development of recommendations and solutions to meet evolving hospital district needs. • **Purpose**: To present the outcome of the consultant selection process for the MFP and Service Line Expansion Assessment, and to seek Board approval for the spend. • Cary moved to approve; Tom seconded. Motion unanimously approved.
March 2025 Financials	**Marianne Vincent provided the report.** • The first quarter 2025 results show a net margin of ($160,000), a positive variance of $434,000 compared to the budgeted margin of ($594,000). Both month-to-date and year-to-date figures are ahead of budget. • Over $400,000 of the $500,000 land valuation is attributed to the value of the parking lot that we are purchasing. • Salaries and Benefits are over budget by $90,000, primarily due to higher Acute RN wage expenses and some hospitalist salary overruns. Other expenses are mostly showing positive variances. • Cash collections for Q1 were under budget by ($760,000), while cash balances are $143,000 above budgeted levels. Strong cash collections and an anticipated tax payment bolus in April are expected to improve the position. • The Business Office is aiming to reduce Net AR to 52 days by the end of 2025, with the April figure at 54.6 days. • The audit and Medicare Cost Report materials have been submitted and are currently under review by our audit firm.
Administrator Report	**Diane Blake provided the report.** • **Advocacy Updates**: Representative Schrier and Senator Cantwell visited the region to discuss potential federal Medicaid cuts with local healthcare leaders. Both were well-informed and focused on gathering input to bring critical rural healthcare perspectives back to Washington, D.C. Following the discussion, a small group toured CVCH's new facility. The head of CMS may visit Washington on May 8, and Diane plans to attend and continue advocating for rural healthcare. • **Legislative Updates**: Federally Directed Payment Program brings in over 1 billion to support Medicaid services. Hospitals pay taxes, federal dollars match, money is redistributed. Email to HCA from CMS that seems to indicate that WA's program could be approved but it remains uncertain. Program is essential for supporting Medicaid care in WA. Additionally, FMAP calculation by federal government based on per capita income. WA has high per capita income which is not evenly

Docusign Envelope ID: 1544BB4B-D128-410C-80B7-1D7C6EDAD110

	distributed but WA will be hit hard if passes. • **State Budget**: The legislative session began with the state facing a significant budget deficit, and hospitals face increased taxation and declining payment revenues, but many serious threats were mitigated. A remaining issue is the proposed cap on hospital payment rates under the PEBB and SEBB programs. While Critical Access Hospitals like CM are currently exempt from this cap, the change could negatively affect our local hospital partners who are not exempt—potentially straining their budgets and impacting regional healthcare access. • **Internal Connections**: Kudos to Dr. Kendall for helping establish a connection with the regular provider meetings. Appreciation also goes to Natasha for inviting Diane to the Clinical Resource Nurse staff meeting, where Diane shared updates on the EMS Levy and recent legislative developments. • **Provider Coverage & Updates**: An Emergency Department provider will be out for several months while recovering from an injury, resulting in approximately 20% of shifts needing coverage. All but one of those shifts have been filled. CM has also initiated recruitment for a full-time clinic physician, a promising candidate referred by Dr. Kendall, who is scheduled to interview in early May. • **Radiology**: Kudos to Deseree and the entire radiology team—CM successfully passed ACR mammography recertification.
Board Action Items	• No comments.
Meeting Evaluation/Commissioner Comments	• Kudos to the group for a productive and engaging meeting. • The Commissioners are available to join next month's meeting at 4:30 PM to take part in a board education session focused on Quality.
Adjournment	• Jessica moved to adjourn at 8:19 PM; Cary seconded, and the group unanimously agreed.

Signed by:
Shari Day-Campbell
A1777FE3BF594A3...
Shari Campbell, President

Signed by:
Jessica Kendall
8A0067F03C2B48C...
Jessica Kendall, Secretary