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
May 28, 2025

Present: Shari Campbell, President; Tom Baranouskas, Vice President; Cary Ecker, Commissioner; Dr. Jesse Knight, Commissioner; Jessica Kendall, 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; Whitney Lak, Senior Director, Rural Health Clinic; Madison McNeil, HR Coordinator

Guests: Kami Matzek, DZA

Zoom: Lester; Travis Beyerl, SAO; Tyler Anderson, DZA

Topics	Actions/Discussions
Call to Order **5:33**	Subsequent to the 4:30 education session on quality, President Shari Campbell called the meeting to order at 5:33 PM. Tom Baranouskas then led the Pledge of Allegiance.
Consent Agenda **5:36**	April minutes need to be updated to reflect Jessica's attendance. Tom moved to approve the consent agenda, with the change to the minutes. Cary seconded. Motion unanimously approved.
Community Input	None
Introduction: Linda Greiner, PA-C **5:37**	Diane Blake introduced Linda, CM's new hospitalist and clinic provider. Linda is also able to provide care in the emergency department. Conversation ensued between Linda and the board.
2024 Audit Presentation **5:49**	Kami Matzek provided an overview of the financial documents included in the board meeting packet. • GASBY 101 was implemented • Estimates of the allowance for patient accounts and 3rd party settlements were reviewed • No material audit adjustments were posted • Audit focuses on areas of potential risk; for example, any management override of controls, places where financial estimates are utilized, implementation of the new GASBY standard • Cascade received a clean audit consistent with our standards of quality
CM Values **6:42**	Diane Blake provided the Shared Values reflection which was a note from a grateful patient about Dr. Frank's care in the emergency department: • The patient had a positive experience and particularly noted astute patient assessment, patient listening, and investigative questions to piece together patient's history and current state of health. • Both the patient, and the patient's family expressed their deep appreciation.
Committee Reports **6:47**	**Quality Oversight Committee** • Jessica Kendall provided a summary report of the most recent meeting • Rachel and Jessica will be speaking about our board quality rounding process at the WSHA leadership conference in June. There is a lot of interest for us to share more about our quality program and how we structure board quality rounding so it supports the board's role of broad oversight.

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

	Medical Staff • Shari Campbell provided the report. • There was concern with a DEXA scan, through collaborative discussion a transcription issue was identified. A thorough audit was performed and determined no lapse in quality patient care. **Community Outreach and Awareness Committee** • Shari Campbell provided the report. • The EMS Levy passed with 77% approval. Management will document an after-action report of what worked well and what can be improved, to retain for future. • The committee is continuing discussion to formulate a structured plan to maintain our relationship with the community. • We are marketing strategically and considering our broad areas of focus, with priority areas for continued growth: family medicine, imaging, ER. • We are considering how to use data to further hone/inform methods of outreach/marketing and messaging. • The committee is interested in the addition of one to two community members to the committee.
Discussions & Reports **7:00**	**Meditech Update** • Pat Songer provided the report and opened the discussion. • Healthnet Consulting Group has been partnering with us on optimization efforts. • We have found that reports from Meditech with a single source truth is resulting in higher quality reporting. • Meditech response is often delayed, which slows pace of optimization work. There is a plan to use collaborative strength in numbers to encourage Meditech development. • The new report format is appreciated by the board. **Decision Matrix** • Diane Blake opened the discussion. • The matrix is a proposed framework for contractual decisions: how the board and management work together, and who is responsible for each piece, and what type of information is needed. • The framework was reviewed by the governance committee and is intended to provide process clarity around future big decisions. • Board discussion raised questions of where management / board discussion happens, at what point in the framework decisions happen and whether a timeframe should be provided. Governance Committee will review and recommend changes to the document.
Action Items **7:15**	**Motion:** Approve Credentialing • Diane provided information on one deviation from standard process, which was that one physician, filling two roles, reviewed the 90-day extension application, rather than two. • Jessica moved to approve; Tom seconded. Motion unanimously approved. **Motion:** Approve Capital Spending for Clinic Remodel • Tom moved to approve; Cary seconded. Motion unanimously approved. **Motion:** Appoint COAC Committee Member • Shari moved to nominate Jessica Kendall for appointment to COAC. Jesse seconded. Motion unanimously approved.
April 2025 Financials **7:24**	• Marianne Vincent provided the report. • CM achieved a net margin of $358,000 exceeding the budgeted margin

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

	of $20,000 by $338,000. Gross revenue exceeded budgeted volumes by $112,000. Operating expenses for April were under budget by $1,000 **Revenue and Expense Variances** • Professional fees were over budget by $53,000 due to consulting fees for Meditech optimization. • Supplies are below budget in April due to pharmacy and lab expenses being lower than budgeted. Several lab supply contracts were reworked in 2024 and the lower expenses in 2025 are likely a result of this work as volumes are just slightly under budgeted volumes. **Cash Receipts and Balances** • April cash collections on patient accounts were $1,290,000ooo more than budgeted and combined with April tax collections resulted in total cash collections that were $1,468,000 more than budgeted, closing the negative variance seen through March. Cash balances for the year remain strong at $961,000 greater than budgeted balances. **Accounts Receivable** • Strong collections on patient balances for the month combined with continued work on stale accounts resulted in Gross Accounts Receivable being reduced by $862,000 **Contractual Allowance** • The contractual allowance is at 46%, allowing for a conservative estimate of our uncollectible accounts. **Future work** • Work to upload contracts to our new software continues as does Accounts Payable efforts to streamline payments to vendors. • We hope to collaborate with an outside vendor to review our 340B pharmacy program functionality and will be working to provide data to Wipfli, who will be assisting with our Master Facilities Plan. • Lisa Steen will be filling the role of Director of HIM and Revenue Integrity
Administrator Report **7:31**	Diane Blake provided the report. **Provider Recruitment** • We continue to recruit for a full time clinic physician. We are also working on a plan for summer provider coverage and what other additions may need to be made. **Federal Updates** • CMS administrator did not visit WA in May, may come in August; opportunity to educate on the realities of providing care in the rural setting • Federal bill passed in the house and now in the senate. In it's current form, it's predicted that up to 440,000 Washingtonians could lose insurance coverage, that WA providers could experience and additional $700M annually in payment cuts, with up to $500B in cuts predicted for WA providers in 2026 – 2034 • On the positive side, WA's federally directed payment program was approved by CMS, so those funds, critical to supporting the care of Medicaid patients, will begin to flow into our state • DOH approved our plans for the mobile MRI, anticipate seeing patients mid-summer • Following board approval of the AI governance policy, the steering committee now is readying the utilization of an ambient listening solution to support providers with efficiency in charting.

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

	• The project to install thin clients in clinic exam rooms, to improve provider efficiency/work flows is in process. **Strategic Planning** • Community Health Needs Assessment is wrapping up, we're working on timeline to bring before the board. • Launched the master facilities planning work, currently providing a large pull of data to vendor leading that project. Will be determining timing of touch points to the board and how the master facilities planning dovetails to the October board retreat. • Employee listening sessions occurred in May, providing us with valuable input and feedback. Our last session will be a hybrid with Med staff in early June. **Communication / Outreach since last board meeting** • Chiwawa Homeowner's Association • City engagement night 5/6 • Free sports physical at the school 5/27 • Arrive Alive at the high school • We had a presence at both Early Learning Fair and Dia de los Ninos • Booth at Wildfire Coalition event • Diane toured Dr. Andrew Jones with Confluence Health and received update on CH's strategic plans, which are collaborative in the region • Diane participated in WHSA's convening meeting of regional CEO's in Moses Lake **Kudos** • Megan Sawyer navigated a situation where the chemistry analyzer probes were recalled and new ones would not be available until fall. She was able to find a useful trade with a hospital in Spokane to swap probes and ensure we could continue to perform these vital tests. • Thank you to Whitney and Natasha for stepping into the roles of senior directors
Board Action Items **7:50**	**Meeting Evaluation/Commissioner Comments** Commissioners expressed appreciation for a good meeting and did not have specific feedback on the questions provided on the agenda.
Executive Session **8:06**	The board moved into executive session at 8:06 for 30 minutes for the Performance of a Public Employee (RCW 42.30.110(1)(g). At 8:36 the board extended the executive session for an additional 15 minutes. The board came out of executive session at 8:51 PM.
Adjournment **8:52**	Tom moved to adjourn the meeting. Cary seconded, and motion was unanimously approved.

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

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