Docusign Envelope ID: 8B0DA45C-88C7-4A62-A44D-EC37D18245CE

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
March 26, 2025

Present: Shari Campbell, President; Tom Baranouskas, Vice President; Cary Ecker, 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; Megan Baker, Executive Assistant; Clint Strand, Director of Public Relations; Madison McNeil, HR Coordinator

Via Zoom: Jessica Kendall, Commissioner; Gustavo Montoya, Commissioner; Janeth Baltazar; Financial Counselor

Guests: Luke Hoisington, Virtual Fractional Chief Information Officer; Natasha Piestrup, Director of Nursing; Kalie Thompson, PA-C; Terri Judy, CM Foundation

Topics	Actions/Discussions
Call to Order	• President Shari Campbell called the meeting to order at 5:31 PM. Tom then led the Pledge of Allegiance.
Consent Agenda	• Tom moved to approve the consent agenda. Jessica seconded the motion, and the group unanimously approved.
(Action Item) New Commissioner Appointment, Position No.2	• Tom Baranouskas moved to appoint Cary Ecker to Position No.2. Shari seconded and the group of 4 Commissioners unanimously approved.
Oath of Office	• Megan Baker administered the oath of office to Cary Ecker, who affirmed his commitment as a commissioner to Cascade Medical.
Community Input	• None
Introduction: Kalie Thompson, PA-C	Diane Blake introduced Kalie Thompson • Kalie joined CM in November as a bilingual provider for the mobile clinic. With a background from Emory University in Atlanta and experience at CVCH, Kalie has quickly become a valued team member, receiving overwhelmingly positive feedback from patients. She has helped update mobile clinic locations to improve visibility and accessibility, leading to increased walk-in traffic, particularly near Plain Hardware. Her fresh ideas and enthusiasm are bringing renewed energy to the mobile clinic, enhancing care for the community.
CM Values	Diane Blake provided the report. • Cascade Medical's commitment to community care and transparency was on display during recent EMS Levy education efforts, where residents expressed gratitude for life-saving services and the excellence of CM's team. The board, leadership team, staff, and Foundation continue to uphold CM's shared values—Commitment, Community, Empowerment, Integrity, Quality, Respect, and Transparency—in their work. Patients have shared positive feedback about the compassionate and timely care they've received, from attentive service in the clinic to individualized follow-up in the emergency department. Additionally, the Wenatchee Valley College nursing program recognized CM's strong, values-driven culture, reinforcing CM's role as a trusted community healthcare provider.
Foundation Report	Terri Judy provided the report: • In 2024, the Foundation raised $100K to fund a hematology analyzer

Docusign Envelope ID: 8B0DA45C-88C7-4A62-A44D-EC37D18245CE

	and a vehicle for the Mobile Integrated Health (MIH) program. • Leadership transitions are underway, with three members rolling off the board and five new members joining. President Rich Adamson is leading efforts to strengthen the Foundation's structure. • The CM Foundation Annual Golf Tournament is set for June 16, with Terri serving as the volunteer coordinator. • The Clinic Bundle initiative, which includes low-barrier exam tables and point-of-care ultrasound technology, will significantly enhance patient care with an $80K investment. • Fundraising efforts are already moving toward a stretch goal, with strong community support. The March 20 Benevolent Night at Wildflour was a tremendous success, and the next event is scheduled for April 17 at South.
Committee Reports	**Quality Oversight Committee** Pat Songer provided the report. • Q4 Quality Data review showed strong performance, with CM benchmarking above most Critical Access Hospitals (CAHs) in Washington for net promoter score. • A recent mock survey in the Rural Health Clinic received positive results. • The CAH Program Evaluation, a key document for survey readiness, contains valuable insights and is required by CMS. Commissioners expressed appreciation for the team's efforts in preparing a thorough document. **Community Outreach & Awareness Committee** Shari Campbell provided the report. • EMS Levy efforts include extensive outreach through social media, newsletters, the annual report, and an upcoming mailer to keep the community informed. • Please reach out if you are able to participate. • Originally formed as a temporary group, the committee has become a helpful way to strengthen commissioner connections with the community. The committee recommends updating the charter to make the committee permanent and consider the addition of community members. • **Motion: Approve Charter** o Tom moved to approve; Cary seconded. Motion unanimously approved. **Finance Committee** Tom Baranouskas provided the report. • The Finance Committee finalized the 2024 Finance Work Plan, updated the Bad Debt schedule, and discussed long-term planning priorities. • Insurance renewal details are pending, with no major changes expected. • The committee reviewed the AI Acceptable Use Policy, discussing compliance, financial impact, and human oversight in AI applications. • CM is moving forward with removing a $741K liability, with legal guidance related to an old meaningful use payment. • Discussions covered industry trends, including uncertainty around the Medicaid Federally Directed Payment Program, and the committee approved the Annual Committee Work Plan, Finance Dashboard Indicators, and long-term financial planning efforts.
Discussions & Reports	**A. IT Security Report** Luke Hoisington, CM's Virtual Fractional Chief Information Officer and ScaledData's COO, led the discussion. • ScaledData enhances access to IT leadership and expertise by sharing

Docusign Envelope ID: 8B0DA45C-88C7-4A62-A44D-EC37D18245CE

	resources, helping to reduce direct costs for CM. Recently, ScaledData conducted three key assessments to evaluate CM's IT environment: a cybersecurity assessment, an external penetration test, and a HIPAA security risk assessment. These assessments help ensure strong security measures, regulatory compliance, and the protection of patient data. Results show CM outperforms many hospitals, with a low risk of external penetration. Opportunities for further improvement focus on enhancing policies and procedures, reinforcing CM's commitment to security, compliance, and patient data protection. **B. Education: Performance Evaluations** Melissa Grimm provided the education. • Performance management is an ongoing process of feedback and communication between leaders and employees to align with organizational objectives. It is essential to establish clear SMART goals at the start of the review period and communicate any changes or redirections promptly. The final evaluation should reflect only what has been addressed during ongoing feedback, ensuring there are no surprises. The Board's evaluation should be limited to the CEO, as she is the only direct report. Additionally, performance evaluations should focus on current goals and data. To enhance clarity and consistency, a three-point rating scale is recommended: Continued Growth Needed, Meets Expectations, and High Performer. **C. Provider Strategy** Diane Blake led the discussion. • CM plans to expand its endoscopy services by adding a second procedure day per week, following an evaluation of space and demand. To support this expansion and strengthen long-term provider strategy, CM recommends hiring a full-time clinic physician. This investment will enhance patient access, provider morale, and operational sustainability. Recruitment aligns with, clinic operational needs, and upcoming provider retirements. A full-time physician would also support clinic call coverage and hospital backup. Bringing on a full-time physician would optimize patient access and continuity of care to meet demand and ensure sustainable operations. The board did not vote but expressed support for the plan.
Action Items	**Motion: Approve Credentialing** • Tom moved to approve; Shari seconded. Motion unanimously approved. **Motion: Approve Resolution 2025-02: Surplus Lab Equipment** • Tom moved to approve; Cary seconded. Motion unanimously approved. **Motion: Approve Artificial Intelligence (AI) Acceptable Use Policy (AUP)** • Tom moved to approve; Shari seconded. Motion unanimously approved. • The board expressed interest in ongoing updates related to AI usage at CM.
February 2025 Financials	**Marianne Vincent provided the report.** • CM achieved a net margin of $270,000, exceeding the budgeted ($433,000) loss by $703,000. Gross revenue was $459,000 above budgeted volumes. • CM maintains a positive margin of $3,000, with mostly favorable budget variances in expenses. • Depreciation is over budget by $20,000 and may be underestimated for the year. • Contractual allowances contributed positively to the margin. • Year-to-date cash collections are $800K–$900K below budget, though CM is actively addressing this. • Days in net AR increased slightly in February. CM is working closely

Docusign Envelope ID: 8B0DA45C-88C7-4A62-A44D-EC37D18245CE

	with a third-party vendor, holding biweekly meetings to improve collections and reduce delays. • 2024 audit work is nearly complete, with a HealthNet visit expected in early April to review revenue cycle management. • Cash reserves are $246,000 below budget, following slightly lower-than-expected collections in January and February. However, Medicare payments remain timely, and patient balance collections were strong for the month. • CM is optimizing Meditech functionality to enhance revenue cycle efficiency. Audit preparations are on track for March completion, and efforts to centralize contracts in third-party software are progressing as audit work winds down. • The B&O and Sales & Use Tax review by Agile Consulting was completed in early March, supporting financial accuracy and compliance.
Administrator Report	**Diane Blake provided the report.** • **Ambulance Purchase**: CM has budgeted for a new van-style ambulance and will bring the purchase to the board when ready. The order has not yet been placed but we have requested to get in line for the purchase. • **Guest Passes**: CM is moving forward with integrating guest passes into the security system, improving facility visibility and safety in case of emergencies. CM anticipates a spend of $20,000 which is budgeted. • **Strategic Planning**: CM is making strong progress on its Master Facilities Plan and Community Health Needs Assessment. While community survey responses have been slower than expected, CM remains committed to gathering valuable input and will begin focus groups once sufficient data is collected. The RFP for Master Facilities Plan is on track for release. • **State Budget:** Significant healthcare funding cuts are expected, starting at $292 million and growing to $688 million over time. This does not account for potential federal SNAP funding cuts. WSHA urges hospital leaders to engage with legislators on funding concerns. Diane will email contact information and messaging to Commissioners. • **Prior Authorization Bill:** Designed to restrict AI-driven insurance denials and ensure physician-to-physician reviews, the bill failed to pass. Efforts are underway to attach it to another bill. • **AHA Regional Policy Board Meeting**: Diane attended and emphasized the need for greater advocacy and focus on the West. Discussions also addressed the physician shortage, CMS federal appointments and federal efforts to stabilize healthcare staffing.

Board Action Items	• Tom and Cary are available for Board Quality Rounding on the following days:
	  ○ Monday 4/14, 1-3 PM
	  ○ Monday 4/21, 1-3 PM
	  ○ Thursday 4/24, 10 AM-12 PM
	• The group plans to revise committee assignments next month.

Meeting Evaluation/Commissioner Comments	• No comments.
Adjournment	• Shari moved to adjourn at 8:28 PM; Cary seconded, and the group unanimously agreed.

Signed by: Shari Day-Campbell A1777FE3BE594A3...
Shari Campbell, President

Signed by: Jessica Kendall 8A0067FD3C2B48C...
Jessica Kendall, Secretary