



Public Hospital District No.1: Board of Commissioners Meeting Agenda
Wednesday May 27, 2026 | 5:00 PM
Arleen Blackburn Conference Room and Zoom Connection

All times listed are approximates and not a true indication of the amount of time to be spent on any area.

I.	Call to Order		5:00	Shari Campbell
II.	Pledge of Allegiance		5:00	Shari Campbell
	<ul style="list-style-type: none"> • Consent Agenda 		5:00	Shari Campbell
	All consent agenda items will be approved by the Board with a single motion. Any of the following individual items may be pulled for discussion at the request of a commissioner.			
	<ul style="list-style-type: none"> • Meeting Agenda • April 22, 2026 Board Meeting Minutes • Policies: Change Order Authority 			
	Previous Month's Warrants Issued:	10128365 -- 10128496	04/11/2026 -- 05/19/2026	\$ 727,725.51
	Accounts Payable EFT Transactions:	20260053 -- 20260065	04/11/2026 -- 05/19/2026	\$ 1,031,669.77
	Accounts Payable ACH Transactions:	EP14969 -- EP15012 ; EP15050 -- EP15088 ; EP15119 -- EP15138 ; EP15153 -- EP15182 ; EP15208 -- EP15253 ; EP15286 -- EP15330	04/11/2026 -- 05/19/2026	\$ 1,582,524.23
	Payroll EFT Transactions:	31387 -- 32061	04/11/2026 -- 05/19/2026	\$ 1,645,742.65
	<ul style="list-style-type: none"> • Bad Debt: April 2026 			
III.	Community Input		5:00	Commissioners
	Public comments concerning employee performance, personnel issues, or service delivery issues related to specific patients will not be permitted during this public comment portion of the meeting. Public comments should be limited to three minutes per person.			
IV.	Introduction: Kyle Archbold, Rehab Director		5:05	Kyle Archbold
V.	2025 Financial Audit Presentation		5:10	Kami Matzek, DZA
VI.	CM Values		5:50	Diane Blake
VII.	<u>Committee Reports</u>		5:55	
	a. Part-time Resident Advisory Council (PTRAC)			Shari Campbell
	<ul style="list-style-type: none"> • MOTION: Approve PTRAC Member Appointments 			
	b. Medical Staff			Shari Campbell
	c. Community Outreach and Awareness			Shari Campbell
	d. Quality Oversight Committee			Jessica Kendall
VIII.	<u>Discussion</u>		6:35	Diane Blake
	a. Master Facilities Plan Update			
IX.	<u>Action Items</u>		6:55	Commissioners
	a. MOTION: Approve Credentialing			
	b. MOTION: Approve Community Appointments to Board Committees			
	c. MOTION: Resolution 2026-07: Surplus Ambulances and Equipment			
X.	April 2026 Financial Report		7:05	Marianne Vincent
XI.	Administrator Report		7:10	Diane Blake
XII.	Board Follow Up Items / Meeting Evaluation / Commissioner Comments		7:30	Commissioners
	Roundtable discussion to evaluate meeting topics and identify opportunities for improvement.			
XIII.	Adjournment		7:35	Shari Campbell

BOARD CALENDAR REMINDERS

Date	Event	Commissioners (Max 2 for non-Open Public Meetings)	Location	Time
June 17, 2026	CMF Board Meeting		ABC Room	9:00 AM-11:00 AM
June 22, 2026	CMF Annual Golf Tournament		Kahler Mountain Club	All Day
June 24, 2026	Board Meeting		ABC Room	5:00 PM
June 28, 2026- July 1, 2026	WSHA Conference		Chelan, WA	All Day
July 15, 2026	CMF Board Meeting		ABC Room	9:00 AM-11:00 AM
July 22, 2026	Board Meeting		ABC Room	5:00 PM
August 5, 2026	Medical Staff		ABC Room	7:00 AM – 8:30 AM
August 10, 2026	Quality Oversight Committee	Jessica & Dr. Knight	Clinic Conference Room	10:00 AM – 12:00 PM
August 19, 2026	CMF Board Meeting		ABC Room	9:00 AM-11:00 AM
August 20, 2026	Community Block Party		Osborn Playfield	4:00 PM – 7:00 PM
September 16, 2026	CMF Board Meeting		ABC Room	9:00 AM-11:00 AM
September 23, 2026	Board Meeting		ABC Room	5:00 PM
October 7, 2026	Medical Staff		ABC Room	7:00 AM – 8:30 AM
October 21, 2026	CMF Board Meeting		ABC Room	9:00 AM-11:00 AM
October 24, 2026	Part-time Resident Advisory Council		ABC Room	9:30 AM-12:00 PM
October 28, 2026	Board Meeting		ABC Room	5:00 PM
November 11, 2026	CMF Board Meeting		ABC Room	9:00 AM-11:00 AM
November 16, 2026	Quality Oversight Committee	Jessica & Dr. Knight	Clinic Conference Room	10:00 AM – 12:00 PM
November 17, 2026	Community Engagement Night		Leavenworth Festhalle	4:00 PM – 7:00 PM
November 18, 2026	Board Meeting		ABC Room	5:00 PM
December 9, 2026	CMF Board Meeting		TBD	TBD
December 16, 2026	Board Meeting		ABC Room	5:00 PM

Values

Commitment – We demonstrate our pursuit of individual and organizational development by always going above and beyond to find the answer, discover the cause, and advocate the most appropriate course of action.

Community – We demonstrate our effectiveness and quality in complete transparency with each other and in line with the values of our medical center.

Empowerment – We prove our promise to patients and our dedication to both organization and community through the manner in which we empower each other and carry out each action.

Integrity – We set a strong example of behavioral and ethical standards by demonstrating our accountability to patient needs and our devotion to performing alongside one another as we exhibit our high standards each and every day.

Quality – We demonstrate an exceptional and enduring commitment to excellence. We are devoted to processes and systems that align our actions to excellence, compassion and effectiveness on a daily basis.

Respect – We embrace equality on a daily basis through positive, personal interactions and recognize the unique value within each of our colleagues, patients, and ourselves.

Transparency – We demonstrate complete openness by providing clear, timely and trusted information that shapes the health, safety, well-being and stability of each other and our community.

AGENDA / PACKET EXPLANATION

For Meeting on May 27, 2026

Below is an explanation of agenda items for the upcoming Board meeting for which you may find pre-explanation helpful.

- **Consent Agenda** – Please feel free to connect with Marianne or Diane with any questions in advance of Wednesday’s meeting and / or pull individual items from the consent agenda at the meeting, should you wish to discuss.
- **2025 Financial Audit Presentation**
 - Kami Matzek, with Dingus, Zarecor and Associates, the firm who performs our audit, will be in attendance to present our 2025 audited financials. Electronic copies of both the audited financials and the financial indicators are included as attachments via email. Please review in advance of the meeting and come with any questions you may have.
- **Committee Reports**
 - Part-time Resident Advisory Council (PTRAC) – Included in your packet is the agenda from the most recent meeting, to inform Shari’s report. Additionally included in your packet is a list of PTRAC members who are coming up for reappointment. The resolution which established the PTRAC requires the CM Board of Commissioners to vote on appointments and reappointments, and there is a motion proposed on the agenda for that purpose.
 - Medical Staff – No documents are included in your packet for this item. Shari, who attended, will provide a verbal report.
 - Community Outreach and Awareness Committee (COAC) – Included in your packet is the agenda from the most recent meeting as well as second quarter talking points, to inform Shari’s report.
 - Quality Oversight Committee (QOC) – Included in your packet is the agenda from the most recent QOC meeting as well as the finalized Quality and Safety Message Framework & Proof Points, to inform Jessica’s report. The messaging framework has been discussed conceptually at a previous Board meeting and has been updated by both COAC and QOC. This document is intended to summarize the many ways CM engages in quality and safety work and to provide a framework for commissioners to speak to.
- **Discussion**
 - Master Facility Plan Update – No documents are included in your packet for this item. Management will walk through a presentation of what has occurred since the April meeting, including sharing anticipated timelines for what comes next.
- **Action Items**
 - Credentialing – Included in your packet is a document with a list of providers for your consideration for credentialing approval.
 - Approve Community Appointments to Board Committees – No documents are included in the packet for this item. Commissioners received a resume earlier

for a community member who is interested in serving on the Community Outreach and Awareness Committee (COAC), and that committee is eager to have this community member participate. Both COAC and Governance Committees have discussed and recommend appointment of this community member to COAC.

- Resolution 2026-07 – Included in your packet is a resolution to surplus two ambulances and a stretcher. As a reminder, state law requires Board approval to surplus District assets such as these. The two ambulances were replaced by earlier purchases and have no remaining usefulness for CM, so management would like to officially remove them from our fleet. The stretcher has also already been replaced and is of an age that it needs to just be disposed of.
- **April 2026 Financial Reports** – Included in your packet are the financial reports for April, to inform Marianne's report.

Further Notes

- As you review your packet, please be thinking about strategic questions and ways to engage in strategic discussion as we move through the meeting.
- For those of you wondering why we are not having an executive session in May to discuss the sale of the river property, this is an update to let you know we are working to be able to hopefully have that conversation in June. It is taking us additional time to work through the requirements to meet public hospital district regulations around selling a property, including obtaining three independent valuations. We believe it's essential to be able to list the property for sale without delay, and we are working to be able to do so hopefully immediately following the June Board meeting.



Minutes of the Board of Commissioners Meeting
Chelan County Public Hospital District No. 1
Administration Conference Room & Zoom Connection
April 22, 2026

Present: Shari Campbell, President; Cary Ecker, Vice President; Jessica Kendall, Commissioner; Dr. Jesse Knight, Commissioner; Julie Pankow, Commissioner; Diane Blake, Chief Executive Officer; Melissa Grimm, Chief Human Resources Officer; Natasha Piestrup, Senior Director of Nursing; Whitney Lak, Senior Director Rural Health Clinic; Megan Baker, Executive Assistant

Zoom: Mike Stanford, EMS; Janeth Baltzar-Lopez, Financial Counselor; Lester Stoltz, EMS

Topics	Actions/Discussions
Call to Order	<ul style="list-style-type: none"> President Shari Campbell called the meeting to order at 5:05 PM and then Melissa led the Pledge of Allegiance.
Consent Agenda	<ul style="list-style-type: none"> Cary moved to approve the consent agenda; Dr. Knight seconded the motion; motion unanimously approved.
Community Input	<ul style="list-style-type: none"> None
CM Values	<p>Diane Blake provided the report.</p> <ul style="list-style-type: none"> Diane shared several reflections highlighting Cascade Medical's Shared Values of Commitment, Community, Quality, and Respect. Natasha and Molly were recognized for their responsiveness and generosity with their time. Melissa was acknowledged for hosting Cashmere High School students and her ongoing commitment to developing others and building community connections. Rachel and Jessica (Commissioner) were also recognized for connecting with a commissioner from another hospital and sharing insights about CM's quality program.
Committee Reports	<p>A. Governance Committee Shari Campbell provided the report.</p> <ul style="list-style-type: none"> There is an opportunity to update and strengthen the New Commissioner Orientation policy and handbook. The group discussed potential committee and community member appointments, including Julie to the Finance Committee, as well as broader opportunities for involvement on the Finance and COAC Committees. Initial planning for the Board's annual retreat is underway, including a dinner the evening prior and coordination of scheduling. A Board self-assessment is planned for 2027, allowing additional time for newer members to become fully acclimated. <p>MOTION: Approve Board Committee & Liaison Assignments</p> <ul style="list-style-type: none"> Cary made a motion to appoint Julie Pankow to the Finance Committee. Jessica seconded and the Board unanimously approved. Cary made a motion to appoint Doug Stockwell, Community Member, to the Finance Committee. Julie seconded and the Board unanimously approved. <p>B. Finance Committee Cary Ecker provided the report.</p> <ul style="list-style-type: none"> The committee reviewed the Change Order Authority policy. Q1 financial performance is below budget but consistent with 2025 year-to-date trends, with recovery anticipated. Clinic volumes are strong and trending ahead of last year. The long-term planning document will be updated to reflect the recent property acquisition. Financial Pillar priorities were discussed, including ongoing parking planning, anticipated margin impacts from the purchase, and Rehab Services performance, which is currently below target but improving. The group also discussed potential appointment of a community member to the Finance Committee, along with updates on ADA and website compliance and medical necessity initiatives.

	<p>C. Board Quality Rounding Julie Pankow and Dr. Jesse Knight</p> <ul style="list-style-type: none"> • Clinic: Improving Medicare Annual Wellness Visit Rate <ul style="list-style-type: none"> ○ Efforts are underway to increase participation in Medicare Annual Wellness Visits, which focus on preventive care and long-term health planning. Early results show improvement in completion rates. • Microscopic Quality Controls (QCs) Performed Daily <ul style="list-style-type: none"> ○ Daily quality control processes are in place to support accuracy and compliance, with ongoing coordination with the Department of Health.
<p>Discussion</p>	<p>A. Q1 Organizational Dashboard Review. Diane Blake led the review.</p> <ul style="list-style-type: none"> • The group discussed CM's approach to tracking market share, using CHNA population estimates compared to monthly patient panel counts. Market share continues to trend upward, increasing from the low 40% range to 45.2%, with continued progress toward the year-end goal of 55%. Cash projections were also reviewed, and projections will not be met in 2026 due to property acquisition. • Rehab visits are trending ahead of prior periods; however, efforts will continue to make progress on service line financial performance. Efforts to improve include schedule optimization to increase efficiency and throughput. <p>B. Master Facility Plan Progress & Next Steps Diane Blake led the discussion.</p> <ul style="list-style-type: none"> • Diane provided an update on Master Facilities Planning efforts to date in 2026, including the purchase of the property with cash at closing on April 9, re-keying the property upon assuming ownership, and developing a maintenance plan for the additions. Current efforts are focused on surplus of the river property following Board approval, developing a plan for the 9th Street property, and laying the groundwork for the broader facilities project. In the coming months, the Board will engage in focused education on financing, gain insight into the broader communication approach, and revisit the Master Facilities Plan recommendations to refine next steps as needed.
<p>Action Items</p>	<p>MOTION: Approve Credentialing</p> <ul style="list-style-type: none"> • Credentialing Candidates: <ul style="list-style-type: none"> ○ Ed Lopez, PA-C ○ Tai Manely, PA-C ○ Kevin Glover, MD ○ Andrew Ciccarelli, MD ○ Nidal Dabbasi, MD ○ Adham Shoujaa, MD ○ Rhett Smith, MD ○ Colin Thompson, MD ○ Brian Zhu, MD ○ John Creasy, MD • A motion was made by Dr. Knight, seconded by Jessica, and unanimously approved. <p>MOTION: Approve CHNA Work Plan</p> <ul style="list-style-type: none"> • A motion was made by Cary, seconded by Julie, and unanimously approved. <p>MOTION: Approve Resolution 2026-05: Surplus Property</p> <ul style="list-style-type: none"> • Diane presented a rationale to support the recommendation to surplus the recently acquired riverfront property. • A motion was made by Dr. Knight, seconded by Cary, and unanimously approved. <p>MOTION: Approve Resolution 2026-06: Surplus Monitors</p> <ul style="list-style-type: none"> • A motion was made by Cary, seconded by Jessica, and unanimously approved.
<p>Break</p>	<p>The group took a break at 6:35 PM and resumed at 6:50 PM.</p>

Q1 2026 Financial Reports	<p>Diane Blake led the report.</p> <ul style="list-style-type: none"> • Revenue: Gross revenue for the quarter was lower, consistent with the same period last year. Q1 was impacted by timing delays in Medicare payments, as well as pending receipts from the AZ Wells Trust, SNAP program, and 340B program. • Contractual Allowance: An adjustment was made to the contractual allowance methodology based on year-end 2025 trends to more accurately reflect expected collections. • Operating Expenses: Expenses came in under budget by \$603K for the quarter. • Inpatient Volumes: There was a period of seven consecutive days with no inpatients, potentially influenced in part by lower regional surgical activity during that timeframe. This impacted late March revenue and will impact April's financial performance. • Operating Margin: Overall margin is approximately (\$465K) behind budget year-to-date. • Workforce: The clinic currently has an open physician position, and work is underway to address the anticipated departure of Dr. Kendall. • Cash Position: Cash receipts in Q1 were impacted by a \$325K earnest money payment related to the LOGE property acquisition. Excluding this one-time expense, cash performance would have been slightly ahead of budget. • Cash Growth: Despite timing impacts with some revenue, cash growth for Q1 exceeded established targets. • Revenue Cycle: Days in net accounts receivable have improved, reflecting strong performance in billing and collections processes.
Administrator Report	<p>Diane Blake provided the report.</p> <ul style="list-style-type: none"> • Rural Health Transformation Program: Cascade Medical will receive no-cost support from the Rural Collaborative for chargemaster work, which aligns with planned efforts. Additional funding through WSHA is anticipated; however, the application has not yet been released. In the interim, CM is identifying priority projects for potential funding. • Recruitment Update: An offer has been extended to an Emergency Department physician for a combined full-time and Medical Director role. Recruitment for a full-time physician and Clinic Medical Director remains ongoing, with the approach currently being reassessed to support successful placement. In the interim, Dr. Hoefler is serving as a virtual, fractional Medical Director. • Leadership Update: CM looks forward to welcoming Glenn Adams as Chief Operating Officer in June. He will be on site this week to begin orientation and is scheduled to officially start on June 10.
Board Follow Up Items / Meeting Evaluation / Commissioner Comments	<ul style="list-style-type: none"> • Please check your email and calendars, let Megan know if you want to attend meetings.
Executive Session: Performance of a Public Employee (RCW 42.30.110(1)(g))	<ul style="list-style-type: none"> • Shari called the executive session to order at 7:20 PM for 30 minutes. • At 7:50 PM, the group extended the meeting for an additional 5 minutes. • The group exited the executive session at 7:55 PM.
Adjournment	<ul style="list-style-type: none"> • Jessica moved to adjourn the meeting at 7:56 PM, Dr. Knight seconded, and the group unanimously approved.

Shari Campbell, President

Jessica Kendall, Secretary



Change Order Authority

POLICY:

1. In order to facilitate and expedite construction projects, the Board of Commissioners delegate authority for approving change orders according to the following guidelines: whereas (X) designates the individual with authority to sign change orders
2. Project Manager will keep a change order log and present this on a regular basis to the Board.
3. The change order log shall identify the nature, cost and time impacts of all change orders.

PROCEDURE:

Change Order Level	Project Manager and/or Facility Consultant	Administrator	Board
No cost, no time impact	X		
Up to \$25,000 and within project budget and time delay less than working 10 days		X	
Greater than \$25,000, or exceeds project budget or time delay greater than working 10 days (may require special board meeting)			X

FINANCIAL ACCOUNTING
WARRANTS / EFTS ISSUED

Commissioner Meeting: May 27, 2026

Below is a listing of the Accounts Payable warrants and EFT/ACH transactions issued since the last Board of Commissioners meeting along with the payroll EFT transactions since the last Board of Commissioners meeting.

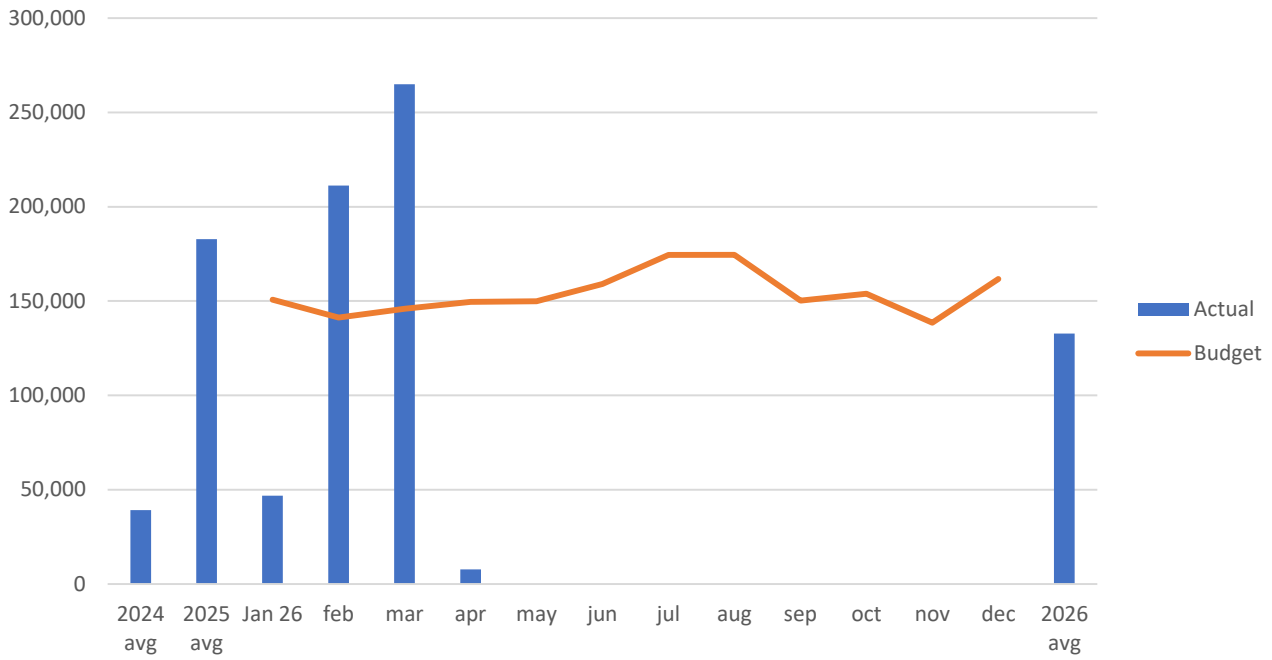
Accounts Payable Warrant Numbers	10128365 – 10128496	\$727,725.51	04/11/2026 – 05/19/2026
Accounts Payable EFT Transactions	20260053 – 20260065	\$1,031,669.77	04/11/2026 – 05/19/2026
Accounts Payable ACH Transactions	EP14969 – EP15012 EP15050 – EP15088 EP15119 – EP15138 EP15153 – EP15182 EP15208 – EP15253 EP15286 – EP15330	\$1,582,524.23	04/11/2026 – 05/19/2026
Payroll EFT Transactions	31387 – 32061	\$1,645,742.65	04/11/2026 – 05/19/2026
Grand Total		\$4,987,662.16	

Note: The ACH transaction numbers are not reported sequentially; there is a gap between batch runs.

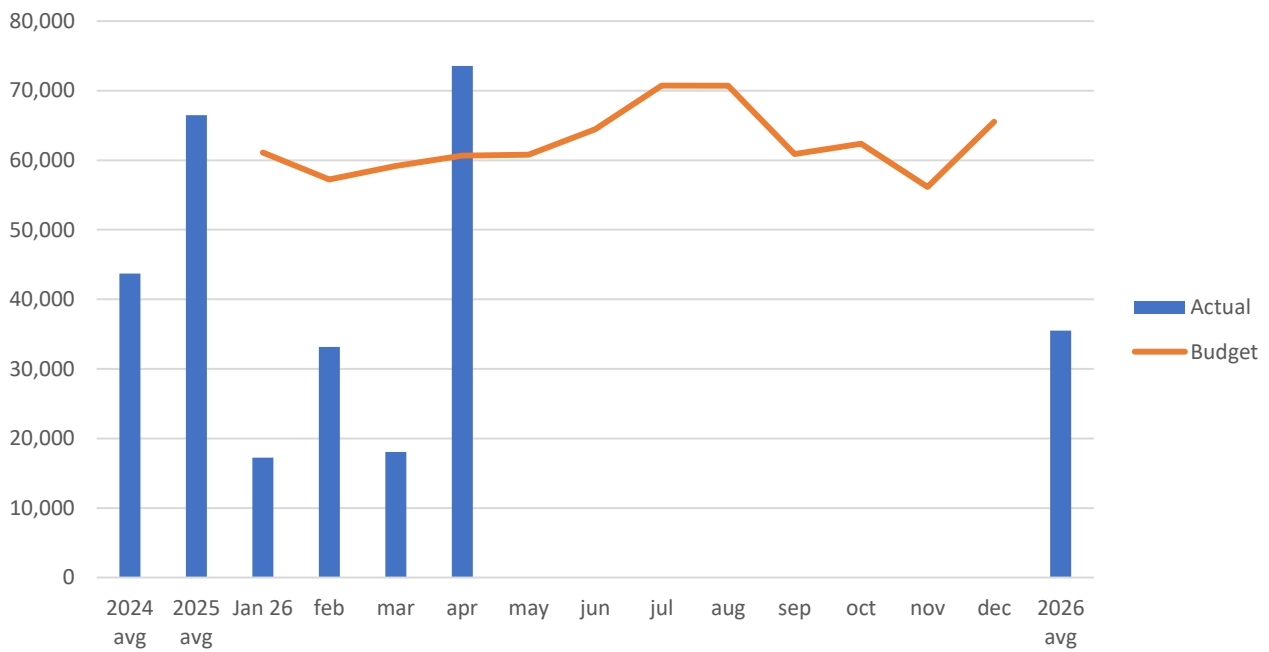
Prepared by:

Kathy Jo Evans
Director of Accounting

Net Account Balances Sent to Collections



CFSP/Financial Assistance Discounts



Cascade Medical
 Bad Debt Write Offs
 Financial Assistance Program Discounts

Month April, 2026

Net Bad Debt Write-Offs for Board Approval	\$	7,807.07
CFSP/Financial Assistance Program Discounts for Board Approval	\$	73,549.78

Bad Debt/ Financial Assistance Supplemental Information		
Bad Debt Write-Offs	Sent to Collection Agency	115,793.23
	less: pullback from Agency due to receipt of payments	(107,986.16)
	Net Bad Debt Write-Offs	7,807.07
CFSP/Financial Assistance Applications - Discounts Approved	\$	73,549.78
Total		81,356.85



Part-time Resident Advisory Council Meeting

April 25, 2026 | 10:00 AM

Arleen Blackburn Conference Room & Zoom Connection

	Optional Social Time		9:30 AM
I.	Call to Order	Neil McReynolds, President	10:00 AM
II.	Introductions	Neil McReynolds, President	
III.	Approval of October 18, 2025 Minutes	Council Members	
	Discussion		10:10 AM
IV.	Cascade Medical		
	o Value Story	Diane Blake, CEO	
	o Cascade Medical & Industry Updates	Diane Blake, CEO	
V.	Foundation Report	Terri Judy, Christian and Valarie Wilkin	10:30 AM
VII.	Council Input	Council Members	10:40 AM
	<ul style="list-style-type: none"> • Expanding CM's Reach: As we work to grow our market share, we're exploring ways to better connect community members with CM for their primary care. Please see attached document for questions we'll be asking. • Master Facilities Plan Update: CM recently purchased property which will allow for expansion of parking and future healthcare services. As we begin to prepare for talking with our community about what's next, we'd appreciate hearing from you about what aspects resonate the most positively with you, what concerns you have or where clarity about facts or plan may be most helpful. Included in the packet is a slide deck with information, including some question prompts. 		
VIII.	Council Business	Neil McReynolds, President	11:35 AM
	<ul style="list-style-type: none"> • Council officer election • Council recruitment efforts 		
IX	General Q&A Council Thoughts	Council Members	11:50 AM
X.	Adjournment	Neil McReynolds, President	12:00 PM
	Lunch – In Person or To Go options		12:00 PM

Future Meetings:

2026	2027	2028
	April 24 th	April 29 th
October 24 th	October 16 th	October 21 st



CASCADE MEDICAL
PARTNERS IN YOUR HEALTH

Part-time Resident Advisory Council Member Recommendations:

The Part-Time Resident Advisory Council recommends appointment of the following individuals to new terms on the council.

- Tracy Owen: Term 5/1/2026 - 4/30/2029
- Arnie Schoenmoser: Term 5/1/2026 - 4/30/2029
- Juli Bowen: Term 5/1/2026 - 4/30/2029
- Jane Mounsey: Term 5/1/2026 - 4/30/2029
- Ken Hamm: Term 5/1/2026 - 4/30/2029
- Gerry Schellenberg: Term 5/1/2026 - 4/30/2029



AGENDA
Community Outreach and Awareness
May 13, 2026
12:00 PM-2:00 PM
Administration Conference Room

Agenda Item		Time
1.	Call to Order	1:00 PM
2.	Consent Agenda Approval <ul style="list-style-type: none">• May 13, 2026 Agenda• February 11, 2026 Minutes	1:00 PM
Committee Work		
1.	Consider recommendation of additional community member appointment to committee	1:00 PM
2.	Strategic lens on marketing and communication <ul style="list-style-type: none">• Discuss feedback from community conversations around family medicine question prompts as well as other strategic input/perspectives related to growing family medicine market share• Review data inputs related to marketing and communication work	1:10 PM
3.	Update committee on master facility plan work and discuss impressions to help inform future / ongoing communication plan for this topic	1:40 PM
4.	Check-in on outreach plan for board and organization, ensure strategic priorities are met <ul style="list-style-type: none">• Review outreach opportunities, provide guidance on board participation• Update on Q1 talking points and review proposed Q2 board talking points	2:10 PM
5.	Group question/discussion – Broadly what have you heard in the community about Cascade Medical that we should be aware of?	2:30 PM
6.	Discuss collection of community feedback and what further strategic opportunities exist	2:40 PM
7.	Update Committee on plan for mission & vision work	2:50 PM
8.	Set next meeting date	2:55 PM
Adjournment		
1.	Adjournment	3:00 PM

Materials provided in advance of meeting along with agenda:

- Minutes from February 11, 2026, meeting
- Community member resume
- COAC Community Feedback on Care – **Includes Homework Opportunity**
- Master facility plan summary slides with questions
- Q1 Board talking points
- Draft Q2 Board talking points with upcoming outreach opportunities

Plans for LOGE Property

The opportunity to purchase the LOGE property came together quickly, and we moved forward because it was the most cost-effective way to respond to our community's growing needs and gain the space needed for future expansion. As we evaluate next steps, we are being thoughtful and intentional in our planning and will continue to keep the City and community informed as plans develop.

- Our greatest need has been additional space for parking and future service expansion to meet the needs of our growing community.
- Purchasing the LOGE property allows Cascade Medical to remain in its current location while creating room to grow key services locally.
- Future expansion plans will support growth in several areas, including:
 - Expanded laboratory space with additional onsite testing capabilities
 - Growth of our rehabilitation department
 - Additional infrastructure to support long-term healthcare needs
- The riverfront properties included in the purchase are expected to be sold in the future.
- We expect to have more updates available this fall and will share them as plans evolve.

Expanded Access & Growing Medical Team

Cascade Medical is continuing to expand access to care while meeting the needs of our growing community, with new patient appointments often available as soon as the same week to help patients establish care with a primary care provider quickly and easily.

- We are excited to welcome two new family medicine providers this fall:
 - Dannica Ballard, DO
 - Connor Dixon, MD
- We also want to thank the community for giving Justin Stoltzfus, FNP-BC, such a warm welcome. Patients have already shared appreciation for his attention to detail, compassionate care, and the time he gives each patient — and he is great with kids. Justin is currently accepting new patients.
- For planned care, Cascade Medical provides services for the whole family — from newborn and pediatric care to women's health and premenopausal care, colonoscopies, mammograms, and more.
- We also offer crucial imaging services, including MRI and CT scans, to help get to the bottom of those medical needs that weren't part of the plan and require a deeper look than can meet the eye.

Update on Dr. Lauren Kendall

Dr. Lauren Kendall has accepted a wonderful opportunity to continue practicing medicine in Canada and has been thoughtfully transitioning the care of her patients to the rest of her medical team. We are grateful for the care she brought to our community, and we know she will make a great impact in this next chapter. Thank you, Dr. Kendall!



A G E N D A
Board Quality Oversight Committee
May 18th, 2026
9:30 AM – 11:30 AM
Admin Conference Room

The documents contained in this file are part of the performance/quality improvement and peer review programs to review the services rendered in the hospital/clinic areas, both retrospectively and prospectively, in order to improve the quality of medical care of patients and to prevent medical malpractice (RCW 70.41.200 (1) (a)).

Therefore, **all** information following the agenda is confidential and protected under: [RCW 4.24.250](#); [RCW 70.41.200](#); and [Senate Bill 5666](#)

Agenda Item		Time
1.	Call to Order	9:30 AM
2.	Consent Agenda Approval <ul style="list-style-type: none">May 18, 2026, AgendaFebruary 9, 2026, Minutes	9:30 AM
Committee Work		
1.	Review Action Items	9:30 AM
2.	Patient Story	9:35 AM
3.	Board Quality Rounding Review	9:45 AM
4.	Organizational Performance - Data Outliers	9:55 AM
5.	Updates on Prioritized Process Improvement Projects	10:05 AM
6.	Proposed Messaging Tool	10:45 AM
7.	Q1 Quality Committee Reports	11:00 AM
8.	Confirm Q3 Meeting Date	11:15 AM
9.	Provider Credentialing	11:25 AM
Adjournment		
1.	Adjournment	11:30 AM

Quality – *We demonstrate an exceptional and enduring commitment to excellence. We are devoted to processes and systems that align our actions to excellence, compassion, and effectiveness on a daily basis.*

Materials provided in advance of meeting along with agenda:

- February 9, 2026, Minutes
- Board Quality Rounding Documents
 - Clinic
 - Laboratory
- Prioritized Process Improvement Projects – SMART Goal and Data
 - Documentation of Current Medications Rate
 - Screening for Depression and Follow-Up Rate
 - Annual Wellness Visit Rate
 - Average Inpatient Length of Stay
- Proposed Messaging Tool

DRAFT

Quality and Safety Message Framework & Proof Points

March 17, 2026

Providing safe, high quality and accessible care to the community is our top priority at Cascade Medical. We demonstrate this commitment by:

1. Participating actively in external, expert reviews of our care and services.
 - a. DOH inspection for hospital, clinic, and lab services
 - b. Imaging accreditations
 - c. AWPHD Quality Award
 - d. External peer review of clinical services
 - e. Pursuit of DNV healthcare accreditation, which involves annual, outside reviews for continuous improvement

2. Involving everyone in our organization – from providers to nurses and medical technicians to our maintenance team, managers and leaders – in the daily work of quality and safety.
 - a. Antimicrobial Stewardship Committee
 - b. Infection Control Committee
 - c. Emergency Care Committee
 - d. Safety Committee
 - e. Safe Patient Handling Committee
 - f. Utilization Management Committee
 - g. Swing Bed Committee
 - h. Patient and Family Engagement Committee
 - i. Pharmacy and Therapeutics Committee
 - j. Patient Equity and Access Committee
 - k. Internal Audits/Chart Reviews
 - l. Department-based quality initiatives
 - m. Rural health collaborative and networking for shared learning
 - n. Utilizing best practice/research and data as the foundation to guide our direction and decision making related to patient safety and quality for the organization.

3. Innovating our care and services to better serve our patients and the community.
 - a. Team-based care so patients get care when they need it and the entire team is able to understand their unique needs, and care for them.

- b. Mobile health clinic delivering care to outlying locations
- c. Providing cardiac rehab at Cascade because one of the biggest barriers to care is distance/travel
- d. Stroke care certification and collaboration with Harborview
- e. Expanding services locally to minimize delays and reduce travel for locals including: MRI, Ultrasound, Endoscopy and Dermatology.
- f. Adopting AI tool to help providers focus on one-to-one, personalized care while capturing accurate visit notes.
- g. Training third year Med students in partnership with UW Medicine.
- h. Mobile Integrated Health (MIH) – providing care to the community for those identified with barriers to care and/or access.

Credentialing Approvals

Locum Tenens: (90-days)

- Caylon Haggard, PA-C
- Bradley Youngers, PA-C

CM Active Privileges (2-years)

- Mara Merritt, DO

CM Provisional Privileges (6-months)

- Paul Lee, MD

Cascade Medical's credentialing process has been followed for these providers.

RESOLUTION NO. 2026-07

CHELAN COUNTY PUBLIC HOSPITAL DISTRICT NO. 1
CHELAN COUNTY, WASHINGTON dba CASCADE MEDICAL

A RESOLUTION of the Board of Commissioners of Public Hospital District No. 1 of Chelan County, Washington (the “District”), relating to the finances of the District; authorizing the surplus of ambulances and equipment identified in Exhibit A.

WHEREAS, the members of the commission approved a motion for the surplus of equipment at a regular meeting of the board on May 27, 2026.

WHEREAS, the members of the commission of the district, after due consideration, declare that the equipment listed in Exhibit A is surplus to the needs of the District, agree to sell the ambulances and dispose of the equipment.

BE IT RESOLVED BY THE COMMISSION OF PUBLIC HOSPITAL DISTRICT NO 1, CHELAN COUNTY, WASHINGTON, AS FOLLOWS:

It is hereby found and declared that the ambulances and equipment be surplus.

ADOPTED and APPROVED by the Commission of Chelan County Public Hospital District No. 1, Chelan County, Washington, at an open public meeting thereof held in compliance with the requirements of the Open Public Meetings Act this 27th day of May 2026, the following commissioners being present and voting in favor of this resolution.

Board President, Shari Campbell

Board Vice President, Cary Ecker

Commissioner, Jessica Kendall

Commissioner, Dr. Jesse Knight

Commissioner, Julie Pankow



Surplus Equipment: Exhibit A

Description / Model Number	Date Acquired	Serial No.	Asset Tag	Market Value	Book Value	Recommendation
2015 GMC Sierra 3500 Type 1 Ambulance	10/2015	VIN: 1GD322C83FF50596		\$500.00	\$0	Sell
2016 GMC Sierra 3500 Type 1 Ambulance	10/2016	VIN: 1GD32WC83GF167614		\$500.00	\$0	Sell
OB/GYN Gyni Stretcher	09/2010	1009031539	02382	\$0	\$0	Dispose

Accompanying Notes for the April 2026 Financial Statements

April Financial Statements –Current Month Summary

The April net margin of (\$133,000) exceeded the budgeted margin of \$218,000 by (\$351,000). Gross revenue of \$3,785,000 missed budgeted volumes by (\$258,000). Operating expenses for April were under budget by \$37,000.

Revenue and Expense Variances

1. Professional fees were over budget (\$60,000) in April due to continuation of consulting fees for Meditech optimization as well as executive recruiting expenses.
2. Purchased Services continued to be over budget (\$29,000) due to MRI rental fees being higher than budgeted as a result of higher than budgeted MRI volumes, settlement of a clinic vendor contract, and a timing issue for our ambulance contract with Lake Wenatchee Fire & Rescue.

Patient Statistics

Rehab visits saw its largest monthly volume for 2026 thus far with 2,984 procedures or visits performed or 30.8% more than budgeted volumes of 2,281. Clinic visits of 1,438 were 21.5% over budgeted visits of 1,183. Acute, Swing Bed, and CT ran well behind budgeted volumes for April.

Cash Receipts and Balances

April cash collections on patient accounts were \$797,000 more than budgeted and combined with April tax collections resulted in total cash collections that were \$1,226,000 more than budgeted, moving the YTD actual to budget variance to a positive position. Cash balances for the year continue to lag behind budgeted cash balances by (\$9,229,000). Our recent property purchase and the timing of capital purchases account for (\$6,713,000) of this variance in April. The remaining variance of (\$2,516,000) below budgeted cash balances was an improvement over the February budgeted cash variance of (\$2,767,000).

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 \$689,000.

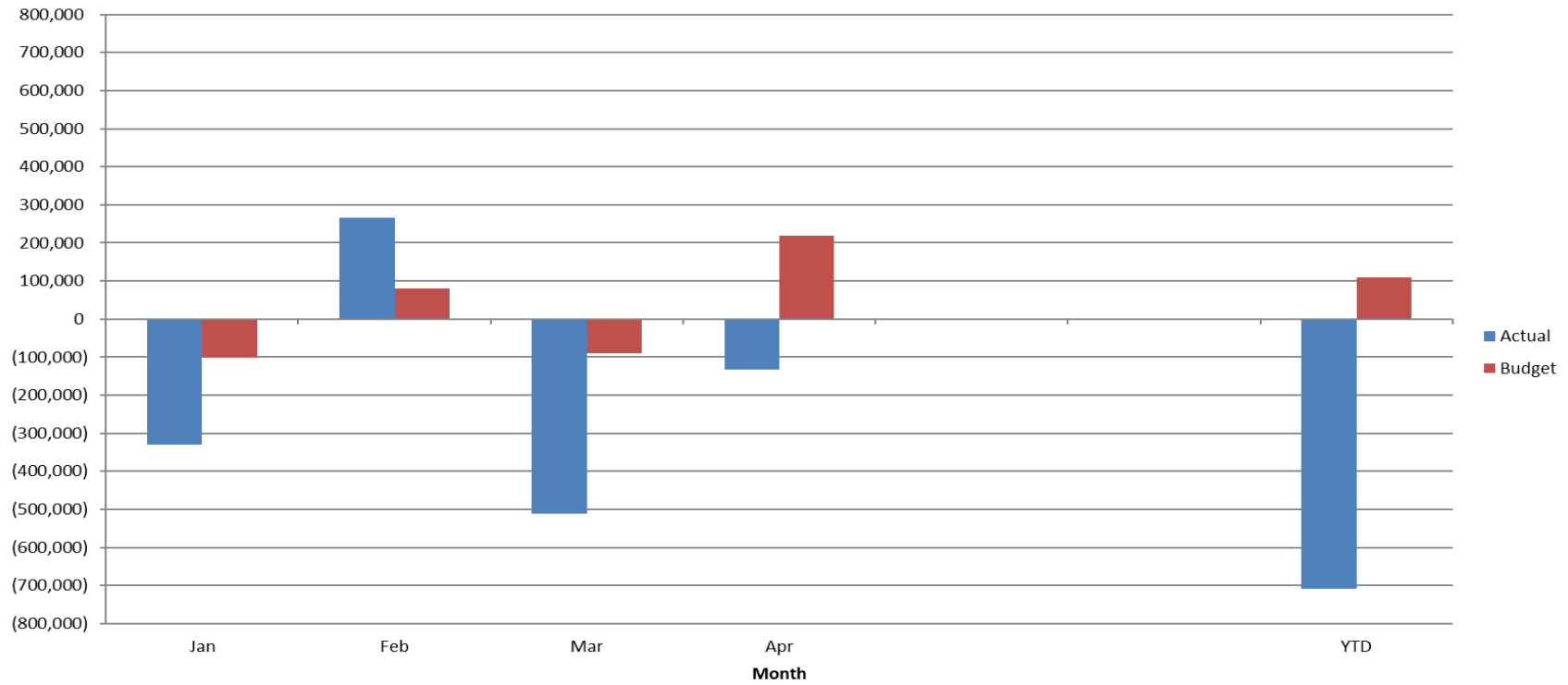
Contractual Allowance

The contractual allowance is at 47.9%. We should see this number drop in the coming months as we adjust our estimates based on our 2025 Medicare cost report results.

Final comments and Upcoming

With the recent purchase of the Loge Property, we will see additional expenses as we fold the property into the care of the facilities team. As funding from the Rural Health Transformation Program is approved, we anticipate embarking on a full review of our Chargemaster, which is the pricing for services provided to our patients.

Cascade Medical Net Surplus/(Deficit) - 2026



**Cascade Medical Center
Financial Performance Summary
Year-to-Date - April, 2026**

000's omitted

YTD April

Net Margin

Actual	(708)
Budget	<u>109</u>
Better (Worse) than Budget	(817)

Variance Analysis - favorable vs (unfavorable)

Gross Revenue - CT (\$564); SwingBed (\$346); Acute (\$259); ED (\$184); PT \$263	(1,096)
Contractual Allowances	<u>18</u>
Net Patient Revenue	(1,078)
Other Operating Revenue - SNAP (\$284); 340B (\$35); Int Inc (\$33); Rebates & Ref (\$22)	<u>(377)</u>
Total Operating Revenue	(1,455)

Expenses

Salaries & Benefits - Acute (\$101); ED Prov \$184; Clinic Prov \$95; Clinic \$79	511
Prof. Fees - HR (\$122); InfoMat (\$118); Admin (\$47); Clinic Prov \$59, Acute \$34; ED Prov \$33	(44)
Supplies - Amb \$26; Lab \$24; IT \$23; Clinic \$19; Plant \$10	96
Purchased Services/Repairs - PT (\$19); Pharm (\$18); HIM (\$17); MRI (\$16); Acute \$22	(44)
Other Operating Expenses - Depr \$84	<u>122</u>
Total Operating Expenses	641

Non-Operating Revenues & Expenses (3)

Actuals Better/(worse) than Budget (817)

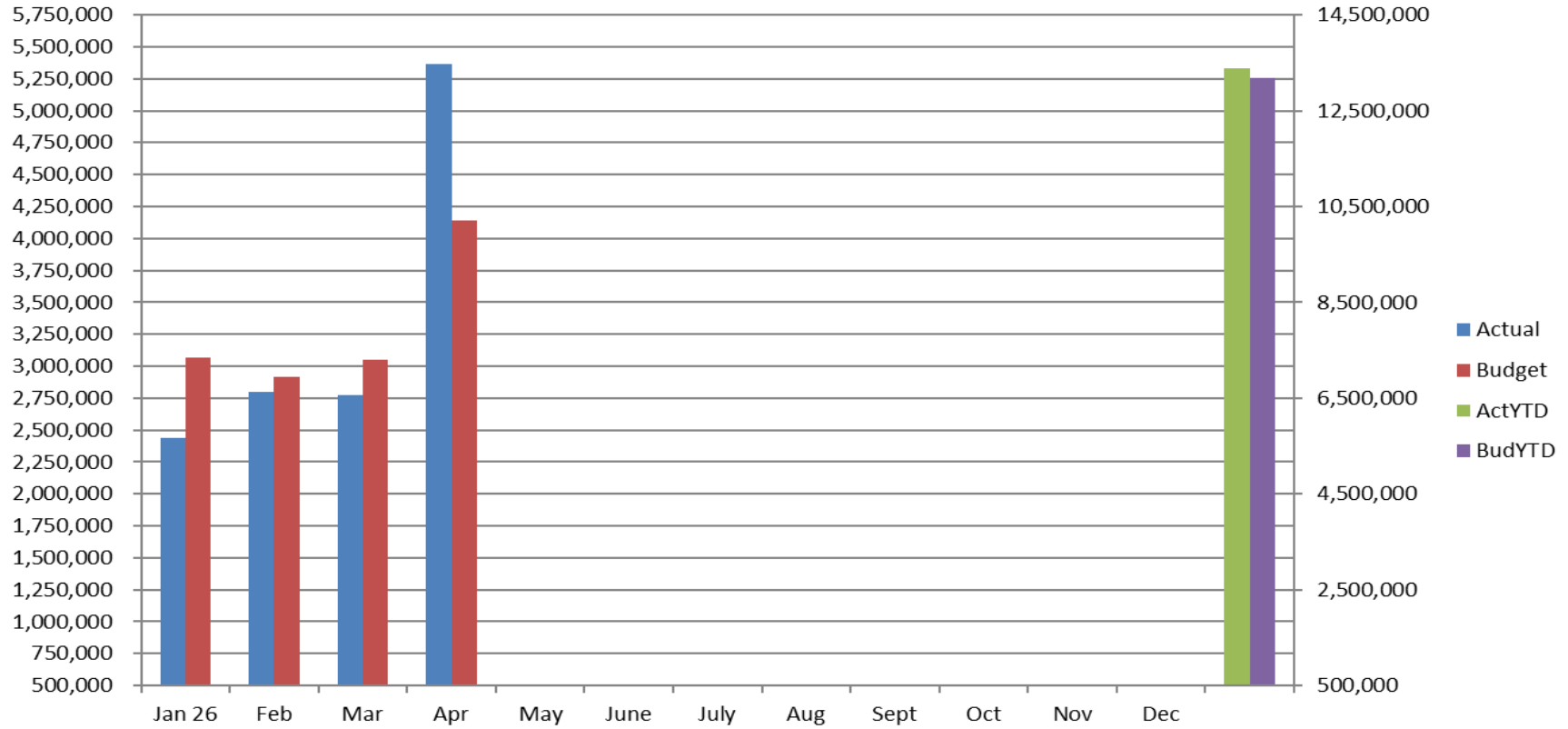
Cascade Medical Center
Statement of Revenues, Expenses and Net Income
For the Month Ending April 30, 2026

	----- Current Period -----				----- Year-to-Date -----				Prior YTD
	Actual	Budget	Variance		Actual	Budget	Variance		
Operating revenues									
Net Patient Revenue	2,563,233	2,801,603	(238,370)	-9%	9,768,424	10,846,522	(1,078,098)	-10%	10,090,228
Grants, Contribs, Other Op Revenue	99,493	249,113	(149,620)	-60%	368,855	745,452	(376,597)	-51%	367,150
Tax Levies, unrestricted	209,770	209,770	-	0%	839,080	839,080	-	0%	587,048
Total Operating Revenue	2,872,497	3,260,486	(387,989)	-12%	10,976,359	12,431,054	(1,454,695)	-12%	11,044,426
Operating expenses									
Salaries & Benefits	2,002,079	2,093,725	91,646	4%	7,829,422	8,340,186	510,764	6%	7,476,332
Professional fees	291,842	231,785	(60,057)	-26%	1,088,762	1,044,589	(44,173)	-4%	714,660
Supplies	153,055	162,631	9,576	6%	586,614	682,219	95,605	14%	585,439
Purchased services	217,541	188,644	(28,897)	-15%	832,157	788,266	(43,891)	-6%	733,511
Depreciation	165,940	183,485	17,545	10%	650,653	733,940	83,287	11%	745,886
Other Operating Expenses	267,067	274,594	7,527	3%	1,066,347	1,105,363	39,016	4%	946,830
Total operating expenses	3,097,524	3,134,864	37,340	1%	12,053,955	12,694,563	640,608	5%	11,202,657
Operating gain / (loss)	(225,027)	125,622	(350,649)	-279%	(1,077,596)	(263,509)	(814,087)	309%	(158,231)
Nonoperating revenues (expenses)									
Tax Levies, restricted	115,132	115,132	-	0%	460,528	460,528	-	0%	455,672
Interest expense on bonds	(21,191)	(21,191)	0	0%	(84,763)	(84,764)	1	0%	(93,297)
Other Non-Operating rev (exp)	(1,704)	(939)	(765)	81%	(6,320)	(3,756)	(2,564)	68%	(5,799)
Total nonoperating rev (exp), net	92,238	93,002	(764)	-1%	369,445	372,008	(2,563)	-1%	356,577
Net Income	(132,790)	218,624	(351,414)	-161%	(708,151)	108,499	(816,650)	-753%	198,346

Cascade Medical Center
Statement of Revenues, Expenses and Net Income
For the Month Ending April 30, 2026

	----- Current Period -----				----- Year-to-Date -----				Prior YTD
	Actual	Budget	Variance		Actual	Budget	Variance		
Operating revenues									
Gross Patient Revenue	3,785,198	4,042,913	(257,715)	-6%	14,779,168	15,874,689	(1,095,521)	-7%	14,044,528
less:									
Contractual Allowances	1,176,358	1,031,078	(145,280)	-14%	4,566,280	4,202,681	(363,599)	-9%	3,441,230
Reserve for Bad Debts	(18,074)	149,588	167,662	112%	375,927	587,365	211,438	36%	365,493
Reserve for Financial Assistance	63,680	60,644	(3,036)	-5%	68,537	238,121	169,584	71%	147,577
Total Deductions from Revenue	1,221,964	1,241,310	19,346	2%	5,010,744	5,028,167	17,423	0%	3,954,300
Net Patient Revenue	2,563,233	2,801,603	(238,370)	-9%	9,768,424	10,846,522	(1,078,098)	-10%	10,090,228
Grants, Contributions	32,805	2,000	30,805	1540%	48,804	41,000	7,804	19%	39,509
Other Operating Revenue	66,688	247,113	(180,425)	-73%	320,051	704,452	(384,401)	-55%	327,641
Tax Levies, unrestricted	209,770	209,770	-	0%	839,080	839,080	-	0%	587,048
Total Operating Revenue	2,872,497	3,260,486	(387,989)	-12%	10,976,359	12,431,054	(1,454,695)	-12%	11,044,426
Operating expenses									
Salaries and wages	1,636,496	1,698,230	61,734	4%	6,384,057	6,762,855	378,798	6%	6,083,914
Employee benefits	365,583	395,495	29,912	8%	1,445,365	1,577,331	131,966	8%	1,392,417
Professional fees	291,842	231,785	(60,057)	-26%	1,088,762	1,044,589	(44,173)	-4%	714,660
Supplies	153,055	162,631	9,576	6%	586,614	682,219	95,605	14%	585,439
Utilities	26,611	27,305	694	3%	115,332	107,349	(7,983)	-7%	106,225
Repairs and maintenance	27,433	19,419	(8,014)	-41%	75,225	77,676	2,451	3%	98,665
Purchased services	190,108	169,225	(20,883)	-12%	756,932	710,590	(46,342)	-7%	634,846
Continuing medical education	4,910	2,875	(2,035)	-71%	14,555	11,500	(3,055)	-27%	3,509
Other expenses	12,874	28,775	15,901	55%	95,869	116,271	20,402	18%	44,776
Dues and subscriptions	104,800	107,656	2,856	3%	440,665	453,539	12,874	3%	391,108
Travel / training / meetings	24,643	27,076	2,433	9%	95,156	94,854	(302)	0%	140,242
Leases and rentals	31,549	28,120	(3,429)	-12%	107,449	112,442	4,993	4%	74,944
Depreciation	165,940	183,485	17,545	10%	650,653	733,940	83,287	11%	745,886
Licenses and taxes	24,951	25,942	991	4%	87,310	102,028	14,718	14%	96,385
Insurance	35,404	25,626	(9,778)	-38%	104,707	102,504	(2,203)	-2%	84,336
Interest	1,326	1,219	(107)	-9%	5,304	4,876	(428)	-9%	5,304
Total operating expenses	3,097,524	3,134,864	37,340	1%	12,053,955	12,694,563	640,608	5%	11,202,657
Operating gain / (loss)	(225,027)	125,622	(350,649)	-279%	(1,077,596)	(263,509)	(814,087)	-309%	(158,231)
Nonoperating revenues (expenses)									
Tax Levies, restricted	115,132	115,132	-	0%	460,528	460,528	-	0%	455,672
Interest expense on bond financing	(21,191)	(21,191)	0	0%	(84,763)	(84,764)	1	0%	(93,297)
Gain (loss) on disposal of equipment	-	-	-	0%	-	-	-	0%	-
Investment income	66	830	(764)	-92%	757	3,320	(2,563)	-77%	1,279
Net of bond premium/amortization	(1,769)	(1,769)	(0)	0%	(7,077)	(7,076)	(1)	0%	(7,077)
CARES Funds	-	-	-	0%	-	-	-	0%	-
PPP Loan Proceeds	-	-	-	0%	-	-	-	0%	-
Total nonoperating revenues (expenses), net	92,238	93,002	(764)	-1%	369,445	372,008	(2,563)	-1%	356,577
Net Income	(132,790)	218,624	(351,414)	-161%	(708,151)	108,499	(816,650)	-753%	198,346

Cascade Medical 2026 Cash Receipts



Cascade Medical
 Statistics Summary - 2026

	YTD 2025					2026 Act	2026 Bud	Act/Bud	2026 Act	2026 Act	2026 Bud	2026 Bud	Act/Bud
	avg/mo	jan26	feb	mar	apr	mo	mo	% var	YTD Tot	avg/mo	YTD Tot	avg/mo	% var
Acute Care	39	22	47	13	8	8	59	-86.4%	90	23	140	35	-35.7%
Swing Bed	93	79	79	100	80	80	97	-17.5%	338	85	451	113	-25.1%
Laboratory tests	3,209	3,159	3,170	3,608	3,368	3,368	3,275	2.9%	13,305	3,326	12,362	3,091	7.6%
Radiology exams	352	371	391	414	412	412	371	11.1%	1,588	397	1,482	371	7.2%
CT scans	131	138	114	138	97	97	161	-39.9%	487	122	575	144	-15.4%
ED visits	320	300	291	328	305	305	291	4.8%	1,224	306	1,286	322	-4.8%
Ambulance runs	64	92	83	79	63	63	65	-3.1%	317	79	266	67	19.2%
Clinic visits	1,237	1,244	1,100	1,362	1,438	1,438	1,183	21.5%	5,144	1,286	4,985	1,246	3.2%
Rehab procedures	2,317	2,783	2,604	2,675	2,984	2,984	2,281	30.8%	11,046	2,762	8,880	2,220	24.4%

Increase (Decrease) in Cash and Cash Equivalents

Cascade Medical Center

For the Month Ending April 30, 2026

	<u>Apr-26</u>	<u>2026 YTD</u>	<u>2025 YTD</u>
<i>Cash flows from operating activities</i>			
Receipts from and on behalf of patients	\$ 3,399,148	\$ 10,886,075	\$ 10,135,158
Other receipts	\$ 35,894	\$ 386,377	\$ 188,462
Payments to & on behalf of employees	\$ (2,496,680)	\$ (7,271,279)	\$ (6,725,474)
Payments to suppliers and contractors	\$ (1,300,228)	\$ (4,837,466)	\$ (4,001,271)
Net cash gained / (used) in operating activities	\$ (361,865)	\$ (836,294)	\$ (403,125)
<i>Cash flows from noncapital financing activities</i>			
Taxation for maintenance and operations, EMS	\$ 1,529,251	\$ 1,543,360	\$ 1,185,668
Noncapital grants and contributions	\$ 32,805	\$ 48,804	\$ 5,882
Net cash provided by noncapital financing activities	\$ 1,562,056	\$ 1,592,164	\$ 1,191,550
<i>Cash flows from capital and related financing activities</i>			
Taxation for bond principal and interest	\$ 343,960	\$ 347,478	\$ 349,750
Purchase of capital assets	\$ (252,860)	\$ (810,659)	\$ (146,990)
Payments toward construction in progress	\$ (6,635,256)	\$ (6,635,256)	\$ (46,966)
Proceeds from disposal of capital assets		\$ -	\$ -
Proceeds from long-term debt		\$ -	\$ -
Principle & Interest paid on long-term debt		\$ -	\$ -
Bond maintenance & issuance costs		\$ -	\$ -
Capital grants and contributions		\$ -	\$ -
Net cash provided by capital and related financing activities	\$ (6,544,156)	\$ (7,098,437)	\$ 155,794
<i>Cash flows from investing activities</i>			
Investment Income	\$ 27,145	\$ 164,102	\$ 205,566
Net increase (decrease) in cash and cash equivalents	\$ (5,316,820)	\$ (6,178,466)	\$ 1,149,785
Cash and Cash equivalents, beginning of period	\$ 16,709,642	\$ 17,571,288	\$ 16,244,722
Cash and cash equivalents, end of period	<u>\$ 11,392,823</u>	<u>\$ 11,392,823</u>	<u>\$ 17,394,506</u>

Forecasted Statement of Cash Flows
Cascade Medical Center
For the year ending December 31, 2026

	Actual	Actual	Forecast	Forecast	Forecast	Forecast	Forecast	Forecast	Actual/Forecast	Budget
	1st Qtr	April	May	June	2nd Qtr	3rd Qtr	4th Qtr	Year End 2026		2026
Cash balance, beginning of period	\$ 17,571,288	\$ 16,709,642	\$ 11,392,823	\$ 11,755,465	\$ 16,709,642	\$ 11,525,581	\$ 11,147,553	\$ 17,571,288	\$	20,310,484
Cash available for operating needs	\$ 17,352,680	\$ 16,483,508	\$ 10,506,815	\$ 10,682,031	\$ 16,483,508	\$ 10,570,028	\$ 10,157,135	\$ 17,352,680	\$	20,117,679
Cash restricted to debt service, other restricted funds	\$ 218,608	\$ 226,134	\$ 886,007	\$ 1,073,433	\$ 226,134	\$ 955,553	\$ 990,418	\$ 218,608	\$	192,805
<i>Cash flows from operating activities</i>										
Receipts from and on behalf of patients	\$ 7,486,926	\$ 3,399,148	\$ 2,595,479	\$ 2,647,420	\$ 8,642,047	\$ 8,617,440	\$ 8,441,244	\$ 33,187,657	\$	33,083,305
Grant receipts	\$ 15,999	\$ 32,805	\$ 22,000	\$ 2,000	\$ 56,805	\$ 6,000	\$ 6,000	\$ 84,804	\$	77,000
Other receipts	\$ 350,483	\$ 35,894	\$ 53,538	\$ 66,538	\$ 155,970	\$ 302,614	\$ 312,614	\$ 1,121,681	\$	1,233,456
Payments to or on behalf of employees	\$ (4,774,599)	\$ (2,496,680)	\$ (1,895,498)	\$ (1,906,117)	\$ (6,298,295)	\$ (6,619,526)	\$ (5,651,664)	\$ (23,344,084)	\$	(24,685,273)
Payments to suppliers and contractors	\$ (3,537,239)	\$ (1,300,228)	\$ (844,758)	\$ (853,829)	\$ (2,998,814)	\$ (2,538,974)	\$ (2,441,320)	\$ (11,516,347)	\$	(10,386,634)
Net cash provided by operating activities	\$ (458,431)	\$ (329,060)	\$ (69,239)	\$ (43,988)	\$ (442,287)	\$ (232,446)	\$ 666,874	\$ (466,290)	\$	(678,146)
<i>Cash flows from noncapital financing activities</i>										
Unencumbered M & O taxation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 4,067	\$ 284,899	\$ 288,966	\$	288,966
Taxation for Emergency Medical Services	\$ 10,101	\$ 1,213,338	\$ 328,720	\$ 16,249	\$ 1,558,307	\$ 68,282	\$ 1,054,446	\$ 2,691,136	\$	2,517,240
Investment Income	\$ 136,956	\$ 27,145	\$ 51,330	\$ 51,330	\$ 129,805	\$ 153,990	\$ 153,990	\$ 574,742	\$	615,960
Donations	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 90,000	\$ 90,000	\$	90,000
Net cash provided by noncapital financing activities	\$ 147,058	\$ 1,240,483	\$ 380,050	\$ 67,579	\$ 1,688,112	\$ 226,339	\$ 1,583,335	\$ 3,644,844	\$	3,512,166
Proceeds from Long Term Debt	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$	-
Less Funds Expended for Capital Purchases	\$ (557,799)	\$ (6,888,116)	\$ (135,595)	\$ (135,595)	\$ (7,159,306)	\$ (406,785)	\$ (406,785)	\$ (8,530,675)	\$	(1,627,140)
Increase/(decrease) in cash available for operations	\$ (869,172)	\$ (5,976,693)	\$ 175,216	\$ (112,004)	\$ (5,913,481)	\$ (412,892)	\$ 1,843,424	\$ (5,352,121)	\$	1,206,880
Cash available for operating needs	\$ 16,483,508	\$ 10,506,815	\$ 10,682,031	\$ 10,570,028	\$ 10,570,028	\$ 10,157,135	\$ 12,000,559	\$ 12,000,559	\$	21,324,559
Taxation for bond prin & int (incl encumbd M&O)	\$ 7,526	\$ 659,873	\$ 187,426	\$ 9,264	\$ 856,563	\$ 34,865	\$ 316,314	\$ 1,215,268	\$	1,146,288
Principle & Interest paid on long-term debt	\$ -	\$ -	\$ -	\$ (127,144)	\$ (127,144)	\$ -	\$ (1,029,145)	\$ (1,156,289)	\$	(1,156,289)
Restricted grants and contributions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$	-
Increase/(decrease) in restricted cash	\$ 7,526	\$ 659,873	\$ 187,426	\$ (117,880)	\$ 729,419	\$ 34,865	\$ (712,831)	\$ 58,979	\$	(10,001)
Cash restricted to debt service, other restricted funds	\$ 226,134	\$ 886,007	\$ 1,073,433	\$ 955,553	\$ 955,553	\$ 990,418	\$ 277,587	\$ 277,587	\$	182,804
Cash balance, end of period	\$ 16,709,642	\$ 11,392,823	\$ 11,755,465	\$ 11,525,581	\$ 11,525,581	\$ 11,147,553	\$ 12,278,146	\$ 12,278,146	\$	21,507,363

CASCADE MEDICAL CENTER
EMERGENCY MEDICAL SERVICES - APRIL, 2026

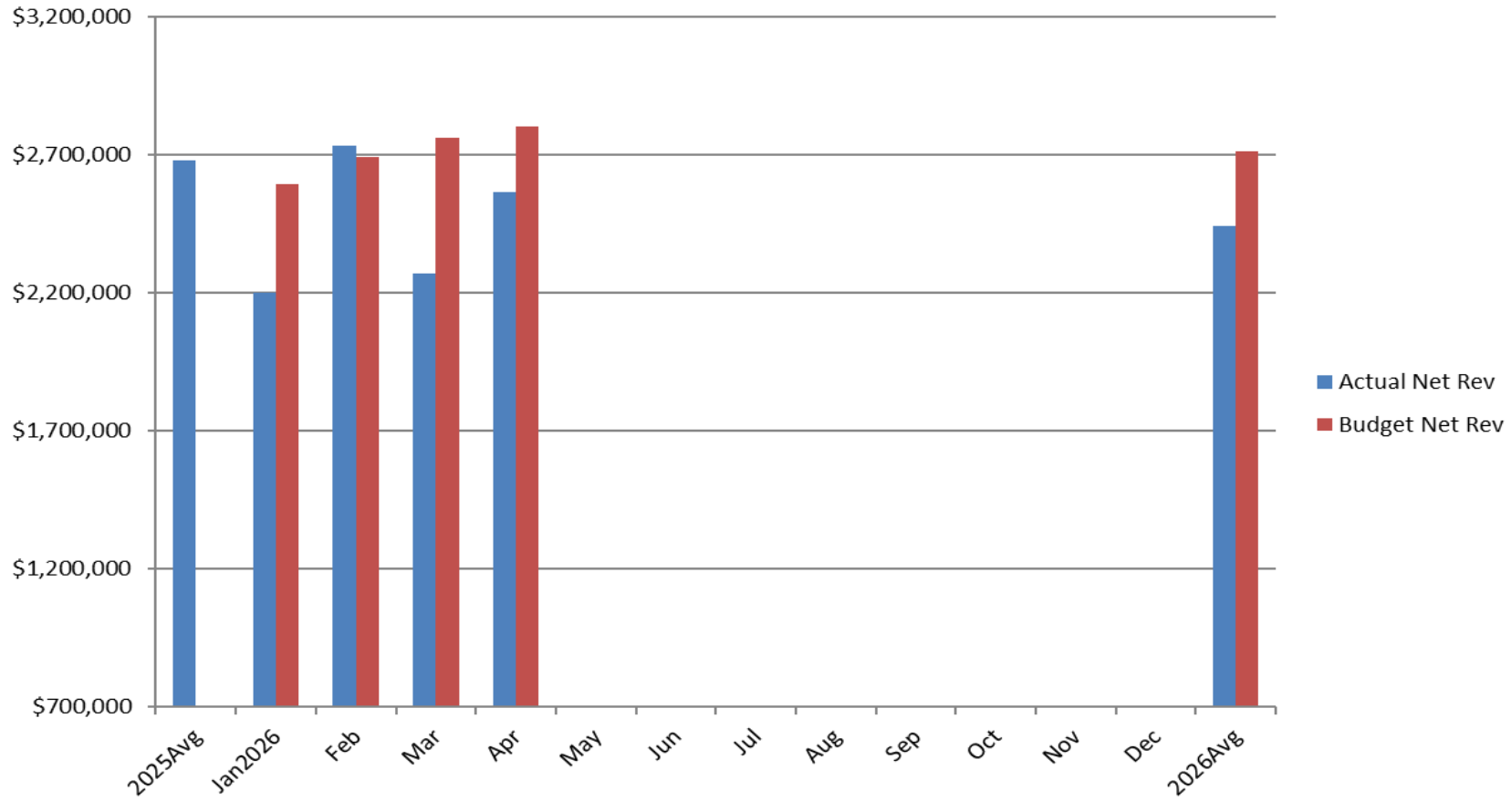
REVENUE	EMERGENCY ROOM		AMBULANCE		COMBINED EMERGENCY MEDICAL SERVICES		
	04/30/2026	04/30/2026 YTD	04/30/2026	04/30/2026 YTD	04/30/2026	04/30/2026 YTD	04/30/205 YTD
PATIENT REVENUE	943,427	3,186,587	230,186	1,167,667	\$1,173,612	\$4,354,254	\$3,995,202
DEDUCTIONS FROM REVENUE CONTRACTUAL ALLOWANCE, BAD DEBT & CHARITY CARE	\$548,886	\$1,853,956	\$123,310	\$625,519	\$672,196	\$2,479,476	\$2,282,545
NET PATIENT REVENUE	\$394,541	\$1,332,631	\$106,875	\$542,148	\$501,416	\$1,874,779	\$1,712,657
OTHER OPERATING REVENUE	\$0	\$0	-	-	\$0	\$0	\$0
TOTAL OPERATING REVENUE	\$394,541	\$1,332,631	\$106,875	\$542,148	\$501,416	\$1,874,779	\$1,712,657
OPERATING EXPENSES							
SALARIES AND WAGES	171,543	669,053	165,686	638,963	\$337,229	\$1,308,016	\$1,452,864
EMPLOYEE BENEFITS	29,045	114,624	41,982	160,553	\$71,027	\$275,177	\$287,249
PROFESSIONAL FEES	33,278	63,292	3,000	4,400	\$36,278	\$67,692	\$7,997
SUPPLIES	4,535	24,075	8,374	30,372	\$12,909	\$54,447	\$51,932
FUEL	-	-	2,367	10,069	\$2,367	\$10,069	\$7,987
REPAIRS AND MAINT.	-	-	4,872	17,103	\$4,872	\$17,103	\$25,926
PURCHASED SERVICES	2,500	11,986	18,268	73,534	\$20,768	\$85,520	\$87,779
CONTINUING MEDICAL EDUCATION	160	825	1,270	18,811	\$1,430	\$19,636	\$7,988
DUES	(1,850)	2,025	8,392	24,046	\$6,542	\$26,071	\$17,717
OTHER EXPENSES	284	1,457	1,003	3,604	\$1,287	\$5,061	\$4,783
LEASES / RENTALS	393	1,159	9,314	28,925	\$9,708	\$30,084	\$18,953
DEPRECIATION	2,581	10,322	19,934	79,737	\$22,515	\$90,059	\$113,644
TAXES AND LICENSES	-	888	-	390	\$0	\$1,278	\$177
INSURANCE	837	3,350	3,359	13,435	\$4,196	\$16,785	\$16,785
OVERHEAD COSTS	194,751	762,799	121,224	474,808	\$315,975	\$1,237,607	\$1,199,577
TOTAL OPERATING EXPENSES	\$438,057	\$1,665,855	\$409,045	\$1,578,750	\$847,102	\$3,244,604	\$3,301,357
MARGIN ON OPERATIONS	(\$43,516)	(\$333,225)	(\$302,170)	(\$1,036,603)	(\$345,685)	(\$1,369,825)	(\$1,588,701)
TAX REVENUE					\$209,770	\$839,080	\$587,048
NET MARGIN WITH TAX REVENUE					(\$135,915)	(\$530,745)	(\$1,001,653)
STATISTICS (ER - visits/procedures, AMB - billed runs) - 2026	305	1,224	63	317			
Total Ambulance Runs (includes unbillable runs)			96	455			
STATISTICS (ER - visits/procedures, AMB - billed runs) - 2025	289	1,279	68	256			
Total Ambulance Runs (includes unbillable runs)			96	374			

**Cascade Medical Center
Balance Sheet**

As of April 30, 2026 and December 31, 2025

	Apr 2026	Dec 2025		Apr 2026	Dec 2025
ASSETS			LIABILITIES & FUND BALANCE		
Current Assets			Current Liabilities		
Cash and Cash Equivalents	1,574,605	1,252,061	Accounts Payable	271,492	502,319
Savings Account	7,816,753	15,762,050	Accrued Payroll	766,982	739,809
Patient Account Receivable	6,726,949	7,063,319	Refunds Payable	(11,498)	-
less: Reserves for Contractual Allowances	(3,220,072)	(3,045,615)	Accrued PTO	1,031,970	1,009,328
Inventories and Prepaid Expenses	337,021	329,797	Payroll Taxes & Benefits Payable	(139,349)	76,604
Taxes Receivable - M&O Levy	(76,481)	15,982	Accrued Interest Payable	105,954	21,191
- EMS Levy	(365,571)	17,469	Current Long Term Debt	908,515	911,072
Other Assets	<u>662,802</u>	<u>800,978</u>	Current OPEB Liability	878,361	894,361
Total Current Assets	<u>13,456,005</u>	<u>22,196,041</u>	Short Term Lease	36,493	36,493
			ST Subscriptions	13,039	13,039
Assets Limited as to Use			Settlement Payable	-	-
Cash and Cash Equivalents			Total Current Liabilities	<u>3,861,958</u>	<u>4,204,215</u>
Funded Depreciation	65,638	460,201			
CVB Memorial Fund	1,276	1,275	Long Term Liabilities		
UTGO Bond Payable Fund	427,883	80,405	Notes Payable	182,251	182,251
LTGO Bond Payable Fund	106,579	106,579	Covid SHIP Funding	-	-
Investment Memorial Fund	145,763	144,037	PPP Note Payable	-	-
Settlement Account	190,882	188,645	CARES Act Funds Reserve	-	-
Paycheck Protection Loan Proceeds	-	-	UTGO Bond Payable	3,186,000	3,186,000
Cash - EMS	<u>1,111,881</u>	<u>188,442</u>	LTGO Bond Payable	3,745,000	3,745,000
	2,049,901	1,169,585	Deferred Revenue/Bond Premium	70,396	72,267
Taxes Receivable - Construction Bond Levy	<u>(94,431)</u>	<u>16,854</u>	Long Term OPEB/Pension Liability	2,616,404	2,616,404
Total Assets Limited as to Use	<u>1,955,470</u>	<u>1,186,438</u>	Long Term ROU Leases	5,359	5,359
			Long Term Subscriptions	-	-
Property, Plant and Equipment			Total Long Term Liabilities	<u>9,805,410</u>	<u>9,807,281</u>
Land	522,015	522,015			
Land Improvements	1,485,893	1,485,893	Total Liabilities	<u>13,667,367</u>	<u>14,011,496</u>
Buildings & Improvements	10,944,297	10,915,993			
Fixed Equip - Hospital	9,377,765	9,362,642	Fund Balance - Prior Years	17,926,436	18,205,341
Major Movable Equipment Hospital	8,011,052	7,393,948	Fund Balance - Current Year	(709,916)	-
Construction in Progress	<u>6,645,602</u>	<u>10,346</u>	Total Fund Balance	<u>17,216,520</u>	<u>18,205,341</u>
Total Property, Plant and Equipment	36,986,623	29,690,838			
Less: Accumulated Depreciation	<u>(23,406,241)</u>	<u>(22,755,588)</u>			
	13,580,382	6,935,250			
ROU Leases					
ROU Leases	214,816	214,816			
Less Accumulated Amortization	<u>(144,523)</u>	<u>(144,523)</u>			
	70,293	70,293			
Other Assets					
Long Term Pension Assets	472,138	472,138			
Deferred OPEB/Pension Costs	1,097,906	1,097,906			
Deferred Bond Costs	<u>251,693</u>	<u>258,770</u>			
TOTAL ASSETS	<u>30,883,888</u>	<u>32,216,837</u>	TOTAL LIABILITIES & FUND BALANCE	<u>30,883,888</u>	<u>32,216,837</u>

Cascade Medical 2026 Net Patient Revenue, Actual vs. Budget



Days in Net Accounts Receivable

