



CASCADE MEDICAL
PARTNERS IN YOUR HEALTH

Minutes of the Board of Commissioners Meeting

Chelan County Public Hospital District No. 1
Administration Conference Room & Zoom Connection
March 25, 2026

- Present:** Shari Campbell, President; Cary Ecker, Vice President; Jessica Kendall, Commissioner; Dr. Jesse Knight, Commissioner; Julie Pankow, Commissioner; Diane Blake, Chief Executive Officer; Marianne Vincent, Chief Financial 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; Lester Stolz, EMS; Doug Stockwell, Community Member
- Guests:** Bob Adamson, CMF; Chuck Zimmerman, OMW; Simon Vickery, OMW; Cindy Rudolph, Community Member

Topics	Actions/Discussions
Call to Order	<ul style="list-style-type: none"> President Shari Campbell called the meeting to order at 4:34 PM and then led the Pledge of Allegiance.
Consent Agenda	<ul style="list-style-type: none"> Cary moved to approve the consent agenda, minus today's agenda. Jessica seconded the motion; motion unanimously approved. An amended agenda with re-ordered Master Facilities Planning Next Steps and following action items was provided. Jessica made a motion, Cary second; motion unanimously approved.
(Action Item) New Commissioner Appointment, Position No.3	<ul style="list-style-type: none"> Jessica made a motion to nominate Julie Pankow to the commission. Cary seconded; and the group of 4 Commissioners unanimously approved.
Oath of Office	<ul style="list-style-type: none"> Megan Baker administered the oath of office to Julie Pankow, who affirmed her commitment as a commissioner to Cascade Medical.
Foundation Update	<p>Bob Adamson provided the update.</p> <ul style="list-style-type: none"> The Mark Judy Memorial Caregiver Education Fund is in its third year and continues to see a strong pool of applicants. Upcoming Benevolent Night events are scheduled for April 7 at München Haus and May 21 (South location, 11:00 AM – close). Planning for the Mai Blumenlauf is underway. Early planning for the 2026 Annual Golf Tournament is progressing well. Five Foundation members are retiring, with five new members joining to continue this work.
Community Input	<ul style="list-style-type: none"> None
Board Education: Open Public Meetings Act Training	<p>Chuck Zimmerman, OMW</p> <ul style="list-style-type: none"> Chuck provided an overview of the Open Public Meetings Act, including best practices, public records requirements, roles and responsibilities of the Board and CEO, and standards for conducting Board meetings.
Break	<ul style="list-style-type: none"> The group took a break at 6:05 for 10 minutes.
Master Facilities Planning Next Steps	<p>Diane Blake</p> <ul style="list-style-type: none"> Diane provided an update on Master Facilities Planning efforts to date in 2026. This included current space constraints, particularly limited parking within the existing footprint, and ongoing exploration of potential solutions. She also reviewed the recent offer and pending acquisition of the LOGE properties on 9th Street and the riverfront. Discussion included both short- and long-term considerations, including immediate planning and space inventory, as well as next steps such as establishing a timeline for expansion, identifying an architectural partner, and evaluating financing options.

<p>Action Items</p>	<p>MOTION: Approve Resolution 2026-03: Authorizing Purchase of Real Property (located at 321 9th St. and 11798 US Hwy 2 Leavenworth, WA)</p> <ul style="list-style-type: none"> • A motion was made by Cary, seconded by Jessica, unanimously approved. <p>MOTION: Approve Resolution 2026-04: Reimbursement Resolution</p> <ul style="list-style-type: none"> • A motion was made by Cary, seconded by Shari, unanimously approved.
<p>CM Values</p>	<p>Diane Blake provided the report.</p> <ul style="list-style-type: none"> • Diane shared reflections on transparency, emphasizing the importance of proactive and open communication with staff. On March 11, Cascade Medical announced that an offer had been accepted on the LOGE property, generating strong internal excitement. Staff feedback has been overwhelmingly positive, with thoughtful ideas already emerging around future use of the space.
<p>Committee Reports</p>	<p>A. Finance Committee Cary Ecker provided the report.</p> <ul style="list-style-type: none"> • The committee reviewed insurance renewal, December financials, and clinic performance, which showed a slight dip in volumes. Industry updates included discussion of the Rural Health Transformation Program under H.R. 1. The LOGE property acquisition will impact Financial Pillar goals moving forward. Overall dashboard performance remains strong; however, long-term debt benchmarks may need to be updated to reflect current conditions. The committee is exploring the addition of a community member.
<p>Discussion</p>	<p>A. Quality Messaging Framework Jessica Kendall and Shari Campbell led the discussion.</p> <ul style="list-style-type: none"> • A draft framework was presented to support consistent communication around Cascade Medical’s safety and quality efforts. Enhancements include highlighting standardized defibrillators in ambulances and the recent replacement of two ambulances. The group discussed adding a website icon linking to a dedicated safety and quality page. The framework will be refined and brought back to the Board for review. The Quality Committee will also revisit the role of a dashboard in this work. <p>B. Review CHNA Draft Work Plan Diane Blake led the discussion.</p> <ul style="list-style-type: none"> • Medical Staff, Leadership, and the Executive Team collaborated to refine priorities for the 2026–2028 CHNA Implementation Plan. • The Board did not recommend changes and the finalized plan will be brought back in April for Board approval. <p>C. Topics for Part-time Resident Advisory Council (PTRAC) Diane Blake led the discussion.</p> <ul style="list-style-type: none"> • PTRAC has been in place for approximately 15 years and represents part-time residents who contribute to the hospital district but do not reside full-time in the community. The Council provides valuable input on improving access, increasing service utilization, and strengthening engagement with this population. Upcoming discussions will focus on opportunities to grow market share and gather feedback on messaging related to the recent property acquisition.
<p>Action Items</p>	<p>MOTION: Approve Credentialing</p> <ul style="list-style-type: none"> • Credentialing Candidates <ul style="list-style-type: none"> ○ Galen Church, DO ○ Joe Montgomery, PA-C ○ Fang Yu, MD ○ Kevin Marcum, MD ○ Jason DiVito, DO ○ Eric Munoz, MD ○ Nicolas Henson, MD

	<ul style="list-style-type: none"> ○ Steven Black, MD ● Jessica moved to approve, Dr. Knight seconded, and the motion unanimously approved. <p>MOTION: Approve 2026 Board Annual Goals</p> <ul style="list-style-type: none"> ● Cary moved to approve, Dr. Knight seconded, and the motion unanimously approved.
<p>February 2026 Financial Reports</p>	<p>Marianne Vincent led the reports.</p> <p>December 2025 Financials</p> <ul style="list-style-type: none"> ● February results were favorable, with net income approximately \$260K, or \$186K ahead of budget. ● Year-to-date performance reflects a net loss of (\$63K), representing an unfavorable variance of (\$43K) to budget. ● January and February trends are consistent with the start of 2025. ● Gross revenue is behind budget by approximately (\$821K) year-to-date. ● Other Operating revenue variance is timing-related, primarily due to delayed receipt of Safety Net Assessment Program funds. ● Salary & Benefit Expenses are approximately \$368K under budget, driven in part by ED locum coverage and clinic labor costs. ● Cash performance is below budget by approximately \$745K year-to-date, with a February variance of (\$116K). ● Overall cash balances are approximately (\$2.1M) below budget, largely due to a Medicare repayment made in late 2025 that was not included in the 2026 budget. ● Days in Net A/R continue to trend upward; improvement is anticipated in the coming months. ● An additional \$236K expense has been recorded, with a potential adjustment related to retiree benefits (OPEB) pending auditor review. ● Final information is being submitted to DZA for the audit and cost report, which is expected to be presented at the May Board meeting.
<p>Administrator Report</p>	<p>Diane Blake provided the report.</p> <ul style="list-style-type: none"> ● Rural Health Transformation Program: Cascade Medical anticipates receiving approximately \$750K annually over the next five years to support innovation, technology, and capital infrastructure. Program details, including eligible uses, are still being finalized. An application is expected within the next 30 days, with a 30–60-day submission window. Funding is anticipated in early summer, with current guidance requiring year one funds to be expended by September 2027. Distribution will occur through WSHA separately, and the Rural Collaborative, will coordinate other vendor-supported work for participating hospitals. ● Recruitment Update: Recruitment efforts for the COO position have generated strong interest. Final candidates are scheduled for on-site interviews. A new Rehab Director, Kyle Archbold, joined the organization this week. An Emergency Department physician candidate has accepted a per diem role following a recent interview. Recruitment for a full-time physician and Clinic Medical Director is ongoing; the approach is currently being reassessed to support successful placement. In the interim, Dr. Hoefler is serving as a virtual, fractional Medical Director. ● Pat’s Party: A recognition event honoring Pat will be held April 8 from 2:00–4:00 PM in the ABC room. ● Legislative Update: Hospitals fared better than initially anticipated this legislative session. Appreciation was extended to those who participated in digital advocacy efforts. ● Physician Compact Work: Work is underway to develop a Physician Compact that defines shared expectations and strengthens alignment between administration and medical staff. A core workgroup has been identified, with

	<p>next steps focused on smaller group sessions to develop a draft for broader review.</p> <ul style="list-style-type: none"> • Organizational Recognition: Kudos to Megan Sawyer for a highly successful Lab inspection. Surveyors from the Department of Health were very complimentary of both her leadership and the team's performance. As a result, the lab has moved to a two-year inspection cycle.
<p>Board Follow Up Items / Meeting Evaluation / Commissioner Comments</p>	<ul style="list-style-type: none"> • Please check your email and calendars, let Megan know if you want to attend meetings. • Part-time Resident Advisory Council: Saturday, April 25. • Annual AWPHD & WSHA Conference: June 28-July 1. • Board Quality Rounding: Wednesday, April 15th from 1-3 PM, Julie will attend full session, Cary 1-2 PM, and Jessica 2-3 PM.
<p>Adjournment</p>	<ul style="list-style-type: none"> • Shari moved to adjourn the meeting at 8:01 PM, Cary seconded, and the group unanimously approved.

Signed by:

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 Shari Campbell, President

Signed by:

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 Jessica Kendall, Secretary