



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
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	President Shari Campbell called the meeting to order at 5:05 PM and then Melissa led the Pledge of Allegiance.
Consent Agenda	Cary moved to approve the consent agenda; Dr. Knight seconded the motion; motion unanimously approved.
Community Input	None
CM Values	Diane Blake provided the report. 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	A. Governance Committee Shari Campbell provided the report. - 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. MOTION: Approve Board Committee & Liaison Assignments - 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. B. Finance Committee Cary Ecker provided the report. - 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.

	C. Board Quality Rounding Julie Pankow and Dr. Jesse Knight • Clinic: Improving Medicare Annual Wellness Visit Rate ○ 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 ○ Daily quality control processes are in place to support accuracy and compliance, with ongoing coordination with the Department of Health.
Discussion	A. Q1 Organizational Dashboard Review. Diane Blake led the review. • 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. B. Master Facility Plan Progress & Next Steps Diane Blake led the discussion. • 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 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.
Action Items	MOTION: Approve Credentialing • Credentialing Candidates: ○ 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. MOTION: Approve CHNA Work Plan • A motion was made by Cary, seconded by Julie, and unanimously approved. MOTION: Approve Resolution 2026-05: Surplus Property • 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. MOTION: Approve Resolution 2026-06: Surplus Monitors • A motion was made by Cary, seconded by Jessica, and unanimously approved.
Break	The group took a break at 6:35 PM and resumed at 6:50 PM.

Q1 2026 Financial Reports	Diane Blake led the report. • 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	Diane Blake provided the report. • 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	• 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))	• 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	• Jessica moved to adjourn the meeting at 7:56 PM, Dr. Knight seconded, and the group unanimously approved.

Signed by:

Shari Day-Campbell

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Shari Campbell, President

Signed by:

Jessica Kendall

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Jessica Kendall, Secretary