



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

February 26, 2025

- Present:** Tom Baranouskas, Vice President; Gustavo Montoya, Commissioner; Bruce Williams, 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
- Via Zoom:** Shari Campbell, President; Jessica Kendall, Commissioner; Don Morse, Community Member; Cary Ecker, Community Member
- Guests:** Rex McMillian, CM Foundation; Erin Adams, Medical Supervisor Officer; Natasha Piestrup, Director of Nursing; Dr. Lauren Kendall, Clinic Medical Director; Whitney Lak, Clinic Director; Deb Williams, Clinic Consultant

Topics	Actions/Discussions
Call to Order	<ul style="list-style-type: none"> President Shari Campbell called the meeting to order at 5:30 PM. Bruce then led the pledge of allegiance.
Consent Agenda	<ul style="list-style-type: none"> Tom moved to approve the consent agenda. Jessica seconded the motion, and the group unanimously approved.
Community Input	<ul style="list-style-type: none"> None
Medical Director Report	<p>Dr. Lauren Kendall provided the report:</p> <ul style="list-style-type: none"> Provider Engagement <ul style="list-style-type: none"> Quarterly rounding now includes patient satisfaction scores. Weekly provider meetings focus on education, with efforts to ensure equitable PTO coverage. The UW Medical Clerkship program expanded to four students annually. Increased administrative participation in provider meetings and growing excitement for the clinic remodel. Clinic Improvement Projects <ul style="list-style-type: none"> Efforts are underway to streamline the Luma program and install wall-mounted computers in all clinic rooms. Sound privacy is being improved with music and acoustic panels. Quarterly code training has been implemented. Kalie, the new Mobile Clinic provider, is contributing ideas for location optimization and QR code scheduling. MAs launched the Party Planning Committee, hosting their first event for departing hospitalist Bob. Provider workflows are being standardized. Relationship with Admin & CM as a Whole <ul style="list-style-type: none"> Attending daily Safety Huddles to foster community, monthly executive team meetings for collaboration, and serving as one of two site directors for the UW Clerkship Program.
CM Values	<p>Diane Blake provided the report.</p> <ul style="list-style-type: none"> Diane highlighted our shared value of Community, emphasizing our commitment to fostering a transparent, supportive environment by prioritizing others' needs, assisting those in difficulty, and working toward a shared purpose. She also thanked Janeth and Marianne for bringing forward a meaningful story about the impact of charity care. The patient expressed deep gratitude to CM and our team.
Foundation Report	<p>Rex McMillian provided the report:</p> <ul style="list-style-type: none"> CM Foundation Annual Golf Tournament: June 16

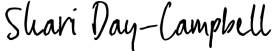
	<ul style="list-style-type: none"> • Benevolent Night: March 20 @ Wildflower • Mai Blumenlauf (May Flower Run): May 11 @ Downtown Leavenworth • Clinic Bundle fundraising is on track. • The group recently welcomed five new board members. • Thanks to Bruce for his dedicated service to CM and this community.
Committee Reports	<p>Medical Staff Jessica Kendall provided the report.</p> <ul style="list-style-type: none"> • Flu cases are notably high this year, with a significant increase in serious sledding injuries reported in the Emergency Department. There's potential for a social media collaboration with the Leavenworth Winter Sports Club to promote safety education. Wait times for physical therapy have decreased. <p>Board Quality Rounding Jessica and Gustavo provided the report.</p> <ul style="list-style-type: none"> • Endoscopy: The outpatient coordinator is working to update patient education materials in both Spanish and English while also dedicating time to in-person patient support. • Mobile Integrated Health (MIH): The team is balancing multiple responsibilities while developing workflows to improve patient access to the program. The team is processing internal and external referrals. <p>Community Outreach & Awareness Committee Shari Campbell provided the report.</p> <ul style="list-style-type: none"> • The group is finalizing the overall messaging for the hospital and EMS Levy, including commissioner talking points and updated FAQs. • The committee discussed its future and a plan to shift to a quarterly cadence and invite community members to participate. <p>Governance Committee Shari Campbell provided the report.</p> <ul style="list-style-type: none"> • The commissioner recruitment process and succession planning were discussed, including the matrix, commissioner mentorship, and updated interview questions. The Community Health Needs Assessment (CHNA) survey and Strategic Plan were reviewed, with a focus on how they align and contribute to the master facilities plan. • The group also focused on ways to foster Board strategic thinking and identify opportunities for collaboration to support this approach. As a result, additional question prompts have been added to the agenda.
Discussions & Reports	<p>A. Clinic Remodel Pat Songer let the discussion.</p> <ul style="list-style-type: none"> • The need for change supports the continuation of Team-Based care efforts. The proposed solution is to consolidate four pods into two Team-Based care areas, integrating PSRs, MAs, and nurses to enable a more efficient one-touch approach. Next steps include reviewing contractor bids for the project, which has a capital budget of \$150,000. While the clinic team has some concerns about the construction process and sharing office space, they are excited about the project's vision. • Tom moved to approve moving forward with the Request for Proposal (RFP) process; Bruce seconded. Motion unanimously approved. <p>B. Advocacy Day Recap Shari and Diane led the sponsorship discussion.</p> <ul style="list-style-type: none"> • Spent February 10-11 in Olympia for Advocacy Day, really productive and great use of time. Diane is widely respected and WSHA relies on her leadership and contributions with WA legislators. • Washington is facing a significant budget deficit, with 2025 advocacy focused on protecting hospitals from cuts. The federal budget landscape


	<p>also suggests potential cuts to hospitals.</p> <ul style="list-style-type: none"> Two key advocacy items: <ul style="list-style-type: none"> 1) Rate setting and PEBB/SEBB plans—rural and urban hospitals rely on each other, and cuts to larger systems, still recovering from the pandemic, would make the system more fragile. 2) A bill to introduce guardrails on insurance carriers' behavior, targeting AI-driven denials that are often overturned. The goal is to impose requirements to curb these negative practices. Also advocated for rural nurse program, currently piloted, allows greater flexibility for training RNs in an apprenticeship model with education closer to home, offering significant benefits for rural areas. <p>C. Topics for Part-time Resident Advisory Council (PTRAC) Diane Blake teed up the discussion.</p> <ul style="list-style-type: none"> PTRAC brings a diverse range of skillsets and is deeply invested in the wellbeing and sustainability of Cascade Medical. It has proven to be a valuable space for gathering input on various initiatives. The group posed the following: What is the preferred way for PTRAC to receive updates on CM services? How can we best communicate with them moving forward? Diane will send an informational email to the group regarding the EMS Levy.
Action Items	<p>Motion: Approve Credentialing</p> <ul style="list-style-type: none"> Tom moved to approve; Gustavo seconded. Motion unanimously approved.
December 2024 Preliminary and January 2025 Financials	<p>Marianne Vincent provided the report.</p> <p>December 2024 Preliminary</p> <ul style="list-style-type: none"> Year-to-date net margin of \$1.8 million is \$1,379,000 more than the budgeted net margin of \$439,000. A large adjustment to the contractual allowance was made, driven by a trend of growing patient balances due to suspended statements for several months. Despite this, CM ended the year on a positive note. CM is likely to book a \$150K receivable for sales & use and excise taxes, with a refund pending as the result of work completed by a consulting firm, several accruals for AP items are also needed. A Medicare payable or receivable will be determined when the cost report is returned. There is a \$741K liability that has been on the books since 2017, and legal has supported removing it. The variance between actual cash collections and the budgeted amount is \$5,700,000, with the actual collections of \$34,700,000 exceeding the budgeted \$29,000,000. <p>January 2025</p> <ul style="list-style-type: none"> CM showed a negative margin for January of (\$267,000) which is below budget by (\$300,000). Dues and Subscriptions for January exceeded the budget by (\$47,000), primarily due to a \$40,000 payment to the The Rural Collaborative, which will be reallocated to reflect an expense distribution throughout the year. While Days in Net Accounts Receivable increased in January, focused efforts on patient balance collections led to higher-than-average cash collections in December and January. CM signed a \$200,000 statement of work with HealthNet, reinforcing its commitment to continuing this highly valued partnership.
Administrator Report	<p>Diane Blake provided the report.</p> <ul style="list-style-type: none"> PTRAC: If you know a part-time resident, consider connecting them with CM, as we are always looking for new members. Dopl Technologies: Providing outpatient ultrasound services and

	<p>working toward FDA approval for telerobotic ultrasound capabilities. CM is one of the hospitals in Washington supporting this initiative.</p> <ul style="list-style-type: none"> • Endoscopy Services: CM's collaboration with Lake Chelan Health for expand endoscopy coverage is moving forward. • Community Health Needs Assessment: The COAC reviewed the survey, and consultants have made the necessary edits. The survey has been tested and is ready for launch within the CM community. The group is arranging focus groups to assess health needs, with a focus on engaging the Spanish-speaking community. EMS Levy education efforts will include a CHNA QR code for attendees. Commissioners recommended partnering with the school district to connect with local families. • Federal Legislation: CM is staying closely attuned to WSHA. Larger bodies of work: <ul style="list-style-type: none"> ○ Immigration: Hospitals remain safe spaces, but enforcement is permitted in public areas. CM is finalizing policies to specify public areas and has educated frontline staff. ○ Diversity, Equity & Inclusion: CM is considering a path forward, following a major executive order on race and sex. ○ State vs. Federal Laws: CM is working with WSHA to navigate conflicts. ○ Telemedicine: Some services under Medicare may lose coverage as early as April, requiring close monitoring. ○ Data Access: Restrictions on CDC and EMS data have impacted CM's ability to access critical information. • Federal Budget: <ul style="list-style-type: none"> ○ Medicaid: Assume Medicaid cuts are coming, though legislators may resist those that harm their constituents. Medicaid cuts will heavily impact rural areas. Medicaid-reliant nursing homes may also struggle, making hospital discharges more difficult. ○ Affordable Care Act (ACA) Subsidies: Likely elimination could leave many uninsured. ○ Graduate Medical Education: Potential cuts may reduce physician training slots amid an ongoing shortage. ○ Tariffs: The industry is monitoring potential impacts. ○ Healthcare Cabinet: Once established, additional executive orders are expected focused on healthcare. • CM Foundation: Diane has toured new folks through the facility recently. • Open Forums: CM hosted Open Forum sessions last week. • AHA Region 9 Policy Board: Diane is serving on the nominating committee. The upcoming RPB meeting will be held in Hawaii on March 12-13. • Mobile Integrated Health (MIH) Referral: An MIH single patient visit led to two follow-up clinic visits, demonstrating the program's impact. • Bruce's Retirement Celebration: Join us on Friday, February 28, from 3:30-5:00 PM in the ABC room.
Board Action Items	<ul style="list-style-type: none"> • Please attend Bruce's Retirement Celebration. • Clint will update the EMS Levy Outreach calendar. Please RSVP by reaching out to him. • Megan will send a link for Golf Tournament sponsorship contributions.
Meeting Evaluation/Commissioner Comments	<ul style="list-style-type: none"> • A Commissioner requested a quarterly Medical Director report, and it was valuable to have her as a key stakeholder in the Clinic Remodel discussion. • Ongoing strategic plan education for the board is important as the process progresses.

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 7:56 PM for 20 minutes.• At 8:26, the group extended the meeting for an additional 10 minutes.• The group exited the executive session at 8:36 PM
Adjournment	<ul style="list-style-type: none">• Bruce moved to adjourn at 8:36 PM; Gustavo seconded, and the group unanimously agreed.


Signed by:




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Shari Campbell, President

Signed by:



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Jessica Kendall, Secretary