



# LAKE CHELAN HEALTH

## **BOARD PACKET**

Chelan County Public Hospital District No. 2



Chelan County Public Hospital District No. 2  
 Regular Meeting of the Board of Commissioners  
 February 25, 2025, at 1:30 am via TEAMS Meeting  
 ID: 298 885 195 850 Passcode: Jm3G8g7G

## Agenda

*Mission-* “To provide the highest quality healthcare with compassion and respect to the community we serve.”

FI – For Information; FD – For Discussion; FM – For Motion; FA – For Acceptance; FR-For Resolution

<i>Time</i>	<i>Agenda Item</i>	<i>Facilitator</i>	<i>Topic/Action</i>
1:30	• Call to Order	J. LaPorte	
1:32	• Public Comment		
1:35	• Chair Report	J. LaPorte	
1:40	• Consent Agenda	Commission	<ul style="list-style-type: none"> <li>A. Regular Board Meeting Minutes 1/28/2025 (FA)</li> <li>B. Governance Meeting Minutes 1/29/2025 (FA)</li> <li>C. Warrants &amp; Vouchers (FM)</li> <li>D. Bad Debt &amp; Charity Care (FM)</li> <li>E. Special Board Meeting Minutes 2/10/2025 (FA)</li> <li>F. Finance Committee Minutes 2/19/2025 (FA)</li> </ul>
1:45	• Executive Session		<ul style="list-style-type: none"> <li>A. RCW 42.30.110(1)(o) to consider information regarding staff privileges or quality improvement committees under RCW 70.41.205</li> </ul>
2:00	• Reports	L. Sahlinger B. Truman  A. Edwards Commission Commission S. Ottley	<ul style="list-style-type: none"> <li>A. Hospitalist Introduction Credentialing (FM)</li> <li>B. Financial Committee Report (FA)               <ul style="list-style-type: none"> <li>i. Resolution 2025-1 Reimbursement (FR)</li> </ul> </li> <li>C. CEO Report (FI)</li> <li>D. Community Connections (FD)</li> <li>E. Board Education (FI)</li> <li>F. Strat Plan KPI’s (FD)</li> </ul>
3:15	• Old Business	Commission  S. Ottley	<ul style="list-style-type: none"> <li>A. Committee Assignments-               <ul style="list-style-type: none"> <li>a. Compliance, Privacy, &amp; Risk (FD)</li> </ul> </li> <li>B. Capital Project Update (FI)</li> </ul>
3:45	• New Business	Commission	
4:00	• Roundtable /Action Items	Commission	
4:05	• Public Comment		
4:10	• Executive Session		<ul style="list-style-type: none"> <li>A. RCW 42.30.110(1)(o) to consider information regarding staff privileges or quality improvement committees under RCW 70.41.205</li> <li>B. RCW 42.30.110(1)(g) to evaluate the performance of a public employee.</li> </ul>
5:00	• Adjournment		

## Board Calendar Reminders:

TBA	Compliance, Privacy, & Risk Committee		
3/10/2025	TBA	Bragg Room/ TEAMS	9 am
3/18/2025	Med Staff	Bragg Room/ TEAMS	7:30-8:30
3/13/2025	Quality Committee	Bragg Room/ TEAMS	1 – 3 pm
3/19/2025	Finance Committee	Bragg Room/ TEAMS	10 am
3/25/2025	Regular Board Meeting	Bragg Room/ TEAMS	1:30 pm

4/14/2025	TBA	Bragg Room/ TEAMS	9 am
4/15/2025	Med Staff	Bragg Room/ TEAMS	7:30-8:30am
4/10/2025	Quality Committee	Bragg Room/ TEAMS	1 – 3 pm
4/23/2025	Finance Committee	Bragg Room/ TEAMS	10 am
4/29/2025	Regular Board Meeting	Bragg Room/ TEAMS	1:30 pm

5/7/2025	Compliance, Privacy, & Risk Committee	1212 / TEAMS	10-11am
5/10/2025	TBA	Bragg Room/ TEAMS	9 am
5/13/2025	Med Staff	Bragg Room/ TEAMS	7-8:30
TBA	Quality Committee	TBA	TBA
5/19/2025	Finance Committee	Bragg Room/ TEAMS	10 am
5/25/2025	Regular Board Meeting	Bragg Room/ TEAMS	1:30 pm



**Chelan County Public Hospital District No. 2  
Regular Meeting of the Board of Commissioners  
Meeting Minutes January 28, 2025 at 1:30 pm  
in person and via Microsoft TEAMS**

**Commission Attendance:**

(  not present  present )

Jordana LaPorte, Chair  
 Lori Withrow, Vice Chair

Mary Murphy, Secretary  
 Doug Gibson (Virtual)

Len England

**Staff Participants:** A. Edwards, B. Truman, S. Ottley, R. Montgomery, L. Sahlinger, C. Ondi, J. Hetterle, M. McCormick, T. Lautiki, J. Phetteplace,

**Guests:** Dr. Hippe

**Community Members:** Marianne Patton, Manual Navarro, Anna Moroz,

**Recorder:** Wendy Kenck

Agenda Item	Topic/Action														
1. Call to Order	<ul style="list-style-type: none"> <li>L. Withrow called the meeting to order at 1:30 pm and recited the mission statement.</li> </ul>														
2. Public Comment	<ul style="list-style-type: none"> <li>Marianne shared her appreciation for the staff providing community care and acknowledged the board for their volunteer time. She noted a Facebook thread where community members expressed concerns about billing. While disappointed that the forum was used instead of direct communication, she wondered if a patient advocate role exists at the hospital to help foster dialogue and resolution.               <ul style="list-style-type: none"> <li>B. Truman commented on the post, stating that the Finance team reviewed 65 patient comments from the thread and identified 15 specific cases as areas for process improvement. He also mentioned that two community health workers at the clinic are available to assist with insurance-related issues.</li> </ul> </li> </ul>														
3. Chair's Report	<ul style="list-style-type: none"> <li>L. Withrow announced that LCH was recognized as a Top Performer, with J. Phetteplace, J. Fowler, and J. Jedwabny receiving the WHS Top Performer Award. Additionally, four LCH nurses were honored with the DAISY Award for their outstanding contributions.</li> <li>L. Withrow opened the floor for Board position nominations               <ul style="list-style-type: none"> <li>D. Gibson nominated J. LaPorte as Board Chair position, accepted, motion passed</li> <li>D. Gibson nominated L. Withrow as Vice Chair, accepted, motion passed</li> <li>D. Gibson nominated M. Murphy as Board Secretary, accepted, motion passed</li> </ul> </li> <li>Board Committee Assignments:               <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>Med Staff</td> <td>J. LaPorte</td> </tr> <tr> <td>DEI Committee</td> <td>D. Gibson</td> </tr> <tr> <td>Credentialing</td> <td>L. Withrow &amp; D. Gibson</td> </tr> <tr> <td>Warrants</td> <td>M. Murphy</td> </tr> <tr> <td>Finance Committee</td> <td>J. Laporte, L Withrow (Winter/Spring, D. Gibson (Summer/Fall)</td> </tr> <tr> <td>Governance Committee</td> <td>M. Murphy, L Withrow (Winter/Spring), L. England (Summer/Fall)</td> </tr> <tr> <td>Quality Committee</td> <td>M. Murphy &amp; L. England</td> </tr> </table> </li> </ul>	Med Staff	J. LaPorte	DEI Committee	D. Gibson	Credentialing	L. Withrow & D. Gibson	Warrants	M. Murphy	Finance Committee	J. Laporte, L Withrow (Winter/Spring, D. Gibson (Summer/Fall)	Governance Committee	M. Murphy, L Withrow (Winter/Spring), L. England (Summer/Fall)	Quality Committee	M. Murphy & L. England
Med Staff	J. LaPorte														
DEI Committee	D. Gibson														
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Governance Committee	M. Murphy, L Withrow (Winter/Spring), L. England (Summer/Fall)														
Quality Committee	M. Murphy & L. England														

	Retirement Representative	J. LaPorte
	<ul style="list-style-type: none"> <li>• <i>M. Murphy motioned to accept the Board committee assignments, seconded, motion approved.</i></li> </ul>	
	<ul style="list-style-type: none"> <li>• <i>M. Murphy motioned to approve the Consent Agenda, seconded, motion passed</i></li> </ul>	
4. Executive Session	<ul style="list-style-type: none"> <li>• L. Withrow announced Executive Session at 3:55 pm for 15 minutes to consider information regarding staff privileges or quality improvement committees under RCW 70.41.205 and RCW 42.30.110(1)(o)</li> <li>• Executive session ended at 2:10 pm</li> </ul>	
5. Reports	<ul style="list-style-type: none"> <li>• <i>M. Murphy verified all credential files are complete for the proposed list of providers and motioned to approve the appointments and removals as presented, seconded, motion passed.</i></li> <li>• Dr. Hippe provided the Quarterly Chief of Staff Report, welcoming new medical staff who have received privileges. He noted the ED has been busy and expressed appreciation for the new Surgical Director, highlighting improvements in referral processes. So far in 2024, 84 babies have been delivered, including a set of twins. He also discussed case reviews, quality improvements, and a recent addition to the team. At the most recent Medical Staff meeting, leadership positions were approved: Dr. Hippe as Chief of Staff, Dr. Douglass as Vice Chief, Dr. Rothmeyer as Secretary <ul style="list-style-type: none"> <li>○ The Board asked about quorum changes. Dr. Hippe explained that bylaw updates have tightened requirements for medical staff membership, and clinic providers are now participating.</li> <li>○ The Board inquired about continuing educational segments in meetings. Dr. Hippe supports this but noted recent meetings have focused on other priorities, limiting time for educational topics.</li> </ul> </li> <li>• Finance: <ul style="list-style-type: none"> <li>○ USDA is expected to release \$800K for the hospital build this week or early next week. Additional financing options may need to be explored for the EMS/Admin building. An underwriter has been selected for the project.</li> <li>○ Regarding the billing concerns raised on Facebook, B. Truman reiterated that each comment was reviewed individually, providing an opportunity to improve processes. Efforts continue to enhance services for the community.</li> <li>○ B. Truman presented the unaudited December 2024 Finance report <ul style="list-style-type: none"> <li>▪ <i>M. Murphy motioned to accept the unaudited December 2024 Finance Report</i></li> </ul> </li> </ul> </li> <li>• R. Eickmeyer presented the 2024 Annual Report on the DEI community. <ul style="list-style-type: none"> <li>○ <i>M. Murphy motioned to transition the DEI Committee from a Board owned committee to an LCH operational committee, seconded, motion approved.</i></li> </ul> </li> <li>• A. Edwards shared the CEO Report with additional notes of interest: <ul style="list-style-type: none"> <li>○ A. Edwards provided updates on new federal executive orders and their implications for state and federal regulations, outlining expectations for staff and the community. A meeting later this week will address these changes. One executive order regarding grants and federal Medicaid funding could have significant consequences for the hospital and its patients.</li> <li>○ Dermatology services are progressing well, with 60 patients seen over two days during the last visit. The MOH's service line is being developed in-house, focusing on refining processes.</li> <li>○ The hospitalist program launched earlier this month, receiving positive feedback from both staff and patients on the quality of education and time spent with patients.</li> <li>○ The Daisy Awards were a highlight, showcasing staff appreciation for nurses and their dedication.</li> </ul> </li> </ul>	

	<ul style="list-style-type: none"> <li>• Community Connection Opportunities: <ul style="list-style-type: none"> <li>○ State of the City – Thursday at the Community Center.</li> <li>○ Board Letter – To be posted on social media.</li> <li>○ Foundation Heart Health Lunch (2/13) – Proceeds will support the developing Cardiac Rehab program.</li> <li>○ Ruby U (2/20) – "Cougars in Washington" event.</li> </ul> </li> <li>• L. Withrow presented the "<b>Board Education &amp; Reference Resources</b>" as a tool for board members.</li> </ul>
6. Old Business	<ul style="list-style-type: none"> <li>• 2025 CHNA: A. Edwards announced that Wipfli has been selected to complete the 2025 Community Health Needs Assessment (CHNA) for LCH.</li> <li>• Specialty Care Clinic: Framing is underway and expected to be finalized next week. The transition plan and training have begun. A change order has been issued to dedicate lab space for MOH's procedures.</li> <li>• EMS/Admin Building: Schematic design is complete, and material selection for the structural build is in progress. A pre-op meeting with the city is scheduled for next week.</li> </ul>
7. New Business	<ul style="list-style-type: none"> <li>• L. Sahlinger presented the Board with the Annual Quality Plan <ul style="list-style-type: none"> <li>○ <i>M. Murphy motioned to approve the Annual Quality Plan, seconded, motion approved.</i></li> </ul> </li> <li>• Policies: <ul style="list-style-type: none"> <li>○ <i>L. England motioned to approve the Board Policy Regarding Ethical and Legal Matters, seconded, motion approved.</i></li> <li>○ <i>L. England motioned to approve the Conflict of Interest Policy and form, seconded, motion approved</i></li> <li>○ <i>M. Murphy motioned to approve the Board of Commission Policy Review Guidelines with edits, seconded, motion approved</i></li> <li>○ <i>L. England motioned to accept the Charity Care policy with edits, seconded, motion approved.</i></li> <li>○ <i>L. England motioned to approve the Board Bylaws, second, motion approved.</i></li> </ul> </li> </ul>
8. Roundtable/Action Items	<ul style="list-style-type: none"> <li>• L. Withrow acknowledged the group's cohesiveness and thanked everyone for their hard work.</li> <li>• D. Gibson reflected on a great past year and looks forward to construction in 2025.</li> <li>• W. Kenck will: <ul style="list-style-type: none"> <li>○ Distribute the Board Education resource document to all members.</li> <li>○ Edit the Conflict of Interest Policy and Board of Commission Policy Review Guidelines.</li> <li>○ Update the Board Committee Assignments.</li> </ul> </li> <li>• P. Peters will revise the wording in the Charity Care Policy.</li> <li>• Board members will submit completed Conflict of Interest Forms to W. Kenck by the end of the month.</li> </ul>
9. Public Comment	<ul style="list-style-type: none"> <li>• No Public Comment</li> </ul>
10. Executive Session	<ul style="list-style-type: none"> <li>• L. Withrow announced Executive Session at 3:55 pm for 20 minutes for <ul style="list-style-type: none"> <li>○ RCW 42.30.110(1)(g) Evaluate the performance of a public employee. <ul style="list-style-type: none"> <li>▪ L. Withrow extended the Executive Session 10 minutes</li> <li>▪ L. Withrow extended the Executive Session 15 minutes</li> <li>▪ Executive Session ended at 4:40 pm</li> </ul> </li> </ul> </li> </ul>
11. Adjournment	<ul style="list-style-type: none"> <li>• No action was taken as a result of the Executive Session</li> <li>• L. Withrow adjourned the meeting at 4:41 pm</li> </ul>

Attest:

M. Murphy, Secretary

Aaron Edwards, CEO

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W. Kenck, Executive Assistant

DRAFT



# LAKE CHELAN HEALTH

## MEETING AGENDA

<b>Name of Group:</b> Governance Committee	<b>Date of Meeting:</b> 1/29/25	<b>Time of Meeting:</b> 9:00 am
<b>Facilitator:</b> Mary Murphy		<b>Location:</b> Zoom
<b>Recorder:</b> Mary Murphy		
<b>Members present:</b>		
X BOC Representative (Mary Murphy)		X BOC Representative (Lori Withrow)
<b>Other: {other attendees or guests}</b>		
<b>Meeting Objectives(s)/Purpose:</b> Develop Flowchart of LCH Board tasks to develop new and review existing Board policies		

FI – For Information; FD – For Discussion; FM – For Motion

<b>Time</b>	<b>Agenda Item</b>	<b>Topic/Action</b>
9:00 am	1. Call to Order	
9:50 am	2. Develop a flowchart to guide Board tasks regarding Board policy development and updates.	<p>2. Committee developed flowchart to include all main steps to update Board policies, and to align with the organization's policies, procedures and timelines.</p> <p>3. Committee to send draft flowchart to LCH Administration for review and input.</p>
9:50 am	3. Adjournment	
<b>Next meeting: TBD</b>		

WARRANT #'S A/P	AMOUNT	CAPITAL	BOARD MTG - FEB 2025	WARRANT#'S PAYROLL	AMOUNT	pay period
AP DIRECT DEPOSIT	\$ 10,155.83			Direct Deposit	\$ 538,338.03	1/11/2025
238658-238736	\$ 379,748.04			PAYROLL TAXES	\$ 204,562.44	1/11/2025
238737-238813	\$ 433,299.59			Child Support	\$ 320.37	1/11/2025
238814-238849	\$ 14,492.57			77529	\$ 805.63	1/11/25 RUN #3
DOR	\$ 24,539.59			VOIDED DD	\$ (805.63)	1/11/25 RUN #2
retirement	\$ 55,487.21			Direct Deposit	\$ 534,252.03	1/25/2025
238850-238929	\$ 455,077.13	238860 voided		PAYROLL TAXES	\$ 195,684.99	1/25/2025
238930-238931	\$ 5,570.06			Child Support	\$ 320.37	1/25/2025
FPL	\$ 33,496.97					
LTC	\$ 27,613.37					
AP DIRECT DEPOSIT	\$ 83,500.00					
DOR HOSP LIC	\$ 1,954.00					
DOR CLINIC LIC	\$ 446.00					
	<b>\$ 1,525,380.36</b>				<b>\$ 1,473,478.23</b>	



**Chelan County Public Hospital District No. 2  
Special Meeting of the Board of Commissioners  
Meeting Minutes February 10, 2025 at 8:00 am  
in person and via Microsoft TEAMS**

**Commission Attendance:**

(  not present  present )

- |  |  |   |
|--|--|---|
| <input checked="" type="checkbox"/> Jordana LaPorte, Chair   | <input checked="" type="checkbox"/> Mary Murphy, Secretary | <input checked="" type="checkbox"/> Len England |
| <input checked="" type="checkbox"/> Lori Withrow, Vice Chair | <input checked="" type="checkbox"/> Doug Gibson (Virtual)  |   |

**Staff Participants:** A. Edwards, B. Truman, S. Ottley, R. Montgomery, L. Sahlinger, M. Hillman, A. Oden,

**Community Members:**

**Recorder:** Wendy Kenck

Agenda Item	Topic/Action
1. Call to Order	<ul style="list-style-type: none"> <li>• J. LaPorte called the meeting to order at 8:01 am</li> </ul>
2. Public Comment	<ul style="list-style-type: none"> <li>• No Public Comment</li> </ul>
3. Executive Session	<ul style="list-style-type: none"> <li>• J. LaPorte announced Executive Session at 8:05 am for 55 minutes for               <ul style="list-style-type: none"> <li>○ RCW 42.30.110(1)(o) to consider information regarding staff privileges or quality improvement committees under RCW 70.41.205</li> <li>○ J. LaPorte emphasized that discussions held in the Executive Session must remain confidential. Any Board rulings or decisions must be made following the Executive Session.</li> </ul> </li> <li>• Executive Session extended 10minutes</li> <li>• Executive Session extended 5 minutes</li> <li>• Executive Session extended 5 minutes</li> <li>• Executive Session extended 5 minutes</li> <li>• Executive Session extended 10 minutes</li> <li>• Executive Session extended 5 minutes</li> <li>• Executive Session ended at 9:40 am</li> </ul>
4. Adjournment	<ul style="list-style-type: none"> <li>• No action was taken as a result of the Executive Session</li> <li>• J. LaPorte adjourned the meeting at 9:41 am</li> </ul>

Attest:

\_\_\_\_\_  
M. Murphy, Secretary

\_\_\_\_\_  
Aaron Edwards, CEO

\_\_\_\_\_  
W. Kenck, Executive Assistant



## MINUTES

<b>Group:</b> Finance Committee 2/19/25, 10AM in person and via Teams		
<b>Facilitator:</b> Jordana Laporte		<b>Recorder:</b> W. Kenck
<b>Member Attendance:</b>		
<input checked="" type="checkbox"/> Jordana Laporte, BOC	<input type="checkbox"/> Shawn Ottley, COO	<input checked="" type="checkbox"/> Aaron Edwards, CEO
<input checked="" type="checkbox"/> Lori Withrow, BOC	<input checked="" type="checkbox"/> Brant Truman, CFO	
<b>Participants:</b> V. Bodle, M. Miller, S. Nau, R. Montgomery,		

FI – For Information; FD – For Discussion; FR – For Recommendation

<i>Agenda Item</i>	<i>Topic/Action</i>
<ul style="list-style-type: none"> <li>• Call to Order</li> </ul>	<ul style="list-style-type: none"> <li>• J. Laporte called meeting to order at 10:01 am</li> </ul>
<ul style="list-style-type: none"> <li>• Goals</li> </ul>	<ul style="list-style-type: none"> <li>• The Committee has set an ambitious target of achieving a net income of \$2M.</li> <li>• Develop a 5-year Capital Budget.</li> </ul>
<ul style="list-style-type: none"> <li>• New Business</li> </ul>	<ul style="list-style-type: none"> <li>• The Finance Committee recommends presenting Resolution 2025-1 regarding Capital Expenditures to the Board for approval.</li> </ul>
<ul style="list-style-type: none"> <li>• <i>Old Business</i></li> </ul>	<ul style="list-style-type: none"> <li>• Project Financing               <ul style="list-style-type: none"> <li>○ The USDA at the state level can review and approve debt up to \$7.5M. However, there is a slim chance of receiving approval and funding within the required timeframe. The company is currently awaiting confirmation from the USDA on whether they will proceed. If not, the company will withdraw the USDA application and explore alternative public funding options.</li> <li>○ \$1.14M has been spent from LCH funds on the EMS and Specialty Clinic projects.</li> <li>○ SNAP has experienced a \$1.1M reduction in reimbursements.</li> <li>○ The EMS Cost Report anticipates \$200K in receivables.</li> <li>○ The final payment from USDA for the new hospital has been received.</li> </ul> </li> <li>• Self Pay               <ul style="list-style-type: none"> <li>○ Ongoing efforts to identify improvements in the self-pay process.</li> <li>○ The company is researching potential vendors for a supplemental system to integrate with the current payment and processing system, with the goal of enhancing customer communication.</li> <li>○</li> </ul> </li> </ul>
<ul style="list-style-type: none"> <li>• Reports</li> </ul>	<ul style="list-style-type: none"> <li>• V. Bodle presented the unaudited January 2025 Financial Statement</li> </ul>

	<ul style="list-style-type: none"> <li>○ V. Bodle will further research the impact of the B&amp;O tax on hospital finances.</li> <li>○ The SAO audit is still pending finalization of the report.</li> <li>• S. Nau reviewed the claims vs remit data</li> </ul>
<ul style="list-style-type: none"> <li>• Adjournment</li> </ul>	<ul style="list-style-type: none"> <li>• J. LaPorte adjourned the meeting at 11:20 am</li> </ul>



# LAKE CHELAN HEALTH

**Unaudited Financial Statements**

**for**

**For the month ended January 31, 2025**

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**Balance Sheet**  
**Lake Chelan Health**

	Current Month 1/31/2025 unaudited	Prior Year 12/31/2024 AUDITED	Prior Year 1/31/2024 Unaudited
<b>ASSETS:</b>			
CASH	534,935	\$ 658,937	\$ 894,528
PATIENT RECEIVABLES	12,668,022	12,753,621	\$ 10,739,384
LESS: RESERVES FOR ALLOWANCES	(6,599,717)	(6,866,738)	\$ (5,838,713)
NET PATIENT ACCOUNTS RECEIVABLES	6,068,306	5,886,883	4,900,672
ESTIMATED THIRD-PARTY PAYOR SETTLEMENTS	227,722	(100,278)	269,410
OTHER RECEIVABLES	693,713	390,232	386,871
INVENTORIES	336,278	335,411	214,405
PREPAID EXPENSES	399,203	321,417	371,849
TOTAL CURRENT ASSETS	\$ 8,260,156	\$ 7,492,603	\$ 7,037,735
GENERAL RESERVES	\$ 1,219,007	1,341,519	\$ 1,430,535
Unrestricted Reserves	\$ 6,439,251	6,405,615	\$ 3,429,560
Internally Restricted Reserves	\$ 4,139,524	4,139,524	\$ 4,139,524
2018 BONDS	0	0	\$ -
USDA 2023	410,400	410,400	\$ 273,600
Coastal Bank	50,002	50,000	\$ -
TOTAL LIMITED USE ASSETS	\$ 12,258,184	\$ 12,347,058	\$ 9,273,218
LAND	\$ 4,133,845	4,133,845	\$ 4,787,901
LAND IMPROVEMENTS	0	0	\$ 5,625,071
BUILDINGS & IMPROVEMENTS	10,390	10,390	\$ 996,641
EQUIPMENT	10,669,111	10,471,292	\$ 10,523,549
SOFTWARE	2,182,181	2,166,371	\$ 2,150,462
NEW HOSPITAL	44,757,019	44,783,709	\$ 44,718,237
LOCUM HOUSING	635,484	635,484	\$ -
GASB 87 BUILDINGS AND EQUIPMENT	1,742,567	1,742,567	\$ -
CONSTRUCTION-IN-PROGRESS - PROJECTS	1,159,979	926,355	\$ 90,958
CONSTRUCTION-IN-PROGRESS - HOSPITAL	8,750	9,290	\$ 72,578
GROSS PROPERTY, PLANT, & EQUIPMENT	65,299,327	64,859,304	68,973,397
LESS: ACCUMULATED DEPRECIATION	(15,096,917)	(14,753,073)	\$ (18,609,819)
GASB 87 AMORTIZATION	(547,446)	(543,279)	
NET PROPERTY, PLANT, & EQUIPMENT	\$ 49,654,964	\$ 49,562,952	\$ 50,363,578
DEFERRED ITEMS	\$ 1,534,126	1,535,731	\$ 2,479,192
TOTAL ASSETS	\$ 71,707,431	\$ 70,938,345	\$ 69,153,723
<b>LIABILITIES:</b>			
ACCOUNTS PAYABLE	\$ 1,301,107	1,201,176	1,000,445
ACCRUED PAYROLL	270,916	861,750	853,283
ACCRUED VACATION/HOLIDAY/SICK PAY	1,141,895	1,005,811	890,485
PAYROLL TAXES PAYABLE	24,402	(44,816)	(37,687)
ESTIMATED THIRD-PARTY PAYOR SETTLEMENTS	0	0	0
OTHER CURRENT LIABILITIES	1,113,303	734,009	867,440
INTEREST PAYABLE	180,925	91,605	185,122
CURRENT PORTION OF LTD (BONDS/MORTGAGES)	1,046,831	1,046,831	1,046,831
LINE OF CREDIT	0	0	0
TOTAL CURRENT LIABILITIES	\$ 5,079,379	\$ 4,898,368	\$ 4,605,899
CAPITALIZED LEASES	\$ -	\$ -	\$ -
2018 BONDS	\$ 18,357,109	18,368,093	18,716,483
2013 BONDS	4,283,865	4,283,436	4,658,709
USDA LOANS	18,520,475	17,710,433	18,103,057
LEASES	2,114,729	2,114,879	1,853,465
PAID LEAVE - LT PORTION	82,334	200,959	304,376
TOTAL LONG TERM LIABILITIES	\$ 43,358,513	\$ 42,677,800	\$ 43,636,089
DEFERRED ITEMS	\$ 4,183,301	4,212,308	3,922,975
TOTAL LIABILITIES	\$ 52,601,193	\$ 51,786,475	\$ 52,164,964
<b>FUND BALANCE:</b>			
UNRESTRICTED FUND BALANCE	\$ 19,161,013	17,126,756	17,041,438
TEMPORARY RESTRICTED FUND BALANCE	\$ -	0	0
YTD Net Revenue/(Expenses)	(54,774)	2,025,114	(52,678)
TOTAL NET ASSETS	\$ 19,106,238	\$ 19,151,870	\$ 16,988,760
<b>TOTAL LIABILITIES AND NET ASSETS</b>	<b>\$ 71,707,431</b>	<b>\$ 70,938,345</b>	<b>\$ 69,153,723</b>

property taxes are accrued over 12 months

**Statement of Revenue and Expense**  
**Lake Chelan Health**

For the month ended January 31, 2025

	CURRENT MONTH				Prior Year 01/31/24
	Actual 01/31/25	Budget 01/31/25	Positive (Negative) Variance		
GROSS PATIENT SERVICE REVENUES					
INPATIENT	\$ 972,973	\$ 698,900	274,073	39%	\$ 774,953
OUTPATIENT	4,562,820	5,477,074	(914,254)	-17%	4,569,749
TOTAL PATIENT SERVICE REVENUES	<u>5,535,792</u>	<u>6,175,974</u>	<u>(640,181)</u>	-10%	<u>5,344,702</u>
DEDUCTIONS FROM REVENUE					
CONTRACTUAL ALLOWANCES	(2,020,334)	(2,554,554)	534,220	-21%	(2,070,656)
BAD DEBT	(184,075)	0	(184,075)	0.00%	(103,458)
CHARITY	(31,705)	0	(31,705)	0.00%	(45,676)
TOTAL DEDUCTIONS FROM REVENUES	<u>(2,236,114)</u> 40.4%	<u>(2,554,554)</u> 41.4%	<u>318,441</u>	12%	<u>(2,219,791)</u> 41.5%
NET PATIENT SERVICE REVENUES	<u>3,299,679</u>	<u>3,621,419</u>	<u>(321,741)</u>	-9%	<u>3,124,912</u>
OTHER OPERATING REVENUES	<u>34,659</u>	<u>22,417</u>	<u>12,243</u>	55%	<u>36,903</u>
TOTAL OPERATING REVENUES	<u>3,334,338</u>	<u>3,643,836</u>	<u>(309,498)</u>		<u>3,161,814</u>
OPERATING EXPENSES					
SALARIES/WAGES	1,707,616	1,922,215	214,599	11%	1,660,788
EMPLOYEE BENEFITS	355,489	416,463	60,975	15%	326,134
PROFESSIONAL SERVICES	274,433	249,159	(25,274)	-10%	106,655
FOOD SUPPLIES	20,961	19,329	(1,632)	-8%	16,428
MINOR EQUIPMENT	34,435	31,093	(3,342)	-11%	195,335
SUPPLIES	168,458	232,643	64,186	28%	231,892
PLANT UTILITIES	32,934	30,254	(2,679)	-9%	39,733
PURCHASED SERVICES	452,039	334,376	(117,664)	-35%	247,203
REPAIR/MAINTENANCE	90,902	100,412	9,510	9%	90,533
PUBLIC RELATIONS/RECRUITM	6,290	18,634	12,343	66%	6,115
RENT/LEASES	80,452	61,633	(18,819)	-31%	75,183
INSURANCE	42,947	45,774	2,827	6%	40,780
LICENSES/TAXES	34,910	31,325	(3,585)	-11%	16,792
DUES/SUBSCRIPTIONS/OTHER	67,181	67,200	19	0%	57,501
TRAVEL/TRAINING	4,107	14,736	10,629	72%	10,360
DEPRECIATION	303,095	362,973	59,877	16%	316,697
AMORTIZATION	15,475				
TOTAL OPERATING EXPENSES	<u>3,691,725</u>	<u>3,938,220</u>	<u>261,970</u>	6.7%	<u>3,438,129</u>
<b>NET OPERATING SURPLUS (LOSS)</b>	<b>(357,388)</b>	<b>(294,384)</b>	<b>(63,003)</b>		<b>(276,314)</b>
NON-OPERATING REVENUES	274,012	256,233	17,779		223,635
TAXES					
INTEREST					
GIFTS & GRANTS	28,600		28,600		
OTHER	0	0	0		0
NET INCOME margin	<u>(54,775)</u> -1.6%	<u>(38,151)</u> -1.0%	<u>(16,624)</u>		<u>(52,679)</u> -1.7%
<b>TOTAL NET INCOME (LOSS)</b>	<b>\$ (54,775)</b>	<b>\$ (38,151)</b>	<b>(16,624)</b>		<b>\$ (52,679)</b>

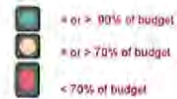
**Statement of Revenue and Expense  
Lake Chelan Health**

For the month ended January 31, 2025

	YEAR-TO-DATE				Prior Year 01/31/24
	Actual 01/31/25	Budget 01/31/25	Positive (Negative) Variance		
<b>GROSS PATIENT SERVICE REVENUES</b>					
INPATIENT	\$ 972,973	\$ 698,900	274,073	39%	\$ 774,953
OUTPATIENT	4,562,820	5,477,074	(914,254)	-17%	4,569,749
<b>TOTAL PATIENT SERVICE REVENUES</b>	<b>5,535,792</b>	<b>6,175,974</b>	<b>(640,181)</b>	<b>-10%</b>	<b>5,344,702</b>
<b>DEDUCTIONS FROM REVENUE</b>					
TOTAL DEDUCTIONS FROM REVENUES	(2,020,334)	(2,554,554)	534,220	-21%	(2,070,656)
BAD DEBT	(184,075)	0	(184,075)	0.00%	(103,458)
CHARITY	(31,705)	0	(31,705)	0.00%	(45,676)
<b>TOTAL DEDUCTIONS FROM REVENUES</b>	<b>(2,236,114)</b>	<b>(2,554,554)</b>	<b>318,441</b>	<b>12%</b>	<b>(2,219,791)</b>
	40.4%	41.4%			41.5%
<b>NET PATIENT SERVICE REVENUES</b>	<b>3,299,679</b>	<b>3,621,419</b>	<b>(321,741)</b>	<b>-9%</b>	<b>3,124,912</b>
<b>OTHER OPERATING REVENUES</b>	<b>34,659</b>	<b>22,417</b>	<b>12,243</b>	<b>55%</b>	<b>36,903</b>
<b>TOTAL OPERATING REVENUES</b>	<b>3,334,338</b>	<b>3,643,836</b>	<b>(309,498)</b>	<b>-8%</b>	<b>3,161,814</b>
<b>OPERATING EXPENSES</b>					
SALARIES/WAGES	1,707,616	1,922,215	214,599	11%	1,660,788
EMPLOYEE BENEFITS	355,489	416,463	60,975	15%	325,134
PROFESSIONAL SERVICES	274,433	249,159	(25,274)	-10%	106,655
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MINOR EQUIPMENT SUPPLIES	34,435 168,458	31,093 232,643	(3,342) 64,186	-11% 28%	195,335 231,892
PLANT UTILITIES	32,934	30,254	(2,679)	-9%	39,733
PURCHASED SERVICES	452,039	334,376	(117,664)	-35%	247,203
REPAIR/MAINTENANCE	90,902	100,412	9,510	9%	90,533
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RENT/LEASES	80,452	61,633	(18,819)	-31%	75,183
INSURANCE	42,947	45,774	2,827	6%	40,780
LICENSES/TAXES	34,910	31,325	(3,585)	-11%	16,792
DUES/SUBSCRIPTIONS/OTHER	67,181	67,200	19	0%	57,501
TRAVEL/TRAINING	4,107	14,736	10,629	72%	10,360
DEPRECIATION AMORTIZATION	318,570 0	362,973 0	44,402 0	12%	316,697
<b>TOTAL OPERATING EXPENSES</b>	<b>3,691,725</b>	<b>3,938,220</b>	<b>246,495</b>	<b>6.3%</b>	<b>3,438,129</b>
<b>NET OPERATING SURPLUS (LOSS)</b>	<b>(357,388)</b>	<b>(294,384)</b>	<b>(63,003)</b>		<b>(276,314)</b>
<b>NON-OPERATING REVENUES</b>		256,233			
PROPERTY TAXES FOR OPERATIONS	232,158				234,958
GRANTS/CONTRIBUTIONS	30,600				
INVESTMENT EARNINGS	33,910				34,968
OTHER EXPENSE		0	0		
TAXES FOR DEBT SVC PMTS	108,389				106,291
INTEREST EXPENSE	(147,082)				(152,581)
GAIN / (LOSS) ON ASSET DISPOSAL	44,637				0
<b>NET INCOME</b>	<b>(54,775)</b>	<b>(38,151)</b>	<b>(16,624)</b>		<b>(52,879)</b>
margin	-1.6%	-1.0%			-1.7%
<b>TOTAL NET INCOME (LOSS)</b>	<b>\$ (54,775)</b>	<b>\$ (38,151)</b>	<b>\$ (16,624)</b>		<b>\$ (52,879)</b>

## Patient Statistics Lake Chelan Health

For the month ended January 31, 2025



Current Month			Last Year Month			
Actual vs Budget	01/31/25	BUDGET	STATISTICS	Actual vs Budget	01/31/24	BUDGET
<span style="color: green;">●</span>	118	120	Total Days Cash on Hand	<span style="color: red;">●</span>	99	120
<span style="color: green;">●</span>	81	40	Net AR Days	<span style="color: green;">●</span>	42	40
<span style="color: green;">●</span>	1.81	1.25	Debt Coverage Ratio	<span style="color: green;">●</span>	2.03	1.25
<span style="color: red;">●</span>	208	175	Payroll FTEs	<span style="color: green;">●</span>	191	175

Current Month			Year-To-Date					
Actual vs Budget	Actual 01/31/25	Prior Year 01/31/24	BUDGET	STATISTICS	Actual vs Budget	Actual 01/31/25	Prior Year 01/31/24	BUDGET
<b>Admissions</b>								
NA	24	20	NA	medical	NA	24	20	NA
NA	0	0	NA	surgical	NA	0	0	NA
NA	9	11	NA	OB	NA	9	11	NA
NA	33	31	NA	Acute	NA	33	31	NA
NA	4	5	NA	Swing Bed	NA	4	5	NA
NA	9	11	NA	Total Deliveries	NA	9	11	NA

<b>Patient Days</b>								
<span style="color: red;">●</span>	63	74	71	medical	<span style="color: red;">●</span>	63	74	71
NA	0	0	NA	surgical	NA	0	0	NA
<span style="color: red;">●</span>	21	23	15	OB	<span style="color: green;">●</span>	21	23	15
<span style="color: green;">●</span>	84	97	86	Acute	<span style="color: green;">●</span>	84	97	86
<span style="color: green;">●</span>	73	49	64	Swing Bed	<span style="color: green;">●</span>	73	49	64
<span style="color: green;">●</span>	16	17	11	Total Newborn Days	<span style="color: green;">●</span>	16	17	11
<span style="color: green;">●</span>	173	163	161	TOTAL PATIENT DAYS	<span style="color: green;">●</span>	173	163	161
<b>Average Length of Stay</b>								
<span style="color: green;">●</span>	2.5	3.1		Total Inpatient	<span style="color: green;">●</span>	2.5	3.1	
<span style="color: green;">●</span>	17.4	9.8		Swing Bed	<span style="color: green;">●</span>	17.4	9.8	
<b>Avg Daily Census - Hospital</b>								
	2.7	3.1		Total Inpatient		2.7	3.1	
	2.4	1.6		Swing Bed		2.4	1.6	
	5.1	4.7		Total		5.1	4.7	

<span style="color: yellow;">●</span>	446	456	581	ED Visits	<span style="color: red;">●</span>	446	456	581
<span style="color: red;">●</span>	53	78	85	Surgeries	<span style="color: red;">●</span>	53	78	85
<span style="color: yellow;">●</span>	1161	1272	1337	Imaging Procedures	<span style="color: yellow;">●</span>	1161	1272	1337
<span style="color: green;">●</span>	3523	2944	3241	Lab Tests	<span style="color: green;">●</span>	3523	2944	3241
<span style="color: green;">●</span>	695	712	766	Rehab Visits	<span style="color: green;">●</span>	695	712	766
<span style="color: yellow;">●</span>	109	93	135	EMS Runs	<span style="color: red;">●</span>	109	93	135
<span style="color: yellow;">●</span>	801	779	1144	Total Clinic Visits	<span style="color: red;">●</span>	801	779	13715
<span style="color: red;">●</span>	52	102	93	Specialty	<span style="color: red;">●</span>	52	102	1092
	170	109		Primary care		170	145	0
				Express Care (budget shows				
<span style="color: red;">●</span>	579	532	1051	primary and express)	<span style="color: red;">●</span>	579	532	12623
	23	22		working days		23	22	

**Note #1 Contractuals**

Contractuals do not include reimbursement that will happen when the cost report is filed.  
AR decreased \$144k from November to December  
Charity care was \$31,705 for January. Bad Debt was \$184,075.  
Charity and Bad Debt are 3.9% of gross charges ytd compared to 4.18% this same time last year and 4.28% in December 2024.

**Note #2 SALARIES AND WAGES**

N/A

**Note #3 PROFESSIONAL SERVICES**

Med Surg over budget by \$6,500 due to CVCH expense  
Dermatology over budget but \$9,385. Revenue is also over budget.  
ED Pro Fees over budget \$8,209

**Note #4 MINOR EQUIPMENT AND SUPPLIES (budget spread over 12 months)**

EMS over budget by \$7,116  
RHC over \$4,037

**Note #5 SUPPLIES & FOOD**

Food - Supplies is over \$1,632. Revenue is over \$6,402.

**Note #6 PURCHASED SERVICES**

Med Surg is over budget \$47,800 due to increase use in travelers  
Surgery is over budget by \$14,166. Whitman Partners was not budgeted. Will look at amending.  
Lab is over budget by \$11,304. Budget appears too low based on history. Will look at amending.  
Anesthesia is over budget by \$6,708.  
Business Office is over budget by \$10,701. Will review budget.  
Administration is over budget by \$7,160. Will review budget.

**Note #7 UTILITIES**

Utility costs are higher in the winter.

**Note #8 RENTS/LEASES**

Radiology is over budget by \$13,400 due to MRI lease. All expenses were spread over 12 and this is expected to end in May.

The reclass to GASB 87 has not been done in 2025. The budget reflects the reclass.  
This is why depreciation and amortization are under budget

**Note #9 LICENSES/TAXES**

Hospital licenses were paid in January 2025

**Note #10 NON OPERATING REVENUE**

The sale of the old hospital resulted in a net gain of \$996,288  
There were assets that had not been fully depreciated  
Per GASB we are to recognize the gain over 24 months.  
Current gain recognized is \$223,185 for 2024 and \$44,637 for 2025

For the month ended January 31, 2025

12/31/2024	GL ACCOUNT #	ACCT DESCRIPTION	1/31/2025	EXPLANATION	
\$126,796	10002000	General Fund Cash In Bank (Wheatland)	\$123,089	<b>(\$3,707)</b>	
				\$2,936,373 deposits	
				\$0 enhancement pmt	
				medicalaid cost report	
				<b>(\$17,802)</b> lsys/payplus fees	
				<b>(\$11,529)</b> fees mckesson/cardinal	
				<b>(\$35)</b> fees and interest	
				rebates	
				\$4,285 café sales	
				<b>(\$2,915,000)</b> transfer to county	
\$233,121	10004000	General Fund Cash w/ Treasurer	\$639,019	<b>\$405,898</b>	
				<b>(\$1,600,136)</b> AP	
				<b>(\$2,563)</b> Voids	
				\$1,602,699 warrants issued	
				<b>(\$1,626,304)</b> warrants redeemed	
				\$2,915,000 Bank Transfers from 10002000	
				\$130,000 Bank Transfer to/from 10106000	
				<b>(\$88,992)</b> Bank Transfer for USDA pmt	
				\$0 Bank Transfer to USDA reserve	
				<b>(\$1,746,885)</b> Payroll/Benefits	
				<b>(\$24,540)</b> B&O taxes	
				\$2,331 Property Taxes	
				\$34 Leasehold Taxes & Misc Taxes	
				\$845,253 USDA final loan close out	
\$14,973	10009000	cash clearing	<b>(\$20,216)</b>	<b>(\$36,189)</b>	pmts posted as remits received
\$284,049	20070000	warrants outstanding	<b>(\$208,954)</b>	<b>(\$491,003)</b>	
				<b>(\$1,589,780)</b> remits (payroll/benefits/b&O)	
				\$1,626,304 warrants redeemed	
				<b>(\$1,602,699)</b> warrants issued ap	
				\$1,072,590 remits redeemed	
				\$2,563 voids	
\$1,005,599	10106000	AMB RESERVE	\$879,948	<b>(\$125,651)</b>	
				transfer to reserves	
				<b>(\$130,000)</b> transfer from reserves (bond pm & ops)	
				\$4,333 property taxes	
				\$0 leasehold taxes	
				\$16 interest	
\$335,928	10910000	2018 GO BOND	\$339,059	<b>\$3,131</b>	
				\$3,131 property taxes	
				\$0 bond pmt	
\$0	10911000	2018 CASH BOND	\$0	<b>\$0</b>	interest
					reclassified to general fund
\$320,400	10916000		\$320,400	<b>\$0</b>	funded year 3 per LOC
\$90,000	10917000		\$90,000	<b>\$0</b>	funded year 3 per LOC
\$410,400			\$410,400	<b>\$0</b>	
\$0	10915000	CASH/TREAS LTGO BOND	\$0	<b>\$0</b>	paid bond interest
\$10,545,139	10760000	RESERVES	\$10,578,775	<b>\$33,636</b>	\$1,000,000 from general
				<b>\$33,636</b>	interest
\$50,002	10764000	COASTAL BANK	\$50,002	<b>\$0</b>	
					interest
\$13,006,007			\$12,793,121	<b>(\$212,886)</b>	6
					<b>Days of Cash on Hand</b>
					Cash:
					current assets 534,935
					unrestricted reserves 1,219,007
					unrestricted reserves 6,439,251
					<u>8,193,192</u>
					USDA reserve 460,402
					restricted reserves - pending covid ca 4,139,524
					<u>4,599,926</u>
					Expenses:
					total YTD 3,691,725
					less depreciation -318,570
					<u>3,373,155</u>
					number of days YTD 0
					<b>Days of Cash on Hand</b> 75.3
					<b>Restricted Days Cash on Hand</b> 42.3
					<b>Total Days Cash on Hand</b> 117.6

**CHELAN COUNTY PUBLIC HOSPITAL DISTRICT NO. 2  
LAKE CHELAN HEALTH  
CHELAN COUNTY, WA**

**RESOLUTION No. 2025-1**  
*Capital Expenditure*

**RESOLUTION OF THE BOARD OF COMMISSIONERS OF CHELAN COUNTY  
PUBLIC HOSPITAL DISTRICT NO. 2 EXPRESSING OFFICIAL INTENT  
REGARDING CERTAIN CAPITAL EXPENDITURES TO BE REIMBURSED WITH  
PROCEEDS OF AN OBLIGATION**

A RESOLUTION of the Board of Commissioners of Public Hospital District No. 2, Chelan County, Washington (the “District”), expressing official intent regarding certain capital expenditures to be reimbursed with proceeds of an obligation.

RESOLVED, by the Board of Commissioners (the “Board”) of the District, as follows:

WHEREAS, the District has developed a list of capital projects (the “Projects”) described in Exhibit A hereto;

WHEREAS, all or a portion of the expenditures relating to the Projects (the “Expenditures”) (i) have been paid within the sixty days prior to the passage of this resolution or (ii) will be paid on or after the passage of this resolution; and

WHEREAS, the District reasonably expects to reimburse itself for the Expenditures with the proceeds of an obligation the interest on which will be excluded from the gross income of the owner or owners of such obligation;

NOW, THEREFORE, it is hereby DECLARED and ORDERED, as follows:

*Section 1.* The District reasonably expects to reimburse all or a portion of the Expenditures with the proceeds of an obligation the interest on which will be excluded from the gross income of the owner or owners of such obligation.

*Section 2.* The maximum principal amount of the obligations expected to be issued for the Projects is \$500,000.

*Section 3.* This resolution is a declaration of official intent to reimburse expenditures pursuant to Treasury Regulations Section 1.150-2.

*Section 4.* All actions of the officers, agents and employees of the District that are in conformity with the purposes and intent of this resolution, whether taken before or after the adoption hereof, are hereby ratified, confirmed and adopted.

*Section 5.* This resolution shall be in full force and effect immediately upon its adoption.

\* \* \* \* \*

CERTIFICATION

This is to certify that the foregoing is a true copy of a resolution, as the resolution appears on the minute books of the District, adopted by the Board of Commissioners of Chelan County Public Hospital District No. 2 at a meeting of said Board held on February 28, 2025, which was called and held pursuant to and with all notice required by law and the Bylaws of the District and at which meeting a quorum was initially present and a majority of which was acting throughout.

ADOPTED AND APPROVED by the Board of Commissioners of the Chelan County Public Hospital District No. 2 at a regular and open public meeting that was held on this 28<sup>th</sup> day of February 2025, where a quorum was present.

By \_\_\_\_\_  
Chairperson of the Board

By \_\_\_\_\_  
Vice Chairperson of the Board

By \_\_\_\_\_  
Secretary of the Board

By \_\_\_\_\_  
Member of the Board

By \_\_\_\_\_  
Member of the Board

By \_\_\_\_\_  
District Chief Executive Officer

## **EXHIBIT A**

### **DESCRIPTION OF PROJECT**

The Project includes constructing, renovating, improving, and/or equipping certain health care facilities operated by the District, consisting of the construction of leasehold improvements to, and equipment for, an existing rural health clinic located in the City of Chelan, Washington (the "Project"). The total cost of the Project is estimated to not exceed \$500,000 based on information currently available to the District.



## CEO Board Report (as of 2/18/25)

### People:

- Our new hospitalists Dr. Kalliath, Dr. Coyne and Dr. Saigal are fitting in well with staff, our UW Residents, and CVCH providers. All seem to be working well together.
- Dr. Goeser and PA Guadalupe Martinez-Vera are accepting new patients down at the clinic and often have same day access to appointments!
- Continue to work on filling open positions at MA, CNA, nursing in OB &MSU), PT/OT, MRI and Lab Tech, patient access, family practice provider, internist (both MD/DO and APP), and HR. Go to [www.lakechelanhealth.org/careers/](http://www.lakechelanhealth.org/careers/) to see what is available and apply and see which positions have additional incentives!

### Community:

- CHNA has been initiated, should have a kickoff meeting here shortly.
- Attended WSHA advocacy days in Olympia where all three of our legislators took the time to visit. Our primary emphasis was on preserving Medicaid funding (via SNAP) which is very likely subject to cuts. Also focused on legislation to help put guard rails on insurance prior authorization and the red tape that plagues that process now.
- Continue to try to understand how the current executive orders will impact our hospital district.
- The Health and Wellness Foundation hosted a Heart Health Lunch on Feb 13, at Sigillo Cellars. Shawn, Marcus and I attended the sold-out event. Despite the full venue early indication is that the event raised only roughly \$2K.
- Attended the "State of the City" meeting at the community center, also had a very positive preconstruction meeting with the city regarding the EMS project.
- Attended both an AWPHD and Rural Health Collaborative board meetings this past month.

### Quality:

- Supporting the work of our medical staff in beginning the process of reviewing all of our Delineation of Privileges.
- Had a routine Department of Health licensure inspection, still awaiting the full report but the early indication is that we did fairly well.

### Financial:

- Overall loss of 54K this past month with gross revenue only exceeding 2024 by roughly 200K. Inpatient revenue was up while outpatient missed budget by a wide margin (driven by a lower surgery volume).
- I attended a meeting with Molina and our billing staff about excessive recent inpatient denials without timely notice. Our hope is that we will see improvements from the insurance company.
- Inpatient admissions were up year over year, days were down, swing bed days dramatically increased year over year, EMS runs, labs and express care, and primary care visits are up year over year. Rehab, imaging, L&D, surgeries and specialty visits are all down year over year.

### Building for the Future:

- EMS and specialty projects are on track. Specialty is wrapping up framing and soon to head into drywall. The EMS project is headed out of conceptual into more detailed plans.
- Continue to look for more services to add to the coming specialty clinic.