

The Three Rivers Hospital Board of Commissioners called a regular meeting to order at 11:00 a.m. Tuesday, July 29, 2025. The meeting was held in the McKinley Building Conference Room at 507 Hospital Way, Brewster WA 98812 and virtually via the Microsoft Teams platform. The presiding officer was Mike Pruett, Board Chair.

A quorum was present, including:

Mike Pruett, Board Chair  
Cherri Thomas, Vice-Chair (Teams)  
Leslie McNamara, Secretary  
Tracy Shrable, Member  
David Garcia, Member

Others present:

Onsite

J. Scott Graham, Chief Executive Officer  
Jamie Boyer, Chief Operating Officer  
Anita Fisk, HR Director  
Dr. Ty Witt, Chief Medical Officer  
Shauna Field, Administrative Assistant  
German Meza, Quality Director  
Jennifer Bach, Accounting Controller  
Rosie Hartmann, Revenue Cycle Director  
Antone Eek, Interim Chief Financial Officer

Via Teams

Jeremy Vandelac, Ancillary Services Director  
Zac Allison, Radiology Supervisor  
Jennifer Best, PR & Marketing  
Amy Thomas, Chief Information Officer  
Mike Oberg, Informatics RN  
Michele Graham, Quality Coordinator  
DJ Dinjian, EVS Manager  
Rosie Poole, CS/HIM Manager  
Sandra Zamudio, Accounting Tech  
Michelle Welton, OR Manager  
Rob Wylie, Facilities Manager  
Teresa Stout, Discharge Planning  
Sergio Orozco, Bridgeport Mayor  
Jennifer Munson, Community Member  
Jacob Liddicoat, Theorem Architecture  
David Franklund, Theorem Architecture

**Vision, Mission & Values**

All took turns reading the vision, mission, and values statements.

**Agenda**

A motion was made by C. Thomas to accept the agenda as official; seconded by T. Shrable. Motion carried.

**Minutes from Previous Meeting**

A motion was made by L. McNamara to approve the June 26, 2025 Regular Board Meeting Minutes; seconded by D. Garcia. Motion carried.

**Public Comment**

L. McNamara acknowledged the employee spotlight for the month, Ruby Britt.

**Consent Items**

M. Pruett noted the Medical Staff applications, payroll, bad debt, charity care, and vouchers listed on the agenda. M. Pruett and L. McNamara recused themselves from approving the 7/3, 7/10, and 7/17 vouchers due to personal reimbursements.

Payroll Total:	Gross: <u>\$ 723,370.47</u>	Net: <u>\$ 511,058.31</u>
<u>6/8/25 - 6/21/25</u>	Gross: <u>\$ 363,911.94</u>	Net: <u>\$ 258,129.06</u>
<u>6/22/25 - 7/5/25</u>	Gross: <u>\$ 359,458.53</u>	Net: <u>\$ 252,929.25</u>
Vouchers Total:		<u>\$ 2,123,264.10</u>
<u>6/26/2025</u>	<u>104149-104184</u>	<u>\$ 476,477.67</u>
<u>7/3/2025*</u>	<u>104185-104238</u>	<u>\$ 352,731.88</u>
<u>7/10/2025*</u>	<u>104239-104261</u>	<u>\$ 421,116.65</u>
<u>7/17/2025*</u>	<u>104262-104329</u>	<u>\$ 413,351.52</u>
<u>7/24/2025</u>	<u>104330-104359</u>	<u>\$ 459,586.38</u>
Bad Debt		<u>\$ 34,816.80</u>
Financial Assistance		<u>\$ 57,559.51</u>

A motion was made by C. Thomas to accept the consent items as presented; seconded by D. Garcia. Motion carried.

**Foundation Report**

The Foundation paid for newspaper advertising for the 2026 M&O levy in the Methow Valley News and The Chronicle, with ads running for 2-3 weeks. The press releases for the scholarship recipients were also published.

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**Physician's Report**

Dr. Witt presented the Physician's Report. There were no new issues or problems to report. As a result of Melanie Tolen's echo cardiogram work with us, we have started having conversations with local cardiologists about potential partnerships. The group discussed concerns about the community not being aware we offer mammos and imaging services. Suggest renting a billboard that lists our CT, MRI, echo, mammography and ultrasound services. Dr. Ebaugh has been doing outreach to regional providers to introduce himself and build his practice in the area.

**Administration Report**

S. Graham presented the Administration Report. We have seen a significant drop in volumes with no swing bed admissions since June 20<sup>th</sup>. He met with Dr. Corsa, our ER director, to discuss the potential causes, including a drop in tourism, economic issues, and immigration concerns. We are making internal adjustments, controlling our labor costs and have implemented a soft freeze on spending other than necessities.

We have hired an interim CFO, Antone Eek, and we have been conducting interviews for the full-time position. Scott thanked Jennifer Bach, Sandra Zamudio, and Rosie Hartmann for helping cover our financial functions during the transition.

Regarding Medicaid changes because of the recent legislation, the full impact will not be felt until 2028 which does give us some time to prepare with our regional partners. One of the changes is that Medicaid patients will have to renew their application on a yearly basis so we will be exploring ways to provide reminders and assistance with the new process. The time frame for filing a claim was previously 3 months and that has now been dropped to 45 days. There are concerns that the community at large does not realize all the ways they will be impacted.

We attended a discovery visit with the facilitator for the future of healthcare in Okanogan County where we heard input from board members and leadership from all three local hospitals. It was a good start, and three potential scenarios were discussed—1) To act independently but collaborate as we do now, 2) A unified system where we share resources and have a formal organization that ties us together but remain separate entities, 3) To become a single system run by a single entity while maintaining all three locations. They will be here for an onsite visit on August 20.

We are coming the conclusion of our direct work with Virginia Mason but will be continuing our Bridge to Excellence work into the future.

Scott reminded the group to donate to the WSHA PAC to help with advocacy with our legislators.

**Renovation Proposal Updates**

Dave Franklund and Jacob Liddicoat presented new renderings of the renovation design. The group discussed details such as the location and size of the ambulance door, the decontamination room, helipad, ER entrances, location of the MRI truck, centralized registration, wheelchair access, and signage. The estimated construction time would be one year. L. McNamara suggested exploring a grant to build the power plant at least if the bond does not pass. 25% of the estimated budget is allocated to the power plant. A new roof is included at 2M. Work with the city and moving property lines will be needed. Dave Franklund advised to move ahead with the necessary pre-work and permits as much as we can. 20 additional parking spaces will be added. Dave will be available for when we start outreach to the community.

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**Break**

A break was held between 12:25 p.m. – 12:45 p.m.

**Finance Report**

S. Graham and Jennifer Bach presented the June Finance Report. Inpatient revenue was 270k which was 61k under budget. Patient volumes are seeing a downward trend nationwide. Outpatient revenue was 1.9M which was 100k under budget. Total revenue was 2.2M. Our contractual adjustments were 73k higher than anticipated. Expenses were 1.8M. We saw increased costs in pharmaceuticals and lab testing fees. We had an operating loss of 380k, with an overall loss of 101k. We are watching our expenses and encouraging low census. We have moved money out of reserves to the general fund just in case we need it but will return it if not. Our revenue collection is up. We applied for a micro funding grant of 10k to continue with the co-locating project in the clinic. We will be sending a termination letter to CPSI for the TimeTrex contract in order to meet the 60 day requirement.

A motion was made by L. McNamara to accept the Finance report as presented; seconded by C. Thomas. Motion carried.

**Quality Report**

G. Meza presented the Quality Report. The Quality Council met on July 10. For June, there were no medication events or falls with injury, though there were 3 assisted falls for a swing bed patient and 1 fall in the ER with no injury. The fall in the ER is being investigated for follow-up and possible staff training. We are meeting all state mandated metrics for trauma, chest pain, and stroke cases though there is room for improvement on documentation. Due to the nature of the ER, the focus is on treating the patient and documenting after the fact which is where improvement is needed. We had new travelers who were unaware of medication scanning requirements in the ER, which impacted our scan rate, but T. Smith has educated the staff. There were 5 surgery transfers from the ER which were all properly documented. We are up to date on our antimicrobial stewardship. For patient satisfaction, in June the ER was at 91% with 27 surveys, inpatient was 75% with 1 returned survey, and the clinic was 95% with 15 surveys. We saw 40% compliance with department improvement project documentation. They are working with departments to consolidate QI projects with the Bridge to Excellence work. They have converted their communication board to an electronic version. Their goal is to create a single electronic dashboard to cover all departments.

A motion was made by C. Thomas to accept the Quality Report; seconded by L. McNamara. Motion carried.

**Old Business****Capital Improvements Update**

No report.

**New Business**

**Resolution 2025-06: Special M&O Levy (November ballot)** – This is a backup resolution to put on the November ballot in case the August proposal fails. A motion was made by L. McNamara to approve the resolution; seconded by D. Garcia. Motion carried.

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**Resolution 2025-07: New Remodel Bond** – The resolution putting the new renovation bond proposal on the November ballot. A motion was made by T. Shrable to approve the resolution; seconded by D. Garcia. Motion carried.

**Resolution 2025-08: PRA Fee Schedule** – Our current fee schedule and policy for fulfilling public records requests is outdated. The cost for copies will remain the same, but we have updated the policy to address providing surveillance camera footage with guidance from our legal team and the state. A motion was made by L. McNamara to approve the new fee schedule; seconded by T. Shrable. Motion carried.

**Assistant CNO Request** – T. Smith has requested an assistant CNO position to help cover nursing shifts. The position is not budgeted, but there is an open ER Coordinator position so the addition should be budget neutral. A motion was made by C. Thomas to approve the Assistant CNO position; seconded by L. McNamara. Motion carried.

### **Strategic Plans and Discussion**

The group discussed advocacy efforts for the hospital by administration and staff and outreach and education with the public. L. McNamara encouraged everyone to contact their district and state representatives. The Washington DC Advocacy Days is scheduled for September.

### **Upcoming Meetings & Events**

M. Pruettt noted the upcoming schedule of meetings and events.

### **Adjournment**

A motion was made by L. McNamara to adjourn the meeting at 1:18 p.m.; seconded by D. Garcia. Motion carried.

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Mike Pruettt, Board Chair

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Cherri Thomas, Board Vice Chair

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Leslie McNamara, Board Secretary

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Tracy Shrable, Board Member

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David Garcia, Board Member