

The Three Rivers Hospital Board of Commissioners called a regular meeting to order at 11:02 a.m. Tuesday, January 6, 2026. 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  
Leslie McNamara, Secretary (Teams)  
Tracy Shrable, Member  
David Garcia, Member

Others present:

Onsite

J. Scott Graham, Chief Executive Officer  
Jamie Boyer, Chief Operating Officer  
Anita Fisk, Chief Human Resources Officer  
Antone Eek, Interim Chief Financial Officer  
Shauna Field, Administrative Assistant  
Tina Smith, Chief Nursing Officer  
Beronica Lopez, Clinic Manager  
Karen Hurley, Assistant Chief Nursing Officer  
Dan Webster, Foundation President

Via Teams

German Meza, Quality Director  
Brett Mallo, Chief Information Officer  
Jeremy Vandelac, Ancillary Services Director  
Michele Graham, Quality Coordinator  
Jennifer Bach, Accounting Controller  
Rosie Poole, HIM and Coding Manager  
Sandra Zamudio, Accounting Tech  
Dr. Ty Witt, Chief Medical Officer  
Daniel Dinjian, Environmental Services Manager  
Veronica Orozco, HR Assistant  
Jennifer Best, PR/Marketing  
Rob Wylie, Facilities Manager  
Greg Fisk, PA-C  
Sergio Orozco, Bridgeport Mayor

**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 December 2, 2025 Regular Board Meeting Minutes; seconded by C. Thomas. Motion carried.

**Public Comment**

L. McNamara recognized the employee spotlight, Yvette Sanchez, and the Employee of the Month, Signe Hagerup. She also reminded the group about donating to the Foundation and the WSHA PAC.

**Executive Session – RCW 42.30.110(g)**

An executive session was held between 11:05 a.m. – 12:05 p.m. No action was taken.

**Break**

A break was held between 12:05 p.m. – 12:25 p.m.

**Consent Items**

M. Pruett noted the payroll, bad debt, charity care, and vouchers listed on the agenda. There were no medical staff applications.

Payroll Total:	Gross: <u>\$ 1,106,105.79</u>	Net: <u>\$ 787,534.98</u>
<u>11/9/25-11/22/25</u>	Gross: <u>\$ 367,246.98</u>	Net: <u>\$ 260,506.67</u>
<u>11/23/25-12/6/25</u>	Gross: <u>\$ 372,906.41</u>	Net: <u>\$ 263,591.43</u>
<u>12/7/25-12/20/25</u>	Gross: <u>\$ 365,952.40</u>	Net: <u>\$ 263,436.88</u>
Vouchers Total:		<u>\$ 1,884,997.84</u>
<u>11/21/2025</u>	<u>105212-105212</u>	<u>\$ 757.77</u>
<u>11/26/2025</u>	<u>105213-105245</u>	<u>\$ 484,881.09</u>
<u>12/4/2025</u>	<u>105246-105289</u>	<u>\$ 303,356.43</u>
<u>12/11/2025</u>	<u>105292-105358</u>	<u>\$ 484,101.25</u>
<u>12/24/2025</u>	<u>105361-105415</u>	<u>\$ 611,901.30</u>
Bad Debt		<u>\$ 88,960.00</u>
Financial Assistance		<u>\$ 73,705.00</u>

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

**Foundation Report**

Dan Webster presented the Foundation Report. They approved funds for the CORE Committee’s Employee of the Month program and the HAWT Committee’s proposal to partner with Fletcher Ellingson for an employee wellness training program. They met with A. Eek and J. Boyer to discuss how they can help with our capital purchases list; more information to come. He reminded the group about donations through payroll. Scott invited Dan to the next All-Staff meeting to talk to the staff. Foundation Board

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Member, Elizabeth Boyd, will be re-locating but would like to keep her position and work remotely; A. Eek advised them to check their charter regarding residency.

**Physician's Report**

L. McNamara and Dr. Witt presented the Physician's Report. We are looking to bring on a marriage and family therapist in the clinic. The follow up calls to ER patients have resumed. The 2026 MedStaff officers have been elected. Dr. Ellingson agreed to continue her service as Chair until her retirement. Dr. Ebaugh is now Vice Chair and Mandi the Secretary Treasurer. The Board will be reviewing several policies and the bylaws in the March meeting. C. Thomas asked if patient letters have gone out to Dr. Ellingson's patients; not yet, as her retirement date has not been set yet.

**Administration Report**

S. Graham presented the Administration Report. L. McNamara asked why we were not approved for the roof grant through Department of E-Commerce; the deadline has been extended and we may still be considered. Trane will keep us updated. It is a federal grant, so M. Pruet suggested a letter be sent to Dan Newhouse from the Board. December volumes were sporadic but we performed 32 surgeries. We've seen improvement in swing bed volumes and referrals with the addition of PT and OT. Our swing bed rates will be updated to match industry rates. We are exploring investments to improve the network and servers to resolve connectivity issues. B. Mello and A. Eek are scheduling high level demos with alternate EMR vendors. The revenue cycle team has been working to improve their processes. With the changes to federal and state Medicaid, the need for advocacy and education with our legislators is very important. A. Eek will be completing an analysis regarding the impact of the Medicaid changes. We continue to meet with the Thriving Together facilitator and other hospitals. Analysis on other models, such as the Rural Emergency Hospital, is in progress. The Bridge to Excellence group continues to meet weekly and we have a current focus on going paperless across all departments. We have been making investments in projects such as the provider and staff co-locating in the clinic and adding a computer to one of our ER rooms.

**Finance Report**

A. Eek presented the Finance Report. Our net patient revenue has stayed stable with outpatient clinic volumes helping to offset inpatient declines. For accounts receivable, they are arranging for more resources and training to address problem areas. We have discovered some old AR accounts that will not be recoverable due to statute, but he will be working with payors to recover as much as possible. The REDDE program went live yesterday. This is a patient-facing program that will allow patients to pay copays and received notifications and make the registration process easier. Patients will be able to update their demographic information in Phase II. L. McNamara asked about our policy when a patient doesn't pay their copay; it goes into the statement cycle and then collections if necessary. The program also allows patients to set up payment plans that work for them, track due dates, bundle invoices for family members, and see their remaining balance. It is bilingual for Spanish and has the ability to mirror the language set on the patient's mobile phone. Patients will be able to fill out required registration forms and provide insurance information. Our financial counselors will be involved from the beginning to oversee the process, and our navigators can help patients sign up if they don't have computer access.

We've had our fourth month of favorable other income. Salaries were favorable even with the offset of contracted services for contracted and float staff. Professional fees, audit fees, and purchase services were higher. We are on track with our new server purchases. We chose a lease option for the life of the product. We saw a negative variance due to the timing of our insurance invoices, but there was nothing outside of normal. We received our quarterly invoice of 44K from the Healthcare Authority. Our

operating margin continues to show improvement and we continue to control our spending. There will be write-offs as they continue to audit patient accounts and the aging AR. Once that is complete we can determine our reserves. They are working to automate and streamline Accounts Payable as much as possible to improve processing invoices.

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

### **Quality Report**

G. Meza presented the Quality Report. At the November 20 Quality Council meeting, the clinic and charge capture presented their Bridge to Excellence projects. There were no falls with injury or medication events to report. We had 3 surgical transfers from the ER. Focus is on improving documentation. We are up to date on our antimicrobial stewardship reports.

For patient satisfaction, month to date we are 100% with 1 returned survey in all services lines. For December, the ER was at 92% with 6 surveys, inpatient was at 100% with 1 survey, and the clinic was at 96% with 10 surveys. There were no major concerns or issues requiring an RCA.

For the security team, they have scheduled a regular meeting for the last Monday of each month. The MOAB training is scheduled for January 12-13. Quality has been practicing RCAs under their new process utilizing RLDatix. The new Bridge to Excellence spreadsheet has been posted in Teams. All the previous department quality improvement projects are being converted to B2E projects. Our SAM recertification is complete. C. Thomas asked where we sent the surgery transfers; the ortho cases went to Confluence and the appendectomy went to Mid Valley. The other types of transfers we see are for stroke and cardiac cases requiring an ICU. Dr. Corsa is looking for ways to reduce our transfer rates.

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

### **IT Report**

B. Mello presented the IT Report. They have ordered the server replacement equipment and anticipate that project starting in February. New IT staff have been brought on, including a new site manager and new technical administrator. He is working to develop an AI governance and use policy. IT is working on a fully digitized faxing solution. He is drafting a technology roadmap to lay out the year ahead. C. Thomas asked about the issues with the cabling; they did bring out someone to look at it, and the recommendation is to replace the current cabling with fiber as it is more appropriate than copper. C. Thomas also asked about the WIFI connectivity issues; a site survey to optimize access points will be done. IT is also assisting departments with their paperless initiatives.

### **Old Business**

**Capital Improvements Update** – No updates until after the strategic planning meeting.

### **New Business**

#### **Resolution 2026-01: Patient Payment Plan Options**

A proposal establishing improved patient payment plan options. A motion was made by L. McNamara to approve the resolution; seconded by D. Garcia. Motion carried.

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**Oaths of Office**

M. Pruett and C. Thomas read their oaths of office, which were witnessed and signed by notary public, Rosie Poole.

**Board Officer Elections**

A motion was made by C. Thomas to keep all officer positions the same; seconded by T. Shrable. Motion carried.

**Committee Assignments and Meeting Schedules**

A motion was made by M. Pruett to keep committee assignments the same; seconded by C. Thomas. C. Thomas would like to attend the IT meetings as well and will coordinate with Shauna on attendance.

**Strategic Plans and Discussion**

The strategic planning meeting is scheduled for February 3, 2026 between 9 a.m. – 3 p.m. There will be a pre-planning discussion at the January 27 Regular Board meeting. The AWPHD is providing the funds to cover the costs of the meeting.

**Upcoming Meetings & Events**

M. Pruett noted the upcoming schedule of meetings and events. An All-Staff Meeting will be scheduled in February or March. The Olympia Advocacy Day is scheduled for the end of January.

**Adjournment**

A motion was made by C. Thomas to adjourn the meeting at 1:57 p.m.; seconded by L. McNamara. Motion carried.

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Mike Pruett, 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