

Agenda

1. **1:00 – Call to Order**
 - a. Introductions as needed
 - b. Business from audience
2. **1:05 – Consent Agenda – See separate Consent Agenda – Action (vote)**
3. **1:08 – Approval of Minutes – Action (vote)**
 - a. April 23, 2026 Regular Meeting
4. **1:10 - Patient Story – Jennifer Burkhardt, CTLO – Info**
5. **1:15 - Patient Experience Award – Hannah Quimby, Patient Experience Program Manager – Info**
6. **1:30 – The Rural Collaborative Update– Dr. Elya Prystowsky– Info**
7. **Executive Reports**
 - a. **1:45** – Quality Report and Dashboard, Tori Bernier, CNO/COO– *Info*
 - b. **2:00** – Finance Report, Cheryl Cornwell, CFO– *Info*
 - c. **2:15** – Advocacy Committee, Jennifer Burkhardt, CTLO – *Info*
 - d. **2:25** – Executive Report, Josh Martin, CEO – *Info*
8. **Commissioner Business**
 - a. **2:40** – Medical Staff Privileges – *Action (vote)*
 - i. Timothy Gromley, MD – initial appointment Radiology
 - ii. Trenton Overall, DO – initial appointment Neurology
 - iii. Charles Lew, MD – initial appointment Emergency Medicine
 - iv. Frank Yeh, MD – initial appointment Gastroenterology (Internal Medicine)
 - v. Katala Lach, ARNP – initial appointment Gastroenterology
 - vi. Gara Knudtson, CRNA – initial appointment CRNA Outpatient Procedures and Interventional Pain
 - b. **2:41** – Resolution 2026-05 The Establishment and Maintenance of a Patient Access Cash Fund
 - c. **2:45** - “Rural Clinicians Efforts to Maintain Relationship-Centered Care Amidst Conflicting Tensions with Inherited Opioid Prescribing Practices” Board Discussion – *Info*
 - d. **2:50**- Review Upcoming Events– *Info*
9. **2:55 – Adjourn – Action (vote)**

Upcoming events: - **BOLD events indicate desired Commissioner attendance.**

- **Joint Board Planning Session | Ortquist Conference Room | June 12, 2026**
- **AWPHD and WSHA Rural Health Conference | Campbells Resort Lake Chelan, WA | June 27-July 1, 2026**

- **Hospital Expansion Grand Opening and Ribbon Cutting | Summit Pacific Medical Center | July 22, 2026 10:00 am**
- Ride the Harbor | McCleary, WA and Westport, WA | July 25, 2026
- Port of Grays Harbor Terminal 4 Grand Opening | Port of Grays Harbor | July 31, 2026 (RSVP required)
- **Board Strategic Planning Retreat | Union, WA | August 3-5, 2026**

Consent Agenda

A very useful technique involves the use of a consent agenda. The board agenda planners (usually the executive or governance committee, but occasionally the board chair with the CEO) divide agenda issues into two groups of items. The first are those items that must be acted on because of legal, regulatory, or other requirements, but are not significant enough to warrant discussion by the full board. Such issues are combined into a single section of the board agenda book; members review these materials prior to the meeting, and if no one has any questions or concerns, the entire block of issues is approved with one board vote and no discussion. This frees up a tremendous amount of time that would otherwise be squandered on minor issues. Any member can request that an item be removed from the consent agenda and discussed by the full board. The success of the consent agenda is predicated upon all board members reading the material in the consent agenda section of the board agenda book. If they do not, then the board becomes a veritable rubber stamp. The second group of agenda items are those important issues that require discussion, deliberation, and action by the board. These are addressed one by one.

Executive Session Justification

Executive Session is convened to discuss the following topics, as permitted by the cited sections of the Revised Code of Washington (RCW):

- Executive session (RCW 42.30.110)
 - a. (a) national security
 - b. (b) (c) real estate
 - c. (d) negotiations of publicly bid contracts
 - d. (e) export trading
 - e. (f) complaints against public officers/employees
 - f. (g) qualifications of applicant or review performance of public employee/elective office
 - g. (h) evaluate qualifications of candidate for appointment to elective office
 - h. (i) discuss claims with legal counsel
 - i. existing or reasonably expected litigation
 - ii. litigation or legal risks expected to result in adverse legal or financial consequences
 - iii. presence of legal counsel alone does not justify executive session
 - i. QI/peer review committee documents and discussions
- Final action must be in open meeting

For the Period:

April 2026

Description	Amount	
Payroll	\$	4,791,226
A/P Operations	\$	5,510,875
A/P Capital	\$	825,611
Community Care	\$	408,533
Bad Debt	\$	656,711
Property Tax Credit	\$	-
Total	\$	12,192,956



BOARD OF COMMISSIONERS REGULAR MEETING MINUTES

April 23, 2026

AGENDA	DISCUSSION/CONCLUSIONS	ACTIONS/FOLLOW-UP
CALL TO ORDER	CALL TO ORDER The meeting of the Board of Commissioners of Grays Harbor County Public Hospital District No. 1 was called to order by Board Chair Hooper at 1:00 p.m. Commissioners Present: Shannon Brear, Andrew Hooper, Kevin Bossard, Carolyn Wescott, Georgette Hiles Present: Josh Martin, Cheryl Cornwell, Dr. Ken Dietrich, Jori Stott, Sara Oliver, Angie Gerber, Jennifer Burkhardt, Ryan Berg, Andy Burton, James Kaech, David Cundiff, Georgia Miller, Jennifer Dorsey, Lynn Fifield, Kellie Snyder, Steven Thomson, Sharlene Higa, Diana Kolar, Lisa Clark	
BUSINESS FROM AUDIENCE	<u>Business from Audience</u> There was no business from the audience.	
CONSENT AGENDA	There was no discussion	<i>Commissioner Wescott made a motion to approve the consent agenda. Commissioner Hiles seconded the motion. All voted in favor.</i>
MINUTES	March 26, 2026 Regular Meeting Minutes	<i>Commissioner Wescott made a motion to approve the March 26, 2026, Regular Meeting Minutes. Commissioner Hiles seconded the motion. All voted in favor.</i>
PATIENT STORY	- CTLO Burkhardt read a patient care story regarding Amanda Rosenkrance. (See presentation for additional details.) - CTLO Burkhardt recognized Hannah Quimby and Morgan Lundy for receiving their ADA Coordination certification. - CAO/CMO Dietrich recognized David Cundiff and James Kaech for passing their RHC certification. - CEO Martin introduced a first preview of the All Access video. (See video for additional details.)	



BOARD OF COMMISSIONERS REGULAR MEETING MINUTES

April 23, 2026

	• CEO Martin thanked all participants for their hard work on the All Access video. • Dr. Laura Armstrong shared that SPMC is preparing to graduate the fourth year of family medicine residents. Both residents passed their boards. • The program has had a 100% board pass rate. Additionally, all R1 spots for 2026 were matched in the regular match. • CEO Martin shared that the board would be signing letters of congratulations.	
COUNTY UPDATE	• County Commissioner Georgia Miller provided an update. • Commissioner Miller commended Summit Pacific for its partnership in improving community health. • Commissioner Miller has been in office for 1.5 years and has been actively working to improve the county's financial health. • Significant efforts have been made to apply for the Recompete grant. • Commissioner Miller shared an update on the childcare subcommittee of the Recompete grant. • The county's first-ever strategic plan is almost complete. • Commissioner Miller commended CEO Martin for inspiring a specific focus on housing in Grays Harbor. The County Commissioners held a Housing Summit to begin addressing some of the issues. • The new county website goes live tomorrow. • The County Commissioners are looking to finalize a comprehensive land plan. The last plan was adopted in the 1970s. • There was discussion regarding the timeline for improving the permitting process. Some delays have occurred due to budget timing constraints. Ideally, the goals would be achieved within five months. • Commissioner Miller provided an update on the commissioner appointment process. The current commissioners solicited letters of interest from those who were already planning to run for office. Five letters were received, and they hoped to appoint someone by May 19th. • Commissioner Miller gave an update on Grays Harbor tourism and fairground plans. The county recently hired Nikki Brown, who has an extensive background in economic development and a strong interest in creating third spaces for youth. • There was discussion regarding plans for Straddle Line Park. • CEO Martin shared that Commissioner Miller would be attending the joint planning meeting.	



BOARD OF COMMISSIONERS REGULAR MEETING MINUTES

April 23, 2026

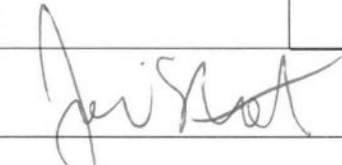
QUALITY REPORT	• CNO/COO Bernier reviewed the Quality Report and dashboard. • CNO/COO Bernier gave an update on the surprise DNV survey that took place this week. Both nonconformities from last year were closed. CNO/COO Bernier commended the PE Committee for its continued improvement. • In June, Café Salute will be opening in the hospital. Food and Nutrition volumes are very high. • CNO/COO Bernier shared kudos to the ACU for helping improve LOS. • CNO/COO Bernier introduced Kellie Snyder, Outpatient Services Manager.	
FINANCE REPORT	• CFO Cornwell presented the March Finance Report. • CFO Cornwell reviewed volumes. There was discussion regarding budgeting challenges due to the lack of a baseline for budgeting related to the new expansion. • CFO Cornwell shared that grant funding of 4.4 million had been received, which would help offset performance below budget. • SPMC will be participating in the employee credit process for the Revenue Cycle outsourced business office with TRC. Businesses will be interviewed onsite in the near future.	
ADVOCACY COMMITTEE	• CEO Martin provided an update on advocacy efforts. • CEO Martin shared a letter recognizing legislators in the district for their work during the legislative session, following a request made at last month's board meeting. • CTLO Burkhardt shared an update on the 340B lawsuit. • CTLO Burkhardt shared an update on appropriations funding. Senator Murray's office requested a site visit, which indicates interest in the project. • A special letter will be prepared for Representative Tharinger.	
EXECUTIVE REPORT	• CEO Martin reviewed the Executive Report. (See report for additional details.) • CEO Martin recognized Bee and Daisy Award recipients. A note was made to add Hospital Week to a future board agenda. • CEO Martin provided an update on RHTP funds. • Schelli Slaughter accepted the offer for Foundation and Community Development Director. • CEO Martin shared the organization's growing interest in improving the billing process. Cheryl Cornwell is working closely with Leslie Hiebert to collaborate on the RFP. • CEO Martin shared an update on the Summit Perks program.	

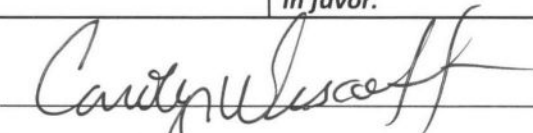


BOARD OF COMMISSIONERS REGULAR MEETING MINUTES

April 23, 2026

	• SPMC is in contract negotiations for a Medicaid payor. • CTLO Burkhardt introduced John Burleigh and Jennifer Dorsey as leaders in IT. • NRHA has become a very strong partner. The Washington Post interviewed CEO Martin about the directive from Secretary Kennedy.	
COMMISSIONER BUSINESS	Medical Staff Privileges • Gary Sullioti, MD – Radiology- initial • Carolyn Kor, MD – Telehospitalist- initial • Diane Marines, DNP, FNP – Ambulatory Primary Care- initial • Rupali Miskar – Telehospitalist- initial Upcoming Events • The Board Chair reviewed upcoming events. The golf tournament is approaching. • The joint planning meeting is scheduled for June 12th. • Attendees were asked to confirm whether they would be arriving early for Chelan and whether they would be bringing a guest to the barbecue. • Volunteers were encouraged to participate in Ride the Harbor in July, if available. • A ribbon cutting will be held for the grand opening of the expansion. • Hospital Week and the awards event are scheduled for October 14 at 6:00 p.m. ED Expansion Tour • Commissioners recessed to tour the ED expansion site.	<i>Commissioner Bossard made a motion to approve the Medical Staff privileges as presented. Commissioner Hiles seconded the motion. All voted in favor.</i>
ADJOURNMENT	The regular session of the Board of Commissioners meeting adjourned at 3:36 p.m.	<i>Commissioner Hiles made a motion to adjourn the meeting. Commissioner Bossard seconded the motion. All voted in favor.</i>


Recording Secretary


Board Secretary

Facilitated Board Meeting Planning Session Minutes

Attendees: Andrew Hooper, Georgette Hiles, Carolyn Wescott, Erin Schrieber, Wilma Weber, Georgia Miller, Josh Martin, Kevin Bossard, Josh Collete, Stephanie Smith, Michael Smith, Chris Nesmith, Shannon Brear, Jamie Bailey, Tricia Roscoe, Jori Stott, Schelli Slaughter

Grays Harbor County Public Hospital District No. 1 Board Chair Hooper and Elma School Board Chair Michael Smith called the meeting to order at 8:00 am

Purpose and Desired Outcomes: Participants discussed a shared vision for improving youth wellbeing, building hope, strengthening community connections, and identifying opportunities for coordinated action across agencies and generations.

- Identify intersections, shared priorities, and opportunities for synergy.
- Explore collective impact strategies to support youth, families, and healthy generations.
- Clarify pathways to action, including partnerships, resources, and next steps.
- Forge relationships and shared purpose among participating agencies and leaders.

Partner Updates and Discussion Themes

City of Elma: Mayor Josh Colette shared that improving parks and recreation has been a long-standing City goal. In 2025, the City approved its first parks and recreation plan since the 1970s and is using the plan to pursue grant opportunities. Discussion also included public safety, code enforcement, curfew enforcement, relaunching a police volunteer program, and rebuilding a stronger sense of community.

- Collective priority: build a sense of hope and community similar to work discussed through Blue Zones.
- Suggested measure: community survey data to understand progress and priorities.

School District: The School District is currently engaged in strategic planning, moving from identifying desired outcomes to determining how to implement them. Discussion centered on what hope means for students, including aspirations, the ability to achieve goals, academic preparation, financial awareness, personal engagement, and connection through activities and relationships.

- Potential indicators included post-secondary enrollment, students participating in two or more activities, and students earning credits or credentials of value prior to graduation.
- Partnership opportunities included career and technical education, employer partnerships, CNA pathways, industry partners, and broader youth activity involvement.

Grays Harbor County: The County discussion led by County Commissioner Georgia Miller focused on collective impact, including investment in youth spaces and recreation, prevention, youth engagement, safe spaces, family strengthening, workforce development, and housing security as foundations for health outcomes, economic vitality, and future success.

Public Health: Public Health highlighted the importance of supporting youth across the life course, beginning with prenatal and early childhood supports. Discussion included early childhood system gaps, access to services, resource navigation, parental support, warm handoffs between agencies, generational trauma and poverty, prevention, mental health, substance use prevention, traffic safety, and Healthy Youth Survey data.

- Key initiatives included Help Me Grow, family and community outreach, health provider outreach, data, and coordinated access planning.
- Collective opportunities included countywide early childhood supports, improved knowledge of available resources, stronger connections, and coordinated access to family supports.

Student Leadership: Elma School Board Director, Stephanie Smith emphasized the importance of student leadership in this body of work. Smith highlighted notable school pride initiative led by the student body this year. The student body wanted to address the lasting impact of COVID-19 on student connection and school culture. This year student body participants emphasized the need to help students feel welcomed, connected, proud of their school community, and engaged in meaningful spaces and activities.

The group noted that culture, mindset, and belonging are central to building hope, and that “hope builds hope.”

Facilitated Breakout Discussion

Participants individually responded to questions on post it notes, then divided into four groups to review questions, identify priorities, and prepare feedback for the full group.

Each group reported out on the following questions and themes:

How do you define wellbeing for youth?

- Youth wellbeing includes hope, capacity, and the ability to achieve goals.
- Mental health support is essential.
- Belonging, connection, and community are central to wellbeing.

Biggest challenge in our community?

- Lack of hope and a sense of hopelessness were identified as major challenges.

- Participants discussed generational cultural norms and the perception that “this is just the way Grays Harbor is,” while also acknowledging major progress made over the past ten years.
- Participants emphasized the importance of demonstrating change through action, celebrating incremental wins, and building skills and capacity to support a new future.
- Lack of coordination among multiple organizations working on similar issues was identified as a barrier.
- Participants noted that third spaces are part of the solution, but not the only solution.
- Clarity of options and pathways for the future is needed so people can see possibilities and move forward.

What is most important to work on?

- Increase access to third spaces while recognizing that connection is not solely dependent on brick-and-mortar spaces.
- Address social determinants of health.
- Build hope, belonging, and youth connection.
- Support students in earning credits or credentials of value prior to graduation to create visible career pathways.
- Expose youth to opportunities, models, and experiences beyond what they may observe at home to support generational change.
- Coordinate agency efforts to remove barriers and create cultural change in a shared direction.
- Include youth perspective while also retaining adult perspective.
- Consider the impacts of technology and screen time on connection, creativity, boredom, and wellbeing.
- Move beyond creating lists of activities and focus on coordination, access, and barrier removal.

How do you measure success?

- Ensure data is collected from the correct population.
- Use practical qualitative and quantitative metrics that are small enough to influence and track.
- Maintain momentum by celebrating successes, using Plan-Do-Study-Act cycles, and reporting progress to create accountability.

How would we measure success as a community?

- Tangible measures may include poverty, youth disconnection, social determinants of health, and participation by youth in two or more activities.
- Less tangible measures may include community connection and belonging.
- Participants noted that East County has unique needs and is influenced by its geographic relationship to Thurston County.

School Board Meeting Adjournment and Lunch Recess

Jamie Bailey made a motion to adjourn the Elma School Board meeting due to a board member needing to leave at noon. Stephanie Smith seconded the motion. All voted in favor. The school board meeting adjourned at 11:17 a.m.

The entire group recessed for lunch at 11:19 a.m.

Shared Goal Discussion

The group reconvened at 11:50 a.m. for a facilitated discussion regarding a shared goal. Participants were referred to the presentation for additional details.

Tricia Roscoe reviewed first attempt at a draft for a shared goal statement.

Together we will partner to support and accelerate community-wide initiatives that build capacity for our youth to achieve aspirational goals and increased overall wellbeing.

Critical to success will be

- *Breaking generational cultural norms*
- *Connecting individuals and families to resources across agencies*

Initial reactions and discussion included:

- Suggestion to change “support” to “lead” to better reflect the responsibility of the group.
- Suggestion to add language about alignment to reflect the importance of agencies moving in the same direction.
- Discussion regarding shared measures of success and moving from intellectual understanding to learning and change.
- The School District uses predictive indicator measures rather than grit as a measure.
- Discussion regarding how to embed minimizing screen time.
- Discussion of emotional health search topics being tracked by ESD to support suicidal ideation prevention.
- Suggestion to include younger student skill measures, such as third-grade reading scores and WaKIDS.

- Discussion regarding how third spaces can impact poverty.
- Suggestion to create a subcommittee and preview topics for the next meeting.

Next Steps

- Tricia will distribute the meeting notes to the full group.
- The group agreed to create a subcommittee consisting of two elected board members, executives, the mayor, Public Health, and County representation.
- The subcommittee will meet once within 90 days.

Plus/Delta Feedback

Plus:

- Opportunity to hear multiple perspectives on major community challenges.
- Recognition that many community problems intersect or are shared.
- Relationship-building and creation of a path forward together.
- Six hours of modeling hope rather than negativity.
- Use of sticky notes allowed participants to share ideas they might not say aloud.
- Effective facilitation.

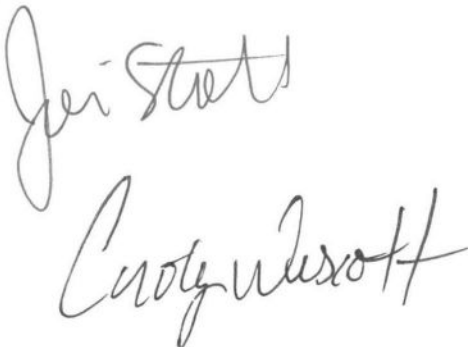
Delta:

- Improve technology support to allow for active changes during the meeting.
- Include a student representative.
- Identify additional stakeholders to engage.

Celebration and Communication

Participants discussed how to celebrate the session as a collective win going forward. A suggestion was made to develop a shared promotional message that participating agencies could distribute.

Commissioner Wescot moved to adjourn the Grays Harbor County Public Hospital District No. 1 special meeting. Commissioner Hiles seconded the motion. All voted in favor, The meeting adjourned at 1:45 p.m.



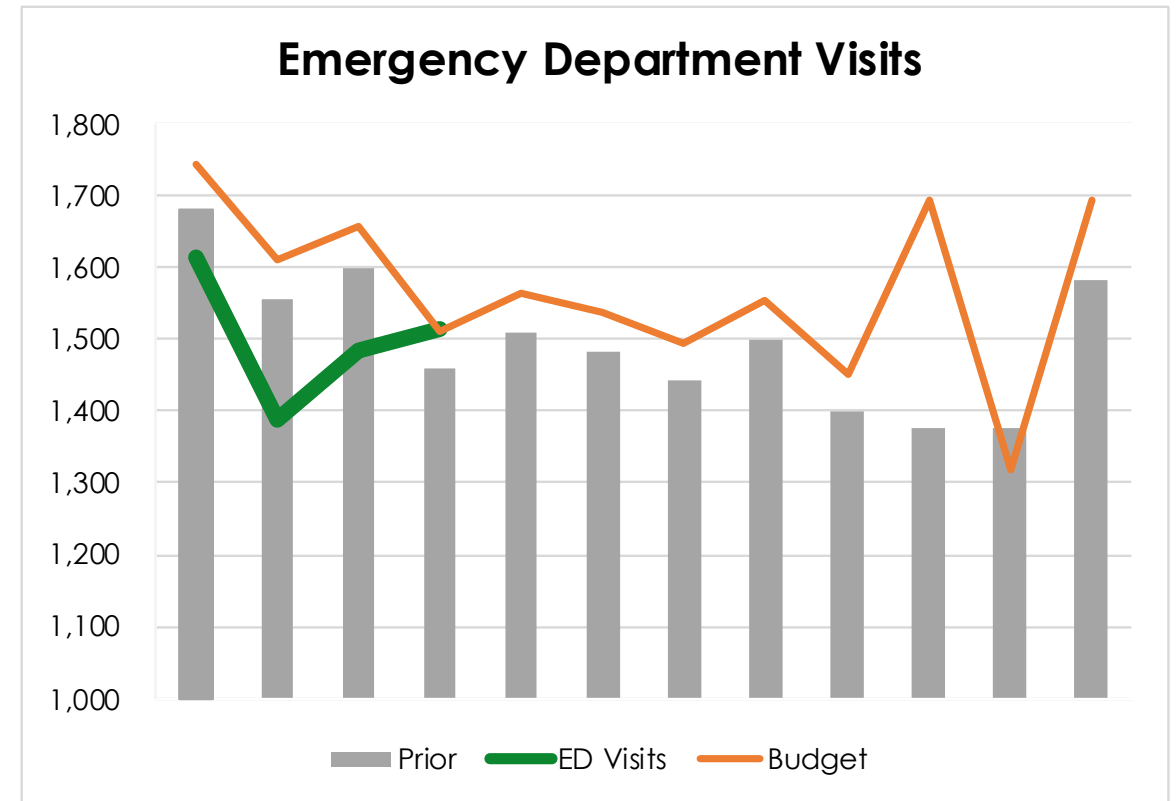
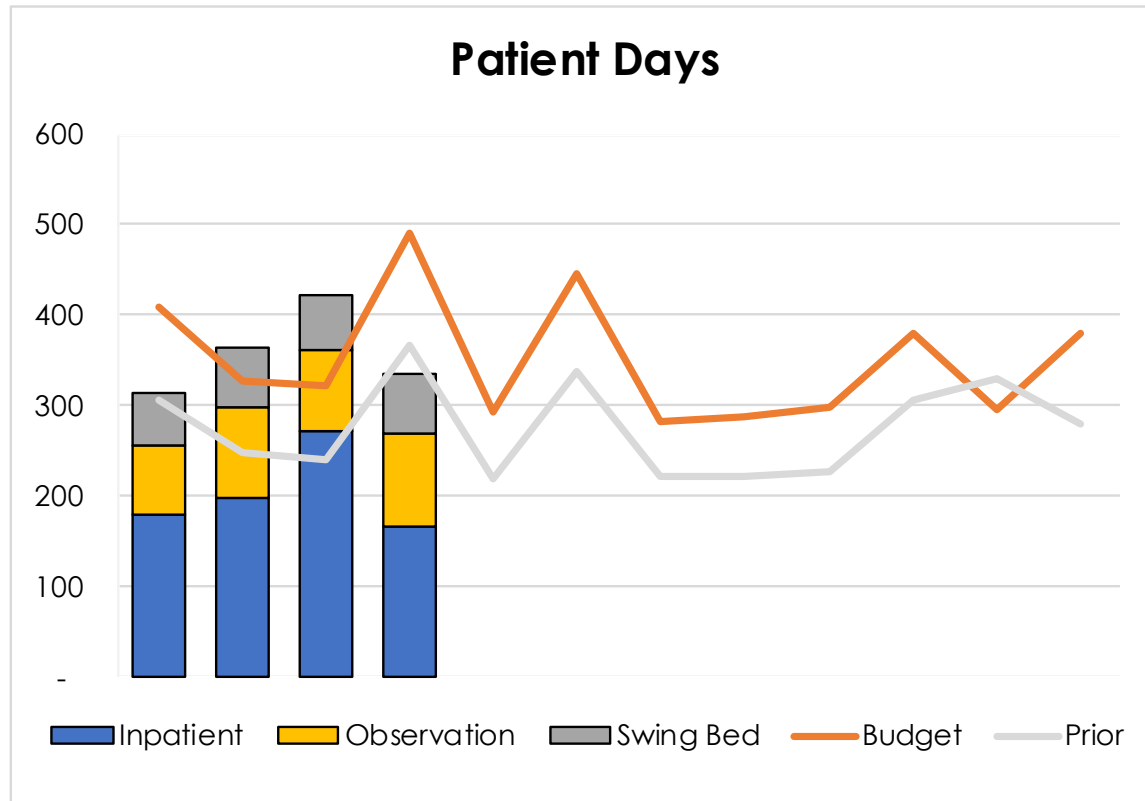
Handwritten signatures of Jeri Stott and Craig Wescot.



Finance Committee Meeting

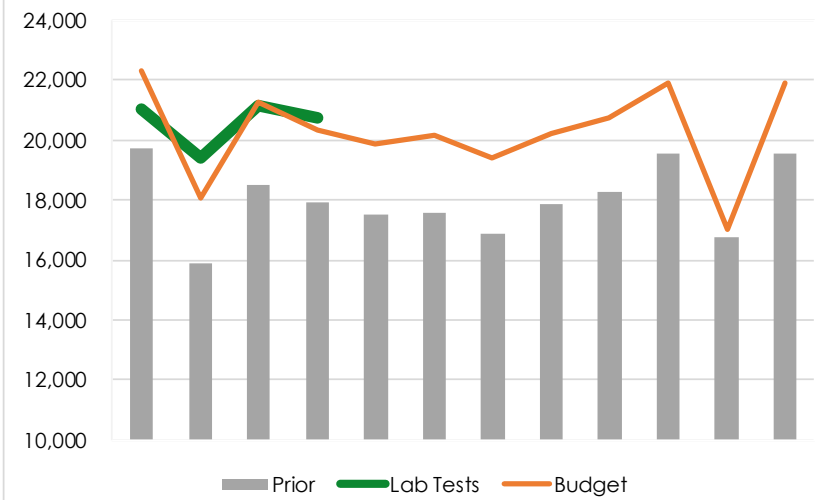
May 22, 2026

YTD IP & ED Volumes

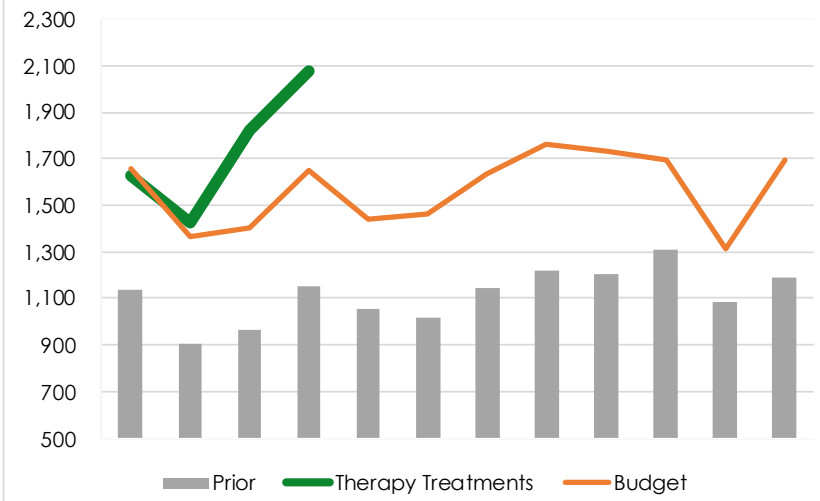


YTD Ancillary Volumes

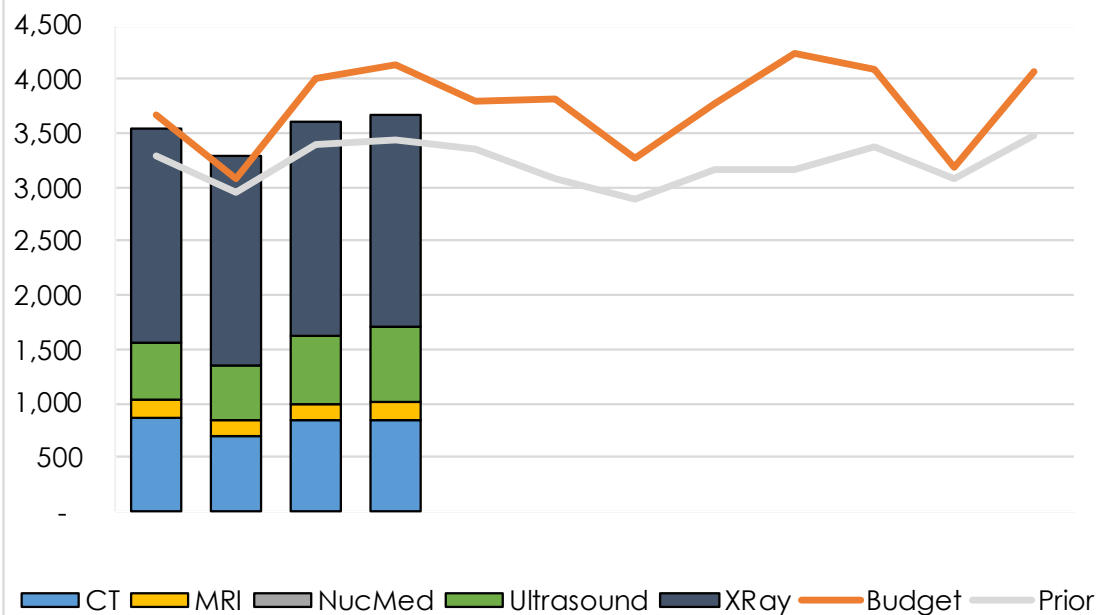
Lab Tests



Therapy Treatments

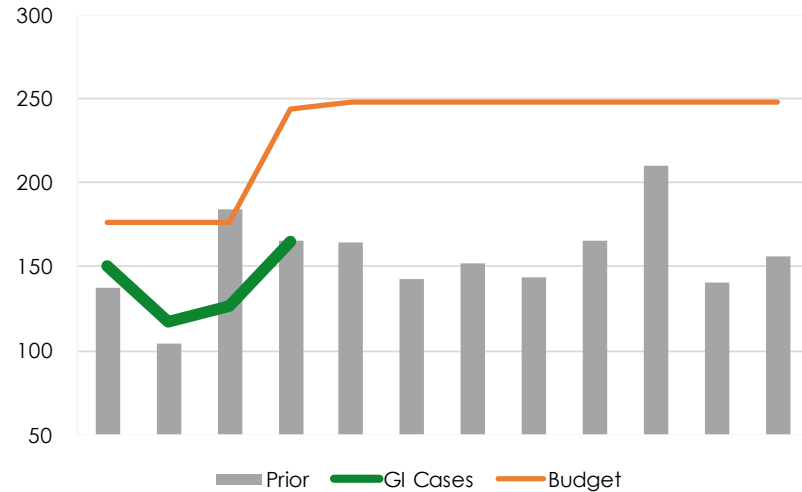


Diagnostic Imaging

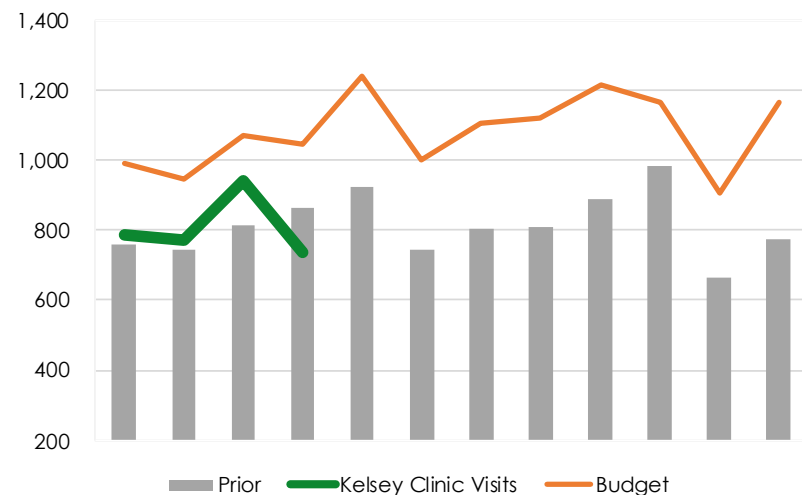


YTD Specialty Volumes

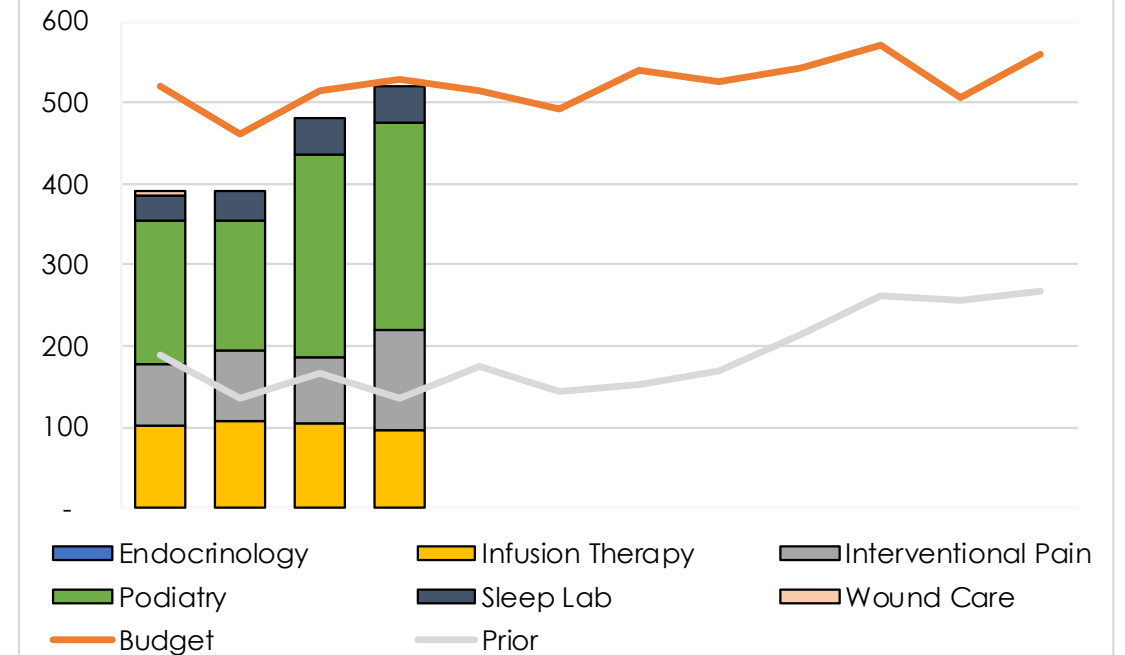
GI Cases



Specialty Clinic Visits

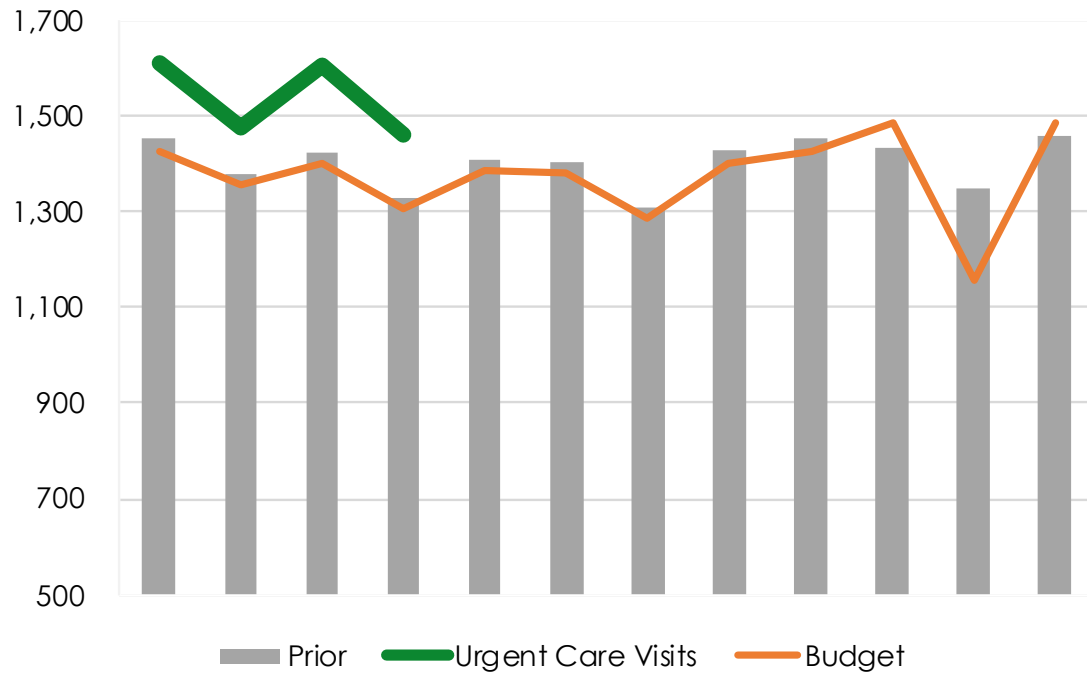


Hospital Outpatient Services

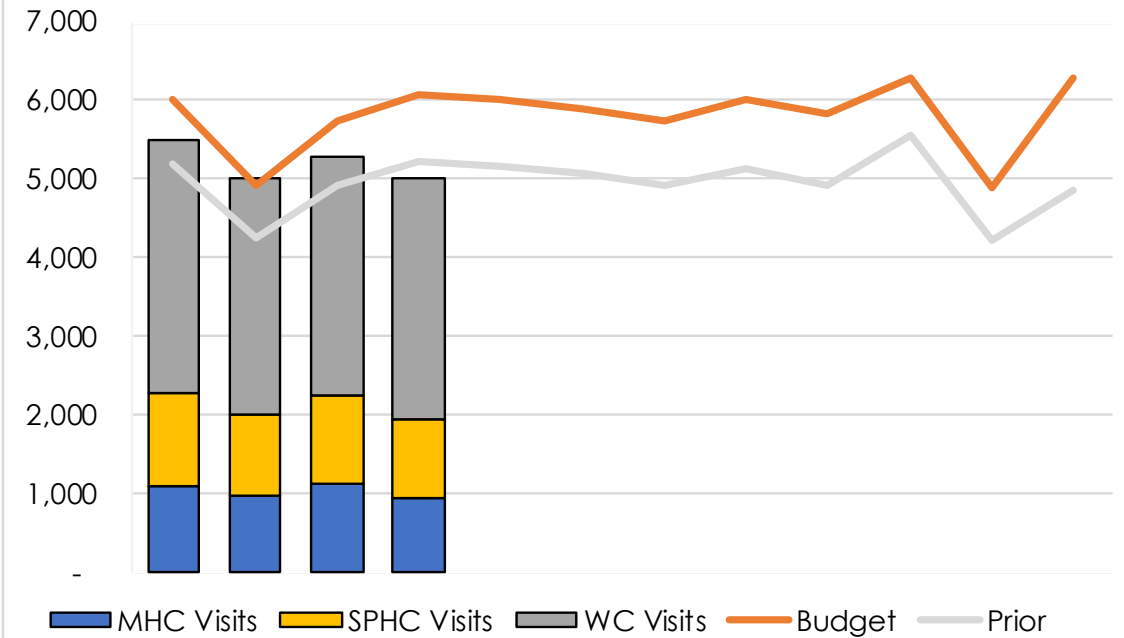


YTD Clinic Volumes

Urgent Care Visits



Primary Care Clinic Visits



March YTD Volumes

Year to Date Volumes			
Department	Actual	Budget	Surplus (Deficit)
Respiratory Therapy	5,086	2,693	2,393
Therapy Treatments	6,956	6,079	877
Urgent Care Visits	6,151	5,490	661
Lab Tests	82,329	81,976	353
Patient Days (IP, Obs & SB)	1,438	1,548	(110)
GI Cases	559	772	(213)
Hospital Outpatient Services	1,783	2,027	(244)
Emergency Department Visits	6,001	6,525	(524)
Diagnostic Imaging Exams	14,116	14,887	(771)
Specialty Clinic Visits	3,234	4,053	(819)
Primary Care Clinic Visits	20,794	22,759	(1,965)

Finance at a Glance

Summary Income Statement in \$Ks

Year-to-Date Income Statement	Apr-2026	+/-Budget	Apr-2025
Patient Revenue	\$ 91,863	\$ (4,947)	\$ 84,796
Revenue Deductions	\$ (57,800)	\$ 3,646	\$ (51,419)
Net Patient Revenue	\$ 34,062	\$ (1,300)	\$ 33,377
Other Operating Revenue	\$ 6,250	\$ 4,371	\$ 3,447
Total Operating Revenue	\$ 40,312	\$ 3,070	\$ 36,824
Salaries & Benefits	\$ (21,823)	\$ 722	\$ (18,654)
Supplies	\$ (2,351)	\$ 149	\$ (2,248)
Purchased Services	\$ (4,737)	\$ (410)	\$ (4,239)
Other	\$ (2,913)	\$ 316	\$ (2,322)
Depreciation	\$ (3,071)	\$ (556)	\$ (1,667)
Total Operating Expenses	\$ (34,895)	\$ 220	\$ (29,130)
Operating Income (Loss)	\$ 5,417	\$ 3,291	\$ 7,694
Non-Operating Revenue	\$ 1,624	\$ (182)	\$ 2,184
Non-Operating Expense	\$ (2,106)	\$ (35)	\$ (2,112)
Net Income (Loss)	\$ 4,935	\$ 3,074	\$ 7,765

Summary of performance.

How much income is generated and how much it costs to generate that income. The result represents the profit/loss for the period.

Finance at a Glance

Summary Balance Sheet in \$Ks

	Apr-2026	Mar-2026	Apr-2025
Cash	\$ 103,738	\$ 100,185	\$ 102,901
Net Accounts Receivable	\$ 7,775	\$ 8,613	\$ 14,903
Other Receivables	\$ 4,744	\$ 10,366	\$ 5,309
Total Current Assets	\$ 116,257	\$ 119,164	\$ 123,113
Property, Plant & Equipment, Net	\$ 89,569	\$ 89,275	\$ 82,198
Total Assets	\$ 205,827	\$ 208,439	\$ 205,311
Accounts Payable	\$ 118	\$ 2,183	\$ 6,434
Payroll Liabilities	\$ 6,471	\$ 6,768	\$ 5,242
Current Portion of Long Term Deb	\$ 3,006	\$ 3,006	\$ 2,768
Other Liabilities	\$ 5,427	\$ 5,717	\$ 4,997
Total Current Liabilities	\$ 15,022	\$ 17,674	\$ 19,441
Non Current Liabilities	\$ 105,573	\$ 106,051	\$ 108,112
Unrestricted Fund Balance	\$ 4,935	\$ 4,419	\$ 7,764
YTD Excess of Revenues	\$ 80,296	\$ 80,296	\$ 69,994
Total Net Assets	\$ 205,827	\$ 208,439	\$ 205,311

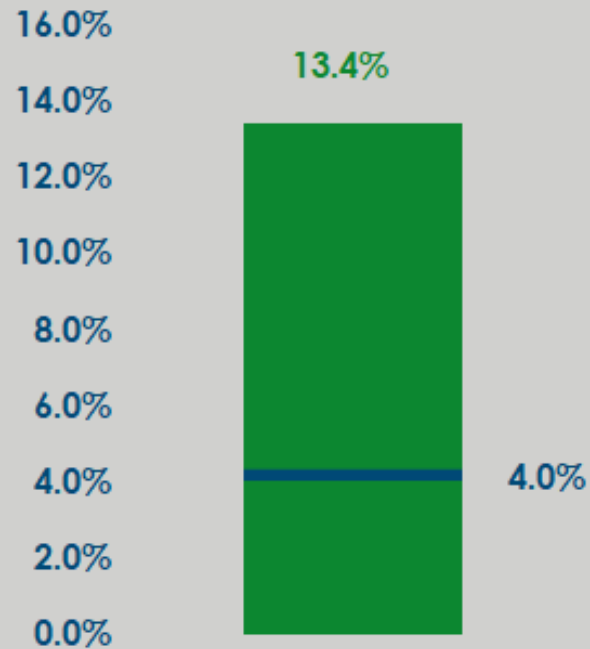
Snapshot of financial position at a specific point in time.

Assets - what we own. Liabilities - what we owe.

Net Assets - what we are worth.

Finance at a Glance

STEWARDSHIP STRATEGIC GOALS



Operating Margin
Goal: 4.0%

WA Average 2024: 4.9%

Ratio that reflects the profit from operations.

Higher is Better



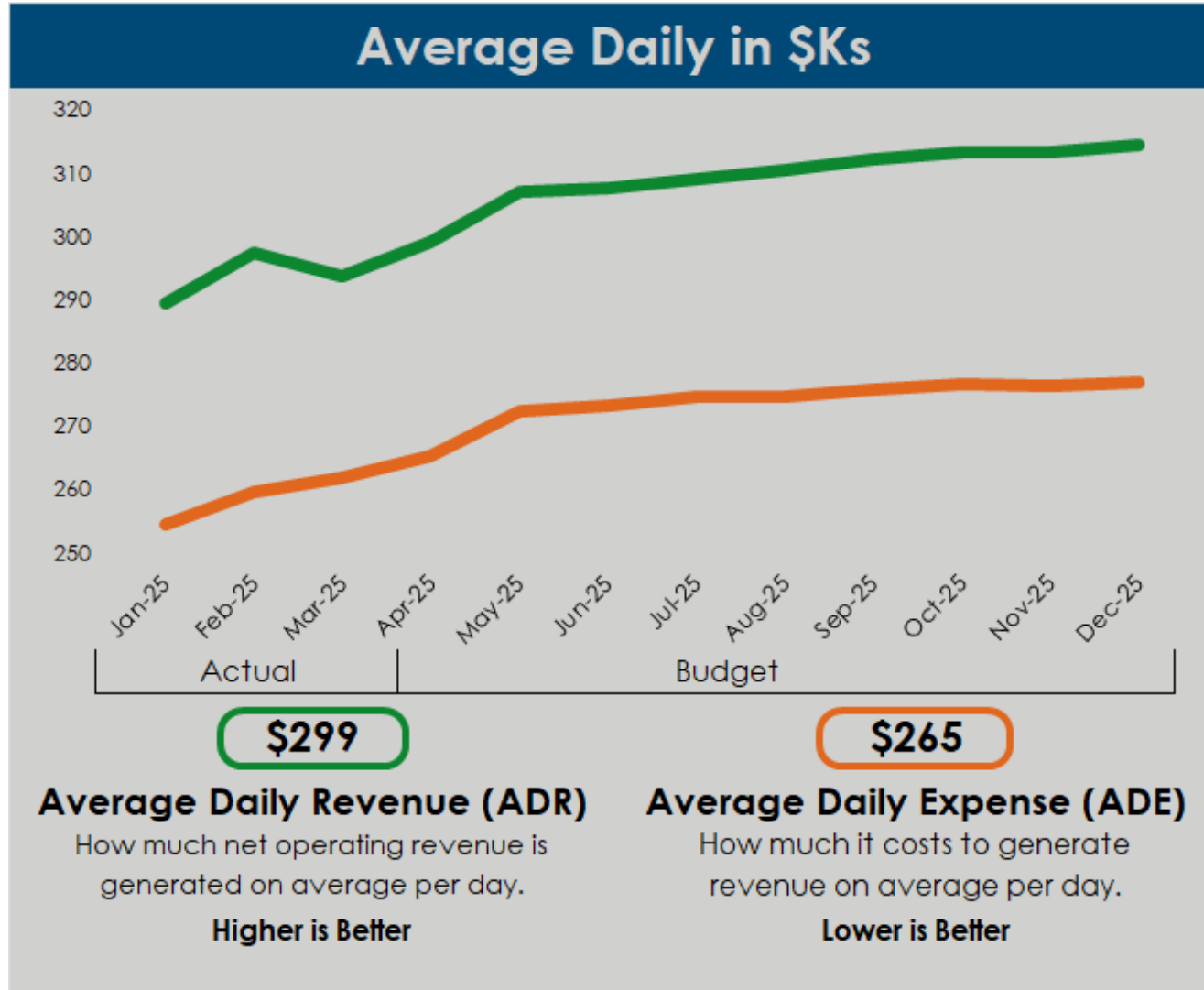
Days Cash On Hand
Goal: 260

WA Average 2024: 194

Ability to meet short & long term expenses with no additional revenue.

Higher is Better

Finance at a Glance



Summary & Highlights

Significant
Events

Out of the
Ordinary

Progress on
Projects

Achievements

Questions or Comments?

April 2026 Finance at a Glance

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Cash	\$ 103,738	\$ 100,185	\$ 102,901
Net Accounts Receivable	\$ 7,775	\$ 8,613	\$ 14,903
Other Receivables	\$ 4,744	\$ 10,366	\$ 5,309
Total Current Assets	\$ 116,257	\$ 119,164	\$ 123,113
Property, Plant & Equipment, Net	\$ 89,569	\$ 89,275	\$ 82,198
Total Assets	\$ 205,827	\$ 208,439	\$ 205,311
Accounts Payable	\$ 118	\$ 2,183	\$ 6,434
Payroll Liabilities	\$ 6,471	\$ 6,768	\$ 5,242
Current Portion of Long Term Debt	\$ 3,006	\$ 3,006	\$ 2,768
Other Liabilities	\$ 5,427	\$ 5,717	\$ 4,997
Total Current Liabilities	\$ 15,022	\$ 17,674	\$ 19,441
Non Current Liabilities	\$ 105,573	\$ 106,051	\$ 108,112
Unrestricted Fund Balance	\$ 4,935	\$ 4,419	\$ 7,764
YTD Excess of Revenues	\$ 80,296	\$ 80,296	\$ 69,994
Total Net Assets	\$ 205,827	\$ 208,439	\$ 205,311

Snapshot of financial position at a specific point in time.

Assets - what we own. Liabilities - what we owe.

Net Assets - what we are worth.

STEWARDSHIP STRATEGIC GOALS

16.0%
14.0%
12.0%
10.0%
8.0%
6.0%
4.0%
2.0%
0.0%

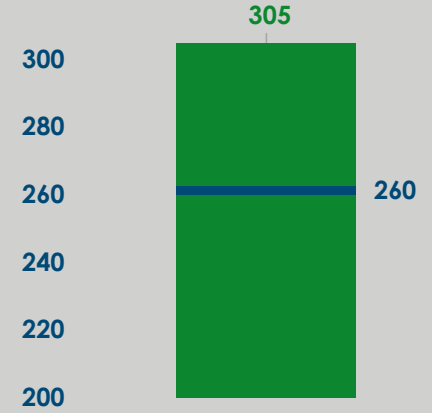


Operating Margin
Goal: 4.0%

WA Average 2024: 4.9%

Ratio that reflects the profit from operations.

Higher is Better



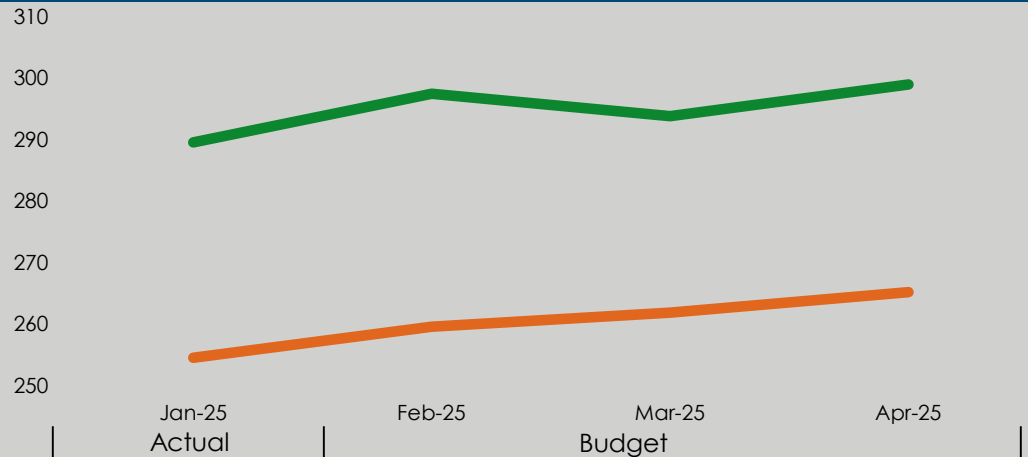
Days Cash On Hand
Goal: 260

WA Average 2024: 194

Ability to meet short & long term expenses with no additional revenue.

Higher is Better

Average Daily in \$Ks



\$299

Average Daily Revenue (ADR)

How much net operating revenue is generated on average per day.

Higher is Better

\$265

Average Daily Expense (ADE)

How much it costs to generate revenue on average per day.

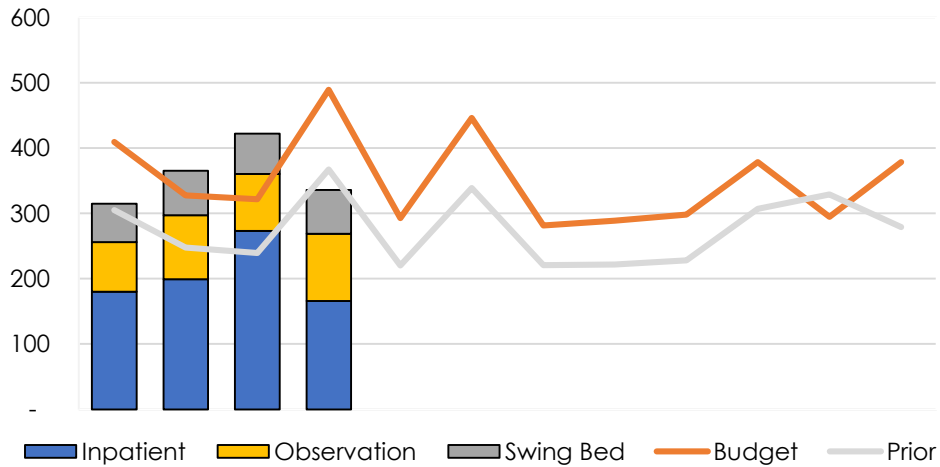
Lower is Better

Statistic	Jan-2026	Feb-2026	Mar-2026	Apr-2026	YTP
Inpatient Days	180	199	273	166	818
Budget	304	223	243	366	1,136
Prior	258	189	206	310	963
Observation Hours	1,825	2,358	2,094	2,464	8,741
Budget	1,318	1,638	927	1,539	5,422
Prior	1,129	1,403	794	1,382	4,708
Observation Days	76	98	87	103	364
Budget	55	68	39	64	226
Prior	47	58	33	58	196
Swing Bed Days	59	68	62	67	256
Budget	50	37	40	60	187
Prior	-	-	-	-	-
Patient Days (IP, Obs & SB)	315	365	422	336	1,438
Budget	409	328	321	490	1,548
Prior	305	247	239	368	1,159
Emergency Department Visits	1,613	1,389	1,485	1,514	6,001
Budget	1,742	1,612	1,658	1,512	6,525
Prior	1,682	1,556	1,600	1,459	6,297
GI Cases	150	117	127	165	559
Budget	176	176	176	244	772
Prior	138	104	184	166	592
Sleep Lab	31	38	46	44	159
Budget	31	27	46	38	142
Prior	8	7	12	10	37
Lab Tests	21,039	19,379	21,137	20,774	82,329
Budget	22,321	18,059	21,254	20,343	81,976
Prior	19,700	15,885	18,509	17,951	72,045
XRy Exams	1,981	1,935	1,972	1,977	7,865
Budget	1,925	1,503	2,217	2,341	7,985
Prior	2,019	1,865	2,014	1,994	7,892
CT Exams	864	695	842	852	3,253
Budget	1,059	952	1,019	960	3,990
Prior	704	642	701	725	2,772
Ultrasound Exams	529	511	631	675	2,346
Budget	572	538	599	665	2,374
Prior	467	355	550	586	1,958
MRI Exams	169	153	157	173	652
Budget	111	84	169	174	538
Prior	102	87	123	127	439

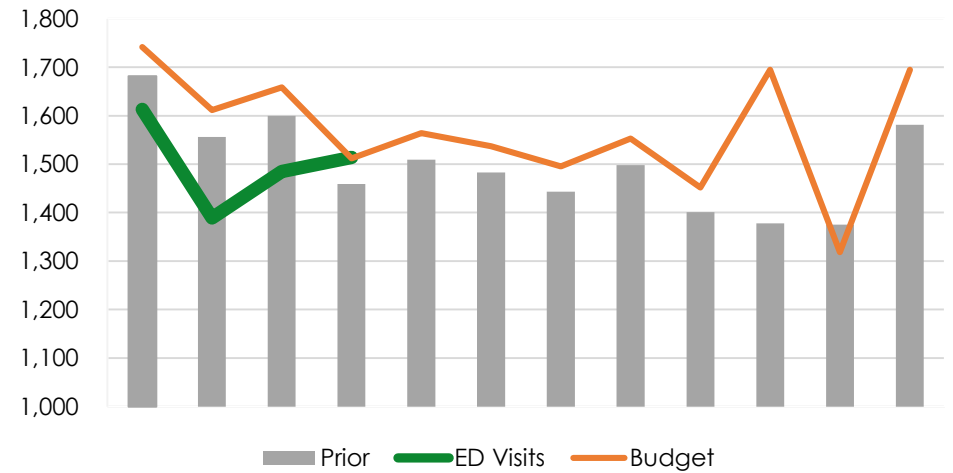
Statistic	Jan-2026	Feb-2026	Mar-2026	Apr-2026	YTP
Nuclear Medicine	-	-	-	-	-
Budget	-	-	-	-	-
Prior	-	-	-	-	-
All Diagnostic Imaging Exams	3,543	3,294	3,602	3,677	14,116
Budget	3,667	3,076	4,004	4,140	14,887
Prior	3,292	2,949	3,388	3,432	
Therapy Treatments	1,631	1,426	1,821	2,078	6,956
Budget	1,659	1,363	1,406	1,652	6,079
Prior	1,136	902	967	1,149	4,154
Respiratory Therapy	1,056	1,337	1,443	1,250	5,086
Budget	686	671	626	711	2,693
Prior	883	1,072	803	699	3,457
Infusion Therapy	102	106	104	97	409
Budget	92	71	81	92	336
Prior	94	80	80	64	318
Interventional Pain	76	87	81	122	366
Budget	144	144	144	144	576
Prior	86	48	73	60	267
Wound Care	5	-	-	-	5
Budget	96	83	91	96	96
Prior	-	-	-	-	-
Podiatry	177	160	250	257	844
Budget	159	138	152	159	609
Prior	-	-	-	-	-
Endocrinology	-	-			-
Budget	-	-	-	-	-
Prior	-	-	-	-	-
HOS	391	391	481	520	1,783
Budget	521	462	515	529	2,027
Prior	188	135	165	134	622

Statistic	Jan-2026	Feb-2026	Mar-2026	Apr-2026	YTP
Urgent Care Visits	1,609	1,475	1,604	1,463	6,151
Budget	1,428	1,357	1,400	1,306	5,490
Prior	1,453	1,378	1,424	1,327	5,582
Kelsey Clinic Visits	786	772	941	735	3,234
Budget	989	945	1,070	1,048	4,053
Prior	760	746	813	863	3,182
McCleary Healthcare Clinic Visits	1,081	950	1,103	949	4,083
Budget	1,054	880	930	1,014	3,877
Prior	1,029	841	891	961	3,722
Summit Pacific Health Clinic Visits	1,190	1,056	1,135	975	4,356
Budget	1,255	1,163	1,134	1,270	4,822
Prior	1,008	933	913	1,016	3,870
Wellness Center Visits	3,214	3,009	3,052	3,080	12,355
Budget	3,703	2,887	3,667	3,803	14,060
Prior	3,146	2,460	3,114	3,237	11,957
All Clinics Visits	5,485	5,015	5,290	5,004	20,794
Budget	6,012	4,929	5,731	6,087	22,759
Prior	5,183	4,234	4,918	5,214	19,549
Operating Margin	3.3%	4.9%	32.1%	4.5%	
Goal	5.6%	5.2%	6.1%	5.8%	
Prior	13.6%	4.6%	29.5%	6.4%	
Days in AR	51	53	51	48	
Goal	50	50	50	50	
Prior	54	53	53	54	
Days Cash On Hand	305	305	298	305	
Goal	260	260	260	260	
Prior	257	262	264	277	
FTEs Employees	445.5	452.9	462.4	469.0	457.5
Budget	507.6	507.6	512.5	512.5	510.1
Prior	256.1	386.6	399.9	406.3	362.2

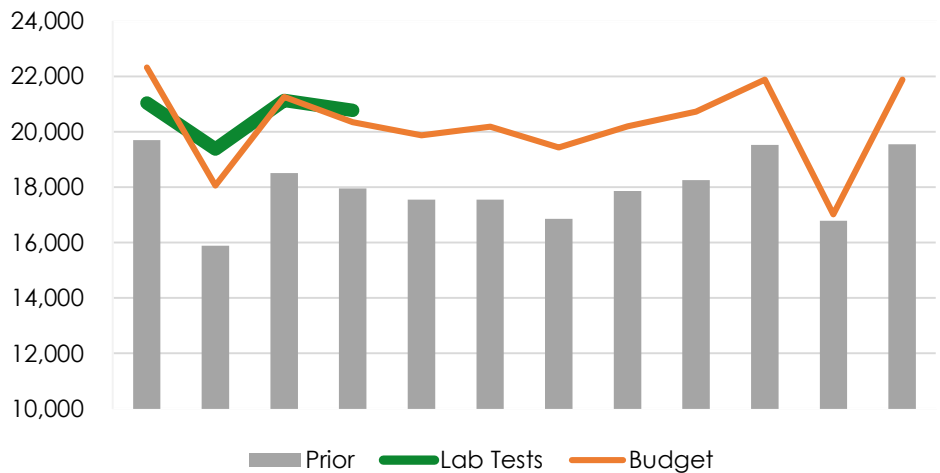
Patient Days



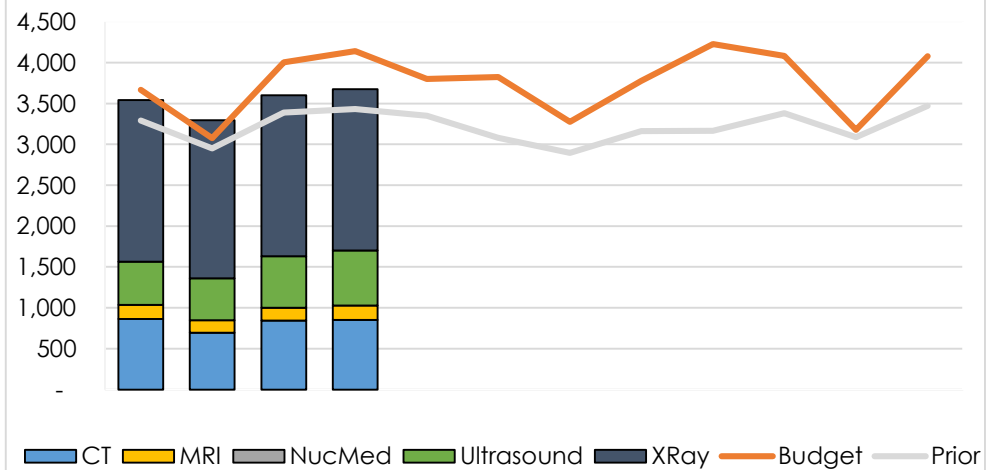
Emergency Department Visits



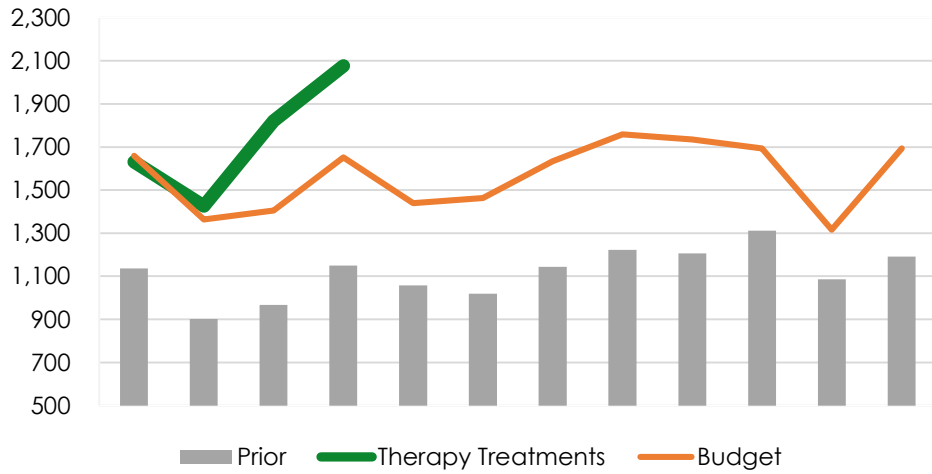
Lab Tests



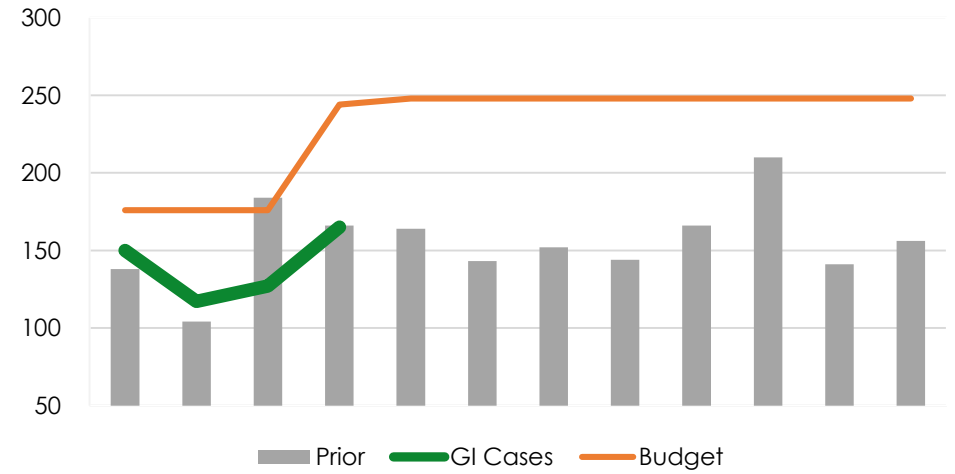
Diagnostic Imaging



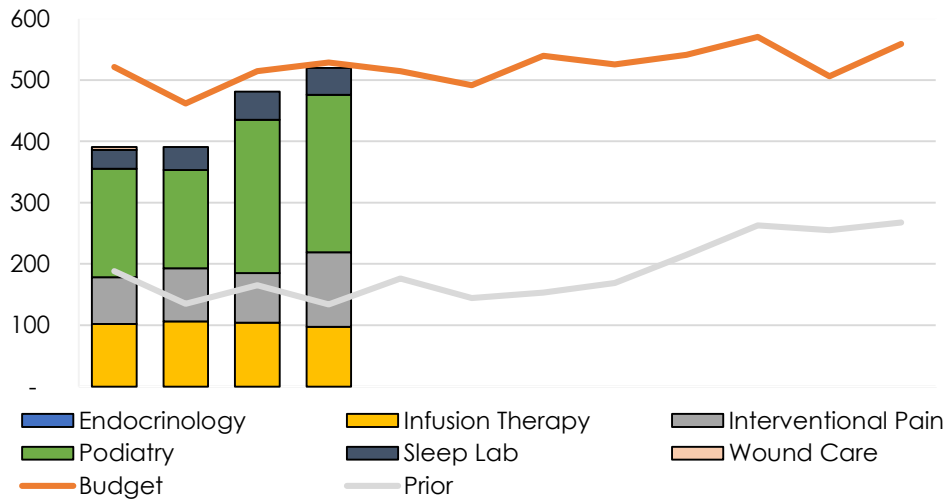
Therapy Treatments



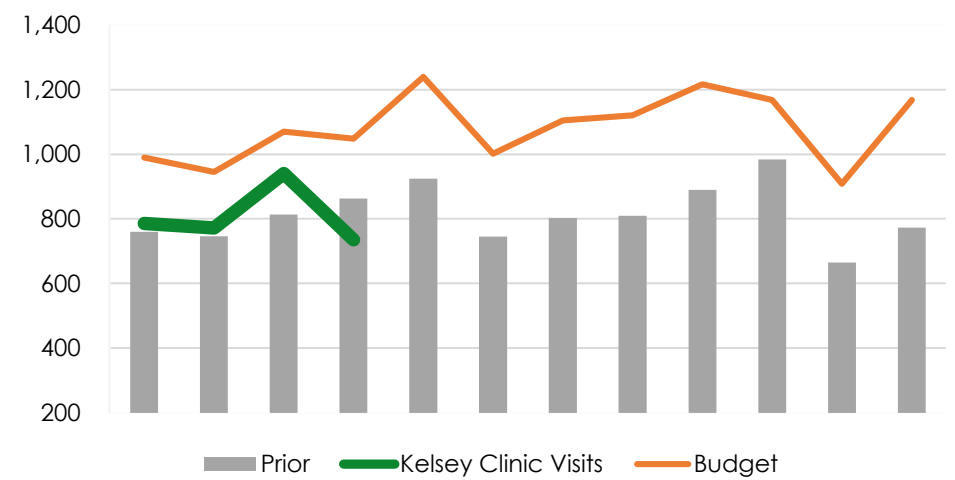
GI Cases



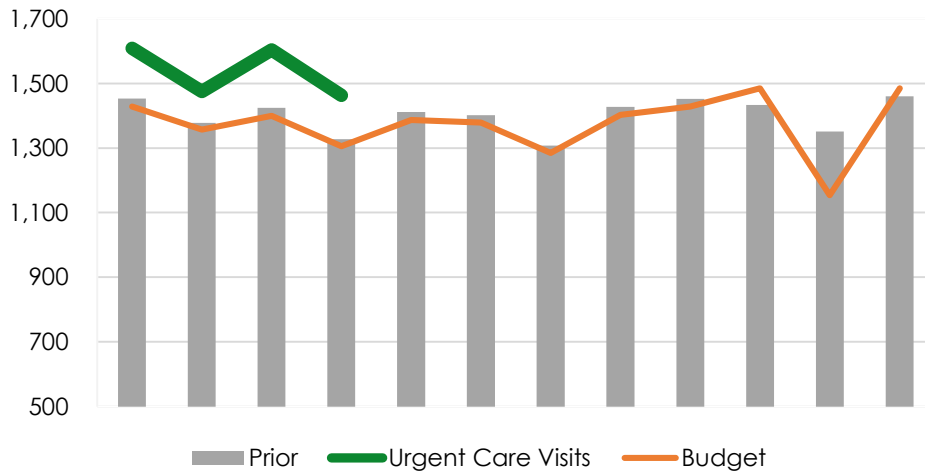
Hospital Outpatient Services



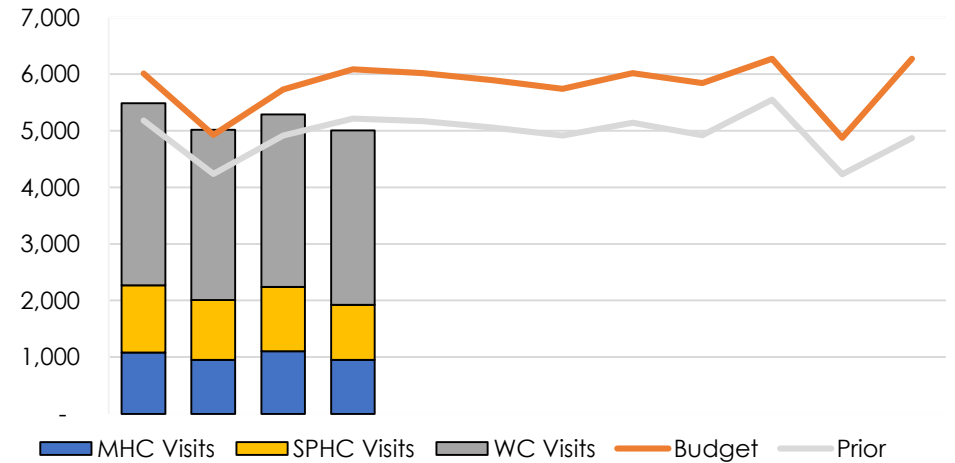
Specialty Clinic Visits



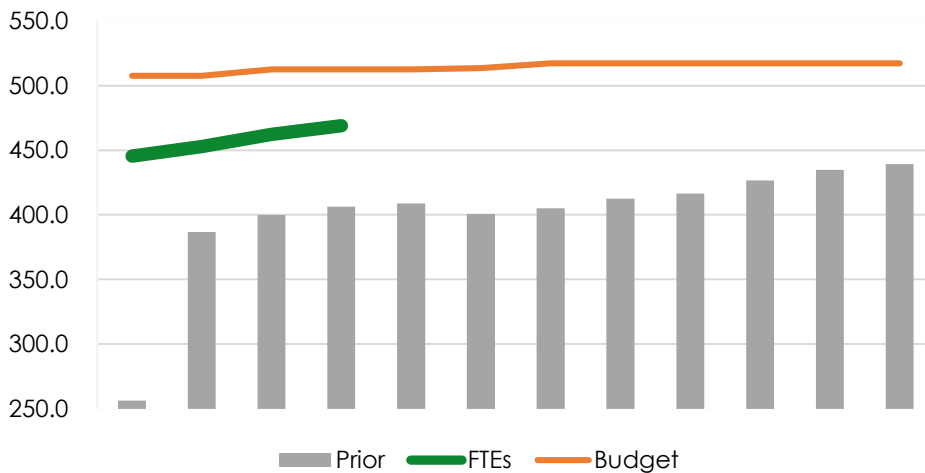
Urgent Care Visits



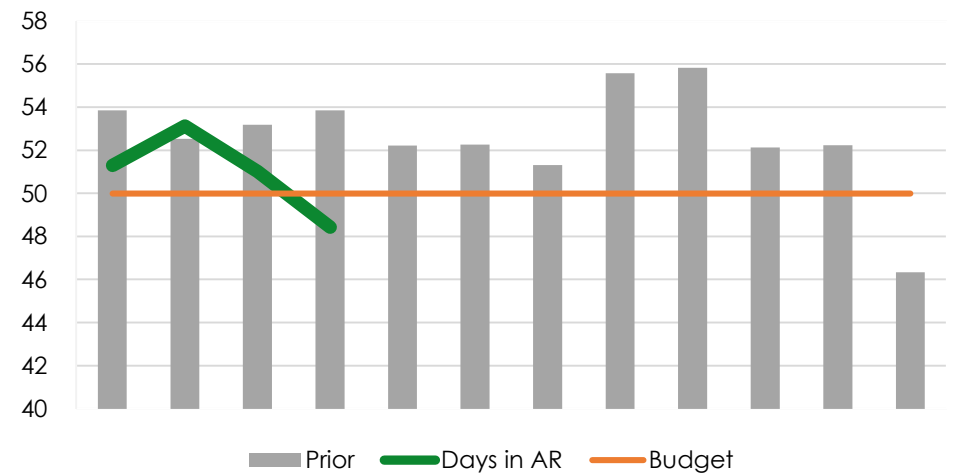
Primary Care Clinic Visits



FTEs



Days in AR



2026 Income Statement

Apr-2026	Month-to-Date				Year-to-Date			
	Actual	Budget	Variance	Var%	Actual	Budget	Variance	Var%
Gross Patient Revenue								
Medicare Revenue	\$ 10,830,640	\$ 11,310,310	\$ (479,669)	(4.2%)	\$ 40,508,754	\$ 42,443,998	\$ (1,935,244)	(4.6%)
Medicaid Revenue	\$ 5,207,295	\$ 5,473,289	\$ (265,994)	(4.9%)	\$ 19,884,098	\$ 20,953,457	\$ (1,069,359)	(5.1%)
Other Revenue	\$ 7,915,814	\$ 8,820,837	\$ (905,023)	(10.3%)	\$ 31,206,651	\$ 33,244,980	\$ (2,038,329)	(6.1%)
Total Gross Patient Revenue	\$ 23,953,749	\$ 25,604,436	\$ (1,650,686)	(6.4%)	\$ 91,599,503	\$ 96,642,435	\$ (5,042,932)	(5.2%)
Patient Revenue Deductions								
Medicare Contractual	\$ 6,791,141	\$ 6,388,124	\$ (403,017)	(6.3%)	\$ 23,195,870	\$ 27,186,048	\$ 3,990,178	14.7%
Medicaid Contractual	\$ 2,913,385	\$ 3,964,150	\$ 1,050,765	26.5%	\$ 13,752,801	\$ 14,873,124	\$ 1,120,323	7.5%
Other Contractual	\$ 2,447,653	\$ 3,405,734	\$ 958,082	28.1%	\$ 9,923,207	\$ 12,596,986	\$ 2,673,779	21.2%
Bad Debt Expense	\$ 2,224,722	\$ 2,188,641	\$ (36,081)	(1.6%)	\$ 9,037,301	\$ 4,397,426	\$ (4,639,875)	(105.5%)
Community Care	\$ 408,533	\$ 375,863	\$ (32,670)	(8.7%)	\$ 1,336,819	\$ 1,393,448	\$ 56,629	4.1%
Administrative Adjustments	\$ 166,861	\$ 270,327	\$ 103,466	38.3%	\$ 554,248	\$ 999,596	\$ 445,348	44.6%
Total Revenue Deductions	\$ 14,952,294	\$ 16,592,840	\$ 1,640,546	9.9%	\$ 57,800,245	\$ 61,446,628	\$ 3,646,383	5.9%
340B Revenue	\$ 32,696	\$ 41,667	\$ (8,971)	(21.5%)	\$ 263,001	\$ 166,667	\$ 96,334	57.8%
Net Patient Revenue	\$ 9,034,151	\$ 9,053,262	\$ (19,111)	(0.2%)	\$ 34,062,259	\$ 35,362,474	\$ (1,300,215)	(3.7%)
Other Revenue								
Other Operating Income	\$ 402,810	\$ 469,816	\$ (67,006)	(14.3%)	\$ 6,249,872	\$ 1,879,264	\$ 4,370,608	232.6%
Total Other Revenue	\$ 402,810	\$ 469,816	\$ (67,006)	(14.3%)	\$ 6,249,872	\$ 1,879,264	\$ 4,370,608	232.6%
Net Operating Revenue	\$ 9,436,961	\$ 9,523,078	\$ (86,117)	(0.9%)	\$ 40,312,131	\$ 37,241,738	\$ 3,070,393	8.2%
Operating Expenses								
Salaries & Wages	\$ 4,181,858	\$ 4,597,743	\$ 415,885	9.0%	\$ 17,064,373	\$ 17,516,471	\$ 452,098	2.6%
Benefits	\$ 1,421,323	\$ 1,257,913	\$ (163,410)	(13.0%)	\$ 4,759,122	\$ 5,028,778	\$ 269,656	5.4%
Professional Fees	\$ 299,658	\$ 262,660	\$ (36,998)	(14.1%)	\$ 879,164	\$ 1,045,082	\$ 165,918	15.9%
Supplies	\$ 637,022	\$ 624,883	\$ (12,139)	(1.9%)	\$ 2,350,769	\$ 2,499,531	\$ 148,763	6.0%
Utilities	\$ 77,105	\$ 67,843	\$ (9,262)	(13.7%)	\$ 296,403	\$ 271,370	\$ (25,033)	(9.2%)
Purchased Services	\$ 1,112,547	\$ 1,080,298	\$ (32,249)	(3.0%)	\$ 4,736,881	\$ 4,326,748	\$ (410,134)	(9.5%)
Insurance	\$ 39,534	\$ 55,167	\$ 15,633	28.3%	\$ 149,371	\$ 220,667	\$ 71,295	32.3%
Other Expenses	\$ 477,446	\$ 392,837	\$ (84,609)	(21.5%)	\$ 1,533,007	\$ 1,646,991	\$ 113,984	6.9%
Rentals & Leases	\$ 9,703	\$ 9,884	\$ 181	1.8%	\$ 54,809	\$ 44,992	\$ (9,816)	(21.8%)
Depreciation	\$ 756,175	\$ 616,807	\$ (139,368)	(22.6%)	\$ 3,070,988	\$ 2,514,490	\$ (556,497)	(22.1%)
Total Operating Expenses	\$ 9,012,371	\$ 8,966,034	\$ (46,336)	(0.5%)	\$ 34,894,887	\$ 35,115,122	\$ 220,235	0.6%
Operating Income (Loss)	\$ 424,591	\$ 557,044	\$ (132,453)	(23.8%)	\$ 5,417,244	\$ 2,126,616	\$ 3,290,628	154.7%
Non-Operating Revenue/(Expenses)								
Tax Revenue	\$ 316,885	\$ 311,000	\$ 5,885	1.9%	\$ 387,888	\$ 455,000	\$ (67,112)	(14.7%)
Contributions from SPMF	\$ -	\$ 65,000	\$ (65,000)	(100.0%)	\$ -	\$ 260,000	\$ (260,000)	(100.0%)
Interest Income	\$ 316,521	\$ 272,670	\$ 43,851	16.1%	\$ 1,235,968	\$ 1,090,680	\$ 145,288	13.3%
Interest Expense	\$ (541,773)	\$ (512,555)	\$ (29,218)	5.7%	\$ (2,106,148)	\$ (2,071,353)	\$ (34,795)	1.7%
Total Non-Operating Rev/(Expenses)	\$ 91,633	\$ 136,115	\$ (44,482)	(32.7%)	\$ (482,291)	\$ (265,673)	\$ (216,618)	81.5%
Net Income (Loss)	\$ 516,224	\$ 693,159	\$ (176,935)	(25.5%)	\$ 4,934,953	\$ 1,860,943	\$ 3,074,010	165.2%

Apr-2026

Actual

Month-to-Date

Budget

Variance

Var%

Year-to-Date

Actual

Budget

Variance

Var%

METRICS

Operating Margin (\$&P)	(1.2%)	0.5%	(1.7%)		8.2%	0.1%	8.1%	
Operating Margin	4.5%	5.8%	(1.4%)		13.4%	5.7%	7.7%	
Net Income Margin	5.5%	7.3%	(1.8%)		12.2%	5.0%	7.2%	
Days in AR					48	50	2	3.1%
Days Cash on Hand					305	260	45	17.3%
Deduction %	62.4%	64.8%	2.4%		63.1%	63.6%	0.5%	
Net Patient Revenue %	37.6%	35.2%	2.4%		36.9%	36.4%	0.5%	
Net Operating Revenue %	39.4%	37.2%	2.2%		44.0%	38.5%	5.5%	
Paid FTEs (excludes Agency)	469.0	512.5	43.6	8.5%	457.5	510.1	52.6	10.3%
Hours	75,034	90,207	15,173	16.8%	328,414	342,838	14,424	4.2%
Net Patient Revenue per FTE (\$K)	\$ 19,264	\$ 17,664	\$ (1,601)	(9.1%)	\$ 74,461	\$ 69,330	\$ 5,130	7.4%
Labor Cost per FTE (\$K)	\$ 11,948	\$ 11,425	\$ (523)	(4.6%)	\$ 47,706	\$ 44,201	\$ (3,505)	(7.9%)

Balance Sheet as of Apr-2026

Assets	Apr-2026	Mar-2026	1 Month Variance	Apr-2025	12 Month Variance
Current Assets					
Operating Cash	85,468,477	81,220,263	4,248,214	66,236,454	19,232,023
Self-Insured Reserve	1,957,500	1,957,500	-	1,957,500	-
Total Operating Cash	87,425,977	83,177,763	4,248,214	68,193,954	19,232,023
MFP Construction Cash	8,058,922	8,754,150	(695,228)	26,453,536	(18,394,614)
Debt Reserve	8,253,492	8,253,492	-	8,253,492	-
Total Restricted Cash	16,312,415	17,007,642	(695,228)	34,707,029	(18,394,614)
Accounts Receivables	37,373,921	38,344,720	(970,799)	37,638,324	(264,403)
Less Allow for Uncollectables	(7,768,914)	(7,780,982)	12,068	(5,894,358)	(1,874,556)
Less Contractual Adjustments	(21,830,119)	(21,950,993)	120,874	(16,841,191)	(4,988,928)
Accounts Receivable - Net	7,774,888	8,612,745	(837,857)	14,902,775	(7,127,887)
Taxes Receivable	316,885	47,924	268,961	310,853	6,033
Other Receivables	2,571,725	8,292,057	(5,720,332)	3,213,492	(641,767)
Inventory	896,682	910,711	(14,029)	922,793	(26,111)
Prepaid Expenses	958,479	1,115,167	(156,687)	862,232	96,248
Total Current Assets	116,257,051	119,164,009	(2,906,958)	123,113,126	(6,856,076)
Property, Plant and Equipment					
Land	1,652,029	1,652,029	-	1,652,029	-
Land Improvements	6,169,063	6,169,063	-	4,571,049	1,598,015
Buildings	88,567,955	88,552,397	15,558	47,846,490	40,721,464
Equipment	28,781,697	28,567,864	213,833	26,590,796	2,190,902
Right of Use Asset	3,802,259	3,802,259	-	-	-
Construction In Progress	8,533,021	7,707,410	825,611	41,520,216	(32,987,195)
Less Accumulated Depreciation	(47,936,560)	(47,175,682)	(760,878)	(39,982,749)	(7,953,811)
Property, Plant and Equipment - Net	89,569,464	89,275,340	294,124	82,197,831	7,371,633
Total Assets	205,826,515	208,439,349	(2,612,834)	205,310,958	515,557

Balance Sheet as of Apr-2026

Liabilities	Apr-2026	Mar-2026	1 Month Variance	Apr-2025	12 Month Variance
Current Liabilities					
Accounts Payable	118,499	2,182,738	(2,064,239)	6,434,304	(6,315,805)
Other Payables	1,254,905	1,235,859	19,046	952,800	302,105
Payroll and Related Liabilities	6,471,364	6,768,440	(297,076)	5,242,289	1,229,075
Interest Payable	2,095,220	1,868,184	227,035	2,093,990	1,229
Third Party Settlement Payable	838,521	1,367,284	(528,763)	616,444	222,077
Other Current Liabilities	1,238,325	1,245,689	(7,363)	1,333,866	(95,541)
Current Maturities of LTD	3,005,661	3,005,661	-	2,767,516	238,145
Total Current Liabilities	15,022,495	17,673,854	(2,651,360)	19,441,210	(4,418,716)
Non Current Liabilities					
Current Maturities of LTD	(3,005,661)	(3,005,661)	-	(2,767,516)	(238,145)
Long Term Debt	108,578,937	109,056,636	(477,698)	110,879,414	(2,300,477)
Total Non Current Liabilities	105,573,277	106,050,975	(477,698)	108,111,898	(2,538,622)
Total Liabilities	120,595,771	123,724,829	(3,129,058)	127,553,108	(6,957,337)
Net Assets					
Unrestricted Fund Balance	8,055,347	8,055,347	-	8,055,347	-
YTD Excess of Revenues	72,240,444	72,240,444	-	61,938,216	10,302,227
YTD Earnings(Loss)	4,934,953	4,418,730	-	7,764,286	-
Total Net Assets	85,230,744	84,714,520	-	77,757,849	7,472,895
Total Liabilities and Net Assets	205,826,515	208,439,349	(2,612,834)	205,310,958	515,557