



Campbell County Health

Excellence Every Day

Board Meeting Minutes | Public Session February 26th 2026

Campbell County Health | Fifth Floor Classroom | 5:00 PM

Attendance:

Tom Murphy	Chairman	Shane Kirsch	EMS
Sara Hartsaw MD	Vice-Chair	Paty McJilton	Quality
Rand Hite	Treasurer	Bree Richardson	Marketing
Bill Rice	Secretary	Mike Smith	Facilities
John Mansell MD	Trustee	Sara Pence	Finance
Alan Stuber	Trustee	Tom Lubnau	Legal
Dr Angela Biggs	Trustee	Diane Zdiennicki (Virtual)	UHealth
Matt Shahan	CEO	Jason Frye (Virtual)	EMS
Adam Popp	CFO	Landon Chweh (Virtual)	Vendor
Natalie Tucker	CNO	Julie Shock (Virtual)	Respiratory
Dawn Hodges	CHRO	Kellie Langham	EA / Minutes
Caitlin Berkey	PR		
Chris Beltz	Urgent/Emergent		



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Consent/Information Agenda	Leader	Time	Discussion
Pledge of Allegiance			
Call to Order	Tom Murphy	5:00pm	Mission & Vision Statement
Roll Call	Kellie Langham		A quorum is present – Trustee Stuber & Vice Chairman Hartsaw have excused themselves will join as soon as possible.
Approval of Agenda			Trustee Mansell move to approve the agenda as presented. Trustee Biggs seconded. Motion carried unanimously.
Consent Agenda			<ul style="list-style-type: none"> • Previous Board Minutes – Jan 22 2026 • Board Committee Meeting Minutes – <ul style="list-style-type: none"> - Finance Committee - Wright Advisory Board – Sept 2025 - Hulett Advisory Board – May 2025 - Quality Committee - WREMS
Recognition	Matt Shahan		<p>Trustee Biggs moved to approve the consent agenda as presented. Trustee Mansell seconded. Motion carried unanimously.</p> <ul style="list-style-type: none"> - Dr Moran Nandular (Cardiologist) - Ashley Donahoo (Health Coach) - Susan Maxwell (Unit Supervisor @ The Legacy) - Kim Maser (Activities Supervisor @ The Legacy) - Morgan Greenough (Infection Prevention @ The Legacy) - TruBean Expansion Services (Radiation Oncology)
Public Questions/Comments			Discussion



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	Tom Murphy Discussion Leader	Time	None
Discussion Items	Patty McJilton	10min	Discussion
Quality Review			<ul style="list-style-type: none"> • Monitor and analyze quality metrics from multiple data sources • Support process improvement initiatives • Ensure care aligns with current professional standards and CMS guidelines • Promote high-quality, patient-centered care consistent with best medical evidence <p>Their focus is continuous monitoring and improving healthcare services across the organization.</p> <p>QAPI (Quality Assurance Performance Improvement) Committee The multidisciplinary QAPI committee:</p> <ul style="list-style-type: none"> • Meets quarterly (or more frequently if needed) • Includes staff from multiple departments, a provider, and administration • Reviews trends identified through reporting systems • Prioritizes high-risk, high-volume, or problem-prone areas • Makes recommendations to executive leadership and the Board for approval • Patient falls • Infection control • Diagnostic errors • Specimen labeling issue <p>Findings are reviewed and formal improvement plans are implemented.</p> <p>Current Quality Initiative: Epic Monitoring The current board-approved QAPI initiative focuses on monitoring issues related to the July 2025 transition to Epic.</p>



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	<p>Leadership, including the Director of Inpatient Units, is collaborating internally and with UCHealth to determine whether issues are system-based or education-related.</p> <p>The board also discussed minor patient-facing concerns with MyChart login codes, noting ongoing refinement of the system.</p> <p>CMS Care Compare & Star Rating Update</p> <p>The department reviewed publicly reported hospital performance data through CMS Care Compare, which evaluates:</p> <ul style="list-style-type: none">• Process of care measures• Outcome measures• Patient experience (HCAHPS)• Imaging efficiency• Emergency department throughput• Care transitions• Patient safety <p>CCH's Star Rating history:</p> <ul style="list-style-type: none">• 2022: 4 stars• 2023–2025: 2 stars• Latest preview report: Increased to 3 stars <p>Leadership noted:</p> <p>Star ratings are determined by very small percentage differences</p> <p>Publicly reported data often reflects information that is 1–3 years old</p> <p>Some lower data periods coincided with COVID-era reporting</p> <p>The organization is trending upward and remains very close to higher rating thresholds.</p>
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Capital Requests & Finance Report Out and Approval	Discussion Leader	Time	Discussion
<p>✓ CR-EMS Laryngoscopes</p>	Adam Popp		<p>Trustee Mansell motioned, seconded by Trustee Biggs to approve Capital Requests for EMS Laryngoscopes put forward. Motion carried.</p>
<p>Bad Debt and Charity</p>	Adam Popp		<p>January 2026 - Charity \$ 93,461.73 Bad Debt \$1,160,422.79 <u>Grand Total: \$1,253,884.52</u></p> <p>Trustee Murphy motioned, seconded by Trustee Mansell, to approve January Bad Debt and Charity Care as presented in the amount of \$1,253,884.52. Motion carried.</p>
<p>Financial Report Out</p>	Adam Popp		<p>Capital Budget We have committed \$2,454,402 of the \$4,844,218 budgets and paid \$1,459,046</p> <p>Utilization Reports - January:</p> <ul style="list-style-type: none"> • Admission are slightly down from the previous month but still above budget • We had 50 Newborn deliveries • Surgeries are 217 lower than budget and down from December • Lab procedures are slight below expectations due to lower than anticipated provider activity • Legacy saw a few admissions <p>Days Cash On Hand:</p> <ul style="list-style-type: none"> • Days Cash for January was 137 compared to December was 135. <p>Revenue vs Expense:</p> <ul style="list-style-type: none"> • Revenue cycle performance metrics were also discussed. • Total accounts receivable measured 76.2 days with Epic-related accounts receivable at 63.9 days. • Denials remain an area of focus as staff continue resolving issues identified – a more structured denial management process is being



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Report Out's	Discussion Leader	Time	Discussion
			<p>implemented to address these issues and improve departmental feedback</p> <ul style="list-style-type: none"> • Leadership also noted improvements in billing timelines compared to past • Leadership reported that overall trends indicate continued stabilization and improvement in financial performance. <p>Trustee Hite motioned, seconded by Trustee Hartsaw, to approve January financial reports as presented. Motion carried.</p>
Board Chair Report	Chairman Tom Murphy		<ul style="list-style-type: none"> - Changes to emergency dispatch services and broader concerns about regional economic conditions. - Campbell County Sheriff's Office will discontinue providing dispatch services for EMS. The Sheriff's office will no longer provide dispatch services for CCH EMS. - Confirmed hospital received formal notification effective July 1st. - CCH Leadership is in discussions with city officials about transitioning dispatch support and indicated that services will continue uninterrupted.
UCHealth	Diane Zdziennicki		<ul style="list-style-type: none"> - Reported ongoing leadership recruitment, noting interviews are underway for a VP of Operations position connected to transition of Estes Park Health as it integrates into UCHealth. - Construction progress highlighted at UCHealth Medical Center of the Rockies; new patient tower scheduled to open and receive its first patients April 20th. - UCHealth recently experienced unexpected increases in patient demand - UCHealth leadership actively working with CCH leadership team on strategic planning efforts.
CHRO	Dawn Hodges		<ul style="list-style-type: none"> - New chapel space officially opening - Legacy Care Center is preparing for an upcoming Special Focus survey before March 11th - Legacy is currently undergoing a PBJ staffing audit - The Legacy achieved the training threshold to become a Dementia capable care workforce with plans to expand training across additional departments - Currently 88 hospital positions and 36 Legacy positions



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			<ul style="list-style-type: none"> - Annual employee engagement survey is underway - New mammography machine was delivered and is currently undergoing calibration - Legacy pharmacy services have officially transitioned to the hospital pharmacy - Leadership plans to expand dementia care certification training with a goal of 100% certification at the Legacy and broader adoption across hospital departments.
CFO	Adam Popp		<ul style="list-style-type: none"> - Continuing to manage frequent payer inquiries and retrospective audits - Blue Cross Blue Shield has downgraded certain facility billing levels - Strong appeal success rate and new revenue cycle analyst, has join the team to support these efforts - All security positions have now been filled improving operational coverage - Unidine continues to achieve high patient satisfaction, maintaining a 97% approval rating - 35 EMS staff members completed Mental Health First Aid training
CNO	Natalie Tucker		<ul style="list-style-type: none"> - Hospital launched NPSQIP (Neonatal Patient Safety and Quality Improvement Program) - Grant writer Yvette Land was recognized for producing clear, well-aligned documentation that strongly reflects program goals - Dr Salmon was featured in "America's Best in Medicine" article, highlighting professional recognition for clinical excellence - Leadership is evaluating a virtual nursing platform that could enhance patient safety, care quality and telehealth capabilities - Hospitals average length of stay is currently 2.5 days - Leadership continues to focus on recruitment to reduce staff burnout and control labor costs while strengthening care teams
CEO Report	Matt Shahan		<ul style="list-style-type: none"> - Leadership continues to closely monitor the Rural Health Transformation - Fund legislation currently under consideration in the Wyoming Legislature - Several legislative developments were highlighted: <ul style="list-style-type: none"> Price Transparency Bill EMS reimbursement improvements - Launched strategic planning process – 50 managers and directors participating along with UCHealth representatives



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Adjournment	Tom Murphy	Time	
Public Session Adjourned	Tom Murphy	6:40pm	Trustee Hartsaw moved to enter into Executive Session at 6:40pm to discuss Medical Staff matters. Trustee Mansell seconded the Motion. Motion carried unanimously. - PURSUANT TO W.S. 16-4-405(A)(IX), W.S. 35-17-101 ET SEQ, W.S. 35-2-910 AND W.S. 35-2-618, CONFIDENTIAL PERSONNEL MATTERS AND ATTORNEY CLIENT INFORMATION – PURSUANT TO W.S. 16-4-405(A)(III), (VII) AND (IX) W.S. 1-12-102 AND W.S. 16-4-405(A)(VII) AND W.S. 16-4-405(A)(VI) AND TRADE SECRETS PURSUANT TO W.S. 40-24-101 ET SEQ.
Board Action from Executive Session – Public Session Opened		9:03pm	Executive Session opens to Public Session at 9:03pm to approve medical staff appointments. Motion was made by Trustee Murphy. Seconded by Trustee Hartsaw. MOTION CARRIED UNANIMOUSLY. Public Session closed at 9:04pm


 Bill Rice, Secretary


 Kellie Langham, Recorder