

Board Meeting Minutes

July 17, 2025

Gillette College Health Science Building- 5:00 PM

Meeting ID: 294 508 661 081 9 Passcode: zx9yN3k3

Attendance:

Trustee Hartsaw Matt Shahan, CEO
Trustee Rice Adam Popp, CFO
Trustee Hite Dawn Hodges, CHRO
Trustee Mansell Natalie Tucker, CNO

Trustee Biggs Jamie Kay, Executive Assistant

Trustee Stuber

- A. Pledge of Allegiance
- B. Call to Order
 - a. Mission Statement
 - b. Vision Statement
- C. Roll Call--Quorum is present; Chairman Murphy and Trustee Hite is excused.
- D. Approval of Agenda

TRUSTEE BIGGS MOVED TO APPROVE THE AGENDA AS PRESENTED. TRUSTEE RICE SECONDED. MOTION CARRIED UNANIMOUSLY.

E. Consent Agenda

- a. Approval of Board Minutes –June 26, 2025
- b. Board Committee Meeting minutes only on months with a meeting
 - i. Finance Committee
 - ii. Quality Committee
 - iii. Behavioral Health Steering Committee
 - iv. Legacy Advisory Committee
 - v. WREMS (Wyoming Regional Emergency Medical Services)
 - vi. Ratification of Contracts
 - 1. Boardvantage
 - 2. Ellkay
 - 3. Everbridge

TRUSTEE RICE MOVED TO APPROVE THE CONSENT AGENDA AS PRESENTED. TRUSTEE BIGGS SECONDED THE MOTION. MOTION CARRIED UNANIMOUSLY.

F. Recognition Items

a. Record Breaking Mother's Milk Donation Shipped to Milk Bank

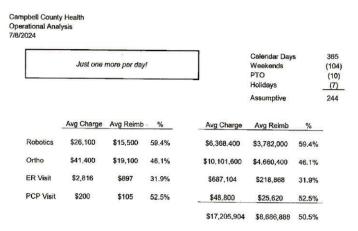


- b. Camp Med: Session II
- c. Repeal of Gun Free Zones
- d. Varian TrueBeam Installation Update
- e. CCH Participated in the 4th of July Parade
- f. 2 Days to EPIC Go Live
- G. Public Questions or Comments
 None
- H. Action Items Continued
 - a. FY26 Budget

Fiscal Years 2022-2025 were reviewed and discussed. Over the last three-year period, CCH has seen a 17% growth in Gross Revenue. Total Deductions for that period remained fairly constant, resulting in higher Net Revenue year-over-year. Total Operating Expenses, absent the one year of excess Revenue Cycle related expenses, have remained relatively flat. Unfortunately, the Operating Expense budget for FY26 includes holdover expenses relative to Meditech and some new vendors associated with Epic. The increased Gross Revenue coupled with consistent deduction percentages reflect improvement year-over-year in the CCH Operating Margin. The above results are notable, especially in light of the decline in the Mill Levy since FY23.

Discussion: the 17% improvement; revenue in excess over expenses 81% better than FY 2022. That reflects the change of shortage of \$24m down to \$4m as projected for this year.

Last year Administration introduced the "Just one more per day!" concept with the goal to beat the budget by \$8m. The concept was to add more patient service to the day. The concept is very similar to the penny aggregation concept, highlighting the impact of small changes over a period of time – the example was how only 4 departments could generate \$8m in collectible revenue utilizing the "one more" concept.



The Cost Savings Tracker was introduced last year as well. It is an internal document that tracks savings throughout the organization. In FY25 over \$5m was identified as potential savings and over \$4m was achieved. May YTD Net Revenue (gross revenue less deductions)

was favorable to budget by \$1.4M. Expenses are favorable to budget by \$4.5M. Financial Statements show almost \$6m in favorable performance compared to the Budget.

item	Description	Owner/Dept	Status	Dept Impacted	Туре		Financial Imp	act FY24-25	Financial Imp	act FY25-26
			(drop down)		(drop down)		Expected	Achieved	Expected	Achieved
1	All Improvements			reaching a common supplied	Approximation -	the State of	5,012,889.77	\$ 4,144,567.06		
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1.194								***************************************		
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1.199				***************************************	1	†				
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1.201						-				

\$ 5,012,889.77 \$ 4,144,567.06 \$ 2,994,262.26 \$ 83,750.00

Fiscal Year 2026 Budget Narrative

These are some of the things that impact the budget; some are favorable, some are not. Of the positive, we have providers set to join CCH in FY26.

FY26 Proposed Budget

FY26 gross revenue projected to be just under \$420M. Legacy is reducing their resident day projection; under their management directive to get to a resident census that can be staffed without travelers. The Allowances, Bad Debt & Charity in the proposed budget are tracking with YTD April trends and are expected to continue.

At the expense level, Salaries-Market Adjustments in late February so some of that hit in FY25, majority portion of Market Adjustments will actually carry into FY26. Contract Labor is favorable, largely due to Surgery, Legacy and to some degree Radiology. Purchase Services will see a crossover with EPIC implementation and sunsetting the Meditech Vendors.

FY26 Levy Projection is \$14.4m. Revenue Short of Expenses of about \$9.5m, which is about where we were FY24, not quite as good as FY25. Projection is that we will meet the Bond Covenant if we meet these projections.

Discussion regarding Purchase Services: the new vendors coming in related to EPIC, are they expected to be short term or long term? If it is related to EPIC, the new vendors will be long haul. Once Meditech is sunsetted the purchase services will see a reduction.

Discussion regarding: Cash Flow provided (Used) from Operations is derived from Operations and they are losing money and have been for years; however, the Cash Flow from All Activities, the non-operating income, such as interest income and Mill Levy. The goal of this Management Team is to get Operations to a break even and positive so that Mill Levy and Interest are not what brings accounts to the positive.



Budget Income Summary

Campbell County Health

as of 7/10/2025

For The Budget Year 2026					
	FY2023 Actual	FY2024 Actual	Current Yr Annualized	Proposed Budget FY26	Notes
Patient Revenue	Printer.	Action	Annuanzeu	buugetrizo	notes
Inpatient	72 455 748	72.698.537	80,436,368	78.028.150	Physician
Outpatient	306,069,084	334,362,846	334,833,616	341,956,894	Physician
Other Patient	0	0	0.0,000	0	e sty anticari
Total Patient Revenue	378,524,832	407,061,383	415,269,984	419,985,044	
Deductions From Revenue					
Charity Services	6,340,719	6,387,085	6,534,998	6,089,783	
Bad Debt	16,241,360	14,226,144	14,445,151	14,909,469	
Allowances	176,539,054	194,987,489	199,207,965	199,592,896	
Total Deductions From Revenue	199,121,133	215,600,718	220,188,114	220,592,148	
Net Patient Revenue	179,403,700	191,460,665	195,081,870	199,392,896	
Other Operating Revenue	5,838,911	6,671,092	4,122,692	4,852,795	
Total Operating Revenue	185,242,611	198,131,757	199,204,562	204,245,691	
Operating Expenses					
Salaries	58,641,126	60,479,393	60,776,335	63,567,813	Mkt Adj
Benefits	19,701,267	18,094,072	19,099,399	21,172,405	
Contract Labor	8,536,751	8,749,049	8,388,122	6,396,753	
Physician Salaries	26,404,596	24,966,692	25,740,662	26,448,565	
Non Employed Physician Comp	7,457,200	15,075,355	19,630,203	16.750.793	
Medical Supplies	13,160,470	13,804,811	14,036,523	14,464,949	
Drugs & Pharmaceuticals	13,232,586	16,158,614	18,832,957	19,989,267	
Non-Medical Supplies	4,847,035	6,287,283	6,482,793	6.688.984	
Purchased Services	40,594,009	36,135,103	23 394 360	27.264,305	Epic +
Utilities	2,802,993	2,702,414	2.737.336	2 642 504	4-31.0
Insurance	2,628,690	3,271,040	2,979,111	3.222.764	
Other Expenses	3.975.295	3.717.993	3 936 219	5.537.822	
Depreciation and Amortization	17.009.435	17.255.563	15.226.263	15.927.163	
Interest	1,348,898	1,294,803	1,102,013	968.380	
Total Operating Expenses	220,340,348	227,992,185	222,362,296	231,042,467	
Total Operating Revenue	(35,097,737)	(29,860,428)	(23,157,734)	(26,796,776)	
	-18.9%	-15.1%	-11.6%	-13.1%	
Non-Operating Income					
Unrestricted Contributions	0	0	0	0	
Non Operating Revenue	21,172,600	17,322,859	16,036,746	14,450,000	25% Res Red
Non Operating Revenue - Other	633,236	0	0	0	
investment income	0	0	0	0	
Interest Income	2,352,234	3,067,927	2.634,913	2,776,229	
Gain(Loss) on Sale of Assets	13,189	(16,283)	0	0	
Total Non-Operating Income	24,171,259	20,374,503	18,671,659	17,226,229	
Excess of Revenue Over Expenses	(10,926,479)	(9,485,925)	(4,486,075)	(9,570,547)	
Cash Flow Provided (Used) from					
Operations	(16,739,405)	(11,310,062)	(6,829,458)	(9,901,233)	
Cash Flow from All Activities	7,431,854	9,064,441	11,842,201	7,324,996	
MADS	5,390,311	5,390,311	5,390,311	5,390,311	
covenant threshold - 1.25	1.38	1.68	2.20	1.36	
excess/(short)	693,965	2,326,552	5,104,312	587,107	

FY Capital Budget will be a bit more conservative due to FY25 Capitals being a bit heavier. FY26 Proposed Capital Budget is \$4.8M.

Campbell County Health FY 2026 Capital Budget

FY 2026 Capital Budget	Recommended Budget		
Equipment	\$	3,260,944	
Facility Plan / CIP'S	\$	800,000	
IT Projects	\$	200,000	
GRANTS	\$	83,274	
FY 2026 Capital Budget	\$	4,344,218	
Contingency - Operational	\$	500,000	
TOTAL CAPITAL	\$	4,844,218	

Approved Capital Purchases:

Campbell County Health 2026 Capital Planning Process Capital Planning Year: 2026

Total Requested	5	6,219,326
Total Approved	5	4,344,218
Total Unapproved	5	1,875,108

Capital Committee Recommendations

Dept	Description	2026 Requested	Changes	2026 Approved
EMS Ambulance	Type 1 Ambulance Replacement	340,766		340,766
Materials Management	Replace Mail Machine	21,548		21,548
Urology	Laborie NXT Evo Urodynamic Machine	86,428		86,428
Respiratory Therapy	I-Stat Analyzer	24,164	(12,082)	12,082
EMS Ambulance	Type 1 Ambulance Replacement (2)	340,766		340,766
Med / Surg	Patient Beds	151,527		151,527
EMS Ambulance	Type 1 Ambulance Replacement (3)	340,766		340,766
EMS Ambulance	Type 1 Ambulance Replacement (4)	340,766		340,766
Radiology	Mammography System Replacement	401,522		401,522
EMS Ambulance		293,776	(102,083)	191,693
Radiology Oncology QA equipment for TrueBeam		299,249		299,249
Employee Health FIT test machine		22,150		22,150
Plant Ops	Flow Hoad for HVAC testing	6,249	Maria (100 Maria 100 Maria	6,249
CT Scanner	Syngo Via Software Update	29,238		29,238
EMS Ambulance	Portable Video Laryngoscopes	53,344	(14,761)	38,583
EMS Ambulance	Lifepak 15 V.4	180,000		180,000
Biomed	Likepak 15 Batteries (QTY 62)	27,465		27,465
Surgery	Stryker OR Camera Control Units	375,333		375,333
Laundry	Dryer	24,500		24,500
Emergency Care Dept	Motorized Stretchers	30,313		30,313
EMS Ambulance	iSimulate Training Equipment	12,225		12.225
EMS Ambulance	Cardiac Monitors	71,049		71,049
IT Technology	Annual PC Replacement	440,700	(240,700)	200,000
Plant Ops	Dialysis water room	800,000		800.000



The Capital Committee and Departments did a great job in reviewing the capital requests and taking the initiative to reconsider FY26 Capital Purchases. One example was the decision to postpone the purchase of \$1.1m to replace IV Pumps related to EPIC until the next fiscal year, without a negative impact on patient care.

Dept	Description	2026 Requested	Changes	2026 Approved
Anesthesia	PACU Camera	7,709		
Pharmacy / Multiple depts	IV Pump replacement (EPIC)	1,154,015		
Pharmacy	LTC and Retail Pharmacy Furnishings	75,000		
HMR	Camera System for new 2nd street bldg.	25,835		
EMS Community	EPOC Device for mobile lab draws	7,850		
Emergency Care Dept	ED X3 upgrade	235,073		

Discussion 4 replacement ambulances—is that part of CCH or WREMS? The lead time to buy an ambulance is upwards of 2 years or more; we put the order in a while back; a price increase is coming; we could have chosen to forego some of the rigs. We are buying 4 for the cost of 3 under the new price increase. There is potential to use one of the rigs for WREMS. There is discussion with Sheridan County/City of Sheridan to fund the purchase of at least one rig. One of the ambulances was a push from last year.

Further discussion: with technological advancement in EMS Services; CCH EMS is operating with older equipment. The purchase of these ambulances is overdue. Campbell County Fire Department does a good job keeping the rigs running, but some are coming down to their last leg. The maintenance is becoming increasingly costly.

CCH has 17 ambulances. The age of the patient care compartment of some of the ambulances dates back to 2001; prior to making the request EMS did investigate replacing the chassis; however, at this time that was not determined to be the best option. The purchase of the rigs was a part of the EMS Grant that was rescinded by the State.

Statutorily required Publication and Public readings were met, and the graphic below was sent for publication on Tuesday, July 15, 2025, Newspaper. This reading is the third public reading. We are meeting today, July 17, 2025 to comply with Wyoming Statute.



OPERATING / CAPITAL BUDGET

FISCAL YEAR JULY 2025 - JUNE 2026

Total Patient Service Revenue	\$	419,985,044	
Contractual Allowance Bad Debt Charity Care	\$ \$	(199,592,896) (14,909,469) (6,089,783)	
Net Patient Service Revenue	\$	199,392,896	
Other Revenue	\$	4,852,795	
Total Operating Revenue	\$	204,245,691	PUBLIC HEARING
Operating Expenses			When:
Salaries & Benefits Contract Labor Physician Salaries & Fees Supplies Interest Expenses Depreciation & Amortization Other Expenses Total Operating Expenses Operating Income/(Loss)	\$ \$ \$ \$ \$ \$ \$	84,740,218 6,396,753 43,199,358 41,143,200 968,380 15,927,163 38,667,395 231,042,467 (26,796,776)	Thursday, July 17 at 5:00 pm Where: Gillette College Health Sciences Building 3801 College Drive Gillette, Wyoming
Non-Operating Income			
District Mill Levy Investments & Other Income Gain (Loss) Disposal of Assets Total Non-operating Gains, Net	\$ \$ \$	14,450,583 2,776,229 0 17,226,229	
Excess Revenue Over Expenses	\$	(9,570,547)	
Capital Budget	\$	4,844,218	

Trustee Biggs moved to approve the Proposed FY2026 Budget as presented. Trustee Stuber seconded the motion. Motion carried Unanimously.

Discussion: Trustee Stuber would like to express his gratitude to everyone in the organization for the work that they have put in to make this budget come to fruition. Trustee Biggs thanks CFO Popp for the extra explanation regarding the non-cash operations.

b. QAPI Initiatives

The Quality Committe met recently, and as the FY26 QAPI Initiative, they propose to monitor the incident reports and processes in areas that are currently in place compared to processes that will be implemented post EPIC go live. The goal of this QAPI Initiative is to form teams and make sure that incidences are properly addressed.

Specifically:

QAPI FY26 project as proposed by Quality Committee—

To ensure continued levels of quality and safety with implementation of new EPIC system and processes.

Throughout the year the QAPI Committe will meet and report back to the Board.

The Quality Committe, Chaired by Trustee Biggs, will meet and continue to develop new quality projects based on what we have learned post go live.



The Quality Committe will develop a Community Quality Scorecard that will be published on the CCH website in September. The Community Scorecard will be reported to the Board quarterly.

Trustee Rice moved to approve the FY26 QAPI Initiatives as presented. Trustee Stuber seconded the motion. Motion carried Unanimously.

Informational Items

- a. Chairman's Report
 - Moving through Summer well; the cooler weather has been very welcomed; as it continues to be hot, the risk of fire increases and thank you to our EMS and WREMS who will inevitably be called to standby.
- b. UCHealth Report
 - i. EPIC is going live in two days.
- c. CFO Report
 - i. June Finances will be discussed in August.
- d. CHRO Report
 - i. CHRO has asked her team to support all teams going to EPIC.
- e. CNO Report
 - i. LINAC Accelerator—final State Construction Inspection; they will be here next week; that will keep us on track to see Patients in August. The installation has been a big undertaking for staff and patients.
 - Antibiotic infusions will be moved to WIC area and share the entrance; as we are more familiar with EPIC we will start adding additional infusions.
 - iii. An offer was extended to and accepted for a new Psychologist that is a Wyoming native, and she will start in September. It has been a very long process, and we are excited to welcome her.
 - iv. Annually CCH renews our hospital license through the State of Wyoming. This year CCH reduced the number of beds from 90 to 86. Discussion regarding going from 90-95 for example; we must certify that we have room in the facility for more beds. If we chose to increase; we would be working with the State and providing floor plans to support the requested change.

f. CEO Report

- i. Touch on the Infusion move; this is a great change to ensure patient safety and quality, specifically separating chemo patients and antibiotic patients; this will allow staff sharing to provide more hours; this is a very big win for our patients.
- ii. EPIC—has consumed every bit of everyone's time even more in the last month than any others; it is a very exciting time for us; it's a big change for us and for the community; as we start talking about MyChart, community feedback has been positive. Continuity of care and patient safety and quality is a huge step. Next report will be on the progress of how EPIC is going.



iii. EPIC Support is in place to make go live smooth. A huge thank you to UCHealth and their implementation team.

Discussion regarding location of Antibiotic Infusion Center in WIC; back left; three rooms will be dedicated to Infusions and the well patient lobby will be used.

J. Adjourn

TRUSTEE STUBER MOVED TO ENTER INTO EXECUTIVE SESSION AT 5:55 TO DISCUSS MEDICAL STAFF MATTERS – 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)(VII) AND TRADE SECRETS PURSUANT TO W.S. 40-24-101 ET SEQ. TRUSTEE BIGGS SECONDED THE MOTION. MOTION CARRIED UNANIMOUSLY.

Public Session was adjourned at 5:56 p.m.

TRUSTEE STUBER MADE A MOTION TO RETURN TO THE PUBLIC MEETING AT 7:10 P.M. TRUSTEE MANSELL SECONDED THE MOTION, MOTION CARRIED UNANIMOUSLY.

Returned to Public Session at 7:10 P.M.

***Trustee Mansell declared a conflict of interest at left the room at 7:10 p.m. ***

TRUSTEE STUBER MADE A MOTION TO APPROVE MEDICAL STAFF APPOINTMENTS AS PRESENTED. TRUSTEE BIGGS SECONDED THE MOTION. MOTION CARRIED UNANIMOUSLY.

Trustee Mansell returned at 7:11 p.m.

TRUSTEE STUBER MADE A MOTION TO ADJOURN AT 7:11 P.M. TRUSTEE RICE SECONDED THE MOTION, MOTION CARRIED UNANIMOUSLY.

Bill Rice. Secretary

Jamie Kay, Recorder