

WASHINGTON COUNTY HOSPITAL AND CLINICS
Meeting of the Board of Trustees
Thursday, February 26, 2026 – 4:10 p.m.

The Washington County Hospital and Clinics Board of Trustees met in the Hospital Conference Room to conduct the monthly Board meeting on Thursday, February 26, 2026 at 4:15 p.m. Board Members present were David Bruns, Mike Driscoll, Ed Weeks, and Sue Basten. Also present were Shelli Cleverley and Phil Roudabush.

Recorder: Rachelle Sobaski

Press: None

Medical Staff: Steve Schomer, MD, Ryan Flannery, MD

Public: None

Guest: Cathy Rich, Luke Leyden, Anne Leyden

WCHC Staff: Tonya Wageman, Crystal Nicholson, Greta Clemons, Kelsey Bayliss, John Woodward, Bob Emry, Brian Bockting, Andrew Billhardt, Sarah FitzPatrick, Chelsy Sellers, Paige Chalupa, Makyla Maize, Sarah Greiner

Bruns called the meeting to order at 4:10 p.m.

REVIEW AGENDA

- None

Election of Trustee (Bruns)

- Election of Trustee
 - Bruns presented a resolution regarding a vacancy on the Board of Trustees. The nominating committee recommended Mary Rich (*name to be verified; transcript also suggests "Cathy Rich"*) to serve as a member of the Board of Trustees. Serving a term from March 1, 2026- December 31, 2026, or until successor is duly elected and qualified.

Driscoll made a motion to approve the election the trustee officer, seconded by Basten. Motion carried.

Minutes (Bruns)

The Thursday, January 29, 2026 Board meeting minutes were reviewed and approved with a motion made by Driscoll, seconded by Basten. Motion carried.

Board of Trustee ByLaws (Bruns)

- The Board conducted its annual review of the Board of Trustees bylaws, which had been distributed in advance for review. Discussion included whether signature lines could be updated without making a material change to the bylaws. It was clarified that an additional signature line could be added, but a material amendment would be required to change original signature references.

The Board of Trustees ByLaws were reviewed and approved by Basten, seconded by Driscoll. Motion carried.

BOARD EDUCATION

Provider Discussion (Basten and Bruns)

- Basten shared she met with Nathaniel Shekem and Dr. Thomas Striegel, both Emergency Room providers.
 - Providers expressed appreciation for the hospital's nursing staff, describing them as hardworking and working to the top of their skill levels.
 - They noted a strong culture and cohesion within the hospital that differs from larger systems.
 - They value the Epic Connect system and improved communication with primary care providers and the clinic expansion.
 - They requested continued access to data sheets showing volume trends and patient flow patterns.

- They identified difficult IV access and vascular access for CT patients as an area where additional clinical capability would be helpful.
- Staff reported that inpatient leadership had attended PICC/midline insertion training and were awaiting preceptorship in order to provide those services locally.
- Providers noted that after-hours and weekend ultrasound availability would be beneficial, particularly for OB and pediatric patients and vascular studies.
- Oncology planning was discussed. ER providers asked to be included proactively as oncology services expand so they can prepare for emergency department support needs, including on-call coverage, chemotherapy agent awareness, admission guidelines, and care pathways.

FINANCE

Financial Report (Cleverley)

- Mitchell shared Adam Haluska gave his quarterly Wells Fargo Investment report at Finance Committee.
 - Total admissions were approximately 10% higher year over year.
 - Patient days were approximately 10% higher year over year.
 - Swing bed/skilled days had increased significantly, which was noted as a positive development.
 - Most outpatient volumes were also increasing.
 - Days cash on hand: 147, against a target of 175.
 - Days in accounts receivable: 47, against a target of 40.
 - The organization reported a loss from operations for the month and fiscal year to date.
 - Total margin: approximately break-even for the month, with a positive fiscal year-to-date total margin percentage discussed.
- Balance sheet discussion included:
 - Excess general funds were moved into a money market account to improve return on investment.
 - This made operating cash appear lower on the balance sheet, though funds remained available in the general fund structure.
 - Stimulus funds were still reported separately pending auditor guidance.
- Income statement discussion included:
 - Gross revenue for the month was reported at approximately \$10.4 million.
 - Total operating revenue was just under \$5.9 million.
 - Total operating expenses were just under \$6.0 million.
 - Monthly operating loss was approximately \$133,000.
 - Salaries were above budget due to provider RVU payouts and a small staff bonus.
 - Supply expense increases were largely tied to hospital and retail pharmacy activity, with corresponding revenue increases also noted.
 - Contributions from the Foundation of approximately \$126,000 were recognized.
 - Fiscal year-to-date loss remained around \$2.0 million, though total margin had improved.
- Revenue Cycle Update (Roudabush)
 - The increase in AR was identified primarily as a Medicare-related payment delay, not a revenue loss.
 - The issue was tied to PECOS re-enrollment requirements for providers.
 - Medicare had required all providers to be re-enrolled in the PECOS system by January 1.
 - Claims are pending while Medicare processes those enrollments, causing receivables to age into older buckets.
 - Approximately 212 claims and roughly \$800,000 in charges were discussed as being affected, with anticipated reimbursement at roughly half that amount.
 - Additional delays were also noted for a small number of claims pending rural designation processing in Minneapolis.

- Staff emphasized that these claims are expected to be paid once the system clears.
 - Other process improvement efforts included:
 - Working through patient refund backlogs caused by Epic credit-hold rules.
 - Continued development of a new data warehouse to integrate ERP, HCM, and EHR data into a single queryable source.
 - Work through the C3 collaborative with the University of Iowa and other Community Connect sites to improve Epic governance, reduce bottlenecks, and increase local autonomy where staff are already certified to perform system work.
- CER
- Inpatient Services
 - Crystal Nicholson, Inpatient Manager, presented a request related to the purchase of new vital sign monitors and related infrastructure upgrades.
 - Discussion included:
 - A prior budget of \$55,000 had been established for replacement monitoring equipment.
 - Updated project scope revealed additional IT infrastructure needs, including gateway and integration upgrades.
 - The upgrade would increase device-to-EHR connectivity from current licensed levels to approximately 200 devices.
 - This would allow vital signs and other clinical information to flow directly into Epic, improving bedside workflow, increasing patient-facing time, and reducing manual entry error.
 - The new monitors also improve patient comfort by measuring blood pressure during inflation rather than requiring higher pressure during deflation.
 - Six monitors were proposed, with four mounted in-patient rooms and two kept mobiles on rolling carts.
 - The final quoted amount was stated as \$97,672.53, lower than an earlier preliminary figure.

Driscoll made a motion to approve the purchase of the vital sign monitors and related upgrades in the amount of \$97,672.53, seconded by Basten. Motion carried.

MEDICAL STAFF REPORT (Schomer)

- Medical Executive Committee met on Monday, February 23, 2026. Reviewed credentialing and privileging.
 - Review of several emergency department events, all characterized as low risk with corrective action taken.
 - Updates to the transfusion policy to align with electronic medical record terminology.
 - Service recovery issues addressed, including MRI rescheduling and a chemistry analyzer outage.
 - Security monitoring of specific risks and incidents.
 - Process improvement opportunities identified in supply communication and monitoring.
 - Updates to the hazard vulnerability analysis, including more detailed risk categorization.
 - No hospital-acquired infections were reported during the period mentioned.
 - Documentation timeliness and denial monitoring remained ongoing quality priorities.
 - Policy, procedure, and credentialing matters were reviewed through committee.

PERSONNEL (Basten)

- Personnel/Credentials Request
 - The Personnel Committee met on Thursday, February 26, 2026 at 3:45pm to review and approve the following credentialing/privileging files:

Provider Last Name	Provider First Name	Credential	EMPLOYER	SERVICE/DEPT OF MEDICINE	PRIVILEGE Effective DATE	SCHEDULED START DATE	NOTES
COMPLETED							
<i>Initial Appointment (Provisional)</i>							
Brian	Lewis	DO	UIHC	Emergency Medicine	03/01/26		Initial period: 03/01/2026-02/28/2028
Willmann	Emily	DO	UIHC	Emergency Medicine	03/01/26		Initial period: 03/01/2026-02/28/2028
<i>Provisional-to-Full Privileges</i>							
McDonald	Conner	MD	UIHC	Emergency Medicine	N/A	N/A	*Provisional to Courtesy
Frier	Curtis	DO	WCHC	Family Medicine	N/A	N/A	*Provisional to Active
<i>Reappointment</i>							
Hopper	Brian	MD	RCI	Radiology	03/01/26	N/A	Reappointment period: 03/01/2026-02/28/2028
Coons	Daniel	PA-C	Steindler	Orthopedic	03/01/26	N/A	Reappointment period: 03/01/2026-02/28/2028
Miller	Michael	MD	UIHC	Emergency Medicine	03/01/26	N/A	Reappointment period: 03/01/2026-02/28/2028
Kurtz	Quinn	PA-C	Steindler	Orthopedic	03/01/26	N/A	Reappointment period: 03/01/2026-02/28/2028
Fulcher	William	MD	RCI	Radiology	03/01/26	N/A	Reappointment period: 03/01/2026-02/28/2028
TERMINING PROVIDERS							
Majd	Naveed	MD	Real Radiology	Radiology	N/A		*No longer with Real Radiology
OTHER							
Murphy	Michael	MD	Real Radiology	Radiology	03/01/26		*Approved by Delegated Credentialing through RCI
Schumberger	Casey	MD	Real Radiology	Radiology	03/01/26		*Approved by Delegated Credentialing through RCI

- Basten reported that the Personnel Committee unanimously approved all credentialing/privileging files.

CEO REPORT (Cleverley)

- Authorization to Proceed with Bidding

Driscoll made a motion to approve the Board of Trustees authorize management to proceed with competitive bidding for the Havel Cancer Center under the Construction Manager at Risk (CMAR) delivery model with DCI serving as CMAR, seconded by Basten. Motion carried.

- Establish GMP (Guaranteed Maximum Price)

Driscoll made a motion to approve the Board of Trustees authorize development of a Guaranteed Maximum Price (GMP) for the Havel Cancer Center, with the understanding that the final GMP will not exceed the previously communicated total project budget of \$3.75M without addition Board approval, seconded by Basten. Motion carried.

- Beans Walk-Through (Anne and Luke Leyden)
 - L. Leyden provided a presentation Walk-Through for the new Beans retail pharmacy location that included:
 - Review of exterior and interior renderings.
 - Improved security through badge-access-only staff areas.
 - Two checkout/reception stations.
 - Over-the-counter retail shelving.
 - Separate vaccine/consultation room for privacy.
 - Public restroom access.
 - Dedicated break room and team meeting/education space.
 - Improved workflow and packaging space.
 - Two drive-through windows to reduce bottlenecks.
 - Security cameras and exterior lighting as part of the final design considerations.
 - The team noted a few design refinements may still be considered following staff review.
- 2025 Specialty Recognition
 - The hospital was recognized as a 2025 top-performing hospital in its category by Press Ganey/PRC/Rate8. Cleverley noted the hospital was the top performer in the applicable hospital category.
- Beans Pharmacy Project Status
 - Planning and zoning approval had been obtained.
 - Site plan approval had been granted on February 17, 2026.
 - Permit approval was pending.

- Groundbreaking was anticipated for mid-March 2026.
- The first project step would be demolition of the existing drive-through structure.
- Hovel Family Cancer Center Fundraising Update
 - Estimated project cost remains \$3.75 million.
 - Approximately \$3.2 million has been raised to date.
 - This total includes a \$500,000 Helmsley Trust grant, which had been received that day.
 - Project completion is now projected for January 2027.
- Dermatology Update
 - The hospital was notified that a dermatology provider had resigned from the Cedar Rapids practice.
 - Leadership confirmed that the dermatology group still intends to maintain a presence locally.
 - There may be some temporary gaps in clinic coverage while an interim and long-term replacement are identified.
- National Media Opportunity
 - The organization was selected to participate in an “All Access with Andy Garcia” feature focused on rural hospitals.
 - Deliverables will include:
 - A national public television feature of approximately five minutes.
 - A corporate identity video for targeted audiences.
 - A 60-second regional educational/marketing segment.
 - Rights to use the produced footage for future organizational marketing and communications.
 - Filming is planned for May 2026.
- Rural Health Transformation Grants
 - The hospital had been awarded a rural workforce recruitment grant; however, after reviewing the detailed requirements, leadership declined the award because it required hiring a new oncology nurse not already employed in a rural area and securing a five-year commitment for a relatively modest incentive amount.
 - Leadership intends to reapply for equipment grant funding for a new CT scanner when the next round opens.
 - The prior CT application sought approximately \$800,000.
 - A future application will better emphasize AI capabilities, reduced radiation dose, and improved image quality.

PLAN NEXT MEETING AGENDA

The next regular Board of Trustees meeting will be held on Thursday, March 26, 2026 at 4:00 p.m.

Provider Discussion

Van Osdol & Weeks

Dr. Ryan Flannery and Amanda Kleese, ARNP
Friday, March 13, 2026 at 12:15pm

Meeting adjourned at 5:13 p.m.

David C. Bruns

[David C. Bruns \(Mar 30, 2026 09:40:42 CDT\)](#)

David Bruns, Chair

Susan M. Basten

[Susan M. Basten \(Mar 30, 2026 15:30:24 MDT\)](#)

Sue Basten, Secretary











02.26.2026 Board of Trustees Minutes

Final Audit Report

2026-03-30

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