

## WASHINGTON COUNTY HOSPITAL AND CLINICS

### Meeting of the Board of Trustees

Thursday, April 30, 2026 – 4:00 p.m.

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The Washington County Hospital and Clinics Board of Trustees met in the Hospital Conference Room to conduct the monthly Board meeting on Thursday, April 30, 2026, at 4:00 p.m. Board Members present were Edward Weeks, David Mitchell, Sue Rich, Sue Basten, Cathy Rich, David Bruns, Mike Van Osdol (zoom). Also present Todd Patterson, Andrea Leyden, Shelli Cleverley, Phil Roudabush

*Recorder:* Rachelle Sobaski, Tara Lord

*Press:* None

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

*Public:* None

*Guest:* Dr. Margaret Ekroth, Dr. Luke Brunkhorst

*WCHC Staff:* Paige Chalupa, Tonya Wageman, Greta Clemmons, Brianna Guyer, Kelsey Bayliss, Makyla Maize, John Woodward, Amanda Kemp, Amanda Van Weldon

Bruns called the meeting to order at 4:02 p.m.

### REVIEW AGENDA

- CER – Camera Server CER was added to the agenda for approval.

### Minutes (Bruns)

*The Thursday, March 26, 2026 Board meeting minutes were reviewed and approved with a motion made by Weeks, seconded by Mitchell. Motion carried.*

### BOARD EDUCATION

#### Building Survey (Bruns & Basten)

- A report was provided regarding facility tours and planned renovations:
  - Expansion of the specialty clinic area, including standardized exam rooms, lab space, and restroom.
  - Potential relocation opportunities for providers.
  - IT and Informatics relocation to the Grace C Mae area.
  - Physical Therapy (PT) relocation planned in coordination with the oncology project (target timeline: June).
  - Environmental updates including painting, maintenance, and exterior appearance improvements.

### FINANCE

#### Financial Report (Cleverley)

- Statistical Summary

<b>Admissions</b>						
	<u>26-Mar</u>	<u>25-Mar</u>	<u>Variance</u>	<u>YTD</u>	<u>Prior YTD</u>	<u>% Change</u>
Acute	42	21	21	301	202	33
Skilled	3	1	2	33	15	55
Observation	50	80	(30)	562	626	(11)
<b>Total Admissions</b>	<b>95</b>	<b>102</b>	<b>(7)</b>	<b>896</b>	<b>843</b>	<b>6</b>

<b>Patient Days</b>						
	<u>26-Mar</u>	<u>25-Mar</u>	<u>Variance</u>	<u>YTD</u>	<u>Prior YTD</u>	<u>% Change</u>
Acute	119	57	62	890	583	34
Skilled	49	3	46	200	96	52
Observation	80	117	(37)	885	914	(3)
<b>Total Patient Days</b>	<b>248</b>	<b>177</b>	<b>71</b>	<b>1,975</b>	<b>1,593</b>	<b>19</b>

<b>Outpatient Volumes</b>						
	<u>26-Mar</u>	<u>25-Mar</u>	<u>Variance</u>	<u>YTD</u>	<u>Prior YTD</u>	<u>% Change</u>
Lab	15,049	12,631	2,418	127,943	105,885	17
Imaging	2,025	2,089	(64)	19,415	18,281	6
Surgeries / Procedures *	131	182	(51)	1,397	1,468	(5)
Rehab Visits **	854	830	24	7,287	6,941	5
Emergency Department	707	731	(24)	6,150	6,458	(5)
OTIC	247	196	51	2,066	1,861	10
Wound	214	65	149	1,506	479	68
Ancillary Visits	5,236	5,074	162	46,551	43,944	6
Primary Care Clinic	5,132	4,624	508	46,986	41,872	11
Specialty Clinic	678	592	86	5,165	5,560	(8)
Outreach Visits	478	497	(19)	5,497	4,959	10

\*endoscopies, ophthalmology, pulmonology

\*\*physical, occupational, speech therapies

- Admissions & Inpatient Activity
    - Admissions increased approximately 6% year-over-year
    - Inpatient days increased approximately 19%
    - Growth driven by inpatient-stay-generating procedures
  - Surgical & Emergency Services
    - Surgeries decreased ~5% year-over-year; analysis underway
    - Emergency Department (ED) visits slightly declined, but patient acuity increased
  - Specialty Clinics
    - Volume decline attributed in part to provider role reclassification (PSA to outreach)
- Key Metrics
- Operating margin: ~2.7%
  - Total margin: ~1.6%
  - EBITDA margin: ~6.4%
  - Days cash on hand decreased slightly
  - Days in AR: 51 (target: 40 days)
- Balance Sheet
- FYTD operating loss: approximately (\$1.4M), offset by non-operating gains
  - Approximately \$2.5 million in stimulus funds will move from restricted to operating next month (auditor confirmed)
  - Delayed Medicaid directed payments (three quarters due; one received) were accrued, reducing contractals and increasing purchased services (assessment dees accrued)
  - March results were skewed by these accruals; FYTD, operating revenue growth

outpaced budget, but expenses exceeded plan.

- Contributions are lower this year (-\$525K) versus last year (-\$1.2M) due to prior foundation/bond- funded entrance payments.

➤ Income Statement

- Patient service revenue: 9–10% above budget (MTD/FYTD)
- High-charge months included October (-\$11.27M) and January (-\$10.4M), reflecting sustained activity.

➤ Investment Policy (Cleverley)

- Current allocation:
  - Cash: ~50%
  - Intermediate-term: ~29%
  - Equities: ~21%
- Target allocation:
  - Cash: 30%
  - Intermediate: 20%
  - Equities: 50%
- Portfolio remains conservative relative to target. No immediate changes recommended.

*Weeks made a motion to approve the investment policy, seconded by Mitchell. Motion carried.*

➤ Revenue Cycle Update (Roudabush)

- Progress in reducing coding and billing backlogs.
- Days in Accounts Receivable (AR) elevated due to delayed Medicare payments.
- Mediapolis clinic billing delays contributed to temporary A/R increase.
- Approval received for Rural Health designation, enabling release of Medicare payments.
- Improved cash collections noted, with strong monthly performance.

➤ IT CER

- A request was presented for a camera server upgrade:
  - Original budget: \$10,000; revised cost increased by \$4,476.40 due to market conditions.
  - Needed to support expanded camera infrastructure.

*Mitchell made a motion to approve the additional capital expenditure for camera server, seconded by Basten. Motion carried.*

## Quality (Leyden)

➤ Patient Satisfaction

- High patient satisfaction scores across departments.
- Clinics exceeded goals; inpatient and outpatient services near targets.
- Improvements in communication, responsiveness, and patient support services.
- Ongoing initiatives include patient follow-up calls and care coordination.
- Ongoing focus:

- Maintaining patient experience during growth during multiple active projects including urology and oncology.

**MEDICAL STAFF REPORT (Schomer)**

- Medical Executive Committee met on Monday, April 27, 2026. Reviewed credentialing and privileging.
  - Focus on medication safety and clinical workflows.
  - Emergency preparedness and fire drill review. This identified door functionality issues currently being addressed.
  - Strong infection prevention compliance.
  - Ongoing improvements in documentation and deficiency tracking.

**PERSONNEL (Basten)**

- Personnel/Credentials Request
  - The Personnel Committee met on Thursday, April 30, 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
<b>COMPLETED</b>							
<i>Initial Appointment (Provisional)</i>							
None					05/01/26	4/20/2026	Initial period: 05/01/2026- 04/30/2028
<i>Provisional-to-Full Privileges</i>							
Burchette	Lauren	ARNP	WCHC	Mental Health	N/A	N/A	*Provisional to Active
Hill	Taylor	DO	UIHC	Emergency Medicine	N/A	N/A	*Provisional to Active
<i>Reappointment</i>							
Fowler	Dana	ARNP	WCHC	Hospitalist	05/01/26	N/A	Reappointment period: 05/01/2026- 04/30/2028
Schildtmann	James	MD	WCHC	Family Med	05/01/26	N/A	Reappointment period: 05/01/2026- 04/30/2028
Demhardt	Joel	MMD	RCI	Radiology	05/01/26	N/A	Reappointment period: 05/01/2026- 04/30/2028
Striegel	Kelsey	ARNP	WCHC	Family Med	05/01/26	N/A	Reappointment period: 05/01/2026- 04/30/2028
Squiers	Meagan	ARNP	WCHC	Family Med	05/01/26	N/A	Reappointment period: 05/01/2026- 04/30/2028
<i>TERMINING PROVIDERS</i>							
Weigman	Benjamin	MD	Real Radiology	Radiology	05/01/26		*Leaving Real Radiology
<i>OTHER</i>							
Lewis	Trevor	MD	Real Radiology	Radiology	05/01/26		*Approved by Delegated Credentialing through RCI
Ill Stemm	Richard	MD	Real Radiology	Radiology	05/01/26		*Approved by Delegated Credentialing through RCI
Yu	Fang	MD	Real Radiology	Radiology	05/01/26		*Approved by Delegated Credentialing through RCI
							*Pending application processing time and MEC/BOT approval

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

**CEO REPORT (Patterson)**

- Recruitment Updates:
  - Podiatry
  - Dermatology (interim coverage arranged)
  - Endocrinology
  - Primary Care (anticipated retirements)
  - Mental Health providers
  - Cardiology APP
- Mediapolis Clinic:
  - One-year anniversary approaching
  - Performance review planned at ~16–18 months
  - Financial and downstream referral analysis to be presented

- Construction Projects:
  - Specialty clinic and cancer center planning underway
  - PT expansion and campus connectivity improvements planned
  - Parking lot project delayed due to weather
  
- Community & Government Relations:
  - Meetings held with state and federal representatives regarding:
    - Rural healthcare funding
    - Medicaid payments
    - Grant opportunities
  
- Grant Application:
  - Submitted ~\$750,000 request for new CT scanner
  - Award decision expected May 22
  
- Future Planning:
  - Potential investment in surgical robotics (\$3–4 million total project)

## PLAN NEXT MEETING AGENDA

The next regular Board of Trustees meeting will be held on Thursday, May 28, 2026 at 4:00 p.m.

Provider Discussion

Mitchell & Rich

May 20, 2026 from 12:15pm – 1:00pm

Dr. Schlichtmann, MD & Meagan Squiers, ARNP

Upcoming Events

Mediapolis 1 year celebration | Thursday, May 7, 2026 | 4:30pm – 6:00pm

KidzFest | Friday, May 15, 2026 | 4:30pm-7:30pm | Downtown Washington

At 4:57 p.m. Weeks moved to go into go into closed session, seconded by Mitchell according to:

Compliance Report – State of Iowa Code Chapter 21.5(1)(a)

*“To review or discuss records which are required or authorized by state or federal law to be kept confidential or to be kept confidential as a condition for that governmental body's possession or continued receipt of federal funds.”*

*State of Iowa Code Chapter 21.5(1)(l) for Strategic Planning/Community Based Care*

*“To discuss patient care quality and process improvement initiatives in a meeting of a public hospital or to discuss marketing and pricing strategies or similar proprietary information in a meeting of a public hospital, where public disclosure of such information would harm such a hospital's competitive position when no public purpose would be served by public disclosure.”*

Present for the closed session were David Bruns, Sue Basten, Ed Weeks, David Mitchell, Mike Van Osdol, and Cathy Rich. Also present were Todd Patterson, Phil Roudabush, Shelli Cleverley, Andrea Leyden, Steve Schomer, MD, and Ryan Flannery, MD, Brianna Guyer, Rachelle Sobaski and Tara Lord. All were present at the time of voting to go into the Closed Session. Motion to move into closed session by Weeks seconded by Mitchell. The motion carried 6-0 with the vote as follows: Bruns-yes, Basten- yes, Weeks-yes, Van Osdol- yes, Mitchell-yes, Rich– yes.

At 6:26 p.m. the Board moved to go into open session. Weeks motion to return to open session, second by Mitchell. The motion carried 6-0 with the vote as follows: Bruns-yes, Basten- yes, Weeks-yes, Van Osdol- yes, Mitchell-yes, Rich– yes.

*Basten made a motion to approve the compliance report presented by Guyer, seconded by Mitchell.  
Motion carried.*

Meeting adjourned at 6:27 p.m.

David C. Bruns

David C. Bruns (May 29, 2026 07:30:14 CDT)

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David Bruns, Chair

Susan M. Basten

Susan M. Basten (May 28, 2026 18:56:58 CDT)

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Sue Basten, Secretary











# 04.30.2026 Board of Trustees Minutes

Final Audit Report

2026-05-29

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