

**Jefferson County Public Hospital District No. 2
Board of Commissioners Special Session Meeting Minutes
Wednesday, December 18, 2024**

Audio Only: dial Phone Conference Line: **(509) 598-2842**
When prompted, enter Conference ID number: **975 178 013#**
Microsoft Teams meeting: Join on your computer or mobile app.
This option will allow you to join the meeting live.
[Click here to join the meeting](#)

Due to the presence of multiple respiratory illness, Jefferson Healthcare is still highly encouraging the practice of infection protocols. You may choose to attend this meeting virtually by accessing the below information or can attend in person in the Sheridan Conference Room at 915 Sheridan Street. Limited seating available.

Time:	WELCOME	Who:
2:00pm	<p>Call to Order The meeting was called to order at 2:00pm by Board Chair Buhler Rienstra. Commissioners in attendance included Commissioners McComas, Koff, Dressler and Ready. Also, in attendance were Mike Glenn, CEO; Tyler Freeman, CFO; Jake Davidson, COO; Dunia Faulx, CTGAO; and Shannon Groff, Executive Assistant.</p> <p>This meeting was officially audio-recorded by Jefferson Healthcare. Please note that this is a Special Session due to moving the meeting up a week to accommodate the end of year Holiday.</p>	Commissioner Buhler Rienstra
PUBLIC COMMENT		
2:00pm	<p>Public comments are welcome orally, with a 3-minute limit, or may be submitted via email at commissioners@jeffersonhealthcare.org, or written and addressed to Commissioners at 834 Sheridan Street, Port Townsend, WA 98368. Written submissions must be received by 5:00pm the day prior to the meeting.</p> <p>There was no public comment at this month's meeting.</p>	
CONSENT AGENDA		
2:10pm	<p>Minutes: Action Requested</p> <ul style="list-style-type: none"> • November 20, 2024 Special Session Minutes <p>Commissioner Kolff made a motion to amend the minutes to include an L in his last name. Commissioner McComas seconded. Action: Motion passed unanimously.</p>	Board of Commissioners
2:15pm	<p>Required Approvals: Action Requested</p> <ul style="list-style-type: none"> • Resolution 2024-28 Surplus Equipment • Resolution 2024-29 Canceled Warrants • October Warrants and Adjustments • Medical Staff Credentials / Appointments / Reappointments <p>Commissioner Dressler made a motion to approve the Required Approvals. Commissioner Kolff seconded. Action: Motion passed unanimously.</p>	Board of Commissioners

STANDING REPORTS		
2:20pm	<ul style="list-style-type: none"> • Quality Report <p>Brandie Manuel, Chief Patient Safety & Quality Officer gave her December quality report, which included an overview of what we do to cultivate our culture of safety and how we are doing that. We also talked through how we deliver care guided by the evidence including our accreditation, excellent outcomes and medical staff engagement. Brandie also talked through best practices for our core measure performance, specifically from perinatal care from November 2023-October 31, 2024. We got a preview of the core measure performance for the ambulatory side of the hospital and it's still in progress, in addition to the inpatient stroke measures. Brandie reviewed the 2025 quality management system opportunities and recommendations. Discussion ensued.</p>	Brandie Manuel, CPSQO
2:35pm	<ul style="list-style-type: none"> • Financial Report <p>Tyler Freeman, Chief Financial Officer, presented the November Financial Report which detailed our October statistics, income statement and our cash and accounts receivable. We also got a preview of December 2024. Discussion ensued.</p>	Tyler Freeman, CFO
STANDING REPORTS		
2:50pm	<ul style="list-style-type: none"> • Construction Report <p>Jake Davidson, Chief Operating Officer provided a project update, which included some current photos of the project as well as an on time/on budget overview and a visual map of upcoming road disruptions. Jake also shared a provider recruitment/new service lines update. Discussion ensued.</p>	Jake Davidson, COO
3:05pm	<p>Break</p> <p>Commissioners recessed for break at 3:00pm Commissioners reconvened from break at 3:15pm</p>	
3:20pm	<ul style="list-style-type: none"> • CMO Update <p>Dr. Steve Butterfield gave his first report as CMO of Jefferson Healthcare. Dr. Mattern will be acting as an associate Chief Medical Officer for Transitional and Palliative Care. Dr. Shayna Lemke will be the associate Chief Medical Officer for Acute Care Services in addition to Dr. Molly Parker who will continue her work with Population Health and our SANE program. She will also be an associate Chief Medical Officer.</p>	Dr. Steve Butterfield, CMO
3:30pm	<ul style="list-style-type: none"> • Administrative Report <p>Mike Glenn, Chief Executive Officer, offered Dunia Faulx, Chief Transformation & Government Affairs Officer to give her report, which included a report on the JAC administrative update and the focus for 2025, an advocacy report for the state, the current topics</p>	Mike Glenn, CEO

	<p>for the 2025 State Legislative agenda and a federal update on advocacy.</p> <p>Commissioner Kolff made a motion to approve the proposed agenda for the 2025 state legislative. Commissioner Dressler seconded. Action: Motion passed unanimously.</p> <p>Mike Glenn, CEO introduced Pranav Sharma, our Director of Marketing, Communication and Strategic Planning. He talked through the process for our upcoming Strategic Plan and the plan for our upcoming “roadshows” which will span over Port Townsend, Port Hadlock, Port Ludlow and Quilcene/Brinnon over the next few months.</p> <p>Mike Glenn, CEO gave his portion of the administrative report which included an update on our IV fluid shortage situation, an update on the giving campaign, upcoming events and some news that is happening around Port Angeles, WA. Discussion ensued.</p>	
BOARD BUSINESS		
3:45pm	<p>Board Report</p> <p>Commissioner McComas talked about the Foundation and their continual meetings and fundraising opportunities. They sit at 95% complete to meet their goal with the linear accelerator. They plan to host a fundraising event in March in addition to onboarding two new board members.</p> <p>Commissioner Kolff gave an update on the retirement of a city employee who shepherded the climate committee for more than 20 years. He also gave an update on the board of health. He also mentioned that there are two roles vacant on the board and there is some interest and they hope to fill those positions soon.</p>	Board of Commissioners
EXECUTIVE SESSION		
4:00pm	<p>Board Chair Buhler-Rienstra announced that they will go into Executive Session for thirty (30) minutes to discuss a sale or lease of real estate as allowed by RCW 42.30.110b. Action may be taken.</p> <p>Commissioners went into Executive Session at 4:00pm.</p> <p>Commissioners returned to Special Session at 4:30pm.</p> <p>Commissioner Kolff made a Motion to authorize administration to purchase all property and buildings located on parcels 989800049 / 989800051 at 751 Commerce Loop, Port Townsend, WA 98368 in the amount of \$750,000.00 and to execute all appropriate documents necessary and required in the purchase of the parcels.</p>	Board of Commissioners

	<p>Commissioner Ready seconded. Action: Motion passed unanimously</p> <p>Commissioner McComas made a Motion to authorize administration to purchase all property and buildings located on parcel 821172006 at 74 Breaker Lane, Port Ludlow, WA 98365 in the amount of \$825,000 and to execute all appropriate documents necessary and required in the purchase of the parcels. Commissioner Dressler seconded. Action: Motion passed unanimously</p>	
CONCLUDE		
<p>4:30pm</p> <p>4:45pm</p>	<ul style="list-style-type: none"> • Meeting Evaluation <p>Commissioners evaluated the meeting. Discussion ensued.</p> <ul style="list-style-type: none"> • Conclude <p>Commissioner Dressler made a motion to conclude the meeting. Commissioner McComas seconded. Action: Motion passed unanimously.</p> <p>Meeting concluded at 4:42pm.</p> <p>Approved by the Commission: Chair of Commission: Jill Buhler Rienstra <u><i>Approved via Microsoft Teams</i></u></p> <p>Secretary of Commission: Marie Dressler <u><i>Approved via Microsoft Teams</i></u></p>	

PATIENT SAFETY AND QUALITY REPORT



Brandie Manuel
Presented to the Board of Commissioners
December 18, 2024

2024...a year in review



2024 Goals.
Quality Pillar Strategic Goals



Structural Measures.
Culture of Safety
Medical Staff Engagement in
Quality



Current State.
Core Measure Performance
Patient Safety Performance
2024 Projects Completed



2025 Focus Areas.
Culture of Safety
Quality & Accreditation

Our Quality Goals.

1. Cultivate a deep-rooted culture of safety.
2. Deliver care guided by the best evidence.
3. Eliminate Health Disparities.



Our community trusts us to care for them. Delivering excellent, personalized care right here at home drives everything we do.

1. Cultivate a deep-rooted culture of safety.

Ensure every employee is connected to safety and quality.

- Leader rounding
- Daily briefings with safety updates
- Monthly 1:1 leader meetings to review safety events
- Culture of Safety Survey follow up and action plans
- TeamSTEPPS classes

Develop a system of shared accountability.

- Use of Monthly Meetings and stoplight reports
- Just Culture in Peer Review
- Strategic plan dashboard published
- Crucial Conversations training for medical staff leaders
- Just Culture course planning

Identify and mitigate the root causes for safety events.

- Increased near miss reporting
- Standardized SEM response algorithm
- Decreased the time to event closure
- Decreased 'anonymous reporting' by 17%
- RCA closed within 43 days with staff feedback provided.

Culture of Safety – How are we doing?

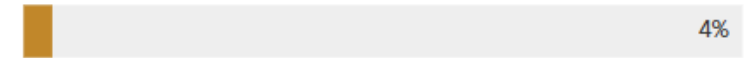
Events with Follow-ups by Follow-up Status

Click bars for additional data

At Least 1 Follow-up Overdue



At Least 1 Follow-up Not-Yet-Due



All Follow-ups Complete



Decreased (ytd) Days to closure by 7 days from last year



Completed first Pulse Survey



Monthly 1:1 meetings with leaders



95% Events (895) with completed follow up
Overdue reports 1%



Maintained lower anonymous reporting



895 Closed safety events.
944 events reported (730 last year).



2. Deliver Care Guided by the Best Evidence.

Accreditation

Ambulatory

- Lab - CAP Accreditation
- CoC – 2024 re-accreditation survey
- Radiology – ACR Accreditation
- Sleep - AASM
- Home Health & Hospice Accreditation

DNV

- NIAHO Recertification
- ISO Recertification
- CIP Recertification
- HKRC Recertification

Planned

ACEP

- Emergency Department Geriatric Accreditation – Initial assessment complete with application in progress
- Age Friendly Designation – IHI

Excellent Outcomes

Outcomes

- Readmissions
- Mortality
- GWTG: Stroke, HF, A. Fib
- Core Measures (OB, Stroke, ED Throughput, Colonoscopy)

Patient Safety

- Patient falls
- Pressure ulcers
- Antimicrobial Stewardship
- Healthcare Acquired Conditions

Promote Wellness and Manage Chronic Disease

- ACO Quality Committee
- PCEC Quality Goals
- Health Equity: Breast Cancer Screening

Medical Staff Engagement

Quality Committees

- Executive Quality Council
- Primary Care Executive Committee
- ER and Trauma Quality
- Cancer Committee
- OB Quality Committee
- Oncology and Infusion Safety Committee

Medical Staff

- PPCEC/Credentials Chair Transition
- Expansion of Credentials
- FPPE/OPPE Maturity
- Enhancement of Peer Review Database
- Point of Care Ultrasound
- Pharmacy and Therapeutics

Professional Development

- April Leadership Summit
- November Leadership Summit
- November Symposium



Best practices: Core Measure Performance Perinatal Care

November 2023 to October 31, 2024

Measure Number	Measure	Performance	Benchmark (WSHA)
PC-01	Elective Delivery – lower is better	20.0%	3.6%
PC-02	Cesarean Birth (Nulliparous, Term, Singleton, Vertex (NTSV) deliveries) – lower is better	28.3% (down from 36.4%)	26.6%
PC-05	Exclusive Breast Milk Feeding (higher is better)	94.4%	63.2%
PC-06.0	Unexpected Newborn Complications (Overall Rate) – lower is better	12.8 (per 1,000 live births)	10.1



Best practices: Core Measure Performance Ambulatory YTD 2024

Measure Number	Measure	Performance	National CAH Benchmark
OP-2	Acute Myocardial Infarction (AMI): Fibrinolytic within 30 minutes of arrival	0% (n = 1)	100%
OP-3	AMI - Median time to transfer	27 min	52 minutes
OP-18	ED throughput: Arrival to Departure time	179 minutes	147.5 minutes
OP-18b	ED throughput: Arrival to Departure for discharged patients	143.13 minutes	99 minutes
OP-18c	ED throughput: Arrival to departure for psychiatric patients	241 minutes	38.83 minutes
OP-29	Appropriate follow up interval for normal colonoscopy	100%	95%

*In Progress



Best practices: Core Measure Performance Inpatient Stroke Measures YTD 2024

Measure Number	Measure	Performance	Benchmark
STK-1	VTE Prophylaxis	100%	93.7%
STK-2	Discharged on Antithrombotic	100%	98.6%
STK-3	Anticoagulation for A.Fib/A.Flutter	83.3%	96.8%
STK-5	Antithrombotic by end of Day 2	100%	96.4%
STK-6	Discharged on Statin	100%	97.6%
STK-8	Stroke Education	71.4%	95.5%
STK-10	Assessed for Rehab	100%	98.9%
SDOH-1	Assessed Social Drivers of Health	92.8%	66.4%

2025 Quality Management System Opportunities and Recommendations



Culture of Safety: Just Culture implementation and TeamSTEPPS expansion

Excellent outcomes – Acute Care: Patient Flow and Throughput

Excellent Outcomes - Ambulatory: breast cancer screening, blood pressure control, annual wellness exams; establishing clinical quality committees

Geriatric Emergency Department Accreditation

What questions do you have?

“The excellent healthcare and service I received is clearly the product of an organization that carries a consistent culture of excellent in everything they do. I was there for 13 days and 12 nights and saw a level of care that was so consistent it was clearly a team effort!” (In the words of our patients...)

Thank you.

Jefferson Healthcare

November 2024 Finance Report (October 2024 Financials)

December 18, 2024

Tyler Freeman, CFO

October 2024

Operating Statistics

STATISTIC DESCRIPTION

STATISTIC DESCRIPTION	OCTOBER 2024						OCTOBER 2023			
	<u>MO</u>	<u>MO</u>	<u>%</u>	<u>YTD</u>	<u>YTD</u>	<u>%</u>	<u>MO</u>	<u>%</u>	<u>YTD</u>	<u>%</u>
	ACTUAL	BUDGET	VARIANCE	ACTUAL	BUDGET	VARIANCE	ACTUAL	VARIANCE	ACTUAL	VARIANCE
FTEs - TOTAL (AVG)	692	696	1%	681	696	2%	648	-7%	616	-11%
ADJUSTED PATIENT DAYS	4,854	3,415	42%	42,898	33,602	28%	3,548	37%	32,440	32%
ICU PATIENT DAYS (IP + OBSERVATION, MIDNIGHT CENSUS)	42	88	-52%	530	865	-39%	61	-31%	813	-35%
ACU PATIENT DAYS (IP + OBSERVATION, MIDNIGHT CENSUS)	307	295	4%	3,495	2,902	20%	330	-7%	3,026	13%
PATIENT DAYS (ACU, ICU, SWING), INCLUDES OBSERVATION	357	408	-13%	4,165	4,017	4%	391	-9%	3,906	6%
SURGERY CASES (IN OR)	131	134	-2%	1,332	1,319	1%	138	-5%	1,289	3%
SPECIAL PROCEDURE CASES	112	88	27%	1,066	862	24%	82	37%	846	21%
LAB BILLABLE TESTS	24,604	21,873	12%	232,373	215,203	8%	23,298	6%	214,186	8%
TOTAL DIAGNOSTIC IMAGING TESTS	4,342	3,519	23%	38,239	34,630	10%	3,596	21%	37,029	3%
PHARMACY MEDS DISPENSED	22,078	23,412	-6%	219,744	230,342	-5%	21,977	0%	214,747	2%
RESPIRATORY THERAPY PROCEDURES	2,340	2,926	-20%	25,199	28,788	-12%	3,164	-26%	28,569	-13%
REHAB/PT/OT/ST	8,997	8,796	2%	86,030	86,540	-1%	8,727	3%	82,935	4%
ER CENSUS	1,353	1,240	9%	12,854	12,203	5%	1,204	12%	11,873	8%
DENTAL CLINIC	539	491	10%	4,594	4,835	-5%	522	3%	4,798	-4%
TOTAL RURAL HEALTH CLINIC VISITS	7,920	7,284	9%	71,420	71,666	0%	8,115	-2%	69,983	2%
TOTAL SPECIALTY CLINIC VISITS	4,158	4,202	-1%	36,955	41,362	-11%	3,831	9%	37,799	-2%

October 2024

Income Statement Summary

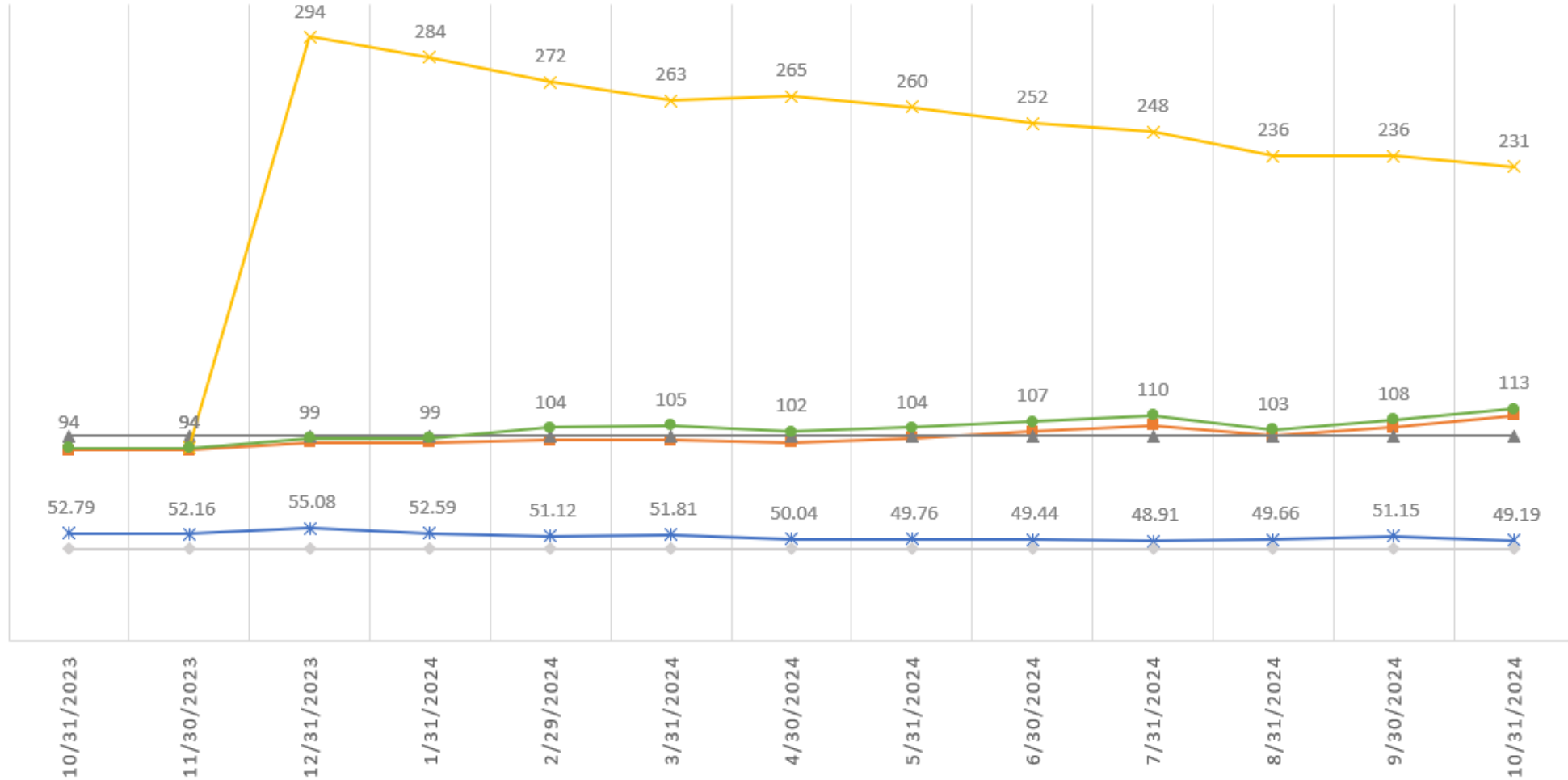


	October 2024 Actual	October 2024 Budget	Variance Favorable/ (Unfavorable)	%	October 2024 YTD	October 2024 Budget YTD	Variance Favorable/ (Unfavorable)	%	October 2023 YTD
Operating Revenue									
Gross Patient Service Revenue	37,123,160	32,975,030	4,148,130	13%	344,077,428	324,431,742	19,645,686	6%	301,093,710
Revenue Adjustments	20,312,431	17,786,139	(2,526,293)	-14%	190,180,401	174,992,653	(15,187,748)	-9%	163,510,824
Charity Care Adjustments	420,071	290,602	(129,469)	-45%	4,033,220	2,859,150	(1,174,070)	-41%	2,887,976
Net Patient Service Revenue	16,390,658	14,898,289	1,492,369	10%	149,863,806	146,579,938	3,283,868	2%	134,694,910
Other Revenue	785,150	822,294	(37,144)	-5%	6,476,743	8,090,313	(1,613,571)	-20%	6,377,782
Total Operating Revenue	17,175,808	15,720,583	1,455,225	9%	156,340,549	154,670,252	1,670,297	1%	141,072,691
Operating Expenses									
Salaries And Wages	7,546,066	7,585,544	39,479	1%	73,275,378	74,631,969	1,356,592	2%	64,015,512
Employee Benefits	1,592,288	1,747,688	155,400	9%	15,966,813	17,194,990	1,228,177	7%	14,752,934
Other Expenses	7,606,637	5,933,772	(1,672,865)	-28%	63,112,171	58,380,279	(4,731,892)	-8%	59,307,337
Total Operating Expenses	16,744,991	15,267,004	(1,477,986)	-10%	152,354,361	150,207,239	(2,147,123)	-1%	138,075,784
Operating Income (Loss)	430,817	453,579	(22,762)	-5%	3,986,188	4,463,013	(476,825)	-11%	2,996,908
Total Non Operating Revenues (Expenses)	246,193	556,360	(310,167)	-56%	3,390,987	5,473,863	(2,082,876)	-38%	1,218,402
Change in Net Position (Loss)	677,010	1,009,939	(332,929)	-33%	7,377,175	9,936,876	(2,559,701)	-26%	4,215,310
Operating Margin	2.5%	2.9%	-0.4%	-13.1%	2.5%	2.9%	-0.34%	-11.6%	2.1%
Total margin	3.9%	6.4%	-2.5%	-38.6%	4.7%	6.4%	-1.71%	-26.6%	3.0%
Salaries & Benefits as a % of net pt svc rev	-55.8%	-62.6%	6.9%	11.0%	-59.5%	-62.6%	3.10%	4.9%	-58.5%

October 2024

Cash and Accounts Receivable

* DAYS OUTSTANDING IN A/R ◊ DAYS AR GOAL - 45 ■ DAYS OF CASH ▲ DAYS CASH GOAL - 90 ✕ DAYS CASH W/ PROJECT FUNDS ● DAYS CASH W/ 3RD PARTY



December 2024

Preview – (*as of 0:00 12/17/24)

- **\$ 36,681,555 in Projected HB charges**
 - Average: \$1,155,241/day (HB only)
 - Budget: \$1,059,286/day
 - 113.9% of Budget
- **\$15,931,325 in HB cash collections**
 - Average: \$501,565/day (HB only)
 - Goal: \$478,596/day
- **47.7 Days in A/R**
- **Questions**

Building Update

December 2024



View from Sheridan Ave + 7th St

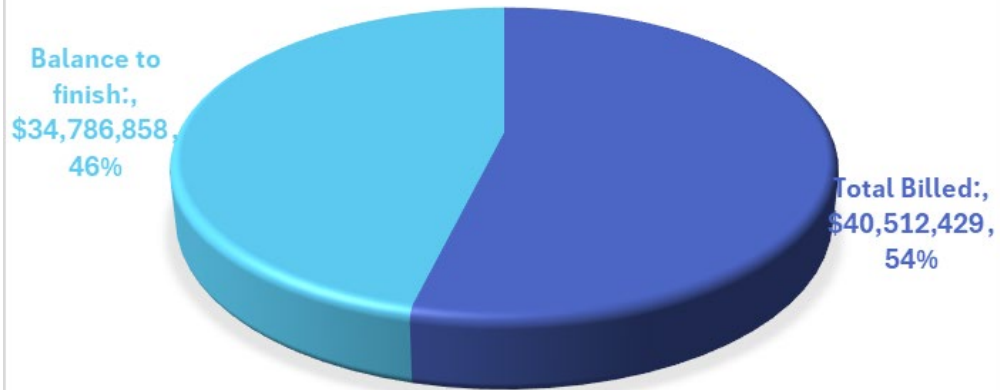
Construction Update:



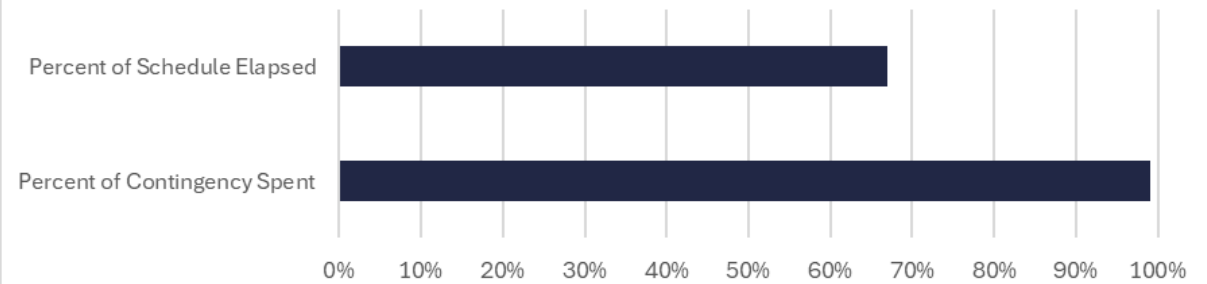
Construction On Time / On Budget

		2023			2024												2025							
	Duration	10	11	12	1	2	3	4	5	6	7	8	9	10	11	12	1	2	3	4	5	6	7	
Hospital Expansion	10/23-7/25															X								67%

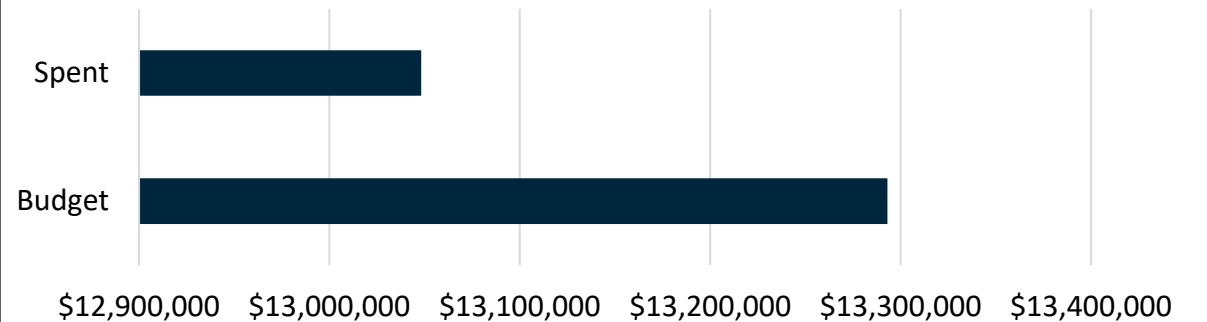
D/B PAY-APP SUMMARY



Owner Contingency Tracker



Soft Costs



Milestone Timeline

- East Parking Lot/Asphalt Paving, Curbs- Complete!
- In Progress- Roofing, Stud Framing, Windows, Fencing around Parking, Temp Heating, Brick Cladding
- MRI/LINAC Installed - April 2nd, 2025
- Substantial Completion - July 18th, 2025
- CT Substantial Completion- August 20th, 2025

Road Disruptions

- More Parking! Opening up this week- Fully East Parking Lot
- Hospital Road Shut Down- January 14th - March 12th, 2025



New Service Line Recruitment Update

Signed Providers:



Neurology: Dr. Kelly Ramirez



Pulmonology: Dr. Kevin Chong

- Start August 2025



Otolaryngologist : Dr. Angie Song

- Start August 2025



Radiation Oncology: Dr. Sabrina Prime

- Radiation Oncologist- Partnering with Tumor Institute Radiation Oncology Group (TIROG)
- Start August 2025

In Progress Recruitment:

- Urologist
 - On Site Interviews (2)
- Dermatologist/APP
- Audiologist- starting recruitment



Aerial Looking NE

Strategic Plan: Phase 1 Update





Agenda



Overview: Strategic Planning Process



Phase 1: Milestones & Objectives



Current State & Next Steps

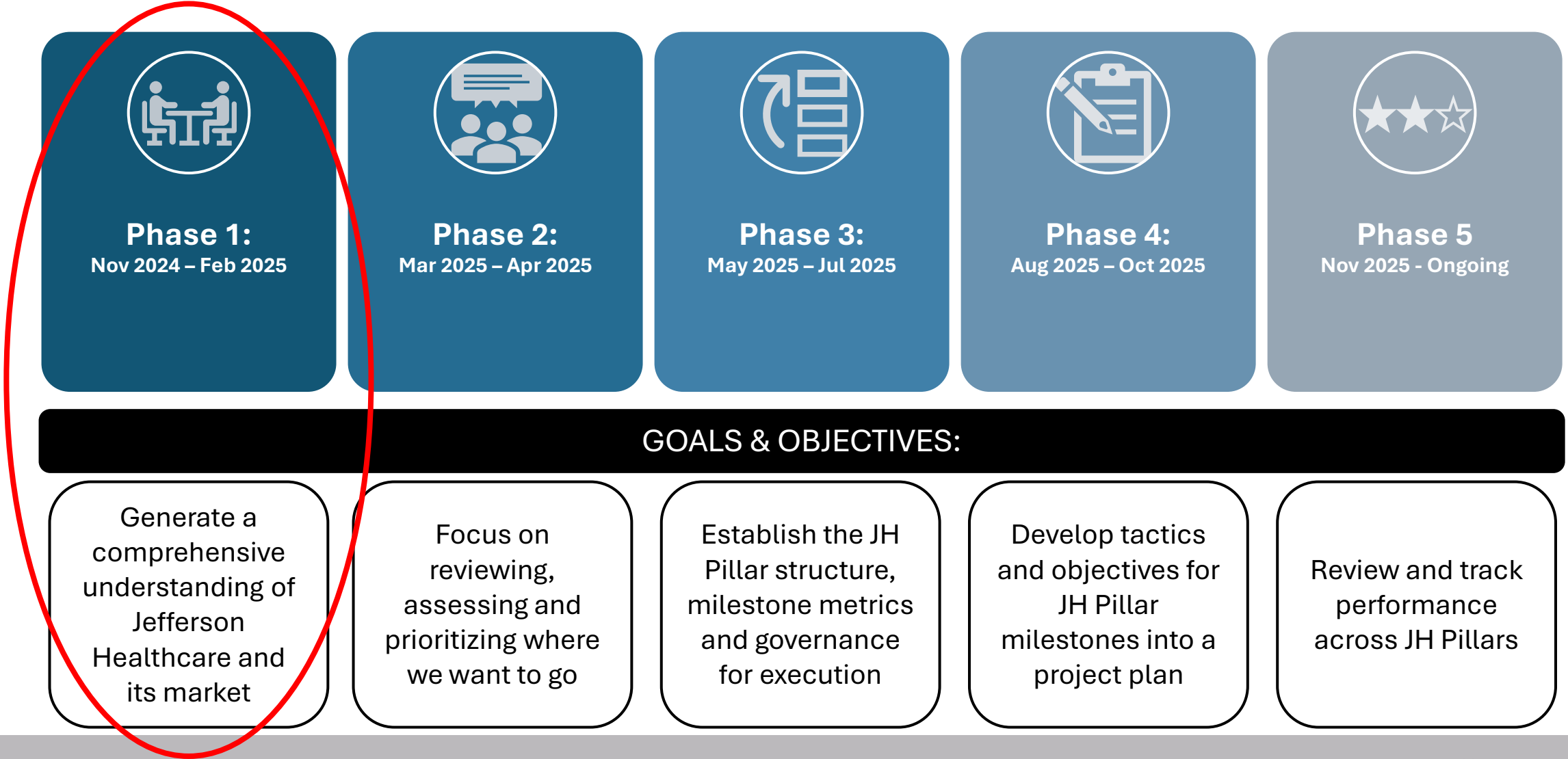


Closing Remarks

Overview: Strategic Planning Process



Jefferson Healthcare: Strategic Planning Lifecycle



Jefferson Healthcare: Strategic Planning Lifecycle



GOALS & OBJECTIVES:

- Generate a comprehensive understanding of Jefferson Healthcare and its market
- Focus on reviewing, assessing and prioritizing where we want to go
- Establish the JH Pillar structure, milestone metrics and governance for execution
- Develop tactics and objectives for JH Pillar milestones into a project plan
- Review and track performance across JH Pillars

Phase 1: Internal & External Landscape



Phase 1:

Internal/External Landscape

Market Overview & Landscape (Data Specific)

Organizational Assessment & Review

Current State & Next Steps

Current State:

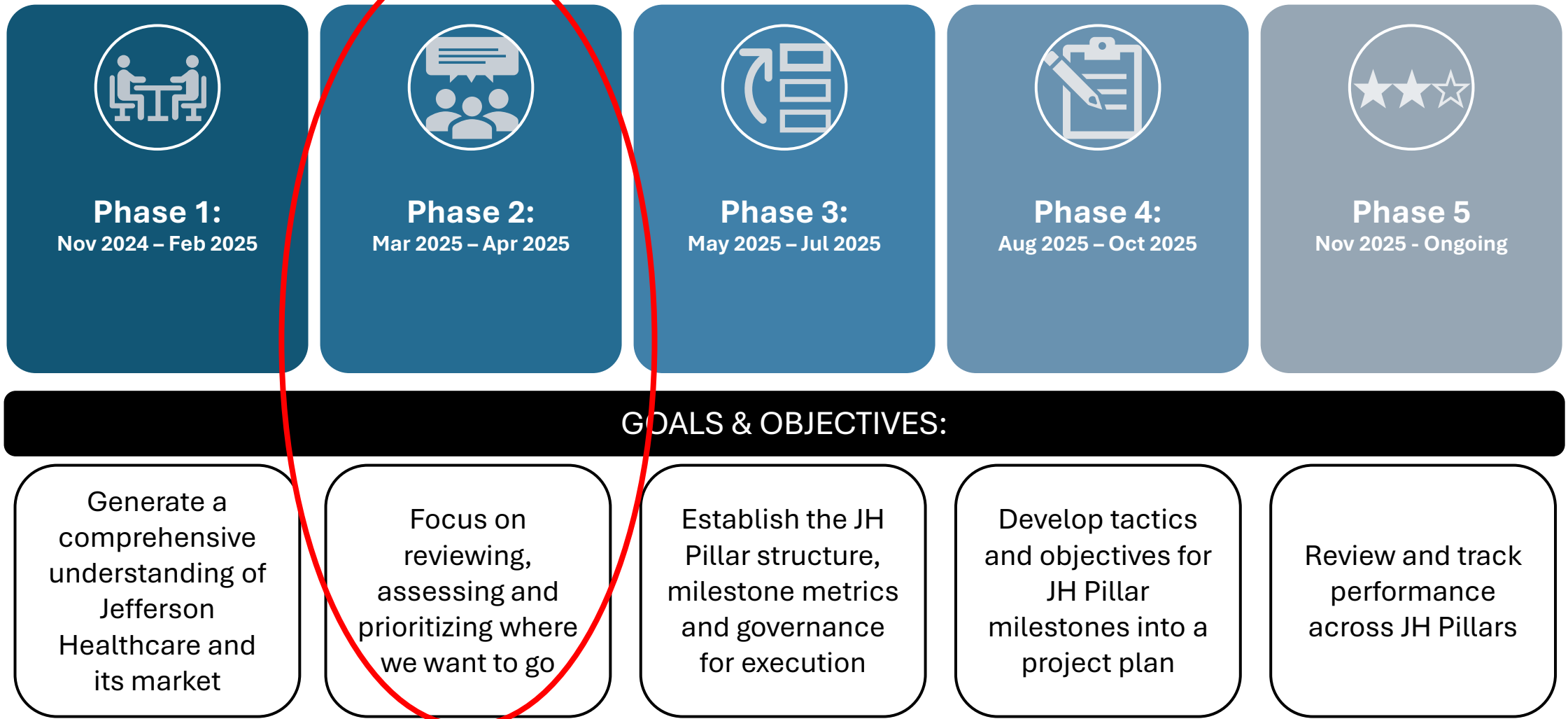
- Stakeholder Interviews – Ongoing
- Data Request – Service Lines
- SWOT Analysis: Specialties & Departments
- Service Line Scorecards
- Survey Development
- Roadshow Development

Key Next Steps:

Updated Roadshows:

- 1. Port Townsend**
 - February 6, 2025 – Time
 - Fort Worden
- 2. Port Ludlow**
 - March 10, 2025 – Time
 - Beach or Bay Club
- 3. Port Hadlock**
 - March 13, 2025
 - Jefferson County Public Library
- 4. Quilcene & Brinnon**
 - March 24, 2025
 - Quilcene Community Center
- 5. Virtual Sessions**

Jefferson Healthcare: Strategic Planning Lifecycle



Thank You Questions?



Administrative Report

December 18, 2024

Mike Glenn

Value Based Purchasing

A Monthly Review

December 2024

JAC Administrative Updates

- 2025 focus:
 - Quality metrics
 - Partnership development with The Rural Collaborative and NAACOS
 - 4 committees:
 - Quality Committee
 - Finance Committee
 - HCC Project Committee
 - Annual Wellness Project Committee

Advocacy

December 2024

Advocacy | State

- Ongoing engagement regarding Payer Business Practices (pre-authorization and denials, specifically).
- Committee Days was last week (week of 12/9).
 - Focus is the budget shortfall and how to protect as many current programs as possible.
 - Local presenter, Dr. Mike Maxwell (NOHN), presented to the Joint Select Committee on Health Care and Behavioral Health Oversight on “partnering with providers to advance value-based primary care”
- Committee Assignments
 - Senator Chapman: Health and Long-Term Care, Agriculture and Natural Resources (Vice Chair), Transportation
 - Representative Tharinger: Appropriations, Capital Budget (Chair), Health Care and Wellness
 - Representative Bernbaum: Agriculture and Natural Resources, Early Learning and Human Services, Transportation (Vice Chair)

Topics for 2025 State Legislative Agenda

- Support access to post-acute care for complex discharge patients
 - Extending the Governor's Complex Discharge Task Force (***Budget implications***)
 - Review and revise Medicaid network adequacy thresholds for complex discharge patients' access to post-acute care
- Preserve hospital services by reducing administrative burden.
- Oppose facility fee prohibitions or 'site neutral' policies.
- Ensure that health care systems are able to negotiate in good faith with health insurers.
 - Oppose requirements to contract with any specific payer.
 - Eliminate the contracting bill or lookalikes
 - Enact prior authorization transparency and modifications and address inappropriate denials.
- Support low volume rural labor and delivery. (***Budget Implication \$3.2m over biennium***)
- Ensure that hospitals are paid adequately to provide critical care offered to patients and the communities that they serve. (***Possible budget implication***)

Advocacy | Federal

- Expanding Senior Specialty Care (HRSA \$2m) was approved for spend down – months ahead of schedule!!
- Strategic planning around a FY 2026 appropriation request.
- Ongoing DC transitions for the foreseeable future.

Updates, Events, and Symposium

Updates and Events

- Strategic Plan Update with Pranav Sharma
- IV Fluid Shortage Update
- Giving Campaign Update
- Events:
 - Leadership Development Institute
 - Employee Service Award Banquet
- News from Port Angeles

Questions