CALL TO ORDER	Northern Inyo Healthcare District (NIHD) Board Chair Best-Baker called the meeting to order at 3:30 pm.
PRESENT	Melissa Best-Baker, Chair David Lent, Vice-Chair Maggie Egan, Secretary Laura Smith, Treasurer Jean Turner, Member at Large Christian Wallis, Chief Executive Officer Allison Partridge, Chief Operations Officer / Chief Nursing Officer Alison Murray, Chief Human Resources Officer, Chief Business Development Officer Andrea Mossman, Chief Financial Officer
ABSENT	Adam Hawkins, Chief Medical Officer
TELECONFERENCING	Notice has been posted, and a quorum participated from locations within the jurisdiction.
PUBLIC COMMENT ON CLOSED SESSION ITEMS	Chair Best-Baker reported that at this time, audience members may speak only on closed session agenda items. **Public Comment:** None
ADJOURN TO CLOSED SESSION	Adjourn to closed session at 3:31 pm.
RETURN TO OPEN SESSION	Return to open session at 5:38 pm.
REPORT OUT FROM CLOSED SESSION	Report out: The Board of Directors voted to reject the request to file a late claim.
PUBLIC COMMENT	Chair Best-Baker reported that at this time, audience members may speak on any items not on the agenda that are within the jurisdiction of the Board. **Public Comment:** Lopez and Morgan of HealthTrust Workforce Solutions introduced themselves to the Board and shared that they were in Bishop conducting a benchmarking assessment for the District at the request of the Board and administration. They stated they had been gathering information during their visit and anticipated providing a report to the Board and administration within approximately 45 days. A speaker commented that holding lengthy closed session discussions immediately before the regular meeting created long wait times for members of the public and suggested considering separate timing for certain closed session

items. A request was also made for the District to help the community understand how upcoming county, state, and federal elections could affect District funding and to discuss the topic publicly at a future meeting. Board leadership explained that the topic could be discussed publicly only if brought forward as a future agenda item.

Public comment included concerns regarding the community perception of Northern Inyo Healthcare District and reports that local residents frequently seek healthcare services outside the area, including in Carson City. A speaker encouraged the District to examine factors affecting public trust and utilization of local healthcare services.

A community member also discussed reviving a former local health-focused television program to help improve public understanding of hospital services, staff, and healthcare processes. The speaker suggested featuring physicians, nurses, administrators, and departments through recorded interview sessions distributed through television, YouTube, and social media platforms to strengthen community engagement and address misinformation regarding healthcare and insurance processes.

CONSENT AGENDA

Public Comment: None

Board Discussion: None

Motion by Smith to approve the consent agenda.
2nd: Lent
Pass: 5-0

CONSIDERATION OF CREDENTIALING ACTIONS RECOMMENDED BY THE MEDICAL EXECUTIVE COMMITTEE

Public Comment: None

Board Discussion: None

Motion by Egan to approve the credentialing actions recommended by the Medical Executive Committee
2nd: Turner
Pass: 5-0

CEO REPORT

AB 2561 (McKinnor): Local public employees: vacant positions
Human Resources Manager Routt presented the annual AB 2561 Local Public Employee Vacant Positions Report, which provides a high-level review of District vacancies, recruitment trends, and retention efforts. She reported that Northern Inyo Healthcare District currently had 18 active vacancies, including 14 represented positions consisting primarily of registered nurses and technicians, along with four non-represented positions. She also stated that an additional 18 vacancies were on hold due to candidates currently being selected or completing pre-employment onboarding processes.

She explained that the District had successfully closed 95 requisitions during the fiscal year through a combination of internal promotions, external

recruitment, rehires, and conversion of contracted staff into permanent employees. She noted significant internal movement within the organization, including employees entering through entry-level positions and later advancing into other roles through career growth opportunities.

She identified several difficult-to-fill positions, including physical therapy, speech-language pathology, clinical laboratory scientist, radiology technician, perinatal RN, and surgery RN positions. Routt stated that the District continues to utilize multiple staffing agencies for both temporary and permanent recruitment efforts and has expanded employee engagement and retention initiatives through recognition programs, Hospital Week activities, career ladder programs, and planned negotiations with union partners regarding the development of an LVN career ladder program.

Public Comment: None

Board Discussion: None

Motion by Smith to accept the AB 2561 report
2nd: Turner
Pass: 5-0

Bishop Commons
CEO Wallis introduced representatives from Foothill Partners, including Wiele and Oliverio, to present a proposed workforce housing redevelopment project for the former Kmart property in Bishop. The presenters explained that the project would demolish the long-vacant Kmart building and replace it with approximately 100 modular studio and one-bedroom workforce housing units intended primarily for single workers and couples. The presenters described the project as an effort to address regional workforce housing shortages affecting healthcare, retail, government, and tourism employers. They stated that investment groups are interested in financing the project but have requested evidence of local demand through preliminary leasing commitments from major employers and agencies. The presentation also included discussion regarding modular construction methods, projected rental rates around $1,800 per month, potential future restaurant and retail uses on the property frontage, and a proposed timeline of approximately 18 months to two years before occupancy.

Public Comment:
A community member expressed support for additional housing opportunities but emphasized the importance of holding public meetings to gather input regarding affordability and whether the proposed rental rates would realistically meet local workforce needs. The speaker stated that public participation would be important to ensure the project serves the intended population and reflects the realities of the Bishop housing market.

Board Discussion:
Board members discussed ongoing challenges associated with recruiting and retaining employees due to limited housing availability in the Bishop area.

Board members asked questions regarding the proposed memorandum of understanding and potential future leasing commitments associated with the project. Discussion also focused on current rental market conditions, the need for one-bedroom units for temporary and traveling healthcare workers, the broader regional housing shortage, and how freeing up larger homes from temporary workforce occupancy could improve housing availability for families. The presenters also described plans to retain and renovate portions of the existing adjacent retail building for food and beverage uses and discussed the potential economic benefit of reducing workforce occupancy in local motels. The Board generally expressed interest in the concept and acknowledged the significant workforce housing needs facing the District and the region.

Strategic Growth, Wipfli/WOLD Update
CEO Wallis introduced representatives from Wipfli and WOLD to provide an update regarding the District's Strategic Growth and Facility Master Plan process. Representatives from Wipfli reviewed findings from the initial phases of the assessment process, including evaluation of regional population trends, healthcare utilization, provider access, market share, service demand, and facility conditions. The presenters stated that Northern Inyo Healthcare District serves a broad regional population extending beyond Bishop and noted strong utilization of District services, particularly in primary care. The presentation identified opportunities to expand specialty care services, improve provider recruitment, and address space limitations within existing clinic facilities. WOLD representatives summarized the April strategic planning and Lean planning sessions involving leadership, staff, and consultants. The planning exercises focused on long-term campus sustainability, future facility needs, workflow improvements, outpatient clinic consolidation, parking access, and modernization of aging facilities. Preliminary concepts discussed included construction of a new multi-story outpatient services building, continued use of newer hospital infrastructure, and phased replacement or decommissioning of older facilities across the campus.

Public Comment: None

Board Discussion:
Discussion included the importance of balancing long-term campus sustainability with financial feasibility, improving outpatient clinic space and patient access, and supporting future specialty service expansion. The presenters explained that planning teams were developing a hybrid recommendation utilizing existing campus investments while modernizing areas identified as outdated or undersized. Discussion also addressed the collaborative planning process involving leadership, staff, consultants, and community-focused healthcare planning considerations.

Opening meeting routine

Public Comment: None

Board Discussion:
Board members discussed the possibility of incorporating the Mission Statement, Vision Statement, organizational values, and the Pledge of Allegiance into the opening of Board meetings in order to keep the purpose and responsibilities of the Board at the forefront of governance discussions and decision-making. Discussion included whether the Mission and Vision statements should be read aloud during meetings or printed within meeting agendas and materials. Additional discussion addressed the historical purpose of the Pledge of Allegiance as a civic tradition promoting accountability, unity, public service, and civic-minded decision-making within governmental meetings. Board discussion reflected support for continuing to include the Mission and Vision statements in printed form on meeting agendas and materials rather than incorporating them as a verbal portion of the meeting opening.

Motion by Smith to include the Pledge of Allegiance in the meeting routine
2nd: None
Motion did not carry

Following the failed motion, a board member asked whether any members wished to comment on why they would not support or second the motion to include the Pledge of Allegiance before meetings. No additional comments were made by the Board.

FINANCE COMMITTEE

Benchmarking Update
CEO Wallis provided an update regarding the benchmarking assessment being conducted by HealthTrust. He explained that the consultants were onsite, conducting interviews with managers and directors throughout the organization as part of a benchmarking and operational assessment process. He stated that the consultants were conducting detailed 30- and 50-minute interviews across multiple departments and leadership areas. He also noted that the organization had provided a substantial amount of operational and organizational data for review as part of the assessment process.

Public Comment: None

Board Discussion: None

Banking Recommendations
Transfer Funds/Establish Business Sweep Account
CFO Mossman presented banking recommendations related to the District's operating cash and investment management strategy. The presentation included a recommendation to transfer approximately $1.4 million from a low-interest account previously used as collateral for a line of credit into a higher-yield account at Five Star Bank. She also presented a recommendation to establish a Business Interest Sweep account designed to maintain a target operating balance while automatically transferring excess funds into higher-interest earning accounts. Discussion included projected interest earnings, current

banking structure, liquidity considerations, and opportunities to improve investment returns on District funds while maintaining operational flexibility.

Public Comment: None

Board Discussion: Finance Committee Vice-Chair Best-Baker noted that Sharp from Eastern Sierra Community Bank attended the finance committee meeting and helped make these recommendations.

Motion by Turner to approve the transfer of funds
2nd: Lent
Pass: 5-0

Motion by Turner to approve the establishment of a business sweep account
2nd: Egan
Pass: 5-0

Cash Flow Action Plan
Revenue Cycle Director Lind presented the District's Cash Flow Action Plan update and reviewed progress made by the Cash Flow Action Team since the implementation of Jorie began approximately one year prior. Lind explained that the team utilizes a dashboard to monitor operational and revenue cycle performance metrics and highlighted significant improvements in charges, payments, average daily revenue, accounts receivable (AR) days, and claims management processes. She also reported that AR days had decreased from 81 days to 63 days, which she stated was the lowest level achieved during the current monitoring period and reflected faster reimbursement turnaround and improved collection efficiency. Additional metrics reviewed included reductions in accounts receivable over 90 days, improvements in discharged-not-final-billed (DNFB) days, increases in clean claim rates, and reductions in denial rates. She attributed the improvements to stronger interdepartmental collaboration, operational workflow changes, and focused efforts to resolve issues more efficiently across departments.

Public Comment: None

Board Discussion:
Board members discussed the improvements in AR days and revenue cycle performance metrics and acknowledged the operational and financial impact of improved collection turnaround times. Discussion included the relationship between faster collections, lower cost-to-collect expenses, improved operational efficiency, and overall financial stability for the District. Board members commended staff for the sustained improvement efforts and ongoing collaboration across departments.

NIH Operational Budget 26/27
CFO Mossman presented the proposed FY 2026–2027 operational budget and reviewed the revised budget development process used for the upcoming fiscal year. She stated that department leaders and executive leadership began the

budgeting process earlier than in prior years and worked collaboratively to review departmental needs, operational trends, staffing, expenses, and growth strategies. She thanked department leaders and staff for their increased engagement and collaboration throughout the budgeting process and stated that the proposed budget reflected a more realistic and transparent operational plan than in prior years. The presentation included discussion regarding projected operating losses, anticipated revenue growth, improved revenue cycle performance, reductions in contract labor expenses, operational investments, and ongoing financial strategies intended to improve cash flow and long-term financial stability. Discussion also addressed uncertainty related to potential federal healthcare funding changes and the District's decision not to incorporate speculative Medicaid reductions into the proposed budget assumptions at this time.

Public Comment: None

Board Discussion:
Board members commended staff for the clarity, transparency, and detail provided within the proposed budget materials and discussed the improved budget development process and organizational engagement. The Board approved the FY 2026–2027 operational budget by unanimous vote.

Motion by Turner to approve the NIH Operational Budget 26/27
2nd: Lent
Pass: 5-0

NIH Capital Budget 26/27
CFO Mossman presented the proposed FY 2026–2027 capital budget and reviewed the District's new collaborative capital planning process, which included the use of an electronic capital request and prioritization tool developed by staff. Department leaders submitted and prioritized multi-year capital requests based on patient safety, regulatory compliance, strategic growth opportunities, and end-of-life equipment replacement needs. The proposed capital budget included approximately $2.1 million for the replacement of the District's MRI machine, along with additional projects related to parking lot improvements, weapons detection equipment required under new California law, facility improvements, and specialty service expansion support. CFO Mossman stated that the proposed capital budget totaled approximately $4 million, including contingency funding, and reflected the District's improved financial position and commitment to investing in infrastructure, patient care, and long-term operational needs.

CEO Wallis and CFO Mossman expressed appreciation to Neil Lynch and Lynda Vance for the development of the new electronic capital planning and prioritization tool that supported the revised capital budgeting process.

Public Comment: None

Board Discussion:

Board members discussed the importance of addressing deferred maintenance and aging equipment needs, maintaining contingency funding for unexpected facility issues, and continuing long-range capital planning efforts. Discussion also highlighted the value of the new electronic capital planning tool and the collaborative prioritization process used by department leaders and staff. Board members expressed support for investing in infrastructure, patient safety, equipment modernization, and future service line growth rather than continuing to delay needed capital projects.

Motion by Lent to approve the NIH Capital Budget 26/27
2nd: Turner
Pass: 5-0

Financial and Statistical Report
CFO Mossman presented the March 2026 Financial and Statistical Report and reviewed the third-quarter financial performance and operational results. She reported that the District exceeded its March budget projections by approximately $1.3 million, largely driven by strong orthopedic and surgical volumes, improved payer mix, higher inpatient acuity, and continued revenue cycle improvements. The presentation highlighted that a positive operating income was achieved for the quarter for the first time since 2024 and reported continued improvements in accounts receivable days, debt service coverage ratios, days cash on hand, and unrestricted cash reserves. She reported that cash balances had increased by approximately $3.8 million since the beginning of the fiscal year and stated that it is one of the strongest financial positions in recent years. Additional discussion included ongoing cash flow initiatives, improved investment earnings through Five Star Bank and LAIF accounts, and continued operational improvement efforts related to orthopedics, benchmarking, and space planning initiatives.

Public Comment: None

Board Discussion: None

Motion by Lent to accept the Financial and Statistical Report
2nd: Turner
Pass: 5-0

GOVERNANCE COMMITTEE

Advocacy Update
CEO Wallis introduced legislative consultant Madden to provide an advocacy and legislative update following the Board's recent direction to formalize the District's advocacy tracking and review process. Madden provided an overview of the California legislative process, including bill introduction deadlines, policy and appropriations committee review, movement between the Assembly and Senate, and final gubernatorial action. Madden explained that the legislative calendar operates on strict deadlines and that bills must progress through multiple review stages in order to advance through the legislative process.

Madden and CEO Wallis then reviewed several priority one healthcare-related bills identified for District monitoring:

- **AB 1923** – Legislation sponsored by the California Hospital Association to provide an additional $300 million in funding for the Distressed Hospital Loan Program and create a clearer pathway for certain loans to potentially convert into grants for financially struggling hospitals.
- **AB 2353** – Legislation intended to require analysis and reporting of financial impacts to hospitals when new healthcare-related mandates are proposed by the Legislature, including operational and compliance costs associated with new requirements.
- **AB 2208** – Legislation related to Medi-Cal retroactive eligibility and potential impacts associated with HR1 federal Medicaid changes. The bill would preserve three months of retroactive Medi-Cal coverage at state expense despite reductions in federal reimbursement support.
- **AB 1607** – Legislation extending the sunset date associated with portions of the Maddy Emergency Medical Services Fund program, which provides reimbursement support for hospitals and physicians treating uninsured patients and supports local EMS funding allocations.
- **Federal School-Based Healthcare Grant Legislation** – Discussion regarding potential future federal grant opportunities that could support school-based healthcare clinic operations, staffing, equipment, and services, including the District's Panther Clinic and Bronco Clinic programs.

Public Comment: None

Board Discussion:
Board members discussed several of the proposed priority bills, including healthcare mandate costs, EMS funding distribution, Medi-Cal impacts, and school-based healthcare grant opportunities. A board member also raised interest in legislation related to physical therapy scope of practice, identified as AB 2497, and requested that the bill be added to the District's legislative tracking list for future Governance Committee review. Board members expressed appreciation for the legislative tracking and advocacy support process.

Values and Taglines
CEO Wallis presented a discussion regarding the District's Mission, Vision, Values, and tagline alignment efforts. He explained that multiple versions of organizational values were currently being used throughout the District and stated that leadership wanted to establish a single, aligned set of values for the organization. He recommended the adoption of the "CARES" values developed during the executive team's strategic planning process, representing Compassion, Accountability, Respect, Excellence, and Stewardship. Discussion also included retaining the District's existing tagline, "One Team, One Goal, Your Health," due to its current use in marketing materials and organizational branding.

Public Comment: None

Board Discussion:
Board members discussed removing outdated value statements currently displayed within the organization.

Motion by Turner to approve the values: Compassion, Accountability, Respect, Excellence, Stewardship
2nd: Lent
Pass: 5-0

QUALITY COMMITTEE

Grievance Committee
Quality Manager Feinberg presented an update regarding the District's newly established Grievance Committee. Feinberg explained that the committee was created to improve coordination, communication, and resolution of patient grievances, including concerns related to patient care, financial disputes, and other complaints submitted to the District. She stated that the committee meets every two weeks or more frequently as needed and includes representation from physicians, nursing, finance, quality, and risk management to allow collaborative review and resolution of grievances. The presentation also highlighted the implementation of a dedicated staff contact responsible for reaching out to patients immediately upon receipt of a grievance and maintaining communication with patients throughout the resolution process. She stated the committee's approach aligned with the District's broader efforts to improve transparency, patient communication, and resolution timelines.

Public Comment: None

Board Discussion:
Board members discussed the benefits of the collaborative grievance review process and the importance of improving communication and follow-up with patients during grievance resolution efforts. Discussion included comments regarding prior limitations of department-specific grievance responses and appreciation for the committee's multidisciplinary approach to resolving patient concerns more efficiently and collaboratively. Board members expressed support for the new process and ongoing improvements related to patient communication and resolution efforts.

Quality Dashboard
Quality Manager Feinberg presented the quarterly Quality Dashboard and reviewed key quality, patient safety, patient satisfaction, operational, and workforce metrics for the District. Feinberg reported zero central line-associated bloodstream infections (CLABSIs), zero catheter-associated urinary tract infections (CAUTIs), zero inpatient falls with injury, and zero sentinel events during the reporting period. Additional quality metrics reviewed included low medical transfer rates, 30-day readmission rates well below benchmark, mortality rates below benchmark, emergency department wait times below established standards, and patient satisfaction scores that generally met or approached benchmark targets across multiple service areas. Feinberg

also reviewed workforce and operational measures, including employee engagement survey response rates, employee turnover, workers' compensation claims, and reportable workforce incidents. Feinberg stated that a shortened public-facing version of the Quality Dashboard would be developed for publication on the District website with additional explanation of quality measures for community education purposes. She stated that staff would be working with the Marketing Department to develop and publish a shortened public-facing quality dashboard on the District website with additional explanation of quality measures for community viewing and education purposes.

Public Comment: None

Board Discussion:

Motion by Turner to accept the quality dashboard
2nd: Egan
Pass: 5-0

GENERAL INFORMATION FROM BOARD MEMBERS

Board members provided general informational comments and updates. Discussion included updates regarding the upcoming Association of California Healthcare Districts annual conference scheduled in October in Monterey, including conference themes, governance training information, and future conference planning. Board members also encouraged community participation in the upcoming Board election cycle and discussed the importance of attracting a strong pool of candidates for the District Board of Directors. Additional comments recognized the District's employee awards presentation, including recognition of long-term employees and acknowledgment of nurse Laura Partridge for the development of a maternal mental health program that received recognition at the federal level. Board members further expressed appreciation to CEO Wallis and District staff for ongoing financial improvement efforts, leadership, public outreach presentations to local government agencies, and Hospital Week employee recognition activities and events.

ADJOURNMENT

Adjournment at 8:20 pm.

Melissa Best-Baker
Northern Inyo Healthcare District
Chair

Attest: _____
Maggie Egan
Northern Inyo Healthcare District
Secretary