

REGULAR MEETING
BOARD OF COMMISSIONERS
Public Hospital District No. 1-A of Whitman County, Washington
d/b/a Pullman Regional Hospital
Wednesday, February 4, 2026 at 6:00 PM In-Person or Virtually by Zoom

Board of Commissioners

P-Cheryl Oliver, President
P-PJ Sanchez, Vice President
P-Anna Nofsinger, Secretary
P-Joe Pitzer, Commissioner
P-Tricia Grantham, Commissioner
P-Michael Cady, Commissioner
P-Shane McFarland, Commissioner

Hospital Personnel

P-Matt Forge, CEO
P-Craig Carstens, CFO
P-Tammy Needham, CNO
P-Bernadette Berney, CHRO
P-Carrie Coen, CRO
P-James Onstad, Legal Counsel
P-Benjamin Rhoades, DO, Medical Staff President
P-Karly Port, CPSO
P-Peter Mikkelsen, MD, CMO
P-Linda Infranco, Executive Director
P-Alison Weigley, Strat Planning & Business Dev Director
P-Carly Scholz, Medical Staff Manager
P-Anna Helman, Executive Assistant

Guests:

Lennis Boyer (zoom)
Jim Smith
Deedra Zabokrtsky
Katie Van Wyngarden (zoom)

I. CALL TO ORDER

President Oliver called the meeting to order at 6:00p. Roll call was taken with the following Commissioners answering present: Oliver, Sanchez, Nofsinger, Pitzer, Grantham, Cady, and McFarland.

II. APPROVAL OF MINUTES

A. Commissioner Sanchez moved to approve the minutes for the regular meeting of January 7, 2026. Commissioner Nofsinger seconded the motion, and the motion passed unanimously.

III. MODIFICATION TO AGENDA

- VIII. B - Finance Committee will be reported out by PJ Sanchez and not Cheryl Oliver
- Remove Action Item VIII.A.c CME Policy. This item will be considered for March agenda as an Information Item
- Remove Information Item VIII.C.b Annual QMS Review. This is part of the Consent Agenda and was reviewed in its entirety at Governance Committee.

IV. CONSENT AGENDA

Commissioner Grantham moved to approve the consent agenda. Commissioner McFarland seconded the motion. The following committee reports were approved unanimously.

- Medical Executive Committee
- Finance Committee
- Quality Management System
- Governance Committee
- Strategic Planning Committee
- Foundation Board of Directors
- Approval of Warrants

V. PUBLIC COMMENT

President Oliver opened the floor for public comment. No public comment was made. President Oliver closed the floor for public comment.

VI. ACTION/DISCUSSION ITEMS

A. Governance Committee Report
Commissioner McFarland provided an update from the Governance Committee's January meeting. The Committee discussed policy review processes with Carrie Coen and the timing of Matt's evaluation, with consideration given to moving it forward within the calendar year. An AI policy was reviewed, and feedback was provided. The Committee also continued its strategic discussion regarding governance oversight of AI, including the potential formation and

scope of an AI Committee. Conversations included AI risk mitigation, with a recommendation to invite the Director of IT to a future meeting. The Committee emphasized the importance of staying at the forefront of emerging AI developments, as well as evaluating opportunities for utilization and associated risks. Board education topics for the year were also discussed.

a. Policy Committee Charter

Carrie Coen presented an overview of the Policy Committee's purpose and structure, noting its role in providing oversight and guidance to promote standardization, regulatory compliance, organizational effectiveness, and alignment across the system. The committee will be multidisciplinary in composition, with objectives centered on high-quality patient safety. Efforts will also focus on streamlining internal communication and clearly outlining expectations. The committee will meet monthly for one to two hours, with increased cadence during initial implementation as needed. Quarterly report-outs will be provided in accordance with the charter. PRH's Leadership Team will be responsible for reviewing existing policies, appropriately classifying them, and consolidating where necessary. A motion to approve the charter was made by Commissioner McFarland and seconded by Commissioner Nofsinger. The motion passed unanimously.

b. Policy on Policies

Carrie Coen shared a revised policy from what was distributed in Board Packet. There were no comments, considerations or further discussion relating to the proposed Policy on Policies. Commissioner McFarland moved to approve the Policy on Policies. Commissioner Sanchez seconded the motion and the motion passed unanimously.

c. Urology Privilege Form

Dr. Rhoades presented the additions to the Urology delineation of privileges. A request was made to add a special procedure privilege called Altaviva. This addition was recommended by both Credentials Committee and the Medical executive Committee. Commissioner Grantham moved to approve the addition to the privilege form. Commissioner Sanchez seconded the motion and the motion passed unanimously.

d. CareLearning Add-on/WSHA Certification

The Board revisited its prior decision to complete the same HIPAA training required of employees. Malisa McCabe provided a recommendation that Board members also complete the AIDET communication course and hand hygiene training. It was requested that Commissioners be enrolled in all three modules through CareLearning, with a completion deadline set for the end of March.

WSHA Certification

The Board was encouraged to participate in WSHA training related to the obligations of Board members, including legal and fiduciary responsibilities. Emphasis was placed on understanding organizational risks and the significance of these responsibilities to the community that has entrusted the Board with governance oversight. Commissioners were asked to complete the training by the end of the year.

e. Olympia Report Out

Commissioners McFarland and Oliver attended a lobby session in Olympia to advocate. They divided into groups and met with Representatives Schoesler, Schmick, and Dye, representing Othello, Tri-State, and Whitman districts. PRH and other hospitals from across the state were well represented. Many of the organization's talking points were well received, including concerns regarding taxes and budget cuts impacting rural hospitals, and a request for clean claims to be processed at 100%. Additional discussion included changes to Pharmacy Fee-for-Service programs and the 340B program. While not all small hospitals utilize 340B, it is a significant resource for Critical Access Hospitals that do participate, providing discounted pricing for certain medications. The program was noted to be complex to navigate, with a projected significant net benefit.

B. Finance Committee Report

Commissioner Sanchez provided an update from the Finance Committee's February meeting. The December financials remain open, with final 2025 year-end numbers and January results to be presented at the March meeting. The DZA audit is scheduled for March. The Committee discussed the current use of four external coding companies and the potential transition to bringing coding services in-house, noting this would be a significant operational undertaking. Additional discussion included appropriate timeframes for RFPs (three versus five years), evaluation of leasing versus purchasing to determine the most beneficial financial approach. Additionally, he mentioned that the organization is

currently fourth in line for ERC review. It was also noted that Jim Smith will remain through the end of February, and appreciation was expressed for his clarity and guidance during the interim period.

a. Financial Update

The Board will review a Financial Update for 2025 and the month of January at the Regular March meeting.

b. Resolution 626

This resolution allows specific staff members to sign financial documents for Pullman Regional Hospital when working with the Whitman County Treasurer's Office. This resolution is specifically to add Craig Carstens to this list of signees.

Secretary Nofsinger read Resolution No. 626 stating the following:

A resolution of the Commission of Public Hospital District No. 1-A of Whitman County, Washington, authorizing names individuals to sign those documents required for conducting business on behalf of Pullman Regional Hospital through the Whitman County Treasurer's Office such as investments, warrant activity, and fund transfers. The daily transactions for operations through the Whitman County Treasurer's Office will be completed by authorized personnel of the Fiscal Services and Human Resources Department.

Commissioner Grantham moved to approve the resolution. Commissioner McFarland seconded the motion and the motion passed unanimously.

C. Strategic Planning Committee Report

a. Strategic Dashboard Review

Matt shared the end of year, 2025 Strategic Dashboard, including a review of the eNPS, the Care Alert system responses and positive progress on population health initiatives. The Care Alert system, implemented in 2024, was highlighted as one of the most successful implemented initiatives over the last several years. He stated that the trend in alerts entered is indicating that staff feel comfortable and safe communicating events as they occur. Positive progress was noted in the Population Health initiative and patient satisfaction scores. Overall, the organization is trending toward a strong revenue year.

b. Annual Nursing Report

Tammy Dahl presented the PRH Annual Nursing Excellence Report 2025. This first annual report highlighted 8 nursing excellence domains, to include:

- Patient Centered Care
- Professional Development
- Evidence Based Practice
- Shared Leadership
- Collaborative Culture
- Quality and Safety
- Community and Rural Stewardship
- Recognition and Resilience

Some of the key points were initiation of the TRUST Cycle continuous improvement process model, focus on Patient and Human Experience, nursing leadership restructure, manager in training positions, development of Education department, CNO open office hours, WSNA Collective Bargaining agreement completed, and a QMS revamp. The presentation reflected the commitment to Trust, Transparency and Teamwork through the PRH Nursing Excellence Framework.

c. Expansion Update

Matt highlighted the extraordinary noise reduction achieved, along with the strong planning, preparation, and professionalism demonstrated by Bouten, resulting in effective project management and minimal unexpected issues. Carrie Coen was recognized for her leadership of the process, with appreciation expressed for her coordination and oversight. The team has maintained services with minimal disruption, supported by communication efforts led by Alison Weigley, maintenance coordination by Caitlin Champoux, and support from Brad Cook. It was noted that the team has hit its stride, with clear expectations and established communication

channels. Phase 1 is approximately halfway complete, and potential adjustments are being evaluated to accelerate progress. In March, registration will be fully transitioned to the front desk.

VII. ANNOUNCEMENTS

- A. Pullman Regional Hospital Foundation Gala, February 7th, SEL Event Center
- B. Coffee with Matt, 7:00a February 5th

VIII. EXECUTIVE SESSION

At 7:45p President Oliver announced that the meeting would go into Executive Session for 30 minutes to discuss the granting, denial, revocation, restrictions, or other considerations of the status of the clinical or staff privileges of a physician or other healthcare provider, consider personnel issues, and consult with legal counsel.

At 8:16p, President Oliver announced that executive session would continue for another 30 minutes.

At 8:40p, President Oliver announced that executive session would continue for another 10 minutes.

At 8:50p, President Oliver announced that executive session would continue for another 10 minutes.

The meeting resumed Open Session at 8:53p.

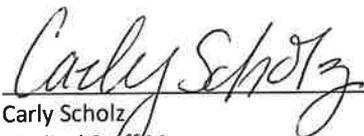
IX. OPEN SESSION

- A. Credentials Report
Commissioner Sanchez moved to approve the credentials report. Commissioner Nofsinger second the motion and the motion passed unanimously.

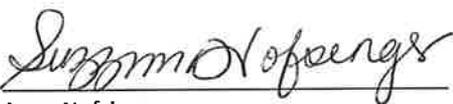
X. ADJOURNMENT

The meeting adjourned at 8:53p.

Respectfully submitted by:



Carly Scholz
Medical Staff Manager
Pullman Regional Hospital



Anna Nofsinger
Secretary
Board of Commissioners, Pullman Regional Hospital