Meeting Title:	Board of Trustees Meeting	Chairperson:	James Moreau
Date/Time:	November 25, 2025	Location:	Norton County Hospital

Norton County Hospital
Board of Trustees Meeting Minutes

Attended	Position
James Moreau	Board President
Jimmy Todd	Board Vice-President
Randa Vollertsen	Board Treasurer
Lee Juenemann	Board Secretary
Jerry Hawks	Board Member
Andrew Black	Board Member
Robert Wyatt	Board Member
Kevin Faughnder	NCH Chief Executive Officer
ReChelle Horinek	NCH Chief Financial Officer
Shannan Hempler	NCH Director of Human Resources
Sarah Mohr	NCH Chief Nursing Officer
Klare Bliss	NCH Chief Information Officer
Mel Dewitt	NCH Clinic Manager
Marissa Davis	NCH Director of Quality and Risk Management

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	Agenda Item	Action and/or Time
1.	**November 25, 2025 Board Meeting Minutes**	Motion by **Andrew Black** to approve the amended minutes of the October 15, 2025 meeting. Second by **Lee Juenemann.** Motion carries unanimously.
2.	**Consent Agenda Items:** a) Personnel Information b) Patient Satisfaction Survey Summary c) Accounts Payable – Bills	Motion by **Jimmy Todd** to approve the Consent Agenda Items as presented. Second by **Randa Vollertsen.** Motion carries unanimously.
3.	**Executive Session: Financial Affairs of non-elected personnel**	**James Moreau** moved to enter into executive session: K.S.A. 75-4319(b)(4) to discuss financial affairs of non-elected personnel. with the Board, CEO, and CFO present not to exceed 10 minutes. Seconded by **Andrew Black**. Motion carried unanimously. The executive session begins at 6:02 p.m. Exit at 6:10 p.m.
4.	**Board Action from Executive Session** None	
5.	**Risk Management/Quality Assurance** Marissa Davis, Director of Quality and Risk Management, presented the updated plan for approval.	Motion by **Andrew Black** to approve the Risk Management Plan. Second by **Randa Vollertsen** Motion carries unanimously.
	CIO Report Klare Bliss, the Chief Information Officer (CIO), presented comprehensive updates from over the last month.	

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	Cerner EES Clinical AI Agent signed Agreement on Nov 24th. Providers using it. Great Feedback **Cerner Change Governance** Continuing meetings with departments requesting changes or improved functionality. **Updates** • Helped in EP on Cybersecurity • Upgrading Phones with Nex Tech • Arctic Wolf risks & Security Improvements • Quote for updating Cardiac Rehab LSI System **CAA Nov Report** Metrics for provider usage. **LSI Quote for Cardiopulmonary Department** Central monitoring station with TrensCenter Software for $18,495.00. **ESS** • New ambulatory EMR announced. • RevCycle AI Agents in development. • Clinical AI Agent signed for 90 pilot • Seamless Exchange Project underway • OH Connection Hub	Motion by Robert Wyatt, to approve LSI quote for $18,495.00. Second by Randa Vollertsen. Motion carries unanimously.
7.	**Medical Clinic Update** Melody DeWitt, the Norton Medical Clinic Manager, shared the following Medical Clinic updates: **Volumes** • Total visits: 882 (↓ from 999 in September) • Acute/Same-Day: 288 (↓ from 290) • Saturday Clinics: 18 (↑ from 17) • Medicare Annual Wellness Visits: 7 (↓ from 23) • Follow-Up Visits: 137 (↓ from 152) • Established Care Visits: 72 (↑ from 48) • Physicals: 34 (↓ from 38) • Nurse Visits: 115 (↑ from 102) **Medical Clinic Cont.** • DOT Physicals: 0 (↓ from 4) • No Shows: 33 (↓ from 37)	

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	• Wellness: 11 (↓ from 23) • Well Child Checks: 6 (↓ from 8) • Procedures: 7 (↓ from 11) **Highlights** • Will have agency in ER in October and November. **Staffing** • 2 Reception positions open **Quality** • KanSurvive 2.0 data collection underway. • Ongoing survey readiness work in the clinic • Behavioral Health	
8.	**Medical Staff Credentialing Application**	Motioned by Andrew Black to approve the Credentialing Packets presented to the Board. Second by Randa Vollertsen. Motion carries unanimously.
9.	**Ni2 Update** ReChelle Horinek, CFO presented Ni2 reports for October 2025	
10	**CFO Report of Statistical/Financial Information** ReChelle Horinek, the Chief Financial Officer (CFO), presented statistical and financial information for October 2025, covering various aspects. **Income statement** Gross patient revenue for October was $2,908,349. Outpatient revenue was above budget in October while inpatient, swing bed and clinic were all under budget again this month. Contractual allowances continue to be higher due to some large outpatient claims as well as our lower reimbursement rates with Medicare. We budgeted for a $300,000 payable to Medicare for FY 2026,	

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	but this will be evaluated and updated once final 2024 audit is complete and will likely be increased. Monthly payable to Medicare is booked in contractual allowances at $25,000 per month. Other operating revenue includes payments for 340B, sales of service revenue, dietary revenue, etc. Operating expenses for October were $1,740,715. Other non-operating revenue in October includes tax distribution accrual, two months of sales tax distribution, contributions, interest and donations. Net operating loss for October is ($93,426), which includes the $25,000 bookable payback to Medicare. October net profit was $61,912. We did receive 2 months of sales tax revenue, catching up the year-to-date amount. Year to date profit is $24,989. **Balance sheet** Cash balance totals at the month end are $1,4,612,231. We had 3 payrolls hit the cash account in October (this happens twice per year). Days of cash on hand are 27.86 ending October 31, 2025. All other totals on Balance Sheet are within norm. Changes will show on the Balance Sheet once year end audit entries are posted by Forvis. **Statistics** October 2025 statistics show a direct correlation with the revenue. Inpatient and swing bed statistics are trending higher than the previous year, which is good. Apart from lab and respiratory therapy, the ancillary departmental outpatient statistics are above 2024 as well. **Other Information Revenue** Cycle Optimization: Starting this with Cerner in early January 2026. 2025 Medicare Cost Report: I will have an update of payable amount at the board meeting on Tuesday evening from Forvis. 340B Rebate Model Pilot Program: The US Government approved a pilot program for drug manufacturers which will force hospitals to purchase 9 specific drugs at full price and then we must wait for a rebate to be sent to the facilities from drug manufacturers. KHA continues to lobby against any further legislation that will create higher initial drug pricing for hospitals.	

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	KHA Productivity Study: We participated in a study performed by WipFli through KHA to examine FTE productivity analysis based on patient statistics. The study is not geared at reduction of staff, but to help facilities gauge based on patient counts the optimal number of staff for departments other than direct patient care. I just received the NCH results late last week and will review with the admin team and use this information to assist with budgeting for the next fiscal year. Financial Assistance/Billing & Collecting Policy: NCH is a 501(c)3 facility and thus must comply with the 501R regulations regarding billing and collection activities. I've worked with our attorney to update our policies and procedures regarding collection of patient accounts and financial assistance. We have a new "Notice of Extraordinary Collection Activity" and a "Notice of Termination of Provider-Patient Relationship" for use in conjunction with our collection policies. Kansas Provider Assessment Program: This program has been in place since 2004 in which PPS hospitals paid an annual assessment to draw down federal matching dollars to enhance Medicaid payments to all Kansas hospitals. Legislative change in 2020 brought Critical Access Hospitals assessment payments into the program. We have netted dollars from this program since it's inception through DSH dollars and most recently, after the creation of Medicaid MCOs, through quarterly payments directly from the MCOs to our hospital. Beginning in 2025, all CAH hospitals will be responsible for paying into the assessment program. The estimated assessment for NCH, due by May 31, 2026, is nearly $275K. The plan behind including CAH hospitals in the assessment payments is to increase further the federal matching dollars.	
11.	**Financial Affairs of Non-Elected Personnel** Financial Assistance YTD: $50,707.60 Bad Debt to Collections YTD: $215,565.00 Bankruptcy YTD: --	Motion by **Randa Vollertsen** to send an amount not to exceed $52,695.60 for attempted collections. Second by **Robert Wyatt.** Motion carries unanimously.
12.	**CNO Report** Sarah Mohr, the Chief Nursing Officer (CNO), presented comprehensive updates for the month of October:	

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	Avel E-Emergency Activations • 13 encounters in September **Key Statistics (Reporting Period: October 1-31, 2025)** • Daily Census: 3.0 patients, ↑ from 1.5 (September) • Inpatient Admissions: 12 patients, ↑ from 8 (September) • Inpatient Days: 46 days, ↑ from 31 (September) • ER Visits: 186 visits, ↑ 172 visits (September) • Outpatient Visits: 211 visits, ↑ from 200 (September) **People Updates:** • 2 PRN nurses hired • Acute Care Manager starts Monday **Operations** • Lab: A new PRN lab tech started 11/4.She trains 2-3 times per week and then will be filling in as needed and taking call one weekend per month. Lab now running fentanyl testing in-house as providers requested. Lab's new table is expected to be delivered in the next week or so. Staff are very excited, as it will provide additional workspace and improve efficiency. The lab completed a health fair for Prairie Land Electric last Wednesday and had 60 people they completed results for. Our COLA inspection occurred on 11/18. Originally scheduled for two days, it was completed in one. The surveyor was very thorough, and the lab passed inspection, meaning no survey for two years. • Outpatient Therapy: Outpatient had 211 visits in October. The department is on track in 2025 to average over 200 clients a month. It will be interesting to see what 2026 brings with a new physician, a new mid-level, and Bailey back from maternity leave. The department anticipates number will increase further in the new year! • Specialty Clinic: Continuing to improve cross-departmental communication to ensure patient satisfaction. Developed a new "huddle" process for end of clinic days to touch base with the visiting provider and confirm orders prior to the provider leaving for the day. • Respiratory: Kayla was re-appointed to the Science Advisory Board for the school district, and reports that lots of good things are happening within the school that will promote future health care providers! RT continues	

	to work on credentialing, assist in some specialty clinics, and even help Pam in central supply with stocking. • Radiology: The department completed 532 exams for the month of October. Among those, were 60 mammograms completed during Breast Cancer Awareness month! • Surgery: Kera saved an ultrasonic cleaner that was in the clinic. These typically cost thousands of dollars to purchase new, but she worked with a rep to find appropriate deep cleaning supplies and learned the procedure to complete. It now looks brand new! We are also looking to move pain clinic down to the first floor to improve the workflow. • Nursing: The department has been short staffed due to nurses on medical leave and a resignation. Ashley and Sarah have been covering night shifts as needed. Ashley introduced and provided training for a new Cert-a-Dose pediatric syringe to be used for certain emergency med administration, preventing the possibility of administration errors on these high risk drugs! Ashley has been settling in to her role and she and the nursing staff have had good conversations about expectations of each other.	
13.	**CEO Report** Kevin Faughnder, the Chief Executive Officer, provided a comprehensive report on various initiatives and updates: • Human Resources (HR) training: Olson Group conducted advanced HR training with our staff on October 29-30. We are reviewing the information contained in their final report and have already started implementing strategies to address employee feedback. • Administration: We updated our billing and collections policy with the assistance of our attorney. Our attorney is still reviewing our By-Laws. • Lab: NCH Lab underwent its annual COLA inspection on 18-19 November. Our team did great and the inspection wrapped up in one day • , not two, like originally forecasted. Our lab will undergo another inspection in two years. • Insurance: We are moving away from BCBS because they were increasing our rates by 24%, wanted us to move to a 60/40 split, and would not allow flexibility with our plan. We were able to move into a self-funded, captive account and offer employees considerably better and less expensive	Motion by **Robert Wyatt** to approve the updated organization chart. Second by **Andrew Black.** Motion carries unanimously.

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	options than BCBS. Open enrollment is scheduled for December 3-4. Olson Group representatives will be on site to answer questions and help employees. • Employee Engagement Specialist: We hired Leslie Tompkins, and she started on November 17th. We restructured the HR Assistant position to create the Employee Engagement Specialist position. This position reports to the CEO and also is aligned directly under the CEO on the NCH organizational chart. The overall concept is, if an employee is having an issue with something or someone, we first encourage them to go to their manager for assistance. In an ideal situation, the manager can resolve the issue for the employee. A second option is, the employee talks with Leslie. Leslie will listen to the employee and will seek to understand what is going on and assist with root-cause analysis. She will look at NCH policies and external references to determine if our policy on that issue makes sense. Leslie has extensive healthcare and managerial experience and can assist with conflict resolution too. She and I will meet weekly to discuss issues she is working on. Depending on the issue, we will meet and consult with the HR Director as needed. Leslie's office will be on the second floor to promote a more conducive environment for employees to meet with her privately. Need Motion to approve updated NCH Organizational Chart • Expanded employee screenings: All full-time NCH employees can get a yearly lab panel run on themselves, and a basic hearing test conducted in the clinic for free during their birthday month. Starting in December 2026, we are adding free vascular screenings, for employees aged 50, and over conducted by Radiology. The tests will be scheduled with Amy and/or Marla, based on their availability. Employees will need to use their health insurance for follow-up visits with their provider if they want more detail on the results. We want our employees to be healthy, and these are a few services that we can offer to help our employees assess their health. • Modernization: We anticipate the middle of January 2026 to start and complete the elevator upgrade. We are working with the elevator company and our Surgery Department to deconflict surgical procedures. • CHARTIS Award for 2025: NCH won an award from the Chartis Center for Rural Health for being in the top 25% among all other rural hospitals across America for best	

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	Outcomes. The award is based on a comprehensive and objective framework for assessing how rural hospitals are performing. This is a new award for NCH, and we are very proud of our staff for achieving this prestigious award.	
14.	**Commissioner Report** No Report	
15	**Board Member Report** No Report	
16.	**Other Business** No Other Business	
17.	**Executive Session: Non-Elected Personnel** None	
18.	**Board Action from Executive Session** None	
19.	**Adjourn**	Meeting adjourned at 7:17 p.m.

Lee Jueneman, Secretary

Lee Jueneman Sr.