

BOARD OF TRUSTEES
Regular Meeting Minutes
January 29,2026

Presiding Chairperson: Greg Cure, Chairman

Recording Secretary: Bre McEwen

Attendance:

Board Members present:

Greg Cure, Chairman
Terry Nash
Vicki Baker
Brian James
Travis Daise, MD, ex-officio
Brian Linin, Secretary -via Teams
Patricia (Patty) Eckhardt, Vice Chair
John Mosbarger, Treasurer

Members absent:

Guests:

Administrative Team Staff Present:

Amie Powell, Chief of Clinical Operations
Ryan Marvin, Support Services Director
Stephanie Klinge, SPC Clinical Coordinator
Allison Mulch, CCO
Tina Whisnant, Chief Comp/Risk Officer
Heather Prideaux, CFO
Lucretia Stargell, CEO
Cristi Romans, DON - until 5:10pm

GRMC Staff Present:

Bre McEwen, Executive Assistant

Community Members Present:

Call to Order:

- Board Chairman, Greg Cure, called the meeting to order at 5:01p.m. and opened the floor for Public Comments.
- Public Comments: none.
- Recognition of Special Guests and Announcements: Congratulations to Dr. Daise on his 100% patient satisfaction score!
- Mr. Nash moved, and Ms. Baker seconded to approve the agenda with discussed changes. Motion carried.
 - Discussion: Addition of executive session to discuss personnel matters of non-elected personnel after approval of the agenda.

Executive Session:

- Motion to enter into executive session for the purpose of discussing personnel matters of non-elected personnel with the board, Lucretia Stargell, CEO, Cristi Romans, DON, Allison Mulch, CCO, and Tina Whisnant, HR, for 5 minutes at 5:02pm by Ms. Eckhardt, seconded by Ms. Baker. Motion carried.
- Reconvened into open session at 5:07. No action taken.

Consent Agenda:

- Minutes from the Regular Meeting November 25, 2025, presented for approval.
- Minutes from the Special Meeting December 9, 2025, presented for approval.
 - Discussion: none.
- Reminder of the next regular meeting date of February 24, 2026.
- Full department reports in separate packet.
- Ms. Eckhardt moved, and Mr. Mosbarger seconded to approve the Consent Agenda as discussed. Motion carried.

Presentations:

- Shannan Flach, VP of Healthcare Finance and Reimbursement for KHA, here to talk about Cost-Based Reimbursement and how it works in our hospitals. This started back in the 1990s when the old model wasn't working. This new model allows for reimbursement based on costs. This helps with lower volume hospitals. Essentially, Medicare should be reimbursing hospitals at 101% of costs for Medicare and Medicaid revenue. After sequestration, it comes in at 99%. Depreciation is also calculated into reimbursement. Only certain departments/services are reimbursable like acute inpatient, swing-bed, provider based physician clinics, emergency services and ancillary services. Additional cost report opportunities include bad debt and charge description master. Bad debt is touchy due to having to pull everyone back from collections, all insurances, not only Medicare patients, therefore this isn't always beneficial. Hospitals have to watch out for some pitfalls when it comes to the cost report like non-reimbursable services, pricing increases, allocations, other operational changes.

CEO Report:

- The survey is currently active as of January 12th. Sitting at 72% participation right now, hoping to have 100%. Would like to see an 85% satisfaction score in the end. Results should be back end of February or early March. Last survey was 85% engagement.
- Lucretia mentioned all the employees who received years of service awards this year. Able to hand most of these out at the Employee Appreciation Part, caught the rest at work the following week.
- The leadership team has been working on the Big Audacious Goal. Shared the tracking sheet for updates. Employee satisfaction scores are big on this. There is a key feature along with the 'BAG', which will launch mid-February. This is the Sunflower Challenge. Essentially patients will be given a sunflower at check-in to take with them through the visit. At the end, if the patient enjoyed their time, had a good experience, they are encouraged to drop their flower in the vase. This is a visual indication of patient satisfaction. Goal at the end of the day is to have 100% satisfaction. There will be a 6 month trial period on this.
- Lucretia reviewed the KPI, key performance indicators, dashboards. Board has asked for comparisons to national averages and other hospitals in the state and surrounding area. This will be a revolving dashboard to keep up on.
- Rehab Remodel update: whole project is paused right now. Originally thought this project would fall under 'minor alterations' but it did not. Project overview, a letter of intent, was supposed to be submitted to KDHE prior to starting and that was not done. KDHE came out to GRMC and reviewed the project and put a stop to it. GRMC received a citation for starting the project when it shouldn't have been started. Corrective action plan is to halt the project. There was a misunderstanding about what the 'rules' were for doing construction without a sprinkler system. The actual rule states that buildings had until 2028 to put in a sprinkler system given they were over 75 feet, and no construction was to be done in the meantime. In order to continue on this project, a sprinkler system would have to be installed throughout the entire hospital. Hospitals are able to submit a plan of intent that would include a sprinkler system as a long term goal if not ready to put in the system ahead of 2028.

Medical Executive Committee:

- The January 2026 Medical Executive Committee Report with Credentialing as well as Policy and Procedures were presented by Travis Daise, MD, for board approval.
 - Mr. James moved, and Mr. Nash seconded to approve the December Medical Executive Committee Report with Credentialing and all policies and procedures. Motion carried.

Financials:

- Heather Prideaux presented a review of the November and December 2025 financials.
 - November was a really good month overall. Revenue was up and staff has been able to manage expenses. December numbers are still preliminary.
 - Questions:
- Motion to approve the November 2025 financials as presented by Ms. Eckhardt, seconded by Mr. Mosbarger. Motion carried.
- Days liquid cash on hand: 236 from the stat report.
- Days in A/R: 48.15 from the stat report.

Risk / Quality:

- Tina Whisnant presented the 2026 Risk Management Plan for review and approval. This is just the standard annual review with minimal changes. Motion to approve the 2026 Risk Management Plan as submitted by Mr. James, seconded by Ms. Baker. Motion carried.

Board Committee Reports:

- By-Laws Committee: Will have printed copies for each member at the next meeting.
- Building Committee: Appointing Terry Nash as the chairman of the building committee.
- Finance Committee:

Action and Discussion

- Strategic Financial Operations Analysis (SFOA) **1:53 in recording
- Lucretia Stargell, CEO, reviewed clinic numbers from GFHC. High emphasis on numbers moving forward. Dr. Daise and Amie Powell are going to start meeting regularly for strategic planning around building clinic numbers.

Common Spirit Report:

- None.

Other New Business:

- Board asking if GRMC is prepared and has supplies on hand if there is ever a case to deliver a baby in house. Yes, GRMC still stocks necessary items and has actually delivered a couple babies in an emergency situation.

Old Business:

- None.

Executive Session:

- Ms. Eckhart moved and Mr. Nash seconded the motion to enter into Executive Session for 5 minutes to discuss non-elected personnel with Ms. Stargell CEO and Dr. Travis Daise at 7:03pm. Motion carried.
- Reconvened into open session at 7:08pm. No action taken.
- Ms. Eckhart moved and Mr. Nash seconded to enter a second Executive Session to discuss non-elected personnel with Ms. Stargell and Dr. Travis Daise for 10 minutes at 7:09pm.
- Reconvened into open session at 7:19pm. No action taken.

Adjournment:

- With no further business to discuss, Ms. Eckhardt moved, and Mr. Nash seconded to adjourn at 7:19pm.

Brian Linin, Secretary