



**BOARD OF TRUSTEES
NOVEMBER MEETING MINUTES
Wednesday, November 19, 2025 4:00 P.M.**

MEMBERS PRESENT: Jenifer Shassetz, Kevin Kessner, Anthony Spiegelberg, Tobie Alsup, Ron Mischke, Rob Johnson, and Richard Garber

MEMBERS ABSENT:

OTHERS PRESENT: Mike McCafferty, Dr. Megan Ratterman, Dr. Sierra Gross, Nathan Stutte, Joe Wright, Cody Sinclair, Cathy Bealer, Brendon Kerns, Tommi Ritterbusch, Tenille Straley, Kelly Lieb, Sharon Krueger, Kristen Czaban, Amy Ligocki, Bryan Opitz, Ann Aksamit, Brent Maurhoff, Tonya Carlson, Casi Morgareidge, Erin Dunn, Erin Oetken, Jennifer Gaona, Jessica Heil, Kayla Johnson, Tonya Carlson, Jennifer Rasp-Vaughn, Sean Bonnet, Jenny Teel, Brittany Goodvin, County Commissioner Nick Siddle, Kevin Koile with Sheridan Media, and Weston Pope with the Sheridan Press

CALL MEETING TO ORDER

Jenifer Shassetz, Chairman called the meeting to order at 4:00 p.m.

PUBLIC COMMENTS, INTRODUCTIONS

Jenifer Shassetz announces trustee Tobie Alsup will be doing a presentation at the college tomorrow evening. All are welcome to attend this free event.

APPROVAL OF AGENDA AND MINUTES

Ron Mischke motioned to approve the agenda as presented. Kevin Kessner seconded the motion. Motion carries.

Anthony Spiegelberg moved to approve the minutes of the board meeting held on October 22, 2025 as presented. Rob Johnson seconded the motion. Motion carries.

QUALITY COMMITTEE REPORT

Tommi Ritterbusch, Director of Continuous Improvement reports that the committee reviewed data relevant to medication adverse events, evaluation of medication administration, restraint and seclusion, falls, and performance metrics. SMH is below the national goal for readmissions. Data also reviewed on avoidable days, and patient safety reporting. The organization has a continued commitment to safety and there is great work across the organization with no negative trends or areas of concern noted.

PATIENT EXPERIENCE REPORT

Kelly Lieb, Director of Patient Experience reports that the committee reviewed scores from OASCAHPS (Outpatient and Ambulatory Surgery Consumer Assessment of Healthcare Providers and Systems - patient experience survey focused on outpatient and ambulatory services) for surgical patients, the cath lab and IR. Great collaboration is being seen in surgery following the journey of the patient from pre-op thru clinic follow up. There are four big items a patient should be educated on relative to bleeding, nausea/vomiting, infection prevention, and pain control. The transitional care unit has collaborated with radiology around workflows. Home Care and Hospice continues to excel with a 5 Star rating. There is a need to expand this team as the referrals are growing. The VOICE (Voicing Opportunities for Improvement, Collaboration and Engagement) has an incredible team, focusing on what we hear from our community and the patient as we make strides on continuous improvement. Jenifer Shassetz is thanked for her leadership with this initiative. Departments that have a 5 Star rating or a net promoter score of 90 that has been sustained, will be moved to an annual report out. There are three departments that fit in this category with internal medicine, the women's clinic and the heart center identified.

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MEDICAL STAFF REPORT

Credentialing will be discussed in Executive Session with no other business to bring before the board.

Dr. Ratterman presents the following medical staff initial appointments and medical staff renewals:

MEDICAL STAFF INITIAL APPOINTMENTS (ACTION)

Name	Category	Specialty	Affiliated Organization
Le Yu Chiu, MD	Teleradiology/Delegated (No Membership)	Radiology	Real Radiology
Lauren Gilkerson, LPC	Non-Member LIP – Mental Health Consult (Psych, Mental Health)	Behavioral Health Coordinator	SMH
Jason Kane, DPM	Non-Member LIP - Podiatrist	Podiatry	Foot Care Center / Sheridan Surgical Center
Clinton Salyards, LCSW	Non-Member LIP - Mental Health Consult (Psych, Mental Health)	Behavioral Health Coordinator	SMH
Jessica Scheer, AGACNP-BC	Advanced Practice Clinician - Nurse Practitioner	Acute Geriatric Acute Care Nurse Practitioner	SMH Hospitalist Program
Kristen Zack, MD	Consulting – No Admit w/o Active Physician cosign	Nephrology	Billings Clinic

MEDICAL STAFF RENEWALS (ACTION)

Name	Category	Specialty	Renewal Date	Affiliated Organization
Victoria Chase, MD	Consulting -No Admit w/o Active Physician cosign	Maternal & Fetal Medicine	11/29/2025	St. Vincent's Intermountain Health

Husain Danish, MD	Consulting -No Admit w/o Active Physician cosign	Telemedicine - Neurology	11/29/2025	Blue Sky Neurology
Erin Henderson, MD	Active Staff w Priv - May Not Admit	Internal Medicine	11/29/2025	SMH Primary Care
Jason Otto, PA-C	Advanced Practice Clinician - Physician Assistant	Internal Medicine – Physician Assistant	12/02/2025	SMH Internal Medicine
Veronica Ruvo, MD	Teleradiology/Delegated (No Membership)	Radiology	12/04/2025	Real Radiology
Emma Schmidt, PA-C	Advanced Practice Clinician - Physician Assistant	Emergency Medicine	12/01/2025	SMH Emergency Medicine
Erin Strahan, PA-C	Advanced Practice Clinician - Physician Assistant	Internal Medicine – Physician Assistant	12/04/2025	SMH Internal Medicine
Tracy Wickersham-Frey, PAC	Advanced Practice Clinician - Physician Assistant	Medicine / Emergency Medicine	12/20/2025	SMH SameDay Health & Imaging / Emergency Medicine

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After review and discussion in Executive Session, Dr. Megan Ratterman, on behalf of the Medical Executive Committee and Credentials Committee recommends the following medical staff initial appointments and medical staff renewals for consideration and approval.

Tobie Alsup moved to approve the medical staff initial appointments and renewals as presented. Rob Johnson seconded the motion. Motion carries.

ADMINISTRATION REPORT

One Big Beautiful Bill Act (OBBBA) /Rural Health Transformation fund – Mike recaps that there is \$50 billion dollars that the federal government will allocate to states, with \$500 million dollars allocated per state over a five year period. There is another \$25 billion dollars to tap into areas of need as well. A grant application is required to be submitted by each state in order to be considered to receive funds. The State of Wyoming wrote a grant with input received from folks from across the state, outlining priorities. The grant was submitted to the government on November 4, 2025 and we are waiting to see if anything comes of it. There is no certainty that we will receive the funds, or how they would be accessed. SMH is not counting on receiving funds, and we will continue to implement our strategic priorities. There is no firm timeline to report to the board on when or if funds will be available.

Jenifer Shassetz congratulates Mike as SMH was recognized by Newsweek as being named one of America's Best-in-State Hospitals for the third year in a row. This is based on quality of care, patient satisfaction, and reputation of our organization.

Community Forums - Mike has held multiple staff and community forums regarding a potential affiliation with Billings Clinic. The forums are going well with good questions and discussion; and he is receiving lots of support around the concept. Mike has been on Public Pulse, has met with the county commissioners individually as well as at a public meeting, met with our representatives and all but one legislator. There have been five community forums, and we will have a meeting open to the YMCA membership tomorrow, with four more opportunities for the public in the first two weeks of December to attend (12/2, 12/4, 12/9 and 12/11). Mike appreciates that the board members and his leadership team that have been attending the various meetings.

Mike mentions that after an employee forum, he received the kindest email from our med-surg manager about our organization and support for moving forward. This is a big deal for the community and the organization, and having support of the people that do the work and fulfill our mission is appreciated.

Affiliation Discussion - Mike reviewed with the attendees of the board meeting, the current model and makeup of our organization and the proposed makeup and model if the affiliation with Billings Clinic were to happen. There are a number of things that need to happen before this would become reality, with CMS requirements being met, SMH board approval, the SMH board's recommendation to the Board of County Commissioners, and the commissioner's final approval. The intent is to remain a memorial hospital with local control and decision making.

Affiliation Terms Discussion – SMH has executed a terms sheet with Billings Clinic. This has been shared with the Board of County Commissioners as well. The term sheet being reviewed was put together by SMH attorneys and Billings Clinic attorneys jointly. This non-binding agreement details what we are doing, and that Sheridan Memorial Hospital would hold super majority as outlined in the Governance section of the agreement.

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FINANCE

Financial Statements - Anthony Spiegelberg, committee chair notes that due to a number of circumstances, there is no report on the October financials, and will be reported at next month's meeting. The finance committee meeting was focused on the audit results presented by CliftonLarsonAllen (CLA).

FY2025 Audit Presentation by CLA (Action) - Dan Deyle the principal with CLA and Mark Will, audit manager presents to the board the audit results for FY2025. Dan states that it has been a pleasure to work with Nathan and our finance team the last couple of months and he appreciates all of their work. This report will provide the overall audit results and address required communication.

SMH has another successful audit and CLA is proposing an unmodified opinion, with no proposed audit adjustments identified, which is the highest level of assurance in knowing that the numbers are accurate and free of misstatement. There is a delay with the single audit due to the government shutdown, resulting in a delay in providing SMH a clean unmodified management letter stating there are no material weaknesses or deficiencies with the internal controls in place.

Anytime there are federal funds disbursed over \$750,000 dollars, a single audit is required. The single audit performed is to make sure that the disbursements are approved and appropriate. There were no findings on the internal controls in place on the single audit. Again, CLA is delayed in issuance of the final requirements of the audit due to the government shutdown. If there are any modifications, those changes will be brought back to the board. Assuming there are no changes in the compliance supplement, the final unmodified management letter and audit will be issued.

Dan gave an overview on the required communication for governance, relevant to CLA's opinion around a clean unmodified opinion and government auditing standards. There are no audit adjustments; there was one subsequent event that is required to be reported since the final audit has not been issued relevant to the 55% purchase of the surgery center with no concerns noted, and internal controls are in place with no weaknesses or deficiencies noted.

Anthony Spiegelberg, on behalf of the finance committee, motions to accept the proposed audit results as presented. Jenifer Shassetz seconded the motion. Motion carries.

Wilson Memorial Trust IMA (Action) – The Tip and Aida Wilson Memorial Trust earns income and the income is designated to go to Sheridan Memorial Hospital to use for capital improvements. The resolution is allowing the CFO to execute the necessary agreement of the trust to request disbursements, and to acknowledge that the monies will be used as intended. A resolution will be executed annually in order to receive the funds, at the request of the financial institution where the trust is held. Anthony Spiegelberg motions to approve the resolution as presented. Jenifer Shassetz seconds the motion. Motion carries.

FOUNDATION REPORT

Cody Sinclair reports that Tonya Carlson, executive director of Green House and Cathy Bealer, CNO made a compelling case to the Foundation board about the need to provide a security system at Green House, for serving elders with dementia or those that have a tendency to wander. With this safety feature in place, we will be able to safely increase the population to serve those patients. The Foundation board immediately approved their request for this security feature.

There is approximately \$115,000 remaining of the \$8.12 million dollar Growing for You campaign goal. There is a match, but Cody is still finalizing the details before he can share any additional information. The Employee Partner breakfast will be on Wednesday, December 10, where our employee partners can vote on

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where the funds will be spent. The annual Trees of Love will be on Sunday, December 7. Everyone is encourage to attend as this is a great way to kick off the holiday season with music and beverages.

BUILDING COMMITTEE REPORT

Cody Sinclair reports that Jordan Lentz continues to do an incredible job in keeping our projects moving forward and on / or under budget. The EmPATH project is ahead of schedule and under budget. The WCC pharmacy project will be begin soon, with the air handler being ordered in the coming weeks. The MRI project has been completed and came in under budget, and staff appreciate this new equipment. The OR locker room is complete and was on budget.

Jenifer states that with the power outage last week, the board appreciated Mike's updates and that the new generator worked as intended. Teams handled the outage and the back up systems worked well. Some inpatient areas didn't realize there was a power failure as they were able to stay operational, with red outlets being utilized. Efforts made to move vaccines and anything that could be damaged or destroyed were taken care of immediatly. The generators worked as intended in powering essential equipment.

OTHER BUSINESS

None.

EXECUTIVE SESSION

Jenifer Shassetz motioned to adjourn General Session and go into Executive Session at 4:56 p.m. Rob Johnson seconded the motion. Motion carries.

General session reconvened at 5:07 p.m. to address medical staff credentialing. Please see above under the Medical Staff Report for action taken.

ADJOURNMENT

With no further matters to come before the board, Jenifer Shassetz motioned to adjourn the meeting at 5:07 p.m. Anthony Spiegelberg seconded the motion. Motion carries with no additional action taken.

Patty Forister, Recorder

Ron Mischke, Secretary