



**BOARD OF TRUSTEES
MARCH MEETING MINUTES
Wednesday, March 25, 2026 4:00 P.M.**

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

MEMBERS ABSENT:

OTHERS PRESENT:

Mike McCafferty, Dr. Megan Ratterman, Dr. Sierra Gross, Nathan Stutte, Joe Wright, Cody Sinclair, Tom Klepperich, Tommi Ritterbusch, Tenille Straley, Sharon Krueger, Bryan Opitz, Hailey Dimitroff, Ann Aksamit, Dr. Schamber, Robbi Morris, Angel Oliver, Megan Ripley, Liz Dearcorn, Jasmine Martinez, Brent Maurhoff, Amy Ligocki, Sean Bonnet, Nina Custis, Jessica Kaminsky, Jeanne Brooks, Bryanna Schiller, Austin Tromble, Cindy Eppe, Grace Stump, Sarah Doty, Korissa Duff, 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

None.

APPROVAL OF AGENDA AND MINUTES

Mike McCafferty asked to revise the agenda in the following manner: Executive Session add Legal In General Session under Administration – the Resolution to Explore Cost Reimbursement and Critical Access Designation is no longer an action item, but information only; add addition of Top 20 Hospital recognition. And under Quality, addition of the Safety Awards of an individual and department. With these changes, Anthony Spiegelberg motioned to approve the revised agenda as presented. Kevin Kessner seconded the motion. Motion passes.

Kevin Kessner moves to approve the minutes of the board meeting held on February 25, 2026 as presented. Richard Garber seconded the motion, with Ron Mischke abstaining. Motion passes.

QUALITY COMMITTEE REPORT

Tommi Ritterbusch, Director of Quality and Specialty Services reports that the committee reviewed data relevant to moderate sedation, rapid responses and code blue reporting, restraint and seclusion data, inpatient and outpatient falls, patient wristband and medication scanning compliance, avoidable days, 30-day readmission rates, chart abstract and tracer activity, and patient safety in which the organization has a strong reporting culture. The HSOPS (hospital survey on patient safety culture) survey has concluded and the results will be shared at the next meeting.

Grace Stump, Regulatory and Safety Specialist reports that Darby Forister, Central Sterile Lead is awarded the 2026 Patient Safety Superstar recognition for her direct link to patient safety in an area which allows for zero margin of error and her proactive leadership. Surgical Services was recognized as the Department of Excellence in Patient Safety Award for their adaptation of key processes with improved patient outcomes, following the four big elements for the patient in their surgical journey.

PATIENT EXPERIENCE REPORT

Kelly Lieb, Director of Patient Care Continuum and Patient Experience reports that the Patient and Family Advisory Council (PFAC) met today along with members of the VOICE. The steering team has passed the torch to community member Laura Adams, to chair this committee. Laura's professional career was at Stanford and her love

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of Wyoming brought her back after her retirement. Thanks extended to Jenifer Shassetz’s leadership and to Ron Mischke for his ongoing support and leadership, showing how important this is for the hospital and community.

The committee heard reports and reviewed data relative to the pediatric group, respiratory therapy, spine center, rheumatology, audiology, cardiopulmonary rehab and Wyoming Rehab.

MEDICAL STAFF REPORT

Dr. Megan Ratterman, Chief of Staff states that work continues on the medical staff bylaws and presents the proposed amendments as outlined in the board packet. The goal is to be in alignment with Joint Commission standards regarding operative report essential documentation requirements. Kevin Kessner motioned to approve the amendments as presented. Ron Mischke seconded the motion. Motion passes.

Mike recognizes Dr. Schamber and Dr. Ratterman for their leadership, planning and work around the Sheridan County Medical Society Gala, which is a fundraiser for the medical society’s scholarship program. This is the fourth year of the gala and they did a great job, raising considerable funds, in which three \$5,000 scholarships will be awarded. The scholarship is for graduating high school students interested in healthcare

Dr. Ratterman addressed credentialing in executive. On behalf of the Medical Executive Committee and Credentialing Committee, Dr. Ratterman presents the following for consideration.

MEDICAL STAFF INITIAL APPOINTMENTS (ACTION)

Name	Category	Specialty	Affiliated Organization
Sean Chang, MD	Teleradiology/Delegated (No Membership)	Radiology	Real Radiology
Andrew Ciccarelli, MD	Teleradiology/Delegated (No Membership)	Radiology	Real Radiology
Oded Greenberg, MD	Teleradiology/Delegated (No Membership)	Radiology	Real Radiology
Ron Pearson, MD	Teleradiology/Delegated (No Membership)	Radiology	Real Radiology
Jonathan Reed, MD	Teleradiology/Delegated (No Membership)	Radiology	Real Radiology
Dillenia Rosica, MD	Teleradiology/Delegated (No Membership)	Radiology	Real Radiology
Alice Shaw, FNP-BC	Advanced Practice Clinician	Nurse Practitioner	SMH-SameDay Health & Imaging
Randall Snyder III, MD	Teleradiology/Delegated (No Membership)	Radiology	Real Radiology

MEDICAL STAFF RENEWALS (ACTION)

Name	Category	Specialty
Loren P. Budge, MD	Consulting -No Admit w/o Active Physician cosign	Cardiology
Natalie McClanahan, FNP-C	Locums (Privileges Only - No Membership)	SameDay Health & Imaging
Patricia Rondain, MD	Telemedicine/Delegated (No Membership)	Infectious Disease

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Anthony Spiegelberg moved to approve the above appointments and renewals as presented. Rob Johnson seconded the motion. Motion passes.

ADMINISTRATION REPORT

Top 20 Recognition – SMH was recently named as one of the top 20 rural and community hospitals in the country. This is the fourth time SMH has been recognized in the top 20 since 2016. The National Rural Health Association announced the 20 highest-ranked prospective payment system hospitals in the country based on an evaluation by the Chartis Center for Rural Health, which analyzes approximately 800 healthcare facilities using a performance index. The factors are based on eight indices – inpatient market share, outpatient market share, quality, outcomes, patient perspective, cost, charge and finance. Mike thanks Tommi Ritterbusch and Kelly Lieb for the outstanding work done with the board quality committee and patient experience committee. They have taken something that wasn't very strong and have made both programs outstanding. SMH has been named by Chartis in the Top 100 hospitals 10 times since 2016. Mike thanks everyone for the great work done in helping SMH achieve this recognition.

Environmental Safety / Security Officer Authority (Action) – This action was taken in September 2025 in which Cody Sinclair was named as the safety officer with the departure of Rob Forister. This is an annual requirement identifying Cody's authority for another year in this position. Ron Mischke motioned to approved Cody Sinclair as the Environmental Safety and Security Officer for 2026/2027. Tobie Alsup seconds the motion. Motion passes.

Presentation and Resolution to Explore Cost Reimbursement and Critical Access Designation – As mentioned at the beginning of the meeting, this has been amended to information only and no action will be taken. There is a presentation around cost reimbursement and critical access designation and what that looks like for SMH, what the impact would be if we were to make this change. Research was done by a third party, as well as internally, and there have been forums to our medical staff and employees. Additional forums for our employees will happen next week with a high level perspective provided. With a change to a critical access designation there will be continued growth, but our inpatient census cannot go over 25 beds. That is not to say we can't have more than 25 beds filled, but it will be dependent on how a patient is classified, such as an observation status. Consideration of cost reimbursement allows us to continue doing what we are doing and allow for growth. If we do not do something the hospital will be challenged to continue as is. We have opportunity to refine processes and look at the efficiency into our outpatient services. SMH is committed to be independent and not rely on others, reinvest in our people, facility and technology, as well as being a great community partner.

Resolution Appointing Sheridan Health Board (Action) – With an affiliation with Billings Clinic, a new 501C3 entity will be formed along with its own board of directors. The attached resolution for consideration appoints an initial Sheridan Health Board of Directors, consisting of five (5) directors from Sheridan County. Two (2) members will be appointed by Billings Clinic. Jen Shassetz states that the five members nominated are:

Jenifer Shassetz for a 3-year term
Kevin Kessner for a 3-year term
Dr. Hannah Hall for a 2-year term
Anthony Spiegelberg for a 1-year term
Ron Mischke for a 1-year term

Ron Mischke motions to approve the nominations as presented. Richard Garber seconds the motion. Motion passes.

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FINANCE

Anthony Spiegelberg, Finance Chair states that the financial performance continues to be challenged. There were better collection efforts last month, generating more cash. There have been good discussions on options to improve performance with cost reimbursement. Nathan Stutte, CFO states that there was an operational loss, and gross revenues were close to what was forecasted in February. The payer mix was better, and there continues to be challenges on high labor costs driven by shortages. We are seeing a different trend in employee health, as the benefit costs have not dropped which it normally does around this time of year. There is favorable performance in revenue cycle. We are looking at operation efficiencies for improvement.

FOUNDATION REPORT

Richard Garber reports that the Foundation board approved funding for an echo bed, 4 vital carts and 4 anesthesia machines. The hospital Auxiliary did a challenge match to the Foundation and provided \$20,000 towards the echo bed and vital carts purchased.

BUILDING COMMITTEE REPORT

Cody Sinclair, CDO reports the work continues on the interior punch list for the EmPATH unit. Work on the exterior punch list and landscaping to begin soon. Final purchasing of furnishings and art work is ongoing. The WCC pharmacy had the state inspection and everything is looking good with a potential completion the week of April 8. Green House Living elopement system has been completed. The MRI was removed from the ortho office location. Phase 2 of the emergency department pricing is being reviewed. The master planning initiative has begun as we look to the future.

OTHER BUSINESS

None.

EXECUTIVE SESSION

Anthony Spiegelberg motions to adjourn General Session to go into Executive Session at 5:03 p.m. Rob Johnson seconded the motion. Motion passes.

General session reconvened at 5:44 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, Ron Mischke motions to adjourn the meeting. Rob Johnson seconds the motion. Motion passes with the meeting adjourned at 5:45 p.m. with no additional action taken.

Patty Forister, Recorder

Ron Mischke, Secretary