

A meeting of the McAlester Regional Health Center Authority was held at 04:00 PM on Wednesday, September 03, 2025, at McAlester Regional Health Center in the Administration Board Room. Public notice, set forth there on the day, time, and place for this regular meeting, was delivered to the office of the City Clerk at 10:02 AM on August 28, 2025.

TRUSTEES PRESENT: Christopher Beene, MD ~ Marti Fields ~ Johnny Zellmer, MD (arrived at 4:07) ~ Brent Grilliot ~ Damon Mascoto ~ Janet Wansick.

TRUSTEES ABSENT: Sayer Brenner ~ James Bland

HOSPITAL STAFF: Julie Powell ~ Sonya Stone ~ Scott Yoder ~ Lucy Muller ~ Destanie Wilson ~ Matthew Sims, DO

OTHER ATTENDEES: Belinda Kelley ~ Laurie Reed

CALL TO ORDER: Christopher Beene, MD, Chairman, called the meeting to order at 4:00 PM.

Consent Agenda:

1. MRHCA Board of Trustees Minutes for August 06, 2025
2. September 2025 Agreement Log
3. Revised MRHC Foundation Bylaws
4. Credentialing & Privileging Appointment List.

Consideration & Discussion of Appointment: Provisional

1. Rylan Russell, DO ~ Emergency Medicine/OSU ~ One year
2. Alex Riggs, DO ~ Emergency Medicine/OSU ~ One year
3. Keithen Cast, DO ~ Emergency Medicine/OSU ~ One year
4. Gershon Koshy, DO ~ Cardiology/OSU ~ One year

Consideration & Discussion of Advancement (Active):

1. Fred Crape, DO ~ General Surgery ~ One year (Active)
2. Brian Blick, MD ~ Anesthesiology ~ One year (Active)
3. Mark Anderson, MD ~ Cardiology/OHH ~ One year (Allied Health)

Consideration & Discussion of Reappointment (Active):

1. Jonathan Rohloff, DO ~ Family Medicine/Critical Care ~ Two years (Active).

Consideration & Discussion of Reappointment (Active Affiliate):

1. Emory Hilton ~ Podiatry ~ Two years (Active)

Consideration & Discussion of Provisional Telemedicine Distant Site Credentialing by (Proxy):

1. Maryann Ro, MD ~ Telemedicine/Radiology/RadPartners ~ One year (Provisional)

Consideration & Discussion of Resignations (Acknowledge & Accept):

1. Taboh Sieni, MD ~ 07/31/25

A motion was made (Fields) and seconded (Grilliot) to approve items 1, 2, 3 & 4 of the Consent Agenda as presented. The vote was taken as follows: Aye: Marti Fields, Brent Grilliot, Janet Wansick, Damon Mascoto, and Christopher Beene, MD. Nay: None. Absent: Sayer Brenner, James Bland, Johnny Zellmer, MD. Abstain: None. Chairman Beene declared the motion carried.

Finance Committee Report ~ James Bland, Chairman

1. **Consideration and discussion of July 2025 Financial Reports:** Ms. Destanie Wilson provided an overview of the July 2025 Financial Reports. She reported that the revenue for July exceeded both prior years, presenting a positive start to the new fiscal year. The inpatient discharges at 300 continue to present a positive trend from prior years, and the Rehab census had an average of 9.0 patients/days, exceeding the prior year run rate of 6.8. The ER volumes exceeded both prior years significantly, with 11.7% of patients being admitted. Continued improvements in the Emergency Department are showing a positive trend. Surgery volumes in July at 368 were again an improvement over the prior year. The Cath Lab also had a very strong month with 50 procedures. Clinic visits continue to lag prior years but have exceeded the current year budget; however, McAlester Family Practice and Eufaula Urgent Care both had a strong month. Focus on Primary Care continues

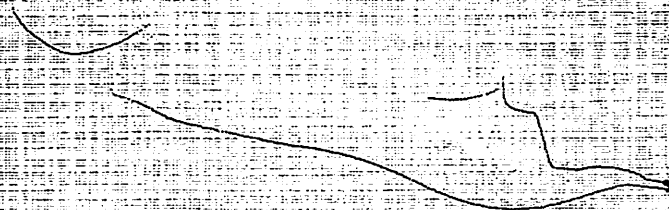
to be a priority. Ms. Wilson stated that a focus on the reduction of aging accounts and reducing contract labor staff continues. The supply expense control efforts have started the new fiscal year very well and will continue throughout the year. Ms. Wilson reported that July collections were the largest since 2022, and improvement efforts are beginning to show, with a decrease in bad debt expense expected in the coming months. The Days cash on hand dropped in July due to not receiving the expected SHOPP Managed Care funds that the Federal Government held. She added that the funds were received in August. Strong collections in July allowed Accounts Payable balances to decrease from the prior month for the third month in a row. A **motion** was made (Wansick) and seconded (Mascoto) to approve the July 2025 Finance Reports as presented. The vote was taken as follows: Aye: Janet Wansick, Damon Mascoto, Brent Grilliot, Marti Fields, Johnny Zellmer, MD, and Christopher Beene, MD. Nay: None. Absent: Sayer Brenner, James Bland. Abstain: None. Chairman Beene declared the **motion** carried.

2. **Consideration and discussion to approve a Resolution authorizing Destanie Wilson to have signature authority for bank accounts or other financial institutions with which the Authority has a banking relationship, replacing Cheryl Perry:** Ms. Destanie Wilson reported that Julie Powell has signature authority on the accounts, but there needs to be two. With the departure of Cheryl Perry, CFO, Ms. Wilson recommended that she be given signature authority as Executive Director of Finance in place of Ms. Perry. A motion was made (Fields) and seconded (Mascoto) to approve the Resolution authorizing Destanie Wilson to have signature authority for bank accounts or other financial institutions with which the Authority has a banking relationship, replacing Cheryl Perry as presented. The vote was taken as follows: Aye: Marti Fields, Damon Mascoto, Janet Wansick, Johnny Zellmer, MD, Brent Grilliot, and Christopher Beene, MD. Nay: None. Absent: Sayer Brenner, James Bland. Abstain: None. Chairman Beene declared the **motion** carried.

Strategic Plan Update 1.2A Cyber Security: Mr. Scott Yoder reported that there is a surge in social engineering attacks, especially voice phishing, which are growing in sophistication, frequency, and scale. A.I. tools are being exploited to create convincing scams and bypass defenses. Security must evolve to match the adaptive nature of threats, and healthcare remains a top target for cyberattacks. In the healthcare world, A.I. drives attacks that can automate reconnaissance and breach strategies. Vulnerabilities in existing systems can be exploited at scale, and increased complexity leads to a higher risk of data exposure and downtime. Risks to a business include financial loss, legal exposure, and reputational harm. Mr. Yoder shared what the hospital has implemented for cybersecurity, with staff awareness campaigns at the top of the list. He also shared what the priorities are for Fiscal Year 2026. He stated that Leadership sets the tone from the top, making cybersecurity a business priority. He added that Board oversight is to understand evolving cyber risks. Additional discussion occurred regarding obligations to obtain Cybersecurity insurance.

Board QI Committee Report: On behalf of Ms. Whitney Hull, Ms. Julie Powell provided the Board QI report from the meeting held on Tuesday, August 26, 2025. She reported that discussions were centered around the Quality Management System (QMS) Scorecard and corrective actions for the recent DNV survey. A notable win on the QMS Scorecard was medication reconciliation. She stated the hospital made great strides in compliance and obtaining the goals that were established. This is the first time providers scored 100% in the area of Medication reconciliation. She reported that Compliance and key indicators in quality metrics are ongoing and trending favorably in most areas. The areas where opportunity is observed are not concerning and have corrective actions in place. There are some throughput challenges in the Emergency Room, primarily due to wait times for EMS transport and wait times for beds, which she added is a good problem to have. She stated the ER staff does a very good job of communicating with the EMS providers to obtain throughput as efficiently as possible. Ms. Powell reported that all the non-conformity/ conditional level findings during a recent DNV survey are being addressed, and corrective actions are trending favorably, with a primary focus on the fire doors that are on track for completion by the established dates set by DNV. A Home Health & Hospice quality metric update was also provided. She reported that MRHC Home Health is trending above all their quality metrics except one. The exception is in Acute Care Hospitalizations. The goal set by Home Health Compare is 14.7% or lower, influenced by all area hospitals. MRHC Home Health is at 20% which leaves some opportunity for improvement. Home Health Compare is a CMS tool that allows consumers to view quality standings for all Home Health facilities. She stated this is a future metric that will affect reimbursement. She reported the Hospice average daily census is at 81.24, which is a decrease over the previous quarter; however, the acuity of patients is increasing, leading to fewer patient visits from the staff. Education and support are hot topics for the Hospice staff domain, and they are continually looking for ways to improve the volunteer provider base.

Chief of Staff Report: Dr. Matthew Sims reported that the Emergency Room (ER) seasonal volumes increased and are expected to trend upward into September. He stated there has been a higher acuity of patients coming through the ER, which is keeping the ICU full. The House Supervisors are doing an excellent job of shuffling beds, looking for opportunities to keep patients safely in the ER for a reasonable amount of time until a bed opens up on the floor. He stated the hospital has been on divert lately due to the lack of beds available. Dr. Sims reported that the OSU Cardiology Telemedicine program is proving to be successful and a great resource to consult and keep patients at this facility. He reported that Dr. Landon Stallings, an orthopedic surgeon from OSU, has joined MRHC and has been well-received by the patient population, ER, and the MRHC staff. He is treating sports medicine patients in the ER and



keeping that population local, which was not the case previously. Overall, MRHC is seeing a positive trend within our community and within our medical setting that is reflected in volumes and finances.

CEO Report: Ms. Julie Powell reported that the MRHC's new patient messaging platform, Patient Connect, is live. The new messaging system includes direct text messaging to patients with automated appointment reminders, confirmation responses, and even thank-you messages. The system is designed to personalize patient engagement with smoother communication, helping us to keep patients better informed. She added that this is an exciting feature that will help trend down patient no-show rates. Mr. Scott Yoder shared that another new system that is near go-live is Forward Advantage, a cloud faxing platform that will replace the current fax machines. This system will reduce the paper supply by eliminating the need to print off faxes, and approximately 100 printer leases can be eliminated. He stated he is excited about the cost savings to the hospital. Ms. Powell stated that there will be no difference on the provider side. The difference will be on the hospital's side with the monitoring of the faxes electronically and in real time. She shared that the hospital is over-the-top excited about this new system. Ms. Powell reported that the Cath Lab was inspected by the State and passed certification with no deficiencies. She reported that the Respiratory Therapy Department will no longer have a pulmonary function lab as of the end of October. The equipment has aged out, and the cost associated with replacing the equipment is more than the reimbursement opportunity to provide that service. She stated we will eliminate the service for now and re-evaluate in the future if needed. Ms. Lucy Muller reported that the Marketing Department is working on a video and social media campaigns to promote McAlester Bone and Joint Clinic, with a strong emphasis on promoting MRHC's orthopedic surgery services, supporting both Dr. Gannon and Dr. Stallings to drive continued growth and success. She added that HR is working with Marketing to create a TikTok campaign and a new 'Meet the Provider' series on the social media platform. Ms. Muller reported that the Foundation Team is working to secure a date for the upcoming MRHC Health Fair, possibly in November or January. Ms. Powell stated that the Foundation funded approximately \$360k toward capital needs for the hospital, \$10k towards 'Friends helping Friends', Thanksgiving turkeys for food baskets, and gifts for Hospice patients. She shared her appreciation to the Foundation for giving back to the hospital. Ms. Powell reported that Agency numbers since August 2024 have decreased by 52 contracts; however, with the increase in patient volume, there is still a need for some agency staffing. The Wellness Center census has increased by 18% following the pool and HVAC project completion. In closing, Ms. Powell reported that the Foundation will be receiving a donation from the 'Heart of Oklahoma Corvette Club.' A check presentation is planned for September 19, 2025, at 1:00 PM at the hospital.

Executive Session (25 O.S. § 307(C)) ~ Discussion and Potential Action ~ Christopher Beene, Chairman

A motion was made in public session at 4:45 PM by (Zellmer) and seconded by (Fields) to enter Executive Session. The vote was taken as follows: Aye: Johnny Zellmer, MD, Marti Fields, Brent Grilliot, Damon Mascoto, Janet Wansick, and Christopher Beene, MD. Nay: None. Absent: Sayer Brenner, James Bland. Abstain: None. Chairman Beene declared the motion carried.

Executive Session pursuant to 25 O.S. § 307(C)(11): "All nonprofit foundations, boards, bureaus, commissions, agencies, trusteeships, authorities, councils, committees, public trusts, task forces or study groups supported in whole or part by public funds or entrusted with the expenditure of public funds for purposes of conferring on matters pertaining to economic development, including the transfer of property, financing, or the creation of a proposal to entice a business to remain or to locate within their jurisdiction if public disclosure of the matter discussed would interfere with the development of products or services or if public disclosure would violate the confidentiality of the business."

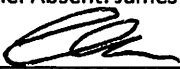
- Discuss financial forecasts and strategic planning related to the core healthcare services provided by MRHCA.

A motion was made at 5:15 PM by (Fields) and seconded by (Zellmer) to come out of the Executive Session. The vote was taken as follows: Aye: Marti Fields, Johnny Zellmer, MD, Janet Wansick, Damon Mascoto, Brent Grilliot, and Christopher Beene, MD. Nay: None. Absent: James Bland, Sayer Brenner. Abstain: None. Chairman Beene declared the motion carried.

Proposed vote to approve or disapprove any action regarding the financial forecasts and strategic planning related to the core healthcare services provided by MRHCA:

ACTION: None

Adjournment: A motion was made (Grilliot) and seconded (Wansick) to adjourn the meeting at 5:16 PM. The vote was taken as follows: Aye: Brent Grilliot, Janet Wansick, Damon Mascoto, Marti Fields, Johnny Zellmer, MD, and Christopher Beene, MD. Nay: None. Absent: James Bland, Sayer Brenner. Abstain: None. Chairman Beene declared the motion carried.



Christopher Beene, MD ~ Chairman
/sds



James Bland ~ Vice-Chairman