

A meeting of the McAlester Regional Health Center Authority was held at 04:00 PM on Wednesday, March 04, 2026, 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 09:00 AM on March 03, 2026.

TRUSTEES PRESENT: Christopher Beene, MD ~ Marti Fields ~ Johnny Zellmer, MD ~ Brent Grilliot ~ Janet Wansick ~ James Bland ~ Damon Mascoto.

TRUSTEES ABSENT: None

HOSPITAL STAFF: Julie Powell ~ Sonya Stone ~ Scott Yoder ~ Lucy Muller ~ Destanie Wilson ~ Whitney Hull ~ Dr. Jonathan Rohloff ~ Ben Capers.

OTHER ATTENDEES: Laurie Reed, St. Francis, Belinda Hill

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 February 04, 2026
2. Respiratory Therapy Medical Agreement for Dr. David Auld
3. Credentialing and Privileging Appointments as follows:

Consideration and Approval of Appointment for Provisional:

1. Karen Siren, MD ~ Emergency Medicine ~ One Year

Consideration and Approval of Reappointment: (Active)

1. Michael Gebetsberger, MD ~ Internal Medicine/Critical Care ~ Two years

Consideration and Approval of Reappointment (Allied Health)

1. Jennifer Brewer, APRN ~ Nurse Practitioner/Cardiology ~ Two years

Consideration and Approval of Advancement: (Affiliate Staff)

1. Caleb Smith, DDS ~ Dentistry ~ One year

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

2026 Marketing Reports: Mr. Ben Capers presented the 2026 MRHC Marketing Calendar. He stated that the calendar is continually evolving as opportunities arise. The monthly activities include provider outreach, newspaper articles, 'Beyond the Exam Room,' social media, and the Chamber of Commerce, 'Coffee With Commerce' outreach. He also stated that Marketing will be hosting Lunch & Learn sessions for seniors at the Stipe Center on topics that will appeal to them. Mr. Capers reported May is the busiest month with the upcoming MRHC Foundation Gala, 'Dancing With The McAlester Stars', and the MRHC Foundation Golf Tournament. The Foundation will also host the first annual Pickleball Tournament in July, which will coincide with the Dancing Rabbit Music Festival, and the annual Foundation Health Fair in November. Mr. Capers stated he utilizes fliers, word of mouth, and social media to advertise events. Ms. Julie Powell reported that Marketing has incorporated suggestions from the Board into their Marketing outreach activities. Mr. Capers reported that the proceeds from the Foundation events go toward equipment and special projects for MRHC. A discussion took place regarding the Foundation's support for the hospital's capital needs, as well as the plans established for providing future assistance.

Consideration and discussion to approve the MRHC Board of Trustees, Officers, and Committee Assignments: Dr. Christopher Beene reported having discussions with the Board member who mutually agreed to serve on the proposed committees and officer positions. A motion was made (Bland) and seconded (Mascoto) to approve the MRHC Board of Trustees committee assignments and officer positions as presented. The vote was taken as follows: **Aye:** James Bland, Damon Mascoto, Brent Grilliot, Marti Fields, Johnny Zellmer, MD, Janet Wansick, and Christopher Beene, MD. **Nay:** None. **Absent:** None. **Abstain:** None. Chairman Beene declared the motion carried.

Consideration and discussion of January 2025 Financial Reports: Ms. Destanie Wilson provided an overview of the January 2026 Financial Reports. The January operating margin was another improvement, continuing forward momentum this fiscal year. Although the hospital is pleased to see continued improvements in its operating margin, there are still

significant opportunities for improvement, and work is ongoing to address them daily. January 2026 EBITDA showed an income of \$689,992, with an operating income of \$153,890 and a total income of \$276,887. Fiscal Year 2026 has an EBITDA loss of \$(302,345). January marked another step forward in operating performance, continuing the positive momentum seen throughout this fiscal year. Patient volumes remained strong across multiple service lines, demonstrating sustained demand across the continuum of care and placing even more emphasis on the importance of revenue cycle improvements to ensure long term financial sustainability. Expense Management remains a key priority. Overall, January's results reflect encouraging operational strength, disciplined financial management, and steady progress toward continued improvement in the months ahead.

A motion was made (Zellmer) and seconded (Wansick) to approve the January 2026 Financial Report as presented. The vote was taken as follows: **Aye:** Johnny Zellmer, MD, Janet Wansick, Marti Fields, Damon Mascoto, Brent Grilliot, James Bland, and Christopher Beene, MD. **Nay:** None. **Absent:** None. **Abstain:** None. Chairman Beene declared the motion carried.

Board QI Committee Report: Ms. Whitney Hull reported that the Board QI Committee met on February 24, 2026. The Quality Management System (QMS) Scorecards were discussed. She reported that medication reconciliation continues to improve, compliance with the titration documentation protocol, which was a DNV finding last year, is now 100% compliant, restraint documentation was 100% for the third month in a row, and pain management documentation continues to meet goals. The areas of continued improvement include medical necessity screening performed within 24 hours of admission, in which Case Management is working on processes to assure the proper placement of patients, and policies that are overdue for review.

Ms. Hull reported that the Q4 Star Rating Scorecard was reviewed, clarifying that the information reflects real-time internal star-rating metrics rather than CMS-reported data. There was a significant improvement in compliance with the severe sepsis and septic shock bundle. Influenza vaccinations for healthcare workers was 100%, appropriate follow-up documentation for colonoscopies was 100%, mortality rates were significantly below goal, there were zero patient safety indicators, and zero hospital-acquired infections. Areas of continued improvement included ER left without being seen, which was slightly above goal, and the focus of an ongoing corrective action project. AMI readmissions and COPD readmissions bumped slightly up in Q4, suspected to be due to a lower denominator in respiratory diagnosis. The Readmission Committee is following to monitor the trend. The use of medical imaging-abdominal CT's with and without contrast, showed an increased percentage. The Imaging Department is working on a process that prompts providers to confirm whether they want contrast or do not want contrast on the CT order.

Ms. Hull reported that the Hospice Quality Report was discussed for Q3 and Q4. Board QI approved the SE Hospice annual packet to include policies, annual/quarterly/monthly quality metrics, and education plan. Discussion occurred regarding the Q4 average daily census of 68.9, which was lower than normal. Patients who were assessed and discharged to Home Health or Home Care due to their length of stay falling outside the normal range contributed to the lower census. Hospice continues to see consultations, referrals, and new admissions come in. She reported there was an improvement in volunteer hours and an improvement in inputting infections into the infection log per the quality project that is currently 100%. Hospice continues to work on the average skilled hours per patient day in the last 7 days of life, to include modalities for RN, Social Work, and Chaplain. The primary focus continues to make sure Hospice is hitting these goals and assuring patients and families are getting the support they need.

Ms. Hull reported the Home Health Quarterly Summary for Q3, and Q4 was also discussed. She reported that the Home Health Annual Quality Improvement Schedule was approved by the Board QI Committee. Home Health continues to work on decreasing readmissions back to acute care, however there is an improvement in ER use without hospitalization. Ms. Hull reported that Home Health does have high acuity patients; however, there is a focus on finding the common denominators for patient readmissions, determining if there is a real need for readmission, and what Home Health could do better.

Ms. Hull reported that LifeCare Accreditation Support will perform a Mock Survey on March 24-25, 2026. A heavy focus will be directed towards Life Safety and Facilities to ensure we are meeting all regulatory requirements. She stated this will be a fun survey to learn, correct, and improve, while not worrying about official findings at the end of the survey.

Personnel Committee Report:

- A. **Provider Recruitment Plan:** Ms. Lucy Muller presented a 12-month Comprehensive Provider Recruitment Plan. She shared specialties that are a recruitment focus. She listed the recruitment challenges as a shortage of skilled candidates, increasing competition, candidate expectations, and spouse challenges. The plan includes setting clear expectations that outline six Phases. Phase 1: Building the Sourcing Engine, Phase 2: Active Outreach, Phase 3: In-Person Recruitment, Phase 4: Spouse & Family Strategy, Phase 5: Candidate Experience, and Phase 6: Tracking & Decision Speed. Ms. Muller described a 90-day outlook, the proposed budget, and monthly KPIs.

- B. **Consideration and discussion of an updated CEO Job Description:** Ms. Lucy Muller presented the updated CEO Job Description for review. She stated DNV requires the CEO Job Description to be reviewed by the Board every two years. Following a review, there were no recommended changes. A motion was made (Bland) and seconded (Zellmer) to approve the updated CEO report as presented. The vote was taken as follows: **Aye:** James Bland, Johnny Zellmer, MD, Brent Grilloit, Damon Mascoto, Marti Fields, Janet Wansick, and Christopher Beene, MD. **Nay:** None. **Absent:** None. **Abstain:** None. Chairman Beene declared the motion carried.

Chief of Staff Report: Dr. Rohloff reported that most of this month's focus is centered around the Residents. He added this is the time when our Residents can shine. The Residency Program submitted its list of potential Medical Students to match here and to join the Residency Program. March 17-19 is Match week that leads up to a scramble where all candidates become available, and more interviews occur if the program still has open positions. He reported that the Medical Students of today think very differently. They have concerns about work-life balance, but MRHC is unique in what is offered because we are not a normal Family Residency setting. When a Resident comes in not knowing what they want to do, it can be very confusing when there are so many different offerings, when they are expecting an outpatient Family Medicine setting. He reported that a Resident Wellness Retreat is planned for the Residents to help them all come together as a group before the new Medical Students arrive. Dr. Rohloff reported that he had an opportunity to sit down with the OSU Representatives for the Medical Students. He stated the feedback was very positive. They are very happy with how the MRHC staff have been interacting with the Residents. Dr. Rohloff reported that efforts are being made to reinstitute surgeons teaching and working with the Medical Students. He stated he is still hearing good things about the hospital from patients. Rehab is still struggling with the Managed Insurance Programs and is being more selective with referrals.

CEO Report: Ms. Julie Powell reported that agency staff numbers are higher than desired. HR, the Director of Radiology, and Nurse Managers are meeting to develop a plan to reduce the numbers. The possibility exists to replace the agency staff with new nursing graduates. An agreement was signed with Lifecare Purchasing Group (LPG) to increase the supplies tier. Since January 1, 2026, LPG reported a \$128K cost savings to MRHC from moving to the more advanced tier level. She or Destanie Wilson will continue to report monthly as it pertains to this LPG agreement. Ms. Powell reported reaching out to a Pain Management Clinic. The Clinic was pleased with the office space, and there is an opportunity to provide Pain Management Services here at MRHC. The Clinic would like to ramp up slowly to see what the volume in this community looks like. Ms. Powell also reported having meetings with different cardiology individuals as it relates to the cardiology needs at MRHC. She added that she is looking for programs that want to invest in MRHC and provide us with cardiology talents. She stated MRHC is actively working with one vendor; however, she would like to determine if there are additional opportunities. Ms. Powell reported receiving a 90-day notice of termination from the OSU Emergency Department Group. MRHC has 90 days to identify an Emergency Room Group to provide the quality of care the hospital is accustomed to receiving. She reported having meetings with three different groups and believes MRHC will have a replacement soon, but there may be a cost impact because of the rural environment.

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

A motion was made in public session at 5:22 PM by (Fields) and seconded (Wansick) to enter Executive Session. The vote was taken as follows: **Aye:** Marti Fields, Janet Wansick, Brent Grilloit, James Bland, Johnny Zellmer, MD, Damon Mascoto, and Christopher Beene, MD. **Nay:** None. **Absent:** None. **Abstain:** None. Chairman Beene declared the motion carried.

25 O.S. § 307(B)(1): "Discussing the employment, hiring, appointment, promotion, demotion, disciplining, or resignation of any individual salaried public officer or employee."

1. Discussion regarding employment matters related to the Chief Executive Officer position.

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."

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

A motion was made at 6:55 PM by (Zellmer) and seconded by (Fields) to come out of the Executive Session. The vote was taken as follows: **Aye,** Johnny Zellmer, MD, Marti Fields, James Bland, Janet Wansick, Damon Mascoto, Brent Grilloit, and Christopher Beene, MD. **Nay:** None. **Absent:** None. **Abstain:** None. Chairman Beene declared the motion carried.

ACTION FOLLOWING EXECUTIVE SESSION:

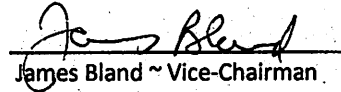
A motion was made (Grilliot) and seconded (Mascoto) to approve the proposed Bonus Structure for Leaders as presented in executive session. The vote was taken as follows: **Aye:** Brent Grilliot, Damon Mascoto, James Bland, Johnny Zellmer, MD, Janet Wansick, Marti Fields, and Christopher Beene, MD. **Nay:** None. **Absent:** None. **Abstain:** None. Chairman Beene declared the motion carried.

A motion was made (Bland) and seconded (Wansick) to offer Julie Powell the full-time President/CEO Employment Agreement as presented in executive session. The vote was taken as follows: **Aye:** James Bland, Janet Wansick, Johnny Zellmer, MD, Damon Mascoto, Marti Fields, Brent Grilliot, and Christopher Beene, MD. **Nay:** None. **Absent:** None. **Abstain:** None. Chairman Beene declared the motion carried.

Adjournment: A motion was made (Zellmer) and seconded (Grilliot) to adjourn the meeting at 6:56 PM. The vote was taken as follows: **Aye:** Johnny Zellmer, MD, Brent Grilliot, James Bland, Damon Mascoto, Marti Fields, Janet Wansick, and Christopher Beene, MD. **Nay:** None. **Absent:** None. **Abstain:** None. Chairman Beene declared the motion carried.



Christopher Beene, MD ~ Chairman


James Bland ~ Vice-Chairman

/sds