



**Board of Directors Special Meeting  
8.28.2025  
MINUTES**

Location: 120 Bristlecone Dr., Fort Collins, CO 80524 or [Zoom](#)

Date: Thursday, August 28, 2025

Time: 5:30pm

| <b>Board Members Present:</b>              | <b>Also Present:</b>  |
|--|---|
| Erin Hottenstein, Board President          | Nick Hartman- Hoffman, Parker, Wilson & Carberry, P.C       |
| Lee Thielen, Board Vice President          | Courtney Green Acting Interim Executive Director            |
| Julie Kunce Field, JD, Treasurer           | Jessica Holmes, YPTC  |
| Sarah Hathcock, Secretary                  | Misty Manchester-Director of People and Business Operations |
| John McKay, Liaison to PVHS/UCHealth North | Julie Kenney-HR Manager                                     |
|  | Jacque Ferrero-Interim Executive Assistant                  |
|  | Rachel Larson-Interim Digital Media Specialist              |
|  | Katie Wheeler-Compliance Officer                            |
|  | Cassi Niedziela-Health Equity Strategist                    |

### **I. Call to Order**

- a. Roll Call Board of Directors  
With a quorum present, the meeting was called to order at 5:33 pm by Board President, Erin Hottenstein.
- b. Welcome Guests & Attendees
- c. Conflict of Interest Statement  
No conflicts were reported.
- d. Approval of Agenda  
*Motion: To approve the August 28<sup>th</sup> meeting agenda, as presented.*  
*Moved by Director McKay, seconded by Director Hathcock, Director Field abstains, motion passes.*

### **II. PUBLIC COMMENT**

No public comment.

### **III. Presentations**

**Health Equity Strategic Plan Presentation**

Cassi Niedziela presented the health equity strategic plan, addressing questions about community partnerships and acknowledging an extensive partner list though complete details weren't immediately available. A significant concern was raised about services being cut to Hispanic and underserved communities during the plan's development, with Niedziela referencing page 19 which outlines community embedded programs outside traditional clinic spaces. Regarding staff training and development, the organization has expanded management academy meetings from 5 to 15 minutes for equity topics and implemented new hire orientation sessions where all new employees meet with health equity staff during their first week. Program-specific trainings are being developed to address concerns that brief presentations may be insufficient for comprehensive culture change requiring robust professional development.

The discussion moved to hiring practices, where health equity questions are being embedded in all interviews with suggestions to require rather than prefer bilingual skills for positions, though this creates a slower hiring process while improving community access. Priority populations will be identified through a data-driven approach referenced on page 20, involving review of community health data resources to identify gaps and assess organizational capacity. The equitable funding model will be developed through a similar process involving the new partnerships team.

### **Compliance Department Update**

Katie Wheeler, a licensed attorney in a non-practicing role, introduced herself as the organization's first compliance officer starting in June 2024, leading a department of one tailored to the organization's specific needs. Election activities paused compliance initiatives from October through November, but she has since refocused on establishing basic duties including processing medical records requests and fostering a culture of compliance through staff training. Notable accomplishments include attending the Healthcare Compliance Academy conference and achieving 100% completion rate on the organization's first HIPAA training.

Wheeler detailed the Compliancy Group software implementation, which provides staff-facing components including a training platform, incident portal, and policies/procedures access, while admin-facing features include risk assessments, vendor/contract storage, and document management. Future plans for 2025-2026 include finalizing the compliance strategic plan, working with HR on policies and handbook updates, creating a quarterly internal compliance committee, and continuing policy revision with the governance committee.

The presentation concluded with confirmation of close coordination between compliance and health equity departments, with both working together on administrative equity practices and incident reporting systems, demonstrating organizational integration of these complementary functions.

### **Employee Engagement Survey Results**

The organization completed an anonymous employee engagement survey achieving a 76% response rate. HR generalist Alexa Kuretsky administered the survey during July 14th, revealing organizational strengths and gaps requiring trust rebuilding and improved employee support.

Four primary improvement areas emerged: increasing transparency around organizational changes; strengthening supervisor-leader support systems; developing recognition and retention strategies; and improving work environment and well-being as employees reported feeling overworked and burnt out.

Category results showed general job satisfaction but work-life balance concerns, staffing shortages and high turnover, need for clearer leadership communication, better change management, importance of advancement opportunities, and gaps between leadership intentions and frontline realities.

Open-ended responses revealed staff valued direct service work but wanted clearer role connections to program goals and better resourced infrastructure. Employees requested internal systems

improvements, transparent governance, modernized technology, organizational stability, better wages, improved PTO, and career advancement.

Next steps include sharing results through town halls, implementing stay interviews beginning January 2026, conducting follow-up survey in April, and establishing regular engagement surveys and pulse surveys.

Board members appreciated the assessment and clarified stay interviews as ongoing relationship-building conversations with emphasis on daily trust-building and regular pulse surveys rather than waiting for annual surveys.

#### **IV. Consent Agenda**

- a. June 26, 2025 - Regular Meeting Draft Minutes
- b. July 29, 2025 - Special Board Meeting Draft Minutes
- c. Forensic Audit Contract
- d. Connect for Health Colorado Contract
- e. Ratification of Policy Positions

*Motion: By Director Hottenstein to approve the consent agenda moving the Forensic Audit Contract and Policy Positions Ratification to Action items; seconded by Director Thielen; passed unanimously.*

#### **V. Action Items**

##### **Forensic Audit Contract**

Staff clarified that seven applications were received from various locations through an RFP process, and that Eide Bailey has a local office despite being headquartered in North Dakota, making them a well-regarded national firm with local presence. Three evaluators compared the applications through the standard evaluation process.

*Motion to approve the Forensic Audit Contract*

*Moved by Director Hottenstein, seconded by Director Hathcock; passed unanimously.*

##### **Policy Positions Ratification**

Alyson Williams presented two policy positions that came before the board unusually late due to special session timing, when normally positions would be included in agenda documents with explanatory information. The first position involved the Personal Responsibility and Work Opportunity Reconciliation Act (PROWA) from 1996, which changed public benefits administration. A federal register notice from July proposed changes to how the law is implemented, potentially requiring immigration status considerations for federally supported programs including public health initiatives, Head Start, housing, federally qualified health centers, and community behavioral health centers that previously served all individuals regardless of immigration status. The organization signed onto a collaborative letter from North Carolina Healthline to oppose these changes.

The second position concerned Omni Salud, a state-level program providing health insurance coverage for undocumented individuals through financial assistance. The program currently serves 12,000 people, with the organization enrolling about 50 annually through Larimer Health Connect. The enrollment process operates as a first-come, first-serve lottery system that fills quickly, with spots disappearing within 24 hours in the second year. The organization wanted to ensure that program accessibility and funding wouldn't be drastically reduced during the special session, and the program was included in House Bill 256 to maintain slots in the thousands rather than reducing to 1,000-2,000 or stopping completely.

A board member asked about policy committee procedures, with Williams confirming that normally these positions would go through the policy committee via email.

Per board policy 997, if the board president responds affirmatively,

that is sufficient to move forward with policy positions that are then ratified by the full board.

*Motion to approve the Ratification of Policy Positions*

*Moved by Erin Hottenstein, seconded by Sarah Hathcock; passed unanimously.*

## **Q2 2025 Financial Report**

Jessica Holmes, YPTC reported that after six months of 2025, the health district remains in strong financial position with revenues and expenditures both outperforming budget, resulting in \$6.97 million year-to-date fund balance increase. Revenue exceeded budget in all categories, with behavioral health programs falling 67% short of budgeted revenue but offset by strong oral health activities and one-time recognition of \$418,000 from previously deferred Medicaid billing. Over 95% of tax revenues have been collected by Larimer County, meaning sharp revenue decline for the remainder of the year. Total expenditures were \$752,000 under budget despite anticipated increases for planned improvements. Personal compensation represents 66% of spending (industry normal) but remains \$976,000 under budget. General administration slightly exceeded budget, but with savings in other functions, 57% of total budgeted expenses remain for the second half, indicating good trends. The district projects outperforming the 2025 budget by \$542,000, changing from a budgeted \$70,000 loss to projected \$470,000 gain.

The balance sheet shows a strong cash position, low liabilities, no loans, and unassigned fund balance of \$9.3 million expected to decrease to \$2.7 million by year end. The statement of functional expenses revealed a 72% program expense ratio and 28% administrative ratio, meaning nearly three-quarters of expenses go directly to programs. Professional development was 46% under budget due to seasonal conference timing, while service expenses exceeded budget.

During discussion, board members learned the District maintains 15 months of operating expenses on hand, which Holmes noted is high for a government agency. The District budgeted for 96-97 FTEs but currently has 67, though some positions were intentionally not budgeted. Holmes clarified regulations allow negative budgets as long as expenditures don't exceed revenues plus existing fund balance, and noted this cash accumulation isn't a new issue based on historical board minutes.

*Motion to approve the Q2 2025 Financial Report*

*Moved by John McKay, seconded by Erin Hottenstein; passed unanimously.*

## **ED/CEO Search Sub-Committee**

The Board of Directors discussed hiring an executive director for the District who has experienced multiple leadership transitions in three years. The central debate focuses on whether to hire a permanent leader or a transitional/transformational leader for 18-24 months.

Director Field argued this approach would provide focused change management without the political pressures that affected previous executives. One director believes quality permanent candidates might view the position as "career suicide" given the organization's recent instability, and a transitional leader could implement necessary changes from a strategic perspective.

Other members express concerns, worried it would negatively impact staff morale and delay the stability everyone seeks. The Board emphasize that staff need relationship-building leadership focused on trust and culture rather than just systems change. One member suggested an interim appointment instead of a full search for a short-term position.

The discussion reveals tension between needing transformational change and wanting stability.

Some argue these aren't mutually exclusive - the ideal candidate could combine change management skills with relationship-building capabilities.

Rather than rushing to decide, the board chose to gather staff input through their consulting firm, CPS. Recognizing previous hiring decisions were largely top-down, they want staff voices centered in this

process. CPS will conduct focus groups and surveys asking staff what they want in leadership and their preferences between interim, transitional, and permanent positions.

The board defers the advisory subcommittee decision until after receiving staff feedback, since the type of position may influence whether community partners should participate in selection.

*A motion was made to defer the advisory subcommittee until staff feedback,*

*Seconded by Director Field to defer forming the subcommittee pending staff input.*

### **September Special Meeting and Board Schedule for 2025**

The Board of Directors were faced with scheduling decisions for September. The board decides to hold a special meeting on September 24th focused solely on the executive director search, rather than a regular meeting with multiple agenda items. One member supports this but emphasizes keeping it focused on one topic to minimize staff workload.

The Board of Directors discussed whether to include public comment at the special meeting. While special meetings typically don't require public comment, they decide to include it since they're seeking input on the leadership search process and want to maintain their commitment to inclusive decision-making.

Administrative complexity arises around two separate resolutions: changing regular meetings from Thursdays to Wednesdays at 6:00 PM and scheduling the September 24th special meeting. There was brief discussion about accommodating schedule changes but the board proceeds with the Wednesday change.

The Board of Director's handled the resolutions procedurally by first approving the regular meeting schedule with September 24th removed, then separately scheduling a September 24<sup>th</sup> special meeting.

*Motion to have a September Special Meeting and approve the Board schedule for the remainder of 2025*

*Moved by Director Hathcock, seconded by Director Hottenstein; passed unanimously.*

### **Safety Deposit Boxes**

The board approves resolutions 2025-04 through 2025-09 for safety deposit box signatory access. When asked why there are multiple resolutions, staff clarify each covers a different box. There was a brief question about signature requirements that was resolved.

*Motion to approve Resolutions 2025(04-09)*

*Moved by Director McKay, seconded by Director Hottenstein; passed unanimously.*

### **Public Policy Committee**

The board appoints Lee Thielen and Erin Hottenstein to the public policy committee via resolution 2025-10. Thielen volunteers and Hottenstein expresses interest, while other members decline due to bandwidth constraints.

*Motion to approve Resolution 2025-10*

*Moved by Director Hathcock, seconded by director Thielen; passed unanimously.*

## **VI. Reports and Discussions**

### **HR1 Federal Policy Impact**

**Policy Changes:** HR1 affects Medicaid, CHIP, ACA, and Medicare, causing increased consumer costs, eliminated federal subsidies, reduced enrollment, and more uncompensated care demand.

**Local Impact:** Larimer County couple earning \$81,000/year will see premiums jump from \$186 to \$1,600 monthly. Projected losses: 3,500 people in Larimer County, 6,700 in Weld County.

**State Cuts:** Governor authorized \$300M additional cuts including reduced Medicaid dental rates and

pediatric behavioral therapy rates.

**District Response:**

- Staff compassion fatigue training
- Proactive coverage renewal communication
- Community partner collaboration
- Safety net referral preparation

**Partnerships:** Staff attending community meetings as listeners. School district faces \$6M cut (29 counselors). Salud limiting new uninsured patients.

**Board Requests:** Monthly updates, impact analysis framework, advocacy talking points, earlier agenda placement, public health collaboration.

**2026 Budget Process Timeline:**

- October 15: Budget distributed to board
- October 22/23: Board presentation
- November 19: Public hearing
- December: Budget adoption and mill levy setting

**Note:** Final property valuations available December 10, five days before submission deadline.

**Board of Directors Reports**

- Director Hathcock:** Board cohesion development
- Director McKay:** Health Network open house, overdose awareness event
- Director Field:** Forensic audit meeting, strategic plan reflection
- Director Thielen:** League of Women Voters resource role

**Executive Director Staff Report**

Courtney Green initially planned to share highlights from program updates but decided to save time by having attendees read through all the program updates themselves instead.

Green expressed appreciation to the team for a great experience from the previous week, noting that Director McKay was missed from that session. Looking ahead, there was excitement shared about communicating future direction and plans with teams and staff, including the creation of work plans that would be shared in January.

**VII. Adjourn**

*Motion to adjourn the meeting at 9:17pm*

*Moved by Director Hottenstein, seconded by Director McKay; passed unanimously.*