



Board of Directors Regular Meeting AGENDA

Location: 120 Bristlecone Dr., Fort Collins, CO 80524 or Zoom

Date: Thursday, August 28, 2025

Time: 5:30 PM

5:30 PM

I. Call to Order

Erin Hottenstein

- a. Roll Call Board of Directors
- b. Welcome Guests & Attendees
- c. Conflict of Interest Statement
- d. Approval of Agenda

5:35 PM

II. Public Comment

Note: If you choose to comment, please follow the “Guidelines for Public Comment” provided at the end of the agenda.

5:45 PM

III. Presentations

- a. Health Equity Strategic Plan Presentation
- b. Compliance Presentation
- c. Employee Engagement Survey Results Presentation

Cassi Niedziela

Katie Wheeler

Misty Manchester/Julie Kenney

6:20 PM

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
-

6:25 PM

V. Action Items

- | | |
|--|------------------|
| a. Q2 2025 Financial Reporting Package | Jessica Holmes |
| b. ED/CEO Search Sub-Committee Resolution 2025-12 | Erin Hottenstein |
| c. September Special Meeting | Erin Hottenstein |
| d. Resolution 2025-11 Board meeting schedule for remainder of 2025 | Erin Hottenstein |
| e. Resolutions 2025-(4-9) (6) Signatory for Access to Safe Deposit Box | Courtney Green |
| f. Resolution 2025-10 Public Policy Committee | Alyson Williams |

7:00 PM

VI. Reports and Discussions

- | | |
|--|-----------------------------|
| a) HR 1 Updates | Alyson Williams/Dana Turner |
| b) 2026 Budget Process and Timeline | Jessica Holmes |
| c) Board of Directors Reports | Erin Hottenstein |
| d) Liaison to PVHS/UCHealth North Report | John McKay |
| e) Board Committee Updates | Board Members |
| f) Executive Committee Update | Erin Hottenstein |
| g) Executive Director Staff Report | Courtney Green |

7:45 PM

VII. Adjourn

Erin Hottenstein



Board of Directors Regular Meeting

DRAFT 6.26.25

MINUTES

Location: 120 Bristlecone Dr., Fort Collins, CO 80524 or Zoom

Date: Thursday, June 26, 2025

Time: 5:30 PM

Board Members Present:	Also Present:
Erin Hottenstein, Board President	Elizabeth G. LeBuhn - Hoffman, Parker, Wilson & Carberry, P.C
Lee Thielen, Board Vice President	Nick Healey Husch Blackwell
Julie Kunce Field, JD, Treasurer (virtual)	
Sarah Hathcock, Secretary	
John McKay, Liaison to PVHS/UCHealth North	

I. Call to Order

- Roll Call Board of Directors
With a quorum present, the meeting was called to order at 5:33 pm by Board President, Erin Hottenstein.
- Welcome Guests & Attendees
- Conflict of Interest Statement
No conflicts were reported.
- Approval of Agenda
Motion: To approve the June 26 meeting agenda, as presented.
Moved by Director McKay, seconded by Director Hathcock, Director Field abstains; motion passes.

II. PUBLIC COMMENT

- Averil Strand acknowledged the new board members and the new phase of determining directions for services, including preventive services and the hiring of a part-time medical director.
- Andrea Holt addressed the Board regarding the Integrated Care program and the direction of the Health District. Holtz clarified that she supports the district's need to modernize and does not disagree with the strategic plan.
- Whitney Bennett-Clear, The Health District addressed the Board to commend the collaborative work between the Poudre School District, the Health District, and SummitStone Health Partners in developing an improved referral process for students.
- Marybeth Rigali-Oiler addressed the Board about leadership concerns.
- Julie Abramoff addressed the Board about leadership concerns and the Heart Health program. treatment of previous staff and misinformation.

- f. Kristen Scott addressed the Board regarding the Poudre Valley Hospital partnership contract and encouraged the Board to sign the agreement.
- g. Shawnie Wilde commented about the value of the behavioral health response team partnership between SummitStone Health Partners, Poudre School District, and the Health District.
- h. Virginia Mack provided public comment about her tenure with CAYAC program and leadership concerns through a submitted audio recording.
- i. Heather Truschel provided comment through submitted letter where she expressed concerns about leadership and the future of the CAYAC program.
- j. Dr. Usha Udupa provided public comment in a submitted letter of leadership concerns, challenges in organizational culture, and provided input on the hiring of staff and the future Executive Director.
- k. Karen Spink provided public comment via a submitted letter expressing concern about misinformation, acknowledging systems issues, praising executive leadership, and commenting on the timing of special Board meetings.

III. Presentations

a. Mental Health and Substance Use Alliance of Larimer County

Hannah Groves, Community Impact Team (CIT) Manager, presented on the Mental Health and Substance Use Alliance's Strategic Plan. Groves highlighted that the Alliance remains grounded in its vision that behavioral health is holistic, affirming, valued, and essential to whole-person health, guided by values including sustainable change, lived expertise, health equity, and open-mindedness. Looking ahead, the new Steering Committee of the Alliance plans to launch workgroups for specific strategies, add final strategic plan details including goals and metrics, and move into action phase. Recent strategic work has been supported by contractors at Civic Canopy

Director McKay inquired about the Alliance's work with Civic Canopy. Groves provided information about the Civic Canopy team and the work that had been accomplished with their support.

Director McKay inquired about future action of the Alliance and its membership. Groves explained that specific strategies will emerge from the workgroups. Regarding membership, Groves confirmed they are actively working on outreach to fill gaps in representation.

Director Thielen inquired about the timeframe for implementing a common portal for care coordination. Groves explained that while there's significant community interest in this coordination portal, the specific implementation details remain to be determined through the collaborative work group process.

Director Hathcock asked about membership composition and how people learn about the Alliance. Groves explained that outreach happens through multiple channels and additional outreach tools are in development.

Director Hottenstein expressed enthusiasm about the Alliance's revival and the development of the Alliance Strategic Plan.

IV. Consent Agenda

- a. May 22, 2025 - Regular Meeting Minutes
- b. June 3, 2025 - Special Board Meeting Minutes
- c. June 5, 2025 - Special Board Meeting Minutes
- d. May 2025 - Financial Statements
- e. Partnership/Funding Agreement – Salud Contract
- f. Partnership/Funding Agreement – Poudre Valley Hospital Contract
- g. Hedy & Hopp Website Contract

Motion: To approve the consent agenda as presented.

Director Thielen offered a motion to approve the June 26, 2025 Consent Agenda as amended

(correcting the spelling of Director Field's name in the May 22, 2025 Regular Meeting Minutes), seconded by Director McKay; passed unanimously.

Director Thielen noted that she liked the way the public comments were captured in the minutes.

Director McKay noted that he agrees with the partnerships.

Director Hathcock noted that public comments have been heard.

V. Reports and Discussions

a. Interim Leadership Planning

The Board addressed interim leadership planning, noting they had discussed hiring a search firm for the executive director position in yesterday's work session and wanted to revisit interim leadership arrangements. Staff presented an organizational chart showing key leadership functions. Board members expressed support for continuing with Courtney Green as Acting Interim Director and reaffirming their support for continuing with the current leadership plan.

With the Executive Director's last day being June 7th, Director Hottenstein felt urgency and asking in writing three times for the Board of Directors to meet and appoint an Acting Executive Director. This led to the noticed June 5th Special Meeting where the Board fulfilled their responsibility to choose an Acting Executive Director before June 7th.

Director Field disagreed with Director Hottenstein's characterization of events, referencing the May meeting record and transcript from the early June meeting.

Director Hathcock described her experience as a new board member during the transition period and addressed the June 5th special meeting.

Director Field commented that the current discussion did not align with the noticed agenda item.

b. Annual Investment Report

Courtney Green, acting executive director, presented the annual investment report. The report highlighted the regulatory framework, 2024 performance, investment strategy, current portfolio composition, economic outlook, and risk assessment.

Director Thielen asked for clarification about the difference between the average portfolio return of 5.22% and the 2.73% return on investment figure. Green explained that the 2.73% represents the overall change in the entire investment portfolio, while the 5.22% is the average return across all the different types of investments held by the District.

Director Field thanked Green and the YPTC (Your Part Time Controller) team for their assistance in walking through the investment report and financial reports as she gets up to speed in her new role as Treasurer.

c. Health Equity Strategic Plan Progress Report

Cassi Niedziela, health equity strategist, presented updates on the health equity strategic plan, which will be presented to the Board at the regular August meeting.

Director McKay stated he appreciated the update and looks forward to seeing this plan in action.

d. Annual All Staff Connection Plan

Courtney Green, acting executive director, presented a two-year intentional employee engagement plan through December 2026. This includes an employee

engagement survey in July, an all-staff town hall in August and new cadence of activities in 2026. Green also highlighted an all-staff picnic on July 24, 2025.

e. Strategic Planning and Budget Planning Timeline

Amber Blake, CEO/Principal – Amber Blake Consulting, Health District Bylaws require annual strategic plan approval. She shared key wins from the 2024 strategic plan process and highlighted the four current strategic priority areas. Current objectives include refreshing the 2024-25 plan, incorporating new board members' voices, documenting accomplishments, and including new branding.

Director Thielen asked how many staff were included in the 2024 strategic planning retreat. Blake responded that approximately seven or eight leadership team members participated. Jessica Shannon, vice president of executive projects clarified that managers worked with leadership to inform the process and content.

Director Hathcock inquired if there will be opportunity for staff input this year. Blake inquired to the Board if the structure worked well last year. Director McKay confirmed it worked well.

Director McKay emphasized the importance of inclusive excellence and broader staff input and noted they are simply refining the plan this year.

f. Liaison to PVHS/UCHealth North Report

Director John McKay had no report.

g. Board Committee Updates

- Public Policy Committee Update – No update, session over.
- Executive Committee Update – Met with Courtney Green.

h. Executive Director Staff Report

Courtney Green, acting executive director, highlighted key points from the program updates in the board packet. She announced a new Compliance program update, implemented following legal counsel's recent presentation. Green reported that the final two positions on the finance team have been hired. The first phase of implementing their new HIS (Human Resources Information System) was successfully completed.

Director McKay commented on the importance of understanding that the UKG project was big undertaking and congratulating the team.

Green reported that data collection for the 2025 Colorado Health Access Survey recently closed. The Dental Clinic implemented a patient communication tool, conducted a comprehensive workflow analysis for Dentrux and are upgrading three additional operatories.

The Communications team is auditing approximately 450 Health District website pages for website redesign to ensure smoother migration and more intuitive user experience.

Staff participated in their first annual internal day of service for Juneteenth.

Director Thielen expressed enthusiasm for the hiring of finance staff and commented on vacancies in the CAYAC program.

i. Board of Directors Reports

Director McKay expressed appreciation for outreach and education for sharing space at the FoCo Juneteenth community event. He reported speaking with Jamal Skinner, who conducted a Juneteenth workshop and was incredibly impressed with how receptive, engaged, and serious the Health District

staff were in their reflection and learning about history of the day. He concluded by wishing everyone happy Pride and Juneteenth.

Director Hathcock expressed appreciation for participating in Juneteenth day of service. She appreciated the staff's enthusiasm, energy, and the music that created great community building. She also thanked the board and leadership team for organizing a meaningful board orientation.

Director Thielen reported positive activity around the Health District, with numerous partners reaching out to share their hopes for the District. She appreciated the board's receptiveness to public comment.

Director Field thanked staff for Board orientation and apologized for missing the beginning due to a work event. She highlighted pent-up HR needs, referencing the 2022 climate survey, and expressed the successes of hiring a HR director and the new HR system investment. She expressed eagerness to see increased trust through adherence to systems and processes.

Director Hottenstein thanked the leadership team for their hard work over the past month and praised the Board orientation. Hottenstein formally thanked Liane Jollon for her two years of dedication and hard work, noting Jollon's significant contributions to modernizing systems and strategic planning.

VII. Announcements

- a. Health District Board of Director Orientation – July 29 10 am – 2 pm.
- b. August 28, 2025 – Regular Board Meeting

VIII. Adjourn

Motion to adjourn the meeting at 8:05 pm

Moved by John McKay, seconded by Julie Field; passed unanimously.



**Board of Directors Special Meeting
7.29.2025**

DRAFT MINUTES

Location: 120 Bristlecone Dr., Fort Collins, CO 80524 or Zoom

Date: Tuesday, July 29, 2025

Time: 10:00am-2:00pm

Board Members Present:	Also Present:
Erin Hottenstein, Board President	Elizabeth G. LeBuhn - Hoffman, Parker, Wilson & Carberry, P.C
Lee Thielen, Board Vice President	CPS-David Neimeyer & Gloria Timmons
Julie Kunce Field, Treasurer	Yashica Lind-The Lind Group
Sarah Hathcock, Secretary	Courtney Green - HD Chief Administrative Officer
John McKay, Liaison to PVHS/UCHealth North	Misty Manchester- HD Director of Business Operations
	Rachel Larson-Interim Digital Media Specialist
	Jacque Ferrero- Interim Executive Assistant

I. Call to Order

- a. Roll Call Board of Directors

With a quorum present, the meeting was called to order at 10:04am 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 July 29 meeting agenda, as presented.

Moved by Director Hathcock, seconded by Director Thielen, motion passes.

II. Board Orientation

Yashica Lind had Key findings from Session One. They showed that knowing your role isn't the same as knowing what to do, trust is fragile with some voices holding back, and clear norms are needed beyond good intentions. Lind emphasized that trust comes from what gets codified and practiced, not intentions.

The session finalized board norms and explored day-to-day governance flow. For agenda input, what works includes clear submission processes and timely distribution; what causes confusion includes last-minute topics and unprepared staff. Information requests should flow through Chair for Board or ED for staff, who clarify the ask, ensure board alignment, and share responses with the full board.

The session distinguished governance from operations, emphasizing staying at the right altitude. Board-level business includes setting ED search direction and clarifying legal roles, while operational drift involves directing ad placement or investigating staff individually

After lunch, Associate Attorney Elizabeth LeBuhn presented a legal refresher on open meetings and records. The session covered board packet strategy and consent agendas, which group routine items for efficient block approval while allowing discussion when needed.

The presentation contrasted strategic thinking (long-term focus, mission-anchored decisions) with operational drift (reactive, detail-oriented). Strategic planning recommendations included focusing on direction over detail, reading packets for patterns, and showing up future-focused rather than reactive.

The session concluded with ED Search Committee discussion, participant reflections on key insights, and a confidential post-assessment for feedback on the session's effectiveness

Resolution of HD-2025-03 Discussion

Niemeyer and Timmons from CPS introduced their 12-14 week executive director search process with three phases: developing recruitment materials and brochures, conducting 30-day recruitment using database outreach and LinkedIn, and handling candidate screening, interviews, reference checks, and background checks. The BOD requested input on advertisement placement, and CPS welcomed suggestions within their budget.

Director Field analyzed staff surveys since 2022, identifying 25 key leadership characteristics including organizational understanding, strategic thinking, emotional intelligence, and building HR/finance/IT functions. She proposed hiring an 18-24 month transitional/transformational leader instead of a permanent director, citing seven or eight leadership changes since April 2022 and the need to address systemic issues before finding a long-term leader.

Director Thielen opposed this approach, arguing high-caliber candidates wouldn't commit to short-term positions and questioning the impact on staff morale after multiple transitions. CPS noted transitional searches attract smaller, different candidate pools, often including people in career transitions or specializing in organizational transformation. Timmons suggested focus groups with staff to gauge preferences.

The discussion revealed differences between relationship-building needs and systemic operational issues, with debate over whether one person could handle both or if roles should be separated. The discussion concluded that a search committee including board members and partners would be formed to gather additional stakeholder input before finalizing the search approach.

III. Action Items

Director Hottenstein introduced Resolution 2025-03 for the executive director search committee. Director Hathcock moved and Director Thielen seconded. Based on legal counsel's recommendation, the board would serve as the official search committee but could include partners through a subcommittee or working group format.

Discussion centered on committee composition. Director Thielen suggested all five board members plus three partners, like the previous search. However, the last process used two board members to review applications and winnow down candidates, though all five could participate. With all five members, every meeting would require public notice.

Members debated between a working group of two with optional participation for others versus full board commitment despite scheduling challenges. They compared it to their legislative working group where two members review materials in publicly noticed meetings that anyone can attend. The previous search included non-voting partners from Summit Stone and PVHS who provided input except during executive sessions.

Director Field suggested deferring specific composition decisions to their next meeting, noting the resolution accommodated any discussed option. Director Hathcock asked about timing for deciding the executive director position type (permanent versus transformational), with the Director Hottenstein confirming they would address this at their August meeting and likely September meeting.

The discussion concluded with calling for a vote on Resolution 2020-03 regarding the search committee and consulting firm agreement.

Moved by John McKay, seconded by Sarah Hathcock; passed unanimously

IV. Adjourn

Motion to adjourn the meeting at 2:00pm

Moved by John McKay, seconded by Sarah Hathcock; passed unanimously.



AGENDA DOCUMENTATION

Meeting Date: August 28, 2025

SUBJECT: Forensic Audit Contract

PRESENTER: Courtney Green

OUTCOME REQUESTED: ☐ Decision ☒ **Consent** ☐ Report

PURPOSE/ BACKGROUND

Per Board Policy 99-01, Contract Signature Policy, Projects that are in an amount between \$50,000 and \$150,000 require Board general approval.

Attachment(s):

- Eide Bailly Contract

FISCAL IMPACT

The agreement is a lump sum contract between \$104,950 and \$133,200.

STAFF RECOMMENDATION

Staff recommend the Board approve the contract with Eide Bailly for forensic audit services.

Agreement for Professional Services

This Agreement for Professional Services (the "Agreement") is made and entered into this ____ day of August, 2025 (the "Effective Date"), by and between the Health District of Northern Larimer County, a Colorado Special District with an address of 120 Bristlecone Drive, Fort Collins, CO 80524 (the "District"), and **EIDE BAILLY LLP**, an independent contractor with a principal place of business at PO Box 2545 4310 17th Ave S, Fargo, ND 58108-2545 ("Contractor") (each a "Party" and collectively the "Parties").

Whereas, the District requires professional services; and

Whereas, Contractor has held itself out to the District as having the requisite expertise and experience to perform the required professional services.

Now Therefore, for the consideration hereinafter set forth, the receipt and sufficiency of which are hereby acknowledged, the Parties agree as follows:

I. Scope of Services

A. Contractor shall furnish all labor and materials required for the complete and prompt execution and performance of all duties, obligations, and responsibilities which are described or reasonably implied from the Scope of Services set forth in **Exhibit A**, attached hereto and incorporated herein by this reference.

B. A change in the Scope of Services shall not be effective unless authorized as an amendment to this Agreement. If Contractor proceeds without such written authorization, Contractor shall be deemed to have waived any claim for additional compensation, including a claim based on the theory of unjust enrichment, quantum merit or implied contract. Except as expressly provided herein, no agent, employee, or representative of the District is authorized to modify any term of this Agreement, either directly or implied by a course of action.

II. Term and Termination

A. This Agreement shall commence on the Effective Date, and shall continue until Contractor completes the Scope of Services in accordance with the terms of this Agreement and professional standards or until terminated as provided herein.

B. Either Party may terminate this Agreement upon 30 days advance written notice. The District shall pay Contractor for all work previously authorized and completed prior to the date of termination. If, however, Contractor has substantially or materially breached this Agreement, the District shall have any remedy or right of set-off available at law and equity.

III. Compensation

In consideration for the completion of the Scope of Services by Contractor, the District shall pay Contractor between \$104,950 and \$133,200. This amount shall include all fees, costs and expenses incurred by Contractor, and no additional amounts shall be paid by the District for such fees, costs and expenses. Contractor may submit periodic invoices, which shall be paid by the District within 30 days of receipt.

IV. Professional Responsibility

A. Contractor hereby warrants that it is qualified to assume the responsibilities and render the services described herein and has all requisite corporate authority and professional licenses in good standing, required by law. The work performed by Contractor shall be in accordance with generally accepted professional practices and the level of competency presently maintained by other practicing professional firms in the same or similar type of work in the applicable community.

B. The District's review, approval or acceptance of, or payment for any services shall not be construed to operate as a waiver of any rights under this Agreement or of any cause of action arising out of the performance of this Agreement.

C. Because the District has hired Contractor for its professional expertise, Contractor agrees not to employ subcontractors to perform any work except as expressly set forth in the Scope of Services.

D. Contractor shall at all times comply with all applicable law, including all federal, state and local statutes, regulations, ordinances, decrees and rules relating to the emission, discharge, release or threatened release of a hazardous material into the air, surface water, groundwater or land, the manufacturing, processing, use, generation, treatment, storage, disposal, transportation, handling, removal, remediation or investigation of a hazardous material, and the protection of human health and safety, including without limitation the following, as amended: the Comprehensive Environmental Response, Compensation and Liability Act; the Hazardous Materials Transportation Act; the Resource Conservation and Recovery Act; the Toxic Substances Control Act; the Clean Water Act; the Clean Air Act; the Occupational Safety and Health Act; the Solid Waste Disposal Act; the Davis Bacon Act; the Copeland Act; the Contract Work Hours and Safety Standards Act; the Byrd Anti-Lobbying Amendment; the Housing and Community Development Act; and the Energy Policy and Conservation Act.

V. Ownership

Any materials, items, and work specified in the Scope of Services shall be exclusively owned by the District. Contractor expressly acknowledges and agrees that all deliverables constitute a "work made for hire." To the extent, if at all, that it does not constitute a "work made for hire," Contractor hereby transfers, sells, and assigns to the District all of its right, title, and interest in such work. The District may, with respect to

all or any portion of such work, use, publish, display, reproduce, distribute, destroy, alter, retouch, modify, adapt, translate, or change such work without providing notice to or receiving consent from Contractor; provided that Contractor shall have no liability for any work that has been modified by the District.

VI. Independent Contractor

Contractor is an independent contractor. Notwithstanding any other provision of this Agreement, all personnel assigned by Contractor to perform work under the terms of this Agreement shall be, and remain at all times, employees or agents of Contractor for all purposes. Contractor shall make no representation that it is a District employee for any purposes.

VII. Insurance

A. Contractor agrees to procure and maintain, at its own cost, a policy or policies of insurance sufficient to insure against all liability, claims, demands, and other obligations assumed by Contractor pursuant to this Agreement. At a minimum, Contractor shall procure and maintain, and shall cause any subcontractor to procure and maintain, the insurance coverages listed below, with forms and insurers acceptable to the District.

1. Worker's Compensation insurance as required by law.
2. Commercial General Liability insurance with minimum combined single limits of \$1,000,000 each occurrence and \$2,000,000 general aggregate. The policy shall be applicable to all premises and operations, and shall include coverage for bodily injury, broad form property damage, personal injury (including coverage for contractual and employee acts), blanket contractual, products, and completed operations. The policy shall contain a severability of interests provision and shall include the District and the District's officers, employees, and contractors as additional insureds. No additional insured endorsement shall contain any exclusion for bodily injury or property damage arising from completed operations.
3. Professional liability insurance with minimum limits of \$1,000,000 each claim and \$2,000,000 general aggregate.

B. Such insurance shall be in addition to any other insurance requirements imposed by law. The coverages afforded under the policies shall not be canceled, terminated or materially changed without at least 30 days prior written notice to the District. In the case of any claims-made policy, the necessary retroactive dates and extended reporting periods shall be procured to maintain such continuous coverage. Any insurance carried by the District, its officers, its employees or its contractors shall be excess and not contributory insurance to that provided by Contractor. Contractor shall be solely responsible for any deductible losses under any policy.

C. Contractor shall provide to the District a certificate of insurance as evidence that the required policies are in full force and effect. The certificate shall identify this Agreement.

VIII. Indemnification

A. Contractor agrees to indemnify and hold harmless the District and its officers, insurers, volunteers, representative, agents, employees, heirs and assigns from and against all claims, liability, damages, losses, expenses and demands, including attorney fees, on account of injury, loss, or damage, including without limitation claims arising from bodily injury, personal injury, sickness, disease, death, property loss or damage, or any other loss of any kind whatsoever, which arise out of or are in any manner connected with this Agreement if such injury, loss, or damage is caused in whole or in part by, the act, omission, error, professional error, mistake, negligence, or other fault of Contractor, any subcontractor of Contractor, or any officer, employee, representative, or agent of Contractor, or which arise out of a worker's compensation claim of any employee of Contractor or of any employee of any subcontractor of Contractor. Contractor's liability under this indemnification provision shall be to the fullest extent of, but shall not exceed, that amount represented by the degree or percentage of negligence or fault attributable to Contractor, any subcontractor of Contractor, or any officer, employee, representative, or agent of Contractor or of any subcontractor of Contractor.

B. If Contractor is providing architectural, engineering, surveying or other design services under this Agreement, the extent of Contractor's obligation to indemnify and hold harmless the District may be determined only after Contractor's liability or fault has been determined by adjudication, alternative dispute resolution or otherwise resolved by mutual agreement between the Parties, as provided by C.R.S. § 13-50.5-102(8)(c).

IX. Miscellaneous

A. *Governing Law and Venue.* This Agreement shall be governed by the laws of the State of Colorado, and any legal action concerning the provisions hereof shall be brought in Larimer County, Colorado.

B. *No Waiver.* Delays in enforcement or the waiver of any one or more defaults or breaches of this Agreement by the District shall not constitute a waiver of any of the other terms or obligation of this Agreement.

C. *Integration.* This Agreement constitutes the entire agreement between the Parties, superseding all prior oral or written communications.

D. *Third Parties.* There are no intended third-party beneficiaries to this Agreement.

E. *Notice.* Any notice under this Agreement shall be in writing, and shall be deemed sufficient when directly presented or sent pre-paid, first class United States Mail to the Party at the address set forth on the first page of this Agreement.

F. *Severability.* If any provision of this Agreement is found by a court of competent jurisdiction to be unlawful or unenforceable for any reason, the remaining provisions hereof shall remain in full force and effect.

G. *Modification.* This Agreement may only be modified upon written agreement of the Parties.

H. *Assignment.* Neither this Agreement nor any of the rights or obligations of the Parties shall be assigned by either Party without the written consent of the other.

I. *Governmental Immunity.* The District and its officers, attorneys and employees, are relying on, and do not waive or intend to waive by any provision of this Agreement, the monetary limitations or any other rights, immunities or protections provided by the Colorado Governmental Immunity Act, C.R.S. § 24-10-101, *et seq.*, as amended, or otherwise available to the District and its officers, attorneys or employees.

J. *Rights and Remedies.* The rights and remedies of the District under this Agreement are in addition to any other rights and remedies provided by law. The expiration of this Agreement shall in no way limit the District 's legal or equitable remedies, or the period in which such remedies may be asserted, for work negligently or defectively performed.

K. *Subject to Annual Appropriation.* Consistent with Article X, § 20 of the Colorado Constitution, any financial obligation of the District not performed during the current fiscal year is subject to annual appropriation, shall extend only to monies currently appropriated, and shall not constitute a mandatory charge, requirement, debt or liability beyond the current fiscal year.

L. *Force Majeure.* No Party shall be in breach of this Agreement if such Party's failure to perform any of the duties under this Agreement is due to Force Majeure, which shall be defined as the inability to undertake or perform any of the duties under this Agreement due to acts of God, floods, storms, fires, sabotage, terrorist attack, strikes, riots, war, labor disputes, forces of nature, the authority and orders of government or pandemics.

IN WITNESS WHEREOF, the Parties have executed this Agreement as of the Effective Date.

**HEALTH DISTRICT OF NORTHERN
LARIMER COUNTY**

ATTEST:

CONTRACTOR

By: _____

State of Colorado)
) ss.
County of _____)

The foregoing instrument was subscribed, sworn to and acknowledged before me
this ____ day of _____, 2025, by _____ as
_____ of _____.

(Seal)

Notary Public

Exhibit A

Scope of Services

Contractor's Duties

During the term of this Agreement, Contractor shall perform the following duties, as directed by the District:

- Examine financial records and accounting practices for the period January 1, 2022 through December 31, 2024.
- Identify any instances of fraud, embezzlement, or financial misconduct
- Assess the adequacy and effectiveness of internal controls
- Evaluate compliance with applicable accounting standards and regulations
- Review cash management and disbursement procedures
- Analyze revenue recognition practices and accounts receivable management
- Examine procurement processes and vendor relationships
- Investigate expense reporting and reimbursement procedures
- Assess payroll processing and employee compensation practices
- Financial Records Review: General ledger analysis and journal entry testing
- Bank reconciliation verification
- Asset verification and inventory counts
- Accounts payable and receivable analysis
- Credit card and petty cash transactions
- Internal Controls Assessment: Segregation of duties evaluation
- Authorization and approval processes
- Documentation and record-keeping practices
- IT controls and data security measures
- Management oversight and monitoring procedures
- Risk Assessment: Identification of fraud risk factors
- Analysis of unusual transactions or patterns
- Review of related party transactions
- RFP 2025-1005 4
- Assessment of management override capabilities

Contractor's Deliverables

In performance of the duties described above, Contractor shall deliver the following items to the District, during the timeframes established by the District:

- Detailed Work Plan: Comprehensive project timeline and methodology
- Interim Progress Reports: Regular status updates throughout the engagement
- Draft Forensic Audit Report: For management review and comment

- Final Forensic Audit Report: Including findings, recommendations, and management letter
- A presentation of findings to the Board of Directors or designated committee
- Documentation: All supporting work papers and evidence (as appropriate)



AGENDA DOCUMENTATION

Meeting Date: August 28, 2025

SUBJECT: Connect for Health Colorado Contract Extension

PRESENTER: Dana Turner

OUTCOME REQUESTED: ☐ Decision ☒ **Consent** ☐ Report

PURPOSE/ BACKGROUND

Per Board Policy 99-01, Contract Signature Policy, Projects that are in an amount exceeding \$150,000 will require specific approval of the Board of Directors, and the wording of the actual contract or other document will be submitted to board members for their review prior to signature. The document will be signed by the Executive Director (or, in the Executive Director's absence, their staff designee), and the Board President (or, in the Board President's absence, the Board Vice President).

Connect for Health Colorado has awarded the Health District \$208,000 to support Larimer Health Connect operations and the ability to expand services beyond the Health District's service boundaries from July 1, 2025 - June 30, 2026.

Attachment(s):

- C4HCO Signed Contract Extension

FISCAL IMPACT

None-Amount of grant was projected in annual budget.

STAFF RECOMMENDATION

Staff recommend the Board ratify the executed contract extension with Connect for Health Colorado.

First Amendment
Connect for Health Colorado Assistance Network service Agreement

This First Amendment, dated July 1, 2025 (Effective Date), amends the Connect for Health Colorado Assistance Network Service Agreement (Existing Agreement) for the July 1, 2024 -June 30, 2025 term, between the Colorado Health Benefit Exchange, doing business as Connect for Health Colorado (C4HCO), and Health services District of Northern Larimer County (Assistance Site).

The provisions of the Assistance Network Service Agreement dated July 1, 2024 shall remain in effect, except for the following amended provisions:

- Payment For the period of July 1, 2025 through **June 30, 2026** the amounts paid to Assistance Site for Assistance Site Services shall not exceed the total contract amount as set forth herein and this First Amendment incorporated Attachment 1.
- Term. The term of the Existing Agreement is extended through **June 30, 2026**. C4HCO may terminate this Agreement if Assistance Site fails to meet any C4HCO requirement or if C4HCO in its sole discretion determines that termination is in its best interest, provided that such termination shall be in writing and be provided to Assistance Site at least thirty (30) days in advance of the effective date of termination. Assistance Site may terminate this agreement If in its sole discretion, it determines that termination is in its best interest, provided that such termination shall be in writing and be provided to C4HCO at least thirty (30) days in advance of the *effective* date of termination. In the *event* of such termination, C4HCO retains the right to determine which specific activities must be terminated immediately and which should be continued until the effective date of the termination. C4HCO also retains the right to withhold scheduled payments or to require refunds of payments already received for any services that have not been appropriately or completely provided.
- Expected Results, Reporting Requirements and Payment Schedule. Assistance Site shall submit required reports demonstrating work completed and results of work on or before the date due, per the instructions provided by C4HCO, following C4HCO's guidelines and formats. C4HCO shall Issue payments according to the requirements herein and this First Amendment Payment Schedule (attachment 1).
 - o Continued funding for an awarded project is contingent on Assistance Site meeting the objectives stated in the FV26 application tasks, or as amended in agreement with C4HCO.
 - o The obligation of C4HCO to pay any amount under this Agreement is expressly conditioned upon strict compliance with the terms herein and the completion of work as described in the application.
 - o Disbursements schedule and invoice frequency are described In this First Amendment Payment Schedule (Attachment 1).
- Pursuant to section 18. D. of the Existing Agreement, this First Amendment Is binding between C4HCO and Assistance Site, and is made a part of, and incorporated by reference to, the Existing Agreement. This First Amendment will supersede and control over any contradictory terms set forth in the Existing Agreement with respect to the terms herein, and will be deemed to have

augmented and modified the obligations of the parties under the Existing Agreement to the extent necessary to give each provision of this First Amendment full force and effect. This First Amendment shall not modify any terms and conditions of the Existing Agreement not specified herein. Following this First Amendment, and for the term as defined herein, all references to the term "Agreement" in the Existing Agreement will include the terms and conditions of the Existing Agreement and this First Amendment.

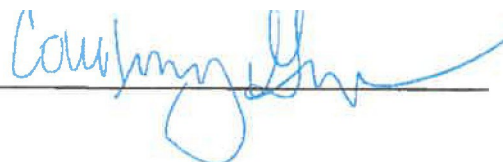
The above terms and conditions of this First Amendment are hereby accepted **and agreed** to as of the Effective Date.

For: **Colorado Health Benefit Exchange**

By: _____

Printed Name and Title: Kevin Patterson, Chief Executive Officer

For: **Health Services District of Northern Larimer County**

By:  6/30/25

Printed Name and Title: Courtney Green, Interim executive Director

Erin Hottenstein, Board President f5t/H ffottertJte/H
Erin Hottenstein (Jun 30, 2025 20:51MDT)

Assistance Site: _____ o_G/ 3_0 /2_0_2_s_ _

Attachment 1

Payment Schedule

Health Services District of Northern Larimer County

The total payments for Assistance Site Services under this Amendment for the term herein shall be:

\$214,700

Approximate date of requirement	Requirement	Payment Amount	Approximate Payment Date
7/15/25	Q4 invoice from FY25 & Initial Invoice FY26	30% of total	7/31/25
9/30/25	Completion of Program Manager Reporting & Q2 invoice	30% of total	10/15/25
12/31/25	Completion of Program Manager Reporting & Q3 invoice	20% of total	1/15/26
3/31/26	Completion of Program Manager Reporting	N/A	N/A
6/30/26	Completion of Program Manager Reporting	N/A	N/A
7/15/26	Completion of Closeout & Q4 Invoice	20% of total	7/31/26






C4HCO Extension Contract Ready for Signature

Final Audit Report

2025-07-01

Created:	2025-06-30
By:	Marlena Derr (mderr@healthdistrict.org)
Status:	Signed
Transaction ID:	CBJCHBCAABAADumTeJ-H5EqAwZ-vZI-UNC0iJhfSB-IX

"C4HCO Extension Contract Ready for Signature" History

-  Document created by Marlena Derr (mderr@healthdistrict.org)
2025-06-30- 9:08:31 PM GMT
-  Document emailed to Erin Hottenstein (erin@healthdistrict.org) for signature
2025-06-30 - 9:08:35 PM GMT
-  Email viewed by Erin Hottenstein (erin@healthdistrict.org)
2025-06-30- 9:09:10 PM GMT
-  Document e-signed by Erin Hottenstein (erin@healthdistrict.org)
Signature Date: 2025-07-01 - 2:54:42 AM GMT - Time Source: server
-  Agreement completed.
2025-07-01 - 2:54:42 AM GMT



AGENDA DOCUMENTATION

Meeting Date: August 28, 2025

SUBJECT: Policy Position Ratification

PRESENTER: None

OUTCOME REQUESTED: Decision ☒ **x** Consent ☐ Report

PURPOSE

Board Policy 99-7 Section: POLICY, Process: *To comport with the section related to "When time does not allow for discussion at a regularly scheduled board meeting," the Board President can engage in policy work between regular meetings. Per 99-7, any direction given by the Board President is subject to ratification or withdrawal by the full Board at its next public meeting.*

BACKGROUND

A special session of the state General Assembly began on August 21st, 2025, to address the immediate fiscal impacts of the federal H.R. 1. Due to the quick nature of a special session, staff brought policy issues to the Board President for position consideration.

In addition, there continue to be federal policy changes that occur on a tight timeline for comment or sign-on to letters.

The Board President took positions for both state and federal policy issues, which are presented for ratification in accordance with Board Policy 99-7.

Attachment(s): None

FISCAL IMPACT

None

STAFF RECOMMENDATION: Staff recommend the ratification of policy issue positions



AGENDA DOCUMENTATION

Meeting Date: August 28, 2025

SUBJECT: Q2 2025 Monthly Financial Report

PRESENTER: Jessica Holmes

OUTCOME REQUESTED: ☒ Decision ☐ Consent ☐ Report

PURPOSE

In order to monitor financial performance as a component of fulfilling the Board of Director's fiduciary responsibilities in accordance with Health District Bylaws, monthly financial reports are presented to the Board of Directors for review.



Great Governance | Goal 2: Protect the integrity of the Health District's financial position and foster fiscal stewardship and accountability.

Attachment(s): Q2 Financial Reporting Package

FISCAL IMPACT

None

STAFF RECOMMENDATION

Staff recommend that the Board of Directors accept the financial reports as presented.



FINANCIAL REPORTING PACKAGE

FOR THE SIX MONTHS ENDED JUNE 30, 2025

Table of Contents

Financial Discussion & Analysis..... **1**

 Executive Summary 1

 Revenue Analysis 2

 Expense Analysis 2

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 Statements of Revenues, Expenditures, and Change in Fund Balance 5

 Budget Comparison: Statement of Revenues, Expenditures, and Change in Fund Balance 6

 Statement of Functional Expenses 7

Financial Discussion & Analysis

EXECUTIVE SUMMARY

As of June 30, 2025, the Health District remains in a strong financial position. Year-to-date revenues and expenditures have both outperformed budget expectations, resulting in a net increase to the fund balance of \$6.97M.

The chart to the right shows the fund balance change by month, and below you will find the key financial highlights.

2025 Fund Balance Change by Month

The fund balance has increased from \$11.39M at the end of 2024, to \$18.36M at the end of Q2 2025.



Chart: Jessica Holmes, YPTC

Balance Sheet

- **Cash & Investments:** Increased by \$4.54M to \$16.53M
- **Receivables:** Declined due to seasonal tax collections.
- **Liabilities:** Slight increase overall, no major concerns.
- **Deferred Inflows:** Down \$11.10M due to revenue recognition.

Revenues

- **YTD Total:** \$13.42M
- \$811K above budget.
- **Tax Revenues** are on track, 95% collected.
- Service, Lease, and Investment Revenues are all above budget.

Expenditures

- **YTD Total:** \$6.46M
- **Personnel Costs:** \$4.24M, 19% below budget.
- **Supplies, Equipment, & Software:** Over budget due to capital purchases.
- Most categories are well within budget, 57% of the annual budget is still available.

Programs vs General & Admin

- **Program Operation Costs:** \$4.67M 72% of total.
- **General & Admin Costs:** \$1.79M 28% of total.

Overall

The Health District is in a strong financial position.

Financial

The fund balance increased by \$6.97M, ending the first half of the year at \$18.36M.

Position

With the majority of tax revenues collected in the first half of the year, expenditures will exceed revenues in the second half. However, strong year-to-date performance ensures the District is well-positioned to stay within its annual budget.

REVENUE ANALYSIS

Revenues exceeded budget in all categories, with the most notable gains in Service Revenues, Lease Revenues, and Investment Earnings. While Service Revenues performed well overall, Behavioral Health programs fell short of budgeted expectations by 67%. This shortfall was anticipated, as 2025 is the first year the program is billing Medicaid for patient services, and actual revenue was expected to differ from projections.

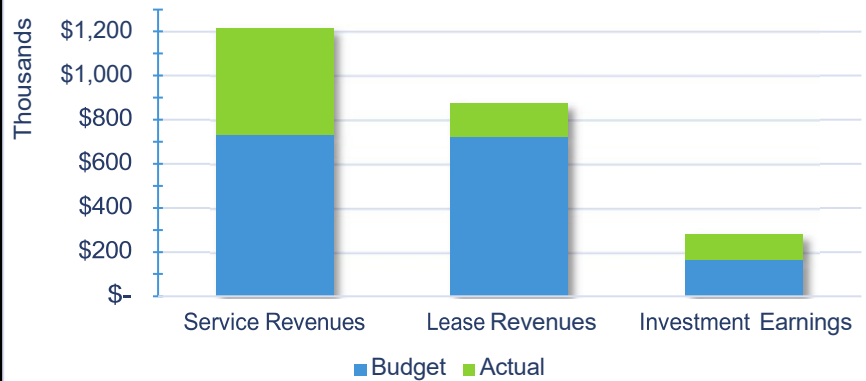
In contrast, Oral Health revenues significantly outperformed expectations, driven by both strong patient service activity and a one-time recognition of \$418K in previously unbilled Medicaid revenue from 2024. Excluding this one-time item, Oral Health has still exceeded its service revenue budget by 39%.

Lease Revenue was budgeted cautiously due to uncertainty around office space utilization at the time the budget was developed. Similarly, Investment Earnings were projected conservatively in response to economic volatility.

It is also important to note that over 95% of 2025 Tax Revenues have already been received from Larimer County. As a stable and predictable source of income, we expect only minor adjustments from abatements and gradual receipt of the remaining funds over the rest of the year.

Service, Lease, and Investment Revenues...

were ahead of budget by a combined \$749K. Accounting for 92% of the revenue surplus of \$811K.



EXPENSE ANALYSIS

Total expenditures were \$752K below budget, reflecting strong cost management across most areas. However, spending is expected to increase in the second half of 2025 as planned initiatives are implemented.

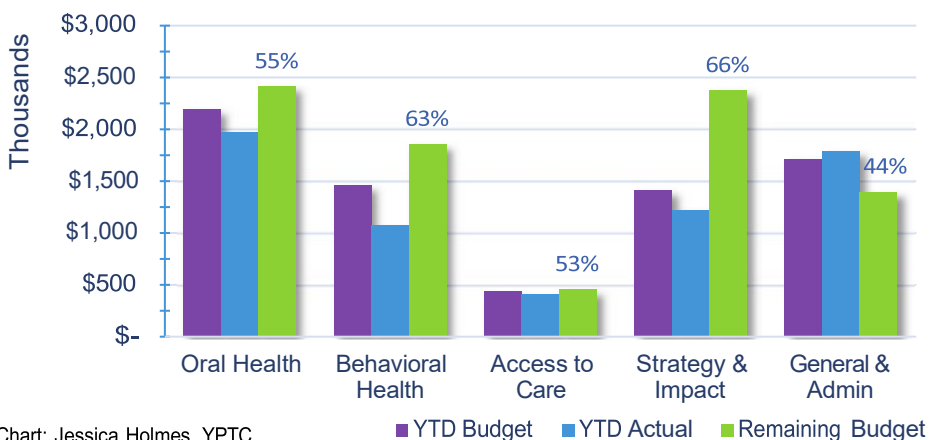
Personnel Compensation remains the District's largest expense, representing 66% of total spending. Despite this, it is currently \$976K under budget, contributing significantly to the overall savings.

General & Administrative expenses slightly exceeded budget, but savings in other areas are expected to offset this overage.

Strategy & Impact retained its full \$770K in Partnership funding, which is scheduled to be used in the second half of the year.

Overall Expense Performance

The District has 57% of total budgeted expenses remaining for the second half of the year, this indicates accurate overall budgeting with slight excess due to timing.



2025: Second Half Projections

While the Health District saw revenues significantly exceed budget for the first half of 2025 due to the front-loaded nature of property tax receipts, the financial pattern shifts in the second half.

2025: The First Six Months

For the first half of 2025, actual revenue was \$13.42M and expenses were \$6.46M.

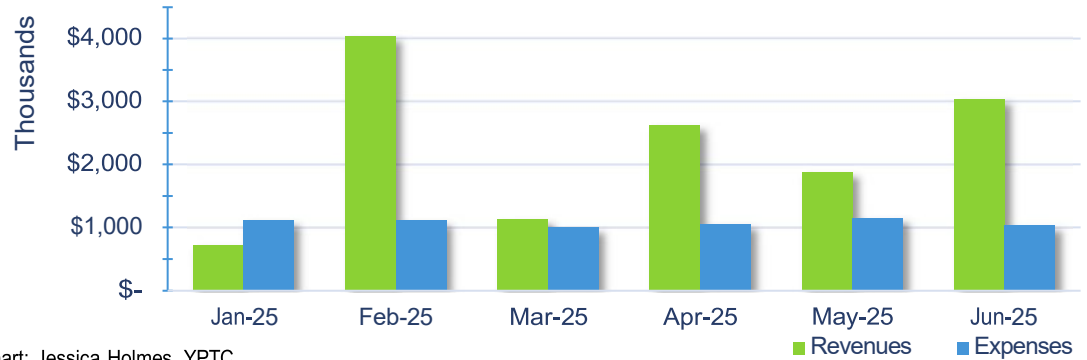


Chart: Jessica Holmes, YPTC

2025: The Next Six Months

Projections estimate revenue of \$2.13M and expenses of \$8.62M for the second half of 2025.

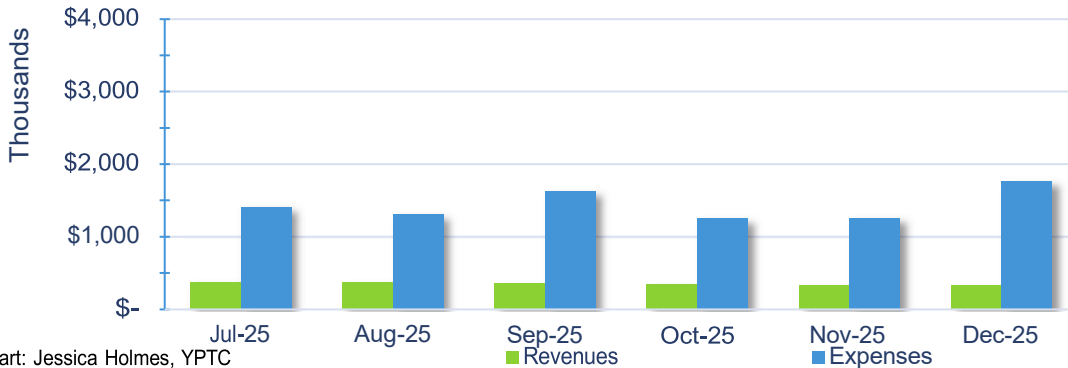


Chart: Jessica Holmes, YPTC

Based on reliable annual trends, the District expects limited revenue through year-end. Meanwhile, expenses are projected to increase, driven by active initiatives, seasonal program demands, and planned capital purchases.

Despite this shift, the District remains well-positioned to manage these costs within the approved budget. Current projections show a positive change in fund balance of \$472K at the end of 2025.

Projected to Outperform Budget by \$542K

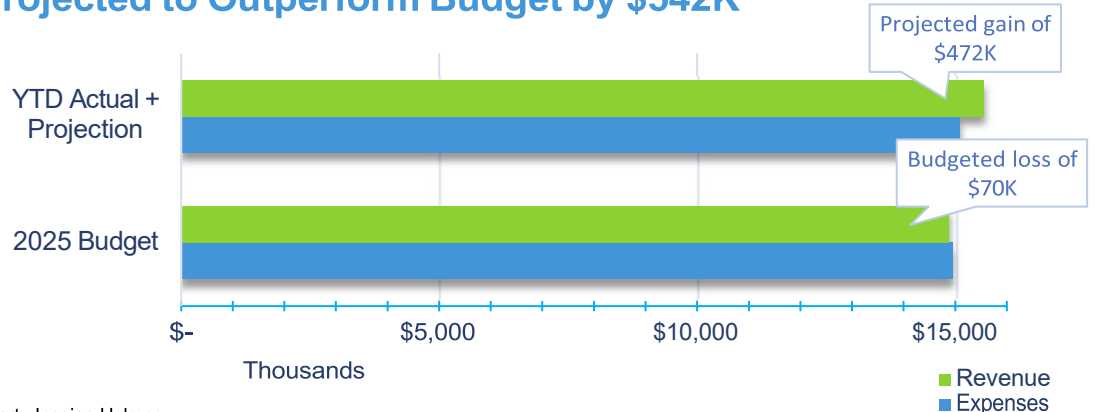


Chart: Jessica Holmes,

Health District of Northern Larimer County

Balance Sheets

Governmental Fund Financial Statements

As of June 30, 2025

	December 2024	June 2025	YTD Change
ASSETS			
Cash & Investments	11,994,048	16,531,484	4,537,436
Receivables			
Property Taxes	10,775,197	3,051,509	(7,723,687)
Specific Ownership Taxes	61,277	58,992	(2,285)
Clients, Net of Allowance	394,549	193,914	(200,635)
Leases	59,299,350	58,482,855	(816,495)
Grants & Other	73,933	31,096	(42,837)
Prepaid Expenses	94,867	130,055	35,187
TOTAL ASSETS	82,693,221	78,479,905	(4,213,316)
LIABILITIES, DEFERRED INFLOWS, & FUND BALANCE			
LIABILITIES			
Accounts Payable	228,461	252,240	23,780
Accrued Liabilities			
Payroll Liabilities	354,387	306,106	(48,281)
Treasurer Fees	(30)	54,532	54,562
Property Tax Escrow	40,539	20,860	(19,679)
Tenant Deposits	16,373	13,972	(2,400)
Unearned Revenue	168,765	83,133	(85,633)
TOTAL LIABILITIES	808,494	730,843	(77,651)
DEFERRED INFLOWS			
Property Tax Resources	10,776,854	325,285	(10,451,569)
Lease Resources	59,299,314	59,068,086	(231,228)
Service Resources	418,494	-	(418,494)
TOTAL DEFERRED INFLOWS	70,494,662	59,393,371	(11,101,291)
FUND BALANCE			
Nonspendable Funds - Prepaid Expenses	94,867	130,055	35,187
Restricted Funds - TABOR Reserve	470,801	470,801	-
Assigned Funds	7,472,610	7,472,610	-
Capital Funds	1,232,874	985,683	(247,191)
Unassigned Funds	2,118,912	9,296,542	7,177,631
TOTAL FUND BALANCE	11,390,064	18,355,691	6,965,627
TOTAL LIABILITIES, DEFERRED INFLOWS, & FUND BALANCE	82,693,221	78,479,905	(4,213,316)

The financial statements presented herein are prepared using the **modified accrual** basis of accounting as required for governmental fund types under GAAP & GASB.

Unaudited - For Management Use Only

Health District of Northern Larimer County

Statements of Revenues, Expenditures, & Changes in Fund Balance

Governmental Fund Financial Statements

For the Six Months Ended June 30, 2025

	Jan to May 2025	June 2025	YTD 2025
REVENUES			
Tax Revenues	8,017,161	2,785,216	10,802,377
Service Revenues, Net	1,167,115	45,990	1,213,105
Lease Revenues	753,235	119,998	873,233
Grant Funds	217,945	28,735	246,680
Other Revenues	231,458	57,659	289,117
TOTAL REVENUES	10,386,914	3,037,597	13,424,511
EXPENDITURES			
Personnel Compensation	3,572,504	668,990	4,241,494
Professional Development	79,992	12,824	92,816
Contracted Services	640,216	120,150	760,366
Service Expenses	248,751	102,671	351,423
Supplies, Equipment, & Software	176,310	(29,409)	146,900
Occupancy Expenses	221,029	29,371	250,400
Other Operating Expenses	271,916	96,378	368,295
Capital Expenditures	214,434	32,757	247,191
TOTAL EXPENDITURES	5,425,152	1,033,732	6,458,885
EXCESS/(DEFICIENCY) OF REVENUES OVER EXPENDITURES	4,961,762	2,003,865	6,965,627
CHANGE IN FUND BALANCE	4,961,762	2,003,865	6,965,627
Beginning Fund Balance	11,390,064	16,351,826	11,390,064
ENDING FUND BALANCE	16,351,826	18,355,691	18,355,691

*The financial statements presented herein are prepared using the **modified accrual** basis of accounting as required for governmental fund types under GAAP & GASB.*

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Health District of Northern Larimer County

Budget Comparison: Statement of Revenues, Expenditures, & Changes in Fund Balance

Governmental Fund Financial Statements

For the Six Months Ended June 30, 2025

	<u>YTD Budget</u>	<u>YTD Actual</u>	<u>\$ Difference</u>	<u>% Difference</u>	<u>2025 Budget</u>	<u>Budget \$ Remain</u>	<u>Budget % Remain</u>
REVENUES							
Tax Revenues	10,765,139	10,802,377	37,238	0.35%	11,361,432	559,055	4.92%
Service Revenues, Net	731,375	1,213,105	481,730	65.87%	1,462,750	249,645	17.07%
Lease Revenues	721,158	873,233	152,075	21.09%	1,304,044	430,811	33.04%
Grant Funds	219,274	246,680	27,406	12.50%	394,048	147,368	37.40%
Other Revenues	176,482	289,117	112,635	63.82%	352,964	63,847	18.09%
TOTAL REVENUES	12,613,428	13,424,511	811,083	6.43%	14,875,238	1,450,727	9.75%
EXPENDITURES							
Personnel Compensation	5,217,558	4,241,494	976,064	18.71%	10,435,115	6,193,621	59.35%
Professional Development	173,072	92,816	80,256	46.37%	345,893	253,077	73.17%
Contracted Services	722,300	760,366	(38,066)	-5.27%	1,444,600	684,234	47.36%
Service Expenses	285,065	351,423	(66,358)	-23.28%	1,340,129	988,706	73.78%
Supplies, Equipment, & Software	206,557	394,091	(187,535)	-90.79%	413,113	19,022	4.60%
Occupancy Expenses	234,731	250,400	(15,670)	-6.68%	469,461	219,061	46.66%
Other Operating Expenses	371,773	368,295	3,478	0.94%	496,902	128,607	25.88%
TOTAL EXPENDITURES	7,211,053	6,458,885	752,169	10.43%	14,945,213	8,486,328	56.78%
CHANGE IN FUND BALANCE	5,402,375	6,965,627	1,563,252	28.94%	(69,975)		
Beginning Fund Balance	11,390,064	11,390,064			11,390,064		
ENDING FUND BALANCE	16,792,439	18,355,691			11,320,089		

*The financial statements presented herein are prepared using the **modified accrual** basis of accounting as required for governmental fund types under GAAP & GASB.*

Unaudited - For Management Use Only

Health District of Northern Larimer County

Statement of Functional Expenses

Supplemental Financial Statement

For the Six Months Ended June 30, 2025

	Client Experience	Strategy & Impact	Total Program Operations	General & Administration	Health District
REVENUES					
Tax Revenues	-	-	-	10,802,377	10,802,377
Service Revenues, Net	1,168,609	44,496	1,213,105	-	1,213,105
Lease Revenues	-	-	-	873,233	873,233
Grant Funds	219,180	27,500	246,680	-	246,680
Other Revenues	4,142	-	4,142	284,975	289,117
TOTAL REVENUES	1,391,930	71,996	1,463,926	11,960,585	13,424,511
EXPENDITURES					
Personnel Compensation	2,327,771	899,105	3,226,876	1,014,618	4,241,494
Professional Development	47,800	18,065	65,866	26,950	92,816
Contracted Services	389,604	156,442	546,046	214,320	760,366
Service Expenses	314,778	11,333	326,111	25,311	351,423
Supplies, Equipment, & Software	221,909	69,796	291,705	102,386	394,091
Occupancy Expenses	117,265	60,030	177,295	73,105	250,400
Other Operating Expenses	32,068	6,740	38,808	329,486	368,295
TOTAL EXPENDITURES	3,451,196	1,221,511	4,672,707	1,786,177	6,458,885
IMPACT TO FUND BALANCE	(2,059,266)	(1,149,515)	(3,208,781)	10,174,408	6,965,627
					11,390,064
					18,355,691

The financial statement presented herein is prepared using the **modified accrual** basis of accounting as required for governmental fund types under GAAP & GASB.

Unaudited - For Management Use Only



AGENDA DOCUMENTATION

Meeting Date: August 28, 2025

SUBJECT: Executive Director/ Chief Executive Officer Search Advisory Committee

PRESENTER: Erin Hottenstein

OUTCOME REQUESTED: ☒ **X** **Decision** ☐ **Consent** ☐ **Report**

PURPOSE/ BACKGROUND

To establish a working subcommittee for the executive director/chief executive officer search to be a liaison with the selected contractor, CPS HR Consulting.

Attachment(s): None.

FISCAL IMPACT: N/A

STAFF RECOMMENDATION: None.



MEMORANDUM

TO: Board of Directors

FROM: Erin Hottenstein, Board President

DATE: August 6, 2025

RE: CEO Search Committee Parameters

At the August 28, 2025 Board of Directors meeting, we will need to establish parameters for the CEO search sub-search committee.

The Board of Directors will need to consider if there is a need for an outside committee including community involvement or invite outside participants they are looking at to be on the committee including what the time commitment looks like referencing the CPS timeline below.

The Decision will include thoughts on a transitional leader vs a permanent leader.

If you are interested pls see the time commitment outlined by CPS below

Committee Time Commitment Considerations:

- Initial meeting to discuss candidate attributes and provide feedback on materials: 90-135 minutes total
- Weekly updates review during 30-day recruitment period: Few minutes per week
- Candidate resume review and consensus meeting: 2-3 hours
- Semi-final and final interviews: 5-12 hours depending on number of candidates and interview rounds (2-4 week timeframe)



**Health District of Northern Larimer County
Resolution No. 2025-12**

A Resolution of the Board of Directors of the Health District of Northern Larimer County Establishing an Ad Hoc Advisory Committee to the Search Committee for its Executive Director Hiring Process

Whereas, the Colorado Open Meeting Law, C.R.S. § 24-6-402, *et seq.* ("OML") and the Colorado Open Records Act, C.R.S. § 24-72-200.1, *et seq.* ("CORA"), set forth legal requirements for hiring the Health District's next Executive Director;

Whereas, the Health District designated the Board of Directors (the "Board") as the search committee (the "Search Committee") for hiring an Executive Director of the Health District pursuant to CORA, and

Whereas, pursuant to Board Policy 01-01, the Board desires to establish an ad hoc Advisory Committee to the Search Committee.

Now Therefore be it Resolved by the Board of Directors of the Health District of Northern Larimer County that:

Section 1. The ad hoc Advisory Committee to the Search Committee is hereby established, subject to the requirements of Board Policy 01-01.

Section 2. The Advisory Committee members are hereby appointed as follows:

1. _____
2. _____
3. _____
4. _____
5. _____

Section 3. Pursuant to Section 3 of Board Policy 01-01, the staff liaison to the Advisory Committee shall be _____.

Section 4. Pursuant to Section 1 of Board Policy 01-01, the Board shall establish a Charter of the Advisory Committee.

Adopted this 28th day of August, 2025.



Erin Hottenstein, President

Attest:

Sarah Hathcock, Secretary



AGENDA DOCUMENTATION

Meeting Date: August 28, 2025

SUBJECT: Board Meeting Schedule for Remainder of 2025

PRESENTER: Erin Hottenstein

OUTCOME REQUESTED: ☒ **Decision** ☐ **Consent** ☐ **Report**

PURPOSE/ BACKGROUND

To determine an ongoing regular meeting day and time for the remaining 2025 Board of Directors meetings.

Attachment(s): None.

FISCAL IMPACT: N/A

STAFF RECOMMENDATION: None.



AGENDA DOCUMENTATION

Meeting Date: August 28, 2025

SUBJECT: September Special Meeting of the Board of Directors

PRESENTER: Erin Hottenstein

OUTCOME REQUESTED: ☒ Decision ☐ Consent ☐ Report

PURPOSE/ BACKGROUND

To determine if a special meeting of the Board of Directors is needed in September.

Attachment(s): None.

FISCAL IMPACT: N/A

STAFF RECOMMENDATION: None.



Resolution 2025-03

**RESOLUTION TO ESTABLISH
MEETING DAYS AND TIMES FOR BOARD OF DIRECTORS MEETING**

NOW, THEREFORE, BE IT RESOLVED BY THE Board of Directors of the Health District of Northern Larimer County, Fort Collins, Colorado, as follows:

That the Health District of Northern Larimer County Board of Directors regular meetings for 2025 shall normally be held on the following days and times:

- September 24, 2025 at 6:00pm
- October 22, 2025 at 6:00pm
- November 19, 2025 at 6:00pm
- December 10, 2025 at 6:00pm

ADOPTED, this 28th day of August, A.D., 2025.

Attest:

Erin Hottenstein, President

Lee Thielen, Vice President

Sarah Hathcock, Secretary

Julie Kunce Field, Treasurer

John McKay
UC Health-North/PVHS Board Liaison



AGENDA DOCUMENTATION

Meeting Date: August 28, 2025

SUBJECT: Signatories for Access to Safe Deposit Boxes

PRESENTER: Courtney Green

OUTCOME REQUESTED: ☒ **Decision** ☐ **Consent** ☐ **Report**

PURPOSE/ BACKGROUND

To update the signatories for the Health District safety deposit boxes to align with current Board of Director roles and organizational leadership.

Attachment(s): Resolution 2025-4; Resolution 2025-5; Resolution 2025-6; Resolution 2025-7; Resolution 2025-8; Resolution 2025-9.

FISCAL IMPACT: N/A

STAFF RECOMMENDATION: Staff recommends that the Board approve a change of the signatories for access to Health District safety deposit boxes.



**RESOLUTION TO APPROVE SIGNATORS
FOR ACCESS TO
SAFE DEPOSIT BOX 2219**

Resolution 2025-04

BE IT RESOLVED BY THE Board of Directors of the Health District of Northern Larimer County that any one of the following signators are approved to have access to the Health District's Safety Deposit Box 2219 at the First National Bank, 205 West Oak Street, Fort Collins, Colorado.

Approved for Signatures

Courtney Green, Acting Interim Executive Director
Michele "Misty" Manchester, Director of People and Business Operations
Erin Hottenstein, Board President
Julie Field, Board Treasurer

ADOPTED, this 28th day of August, A.D., 2025.

Attest:

Erin Hottenstein, President

Lee Thielen, Vice President

Sarah Hathcock, Secretary

Julie Kuncle Field, Treasurer

John McKay
UC Health-North/PVHS Board Liaison

Replaces the Following Resolution:
2012-5 Adopted September 6, 2012
2014-11 Adopted May 21, 2014
2016-15 Adopted July 21, 2016
2018-13 Adopted Sept. 25, 2018
2019-04 Adopted March 28, 2019

Resolution 2025-04



**RESOLUTION TO APPROVE SIGNATORS
FOR ACCESS TO
SAFE DEPOSIT BOX 3017**

Resolution 2025-05

BE IT RESOLVED BY THE Board of Directors of the Health District of Northern Larimer County that any one of the following signators are approved to have access to the Health District's Safety Deposit Box 3017 at the First National Bank, 205 West Oak Street, Fort Collins, Colorado.

Approved for Signatures

Courtney Green, Acting Interim Executive Director
Michele "Misty" Manchester, Director of People and Business Operations
Erin Hottenstein, Board President
Julie Field, Board Treasurer

ADOPTED, this 28th day of August, A.D., 2025.

Attest:

Erin Hottenstein, President

Lee Thielen, Vice President

Sarah Hathcock, Secretary

Julie Kunce Field, Treasurer

John McKay
UC Health-North/PVHS Board Liaison

Replaces the Following Resolution:

2012-5 Adopted September 6, 2012
2014-11 Adopted May 21, 2014
2016-15 Adopted July 21, 2016
2018-13 Adopted Sept. 25, 2018
2019-04 Adopted March 28, 2019

Resolution 2025-05



**RESOLUTION TO APPROVE SIGNATORS
FOR ACCESS TO
SAFE DEPOSIT BOX 4919**

Resolution 2025-06

BE IT RESOLVED BY THE Board of Directors of the Health District of Northern Larimer County that any one of the following signators are approved to have access to the Health District's Safety Deposit Box 4919 at the First National Bank, 205 West Oak Street, Fort Collins, Colorado.

Approved for Signatures

Courtney Green, Acting Interim Executive Director
Michele "Misty" Manchester, Director of People and Business Operations
Erin Hottenstein, Board President
Julie Field, Board Treasurer

ADOPTED, this 28th day of August, A.D., 2025.

Attest:

Erin Hottenstein, President

Lee Thielen, Vice President

Sarah Hathcock, Secretary

Julie Kunce Field, Treasurer

John McKay
UC Health-North/PVHS Board Liaison

Replaces the Following Resolution:

2012-5 Adopted September 6, 2012
2014-11 Adopted May 21, 2014
2016-15 Adopted July 21, 2016
2018-13 Adopted Sept. 25, 2018
2019-04 Adopted March 28, 2019

Resolution 2025-06



**RESOLUTION TO APPROVE SIGNATORS
FOR ACCESS TO
SAFE DEPOSIT BOX 5542**

Resolution 2025-07

BE IT RESOLVED BY THE Board of Directors of the Health District of Northern Larimer County that any one of the following signators are approved to have access to the Health District's Safety Deposit Box 5542 at the First National Bank, 205 West Oak Street, Fort Collins, Colorado.

Approved for Signatures

Courtney Green, Acting Interim Executive Director
Michele "Misty" Manchester, Director of People and Business Operations
Erin Hottenstein, Board President
Julie Field, Board Treasurer

ADOPTED, this 28th day of August, A.D., 2025.

Attest:

Erin Hottenstein, President

Lee Thielen, Vice President

Sarah Hathcock, Secretary

Julie Kunce Field, Treasurer

John McKay
UC Health-North/PVHS Board Liaison

Replaces the Following Resolution:

2012-5 Adopted September 6, 2012
2014-11 Adopted May 21, 2014
2016-15 Adopted July 21, 2016
2018-13 Adopted Sept. 25, 2018
2019-04 Adopted March 28, 2019

Resolution 2025-07



**RESOLUTION TO APPROVE SIGNATORS
FOR ACCESS TO
SAFE DEPOSIT BOX 5546**

Resolution 2025-08

BE IT RESOLVED BY THE Board of Directors of the Health District of Northern Larimer County that any one of the following signators are approved to have access to the Health District's Safety Deposit Box 5546 at the First National Bank, 205 West Oak Street, Fort Collins, Colorado.

Approved for Signatures

Courtney Green, Acting Interim Executive Director
Michele "Misty" Manchester, Director of People and Business Operations
Erin Hottenstein, Board President
Julie Field, Board Treasurer

ADOPTED, this 28th day of August, A.D., 2025.

Attest:

Erin Hottenstein, President

Lee Thielen, Vice President

Sarah Hathcock, Secretary

Julie Kunce Field, Treasurer

John McKay
UC Health-North/PVHS Board Liaison

Replaces the Following Resolution:

2012-5 Adopted September 6, 2012
2014-11 Adopted May 21, 2014
2016-15 Adopted July 21, 2016
2018-13 Adopted Sept. 25, 2018
2019-04 Adopted March 28, 2019

Resolution 2025-08



**RESOLUTION TO APPROVE SIGNATORS
FOR ACCESS TO
SAFE DEPOSIT BOX 5742**

Resolution 2025-09

BE IT RESOLVED BY THE Board of Directors of the Health District of Northern Larimer County that any one of the following signators are approved to have access to the Health District's Safety Deposit Box 5742 at the First National Bank, 205 West Oak Street, Fort Collins, Colorado.

Approved for Signatures

Courtney Green, Acting Interim Executive Director

Michele "Misty" Manchester, Director of People and Business Operations

Erin Hottenstein, Board President

Julie Field, Board Treasurer

ADOPTED, this 28th day of August, A.D., 2025.

Attest:

Erin Hottenstein, President

Lee Thielen, Vice President

Sarah Hathcock, Secretary

Julie Kunce Field, Treasurer

John McKay
UC Health-North/PVHS Board Liaison

Replaces the Following Resolution:

2012-5 Adopted September 6, 2012
2014-11 Adopted May 21, 2014
2016-15 Adopted July 21, 2016
2018-13 Adopted Sept. 25, 2018
2019-04 Adopted March 28, 2019

Resolution 2025-09



AGENDA DOCUMENTATION

Meeting Date: August 28, 2025

SUBJECT: Resolution 2025-10: Board Public Policy Committee

PRESENTER: Alyson Williams

OUTCOME REQUESTED: ☒ **X** **Decision** ☐ **Consent** ☐ **Report**

PURPOSE/ BACKGROUND

During the December 10, 2024, regular meeting of the Board of Directors, the Board established a Board Public Policy Committee for the 2025 legislative session and appointed the Board President and Board Assistant Treasurer. With the preparation for 2026 legislative session beginning in January commencing and the increase in federal policy issues, the Board Public Policy Committee may begin to convene again.

Board Policy 99-7 Section: POLICY, Process: *In order to comport with the section related to “When time does not allow for discussion at a regularly scheduled board meeting,” the Policy Committee is made up of two members of the Board who can meet at an agreed-upon cadence in order to engage in policy work between regular meetings. Per 99-7, any direction given by the Public Policy Committee is subject to ratification or withdrawal by the full Board at its next public meeting. The Board will continue to receive regular electronic communication regarding updates during legislative session.*

Attachment(s): Board Policy 99-7, Resolution 2025-10

FISCAL IMPACT: N/A

STAFF RECOMMENDATION: In accordance with Board Policy 99-7, staff recommends that the Board move to adopt Resolution 2025-10 to establish and appoint two Board members to the Board Public Policy Committee, the first being the President and the second being a member to be selected by a majority of the Board.



**Health District of Northern Larimer County
Resolution No. 2025-10**

A Resolution of the Board of Directors of the Health District of Northern Larimer County Formally Establishing and Appointing Board Members to the Board Public Policy Committee

Whereas, the Board of Directors of the Health District of Northern Larimer County wishes to establish a Board Public Policy Committee in furtherance of Board Policy 99-7; and

Whereas, the Board wishes to appoint two Board members to the Board Public Policy Committee.

Now Therefore be it Resolved by the Board of Directors of the Health District of Northern Larimer County that:

Section 1. The Board Public Policy Committee is hereby established in furtherance of Board Policy 99-7.

Section 2. On behalf of the District, the following Board members are hereby appointed to the Board Public Policy Committee for the 2026 legislative session:

a. _____; and

b. _____.

Adopted this 28th day of August, 2025.

Erin Hottenstein, President

Attest:

Sarah Hathcock, Secretary



AGENDA DOCUMENTATION

Meeting Date: August 28, 2025

SUBJECT: H.R. 1 Updates

PRESENTER: Alyson Williams and Dana Turner

OUTCOME REQUESTED: ☐ Decision ☐ Consent ☒ Report

PURPOSE

With the passage of H.R. 1- One Big Beautiful Bill Act (OBBA) there are significant systemic changes that will be implemented over the coming years that will have a substantial impact on our community. This report will be the first of many as staff work to develop strategies and recommendations to the Board to respond to impacts on the community and develop possible tactics to reduce harm in a collaborative and intentional manner. This report along with ongoing staff work surrounding the Health District's response to the implementation of H.R. 1 align with the following components within our organizational strategic plan:



Great Governance | Objective 3.2: Shape Health District policy to promote positive health outcomes and operational excellence.



Operational Excellence | Goal 3: Strengthen communication functions and strategy, both internally and externally, and promote conditions that improve visibility, organizational transparency, and use of programs and services.



Partnerships | Goal 2: Build and strengthen partnerships that maximize impact on community health.

Attachment(s): none

FISCAL IMPACT

None

STAFF RECOMMENDATION

N/A

2026 Budget Process & Timeline

Phase	Start	End	Description	Assigned
Initiation	8/11/2025	8/27/2025	Planning, Template Development, & Kick-Off Meetings	Finance Budget Team
Execution	8/22/2025	9/24/2025	Creation & Completion of Budget Proposals by Finance & Leadership	Finance, Health District Leadership
Review	9/25/2025	10/8/2025	Executive Review & Adjustment Period	Finance, Executive Team
	10/9/2025	10/14/2025	Preparation of 2026 Proposed Budget Package	Finance, Executive Team
Evaluation	10/15/2025	10/15/2025	2026 Proposed Budget Delivered to Board of Directors	Executive Team
	10/15/2025	10/23/2025	Board Review of 2026 Proposed Budget	Board of Directors
	10/23/2025	10/23/2025	Board Meeting – 2026 Budget Review Session	Board, Executive Team, Finance
	11/19/2025	11/19/2025	Post Notice of Public Hearing	Executive Team
	11/20/2025	11/20/2025	Board Meeting – 2026 Budget Public Hearing	Board, Executive Team, Public
Finalization	12/11/2025	12/11/2025	Board Meeting – Required Board Actions:	Board, Executive Team
			Resolution to Adopt the 2026 Budget	Board of Directors
			Resolution to Set Mill Levies	
	12/15/2025	12/15/2025	Resolution to Appropriate Funds	Executive Team
			Submission of Mill Levy Certification to Larimer County	
	12/15/2025	12/31/2025	Approved 2026 Budget Returned to Departments & Programs	Finance Budget Team
	1/31/2025	1/31/2025	Submission of a certified copy of the budget to CO DOLA	Executive Team

Statutory Deadlines & Key Dates

Date		Description
8/25/2025	External	Certification of Valuation due to districts from the Larimer County Assessor (C.R.S. 39-5-128).
10/15/2025	Statutory Deadline	2026 Proposed Budget due to the Board of Directors (C.R.S. 29-1-105).
10/23/2025	Board Meeting	2026 Budget Review Session
11/19/2025	Notice Deadline	"Notice of Budget" to be published with public hearing details at least 24 hours in advance (C.R.S. 29-1-106).
11/20/2025	Board Meeting	2026 Public Budget Hearing
12/10/2025	External	Re-Certification of Valuation due to districts from the Larimer County Assessor (C.R.S. 39-5-128(1)).*
12/11/2025	Board Meeting	To comply with regulatory deadlines, the Board must adopt the 2026 Budget, Certify the Mill Levy, and enact the resolution to appropriate funds at this meeting.
12/15/2025	Statutory Deadline	Submission deadline for Certification of Mill Levies to Larimer County Commissioner (C.R.S. 39-5-128(1)). <u>Note:</u> Districts levying A property tax must adopt their budgets before certifying levies (C.R.S. 29-1-108(2)).
12/22/2025	External	Deadline for county commissioners to levy against the assessed valuation of taxable property (C.R.S. 39-1-111(1)).
12/31/2025	Statutory Deadline	Deadline for the Board to enact "Resolution to Appropriate Funds" for 2026 (C.R.S. 29-1-108(4)).
1/31/2026	Statutory Deadline	Deadline to file a certified copy of the adopted budget with DOLA (C.R.S. 29-1-113(1)). (Colorado Department of Local Affairs : Division of Local Government)

* When the Assessor re-certifies the property tax valuation, if the valuation amount has changed from the August certification this will change the amount of tax dollars levied. Changes are usually immaterial. The affect of the change will be communicated if applicable.



AGENDA DOCUMENTATION

Meeting Date: August 28, 2025

SUBJECT: Executive Director Report

PRESENTER: Courtney Green

OUTCOME REQUESTED: ☐ Decision ☐ Consent ☒ Report

Please find the Executive Director Staff Report attached with current program updates.

- **MEETINGS**

The Executive Director met with the following community partners and attend the following meetings/events since the June 26, 2025 board meeting:

- Dr. Janell Wozniak and Marcia Snook- UCHealth Family Medicine Center
- Jennifer Hale-Colson, Kayla Garlow, and Raina Ali - Northeast Health Partners
- Lindsey Lord – The Compliance Group
- Special District Association Workshop
- Liz Zasada - BidNet Training
- Justin Lanning – Mindoula
- Mary Randall – Dentrrix
- Kirk Bane, Jim Otepka – ICC
- Amber Blake – ABC Consulting
- Yashica Lind – The Lind Group
- Sharon Hicks, Kim Bond, Michael Allen, Stuart Buttlair – Open Minds
- Dr. Stacie Johns and Casey Cash – The Iris Center
- Angela Heyroth – Talent Centric Design
- Chamber of Commerce – Adapting Change Presentation
- CEBT – Ben Puetz and Micayla Jorgenson
- Frontline Public Affairs – Lisa Ward and Jennifer Miles

- **Other Updates**

- 1. Board of Directors Orientation and Training**

- Two out of four of the contracted trainings have been complete. The remaining two sessions will be scheduled in November 2025 and February of 2026.

- 2. Board of Directors Strategic Planning**

- Amber Blake facilitated board questionnaires, interviews, as well as 4 hours of the 2024-2027 Strategic Plan Refresh on 8/20/2025.

- 3. Client Campus Update**

- Client services housed at the Mulberry location were successfully relocated to the Bristlecone campus on July 25, 2025. To ensure there was appropriate office space for these staff, 10 administrative employees moved to the Shields location.

- 4. Compensation**

- As a reminder, the 2025 budget included compensation increases for Support staff, Technical staff, program-level managers and professional staff.

There we no increases for providers, Director-level or Executive staff.
Due to the current financial position of the organization, those who were eligible to receive the raise in January, but did not due to position, were granted a mid year adjustment of 2%.

Attachment(s):

- August 2025 Program Updates

- Budget Analyst started on June 16th.
- The full team has been working diligently on testing the new accounting software.



Organizational Excellence | Strategy 2.1.1: Assess operational functions of enabling services and programs.



Organizational Excellence | Strategy 2.1.2: Develop operational plans to enhance efficiency.



Organizational Excellence | Strategy 2.2.5: Provide staff with training and support.

Looking forward:

- We are continuing to work in tandem with the Controller/Chief Financial Officer (CFO) from Your Part-Time Controller (YPTC) providing financial oversight:
 - Assessing processes
 - Creation of financial reports
 - Internal control processes
 - Creation of Policies and Procedures



Organizational Excellence | Strategy 2.1.2: Develop operational plans to enhance efficiency.



Organizational Excellence | Strategy 2.1.1: Assess operational functions of enabling services and programs.

- The testing phases of the cloud based Oracle NetSuite Financial Accounting System are wrapping up.
- We have finished system design and data uploads to the system are complete.
- We are set to go “live” with the system on September 1st.
- NetSuite Planning and Budgeting platform is in the design phase and will go live sometime in October.



Organizational Excellence | Strategy 2.2.2: Update financial system, including technologies, policies, processes, and an Internal Controls Examination.

- HR onboarded the Lead Dentist and an offer has been extended for a dental front office associate and a lead dental front office associate position. As of August 14, seven open positions are posted, and three positions are currently in the interview phase.
- An employee engagement survey was sent to staff in July. Results and key trends will be shared with the Board and staff.
- The Annual company picnic was well attended. Staff and their families enjoyed barbeque games and general relaxation and conversation.



Organizational Excellence | Strategy 1.3.1: Assess and enhance the existing HR lifecycle

Looking forward:

- Payroll is up and running in UKG and we have initiated the first annual performance review. We are also working on implementing the recruitment module.



Organizational Excellence | Strategy 2.3.1: Deploy a modernized IT infrastructure that enables seamless access to information and resources.



Organizational Excellence | Strategy 1.4.3: Develop the infrastructure and processes to track and monitor the training and development provided.

- Training opportunities for staff have been assessed and dates will be determined at a later date. (Examples: Customer service, CPR, AED, etc.)



Organizational Excellence | Strategy 1.4.1: Assess and identify training and professional development needs based on input and feedback from staff.



Organizational Excellence | Strategy 1.4.2: Provide high-quality, year-round staff development and leadership training across all levels of the organization.

- Collaborative work continues with the Health Equity Strategist and a one-on-one meeting with new hire is part of the orientation schedule. An HR team member is part of the Health Equity Action Team (HEAT).



Health Equity | Strategy 2.1: Integrate values of equity, diversity, inclusion, and justice (EDIJ) in Health District operations, practices, and partnerships.



Organizational Excellence | Strategy 1.3: Be an employer of choice in Larimer County by integrating an “excellence and equity lens into all employment process and the HR lifecycle. Assess and enhance the existing HR lifecycle.

- HR has contracted with an HR Consultant to revise our current handbook and HR Policies.

Communications

Communications is largely through the discovery phase of the web redesign process, having identified key goals, challenges and expectations for the project. The main objective is creating a more user-friendly, intuitive site that's visually appealing, accessible and streamlined, with greater mobile responsiveness. As part of the information architecture, we're prioritizing clear respective journeys for audiences, SEO considerations and content management needs.



Organizational Excellence | Objective 3.3: Improve consistency and efficiency in communications processes and products across the organization. **(Status: Ongoing/In Progress)**

Communications held the first in a series of focus groups for internal communications to better determine what types of content staff wanted for staying informed and engaged. This was in response to the relaunch of an updated intranet (temporary platform until we can apply the website redesign platform). We plan to keep the intranet a living project to continually make refinements as needs evolve. Since the relaunch, readership is up by 28%.



Great Governance | Objective 3.1: Enhance transparent and effective internal and external communication. **(Status: Ongoing/In Progress)**

- Communications has the following vacancies:
 - 1 FTE Graphic Designer (currently posted)
 - 1 FTE Digital Media Specialist (currently posted)
 - 1 FTE Managing Editor

Facilities

- The team has an 78% completion rate as 28 of 36 work orders submitted, through MaintainX, in the past 30 days were completed.



Organizational Excellence | Strategy 2.3.4: Leverage analytic technology to support enhanced data-driven decision-making and operations.

- Facilities successfully relocated staff to from the Client Campus
- 10 Administrative staff were moved to 2001 Shields.
- MHC was moved to 120 Bristlecone
- Facilities finalized lease negotiations with Sanbell at 425 Mulberry. They will continue to occupy 35% of the building.



Organizational Excellence | Strategy 2.4: Strengthen facilities and infrastructure management to enable the delivery of high-quality services and support the continuity of operations.

Information Technology (IT)

- Facilities continues to work with ICC for IT consulting and support needs.
 - A total of 221 IT work orders have been received from staff in the past 30 days.
- HD has renewed our contract with Barracuda, our cybersecurity vendor.
- HD will be conducting a full Cybersecurity audit starting 8/28.
- HD relocated 16 staff members and fulfilled their IT needs.



Organizational Excellence | Strategy 2.3 Strengthen IT management and infrastructure to enable the delivery of high-quality services and support the continuity of operations.



Organizational Excellence | Strategy 2.2:1 Deploy a modernized IT infrastructure that enables seamless access to information and resources.



Organizational Excellence | Strategy 2.3.4: Leverage analytic technology to support enhanced data-driven decision-making and operations.

Strategic Plan

- Compliance is working on a strategic plan that aligns with the organizational strategic plan to implement best practices and ensure the Health District is complying with applicable laws and regulations.



Organizational Excellence | Strategy 2.1.2: Develop operational plans to enhance efficiency.

Elections

- The SOP (Standard Operating Procedure) for the election was finalized in July 2025. This is an invaluable resource that will assist in future elections to increase participation as well as efficiency in running elections in the future.



Organizational Excellence | Strategy 2.1.2: Develop operational plans to enhance efficiency.

Compliance Group/The Guard

- Compliance Group is our new Compliance tracking software. It has 3 main staff-facing components – Training, Incident Portal, and Policies and Procedures. The first component that was rolled out in July was a staff-wide annual HIPAA training. It's best practice to have health organizations complete an annual HIPAA training. This first phase was a phenomenal success, and the Health District received a score of 100% staff completion of the annual HIPAA training. The next roll out of Compliance Group will be the Incident Portal. Staff will be trained on the use of the Incident Portal and will serve as the Health District's "hotline" for employees to report any potential compliance issues. Later, the Policies and Procedures tab will be used to house the Health District's policies for easy staff access.



Organizational Excellence | Strategy 1.4.2: Provide high-quality, year-round staff development and leadership training across all levels of the organization.



Organizational Excellence | Strategy 1.2.2: Provide staff training and support.

- Compliance Group also has admin-facing risk assessments which will be performed. This is to ensure the Health District is complying with applicable rules and laws and following best practices. This audit is projected to roll out in 2025.



Organizational Excellence | Strategy 2.5.3: Assess compliance risks within and across Health District services and operations.

Special Projects

- Compliance is working with Mental Health Connections and Open Minds in assessing program compliance and best practices.
- Compliance is also working with CPS HR Consulting in developing the employee handbook and developing policies and procedures.



Organizational Excellence | Strategy 2.5.2: Review, evaluate, and adjust policies and procedures for internal controls.

Family Dental Clinic

- The Family Dental Clinic has completed a robust workflow analysis with a specialized Dentrix (Dental EHR) software trainer. This work enables a multi-pronged approach to improve financial workflow and payment collection, patient experience, and streamline administrative and clinical workflow processes. This is a timely venture with the upcoming upgrade of three dental operatories.
- Dental Patient Care Coordinators have launched a meaningful new partnership with the Murphy Center, where they now host regular Listening Sessions. Listening sessions provide an opportunity for individuals at the Murphy Center to ask questions, learn about dental services, and receive help with paperwork, all part of Dental Clinic's effort to make oral health care more accessible and build trust with the community.
- The Dental team is thrilled to welcome Dr. Kelly Halligan, the new Lead Dentist, who began on August 11. Dr. Halligan brings a wealth of experience in public health dentistry and will be a strong clinical and strategic voice on the team.
- Leadership is currently evaluating strategic opportunities to improve the Health District's ability to remain competitive for hard to fill clinical positions in a tight market.
- The Dental team continues to lean into learning and growth, actively engaging in small-group sessions with the Health Equity Strategist to embed an equity lens into Clinic operations. Energy and curiosity among staff are strong and are driving meaningful changes.

This work aligns with the following strategic priorities:



Organizational Excellence | Objective 1.4: Attract and employ diverse and highly qualified staff, retain staff through development and growth opportunities, and promote staff to address increasingly complex challenges. **(Status: Ongoing/In Progress)**



Organizational Excellence | Objective 2.1: Audit and update processes and workflows among programs, services, and enabling functions. **(Status: Ongoing/In Progress)**



Organizational Excellence | Strategy 3.2.1: Assess existing support efforts for community partnerships and partner engagement to identify needs and opportunities. **(Status: Ongoing/In Progress)**



Health Equity Objective 3.1: Improve outreach to clients and Health District residents through providing diverse, effective, and inclusive outreach avenues. **(Status: Ongoing/In Progress)**



Partnerships | Strategy 1.1.1: Enhance critical partnerships with new and existing partners. **(Status: Ongoing/In Progress)**

- The Family Dental Clinic has the following vacancies:
 - 1 (1.0) FTE Dental Hygienist (currently posted)
 - 1 PRN Dental Hygienist (currently posted/ongoing)
 - 1 (1.0) FTE Front Office Associate (posting in progress)
 - 1 (1.0) FTE Dental Assistant (posting in progress)

Health Care Access (Larimer Health Connect & Prescription Assistance)

Larimer Health Connect (LHC)

- The LHC team remains dedicated to assisting individuals and families with health coverage needs, including Medicare, life change events, Medicaid and CHP+ renewals, case troubleshooting and advocacy.
- Given continuous changes at the federal level, leadership is working with the team to closely monitor legislative updates and funding developments from the Health Insurance Affordability Enterprise and the potential impacts of reduced funding for the 2026 plan year.
- The team and leadership are proactively connecting with key partners to better understand community needs, identify service gaps, and explore opportunities to provide support—particularly given the increasing challenges around capacity and funding. Conversations have resulted in LHC assisting customers directly at partner locations. With federal changes on the horizon and anticipated cuts to Connect for Health Colorado’s financial assistance programs taking effect this year, the LHC Manager reconnected with the Larimer County Department of Human Services team to discuss coordination opportunities and ways to increase support during these difficult times. The County informed the LHC Manager of recent rule changes aimed at strengthening local networks to help individuals access Medicaid and shared that they have received a grant to support this effort. They are working to provide additional details on the funding and how LHC may collaborate to ensure customers have access to Medicaid coverage.
- The team continues to collaborate with the Outreach and Education team at community events, giving presentations, providing program information, and assisting with on-site enrollment when appropriate. LHC recently partnered with Poudre Libraries to utilize their Harmony location during evening and weekend hours for the upcoming Open Enrollment period. The team also continues to visit The Family Center/La Familia and the Community Life Center monthly to answer health coverage questions and assist with applications.
- LHC has supported Colorado State University’s (CSU) Community for Excellence Network by guiding several international students through the Health First Colorado application in real-time via Microsoft Teams.

This work aligns with the following strategic priorities:



Great Governance | Strategy 3.2.1: Assess local, state, and federal policies impacting the health of Health District residents and organizational operations. **(Status: Ongoing/In Progress)**



Organizational Excellence | Strategy 3.1.1: Evaluate existing outreach efforts and effectiveness to identify needs and opportunities. **(Status: Ongoing/In Progress)**



Organizational Excellence | Strategy 3.2.1: Assess existing support efforts for community partnerships and partner engagement to identify needs and opportunities. **(Status: Ongoing/In Progress)**



Health Equity | Strategy 3.2.4: Implement strategies to enhance existing marketing and outreach efforts. **(Status: Ongoing/In Progress)**



Partnerships | Strategy 1.1.1: Enhance critical partnerships with new and existing partners. **(Status: Ongoing/In Progress)**

Prescription Assistance (PA)

- The Prescription Assistance (PA) program continues to help people experiencing gaps in coverage as well as people with undocumented status.
- With upcoming federal changes and reduced funding for financial assistance through the Connect for Health Colorado Marketplace (beginning this upcoming open enrollment period), health insurance and prescription costs will rise, likely increasing unaffordability for many customers, and potentially significantly increasing demand for our Prescription Assistance program.
- The team continues to explore opportunities to expand partnerships with local pharmacies to enhance patient access and offer more choices in pharmacy services for the individuals we serve.

This work aligns with the following strategic priorities:



Great Governance | Strategy 2.1.1: Evaluate existing programs, systems, and processes, and update them for quality improvement, fiscal sustainability, and transparency, as needed. **(Status: Ongoing/In Progress)**



Partnerships | Strategy 1.1.1: Enhance critical partnerships with new and existing partners. **(Status: Ongoing/In Progress)**

- The Health Care Access team currently has no vacancies.

Mental Health Connections (Connections – Adult & CAYAC)

- The Mental Health Connections program has successfully moved to the 120 Bristlecone Client Campus! Special thanks to everyone involved to facilitate a smooth transition of services with minimal interruptions to client care.
- The VP of Client Experience and Health Services Project Strategist continue to provide direct interim support to the MHC team as efforts to recruit a well-qualified Behavioral Health Senior Manager are underway. The hiring committee, including leadership and clinical staff, are pleased to have identified multiple well-qualified candidates for the



Partnerships | Objective 2.3: Cultivate partnerships with organizations that represent and support the interests of priority populations and health-related social needs. **(Status: Ongoing/In Progress)**

- Mental Health Connections has the following vacancies:
 - 1 (1.0) FTE CAYAC Behavioral Health Provider (sourcing)
 - 1 (1.0) FTE CAYAC Testing Psychologist (currently posted & sourcing)
 - 1 (1.0) FTE Adult Behavioral Health Provider (sourcing)
 - 1 (1.0) FTE Adult Care Coordination Specialist (currently posted)
 - 1 (1.0) FTE BH Senior Manager Program Manager (search in progress)

Integrated Care Team

- The Integrated Care team staff have successfully become UCHHealth employees. We want to thank the Integrated Care team for their impactful work over the years.

Special Projects

- Compliance is working with Mental Health Connections and Open Minds in assessing program compliance and best practices.
- Compliance is also working with CPS HR Consulting in developing the employee handbook and developing policies and procedures.



Organizational Excellence | Strategy 2.5.2: Review, evaluate, and adjust policies and procedures for internal controls.

DATA & ANALYTICS

Internal Program Evaluation

- Data staff and leadership continue to provide support for the Comprehensive Analysis of Clinical Practices, Legal Practices, and Risk Management Services, conducted in partnership with OPEN MINDS.



Organizational Excellence | Strategy 4.1.2: Develop strategies, policies, and procedures to enhance data collection. **(Status: Work in Progress)**



Health Equity | Strategy 2.2.1: Ensure equity metrics are embedded into data systems and establish benchmarks. **(Status: Work in Progress)**

Community Health Survey

- The Colorado Health Access Survey (CHAS), conducted by our partners at the Colorado Health Institute (CHI), has been completed. We will get a preliminary dataset from CHI in early Fall 2025, with a final dataset in late 2025/early 2026. Leadership continues to explore analysis strategies to ensure we are well-positioned to derive meaningful, actionable insights into the health and needs of our community when the data is released later this year.



Organizational Excellence | Strategy 4.1.1: Examine and assess existing organizational and community data-collection practices and methodologies. **(Status: Work in Progress)**

Staffing Update

- 1 FTE Data and Analytics Manager is currently posted to fill the vacancy of the Research & Evaluation Manager position. This position title is updated to reflect the true nature of the position, its role within the organization, and to clearly reflect organizational priorities. Position descriptions of other budgeted staff are being revised to align with strategic priorities focused on strengthening data collection and quality, in preparation for the leadership of a new Data and Analytics Manager.

COMMUNITY IMPACT TEAM (CIT)

Behavioral Health Focus

- CIT Staff successfully facilitated the MHSU Alliance Steering Committee Retreat in June, where Steering Committee Members collaboratively developed a unifying results statement that encompasses the goal of the Alliance’s work: “All people in Larimer County across the lifespan are thriving, feel safe and resourced, and have a sense of belonging.”
- Planning is underway for the August MHSU Alliance Steering Committee meeting, which will feature a proposal of final indicators (metrics) to track progress toward the results statement above.

- The first MHSU Alliance Workgroup—focused on nonclinical behavioral health promotion—successfully launched and will now move to a regular meeting schedule. This group will participate in shared learning and facilitated discussions to propose actional strategies to the Steering Committee.



Organizational Excellence | Strategy 3.2.1: Assess existing support efforts for community partnerships and partner engagement to identify needs and opportunities. **(Status: Work in Progress)**



Partnerships | Strategy 2.2.2: Improve collaboration between Health District and health care delivery systems to advance health equity. **(Status: Work in Progress)**

- Staff are collaborating with community partners to finalize the April Sequential Intercept Map (SIM) Workshop report. This report is a key subjective of the Larimer County Strategic Plan objective “Promote Health and Wellbeing for our Community.” This will include actionable recommendations to improve intersections between behavioral health and the criminal justice system.



Partnerships | Objective 1.1: Conduct system-level network mapping to determine alignment and crossover of priorities. **(Status: New Project)**

- Staff are preparing for a relaunch of the Changing Minds campaign with updated messaging, increased social media outreach, and physical ads. This work is supported by both Health District funds as well as passthrough funding from the North Colorado Health Alliance for their work under the Regional Opioid Abatement Council (ROAC).



Partnerships | Objective 1.2: Work in collaboration with community partners to enhance shared knowledge and service access for priority populations. **(Status: Work in Progress)**

Health-Related Social Needs Focus

- Finalizing next steps and preparing internal presentations for the Health & History Project to guide project direction and ensure alignment with community priorities.
- Provided light support and incentives for the Dental Team’s listening session in partnership with Homeward Alliance to better understand local needs to better care for unhoused individuals and families.



Partnerships | Objective 2.3: Cultivate partnerships with organizations that represent and support the interests of priority populations and health-related social needs. **(Status: Work in Progress)**

Outreach & Education

- Successfully organized and supported several impactful opportunities on or related to Juneteenth, including the internal Day of Service (June 19) and the City of Fort Collins

Annual Juneteenth Celebration (June 21). Staff feedback was overwhelmingly positive, particularly for the Juneteenth speaker who provided a historical overview and debunked common myths surrounding the day.

- Supported and attended multiple outreach events in June, continuing the focus on reaching under-resourced groups. Key events in June included: FoCo Pride, Summer Bike to Work Day, and the Alianza NORCO Resource Fair. In June, the Outreach Team reached approximately 787 community members.
- Attended events and several partnership building opportunities in July including the NoCo Connection and Belonging Mixer, Northern Colorado Health Network Open House, and Yarrow Collective Office Warming Party. The Outreach Team reached approximately 217 community members. Additionally, the team helped create and distribute the Larimer Health Connect Quarterly Newsletter which reached 1,741 community members and partners.
- Developing an Outreach Coverage Guide to support Health District staff who participate in tabling. The guide is intended to promote greater confidence, clarity, and consistency during outreach events. The Outreach Team is piloting the guide in August/September and actively getting staff feedback to provide additional clarity.



Organizational Excellence | Objective 3.1: Improve outreach to clients and Health District residents through providing diverse, effective, and inclusive outreach avenues. **(Status: Work in Progress)**



Health Equity | Objective 3.2: Enhance the visibility of Health District programs and services as a welcome resource for people with underrepresented identities. **(Status: Work in Progress)**

Staffing Update

- Both the Community Impact and Outreach & Education teams are fully staffed. The Outreach & Education team will now be 1.5 FTE, rather than the 2.0 budgeted, to support both program demands and staff professional development. The team has supported a Summer Intern in achieving internship goals through mentorship and community exposure.

HEALTH EQUITY

Health Equity Strategic Plan

- The 2025 Health Equity Strategic Plan is complete, and a high-level overview will be presented to the Board at the August Board meeting. The plan will be rolled out internally to staff throughout September and October.



Health Equity | Objective 1.1: Enhance organizational capacity to advance health equity. **(Status: Work in Progress)**



Health Equity | Objective 3.1: Develop an organizational Health Equity Strategic Plan to transform systems, practices, and policies. **(Status: Complete)**

Other Cross-Functional Collaboration

- The Health Equity Action Team (HEAT) pilot group met for the final time in early August. The team engaged in an educational discussion about structural racism and reflected on the pilot

experience. After the August meeting, team members reported appreciation for time and space to learn together and expressed “hope that this work will continue and grow”. A pilot evaluation survey will be conducted and used to create a report and recommendations for the team’s next steps, with the goal of recruiting more staff participants and relaunching later in 2025.



Health Equity | Goal 2: Cultivate an environment in which diverse thought and experience is welcomed, and staff knowledge of and commitment to equity is invested in. **(Status: Work in Progress)**

Community Engagement:

- The Regional Assessment Collaborative’s Health Assessment Workgroup will now be co-facilitated by the Health District’s Health Equity Strategist. This group will continue to co-design improved data collection tools and questions that better reflect the needs of priority populations across Larimer and Weld Counties.



Organizational Excellence | Strategy 4.1.1: Examine and assess existing organizational and community data-collection practices and methodologies. **(Status: Work in Progress)**



Health Equity | Strategy 2.2.1: Ensure equity metrics are embedded into data systems and establish benchmarks. **(Status: Work in Progress)**

- The Health Equity Strategist is serving as a member of the Justice, Equity, Diversity, and Inclusion (JEDI) Coalition’s core planning team. This group works to build relationships with JEDI professionals in our region and integrate a JEDI lens into county-wide initiatives.



Partnerships | Goal 2: Build and strengthen partnerships that maximize impact on community health. **(Status: Work in Progress)**

- The Health Equity Strategist and Community Impact Team Manager are participating in a healing-centered engagement training cohort with other equity-focused professionals in Larimer County. The learnings from this cohort will promote collective healing and foster places and spaces of belonging across Larimer County.



Partnerships | Goal 2: Build and strengthen partnerships that maximize impact on community health. **(Status: Work in Progress)**

POLICY

- Leadership has been preparing in collaboration with the Larimer Health Connect Manager and Vice President of Client Experience for the special session on August 21st through attending a variety of coalition meetings, such as the Colorado Health Policy Coalition and the Protect Our Care Coalition, as well as digesting information provided by our external contractor, Frontline Public Affairs.
- We have started to draw out our strategy for the 2026 legislative session to maximize the contract with Frontline Public Affairs while leveraging our work with statewide partners and our presence on various coalitions and groups.



Great Governance | Strategy 3.2.1: Assess local, state, and federal policies impacting the health of Health District residents and organizational operations. **(Status: Work in Progress)**



Great Governance | Strategy 3.2.2: Assess and maximize the use of partnerships and support contractors to influence policies impacting the health of Health District residents. **(Status: Work in Progress)**

PARTNERSHIPS

- With all of the partnership agreements completed, the Health District is excited to work with in partnership the Integrated Care team at Family Medicine Center, Salud, and SummitStone Health Partners.
- Leadership has been building a stronger network with organizations and entities that also conduct funding work, including serving on Larimer County Behavioral Health Services' small consultation group as part of their wider effort to design a multi-year funding framework.

Staffing Update

- 1 FTE Senior Partnerships Strategist is currently posted.