

**MINUTES OF MEETING
BOARD OF COMMISSIONERS
CALCASIEU CAMERON HOSPITAL SERVICE DISTRICT
d/b/a WEST CALCASIEU CAMERON HOSPITAL
TUESDAY, SEPTEMBER 22, 2026
12:00 p.m. - BOARD ROOM**

A regular meeting of the Board of Commissioners of Calcasieu Cameron Hospital Service District d/b/a West Calcasieu Cameron Hospital was held on Tuesday, September 22, 2026, in the Hospital Board Room. Mr. Cecil Sanner called the meeting to order at 12:00 p.m. Mr. Mark McMurry led the group in prayer.

COMMISSIONERS PRESENT: Bobby LeTard; Mark McMurry; Cecil Sanner; Ellis Hassien; Karen Farnum

COMMISSIONERS ABSENT:

OTHERS PRESENT: Janie Fruge'; Jobie James; Dondra Zaunbrecher; Christi Kingsley; JW Peloquin; Thea Tran; Mike Klenke; Lance Duhon; Dr. Ashley Mullins; Randy Burleigh; Mitch Bowers; Woody Daigle

GUESTS PRESENT: Tressie Brunson; Demi Neely

Mrs. Janie Fruge' announced that Mrs. Thea Tran was the recipient of the August CEO Shining Star Award.

Mr. Cecil Sanner presented the minutes of the meeting of the Board of Commissioners held on August 25, 2026, for approval. Mr. Ellis Hassien motioned to approve the minutes as presented. Mrs. Karen Farnum seconded the motion. The motion passed unanimously by voice vote. Mr. Sanner then announced that the next meeting of the Board of Commissioners is scheduled for Tuesday, October 27, 2026. The meeting will begin at 11:00 a.m. and include a Budget presentation. That concluded the Chairperson's Report.

Mrs. Janie Fruge' presented the CEO's Report, beginning with an update from the Louisiana Regulatory and Policy Committee (LRPC) regarding the new Medicaid community engagement/work requirements scheduled to take effect January 1, 2027. Mrs. Fruge' explained that certain adult Medicaid members will be required to demonstrate participation in qualifying activities, such as employment, community service, job training, or education, to maintain Medicaid coverage. The requirement generally applies to certain adults ages 19 through 64, with exemptions for specified populations. Louisiana Medicaid is preparing for implementation and will conduct outreach to affected members before the effective date. Mrs. Fruge' continued with an update regarding Capital Outlay. She reported that JW Peloquin and Jobie James recently traveled to the State Capitol to participate in a Capital Outlay hearing. Following their visit, WCCH received confirmation of funding, including an approximate \$4.2 million reauthorization. That concluded the CEO's Report.

Mrs. Jobie James, Chief Financial Officer, presented the hospital's financial reports for the period through August 31, 2026, compared with 2025. She reported a cash balance of \$26,324,875.00 compared with \$29,924,398.00 in July. A contributing factor is the non-receipt of supplemental payments. Net Income for August was (\$549,902.00) compared to (\$1,203,558.00) at this time last year. Our current assets-to-liabilities ratio is 5. Mrs. James continued by reporting that Census Days were 576 compared to 500 this time last year. There were 2,051 ER visits, 201 Surgeries, 30 deliveries, and 585 FTE's. That concluded the Financial Report.

Mr. JW Peloquin then presented the Facilities Report. He provided an update on the timeline for the Water Booster Station Project, noting that, contingent upon the Board's decision regarding the bids received later in the meeting, the anticipated project start date is January 4, 2027, with an estimated completion period of 12 months. That concluded the Facilities Report.

Mr. Lance Duhon gave a Patient Care Report, beginning with an overview of the proposed Non-Opioid Surgical Recovery Pilot. The pilot is a cost-free, controlled trial utilizing Journavx (suzetrigine), a non-opioid, non-addictive medication for post-surgical pain management. The manufacturer will provide 1,100 free 50 mg tablets, with no upfront cost to the hospital. The pilot will be limited to one or two designated orthopedic surgeons in coordination with Anesthesiology, with treatment limited to a maximum of 14 days per patient. Mr. Duhon noted that appropriate safety screening and clinical guidelines will be followed, and the hospital will evaluate outcomes after the pilot supply is depleted before considering any formal formulary adoption. That concluded the Patient Care Report.

Mrs. Thea Tran presented the High Reliability Excellence Report: Improving Patient Safety & Quality/Compliance. She presented a correction to the 2026 Provision of Care Plan, which was presented to and approved by the Board last month. The correction is regarding the Wednesday hours of operation listed for the Hackberry Rural Health Clinic, which have been corrected to state 8:00 a.m. – 12:00 p.m. There was a motion by Mr. Bobby LeTard, seconded by Mr. Mark McMurphy to approve the correction to the 2026 Provision of Care Plan. The motion passed unanimously by voice vote. Mrs. Tran then presented a STEMI Quality Dashboard and LERN STEMI Performance Review. She reported a median Door-to-Balloon (DTB) time of 73 minutes, which was 17 minutes below the 90-minute benchmark, and a median Door-to-ECG time of 4 minutes, exceeding the national goal of 10 minutes. WCCH treated 12 direct STEMI activations during the second quarter, a 50% increase from the previous quarter, while maintaining stable procedural performance. FMC-to-PCI times also improved by four minutes compared to the first quarter of 2026.

Mrs. Tran reviewed opportunities for improvement, including pre-hospital Cath lab activation, direct EMS transport to the Cath lab, expedited triage of walk-in chest pain patients, and continued review of case documentation. She also noted that EMS feedback was provided for 7 of 8 transported patients and emphasized the goal of achieving 100% EMS feedback compliance. Ongoing collaboration with regional EMS agencies will focus on reducing FMC-to-PCI times and maintaining WCCH's STEMI receiving center accreditation.

Mrs. Tran continued with a review of the Stroke Quality Dashboard and the LERN Acute Stroke Ready Hospital (ASRH) Performance Review and Compliance Report. For Q2 2026, the median Door-to-Needle time was 89 minutes, Door-to-Transfer Request was 82.5 minutes, and Door-in-Door-Out (DIDO) was 214.5 minutes. She noted strengths in physician evaluation, laboratory turnaround times, and LVO screening, with 84.6% of suspected stroke patients receiving the standardized VAN assessment.

Mrs. Tran reviewed required workflow improvements, including initiating transfer requests immediately following a positive VAN screen, expediting CT turnaround times, and reducing transfer request times. She also discussed the need to resume monthly stroke mock codes and submit a formal remediation plan by October 31, 2026. Continued compliance with these measures is necessary to maintain WCCH's Acute Stroke Ready Hospital designation. That concluded the High Reliability Excellence Report: Improving Patient Safety & Quality Report.

Mr. Mark McMurry moved to approve and accept the Staff appointments, re-appointments, resignations, privileges, FPPE, and officers as submitted by the Medical Executive Committee. Mr. Bobby LeTard seconded the motion. The motion passed unanimously by voice vote.

Next, Ms. Tressie Brunson reported on Hackberry Rural Health Clinic. She began by stating that the clinics are required to conduct Annual Advisory Committee meetings. The Committee is responsible for reviewing the facility's mission/philosophy, operations, finances, policies, and planned activities to ensure the facility is improving access to healthcare for the community and providing suggestions regarding facility changes based upon community needs, growth, and support. Staffing: There is 1 full-time Nurse Practitioner, 1 full-time nurse, 1 full-time Medical Assistant, and 1 full-time Receptionist. Ms. Brunson presented data on patients visiting based on zip code. Hackberry residence shows the highest patient count at 465 or 51%, followed by Sulphur (148) 16%, Carlyss (155) 17%, Lake Charles (43) 5%, Johnson Bayou (19), Westlake (10), and Vinton (8). Next, Ms. Brunson reported on payer class mix as follows: Medicaid 27%, Blue Cross 30%, and Medicare 20%. Twelve percent (12%) of patients are self-pay. Between January and August 2026, there were 1,604 patient visits, 8 more patient visits than in 2025. She followed with a report regarding performance improvement data.

Ms. Brunson then presented the Board with the names of the Hackberry Rural Health Clinic Advisory Board members for approval. Those Advisory Board Members are James Duhon, Consumer of Service; Ashley Poole, RN, and Kevin Dupke, MD. Mr. Bobby LeTard motioned to accept the members of the Advisory Board as presented. Mr. Ellis Hassien seconded the motion. The motion passed unanimously by voice vote.

Mrs. Jobie James then gave the financial report for Hackberry Rural Health Clinic. She began by reporting a \$244,516.85 Net YTD revenue and a (\$44,981.46) Net YTD income. That concluded the report on the Hackberry Rural Health Clinic.

Ms. Brunson then reported on the Vinton Medical Clinic. She began by stating that the clinics are required to conduct Annual Advisory Committee meetings. The Committee is responsible for reviewing the facility's mission/philosophy, operations, finances, policies, and planned activities to ensure the facility is improving access to healthcare for the community and providing suggestions regarding facility changes based upon community needs, growth,

and support. Staffing: There are 3 full-time Nurse Practitioners, 3 full-time Medical Assistants, 2 full-time Receptionists, and 1 opening for a part-time greater than 28 hours medical assistant. Ms. Brunson presented data on patients visiting based on zip code. Vinton residence shows the highest patient count at 828 or 47%, followed by Sulphur (334) 20%, Starks (215) 12%, Carlyss (160) 9%, Lake Charles (76) 4%, Westlake (46), and DeQuincy (24). Next, Ms. Brunson reported on payer class mix as follows: Medicaid 33%, Medicare 24%, and Blue Cross 13%. Eight percent (8%) of patients are self-pay. In January through August 2026, there were 3,590 patient visits, 9 more visits than in 2025. She followed with a report regarding performance improvement data.

Ms. Brunson then presented the Board with the names of the Vinton Rural Health Clinic Advisory Board members for approval. Those Advisory Board members are Darryl Moore, Consumer of Service; Tamara Breau, Pharmacist; Keegan Benoit, Physical Therapist; and Russell Hearne, Physical Therapist. Mr. Bobby LeTard moved to accept the members of the Advisory Board as presented. Mr. Ellis Hassien seconded the motion. The motion passed unanimously by voice vote.

Mrs. James followed with her financial report on the Vinton Rural Health Clinic. She reported a \$467,251.73 Net YTD revenue and a (\$ 96,185.36) Net YTD income. That concluded the report on the Vinton Rural Health Clinic.

Ms. Brunson continued with a report regarding the Johnson Bayou Rural Health Clinic. She began by stating that the clinics are required to conduct Annual Advisory Committee meetings. The Committee is responsible for reviewing the facility's mission/philosophy, operations, finances, policies, and planned activities to ensure the facility is improving access to healthcare for the community and providing suggestions regarding facility changes based upon community needs, growth, and support. There is 1 full-time Nurse Practitioner, 1 full-time Nurse, 1 full-time Medical Assistant, 1 full-time Receptionist, and 1 part-time Housekeeper. Ms. Brunson presented data on patients visiting based on zip code. Johnson Bayou residence shows the highest patient count at 211 or 54%, followed by Texas (46) 12%, Carlyss (37) 9%, Hackberry (17) 4%, Lake Charles (14) 3%, Vinton (8) 2%, Sulphur (7) 2%. Next, Ms. Brunson reported on payer class mix as follows: Blue Cross 32%, Medicaid 8%, and Medicare 11%, and HireRight 27%. Five percent (5%) of patients are self-pay. In January through August 2026, there were 665 patient visits, 10 fewer visits than in 2025. She followed with a report regarding performance improvement data.

Ms. Brunson then presented the Board with the names of the Johnson Bayou Rural Health Clinic Advisory Board members for approval. Those Advisory Board members are Pamela Romero, Consumer of Service; Sydney Trahan, Nurse; and Ashley Poole, Nurse. Mr. Ellis Hassien moved to accept the members of the Advisory Board as presented. Mr. Mark McMurry seconded the motion. The motion passed unanimously by voice vote.

Mrs. James then gave the financial report for Johnson Bayou Rural Health Clinic. She reported a \$457,399.36 Net YTD revenue and a \$126,853.23 YTD net income. That concluded the report on the Johnson Bayou Rural Health Clinic.

Capital Requests were submitted as follows:

1. Anesthesia Machines: \$325,000.00

There was a motion by Mr. Mark McMurry, seconded by Mrs. Karen Farnum, to amend the budget for \$325,000.00 and to approve the purchase of 8 Anesthesia Machines for an amount not to exceed \$325,000.00. The motion passed unanimously by voice vote.

2. IMP De Mayo Knee Positioners (2): \$24,866.00

There was a motion by Mr. Ellis Hassien, seconded by Mrs. Karen Farnum to amend the budget for \$9,876.00 and to approve the purchase of two (2) De Mayo Knee Positioners for \$24,866.00. The motion passed unanimously by voice vote.

Next, Mr. JW Peloquin reported that bids on the Water Booster Station project were opened on September 21, 2026, at 10:15 a.m. Three (3) bids were received and opened, ranging from \$2,500,000.00 to \$2,702,338.00.

Mrs. Christi Kingsley presented the 2026 Community Health Needs Assessment (CHNA) for West Calcasieu Cameron Hospital. She provided an overview of the assessment process, which included 235 community survey respondents, 11 key informant interviews, and an analysis of parish and state public health data. The assessment identified cancer, heart disease and hypertension, diabetes, mental health, and obesity/lifestyle factors among the leading health concerns reported by residents. Additional areas of concern included healthcare affordability, housing, environmental factors, behavioral health and substance use, chronic disease, and the needs of vulnerable and aging populations.

The assessment resulted in three consolidated community health priorities: **(1) Access to Care, including primary, specialty, and rural access; (2) Mental and Behavioral Health and Substance Abuse; and (3) Chronic Disease Prevention and Management.** Mrs. Kingsley explained that these priorities will guide the development of a three-year Community Health Improvement Plan (CHIP), with measurable goals and ongoing annual tracking.

There was a motion by Mr. Mark McMurry, seconded by Mr. Ellis Hassien to approve the Community Health Needs Assessment & Priority Evaluation as presented. Motion passed unanimously by voice vote.

Mr. Bobby LeTard motioned at 1:09 pm, seconded by Mr. Mark McMurry to move into Executive Session for strategic planning, marketing, and personnel matters in keeping with Louisiana revised Statutes 42:6, 42:6.1, 46: 1073; and to discuss the engagement of Todd Clemons & Associates, APLC as additional counsel/local counsel in the following case: Calcasieu Cameron Hospital Service District d/b/a West Calcasieu Cameron Hospital v. Southwest Louisiana Hospital Association d/b/a Lake Charles Memorial Hospital Service District, and Southwest Louisiana Healthcare Systems, Inc., Docket No.2025-4836, 14th Judicial District Court, Parish of Calcasieu, State of Louisiana. The motion passed unanimously by voice vote.

Mr. Ellis Hassien motioned at 1:45 pm to move back into Regular/Open Session. Mrs. Karen Farnum seconded the motion. The motion passed unanimously by voice vote. The Chair announced that no action was taken during the Executive Session.

There was a motion by Mr. Bobby LeTard, seconded by Mr. Ellis Hassien to accept the bid from K & J Development of SWLA, LLC, for \$2,500,000.00 for the Water Booster Station. The motion passed unanimously by voice vote.

Next, there was a motion by Mr. Ellis Hassien, seconded by Mr. Mark McMurry to authorize Mrs. Janie Fruge', CEO, to execute an Engagement Agreement with Todd Clemons & Associates, APLC, in the matter of Calcasieu Cameron Hospital Service District d/b/a West Calcasieu Cameron Hospital v. Southwest Louisiana Hospital Association d/b/a Lake Charles Memorial Hospital Service District, and Southwest Louisiana Healthcare Systems, Inc., Docket No.2025-4836, 14th Judicial District Court, Parish of Calcasieu, State of Louisiana. The motion passed unanimously by voice vote.

With no further business to come before the board, Mr. Mark McMurry motioned to adjourn the meeting, seconded by Mr. Ellis Hassien . The motion passed unanimously by voice vote. The meeting was adjourned at 1:48 p.m.

Chairman of the Board

Secretary of the Board