

# **Kaweah Delta Health Care District**Board Of Directors Committee Meeting

**Health** is our Passion. **Excellence** is our Focus. **Compassion** is our Promise.

## **NOTICE**

The Finance Property Services Acquisition Board Committee of the Kaweah Delta Health Care District will meet at the Executive Office Conference Room {305 W Acequia Avenue, Visalia, CA} on Wednesday, November 19, 2025:

10:00AM Open meeting

In compliance with the Americans with Disabilities Act, if you need special assistance to participate at this meeting, please contact the Board Clerk (559) 624-2330. Notification 48 hours prior to the meeting will enable the District to make reasonable arrangements to ensure accessibility to the Kaweah Delta Health Care District Board of Directors meeting.

All Kaweah Delta Health Care District regular board meeting and committee meeting notices and agendas are posted 72 hours prior to meetings (special meetings are posted 24 hours prior to meetings) in the Kaweah Health Medical Center, Mineral King Wing near the Mineral King entrance.

The disclosable public records related to agendas can be obtained by contacting the Board Clerk at Kaweah Health Medical Center – Acequia Wing, Executive Offices (Administration Department/Executive Offices) {1st floor}, 400 West Mineral King Avenue, Visalia, CA via phone 559-624-2330 or email: kedavis@kaweahhealth.org, or on the Kaweah Delta Health Care District web page http://www.kaweahhealth.org.

KAWEAH DELTA HEALTH CARE DISTRICT

David Francis, Secretary/Treasurer

**Kelsie Davis** 

Board Clerk / Executive Assistant to CEO

**DISTRIBUTION:** 

Governing Board, Legal Counsel, Executive Team, Chief of Staff, www.kaweahhealth.org

## Kaweah Delta Health Care District **Board of Directors Committee Meeting**



**Health** is our Passion. **Excellence** is our Focus. **Compassion** is our Promise.

## KAWEAH DELTA HEALTH CARE DISTRICT BOARD OF DIRECTORS FINANCE, PROPERTY, SERVICES & ACQUISITION COMMITTEE

Kaweah Health Medical Center 305 W. Acequia Avenue, Executive Office Conference Room (1st Floor)

## Wednesday November 19, 2025

ATTENDING: Directors: David Francis (Chair) & Dean Levitan; Gary Herbst, Chief Executive Officer. Malinda Tupper, Chief Financial Officer; Marc Mertz, Chief Strategy Officer; Jennifer Stockton, Director of Finance, Jag Batth, Chief Operating Officer; Kelsie Davis, Board Clerk Recording

**OPEN MEETING - 10:00AM** 

**CALL TO ORDER –** David Francis, Board Secretary/Treasurer

PUBLIC PARTICIPATION – Members of the public may comment on agenda items before action is taken and after it is discussed by the Board. Each speaker will be allowed five minutes. Members of the public wishing to address the Board concerning items not on the agenda and within the jurisdictions of the Board are requested to identify themselves at this time.

- 1. MINUTES Review of the open minutes from October 2025.
- 2. SRCC RADIATION ONCOLOGY Staff will present a report on the financial statements and current financial status of Sequoia Regional Cancer Center's radiation oncology.
- 3. SRCC MEDICAL ONCOLOGY Staff will present a report on the financial statements and current financial status of Sequoia Regional Medical Center's medical oncology.
- 4. TKC- Staff will present a report on the financial statements and current financial status of TKC.
- 5. NW SENIOR HOUSING, LLC- Staff will present a report on the financial statements and current financial status of NW Senior Housing, LLC.
- 6. QUAIL PARK RETIREMENT VILLAGE, LLC Staff will present a report on the financial statements and current financial status of Quail Park Retirement Village, LLC.
- 7. LAUREL COURT AT QUAIL PARK- Staff will present a report on the financial statements and current financial status of Laurel Court at Quail Park.
- 8. FINANCIALS- Review of the most current fiscal year financial results and budget.

ADJOURN - David Francis, Board Secretary/Treasurer

President

# **Kaweah Delta Health Care District**Board of Directors Committee Meeting



**Health** is our Passion. **Excellence** is our Focus. **Compassion** is our Promise.

In compliance with the Americans with Disabilities Act, if you need special assistance to participate at this meeting, please contact the Board Clerk (559) 624-2330. Notification 48 hours prior to the meeting will enable the District to make reasonable arrangements to ensure accessibility to the Kaweah Delta Health Care District Board of Directors meeting.

All Kaweah Delta Health Care District regular board meeting and committee meeting notices and agendas are posted 72 hours prior to meetings (special meetings are posted 24 hours prior to meetings) in the Kaweah Health Medical Center, Mineral King Wing near the Mineral King entrance. The disclosable public records related to agendas can be obtained by contacting the Board Clerk at Kaweah Health Medical Center – Acequia Wing, Executive Offices (Administration Department/Executive Offices) {1st floor}, 400 West Mineral King Avenue, Visalia, CA via phone 559-624-2330 or email: kedavis@kaweahhealth.org, or on the Kaweah Delta Health Care District web page.



## **Kaweah Delta Health Care District Board of Directors Committee Meeting Minutes**

Health is our Passion. Excellence is our Focus. Compassion is our Promise.

Finance, Property, Services, and Acquisition Committee – OPEN MEETING Wednesday October 15, 2025 Kaweah Health Medical Center - Executive Office Conference Room

Present: Directors: David Francis & Dean Levitan, M.D.; Gary Herbst, CEO; Malinda Tupper, Chief Financial Officer; Jennifer Stockton, Director of Finance; Jag Batth, Chief Operating Officer; R. Gates, Chief Ambulatory Officer; K. Davis, Board Clerk Recording

Called to order at 10:09AM

Public Participation- None.

**MINUTES**- Minutes were reviewed and to be presented to the Board of Directors.

FINANCIALS – Review of the most current fiscal year financial results and a progress review of projections relative to the Kaweah Health initiatives to decrease costs and improve cost efficiencies (copy attached to the original of these minutes and considered a part thereof) - Malinda Tupper - Chief Financial Officer

It was recommended that the revised budget be presented to the full board and to be reapproved.

Adjourned at 11:08 AM

In compliance with the Americans with Disabilities Act, if you need special assistance to participate at this meeting, please contact the Board Clerk (559) 624-2330. Notification 48 hours prior to the meeting will enable the District to make reasonable arrangements to ensure accessibility to the Kaweah Delta Health Care District Board of Directors meeting.

# FY 2025 REPORT TO THE BOARD OF DIRECTORS ONCOLOGY SERVICES

## Radiation Oncology Services

Renee S Lauck, Director, Imaging & Radiation Oncology Services (559) 624-2345 November 5, 2025

#### **Summary of Joint Venture**

Reported separately on financial Metrics report presented at finance property & Acquisition meeting.

#### Radiation Oncology

Radiation Oncology saw an increase in net income of 9% for FY 25 with direct cost reduction of -5%.

FY 25 was a challenging year in having one Radiation Oncologist for most of the year, versus two. This limited our ability to see patients.

Dr. Danny Vazquez joined Dr. David Ly in Radiation Oncology at Sequoia Regional Cancer Center (SRCC) in September of 2024. Dr. Vazquez has since passed his boards in radiation oncology and we began seeing an increase in volume in the spring of 2025.

Both providers are utilizing the latest protocols from the radiation therapy oncology group (RTOG), which is the gold standard in radiation oncology. These treatment protocols include a decrease in the overall length of time a patient receives treatments. For example, a patient who previously received a 6-week course of treatment with daily radiation, is now often completing a 3-week course. Although there was a decrease in treatments, service line reports for FY 25 show a slight increase in patient cases overall.

We continue to see bundling of charges with Medicare with new updates projected to take place in January of 2026.

Combined total for Visalia and Hanford	FY2023	FY2024	FY2025;
<ul> <li>Patient Treatments</li> </ul>	23,202	21,784	21,018
<ul> <li>Patient Cases</li> </ul>	2,974	2,804	2,840
<ul> <li>Net Revenue</li> </ul>	\$8,659,259	\$9,104,209	\$8,815,971
<ul> <li>Direct Cost</li> </ul>	\$6,863,559	\$8,062,420	\$7,664,219
<ul> <li>Contribution Margin</li> </ul>	\$1,795,701	\$1,041,789	\$1,151,752
<ul> <li>Indirect Cost</li> </ul>	\$27,596	\$5,754	\$22,505
<ul> <li>Net Income</li> </ul>	\$1,768,104	\$1,036,036	\$1,151,752
<ul> <li>Net Revenue/Treatment</li> </ul>	\$373	\$418	\$419
<ul> <li>Direct Cost/Treatment</li> </ul>	\$296	\$370	\$365
<ul> <li>Contribution Margin/Treatment</li> </ul>	\$77	\$48	\$55

#### **Radiation Oncology Operational Summary**

Radiation Oncology Services Include;

- External radiation treatments for inpatients at KHMC and Adventist Hospital are treated at both locations, although because of advanced technology, our more complex patients, are treated in Visalia. Approximately 80% of our volume is seen in Visalia.
- Stereotactic Radiation Surgery program (SRS) is provided in coordination with our neurosurgery group. SRS is any treatment where there is one lesion being treated.
- Stereotactic Body Radiation Therapy program (SBRT) has grown tremendously and includes cases for the treatment of two or more lesions. Volumes continue to increase for SRS/SBRT. These cases are highly complex while achieving great patient outcomes.

#### • SBRT/SRS cases

- o FY 2023 186 cases
- o FY 2024 158 cases
- o FY 2025 186 Cases
- Thyroid I 131 studies are completed as outpatients, coordinated with Nuclear Medicine at Kaweah Health Diagnostic Center. We've seen a reduction in cases due to having one oncologist for most of the year, which limited the ability to keep up with these studies.
- Xofigo treatments for prostate cancer are currently coordinated with Nuclear Medicine at Kaweah Health Diagnostic Center.
- Our radiation oncologists refer patients to CT, MRI and PET/CT as well as sending patients for 3T MRI, which is not provided at Kaweah Health facilities at this time. We will be installing a 3T MRI unit in FY 2026 at the imaging center, which will give us the ability to scan prostate patients.

#### Challenges

#### • Volume challenges

 One of our long standing medical oncologists, Dr. Robert Havard, retired which also caused a dip in volume with new medical oncologists not having ramped up completely.

### • FY 25 Staffing challenges

- One of our long term RN's retired last year, one has been on a long term LOA with a new baby and another long term RN is retiring in November of 2025.
- One of the greatest challenges faced in specialty areas is replacing long-term employees. It can take years to gain knowledge and efficiencies when a long-term employee leaves. It often takes two people to replace what was done by one person, as they navigate the 3-6 month orientation and training process required in our cancer center.
- Continue to struggle with the Hanford volume. There is a perception that
  patients are being sent to Bakersfield for oncology services as well as a
  lack of surgeons at Adventist.
- Due to volume challenges, we held off hiring a second Physicist, but had additional hours due to orientation of two RN's.

## **Quality/Performance Improvement Data**

One of our objectives over the last year was to reduce expenses, while building worldclass service with exceptional physicians and teams.

- While indirect expense is up with depreciation from new equipment, direct expense is down by 5%.
- We continue to contract directly with one of our experienced dosimetrists who
  cover service remotely. This assures we have a balance experienced staff.
   Becoming an experienced dosimetrist can take five to ten years.
- Last FY, we worked with a consulting group to provide a deep look into our coding and services. We received the report back and found all of our areas were in line with coding regulations and services provided. This included a review of our SRS, SBRT and our High Dose Radiation (HDR) programs.

## Policy, Strategic or Tactical Issues

Goals for the coming year will continue to include comprehensive marketing of cancer services and programs at SRCC as we work to grow a comprehensive regional program in the central valley and work with medical oncology towards accreditation.

SRCC Radiation Oncology is thrilled to have started a new treatment for metastatic prostate cancer, called Pluvicto. We are the first cancer center in the central valley to be able to treat with Pluvicto. Until November of 2025, it was only available in Los Angeles and Sacramento.

With the addition of the Lung Screening program and our RN oncology nurse navigator, we have begun seeing patients through our Low Dose CT screening process.

## **Recommendations/Next Steps**

In the coming year, we will continue to focus on efficiencies within the department with training new nurses working with our providers who are extremely engaged in becoming the facility our patients look to, for excellence in care.

As we begin moving towards the future, we will need to seriously consider our Hanford office as the machine is at end of life and needs to be replaced if we should decide to keep Hanford open.

## **Approvals/Conclusions**

Our continued pursuit of exceptional world-class care is important to our staff and our physicians. SRCC radiation oncology is a special group of individuals who truly care for our patients and their families.

Radiation Oncology at SRCC is a program that is valued by our patients with a NRC patient satisfaction having just started, we are already at 90%. We look forward to continuing to provide the best experience for our patients who are going through an exceptionally difficult time in life.

We are excited with the opportunity to continue to grow and work for our community as we collaborate with our medical oncologists and fellow oncology professionals,

# FY 2025 REPORT TO THE BOARD OF DIRECTORS ONCOLOGY SERVICES

## **Inpatient Medical-Oncology 3South**

Emma Mozier, MSN, RN, CNML Director of Medical Surgical Services November 3, 2025

## **Summary Issue/Service Considered**

- Inpatient Oncology contribution margin down from prior year, coming in at \$2.7 million.
   FY 2024 seems to be the anomaly due to higher patient volumes and lower direct cost per case.
   FY 2025 Managed Care volumes are down, reducing case mix (CM) by approximately \$681k.
- CM/case trend is a nice upward trend from FY22, with FY 24 and 25 benefiting from higher reimbursement per case and nursing unit expense reductions beginning in FY 2024.
- The lost contribution margin is also attributable to lost Managed Care cases in FY 2025.
- Patient Discharges are down 20% in FY 2025, with 434 patient discharges. Patient days are down 24% as compared to prior year, and average length of stay is down 5% to 5.84 days.
- We currently have a 1.6 day length of stay (LOS) opportunity to improve, which is the lowest of the last four years.
- Net Patient Revenue per case is up by 4% to \$22,894, the highest of the last four years.
- Direct Cost per case was up 5% in FY 2025, after the decline in FY 2024.
- 3South (3S) leadership remains focused on staff development with specific attention to best practices to further improve the patient experience. This also includes regular training to increase our chemo certified nurses.
- Active surveillance of all quality measures with the greatest focus: Central Line
  Associated Blood Stream Infection (CLABSI) and Catheter Associated Urinary Tract
  Infection (CAUTI). Also focused on Falls, Hospital Acquired Pressure Injuries- HAPI, and
  Hypoglycemia rates. Including staff in case reviews and solution identification for quality
  improvement.

## **Quality/Performance Improvement Data**

CLINICAL QUALITY	Organiz	ganization Wide				
	2Q24	3Q24	4Q24	1Q25		
Central line associated blood stream infection (CLABSI)	0.537	0.608	1.196	0.847		
Target	0.589	0.486	0.589	0.486		
Catheter associated urinary tract infection (CAUTI)	0.592	0.539	0.203	0.27		
Target	0.65	0.342	0.65	0.342		
Falls/1000 pt days	1.75	1.82	1.63	1.74		
Target	2.07	2.08	2.18	2.14		
Injury Falls/1000 pt days	0.27	0.34	0.16	0.19		
Target	0.46	0.45	0.45	0.45		

HAPI Stage 2+/1000 pt days *Hospital Acquired Pressure Injury	1.95	1.69	1.04	0.95
Target	0.93	0.93	0.93	0.54
Hand Hygiene Compliance Pt Care Areas	94.27%	93.86%	93.9%	93.9%
Target	95%	95%	95%	95%

- Committees reviewing our quality initiatives (CLABSI, CAUTI, Falls HAPI, and Hand Hygiene) are established and have been on-going this last year. There are current efforts to re-align, streamline and ensure appropriate focus in all these quality areas.
- Hand hygiene compliance is also a reinvigorated focus for the entire organization.
  Standardized work for leaders and accountability expectations for staff have recently
  been created and shared. Monthly data review with leaders is occurring which has
  helped change some of the reports to get better information and increase use. 3S is not
  at goal (95%) but getting closer as well as increasing total hand hygiene opportunities.

HHOs By Month



- Pharmacy and nursing are set to go live 12/2025 with an updated and streamline process
  for oral chemo therapy, ensuring no matter where the patient is (on 3S or another unit)
  there is a check by a chemo Pharamacist and 3S Chemo nurse for patient safety,
  standardized protective equipment precautions and signage for staff safety.
- 3S employee engagement pulse survey in 2025 demonstrated strong gains and improvement with staff's perception of and relationship with their leadership teamfeeling that who they are and what they do matters to their managers, and they feel respected and communicated well to.

## Policy, Strategic or Tactical Issues

- Continuing to keep up to date with regulatory requirements related to chemotherapy and hazardous drug management.
- Collaboration with SRCC in cross over initiatives or support to each other will continue this year.
- Clinical and LOS performance are continually monitored. As barriers and themes are identified the leaders work with the respective committee groups for support.

## **Recommendations/Next Steps**

- Maintain momentum to care and improve efficiency around throughput
- Continue to focus on quality and LOS initiatives to meet organizational goals.
- Focusing on the employee engagement and safety culture feedback.

- Work with Human Resources, Clinical Education, and the Advance Practice Nurses to onboard, support and train new and existing nurses to improve recruitment and retention.
- Promote active engagement of our physician partners to increase efficiency of care and use of resources and services while patient in our care.

## **Approvals/Conclusions**

- Strive for overall quality outcomes and set goals to continue to improve. Opportunities remain and will be focused on for improvement.
- Leadership remains vigilant, reviewing budget reports and striving for financial strength within each department. This includes monitoring staff pay practices, supply management, and LOS.
- Leadership continues to work through employee engagement opportunities and provide support to frontline care staff. We value the team members and want to ensure they have the best environment to care for their patients.

# FY 2025 REPORT TO THE BOARD OF DIRECTORS ONCOLOGY SERVICES

## Sequoia Regional Cancer Center- Medical Oncology

Amy Baker, MSN, RN Director of Specialty Clinics (559) 624-3033 November 19, 2025

## **Summary Issue/Service Considered**

Sequoia Regional Cancer Center Medical Oncology (SRCC-MO) was acquired in FY24 and transitioned to the hospital license in FY25 completing its first full fiscal year in FY25.

FY25 was a very turbulent year for the SRCC team with wholesale changes in clinic, pharmacy and physician leadership as well as significant changes in policies, procedures and downstream workflows necessary to bring SRCC-MO into compliance with CMS, Joint Commission, CDPH and Board of Pharmacy regulations.

SRCC-MO plays a strategic role within the District's oncology service line, which is a coordinated network of cancer care services. The service line represents a continuum of care meaning patients receive comprehensive cancer treatment and support across different stages and settings. SRCC- MO services include access to board- certified oncologists, an on-site laboratory draw station, an infusion and injection center and an integrated pharmacy. Our medical oncologists also round on hospitalized patients both at Kaweah Health and Adventist Hanford hospitals. The program also incorporates a Cancer Registry for tracking and analyzing cancer data, a multidisciplinary Tumor Board for coordinated case review, and Cancer Committee responsible for quality assurance and program oversight.

#### **Analysis of financial/statistical data:**

Because SRCC-MO completed its first FY in FY25, there are no trends or baselines to use as a comparison.

In FY25, SRCC-MO had 12,972 patient cases with a contribution margin of \$1,035,141 and a payer mix of 52% Medicare, 23% Commercial Managed Care, 15% Medicare Advantage, 5% Medi-Cal Managed Care and 5% other.

The average direct cost per visit averaged \$2,898 per visit while the net revenue per visit averaged \$2,977 per visit leading to a contribution margin of \$80 per visit.

## **Quality/Performance Improvement Data**

Quality and performance improvement initiatives at SRCC-MO include:

- As our new medical director, Dr. Gill's first order of business was to initiate our pursuit of Commission on Cancer accreditation through the American College of Surgeons.
- Implementation of new infusion pumps and development of comprehensive drug library, both designed to enhance safety and accuracy of infusion therapy.
- Adding a "time- out" procedure with documentation to bone marrow biopsy process to ensure patient safety and procedural accuracy.
- Implementation of the Patient Health Questionnaire or PHQ-9 depressionscreening tool to identify patients experiencing depression and ensure they receive timely access to appropriate mental health support and resources.

## **Policy, Strategic or Tactical Issues**

- Monthly oncologist provider meetings have been established to discuss workflow challenges, review quality and performance metrics and share general program updates. These meetings serve as a platform for collaboration among physicians, nursing staff and administrative leaders to identify process improvements, streamline patient care coordination, and ensure alignment with organizational goals. Regular communication through these meetings fosters a culture of continuous improvement, accountability and teamwork within the medical oncology service line.
- A new therapy type, known at Bispecific T cell Engager therapy (BiTE therapy), is now being offered to cancer patients at SRCC-MO. This advanced treatment is initiated at a tertiary facility, with subsequent maintenance doses administered locally at SRCC-MO. Offering this service enables patients to receive innovative cancer therapy closer to home, reducing the need for extensive travel and supporting continuity of care within our community.
- Changes have been made to the infusion schedule to reduce delays and improve patient flow. Chemotherapy infusions and office visits are now scheduled on separate days, allowing the care team to review each patient the day before their infusions and determine if there are any clinical reasons to postpone treatment. This approach helps ensure that infusions proceed safely and on schedule, minimizing disruptions for patients.

## **Recommendations/Next Steps**

 Volume and Growth: Patient volume continues to grow, resulting in limited space for completing infusions. As a result, some patients experience a delay of one to two weeks before being scheduled for chemotherapy infusions. To address this challenge, options are being explored such as extending hours of operation or adding additional infusion days to better accommodate patient needs and improve access to care.  New Electronic Medical Record: Switching to a unified electronic medical record Cerner will align SRCC-MO with the rest of the district. This will streamline patient care, standardize documentation and integrate billing processes. This change is expected to reduce barriers, improve communication among care teams and enhance overall efficiency across the service line.

## **Approvals/Conclusions**

Recent initiatives to enhance patient safety, quality, and access include: updated infusion pumps and drug libraries, documented bone marrow biopsy "time-outs," PHQ-9 depression screening, BiTE therapy availability, separation of office visits from infusion days, and monthly provider meetings to review workflow and quality metrics. Additionally, transitioning to a unified electronic medical record system will streamline documentation, billing, and care coordination.

With growing patient volumes, SRCC-MO is exploring extended hours and additional infusion days to reduce wait times and maintain timely access to care. These combined efforts position SRCC-MO to deliver safe, efficient, and innovative oncology care close to home while addressing the expanding needs of the patient population.

## KAWEAH HEALTH ANNUAL BOARD REPORT

Oncology Services - Summary

Net Revenue	FY2022	FY2023	FY2024	FY2025	%CHANGE FROM PRIOR YR
Inpatient Oncology	\$11,074,908	\$9,767,864	\$11,868,259	\$9,935,816	-16%
SRCC Radiation Oncology Visalia	\$6,933,756	\$7,593,580	\$8,205,740	\$7,679,884	-6%
SRCC Radiation Oncology Hanford	\$1,456,350	\$1,065,679	\$898,469	\$1,136,086	26%
Outpatient Medical Center Oncology Infusi	\$68,253	\$125,913	\$138,743	\$47,462	16%
SRCC Medical Oncology Clinic	\$0	\$0	\$0	\$38,622,733	-
Total Oncology	\$19,533,267	\$18,553,036	\$21,111,211	\$57,421,982	172%

Direct Cost	FY2022	FY2023	FY2024	FY2025	%CHANGE FROM PRIOR YR
Inpatient Oncology	\$8,760,366	\$7,931,875	\$8,612,248	\$7,275,280	-16%
SRCC Radiation Oncology Visalia	\$5,162,733	\$5,403,961	\$6,453,026	\$6,232,616	-3%
SRCC Radiation Oncology Hanford	\$1,439,464	\$1,459,597	\$1,609,393	\$1,431,603	-11%
Outpatient Medical Center Oncology Infusi	\$54,910	\$93,810	\$99,887	\$64,145	16%
SRCC Medical Oncology Clinic	\$0	\$0	\$0	\$37,587,592	-
Total Oncology	\$15,417,472	\$14,889,244	\$16,774,555	\$52,591,237	217%

Contribution Margin	FY2022	FY2023	FY2024	FY2025	%CHANGE FROM PRIOR YR
Inpatient Oncology	\$2,314,542	\$1,835,989	\$3,256,011	\$2,660,537	-18%
SRCC Radiation Oncology Visalia	\$1,771,023	\$2,189,619	\$1,752,714	\$1,447,268	-17%
SRCC Radiation Oncology Hanford	\$16,886	(\$393,918)	(\$710,925)	(\$295,517)	58%
Outpatient Medical Center Oncology Infusi	\$13,343	\$32,102	\$38,856	(\$16,684)	16%
SRCC Medical Oncology Clinic	\$0	\$0	\$0	\$1,035,141	-
Total Oncology	\$4,115,795	\$3,663,792	\$4,336,656	\$4,830,746	14%

**Oncology Services - Inpatient Oncology** 

#### KEY METRICS - FY 2025 TWELVE MONTHS ENDED JUNE 30, 2025











**METRICS SUMMARY - 4 YEAR TREND** 

ETRIC	FY2022	FY2023	FY2024	FY2025	%CHANGE FROM PRIOR YR	4 YR TREND
Patient Cases	518	480	540	434	▼ -20%	$\checkmark$
Patient Days	3,173	2,862	3,325	2,535	-24%	<b>✓</b>
ALOS	6.13	5.96	6.16	5.84	▼ -5%	$\checkmark$
GM LOS	4.19	4.03	3.89	4.27	10%	~
Net Revenue	\$11,074,908	\$9,767,864	\$11,868,259	\$9,935,816	<b>▼</b> -16%	
Direct Cost	\$8,760,366	\$7,931,875	\$8,612,248	\$7,275,280	<b>▼</b> -16%	<b>\</b>
Additional Reimb	\$1,079,177	\$1,367,351	\$1,058,826	\$1,195,565	<b>13%</b>	$\triangle$
Contribution Margin	\$2,314,542	\$1,835,989	\$3,256,011	\$2,660,537	<b>▼</b> -18%	
Indirect Cost	\$2,549,664	\$2,446,876	\$2,614,619	\$2,311,900	<b>▼</b> -12%	<b>\</b>
Net Income	(\$235,122)	(\$610,887)	\$641,392	\$348,637	<b>▼</b> -46%	~
Net Revenue per Case	\$21,380	\$20,350	\$21,978	\$22,894	4%	<u> </u>
Direct Cost per Case	\$16,912	\$16,525	\$15,949	\$16,763	<b>5</b> %	~
Add Reimb Per Case	\$2,083	\$2,849	\$1,961	\$2,755	<b>40</b> %	
Contrb Margin per Case	\$4,468	\$3,825	\$6,030	\$6,130	2%	_/
CM w/o Add Reim Per Case	\$2,385	\$976	\$4,069	\$3,376	<b>▼</b> -17%	
Opportunity Days	1.94	1.93	2.27	1.57	▼ -31%	-

#### PER CASE TRENDED GRAPHS



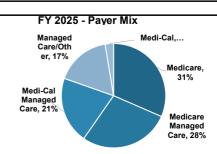






#### PAYER MIX - 4 YEAR TREND (GROSS REVENUE)

PAYER	FY2022	FY2023	FY2024	FY2025
Medicare	35%	37%	32%	31%
Medicare Managed Care	24%	15%	22%	28%
Medi-Cal Managed Care	16%	16%	15%	21%
Managed Care/Other	19%	25%	25%	17%
Medi-Cal	6%	6%	5%	3%



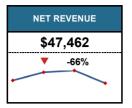
#### KAWEAH HEALTH ANNUAL BOARD REPORT

Oncology Services - Outpatient Medical Center Oncology Infusions (3 South)

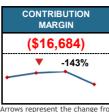
\*\*NOTE: Outpatient Infusions in an Inpatient Bed - Downtown Campus

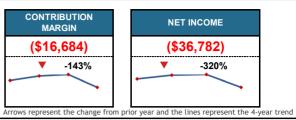
#### **KEY METRICS - FY 2025 TWELVE MONTHS ENDED JUNE 30, 2025**







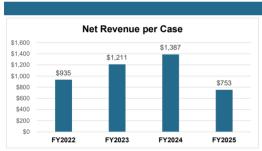




**METRICS SUMMARY - 4 YEAR TREND** 

METRIC	FY2022	FY2023	FY2024	FY2025		IANGE FROM PRIOR YR	4 YR TREND
Patient Cases	73	104	100	63	•	-37%	
Net Revenue	\$68,253	\$125,913	\$138,743	\$47,462	•	-66%	
Direct Cost	\$54,910	\$93,810	\$99,887	\$64,145	•	-36%	
Contribution Margin	\$13,343	\$32,102	\$38,856	(\$16,684)	•	-143%	
Indirect Cost	\$15,348	\$18,070	\$22,107	\$20,098	•	-9%	
Net Income	(\$2,006)	\$14,032	\$16,749	(\$36,782)	•	-320%	
Net Revenue per Case	\$935	\$1,211	\$1,387	\$753	•	-46%	
Direct Cost per Case	\$752	\$902	\$999	\$1,018	<b>A</b>	2%	
Contrb Margin per Case	\$183	\$309	\$389	(\$265)	•	-168%	
CM w/o Add Reim Per Case	\$183	\$308	\$389	(\$265)	<b>V</b>	-168%	-

#### PER CASE TRENDED GRAPHS

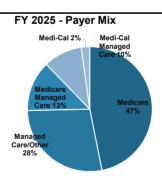






**PAYER MIX - 4 YEAR TREND (VOLUME)** 

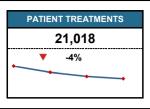
PAYER	FY2022	FY2023	FY2024	FY2025
Medicare	37%	35%	39%	47%
Managed Care/Other	30%	33%	29%	28%
Medicare Managed Care	16%	14%	19%	13%
Medi-Cal Managed Care	14%	14%	11%	10%
Medi-Cal	2%	4%	2%	2%

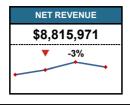


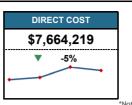
#### KAWEAH HEALTH ANNUAL BOARD REPORT

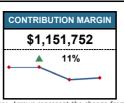
Oncology Services - SRCC Radiation Oncology Combined

#### **KEY METRICS - FY 2025 TWELVE MONTHS ENDED JUNE 30, 2025**









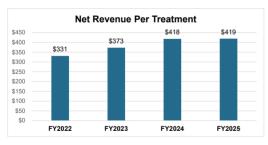


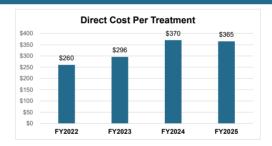
#### METRICS SUMMARY - 4 YEAR TREND

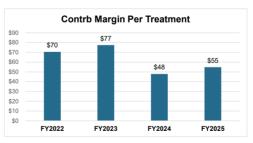
ETRIC	FY2022	FY2023	FY2024	FY2025	%CHANGE FROM PRIOR YR	4 YR TREND
Patient Treatments	25,365	23,202	21,784	21,018	-4%	
Net Revenue	\$8,390,106	\$8,659,259	\$9,104,209	\$8,815,971	-3%	
Direct Cost	\$6,602,197	\$6,863,559	\$8,062,420	\$7,664,219	-5%	
Additional Reimb	\$0	\$9,790	\$14,055	\$45,251	222%	
Contribution Margin	\$1,787,910	\$1,795,701	\$1,041,789	\$1,151,752	11%	•
Indirect Cost	\$9,225	\$27,596	\$5,754	\$22,505	291%	
Net Income	\$1,778,685	\$1,768,104	\$1,036,036	\$1,129,247	9%	
Net Revenue Per Treatment	\$331	\$373	\$418	\$419	0%	
Direct Cost Per Treatment	\$260	\$296	\$370	\$365	-1%	
Add Reimb Per Treatment	\$0	\$0	\$1	\$2	234%	
Contrb Margin Per Treatment	\$70	\$77	\$48	\$55	15%	
CM w/o Add Reimb Per Treatmen	\$70	\$77	\$47	\$53	12%	1

#### PER CASE TRENDED GRAPHS



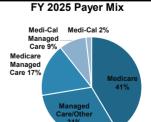






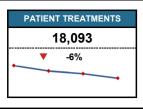
#### PAYER MIX - 4 YEAR TREND (VOLUME)

PAYER	FY2022	FY2023	FY2024	FY2025
Medicare	35%	35%	37%	41%
Managed Care/Other	33%	33%	34%	31%
Medicare Managed Care	15%	15%	18%	17%
Medi-Cal Managed Care	13%	13%	9%	9%
Medi-Cal	4%	4%	2%	2%



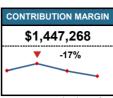
Oncology Services - SRCC Radiation Oncology Visalia

#### KEY METRICS - FY 2025 TWELVE MONTHS ENDED JUNE 30, 2025







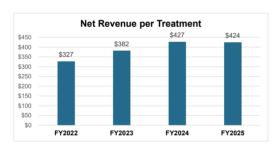


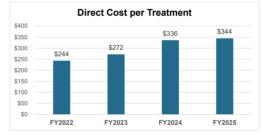


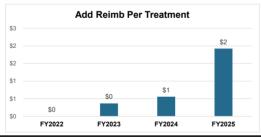
**METRICS SUMMARY - 4 YEAR TREND** 

ETRIC	FY2022	FY2023	FY2024	FY2025		NGE FROM RIOR YR	4 YR TREN
Patient Treatments	21,199	19,876	19,211	18,093	▼	-6%	-
Net Revenue	\$6,933,756	\$7,593,580	\$8,205,740	\$7,679,884	•	-6%	
Direct Cost	\$5,162,733	\$5,403,961	\$6,453,026	\$6,232,616	•	-3%	/
Additional Reimb	\$0	\$7,260	\$10,700	\$34,815	<b>A</b>	225%	
Contribution Margin	\$1,771,023	\$2,189,619	\$1,752,714	\$1,447,268	▼	-17%	
Indirect Cost	\$9,208	\$27,296	\$5,716	\$22,505	<b>A</b>	294%	
Net Income	\$1,761,816	\$2,162,323	\$1,746,998	\$1,424,763	▼	-18%	
Net Revenue per Treatment	\$327	\$382	\$427	\$424	•	-1%	
Direct Cost per Treatment	\$244	\$272	\$336	\$344	<b>A</b>	3%	
Add Reimb Per Treatment	\$0	\$0	\$1	\$2	<b>A</b>	245%	
Contrb Margin per Treatment	\$84	\$110	\$91	\$80	▼	-12%	
CM w/o Add Reimb Per Treatmer	\$84	\$110	\$90	\$78	▼	-13%	

#### PER CASE TRENDED GRAPHS





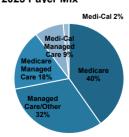




PAYER MIX - 4 YEAR TREND (VOLUME)

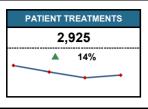
PAYER	FY2022	FY2023	FY2024	FY2025
Medicare	36%	36%	37%	40%
Managed Care/Other	33%	33%	35%	32%
Medicare Managed Care	15%	15%	17%	18%
Medi-Cal Managed Care	12%	12%	8%	9%
Medi-Cal	4%	4%	2%	2%

FY 2025 Payer Mix



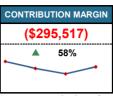
Oncology Services - SRCC Radiation Oncology Hanford

#### KEY METRICS - FY 2025 TWELVE MONTHS ENDED JUNE 30, 2025







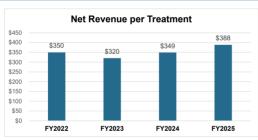


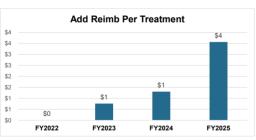


**METRICS SUMMARY - 4 YEAR TREND** 

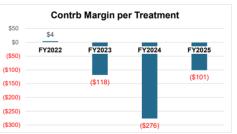
ETRIC	FY2022	FY2023	FY2024	FY2025	%CHANGE FRO PRIOR YR	M 4 YR TRENE
Patient Treatments	4,166	3,326	2,573	2,925	<b>▲</b> 14%	
Net Revenue	\$1,456,350	\$1,065,679	\$898,469	\$1,136,086	<b>26</b> %	
Direct Cost	\$1,439,464	\$1,459,597	\$1,609,393	\$1,431,603	▼ -11%	
Additional Reimb	\$0	\$2,530	\$3,355	\$10,437	<b>▲</b> 211%	
Contribution Margin	\$16,886	(\$393,918)	(\$710,925)	(\$295,517)	<b>▲</b> 58%	
Indirect Cost	\$17	\$300	\$37	\$0	▼ -100%	
Net Income	\$16,869	(\$394,219)	(\$710,962)	(\$295,517)	▲ 58%	
Net Revenue per Treatment	\$350	\$320	\$349	\$388	<b>▲</b> 11%	<b>→</b>
Direct Cost per Treatment	\$346	\$439	\$625	\$489	▼ -22%	
Add Reimb Per Treatment	\$0	\$1	\$1	\$4	<b>▲</b> 174%	سس
Contrb Margin per Treatment	\$4	(\$118)	(\$276)	(\$101)	<b>▲</b> 63%	
CM w/o Add Reimb Per Treatmer	\$4	(\$119)	(\$278)	(\$105)	<b>▲</b> 62%	

#### PER CASE TRENDED GRAPHS



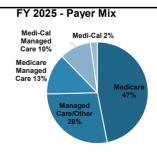






#### PAYER MIX - 4 YEAR TREND (VOLUME)

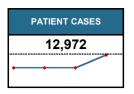
PAYER	FY2022	FY2023	FY2024	FY2025
Medicare	35%	35%	39%	47%
Managed Care/Other	33%	33%	29%	28%
Medicare Managed Care	14%	14%	19%	13%
Medi-Cal Managed Care	14%	14%	11%	10%
Medi-Cal	4%	4%	2%	2%

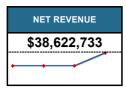


#### KAWEAH HEALTH ANNUAL BOARD REPORT

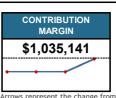
Oncology Services - SRCC Medical Oncology Clinic

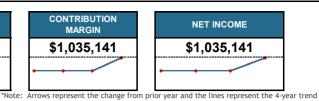
**KEY METRICS - FY 2025 TWELVE MONTHS ENDED JUNE 30, 2025** 







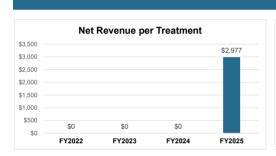




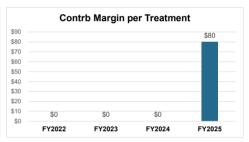
#### METRICS SUMMARY - 4 YEAR TREND

METRIC	FY2022	FY2023	FY2024	FY2025	%CHANGE FROM PRIOR YR	4 YR TREND
PATIENT CASES	0	0	0	12,972		
Net Revenue	\$0	\$0	\$0	\$38,622,733		
Direct Cost	\$0	\$0	\$0	\$37,587,592		
Contribution Margin	\$0	\$0	\$0	\$1,035,141		
Indirect Cost	\$0	\$0	\$0	\$0		
Net Income	\$0	\$0	\$0	\$1,035,141		
Net Revenue per Treatment	\$0	\$0	\$0	\$2,977		
Direct Cost per Treatment	\$0	\$0	\$0	\$2,898		
Contrb Margin per Treatment	t \$0	\$0	\$0	\$80		

#### PER CASE TRENDED GRAPHS







PAYER MIX - 4 YEAR TREND (Gross Revenue from GL)

PAYER	FY2022	FY2023	FY2024	FY2025
Medicare				52%
Managed Care/Other				23%
Medicare Managed Care				15%
Medi-Cal Managed Care				5%
Other				5%

Criteria: OP Service Line = SRCC Medical Oncology Practice

## REPORT TO THE BOARD OF DIRECTORS

## **Quail Park Retirement Village (Cypress)**

Marc Mertz, Chief Strategy Officer, 624-2511 November 19, 2025

## **Summary Issue/Service Considered**

The Quail Park Cypress campus consists of a senior independent living facility (Quail Park Retirement Village) and a secure memory care facility (Laurel Court). These are organized as separate legal entities.

The Quail Park Retirement Village independent living facility, established in 2002, is a 127-unit senior retirement village owned 44 percent by Kaweah Health and 56 percent by Living Care Senior Housing. Denis Bryant from Living Care is the Managing Member. Kaweah Health's equity investment in Quail Park Retirement Village included \$900,000 in land and \$688,770 in cash provided by the Betty Quilla Fund held by the Kaweah Health Foundation.

Lynn Havard Mirviss and Marc Mertz represent Kaweah Health on the Quail Park Retirement Village Board of Members. Cathy Boshaw and the Elling Halverson estate represent Living Care Senior Housing on the two boards. Kaweah Health and Living Care have equal voting rights on the boards.

## **Quality/Performance Improvement Data**

Prior to 2020, Quail Park Retirement Village at Cypress historically operated nearly at capacity, significantly above industry benchmarks. As recently as June 2019, Quail Park Retirement Village had a 28-unit waiting list. Like all senior living facilities, Quail Park was significantly impacted by COVID-19 beginning in 2020. Many individuals chose to delay moving into senior living facilities. According to The National Investment Center for Seniors Housing & Care (NIC), occupancy rates for US assisted living facilities reached a record low of 77.7% at the end of 2020. Similarly, occupancy in independent living facilities also reached a record low of 83.5% at the end of 2020.

Quail Park's occupancy continued to be significantly depressed as a result of the pandemic and increased competitive pressures in the market (including our own introduction of Quail Park at Shannon Ranch), and decreased from 2020 until 2022 when it went to 75%. Since 2022, it has been slowly increasing and is now at 86%. The NIC overall occupancy rate for senior housing across the US was 87.4% at the end of the 2<sup>nd</sup> quarter of 2025.

	Aug.	July	Aug.	Aug.	July	July
	2020	2021	2022	2023	2024	2025
Occupancy Rate	87%	81%	75%	77%	83%	86%

During fiscal year 2025 (July 1, 2024 through June 30, 2025), Quail Park Retirement Village generated an operating loss and was unable to generate funds to pay distributions to its owners. Kaweah Health's portion of the operating loss (based on 44% ownership) was \$445,443. The owners were asked to contribute cash in the form of loans to offset the operational losses. Kaweah Health's share of these loans was \$154,000 during FY2025. These loans are repayable to Kaweah at 5% interest. Rather than use cash reserves to fund these loans, Kaweah Health

borrowed the entire amount from the Kaweah Health Hospital Foundation's Betty Quilla Fund, which was established to support senior housing in Tulare County. This fund will be repaid as Kaweah Health receives funds from Quail Park. The total loan receivable from Quail Park Retirement Village is \$569,249.

With occupancy now at 86% and expected to increase to 90% in early 2026, this property is expected to return to profitability.

While the recent performance of this facility has been below expectations and the need to loan funds to support operations has been unfortunate, it is important to appreciate the impact this facility has had to Kaweah Health and the community since its inception. Since 2002, Kaweah Health has received \$5,569,500 in equity distributions from the operation of this facility. In addition, multiple loan refinancing for the property has yielded an additional \$5,934,840 in distributions to Kaweah Health, for total distributions of \$11,504,340.

The total loans made by Kaweah Health to all Quail Park facilities in Visalia (both Cypress facilities plus the Shannon Ranch facilities) over several years is \$3,701,936. All but \$220,000 of these loans have been made using funds from the Betty Quilla Fund. Accrued interest on these loans is \$245,660. All owners have made similar loans based on their ownership percentage.

In addition to the financial benefit to Kaweah Health, Quail Park Retirement Village has been a premier senior housing facility in Tulare County and offers our community members a higher level option for senior housing. This was the exact intent of Betty Quilla's generous donation.

### **Policy, Strategic or Tactical Issues**

COVID-19 had a significant negative impact on the occupancy rates of senior living facilities nationwide. Quail Park Retirement Village was not spared, and it has taken years to recover. The opening of the Quail Park at Shannon Ranch facilities have probably also contributed to the lower occupancy at the Cypress location. This facility is also on the higher end of facilities, services, and rates in our community.

In FY2025, management has taken significant steps to maintain competitiveness and to increase occupancy. Leadership of the facility has been replaced, and marketing efforts have been increased.

## **Recommendations/Next Steps**

Continue to operate Quail Park Retirement Village as a high-level senior retirement center. Continue to work closely with management to maintain attractive and safe facilities, with excellent service. Aggressively market the facility to our community.

## **Approvals/Conclusions**

Despite another challenging year in FY2025, Quail Park is filling a significant health care need in our community, providing exceptional services to its residents, and at the same time has generated a significant income stream for Kaweah Health over the course of the project. A return to profitability is expected in fiscal year 2026.

## REPORT TO THE BOARD OF DIRECTORS

## **Quail Park Laurel Court (Memory Care)**

Marc Mertz, Chief Strategy Officer, 624-2511 November 19, 2025

## **Summary Issue/Service Considered**

Quail Park (Cypress campus) consists of a senior independent living facility (Quail Park Retirement Village) and a secure memory care facility (Laurel Court or Memory Care Center). These are organized as separate legal entities.

The 40-unit Memory Care Center (Laurel Court) is an Alzheimer's/Dementia facility located east of the Rehabilitation Hospital on Kaweah Health's west campus. It is owned 44 percent by Kaweah Health and 56 percent by Living Care Senior Housing. Denis Bryant from Living Care is the Managing Member. Kaweah Health's initial investment in Laurel Court consisted of \$720,000 in land and \$270,936 in cash provided by the Betty Quilla Fund in the Kaweah Health Foundation.

Denis Bryant is the manager of both entities. Lynn Havard Mirviss and Marc Mertz represent Kaweah Health on the Memory Care Board. Cathy Boshaw and the Halverson family represent Living Care Senior Housing. Kaweah Health and Living Care have equal voting rights on the boards.

## **Quality/Performance Improvement Data**

The 40-unit Memory Care Center, which opened in July 2012, historically operated at nearly 100% occupancy, often with an extensive waiting list. With the onset of the pandemic in early 2020, occupancy rates fell, as families did not want to move in new residents, and unfortunately, as residents passed away. Occupancy continued to decline until it reached a low in 2023 at 60%. Changes to the marketing staff and enhanced marketing efforts generated improved occupancy during 2024, but occupancy dropped to 65% in July 2025. The National Investment Center for Seniors Housing & Care (NIC) overall national senior housing occupancy rate was 87% at the end of the second quarter of 2025.

Memory Care	Aug	July	Aug	July	July	July
	2020	2021	2022	2023	2024	2025
Occupancy Rate	83%	78%	60%	60%	80%	65%

Laurel Court operated at a loss in FY2025. Kaweah Health's portion, based on 44% ownership, was \$456,761. All owners were subject to cash calls to fund operations, and Kaweah Health's portion of those cash calls were \$226,600 during FY2025. These cash calls are treated as loans payable to the owners.

Since the Memory Care Center opened in 2012, it has paid Kaweah Health a total of \$1,573,000 in profit distributions through June 2024. Kaweah Health has received an additional \$1,461,040 in refinance distributions from this property. Total distributions are \$3,034,040 based on an original Kaweah Health investment of \$990,936 in land and cash.

The total loans made by Kaweah Health to all Quail Park facilities in Visalia (both Cypress facilities plus the Shannon Ranch facilities) over several years is \$3,701,936. All but \$220,000 of these loans have been made using funds from the Betty Quilla Fund. Accrued interest on these loans is \$245,660. All owners have made similar loans based on their ownership percentage.

### **Policy, Strategic or Tactical Issues**

COVID-19 had a significant negative impact on the occupancy rates of senior living facilities nationwide. The Quail Park independent living and memory care centers were not spared, and it has taken years to recover. The opening of the Quail Park at Shannon Ranch facilities have probably also contributed to the lower occupancy at the Cypress locations, as it increased supply and competition in the senior living market.

Living Care made changes in the management and marketing staffing over the Memory Care Center during 2025, but performance is far below expectations as well as national benchmarks.

### **Recommendations/Next Steps**

Continue to operate the Memory Care facility as a high-level senior retirement center with services related to dementia care, with increased pressure on Living Care leadership to drive improvements to operations and occupancy.

## **Approvals/Conclusions**

Despite several years of challenging performance, the Memory Care Center is filling a significant health care need in our community, providing exceptional services to its residents.

## REPORT TO THE BOARD OF DIRECTORS

## **Quail Park at Shannon Ranch**

Marc Mertz, Chief Strategy Officer, 624-2511 November 19, 2025

## **Summary Issue/Service Considered**

In 2016, Kaweah Health approved construction of a new 120-unit independent, assisted, and memory care senior living project called Quail Park at Shannon Ranch near the intersection of Demaree and Flagstaff in northwest Visalia. The 139,000 square foot project is located on a 3.65 acre site next to the 6,100 square foot Urgent Care Center which Kaweah Health opened on a 1.01 acre parcel on the east side of Demaree. The main independent living facility has 100 units ranging from studios to 2-bedroom units, and the secure memory care facility has 20 rooms.

Kaweah Health owns 33 and one third percent of the project, which is held by Northwest Visalia Senior Housing. Other partners are Shannon Senior Care, LLC, BTV Senior Housing, LLC, BEE, Inc., and Millennium Advisors. Shannon Senior Care is owned by members of the Shannon family; BTV is owned by Bernard te Velde, Jr.; BEE is owned by Cathy Boshaw and Doug Eklund of the Seattle area; Millennium Advisors is owned primarily by Denis Bryant, the current managing partner of Quail Park and the Memory Care Center.

The approximately \$40 million project broke ground in March 2018 and was completed in early 2020. All Kaweah Health equity contributions to the project have originated from the Bettie Quilla Fund at Kaweah Health Hospital Foundation. The Quilla Fund is restricted by the donor for support of senior living projects in collaboration with Kaweah Health. Kaweah Health made a total equity contribution in Quail Park Shannon Ranch of \$3,997,000.

## **Quality/Performance Improvement Data**

During the facility's planning, and before COVID-19, management expected that occupancy of the main building would reach 50% within 90 days of opening and that the memory care center would be completely filled within that same period. Early deposits and waiting lists supported this. However, by July 2020 occupancy of the independent living building reached just 7% and the memory care was at 35%.

During the next several years, management worked hard to provide a safe environment for residents and visitors during COVID while maintaining the premier senior living facility in the region. Local management of Shannon Ranch has remained consistent since the facilities opened, but the marketing staff has turned over several times. A wide variety of marketing efforts have been deployed, including offering limited-time discounts to encourage people to move in, radio ads, billboards, home marketing visits, referral programs, social media campaigns, radio talk show host promotion, and more. Shannon Ranch frequently invites local clubs and organizations to meet in their conference room as a way to promote the facility.

Occupancy in the 20-unit memory care building reached capacity by 2022 and has remained there since then. Occupancy in the main building has been slower to increase. By July 2025, occupancy in the independent living building increased to 78%. The National Investment Center

for Seniors Housing & Care (NIC) overall national senior housing occupancy rate was 87% at the end of the second quarter of 2025.

Occupancy Rate	July	July	Aug	July	July	July
	2020	2021	2022	2023	2024	2025
Independent Living	7%	28%	56%	64%	76%	78%
Memory Care	35%	50%	100%	100%	100%	100%

Due primarily to the lower-than-expected occupancy, Quail Park at Shannon Ranch (which includes memory care) has operated at a loss since it has opened. To offset these losses, the owners of Northwest Visalia Senior Housing have made a series of cash calls to fund operations. These contributions are being treated as loans payable with a 5% interest rate. During FY2025, Kaweah Health made \$603,929 in such loans to Shannon Ranch. Since fiscal year 2020, Kaweah Health has made total loan payments of \$2,906,087 to Shannon Ranch. This amount is based on Kaweah Health's ownership percentage, and all owners have made proportional loans.

The total loans made by Kaweah Health to all Quail Park facilities in Visalia (both Cypress facilities plus the Shannon Ranch facilities) over several years is \$3,701,936. All but \$220,000 of these loans have been made using funds from the Betty Quilla Fund. Accrued interest on these loans is \$245,660. All owners have made similar loans based on their ownership percentage.

Approximately \$1,400,000 remains in the Bettie Quilla fund. These funds were originally restricted for the exclusive use on senior housing projects. In FY2025, the Foundation board of directors took action to unrestrict these funds, as it is unlikely that Kaweah Health will invest in additional senior housing projects. As of June 30, 2025 no Betty Quilla funds have been used for any purpose other than senior housing.

## Policy, Strategic or Tactical Issues

Shannon Ranch requires an occupancy rate of 80% to 85% to breakeven financially. During FY 2025 the property was refinanced, lowering debt service costs with lower interest rates and a period of interest-only payments.

## **Recommendations/Next Steps**

Continue to support Quail Park at Shannon Ranch and push Living Care leadership for improved performance.

## Approvals/Conclusions

Quail Park at Shannon Ranch opened at perhaps the worst possible time. However, the facility is the premier senior living in Visalia and perhaps the Central Valley. The amenities and services offered are unrivaled in the market. As the pandemic abates, this facility will be a significant asset to the community. The recent increase in occupancy has been encouraging and is expected to continue.

# **CFO Financial Report**

**Month Ending October 2025** 



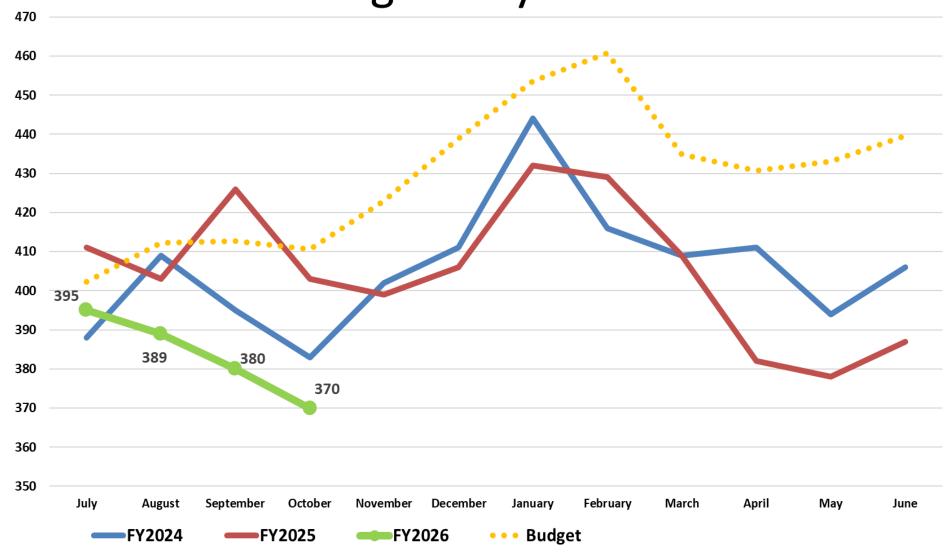


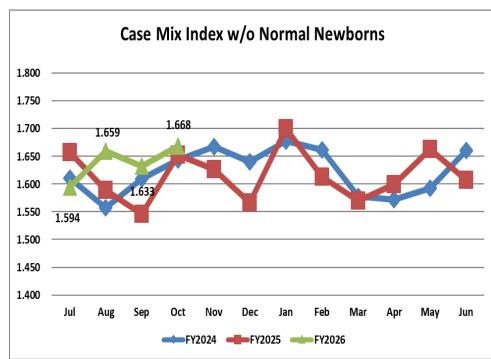


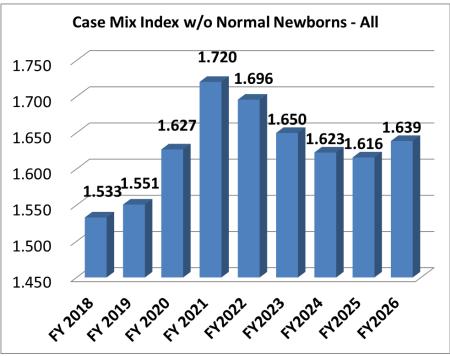


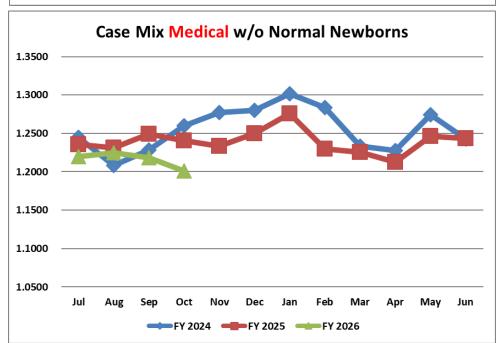


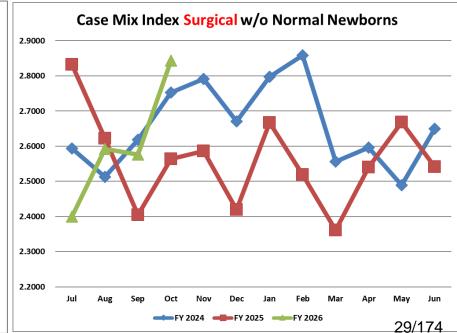
# **Average Daily Census**



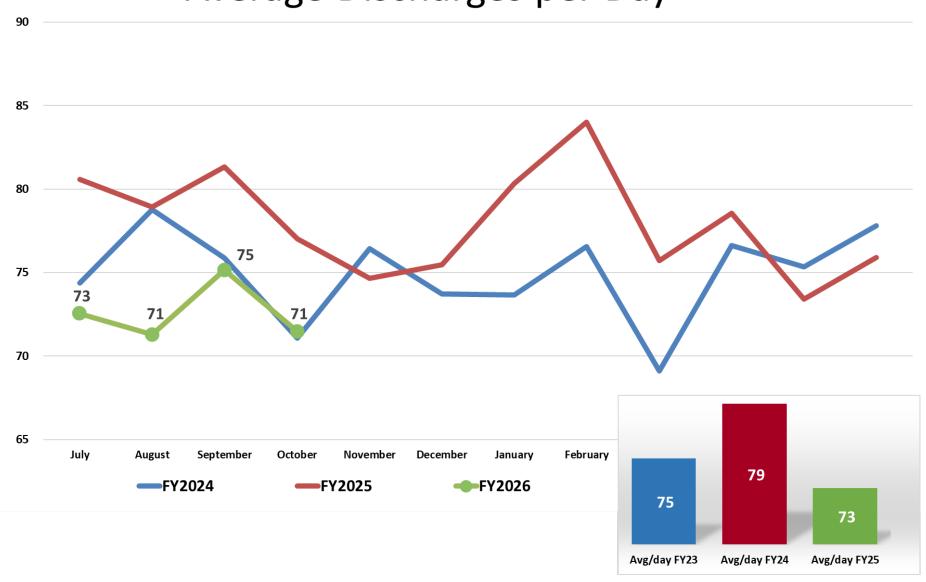




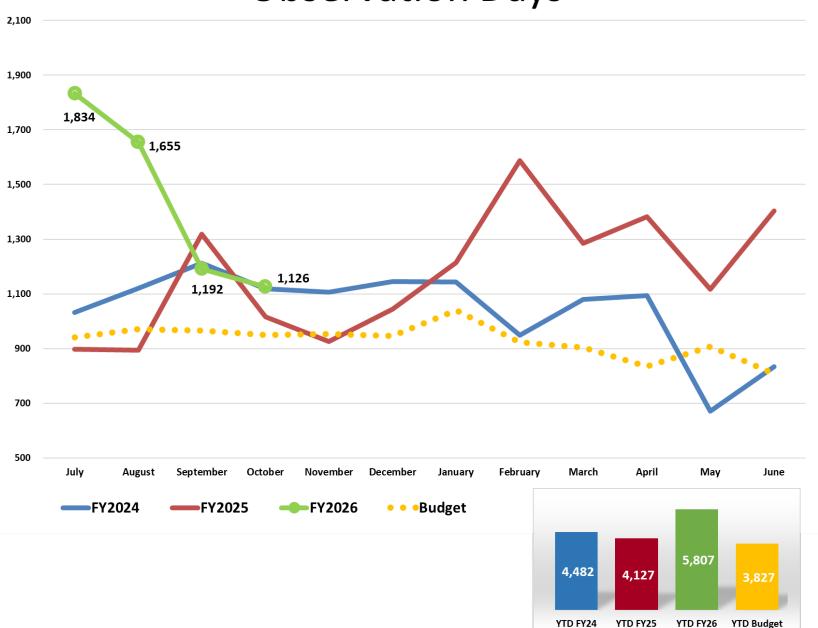




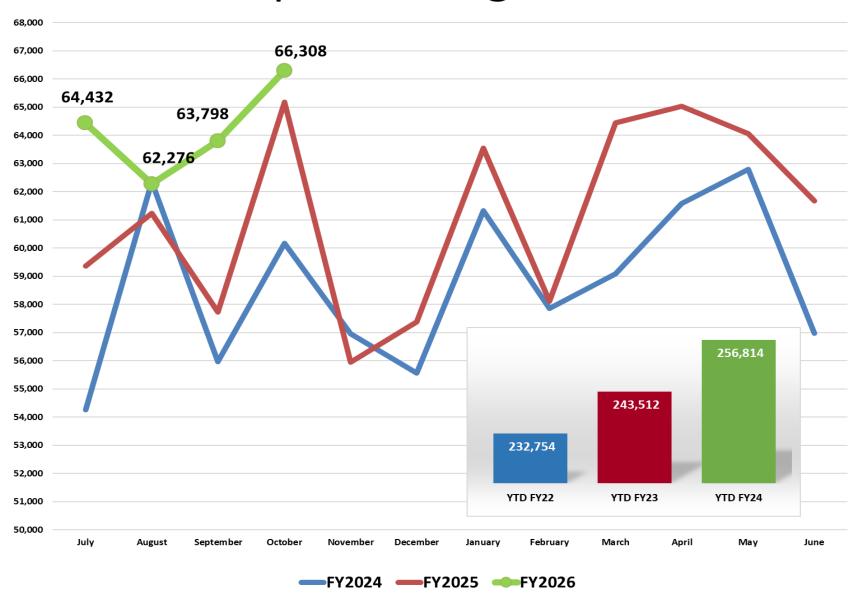
## Average Discharges per Day



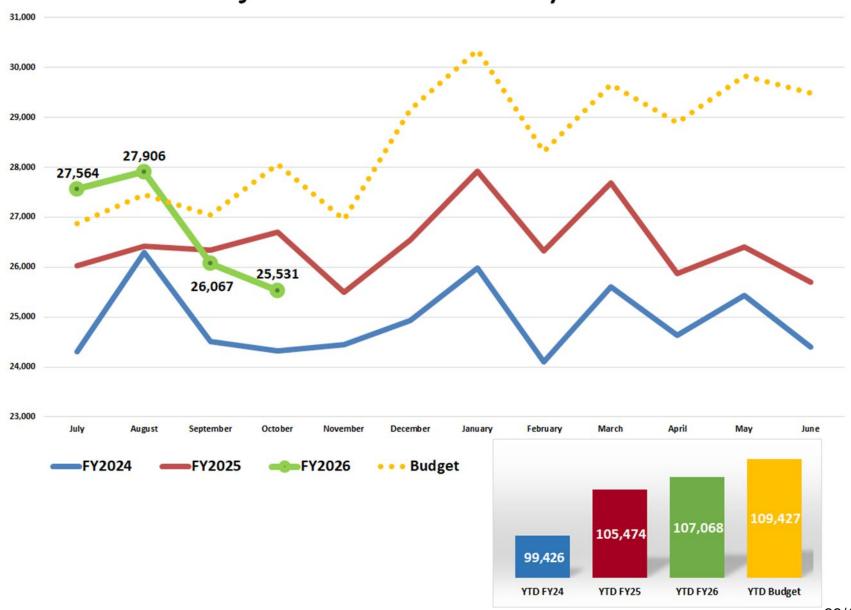
## **Observation Days**



# **Outpatient Registrations**



## Adjusted Patient Days



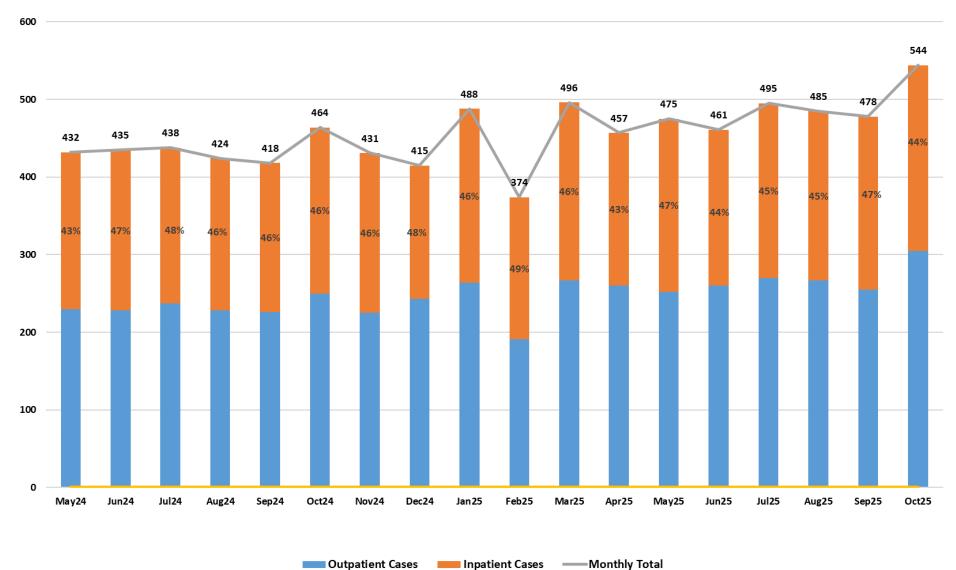
## **Statistical Results – Fiscal Year Comparison (Oct)**

	Actual Results		Budget	<b>Budget Variance</b>		
	Oct 2024	Oct 2025	% Change	Oct 2025	Change	% Change
Average Daily Census	403	370	(8.2%)	411	(41)	(9.9%)
KDHCD Patient Days:						
Medical Center	8,303	7,496	(9.7%)	8,422	(926)	(11.0%)
Acute I/P Psych	1,153	1,297	12.5%	1,519	(222)	(14.6%)
Sub-Acute	971	863	(11.1%)	927	(64)	(6.9%)
Rehab	641	701	9.4%	633	68	10.7%
TCS-Ortho	372	443	19.1%	383	60	15.7%
NICU	453	276	(39.1%)	380	(104)	(27.4%)
Nursery	590	391	(33.7%)	468	(77)	(16.5%)
Total KDHCD Patient Days	12,483	11,467	(8.2%)	12,732	(1,265)	(9.9%)
Total Outpatient Volume	65,193	66,309	1.7%	70,744	(4,435)	(6.3%)

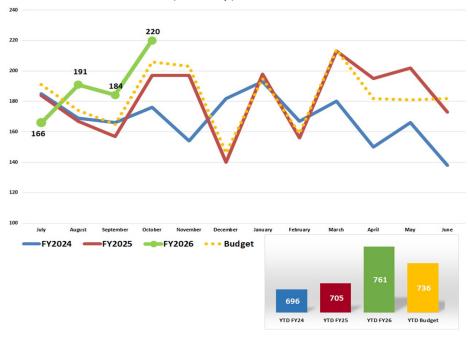
## **Statistical Results – Fiscal Year Comparison (Jul-Oct)**

	Actual Results		Budget	Budget '	Variance	
	FYTD 2025	FYTD 2026	% Change	FYTD 2025	Change	% Change
Average Daily Census	411	383	(6.7%)	409	(26)	(6.4%)
KDHCD Patient Days:						
Medical Center	34,778	30,681	(11.8%)	33,664	(2,983)	(8.9%)
Acute I/P Psych	4,547	5,419	19.2%	5,811	(392)	(6.7%)
Sub-Acute	3,678	3,479	(5.4%)	3,652	(173)	(4.7%)
Rehab	2,289	2,475	8.1%	2,474	1	0.0%
TCS-Ortho	1,356	1,735	27.9%	1,558	177	11.4%
NICU	1,760	1,507	(14.4%)	1,452	55	3.8%
Nursery	2,092	1,848	(11.7%)	1,755	93	5.3%
Total KDHCD Patient Days	50,500	47,144	(6.7%)	50,366	(3,222)	(6.4%)
Total Outpatient Volume	243,503	262,396	7.8%	280,694	(18,298)	(6.5%)

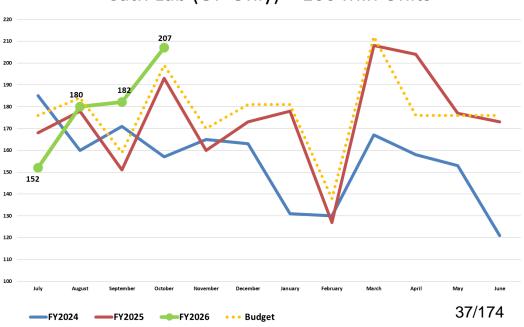
## Cath Lab Patients (IP & OP)



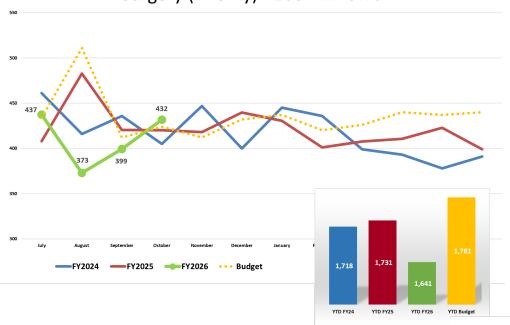
#### Cath Lab (IP Only) – 100 Min Units

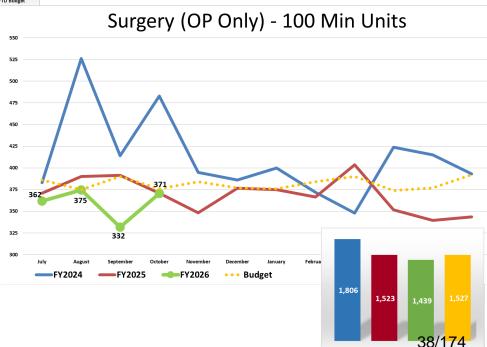


#### Cath Lab (OP Only) – 100 Min Units

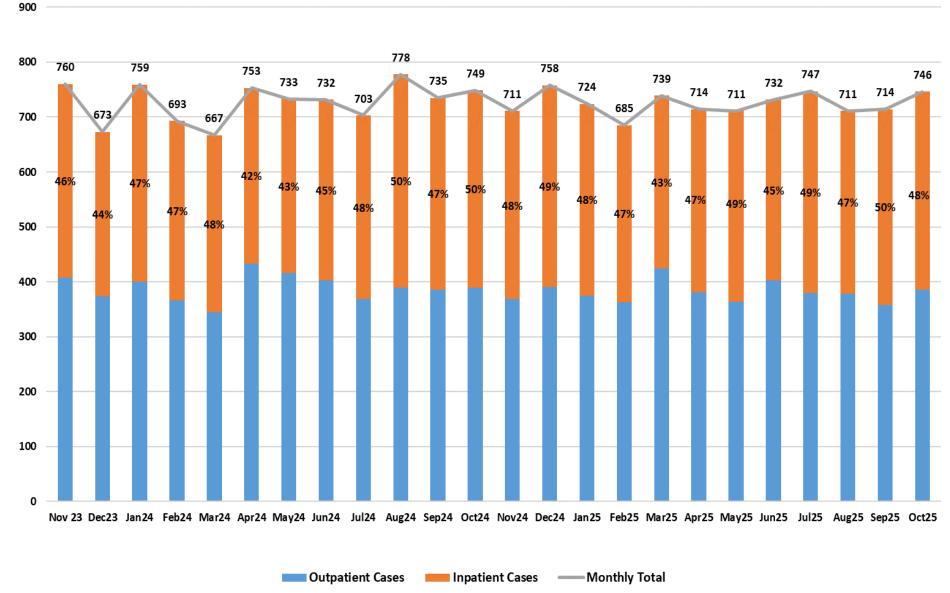


#### Surgery (IP Only) - 100 Min Unit

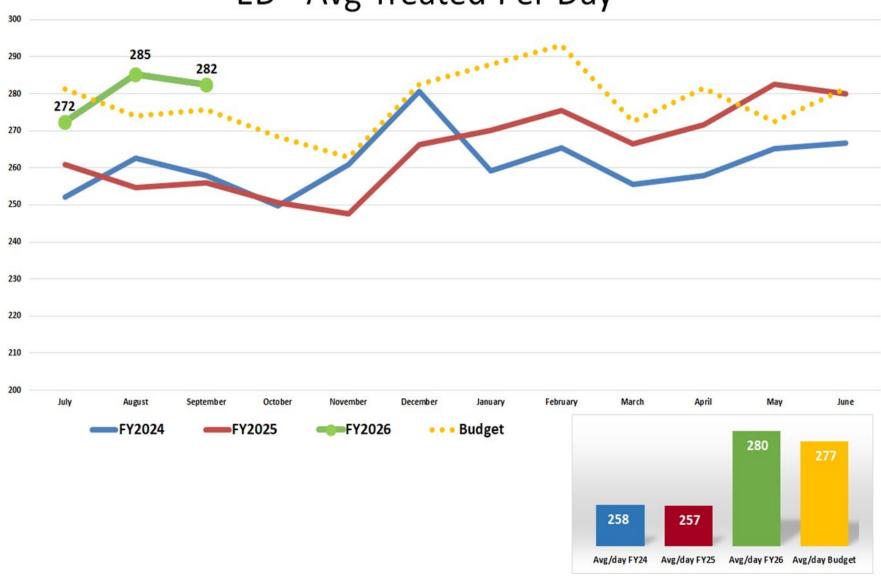




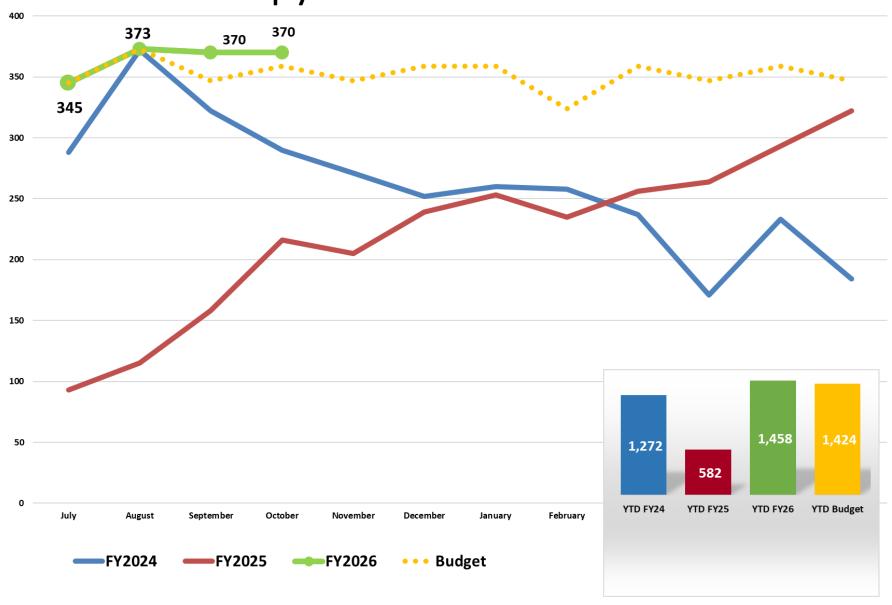
# Surgery Cases (IP & OP)



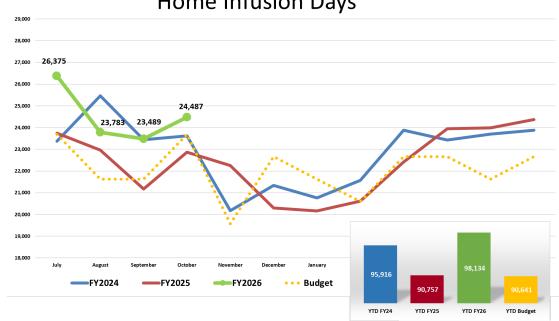
## ED - Avg Treated Per Day



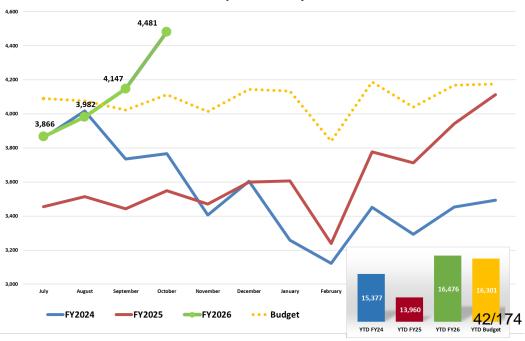
### Therapy-Wound Care Encounters



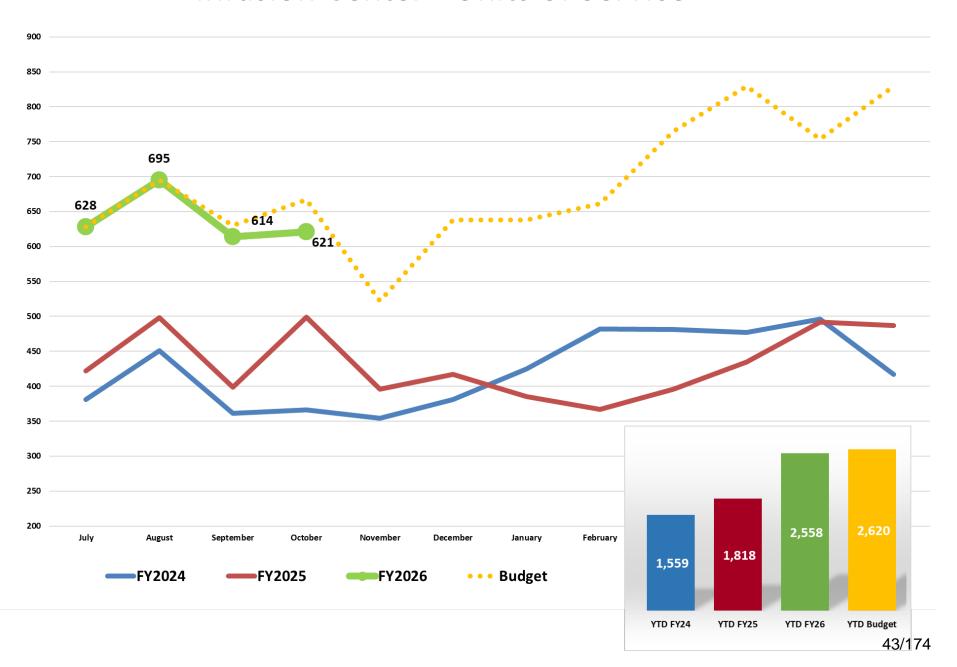
#### **Home Infusion Days**



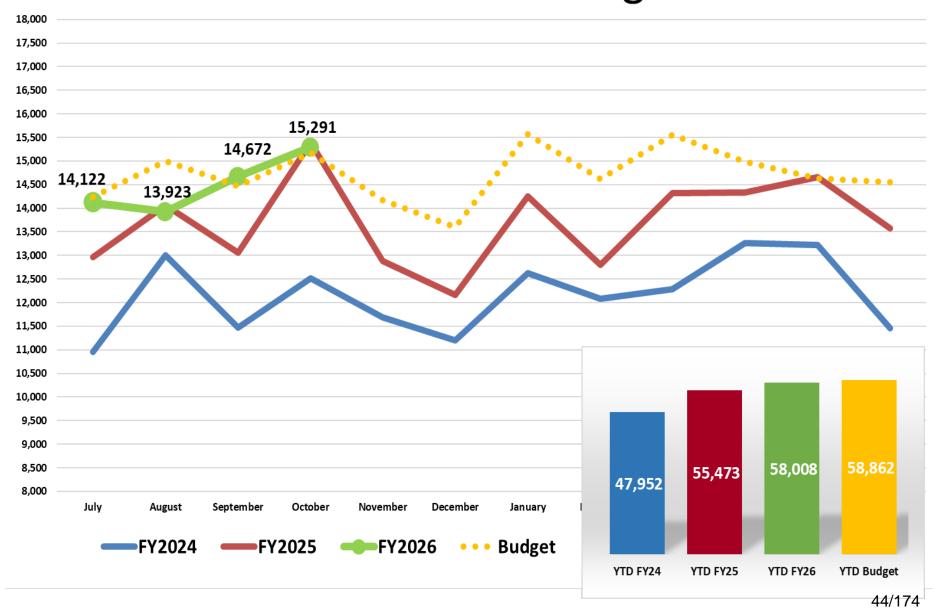
#### **Hospice Days**

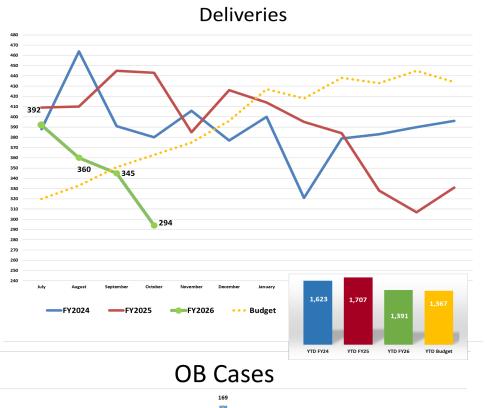


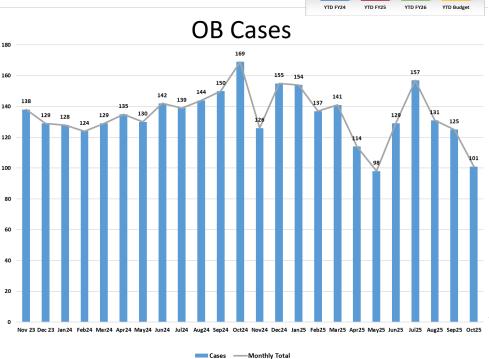
#### Infusion Center - Units of Service

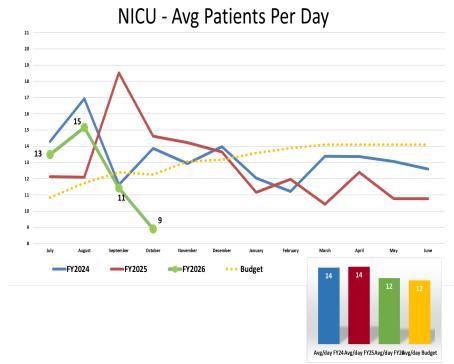


## Rural Health Clinics Registrations

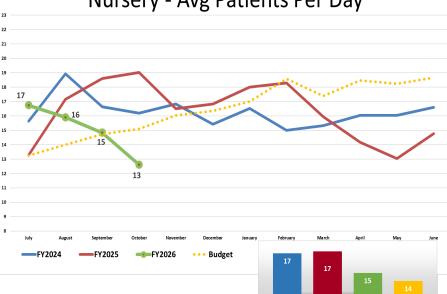




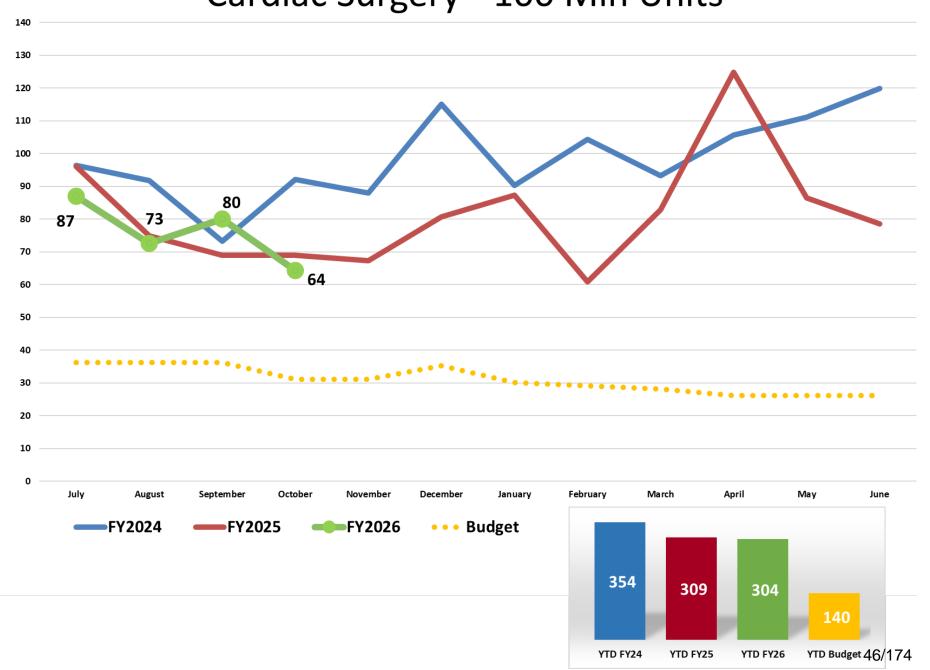




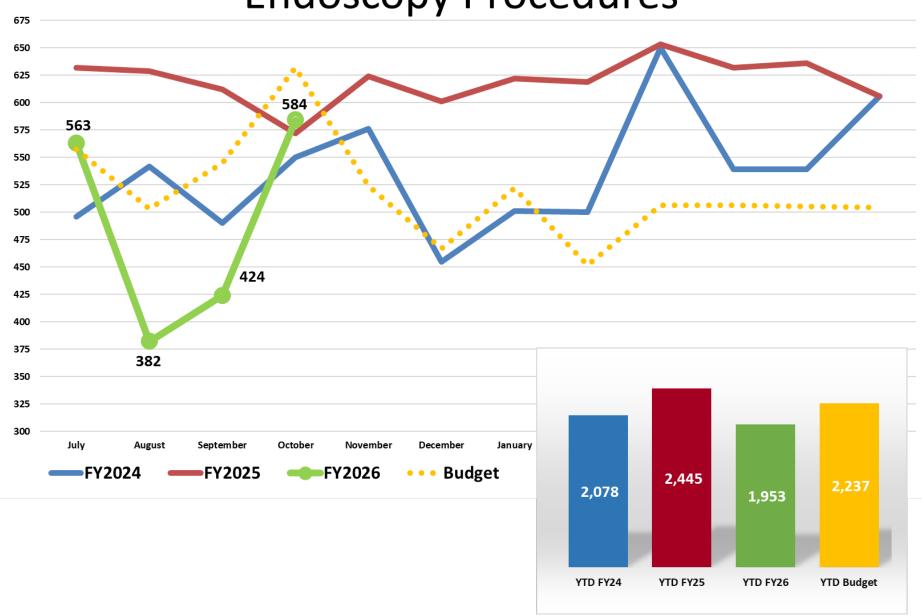




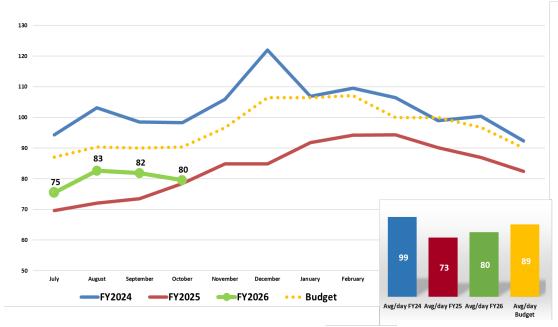
### Cardiac Surgery - 100 Min Units



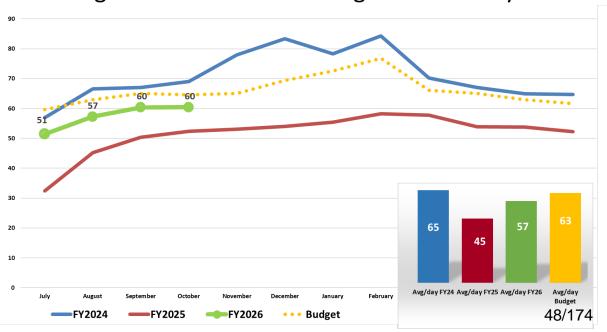
## **Endoscopy Procedures**



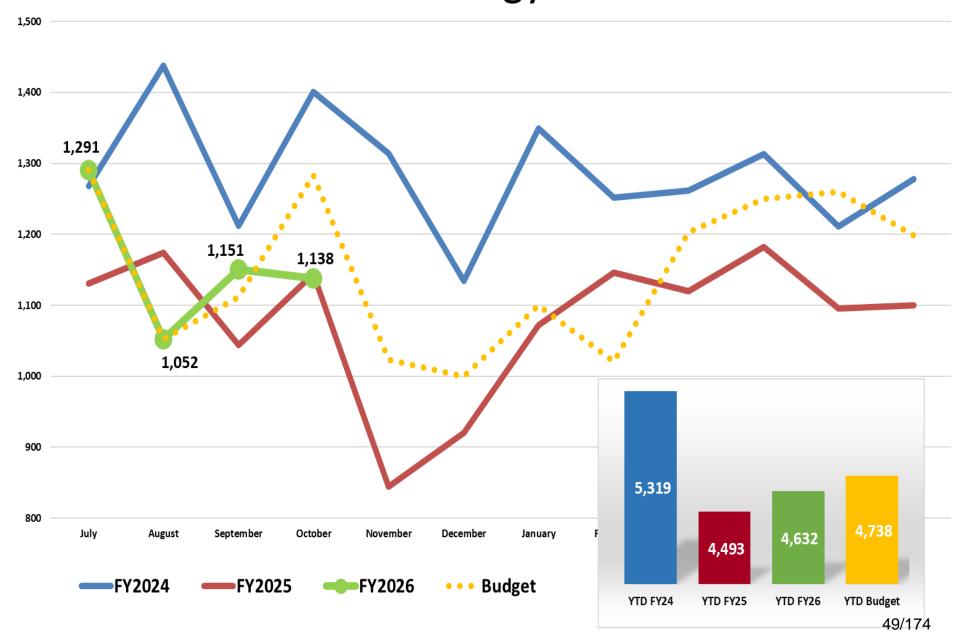
Urgent Care – Court Avg Visits Per Day



Urgent Care – Demaree Avg Visits Per Day



# **Medical Oncology Treatments**



#### Other Statistical Results - Prior Year/Budget Comparison (Oct)

		Actual	Results		Budget	Budget \	/ariance
	Oct 24	Oct 25	Change	% Change	Oct 25	Change	% Change
ED - Avg Treated Per Day	251	264	14	5.4%	268	(4)	(1.6%)
Surgery (IP & OP) – 100 Min Units	791	802	11	1.5%	800	2	0.3%
Endoscopy Procedures	572	584	12	2.1%	632	(48)	(7.6%)
Cath Lab (IP & OP) - 100 Min Units	390	427	37	9.5%	405	22	5.4%
Cardiac Surgery Cases	26	24	(2)	(7.7%)	31	(7)	(23.0%)
Deliveries	443	294	(149)	(33.6%)	363	(69)	(19.0%)
Clinical Lab	247,111	256,125	9,015	3.6%	271,821	(15,696)	(5.8%)
Reference Lab	7,302	8,013	711	9.7%	7,125	888	12.5%
		<u> </u>					
Dialysis Center - Visalia Visits	1,491	1,540	49	3.3%	1,510	30	2.0%
Infusion Center - Units of Service	499	621	122	24.4%	667	(46)	(6.9%)
Hospice Days	3,549	4,481	932	26.3%	4,113	368	8.9%
Home Health Visits	3,031	3,082	51	1.7%	3,152	(70)	(2.2%)
Home Infusion Days	22,874	24,487	1,613	7.1%	23,690	797	3.4%

### **Other Statistical Results – Fiscal Year Comparison (Jul-Oct)**

		YTD Actu	al Results		Budget	Budget \	/ariance
	YTD Oct 24	YTD Oct 25	Change	% Change	YTD Oct 25	Change	% Change
ED - Avg Treated Per Day	256	276	20	8.0%	275	1	0.5%
Surgery (IP & OP) – 100 Min Units	3,255	3,080	(175)	(5.4%)	3,308	(228)	(6.9%)
Endoscopy Procedures	2,445	1,953	(492)	(20.1%)	2,237	(284)	(12.7%)
Cath Lab (IP & OP) - 100 Min Units	1,395	1,482	87	6.3%	1,454	28	2.0%
Cardiac Surgery Cases	106	111	5	4.7%	140	(29)	(20.5%)
Deliveries	1,707	1,391	(316)	(18.5%)	1,367	24	1.8%
Clinical Lab	981,474	1,031,952	50,478	5.1%	1,079,620	(47,668)	(4.4%)
Reference Lab	30,045	32,102	2,057	6.8%	29,427	2,675	9.1%
Dialysis Center - Visalia Visits	6,049	5,934	(115)	(1.9%)	6,109	(175)	(2.9%)
Infusion Center - Units of Service	1,818	2,558	740	40.7%	2,620	(62)	(2.4%)
Hospice Days	13,960	16,476	2,516	18.0%	16,301	175	1.1%
Home Health Visits	11,707	12,331	624	5.3%	12,322	9	0.1%
Home Infusion Days	90,757	98,134	7,377	8.1%	90,641	7,493	8.3%

#### Other Statistical Results - Prior Year/Budget Comparison (Oct)

		Actual	Results		Budget	Budget \	/ariance
	Oct 24	Oct 25	Change	% Change	Oct 25	Change	% Change
All O/P Rehab Svcs Across District	22,349	23,120	771	3.4%	23,127	(7)	(0.0%)
Physical & Other Therapy Units (I/P & O/P)	19,024	19,176	152	0.8%	19,579	(403)	(2.1%)
Radiology - CT - All Areas	4,704	5,286	582	12.4%	4,678	608	13.0%
Radiology - MRI - All Areas	976	999	23	2.4%	919	80	8.7%
Radiology - Ultrasound - All Areas	3,071	3,036	(35)	(1.1%)	3,011	25	0.8%
Radiology - Diagnostic Radiology	9,343	9,366	23	0.2%	9,690	(324)	(3.3%)
Radiology – Main Campus	15,081	15,369	288	1.9%	15,186	183	1.2%
Radiology - Ultrasound - Main Campus	2,345	2,256	(89)	(3.8%)	2,110	146	6.9%
West Campus - Diagnostic Radiology	1,279	1,460	181	14.2%	1,223	237	19.4%
West Campus - CT Scan	537	622	85	15.8%	517	105	20.4%
West Campus - MRI	471	456	(15)	(3.2%)	471	(15)	(3.2%)
West Campus - Ultrasound	726	780	54	7.4%	901	(121)	(13.4%)
West Campus - Breast Center	1,875	2,010	135	7.2%	1,875	135	7.2%
Med Onc Visalia Treatments	1,144	1,138	(6)	(0.5%)	1,283	(145)	(11.3%)
Rad Onc Visalia Treatments	1,687	1,596	(91)	(5.4%)	1,725	(129)	(7.5%)
Rad Onc Hanford Treatments	382	340	(42)	(11.0%)	285	55	15231794

### Other Statistical Results – Fiscal Year Comparison (Jul-Oct)

		YTD Actu	al Results		Budget	Budget \	/ariance
	YTD Oct 24	YTD Oct 25	Change	% Change	YTD Oct 25	Change	% Change
All O/P Rehab Svcs Across District	84,845	85,458	613	0.7%	86,071	(613)	(0.7%)
Physical & Other Therapy Units (I/P & O/P)	74,865	75,011	146	0.2%	79,216	(4,205)	(5.3%)
Radiology - CT - All Areas	18,732	20,765	2,033	10.9%	18,563	2,202	11.9%
Radiology - MRI - All Areas	3,585	3,804	219	6.1%	3,583	221	6.2%
Radiology - Ultrasound - All Areas	12,307	12,274	(33)	(0.3%)	12,203	71	0.6%
Radiology - Diagnostic Radiology	38,093	38,268	175	0.5%	38,766	(498)	(1.3%)
Radiology – Main Campus	61,779	62,823	1,044	1.7%	61,297	1,526	2.5%
Radiology - Ultrasound - Main Campus	9,610	9,322	(288)	(3.0%)	8,767	555	6.3%
West Campus - Diagnostic Radiology	4,532	5,356	824	18.2%	4,684	672	14.3%
West Campus - CT Scan	2,003	2,236	233	11.6%	1,955	281	14.4%
West Campus - MRI	1,706	1,744	38	2.2%	1,742	2	0.1%
West Campus - Ultrasound	2,697	2,952	255	9.5%	3,436	(484)	(14.1%)
West Campus - Breast Center	7,032	6,189	(843)	(12.0%)	7,033	(844)	(12.0%)
Med Onc Visalia Treatments	4,493	4,632	139	3.1%	4,738	(106)	(2.2%)
Rad Onc Visalia Treatments	6,386	6,842	456	7.1%	6,575	267	4.1%
Rad Onc Hanford Treatments	1,103	1,215	112	10.2%	1,006	209	20.8%

#### Other Statistical Results - Prior Year/Budget Comparison (Oct)

		Actual	Results		Budget	Budget \	/ariance
	Oct 24	Oct 25	Change	% Change	Oct 25	Change	% Change
Rural Health Clinics Registrations	15,368	15,059	(309)	(2.0%)	14,470	589	4.1%
RHC Exeter - Registrations	7,167	7,184	17	0.2%	6,981	203	2.9%
RHC Lindsay - Registrations	2,077	1,957	(120)	(5.8%)	2,200	(243)	(11.0%)
RHC Woodlake - Registrations	1,480	869	(611)	(41.3%)	730	139	19.0%
RHC Woodlake Valencia - Registrations	0	652	652	0.0%	704	(52)	(7.4%)
RHC Dinuba - Registrations	1,780	1,669	(111)	(6.2%)	1,900	(231)	(12.2%)
RHC Tulare - Registrations	2,864	2,728	(136)	(4.7%)	2,659	69	2.6%
Urgent Care – Court Total Visits	2,432	2,466	34	1.4%	2,800	(334)	(11.9%)
Urgent Care – Demaree Total Visits	1,624	1,874	250	15.4%	2,000	(126)	(6.3%)
KH Medical Clinic - Ben Maddox Visits	872	929	57	6.5%	1,250	(321)	(25.7%)
KH Medical Clinic - Plaza Visits	287	232	(55)	(19.2%)	287	(55)	(19.2%)
KH Medical Willow Clinic Visits	0	933	933	0.0%	1,100	(167)	(15.2%)
KH Cardiology Center Visalia Registrations	1,849	1,666	(183)	(9.9%)	1,872	(206)	(11.0%)
KH Mental Wellness Clinic Visits	333	311	(22)	(6.6%)	400	(89)	(22.3%)
Urology Clinic Visits	441	197	(244)	(55.3%)	308	(111)	(36.0%)
Therapy-Wound Care Svcs Encounters	216	370	154	71.3%	359	11	3.1%

### Other Statistical Results – Fiscal Year Comparison (Jul-Oct)

		YTD Actu	al Results		Budget	Budget \	/ariance
	YTD Oct 24	YTD Oct 25	Change	% Change	YTD Oct 25	Change	% Change
Rural Health Clinics Registrations	55,448	57,101	1,653	3.0%	56,046	1,055	1.9%
RHC Exeter - Registrations	26,158	26,867	709	2.7%	27,311	(444)	(1.6%)
RHC Lindsay - Registrations	7,698	7,804	106	1.4%	8,300	(496)	(6.0%)
RHC Woodlake - Registrations	5,212	3,380	(1,832)	(35.1%)	2,920	460	15.8%
RHC Woodlake Valencia - Registrations	0	2,612	2,612	0.0%	2,816	(204)	(7.2%)
RHC Dinuba - Registrations	6,513	6,228	(285)	(4.4%)	7,300	(1,072)	(14.7%)
RHC Tulare - Registrations	9,867	10,210	343	3.5%	10,215	(5)	(0.1%)
Urgent Care – Court Total Visits	9,032	9,824	792	8.8%	11,000	(1,176)	(10.7%)
Urgent Care – Demaree Total Visits	5,539	7,058	1,519	27.4%	7,750	(692)	(8.9%)
KH Medical Clinic - Ben Maddox Visits	3,348	4,357	1,009	30.1%	4,550	(193)	(4.2%)
KH Medical Clinic - Plaza Visits	1,126	907	(219)	(19.4%)	1,126	(219)	(19.4%)
KH Medical Willow Clinic Visits	0	3,407	3,407	0.0%	3,850	(443)	(11.5%)
KH Cardiology Center Visalia Registrations	6,490	6,015	(475)	(7.3%)	6,763	(748)	(11.1%)
KH Mental Wellness Clinic Visits	1,220	1,333	113	9.3%	1,570	(237)	(15.1%)
Urology Clinic Visits	1,418	756	(662)	(46.7%)	1,232	(476)	(38.6%)
Therapy-Wound Care Svcs Encounters	582	1,458	876	150.5%	1,424	34	2.4%

55/174

### October Financial Summary (000's) Budget Comparison

	Comparis	son to Budge	et - Month o	f October
	Budget Oct-2025	Actual Oct-2025	\$ Change	% Change
Operating Revenue				
Net Patient Service Revenue	\$58,168	\$61,063	\$2,895	4.7%
Other Operating Revenue	\$21,728	\$24,620	\$2,891	11.7%
<b>Total Operating Revenue</b>	\$79,896	\$85,682	\$5,786	6.8%
Operating Expenses				
Employment Expenses	\$43,191	\$44,735	\$1,544	3.5%
Other Expenses	\$37,816	\$38,793	\$977	2.5%
<b>Total Operating Expenses</b>	\$81,007	\$83,528	\$2,521	3.0%
Operating Margin	(\$1,111)	\$2,154	\$3,265	
Stimulus/FEMA	\$0	\$0	\$0	
Operating Margin after Stimulus/FEMA	(\$1,111)	\$2,154	\$3,265	
Nonoperating Revenue (Loss)	\$860	\$850	(\$10)	
Excess Margin	(\$251)	\$3,004	\$3,254	

### October Financial Summary (000's) Prior Year Comparison

	Comparis	on to Prior Y	ear - Month o	of October	
	Actual Oct-2024	Actual Oct-2025	\$ Change	% Change	
Operating Revenue					
Net Patient Service Revenue	\$56,157	\$61,063	\$4,906	8.0%	
Other Operating Revenue	\$20,242	\$24,620	\$4,378	17.8%	
<b>Total Operating Revenue</b>	\$76,398	\$85,682	\$9,284	10.8%	
Operating Expenses					
Employment Expenses	\$41,494	\$44,735	\$3,241	7.2%	
Other Expenses	\$37,294	\$38,793	\$1,499	3.9%	
<b>Total Operating Expenses</b>	\$78,788	\$83,528	\$4,740	5.7%	
Operating Margin	(\$2,390)	\$2,154	\$4,544		
Stimulus/FEMA	\$0	\$0	\$0		
Operating Margin after Stimulus/FEMA	(\$2,390)	\$2,154	\$4,544		
Nonoperating Revenue (Loss)	\$1,371	\$850	(\$522)		
Excess Margin	(\$1,019)	\$3,004	\$4,023		

### **Year to Date Financial Summary (000's)**

	Compa	rison to Budg	et - YTD Oct	ober
	Budget YTD Oct-2025	Actual YTD Oct-2025	\$ Change	% Change
Operating Revenue				
Net Patient Service Revenue	\$228,752	\$227,675	(\$1,077)	-0.5%
Other Operating Revenue	\$86,717	\$93,270	\$6,553	7.0%
<b>Total Operating Revenue</b>	\$315,469	\$320,945	\$5,476	1.7%
Operating Expenses				
Employment Expenses	\$169,254	\$173,218	\$3,964	2.3%
Other Expenses	\$149,605	\$152,302	\$2,697	1.8%
<b>Total Operating Expenses</b>	\$318,859	\$325,520	\$6,661	2.0%
Operating Margin	(\$3,390)	(\$4,575)	(\$1,185)	
Stimulus/FEMA	\$0	(\$0)	(\$0)	
Operating Margin after Stimulus/FEMA	(\$3,390)	(\$4,575)	(\$1,185)	
Nonoperating Revenue (Loss)	\$3,572	\$5,120	\$1,548	
Excess Margin	\$182	\$545	\$363	

### **October Financial Comparison (000's)**

	Compar	ison to Budg	et - Month of	October		Comparis	on to Prior Y	ear - Month o	f October
	Budget Oct-2025	Actual Oct-2025	\$ Change	% Change		Actual Oct-2024	Actual Oct-2025	\$ Change	% Change
Operating Revenue			·						
Net Patient Service Revenue	\$58,168	\$61,063	\$2,895	4.7%		\$56,157	\$61,063	\$4,906	8.0%
Supplemental Gov't Programs	\$9,727	\$11,136	\$1,409	12.7%		\$7,482	\$11,136	\$3,653	32.8%
Prime Program	\$631	\$631	(\$0)	0.0%		\$792	\$631	(\$161)	-25.6%
Premium Revenue	\$7,062	\$7,282	\$220	3.0%		\$7,846	\$7,282	(\$564)	-7.8%
Other Revenue	\$4,309	\$5,571	\$1,262	22.7%		\$4,121	\$5,571	\$1,450	26.0%
Other Operating Revenue	\$21,728	\$24,620	\$2,891	11.7%		\$20,242	\$24,620	\$4,378	17.8%
Total Operating Revenue	\$79,896	\$85,682	\$5,786	6.8%	. ,	\$76,398	\$85,682	\$9,284	10.8%
Operating Expenses									
Salaries & Wages	\$33,779	\$34,094	\$315	0.9%		\$33,037	\$34,094	\$1,056	3.1%
Contract Labor	\$1,955	\$1,925	(\$31)	-1.6%		\$1,791	\$1,925	\$134	6.9%
Employee Benefits	\$7,457	\$8,717	\$1,259	14.4%		\$6,666	\$8,717	\$2,051	23.5%
Total Employment Expenses	\$43,191	\$44,735	\$1,544	3.5%		\$41,494	\$44,735	\$3,241	7.2%
Medical & Other Supplies	\$14,584	\$15,528	\$944	6.1%		\$13,282	\$15,528	\$2,246	14.5%
Physician Fees	\$7,499	\$7,957	\$458	5.8%		\$7,041	\$7,957	\$916	11.5%
Purchased Services	\$1,908	\$2,096	\$188	9.0%		\$1,310	\$2,096	\$785	37.5%
Repairs & Maintenance	\$2,543	\$2,749	\$206	7.5%		\$2,282	\$2,749	\$467	17.0%
Jtilities	\$960	\$899	(\$61)	-6.8%		\$905	\$899	(\$6)	-0.7%
Rents & Leases	\$148	\$114	(\$34)	-30.0%		\$172	\$114	(\$58)	-51.4%
Depreciation & Amortization	\$3,505	\$3,096	(\$409)	-13.2%		\$3,154	\$3,096	(\$57)	-1.9%
nterest Expense	\$572	\$568	(\$5)	-0.8%		\$584	\$568	(\$17)	-3.0%
Other Expense	\$2,326	\$2,164	(\$161)	-7.4%		\$2,264	\$2,164	(\$99)	-4.6%
Humana Cap Plan Expenses	\$3,771	\$3,624	(\$147)	-4.1%		\$6,300	\$3,624	(\$2,677)	-73.9%
Total Other Expenses	\$37,816	\$38,793	\$977	2.5%		\$37,294	\$38,793	\$1,499	3.9%
Total Operating Expenses	\$81,007	\$83,528	\$2,521	3.0%		\$78,788	\$83,528	\$4,740	5.7%
Operating Margin	(\$1,111)	\$2,154	\$3,265			(\$2,390)	\$2,154	\$4,544	
Stimulus/FEMA	<b>\$0</b>	\$0	\$0			\$0	\$0	\$0	
Operating Margin after Stimulus/FEMA	(\$1,111)	\$2,154	\$3,265			(\$2,390)	\$2,154	\$4,544	
Nonoperating Revenue (Loss)	\$860	\$850	(\$10)			\$1,371	\$850	(\$522)	
Excess Margin	(\$251)	\$3,004	\$3,254			(\$1,019)	\$3,004	\$4,023	

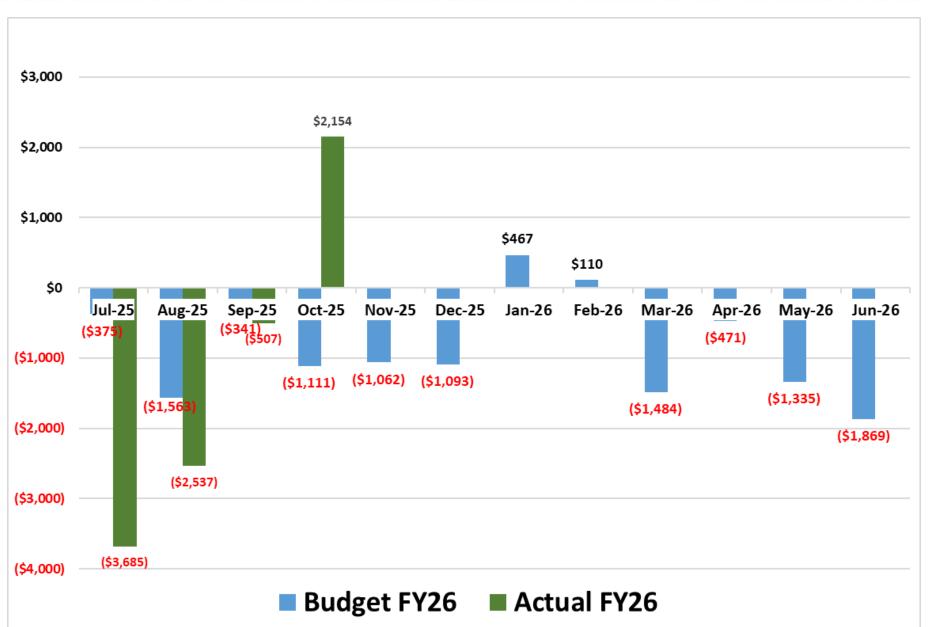
#### Year to Date: July through October Financial Comparison (000's)

	Compa	rison to Budg	et - YTD Oct	ober		Compari	ison to Prior Y	ear - YTD O	ctober
	Budget YTD Oct-2025	Actual YTD Oct-2025	\$ Change	% Change		Actual YTD Oct-2024	Actual YTD Oct-2025	\$ Change	% Change
Operating Revenue									
Net Patient Service Revenue	\$228,752	\$227,675	(\$1,077)	-0.5%		\$212,121	\$227,675	\$15,554	6.8%
Supplemental Gov't Programs	\$38,906	\$40,658	\$1,752	4.3%		\$30,142	\$40,658	\$10,515	25.9%
Prime Program	\$2,523	\$2,523	(\$0)	0.0%		\$3,167	\$2,523	(\$645)	-25.6%
Premium Revenue	\$28,248	\$29,442	\$1,194	4.1%		\$29,695	\$29,442	(\$253)	-0.9%
Other Revenue	\$17,040	\$20,648	\$3,607	17.5%	_	\$15,889	\$20,648	\$4,759	23.0%
Other Operating Revenue	\$86,717	\$93,270	\$6,553	7.0%	_	\$78,893	\$93,270	\$14,377	15.4%
Total Operating Revenue	\$315,469	\$320,945	\$5,476	1.7%	-	\$291,015	\$320,945	\$29,930	9.3%
Operating Expenses									
Salaries & Wages	\$130,827	\$134,645	\$3,818	2.8%		\$128,428	\$134,645	\$6,217	4.6%
Contract Labor	\$9,165	\$8,258	(\$907)	-11.0%		\$5,135	\$8,258	\$3,123	37.8%
Employee Benefits	\$29,263	\$30,316	\$1,053	3.5%		\$22,924	\$30,316	\$7,391	24.4%
Total Employment Expenses	\$169,254	\$173,218	\$3,964	2.3%	_	\$156,487	\$173,218	\$16,731	9.7%
Medical & Other Supplies	\$57,070	\$59,279	\$2,209	3.7%		\$57,002	\$59,279	\$2,277	3.8%
Physician Fees	\$29,961	\$31,686	\$1,725	5.4%		\$29,265	\$31,686	\$2,421	7.6%
Purchased Services	\$7,551	\$7,925	\$374	4.7%		\$6,018	\$7,925	\$1,907	24.1%
Repairs & Maintenance	\$10,090	\$9,364	(\$726)	-7.8%		\$8,607	\$9,364	\$757	8.1%
Utilities	\$3,873	\$3,845	(\$28)	-0.7%		\$3,695	\$3,845	\$150	3.9%
Rents & Leases	\$569	\$521	(\$48)	-9.3%		\$573	\$521	(\$52)	-10.0%
Depreciation & Amortization	\$14,017	\$12,955	(\$1,062)	-8.2%		\$12,690	\$12,955	\$265	2.0%
Interest Expense	\$2,271	\$2,275	\$4	0.2%		\$2,363	\$2,275	(\$88)	-3.9%
Other Expense	\$9,241	\$8,323	(\$917)	-11.0%		\$8,534	\$8,323	(\$211)	-2.5%
Humana Cap Plan Expenses	\$14,963	\$16,129	\$1,166	7.2%	_	\$17,743	\$16,129	(\$1,614)	-10.0%
Total Other Expenses	\$149,605	\$152,302	\$2,697	1.8%	_	\$146,490	\$152,302	\$5,812	3.8%
Total Operating Expenses	\$318,859	\$325,520	\$6,661	2.0%		\$302,977	\$325,520	\$22,543	6.9%
Operating Margin	(\$3,390)	(\$4,575)	(\$1,185)			(\$11,963)	(\$4,575)	\$7,387	
Stimulus/FEMA	\$0	(\$0)	(\$0)	. <u>-</u>		\$0	(\$0)	(\$0)	
Operating Margin after Stimulus/FEM	(\$3,390)	(\$4,575)	(\$1,185)			(\$11,963)	(\$4,575)	\$7,387	
Nonoperating Revenue (Loss)	\$3,572	\$5,120	\$1,548		_	\$8,177	\$5,120	(\$3,057)	. ,
Excess Margin	\$182	\$545	\$363			(\$3,786)	\$545	\$4,330	. 6

## Month of October - Budget Variances

- **Net Patient Service Revenue:** The favorable budget variance in revenue of \$2.8M is primarily due to the increase in our outpatient volume.
- Other Revenue: The \$2.9M favorable budget variance is primarily due to an increase over budget in our supplemental income (\$1.4M) due to settlement of a prior year audit and an increase retail pharmacy revenue (\$1.3M).
- **Employee Benefits:** The \$1.3M unfavorable variance is due to higher than anticipated health insurance expenses.
- Medical & Other Supplies: The \$944K unfavorable variance is due to an increase in retail pharmacy costs.
- **Physician Fees:** The \$458K unfavorable variance is primarily due to increase in the Pediatric Hospitalist and SRCC Medical Oncology.

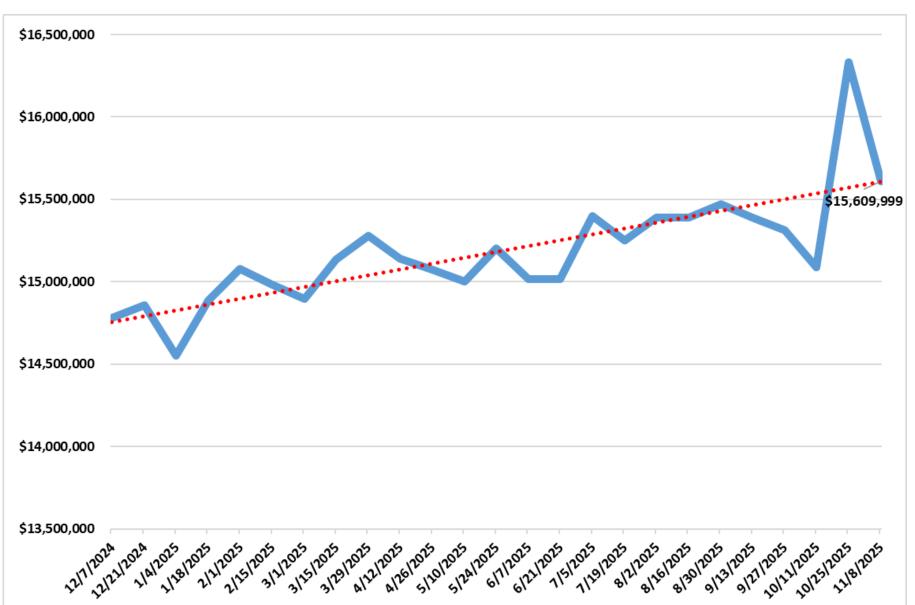
#### **Budget and Actual Fiscal Year 2026: Trended Operating Margin (000's)**



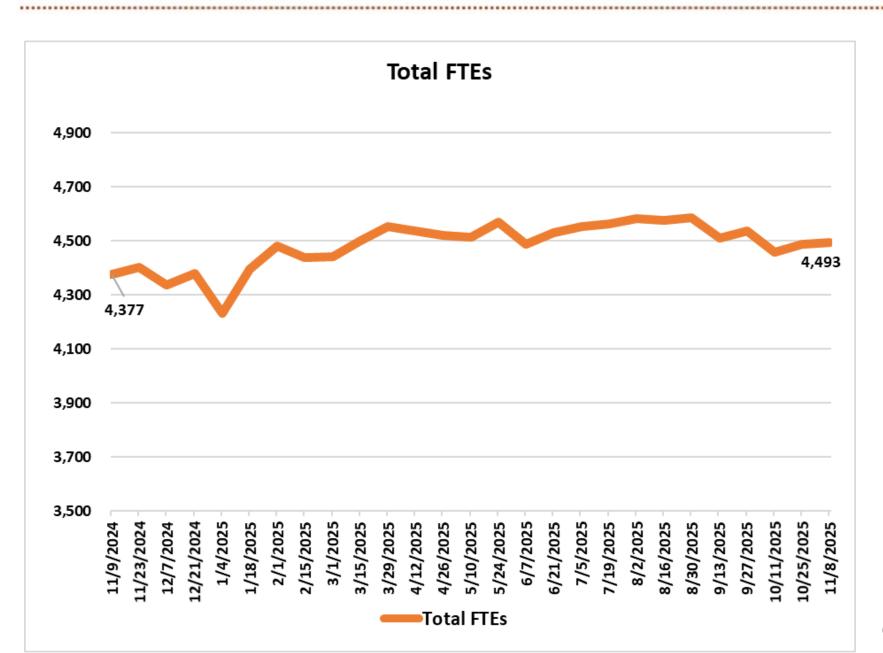
#### **Budget and Actual Fiscal Year 2026: Trended Operating Margin (000's)**

	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Jul-25	Aug-25	Sep-25	Oct-25	FY 2026
Patient Service Revenue	\$53,731	\$57,324	\$55,188	\$56,648	\$44,473	\$56,501	\$53,289	\$56,822	\$61,063	\$227,675
Other Revenue	\$18,979	\$21,231	\$20,234	\$20,167	\$29,489	\$21,848	\$23,904	\$22,899	\$24,620	\$93,270
Total Operating Revenue	\$72,710	\$78,555	\$75,422	\$76,815	\$73,962	\$78,349	\$77,193	\$79,720	\$85,682	\$320,945
Employee Expense	\$38,637	\$42,423	\$43,595	\$46,037	\$40,488	\$43,550	\$42,743	\$42,190	\$44,735	\$173,218
Other Operating Expense	\$33,796	\$36,024	\$34,988	\$38,656	\$44,194	\$38,484	\$36,987	\$38,038	\$38,793	\$152,302
Total Operating Expenses	\$72,433	\$78,446	\$78,583	\$84,693	\$84,682	\$82,034	\$79,730	\$80,228	\$83,528	\$325,520
Net Operating Margin	\$277	\$109	(\$3,161)	(\$7,878)	(\$10,720)	(\$3,685)	(\$2,537)	(\$507)	\$2,154	(\$4,575
Stimulus/FEMA	\$0	\$690	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
NonOperating Income	\$1,166	\$1,313	\$1,114	\$955	\$2,603	\$1,059	\$1,243	\$1,968	\$850	\$5,120
Excess Margin	\$1,443	\$2,111	(\$2,047)	(\$6,923)	(\$8,117)	(\$2,625)	(\$1,295)	\$1,461	\$3,004	\$545
Profitability										
Operating Margin %	0.4%	0.1%	(4.2%)	(10.3%)	(14.5%)	(4.7%)	(3.3%)	(0.6%)	2.5%	(1.4%
Operating Margin %excl. Int	1.1%	0.9%	(3.4%)	(9.5%)	(13.6%)	(4.0%)	(2.6%)	0.1%	3.2%	(0.7%
Operating EBIDA	\$4,052	\$4,115	\$920	(\$3,534)	(\$6,230)	\$104	\$1,200	\$3,534	\$5,818	\$10,655
Operating EBIDA Margin	5.6%	5.2%	1.2%	(4.6%)	(8.4%)	0.1%	1.6%	4.4%	6.8%	3.3%
Liquidity Indicators										
Day's Cash on Hand	88.9	88.1	95.7	90.5	95.7	102.7	96.4	93.2	98.0	98.0
Day's in Accounts Rec.	73.0	68.6	63.6	71.3	68.8	72.0	71.2	67.9	67.8	67.8
Debt & Other Indicators	-									
Debt Service Coverage (MADS)	3.90	4.10	4.00	3.70	4.00	0.50	0.90	1.60	2.60	2.60
Discharges (Monthly)	2,352	2,347	2,357	2,276	2,277	2,249	2,210	2,255	2,216	2,233
Adj Discharges (Case mix adj)	8,320	8,053	8,500	8,534	8,255	8,071	8,493	8,430	8,284	8,320
Adjusted patient Days (Mo.)	26,332	27,682	25,868	26,409	25,593	27,564	27,906	26,067	25,531	26,767
Cost/Adj Discharge	\$8.7	\$9.7	\$9.2	\$9.9	\$10.3	\$10.2	\$9.4	\$9.5	\$10.1	\$9.8
Compensation Ratio	72%	74%	79%	81%	91%	77%	80%	74%	73%	76%

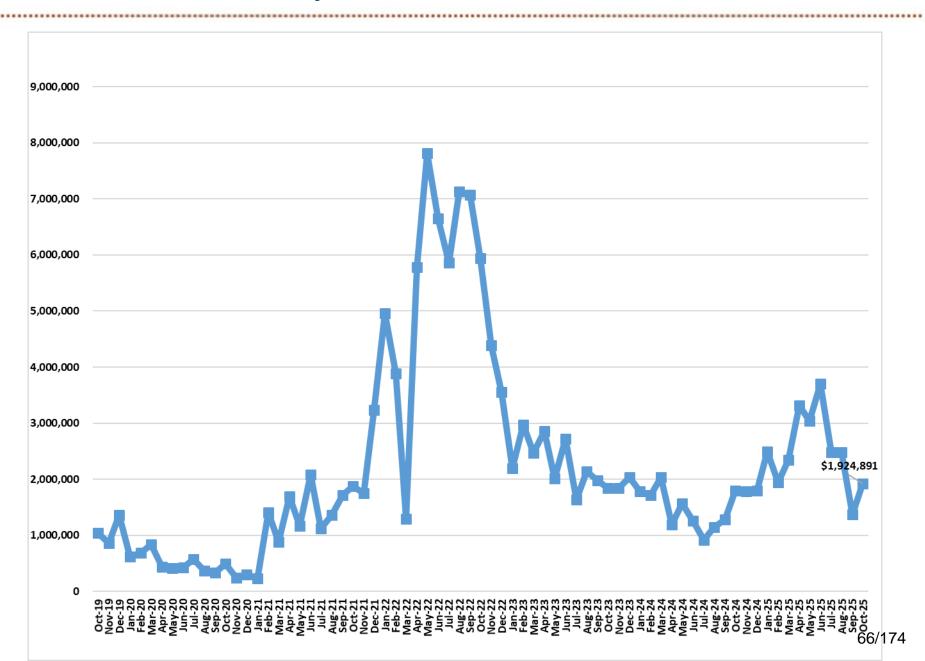
## Biweekly Payroll Costs excluding Contract Labor



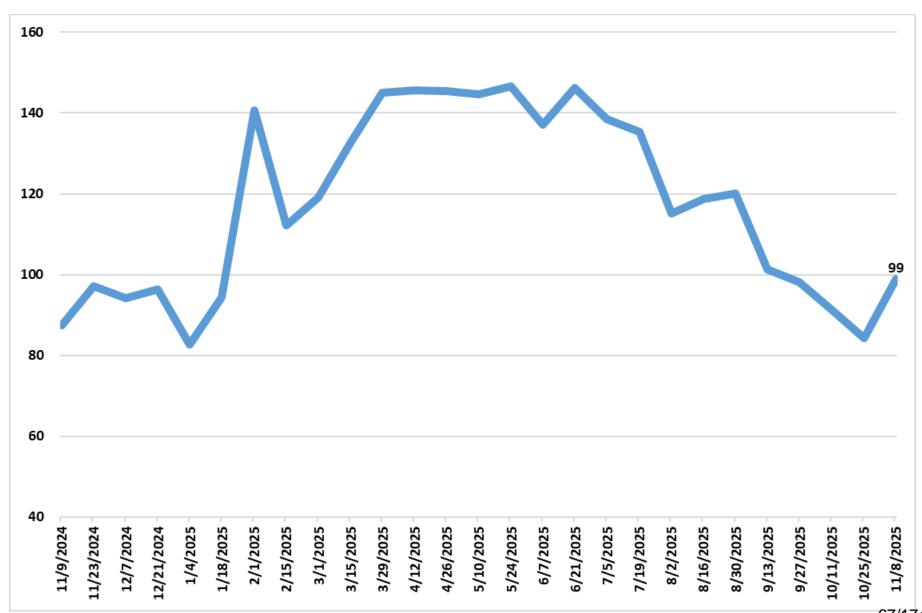
## **Total FTEs (includes Contract Labor)**



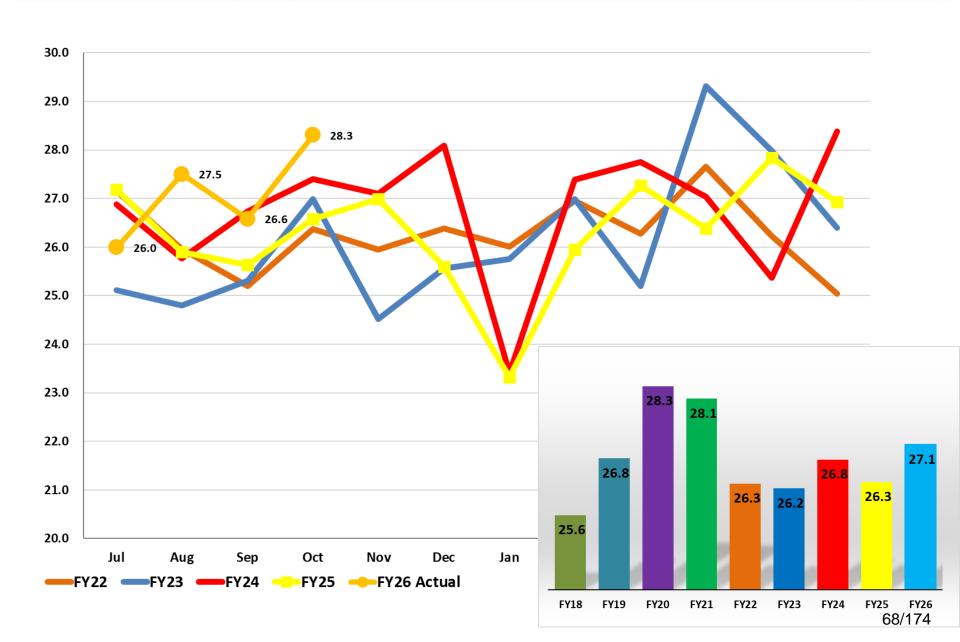
## Monthly Contract Labor Costs



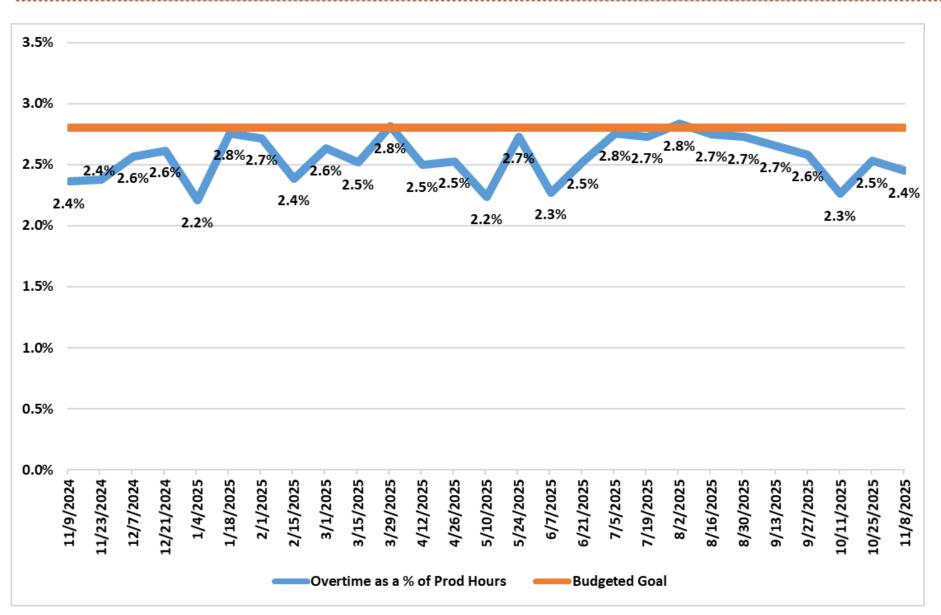
## Contract Labor Full Time Equivalents (FTEs)



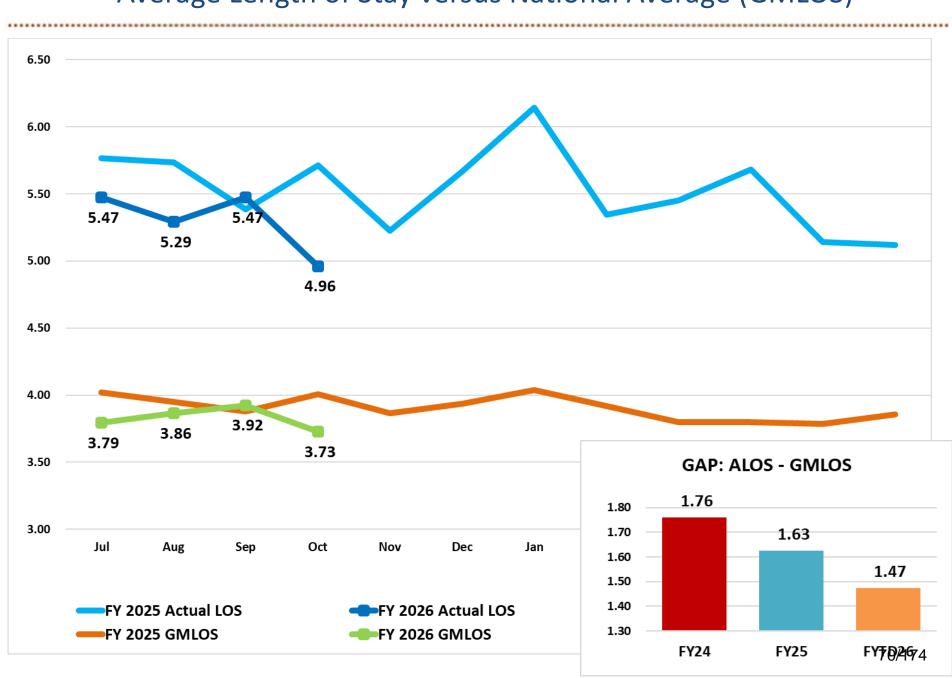
## Productivity Measure: Worked Hours/ Adj. Patient Days



### Overtime as a % of Productive Hours



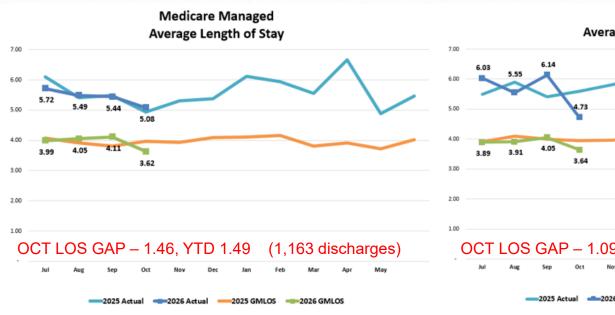
#### Average Length of Stay versus National Average (GMLOS)

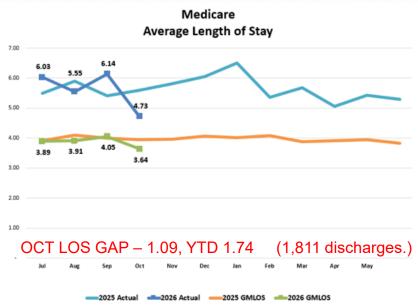


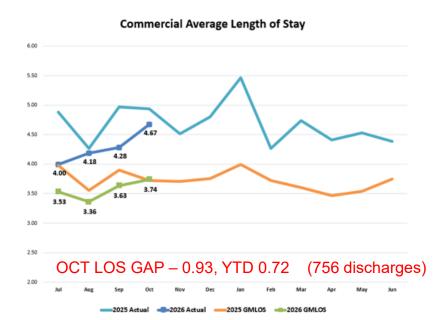
### Average Length of Stay versus National Average (GMLOS)

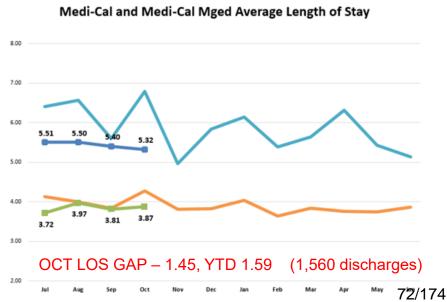
	ALOS	GMLOS	GAP
Jul-24	5.77	4.02	1.75
Aug-24	5.74	3.95	1.79
Sep-24	5.38	3.88	1.50
Oct-24	5.71	4.01	1.70
Nov-24	5.23	3.87	1.36
Dec-24	5.67	3.94	1.73
Jan-25	6.14	4.04	2.10
Feb-25	5.34	3.92	1.43
Mar-25	5.45	3.80	1.65
Apr-25	5.68	3.80	1.88
May-25	5.14	3.78	1.36
Jun-25	5.12	3.86	1.26
Jul-25	5.47	3.79	1.68
Aug-25	5.29	3.86	1.43
Sep-25	5.47	3.92	1.55
Oct-25	4.96	3.73	1.23

#### Average Length of Stay versus National Average (GMLOS)





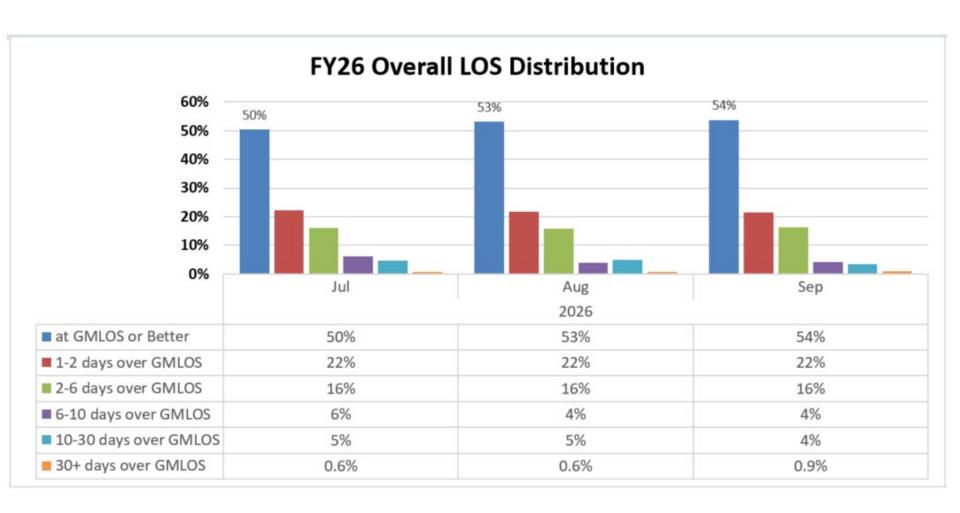




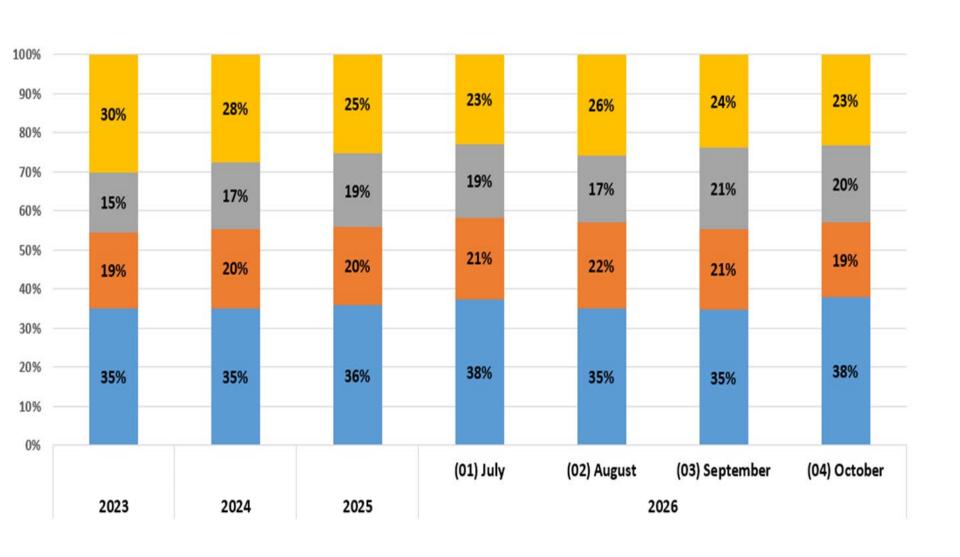
2025 GMLOS == 2026 GMLOS

—2025 Actual —2026 Actual

#### Average Length of Stay Distribution



#### Trended % of Observation by Length of Stay

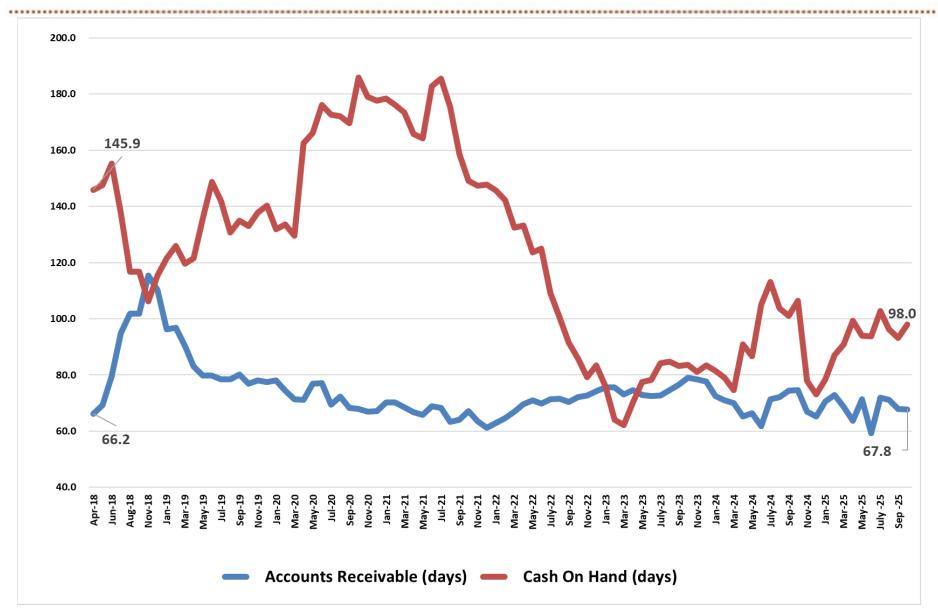


<=24hours</p>
24.1 - 36 Hours

■ 36.1 - 48 Hours

>48.1

# **Trended Liquidity Ratios**



# Ratio Analysis Report

OCTOBER 31	L <b>, 2025</b>
------------	-----------------

			luna 20			
	Current Month	Prior Month	June 30, 2025 Audited		24 Moody in Bench	
	Value	Value	Value	Aa	Α	Baa
LIQUIDITY RATIOS						
Current Ratio (x)	2.5	2.6	2.5	1.6	1.9	1.7
Accounts Receivable (days)	67.8	67.9	72.1	48.7	46.7	48.6
Cash On Hand (days)	98.0	93.2	94.6	282	194.6	122.9
Cushion Ratio (x)	11.4	11.0	10.8	46.1	26.8	15.5
Average Payment Period (days)	46.5	48.2	55.1	75.8	61.9	62.3
CAPITAL STRUCTURE RATIOS						
Cash-to-Debt	120.5%	115.9%	114.2%	297.1%	188.1%	111.0%
Debt-To-Capitalization	32.1%	31.7%	31.0%	20.8%	28.7%	35.5%
Debt-to-Cash Flow (x)	4.7	6.0	2.8	2.2	3.1	5.0
Debt Service Coverage	2.0	2.0	4.3	7.9	5.3	3.3
Maximum Annual Debt Service Coverage (x)	2.6	1.6	3.4	7.2	4.8	2.7
Age Of Plant (years)	14.2	14.0	13.6	11.1	13.3	14.8
PROFITABILITY RATIOS						
Operating Margin	(1.4%)	(2.9%)	(4.2%)	2.9%	1.6%	(.5%)
Excess Margin	0.2%	(1.0%)	2.9%	6.7%	4.3%	1.3%
Operating Cash Flow Margin	3.3%	2.1%	1.0%	7.9%	6.6%	4.2%
Return on Assets	0.2%	(1.1%)	3.1%	4.5%	3.8%	1.7%

# Consolidated Statements of Net Position (000's)

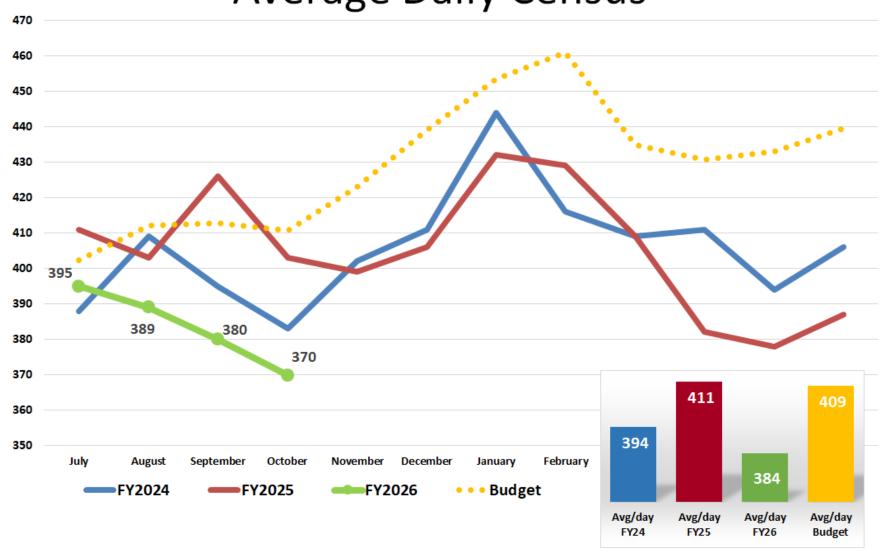
	Oct-25		Jun-25	
			(Audited)	
ASSETS AND DEFERRED OUTFLOWS				
CURRENT ASSETS				
Cash and cash equivalents	\$	2,557	\$ 6,595	
Current Portion of Board designated and trusted				
assets		23,675	17,533	
Accounts receivable:			-	
Net patient accounts		149,048	154,634	
Other receivables		18,157	70,335	
		167,205	224,969	
Inventories		13,817	13,871	
Medicare and Medi-Cal settlements		78,320	62,463	
Prepaid expenses		13,545	8,234	
Total current assets		299,117	333,666	
NON-CURRENT CASH AND INVESTMENTS -				
less current portion				
Board designated cash and assets		237,958	218,025	
Revenue bond assets held in trust		23,201	22,950	
Assets in self-insurance trust fund		618	626	
Total non-current cash and investments		261,778	241,602	
INTANGIBLE RIGHT TO USE LEASE,		15,228	15,613	
net of accumulated amortization				
INTANGIBLE RIGHT TO USE SBITA,		6,807	8,062	
net of accumulated amortization				
CAPITAL ASSETS				
Land		17,542	17,542	
Buildings and improvements		438,528	437,184	
Equipment		339,403	340,593	
Construction in progress		26,034	18,729	
		821,508	814,048	
Less accumulated depreciation		546,142	541,607	
		275,366	272,441	
OTHER ASSETS				
Property not used in operations		5,141	5,155	
Health-related investments		2,102	2,147	
Other		22,419	20,922	
Total other assets		29,662	28,224	
Total assets		887,958	899,608	
DEFERRED OUTFLOWS		12,692	13,133	
Total assets and deferred outflows	\$	900,650	\$ 912,741	

#### Consolidated Statements of Net Position (000's)

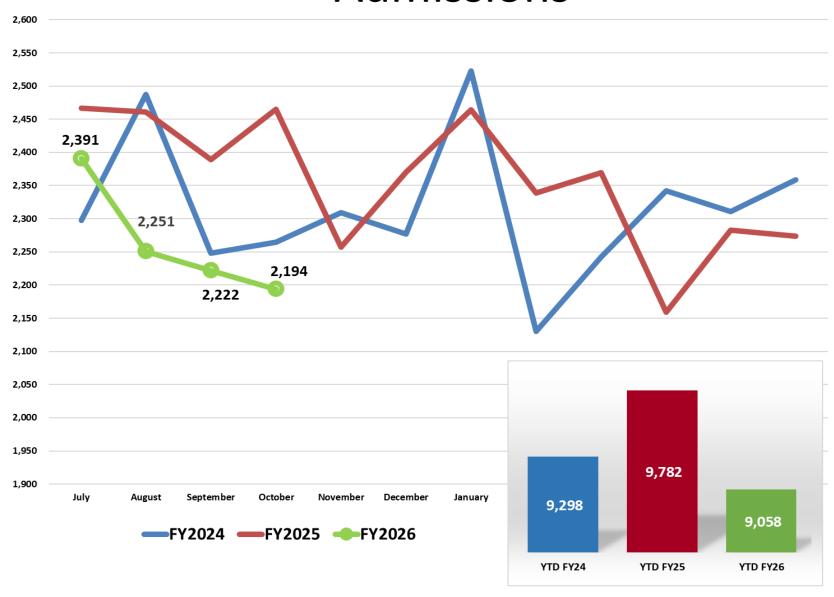
	Oct-25		Jun-25
LIABILITIES AND NET ASSETS			
CURRENT LIABILITIES			
Accounts payable and accrued expenses	\$ 32,0	070 \$	43,963
Accrued payroll and related liabilities	65,3	356	71,620
SBITA liability, current portion	2,	912	3,031
Lease liabiilty, current portion	3,	325	3,204
Bonds payable, current portion	13,3	L84	13,014
Notes payable, current portion	-	769	-
Financing Lease Liability, current portion	į	554	-
Total current liabilities	118,3	168	134,831
LEASE LIABILITY, net of current portion	12,3	388	12,850
SBITA LIABILITY, net of current portion	2,	956	3,941
LONG-TERM DEBT, less current portion			
Bonds payable	199,0	)42	201,619
Financing Lease payable	3,	275	-
Notes payable	19,9	981	20,750
Total long-term debt	222,2	299	222,369
NET PENSION LIABILITY	18,6	507	16,169
OTHER LONG-TERM LIABILITIES	53,2	280	50,472
Total liabilities	427,6	598	440,632
NET ASSETS			
Invested in capital assets, net of related debt	65,3	348	60,147
Restricted	66,3	329	58,980
Unrestricted	341,2	275	352,983
Total net position	472,9	952	472,110
Total liabilities and net position	\$ 900,6	50 \$	912,741

# Statistical Report October 2025

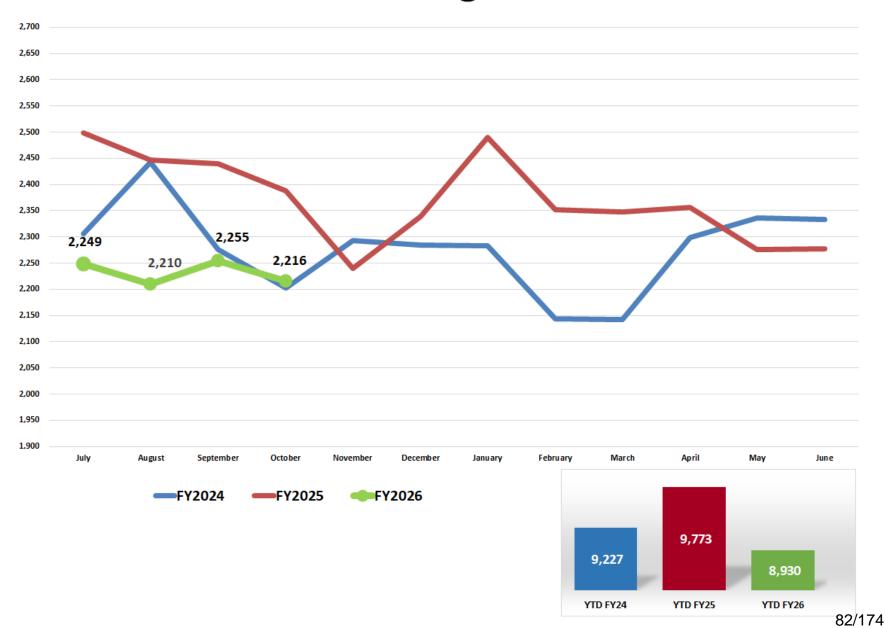
# **Average Daily Census**



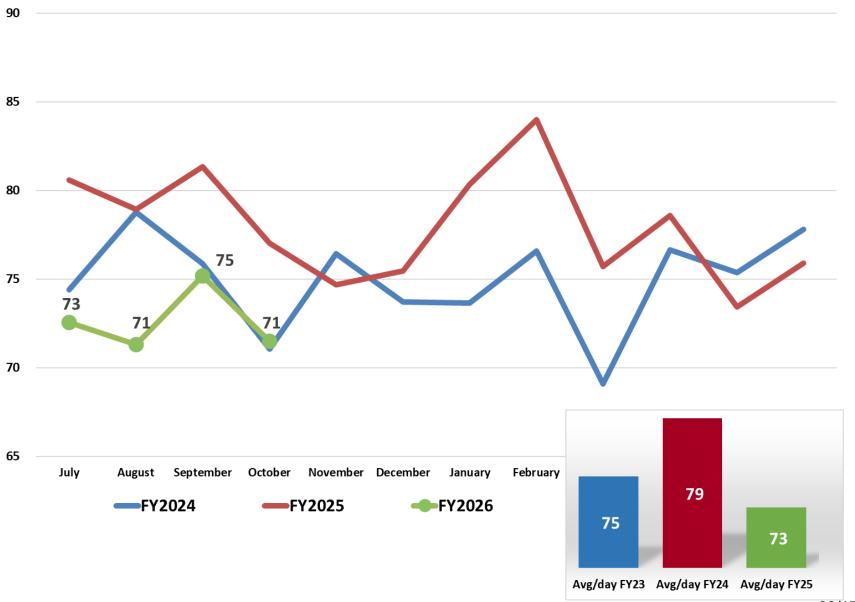
## **Admissions**



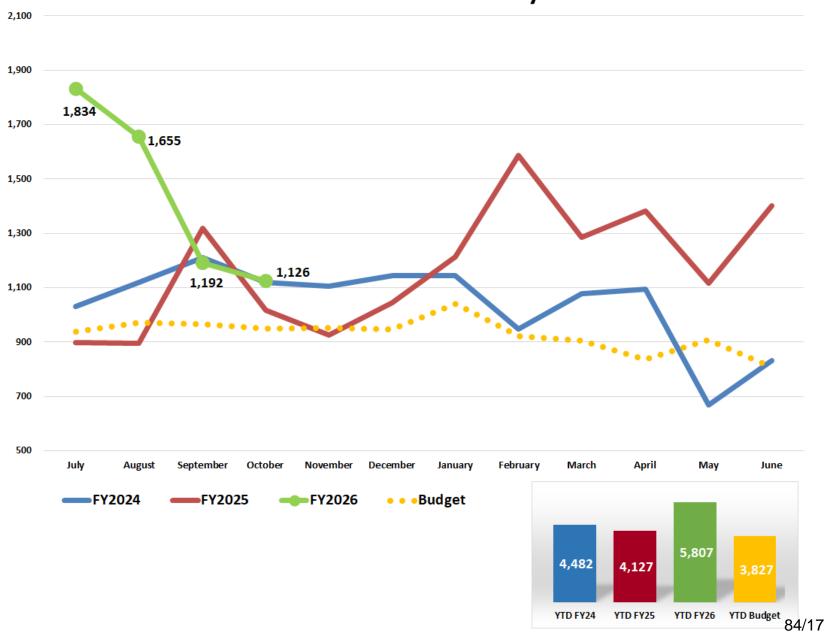
# Discharges



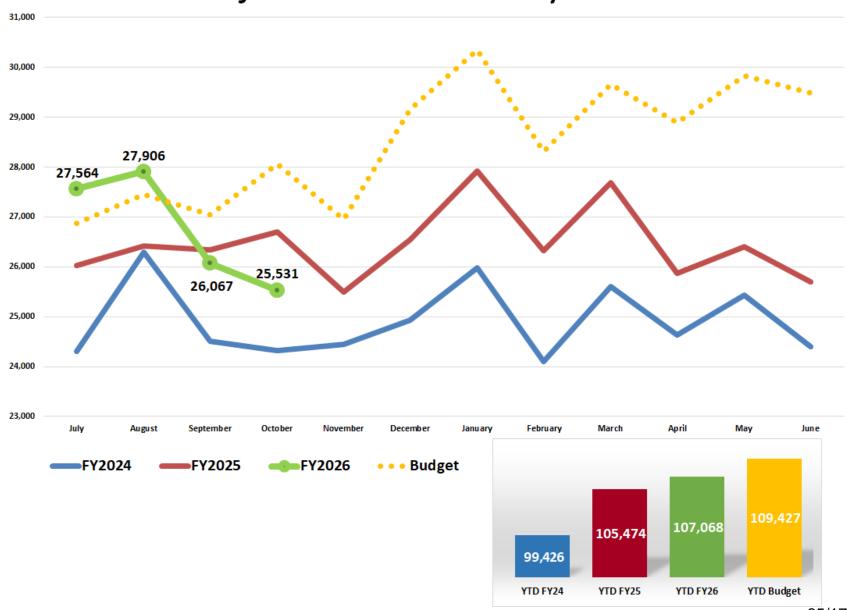
# Average Discharges per Day



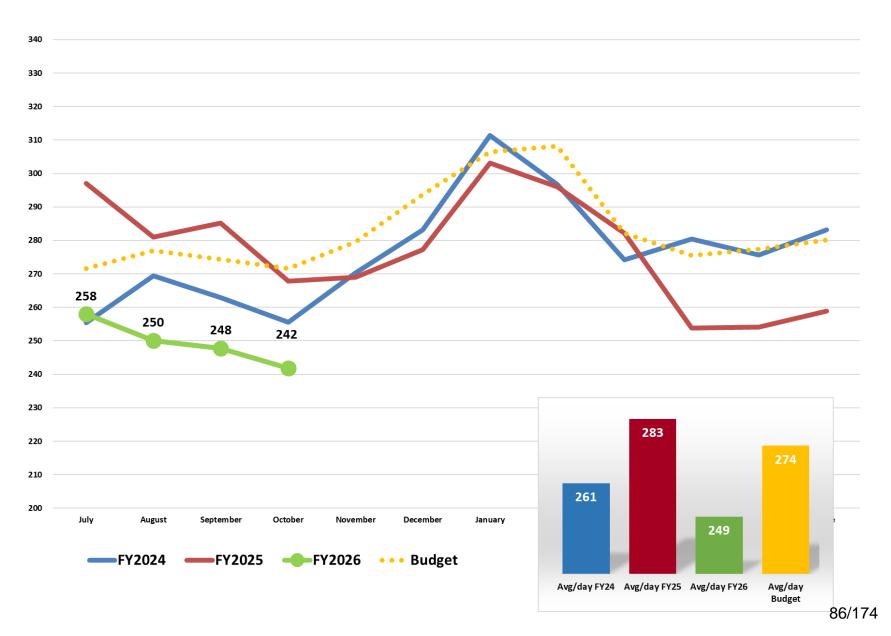
# **Observation Days**



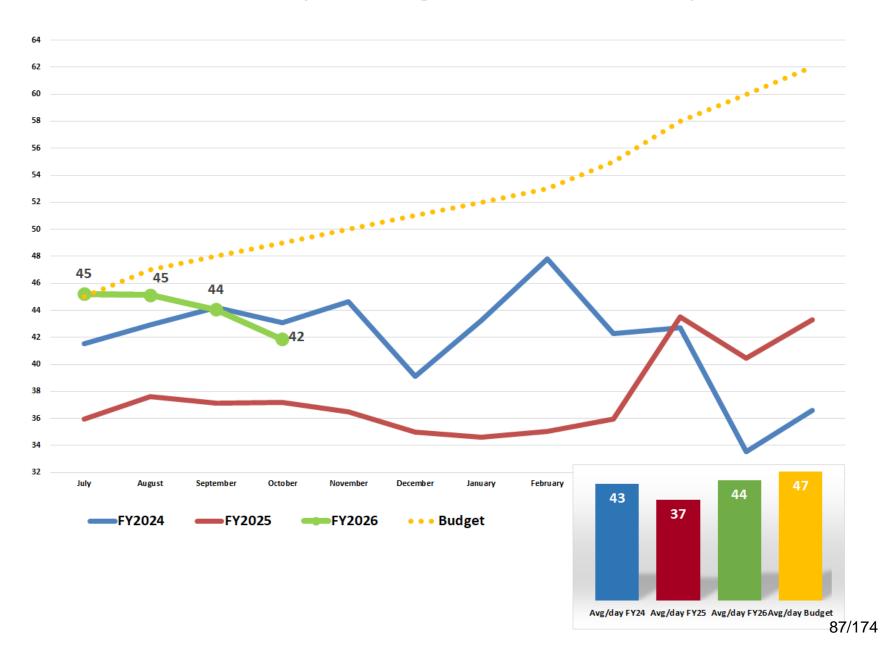
# **Adjusted Patient Days**



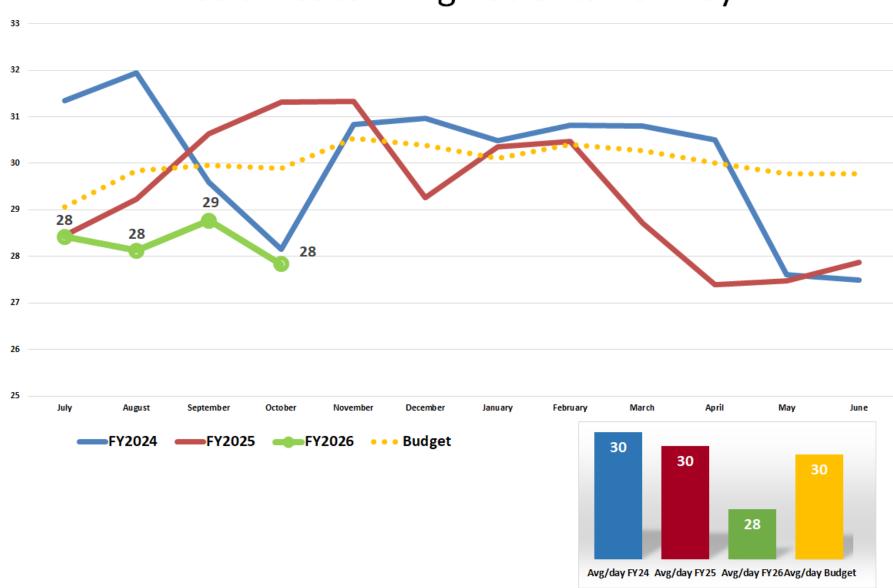
# Medical Center (Avg Patients Per Day)



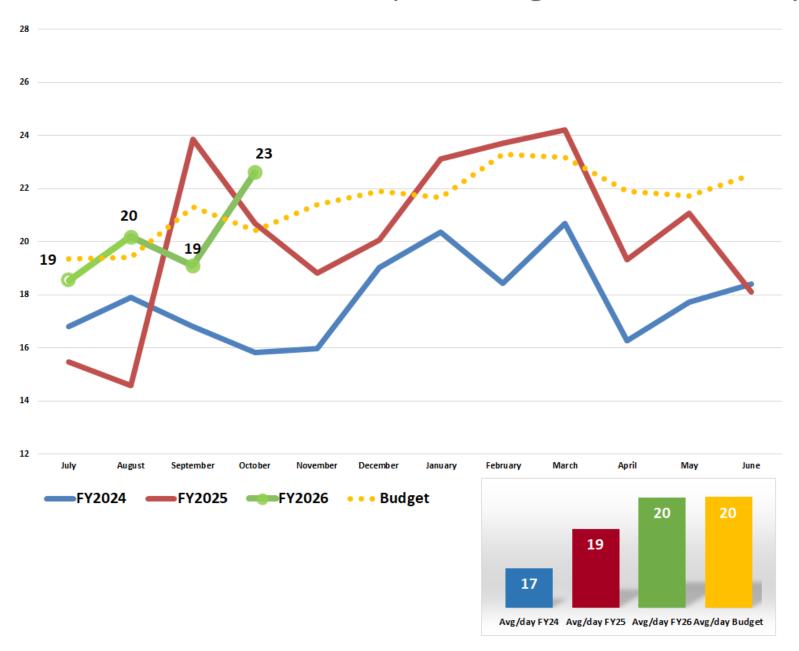
#### Acute I/P Psych (Avg Patients Per Day)



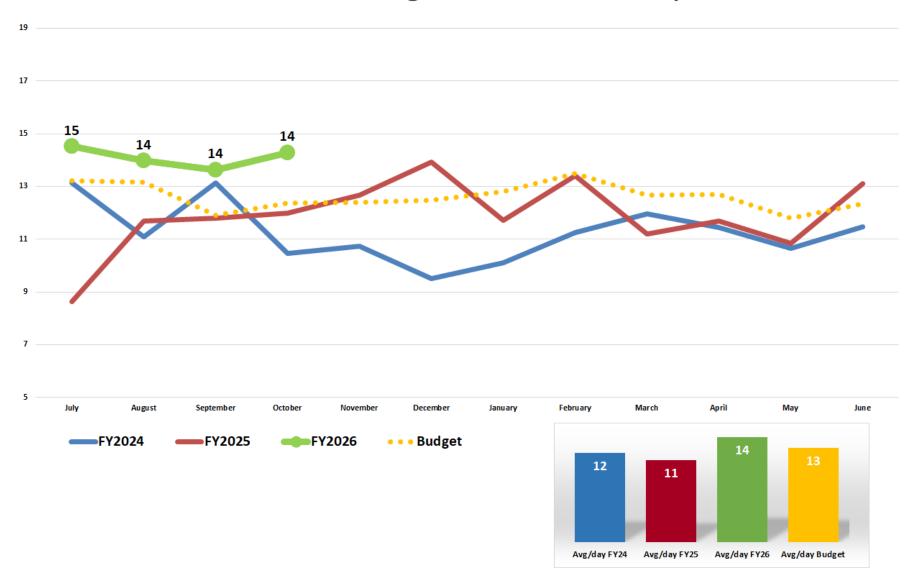
## Sub-Acute - Avg Patients Per Day



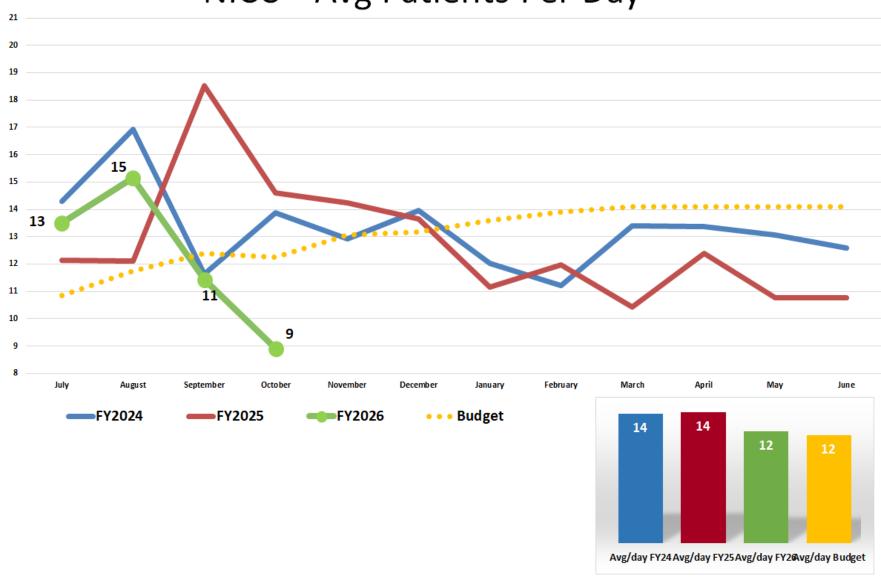
#### Rehabilitation Hospital - Avg Patients Per Day



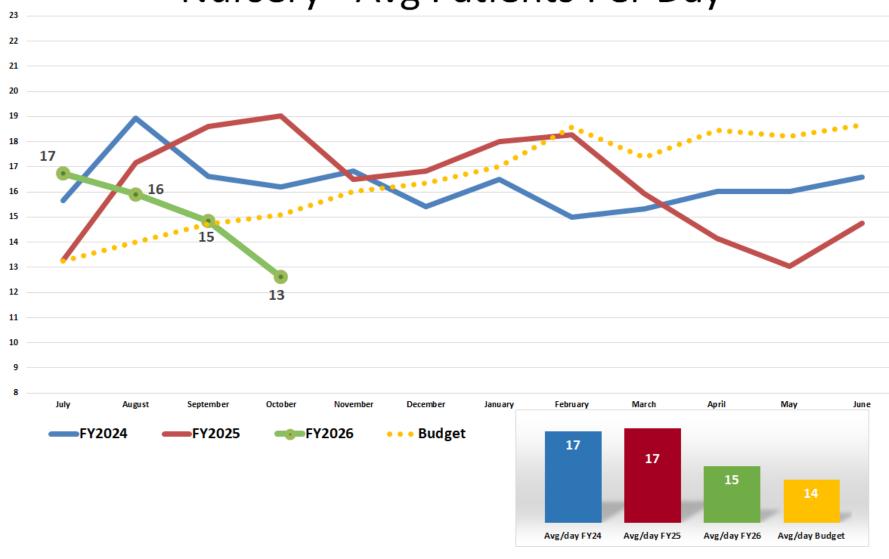
# TCS Ortho - Avg Patients Per Day



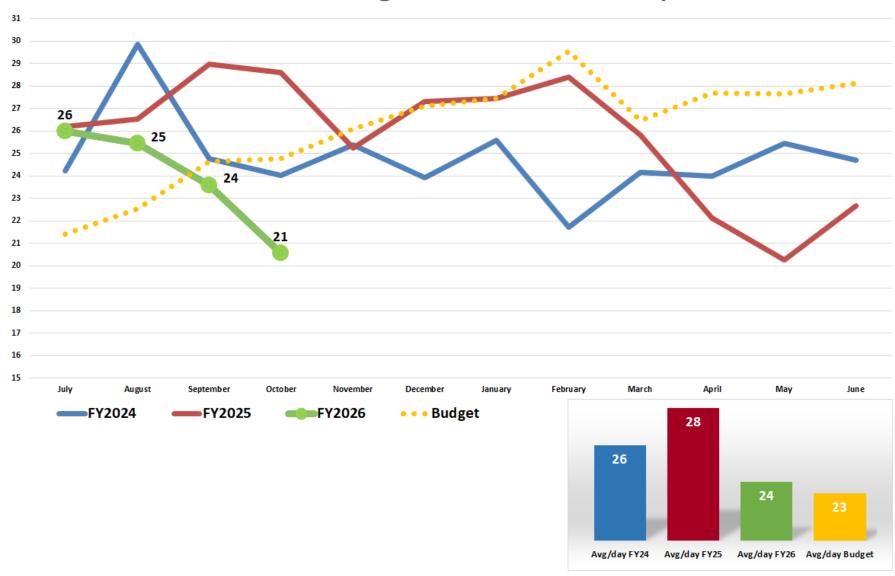
## NICU - Avg Patients Per Day



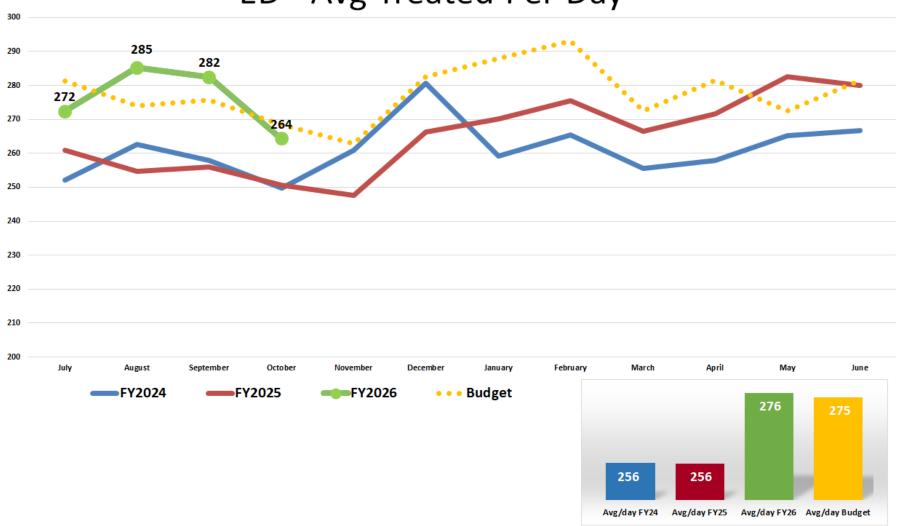
# Nursery - Avg Patients Per Day



## Obstetrics - Avg Patients Per Day



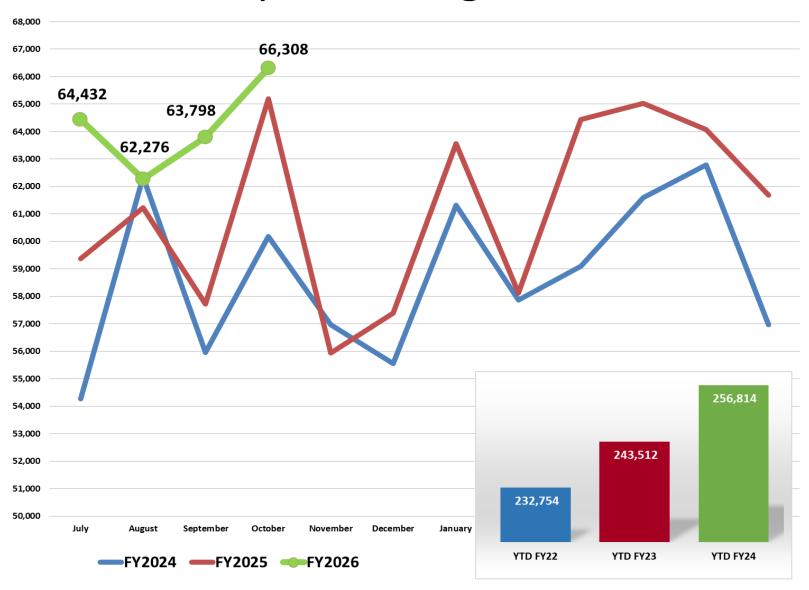
## ED - Avg Treated Per Day



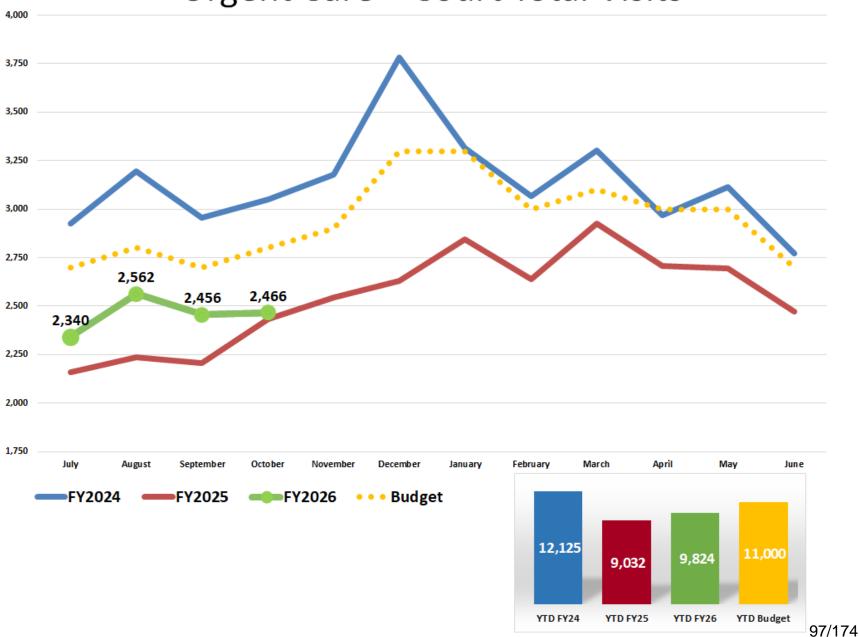
# **Outpatient Registrations Per Day**



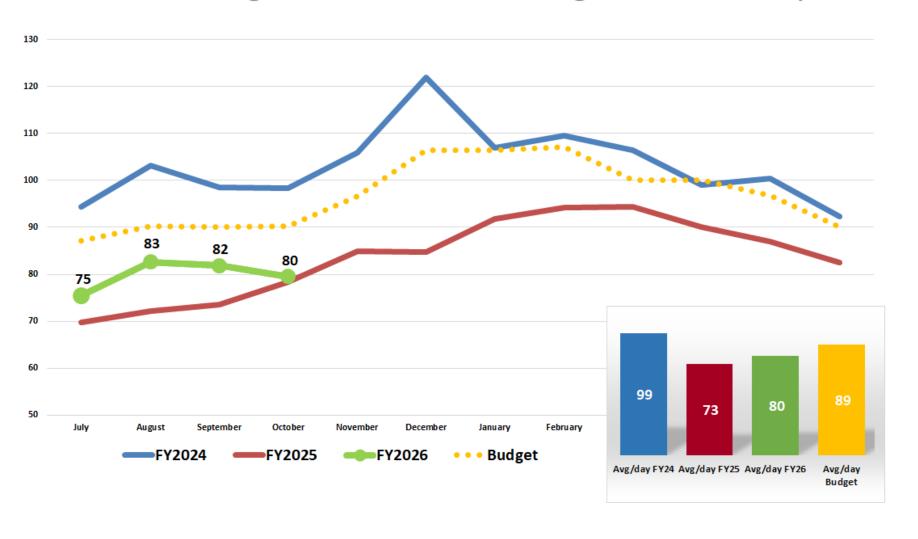
# **Outpatient Registrations**



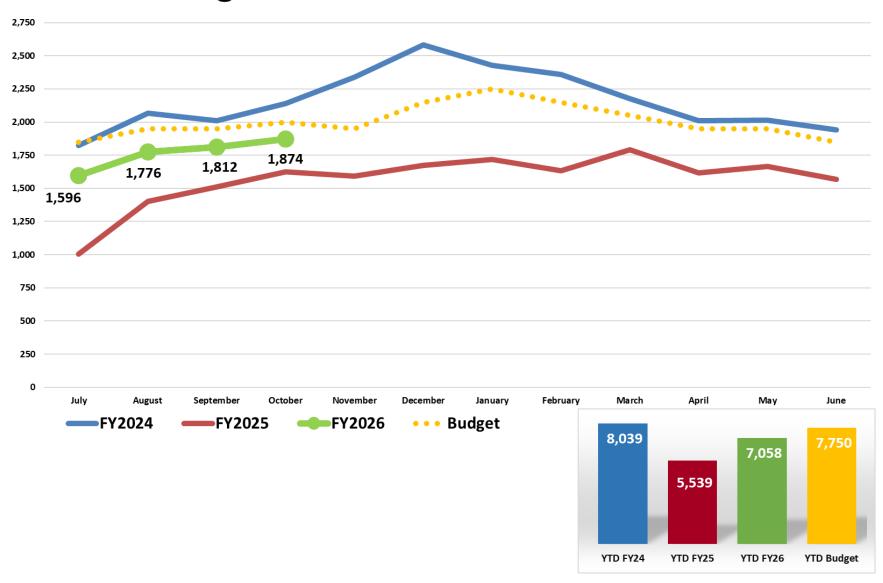
## Urgent Care – Court Total Visits



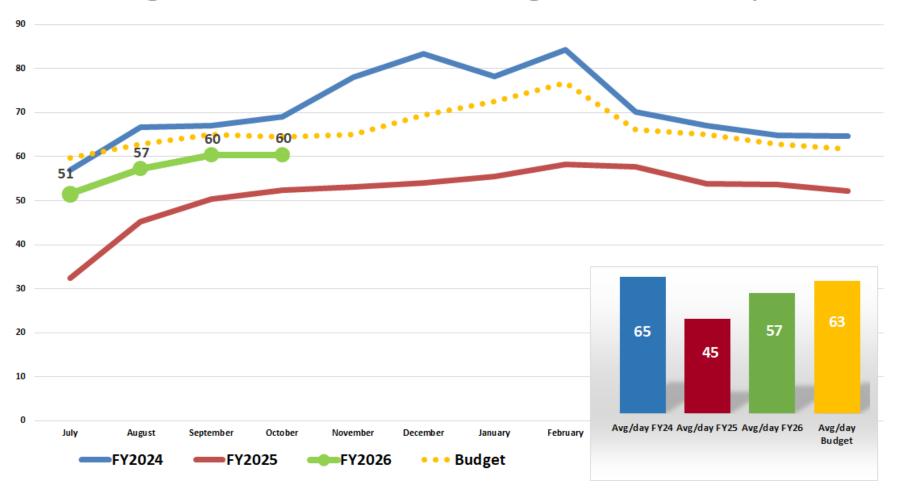
## Urgent Care – Court Avg Visits Per Day



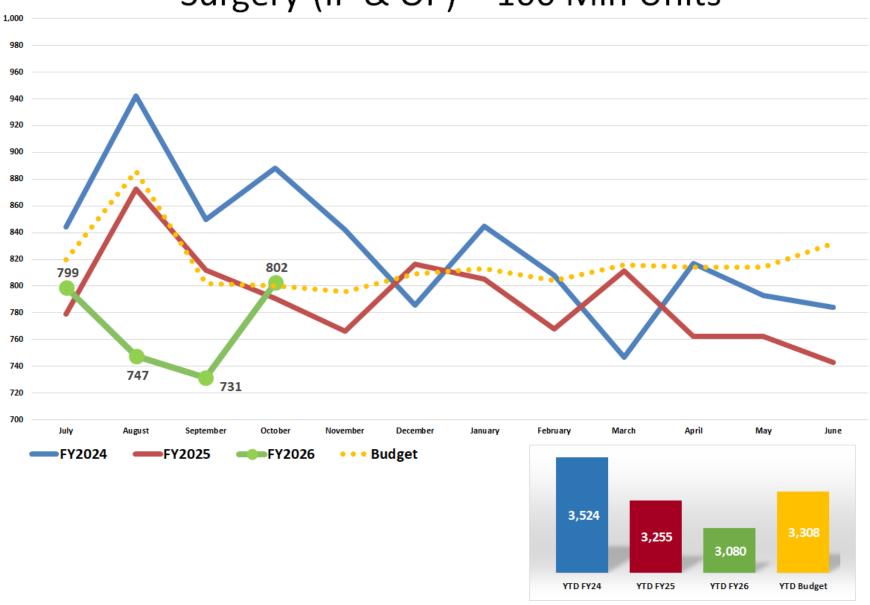
#### **Urgent Care – Demaree Total Visits**



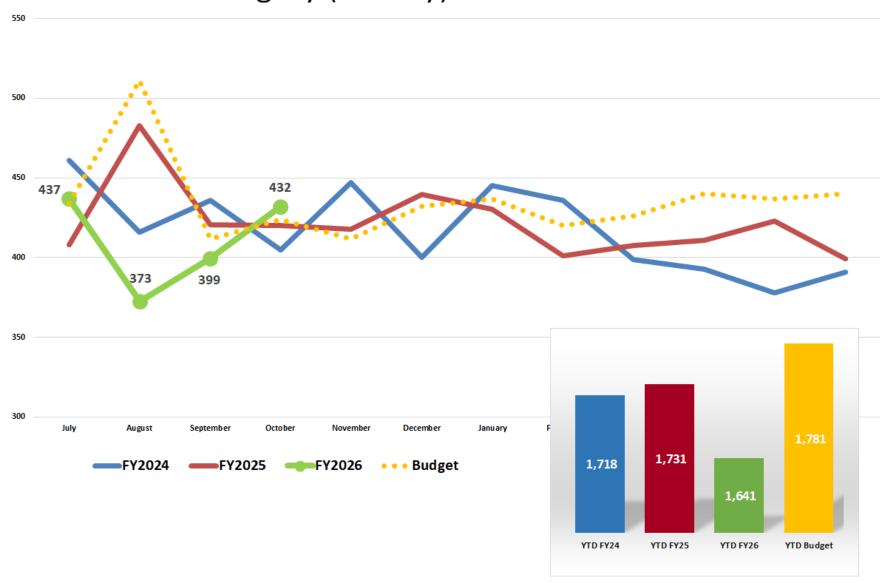
# Urgent Care – Demaree Avg Visits Per Day



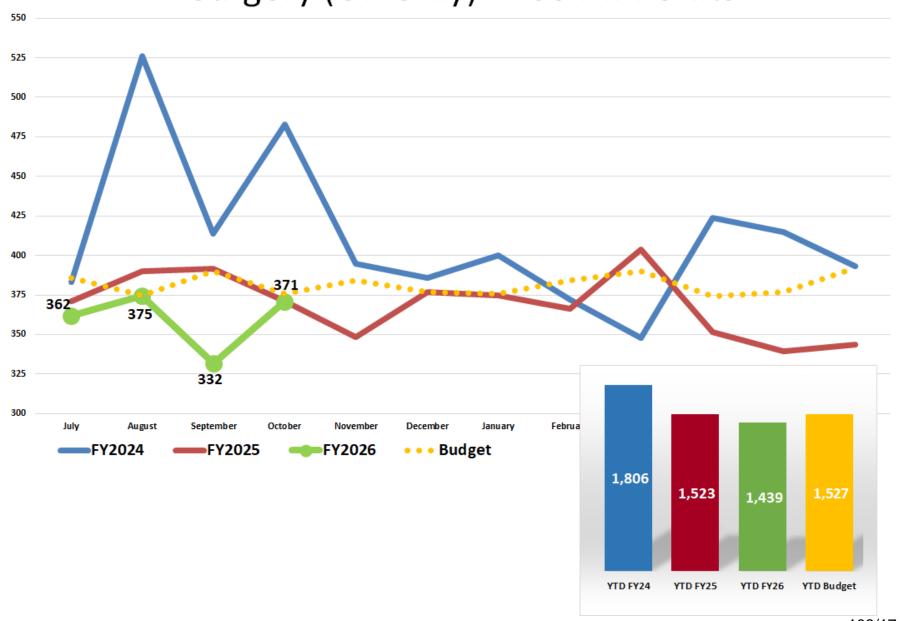
# Surgery (IP & OP) – 100 Min Units



## Surgery (IP Only) - 100 Min Unit



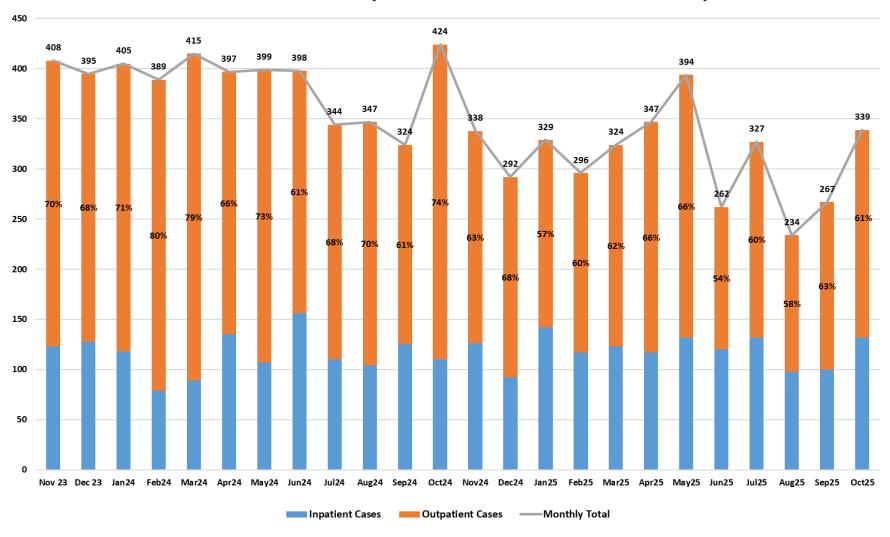
# Surgery (OP Only) - 100 Min Units



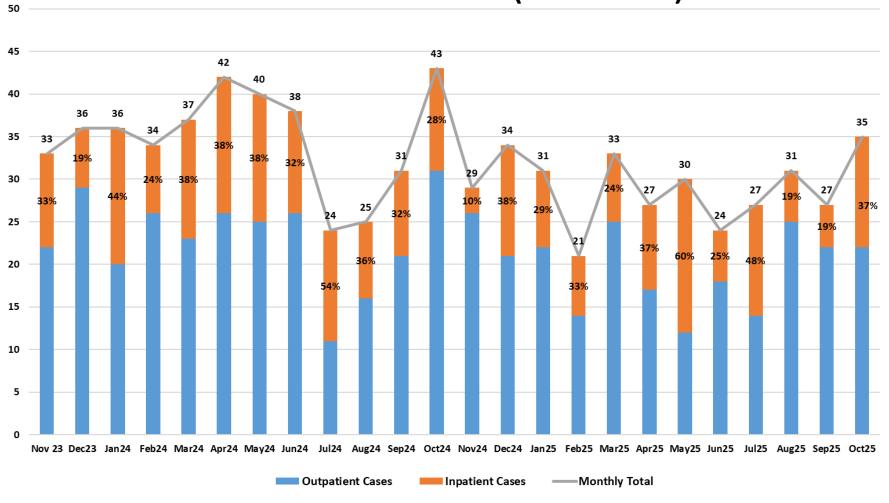
# Surgery Cases (IP & OP)



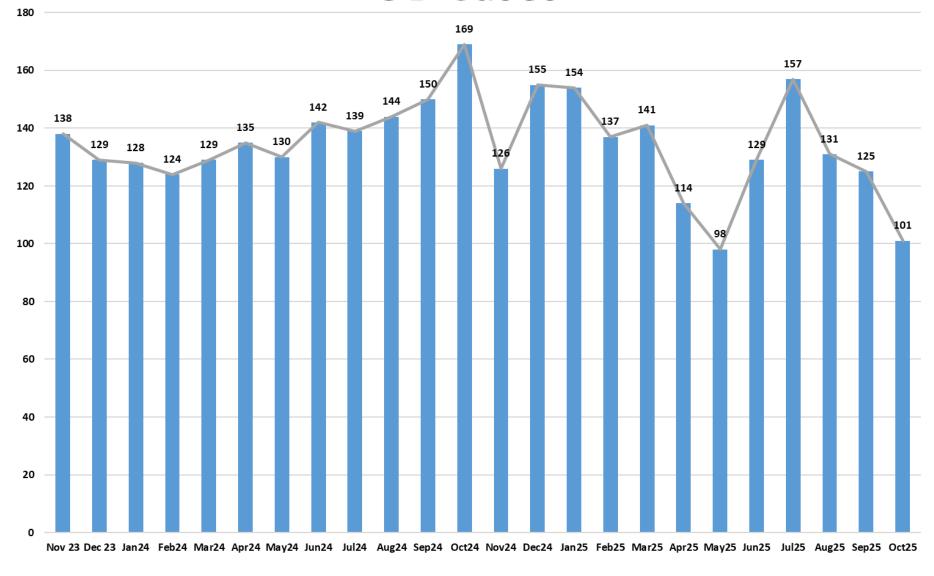
# Endo Cases (Suites A & B and OR )

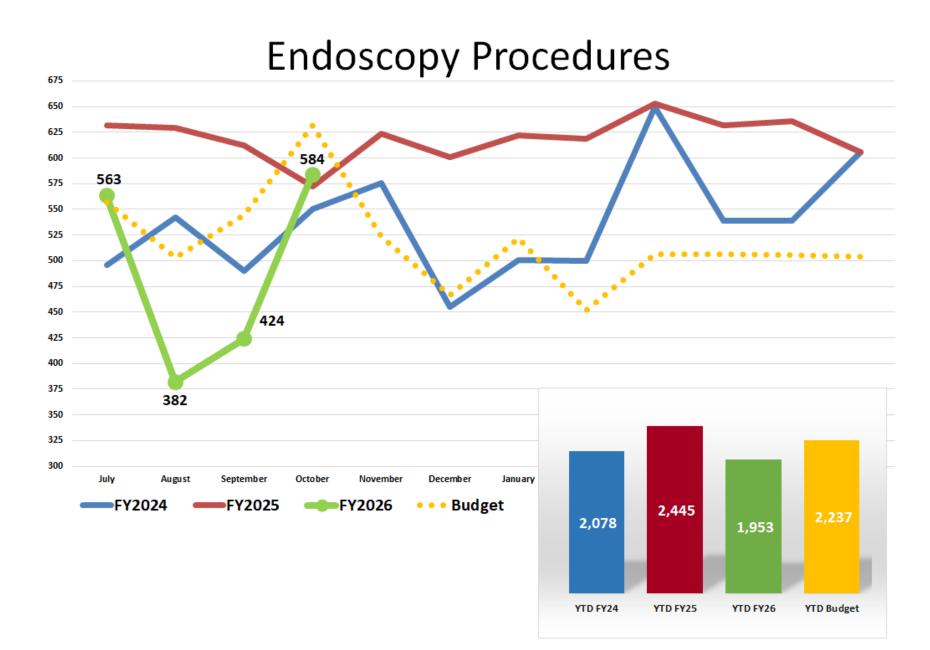


# Robotic Cases (IP & OP)

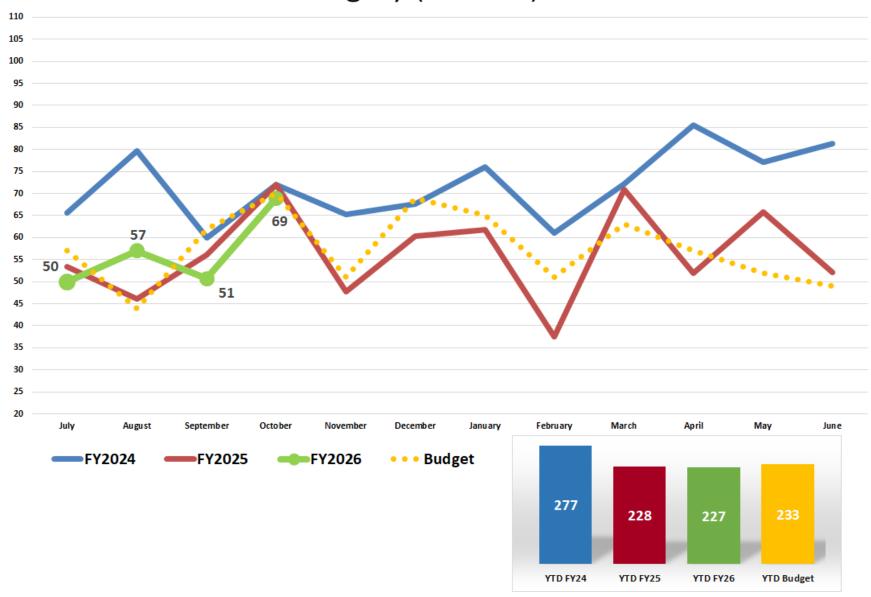


# **OB** Cases





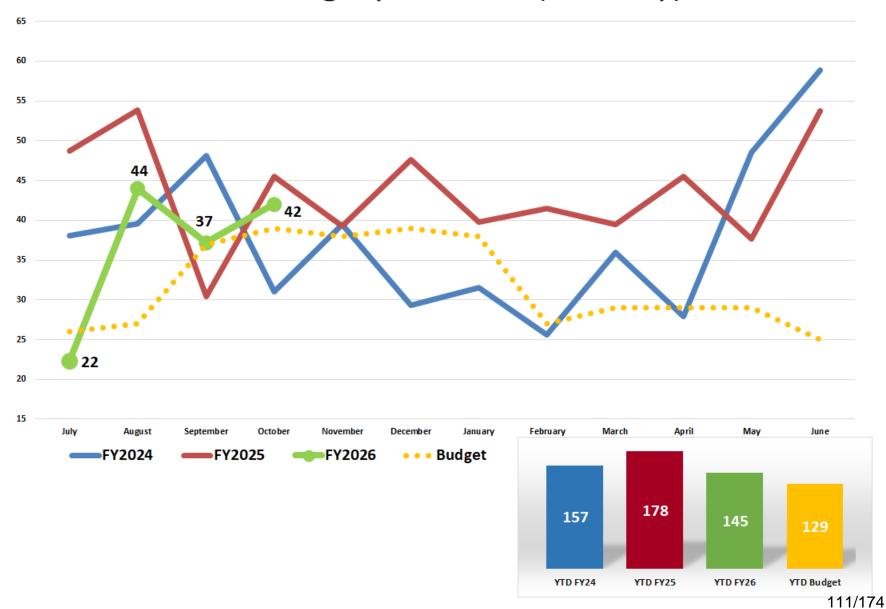
#### Robotic Surgery (IP & OP) - 100 Min Units



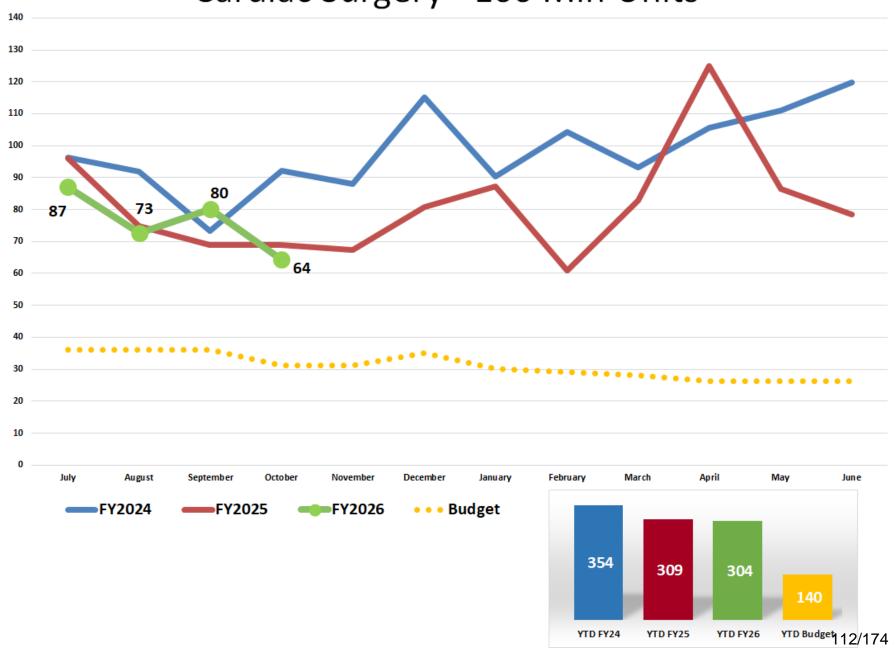
### Robotic Surgery Minutes (IP Only)



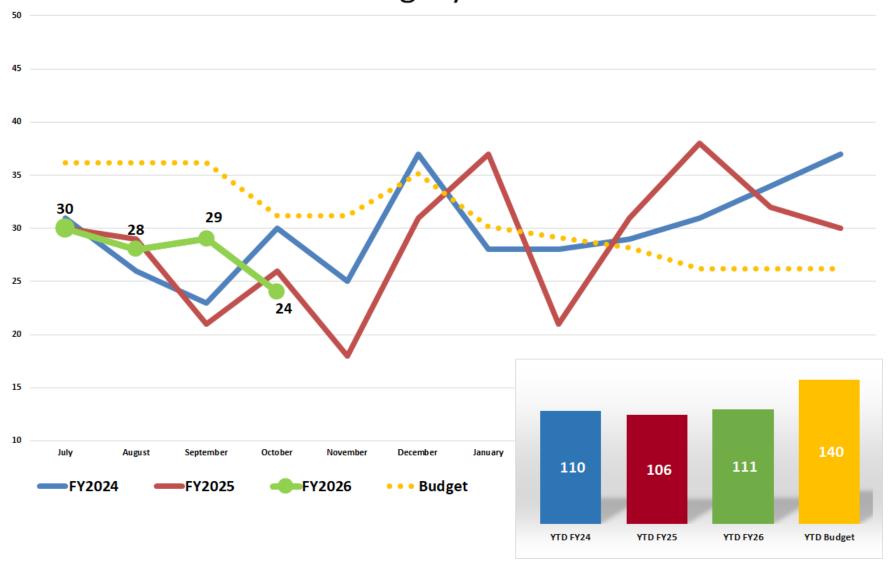
### Robotic Surgery Minutes (OP Only)



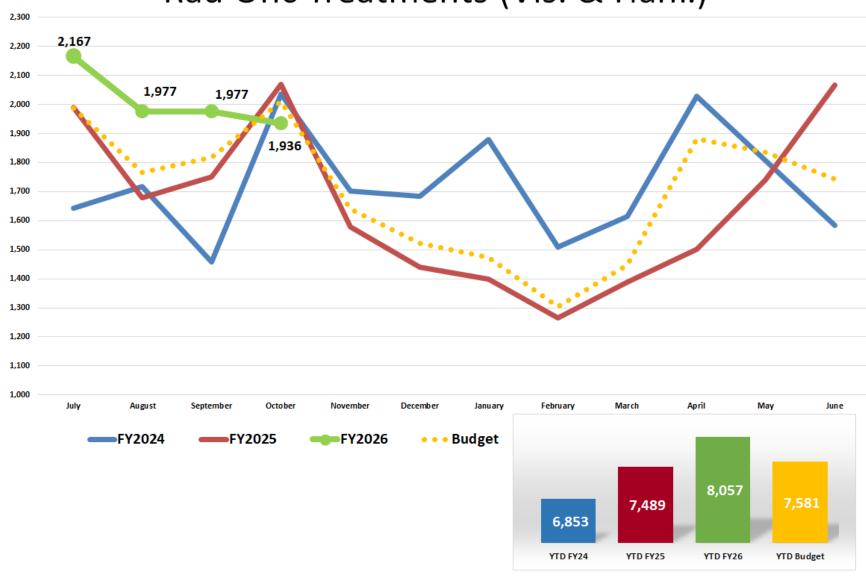
### Cardiac Surgery - 100 Min Units



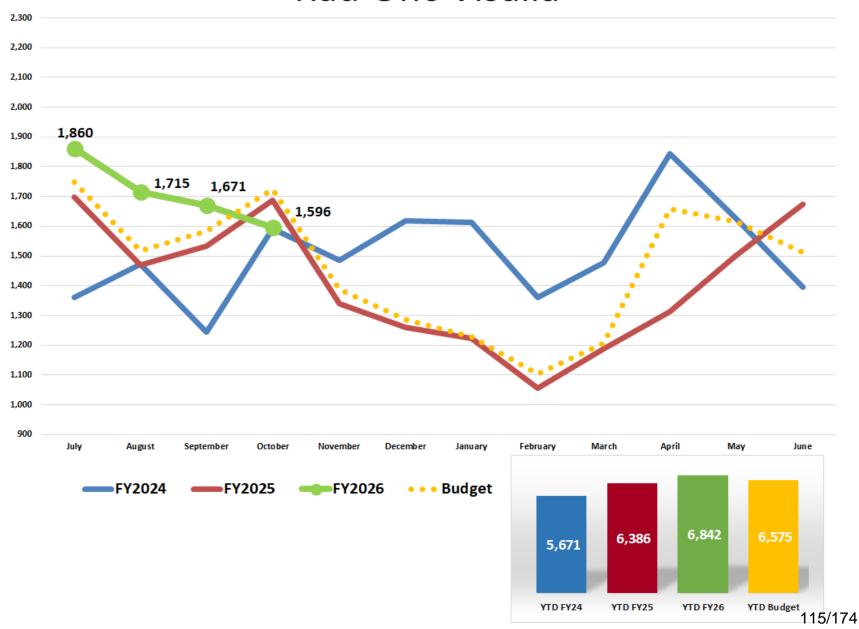
### **Cardiac Surgery Cases**



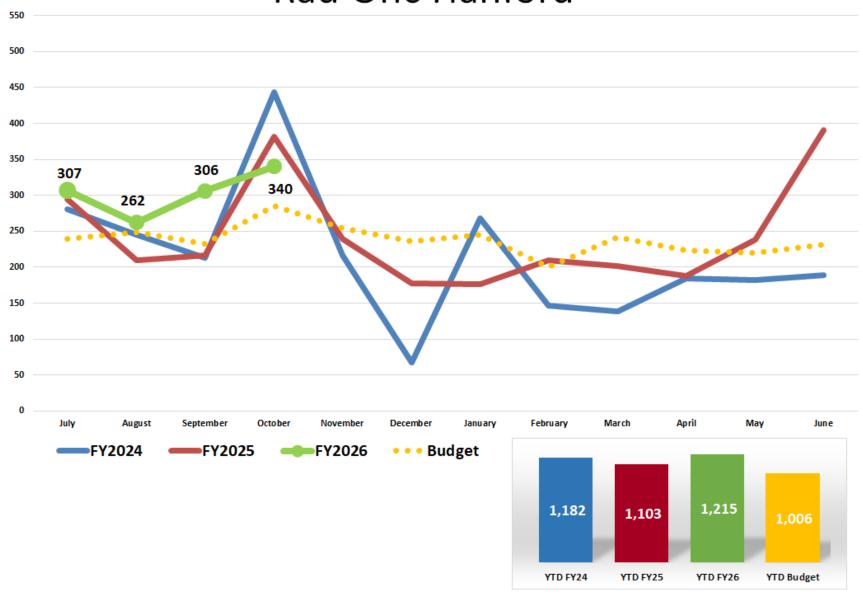
### Rad Onc Treatments (Vis. & Hanf.)



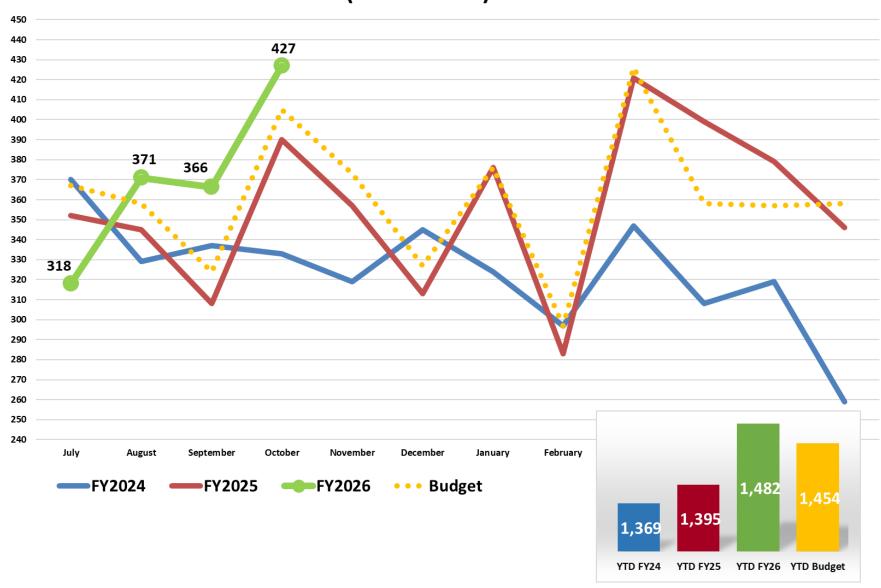
#### Rad Onc Visalia



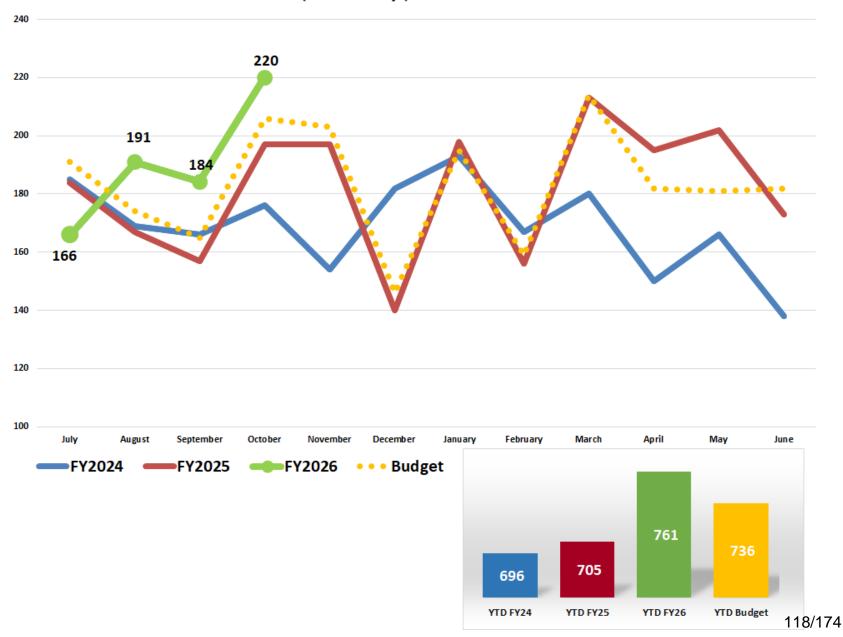
### Rad Onc Hanford



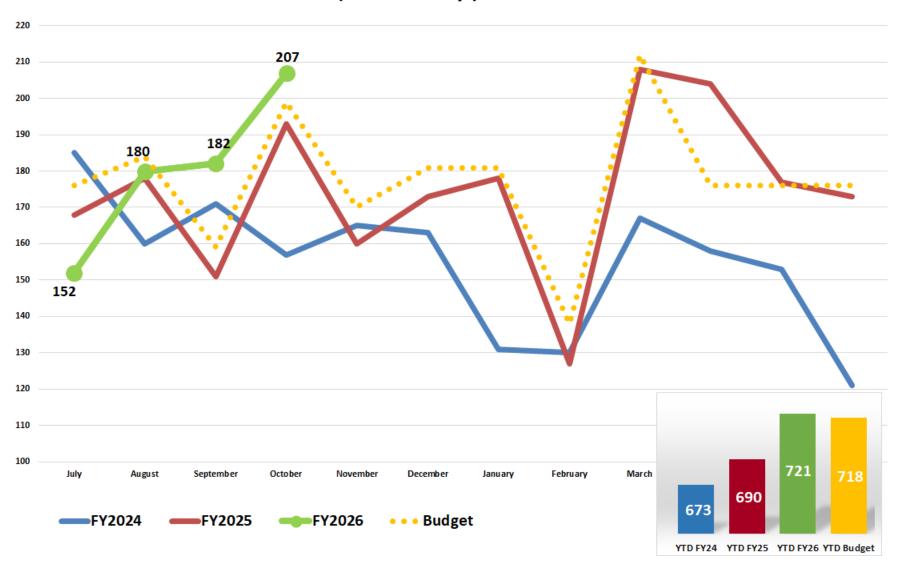
### Cath Lab (IP & OP) – 100 Min Units



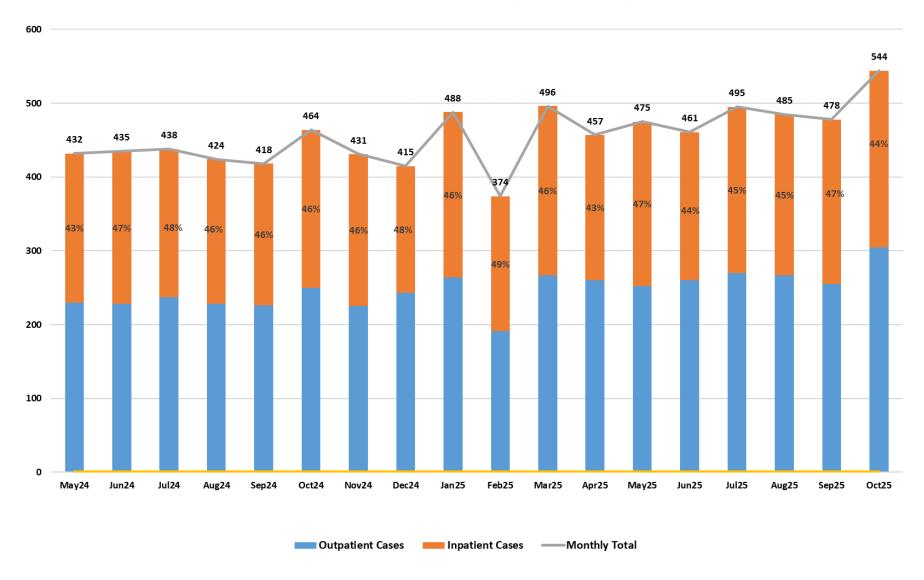
#### Cath Lab (IP Only) - 100 Min Units



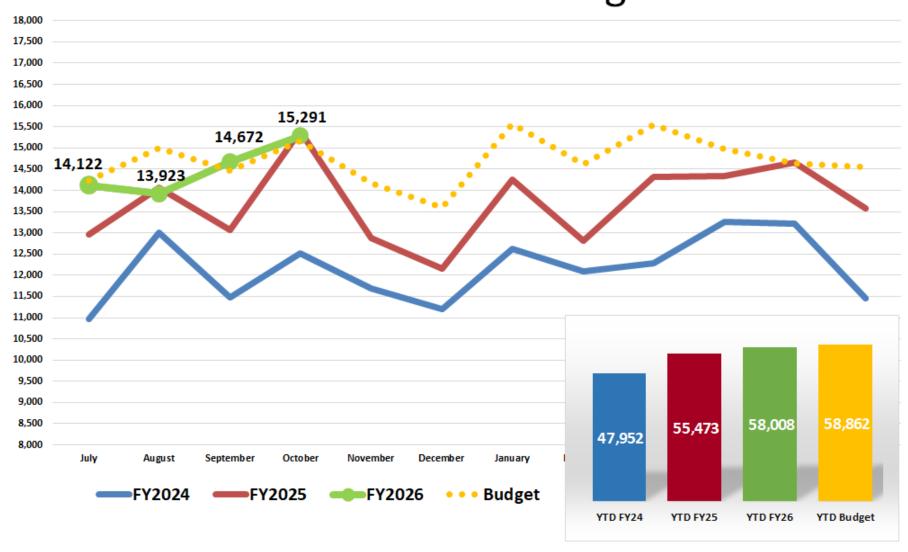
### Cath Lab (OP Only) – 100 Min Units



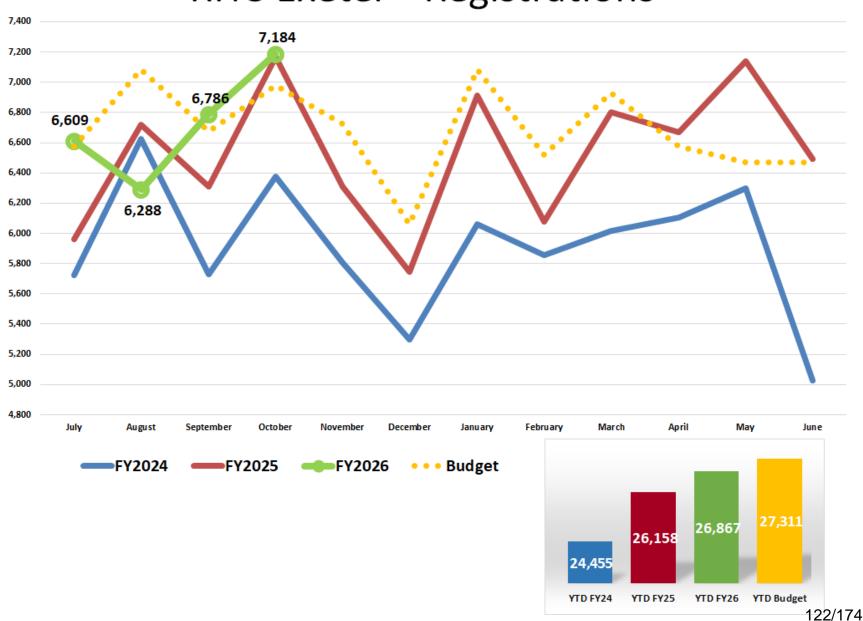
#### Cath Lab Patients (IP & OP)



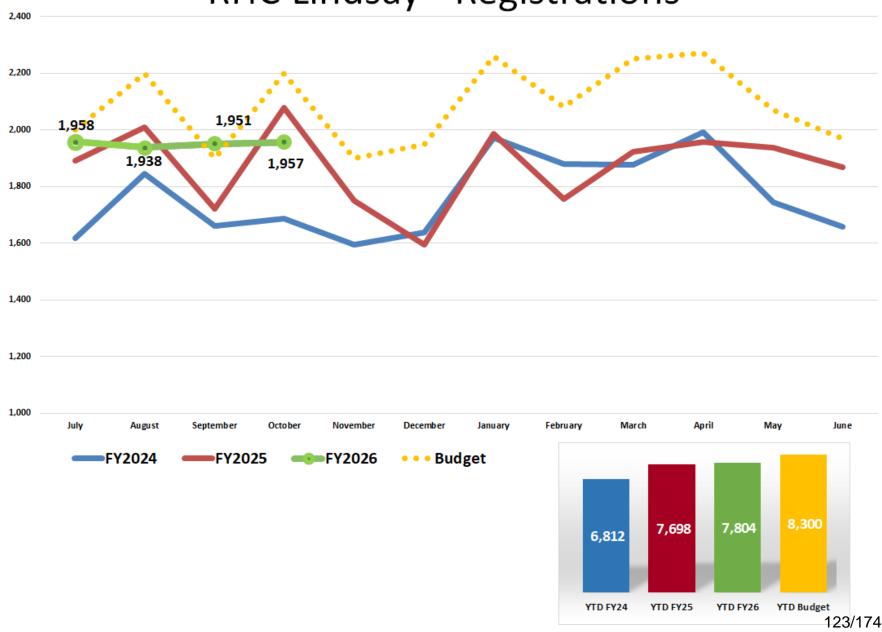
# Rural Health Clinics Registrations



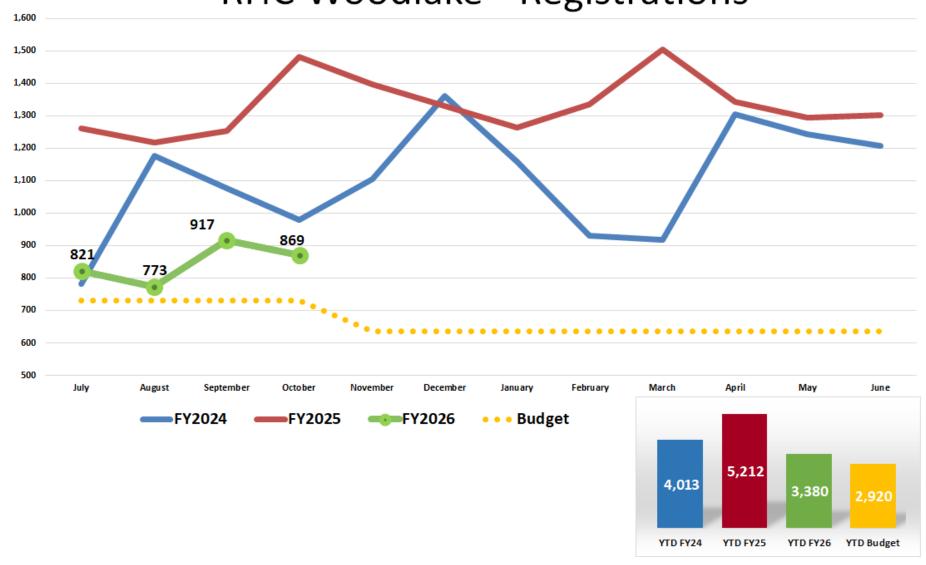
# **RHC Exeter - Registrations**



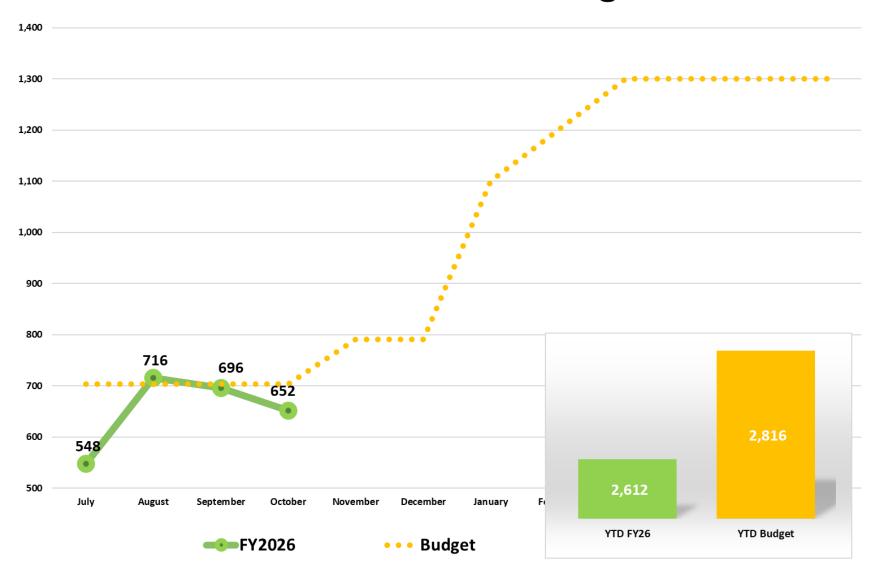
# RHC Lindsay - Registrations



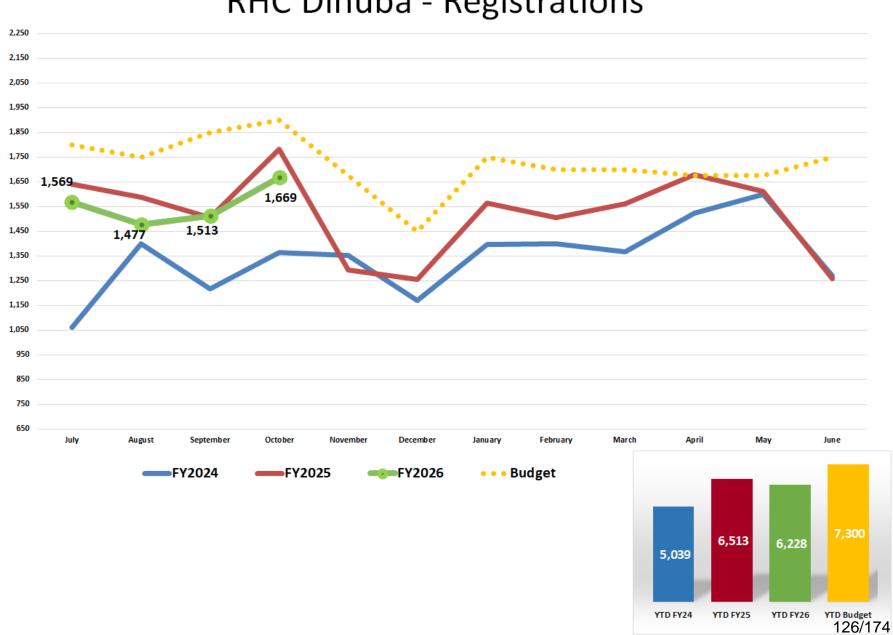
# RHC Woodlake - Registrations



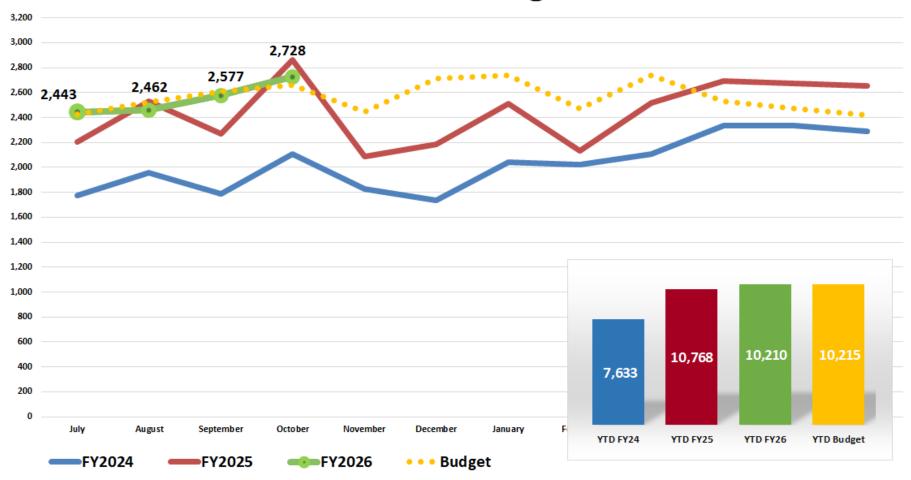
# RHC Woodlake Valencia - Registrations



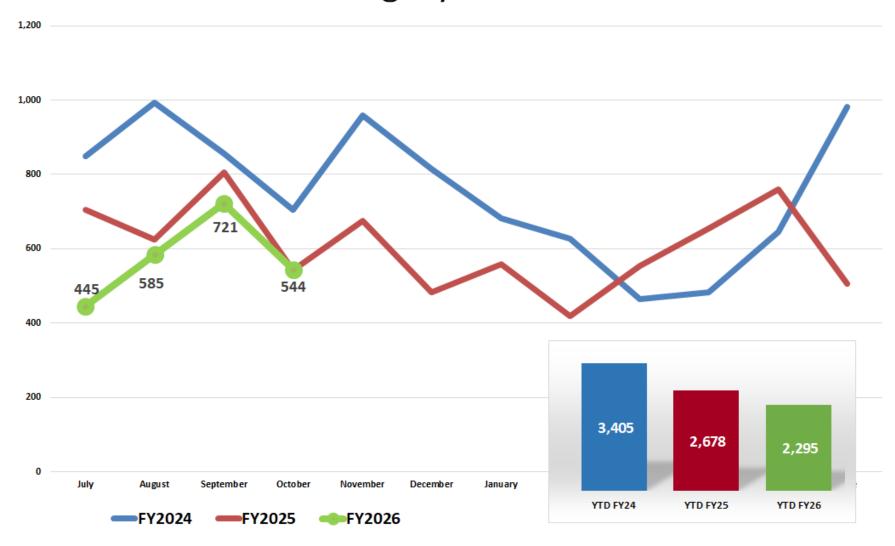
### RHC Dinuba - Registrations



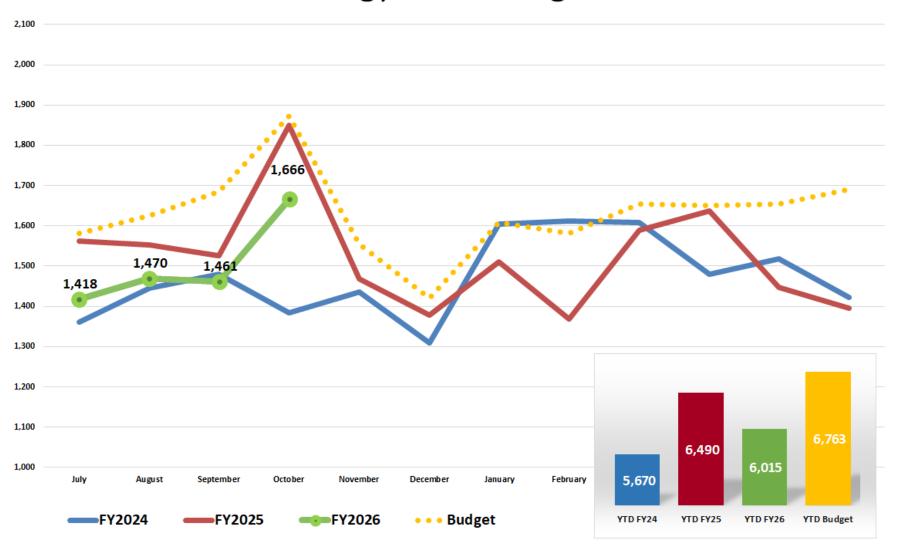
### RHC Tulare - Registrations



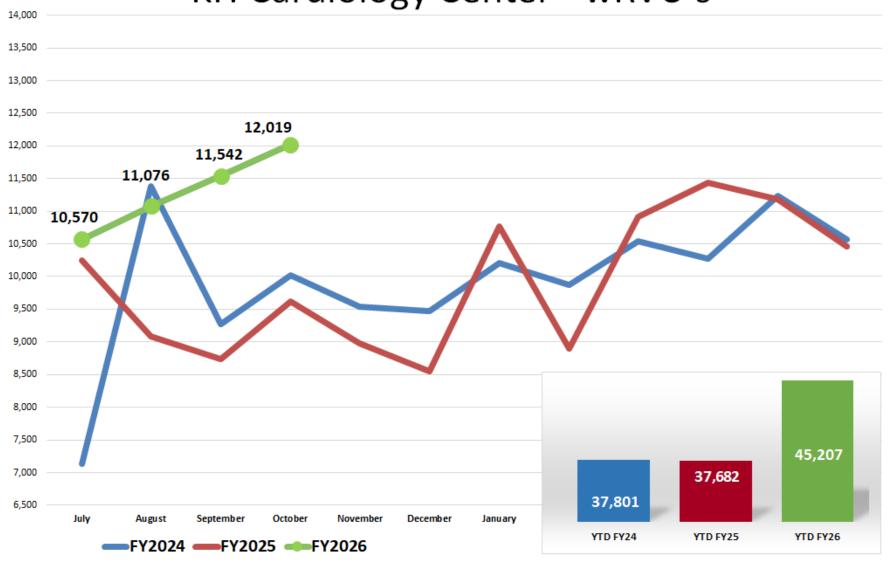
# Neurosurgery Clinic - wRVU's



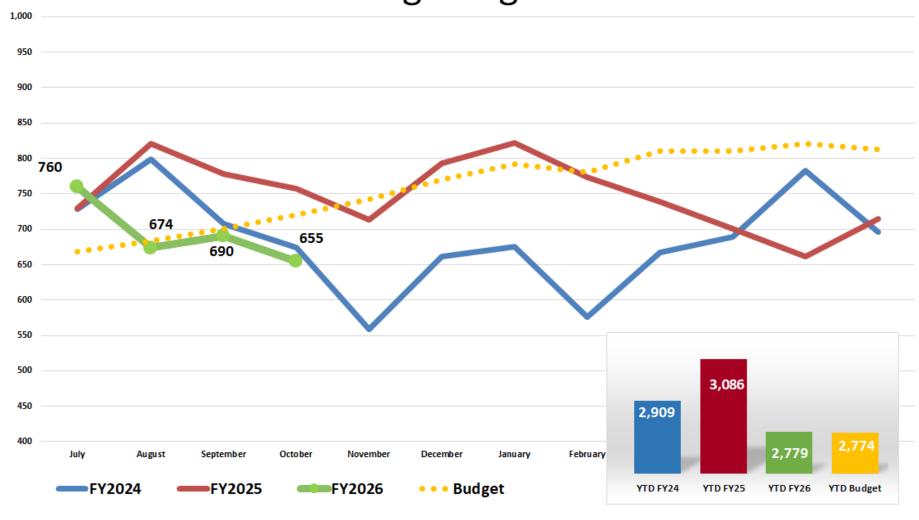
#### **KH Cardiology Center Registrations**



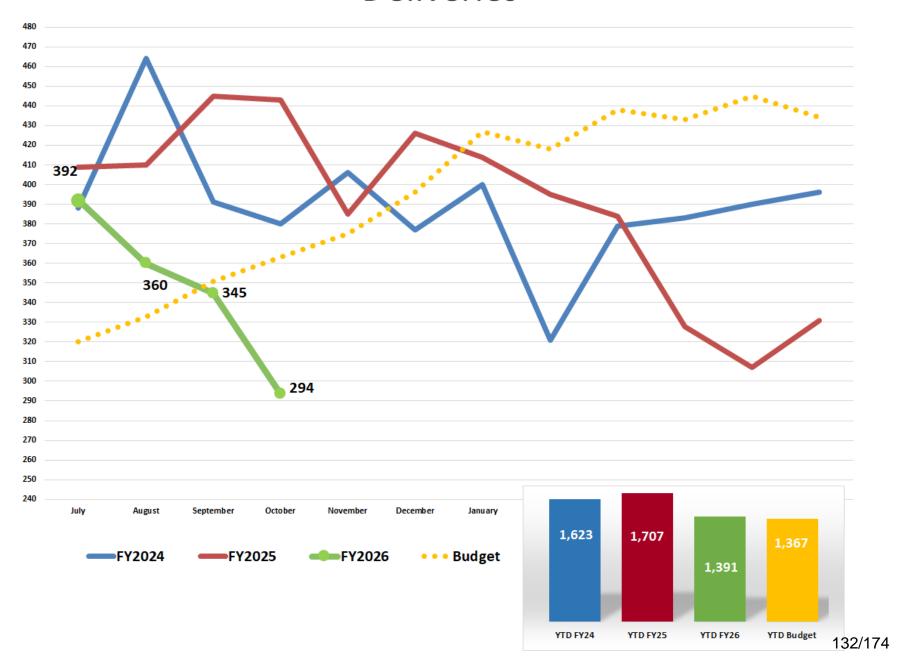
# KH Cardiology Center - wRVU's



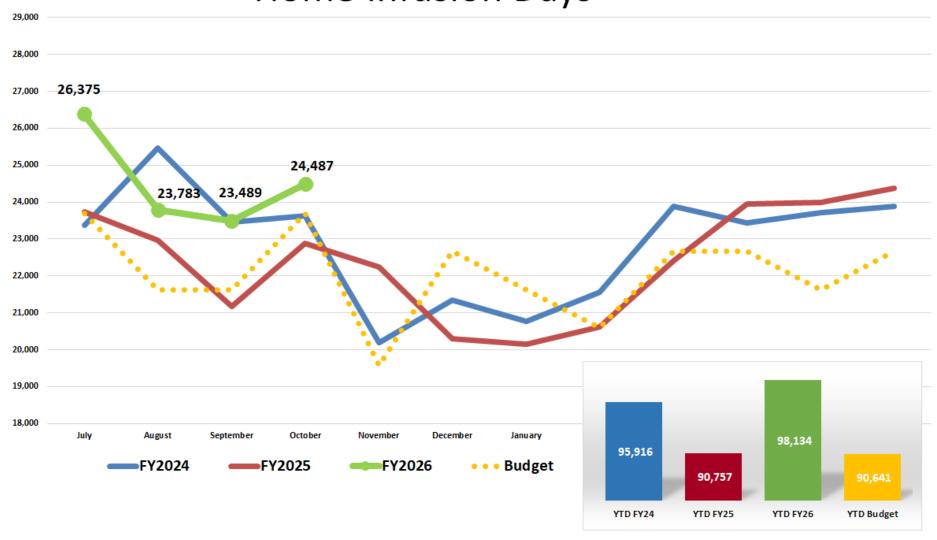
# **Labor Triage Registrations**



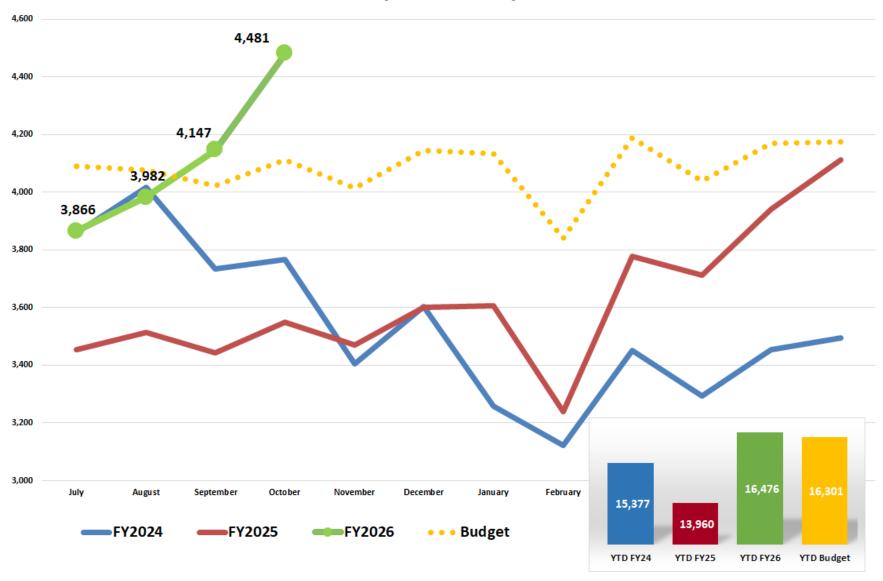
#### **Deliveries**



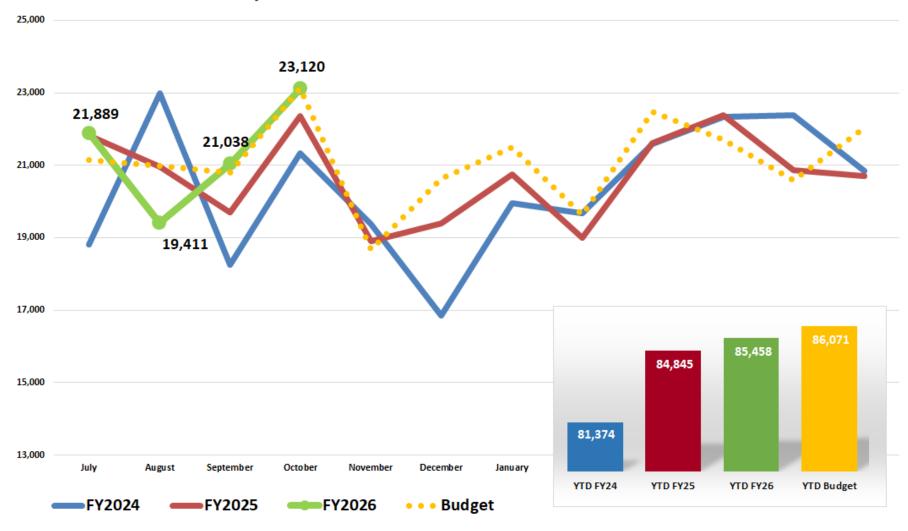
# **Home Infusion Days**



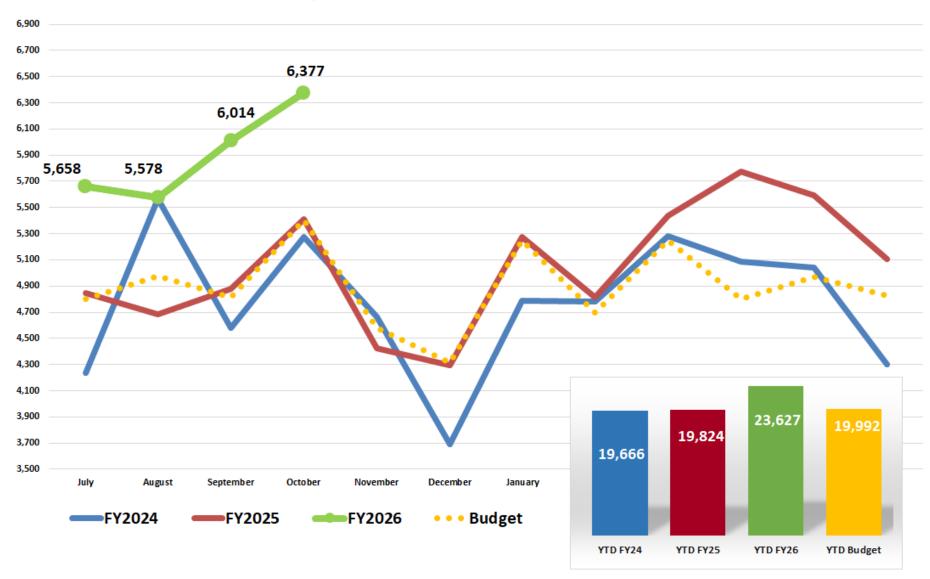
# **Hospice Days**



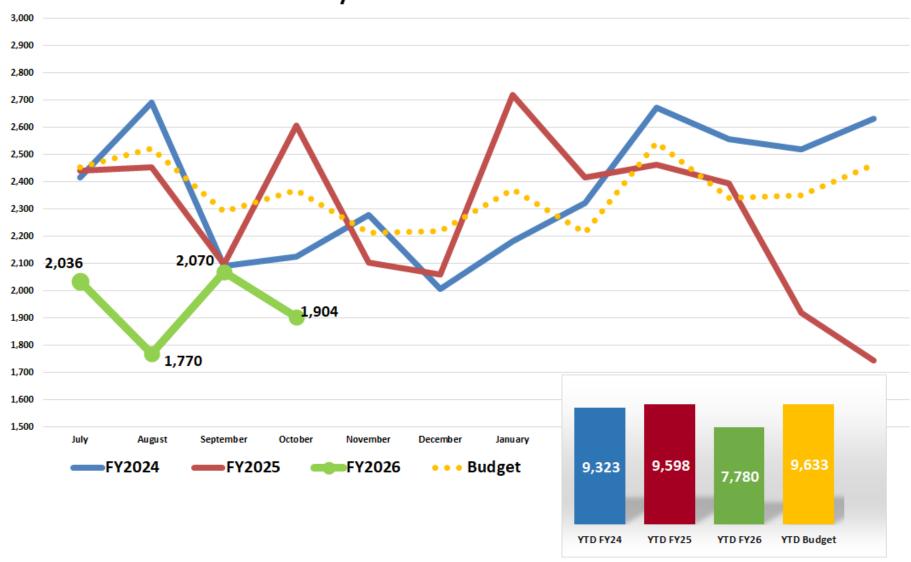
### All O/P Rehab Svcs Across District



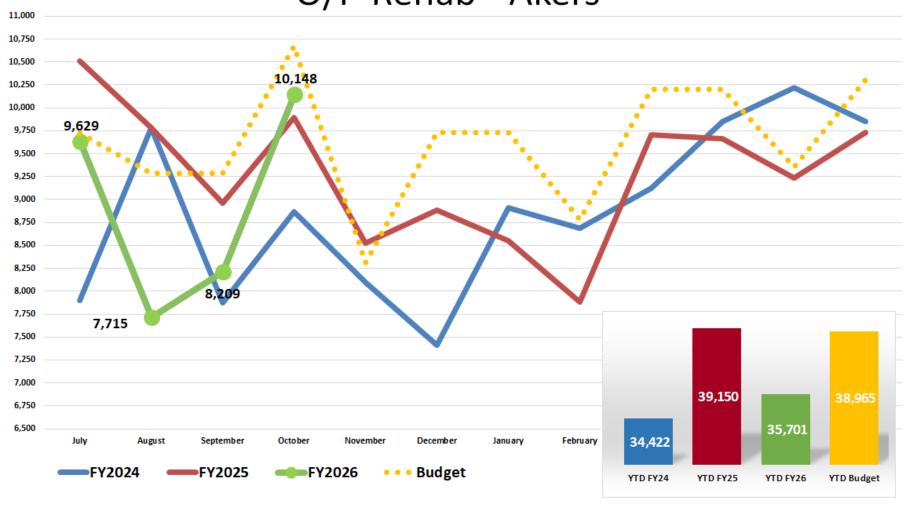
# O/P Rehab Services



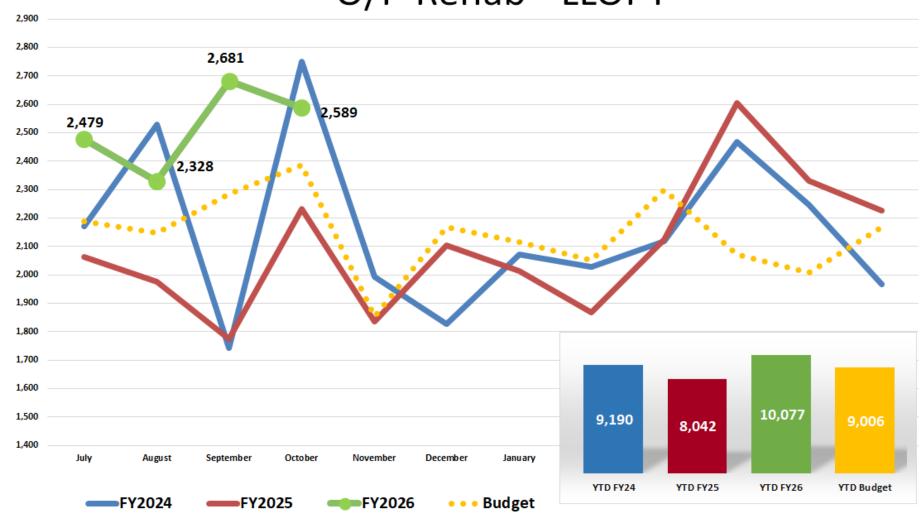
# O/P Rehab - Exeter



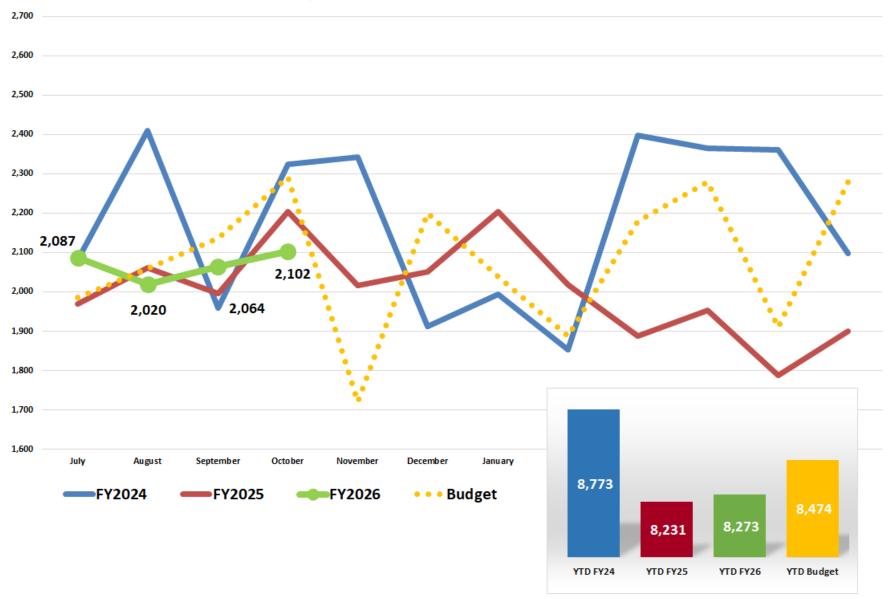
# O/P Rehab - Akers



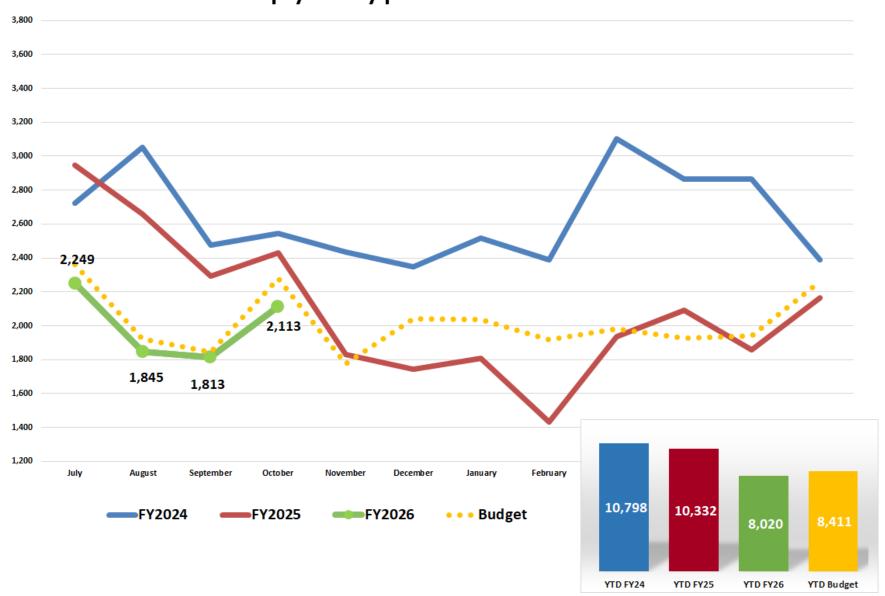
# O/P Rehab - LLOPT



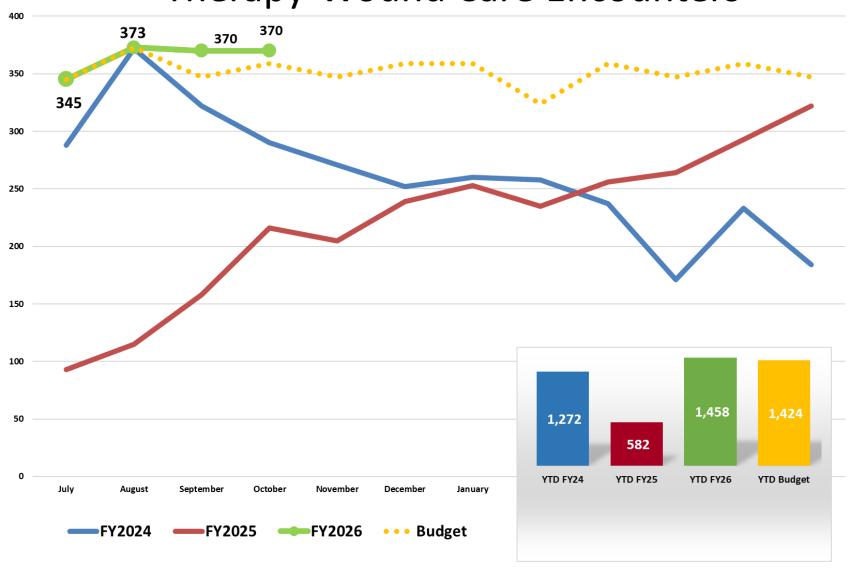
### O/P Rehab - Dinuba



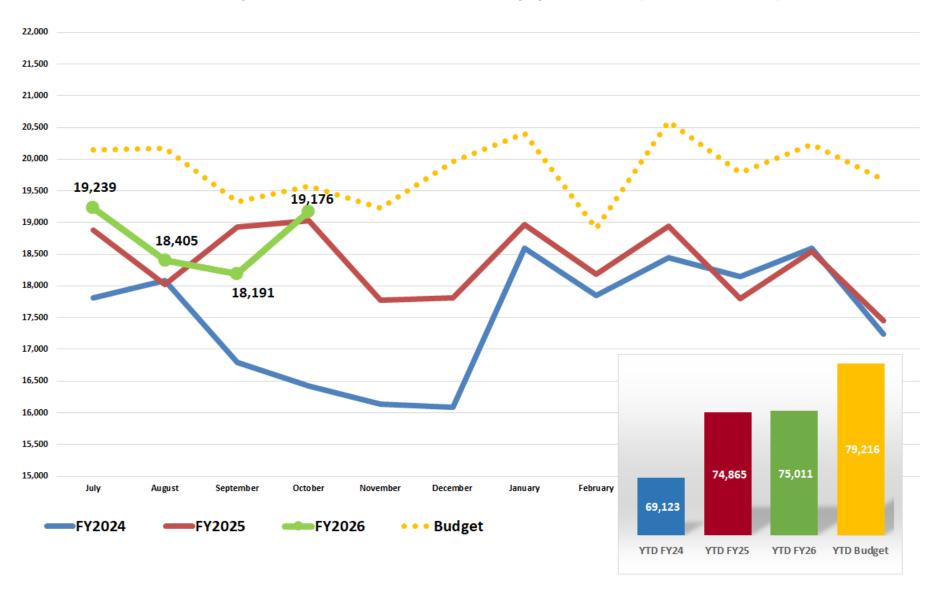
# Therapy - Cypress Hand Center



# Therapy-Wound Care Encounters

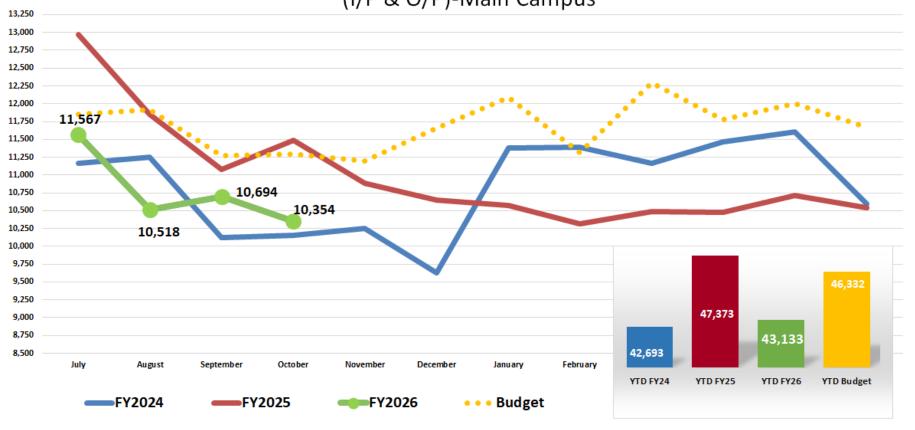


#### Physical & Other Therapy Units (I/P & O/P)

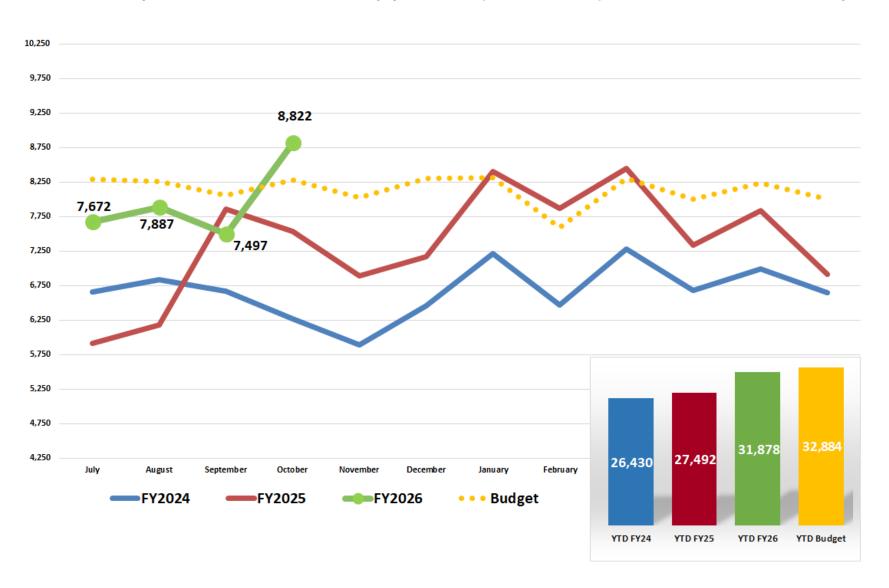


#### Physical & Other Therapy Units

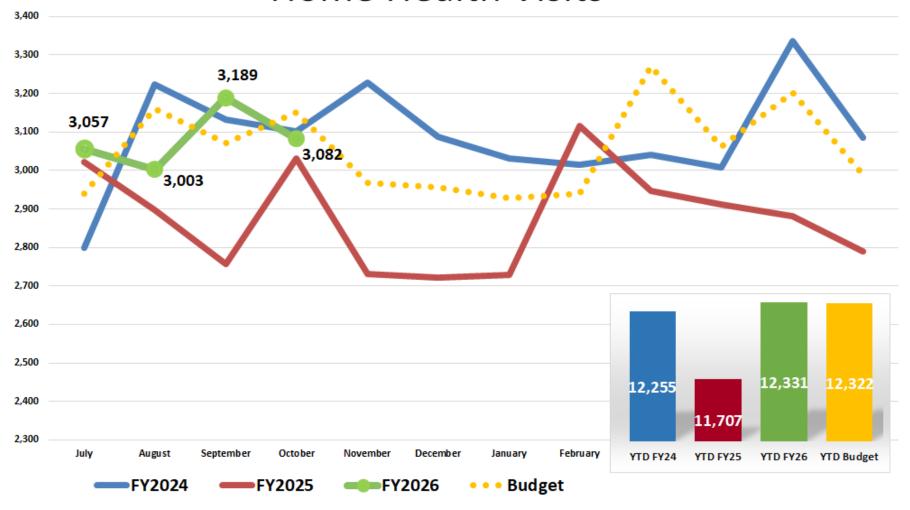




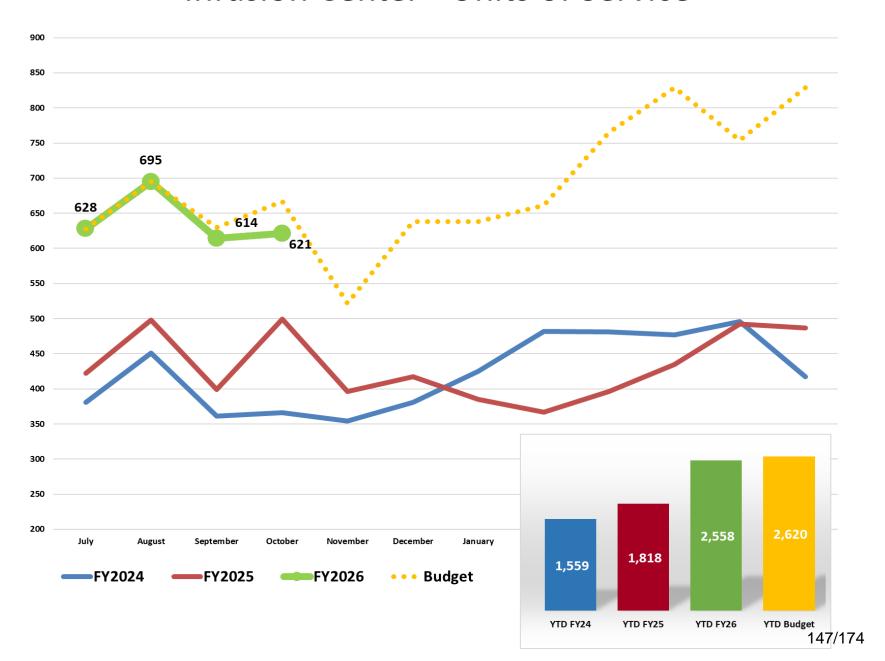
#### Physical & Other Therapy Units (I/P & O/P)-KDRH & South Campus



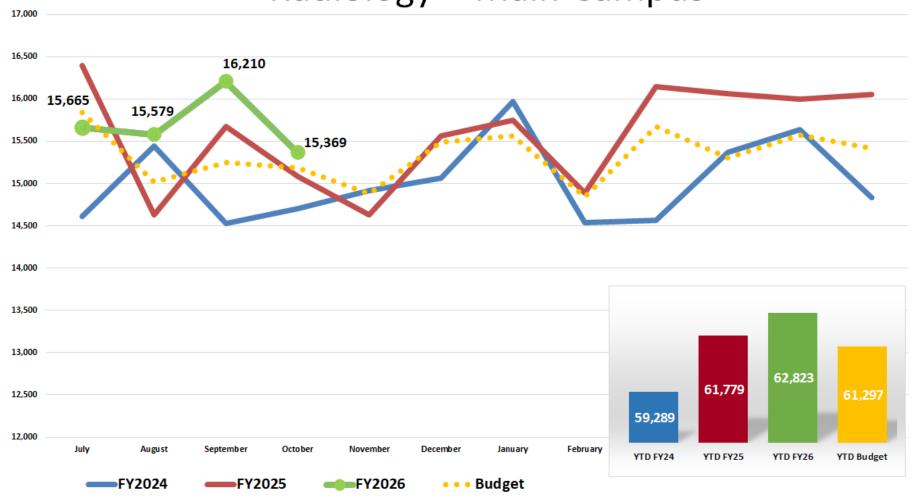
### Home Health Visits



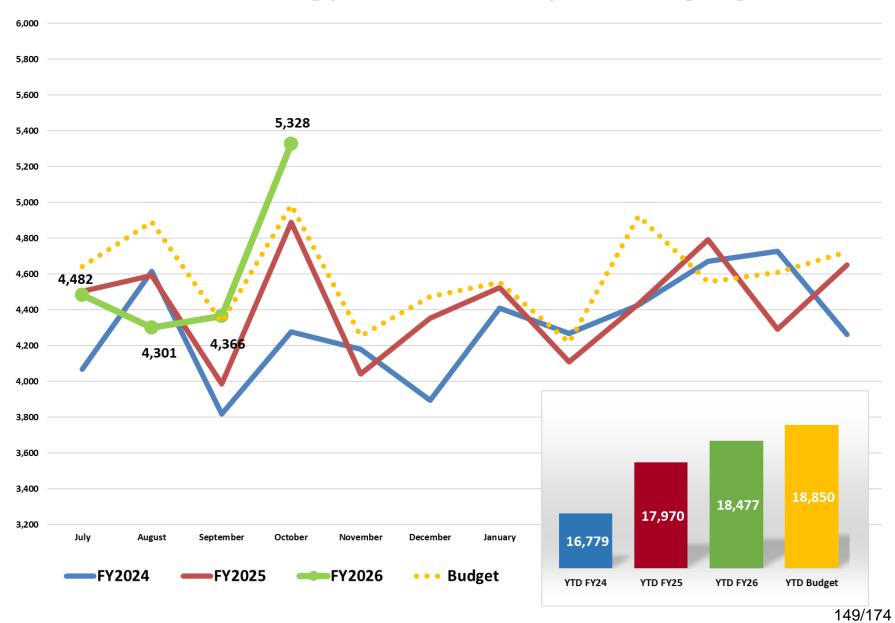
#### Infusion Center - Units of Service



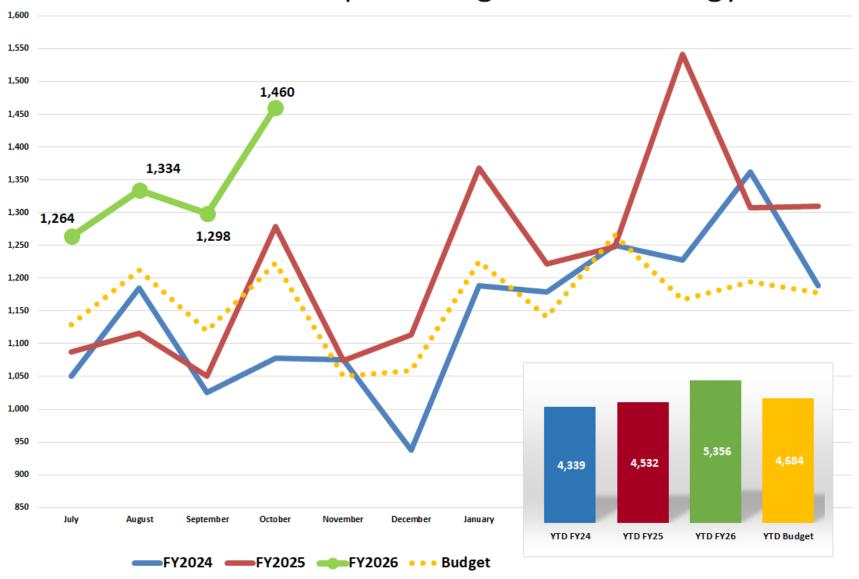
# Radiology – Main Campus



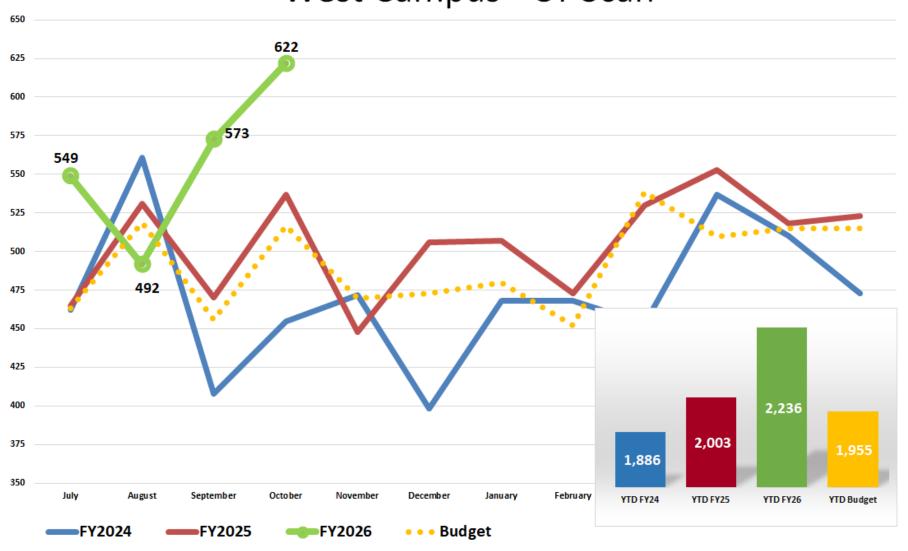
## Radiology - West Campus Imaging



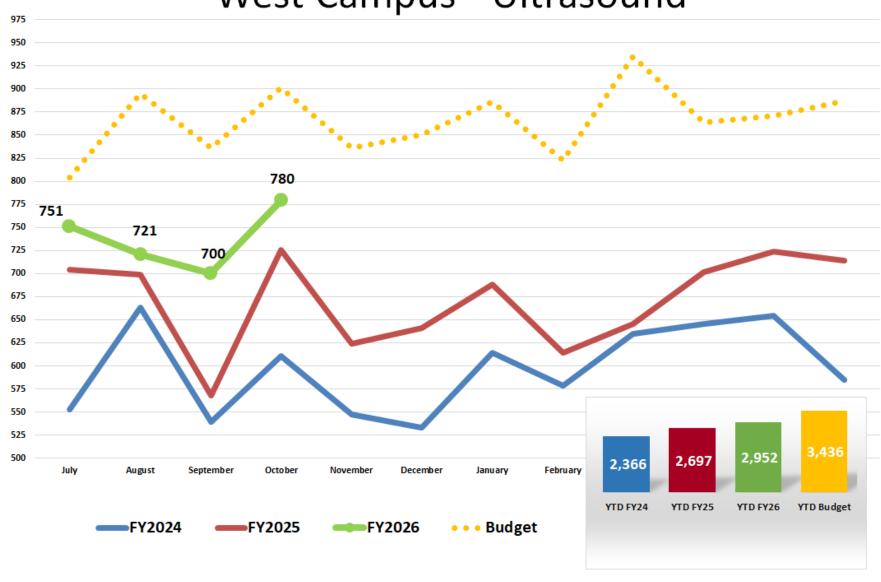
### West Campus - Diagnostic Radiology



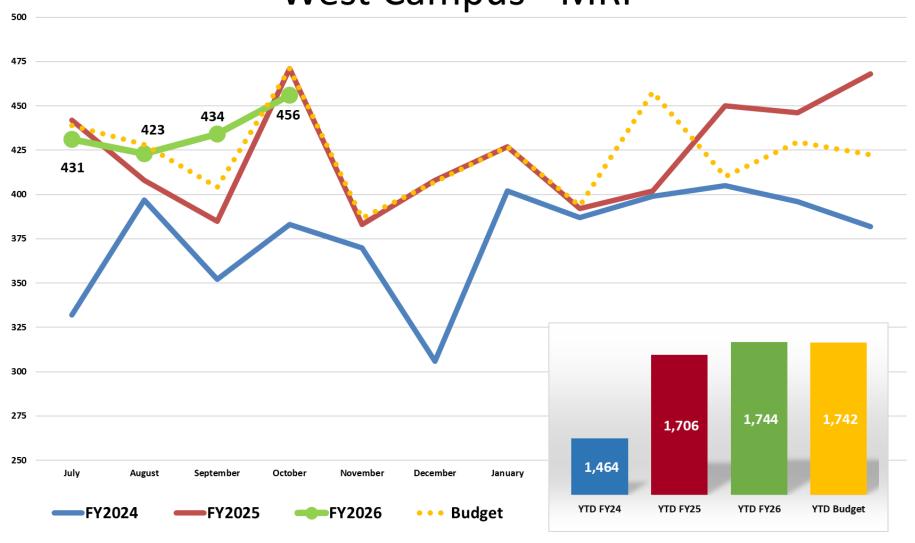
## West Campus - CT Scan



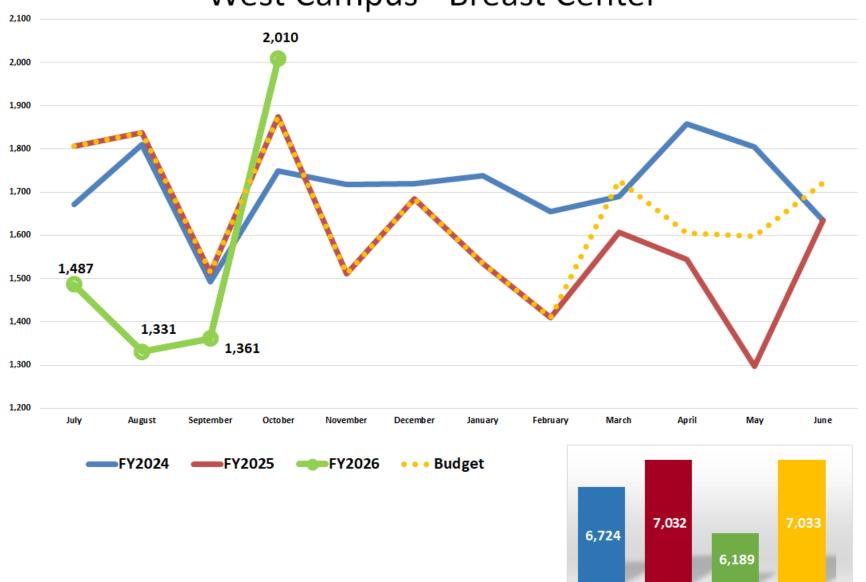
## West Campus - Ultrasound



## West Campus - MRI



### West Campus - Breast Center



YTD Budget

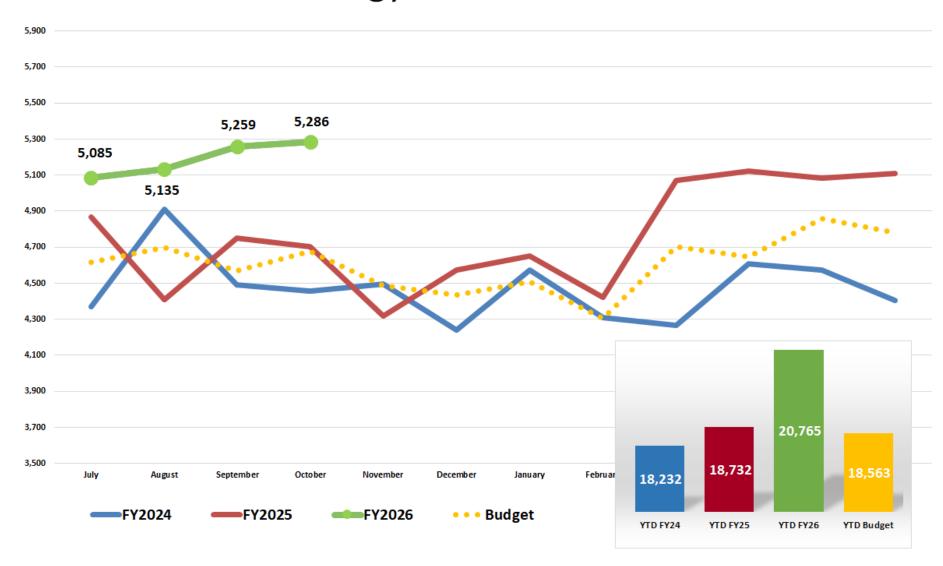
154/174

YTD FY26

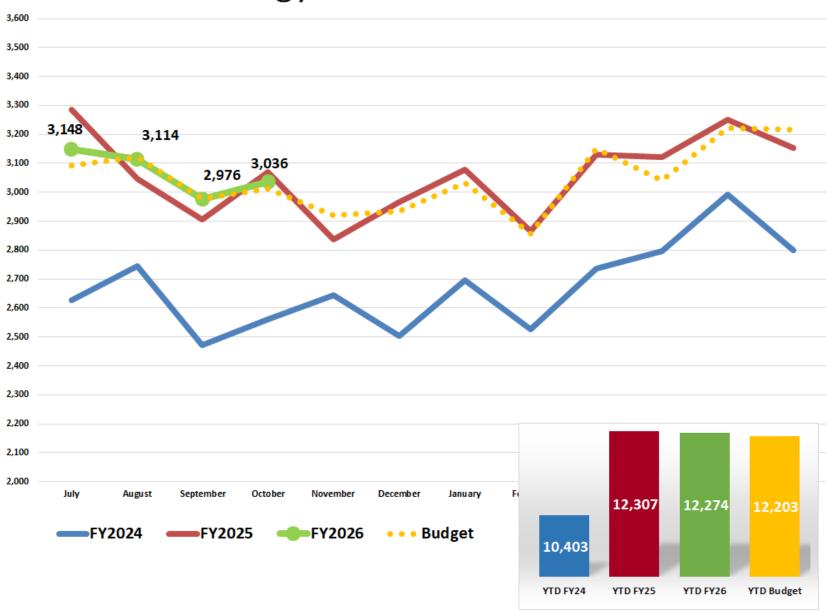
YTD FY24

YTD FY25

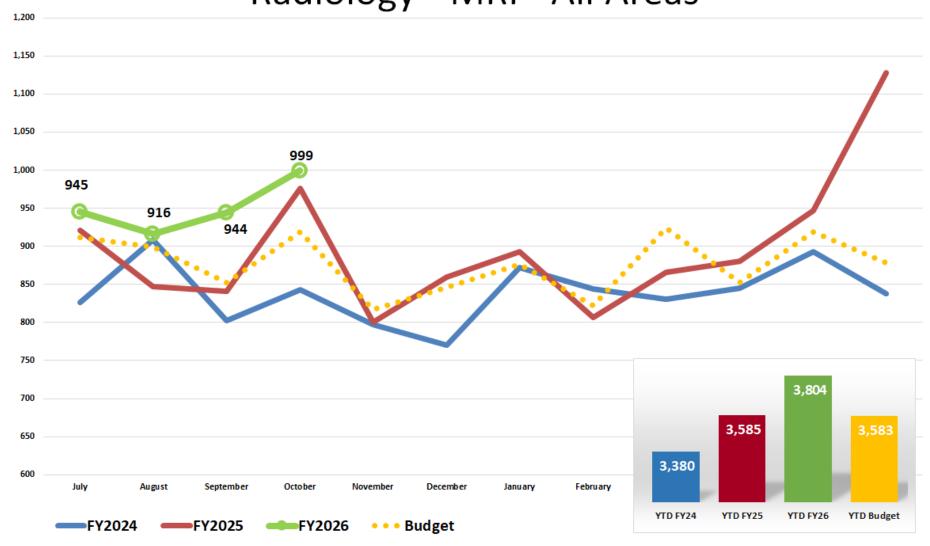
# Radiology - CT - All Areas



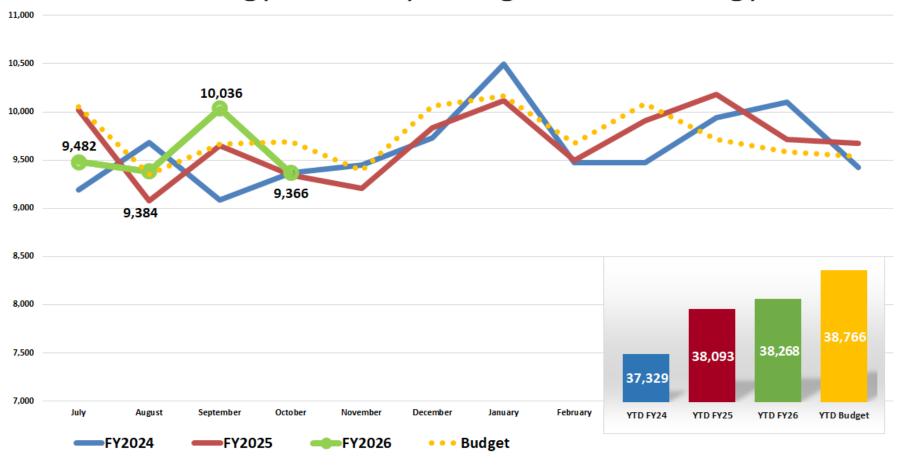
## Radiology - Ultrasound - All Areas



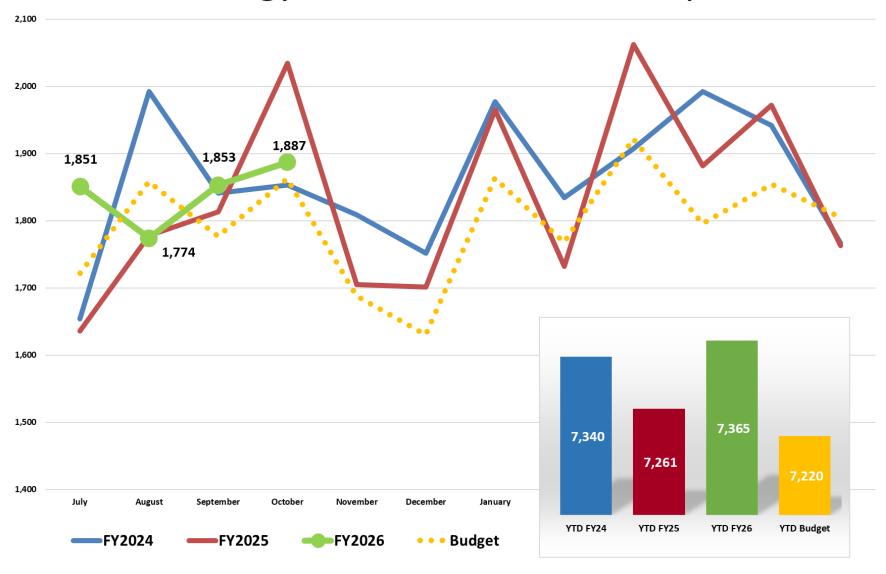
## Radiology - MRI - All Areas



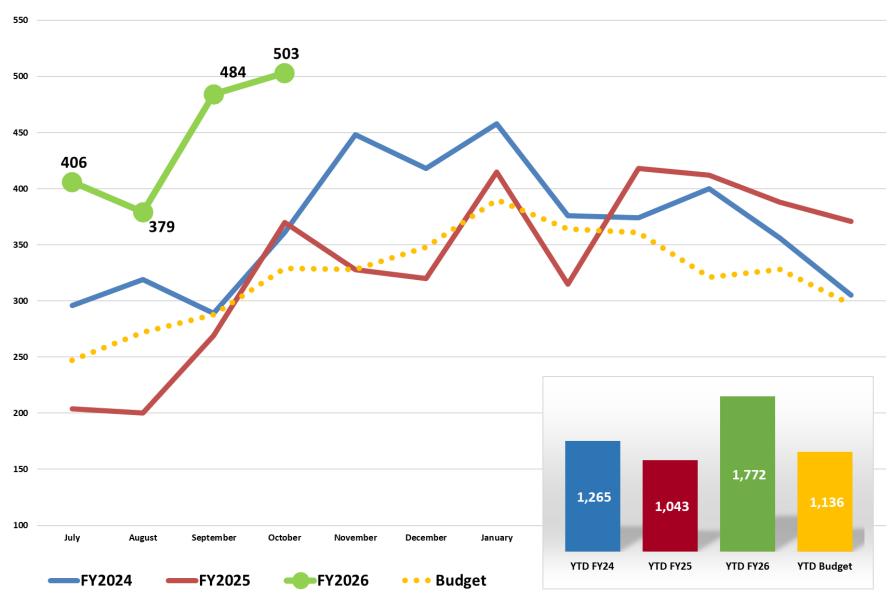
## Radiology Modality - Diagnostic Radiology



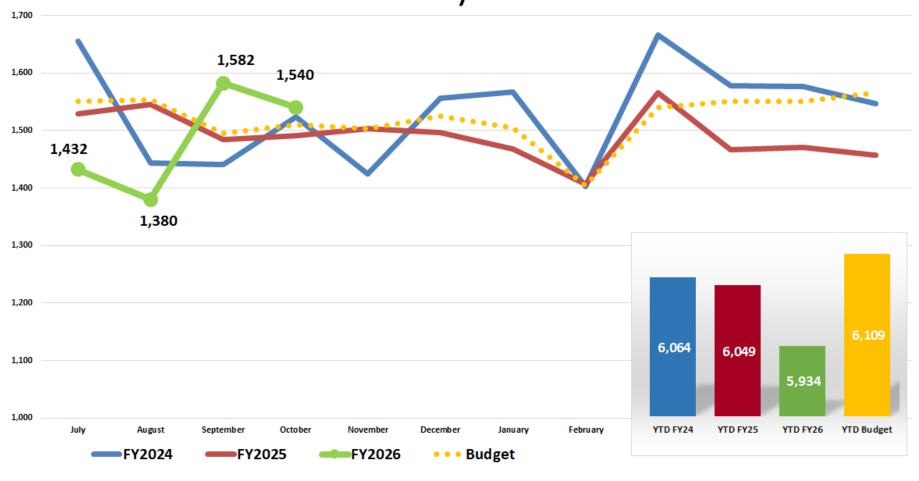
## Radiology - UC Court/South Campus



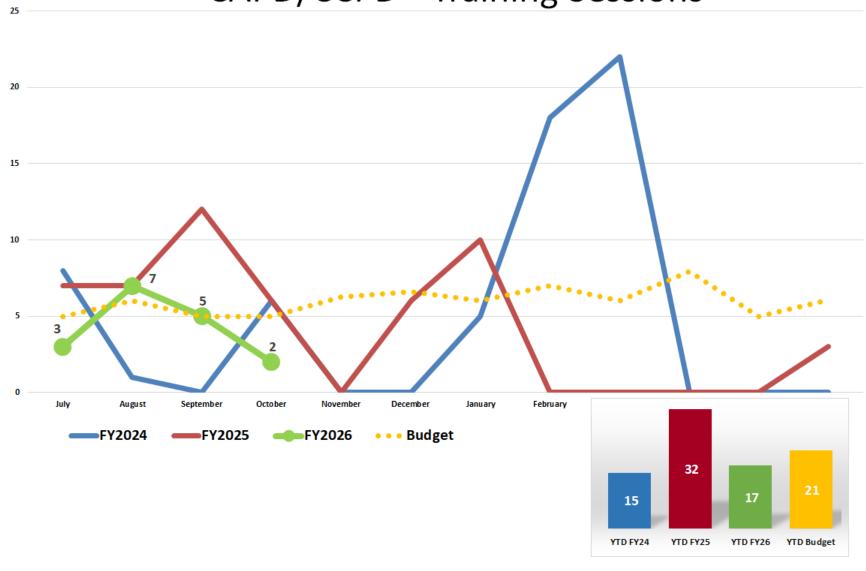
## Radiology - UC Demaree/North Campus



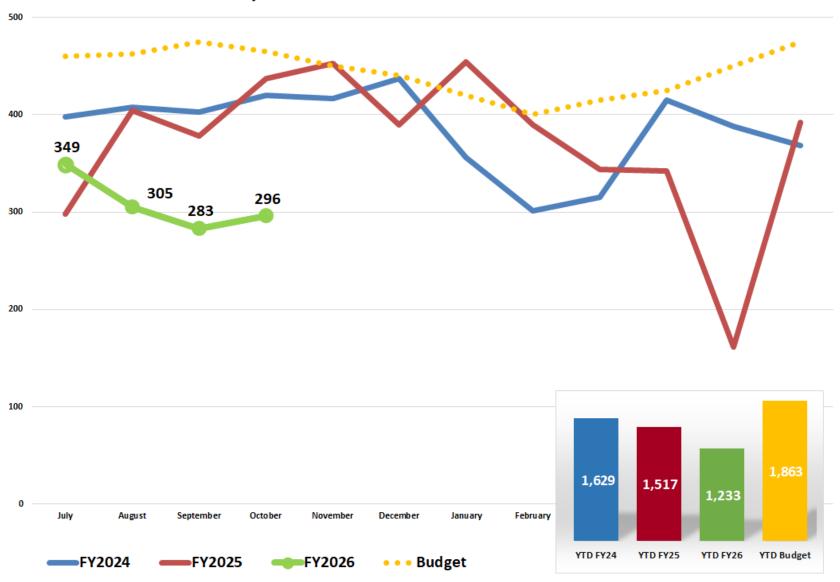
# Chronic Dialysis - Visalia



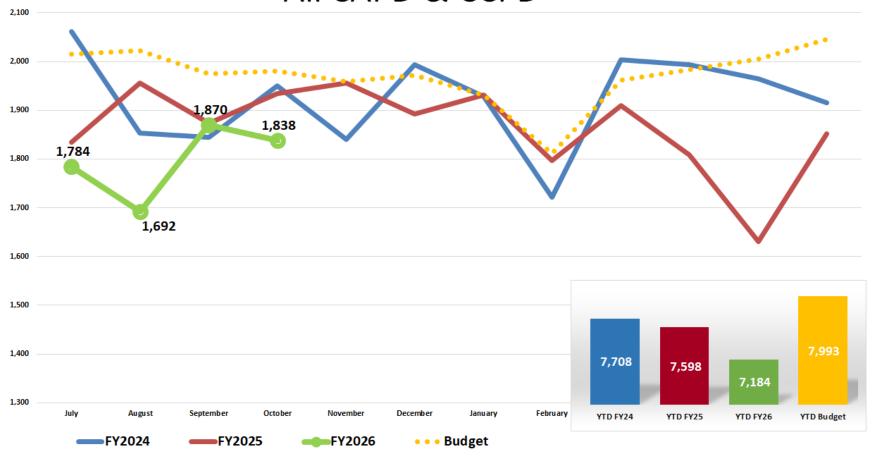
## **CAPD/CCPD** - Training Sessions



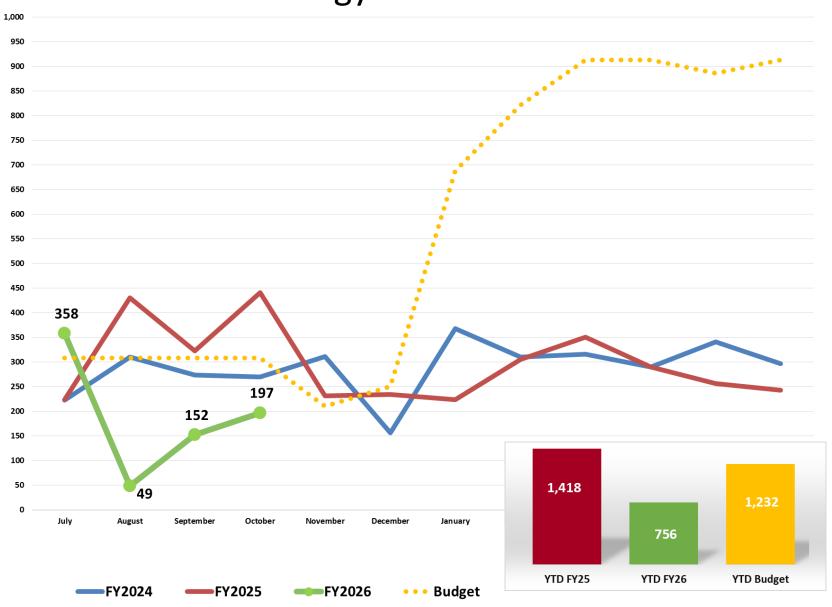
## CAPD/CCPD - Maintenance Sessions



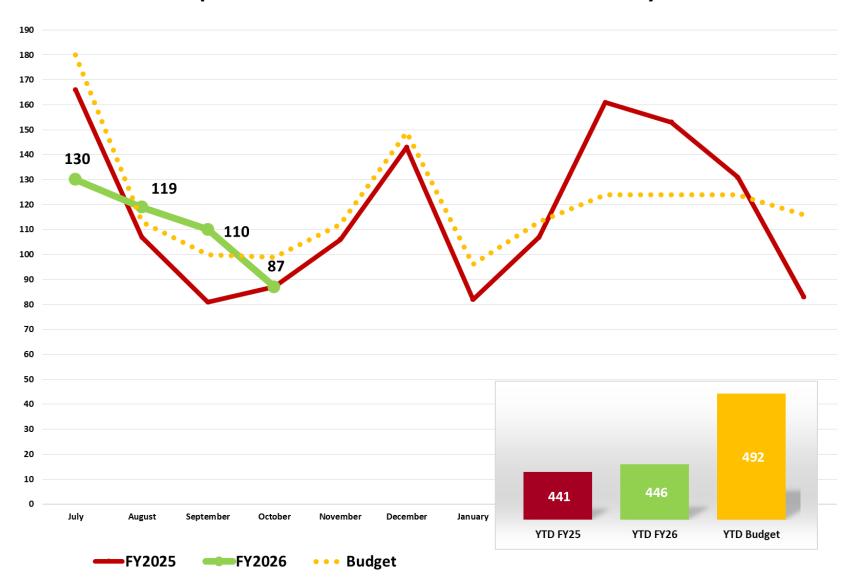
### All CAPD & CCPD



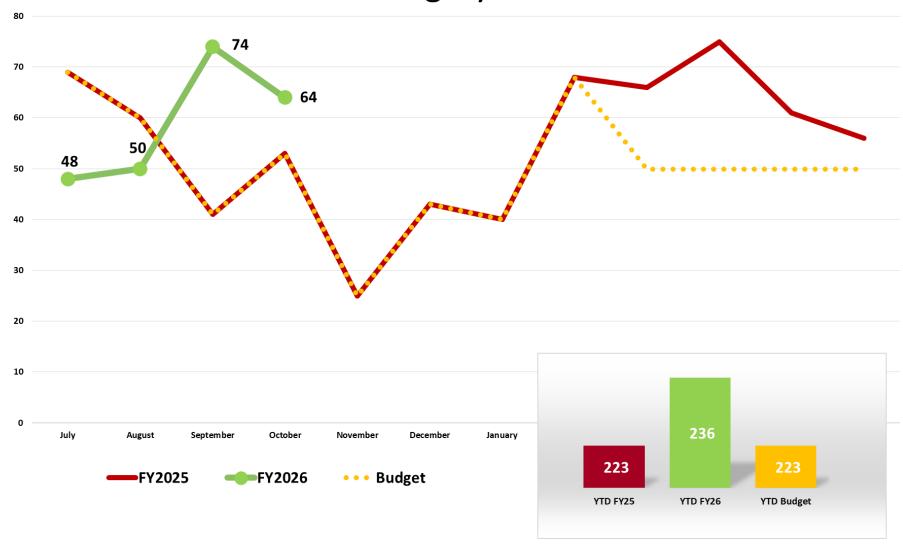
## **Urology Clinic Visits**



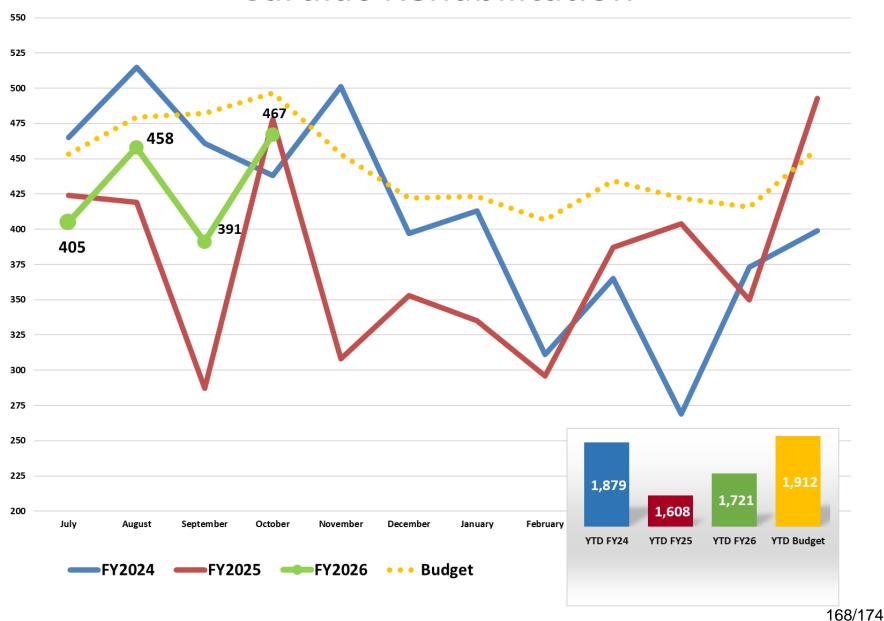
## Open Arms House - Patient Days



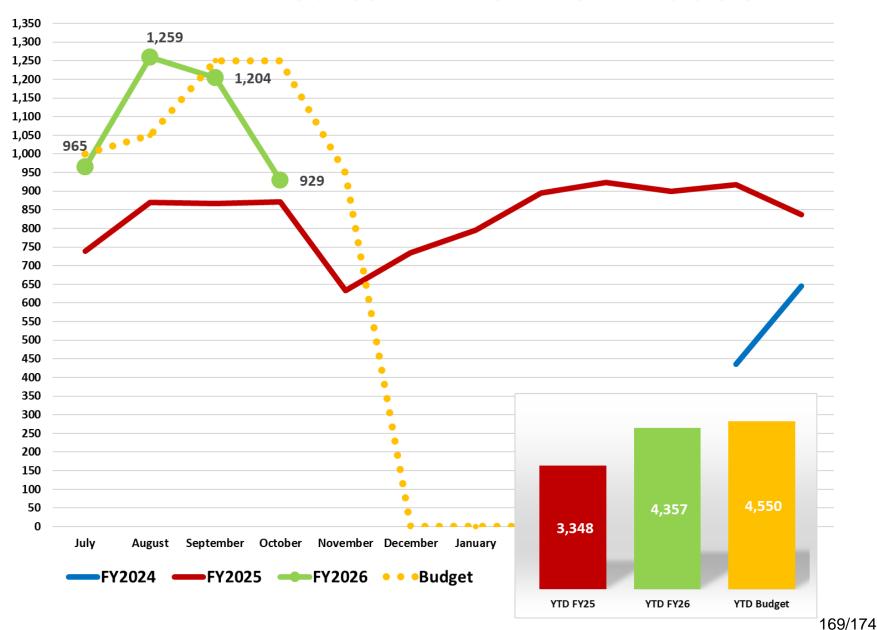
## Cardiothoracic Surgery Clinic - Visits



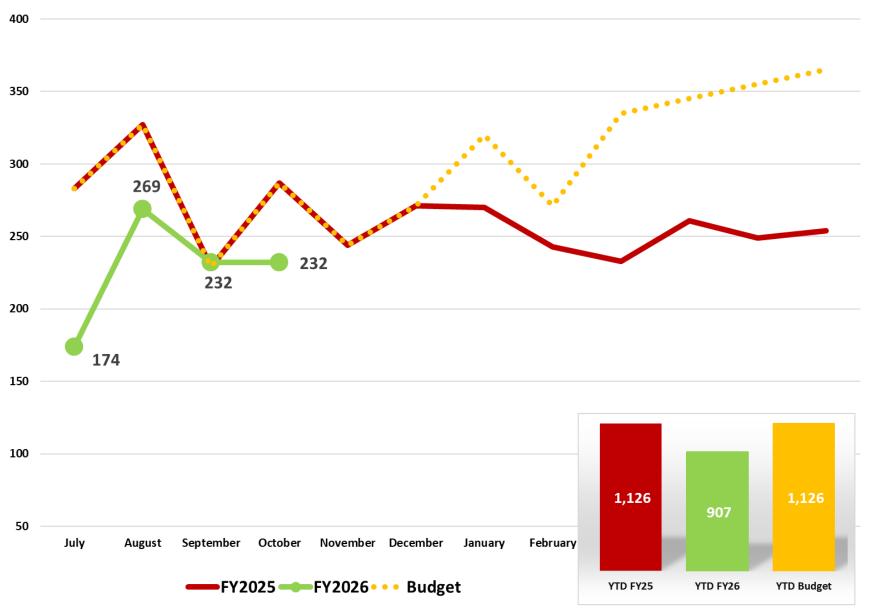
### Cardiac Rehabilitation



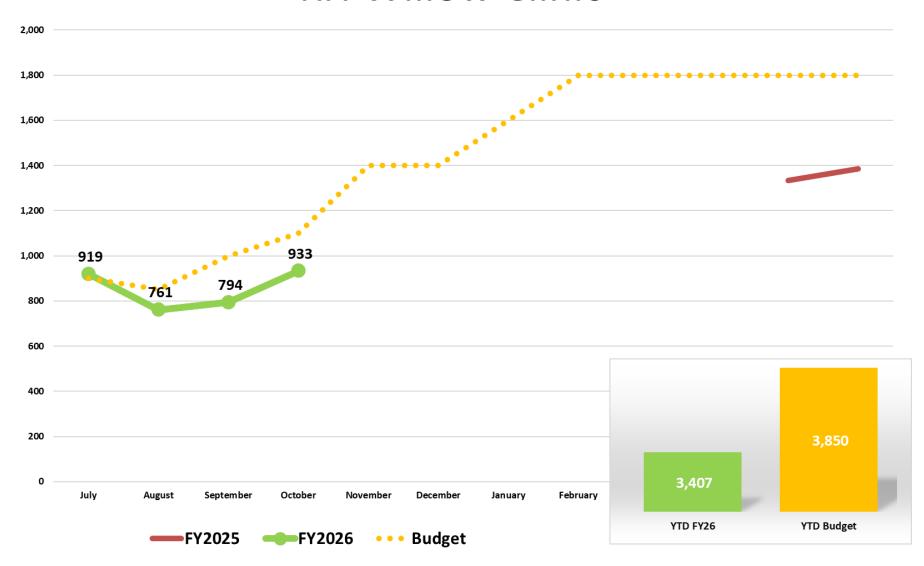
### KH Medical Clinic - Ben Maddox



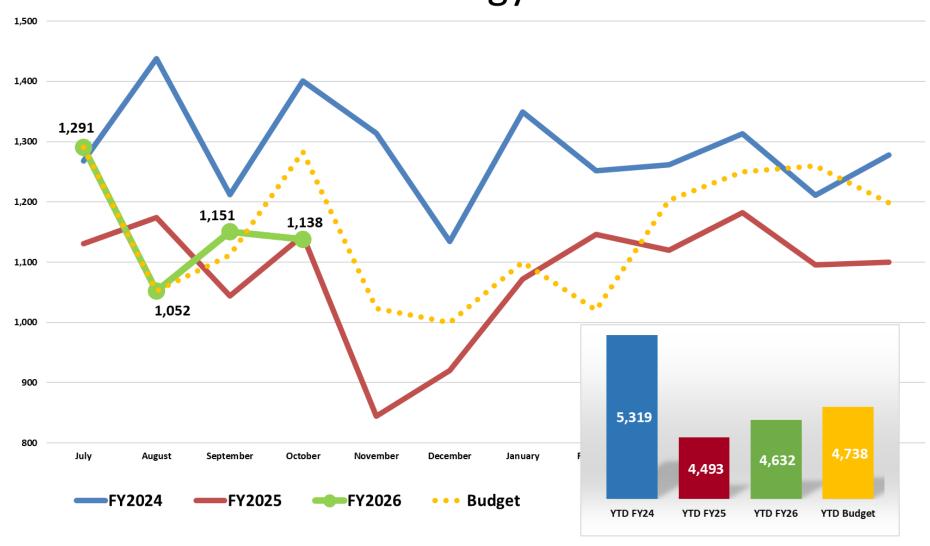
## KH Medical Clinic - Plaza



## **KH Willow Clinic**



# **Medical Oncology Treatments**



# **Medical Oncology Visits**



### Mental Wellness Clinic

