



SVHCD FINANCE COMMITTEE MEETING

AGENDA

TUESDAY, APRIL 28, 2026

5:00 p.m. Regular Session

**To Be Held in Person at
Sonoma Valley Hospital, 347 Andrieux Street
Administrative Conference Room
and via Zoom:**

<https://sonomavalleyhospital-org.zoom.us/j/93145185962?from=addon>

Meeting ID: 931 4518 5962

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In compliance with the Americans with Disabilities Act, the District will provide reasonable accommodations to persons with disabilities. If you require special accommodations to participate in a District meeting, please contact Whitney Reese at wreese@sonomavalleyhospital.org or 707-935-5035, at least 48 hours prior to the meeting, when possible.

MISSION STATEMENT

The mission of the SVHCD is to maintain, improve, and restore the health of everyone in our community.

1. CALL TO ORDER/ANNOUNCEMENTS	<i>Case</i>	
2. PUBLIC COMMENT SECTION	<i>Case</i>	
<i>At this time, members of the public may comment on any item not appearing on the agenda. It is recommended that you keep your comments to three minutes or less. Under State Law, matters presented under this item cannot be discussed or acted upon by the Board at this time. For items appearing on the agenda, the public will be invited to make comments at the time the item comes up for Board consideration.</i>		
3. CONSENT CALENDAR • Finance Committee Minutes 3.24.26	<i>Case</i>	Action <i>Pages 4-5</i>
4. INSURANCE REVIEW	<i>Armfield / Neil Plant / Jim Sprague</i>	Inform <i>Pages 6 - 17</i>
5. NOMINATION TO FINANCE COMMITTEE: DAVE PIER	<i>Case</i>	Action <i>Pages 18 - 19</i>
6. FY27 BUDGET UPDATE	<i>Armfield</i>	Inform
7. STRATEGIC PLAN UPDATE	<i>Armfield / Kaiser</i>	Inform <i>Pages 20 - 28</i>
8. FINANCIAL REPORTS FOR MONTH END MARCH 2026	<i>Armfield</i>	Inform <i>Pages 29 - 38</i>
9. ADJOURN	<i>Case</i>	



To: SVHCD Finance Committee
From: Ben Armfield, Chief Financial Officer
Date: April 28, 2026
Subject: April Agenda Overview & Key Considerations

As we head into our April meeting, this one-page overview is intended to orient the Committee to key discussion items, clarify where formal action is requested, and highlight important framing considerations as you review the packet materials.

This month's agenda is anchored by a **strong March financial performance**, alongside several important forward-looking discussions, including insurance coverage, FY27 budget development, and the recently updated strategic plan.

Insurance Review

We will open the meeting with a comprehensive review of the hospital's insurance program.

We have included summary materials in the packet, and we will be joined virtually by our brokers, **Neil Plant and Jim Sprague of James & Gable Insurance Brokers**, who will walk the Committee through our current coverage structure, market conditions, and overall program positioning.

The objective of this discussion is to provide:

- A clear understanding of our current coverage levels and structure
- Context on how our program compares within the current insurance market
- Insight into key risk areas and cost drivers

We expect this to be an interactive discussion, and welcome questions from the Committee.

Action Items for Committee Consideration:

Dave Pier

There is one action item this month: approval of **Dave Pier** to join the SVH Finance Committee.

Dave previously served as Executive Director of the SVH Foundation and brings deep knowledge of the hospital, its operations, and the broader Sonoma Valley community. His background in philanthropy, community engagement, and organizational leadership would provide valuable perspective to the Committee.

His resume has been included in the packet for your review.

Other Informational Items of Note:

March Finance Report – Strong Month, Driven by Core Operations

Management will provide an update on March financial performance, which represents one of the strongest months the hospital has experienced in recent history.

- Operating margin of approximately **\$1.1 million**, significantly above budget

- Operating EBDA of approximately **\$1.47 million**, nearly three times budget
- Net patient revenue exceeded budget by approximately **14%**, reflecting strong underlying volume

IGT was still a tailwind, but March's performance was primarily driven by strong core operating activity across the organization. Growth was broad-based, with particularly strong performance in imaging - including MRI volumes approaching 290 exams for the month, another all-time high - as well as emergency room volumes, which averaged approximately 37 patients per day, also a record level. Inpatient activity remained elevated and surgical volumes continued to trend upward as well.

Following March's performance, the hospital has returned to a slightly positive operating margin year-to-date, representing a meaningful improvement relative to both budget and prior year.

FY 2027 Budget Development

Management continues to make strong progress on the FY27 budget process.

Department-level reviews are nearing completion, and we are in the process of refining final assumptions, including volume, staffing, and expense targets.

We remain on track to present a comprehensive proposed budget at the **May 26 joint Finance Committee / Board meeting**. Tuesday's discussion will provide a high-level, verbal progress update and preview of key themes as we move toward finalization.

Strategic Plan Update

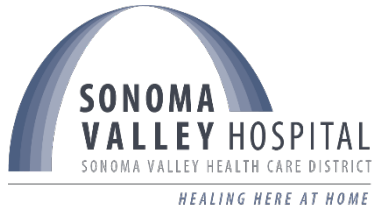
Management will provide an update on the recently developed strategic plan, which was presented to the Board during the late-March offsite retreat.

The plan outlines key organizational priorities and areas of focus over the next several years, with an emphasis on:

- Growth in core service lines
- Strategic partnerships and alignment opportunities
- Long-term operational and financial sustainability

We will provide an overview of the framework and key themes, with more detailed materials to follow.

Looking forward to seeing you all on Tuesday, 4/28 at 5:00. As always, please feel free to reach out in advance if you have questions or would like to flag topics for discussion.



SVHCD FINANCE & AUDIT COMMITTEE MEETING

MINUTES

TUESDAY, MARCH 24, 2026

In Person at Sonoma Valley Hospital

347 Andrieux Street

and Via Zoom Teleconference

Present	Not Present/Excused	Staff/Public	
Ed Case, in person Dennis Bloch, in person Paul Chakmak, in person Andrew Exner, in person Robert Crane, via zoom Alexis Alexandridis, MD MBA FACS, via zoom Catherine Donahue, via zoom	Graham Smith	Ben Armfield, SVH CFO, in person Kelley Kaiser, SVH CEO, in person Kimberly Drummond, SVH Chief of Support Services, in person Whitney Reese, SVH Board Clerk, in person Lois Fruzynski, SVH Accounting Manager, in person Leslie Petersen, SVH Foundation ED, in person Lynn McKissock, SVH Chief of HR, in person Dawn Castelli, SVH Community Outreach & Marketing Mngr, via zoom Wendy Lee Myatt, via zoom	
MISSION & VISION STATEMENT			
<i>The mission of SVHCD is to maintain, improve, and restore the health of everyone in our community.</i>			
AGENDA ITEM	PRESENTER	ACTIONS	
1. CALL TO ORDER/ANNOUNCEMENTS	<i>Ed Case</i>	Meeting called to order at 5:00 p.m.	
2. PUBLIC COMMENT SECTION	None		
3. CONSENT CALENDAR	<i>Ed Case</i>	Action	
Finance Committee Minutes 2.24.26	MOTION: Motion to approve by Bloch, 2 nd by Exner. All in favor.		
4. UCSF/SVH AFFILIATION AGREEMENT UPDATE	<i>Dennis Bloch</i>	Inform	
Newly signed Affiliation Agreement key updates include streamlined procedures for executive management expenses, Brown Act clarifications, and a shift toward "professional, clinical, and strategic services" focused on intentional collaboration in areas like recruitment and interoperability. Joint physician privileges and direct financial funding from UCSF are unlikely but the partnership will prioritize operational synergy and specific community health initiatives through the Joint Operating Committee (JOC) and Affiliation Oversight Committee (AOC).			
5. SESIMIC UPDATE	<i>Ben Armfield</i>	Inform	
SVH has submitted its seismic compliance plan and applied for a three-year extension under Assembly Bill 869, which could move the deadline from 2030 to 2033. Leadership remains cautious about the high costs and logistical disruptions of retrofitting versus building new, and they are closely monitoring state-level legislative changes that might provide further relief.			
6. FINANCIAL REPORTS FOR MONTH END FEBRUARY 2026	<i>Ben Armfield</i>	Inform	

In February, Armfield reported a strong financial rebound from a difficult January, returning to a positive EBDA and finishing nearly on budget despite the shorter month. Operating revenues exceeded the budget by nearly 10% (driven largely by an IGT increase) while the hospital's balance sheet saw a significant improvement with cash reserves rising to nearly \$7 million, allowing for a 30% reduction in accounts payable. SVH successfully completed a critical repair of its AC1 unit for under \$250k, avoiding an \$800k replacement and ensuring the operating rooms remained functional during a recent heatwave. Discussion also focused on the ROSA (Robotic Surgical Assistant), which achieved first-year cost savings but faces increased volume pressure in year two due to a new \$85k annual service contract.

7. ADJOURN

Ed Case

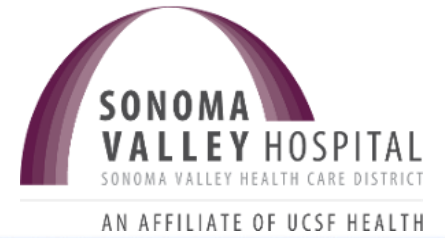
Meeting adjourned at 5:25 p.m.

5:26 p.m. CLOSED SESSION:

Calif. Government Code §37606 and 37624.3: TRADE SECRET; Discussion will concern proposed new service and/or program

5:55 p.m. Returned to Open Session: No action taken to report.

2025 Insurance Renewal Proposals



JAMES & GABLE
INSURANCE BROKERS

2025 Insurance Renewal Proposals

Executive Summary

Line of Coverage	Carrier	Policy Period	Limits	Deductible	7/1/24 – 7/1/25 Expiring	7/1/25 – 7/1/26 Renewal
Professional & General Liability (Hospital)	BETA	7/1/25 – 7/1/26	\$15M/\$25M	\$5K	\$400,591	\$412,612
Director & Officers Liability	BETA	7/1/25 – 7/1/26	\$3M	\$10K	\$112,009	\$136,723
Employment Practices Liability	BETA	7/1/25 – 7/1/26	Shared Limit	\$100K	Incl Above	Incl Above
Auto Liability	BETA	7/1/25 – 7/1/26	\$6M	\$250/\$500	\$2,071	\$2,071
Property	HARPP	7/1/25 – 7/1/26	\$125M	\$100K	\$334,965	\$314,125
Cyber Liability & Privacy Breach	HARPP	7/1/25 – 7/1/26	\$2M	\$50K	Incl Above	Incl Above
Crime	AIG	7/1/25 – 7/1/26	\$1M	\$25K	\$3,863	\$3,860
Fiduciary Liability	Hudson	7/1/25 – 7/1/26	\$1M	\$10K	\$5,470	\$5,638
Excess Workers' Compensation	Arch	7/1/25 – 7/1/26	Statutory	\$500K	\$112,543	\$110,883
Gross Premium					\$971,512	\$985,912
Annual Dividend					-\$9,142	-\$12,159
Net Premium					\$962,370	\$973,753

NOTES

- BETA PL/GL is billed monthly; all other insurance premiums are due within 30 days of policy inception
- BETA base rate and dividend updates (minimum change for all members):
 - PL/GL: 3% increase, D&O/EPL: 5% increase, Auto: flat
 - BETA rates continue to be more than 15% to 20% lower than the standard market
 - BETA Council approved a 26% reduction in dividends due to claims experience in the pool and rising reinsurance costs

2025 Insurance Renewal Proposals

Professional Liability & General Liability

Census Data

Category	7/1/23 – 7/1/24 Estimated	7/1/24 – 7/1/25 Fast Track	1/1/24 – 1/1/25 Actual	7/1/25 – 7/1/26 Fast Track
Acute Care Beds	3,290	3,290	2,691	3,290
Total High Acuity ER Visits	5,051	5,051	6,951	5,051
Total Low Acuity ER Visits	3,959	3,959	3,832	3,959
Outpatient Visits (excluding ER)	58,040	58,040	73,872	58,040
Counseling	1,342	1,342	3,293	1,342
Outpatient Surgeries	1,344	1,344	845	1,344
Inpatient Surgeries	188	188	117	188
Bariatric Surgeries	35	35	17	35
Total Occupied Bed Equivalents (OBEs)	73.0	73.0	83.9	73.0

NOTES

- Opted in to BETA's Fast Track option last year and participating in the program again this year with flat census exposures
- Actual OBEs for CY 2024 was 84, which is a 15% increase over the 73 OBEs used for renewal. This is approximately \$62K in exposure premium mitigation. BETA will require updated census for the 2026 renewal next year.

2025 Insurance Renewal Proposals

Hospital Professional Liability & General Liability

	7/1/24 – 7/1/25 Expiring	7/1/25 – 7/1/26 Renewal
Carrier	BETA	BETA
Limits	\$15M/\$25M	\$15M/\$25M
Deductible	\$5,000	\$5,000
Gross Premium	\$400,591	\$412,612
Annual Dividend	-\$9,142	-\$12,159
Net Hospital Premium	\$391,449	\$400,453

NOTES

- Professional Liability rates are increasing due to changes in the Medical Injury Compensation Reform Act (MICRA) as follows:
 - Previously, claim recovery of non-economic damages was limited to \$250K
 - The 2022 bill increased that limit to \$350K for non-death cases and \$500K for wrongful death cases effective 1/1/23 followed by incremental increases over 10 years to \$750K for non-death cases and \$1M for wrongful death cases. Currently \$430,000 non-death and \$600,000 wrongful death.
- Gross premium increasing 3% due to base rate increase applied to all BETA members
- Annual Dividend increasing from \$9,142 last year to \$12,159 this year (a 33% increase); will be paid in two installments in October 2025 and April 2026
- PL/GL renewal dividend pool is decreasing 13% this year, but Sonoma Valley Hospital's dividend is increasing 33% based on a new formula BETA is using this year that factors in years with BETA and loss ratio.
- SVH did not qualify for the ED Risk Management Initiative Credit this year
- 2024-2025 Risk Management Resource Funds: \$3,589 remaining as of 6/23/25
2025-2026 Risk Management Resource Funds: \$3,697

2025 Insurance Renewal Proposals

Professional Liability & General Liability

Loss Experience as of 6/1/25

Policy Period	Hospital		Emergency Dept		TOTAL	
	Claims	Total Incurred	Claims	Total Incurred	Claims	Total Incurred
2012-2013	1	\$15,154	5	\$1,041,335	6	\$1,056,489
2013-2014	3	\$39,828	1	\$0	4	\$39,828
2014-2015	4	\$437,009	4	\$187,519	8	\$624,529
2015-2016	0	\$0	1	\$291	1	\$291
2016-2017	1	\$43,575	2	\$15,438	3	\$59,013
2017-2018	0	\$0	3	\$1,653	3	\$1,653
2018-2019	2	\$18,936	1	\$400	3	\$19,336
2019-2020	3	\$338,751	0	\$0	3	\$338,751
2020-2021	1	\$60,000	6	\$179	7	\$60,179
2021-2022	2	\$253,900	0	\$0	2	\$253,900
2022-2023	4	\$40,026	0	\$0	4	\$40,026
2023-2024	1	\$0	0	\$0	1	\$0
2024-2025	3	\$0	0	\$0	3	\$0
	25	\$1,247,179	23	\$1,246,815	48	\$2,493,994

NOTES

- The poor 2012-2013 policy year with \$1,056,489 total incurred losses moved outside of the 10-year loss experience period (2014-2023) last year. This helps the hospital's 10-year loss ratio.

2025 Insurance Renewal Proposals

Directors & Officers Liability and Employment Practices Liability

	7/1/24 – 7/1/25 Expiring	7/1/25 – 7/1/26 Renewal Option 1	7/1/25 – 7/1/26 Renewal Option 2	7/1/25 – 7/1/26 Renewal Option 3
Carrier	BETA	BETA	BETA	BETA
D&O Limit	\$3M Shared	\$3M Shared	\$5M Shared	\$5M Separate
EPL Limit	\$3M Shared	\$3M Shared	\$3M Shared	\$3M Separate
D&O Deductible	\$10,000	\$10,000	\$10,000	\$10,000
EPL Deductible	\$100,000	\$100,000	\$100,000	\$100,000
Premium	\$112,009	\$136,723	\$147,529	\$165,975

NOTES

- BETA quoted the three options requested by the SVH board in our April 3rd meeting
- Premium is increasing 25% due to a 5% base rate increase and an additional 20% due to SVH's adverse loss experience (see Loss Experience table below); current 10-year loss ratio is 266%

Loss Experience

Policy Period	Premium	Claims	As of 5/31/24	As of 6/23/25
2013-2014	\$27,489	0	\$0	\$0
2014-2015	\$27,489	2	\$50,974	\$50,974
2015-2016	\$26,402	1	\$43,720	\$43,720
2016-2017	\$28,279	0	\$0	\$0
2017-2018	\$28,400	0	\$0	\$0
2018-2019	\$29,820	3	\$547,900	\$547,900
2019-2020	\$32,803	1	\$185,032	\$185,032
2020-2021	\$39,035	1	\$313,993	\$313,993
2021-2022	\$55,039	4	\$398,786	\$464,103
2022-2023	\$68,799	0	\$0	\$0
2023-2024	\$87,375	0	\$0	\$0
2024-2025	\$109,378	0	-	
	\$560,308	12	\$1,540,404	\$1,605,721

2025 Insurance Renewal Proposals

Auto Liability

	7/1/24 – 7/1/25 Expiring	7/1/25 – 7/1/26 Renewal
Carrier	BETA	BETA
Combined Single Limit	\$6M	\$6M
Comprehensive Deductible	\$250	\$250
Collision Deductible	\$500	\$500
Premium	\$2,071	\$2,071

NOTES

- BETA is keeping the base rate flat again this year
- Coverage for one vehicle (2012 Chevy Colorado) and Hired & Non-Owned Auto Liability

2025 Insurance Renewal Proposals

Property / Pollution / Cyber Liability

	7/1/24 - 7/1/25 Expiring	7/1/25 - 7/1/26 Renewal
Carrier	HARPP	HARPP
Total Insurable Value <i>Valuation Basis: Repair or Replacement Cost</i>	\$173,677,119	\$176,338,332
Annual Premium	\$334,965	\$314,125
All Risk Limit <i>All Perils & Coverages, subject to Sublimits listed below</i>	\$125,000,000	\$125,000,000
Deductible - All Other Perils	\$100,000	\$100,000
Deductible - Wildfire	\$250,000	\$250,000
Flood	Not Covered	Not Covered
Earthquake	Not Covered	Not Covered
Business Interruption	All Risk Limit	All Risk Limit
Extra Expense	\$50,000,000	\$50,000,000
Business Interruption/Extra Expense Waiting Period	24 Hours	24 Hours
Miscellaneous Unnamed Locations	\$5,000,000	\$5,000,000
Course of Construction	\$25,000,000	\$25,000,000
Increased Cost of Construction (Code/Ordinance)	\$50,000,000	\$50,000,000
Communicable Disease	Not Covered	Not Covered
Boiler Explosion & Machinery Breakdown Limit	\$100,000,000	\$100,000,000
Boiler Explosion & Machinery Breakdown Deductible	\$25,000	\$25,000
Pollution Liability Limit	\$2,000,000	\$2,000,000
Pollution Liability Retention	\$50,000	\$50,000
Cyber Liability Limit	\$2,000,000	\$2,000,000
Breach Response Sublimit*	\$1,000,000	\$1,000,000
Business Interruption Sublimit	\$750,000	\$750,000
Cyber Extortion (Ransomware) Sublimit	\$750,000	\$750,000
Cyber Crime (Phishing, Fraudulent Transfers) Sublimit	\$75,000	\$75,000
Cyber Liability Retention	\$50,000	\$50,000

*Breach Response sublimit drops to \$500K if Beazley service providers are not used

2025 Insurance Renewal Proposals

Property / Pollution / Cyber Liability

NOTES

- Total Insurable Values increasing from \$173,677,119 to \$176,338,332: HARPP applied inflation trend factors of 2.01% to Building values and 1.51% to Business Personal Property values
- The property insurance market continued to stabilize over the past year
- Net Rate decreasing 7.6%

Statement of Values

Policy Loc No.	Address	City, ST ZIP	Description	Real Property	Business Personal Property	BI/Rents	Total Insurable Value
1	347 Andrieux St	Sonoma, CA 95476	Hospital	\$98,387,656	\$36,386,082	\$30,901,781	\$165,675,519
1B	347 Andrieux St	Sonoma, CA 95476	West Wing	Included Above	Included Above	Included Above	Included Above
1C	347 Andrieux St	Sonoma, CA 95476	East Wing	Included Above	Included Above	Included Above	Included Above
1D	347 Andrieux St	Sonoma, CA 95476	Central Wing	Included Above	Included Above	Included Above	Included Above
1E	347 Andrieux St	Sonoma, CA 95476	Mobile MRI (Modular Van)	\$1,264,547	\$0	\$0	\$1,264,547
1H	347 Andrieux St	Sonoma, CA 95476	New Wing	Included Above	Included Above	Included Above	Included Above
1I	347 Andrieux St	Sonoma, CA 95476	Outpatient Diagnostic Center	\$6,923,058	\$1,593,599	Included Above	\$8,516,657
16	19312 Sonoma Hwy	Sonoma, CA 95476	Physical Therapy/Finance	\$0	\$431,840	\$0	\$431,840
17	853 W 4th St	Sonoma, CA 95476	South Parking Lot	\$70,346	\$0	\$0	\$70,346
18	462 W Napa St	Sonoma, CA 95476	Medical Offices	\$0	\$131,662	\$0	\$131,662
20	270 Perkins St	Sonoma, CA 95476	Sonoma Valley Family Practice	\$0	\$247,761	\$0	\$247,761
				\$106,645,607	\$38,790,944	\$30,901,781	\$176,338,332

2025 Insurance Renewal Proposals

Crime Insurance

	7/1/24 – 7/1/25 Expiring	7/1/25 – 7/1/26 Renewal
Carrier	AIG	AIG
Limit	\$1M	\$1M
Deductible	\$25K	\$25K
Premium	\$3,863	\$3,860

Fiduciary Liability

	7/1/24 – 7/1/25 Expiring	7/1/25 – 7/1/26 Renewal
Carrier	Hudson Ins Co	Hudson Ins Co
Limit	\$1M	\$1M
Retention	\$10K	\$10K
Premium	\$5,470	\$5,638

NOTES

- Insured Plans:
 - Sonoma Valley Health Care District Retirement and Savings Plan
 - Sonoma Valley Health Care District 457 Deferred Compensation Plan
 - VALIC 403(b)
 - VALIC 457

2025 Insurance Renewal Proposals

Excess Workers' Compensation

	7/1/23 – 7/1/25 Expiring	7/1/25 – 7/1/26 Renewal Option 1	7/1/25 – 7/1/27 Renewal Option 2
Carrier	Arch	Arch	Arch
Limit	Statutory	Statutory	Statutory
Self-Insured Retention	\$500K	\$500K	\$500K
Estimated Annual Payroll	\$22,445,688	\$22,114,617	\$22,114,617
Net Rate	\$0.50	\$0.50	\$0.50
Deposit Premium	\$112,543*	\$110,883	\$110,883*
Minimum Premium	\$101,289*	\$99,795	\$99,795*

**Per Year; billed in two annual installments*

NOTES

- Flat rate renewal
- Arch has offered another two-year renewal option to lock in the \$0.50 rate until 7/1/27 regardless of losses, changes in market conditions, etc.

2025 Insurance Renewal Proposals

Excess Workers' Compensation

Loss Experience

Policy Period	Claims	As of 5/31/24	As of 3/31/25
2012-2013	4	\$113,404	\$113,404
2013-2014	7	\$240,398	\$240,398
2014-2015	6	\$15,533	\$15,533
2015-2016	6	\$231,891	\$231,891
2016-2017	13	\$427,945	\$427,945
2017-2018	10	\$168,034	\$168,034
2018-2019	17	\$223,228	\$223,228
2019-2020	12	\$290,544	\$290,544
2020-2021	15	\$194,781	\$204,260
2021-2022	11	\$145,081	\$134,654
2022-2023	8	\$73,530	\$85,233
2023-2024	9	\$147,187	\$263,538
2024-2025	3		\$1,857
Total	121	\$2,271,555	\$2,400,519
Average	9.8	\$189,296	\$184,655

Dave Pier

Sonoma, CA

Phone: 707.320.3017 E-Mail: davepier@gmail.com

LinkedIn: <http://www.linkedin.com/in/dave-pier-72913210>

Objective

Become a member of SVHCD finance committee

Experience

Larry L. Hillblom Foundation, Executive Director [2024-present]

Manage all aspects of philanthropic foundation that primarily supports medical research in California, with a focus on age degenerative diseases and diabetes.

Sonoma Valley Hospital Foundation, Executive Director [2015-2024]

Led the rebuilding of the organization through Board development and community outreach. Responsible for all aspects of the organization including community relations & fundraising, grant making and oversight, strategic vision and planning, board development, staff development, governance, and fiscal oversight. Positioned SVHF for success through leading, planning, and executing all phases of a \$21 million capital campaign for a diagnostic center. Improved ongoing relationships and trust with key stakeholders through relationship building. Led successful branding initiative for the hospital. Established as an integral member of the hospital's executive team.

Boys & Girls Clubs of Sonoma Valley, CEO [2007-2015]

Supervised and led all aspects of a \$2.4M organization including 50 staff and 36 volunteer board and committee members. Built excellent community relations, driving a collaborative approach to program impact. Led the organization from precarious standing in 2007 to financial stability during the economic downturn. Improved the programs, infrastructure, and public perception of the Club through effective strategic planning, community relations, and leadership of board & staff. Developed new programs to meet community needs, including *College Bound*. Led and implemented the governance restructure of the board of directors. Grew the organization from <\$1M with two sites serving 230 youth daily, to \$2.4M with five locations serving 600 daily. Developed a strong and effective leadership team.

Hanna Boys Center [1995-2007]

Supervised all aspects of the residential setting for youth and their well being. Integral contributor to the tactical implementation of increasing the Center's involvement with the surrounding community. Coordinated outdoor educational and volunteer opportunities.

Other Relevant Experience

- Member of Council on Foundations (2025)
- Member of Northern California Grantmakers (2020-present)
- Member of Executive Director Roundtable (2007-2024)
- Member of Rotary Club International (2007-2021). Board member 2008-2012, 2016.
- Volunteer with Sonoma Catalyst Fund (2020-2022)
- Member of Sonoma Valley Health Roundtable (2011-2019)
- Board member of The Presentation School (2015-2019)
- Board member (2011-2013) of the Sonoma Valley Fund, a CFSC affiliate
- Member of the Sonoma Valley Community Advisory Council (2005-2012)
- Proficiency in Microsoft Office Suite.
- Graduating member of the Association of Healthcare Philanthropy Madison Institute (2016), Sonoma Leadership Systems (2011), Advanced Leadership Program through Boys & Girls Clubs of America (2009), and Sonoma Valley Leadership (2005) through the Chamber of Commerce.

Education

M.A., Counseling Psychology from Sonoma State University

B.A., Psychology, minor in Sociology from College of Notre Dame (Notre Dame de Namur University)

Skills & Interests

- A collaborator, consensus builder, and planner who is committed to results. Ability to understand the tactical details, with a focus on strategic objectives, and possess the leadership skills to help others successfully strive toward a common goal.
- Deep appreciation for the impact that philanthropy can have on a community and clear understanding of the need for ongoing investment in critical organizations as well as expanding the horizon for new ideas and solutions to community issues.
- Love for continued education, cycling, hiking, diving, traveling, volunteering, guitar, gardening, reading, and family time.

2026 STRATEGIC PLAN UPDATE





HEALING HERE AT HOME: Advancing Our Care

We've made exceptional advances in our ability to serve our community: a new 3T MRI, advanced orthopedic and robotic technologies, and expanded diagnostic capabilities.

COMMUNITY PARTNERSHIPS & HEALTHY AGING:

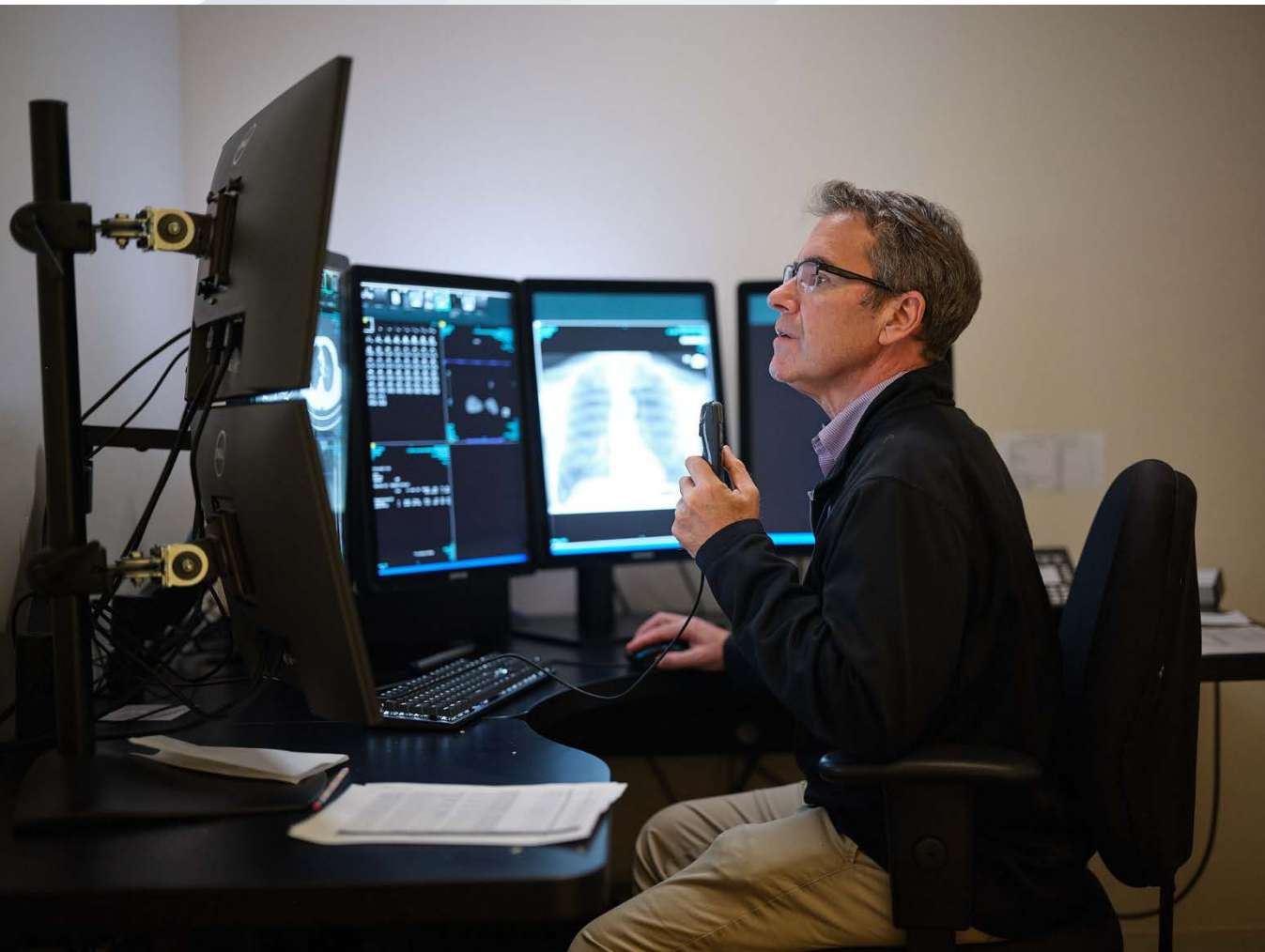
Active Aging Wellness: Partnering with Vintage House, the series remains a popular community education program focused on vitality, resilience, and quality of life as we age.

Golden Harvest Senior Resource & Wellness Faire: Co-produced with Vintage House and Sonoma Community Center, the event connected older adults, families, and caregivers with a wide range of local organizations offering support in health, housing, and caregiving.

High Patient Satisfaction Across Services: During 2025, all participating departments received average scores of 4.69 or higher out of 5, demonstrating strong performance across emergency, inpatient, outpatient, and diagnostic services.



ADVANCING CARE THROUGH TECHNOLOGY:



ROSA Robotic System: The addition of the ROSA brings a new level of precision to joint replacement surgery. ROSA blends detailed imaging with real-time data, allowing surgeons to tailor procedures to each patient's anatomy.

Stryker Navigation System: Upgrades to our Stryker navigation system enhance accuracy and confidence in orthopedic and spine procedures. This technology supports safer procedures, improved outcomes, and expanded access to advanced surgical capabilities without the need to travel outside the community.

New Breast Ultrasound Technology: This year, SVH expanded its women's imaging program with a new advanced breast ultrasound system, offering clearer images, faster exams, and greater comfort for patients.

3T MRI – A New Standard in Imaging: Our 3T MRI represents one of SVH's most significant diagnostic advancements. With a powerful magnet and advanced coils, the 3T MRI produces exceptionally detailed images in less time, improving accuracy across neurological, orthopedic, abdominal, cardiac, and breast imaging.

GROWING DEMAND & EXPANDING ACCESS TO CARE:

- **Broad-based growth** across core services, reflecting rising community demand
- **Higher acuity care** increasing - ER (+25%), Surgeries (+28%), Inpatient Volumes (+20%)
- **Diagnostics driving growth** - Lab (+23%), MRI (+22%), Imaging (+13%)
- **3T MRI impact** already visible in imaging volumes
- **More care staying local** as services and capabilities expand
- **Significant growth** in patient volumes – We are caring for more patients in the Valley than ever before



FROM STABILIZATION TO SUSTAINABILITY:



- Hospital now cash flow positive - a major milestone
- **Positive operating margin** through the first six months of FY26 – a first for the hospital
- **Strong revenue growth** (+17%) outpacing expense growth (+10%)*
- Operating **performance improved significantly** – Annualized EBDA up to \$6.0M (from \$1.9M in FY25)
- Supplemental funding **growth accelerating** (\$3M in FY24 → \$7M in FY25 → \$12M in FY26)
- Hospital transitioning from **stabilization to long-term sustainability**

** Expense growth includes supplemental funding matching payments; excluding these, expenses increased ~5%, consistent with higher patient volumes*

Snapshot

SONOMA VALLEY HOSPITAL

Fiscal year July 1, 2024 to June 30, 2025

*Fiscal Year July 1, 2025 to December 31, 2025



136,187

Lab Tests
*83,923

2,232*

MRIs
*IP and OP Visits
*1,356

1,666

Cardiopulmonary
Treatments

6,259

CT Scans
*2,964

3,136

Wound Care Visits

3,295

Mammography
Visits
*1,566

49,833*

Rehab Treatments
*PT, OT, and SLP
*24,246

3,377

Occupational Health
Treatments | *1,644

SVH
TEAM

363
Employees

106
Registered
Nurses

\$27.7M
Annual Payroll

2026 – 2028 OBJECTIVES | STRATEGIES



CONNECTED CULTURE (New pillar)

Internal Alignment, collaboration, and Staff engagement

Foster a culture of collaboration, resilience and shared purpose



COMMUNITY ENGAGEMENT (🚗 Bring care into the community)

Partnerships, outreach, and responsiveness to community needs

Strengthen relationships and collaborate to meet evolving community health needs



SUSTAINABILITY (♻️ Sustainability)

Financial health, Operational efficiency, and long-term viability

Ensure financial stability through efficient operations and strategic partnerships, including seismic compliance



QUALITY & ACCESS (🏥 Realign our main campus)

Focus on clinical excellence, patient safety and experience and access to care

Deliver high-quality, safe care and expand access through innovative models



The Path Forward

SONOMA VALLEY HOSPITAL Strategic Plan



- QUALITY & ACCESS**
- Quality/Experience Metrics
 - Transfer Strategy
 - Primary/Specialty Access

- COMMUNITY ENGAGEMENT**
- Community Outreach
 - Marketing and Outreach
 - % Population Served

- CONNECTED CULTURE**
- Excellence Awards
 - Cascading Communication
 - Leadership Rounding

- SUSTAINABILITY**
- Meet or Beat Budget
 - Optimize IGT/Rate Range Programs
 - Seismic Compliance & Long-Term Facility Strategy

Mission Statement To restore, maintain and improve the health of everyone in our community

Vision Statement A trusted resource for compassionate, exceptional healthcare



To: SVHCD Finance Committee
 From: Ben Armfield, Chief Financial Officer
 Date: April 28, 2026
 Subject: Financial Report for March 2026

OVERALL PERFORMANCE SUMMARY | MONTH OF MARCH 2026

- **Operating Performance** – March represents one of the strongest months the hospital has experienced in recent history, driven by broad-based growth across both inpatient and outpatient services.

The hospital posted an operating margin of approximately **\$1.1 million**, significantly exceeding the budgeted \$112,000. In addition, Operating EBDA totaled approximately **\$1.47 million**, nearly three times the budgeted level of \$526,000.

While the magnitude of the performance is notable, the more important takeaway is the quality and composition of the month. Unlike prior periods where favorable results were largely driven by IGT timing, March’s performance was supported by strong core operating activity across multiple service lines, reflecting both sustained demand and improved operational execution.

This performance reflects a meaningful step forward in the hospital’s financial trajectory and brings year-to-date operating performance back to approximately break-even, with a modest positive operating margin of ~\$41,000 through the first three quarters of the fiscal year.

	Current Month				Year-To-Date				PY Actual	Var	%
	Actual	Budget	Var	%	Actual	Budget	Var	%			
Operating Margin	\$ 1,108.5	\$ 112.4	\$ 996.1	887%	\$ 40.9	\$ (2,801.1)	\$ 2,842.0	101%	\$ (3,600.1)	\$ 3,641.0	101%
Operating EBDA	\$ 1,472.1	\$ 525.7	\$ 946.4	180%	\$ 4,164.7	\$ 1,669.0	\$ 2,495.6	150%	\$ 1,124.8	\$ 3,039.9	270%
Net Income (Loss)	\$ 1,373.3	\$ 268.2	\$ 1,105.1	412%	\$ 2,336.1	\$ (1,398.2)	\$ 3,734.3	267%	\$ (1,906.1)	\$ 4,242.2	223%

- **Operating Revenues - \$8.2 Million**, significantly outpacing budget by **17%** or approximately **\$1.2 million**.

Importantly, unlike prior months where favorable performance was primarily driven by IGT program activity, March’s results were driven by core operating performance. Net patient revenue (excluding IGT) exceeded budget by approximately **14%**, reflecting a significant increase in underlying volume and activity levels across the organization.

The hospital also achieved an all-time high in gross charges, surpassing \$36 million for the first time. This growth was broad-based, with strong performance across emergency services, inpatient care, imaging, physical therapy, and surgical services. On a volume basis:

- Emergency Department volumes reached an all-time high of **1,147 visits**, or approximately **37 visits per day**.
- Outpatient activity increased significantly, particularly within imaging and rehab services.
- Inpatient utilization remained strong, with sustained elevated census levels.

This level of performance reflects not only strong demand, but also improved operational execution across multiple service lines.

- **Operating Expenses - \$7.1 Million**, which exceeded budget by approximately **2%**, or **\$165,000**.

Expense performance remained well controlled relative to the significant increase in volume. Labor costs were below budget for the month, reflecting improved staffing alignment, while professional fees also trended favorably.

As expected, expenses continued to normalize following elevated levels in January related to one-time items and benefit timing. Interest expense also declined materially to approximately **\$25,000** (had been running ~\$70,000 monthly since December), following the full repayment of the line of credit in February.

Excluding IGT program expense, total operating expenses were approximately **2% below budget**, reinforcing that underlying cost structure remains well managed despite increased activity levels.

- **Year-To-Date Performance** - Through the first nine months of the fiscal year, performance remains strong and continues to trend positively.
 - Operating revenues are approximately **10% above budget**.
 - Operating expenses are approximately **5% above budget**.

Operating EBDA totals approximately **\$4.2 million** year-to-date, significantly exceeding budget and prior year levels.

Following March's strong performance, the hospital has returned to a slightly positive operating margin year-to-date, a meaningful improvement compared to both budgeted expectations and prior year performance, which reflected a significant operating loss through the same period.

Underlying operating performance also remains favorable when excluding IGT activity, with net patient revenue approximately **10% above budget** and operating expenses (excluding IGT) approximately **4% above budget**, reflecting continued positive momentum in core operations.

- **Cash** – Cash at month-end totaled approximately **\$5.7 million**, with Days Cash on Hand of **36.5 days**.

As discussed last month, February reflected a temporary spike in cash driven by the receipt of Rate Range IGT funds, which increased Days Cash from 13.4 to 42.6. March represents a normalization from that elevated level.

Days Cash remains above prior forecast at 36.5 days (vs. ~33 days projected), and overall liquidity remains stable.

Overall, liquidity remains stable and meaningfully improved relative to earlier in the fiscal year, and the organization continues to operate from a significantly stronger financial position following the repayment of the line of credit and normalization of vendor obligations.

DRIVERS IN MONTHLY PERFORMANCE

- **Inpatient Activity** - Inpatient volumes remained strong, with Average Daily Census of approximately **10.7**, continuing the trend of sustained elevated utilization
- **Emergency Department** - Emergency Department volumes reached an all-time high, with **1,147 visits** during the month, equating to approximately **37 visits per day**. This represents a significant increase relative to historical averages and reflects continued growth in demand for emergency services.
- **Outpatient Activity** - March represented a strong month for outpatient services, with total visits exceeding budget by approximately **10%**.

- **Imaging** – Imaging volumes increased significantly across all major modalities, including MRI, CT, ultrasound, and mammography, representing one of the strongest months to date.

A key driver of this performance was the introduction of **Saturday MRI coverage**, where the hospital opened additional capacity on select weekends during the month. This operational change proved highly effective, directly contributing to increased access and utilization.

As a result, MRI volumes reached **287 exams in March**, establishing a new all-time high and exceeding the prior peak by approximately 15%.

This is a strong validation that expanded access - particularly through weekend availability - can drive meaningful incremental volume. Based on early results, management is evaluating opportunities to continue and potentially expand this approach.

- **Surgical Volumes** – Surgical volumes continued to recover, with 150 total cases performed. This represents continued improvement from January and February levels. While still approximately 5% below budget, the upward trend reinforces that January represented a temporary low point, with volumes continuing to normalize.

OTHER FINANCE UPDATES

FY27 Budget Process

Management continues to make strong progress on the FY27 budget development process. Department-level meetings are nearing completion, with final assumptions and adjustments to be refined over the coming weeks.

The proposed budget will incorporate key strategic initiatives and targeted investments aligned with the hospital's long-term priorities, with a continued emphasis on growth in core service lines. Management remains on track to present a balanced and actionable budget consistent with organizational expectations at the end of May.

Capital Needs Assessment

Management has initiated a comprehensive review of capital needs across the organization, encompassing both short-term equipment requirements and longer-term infrastructure priorities.

This effort is intended to support the development of a more structured and prioritized multi-year capital plan, which will be incorporated into the FY27 budget and inform broader long-range planning efforts.

Legacy MRI Unit

The hospital is currently working with a prospective vendor regarding the sale of the existing 1.5T MRI unit (located on-site, adjacent to the front entrance of the hospital). The process is progressing, with final inspection and coordination of removal activities anticipated in the coming weeks.

MRI Volumes and UCSF Collaboration

Management has formalized a joint workgroup with UCSF focused on redirecting a portion of their existing MRI backlog to Sonoma Valley Hospital.

While still in early stages, this initiative is expected to support incremental and more consistent volume growth by leveraging SVH capacity and UCSF demand constraints. Further updates will be provided as the program develops.

Foundation Capital Support

We are pleased to report that the Foundation recently approved reimbursement for two critical capital investments: the Stryker operating room equipment and Mindray telemetry monitoring system replacements.

This represents a meaningful benefit to the hospital. These were essential investments that directly support patient care and operational capability, and would have been very difficult to execute without Foundation support. We are extremely grateful for the partnership and financial backing that made these projects possible.

Chief Medical Officer Update

Dr. Patrick Okolo, our Chief Medical Officer, is expected to begin clinical practice in the community by the end of April.

He will transition to a 50/50 split between his Chief Medical Officer responsibilities and clinical practice as a gastroenterologist. This structure is consistent with the original design of the role and allows for continued clinical engagement alongside his leadership responsibilities.

FINANCE REPORT ATTACHMENTS:

- Attachment A Income Statement
- Attachment B Balance Sheet
- Attachment C Cash Flow Forecast
- Attachment D Key Performance Indicators | Volumes & Statistics
- Attachment E Key Performance Indicators | Overall Performance

Sonoma Valley Health Care District
Income Statement (in 1000s)
For the Period Ended March 31, 2026

ATTACHMENT A

	Month				Year-To- Date						
	CYM Actual	CYM Budget	Var	%	YTD Actual	YTD Budget	Var	%	PYTD Actual	Var	%
Revenues											
1 Net Patient Revenue	\$ 5,621.0	\$ 4,939.6	681.4	14%	\$ 41,802.1	\$ 38,055.0	3,747.1	10%	\$ 37,835.8	3,966.3	10%
2 IGT Program Revenue	2,125.9	1,653.7	472.3	29%	16,814.9	14,883.2	1,931.8	13%	9,119.4	7,695.6	84%
3 Parcel Tax Revenue	316.7	316.7	(0.0)	0%	2,850.0	2,850.0	(0.0)	0%	2,850.0	(0.0)	0%
4 Other Operating Revenue	107.8	99.9	7.9	8%	901.6	898.9	2.6	0%	917.5	(16.0)	-2%
5 Total Revenue	\$ 8,171.4	\$ 7,009.8	1,161.6	17%	\$ 62,368.6	\$ 56,687.2	5,681.4	10.0%	\$ 50,722.7	11,645.9	23%
Operating Expenses											
6 Labor / Total People Cost	\$ 3,052.0	\$ 3,195.2	(143.2)	-4%	\$ 28,862.7	\$ 27,516.9	1,345.7	5%	\$ 26,362.7	2,500.0	9%
7 Professional Fees	689.3	748.5	(59.2)	-8%	6,538.9	6,251.3	287.6	5%	6,154.1	384.8	6%
8 Supplies	804.9	717.5	87.5	12%	6,583.2	6,253.4	329.8	5%	5,767.4	815.7	14%
9 Purchased Services	679.4	634.0	45.4	7%	4,453.6	4,166.2	287.4	7%	3,646.5	807.1	22%
10 Depreciation	363.6	413.3	(49.7)	-12%	4,123.8	4,470.1	(346.3)	-8%	4,724.9	(601.1)	-13%
11 Interest	25.6	21.6	4.1	19%	465.4	445.8	19.6	4%	330.6	134.8	41%
12 Other	387.7	402.7	(15.0)	-4%	3,531.8	3,502.8	29.0	1%	3,378.0	153.8	5%
13 IGT Program Expense	1,060.2	764.6	295.6	39%	7,768.4	6,881.7	886.7	13%	3,958.6	3,809.8	96%
14 Operating Expenses	\$ 7,062.8	\$ 6,897.4	165.4	2.4%	\$ 62,327.7	\$ 59,488.2	2,839.5	4.8%	\$ 54,322.8	8,004.9	15%
15 Operating Margin	\$ 1,108.5	\$ 112.4	\$ 996.1	887%	\$ 40.9	\$ (2,801.1)	\$ 2,842.0	101%	\$ (3,600.1)	\$ 3,641.0	101%
Non Operating Income											
16 GO Bond Activity, Net	235.2	128.6	106.5	83%	1,947.5	1,157.7	789.8	68%	1,454.2	493.2	34%
17 Misc Revenue/(Expenses)	29.7	27.2	2.4	9%	347.7	245.2	102.5	42%	239.7	108.0	45%
18 Total Non-Op Income	\$ 264.8	\$ 155.9	108.9	70%	\$ 2,295.2	\$ 1,402.8	892.3	64%	\$ 1,693.9	601.2	35%
19 Net Income (Loss)	\$ 1,373.3	\$ 268.2	1,105.1	412%	\$ 2,336.1	\$ (1,398.2)	3,734.3	267%	\$ (1,906.1)	4,242.2	223%
20 Restricted Foundation Contr.	-	125.0	(125.0)	-100%	1,953.2	1,125.0	828.2	74%	2,105.5	(152.3)	-7%
21 Change in Net Position	\$ 1,373.3	\$ 393.2	980.1	249%	\$ 4,289.3	\$ (273.2)	4,562.5	1670%	\$ 199.4	4,089.9	2051%
22 Operating EBDA	\$ 1,472.1	\$ 525.7	946.4	180%	\$ 4,164.7	\$ 1,669.0	2,495.6	150%	\$ 1,124.8	3,039.9	270%

Sonoma Valley Health Care District

ATTACHMENT B

Balance Sheet
As of March 31, 2026
 Expressed in 1,000s

	<u>Current Month</u>	<u>Prior Month</u>	<u>FYE 2025 Prior Year</u>
Assets			
Current Assets:			
1 Cash	\$ 5,697.8	\$ 6,653.4	\$ 4,386.3
2 Net Patient Receivables	9,238.6	8,255.6	7,585.8
3 Allow Uncollect Accts	(1,191.5)	(1,240.3)	(1,256.1)
4 Net Accounts Receivable	\$ 8,047.2	\$ 7,015.3	\$ 6,329.7
5 IGT Program Receivable	891.8	891.8	-
6 Parcel Tax Receivable	1,744.6	1,744.6	-
7 GO Bond Tax Receivable	1,626.6	1,626.6	-
8 Other Receivables	1,004.9	836.9	1,423.3
9 Inventory	969.5	978.2	841.0
10 Prepaid Expenses	1,130.8	1,205.1	788.1
11 Total Current Assets	\$ 21,113.1	\$ 20,951.8	\$ 13,768.5
12 Property, Plant & Equip, Net	\$ 60,260.6	\$ 59,955.9	60,342.6
13 Trustee Funds - GO Bonds	4,838.9	5,017.2	5,986.7
14 Other Assets - Deferred IGT Expense	3,559.9	4,645.1	-
15 Total Assets	<u>\$ 89,772.5</u>	<u>\$ 90,569.9</u>	<u>\$ 80,097.8</u>
Liabilities & Fund Balances			
Current Liabilities:			
16 Accounts Payable	5,650.7	\$ 4,642.1	\$ 7,282.7
17 Accrued Compensation	4,941.7	4,560.1	4,059.9
18 IGT Program Payable	242.0	242.0	-
19 Interest Payable - GO Bonds	41.0	201.0	154.4
20 Accrued Expenses	581.1	853.0	166.1
21 Deferred IGT Revenue	7,177.5	9,553.5	-
22 Deferred Parcel Tax Revenue	950.0	1,266.7	-
23 Deferred GO Bond Tax Revenue	823.0	1,097.4	-
25 Line of Credit - Summit Bank	-	-	-
26 Other Liabilities	-	-	-
27 Total Current Liabilities	\$ 21,147.1	\$ 23,155.8	\$ 12,403.1
28 Long Term Debt, net current portion	\$ 23,436.4	\$ 23,568.4	\$ 27,239.3
29 Total Fund Balance	\$ 45,189.1	\$ 43,845.8	\$ 40,455.4
30 Total Liabilities & Fund Balances	<u>\$ 89,772.5</u>	<u>\$ 90,569.9</u>	<u>\$ 80,097.8</u>

<u>Cash Indicators</u>	<u>Current Month</u>	<u>Prior Month</u>	<u>Prior Year FYE</u>
Days Cash	36.5	42.6	29.2
A/R Days	52.2	45.5	45.8
A/P Days	52.3	43.0	67.2

**Sonoma Valley Health Care District
Projected Cash Forecast (In 1000s)
FY 2026**

ATTACHMENT C

	ACTUAL	ACTUAL	ACTUAL	ACTUAL	ACTUAL	ACTUAL	ACTUAL	ACTUAL	ACTUAL	Forecast	Forecast	Forecast	TOTAL
	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	
Hospital Operating Sources													
1 Patient Payments Collected	\$ 4,683.2	\$ 4,292.8	\$ 4,956.9	\$ 4,513.5	\$ 4,208.0	\$ 4,353.9	\$ 4,970.2	\$ 4,666.0	\$ 4,598.5	\$ 4,300.0	\$ 4,600.0	\$ 4,600.0	\$ 54,743.1
2 Other Revenue - Operating & Non-Op	182.5	104.0	101.6	94.6	101.0	129.0	91.8	114.8	107.2	105.0	105.0	105.0	1,341.4
3 IGT Program Revenue	-	-	-	523.7	31.5	-	2,639.8	20,155.6	-	730.0	-	161.5	24,242.2
4 Parcel Tax Revenue	110.9	-	-	-	-	2,055.4	-	-	-	1,500.0	-	-	3,666.3
5 Unrestricted Contributions	4.0	-	-	-	-	-	-	-	-	-	-	-	4.0
6 Sub-Total Hospital Sources	\$ 4,980.6	\$ 4,396.8	\$ 5,058.5	\$ 4,608.1	\$ 4,309.0	\$ 7,112.5	\$ 7,701.8	\$ 24,936.4	\$ 4,705.8	\$ 6,635.0	\$ 4,705.0	\$ 4,866.5	\$ 84,015.9
Hospital Uses of Cash													
7 Operating Expenses / AP Payments	\$ 5,649.7	\$ 4,948.5	\$ 4,975.3	\$ 6,009.0	\$ 4,877.2	\$ 5,616.9	\$ 6,661.0	\$ 8,499.2	\$ 5,587.8	\$ 6,000.0	\$ 5,900.0	\$ 5,200.0	\$ 69,924.7
8 Term Loan Paydowns - Summit / CHFFA	73.6	73.6	73.6	73.6	73.6	73.6	131.0	73.6	73.6	73.6	73.6	73.6	940.3
9 IGT Financing Interest	-	-	-	-	106.0	77.1	74.2	43.3	-	-	-	-	300.6
10 IGT Matching Fee Payments	-	228.5	-	-	10,426.1	-	-	348.9	-	-	87.7	-	11,091.3
11 Capital Expenditures - SVH Funded	145.6	-	11.3	84.5	59.3	60.0	539.8	723.8	-	50.0	50.0	50.0	1,774.4
12 Capital Expenditures - Foundation Funded	876.5	468.8	133.8	205.4	94.3	69.6	-	-	-	-	-	-	1,848.4
13 Total Hospital Uses	\$ 6,745.4	\$ 5,719.5	\$ 5,194.0	\$ 6,372.4	\$ 15,636.6	\$ 5,897.2	\$ 7,406.0	\$ 9,688.8	\$ 5,661.4	\$ 6,123.6	\$ 6,111.3	\$ 5,323.6	\$ 85,879.6
Net Hospital Sources/Uses of Cash	\$ (1,764.7)	\$ (1,322.7)	\$ (135.5)	\$ (1,764.3)	\$ (11,327.6)	\$ 1,215.3	\$ 295.8	\$ 15,247.6	\$ (955.6)	\$ 511.4	\$ (1,406.3)	\$ (457.1)	\$ (1,863.7)
Non-Hospital Sources													
14 Restricted Donations (rec'd from Foundation)	806.7	538.6	214.6	124.5	94.3	-	-	44.4	-	-	-	-	1,823.2
15 Line of Credit - Draw	-	-	-	-	10,500.0	-	-	-	-	-	-	-	10,500.0
17 Sub-Total Non-Hospital Sources	\$ 806.7	\$ 538.6	\$ 214.6	\$ 124.5	\$ 10,594.3	\$ -	\$ -	\$ 44.4	\$ -	\$ -	\$ -	\$ -	\$ 12,323.2
Non-Hospital Uses of Cash													
18 Line of Credit - Payoff	-	-	-	-	-	-	-	10,500.0	-	-	-	-	10,500.0
20 Sub-Total Non-Hospital Uses of Cash	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 10,500.0	\$ -	\$ -	\$ -	\$ -	\$ 10,500.0
21 Net Non-Hospital Sources/Uses of Cash	\$ 806.7	\$ 538.6	\$ 214.6	\$ 124.5	\$ 10,594.3	\$ -	\$ -	\$ (10,455.6)	\$ -	\$ -	\$ -	\$ -	\$ 1,823.2
22 Net Sources/Uses	\$ (958.0)	\$ (784.1)	\$ 79.1	\$ (1,639.8)	\$ (733.3)	\$ 1,215.3	\$ 295.8	\$ 4,792.0	\$ (955.6)	\$ 511.4	\$ (1,406.3)	\$ (457.1)	\$ (40.5)
23 Total Cash at beginning of period	\$ 4,386.3	\$ 3,428.3	\$ 2,644.2	\$ 2,723.3	\$ 1,083.5	\$ 350.3	\$ 1,565.6	\$ 1,861.4	\$ 6,653.4	\$ 5,697.8	\$ 6,209.2	\$ 4,802.9	
24 Total Cash at End of Period	\$ 3,428.3	\$ 2,644.2	\$ 2,723.3	\$ 1,083.5	\$ 350.3	\$ 1,565.6	\$ 1,861.4	\$ 6,653.4	\$ 5,697.8	\$ 6,209.2	\$ 4,802.9	\$ 4,345.8	
25 Days of Cash on Hand at End of Month	22.0	17.0	17.5	7.2	4.3	10.0	11.9	42.6	36.5	39.8	30.8	27.9	

Sonoma Valley Health Care District
Key Performance Indicators | Volumes & Statistics
 For the Period Ended March 31, 2026

	Current Month				Year-To-Date							
	Actual	Budget	Var	%	YTD	YTD	Var	%	PYTD			
					Actual	Budget			Actual	Var	%	
Inpatient Volume												
Acute Patient Days	332	270	62	23%	2,701	2,323	378	16%	2,332	369	16%	
Acute Discharges	89	74	16	21%	738	633	105	17%	616	122	20%	
Average Length of Stay	3.7	3.7	0.0	1%	3.7	3.7	(0.0)	0%	3.8	(0.1)	-3%	
Average Daily Census	10.7	8.7	2.0	23%	9.9	8.5	1.4	16%	8.5	1	16%	

Surgical Volume											
	Actual	Budget	Var	%	YTD	YTD	Var	%	PYTD	Var	%
IP Surgeries	10	10	(0)	-1%	107	87	20	23%	84	23	27%
OP Surgeries	140	148	(8)	-6%	1,261	1,191	70	6%	1,199	62	5%
Total Surgeries	150	158	(8)	-5%	1,368	1,278	90	7%	1,283	85	7%

Other Outpatient Activity											
	Actual	Budget	Var	%	YTD	YTD	Var	%	PYTD	Var	%
Total Outpatient Visits	6,533	5,929	604	10%	54,202	51,532	2,670	5%	51,184	3,018	6%
Emergency Room Visits	1,147	1,020	127	12%	9,110	8,167	943	12%	8,259	851	10%

Payor Mix				Actual	Budget	%	Actual	Budget	%
Medicare	39.3%	37.7%	1.6%	39.2%	37.9%	1.3%			
Medicare Mgd Care	20.1%	18.2%	1.9%	18.3%	18.3%	0.1%			
Medi-Cal	14.9%	16.2%	-1.3%	17.4%	16.2%	1.3%			
Commercial	22.1%	23.9%	-1.8%	21.3%	23.8%	-2.5%			
Other	3.5%	3.9%	-0.4%	3.7%	3.8%	-0.1%			
Total	100.0%	100.0%		100.0%	100.0%				

Payor Mix calculated based on gross revenues

Department	Most Recent Six Months							YoY Monthly Averages			
	Oct-25	Nov-25	Dec-25	Jan-26	Feb-26	Mar-26	Last 6 Months	FY26	FY25	Chg	% Chg
Lab	1,535	1,217	1,355	1,420	1,350	1,644		1,428	1,348	80	6%
Medical Imaging	1,056	940	1,081	1,041	1,009	1,059		1,031	982	49	5%
Physical Therapy	1,600	1,270	1,337	1,439	1,482	1,623		1,449	1,424	25	2%
CT Scanner	515	465	508	454	420	534		478	449	28	6%
Occ. Health	313	282	310	279	285	249		273	267	6	2%
Mammography	295	254	301	238	239	299		260	245	15	6%
Occ. Therapy	236	248	285	256	231	251		244	203	41	20%
Ultrasound	306	270	276	227	233	321		281	218	64	29%
MRI	251	202	245	235	206	287		232	181	51	28%
ECHO	131	88	132	100	95	120		113	129	(16)	-12%
Speech Therapy	57	58	57	50	114	126		70	68	2	3%
Other	17	18	33	28	13	20		26	23	2	10%
TOTAL	6,596	5,312	5,919	5,767	5,677	6,533		6,031	5,789	242	4%
Emergency Room	952	932	1,047	1,022	943	1,147		1,012	868	144	17%
ER Visits / Day	30.7	31.1	33.8	33.0	33.7	37.0		33.2	28.9	4.3	15%

Sonoma Valley Health Care District
Overall Performance | Key Performance Indicators
 For the Period Ended March 31, 2026

ATTACHMENT E

	Current Month				Year-To-Date				PY Actual	Var	%
	Actual	Budget	Var	%	Actual	Budget	Var	%			
Operating Margin	\$ 1,108.5	\$ 112.4	\$ 996.1	887%	\$ 40.9	\$ (2,801.1)	\$ 2,842.0	101%	\$ (3,600.1)	\$ 3,641.0	101%
Operating EBDA	\$ 1,472.1	\$ 525.7	\$ 946.4	180%	\$ 4,164.7	\$ 1,669.0	\$ 2,495.6	150%	\$ 1,124.8	\$ 3,039.9	270%
Net Income (Loss)	\$ 1,373.3	\$ 268.2	\$ 1,105.1	412%	\$ 2,336.1	\$ (1,398.2)	\$ 3,734.3	267%	\$ (1,906.1)	\$ 4,242.2	223%

0.07%

Operating Revenue Summary (All Numbers in 1000s)

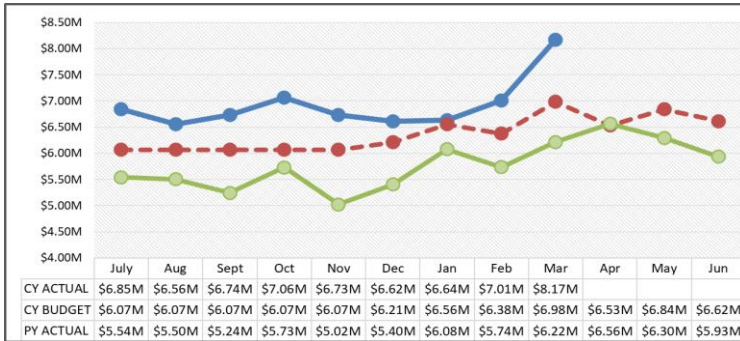
Net Patient Revenue	\$ 5,621	\$ 4,940	\$ 681	14%	\$ 41,802	\$ 38,055	\$ 3,747	10%	\$ 37,836	\$ 3,966	10%
NPR as a % of Gross	14.7%	14.9%	-1.5%		13.8%	14.2%	-2.5%		14.1%	-1.9%	
Operating Revenue	\$ 8,171	\$ 7,010	\$ 1,162	17%	\$ 62,369	\$ 56,687	\$ 5,681	10%	\$ 50,722.7	\$ 11,646	23%

Operating Expense Summary (All Numbers in 1000s)

Operating Expenses	\$ 7,063	\$ 6,897	\$ 165	2%	\$ 62,328	\$ 59,488	\$ 2,839	5%	\$ 54,323	\$ 8,005	15%
Op Exp. Excl. IGT Fees	\$ 6,003	\$ 6,133	\$ (130.2)	-2%	\$ 54,559	\$ 52,607	\$ 1,952.8	4%	\$ 50,364	\$ 4,195.1	8%
Worked FTEs	239.98	232.11	7.87	3%	232.99	228.21	4.78	2%	218.09	14.91	7%

Trended Operating Revenue & Operating Expense Graphs

Trended Operating Revenues
 CY Actual vs CY Budget vs PY Actual

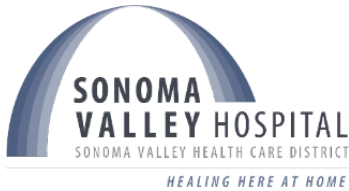


Trended Operating Expenses (excl Depreciation)
 CY Actual vs CY Budget vs PY Actual



Cash Indicators

	Current Month	Prior Month	Var	% Var
Days Cash	36.5	42.6	(6.1)	-14%
A/R Days	52.2	45.5	6.7	15%
A/P Days	52.3	43.0	9.3	22%



To: SVHCD Finance Committee
From: Ben Armfield, Chief Financial Officer
Date: April 28, 2026
Subject: Financial Report for March 2026 addendum: Financing Update

Financing Update

We continue to work with Summit State Bank, our current lending partner, regarding potential modifications to our existing line of credit. Discussions have focused on increasing the overall capacity of the facility, as well as revising certain terms to provide greater flexibility around access to funds, structure of requests, and repayment timelines.

In parallel, we have engaged with additional prospective lenders to explore alternative financing options for several near-term capital priorities, including the East Air Handler replacement and completion of the 3T MRI space.

We expect to have proposals ready for review and discussion with the full Finance Committee at either the May or June meeting.

Bond Update

We have also been working to further understand the structure and constraints associated with our two outstanding bond issuances.

As previously discussed, the District maintains a balance classified as "restricted for debt service," which is used to support annual principal and interest payments. With the bonds maturing in 2030, the question has been raised as to whether any residual balances may exist at maturity and, if so, how those funds would be treated.

Given the technical and legal nature of this question, we are in the process of engaging bond counsel to provide formal guidance on:

- The treatment of any funds remaining after all debt service obligations are satisfied
- Whether any flexibility exists with respect to the use of funds currently held by the trustee
- Any potential restructuring or refunding considerations

We will provide an update once we have received additional clarity from bond counsel.