MARK TWAIN
HEALTH CARE DISTRICT

P. O. Box 95
San Andreas, CA 95249
(209) 754-4468 Phone

Meeting of the Board of Directors
Mark Twain Health Care District Board Room
Mark Twain Medical Center
768 Mountain Ranch Rd, San Andreas, CA

Friday, July 17, 2026

9:00am

Agenda

Zoom – Public Invitation information is at the End of the Agenda

Mark Twain Health Care District Mission Statement
"Through community collaboration, we serve as the stewards of a community health system that ensures our residents have the dignity of access to care that provides high quality, professional and compassionate health care".

1. **Call to order with Flag Salute:**

2. **Roll Call:**

Member	In Person	Via Zoom/Phone	Absent	Time of arrival
Linda Reed				
Debbra Sellick				
Lori Hack				
Richard Randolph				
Johanna Vermeltfoort				

Quorum:

3. **Approval of Agenda:**
   Public Comment – Action

4. **Public Comment On Matters Not Listed On The Agenda:**
   The purpose of this section of the agenda is to allow comments and input from the public on matters within the jurisdiction of the Mark Twain Health Care District not listed on the agenda. (The public may also comment on any item listed on the agenda prior to Board action on such item.) **Limit 3 minutes per speaker.** The Board appreciates your comments; however, it will not discuss and cannot act on items not on the agenda.

5. **Consent Agenda:**
   Public Comment – Action

All Consent items are considered routine and may be approved by the District Board without any discussion by a single roll-call vote. Any Board Member or member of the public may remove any item from the Consent list. If an item is removed, it will be discussed separately following approval of the remainder of the Consent items.

A. Un-Approved Minutes:

- Finance Committee Meeting for June 24, 2026: – Action
- Board of Director Meeting Minutes June 24, 2026: – Action

6. Mark Twain Medical Center:

- Fiscal Year 2025-2026 Recap …….. Doug Archer
- Capital Improvements 2026-2027

7. MTHCD Reports:

A. President's Report:……Ms. Reed

- Association of California Health Care Districts (ACHD) :

B. Community Board Report:……..……..……Ms. Sellick

C. MTMC Board of Directors:..……...Ms. Reed

D. Chief Executive Officer's Report:……..……..……..Ms. Gillespie

- General Comments:
  - VSHWC Operational staff announcements
  - NAGPRA – California State University held archeological artifacts
  - Mark Twain Medical Center 75th Anniversary event 8/22/2026
  - Community Benefits Report
  - Board Calendar FY 2026-2027

E. Valley Springs Health & Wellness Center (VSHWC):……..……..……Dr. Smart

- Medical Staffing Updates
- Construction Updates
- Calaveras Wellness Foundation Annual Meeting report - Action
- Policies Valley Springs Health & Wellness Center July 2026: None.

F. Valley Springs Health & Wellness Center (VSHWC) Reports:……..Ms. Terradista

- Encounter Report – June 2026
- Clinect – June 2026

8. Committee Reports:

A. Ad Hoc AED for Life: ……..……..Ms. Gillespie / Ms. Vermeltfoort / Mr. Randolph

B. Ad Hoc Community Engagement:……..……..……..Ms. Gillespie / Ms. Reed / Mr. Randolph

C. Ad Hoc Community Grants:……..……..……..Ms. Gillespie / Ms. Sellick / Ms. Reed

- Policy No. 23 – Requests for Public Funds, Community Grants & Sponsorships

D. Ad Hoc Personnel Committee:…….…… Ms. Gillespie / Ms. Reed / Ms. Vermeltfoort

E. Ad Hoc Policy Committee:…..……..…… Ms. Gillespie / Ms. Hack / Ms. Vermeltfoort

- ❖ Policy No.12 Conflict of Interest Code and Ethics
- ❖ Policy No. 32 Debt Management
- ❖ Policy No. 34 Artificial Intelligence (AI) Usage

❖ Resolution 2026 – 03 District Policies # 12, 32, & 34 Public Comment – Action

F. Ad Hoc Real Estate:…….……..Ms. Gillespie / Mr. Randolph

G. Finance Committee:…….....Ms. Hack / Mr. Wood / Ms. Slocum

- Financial Statements – June 2026: Public Comment – Action

9. Board Comment and Request for Future Agenda Items:

- Announcements of interest to the Board or the Public.
  - Mark Twain Medical Center – Thank you

10. Next Meeting:

- August 19, 2026 – Finance Committee at 8:00 a.m.; Board of Directors Meeting at 9:00 a.m.

11. Adjournment:

Public Comment – Action

Jessica Gwaltney is inviting you to a scheduled Zoom meeting.
Topic: MTHCD Board of Directors Meeting
Join Zoom Meeting
https://zoom.us/j/98772818798?pwd=mkEgIaVazbnRT74sLGJTamWuJWgvYE.1
Meeting ID: 987 7281 8798
Passcode: 538886

One tap mobile
+16694449171,,98772818798#,,,,*538886# US
+16699006833,,98772818798#,,,,*538886# US (San Jose)

Join by SIP
• 98772818798@zoomcrc.com
Join instructions
https://zoom.us/meetings/98772818798/invitations?signature=OA5aItTORaoSM1S1lWm96zzuqpiA0xo96BcdvNLxJN4

MARK TWAIN
HEALTH CARE DISTRICT

P. O. Box 95
San Andreas, CA 95249
(209) 754-4468 Phone
(209) 754-2537 Fax

Finance Committee Meeting

Mark Twain Health Care District Board Room

Mark Twain Medical Center

768 Mountain Ranch Road

San Andreas, CA

Wednesday June 24, 2026

8:00am

Minutes

Mark Twain Health Care District Mission Statement

"Through community collaboration, we serve as the stewards of a community health system that ensures our residents have the dignity of access to care that provides high quality, professional and compassionate health care".

1. **Call to order with Flag Salute:**
   Meeting called to order by Ms. Hack at 8:02 AM.
2. **Roll Call:**

Member	In Person	Via Zoom/Phone	Absent	Time of Arrival
Lori Hack	☒			
Richard Randolph	☒			
Patricia Bettinger	☒			

Quorum: Yes

3. **Approval of Agenda:** Public Comment- Action

Motion to approve agenda: Mr. Randolph
Second: Ms. Hack
Ayes: 3
Nays: 0

4. **Public Comment On Matters Not Listed On The Agenda:**
   The purpose of this section of the agenda is to allow comments and input from the public on matters within the jurisdiction of the Mark Twain Health Care District not listed on the agenda. (The public may also comment on any item listed on the agenda prior to Board action on such item.) **Limit 3**

minutes per speaker. The Board appreciates your comments; however, it will not discuss and cannot act on items not on the agenda.
Hearing none.

5. **Consent Agenda:** Public Comment- Action

All Consent items are considered routine and may be approved by the District Board without any discussion by a single roll-call vote. Any Board Member or member of the public may remove any item from the Consent list. If an item is removed, it will be discussed separately following approval of the remainder of the Consent items.

A. Un-Approved Minutes:

- Finance Committee Meeting – May 27, 2026: – Action

Motion to approve: Ms. Bettinger
Second: Mr. Randolph
Ayes: 3
Nays: 0

6. **Chief Executive Officer's Report**:……..……Ms. Gillespie

Ms. Gillespie provided updates regarding District operations, strategic initiatives, grant opportunities, employee benefits, and community partnerships.

- General Comments:
  - Update on West Wing Furnishings and Medical Equipment

Ms. Gillespie reported that West Wing furnishings are being finalized. Final costs are expected to be slightly above the previously approved $175,000 budget due to additional furnishing needs.

  - Anthem Benefit update

Ms. Gillespie reported that Anthem Platinum medical and vision benefit enhancements will become effective July 1, 2026. The additional costs have been incorporated into the proposed 2026-2027 budget.

  - 401k 2025/2026 District Contribution – Action

The Committee reviewed the proposed District contribution for the 2025-2026 fiscal year 401(k) plan. The Committee recommended approving a District contribution equal to 10% of employee deferrals, representing an estimated employer contribution of approximately $27,000. The Committee recommended approval and forwarding the recommendation to the Board of Directors. The Committee asked administration to review updated benefit packages for employees including salaries, benefits and 401k matching programs compared to other entities in Calaveras County and make recommendations regarding updated 401k programs.
Motion to recommend Board approval: Mr. Randolph
Second: Ms. Bettinger
Ayes: 3
Nays: 0

- Construction in Progress Updates:……Ms. Gillespie

Ms. Gillespie reported that the West Wing expansion and parking structure project continue to progress.

Delays in obtaining the Caltrans permit may affect the parking structure timeline, but the West Wing remains on schedule for early July completion, with the overall project anticipated to be completed by August 1, 2026, pending permit approval.

7. **Real Estate Review:**……..……Mr. Randolph

Nothing to report.

8. **Accountant's Report:**…….…… Ms. Hack / Ms. Slocum
   - Financial Statements – May 2026: Public Comment – Action

Ms. Slocum presented the May 2026 Financial Statements. Discussion included a correction to an accounting entry for a prior period which reduced reported revenues by roughly **$600,000**. She also reviewed current clinic revenues which were amended to be **($602,805)** and year-to-date financial performance overall for the MTHCD which were **($40,188)** net income. She also discussed her updates and improvements to budget reporting categories in future financial reports. The Committee reviewed the financial statements and recommended approval.

Motion to recommend Board approval: Ms. Bettinger
Second: Mr. Randolph
Ayes: 3
Nays: 0

   - Presenting and Reviewing 2026-2027 MTHCD budget – Action

Ms. Gillespie presented the proposed Fiscal Year 2026-2027 Budget. Discussion included projected revenues of **$16.6M** overall for the District with **$13.5M** for the clinic. The overall net income budgeted was **$1.4M**. The Committee discussed the anticipated Medi-Cal reimbursement changes, and overall budget assumptions. Committee recommended reducing projected clinic revenue by **$1,000,000** to provide a more conservative budget. The Committee reviewed the revised budget including **$15.6 M** overall revenue and **$394,000** overall net income and recommended approval by the Board.
Motion to recommend Board approval: Ms. Bettinger
Second: Mr. Randolph
Ayes: 3
Nays: 0

9. **Treasurer's Report:**……..……Ms. Hack

Nothing to report

10. **Comments and Future Agenda Items**:

Nothing to report

11. **Next Meeting:**

Next Finance Committee Meeting – July 17, 2026 at 8am.

12. **Adjournment: Public Comment:** – Action Hearing none.

Motion to Adjourn. Ms. Bettinger
Second: Mr. Randolph
Ayes: 3
Nays: 0
Time: 9:01 AM

MARK TWAIN
HEALTH CARE DISTRICT

P. O. Box 95
San Andreas, CA 95249
(209) 754-4468 Phone

Meeting of the Board of Directors
Mark Twain Health Care District Board Room
Mark Twain Medical Center
768 Mountain Ranch Rd, San Andreas, CA

Wednesday, June 24, 2026
9:00am
Minutes

Zoom – Public Invitation information is at the End of the Agenda

Mark Twain Health Care District Mission Statement
"Through community collaboration, we serve as the stewards of a community health system that ensures our residents have the dignity of access to care that provides high quality, professional and compassionate health care".

1. **Call to order with Flag Salute:**

Meeting called to order by Ms. Reed at 9:08 AM.

2. **Roll Call:**

Member	In Person	Via Zoom/Phone	Absent	Time of arrival
Linda Reed	☒			
Debbra Sellick	☒			
Lori Hack	☒			
Richard Randolph	☒			
Johanna Vermeltfoort	☒			

Quorum: Yes

3. **Approval of Agenda:**
   Public Comment – Action
   Motion to approve agenda: Ms. Hack
   Second: Ms. Vermeltfoort
   Ayes: 5
   Nays: 0

4. **Public Comment on Matters Not Listed on The Agenda:**
   The purpose of this section of the agenda is to allow comments and input from the public on matters within the jurisdiction of the Mark Twain Health Care District not listed on the agenda. (The public may also comment on any item listed on the agenda prior to Board action on such item.) **Limit 3 minutes per speaker.** The Board appreciates your comments; however, it will not discuss and cannot act on items not on the agenda.
   Hearing none.

5. **Consent Agenda:**

   Public Comment – Action

All Consent items are considered routine and may be approved by the District Board without any

discussion by a single roll-call vote. Any Board Member or member of the public may remove any item from the Consent list. If an item is removed, it will be discussed separately following approval of the remainder of the Consent items.

A. Un-Approved Minutes:

- Finance Committee Meeting for May 27, 2026: – Action

Motion to approve: Ms. Hack
Second: Mr. Randolph
Ayes: 5
Nays 0

- Board of Director Meeting Minutes May 27, 2026: – Action

Motion to approve: Ms. Hack
Second: Mr. Randolph
Ayes: 5
Nays 0

6. Common Spirit National Real Estate:

- **MTMC Walkway:** ……..……Allison Hedberg– Action

Allison Hedberg provided an update on the covered walkway project between the hospital and MRI building. Design revisions, contractor recommendations, and project costs were reviewed. Distinctive Metals was recommended as the contractor, with an estimated project cost of approximately $800,000. The Board discussed fundraising opportunities through the hospital foundation and maintaining communication with the tribal community during construction.
Motion to approve: Mr. Randolph
Second: Ms. Vermeltfoort
Ayes: 5
Nays: 0

7. MTHCD:

- **Billing:** ……Kelly Hohenbrink, Karen Burkhardt, Sharon Pearson, & Shelley Mueller

Kelly Hohenbrink and Karen Burkhardt provided an overview of billing department operations and performance. The Board recognized the team's outstanding performance, including a five-day average claim processing time and approximately twenty days in accounts receivable. Discussion included billing operations, fee schedule management, and succession planning related to Sharon Pearson's upcoming retirement.

8. MTHCD Reports:

A. President's Report: ……Ms. Reed
Association of California Health Care Districts (ACHD) May Newsletter:

Ms. Reed provided updates regarding ACHD activities, upcoming conferences, and ongoing partnerships throughout the healthcare district community.

B. Community Board Report: ……..……Ms. Sellick

Ms. Sellick provided updates on community outreach activities and partnerships within Calaveras County.

C. MTMC Board of Directors: ……...Ms. Reed

Ms. Reed provided an update on Mark Twain Medical Center activities, including continued collaboration between the District and hospital leadership.

D. Chief Executive Officer's Report: ……..……..……..Ms. Gillespie
See attached CEO report.

Ms. Gillespie provided updates regarding District operations, strategic initiatives, grant opportunities, employee benefits, and community partnerships.

- General Comments:
  - Update on West Wing Furnishings and Medical Equipment

Confirmed West Wing furnishings are being finalized within the $175,000 budget.

  - Anthem Benefit update

Anthem Platinum medical and vision benefit enhancements effective July 1.

  - 401k 2025/2026 District Contribution – Action

The Board approved a District contribution equal to 10% of employee deferrals for the current fiscal year.

Motion to approve: Finance Committee
Second: Ms. Vermeltfoort
Ayes: 5
Nays: 0

E. Valley Springs Health & Wellness Center (VSHWC): ……..……Dr. Smart

- Construction Updates: Updates were provided regarding the West Wing expansion, parking lot improvements, and solar canopy project. Construction remains on schedule, although the parking lot project continues to await final Caltrans permit approval.

- Medical Staff Updates: Dr. Smart reported that clinic staffing remains approximately 90% complete, with recruitment efforts continuing for two physician positions.

- Policies Valley Springs Health & Wellness Center June 2026: Public Comment – Action

Revised Policies

  - Autoclave Spore Testing
  - Cleaning Duties
  - Employee Dress Code Guidelines
  - List of Services
  - Medication Administration
  - On-Call Program
  - Waived Testing-LeadCare II

Bi-Annual Review Policies (no changes to policy content)

  - Appointment Scheduling
  - Biennial Clinic Evaluation
  - Business Hours
  - Cash Collections
  - EKG
  - Fit Testing
  - Influenza A and B Test-Waived
  - Medical Staff Composition
  - No Show

- Prescription Refills
- Preventative Maintenance Inspections
- Provider on Site
- Section 504 Grievance
- Section 504 Grievance (Spanish)
- Shelter in Place for Patients and Staff
- Standardized Procedure for Employee COVID-19 Rapid Testing
- Sterile Field
- Sterile Shelf Life
- Threatening Or Hostile Patient
- Waste, Fraud, and Abuse
- Universal Precautions
- Unscheduled Downtime of Electronic Medical Record

Motion to approve: Ms. Hack
Second: Ms. Sellick
Ayes: 5
Nays: 0

F. Valley Springs Health & Wellness Center (VSHWC) Quality Reports: ……Ms. Terradista

- Encounter Report – May 2026

Ms. Terradista presented the May 2026 Encounter Report. May patient visits totaled 2,726. Discussion included lower visit volumes due to provider departures, staff vacations, and dental staffing needs.

- Clinect – May 2026

Survey participation and patient satisfaction scores improved across most departments.
New patient satisfaction scores declined slightly and will continue to be monitored.

9. <u>Committee Reports:</u>

A. Ad Hoc AED for Life: ……..…..Ms. Gillespie / Ms. Vermeltfoort / Mr. Randolph

- Reporting on the First Aid/CPR/AED class and the AB310 collaboration with the County.

- The Committee reported that the First Aid/CPR/AED training class has been rescheduled to July 18, 2026.
- Updates were also provided regarding implementation of AB 310 and collaboration with county agencies.

B. Ad Hoc Community Engagement: ……..……..Ms. Gillespie / Ms. Reed / Mr. Randolph

Hearing none.

C. Ad Hoc Community Grants: ……..……..……..Ms. Gillespie / Ms. Sellick / Ms. Reed

- MTMC Foundation - 75th Anniversary August 22, 2026:
  $50,000 donation Public Comment – Action

The Committee recommended approval of a $50,000 contribution to support the hospital's 75th Anniversary Celebration.
Motion to approve: Ms. Vermeltfoort
Second: Ms. Sellick

Ayes: 5
Nays:0

- Murphys Senior Center – Longevity and Lifestyle Conference October 15, 2026
  $5,000 donation to secure speaker Public Comment – Action

The Committee recommended approval of a $5,000 contribution to assist with speaker expenses for the October 15, 2026 conference.

Motion to approve: Ms. Vermeltfoort
Second: Ms. Sellick
Ayes: 5
Nays:0

D. Ad Hoc Personnel Committee: ……..…… Ms. Gillespie / Ms. Reed / Ms. Vermeltfoort

- Approval of Personnel Manual: Public Comment – Action

Motion to approve: Ms. Vermeltfoort
Second: Mr. Randolph
Ayes: 5
Nays:0

E. Ad Hoc Policy Committee: …..……...…… Ms. Gillespie / Ms. Hack / Ms. Vermeltfoort

- Policy No.12 Conflict of Interest Code and Ethics
- Policy No. 23 Requests for Public Funds, Community Grants & Sponsorships
- Policy No. 32 Debt Management
- Policy No. 34 Artificial Intelligence (AI) Usage

Discussion focused on updating the Community Grants Policy and strengthening accountability requirements. Staff will return with revisions at a future meeting.

F. Ad Hoc Real Estate: ……..Ms. Gillespie / Mr. Randolph
Hearing none.

G. Finance Committee: ……..Ms. Hack / Ms. Slocum

- Financial Statements – May 2026: Public Comment – Action
-

Ms. Slocum presented the May 2026 Financial Statements. She reviewed a correction to a prior-period accounting entry related to settlement funds, which reduced previously reported revenues by approximately $600,000. Current clinic revenues were reported at **($602,805)**, and the District's year-to-date net income was **($40,188)**. Ms. Slocum also discussed ongoing improvements to budget reporting categories to provide clearer financial reporting in future statements. The Board reviewed the Finance Committee's recommendation and approved the May 2026 Financial Statements.

Motion to approve: Finance Committee
Second: Ms. Vermeltfoort
Ayes: 5
Nays:0

- Presenting 2026-2027 MTHCD budget – Action

Ms. Gillespie presented the proposed Fiscal Year 2026-2027 Budget. Discussion included projected District revenues of **$16.6 million**, including **$13.5 million** for the clinic, with an initial projected net income of approximately **$1.4 million**. The Board reviewed the Finance Committee's recommendation to reduce projected clinic revenue by **$1,000,000** to provide a more conservative estimate in anticipation of potential Medi-Cal reimbursement changes and other budget assumptions. The revised budget reflects approximately **$15.6 million** in total projected revenue and an estimated District net income of **$394,000**. Following discussion, the Board approved the Fiscal Year 2026-2027 Budget.

Motion to approve: Ms. Vermeltfoort
Second: Mr. Randolph
Ayes: 5
Nays:0

10. Board Comment and Request for Future Agenda Items:

- Announcements of Interest to the Board or the Public:

1. Participation in the Calaveras County Hazard Mitigation Plan.
2. Establishment of a District Historian position.
3. Quarterly reporting from the Calaveras Wellness Foundation.
4. Adding a standing Medical Staff Update to future Board agendas.

11. Next Meeting: July 17, 2026, at 8:00am for Finance Committee and 9:00am for BOD:

12. Closed Session: Pending Legal Action:

Member	In Person	Via Zoom/Phone	Absent	Time of arrival
Linda Reed	☒			
Debbra Sellick	☒			
Lori Hack	☒			
Richard Randolph	☒			
Johanna Vermeltfoort	☒			

Quorum: Yes

No reportable action was taken.

13. Adjournment: Public Comment – Action**:** Hearing none.
Motion to adjourn: Ms. Reed
Second: Ms. Vermeltfoort
Ayes: 5
Nays:0

Mark Twain Medical Center: FY26 Review and FY27 Forecast

Doug Archer, MTMC CEO

July 17, 2026

Dignity Health
A member of CommonSpirit

OVERVIEW

- **FY 26 Results**
  - **Financials**
  - **Capital Projects**
  - **Patient Experience**
  - **Quality**
- **FY 27: A look ahead**
  - **Targets**
  - **Capital Plan**
  - **Focus Areas**

Fiscal Year (FY) Financial Results

FY26 Results

Current Fiscal Year & Variances

EBITDA: **$279k** (Var: -$1.2M)

Gross Revenue: **$259.15M** (Var: -$1.3M)

Yield: **31.2%**

Volumes & Variances

- Admits: **941** (Var: -122)
- Clinic Visits: **52,069** (Var: +1,055)
- ER Visits: **11,637** (Var: -97)
- Surgeries: **2,077** (Var: -102)

FY25 Results

Prior Fiscal Year Baseline

EBITDA: **$1,479**

Gross Revenue: **$260.49M**

Yield: **32.9%**

Volumes

- Admits: **1,062**
- Clinic Visits: **51,014**
- ER Visits: **11,734**
- Surgeries: **2,179**

FY 26 Capital Projects

Surgical Services

Completed Renovations

Major upgrades successfully finalized to modernize and enhance our surgical environments, optimizing patient care and operational workflow.

Arnold Clinic

New Facility Acquisition

Completed the acquisition of a new clinic in Arnold, expanding our geographic footprint to deliver accessible care closer to the community.

New Equipment

~$800k Invested

- Anesthesia machines
- Endo Tower
- Gurneys/Beds
- Renovation to Pain Suite

Dignity Health.
A member of CommonSpirit

Patient Experience

Dignity Health
A member of CommonSpirit

Quality

Successes
All metrics above goal

- Stroke Mortality
- Sepsis Mortality
- Sepsis Bundle Compliance
- Diabetic Screening
- Hospital Acquired Infections
- Wellness Visits

Opportunities
Missed Goal

Sepsis Readmissions: 4.6%

- Goal is 3%

THA/TKA Complications

- 2 post op total joint infections

VTE/PE

2/936 cases (59th Percentile)

- Goal is 60th Percentile

Dignity Health
A member of CommonSpirit

FY 27 Outlook

EBITDA Target

$2,859,000

FY 27 Financial Objective

Capital Projects

Sterile Processing Renovation: $2.5M Thank you!!!

X-Ray Room 1 Replacement: $2.1M

Covered Walkway: $800k Thank you!!

Automatic Doors: $500k (Replace 5 sets)

New C-Arm & Table: $250k (Pain Management Suite)

Focus Areas for FY27

Programs & Staffing

Provider recruitment & clinical expansion

- **Onboarding Gen Surgeon:** Dr. Guzman starts 8/31/26
- **Family Practice Residency:** Starts 6/2028
- Swing Bed Program
- Inpatient Hospice Program
- Provider Recruitment Focus

Facilities & Infrastructure

Capital renovations & physical upgrades

- **Arnold Clinic:** Complete renovations for the new site
- **Sterile Processing:** Start department renovations
- **Clinic Expansion:** Secure funding for growth

Dignity Health.
A member of CommonSpirit

Thank You!

MARK TWAIN
HEALTH CARE DISTRICT

P. O. Box 95
San Andreas, CA 95249
(209) 754-4468 Phone
(209) 754-2537 Fax

CEO Report to the Board of Directors for date: July 17, 2026

Community Health and Outreach to enhance Community Engagement and build public trust:
HHSA: Continued collaboration with HHSA on AED distribution and AB 310 implementation. **Board of Supervisors:** Attend Board of Supervisors and regional partnership meetings. **MTMC**: Maintained biweekly CEO collaboration meetings with Mark Twain Medical Center. **CCOE**: Outside Behavioral Health initiative on pause due to staffing constraints **Chamber/Community Engagement**: Working with Chamber on ETP training hour Grant program **County Collaboration**: Sierra Hope, Hospice Amador-Calaveras, Habitat for Humanity, and other community partners regarding healthcare access and community support initiatives. **ACHD**: Serving on Board and participating in regional, state and legislative calls **CSDA**: Attend Calaveras Regional meetings quarterly and attended Leadership conference
Finance: Finalized FY 2026/2027 District budget.
Financial Stability to improve operating margin by 2% and deliver transparency and efficiency: work in progress
Grants: Submitted weekly ETP reimbursement documentation, totaling more than 1,300 training Hours. **CalRHT Grant-VMG Consulting**: To include Behavioral Health grant development activities and workforce management. Staffing sustainability and retention **EV Charging Stations**: grant and licensing agreement revisions still in process
Bizhaven Consulting: Outside firm consulting on Human Resources & Safety-compliance overview **VMG Consulting**: Partnering on 6-8 week program of a “re-tooling” & benchmarking of our reception-scheduling department. Optimum efforts need to be addressed
Construction/Facilities: West Wing construction remains on schedule with interior buildout progressing. New end date 8/31-9/3/2026. Equipment and furniture being delivered and schedule to build all furniture under-way **South Parking Structure** construction continues with paving, sidewalks, and infrastructure improvements nearing completion. Cal-Trans still a huge “delay” component pending their final permit approval. Weekly emails and communication attempts
Quality of Care – Enhance patient experience through surveys still being tweaked for optimum results
Clinect: Continued planning for patient satisfaction and quality improvement initiatives.
Workforce management to improve employee satisfaction, engagement and retention:
District Office: Continued organizational planning, policy development, budgeting, and benefits administration. Participate in County meetings, Ad Hoc committee meetings, working on website design for MTHCD. Billing department still resides at District office through end of August.

VSHWC: Continued recruitment, onboarding, and employee development activities. Conducted department meetings to promote communication and engagement. Continued collaboration with the Spirit Committee on employee appreciation initiatives.
Billing Revenue: Revenue Received: $770,318 -11% to May
Claims Processing: 5.4 days
Days in A/R: 23.7
A/R over 90 days: 4.6% (outstanding)

75th

1951-2026

ANNIVERSARY

Dignity Health™
Mark Twain Medical Center

Saturday, August 22nd

CLONDAIRE VINEYARDS
Angels Camp, CA

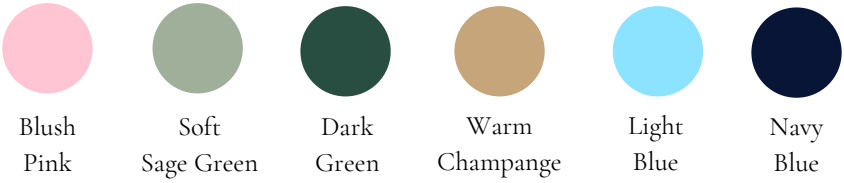
Order of Events

6:00 PM	Cocktail Hour
7:00 PM	Program
7:30 PM	Dinner

ATTIRE

Please use our color palette as inspiration.

These are not required, please opt for comfortable and cool fabrics like linen and cotton.



Blush Pink | Soft Sage Green | Dark Green | Warm Champange | Light Blue | Navy Blue

For more information,
please contact CJ Singh at 209.559.9532

COMMUNITY BENEFITS REPORT

Your Health, Our Mission

20 25/26

MARK TWAIN
HEALTH CARE DISTRICT

FROM CEO, DARRIE GILLESPIE

From CEO, Darrie Gillespie

It is a privilege to serve the Mark Twain Health Care District and the community that places its trust in us. Over the past year, we have remained focused on what matters most — delivering accessible, compassionate, and high-quality healthcare close to home, while remaining thoughtful stewards of the public resources entrusted to us.

As a public healthcare district, our work is grounded in responsibility, collaboration, and transparency. We are guided by strong governance, careful financial oversight, and meaningful partnerships with our Board, community leaders, and regional healthcare partners. These relationships allow us to strengthen services, navigate challenges, and make decisions that support both today's needs and tomorrow's sustainability.

At the center of all we do are our people. Our physicians, nurses, clinical teams, and support staff bring professionalism, compassion, and resilience to their work each day. Their commitment to our patients and to one another defines the culture of Mark Twain Health Care District and makes our mission possible.

Looking forward, our vision is clear and hopeful. We are committed to building a sustainable healthcare system that evolves with our community — one that supports a thriving workforce, expands access to care, embraces innovation with purpose, and remains rooted in trust. By listening closely, planning responsibly, and working together, we are shaping a future where quality care remains local and Mark Twain Health Care District continues to serve as a reliable and compassionate partner in the health and well-being of generations to come.

Thank you for your continued trust and partnership.

BOARD OF DIRECTORS

Lin Reed, MBA
PRESIDENT

Debbra Sellick, CMP
SECRETARY

Lori Hack, MBA
TREASURER

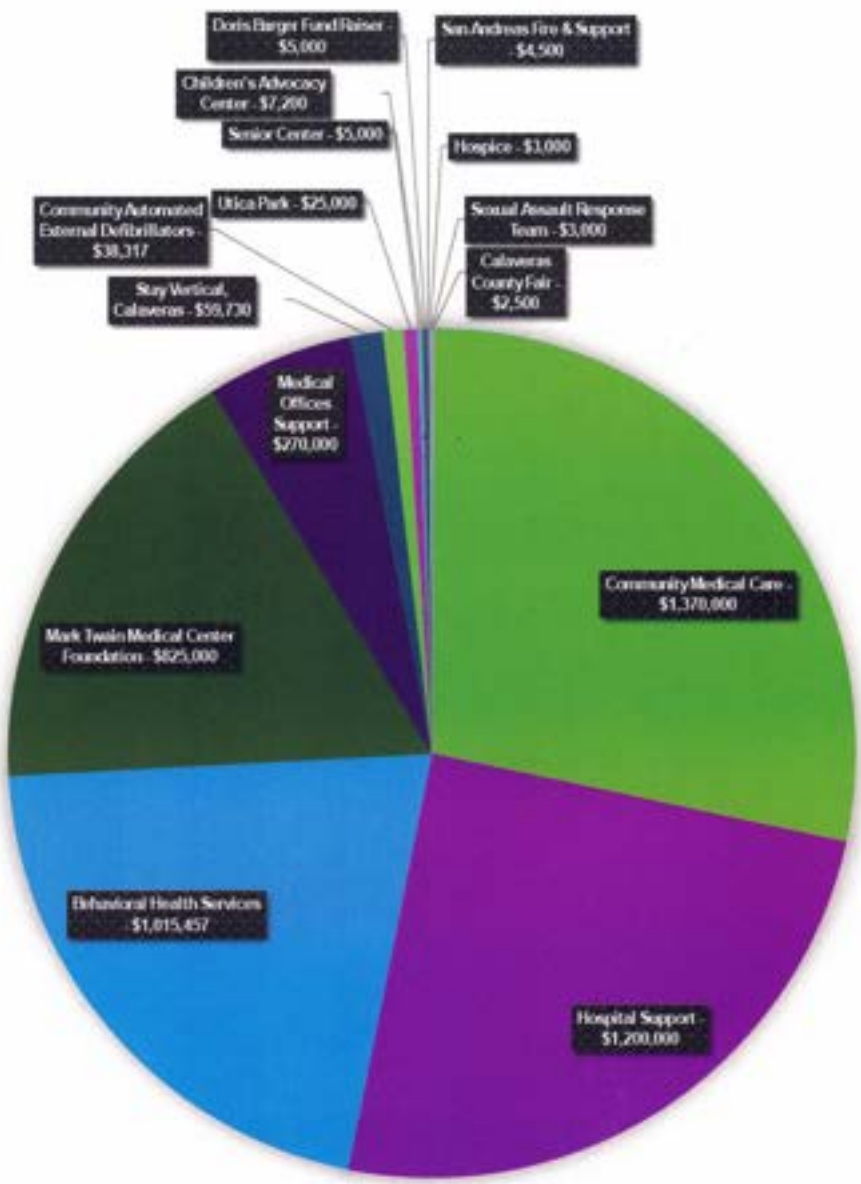
Richard Randolph
MEMBER-AT-LARGE

Johanna Vermeltfoort, BSN
MEMBER-AT-LARGE

"The board is working hard for you. We are health care providers, community leaders and your neighbors. We are committed to accessible and quality care for the county."

DISTRICT COMMUNITY CONTRIBUTIONS

We're Here For You!



- $1.37 Million Community Medical Care
- $1.2 Million Hospital Support
- $1,015,457 Behavioral Health Services
- $825,000 Mark Twain Medical Center Foundation
  - $500,000 - Walkway
  - $300,000 - Utilities
  - $10,000 - Pink Tie
  - $10,000 - Bone Density Equipment
  - $5,000 - Glenna Johnson, RN
- $270,000 Medical Offices Support
- $59,730 Stay Vertical, Calaveras
- $38,317 Community Automated External Defibrillators
- $25,000 Utica Park
- $4,500 San Andreas Fire & Support
- $7,200 Children's Advocacy Center
- $5,000 Senior Center
- $5,000 Doris Barger Fund Raiser
- $3,000 Hospice
- $3,000 Sexual Assault Response Team
- $2,500 Calaveras County Fair

PROGRAMS . . .

ROBO-DOC TELEHEALTH

Robo-Doc is a program that offers virtual medical care to students in many Calaveras County schools. Funded by the Mark Twain Health Care District, there is no cost involved for either parents or schools.

The goal of Robo-Doc is to supplement nursing care and allows students' access to physicians for minor ailments and injuries, keeping children in school and greatly reducing time off work for parents.

We added two schools last year for a total of eight schools and more planned.

We performed 411 telehealth calls last school year resulting in the high 90th percentile school retention rate.

SPORTS PHYSICALS

The Mark Twain Medical Center Foundation provided a sponsorship allowing Calaveras High School students to receive free sports physicals. Practitioners and staff from the Valley Springs Health & Wellness Center, along with CHS school staff conducted 183 health screenings for students who wish to participate in sports for the 2024-2025 school year.

Students lined up to have their vision checked, blood pressure taken, height and weight recorded, and their overall physical attributes assessed to insure the student's health meets California Interscholastic Federation (CIF) State requirements. Prior to 2024, the last year a sports physical event occurred for CHS students was in 2019.

BEHAVIORAL HEALTH

Our Behavioral Health program provides integrated, patient-centered support designed to address mental health and emotional well-being in coordination with physical care. Our team includes one Licensed Marriage and Family Therapist (LMFT), two Licensed Clinical Social Workers (LCSWs), two Associate Marriage and Family Therapists (AMFTs), and one Associate Clinical Social Worker (ACSW). Our Associate-level clinicians serve as Behavioral Health Consultants, working directly within the medical setting to support patients during their primary care visits. The team also includes a Clinical Psychologist and a Psychiatrist, expanding access to therapeutic assessments and psychiatric services.

Through collaboration with medical providers and an emphasis on whole-person care, we strive to meet the diverse needs of our community with a focus on timely interventions, culturally responsive care, and connecting patients to services and resources to support long-term wellness.

PROGRAMS . . .

STAY VERTICAL, CALAVERAS - *Fall Prevention Program*

SVC is a FREE program sponsored by Mark Twain Health Care District that promotes balance and stability by providing low impact exercise classes, such as Tai Chi and Strength Training for fall prevention.

Classes are held in Arnold, Copperopolis, Murphys, Mountain Ranch, San Andreas and Valley Springs.

(209) 256-2022

Calaveras Wellness – FOUNDATION –

The Calaveras Wellness Foundation (CWF) is a non-profit entity that supports the Mark Twain Health Care District's efforts to improve access to quality healthcare in Calaveras County.

CWF funds will support initiatives such as expanded space for behavioral health and dental services. Employers in virtually all industries currently face staffing issues, so CWF funds may be used to provide grants for employees faced with unexpected situations in order to stabilize and retain staff. After all, it's the right thing to do.

LIVER HEALTH

A new procedure provided by VSHWC is **Velacur**, which is a handheld ultrasound device that is used to assess liver health. It is used to assess liver stiffness and attenuation, which are crucial for diagnosing and managing conditions like MASLD (metabolic dysfunction-associated steatotic liver disease) and MASH (metabolic dysfunction-associated steatohepatitis). Velacur utilizes technology similar to MRI elastography and 3D tissue sampling, but in a non-invasive and convenient manner.

Also, the **ankle-brachial index** (ABI) is a quick non-invasive way to assess blood flow in your legs to identify potential problems like peripheral artery disease (PAD). It is an efficient and easy test that compares blood pressures in your ankles to blood pressure in your arm to help doctors determine if there are any blockages in the arteries of your legs. Early detection of PAD through ABI testing allows for intervention such as lifestyle changes, medication, or procedures to improve blood flow, potentially preventing serious complications. People with risk factors such as smoking, diabetes, high blood pressure, high cholesterol, or those experiencing leg pain should consider getting ABI testing.

AED FOR LIFE

As announced last year, MTHCD established this program to expand the number of functioning AED's (Automatic Electronic Defibrillators) within Calaveras County. We are proud to announce that 20 Zoll AED's have been award and placed at Fire, Sheriff and school locations within the county and an addition 7 units will be award during July 2025.

VA SERVICES

Valley Springs Health & Wellness Center is proud to introduce the O.U.R. Veterans Program, a dedicated initiative designed to stand as a pillar of support for the Calaveras County veteran community. Guided by our core mission—Outreach, Understanding, and Resources—we strive to connect local veterans with the comprehensive care and community backing they deserve. This program is born from a deep-seated recognition that the transition from military to civilian life or simply navigating the complexities of aging as a veteran, requires a specialized, compassionate touch.

The heart of this initiative is reflected in the words of Jose Garza, Veteran Peer Specialist, who notes, "Calaveras County loves and welcomes its Veterans, we just want to show them how much. Helping them live happy and healthy lives gives them the opportunity to enjoy everything our little slice of paradise has to offer." This sentiment captures the essence of our goal: to ensure that the peace our veterans fought to protect is something they can finally experience fully within the rolling hills and quiet beauty of our local landscape.

A Comprehensive Approach to Care

Our program is built on the understanding that wellness is not merely the absence of illness, but a holistic state of being. To support this, O.U.R. Veterans Program focuses on three primary pillars:

1. Outreach: We actively seek out veterans who may feel isolated or unaware of the benefits available to them. By partnering with local community groups, we bring the conversation to where veterans live and gather.
2. Understanding: Our staff is trained to recognize the unique physical and psychological nuances of veteran health, from service-related injuries to the invisible wounds of post-traumatic stress. We provide a safe space where veterans are met with empathy rather than just a clinical checklist.
3. Resources: Navigating the VA system or finding specialized local providers can be a daunting task. We act as a bridge, streamlining access to healthcare, mental health counseling, and social services.

More Than Just Medical Services

Beyond clinical care, the O.U.R. Veterans Program is about fostering a sense of belonging. We recognize that after years of structured military life, the civilian world can sometimes feel disconnected. By creating a hub for resources and a place to be heard, we are rebuilding that sense of camaraderie right here in Calaveras County. We want every veteran to know that their service is a valued part of our county's history, and their well-being is a priority for our future.

Whether you are seeking guidance on physical health care, looking for mental health support, or simply need a welcoming environment to share your story, we are here to serve those who served. By prioritizing the health of our veterans, we are not just treating patients; we are strengthening the fabric of our community and ensuring that those who sacrificed the most can truly enjoy the "slice of paradise" they call home.

PROVIDERS

R. Smart, MD

J. Mosson, MD

D. Stone, MD

R. Nussbaum, MD

D. Salom, DO

VALLEY SPRINGS HEALTH & WELLNESS CENTER

TEAM of the Valley Springs Health & Wellness Center

SERVICES OFFERED

- Primary Care
- Internal Medicine
- Preventive Care
- Pediatric Care
- Chronic Care
- Women's Health-Gynecology
- Diabetic Education
- Liver Scans & Liver Consults
- Laboratory & X-Ray
- Dermatology

Dental Care

for Denti-Cal patients

- 6-Chair Suite
- State-of-the-Art Facility
- Restorative
- X-Ray
- Dental Hygienist

C. Bader, DDS

T. Nguyen, DDS

J. Sommer, DDS

Behavioral Health Services

Anxiety ❖ Depression ❖ Psychology

R. Perry, DO
Gynecologist

C. Vasquez
MD Psychiatrist

D. Davies
MD Psychologist

Susan D-K
LMFT

Breanna H
LMFT

Shannon K
LCSW

PROVIDERS

Ms Crowe
FNP

Ms Coleman
FNP

Ms Murphy
FNP

Ms Date-Chong
PNP

Christine E
PA Dermatologist

C. Chow, DO
Pediatrician

PARTNERSHIPS

- Children's Advocacy Center
- Mark Twain Medical Center
- Mark Twain Foundation
- Dignity Health/Common Spirit
- Calaveras County Public Health
- **Calaveras County Mental Health**
- Calaveras County Health & Human Services
- Calaveras County Office of Education
- Association of California Health Care Districts
- California Special Districts Association
- Anthem Blue Cross
- California Health & Wellness (HealthNet)

PROFESSIONAL AFFILIATIONS

- Mark Twain Medical Center
  Capital Improvements
  - — New Roof
  - — MDF Room (state of the art computer)
  - — Seismic Modifications
  - — Surgery Department Refresh
  - — Classroom Refresh
- Anthem Blue Cross
- California Health & Wellness

MEMBER OF

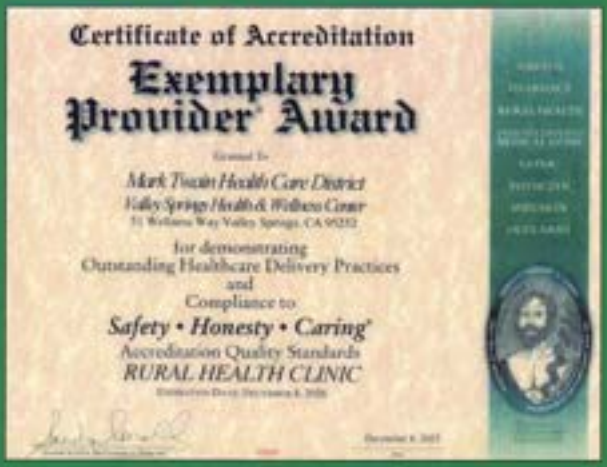
NARHC National Association of Rural Health Clinics

California Special Districts Association
Districts Stronger Together

ACHD Association of California Healthcare Districts

ACCREDITATION

Three mandatory accreditation surveys for Valley Springs Health & Wellness Center with NO DEFICIENCIES.


Certificate of Accreditation

Exemplary Provider® Award

Granted To

Mark Twain Health Care District
Valley Springs Health & Wellness Center
31 Wellness Way Valley Springs, CA 95252

for demonstrating
Outstanding Healthcare Delivery Practices
and
Compliance to
Safety • Honesty • Caring
Accreditation Quality Standards
RURAL HEALTH CLINIC

Effective Date: December 8, 2020

December 8, 2021

***Darrie Gillespie*, CEO**

Jessica Gwaltney - ***Kristine Slocum***
ADMINISTRATIVE ANALYST **FINANCE MANAGER**

MARK TWAIN
HEALTH CARE DISTRICT
PO BOX 95 | SAN ANDREAS, CA 95249
(209) 754-4468
MTHCD.ORG

Calaveras Wellness Foundation

Annual Meeting

June 26, 2026

1. Ms Bettinger called the meeting to order at 2:05 PM at the Mark Twain Health Care District (MTHCD) Board Room.
2. Attendance:
    a. Ms. Bettinger: Chair
    b. Ms. Phillips: Secretary
    c. Dr. Smart: Executive Director
    d. Peggy Stout: absent without excuse
    e. Kristine Slocum, Accounting
    f. Darrie Gillespie: MTHCD CEO
3. A letter was received from Peggy Stout resigning from the CWF effective immediately. The letter was accepted.
    a. Ms. Stout's resignation created a vacancy on the Foundation Board. Discussion by the Board ensured.
    b. Ms. Slocum was nominated to the Board. Her nomination will be forwarded to the general member board (MTHCD) for approval.
4. Dr. Smart announced that since he is no longer the MTHCD CEO he would resign the Executive Director position on the Foundation board, but would prefer to stay on the Board as a member-at-large.
    a. Ms. Bettinger made a motion to accept Dr. Smart's proposal. There was no further discussion.
        i. All Board members voted Aye. Motion carried.
5. Dr. Smart nominated Ms. Gillespie to be the new Foundation Executive Director. Ms. Gillespie accepted the nomination.
    a. Motion was seconded by Ms. Phillips.
    b. All Board members voted "Aye". Motion carried.
6. Dr. Smart then reviewed the bylaws of the Calaveras Wellness Foundation.
    a. Emphasis was on reporting to the MTHCD Board
    b. Reviewed process for annual Foundation officer re-organization
    c. Ms. Bettinger made a motion to amend the bylaws such that;
        i. Verbal reporting to the MTHCD Board would occur quarterly
        ii. Financial reporting would occur the 2nd and 4th qtr of each calendar year as a written report to the MTHCD Board.

7. Ms. Slocum then presented an accounting review of the Foundation accounts over the last year.
    a. Discussion revolved around Article 2.1 of the Foundation bylaws
        i. "…not organized for the private gain of any person.:
        ii. Ms. Slocum agreed to review this issue and report back to the Board.
    b. The Foundation finances are in reasonably good shape with accounts reflecting $77,724.78 in cash on hand, of which $16,304.71 is unrestricted.
        i. Dr. Smart moved to accept the financial report and forward to the MTHCD Board. Motion was seconded by Ms. Bettinger and carried with unanimous "aye" votes.
8. Annual Election of Officers:
    a. Dr. Smart nominated Ms. Bettinger for Chairperson. Motion was seconded by Ms. Phillips. The motion carried with unanimous "aye" votes.
    b. Ms. Bettinger nominated Ms. Phillips to be Secretary of the Board. Dr. Smart seconded the motion and it carried with unanimous "aye" votes.
    c. Ms. Bettinger nominated Ms. Slocum to be Treasurer of the Board. Ms. Phillips seconded the motion and it carried with unanimous "aye" votes.
    d. The Foundation Board composition would then be as follows:
        i. **Chairperson: Ms. Bettinger**
        ii. **Secretary: Ms. Phillips**
        iii. **Treasurer: Ms Slocum**
        iv. **Member at Large: Dr. Smart**
        v. **Executive Director (Ex Officio): Ms. Gillespie**
9. Goals and Strategy:
    a. There then ensued a discussion regarding 2026 Foundation goals. Many ideas were presented and discussed. The Board agreed that the Foundation should start to consider fund-raising events with specific themes and projects in mind. In the interim they agreed to start to focus on healthcare career scholarships.
    b. A second goal would be to support any educational pursuit by employees of the Valley Spring Health & Wellness Center.
    c. A third goal is to provide support to VSHWC employees who are experiencing financial difficulties for a short focused period of time. The scope of this, as well as the details of funding, will depend on the report back provided by Ms. Slocum at the next meeting.
10. Dr. Smart then made a motion to forward the minutes of this meeting and the election of Foundation officers to the MTHCD Board of Directors.

11. Ms Phillips then moved to adjourn the meeting and meet again on August 13th at 2:30. The meeting will take place the the MTHCD Board Room in San Andreas, CA.

Respectfully Submitted:

RSmart, Executive Director

Calaveras Wellness Foundation

BYLAWS OF CALAVERAS WELLNESS FOUNDATION
A California Nonprofit Public Benefit Corporation
Effective March [ ], 2023

ARTICLE I
NAME AND PRINCIPAL OFFICE

1.1 Name. The name of this corporation is Calaveras Wellness Foundation (the "Corporation), a nonprofit public benefit corporation organized under the laws of the State of California.

1.2 Principal Office. The principal office for the transaction of the business of the Corporation may be established at any place or places within or without the State of California by resolution of the Board.

ARTICLE II
PURPOSES

2.1 General Purpose. The Corporation is a nonprofit public benefit corporation and is not organized for the private gain of any person. It is organized under the Nonprofit Corporation Law of California ("California Nonprofit Corporation Law") for charitable purposes.

2.2 Specific Purpose. This Corporation shall be dedicated to exclusively act as a community based fundraising and community outreach organization operating in a manner consistent with the goals established by and for the sole benefit of the Mark Twain Healthcare District, a political subdivision of the State of California formed pursuant to California Health & Safety Code 32000.

ARTICLE III
LIMITATIONS

3.1 Political Activities. The Corporation has been formed under California Nonprofit Corporation Law for the charitable purposes described in Article 2, and it shall be nonprofit and nonpartisan. No substantial part of the activities of the Corporation shall consist of carrying on propaganda, or otherwise attempting to influence legislation, and the Corporation shall not participate in or intervene in any political campaign (including the publishing or distribution of statements) on behalf of, or in opposition to, any candidate for public office.

3.2 Prohibited Activities. The Corporation shall not, except in any insubstantial degree, engage in any activities or exercise any powers that are not in furtherance of the purposes described in Article 2. The Corporation may not carry on any activity for the profit of its Officers, Directors or other private persons or distribute any gains, profits or dividends to its Officers, Directors or other persons as such. Furthermore, nothing in Article 3 shall be construed as allowing the Corporation to engage in any activity not permitted to be carried on (i) by a corporation exempt

from federal income tax under section 501(c)(3) of the Internal Revenue Code of 1986, as amended (the "Code") or (ii) by a corporation, contributions to which are deductible under section 170(c)(2) of the Code.

ARTICLE IV
DEDICATION OF ASSETS

4.1 Property Dedicated to Nonprofit Purposes. The property of the Corporation is irrevocably dedicated to charitable purposes. No part of the net income or assets of the Corporation shall ever inure to the benefit of any of its Directors or Officers, or to the benefit of any private person, except that the Corporation is authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of the purposes set forth in Article 2 hereof.

4.2 Distribution of Assets Upon Dissolution. Upon the dissolution or winding up of the Corporation, and after paying or adequately providing for its debts and obligations, the remaining assets of the Corporation shall be distributed to and shall become the property of the Mark Twain Health Care District, a healthcare district and political subdivision of the State of California. If Mark Twain Health Care District no longer exists, then upon dissolution the corporation's assets remaining after the payment, or provision of payment, of all debts and liabilities of the corporation, shall be distributed to a nonprofit fund or corporation that is organized and operated exclusively for charitable or public purposes and which has established its tax exempt status under Section 501(c)(3) of the Code.

ARTICLE V
MEMBERSHIP

5.1 General Member. There shall be one member of this Corporation who shall be the Mark Twain Healthcare District, a political subdivision of the State of California (the "General Member"). The General Member, and only the General Member, shall be entitled to exercise fully all rights and privileges of members of nonprofit corporations under the California Nonprofit Public Benefit Corporation Law, and all other applicable laws. The General Member may not be expelled or suspended as the General Member without its consent. Any reference in these Bylaws to the "member," "Member," "general member," "General Member," "corporate member," or "Corporate Member" of this Corporation, or any similar such reference, shall mean the Mark Twain Healthcare District, a political subdivision of the State of California. By reason of the rights or status of the General Member herein, there has been no express or implied delegation of any public agency authority from the General Member to this Corporation.

5.2 Exercise of Membership Rights. The General Member shall exercise its membership rights through its own Board of Directors. Subject to the provisions of the General Member's own bylaws, and except as otherwise provided in these Bylaws, the Board of Directors of the General Member may, by resolution, authorize a person or committee of persons to exercise

its vote on any matter to come before the membership of this Corporation. In addition, the General Member may exercise its membership rights at any regular or special meeting of the Board of Directors of the General Member. The functions required by law or by these Bylaws to be performed at the annual membership meeting or any regular or special meeting of the members of this Corporation may be performed at any regular or special meeting of the General Member's own Board of Directors.

5.3 Liabilities and Assessments. The General Member shall not be liable for the debts of this Corporation. The Board of this Corporation shall have no power to levy and collect assessments on the General Member. The provisions of this paragraph cannot be amended in any manner.

5.4. Support Services Provided by General Member. In consideration of its status as the General Member of the Corporation, the General Member shall provide such support staffing and services as may be necessary for the Corporation to fulfill its purposes, as such needs are identified by mutual agreement of the Corporation and the General Member.

ARTICLE VI
BOARD OF DIRECTORS

6.1 Responsibility. Except as otherwise provided by the Articles of Incorporation or by these Bylaws and the laws of the State of California, the management of the affairs of this Corporation shall be vested in a Board of Directors (the "Board"). The Board may delegate the management of the activities of the Corporation to any person or persons, a management company, or committees however composed, provided that the activities and affairs of the Corporation shall be managed and all corporate powers shall be exercised under the ultimate direction of the Board. Subject to the same limitations, the Board shall have all powers permitted to or conferred by Law on the board of directors of a nonprofit public benefit corporation.

6.2 Number. The Board shall consist of at least three (3) but no more than _ _[number]_ _ directors unless changed by amendment to these bylaws. The exact number of directors shall be fixed, within those limits, by a resolution adopted by the Board. **Consider – District CEO as ex officio board member?**

6.3 Composition of the Board. Anything to the contrary herein notwithstanding, (i) the Board shall nominate the Directors to the Board, who shall become Directors upon final approval of the General Member and (ii) in the event the Board nominees are rejected by the General Member, the Board may nominate additional nominees until the requisite number of nominees are approved by the General Member.

6.4 Vacancies. Subject to the provisions of section 5226 of the California Corporations Code, any Director may resign effective upon giving written notice to the Executive Director, the Secretary or the Chairperson or Treasurer, unless the notice specifies a later time for the effectiveness of such resignation.

6.4.1 A vacancy or vacancies in the Board shall be deemed to exist in case of the death, resignation or removal of any Director, or if the authorized number of Directors is increased.

6.4.2 Vacancies in the Board shall be filled pursuant to Section 6.3 of these Bylaws.

6.4.3 Directors may be removed without cause by the General Member.

6.4.4 A person elected to fill a vacancy as provided by this Section shall hold office until the next meeting for nomination of Directors by the Board or until his or her earlier death, resignation or removal from office.

6.5 Voting Rights. Each voting Director shall be entitled to one (1) vote on all matters before the Board. There shall be no voting by proxy.

6.6 Organizational Meeting. As soon as reasonably possible after the formation of this Corporation, the Board shall meet for the purposes of organizing the Board, the election of officers, and the transaction of such other business as may come before the meeting.

6.7 Regular Meetings. The Board shall hold an annual meeting, and may hold additional meetings as determined by the Board, at such time and place as the Board shall from time to time determine.

6.8 Special Meetings. Special meetings of the Board for any purpose or purposes shall be called by the Secretary upon the request of the Chair, the Executive Director or any two (2) Directors.

6.9 Notice of Meetings. Notice of the time and place of any meeting shall be delivered personally, communicated by telephone or electronic mail, or sent to each Director by first-class mail, charges prepaid, addressed to the Director either at his or her address as it is shown on the records or if it is not so shown or is not readily ascertainable, to the place where the principal office of the Corporation is located. If sent by mail, such notice shall be mailed at least four (4) days prior to the meeting.

6.10 Quorum. A majority of the voting members of the Board then serving shall constitute a quorum at any meeting of the Board. The act of the majority of the voting power present at any meeting at which a quorum is present shall be considered the act of the Board.

6.11 Place. The Board shall hold its meetings at the principal office of the Corporation, or the principal office of the General Member, or such other place as the Chair or the Directors requesting the meeting may designate.

6.12 Validation of Transactions. The transactions of the Board at any meeting, however called or noticed, or wherever held, shall be as valid as though had at a meeting duly held after regular call and notice, if a quorum be present and if, either before or after the meeting, each Director entitled to vote at the meeting for that purpose not present signs a written waiver of notice, a consent to the holding of such meeting, or an approval of the minutes thereof. All such waivers, consents or approvals shall be filed with the corporate records and made a part of the minutes of the meeting.

6.13 Action Without Meeting. Any action required or permitted to be taken by the Board under the provisions of the California Corporations Code, the Articles of Incorporation, or these Bylaws may be taken without a meeting, if all members of the Board shall individually or collectively consent in writing to such action. Such action by written consent shall be filed with the minutes of the proceedings of the Board. Such action by written consent shall have the same force and effect as a unanimous vote of such Directors. Any certificate or other document filed on behalf of the Corporation relating to an action taken by the Board without a meeting shall state that the action was taken by a unanimous written consent of the Board without a meeting, and that the Bylaws of this Corporation authorize its Directors to so act.

6.14 Quorum Initially Present. A meeting at which a quorum is initially present may continue to transact business notwithstanding the withdrawal of Directors if any action is approved by at least a majority of the required quorum for such meeting, or such greater number as is required by the California Corporations Code, the Articles of Incorporation or these Bylaws.

6.15 Telephonic Meetings. Members of the Board may participate in a meeting through use of a conference telephone or similar communications equipment, so long as each Director participating in such meeting can simultaneously hear all other Directors so participating. Participation in a meeting pursuant to this Section constitutes presence in person at such meeting.

6.16 Conflict of Interest Policy. The Board shall adopt and adhere to the then current conflicts of interest policy adopted by the General Member (the "Conflicts Policy").

6.17 Self-Dealing. Prior to conducting a business session at a meeting of the Board, Board members shall disclose and discuss their individual conflicts or potential conflicts and that of other members of the Board. Actual conflicts shall be subject to resolution pursuant to the Conflicts Policy and applicable federal and state non-profit corporation laws. In the exercise of voting rights by members of the Board, no individual shall vote on any issue, motion, or resolution which directly or indirectly inures to his or her benefit financially or with respect to which he or she has any other conflict of interest, except that such individual may be counted in order to qualify a quorum and, except as the Board may otherwise direct, may participate in the discussion of such an issue, motion, or resolution if he or she first discloses the nature of his or her interest. Board members shall adhere to the Conflict of Interest Policy enacted pursuant to Section 6.16 of these Bylaws, and the Fiduciary Policy developed and implemented by the Board.

6.18 Access to Board Records and Reports. Upon request, officers of the General Member shall have access to the Corporation's documents for review (but not possession) that have been reviewed by the Board of Directors. Such review shall be subject to the officer executing an agreement to maintain the confidentiality (no disclosure beyond officers of the General Member) of information reviewed. Documents that are protected by legal privileges and confidentiality (e.g., personnel, peer review, legal, vendor contractual confidentiality), those containing pending competitive business transaction information shall not be subject to review. Subject to the execution of an agreement to maintain confidentiality, Board member and Board selected candidate conflict disclosure filings shall be available for review at the Corporation's offices only to the chief executive or designated legal counsel of the General Member upon request.

6.19 Quarterly Financial Statements. The Board shall submit quarterly financial statements to the General Member, in a form acceptable to the General Member. Said quarterly financial reports shall be provided to the General Member no later than 60 days after the end of each calendar quarter.

6.20 Bylaw Review. Consistent with regulatory and industry standards, the Board shall periodically conduct a review of these Bylaws in order to update and improve them. At least every two (2) years, the Board shall seek the input of the General Member in connection with such a review.

ARTICLE VII
OFFICERS

7.1 Officers of the Corporation. The officers of the Corporation ("Officers") shall be a Chairperson, Executive Director, a Secretary, and a Treasurer or Chief Financial Officer, or both. Other than the Chairperson, these persons may, but need not be, selected from among the Directors. The Board shall have the power to designate additional Officers who also need not be Directors, with such duties, powers, titles and privileges as the Board may fix. Any number of offices may be held by the same person except that neither the Secretary, Treasurer, nor Chief Financial Officer may serve as the Executive Director or Chairperson of the Board.

7.2 Officers Elected by the Board. The Officers shall be elected by the Board at its annual meeting. Each officer elected by the Board shall hold office at the pleasure of the Board and until his or her successor shall be elected and qualified to serve. A vacancy in any office because of death, resignation, removal, disqualification or otherwise, may be filled by the Board for the unexpired term at any meeting of the Board.

7.3 Resignation or Removal. Any officer may resign at any time or be removed by the vote of the Board.

7.4 Vacancies in Office. A vacancy in any office because of death, resignation, removal, or any other cause shall be filled in the manner prescribed in these bylaws for regular appointments.

7.5 Chairperson. The Chairperson of the Board shall preside at all meetings of the Board.

7.6 Treasurer. The Treasurer of the Corporation shall keep and maintain or cause to be kept and maintained adequate and correct account of the properties and business transactions of the Corporation, including accounts of its assets, liabilities, receipts, disbursements, gains and losses. The books of account shall at all times be open to inspection by any Board member. The Treasurer shall be charged with safeguarding the assets of the Corporation and he or she shall sign financial documents on behalf of the Corporation in accordance with the established policies of the Corporation. He or she shall have such other powers and perform such other duties as may be prescribed by the Board from time-to-time.

7.7 Secretary. The Secretary shall keep or cause to be kept a book of minutes at the principal office or at such other place as the Board may order of all meetings of the Board with the time and place of holding, whether regular or special, and if special, how authorized, the notice thereof given, the names of those present at the Board meetings, and the proceedings thereof. The Secretary shall give or cause to be given notice of all the meetings of the Board required by these bylaws or by law to be given, and the Secretary shall have such other powers and perform such other duties as may be prescribed, by the Board from time-to-time.

7.8 Executive Director.

7.8.1 Appointment and Removal. The Executive Director of this Corporation shall be engaged by the Board and shall serve at the pleasure of the Board, which may terminate the services of the Executive Director of this Corporation subject to any employment agreement.

7.8.2 Responsibilities and Authority. The Executive Director shall be the general manager, administrator and Executive Director of this Corporation. The Executive Director shall be given the necessary authority and responsibility to operate this Corporation in all of its activities. The Executive Director shall be subject to such policies as may be adopted and such orders as may be issued by the Board of this Corporation or by any of its committees to which the Board has delegated the power for such action; with respect to program execution and overall management performance, the Executive Director shall be subject to the authority of and shall report to the Board. The Executive Director shall act as the duly authorized representative of the Board of this Corporation in all matters in which the Board has not formally designated some other person to so act.

ARTICLE VIII
COMMITTEES

8.1 Committees Generally. Subject to the duty of the Board to exercise ultimate direction over the activities and affairs of the Corporation, the Board may authorize any special committee to carry out certain specified functions or responsibilities, or to provide such advice and recommendation as the Board shall require, but no such committee shall have the authority to determine Corporation

policy or otherwise exercise any powers of the Board with respect to the business and affairs of the Corporation.

8.2 Committee Appointments. The chair and members of each committee shall, except as herein provided, be appointed by the Chairperson of the Board, subject to approval by the Board.

8.3 Quorum: Meeting. A majority of the members of the committee shall constitute a quorum at any meeting of that committee. Each committee shall meet as often as necessary to perform its duties, at such times and places as directed by its chair or by the Board of Directors. Each committee shall keep accurate minutes of its meeting, the chair designating a secretary of the committee for this purpose, and shall make periodic reports and recommendations to the Board.

8.4 Vacancies. Vacancies in any committee shall be filled in the same manner as provided in the case of original appointment.

8.5 Expenditures. Any expenditure of Corporate funds shall require prior approval of the Board.

ARTICLE IX
TRANSACTIONS REQUIRING GENERAL MEMBER APPROVAL

9.1 Approval Requirement. Notwithstanding anything in these bylaws to the contrary, neither the Board nor any officer or employee of this Corporation may take any of the following actions without the authority first had and obtained from the General Member of the Corporation, to wit:

9.1.1 Merger, consolidation, reorganization, or dissolution of this Corporation or any subsidiary or affiliate entity;

9.1.2 Amendment or restatement of the Articles of Incorporation or the Bylaws of the Corporation;

9.1.3 Adoption of operating budgets of this Corporation or any subsidiary or affiliate entity, including consolidated or combined budgets of this Corporation and all subsidiary organizations of this Corporation, if such operating budgets are outside the guidelines established by the General Member;

9.1.4 Adoption of capital budgets of this Corporation or any subsidiary or affiliate entity (although the Board is empowered to develop its own capital budget or approve the capital budget for any subsidiary or affiliate entity within the guidelines and objectives set by the General Member);

9.1.5 Aggregate operating expenditures on an annual basis which exceed approved operating budgets by a dollar amount which is at least five percent (5%) of the approved operating

budget to this Corporation or aggregate capital expenditures on an annual basis which exceed approved capital budgets by a dollar amount which is at least twenty percent (20%) of this Corporation's approved capital budget, provided that any operating or capital expenditures which exceed approved operating or capital budgets by any amount must be approved by the General Member if the fund balance or cash reserves of this Corporation are not sufficient to cover the expenditures or if the transaction requires approval under any other Section of these bylaws;

9.1.6 Long-term borrowing including, but not limited to, capitalized lease agreements and installment contracts having a present value which exceeds a dollar amount to be determined from time-to-time by the Board of Directors of the General Member;

9.1.7 Purchase, sale, lease, disposition, hypothecation, exchange, gift, pledge or encumbrance by the Corporation of any asset, real or personal, with a fair market value in excess of a dollar amount equal to ten percent (10%) of the consolidated fund balance of this Corporation and all of its subsidiaries and affiliates if the transaction was not included in an approved capital budget;

9.1.8 Appointment of an independent auditor and approval of independent counsel, provided that in conflict situations occurring between the General Member and this Corporation, the Board shall be entitled to select its own independent counsel without the General Member's approval;

9.1.9 The creation or acquisition of any subsidiary or affiliate entity;

9.1.10 Contracting with an unrelated third party for all or substantially all of the management of the assets or operations of this Corporation or any subsidiary or affiliate entity;

9.1.11 Approval of major new programs of this Corporation or any subsidiary or affiliate entity. The General Member shall from time-to-time define the term "major" in this context;

9.1.12 Approval of strategic plans; or

9.1.13 Other major activities (as hereinafter defined). "Major Activities" shall be those which the General Member's board of directors has declared major by written notice to this Corporation, delivered personally or deposited by registered or certified mail, return receipt requested. Such notice shall specifically identify the matter or matters requiring approval of the General Member, and shall refer to this bylaw provision granting such approval rights to the General Member. Notices received pursuant to this Section shall be recorded in the minutes of this Corporation and shall be filed with the minutes of this Corporation.

9.2 Requirement of Reasonableness and Consistency. In exercising any approval rights described in Section 9.1 of this Article IX, the General Member shall act in a reasonable and consistent fashion. Approval may be obtained as required by this Article IX from the General Member's Chief Executive Officer on behalf of the General Member.

ARTICLE X
GENERAL PROVISIONS

10.1 Compensation of Board Members. The members of the Board shall receive no compensation as such, except that they may be reimbursed from time to time for all expenses incurred on behalf of this Corporation.

10.2 Indemnification. To the fullest extent permitted by law, this Corporation shall indemnify its "agents", as described in Section 5238(a) of the Law, including its directors, officers, employees, and volunteers, and including persons formerly occupying any such position, and their heirs, executors, and administrators, against all expenses, judgments, fines, settlements, and other amounts actually and reasonably incurred by them in connection with any "proceeding," as that term is used in said Section 5238(a), and including an action by or in the right of the Corporation, by reason of the fact that the person is or was a person described in that Section. "Expenses" shall have the same meaning as in said Section. Such right of indemnification shall not be deemed exclusive of any other rights to which such persons may be entitled under law. To the fullest extent permitted by law and except as otherwise determined by the Board in a specific instance, expenses incurred by a person seeking indemnification in defending any "proceeding" shall be advanced by the Corporation before final disposition of the proceeding upon receipt by the Corporation of an undertaking by or on behalf of that person to repay such amount unless it is ultimately determined that the person is entitled to be indemnified by the Corporation for those expenses.

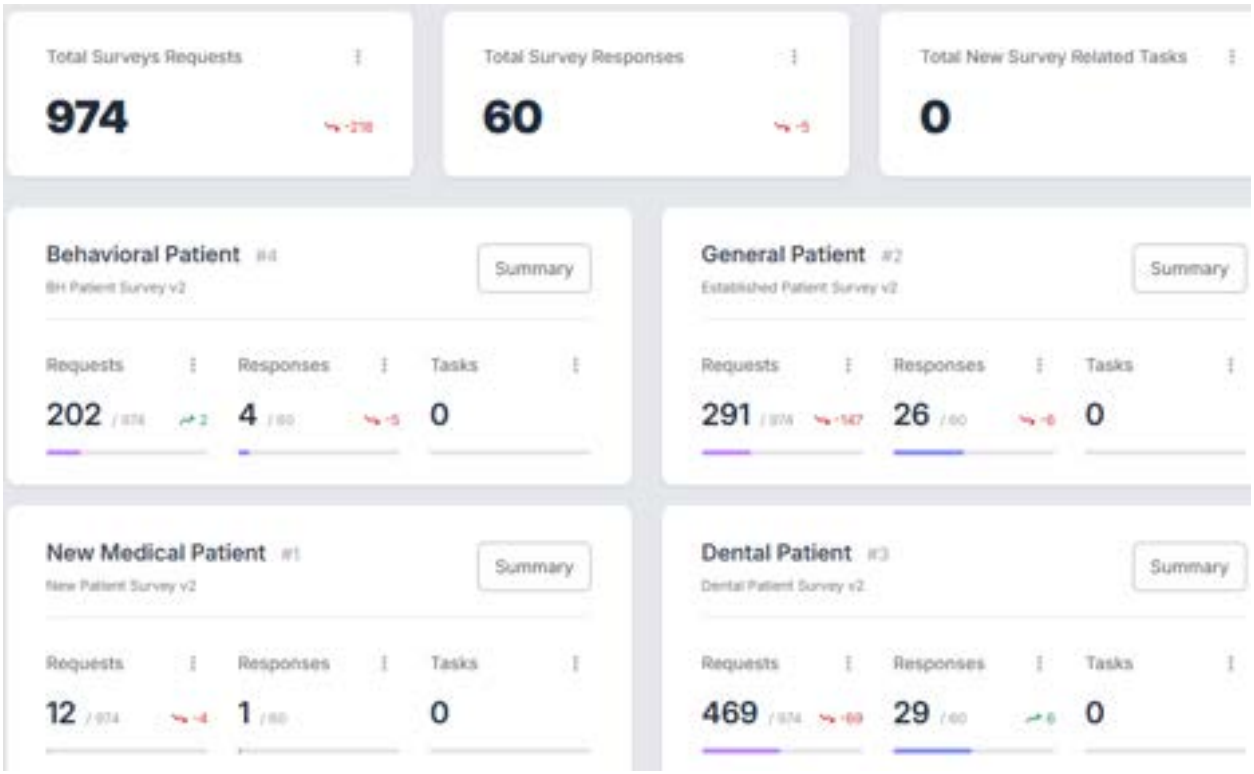
The Corporation shall have power to purchase and maintain insurance to the fullest extent permitted by law on behalf of any agent of the Corporation, against any liability asserted against or incurred by the agent in such capacity or arising out of the agent's status as such, or to give other indemnification to the extent permitted by law.

10.3 Fiscal Year. The fiscal year of this Corporation shall end on December 31 of each year.

10.4 Construction and Definitions. Unless the context requires otherwise, the general provisions, rules of construction, and definitions in the California Nonprofit Corporation Law shall govern the construction of these Bylaws. Without limiting the generality of the preceding sentence, the masculine gender includes the feminine and neuter, the singular number includes the plural, the plural number includes the singular and the term "person" includes both a legal entity and a natural person.

10.5. Bylaws and Articles of Incorporation Amendment. Amendment of the Articles of Incorporation and these Bylaws may only be adopted by the approval of the Board of Directors and by the approval of the General Member of this Corporation.

Quality Metric'	Jul-25	Aug-25	Sep-25	Oct-25	Nov-25	Dec-25	Jan-26	Feb-26	Mar-26	Apr-26	May-26	Jun-26	Total	Census Fiscal YTD	MTD Payor Mix	Fiscal YTD Payor Mix	Historical Payor Mix	Difference	
Patient Visits Total	2704	2427	2719	2882	2379	2630	2724	2934	3485	3346	2726	3047	34003	34003				6330	
Medi-Cal	1816	1610	1944	2079	1716	1940	1980	2100	2421	2414	1996	2206	24222	24222	72%	71%	71%		**DOWN 503 CLOSED 3 DAYS /PROVIDERS OFF & ILLNESS
Medicare	378	360	356	325	263	305	338	355	456	376	307	380	4199	4199	12%	12%	12%		
Cash Pay	15	11	8	8	24	13	18	13	17	9	26	25	187	187	1%	1%	1%		
Commercial	495	446	411	470	376	372	388	466	591	547	397	436	5395	5395	14%	16%	16%		
Pediatrics 0-16 yrs	398	343	429	425	402	409	444	527	635	630	571	528	5741					1712	
Behavioral Health	605	560	624	573	461	519	517	561	641	687	632	716	7096					2346	
Dental	484	415	654	765	737	754	744	745	882	845	769	844	8638					3042	
Main	1615	1452	1603	1544	1181	1357	1463	1628	1962	1814	1325	1487	18431						
Total Empanelled Patients	6566	6632	6675	6773	6840	6947	7067	7169	7134	7158	6964	7058							
Total New Patients SEEN	97	82	135	120	91	98	155	131	120	123	58	70	1280						
Total New Pt's REGISTERED	70	110	75	123	82	111	140	116	114	105	57	95	1198						
Robo Doc Calls	*0	23	36	64	37	26	23	32	55	44	35	3	378					411	
Incident Reports																			
Patient Satisfaction																			
Peer Review/Fallouts																			
Employee turnover																			
Wait time for appointments																			
Patient No-shows	273	219	303	354	238	302	308	275	374	372	313	318							
Monthly % of NO Shows	9%	8%	10%	11%	9%	10%	10%	8%	9%	10%	10%	9%							
Employee Satisfaction																			
1=All Financial data in Finance Report																			
* Line # 21-B & M School out for summer																			
* LINE 21 G School closed for X-Mas break																			



Response rate: Total 6.2% (prior 6.5%); BH 2% (prior 4.5%); Dental 6.2% (prior: 4.28%); General Medical 12.44% (prior: 7.31%); (prior: New Patient 8.33% (prior 6.25%)

MEDICAL:

Did the facility appear clean, professional, and equipped withappropriate technology for your care?		
Poor	0	0%
Not Good	0	0%
Acceptable	0	0%
Good	5	22%
Excellent	18	78%

How would you rate your overall experience with your provider?		
Poor	0	0%
Not Good	0	0%
Acceptable	0	0%
Good	5	22%
Excellent	18	78%

Dental:

Did the facility appear clean, professional, and equipped withappropriate technology for your care?		
Poor	0	0%
Not Good	0	0%
Acceptable	0	0%
Good	1	4%
Excellent	26	96%

How would you rate your overall experience with yourdentist/hygienist?		
Poor	0	0%
Not Good	0	0%
Acceptable	0	0%
Good	2	7%
Excellent	26	93%

Behavioral Health:

My BH Provider acts professionally, empathetically, and with care.		
Agree	3	100%
Disagree	0	0%
About the same	0	0%
I have not received therapy	0	0%
N/A-I did not receive this ser	0	0%

I deal more effectively with daily problems and relationships becauseof therapy.		
Agree	4	100%
Disagree	0	0%
About the same	0	0%
I have not received therapy	0	0%
N/A-I did not receive this ser	0	0%

Mark Twain Health Care District Policy No. 23

Request for Public Funds, Community Grants & Sponsorships:

Under the law, the District may provide assistance to health care programs, services and activities at any location within the District for the benefit of the District and the people served by the District and to non-profit provider groups and clinics functioning in Calaveras County in order to provide adequate health services to people in communities served by the District. (Calaveras Health and Safety Code Sections 32121(j) and 32126.5)

A. The community's health needs are served not only by traditional acute care hospitals, but also by a broad array of other health-related programs and initiatives. These include local health and wellness programs, community-based clinics, health provider educational programs, and other programs and organizations that promote physical, emotional and psychological well-being. Areas of consideration may include, but are not limited to, Behavioral Health, Dental, Rehabilitation, Women's Issues, Children's needs, Social determinants of health and access to food, Student Scholarships in human health care related studies, Senior programs, Telehealth technology and Community Services.

B. **POLICY**: The District shall have a ~~Golden Health Community~~ Grants and Sponsorship program, as finances allow, to address identified community health care needs as envisioned by the Mission Statement and the Strategic Plan. In conjunction with setting the District's annual budget each year, the District shall determine the amount to be budgeted to help fund these grant and sponsorship needs.

C. **GRANT and SPONSORSHIP REQUESTS:**

1. **Requirements**:

   a. All Grant and Sponsorship requests must be submitted in writing on the MTHCD ~~Golden Health Community~~ Grant and Sponsorship Form and must be filled out in accordance with instructions provided. ~~Completed Golden Health Community~~ Grant and Sponsorship Request Forms shall be returned to the District Office by mail or email.

   b. When requesting Sponsorship funding for health fairs, health education and training projects, etc. requestors should provide complete information about the event/project and how it relates directly to providing health-related services to people in this District.

   c. The District shall have the option to sponsor student scholarships in human health-related fields of higher learning, health education classes or other community services, at its own discretion.

2. **Processing Grant and Sponsorship Requests**

   a. Decision Tree will be used to guide the Committee in processing applications (Attachment # 2)

   b. Requests for funding may be presented to the Board for Approval after review and recommendation by the Board President and CEO or the Grants

Committee.

c. Completed grant requests shall be processed in accordance with the subsection below.

d. Grant and Sponsorship notification letters for awards and denials shall be provided to all applicants. This information will be tracked and recorded in a database by the District Accounting Office & CEO.

3. **Approved Grants and Sponsorship Requests**

a. The Grants Committee shall make a recommendation to the Board of Directors and notify the applicant and the District Finance Committee of the grant or sponsorship award.

b. Grants and Sponsorships shall be awarded for a period not to exceed one year.

c. The Grant or Sponsorship recipient, Grants Committee and the District CEO will work together to develop and distribute a press release, if desired.

D. **ACCOUNTABILITY:**

1. The Grants Committee may make post-award site visits to assess the appropriate use of the grant award. Visits may be unannounced.

2. Grant recipients will be asked to make a brief 5-minute presentation to the Board, approximately 6 months after receiving the grant award, to account for the appropriate intended use of the grant.

3. Grant recipients shall provide the Board with a final accounting of grant awards at the end of each fiscal year.

4. Grant recipients who do not effectively administer their grant funding as intended, may be asked to return unused grant money and may become ineligible to apply for future grants for a period of up to 2 years.

MARK TWAIN
HEALTH CARE DISTRICT

P. O. Box 95
San Andreas, CA 95249
(209) 754-4468 Telephone

Policy# 23 – Attachment # 1

~~GOLDEN HEALTH COMMUNITY~~ GRANT & SPONSORSHIP APPLICATION

Name of Group or Individual: _____

Address: _____

Provide your 501 (c) 3 Number: _____

Contact Person: _____

Telephone Number:_____Fax Number: _____

Email Address: _____Website:_____

Description of Project, Including Purpose, Date and Target Population:_____

_____

_____

Amount Requested:_____Total Cost of Project:_____

Please Submit Project Budget: Other Sources of Funding:_____

Please describe how this grant will impact the health of the community within the scope of the

MTHCD Health Priorities:_____

_____

_____

_____

Please send your completed application to: MTHCD ~~Golden Health Community~~ Grants, P O Box 95, San Andreas, CA 95249 or email to dgillespie@mthcd.org

Below is for District Use:

Received by:_____Date:_____

Reviewed Date:_____

Denied Date:_____

Date Board Approved: _____

MARK TWAIN
HEALTH CARE DISTRICT

P. O. Box 95
San Andreas, CA 95249
(209) 754-4468 Telephone

Policy # 23 – Attachment # 2

Decision Tree For Requests for District Participation			
		Reviewer	
1. Is the project within the District Jurisdiction (County Borders)?	**Yes, Go to Question 2**	**CEO**	~~**No, reject**~~ **Grants committee**
2. ~~Is the project health care?~~ Does it further the mission to promote healthcare in Calaveras County?	**Yes, Go to Question 3**	**CEO**	~~**No, reject**~~ **Grants committee**
3. ~~Is the project legal?~~ Is the project legally compliant and consistent with applicable regulations, District policies, and governance requirements?	**Yes, Go to Question 4**	**CEO**	~~**No, reject**~~ **Grants committee**
4. Does the District have capacity, infrastructure, funding to do the project?	**Yes, Go to Question 5**	**CEO**	~~**No, reject**~~ **Grants committee**
5. Does this request present any potential legal, regulatory, financial, or reputational risk to the District?	**No, Go to Question 6**	**CEO**	~~**Yes. Check with District carrier**~~ **Yes, refer the request to District Legal Counsel for review before a funding decision is made.**
6.Refer to the Grants Committee	**Yes. Refer to Board**	**Chair**	**No, inform Board of the Committee's recommendation.**
Other Considerations: Is there history?			
Is it political?			
Is it a fundraiser? For what?			
Are there legal contracts, MOU's			
Is it within budget?			

MARK TWAIN
HEALTH CARE DISTRICT

P. O. Box 95
San Andreas, CA 95249
(209) 754-4468 Telephone

Attachment # 3 – Agreement

Today's Date: _____

Recipient Address

Attn: _____

_____

_____

_____

Re: Letter of Agreement for [Recipient] for (Program)_____

Dear _____:

The Mark Twain Health Care District ("*MTHCD*") agrees to provide [Recipient] with funds to help support its (Program)_____that will serve members of the community who live, work, or obtain an education within the boundaries of MTHCD ("*Program*"); specific details of which are incorporated into this funding agreement through the proposal submitted by [Recipient] and attached hereto as Exhibit A. MTHCD agrees to provide support with funds as follows:

1. MTHCD will provide _____Dollars ($_____) to [Recipient] to use to support the Program ("*Funds*"). [Recipient] represents and warrants that Funds will be expended exclusively to support the Program, as set forth in Exhibit A attached hereto, and not for any other use or purpose. Any and all Funds not expended to support the Program must immediately be returned to MTHCD.

2. [Recipient] will comply with all recordkeeping and reporting requirement as outlined in Mark Twain Health Care District Recordkeeping & Reporting Requirements, attached hereto as Exhibit B, including reporting to MTHCD on the dates following six (6) months and twelve (12) months following the date of this letter.

3. MTHCD has the right to verify the proper use of the Funds and may, upon five (5) days written notice, audit and inspect all of the [Recipient]'s books, records, and documents of every kind related to the operation, administration, and expenditures of the Program.

4. MTHCD funds shall be applied only for the benefit of program recipients living, working, or attending school within the district and shall only be used to fund the Program.

5. If the Program is terminated or substantially modified at any time during the grant period, MTHCD may withdraw any remaining Funds not yet paid.

6. [Recipient] shall indemnify, defend, and hold harmless, MTHCD, its directors, officers, staff and authorized representatives, from and against all costs, expenses, and attorney's fees, arising directly or indirectly, out of, in connection with, or relating to the MTHCD's participation in [Recipient]'s Program pursuant to this Agreement. This obligation shall not be qualified or eliminated by any allegation, finding, judgment, or verdict

that any indemnitee is responsible for a passively negligent act or omission, except where such negligence was the principal cause.

The foregoing sets forth the terms and conditions of the agreement between MTHCD and [Recipient] and shall be effective immediately upon signing by both parties. By their signatures below, each of the following represent and warrant that they have authority to execute this agreement and to bind the party on whose behalf their execution is made.

Very Truly Yours,

Mark Twain Health Care District

Board of Directors

Dated: _____, 202___ By: _____

Darrie Gillespie, Chief Executive Officer

P O Box 95, San Andreas CA 95249-0095

_____

(Recipient)

Dated: _____, 202___ By: _____

_____, _____

(Print Name) (*Title)*

Address: _____

_____

Mark Twain Health Care District Policy No. 12

Conflict of Interest Code and Ethics:

12.1 CONFLICT OF INTEREST CODE.

The Board approved Resolution No. 2020-06 on August 26, 2020, which adopted the terms of Section 18730 of Title 2 of the California Code of Regulations and any amendments to said provision approved by the Fair Political Practices Commission, as the District's Conflict of Interest Code.

12.2 DISCLOSURE OF ECONOMIC INTERESTS.

Individuals required to file statements of economic interests under the District's Conflict of Interest Code must submit those statements to the Chief Executive Officer as the District's filing officer. The Chief Executive Officer shall retain the statements and make them available for public inspection and reproduction, as required by the Political Reform Act, or forward them to the County of Calaveras or the Fair Political Practices Commission as required by law.

12.3 AB 1234 ETHICS TRAININGS

The Chief Executive Officer shall be responsible for scheduling ethics training for all members of the Board of Directors on a biennial basis as required by Assembly Bill 1234 ("AB 1234"). The AB 1234 training course shall also be held within three (3) months of a newly elected member of the Board of Directors assuming office. The training shall conform to the content and length requirements of AB 1234.

Mark Twain Health Care District Policy No. 32

Debt Management Policy:

This Debt Management Policy (the "Debt Policy") of the MARK TWAIN HEALTH CARE DISTRICT (the "District") was approved by the Board of Directors of the District (the "Board") on November, 2018. The Debt Policy may be amended by the Board as it deems appropriate from time to time in the prudent management of the debt of the District.

This Debt Policy will also apply to any debt issued by any other public agency for which the Board of the District acts as its legislative body.

The Debt Policy has been developed to provide guidance in the issuance and management of debt by the District or its related entities and is intended to comply with Section 8855(i) of the California Government Code effective on January 1, 2017. The main objectives are to establish conditions for the use of debt; to ensure that debt capacity and affordability are adequately considered; to minimize the District's interest and issuance costs; to maintain the highest possible credit rating; to provide complete financial disclosure and reporting; and to maintain financial flexibility for the District.

Debt, properly issued and managed, is a critical element in any financial management program. It assists in the District's effort to allocate limited resources to provide the highest quality of service to the public. The District understands that poor debt management can have ripple effects that hurt other areas of the District. On the other hand, a properly managed debt program promotes economic growth and enhances the vitality of the District for its residents and businesses.

1. **Findings**

This Debt Policy shall govern all debt undertaken by the District.

The District hereby recognizes that a fiscally prudent debt policy is required in order to:

- Maintain the District's sound financial position.
- Ensure the District has the flexibility to respond to changes in future service priorities, revenue levels and operating expenses.
- Protect the District's credit-worthiness.
- Ensure that all debt is structured in order to protect both current and future taxpayers, ratepayers and constituents of the District.
- Ensure that the District's debt is consistent with the District's planning goals and objectives, capital improvement programs and budgets, as applicable.
- Encourage those that benefit from a facility/improvement to pay the cost of that facility/improvement without the need for the expenditure of limited resources.

2. Policies

A. Purposes for Which Debt May Be Issued

The District will consider the use of debt financing primarily for Capital Improvement Projects ("CIP") when the project's useful life will equal or exceed the term of the financing and when resources are identified sufficient to fund the debt service requirements. An exception to this CIP driven focus is the issuance of short-term instruments such as tax and revenue anticipation notes or lines of credit, which are to be used for prudent cash management purposes and conduit financing, as described below. Bonded debt should not be issued for projects with minimal public benefit or support, or to finance normal operating expenses.

If a department has any project which is expected to use debt financing, the department director is responsible for expeditiously providing the Executive Director and the Chief Financial Officer/Controller with reasonable cost estimates, including specific revenue accounts that will provide payment for the debt service. This will allow an analysis of the project's potential impact on the District's debt capacity and limitations. The department director shall also provide an estimate of any incremental operating and/or additional maintenance costs associated with the project and identify sources of revenue, if any, to pay for such incremental costs.

(a) Long-Term Debt. Long-term debt may be issued to finance or refinance the construction, acquisition, and rehabilitation of capital improvements and facilities, equipment and land to be owned and/or operated by the District.

(b) Long-term debt financings are appropriate when the following conditions exist:

- When the project to be financed is necessary to provide basic services.
- When the project to be financed will provide benefit to constituents over multiple years.
- When total debt does not constitute an unreasonable burden to the District and its taxpayers and patients.
- When the debt is used to refinance outstanding debt in order to produce debt service savings or to realize the benefits of a debt restructuring.

(c) Long-term debt financings will not generally be considered appropriate for current operating expenses and routine maintenance expenses.

(d) The District may use long-term debt financings subject to the following conditions:

- The project to be financed has been or will be approved by the Board.
- The weighted average maturity of the debt (or the portion of the debt allocated to the project) will not exceed the average useful life of the project to be financed by more than 20%, unless specific conditions exist that would mitigate the extension of time to repay the debt and it would not cause the District to violate any covenants to maintain the tax-exempt status of such debt, if applicable.
- The District estimates that sufficient income or revenues will be available to service the debt through its maturity.

- The District determines that the issuance of the debt will comply with the applicable requirements of state and federal law.

- The District considers the improvement/facility to be a vital, time-sensitive need to the community and there are no plausible alternative financing sources available.

(e) Periodic reviews of outstanding long-term debt will be undertaken to identify refunding opportunities. Refunding will be considered (within federal tax law constraints, if applicable) if and when there is a net economic benefit of the refunding. Refundings which are non-economic may be undertaken to achieve District objectives relating to changes in covenants, call provisions, operational flexibility, tax status of the issuer, or the debt service profile.

Short-term debt. Short-term borrowings may be issued to generate funding for cash flow needs in the form of tax and revenue anticipation notes.

Short-term borrowings, such as tax and revenue anticipation notes, commercial paper, and lines of credit, will be considered as an interim source of funding in anticipation of a long-term borrowing. Short- term debt may be issued for any purpose for which long-term debt may be issued, including capitalized interest and other financing-related costs. Prior to issuance of the short-term debt, a reliable revenue sourceshall be identified to secure repayment of that debt. The final maturity of the debt issued to finance any project shall be consistent with the economic or useful life of the project and, unless the Board determines that extraordinary circumstances exist, should not exceed seven years.

Short-term debt may also be used to finance short-lived capital projects; for example, the District may undertake lease-purchase financing for equipment, and such equipment leases may be longer than seven years.

Financings on Behalf of Other Entities. The District may also find it beneficial to issue debt on behalf of other governmental agencies or private third parties in order to further the public purposes of the District. In such cases, the District shall take reasonable steps to confirm the financial feasibility of the project to be financed and the financial solvency of any borrower and that the issuance of such debt is consistent with the policies set forth herein. In no event should the District incur any liability or assume any responsibility for payment of debt service on such debt of another entity.

B. Types of Debt

In order to maximize the financing options available to benefit the public, it is the policy of the Districtto allow for the consideration of issuing all generally accepted types of debt, including, but not exclusive to the following:

- General Obligation Bonds ("GOB"): General Obligation Bonds are suitable for use in the construction or acquisition of improvements to real property that benefit the public at large. All GOB debt shall be authorized by the requisite number of voters in order to receive approval to proceed.

- Revenue Bonds: Revenue Bonds are limited-liability obligations tied to a specific enterprise or special fund revenue stream where the projects financed clearly benefit or relate to the enterprise or are otherwise permissible uses of the special revenue. Generally, no voter approval is required to issue this type of obligation.

- Lease-Backed Debt/Certificates of Participation/Lease Revenue Bonds: Issuance of Lease-backed debt is a commonly used form of debt that allows a public entity to finance projects where the debt service is secured via a lease agreement and where the payments are budgeted in the annualoperating budget of the District. Lease-Backed debt does not constitute indebtedness under thestate or the District's constitutional debt limit and does not require voter approval.

  The District may from time to time find that other forms of debt would be beneficial to further its public purposes and may approve such debt without an amendment of this Debt Policy.

  To maintain a predictable debt service burden, the District will give preference to debt that carries a fixed interest rate. An alternative to the use of fixed rate debt is variable rate debt. The District may choose to issue securities that pay a rate of interest that varies according to a pre-determined formula orresults from a periodic remarketing of securities. When making the determination to issue debt in a variable rate mode, consideration will be given in regards to the useful life of the project or facility beingfinanced or the term of the project requiring the funding, market conditions, credit risk and third party risk analysis, and the overall debt portfolio structure when issuing variable rate debt for any purpose. Themaximum amount of variable-rate debt should be limited to no more than 20% of the District's total debt portfolio.

  The District will not employ derivatives, such as interest rate swaps, in its debt program. A derivative product is a financial instrument which derives its own value from the value of another instrument, usually an underlying asset such as a stock, bond, or an underlying reference such as an interest rate. Derivatives are commonly used as hedging devices in managing interest rate risk and thereby reducing borrowing costs. However, these products bear certain risks not associated with standard debt instruments.

C. Relationship of Debt to Capital Improvement Program and Budget

The District intends to issue debt for the purposes stated in this Debt Policy and to implement policy decisions incorporated in the District's capital budget and its capital improvement plan.

The District shall strive to fund the upkeep and maintenance of its infrastructure and facilities due to normal wear and tear through the expenditure of available operating revenues. The District shall seek to avoid the use of debt to fund infrastructure and facilities improvements that are the result of normal wear and tear, unless a specific revenue source has been identified for this purpose.

The District shall integrate its debt issuances with the goals of its capital improvement program by timing the issuance of debt to ensure that projects are available when needed in furtherance of the District's public purposes.

The District shall seek to issue debt in a timely manner to avoid having to make unplanned expenditures for capital improvements or equipment from its general fund.

D. Policy Goals Related to Planning Goals and Objectives

The District is committed to financial planning, maintaining appropriate reserves levels and employing prudent practices in governance, management and budget administration. The District intends to issue debt for the purposes stated in this Debt Policy and to implement policy decisions incorporated in the District's annual operating budget.

It is a policy goal of the District to protect taxpayers, ratepayers and constituents by utilizing conservative financing methods and techniques so as to obtain the highest practical credit ratings (if applicable) and the lowest practical borrowing costs.

The District will comply with applicable state and federal law as it pertains to the maximum term

of debt and the procedures for levying and imposing any related taxes, assessments, rates and charges.

Except as described in Section 2.A., when refinancing debt, it shall be the policy goal of the District to realize, whenever possible, and subject to any overriding non-financial policy considerations minimum net present value debt service savings equal to or greater than 5% of the refunded principal amount.

E. Internal Control Procedures

When issuing debt, in addition to complying with the terms of this Debt Policy, the District shall comply with any other applicable policies regarding initial bond disclosure, continuing disclosure, post-issuance compliance, and investment of bond proceeds.

The District will periodically review the requirements of and will remain in compliance with the following:

- Any continuing disclosure undertakings under SEC Rule 15c2-12.

- Any federal tax compliance requirements, including without limitation arbitrage and rebate compliance, related to any prior bond issues.

- The District's investment policies as they relate to the investment of bond proceeds.

Whenever reasonably possible, proceeds of debt will be held by a third-party trustee and the District will submit written requisitions for such proceeds. The District will submit a requisition only after obtaining the signature of the District Executive Director, Chief Financial Officer, Controller or other authorized officer of the District.

F. Waivers of Debt Policy

There may be circumstances from time to time when strict adherence to a provision of this Debt Policy is not possible or in the best interests of the District and the failure of a debt financing to comply with one or more provisions of this Debt Policy shall in no way affect the validity of any debt issued by the District in accordance with applicable laws.

Mark Twain Health Care District Policy No. 34

Artificial Intelligence (AI) Usage Policy:

Subject:

This policy outlines the acceptable, safe, and ethical use of Artificial Intelligence (AI) tools, including Generative AI (GenAI), machine learning, and AI-powered scribes—within Mark Twain Health Care District

Objective:
The goal is to enhance clinical workflows and efficiency while ensuring patient safety, data security, and compliance with HIPAA and other privacy laws.

Response Rating: This policy applies to all employees, contractors, clinicians Board members.
Required Equipment: Approved AI Tool, phone, computer.

Procedure:

1. **Purpose and Scope**
This policy outlines the acceptable, safe, and ethical use of Artificial Intelligence (AI) tools—including Generative AI (GenAI), machine learning, and AI-powered scribes—within Mark Twain Health Care District. The goal is to enhance clinical workflows and efficiency while ensuring patient safety, data security, and compliance with HIPAA and other privacy laws.
• **Scope**: This policy applies to all employees, contractors, and clinicians.
• **Definitions**: "AI" includes tools that automate tasks, transcribe conversations, or generate content.

2. **Data Privacy and Confidentiality (HIPAA Compliance)**
• **No Public AI Tools**: Employees are strictly prohibited from entering Protected Health Information (PHI), Patient Identifiable Information (PII), or confidential business data into public, non-approved AI tools (e.g., free versions of ChatGPT).
• **Approved Vendors Only**: Only AI tools specifically vetted by the IT/Compliance department and covered by a Business Associate Agreement (BAA) may be used for patient care.
• **Data Masking:** If using authorized AI, remove or mask sensitive patient identifiers (names, dates of birth, Social Security Numbers) before inputting information.

3. **Human Oversight and Accountability**
• "**Human in the Loop**": AI is a tool to support, not replace, clinical judgment. A qualified clinician must review, edit, and approve all AI-generated content (e.g., clinical notes, suggested treatment plans) before it is finalized in the Electronic Health Record (EHR).
• **Final Responsibility**: The clinician signing the note or making the diagnosis holds full responsibility for the accuracy of the information, regardless of whether AI was used to generate it.

4. **Prohibited AI Usage**
Employees are prohibited from:
• Using AI for making final, unreviewed diagnostic or treatment decisions.
• Inputting patient information into unauthorized, "public facing" Generative AI.
• Using AI to generate fraudulent documentation.
• Allowing AI to communicate directly with patients without human supervision.

5. **Transparency and Patient Consent**
• **Disclosure**: If an AI tool is used in a manner that directly impacts patient interaction (e.g., AI ambient listening for documentation), patients should be informed.
• **Opt-ou**t: The clinic will provide a mechanism for patients to opt-out of having their conversation recorded by AI.

6. **Bias Mitigation and Safety**
• **Validation**: All AI tools must be validated for accuracy and potential bias against patient demographics (race, gender, age) before deployment.
• **Reporting**: If an employee notices an AI tool producing inaccurate, biased, or harmful output, they must immediately report it to the [Clinical Governance Committee/IT Department].

7**. Training and Compliance**
• **Training**: All staff using AI tools must undergo training on this policy and the specific functionalities of the approved tools.
• **Violations**: Violations of this policy may result in disciplinary action, up to and including termination of employment or contract.

8. **Policy Review**
This policy will be reviewed biennially and more often when AI medium or laws change to ensure it keeps pace with rapidly evolving AI technology and regulations.

MARK TWAIN
HEALTH CARE DISTRICT

P. O. Box 95
San Andreas, CA 95249
(209) 754-4468 Phone
(209) 754-2537 Fax

Agenda Item: **Financial Reports for June 2026**

Type: **Action**

Submitted By: **Rick Wood, Accountant & Kristine Slocum, Finance Manager**

Presented By: **Rick Wood, Accountant & Kristine Slocum, Finance Manager**

BACKGROUND:

The preliminary draft of June District financial statements were presented to the Board, with total year-to-date revenues exceeding expenses by $1,103,362. Clinic revenues for the month lagged slightly behind expenses, resulting in net revenues of ($38,711). Preliminary net clinic revenues for the fiscal year ending June 30, 2026 appear positive at $508,864. However, adjustments due to the fiscal year-end will continue and are subject to change until the audit is completed later this year. The District's financial position remains stable, supported by strong operating performance and continued fiscal oversight.

Mark Twain Health Care District
Direct Clinic Financial Projections

6/30/26

	Actual Month	Y-T-D Actual	2025/2026 Budget
Total Other Revenue	**879,544**	**10,421,089**	**9,329,487**
Labor related costs	**(528,571)**	**(5,070,941)**	(5,185,829)
Net Expenses over Revenues	**(38,711)**	**508,864**	**(857)**

Mark Twain Health Care District
Annual Budget Recap

	06/30/26 Actual Y-T-D	2025 - 2026 Annual Budget				
		Total District	Clinic	Rental	Projects	Admin
Revenues	15,565,704	12,371,680	9,317,487	1,164,193	0	1,890,000
Total Revenue	15,565,704	12,371,680	9,317,487	1,164,193	0	1,890,000
Expenses	(14,255,861)	(11,691,847)	(9,330,344)	(874,700)	(661,000)	(825,803)
Total Expenses	(14,255,861)	(11,691,847)	(9,330,344)	(874,700)	(661,000)	(825,803)
Surplus(Deficit)	1,309,843	679,833	(12,857)	289,493	(661,000)	1,064,197

Historical Totals

Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23
(304,048)	(1,003,063)	(868,056)	(871,876)	(851,960)	(1,282,214)
23-Jul	Aug-23	23-Sep	23-Oct	23-Nov	23-Dec
197,850	**392,710**	**412,064**	**551,925**	**546,391**	**630,489**

Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24
728,240	**1,033,067**	**1,135,447**	**1,414,580**	**1,515,345**	**1,549,413**
Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24
41,416	**105,833**	**105,493**	**59,726**	**60,182**	**277,287**

Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25
338,189	**438,420**	**495,415**	**613,459**	**(124,205)**	**140,040**
Jul-25	Aug-25	Sep-25	Oct-25	Nov-25	Dec-25
227,271	**287,201**	**554,261**	**1,076,169**	**1,127,038**	**1,379,189**

26-Jan	Feb-26	Mar-26	Apr-26	May-26	Jun-26
1,065,712	**1,349,874**	**1,645,195**	**1,227,255**	**710,022**	**1,309,843**

Mark Twain Health Care District
Direct Clinic Financial Projections

6/30/26 **VSHWC**

		Monthly Budget	Actual Month	Variance $$$	Variance %	Y-T-D Budget	Y-T-D Actual	Variance $$$	Variance %	2025/2026 Budget
4083.49	Urgent care Gross Revenues	884,068	1,027,972	143,904	116.28%	10,608,813	12,323,521	1,714,708	116.16%	10,608,813
4083.60	Contractual Adjustments	(107,694)	(148,429)	(40,735)	137.82%	(1,292,326)	(1,902,433)	(610,107)	147.21%	(1,292,326)
	Net Patient revenue	776,374	879,544	103,170	113.29%	9,316,487	10,421,089	1,104,602	111.86%	9,316,487
						0				
4083.90	Flu shot, Lab income, physicals					0				
4083.91	Medical Records copy fees					0				1,000
9108.00	Other - Plan Incentives & COVID Relief					0	-			12,000
			0			0	0			13,000
	Total Other Revenue	**777,457**	**879,544**	**102,086**	**113.13%**	**9,316,487**	**10,421,089**	**1,104,602**	**111.86%**	**9,329,487**
7083.09	Other salaries and wages	(347,765)	(453,328)	(105,563)	130.35%	(4,173,179)	(4,287,373)	(114,194)	102.74%	(4,173,179)
7083.10	Payroll taxes	(25,040)	(34,407)	(9,367)	137.41%	(300,481)	(335,386)	(34,905)	111.62%	(300,481)
7083.12	Vacation, Holiday and Sick Leave	(20,866)	0	20,866	0.00%	(250,391)	0	250,391	0.00%	(250,391)
7083.13	Group Health & Welfare Insurance	(23,882)	(38,775)	(14,893)	162.36%	(286,583)	(413,969)	(127,386)	144.45%	(286,583)
7083.15	Pension and Retirement	(10,433)	0	10,433	0.00%	(125,195)	0	125,195	0.00%	(125,195)
7083.16	Workers Compensation insurance	(2,083)	(2,062)	22	98.96%	(25,000)	(34,213)	(9,213)	136.85%	(25,000)
7083.18	Dental Insurance	(2,083)	0	2,083	0	(22,917)	0			(25,000)
	Total taxes and benefits	(84,388)	(75,243)	9,145	89.16%	(1,010,567)	(783,568)	226,998	77.54%	(1,012,650)
	Labor related costs	(432,152)	**(528,571)**	(96,418)	122.31%	**(5,183,746)**	**(5,070,941)**	112,804	97.82%	(5,185,829)
7083.05	Marketing	(1,875)	(252)	1,623	13.42%	(22,500)	(1,925)	20,575	8.56%	(22,500)
7083.20.01	Medical - Physicians	(53,221)	(93,075)	(39,854)	174.88%	(638,652)	(1,097,074)	(458,422)	171.78%	(638,652)
7083.20.02	Dental - Providers	0	0	0		0	(25,575)	(25,575)		
7083.20.03	Behavioral Health - Providers	(35,707)	(33,008)	2,699	92.44%	(428,480)	(334,921)	93,559	78.16%	(428,480)
7083.22	Consulting and Management fees	(3,750)	(3,675)	75	97.99%	(45,000)	(45,031)	(31)	100.07%	(45,000)
7083.23	Legal - Clinic	0	(5,394)	(5,394)		(10,000)	(27,797)	(17,797)	277.97%	
7083.25	Registry Nursing personnel	0								
7083.26	Other contracted services	(54,167)	(2,226)	51,941	4.11%	(650,000)	(680,975)	(30,975)	104.77%	(650,000)
7083.27	Other- IT Services	(3,500)	(11,105)		317.29%	(42,000)	(166,117)			(42,000)
7083.29	Other Professional fees	(5,000)	(2,155)	2,845	43.10%	(60,000)	(58,437)	1,563	97.39%	(60,000)
7083.36	Oxygen and Other Medical Gases	(100)	(49)	51	48.54%	(1,200)	(1,025)	175	85.39%	(1,200)
7083.38	Pharmaceuticals	0		0		0	0	0		
7083.41.01	Other Medical Care Materials and Supplies	(23,333)	(34,273)	(10,940)	146.89%	(280,000)	(364,968)	(84,968)	130.35%	(280,000)
7083.41.02	Dental Care Materials and Supplies - Clinic	(37,500)	(12,512)	24,988	33.37%	(450,000)	(192,564)	257,436	42.79%	(450,000)
7083.41.03	Behavioral Health Materials	(417)	(727)	(310)	174.38%	(5,000)	(7,454)	(2,454)	149.07%	(5,000)
7083.41.04	O.U.R. Veterans Materials and Supplies		(1,075)				(7,405)			
7083.62	Repairs and Maintenance Grounds	(5,417)	(1,991)	3,426	36.75%	(65,000)	(25,474)	39,526	39.19%	(65,000)
7083.72	Depreciation - Bldgs & Improvements	(55,000)	(55,000)	0	100.00%	(660,000)	(660,000)	0	100.00%	(660,000)
7083.74	Depreciation - Equipment	(12,500)	(12,500)	0	100.00%	(150,000)	(150,000)	0	100.00%	(150,000)
7083.80	Utilities - Electrical, Gas, Water, other	(6,250)	(3,373)	2,877	53.97%	(75,000)	(76,146)	(1,146)	101.53%	(75,000)
7083.43	Food	(833)	(2,909)	(2,076)	349.14%	(10,000)	(16,625)	(6,625)	166.25%	(10,000)
7083.46	Office and Administrative supplies	(3,567)	(3,946)	(379)	110.64%	(42,800)	(47,461)	(4,661)	110.89%	(42,800)
7083.69	Other purchased services	(3,708)	(63,844)	(60,135)	1721.63%	(44,500)	(328,313)	(283,813)	737.78%	(44,500)
7083.81	Insurance - Malpractice	0	(4,050)	(4,050)		0	(48,603)	(48,603)		
7083.82	Other Insurance - Clinic	0	(8,241)	(8,241)		0	(44,086)	(44,086)		
7083.83	License renewals	(750)	(89)	661	11.87%	(9,000)	(12,248)	(3,248)	136.09%	(9,000)
7083.85	Telephone and Communications	(3,500)	(3,395)	105	96.99%	(42,000)	(43,198)	(1,198)	102.85%	(42,000)
7083.86	Dues, Subscriptions & Fees	(750)	(327)	423	43.61%	(9,000)	(11,416)	(2,416)	126.84%	(9,000)
7083.87	Outside Training	(2,000)	(1,768)	232	88.38%	(24,000)	(14,672)	9,328	61.13%	(24,000)
7083.88	Mileage - VSHWC	(4,125)	(6,081)	(1,956)	147.42%	(49,500)	(70,139)	(20,639)	141.70%	(49,500)
7083.89	Recruiting	(6,083)	(2,200)	3,883	36.16%	(73,000)	(36,292)	36,708	49.72%	(73,000)
8870.00	Interest on Debt Service	(21,490)	(20,446)	1,045	95.14%	(257,883)	(245,346)	12,537	95.14%	(257,883)
8895.00	Let's All Smile	0	0	0	0.00%	0	0	0		
	Non labor expenses	(357,043)	(389,684)	(32,641)	109.14%	(4,144,515)	(4,841,284)	(696,769)	116.81%	(4,284,515)
	Total Expenses	(789,195)	(918,255)	(129,059)	116.35%	(9,328,261)	(9,912,225)	(583,965)	106.26%	(9,470,344)
	Net Expenses over Revenues	**(11,738)**	**(38,711)**	**(26,973)**	**229%**	**(11,774)**	**508,864**	**520,637**	**218.1%**	**(857)**

Mark Twain Health Care District
Projects, Grants and Support
6/30/2026

		2022/2023 Budget	2023/2024 Budget	2024/2025 Budget	2025/2026 Budget	Month to-Date Budget	Actual Month	Actual Y-T-D	Actual vs Budget
	Project grants and support	(85,000)	(177,900)	(634,500)	(661,000)	(661,000)	(55,390)	(440,249)	69.39%
8890.00	Miscellaneous (TBD)		(100,000)	(500,000)	(500,000)	(500,000)	(50,000)	(346,740)	69.35%
8890.01	AED for Life		(40,000)	(40,000)	(40,000)	(40,000)		(16,753)	41.88%
8890.02	Stay Vertical Calaveras	(35,000)	(37,900)	(64,500)	(64,500)	(64,500)	(5,390)	(64,013)	99.24%
8890.03	Doris Barger Golf			(2,500)	(4,000)	(4,000)		(7,743)	309.72%
8890.04	San Andreas Rotary Club-Hospice							(3,000)	
8890.06	Office of Education (Med. Science)			(25,000)					0.00%
8890.07	Veterans Support								
8890.09	Friends of the Calaveras County Fair			(2,500)	(2,500)	(2,500)		(2,000)	80.00%
8890.10	Community Grants	(50,000)			(50,000)	(50,000)			
	Project grants and support	**(85,000)**	**(177,900)**	**(634,500)**	**(661,000)**	**(661,000)**	**(55,390)**	**(440,249)**	**69.39%**

Mark Twain Health Care District
Rental Financial Projections

Rental

6/30/26

		Monthly Budget	Actual Month	Variance $$$	Variance %	Y-T-D Budget	Y-T-D Actual	Variance $$$	Variance %	2025/2026 Budget
9260.01	Rent Hospital Asset amortized	72,000	72,000	0	100.00%	864,000	864,000	0	100.00%	864,000
	Rent Revenues	72,000	**72,000**	**0**	**100.00%**	**864,000**	**864,000**	**0**	**100.00%**	**864,000**
9520.62	Repairs and Maintenance Grounds		0			0	0			
9520.80	Utilities - Electrical, Gas, Water, other	(28,000)	(63,867)	(35,867)	228.10%	(336,000)	(686,224)	(350,224)	48.96%	(336,000)
9521.80	Utility Reimbursements- MTMC	0	22,376				138,773			
9520.85	Telephone & Communications	(625)	0	625	0.00%	(7,500)	0	7,500	0.00%	(7,500)
9520.72	Depreciation	(19,167)	(18,907)	260	98.65%	(230,000)	(226,884)	3,116	98.65%	(230,000)
9520.82	Insurance									
	Total Costs	**(47,792)**	**(60,398)**	**(12,606)**	**126.38%**	**(573,500)**	**(774,335)**	**(200,835)**	**135.02%**	(573,500)
	Net	24,208	11,602	(12,606)	47.93%	290,500	89,665	(200,835)	323.99%	**290,500**
9260.02	MOB Rents Revenue	23,704	23,994	290	101.22%	284,446	315,660	31,214	110.97%	284,446
9521.75	MOB rent expenses	(25,000)	(24,103)	897	96.41%	(300,000)	(261,914)	38,086	87.30%	(300,000)
	Net	(1,296)	(110)	1,187		(15,554)	53,746	69,300	-345.55%	**(15,554)**
9260.03	Child Advocacy Rent revenue	1,312	844	(468)	64.33%	15,747	10,130	(5,617)	64.33%	15,747
9522.75	Child Advocacy Expenses	(100)	0	100	0.00%	(1,200)	(15,675)	(14,475)	0.00%	(1,200)
	Net	1,212	844	(368)	69.63%	14,547	(5,545)	(20,092)	-38.12%	**14,547**
	Total Revenues	97,016	119,214	22,198	122.88%	1,164,193	1,328,562	164,369	114.12%	1,164,193
	Total Expenses	(72,892)	(84,501)	(11,609)	115.93%	(874,700)	(1,051,924)	(177,224)	120.26%	(874,700)
	Summary Net	**24,124**	**34,713**	10,588	143.89%	289,493	276,638	(12,855)	95.56%	**289,493**

Mark Twain Health Care District
General Administration Financial Projections **6/30/26** **ADMIN**

		Monthly Budget	Actual Month	Variance $$$	Variance %	Y-T-D Budget	Y-T-D Actual	Variance $$$	Variance %	2025/2026 Budget
9060.00	Income, Gains and losses from investments	24,167	24,621	455	101.88%	290,000	418,683	128,683	144.37%	290,000
9160.00	Property Tax Revenues	125,000	125,000	0	100.00%	1,500,000	1,500,000	0	100.00%	1,500,000
9010.00	Gain on Sale of Asset									
9101.00	Gain and Loss on Sale of Asset						-			
9400.00	Miscellaneous Income		0			0	5,613			
5801.00	Rebates, Sponsorships, Refunds on Expenses		0			0	0			
5990.00	Other Miscellaneous Income		0			0	0			
9108.00	Other Non-Operating Revenue-GRANTS		6,260			82,981	82,981			100,000
9205.03	Miscellaneous Income (1% Minority Interest)		0			0	(93,657)			
	Summary Revenues	149,167	155,881	6,715	104.50%	1,872,981	1,913,620	40,638	102.17%	**1,890,000**
8610.09	Other salaries and wages	(33,864)	(41,289)	(7,425)	121.93%	(372,507)	(495,297)	(122,790)	132.96%	(406,371)
8610.10	Payroll taxes	(2,262)	(3,158)	(896)	139.61%	(27,143)	(32,957)	(5,814)	121.42%	(27,144)
8610.12	Vacation, Holiday and Sick Leave	(2,032)	0	2,032	0.00%	(24,382)	0	24,382	0.00%	(24,382)
8610.13	Group Health & Welfare Insurance	(1,262)	0	1,262	0.00%	(15,144)	0	15,144	0.00%	(15,144)
8610.14	Group Life Insurance	-	0			0	0			
8610.15	Pension and Retirement	(1,016)	(1,622)	(606)	159.67%	(12,191)	(2,358)	9,833	19.35%	(12,191)
8610.16	Workers Compensation insurance	(339)	0	339	0.00%	(4,064)	0	4,064	0.00%	(4,064)
8610.18	Other payroll related benefits	(42)	0			(508)	(36)			(508)
	Benefits and taxes	(6,953)	(4,780)	2,173	68.75%	(83,432)	(35,352)	48,080	42.37%	**(83,433)**
	Labor Costs	(40,817)	(46,069)	(5,252)	112.87%	(455,939)	(530,649)	(74,710)	116.39%	**(489,804)**
8610.22	Consulting and Management Fees	(2,500)	(1,669)	831	66.75%	(30,000)	(16,768)	13,232	55.89%	(30,000)
8610.23	Legal	(4,167)	(7,391)	(3,224)	177.37%	(40,000)	(29,068)	10,932	72.67%	(50,000)
8610.24	Accounting /Audit Fees	(3,750)	(95)	3,655	2.53%	(45,000)	(42,200)	2,800	93.78%	(45,000)
8610.05	Marketing	(2,083)	(102)	1,981	4.90%	(25,000)	(4,028)	20,972	16.11%	(25,000)
8610.46	Office and Administrative Supplies	(1,083)	(237)	846	21.92%	(13,000)	(25,477)	(12,477)	195.98%	(13,000)
8610.62	Repairs and Maintenance Grounds	-	(1,755)	(1,755)	0.00%	0	(11,569)	(11,569)		
8610.69	Other- IT Services	(1,000)	(1,204)	(204)	120.40%	(12,000)	(25,828)	(13,828)	215.24%	(12,000)
8610.82	Insurance	(7,500)	0	7,500	0.00%	(90,000)	(75,664)	14,336	84.07%	(90,000)
8610.86	Dues, Subscriptions & Fees	(3,333)	(308)	3,025	9.24%	(40,000)	(23,083)	16,917	57.71%	(40,000)
8610.87	Outside Trainings	(1,250)	(1,965)	(715)	157.18%	(15,000)	(17,666)	(2,666)	117.77%	(15,000)
8610.88	Travel	(833)	(396)		47.50%	(10,000)	(1,210)			(10,000)
8610.89	Recruiting	(833)	0	833	0.00%	(10,000)	(502)	9,498		(10,000)
8610.90	Other Direct Expenses	(500)	(500)	0	100.00%	(6,000)	(5,900)	100	98.33%	(6,000)
8610.95	Other Misc. Expenses	-	0			0	0	0		
	Non-Labor costs	(28,833)	(15,990)	12,406	55.46%	(336,000)	(279,608)	47,621	83.22%	(346,000)
	Total Costs	(69,650)	(62,059)	7,154	89.10%	(791,939)	(810,257)	(27,089)	102.31%	(835,804)
	Net	79,516	**93,822**	13,868	117.99%	1,081,042	**1,103,362**	13,549	102.06%	**1,054,196**

Mark Twain Health Care District
Balance Sheet
As of June 30, 2026

	Total
ASSETS	
Current Assets	
Bank Accounts	
1001.10 Umpqua Bank - Checking	241,246
1001.20 Umpqua Bank - Money Market	6,447
1001.30 Bank of Stockton	212,971
1001.45 Five Star Bank - MTHCD Checking NEW	258,356
1001.50 Five Star Bank - Money Market	597,488
1001.60 Five Star Bank - VSHWC Checking	162,944
1001.65 Five Star Bank - VSHWC Payroll	119,173
1001.90 US Bank - VSHWC	55,802
1001.98 Calaveras Wellness Foundation	77,700
1820 VSHWC - Petty Cash	400
Total Bank Accounts	**1,732,528**
Accounts Receivable	
1201.00 Accounts Receivable	85,814
Total Accounts Receivable	**85,814**
Other Current Assets	
1003.10 CalTRUST Operational Reserve Fund	35,171
1003.20 CLASS Operational Reserve Fund	3,013,664
1004.10 CLASS Lease & Contract Reserve Fund	1,961,688
1004.20 CLASS Loan Reserve Fund	2,400,992
1004.30 CLASS Capital Improvement Reserve Fund	2,397,824
1004.40 CLASS Technology Reserve Fund	295,510
1004.50 Community Programs Reserve Fund	113,856
1004.60 Lease Termination Reserve Fund	559,013
1150.05 Due from Calaveras County	-148,132
1160.00 Lease Receivable	162,790
1205.50 Allowance for Uncollectable Clinic Receivables	265,507
1205.51 Cash To Be Reconciled	745,422
1300.00 Prepaid Expense (USDA)(MTMC rent)	127,260
1300.10 General Prepaid	26,459
Total Other Current Assets	**11,957,024**
Total Current Assets	**13,775,366**
Fixed Assets	
1200.00 District Owned Land	286,144
1200.10 District Land Improvements	150,308
1200.20 District - Building	2,123,678
1200.30 District - Building Improvements	2,276,956
1200.40 District - Equipment	718,485
1200.50 District - Building Service Equipment	168,095
1220.00 VSHWC - Land	903,112
1220.05 VSHWC - Land Improvements	1,691,262
1220.10 VSHWC - Buildngs	5,894,714
1220.20 VSHWC - Equipment	958,963
1221.00 Pharmacy Construction	3,536
1250.12 CIP - Sunrise Pharmacy	98,358
1250.13 CIP - Dental Expansion	1,149,232

1250.14 CIP - West Wing Expansion	1,140,988
1250.15 CIP - Technology Reserve	45,020
1250.16 CIP - District Refresh	99,851
1521.20 CIP - Buildings - BHCiP	1,150,607
1521.30 CIP - Equipment	180,600
1600.00 Accumulated Depreciation	-10,405,922
Total Fixed Assets	**8,633,987**
Other Assets	
1710.10 Minority Interest in MTMC - NEW	287,213
1810.60 Capitalized Lease Negotiations	273,142
1810.65 Capitalized Costs Amortization	11,919
Total Intangible Assets	**285,061**
2219.00 Capital Lease	5,199,533
2260.00 Lease Receivable - Long Term	841,774
Total Other Assets	**6,613,582**
TOTAL ASSETS	**29,022,934**
LIABILITIES AND EQUITY	
Liabilities	
Current Liabilities	
Accounts Payable	
2000.00 Accounts Payable (MISC)	144,976
Total 200.00 Accts Payable & Accrued Expenes	**144,976**
2001.00 Other Accounts Payable (Credit Card)	70,522
Total 200.00 Accts Payable & Accrued Expenes	**70,522**
2010.00 USDA Loan Accrued Interest Payable	79,740
2021.00 Accrued Payroll - Clinic	99,585
2022.00 Accrued Leave Liability	90,344
2100.00 Deide Security Deposit	2,275
2110.00 Payroll Liabilities - New Account for 2019	184,488
2110.10 Valley Springs Security Deposit	2,385
2140.00 Lease Payable - Current	168,699
2200.00 Due to Calaveras Wellness Foundation	77,424
2260.00 Deferred Rental Revenue	518,643
2265.00 Deferred Settlement Revenue	463,257
2271.00 Deferred Hospital Lease Rent	92,000
Total Other Current Liabilities	**1,778,841**
Total Current Liabilities	**1,994,338**
Long-Term Liabilities	
2129.00 Other Third Party Reimbursement - Calaveras County	0
2130.00 Deferred Inflows of Resources	203,473
2210.00 USDA Loan - VS Clinic	6,477,960
2240.00 Lease Payable - Long Term	117,960
Total Long-Term Liabilities	6,799,393
Total Liabilities	**8,793,731**
Equity	
2900.00 Fund Balance	648,149
2910.00 PY - Historical Minority Interest MTMC	19,720,638
3000 Opening Bal Equity	
3900.00 Retained Earnings	-1,449,427
Net Income	1,309,843
Total Equity	20,229,203
TOTAL LIABILITIES AND EQUITY	**29,022,934**

Investment & Reserves Report
30-Jun-26

Reserve Funds	Minimum Target	6/30/2025 Balance	2025/2026 Allocated	2025/2026 Interest	6/30/2026 Balance	Annual Funding Goal
Valley Springs HWC - Operational Reserve	2,200,000	1,880,723	0	85,631	1,966,353	
Lease, Contract, & Utilities Reserve	1,700,000	1,889,091		74,506	1,963,598	
Loan Reserve	1,300,000	2,306,536	0	96,793	2,403,329	
Capital Improvement	3,000,000	2,790,842	0	109,802	2,900,644	
Technology Reserve	250,000	284,589		11,209	295,798	
Community Programs Reserve	250,000	109,648		4,319	113,967	
Lease Termination Reserve	3,250,000	538,361		21,196	559,557	
Reserves & Contingencies	11,950,000	9,799,790	0	403,455	10,203,245	0

Reserves	6/30/2026	2025-2026 Interest Earned
Valley Springs HWC - Operational Reserve	35,171	1,134
Total Cal-Trust Reserve Funds	**35,171**	**1,134**
Valley Springs HWC - Operational Reserve	1,966,353	85,631
Lease & Contract Reserve	1,963,598	74,506
Loan Reserve	2,403,329	96,793
Capital Improvement	2,900,644	109,802
Technology Reserve Fund	295,798	11,209
Community Programs Reserve	113,967	4,319
Lease Termination reserve	559,557	21,196
General Operating Fund	551,691	0
Total CA-CLASS Reserve Funds	**10,754,936**	**403,455**
Five Star		
General Operating - NEW	283,408	654
Money Market Account	597,488	23,671
Valley Springs - Checking	162,423	158
Valley Springs - Payroll	123,822	163
Total Five Star	**1,167,141**	**24,645**
Columbia/Umpqua Bank		
Checking	205,694	0
Money Market Account	6,447	0.55
Investments	0	0
Total Savings & CD's	**212,141**	**0.55**
Bank of Stockton	**212,971**	**41**
Total in interest earning accounts	**12,382,360**	**429,275**
Beta Dividends 2		
Umpqua Rebate		**5,613**
Total Without Unrealized Loss		**434,888**

CA CLASS		Interest Rate
Prime	2,644,040	**3.70%**
Enhanced	4,850,198	**3.75%**
Term Series II	3,260,698	**3.95%**
Total	**10,754,936**	

3.87%

Mark Twain Health Care District's (District) Investment Policy No. 22 describes the District's commitment to managing risk by selecting investment products based on safety, liquidity and yield. Per California Government Code Section 53600 et. seq., specifically section 53646 and section 53607, this investment report details all investment-related activity in the current period. District investable funds are currently invested in Umpqua Bank, Five Star Bank, and the CA CLASS investment pool, all of which meet those standards; the individual investment transactions of the CA CLASS Pool are not reportable under the government code. That being said, the District's Investment Policy remains a prudent investment course, and is in compliance with the "Prudent Investor's Policy" designed to protect public funds.

Mark Twain
Medical Center Foundation.

768 Mountain Ranch Rd.
San Andreas, CA 95249
direct 209.754.2624
fax 209.754.2682
supportmarktwain.org

July 1, 2026

Mark Twain Health Care District
768 Mountain Ranch Road
San Andreas, CA 95249-9707

Dear Friends:

Thank you for your donation of $50,000.00 to the Mark Twain Medical Center Foundation. Your donation will help to support Mark Twain Medical Center Foundation give life and hope to others by providing education, equipment, health care services, to our community. Your continued friendship, dedication, and support are greatly appreciated.

The Foundation acknowledges your generous donation.

Sincerely,

Charanjit Singh
Director of Philanthropy

No goods or services were received in exchange for this donation.
Please consult your tax preparer or attorney for applicability of this donation.
Tax ID #68-0023507 501(c)3