



Board of Directors Regular Meeting AGENDA

Location: 120 Bristlecone Dr., Fort Collins, CO 80524 or [Zoom](#)

Date: Wednesday, December 10, 2025

Time: 6:00 PM

6:00 PM I. Call to Order

Erin Hottenstein

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

6:05 PM II. Public Comment

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

6:30 PM III. Presentations

- a. Presentation from UC Health

Brian Allen

7:00 PM IV. Consent Agenda

Erin Hottenstein

- a. Approval of Meeting minutes from 11.19.2025 Regular meeting and Budget Hearing
- b. PSD Contract

7:05 PM V. Action Items

Erin Hottenstein

- a. Adoption of the 2026 Health District Budget & Appropriate Sums of Money
 - I. Resolution 2025-14 Adoption of the 2026 Health District Budget & Appropriate Sums of Money
 - II. Resolution 2025-15 Set Mill Levies

7:15 PM VI. Reports and Discussions

- a. HR 1 Update
- b. Board of Directors Meeting Schedule 2026
- c. Board of Director Reports
- d. Liaison to PVHS/UCHealth Report
- e. ED/CEO Search
- f. Executive Committee Update
- g. Executive Director Staff Report

Dana Turner/Alyson Williams
Board
Board
John McKay
Courtney Green
Erin Hottenstein
Courtney Green

7:45 PM VII. Adjourn

Erin Hottenstein



AGENDA DOCUMENTATION

Meeting Date: December 10, 2025

SUBJECT: Approval of draft minutes from November 19, 2025, meeting.

PRESENTER: Erin Hottenstein

OUTCOME REQUESTED: ☒ Decision ☐ Consent ☐ Report

PURPOSE/ BACKGROUND

To approve the draft minutes from November 19, 2025 meeting.

Attachment(s): Draft Minutes

FISCAL IMPACT: N/A

STAFF RECOMMENDATION:

Approve Minutes



Board of Directors Meeting
DRAFT 11.19.2025
MINUTES

Location: 120 Bristlecone Dr., Fort Collins, CO 80524 or [Zoom](#)

Date: Wednesday, October 22, 2025

Time: 6:00 PM

Board Members Present:	Also Present:
Erin Hottenstein, Board President	Elizabeth Lebuhn- Hoffman, Parker, Wilson & Carberry, P.C
Lee Thielen, Board Vice President	Courtney Green Acting Interim Executive Director
Julie Kunce Field, Treasurer (Virtual)	Dana Turner- VP of Client Experience
Sarah Hathcock, Secretary	Jacque Ferrero- Executive Assistant/Clerk to Board
John McKay, Liaison to PVHS/UCHealth North	Alyson Williams- VP of Strategy & Impact
	Jonathan Hamilton-Digital Media Specialist
	Susan Kaiser- Director of Practice Innovation and Quality
	Katie Wheeler-Compliance Officer
	Sharon Hicks-Open Minds
	Michael Allen-Open Minds
	Edith M.-League of Women Voters
	Meredith Toll- Senior Partnerships Strategist
	Misty Manchester- Director of People and Business Operations

I. Call to Order

- a. Roll Call Board of Directors
With a quorum present, the meeting was called to order at 6:03 PM by Board President, Erin Hottenstein.
- b. Welcome Guests & Attendees
- c. Conflict of Interest Statement
No conflicts were reported.
- d. Approval of Agenda
Motion: To approve November 19, 2025, meeting agenda, as presented.
Moved by Director McKay, seconded by Director Hathcock, motion passes.

II. BUDGET HEARING

PUBLIC HEARING - FISCAL YEAR 2026 BUDGET

Hearing Opened: 6:09 p.m.

Budget Overview

- Projected revenues: \$15.63 million
- Proposed expenditures: \$17.46 million (includes \$500,000 contingency)
- Projected fund balance decrease: \$1.83 million
- End-of-year fund balance: \$11.38 million

Key Changes Since October

- Senior dental program funding decreased \$20,000 (state budget cut)
- Mental health connections revenue reduced \$35,000
- Compensation savings: \$21,000
- Contracted services increased \$13,000 (lobbying, Health InfoSource)
- Net decrease: \$40,000

Major Expenditures

- Personnel compensation: \$10.8 million (includes 4% staff raise)
- Partnership funding: \$1.5 million (FMC, Salud, SummitStone, Poudre School District)
- Contracted services: \$1.6 million
- Service delivery: \$825,000

Board Discussion

Board discussed 4% compensation increase rationale (catching up from prior years, competitive market), potential for tiered increases, and need for market comparison data. Director Field commended staff responsiveness to work session feedback.

No public comments received on budget.

Hearing Closed: 6:38 p.m.

Final budget vote scheduled December 10, 2025.

II. PUBLIC COMMENT

No public comment in person or online and no written comments submitted.

III. Presentations

Presenters: Open Minds-Sharon Hicks and Michael Allen

Audit Scope

- Reviewed 200+ client charts (3-year span)
- Policy and procedure review
- Stakeholder interviews
- Four behavioral health clinicians conducted reviews

Key Findings

Strengths:

- No clinical, practice, or quality risks identified
- Compassionate, committed care evident in documentation
- No waiting list—open access to services
- No insurance billing barrier
- Child psychiatry access (rare community resource)
- New EHR charts dramatically superior (60% vs. 8% compliance in older system)

Vulnerabilities (All Administrative):

- Missing clinical supervision policy

- Missing documentation standards policy
- Treatment plans lack measurable objectives
- Inconsistent co-signatures on consent/release forms
- Notes missing standard headers

Recommendations

2025:

- Form clinical quality and supervision committees
- Develop three key policies
- Create EHR training plan

2026:

- Complete committee work
- Analyze community needs and billable service potential
- Optimize staff credential utilization
- Standardize intake/triage with screening tools

The Board commended thoroughness of audit and confirmed new EHR investment was worthwhile.

IV. Consent Agenda

- a. October 22- Regular Meeting Minutes
October 22 –Budget Study Session Meeting Minutes changing attendee with the correction to
Spell out: Elizabeth Lebuhn in attendee list.
Motion: to approve the consent agenda as presented.
moved by Director *McKay*; seconded by Director Thielen; passed unanimously.

V. Action Items

None.

VI. Reports and Discussions

Presenters: Alyson Williams and Dana Turner

State Budget Impact

- HR1 caused immediate state budget shortfall
- Governor's budget (Oct 31): \$13.5 million general fund reductions
- Additional cuts expected January 2026

Medicaid Changes

- Adult dental benefit capped at \$3,000 annually (previously uncapped; historically \$1,500)
- Colorado dental reduced to \$750 annually
- Colorado Old Age Pension dental program: current year cut \$22,000; Health District offsetting with financial assistance funds

Structural Issues

- Loss of ARPA federal support
- TABOR limitations
- Proposed Medicaid growth rate cap

Health Insurance Marketplace (Open Enrollment Nov 1)

- Enhanced premium tax credits expired
- OmniSalud reduced from 12,000 to 6,700 slots (39 Larimer County lottery winners)
- Significant premium increases for many families

- Example: Family of four going from Medicaid to \$1,996/month marketplace; parents opted out to reduce to \$1,233/month

Health Connect team providing extensive support navigating options and exploring alternatives (safety net clinics, direct primary care, hospital discount programs).

Next Steps

- Monitor state budget process
- Collaborate with county partners
- Analyze internal data on service delivery
- December board update

Board expressed concern about Salud's closure to new uninsured patients impacting safety net capacity.

Proposed 2026 meeting schedule presented. Board discussed:

- Strategic planning sessions vs. regular meetings
- New executive director onboarding (February start)
- Summer meeting flexibility
- March date conflicts with spring break
- July as potential month without regular meeting

Action: Vote deferred to allow schedule refinement based on workload considerations.

Board of Directors Reports

Director Hottenstein: Met with forensic auditors, noticed Open Minds sign outside of Moby Arena

Director Hathcock: Meeting with staff of Outreach at an off-site event, shout out to LHC for the great work that they do

Director McKay: Attended the ribbon cutting of a new Behavioral health unit at PVH that will open on Dec 9th, and Attended McKee foundation

Director Field: Met with forensic auditors, excited to see the sign for Open Minds at Moby Arena

Director Thielen: Met with Dr. Bernie Birnbaum.

ED/CEO Sub-Committee Search Updates

- 116 applications received, narrowed to ~19 candidates
- Final list available November 22
- Next meeting November 25; ongoing meetings every Monday at 8 a.m.
- Recommendation: targeted partner outreach vs. open panel participation

Executive Committee Update

Not much to add at this time.

Executive Director Staff Report

- New staff report format with risks/challenges and metrics
- Cultural themes identified: Supportive, Impactful, Attainable, Inclusive
- "Culture in Action" team forming
- Dental clinic completed Dentrux upgrade
- Compassion fatigue training for Health Connect team
- CHAS data released
- Sticker competition launched
- Mental Health Alliance event: 110 attendees
- Finance Officer hired, starts Monday

Director Hottenstein thanked staff for excellent transition work.

VII. Adjourn

Motion to adjourn the meeting at 8:20 pm

Moved by Director McKay, seconded by Director Field; passed unanimously.

DRAFT



AGENDA DOCUMENTATION

Meeting Date: December 10, 2025

SUBJECT: Partnership/Funding Agreement – Poudre School District Agreement

PRESENTER: None

OUTCOME REQUESTED: ____ Decision ☒ Consent ____ Report

PURPOSE

Per 99-01: Contract and Expenditure Signature Policy, contracts and expenditures exceeding \$150,000 require specific approval of the Board of Directors, and the wording of the actual contract or other document will be submitted to the board members for their review prior to signature. The document will be signed by the Executive Director (or the staff designee), and the Board President.

BACKGROUND

Partnership Purpose

- Build capacity for community health services across Northern Larimer County.
- Support community health interventions that benefit youth and their families by investing in cross-sector partnerships that sustain and build the behavioral health workforce
- Provide training and support to help MSW students remove barriers to access their internship and education.
- Support PSD students' well-being by providing direct services, such as one-on-one counseling and small group interventions through program interns and fellows, under the supervision of licensed professionals.
- Support interns and fellows collaborating with teachers, school mental health staff, and administrators to identify at-risk students and implement preventive strategies, helping to create a safer and more supportive school environment.

Poudre School District Duties

- PSD shall employ 10 MSW interns, 11 fellows, and 2 supervisors.
- PSD shall ensure proper supervision of the interns and fellows.

Attachment(s): Health District Partnership Agreement – Poudre School District

FISCAL IMPACT

None – The costs are accounted for in the proposed 2026 budget.

STAFF RECOMMENDATION

Staff recommend the Board provide approval of the partnership agreement with Poudre School District.

Intergovernmental Agreement

This Intergovernmental Agreement (the "Agreement") is made and entered into this 15th day of December, 2025 (the "Effective Date"), by and between the Health District of Northern Larimer County, a Colorado special district with an address of 120 Bristlecone Drive, Fort Collins, CO 80524 (the "District"), and Poudre School District R-1, a Colorado school district with a principal place of business at 2407 Laporte Avenue, Fort Collins, CO, 80521 ("PSD") (each a "Party" and collectively the "Parties").

Whereas, the Parties are authorized by the provisions of Article XIV, § (18)(2)(a) of the Colorado Constitution and C.R.S. § 29-1-201, *et seq.*, to enter into contracts with one another for the performance of functions that they are authorized by law to perform on their own;

Whereas, each Party is authorized to perform the functions described in this Agreement;

Whereas, the District supports the accessibility of youth and family behavioral health services in Northern Larimer County; and

Whereas, the Parties are entering into this Agreement for the purpose of PSD providing services to youth through an internship and fellowship program through the public school system that develops students from the Colorado State University master's in social work program ("MSW") into the behavioral health workforce.

Now, therefore, in consideration of the promises and the mutual covenants herein contained, the sufficiency of which is hereby acknowledged, the Parties agree as follows:

I. Term and Termination

A. The term of this Agreement shall commence on the Effective Date and shall continue until PSD completes the Scope of Services to the satisfaction of the District, unless otherwise terminated as provided herein.

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

II. PSD Responsibilities

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

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

III. Compensation.

In consideration for the completion of the Scope of Services by PSD, the District shall pay PSD \$403,502. This amount shall include all fees, costs and expenses incurred by PSD, and no additional amounts shall be paid by the District for such fees, costs and expenses. PSD may submit a single invoice on December 15th, 2025, to be paid during the first week of January 2026.

IV. Confidentiality.

A. The Parties shall comply with federal and state laws, as applicable, governing confidentiality of records and information, including without limitation the Individuals with Disabilities Education Act ("IDEA"); the Family Educational Rights and Privacy Act ("FERPA"); the privacy rule of the Health Insurance Portability and Accountability Act ("HIPAA"); and any and all other laws pertaining to the protection of information regarding students and their families.

B. All student records, including without limitation instructional logs and other performance records, are the property of PSD. The District shall not possess student records under this Agreement unless the records are anonymous or de-identified for reporting purposes.

C. The Parties agree that it is the District's sole responsibility to safeguard any FERPA-protected personally identifiable information as may be incidentally received or that the District has in its possession or use under this Agreement.

V. Liability.

Both Parties are public entities within the meaning of the Colorado Governmental Immunity Act, C.R.S. § 24-10-101, *et seq.*, as amended (the "Act"). Each Party agrees to be responsible for its own wrongful or negligent acts or omissions, or those of its officers, agents, or employees to the full extent allowed by law. Each Party shall at all times during the term of this Agreement maintain such liability insurance, by commercial policy or self-insurance, as is necessary to meet its liabilities under the Act. Upon request by one Party, the other Party shall show proof of such insurance. Nothing in this Agreement shall be construed as a waiver of the protections of the Act.

VI. Miscellaneous

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

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

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

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

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

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

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

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

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

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

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

In Witness Whereof, the Parties have executed this Agreement as of the Effective Date.

Health District of Northern Larimer County

By: _____

Erin Hottenstein
President

Date: _____

By: _____

Courtney Green
Interim Executive Director

Date: _____

Poudre School District

By: _____

Brian Kingsley
Superintendent

Date: _____

By: _____

Liz Davis
Senior Executive Director of Student Services

Date: _____

Exhibit A Scope of Services

Partnership Purpose

- Build capacity for community health services across Northern Larimer County.
- Support community health interventions that benefit youth and their families by investing in cross-sector partnerships that sustain and build the behavioral health workforce
- Formalize partnerships with mission aligned entities to collaboratively identify and build innovative, evidence-based strategies related to youth behavioral health.
- Provide training and support to help MSW students remove barriers to access their internship and education as they enter the professional mental health workforce in schools and receive specific training, supervision, licensing and credentials.
- Support PSD students' well-being by providing direct services, such as one-on-one counseling and small group interventions through program interns and fellows, under the supervision of licensed professionals.
- Support interns and fellows collaborating with teachers, school mental health staff, and administrators to identify at-risk students and implement preventive strategies, helping to create a safer and more supportive school environment.

District Duties

During the term of this Agreement, the District shall perform the following duties:

- Ensure timely provision of payment.
- Facilitate cooperative agreement management and design meetings.

PSD Duties

During the term of this Agreement, PSD shall perform the following duties:

- PSD shall employ 10 MSW interns, 11 fellows, and 2 supervisors. The number of interns and fellows is subject to change; event of a vacancy is addressed in the table "PSD's Deliverables."
- PSD shall ensure proper supervision of the interns and fellows.

PSD's Deliverables

Deliverable	Cadence	Description
Confirmation of ongoing retention of behavioral health workforce, interns, fellows, and supervisors	As needed	Written notification to the District within 14 business days of a vacancy of the funded personnel. If there is a vacancy, funds may be reallocated as described under "collaborative design of vacancy plans."
Collaborative design of quality measurement strategies to demonstrate and communicate service delivery impacts.	Ongoing	<p>PSD shall provide reporting on the following metrics: number of student contacts, race/ethnicity of students, grade of students, referral source, direct service topics, resources given, indirect service, and service hours.</p> <p>Any changes to the metrics described above shall be designed collaboratively utilizing established data collection in the program. This shall be incorporated into the Agreement as an amendment.</p>
Cooperative agreement management and design meetings between the Parties that reflect mutually agreed upon goals, metrics and timelines.	As jointly determined	In the first month of the Agreement (January 2026), the District and PSD shall determine cadence to review goals, metrics, and progress. This shall be incorporated into the Agreement as an amendment.

Collaborative design of vacancy plans to address transitions in behavioral health personnel.	As needed	<p>The District and PSD shall work together to design a plan for personnel funds that are unspent due to vacancy. This shall be incorporated into the Agreement as an amendment.</p> <p>In the event of a vacancy, any additional funds shall be reallocated within the scope of the program by PSD with written approval from the District unless otherwise agreed upon. The reallocation may include additional FTE to existing fellows (currently employed at .7 FTE).</p>
District Community Health Committee Meetings	As needed	Participation in a committee on a cadence to be identified across District cooperative agreement participants.
End of Semester Reporting	Within 30 days of the end of the PSD 2025-2026 school year	<p>Report shall reflect:</p> <ul style="list-style-type: none"> • Quality measurement metrics; • Real costs of personnel, workforce development, and any supplies or materials within the scope of the agreement. This shall be reported through an attestation;

		<ul style="list-style-type: none"> • Key successes and challenges; and • Bright spots or de-identified success stories. <p>The District and PSD may co-develop other metrics in addition to or instead of the reporting requirements under this exhibit through an amendment.</p>
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AGENDA DOCUMENTATION

Meeting Date: December 10, 2025

SUBJECT: Resolution 2025-14: Adopt Budget and Appropriate Sums of Money

PRESENTER: Jessica Holmes

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

PURPOSE/ BACKGROUND

A resolution by the Health District Board of Directors is required for adopting an annual budget and the Board of Directors must appropriate funding from the general fund for the 2026 budget year.

Per Colorado Revised Statue 29-1-101 a budget for each special district is required to be submitted to the Division of Local Government on an annual basis. The annual budget must contain revenues, expenditures, and fund balances. Each budget must also contain a message of significant budget issues for the year, the basis of accounting, and any leases that the district is involved in.

- The 2026 budget document must be adopted by December 15, 2025.
- Per CRS 29-1-108, Section 4 – The appropriations for the budget year must be made by December 31st for the following budget year.

Attachment(s): Resolution 2025-14 Adopt Budget and Appropriate Sums of Money

FISCAL IMPACT

N/A

STAFF RECOMMENDATION

Staff recommends the Board of Directors adopt the proposed resolution for the 2026 Health District of Northern Larimer County Budget and Appropriate Sums of Money in the amount of \$29,259,026.00.



2026 Proposed Budget

Updated for Board Meeting on December 10, 2025
Updated for Public Hearing on November 19, 2025
Proposed to the Board of Directors on October 15, 2025



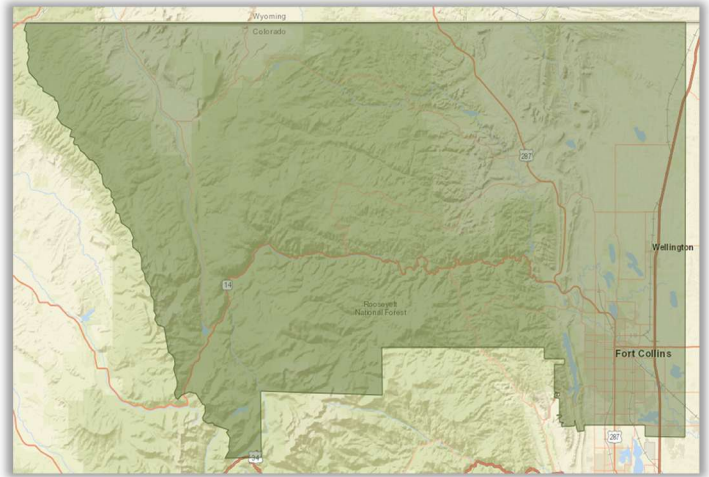
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Introduction

The Health District of Northern Larimer County is a special tax district created by voters in 1960 to address community health needs. Its boundaries encompass the northern two-thirds of Larimer County, including Fort Collins, Laporte, Timnath, Wellington, Livermore and Red Feather Lakes. Primarily funded by local property tax dollars, the Health District is governed by a publicly elected, five-member Board of Directors.

Originally known as the Poudre Valley Hospital District, the organization transitioned in 1994 to create a locally controlled, private nonprofit entity to manage hospital operations in response to evolving health care needs. Since then, changes in state law and community priorities have shaped the District into what it is today—the Health District of Northern Larimer County.



During the 2026 budget year, the Health District will continue to adapt to the changing needs of our community by providing the following client-facing services:

- Oral Health Services, including primary dental care and screenings.
- Behavioral Health Services for children, youth, and adults.
- Access to Care assistance, including health insurance enrollment, plan management, policy literacy, and integrated care coordination.

We will further respond to district needs through delivery of community-facing services, such as:

- Strategic Partnership funding to expand the reach of our mission beyond the services we directly provide.
- Community Engagement through outreach and education, addressing health-related social needs, and supporting the Mental Health and Substance Use (MHSU) Alliance.
- Data collection and analysis to accurately assess community needs and transform those insights into informed actions and initiatives.

While change is inevitable, our mission remains constant: **to enhance the health of our community**. The 2026 Proposed Budget builds on the Health District's legacy, ensuring a more equitable and meaningful impact on community health.

In compliance with the Local Government Budget Law of Colorado, the 2026 Proposed Budget was submitted to the Board of Directors on October 15, 2025 and reviewed by the Board during the study session on October 22, 2025. The Board invited public comment during a budget hearing on November 19, 2025, and will adopt the 2026 Budget on December 10, 2025.

The Health District of Northern Larimer County's financial statements, records, and 2026 Proposed Budget are prepared using the modified accrual basis of accounting.

Executive Summary

Presented within is the 2026 Proposed Budget for the Health District of Northern Larimer County. This budget has been thoughtfully prepared by our dedicated staff to align with the four pillars of the Health District's Strategic Plan: Great Governance, Organizational Excellence, Health Equity, and Partnerships.

Projected revenues for 2026 are \$15.62 million, while proposed expenditures are \$17.46 million, resulting in a net decrease of \$1.84 million to the District's fund balance.

While the deficit may appear concerning at first glance, it is important to note that the District began 2025 with a fund balance of \$11.39 million, and projections indicate an increase of \$2.25 million during 2025. This growth positions the District with an estimated beginning fund balance of \$13.64 million for 2026. Therefore, even with the proposed decrease, the District will maintain a strong ending balance of \$11.30 million at the close of 2026.

The Health District remains in excellent financial health. This proposed deficit budget is not a sign of financial decline, but rather a deliberate and strategic investment to strengthen programs, services, and partnerships that advance community health and well-being.

2026 Fund Balance Summary		
Estimated Beginning		\$13,641,883
Projected Revenues	+	\$15,617,143
Proposed Expenditures	-	\$17,457,752
Proposed Contingency	-	\$500,000
Ending Fund Balance		\$11,301,274

Fiscal Alignment with Strategic Goals

Throughout the development of the 2026 Proposed Budget, administrative and programmatic leadership worked closely with finance to ensure that the Health District's budget is supportive of the organization's mission, strategic plan, and commitment to our valued staff. This collaborative process resulted in allocating funds to several current and emerging priorities, examples of which are highlighted below.



Great Governance

- Board of Director training to support successful governance.
- Forensic Audit to ensure financial integrity and accountability.
- Leadership training and development for management personnel.
- Compliance training for staff.
- Increased Compliancy Group software functionality.
- Launch of Accreditation Readiness workgroup to identify areas of improvement and comply with professional standards.
- Tools to assess the needs of our community to maintain care that is reflective of the district we serve.



Organizational Excellence

- Professional Development allotments for all staff to invest in our greatest asset.
- Necessary equipment and software upgrades to promote productivity and excellence.
- Continued internal communication transparency efforts.
- Increased external marketing to invest in the District's growth and visibility.
- Data analysis software to support improved decision making.
- Innovation & Quality team to launch, evaluate, and sustain client service focused projects.



Health Equity

- Staff Training aimed at cultivating and equitable environment and experience.
- Expanded client assistance initiatives, including funds for patient transportation to address barriers to care.
- Assessments and certification programs for bilingual staff to provide interpretation services.
- Expanded communication efforts to raise education and awareness across our district.



Partnerships

- Continued partnerships with FMC/UCHealth, SummitStone, and Salud.
- \$400K for a newly cultivated partnership with Poudre School District.
- Assistance and incentives for community involvement.
- Expanded efforts in areas of community outreach, communication, and collaboration.

The efforts of our staff are central to the Health District's ability to carry out its mission, which is why the proposed budget reflects our unwavering commitment to our workforce by incorporating several enhancements directly informed by employee feedback. Key investments include a 4% cost-of-living adjustment to salaries and wages, universal professional development allotments for all staff, and increased per-FTE allocations for training and development to meet current standards. Additionally, funds have been designated for equipment and software upgrades to support success, expanded employee recognition programs, and continued efforts to gather staff input through surveys, reviews, and feedback initiatives. These measures underscore that our workforce is not only valued, but essential to the organization and the community we serve.

Revenue Overview

The Health District's revenue streams remain stable and consistent in the 2026 Proposed Budget, with projected revenues totaling \$15.62 million.

Tax Revenues

Property and Specific Ownership Tax revenues for 2026 are projected at \$12.18 million, representing 78% of total revenue for the year. Detailed calculations are provided on the Supplemental Information page.

Service Revenues

The Health District continues to offer low-cost Oral Health and Behavioral Health services within the district, while all other patient and community services remain free of charge. Service revenues, net of adjustments, are projected at \$991K, accounting for 6% of total revenue.

Lease Revenues

Lease income is derived from a long-standing agreement with Poudre Valley Hospital and tenant leases for the Mulberry Property. Lease revenues for 2026 are projected at \$1.66 million, contributing 11% of total revenue.

Contributions

The District anticipates receiving funds from the Colorado Health Benefit Exchange, the Colorado Behavioral Health Association, and the Northern Colorado Health Alliance in 2026. These contributions are anticipated to provide \$346K, representing 2% of overall resources.

Investment Earnings

Investment income is generated from Local Government Investment Pool accounts, Certificates of Deposit, and bank account interest. Based on current economic forecasts and projected investment balances, investment earnings for 2026 are estimated at \$438K, comprising 3% of total revenue.

Expenditure Overview

Throughout the development of the proposed budget, our team prioritized strategic alignment of the Health District's operating expenses. To strengthen our organization and the community we serve, proposed expenditures for 2026 total \$17.46 million.

Personnel Compensation

Personnel Compensation—comprising salaries, wages, benefits, and taxes—is proposed at \$10.86 million, representing 62% of total expenditures. As noted in the Supplemental Information page, this figure includes positions not yet filled, which accounts for the increase compared to 2025 projected expenses.

Professional Development

In response to staff feedback and organizational goals, the 2026 Proposed Budget reflects an increased investment in employee development. Proposed expenses for this category total \$538K, or 3% of overall expenditures.

Contracted Services

The Health District plans to engage consulting expertise primarily for legal and audit services, IT support, temporary staffing, and program operation development. Proposed expenses for Contracted Services are \$1.60 million, contributing 9% of total expenditures.

Service Expenses

Service Expenses—covering medical, assistance, and community-related items—are projected at \$825K, representing 5% of total expenditures. While medical expenses align with services to be provided, additional initiatives have been incorporated into assistance and community programs.

Partnership Funding

The Health District proposes continued funding for partnerships with FMC/UCHealth, Salud, and SummitStone, while expanding support to include a new partnership with Poudre School District to help offset legislative funding cuts. Partnership funding for 2026 totals \$1.54 million, or 9% of overall expenditures.

Supplies, Equipment, & Software

Management assessed staff needs for equipment and software during the budget process. Due to identified requirements and inflationary price increases, proposed expenses for this category are \$571K, accounting for 3% of total expenditures.

Occupancy & Other Expenses

The 2026 Proposed Budget allocates \$547K for Occupancy Expenses and \$516K for Other Operating Expenses. These costs are largely driven by uncontrollable factors such as utilities, repairs and maintenance, insurance, and treasurer fees. Combined, these categories represent 6% of total expenditures, with increases tied to inflation and projected rates.

Capital Expenditures

Capital investments for 2026 include funding for two Oral Health operatories, statistical analysis and practice management software, branding updates, and physical infrastructure improvements. Proposed capital expenses total \$461K, representing 3% of overall expenditures.

Fund Balance & Contingency Planning

Despite the anticipated decrease in the Health District's Fund Balance resulting from adoption of the 2026 Proposed Budget, the District's General Fund remains well positioned to continue advancing community health initiatives. Retained funds from prior years provide a strong foundation, with an estimated beginning balance of \$13.64 million for 2026. After adding projected revenues of \$15.62 million and deducting proposed expenditures of \$17.46 million along with a \$500,000 contingency, the Governmental Fund Balance is projected to close at \$11.30 million at year-end.

The proposed budget recommends appropriating this balance as follows:

Restricted Funds

Restricted Funds – \$469K, representing the 3% reserve required under TABOR.

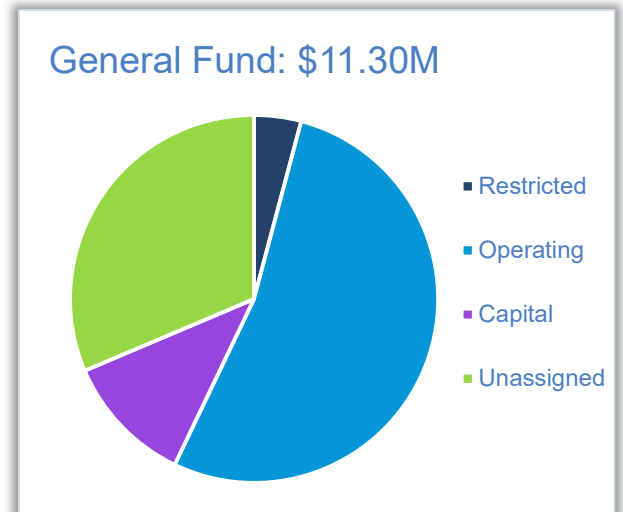
Assigned Funds

- Operating Reserve – \$5.99 million: Equivalent to four months of proposed total expenditures, ensuring operational stability.
- Capital Reserve – \$1.30 million: Designated for future capital investments based on identified upcoming needs.

Unassigned Funds

Unassigned Funds of \$3.55 million reflect excess resources not yet allocated to specific purposes, providing flexibility for future priorities.

This recommended allocation aligns with best practices and ensures the District maintains the capacity to respond to unexpected needs while safeguarding financial stability.



Results of the Budget Study Session

On October 22nd, 2025, the Board of Directors reviewed the first draft of the 2026 Proposed Budget with Health District leadership. During this Budget Study Session, the Board provided essential feedback and posed valuable questions to the District's leadership team. A memo was released to the Board on October 31st, 2025, to formally address their open questions.

In addition to the memo, the following changes were made to the 2026 Proposed Budget (which are reflected throughout this package):

Revenue Changes

- Service Revenues, Net – Grant Reimbursement: Recent information released by the state regarding funding cuts to the Senior Dental Program prompted a decrease to this revenue from \$120K to \$100K. The Health District will not stop providing service to patients currently covered by this grant, we will look to other sources, such as Client Assistance, to continue providing Oral Health services to our community's low-income seniors.
- Service Revenues, Net – Other Adjustments: Communications between Finance and our Behavioral Health program led to an increase of adjustments to our proposed CAYAC and Adult Connection services. This resulted in a decrease of \$35K to this revenue source to ensure that we continue providing affordable Behavioral Health services to our patients.

- Contributions – Grants & Partnerships: There was a slight increase of \$7K to properly account for indirect grant revenue related to the Senior Dental Program.

Expenditure Changes

- Personnel Compensation: A question related to where benefit premium increases are being absorbed (employer or employee) prompted a deeper dive into our benefit cost assumptions. It was discovered that we were able to adjust our assumptions to a lower amount and still ensure that employees will not feel the effect of premium increases. The net result of these adjustments was an expense decrease of \$21K.
- Contracted Services – Consultants: Expenses for consultants in Strategy & Impact (Policy) and Client Experience (Health Info Source) were increased by a total of \$13K to ensure enough funds are available to enlist external help to assist the District in responding to legislative changes.
- Other Operating Expenses: The finalization of General & Liability insurance policies, adjustments to employee expense proposals, and additional funds for Board elections led to a proposed expense increase of \$35K. However, recalculation of Property Tax expenses for the Mulberry property resulted in a reduction to expenses of \$33K. Overall, the net change in this category is only \$2K.

After all adjustments were made to the original proposed budget, Revenues were decreased by a total of \$48K and Expenditures were decreased by a total of \$8K resulting in a net change of (\$40K) from the original proposed budget.

Property Tax Revenue: Final Valuation Update

In accordance with Section 39-1-111(5) of the Colorado Revised Statutes, the Larimer County Assessor recertified property values used in the calculation of Property Tax Revenue for taxing authorities.

The revised Certificate of Valuation provided a lower assessment value, resulting in property tax revenue decreasing by \$13K. This change is reflected throughout this updated 2026 Proposed Budget package.

Governance Review & Action

To continue advancing the objectives outlined in the 2026 Proposed Budget, the remaining actions are requested from the Board of Directors:

- December 10th, 2025: Officially adopt the 2026 Budget through the following resolutions:
 - Resolution to Adopt the Budget and Appropriate Funds
 - Resolution to Set Mill Levies

Questions and feedback are welcomed and encouraged as we work collaboratively to ensure the continued success of the Health District of Northern Larimer County and its commitment to serving the community. Thank you for your participation and support throughout the 2026 Budget season.

Health District of Northern Larimer County

2026 Proposed Budget

Revenues

Tax Revenues	12,184,458
Service Revenues, Net	991,468
Lease Revenues	1,657,525
Contributions	345,988
Investment Earnings	437,705
Other Operating Revenues	-

Total Revenues \$ **15,617,143**

Expenditures

Personnel Compensation	10,857,931
Professional Development	538,243
Contracted Services	1,598,720
Service Expenses	825,301
Partnership Funding	1,542,241
Supplies, Equipment, & Software	571,188
Occupancy Expenses	546,690
Other Operating Expenses	516,438
Capital Expenditures	461,000

Total Expenditures \$ **17,457,752**

Change in Fund Balance \$ **(1,840,609)**

Appropriation of Governmental Fund Balance

Beginning Governmental Fund Balance	13,641,883
Total Revenues	15,617,143

Total Available Resources \$ **29,259,026**

Expenditures	16,996,752
Capital Expenditures	461,000
Contingency	500,000

Total Expenditures \$ **17,957,752**

Ending Governmental Fund Balance \$ **11,301,274**

Appropriation of Fund Balance:

Non-Spendable (Prepaid)	-
Restricted Funds	468,514
Committed Funds	-
Assigned Funds	
Operating Reserve	5,985,917
Capital Reserves	1,300,000
Unassigned Funds	3,546,842

Total General Fund \$ **11,301,274**

Health District of Northern Larimer County

Three Year Comparative Budget

	2024		2025		2026
	Budget	Actual	Budget	Projection	Proposed
Revenues					
Tax Revenues	12,367,095	12,353,249	11,361,432	11,390,658	12,184,458
Service Revenues, Net	1,169,972	762,292	1,462,750	1,570,187	991,468
Lease Revenues	1,531,998	1,546,333	1,304,044	1,565,293	1,657,525
Contributions	895,620	580,751	414,048	515,666	345,988
Investment Earnings	415,000	624,535	332,964	607,499	437,705
Other Operating Revenues	24,600	26,542	-	8,147	-
Total Revenues	\$ 16,404,285	\$ 15,893,701	\$ 14,875,238	\$ 15,657,449	\$ 15,617,143
Expenditures					
Personnel Compensation	11,165,855	9,347,856	10,435,117	8,334,849	10,857,931
Professional Development	481,654	241,316	345,893	252,322	538,243
Contracted Services	2,561,573	854,075	1,444,600	1,589,358	1,598,720
Service Expenses	702,644	567,508	570,129	618,134	825,301
Partnership Funding	-	-	770,000	700,000	1,542,241
Supplies, Equipment, & Software	542,597	216,083	413,113	363,848	571,188
Occupancy Expenses	811,751	524,425	469,461	505,554	546,690
Other Operating Expenses	549,412	431,074	496,902	483,496	516,438
Capital Expenditures	-	343,079	-	558,069	461,000
Total Expenditures	\$ 16,815,486	\$ 12,525,415	\$ 14,945,215	\$ 13,405,630	\$ 17,457,752
Change in Fund Balance	\$ (411,201)	\$ 3,368,286	\$ (69,977)	\$ 2,251,819	\$ (1,840,609)

Appropriation of Governmental Fund Balance

	2024		2025		2026
	Budget	Actual	Budget	Projection	Proposed
Beginning Governmental Fund Balance	8,747,550	8,021,778	9,240,047	11,390,064	13,641,883
Total Revenues	16,404,285	15,893,701	14,875,238	15,657,449	15,617,143
Total Available Resources	\$ 25,151,835	\$ 23,915,479	\$ 24,115,285	\$ 27,047,513	\$ 29,259,026
Expenditures	16,315,495	12,182,337	14,945,215	12,847,560	16,996,752
Capital Expenditures	526,040	343,079	-	558,069	461,000
Contingency	500,000	-	-	-	500,000
Total Expenditures	\$ 17,341,535	\$ 12,525,415	\$ 14,945,215	\$ 13,405,630	\$ 17,957,752
Ending Governmental Fund Balance	\$ 7,810,300	\$ 11,390,064	\$ 9,170,070	\$ 13,641,883	\$ 11,301,274

Appropriation of Fund Balance:

Non-Spendable (Prepaid)	-	94,867	-	95,000	-
Restricted Funds	960,706	470,801	448,356	469,723	468,514
Committed Funds	3,000,000	-	-	-	-
Assigned Funds					
Operating Reserve	1,031,897	69,977	7,472,610	7,472,610	5,985,917
Capital Reserve	2,021,000	-	1,232,874	674,805	1,300,000
Unassigned Funds	796,697	10,754,419	16,230	4,929,745	3,546,842
Total General Fund	\$ 7,810,300	\$ 11,390,064	\$ 9,170,070	\$ 13,641,883	\$ 11,301,274

Health District of Northern Larimer County

Detailed Three Year Comparative Budget

	2024	2025		2026
	Actual	Budget	Projection	Proposed
Revenues				
Tax Revenues	12,353,249	11,361,432	11,390,658	12,184,458
Property Taxes	11,645,284	10,761,432	10,679,432	11,476,458
Specific Ownership Taxes	707,964	600,000	711,226	708,000
Service Revenues, Net	762,292	1,462,750	1,570,187	991,468
Self Pay	269,540	417,109	365,336	363,968
Grant Reimbursement	-	-	39,600	100,000
Insurance Reimbursement	752,378	1,575,189	1,645,993	950,000
Contractual Adjustments	(255,735)	(525,398)	(473,228)	(380,000)
Other Adjustments	(3,892)	(4,150)	(7,515)	(42,500)
Lease Revenues	1,546,333	1,304,044	1,565,293	1,657,525
Capital Lease	134,755	137,100	175,888	219,761
Capital Lease - Interest	1,171,242	1,166,944	1,166,944	1,162,841
Tenant Lease	140,884	-	124,784	127,371
Tenant Lease - Interest	3,109	-	632	142
Tenant Lease - Fees	96,342	-	97,045	147,410
Contributions	580,751	414,048	515,666	345,988
Grants & Partnerships	575,493	394,048	512,051	296,081
Donations	5,258	20,000	3,615	49,907
In-Kind Donations	-	-	-	-
Investment Earnings	624,535	332,964	607,499	437,705
Investment Yield	624,535	332,964	595,716	405,232
Interest Earned	-	-	11,783	32,473
Other Operating Revenues	26,542	-	8,147	-
Miscellaneous Income	26,542	-	8,147	-
Total Revenues	\$ 15,893,701	\$ 14,875,238	\$ 15,657,449	\$ 15,617,143
	2024	2025		2026
	Actual	Budget	Projection	Proposed
Expenditures				
Personnel Compensation	9,347,856	10,435,115	8,334,849	10,857,931
Salaries & Wages	7,509,814	8,181,345	6,601,539	8,460,789
Social Security Tax	449,329	507,242	394,584	504,813
Medicare Tax	110,171	118,630	93,435	122,536
SUTA	(1,028)	16,363	12,676	6,011
Retirement Contributions	367,248	408,466	344,149	422,189
Employee Health Insurance	826,709	1,076,741	796,441	1,211,280
Employee Dental Insurance	33,259	46,967	29,265	58,800
Employee Other Insurance	56,249	61,765	48,142	52,920
Workers Compensation Insurance	(3,895)	17,598	14,618	18,592
Professional Development	241,316	345,893	252,322	538,243
Staff Training	32,201	100,708	39,799	127,298
HD Training	-	-	1,000	30,000
Meetings	48,359	58,523	56,955	32,575
HD Meetings	-	-	-	8,500
Conferences	105,593	132,970	81,700	99,918
Travel	9,035	7,963	15,670	165,643
Professional Reimbursement	33,641	30,982	27,417	45,735
Professional Growth Materials	12,487	14,747	29,781	28,575
Contracted Services	854,075	1,444,600	1,589,358	1,598,720
Legal Services	105,996	-	217,343	200,400
Audit Services	30,993	-	33,365	236,000
Temporary Help	17,309	12,500	1,140	154,500
Consultants	699,777	1,432,100	1,337,510	1,007,820

Expenditures (Continued)	2024	2025		2026
	Actual	Budget	Projection	Proposed
Service Expenses	567,508	570,129	618,134	825,301
Medical Supplies	132,500	153,300	152,782	170,042
Medical Equipment	1,734	10,893	10,518	11,440
Infection Control	4,677	7,921	2,291	-
Lab & X-Ray	163,039	150,000	159,715	180,000
Prescription & Medication	17,667	35,795	5,557	30,000
Client Assistance & Incentives	8,831	18,000	10,742	75,971
Community Assistance & Incentives	813	7,500	2,547	15,000
Specialty Care	25,788	35,000	11,556	35,000
Community Education	21,262	143,630	36,238	57,000
Community Outreach	-	-	-	30,500
Community Newsletter	65,561	-	-	-
Community Advertising	47,131	-	101,192	139,000
Community Meetings	-	-	2,000	30,050
Bad Debt	78,505	8,090	122,996	51,298
Partnership Expenses	-	770,000	700,000	1,542,241
Partnership Funding	-	770,000	700,000	1,542,241
Supplies, Equipment, & Software	216,083	413,113	363,848	571,188
Supplies	24,556	21,000	18,766	31,075
Equipment	69,187	83,082	53,497	135,147
Software	117,248	301,218	281,615	358,251
Subscriptions	-	-	-	31,640
Postage & Printing	5,092	7,813	9,970	15,075
Occupancy Expenses	524,425	469,461	505,554	546,690
Rent & Lease Payments	76,323	9,413	37,118	24,000
Utilities	71,280	89,364	86,119	94,776
Telephone & Internet	65,771	73,103	65,430	83,953
Repairs & Maintenance - Building	185,759	182,362	181,213	190,274
Repairs & Maintenance - Equipment	35,305	-	56,967	62,664
Repairs & Maintenance - Vehicle	2,092	-	3,053	3,358
Custodial Services	87,896	115,219	75,654	79,462
Security Services	-	-	-	8,204
Other Operating Expenses	431,074	496,902	483,496	516,438
Insurance - General & Liability	65,957	92,235	65,540	73,114
Insurance - Public Officials	106	-	1,500	1,500
Insurance - Malpractice	11,702	10,743	-	20,874
Employee Onboarding	-	-	-	5,000
Recruitment	35,934	41,591	35,901	40,000
Other Employee Expenses	-	-	-	24,500
Employee Recognition	13,801	35,175	13,049	24,150
Volunteer Recognition	2,000	2,000	672	4,000
Public Relations	88	-	4,132	4,589
Election Expenses	-	26,250	75,990	10,000
Investment Expenses	9,681	20,000	15,614	-
Bank & Merchant Fees	-	-	-	16,395
Treasurer Fees	232,943	232,909	213,627	229,529
Property Taxes	48,122	35,999	41,720	43,095
HD Dues & Fees	8,241	-	15,752	19,692
Miscellaneous Expenses	2,500	-	-	-
Capital Expenditures	343,079	-	558,069	461,000
CapEx - Buildings & Improvements	73,895	-	58,050	240,000
CapEx - Leasehold Improvements	-	-	48,883	-
CapEx - Equipment - General	72,341	-	78,568	-
CapEx - Equipment - Medical	16,365	-	65,736	120,000
CapEx - Software	180,478	-	306,833	101,000
Total Expenditures	\$ 12,525,415	\$ 14,945,213	\$ 13,405,630	\$ 17,457,752
Change in Fund Balance	\$ 3,368,286	\$ (69,975)	\$ 2,251,819	\$ (1,840,609)

Health District of Northern Larimer County

2026 Proposed Budget by Function

	Program Operations			General & Administration	Total Operating	Non-Operating Leased Property	2026 Budget (Proposed)	2025 Budget	2025 to 2026	
	Strategy & Impact	Client Experience	Total						\$ Change	%
Revenues										
Tax Revenues	-	-	-	12,184,458	12,184,458	-	12,184,458	11,361,432	823,026	7%
Service Revenues, Net	-	991,468	991,468	-	991,468	-	991,468	1,462,750	(471,282)	-32%
Lease Revenues	-	-	-	1,382,602	1,382,602	274,923	1,657,525	1,304,044	353,481	27%
Contributions	28,130	317,859	345,988	-	345,988	-	345,988	414,048	(68,060)	-16%
Investment Earnings	-	-	-	437,705	437,705	-	437,705	332,964	104,741	31%
Other Operating Revenues	-	-	-	-	-	-	-	-	-	0%
Total Revenues	\$ 28,130	\$ 1,309,326	\$ 1,337,456	\$ 14,004,765	\$ 15,342,221	\$ 274,923	\$ 15,617,143	\$ 14,875,238	\$ 741,905	5%
Expenditures										
Personnel Compensation	1,592,233	6,107,375	7,699,608	3,158,323	10,857,931	-	10,857,931	10,435,117	(422,814)	-4%
Professional Development	90,640	241,898	332,538	205,705	538,243	-	538,243	345,893	(192,350)	-56%
Contracted Services	317,498	949,905	1,267,403	301,317	1,568,720	30,000	1,598,720	1,444,600	(154,120)	-11%
Service Expenses	78,550	566,251	644,801	180,500	825,301	-	825,301	570,129	(255,172)	-45%
Partnership Expenses	1,542,241	-	1,542,241	-	1,542,241	-	1,542,241	770,000	(772,241)	-100%
Supplies, Equipment, & Software	108,403	286,401	394,804	176,384	571,188	-	571,188	413,113	(158,075)	-38%
Occupancy Expenses	59,906	249,049	308,955	100,582	409,536	137,154	546,690	469,461	(77,229)	-16%
Other Operating Expenses	17,960	77,141	95,101	354,018	449,119	67,318	516,438	496,902	(19,536)	-4%
Capital Expenditures	93,400	192,240	285,640	30,360	316,000	145,000	461,000	-	(461,000)	100%
Total Expenditures	\$ 3,900,832	\$ 8,670,259	\$ 12,571,091	\$ 4,507,189	\$ 17,078,280	\$ 379,473	\$ 17,457,752	\$ 14,945,215	\$ (2,512,537)	-17%
Change in Fund Balance	\$ (3,872,702)	\$ (7,360,933)	\$ (11,233,635)	\$ 9,497,576	\$ (1,736,059)	\$ (104,550)	\$ (1,840,609)	\$ (69,977)	\$ (1,770,632)	22%

Health District of Northern Larimer County

2026 Proposed Budget: Supplemental Information

Tax Revenues

	2026 Budget	2025 Budget	\$ Change	% Change
Property Tax Gross Assessment	5,592,331,835	5,260,196,978	332,134,857	6%
Less: TIF Area Increment	341,811,804	296,208,835	45,602,969	15%
Property Tax Net Assessment	5,250,520,031	4,963,988,143	286,531,888	6%
Levy (mills)	2.167	2.167	-	0%
Property Tax Revenue	11,377,877	10,756,962	620,915	6%
Add: Specific Ownership Tax Rev.	708,000	600,000	108,000	18%
Add: Exmpt PPT Reimbursement	16,410	-	16,410	100%
Add: 2025 Abated Recoup	82,171	-	82,171	100%
Less: County Collection Fees	229,529	232,909	(3,380)	-1%
Total Tax Revenues, Net	\$ 11,954,929	\$ 11,124,053	\$ 830,875	7%

Note: Final Certifications of Valuation were provided by the Larimer County Assessor. These amounts reflect the updated valuation.

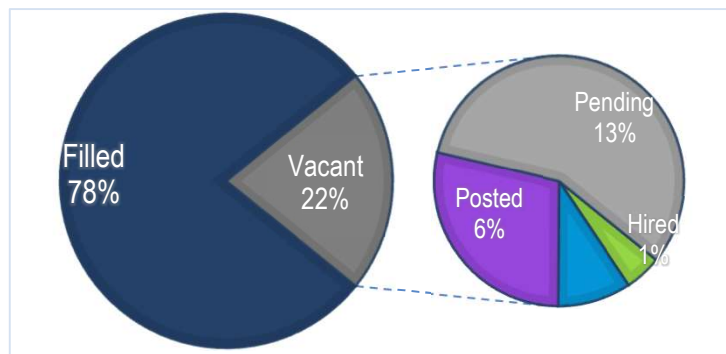
Full Time Employee Counts

	2024 Actual	Budget	2025 Actual/Total	Filled	Vacant	2026 Proposed
Administration	31.175	27.350	22.850	19.000	3.850	23.500
Program Operations (Subtotal)	75.390	70.500	70.175	54.725	15.450	69.400
Strategy & Impact (Subtotal)	19.540	18.000	15.150	11.125	4.025	13.500
Policy	3.000	0.500	1.108	0.438	0.671	0.500
Data & Analytics	3.000	5.175	5.608	2.438	3.171	4.500
Community Assessment	3.000	0.500	0.608	0.438	0.171	0.500
Health Equity	1.000	1.000	1.608	1.438	0.171	1.500
Partnerships	-	0.500	0.610	1.438	(0.828)	1.500
Community Engagement	-	5.500	5.608	4.938	0.671	5.000
Transitioned Positions	9.540	4.825	-	-	-	-
Client Experience (Subtotal)	55.850	52.500	55.025	43.600	11.425	55.900
Innovation & Quality	-	-	2.250	3.250	(1.000)	3.375
Access to Care	8.166	6.530	6.250	6.250	-	6.375
Oral Health	27.418	27.240	26.950	23.200	3.750	27.075
Behavioral Health	20.266	18.730	19.575	10.900	8.675	19.075
Health District Total FTE	106.565	97.850	93.025	73.725	19.300	92.900

Staff Position Status

Total Staff Positions	97
Filled Positions	76
Vacant Positions	21
Hired, Awaiting Start Date	1
Interview Phase	2
Posted	6
Pending	12

Note: Staff Positions will not match FTE as some positions are part time.





**Health District of Northern Larimer County
Resolution No. 2025-14**

A Resolution of the Board of Directors of the Health District of Northern Larimer County Adopting a Budget and Appropriating Sums of Money for the Health District of Northern Larimer County for the Calendar Year Beginning on the First Day of January 2026 and Ending on the Last Day of December 2026.

Whereas, the proposed budget was submitted on October 15th, 2025, to the Board of Directors of the Health District of Northern Larimer County (the "Health District") for consideration, and;

Whereas, the proposed budget was reviewed by the Board of Directors of the Health District during a Budget Study Session on October 22nd, 2025, and;

Whereas, upon due and proper notice, published and posted in accordance with the law, the proposed budget was open for inspection by the public at a designated place, a public hearing was held on November 19th, 2025, and interested taxpayers were given the opportunity to file or register any objections to said proposed budget, and;

Whereas, whatever amounts have been budgeted to expenditures, like amounts were budgeted to revenues or planned to be expensed from the fund balance so that the budget remains in balance, as required by law, and;

Whereas, it is required by law and necessary to appropriate the revenues and reserves or fund balances provided in the budget and for the purposes described below, thereby establishing a limitation on expenditures for the operations of the Health District.

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

Section 1. The budget as submitted, amended, and summarized is hereby approved and adopted as the budget of the Health District for the 2026 calendar year.

Section 2. The following sums are hereby appropriated from revenue and the general governmental fund balance to the general fund, for purposes stated:

General Fund:

Operating Expenses & Contingency	\$17,957,752
Restricted Funds	\$468,514
Assigned – Operating Reserve	\$5,985,917
Assigned – Capital Reserve	\$1,300,000
Unassigned Funds	\$3,546,842
Total General Fund	\$29,259,026

Section 3. Any variance from the projected 2025 Change in Fund Balance to the actual 2025 Change in Fund Balance will be applied to the Unassigned Funds.

Adopted on this 10th day of December 2025.

Attest:

Erin Hottenstein, President

Sarah Hathcock, Secretary



AGENDA DOCUMENTATION

Meeting Date: December 10, 2025

SUBJECT: Resolution 2025-15: Set Mill Levies

PRESENTER: Jessica Holmes

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

PURPOSE/ BACKGROUND

Per Health District Bylaws Section 3. Financial Powers: The Health District shall have all general and special financial powers granted to statutory health services districts under C.R.S. 32-1-1101, 1103, as amended from time to time.

After the Board of Directors of the Health District of Northern Larimer County has adopted the proposed 2025 budget, the Executive Director must receive authorization and direction to certify to the Larimer County Commissioners that the mill levies for the Health District have been determined and set.

The amount of money necessary to balance the budget for general operating purposes from property tax revenue is \$11,476,458.

The 2025 net valuation for assessment for the Health District, as certified by the County Assessor, is \$4,966,050,896.

Attachment(s): Resolution 2025-15 Set Mill Levies

FISCAL IMPACT

N/A

STAFF RECOMMENDATION

Staff recommends the Board of Directors adopt the proposed resolution to set the mill levies for the Health District of Northern Larimer County.



**Health District of Northern Larimer County
Resolution No. 2025-15**

**A Resolution of the Board of Directors of the Health District of Northern Larimer County
Levying Property Taxes for the Year 2026 to Help Defray the Costs of Government for the
Health District of Northern Larimer County.**

Whereas, the Board of Directors of the Health District of Northern Larimer County (the "Health District"), has adopted the annual budget in accordance with Local Government Budget Law, on December 10th 2025, and;

Whereas, the amount of money necessary to balance the budget for general operating purposes from property tax revenue is \$11,476,458, and;

Whereas, the 2025 valuation for assessment for the Health District, as certified by the Larimer County Assessor, is \$5,592,331,835.

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

Section 1. For the purpose of meeting all **general operating** expenses of the Health District during the 2026 budget year, there is hereby levied a tax of 2.167 mills upon each dollar of the total valuation for assessment of all taxable property within the Health District for the year of 2025.

Section 2. The Interim Executive Director is hereby authorized and directed to immediately certify to the County Commissioners of Larimer County, Colorado, the mill levies for the Health District as hereinabove determined and set.

Adopted on this 10th day of December 2025.

Attest:

Erin Hottenstein, President

Sarah Hathcock, Secretary



AGENDA DOCUMENTATION

Meeting Date: December 10, 2025

SUBJECT: HR1 Update

PRESENTER: Dana Turner and Alyson Williams

OUTCOME REQUESTED: ☐ Decision ☐ Consent ☒ Report

PURPOSE/ BACKGROUND

As H.R. 1- One Big Beautiful Bill Act (OBBA) is beginning to be implemented, there are significant systemic changes forthcoming that will have a substantial impact on our community. This report is centered on discussing the response to impacts on the community and develop possible tactics to reduce harm in a collaborative and intentional manner.

Attachment(s): None.

FISCAL IMPACT: N/A

STAFF RECOMMENDATION:

None



AGENDA DOCUMENTATION

Meeting Date: December 10, 2025

SUBJECT: 2026 Board of Directors Meeting Schedule

PRESENTER: Erin Hottenstein

OUTCOME REQUESTED: ☐ Decision ☐ Consent ☒ Report

PURPOSE/ BACKGROUND

The Health District's business is conducted in meetings of the Board of Directors. Best practices include the Board designate the time and place for all Board meetings and designate where it posts its required 24-hour notice at the first regular meeting of each calendar year. (C.R.S.§32-1-903 and C.R.S.§24-6-402).

Health District of Northern Larimer County Bylaws (Article IV, Section 8.) require:

- a) The Board shall hold meetings at least ten times per year.*
- b) Special meetings and/or work sessions may be held as often as the needs of Health District require, upon notice to each director, and shall be posted as required by law.*

The Executive Committee proposes the following 2026 Meeting schedule to open a discussion regarding next years' time and dates with the intent to adopt a formal resolution at the first regular meeting of the year. Third Wednesdays at 6pm, with March adjusted for PVH Joint Board Meeting and Nov/Dec adjusted for holidays and Budget Adoption:

2026 Proposed BOD Meeting Schedule:

- **January 21,2026**
6pm-Regular Meeting
Multiple unscheduled meetings for ED/CEO Search
- **February 18,2026**
6pm-Regular Meeting
Final Board Training with Lind Group
- **March 18, 2026**
6pm-Joint meeting with PVH, date TBD*No Regular Meeting at Health District
- **April 22, 2026**
6pm-Regular Meeting
- **May 20,2026**
6pm-Regular Meeting (This was historically a Study Session instead of a Regular Meeting for Strategic Planning. Since the plan is approved through 2027, there is not much work to do.)
- **June 17,2026**
6pm-Regular Meeting
- **July 22,2026**
6pm-Regular Meeting (Unless it is decided to skip this month)
All Staff Picnic Date TBD
- **August 19,2026**
6pm-Regular Meeting

- **September 23,2026**
6pm-Regular Meeting (We had one in 2025, but this has been skipped in recent years to allow staff time to focus on budget preparation)
- **October21,2026**
6pm-Regular Meeting
Budget Study Session
- **November 18, 2026**
6pm-Regular Meeting
Public Budget Hearing
- **December 9,2025**
6pm-Regular Meeting
Budget Approval

STAFF RECOMMENDATION :

Discuss proposed 2026 Board of Directors Meeting Schedule



AGENDA DOCUMENTATION

Meeting Date: December 10, 2025

SUBJECT: Executive Director Report

PRESENTER: Courtney Green

OUTCOME REQUESTED: ____ Decision ____ Consent X Report

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

- **MEETINGS**

The Executive Director met with the following community partners and attended the following meetings/events since November 1, 2025:

- Cyndi Dodd– SummitStone
- Kirk Bane – ICC
- Sharon Hicks/Michael Allen – Open Minds
- Erin Riska – Search and Rescue
- Yachica Lind – The Lind Group
- Natalie Wells – Eide Bailly
- Dave Niemeyer/Gloria Timmons – CPS HR Consulting
- Angela Heyroth - Talent Centric Design

- **Other Updates**

- 1. Shaping our Culture at the Health District**

- Angela Heyroth of Talent Centric Design facilitated a training with managers to develop norms on how we want to model our culture themes.

- 2. Management Academy**

- Managers learned about the upcoming Stay Interviews – what they are, how they are done, and why they are important. I talked through the importance of self-awareness for leaders. Health Equity focused on Compassionate Curiosity, and Compliance shared on the psychology of speaking up.

- 3. Annual Food Drive**

- Human Resources facilitated the annual food drive to benefit the Food Bank. Staff could contribute food items or donate funds directly to the organization.

Attachment(s): November 2025 Program Updates

Leadership report summary

Reporting department: Health Equity
Reporting month: November 2025

What's new/key updates

- In alignment with the health equity strategic plan, a 2026 calendar of culturally significant days/months was developed (i.e. Black History Month, Disability Pride Month). This calendar will be used to inform inclusive planning and recognition efforts, including employee intranet and social media content.
- In alignment with the health equity strategic plan, development has begun of a public-facing statement highlighting the Health District's commitment to supporting health equity. This is essential for communicating to clients, community members, and partners that we firmly believe in taking action to create a stronger community where all residents can reach their highest level of health and well-being, and that the Health District is a place where people can come to receive high-quality services that meet their needs.

Strategic relevance

- Health Equity: Creating a calendar of culturally significant days/months and a public-facing statement in support of health equity models inclusive excellence for health care partners and collaborators and cultivates an environment in which staff knowledge and commitment to equity is invested in.
- Organizational Excellence: These updates also support our goals to create engaging internal communications that help everyone feel seen, heard, and respected, as well as our external communications strategy to promote visibility and transparency of programs and services.

Issues/risks/challenges

- No significant issues to report.

Key metrics/trends

- No metrics to report this month. In early 2026, this section will contain visualizations on health equity strategic plan implementation progress.

Leadership report summary

Reporting department: Data & Analytics
Reporting month: November 2025

What's new/key updates

- We are continuing efforts to clearly establish and operationalize the Data & Analytics program area.
 - The new manager started on 11/3/25 and is orienting with staff on relevant internal systems, practices, policies, and operations. Through this orientation process, we are clarifying roles for data-related staff.
 - We are finalizing the program's 2026 workplan to align with the Strategic Plan, and researching relevant frameworks, guidance, and communities of practice that can help inform this work.
- We are moving forward with the 2026 Red Feather Lakes (RFL) Area Healthcare Access Survey.
 - This is a one-time custom convenience sample survey to better understand community concerns with access to health care. Next steps are to finalize survey questions with community member input and seek IRB review. Goal is to launch the survey within the community in the first quarter of 2026.
- The 2025 Colorado Health Access Survey (CHAS) is completed.
 - The CHAS is conducted by the Colorado Health Institute (CHI). [Regional Fact Sheets and State-Wide Data Dashboard](#) are now available.
 - The Health District contracted with CHI in 2025 for an over-sample of Larimer County residents. The goal was to obtain validated data that crosses the spectrum of health and health related social needs. We are in the process of obtaining the data file for Larimer County to conduct tailored analyses.

Strategic relevance

- Organizational Excellence: All updates relate to improving and expanding available data for decision-making.
- Partnerships: Our tailored health care access survey project with the RFL community is helping to expand community engagement.

Issues/risks/challenges

- We are confirming HIPAA compliance with a new address validation tool prior to implementation. This tool, provided as a business service through the United States Postal Service, would allow us to validate client address data in real-time, ensuring we have accurate information for evaluating community reach in our service area, as well as in/out district client status.

Key metrics/trends

- No metrics to report this month. Defining and developing metrics for this program will be part of the 2026 workplan. Anticipated areas of focus will be data quality indicators and data use trends.

Leadership report summary

Reporting department: Strategic Funding Partnerships
Reporting month: November 2025

What's new/key updates

- We have successfully collaborated with Poudre School District to develop a collaborative partnership funding agreement to support community health interventions that benefit youth and their families by investing in cross-sector partnerships that sustain and build the behavioral health workforce.
- We have initiated an internal process for reviewing existing partnerships across the agency that will inform the long-term development of a Partnership Portfolio; reflecting the Health District's commitment to mission-driven stewardship of taxpayer funds.
- We continue to work with Salud, SummitStone, and Family Medicine Center leadership to develop reporting metrics.

Strategic relevance

- Partnerships: The partnership with Poudre School District strengthens our existing relationship to maximize impact on community health.
- Organizational Excellence: Instituting internal processes for this new programmatic area builds the infrastructure for this area to ensure clarity, transparency, and sustainability.

Issues/risks/challenges

- Leadership and legal counsel have identified a need to create a modified version of the existing standard contract template to more accurately reflect funding partnerships moving forward and reduce administrative burden.

Key metrics/trends

- No metrics to report this month but in the future this section will include key metrics co-developed with funded partners.

Leadership report summary

Reporting department: Community Engagement
Reporting month: November 2025

What's new/key updates

- The Community Engagement team has been actively supporting Larimer Health Connect during the open enrollment period by promoting the "Review Before You Renew" campaign. A successful strategy has been pairing this messaging with Changing Minds presentations, which have seen increased demand following the campaign relaunch. Recent outreach highlights include:
 - Presenting to local service providers at the monthly "Caring & Sharing" meeting.
 - Participating in the Nourish and Connect Thanksgiving Resource Fair in Red Feather Lakes, hosted by the North 40 Food Pantry.
- The annual MHSU Alliance Strategic Plan progress report is in development with help from the Communications team. This report will showcase key accomplishments and progress toward the shared vision of improving behavioral health in the community. Several new, locally tailored strategies are currently in development and are expected to launch in early 2026.
- The Community Engagement team is proactively planning for 2026 to align with organizational goals and community needs. This forward-looking approach ensures that programs and initiatives are thoughtfully designed to maximize impact in the coming year.

Strategic relevance

- **Health Equity:** Targeted outreach increases visibility of services among diverse populations, particularly in rural and underserved communities like Red Feather Lakes.
- **Partnerships:** The development and publication of the MHSU Alliance progress report strengthens cross-sector collaboration and improves transparency. Continued participation in community events expands community engagement and builds trust.
- **Organizational Excellence:** Proactive planning for 2026 strengthens internal infrastructure and ensures the thoughtful, strategic use of resources.

Issues/risks/challenges

- No significant issues to report.

Key metrics/trends

- The Changing Minds campaign relaunch has contributed to an increase in engagement, including on social media. Including an 89% increase of interactions on Facebook and increasing our reach on Instagram by 104%.



Leadership report summary

Reporting department: Compliance
Reporting month: November 2025

What's new/key updates

- The Compliance Workplan has been implemented and is being tracked for the end of 2025 and the 2026 year.
- Significant planning has been determined for future required employee trainings and attestations.
- The Risk Assessment through Compliancy Group is due to begin before the end of 2025.
- Work continues on BOD policies as well as internal procedures for the Health District.

Strategic relevance

- These updates most directly support goals related to **Great Governance** shaping Health District's policy to promote operational excellence. Additionally, it supports Organizational Excellence.

Issues/risks/challenges

- No significant issues to report

Key metrics/trends

- Compliancy Group Incident Reporting: 1 incident reported for the month of November

Leadership report summary

Reporting department: Communications

Reporting month: November 2025

What's new/key updates

- The Communications team is working with Facilities to update both external and internal spaces at 120 and 202 Bristlecone. This includes new-brand exterior signage on both buildings (moving current light boxes to more readily seen areas, as well as numerous internal improvements including new paint with branded decals, "embedded in the community" artwork, acrylic art installation at 120 and a graphic timeline (see mockup on next page) of the Health District's history and health equity-focus in the main conference room at 120. These changes are designed to give folks the feel of a modern facility that's recognizably branded.
- The Communications team is nearing the end of the process of turning our SharePoint news digest into a more engaging, UX-friendly intranet that's updated multiple times per week to keep staff engaged and as informed as possible. We'll continue highlighting progress on culture and health equity education. Our new team members were able to redesign the appearance and navigation, precluding the need to pay an outside vendor for development work, which had been anticipated previously. The intranet is set to launch Dec. 15.
- The VP of Communications is heading a new team called "Culture In Action," or the CIA, to make tangible culture-related improvements in our day-to-day work. CIA Applicants from the Health District's different teams will come together in January to begin the work of incorporating our cultural themes: accountable, inclusive, impactful and supportive.

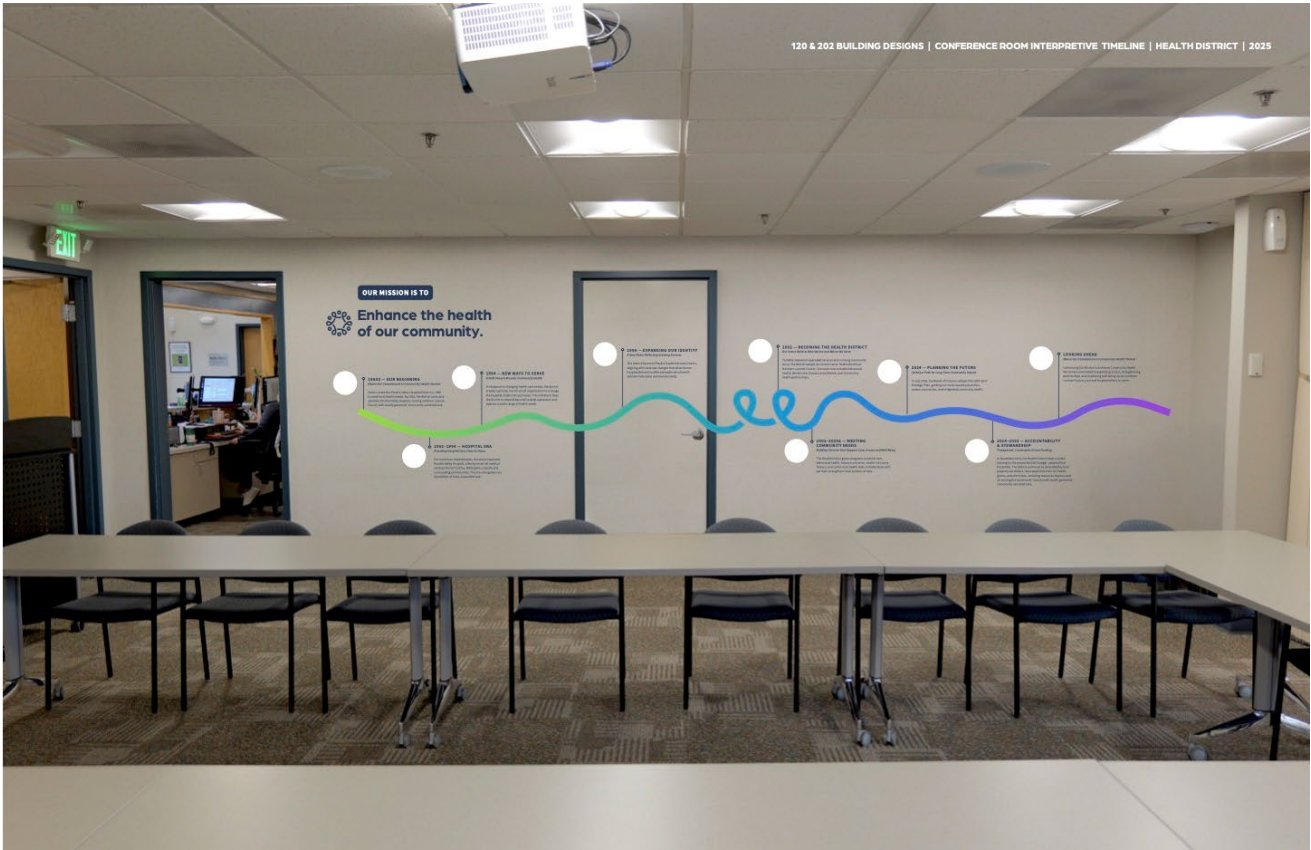
Strategic relevance

- Organizational excellence: Support transparent and engaging internal communications so that everyone in the organization feels seen, heard and respected.

Issues/risks/challenges

- No significant issues to report

Timeline mockup referenced above: next page



Leadership report summary

Reporting department: Dental
Reporting month: November 2025

What's new/key updates

- We implemented a new measurable caries risk assessment for every patient receiving an exam. This tool evaluates biological, behavioral, clinical, and environmental factors to determine each patient's likelihood of developing tooth decay. It will strengthen our ability to provide targeted education and help patients make behavior changes that reduce caries risk. *First update to the Board.
- The Family Dental Clinic received an in-kind donation of 500 electric toothbrushes from Waterpik, which will be distributed to our patients to further support good oral hygiene practices.

Strategic relevance

- These efforts – expanding early prevention in Head Start, implementing a measurable caries risk assessment, and distributing donated electric toothbrushes directly advance our goals in the following priority areas:
- Organizational Excellence: using improved data collection, analysis, and dissemination for decision-making,
- Health Equity: improving the health of our community by promoting equitable access to oral health prevention services
- Partnerships: expanding community engagement and strengthening partnerships to maximize impact on community health.

Issues/risks/challenges

- The growing national shortage of dental hygienists remains a challenge for the Family Dental Clinic. This shortage could limit access to preventative care and is straining our ability to meet community needs on a timelier basis. The Lead Dentist is implementing a variety of immediate solutions, including the use of temporary hygienists and utilizing open dentist time to help with some hygiene work. Longer-term solutions including expanding agreements with dental hygiene schools have been prioritized throughout next year.

Key metrics/trends

This month, we are providing a more detailed view of Dental metrics by distinguishing clinic-based appointments from screenings conducted in the community.

- Clinic-based Appointments: The Family Dental Clinic team completed 492 service appointments in November 2025.
- Community Screenings: Fall community screening efforts wrapped up in late October, and complete data are now available following final documentation. We are pleased to report that in September and October the Dental Team screened 519 PSD Head Start students and provided 440 fluoride applications, supporting early prevention and oral health education. *First update to the board.

Leadership report summary

Reporting department: Health Services – Larimer Health Connect
Reporting month: November 2025

What's new/key updates

- Connect for Health Colorado conducted the lottery for OmniSalud customers, and 39 individuals associated with LHC were selected. We have contacted the selected individuals to confirm they've enrolled or to assist them in completing their enrollment.
- Evening and Saturday events at the Harmony Library have been successful and the staff there have been very accommodating. We expect increased attendance on the Saturday before the critical Dec. 15th deadline – the last day for individuals to enroll in coverage that begins Jan. 1st.
- All enrollment events at partner sites have been scheduled to ensure we meet people where they are and support them in enrolling in health insurance.

Strategic relevance

- Health Equity: Center community voices and remove barriers to meet individual needs, helping all community members achieve their best health.
- Partnerships: Build and strengthen partnerships to maximize impact on community health.

Issues/risks/challenges

- Potentially needing to contact individuals who have already enrolled to have them return and complete a new enrollment if the Enhanced Premium Tax Credits (ePTC's) are renewed in December.
- Notice of Medicaid information sharing between the Centers for Medicare and Medicaid Services (CMS) to the Department of Homeland Security.

Key metrics/trends

- The Larimer Health Connect team completed 328 appointments in November 2025.

Leadership report summary

Reporting department: Mental Health Connections
Reporting month: November 2025

What's new/key updates

- The MHC team is in process of hiring a Care Coordinator. Applications closed Nov 25th with 15+ qualified applicants. This position will be cross-trained to support both adult and youth services, adding value and support to the entire team and the span of those we serve.
- The manager and team drafted initial inclusion/exclusion criteria for appropriate brief therapy clients. This is a first step in a process of further standardizing and operationalizing equitable access to the services Connections provides.
- Health District and Larimer County Behavioral Health Services (BHS) leadership are engaging in early discussions about the potential to leverage Healthinfosource (HIS) in BHS's work to prioritize a comprehensive care coordination portal which will be mentioned at the December 17th County Commissioners' meeting. *First update to the Board.

Strategic relevance

- Organizational Excellence: Strengthen human resource infrastructure.
- Great Governance: Shape Health District policy to promote positive health outcomes and operational excellence.

Issues/risks/challenges

- No significant issues to report

Key metrics/trends

- The Mental Health Connections team completed 88 appointments in November 2025 (32 adult and 56 child appointments).

Leadership report summary

Reporting department: Human Resources

Reporting month: November 2025

What's new/key updates

- HR onboarded the Controller/Finance Officer.
- An offer was made to a candidate for the position of Dental Assistant start date is yet to be determined.
- As of December 1, five positions are posted, and one position is in the interview phase.
- Stay Interviews will be conducted January 12-23. HR sent communication to employees regarding Stay Interviews and provided a presentation to managers/supervisors.
- The annual Turkey 2025 Drive supporting the Food Bank of Larimer County was successful; 277 pounds of food and a 15-pound ham were donated.
- 30-90 performance reviews were completed for new employees.
- December 2 is the annual employee recognition luncheon, and five employees will be recognized for their years with the Health District.

Strategic relevance

- We continue to work on building organizational excellence and Stay Interviews will provide an additional level to improve engagement.

Issues/risks/challenges

- No significant issues to report

Key metrics/trends

- Three (3) new hires in November
- Five (5) open positions

Leadership report summary

Reporting department: Finance Department
Date: November 2025

What's new/key updates

- Twice per week "Finance Office Hour" meetings are going well. (As a reminder, these serve as an open forum for employees across all departments and programs to meet and discuss finance-related topics and questions.)
- The implementation of NetSuite Planning & Budgeting software is currently in the testing phase. This phase will be completed by Friday, December 12th and will be followed by "go live." While we have already completed our 2026 budget, this software will still be utilized throughout the year for budget to actual comparison and forecasting.

Strategic relevance

- Aligns with the strategic priority of Organizational Excellence.
 - Finance Office Hour meetings provide a vital medium for internal communication around all financial components of our operations.
-

Issues/risks/challenges

- No significant issues to report.
-

Key metrics/trends

- None for this update.

Leadership report summary

Reporting department: Infrastructure Operations
Date: November 2025

What's new/key updates

- Completed 70% of new dental operator's A, B & C.
 - Schedule is 11/21 – 12/9.
 - Met with Poudre Fire to establish quarterly fire drills.
 - Hosted a roundtable discussion with Management Team and ICC to discuss 2026 Information Technology goals.
 - Responded to multiple 3rd parties: tenant requests at 425 w. Mulberry.
-

Strategic relevance

- Organizational Excellence.
-

Issues/risks/challenges

- No significant issues to report.
-

Key metrics/trends

- Completed 34/36 Facility Workorders in past 30 days. 94% completion rate.
- 165 new Information Technology Workorder Tickets were created in past 30 days.