

MARIN HEALTHCARE DISTRICT

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TUESDAY, MAY 12, 2026
BOARD OF DIRECTORS
5:30 PM: REGULAR OPEN MEETING

Board of Directors:

Chair: Jennifer Rienks, PhD (Div. 4)
Vice Chair: Brian Su, MD (Div. 3)
Secretary: Samantha Ramirez, BSW (Div. 1)
Directors: Edward Alfrey, MD (Div. 5)
Ann Sparkman, RN/BSN, JD (Div. 2)

Staff:

David Klein, MD, MBA, CEO
Eric Brettner, CFO
Colin Leary, General Counsel
Tricia Lee, Executive Assistant

Location:

MarinHealth Medical Center
Conference Center
250 Bon Air Road, Greenbrae CA

Public option: Zoom video:

<https://mymarinhealth.zoom.us/join>
Meeting ID: 916 7438 2943
Passcode: 061704
Or via Zoom telephone: 1-669-900-9128

AGENDA

5:30 PM: REGULAR OPEN MEETING

	<u>Presenter</u>	<u>Tab #</u>
1. Call to Order and Roll Call	Rienks	
2. General Public Comment <i>Any member of the audience may make statements regarding any items NOT on the agenda. Statements are limited to a maximum of three (3) minutes. Please state and spell your name if you wish it to be recorded in the minutes.</i>	Rienks	
3. Approve Agenda (action)	Rienks	
4. Approve Minutes of the Adjourned Regular Meeting of February 24, 2026 & the Regular Meeting of April 14, 2026 (action)	Rienks	#1 #2
5. Report of Board Special Closed Session, May 12, 2026	Rienks	
6. MarinHealth Behavioral Health Update	Maxwell	#3
7. Healthcare Advocacy and Emerging Challenges and Trends	Klein	
8. Committee Reports		
A. Finance & Audit Committee (met May 5, 2026)	Su	
B. Lease, Building, Education & Outreach Committee (did not meet)	Rienks	
C. Primary Care Task Force Report	Rienks/Sparkman	

The agenda for the meeting will be posted and distributed at least 72 hours prior to the meeting. In compliance with the Americans with Disabilities Act, if you require accommodations to participate in a District meeting please contact the District office at 415-464-2090 (voice) or 415-464-2094 (fax) at least 48 hours prior to the meeting. Meetings open to the public are recorded and the recordings are posted on the District web site.

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9. Reports

A. District CEO's Report

Klein

B. Hospital CEO's Report

Klein

C. Chair's and Board Members' Reports

All

10. Agenda Suggestions for Future Meetings

All

11. Adjournment of Regular Meeting

Rienks

Next Regular Meeting: Tuesday, June 9, 2026 @ 5:30 p.m.

Tab 1



**MARIN HEALTHCARE DISTRICT BOARD
OF DIRECTORS**

ADJOURNED REGULAR OPEN MEETING

**February 24, 2026
MarinHealth Medical Center
Conference Center**

MINUTES

1. Call to Order and Roll Call

Vice Chair Rienks called the Adjourned Regular Meeting to order at 6:29 pm.

Board members present: Chair Ann Sparkman, RN/BSN, JD; Vice Chair Jennifer Rienks, PhD; Secretary Samantha Ramirez, BSW; Brian Su, MD; Edward Alfrey, MD

Staff present: David Klein, MD, CEO; Colin Leary, General Counsel; Eric Brettner, CFO; Tricia Lee, EA

Chair Sparkman offered a public statement regarding comments made at the prior Board meeting.

2. General Public Comment

Several members of the public offered comment.

Speakers commented on Board governance and leadership accountability, referencing remarks made at the prior meeting. Speakers also discussed ongoing labor negotiations, staffing levels, strike impacts on hospital operations, patient safety concerns, employee compensation and benefits, meal and rest period compliance.

3. Approve Agenda

Dr. Klein noted that each Board member was presented at the meeting with a supplemental set of Resolutions 2026-01, 2026-02, 2026-03, and 2026-04 that are identical to the drafts circulated on February 20 except for a revised ballot question, and that hardcopies have been made available to the public concurrently. He noted that the Board will be voting on these updated resolutions when the time comes.

Director Alfrey moved to approve the agenda. Director Su seconded.

Vote: all ayes.

4. Receive Results of Petition Review from Marin County Registrar of Voters Regarding Citizens Parcel Tax Initiative Measure; Ballot Placement

a) Staff Report: Receipt of Certificate of Sufficiency and Options – Initiative Measure Enacting Special Parcel Tax

Vice Chair Rienks explained that the Board was being asked to receive the results of the Marin County Registrar of Voters' review of petition signatures submitted for a citizens' parcel tax initiative measure. She clarified that because the measure qualified through the citizens' initiative process, the Board's role was not to decide whether the measure would appear on the ballot, but rather to determine on which election to place it.

Dr. Klein summarized the Staff Report and explained that the Board's practical options are to consolidate the measure with the June 2, 2026 statewide primary election or the November 3, 2026 general election, with staff recommending placement on the November election ballot in order to benefit from shared election costs and to maximize voter turnout. He noted that the Board packet included draft resolutions corresponding to each option: two resolutions related to the June 2, 2026 election and two resolutions related to the November 3, 2026 election. The Board could consider motions to approve one set of resolutions or the other.

b) Marin County Registrar of Voters Certificate of Signature Verification

Vice Chair Rienks reported that the County Registrar of Voters issued a Certificate of Signature Verification confirming that the required signatures had been verified. She stated that the signatures were confirmed as valid.

c) Board Discussion

Director Alfrey stated that he supports the need for an additional hospital facility and clarified that his comments are not intended to debate the merits of the initiative measure itself. However, he expressed concern regarding the signature gathering process. Based on his personal experience, he stated that some signature gatherers provided false and misleading information to members of the public, including statements that individuals needed to sign the petition in order to prevent the hospital from going under. He noted that he was approached on multiple occasions and found some of these interactions to be offensive and disappointing.

Board members discussed considerations related to election cost and voter turnout. Several members noted that a November election could result in higher voter participation and lower overall election costs due to the shared ballot.

d) Resolution 2026-01 Calling Special District Election on Measure and Resolution 2026-02 Requesting Consolidation of Special District Election – June 2, 2026

Director Su motioned to approve. Chair Sparkman seconded.

Vote:

Director Su – No
Vice Chair Rienks – No
Chair Sparkman – No
Director Alfrey – Abstain
Director Ramirez – Abstain

Result: The motion failed to pass.

e) Resolution 2026-03 Calling General District Election on Measure and Resolution 2026-04 Requesting Consolidation of General District Election – November 3, 2026

Vice Chair Rienks introduced Resolution 2026-03 calling for a general district election on the measure to be held on November 3, 2026 and Resolution 2026-04 requesting consolidation of the general district election with the November 3, 2026 election.

Director Su motioned to approve. Chair Sparkman.

Ms. Mimi Willard provided public comment, expressing support for funding the District's facility needs and concerns regarding the initiative process. She stated that she experienced misleading



statements from signature gatherers and that the petition does not clearly disclose lowering the approval threshold from two-thirds to a simple majority.

Vice Chair Rienks clarified that the District did not enact the law enabling the initiative process or participate in gathering signatures, and that the Board's role is limited to determining the election on which the measure would be placed.

Vice Chair Rienks asked for a roll call vote.

Roll Call Vote:

Director Su – Yes

Vice Chair Rienks – Yes

Chair Sparkman – Yes

Director Alfrey – Abstain

Director Ramirez – Abstain

Result: The motion carried.

5. Adjournment of Adjourned Regular Meeting

Vice Chair Rienks adjourned the meeting at 6:57 pm

DRAFT

Tab 2



**MARIN HEALTHCARE DISTRICT
BOARD OF DIRECTORS**

REGULAR MEETING

**April 14, 2026 MarinHealth
Medical Center Conference
Center**

MINUTES

1. Call to Order and Roll Call

Chair Rienks called the Regular Meeting to order at 5:31 pm.

Board members present: Chair Jennifer Rienks, PhD; Vice Chair, Brian Su, MD; Secretary, Samantha Ramirez, BSW via Zoom; Edward Alfrey, MD

Staff present: David Klein, MD, CEO; Colin Leary, General Counsel; Tricia Lee, EA

Board members absent: Ann Sparkman, RN/BSN, JD

2. General Public Comment

Ms. Mimi Willard provided public comment and reiterated concerns previously expressed regarding the citizen initiative process. She stated that her comments from the February 24, 2026 meeting were not reflected in the minutes and expressed concern regarding transparency. Ms. Willard stated that while she supports the District's need for funding for facilities and maintenance, she remains concerned about the initiative process, including statements made by signature gatherers and the lack of clear disclosure in the petition regarding lowering the approval threshold from two-thirds to a simple majority.

Mr. Steven Batson provided public comment regarding nonfunctioning electric vehicle chargers in the employee parking garage and requested that they be repaired or replaced. He also encouraged the hospital to consider reinstating shuttle service from the SMART train and exploring additional transportation options to support sustainability and alleviate parking constraints.

Dr. Klein responded that the hospital is replacing all EV chargers, increasing capacity from 14 to 20 with a new vendor, with completion expected within the next two months. He noted that transportation and parking strategies would be addressed further in his report.

Chair Rienks clarified that the Board does not create or participate in the citizen initiative process and is limited to determining ballot timing in accordance with legal requirements.

3. Approve Agenda

Director Alfrey moved to approve. Director Ramirez seconded.

Vote: all ayes.

4. Approve Minutes of the Regular Meeting of February 24, 2026 & March 10, 2026

A. Approval of the Adjourned Regular Meeting of February 24, 2026 Minutes.

Chair Rienks requested an additional amendment to the minutes of February 24, 2026. Approval of minutes were tabled until May 12, 2026.

- B. Approval of the Regular Meeting of March 10, 2026 Minutes.
Director Alfrey moved to approve. Director Su seconded. **Vote: all ayes.**

5. Healthcare Advocacy and Emerging Challenges and Trends

Dr. Klein reported on recent developments in the California gubernatorial race following the withdrawal of a leading candidate Congressman Swalwell, noting that remaining candidates are actively engaging healthcare stakeholders. He stated that MarinHealth continues to monitor the race due to potential impacts on healthcare policy.

He reported that the California Department of Health Care Services submitted a revised application for the hospital fee program, expected to provide supplemental funding, and noted that timely federal approval is important to avoid disruption in Medi-Cal funding.

Dr. Klein reported on overall legislative activity for the 2026 session, noting that approximately 1,800 bills have been introduced at the state level, many of which may have implications for hospitals and healthcare delivery.

He highlighted Assembly Bill 1923, which would expedite loan forgiveness for hospitals that previously received funding through the California Distressed Hospital Loan Program and strengthen financial support for struggling rural hospitals.

Dr. Klein also discussed Assembly Bill 2353, which would require more comprehensive and timely analysis of the financial impact of legislative mandates on hospitals prior to legislative approval, enabling policymakers to better understand the fiscal implications of proposed legislation.

He noted the reintroduction of single-payer healthcare legislation (AB 1900, CalCare), which would transition the state to a unified healthcare financing system, and stated that the California Hospital Association is closely reviewing the proposal.

Dr. Klein also reported on a growing number of bills focused on the regulation of artificial intelligence in healthcare, including its use in patient interactions, clinical decision-making, and billing practices.

6. Committee Reports

- A. *Finance & Audit Committee*
Finance & Audit did not meet. No report given.
- B. *Lease, Building, Education and Outreach Committee*
The Committee did not meet. Chair Rienks requested assistance in scheduling a meeting.
- C. *Primary Care Task Force*
The Task Force did not meet. Follow-up scheduling for interviews is pending.

7. Reports

- A. *Hospital CEO's Report:*
Dr. Klein reported that the hospital continues to closely monitor potential federal sequestration and broader funding uncertainties, noting that any renewal of sequestration could have a significant financial impact on hospitals statewide. He also referenced ongoing international conflicts and stated that there is concern that federal resources could be redirected away from healthcare, though the extent of any impact remains uncertain.

Dr. Klein provided an update on physician recruitment and workforce development. He reported that, in addition to the 11 primary care providers recruited in the prior year, two additional providers have accepted positions and eight more candidates are currently in the recruitment pipeline. He noted that Dr. Licht, Primary Care Medical Director is evaluating recruitment strategies to improve competitiveness and ensure providers are able to practice the full scope of primary care. He also reported continued progress in specialty recruitment, including new hires in surgical podiatry, orthopedic foot and ankle, and orthopedic trauma.

Dr. Klein reported that surgical services continue to experience high demand, particularly in robotic-assisted procedures. He stated that the hospital's existing Da Vinci robot is operating at full capacity and that the hospital will proceed with acquiring a second Da Vinci robotic system to meet growing demand. He also noted plans to introduce a CORI robotic system to support advanced knee replacement procedures.

Dr. Klein discussed imaging and diagnostic services, noting that the hospital is evaluating opportunities to expand imaging capacity, including the potential addition of a CT scanner in the northern service area with advanced cardiac imaging capabilities. He emphasized that improving access to imaging services remains a key priority.

Dr. Klein provided an update on patient access and care delivery. He reported that 14 physicians and advanced practice providers across five locations are currently accepting new patients. He also stated that the organization is expanding the use of EPIC-based virtual visits and working toward full online scheduling for primary care.

Dr. Klein reported on "Project Compass," an initiative focused on improving patient access and overall patient experience. He noted that Dr. Chandrasena (CMO) and Mr. Apolinarski (CNO) have developed a comprehensive plan and assembled a team to address service gaps and enhance the patient experience across the system.

Dr. Klein provided an update on labor relations, stating that the hospital has reached a tentative agreement with the California Nurses Association (CNA), with a ratification vote scheduled later in the week. He noted that negotiations with Teamsters Local 856 are ongoing and that the organization remains committed to reaching agreement in good faith.

Dr. Klein announced that MarinHealth Medical Center has achieved a CMS 5-star rating, the highest designation available. He noted that this rating reflects strong performance on objective quality measures and commended staff and leadership for this achievement.

Dr. Klein also reported on campus planning efforts, noting that the hospital is engaging planning consultants to evaluate long-term campus development and infrastructure needs. He stated that this work is intended to guide strategic decision-making over the next several years, including potential expansion projects, optimization of existing facilities, and alignment of clinical services with projected community demand. He noted that planning efforts will consider patient access, operational efficiency, and future growth to ensure the campus is positioned to meet evolving healthcare needs.

Dr. Klein reported on seismic compliance and facility planning, noting that the hospital has submitted a request to the Department of Health Care Access and Information (HCAI) for an extension under Assembly Bill 869. He stated that, as a district hospital, MarinHealth is eligible for at least a three-year extension provided that plans are in place to address non-compliant structures.

He explained that the Redwood Pavilion is not feasible to retrofit to meet seismic standards and that plans have been developed to transition critical services to the Cedar Pavilion. He noted that these plans have been submitted to HCAI for review and, if approved, will allow the hospital to remain on track to meet seismic compliance requirements through 2032.

Dr. Klein addressed parking and transportation challenges, noting that parking remains a significant issue for staff and visitors. He reported that the hospital is pursuing expansion of a new parking structure, including a potential additional level that would increase capacity, with construction anticipated to begin in early 2027. He also noted that the hospital is exploring off-site parking options and shuttle services, including potential SMART train connections.

Dr. Klein reported that the hospital is replacing all electric vehicle charging stations with a new vendor and expanding capacity.

Dr. Klein reported that the pharmacy compounding project, required by the State Board of Pharmacy, remains on track for completion in November and will result in a state-of-the-art compounding facility.

He provided an update on the Bloom Energy project, stating that it is progressing with minimal delays and remains on track for implementation in the fall. He noted that the system will initially use natural gas to generate on-site electricity, with plans to transition to hydrogen over time, supporting energy reliability and long-term sustainability goals.

Dr. Klein also reported that a new visitor management system has been implemented and is functioning well, with minor workflow adjustments underway.

He further noted that installation of healthy vending machines throughout the hospital is nearing completion.

Dr. Klein reported that the Petaluma urgent care location will expand to seven-day service in May and that the hospital is finalizing plans for an additional site in the Larkspur area to support urgent care and primary care services.

Public comment was provided regarding the Bloom Energy Project.

B. Chair's and Board Members' Reports:

Director Ramirez announced she will be participating in an upcoming Equity and Mental Health Summit, to be held April 29–30, and noted that the event is free and open to the public.

Chair Rienks highlighted the upcoming American Hospital Association Leadership Summit in July and encouraged Board participation.

8. Agenda Suggestions for Future Meetings

Dr. Klein shared that Rebecca Maxwell will present at the May 12, 2026 MHD Board Meeting.

Chair Rienks requested an update on the Age Friendly Designation process.

Chair Rienks also requested the Commission on aging to attend a future board meeting to present the Aging Strategic Plan.

9. Adjournment of Regular Meeting

Chair Rienks adjourned the Regular Meeting at 6:00 p.m.

Tab 3

MarinHealth Behavioral Health

Update for Marin Healthcare District Board

5/7/2026



MarinHealth Behavioral Health Service Line



Hospital Based Programs

- **Acute Adult Inpatient Unit**
 - Only inpatient unit in Marin County
 - Serves **500+** patients annually
- ***Partial Hospitalization and Intensive Outpatient Program (PHP & IOP)***
 - Step-down and stabilization program offering structured daily/half-day treatment for age-specific treatment
 - **172 unique patients**
 - **4700 visits**
 - Adolescent IOP added in July 2025
- **Psychiatric Emergency Services & Psychiatric Consultation-Liaison Service**
 - Marin County's designated **5150** facility
 - **3,000+** patients/families in crisis evaluated each year
 - **300+** psychiatric consults delivered on inpatient medical units annually
- **Electroconvulsive Treatment (ECT) - Inpatient / Outpatient**
 - Only ECT provider in the North Bay
 - Strong referral partnerships with **Marin & Sonoma Counties and Kaiser**
 - Treatment available **5 days per week**
 - **>1700 treatments** performed in 2025
- **Substance Use Navigator**
 - Care navigation and access to Medication Assisted Treatment (MAT) for patients experiencing SUD
 - Over **300 patients** assisted

Ambulatory Programs

- **MarinHealth Psychiatry Clinic**
 - Full scope psychiatry clinic offering medication management, individual, family, and group therapy
 - **7 providers; 5 support staff**
 - Interventional services starting in Q2 2026

MHMN Psychiatry Clinic Overview - 2025

Visits:

- Over 1500 unique patients
- 8900 patient visits
- Types of encounters
 - Diagnostic assessments
 - New and follow-up patient visits
 - Psychotherapy
 - Group therapy
- Referral sources include:
 - MHMC Behavioral Health Services
 - MHMN Primary and Specialty Care
 - Private and community referrals
- 250 patient waitlist for medication management and therapy

Demographics:

- 66% of patients are female
- 78% of patients self-identified as white
 - 8% of patients self-identified as Hispanic or Latino
- 84% of patients live in Marin
 - Of those, 48% live in Novato or San Rafael
- Children, adolescents, and adults are seen in the clinic, ranging in age from 6 - 95
- Primary diagnoses:
 - Major Depression or Depression
 - Anxiety Disorder
 - PTSD
 - ADHD
 - Adjustment Disorder
 - Bipolar Disorder

MHMN Psychiatry Clinic Overview - 2025



Staffing:

- 4 psychiatrists
- 3 LCSWs
- Practice Leader, RN, MA, Ref/Auth Coordinator, Front Office Coordinator
- **NEW!!**
 - Neuropsychologist (starting 11/2026)
 - Child/Adolescent LCSW (starting 09/2026)
 - Recruiting for Child/Adolescent Psychiatrist



(Our ASPIRE Clinical Team includes, from left: [**Veronica Searles Quick, MD, PHD**](#); Liz Fischel, LCSW; Amanda Williamson, LCSW; and Vincent Paule, LCSW)

Partial Hospitalization and Intensive Outpatient (PHP/IOP)



- What is PHP/IOP?
 - Hospital-based outpatient treatment for patients stepping down from inpatient hospitalization or as a mitigation to prevent hospitalization from a lower level of psychiatric care
 - CBT and DBT skill teaching
 - Individual and group therapy
 - Medication management
 - **Partial Hospitalization (PHP)** = 5 hours/day of group therapy; 5 days/week
 - **Intensive Outpatient Treatment** = 3 hours/day of group therapy; 3 days/week
- Four distinct program tracks for ages 12+
 - *Adolescent IOP ASPIRE® (age 12 - 17)*
 - Transitional Age Youth (TAY) / Young Adult PHP & IOP (age 18 - 25)
 - Adult PHP & IOP (age 25 - 55)
 - Older Adult PHP & IOP (age 55+)

What is ASPIRE?

After-School Program Interventions and Resiliency Education

- Intensive outpatient behavioral health care for ages 12 - 17
- Supports youth experiencing depression, anxiety, PTSD, and emotional challenges
- Program goals include:
 - Building emotional resilience and coping skills
 - Improve problem-solving and communication
 - Strengthen health peer and family relationships
 - Provide a safe, structured environment after school
- Program Structure
 - 8 week program with curated curriculum and DBT skill building content
 - Monday - Thursday from 3 - 6pm
 - Families must participate in weekly multi-family group
 - Small groups - maximum of 10 enrolled patients per cohort

Adolescent IOP - Key Accomplishments

- Recruited and hired Dr. Searles - Quick as Medical Director of Child and Adolescent Psychiatric Services
- Finished remodel of interim ASPIRE site
- Launched in July 2025
 - 5 rolling cohorts (30 patients) since opening
 - Successful partnership with Marin County to cover ASPIRE for adolescent Medi-Cal beneficiaries
 - Developed pathway and continuity of service between ASPIRE and TAY programs
 - **Hired neuropsychologist and recruiting additional child/adolescent psychiatrist and hired LCSW to expand access to step-down care in the psychiatry clinic**
- Future State
 - Increase number of cohort participants
 - Obtain WASC accreditation
 - Enhance program space to include a library and "chill zone"
 - Develop rewards and incentives to celebrate success
 - Begin building for PHP level of care

Interior Hall



Activities Lounge



Consultation Room



Therapy Room





5/7/2026



Thank you!
