



Optional Pre-Proposal Meeting Summary

March 23, 2026

10:30 AM – 11:30 AM (Virtual)

North Country Healthcare hosted an optional pre-proposal meeting to provide firms with an opportunity to ask additional questions and seek clarification following the release of the RFP and formal Q&A. The intent was to create a shared forum where questions could be addressed in real time by the NCH team, ensuring that all interested parties have access to consistent information as they prepare their proposals. We intentionally created this space so questions could be heard and answered together, rather than through separate conversations, supporting, clarity, transparency, and alignment across respondents.

Participating Firms

We were joined by a strong and diverse group of firms representing design, engineering, financial advisory, and healthcare strategy:

Colliers Engineering & Design / Colliers

Teresa Wilson, Joe Reilly, Stephen Woelfel

Ovation Healthcare

Ryan Nestrick

JLL, Inc.

Brian Corcoran

Stroudwater

John Downes

Wipfli, LLP

Nicholas Smith

CliftonLarsonAllen (CLA)

Darryn McGarvey, Ryan Bjerke, Joshua Wilks, Dan Larsen, Tom Hammond

Lavallee | Bresinger Architects (LBPA)

Richard Pizzi, Kathleen Porter

HGA (Hammel, Green and Abrahamson)

Hal Henderson, Ray Boudreau, Brent Peterson

HED (Harley Ellis Devereaux)

Ronda Paradis, David Jaeger

CREF

Patrick Murphy, Steve Van Ness

SJ Group

Tim Patmont

LMH Architecture

Thomas Millea Jr., John Ketenbrink

Blue & Co.

Chris Werner, Tony Javorka, John Wortley

Leaders Healthcare Strategy

Claudio Capon

NCH MFFP Committee Attendees

Michael Peterson
CEO, Androscoggin Valley Hospital

Gregory Cook
CEO & President, Upper Connecticut Valley Hospital

Ren Anderson
Director of Philanthropy & Community Relations, NCH

William Everleth
Facilities Director, UCVH

William Chabot
Director of Facilities, AVH

Nicholas Marois
Facilities Director, Weeks Medical Center

Jesse Raimer
Director of Supply Chain, NCH

Questions & Responses (Summary of Discussion)

The session focused on clarifying key elements of scope, expectations, and context. Questions are summarized below by theme, along with responses shared during the meeting.

Scope and Prioritization of Facilities

Firms asked how broadly the facility assessment should extend beyond the three hospital campuses.

NCH clarified that while the hospitals are the primary focus, outpatient and practice sites are also in scope. The level of detail may vary, but the expectation is that the plan reflects the full system footprint. Importantly, the work should begin with determining future needs before recommending investment in existing structures.

Commitment to Hospital Locations

Firms asked whether all three hospitals are expected to remain in operation.

NCH confirmed a clear commitment to maintaining all three hospital locations. While services may evolve over time, access to care in each community remains essential, including emergency and urgent care capabilities.

Financial Feasibility and Scenario Planning

Questions focused on the level of financial analysis expected and whether capital constraints should shape scenarios upfront.

NCH shared that this phase should include financial context, particularly around reimbursement and market dynamics, but does not require detailed debt capacity modeling. The intent is to inform decision-making, not to fully structure financing. Implementation and funding strategy would be addressed in a subsequent phase.

Data Availability and Existing Information

Firms asked what information would be made available to support the work.

NCH confirmed that existing capital plans, facility condition information, and prior planning

documents will be shared. Additional materials, including service area data, will be posted to the RFP webpage to ensure access for all respondents.

Service Area and Market Context

Firms requested clarification on the service area and population.

NCH confirmed a primary service area of Coös County, northern Grafton County, northern Carroll County, and portions of Vermont and Maine, with an estimated population of 30,000 to 31,000 residents. A heat map will be uploaded to the RFP Webpage.

Governance and Decision-Making Structure

Questions were raised about how decisions will be made across a multi-affiliate system.

NCH clarified that while affiliate boards remain in place, final decisions for this work will be made at the system level, with the NCH System Board holding ultimate authority.

Operational Alignment and Standardization

Firms asked how operational strategy should be integrated into the facility plan.

NCH emphasized that operations and facilities are closely linked. The selected partner is expected to identify opportunities for operational efficiency and alignment, including opportunities for standardization across sites over time.

Capital Planning and Leased Assets

Questions focused on how capital needs and leased properties should be incorporated.

NCH confirmed that capital planning information and lease details will be shared to support a comprehensive evaluation of owned and leased assets.

Timeline and Next Steps

- Proposals Due: April 10, 2026
- Interviews (anticipated virtual): May 4 – May 22, 2026
- Final Selection: Week of June 1, 2026

The timeline is aligned with NCH's fiscal year planning cycle, with the goal of informing budgeting and potential phased implementation beginning in the next fiscal year.

Closing Notes

We appreciate the thoughtful questions raised during this session and the continued engagement from firms considering submission. As with prior communications, any new information or clarifications will be shared broadly via the RFP webpage to ensure all parties have access to the same information.

All follow-up questions should continue to be directed to Ren Anderson.

Attendance at this meeting was optional and not required for proposal submission.