

Falls Community Health Governing Board Minutes
Thursday, June 18, 2015, at 12:00 pm

Present: Kari Benz, John Peterson, Linda Karnof, Gwendolyn Martin-Fletcher, Jim Kellar, John Peterson, Ryon Reckling, Bruce Vogt

Absent: Susy Blake, Steve Miller, Arlene Olson, Tracy Johnson

Guest: Dr. Mark Huntington

Staff Present: Jill Franken, Alicia Collura, Amy Richardson, Dr. Jen Tinguely, Erin Hartig, Lonna Jones, Lisa Stensland

Call to Order: The meeting was called to order by Kari Benz at 12:03 pm.

Minutes: Motion made to approve the minutes for May 21, 2015, by Jim, Gwen seconded, motion carried.

NEW BUSINESS:

Financial Report:

The Falls Community Health reports attached are through the month ending May 31, 2015. We are 42% through our fiscal year. The last financials presented were through the month of April 2015.

Operating Revenues: Net patient revenue consists of all patient charges/fees. Total net patient revenue for May came in at \$310,990, which is 39% of the YTD May actuals to budget. Total grant revenue of \$239,696 includes grant drawdowns from the Community Health Center, Ryan White Part C, HIV Prevention and Refugee grants. Total Other Revenue is \$32,363; this is the first quarter Medicaid Health Home payment. Total Operating Revenues YTD May budget is \$3.2M, which is close to budget at 40%.

Operating Expenses: Operating expenses are classified within 7 categories.

Personnel expenses are at 35% of the budget, expenses are less than budget due to vacancies in positions this year.

Professional Services are at 37% of the YTD budget. This category includes payments to Center for Family Medicine, interpreter services and laboratory expenses.

Rentals will stay low in actuals until a one-time payment of \$107K is processed for annual computer and software expense.

Repair and Maintenance is at 49% of the YTD budget. Dental repair and maintenance and installation of security equipment at the school based sites account for the majority of the increase.

Supplies and Materials are at 28% of YTD budget. This category includes general medical and dental supplies, immunization and pharmaceuticals as well as the monthly maintenance of the electronic medical and dental software systems.

Training is at 34% of the YTD budget. The majority of YTD actuals are from Continuing Education expenses for the medical and dental providers and out of state travel expense.

Utilities are at 32% YTD budget. The majority of this expense occurs quarterly.

Non-operating Revenue (Expense):

Other Revenue is at 56% of the budget and includes USD dental lease payments and recovery of prior year revenue.

Estimated Uncollectible Revenue is at 96% to YTD budget. This line will continue to exceed the YTD throughout the year due to a change in expense allocation. For May, estimates are \$103K of the Net Patient Revenue.

Net Income (Loss): May actuals are (\$53,071) and YTD (\$174,251), 19% of YTD budget.

Motion made to approve the financial report made by Ryon, Bruce seconded, motion carried.

ACCESS:

Motion made to accept the re-credentialing and re- grant privileging for Dr. Robin Hattervig as presented made by Linda and seconded by Ryon. Motion carries.

Motion made to accept the re-credentialing and re- grant privileging for Dr. Andrew Hille as presented made by Bruce and seconded by Jim. Motion carries.

Motion made to accept the re-credentialing and re- grant privileging for Dr. Holly Van Hoffwegen as presented made by Ryon and seconded by Bruce. Motion carries.

Motion made to accept the re-credentialing and re- grant privileging for Dr. Suzanna Spencer as presented made by Gwen and seconded by Linda. Motion carries.

Motion made to accept the re-credentialing and re- grant privileging for Dr. Michael Bloom as presented made by Bruce and seconded by Jim. Motion carries.

Motion made to accept the credentialing and grant privileging for PAC, Julie Rassmussen as presented made by Jim and seconded by John. Motion carries.

Leah Mergen may be able to start in August but is scheduled to begin in September.

The medical clinic is getting ready to start automated reminder phone calls by the end of June.

QUALITY:

QA/QI Quarterly Report-

Colorectal screenings – The focus of the colorectal screenings has been on hold due to our funding source ending this month. We should hear in early July if funding will continue and another grant has been applied for. In April and May our goal of 31% was met and is the highest the clinic has been.

Pap smears- We will be mailing out education letters, focused on the patients meeting the UDS criteria of 24-64 with 1 visit in the reporting year. These will be mailed in the patient's birthday month. The American Cancer Society has provided the materials for the letters. The APP's and Dr. Tinguely will be given a list of the patients needing paps and meet the UDS criteria. As the data was analyzed we found that our providers were actually exceeding the goal so we will start looking at the faculty and Residents data. May reporting was 47% with a goal of 50%.

Hypertension- An ongoing plan due study act with Dr. Tinguely's patients that have uncontrolled hypertension, have had a medication change and then utilizing the pharmacy students to follow up with these patients.. We are contracting with SDSU to add 16 hours of clinical pharmacy time per week and working to get this operational. At the last care team meetings each provider was given the list of patients with out of control hypertension. These same patients have been sent an educational letter. May reporting was 62% with a goal of 65%.

Diabetes- Diabetic self-management education (DSME) has been part of our strategic plan for a while now. Instead of hiring additional resources we have chosen to better utilize our nurse case managers and have a formerly structured process and enhance their skills. We want to be recognized as a DSME program to allow for future reimbursement opportunities. We are working with the state program coordinator and have some partners to assist us in this process. We hope to have the fundamentals in place by the end of 2015 and the first half of 2016 will focus on staff training, with complete roll out the end of 2016. It is a long process similar to PCMH with 10 standards that need to be met. As the process moves further we will be asking for input from the board as this is also a requirement for recognition.

Ryan White Quality Committee- In May we had a site visit for this program and one recommendation was to have an integrated quality plan in place for monitoring the 7 quality measures from the 2015 work plan. The project officer called out 2 measures: HIV diagnosis with a viral load of less than 200 be seen with in the last year (68% currently) and HIV diagnosis documented to have pneumovax vaccine. We have around 200 patients total for east river on our Ryan White program but only a little over 100 of those patients are seen in our clinic, so we broke down the numbers based on the patients seen at FCH. After looking at these numbers we found that we were meeting goal for the viral load and will continue to monitor this measure. For the patients requiring a vaccine, the CLOUT group recommended placing an alert in the chart.

EXECUTIVE DIRECTOR'S REPORT:

Leah Mergen will be coming on staff in September at the latest. The locum tenens agency contract has been renewed and for a locum provider for a 6 month time period to cover through the vacancy time period as well as Leah's onboarding time period. The main site clinic remodel design is complete and bid specifications being finalized. We anticipate this project going out for bid before the end of June.

Service area competition grant is required every five years. FCH will again contract with Jane Bruggeman, a grant writer, to assist the administration team with the upcoming SAC application and is due mid-August.

FTCA Liability coverage for clinical providers (federal malpractice coverage) is in the final stages of the application process and Alicia expects to have it submitted by the end of June.

Grant funding opportunities- HRSA has indicated that we will be eligible for ES funding, and guidance for this application will be forthcoming. We anticipate the eligible services for expansion will include enabling, medical, oral health, behavioral health, pharmacy and/or vision services. Possible options for and FCH application include dental, physical therapy, psychiatry, and substance abuse services. Board approval is needed to move forward.

Motion made to move forward with the expanded grant for service expansion possible areas including enabling, medical, oral health, behavioral health, and pharmacy and/or vision services made by Bruce, seconded by Jim. Motion carries.

John Peterson has been reappointed to serve another term and was approved at the June 16th council meeting. Board approval is needed to accept John's appointment.

Motion made to accept John Peterson's reappointment to the Falls Community Governing Board made by Jim, seconded by Gwen. Motion carries.

In an effort to streamline the board meeting we would like to use a consent agenda when possible. Items on the consent agenda could include the board meeting minutes, QA/QI meeting minutes and other items that don't normally require discussion. If the consent agenda is used any board member can ask that an item be removed and will be moved to the normal area for discussion. The board does need to adopt the consent agenda before it can be used.

Motion made to adopt the consent agenda format made by Bruce, seconded by Gwen. Motion carries.

We will look at forming a nominating committee for Chair and Vice Chair in July.
A new group of residents will be starting in July.

There being no other business Motion to adjourn, supported by Jim, seconded by Ryon. Motion carries.
Adjourned at 1:15 pm



July 16, 2015

Kari Benz- Board Chair