

Tillamook County
Community Health Council
Meeting Minutes
October 16, 2019

Present: Harry Coffman, Sharon Kaszycki, Donna Parks, Clayton Rees, Carmen Rost, John Sandusky
Excused: Tim Borman, Carol Fitzgerald, Amy Griggs
Absent/Unexcused:
Staff: Marlene Putman, Donna Gigoux, Irene Fitzgerald, Bill Baertlein (BOCC Liaison)
Guests:

1. Call to Order: Chair Harry Coffman called the meeting to order at 12:35 pm.

2. Consumer/Community/Partner's Needs, Concerns, Issues (based on Health Council Strategic Plan Goal 2 & 3):

- A. Community/Patient Concerns – Donna P. shared a patient complaint with Marlene. It has been provided to our Medical Director, Dr. Steffey. It may go to the next QA meeting for discussion, and if warranted, to Risk Management committee. Members will be updated once resolved.
- B. Ambassador/Advocate encounters with Community Members – no report.
- C. Community Partners – partner dialogues, invitations to meetings, etc. – no report.

3. Consent Calendar:

- A. **Approval of September 18, 2019 Meeting minutes:**
 - 1. No changes.

Action: Donna P. moved to approve the minutes as written; Sharon seconded. Motion carried.

4. Board Development:

A. Health Council Member Contact & Areas of Expertise:

- 1. (See Attached List)
- 2. No report.

B. Common goals – shared resources between agencies:

- 1. State Board of Denture Technology:
 - a) Clayton Rees was appointed to the board. He stated it is a small board with the current issue being dentures for veterans, which must be done at a dentist office.
 - b) Recently denturists were licensed as professionals.
 - c) Clayton had undergone required training for new board members and wondered whether our board should do similar training and related tests.
 - d) The trainings included Preventing Harassment, Discrimination and Inappropriate Workplace Behavior; Preventing Discrimination, Harassment, and Sexual Harassment in the Workplace; Overview of Boards, Commissions, & Small Entities; and Information Security and Privacy Awareness.

- e) By consensus, the Health Council members would like to explore the resources mentioned above.
- f) Staff will look into what resources exist and bring back to the next meeting.
- g) John will talk with HR at TBCC and report at the next meeting.

C. Underrepresented & Youth potential members:

- 1. Harry has talked with the Health Occupations teacher but has received no response of a student who is interested. He will reach out to the Senior Project coordinator and will also try at TBCC Health Occupations class. Jordy Richards is the coordinator. He will also contact administration at TBCC for suggestions.

5. Administrator’s Report:

General Update and Report provided by Marlene Putman, Administrator –

A. Strategic Plan Action Plan Development:

- 1. Marlene announced that she will be meeting with Eric Brinkert to discuss the development of the Action Plan based on the recent Strategic Planning event last spring.

B. New Vaping Executive Order:

- 1. On October 4, 2019 Governor Brown issued Executive Order 19-09 to issue a temporary ban on flavored vaping products and to convene a public health vaping group.
- 2. The court of appeals halted the ban on October 17th.
- 3. Health Council members would like education on the order and on vaping issues in the county. They also would like to know what recommendations, if any, the BOCC members are considering.

C. Juvenile Department:

- 1. Tillamook County Juvenile Department has made a resource request for psychiatric services.
- 2. Discussion: A member had a concern regarding residential care and treatment and wondered how patients can get to services; it’s a major concern. Now the hospital will not take clients; the only option is to go to jail.

D. Psychiatric Services/TFCC Behavioral Health:

- 1. Marlene discussed an opportunity to have a psychiatrist new grad willing to come to Tillamook to provide services. Marlene is working with the CCO and will be talking with them about the concept. This will offer the new grad the opportunity to get loan repayment.
- 2. Health Council discussed that they are interested in pursuing these services and want to keep informed as the discussion progresses and the business model is developed.
- 3. Additionally, TFCC has hired a bilingual staff that is willing to come to our clinic 4 hours per week. He has a lot of experience in the Hispanic community and is excited to learn our model.

Action: Sharon moved to approve the Administrative Report. Carmen seconded. Motion carried.

6. Finance Report

- A. August’s month end cash balance was \$2,033,414.52 ending with \$170,718.98 more in revenue than expense. Irene explained that we received \$199K from the CCO for our mobile clinic; Medicaid Wrap of \$174K; and there still is a delay of payment for Family Planning/Workers Comp/Maternity Case Management as well as received .

1. **Revenue:** As mentioned above, there was \$199K received in August from CCO for the Mobile Clinic and \$174K for Medicaid Wrap. Medical Managed Care fees involves the reprocessing of SBIRT due to an operations change and the result of staff not coding correctly. This is affecting days in accounts receivable to over 120 days. All other revenue is within normal ranges. Interest line 4699 is calculated by percentage of departmental fund balance at month-end.
2. **Expense:** Leave buy out from 1 vacancy and 2 buyouts totaled \$3,201.99; overtime includes 3 payouts totaling \$2,409.91. Quarterly DHS vaccines totaled \$14,894.89 and \$2K was expended for Wellness filming. All other expenses are all within normal range.
3. **HRSA Budget Revenue and Expense:** Revenue and expenses within normal range. Budget includes multiple grants, one of which has been awarded but not received. It is for QA/QI funds for \$50,195, which will be used for training for staff with a focus on billing, audit and customer service, etc. Retirement is not included in the HRSA budget; Irene has added a monthly allotment of retirement, which will not match the GL.
4. **Encounters:** Total encounters went from 1,298 in July to 1,168 in August. Average Provider Encounters per FTE went from 11.90 in July to 9.70 in August. Provider FTE was 2.70 in July to 2.98 in August.
5. **Monthly Generated Revenue:**
Provider revenue in August was a total of \$93,940.68. The number of days open in August was 22, giving the average revenue for the workday at \$4,270.
6. **Encounters/Workday By Provider:** Average percentages for August was 54.7% of available vs. completed; slightly down from July for all providers; warm handoffs were up for Behavioral Health staff and Nutritionist. Encounters were up for the RN.
7. **Accounts Receivable:** Total Accounts Receivable was \$341,889.28. The majority in the 0-30 bucket at 57.12%, slightly lower than the prior month at 61.00%. The average for our 0-30-day bucket is 34.30 days; and gross charges were \$290,620. Payer mix shows Self Pay at 27%; and the percentage for Medicaid is 46%. Privately insured is at 16% and Medicare is at 6%. There are still issues with Oregon Contraceptive Care AR. Usually, it is less than 1%, in August it shows 5%. Normally the amount is \$5-\$6K, and it shows the current amount is \$16,362.20. It involves reprocessing of claims, some over 120 days. Process is beginning with the oldest and working forward. There is also a system glitch with Maternity Case Management and OCHIN is working with the state on the issue.
8. **OCHIN Top 10:** We were number 21 in the top 10 out of 108 members in the US based on the Revenue Cycle scorecard from OCHIN with a ranking score of 66. Once the COO begins

work, this would be in their purview. Prior month we were at #20 with a ranking score of 71. Metrics are used to determine the success of an entity based on the following:

- a) Days in Accounts Receivable (average length of time that an account balance is active)
- b) Days Undistributed (refers to payments and adjustments that have been posted to the system but have not been distributed)
- c) Percentage of AR over 90 days (the percentage of the total AR that is over 90 days old)
- d) Charge Lag (average length of time between the date of service and the date that the charge for that services is posted to the AR)
- e) Claim Acceptance Rate (percentage of claims that when submitted to clearinghouse make it successfully to the insurance payor)
- f) Days of Open Encounters (patient encounters that have yet to be “closed”)
- g) Charge Review and Claim Edit Days (two work queues within EPIC that hold charges and claims that contain errors)

Action: Sharon moved to approve the Financial Report as written; Carmen seconded. Motion carried.

7. Reports of Committees:

A. Quality Assurance/Quality Improvement Committee -

1. September minutes
 - a) John, a member of the QA/QI committee, went over the recap of the minutes.
 - b) Family planning Chlamydia was at 43.2% with a baseline of 75%.
 - c) There was a report platform issue for mammogram screening; therefore, no numbers were available.
 - d) Method of birth control was at 100% which exceeded the baseline of 90%.
 - e) STD/HIV prevention education showed compliance at 50.2% with a baseline of 75%.
 - f) Relationship safety counseling exceed the baseline of 47% by 53.7%.
 - g) Documentation of birth control dispensed was 92%, which exceeded the baseline of 75%.
 - h) With the exception of mammogram screening, which has a metric source of Healthy People, all other public health metrics are state based.
 - i) All clinical measurements exceed in compliance of the measurement goals.
 - j) Discussion:
 - i. Improvement is needed for both family planning and STD/HIV prevention education. A member asked about the low rate for Chlamydia. Marlene said it is hoped that this will be addressed with the regional STD/CD grant work.
 - ii. If we are going to achieve the ‘reach’ benchmark for CRC, we need to go from 46.1% compliance to 55.1%.

B. Quality Dashboard –

1. Council reviewed the dashboard to see the HRSA goals.
 - a) Discussion:
 - i. Council member mentioned that it would be helpful to see items not met for HRSA in red.

- ii. Another member asked if the patient complaint submitted last month had been resolved. Marlene stated that our current acting COO is working to resolve it.

Action: Donna P. moved to approve the QA/QI report; Sharon seconded. Motion carried.

8. Old Business:

A. GRANTS & Resource Development –

1. OHA SRCH & Colorectal Cancer Screening Grant

- a) We are contracting with YMCA and have their staff member coordinate the grant
- b) The goal is to reduce chronic disease risk, especially type 2 diabetes, by addressing social determinants of health.
- c) Community partners will work together to assess, align and restructure health screening and referral practices to reduce risk and to increase clinic and community linkages to evidence-based prevention and self-management programs and services.
- d) We are waiting to hire a coordinator for the Colorectal Cancer SRCH grant. HR has been contacted.

2. Staffing

- a. Chief Operations Officer - Position posting closes soon.
- b. Public Health Program Representative – Mobile Clinic – New Mobile Clinic Coordinator has been filled. Brenna Ricci began Monday, November 4th. She is still working with WIC and will be full time once the WIC position is filled.
- c. Public Health Program Representative – CRC - Interviewed on Monday, 10/7/19
- d. Public Health Program Representative – Regional STI-CD - Interviewed on Monday, 10/7/19
- e. Registered Nurse 1,2 or 3 - We've had three failed recruitments. Salary study may find that we need to adjust the RN salaries again. We are at a disadvantage due to a shortage of RN's, many of which go on to become practitioners, and can go wherever they like. Position will be posted until filled.
- f. FNP/PA – Dove Rainbow, PA, will begin November 18th.
- g. New MA – A new MA will begin just prior to the new PA. A lead MA will train her prior to the new provider starting.
- h. Behavioral Health MA – Interviews held.
- i. Behavioral Health Manager – HR has not posted the position yet. Job description was approved several months ago.
- j. HR Director – Interviews scheduled for Friday, November 8th.

9. New Business:

A. Grants/Other:

1. No report.

B. Policies/Procedures:

2. Credentialing & Privileging – Dr. Lisa Staffey, DO

Action: Carmen moved to approve the C&P for Dr. Staffey; Donna P. seconded. Motion carried.

3. Credentialing & Privileging – Dr. Timothy Borman, DO

Action: Carmen moved to approve the C&P for Dr. Borman; Clayton seconded. Motion carried.

4. Credentialing & Privileging – Chris Craft, FNP

Action: Carmen moved to approve the C&P for Chris Craft; John seconded. Motion carried.

5. Credentialing & Privileging – Patricia Dannen, PA

Action: Carmen moved to approve the C&P for Patricia Dannen; Clayton seconded. Motion carried.

10. Training – Time permitting

A. Tillamook County Wellness Presentation

1. Michelle Jenck, Wellness contractor, and Shelby Porter, Americorp Vista, provided a presentation and shared a video of Tillamook County Wellness activities.

11. Upcoming Events:

12. Unscheduled:

13. Adjourn - The meeting was adjourned at 2:30 PM.