Tillamook County Community Health Council Meeting Minutes October 21, 2020

Present via Telephone: Harry Coffman, Brooke Bennett, Tim Borman, Carol Fitzgerald, Sharon Kaszycki, Donna Parks, Clayton Rees, Carmen Rost, John Sandusky, Bill Baertlein

Excused: Amy Griggs, Kimber Lundy

Absent/Unexcused:

Staff Present: Marlene Putman, Donna Gigoux, Irene Fitzgerald

Guests:

1. Call to Order: Chair Harry Coffman called the meeting to order at 12:19 pm.

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

- A. Community/Patient Concerns
 - 1. A member asked if someone under 65 could get the high dose flu shot, as she has health issues. In a follow up conversation during the meeting, Donna G. reported she had spoken to the former Public Health manager, who oversees the flu clinics. It was reported to her that the manufacturer stipulates that no one under 65 is allowed to receive the high dose vaccine; with no exceptions.
 - 2. Donna P. reported that she has seen 130 unduplicated families with 70 on Tuesday and 60 on Thursday at her center. There are 17 showers being taken per day, allowing 4 people at a time, with disinfecting every hour. The electrician has 2 tiny homes ready and they are putting up security gates. CARE is beginning to vet clients for the homes.
- B. Ambassador/Advocate encounters with Community Members no report.
- C. Community Partners partner dialogues, invitations to meetings, etc.

3. Consent Calendar:

- A. Approval of September 16, 2020 Meeting minutes:
 - 1. It was noted by a member that action items on page 4 was misplaced. Donna G. will make the corrections.

Action: John moved to approve as amended; Donna P. seconded. Motion carried.

4. Board Development:

- A. Health Council Member Contact & Areas of Expertise:
 - 1. (See Attached List)
- **B.** Member Recruitment
 - 1. No report.
- C. Board Membership Updates:
 - 1. No report.
- C. Common goals shared resources between agencies:
 - 1. No report.
- D. Underrepresented & Youth potential members:
 - 1. On hold until school resumes.

5. Administrator's Report:

General Update and Report provided by Marlene Putman, Administrator –

A. COVID-19 Update

- 1. Marlene provided an update on the current COVID-19 activities.
- 1. Tillamook County is continuing to see more positive and presumptive cases, as in the rest of the state.
- 2. Marlene provides weekly reports to the BOCC community updates on Fridays at 8AM.
- 3. It was suggested that as the Health Council members are advocates in the county, that they should have additional masks on hand in case they see a community member without a mask, and educate that masks do work. Donna G. will mail out masks to those who asked for them.
- 4. We received rapid tests from the state to share with Adventist and Rinehart Clinic for symptomatic patient testing. We are still waiting for our own rapid test equipment that is on backorder.
- 5. We test only patients who show symptoms, unless patient is high risk or in a care facility.
- 6. We do not have the capacity to test asymptomatic patients or those that have close contact with a positive case. Patients are advised that they need to quarantine for 14 days.
- 7. Public Health nurses are conducting contact tracing, and updates are provided weekly every Friday to the BOCC and community. The COVID line is still receiving calls.
- 8. Face shields and masks are made available to patients in the clinic.
- 9. We are scheduling for all services (medical, dental, behavioral health) both in person and virtually.
- 10. A walk-in flu shot clinic is being held at the former Hooley building.
- 11. Information on COVID and flu clinic is on Facebook and our webpage.

B. Drug Take-Back event

- 1. The event will take place October 24th from 10-2 in the clinic parking lot. Flu shots will be available.
- 2. This is in partnership with Solid Waste and the Sheriff's office to take back prescription drugs and sharp for proper disposal.

C. Psychiatrist/ Behavioral Health 3 position

- 1. We are partnering with TFCC to provide access to care, curbside consultation, hospital assistance, prescribing prior to full assessments. CareOregon and the CCO will provide technical support on the collaborative care model as well as consulting with Synergy Health. We received QA & CCO funds to pay for the consultants.
- 2. We need to recruit for a Behavioral Health 3 by the end of the month or in early October.

D. Dental Services

- 1. We have a "go live" date of December 7th for the dental clinic.
- 2. There are issues with fiberoptic access from the Ivy street building over to the dental clinic across the parking lot. IT is working on solutions.
- 3. Signage has been ordered for both inside and outside of the building.
- 4. The dentist will begin October 26th and the hygienist has already been hired and is organizing the mobile clinic.
- 5. Training will be conducted for the electronic health record entitled Epic Wisdom to dental staff. There are some issues with IT for OCHIN to access the EHR.
- 6. We have been assigned about 6,000 dental patients and have a backlog of 200.
- 7. We will still contract with Tillamook Family Dentistry (Dr. Ahn), Greentree Dental (Dr. Zike) and The Smile Studio (Dr. Long) in order to serve more patients. We are the only provider in the county for uninsured and OHP.

- 8. A dental screening will be held on November 17th at the YMCA with the mobile clinic and the new hygienist. Screening is free and are by appointment only.
- 9. Screenings at schools is on hold due to the phased reopening and COVID.

C. Staffing

- 1. Marlene noted that we are seriously short of MA's, and two have recently resigned. She reached out to our new Health Council member Brooke Bennett, who runs the MA program at TBCC. Six students are set to graduate from the program, and Marlene has asked Brooke to encourage them to apply. They need 200 hours of clinical practicum. A member was happy about that because ever since the FQHC was formed in 1993 we have always wanted to "grow our own".
- 2. Open positions:
 - a) Registered Nurse
 - b) Public Health Program Manager
 - c) Community Health Office Supervisor
 - d) Medical Assistant (3)
 - e) Behavioral Health Clinician 3
 - f) Community Health Nurse Manager
 - g) Office Specialist 2
- D. Harm Reduction with Clatsop County
 - 1. We continue to work with Clatsop on needle exchange in Tillamook County. We are looking for a location to provide services.
 - 2. Mike McNickle, the Public Health Director, will provide staff and a van for the exchange as we do not have enough staff. Supplies come from the CCO.
 - 3. A presentation will be held on November 18th to the BOCC.

E. Discussion

1. A member asked if the Supreme Court overturns the ACA, how will it affect our CHC. Marlene stated that 49-60% of our patients are on Medicaid. Dental patients comprise 90%. Another member stated that this will be an interesting 2 weeks and more information should have been made to the community about the seriousness of losing Medicaid.

Action: Donna P. moved to approve the Administrator's report; Carol seconded. Motion carried.

6 Finance Report

- **A.** Page 1: April month end cash balance was \$2,583,700.78 ending with \$7,666.87 more in expense than revenue.
 - 1. **Page 6: Revenue:** Irene reported that we all revenue is within normal range.
 - 2. **Page 6: Expense**: All expenses are all within normal range.
 - 3. Page 7: Materials & Services: All within normal range.
 - 4. <u>Pages 9-11: HRSA Budget Revenue and Expense:</u> Irene reported that COVID carryover was adjusted from last month. The amount was reported as \$15K and was adjusted to \$38K.

- 5. Page 12: Encounters: Total encounters went from 1,298 in July to 1,307 in August. Tillamook clinic had 952 encounters; dental had 261 encounters; Rockaway had 21; and the mobile clinic 30. Average Provider Encounters per FTE went from 7.60 in July to 8.90 in August. Provider FTE was 3.95 in July to 3.72 in August.
- 6. <u>Page 15: Monthly Posted Encounters per Provider</u>: Encounters for all providers trended up with the highest at 10.91 and the lowest at 7.07. The lower number is for new Provider still with all 40 minute appointments.

7. Page 16: Monthly Generated Revenue:

Provider revenue in August was a total of \$99,393.53. The number of days open in August was 21, giving the average revenue for the workday at \$4,733.

8. Page 17: % of Available vs Completed Schedule:

August average shows the highest at 65.7 and lowest at 36.6.

- 9. Page 18 & 19: Accounts Receivable: Total Accounts Receivable was \$339,353.56. The majority in the 0-30 bucket at 63.31%, higher than the prior month at 62.74%. The average for our 0-30-day bucket is 31.30 days; and gross charges were \$348,517.31. Payer mix shows Self Pay at 25%; and the percentage for Medicaid is 41%. Privately insured is at 18% and Medicare is at 13%. Oregon Contraceptive Care A/R is high at 3% (normal range at 1%.) Irene reported that issues with OCHIN has improved over the last 2-4 months. Still MODA issue with delay in receiving remittance which causes delay in applying payment to account and increases the days in A/R.
- 10. OCHIN Top 10: We were number 5 in the top 10 out of 115 members in the US based on the Revenue Cycle scorecard from OCHIN with a ranking score of 78. Prior month we were at 22 with a ranking score of 66. 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: John moved to approve the Financial Report; Kimber seconded. Motion carried.

Action: Carol moved to approve the financial report; Kimber seconded. Motion carried.

7. Report of Committees:

- A. Quality Assurance Committee
 - 1. September QA minutes
 - a) John went over the recap that was provided in the packet showing the measures, compliance rate and goal percentages.
 - b) He also stated that both he and Carmen are asked at every meeting if the Health Council had anything to ask of the committee and said to let either of them know if there are any issues.
 - c) He also said that the QA committee reported that the Retina View machine was ready to be used for diabetic patients.

<u>Action</u>: Kimber moved to approve the report; Carmen seconded. Motion carried.

8. Old Business:

A. Grants:

1. No report.

B. Other:

1. No report.

9. **New Business:**

A. Grants:

- 1. OHA through TFCC Health Equity Grant
 - a) TFCC received COVID funding focused on underserved, persons of color, and senior citizens.
 - b) A project is underway to focus on implementing resources, create community pathways, and barriers to care.
- a) OHSU Knights Cancer Institute Grant
 - a) PHPR and Vista staff applied and received an additional \$15,000 for Health Equity projects.

B. Other:

1. No report.

C. Policy & Procedure:

1. None.

D. <u>Credentialing & Privileging</u>:

- 1. Alicia Holiman, Expanded Practice Hygienist
- 2. Lisa Steffey, DO
- 3. Patricia Dannen, PA-C
- 4. Christopher Craft, FNP
- 5. Dr. Benanti, DDS

<u>Action:</u> John moved to approve the credentialing and privileging for all providers; Donna P. seconded. Motion carried.

10. **Training**:

- 1. Health Equity & Inclusion Shelby Porter provided a presentation and overview of the project that she and Libby Kokes, Americorp Vista are working on.
- 2. Funding has come from OHA through TFCC with an additional grant from OHSU.
- 3. Services include contact tracing, behavioral health services, outreach and engagement for minority and elderly community members.

11. **Upcoming Events:**

12. <u>Unscheduled</u>:

13: **Adjourn**: The meeting was adjourned at 2:06 PM