

Tillamook County  
Community Health Council  
Meeting Minutes  
February 17, 2021

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

**Excused:** Amy Griggs

**Absent/Unexcused:**

**Staff Present:** Marlene Putman, Donna Gigoux, Irene Fitzgerald

**Guests:**

**1. Call to Order:** Chair Harry Coffman called the meeting to order at 12:18 pm.

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

**A. Community/Patient Concerns**

1. Marlene reported that there was a comment in the suggestion box to add a play area and treats for children waiting for appointments. She asked council members for ideas:
  - Nutritious snacks, such as apples, crackers, granola bars. One member reported she could share 2 bags of apples each week.
  - Free coloring books or brochures with crayons to be handed out and kids can take home.

**B. Ambassador/Advocate encounters with Community Members**

1. It is reported that people in the eligible category of 65+ are struggling to find the information for enrollment on our webpage, they need to scroll down to find it and/or don't know where to look. A suggestion was to add a "Click Here" button to make the link more identifiable. Note: Marlene conferred with staff through Teams Messenger during the meeting and staff will add the button to the page today or tomorrow.

**C. Members reported hearing from consumers that our staff is responsive, helpful, kind, and caring, and they appreciate the prompt calls from the COVID line, signing up for vaccines and the assistance. They also appreciate the regular and detailed updates through multiple entities like radio, cable access, Facebook, webpage, BOCC meetings, and videos.**

**D. Community Partners – partner dialogues, invitations to meetings, etc.**

1. No report.

**3. Consent Calendar:**

**A. Approval of January 20, 2020 Meeting minutes:**

1. No changes

**Action:** Sharon moved to approve as amended; Carmen seconded. Motion carried.

**4. Board Development:**

**A. Health Council Member Contact & Areas of Expertise:**

1. Harry reported that he is now a Consumer member of the Health Council.

**B. Member Recruitment**

**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. Tillamook County COVID-19 Case Summary**

**1. Accumulative Data:**

- 401 total cases
- 10,781 negative tests (OHA)
- 16 hospitalized total – 0 this week
- 2.6% average test positivity rate

**2. Risk Level**

- With 15 new confirmed positive and presumptive COVID-19 cases measured from Sunday 1/31/21 – Saturday 2/13/21 by OHA, Tillamook County is likely to remain at the Lower Risk category. The final determination will be announced next Tuesday 2/23/21 and if cases increase above 30 in the upcoming weeks, Tillamook County would be at risk of increasing risk level effective: 2/26/21.

**3. Vaccine Administration as of 2/16/21**

- 1,921 Phase 1A primary doses
- 476 Phase 1A booster doses
- 770 Phase 1B primary doses
- 2,691 total primary vaccines have been administered since they arrived in Tillamook County at the end of December 2020
- Encourage all who are eligible in Phase 1A and Group 1-5 of Phase 1B to enroll online using the form in English and Spanish on our website: [tillamookchc.org](http://tillamookchc.org).
- Completed enrollments are automatically put on a list to make appointments from phone or email requests. Appointments will be made by TCCHC center staff contacting those on the eligibility list using a computer program to randomize the list within eligible groups.
- Currently scheduling 300-320 individuals for primary and booster vaccines each week.
- Partners are Adventist Health, Rinehart Clinic, and Nehalem Bay Fire and Rescue will allow scheduling and immunizing even more people in the county by sharing our eligibility list with these partners to arrange a vaccine site in south and north county as well as the one in central county. It all depends on vaccine supply and staffing.
- It will take weeks to get through each eligible group.
- Safeway and Tillamook Pharmacy are now scheduling eligible residents online. This is through a federal vaccine program and is independent of TCCHC and county vaccine providers list.
- Assistance is available with the online enrollment form by calling 503-842-3914 staffed Monday – Friday 8am – 5pm with bilingual (English and Spanish) staff.

**B. Update on Services**

1. Medical and Behavioral Health services – in person and virtual visits
2. Dental services – clinic still waiting for fiber optic cable and we are looking into other measures to open by April 1.

3. Public Health & WIC –using Hooley building for home visits and nutrition. WIC had a site visit from the state with 3 minor findings. Home visits are impacted due to COVID and are virtual.

C. Equity and Diversity

1. Staff are doing diversity planning and creating internal policies and advocacy. Rede Group is assisting in gathering information from groups and doing 1 to 1 calling and holding meetings. Two COVID videos are coming out and we have 2-3 more to do.

**Action:** Sharon moved to approve the Administrative Report; Carol seconded. Motion carried.

**6. Finance Report**

- A. **Page 1:** December's month end cash balance was \$2,341,196.86 ending with \$14,832.77 more in expense than revenue.

1. **Page 6: Revenue:** Irene reported that the HRSA CARES Act funds of \$149,000 ran from July and ending in September. This affected the lower revenue amount. We received Health Equity COVID 19 funding from OHA through TFCC. We did not receive a Medicaid Wrap payment in December, but saw a higher revenue in Environmental Fees. All other revenue is within normal range.
2. **Page 6: Expense:** All expenses are all within normal range.
3. **Page 7: Materials & Services:** Irene reported that we had an increase computer supplies with the new dental office and an increase in contracted services, based on the agreement with Dental Care, LLC for staffing. Other expenses were within normal range.
4. **Pages 9-11: HRSA Budget Revenue and Expense:** Irene reported that COVID funding was over expended for supplies and resulted in a higher draw down of funding. Irene will need to adjust expenses to a state line item with quarterly funding.
5. **Page 12: Encounters:** Total encounters went from 1,889 in November to 1,265 in December. Tillamook clinic had 742 encounters; dental had 318 encounters; and Rockaway had 18. Average Provider Encounters per FTE went from 9.90 in November to 7.40 in December. Provider FTE was 4.34 in November to 3.78 in December.
6. **Page 16: Monthly Posted Encounters per Provider:** Encounters for all providers with the highest at 10.08 and the lowest at 4.48, with an average of 7.40.
7. **Page 16: Monthly Generated Revenue:**  
Provider revenue in December was a total of \$6,713.76. The number of days open in was 20, giving the average revenue for the workday at \$336. Irene reported that the adjusted negative revenue is a result of monthly changes and a high number of managed care adjustments, bringing the gross charges down. Accounts receivable was down, adjustments to revenue was up, and charges were down.
8. **Page 17: % of Available vs Completed Schedule:**

December average shows the highest at 85.2% and lowest at 49.4%.

9. **Page 18 & 19: Accounts Receivable:** Total Accounts Receivable was \$201,531.12. The majority in the 0-30 bucket at 54.33%. The average for our 0-30-day bucket is 16.30 days; and gross charges were \$293,040.09. Payer mix shows Self Pay at 30%; and the percentage for Medicaid is 34%. Privately insured is at 20% and Medicare is at 14%. Oregon Contraceptive Care A/R is up slightly at 2%.
10. **OCHIN Top 10:** We were number 50 in the top 10 out of 118 members in the US based on the Revenue Cycle scorecard from OCHIN with a ranking score of 64. Prior month we were at 18 with a ranking score of 69. This is due to holding of claimers for a new provider waiting on credentialing. 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:** Donna P. moved to approve the Financial Report; John seconded. Motion carried.

## **7. Report of Committees:**

### **A. Quality Assurance Committee**

#### **1. January QA minutes**

- a) John went over the recap that was provided in the packet showing the measures, compliance rate and goal percentages.

**Action:** Bill moved to approve the report; Donna P. seconded. Motion carried.

## **8. Old Business:**

### **A. Grants:**

#### **1. OHA SRCH grant**

- a) Funding was awarded in the amount of \$50K; \$30K to continue work with Wellness to address diabetes with YMCA coordination of the Diabetes Prevention Program and outreach with partners in a shared referral pathway (nutrition, exercise, recreation). This includes videos for home viewing.

- b) \$20K was used to hire a contractor to research models and develop community buy-in for a Community Health Worker, or care extenders with people and organizations to identify barriers to care for patients in the county.
- c) The funding is slated for January 1, 2021 through June 30, 2021.

**B. Other:**

**1. Staffing**

- a) RN 1,2,3 – 1 offer pending license for RN1; RN3 will begin in March
- b) MA – still looking to hire one more MA
- c) Office Specialist 2 – 1 outstanding position to hire
- d) Building & Grounds – reposted
- e) Community Public Health Deputy Director – working on job description to get approval to replace the Public Health Manager with better pay

**9. New Business:**

**A. Grants:**

- 1. No report.

**B. Other:**

- 1. No report.

**C. Policy & Procedure:**

- 1. Marlene indicated that we are working on updating operational changes due to COVID activities. These policies and procedures will not require Health Council approval.

**D. Credentialing & Privileging:**

- 1. None.

**10. Training:**

**A. Risk Share Agreement with CPCCO – Mae Pfeil and Mimi Haley**

- 1. Mae and Mimi presented information regarding the Risk Share agreement. She presented a PowerPoint presentation which will be provided to the Health Council members.
- 2. The CCP has \$2.6 million for all three counties (Tillamook, Clatsop and Columbia). One county is using their share to invest in housing.
- 3. The basic premise is for each county to meet or exceed quality measures and cut down on costs for Medicaid patients. Once achieved, each county will receive funding to invest in their communities. If not met, then each county will need to pay back funds to the CCO. Depending on the size of the county, larger pays more, smaller pays less. A member asked what other counties received and it was little over a half a million dollars.
- 4. Mae indicated that Tillamook County has already increased their performance for Substance Use Disorder. Adventist Health and Rinehart Clinic are also participating in Risk Share.
- 5. Mae will be providing the presentation at the BOCC next Wednesday.

**Action:** Bill moved to approve participation in Risk Share; Clayton seconded. Motion carried.

**11. Upcoming Events:**

**12. Unscheduled:**

**13. Adjourn:** The meeting was adjourned at 2:07 PM