Tillamook County Community Health Council Meeting Minutes September 21, 2022

Present via Telephone: Bill Baertlein, Tim Borman, Kim Smith-Borman, Harry Coffman,

Carol Fitzgerald, Sharon Kaszycki, Donna Parks, Carmen Rost **Excused:** Kimber Lundy, Mary King, John Sandusky, Erin Skaar

Absent/Unexcused:

Staff Present: Marlene Putman, Donna Gigoux, Irene Fitzgerald, Anna Mitchell

Guests:

1. Call to Order: Chair Harry Coffman called the meeting to order at 12:33 pm. Introductions were made with Anna Mitchell present.

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

- A. Community/Patient Concerns
 - 1. Member reported that his wife is a patient and she called for an appointment on Thursday, Friday and Monday and did not receive a call back for several days. She was very frustrated.
 - a) Marlene reported that we had just had a meeting to discuss phone calls and it is difficult as we are receiving hundreds of calls regarding the booster among other things.
 - b) Several staff members will be assisting and we are scheduling a pop-up vaccination clinic to take care of the requests to receive a booster and flu vaccine.
 - 2. A member wanted to let all staff know that the BBQ was great! Donna G. will send an email to all staff.
- B. Ambassador/Advocate encounters with Community Members
 - 1. No report
- C. Community Partners partner dialogues, invitations to meetings, etc.
 - 1. No report.

3. Consent Calendar:

A. Approval of August 17, 2022 Meeting minutes:

Action: Sharon moved to approve as written; Kim seconded. Motion carried.

4. Board Development:

- A. Member Recruitment
 - 1. No report.
- B. Health Council Member Contact & Areas of Expertise:
 - 1. See attached, delete Amy Griggs and update the date of changes.
- B. Common goals shared resources between agencies:
 - 1. No report.
- C. Underrepresented & Youth Member
 - 1. No report.
- D. TCCHC Committee/Workgroup/Opportunities
 - 1. It was again noted that there remains an opportunity to serve on the QI/QA committee.

2. No volunteers came forward at this time.

D. Health Council Acronyms

1. See Attached

5. Administrator's Report:

General Update and Report - Marlene

A. COVID 19

- 1. Community level transmission is low.
- 1. Booster has arrived in Tillamook.
- 2. Boosters provide protection against BA.4/BA.5 variants as well as the original strain of the virus.
- 3. Seek out the booster if it has been more than 2 months since your last booster.
- 4. Weekend case count Sept. 16 to 18: 3
- 5. 7-day case count Sept. 11 to 17: 15
- 6. 14-day case count Sept. 4 to 17: 31
- 7. Cases for September Sept. 1 to 18: 40
- 8. Total cases to date March 2020 to Sept. 18: 4,657
- 9. Total deaths: 74
- 10. Total hospitalizations: 177
- 11. Active outbreaks: 0
- 12. Masks are still required when in healthcare settings for patients, visitors and staff.

B. Tillamook County Wellness (TCW)

- 1. Mid-year report see attached
- 2. Update on committees
- 3. Merging Community Health Needs Assessment (CHNA) with TCW and our modernization

C. Staffing

- 1. Vacancies: Multiple
 - a) Clinical
 - i. Nurses working with CCO for recruitment
 - ii. Considering an FNP as clinical manager
 - iii. Building partnership with community college
 - b) Behavioral Health
 - i. Assistant Manager and Clinician resigned 9/16/22
 - ii. Recruiting no applicants with county
 - iii. Working with CPCCO to recruit in person and potentially to add virtual for Spanish and English
 - c) Psychiatrist
 - i. Contract with BrightPsych for patients that needed continued support
 - ii. Working with CCO to recruit on-site
 - d) Managers
 - i. Clinic Manager resigned 9/26/22 interviews scheduled
 - ii. Administrative Manager interviews underway
 - iii. Communication & Wellbeing Manager position offered but candidate declined position
 - e) Administrative

i. Seeking Administrative Specialist or OS2 to provide support to take on roles/duties of former clinic manager

D. Medical

- 1. Dove Rainbow will be leaving Oregon and would like to work as a virtual provider
 - a) Testing out virtual visits with MA in the room and providers elsewhere
 - i. Testing out process with MA on site and provider off site
 - ii. Adding new high resolution tools to supplement visits
 - iii. Will be looking to add a Community Health Worker (CHW) in the field with e-tools to assist with visits
- 2. AMN language services
 - a) Staff trained and using the new equipment
 - b) Receiving positive feedback and positive experiences one example: Cantonese patient and the tool worked well!
 - c) Considering the need to extend the length of the visit in certain cases when using interpreters

E. Other

- 1. Expanded Dental
 - a) North county services start around October
 - b) Problem is we do not have a mobile clinic driver
- 2. PCPCH
 - a) We had a site visit at Rockaway Beach clinic
 - b) We were seeking Tier 4 but stayed at Tier 3
- 3. A Notice of Award was submitted for signature by BOCC for \$1.2 million
 - a) Contractor chosen is Cove Built, located in Arch Cape

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

6. Finance Report

- A. <u>Page 1:</u> July's month end cash balance was \$2,731,824.14 ending with \$79,819.11 more in expense than revenue.
 - 1. <u>Page 6: Revenue:</u> Irene reported that we received the Medicaid Wrap for 2021 and she will begin submitting for 2022. Also, we are missing the HRSA drawdown, which will be posted in August. All other revenue is within normal range.
 - 2. **Page 6: Expense**: All expenses were within normal range.
 - 3. Page 7: Materials & Services: All expenses were within normal range for materials and services.
 - 4. <u>Pages 9-11: HRSA Budget Revenue and Expense:</u> Revenue was \$0 for July as it was received in August and expense was \$431,744.74. All other revenue/expense was within normal range.

- 5. <u>Page 13: Encounters:</u> Total encounters for June was 1,720. Tillamook clinic had 1,108 encounters; dental had 574 encounters; and Rockaway had 14. Average Provider Encounters per FTE were 10.20. Provider FTE was 4.13.
- 6. <u>Page 16: Monthly Posted Encounters per Provider</u>: Encounters for all providers with the highest at 13.42 and the lowest at 7.50. The lowest provider encounters are due to a provider out on family leave.

7. Page 16: Monthly Generated Revenue:

Provider revenue in June was a total of \$135,029.12. The number of days open in was 20, giving the average revenue for the workday at \$6,751.

8. Page 17: Available vs Completed Schedule:

Irene reported that the schedule for providers was not reported in July.

9. Page 18 & 19: Accounts Receivable:

Total Accounts Receivable was \$4479,033.05. The majority in the 0-30 bucket at 51.39%. The average for our 0-30-day bucket is 31.60 days; and gross charges were \$452,132.58. Payer mix shows Self Pay at 37%; and the percentage for Medicaid is 31%. Privately insured is at 17% and Medicare is at 15%. Oregon Contraceptive Care A/R is at 1%.

- 10. OCHIN Top 10: We were number 53 in the top 50 out of 144 members in the US based on the Revenue Cycle scorecard from OCHIN with a ranking score of 56. There are multiple issues concerning OCHIN and we have been assigned and working with a new team. 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 service 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; Sharon seconded. Motion Carried.

7. Report of Committees:

- A. Quality Assurance Committee (QA)
 - 1. No report.

8. Old Business:

A. **Grants**:

- 1. Behavioral Health Resource Networks (BHRN) Grant
 - a) Received \$470K through the end of fiscal year
 - b) Will need to bring on staff
 - c) Multiple organizations in the county are working together to target patients that have fallen through the cracks, substance use disorder, mentally ill, etc.
 - d) Funding was shifted by legislature from law enforcement to resources
 - e) All providers with an X-waiver will see patients daily or allow 24 hour access with MAT
 - f) Will expand to include non-patients; currently only seeing our patients
 - g) Will hire an BHC, Care Coordinator, and an OS2 for support.

Other:

1. None.

9. **New Business:**

A. Grants:

1. None.

B. Other:

- 1. 2022 Community Health Council Self-assessment
- 2. Conflict of Interest Disclosure Form
- 3. Member Bios
 - a) Donna G. sent out via mail forms that are needed to be in compliance with HRSA and in preparation of next year's operational site visit.

C. Policy & Procedure:

- 1. Tillamook County Community Health Advisory Council Bylaws
 - a) A member mentioned that language should be consistent on page 5. Need to change on item c. "ED as an ex-officio" to "CEO (aka Administrator)"

Action: Sharon moved to approve the Bylaws; Donna P. seconded. Motion Carried.

2. Tillamook County Community Health Council Co-Applicant Agreement

Action: Donna P. moved to approve the Co-Applicant agreement; Sharon seconded. Motion Carried.

D. Credentialing & Privileging:

1. None.

Action: No action.

10. **Training**:

- 1. 2022 CAHPS Survey
 - a) Donna G. provided an overview of the survey using a PowerPoint presentation.
 - b) The presentation was included in the materials.

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11. **Upcoming Events:**

- 1. No report.
- 12. <u>Unscheduled</u>:
- 13: **Adjourn**: The meeting was adjourned at 1:52 PM