Approval of Minutes by Carmen Rost, Secretary: Carmen Kost, Secretary

Tillamook County
Community Health Council
Meeting Minutes
June 21, 2023

Present: Carmen Rost, Harry Coffman, Bill Baertlein, Tim Borman, Kim Smith-Borman, John

Sandusky

Excused: Erin Skaar, Sharon Kaszycki

Absent/Unexcused: Donna Parks, Kimber Lundy, Carol Fitzgerald

Staff Present: Irene Fitzgerald, Maia VanSpeybrock, Marlene Putman, Donna Gigoux

Guests: Michelle Walters, Eric Brinkert

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

Introduced Michelle Walters, new behavioral health clinician.

- 2. <u>Consumer/Community/Partner's Needs, Concerns, Issues</u> (based on Health Council Strategic Plan Goal 2 & 3):
 - A. Community/Patient Concerns
 - 1. No report
 - 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 May 17 2023 Health Council Meeting minutes

Action: John moved to approve council minutes as written; Bill seconded. Motion carried.

4. Board Development:

- A. Member Recruitment
 - 1. Officer Appointments waiting on remaining ballots to be turned in. Results will be discussed at July Health Council meeting.
 - 2. Member reappointment three members terms are expiring 6/30/23: Harry Coffman, Tim Borman, Carol Fitzgerald.
 - a. <u>Action</u>: John moved to approve renewing the three members terms; Carmen seconded. Motion carried.
 - 3. Harry hasn't heard anything new from Erin at high school. John hasn't had time to discuss with Jay at TBCC regarding recruitment. John does have a lot of nursing students that could potentially join.
- B. Health Council Member Contact & Areas of Expertise:
 - 1. No report
- C. Common goals shared resources between agencies:
 - 1. No report
- D. Underrepresented & Youth Member
 - 1. No report
- E. TCCHC Committee/Workgroup/Opportunities

Community Health Council Meeting Minutes (6/21/2023)

1. No report

F. Health Council Acronyms

5. Administrator's Report: General Update and Report - Marlene

A. Overall report:

Space Planning:

Just getting started on facility assessment, which includes every building, leased or owned by the health department. The company will look at equipment, building lay out, safety aspects, plus more. On top of the facility planning, the same company will conduct a space planning assessment which will involve the company, McKinstry, providing a plan for the future needs of the health department. Final report will be in October 2023.

Expanding Dental Services:

Starting in North County, dental division is working on policies, getting the mobile clinic ready, getting staff schedules ready, working on inventory and equipment list. After, plan to add services in South county as long as everything goes well.

Upgraded Phone System:

New phone system going into affect county department wide. Should provide additional support on checking messages.

Strategic Planning:

Updating our plan from 2019-2023, extending to 2024. Then a new plan will be developed for 2025 and beyond. Currently finalizing the plan and the council will see that soon.

FTCA Application:

Annual application for FTCA mal practice insurance coverage with HRSA. Includes uploading various documents pertaining to Risk Management, QA/QI, providers privileging and credentialing.

Dermatologist Volunteer:

Looking to start the dermatologist volunteer in July, still have some processing to do regarding credentialing and privileging.

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

6. Finance Report

- A. <u>Page 1:</u> April's month end cash balance was \$4,984,280.33 ending with \$1,475,392.23 more in revenue than expense. This is due to receiving over \$1 million from Medicaid Wrap revenue.
 - Page 6: Revenue: Irene reported that we received HRSA drawdowns totaling \$393,772.08.
 We are now caught up on Medicaid wrap payments. All other revenue is within normal range.
 - 2. <u>Page 6: Expense</u>: Reserve build up is nice to have for Public Health building expenses as they start being expensed now. Coding for HRSA grants off, resulting in drawdowns not taken. All other expenses were within normal range.

- 3. <u>Page 7: Materials & Services:</u> All expenses were within normal range for materials and services.
- 4. Pages 9-12: HRSA Budget Revenue and Expense: Revenue was \$393,772.08 for April and expense was \$519,149.38. Quality Improvement grant not received since COVID. ECV grant funding is dependent on hiring the staff that has been budgeted. American Rescue Plan COVID is for personnel; ARP UDS Plus grant is an addition. Fixes on page 12 of financial report are due to coding issues in payroll which are now fixed. All other revenue/expense was within normal range. HRSA grant money normal.
- 5. <u>Page 13: Encounters:</u> Total encounters for April was 1,704. Tillamook clinic had 1,049 encounters; dental had 596 encounters; and Rockaway had 10. Average Provider Encounters per FTE were 9.70. Provider FTE was 4.24.
- 6. <u>Page 16: Monthly Posted Encounters per Provider</u>: Encounters for all providers with the highest at 11.60 and the lowest at 8.16. (Encounters for March were updated due to scheduling issue when pulling report.)

7. Page 16: Monthly Generated Revenue:

Provider revenue in April was a total of \$107,596.67. The number of days open in was 20, giving the average revenue for the workday at \$5,380.

8. Page 17 - 19: Accounts Receivable:

Total Accounts Receivable was \$524,569.35. The majority in the 0-30 bucket at 52.23%. The average for our 0-30-day bucket is 30.0 days; and gross charges were \$477,183.88. Payer mix shows Self Pay at 42%; and the percentage for Medicaid is 31%. Privately insured is at 17% and Medicare is at 10%. Oregon Contraceptive Care A/R is at 1%.

- 9. OCHIN Top 10: We were number 58 in the top 50 out of 171 members in the US based on the Revenue Cycle scorecard from OCHIN with a ranking score of 57. 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: Bill moved to approve the Financial Report; Carmen seconded. Motion Carried.

B. Appendix A – Sliding Fee Scale Update: updated the sliding fee scale to include a nominal fee line for dermatology services. Also updated the English and Spanish language below the scale to include dermatology in the language.

Action: John moved to approve the Appendix A; Bill seconded. Motion Carried.

7. Report of Committees:

A. Quality Assurance Committee (QA)

- 1. Approve February Minutes
 - a. <u>Action</u>: John moved to approve the February QA/QI minutes; Bill seconded. Motion carried.
- 2. Approve March/April Minutes
 - a. <u>Action</u>: Carmen moved to approve the April QA/QI minutes; Bill seconded. Motion carried.
- 3. Approve May Minutes
 - a. <u>Action</u>: Bill moved to approve the May QA/QI minutes; Carmen seconded. Motion carried.
- 4. June Report and Approval
 - a. QA/QI is still under development as it has transitioned to other staff.
 Staff is still trying to figure out reports and evolving how the committee functions
 - b. Dr Borman is scheduling time to sit down with Irene and Marlene to discuss how meetings are supposed to go and how to develop a better plan for reporting.

<u>Action</u>: John moved to approve the June Quality Assurance committee report; Carmen seconded. Motion carried.

B. Risk Management Committee

- 1. Annual Report of Risk Management, 2022-2023 presentation attached to packet.
- 2. Approval of Annual Risk Management Report, presented by Donna Gigoux

<u>Action</u>: John moved to approve the Annual Risk Management Report; Carmen seconded. Motion carried.

8. Old Business:

A. Grants:

a) HRSA Rural Health Network Planning Grant update: the health department received funding for a 1 year planning program that will set us up for a larger 4 year implementation grant funding opportunity. More details to come on how we will execute our plan of expanding accessibility access and language. Unfortunately, our staff person dedicated to this grant is no longer a county employee.

B. Health Council Governance:

a) Annual Review of Co-applicant agreement between Health Council and Board of County Commissioners. The agreement will be sent out via email for members review and approval of no changes. Agreement is valid for 3 years, 2022-2025.

<u>Action</u>: Bill moved to approve the current co-applicant agreement as is; Carmen seconded. Motion cannot carry due to no quorum. Email vote will be sent out for final approval. Update: received 3 email responses with votes yay, motion carried.

C. Policy and Procedure:

a) In process – revising HIPAA policies with potential of adding staff trainings. More details to come.

9. New Business:

A. Application for FTCA Redeeming – need approval to apply, application due June 23rd. FTCA provides mal practice insurance coverage for health centers.

<u>Action:</u> Bill moved to approve the application to FTCA Redeeming; Carmen seconded. Motion cannot carry due to no quorum. Email vote will be sent out for final approval. Update: received 3 email responses with votes yay, motion carried.

B. Policy and Procedure

- a. Approval of Corporate Compliance Plan update full plan will be emailed to council members for review and approval via email.
- b. BHRN policies for review and approval documents will be sent out to council members at a later date once they are finalized.
- C. Credentialing & Privileging: None at this time. Up coming approvals needed: Michelle Walters, Behavioral Health Clinician; Dr Dale Westrom, Dermatologist volunteer.
- **D.** HRSA Operational Site Visit Update (training item for July). No specific date set yet, but review of duties for Health Council will be done in July.

E. <u>Training:</u>

Strategic Planning Summary and discussion with Eric Brinkert, Solid Ground Consulting. Presentation will be shared when finalized for approval in July.

11. Upcoming Events:

- 6/24 June Dairy Parade
- 12. <u>Unscheduled:</u> Carmen to come into admin next day to sign off on today's minutes for the FTCA application, in Harry's place.
- 13: Adjourn: The meeting was adjourned at 2:22 PM