

Tillamook County  
Community Health Council  
Meeting Minutes  
November 20, 2024

**Present:** Harry Coffman, Carmen Rost, Kim Smith-Borman, Tim Borman, Kelsey Leonning, Donna Gigoux, Vicky Mata, Donna Parks, John Sandusky, Sharon Kaszycki

**Excused:**

**Absent/Unexcused:**

**Staff Present:** Maia VanSpeybrock, Irene Fitzgerald, Marlene Putman

**Guests:** Camille Sorensen

1. **Call to Order:** Harry Coffman called the meeting to order at 11:03 am.
2. **Introductions with Camille Sorensen, the new Communications and Wellbeing Manager**
3. **Consumer/Community/Partner's Needs, Concerns, Issues** (based on Health Council Strategic Plan Goal 2 & 3):
  - A. **Community/Patient Concerns**
    - i. No Comments
  - B. **Ambassador/Advocate encounters with Community Members**
    - i. No comments
  - C. **Community Partners – partner dialogues, invitations to meetings, etc.**
    - i. No comments
4. **Consent Calendar:** Approval of October 16, 2024 Health Council Meeting minutes  
**Action:** Sharon moved to approve council minutes; John seconded. Motion carried.
5. **Board Development:**
  - A. **Member Recruitment:**
    - i. Donna P has a contact that she will reach out to regarding outreach for the board and health center to our Hispanic population.
  - B. **Health Council Member Contact & Areas of Expertise:**
    - i. Discussed, No updates
  - C. **Common goals – shared resources between agencies:**
    - i. No comments
  - D. **Underrepresented & Youth Member**
    - i. No comments
  - E. **TCCHC Committee/Workgroup/Opportunities**
    - i. Discussion around development of a succession planning committee to plan for retirements in the board and the health department. More details to be determined. Harry and Donna P expressed interest in joining this committee.
  - F. **Health Council Acronyms – sent annually**
6. **Administrator's Report:** Marlene
  - A. **General Update:**
    - i. **Pharmacy:** as previously mentioned, sublease has been signed by Genoa Healthcare for the pharmacy in our new integrated site. Genoa sent out their architect to look at the Community Health Council Meeting Minutes (11/20/2024)

space and should be sending updated floor plan documents to the team. Once they have finalized their plan, Genoa was get permits and start construction. With the plan of opening both pharmacy and clinic in Q1 or Q2 2025.

- ii. **Expanded Clinic:** Deb France with OH+Planning, who presented last month for the board is working on the plan for the expansion of the main clinic, which consists of enlarging the waiting room, reconfiguration of various offices for more public access which will create more space for more exam rooms. Expenses and timing will depend on various factors, some listed below.
- iii. **Dentist:** Dr Itzel Romero started in the dental clinic and is currently seeing patients. Dr Romero is a new grad and has mentoring resources through SandCreek Dental with a couple dentists there to answer questions.
- iv. **PPS Rate:** Irene and consultants are working on preparing finances in order to submit to the state for a Prospective Payment System (PPS) rate increase, which hasn't been done in over 10 years and is the rate at which the health center is reimbursed for Medicaid services. Finances to include any increases in expenses and changes to scope since we last submitted.
- v. **Facilities Maintenance:** there is a list of maintenance items for the clinic, dental, public health building and the new integrated site that need to be addressed, such as HVAC, equipment fixes, sidewalk issues, and others that are being handled.
- vi. **Lease vs Purchase:** Admin and Executive Council will be meeting with the Riggert Family Foundation, who own the main clinic building, regarding various ongoing issues with the maintenance of the building, also the Foundations ideas of ongoing lease payments from the health center. Admin would like to look into the option of purchasing the building to allow for uninterrupted upgrades and up keep of the building. This will affect the finances of the department if we purchase the clinic, which might postpone the expansion. Another idea is the expansion of the dental clinic if space becomes available next door, which will also affect finances of the department.

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

## 7. **Finance Report:**

- A. **Page 1:** September's month end cash balance was \$4,156,070.47 ending with \$215,368.26 more in expense than revenue. This is due to low Medicaid payment, increase in operating expenses, high computer related costs and 340b prescription issues.
  1. **Page 6: Revenue:** Low Medicaid payments due to timing of request and timing of payments, 340b payment issue being looked into. Dental is usually 90% Medicaid, which can also contribute to low revenue due to lack of dentist from March until October. Other revenue is within normal range.
  2. **Page 6: Expense:** All other expenses were within normal range.
  3. **Page 7: Materials & Services:** \$10k in dental related operation costs. All expenses were within normal range for materials and services.
  4. **Pages 9-12: HRSA Budget Revenue and Expense:** Revenue was \$209,686.58 for the month. All other revenue/expense was within normal range.

5. **Page 13: Encounters:** Total encounters for the month was 1,953. Tillamook clinic had 1,486 encounters; dental had 361 encounters; and Rockaway had 18. Average Provider Encounters per FTE were 11.50. Provider FTE was 3.66.
6. **Page 16: Monthly Posted Encounters per Provider:** Encounters for all providers with the highest at 16.43 and the lowest at 7.50. Hygienist Jennifer had 111 posted patient encounters.
7. **Page 16: Monthly Generated Revenue:**  
 Provider revenue in the month was a total of \$268,869.07. The number of days open in was 20, giving the average revenue for the workday at \$13,443. Dental revenue was \$17,180.59 for the month, with number of days open of 20, giving the average revenue for the workday at \$859.
8. **Page 17 - 19: Accounts Receivable:**  
 Total Accounts Receivable was \$594,120.36. The majority in the 0-30 bucket at 59.64%. The average for our 0-30-day bucket is 38.70 days; and gross charges were \$570,832.87. Payer mix shows Self Pay at 39%; and the percentage for Medicaid is 33%. Privately insured is at 16% and Medicare is at 12%. Oregon Contraceptive Care A/R is at 0%.
9. **OCHIN Top 10:** We were number 89 in the top 50 out of 202 members in the US based on the Revenue Cycle scorecard from OCHIN with a ranking score of 53. We are still short one medical biller. Metrics are used to determine the success of an entity based on the following:
  1. Days in Accounts Receivable (average length of time that an account balance is active)
  2. Days Undistributed (refers to payments and adjustments that have been posted to the system but have not been distributed)
  3. Percentage of AR over 90 days (the percentage of the total AR that is over 90 days old)
  4. 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)
  5. Claim Acceptance Rate (percentage of claims that when submitted to clearinghouse make it successfully to the insurance payor)
  6. Days of Open Encounters (patient encounters that have yet to be “closed”)
  7. 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; Donna G seconded. Motion Carried.

8. **Report of Committees:**

A. **Quality Assurance Committee (QA)**

- i. Postponed

9. **Old Business:**

- A. **Grants:** Service Area Competition (SAC) grant for HRSA health center funding was submitted. This grant will be for 2025-2028, for \$2.5m annually. These funds are used to pay for employees working primarily in the clinic. We will receive award notification around March 2025.

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- B. **CEO Evaluation:** approval of summary and annual evaluation
  - i. **Executive Session called into order 11:53**
  - ii. Donna P mentioned that the CEO evaluation 11/4/24 was a glowing evaluation, Marlene exceeds expectations of both board members and the Board of County Commissioners (BOCC), and all praise was mimicked by the commissioners.
  - iii. Harry mentioned that the evaluation had a positive atmosphere, the BOCC seemed exceedingly happy of Marlene’s leadership, and also that succession and replacement planning will be difficult.
  - iv. Top 3 priorities that were identified for Marlene for 2025:
    - a. Succession planning
    - b. Budget and financial planning for 3-5 years
    - c. Filling vacancies of health center
  - v. **Executive Session ended at 12:05**

**Action:** John moved to approve the 2023-2024 CEO evaluation; Donna P seconded. Motion carried.

**10. New Business:**

- A. **Grants:** None
- B. **Policy & Procedure:** None
- C. **Credentialing & Privileging:** None. *Upcoming: Dr Prulhiere, Rhonda Bolow, Jennifer Travis.*

**11. Upcoming Events:** None

**12. Unscheduled:** None

**13. Training: Post Election Materials**

- A. Columbia Pacific Coordinated Care Organization (CPCCO) Financial Performance – see attachment
- B. Oregon Coalition of Local Health Officials Election Briefing – see attachment
- C. Approval to sign letter requesting mandatory funding for National Health Service Corps and Teaching Health Center programs

**Action:** Carmen moved to approve the signing of the letter; Sharon seconded. Motion carried.

**14. Adjourn:** The meeting was adjourned at 12:37 PM