

Tillamook County  
Community Health Council  
Meeting Minutes  
February 19, 2025

**Present:** Harry Coffman, Carmen Rost, Vicky Mata, Donna Parks, John Sandusky, Sharon Kaszycki, Donna Gigoux, Erin Skaar

**Excused:** Kim Smith-Borman, Kelsey Leonning

**Absent/Unexcused:**

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

**Guests:**

1. **Call to Order:** Harry Coffman called the meeting to order at 11:04 am.
2. **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
3. **Consent Calendar:** **Approval of January 22, 2025 Health Council Meeting minutes**

**Action:** Sharon moved to approve council minutes; Carmen seconded. Motion carried.
4. **Board Development:**
  - A. **Member Recruitment:**
    - i. Board Development Committee Update
      - a. Maia provided a summary of the first board development committee meeting from 2/3, members discussed replacements that needed to be done now and in the next few years as current members retire. The committee discussed how the board needs to reflect the patient population seen at the health center, and went over specific requirements like how many members are required. Members on the committee agreed that whoever brought in new members would be the main mentor to onboard and orient to the board and health center. Admin is working with communications on presentations and other visuals to make onboarding a more engaging process. A few members had agreed to outreach to potential new members, a few applications have been received, see items ii. and iii. The committee will reconvene in a month for follow up items and further discussion around how members would like to see the orientation process happen.
    - ii. Katy Sommers Application

**Action:** Donna P moved to approve the appointment of Katy Sommers to the health board; Sharon seconded. Motion carried.
    - iii. Maria Leos Application

**Action:** Sharon moved to approve the appointment of Maria Leos to the health board; Carmen seconded. Motion carried.

**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. Discussed in item 4A

**E. TCCHC Committee/Workgroup/Opportunities**

- i. Board Development committee will meet again March 3<sup>rd</sup>
- ii. Admin to look into specifics for QAQI committee participation

**F. Health Council Acronyms – sent annually**

5. **Administrator’s Report: Maia**

**A. General Update:**

**i. Facilities:**

1. **800 Main Integrated Clinic:** construction to start on the pharmacy side in the near future, after demo and permits are secured. On the clinic side, internal and external wiring is needed to connect to the county system, along with other minor renovations to doors and the registration desk at the front. Furniture for exam rooms in process of being ordered. It is still the plan to open the clinic in spring 2025.
2. **Main Clinic:** as previously discussed, the appraisal for the main clinic was obtained and shared with the landlords. We have not heard back from them since, although the purchase of a building is not considered a sustainable option at this time with the unknowns around federal funding and Medicaid funding future due to the agenda of the new presidential administration. The unknown future of funds also extends to the main clinic expansion that was tentatively planned to start later 2025-2026, is on hold.
3. **Community Health Needs Assessment (CHNA):** the Tillamook County CHNA priorities have been decided and the next step is to start on the Community Health Improvement Plan (CHIP). Details will be sent to members in a separate email. This external committee/group is an informative group to be part of to learn about what different entities around the county are doing in regards to health, if any members want to be involved, details will be in the email.
4. **Legislative Information:** a presentation will be sent via email with information in regards to the Oregon legislative session and how health board members can get involved with providing input and testimonies.

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

6. **Finance Report:**

- A. **Page 1:** December’s month end cash balance was \$3,680,268.99 ending with \$83,815.98 more in revenue than expense. This is due to 2 DHS payments received, and \$93k received from the quality metrics pool.

1. **Page 6: Revenue:** Received the annual payment from Environmental Health services. Other  
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revenue is within normal range.

2. **Page 6: Expense:** All other expenses were within normal range.
3. **Page 7: Materials & Services:** \$15k annual payment for Ring Central, phone service. All other 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. Closing out all COVID19 grants, won't see those on future reports. All other revenue/expense was within normal range.
5. **Page 13: Encounters:** Total encounters for the month was 2,660. Tillamook clinic had 1,914 encounters; dental had 688 encounters; and Rockaway had 13. Average Provider Encounters per FTE were 10.10. Provider FTE was 3.06.
6. **Page 16: Monthly Posted Encounters per Provider:** Encounters for all providers with the highest at 11.57 and the lowest at 0.63 for Dr Prulhiere's first month. Hygienist Jennifer had 126 posted patient encounters and Dr Romero had 227 posted encounters.
7. **Page 16: Monthly Generated Revenue:**  
Provider revenue in the month was a total of \$173,543.22. The number of days open in was 20, giving the average revenue for the workday at \$8,677. Dental revenue was \$68,229.64 for the month, with number of days open of 20, giving the average revenue for the workday at \$3,411.
8. **Page 17 - 19: Accounts Receivable:**  
Total Accounts Receivable was \$594,308.77. The majority in the 0-30 bucket at 72.36%. The average for our 0-30-day bucket is 34.80 days; and gross charges were \$538,192.92. Payer mix shows Self Pay at 37%; and the percentage for Medicaid is 44%. Privately insured is at 10% and Medicare is at 9%. Oregon Contraceptive Care A/R is at 0%.
9. **OCHIN Top 10:** OCHIN ranking for December was 87 with a modified score of 55. OCHIN now has 206 total members using their system. 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:** Donna P moved to approve the Finance Report; John seconded. Motion carried.

7. **Appendix A:**

**A. Sliding Fee Scale Update 2025:** annual update to family size and income per category for the federal poverty level, as dictated by HHS poverty guidelines. Only the salary amounts have been updated per guidelines, the nominal fees have remained the same. Donna P suggests to allow for updates later on for the nominal fees as behavioral health has not been updated since it's been added.

**Action:** Donna P moved to approve the updated sliding fee scale; Sharon seconded. Motion carried.

**B. HRSA Service Area Competition Budget (2025-2028):** annual budget that was submitted with the SAC grant, requesting \$2.51m for personnel expenses for medical staff in clinic. The other portion of the budget \$9.16m is non-federal revenue from state (OHA), local (CPCCO), other and program income.

**Action:** Donna G moved to approve the budget for the SAC FY 2025-2028; John seconded. Motion carried.

8. **Report of Committees:**

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

**i. December Report:** revisit By-laws and HRSA requirements for who is responsible for attending QA/QI meetings and reporting to full council. Donna P would like to join the committee if allowed to have non-officer members representing.

**Action:** Donna P moved to approve the December QA/QI summary; Carmen seconded. Motion carried.

9. **Old Business:**

**A. Main Clinic Expansion Drawings:** we received final draft drawings for the main clinic expansion project for review and further discussion from staff and managers. Once all final input has been collected, we will have a plan for when the decision is made to proceed to the next step of construction, pending financial review and the future of the health center.

**B. Grants:** None

**C. Policy and Procedure:** None

10. **New Business:**

**A. Grants:** None

**B. Policy & Procedure:** None

**C. Credentialing & Privileging:** None

11. **Upcoming Events:** Townhall meeting at Neah-Kah-Nie high school 2/22 with Senator Merkley and Representative Bonimici

12. **Unscheduled:** None

**13. Training: HRSA Funding Freeze Implications**

A. Currently there are a few executive orders (EO) that pertain to health centers and providing services to all patients that have been a requirement under 330 grantees, these relating Eos have been challenged. Therefore, no changes to business or services have been made. It is expected that more EOs will be signed that threaten the health center providing services as usual, but that those will also be challenged. HRSA did rescind the message stating all grantees have to follow EOs or funding might be threatened. As of now, January HRSA payment has been received after a week of processing, which is unusual and never has happened in Irene's time. Marlene and Irene are working with the commissioners on planning for different scenarios relating to federal funding and if Medicaid were to be affected, both of which are large portions of the health centers budget and vital to sustainability.

**14. Adjourn:** The meeting was adjourned at 12:40 PM