

Board of Directors

Friday, January 24, 2020

1:00 p.m.

GCHC

725 Mason Street – Conference Room

Board Members Present

Claudnyse Holloman, Chair; Steven Schwartz, Sam Olson, Autumn Bagley, Deborah Duckett (via telephone), Erica Thrash-Sall

Board Members Absent

Ericka Smith, Shannon Kott, Yolanda Oliver-Yancey, Kyle McCree (excused)

Guests

Glen Chipman, GHS CFO, Jean Troop, GHS Reimbursement Officer; Sandy Sweet, GHS Accounting Manager

Recording Secretary: Karen Riddle, GHS Administrative Assistant

Meeting called to order at 1:03 p.m. by Claudnyse Holloman, Board Chair.

I. Adoption of Agenda

E. Thrash-Sall moved, A. Bagley supported the motion to adopt the agenda as presented.

Motion carried

II. Welcome & Introductions

Round table introductions were made and it was noted that Deborah Duckett was attending via telephone.

III. Public Participation and Community Feedback

None

IV. Approval of Minutes

S. Schwartz moved, S. Olson supported the motion to approve the December 15, 2019 minutes as presented.

Motion carried

V. Finance Committee Summary

a. FY20 December 2019 YTD Financials

G. Chipman presented the FY20 December 2019-YTD Financial packet. The December total revenue was \$544,038 compared to the budget of \$568,353 and the expenditures were \$404,936 compared to the budget of \$530,254. This resulted in a surplus for December of \$38,099. He continued to review the remaining pages of the report and there were no areas of concern. The financial packet is on file with the minutes.

G. Chipman noted that the Cost, Reimbursement & Productivity Statistics page is now showing the break out of productivity between the physical health and behavioral health providers to reassure cleaner data.

b. 2020 Fee Schedule

J. Troop presented the proposed Fee Schedule and brought before the Board for review and approval as required every three years. She discussed the methodology used to establish the proposed rate explaining that both Medicare and Medicaid prevailing rates versus our costs are reviewed for each code. ~~explained that both Medicare and Medicaid prevailing rates versus our costs are reviewed for each code and how the methodology is established to calculate rates.~~ Using prevailing rates versus cost was suggested as this would keep total charges down for patients above 200% FPL. After discussion, the board approved this methodology. The 2020 Fee Schedule is on file with the minutes.

C. Productivity Charts

J. Troop reviewed and discussed with the Board the productivity report for December 2019. She noted that several individuals are above target and things are looking great.

S. Olson moved, S. Schwartz supported the approval of the FY20 December YTD Financials, the Financial Summary Report and the proposed 2020 Fee Schedule as presented.

Motion carried

VI. Contract Summary

a. Review email vote summary of Sagacity Interventions, LLC

At the December Board of Directors meeting the agreement with Sagacity Interventions, LLC was discussed and it was agreed that an email vote would be called after the Board received additional legal information. The results of the email vote were brought before the Board at this meeting and are on file with the minutes. The Sagacity Interventions, LLC agreement was approved via email vote. However, it was brought to the Board's attention that the name of the agreement had changed since the last meeting and is now called Sapient Initiatives, LLC.

A. Bagley moved, E. Thrash-Sall supported the motion to accept the Sapient Initiatives, LLC agreement as presented at the December meeting with the noted name change.

Motion carried

VII. Interim Executive Director's Report

B. Swiecicki was unable to attend the meeting. J. Troop noted that the pre audit for the HRSA on-site visit is expected to be completed around the beginning of March 2020. This is the reason you will see so many policies coming before the Board to be reviewed and approved. At present, most of the policies state they will be reviewed annually even when there are no changes. One the changes being proposed for many of the policies and procedures is that they are reviewed every three years, unless a change occurs.

VIII. Strategic Planning Committee Summary

The Board Chair asked for feedback from those who attended the Strategic Planning Retreat on Friday, January 10, 2020. Those who attended thought the retreat was beneficial. S. Schwartz specifically

commented on the positive guidance given particularly on the marketing strategy. S. Olson commented that he was pleased with the progressive planning.

The final report was not completed by Lakeview Consultants, but is expected within the next month. Once the report from the retreat is completed, it will be shared with the Board.

IX. Personnel Committee

There was no report from the personnel committee chair. S. Schwartz commented on a matter he had personal knowledge of and it was briefly discussed. It was determined that it was a contractual matter rather than a personnel discussion.

X. Quality and Safety Committee Summary

- a. Credentialing and Privileging Policy**
- b. Access to Clinical Advice Policy**
- c. Infection Control Plan Policy**
- d. Linguistically Competent Care Policy**
- e. Quality Improvement and Quality Assurance Policy**
- f. Yearly QI Calendar**
- g. Quality Work Plan**
- h. Target BP Initiative Work Plan**

E. Thrash-Sall deferred the report to J. Troop as she is more knowledgeable in regards to the presented policies/plan. As noted earlier in the minutes, J. Troop stated that there is and will be a pretty robust schedule of bringing policies/procedures before the Board to review and approve as we prepare for the HRSA on-site visit. She stated that there were no major changes to the presented policies other than changing the review schedule from annually to every three years unless there is a change to the policy.

S. Olson moved, E. Thrash-Sall supported the approval of the policies noted above under a. through e. along with the Yearly QI Calendar, Quality Work Plan and Target BP Initiative Work Plan.

Motion carried.

XI. New Business/Other

- a. 2020 Risk Management Plan**

J. Troop stated that the Clinical Risk Office (CRO) prepared the GHS 2020 Risk Management Plan. As it encompasses the agency as a whole including GCHC, it was brought before this Board for review and approval. J. Troop stated that this Plan is important to the FQHC as it will assist with eligibility of the Federal Tort Claims Act (FTCA). Several of the Board members, including the Chair, stated that they had read the Plan and thought it very comprehensive and one of the best Risk Management Plans they had reviewed.

S. Olson moved, A. Bagley supported the motion to accept the GHS 2020 Risk Management Plan.

Motion carried

XII. Adjourn

S. Schwartz moved, D. Duckett supported the motion to adjourn the meeting.

Motion carried

Meeting adjourned at 1:27 p.m.

Next Board Meeting is scheduled for:
February 28, 2020 @ 1:00 p.m.
725 Mason Street Board Room



Claudyse Holloman, Board Chair

2/28/2020

Date