

GCHC BOARD OF DIRECTORS MEETING MINUTES

March 26, 2021 @ 1:00 p.m. VIA Zoom

Board Members Present via Zoom:

Claudnyse Holloman, Chair; Autumn Bagley, Sam Olson, Steve Schwartz, Erica Thrash-Sall, Yolanda Oliver-Yancey, Angela Essenburg

Board Members Absent:

Kyle McCree, Deborah Duckett,

Guests:

Jean Troop, Executive Director; Glen Chipman, GHS CFO; Karen Riddle, GHS Administrative Assistant

Meeting was called to order at 1:07 p.m. by Claudnyse Holloman, Board Chair.

I. Adoption of Agenda

A. Bagley moved to accept the Agenda as presented, supported by S. Schwartz. *Motion carried*

II. Welcome and Introductions

Introduction of new Board member A. Essenburg. Roll call completed.

III. Public Participation

None

IV. Approval of February 26, 2021 Board Minutes

Y. Oliver-Yancey moved to approve the February 26, 2021 minutes as presented, supported by A. Essenburg. *Motion carried*

V. <u>Finance Committee Summary</u>

- a. FY21 February 2021 Financial Report
- **b.** Contract Summary
- c. Ability to Pay/Sliding Fee Scale
- d. A/R Revenue Cycle Management & Collections Policy

a. G. Chipman reviewed the February 2021 financial report that was recommended for approval by the GCHC Finance Committee. He noted that the total revenue for February 2021 was \$437,032 compared to budget of \$615,187, which is (\$178,155) under budget. The total expenses for February were \$440,505 compared to a budget of \$590,895, which is \$150,390 less than budgeted expenses. The deficit for the month of February was (\$3,473) with a budget of \$24,292. The total actual year-to-date deficit is (\$32,286) compared to the budget of \$121,458.

The Other Expenses page showed that we are under budget by \$3,200. We are over budget in only one category, Machinery and Equipment, with a purchase of \$3,575 with a budget of only \$458. This expense was covered by grants and had no impact on our surplus.



The Balance Sheet shows assets of \$3,733,637 and total liabilities of \$1,033,516 which created a net position of \$2,700,121.

The Days in A/R was reported at 52, which is a spike from 38 in January. A/R% over 120 days went down from 42% in January to 33% in February. We are still experiencing issues with the new Clearinghouse we transitioned to in January. Once things are smoothed out with the transition, numbers should level out to previous reports.

Again, due to the change in the Clearinghouse we were not able to report the Claim Denial Rate for January or February. The Average days to Claim Submission declined from 15 days in January to 11 days in February.

The Cost, Reimbursement & Productivity Statistics page showed Unique Patient Count is at 248 compared to budget of 750; the Medicaid eligible encounters is at 1,022 compared to the budget of 1,531. The productivity for health provider encounters decreased from January to February down to 8.0 per day compared to budget of 12.0; the behavioral health care provider encounters also decreased slightly in February to 7.3 per day compared to a budget of 10.0. Social Worker encounters in February were 4.8 per day compared to a budget of 6.0. The total cost per encounter was \$287 compared to a budget of \$300. There were 18 working days in February 2021.

The total February 2021 revenue of base grants was \$167,458 and \$24,670 for the non-HRSA grants. We are continually looking for new grants to apply for. There was \$7,473 of revenue reported from Alternative Funding Sources.

The last page of the financials is the Reconciliation of Medicaid Wrap Advance Payments in Deferred Revenue sheet which shows the Medicaid Wrap deferred revenue balance is \$798,403. The Medicaid Wrap Balance along with the miscellaneous deferred dollars totals \$798,403. The plan is to begin receiving the wrap payments again at the beginning of the next quarter.

- S. Schwartz moved to accept the February 2021 Financial Packet as presented, supported by E. Thrash-Sall. *Motion carried*
- **b.** G. Chipman discussed the Contract Summary for MPCA COVID-19 Vaccine Administration Funding which will be used to increase access to mobile vaccine administration for the amount of \$64,918. This was for discussion only.
- **c.** J. Troop presented the Ability to Pay/ Sliding Fee Scale with new modifications of the previously passed policy with the change of the nominal fee language removed.
- **d.** J. Troop presented the AR/Revenue Cycle Management & Collections with added language that we are contracted with health plans and third party payers in our region. Waiver for fees within a hardship case was also added.
- Y. Oliver-Yancey moved to approve the Ability to Pay/Sliding Fee Scale and the AR/ Revenue Cycle Management & Collections policies, supported by A. Bagley.

Motion carried

VI. Quality and Safety Summary

- a. Summary of February 2021 Meeting
- b. Quality Improvement and Quality Assurance Policy
- c. Credentialing and Privileging Policy



- a. E. Thrash-Sall presented the Quality and Safety Summary. She presented that at the February 2021 meeting, they had no updates with the Front Desk phone report. They experienced some issues with the phone system that are being resolved for the report. There were two grievances submitted; one related to medication and the other was a customer service complaint. Both grievances were resolved by the Office Manager speaking with the Staff involved about the expectations and professionalism in the workplace.
- b. J. Troop presented the Quality Improvement and Quality Assurance Policy with language changes regarding providers including MD's as well as NP's and to include behavioral health providers as well.
- c. J. Troop presented the Credentialing and Privileging Policy with the addition to the policy that our licensed/certified clinical staff are now included in the National Data Bank Search. A few structural modifications were also made to the policy.
- S. Schwartz moved to approve the Quality Improvement and Quality Assurance & Credentialing and Privileging policies, supported by A. Bagley.

Motion carried

VII. Executive Director's Report

J. Troop stated that beginning April 5, 2021, we will increase provider on-site visits to accommodate demand from patients. We are experiencing patients wanting to be seen in person rather than telehealth visits.

Center Road: Nurse Practitioner Joe will be working 5 days a week, full time, with all on site visits. COVID testing is continuing twice weekly at Center Road. We have completed over 2,400 tests to date and the positivity rates have increased.

GCHC has continued to work in partnership with the Health Department to administer COVID-19 vaccines. We have been approved by HRSA to become a vaccine site and we now have the ability to order from Federal supplies. We are also approved with MPCA and can order from State supplies. GCHC now offers the Johnson & Johnson and Moderna vaccines. We vaccinated 80 individuals at the Flint Odyssey House including all residents and staff with the J&J vaccine. We continue to vaccinate group homes and community partners. We have vaccinated 580 individuals in February and over 1000 individuals total. We will use MPCA dollars to contract a second team and start a mobile vaccine to hit inbound homes and senior sites.

The Board expressed the need for more Marketing in regards to GCHC and vaccine administration. It was discussed to order new masks and GCHC logo vaccine stickers.

HRSA Reporting: UDS report was accepted by the reviewer. We did not have to have an interview or conference this year. We continue to meet and prepare for the OSV. We have created folders and updated them with appropriate labels and information. We have received the names of the reviewers. Site visit is scheduled for May 25, 26, and 27 virtually.

Staffing: RN Care Manager Leann Luke began under the direction of the Medical Director. Kristany Wilmoth began as the Administrative Assistant under the direction of the Executive Director. We have posted for the LPN position.

GCHC has received a HRSA grant called the American Rescue Act Funding – a budget is being prepared for next month's meeting to review.



VIII. Diversity, Equity, and Inclusion

The Board recommended we hire a consultant to speak/train on anti-racism.

E. Thrash-Sall volunteered to create a Google Document for Board members to share potential consultants.

IX. OSV!

a. Chapter 20 Board Composition:

Data shows we are well represented in race and gender in regards to Patient Population and Board Population.

X. Other

- a. Organizational Chart was presented and reviewed.
- S. Schwartz moved to approve the Organizational Chart as presented, supported by A. Bagley. *Motion Carried*

XI. Adjourn

A. Essenburg moved to adjourn the GCHC Board meeting, supported by S. Olson.

The meeting adjourned at 2:12 p.m.

The next Board Meeting is scheduled for: April 23, 2021 at 1:00 p.m. via Zoom	
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Claudnyse Holloman, Board Chair	Date