

GCHC BOARD OF DIRECTORS MEETING MINUTES

April 23, 2021 @ 1:00 p.m.

VIA Zoom

Board Members Present via Zoom:

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

Board Members Absent:

Kyle McCree, Deborah Duckett, Erica Thrash-Sall

Guests:

Jean Troop, Executive Director; Glen Chipman, GHS CFO; Sandy Sweet, GHS Accounting Manager

Meeting was called to order at 1:02 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

III. Public Participation

None

IV. Approval of March 26, 2021 Board Minutes

S. Schwartz moved to approve the March 26, 2021 minutes as presented, supported by S. Olson.

Motion carried

V. Finance Committee Summary

- a. FY21 March 2021 Financial Report**
- b. Budget Amendment**
- c. HRSA ARPAF**
- d. Health Center Program (HCP) Non-Compete Continuation Budget**
- e. Contract Summary**
- f. Fixed Assets Policy**
- g. Grants Management Policy**
- h. Petty Cash Policy**
- i. Federal Funds Payments and Disbursements Policy.**

a. G. Chipman reviewed the March financial packet, and it was discussed. He noted that the total revenue for March 2021 was \$485,114 compared to budget of \$615,187, which is (\$130,072) under budget. The total expenses for March were \$455,453 compared to a budget of \$590,895, which is \$135,442 less than the budgeted expenses. The deficit for the month of March was (\$5,369) with a budget of \$24,292. The total actual year-to-date deficit is (\$2,625) compared to the budget of \$145,750.

The Other Expenses page showed that we are under budget by \$11,726. We are over budget in only one category, Miscellaneous Expenses, with a total of \$1,074 with a budget of only \$208.

The Balance Sheet shows assets of \$3,557,343 and total liabilities of \$944,203 which created a net position of \$2,613,140.

It was explain the finance committee agreed to have the Dashboard Summary graphs presented quarterly rather than monthly. This was decided due to the fact of infrequent fluctuation of the graphs.

The Cost, Reimbursement & Productivity Statistics page showed Unique Patient Count is at 245 compared to budget of 750; the Medicaid eligible encounters is at 1,164 compared to the budget of 1,531. The productivity for health provider encounters decreased from February to March down to 7.5 per day compared to budget of 12.0; the behavioral health care provider encounters also decreased slightly in March to 6.6 per day compared to a budget of 10.0. Social Worker encounters in March had a slight increase from February to 5.1 per day with a budget of 6.0. The total cost per encounter was \$254 compared to a budget of \$300. There were 22 working days in March 2021.

The total March 2021 revenue of base grants was \$179,140 and \$30,742 for the non-HRSA grants. There was \$6,962 of revenue reported from Alternative Funding Sources. G. Chipman emphasized we are continually monitoring all grants to support our expenses where we can.

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 \$703,339. The Medicaid Wrap Balance along with the miscellaneous deferred dollars totals \$710,557. The plan is to begin resuming the wrap payments at the beginning of the next quarter.

Y. Oliver-Yancey moved to accept the March 2021 Financial Packet as presented, supported by A. Bagley.

Motion carried

b. G. Chipman presented the budget amendment which shows the additions of Provider Relief Funding and other grants that have increased revenues and expenses equally. He explained budget amendments will only be presented when grants increase the budget.

S. Schwartz moved to accept the Budget Amendment as presented, supported by Y. Oliver-Yancey.

Motion carried

c. G. Chipman presented the Recovery Act Grant that was awarded totaling in \$1,120,250. It was explained we have sixty days to submit a budget to HRSA detailing how grant dollars will be utilized.

A. Bagley moved to accept the HRSA NOA ARPAF as presented, supported by A. Essenburg.

Motion carried

d. G. Chipman presented the HCP Non-Compete Continuation Budget and it was explained in future meetings it will be presented how the funds are being utilized.

S. Schwartz moved to accept the Health Center Program (HCP) Non-Compete Continuation Budget as presented, supported by A. Essenburg.

Motion carried

e. G. Chipman presented the contract summary:

G. Chipman explained the details of Dr. Pyatt's contract which is effective 5/1/2021 ending on 4/30/2022. The contract maximum is \$239,200 and he shall not exceed 40 hours in a one-week period. He explained his contract has no changes from the previous contract.

G. Chipman also presented the renewal of the agreement with PMG. The agreement will begin on 5/1/2021 and end on 4/30/2022. PMG will be providing credentialing health plan enrollment. The price has increased from the previous agreement; \$899 annual maintenance fee (per provider) and \$499 annual organization maintenance fee (Per Tax ID).

G. Chipman presented the grant/contract with MPCA for additional COVID Vaccine and Testing funding. The term will begin on 4/1/2021 and end on 9/30/2021. GCHC will be paid up to a maximum amount of \$64,918 (\$27,395.40 Federal Funding + \$37,522.60 State Funding). 42.2% of the payment will be received upon signing the agreement and the remaining funds will be paid upon request.

G. Chipman presented the agreement in which PatientPoint provides TV's with educational content in the lobby for patients and the staff break room. She also explained we can create our own content as well regarding our services to share on the devices.

Y. Oliver-Yancey moved to accept Dr. Pyatt's contract renewal as presented, supported by S. Schwartz.

Motion carried

Y. Oliver-Yancey moved to accept Priority Management Group contract renewal as presented, supported by S. Schwartz.

Motion carried

Y. Oliver-Yancey moved to accept the Michigan Primary Care Association contract as presented, supported by S. Schwartz.

Motion carried

f. G. Chipman reviewed the Fixed Assets Policy and noted no changes.

g. G. Chipman reviewed the Grants Management Policy and noted no changes.

h. G. Chipman reviewed the Petty Cash Policy and noted no changes.

i. Federal Funds and Disbursements Policy and noted no changes.

S. Schwartz moved to accept the Fixed Assets, Grants Management, Petty Cash, and Federal Funds and Disbursements policies as presented, supported by A. Bagley.

Motion carried

VI. Quality and Safety Summary

- a. Summary of February 2021 Meeting
- b. Quarterly Peer Review
- c. Quarterly Collaborative Review
- d. Informed Consent Policy

a. J. Troop presented the Quality and Safety Summary. She presented that at the March 2021 meeting they discussed Quarterly Peer Review, Quarterly Collaborative Review and Medical Director Report with Dr. Phung. She also explained they had one safety issue with an employee emailing in a non-secure fashion. She states they presented HIPPA policies with the employee and proper emailing procedures. It was also discussed that we migrated the NexGen practice management EMR system to be hosted by NexGen cloud services and that the migration went well. She states at the meeting they reviewed COVID updates and protocols ensuring the safety of all staff and patients. The committee reviewed the Informed Consent Policy and the Credentialing and Privileging Policy.

b. J. Troop presented the Quarterly Peer Review which is used as an educational opportunity to make sure Providers are meeting quality and required care standards for our patients. Providers review peers chart notes to determine they are meeting all of the elements.

**A.Bagley moved to approve the Quarterly Peer Review, supported by S. Schwartz.
*Motion Carried***

c. J. Troop presented the Quarterly Collaborative Review that Dr. Phung completes each month. Dr. Phung reviews chart notes for all of the providers to make sure they are in compliance. She states details will never be brought forward to the Board unless there were issues.

**A.Bagley moved to approve the Quarterly Collaborative Review, supported by S. Schwartz.
*Motion Carried***

d. J. Troop presented the Informed Consent Policy. She explained the addition to the policy is receiving informed consent from patients to have “simple procedures” such as joint injections performed at the office.

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

VII. Executive Director’s Report

J. Troop states that beginning April 5, 2021 provider on-site hours were increased due to a higher demand of patients wanting on-site visits compared to tele-health. She states we are closely monitoring the COVID-19 infection rate throughout Genesee County and that there was a spike in cases in the community. We had two patients inside the Health Center that ended up being COVID-19 positive. We re-evaluated our COVID-19 protocols to ensure safety for staff and patients.

Center Road building is continuing to increase volume. The office is now open four full days a week with a provider on-site and the other day the provider is available via tele-health. We are continuing our COVID-19 Testing in the parking lots on Tuesdays and Thursdays.

J. Troop states our vaccine supply is plentiful and we are noticing a drop in the demand in the area. She states we are looking at several ways we can mobilize in the community to reach individuals. It was also presented that we have currently stopped administering the Johnson and Johnson per the CDC. 174 Johnson and Johnson vaccines have been administered from us with no complaints or adverse reactions reported. We have tested over 2,400 individuals since the beginning of the year for COVID-19. She states we continue to work with community partners to determine where testing and/or vaccines are needed. To date we have administered over 1,300 COVID-19 vaccines.

J. Troop announced we have an ABO contract nurse beginning on Monday, April 26, to assist with COVID-19 vaccines and testing. She states the overall staff morale is good.

J. Troop congratulated Bridgette Cavette, Behavioral Health Supervisor, and her team for fulfilling 16 units at Berkley Place Apartments. States Bridgette has done a great job with the whole process.

VIII. Diversity, Equity, and Inclusion

C. Holloman reminded board members of the Google Document for potential consultants for discussion at the next board meeting.

C. Holloman congratulated Jean Troop for ensuring and promoting that COVID-19 vaccinations are offered to various communities that are often forgotten about.

IX. OSV!

a. Chapter 15 Finance and Accounting:

J. Troop stated the Board must be informed of all policies and procedures to make informed decisions.

b. Chapter 5 Clinical Staffing:

J. Troop discussed credentialing is a requirement to verify people are who they claim to be and that they have the credentials needed to perform services. Peer Review and Collaborative Review are also used to determine the ability of staff to perform services.

X. Board Officer Elections

a. Chair: Claudnyse Holloman

b. Vice Chair: Yolanda Oliver-Yancey

c. Treasurer: Sam Olson

d. Secretary: Steve Schwartz

**A. Bagley moved to approve the Board Officer Elections as voted, supported by A. Essenburg.
*Motion Carried***

XI. Other

Holloman discussed the Personnel Committee met and discussed various ways the Board can recruit new members and board engagement. She also discussed that the orientation for new board members is to be completed by the Vice Chair.

XII. Adjourn

Y. Oliver-Yancey moved to adjourn the GCHC Board meeting, supported by S. Schwartz.

The meeting adjourned at 2:09 p.m.

The next Board Meeting is scheduled for: June 23, 2021 at 1:00 p.m. via Zoom

Claudnyse Holloman, Board Chair

Date