

**GCHC BOARD OF DIRECTORS MEETING MINUTES**

February 25, 2022

VIA Zoom

Board Members Present via Zoom:

Claudnyse Holloman, Chair; Steve Schwartz, Michael Wright, Patrick Henry, Angela Essenburg

Board Members Absent:

Elizabeth Rushing, Sam Olson, Autumn Bagley, Yolanda Oliver-Yancey, Erica Thrash-Sall, Jorain Hardman

Guests:

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

**Meeting was called to order at 1:06 p.m. by Claudnyse Holloman, Board Chair.**

**I. Adoption of Agenda**

*S. Schwartz moved to accept the agenda as presented, supported by P. Henry.*

*Motion carried*

**II. Public Participation**

None

**III. Approval of January 28, 2022, Board Minutes**

*M. Wright moved to approve the January 28, 2022, minutes as presented, supported by S. Schwartz.*

*Motion carried*

**IV. Finance Committee Summary**

**a. FY22 January 2022 Financial Report**

G. Chipman reviewed the January 2022 financial packet, and it was discussed in detail. He noted that the total revenue for January 2022 was \$608,460 compared to budget of \$586,118. The total expenses for January were \$470,943 compared to a budget of \$555,863. The surplus for the month of January was \$137,517 with a budget of \$30,255. Encounters are going up and expenditures are being managed well. It was a good month.

The Other Expenses page showed the total expenses for January were \$13,155 which is \$5,533 less than budgeted.

Total assets totaled \$4,418,910; total liabilities were \$1,157,592 leaving a total net position of \$3,261,317.

The Cost, Reimbursement & Productivity Statistics page showed Unique Patient Count was 290 compared to budget of 250 for January; the Medicaid eligible encounters was at 1,195 compared to the budget of 1,235, which is the best data since prior to June 2021. The productivity for health provider encounters were 8.6 per day in January compared to budget of 12.0; the behavioral health care provider encounters in January were 6.8 per day, compared to a budget of 8.0. Social Worker encounters in January were 5.1 encounters per day with a budget of 5.0. The total cost per encounter was \$300 compared to a budget of \$324. There were 17.9 working days in January 2022.

The total January 2022 revenue of base grants was \$201,475 with a majority of the money being spent on salaries and wages. The American Rescue Plan Act grant accounts for \$57,728 being utilized in January.

Alternative Funding Sources which show another source of revenue and shows we received \$5,762 of incentive money in the month of January 2022.

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 \$342,978. The Medicaid Wrap Balance total is \$576,275. It was noted that a wrap payment was received in January. It was also pointed out that the correct date on the wrap page should be 1/31/2022 and not 12/31/2021.

**b. Sliding Fee Scale**

The 2022 Sliding Fee Scale was presented and discussed at Finance Committee. This is the consumers' responsibility based on the 2022 poverty guidelines. As in past years, there is \$0 co-pay for up to 100% of poverty.

***S. Schwartz moved to approve the January 2022 Financial Packet and the Sliding Fee Scale as presented, supported by A. Essenburg.***

***Motion carried***

**V. Quality and Safety Summary**

- a. December 2021 Quality Meeting Minutes**
- b. Standards of Care Policy**
- c. Quality Work Plan 2022**
- d. 2021 Diabetes QI**

J. Troop presented the December 2021 Quality Meeting Minutes noting that the information was discussed at last month's meeting. She also presented the Standards of Care Policy which did not change but is due for renewal. Reviewing and approving policies is part of the Operations Site Visit as well as compliance. The Quality of Work Plan 2022 shows the initiatives currently being worked on and the timeframes to incorporate the initiatives. Quality is integrated throughout the organization.

The 2021 Diabetes QI shows the Center's average as 35% with the network average being 33%. In this measure we are looking for a small number. The numbers have improved as we have transitioned back to in-person visits rather than virtual visits.

***S. Schwartz moved to accept the December 2021 Quality Meeting Minutes and the Standards of Care Policy as presented, supported by A. Essenburg.***

***Motion carried***

**VI. Personnel Committee**

**a. Board Recruitment**

As a board, C. Holloman reminded the group that if an at-large member is added then a consumer board member would be needed to follow the bylaw ratios.

**VII. Executive Director's Report**

J. Troop reported that the UDS report, which is an annual compliance measure, has been submitted. There were just three minor questions which were addressed, and we are now awaiting the final approval.

The Medicare Cost Report is in the finalization stage and will be submitted on Monday. This is another area of compliance.

An ABO contract staff moved to a Full Time Employee, Sheila Rickman. Her title is Community Outreach and Care Supervisor. She will supervise staff who coordinate care for those patients who qualify for specialty services.

We were asked to collaborate on a U of M School of Nursing grant to support the mobile health care unit going to the schools. If the grant is awarded, GCHC will supply the NP and the grant will fund the NP to provide services. This could be an opportunity to reach the child population as patients at the health center.

The Executive Director is sitting on a newly formed MI-PDO Prevent/Prescription Opioid Overdoes-Related Deaths council. This is a MDHHS grant and includes Genesee County.

There has been a decrease in COVID-19 testing and vaccinations. The numbers in the county are decreasing. However, we do plan to continue to have events as the weather permits to increase the numbers in the community that we reach.

We received about 4,500 N-95 masks from the federal government, and we are working to distribute those to the Center's patients and group homes.

As previously discussed, the employee vaccine mandate is February 28, 2022. Staff choosing not to receive the vaccine or submit an exemption, will be furloughed.

We are looking at the feasibility of a marketing position. It was approved at the Finance Committee to move forward with posting and hiring the position. The Executive Director stated that she will be moving forward with this initiative.

N. Holloman stated that the board is available for assistance and if there is anything they can do to legislatively support GCHC at a state or federal level, please let them know.

**VIII. OSV!**

UDS and Medicare Cost Report as discussed above is part of the OSV! Also, the Sliding Fee Scale is part of the compliance to ensure that we are removing barriers to our patients. J. Troop discussed the scale in more detail stating that it is an annual compliance requirement that is reviewed and approved at the board level.

**IX. Other**

The Board Chair mentioned that since the board members are listed on the website that you may receive consumer complaints from time-to-time, and these can be directed to the Executive Director for follow-up.

**X. Adjourn**

*C. Holloman entertained a motion to adjourn the meeting, so moved by S. Schwartz.  
Motion carried*

The meeting adjourned at 1:39 p.m.