

GCHC BOARD OF DIRECTORS MEETING MINUTES

April 22, 2022

VIA Zoom

Board Members Present via Zoom:

Claudnyse Holloman, Chair; Autumn Bagley, Angela Essenburg, Jorain Hardman, Patrick Henry, Sam Olson, Elizabeth Rushing, Steve Schwartz, Erica Thrash-Sall, Michael Wright

Board Members Absent:

Yolanda Oliver-Yancy

Guests:

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

Meeting was called to order at 1:00 p.m. by Claudnyse Holloman, Board Chair.

I. Adoption of Agenda

S. Schwartz moved to accept the agenda as presented, supported by E. Rushing.

Motion carried

II. Roll Call

Board Chair called for a roll call, all present and absent were noted.

III. Public Participation

None

IV. Approval of March 25, 2022, Board Minutes

M. Wright moved to approve the March 25, 2022, minutes as presented, supported by S. Schwartz.

Motion carried

V. Finance Committee Summary

a. FY22 March 2022 Financial Report

G. Chipman reviewed the March financial packet, and it was discussed in detail. The total revenue for March 2022 is \$571,496 compared to budget of \$586,118, which is \$14,621 under what is budgeted. The total expense for March 2022 is \$495,455 compared to a budget of \$555,863, which is \$60,408 less than the budgeted expenses. The surplus for the month of March is \$76,042 compared to the budgeted \$30,255. The surplus year to date is \$446,859 compared to a budget at this time of year at \$181,531. Medicaid and the HRSA grant both exceeded what was budgeted for March which has not happened in quite some time. A couple of the expenditures were over budget which is expected in wages when you have more revenue and higher encounters.

The Other Expenses page showed the total expenses for March is \$27,020 which is \$8,832 more than budgeted. This is mostly due to the software licensing and maintenance fees and when the invoices are due and paid as the cost is spread over the 12-month period. The balance sheet looks excellent. The total net position is \$3,246,430. This is a great balance sheet.

The days in A/R is 34 which is good as we continue to meet the goal of less than 30 days. The percent over 120 days is 34% with a goal of less than 20%. This has decreased significantly from previous months. The billing team is doing an excellent job on catching this up while facing staffing challenges.

The claim denial rate ticked up just a percentage point and sits at 5% which is below the goal of less than 7%. The average days to claim submission is under the goal of less than 14 days and sits at 10.

The Cost, Reimbursement & Productivity Statistics page showed Unique Patient Count was 270 compared to budget of 250 for March; the Medicaid eligible encounters was at 1,315 compared to the budget of 1,235. This is the most we have seen in a long time, if ever. The productivity for health provider encounters is 8.1 per day in March compared to budget of 6.6; the behavioral health care provider encounters in March is 6.2 per day, compared to a budget of 5.5. Social Worker encounters in March is 5.0 encounters per day with a budget of 4.1. The Medical Director continues to exceed encounters showing 10.05 in March compared to a budget of 5.06. Again, the total encounters are as high as they have ever been at 1,801 in any given month. The total cost per encounter is \$275 compared to a budget of \$324 which is in direct correlation to the total number of encounters. There were 22 working days in March 2022.

The total March 2022 revenue of base grants is \$135,747. The American Rescue Plan grant continues to be the majority with a total of \$65,091. The total Non HRSA grants totaled \$31,663 in March 2022 with a year-to-date total of \$188,350.

Alternative Funding Sources page shows we received \$5,284 of incentive money in March 2022 with a year-to-date total of \$94,702.

The Reconciliation of Medicaid Wrap Advance Payments in Deferred Revenue sheet which shows the Medicaid Wrap that was recognized is \$95,990. There is a balance of \$174,722 and the year-to-date balance as of March 31, 2022, is \$366,129.

A board member asked if Glen could expand a little bit more on how this was such a great month as everything seemed to be up. He stated that the Center is definitely ramping up with higher volume, the 22 operating days was also a factor, as well as the ARPA grant absorbing just over \$65,000 in operating expenditures to allow us to grow the business. It was an encouraging month.

There was also some discussion on the Opioid crisis and if the Center is utilizing any related funds from grants. Jean stated that GCHC works closely with Carrie Chanter, who is the director of co-occurring services on the GHS side. She is able to assist us in obtaining the grants and we do anticipate that GCHC will receive some funds from the Opioid grants.

The Executive Director presented the HRSA Notice of Award stating that it is for year ten. The total allotment for the base grant is \$1,914,198.00 and the amount for this particular NOA is \$1,435,649.00. In a couple of months another NOA will be distributed with the additional funds.

***E. Rushing moved to approve the FY22 March 2022 financial packet as presented as well as approve the HRSA NOA in the amount of \$1,435,649.00, supported by A. Essenburg.
Motion carried***

VI. Quality and Safety Summary

- a. February 2022 Quality Meeting Minutes**
- b. Policy for Medication Assisted Treatment Programs**
- c. FY22/Q2 Peer Review Audit Results**
- d. CY22/Q1 Medical Director/Collaborating Provider Chart Review**

a. J. Troop presented the Quality and Safety summary. The February 2022 Quality Committee minutes were presented, and it was noted that the details were discussed at the last Board meeting. The Committee met in March

and discussed the Covid response and how GCHC is moving forward with the endemic phase. The Committee also discussed the peer and collaborative provider reviews.

b. The Medication Assisted Treatment Programs policy was discussed. This policy was revised to create procedures to match the Vivitrol therapy services and Suboxone therapy services. Moving forward our goal as we revise policies and procedures is to ensure that they include the entire care team to meet the patient needs.

c. Dr. Phung presented the FY22/Q2 Peer Review Audit Results. Dr. Phung stated that he reviews with the practitioners as well as Dr. Pyatt on a quarterly basis chart documentation and completeness. This period covered January 1, 2022, through March 30, 2022. The elements reviewed this quarter were the adequate establishment of the diagnosis(es), the management adequately reflecting the diagnosis(es), the medications prescribed coinciding with the diagnosis(es), and the mode of follow-up adequate with the conditions of the exam. The results were excellent and reflected 100% of the standards being met. In the future, Dr. Phung stated he will plan to meet certain benchmarks related to the UDS measurements.

d. The memo stating that Dr. Phung did complete the quarterly collaborating provider chart review was included with the board packet .

***E. Rushing moved to accept the February 2022 Quality Meeting Minutes as presented and to approve the Medication Assisted Treatment Programs policy, supported by A. Bagley.
Motion carried***

There was a question on the policy. J. Troop explained that this policy has been in place, but it was a combined inclusive of Vivitrol and Suboxone and these two things needed to be separated as different procedures. So, what was presented today was changed to better explain our current procedures.

VII. Personnel Committee

a. Board Officer Elections

J. Troop explained that the Personnel Committee does not meet until after this Board meeting so there was not a formal presentation; however, the Board elections for Chair, Vice Chair, Treasurer, and Secretary do need to occur at the April Board meeting per our guidelines.

C. Holloman explained the roles, time commitments, and responsibilities of each Board Officer's term.

The Board Chair called for nominations for Board Treasurer. S. Schwartz nominated Sam Olson for Board Treasurer. No additional nominations were made. Sam Olson accepted.

The Board Chair called for nominations for Board Secretary. S. Schwartz responded that he would accept continuing the role of Board Secretary. No other nominations came before the Board. Steve Schwartz accepted.

The Board Chair called for nominations for Board Vice Chair. C. Holloman nominated Autumn Bagley for Board Vice Chair. No other nominations came before the Board. Autumn Bagley accepted.

The Board Chair called for nominations for Board Chair. S. Schwartz nominated C. Hollman for Board Chair.

Prior to calling for the vote on the slate of Board Officers, C. Holloman noted that a correction from the June 25, 2021, minutes is necessary as when Yolanda Yancey-Oliver's and Claudnyse Holloman's terms were renewed, it was written in the minutes the renewal date was for one year due to a typo and it the memberships should have been for three years as written in the by-laws.

*A. Essenburg moved to extend the board memberships for Yolanda Oliver-Yancey and Claudnyse Holloman for two additional years to meet the three-year requirement in the by-laws, supported by S. Schwartz.
Motion Carried*

*E. Rushing moved to accept the slate of Board Officers as nominated for a term as stated in the GCHC By-Laws: Chair, Claudnyse Holloman; Vice Chair, Autumn Bagley; Secretary, Steve Schwartz; and Treasurer, Sam Olson; supported by M. Wright.
Motion Carried*

VIII. Executive Director's Report

J. Troop presented her report. Jean reminded the current and new board members that there are positions available to join any/all the board committees and in particular Personnel and Quality committees.

The UDS report has been sent and accepted through HRSA with no changes. From our OSV point of view, we are following the grant requirements. The Medicare Cost Report was also submitted on time and accepted by Medicare with no changes which is another HRSA requirement. The Leadership Team went to a DEI workshop held by MPCA. It was a 3-hour workshop with great interactive speakers that gave the team a renewed sense of the DEI meaning. One of the GCHC managers is going to head up a DEI staff committee to ensure that our policies and procedures meet total inclusion.

The volume at the health center has increased. We are seeing more patients as well as new patients coming in. Next month she will share with the Board a report on the retention rate.

J. Troop reminded the Board that Gail Johnson, Psych NP, will be coming back to GCHC at the end of the May.

Continuing to build on our management team, the GCHC Finance Committee gave the ED the approval to move ahead with researching the Business Operations Supervisor position to allow the Business Operations Manager to focus on leadership activities versus managing the front desk staff. This will also allow us to prepare for the growth of the expansion at the Center Road location as well as the new Center for Children's Services building.

The Covid testing has decreased but to date we have administered 2,474 tests and given 3,070 vaccines. We do continue to supply the community with at-home testing kits as well as PPE. We also continue to screen all staff based on MIOSHA rules as we continue to remain cognizant of any changes and adjusting policy, as necessary.

In regard to marketing and outreach, a commercial has been produced and we are also part of the health program on Channel 25. J. Troop will share the link.

There were four mobile events in April. There was one yesterday at Genesee Health Plan and we were able to administer 39 vaccines and distributed 16 Narcan kits with training. There are four events planned for May.

There has been some additional work done on the expungement request made at last Board meeting. J. Troop has contacted the GHS Jail Liaison who is inquiring with staff to assist in facilitating. She has also reached out to Michigan United and Greater Flint Health Coalition.

The Chair asked what the plan was for purchasing the furniture and equipment for the new children's building would be. G. Chipman stated that most of the budget will come from the GHS budget and/or fundraising efforts. Has there been a plan for an organizational chart as it relates to that location? J. Troop will ensure that one is developed.

S. Schwartz asked if there should be a discussion if the Board is in favor of having a health center at the Children's Building location. J. Troop stated that it has been discussed in detail; however, there will need to be discussions and a development of a budget. The plan is to open the building in mid-August, but the health center will not be ready until about October 2022. There are still many pieces on the health center's end that need to happen before they can occupy the site per HRSA guidelines.

There was a discussion on GCHC being the health center in the new Center for Children's Intensive Services (CCIS) building. C. Holloman stated that she had a discussion with the CEO of GHS regarding the FQHC chosen to be inside the CCIS building would be Genesee Community Health Center. As it was determined that there are several questions to be answered, more work will be done and brought back to this Board.

IX. Diversity, Equity, and Inclusion

E. Thrash-Sall asked to determine when the Board would like education on DEI. The targeted date is determined to be October 2022 during a regularly scheduled board meeting.

X. OSV!

As mentioned earlier in the meeting, OSV includes the NOA approval. The Board approving the NOA puts us in compliance with HRSA and allows finance to draw down on the grant funds as expended. J. Troop also stated that she requested approval from the Finance Committee to pursue a HRSA grant opportunity in the amount of \$60,000 to add to the supplemental America Rescue Act Plan funding. If we are awarded, she will bring that NOA to the GCHC Board for approval of accepting the dollars.

XI. Other

There was a request from a board member to review the date and time of GCHC Board meetings on Friday afternoons. A discussion took place, and it was decided to keep the Friday at 1:00 p.m. schedule for the time being.

XII. Adjourn

***A. Bagley moved to adjourn the meeting, supported by E. Rushing.
Motion carried***

The meeting adjourned at 2:10 p.m.

Respectfully submitted by Karen Riddle, GHS Office Manager of Business Operations