



GCHC BOARD OF DIRECTORS MEETING MINUTES
May 27, 2022
VIA Zoom

Board Members Present via Zoom:

Claudnyse Holloman, Chair; Elizabeth Rushing, Autumn Bagley, Patrick Henry, Steven Schwartz, Michael Wright, Yolanda Oliver-Yancy.

Board Members Absent:

Jorain Hardman, Sam Olson, Erica Thrash-Sall, and Angela Essenburg.

Guests:

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

Recording Secretary; Lori TerBush, Administrative Assistant

Meeting was called to order at 1:01 p.m. by Claudnyse Holloman, Board Chair.

I. Adoption of Agenda

Autumn Bagley moved to accept the agenda as present, supported by Elizabeth 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 April 22, 2022, Board Minutes

S. Schwartz moved to approve the April 22, 2022 minutes as presented, supported by A. Bagley. Motion carried.

V. Finance Committee Summary

a. FY22 April 2022 Financial Report.

G. Chipman reviewed the April financial packet, and it was discussed in detail. The total revenue for April 2022 is \$574,032 compared to budget of \$586,118. Expenditures were

\$485,653 compared to budget of \$555, 863. Consequently, we have a surplus in month of April of \$88,378, about \$58,000 better than budget. Year to date, we have a surplus just over \$323,000. It was a good month with a fair amount of the surplus accomplished through grant funding.

The other expenditures are within budget, with the exception of the \$2,530 under the Prior Year Expense Adjust line item. This is a settlement amount from the Greater Flint Mental Health Facilities for rent paid that exceeded expenditures at the end of the year.

The balance sheet showed there was \$4,705,692 in assets and 1,370,874 in total liabilities. The unrestricted fund balance is \$2,193,395 to date.

The unique patient count is under budget for April with 201 unique patients. The year to date UPC (unique patient count) is 3,088 which is slightly less than the budgeted number of 3,250. There was discussion regarding increasing patient counts by utilizing the ad campaigns and outreach.

Medicaid eligible encounters were down in April compared with March as expected since there were 22 operating days in March and only 19 in April. Productivity is being maintained with our medical nurse practitioners are sitting at 8.7 compared to a budget of 7.9 in April. The medical director is budgeted at 6.07 and exceeded that in April with 9.32 encounters per day. The Behavioral Health practitioners' productivity dropped to 5.9 in April compared to a budget of 6.6. The social workers maintained 5 encounters per day compared to a budget of 4.9. Total encounters per day for April were 7.0 with a budget of 6.7. The total cost per encounters for April was \$308. The total revenue for the base grants in April was \$213,907 which is used to offset the costs of operations. The amount utilized from the American Rescue Plan was \$57,711. G. Chipman recommended using less of this grant in the next few months as operations are doing well and the timeframe to use the remaining \$390,000 is April 2023. The total amount for the Non-HRSA grants for April was \$28,676.

There was 18,453 collected in April from the HEDIS incentive and \$4,259 from PCMH for a monthly total of \$22,712.

b. GHS Financial Audit Ending September 30, 2021.

G. Chipman reviewed the FY2021 GHS financial audit in detail, which includes GCHC as part of the organization. The packet included a copy of the GHS Audit WRP Up for the Year Ended September 2021, the GHS Single Audit Act Compliance, and the GHS Financial Statements as completed by the BDO. The objective of the audit is to obtain reasonable, not necessarily absolute but reasonable assurance that the financial statements are good and free from material misstatements. They issued an unmodified opinion on the findings, meaning that they are free from material misstatements. They also issued an unmodified opinion on the single audit report, which includes the schedule of expenditures of federal awards and is saying that all of the grant monies are being expended, as they should and that our internal

controls are appropriate. There were no corrected or uncorrected misstatements and in the auditing firm's opinion, everything is stated, as it should be. Internal controls showed no deficiency or material weaknesses. G. Chipman stated that the audits were both very good.

Michael Wright moved to approve finance report for April 2022 and receive the GCHC audit, which is included in the GHS finance audit for 2021, supported by Elizabeth Rushing. Motion carried.

C. CONTRAST SUMMARY (on file with minutes):

The contract summary was presented and discussed. Renewal: Dr. David Pyatt: The contract renewal from May 1, 2022 through April 30, 2023 at a maximum rate of \$239,200. There was a discussion regarding the rate and lack of change in rates over the past few years. The rates have been reviewed and will continue to be evaluated as necessary.

RFP/RFQ/Procurement: Sedgewick and Ferweda Architects have been awarded through the RFP process to provide architectural services relating to the expansion at the new 2298 S Center Road location. The services are expected to begin June 1, 2022 and be completed around September 2023. The total cost of the services shall not exceed \$40,000. This is a HRSA funded project.

A discussion followed regarding the bidding process and whether or not this is the same agency used to complete the Center for Integrated Children's Services building. J. Troop stated that this project was based on the RFP bidding process and Sedgewick and Ferweda scored the highest based on the criteria. She will determine if this is the same agency and notify the GCHC Board if it is. The Board would like a list of those who submitted a proposal for the project. It was also noted that the GCHC had been awarded HRSA Capital grant in the amount of \$547,190. GCHC is using this for the 2,500 square foot expansion of the GCHC clinic located at 2298 S Center Road to begin as early as June 1, 2022 and extend through September 30, 2023.

E. Rushing moved to approve the contract for Dr. David Pyatt as presented, supported by A. Bagley. Motion carried.

A. Bagley preliminarily moved to approve the RFP award to Sedgewick & Ferweda Architects to provide architectural services for 2298 S Center Road expansion, provided they are not the same agency that provided services for the CCIS building, supported by E. Rushing. Preliminary Motion Carried.

P. Henry moved to accept the HRSA Capital Grant award in the amount of \$547,190 for the 2,500 foot expansion of the 2298 S Center Road clinic, supported by Y. Oliver-Yancy. Motion carried.

BUDGET: Grant year budget starts 5/1/2022 and ends 4/30/2023. The Grant Year budget was presented. The estimated total expenses are \$6.3 million and the total revenue is \$6.6 million, with an anticipated surplus of \$269,693 for the grant year. Motion made to accept the grant year budget by E. Rushing, seconded by A. Bagley. Motion carried.

Quality and Safety Summary

Jean presented the Quality and Safety summary including the March meeting minutes, quality measures and review of the Patient Discharge Policy. The UDS quality measures for the first quarter of 2022 were reviewed and shows an increase in quality which can be attributed to more in person appointments. The patient satisfaction surveys were also discussed and it was noted that Center City had about 40 completed surveys compared to 3 at Center Road for a month time period. It was discussed on how the numbers could be increased. J Troop will bring the results of the surveys to the next Board Meeting. S. Schwartz moved to approve the March Quality Committee Minutes and approval of the Patient Discharge Policy, supported by A. Bagley. Motion carried.

A. Personnel Committee

None.

B. Executive Director's Report

Jean introduced Lori TerBush as the new Administrative Assistant. Lori has been with GCHC for 8 years and applied for this position and we have put her in that position. Congratulations Lori! Gail Johnson returned to GCHC on 5/23/2022. J. Troop explained that the psych NP numbers were down on the productivity due to a family emergency and the NP was out of the office for four weeks and the other NP left the agency at the end of April.

As previously discussed at the March Board meeting, the application for the \$60,000 HRSA grant has been submitted and we are hopeful of receiving the entire amount.

Volume of patients at the health center continues to increase. Overall, the unduplicated patients look to be on track for about 4,256, which is trending up since 2017.

GCHC has performed 2,482 COVID tests and 3,160 COVID vaccines. GCHC participated in an event yesterday at Churches without Walls in coordination with the Greater Flint Health Coalition where we gave 5 vaccines. There are several activities planned for future events. The outreach team is out in the community promoting Narcan training, vaccinations, and distribution of at home testing kits and masks along with making sure that everyone knows what services we provide.

GCHC was invited by the Greater Flint Health Coalition to participate in the next round of commercials for the COVID vaccine, along with Hamilton Clinic and two other health systems.

We are revising our health screening policy for staff, so staff no longer has to do the kiosk when checking in everyday but they still have to self-report any symptoms. We are also lightening up our policies on patients coming into the health center. They are still doing

their screening via check in but we are no longer asking the same questions at the door and not taking temperatures, which is helping the flow of patients.

We are watching the end of the pandemic closely, which will be a significant transition once the public health emergency ends. It does not appear as it will end in July as the Federal Government would have had to give the state a 60-day notice, State has indicated no notice received. So anticipating it will be in August. In the meantime we are putting some procedures and plans in place to make sure that we plan for this change. We will educate patients regarding redeterminations and insurance addresses up to date in MIBridges so that they do not get cutoff from Medicaid benefits. This could have a significant impact if we are not careful.

C. Diversity, Equity and Inclusion

None.

D. OSV!

Jean stated that OSV requirements include monthly board meetings and reviewing the audits as presented at today's meeting.

E. Other

None.

F. Adjourn

The meeting adjourned at 1:59 p.m.

Respectfully submitted by Lori TerBush, GCHC Administrative Assistant.