

The County of Santa Cruz
Integrated Community Health Center Commission
MEETING AGENDA

September 5, 2019 @ 11:00 am

Meeting Location: 1430 Freedom Blvd., Suite A, Atrium Meeting Room, Watsonville CA 95076
 1939 Harrison Street, Suite 211, Oakland, CA 94612

ORAL COMMUNICATIONS - Any person may address the Commission during its Oral Communications period. Presentations must not exceed three (3) minutes in length, and individuals may speak only once during Oral Communications. All Oral Communications must be directed to an item not listed on today's Agenda, and must be within the jurisdiction of the Commission. Commission members will not take actions or respond immediately to any Oral Communications presented, but may choose to follow up at a later time, either individually, or on a subsequent Commission Agenda.

1. Welcome/Introductions
2. Oral Communications
3. August 1, 2019 Meeting Minutes – Recommend for Approval
4. Service Area Review – Recommend for Approval
5. Quality Management Committee Update
6. Financial Update
7. CEO Update

Action Items from Previous Meetings:

Action Item	Person(s) Responsible	Date Completed	Comments
Review and Visit metrics annually, include IBH in future reviews.	Julian		
Raquel to research Dientes survey company and see how expensive it is and report back to the commission.	Raquel		
Julian to add expenditure in the "Impacts" section of the fiscal report.	Julian		
Add column and show comparison data to state and national averages.	Raquel		
Bring updated corrected UDS report.	Raquel		
New Calendar with back up meeting dates.	Mary		

Next meeting: October 3, 2019 11:00 am- 1:00 pm
 1080 Emeline Ave., Bldg., D (DOC Conference Room, 2nd Floor) Santa Cruz, CA 95060

The County of Santa Cruz Integrated Community Health Center Commission

Minute Taker: Mary Olivares

Minutes of the meeting held August 1, 2019

Attendance	
Rahn Garcia	Member
Marco Martinez-Galarce	Member
Dinah Phillips	Member
Len Finocchio	Member
Caitlin Brune	Member
Amy Peeler	County of Santa Cruz, Chief of Clinics
Julian Wren	County of Santa Cruz, Administrative Services Manager
Mary Olivares	County of Santa Cruz, Administrative Aide
Meeting Commenced at 11:11 am and Concluded at 12:47 pm	
1. Excused/Absent:	
Absent: Gustavo Mendoza Absent: Bertha Villalobos Excused: Pamela Hammond Excused: Christina Berberich Excused: Raquel Ramirez Ruiz	
2. Welcome/Introductions	
Amy introduced our new Acting Chief Medical Officer, Tyler Evans to the Commission. Amy stated that Gail Newel, Health Officer will be at our next meeting.	
3. Oral Communications:	
No oral communications	
4. August 1, 2019 Meeting Minutes - Action item	
Review of August 1, 2019 Meeting Minutes - Recommended for Approval. One change to minutes was to correct the spelling of Commissioner Caitlin Brune first name. Dinah moved to accept, Marco second, and the rest of the members present were in favour.	
5. Health Center Activities and Achievements	
Amy stated once a year we need to look at the health center activities and achievements, this shows what goals are submitted to the board. Amy handed out information on Clinic services along with budget information. Some of the goals for this coming year are to purchase the street medicine van, expanding women's health services OBGYN, resources for travel medicine, and expanding wellness services. There was much discussion on the travel clinic and how that would work.	
6. Safety net presentation	
Len presented the preliminary findings of the Safety Net Landscape Assessment. The project goals are to assess access to ambulatory care medical services for Medi-Cal and indigent care patients and potential excess demand for services among this population and to identify issues within the safety net "ecosystem" (e.g. Kaiser's arrival) and leadership perspectives about needed investments and-priorities for the future. Len gave a lengthy presentation with a lot of information.	
7. Quality Management Committee - Approval	
Amy gave an update and stated at the last peer review meeting the Santa Cruz County Coroner came and presented information to our peer review committee. Amy also stated that the Emeline Clinics staff celebrated teamwork, amazing changes and incredible partnerships with co-workers at 1080 by hosting a barbeque potluck! Awards were given out, introductions were made and fun was had by all.	
8. Financial Update - Approval	
Julian stated that he is in the process of close out for the end of fiscal year. He gave a snapshot of revenue for 17/18 compared to 18/19 actual revenue. He gave an update on visit metrics, and FQHC-Defined visits and patients reports and stated overall clinic services FQHC defined visits down 8% YTD compared to last year.	
9. CEO update	
Amy reminded committee that our next Commission meeting will be held in Watsonville. She also stated we are in the process of hanging up photos at our Emeline Clinic. Amy also stated that HRSA requirements have changed a bit and that she will report back at our next meeting. Commission Committee would like an updated calendar to list back up meeting dates.	
Action items:	

- | |
|---|
| <ul style="list-style-type: none">• Commission Committee would like an updated calendar to list back up meeting dates.• Some of HRSA requirements have changed a bit Amy will report back at our next meeting. |
| |

Next Meeting: August 1, 2019 11:00 am - 1:00 pm
1080 Emeline, Santa Cruz, CA

Minutes approved _____ / / _____
(Signature of Board Chair or Co-Chair) (Date)

INTEGRATED COMMUNITY HEALTH CENTER COMMISSION ANNUAL SERVICE AREA REVIEW

September 5, 2019

1

Commission's Annual Service Area Review

- **Goal:** To define and review the boundaries of the catchment area to be served, including the identification of the medically underserved population(s).
- **Who:** Commission
- **Why:** To ensure services provided are available and accessible to residents promptly and appropriately. To maintain compliance with the Health Resources & Services Administration (HRSA).
- **When:** Occurs once a year

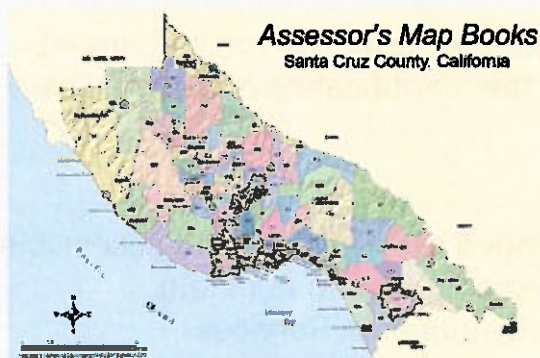
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Evaluation Process

- Review and define service area
- Review map of medically underserved populations
- Review locations of health centers
- Review service area zip codes declared on HRSA Form 5B: Service Sites
- Review most recent Uniform Data Systems (UDS) report data (including current health center patients' zip codes)
- Review Analysis & Conclusions

3

What is our service area?



Due to the fact that we are a Public Agency, all of our health centers are committed to serving patients living within Santa Cruz County. Thus, we continue to define our service area by the County's borders.

Borders:
 San Mateo County (North)
 Santa Clara County (East)
 San Benito County (South-East)
 Monterey County (South)
 Pacific Ocean (West)

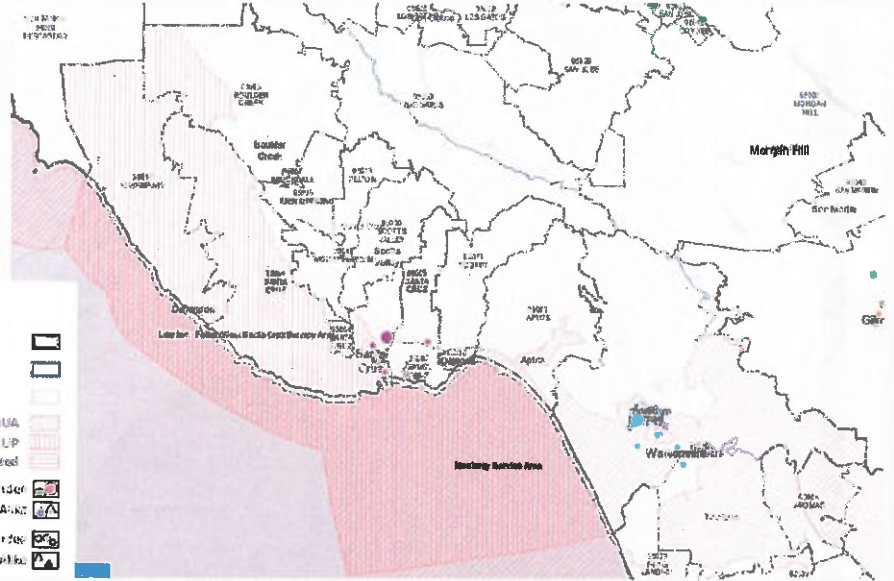


4

Where are our medically underserved areas and/or populations?

Legend

- States
- Countries
- ZCTAs
- Medically Underserved Areas/Populations (MUA/P)
 - MUA
 - SLP
 - Governor Designated
- Health Center Administrative Locations
 - HCF A-4136
 - HCF A-4137
 - HCF A-4138
 - HCF A-4139
- Health Center Service Delivery Sites
 - HCF A-4136
 - HCF A-4137
 - HCF A-4138
 - HCF A-4139



5

Where are our health centers?

North County:

- Emeline Health Center
 - 1080 Emeline Bldg. D
 - Santa Cruz, Ca 95060
- Homeless Persons' Health Project
 - 115-A Coral Street
 - Santa Cruz, Ca 95060

South County

- Watsonville Health Center
 - 1430 Freedom Blvd. Suite C & D,
 - Watsonville, Ca 95076

6



2018 UDS Report – Patients by Zip Code

- UDS – A standardized reporting system that provides consistent information about health centers such as: socio-demographic characteristics of people served, types of services provided, etc.

- Patient zip codes listed on the 2018 UDS report:

93635, 93901, 93905, 93906, 93907, 93933, 93940, 93955, 95001, 95003, 95004, 95005, 95006, 95007, 95010, 95012, 95017, 95018, 95019, 95023, 95033, 95039, 95060, 95061, 95062, 95063, 95064, 95065, 95066, 95067, 95073, 95076, 95077

- Highlighted zip codes reflect zip codes also listed on HRSA Form 5B

ZIP CODE	MANAGEMENT	ADMINISTRATIVE	CLINICAL	OTHER	TOTAL
93635	8	7	6	5	26
93901	4	13	1	1	29
93905	4	28	7	3	42
93906	44	171	11	12	238
93907	10	78	13	2	103
93933	24	184	10	1	219
93940	28	107	16	8	159
93955	9	10	7	1	27
95001	11	173	11	1	206
95003	45	12	4	1	62
95004	11	17	1	1	30
95005	16	105	17	1	139
95006	18	127	11	1	157
95007	14	8	7	1	30
95010	7	14	7	1	29
95012	23	77	11	1	112
95017	147	108	10	1	266
95018	27	70	10	1	108
95019	101	200	104	21	426
95023	17	10	24	1	52
95033	5	11	1	1	18
95039	11	139	25	7	182
95060	36	142	11	1	190
95061	1	1	1	1	4
95062	11	78	11	1	101
95063	11	11	1	1	24
95064	11	11	1	1	24
95065	11	11	1	1	24
95066	11	11	1	1	24
95067	11	11	1	1	24
95073	11	11	1	1	24
95076	11	11	1	1	24
95077	11	11	1	1	24

9

All Zip Codes Listed on 2018 UDS Report

Zip Code	# of patients in 2018	Zip Code	# of patients in 2018	Zip Code	# of patients in 2018
93635	15	95006	275	95062	1305
93901	26	95007	35	95063	95
93905	56	95010	297	95064	30
93906	97	95012	147	95065	214
93907	72	95017	31	95066	269
93933	27	95018	334	95067	14
93940	18	95019	937	95073	299
93955	22	95023	32	95076	7442
95001	41	95033	63	95077	125
95003	426	95039	115	Other Zip Codes	367
95004	101	95060	2685		
95005	243	95061	121	Total patients	16,376

10

UDS zip codes currently listed on HRSA Form 5B

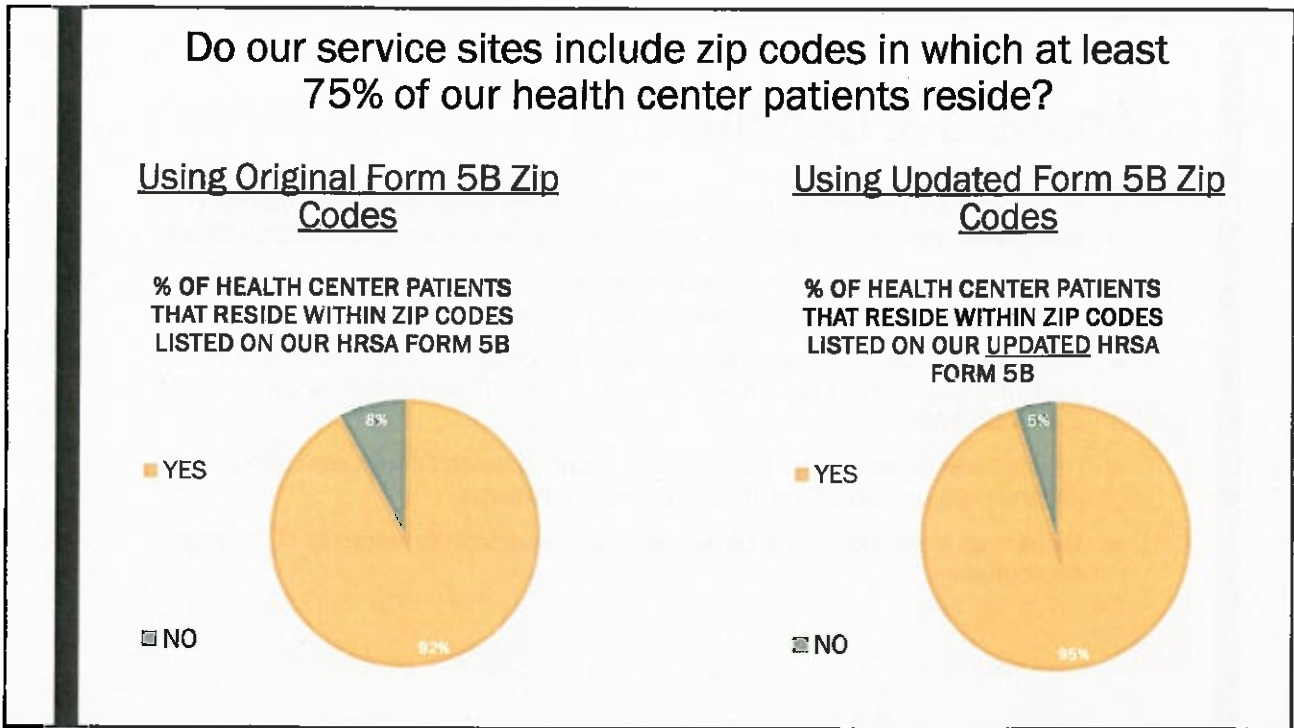
Zip Code	# of patients in 2018	Zip Code	# of patients in 2018
95001	41	95061	121
95003	426	95062	1305
95005	243	95063	95
95006	275	95064	30
95010	297	95065	214
95017	31	95066	269
95018	334	96067	14
95019	937	96073	299
95060	2685	95076	7442

11

Recommended Edits to HRSA Form 5B Given 2018 UDS Data

Zip Code	# of patients in 2018	Zip Code	# of patients in 2018
95001	41	95061	121
95003	426	95062	1305
95005	243	95063	95
95006	275	95064	30
95010	297	95065	214
95012	147	95066	269
95017	31	96067	14
95018	334	96073	299
95019	937	95076	7442
95039	115	95077	125
95060	2685	Other Zip Codes	367

12



13

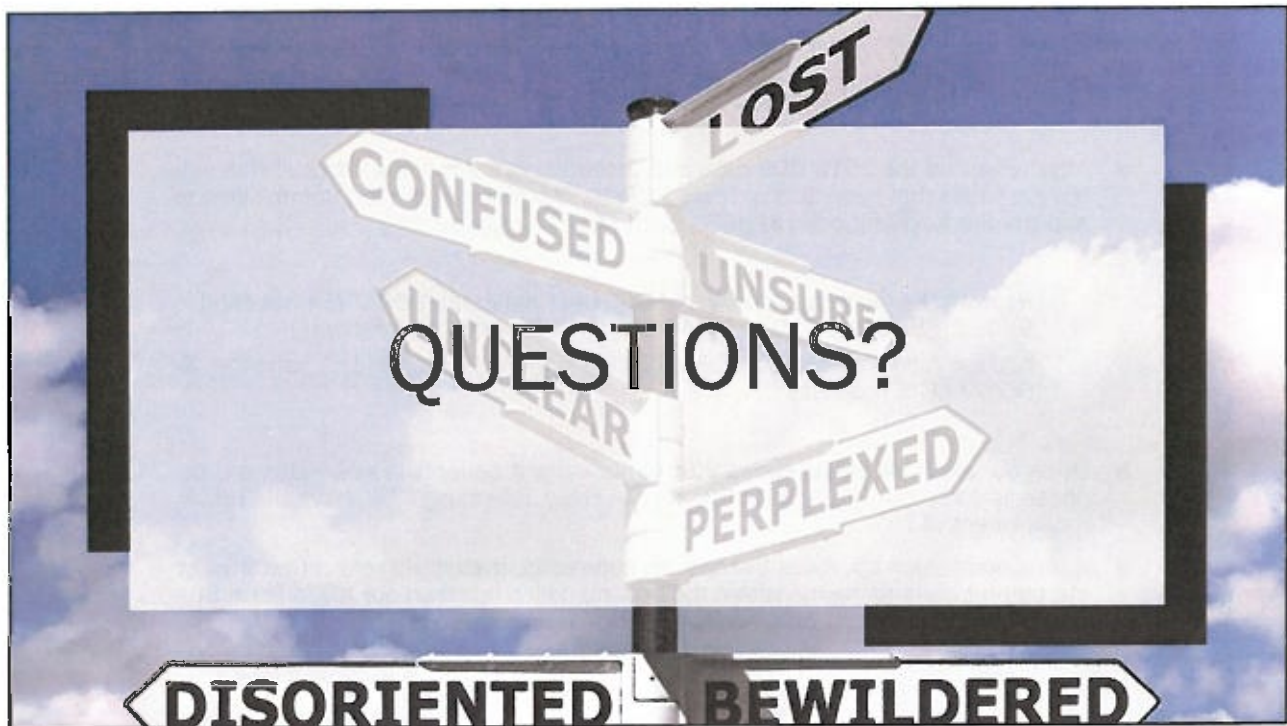
- ## Recommendations for the Commission
- After reviewing the 2018 UDS data and determining our median # of patients to be any zip codes that have 103 or more patients. We recommend the Commission to approve the following edits to HRSA Form 5B:
 - Remove the following zip codes: 95001 (41 patients), 95017 (31 patients), 95063 (95 patients), 95064 (30 patients), & 96067 (14 patients)
 - Add the following zip codes: 95012 (147 patients), 95038 (115 patients), & 95077 (125 patients)
 - Using our old Form 5B zip codes 92% of our current patients reside within the zip codes listed on our HRSA Form 5B: Service Sites, reflecting 17% above the HRSA requirement of 75%.
 - If the Commission approves the new zip code edits, then it will reflect that 95% of our current patients reside within the new zip codes listed on our HRSA Form 5B: Service Sites, reflecting 20% above the HRSA requirement of 75%.

14

Analysis & Conclusions

- Our service area boundaries continue to conform to relevant political subdivision boundaries. We continue to serve patients within the borders of Santa Cruz County.
- 2 out of the 3 health center locations reside directly within an area that has been identified as having medically underserved populations.
- The 3rd health center (Emeline Health Center) is located just right outside of the medically underserved area in North County but is still accessible via public transit (Santa Cruz Metro).
- Health Centers are located both in North County & South County, eliminating geographical barriers to health care access for patients.
- Our service sites continue to be available and accessible to residents of the area appropriately.

15



16

Santa Cruz County Health Services Agency Clinics

Fiscal Presentation

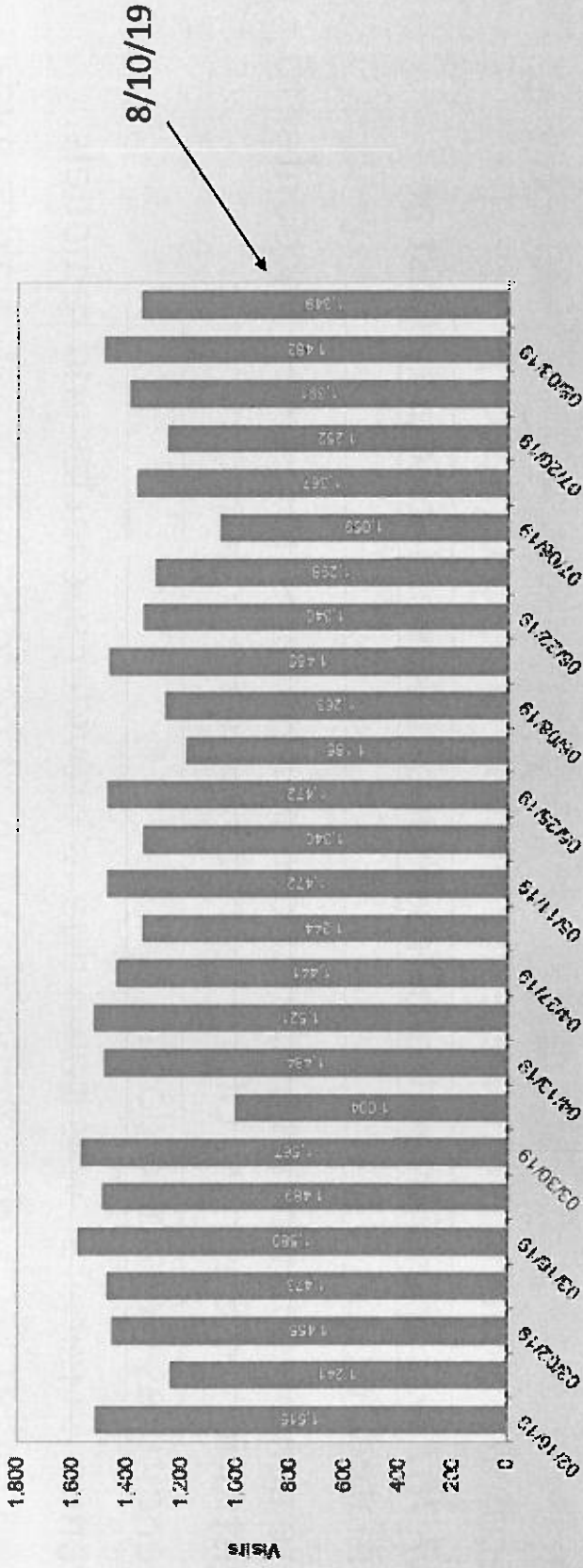
9/5/2019

Dr. Julian N. Wren MSW, Ed.D.

Budget Takeaways

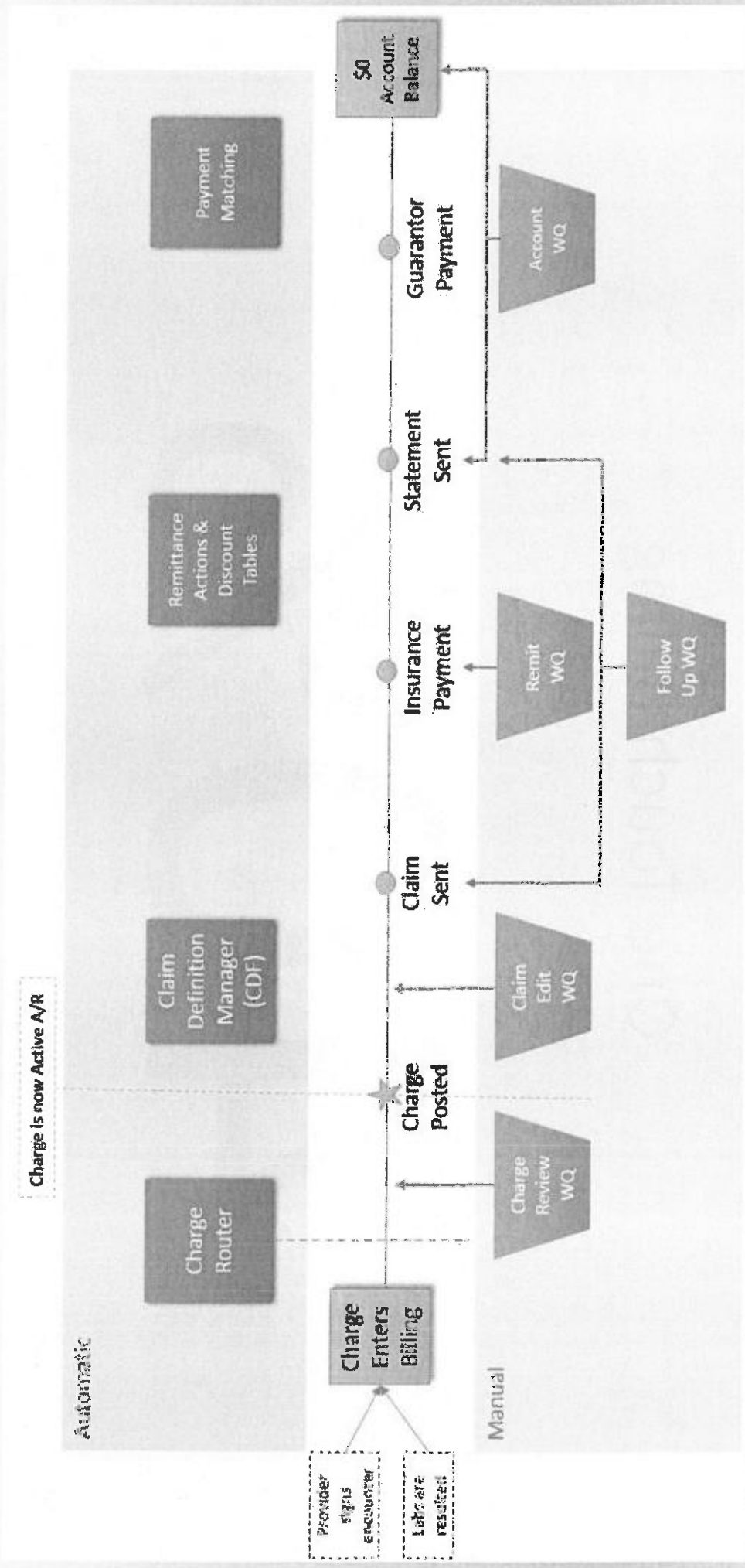
- Telecommunication costs were higher than expected (\$200k).
- \$847,707 was transferred from Trust fund to keep Net County Cost at Estimated Actuals.
- There can be efficiencies and improvements made from Open Encounter to Registration to Business Office team to increase collections.
- Expenditures were also down.
- Revenue, in general, was down due to provider vacancies and remodels.
- Weigh Monthly Charges Projection Report more heavily when making mid-year estimates of revenue.

Visit Metrics



Visit Volume: Weekly total of all arrived or completed appointments.

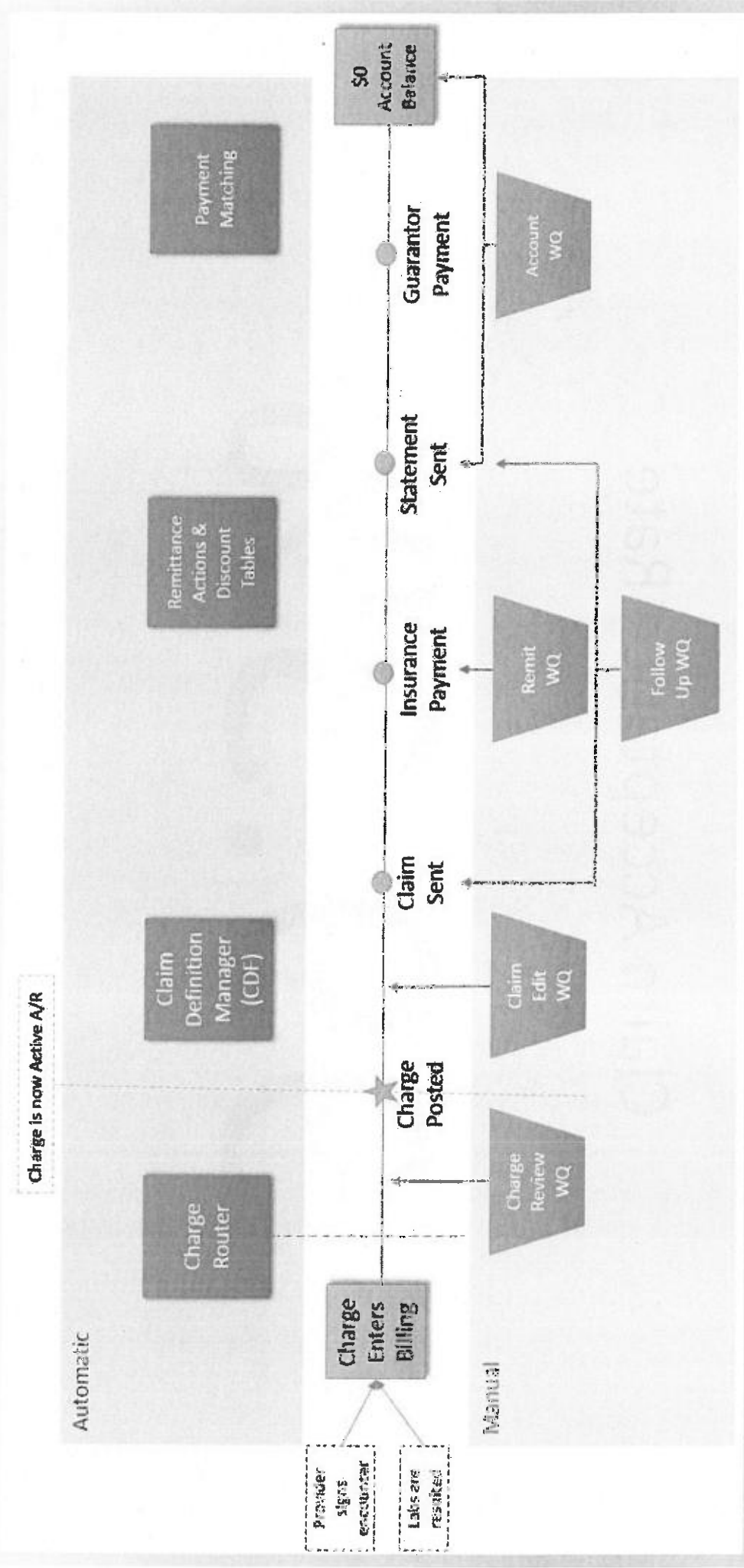
Revenue Cycle Flow of Billing and Claims



One Touch Billing

400%

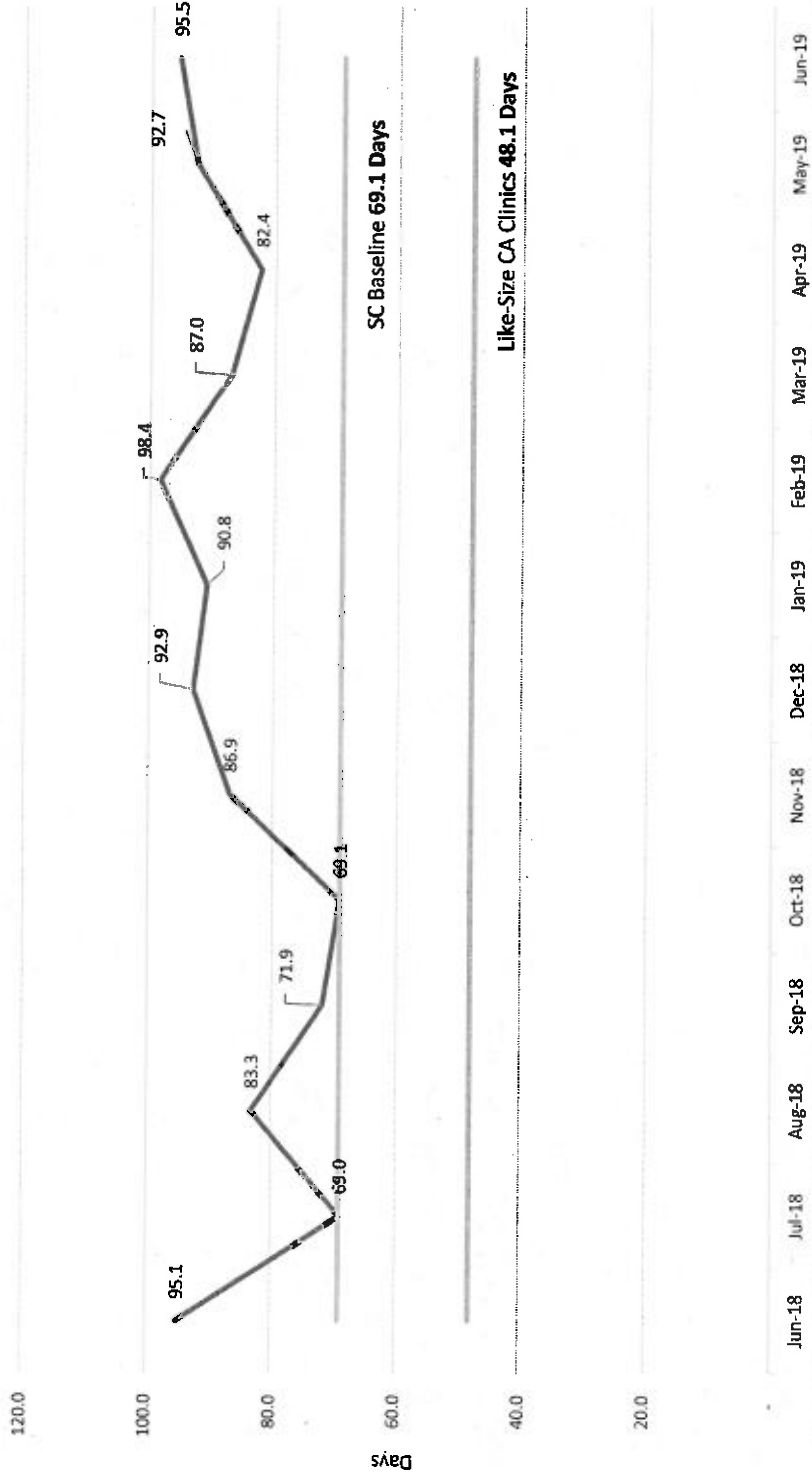
Revenue Cycle Flow of Billing and Claims



Claim Acceptance Rate

99.30%

Days in Account Receivable



SC Baseline 69.1 Days

Like-Size CA Clinics 48.1 Days

Jun-18 Jul-18 Aug-18 Sep-18 Oct-18 Nov-18 Dec-18 Jan-19 Feb-19 Mar-19 Apr-19 May-19 Jun-19

General Prioritization

- Revenue Cycle Goals
 - Increase collections
 - Reduce cost to collect
 - Increase Satisfaction

*Prioritization of work should complement these goals

Increase Collections

- Work to create and send claims and statements that will
- result in payment
- Work larger balances
- Work balances before they must be written-off

Reduce Cost to Collect

- Reduce duplicate work
- Do not work on uncollectable balances
- Sort for one issue at a time
- Do not work on items before they need to be worked

Increase Patient Satisfaction

- Satisfied Patients
 - Continue as your patients
 - Refer more patients
 - Are more likely to pay
- Answer their questions promptly
- Do what you say you are going to do
- Fully complete tasks
- Limit mistakes
- Enter complete notes
- Increase

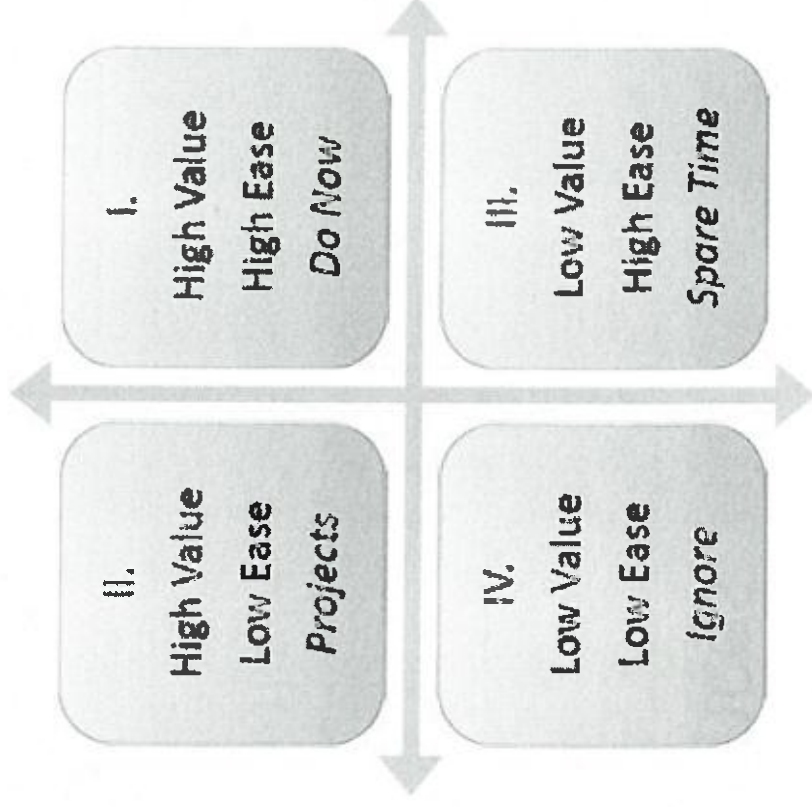
General Prioritization

- 1) Keep patients happy
- 2) Post payments and denials
- 3) Make sure charges are posted
- 4) Make sure claims get to payor
- 5) Resolve undistributed and credit balances
- 6) Work denied and unpaid claims
- 7) Work guarantor balances

Revenue Cycle Improvement Initiatives

- OCHIN is providing on-site revenue cycle coaching in early November.
- Revenue Cycle initiatives are complex, interrelated vary in value, and vary in difficulty.
- The Medical Billing team will prioritize our improvement projects.
- Examples: Automation of task; policy changes; prioritization of how WQs are processed; increasing cross training; "front loading".

Value Ease Diagram



Data References

- Epic Revenue Management Report
- FQHC Defined Visits Report
- Clinic Services Division Financials
- OCHIN Revenue Cycle Boot Camp