

The County of Santa Cruz

Integrated Community Health Center Commission

MEETING AGENDA

September 3, 2020 @ 11:00 am

MEETING LOCATION: ZOOM Meeting Dial - 1 669 900 9128: Meeting ID: 885 7832 3198
 or Teleconference Call Information - 831-454-2222: Code: 850702
 1080 Emeline Ave., Bldg. D, Santa Cruz, CA 95060

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 6, 2020 Meeting Minutes – Recommend for Approval
4. HIPAA Update – James Dyer
5. Letter to Editor - Update
6. Quality Management Committee Update
7. Financial Update
8. CEO/COVID-19 Update/ CZU Lightening Complex Fire Update

Action Items from Previous Meetings:

Action Item	Person(s) Responsible	Date Completed	Comments
Bring updated corrected UDS report.	Raquel		
Keep Commission updated on novel coronavirus (COVID-19)	Amy		
Medication Management Therapy. Report back on this topic at the next meeting.	Raquel		
Send Emergency Operations Plan (EOP) signature page to Christina for signature.	Mary		
Report back on maximum out of pocket limit set. Check with other county agencies	Julian		
Invite Mimi or Dr Newel to our next meeting to give an update on COVID-19	Amy		
Bring to Quality Management Committee perhaps have a focus group or do a patient survey on diabetic supply access for our patients	Raquel		
Report how COVID-19 has affected our current budget.	Julian		
Follow up item for next meeting: Image transfer between systems and ability to contact physician.	Amy/Raquel		
Contact Corinne Hyland to ask: What role and what usefulness would a letter play from a commission that is largely unknown, and what content of that message might be	Amy		

useful to the department and is there any way we can support that.			
Share information on care base incentives by clinics in future meetings.	Raquel		

Next meeting: October 1, 2020 11:00 am- 1:00 pm Meeting Location: ZOOM Meeting/Teleconference Call
Information - 831-454-2222: Code: 850702
1080 Emeline Ave., Bldg. D, Santa Cruz, CA 95060

The County of Santa Cruz Integrated Community Health Center Commission

Minute Taker: Mary Olivares

Minutes of the meeting held September 3, 2020

TELECOMMUNICATION MEETING: ZOOM Meeting - or call in number 831-454-2222: Meeting Code: 850702.

Attendance	
Christina Berberich	Chair
Len Finocchio	Vice Chair
Caitlin Brune	Member at Large
Rahn Garcia	Member
Dinah Phillips	Member
Marco Martinez-Galarce	Member
Amy Peeler	County of Santa Cruz, Chief of Clinic Services
Raquel Ramírez Ruiz	County of Santa Cruz, Senior Health Services Manager
Julian Wren	Administrative Services Manager
Mary Olivares	Admin Aide
James Dyer	
Meeting Commenced at 11:04 am and Concluded at 12:30 pm	
Excused/Absent:	
Absent: Gustavo Mendoza	
1. Welcome/Introductions	
2. Oral Communications:	
3. August 6, 2020 Meeting Minutes - Action item	
Review of August 6, 2020 Meeting Minutes - Recommended for Approval. Len moved to accept minutes as submitted. Marco second, and the rest of the members present were all in favour.	
4. HIPAA Update	
James Dyer, HIPAA Compliance Officer stated the compliance committee has representation from each division from the Health Services Agency. He stated that HSA has three training components which include policy review, online course, and privacy form. He gave an overview on risk assessments and privacy breach. James stated when COVID hit we had to think of doing business a different way with employees working remotely. He stated Privacy & Data Breaches are not uncommon and at HSA there are 30+ to date. James also stated there has been a spike related to confusion around pandemic and that IT has many tools that continually monitors the systems.	
5. Letter to Editor – Update	
Amy stated she sent a message to our Public Information Officer and has this on her radar. This item has been tabled should we need to refer to it in the future.	
6. Quality Management Committee Update	
Raquel reported we are launching the Well App (text platform) to send out communication to our patients in a more affordable and efficient way. This software will include the patient satisfaction survey tools and is scheduled to launch in September. Raquel stated the HRSA Project Officer wanted to make sure our Commission and Quality Management Committee know that she is impressed that we surpassed our goal for 2019 for A1C control. Of our patients with diabetes 24.67% of them are poorly controlled. The number is trending down, and she congratulated the Health Centers on achieving the top quadrant! Another project the committee is exploring with Public Health is Cal Fresh Healthy Living Program which is a Nutrition Prescription. Public Health is looking at ways to help address obesity, diabetes and food insecurity. They are exploring different models and will come back to Quality Management Committee for update. Raquel also report that COVID-19 Recovery Team is meeting weekly to work on staff and patient safety, testing, resource sharing, telehealth vs. in person office visits vs. tent visits, and planning for cold weather.	
FOLLOW UP QUESTIONS:	
X-ray Follow-up (response from our Chief of Radiology):	

- Unfortunately, other medical organization do not use the X-ray PACS system. PACS, is where all the radiology images are stored for Health Services Agency. RMG has access because they read the X-rays and give us the report. The reports are shared through the Health Information Exchange and that is how the other providers can access the reports. If a patient wants a CD of their images, they request it and take it to the specialist. We can probably mail out the CDs to the specialist office if requested in a timely manner. If it helps, when a patient knows they are going to be sent to a specialist, the x-ray tech can make a CD at the time of the visit. This avoids a return trip to the office. Raquel stated we are currently working on revising our policy and this is on next months on agenda.
- Follow up question was asked: Will patients get charged with well app (text platform)? Raquel will check into this.

7. Financial Update

Julian stated that next month he will have an update on financials and that the fiscal department is still closing out last fiscal year. He reviewed the projection report he receives once a month with data pulled from our Electronic Health Record system. He reported we are projecting a little higher than last year. He also reported on Revenue Management and stated this report looks at the last 13 weeks Pre-AR, this is work done prior to posting claims and the goal is to keep this as low as possible, the report shows a slight decrease. He also reported on Visit Metrics which shows the last 13 weeks and how efficient our billing is and this represents in-flow and out-flow of claims and payments and in general we've been able to keep up. Julian stated we do need to improve in some areas in terms of revenue. He stated the billing staff will receive technical support from OCHIN through a grant they received.

8. CEO/COVID-19 Update

Amy reported we have a new provider starting this week at Emeline her name is Rashmi Mathew. Amy also reported we have a strong candidate for Medical Director, and she had offered him the position. He had great references and has experience with FQHC, Amy to send out CV to commission members. Amy also stated COVID numbers are decreasing right now but Gail has warned us we will be up and down bracing ourselves for what winter will bring. Current COVID numbers are at 1,896 and the CZU fire is 29% contained with 925 homes lost. Our Project Officer has been working with us to re-schedule our Operational Site Visit and at this point in time it looks like it will be virtual in the next few months. Amy also stated that one of her priorities is to get more commission members and that she had a couple of possibilities to follow up on.

Action items:

-

Next Meeting: October 1, 2020 11:00 am - 1:00 pm
 ZOOM Meeting: 1080 Emeline, Santa Cruz, CA

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

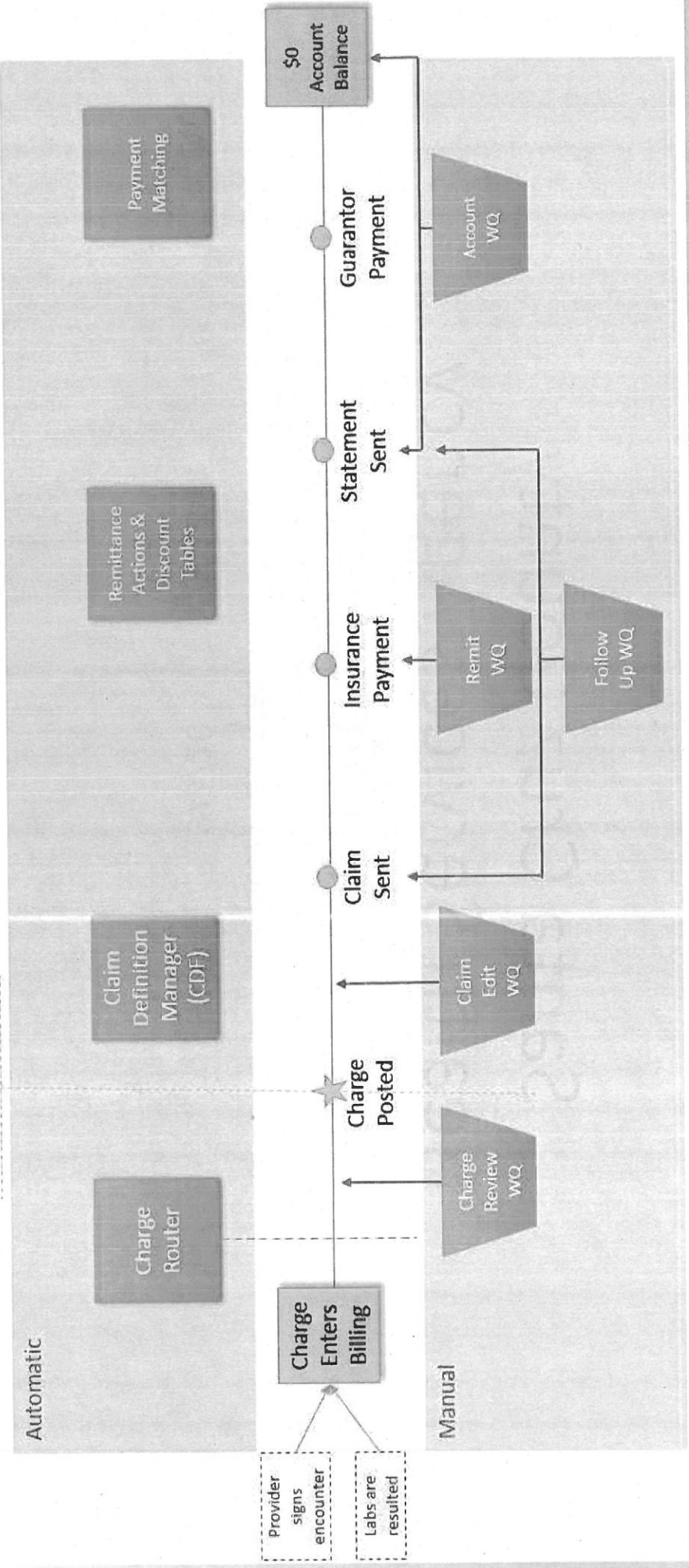
_____/_____/_____
 (Date)

Santa Cruz County Health Services Agency Clinics

Fiscal Presentation

9/3/20

Charge is now Active A/R



Projection Report

Unit Counts and Total Net Charges by Department Group and Fiscal Posting Group - Projection Report

Post Dates through: 07/31/2020 (22 workdays)
All Departments

Post Group	FY 18-19			FY 19-20			FY 20-20		
	Units	Net Charges	%	Units	Net Charges	%	Units	Net Charges	%
MEDI-CAL	99,583	22,442,653	74.8%	75,801	19,974,802	86.9%	6,853	2,103,936	94.2%
MCA	1	0	0.0%	1	0	0.0%	0	0	0.0%
MEDICARE	15,672	2,820,949	11.6%	9,798	1,880,260	8.2%	1,220	57,016	2.6%
MEDI-CRUIZ	3,473	361,396	2.6%	2,197	226,424	1.0%	1	23	0.0%
HPHP	1,583	203,858	1.2%	1,271	185,251	0.8%	131	15,260	0.7%
FELS	348	56,887	0.3%	346	59,851	0.3%	9	1,220	0.1%
INTERFUND	122	8,768	0.1%	181	-6,223	0.0%	9	1,082	0.0%
MCWP	374	124,419	0.3%	335	120,049	0.5%	2	355	0.0%
MENTAL HLTH	452	140,277	0.3%	272	160,363	0.7%	16	17,153	0.8%
OTHER	11,266	473,809	8.5%	10,965	393,592	1.7%	1,163	32,597	1.5%
No Group Assigned	204	11,441	0.2%	428	-1,054	0.0%	67	4,058	0.2%
Totals:	133,078	26,644,457		101,595	22,993,314		9,471	2,232,699	
Less Reserve Amount:		296,913			418,366			66,388	
Actual Recognition:		26,347,544			22,574,948			2,166,311	

Post Group	Projected Charges FY 20-20	
	Projected Units	Projected Charges
MEDI-CAL	78,339	23,812,733
MCA	0	0
MEDICARE	13,946	645,321
MEDI-CRUIZ	11	261
HPHP	1,498	172,713
FELS	103	13,809
INTERFUND	103	12,251
MCWP	23	4,014
MENTAL HLTH	183	194,137
OTHER	13,295	366,933
No Group Assigned	766	45,925
Total Charges:	25,370,097	751,391
Less Projected Reserve Amount:		24,518,706
Total Net Charges:		24,518,706

Projected Charges = Net Charges / Workdays * Total Workdays (249.0)
Projected Units = Units / Workdays * Total Workdays (plus extra 2% for second half of FY)

Date printed: 08/27/2020

HSA Clinic Services Epic Revenue Management Report

Santa Cruz

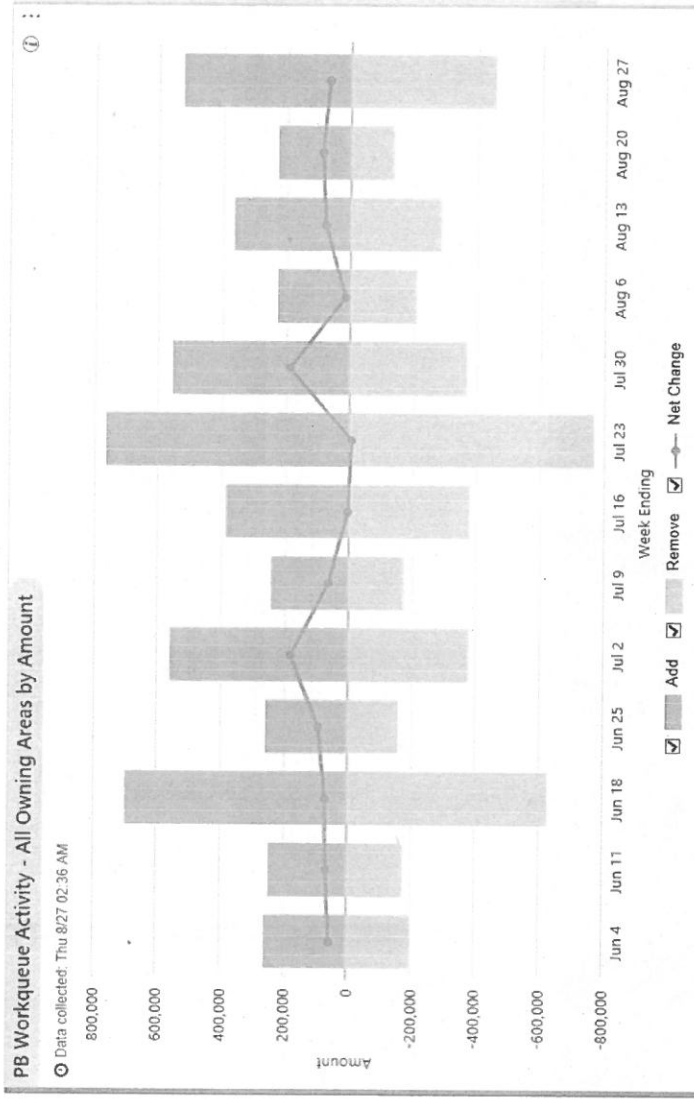
Resolute Professional Billing Graph Package
Reporting Period: 08/01/20

Accounts Receivable

Compare To: 13 Week Av

Unit	This Week	Last Week	% Change	13 Week Ave	% Variance
AR	94.4	90.2	4.68%	#N/A	#N/A
	Dollars (K) \$4,006.7	\$3,459.5	15.82%	\$3,335.9	20.1%
Pre-AR	40.7	42.7	-4.7%	40.9	-0.3%
(Charge Review)	Dollars (K) \$1,728.9	\$1,640.0	5.4%	\$1,328.9	30.1%
Aging over 120 Days	Dollars (K) \$836.2	\$835.8	0.0%	\$800.9	4.4%
	Percent 20.87%	24%	-13.6%	20%	4.4%

Workqueue Activity Report



Posted Denials

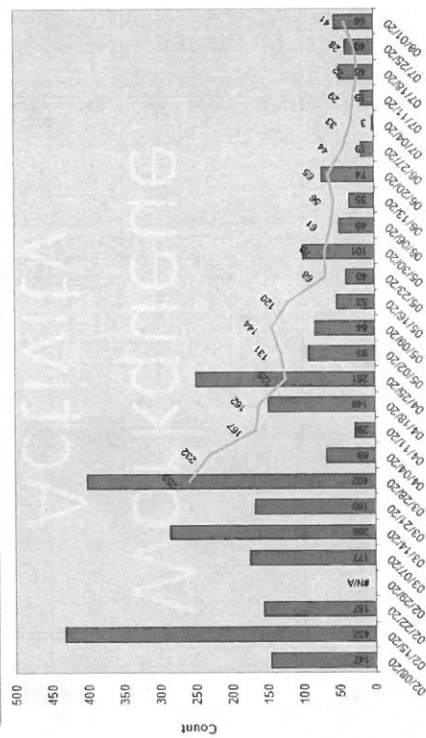
Santa Cruz

[Return Home](#)

Denials

Epic Data Only

Weekly Denials Posted
A week and Weekly Denials Posted



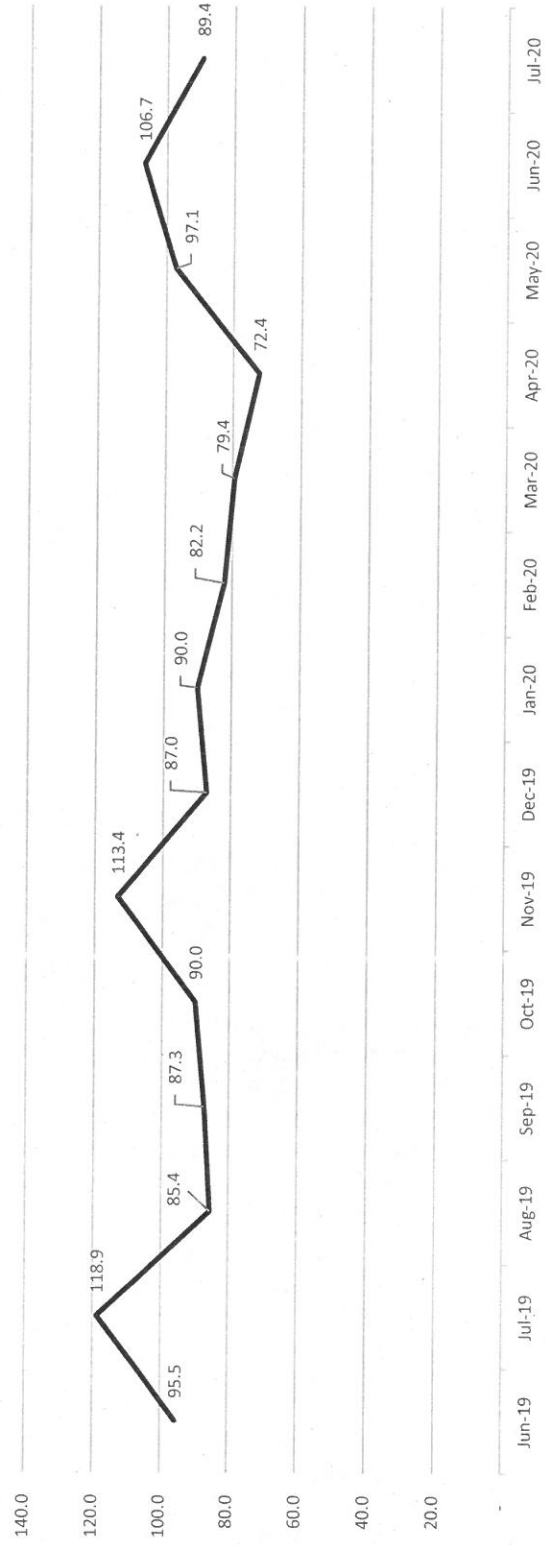
Denials Posted: Number of denials posted in Epic

Top Ten Denials Posted (Rolling 30 Days)

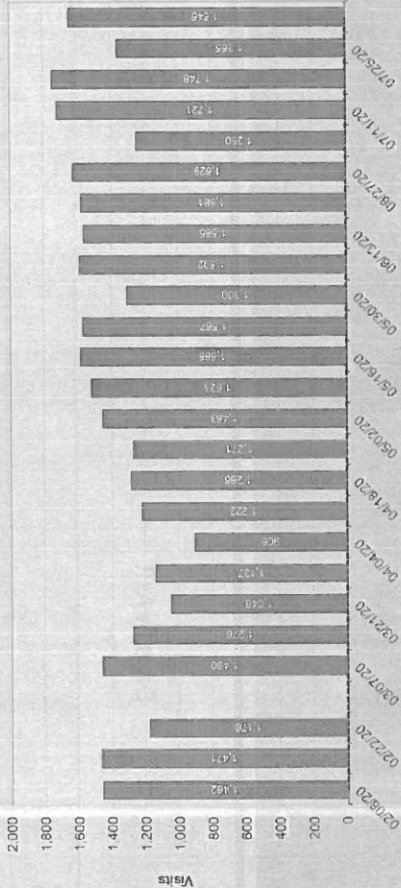
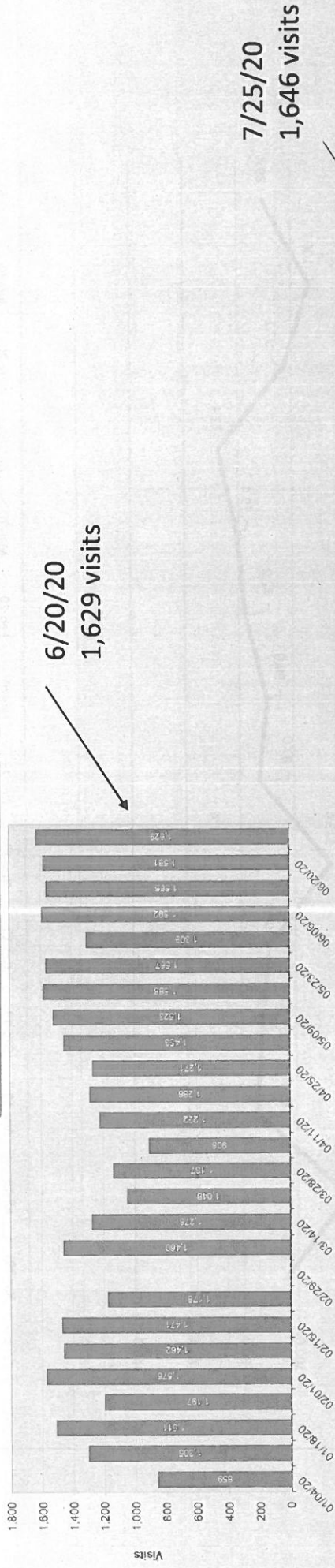
Rank	Denial Code	Denial Reason	Denial Count	Amount	Percent
1	31	CO31-DENIED, PATIENT NOT INSURED	16	\$4,923	20%
2	22	CO22-DENIED/REDUCED, COB.	21	\$4,566	19%
3	2013	COB13-PREVIOUSLY PAID.	20	\$2,561	10%
4	23	CO23-DENIED/REDUCED, CHARGES PAID, COB.	24	\$2,174	9%
5	52	CO52-PROVIDER NOT ELIGIBLE FOR SVC BILLED.	4	\$1,975	8%
6	16	CO16-LACKS INFO NEEDED FOR ADJUDICATION.	42	\$1,724	7%
7	29	CO29-TIME LIMIT FOR FILING HAS EXPIRED.	6	\$1,256	5%
8	11	CO11-DX INCONSISTENT WITH PX.	9	\$1,006	4%
9	18	CO18-DUPLICATE CLAIM/SVC.	9	\$671	3%
10	91000031	PR31-DENIED, PATIENT NOT INSURED.	2	\$559	2%

Days in A/R trend

Days In A/R



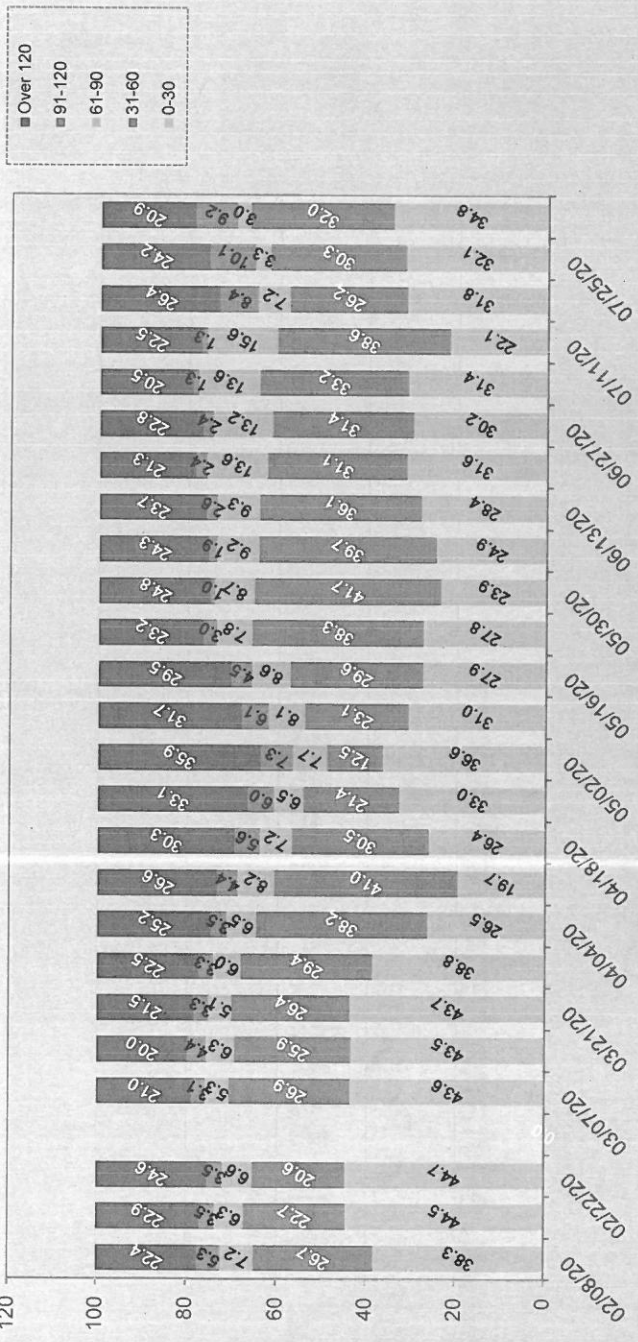
Visit Metrics



Total Aging % of Total

Scale (Dollars):

Dollars Percent

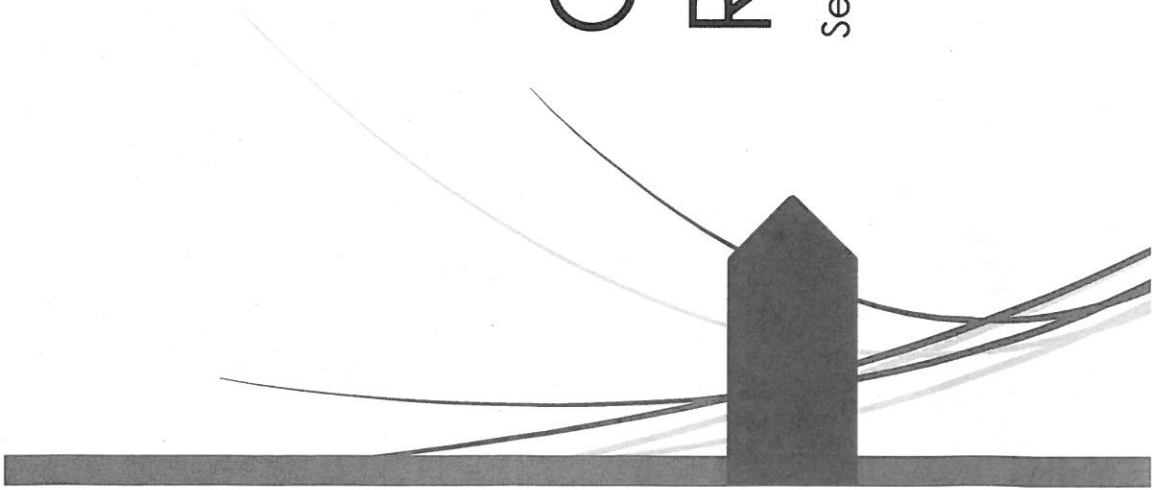


Data References

- Epic Revenue Management Report
- HSA Projection Report
- Revenue Cycle Scorecard (Trending)

Quality Management Report

September 3, 2020



Quality Management Committee

- Launching Well App –(text platform) to send out communication to our patients in a more affordable and efficient way. (Launch in September)
 - Includes patient satisfaction survey tools
- Super Users' group of providers
 - Project to review how data is captured for various reporting agencies (ie HRSA, Alliance, Meaningful Use)
- Continuing Quality Improvement Projects(diabetes, BMI, cervical and colorectal cancer screenings)

	2016	2017	2018	2019	2020 Goal	2020 Year to Date	Healthy People 2020 Target	State (2018)	National (2018)
Diabetes: Hemo-globin A1c Poor Control	30.98%	29.73%	29.30%	24.67 % Congratulations on achieving the top quadrant!!!	25% (in Apr, 27.2%)		16.20%	35.00%	32.79% 31.95 %= US Average 2019



Nutrition Prescription

- ▶ Public Health Cal Fresh Healthy Living Program
- ▶ Help address obesity, diabetes and food insecurity
- ▶ They are exploring different models
- ▶ Prescription for:
 - ▶ Fruits and Vegetables
 - ▶ Farmers Market
- ▶ Going to create a simplistic program so our clinics can participate



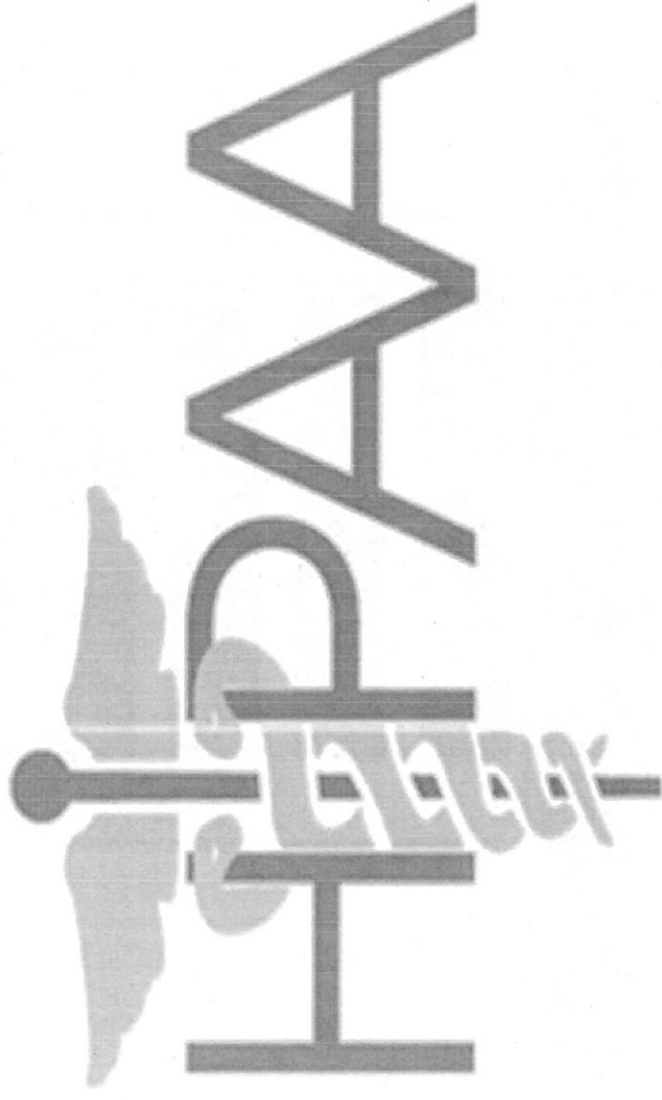
COVID-19 Recovery Team Meeting

- ▶ Staff and Patient Safety
- ▶ Testing
- ▶ Resource sharing
- ▶ Telehealth vs. in person office visits vs. tent visits
- ▶ Isolation and Quarantine Guidelines for staff and patients
- ▶ Education Materials
- ▶ Planning for cold weather
- ▶ PPE stockpile



X-ray Follow-up (response from our Chief of Radiology)

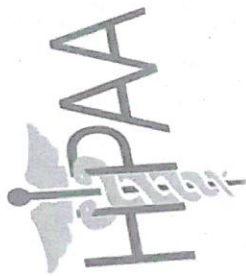
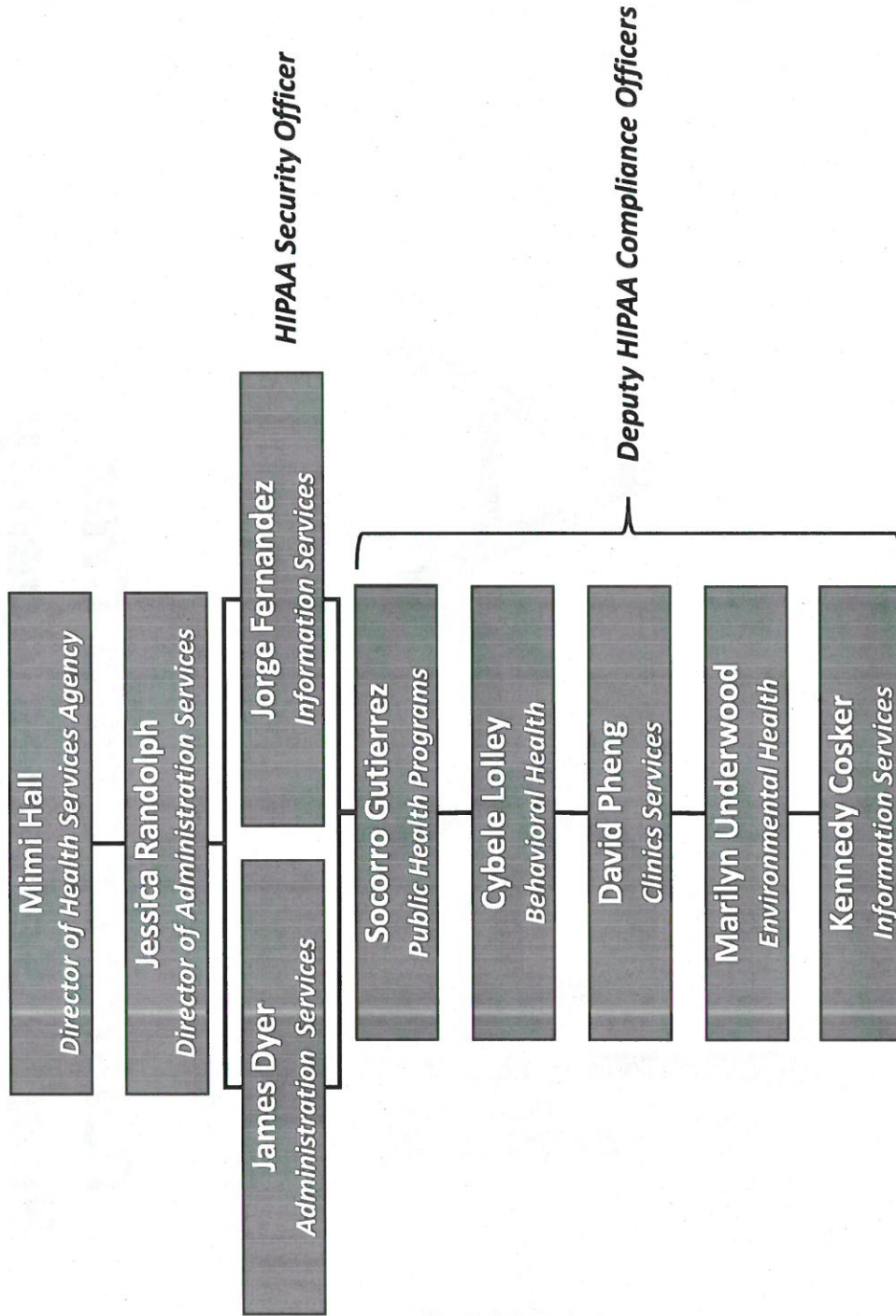
- Unfortunately, **we don't share our PACS system with other medical organizations.** PACS, is where all the radiology images are stored for HSA. RMG has access because they read the X-rays and give us the report. **The reports are shared to HIE,** and that's where other providers can access the reports. If a patient wants a CD of their images, they request it and take it to the specialist. For example, when a patient has x-rays let say from Valley Medical in Santa Clara, they bring a CD for Dr. Richman to look at. From my experience this is how it's always been done. I'm sure PAMF and Kaiser don't have this issue because they have everything within there network.
- **Unless we have a network of PACS systems at every specialist office,** and they can access images from PACS, like our providers do.
- Other than that, **we can probably mail out the CDs to the specialist office if requested in a timely manner.**
- If it helps, **when a patient knows they are going to be sent to a specialist, the x-ray tech can make a CD at the time of the visit.** This avoids a return trip to the office.



**County of Santa Cruz
Health Services Agency**

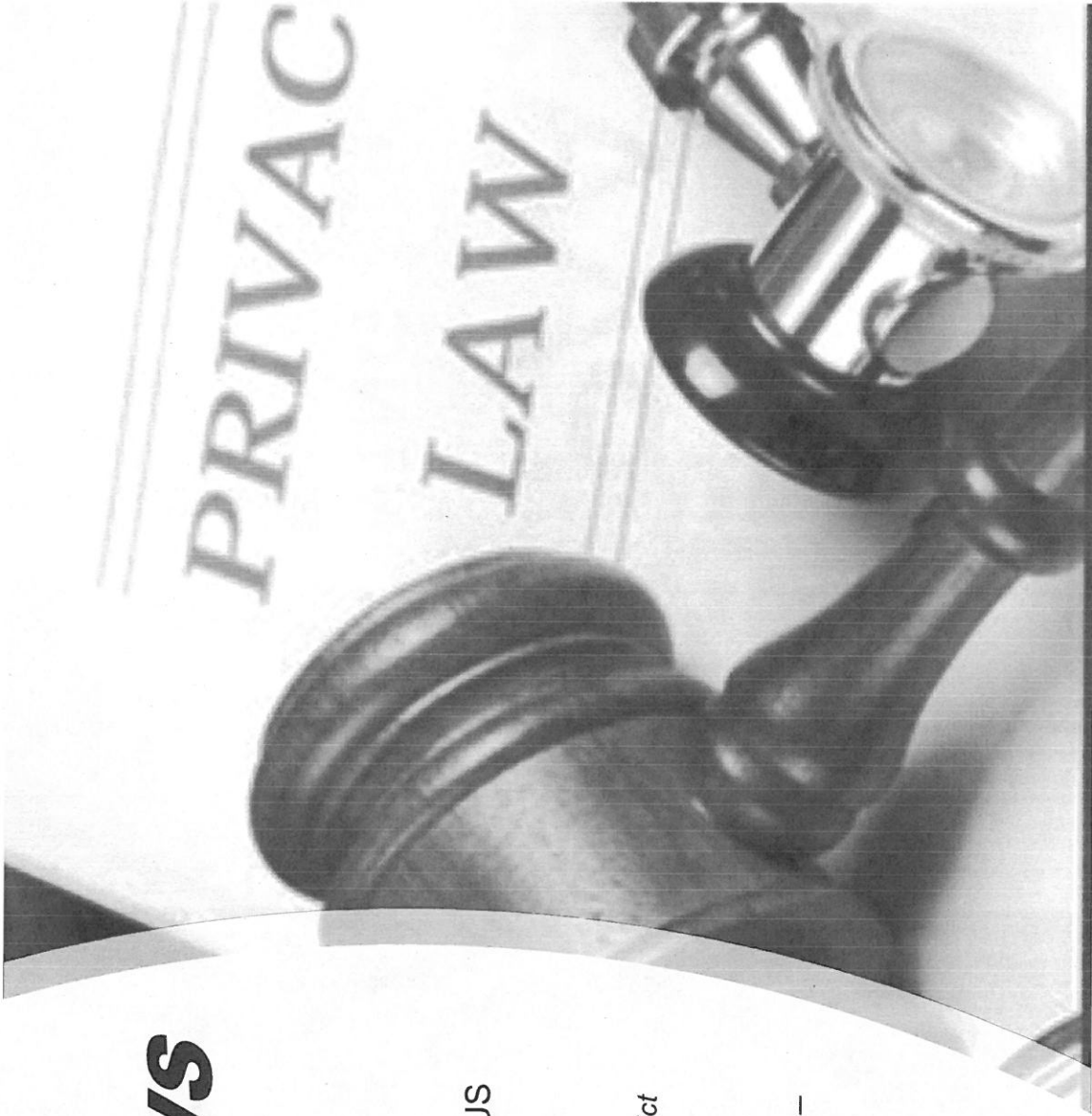
JAMES DYER

HIPAA COMPLIANCE COMMITTEE



3 PRIVACY LAWS

- **Federal**
 - HIPAA (96) – HITECH (09) – OMNIBUS Rule (13) – CARES ACT (20) ...
 - Behavioral Health Laws (*stricter than HIPAA*)
 - Substance Use Disorder (*even more strict than Behavioral Health*)
- **State**
 - California Consumer Privacy Act (18) – California Online Privacy (05) ...



TRAINING REQUIREMENTS

- Federal & Local Policy
- Training Content
 - the importance of confidentiality,
 - Identifying PHI,
 - the rules when/how PHI may be disclosed,
 - minimum necessary rule,
 - avoiding snooping (even when one has access to PHI), and
 - the need to keep an accounting of disclosures
- HSA – Three Training Components
 - Policy Review – Online Course – Privacy Form
 - Monthly Training & Awareness Program (email)



RISK ASSESSMENTS

- **Requirement**
 - Perform both quantitative and qualitative analysis
 - At least annually (Dec. 2019 / May 2020)
 - Recommended – Anytime Significant Change
- **Internal Assessment**
 - Meant for internal use only to identify vulnerabilities and gaps



RISK ASSESSMENTS

- Telecommuting created unanticipated security issues due to COVID-19
- Departmental devices for telecommuting
- TeleHealth created security issues
- Developed guidelines on approved platforms for local use
 - *Psychiatry and Clinics also purchased Doxy.me as a licensed platform*
- Construction created gaps due to movement of people and equipment
 - *Perform facility walk-throughs more frequently during times of construction*



PRIVACY & DATA BREACHES

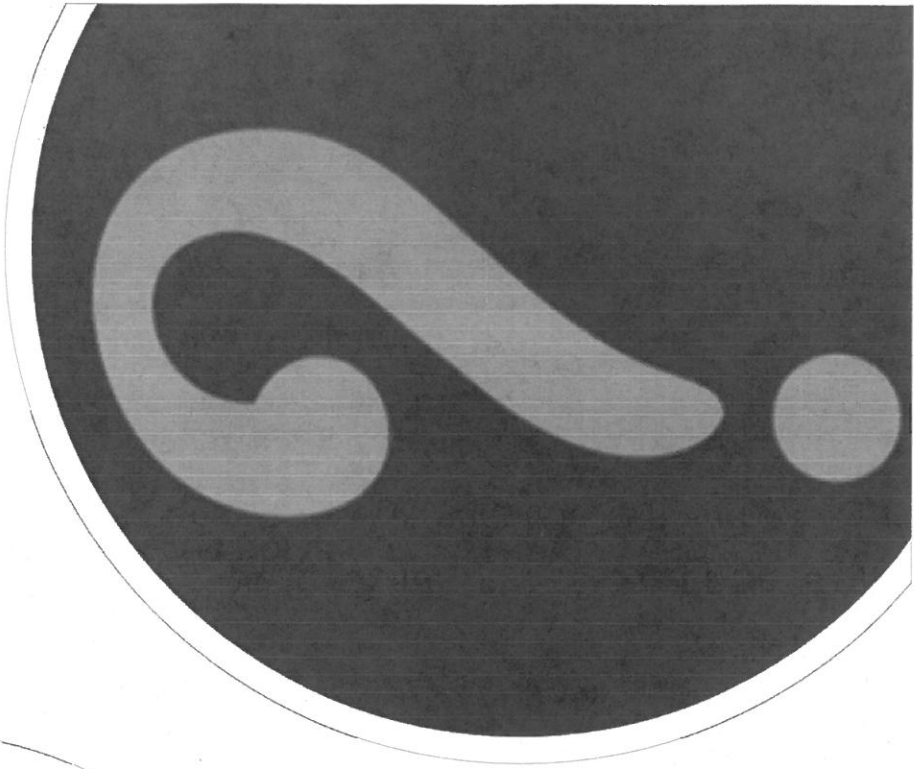
- Not uncommon
- 30+ incidents to date (2020)
 - Spike related to confusion around pandemic
 - Phishing and Human Error
 - Generally Most common – wrong addressee
 - 2019 – Phishing – Login Credential Harvesting (Sweden)
 - 2020 – Phishing – Invoice – Email Contacts Harvesting (South Africa / New York)
- Report to State & Fed
 - Ongoing and Annually (respectively)



BREACH PROTECTIONS & RECOVERY

- **Policies & Procedures**
 - Department and County
- **County IT Protection & Mitigation Plan**
 - Server Encryption
 - Routine Data Backup
 - Host of network and application tools
 - Microsoft Azure
 - Palo Alto Networks
 - MDM software on mobile devices (MS BitLocker)
 - Quarantine/Isolate Computer
- **Many Health Systems are Hosted Sites**
 - EPIC, AVTAR, MS Outlook, ...





THANK YOU

