

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

December 3, 2020 @ 11:00 am

MEETING LOCATION: Microsoft Teams meeting 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. November 5, 2020 Meeting Minutes – Recommend for Approval
4. Social Justice
5. Quality Management Committee Update
6. Financial Update
7. CEO/COVID-19 Update/ CZU Lightening Complex Fire Update

Action Items from Previous Meetings:

Action Item	Person(s) Responsible	Date Completed	Comments
QI Measure for Mental Health and Behavioral Health concerns. On 10/1/20 minutes. Follow up next 2-3 months.	Raquel		

Next meeting: January 7, 2021 11:00 am- 1:00 pm

Meeting Location: Microsoft Teams meeting or 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 December 3, 2020

TELECOMMUNICATION MEETING: Microsoft Teams 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 Ramirez Ruiz	County of Santa Cruz, Senior Health Services Manager
Julian Wren	Administrative Services Manager
Mary Olivares	Admin Aide
Meeting Commenced at 11:12 am and Concluded at 12:17 pm	
Excused/Absent:	
Absent: Gustavo Mendoza	
1. Welcome/Introductions	
2. Oral Communications:	
3. November 5, 2020 Meeting Minutes - Action item	
Review of November 5, 2020 Meeting Minutes – Correction to last sentence under Financial Report should state 29% not 42%. With this correction it is recommended for approval. Rahn moved to accept minutes as corrected. Dinah second, and the rest of the members present were all in favour.	
4. Social Justice	
Caitlin reported she had followed up with Salud Para La Gente and Monterey County Health Department. Caitlin shared she had spoken to Salud Para La Gente, Board Co-Chair and Executive Director. She stated they are in the early stages of articulating as an organization what it means to embody anti-racist practice and have had conversation among board members that resulted in wanting to take steps to have a strong commitment to health equity. They are committed to working closely with staff and are in the process of organizing an equity committee that will be comprised of board members and staff members. They are trying to be clear and transparent on what they are trying to achieve. They want to have an action plan in place in the next 6 months. Caitlin also checked in with Monterey County Health Department and reported they had begun in 2015 with two Board of Supervisor members attending a training by Race Forward and in 2016 one Board of supervisor and three Sr. Staff attended training that led to a commitment that came down from the Board of Supervisors to center racial equity across the county. In 2016 they received funding to participate in the Government Alliance through race equity. What distinguished their approach is that it was led from the top starting with the CAO and involved people from various sectors throughout the county. Caitlin states she has a brief survey to send to the commissioners to gauge where we are in our own understanding of racism and at our next meeting she will bring forward a learning topic. Raquel will report back at a later date what is going on at the staff level so we can continue to learn and share the understating of racism. This will be a continuing item on each agenda, so it helps us to understand some aspect of health equity that is of significance here in Santa Cruz County and move proactively to make sure we are supporting staff.	
5. Quality Management Committee Update	
Raquel gave an update on the Quality Management Committee, and Peer Review and Risk Management Committee. She stated they are invited to participate with OCHIN Care Transformation Coaching in chronic disease management with a focus on diabetes care. The meetings will begin in January 2021 with a small group of employees within all clinics. Raquel updated committee on the continuing Quality Improvement projects they are working on such as: diabetes, BMI, cervical and colorectal cancer screenings. Raquel also stated that the Patient Centered Medical Home Recognition is still reviewing our applications and that the Emeline Clinic and HPHP have passed and they are still reviewing Watsonville Clinics. She also gave an update that the Peer Review Committee had reviewed 4 deaths this month and there were no issues with those reviews.	

Lastly Raquel stated they are applying for a HRSA hypertension grant and are likely to be funded. It is through HRSA-National Hypertension (HTN) Control Initiative Supplemental Funding. To participate in the HTN Initiative we will conduct outreach and engage patients with uncontrolled hypertension to participate in a training and technical assistance activities offered in support. NHCI-HC award will ensure access to and support the use of Bluetooth or wireless-enabled self-measured blood pressure devices for a majority of our patients with hypertension, and use the data to inform hypertension treatment plans, and collect and share data to support participation in initiative evaluation and reporting activities. The maximum request is for a three-year period, and \$144,960 grant. We will purchase 400 devices, hire an extra help employee and upgrades to our electronic health records.

6. Financial Update

Julian reported on the following:

- **Projected Revenue** – End of year projections at end of first quarter is lower. Our revenue momentum is lower in 20/21.
- **Projected Revenue 1st Qtr.** – Epic charges after 1st quarter is down 18%.
- **Average Charge per Encounter** – Total charges posted in the last three months divided by the total number of encounters over the last three months. Current report indicates we are lower compared to last year.
- **Age of Money Balances** - This metric measures the percentage of the total A/R that is over 90 days old. Similar to Days in A/R, it can be used as a measure for how long it takes to fully resolve balances. However, this metric will also let you know if you have older balances accumulating in the system.
- **Number of Charts still open** - Total number of Open Encounters through the last day of the month run one week after the end of the month.
- **Days of Open Encounters** - Open Encounters are those patient encounters that have yet to be "closed" by the provider in the EMR. Since the encounter has not been closed, the charges have not been exported to the PM for billing.
- **Days in Accounts Receivable** - Total A/R on the last day for the previous month divided by the ADC.

Julian stated some of the challenges are provider shortage, space challenges, furlough effects on scheduling, delay on mobile unit completion, CZU disruption, COVID-19 disruption, MAT and RCC groups have been cancelled and acupuncture is on abbreviated schedule. Lastly Julian reported on his goals to maintain denial rates below 2% through June 30, 2021, review real time eligibility and patient Work Queues (WQ) on at least 25% of the visits by February 2021, automate charge router and claims processing prior to billing by February 2021, automate bulk adjustments by January 2021, reduce charge review days by 10% to 42 days by February 2021, Complete a review of 16/17 through 19/20 cost report and rate structure of Medicare by March 2021 and adjust rates for wrap payment, begin working on the prioritized list of billing improvement beginning with high value and high ease tasks beginning by December 4th and schedule weekly progress tracking meetings with Business Office leadership by December 15th, 2021.

7. CEO/COVID-19 Update

Amy reported that our operational site visit will be in mid to late February and at the next two commission meetings will have many items that will need to be approved. Amy stated that there is a promising applicant for Director of Nursing, and she will be coming out next week to meet with some of the staff. Amy stated that we are hoping to get our mobile testing up by February 2021 and we are in the process of hiring two contact tracers for our patients. Amy stated we do not know how many vaccines we will receive for the county and the hospital capacity is the highest they have seen. There has been an 89% increase in hospitalizations in the last two weeks. It was asked what is the plan for expansion if the hospital needs space? Amy stated that Public Health has two industrial size mobile hospital tents, and the Rodeway Inn Hotel, third floor is reserved as an alternate care site for isolation and quarantine and patients can be moved there creating space at the hospital. Lastly Amy stated that hospitals are filled at 75% in ICU and it is anticipated that it will be at 124% by Christmas.

Action items:

-

Next Meeting: January 7, 2021 11:00 am - 1:00 pm
Microsoft Teams Meeting: 1080 Emeline, Santa Cruz, CA

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


_____/_____/_____
(Date)

Clinic Services Fiscal Report

DR. JULIAN N. WREN, MSW, ED.D.

12-3-20



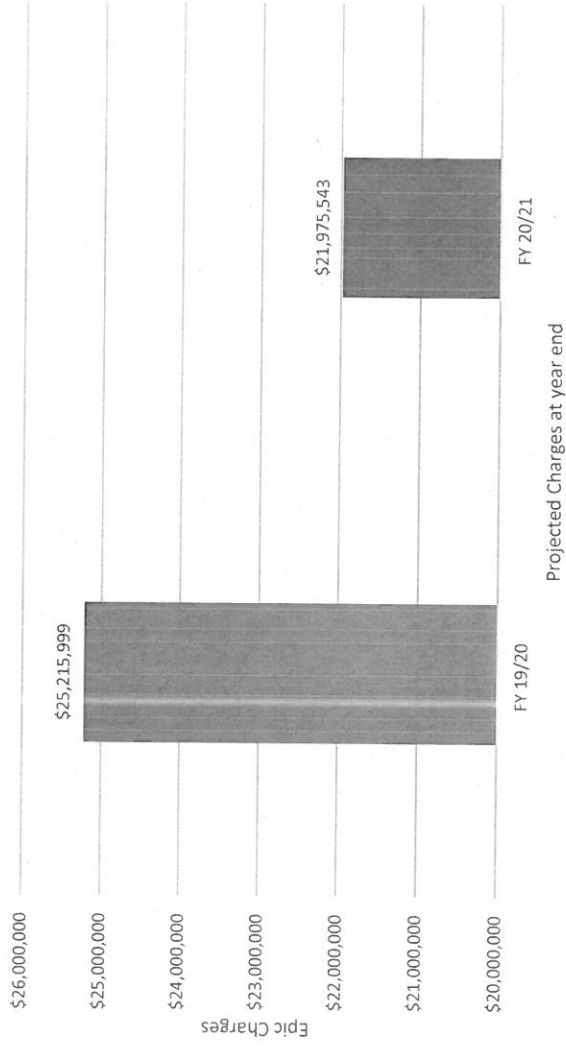


***“You will face many
defeats in your life but
never let yourself be
defeated.”***

– Maya Angelou

PROJECTED REVENUE

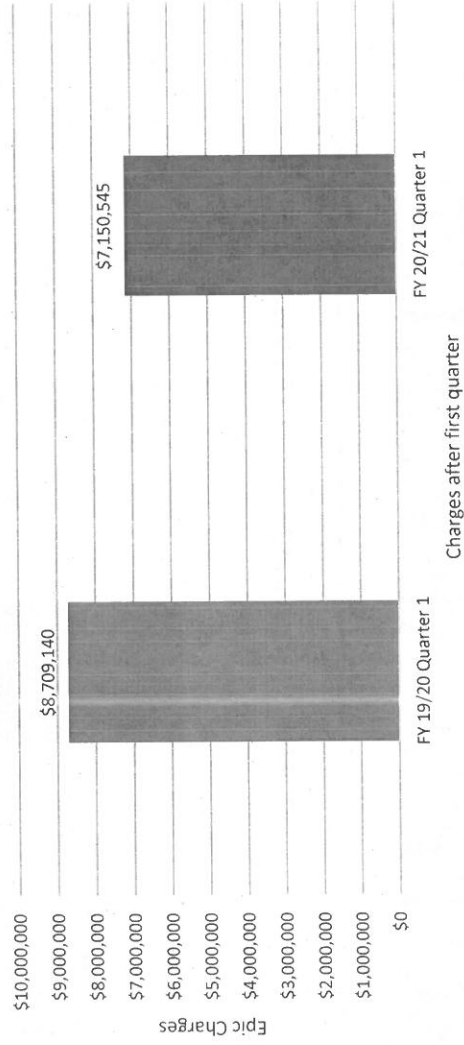
Projected Charges Comparison FY 19/20 vs 20/21



End of year projections at end of first quarter is lower. Our Revenue momentum is lower in 20/21.

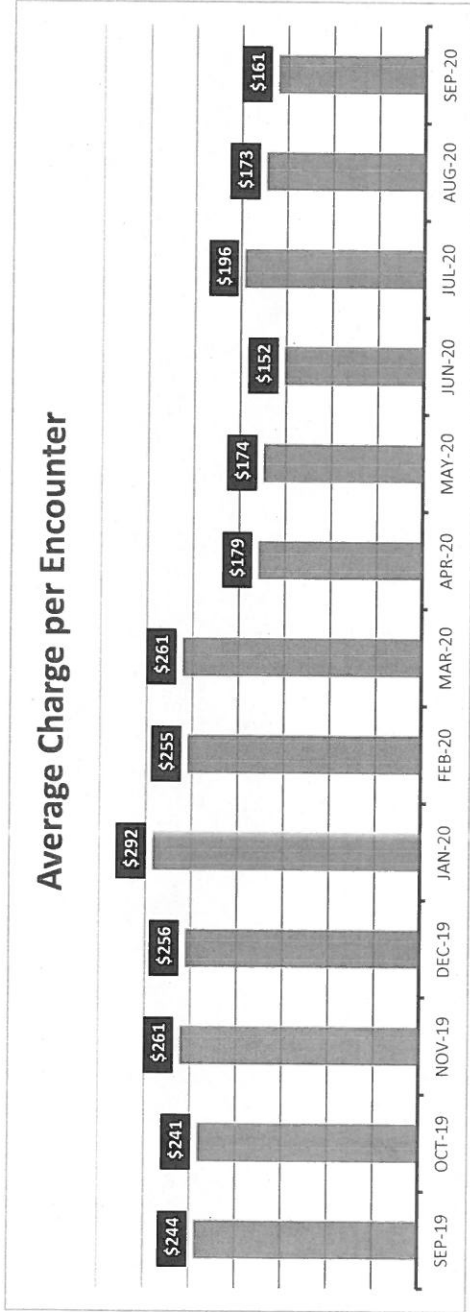
PROJECTED REVENUE 1ST QTR

Charges Comparison 19/20 FY vs FY 20/21



Epic charges after 1st quarter is down 18%.

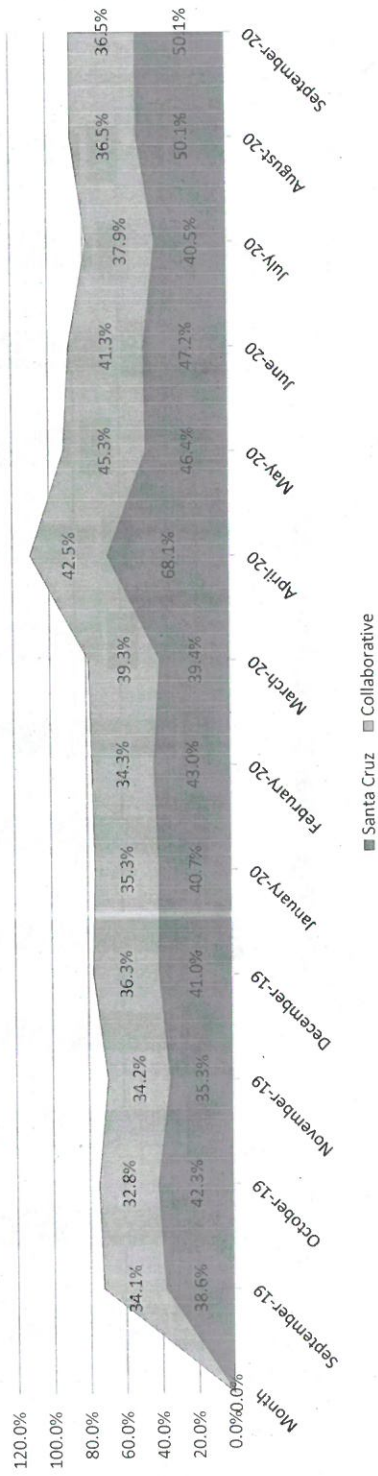
Average Charge per Encounter



Total charges posted in the last three months divided by the total number of encounters over the last three months

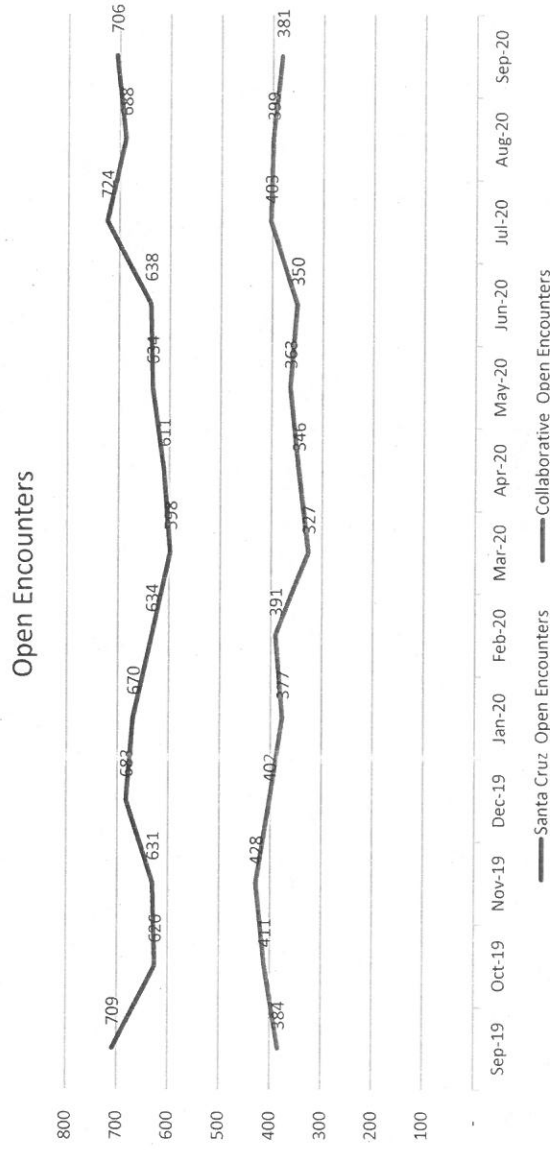
Age of Money Balances

Percentage Debit > 90 days



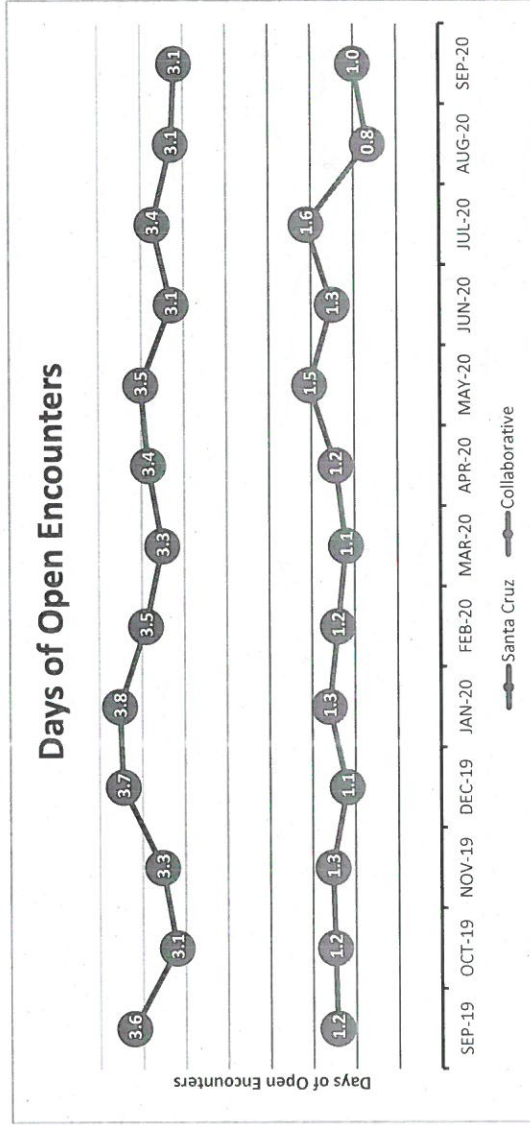
This metric measures the percentage of the total A/R that is over 90 days old. Similar to Days in A/R, it can be used as a measure for how long it takes to fully resolve balances. However, this metric will also let you know if you have older balances accumulating in the system.

Number of Charts still open



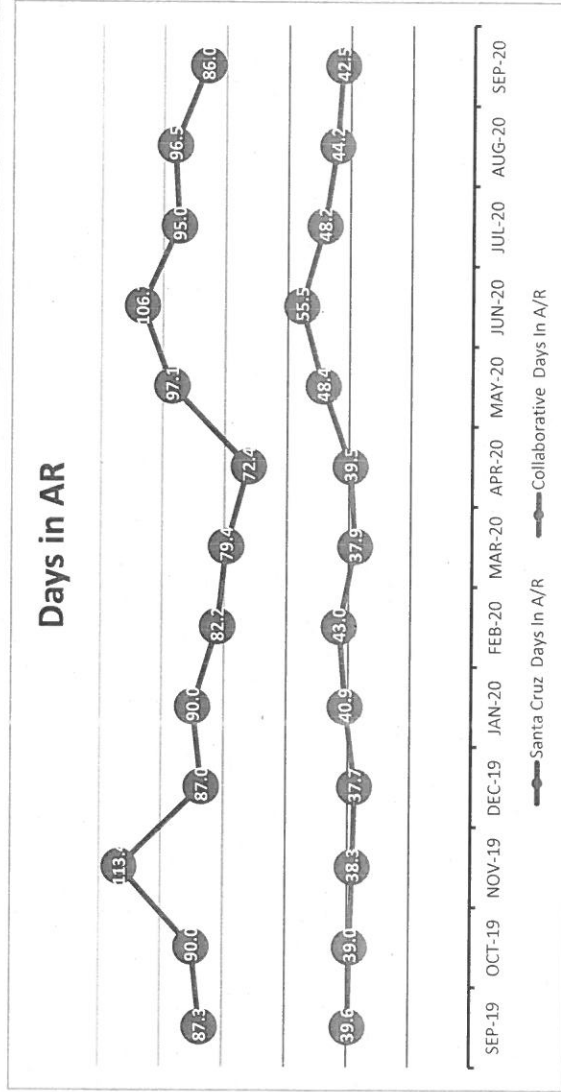
Total number of Open Encounters through the last day of the month run one week after the end of the month.

Days of Open Encounters



Open Encounters are those patient encounters that have yet to be "closed" by the provider in the EMR. Since the encounter has not been closed, the charges have not been exported to the PM for billing.

Days in Accounts Receivable



Total A/R on the last day for the previous month divided by the ADC.



Threats

- Provider shortage
- Space challenges
- Furlough affects on scheduling
- Delay in mobile unit completion (Estimated complete February 2021)
- CZU disruption
- COVID-19 disruption
- Billing challenges
- MAT and RCC groups have been cancelled
- Acupuncture is on abbreviated schedule

Goals

- Maintain denial rates below 2% through June 30, 2021
- Review real time eligibility and patient Work Queues (WQ) on at least 25% of the visits by February 2021
- Automate Charge Router and Claims Processing prior to billing by February 2021
- Automate bulk adjustments by January 2021
- Reduce Charge review days by 10% to 42 days by February 2021
- Complete a review of 16/17 through 19/20 cost report and rate structure of Medicare by March 2021 and adjust rates for wrap payment.
- Begin working on the prioritized list of billing improvement beginning with High value and Hi ease tasks beginning by December 4th.
- Schedule weekly progress tracking meetings with Business Office leadership by December 15th, 2021

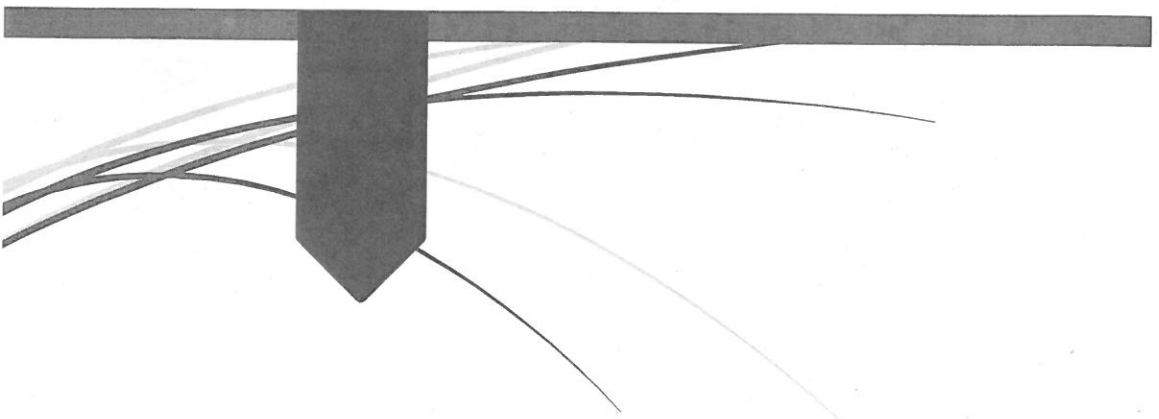
Opportunities

- WHC vaccinated 1400 people in two weeks
- Deploy mobile unit as soon as available
- Enhanced Revenue Cycle technical assistance (free)
- COVID-19 Business Improvement technical assistance (free)
- Seek additional grant opportunities (applied for CARE funds \$352k)
- Increase provider productivity by providing data to providers and setting goals
- Aggressively work to fill Medical Director position and provider vacancies
- Reduce no show and cancellations
- Increase billing efficiencies
- Re-organize two providers to Watsonville Health Center

References

- Projection Report dated 10/30/20
- HSA Financials Report dated 9/30/20
- Revenue Cycle Score Card September 20





Quality Management Report

December 3, 2020



Quality Management Committee

Peer Review and Risk Management Committee

- ▶ Participation in OCHIN Care Transformation Coaching (January 2021)
 - ▶ Chronic disease management with focus on diabetes care
 - ▶ Assigning a Practice Coach
- ▶ Continuing Quality Improvement Projects (diabetes, BMI, cervical and colorectal cancer screenings)
- ▶ Patient Centered Medical Home Recognition 2 out of the 3 sites so far
- ▶ Peer Review Committee (reviewed 4 deaths) this month



HRSA-National Hypertension (HTN) Control Initiative Supplemental Funding

- Conduct **outreach and engage patients** with uncontrolled hypertension to participate in the HTN Initiative,
- Fully **participate in training and technical assistance activities** offered in support of your NHC-HC award,
- Ensure access to and support use of **Bluetooth or wireless-enabled self-measured blood pressure devices** for a majority of your patients with hypertension, and use their data to inform hypertension treatment plans, and
- Collect and share data to support participation in initiative evaluation and reporting activities.
- Maximum request for a three-year period: \$144,960
 - 400 devices
 - Extra help (temporary) Coordinator position
 - EHR Upgrades



HTN Data

(less than 58.9%-qualifies Health Centers for funding)

- Total Patients with hypertension:
 - 2019: 2,666
 - 2020: 3,621
- Percentage of patients 18–85 years of age who had a diagnosis of hypertension overlapping the measurement period and whose most recent blood pressure was adequately controlled (less than 140/90 mmHg)
 - 2019: 65.64% adequately controlled; **34.36% (916) poorly controlled**
 - 2020 (11 months): 42.49% adequately controlled; **57.51% (2,082) poorly controlled**