

**County of Solano
Community Healthcare Board
Regular Meeting**

July 21, 2021

12:00 pm-2:00 pm

Conference Call Microsoft Teams

MS Teams Dial-in number: 1-323-457-3408 and Conference ID: 299 423 65#

Due to COVID-19 social distancing requirements, the Community Health Board meetings will be held via teleconference. To join in for audio only, please use the dial in number and Conference ID above.

The County of Solano Community Health Board does not discriminate against persons with disabilities. If you wish to participate in the meeting and you require assistance to do so, please call Solano County Family Health Services at 707-784-8775 at least 24 hours in advance of the event to make reasonable arrangements to ensure accessibility to the meeting.

Public Comment: To submit public comment, please see the options below.

Mail:

If you wish to address any items listed on the Agenda by written comment, please submit comments in writing to FHS Community Healthcare Board Clerk by U.S. Mail. Written comments must be received no later than 8:30 A.M. on the day of the meeting. The mailing address is: Solano County H&SS, ATTN: FHS CHB Clerk (MS 5-240), P. O. Box 4090, Fairfield, CA 94533. Copies of comments received will be provided to the Board and will become part of the official record but will not be read aloud at the meeting.

Phone:

To submit comments verbally from your phone during the meeting, you may do so by dialing 1-323-457-3408, and Conference ID: 299 423 65#. No attendee ID number is required. Once entered in the meeting, you will be able to hear the meeting and will be called upon to speak during the public speaking period.

Non-confidential materials related to an item on this Agenda, submitted to the Board after posting of the agenda at: https://www.solanocounty.com/depts/ph/bureaus/fhs/community_healthcare_board/ and Family Health Service clinics located at 1119 E. Monte Vista, Vacaville, CA; 2101 Courage Drive, Fairfield, CA; 2201 Courage Drive, Fairfield, CA; and 365 Tuolumne Drive, Vallejo, CA., will be updated at https://www.solanocounty.com/depts/ph/bureaus/fhs/community_healthcare_board/ and emailed upon request. You may request materials by contacting the Clerk at 707-784-8775.

**County of Solano
Community Healthcare Board
Regular Meeting**

July 21, 2021
12:00 pm-2:00 pm
Conference Call Microsoft Teams
MS Teams Dial-in #: 1-323-457-3408, Conference ID: 299 423 65#

AGENDA

1) CALL TO ORDER – 12:00 PM

- a) Welcome
- b) Roll Call

2) APPROVAL OF THE AGENDA

3) APPROVAL OF THE May 19, 2021 and June 16, 2021 MEETING MINUTES

4) PUBLIC COMMENT

This is the opportunity for the Public to address the Board on a matter not listed on the Agenda, but it must be within the subject matter jurisdiction of the Board. Due to COVID-19, the public can join as audio only. If you would like to make a comment, please announce your name and the topic you wish to comment and limit comments to three (3) minutes.

5) PROJECT DIRECTOR/CHIEF EXECUTIVE OFFICER REPORT

- a) COVID-19 Health Center Impact Update
- b) Health Center Operations Update
- c) Staffing Update

**6) CO-APPLICANT AGREEMENT UPDATE BY DEPUTY COUNTY COUNSEL/
RUTH FORNEY, CHAIR**

7) OPERATIONS COMMITTEE UPDATE REPORTS

- a) Report on status of getting the Family Health Services Mobile Clinics back in operation – Jack Nasser
- b) Update on Dental Van and Primary Care Van rates – Fiscal
- c) Verbal update on preliminary year-end fiscal report – Fiscal

8) UNFINISHED BUSINESS

None.

**County of Solano
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9) DISCUSSION

- a) FY 22/23 Budget Development
- b) Resume in-person meetings
- c) Credentialing and Privileging Policy and Procedures.
- d) Questions regarding conflict of interest.
- e) National Association of Community Health Centers (NACHC) Conference.

10) ACTION ITEMS

- a) Review and Approve Policy Number 100.06, Other Health Insurance/Private Insurance Policy and Procedure – Janine Harris
- b) Review and Approve HRSA C8E Capital Grant, final submission – Noelle Soto

11) BOARD MEMBER COMMENTS

12) PARKING LOT (These items are postponed, until further notice.)

- a) Compliance Training and Robert's Rules Review
- b) Health Center Marketing Campaign & Website Design
- c) The IHI Quadruple Aim Initiative * Health Center Practices*

13) NEXT COMMUNITY HEALTHCARE BOARD MEETING

DATE: August 18, 2021
TIME: 12:00 PM
TO JOIN: Telephone Conference Call
Dial: +1-323-457-3408, Conference ID: 299 423 65#

14) ADJOURN



**County of Solano
Community Healthcare Board**

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REGULAR GOVERNING BOARD MEETING MINUTES

Wednesday, May 19, 2021.

Video and Telephone Conference Call

Members Present:

Ruth Forney, Katrina Morrow, Gerald Hase, Jim Jones, Brandon Wirth, Sandra Whaley, and Robert Wieda

Members Absent:

Tracee Stacy, Michael Brown, Anthony Lofton, and Miriam Johnson,

Staff Present:

Dr. Bela Matyas, Gerald Huber, Debbie Vaughn, Dr. Leary, Dr. Rebekah Kim, Jack Nasser, Tess Lapira, Toya Adams, Anna Mae Gonzales-Smith, Noelle Soto, Cheryl Esters, Clarisa Sudarma, Thomas West, Nina Delmendo, Janine Harris, Julie Barga and Patricia Zuñiga

1) Call to Order – 12:09 p.m.

- a) Welcome
- b) Roll Call

2) Approval of May 19, 2021, Agenda

Motion: To approve the May 19, 2021, Agenda

Motion by: Jim Jones and seconded by Katrina Morrow

Discussion: None

Ayes: Ruth Forney, Katrina Morrow, Gerald Hase, Jim Jones, Brandon Wirth, Sandra Whaley, and Robert Wieda

Nays: None

Abstain: None

Motion Carried

3) Approval of April 21, 2021, Meeting Minutes

Motion: To approve the April 21, 2021, Meeting Minutes with the amended correction of the next meeting date as June 16, 2021.

Motion by: Jim Jones and seconded by Brandon Wirth

Discussion: Correction on page 4 item 13 listed the next meeting date as June 16, 2021 and the correct date for the next meeting is May 19, 2021

Ayes: Ruth Forney, Katrina Morrow, Gerald Hase, Jim Jones, Brandon Wirth, Sandra Whaley, and Robert Wieda

Nays: None

Abstain: None



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Motion Carried

4) Public Comment:

None.

5) Project Director/Chief Executive Officer Report

a) COVID-19 Health Center Impact Update- Presented by Dr. Matyas

- i. It was stated Solano County is on track in moving into the CA Orange Tier base on CA blueprint, the earliest this move will take place is the first week of June. Per CA Governor, Gavin Newsom, the CA blueprint will no longer be in effect starting June 15, 2021. This will allow for all CA counties to completely open businesses.
- ii. It was noted the impact of the hospitals have been minimum. Solano County has reported the following: over 33,000 cases, 230 deaths, positivity rate is 5.8%, as of May 19, 2021 14 people hospitalized, 160 active cases, and over 45% of the county residents have been tested over the past year.
- iii. It was mentioned that vaccinations are available to everyone in the county ages 12 years and older, Pfizer can only be administered to 12-18-year-old, 365,000 does of vaccines have been given to residents over the age of 16 years old, and 61% of the county residents have been vaccinated. Vaccination rate percentages are higher with the 65 and older population compared to 64 and younger population. Currently focusing on vaccinating patients coming into the clinics, helping patients obtain access for vaccinations who are homebound, and providing vaccine outreach for homeless encampments.
- iv. It was stated that the clinics are still under CAL-OSHA restrictions. Clinics will obey these restrictions until CAL OSHA relaxes the restrictions or until the pandemic is over. Telehealth has had a positive impact and there are some efforts in ensuring the clinics keep telehealth into the future. It is unknown on the level of telehealth on the federal or state level currently. The State has discussed reimbursement rate of 2/3 of the rate of in person visit.
- v. It was noted that there is no real impact on the health centers, and we continue to operate under the OSHA guidelines, for a health facility. We continue to see people ill with COVID-19 and test those people. Jack Nasser has applied to receive additional vaccine from Health Resources & Services Administration (HRSA).

b) Health Center Operations Update- Presented by Jack Nasser

- i. It was mentioned the clinics will continue to follow CAL OSHA guidelines although other restrictions in CA have been lifted.

c) Staffing Update- Presented by Jack Nasser

- i. It was stated there was a recruitment for a Public Health Nurse for the viral program and a contingent job offer has been given to a strong candidate.
- ii. It was noted there was a recruitment for Medical Assistants and two candidates were selected and have been given contingent job offers.
- iii. It was mentioned a recruitment was posted for Nurse Practitioner/Physician Assistant (NP/PA). There are currently three positions to fill with a total of 2.8 FTE.



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- iv. It was stated FHS is working with HR for the following recruitments: Office Assistant II Bilingual, Registered Nurse, and Senior Registered Nurse. Also, the Clinical Operations Officer recruitment will be ready to post within a week.
- v. It was noted FHS will investigate receiving approval for Office Assistant II to support Admin staff. Furthermore, the American Rescue Act and other recovery funds money will help support current staffing salary and will not be used for new staffing due to a \$4 million deficit within the clinic. There are Federal and State money in the works for the County to receive.

6) Co-Applicant Agreement Update by Deputy County Counsel

- a) Clarisa Sudarma, Deputy County Counsel, noted the current update for the Co-Applicant Agreement is that the third draft is under review and has been distributed to the Executive Board and HSS team by Deputy County Counsel JoAnn Parker. There is a new Deputy County Counsel, Julie Barga, who will be assisting JoAnn Parker.

7) Operations Committee Updates Reports

- a) Fiscal Year 2020/2021 Third Quarter Budget Update – Presented by Fiscal
 - i. Presented by Tess Lapira- (1.) Third Quarter Highlights-Expenditures: No significant changes for Salaries, benefits, services, and supplies from Mid-Year projections, Computer & related equipment on track, Touro contract to spend \$94K more than at Mid-Year due to increased hours for Touro providers (2). Third Quarter Highlights- Revenues: \$748K increase for Quality improvement payments, \$57K decreased revenues for not meeting video grant target, \$479K increased for payer revenue due to increased encounter, Deficit reduced from \$4.3M to \$3.1 M savings of \$1.2 M in 1991 Public Health Realignment.
- b) Community Healthcare Board Self-Assessment Results
 - i. It was asked to move this item to June Board Meeting. This is not a HRSA requirement only internal use information.

8) Unfinished Business

None.

9) Discussion

- a) Review Community Needs Assessment
 - i. Chair stated this form is completed along with the Strategic Plan every three years to align with the HRSA on site visit. The last Community Needs Assessment was completed with the help of Greg Facktor and Associates in 2019 prior to the onsite HRSA visit. This item remains on the agenda to focus on planning and moving forward with finalization in 2022.
 - ii. Referencing page 27 from the 2019 Community Needs Assessment, it was asked: Have we closed the gap on health disparities and access to affordable healthcare services? It was advised the gap has not been closed, there has been a wider gap. Due to the economic effects of the pandemic the population we serve is more in distressed than a year ago.

10) Action Items

- a) Review and Approve HRSA H8F Grant Budget



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- i. This action item is not ready at this time and will be added as an action item for June's meeting.
- ii. Presented by Jack Nasser- \$3.8M that we can use for COVID expenses over the next two years. The budget for the grant is due at the end of month. Currently working with fiscal to finalize the grant budget.

11) Board Member Comments

- a) Katrina – She noted this meeting was very informative and thanked those who shared the information.
- b) Jim – He wanted to inform staff there has been changes to the caller ID name when he receives calls from the clinic. He is hesitant to answer the phone as he is unaware who is calling. He is concerned that this maybe problematic with other patients not answering phone calls from the clinic.
- c) Jim – He noted the process of charting and if there is a more effective way? He mentions in other hospitals someone other than the provider does the charting. It was advised the person charting must be a “medical scribe”. Due to limitations providers are the only one that are allow to chart.
- d) Ruth – She informed she attended the Healthcare for the Homeless National Conference. Registration fees are less for members vs nonmembers, she had found out the Solano County membership has expired.

12) Parking Lot (These Items are postponed, until further notice.)

- a) Compliance Training and Robert's Rules Review
- b) Health Center Marketing Campaign & Website Design
- c) The IHI Quadruple Aim Initiative, “Health Center Practices”

13) Next Community Healthcare Board Meeting

DATE: June 16, 2021
TIME: 12:00 p.m.
TO JOIN: Telephone Conference Call
Dial: 1-323-457-3408, Conference ID: 299 423 65#

15) Adjourn

Meeting was adjourned at 12:45 p.m.

Handouts:

- Solano County Family Health Services 2019 Community Needs Assessment



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REGULAR GOVERNING BOARD MEETING MINUTES

Wednesday, June 16, 2021

Video and Telephone Conference Call

Members Present:

Ruth Forney, Gerald Hase, Jim Jones, Brandon Wirth, Michael Brown, and Tracee Stacy

Members Absent:

Sandra Whaley, Anthony Lofton, Miriam Johnson, Robert Wieda, and Katrina Morrow

Staff Present:

Dr. Bela Matyas, Gerald Huber, Debbie Vaughn, Dr. Leary, Dr. Rebekah Kim, Jack Nasser, Tess Lapira, Toya Adams, Noelle Soto, Cheryl Esters, Clarisa Sudarma, Nina Delmendo, Julie Barga and Patricia Zuñiga

1) Call to Order – 12:05 p.m.

- a) Welcome
- b) Roll Call

2) Approval of June 16, 2021, Agenda

Motion: To approve the June 16, 2021, Agenda

Motion by: Mike Brown and seconded by Jim Jones

Discussion: None

Ayes: Ruth Forney, Gerald Hase, Jim Jones, Brandon Wirth, Michael Brown, and Tracee Stacy

Nays: None

Abstain: None

Motion Carried

3) Public Comment

None.

4) Project Director/Chief Executive Officer Report

- a) COVID-19 Health Center Impact Update- Presented by Dr. Matyas
 - i) It was stated that the State of CA has ended the Blueprint and the Stay at Home Order and has modify masking requirements. This update will allow for FHS patients who are fully vaccinated to go without a mask based on self-attestation. Anyone with a respiratory issue will be required to wear a mask as this was implemented prior to the mask requirements. Workforce regulations are not based on CA Governor's orders but rather from CAL/OSHA orders. CAL/OSHA is meeting on June 17 to discuss mask requirements in the workforce. Aerosol Transmissible Diseases standards through CAL/OSHA is always applied to the clinics. Although, restrictions are less for community members and businesses currently it does not apply to the clinic operating staff and clients within the clinics.



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- ii) It was mentioned COVID disease rates remain low. Vaccination rates are slowly improving, about 67% of adults and 65% of 12-year-old and older in Solano County are vaccinated. FHS continues to do vaccine outreach for homeless individuals at shelters and encampments and provide resources to people who are homebound.
 - iii) It was mentioned that at the clinics, all staff will continue to wear a mask, and any patients coming into the clinic, that are vaccinated will no longer be required to wear a mask. Any patient that has a cough or are ill or not vaccinated will be required to wear a mask, as always. One of the board members raised a question based on what he has read. He understood that at all healthcare facilities, everyone is supposed to be wearing a mask, including those coming into the facilities. Dr. Matyas stated that he thought they may be referencing healthcare facilities, such as hospitals and long term care facilities and not the primary care clinics. He appreciated the question and stated that he would review the information and clarify whether the visitors to our FHS Primary Care clinics are also required to wear a mask.
 - iv) It was later confirmed that all patients and visitors coming into the FHS clinics are required to wear a mask.
- b) Health Center Operations Update-
- i) No update.
- c) Staffing Update- Presented by Jack Nasser
- i) It was stated the recruitment for the Clinical Operations Officer (COO) has been posted. FHS is working with a vendor, The Judge Group, to help identify strong candidates. FHS is actively forming an interview panel for this position. It was asked for the participation of the Board Members to assist in on the interview panel.
 - ii) It was mentioned for the Public Nurse position within the Viral Program a contingency letter and job offer was given to Amber Searcy. Amber is currently a Registered Nurse within the clinics.
 - iii) It was noted there are three Medical Assistants (MA) that have been identified. Currently going through the hiring process. One of the MAs is bilingual.
 - iv) It was stated there are three vacancies to fill for the Nurse Practitioner/Physician Assistants (NP/PA) positions. Interviews were conducted; however, the candidates did not meet the needs and expectations. A new recruitment will be posted for more applicants.
 - v) It was noted a Bilingual Office Assistant II recruitment will be posted within a week. FHS is looking to fill three vacancies.
 - vi) It was mentioned there is an open recruitment for three Registered Nurse positions and two Senior Registered Nurse positions.
 - vii) It was stated there is an agreement with a recruiter for the Clinic Physician Supervisor position. This contract will begin July 1st.
 - viii) It was noted a Health Education Specialist recruitment will start in July.



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5) Co-Applicant Agreement Update by Deputy County Counsel

- a) The third draft of the Co-Applicant Agreement is currently under review.

6) Operations Committee Updates Reports

- a) Community Healthcare Board Self-Assessment Results
 - i) Refer to handout: *Solano County Family Health Services Community Healthcare Board Self-Assessment Results*.
- b) Solano County Family Health Services Quality Assurance/ Quality Improvement Plan Calendar Years 2021 & 2022 - Presented by Dr. Michele Leary, CMO
 - i) Refer to handout: *Solano County Family Health Services Quality Assurance/ Quality Improvement Plan Calendar Years 2021 & 2022*
 - ii) This is a two-year plan for 2021 & 2022. Introduction & Scope remains the same. There is a QA/QI committee that meetings quarterly. Appendix 1 refers to the core quality measures.

7) Unfinished Business

None.

8) Discussion

- a) Strategic Planning (3-year cycle)
 - i) This item is kept on the agenda as a reminder and reference to prepare for the HRSA On Site Visit.
- b) Homeless Resource Pop-up Event; FHS Mobile Clinics
 - i) The chair believes having the FHS Mobile Clinics available at events will be beneficial to the community. There are many events throughout the county.
 - ii) It was advised due to staffing shortages the FHS Mobile Clinics are unable to participate in events, especially during the week. It was noted perhaps on the weekend events the FHS Mobile Clinic can participate dependent on staff volunteers.
 - iii) It was mentioned the status and function of the FHS Mobile Clinics would have to be investigated in making sure it runs properly.
 - iv) It was asked by Brandon Wirth for staff to provide a report for next month's meeting on the challenges or needs that FHS has in ensuring the FHS Mobile Clinics will be operating in a timely manner.
 - v) It was noted there are grant money FHS can use for Uber Health to allow patients to get to medical appointments.

9) Action Items

- a) The Board will consider approval of the QI/QA Plan.

Motion: To approve the QI/QA Plan

Motion by Brandon Wirth and seconded by Gerald Hase

Discussion: None

Ayes: Ruth Forney, Gerald Hase, Jim Jones, Brandon Wirth, Michael Brown, and Tracee Stacy



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Nays: None

Abstain: None

Motion Carried

b) The Board will consider approval of the HRSA H8F Grant Submission.

Motion: To approve the HRSA H8F Grant Submission

Motion by: Mike Brown and seconded by Brandon Wirth

Discussion: It was noted this is additional money not included in the budget, as it is new grant that was recently known to FHS. This grant money is allowing FHS to unfreeze some of the positions to maintain the operations within the clinics. This grant will help offset some of the short fall of ongoing current expenditures and helping with the staffing shortages. It was stated with this grant there will be an estimated savings of \$2.2 million dollars.

Ayes: Ruth Forney, Gerald Hase, Jim Jones, Brandon Wirth, Michael Brown, and Tracee Stacy

Nays: None

Abstain: None

Motion Carried

c) The Board will consider approval to apply for the HRSA C8E American Rescue Plan Act Capital Grant in the amount of \$749,678.00.

Motion: To approve to apply for the HRSA C8E American Rescue Plan Act Capital Grant in the amount of \$749,678.00.

Motion by: Brandon Wirth and seconded by Mike Brown

Discussion: Refer to handout: *FY 2021 American Rescue Plan- Health Centers Construction and Capital Improvements HRSA -21-114 General Overview*. This grant money would be used for equipment needs within the clinics.

Ayes: Ruth Forney, Gerald Hase, Jim Jones, Brandon Wirth, Michael Brown, and Tracee Stacy

Nays: None

Abstain: None

Motion Carried

10) Board Member Comments

a) Brandon – He suggested the August board meeting to be in person.

11) Parking Lot (These Items are postponed, until further notice.)

a) Compliance Training and Robert's Rules Review

b) Health Center Marketing Campaign & Website Design



County of Solano Community Healthcare Board

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- c) The IHI Quadruple Aim Initiative, "Health Center Practices"

12) Next Community Healthcare Board Meeting

DATE: July 21, 2021

TIME: 12:00 p.m.

TO JOIN: Telephone Conference Call

Dial: 1-323-457-3408, Conference ID: 299 423 65#

15) Adjourn

Meeting was adjourned at 12:45 p.m.

Handouts:

- Solano County Family Health Services Community Healthcare Board Self-Assessment Results
- Solano County Family Health Services Quality Assurance / Quality Improvement Plan Calendar Years 2021 & 2022
- FY 2021/2023 American Rescue Plan Act Funding for Health Centers: Grant Number H8FCS40398
- FY 2021 American Rescue Plan- Health Centers Construction and Capital Improvements HRSA - 21-114 General Overview

Primary Care Van
&
Dental Van

Update to PPS Rates

UPDATE TO PPS RATES

Primary Care Van

- Interim Rate: \$128.72
- Permanent Rate: **\$236.89**

Primary Care Van is attached to
2201 Courage Drive*

*Interim payments will be settled to the permanent rate

Dental Van

- Permanent Rate: \$233.63
- REVISED Permanent Rate: **\$278.59**

Dental Van is attached to 2101
Courage Drive effective 7/1/2021**

**No settlement because Dental Van has a permanent rate



WILL LIGHTBOURNE
DIRECTOR

State of California—Health and Human Services Agency
Department of Health Care Services



GAVIN NEWSOM
GOVERNOR

July 7, 2021

Tess Lapira
Director of Administrative Services
County of Solano – FHS Primary Care Van
275 Beck Avenue, MS 5-200
Fairfield, CA 94533-6804

PPS RATE SETTING COST REPORT

COUNTY OF SOLANO – FHS PRIMARY CARE VAN
NATIONAL PROVIDER IDENTIFIER (NPI): 1427330869
SERVICE ADDRESS: 2201 COURAGE DRIVE, FAIRFIELD, CA 94533-6733
FISCAL PERIOD ENDED: JUNE 30, 2017

Dear Ms. Lapira:

On July 17, 2018, County of Solano submitted a Federally Qualified Health Center (FQHC) Prospective Payment System (PPS) – Rate Setting Cost report for the above mobile van. The Welfare and Institutions Code and the California State Plan provides guidance on how the Medi-Cal Program reimburses mobile FQHCs under PPS. The California State Plan, Attachment 4.19B, Section D.3, Page 6E, states:

Services provided at intermittent service sites that are affiliated with an FQHC or RHC that operate less than 20 hours per week, or mobile facilities are reimbursed at the rate established for the affiliated FQHC or RHC. For purposes of this paragraph, a facility is affiliated with an FQHC or RHC when the facility is owned or operated by the same entity, as well as, licensed or enrolled as a Medi-Cal provider.

The Welfare and Institutions Code, Section 14132.100(j) also states:

(1) Visits occurring at an intermittent clinic site, as defined in subdivision (h) of Section 1206 of the Health and Safety Code, of an existing FQHC or RHC, in a mobile unit as defined by paragraph (2) of subdivision (b) of Section 1765.105 of the Health and Safety Code, or at the election of the FQHC or RHC and subject to paragraph (2), a location added to an existing primary care clinic license by the State Department of Public Health prior to January 1, 2017, shall be billed by and reimbursed at the same rate as the FQHC or RHC that either established the

Ms. Lapira
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intermittent clinic site or mobile unit, or that held the clinic license to which the location was added prior to January 1, 2017.

Mobile FQHCs are prohibited from having an individual PPS rate. Instead, mobile FQHCs are reimbursed at the PPS rate of an affiliated FQHC. Therefore, the primary care van will not receive an individual rate and we will not process the PPS Rate Setting Cost Report for FYE June 30, 2017. As you have corresponded with the Department, we will use the following clinic to establish the PPS rate for FHS Primary Care Van:

NPI 1083845275
Solano County Health & Social Services Family Health Services,
2201 Courage Drive, Fairfield, CA 94533-6733.

If you have any questions, please contact Raj Khela at (916) 713-8862.

Sincerely,

Allison V Clinton

Allison Clinton, Section Chief
FQHC/RHC Section
Financial Audits Branch



WILL LIGHTBOURNE
DIRECTOR

State of California—Health and Human Services Agency
Department of Health Care Services



GAVIN NEWSOM
GOVERNOR

July 7, 2021

Tess Lapira
Director of Administrative Services
County of Solano – FHS Primary Dental Van
275 Beck Avenue, MS 5-200
Fairfield, CA 94533-6804

COUNTY OF SOLANO – FHS DENTAL VAN
NATIONAL PROVIDER IDENTIFIER (NPI): 1730470006
SERVICE ADDRESS: 2101 COURAGE DRIVE, FAIRFIELD, CA 94533-6804

According to the information you provided on May 28, 2021, your Federally Qualified Health Center – FHS Dental Van’s Medi-Cal PPS rate has been set with affiliated clinic, Fairfield Family Health, NPI 1508078817 as shown below:

| Revenue Code | Rate | Effective Date |
|--------------|----------|----------------|
| 003 | \$278.59 | 7/1/2021 |

If you have further questions regarding this determination, please contact Raj Khela, Auditor, at (916) 713-8862.

Sincerely,

Allison V Clinton

Allison Clinton, CPA
FQHC/RHC Section Chief
Financial Audits Branch

Certified



Family Health Services

Other Health Insurance/Private Insurance

Policy Number: 100.06

| | |
|------------------------|--------------------------|
| Effective Date | July 1, 2019 |
| Frequency of Review | Annual |
| Last Reviewed | July 12, 2021 |
| Last Updated | July 12, 2021 |
| Author | Janine Harris |
| Responsible Department | Revenue Cycle Management |

PURPOSE:

The purpose of this policy is to describe requirements for accepting other health insurance or private insurance for Family Health Services (FHS) patients. FHS staff are expected to comply with this policy and procedure.

FHS will ensure access to health care services by families and individuals regardless of the patient's ability to pay. At no time will a patient be denied services because of an inability to pay. Refer to the Sliding Fee Scale Discount Program policy and procedure, #100.03.

DEFINITIONS:

OHC – Private insurance, commercial insurance, Kaiser, Tri-Care, out-of-network managed Medi-Cal, Medicare Part C, etc.

BACKGROUND

It is the policy of Solano County Health and Social Services to uphold compliance with government regulations. FHS is a Federally Qualified Health Center (FQHC) and receives federal funding under the Health Center Program authorized by section 330 of the Public Health Service (PHS) Act (42 U.S.C. 254b) ("section 330"), as amended (including sections 330(e) and (h)). The program is administered by the federal Health Resources and Services Administration (HRSA).

POLICY:

Family Health Services (FHS) does not accept private health insurance, commercial insurance, Kaiser, Tri-Care, out-of-network managed Medi-Cal, Medicare Part C, or other insurance. FHS accepts Medi-Cal, Partnership HealthPlan of California (PHC) patients capitated to FHS, PHC Special Members or Direct Members, and Medicare.

FHS shall verify insurance eligibility for each patient upon scheduling an appointment, pre-registration, and check-in, as described in the Insurance Eligibility policy and procedure, #100.01. If there is a patient who is a PHC patient and capitated to FHS but shows another primary insurance that FHS does not accept, FHS will refer the patient to the primary insurance to determine where they can be seen. FHS staff will contact PHC to request PHC changes the patient's capitation from FHS since FHS does not accept the patient's primary insurance.



Family Health Services

Other Health Insurance/Private Insurance

Policy Number: 100.06

PROCEDURE:

1. FHS staff shall verify insurance eligibility upon scheduling an appointment, pre-registration, and check-in. If the patient has an OHC, FHS staff shall refer the patient to the OHC.
2. FHS does not contract with any OHC. If there is a patient who is capitated to FHS by PHC, FHS staff shall refer the patient to the OHC and contact PHC to request PHC changes the patient's capitation since FHS does not accept their primary insurance.
3. If an established FHS patient obtains OHC coverage after establishing care with FHS, FHS shall inform the patient that FHS does not accept their primary insurance and refer them to their OHC to determine where they can establish care. FHS staff shall contact PHC to request PHC changes the patient's capitation.

Knowledge of a violation or potential violation of this policy must be reported directly to the FHS Revenue Cycle Manager and the FHS Executive Director.

| | |
|----------------------------|---|
| REFERENCED POLICIES | Insurance Eligibility #100.01 Sliding Fee Scale Discount Program #100.03 |
| REFERENCED FORMS | |
| REFERENCES | |

Chair - Community Healthcare Board

Date

Vice-Chair - Community Healthcare Board

Date

BUDGET JUSTIFICATION - COUNTY OF SOLANO
 FY 2021/2024 American Rescue Plan - Health Center Construction and Capital Improvements
 Project Type: Equipment Only
 Grant Number: C8E (TBD)
 PERIOD OF PERFORMANCE: September 1, 2021 to August 31, 2024

The purpose of the American Rescue Plan - Health Center Construction and Capital Improvements (ARP-Capital) one-time funding opportunity is to support construction, expansion, alteration, renovation, and other capital improvements to modify, enhance, and expand health care infrastructure.

| REQUESTED REVENUE | Total | |
|--|------------|--|
| ARP-Capital (September 1, 2021 TO August 31, 2024) | \$ 749,678 | County of Solano (Family Health Services (FHS)) will utilize ARP-Capital funds to complete an "Equipment Only" project for existing FHS service sites. The funds will be used to purchase clinical and non-clinical equipment and supplies for the modification, enhancement and expansion of healthcare services (medical and dental) available to the patient population. The total FHS project cost is \$749,678. This application requests \$749,678 to support the total equipment and supplies costs. The Equipment Only project is anticipated to begin September 2021 and complete by August 2024. |
| Sep 1, 2021 to Aug 31, 2022 | \$ 532,673 | |
| Sep 1, 2022 to Aug 31, 2023 | \$ 149,478 | |
| Sep 1, 2023 to Aug 31, 2024 | \$ 67,527 | |

| EXPENDITURES Object Class Category with Line Item Justification | Year 1 | Year 2 | Year 3 | Total Allowable Costs | Total Other Costs | Total Unallowable Costs |
|---|------------|-----------|-----------|-----------------------|-------------------|-------------------------|
| | Federal | Federal | Federal | | | |
| Line 1 - ADMINISTRATIVE AND LEGAL EXPENSES | | | | | | |
| A. Personnel | | | | | | |
| B. Fringe Benefits | | | | | | |
| C. Travel | | | | | | |
| TOTAL Line 1 | | | | | | |
| Line 2 - LAND STRUCTURES, RIGHT-OF-WAY, APPRAISALS, ETC. | | | | | | |
| TOTAL Line 2 | | | | | | |
| Line 3 - RELOCATION EXPENSES AND PAYMENTS | | | | | | |
| TOTAL Line 3 | | | | | | |
| Line 4 - ARCHITECTURAL AND ENGINEERING FEES | | | | | | |
| F. Contractual | | | | | | |
| TOTAL Line 4 | | | | | | |
| Line 5 - OTHER ARCHITECTURAL AND ENGINEERING FEES | | | | | | |
| TOTAL Line 5 | | | | | | |
| Line 6 - PROJECT INSPECTION FEES | | | | | | |
| TOTAL Line 6 | | | | | | |
| Line 7 - SITE WORK | | | | | | |
| TOTAL Line 7 | | | | | | |
| Line 8 - DEMOLITION AND REMOVAL | | | | | | |
| TOTAL Line 8 | | | | | | |
| Line 9 - CONSTRUCTION | | | | | | |
| G. Construction | | | | | | |
| TOTAL Line 9 | | | | | | |
| Line 10 - EQUIPMENT | | | | | | |
| D. Equipment | | | | | | |
| <i>Provide the total cost of equipment purchases with a unit cost of \$5,000 or more. Include line-item cost information in the Equipment List form.</i> | | | | | | |
| Reclining Phlebotomy Chair (ML10666): To facilitate the drawing of blood from patients at service sites and if patients faint during collection, the chair may be adjusted into the Trendelenburg position to improve patient stabilization @ \$2,015 (3 for \$6,045) | \$ 6,045 | \$ - | \$ - | \$ 6,045 | | |
| Exam Table Top (for Ritter 225): To replace current outdated/in disrepair exam table tops with updated/ergonomic tables that will enhance and expand primary adult/pediatric care @ \$524 each (12 for \$6,288) | \$ 6,288 | \$ - | \$ - | \$ 6,288 | | |
| Power Exam Chair (Ritter 225): To replace current outdated/in disrepair exam tables with updated/ergonomic tables that will enhance and expand primary adult/pediatric care @ \$6,753 each (12 for \$81,036) | \$ 81,036 | \$ - | \$ - | \$ 81,036 | | |
| Illuminated Eye Test Cabinet: To equip and/or replace eye test units that will enhance primary adult/pediatric care @ \$1,486 (4 for \$5,944) | \$ 5,944 | \$ - | \$ - | \$ 5,944 | | |
| Baby Scale Health O Meter (1058371): To equip and/or replace current pediatric scales to enhance primary pediatric care @ \$2,731 each (6 for \$16,386) | \$ 16,386 | \$ - | \$ - | \$ 16,386 | | |
| Vital Signs Monitor Mobile Stand (4499-MBS): To replace current outdated/in disrepair mobile stands to enhance primary adult/pediatric care @ \$349 each (30 for \$10,470) | \$ 6,980 | \$ 3,490 | \$ - | \$ 10,470 | | |
| Vital Signs Monitors (44WT-B): To replace current outdated/in disrepair mobile stands to enhance primary adult/pediatric care @ \$2,584 each (30 for \$77,520) | \$ 51,680 | \$ 25,840 | \$ - | \$ 77,520 | | |
| Dental Dry Vacuum/Suction (ECO-VAC) Unit: To replace current outdated/in disrepair dental dry vacuum/suction units to enhance adult/pediatric dental care @ \$1,897 each (6 for \$11,382) | \$ 11,382 | \$ - | \$ - | \$ 11,382 | | |
| Dental Panoramic X-Ray System: To equip and/or update dental service sites' x-ray units to update, enhance and expand adult/pediatric dental diagnosing capabilities @ \$21,675 each (3 for \$65,025) | \$ 21,675 | \$ 21,675 | \$ 21,675 | \$ 65,025 | | |
| Dental Chair Unit (dental patient chair, patient light, LED ceiling mount): To replace current outdated/in disrepair dental chair units with updated/ergonomic chairs that will enhance and expand adult/pediatric dental care @ \$17,611 each (6 for \$105,666) | \$ 105,666 | \$ - | \$ - | \$ 105,666 | | |

BUDGET JUSTIFICATION - COUNTY OF SOLANO
 FY 2021/2024 American Rescue Plan - Health Center Construction and Capital Improvements
 Project Type: Equipment Only
 Grant Number: C8E (TBD)
 PERIOD OF PERFORMANCE: September 1, 2021 to August 31, 2024

The purpose of the American Rescue Plan - Health Center Construction and Capital Improvements (ARP-Capital) one-time funding opportunity is to support construction, expansion, alteration, renovation, and other capital improvements to modify, enhance, and expand health care infrastructure.

| REQUESTED REVENUE | Total | |
|--|------------|--|
| ARP-Capital (September 1, 2021 TO August 31, 2024) | \$ 749,678 | County of Solano (Family Health Services [FHS]) will utilize ARP-Capital funds to complete an "Equipment Only" project for existing FHS service sites. The funds will be used to purchase clinical and non-clinical equipment and supplies for the modification, enhancement and expansion of healthcare services (medical and dental) available to the patient population. The total FHS project cost is \$749,678. This application requests \$749,678 to support the total equipment and supplies costs. The Equipment Only project is anticipated to begin September 2021 and complete by August 2024. |
| Sep 1, 2021 to Aug 31, 2022 | \$ 532,673 | |
| Sep 1, 2022 to Aug 31, 2023 | \$ 149,478 | |
| Sep 1, 2023 to Aug 31, 2024 | \$ 67,527 | |

| EXPENDITURES Object Class Category with Line Item Justification | Year 1 | Year 2 | Year 3 | Total Allowable Costs | Total Other Costs | Total Unallowable Costs |
|---|------------|------------|-----------|-----------------------|-------------------|-------------------------|
| | Federal | Federal | Federal | | | |
| Queuing System (Qmatic System - self service kiosk, display/signage, software): To facilitate a fair, honest waiting experience and productive tracking system for one adult/pediatric dental care service site @ \$22,271 each (1 for \$22,271) | \$ 22,271 | \$ - | \$ - | \$ 22,271 | | |
| Laptop and Accessories Bundle (Dell Latitude 7420 laptop, docking station, keyboard, mouse and laptop bag): To equip and/or replace (refresh) current outdated technology to facilitate enhanced adult/pediatric primary and dental care (in-person/telehealth) @ \$1,853 each (14 for \$25,942) | \$ 14,822 | \$ 5,560 | \$ 5,560 | \$ 25,942 | | |
| Document Scanner (Fujitsu Document Scanner): To equip and/or replace (refresh) current outdated technology to facilitate enhanced adult/pediatric primary and dental care (in-person/telehealth) @ \$952 each (28 for \$26,656) | \$ 22,850 | \$ 1,903 | \$ 1,903 | \$ 26,656 | | |
| Desktop and Accessories Bundle (Dell OptiPlex Desktop tower, two monitors, keyboard, mouse): To equip and/or replace (refresh) current outdated technology to facilitate enhanced adult/pediatric primary and dental care (in-person) @ \$1,422 each (163 for \$231,786) | \$ 102,387 | \$ 91,010 | \$ 38,389 | \$ 231,786 | | |
| Hemoglobin A1C Point of Care Analyzer (Afinion2): To equip and/or replace HgbA1C analyzer units that will enhance primary adult/pediatric care @ \$6,578 (7 for \$48,148) | \$ 48,146 | \$ - | \$ - | \$ 48,146 | | |
| TOTAL Line 10 | \$ 523,558 | \$ 149,478 | \$ 67,527 | \$ 740,563 | \$ - | \$ - |
| Line 11 - MISCELLANEOUS | | | | | | |
| <i>E. Supplies</i> Include equipment items that cost less than \$5,000 each and other supplies. | | | | | | |
| Skin Tag & Mole Removal Pen (FDA Laser Plasma): Provide outpatient treatment of skin ailments in lieu of referring out to specialists @ \$98 each (6 for \$585) | \$ 585 | \$ - | \$ - | \$ 585 | | |
| Manual Audiometer (Welch Allyn 28200AM 282 Manual Audiometer): Portable, light, compact adult/portable pediatric audiometer for the annual routine evaluation of a patient's hearing threshold to diagnosis hearing loss and disorders @ \$1,875 each (2 for \$3,750) | \$ 3,750 | \$ - | \$ - | \$ 3,750 | | |
| In-Office Hysteroscopy Unit (Endosee advance direct visualization system, advance cannulas, alligator grasper forceps, advance convenience kit, cystometry tube set): To allow FHS Gynecological practitioners to provide internal additional services to patients. Providers will be able to directly visualize the endometrial cavity to assess pathology, providers will have the ability to remove embedded IUD's in lieu of referring out to specialists (e.g., UCSF) @ \$4,775 each (1 for \$4,775) | \$ 4,780 | \$ - | \$ - | \$ 4,780 | | |
| <i>Total Supplies</i> | \$ 9,115 | \$ - | \$ - | \$ 9,115 | | |
| <i>H. Other</i> | | | | | | |
| TOTAL Line 11 (E. Supplies + H. Other) | \$ 9,115 | \$ - | \$ - | \$ 9,115 | \$ - | \$ - |
| Line 12 - SUBTOTAL (Lines 1 through 11) | \$ 532,673 | \$ 149,478 | \$ 67,527 | \$ 749,678 | \$ - | \$ - |
| Line 13 - CONTINGENCIES | | | | | | |
| TOTAL Line 13 | | | | | | |
| Line 14 - SUBTOTAL COSTS (Line 12 + Line 13) | \$ 532,673 | \$ 149,478 | \$ 67,527 | \$ 749,678 | \$ - | \$ - |
| Line 15 - Project (Program) Income | | | | | | |
| TOTAL Line 15 | | | | | | |
| Line 16 - TOTAL PROJECT COSTS | \$ 532,673 | \$ 149,478 | \$ 67,527 | \$ 749,678 | \$ - | \$ - |
| Line 17 - TOTAL GRANT FUNDING REQUESTED | \$ 532,673 | \$ 149,478 | \$ 67,527 | \$ 749,678 | \$ - | \$ - |