

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

December 18, 2024
12:00 pm – 2:00 pm
2101 Courage Drive, Fairfield, CA 94533
Room Location: Multi-Purpose Room

AGENDA

1) CALL TO ORDER – 12:00 PM

- a) Welcome
- b) Roll Call

2) APPROVAL OF THE DECEMBER 18, 2024 AGENDA

3) 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. 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.

REGULAR CALENDAR

4) APPROVAL OF MINUTES

Approval of the November 20, 2024, draft meeting minutes.

5) CLINIC OPERATIONS REPORTS

Written Report submitted?

- | | |
|---|-----|
| a) Staffing Update | YES |
| b) Credentialing Update – Desiree Bodiford | YES |
| c) HRSA Grants Update(s) – Noelle Soto | YES |
| d) Grievances/Compliments – Rebecca Cronk | YES |
| e) H&SS Compliance – Krista McBride | YES |
| f) Finance & Revenue Cycle Management – Nina Delmendo | YES |
| g) Referrals – Cynthia Coutee | YES |
| h) OCHIN EPIC Update(s) – Dona Weissenfels | NO |
| i) QI Update – Han Yoon | YES |
| j) FHS Clinic Q-Matic Stats – Noelle Soto | YES |

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

- 6) CHB FOLLOW-UP TO CLINIC QUALITY AND OPERATIONAL REPORTS**
Review, Follow-up & Action: CHB will provide feedback on reports, request additional information on quality and clinic operations reports & follow up on these requests.
- 7) HRSA PROJECT OFFICER REPORT**
- a) Health Center HRSA Project Officer Update – Dona Weissenfels
 - i) Health Center Activities – Internal and External Update
 - ii) Strategic Plan Report Update
- 8) BUSINESS GOVERNANCE**
- a) Review and consider approval of the Fiscal Year 2025 Health Center Program Service Area Competition Competing Continuation application – Noelle Soto
 - i) **ACTION ITEM:** The Board will consider approval of the Fiscal Year 2025 Health Center Program Service Area Competition Competing Continuation application
 - b) Review and consider approval of expanding FHS clinical scope of services. Request to add chiropractic services to all primary care sites and add Licensed Marriage and Family Therapy (LMFT) services to support the Pediatric Clinic – Dona Weissenfels
 - i) **ACTION ITEM:** The Board will consider approval of adding Chiropractic services to all primary care sites (Vacaville, Fairfield, and Vallejo). In addition, the Board will consider approval of adding LMFT services to the Fairfield Pediatric Clinic
 - c) Review and consider approval of the 2025 Community Healthcare Board Calendar
 - i) **ACTION ITEM:** The Board will consider approval of the 2025 Community Healthcare Board Calendar
 - d) **BOARD NOMINATIONS AND ELECTIONS FOR THE CHAIR, VICE CHAIR AND MEMBER AT LARGE – These will be an open vote process:**
 - 1. Each Nominee will make a brief statement
 - 2. One person will be elected for each position: Chair, Vice Chair and Member at Large.
 - 3. After votes are tallied, the Board will vote to approve the appointments of Board Members elected.
 - 4. Election process will be turned over to the Community Healthcare Board Clerk, Danielle Seguerre-Seymour to announce the appointments.
 - i) **ACTION ITEM:** The Board will consider and approve the appointments of the Board Members elected as the Chair, Vice Chair and the Member at Large

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

9) DISCUSSION

- a) Review of the Community Health Board By-Laws Officer Term of Service for the future agenda. Staff will create a grid with each Board Member's start date and term expiration prior to the discussion. Term length will be considered (expand from one to two years).

10) BOARD MEMBER COMMENTS

11) ADJOURN: TO THE COMMUNITY HEALTHCARE BOARD MEETING OF:

DATE: January 15, 2025
TIME: 12:00 pm – 2:00 pm
LOCATION: Multi-Purpose Room
2201 Courage Drive
Fairfield, CA 94533



County of Solano
Community Healthcare Board
DRAFT

REGULAR GOVERNING BOARD MEETING MINUTES

Wednesday, November 20, 2024

In Person Meeting

Members Present:

At Roll Call: Michael Brown, Marbeya Ellis, Ruth Forney, Charla Griffith, Gerald Hase, Anthony Lofton, Seema Mirza, Annabelle Sanchez, Tracee Stacy, Brandon Wirth.

Members Absent: Etta Cooper, Deborah Hillman, Rovina Jones, Don O' Conner, Sandra Whaley.

Staff Present: Cynthia Coutee, Dona Weissenfels, Dr. Bela Matyas, Dr. Michelle Stevens, Emery Cowan, Han Yoon, Kelly Welsh, Krista McBride, Nina Delmendo, Noelle Soto, Pierce Leavell, Raechel Leas, Valerie Flores, Whitney Hunter, Danielle Seguerre-Seymour, Katreena Dotson.

Brandon Wirth acknowledged and welcomed newly promoted Health and Social Services Director, Emery Cowan, to the Community Healthcare Board meeting. Emery introduced herself and expressed her gratitude for being part of the CHB. She discussed her professional background, transitioned from Behavioral Health to H&SS Director. Emery stated that she is familiar with health care disparities and is eager to break barriers on matters such as equity efforts.

Dona Weissenfels announced that board member, Deborah Hillman, was not present because she was dealing with the loss of her husband. A card was extended to the Board Members and County staff to sign and express their condolences.

1) Call to Order – 12:03 PM

- a) Welcome
- b) Roll Call

2) Approval of the November 20, 2024, Agenda

Discussion: Brandon Wirth requested to correct Agenda Item 8b from "Voting on the 2024 Community Healthcare Board Calendar" to "Voting on the 2025 Community Healthcare Board Calendar".

Motion: To approve the revised November 20, 2024, Agenda.

Motion by: Tracee Stacey and seconded by Michael Brown.

Ayes: Michael Brown, Marbeya Ellis, Ruth Forney, Charla Griffith, Gerald Hase, Anthony Lofton, Seema Mirza, Annabelle Sanchez, Tracee Stacy, Brandon Wirth.

Nays: None.

Abstain: None.

Motion Carried.



County of Solano
Community Healthcare Board
DRAFT

3) Public Comment

None.

Regular Calendar

4) Approval of Minutes

Approval of the October 16, 2024, draft Minutes.

Discussion: None.

Motion: To approve the October 16, 2024, draft Minutes.

Motion by: Marbeya Ellis and seconded by Anthony Lofton.

Ayes: Michael Brown, Marbeya Ellis, Ruth Forney, Charla Griffith, Gerald Hase, Anthony Lofton, Seema Mirza, Annabelle Sanchez, Tracee Stacy, Brandon Wirth.

Nays: None.

Abstain: None.

Motion Carried.

5) Clinic Operations Reports

a) **Staffing Update** — Pierce Leavell (*Please reference the “FHS Staffing Update – November 20, 2024”*)

- Pierce Leavell reported that three (3) Medical Assistants and two (2) Physician Assistants were recently hired. Pierce also reported that one (1) Nurse Practitioner and one (1) Clinic Registered Nurse) departed in the months of October and November.
- Brandon Wirth asked how long it takes to post a vacant position and asked if HR is responsive with the process. Tracee Stacy commented on prioritizing funds to hire key personnel and asked if support is needed from the Board. Pierce, Dona Weissenfels and Dr. Bela Matyas explained that there is a process from when an employee vacates to when that vacancy is filled. There are variables such as posting the position, receiving applicants, interviewing, but the hiring process typically takes 2-5 weeks. Dr. Matyas clarified that Human Resources has been supportive with the recruitment process, but the department is also lacking personnel, and Family Health Services (FHS) is working with third-party recruiters to help with hiring providers. He acknowledged that advertising could improve but the County had been lacking applicants, clarifying that it's not the lack of posting jobs, but having candidates to fill the positions.
- Annabelle Sanchez expressed the importance of fixing the vacancy issue and suggested staffing strategies, including mentorship programs for new graduates and benefits for part-time employees. Dona explained that several Medical Assistants were on maternity leave and stated that there isn't a quick process to hire temporary staff. She reported that FHS has hired providers, but they are lacking MA support. Dr. Matyas confirmed that H&SS has several



County of Solano
Community Healthcare Board
DRAFT

contracts with schools, including Touro University, where nurses, medical assistants, and physicians complete clinic rotations and are encouraged to apply for a permanent County job. He stated that County salaries aren't competitive compared to private sectors, but the benefits are comparable. He also stated that employee allocation has increased since 2023, but revenue still needs to be generated to pay for staffing and to operate at a high-level. Dr. Matyas also mentioned that the County is unionized so personnel strategies are limited.

- b) **Credentialing Update** — Raechel Leas – *(Please reference the “FHS Credentialing, Provider Enrollment and Sanctioning Screening Activities – Status Report – November 2024”)*
- Raechel reported that in the month of October 136 providers were screened, with no exclusions found. She also stated that 10 providers were credentialed, while four were re-credentialed.
 - There were no questions from the Board.
- c) **HRSA Grant Update(s)** — Noelle Soto – *(Please reference the “Health Resources and Services Administration (HRSA) Grant Updates – November 20, 2024”)*
- Noelle announced that the Fiscal Year 2025 Health Center Program Service Area Competition Competing Continuation application was submitted, and applicable documents would be presented at the December CHB Meeting for Board Approval. She also stated that FHS would be prepping for the 2024 Ryan White Services Report and the 2024 Uniform Data System Report for February 2025 and March 2025 deadline submission.
 - There were no questions from the Board.
- d) **Grievances/Compliments** — Pierce Leavell *(Please reference the “Grievance Reports, April-December 2023 & January– October 2024” and “Grievance Category Definitions”)*
- Pierce reported that grievances filed were primarily in the Scheduling category, but the severity rating was under 3%. The “Scheduling” category will likely stay high until scheduling transitions from 75% to 100%.
 - Brandon Wirth asked when the Epic system went live and if scheduling would improve in November. Dona Weissenfels explained that the Epic transition was in September and she anticipated that scheduling would not stabilize until January 2025, due to the holidays and staffing time off.
 - Annabelle Sanchez inquired about the how the grievances are filed, reported, and resolved. Dona clarified that patients could report grievances to their insurance carrier, such as Partnership Healthplan (PHC), as well as in the clinics. She assured the Board that FHS handles reported grievances with importance and in a timely manner by research and customer service.
 - Tracee Stacy asked if the Epic system could track and log if there was a patient that is having scheduling issues, as well as average wait time notice. Dona stated that the Call Center medical assistants work proactively with the patients to get them scheduled or seen by walk-in appointment. She also explained that tracking data was not a capable feature with NextGen, so FHS is working to get the information in report form on Epic, to share with the Board. Dr. Bela Matyas added that scheduling and access to care grievances were expected in September and October due to the electronic medical records transition but stated that it has been improving.
 - Seema Mirza mentioned the difficulty and delays with clinics filling prescriptions. Dona and Dr. Matyas explained that the Patient Portal has an electronic prescription feature that is a faster process, but filling is also handled depending on the type of medication and disease.
 - Mike Brown asked for clarification on the numbers provided on the report. Dr. Matyas clarified that the number on the graph identifies the number of patients that filed grievances. Mike also inquired about the Privacy category. Dr. Matyas explained an example of privacy complaint is



County of Solano Community Healthcare Board DRAFT

releasing patient information inappropriately, but the “Scheduling” and “Access to Care” were the categories affected.

- Annabelle inquired about the “Quality of Care” category and asked how the clinics are evaluating and addressing that area. Dona informed that Board that Epic can provide data that NextGen could not. FHS has a 3-year quality workplan, as well as techniques, and tools that will improve patient satisfaction in the coming year. Dr. Matyas mentioned that the number of complaints reported were low in volume. Brandon added that, although each patient’s grievance is important, the number of complaints compared to the number of patients served is relative.
 - Brandon also reminded the Board Members to be mindful that the Board’s role is governance, not operational. Tracee Stacy re-emphasized that an on-boarding process for new Board Members needs to be in place. Annabelle stated that the Board’s goal is to identify the gaps and improve quality, marketing, and staffing. Ruth Forney suggested a Board Retreat to assist with the on-boarding process.
- e) **H&SS Compliance** — Krista McBride (*“FHS Compliance Incident Report Tracking, October 1- October 31, 2024”*)
- Krista McBride reported that there was one (1) breach filed due to protected health information (PHI) in an email sent outside the County network, in error. She also stated that the Vallejo clinic experienced vandalism to the lab specimen receptacle.
 - There were no questions from the Board.
- f) **Finance & Revenue Cycle Management** — Nina Delmendo (*Please reference the “Operations Report – Finance November 2024: “Solano County Expenditure and Revenue Report FHS – November 2024”*)
Finance Report
- Nina Delmendo reported that Valerie Flores had been prepping the mid-year budget and explained that all revenues and expenses are reviewed and compared to the Board-approved “working budget” to determine financial performance with the projected goals and identify deviations. Nina stated that an update on the mid-year report should be available in February 2025. She also explained that percentages may be lower due to charges not being applied to the General Ledger (GL). Nina noted during this part of the year, the earmark is 33% from the YTD Actuals percentages reflected in the Finance Report, stating that a couple of line items were over.
 - Tracee Stacy inquired about the “Salaries” expenditures. Nina stated that she will research that area, but explained, for example, some clinical staff receives “Standby Pay” due to being on 24-hour response duty. The Fiscal Team would look at the variables during mid-year review and could project a higher amount for the following year, but not change the budget.
- Revenue Cycle Reports
- The “Revenue Cycle Reports for October 31, 2024 – Revenue Cycle Report Total Encounters” document was handed out to the Board Members at the CHB Meeting by Whitney Hunter.
 - Nina stated that the report shows encounters from July to October. In July and August data from NextGen. September included both NextGen and OCHIN Epic. October showed “Closed Encounters”, documentation was submitted, and charges were processed. Nina explained that encounters that were in “open” status did not reflect in the report, but she anticipates that those encounters will be closed by the next month’s CHB Meeting. Nina added that the target goal is off due to limited scheduling.



County of Solano
Community Healthcare Board
DRAFT

- g) **Referrals Report** — Cynthia Coutee (*Please reference the “Family Health Services Referrals – Time Period October 2024” and “Five Day History Dashboard – Number of Referral/Authorization Records, November 4-8-2024”*)
- Cynthia reported that in October there was a total of 780 referrals, consisting of 671 for Adult and 109 for Pediatric. Cynthia explained the referral process, stating that when a referral is processed, it placed in “Deferred” status until the patient is seen by the Specialist and “Consultation Notes” are received by the Referral Team and the referral can be closed. She also mentioned that deferring time varies depending on the specialist.
 - Cynthia mentioned that two (2) additional medical assistants (MA’s) were trained to process referrals in Vacaville in preparation for an employee going out on Maternity Leave, as well as a new MA in Vallejo, totaling 10 MA’s who are assigned to referrals. She also stated that if needed, the MA’s will assist with direct-patient care and support the provider(s).
 - Cynthia handed out a revised “Five Day History Dashboard – Number of Referral/Authorization Records” Report, that showed a daily count of how many referrals were added and how many were processed, data retrieved from Epic. She explained that those numbers are based on a 75% scheduling rate and will be higher when the clinics start to schedule at 100%.
 - Ruth Forney commended Cynthia for being proactive with training staff for referrals and asked if cross-training employees is a general practice. Cynthia confirmed that all Vacaville MA’s are cross-trained.
 - Brandon Wirth acknowledged that the “Five-Day History” report shows in detail how many referrals the clinic receives each day.
- h) **OCHIN EPIC Update(s)** — Dona Weissenfels
- Dona Weissenfels complimented the FHS managers for supporting their staff and investing into the new system and changes. She reported that everyone had been trained on Epic and FHS is now in the sustainability period. Dona explained that there are 42 “Jiras” that are concerns/issues that will require OCHIN and Netravine’s assistance with resolving. She mentioned that in December, OCHIN will be visiting the dental clinics to review workflows and provide support. They will also observe the medical clinics in January.
 - Marbeya Ellis asked if other sectors are utilizing Epic. Dona confirmed that companies like Kaiser have long introduced Epic as their electronic health records system and Northbay will soon transition, adding that Solano County took a big step with the project. She also stated that with the help of the government procurement process, the County was able to get “Full-Source”. Dona said that with Epic, FHS will have to capability to communicate with other health care systems to improve continuity of care.
- i) **QI Update** – Han Yoon – (*Please reference the “QIP Adult Measures – As of November 5, 2024 & “QIP Pediatrics Measures – As of November 5, 2024”*)
- Han Yoon presented graphs for QIP Adult Measures and QIP Pediatric Measures, explaining that FHS has 28,000 PHC-insured patients. He stated that the “Numerator” on the graph is the number of patients who had met the quality in each measure. The “50th Target” is partial payment goal and the “90th Target” is full payment goal. He stated that the graphs show all three (3) clinics and where they stand on each quality measure.
 - Tracee Stacy inquired about the Cervical Cancer Screening efforts that were mentioned at the October 16, 2024, CHB Meeting. Han explained that there was a high no-show rate in all clinics, but FHS is continually working with the Locum Provider to schedule those appointments.



County of Solano
Community Healthcare Board
DRAFT

j) **FHS Clinic Q-Matic Stats** — Noelle Soto – (*Please reference the “Clinic Metrics – Queue Management (Q-Matic) Stats – November 20, 2024”*)

- Noelle Soto reported that September data was missing for the Vallejo clinic, but numbers had dropped due to the Epic transition. Dr. Bela Matyas added that the number of people coming into the clinics are not necessarily a billable encounter, but are still provided care.
- There were no questions from the Board.

6) CHB Follow-up to Clinic Quality and Operational Reports

Review, Follow-up & Action: CHB will provide feedback on reports, request additional information on quality and clinic operations reports & follow up on these requests.

- Tracee Stacey suggested internal assessment process with grievances.

7) HRSA Project Officer Report

a) Health Center HRSA Project Officer Update – Dona Weissenfels

i) Health Center Activities – Internal and External Update

Internal News:

- Dona Weissenfels discussed Goal #5 of the Strategic Plan – Optimize financial operations, including revenue and expenses, ensure full compliance with HRSA FQHC financial regulations and prepare for transition to Alternative Payment Model (APM). She explained that before Gerald Huber retired as H&SS Director, he arranged a meeting with PHC and the County Administrator’s Office, which led to Wipfli Consultants working with FHS on rate-setting. Dona informed the Board that rate had not been changed in 12 years. She described that the application process as very lengthy, requiring expertise and collaboration with Fiscal and Operations. To initiate a rate evaluation with HRSA, a triggering event is required by adding a specialty service to the FHS clinics. Leadership reviewed previous referrals and Dermatology was considered due to the submission volume. However, Dona stated that it would require a “look-back period” of productivity and concluded that FHS would be penalized. She informed the Board that the most viable option is chiropractic or acupuncture services. Wipfli recommended firms that can assist with the process of adding the service to the clinics but will need to be presented to the Board for approval. If approved, it would need to be documented in the CHB Meeting Minutes and a “Change of Scope” can be submitted to HRSA and DHCS to start the 9 to 12-month process. Nina Delmendo added that this year’s financial data will be used in the rate change application which would be submitted in the Fall of 2025.
- Dona requested that the Board Members review the “Change of Scope” handout that was provided in the CHB Agenda Packet and expressed the importance of this request. Tracee Stacy, Seema Mirza, and Annabelle Sanchez agreed that either chiropractic or acupuncture would be a beneficial option. Dr. Bela Matyas explained that it takes approximately \$38M to run the FHS clinics and revenue is estimated at \$30M, so it is anticipated that the rate change could close the gap by \$5M. He also stated that either service will help patients with pain management, but it would need to determine which one will make the most overall impact for the clinics. Chiropractic requires a minimum number of visits occurred in this fiscal year in all FHS clinics. He stated that it would be cheaper to hire one Acupuncturist, but may not be as accessible. While a Chiropractor may require multiple visits in a week, which would require multiple Chiropractors. Dr. Matyas also mentioned that Touro has Osteopathic Manipulative Medicine (OMM) providers and cannot confirm if it is different



County of Solano Community Healthcare Board DRAFT

from Chiropractic services, but it will be researched, and more information will be presented to the Board.

- Brandon Wirth asked when this request will be an Action Item. Dr. Matyas stated that it will be presented at the December 18, 2024, meeting.
- Dona ended her report by stating that productivity will be the focus in 2025.

External News:

- Dona provided the “NACHC Statement Regarding the 2024 Election” handout at the meeting. She explained that when there is a shift in government, it could impact the health centers and funding, so she included the statement for Board Member awareness.
- There were no questions from the Board.

8) Discussion

- a) Board Nominations – Chair, Vice Chair and Member At Large. Voting for these offices will be at the December 18, 2024, Meeting. *(Moved topic to 8b.)*
 - Brandon Wirth requested to discuss the Board Calendar Discussion Item (8a) before the Board Nominations Discussion topic (8b). He asked if there were any requested changes to the calendar before it is added to the December 18, 2024, CHB Meeting Agenda. Brandon added that it is considered a living document, and it is subject to change, as events are presented, such as On-boarding Meetings.
 - Nina Delmendo stated that the Sliding Fee Scale Policy is presented for approval in February but will need to be rescheduled to an unknown date due to OCHIN rate changes.
 - Han Yoon requested that the Quarterly Quality Improvement Report to be presented when the Quarterly Financial Report is scheduled for review and approval, from March to April, and from June to August.
- b) Review Annual Board Calendar for any additions or changes. Voting on the 2024 Community Healthcare Board Calendar will be at the December 18, 2024, Meeting. *(Moved topic to 8a.)*
 - Brandon Wirth explained the annual Board Nomination process to the newer Board Members. He stated that it is an open election, and any Board Member can be considered for Chair, Vice Chair and Member At Large, but he also mentioned that the Vice Chair should be prepared to transition into the Chair position.
 - Brandon also mentioned that nominees will be identified before voting in December and can be nominated by other Board Members or a Board Member can self-nominate. Tracee Stacy inquired about the Executive Committee and Kelly Welsh referenced page 17, Section 2: Membership of the “Bylaws of the County of Solano Community Healthcare Board”. Brandon confirmed that he will not serve as Chair but nominated Michael Brown for the position. Michael Brown stated that he will accept Chair or Vice Chair. Brandon explained the time commitment as Board Chair; monthly one-hour meetings with the Executive Committee to review and plan for the upcoming Board Meeting, as well as collaborative meetings with Dona regarding governance matters.
 - Charla Griffith nominated Ruth Forney for Chair. Ruth did not officially accept the nomination. Tracee was nominated for Chair and will accept if the position remains open.
 - Tracee was also nominated for Vice Chair. Ruth inquired with the newer Board Members about considering themselves for an Executive position. Marbeya Ellis commented that she does not know enough to support in that capacity. Dona and Michael assured her that it would be a good



County of Solano Community Healthcare Board DRAFT

way to learn the role and there would be support from Dona, County Counsel and the Board Clerk, Danielle Seguerre-Seymour. Marbeya did not self-nominate.

- No Board Members were identified for Member At Large.

9) Board Member Comments

- Tracee Stacy requested to add homeless/overdoses at the December 18, 2024, meeting.

10) Adjourn: To the Community Healthcare Board Meeting of:

DATE: December 18, 2024
TIME: 12:00 PM — 2:00 PM
Location: Multi-Purpose Room
2101 Courage Drive
Fairfield, CA 94533

The Meeting was adjourned at 2:05 PM.

Handouts in the Agenda Packet:

- CHB October 16, 2024, draft Meeting Minutes
- Clinic Operations Report – FHS Staffing Update – November 20, 2024
- Clinic Operations Report – FHS Credentialing, Provider Enrollment and Sanctioning Screening Activities – Status Report – November 2024
- Clinic Operations Report – Health Resources and Services Administration (HRSA) Grant Updates – November 20, 2024
- Clinic Operations Report – Grievance Reports, April-December 2023 & January– October 2024” and Grievance Category Definitions
- Clinic Operations Report – FHS Compliance Incident Report Tracking, October 1- October 31, 2024
- Clinic Operations Report – Finance November 2024 – Solano County Expenditure and Revenue Report FHS – October 2024
- Clinic Operations Report – Family Health Services Referrals – Time Period October 2024
- Clinic Operations Report – Five Day History Dashboard – Number of Referral/Authorization Records, November 4-8-2024
- Clinic Operations Report – QIP Adult Measures – As of November 5, 2024
- Clinic Operations Report – QIP Pediatric Measure – As of November 5, 2024
- Clinic Operations Report – Clinic Measures – Queue Management (Q-Matic) Status, November 20, 2024
- HRSA Health Center Program – Change in Scope Assurances
- Family Health Services – Community Healthcare Board 2025 Annual Calendar Draft
- Clinic Operations Report – Revenue Cycle Reports – October 31, 2024, Total Encounters Through October 31, 2024 (*handout presented at the meeting.*)
- Clinic Operations Report – Five Day History Dashboard – Number of Referral/Authorization Records, November 4-8-2024 (*handout revised and presented at the meeting.*)
- NACHC Statement Regarding the 2024 Election (*handout presented at the meeting.*)

Community Healthcare Board

5) Clinic Operations Reports:

a) Staffing Update

Community Health Care Board

Family Health Services Staffing Update

CHB Meeting Date: Decenber 18, 2024

Number of Active Candidates - County

*Dental Assistant (Registered) - 2
*Medical Assistant - 1
*Physician Assistant - 2

Number of Active Candidates - Touro

*Clinic Physician (OMM) - 2
*Physician Assistant - 1

Number of Active Candidates - Locum Tenens

None

Number of Active Candidates - Volunteer

None

Open County Vacancies

Clinic Physician (Board Cert) - 1
Clinic Physician (Board Cert) **Extra Help** - 1
Clinic Registered Nurse - 2
Clinic Registered Nurse (Part-time) - 1
Dental Assistant (Registered) - 2
Dentist - 2
Health Education Specialist **Extra Help** - 1
Medical Assistant - 3
Mental Health Clinician (Licensed) - 2
Nurse Practitioner/Physician Assistant - 3
Nurse Practitioner/Physician Assistant **Extra Help** - 1

Interviews in Progress

*Dentist - 12/17/24

Expected New Hires + Recently Hired Staff

*Medical Assistant - Start Date: 11/25/24
*Medical Records Tech, Sr (Extra Help) - Start Date: 12/23/24
*Medical Records Tech, Sr (Extra Help) - Start Date: 01/21/25

Vacancies/Departures

*Health Services Clinic Mgr, Sr - 12/01/24
*Clinic Physician Supervisor - 11/28/24

Community Healthcare Board

5) Clinic Operations Reports:

b) Credentialing Update

FHS Community Healthcare Board – Status Report December 2024
FHS Credentialing, Provider Enrollment, and Sanction Screening Activities

Excluded Parties/Sanction Screening: 139

Month	Sanction Screening Number Screened/Verified	Sanction Screening Number Ineligible
November 2024 TOURO/LOCUMS	Touro/Locum Providers: 17	Exclusions Found: 0
November 2024 County – H&SS Employees/Candidates	H&SS Employees: 122	Exclusions Found: 0
Totals	TOTAL SCREENED: 139	Exclusions Found: 0

Credentialing: 6 Re-Credentialing: 2

Month	Number of Candidates' Credentials Verifications - (Re-)Started -	Number of Candidates' Partnership Provider Enrollments - Submitted for Partnership Approval -
November 2024 TOURO	<u>Active/Open: 3</u> Clinic Physician: 3	Submitted to Partnership: -1- Approved by Partnership: -0- Pending Submission to Partnership: 2
November 2024 LOCUM	<u>Active/Open: 0</u>	Submitted to Partnership: -0- Approved by Partnership: -0- Pending Submission to Partnership: 0
November 2024 County H&SS Employees/ Candidates	<u>Active/Open: 5</u> Medical Assistant – 2 Nurse Practitioner – 1 Dentist - 2	Submitted to Partnership: -0- Approved by Partnership: -1- Pending Submission to Partnership: 1

Provider and Site Enrollment and Re-Credentialing/Re-Validation:

Partnership – NEW Provider Enrollments

New Provider Enrollments: ACTIVE - Pending Submission: 3 (2 Touro CP, 1 County NP)
 Submitted: 1 Pending Approval: 2
 Approved: 1

Partnership – Provider Re-Credentialing

Provider Re-Credentialing: Submitted: 0 Pending Approval: 0 Pending Submission: 0
 Approved: 0

Denti-Cal – Provider Revalidations

None During this Reporting Period

NPI Program/Site Revalidations – CMS (N = +/- 38)

None During this Reporting Period

Technical Assistance – PAVE (Medi-Cal) and PECOS (Medicare) Sites: Upon Request

Community Healthcare Board

5) Clinic Operations Reports:

c) HRSA Grants Update(s)

Clinic Operations Report: Health Resources and Services Administration (HRSA) Grant Updates

- Family Health Services (FHS) continues to prepare for and/or develop:
 - the 2024 Ryan White Services Report (RSR) for the deadlines of: Phase 1 on February 3rd and Phase 2 on March 31st.
 - the 2024 Uniform Data System (UDS) Report for its February 15th deadline through federal and state trainings.
- FHS submitted the *Fiscal Year (FY) 2025 Health Center Program (HCP) Service Area Competition (SAC) Competing Continuation* application (H80CS04218) by its Phase 2 November 14th deadline. The grant's proposed Budget Justification is pending CHB review and approval. – See *CHB agenda "Business Governance"*

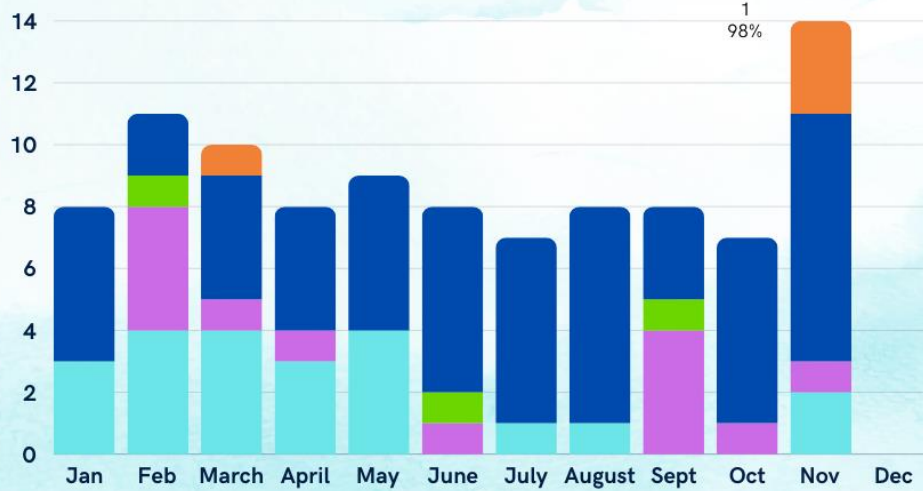
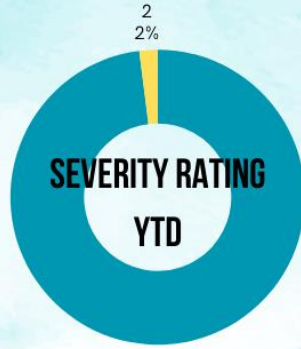
Community Healthcare Board

5) Clinic Operations Reports:

d) Grievances/Compliments

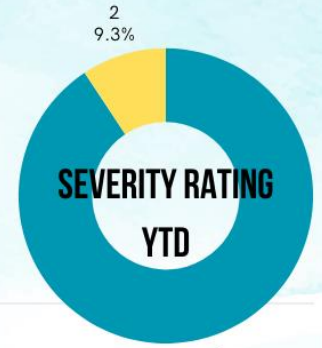
GRIEVANCE REPORT 2024

- Quality of Care
- Referrals
- Privacy
- Access to Care
- Safety
- Scheduling
- Other



GRIEVANCE REPORT 2023

- Quality of Care
- Referrals
- Privacy
- Access to Care
- Safety
- Scheduling
- Other



Grievance Category Definitions

- **Quality of Care**
 - Complaints that allege concerns about substandard care from providers, which may include but are not limited to, misdiagnosis, poor bedside manner, negligent treatment, delay in treatment, under prescribing, and/or inappropriate prescribing.
- **Access to Care/Timeliness**
 - Complaints that allege concerns about the affordability of care, follow-up completed in a timely manner, availability of providers to treat patients, and providers located in relatively close proximity to patients.
 - **Scheduling**
 - Sub-category under Access to Care/Timeliness that deals with complaints associated with the patient’s ability to schedule services in a timely manner.
 - **Referrals**
 - Sub-category under Access to Care/Timeliness that deals with complaints associated with the ordering, processing, and follow-up of patient referrals.
- **Safety**
 - Complaints that allege concerns about errors, adverse effects, and preventable injuries to patients associated with their health care.
- **Privacy**
 - Complaints that allege concerns about personal space (physical privacy), personal data (informational privacy), personal choices including cultural and religious affiliations (decisional privacy), and personal relationships with family members and other intimates (associational privacy).
- **Other**
 - Complaints that do not fall into any of the above categories.

Grievance Severity Rating

Level	Description	Definition	Example
1	<ul style="list-style-type: none"> • No harm • Inconvenience 	<ul style="list-style-type: none"> • The event effected the patient but did not cause physical harm. • Processes appropriate, patient disagreed. 	<ul style="list-style-type: none"> • A pain management contract process with which the patient disagrees. • An employee displayed rudeness to a patient. • Patient experienced long hold time on the phone.
2	<ul style="list-style-type: none"> • Temporary harm (mild or moderate) 	<ul style="list-style-type: none"> • Caused temporary harm to the patient, resulting in the need for additional treatment. • Caused a delay in time-sensitive care. 	<ul style="list-style-type: none"> • A delay to a patient in getting prescription medications. • A lack of follow-up requested following a procedure.
3	<ul style="list-style-type: none"> • Significant harm 	<ul style="list-style-type: none"> • Significant harm to the patient occurred, up to and including death. 	<ul style="list-style-type: none"> • A patient received a misdiagnosis. • A patient experienced an unanticipated complication or infection. • A patient’s oncology referral was not processed.

Community Healthcare Board

5) Clinic Operations Reports:

e) H&SS Compliance

**Family Health Services (FHS) Incident Report Tracking
November 1 to November 30, 2024**

FHS Department (if applicable)	Compliance Breach	Description (Basic Information/Activity)	Total Received
			Total Privacy & Security Incidents November 2024 = 0

FHS Department (if applicable)	Category/(ies)	Description (Basic Information/Activity)	Total Received
	Safety, Client	Visitor fell on the floor while in County meeting room.	1
			Total Other Incidents Reported November 2024 = 1

Community Healthcare Board

5) Clinic Operations Reports:

f) Finance & Revenue Cycle Management

OPERATIONS REPORT - FINANCE
NOVEMBER 2024

**SOLANO COUNTY
EXPENDITURE AND REVENUE REPORT
FAMILY HEALTH SERVICES
NOVEMBER 2024**

CATEGORY DESCRIPTION	FY2024/25 WORKING BUDGET	FY2024/25 YTD ACTUALS THROUGH NOV	YTD ACTUALS as a % of Working Budget	
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EXPENDITURES	Notations
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Salaries & Benefits

Salaries - Regular	16,306,079	4,741,202	29%	
Salaries - Extra Help	17,000	10,835	64%	
Salaries - OT/Callback/Standby	69,874	52,315	75%	
Staffing costs from other divisions (net amount)	133,070	14,267	11%	
Benefits	10,561,338	2,861,881	27%	
Accrued Leave CTO Payoff	20,000	6,872	34%	
Salary Savings	(2,789,326)	-	0%	
Salaries & Benefits Total	24,318,035	7,687,373	31.61%	

Services & Supplies

Office Expense and Supplies	172,363	29,640	17%	Drinking water, household expenses, and trash services.
Communications	138,331	45,150	33%	
Insurance	1,000,703	-	0%	Budget includes cost of Liability Insurance and Malpractice Insurance. >These charges will originate from another County Department. >Medical Malpractice will post at year end and are expected to be budgeted amount.
Equipment - Purchases, Leases & Maintenance	73,780	25,663	35%	Q-Matic. BioRad. Caltronics. Steris. Life Technologies. Smile Business. Multi Function Devices Copiers/Printers.
Mileage, Fuel and Fleet	45,503	13,698	30%	Monthly charges for vehicles assigned to County Departments; personal mileage.

**SOLANO COUNTY
EXPENDITURE AND REVENUE REPORT
FAMILY HEALTH SERVICES
NOVEMBER 2024**

CATEGORY DESCRIPTION	FY2024/25 WORKING BUDGET	FY2024/25 YTD ACTUALS THROUGH NOV	YTD ACTUALS as a % of Working Budget	
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EXPENDITURES	Notations
--------------	-----------

Services & Supplies (continued)

Buildings - Maintenance, Improvements, Rent & Utilities	258,458	81,007	31%	PG&E & water services.
Drugs, Pharmaceuticals, Medical and Dental Supplies	623,605	197,352	32%	Henry Schein. McKesson. TheraCom.
Controlled Assets & Computer Related Items	151,940	4,250	3%	Budget is primarily refresh computers and equipment funded with Capital Grant carryover funding.
Medical/Dental Services	207,600	21,604	10%	JP's Dental Lab, Quest Lab Services, Solano Diagnostics, and Solano Public Health Lab charges.
Contracted and Other Professional Services	1,019,565	132,441	13%	Budget includes the following contracts: >Allied Security >Simi Group >Waystar/Trizetto (electronic claims management) >Forvis (Medicare Cost Report) >Stericycle (medical waste disposal) >Gebbs (Medical Coding Consultant) >Factor Consultants >UHC Solutions (Recruitment services)
DoIT	2,152,500	660,282	31%	
Software & Maintenance or Support	690,031	390,606	57%	Budget includes the following: >Next Gen >OCHIN >Orchard Software
Professional Licenses & Memberships	27,871	3,995	14%	
Education, Training, In-State Travel, Out of State Travel	25,290	1,873	7%	
Other	69,758	12,230	18%	>Uniform allowance >Fees & Permits (credit card processing, licensing and storage) >Livescans
Services & Supplies Total	6,657,298	1,619,793	24%	

**SOLANO COUNTY
EXPENDITURE AND REVENUE REPORT
FAMILY HEALTH SERVICES
NOVEMBER 2024**

CATEGORY DESCRIPTION	FY2024/25 WORKING BUDGET	FY2024/25 YTD ACTUALS THROUGH NOV	YTD ACTUALS as a % of Working Budget	
----------------------	--------------------------------	--	--	--

EXPENDITURES	Notations
---------------------	------------------

Other Charges

Interfund Services - Professional	712,944	149,943	21%	County related charges for Sheriff services, building and grounds maintenance and custodial services.
Interfund Services - Accounting & Audit	-	-	0%	
Interfund Services - Other	64,285	18,246	28%	Maintenance materials, small projects and labor.
Contributions - Non County Agencies	15,000	-	0%	Training for community health board members (originally NACHC CHI Expo conference attendance)
Other Charges Total	792,229	168,189	21%	

Contracts/Client Support

Contracted Direct Services	1,492,000	582,665	39%	Budget includes the following contracts: >Barton & Associates (locum services) >Children's Choice (dental services) >Touro University (providers)
Client Support	22,700	9,659	43%	Client support transportation costs.
Contracts/Client Support Total	1,514,700	592,325	39%	

Equipment

Equipment	49,604	44,604	90%	
Equipment Total	49,604	44,604	90%	

Administration Costs

H&SS Administration	2,957,878	522,940	18%	
Countywide Administration	1,312,262	-	0%	
Administration Costs Total	4,270,140	522,940	12%	

TOTAL EXPENDITURES	37,602,006	10,635,223	28%	
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**SOLANO COUNTY
EXPENDITURE AND REVENUE REPORT
FAMILY HEALTH SERVICES
NOVEMBER 2024**

CATEGORY DESCRIPTION	FY2024/25 WORKING BUDGET	FY2024/25 YTD ACTUALS THROUGH NOV	YTD ACTUALS as a % of Working Budget	
----------------------	--------------------------------	--	--	--

REVENUES	Notations
-----------------	------------------

Payer Revenues

Payer Revenues	23,355,466	6,166,052	26%	Revenues from Medi-Cal, Partnership Capitation, Medicare and Private Pay (estimated payback not reflected)
Payer Revenues Total	23,355,466	6,166,052	26%	

Federal/State Revenues

1991 Realignment (Underinsured/Uninsured/PH Services)	1,386,906	-	0%	
Federal Direct - COVID (one time funding)	100,405	-	0%	Rollover for HRSA Capital Grant funds
Federal Grants	2,047,990	3,900	0.19%	Budget includes: >CHC Base grant >RWC
Federal Other	56,608	-	0%	\$1M Congressional earmark
American Rescue Plan Act (ARPA)	1,276,497	-	0%	ARPA funding for OCHIN EHR conversion
Other Revenue	1,617,600	17,171	1.06%	Budget primarily includes QIP revenues, but also includes patient care payment recoveries.
Program Revenues Total	6,486,006	21,072	0%	

TOTAL PAYER AND PROGRAM REVENUES	29,841,472	6,187,124	20.7%	
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TOTAL EXPENDITURES vs TOTAL REVENUES				Notations
TOTAL EXPENDITURES	37,602,006	10,635,223	28%	
TOTAL REVENUES	29,841,472	6,187,124	21%	
DEFICIT (SURPLUS)	7,760,534	4,448,099	57%	
County General Fund	4,708,209	1,177,052		
DEFICIT (SURPLUS) after CGF**	3,052,325	3,271,047		

***Deficit to be funded with 1991 Realignment and/or County General Fund*

REVENUE CYCLE REPORT
NOVEMBER 2024

**SOLANO COUNTY
FAMILY HEALTH SERVICES
REVENUE CYCLE REPORT
TOTAL ENCOUNTERS*
Through November 30, 2024**

	Annual Target	Monthly Target	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	TOTAL	YTD Target Nov 2024 5 mths	Over (Shorfall)
MEDICAL																	
County Providers	46,688	3,774	1,915	1,736	1,085	1,239	1,359								7,334	17,115	(9,781)
Touro	4,364	364	383	319	208	213	227								1,350	1,820	(470)
Locum	1,453	230	446	433	378	430	465								2,152	1,762	390
TOTAL MEDICAL	52,505	4,368	2,744	2,488	1,671	1,882	2,051	-	-	-	-	-	-	-	10,836	20,697	(9,861)
TOTAL MENTAL HEALTH	3,640	121	84	80	57	38	27								286	605	(319)
TOTAL DENTAL	19,900	1,547	1,321	1,223	1,035	910	915								5,404	7,396	(1,992)
	76,045	6,036	4,149	3,791	2,763	2,830	2,993	-	-	-	-	-	-	-	16,526	28,698	(12,172)

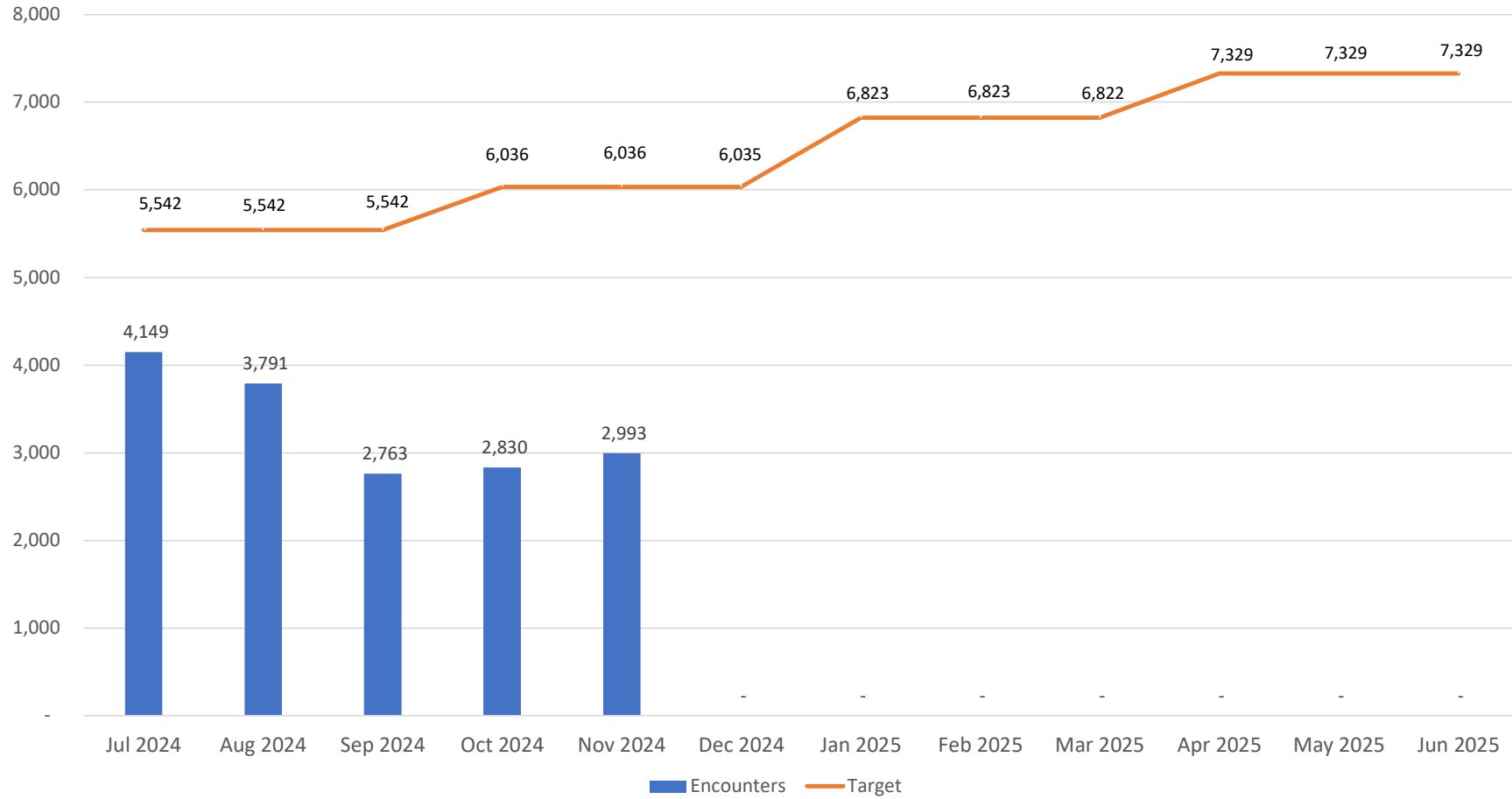
* Open encounters not included. Targets based on Adopted Budget.

DEFINITIONS

ENCOUNTER *An interaction between a patient and a healthcare provider for the purpose of providing healthcare services or assessing the health status of a patient*

- BILLABLE ENCOUNTER**
1. Healthcare provider
 - > Physician
 - > Physician Assistant
 - > Nurse Practitioner
 - > Dentist
 - > Licensed Clinical Social Worker
 2. Must take place in the "4 walls" of the FQHC
 3. Medically necessary
 4. Billing limited to one visit per day with certain exceptions

Solano County Health and Social Services
 Family Health Services
 Total Qualified Encounters
 (Medical, Dental, Mental Health)
 FY2024/25



Community Healthcare Board

5) Clinic Operations Reports:

g) Referrals



Time Period November 2024

Referrals 856

Adult-700 Pediatrics-156

Adult Specialty Referrals	Ordered	Peds Specialty Referrals	Ordered
Gastroenterology	72	Allergy	8
Ophthalmology	105	Dermatology	16
Orthopedics	39	Optometry	12
Physical Therapy	70	Orthopedics	8
Podiatry	47	Physical Therapy	10
	333		54
Total to Specialties: 387			

The above report reflects the total number of referrals for the month of October.

The total number of referrals in the Workque as of December 9th was **629 referrals** with **1290** referrals deferred pending specialist consultation notes.

All referrals once processed are deferred until consultation notes come back. Currently due to specialist backlog; the referral team is deferring 1-2 months out. Once patient is seen and consultation notes are received then referral team members can disposition the referral to close, closing the loop. We are currently processing **19** days out.

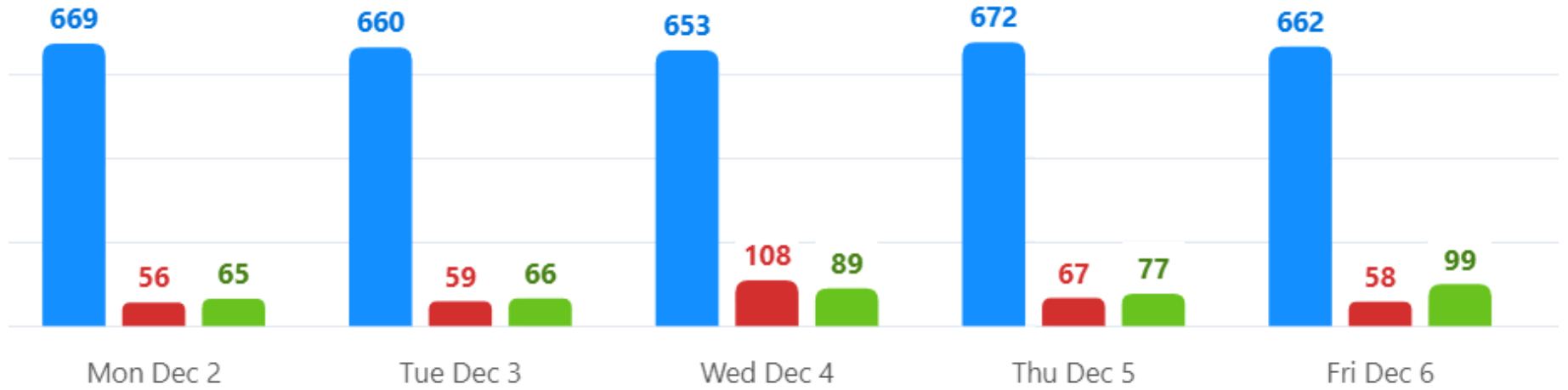
We continue to work with the team to smooth out the process. The MAs trained last month are working n referrals and doing well. I started last month looking at productivity for the team so we can set some metrics on average a fulltime person vs. a part-time. It will be contingent on if they are pulled to the floor. The plan is to start providing this information with January's numbers as the holidays will have ended and more consistency with staff being around.




Respectfully Submitted,

Cynthia Coutee

Cynthia Coutee, Clinic Manager-Vacaville

Five Day History – Dashboard Number of Referral/Authorization Records December 12-2-6-2024



 Beginning Total  Referral/Authorization Records Added  Referral/Authorization Records Removed

Community Healthcare Board

5) Clinic Operations Reports:

h) OCHIN EPIC Update(s)

NO REPORT

Community Healthcare Board

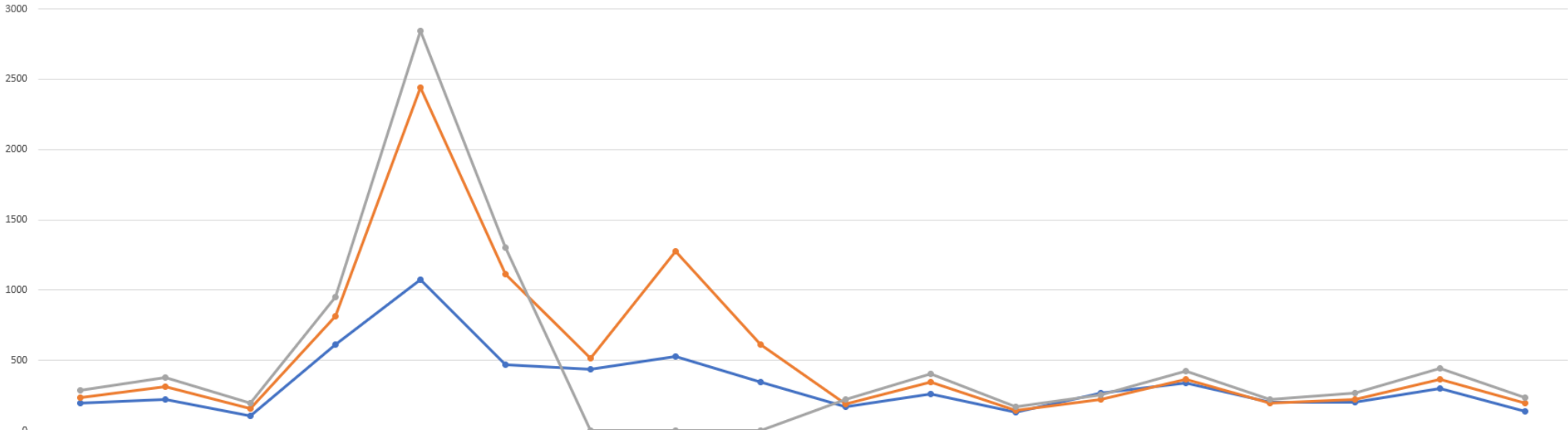
5) Clinic Operations Reports:

i) Quality Improvement Update

QIP Adult Measures

As of 12/5/2024

Achieved 50th Target 90th Target

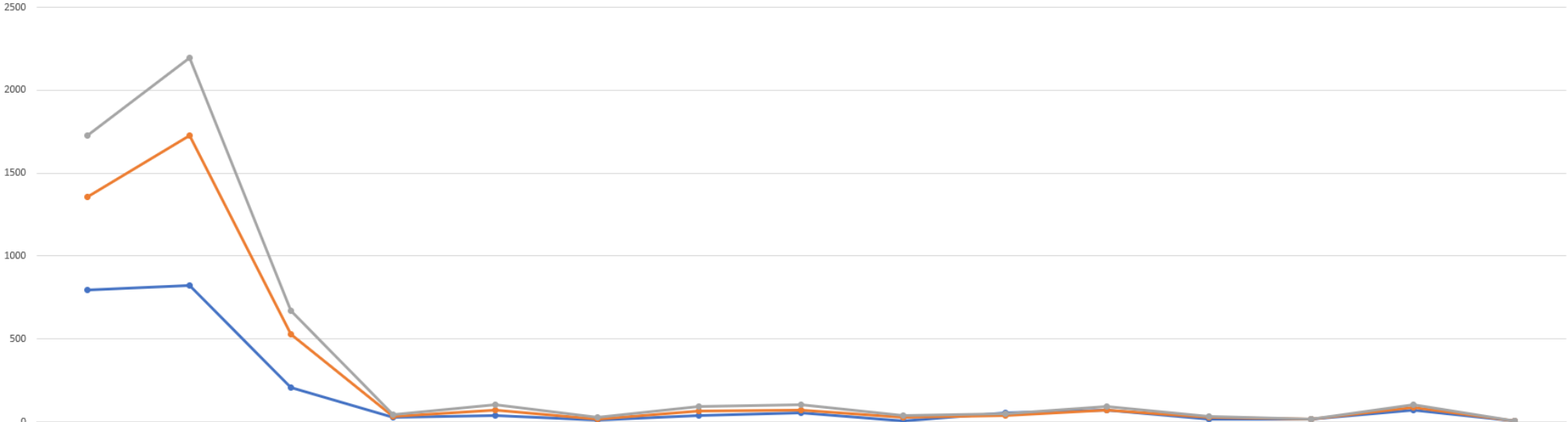


	Breast Cancer Screening 2024			Cervical Cancer Screening 2024			Colorectal Cancer Screening 2024			Controlling High Blood Pressure 2024			Diabetes - HbA1C Good Control 2024			Diabetes - Retinal Eye exam 2024		
	FF	VJO	VV	FF	VJO	VV	FF	VJO	VV	FF	VJO	VV	FF	VJO	VV	FF	VJO	VV
Achieved	193	221	102	615	1076	468	439	528	347	172	263	129	266	338	200	204	298	137
50th Target	237	310	159	815	2442	1116	516	1276	612	187	344	146	220	364	195	220	364	195
90th Target	288	376	193	950	2843	1300	0	0	0	220	405	172	254	420	224	266	441	235

QIP Pediatric Measures

As of 12/5/2024

— Achieved — 50th Target — 90th Target



	FF	VJO	VV	FF	VJO	VV	FF	VJO	VV	FF	VJO	VV	FF	VJO	VV
	Child and Adolescent Well Care 2024			Childhood Immunization Status CIS 10 2024			Immunization for Adolescents 2024			Lead Screening Children 2024			Well Child First 15 Months 2024		
	Pediatrics			Pediatrics			Pediatrics			Pediatrics			Pediatrics		
Achieved	794	820	209	30	38	12	39	54	7	52	71	15	14	73	3
50th Target	1356	1725	526	31	73	19	64	72	26	38	73	25	15	88	7
90th Target	1726	2195	669	45	106	28	91	102	37	47	92	31	17	103	8

Community Healthcare Board

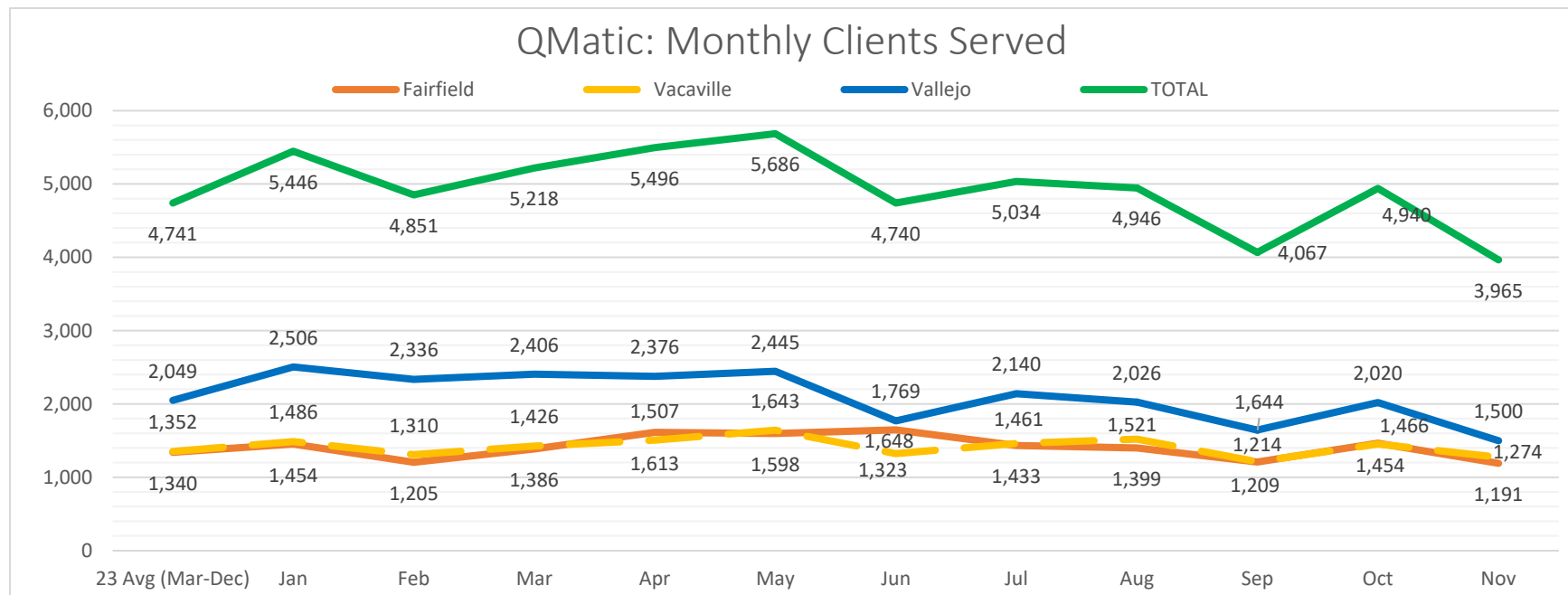
5) Clinic Operations Reports:

j) FHS Clinic Q-Matic Stats

Clinic Operations Report: Clinic Metrics

Queue Management (Q-Matic) Stats

Clinic Site	Clients Served											
	2023 (Mar to Dec) Average	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov
Fairfield												
Lab	93	95	76	94	125	127	116	93	90	68	83	82
Medical (Adult)	1,247	1,359	1,129	1,292	1,488	1,471	1,532	1,340	1,309	1,141	1,383	1,109
Subtotal	1,340	1,454	1,205	1,386	1,613	1,598	1,648	1,433	1,399	1,209	1,466	1,191
Vacaville												
Dental	588	598	535	552	571	620	596	673	629	563	605	540
Medical (Adult & Peds)	764	888	775	874	936	1,023	727	788	892	651	849	734
Subtotal	1,352	1,486	1,310	1,426	1,507	1,643	1,323	1,461	1,521	1,214	1,454	1,274
Vallejo												
Dental & Medical (Adult & Peds)	1,970	2,413	2,245	2,313	2,269	2,342	1,671	2,009	1,960	1,589	1,928	1,404
Lab	79	93	91	93	107	103	98	131	66	55	92	96
Subtotal	2,049	2,506	2,336	2,406	2,376	2,445	1,769	2,140	2,026	1,644	2,020	1,500
TOTAL	4,741	5,446	4,851	5,218	5,496	5,686	4,740	5,034	4,946	4,067	4,940	3,965



HRSA Health Center Compliance Tools

RegLantern's Services and Solutions

RegLantern not only develops helpful tools for health centers, but our experienced consultants provide technical assistance for all your health center needs. We provide high-quality, affordable consulting services in the following areas:

- Mock Site Surveys
- Look-Alike and FQHC Application Assistance
- FTCA Application Assistance
- Quality Improvement Staff Mentoring and Training
- In-Depth HRSA Site Survey Readiness and Finding Correction Assistance
- Policy and Procedure Development and Review
- RegPathway: Software Solution For Continual Compliance
- UDS Dash: Free Software Solution for Displaying UDS Outcomes
- Credentialing & Privileging Software Solution with Automatic Reminders for Key Dates
- Quality Incentive Analysis: Optimization of Financial Opportunities for Improved Performance



GET 5 MINUTE CONSULTATION

What People Are Saying



"RegLantern helped organize our team and take a steady approach to work through the compliance items so the whole team could understand. I will not go through another site visit without RegLantern!"

Kristie Bennardi
CEO, Keystone Rural Health Consortia, Inc., Emporium, PA

"Kyle is a real asset and has been great to work with. The compliance review process has been made easier with RegLantern."

Jeff Drake
CEO, Christ Community Health Services-Augusta, Augusta, GA



"RegLantern has created a straightforward and easily understandable approach for monitoring and managing health center regulatory compliance. For any organization that is serious about achieving, managing and maintaining compliance, RegLantern provides a comprehensive approach. Especially in this era of HRSA's focus on continual compliance, this is an affordable and valuable solution."

Burt Waller
Independent Consultant with 40 years of FQHC leadership and HRSA reviews

"As a health care consultant with years of experience, I have come to appreciate RegLantern's tool to assist Community Health Centers with continued compliance. The tool is easy to use, and easy to upload documents. I have personally used this tool and would recommend it!"

Jen Genua

Independent Consultant with 15 years of FQHC experience



"My experience with RegLantern over the past years is that it provides more than the valuable tools for organizing documents for the upcoming OSV. Constantly utilizing the platform prepares each organization for the next OSV. Whether your OSV is soon approaching or in the far distance, RegLantern provides its clients with confidence and peace heading into what can be an overwhelming and overbearing event. What a relief that can be as an organization juggles their OSV with all of its other priorities. One side note...it never hurts when the HRSA Reviewers thank you for making their experience easier by using RegLantern!"

Cary Calhoun

Independent Consultant with 25 years experience in FQHC leadership and HRSA reviews



"Thanks to the RegLantern team, we achieved a perfect Site Survey! The tools RegLantern provided were extremely helpful and the surveyors really liked them. They helped us get organized and be confident about our readiness for their visit.
Thank you, RegLantern!"

Brett Lawton
MPA, Chief Operations Officer, Jericho Road Community
Health Center, Buffalo, NY



"We appreciate all your help along the way! We had a successful OSV and I feel much of the success was from using the RegLantern tools. The reviewers really liked it too. I am confident other health centers will find great value in the tools as well!"

Jennifer Smith
CEO, Family Health Care of Northwest Ohio, Inc., Van Wert,
OH

"The RegLantern team worked with our health center team to apply for NCQA PCMH recognition. They helped me stay on track and organized – I couldn't have done it without them! With their help, we were able to achieve Level 3, the highest level of recognition! Thank you!"

Kyle Rife

BA, MHA, Lean Six Sigma Blackbelt, Director of Quality Improvement, The HealthCare Connection, Cincinnati, OH



"We began preparing for our OSV almost a year in advance by categorizing our documents into RegLantern and making notes for tracking purposes. We lost two key management staff members during the course of this year and thanks to RegLantern all of their documents and notes were housed safe and sound which prevented the duplication of efforts. The Form 5A and 6A tools are sheer genius. This platform enabled us to work independently without creating silos as all updates were real time and time stamped. RegLantern's customer service was impeccable. Our Board members utilized the platform to review documents and questions as they prepared for their interviews. Our reviewers were extremely impressed with our level of organization and noted how nice it was to have everything they needed readily available. I am proud to say that our final report from HRSA will have zero findings and RegLantern was instrumental in assisting us in achieving such a stellar review by providing a mechanism that set the stage for an efficient and effective preparatory process."

Dr. LaTrice D. Snodgrass

Chief Operations Officer AxxessPointe Community Health Centers, Inc Over 5 Years Executive Operational Level FQHC Experience Over 20 years Healthcare Operational Leadership Experience



RegPathway: Preparing for FQHC Site Visits

An FQHC leader's main responsibility is to ensure their health center provides great care and maintains regulatory HRSA compliance. Until now, leaders hired consultants every few years to help them get ready for site surveys. The task was viewed as something too big for them to handle themselves and then they spend tens of thousands of dollars in the process.

But now, **RegLantern™** **RegPathway** makes meeting HRSA's Program Requirements easy... and you'll save money in the process.

Want to see more of
RegPathway in action?

GET 5 MINUTE
CONSULTATION

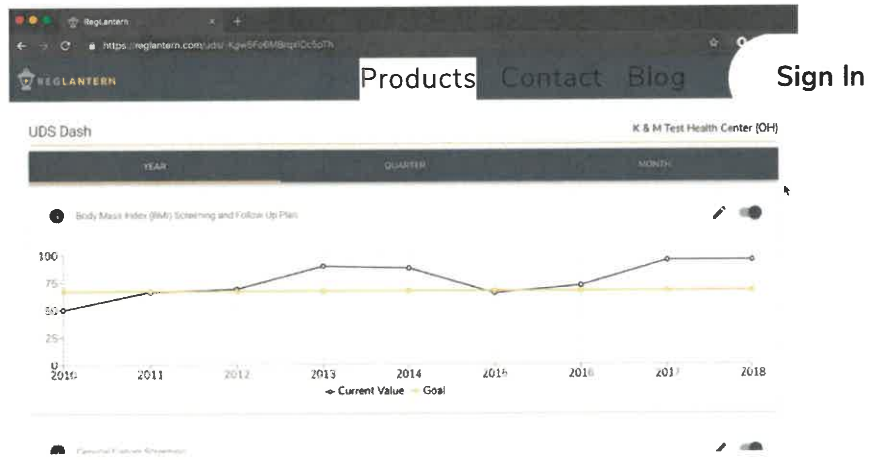
UDS Dash: Displaying UDS Data Visually

FQHC Quality Improvement staff are often called on to report their UDS outcomes to health center leadership, the

Board of Directors, and even to
doctors and patients.



Our free, web-based tool **RegLantern™ UDS Dash**, allows QI staff to enter in their UDS data and display it publicly (as determined by the staff) in a graphic and visually-pleasing way. The tool's functionality also provides a way for practices to meet the criteria for current NCQA PCMH Standards QI15 and QI16. We even provide a sample policy for documenting this process. Get started today for free!



Want to see more of UDS Dash
in action?

GET 5 MINUTE
CONSULTATION

WHO WE ARE

RegLantern is sophisticated, state-of-the-art software made with love in Cincinnati, Ohio. We are a team of highly-qualified software engineers and HRSA compliance experts with experience as HRSA reviewers and HRSA health center program leaders.

Contact

PO Box 58251, Cincinnati, Ohio 45258 | 1-833-REGLANTERN | support@reglantern.com

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Goal 3: FHS will implement a compliance program specific to the health center.

3 / Priority	Objective	Lead	Summary of work (3-5 sentences)	Status
3.1 Medium	<p>To address the increasing number of laws, rules, and regulations to which FHS is subject, while minimizing risk and optimizing performance, an FHS-dedicated Compliance Officer will be hired with expertise in health care compliance including HIPAA, HRSA, Medi-Cal and Medicare billing (Prospective Payment System), APM, Ryan White CARE funding, and the California Non-Profit Integrity Act. The Compliance Officer will reduce risk exposure for the patients, licensed personnel, the nonprofit Board of Directors, and the Health Department. An FHS-centered Compliance Officer will be on staff by December 2024.</p>	<p>Bela/H&SS Leadership</p>	<p>FHS Leadership developing continual surveillance of HRSA grant requirements via Leadership meetings and workplan.</p> <p>H&SS Compliance Team does not cover 330 Grant Compliance Program. Will need to identify and grow internal candidate for this position 2024. Compliance developing two presentations, General Compliance and 330 Compliance presentations. General Compliance presented, 330 presentation pending in July 2024. Identified possible solution with RegLantern to ensure 330 requirements are tracked, trended and monitored. Will fill in the compliance gap. Continuing to have issues with compliance assignments. ACA changes require notifications and the discussion is that compliance will not create, but FHS is expected to complete the work at the program level. FHS does not have regulatory, compliance staff available.</p>	<p>IP</p>
3.2 High	<p>FHS is committed to remaining compliant with HRSA grant funding regulations on Section 330 and Ryan White CARE Act. Additionally, FHS is committed to educating the Board of Directors on board governance in financial oversight, HRSA federal law and regulations, and the California Nonprofit Integrity Act. FHS recognizes that a shift to APM will require a Financial Director that has a comprehensive understanding of Medi-Cal, Medicare, FQHC Prospective Payment Services, data management, billing, and coding.</p>	<p>Bela/H&SS Leadership</p>	<p>Finance is taking steps to understand and learn FQHC finance structure and apply learnings to Clinic. Improved reporting and analysis is noted. On track to providing what the CHB has requested. Continued improvement noted. Staff attended the CPCA Annual CFO conference May 2024.</p>	<p>IP</p>

County of Solano - Family Health Services Personnel Justification Table
 FY 2025-2028 Health Center Program
 Grant Number: **H80CS04218**
 SUPPORT YEAR 21-23 - May 1, 2025 to April 30, 2028

REVENUE	Community Health Centers (CH)	Health Care for the Homeless (HCH)	Federal	Non-Federal	Total
The largest source of revenue is program income. The base section 330 grant provides 4.6% of the overall Health Center Program Budget.					
Federal Health Center Program Grant	\$ 1,294,246	\$ 431,415	\$ 1,725,661		\$ 1,725,661
State Government				\$ 4,387,397	\$ 4,387,397
Local Government					\$ -
Private Grants/Contracts/Other				\$ 10,903,951	\$ 10,903,951
Program Income				\$ 20,533,163	\$ 20,533,163
TOTAL	\$ 1,294,246	\$ 431,415	\$ 1,725,661	\$ 35,824,511	\$ 37,550,172

EXPENDITURES	Community Health Centers (CH)	Health Care for the Homeless (HCH)	Federal	Non-Federal	Total
A. PERSONNEL	\$ 880,753	\$ 293,584	\$ 1,174,337	\$ 15,390,712	\$ 16,565,049
B. FRINGE BENEFITS	\$ 405,146	\$ 135,049	\$ 540,195	\$ 7,079,721	\$ 7,619,916
C. TRAVEL				\$ 24,990	\$ 24,990
D. EQUIPMENT				\$ 145,690	\$ 145,690
E. SUPPLIES			\$ 11,129	\$ 837,693	\$ 848,822
F. CONTRACTUAL				\$ 2,697,865	\$ 2,697,865
G. CONSTRUCTION				\$ -	\$ -
H. OTHER				\$ 5,377,700	\$ 5,377,700
I. INDIRECT COSTS				\$ 4,270,140	\$ 4,270,140
TOTAL BUDGET	\$ 1,285,899	\$ 428,633	\$ 1,725,661	\$ 35,824,511	\$ 37,550,172

*Annualized requested funding

County of Solano - Family Health Services Personnel Justification Table
 FY 2025-2028 Health Center Program
 Grant Number: **H80CS04218**
 SUPPORT YEAR 21-23 - May 1, 2025 to April 30, 2028

REVENUE	Community Health Centers (CH)	Health Care for the Homeless (HCH)	Federal	Non-Federal	Total
The largest source of revenue is program income. The base section 330 grant provides 4.6% of the overall Health Center Program Budget.					
Federal Health Center Program Grant	\$ 1,294,246	\$ 431,415	\$ 1,725,661		\$ 1,725,661
State Government				\$ 4,387,397	\$ 4,387,397
Local Government					\$ -
Private Grants/Contracts/Other				\$ 10,903,951	\$ 10,903,951
Program Income				\$ 20,533,163	\$ 20,533,163
TOTAL	\$ 1,294,246	\$ 431,415	\$ 1,725,661	\$ 35,824,511	\$ 37,550,172

EXPENDITURES	Community Health Centers (CH)	Health Care for the Homeless (HCH)	Federal	Non-Federal	Total
A. PERSONNEL					
Grant positions are detailed below and in Form 2 Staffing Profile					
Administration	\$ 109,552	\$ 36,517	\$ 146,069	\$ 999,221	\$ 1,145,290
Behavioral Health Staff					
Dental Staff	\$ 266,156	\$ 88,719	\$ 354,875	\$ 3,690,714	\$ 4,045,589
Enabling Staff					
Facility & Non-Clinical Support Staff					
Medical Staff	\$ 505,045	\$ 168,348	\$ 673,393	\$ 7,017,405	\$ 7,690,798
Physicians				\$ 3,683,372	\$ 3,683,372
TOTAL PERSONNEL	\$ 880,753	\$ 293,584	\$ 1,174,337	\$ 15,390,712	\$ 16,565,049
B. FRINGE BENEFITS					
The fringe benefit rate varies by position, we assumed a 46% average. These benefits include: FICA (6%), Retirement (22%), Medical/Dental/Vision (14%), Worker's Compensation/Unemployment Insurance (2%), and Miscellaneous (2%).					
	\$ 405,146	\$ 135,049	\$ 540,195	\$ 7,079,721	\$ 7,619,916
TOTAL FRINGE BENEFITS	\$ 405,146	\$ 135,049	\$ 540,195	\$ 7,079,721	\$ 7,619,916
C. TRAVEL					
Detail travel costs consistent with your organization's established travel policy and in compliance with 45 CFR §75.474					
Conferences and Mileage				\$ 24,990	\$ 24,990
<i>National Healthcare for the Homeless Council (NHCHC) Annual Conference (two staff)</i>				\$ -	\$ -
<i>National Association of Community Health Centers (NACHC), California Primary Care Association (CPCA) & OCHIN EPIC national, state, & regional meetings</i>				\$ -	\$ -
<i>Mileage for staff attending meetings, working satellite clinics, providing outreach/enabling services, and HCH program-related events</i>				\$ -	\$ -
TOTAL TRAVEL				\$ 24,990	\$ 24,990

Budget Narrative
 County of Solano – Family Health Services
 Grant Number H80CS04218

EXPENDITURES	Community Health Centers (CH)	Health Care for the Homeless (HCH)	Federal	Non-Federal	Total
A. PERSONNEL					
Grant positions are detailed below and in Form 2 Staffing Profile					
D. EQUIPMENT					
Replacement of medical/dental equipment at end of useful life				\$ 145,690	\$ 145,690
TOTAL EQUIPMENT				\$ 145,690	\$ 145,690
E. SUPPLIES					
Books and Subscriptions				\$ 3,050	\$ 3,050
Computers, Printers, Scanners				\$ 11,250	\$ 11,250
Ergonomic Items				\$ 16,500	\$ 16,500
Fuel				\$ 632	\$ 632
Household Expenses				\$ 27,273	\$ 27,273
Medical/Dental Supplies	\$ 8,347	\$ 2,782	\$ 11,129	\$ 371,276	\$ 382,405
Miscellaneous				\$ 19,180	\$ 19,180
Clothing & Protective Equipment/Supplies (\$ 4,350)				\$ -	\$ -
Managed Print (\$14,830)				\$ -	\$ -
Office Supplies				\$ 56,960	\$ 56,960
Pharmaceuticals				\$ 241,200	\$ 241,200
Postage				\$ 26,897	\$ 26,897
Records Storage				\$ 2,125	\$ 2,125
Small Office Equipment				\$ 61,350	\$ 61,350
TOTAL SUPPLIES	\$ 8,347	\$ 2,782	\$ 11,129	\$ 837,693	\$ 848,822
F. CONTRACTUAL					
Direct services/patient care costs are budgeted for a portion of the provider services provided by Touro University, locum tenens to cover vacation and other leave for medical/dental providers, RN's, and other staff, as well as, specialty care referrals. Consulting services are for business and program development. Professional services are for program compliance, provider recruitment and training.					
Consulting Services (Non-Patient Care)				\$ 726,365	\$ 726,365
Contracted Direct Services (Medical and Dental)				\$ 1,492,000	\$ 1,492,000
Medical/Dental Services				\$ 186,300	\$ 186,300
Other Professional Services (Non-Patient Care)				\$ 293,200	\$ 293,200
TOTAL CONTRACTUAL				\$ 2,697,865	\$ 2,697,865
G. CONSTRUCTION					
No construction is expected during this period					
TOTAL CONSTRUCTION					
H. OTHER					
Communication				\$ 138,331	\$ 138,331
Contributions				\$ 15,000	\$ 15,000
Equipment Maintenance				\$ 83,366	\$ 83,366
Fees/Permits				\$ 14,756	\$ 14,756
Indigent Care				\$ 21,300	\$ 21,300
Information Technology				\$ 2,842,531	\$ 2,842,531
Insurance				\$ 1,000,703	\$ 1,000,703
Interfund, Intrafund, and timestudies				\$ 883,402	\$ 883,402

Budget Narrative
County of Solano – Family Health Services
Grant Number H80CS04218

EXPENDITURES	Community Health Centers (CH)	Health Care for the Homeless (HCH)	Federal	Non-Federal	Total
A. PERSONNEL					
Grant positions are detailed below and in Form 2 Staffing Profile					
Interpreters				\$ 910	\$ 910
Licenses				\$ 16,866	\$ 16,866
Memberships				\$ 11,005	\$ 11,005
Miscellaneous				\$ 21,957	\$ 21,957
Maintenance - Buildings & Improvement/Equipment Rent & Leases (\$ 8,557)				\$ -	\$ -
Special Departmental Expenses (meeting materials, taxes, etc. - \$13,400)				\$ -	\$ -
Rent and Leases				\$ 2,400	\$ 2,400
Special Departmental Expenses (tax, meeting materials, etc.)				\$ 34,217	\$ 34,217
Staff Recruitment				\$ -	\$ -
Staff Training				\$ 13,350	\$ 13,350
Transportation				\$ 22,700	\$ 22,700
Utilities				\$ 254,906	\$ 254,906
TOTAL OTHER				\$ 5,377,700	\$ 5,377,700
I. INDIRECT COSTS					
Include only if your organization has a negotiated indirect cost rate or has previously claimed a de minimus rate of 10% of modified total direct costs					
Countywide Admin Overhead				\$ 1,312,262	\$ 1,312,262
H&SS Admin Overhead				\$ 2,957,878	\$ 2,957,878
TOTAL INDIRECT COSTS				\$ 4,270,140	\$ 4,270,140
TOTAL BUDGET	\$ 1,294,246	\$ 431,415	\$ 1,725,661	\$ 35,824,511	\$ 37,550,172

*Annualized requested funding

County of Solano - Family Health Services Personnel Justification Table
 FY 2025-2028 Health Center Program
 Grant Number: **H80CS04218**
 SUPPORT YEAR 21-23 - May 1, 2025 to April 30, 2028

REVENUE	Total
Health Center Program (HCP) Grant	\$ 1,714,532
Community Health Center (CHC)	\$ 1,285,899
Health Care for the Homeless (HCH)	\$ 428,633

Last Name	First Name	Position Title	FTE to Support Activities**	Final Outcome (Fed Amount Requested)
ADMINISTRATION				
Cronk	Rebecca A	Health Services Clinic Mgr	1.00	\$ 146,069
			1.00	\$ 146,069
BEHAVIORAL HEALTH STAFF				
DENTAL STAFF				
Chase	Ana Lou A	Dental Assistant (Registered)	1.00	\$ 70,358
Robinson	Trielle J	Dental Assistant (Reg Lead)	1.00	\$ 70,960
Tan	Maristela Grace D	Dentist	1.00	\$ 213,557
			3.00	\$ 354,875
MEDICAL STAFF				
Aguilar	Pamela S	Medical Assistant	1.00	\$ 70,224
Cardenas	Nadia	Medical Assistant	1.00	\$ 71,931
Jacinto	Frances Paulette B	Clinic Registered Nurse (Sr)	1.00	\$ 121,369
Jarumay	Marie Fe	Clinic Registered Nurse	1.00	\$ 107,023
Lopez	Tara L	Medical Assistant (Lead)	1.00	\$ 72,600
Riley	Kaitlyn E	Nurse Practition/PhysicianAsst	1.00	\$ 160,022
Toscano	Mireya E	Medical Assistant	1.00	\$ 70,224
			7.00	\$ 673,393
Total			11.00	\$ 1,174,337
			46.00%	\$ 540,195
			TOTAL	\$ 1,714,532

IN-KIND PERSONNEL

Last Name	First Name	Position Title	FTE to Support Activities**	TOTAL IN-KIND
ADMINISTRATION				
Weissenfels	Dona M	Clinic Operations Officer	1.00	\$ 202,604
			1.00	\$ 202,604
PHYSICIANS				
Leary	Michele F	Chief Medical Officer	1.00	\$ 221,900
				\$ -
			1.00	\$ 221,900
Total			2.00	\$ 424,504

Staff will not exceed 1.0 FTE grants	46.00%	\$ 195,272
*Use this column only when the salary is over the limitation of \$221,900	TOTAL	\$ 619,776

Change in Scope Assurances



When submitting a Change in Scope (CIS), health centers will be asked to certify that the following statements related to the preparation of the CIS request are true, complete and accurate:

- This CIS request is complete and responsive to all applicable criteria relating to the CIS checklist. Refer to <http://www.bphc.hrsa.gov/programrequirements/scope.html> for all applicable policies and guidance.
- The health center consulted with its Project Officer prior to submitting this CIS request.
- The proposed CIS implementation date is at least 60 days from the submission date to HRSA. Note: HRSA recognizes that there may be circumstances where submitting a CIS request at least 60 days in advance of the desired implementation date may not be possible; however, the goal is to minimize these occurrences through careful planning.
- The health center's governing board approved this CIS request prior to submission to HRSA, as documented in board minutes (must be made available upon request).
- The health center has examined the potential impact of this CIS under the requirements of other programs as applicable (e.g., 340B Program, FTCA). Refer to: <https://www.bphc.hrsa.gov/programrequirements/pdf/potentialimpactofcisactions.pdf>
- The health center understands that HRSA will consider its current compliance with Health Center Program requirements and regulations (i.e., the status and number of any progressive action conditions) when making a decision on this CIS request. See Health Center Program Compliance Manual, Chapter 2: Health Center Program Oversight for more information on progressive action. Refer to: <https://bphc.hrsa.gov/programrequirements/compliancemanual/index.html>

I will ensure the health center complies with the following statements related to the implementation of this Change in Scope (CIS) request, if approved:

- All Health Center Program requirements (<https://bphc.hrsa.gov/programrequirements/compliancemanual/index.html>) will apply to this CIS. Note: Compliance with Health Center Program requirements across sites and services will be assessed through all appropriate means, including site visits and application reviews.
- This CIS will be undertaken directly by or on behalf of the health center for the benefit of the current or proposed health center patient population, and the health center's governing board will retain oversight over the provision of any services and/or sites.
- This CIS will be accomplished without additional Health Center Program Federal award funding (for awardees only) and will not shift resources away from carrying out the current HRSA-approved scope of project.
- The impact of this CIS will be reflected in the total budget submitted with the health center's next annual competing or non-competing or designation application.

- This CIS will be implemented and verified within 120 days of receiving the NoA or HRSA notification approving the change.
- This CIS will not diminish the patient population's access to and quality of services currently provided by the health center.
- The health center will take all applicable steps related to the requirements of other programs impacted by this change in scope request. Refer to <https://www.bphc.hrsa.gov/programrequirements/pdf/potentialimpactofcisactions.pdf>

DEPARTMENT OF HEALTH & SOCIAL SERVICES



Family Health Services Community Healthcare Board
2025 Annual Calendar

Month	Required Annual Review	Comments/Training
January 15, 2025	<ul style="list-style-type: none"> Project Officer/CEO Evaluation Review Board Members Sign Annual Bylaws Appendix A "Conflict of Interest" and "Confidentiality" forms Quarterly Financial Report Patient Satisfaction Report 	<p>Please note: Additional Items that are added to the Meeting Agenda, for Board Approval, may be added at any given time.</p>
February 19, 2025	<ul style="list-style-type: none"> Review UDS Initial Submission Progress Review and Approve: <u>Sliding Fee Scale Policy</u> 	<u>Sliding Fee Scale Policy TBD</u>
March 19, 2025	<ul style="list-style-type: none"> Review UDS Final Submission Progress <u>Quarterly Quality Improvement Report</u> Evaluation of QI/QA Program 	
April 16, 2025	<ul style="list-style-type: none"> <u>Quarterly Financial Report</u> <u>Quarterly Quality Improvement Report</u> Board Self-Assessment 	
May 21, 2025	<ul style="list-style-type: none"> Review Final UDS Submission FHS Requested Budget Proposal for FY 24/25 Update Community Needs Assessment 	
June 18, 2025	<ul style="list-style-type: none"> <u>Quarterly Quality Improvement Report</u> Review Strategic Plan (3-year Cycle) 	
July 16, 2025	<ul style="list-style-type: none"> Review and Approve Credentialing and Privileging Policy and Procedures 	
August 20, 2025	<ul style="list-style-type: none"> FY 25/26 Budget Development <u>Quarterly Financial Report</u> <u>Quarterly Quality Improvement Report</u> 	
September 17, 2025	<ul style="list-style-type: none"> FY 25/26 Budget Development (continued) Quarterly Quality Improvement Report Evaluation of QI/QA Program (from June) Review and Approve the QI/QA Plan (from June) 	
October 15, 2025	<ul style="list-style-type: none"> Review Current HRSA Competing and Non-Competing Continuation Applications/Progress Reports Quarterly Financial Report 	
November 19, 2025	<ul style="list-style-type: none"> Review Current HRSA Competing and Non-Competing Continuation Applications/Progress Reports Board Nominations – Executive Positions Review Annual Board Calendar 	
December 17, 2025	<ul style="list-style-type: none"> Review Current HRSA Competing and Non-Competing Continuation Applications/Progress Reports Quarterly Quality Improvement Report Board Elections – Executive Positions Patient Satisfaction Report 	

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Additional Items that can be added to Agenda for Board Approval at any given time:

- Review and Update Health Center Policies, Procedures and Services
- Contracts Review
- Brown Act Annual Training
- On-Boarding Meetings

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