

The County of Santa Cruz

Integrated Community Health Center Commission

MEETING AGENDA

August 5, 2021 @ 11:00 am

MEETING LOCATION: Microsoft Teams Meeting or call in (audio only) [+1 916-318-9542](tel:+19163189542), [886796507#](tel:+1886796507) United States, Sacramento Phone Conference ID: 886 796 507# / 1080 Emeline Ave., Bldg. D, Santa Cruz, CA 95060

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

1. Welcome/Introductions
2. Oral Communications
3. July 8, 2021 Meeting Minutes – Recommend for Approval
4. CEO/COVID-19 Update/Operational Site Visit Report Out
5. Review of HRSA form 5A – Recommend for Approval
6. Review of HRSA form 5B – Recommend for Approval
7. Conflict of Interest – Recommend for Approval
8. Quality Management Plan – Recommend for Approval
9. Revision to the Billing Department and Front office Operations Policies and Procedures 100.03 – Recommend for Approval
10. Revision to the Billing Department Ability to Pay Procedures Policy 100.04 – Recommend for Approval
11. New Business Office Policy Grant Draw Down Policy 100.05 – Recommend for Approval
12. Quality Management Committee Update
13. Social Justice
14. Board Recruitment
15. Financial Update

Action Items from Previous Meetings:

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

E-mail Conflict-of-Interest form to commission. DocuSign format.	Mary	7/2/2021	
Central California Alliance Health Corrective Action Plan. Committee would like quarterly updates on the corrective action plan deficiencies. Item on 5/6/21 Minutes.	Raquel		

Next meeting: September 2, 2021 11:00 am- 1:00 pm

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Ave., Bldg. D, Santa Cruz, CA 95060

The County of Santa Cruz Integrated Community Health Center Commission

Minute Taker: Mary Olivares

Minutes of the meeting held August 5, 2021.

TELECOMMUNICATION MEETING: Microsoft Teams Meeting - or call-in number +1 916-318-9542 ,886796507# United States, Sacramento Phone Conference ID: 886 796 507# / 1080 Emeline Ave., Bldg. D, Santa Cruz, CA 95060

Attendance	
Christina Berberich	Chair
Len Finocchio	Vice Chair
Caitlin Brune	Member at Large
Rahn Garcia	Member
Dinah Phillips	Member
Marco Martinez-Galarce	Member
Amy Peeler	County of Santa Cruz, Chief of Clinic Services
Raquel Ramirez Ruiz	County of Santa Cruz, Senior Health Services Manager
Julian Wren	County of Santa Cruz, Administrative Services Manager
Mary Olivares	County of Santa Cruz, Admin Aide
Jennifer Phan	County of Santa Cruz, Health Services Manager
Meeting Commenced at 11:04 am and Concluded at 12:40 pm	
Excused/Absent:	
Absent: Gustavo Mendoza	
Absent: Michelle Morton	
1. Welcome/Introductions	
2. Oral Communications:	
3. July 8, 2021, Meeting Minutes - Action item	
Review of June 8, 2021, Meeting Minutes – Recommended for Approval. Rahn moved to accept minutes as submitted. Caitlin second, and the rest of the members present were all in favor.	
4. CEO/COVID-19 Update/Operational Site Visit Report Out	
Amy stated they concluded the HRSA Operational Site Visit last week and thanked the commission members for their attendance. Amy stated in the 93 areas that were evaluated, there were 8 areas that we did not demonstrate compliance. Amy reviewed with the commission which areas were not in compliance and corrections that need to be addressed.	
5. Review of HRSA form 5A – Recommend for Approval	
Raquel presented the changes on Form 5A. Under coverage for emergency and after-hours the x in column 2 needs to be removed. Rahn moved to accept all changes recommended by staff. Dinah second, and the rest of the members present were all in favor.	
6. Review of HRSA form 5B – Recommend for Approval	
Raquel presented the changes on Form 5B. She stated we are adding an "A" to 115 Coral St for the Homeless Persons Health Project address. We need to add the second site for Janus, 718 Carmel St., and adding the room numbers for 1400 Emeline Avenue Room 109-111, 113-114, 131, 135, 161, 210, 221, 223, 228, 230, 237-238, 240, 250-253, 255-258, 262-266, and 269-270. Rahn moved to accept all changes recommended by staff. Dinah second, and the rest of the members present were all in favor.	
7. Conflict of Interest – Recommend for Approval	
Jennifer Phan presented Policy 640.15 - Conflict of Interest Policy for Clinic Services Division. She stated we need a policy that includes employees, board members, officers, and agents. The current policies were missing the wording "agent". Jennifer reviewed the policy with the commission. The question was asked if this was reviewed by County Counsel? Amy stated she could send to Jason in County Counsel to review. Rahn motion to recommend adoption of policy and confer with County Counsel, any questions raised by County Counsel with change of language. Caitlin second, and the rest of the members present were all in favor.	
8. Quality Management Plan – Recommend for Approval	

<p>Raquel stated the Quality Management Plan needs to be brought back to the commission every year for approval. Raquel stated the only changes made are the dates, appendices at the end that now point back to the operational plan, and a new tool that we are using to keep track of our quality improvement projects. Dinah moved to accept all changes recommended by staff. Marco second, and the rest of the members present were all in favor.</p>
<p>9. Revision to the Billing Department and Front office Operations Policies and Procedures 100.03 – Recommend for Approval</p>
<p>Julian stated Health Resource & Service Administration (HRSA) requires clinics have a waiver policy that clarifies what types of situations qualify for a waiver. Julian reviewed policy with commission members. Julian asked the commission to move and approve changes as suggested. Dinah moved to accept all changes recommended by staff. Marco second, and the rest of the members present were all in favor.</p>
<p>10. Revision to the Billing Department Ability to Pay Procedures Policy 100.04 – Recommend for Approval</p>
<p>Julian stated waiving of fees was also added to this policy. Julian is asking the commission to move and approve changes as suggested. Caitlin moved to accept all changes recommended by staff. Marco second, and the rest of the members present were all in favor.</p>
<p>11. New Business Office Policy Grant Draw Down Policy 100.05 – Recommend for Approval</p>
<p>Julian stated that Health Resource & Service Administration (HRSA) requires clinics to have this policy. Clinics must describe how they draw down their funds that they receive from HRSA. Julian stated they must describe how often, track, and what they base their draw down on. Julian reviewed policy with commission. Julian asked the commission to approve new policy. Rahn moved to approve new policy as recommended by staff. Caitlin second, and the rest of the members present were all in favor.</p>
<p>12. Quality Management Committee Update</p>
<p>Raquel reported she is working with the clinics epic site specialist on creating an automated calendar for the various surveys that are conducted so they are automatically sent out to our patients. Raquel also reported that the Health Center Manager's will report back next month on the CCAH Corrective Action Plan and on the HPHP Mobile Unit-Outreach Plan. Lastly, Raquel reported that she received 6 months' worth of mortality data with over 50 patients to review in this next month.</p>
<p>13. Social Justice</p>
<p>Caitlin stated she e-mailed out a few items for education purposes to the commission. Caitlin also stated she sent out a draft document that the CDC has prepared to guide mostly journalist to make changes to our language to reshape attitudes and assumption on folks that are different from us. She recommended commission members to look at this information. Marco reported that he did some research on nutrition programs and what was available in the community. Marco stated that the Community Health Trust has nutritionist and that would be the best way that we could organize a program. Raquel stated that the Watsonville Clinic works with Receta Vegetal through Esperanza Farms which provide fresh fruits and vegetables to our patients with diabetes and or high BMI. Raquel stated we could have them come present at our next meeting. Raquel also stated there was another program at Starlight Elementary called the Emeril's Culinary Garden and Teaching Kitchen we could reach out to them as well.</p>
<p>14. Board Recruitment</p>
<p>Amy stated this item should have been deleted from agenda.</p>
<p>15. Financial Update</p>
<p>Julian stated that this report was based on fiscal year 20/21. Julian presented the clinic financials, projection report, days in accounts receivable, percentage >90 days, and charge review days. Commission staff thanked him for his report.</p>
<p><i>Action items:</i></p> <ul style="list-style-type: none"> •

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Microsoft Teams Meeting: 1080 Emeline, Santa Cruz, CA

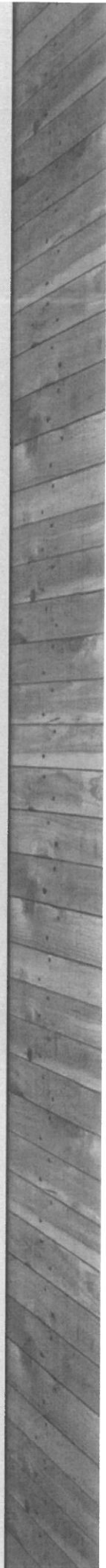
Minutes approved _____
(Signature of Board Chair or Co-Chair)

_____/_____/_____
(Date)

FISCAL REPORT

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

8-5-21 COMMISSION MEETING



CLINIC FINANCIALS

County of Santa Cruz (HSA)			
FY 20/21 (AD) CLINIC(AD)			
As of 6/30/2021			
GL Key	Division	Object	
(All)	CLINIC	(All)	
Row Labels	Sum of Budget	Sum of Actual	Bud to Act Var
REVENUE	(43,681,095)	(37,598,636)	(6,082,459)
CLINIC ADMINISTRATION	(3,415,597)	(8,176,742)	4,761,145
CORAL STREET CLINIC (BPHP)	(4,959,004)	(3,695,026)	(1,263,978)
EMELINE CLINIC	(10,594,326)	(9,119,153)	(2,475,173)
MENTAL HEALTH FQHC	(8,833,715)	(5,670,473)	(3,163,242)
WATSONVILLE CLINIC	(13,087,203)	(9,498,116)	(3,589,087)
WATSONVILLE DENTAL	(2,791,250)	(2,439,126)	(352,124)
EXPENDITURE	42,248,099	38,557,488	3,690,611
CLINIC ADMINISTRATION	6,598,016	7,051,191	(453,175)
CORAL STREET CLINIC (BPHP)	5,255,016	4,360,538	894,478
EMELINE CLINIC	10,107,498	10,283,811	(176,313)
FORENSIC SERVICES	6,428	4,193	2,235
MENTAL HEALTH FQHC	8,833,715	6,142,759	2,690,956
WATSONVILLE CLINIC	9,846,926	9,186,179	660,747
WATSONVILLE DENTAL	1,600,500	1,528,816	71,684
Grand Total	(1,432,996)	958,852	(2,391,848)

PROJECTION REPORT

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

Post Dates through: 07/31/2021 (21 Workdays)
All Departments

Post Group	FY 19-20			FY 20-21			FY 21-22		
	Units	Net Charges	%	Units	Net Charges	%	Units	Net Charges	%
MEDI-CAL	83,380	75.2%	86.9%	111,077	69.3%	91.4%	5,225	63.3%	91.1%
MEDI-CAL	0	0.0%	0.0%	9	0.0%	0.0%	0	0.0%	0.0%
MEDI-CAL	0	0.0%	0.0%	0	0.0%	0.0%	0	0.0%	0.0%
MEDI-CAL	10,661	9.6%	8.2%	17,432	10.9%	5.4%	1,745	21.2%	2.6%
MEDI-CRUZ	2,475	2.2%	1.0%	7,350	4.6%	0.9%	186	2.3%	1.2%
MEDI-CRUZ	1,417	1.3%	0.8%	1,415	0.9%	0.6%	77	0.9%	0.7%
MEDI-CRUZ	369	0.3%	0.3%	330	0.2%	0.1%	17	0.2%	0.3%
MEDI-CRUZ	180	0.2%	0.0%	186	0.1%	0.1%	6	0.1%	0.1%
MEDI-CRUZ	431	0.4%	0.5%	382	0.2%	0.1%	0	0.0%	0.0%
MEDI-CRUZ	459	0.4%	0.7%	212	0.1%	0.2%	13	0.2%	1.1%
MEDI-CRUZ	11,534	10.4%	1.7%	21,612	13.5%	0.3%	950	11.5%	1.1%
MEDI-CRUZ	24	0.0%	0.0%	305	0.2%	0.3%	7	0.1%	-0.1%
Totals:	110,930			160,250			8,226		
Less Reserve Amount:				3,527,985			0		
Actual Recognition:				25,001,066			1,560,002		

Post Group	Projected Units	Projected Charges
MEDI-CAL	62,573	17,226,725
MEDI-CAL	0	0
MEDI-CAL	20,898	486,594
MEDI-CRUZ	2,227	217,697
MEDI-CRUZ	922	122,416
MEDI-CRUZ	204	54,963
MEDI-CRUZ	72	9,340
MEDI-CRUZ	0	0
MEDI-CRUZ	156	195,674
MEDI-CRUZ	11,377	197,871
MEDI-CRUZ	84	-13,710
Total Charges:		18,497,170
Less Projected Reserve Amount:		0
Total Net Charges:		18,497,170

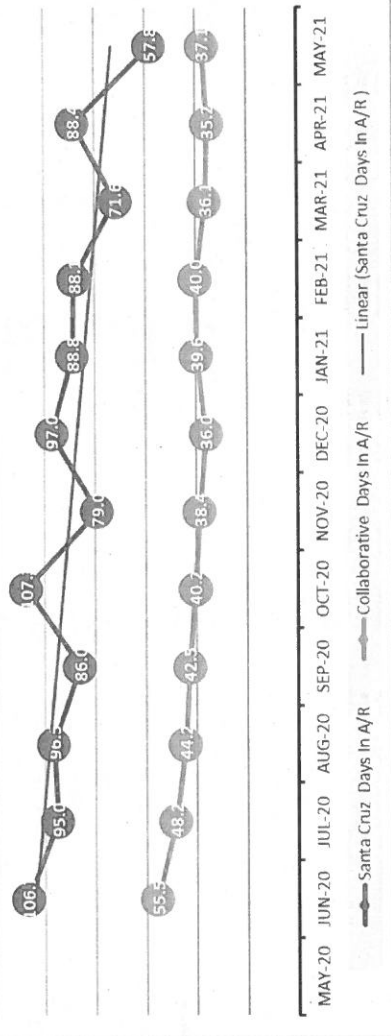
Post Group	FY 19-20	FY 20-21	FY 21-22
MEDI-CAL	239.57	234.86	276.06
MEDI-CAL	0.00	-1.71	0.00
MEDI-CAL	176.38	88.91	23.52
MEDI-CRUZ	91.48	36.30	96.71
MEDI-CRUZ	130.73	118.53	134.08
MEDI-CRUZ	162.20	90.89	270.69
MEDI-CRUZ	34.57	181.39	131.29
MEDI-CRUZ	278.54	92.50	0.00
MEDI-CRUZ	349.37	973.62	1,269.43
MEDI-CRUZ	33.74	3.70	17.57
MEDI-CRUZ	97.33	281.10	-165.18
Totals:	207.28	178.03	189.64

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

Date printed: 08/02/2021

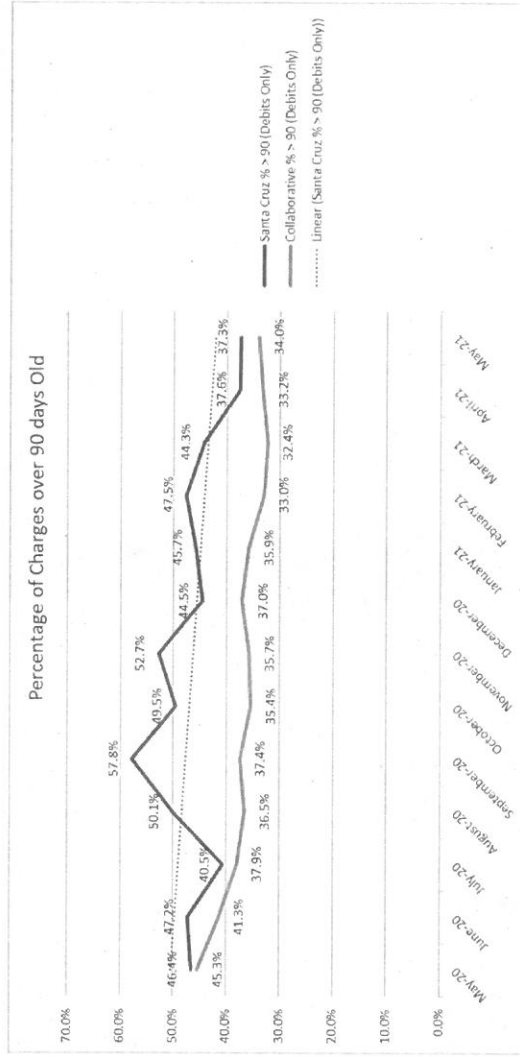
**DAYS IN ACCOUNTS
RECEIVABLE
(MEASUREMENT
OF BILLING SPEED)**

Days in AR

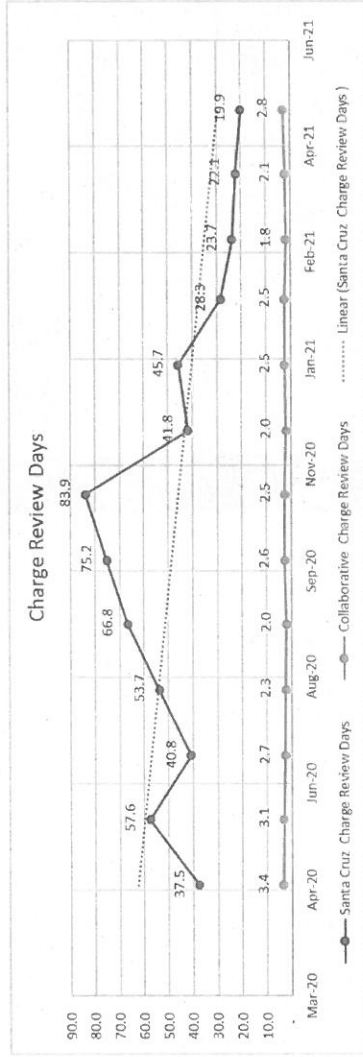


May 2021 Revenue Cycle Score Card

PERCENTAGE > 90 DAYS: (AGE OF CLAIMS)




**CHARGE REVIEW DAYS:
(MEASUREMENT OF
BILLING REVIEW INITIAL
REVIEW OF CLAIMS)**



**QUESTIONS
OR
COMMENTS?**



<p>SUBJECT: Conflict of Interest</p> <p>SERIES: 600 Medical/Legal</p> <p>APPROVED BY: Amy Peeler, Chief of Clinic Services</p>	<p>POLICY NO.:</p> <p>640.15</p> <p>PAGE: 1 OF 7</p> <p>EFFECTIVE DATE: 08/05/2021</p> <p>REVISED:</p>	 <p>COUNTY OF SANTA CRUZ</p> <hr/> <p>HEALTH SERVICES AGENCY</p> <p>Clinics and Ancillary Services</p>
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POLICY STATEMENT:

All Clinic Services Division employees, officers, board/commission members, and agents of the Clinic Services Division shall observe the restrictions on any activities that constitute Incompatible Activities, as specified in County Code and the Personnel Regulations. Specific prohibitions for Health Services Agency (HSA) staff activities and practices, as identified in this policy, shall also be observed. In addition, employees in designated positions are required to disclose specific information on an annual basis regarding potential Conflicts of Interest on the State form.

PURPOSE: To avoid specific employee, officer, board/commission member, and/or agents of the Clinic Services Division activities or practices that are considered to be a conflict of interest or incompatible with county codes and regulations.

PROCEDURE:

1. **Responsibility:** Employees, officers, board/commission members, and agents of the Clinic Services Division are responsible for being familiar with and understanding the content and intent regarding County and HSA incompatible activities and conflict of interest concerns as addressed by Federal, State, County and HSA codes and regulations (see References list at end of policy).
2. **Incompatible Activities:**
 - a. HSA Prohibitions
 - i. The County Board of Supervisors has adopted specific requirements and prohibited activities appropriate for the employees of each department; and
 - ii. The requirements and prohibitions that apply to all HSA employees are listed below (2.b-g).
 - b. County Owned Equipment: Use of County owned or provided equipment, materials, or property for personal benefit or profit is prohibited.
 - c. Employee Influence: Use of influence as a County employee for personal benefit or profit, is prohibited.

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- d. Compensation of Family Members: Engagement in any activities which affect the employment or compensation by the County of any immediate family member within the first or second degree of relationship, is prohibited.
- e. Compensation by Vendors of Clients: Staff members are prohibited from employment by or receipt of compensation for any reason whatsoever, from any person, company, corporation, or other non-governmental entity which sells or provides services, products, or consultation to the County of Santa Cruz, or to patients, clients, wards, or conservatees thereof.
- f. Activities That Interfere With Employee Job Performance: Employment for personal benefit or profit or volunteer activities in community agencies and interests, the performance of which interferes with adequate performance by the County employee, is also prohibited.
- g. Self Referral: Self-referral or referral to other providers with whom any economic interest is established of any patients, clients, wards, or conservatees enrolled or admitted to County-provided services and for whom outside consultation, diagnosis, or treatment is deemed advisable.

3. Written Interpretation:

- a. Employees have the right to request a written interpretation from their Division Chief regarding the application of the above provisions as they relate to specific identified circumstances or concerns of the employee;
- b. Employees are encouraged to request clarifications as needed, in their area of work; and
- c. If the employee disagrees with the interpretation provided, there is a provision for an appeal to a Review Board. (See Personnel Policy Manual Section 173; D, E & F for more details.)

4. Violations

- a. Violations of the above policy provisions are ground for disciplinary action up to and including suspension or dismissal.

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- b. Please talk with your immediate supervisor or Division Chief if you have any questions about how these rules apply to you.


5. HSA Conflict of Interest Code

a. Purpose

- i. HSA developed a Conflict of Interest Code in response to requirements by the State Fair Political Practices Commission that was adopted by the County Board of Supervisors;
- ii. The HSA code applies to those employees in designated positions who may be materially affected by their official actions; and
- iii. In appropriate circumstances, designated HSA employees shall be disqualified from acting in order that conflicts of interest may be avoided.
- iv. Officers, board/commission members, and agents of the Clinic Services Division shall observe the restrictions on any activities that constitute Incompatible Activities or Conflict of Interest as specified in the HSA code as well as Article VII in The County of Santa Cruz Integrated Community Health Center Commission Bylaws.

b. Annual Disclosure Statement

- i. Each designated employee (see **Appendix for HSA Designated Employee Positions List**) shall file an annual statement (State FPPC Form 700) disclosing that employee's interest in investments, real property and income designated as reportable;
- ii. All designated employees shall submit the **Statement of Financial Interest (State FPPC Form 700)** to HSA within 30 days of their start of employment and annually in January of each year; and
- iii. HSA shall retain a copy and forward the original forms to the County Clerk


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- iv. All officers, board/commission members, and agents of the Clinic Services Division shall complete a Conflict of Interest Declaration Form within 30 days of the start of their term and annually in January of each year; and
- v. Clinic Services Division Administration shall electronically archive the form for a duration of at least 8 years.

c. Disclosures

i. Reporting Requirement

1. The disclosure categories indicated below are reportable if any may be foreseeably affected materially by any decision made or participated in by the designated employees, officers, board/commission members, and/or agents of the Clinic Services Division by virtue of their position; and
2. Specifically, financial interests are reportable only if:
 - a. They are located within or subject the jurisdiction of the agency; or
 - b. The business entity is doing business or planning to do business in the jurisdiction; or
 - c. The business entity has done business within the jurisdiction at any time during the two (2) years prior to the filing of the statement.
3. Disclosures from employees will be made to the Chief of Clinic Services who shall bring the matter to the attention of HSA Personnel and/or the board/commission, or a duly constituted committee thereof as appropriate.
4. Disclosures involving the Chief of Clinic Services, officers, board commission members, and/or agents of the Clinic Services Division should be made to the board chair, (or if he or she is the one with the conflict, then to the board vice-chair) who shall bring these matters to the board, or a duly constituted committee thereof. The board, or a duly


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constituted committee thereof, shall determine whether a conflict exists and in the case of an existing conflict, whether the contemplated transaction may be authorized as just, fair, and reasonable to the Clinic Services Division.

5. The decision of the board, or a duly constituted committee thereof, on these matters will rest in their sole discretion, and their concern must be the welfare of Clinic Services Division and the advancement of its purpose.
 - ii. Categories: The types of financial interests and administrative/management positions that must be reported include (see Definitions):
 1. Certain interests in real property;
 2. Income and investments; and
 3. Any business entity in which the designated employee is a director, officer, partner, trustee, employee or hold any position of management.

REFERENCES:

1. Applicability of 45 CFR Part 75, 42 C.F.R. § 56.114
2. Applicability of 45 CFR Part 75, 42 C.F.R. § 51c.113
3. Codes of Conduct, 45 C.F.R. § 74.42
4. General Procurement Standards, 45 C.F.R. § 75.327
5. Governing Board, 42 C.F.R. § 51c.304
6. California Government Code (Sections 19990-19990.6, 87200-87210 and 87300-87313)
7. California Code of Regulations (Section 18730)
8. County Code (3.40.010 and 3.40.020)
9. Personnel Regulations (Section 173); and
10. HSA Conflict of Interest Code

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DEFINITIONS:


1. Interest in Real Property
 - a. Interest therein, including any leasehold, beneficial or ownership interest or option to acquire such interest in real property, if the fair market value of the interest is greater than \$2,000.00; and
 - b. Such interests of an individual include a business entity's share of interest in real property or any business entity or trust in which the designated employee or his/her spouse own, directly, or indirectly, or beneficially, a 10% or greater interest totaling \$2,000.00 or more.

2. Income
 - a. Income from a public agency need not be disclosed; and
 - b. For purposes of exemption, the term "income from a public agency" includes agency or County salary and income derived from publicly operated schools for teaching and consulting services.

3. Investments
 - a. Included
 - i. Any financial interest in or security issued by a business entity, including but not limited to common stock, preferred stock, rights, warrants, options, debt instruments and any partnership interest or other ownership interest; and
 - ii. A pro rata share of investments of any business entity or trust in which the designated employee or his or her spouse owns, directly, indirectly, or beneficially a 10% interest or greater.

 - b. Not Included
 - i. A time or demand deposit in a financial institution, shares in a credit union, any insurance policy, or any bond or other debt instrument issued by any government or government agency; or
 - ii. Assets whose fair market value is more than \$2,000.00.

FORMS: <https://www.votescount.us/Form700E-Filing.aspx>

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APPENDIX

HSA Designated Employee Position List
for REQUIRED CONFLICT OF INTEREST FORM

- Administrative Services Manager
- Administrative Services officer I/II
- Assistant Chief of Fiscal Services – HSA
- Assistant Director – HSA
- Assistant Director of Nursing
- Behavioral Health Program Manager
- Chief of Clinic Services
- Chief of Fiscal Services – HSA
- Chief of Public Health
- Chief of Psychiatry
- Deputy Director of Mental Health Services
- Director of Mental Health Services
- Director of Administration Services – HSA
- Director of Environmental Health
- Director of Nursing
- Division Director of Environmental Health
- Environmental Health Program Manager I/II
- Facilities Manager
- Health Center Manager
- Health Services Agency Director
- Health Services Manager
- IT Manager III – HSA
- Medical Care Program Eligibility Supervisor
- Medical Director – Health Services Clinic
- Medical Services Director/Heath Officer
- Public Health Manager
- Psychiatric Medical Director
- Public Guardian/Conservator
- Resource Planner IV
- Senior Behavioral Health Manager
- Senior Health Services Manager

Quality Management Report

September 2021





Quality Management Committee Peer Review and Risk Management Committee

- ▶ Reviewed Clinic Operational Plan Assignments
 - ▶ Using Trello to track progress
- ▶ Staff Satisfaction Survey Revision (Scheduled to distribute in Mid-September)
 - ▶ Valued, listen to, support and guidance, recognition, opportunities to learn, Epic training, professional goals, suggestions to improve over all job satisfaction
 - ▶ Questions from existing survey, Institute for Healthcare Improvement (IHI), US National Library of Medicine National Institutes of Health.
- ▶ No Show Data



Peer Review and Risk Management Committee

Have not met since the last commission meeting

- First Tuesday of the month

