



Ventura County Community Health Center (CHC) Board Meeting Minutes

Theresa Cho, MD
Ventura County Ambulatory Care
Chief Executive Officer
Medical Director
CHC Executive Director

Lisa Canale
County of Ventura
Assistant County Counsel

Chaya Turrow
Ventura County Ambulatory Care
CHC Co-Applicant Board Clerk

Meeting Minutes
April 27, 2023
12:30 - 2:00 PM

2240 E Gonzales Rd
Suite 200,
Oxnard, CA 93036

Zoom Virtual Meeting

Link:
<https://us02web.zoom.us/j/81070247262?pwd=QkZQaVZ5ek9SU0lQnZlTG1SYlExZz09>

Meeting ID: 810 7024 7262
Passcode: 291025

Teleconference:
+1 669 900 6833

CHC BOARD MEMBERS:

DAVID TOVAR, District 3
Chair

JAMES MASON, District 5
Vice Chair

RALPH REYES, District 3
Secretary

RENA SEPULVEDA, District 1
Treasurer

MANUEL MINJARES, District 3

RENEE HIGGINS, MD, District 3

SUSAN WHITE WOOD, District 5

MELISSA LIVINGSTON, District 4

ESPY GONZALEZ, District 2

ROBERT RUST, District 3

MONIQUE NOWLIN, District 1

Call to Order:

David Tovar called the meeting to order at 12:41 PM.

1. Roll Call

David Tovar	Present
James Mason	Present via teleconference – Non-voting
Ralph Reyes	Present
Rena Sepulveda	Present
Manuel Minjares	Absent
Renee Higgins, MD	Present
Susan White Wood	Present
Melissa Livingston	Present
Espy Gonzalez	Present
Robert Rust	Present
Monique Nowlin	Present

Roll call confirmed that a quorum was present.

2. Ventura County Staff Present

Theresa Cho, MD, HCA – Ambulatory Care CEO
Lizeth Barretto, HCA – Ambulatory Care
Allison Blaze, MD, HCA – Ambulatory Care
Michelle Meissner, HCA – Ambulatory Care
Luis Torres, HCA – Ambulatory Care
Jason Cavender, HCA – Ambulatory Care
Dee Pupa – HCA – Ventura County Health Care Plan
Christina Woods – HCA – Ventura County Health Care Plan

Public Present

Vanessa Teran – MICOP, Policy Director
Genevieve Flores-Haro – MICOP, Associate Director

3. Public Comments - None

Action Items:

4. Approval of CHC Board Meeting Agenda for April 27, 2023

Ms. Turrow requested to amend the agenda by removing item number 12, the Cybersecurity Report. Will save for another meeting.

Board Member Rust motioned to approve the agenda with the amendment; Board Member Nowlin seconded. The motion passed with no dissensions or abstentions.

5. Approval of CHC Minutes for March 23, 2023

Board Member Reyes motioned to approve the minutes; Board Member Gonzalez seconded. The motion passed with no dissensions. Board Members Livingston and White Wood abstained.

6. Review and Approve SFDP Evaluation

a. MICOP Community Survey

Vanessa Teran and Genevieve Flores-Haro from MICOP (Mixteco Indigena Community Organizing Project) shared their 2021 Health Post-Survey Highlights and how their efforts support the Ventura County Health Care Agency (VCHCA) and the community. Ms. Flores-Haro shared the ongoing efforts of the partnership between MICOP and the VCHCA to improve access to services, including simplifying the application process for discounted services.

MICOP began at the Las Islas Clinic. They shared information on a survey they conducted in 2017 and a post survey conducted in 2021 to assess the utilization of services and access to information on the discount programs from various health care providers. The pre-survey surveyed 192 patients and the post-survey surveyed 300 patients. These patients were specifically from the indigenous communities.

The surveys were operated in person and via phone calls. The teams conducted the survey in the spoken language of the patient and made sure to annotate if the language is not a written language.

There was a 20% increase in Self-Pay Discount Program awareness. Additionally, many were able to access the program in 2021.

b. Program Utilization

Dr. Cho shared the Evaluation of Sliding Fee Discount Program updates and the relation to MICOP. The vast majority of patients that use the program are at the 0-100% FPL. There are over 8,000 patients that use this program, with over 20,000 total encounters in 2022.

The team has also simplified the application to a one-page application. The application only asks about income and family size. Luis Torres has led the charge of training our staff on helping patients apply for the SFDP.

Dr. Cho shared the Discount Matrix that shares each level of the FPL and the nominal fee per service. She also provided background on how the nominal fee is inclusive of all services provided in the visit. The team asked the CHC Board for feedback on the nominal fees presented to ensure the fees are appropriate for the patient population served. Moving forward, the team would like to include questions related to the nominal fees and the SFDP in the patient experience surveys.

Board Chair Tovar asked how this was developed. Ms. Barretto said that there were other FQs looked at, and in the past, there was already a flat fee that patients were paying.

Board Member White Wood thinks this program looks really good. It is streamlined and concise and in line with what people would pay as a copay.

There is signage stating that service is not denied for inability to pay. Additionally, if patients do not qualify, as Ms. Pupa mentioned, there are other programs like the Self-Pay Discount Program.

Board Member Nowlin moved to approve. Board Member Rust seconded. The motion passed with no dissensions or abstentions.

7. Review and Approve Change in Scope

Ms. Barretto shared that there weren't many changes in the scope of services, but at the last meeting there were still a few things needed to review, such as additional dental and if services were column I or II.

We kept additional dental, and we are not deleting urology, as it was confirmed that urology services are being provided at one of the sites. Preventative dental includes screenings, fluoride varnish, and sealants. Additional dental is fillings and other basic dental care.

Column I is what we provide at the clinics from our own employees. Column II is what we provide at the clinics from contractors. Column III are formal agreements/referrals, but we didn't add anything to our column III.

Ms. Barretto provided a sheet with all 5A services and submitted changes.

Board Member Higgins moved to approve the Change in Scope. Board Member Sepulveda seconded. The motion passed with no dissensions or abstentions.

8. Review and Approve Financial Report

Mr. Cavender shared the FYTD February 2023 Financial Report.

The first chart focuses on the net patient revenue and compares three full years year over year. The green bar is the net patient revenue and what we hope to collect. The blue bar is the net operating loss, which is the net patient revenue with operating expenses included. These operating expenses could be salaries, wages, benefits, rent, utilities, etc. Allocation for supplemental funding, which is paid to the medical system is included in the income represented by the purple bar. With the supplemental funding, we now have a positive margin. Board Chair Tovar asked what caused the net losses to go up? Mr. Cavender confirmed this was largely due to salaries.

The second chart shows the net patient revenue per provider visit. The rate is up in 22-23, due to a more favorable financial class mix and PPS rates. Ms. Pupa asked if this includes locums and all providers. Mr. Cavender confirmed this is all providers, including telehealth. Dr. Cho also confirmed that we do not have locums.

The third chart shows the revenue and expenses. These are annualized. The largest variance is salaries and wages. Medical supplies include pharmaceuticals, more specifically, pain management and services provided. About half of the expenses listed under supplies are the home blood pressure cuffs that are reimbursed through the 330 grant.

The fourth chart shows the supplemental funding included. Board Member Rust requested confirmation that the net income was balanced forward.

Board Member White Wood moved to approve the FYTD February 2023 financial report. Board Member Nowlin seconded. The motion passed with no dissensions or abstentions.

9. Review and Approve Ambulatory Care Q1 Quality Updates

Ms. Meissner shared the 2023 Quality Updates. The team began dividing the metrics into categories based on the type of care provided. Three months into the year, already hitting targets with Chlamydia Screening, Screening for Depression and Follow-Up Plan, Tobacco Cessation and Counseling, Well-Child Visits, Immunizations for Adolescents, and Lead Screening in Children. Also broke down the metrics into seasons to better focus on individual metrics.

The flu vaccination rate was much lower than anticipated. The team pushed out text messages and communicated with patients the availability of drop-in appointments. Sent out over 2,700 texts total, with 155 responses (6% response rate). The team is now focusing on childhood immunizations.

Ms. Meissner shared the Q1 Complaints and Grievances through 2022-2023. Most complaints and grievances come from access and phone related complaints. Q1 was the first quarter that

phone wait time began trending down. The team has been working hard to add more staff and advocating for the text messaging platform.

Ms. Woods asked if the complaints that show as VCHCP are those that came through VCHCP and then were routed to Ambulatory Care. Ms. Meissner confirmed and said that after they're routed to the Ambulatory Care, the Ambulatory Care team works to solve the issue.

The team is currently working on Well-Child Passports and extending the Home Blood Pressure Cuff program.

How are patients provided the information to file a complaint? There is both an email and phone number available and posted at each clinic. Additionally, the staff are trained to try to do any service recovery on site.

Board Member White Wood doesn't recall approving or seeing anything about the new Blood Pressure Cuff program. Ms. Meissner confirmed that it is a new grant that has not been to the Board yet.

Board Member Rust motioned to approve the Q1 Quality Updates. Board Member Higgins seconded. The motion passed with no dissensions or abstentions.

10. Review and Approve the Patient Registration Policy

Ms. Barretto shared the Patient Registration policy. It was previously brought to and approved by the Board with the Billing policies, but we made a few updates. The new policy includes verbiage stating that patients are to be registered in Cerner. Additionally, there is added language entering payor information and eligibility assistance with the Sliding Fee Discount Program.

Board Member Livingston motioned to approve the updates to the Patient Registration Policy. Board Member White Wood seconded. The motion passed with no dissensions or abstentions.

Presentation Items:

11. UDS Submission

Ms. Meissner shared the UDS Submission Presentation. In 2022, the population was similar to 2021, with a slight decrease in general and a significant decline in our homeless population patients. This is largely due to data capture issues.

The patient demographic have been stable year over year. Continue to serve a large proportion of Hispanic patients. There was also a slight decline in overall visit counts. There was a trend down in virtual visits, which is a positive because it is trending toward pre-pandemic numbers. The top patient diagnoses and the top services were identical to what was reported in 2021.

Ms. Meissner shared the clinical measures. The blue line is our organization, and the green line is the national average. Prenatal care improved and was above the national average. Similarly, cervical cancer screening was above the national average, but did decline within our organization. Tobacco use screening and cessation counseling and IVD both remained stable compared to last year's report but are well above the national average.

There was a 6.5% increase in controlling high blood pressure, 4.5% increase in breast cancer screening, 4% increase in statin therapy, 3.5% increase in depression remission at 12 months, 1% increase in colorectal cancer screening, and a 2% increase in HIV screening.

Finally, Ms. Meissner shared that the improvement opportunities include returning performance to pre-pandemic levels and demographic collection.

Board Chair Tovar asked if Tonic could take the answers a patient provides and then code it to match the provider's, allowing the provider more time to focus on the patient? Ms. Meissner said it might not be Tonic, but logic can be programmed to pull data.

Discussion Items:

12. Continued Business

a. Grants Updates

Ms. Turrow reminded the Board that the Operational Site Visit will be May 9-11. The Board Governance review will be on Wednesday, May 10 at 12:00pm, virtually. We would like to do a mock interview next week on May 3 through the GoTo meeting link to troubleshoot any issues.

13. CEO Update – Dr. Theresa Cho, HCA, Ambulatory Care

Dr. Cho thanks the Board in advance for their participation in the OSV.

The team is working on improvements in the Electronic Health Record, Cerner Practice Management. This will help in registration, communication, and authorization processes. This also allows us to streamline and clean up our referral center processes and activities. This will ensure our patients are getting the services that they were referred to have.

14. Board Comments

No Board comments.

15. Staff Comments

Ms. Turrow shared the Brown Act Rules and Regulations via email. If there are any questions for County Counsel that the Board would like clarification, please reach out to Ms. Turrow as a liaison. Additionally, if the Board meets fully in-person, the virtual meeting requirement is not necessary. This is something the team will work on over the next month as we determine the Board's availability.

16. Adjournment – Adjourn 2:15pm.

Audio files of the CHC Co-Applicant Board meetings are available by contacting the CHC Co-Applicant Board Clerk at chcboardclerk@ventura.org

Minutes submitted by: Chaya Turrow, CHC Board Clerk

**Next Meeting: Thursday, May 25, 2023
2240 E Gonzales Road, Suite 200, Oxnard, CA 93036**