

**Falls Community Health Governing Board Minutes**  
**Thursday, July 17, 2014, at 11:30 AM**

**Present:** Kari Benz, Linda Karnof, Tim Roti, John Peterson, Mary Greenlee, Nathan Kasselder, Arlene Olson, Ryon Reckling, Tracy Johnson

**Staff Present:** Jill Franken, Alicia Collura, Amy Richardson, Lisa Stensland, Lonna Jones, Andy Pederson, Jen Tinguely, Jeremy Johnson

Call to Order: The meeting was called to order by Kari Benz.

Minutes: Motion to amend the minutes drafted to reflect that OSV training items comprise review of the 19 key requirements including 6,7,9,10,12,13,14,15,19. Motion to approve by Mary, Linda seconded, motion carried.

Minutes from June 19, 2014 meeting were approved with the amended changes. Motion to approve by Arlene, Mary seconded, motion carried.

**NEW BUSINESS:**

**Nominating Committee:** The board needs to form a nominating committee to bring a slate of officers to the August meeting with the board vote for Chair and Vice Chair. Last year the board as the committee made the nominations during the meeting and the vote was then taken in September.

A motion was made that those in attendance of the August 2014 meeting would submit nominations for Chair and Vice Chair to then be voted on in September. Support – Mary, seconded by John, motion carried.

**Access:**

Dr. Jennifer Tinguely presented the Credentialing and Privileging for the 4 new Advanced Practice Providers, a new Nurse Practitioner in Psychiatry and for the behavioral counselors.

Motion is to approve credentialing and privileging for Advanced Practice Provider Charlotte Dohn as recommended by Dr. Tinguely. First - Tracy, seconded by Nathan. Motion carries.

Motion is to approve credentialing and privileging for Advanced Practice Provider Whitney Larsen as recommended by Dr. Tinguely. First - Arlene, seconded by Mary. Motion carries.

Motion is to approve credentialing and privileging for Advanced Practice Provider Karissa Zimmer-Miller as recommended by Dr. Tinguely. First - Nathan, seconded by Linda. Motion carries.

Motion is to approve credentialing and privileging for Nurse Practitioner John Erpenbach as recommended by Dr. Tinguely. First - John, seconded by Mary. Motion carries.

Motion is to approve credentialing and privileging for counselors Andrea Eben, Erin Sanford, Sarah Thoms, and Angela Peck as recommended by Dr. Tinguely. First - Mary, seconded by John. Motion carries.

Dr. Jeremy Johnson presented the Credentialing and Privileging for Dr. Jill Paulson, DDS and Dr. Robert Hille, DDS.

Motion is to approve credentialing and privileging for dentist Dr. Jill Paulson as recommended by Dr. Johnson. First - Mary, seconded by Nathan. Motion carries.

Motion is to approve credentialing and privileging for oral surgeon Dr. Robert Hille as recommended by Dr. Johnson. First - Linda, seconded by Tracy. Motion carries.

Alicia reviewed the APP productivity goals and met with them to establish guidelines as they transition into full time staff at FCH. A review of national, state, CHC and our past data helped to establish the guidelines and goals as to how many patients they should see per shift. The goal will be based on the amount of experience the provider has with FCH.

Judy Jacobsen has 25 years of experience with FCH and would set her goal at 8. Whitney Larson has about 2 years' experience and would be seeing 7 patients, Karissa Zimmer and Charlotte Dohn have less than a year and would be expected to see 6 patients.

**Quality: Alicia**

Care teams are in process of getting each patient assigned to a team, each team is assigned a supervising doctor, advanced practice provider and then residents along with nurses and support staff. Two of the teams have had their meetings already. The care team plan allows us to look at the dashboard items a bit differently. We can track the different measures by each team, one measure looked at was the hypertension. The goal of the hypertension measure is that 65% of patients would have a blood pressure of <140/90. The blue team's average is 60%, red 61%, green 62%, purple 59%. Another dashboard measure looked at was the number of depression screenings done. Blue team averaged 59%, red 47%, green 44%, purple 53%. This way of looking at the data allows each team to focus on what their patients need.

**Financial Report: Amy**

This month's report is in review through the end of May 2014, also made available to the board was the month of April. Cash collections for May, was \$345,000. The monthly budget is \$415,000.

YTD program income collected is \$1,572,000, an increase of 600 from last year.

The City contributed \$383,000, an increase of 33,000 from 2013. Medicaid was higher in 2013 because of some incentive dollars we were given.

Expenses- are at \$2.7 million YTD, which is 37% of the budget; allocations are being tracked different this year with the new software. There is a 1.3% increase from last year

Total charges are \$3.25 million, about a 2.9% increase from last year.

Adjustments are \$1.7 million, an increase of 19% from last year.

Accounts receivable- 1.63 million and nothing was sent to collections.

Motion made to accept financial report, supported by Ryon, seconded by Tracy. Motion carries.

Amy reviewed the comprehensive financial audit that is annually done for the city.

A motion was made to accept the city's annual independent financial audit as presented, supported by Mary, seconded by Arlene. Motion carries.

**Executive Director Report-Jill**

CFM/FCH Draft Contract has been reviewed by the steering committee voted on by the committee to bring to the respective boards for approval. Three documents needed to be established that would meet the requirements for both CFM and FCH. These agreements will allow the entities to meet accreditation, program requirements, reporting measures, and all legal obligations- those documents are:

- Agreement for Professional Medical Services: It identifies and establishes:
  - o Roles and responsibilities of both entities
  - o Collegial collaboration amongst providers and staff
  - o Requirements to follow FCH policy and procedures
  - o Qualification requirements of those providing services and supervising
  - o Scheduling of staff (residents and their assigned faculty)
  - o Billing information for services rendered
  - o Referral process for OB patients (since this is a service that FCH doesn't provide)
  - o Time frames to which reports are generated
  - o Compensation for provider services
- Sioux Falls Family Medicine Residency Master Affiliation Agreement for Graduate Medical Education(GME):
  - o Roles and responsibilities of both entities
  - o Details of residency program requirements from CFM and accrediting body
  - o FCH requirements participating as a FMP
- Site Letter of Agreement:
  - o Educational goals and objectives both parties are amenable to
  - o Length of time residents are assigned to this program and who is responsible for their financial support, insurance and benefits
  - o Policies and procedures that govern the resident's education

The next step is for the attorneys of both parties to review and make changes if necessary.

A motion was made to approve and agree to accept any non-substantive changes made by the attorneys with any substantive changes to be brought back to the board for the Agreement for Professional Medical Services, supported by Mary, seconded by Nathan, motion carries.

A motion was made to approve and agree to accept any non-substantive changes made by the attorneys with any substantive changes to be brought back to the board for the Sioux Falls Family Medicine Residency Master Affiliation Agreement for Graduate Medical Education (GME), supported by Tracy, seconded by Arlene, motion carries.

A motion was made to approve and agree to accept any non-substantive changes made by the attorneys with any substantive changes to be brought back to the board for the Site Letter of Agreement, supported by John, seconded by Mary, motion carries.

**Operational site visit:**

The Operational site visit will be August 26-28, and is an objective assessment to make sure FCH is in compliance with the health center program requirements. Items being reviewed includes, policies and procedures, financial or clinical records (not individual patient health records), other relevant documents needed to assess and verify compliance with program requirements.

Of the 19 key requirements those reviewed were numbers: 1,2,3,4,5,8,11,16,17,18.

A motion was made to support and approve the resolution for a co-applicant agreement between the Falls Community Health Governing Board and the City of Sioux Falls, supported by Linda, seconded by Nathan, motion carries.

A motion was made to approve the updated Governance Policy, supported by Ryon, seconded by Tracy, motion carries.

A motion was made to approve the updated Billing and Collections Policy, supported by Ryon and seconded by Linda, motion carries.

August 21<sup>st</sup> will be a meeting as scheduled and then most likely the following week when the review team is here.

There being no other business Motion to adjourn, supported by Linda, seconded by John. Motion carries.