

**Falls Community Health Governing Board Minutes**  
**Thursday, August 20, 2015, at 12:00 pm**

**Present:** Kari Benz, Jim Kellar, John Peterson, Linda Karnof, Gwendolyn Martin-Fletcher, Katie Reardon, Bruce Vogt

**Absent:** Susy Blake, Steve Miller, Arlene Olson, Tracy Johnson

**Staff Present:** Jill Franken, Alicia Collura, Dr. Jen Tinguely, Lonna Jones Lisa Stensland

Call to Order: The meeting was called to order by Kari Benz at 12:05 pm.

Consent Agenda items: Governing Board Minutes for July 16, 2015, and QAQI Minutes from July 20, 2015 and August 17, 2015 were unanimously approved.

Introductions were made of the staff and board members and new board member Katie Reardon. The board motioned to approve the appointment of Katie Reardon to the Falls Community Health Governing Board made by Linda, seconded by Bruce. Motion Carries.

**OLD BUSINESS:**

**Board Nominations:** Jim was nominated for Chair and Bruce was nominated for Vice Chair. Any other nominations can be submitted next month before voting.

**NEW BUSINESS:**

**Financial Report:**

The Falls Community Health reports attached are through the month ending July 31, 2015. We are 58% through our fiscal year. The last financials presented were through the month of June 2015.

**Operating Revenues:** Net patient revenue consists of all patient charges/fees. Total net patient revenue for July came in at \$341,885 which is 53% of the YTD July actuals to budget. Gross patient fee revenue was higher than budget for the month however Total Adjustments for the month were up approximately \$50K from the average, therefore decreasing the amount of net patient revenue (the amount FCH can collect). Total grant revenue of \$227,156 includes grant drawdowns from the Community Health Center, Ryan White Part C, HIV Prevention and Refugee grants. Total Other Revenue is \$14,432; this includes a reconciliation from Lewis Drug for prescription medications from our federal 340B prescription drug program. Total Operating Revenues YTD July budget is \$4.4M, which is close to budget at 56%.

**Operating Expenses:** Operating expenses are classified within 7 categories. There were several one-time payments processed in July such as workers compensation, property liability insurance, and rentals of IT equipment. Total expenses were \$889,633 for the month of July. Monthly average is approximately \$600K.

- Personnel expenses are at 50% of the budget, expenses are less than budget due to vacancies in positions this year and less part time expense.
- Professional Services are at 61% of the YTD budget. This category includes payments to Center for Family Medicine, locum providers, interpreter services and laboratory expenses.
- Rentals are at 93% of the YTD budget. The expected one-time payment of \$107K was processed in July for annual computer and software expense.
- Repair and Maintenance is at 72% of the YTD budget. July expenses were minimal at \$441.
- Supplies and Materials are at 42% of YTD budget. This category includes general medical and dental supplies, immunization and pharmaceuticals as well as the monthly maintenance of the electronic medical and dental software systems.
- Training is at 61% of the YTD budget. The majority of July expenses are from out of state travel at \$6K and continuing medical provider education at \$1K. Majority of YTD actuals are from Continuing Education expenses for the medical providers and out of state travel.
- Utilities are at 55% YTD budget. The majority of this expense occurs quarterly. Payment was processed in July; next payment should be processed in the October reporting.

**Non-operating Revenue (Expense):**

- Other Revenue is at 73% of the budget and includes USD dental lease payments and recovery of prior year revenue.
- Estimated Uncollectible Revenue is at 129% to YTD budget. This line will continue to exceed the YTD throughout the year due to a change in expense allocation. For July, estimates are \$116K of the Net Patient Revenue.

**Net Income (Loss):** July actuals are (\$408,578) and YTD (\$549,796), 61% of YTD budget.

Motion made to approve the financial report made by Bruce, seconded by Jim. Motion carries.

**Service Area Competition Application Budget:**

For the 2016-2018 Service Area Competition Application, FCH is required to submit an annual budget. This 2016 budget covers a year of operating revenue and expenses and requires board approval for submission.

**Operating Revenues:** Operating revenues include intergovernmental (grants), charges for services (patient revenue), other and miscellaneous revenue. Total: \$7,967,395

Intergovernmental revenue of \$2,781,676 includes grant revenue from the Community Health Center, Ryan White Part C, HIV Prevention and Refugee .

Charges for Services of \$4,777,388 is the patient revenue (charges for medical and dental services).

Other Revenue is budgeted for \$5,500 and this is interest income earned.

Miscellaneous revenue is budgeted at \$402,831; this includes Medicaid Health Home monthly case management payments, dental USD lease, incentive dollars for using electronic medical and dental records (Meaningful Use), copy services, and 340B pharmacy reconciliation.

**Operating Expenses:** Operating expenses are classified within 7 categories. Total: \$9,159,963

Personnel expenses are budgeted at \$6,389,177. This includes the additional dental team-dentist, hygienist and 2 dental assistants-as well as the standard cost of living and wages increases for full and part time staff.

Professional Services are budgeted at \$1,637,271. This category includes payments to Center for Family Medicine, locum providers, interpreter services, claims processing, after hours phone service, county management agreement, collection services and laboratory expenses. The laboratory expenses increased \$79K due to a change implemented following the August 2014 grant operating site visit. Instead of the reference lab billing the patient directly, patients will receive a statement from FCH and be offered sliding fee discounts if eligible. This expense does have offsetting revenue.

Rentals are budgeted at \$141,150. This is for annual computer hardware and software maintenance as well as the City's financial software expense allocated to the department.

Repair and Maintenance is budgeted at \$63,840. The majority of this expense is to cover dental repairs and maintenance.

Supplies and Materials are budgeted at \$736,257. This category includes general medical and dental supplies, immunization and pharmaceuticals, fuel for transport vans, as well as the monthly maintenance of the electronic medical and dental software systems.

Training is budgeted at \$72,779. This category includes subscriptions, continuing education for medical and dental providers, in and out of state travel.

Utilities are budgeted at \$119,118. This includes telephone, electricity, water, and natural gas expenses. There was a \$27K increase in natural gas and electricity from prior year budget.

**Net Income (Loss):** The budget includes a budgeted City contribution of \$1,192,568.

Motion made to approve the financial report made by Jim, seconded by John. Motion carries.

**ACCESS:**

Motion made to accept the credentialing and grant privileging for Leah Mergen as presented made by Bruce and seconded by Gwen. Motion carries.

Motion made to accept the credentialing and grant privileging for Julie Rasmussen as presented made by Linda and seconded by John. Motion carries.

**QUALITY:**

2016-2018 FCH Health Care plan: The list of measures that are used to help us set the directions for the care teams and to improve the quality of care. HRSA has initiated 3 new measures, including prenatal –enter treatment in 1<sup>st</sup> trimester (these are referred to CFM), Prenatal- % of babies with below normal weight and Oral health- % of children with sealants.

A motion made to accept the 2016-2018 FCH Health Care Plan was made by Linda, seconded by Jim. Motion carries.

Dental: The chart audit revealed a 96% compliance rate. Completed Treatment plans are at 61%, no-show rate is at 15%. The Dental office has seen 653 emergencies from May – July.

HRSA has a new dental measure that will be reported on the UDS report for 2015, it is: The percentage of children, age 6-9 years, at moderate to high risk for caries who received a sealant on a first permanent molar during the reporting period. Numerator: subset of children in the denominator who received a sealant on a permanent first molar tooth in the measurement year. Denominator:

number of health center patients, age 6-9 years old, who had an oral assessment or comprehensive or periodic oral evaluation visit and are at moderate to high risk for caries in the measurement year. Healthy people 2020 data that HRSA used in developing the sealant measure, increase the proportion of children aged 6-9 years who have received dental sealants on one or more of their permanent first molar teeth. The baseline is 25.5% of children aged 6-9 years received dental sealants on one or more of their first permanent molars in 1999-2004. The target will be 28.1%, with the target setting method to be a 10% improvement. We did an audit of the first 6 months of 2015 and currently we are at 33.81% for the eligible children that have received a sealant. We are above the target goal so we will try to maintain the 10% improvement.

**POLICY UPDATES:**

Motion made to re-approve the support for a co-applicant structure between the Falls Community Health Governing board and the City Of Sioux Falls as presented made by Bruce and seconded by Jim. Motion carries.

Motion made to approve the Falls Community Health Standard Operating Policy/Procedure for Patient Injury/Concern as presented made by Jim and seconded by Linda. Motion carries.

**EXECUTIVE DIRECTOR'S REPORT:**

Deferred

There being no other business Motion to adjourn, supported by Jim, seconded by Linda. Motion carries.  
Adjourned at 1:10 pm



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Kari Benz- Board Chair

September 17, 2015