

GOVERNANCE BOARD MINUTES OF MONTHLY MEETING

August 11, 2022 via Hybrid Meeting (In-Person & Teleconference)

5:00 p.m.

Knox County Health Department

1361 W. Fremont St.

Galesburg, IL 61401

The Knox Community Health Center Governance Board monthly meeting was held via Hybrid Meeting (In-Person & Teleconference) on August 11, 2022. President Karen Lynch called the meeting to order at 5:09pm. Governance Board members present in-person were Karen Lynch, Sammi Durdle, Marty Andrews, and Diane Munson. Governance Board members present via teleconference were Harlan Cook, Tara Hillier, Amber Miles, and Angela Petersen. Also attending in-person were Michele Gabriel, CEO; Reina Reyes, COO; Staci Simpson, Director of Operations; Dr. Andrea Miller-Finch, Dental Director; Dr. Robert Wagner, Chief Medical Officer; and Tina Jockisch, Administrative Clerk. Absent were Bill Butts, Gayle Keiser, and Christina King. President Karen Lynch declared a quorum.

ADDITIONS TO AGENDA

Ms. Gabriel, CEO for the Knox Community Health Center reported the first change to the August 11, 2022 agenda: under Director of Operations move item (b) Patient Population Zip Code to (f) under New Business, and under Executive Director's Report Michele will give an update of some Health Center activities. Additionally, Ms. Gabriel stated there were two additions to the agenda under New Business (g) Sliding Fee Scale and (h) Annual Review of Services, Location, and Hours of Operation – Form 5A and Form 5B. President Lynch added two additions under Presidents Comments (a) Update Regarding Annual Performance Evaluation for the Public Health Administrator, and (b) brief discussion on Virtual Site Visit.

APPROVAL OF MINUTES

A motion to approve the minutes of the July 14, 2022, meeting as circulated was made by Sammi Durdle and seconded by Amber Miles the motion for approval was unanimously adopted by a voice vote.

PRESIDENT'S COMMENTS

The first addition to the agenda under President's Comments, President Lynch updated the Board members regarding the Annual Performance Evaluation for the Public Health Administrator, stating she has been in contact with Board of Health President Dan Harris, noting Governance Board members Marty Andrews and Angela Petersen will be working in collaboration with Board of Health members Bruce Bobofchak and Doug Gibb to complete the evaluation process. The committee will be meeting next week with President Lynch and President Harris overseeing; hopefully they will provide a progress report to the Governance Board at the September meeting.

The final addition to the agenda under President's Comments, President Lynch stated four Governance Board members met virtually with site visit review team, stating they put the Board at ease right away. President Lynch noted there were several things to work on, such as language in the Governance Board bylaws, but felt everything went well and the Board enjoyed speaking to the review team.

STANDARD MONTHLY OPERATIONAL REPORTS

The only item on agenda under Standard Monthly Operational Reports, Michele Gabriel, CEO, presented the July 2022 Standard Monthly Operational Reports. These are reports that provide operational and performance measures data for the Community Health Center and are provided to the Governance Board each month. Reina Reyes, COO stated the reports were pretty standard for the month. President Lynch noted she noticed the medical no show rates were down slightly this month. Ms. Reyes noted the medical appointments have gone up, Dr. Wagner has moved to twenty-minute appointments which significantly increases the volume of patients who can be seen, the numbers will be reflected in next month's reports. A motion to approve the July 2022 Standard Monthly Operational Report as presented was made by

Angela Petersen and seconded by Sammi Durdle, the motion for approval was unanimously adopted by a voice vote.

EXECUTIVE DIRECTOR'S

Ms. Gabriel updated the Governance Board on Health Center Activities, stating Graham Medical Group is opening a new prompt care office in Galesburg; Ms. Gabriel stated she has been in contact with Graham Medical Group, and they are working on a MOU similar to what we had with Cottage and what we have with OSF; they are working through that process and getting a cooperative agreement. Additionally, our contract with United Health Care was approved and will be in effect in August; we are also waiting on contract approval with Aetna.

(a) The first item on the agenda under the Executive Director's report, Michele Gabriel, CEO, updated the Governance Board on Governance Board Self Evaluation, Michele stated annually the Governance Board fills out an evaluation of the Board process and gives management staff feedback on how meetings go, or if the Board wants something different or something more from management staff. Ms. Gabriel noted the Governance Board Self Evaluation will be sent out over the next month, the Health Center will review it and try to improve on it each year. Ms. Gabriel asked the Board if they prefer the Governance Board Self Evaluation in a survey monkey or a form mailed to them with a return envelope to mail it back? President Lynch suggested doing the survey monkey and mailing the forms, due to some Board members not having access to survey monkey. Ms. Gabriel urged the Board to give honest feedback on the Governance Board Self Evaluation so management can improve what we are doing if it needs improvement or give the Board what they need as Governance Board members.

(b) The next item on the agenda, Patient Population Zip Code 2020, Michele Gabriel, CEO, moved from the Executive Director's report to (f) under New Business.

(c) The final item on the agenda under the Executive Director's report, Michele Gabriel, CEO, updated the Governance Board on the HRSA Virtual Operational Site Visit, Ms. Gabriel stated the document in your Board packet was what HRSA gave her to fill out during the Operational Site Visit Exit Conference; noting HRSA populated this information to the electronic handbooks for us to fill out and correct the sightings they have given the Health Department. Ms. Gabriel noted the Health Department is trying to correct most of the things during the grace period; there is a two week grace period where you can make corrections and they do not become contingencies against the grant. However, if they do move to that period, we still have 90 days to correct them. Ms. Gabriel thanked the Governance board members that participated in the virtual site visit; stating HRSA really enjoys talking to the Governance Board members. Ms. Gabriel stated overall the site visit went well, most of the sightings were correcting things that were set up wrong, adding things to agreements, or clarifying things. Which included adding some language to our MOA's we have with our partners; clarifying how we review contracts, how we get data, and how often do we get data. On Form 5A we had to change our scope of services; Screenings: added to Column II and Column III due to mammography being included in the service category screening and the Health Center not completing mammograms on sight and left in column I. Pharmaceuticals: deleted from Column III and left in Column I and Column II. Psychiatry: deleted from Column I as the Health Center no longer employs a psychiatric provider and as such no longer provides this service on site and left in Column II and added to Column III. Ms. Gabriel stated we have a Nurse Triage Agreement with OSF, they do our after-hours phone calls; HRSA needs the agreement to reflect that OSF does appropriate credentialing and privileging of their nurses. OSF has confirmed they do appropriate credentialing and privileging of their nurses; they signed the agreement and sent it back to us. Ms. Gabriel noted that we needed one more document, a primary source verification (transcripts from college) of Dr. Wagner's education for credentialing. There were a couple changes to credentialing and privileging; need to start doing peer reviews on Dental Hygienists, and clarification to credentialing and privileging policies. Need to review our sliding fee scale with some data, currently the Health Center is doing a patient survey. Ms. Gabriel stated we need to add two items to our MOA's (Memorandum of Agreement) 1. Include information on how the Health Center will monitor contract performance and 2. Clearly state our data reporting expectations and intervals for reporting. Had to clarify Conflict of

Interest policies to clarify our Governance Board members or immediate family members are not an employee of the Health Department or Community Health Center; if there is a conflict the Governance Board member must report the conflict in writing. Additionally, the Governance Board members must attest every year that they or their immediate family members are not an employee of the Health Department or Community Health Center, which is included in their annual Conflict of Interest Statement. Annually we have to approve Form 5A and Form 5B which is the Annual Review of Services, Location, and Hours of Operation; primarily to gauge accessibility and we are providing what the community needs. President Lynch thanked Michele and her team on behalf of the Governance Board for all their hard work for the site visit; with the review the Health Department received from HRSA President Lynch stated it shows everyone is doing their job and the Governance Board appreciates all your efforts and hard work.

CHIEF FINANCIAL OFFICER

(a) The first item on the agenda under the Chief Financial Officer's report, Michele Gabriel reviewed with the Governance Board the August 2022 Financial Statements, TSI Collections Report, Month End & eCW. Ms. Gabriel reported a current net revenue over expenditures of (\$144,811.93) for the period ending July 31, 2022, actual net revenue over expenditures year to date is \$96,163.03. Michele stated there were no grant revenues drawn down for the month of July. Michele reminded the board the Billing Reports are what was completed during the month, they do not go by date of service, they go by billing date; we billed charges totaling \$104,997.93, received payments of \$60,172.49, current month financial adjustments \$11,972.25, and our average completion lag for the month is six days. Michele noted there is a lump in the over 120 days which are patient balances which are primarily sliding fee balances, we are working on figuring out what to do with a patient refusal to pay policy. President Lynch asked on Claim Status Distribution, what claim status 277 rejected meant, Ms. Gabriel noted those items are handled by Revenue Cycle Management (eCW), however she would find out what 277 rejected means. A motion was made by Diane Munson to approve the August 2022 Knox Community Health Center Financial Reports as presented and seconded by Marty Andrews the motion for approval was unanimously adopted by a voice vote.

(b) The final item was an addition to the agenda under the Chief Financial Officer's report, Michele Gabriel updated the Governance Board on the FY23 Budget Development, Michele stated she and Jerome are still working on the Health Center FY23 budget, they will be meeting with the County Finance Committee later this month, so nothing new to provide on the FY23 budget at this time.

QUALITY MANAGEMENT

There were no items on the agenda under Quality Management.

RISK MANAGEMENT

The only item on the agenda under Risk Management, Reina Reyes, COO, presented to the Governance Board the Revised Credentialing and Privileging Policies and Procedures J-8, J-9, J-10, J-12, and J-17. Reina stated these policies and procedures were brought to the Board a few months ago for review; after the site visit the following changes needed to be made, **Policy J-8:** clarified the team that will review credentialing and privileging files. Added language for how competency will be determined for staff who KCHC maintains credentialed and privileged but are serving in non-clinical roles. **Policy J-9:** fixed some titles, clarified the team that will review credentialing and privileging files. **Policy J-10:** clarified the credentialing and privileging process and clarified the team that will review credentialing and privileging files. **Policy J-12:** clarified the documents that will be used for the renewal of privileges for other licensed or certified health care practitioners (OLCHP's) and other clinical staff (OCS), discussed the form that will be used to conduct peer review for Dental Hygienists moving forward. **Policy J-17:** corrected the number of files that will be reviewed each year. A motion was made by Sammi Durdle to approve the Revised Credentialing and Privileging Policies and Procedures J-8, J-9, J-10, J-12, and J-17 as presented and seconded by Angela Petersen, the motion for approval was unanimously adopted by a voice vote.

CHIEF OPERATIONS OFFICER

The only item on the agenda under Chief Operations Officer Report, Reina Reyes, COO, presented to Governance Board the Community Health Center Week Plan 2022, stating Community Health Center week was August 8-13, 2022, the Health Center has selected locations away from the Health Center due to COVID still being an issue in our area. The Health Center will be meeting with the following Community Partners: Monday August 8, 9:00am to 11:00am - Salvation Army; Tuesday August 9, 9:00am to 11:00am - Goodwill; Wednesday August 10, 9:30am to 11:30am – Galesburg Library, and 1:00pm to 2:00pm – St. Vincent De Paul Food Pantry; Thursday August 11, 10:30am to 12:00pm – Volunteer Network for Aging (VNA), 1:00pm to 2:00pm – First Lutheran Church Food Pantry, and 5:00pm to 6:00pm – Knox Prairie Community Kitchen; and Saturday August 13, 10:00am to 2:00pm – NAACP Picnic. Ms. Reyes stated at these events the Health Center hands out masks, testing kits, pulse ox, information about the Health Center services and try to provide information about getting insurance through the health network. Ms. Reyes felt the Health Center reached more people going out in the community than if we would have stayed in the Health Center. Ms. Reyes noted today was Stakeholder Appreciation Day and Recognized the Governance Board Members dedication and work to advance Health Center Vision, Mission, Values. Ms. Reyes will be handing out Certificates of Appreciation to those Governance Board members who are present and will mail out to Governance board members not present. Tomorrow is Health Center Appreciation Day we are celebrating inhouse with a sweet treat day for staff and they can wear their new Health Center Anniversary shirts. Additionally, the Health Center is having a Food Pantry Food Drive which will run from August 1 through August 12, our goal is to collect 300 items to be taken to Fish of Galesburg Food Pantry.

DIRECTOR OF OPERATIONS

There were no items on the agenda under Director of Operations.

OLD BUSINESS

There were no items on the agenda under Old Business.

NEW BUSINESS

(a) The first item under New Business, Michele Gabriel, CEO, presented to Governance Board the 2023 Governance Board Meeting Schedule, noting the meetings are the second Thursday of each month at 5:00pm. A motion to approve the 2023 Governance Board Meeting Schedule as presented was made by Marty Andrews and seconded by Sammi Durdle, the motion for approval was unanimously adopted by a voice vote.

(b) The next item under New Business, Michele Gabriel, CEO, presented to Governance Board the Updated Conflict of Interest Policy and Form, Ms. Gabriel noted Conflict of Interest Policy and Procedures Policy J-18 updated the following: II. Procedures, Conflict of Interest, Paragraph II, Sentence II: Board members are required to declare **in writing** any potential or actual direct conflict of interest for purposes of determination by the Board. Additionally, the following changes were made to the Knox Community Health Center, NFP Conflict of Interest Statement; paragraph two: If there is any question in your mind whether your interest in a transaction or relationship warrants disclosure, you should disclose **in writing** the interest. On page four the following paragraph was added under 4. Criminal Offenses: **I certify that I have read and agree a health center board member may not be an employee of the center or an immediate family member (i.e., spouses, children, parents, or siblings through blood, adoption, or marriage) of an employee of the center.** A motion to approve the Updated Conflict of Interest Policy and Form as presented was made by Marty Andrews and seconded by Diane Munson, the motion for approval was unanimously adopted by a voice vote.

(c) The next item under New Business, Michele Gabriel, CEO, presented the Governance Board with a request for approval of the Attestation that All Governance Board Members are in good standing and have no Conflict of Interest with being an employee of Knox County Health Department/KCHC or having a family member that is a Knox County Health Department employee. Ms. Gabriel noted Article III, Section 2 (d) of the Governance Board Bylaws state: A health center board member may not be an employee of the center or an immediate family member (i.e., spouses, children, parents, or siblings

through blood, adoption, or marriage) of an employee of the center. A motion to approve Attestation that All Governance Board Members are in Good Standings and have no Conflict of Interest with being an employee of Knox County Health Department/KCHC or having a family member that is a Knox County Health Department/KCHC employee as presented was made by Marty Andrews and seconded by Diane Munson, the motion for approval was unanimously adopted by a voice vote.

(d) The next item under New Business, Michele Gabriel, CEO, presented to Governance Board the Change in Scope Screenings, Ms. Gabriel noted the following changes: Screenings: added to Column II and Column III due to mammography being included in the service category screening and the Health Center not completing mammograms on sight and left Column I. A motion to approve the Change in Scope Screenings as presented was made by Sammi Durdle and seconded by Marty Andrews, the motion for approval was unanimously adopted by a voice vote.

(e) The next item under New Business, Michele Gabriel, CEO, presented to Governance Board the Change in Scope Pharmaceutical, Ms. Gabriel noted the following changes: Pharmaceuticals: deleted from Column III and left in Column I and Column II. A motion to approve the Change in Scope Pharmaceutical as presented was made by Marty Andrews and seconded by Sammi Durdle, the motion for approval was unanimously adopted by a voice vote.

(f) The next item was moved on agenda from (b) Executive Director's Report to (f) under New Business, Michele Gabriel, CEO, presented to Governance Board the Service Area Review of Zip Codes, stating the Health Center identifies and annually reviews its service area based on where current or proposed patient populations reside as documented by the Zip Codes reported on the Health Center's Form 5B; Service Sites meets HRSA's requirement, as they comprise over 75% of the Zip Codes where patients within the service area reside. Ms. Gabriel noted 79% of our patients come from Galesburg (2,213 patients) and Abingdon (196 patients). Ms. Gabriel recommends we monitor where patients are coming from due to outreach, and perhaps doing more outreach in rural areas outside City of Galesburg; have outreach report on this quarterly. A motion to approve the Service Area Review of Zip Codes as presented was made by Sammi Durdle and seconded by Angela Petersen, the motion for approval was unanimously adopted by a voice vote.

(g) The next item was an addition to the agenda under New Business, Michele Gabriel, CEO, discussed with Governance Board the CHC Sliding Fee Schedule Program, Michele stated the Community Health Center staff sent a link out to Community Health Center patients who have been seen in the Community Health Center over the past year (July 1, 2021 through June 30, 2022). The survey consisted of three questions: (1.) What services do you use at the Knox Community Health Center? Answers: Medical 45.41%, Dental 60.09%, and Behavioral Health 18.35%; 218 patients answered out of approximately 500 patient surveys sent out, some patients answered the questions when they came in for their appointment. (2.) Do you use our Sliding Fee Scale Program? Answers: Yes 23.96% and No 76.04%. (3.) If you use the Sliding Fee program, do you feel the fees are affordable? Answers: Yes 67.92% and No 32.08%. Michele stated she was looking for direction from the Board for what action you want the Health Center to take, (1.) Do we need to look at the flat fees to see if they need to be adjusted? (2.) Do we look at the fee schedules we have, and do we need a separate one for Behavioral Health? Ms. Gabriel noted she spoke with HRSA and asked if we could adjust the schedule due to cost of living; this program is based on federal poverty level guidelines and the federal minimum wage is \$7.25, however, the minimum wage in Illinois is \$12 and will go up to \$13 January 1, 2023; the cost of living in Illinois has gone up also. Michele stated the Health Center is unable to use federal funds for anyone who is over 200% federal poverty level. Michele noted our options are to adjust the flat fees, look at the types of schedules we have to see if we need to add Behavioral Health. President Lynch asked Michele to look into the accounts we are writing off; to see if they are sliding fee scale accounts and the fees are too high so the patients are unable to pay? A motion to give Ms. Gabriel direction to look into the CHC Sliding Fee Scale, to produce more data and possibly make a separate Behavioral Health Schedule was made by Marty Andrews and seconded by Tara Hillier, the motion for approval was unanimously adopted by a voice vote.

(h) The final item was an addition to the agenda under New Business, Michele Gabriel, CEO, presented to Governance the Review of Services, Location, and Hours of Operation.

Ms. Gabriel noted the details of the Review of Services, Location, and Hours of Operation below:

Form 5A: Service Details

Column I. Direct (Health Center Pays)

Column II. Formal Written Contract/Agreement (Health Center Pays)

Column III. Formal Written Referral Arrangement (Health Center DOES NOT pay).

Form 5B: Site Details

Site Id: BPS-H80-011723

Knox Community Health Center, 1361 W. Fremont St., Galesburg, IL 61401 - Site Phone (309)344-2225

FQHC Site National Provider Identification (NPI) Number: 1649526773

Total Hours of Operation (when patients will be served per week): 45

Saved Months of Operation: January, February, March, April, May, June, July, August, September, October, November, December

Service Area Zip Code(s): 61430, 61474, 61448, 61410, 61489, 61401, 61458, 61414, 61472, 61439, 61467, 61449, 61488, 61572, 61485

Site Id: BPS-H80-032614

Temporary Site – W. Carl Sandburg – 1090 W. Carl Sandburg Dr., Galesburg, IL 61401

Site Phone (309-344-2224 Ext. 7000

Total Hours of Operation (when patients will be served per week): 40

Saved Months of Operation: May, June, July, August

Service Area Zip Code(s): 61401

A motion to approve the Review of Services, Location, and Hours of Operation as presented was made by Marty Andrews and seconded by Diane Munson, the motion for approval was unanimously adopted by a voice vote.

MEDICAL DIRECTOR

There were no items on the agenda under the Medical Director's Report.

DENTAL DIRECTOR

There were no items on the agenda under the Dental Director's Report.

BEHAVIORL HEALTH DIRECTOR

There were no items on the agenda under the Behavioral Health Director's Report.

EXECUTIVE SESSION

There were no items on the agenda under Executive Session.

RETURN TO OPEN SESSION

There were no items on the agenda under Open Session.

ADJOURNMENT

A motion was made by Marty Andrews to adjourn the August 11, 2022, Governance Board meeting at 6:28pm; the motion was seconded by Sammi Durdle. the motion for approval was unanimously adopted by a voice vote.

Michele Gabriel, MPH, Administrator/CEO

Sammi Durdle, Secretary