

# GOVERNANCE BOARD MINUTES OF MONTHLY MEETING

October 13, 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 October 13, 2022. President Karen Lynch called the meeting to order at 5:02pm. Governance Board members present in-person were Karen Lynch, Marty Andrews, Diane Munson, and Gayle Keiser. Governance Board members present via teleconference were Sammi Durdle, Harlan Cook, Bill Butts, Amber Miles, Christina King, Tara Hillier, and Angela Petersen. Also attending in-person were Michele Gabriel, CEO; Reina Reyes, COO; Staci Simpson, Director of Operations; Bill Barnes, Behavioral Health Director, Dr. Andrea Miller-Finch, Dental Director, Dr. Robert Wagner, Chief Medical Officer; and Tina Jockisch, Administrative Clerk. President Karen Lynch declared a quorum.

## **ADDITIONS TO THE AGENDA**

Ms. Gabriel, CEO for the Knox Community Health Center reported there was one addition to the agenda under the Executive Director's Report for informational purposes the CHC Final Site Visit Report. Additionally, there were two additions to the agenda under New Business (b) Recredential Heather Frakes, and (c) Reprivilege Heather Frakes.

## **APPROVAL OF MINUTES**

A motion to approve the minutes of the September 8, 2022, meeting as circulated was made by Angela Petersen and seconded by Marty Andrews. The motion for approval was unanimously adopted by a voice vote.

## **PRESIDENT'S COMMENTS**

The only item on the agenda under President's Comments, President Lynch advised Board members that each year in the fall, the Board appoints members to a Nominating Committee to provide a slate of candidates for Governance Board Officers to be voted on at the November meeting; elected officers will assume positions at the January 2023 meeting. Marty Andrews and Sammi Durdle volunteered to be on the Nominating Committee.

## **STANDARD MONTHLY OPERATIONAL REPORTS**

The only item on agenda under Standard Monthly Operational Reports, Michele Gabriel, CEO, presented the September 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. Michele Gabriel, CEO stated these were the standard monthly reports that are not reviewed individually; however, they are always available to answer questions. Reina Reyes, COO, mentioned she has been working under the Quality Committee through PDSA (Plan Do Study Act) process to decrease the no show rate and improve the utilization, it is fluctuating however, we continue to work on it and there has been an increase in patients. A motion to approve the September 2022 Standard Monthly Operational Report as presented was made by Diane Munson and seconded by Sammi Durdle, the motion for approval was unanimously adopted by a voice vote.

## **EXECUTIVE DIRECTOR'S**

Michele Gabriel, CEO, noted she received an email this week that had a newsletter with links to some videos about the review of sliding fee schedules from the National Association of Community Health Centers. Michele stated she has not watched the videos; however, she was going to have Reina, Staci, and Dr. Wagner review them also to see how long the videos are. If they feel they are too long, we will send them out to the Board to watch on their own or come in and watch them as a group.

The first item was an addition to the agenda under the Executive Director's report, Michele Gabriel, CEO, updated the Governance Board regarding the Final Site Visit Report for the Community Health Center Virtual Operational Site Visit which occurred in July 2022. Michele stated the Health Department was able to resolve all concerns from the Site Visit prior to them becoming a condition on the grant, and the Community Health Center was found to be in full compliance with all requirements of the federal grant.

The next item on the agenda under the Executive Director's report, Michele Gabriel, CEO, Michele discussed with the Governance Board to Determine Strategic Planning Dates, Michele stated her recommendation is to keep the vast majority of the strategic plan, review the keys areas, keep what we are still working on, and amend or change some of the things that have changed due to the environment. Michele stated Tina will send out some dates for November or December for some times to meet; noting it would be helpful if everyone could come in person to the meeting.

The next item on the agenda under the Executive Director's report, Michele Gabriel, CEO, updated the Governance Board on County Wage Study. Michele reminded the Board they have a co-applicant agreement with the Board of Health who are responsible for personnel and finances for the Health Department and Governance Board is responsible for operations and services of the Health Center. Michele stated she provides the Governance Board with information about salaries; however, it is the Board of Health that will take action when the time comes. Michele reminded the Board the Health Department implemented a plan in FY2020 to lift our current salary schedule to get to the point we were compliant with the \$15.00/hour by 2025. The Health Department used that salary schedule in FY2020, FY2021, and FY2022; then they began their wage study with the County who hired a consultant to look at all the job descriptions, knowing we are a FQHC and what kind of programs we have; they are comparing us to other market data for public entities. Michele stated the consultants gave their recommendations, and the Health Department created a salary schedule, they are making recommendations and will include how to move the schedule every year to stay current with the market.

The final item on the agenda under the Executive Director's report, Michele Gabriel, CEO, trained the Governance Board on Building a Budget. Michele stated she and Jerome, the Director of Finance, work on the budget together; they always budget fully staffed, since we are County in order to hire them, they must be in the budget. Michele noted they project revenues as if fully staffed; good news is if you do not hire the providers those expenses do not occur, so they balance out. Michele stated she makes a table to project visits using the UDS information with average number of visits/FTE (Fulltime Equivalent) per provider by provider type and average individual patients per provider by provider type. Michele stated she projects expected provider visits per provider and projects expected visits for payor sources: Medicaid, Medicare, SFS, Self-Pay and Insured. Michele stated charges per visit for Medicaid are Medical \$157.13, Dental \$125.69 and Behavioral Health \$71.58; charges per visit for Medicare \$180.00, Dental \$175.00, and Behavioral Health \$275.00; charges for Sliding Fee Scale visits Medical A \$10.00, B \$20.00, C \$35.00, D \$45.00, or Full Fee; charges for Sliding Fee Scale visits Behavioral Health A \$10.00, B \$20.00, C \$35.00, D \$45.00, or Full Fee. In closing, Michele stated she takes Total Visits & Revenue Projections by Service Category and gives the numbers to Jerome to input in the budget, *Example: Visits – Medical 3697, Behavioral Health 5246, and Dental 6628, totaling 15,571 visits; Revenue Medical \$456,398.78, Behavioral Health \$492,323.68, and Dental \$759,712.31, totaling \$1,708,434.77.*

### **CHIEF FINANCIAL OFFICER**

The first item on the agenda under the Chief Financial Officer's report, Michele Gabriel, CEO, reviewed with the Governance Board the October 2022 Financial Statements, TSI Collections Report, Month End & eCW. Ms. Gabriel reported a current net revenue over expenditures of (\$61,205.18) for the period ending September 30, 2022, actual net revenue over expenditures year to date is \$157,166.49. Michele stated there was grant revenue of \$103,560.75 drawn down and program revenue of \$68,099.53 for the month of September. Michele noted we billed charges totaling \$73,461.71, received payments of \$72,198.06, current month financial adjustments \$10,041.75, current month refunds \$27.20, and our average completion lag for the month is nine days. Michele stated on AR distribution she signed a

procedure that our finance staff have been working with our revenue cycle management staff to write off COVID balances; noting we started billing for COVID testing process. A motion was made by Sammi Durdle to approve the October 2022 Knox Community Health Center Financial Reports as presented and seconded by Bill Butts. The motion for approval was unanimously adopted by a voice vote.

The final item on the agenda under the Chief Financial Officer's report, Michele Gabriel, CEO, reviewed with the Governance Board the 3<sup>rd</sup> Quarter CHC Business Plan Reports, Michele stated the Board approves the Community Health Center's Business Plan every three year and reports are completed quarterly; to monitor the financial activity in the Knox Community Health Center. Michele stated it monitors actual visits compared to budgeted visits and HRSA targeted visits, cost per patient and cost per visit. Michele noted the financial statements are broke down by Medical, Dental, and Behavioral Health to show how each division is doing and what their cost are. Michele closed noting the 340b program report is how the Community Health Center monitors how much they are paying out for pharmaceuticals to Cardinal Health and what revenue comes in from Walgreens for the 340b program, current revenue was \$22,684.12, expenses were \$7,099.94 for a profit of \$15,584.18; HRSA's intent is for the Health Department to invest the money back into the 340b program.

### **QUALITY MANAGEMENT**

The only item on the agenda under Quality Management, Reina Reyes. COO, presented to Governance Board the 3<sup>rd</sup> Quarter Performance Measures Report, Reina stated a few months ago the Health Center changed how they were measuring; went from pulling out individuals seen in a given month/quarter to pulling out all the individuals we have seen since the beginning of the year to the end of the quarter they are measuring. This gives a clearer picture of how the Health Center is doing when they get ready to turn in the UDS measures at the end of the year. Reina stated in the past there have been questions surrounding the depression remission at 12 months; she took a training today, more than 60% of the agencies on that training call feel they are not measuring the depression remission correctly. Reina noted we are similar to other Health Centers in having a 0% for depression remission measures; they are going to continue to monitor that. President Lynch asked about Childhood Immunization Status, Reina stated they have been discussing this in the Quality meeting, however individuals that we are supposed to be measuring are the children 2 years of age and we do not see many 2 year old in the health center. Reina noted internally we need to continue to do work in pulling records for cervical cancer screenings and making sure we do follow up on labs for referrals; it would be for cervical cancer, breast cancer, and colorectal cancer screenings, noting those numbers we have capacity to make improvements. A motion to approve the 3<sup>rd</sup> Quarter Performance Measures Report as presented was made by Gayle Keiser and seconded by Marty Andrews. The motion for approval was unanimously adopted by a voice vote.

### **RISK MANAGEMENT**

The only item on the agenda under Risk Management, Reina Reyes. COO, presented to Governance Board the 3<sup>rd</sup> Quarter 2022 Risk Management Report, this report consists of Quarterly Sample Medication Audit, Lab Audit, Environmental Safety Walk Through, HIPAA Security Risk Audit, Verify/Comply Office of Inspector General (OIG) – all staff and board members are checked through Verify/Comply database with no reportable findings. Reina noted the HIPAA Security Risk Audit report did not run correctly and the results will be reported under Risk Management in the next Board Meeting in November. Reina stated they are looking into the Quarterly Sample Medication Audit; the discrepancy appears to be a charting error; President Lynch asked for a report next meeting about this discrepancy. Reina stated the second part of the Risk Management Report is the 3<sup>rd</sup> Quarter Risk Management Dashboard, this is a summary of High-Risk Quarterly Risk Assessments (Quarterly Environmental Safety Walk Through, Quarterly Lab and Equipment Audit, and Quarterly Sample Medication Audit), Adverse Event/Incident Reports (Adverse Event 1: [teen in the Dental chair had an injection and had an adverse reaction, we initiated our internal emergency response, called 911 and the teen was taken to hospital, we received a report the teen was doing fine], Near Miss 0, Unsafe Conditions 0, Serious Reportable Events, and Peer Review Audits are out but have not been returned, they will be adjusted in the 4<sup>th</sup> quarter

report), Training and Education: [Reina stated we had some challenges within training and education since back in January we lost our educational platform that was provided to us by the County so, we have been playing catch up on trying to get our trainings done for of the year, we target to have two educational sessions per quarter, we had one Cultural Competency for the entire staff; we target to have two special subject trainings and we had one the Nurses were trained in vaccinations which was a great training by Health Department Nurse], Risk and Patient Safety Activities (Patient Satisfaction Top Score: [noting in the Site Visit they discussed doing patient satisfaction and the possibility of doing a survey or a focus group so we need to make a decision before end of year to decide which one they are doing for patient satisfaction], Grievances-Open 0, Grievances-Resolved 0, HIPAA Breaches 0 [noting a patients information was sent out to a person they were not related to; Reina is checking to see if this was a reportable HIPAA Breach], Credentialing and Privileging File Review 2), and Claims Management (Claims Submitted to HHS 0, Claims Settled or Closed 0, Claims Open 0, Lawsuits Filed 0, Lawsuits Settled 0, and Lawsuits Litigated 0). A motion to approve the 3<sup>rd</sup> Quarter 2022 Risk Management Report as presented was made by Marty Andrews and seconded by Bill Butts. The motion for approval was unanimously adopted by a voice vote.

### **CHIEF OPERATIONS OFFICER**

There were no items on the agenda under the Chief Operations Officer Report.

### **DIRECTOR OF OPERATIONS**

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

### **OLD BUSINESS**

The only item on the agenda under Old Business, Michele Gabriel, CEO, presented to Governance Board for approval the Revised FY23 CHC Budget, Michele stated the purposes of this budget revision is to increase salary line items to accommodate any change implemented to the salary schedule. Michele stated they made projections based on their recommendations for the change and increase the budget. Michele noted the budget goes to the County Board for approval, posted in October for 30 days, and then formally voted on by the County Board at their November meeting. Michele asks the Board to keep in mind salaries also include fringe amounts (taxes, insurance benefits for staff); noting fringe rate is about 28%. A motion to approve the Revised FY23 Knox Community Health Center Budget as presented was made by Gayle Keiser and seconded by Angela Petersen. The motion for approval was unanimously adopted by a voice vote.

### **NEW BUSINESS**

The first item under New Business, President Lynch, presented to Governance Board for approval the 2023 Holiday Schedule. A motion to approve the 2023 Holiday Schedule as presented was made by Marty Andrews and seconded by Diane Munson, the motion for approval was unanimously adopted by a voice vote.

The next item was an addition to the agenda under New Business, President Lynch presented to the Governance Board a memo to Re-Credential Heather Frakes. A motion to approve the memo request to Re-Credential Heather Frakes as presented was made by Diane Munson and seconded by Marty Andrews, the motion for approval was unanimously adopted by a voice vote.

The final item was an addition to the agenda under New Business, President Lynch presented the Governance Board a memo to Re-Privilege Heather Frakes. A motion to approve the memo request to Re-Privilege Heather Frakes as presented was made by Bill Butts and seconded by Marty Andrews, 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 Return to Open Session.

**ADJOURNMENT**

A motion was made by Marty Andrews to adjourn the October 13, 2022, Governance Board meeting at 6:10pm; the motion was seconded by Angela Petersen, the motion for approval was unanimously adopted by a voice vote.

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**Michele Gabriel, MPH, Administrator/CEO**

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**Sammi Durdle, Secretary**

Respectfully Submitted By: Tina Jockisch  
Clerical (L): \2022 GB Minutes\10 – October 13, 2022 GB Minutes