Falls Community Health Governing Board Minutes Thursday, February 20, 2025, at 12:00 pm

Present: Amanda Willard, Moses Pessima, Carlos Castillo, Angela Landeen, Dr. Bill Schultz, Kari Benz, Murat Sincan, Madeline Shields,

Absent: Lee Jensen, Gwen Fletcher,

Staff Present: Joe Kippley, Amy Richardson, Dr. Jen Tinguely, Vanessa Sweeney, Katie Wick, Lisa Stensland

Guest: Dr. Brad Kamstra

Call to Order: Angela Landeen called the meeting to order at 12:07 pm. Roll call: _Y_ Murat, _P_ Angela, _P_ Madeline, A_ Lee, _P_Moses, _P_ Kari, _A Gwen, _P Amanda, _ P_ Bill S, _P_ Carlos

A motion was made to approve the minutes for Falls Community Health Governing Board dated January 16, 2025, supported by Moses seconded by Angela, motion carries.

FINANCIALS:

The Falls Community Health reports attached are through the month ending December 31, 2024. We are 100% through the fiscal year. The last financial statements presented were through the month of November 2024.

Operating Revenues:

- Net Patient Revenue consists of all patient charges and adjustments. Total Net Patient Revenue for December came in at \$289,688, YTD actuals is 119% compared to the annual budget.
- Total Grant Revenue of \$148,067.78 includes grant drawdowns from Community Health Center, Colon, Ryan White Part C and HIV Prevention.
- > Total Other Revenue for December is \$6,613 which consists mostly of Medicaid Managed Care.

Total Operating Revenue YTD December is \$7,787,137, which is 106% YTD actual to annual budget.

Operating Expenses: Operating expenses are classified within 7 categories. Total expenses were \$1,341,810 for the month of December.

- Personnel expenses are 84% of the budget and December had 2 pay periods. 2024 is \$1,502,644 favorable to YTD budget.
- Professional Services are 107% of the YTD budget. This category includes payments to Center for Family Medicine, locum providers, Minnehaha County quarterly shared facility costs, interpreter services, transportation for patients, clinic security, and dental claims processing.
- Rentals are 69% of the YTD budget. Technology charges occur in March of every year.
- Repair and Maintenance is 48% of the YTD budget.
- > Supplies and Materials are 129% of YTD budget. Category includes general medical and dental supplies, immunization & pharmaceuticals as well as the monthly maintenance of the electronic medical and dental software systems.
- > Training is 76% of the YTD budget. Most expenses are continuing education expenses and licensure renewals.
- Utilities are at 92% YTD budget. Most of this expense occurs quarterly and the last payment occurred in December 2024.

Total Operating Expenses YTD December are \$11,910,495 which is 89% YTD actuals to annual budget.

Non-operating Revenue (Expense):

> Other Revenue (Expense) is 100% of the budget and includes payments from USD dental lease payments, recoveries from AAA collections, and interest.

Net Income (Loss):

December actual amounts show a net loss of (\$800,216) and YTD net loss of (\$3,818,412).

A motion was made to accept the financial report as presented, supported by Madeline, seconded by Bill, motion carries.

Productivity:

The providers had 1326 visits in January, which puts them at 78% to the goal for the year. The nurses had 6 visits and are at 57% of the goal. Total medical visits are 78% of the year-to-date goal.

The dentists had 502 visits in January and are 56% to the goal. Hygiene had 73 visits leaving them at 49% to goal. The dietitian had 22 visits and 100% to goal. Mental Health had 150 visits and 49% to the goal. CD Counselor had 4 visits and 11% to goal. Case Management is at 127 visits and 109% to goal. Year-end totals are 68% to goal.

Poverty Guidelines:

The 2025 guidelines were reviewed from the Health and Human Services. Once approved they will be updated in the clinic's software.

A motion was made to accept the 2025 Poverty Guidelines as presented, supported by Madeline, seconded by Bill, the motion carries.

QUALITY:

Patient Satisfaction Survey:

The 2024 patient satisfaction survey results look very good overall on the medical side. We did identify a few areas that need to be worked on. Including asking about issues with any medications that are taken, and if there are any financial barriers in getting medication, also if there are issues that make it hard to take care of your health/ meet healthier goals. These are questions that need to be worked on. Also making sure that patients are aware of our sliding fee scale and online medical records and televisits.

The dental survey was also very good with a few areas to work on as well. Areas for improvement include ease of getting an appointment, length of wait in the exam room, parking, and answering questions.

85% of the surveys gave a 5-star status.

POLICY:

The procedure for reporting of adverse and near-miss events was reviewed A motion was made to accept the Policy/Procedure for Reporting of Adverse and Near-miss events as presented, supported by Bill, seconded by Angela, motion carries.

ACCESS: deferred

CREDENTIALLING and PRIVILEGING:

Cheri Kovalenko, CNP – no concerns with Avera credentialing and no changes to privileging A motion to accept re-credentialing of Cheri Kovalenko, CNP, supported by Amanda, seconded by Carlos, motion carries.

BOARD SELF-ASSESSMENT:

Kari shared the results of the board self-assessment.

Public Health Director Update:

City Updates

- EMS Consultant Report & Council Informational Meeting
- Community Health Assessment press conference on February 12

Clinic Updates

- UDS Submission
- Celebrating Quality Metrics in January
- Artificial Intelligence tool for primary care providers

Federal funding under new administration

Strategic planning session - scheduling for our March 2025 Board meeting

PUBLIC INPUT:

None at this time

Motion to adjourn supported by Carlos, seconded by Murat, motion carries. 1:00 pm

Kari Benz – Chair March 20, 2025 Upcoming meeting: April 17, 2025

Ken Hendons