



# COASTAL HEALTH & WELLNESS

## GOVERNING BOARD

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

### AGENDA

Thursday, November 14, 2019 – 12:00 PM

**CONSENT AGENDA:** ALL ITEMS MARKED WITH A SINGLE ASTERICK (\*) ARE PART OF THE CONSENT AGENDA AND REQUIRE NO DELIBERATION BY THE GOVERNING BOARD. ANY BOARD MEMBER MAY REMOVE AN ITEM FROM THIS AGENDA TO BE CONSIDERED SEPARATELY.

### *PROCEED TO BOTTOM OF THIS DOCUMENT FOR APPEARANCE & EXECUTIVE SESSION GUIDELINES*

In accordance with the provisions of the Americans with Disabilities Act (ADA), persons in need of a special accommodation in order to participate in this proceeding should, within two (2) days prior to the proceeding, request necessary accommodations by contacting CHW’s Executive Assistant at 409-949-3406, or via email at [trollins@gchd.org](mailto:trollins@gchd.org).

ANY MEMBERS NEEDING TO BE REACHED DURING THE MEETING MAY BE CONTACTED AT 409-938-2288  
**REGULARLY SCHEDULED MEETING**

### Meeting Called to Order

- \*Item #1 ..... Agenda
- \*Item #2**ACTION**..... Excused Absence(s)
- \*Item #3**ACTION**..... Consider for Approval Minutes from October 31, 2019 Governing Board Meeting
- \*Item #4**ACTION**..... Informational Report
  - a) Letter of Support to Legacy Community Health Services
- \* Item #5..... Informational Items Policies Approved by the United Board of Health as Authorized Under the Shared Services Agreement:
  - a) Employee Leave Policy
- Item #6 ..... Executive Report
- Item #7**ACTION**..... Annual Policy/Plan Review
  - a) Coastal Health & Wellness Credit Card and Refund Policy
  - b) Coastal Health & Wellness Charge Capture Policy
  - c) Coastal Health & Wellness Payment Posting Policy
- Item #8**ACTION**..... Discussion Regarding Proposed Changes to Coastal Health & Wellness Governing Board Bylaws
- Item #9**ACTION**..... Consider for Approval Consumer Representative Aaron Akins to serve as a Member of the Quality Assurance Board Committee
- Item #10**ACTION**..... Consider for Approval Privileging Rights for the following UTMB Resident:
  - a) Nadine Abraham, MD
- Item #11..... Update on Progress Related to Patient Centered Medical Home Designation

### Adjournment

*Tentative Next Meeting: December 12, 2019*

### **Appearances before the Coastal Health & Wellness Governing Board**

The Coastal Health & Wellness Governing Board meetings are conducted under the provisions of the Texas Open Meetings Act, and members of the public that wish to address the Board about an item presented on the agenda shall be offered three minutes to do so. The Board cordially requests that individuals desiring to make a such a statement notify the Board of their intention by writing their name on the sign-in sheet located at the Boardroom's main entrance.

A citizen desiring to make comment to the Board regarding an item not listed on the agenda shall submit a written request to the Executive Director by noon on the Thursday immediately preceding the Thursday of the Board meeting. A statement of the nature of the matter to be considered shall accompany the request. The Executive Director shall include the requested appearance on the agenda, and the person shall be heard if he or she appears.

### **Executive Sessions**

When listed, an Executive Session may be held by the Governing Board in accordance with the Texas Open Meetings Act. An Executive Session is authorized under the Open Meetings Act pursuant to one or more the following exceptions: Tex. Gov't Code §§ 551.071 (consultation with attorney), 551.072 (deliberation regarding real property), 551.073 (deliberation regarding a prospective gift or donation), 551.074 (personnel matters), 551.0745 (personnel matters affecting Coastal Health & Wellness advisory body), 551.076 (deliberation regarding security devices or security audits), and/or 551.087 (deliberations regarding economic development negotiations). The Presiding Officer of the Governing Board shall announce the basis for the Executive Session prior to recessing into Executive Session. The Governing Board may only enter into Executive Session if such action is specifically noted on the posted agenda.

**Governing Board  
November 2019  
Item #2  
Excused Absence(s)**

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# **COASTAL HEALTH & WELLNESS**

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**GOVERNING BOARD**

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

**Governing Board**

**November 2019**

**Item #3**

**Consider for Approval Minutes from October 31, 2019 Governing Board Meeting**

**Coastal Health & Wellness  
Governing Board  
October 31, 2019**

**Board Members**

**Present:**

Samantha Robinson  
Milton Howard, DDS  
Jay Holland  
Virginia Valentino  
Aaron Akins  
Elizabeth Williams  
Dorothy Goodman

**Staff:**

Kathy Barroso, Executive Director  
Hanna Lindskog, DDS  
Cheryl Golla  
Mary Orange  
Kristina Garcia  
Tiffany Carlson  
Dina Driskill  
Debra Howey

Cynthia Ripsin, MD  
Eileen Dawley  
Andrea Cortinas  
Richard Mosquera  
Pisa Ring  
Amanda Wolff  
Kenna Pruitt  
Tikeshia Thompson Rollins

**Excused Absence:** Victoria Dougharty, Miroslava Bustamante, and Barbara Thompson, MD

**Guest:** Flecia Charles

**Items 1-6 Consent Agenda**

A motion was made by Dr. Howard to approve the consent agenda items one through six. Elizabeth Williams seconded the motion and the Board unanimously approved the consent agenda.

**Item #7 Executive Reports**

Kathy Barroso, Executive Director, presented the October 2019 Executive Report to the Board.

**Item #8 Consider for Approval Preliminary September 2019 Financial Report**

Mary Orange, Business Office Manager, presented the preliminary September 2019 financial report to the Board. A motion to accept the financial report as presented was made by Jay Holland. Elizabeth Williams seconded the motion and the Board unanimously approved.

**Item #9 Consider for Approval Quarterly Visit and Analysis Report Including Breakdown of New Patients by Payor Source**

Mary Orange, Business Office Manager, presented the quarterly visit and analysis report including the breakdown of new patients by payor source to the Board. A motion to accept the quarterly visit and analysis report as presented was made by Virginia Valentino and seconded by Dr. Howard. The Board unanimously approved the motion.

**Item #10 Consider for Approval Quarterly Access to Care Report**

Kathy Barroso, Executive Director, asked the Board to consider for approval the quarterly access to care report. Utilization rates continue to be high. No-show rates were somewhat improved in some areas this quarter but were still higher than the goal. A motion to accept the report as presented was made by Jay Holland and seconded by Virginia Valentino. The Board unanimously approved the motion.

**Item #11 Consider for Approval Quarterly Patient Satisfaction Survey Report**

Kathy Barroso, Executive Director, asked the Board to consider for approval the patient satisfaction survey report. Dr. Howard, Vice Chair, suggested that employees who exceed expectations be recognized not only as individually but also within the group. Kathy informed the Board that Cheryl Golla, Human Resources Director, is currently looking at the employee recognition program, but that some employees that received favorable survey comments in the past had been recognized at the monthly in-service meeting during that survey period. A motion to accept the report as presented was made by Virginia Valentino and seconded by Aaron Akins. The Board unanimously approved the motion.

**Item #12 Consider for Approval Risk Management Plan**

Richard Mosquera, Chief Compliance Officer, asked the Board to consider for approval the risk management plan. A motion to accept the plan as presented was made by Jay Holland and seconded by Elizabeth Williams. The Board unanimously approved the motion.

**Item #13 Consider for Approval Quarterly Compliance and Risk Management Report**

Richard Mosquera, Chief Compliance Officer, asked the Board to consider for approval the quarterly compliance and risk management report. Samantha Robinson, Board Chair, suggested that the incident in the Galveston Clinic where things went off temperature also be documented under emergency management. A motion to accept the quarterly compliance and risk management report as presented was made by Virginia Valentino and seconded by Elizabeth Williams. The Board unanimously approved the motion.

**Item #14 Consider for Approval Coastal Health & Wellness Budget Period Progress Report (BPR) Non-Competing Continuation (NCC) for Submittal to HRSA**

Mary Orange, Business Office Manager, asked the Board to consider for approval the Coastal Health & Wellness Budget Period Progress Report (BPR) Non-Completing Continuation (NCC) for Submittal to HRSA. The entire progress report was reviewed with the Board, including the proposed budget for the 2020/2021 grant term. In reviewing Form 3 (Income Analysis), Mary informed the Board that pharmacy revenue will be moved from other revenue to program income, but this change will not affect the total budget. Performance measures were also reviewed, and updates related to goals were discussed. Jay Holland requested once the recommended changes are made to the application that the Board receive a final copy. A motion to accept the report with recommended changes was made by Jay Holland and seconded by Virginia Valentino. The Board unanimously approved the motion.

**Item #15 Consider for Approval Patient No Show Policy (New Policy)**

Kathy Barroso, Executive Director, asked the Board to consider for approval a new policy addressing patient no shows. Kathy informed the Board that the new no show policy will be shared with patients now but will go into effect January 1, 2020. This will allow patients time to become familiar with the new policy. Dr. Lindskog suggested changing language in the policy to reflect recent changes in how patients confirm appointments to (y) yes to confirm (n) no to cancel. A motion to accept the new patient no show policy with recommended changes were made by Virginia Valentino and seconded by Jay Holland. The Board unanimously approved the motion.

**Item #16 Consider for Approval Re-Privileging Rights for Emily Bailey, MSW, LCSW**

Dr. Ripsin, Medical Director, asked the Board to consider for approval privileging rights for Emily Bailey, MSW, LCSW. A motion to accept privileging rights for Emily Bailey, MSW, LCSW was made by Aaron Akins and seconded by Jay Holland. The Board unanimously approved the motion.

**Item #17 Consider for Approval Privileging Rights for the following UTMB Residents:**

Dr. Ripsin, Medical Director, asked the Board to consider for approval privileging rights for the following UTMB resident:

- Zuleica Santiago Delgado, MD

A motion to accept privileging rights for the UTMB resident was made by Aaron Akins and seconded by Elizabeth Williams. The board unanimously approved the motion.

**Item #18 Consider for Approval the Appointment of Flecia Charles to Complete The Unexpired Term of the Vacant Consumer Representative on the Coastal Health & Wellness Governing Board with a Term Expiring June 2020**

Samantha Robinson, Board Chair, asked the Board to consider for approval the appointment of Flecia Charles, to complete the unexpired term of the vacant consumer representative to the Coastal Health & Wellness Governing Board with a term expiring June 2020. A motion to accept the appointment of Flecia Charles to the Board was made by Jay Holland and seconded by Virginia Valentino. The Board unanimously approved the motion.

**Item #19 Update on Next Steps Regarding Refresh of the Galveston Clinic**

Richard Mosquera, Chief Compliance Officer, updated the Board regarding the planned refresh of the Galveston Clinic. As additional information becomes available, it will be shared with the Board so that next steps can be determined.

**Board Member Comments:**

**Evaluation of Executive Director**

Samantha Robinson, Board Chair, stated that she had attended the UBOH meeting the day before and that the UBOH was drafting a new CEO evaluation form. Samantha requested that the Governing Board form a subcommittee to review the CHW Executive Director annual evaluation form for use in the upcoming evaluation next year.

**Executive Director Evaluation Subcommittee Members**

- Samantha Robinson
- Elizabeth Williams
- Virginia Valentino

Adjournment

A motion to adjourn was made by Virginia Valentino and seconded by Jay Holland. The Board adjourned at 1:48 p.m.

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Chair

\_\_\_\_\_

Secretary/Treasurer

\_\_\_\_\_

Date

\_\_\_\_\_

Date

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**Governing Board  
November 2019  
Item #4  
Informational Report**

- a) Letter of Support to Legacy Community Health Services





October 29, 2019

Katy Caldwell  
Chief Executive Officer  
Legacy Community Health Services, Inc.  
1415 California  
Houston, TX 77006

Dear Ms. Caldwell,

Coastal Health & Wellness is pleased to write this letter of support for Legacy Community Health Services, Inc. (Legacy) in the HRSA-20-019 Service Area Competition application to the Health Resources and Services Administration. Through this funding opportunity, Legacy will provide comprehensive primary and behavioral health care services to unserved low-income individuals in the Pasadena service area.

We recognize Legacy's 41-year history, during which time it has evolved from a small neighborhood sexually transmitted disease clinic to a full-service Federally Qualified Health Center (FQHC) focused on providing primary care, dental care, vision services, behavioral health services, family planning, health promotion and community outreach, wellness and nutrition, and comprehensive HIV/AIDS care. As an FQHC, Legacy provides health and wellness services to low-income and medically underserved Texans regardless of their ability to pay. Legacy has been instrumental in providing a medical home to thousands of families and is an important health care safety net provider in the community.

Sincerely,

A handwritten signature in blue ink that reads "Kathy Barroso".

Kathy Barroso, CPA  
Executive Director  
Coastal Health & Wellness

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**Governing Board**

**November 2019**

**Item #5**

**Informational Items Policies Approved by the United Board of Health  
as Authorized Under the Shared Services Agreement:**

- a) Employee Leave Policy

# Employee Leave Policy

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## Audience

This policy applies to all full-time personnel receiving benefits who are employed by the Galveston County Health District, Galveston Area Ambulance Authority, and Coastal Health & Wellness (collectively “the District”).

## Policy

It is the District’s policy to provide leave as listed below to full-time employees receiving benefits. Paid leave does not count as hours worked when determining hours paid at the gross overtime hourly rate. Employees will not accrue any leave while on any type of extended unpaid leave of absence unless the employee falls under the Uniformed Services Employment & Reemployment Rights Act (USERRA). Part-time positions at GCHD will be hired with no benefits, with the exception of required retirement program deductions.

## Vacation Leave

Vacation leave is paid time-off to be used for vacation or other personal activities. It is the employee’s responsibility to request supervisory approval for use of vacation leave at least two weeks prior to use, when feasible. (*Reference: Attendance Policy*)

When an employee reaches six months of employment, the amount of vacation leave they have accrued during that span will be dropped into their vacation balance for use.

Any employee transferring from full-time with benefits to part-time without benefits status will be paid the balance of their accrued, unused vacation leave. Employees will be paid the balance of their accrued, unused vacation leave upon termination, or resignation if proper notice is given as outlined in the District’s *Separation of Employment Policy*. (*Reference: Separation of Employment Policy*)

Vacation leave will accrue based on the following schedule:

<i>Full-Time District Employees (Based on 8 Hour Days)</i>							
<b>Service Time</b>	<b>Hours Accrued Per Pay Period</b>	<b>Hours Accrued Per Year</b>	<b>Days Accrued Per Year</b>	<b>Maximum Carryover (Hours)</b>	<b>Maximum Carryover (Days)</b>	<b>Maximum Accrual (Hours)</b>	<b>Maximum Accrual (Days)</b>
0 to 6 months	None	N/A	N/A	N/A	N/A	N/A	N/A
6 months - 4 years	3.077	80	10	40	5	80	10
5 - 9 years	4.615	120	15	80	10	120	15
10-14 years	6.154	160	20	120	15	160	20
15-19 years	7.692	200	25	140	18	200	25
20+ years	9.231	240	30	160	20	240	30

<b>Full-Time Coastal Health &amp; Wellness Physicians, Midlevels and Dentists (Based on 8 Hour Days)</b>							
<b>Service Time</b>	<b>Hours Accrued Per Pay Period</b>	<b>Hours Accrued Per Year</b>	<b>Days Accrued Per Year</b>	<b>Maximum Carryover (Hours)</b>	<b>Maximum Carryover (Days)</b>	<b>Maximum Accrual (Hours)</b>	<b>Maximum Accrual (Days)</b>
0 to 6 months	None	N/A	N/A	N/A	N/A	N/A	N/A
6 months - 4 years	4.615	120	15	40	5	120	15
5 - 9 years	6.154	160	20	80	10	160	20
10-14 years	7.692	200	25	120	15	200	25
15-19 years	9.231	240	30	140	18	240	30
20+ years	10.769	280	35	160	20	280	35

<b>Full-Time Galveston Area Ambulance Authority Field Staff (Based on 24 Hour Shifts)</b>							
<b>Service Time</b>	<b>Hours Accrued Per Pay Period</b>	<b>Hours Accrued Per Year</b>	<b>Days Accrued Per Year</b>	<b>Maximum Carryover (Hours)</b>	<b>Maximum Carryover (Days)</b>	<b>Maximum Accrual (Hours)</b>	<b>Maximum Accrual (Days)</b>
0 to 6 months	None	N/A	N/A	N/A	N/A	N/A	N/A
6 months - 4 years	3.692	96	4	48	2	96	4
5 - 9 years	5.538	144	6	96	4	144	6
10-14 years	7.385	192	8	120	5	192	8
15-19 years	9.231	240	10	144	6	240	10
20+ years	11.077	288	12	168	7	288	12

**Vacation Maximum Carryover Amount**

Vacation leave can accrue past the maximum carryover up to the maximum allowed accrual. Any time the employee’s vacation balance reaches the maximum accrual limit the employee will cease accruing vacation until their balance is used and falls below the maximum accrual. Pay periods often cross from one calendar year to the next so the last day of the pay period that includes December 31 (of any given year) will be considered the cutoff date for use of vacation leave, and any balances exceeding the maximum carryover limits will be adjusted accordingly.

**Sick Leave**

Sick leave can be used in cases of accident or illness of the employee, and medical or dental examination and care. Documentation may be required at the discretion of the supervisor.

An employee may use 80 hours of their accrued sick leave for immediate family members as defined through the Family and Medical Leave policy. (*Reference: Family and Medical Leave policy*)

When an employee reaches 6-months of employment, the amount they would have accrued during the first six months will be dropped into their sick leave balance for use. Sick leave is not compensable upon termination of employment.

<b>Full-time District Employees, Coastal Health &amp; Wellness, and GAAA Administrative Employees (based on 8-hour days)</b>			
<b>Service Time</b>	<b>Annual Accrual</b>	<b>Maximum Carryover (Hours)</b>	<b>Maximum Carryover (Weeks)</b>
0-6 months	None	N/A	N/A
6-months+	64 hours	480 hours	12 Weeks
<b>Full-time GAAA Field Employees (based on 24-hour shifts)</b>			
<b>Service Time</b>	<b>Annual Accrual</b>	<b>Maximum Carryover (Hours)</b>	<b>Maximum Carryover (Weeks)</b>
0-6 months	None	N/A	N/A
6-months+	96 hours	576 hours	12 Weeks

**Sick Leave Maximum Carryover Amount**

Sick leave can be accrued past the maximum carryover amount; however, only the maximum carryover amount will be carried over from one calendar year to the next. Year-end balances over the maximum carryover limits will be forfeited. Pay periods often cross from one calendar year to the next so the last day of the pay period that includes December 31 (of any given year) will be considered the cutoff date for use of sick leave. Sick leave is not compensable upon separation of employment.

**Personal Leave**

Personal leave is intended to provide staff with flexibility in their work situations by allowing paid time away from work to accommodate sudden emergencies, personal business or appointments. Situations warranting the use of personal leave will need to be approved by the employee’s supervisor. The last day of the pay period that includes December 31 (of any given year) will be considered the cutoff date for use of personal leave. Year-end balances at the end of the year will not be carried over. Personal leave cannot be used upon notice of resignation or termination and is not compensable upon separation of employment.

<b>Full-time District Employees, Coastal Health &amp; Wellness, and GAAA Administrative Employees (based on 8-hour days)</b>		
<b>Service Time</b>	<b>Time</b>	<b>Maximum Carryover</b>
6-months+	24 hours per year (can be used by the hour)	N/A
<b>Full-time GAAA Field Employees (based on 24-hour shifts)</b>		
<b>Service Time</b>	<b>Time</b>	<b>Maximum Carryover</b>
6-months+	48 hours per year (can be used by the hour)	N/A

**Funeral Leave**

When a death occurs in an employee’s immediate family, full-time employees will be granted up to 24 hours of paid leave. Immediate family members are defined as the employee's spouse, or the employee's or spouse's children, parents, brothers, sisters, grandparents, grandchildren, great-grandparents, great-grandchildren, a person identified as a legal guardian, and for a person who resides in the employee's household. It is the employee’s responsibility to notify his/her supervisor of the need for funeral leave as soon as possible. (Reference: *Attendance Policy*)

**Jury Duty Leave**

Full-time employees summoned for Jury or Grand Jury duty or as a witness under judicial subpoena will be granted paid leave of absence for the time they are summoned. The employee is responsible for notifying his/her supervisor as soon as possible and to provide proof from the court of the date(s) and time(s) of their jury duty or court summons. The time spent on jury duty that coincides with the employee’s regular work time is counted as straight time for overtime calculations. If the employee is not selected as a juror, the employee is expected to return to work if more than 50% of the employee’s shift remains at the time the employee is released from service. Proof of attendance is required to be turned in to the supervisor.

**Military Leave**

***Paid Military Leave***

Under Texas Law, those employees who are members of the state military forces or any of the reserve components of the United States Armed Forces, are entitled to fifteen days of paid military leave for each fiscal year to attend required training or duty. A written request along with a copy of the military orders is to be submitted to the Human Resources Director for approval prior to the commencement of the leave. Benefits continue to accrue during the fifteen-day period.

***Unpaid Military Leave and Veterans Re-employment***

It is the District’s policy to comply fully with the Uniformed Services Employment and Reemployment Rights Act (USERRA).

**Continuing Education Leave**

Full-time physicians, physician assistants, nurse practitioners, counselors, dentists and dental hygienists will be provided continuing education leave consistent with the annual licensure requirement(s). Continuing education leave must be approved at least two-weeks in advance and consistent with written guidelines. Annual continuing education leave may be from 1- 40 hours (no more than 5 business days annually) as necessary to meet annual continuing education requirements. Continuing education leave is not compensable upon termination of employment nor can it be carried over to a new calendar year.

<b><i>Licensed Medical/Dental Provider Continuing Education Leave</i></b>		
<b>Service Time</b>	<b>Time</b>	<b>Maximum Carryover</b>
0-6 months	None	N/A
6 months+	1 – 40 Hours	None

**Holiday Pay**

The District recognizes 11 paid holidays and one floating holiday per year. The holiday schedule is located on the District’s extranet site. The floating holiday must be used by the end of the calendar year and will not be carried over.

Full-time non-exempt employees who receive advanced approval and who work on a District recognized holiday will receive eight hours of holiday pay in addition to time worked.

Full-time GAAA field employees who work on a holiday receive up to eight hours of straight pay for time worked on the holiday in addition to pay for actual hours worked. The GAAA field employee holiday schedule will be released each year along with the District’s holiday schedule. (Reference: *Hours Worked and Compensatory/Overtime Policy*)

If the employee is on approved FMLA leave, he/she will not be paid for any holiday that falls during the leave unless the employee is supplementing FMLA leave with vacation or sick leave on the day before and the day after the holiday, in which case holiday pay may be received. (Reference: *Hours Worked and Compensatory/ Overtime, Attendance and Family and Medical Leave Policies*)

### **Emergency Leave**

Emergency leave is available to full-time and part-time employees, if scheduled to work, in the event of a Health District emergency which would result in the closure of District facilities. The Chief Executive Officer or designee must approve Emergency Leave. (Reference: *Emergency Operations Policy*)

### **Administrative Leave**

Administrative leave with pay may be granted with the approval of the Chief Executive Officer or designee for circumstances such as mandatory referrals to the Employee Assistance Program (“EAP”) and for other extenuating circumstances. (Reference: *Employee Assistance and Employee Corrective Action Policies*)

### **Extenuating Circumstances and Leave Without Pay**

In the cases of extenuating circumstances, the employee may submit a written request for the approval of unpaid leave. The request must be submitted through the supervisor to the Human Resources Director. All applicable available leave should be exhausted before leave without pay is considered.

### **Neutral Absence Control**

Any employee away from work for whatever reason for a period greater than six consecutive months will be terminated from the District, except those employees who are out under USERRA as outlined by federal law.

### **Employee Responsibilities**

- Receive proper approval from his/her supervisor based on the type of leave requested;
- Provide documentation for use of sick leave, if requested by their supervisor;
- Ensure electronic timesheets are completed properly and submitted according to deadlines;
- Consider business needs when requesting leave; and
- Report timesheet issues and concerns to their supervisor and the IT Help Desk.

### **Supervisor Responsibilities**

It is the supervisor’s responsibility to (Reference: *Attendance Policy*):

- Review the biweekly leave report provided by payroll to ensure excessive compensatory time and/or vacation hours are not being accrued that may impact budget;
- Inform employees of carryover limits and possible loss of accrued time;
- Request documentation in a fair and consistent manner from employees utilizing sick leave;
- Ensure electronic timesheets are completed properly and submitted according to deadlines;
- Monitor time and attendance of employees on an ongoing basis;
- Consider business needs when approving or rejecting requests for time off; and
- Communicate the departmental expectations to all assigned employees.

### **Laws**

It is the intent of this policy to be in compliance with the Fair Labor Standards Act, Texas Payday Law and Uniformed Services Employment and Reemployment Rights Act.

### **Violation**

Violation of this policy may result in appropriate corrective disciplinary action, up to and including suspension or dismissal.



# COASTAL HEALTH & WELLNESS

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**GOVERNING BOARD**

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

**Governing Board  
November 2019  
Item #6  
Executive Report**



## **Coastal Health & Wellness Updates**

### **Insurance Contract Updates –**

#### **Dental**

- MCNA-Currently Dr. Shetty in network; Pending-Lindskog, Keiser, Nguyen, Foreman
- Dr. Foreman- (Pending- Connection, Liberty Dental, Guardian, DenteMax, Dentegra)

#### **Behavioral Health**

- Texas Children's Health Plan- Pending- Application submitted waiting approval (Tigrett & Bailey)

#### **Medical**

- Dr. Ibidabo-Obe (Pending-Superior Health Plan, Community Health Choice, Blue Cross Blue Shield)
- Juliet Wiseman, NP (Pending-Superior Health Plan, Community Health Choice)
- Yaa Cheremateng, PA-C (Pending-Superior Health Plan, Community Health Choice, National Government Services and Molina)
- Opeyemi Ojo, NP (Pending-Superior Health Plan, Community Health Choice)
- Haley McCabe, PA-C (Pending-Superior Health Plan, Community Health Choice)

#### **Pending New/Evaluating Contracts:**

- Memorial Hermann Health Plan- CHW has been approved to participate as of 10/21/19. Contract under review
- Patient /Physician and Cooperatives (PPC)- Contract currently under review
- HealthSmart Preferred Care- Pending response from HealthSmart
- Superior Health Plan (Dental Services)-Pending response to contract request

#### **Other Insurance Updates:**

- In an effort to streamline dental insurance verification processes, new procedures have been developed on how treatment plans will be handled and how insurance verifications will be obtained. The goal of this process is to assure that we can obtain information in a timely manner so that we can notify the patient of their payment responsibility promptly.

**Committees –**

- **Quality Assurance/Risk Management Committee** – The monthly meeting of this committee was held on November 6, 2019. Appointment utilization and no-show rates for October were reviewed. Appointment utilization rates for the month of October for medical and dental appointments were within the goal of 90%. Counseling utilization rate continued to remain below the goal in both Texas City and Galveston, reporting 69% and 37% respectively. Overall, no-show rates for the month improved but continued to be higher than the 20% goal, except for dental hygienist visits in Galveston, which reported a 13% no-show rate. On average, medical visits reported a 23% no-show rate for the month while dental visits also reported a no-show average of 23%. The average counseling no-show rate was 34%. Patients are currently being informed of the new no-show policy which is effective January 1, 2020.
- Patient satisfaction survey data was also reviewed for the month of October, with a total of 350 responses. In comparison to the prior month, the weighted average for all categories improved from 4.68 to 4.89.
- Other items discussed included review of dental procedures/guidelines, clinical audits and financial updates.
- **Infection Control / Environment of Care /Joint Commission Committee (IEJ)**– The monthly meeting of the Joint Commission/Infection Control/Environment of Care Committee will be held on November 20th.
- **Patient Centered Medical Home (PCMH) Committee** – The Coastal PCMH Team continues to meet to evaluate and develop processes related to this initiative. Recent activities include finalizing a welcome packet to be distributed to patients that will include useful information related to clinic services; determining the appropriate provider panel size and length of appointment time slots in order to meet quality of care standards.

**HRSA Deliverables / Updates –**

- Substance Use Disorder-Mental Health (SUD-MH) grant – The SUD-MH program is going well and currently a total of 19 patients are enrolled in the program. Initial grant projections for program enrollment were based on a maximum of 50 patients. To provide additional assistance to patients, we are also actively recruiting for a Recovery Coach to add to this program's team.
- We continue to acquire equipment and supplies budgeted through the Capital Assistance for Hurricane Response and Recovery Efforts (CARE) grant. We have currently spent \$305,398 of the \$337,012 initially awarded. All grant funds must be spent by August 31, 2020.
- HRSA has confirmed the operational site visit (OSV) dates for August 25 – August 27, 2020. We will be contacted with additional pre-site visit information at least four weeks prior to the first day of our OSV.

- The Non-competing Continuation (NCC) Progress Report for the 2020-2021 period was submitted to HRSA on November 8, 2019. A final copy of the report was also emailed out to all Board members.
- The annual UDS report is due 2/15/2020 and we are currently participating in a beta testing program with NextGen related to changes that were incorporated into the report for this year.

#### **Miscellaneous Updates –**

- We are continuing to monitor the number of patients enrolled in the patient portal and Case Management staff have been assisting patients with enrollment through scheduled events at both clinic locations. To date, we have enrolled 158 patients in the portal through these scheduled events. We are actively monitoring numbers and staff continue to educate patients daily about the benefits of enrolling in the portal.
- As reported last month, in order to better clarify appointment confirmations and cancellations, text messages requesting appointment confirmations have been changed to YES to confirm or NO to cancel. Previously, patients were asked to enter C to confirm and X to cancel. In addition, the 24-hour appointment reminder has been removed. Patients will continue to receive reminders 48-hours prior to their appointment.
- Dr. Lindskog and her team continue to participate in the National Network for Oral Health Access (NNOHA) Sealants Improvement Collaborative. As previously reported, Coastal Health and Wellness was one of 40 health centers nationwide selected to participate in this collaborative, which will be ongoing from October 2019 to June 2020.
- The 2019 Employee Appreciation Luncheon was held yesterday November 13<sup>th</sup> from 11:00 am to 1:00 pm at the College of the Mainland Conference Center. Coastal Health & Wellness employees honored for their years of service included, 5-year award recipients: Jackie Morgan, PA; Cheryl Row, MA; and 10-year award recipient: Cherree Windham, Lab/X-ray Technician.

#### **Communications –**

- **Health Briefs**
  - The Daily News, Oct. 2
    - Diabetes 101
- **Health Briefs**
  - Mother's Milk Club – Galveston
    - The Daily News, Oct. 7
- **Breast cancer most common for women in US**
  - The Daily News, Oct. 9
- **Breast cancer most common for women**
  - Bay Area Entertainer, Oct. 9
  - I45NOW Facebook, Oct. 10

**CHW Career Opportunities:**

October 23, 2019-November 14, 2019

**CHW Career Opportunities:**

- **Employee Onboarding** – Human Resources conducted new employee orientation for the following employee(s):
  - Gabriella Lopez – Dental Assistant (full-time)
- **Job Offers** – The following candidate(s) were extended job offers and have future start dates:
  - N/A
- **Current Vacancies:**
  - CHW Nursing
    - LVN (1)
  - Providers
    - Physician (1)
  - Patient Services
    - Patient Services Specialist (1)
  - Electronic Records
    - Unit Receptionist I - Medical (Bilingual) (1)

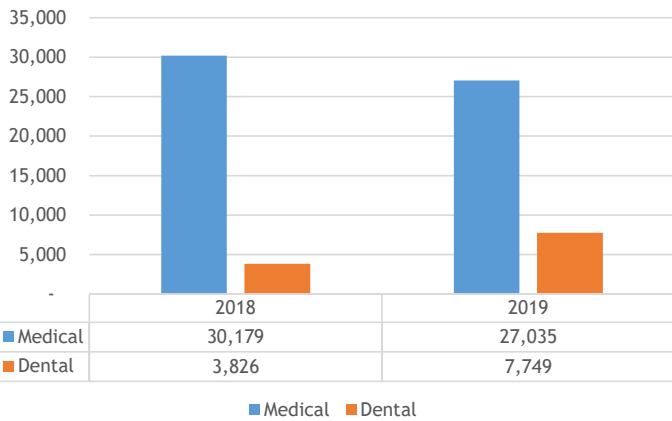
**CHW Executive Contract Report: October 2019**

1. Agreement signed with Stargel for copier replacements under a lease agreement covering the next three years.
2. Agreement signed with Comcast to increase bandwidth in one of our main lines
3. Agreement signed for IT to receive training through New Horizon
4. Organization Membership Agreement signed with Galveston County Recovers
5. Referral Agreement signed from Streetscape Ministries
6. Agreement signed with Clear Channel for CHW Marketplace enrollment advertising through 12/15/19.

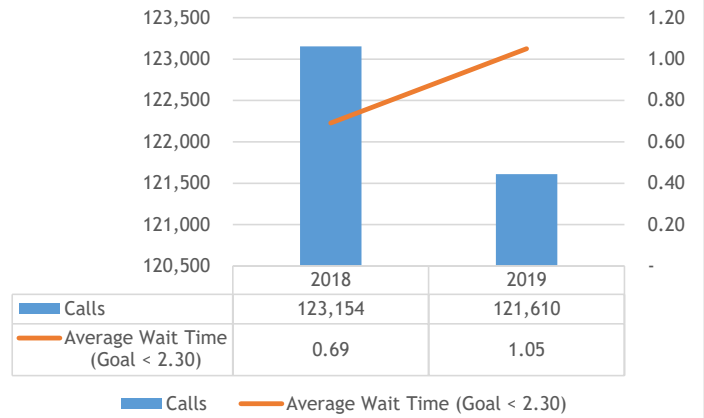
**November 2019**  
**YTD Comparison Report (January to October)**

<b>Patient Services - Patients Checked-In</b>	<b>2018</b>	<b>2019</b>	<b>% Change</b>
Medical	30,179	27,035	-10%
Dental	3,826	7,749	103%
<b>Contact Center</b>	<b>2018</b>	<b>2019</b>	<b>% Change</b>
Calls	123,154	121,610	-1.3%
Average Wait Time (Goal < 2.30)	0.69	1.05	52%
<b>Electronic Records</b>	<b>2018</b>	<b>2019</b>	<b>% Change</b>
Record Requests	8,442	9,186	8.8%
<b>County Indigent Program</b>	<b>2018</b>	<b>2019</b>	<b>% Change</b>
Applied	1267	1358	7%
Referrals	3694	1847	-50%
Avg Total Patients on Program	251	256	2%
<b>Case Management</b>	<b>2018</b>	<b>2019</b>	<b>% Change</b>
Referrals	9,840	8,156	-17%

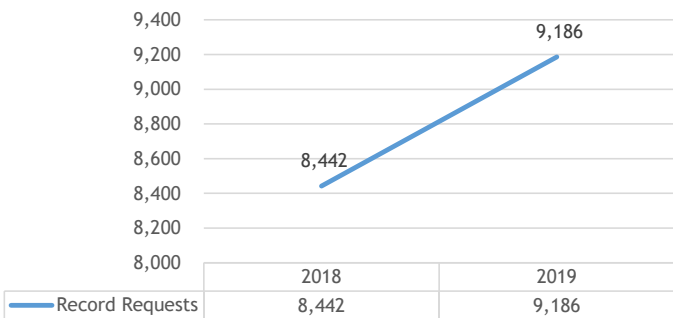
### Patient Services-Total Patients Checked-In



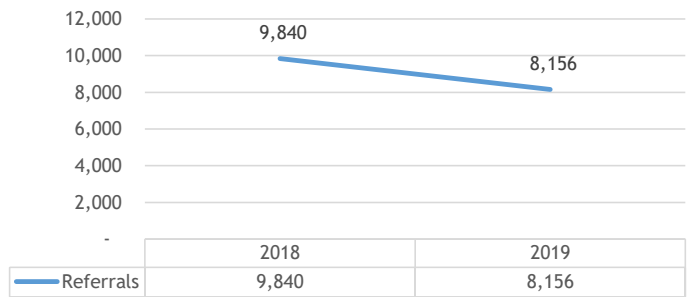
### Contact Center - Calls and Wait Time



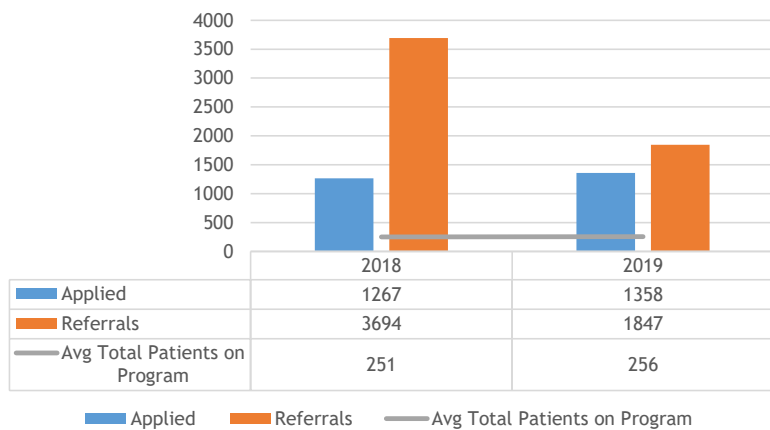
### Electronic Record Requests



### Case Management Referrals



### County Indigent Program



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**Governing Board  
November 2019  
Item #7  
Annual Policy/Plan Review**

- a) Coastal Health & Wellness Credit Card and Refund Policy
- b) Coastal Health & Wellness Charge Capture Policy
- c) Coastal Health & Wellness Payment Posting Policy



-~~Last~~ Approved 11/01/2018  
By: CHW Governing Board  
-Effective 11/16/2017

## Coastal Health & Wellness Credit and Refund Policy

### Purpose

This policy applies to all Coastal Health & Wellness (CHW) employees and/or oOutside bBilling aAgency who identify potential credits and/or refunds due to patients, insurances or third-party payors.

### Policy

It is the policy of Coastal Health & Wellness to conduct a thorough review of potential credits and/or refunds to determine the cause and the appropriate course of action.

### Responsibilities

~~CHW Business Office Staff Business Office Staff Patient Services/Check out Patient Services/Check Out/Electronic Records/Unit Receptionist/Case Management/Providers/CHW Admin~~ may provide a patient with a Refund Request form to complete should the patient request one. For patient requested refunds, CHW Business staff will provide the patient with a Refund Request form, and if the patient is present, will verbally explain the statement on the Refund Request form which reads refund process, informing the patient that any account credits will first be applied to outstanding balances, with any remaining credit refunded. ~~“Please note any account credit will first be applied to balances due which may have occurred for dental and/or medical services rendered by Coastal Health & Wellness clinic, with any remaining credit refunded.”~~ The refund process may take up to 30 days for completion”.

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CHW Business Billing Office – thoroughly reviews potential credits and/or refunds to determine the cause and the appropriate course of action. Staff gathers-is responsible for gathering necessary back up documentation to process patient, insurance and third-party refund requests. No refunds will be given to patients if an outstanding—balance due is more than the requested refund.

Outside Billing Agency - thoroughly reviews potential credits and/or refunds to determine the cause and the appropriate course of action. ~~Staff~~The outside billing agency gathers necessary back up documentation to process patient, insurance and third-party refunds and will forward that information to the CHW Business Office if a refund via check or credit card payment is necessary.

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**Note:** Refer to NextGen Training Manuals

- Revenue Cycle NextGen Training Manual





-~~Last~~ Approved 11/01/2018  
By: CHW Governing Board  
-Effective 11/16/2017

## Coastal Health & Wellness Charge Capture Policy

### Purpose

This policy applies to all Coastal Health & Wellness (CHW) employees and/or ~~o~~Outside ~~b~~Billing ~~a~~Agency who are responsible for entering clinic charges.

### Policy

It is the policy of Coastal Health & Wellness to capture services performed for a patient in an accurate and timely manner. The charges are captured in the electronic record for every patient.

### Responsibilities

Patient Services – in the electronic management system, assure all patient demographic and payor ~~(sliding discount, insurance or contract)~~ information ~~(sliding discount, insurance or contract)~~ is entered accurately and post ~~any~~ charges ~~and payments~~ (e.g., nominal fee, ~~STD/HIV?~~, ~~deposits etc.~~).

Dental Assistants (DA) – in the patient’s electronic record, complete reason for patient visit, blood pressure, x-rays, as well as any other documentation required by DA within 72 hours of visit.

Nursing/MA – in the patient’s electronic record, complete reason for patient visit, vitals, as well as any other documentation required by Nursing/MA, and ~~super<sup>2</sup> bill~~superbill services provided such as labs, injections, ~~and~~ vaccines within 72 hours of visit.

Providers (Dental & Medical) – in patient’s electronic record, complete patient visit documentation, submit procedure code(s) and diagnosis code(s) within 72 hours of visit.

Lab - in patient’s electronic record, complete and ~~super<sup>2</sup> bill~~superbill lab and x-ray services provided ~~–~~ within ~~72~~–hours.

Check-Out - in patient’s electronic record, process any charges that populate during the checkout auto flow process and enter charges for any medical record request, whether dental or medical.

Outside Billing Agency - bill all encounters no later than 3 days after completion of documentation in electronic record.

### Note: Refer to NextGen Training Manuals

- Patient Services NextGen Training Manual
- Electronic Records NextGen PM Training Manual
- Revenue Cycle NextGen Training Manual

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-~~Last~~ Approved 11/01/2018  
By: CHW Governing Board  
-Effective 11/16/2017

## Coastal Health & Wellness Payment Posting Policy

### Purpose

This policy applies to all Coastal Health & Wellness employees and/or ~~o~~Outside ~~b~~Billing ~~a~~Agency who are responsible for entering clinic payments.

### Policy

It is the policy of Coastal Health & Wellness to post payments for a patient encounter in an accurate and timely manner. Once posted, all payments are reflected in the patient's account.

### Responsibilities

Patient Services ~~in the patient's electronic record,~~ posts all payments received as applicable (e.g., nominal fees, deposits, co-pays, payment on accounts, etc.) in the patient's electronic record, during the check-in auto flow process and reconciles posted payments to the daily deposit.

Check-Out ~~in the patient's electronic record,~~ posts all payments received as applicable (e.g., records fees, payment on accounts, etc.) in the patient's electronic record, during the check-out auto flow process and reconciles posted payments to the daily deposit.

Business Office - ~~in the patient's electronic record,~~ posts all payments received as applicable (e.g., denture contract, budget plan, contracts, etc.) in the patient's electronic record, and reconciles posted payments to the daily deposit. Submit backup information on payments received from ~~patient statements and~~ third-party payers to the outside billing agency to be posted to the patient's account.

Outside Billing Agency - in the patient's electronic record, post all ACH payments received in the Business ~~Office related to patient payments,~~ Medicare, Medicaid, Private Insurance, etc. and reconcile posted payments to daily cash receipt logs and explanation of benefits (EOB's) received from third-party ~~pay~~ers.

**Note:** Refer to NextGen Training Manuals

- Patient Services NextGen Training Manual
- Electronic Records NextGen PM Training Manual
- Revenue Cycle NextGen Training Manual

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# **COASTAL HEALTH & WELLNESS**

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**GOVERNING BOARD**

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

**Governing Board**

**November 2019**

**Item #8**

**Discussion Regarding Proposed Changes to Coastal Health & Wellness  
Governing Board Bylaws**

# BYLAWS

## COASTAL HEALTH & WELLNESS GOVERNING BOARD

ADOPTED: May, 1985

REVISIONS APPROVED:

These policies were approved, as revised, by the Coastal Health & Wellness Governing Board at a regular meetings on Amended: May, 1986; Amended: May, 1988; Amended: Dec., 1988; Amended: Sep., 1995; Amended: Apr., 1996; Amended: Sep., 1996; Amended: Sep., 1998; Amended: July, 1999; Amended: Oct., 1999; Amended: Apr., 2000; Amended: Sep., 2000; Amended: Oct., 2001; Amended Aug., 2003; Amended: October, 2005, Amended: May, 2008; Amended Jan., 2012; Amended: Oct., 2015; Amended: Jan. 2017

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DEFINITIONS:

**Business Operations** – Are those essential internal functions necessary to effectively and efficiently manage a business. Such functions include, but are not limited to, human resources, purchasing, risk management, financial management, billing, material management, information technology, etc.

**Policy** – Written policy adopted by the Governing Board provides controlling authority and/or broad guidance to the executive managers of Coastal Health & Wellness who are directly responsible for developing business procedures that direct employee activities and job expectations.

**Policy development** - Refers to the process leading to the Governing Board adopting written expectations for Coastal Health & Wellness to accomplish goals and measurable objectives. The process of developing policies with controlling authority over Coastal Health & Wellness' jurisdiction will involve: (1) the use of inclusive stakeholder feedback (e.g., advisory or ad-hoc committees), and/or (2) a formal public hearing at a Governing Board meeting.

**Budgeted Revenue/Fees** – Fees that Coastal Health & Wellness anticipates collecting. These collected fees are included in the original Governing Board approved budget.

**Unbudgeted/Revenue/Fees-** In the event Coastal Health & Wellness collects funds in excess of budgeted revenue, the excess funds must be brought to the Governing Board for approval of recommended appropriations.

## **PURPOSE**

The purpose of the Bylaws is to outline the operational rules of Coastal Health & Wellness' Governing Board ("Governing Board"/"Board"), to include the responsibilities of the Board, controlling authority, function, composition of members, responsibilities of members and officers, meeting procedures, conflicts of interest and confidentiality, and responsibilities of the Executive Director.

## **GENERAL DESCRIPTION**

Coastal Health & Wellness is a federally qualified health center ("FQHC") grantee of the U.S. Department of Health and Human Services ("HHS") as codified under Section 330 of P.L. 94-63 Title V ("Section 330"), and is operated under the direction of the Coastal Health & Wellness Governing Board, which is established to provide broad policy direction and general community-based governance and guidance to the activities of Coastal Health & Wellness' programs as required of Section 330, funded FQHCs, to assure availability of health services to all residents of Galveston County. By Governing Board decisions and actions, operational policies are adopted. These adopted policies provide legal authority and/or guidance to the duties, functions and internal business operations of Coastal Health & Wellness.

In general the Governing Board will:

- Establish and monitor Coastal Health & Wellness' plan to measurably improve health services in Galveston County.
- Annually review and, as necessary, modify all existing policies and fee schedules pertinent to Coastal Health & Wellness.
- Consider adopting new policies based on changes in existing state/federal policies when there is an option on whether to adopt said policies. Some new and revised policies may be state or federally mandated and shall not allow for the implementation of the policy to be optional. State and/or federally mandated policies will be communicated to the Governing Board but will not require Governing Board action to become effective.
- Review and, as necessary, act on any new health services activities and associated fee schedules proposed by clinic staff.
- Review and, as necessary, act on any proposed changes in the level of health services (e.g., hours of operation, expanded services, new services, and/or a decrease in services) currently provided by Coastal Health & Wellness.
- Review and, as necessary, act on health service issues raised by Governing Board members, especially those of which are politically sensitive, have a potential fiscal impact on the citizens of Galveston County, or which may have a perceived adverse impact on Coastal Health & Wellness.
- Review and approve the annual operational budget for Coastal Health & Wellness in a manner consistent with those of which are set forth by the "*Specific Duties of Board*" section of these Bylaws.

**VISION, MISSION, & STATUTORY FUNCTIONS:**

The Governing Board will adopt policies that are consistent with the Vision and Mission of Coastal Health & Wellness, and protect the values of FQHCs as outlined in Section 330 of P.L. 94-63 Title V.

**Vision**

*“Healthy people in healthy communities with local access to health care.”*

**Mission**

*“Provide access to high quality primary care to any Galveston County resident.”*

**Values**

1. We believe in the inherent dignity of and have respect for all people.
2. We believe that we must work together with mutual trust to provide quality care.
3. We believe our clinics should provide comfort, through courtesy and hospitality.
4. We believe that honest, unbiased communication is the basis for understanding.
5. We respect the diversity of the cultures that we serve.
6. We believe that people have free will, the ability to understand and select among choices.
7. We believe that wellness is the responsibility of the individual, the health care system, and the community.
8. We believe that we must work efficiently to conserve our resources.
9. We believe in educating patients, family, staff and community.
10. We believe that each individual’s opinions are valuable.
11. We believe that each individual’s actions contribute to the quality of care.

**SPECIFIC DUTIES OF THE BOARD:**

The Governing Board shall provide the required community based governance and oversight of Coastal Health & Wellness, consistent with the Bylaws of the Galveston County United Board of Health which has delegated to the Governing Board the specific authorities and responsibilities over Coastal Health & Wellness, as set forth below. Per this delegation, the Governing Board shall have specific responsibility to:

- Act as supervisor to the Executive Director including responsibility for the selection, annual evaluation of performance, and, if necessary, dismissal of this position.
- Form a finance committee to review monthly financial reports of the appropriate budgets, and to subsequently recommend appropriate actions at Governing Board meetings.
- Approve the annual operating plan, operating budget, and capital budget for Coastal Health & Wellness.
- Periodically review and approve other financial policies including billing and collection activities, a fee schedule for services, the sliding fee scale discount program, and patient eligibility services including criteria for partial payment schedules.



## Coastal Health & Wellness Governing Board Bylaws

- Review and approve unbudgeted expenditures (i.e. unexpected expenditures that are not already accounted for in the planned budget process) and recommend allocations of unexpected increase in revenues (i.e., unbudgeted funds not tied to a specific use). Once the appropriate budgets are approved, the Governing Board will review any unbudgeted revenue for appropriate allocation. In the event Coastal Health & Wellness sees a need for using unbudgeted expenditures, review and, as applicable, approve use of any dollars in the restricted reserve.
- Perform an annual self-assessment of the effectiveness, efficiency and compliance with all requirements imposed upon Coastal Health & Wellness (as set forth in Section 330 of the Public Health Service Act) as a group, as well as its effectiveness in meeting the expectations of the Board.
- In conjunction with the Galveston County United Board of Health, adopt a Strategic Health Plan (“Plan”) every five years to include priorities, goals, and objectives that Coastal Health & Wellness will be expected to accomplish. The Plan will be developed in an inclusive participatory process involving public feedback and comment. The Plan will also identify key health partners who contribute to the goals and objectives in coordination with Coastal Health & Wellness.
- Review and approve an annual report analyzing the progress of Coastal Health & Wellness in accomplishing the goals and objectives set forth by the Plan.
- Evaluate Coastal Health & Wellness’ achievements at least annually and utilize the knowledge gained thereby to revise the clinic’s goals, objectives, operational plan and budget as necessary and appropriate, including providing advice regarding the establishment of linkages with other health care providers and/or health care programs.
- Review and approve emergency/disaster plans and procedures on an annual basis.
- Review and approve any proposed single item purchased in excess of \$5,000.00 or greater which has not been budgeted.
- Review and approve any proposed single purchase with a bid of \$50,000.00 or greater.
- Review, periodically update, and adopt Coastal Health & Wellness’ operational policies on an annual basis.
- Annually evaluate Coastal Health & Wellness activities including service utilization patterns, productivity, patient satisfaction, and achievement of project objectives, and develop a process for hearing and resolving patient grievances.
- Assure that Coastal Health & Wellness is operated in compliance with applicable federal, state and local laws and regulations, including those regarding professional practice of all health care providers.
- Develop, adopt and periodically update the Coastal Health & Wellness’ health care policies including scope and availability of services, location and hours of services, patient confidentiality and notice of privacy practices, and quality-of-care audit procedures.
- Elect officers (see *Governing Board Operational Procedures*).
- Annually contract, in concert with the Galveston County United Board of Health, with an outside auditor to perform a single agency audit, and officially adopt the annual audit report.
- Approve the annual Section 330 grant application and project and plan any applications for subsequent grants under Section 330, and any changes to Coastal

- Health & Wellness' scope of service in conformance with the project.
- Exercise all other authorities and responsibilities required by Section 330, and implement regulations and policies to be vested in a Section 330 compliant manner.
  - Attend to any matters the Governing Board determines are in the best interest of, and are within the purposes and objectives of, Coastal Health & Wellness.

Other than as agreed upon with the Galveston County United Board of Health, no other party may be granted approval or veto rights regarding any of the aforementioned authorities.

### **GOVERNING BOARD OPERATIONAL PROCEDURES**

#### 1. Membership:

The membership of the Governing Board will consist of no less than nine (9) and no more than fifteen (15) persons collectively representing the community at large and accurately reflecting the ethnic and socioeconomic distribution of the region's population. A majority of the membership will be comprised of persons served by Coastal Health & Wellness, as described below.

- At a minimum, a majority of the Governing Board members shall be individuals who utilize Coastal Health & Wellness as their principal source of primary care and who, as a group, represent the individuals being served by Coastal Health & Wellness in terms of demographic factors such as race, ethnicity, gender and economic status ("consumer representatives"). To be considered a consumer representative, the individual must be a current, registered patient of Coastal Health & Wellness and must have accessed Coastal Health & Wellness in the past twenty-four (24) months to receive at least one or more in-scope services that generated a health center visit. Consumer representatives shall reside in the County of Galveston. A legal guardian of a dependent child or adult consumer, or a legal sponsor of an immigrant consumer, may also be considered a consumer representative for purposes of fulfilling the composition requirements set forth in this Section. Consumer representatives may be nominated by the United Board of Health or the Governing Board, in accordance with Paragraph Two (2) of this section.
- The remaining Governing Board members will be representatives of the community served by Coastal Health & Wellness, and shall be selected for their expertise in health care delivery, community affairs, local government, finance and banking, legal affairs, trade unions, and other commercial and industrial concerns, or social service agencies within the community ("non-consumer representatives"). To the extent possible, non-consumer representatives should live or work in Galveston County. No more than one-half of the non-consumer representatives shall derive more than ten percent (10%) of their annual income from the health care industry. Non-consumer representatives may be nominated by the United Board of Health or the Governing Board, in accordance with Paragraph Two (2) of this section.

Ex-Officio Member:

- The Chairperson of the Department of Family Medicine of The University of Texas Medical Branch, or designee, will be an ex-officio, non-voting member of the Governing Board.
- The Executive Director of Coastal Health & Wellness shall serve as an ex-officio, non-voting member.
- The Chief Executive Officer of the Galveston County Health District shall serve as an ex-officio, non-voting member.

Other qualifications

- No voting member of the Governing Board shall be an employee of Coastal Health & Wellness, the Galveston County Health District, the United Board of Health, or a spouse, child, parent, brother, or sister, by blood, marriage or adoption, of a member within the aforementioned groups.
- In no event shall Board members appointed by any third-party constitute a majority of the entire Governing Board or a majority of the non-consumer representatives, nor shall any third-party preclude the selection of Governing Board members not appointed by such third-party.

Each person elected will signify in writing to the Governing Board that he/she will accept appointment, will agree to attend all regular meetings, and, that if he/she has three (3) consecutive unexcused absences, he/she will be removed from membership, consistent with Paragraph Four (4) of this section.

2. Election of Membership:

All voting members of the Governing Board are elected by a majority of the seated Governing Board members, upon consideration of a slate of recommended nominees presented to the Governing Board. Either the Governing Board or the United Board of Health may recommend one or more qualified nominees for each vacancy to be included on the slate of recommended nominees presented to the Governing Board.

3. Terms of Membership

To ensure continuity and experience in the voting membership, the terms of not more than one-third of the Board members will expire at any one time. Reckoning from the adoption date of these bylaws, terms of one, two and three years will be established and will be assigned by lot, at the direction of the Chairperson, to these members and to any vacancies on the roll at that time. Upon the expiration of the terms of membership initially established by lot, the regular three (3) year terms will begin. These may be filled by new election or re-election procedures as identified in Paragraph Two (2) (above). The terms of the newly elected or re-elected Governing Board members shall commence immediately upon election. At the end of a member's term, the existing member shall continue to serve on the Governing Board until an individual is elected to replace him/her, or until he/she is

elected for an additional term.

4. Removal of Membership:

Any Governing Board member may be removed from office by a majority vote of the remaining Governing Board members present and voting at any regular meeting, or at any special meeting called for such purpose, at which a quorum exists, for neglect of duty, malfeasance, conduct detrimental to the interests of Coastal Health & Wellness, conviction of a felony, debarment or suspension from participation in federal health care programs, or whenever it is determined that the best interest of Coastal Health & Wellness would be served by such removal. Any allegation shall be presented in writing, by mail, to the Governing Board member in question at least ten (10) days in advance of the meeting. The allegation shall be noted on the agenda of the meeting. The Governing Board member in question shall be entitled to appear before and be heard at said meeting. In addition, any member who misses three (3) consecutive meetings without being excused by action of the Governing Board shall automatically be removed from office. The Chair shall declare when a vacancy exists, and the vacant seat will be filled as soon as possible.

In no event shall any third-party require the removal of any current Board members not appointed by such party.

5. Resignation and Vacancies:

A Governing Board member may resign at any time by giving written notice to the Chairperson or to the Secretary-Treasurer.

When a vacancy occurs, the Board will present a slate of nominations according to procedures outlined in Paragraph Two (2) above. The new Governing Board member shall be elected by a majority vote of the remaining Governing Board members present and voting at any regular meeting, or at any special meeting called for such purpose, at which a quorum exists, and shall complete the unexpired term of the seat filled.

6. Officers:

There will be elected by majority vote of the membership immediately following adoption of these Bylaws and annually thereafter at the first meeting of the Governing Board for each calendar year, at which a quorum is present, a Chairperson, a Vice-Chairperson and a Secretary-Treasurer. All officers shall be voting members of the Governing Board. In the absence of the Chairperson, the Vice-Chairperson will act; in the absence of the Vice-Chairperson, the Secretary-Treasurer will act; and in the absence of all three officers, a presiding officer will be named for that meeting by a majority of the remaining voting members present.

- Each officer shall serve for a term of one (1) year or until his or her successor is elected and qualified, and there shall be no limit to the number of terms an officer may be re-elected to the same position.
- Any officer, upon a two-thirds consenting majority of the voting membership, can

be removed from office. Removal from the Governing Board will automatically constitute removal from any office held by such member.

- An officer may resign at any time by giving written notice to the Chairperson or the Secretary-Treasurer.
- Upon the death, resignation or removal of an officer of the Governing Board, an interim replacement will be elected from the current voting membership by a majority vote of the members of the Governing Board present and voting at any regular meeting, or at any special meeting called for such purpose, at which a quorum exists, in order to serve out the unexpired term of that officer.

7. Responsibilities of the Officers:

The Chairperson (or the Vice-Chairperson, in the Chairperson's absence) shall:

- Conduct meeting business in accordance with Robert's Rules of Order.
- Review and sign official correspondences, including minutes, of the Governing Board, any document or instrument requiring the signature of an officer (unless expressly delegated by the Governing Board to another officer or agent), and the annual Section 330 grant application.
- Be responsible for naming the members of any Governing Board committee.
- Perform such other duties as may be required of him or her by the Governing Board.

In no event shall any Board member appointed by any third-party serve as Chairperson.

The Secretary-Treasurer shall:

- Keep and oversee an accurate record of the proceedings of all meetings of the Governing Board, and present such record to the Governing Board for approval and adoption.
- Give or cause to be given all notices in accordance with these Bylaws or as required by law.
- Function as Chairperson of the Finance Committee.
- Perform all duties customary of the office and such other duties as may be required of him or her by the Governing Board.

8. Committees:

Each standing committee shall have at least two (2) Governing Board members and a majority of each committee shall be comprised of members of the Governing Board. Each committee shall meet upon the call of the committee chairperson, or upon the call of the Chairperson of the Governing Board, which call shall indicate the date, time and place of such meeting. Unless otherwise specified, each committee shall make a report to the Governing Board at the Governing Board's regular meeting held subsequent to the meeting of the committee. Only the Executive Committee is authorized to act for the full Board where reasonable and necessary during the interim periods between meetings of the Governing Board; the recommendations of all other committees shall be subject to review and approval of the Governing Board prior to any action being taken.

- Executive Committee: The Chairperson, Vice-Chairperson, and Secretary-Treasurer will comprise the Executive Committee of the Board. The Executive Committee has the power to act for the Governing Board during the interim periods between meetings, consistent with established Board policies, under the direction of the full Board, and subject to ratification by the full Governing Board at its next meeting. In no event shall any Governing Board members appointed by any third-party constitute a majority of the Executive Committee.
- Finance Committee: The Finance Committee shall be responsible for monitoring and making recommendations regarding the financial status and viability of Coastal Health & Wellness, including fiscal planning, budgeting, financial management policy development, and financial performance; reviewing financial statements and recommending action to the Governing Board; reporting on the annual independent financial audit process (with the final annual audit report to be presented to the Governing Board); and working with any financial consultants and auditors.
- Quality Assurance Committee. The Quality Assurance Committee shall be responsible for monitoring and making recommendations to the Governing Board regarding the provision of health care services by Coastal Health & Wellness, including accessibility, utilization patterns, productivity and patient satisfaction, and making recommendations regarding Coastal Health & Wellness' quality assurance/quality improvement program of the clinic. In addition to Board member representatives, the Committee shall include appropriate staff clinicians and the Medical Director.
- Additional Standing or Temporary Committees: The Governing Board may designate and appoint standing or temporary committees in addition to those prescribed herein, each of which shall consist of two or more Board members. The activities of temporary committees shall be limited to those necessary to accomplish the specific task for which it was created and shall have no power to act for the Governing Board. Upon completion of the task for which appointed, such temporary committee shall be disbanded.

9. Meetings:

Subject to a good cause exception, the regular meeting of the Governing Board shall generally be held on the last Thursday of each month at a Governing Board determined time best suited to maintain a quorum to conduct business. All members will be notified of the time of the meeting at least 72 hours prior to the meeting.

- Texas Open Meetings Act - All meetings of the Coastal Health & Wellness Governing Board shall conform to the rules and requirements set forth in the Texas Open Meetings Act.
- Robert's Rule of Order - Meetings of the Governing Board shall be conducted under the latest version of Robert's Rules of Order, unless otherwise specified in these

## Coastal Health & Wellness Governing Board Bylaws

### Bylaws.

- Quorum – A majority of filled positions on the Governing Board shall constitute a quorum for the transaction of business. If a quorum is not present at a meeting, or a quorum is not present at the time business is to be transacted, a majority of the Governing Board members present may adjourn the meeting to another time and shall give absent Board members reasonable notice of the time and place of such adjourned meeting.
- Location/time – Meetings shall be held in the Galveston County Health District's Boardroom unless proper action is taken by the Governing Board to hold the meeting elsewhere, at which point location and time of the meeting shall be publicly announced. Majority vote can change the time and place of regular meetings.
- Special meetings – Special meetings may be called at any time by the Chairperson, or at the request of a majority of the Governing Board. The Coastal Health & Wellness Executive Director, or designee, prior to each meeting, shall notify all members. Any time the Governing Board needs to be called into special meeting by the Chairperson or a majority of Governing Board members, the Executive Director or designee will notify all members, at least seventy-two (72) hours prior to such meeting, of the time, date and purpose of the called meeting.
- Waiver of Notice – Notice of any meeting of the Governing Board need not be given to any Board member who submits a signed waiver of notice, either before or after the meeting, or who attends the meeting without protesting, prior thereto or at its commencement, the lack of notice.
- Voting – Except as otherwise provided by these Bylaws or as may be required by applicable law, all matters before the Governing Board shall be decided by an affirmative vote of the majority of the Board members present and voting at a meeting at which a quorum exists. Each Board member shall be entitled to one (1) vote.
- Telephonic or Electronic Meetings – Any or all Governing Board members may participate in a meeting of the Board by telephone or by any other means of communication so long as all Board members who are participating in the meeting can hear all other Board members. Participation in this nature shall constitute presence in person at the meeting.
- Agenda – At least seventy-two (72) hours before the scheduled time of the meetings, the agenda will be posted at the entrance of the Galveston County Health District's Boardroom, as well as at the entrance of each clinic site. Finally, the agenda and relevant handouts will be posted for the public on the Coastal Health & Wellness website.

## Coastal Health & Wellness Governing Board Bylaws

- Executive Session – The Governing Board may conduct all or any part of a meeting in Executive Session for such purposes as authorized by the Texas Open Meetings Act. The Chairperson of the Board may invite the Coastal Health & Wellness Executive Director and such other persons as he or she deems appropriate to attend an Executive Session. Public and staff shall be excluded from Executive Sessions except when invited to give testimony or advice, after which they will be excused.

### 10. Minutes:

The minutes of the Coastal Health & Wellness Governing Board shall be summary type minutes. Regular meetings shall be taped and filed until the minutes are approved. Tapes of meetings with items of special interest, to be determined by the Chairperson or the Executive Director, will be retained for a period of one (1) year. The minutes of the preceding meeting, including a record of attendance, will be distributed prior to, and approved at, the next regular monthly meeting and at that time, will be signed by the Secretary-Treasurer and Chairperson (or Vice- Chairperson, in absence of the Chairperson).

### 11. Persons Appearing Before the Board:

Persons wishing to appear before the Governing Board will have as their objective any of the following or combinations thereof: (1) to request information on Coastal Health & Wellness' affairs; (2) to comment on health service issues; and/or (3) to ask for specific action or change of policy. Under policies and procedures established by the Coastal Health & Wellness Executive Director, day-to-day citizen inquiries are addressed directly by clinic employees with issue-related job responsibilities. However, all shall be assured of their right to appear before the Governing Board if so desired. A citizen desiring to address the Governing Board shall submit a written request to the Coastal Health & Wellness Executive Director by noon on the Thursday preceding the Governing Board meeting. A statement of the nature of the matter to be considered shall accompany the request. The Coastal Health & Wellness Executive Director shall include the requested appearance on the agenda so long as the request is made in accordance with at least one of the aforementioned objectives, and the person shall be heard if he or she appears.

- At the discretion of the Board Chairperson, persons who have not submitted a written request may be permitted to comment on posted agenda items.

### 12. Adoption of Health Service Policies (local rules & regulations):

The Coastal Health & Wellness Governing Board will adopt health service policies that govern health service activities, consistent with all federal, state and local laws, regulations and policies.



13. Change in Board Bylaws:

Changes or new additions to Governing Board Bylaws may be adopted by the Governing Board during Governing Board meetings, as specified below. The Governing Board Chairperson may appoint a Bylaw committee comprised of selected Governing Board members with the responsibilities of developing and evaluating revisions, and submitting recommendations at a future Governing Board meeting for immediate adoption. Unless otherwise stated, upon Governing Board adoption, new Bylaws will become effective immediately.

- Bylaws will be enacted upon the affirmative vote of three-fourths of the Governing Board members present at a regular meeting of the Governing Board at which a quorum exists, each member having received a copy at least ten (10) days prior to the meeting at which they will be considered.
- Bylaws may be amended, altered or repealed upon the petition of two-thirds of the voting membership of the Governing Board and affirmed by two-thirds of the voting membership present at the next regular meeting at which a quorum exists, provided however, that the members receive a copy, in writing, of the proposed amendments ten (10) days prior to the meeting at which the vote will be taken.
- In no event shall the alteration, amendment or repeal of these Bylaws, or the adoption of new Bylaws, require approval of any third party.

14. Authority to Act:

No individual Governing Board member shall act for the Governing Board except as may be specifically authorized by the Board. The Governing Board may, by a majority vote, authorize the Chairperson of the Board to act on its behalf during an emergency.

**CONFLICTS OF INTEREST AND CONFIDENTIALITY**

Each Board member has a fiduciary duty to Coastal Health & Wellness and must give it his/her loyalty. The Governing Board shall establish and adopt a written policy, consistent with Texas Local Government Code Chapter 171.001 et seq. that establishes procedures for: (i) disclosing and addressing conflicts of interest or the appearance of conflicts of interest by Governing Board members, officers, employees, consultants, and/or agents who provide services or furnish goods to the Coastal Health & Wellness; and (ii) maintaining the confidentiality of information obtained by a Governing Board member, officer, employee, consultant and/or agent by virtue of his or her position as such. Such standards shall also establish policies and procedures regarding nepotism, bribery, and the offer of gratuities.

No Board member shall participate in the selection, award or administration of any contract or other affiliation relating to operations conducted by Coastal Health & Wellness or for the

furnishing of services or supplies to Coastal Health & Wellness, in which he/she or his/her immediate family or partner has a real or potential conflict of interest (financial or otherwise) or with whom he/she is negotiating or has any arrangement concerning employment, nor shall any Governing Board member divulge the subject or substance of such discussions, contracts or other affiliations to any person, institution, entity, company or other third-party. Notwithstanding the foregoing, such contract or affiliation may be approved or authorized by a majority of the disinterested Board members present at a meeting at which a quorum exists if the facts of any such interest by a Board member shall have been disclosed to the Board by the interested Board member prior to or at the meeting at which the contract or affiliation was approved or authorized and such interested Board member abstains from voting in that regard, provided that the contract or affiliation is otherwise fully consistent with Coastal Health & Wellness' procurement policies.

**PROHIBITION AGAINST POLITICAL ACTIVITIES AND LIMITATIONS ON LOBBYING**

Coastal Health & Wellness, and any individual Board member acting on behalf of the Coastal Health & Wellness Governing Board, shall not participate, or intervene, in (including the publishing or distributing of statements) any political campaign on behalf of any candidate for public office. No substantial part of the activities of Coastal Health & Wellness shall consist of carrying on propaganda, or otherwise attempting to influence legislation, except to the extent permitted by law for nonprofit, tax-exempt organizations.

**AUTHORITY DELEGATED TO EXECUTIVE DIRECTOR** (who may in turn delegate authority to appropriate District personnel):

The Coastal Health & Wellness Executive Director shall be an agent of the Governing Board and shall be directly accountable to the Board. Subject to the control of the Governing Board, the Executive Director shall have responsibility for the general care, supervision, and direction of Coastal Health & Wellness' affairs in furtherance of the policies and programs established by the Governing Board, consistent with these Bylaws. Specifically, the Executive Director shall:

- Approve all new and/or revised operational policies not previously approved by the Governing Board for immediate implementation. As necessary, these policies will then be brought to the Coastal Health & Wellness' Governing Board at the next meeting for ratification.
- Sign contracts that commit the agency to receive or disburse any funds (local, state, or federal; public, private, and/or nonprofit) for new and existing and continuing clinic program activities.
- Provide an executive report of Coastal Health & Wellness' activities, to include a summary of new and renewed contracts/services signed by the Executive Director and/or designee.
- With accountability to the Governing Board, independently execute, direct, organize, monitor, assign and dismiss Coastal Health & Wellness staff as necessary to implement Governing Board policies, to support Governing Board meetings, to carry out policy development activities, to assure compliance with all

## Coastal Health & Wellness Governing Board Bylaws

- applicable laws, rules and regulations, and to provide services in accordance with their positions.
- Approve unbudgeted single item expenditures of less than \$5000.00 and subsequently report such approval in executive reports.

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# COASTAL HEALTH & WELLNESS

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**GOVERNING BOARD**

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

**Governing Board**

**November 2019**

**Item #9**

**Consider for Approval Consumer Representative Aaron Akins to serve  
as a Member of the Quality Assurance Board Committee**

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**Governing Board**



**November 2019**

**Item #10**

**Consider for Approval Privileging Rights for the  
following UTMB Resident:**

- a) Nadine Abraham, MD



Date: November 14, 2019  
To: CHW Governing Board  
Thru: Kathy Barroso, CPA   
Executive Director  
From: Cynthia Ripsin, MS, MPH, MD   
Medical Director  
Re: Privileging

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Upon the review of the completed credentialing file of Nadine Abraham, MD, by Judie Olivares, Human Resources Generalist, and myself (Cynthia Ripsin, MD), we would like to recommend that the Coastal Health & Wellness Governing Board approve privileging for Nadine Abraham, MD, based on the following information:

- Nadine Abraham, MD, is a licensed Physician IN TRAINING who will practice and train part-time at the Texas City Coastal Health & Wellness Medical Clinic. Dr. Abraham graduated McGovern Medical School at the University of Texas Health Science Center at Houston in 2015 with a Doctor of Medicine Degree. Dr. Nadine Abraham requests medical privileges on a part-time basis at the Texas City site.

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# COASTAL HEALTH & WELLNESS

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**GOVERNING BOARD**

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

**Governing Board**

**November 2019**

**Item #11**

**Update on Progress Related to Patient Centered Medical Home  
Designation**

PCMH =  
PATIENT CENTERED MEDICAL HOME =  
PRIMARY CARE MEDICAL HOME

An update



A1C

LDL

MICROALBUMIN

EXERCISE

EYE EXAM

PREVENTION

EXAM/FEET

**DIABETES II**

SMOKING?

BLOOD  
PRESSURE

MEDICATIONS

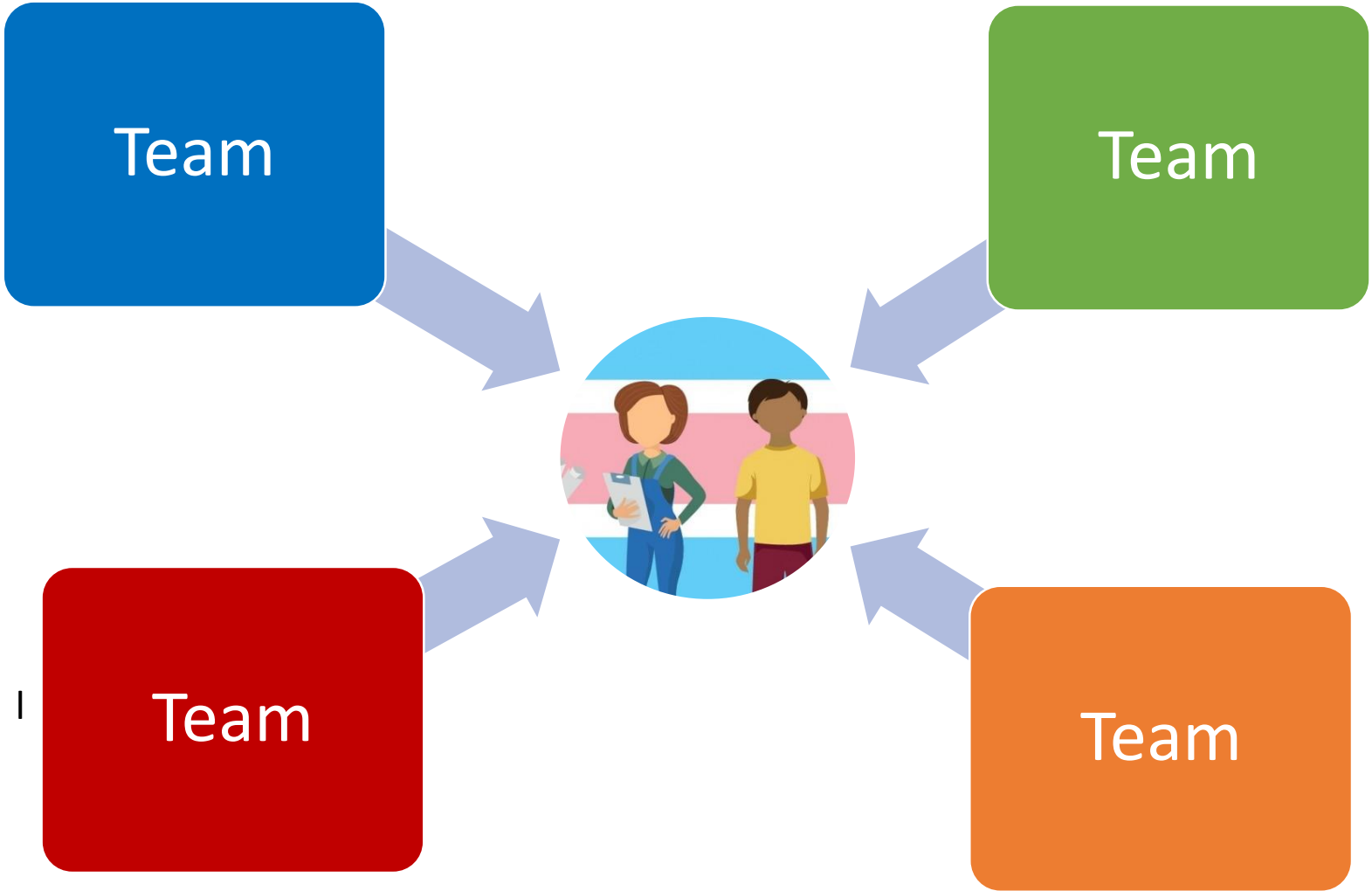
ALCOHOL

DEPRESSION

BODY WEIGHT

HEALTHY DIET

DENTAL CARE



# Rating system for preparing for a PCMH certification

Status Code	Definition
1	Needs a lot of work
2	Implementing Workflows
3	Doing the work, but do not have documentation
4	Doing the work, have some documentation
5	Ready for site visit

Green is GOOD!!



<p>The organization provides information to the patient about: The mission, vision, and goals of the primary care medical home. Note: This may include how it provides for patient-centered and team-based comprehensive care, a systems-based approach to quality and safety, and enhanced patient access.</p>	5
<p>The organization provides information to the patient about: How the primary care medical home functions, its scope of care, and its types of services.</p>	5
<p>The organization provides information to the patient about the following:</p> <ul style="list-style-type: none"> <li>- Selection of a primary care clinician</li> <li>- Involvement in his or her own treatment plan</li> <li>- Management of referrals</li> <li>- Coordination of care</li> <li>- Collaboration with patient-selected clinicians who provide specialty care or second opinions</li> <li>- Communication with the primary care medical home about health care concerns or other information</li> </ul>	3/4
<p>The organization provides information to the patient about: Patient responsibilities, including providing health history and current medications, and participating in self-management activities.</p>	3/4
<p>The organization provides information to the patient about: The patient's right to obtain care from other clinicians within the primary care medical home, to seek a second opinion, and to seek specialty care.</p>	5
<p>The primary care medical home provides patients with information regarding the credentials and educational background of individuals serving in the role of primary care clinician.</p>	5

Focus Area:  
Provide  
information  
to patients  
about the  
PCMH

Each patient has a designated primary care clinician.	5
The organization allows the patient to select his or her primary care clinician.	5

Focus Area:

Patients have a designated primary care physician (PCP)

<p>The organization respects the patient's right to make decisions about the management of his or her care.</p>	<p>5</p>
<p>The interdisciplinary team involves the patient in the development of his or her treatment plan.</p>	<p>4</p>
<p>The interdisciplinary team works in partnership with the patient to achieve planned outcomes.</p>	<p>5</p>
<p>The organization respects the patient's right and provides the patient the opportunity to do the following:</p> <ul style="list-style-type: none"> <li>- Obtain care from other clinicians of the patient's choosing within the primary care medical home</li> <li>- Seek a second opinion from a clinician of the patient's choosing</li> <li>- Seek specialty care</li> </ul> <p>Note: This element of performance does not imply financial responsibility for any activities associated with these rights.</p>	<p>5</p>

Focus Area:

Patient involvement in own care decisions

<p>The primary care clinician and the interdisciplinary team identify the patient's oral and written communication needs, including the patient's preferred language for discussing health care. Note: Examples of communication needs include the need for personal devices such as hearing aids or glasses, language interpreters, communication boards, and translated or plain language materials.</p>	5
<p>The primary care clinician and the interdisciplinary team communicate with the patient during the provision of care, treatment, or services in a manner that meets the patient's oral and written communication needs.</p>	4
<p>The clinical record contains the patient's communication needs, including preferred language for discussing health care.</p>	5
<p>The organization provides language interpreting and translation services. Language interpreting options may include trained bilingual staff, contract interpreting services, or employed language interpreters. These options may be provided in person, via telephone or video. The documents translated and languages into which they are translated are dependent on the patient population.</p>	5
Patient Education, Health Literacy, & Self-Management	

Focus area:

Patient language and communication needs

The interdisciplinary team identifies the patient's health literacy needs. Note: Typically this is an interactive process, the goal of which is to ascertain the patient's capacity to process and understand basic health information needed to make appropriate health decisions.	1
Patient education is consistent with the patient's health literacy needs.	3
Patient self-management goals are identified, agreed upon with the patient, and incorporated into the patient's treatment plan.	1
The primary care clinician and the interdisciplinary team educate the patient on self-management tools and techniques based on the patient's individual needs.	3
The clinical record includes the patient's self-management goals and the patient's progress toward achieving those goals.	1

Focus area:

Patient education, health literacy and self management



The organization manages transitions in care and provides or facilitates patient access to care, treatment, or services including the following:

- Acute care
- Management of chronic care
- Preventive services that are age- and gender-specific
- Behavioral health needs
- Oral health care
- Optical health
- Urgent and emergent care
- Substance abuse treatment
- Rehabilitative services and equipment (examples include physical, occupational, and speech therapy and equipment such as orthotics, prosthetics, and wheelchairs)

Note: Some of these services may be obtained through the use of community resources as available, or in collaboration with other organizations.

4

The organization provides care that addresses various phases of a patient's lifespan, including end-of-life care.

3

The organization provides disease and chronic care management services to its patients.

3

The organization provides population-based care.

2

Focus area:

Expanded scope of responsibility

<p>The organization identifies the composition of the interdisciplinary team. The team must include a doctor of medicine or doctor of osteopathy.</p> <p>Note: The intent of this requirement is that while a doctor of medicine or doctor of osteopathy is always available to be part of the interdisciplinary team, his or her involvement in a patient's care would be determined by the needs of the patient.</p>	5
<p>The members of the interdisciplinary team provide comprehensive and coordinated care, treatment, or services and maintain the continuity of care. Note: The provision of care may include making internal and external referrals.</p>	5
<p>The primary care clinician and the interdisciplinary team provide care for a panel of patients.</p>	5
<p>The interdisciplinary team participates in the development of the patient's treatment plan.</p>	5
<p>The interdisciplinary team assesses patients for health risk behaviors.</p>	5
<p>The interdisciplinary team monitors the patient's progress toward achieving treatment goals.</p>	5

Focus area:

Team membership and general responsibilities

	<p>The primary care clinician is responsible for making certain that the interdisciplinary team provides comprehensive and coordinated care, treatment, or services and maintains the continuity of care as described in EPs 6–12.</p> <p>Note: Coordination of care may include making internal and external referrals, developing and evaluating treatment plans, and resolving conflicts in the provision of care.</p>	4
	<p>When a patient is referred to an external organization, the interdisciplinary team reviews and tracks the care provided to the patient.</p>	4
	<p>The interdisciplinary team acts on recommendations from internal and external referrals for additional care, treatment, or services.</p>	4
or	<p>Information about the patient's care, treatment, or services that promotes continuity of care among internal and external providers.</p>	4
Care		

Focus area:

Care coordination

<p>The organization provides patients with the ability to do the following 24 hours a day, 7 days a week:</p> <ul style="list-style-type: none"> <li>- Contact the primary care medical home to obtain a same- or next-day appointment</li> <li>- Request prescription renewal</li> <li>- Obtain clinical advice for urgent health needs</li> </ul>	5
<p>The organization offers flexible scheduling to accommodate patient care needs.  Note: This may include open scheduling, same-day appointments, group visits, expanded hours, and arrangements with other organizations.</p>	5
<p>The organization has a process to respond to patient urgent care needs 24 hours a day, 7 days a week.</p>	5
<p>Primary care medical home patients are provided online access to their health information within four business days after the information is available to the primary care clinician or interdisciplinary team. This information includes diagnostic test results, lab results, summary lists, and medication lists.</p>	5
<p>The organization uses a certified electronic health record to provide appointment reminders to patients with two or more office visits in the last two years.</p>	4
<b>Safety</b>	

Focus area:

Enhanced access to services

<p>The organization uses a certified electronic health record system to do the following:</p> <ul style="list-style-type: none"> <li>- Support the continuity of care, and the provision of comprehensive and coordinated care, treatment, or services</li> <li>- Document and track care, treatment, or services</li> <li>- Support disease management, including providing patient education</li> <li>- Support preventive care, treatment, or services</li> <li>- Create reports for internal use</li> <li>- Create and submit reports to external providers and organizations, including public health agencies, disease-specific registries, immunization registries, and other specialized registries</li> <li>- Facilitate electronic exchange of information among providers</li> <li>- Support performance improvement</li> <li>- Identify and provide patient-specific education resources</li> </ul>	5
<p>The primary care medical home uses an electronic prescribing process for at least 50% of allowable prescriptions.</p>	5
<p>The primary care medical home uses a computerized order entry system for at least 60% of medication orders.</p>	5
<p>The primary care medical home uses a computerized order entry system for at least 30% of laboratory orders.</p>	5
<p>The primary care medical home uses a computerized order entry system for at least 30% of radiology orders.</p>	5
<p>The primary care medical home uses clinical decision support tools to guide decision making.</p>	5
<p>Performance Improvement-Related</p>	

Focus on:

Health Information Technology

The organization collects data on the following: Disease management outcomes.	5
The organization collects data on the following: Patient access to care within time frames established by the organization.	5
The organization collects data on the following: <ul style="list-style-type: none"> <li>- Patient experience and satisfaction related to access to care, treatment, or services and communication</li> <li>- Patient perception of the comprehensiveness of care, treatment, or services</li> <li>- Patient perception of the coordination of care, treatment, or services</li> <li>- Patient perception of the continuity of care, treatment, or services</li> </ul>	5
The organization uses the data it collects on the patient's perception of the safety and quality of care, treatment, or services to improve its performance. This data includes the following: <ul style="list-style-type: none"> <li>- Patient experience and satisfaction related to access to care, treatment, or services and communication</li> <li>- Patient perception of the comprehensiveness of care, treatment, or services</li> <li>- Patient perception of the coordination of care, treatment, or services</li> <li>- Patient perception of the continuity of care, treatment, or services</li> </ul>	5
Leaders involve patients in performance improvement activities. Note: Patient involvement may include activities such as participating on a quality committee.	1
The interdisciplinary team actively participates in performance improvement activities.	5
The organization evaluates how effectively the primary care clinician and the interdisciplinary team work in partnership with the patient to support the continuity of care and the provision of comprehensive and coordinated care, treatment, or services.	?

Focus area:

Performance improvement

Primary care clinicians have the educational background and broad-based knowledge and experience necessary to handle most medical and other health care needs of the patients who selected them. This includes resolving conflicting recommendations for care. A primary care clinician is a doctor of medicine or doctor of osteopathy, or an advanced practice nurse or physician assistant practicing in collaboration with a doctor of medicine or doctor of osteopathy. The term "collaboration" in this context means that health care providers work together to meet the needs of the patient. It is not the intent of this requirement to impose additional restrictions on the scope of practice of an advanced practice nurse, nor is it meant to preempt applicable state law.

5

The primary care clinician and the interdisciplinary team members function within their scope of practice and in accordance with privileges granted.

5

Focus area:

Competency of the primary care team

On the path toward PCMH certification:  
Mock site visit is next.....  
Certification site visit will soon follow.....



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