



COASTAL HEALTH & WELLNESS

GOVERNING BOARD

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

AGENDA

Thursday, September 3, 2020 – 12:00 PM (August Meeting)

ON MARCH 16, 2020, GOVERNOR GREG ABBOTT TEMPORARILY SUSPENDED PART OF THE TEXAS OPEN MEETINGS ACT TO HELP MITIGATE THE SPREAD OF COVID-19. SPECIFICALLY, THIS AMENDMENT ALLOWS FOR LOCAL GOVERNMENTS TO CONVENE VIRTUALLY SO LONG AS MEMBERS OF THE PUBLIC ARE PROVIDED A MEANS BY WHICH THEY CAN HEAR AND PROVIDE COMMENT TO THE GOVERNING BODY.

The Galveston County Health District’s United Board of Health will convene for a special meeting by utilizing Zoom, which will allow for Board members and the public alike to partake in and/or view the meeting either online or over the phone.

CONNECTING VIA INTERNET:

Access the URL: <https://us02web.zoom.us/j/477078265>

1. An automated prompt should appear on your screen; when it does, click “Open Zoom Meetings”
2. If you would prefer to use your computer for audio connection, please do the following:
 - a. When prompted, select “Join Audio”
 - b. Another popup box will appear, select the tab, “Computer Audio”
 - c. Now click the box stating, “Join with Computer Audio.” Your connection to the meeting will be automatically established upon doing so.
3. If you would prefer to utilize a phone for your audio connection, please do the following:
 - a. Mute your computer’s volume;
 - b. When prompted, select “Join Audio”
 - c. Another popup box will appear, select the tab, “Phone Call”
 - d. You will be presented with a Dial-In, Audio Code, and Participant ID. Call the Dial-In number from your phone and follow the subsequent voice prompts. Your connection to the meeting will be automatically established upon doing so.

CONNECTING VIA PHONE (AUDIO ONLY):

1. Dial 346-248-7799
2. You will be prompted to enter the Meeting ID, which is 477 078 265 #
3. Finally, you will be instructed to enter your Participant ID. When this occurs, merely select the pound (hashtag) key without entering any numbers. Your connection to the meeting will be automatically established upon doing so.

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.

SPECIAL MEETING

Meeting Called to Order

*Item #1ACTION.....Agenda

*Item #2ACTION.....Excused Absence(s)

*Item #3ACTION.....Consider for Approval Minutes from July 30, 2020 Governing Board Meeting

- *Item #4**ACTION**.....Policies Approved by United Board of Health as Authorized Under the Shared Services Agreement
 - a) Employee Complaint/Issue Resolution Policy
 - b) Hiring Policy
 - c) Communications Policy
- *Item #5**ACTION**.....FTCA Deeming Notice for Calendar Year 2021
- Item #6Executive Reports
 - (a) Executive Director
 - (b) Medical Director
 - (c) Dental Director
- Item #7**ACTION**.....Consider for Approval July 2020 Financial Report
- Item #8**ACTION**.....Consider for Approval Selection of FY 2020-2022 Independent Auditor
- Item #9**ACTION**.....Consider for Approval Annual Fee Schedule for Dentures, Crowns, and Root Canals Effective September 1, 2020
- Item #10**ACTION**.....Consider for Approval Revision to Annual Medical Fee Schedule Effective September 1, 2020
- Item #11**ACTION**.....Consider for Approval Privileging Rights for Locum Tenens Monique Swan, FNP-C

Next Regular Scheduled Meeting: October 1, 2020 (September Meeting)

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.



COASTAL HEALTH & WELLNESS

GOVERNING BOARD

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

**Governing Board
August 2020
Item#2
Excused Absence(s)**



COASTAL HEALTH & WELLNESS

GOVERNING BOARD

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

Governing Board

August 2020

Item#3

**Consider for Approval Minutes from July 30, 2020 Governing
Board Meeting**

**Coastal Health & Wellness
Governing Board
July 30, 2020**

Board Members

Conference Call:

Milton Howard, DDS,
Virginia Valentino
Flecia Charles
Victoria Dougharty
Jay Holland,
Elizabeth Williams
Dorothy Goodman
Barbara Thompson, MD

Staff:

Kathy Barroso, Executive Director
Cynthia Ripsin, MD
Hanna Lindskog, DDS
Eileen Dawley
Andrea Cortinas
Richard Mosquera

Mary Orange (phone)
Kristina Garcia (phone)
Pisa Ring (phone)
Anthony Hernandez
Tikeshia Thompson Rollins (phone)

Excused Absence: Samantha Robinson, Aaron Akins

Unexcused Absence: Miroslava Bustamante

Items 1-6 Consent Agenda

A motion was made by Virginia Valentino to approve the consent agenda items one through six. Dorothy Goodman seconded the motion and the Board unanimously approved the consent agenda.

Item #7 Executive Reports

Kathy Barroso, Executive Director, presented the July 2020 Executive Report to the Board. Kathy informed the Board that we are currently planning for National Health Center Week August 9th-August 15th and will keep the Board updated. Special thanks go out to Laura Clark for donating leggings to public health and Coastal Health & Wellness staff and to Chick-fil-A in Texas City for donating lunch to all Health District employees. Kathy informed the Board that COVID-19 positive cases have started to decline in comparison to previous weeks. In addition, the positivity rate has hovered around 9% over the last couple of weeks which is down from weeks prior. Galveston County continues to partner with UTMB to offer free COVID-19 and antibody testing. Kathy also informed the Board that Coastal Health & Wellness received a termination letter from Liberty Dental for the Texas City location and that staff is working to submit re-enrollment paperwork.

Dr. Ripsin, Medical Director, updated the Board on medical services in the Coastal Health & Wellness Clinic:

Provider Time Allotment

- 15 patients were seen by the Family Medicine OB provider (10% FTE). Services provided included:
 - Colposcopy
 - Removal and insertion of contraceptive devices
 - Endometrial biopsies
 - OB management

- 1.9 weekly FTE of 7 FTE (27%) is focused on managing all acute care
 - One respiratory acute which includes COVID testing
 - One Acute-all-other (UTI, musculoskeletal injuries)
- Acute care comprises 24% of our total kept visits
 - Acute care patients are managed same-day or next day
 - Productivity for acute providers is closely aligned to FTE allotment suggesting appropriate management of provider time
- New hire for respiratory acute care to include management of COVID has been hired
 - 60% FTE
 - Will free up this time for routine chronic care

Next steps:

- Continue to transition more patients into face to face encounters
 - Very labor-intensive process which takes provider time to manage the schedule
- Ramp up use of telehealth for all aspects of patient care
- Formalize plan for managing influenza and other respiratory illnesses common in the winter in the age of COVID

Dr. Lindskog, Dental Director, updated the Board on dental services in the Coastal Health & Wellness Clinic:

- We are continuing to prioritize treatment that does not produce aerosol and are using hand instruments whenever possible. If aerosols are produced, rubber dam isolation and N95 respirators are being utilized. Non-urgent treatment that generates an aerosol is being delayed.
- We have had great success with the Batelle N95 decontamination program
- We now have HEPA filters in rooms where aerosols are being produced. This was a CDC recommendation.
- We continue to follow all Dental State Board requirements and CDC recommendations and have continued strategic scheduling to minimize risk.
- The Galveston clinic is now open on Tuesday and Thursday and the Texas City clinic is open Monday-Saturday.
- The part time hygienist rejoined us on June 30, 2020. She is caught up on all trainings missed on June 30th and July 1st and began seeing patients on July 7th.
- We hired a temporary dental assistant who started on July 13th, but we are still dealing with staffing shortages and adapting our schedule as needed.

Item #8 Consider for Approval June 2020 Financial Report

Mary Orange, Business Office Manager, presented the May financial report to the Board. A motion to accept the financial report as presented was made by Jay Holland. Dorothy Goodman seconded the motion and the Board unanimously approved.

Item #9 Consider for Approval Bi-Annual Third-Party Payer Adjustments

Mary Orange, Business Office Manager, asked the Board to consider for approval the bi-annual third-party adjustments. A motion to accept the adjustments as presented was made by Jay Holland. Victoria Dougharty seconded the motion and the Board unanimously approved.

Item #10 Consider for Approval Quarterly Visit and Analysis Report Including Breakdown of New Patients by Payor Source for Recent New Patients

Mary Orange, Business Office Manager, reported on the quarterly visits and analysis report including a breakdown by new patients by payor source for recent new patients. As expected, total revenue and visits were down in comparison to prior periods due to COVID-19. A motion to accept the report as presented was made by Dorothy Goodman and seconded by Victoria Dougharty. The Board unanimously approved the motion.

Item #11 Consider for Approval the Coastal Health & Wellness 2020-2021 Performance Improvement Plan

Eileen Dawley, Chief Nursing Officer, presented the Coastal Health & Wellness 2020-2021 performance improvement plan. The proposed plan was updated to reflect future performance improvement criteria. A motion to accept the plan as presented was made by Jay Holland. Dorothy Goodman seconded the motion and the Board unanimously approved.

Item #12 Consider for Approval Quarterly Access to Care Report for the Period Ending June 30, 2020

Kathy Barroso, Executive Director, presented the quarterly access to care report. Kathy informed the Board that appointment times for medical visits were recently changed from 20-minute to 15-minute slots, thereby increasing the number of available appointment slots in comparison to prior periods. A motion to accept the quarterly access to care report as presented was made by Victoria Dougharty and seconded by Felica Charles. The Board unanimously approved the motion.

Item #13 Consider for Approval Quarterly Patient Satisfaction Survey Report for the Period Ending June 30, 2020

Kathy Barroso, Executive Director, presented the quarterly patient satisfaction survey report for the period ending June 30, 2020. Kathy informed the Board that we did receive two comments that were unfavorable based on the appointment availability. Due to COVID, face to face appointments were limited during this quarter; however, we did score an overall satisfaction rating of 4.55. A motion to accept the patient satisfaction report as presented was made by Virginia Valentino and seconded by Dorothy Goodman. The Board unanimously approved the motion.

Item #14 Consider for Approval Quarterly Compliance Report for the Period Ending June 30, 2020

Richard Mosquera, Chief Compliance Officer, presented the quarterly compliance report for the period ending June 30, 2020 to the Board. In addition to the compliance report, Mr. Mosquera also reviewed the annual Risk Management Report with the Board. Mr. Mosquera discussed annual results with the Board in comparison to stated goals for the period covering July 1, 2019 to June 30, 2020. Due to COVID, projected goals were not achieved on four objectives. A motion to accept the compliance and risk management report as presented was made by Virginia Valentino and seconded by Dorothy Goodman. The Board unanimously approved the motion.

Item #15 Consider for Approval Annual Dental Fee Schedule Effective August 1, 2020

Mary Orange, Business Office Manager, presented the annual dental fee schedule effective August 1, 2020. A motion to accept the fee schedule as presented was made by Virginia Valentino and seconded by Victoria Dougharty. The Board unanimously approved the motion.

Item #16 Consider for Approval Annual Fee Schedule for Dentures, Crowns, and Root Canals Effective August 1, 2020

Mary Orange, Business Office Manager, presented the annual fee schedule for dentures, crowns, and root canals. Dr. Lindskog raised a question regarding some of the fees presented, and in order to allow staff time to review and make updates, Dr. Howard, Vice Chair, asked that this item be tabled until the next meeting. A

motion to table the annual fee schedule for dentures, crowns and root canals was made by Dorothy Goodman and seconded by Jay Holland. The Board unanimously approved the motion.

Item #17 Consider for Approval Annual Medical Fee Schedule Effective August 1, 2020

Mary Orange, Business Office Manager, presented the annual medical fee schedule effective August 1, 2020. Mary informed the Board that the medical fee schedule was calculated using the national physician fee schedule RVU rate 2020 and the clinical diagnostic lab fee schedule using midpoint ranges. A motion to accept the annual medical fee schedule effective August 1, 2020 as presented was made by Victoria Dougharty and seconded by Dorothy Goodman. The Board unanimously approved the motion.

Item #18 Consider for Approval Privileging Rights for the Following UTMB Residents:

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

- Cintia Dafashy, MD
- Hasseb Ikram, DO
- Mariam Khan, MD

A motion to accept privileging rights for UTMB resident Cintia Dafashy, MD was made by Jay Holland and seconded by Dorothy Goodman. The Board unanimously approved the motion.

A motion to accept privileging rights for UTMB resident Hasseb, Ikram, DO was made by Victoria Dougharty and seconded by Dorothy Goodman. The Board unanimously approved the motion.

A motion to accept privileging rights for UTMB resident Mariam Khan, MD was made by Virginia Valentino and seconded by Dorothy Goodman. The Board unanimously approved the motion.

Item #19 National Network for Oral Health Access (NNOHA) Sealant Improvement Collaborative Report

Dr. Lindskog, Dental Director, presented the National Network for Oral Health Access (NNOHA) Sealant Improvement Collaborative Report to the Board. Involvement in the collaborative proved beneficial as data provided by Dr. Lindskog showed that the sealant rates were greatly improved from prior years.

The meeting was adjourned at 1:31p.m.

Vice Chair

Date

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Governing Board

August 2020

Item#4

Policies Approved by United Board of Health as Authorized Under the Shared Services Agreement

- a) Employee Complaint/Issue Resolution**
- b) Hiring Policy**
- c) Communications Policy**

Employee Complaint/Issue Resolution Policy

Audience

This policy applies to all Galveston County Health District, Galveston Area Ambulance Authority, and Coastal Health & Wellness (collectively “the District”) employees.

Policy

The District, in compliance with applicable federal and state laws and regulations, does not discriminate against individuals on the basis of race, color, national origin, sex, age, religion, disability, sexual orientation, veteran status, or genetic information. This includes, but is not limited to, employment and access to District programs, facilities, and services. In some circumstances, the District may be required to notify state and federal offices of discrimination allegations and/or complaints.

The District recognizes that individuals may have differences that require prompt and appropriate resolution. The District is committed to the establishment and operation of an internal complaint/issue resolution process that allows for resolution of work-related issues at the lowest appropriate level of supervision.

Use of the complaint/issue resolution processes will not affect an employee's at-will status and is not intended to interfere with the ability of supervisors to process corrective actions according to the *Corrective Action* policy.

Informal Complaint/Issue Resolution

The informal complaint/issue resolution process is available to provide employees an opportunity to present work-related complaints or issues that do not involve illegal activities such as discrimination, sexual harassment, or theft.

Supervisor and Employee Responsibilities

Problems and misunderstandings are expected to be worked out when possible between employees. If the employees have attempted to discuss the problem and do not feel the problem is resolved, either employee may go to the next lowest appropriate level of supervision to discuss and try to resolve the issues.

To this end, the District endorses an “open door” policy. Supervisors are instructed to be available to employees under their span of management and if an employee requests an appointment to discuss work-related issues. It is the supervisor and employee’s responsibility to try and resolve work-related issues as they arise.

An *open door* policy promotes things such as:

- early on-site problem solving;
- timely answers to questions;
- flexibility; and
- the sharing of information on options available to the employee.

Since employees and supervisors are usually closer to the situation, they may already be aware of the problem(s) and can provide new facts or a different perspective that may be helpful.

Employees are expected to follow the chain of command when utilizing the informal complaint/issue resolution process.

The supervisor(s) to whom the informal complaint or issue is directed must investigate the matter, meet with the employee, and respond to the employee's complaint or issue in a timely manner. Supervisors at all levels are expected to utilize the GCHD Investigation Form whenever possible to document any complaint or issue, investigation notes and other pertinent information to ensure conformity and consistency in the resolution of documentation. Upon resolution, the Investigation Form shall be given to Human Resources for appropriate archiving. If an employee is not satisfied with the supervisor's response and wants to talk to someone else, he/she may take the concern/issue to the next higher level of supervision.

Human Resources is available to provide counseling and/or technical assistance to supervisors and employees in an attempt to resolve work-related issues at the lowest possible level.

Formal Complaint/Issue Resolution

The formal complaint/issue resolution process is available for addressing complaints involving illegal activities such as discrimination, sexual harassment, theft, retaliation/intimidation, other alleged violations of employment law, or violations of policy and/or procedure.

Employee Responsibilities

The employee is to complete the *Employee Formal Complaint* form and submit it directly to the Human Resources Director, or the Chief Compliance Officer.

Time Frames

An employee may file a complaint in a timely manner from the date of the occurrence that caused the issue in dispute or when the employee becomes aware of the issue in dispute. The filing date will be the date the complaint is received by the Human Resources Director or Chief Compliance Officer. The Human Resources Director and/or Chief Compliance Officer will review the information and a determination will be made as to whether the complaint is substantiated or unsubstantiated within ten (10) business days from the date on which the complaint is received.

Confidentiality

Information related to the complaint resolution process and issues discussed with the Human Resources Director and/or Chief Compliance Officer will be treated as confidential. However, the ability to maintain such confidentiality may be limited by law or by the best interests of the District, the employee or other employees.

False Reporting

Any employee who makes an intentionally false accusation of harassment or discrimination is subject to corrective disciplinary action up to and including suspension or dismissal.

Investigation of Complaints

All investigations of formal complaints will be conducted as discreetly as possible. Investigations will be conducted by the Human Resources Director and/or the Chief Compliance Officer. The investigation may include, but is not limited to, interviews with witnesses and discussions with the involved parties.

After the investigation is completed, if necessary, immediate and appropriate corrective measures will be taken based on the GCHD *Corrective Action Policy*.

If findings support the charge against the accused employee, that employee will be subject to corrective disciplinary action up to and including suspension or dismissal.

Retaliation

An employee will not be retaliated against for using the complaint resolution process. Any District employee who retaliates against another employee for this reason will be in violation of District policy and subject to corrective disciplinary action up to and including suspension or dismissal.

Appeals

Since the District complaint process is an internal process, final actions are not subject to appeal and employees may not file multiple complaints based upon the same set of facts.

Forms

- *Employee Formal Complaint*
- *GCHD Investigation Form*

Hiring Policy

-Last Approved
UBOH: 07/29/2020
-Effective: 03/19/2003

Audience

This policy applies to all Galveston County Health District, Galveston Area Ambulance Authority, and Coastal Health & Wellness (collectively “the District”) employees and those seeking employment with the Health District.

Policy

The District will recruit and select qualified applicants for each position in compliance with applicable federal and state laws and regulations and will not discriminate against individuals on the basis of race, color, national origin, sex, age, religion, disability, sexual orientation, veteran status or genetic information. This includes employment policies, practices, and procedures, including, but not limited to, hiring and firing; compensation, assignment, or classification of employees; transfer, promotion, layoff, or recall; job advertisements; recruitment; testing; use of company facilities; training and apprenticeship programs; fringe benefits; pay, retirement plans, and disability leave; or other terms and conditions of employment.

In some circumstances, the District may be required to notify state and federal offices of discrimination allegations and/or complaints.

The District believes that hiring competent and qualified employees is a fundamental business need that must be met in order to effectively perform its mission. Nothing in this policy alters the District’s status as an at-will employer, or the status of all District employees as at-will employees.

Vacant positions will be marketed as extensively as possible and financially feasible. Vacant position notices will be posted for a minimum of a one-week period (5 business days). Exceptions to the posting requirements may include but are not limited to internal positions that are specific to the District and will be approved by the Human Resources Director based on business requirements.

All selected candidates will receive a contingent offer of employment, pending background checks and pre-hire drug/alcohol testing. Background checks will be conducted by the Human Resources department and may include criminal history, credit history, and motor vehicle driving record, depending on the position. Formal offers of employment will be made by the Human Resources Director, or designee, upon satisfactory completion of required background checks and testing.

Applications and resumes received for vacant positions posted will be kept on-site for the remainder of the calendar year in which they are received. Human Resources will follow all state record retention laws for applications and resumes.

Violation

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

Communication Policy

Audience

This policy applies to all Galveston County Health District, Galveston Area Ambulance Authority, Coastal Health & Wellness and Animal Resource Center (collectively “the District”) employees, volunteers, students and contractors (business associates).

Policy

Employees are expected to communicate accurately and appropriately and to address their work-related complaints and issues at the lowest possible level and through the District’s supervisory chain. (Reference: Employee Complaint/Issue Resolution policy)

This policy refers to communication in the workplace by employees in their official employee capacity. Employees should realize that when they articulate their opinions, while not on official duty at the District, these opinions might be construed as official opinions of the District.

Official Communication

The District maintains an open environment in which employees can feel comfortable communicating unofficially throughout the organization. However, *formal and official business and administrative issues* should be communicated accurately and appropriately through official channels.

Elected Officials

Those employees/managers who receive calls from elected/county officials or board members, etc., are required to document the call by writing a brief summary of the call and then forwarding this information to the Chief Executive Officer (CEO) or designee.

Media

The Director of Communications serves as the official District spokesperson and conveys the official District position on issues of significance or a controversial or sensitive nature.

Management may receive and respond directly to media inquiries of routine nature, including, but not limited to:

- General questions about a department's function;
- Meeting times and locations;
- Special events planned by a department; or
- Questions about a particular program offered by a department

Following the interview, the department manager shall provide the Director of Communications a brief written summary of the interaction via e-mail.

In cases of critical significance to the District, the Director of Communications will work with department managers to develop a "fact sheet" to detail the known facts of the situation and summarize the District’s position. (Reference: Risk Communication Guidelines)

In the event of a crisis or emergency situation, the CEO may designate the Director of Communications to handle all contacts with the media, which will coordinate the information flow from the District to the

public. In such situations, all departments should refer calls from the media to the Director of Communications.

E-mail

E-mail is considered an official means of routing communications among internal and external parties that have access to e-mail. Those employees without access to e-mail will receive communications through their supervisor. Confidential personnel or patient information must be marked confidential and/or a confidentiality statement must be included in the body of the e-mail. In addition, all employees with the designated encryption functionality must encrypt all emails that are sent to external recipients outside the organization that may include confidential, sensitive or protected information. An out of office message should be set up on e-mail to inform customers/employees when an employee is out of the office for an extended period of time. The message should also state who to contact in case of an emergency. (Reference: Computer and Digital Communications Usage policy and HIPAA policy)

Telephone and Voicemail

The District's telephone and voicemail systems are used for both internal and external communications. Unless other notification measures are taken, an out of office message should be recorded on voicemail to inform customers/employees when an employee is out of the office for an extended period of time. The message should also state who to contact in case of an emergency. (Reference: GCHD Voicemail: Standard Voicemail Procedures)

District issued cellular phones are issued to assist those employees with a job-related need and should only be used for business purposes. Those employees are expected to respond to public health disasters and emergencies and are expected to keep their cell phones on and batteries charged at all times to respond to calls. (Reference: Computer and Digital Communications Usage policy)

Memorandum/Letter

Official letterhead is considered an official means of communication among internal and external parties. The official letterhead is created for use by the Executive Office and can only be changed by the Executive Office. It can be located on the District's extranet site.

Internet

The District's Internet site consists of factual, accurate, public information to assist the public in getting answers to their questions. The Internet is updated as needed. Employees are encouraged to review the District's Internet site periodically for updates.

Extranet

The District's extranet site consists of useful information for employees to assist them in carrying out their jobs. The extranet site is for employee use only and is updated as needed. Employees are encouraged to review the District's Extranet site periodically for updates.

Social Media

Use of social media for official District purposes raises legal issues that are unique to public agencies and generally do not affect private persons or entities. Therefore, all District use of social media shall be in accordance with: this policy and all applicable local, state and federal laws; policies of the District pertaining to the use of computers, electronic communications and respectful workplace; and all other applicable District policies and procedures.

Background

Social media refers to media designed to disseminate content (information, images, audio or video) through social interaction, created using highly accessible web-publishing techniques. The term includes social network sites that allow individuals and organizations to construct a profile and create and share content with others. Examples of social media include, but are not limited to:

- video-sharing sites, such as YouTube and TikTok
- blogs;
- photo-sharing sites, such as Flickr, Instagram and Snapchat;
- podcasting;
- social networks, such as Facebook, MySpace, LinkedIn and Snapchat;
- microblogging and short messaging, such as Twitter; and
- online discussion groups

Establishing a Social Media Presence

Use of social media shall support the objectives of the District and present the District in a positive and professional manner. The Director of Communications is responsible for overall management of District social media presence and strategies for engagement. To ensure consistent and appropriate use, departments that wish to establish a presence in social media must request approval from the Chief Executive Officer (CEO) through the Director of Communications. Information to be provided includes:

- Goals and objectives for the social media platform;
- Intended audiences;
- Social networks or social media venues to be used;
- How the social media presence supports the District's social media goal;
- Personnel assigned to implementation and ongoing support (posting, monitoring, etc.); and
- Department heads must read and ensure compliance with all terms of use for any social media site or service prior to establishing a presence.

Posting Information

Only the Director of Communications and employees authorized by the CEO or ARC Director, are authorized to post content on a social media venue on behalf of the District. Staff posting content may only post content that has been approved for public dissemination and is within that staff member's areas of expertise and departmental role. Staff using social media on behalf of the District must be truthful at all times about who they are and their role with the District.

The tone of social media content is often informal; however, staff is encouraged to adhere to a professional writing style whenever possible. Linking to related District web pages is strongly encouraged whenever practical and appropriate.

The District must either own the copyright to or have a valid license (written permission) to use content, including images, videos, sound records, etc., posted to its social media sites.

Prohibited Content

All content posted by District staff to social media sites shall support the District's social media goals described in this Policy. Staff is prohibited from posting content about:

- Potentially controversial issues;

- Actual or potential legal claims, lawsuits or other legal issues;
- Personnel matters;
- Budget planning and priorities;
- Personal opinion on public health issues or any other issue;
- Political issues, including opinions about elected officials or candidates for elective office and issues appearing on an election ballot;
- What a board member might think about an issue or speculation about a potential decision they might make; or
- Emergency situations (unless the person authorized to post content represents public health preparedness or emergency medical services)

District posted content may not include content that promotes religious beliefs or philosophies, is illegal under federal, state or local laws, or is defamatory (i.e. slander or libel) or indecent, or promotes hate, tobacco, alcohol, profanity, obscenity or pornography.

District staff may not make disparaging remarks about municipal staff or officials nor post content that would tend to discredit municipalities or officials.

Open Records Act

All content posted on social media sites may be subject to the Texas Open Records Act.

Personal Use of Social Media

Employees are reminded that information posted on personal websites or social media venues can be viewed by members of the public, by others in the District, by taxpayers, and customers or clients of the District. Employees are encouraged to be respectful and avoid disparaging remarks or images about these individuals, the District or co-workers. Employees who use personal websites or social media are expected to refrain from presenting themselves as representatives of the District or from portraying the District in a negative manner. Employees are encouraged to show a duty of loyalty and respect to the District and co-workers. Excessive personal use of social media during work hours is prohibited.

The District is not responsible for any repercussions the employees' content may generate.

Employees are prohibited from sharing confidential and sensitive information, particularly that is found within the District internal networks, to the outside online community. Divulging information that is financial, operational, related to clients and legal in nature is prohibited. This includes sharing information (text or photo) on social media platforms.

Dishonorable content such as racial, ethnic, sexual, religious and physical disability slurs are not tolerated.

Internal Emergency Situations Communications

In the event of an emergency situation, information about District delayed openings or closures will be disseminated to employees using any of the following methods: E-mail, employee inclement weather phone line (409) 938-2489 or automated phone calls. Employees should tune into local media, including KTRH 740 AM, for information regarding disaster conditions, etc. (Reference: [All Hazards Plan](#))

Employee Responsibilities

Every employee is responsible for:

- understanding and following this policy;
- adhering to and signing a confidentiality agreement; and
- consulting with his/her supervisor for guidance on the information addressed in this policy.

Supervisor Responsibilities

Every supervisor is responsible for:

- understanding and following this policy;
- ensuring that this policy is carried out in a uniform manner;
- counseling an employee who needs guidance or redirection in these areas;
- assuring that all employees under his/her supervision sign a confidentiality agreement; and
- taking or recommending appropriate corrective action when necessary.

Violation

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

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COASTAL HEALTH & WELLNESS

GOVERNING BOARD

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

Governing Board

August 2020

Item#5

FTCA Deeming Notice for Calendar Year 2021

FTCA DEEMING NOTICE NO.:
1-F00000767-20-01

GRANT NUMBER:
H80CS00344



Coastal Health & Wellness
9850 EMMETT F LOWRY EXPY STE A STE 108
TEXAS CITY, TX77591

Dear Kathy Barroso:

The Health Resources and Services Administration (HRSA), in accordance with the Federally Supported Health Centers Assistance Act (FSHCAA), as amended, sections 224(g)-(n) of the Public Health Service (PHS) Act, 42 U.S.C. §§ 233(g)-(n), deems Coastal Health & Wellness to be an employee of the PHS, for the purposes of section 224, effective 1/1/2021 through 12/31/2021.

Section 224(a) of the PHS Act provides liability protection under the Federal Tort Claims Act (FTCA), 28 U.S.C. §§ 1346(b), 2672, or by alternative benefits provided by the United States where the availability of such benefits precludes a remedy under the FTCA, for damage for personal injury, including death, resulting from the performance of medical, surgical, dental, or related functions by PHS employees while acting within the scope of such employment. This protection is exclusive of any other civil action or proceeding. Coverage extends to deemed entities and their (1) officers; (2) governing board members; (3) full- and part-time employees; and (4) contractors who are licensed or certified individual health care practitioners providing full-time services (i.e., on average at least 32½ hours per week for the entity for the period of the contract), or, if providing an average of less than 32½ hours per week of such service, are licensed or certified providers in the fields of family practice, general internal medicine, general pediatrics, or obstetrics/gynecology. Volunteers are neither employees nor contractors and therefore are not eligible for FTCA coverage under FSHCAA.

This Notice of Deeming Action (NDA) is also confirmation of medical malpractice coverage for both Coastal Health & Wellness and its covered individuals as described above. This NDA, along with documentation confirming employment or contractor status with the deemed entity, may be used to show liability coverage for damage for personal injury, including death, resulting from the performance of medical, surgical, dental, or related functions by PHS employees while acting within the scope of such employment.

In addition, FTCA coverage is comparable to an "occurrence" policy without a monetary cap. Therefore, any coverage limits that may be mandated by other organizations are met.

This action is based on the information provided in your FTCA deeming application, as required under 42 U.S.C. § 233(h), with regard to your entity's: (1) implementation of appropriate policies and procedures to reduce the risk of malpractice and litigation; (2) review and verification of professional credentials and privileges, references, claims history, fitness, professional review organization findings, and licensure status of health professionals; (3) cooperation with the Department of Justice (DOJ) in the defense of claims and actions to prevent claims in the future; and (4) cooperation with DOJ in providing information related to previous malpractice claims history.

Deemed health centers must continue to receive funding under Section 330 of the PHS Act, 42 U.S.C. § 254b, in order to maintain coverage as a deemed PHS employee. If the deemed entity loses its Section 330 funding, such coverage will end immediately upon termination of the grant. In addition to the relevant statutory and regulatory requirements, every deemed health center is expected to follow HRSA's FTCA-related policies and procedures, which may be found online at <http://www.bphc.hrsa.gov>.

For further information regarding FTCA, please contact the Health Center Program Support (Formally the BPHC Helpline) at 877-464-4772, option 1, or using the [BPHC Contact Form](#).

A printer version document only. The document may contain some accessibility challenges for the screen reader users. To access same information, a fully 508 compliant accessible HTML version is available on the HRSA Electronic Handbooks in the FTCA Folder. If you need more information, please contact the BPHC Helpline at 877-974-BPHC (2742); Weekdays from 8:30 AM to 5:30 PM ET.

1. ISSUE DATE: (MM/DD/YYYY) 8/13/2020
2a. FTCA DEEMING NOTICE NO.: 1-F00000767-20-01
2b. Supersedes: []
3. COVERAGE PERIOD: From: 1/1/2021 Through: 12/31/2021
4. NOTICE TYPE: Renewal
5. ENTITY NAME AND ADDRESS: Coastal Health & Wellness 9850 EMMETT F LOWRY EXPY STE A STE 108 TEXAS CITY, TX 77591
6. ENTITY TYPE: Grantee
7. EXECUTIVE DIRECTOR: Kathy Barroso
8a. GRANTEE ORGANIZATION: Coastal Health & Wellness
8b. GRANT NUMBER: H80CS00344

DEPARTMENT OF HEALTH AND HUMAN SERVICES
HEALTH RESOURCES AND SERVICES ADMINISTRATION



**NOTICE OF DEEMING ACTION
FEDERAL TORT CLAIMS ACT AUTHORIZATION:**
Federally Supported Health Centers Assistance Act(FSHCAA), as amended,
Sections 224(g)-(n) of the Public Health Service (PHS) Act, 42 U.S.C. § 233(g)-(n)

9. THIS ACTION IS BASED ON THE INFORMATION SUBMITTED TO, AND AS APPROVED BY HRSA, AS REQUIRED UNDER 42 U.S.C. § 233(h) FOR THE ABOVE TITLED ENTITY AND IS SUBJECT TO THE TERMS AND CONDITIONS INCORPORATED EITHER DIRECTLY OR BY REFERENCE IN THE FOLLOWING:

- a. The authorizing program legislation cited above.
- b. The program regulation cited above, and,
- c. HRSA's FTCA-related policies and procedures.

In the event there are conflicting or otherwise inconsistent policies applicable to the program, the above order of precedence shall prevail.

10. Remarks:

The check box [x] in the supersedes field indicates that this notice supersedes any and all active NDAs and rescinds any and all future NDAs issued prior to this notice.

Electronically signed by Angela Damiano-Holder, Deputy Associate Administrator for Primary Health Care on: 8/13/2020 10:34:39 AM

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COASTAL HEALTH & WELLNESS

GOVERNING BOARD

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

**Governing Board
August 2020
Item#6
Executive Reports**

- a) Executive Director**
- b) Medical Director**
- c) Dental Director**



A monthly newsletter about Galveston County's Community Health Center, Coastal Health & Wellness.

Centers for Disease Control and Prevention

MMWR | KNOW SOMEONE WITH MEMORY LOSS?

SUBJECTIVE COGNITIVE DECLINE IN ADULTS

1 IN 9 ADULTS AGE 45 OR OLDER REPORT CONFUSION OR MEMORY LOSS

50% REPORT ACTIVITY LIMITATIONS:

- COOKING
- CLEANING
- TAKING

MEMORY LOSS IS NOT A NORMAL PART OF AGING

MORE THAN 1/2 OF PEOPLE WITH MEMORY LOSS HAVE NOT TALKED TO A HEALTHCARE PROVIDER

TALK TO A HEALTHCARE PROVIDER ABOUT

- POSSIBLE TREATMENT
- CARE PLANNING
- MANAGEMENT OF CHRONIC CONDITIONS
- CAREGIVING NEEDS

Healthy lifestyle helps seniors as they age

Americans are living longer, in great numbers, and are enjoying active lives. In fact, 10,000 people are turning 65 a day.

With that comes challenges in aging.

Eating healthy, staying active and keeping up regular doctor checkups are just a few ways seniors can maintain their health as they age.

Coastal Health & Wellness (CHW) celebrates September as Healthy Aging Month, designed to highlight the positive aspects of growing

older and the importance of improving physical and mental well-being.

Aging can lead to an increase in chronic diseases including hypertension, diabetes, arthritis and dementia. Alzheimer's disease, the most common type of dementia, is the fifth leading cause of death among older Americans. Older adults also face more challenges with everyday living activities like preparing meals and house-keeping.

It's never too late to take

control of your health, whether it's improving eating habits, being more active, re-connecting with friends and building social networks, or making those important doctor appointments you've been putting off.

Thanks to advances in science and technology, many can expect to live long lives, well into their 80s and possibly older. Living longer carries with it a greater chance of developing chronic diseases like Alzheimer's, heart disease or cancer. So,

it's important to stay in good health to live longer and have healthier lives.

Below are tips on living a healthier lifestyle as you age:

- Eat healthy – Consume a diet of low-fat protein and dairy, whole grains, fresh fruits and vegetables. Cut down on unhealthy foods that are processed and high in sugar and fat like cookies, soda and chips, which can lead to serious health problems.

As you age, your body

Aging page 7



Serious health risks tied to childhood obesity

About one in five children in the United States is considered obese.

While there is no simple solution to this public health problem, there are ways to support children on their journey to good health.

September marks National Childhood Obesity Awareness Month and provides a chance to learn more about this serious health condition.

Children who are obese are at a higher risk for having other chronic health conditions and diseases, according to the Centers for Disease Control and Prevention (CDC).

Those include asthma, sleep apnea, bone and joint problems and type 2 diabetes. They also have more risk factors for heart disease like high blood pressure and high cholesterol than their normal weight peers.

Children who are overweight or obese as preschoolers are five times as likely as normal-weight children to be overweight or obese as adults.

“Obesity in the United States is a problem. Specifically, the rate of obesity in children is alarming, and it’s growing,” said Eileen Dawley, RN, chief nursing officer. “Adults who are obese have a higher risk for diseases like type 2 diabetes, heart disease and many types of cancer.”

There are several factors that may lead to childhood obesity: too much time spent being inactive; lack of sleep; lack of places to go to get physical activity; easy access

to inexpensive, high calorie foods and sugary beverages; and lack of access to affordable, healthier foods.

“Parents can help and set an example for their children. Choose nutritious meals with fruits and veggies and encourage your children to drink more water as a no-calorie alternative,” Dawley said.

Provide vegetables, fruits and whole-grain products and choose lean meats like poultry, fish, lentils and beans for protein. And, remember portion size. Make sure drinking water is always available as a no-calorie alternative to sugary beverages



ages and limit juice intake. The idea is to balance calories from foods and beverages with the calories children use through physical activity and growth.

“Get active with your children. Find activities you enjoy as a family,” Dawley said. It’s important that children get the recommended amount of physical activity every day.”

Children age 2 and older should get at least 60 minutes of enjoyable, varied, moderate-intensity physical activity every day.

Being active helps you prevent chronic diseases, improve heart and lung health, build strong bones and muscles, reduce fat, improve sleep, decrease stress, fight depression and increase your confidence and self-esteem.

“Small changes can make a difference. Together, we can all do our part to prevent childhood obesity,” Dawley said.

BEING ACTIVE

helps you prevent chronic diseases, improve heart and lung health, build strong bones and muscles, reduce fat, improve sleep, decrease stress, fight depression and increase your confidence and self-esteem!

CHILDHOOD OBESITY



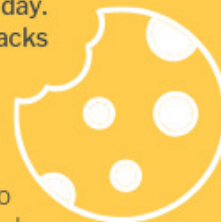
Childhood obesity is now the #1 health concern among parents in the United States, topping drug abuse and smoking.

Over the past 30 years, child obesity rates in America have tripled. Today nearly 1 in 3 Americans are overweight or obese.

FOOD FOR THOUGHT

30 years ago, kids ate 1 snack a day. Today, the trend is nearing 3 snacks a day!

That adds up to an extra 200 calories a day! Encourage children 2 and older to eat at least 5 servings of fruits and veggies a day.



GET MOVING



All children age 2 and older should get at least 60 minutes of enjoyable, varied, moderate-intensity physical activity every day.

When it comes to sports, only 12.6% of children who participate are overweight. 18.1% of children who don't participate are overweight.

SCREEN TIME

90% of the ads a child might see on Saturday morning advertise food and drinks that are high in fat, sodium, and added sugars.

8 to 18 year olds spend an average of 7.5 hours a day on screen time, including tv, computers, videogames, cell phones and movies.



Number of new COVID-19 cases decreasing in county

The number of new COVID-19 cases being reported in Galveston County has decreased recently with 193 new cases reported Aug. 23-29.

At the same time, testing throughout the county is also decreasing with 4,581 tests reported Aug. 23-29, down from more than 7,000 reported the week prior. As of Aug. 30, Galveston County Health District has reported a total of 10,543 cases with 2,695 of those active and 7,751 cases are recovered.

On Aug. 11, the health district began including presumed recovered cases in its recovered cases data. Presumed recovered cases are defined as 28 days or more since their first positive PCR or released from hospital and not deceased or in a nursing home.

The health district has also reported a steady decrease in its weekly average positivity rate with 4 percent of those tested Aug. 23-29 as positive, compared to 6 percent Aug. 16-22 and 8 percent the two weeks prior to that.

Epidemiology and Public Health Emergency Preparedness (PHEP) staff continue to investigate cases of COVID-19 and conduct contact tracing.

Galveston County continues to partner with UTMB to offer free COVID-19. Galveston County residents may call 832.632.6731 to make an appointment. A government issued form of identification will be required at the time of testing to verify residency.

Residents are also encouraged to contact their primary care physician for COVID-19 testing if they have come in contact with someone who is COVID-19 positive or are experiencing symptoms including cough, shortness of breath, difficulty breathing or at least two of the following symptoms: fever, chills, repeated shaking with chills, muscle pain, headache, sore throat and new loss of taste or smell.

Those who do not have a primary care provider and want to establish care through Coastal Health & Wellness can call 409.938.2234

For more information on COVID-19, please visit gchd.org/coronavirus or contact the health district's information line at 409.938.7221, open Monday-Friday, 8 a.m.-5 p.m.

WHAT TO DO IF YOU GET COVID-19

- Separate yourself from others.**
 - As much as possible, stay in a specific room and away from other people and pets in your home.
 - If possible, you should use a separate bathroom.
 - If you need to be around other people or animals in or outside of the home, wear a cloth face covering.
- Stay home, except to get medical care.** Call ahead before visiting your doctor.
- Monitor your symptoms.**

COVID-19

GCHD.ORG/CORONAVIRUS

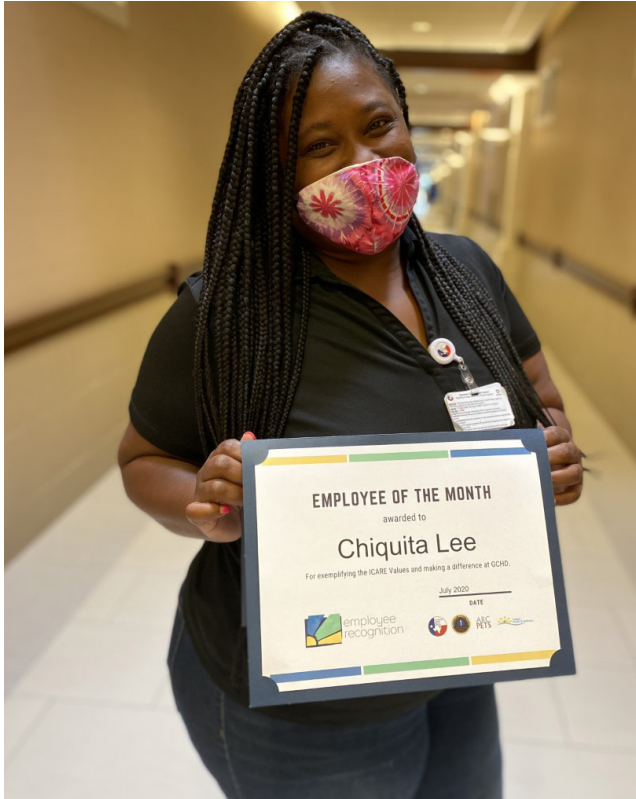
WHAT TO DO IF YOU GET COVID-19

- Cover your coughs and sneezes with a tissue and throw away the tissue.**
- Clean high-touch objects and surfaces everyday.** Avoid sharing personal household items.
- Wash your hands frequently with soap or hand sanitizer.**
- If you are sick, wear a cloth face covering over your nose and mouth.**

SOAP

GCHD.ORG/CORONAVIRUS

GCHD names Employee of the Month



Chiquita Lee

Congratulations, Chiquita Lee on being named the July Employee of the Month! Chiquita, who works in HIV/STD, was nominated for her dedication to Galveston County Health District's (GCHD) values, Integrity, Customer Service, Accountability, Respect, Equality (ICARE).

"Chiquita Lee is a Disease Intervention Specialist in HIV/STD.

What you might not know is that she is responsible for the efficiency and effectiveness of the phone banks during disasters.

Nowhere in her job title would you know that she has this amazing skill, yet when disaster strikes she takes time out of her weekend or evening to organize and operate the phone bank, with the help of a team of health district and CHW employees, to provide support for the residents of our county in their time of need.

Sometimes enduring insults and highly charged emotions, she handles these circumstances with professionalism and grace. Not only did Ms. Lee create a process and improve efficiency through her efforts with the phone bank, she also went outside the scope of her normal duties and went beyond necessary means to assist fellow employees and the public," reads Lee's nomination.

Disasters happen, prepare now *September marks National Preparedness Month*

Galveston County is no stranger to disasters.

While the type may range from hurricane to tropical storm, floods or fires, one thing remains the same. When faced with a disaster, preparing ahead of time is vital to protect your family and property.

September marks National Preparedness Month and the Galveston County Health District (GCHD) encourages you to take time now to prepare for the wide variety of disasters you may face.

This year's theme is "Disasters Don't Wait. Make Your Plan Today." Being prepared can be the difference

between life and death.

Most homeowner and renter insurance policies do not cover flood damage. If you add flood insurance, keep in mind most policies take 30 days to go into effect, so don't wait until it's too late.

Take photos of important documents and personal belongings. Include birth and marriage certificates, immunization records for children and adults, driver license and other photo IDs and Social Security Cards. You also want photo documentation of valuables. It will help you quickly file an insurance claim after a flood, if necessary.

Disasters can be costly. Start now and set aside a small amount of each paycheck to go into a savings account.

Also, keep cash on hand since ATMs and credit card readers may not be available. Cash can help pay for immediate expenses like lodging, food and gas.

And, be sure you put your emergency plan in writing. If evacuating, know where you plan to go. Having a plan in place lets you know everyone in the home is on the same page and prepared.

Develop a family emergency com-

Preparedness page 6

munication plan. It is possible family members may become separated from one another during a disaster, especially during the day when adults are at work and children are at school.

Plan for touching base and getting back together. Practice fire escape plans by having a home drill at least twice a year with everyone in the home.

When it comes to medicine, put prescriptions, emergency contact information for family and doctors, insurance cards and identification together in a plastic bag.

If you haven't already, sign up for alerts and warnings in your area so that you can stay on top of changing conditions.

Now that school has started, update school records and make sure your children know who to contact in an emergency.

Including favorite stuffed animals, board games, books or music in the emergency kit can help comfort children in a disaster.

In the hustle of dealing with a disaster, pets sometimes fall to the end of the list. Plan for pets now.

Have copies of vaccination records, a current photo of your pet, an ample supply of food and water, a carrier or cage, medication, muzzle, collar and leash. You may also want to learn life-saving skills such as CPR and first aid.



In celebration of National Health Center Week, Aug. 9-15, Coastal Health & Wellness hosted a food drive donation drive, benefiting the Galveston County Food Bank.

CHW is grateful to partner with organizations like the food bank, which allows us to continue serving our communities.

this month in Cancer Awareness

Prostate Cancer

Prostate Cancer Facts:

- The most common risk factor is age, the older a man is the greater the risk.
- African American men are more at risk for prostate cancer.
- Different people have different symptoms, some none at all. Problems or changes in urination are more common symptoms.



TEXAS
Health and Human Services

Texas Department of State Health Services

#ProstateCancerMonth

needs less energy and extra fiber in your diet, which can lower risk of heart disease, type 2 diabetes and cancer, and may help keep your colon working the way it should.

- Stay active – Regular exercise can reduce your risk for heart disease, diabetes, arthritis pain and even anxiety and depression.

Aerobic activities get your heart pumping and blood circulating. Strengthening exercises prevents muscle loss. Stretching keeps the body flexible and limber while balancing exercises may help prevent falls as you get older. Find something you love to do and keep with it.

- Walk like you mean it – Walking is great for your health. Be vibrant and healthy. Do you walk slowly because you’ve become lazy or are you afraid you might fall? Make a conscious effort to take big strides, walk with your heel first and wear comfortable shoes. And, remember to stand up straight. Hold in your stomach, shoulders back and chin up!

- Regular checkups – Now is a good time to set annual physical and health screenings. This is the best way to catch an illness or disease before it even starts. Doctors will look at your age, family history, personal medical history and lifestyle habits to determine which tests and screenings are needed. This includes going to the dentist regularly. Your oral health is just as important as taking care of your body.

- Be positive – Complaining? Check yourself right there and change the conversation to something positive. Stay positive in your daily conversations and actions.



WET LATHER SCRUB RINSE



Wet your hands with clean, running water and apply soap.

Lather your hands – front, back, between fingers and under nails.

Scrub your hands for at least 20 seconds.

Want to pass the time? Sing "Happy Birthday" from beginning to end, twice.

Rinse your hands under clean, running water.



WHEN SHOULD I WASH MY HANDS?



Before, during and after preparing food

Before eating food

Before and after caring for someone who is sick

Before and after treating a cut or wound

After blowing your nose, coughing or sneezing

After using the bathroom

After changing diapers

After touching an animal, feed or waste

After touching garbage



SOAP VS HAND SANITIZER



Hand sanitizer can help when you can't use soap, but it only gets rid of **some germs**, not all types!

Be sure to rub the hand sanitizer over **both hands**, entirely, until your hands are **dry**.



WE ARE WORKING

to keep you safe while keeping
your smile healthy!

- **Please wear a face covering** before you enter and while you're in the clinic.
- **Please use hand sanitizer** when you enter the clinic.
- **No food or drinks are allowed** in the clinic waiting room.



- **Please reschedule** if anyone in your household has been sick in the last 2 weeks.
- **Only patients with appointments will be permitted into the office.** Please do not bring anyone with you unless necessary.



- We're going to ask some screening questions related to COVID-19.
- We will take your temperature and ask you to rinse with mouthwash at the beginning of your appointment.
- Please social distance and maintain 6 feet of distance from others at all times.
- Please be patient and allow us enough time for enhanced disinfection between appointments.

Coastal Health & Wellness Updates

Insurance Contract Updates –

Medical

- Dr. McDill (Pending Community Health Choice)

Pending New/Evaluating Contracts:

- Memorial Hermann Health Plan- Contract under review
- Liberty Dental (Texas City) – contract under review
- Patient /Physician and Cooperatives (PPC)- Contract under review
- Oscar Health – Contract under review
- HealthSmart Preferred Care- Pending response from HealthSmart

Other Insurance Updates:

- We are continuing to review insurance contracts and associated HEDIS or quality measures to assure compliance with industry and healthcare standards.

Committees –

Quality Assurance/Risk Management Committee

- The monthly meeting of the QA/Risk Management Committee was held on August 5, 2020. Appointment utilization and no-show rates for the month of July were reviewed. Utilization rates for medical, counseling and dental hygienist appointments fell below the 90% goal, while dental appointments at both the Texas City and Galveston locations reported a 92% utilization rate. No-show rates for medical and dental services were lower than the goal of 20%, averaging 15% for the month, while counseling services averaged 32%.
- Patient satisfaction survey data was also reviewed for the month of July. A total of 76 responses were received. The weighted average score for all categories was 4.49 which was slightly lower than the weighted average score for the quarter ending June 30, 2020.
- Standard monthly and quarterly reports were reviewed and updated nursing guidelines were presented. Results of internal audits included an oral surgery peer review and a distribution of dental services based on HRSA benchmarks over various date ranges. Other items discussed included a review of the process for managing late arrivals; reviewing data collected on recent efforts undertaken to enroll eligible patients into the Healthy Texas Women program; and adding Eliquis to the current formulary.

Infection Control / Environment of Care /Joint Commission Committee (IEJ)

- The monthly meeting of the Joint Commission/Infection Control/Environment of Care Committee was held on August 18, 2020. The committee was provided information regarding registration for a FTCA Risk Management Virtual Conference regarding culture of safety. The Antimicrobial Stewardship Committee presented a report from their June meeting. In addition, updates were provided on fit for duty testing and the status of PPE and hand sanitizer. Other topics discussed included review of infection control audit reports and safety and compliance reports.

Patient Centered Medical Home (PCMH) Committee

- A notice of intent to request PCMH accreditation has been submitted to HRSA.
- The Joint Commission will be conducting a virtual conference on September 9th regarding the Primary Care Medical Home (PCMH) Certification Program. This conference is designed to provide health care professionals with strategies and insights to help an organization be successful in achieving PCMH certification.

HRSA Deliverables / Updates –

- We continue to acquire equipment and supplies budgeted through the Capital Assistance for Hurricane Response and Recovery Efforts (CARE) grant. The total award was \$337,012 and as of 7/31/20, all grant funds have been spent.
- Through 7/31/20, we have expended \$11,192 of the \$23,172 awarded to us by HRSA for one-time quality improvement (QI) funds.
- On 4/23/20, a budget was submitted to HRSA in response to funding awarded through the FY2020 Coronavirus Supplemental Funding for Health Centers. The award was issued 3/19/20 in the amount of \$79,990. As of 7/31/20, \$42,548 has been expended.
- On 5/8/20, a budget was submitted to HRSA in response to funding awarded through the Health Center Coronavirus Aid, Relief, and Economic Security (CARES) Act Funding. The award was issued 4/3/20 in the amount of \$971,360. As of 7/31/20, \$312,460 has been expended.
- On 5/4/20, Coastal Health & Wellness received a notice of grant award from HRSA in the amount of \$280,624 for the FY2020 Expanding Capacity for Coronavirus Testing (ECT). As of 7/31/2020, \$394 has been expended.
- On 8/18/20, HRSA issued a notice of grant award to Coastal Health & Wellness in the amount of \$29,891. The purpose of the FY2020 Health Center Quality Improvement (QI) one-time grant supplement is to support health centers that displayed high levels of clinical quality measure performance in Calendar Year 2019 Uniform Data System reporting to continue to strengthen quality improvement activities, including maintaining or achieving patient centered medical home recognition.
- The 2021 FTCA Notice of Deeming Action for Coastal Health & Wellness was issued by HRSA on 8/13/2020 covering the period from January 1, 2021 to December 31, 2021.
- The federal financial report (FFR) for the grant period ending March 31, 2020 was submitted to HRSA on 7/30/2020.

- Since HRSA site visits were postponed due to COVID-19, HRSA is reaching out to health centers to see if they would be able to participate in virtual site reviews. If a health center is selected for a virtual site review, they will be contacted approximately 4-weeks prior to the review.
- HRSA continues to request that health centers fill out a weekly survey to help track health center capacity and the impact of COVID-19 on health center operations, patients, and staff. HRSA will use the information collected to better understand training and technical assistance, funding, and other health center resource needs.

Miscellaneous Updates –

- In addition to the HRSA grant awards recently received for the COVID-19 response, Coastal Health & Wellness has received provider stimulus payments of \$164,871 to assist with future shortfalls or needs. As of 7/31/2020, we have used \$45,582 to cover COVID expenses related to supplies, leaving a balance of \$119,289.
- A total of 1,424 patients have registered in the new patient portal system (MedFusion) since it was implemented on 7/15/20. Patients are using the new system to send messages; pay bills online; view or download their patient health summary; complete registration forms; and view messages from their provider.
- New Express Check-in signs and drop-off boxes have been installed at both the Texas City and Galveston clinics.
- CHW staff have been in communication with The Resource Group about entering into a contract to provide dental services to HIV/AIDS patients under the Ryan White grant. The contract in the amount of \$75,000 would be in effect until 3/31/21.
- Although the Galveston Housing Authority building is not yet open to the public, we are utilizing the side entrance door to the clinic for patients to enter and exit for in-person services.
- TACHC continues to provide many resources to Health Centers in response to COVID-19. Conference calls/webinars have been very helpful in keeping health centers informed of funding and PPE opportunities to assist in our response efforts.
- The content on the CHW website is currently being reviewed as work begins on the refresh of the current website. This refresh will allow for increased flexibility in our communication with the public. A request for public and stakeholder feedback was recently solicited to aid in our redesign efforts.
- National Community Health Center week was recognized from August 9-15 with informational videos about services offered at Coastal and recent changes made in response to the pandemic to keep both patients and staff safe. Staff also donated food items to the Galveston County Food Bank to highlight this week.

Communications –

- Communication continues to focus on COVID-19 with daily case updates, testing information, prevention and overall education on the ever-changing situation.
- The communications department puts out a case update Monday-Saturday around 5 p.m. that includes an update on all our case numbers with graphics focused on total cases and those who

have recovered. There are also various charts and graphs that break down that same information. This is all shared with communication stakeholders at the county and cities, media and on the health district's website and social media channels.

- The website continues to evolve with COVID-19 information being updated daily. There are pages dedicated to information on the county's confirmed cases, background on COVID-19, testing, resources and communication materials. Messages from the CDC and DSHS are echoed.
- Non-COVID-19 case update related social media posts include:
 - Daily posts focused on stopping of spread COVID-19 through face coverings, social distancing, hand hygiene, etc.
 - Various COVID-19 testing opportunities in the county
 - Caring for someone sick with COVID-19
 - Tips for essential business
 - Messages targeting at-risk populations
 - COVID-19 stress management
 - Thank you for COVID-19 related donations
 - National Health Center Week – photos
 - National Health Center Week – videos (5)
 - National Immunization Awareness Month
 - Diabetes education and management tips
 - Hurricane Preparedness
 - Heat safety tips
 - Heat exhaustion vs. heat stroke
 - #ChewOnThis
 - CHW is hiring
 - #Take10 and stress management
 - CHW services dental
 - Heart disease education
 - Hurricane Laura closure, reopening
 - Oral health care
 - Breast cancer prevention checklist
 - High blood pressure education
 - Dental Assistant of the Quarter, January-March, Beatriz Soliz, RDA
 - Dental Assistant of the Quarter, April-June, Gabriella Lopez, RDA
 - Child check ups

CHW Career Opportunities:

July 23-Aug. 18, 2020

- **Employee Onboarding** – Human Resources conducted new employee orientation for the following employee(s):
 - Caitlin Watson -LVN I - 7/30/20
- **Job Offers** – The following candidate(s) were extended job offers and have future start dates:
 - None at this time
- **Current Vacancies:**
 - CHW Vacancies:
 - CICHSP Specialist
 - LVN full-time temp

- LVN Bilingual full-time
- Medical Unit Receptionist I Bilingual
- Physician or Midlevel Provider
- Nurse Case Manager/Asst Director of Nursing
- Patient Services Specialist

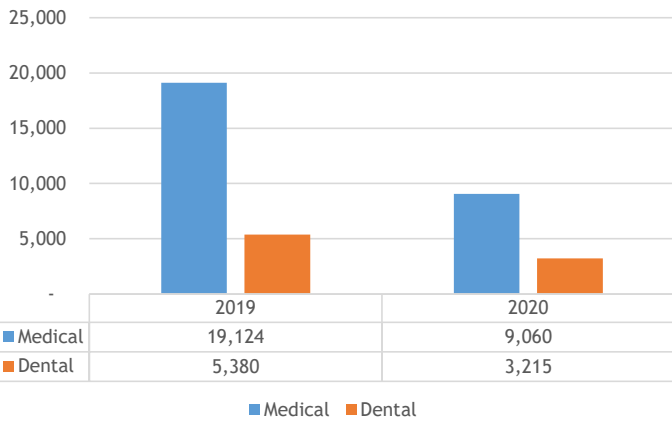
CHW Executive Contract Report: August 2020

1. The National Center for Farmworker Health Organization (NCFH) in conjunction with the Facemasks4Farmworkers Campaign has approved an in-kind grant of 3,000 3-ply surgical masks, 1,000 cloth facemasks and 3,000 nitrile gloves at a value of \$4,230, which will be donated to Coastal Health & Wellness. The purpose and funding of this grant is to provide PPE to meet the basic needs of health center staff and community members during the COVID-19 crisis.
2. A Memorandum of Understanding (MOU) was entered into by and between Gulf Coast Center (GCC) and Coastal Health and Wellness (CHW). The services, provided at no cost to CHW, deliver substance abuse recovery services to patients. GCC and CHW shall coordinate together to provide a full continuum of care to ensure the most comprehensive services are available to adolescents, adults and their families.

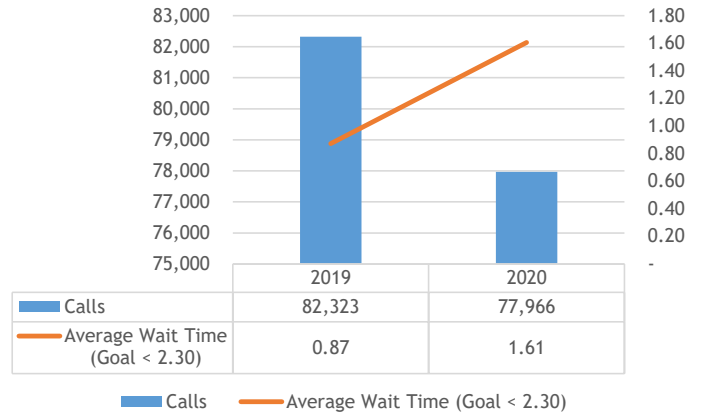
July 2020 Report
YTD Comparison Report (January - July 2020)

Patient Services - Patients Checked-In	2019	2020	% Change
Medical	19,124	9,060	-53%
Dental	5,380	3,215	-40%
Contact Center	2019	2020	% Change
Calls	82,323	77,966	-5.3%
Average Wait Time (Goal < 2.30)	0.87	1.61	84%
Electronic Records	2019	2020	% Change
Record Requests	6,562	6,309	-3.9%
County Indigent Program	2019	2020	% Change
Applied	962	732	-24%
Referrals	1278	669	-48%
Avg Total Patients on Program	259	223	-14%
Case Management	2019	2020	% Change
Referrals	5820	2834	-51%

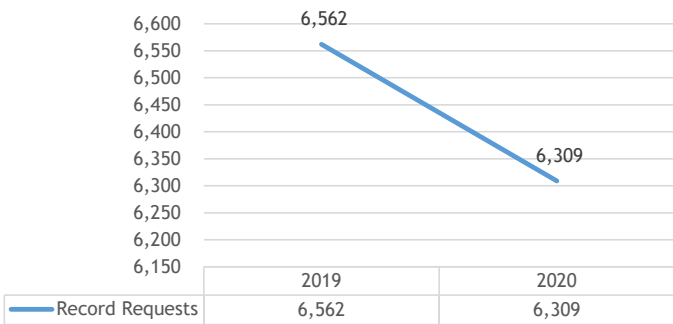
Patient Services-Total Patients Checked-In



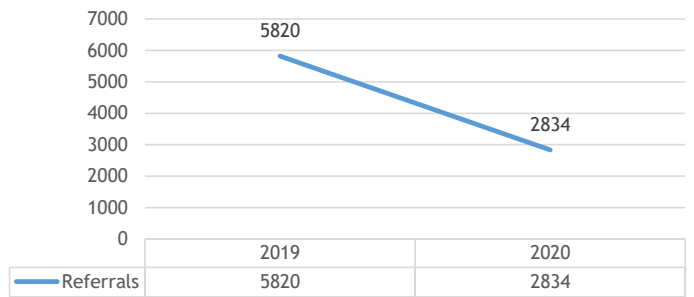
Contact Center - Calls and Wait Time



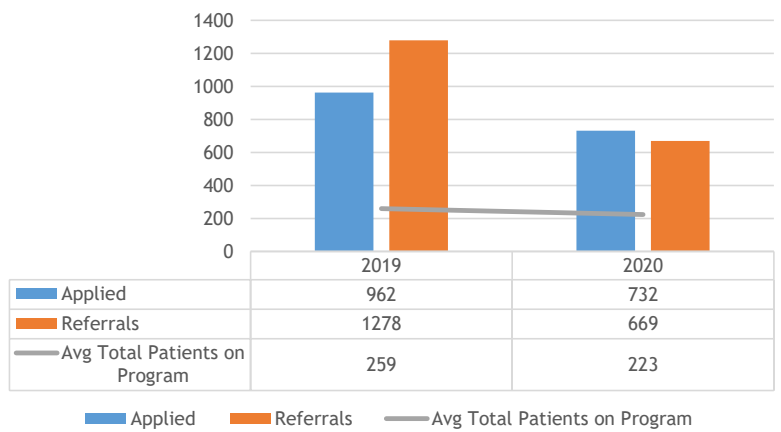
Electronic Record Requests



Case Management Referrals



County Indigent Program



[Back to Agenda](#)



COASTAL HEALTH & WELLNESS

GOVERNING BOARD

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

Governing Board

August 2020

Item#7

Consider for Approval July 2020 Financial Report

COASTAL HEALTH & WELLNESS

Governing Board



FINANCIAL SUMMARY

For the Period Ending

July 31, 2020

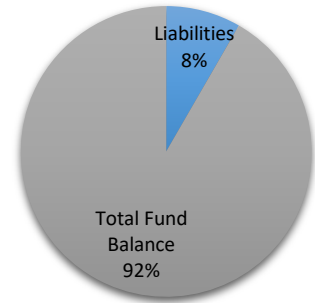
August 27, 2020

GCHD Board Room | 9850-A Emmett F. Lowry Expy. | Texas City, TX 77591

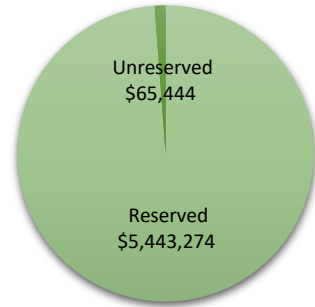
CHW - BALANCE SHEET as of July 31, 2020

	Current Month Jul-20	Prior Month Jun-20	Increase (Decrease)
ASSETS			
Cash & Cash Equivalents	\$5,280,795	\$5,526,864	(\$246,069)
Accounts Receivable	1,524,854	1,488,196	36,659
Allowance For Bad Debt	(993,736)	(966,839)	(26,896)
Pre-Paid Expenses	165,860	216,030	(50,170)
Due To / From	31,534	(29,213)	60,747
Total Assets	\$6,009,308	\$6,235,037	(\$225,730)
LIABILITIES			
Accounts Payable	\$84,196	\$127,962	(\$43,765)
Accrued Salaries	239,702	442,534	(202,833)
Deferred Revenues	176,692	171,955	4,737
Total Liabilities	\$500,590	\$742,451	(\$241,861)
FUND BALANCE			
Fund Balance	\$5,628,397	\$5,628,397	\$0
Current Change	(119,679)	(135,811)	16,132
Total Fund Balance	\$5,508,718	\$5,492,586	\$16,132
TOTAL LIABILITIES & FUND BALANCE	\$6,009,308	\$6,235,037	(\$225,730)

Current Period Assets



Total Fund Balance

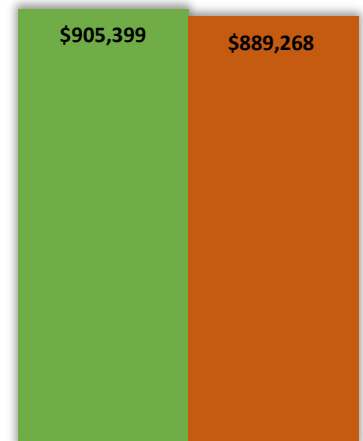


CHW - REVENUE & EXPENSES as of July 31, 2020

	Actual Jul-20	Budgeted Jul-20	PTD Budget Variance	YTD Budget Variance
REVENUE				
County Revenue	\$311,222	\$311,222	\$0	\$0
DSRIP Revenue	0	65,833	(65,833)	(263,333)
HHS Grant Revenue	399,478	260,617	138,861	359,296
Patient Revenue	185,397	317,112	(131,715)	(594,768)
Other Revenue	9,302	10,827	(1,525)	90,724
Total Revenue	\$905,399	\$965,611	(\$60,211)	(\$408,081)
EXPENSES				
Personnel	\$615,803	\$632,211	\$16,408	\$56,520
Contractual	48,040	70,723	22,683	117,454
IGT Reimbursement	0	25,747	25,747	102,990
Supplies	102,276	104,826	2,550	104,783
Travel	345	4,533	4,189	16,597
Bad Debt Expense	26,896	33,605	6,708	54,416
Other	95,907	93,966	(1,942)	(37,367)
Total Expenses	\$889,268	\$965,611	\$76,343	\$415,392
CHANGE IN NET ASSETS	\$16,132	\$0	\$16,132	\$7,311

Current Month Actuals

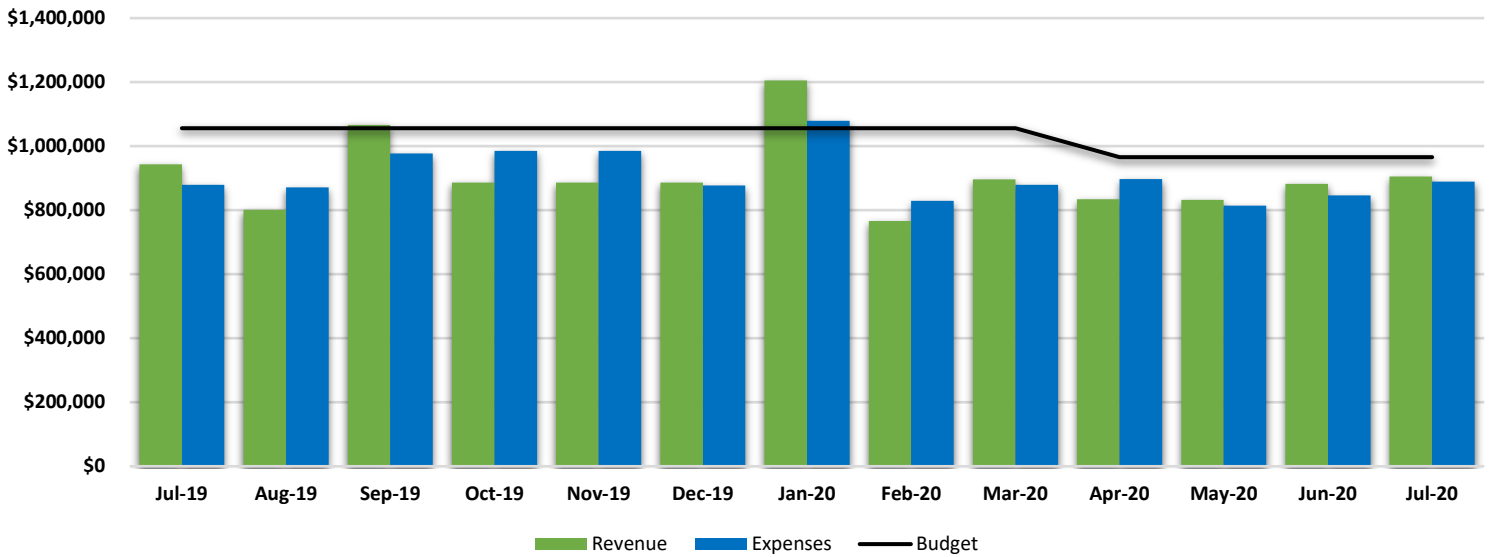
■ Revenue ■ Expenses



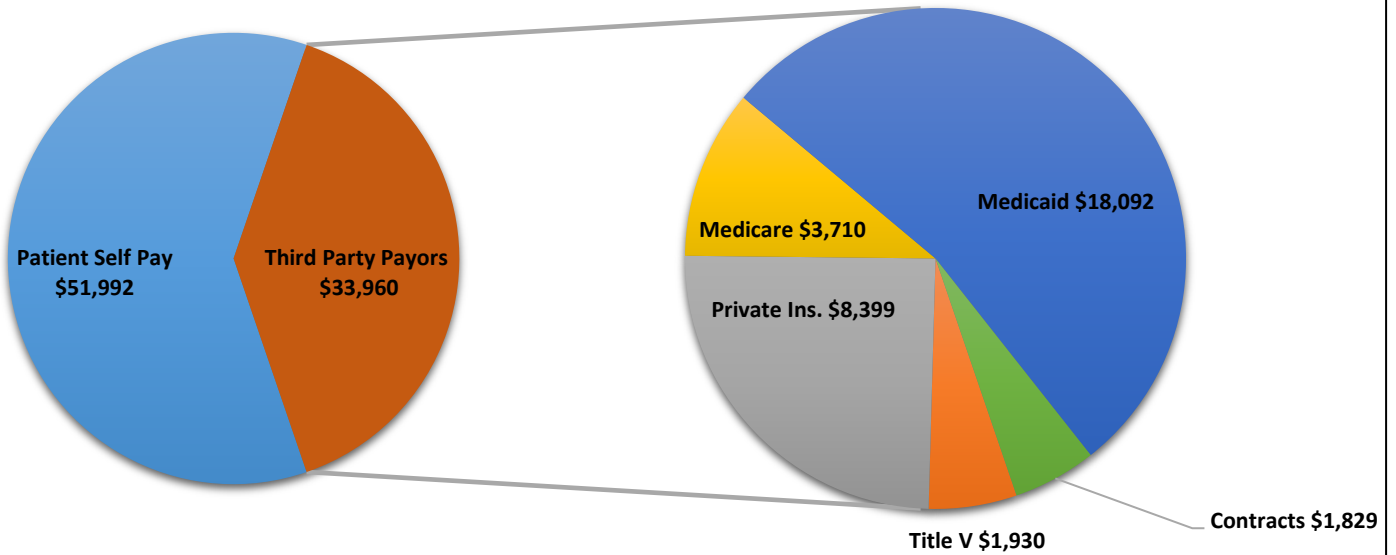
HIGHLIGHTS

- MTD Increase in Fund Balance of \$16,132.
- MTD revenues were (\$60,211) lower than budget. Large decrease in patient visit numbers due to COVID account for reduced patient revenues. Additional funding of \$138,861 from HRSA grants and HHS Stimulus funds accounted for increase in HHS grant revenue. Decrease in Other Revenue of (\$1,525) was from a correction for HHS Stimulus funding being reclassified and Direct Relief funds used to cover IT expenses and dental equipment expenses. DSRIP revenue, which is evenly budgeted across 12 months, accounts for (\$65,833) variance.
- YTD Revenues were (\$408,081) lower than budget. Decreases in patient visits account for (\$594,768) variance, which was offset by higher HHS Grant Revenue of \$359,296, and Other Revenue of \$90,724. DSRIP revenue, which is evenly budgeted across 12 months, accounts for the (\$263,333) budget variance.
- MTD expenses were \$76,343 under budget. Savings were realized across Personnel, Contractual, IGT, Supplies, Travel and Bad Debt, which offset higher expenses in Other of (\$1,942) for IT and Dental equipment. The expenses were covered by Direct Relief funding.
- YTD Expenses were \$415,392 under budget. Savings were realized across all categories except Other. IT equipment expenditures (\$46,129) and dental equipment (\$6,222) account for the Other category budget variance. The expenses were covered by Direct Relief funding.
- YTD Decrease in fund balance of (\$119,679). Total Fund Balance of \$5,508,718 as of 7/31/2020.

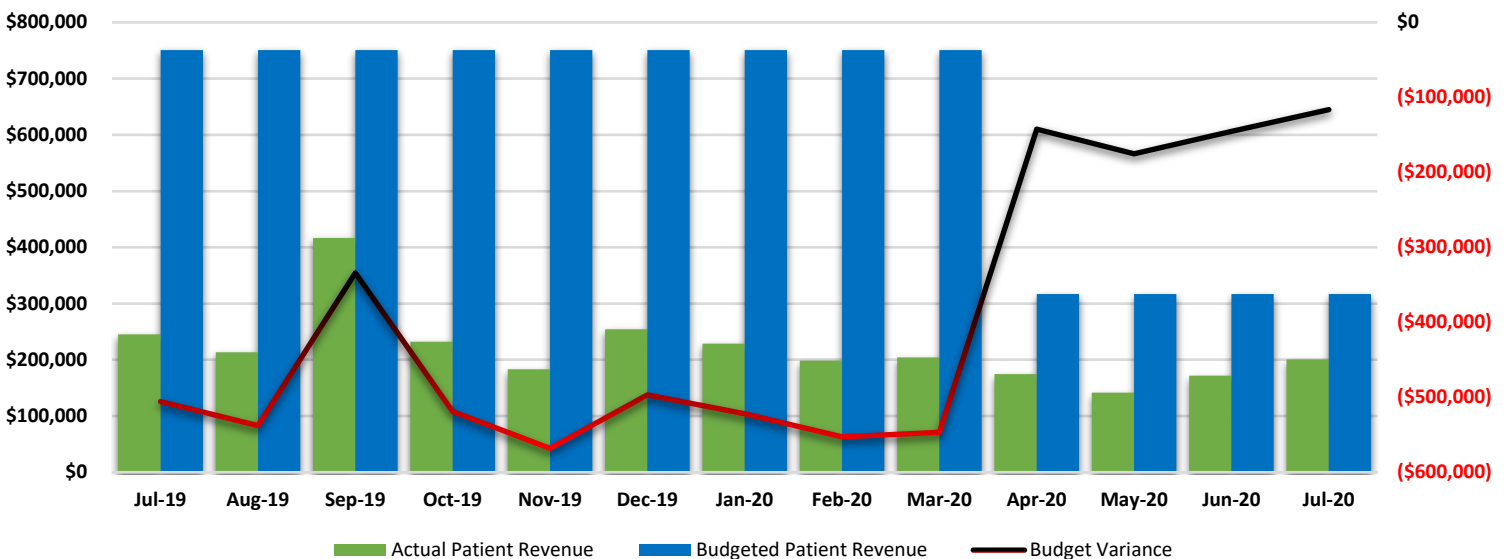
Actual Revenue & Expenses in Comparison to Budget



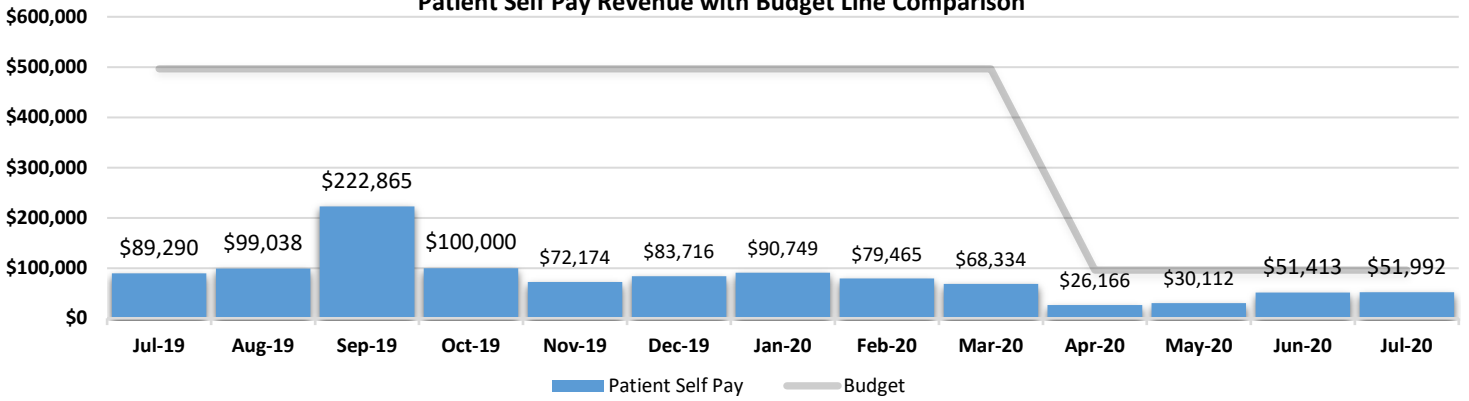
Current Period Patient Revenue with Third Party Payor Contributions Identified



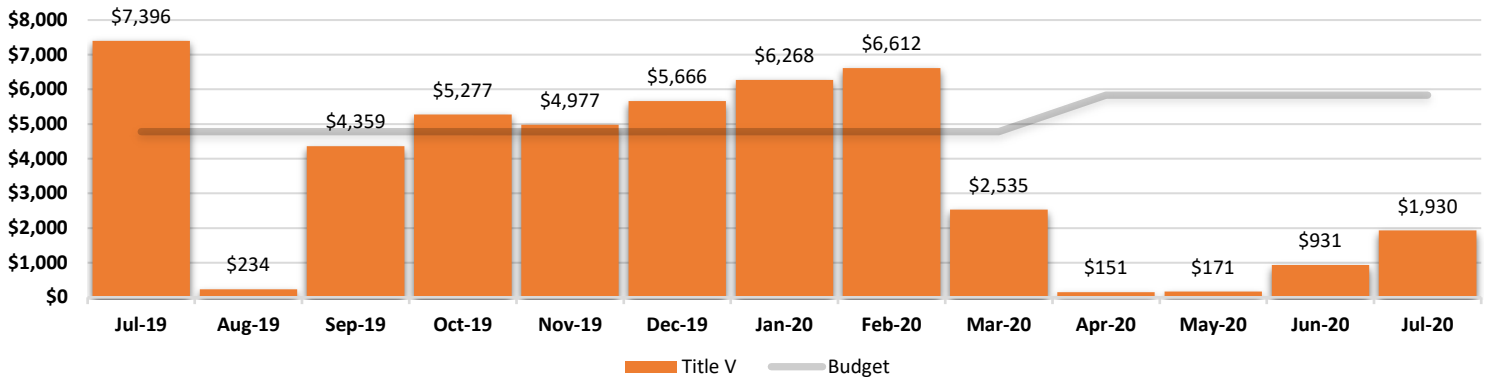
Actual Patient Revenue Rec'd vs Budget with Variance



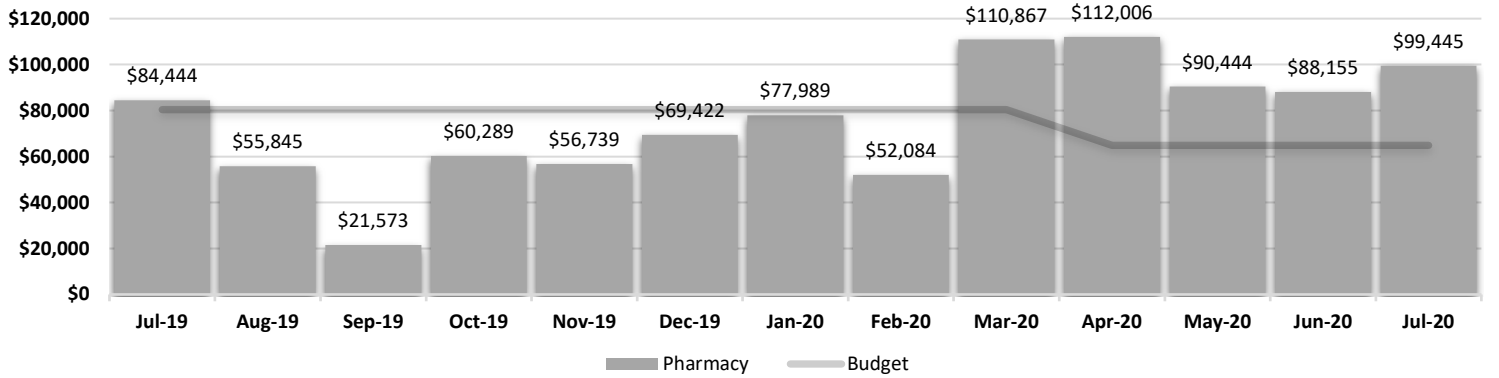
Patient Self Pay Revenue with Budget Line Comparison



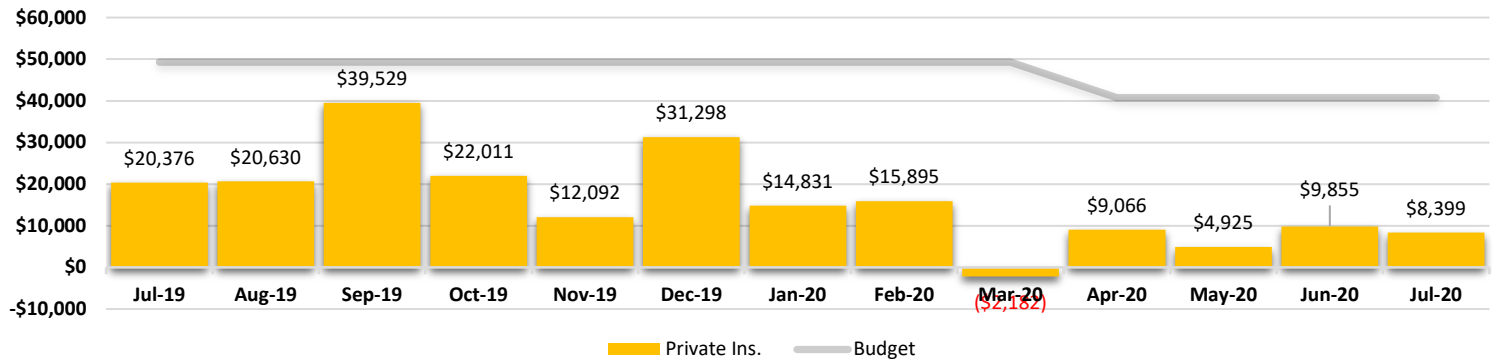
Title V Revenue with Budget Line Comparison



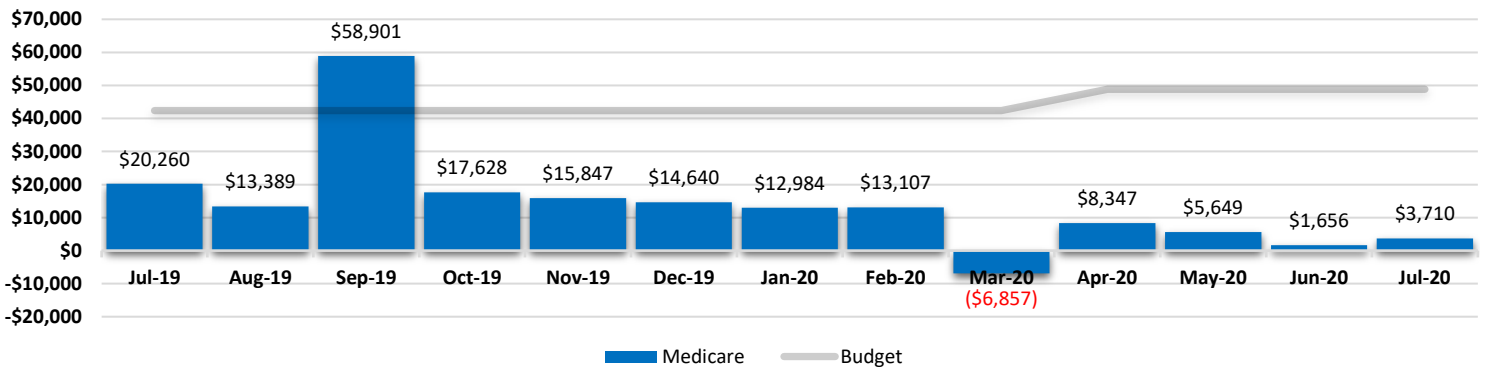
Pharmacy Revenue with Budget Line Comparison



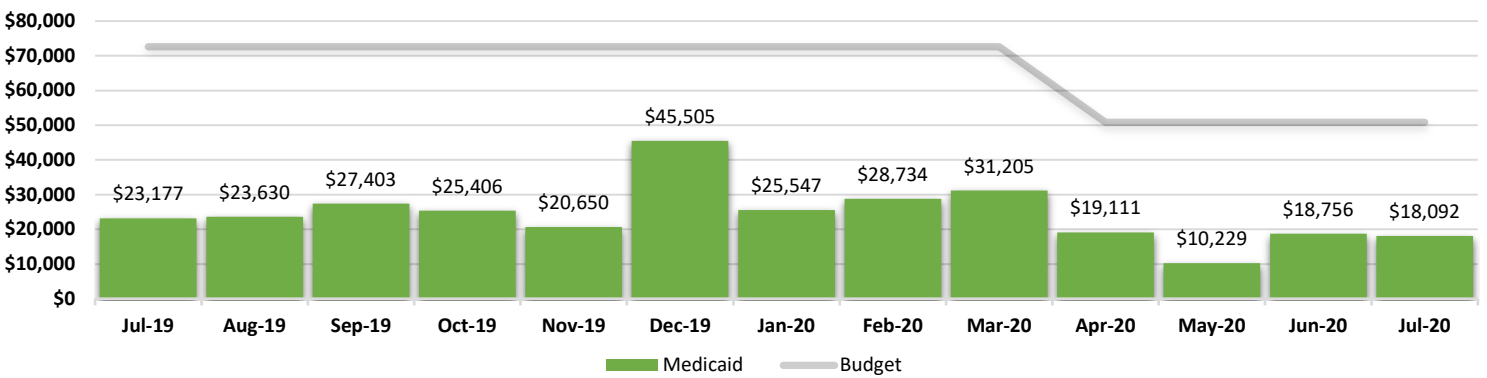
Private Insurance Revenue with Budget Line Comparison



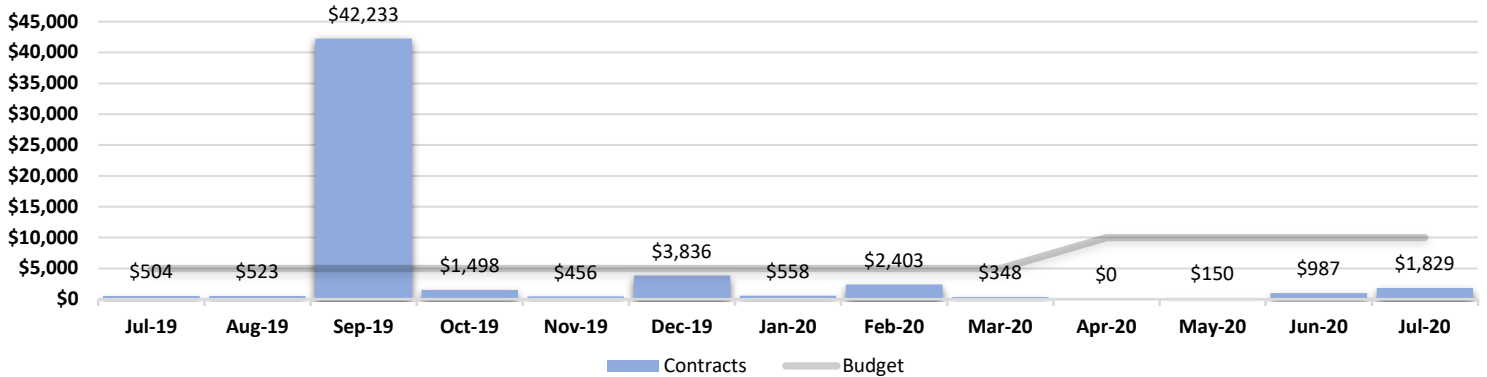
Medicare Revenue with Budget Line Comparison



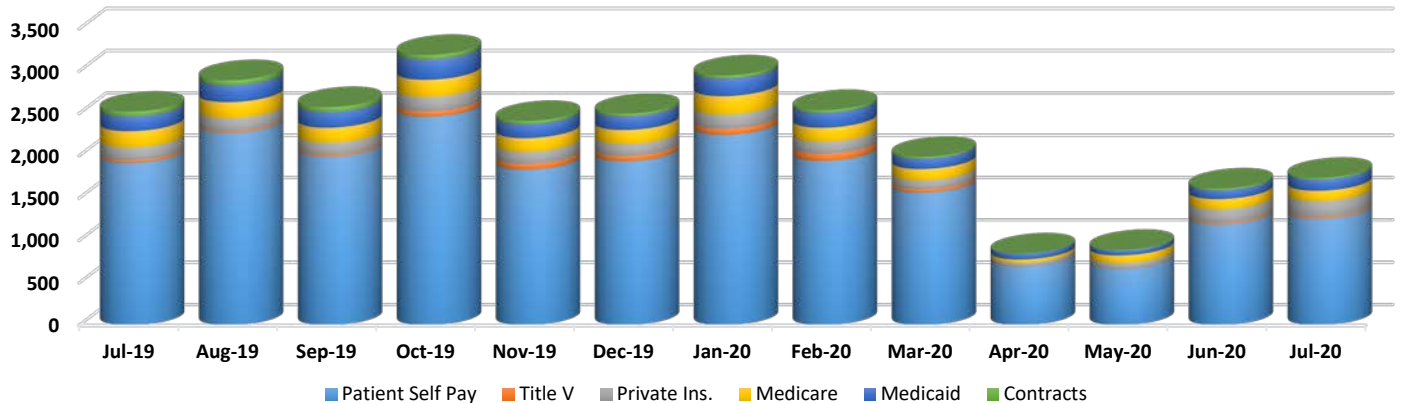
Medicaid Revenue with Budget Line Comparison



Contract Revenue with Budget Line Comparison



Total Number of Patient Visits



Coastal Health & Wellness								
Statement of Revenue and Expenses for the Period ending July 31, 2020								
		Period Ending	MTD	MTD Budget	YTD	YTD	YTD Budget	Annual
	Description	7/31/2020	Budget	Variance	Actual	Budget	Variance	Budget
Grouping	REVENUE							
HRSA	HHS GRANT REVENUE - Federal	\$353,895	\$260,617	\$93,278	\$1,356,180	\$1,042,467	\$313,713	\$3,127,400
	HHS GRANT REVENUE - BASE	\$235,622	\$260,617	(\$24,995)	\$919,588	\$1,042,467	(\$122,879)	\$3,127,400
	HHS GRANT REVENUE - SUD-MH	\$11,620	\$0	\$11,620	\$56,708	\$0	\$56,708	\$0
	HHS GRANT REVENUE - Care	\$6,222	\$0	\$6,222	\$13,697	\$0	\$13,697	\$0
	HHS GRANT REVENUE - QI 2019	\$700	\$0	\$700	\$700	\$0	\$700	\$0
	COVID Supplemental	\$17,833	\$0	\$17,833	\$53,458	\$0	\$53,458	\$0
	CARES ACT	\$81,505	\$0	\$81,505	\$311,634	\$0	\$311,634	\$0
	HHS GRANT REVENUE - ECT	\$394	\$0	\$394	\$394	\$0	\$394	\$0
HRSA	HHS Other Grant Revenue	\$45,582	\$0	\$45,582	\$45,582	\$0	\$45,582	\$0
Patient Rev	GRANT REVENUE - Title V	\$1,930	\$5,833	(\$3,903)	\$39,337	\$23,333	\$16,003	\$70,000
Patient Rev	PATIENT FEES	\$51,992	\$96,014	(\$44,022)	\$159,683	\$384,055	(\$224,372)	\$1,152,165
Patient Rev	PRIVATE INSURANCE	\$8,399	\$40,750	(\$32,351)	\$32,246	\$163,000	(\$130,754)	\$489,000
Patient Rev	PHARMACY REVENUE - 340b	\$99,445	\$64,874	\$34,571	\$390,050	\$259,496	\$130,554	\$778,488
Patient Rev	MEDICARE	\$3,710	\$48,826	(\$45,116)	\$19,362	\$195,303	(\$175,941)	\$585,910
Patient Rev	MEDICAID	\$18,092	\$50,828	(\$32,736)	\$66,188	\$203,310	(\$137,122)	\$609,930
Other Rev.	LOCAL GRANTS & FOUNDATIONS	(\$319)	\$1,351	(\$1,670)	\$62,729	\$5,403	\$57,327	\$16,208
Other Rev.	MEDICAL RECORD REVENUE	\$955	\$1,500	(\$546)	\$4,860	\$6,000	(\$1,141)	\$18,000
Other Rev.	MEDICAID INCENTIVE PAYMENTS	\$0	\$0	\$0	\$439	\$0	\$439	\$0
County	COUNTY REVENUE	\$311,222	\$311,222	\$0	\$1,244,889	\$1,244,889	\$0	\$3,734,667
DSRIP	DSRIP REVENUE	\$0	\$65,833	(\$65,833)	\$0	\$263,333	(\$263,333)	\$790,000
Other Rev.	MISCELLANEOUS REVENUE	\$2,161	\$0	\$2,161	\$4,490	\$0	\$4,490	\$0
Other Rev.	OTHER REVENUE - SALE OF FIXED ASSET	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Other Rev.	INTEREST INCOME	\$6,155	\$7,500	(\$1,345)	\$24,129	\$30,000	(\$5,871)	\$90,000
Patient Rev	CONTRACT REVENUE	\$1,829	\$9,987	(\$8,158)	\$2,966	\$39,949	(\$36,983)	\$119,848
Other Rev.	LOCAL FUNDS / OTHER REVENUE	\$351	\$476	(\$125)	\$1,230	\$1,904	(\$674)	\$5,712
Other Rev.	CONVENIENCE FEE	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Other Rev.	Fund Balance	\$3,049	\$3,049	(\$0)	\$3,049	\$3,049	(\$0)	\$3,049
	Total Revenue	\$908,448	\$968,660	(\$60,212)	\$3,457,410	\$3,865,492	(\$408,082)	\$11,590,377
	EXPENSES							
Personnel	SALARIES	\$508,589	\$502,875	(\$5,715)	\$2,027,715	\$2,011,498	(\$16,217)	\$6,034,494
Personnel	SALARIES, Merit Compensation	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Personnel	SALARIES, PROVIDER INCENTIVES	\$0	\$6,500	\$6,500	\$0	\$26,000	\$26,000	\$78,000
Personnel	SALARIES, supplemental	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Personnel	SALARIES, O/T	\$1,107	\$3,750	\$2,643	\$6,001	\$15,000	\$8,999	\$45,000
Personnel	SALARIES, PART-TIME	\$12,968	\$15,788	\$2,819	\$42,182	\$63,150	\$20,968	\$189,451
Personnel	Comp Pay	\$0	\$0	\$0	\$0	\$0	\$0	\$0.00
Personnel	FICA EXPENSE	\$38,287	\$40,460	\$2,173	\$153,139	\$161,842	\$8,703	\$485,525
Personnel	TEXAS UNEMPLOYMENT TAX	\$246	\$1,113	\$867	\$15,529	\$4,452	(\$11,076)	\$13,357
Personnel	LIFE INSURANCE	\$1,485	\$1,285	(\$200)	\$6,030	\$5,139	(\$890)	\$15,418
Personnel	LONG TERM DISABILITY INSURANCE	\$1,092	\$1,206	\$115	\$4,417	\$4,826	\$409	\$14,477
Personnel	GROUP HOSPITALIZATION INSURANC	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Personnel	WORKER'S COMP INSURANCE	\$1,455	\$1,586	\$131	\$5,734	\$6,345	\$611	\$19,034
Personnel	EMPLOYER PAID HEALTH INSURANCE	\$32,839	\$40,108	\$7,269	\$131,524	\$160,430	\$28,906	\$481,290
Personnel	EMPLOYER SPONSORED HEALTHCARE	\$6,250	\$5,852	(\$399)	\$28,003	\$23,407	(\$4,596)	\$70,221
Personnel	HRA EXPENSE	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Personnel	PENSION / RETIREMENT	\$11,486	\$11,689	\$203	\$45,808	\$46,755	\$947	\$140,264
Contractual	OUTSIDE LAB CONTRACT	\$15,313	\$25,125	\$9,812	\$24,625	\$100,500	\$75,875	\$301,500
Contractual	OUTSIDE X-RAY CONTRACT	\$1,140	\$3,000	\$1,860	\$2,808	\$12,000	\$9,192	\$36,000
Contractual	MISCELLANEOUS CONTRACT SERVICES	\$11,533	\$16,543	\$5,010	\$71,073	\$66,172	(\$4,901)	\$198,516
Personnel	TEMPORARY STAFFING	\$0	\$0	\$0	\$6,242	\$0	(\$6,242)	\$0
Contractual	CHW CONTRACT BILLING SERVICE	\$3,157	\$8,000	\$4,843	\$10,943	\$32,000	\$21,057	\$96,000
IGT	IGT REIMBURSEMENT	\$0	\$25,747	\$25,747	\$0	\$102,990	\$102,990	\$308,969
Contractual	JANITORIAL CONTRACT	\$14,801	\$14,000	(\$801)	\$47,381	\$56,000	\$8,619	\$168,000
Contractual	PEST CONTROL	\$80	\$80	(\$0)	\$320	\$320	(\$0)	\$960
Contractual	SECURITY	\$2,017	\$3,975	\$1,958	\$8,287	\$15,900	\$7,613	\$47,700
Supplies	OFFICE SUPPLIES	\$3,964	\$6,883	\$2,920	\$19,356	\$27,533	\$8,177	\$82,600
Supplies	OPERATING SUPPLIES	\$56,580	\$21,900	(\$34,680)	\$140,916	\$87,600	(\$53,316)	\$262,800
Supplies	OUTSIDE DENTAL SUPPLIES	\$6,157	\$3,350	(\$2,807)	\$9,486	\$13,400	\$3,914	\$40,200
Supplies	PHARMACEUTICAL SUPPLIES	\$35,576	\$71,992	\$36,417	\$144,743	\$287,969	\$143,226	\$863,906
Supplies	JANITORIAL SUPPLIES	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Supplies	PRINTING SUPPLIES	\$0	\$465	\$465	\$18	\$1,860	\$1,842	\$5,580
Supplies	UNIFORMS	\$0	\$235	\$235	\$0	\$940	\$940	\$2,820
Other	POSTAGE	\$618	\$833	\$215	\$2,560	\$3,333	\$773	\$10,000
Other	TELEPHONE	\$3,621	\$4,405	\$784	\$14,767	\$17,620	\$2,853	\$52,860
Other	WATER	\$31	\$31	\$1	\$122	\$124	\$2	\$372
Other	ELECTRICITY	\$1,205	\$2,000	\$795	\$4,153	\$8,000	\$3,847	\$24,000
Travel	TRAVEL, LOCAL	\$20	\$383	\$364	\$754	\$1,533	\$779	\$4,600
Travel	TRAVEL, OUT OF TOWN	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Travel	LOCAL TRAINING	\$325	\$2,933	\$2,608	\$782	\$11,733	\$10,951	\$35,200
Travel	TRAINING, OUT OF TOWN	\$0	\$1,217	\$1,217	\$0	\$4,867	\$4,867	\$14,600

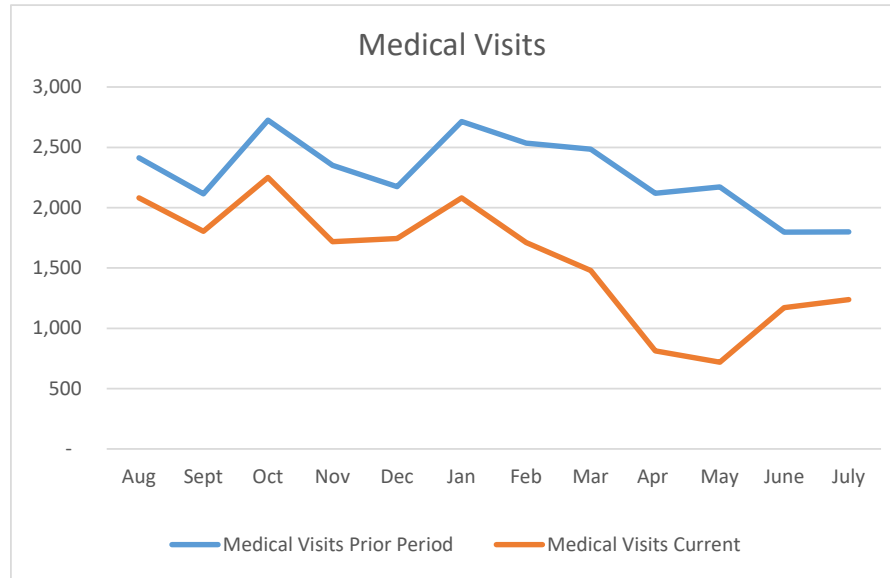
Coastal Health & Wellness

Statement of Revenue and Expenses for the Period ending July 31, 2020

		<i>Period Ending</i>	<i>MTD</i>	<i>MTD Budget</i>		<i>YTD</i>	<i>YTD</i>	<i>YTD Budget</i>	<i>Annual</i>
	<i>Description</i>	<i>7/31/2020</i>	<i>Budget</i>	<i>Variance</i>		<i>Actual</i>	<i>Budget</i>	<i>Variance</i>	<i>Budget</i>
Other	RENTALS	\$3,191	\$3,200	\$9		\$12,321	\$12,800	\$479	\$38,400
Other	LEASES	\$43,121	\$43,122	\$1		\$172,483	\$172,488	\$5	\$517,464
Other	MAINTENANCE / REPAIR, EQUIP.	\$5,944	\$7,120	\$1,176		\$23,936	\$28,481	\$4,545	\$85,444
Other	MAINTENANCE / REPAIR, AUTO	\$0	\$0	\$0		\$0	\$0	\$0	\$0
Other	FUEL	\$0	\$0	\$0		\$0	\$0	\$0	\$0
Other	MAINTENANCE / REPAIR, BLDG.	\$5	\$417	\$412		\$5	\$1,667	\$1,662	\$5,000
Other	MAINT/REPAIR, IT Equip.	\$0	\$0	\$0		\$46,129	\$0	(\$46,129)	\$0
Other	MAINTENANCE / Preventative, AUTO	\$0	\$0	\$0		\$0	\$0	\$0	\$0
Other	INSURANCE, AUTO/Truck	\$10	\$12	\$2		\$42	\$48	\$6	\$144
Other	INSURANCE, GENERAL LIABILITY	\$1,051	\$1,125	\$74		\$4,203	\$4,500	\$297	\$13,500
Other	INSURANCE, BLDG. CONTENTS	\$1,430	\$1,535	\$105		\$5,719	\$6,140	\$421	\$18,420
Other	Settlements	\$0	\$0	\$0		\$0	\$0	\$0	\$0
Other	COMPUTER EQUIPMENT	\$0	\$0	\$0		\$0	\$0	\$0	\$0
Other	OPERATING EQUIPMENT	\$6,222	\$0	(\$6,222)		\$6,222	\$0	(\$6,222)	\$0
Other	BUILDING IMPROVEMENTS	\$0	\$0	\$0		\$0	\$0	\$0	\$0
Other	NEWSPAPER ADS	\$466	\$1,800	\$1,334		\$665	\$7,200	\$6,535	\$21,600
Other	SUBSCRIPTIONS, BOOKS, ETC	\$210	\$248	\$38		\$1,274	\$990	(\$284)	\$2,970
Other	ASSOCIATION DUES	\$3,292	\$2,849	(\$443)		\$11,292	\$11,395	\$104	\$34,186
Other	IT SOFTWARE, LICENSES, INTANGIBLES	\$24,112	\$20,979	(\$3,134)		\$87,307	\$83,915	(\$3,392)	\$251,744
Other	PROF FEES/LICENSE/INSPECTIONS	\$0	\$155	\$155		\$1,720	\$618	(\$1,102)	\$1,854
Other	PROFESSIONAL SERVICES	\$213	\$2,202	\$1,988		\$6,856	\$8,807	\$1,951	\$26,420
Other	MED/HAZARD WASTE DISPOSAL	\$372	\$550	\$179		\$1,636	\$2,200	\$564	\$6,600
Other	TRANSPORTATION CONTRACT	\$144	\$625	\$481		\$439	\$2,500	\$2,061	\$7,500
Other	BOARD MEETING OPERATIONS	\$0	\$29	\$29		\$0	\$117	\$117	\$350
Other	SERVICE CHG - CREDIT CARDS	\$652	\$730	\$78		\$2,328	\$2,920	\$592	\$8,760
Other	CASHIER OVER / SHORT	\$0	\$0	\$0		\$0	\$0	\$0	\$0
Other	LATE CHARGES	\$0	\$0	\$0		\$0	\$0	\$0	\$0
Other	BAD DEBT EXPENSE	\$26,896	\$33,605	\$6,708		\$80,003	\$134,419	\$54,416	\$403,258
Other	MISCELLANEOUS EXPENSE	\$0	\$0	\$0		\$7,050	\$0	(\$7,050)	\$0
	Total Expenses	\$889,268	\$965,611	\$76,343		\$3,447,050	\$3,862,443	\$415,392	\$11,587,328
	Net Change in Fund Balance	\$19,181	\$3,049	\$16,131		\$10,361	\$3,049	\$7,311	\$3,049
		(\$3,049)	Expenses Fund Bal. Reserve			(\$3,049)			
		\$16,132				\$7,311			

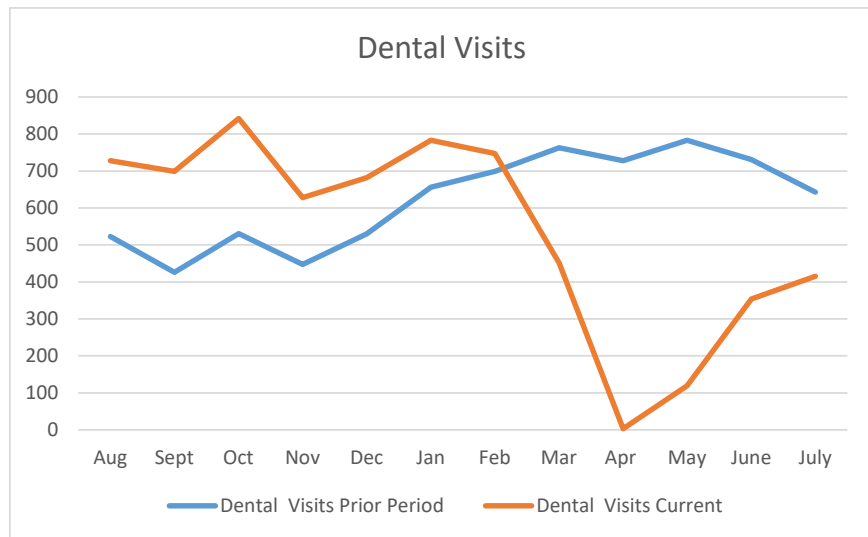
Medical Visits

	<u>Prior Period</u>	<u>Current</u>
Aug	2,413	2,081
Sept	2,115	1,804
Oct	2,725	2,250
Nov	2,351	1,719
Dec	2,175	1,745
Jan	2,714	2,082
Feb	2,534	1,710
Mar	2,484	1,480
Apr	2,119	812
May	2,171	719
June	1,797	1,170
July	1,798	1,238
	<u>27,396</u>	<u>18,810</u>



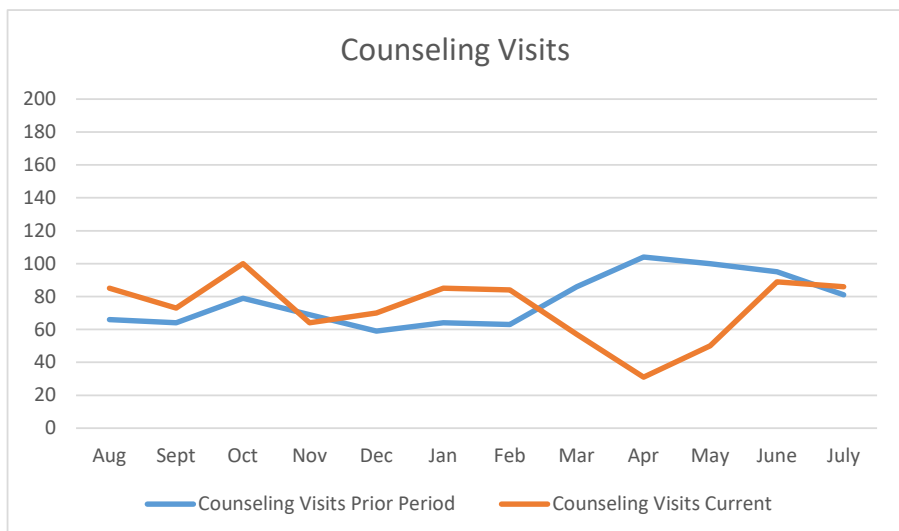
Dental Visits

	<u>Prior Period</u>	<u>Current</u>
Aug	523	728
Sept	426	699
Oct	531	842
Nov	447	628
Dec	530	682
Jan	656	783
Feb	699	747
Mar	763	451
Apr	728	3
May	783	119
June	731	354
July	643	415
	<u>7,460</u>	<u>6,451</u>



Counseling Visits

	<u>Prior Period</u>	<u>Current</u>
Aug	66	85
Sept	64	73
Oct	79	100
Nov	69	64
Dec	59	70
Jan	64	85
Feb	63	84
Mar	86	57
Apr	104	31
May	100	50
June	95	89
July	81	86
	<u>930</u>	<u>874</u>



Vists by Financial Class - Actual vs. Budget
As of July 31, 2020 (Grant Year 4/1/2020-3/31/2021)

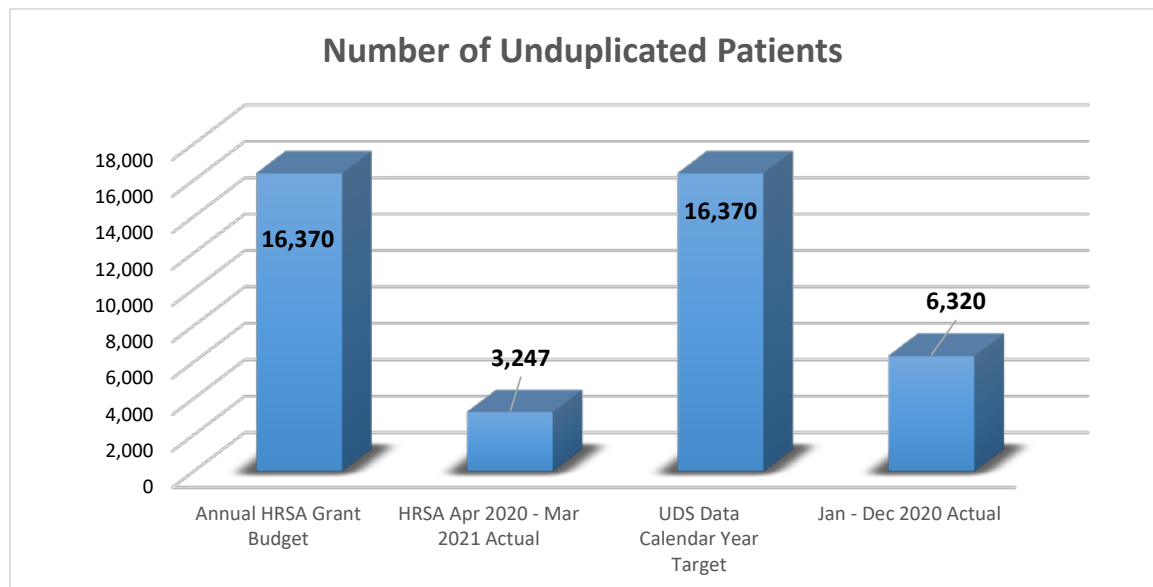
	Annual HRSA		Over/(Under)			Over/(Under)		%
	Grant Budget	MTD Actual	MTD Budget	MTD Budget	YTD Actual	YTD Budget	YTD Budget	Over/ (Under) YTD Budget
Medicaid	4,518	132	377	(245)	398	1,130	(732)	-65%
Medicare	4,507	123	376	(253)	388	1,127	(739)	-66%
Other Public (Title V, Contract)	2,498	40	208	(168)	99	625	(526)	-84%
Private Insurance	3,912	188	326	(138)	463	978	(515)	-53%
Self Pay	32,919	1,256	2,743	(1,487)	3,772	8,230	(4,458)	-54%
	48,354	1,739	4,030	(2,291)	5,120	12,089	(6,969)	-58%

Unduplicated Patients - Current vs. Prior Year
UDS Data Calendar Year
January through December

	Current Year Annual Target	Jan-July 2019 Actual	Jan-July 2020 Actual	Increase/	% of Annual Target
				(Decrease) Prior Year	
Unduplicated Patients	16,370	9,309	6,320	(2,989)	39%

Unduplicated Patients - Current vs. Prior Year
HRSA Grant Year
April through March

	Annual HRSA Grant Budget	Apr 2019 -	Apr 2020 -	Increase/	% of Annual Target
		Mar 2020 Actual	Mar 2021 Actual	(Decrease) Prior Year	
Unduplicated Patients	16,370	6,442	3,247	(3,195)	20%





COASTAL HEALTH & WELLNESS

GOVERNING BOARD

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

Governing Board

August 2020

Item#8

**Consider for Approval Selection of FY 2020-2022
Independent Auditor**

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COASTAL HEALTH & WELLNESS

GOVERNING BOARD

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

Governing Board

August 2020

Item#9

**Consider for Approval Annual Fee Schedule for Dentures, Crowns, and
Root Canals Effective September 1, 2020**

PROPOSED 2020 FEE SCHEDULE FOR DENTAL SERVICES REQUIRING A CONTRACT

Dentures, Root Canals, Crowns and Devices

Effective 9.1.2020

Removed from Contract Fee Schedule

Added to Contract Fe Schedule

CDT Code	CDT Description	Current Fee	Proposed	% Change
	DENTURES	Over 200% FPG		
<input type="checkbox"/> D5110	Complete Denture - Maxillary	\$2,013	\$2,013	0%
<input type="checkbox"/> D5120	Complete Denture - Mandibular	\$2,024	\$2,024	0%
<input type="checkbox"/> D5130	Immediate Denture - Maxillary	\$2,140	\$2,140	0%
<input type="checkbox"/> D5140	Immediate Denture - Mandibular	\$2,148	\$2,148	0%
<input type="checkbox"/> D5211	Maxillary Partial Denture - Resin Base	\$1,589	\$1,589	0%
<input type="checkbox"/> D5212	Mandibular Partial Denture - Resin Base	\$1,592	\$1,592	0%
<input type="checkbox"/> D5213	Maxillary Partial Denture - Cast Metal Framework with Resin Denture Bases	\$2,082	\$2,082	0%
<input type="checkbox"/> D5214	Mandibular Partial Denture - Cast Metal Framework with Resin Denture Bases	\$2,099	\$2,099	0%
<input type="checkbox"/> D5225	Maxillary Partial Denture - Flexible base (including any clasps, rests and teeth)	\$1,695	\$1,711	1%
<input type="checkbox"/> D5226	Mandibular Partial Denture - Flexible base (including any clasps, rests and teeth)	\$1,687	\$1,711	1%
<input type="checkbox"/> D5282	Removable Unilateral Partial Denture, Maxillary	\$1,149	\$1,149	0%
<input type="checkbox"/> D5283	Removable Unilateral Partial Denture, Mandibular	\$1,149	\$1,149	0%
<input type="checkbox"/> D5511	Repair Broken Complete Denture Base, Mandibular	\$314	\$314	0%
<input type="checkbox"/> D5512	Repair Broken Complete Denture Base, Maxillary	\$313	\$313	0%
<input type="checkbox"/> D5520	Replace Missing or Broken Teeth	\$283	\$283	0%
<input type="checkbox"/> D5611	Repair Resin Denture Base, Mandibular	\$273	\$273	0%
<input type="checkbox"/> D5612	Repair Resin Denture Base, Maxillary	\$273	\$273	0%
<input type="checkbox"/> D5621	Repair Cast Framework, Mandibular	\$240	\$308	28%
<input type="checkbox"/> D5622	Repair Cast Framework, Maxillary	\$240	\$309	29%
<input type="checkbox"/> D5630	Repair or Replace Broken Clasp	\$537	\$450	-16%
<input type="checkbox"/> D5640	Replace Broken Teeth - Per Tooth	\$283	\$283	0%
<input type="checkbox"/> D5650	Add Tooth to Existing Partial Denture	\$283	\$283	0%
<input type="checkbox"/> D5660	Add Clasp to Existing Partial Denture	\$537	\$450	-16%
<input type="checkbox"/> D5710	Rebase Complete Maxillary Denture	\$710	\$710	0%
<input type="checkbox"/> D5711	Rebase Complete Mandibular Denture	\$711	\$711	0%
<input type="checkbox"/> D5820	Interim Partial Denture (Maxillary)	\$883	\$883	0%
<input type="checkbox"/> D5821	Interim Partial Denture (Mandibular)	\$883	\$883	0%
<input type="checkbox"/> D5899	Gold Denture Crown Per Tooth	\$375	\$375	0%
<input type="checkbox"/> D5410	Adjust Complete Denture - Maxillary	\$104	\$99	-5%
<input type="checkbox"/> D5411	Adjust Complete Denture - Mandibular	\$104	\$98	-6%
<input type="checkbox"/> D5421	Adjust Partial Denture - Maxillary	\$104	\$99	-5%

CDT Code	CDT Description	Current Fee	Proposed	% Change
<input checked="" type="checkbox"/> D5422	Adjust Partial Denture - Mandibular	\$104	\$99	-5%
<input type="checkbox"/> D5730	Reline Complete Maxillary Denture - Chairside	\$438	\$438	0%
<input type="checkbox"/> D5731	Reline Complete Mandibular Denture - Chairside	\$438	\$438	0%
<input type="checkbox"/> D5740	Reline Partial Maxillary Denture - Chairside	\$432	\$432	0%
<input type="checkbox"/> D5741	Reline Partial Mandibular Denture - Chairside	\$433	\$433	0%
<input type="checkbox"/> D5750	Reline Complete Maxillary Denture (Lab)	\$559	\$559	0%
<input type="checkbox"/> D5751	Reline Complete Mandibular Denture (Lab)	\$559	\$559	0%
<input type="checkbox"/> D5760	Reline Maxillary Partial Denture (Lab)		\$506	
<input type="checkbox"/> D5761	Reline Mandibular Partial Denture (Lab)		\$508	
NOTE: The first 3 adjustments of new dentures are at no charge. Those adjustments completed after the first 3 will be charged based on the dental fee schedule.				
ROOT CANALS AND CROWNS				
<input type="checkbox"/> D1510	Space Maintainer, Fixed, Unilateral	\$333	\$348	5%
<input type="checkbox"/> D1516	Space Maintainer, Fixed, Bilateral, Maxillary	\$450	\$450	0%
<input type="checkbox"/> D1517	Space Maintainer, Fixed, Bilateral, Mandibular	\$450	\$450	0%
<input type="checkbox"/> D2740	Crown - porcelain/ceramic	\$1,222	\$1,265	4%
<input type="checkbox"/> D2790	Crown - full cast high noble metal	\$1,255	\$1,300	4%
<input type="checkbox"/> D2791	Crown - full cast base metal	\$1,100	\$1,142	4%
<input type="checkbox"/> D2792	Crown - full cast noble metal	\$1,159	\$1,207	4%
<input type="checkbox"/> D2750	Crown - porcelain fused to high noble metal	\$1,222	\$1,263	3%
<input type="checkbox"/> D2930	Prefabricated Stainless Steel Crown - Primary Tooth	\$285	\$297	4%
<input type="checkbox"/> D2931	Prefabricated Stainless Steel Crown - Permanent Tooth	\$339	\$356	5%
<input type="checkbox"/> D2934	Prefabricated Esthetic Coated Stainless Steel Crown - Primary Tooth	\$382	\$400	5%
<input type="checkbox"/> D2950	Core Buildup, Including any pins	\$289	\$300	4%
<input type="checkbox"/> D2952	Post and Core in Addition to crown, indirectly fabricated	\$436	\$458	5%
<input type="checkbox"/> D2954	Prefabricated Post and Core in Addition to Crown	\$361	\$373	3%
<input type="checkbox"/> D3221	Pupal Debridement, primary and permanent teeth	\$245	\$255	4%
<input type="checkbox"/> D3310	Endodontic therapy, anterior tooth (excluding final restoration)	\$783	\$832	6%
<input type="checkbox"/> D3320	Endodontic therapy, premolar tooth (excluding final restoration)	\$924	\$948	3%
<input type="checkbox"/> D3330	Endodontic therapy, molar tooth (excluding final restoration)	\$1,117	\$1,154	3%
<input type="checkbox"/> D6750	Retainer Crown - porcelain fused to high noble metal	\$1,225	\$1,255	2%
<input type="checkbox"/> D6240	Pontic - porcelain fused to high noble metal	\$1,222	\$1,247	2%
<input type="checkbox"/> D6740	Retainer Crown - porcelain/ceramic	\$1,227	\$1,268	3%
<input type="checkbox"/> D6245	Pontic - porcelain/ceramic	\$1,220	\$1,247	2%
DEVICES				
<input type="checkbox"/> D9941	Fabrication of Athletic Mouthguard		\$269	
<input type="checkbox"/> D9944	Occlusal Guard - Hard appliance, full arch	\$245	\$500	104%
<input type="checkbox"/> D9945	Occlusal Guard - Soft appliance, full arch	\$245	\$500	104%
<input type="checkbox"/> D9946	Occlusal Guard - Hard appliance, partial arch	\$245	\$500	104%

CDT Code	CDT Description	Current Fee	Proposed	% Change
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6%

The fee schedule changes for the above services are based on the National Dental Advisory 2020 Service Pricing Guide's 50th percentile for our area.

The above codes and fees define the basic scope of services of Coastal Health & Wellness. As recommended by the dental director and approved by the Executive Director additional codes may be used when medically indicated and financially feasible.

**Proposed Fee Schedule for Dental Contract Services
Dentures, Root Canals, Crowns and Devices
Effective 8.1.2020**

CDT Code	CDT Description	0% Pay	20%	40%	60%	80%	100%
	DENTURES	100% FPG	101-125% FPG	126-150% FPG	151-175% FPG	176-200% FPG	Over 200% FPG
<input type="checkbox"/> D5110	Complete Denture - Maxillary	\$604	\$886	\$1,168	\$1,449	\$1,731	\$2,013
<input type="checkbox"/> D5120	Complete Denture - Mandibular	\$607	\$891	\$1,174	\$1,457	\$1,741	\$2,024
<input type="checkbox"/> D5130	Immediate Denture - Maxillary	\$642	\$942	\$1,241	\$1,541	\$1,840	\$2,140
<input type="checkbox"/> D5140	Immediate Denture - Mandibular	\$644	\$945	\$1,246	\$1,547	\$1,847	\$2,148
<input type="checkbox"/> D5211	Maxillary Partial Denture - Resin Base	\$477	\$699	\$922	\$1,144	\$1,367	\$1,589
<input type="checkbox"/> D5212	Mandibular Partial Denture - Resin Base	\$478	\$700	\$923	\$1,146	\$1,369	\$1,592
<input type="checkbox"/> D5213	Maxillary Partial Denture - Cast Metal Framework with Resin Denture Bases	\$625	\$916	\$1,208	\$1,499	\$1,791	\$2,082
<input type="checkbox"/> D5214	Mandibular Partial Denture - Cast Metal Framework with Resin Denture Bases	\$630	\$924	\$1,217	\$1,511	\$1,805	\$2,099
<input type="checkbox"/> D5225	Maxillary Partial Denture - Flexible base (including any clasps, rests and teeth)	\$513	\$753	\$992	\$1,232	\$1,471	\$1,711
<input type="checkbox"/> D5226	Mandibular Partial Denture - Flexible base (including any clasps, rests and teeth)	\$513	\$753	\$992	\$1,232	\$1,471	\$1,711
<input type="checkbox"/> D5282	Removable Unilateral Partial Denture, Maxillary	\$345	\$506	\$666	\$827	\$988	\$1,149
<input type="checkbox"/> D5283	Removable Unilateral Partial Denture, Mandibular	\$345	\$506	\$666	\$827	\$988	\$1,149
<input type="checkbox"/> D5511	Repair Broken Complete Denture Base, Mandibular	\$94	\$138	\$182	\$226	\$270	\$314
<input type="checkbox"/> D5512	Repair Broken Complete Denture Base, Maxillary	\$94	\$138	\$182	\$225	\$269	\$313
<input type="checkbox"/> D5520	Replace Missing or Broken Teeth - Per Tooth	\$85	\$125	\$164	\$204	\$243	\$283
<input type="checkbox"/> D5611	Repair Resin Denture Base, Mandibular	\$82	\$120	\$158	\$197	\$235	\$273
<input type="checkbox"/> D5612	Repair Resin Denture Base, Maxillary	\$82	\$120	\$158	\$197	\$235	\$273
<input type="checkbox"/> D5621	Repair Cast Framework, Mandibular	\$92	\$136	\$179	\$222	\$265	\$308
<input type="checkbox"/> D5622	Repair Cast Framework, Maxillary	\$93	\$136	\$179	\$222	\$266	\$309
<input type="checkbox"/> D5630	Repair or Replace Broken Clasp	\$135	\$198	\$261	\$324	\$387	\$450
<input type="checkbox"/> D5640	Replace Broken Teeth - Per Tooth	\$85	\$125	\$164	\$204	\$243	\$283
<input type="checkbox"/> D5650	Add Tooth to Existing Partial Denture - Per Tooth	\$85	\$125	\$164	\$204	\$243	\$283
<input type="checkbox"/> D5660	Add Clasp to Existing Partial Denture - Per Clasp	\$135	\$198	\$261	\$324	\$387	\$450
<input type="checkbox"/> D5710	Rebase Complete Maxillary Denture	\$213	\$312	\$412	\$511	\$611	\$710
<input type="checkbox"/> D5711	Rebase Complete Mandibular Denture	\$213	\$313	\$412	\$512	\$611	\$711
<input type="checkbox"/> D5820	Interim Partial Denture (Maxillary)	\$265	\$389	\$512	\$636	\$759	\$883
<input type="checkbox"/> D5821	Interim Partial Denture (Mandibular)	\$265	\$389	\$512	\$636	\$759	\$883
<input type="checkbox"/> D5899	Gold Denture Crown Per Tooth*	\$375	\$375	\$375	\$375	\$375	\$375
<input type="checkbox"/> D5410	Adjust Complete Denture - Maxillary	\$25	\$46	\$60	\$75	\$90	\$104
<input type="checkbox"/> D5411	Adjust Complete Denture - Mandibular	\$25	\$46	\$60	\$75	\$90	\$104
<input type="checkbox"/> D5421	Adjust Partial Denture - Maxillary	\$25	\$46	\$60	\$75	\$90	\$104
<input type="checkbox"/> D5422	Adjust Partial Denture - Mandibular	\$25	\$46	\$60	\$75	\$90	\$104
<input type="checkbox"/> D5730	Reline Complete Maxillary Denture - Chairside	\$103	\$193	\$254	\$315	\$377	\$438
<input type="checkbox"/> D5731	Reline Complete Mandibular Denture - Chairside	\$103	\$193	\$254	\$315	\$377	\$438
<input type="checkbox"/> D5740	Reline Partial Maxillary Denture - Chairside	\$102	\$190	\$251	\$311	\$372	\$432
<input type="checkbox"/> D5741	Reline Partial Mandibular Denture - Chairside	\$103	\$191	\$251	\$312	\$372	\$433
<input type="checkbox"/> D5750	Reline Complete Maxillary Denture (Lab)	\$168	\$246	\$324	\$402	\$481	\$559
<input type="checkbox"/> D5751	Reline Complete Mandibular Denture (Lab)	\$168	\$246	\$324	\$402	\$481	\$559
<input type="checkbox"/> D5760	Reline Maxillary Partial Denture (Lab)	\$152	\$223	\$293	\$364	\$435	\$506
<input type="checkbox"/> D5761	Reline Mandibular Partial Denture (Lab)	\$152	\$224	\$295	\$366	\$437	\$508

NOTE: The first 3 adjustments of new dentures are at no charge. Those adjustments completed after the first 3 will be charged based on the dental fee schedule.

CDT Code	CDT Description	0% Pay	20%	40%	60%	80%	100%
ROOT CANALS AND CROWNS							
<input type="checkbox"/> D1510	Space Maintainer, Fixed, Unilateral	\$104	\$153	\$202	\$251	\$299	\$348
<input type="checkbox"/> D1516	Space Maintainer, Fixed, Bilateral, Maxillary	\$135	\$198	\$261	\$324	\$387	\$450
<input type="checkbox"/> D1517	Space Maintainer, Fixed, Bilateral, Mandibular	\$135	\$198	\$261	\$324	\$387	\$450
<input type="checkbox"/> D2740	Crown - porcelain/ceramic	\$380	\$557	\$734	\$911	\$1,088	\$1,265
<input type="checkbox"/> D2790	Crown - full cast high noble metal	\$390	\$572	\$754	\$936	\$1,118	\$1,300
<input type="checkbox"/> D2791	Crown - full cast base metal	\$343	\$502	\$662	\$822	\$982	\$1,142
<input type="checkbox"/> D2792	Crown - full cast noble metal	\$362	\$531	\$700	\$869	\$1,038	\$1,207
<input type="checkbox"/> D2750	Crown - porcelain fused to high noble metal	\$379	\$556	\$733	\$909	\$1,086	\$1,263
<input type="checkbox"/> D2930	Prefabricated Stainless Steel Crown - Primary Tooth	\$89	\$131	\$172	\$214	\$255	\$297
<input type="checkbox"/> D2931	Prefabricated Stainless Steel Crown - Permanent Tooth	\$107	\$157	\$206	\$256	\$306	\$356
<input type="checkbox"/> D2934	Prefabricated Esthetic Coated Stainless Steel Crown - Primary Tooth	\$120	\$176	\$232	\$288	\$344	\$400
<input type="checkbox"/> D2950	Core Buildup, Including any pins	\$90	\$132	\$174	\$216	\$258	\$300
<input type="checkbox"/> D2952	Post and Core in Addition to crown, indirectly fabricated	\$137	\$202	\$266	\$330	\$394	\$458
<input type="checkbox"/> D2954	Prefabricated Post and Core in Addition to Crown	\$112	\$164	\$216	\$269	\$321	\$373
<input type="checkbox"/> D3221	Pupal Debridement, primary and permanent teeth	\$77	\$112	\$148	\$184	\$219	\$255
<input type="checkbox"/> D3310	Endodontic therapy, anterior tooth (excluding final restoration)	\$250	\$366	\$483	\$599	\$716	\$832
<input type="checkbox"/> D3320	Endodontic therapy, premolar tooth (excluding final restoration)	\$284	\$417	\$550	\$683	\$815	\$948
<input type="checkbox"/> D3330	Endodontic therapy, molar tooth (excluding final restoration)	\$346	\$508	\$669	\$831	\$992	\$1,154
<input type="checkbox"/> D6750	Retainer Crown - porcelain fused to high noble metal	\$377	\$552	\$728	\$904	\$1,079	\$1,255
<input type="checkbox"/> D6240	Pontic - porcelain fused to high noble metal	\$374	\$549	\$723	\$898	\$1,072	\$1,247
<input type="checkbox"/> D6740	Retainer Crown - porcelain/ceramic	\$380	\$558	\$735	\$913	\$1,090	\$1,268
<input type="checkbox"/> D6245	Pontic - porcelain/ceramic	\$374	\$549	\$723	\$898	\$1,072	\$1,247
DEVICES							
<input type="checkbox"/> D9941	Fabrication of Athletic Mouthguard	\$81	\$118	\$156	\$194	\$231	\$269
<input type="checkbox"/> D9944	Occlusal Guard - Hard appliance, full arch	\$150	\$220	\$290	\$360	\$430	\$500
<input type="checkbox"/> D9945	Occlusal Guard - Soft appliance, full arch	\$150	\$220	\$290	\$360	\$430	\$500
<input type="checkbox"/> D9946	Occlusal Guard - Hard appliance, partial arch	\$150	\$220	\$290	\$360	\$430	\$500

*Sliding fee does not apply to D5899 Gold Denture Crown per Tooth

The fee schedule changes for the above services are based on the National Dental Advisory 2020 Service Pricing Guide's 50th percentile for our area.

The above codes and fees define the basic scope of services of Coastal Health & Wellness. As recommended by the dental director and approved by the Executive Director additional codes may be used when medically indicated and financially feasible.

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COASTAL HEALTH & WELLNESS

GOVERNING BOARD

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

Governing Board

August 2020

Item#10

Consider for Approval Revision to Annual Medical Fee Schedule

Effective September 1, 2020

Coastal Health & Wellness
PROPOSED Medical Fee Schedule effective September 1, 2020

New Codes for Proposed Fee Schedule

Recommended deleted from Proposed Fee Schedule

Indicates change in headings in fee schedule to better reflect Lab Services

CPT #	Procedure Description	Current Fee	Proposed fee	Difference	% Change
Self Pay Fees					
Nominal Fee	Minimum Fee - 0% Responsibility	\$20	\$20	\$0	0%
	Deposit Payment - 20% Responsibility	\$25	\$25	\$0	0%
	Deposit Payment - 40% Responsibility	\$30	\$30	\$0	0%
	Deposit Payment - 60% Responsibility	\$35	\$35	\$0	0%
	Deposit Payment - 80% Responsibility	\$45	\$45	\$0	0%
	Deposit Payment - 100% Responsibility (required at checkin)	\$55	\$55	\$0	0%
Retck Svc CG	Returned check service charge	\$25	\$30	\$5	20%
New Patient Office Visit					
99201	Time for Counseling >= 10 Minutes Face to Face	\$89	\$89	\$0	0%
99202	Time for Counseling >= 20 Minutes Face to Face	\$153	\$153	\$0	0%
99203	Time for Counseling >= 30 Minutes Face to Face	\$219	\$219	\$0	0%
99204	Time for Counseling >= 45 Minutes Face to Face	\$334	\$334	\$0	0%
99205	Time for Counseling >= 60 Minutes Face to Face	\$418	\$418	\$0	0%
G0438	Initial Visit	\$353	\$353	\$0	0%
Established Patient Office Visit					
99211	Typically 5 Minutes Managing or Supervising (Nurse Visit)	\$42	\$42	\$0	0%
99212	Time for Counseling >= 10 Minutes Face to Face	\$89	\$89	\$0	0%
99441	Time for Counseling >= 10 Minutes Telehealth		\$89		
99213	Time for Counseling >= 15 Min Face to Face	\$150	\$150	\$0	0%
99442	Time for Counseling >= 15 Min Telehealth		\$150		
99214	Time for Counseling >= 25 Min Face to Face	\$221	\$221	\$0	0%
99443	Time for Counseling >= 25 Min Telehealth		\$221		
99215	Time for Counseling >= 40 Min Face to Face	\$296	\$296	\$0	0%
G0439	Subsequent Visit	\$240	\$240	\$0	0%
New Patient Preventive Visits					
99381	Well Child less than 1year	\$228	\$246	\$18	8%
99382	Well Child 1 - 4 years	\$238	\$257	\$19	8%
99383	Well Child 5 - 11 years	\$248	\$267	\$20	8%
99384	Well Child 12 - 17 years	\$279	\$302	\$22	8%
99385	Well Adult 18 - 39 years	\$271	\$292	\$22	8%

CPT #	Procedure Description	Current Fee	Proposed fee	Difference	% Change
99386	Well Adult 40 - 64 years	\$314	\$339	\$25	8%
99387	Well Adult 65 years and over	\$340	\$367	\$27	8%
G0402	Initial Preventive Exam	\$342	\$369	\$27	8%
	Established Patient Preventive Visit				
99391	Well Child less than 1 year	\$205	\$221	\$16	8%
99392	Well Child 1 - 4 years	\$219	\$236	\$18	8%
99393	Well Child 5 - 11 years	\$218	\$235	\$17	8%
99394	Well Child 12 - 17 years	\$239	\$258	\$19	8%
99395	Well Adult 18 - 39 years	\$244	\$264	\$20	8%
99396	Well Adult 40 - 64 years	\$260	\$280	\$21	8%
99397	Well Adult 65 years and over	\$279	\$302	\$22	8%
	Counseling Services				
90832	Psychotherapy Pt and Family (30 min.)	\$132	\$148	\$16	12%
90834	Psychotherapy Pt and Family (45 min.)	\$175	\$196	\$21	12%
90837	Psychotherapy Pt and Family (60 min.)	\$262	\$262	\$0	0%
90847	Family psychotherapy (with patient present)	\$220	\$233	\$13	6%
90853	Group psychotherapy (other than of a multiple-family group)	\$57	\$61	\$4	7%
	Special Services				
STD/HIV	STD Referral	\$22	\$22	\$0	0%
90853	Tobacco Group Counseling	\$57	\$61	\$4	7%
99499	Brief Consultation	\$17	\$20	\$3	18%
	Incision and Drainage Procedures				
10060	Incision and drainage of abscess, single	\$241	\$265	\$24	10%
10061	Incision and drainage of abscess, complicated or multiple	\$419	\$461	\$42	10%
10120	Incision and removal of a foreign object from subcutaneous tissues	\$314	\$339	\$25	8%
10140	Incision and drainage of hematoma	\$333	\$367	\$33	10%
10160	Puncture and aspiration of abscess	\$266	\$290	\$24	9%
	Paring or Cutting				
11055	Trim Skin Lesion	\$101	\$111	\$10	10%
	Debridement Procedures				
11000	Debridement of extensive eczematous or infected skin (up to 10% of body surface)	\$112	\$123	\$11	10%
	Biopsy Procedures				
11102	Biopsy, skin and subcutaneous tissue, single lesion	\$212	\$224	\$12	6%
11103	Biopsy, skin and subcutaneous tissue, each additional lesion	\$66	\$75	\$9	14%
	Skin Tag Procedures				
11200	Remove multiple fibrocutaneous skin tags, up to 15	\$179	\$197	\$18	10%
11201	Remove multiple fibrocutaneous skin tags, each additional 10	\$37	\$41	\$4	11%

CPT #	Procedure Description	Current Fee	Proposed fee	Difference	% Change
Shaving Procedures					
11300	Shaving epidermal or dermal lesion, single, trunk or extremities, 0.5 cm. or less	\$200	\$220	\$20	10%
11301	Shaving epidermal or dermal lesion, single, trunk or extremities, 0.6-1.0 centimeter	\$246	\$271	\$25	10%
11305	Shaving epidermal or dermal lesion, single, scalp, neck, hands, feet or genitalia, 0.5 cm. or less	\$206	\$226	\$20	10%
11306	Shaving epidermal or dermal lesion, single, scalp, neck, hands, feet or genitalia, 0.6 -1 cm.	\$252	\$275	\$23	9%
11310	Shaving single epidermal or dermal lesion, on face, 0.5 cm or less	\$233	\$257	\$24	10%
11311	Shaving single epidermal or dermal lesion on face; lesion 0.6 to 1.0 cm	\$226	\$248	\$22	10%
11055	Paring or cutting of benign hyperkeratotic lesion (e.g.. corn, callous)	\$101	\$111	\$10	10%
Excision Procedures					
11400	Excision of benign lesion, except skin tag, 0.5 cm. or less	\$254	\$280	\$26	10%
11401	Excision of benign lesion, except skin tag, 0.6-1.0 cm.	\$304	\$334	\$30	10%
11402	Excision of benign lesion, except skin tag, 1.1-2.0 cm.	\$336	\$369	\$33	10%
11403	Excision of benign lesion, except skin tag, 2.1-3.0 cm.	\$386	\$425	\$39	10%
11404	Excision of benign lesion, except skin tag, 3.1-4.0 cm.	\$437	\$480	\$43	10%
11420	Excision of benign lesion, except skin tag, on scalp, neck, hands, feet, genitalia, 0.5 cm or less	\$252	\$277	\$25	10%
11421	Excision of benign lesion, except skin tag, on scalp, necks, hands, feet, genitalia, 0.6-1 cm	\$319	\$351	\$32	10%
11422	Excision of benign lesion, except skin tag, on scalp, neck, hands, feet, genitalia, 1.1-2 cm	\$355	\$391	\$36	10%
11426	Excision of benign lesion, except skin tag, on scalp, neck, hands, feet, genitalia, over 4.0 cm	\$659	\$725	\$66	10%
11440	Excision of other benign lesion, except skin tag, on face, 0.5 cm or less	\$278	\$306	\$28	10%
11441	Excision of other benign lesion, except skin tag, on face, 0.6-1 cm	\$341	\$375	\$34	10%
Nail Procedures					
11720	Debridement of nail(s) by any method, one to five	\$67	\$72	\$5	8%
11730	Complete or partial avulsion of the nail plate, single (removal of the nail without disruption of the underlying matrix or nailbed)	\$206	\$226	\$20	10%
11732	Avulsion of each additional nail plate	\$74	\$147	\$73	99%
11740	Puncture of nail to remove hematoma or blood	\$103	\$114	\$11	10%
11750	Surgical excision of nail with matrix, removing the nail and the underlying nail bed (e.g.. ingrown or deformed nail)	\$395	\$395	\$0	0%
11765	Wedge excision of skin of nail fold with an incision from the lateral border of the nail, leaving the nail matrix intact. (e.g.. for ingrown toenail).	\$350	\$350		

CPT #	Procedure Description	Current Fee	Proposed fee	Difference	% Change
Wound Repair Procedures					
12001	Simple suture repair of wound, 2.5 cm. or less	\$182	\$200	\$18	10%
12002	Simple suture repair of wound, 2.6 to 7.5 cm.	\$220	\$242	\$22	10%
12004	Simple suture repair of wound, 7.6 to 12.5 cm.	\$259	\$284	\$26	10%
12005	Simple suture repair of wound, 12.6 to 20.0 cm.	\$325	\$357	\$32	10%
12011	Simple suture repair of wound on face, 2.5 cm. or less	\$222	\$244	\$22	10%
Burn Treatment					
46000	Initial treatment, 1st or 2nd degree burn, when no more than local treatment is required	\$139	\$155		
Destruction Procedures (Any Method)					
17000	Destruction of benign or premalignant lesions with liquid nitrogen (e.g.. actinic keratoses), first lesion	\$146	\$146	\$0	0%
17003	Destruction with liquid nitrogen of benign or premalignant lesions: second through 14th lesion	\$13	\$13	\$0	4%
17004	Destruction with liquid nitrogen of each additional lesion over 15	\$306	\$336	\$30	10%
17110	Destruction with liquid nitrogen of common or plantar warts, to 14 lesions	\$230	\$248	\$18	8%
17111	Destruction with liquid nitrogen of common or plantar warts (15 or more)	\$271	\$292	\$21	8%
Injection and/or Arthrocentesis Procedures					
20550	Injection, single tendon sheath or ligament	\$120	\$121		
20552	Injection(s), single or multiple trigger points, 1-2 muscles	\$113	\$123		
20600	Arthrocentesis, aspiration and/or injection, <i>small</i> joint or bursa (e.g.. fingers, toes)	\$97	\$106	\$9	10%
20605	Arthrocentesis, aspiration and/or injection, <i>intermediate</i> joint or bursa (e.g.. wrist, elbow)	\$102	\$113	\$11	10%
20610	Arthrocentesis, aspiration and/or injection, <i>major</i> joint or bursa (e.g.. Shoulder, hip, knee)	\$123	\$136	\$13	10%
Splint / Strapping Procedures					
29550	Tee strapping	\$57	\$57		
29580	Strapping, Unna Boot	\$108	\$124	\$16	15%
Male Procedures					
54050	Destruction of lesion(s), penis, chemical - podophyllin	\$271	\$300	\$29	11%
54056	Destruction of lesion(s), penis, simple, cryosurgery Liquid nitrogen	\$292	\$318	\$26	9%
Female Procedures					
56405	Incision and drainage of vulva or perineal abscess	\$219	\$274	\$55	25%
56501	Destruction of lesion(s), vulva, all methods	\$264	\$330	\$66	25%
56605	Biopsy of vulva or perineum; one lesion	\$165	\$201	\$36	22%
57420	Exam of Vagina w/Scope		\$279		

CPT #	Procedure Description	Current Fee	Proposed fee	Difference	% Change
57454	BX/Curett of Cervix w/Scope		\$364		
57456	Endocerv Curettage w/Scope		\$323		
58100	Endometrial Biopsy	\$219	\$219	\$0	0%
88305	Tissue Exam by Pathologist (of endometrial biopsy) these must both be coded	\$197	\$197		
58301	Removal only - intrauterine device (IUD)	\$191	\$226	\$35	18%
58300	Insertion of Intrauterine Device (IUD) - insertion only	\$147	\$179	\$32	22%
	Removal of Foreign Body				
65205	Foreign body removal, eye	\$117	\$117	\$0	0%
69200	Foreign body removal, external auditory canal	\$232	\$232	\$0	0%
69210	Cerumen removal with spoon	\$100	\$106	\$6	6%
30300	Removal of foreign body, intranasal	\$433	\$433	\$0	0%
	RADIOLOGY				
70100	Radiologic examination, mandible	\$68	\$79	\$11	16%
70140	Radiologic examination, facial bones, less than 3 views	\$62	\$69	\$7	12%
70150	Radiologic examination, facial bones, 3 or more views	\$86	\$100	\$14	16%
70160	Radiologic examination, nasal bones, 3 or more views	\$67	\$78	\$11	16%
70210	Radiologic examination, sinuses, paranasal, less than 3 views	\$62	\$68	\$7	11%
70250	Radiologic examination, skull	\$75	\$79	\$4	5%
71045	Radiologic examination, chest, single view	\$46	\$54	\$7	16%
71046	Radiologic examination, chest, 2 views	\$57	\$66	\$9	16%
71047	Radiologic examination, chest, 3 views	\$70	\$82	\$11	16%
71100	Radiologic examination, ribs, 2 views	\$68	\$78	\$10	15%
72040	Radiologic examination, spine, cervical, 2 views (AP and lateral)	\$74	\$84	\$10	14%
72070	Radiologic examination, spine, thoracic, 2 views (AP and lateral)	\$70	\$70	\$0	0%
72100	Radiologic examination, spine, lumbar, 2 views (AP and lateral)	\$73	\$84	\$12	16%
72170	Radiologic examination, pelvis, 1 view	\$66	\$66	\$0	0%
72220	Radiologic examination, sacrum and coccyx, 2+ views (AP and lateral)	\$58	\$68	\$9	16%
73000	Radiologic examination, clavicle, 2 views	\$56	\$65	\$9	16%
73030	Radiologic examination, shoulder, 2 view (or more)	\$59	\$69	\$10	16%
73060	Radiologic examination, humerus, 2 views (AP and lateral)	\$59	\$69	\$10	16%
73070	Radiologic examination, elbow, 2 views (AP and lateral)	\$56	\$63	\$7	12%
73080	Radiologic examination, elbow, 3 or more views	\$64	\$68	\$4	7%
73090	Radiologic examination, forearm, 2 views (AP and lateral)	\$53	\$61	\$8	16%
73100	Radiologic examination, wrist, 2 views	\$59	\$69	\$10	16%
73110	Radiologic examination, wrist, 3 views (PA, lateral and oblique)	\$73	\$84	\$12	16%
73120	Radiologic examination, hand, 2 views	\$53	\$61	\$8	16%
73130	Radiologic examination, hand, 3 views (PA, lateral and oblique)	\$64	\$74	\$10	16%

CPT #	Procedure Description	Current Fee	Proposed fee	Difference	% Change
73140	Radiologic examination, finger, 3 views (PA, lateral and oblique)	\$65	\$75	\$10	16%
73502	Radiologic examination, hip, unilateral, 2 views	\$86	\$100	\$14	16%
73521	Radiologic examination, hips, bilateral, 2 views each hip including AP view of pelvis	\$83	\$88	\$6	7%
73552	Radiologic examination, femur, 2 views (AP and lateral)	\$67	\$76	\$9	13%
73560	Radiologic examination, knee, 1 or 2 views	\$64	\$74	\$10	16%
73562	Radiologic examination, knee, 3 views (AP, lateral and sunrise or oblique)	\$74	\$85	\$12	16%
73565	Radiologic examination of bilateral knees, standing AP view, weight bearing	\$74	\$85	\$12	16%
73590	Radiologic examination, leg, tibia and fibula, 2 views	\$58	\$68	\$9	16%
73600	Radiologic examination of ankle, 2 views	\$62	\$70	\$8	13%
73610	Radiologic examination, ankle, complete, 3 views (AP, lateral and oblique)	\$64	\$74	\$10	16%
73620	Radiologic examination of foot, 2 views	\$54	\$61	\$7	13%
73630	Radiologic examination, foot, complete, 3 views (AP, lateral and oblique)	\$59	\$69	\$10	16%
73660	Radiologic examination, toes, 2 views (AP and lateral)	\$58	\$62	\$3	6%
74018	Radiologic examination, abdomen/KUB (kidney, ureters, bladder), 1 view	\$48	\$56	\$8	16%
Other Office Procedures					
93000	EKG (electrocardiogram)	\$35	\$38	\$3	9%
94010	Spirometry	\$76	\$79	\$3	4%
94760	Pulse Oximetry - Noninvasive	\$6	\$6	\$0	0%
86580	TB Skin Test (PPD)	\$15	\$14	-\$1	-7%
94640	Airway Inhalation Treatment	\$39	\$41	\$2	5%
In House Labs					
82075	Alcohol Breathalyzer test		\$30		
82962	Glucose (finger stick) by glucometer	\$4	\$3	-\$1	-18%
83037	Hemoglobin A1C (finger stick)	\$19	\$10	-\$9	-47%
82270	Occult Blood (guaiac) <i>Note: Indicate how many cards used by provider or issued to patient</i>	\$6	\$5		-17%
81025	Pregnancy Test, urine	\$12	\$9	-\$3	-28%
87880	Rapid Strep (throat swab)	\$23	\$28	\$5	22%
81003	Urinalysis, automated, without microscopy (dipstick)	\$4	\$4	\$0	0%
80305	Urine Drug Screen (UDS) 12 panel CLIA Waived Drug Test		\$13	\$13	
Send Out Labs					
Blood Tests (General)					
84460	Alanine Aminotransferase (ALT)(SGPT)	\$6	\$6	\$0	0%
82040	Assay of Albumin	\$6	\$5	-\$1	-17%
82088	Assay of Aldosterone	\$46	\$46	\$0	0%

CPT #	Procedure Description	Current Fee	Proposed fee	Difference	% Change
82105	AFP Tetra - drawn at 16-18 weeks gestation (Includes: Fetoprotein, serum; human chorionic gonadotrophin (hgc); unconjugated estrol (uE3); (DIA) diametric-inhibin A) AFP Tetra, (Alpha-Fetoprotein, serum), human chorionice gonadotropin (hGC)	\$127	\$74	-\$53	-42%
82677					
84702					
86336					
82105	AFP, Serum, Tumor Marker		\$17	\$17	
82140	Ammonia Level, Plasma	\$28	\$15	-\$13	-46%
82150	Amylase + Lipase	\$26	\$14	-\$12	-46%
83690					
82607	Anemia Profile (includes: CBC, iron, TIBC, B12, folic acid, ferritin, reticulocytes, Reticulocyte Count)	\$130	\$72	-\$58	-45%
82728					
82746					
83550					
85025					
85045					
83540					
85049	Automated Platelet Count	\$5	\$5	\$0	0%
80048	Basic Metabolic Panel (includes: calcium, carbon dioxide, chloride, creatinine, glucose, potassium, sodium and BUN)	\$16	\$9	-\$7	-44%
82247	Bilirubin, Total Newborn	\$6	\$6	\$0	0%
83880	B-Type Natriuretic Peptide (BNP)	\$65	\$40	-\$25	-38%
82310	Assay of Calcium	\$6	\$6	\$0	0%
82330	Assay of Calcium, Ionized	\$16	\$14	-\$2	-13%
85060	Blood Smear, peripheral interpretation CBC Blood Smear-Pathology review	\$47	\$47	\$0	0%
86360	CD4/CD8 Ratio Profile	\$87	\$47	-\$40	-46%
82550 82552	Assay of CP (CPK) CK, Total + Isoenzymes	\$8	\$21	\$13	163%
85025	Complete Blood Count (CBC) with Diff and Platelets	\$14	\$8	-\$6	-43%
80053	Comprehensive Metabolic Panel (includes: albumin, bilirubin total, calcium, carbon dioxide (bicarbonate), chloride, creatinine, glucose, phosphate alkaline, potassium, protein total, sodium, transferase alanine amino, transferase aspartate amino and BUN)	\$20	\$11	-\$9	-45%
84681	C-Peptide	\$39	\$21	-\$18	-46%
82626, 82627	Dehydroepiandrosterone (DHEA)	\$29	\$49	\$20	69%
80164	Depakote Level (valproic acid)	\$26	\$14	-\$12	-46%
80162	Digoxin Level	\$25	\$14	-\$11	-44%

CPT #	Procedure Description	Current Fee	Proposed fee	Difference	% Change
80185	Dilantin Level; phenytoin total	\$25	\$14	-\$11	-44%
80175	Drug Screen Quan Lamotrigine	\$15	\$27	\$12	80%
86663	Epstein - Barr (EB) virus, Mono IgG	\$25	\$17	-\$8	-32%
82670	Estradiol		\$28	\$28	
82728	Ferritin		\$14	\$14	
82746	Folic Acid (Folate)	\$27	\$15	-\$12	-44%
82950	Gestational Diabetes 1-HR (nonfasting)		\$5	\$5	
82947	Glucose Tolerance Test - 2 hours Panel	\$17	\$9	-\$8	-47%
82950					
82951, 82952	Glucose Tolerance Test (GTT) (2 hr 3 spec)	\$15	\$17	\$2	13%
84702	HCG (human chorionic gonadotropin) Quantitative, Serum	\$28	\$16	-\$12	-43%
83036	Hemoglobin A1c		\$10	\$10	
85014	Hematocrit (HCT) / Hemoglobin (Hgb) Panel	\$9	\$6	-\$3	-33%
85018					
83021	Hemoglobin Electrophoresis (hemoglobinopathy) Panel (HgB Frac. Profile)	\$45	\$25	-\$20	-44%
85660					
86706	Hepatitis B Surface Antibody (Qualitative)	\$21	\$11	-\$10	-48%
86803	Hepatitis C AB Text	\$20	\$15	-\$5	-25%
87522	Hepatitis C RNA Quant	\$72	\$72	\$0	0%
80074	Hepatitis Panel, Acute (includes: hep A antibody, IgM; hep B core antibody, IgM; hep B surface antigen; hep C virus antibody)	\$67	\$48	-\$19	-28%
86696	Herpes Simplex Type 2	\$24	\$20	-\$4	-5%
86695 86696	Herpes Simplex, Types 1 and 2, IgG (chronic)	\$25	\$38	\$13	52%
86694	Herpes Simplex, Types 1 and 2, IgM (acute)	\$28	\$15	-\$13	-46%
87389	HIV-a AG W/HIV-1 & HIV-2 AB HIV Ag/Ab with Reflex	\$29	\$25	-\$4	-14%
86348 86677	H. Pylori IgG Abs (blood test)	\$25	\$17	-\$8	-32%
83498	Hydroxyprogesterone, 17-D (ACTH)	\$52	\$28	-\$24	-46%
83615	LDH (Lactate Dehydrogenase)	\$11	\$7	-\$4	-36%
83625	Assay of LDH Enzymes	\$15	\$15	\$0	0%
83655	Lead - Blood (pedi)	\$23	\$13	-\$10	-43%
80061	Lipid Panel (includes: cholesterol serum total, HDL cholesterol, triglycerides, LDL and VLDL)	\$19	\$14	-\$5	-26%
80178	Lithium Blood Quantitative	\$13	\$10	-\$3	-24%

CPT #	Procedure Description	Current Fee	Proposed fee	Difference	% Change
80076	Liver Function Panel (includes: albumin, bilirubin total, phosphate alkaline, protein total, transferase alanine amino, transferase aspartate amino, LDH, GGT, bilirubin direct) (HFP7+2AC)	\$41	\$24	-\$17	-41%
82977					
83615					
83735	Magnesium, serum	\$13	\$7	-\$6	-46%
86765	Measles (rubeola) antibody titer	\$25	\$13	-\$12	-48%
86308	Mononucleosis Test		\$6	\$6	
86735	MMR Panel (Measles, Mumps, & Rubella antibody titers)	\$77	\$42	-\$35	-45%
86762					
86765					
86735	Mumps antibody titer	\$25	\$14	-\$11	-44%
83930	Osmolality, Serum	\$13	\$7	-\$6	-47%
83970	Parathormone (parathyroid hormone) PTH, Intact	\$79	\$42	-\$37	-47%
80184	Phenobarbital	\$22	\$16	-\$6	-27%
84100	Phosphorus	\$9	\$5	-\$4	-44%
84030	PKU (phenylalanine) New Born Screening	\$11	\$6	-\$5	-46%
84132	Potassium, Serum	\$9	\$5	-\$4	-46%
85025	Pre-Natal Profile Panel (includes: CBC, HIV-1, rubella, RPR, Rh(d), blood typing ABO, hep B antigen, RBC and antibody screen) (Includes ABO grouping and Rh typing, CBC with diff and platelets, HBsAG screen, rubella antibodies, IgG, syphilis serology, HIV screen)	\$114	\$80	-\$34	-30%
86850					
87389					
86762					
86592					
86901					
87340					
86900					
85610	Pro Time / INR	\$8	\$5	-\$3	-36%
84146	Prolactin Level	\$36	\$20	-\$16	-44%
84165 84155	Protein E-Phoresis Serum Protein Electrophoresis, Serum	\$12	\$15	\$3	25%
84155	Assay of Protein Serum	\$5	\$4	-\$1	-20%
84153	PSA (Prostate Specific Antigen) total-	\$35	\$19	-\$16	-46%
84244	Renin Activity (plasma)	\$42	\$22	-\$20	-48%
84550	Rheumatoid Panel (includes: uric acid, sed rate, ANA, ASO, C-reactive protein, rheumatoid factor)	\$70	\$41	-\$29	-41%
85652					
86038					
86060					
86140					
86431					

CPT #	Procedure Description	Current Fee	Proposed fee	Difference	% Change
86592	RPR (syphilis)	\$8	\$5	-\$3	-38%
86762	Rubella antibody titer	\$27	\$15	-\$12	-44%
85652	Sed Rate (blood test) nonautomated	\$5	\$3	-\$2	-43%
85660	Sickle Cell Screening	\$11	\$6	-\$5	-45%
84295	Sodium Serum	\$9	\$5	-\$4	-44%
80197	Tacrolimus (FK506)		\$54	\$54	
80156	Tegretol Level (carbamazepine)	\$28	\$15	-\$13	-46%
83001	Testicular Function Profile Panel (includes: FSH, LH, prolactin level, testosterone free and total, thyroxine total, TSH, T3/T4 TSH, Testosterone Serum, T3 uptake Thyroxine (T4), Free Thyroxine Index)	\$211	\$115	-\$96	-45%
83002					
84146					
84403					
84436					
84443					
84479					
86376	Thyroid auto-antibodies/Thyroid Peroxidase (TPO)	\$27	\$15	-\$12	-44%
84436	Thyroid with TSH Panel	\$57	\$31	-\$26	-46%
84443	(includes: thyroxine total, TSH, thyroid hormone T3/T4-T3 uptake, Thyroxine (T4)				
84479	Free Thyroxine Index, and TSH)				
84439	-Assay of Free Thyroxine Free (T4), Direct				
84443	TSH (thyroid stimulating hormone)	\$32	\$17	-\$15	-47%
84550	Uric Acid, blood	\$9	\$5	-\$4	-46%
86787	Varicella Zoster	\$25	\$13	-\$12	-48%
82607	Serum Vitamin B12	\$28	\$16	-\$12	-43%
82306	Calcifediol Vitamin D	\$57	\$30	-\$27	-47%
	Urine Tests (General)				
82570	Creatinine 24hr urine	\$10	\$6	-\$4	-40%
83835	Metanephrines Quantitative 24hr UA	\$32	\$17	-\$15	-47%
82043 82570	Microalbumin, urine	\$10	\$11	\$1	10%
84156	Protein Total Urine 24hr total	\$7	\$4	-\$3	-43%
81001	Urinalysis Auto w/Scope	\$4	\$4	\$0	0%
87086	Urinalysis culture and sensitivity	\$15	\$9	-\$6	-40%
80307	Urinalysis, nine drug screen panel (methadone, propoxyphene, amphetamine, benzodiazepines, cocaine, opiates, phencyclidine, barbiturates, THC)	\$108	\$63	-\$45	-42%

CPT #	Procedure Description	Current Fee	Proposed fee	Difference	% Change
Stool Tests (General)					
87045	Culture, Stool (includes: Bacteria, aerobic w/isolation & preliminary exam, addition pathogens if positive, Shiga-like toxin)	\$59	\$32	-\$27	-46%
87046					
87427					
87046	Culture, Stool (additional pathogens if positive)	\$18	\$10	-\$8	-44%
87338	H-pylori Stool Antigen		\$31		
82274	Assay test for Occult Blood Fecal (FIT)	\$18	\$16	-\$2	-11%
87177 87209	Ova and Parasites direct smears (concentration and identification) Stool	\$17	\$27	\$10	59%
Specialty Tests (General)					
87070	Aerobic culture and sensitivity	\$16	\$9	-\$7	-44%
87075	Anaerobic culture and sensitivity	\$18	\$15	-\$3	-17%
88305	Cervical Polyp Pathology of Biopsy (cytology form) per each cut	\$179	\$42	-\$137	-77%
87491	Chylmadia / Gonorrhea Trach DNA Amp Probe	\$132	\$72	-\$60	-45%
87591					
87635	COVID-19 NP,OP,AN		\$57	\$57	
88142	Pap Smear (Thin Prep liquid based for abnormal follow up)	\$29	\$21	-\$8	-28%
88302	Pathology of Biopsy	\$94	\$32	-\$62	-66%
87081, 87150	Strep Group B NAA		\$42	\$42	
87070	Upper Respiratory Culture		\$9	\$9	
87210	Wet Prep/ Wet Mount		\$11	\$11	
Vaccine Administration					
90471, 90472	*Fee for any vaccine administered	\$14	\$14	\$0	0%
Vaccines (purchased)					
90632	HEP A Vaccine Adult	\$75	\$75	\$0	0%
90636	Twinrix - Hepitatis A and Hepitatis B	\$79	\$79	\$0	0%
90649	HPV (Guardasil)	\$225	\$250	\$25	11%
90657	Flu Vaccine (6-35 months old)	\$25	\$25	\$0	0%
90658	Flu Vaccine (age 3 and up)	\$25	\$25	\$0	0%
90670	Pneumococcal Conjugate 13	\$200	\$205	\$5	3%
90707	MMR	\$80	\$85	\$5	6%
90714	Td	\$45	\$45	\$0	0%
90715	Tdap	\$60	\$60	\$0	0%
90716	Varicella (Chicken Pox)	\$135	\$150	\$15	11%
90723	Pediarix (Dtap/HepB/IPV)	\$90	\$90	\$0	0%
90732	Pneumovax - Adult	\$105	\$115	\$10	10%

CPT #	Procedure Description	Current Fee	Proposed fee	Difference	% Change
90734	Meningococcal (A, C, Y and W-135)	\$130	\$135	\$5	4%
90750	Shingrix (shingles) vaccine	\$310	\$160	-\$150	-48%
90736	Zostavax (shingles) vaccine	\$213	\$213	\$0	0%
90746	Hep B Vaccine Adult	\$65	\$65	\$0	0%
	*Vaccines (state supplied)				
	State supplied vaccines are not listed and are subject to change based on state availability.				
	*Fee for any vaccine administered				
	DT- Diptheria and Tetanus				
	DTaP - Tetanus, Diptheria, and Pertussis				
	Flu - Influenza				
	Hepatitis A				
	Hepatitis B				
	Hib - Haemophilus Influenzae Type-B				
	HPV Human Papillomavirus				
	IPV Polio				
	Kinrix - Diptheria, Pertussis Acellular, Tetanus, and Polio				
	MCV4 - Meningococcal Disease				
	Meningococcal B - Serogroup B Meningococcal Disease				
	MMR - Measles, Mumps, and Rubella				
	MMRV (ProQuad) - Measles, Mumps, Rubella and Varicella				
	PCV13 - 13 Types of Pneumococcal Bacteria				
	Pediarix - Tetanus, Diptheria, Pertussis, Polio and Hepatitis B				
	Pentacel - Diptheria, Tetanus, Pertussis, Poliomyelitis, & Haemophilus Influenza Type B				
	PPSV23 - 23 Types of Pneumococcal Bacteria				
	RotaTeq - Rotavirus				
	Td - Tetanus and Diptheria				
	Tdap - Tetanus, Diptheria and Pertussis				
	Varicella - Chickenpox				
	Office Medications				
96372	Administration fee for therapeutic or prophylactic injections subcutaneous or intramuscular	\$14	\$14	\$0	0%
J0561	* Bicillin Injection (state supplied)	\$0	\$0	\$0	0%
J0696	* Rocephin injection per 250mg (state supplied)	\$0	\$0	\$0	0%
J0696	Rocephin injection per 250mg (private)	\$7	\$7	\$0	0%
J0696	Rocephin injection per 500mg (private)	\$11	\$11	\$0	0%
J0696	Rocephin injection per 1 g (private)	\$13	\$15	\$2	15%
J1030	Depo-Medrol injection 40mg	\$3	\$5	\$2	67%

CPT #	Procedure Description	Current Fee	Proposed fee	Difference	% Change
J1040	Depo-Medrol injection 80mg	\$6	\$7	\$1	17%
J1050	Depo-Provera injection 150mg	\$22	\$15	-\$7	-32%
J1200	Diphenhydramine injection up to 50mg	\$24	\$20	-\$4	-17%
J1815	Insulin injection	\$8	\$6	-\$2	-29%
J2550	Promethazine HCL 25mg (Phenegren)	\$15	\$20	\$5	33%
J2790	Rhogam	\$120	\$120	\$0	0%
J2920	Solu Medrol injection up to 40mg	\$2	\$5	\$3	150%
J2930	Solu Medrol injection up to 125mg	\$3	\$6	\$3	100%
J3420	Vitamin B12 (cyanocobalamin) injection	\$1	\$2	\$1	100%
J7620D	DuoNeb (combination of Albuterol and Ipratropium)	\$4	\$4	\$0	0%
J7620A	Albuterol 0.83%	\$5	\$6	\$1	20%
J7620I	Ipratropium Bromide	\$5	\$6	\$1	20%
J7620S	Albuterol Sulfate Inhaler	\$8	\$5	-\$3	-38%
J2310	Narcan (Naloxone HCL)		\$70		
J0171	Epi Pen Jr. (3 units)	\$5	\$5	\$0	0%
J0171	Epi Pen Adult (15 units)	\$5	\$5	\$0	0%
	Miscellaneous				
99070	**Supplies and Materials	see ** note below			
				Avg Increase/Decrease	-3%

These rates were calculated based on the 2019 National Physician Fee Schedule Relative Value Unit rates rounded to the nearest whole dollar and the Clinical Diagnostic Laboratories Fee Schedule using midpoint ranges.

* These vaccines are provided to CHW at no charge by DSHS; therefore, only an administrative fee is charged.

** Fees for supplies issued to patients will be based on 150% of the original cost of the item at the time purchased.

The above codes and fees define the basic scope of services of the CHW Medical Clinic. As recommended by the medical director and approved by the Executive Director, additional codes may be used when medically indicated and financially feasible.

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COASTAL HEALTH & WELLNESS

GOVERNING BOARD

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

Governing Board

August 2020


Item#11


**Consider for Approval Privileging Rights for Locum Tenens
Monique Swan, FNP-C**



Date: August 27, 2020

To: CHW Governing Board

Thru: Kathy Barroso, CPA 
Executive Director

From: Cynthia Ripsin, MS, MPH, MD 
Medical Director

Re: Privileging

After review of the standard credentialing documents by a Coastal Health & Wellness Human Resources representative for Monique Swan, FNP-C who is certified by the American Academy of Nurse Practitioners to practice medicine with an unrestricted license in the State of Texas, we are requesting credentialing approval by the Governing Board.

- In addition, after review by Medical Director Cindy Ripsin, MD, of the privileging documents submitted by Monique Swan, we are requesting privileging approval by the Governing Board.

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