

SUSQUEHANNA COMMUNITY HEALTH AND DENTAL CLINIC, INC.
BOARD OF DIRECTORS MEETING MINUTES
May 24, 2022 5:30 PM

PRESENT: Kim Wetherhold, Board Chair; Jean Myers, Board Vice-Chair; Josh Warfel; Mark Thompson; Max Houseknecht, Jr., CFO; Matt McLaughlin, COO; and Jim Yoxtheimer, President & CEO (ex-officio)

PRESENT VIA ZOOM: Abbey Eschbach and Austin White

Excused: Rick Wyatt; Rev. Velinda Smith; Dr. Ralph Kaiser; Barb Vanaskie; Chris Ebner; and Shantay Hall

QUORUM MET

I Call to Order, Mission Statement, & Invocation

Kim Wetherhold, Board Chair, called the meeting to order at 5:30 PM, read the mission statement, and offered an invocation.

II CEO Update

a. CEO Report: Jim highlighted the following information from his CEO Report:

- Considerable time and effort from multiple management levels went into the budget development process. The documents were reviewed by the Executive/Finance Committee and approved to be presented to the Board.
- The Center recently received word that an additional \$75,000 will be added to the existing Family Planning grant. Although a pleasant surprise, credit should be offered to the staff who worked very hard to exceed patient care standards throughout the grant period.
- The Center received an additional \$60,000 from HRSA for the existing 330 grant that we will use to acquire an advanced population health software package.
- A change in dental leadership will occur by the beginning of July. Melinda Diggan has tendered her resignation as the director of that service to accept a position in the private consulting world. A decision not to replace the position was reached during the budget process. Fortunately, Dr. Dan Bozza and our existing director of medical operations have stepped up to assume many of Melinda's responsibilities. A handful of additional duties will be spread across a few other individual staff members.
- Two governance policies approved by the Executive/Finance Committee will be presented as part of the Consent Agenda later in this meeting. The policies include the Succession Plan and Delegation of Authority. No changes were recommended to the policies other than title changes in staff positions as well as change of committee name from Executive Committee to Executive/Finance Committee.
- The Personnel & Nominating Committee plan to meet on June 6 to create a slate of officers for the next fiscal year. The Board will hold elections during the annual meeting portion of the June meeting. Also, three directors will need to be considered for their second three-year term at the same time.

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- The quantity of COVID testing as well as immunizations administered decreased. The Center has been accommodating approximately 11 individuals for immunization daily and 18 for testing. To date, the Center has tested over 10,500 individuals and administered over 16,100 vaccine doses.

b. Dashboard

Matt reported that a rapid escalation in the testing and positivity rate for COVID-19 has been observed. Lycoming County continues to currently experience a high transmission rate. The good news was that hospitalization rates for COVID had not increased with the new variant.

- **Balanced Score Card:** Matt reviewed the Balanced Score Card indicating that while some numbers remain in the red, they have improved and are moving in the right direction.
- **Operational Indicators:** Matt reviewed the Operational Indicators which showed visits to be under budget but still growing from last fiscal year. Matt reported that in medical, a CRNP just returned from maternity leave. He also indicated that a dentist returned from her month-long military obligation. It is expected both will have a positive impact on visits for the month of May.

Matt reported that the turnover rate had been increasing. No outlying indicators exist for concern, possibly one reason to consider would be the availability of higher paying jobs in the healthcare sector as well as outside the healthcare sector. Management had instituted a focus, to help mitigate turnover, on starting each staff meeting with “Wins”. Staff is encouraged to share good things that have been happening in their department. Thank you cards are sent to employees who go above and beyond. The medical department has a reward system where an employee will receive a free lunch at the end of each month. Matt indicated that he does rounds twice a day in each department to show availability and presence.

III Quality Assurance/Quality Improvement Report

a. Clinical Quality Measures: Matt reported that the Clinical Quality Measures continue to do well. Areas for improvement were identified as well as action plans which have been put in place. The expanded rooming process has shown improvement in the quality measures.

b. Credentialing/Recredentialing: Matt explained the need for the Executive/Finance Committee to approve credentialing and privileging of the following providers prior to this meeting date. Management asked for the Board to ratify the action of the Executive Finance Committee.

Ratification of Executive/Finance Committee Action

- **Steven Leung, M.D.**
- **William Piotrowski, D.C.**
- **Susan King, LCSW**
- **Laura Farr, PHDHP**
- **Leonard Weber, PA-C**

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Motion #1 Jean Myers made the motion to ratify the decision made by the Executive/Finance Committee to approve Steven Leung, M.D.; William Piotrowski, D.C.; Susan King, LCSW; Laura Farr, PHDHP; and Leonard Weber, PA-C to the medical staff of River Valley Health and Dental. Mark Thompson seconded the motion. The motion passed unanimously.

Credentialing/Recredentialing

- **Charles Lamade, M.D.**

Dr. Richardson, on behalf of the QA/QI Committee, recommended reappointment of Dr. Charles Lamade to the staff at River Valley Health and Dental based on their recommendation and the results of the credentialing verification process. In addition, his request for practice privileges were reviewed and found suitable for granting the delineation of privileges as requested.

Motion #2 Mark Thompson made the motion to approve Dr. Charles Lamade's reappointment to the medical staff and to grant his privileges at River Valley Health and Dental. Jean Myers seconded the motion. The motion passed unanimously.

IV Financial Report

a. April 2022 Financial Summary Report: The highlights of the financial report were reviewed for April 2022, as were set forth in the summary provided to the board, which is hereby incorporated for all purposes herein. Matt reported that there was an excess of expenses over revenues of \$113,419 which brings the YTD excess of expenses over revenues to \$102,150. Net Days in A/R continue to be strong at 25. Days Cash on Hand was 36.85 and Current Ratio was 1.75.

Motion #3 Josh Warfel made the motion to approve the April 2022 Financial Report. Jean Myers seconded the motion. The motion passed unanimously.

V PR, Marketing & Fundraising Report

Jim reported highlights from the PR, Marketing, & Fundraising Committee meeting indicating that a tactical marketing plan was introduced to the committee where each month an emphasis was shown on health awareness, service, and culture. The Center has a fresh look for its advertising template. Looking ahead to June, the Center will be at Brandon Park again for the Juneteenth celebration offering vaccines and boosters as requested by the Let's End Covid! group.

Jim reported that the Center will be planning an open house during National Health Center Week, tentatively scheduled for August 10. If anyone who is not currently on this committee but would like to help with this event to please let Trudy or Jim know.

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VI Consent Agenda

Board of Directors Meeting Minutes, April 2022; Executive/Finance Committee Meeting Minutes, May 2022; Quality Assurance/Quality Improvement Meeting Minutes May 2022; and PR, Marketing, & Fundraising Meeting Minutes, May 2022

Motion #4 Kim Wetherhold made the motion to approve the Consent Agenda as presented. Austin White seconded the motion. The motion passed unanimously.

VII Old Business

There was no old business to be discussed.

VIII New Business

a. FY23 Operational Budget:

Max presented the FY23 Budget summary as follows:

- General Allocations: Max reported the allocations presented were developed using four different methodologies, which were the same methodologies used last year.
- Revenues: Patient mix was determined by using the 9-month actuals from FY22 for each individual service line.
 - Pharmacy revenue was calculated by taking average revenues from January – March 2022 due to significantly increased volumes as well as factoring an increase in hours beginning July 1st. In total, pharmacy revenues were increased by 62% over FY22 actuals.
 - Incentive revenues were calculated conservatively by utilizing a direct look at FY22 YTD revenue, as well as taking a percentage of additional available incentive dollars available, based on the review of the Chief Quality Officer.
 - Federal Grant revenues have been added in for all known expenses. State—COVID-19 testing funding was only budgeted through August 22 as the grant cycle is scheduled to end August 31st and no extension has been granted at this point.
- Productivity: Each area's productivity metrics were calculated by the department manager for that area in coordination with the finance team and COO. Calculations included a review of FY22 actual averages as well as taking into further account estimated time-off based on historical actuals, clinical hours worked throughout the month, and optimization of schedule templates to support access to care.
- Staffing:
 - Rolls in a 3% annual increase for all staff effective July 1st.
 - Estimated increase in health insurance costs due to January 1st renewal as well as increased costs associated with funding the HRA.
 - Elimination of the following currently vacant positions for FY23:
 - Director of Dental Operations
 - Nurse (LPN)
 - 2 Office Assistant positions
 - Staff Development Coordinator

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- Neighborhood Care Support Staff (due to mobile unit not being delivered until end of FY23 or beginning of FY24)
- Other Expenses: Clinical supplies were factored in by utilizing FY22 YTD actuals, less increases in COVID supplies, averaged to a per visit cost and then applied over FY23 budgeted visits. Recruitment/retention costs were budgeted at 19% over FY22 due to estimated increased costs associated with recruiting providers. Temporary staffing fees were reduced due to anticipated decreases in utilization of contracted nursing agency. Significant increases were budgeted in advertising expenses to allow for an enhanced marketing plan to assist in patient revenue. The remaining expense line items were factored using a 3-year historical average plus a 5% increase for inflation on average.

Max reported that with this budget the FY23 Operational Budget would cash flow with 29.47 days cash on hand at the end of the fiscal year and an excess of revenues over expenses of \$297,376.

Before discussion and motion, Max reviewed the H8F Grant Funds Year 2 Reallocation as below.

Motion #5 Kim Wetherhold made the motion to accept the FY23 Operational Budget. Josh Warfel seconded the motion. The motion passed unanimously.

c. H8F Grant Funds Year 2 Reallocation:

Max reminded the board that the organization was awarded \$2,979,875 for a 2-year project period that runs from 4/1/21 – 3/31/23. At the end of the first year of the project period, the organization had a significant amount of dollars that remained unspent due to extenuating circumstances surrounding the continued impacts of the COVID-19 pandemic. As such, leadership has looked at the grant documents as well as held discussions with other FQHC's across the Commonwealth regarding these grant funds and are proposing to reallocate the budgeted grant dollars. The proposed changes fall under the guidelines within HRSA that allow the organization to reallocate funds across the Object Class Categories without prior approval from HRSA, so long as the total of the change is less than 25% of the total award amount. In addition, the changes must be made to a category that already had budgeted line items. For this grant we can re-allocate \$744,969 without needing a prior approval. This proposal suggests a reallocation of 14.67% of the awarded funds or \$437,209.73.

In the reallocation, the leadership team proposed the following changes under the category of the grant labeled "Maintaining and Increasing Capacity":

- Medical/administrative laptop refresh (due by August 2022)
- Support staff, Patient Financial Services, and IT system refresh (due by December 2022)
- Phone system upgrade to enhance patient experience and support continued expansion
- Network infrastructure equipment for Clinton County
- Payroll costs to support existing positions to ensure continued availability of comprehensive medical and dental services

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It is estimated that the reallocation of the H8F grant funds will allow cash flow at the end of FY23 to be 43.23 days as opposed to the 29.47 above.

Motion #6 Kim Wetherhold made the motion to approve the H8F Grant Funds Year 2 Reallocation Budget. Austin White seconded the motion. The motion passed unanimously.

IX Announcements for Next Meeting

Kim Wetherhold made the announcement that Mark Thompson had agreed to join the Personnel & Nominating Committee. Their next meeting is scheduled for June 6, 2022. She thanked Mark for his willingness to serve on that committee.

With no further business to be brought before the board, Kim Wetherhold adjourned the meeting at 6:47 PM.

Next Meeting: June 28, 2022 @ 5:30 PM Community Room or via Zoom

Signatures:

Kimberly Wetherhold, Board Chair

Christopher Ebner, Board Secretary

Date: