

AGENDA

Thursday, December 9, 2021 – 12:30 PM

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

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

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

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

REGULARLY SCHEDULED MEETING

Meeting Called to Order Pledge of Allegiance

- Item #1 Comments from the Public
- *Item #2**ACTION**..... Agenda
- *Item #3**ACTION**..... Excused Absence(s)
- *Item #4**ACTION**..... Consider for Approval Minutes from October 28, 2021 Governing Board QA Meeting
- *Item #5**ACTION**..... Consider for Approval Ratification of the Action from the Executive Committee Meeting Friday, November 5, 2021
- *Item #6**ACTION**..... Receive and File Informational Report
a) Proposed 2022 Board Meeting Dates
- Item #7 Executive Director will report on Coastal Health & Wellness/COVID-19 Updates Submitted by Dr. Keiser
a) Executive Director
b) Dental Director
- Item #8**ACTION**..... Consider for Approval October 2021 Financial Report Submitted by Marlene Garcia
- Item #9**ACTION**..... Consider for Approval the Purchase of a New HR Software Platform Split Between GCHD and CHW in the Amount of 10, 971.45 From Each Fund \$21, 942.90 Total Submitted by Chantelle Smith
- Item #10**ACTION**..... Consider for Approval Coastal Health & Wellness Fund Balance Reserve as of September 30, 2021 Submitted by Marlene Garcia
- Item #11**ACTION**..... Consider for Approval Coastal Health & Wellness Credit Card and Refund Policy Submitted by Marlene Garcia
- Item #12**ACTION**..... Consider for Approval Coastal Health & Wellness Charge Capture Policy Submitted by Marlene Garcia

- Item #13**ACTION**.....Consider for Approval Coastal Health & Wellness Payment Posting Policy Submitted by Marlene Garcia
- Item #14**ACTION**.....Consider for Approval Coastal Health & Wellness 2021-2022 Risk Management Plan Submitted by Richard Mosquera
- Item #15**ACTION**.....Consider for Approval Re-Privileging Rights for UTMB Resident Nadine Abraham, MD, Submitted by Dr. Keiser
- Item #16**ACTION**.....Consider for Approval Privileging Rights for John David Walsh, NP Providing Tele-Psychiatry Services Submitted by Dr. Keiser
- Item #17**ACTION**.....Consider for Approval Privileging Rights for Shady Bishai, DDS, Submitted by Dr. Keiser
- Item #18**ACTION**.....Consider for Approval Default Opt-In Policy for Newly Registering CHW Patients Submitted by Richard Mosquera
- Item#19**ACTION**Consider for Approval Employee Satisfaction Survey by Samantha Robinson/Dr. Southerland
- Item #20.....Comments from Board Members

Adjournment

Next Regular Scheduled Meeting: January 27, 2022

Appearances before the Coastal Health & Wellness Governing Board

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

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

Executive Sessions

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

**Governing Board
December 2021
Item#3
Excused Absence(s)**

Governing Board

December 2021

Item#4

Consider for Approval Minutes from October 28, 2021

Governing Board QA Meeting

**Coastal Health & Wellness
Governing Board
October 28, 2021**

Board Members:

Samantha Robinson
Dr. Southerland
Virginia Valentino
Flecia Charles
Kevin Avery
Elizabeth Williams
Dr. Thompson

Staff:

Philip Keiser, Interim Executive Director
Ann O'Connell, Chief Operations Officer
Richard Mosquera, Chief Compliance Officer
Dr. Lindskog, Dental Director
Ami Cotharn, Chief Nursing Officer
Chantelle Smith
Marlene Garcia
Kristina Garcia

Pisa Ring
Martha Vallin
Jonathan Jordan
Kenna Pruitt
Luz Amaro
Ashley Tompkins
Tikeshia Thompson-Rollins
Anthony Hernandez

Excused Absence: Dorothy Goodman, and Brent Hartzell

Unexcused Absence: Victoria Dougharty, and Miroslava Bustamante

Items#1 Comments from the Public

There were no comments from the public.

Items#2-8 Consent Agenda

A motion was made by Virginia Valentino to approve the consent agenda items two through eight. Dr. Southerland seconded the motion, and the Board unanimously approved the consent agenda.

Item#9 Executive Director will Report on Coastal Health & Wellness/COVID-19 Updates Submitted by Dr. Keiser

Dr. Keiser, Interim Executive Director, presented an update on COVID-19 to the Board.

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

- We continue to follow CDC's Interim Infection Prevention and Control Recommendations for Healthcare Personnel which has a section dedicated to Dental Facilities.
- We have started to receive our supplies for root canals and crowns in Galveston and plan to offer those services by December 1, 2021, in both locations.
- Staffing: We have a dental assistant starting today. We have completed several phone interviews, one in person interview and have two additional in person interviews scheduled next week for the open dentist position. We have great applicants and plan to extend an offer within the next two weeks.
- There are not any updates regarding the partnership with the College of the Mainland Dental Hygiene Program. They have not hired their new program director yet, but the curriculum was recently approved.
- October is Dental Hygiene Awareness month. We have recognized our dental hygienists in our clinic, and they filmed a video reading "Dragon's Breath" at the Texas City library. This video was posted on our social media sites.
- Patient Services Manager (Pisa) is also working with Head Start to coordinate a date in November for dental and medical exams for their students

Item#10 Consider for Approval September 2021 Financial Report Submitted by Marlene Garcia

Marlene Garcia, Clinic Financial Officer, presented the September 2021 financial report to the Board. A motion to accept the financial report as presented was made by Dr. Southerland. Flecia Charles seconded the motion and the Board unanimously approved.

Item#11 Consider for Approval Quarterly Visit and Analysis Report Including Breakdown of New Patients by Payor Source for Recent New Patients Submitted by Marlene Garcia

Marlene Garcia, Clinic Financial Officer, presented the quarterly visit and analysis report including breakdown of new patients by payor source for recent new patients. A motion to accept the quarterly report as presented was made by Virginia Valentino. Flecia Charles seconded the motion and the Board unanimously approved.

Item#12 Consider for Approval the Quarterly Compliance Report for the Period Ending September 30, 2021 Submitted by Richard Mosquera

Richard Mosquera, Chief Compliance Officer, presented the quarterly compliance report for the period ending September 30, 2021. A motion to accept the quarterly report as presented was made by Virginia Valentino. Elizabeth Williams seconded the motion and the Board unanimously approved.

Item#13 Consider for Approval the Coastal Health & Wellness Risk Management Training Plan 2021-2022 Submitted by Richard Mosquera

Richard Mosquera, Chief Compliance Officer, presented the Coastal Health & Wellness risk management training plan 2021-2022. A motion to accept the plan as presented was made by Dr. Southerland. Virginia Valentino seconded the motion and the Board unanimously approved.

Item#14 Consider for Approval Coastal Health & Wellness Performance Improvement Plan Submitted by Ami Cotharn

Ami Cotharn, Chief Nursing Officer, asked the Board to consider for approval the Coastal Health & Wellness Performance Improvement Plan. A motion to accept the plan as presented was made by Virginia Valentino. Elizabeth Williams seconded the motion and the Board unanimously approved.

Item#15 Consider for Approval Re-Privileging Rights for Emily Bailey, MSW, LCSW, Submitted by Dr. Keiser

Dr. Keiser, Interim Executive Director, asked the Board to consider for approval re-privileging rights for Emily Bailey, MSW, LCSW. A motion to accept re-privileging rights for Emily Bailey, MSW, LCSW, was made by Virginia Valentino and seconded by Dr. Southerland. The Board unanimously approved the motion.

Item#16 Consider for Approval Privileging Rights for UTMB Resident Neda Shaghaghi, DO, Submitted by Dr. Keiser

Dr. Keiser, Interim Executive Director, asked the Board to consider for approval privileging rights for UTMB Resident Neda Shaghaghi, DO. A motion to accept privileging rights for Neda Shaghaghi, DO, was made by Virginia Valentino, and seconded by Elizabeth Williams. The Board unanimously approved the motion.

Item#17 Consider for Approval Privileging Rights for UTMB Resident Sara Hassan-Youssef, MD, Submitted by Dr. Keiser

Dr. Keiser, Interim Executive Director, asked the Board to consider for approval privileging rights for UTMB Resident Sara Hassan-Youssef, MD. A motion to accept privileging rights for Sara Hassan-Youssef, MD, was made by Virginia Valentino, and seconded by Elizabeth Williams. The Board unanimously approved the motion.

Item #18 Review of Coastal Health & Wellness & United Board of Health Organizational Chart

Dr. Keiser, Interim Executive Director, reviewed the Coastal Health & Wellness & United Board of Health Organizational Charts. Samantha Robinson, Board Chair, suggested adding dashes between Public Health, Shared

Services, and Coastal Health & Wellness on the Galveston County Health District Organizational Chart. A motion to add dashes and re-organization of the organizational chart was made by Virginia Valentino and seconded by Dr. Southerland. The Board unanimously approved the motion.

Item #19 Executive Session

The Governing Board will enter into a closed meeting as permitted under the Section 551.074(b) of the Texas Government Code, Personnel Matters; specifically, to discuss the Executive Director

Item #20 Reconvene into Regular Meeting

Reconvene at 2:08 p.m.

Item #21 Possible Action from Executive Session

Samantha Robinson, Board Chair, asked the Board to make a motion from executive session. It has been motion by Dr. Southerland, seconded by Virginia Valentino to accept Dr. Philip Keiser as the permanent Executive Director of Coastal Health & Wellness. Samantha Robinson stated she would like to abstain. The Board unanimously approved.

Item #22 Comments from Board Members

No comments

The meeting was adjourned at 2:10p.m.

Chair

Secretary/Treasurer

Date

Date

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Governing Board

December 2021

Item#5

**Consider for Approval Ratification of the Action from the Executive
Committee Meeting Friday, November 5, 2021**

**Coastal Health & Wellness
Governing Board
November 5, 2021**

Board Members

Zoom Call:

Samantha Robinson
Dr. Southerland
Virginia Valentino

Staff:

Ann O'Connell, Chief Operations Officer
Ami Cotharn, Chief Nursing Officer
Marlene Garcia, Clinic Financial Officer
Kenna Pruitt, Controller
Trisha Bailey, Chief Financial Officer
Tikeshia Thompson-Rollins

Items#1 Consider for Approval Submission to HRSA of the Non-Competing Process Report and Coastal Health & Wellness 2022-2023 Budget

Kenna Pruitt, Controller, and Marlene Garcia, Clinic Financial Officer, asked the Executive Committee to consider for approval submission to HRSA of the non-completing process report and Coastal Health & Wellness 2022-2023 budget. A motion to accept the report as presented was made by Dr. Southerland. Virginia Valentino seconded the motion and the Executive Committee unanimously approved.

The meeting was adjourned at 2:14p.m.

Chair

Secretary/Treasurer

Date

Date

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Governing Board

December 2021

Item#6

Receive and File Informational Report

a. Proposed 2022 Board Meeting Dates

Governing Board 2022 Meeting Dates

January 27, 2022

February 24, 2022

March 31, 2022

April 28, 2022

May 26, 2022

June 30, 2022

July 28, 2022

August 25, 2022

September 29, 2022

October 27, 2022

November 10, 2022

December 8, 2022

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Governing Board

December 2021

Item#7

Executive Director will report on Coastal Health & Wellness/COVID-19 Updates Submitted by Dr. Keiser

[Coastal Health & Wellness December2021 Coastal Wave \(govdelivery.com\)](#)

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

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COASTAL HEALTH & WELLNESS

GOVERNING BOARD

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

Governing Board

December 2021

Item#8

Consider for Approval October 2021 Financial Report

Submitted by Marlene Garcia

COASTAL HEALTH & WELLNESS

Governing Board



FINANCIAL SUMMARY

For the Period Ending

October 31, 2021

December 3, 2021

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

CHW - BALANCE SHEET as of October 31, 2021

ASSETS

	Current Month Oct-21	Prior Month Sep-21	Increase (Decrease)
Cash & Cash Equivalents	\$7,350,316	\$7,167,599	\$182,716
Accounts Receivable	1,901,127	2,013,533	(112,405)
Allowance For Bad Debt	(1,001,069)	(971,778)	(29,291)
Pre-Paid Expenses	296,474	135,891	160,583
Due To / From	(22,492)	64,621	(87,113)
Total Assets	\$8,524,355	\$8,409,866	\$114,489

LIABILITIES

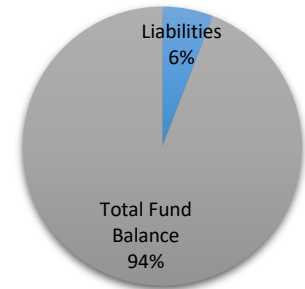
Accounts Payable	\$79,646	\$107,678	(\$28,032)
Accrued Salaries	381,220	308,194	73,026
Deferred Revenues	41,033	42,383	(1,351)
Total Liabilities	\$501,899	\$458,256	\$43,643

FUND BALANCE

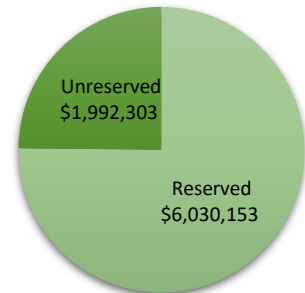
Fund Balance	\$6,426,698	\$6,426,698	0
Current Change	1,595,758	1,524,912	70,846
Total Fund Balance	\$8,022,456	\$7,951,610	\$70,846

TOTAL LIABILITIES & FUND BALANCE	\$8,524,355	\$8,409,866	\$114,489
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Current Period Assets



Total Fund Balance



CHW - REVENUE & EXPENSES as of October 31, 2021

REVENUE

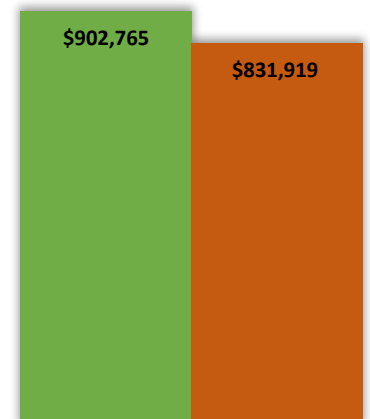
	Actual Oct-21	Budgeted Oct-21	MTD Budget Variance	YTD Budget Variance
County Revenue	\$311,222	\$311,222	\$0	\$0
DSRIP Revenue	0	65,833	(65,833)	483,251
HHS Grant Revenue	365,953	269,783	96,169	656,873
Patient Revenue	219,974	241,682	(21,708)	(74,251)
Other Revenue	5,616	8,851	(3,235)	4,379
Total Revenue	\$902,765	\$897,372	\$5,393	\$1,070,253

EXPENSES

Personnel	\$573,771	\$615,556	\$41,785	\$200,993
Contractual	59,842	57,257	(2,585)	(90,013)
IGT Reimbursement	0	21,666	21,666	(150,352)
Supplies	72,726	80,159	7,434	113,247
Travel	3,251	2,778	(473)	11,211
Bad Debt Expense	29,291	24,674	(4,617)	(76,517)
Other	93,039	95,283	2,244	(19,124)
Total Expenses	\$831,919	\$897,372	\$65,453	(\$10,556)
CHANGE IN NET ASSETS	\$70,846	\$0	\$70,846	\$1,059,697

Current Month Actuals

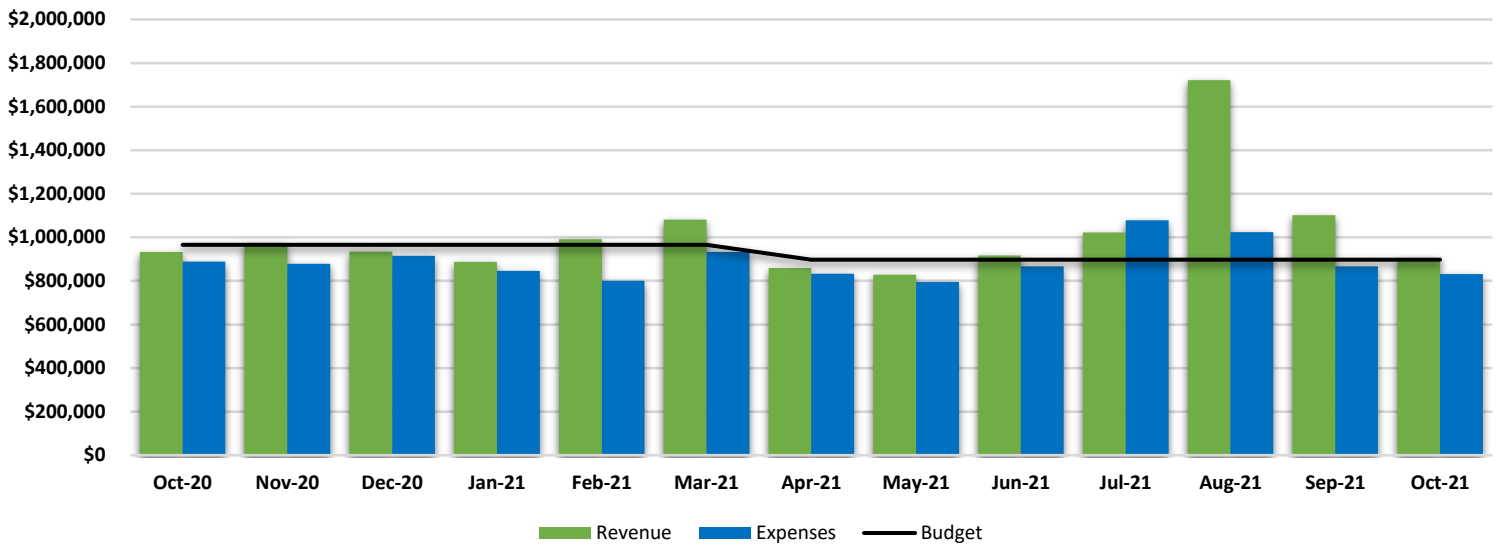
Revenue Expenses



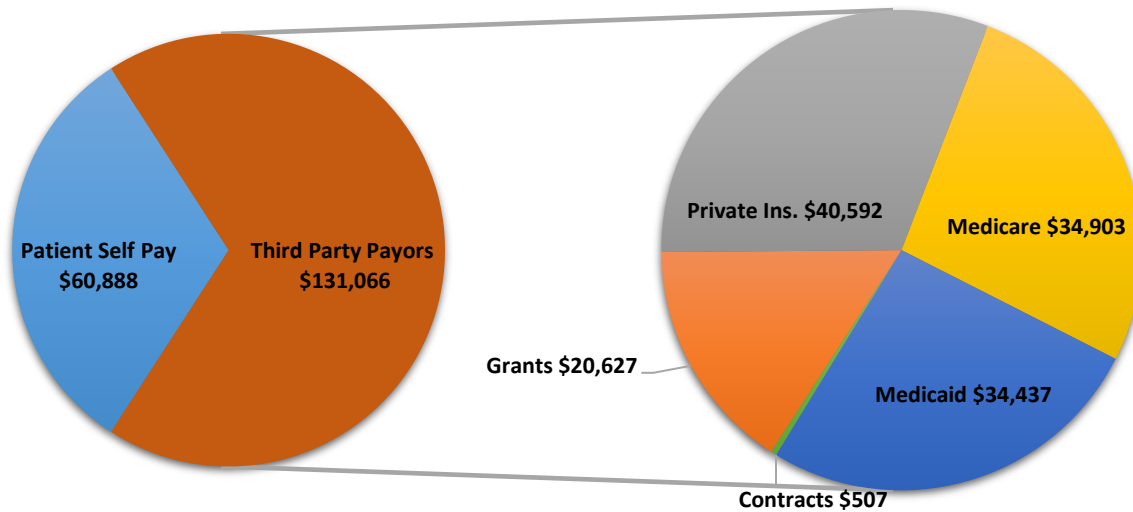
HIGHLIGHTS

- MTD increase in fund balance of \$70,846.
- All HHS Grant revenue for Oct was accrued equal to the expenses for the month in the amount of \$365,952.52
- Total Revenue is overbudget for the month by \$5,393.02. All Other Revenue categories are all underbudget for Oct 21.
- Total Expense for Oct 21 is underbudget by \$65,452.83.
- IGT Reimbursement was not paid out in October and is not expected to be paid until the first week of January 2022 in the amount of \$31,350.
- Interest Revenue is underbudget for Oct in the amount of \$3,481.96. This is due to the annual percentage yield earned that dropped to 0.40% since Mar 21. The APY earned for the other month before Mar was 1.41%.

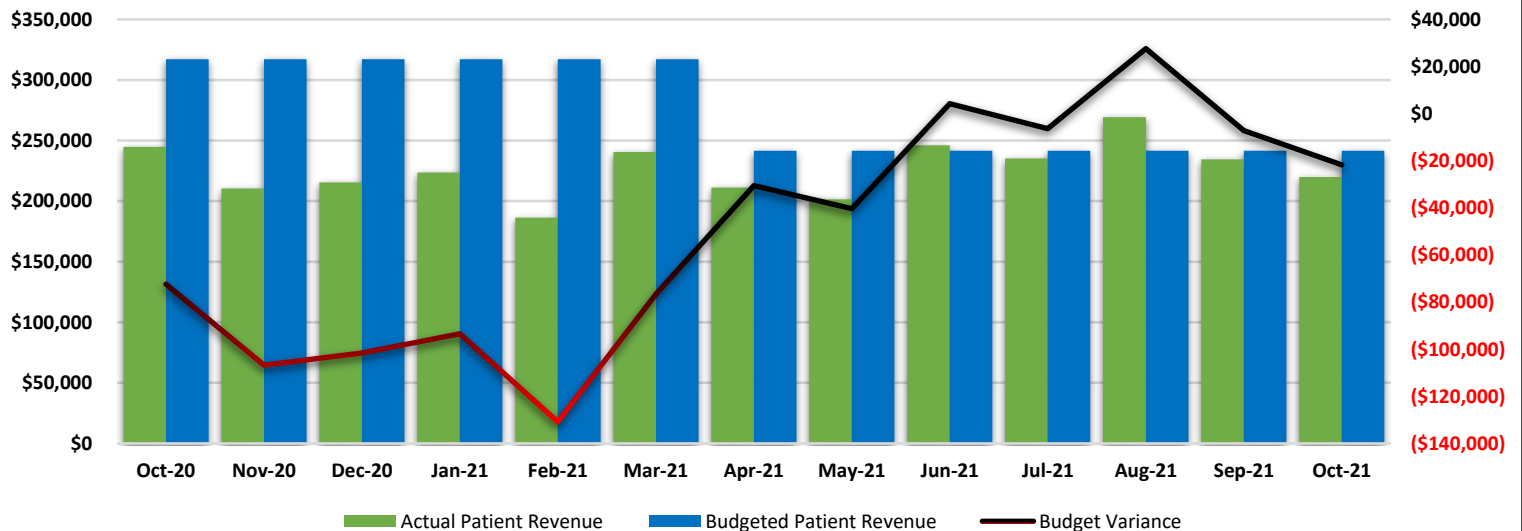
Actual Revenue & Expenses in Comparison to Budget

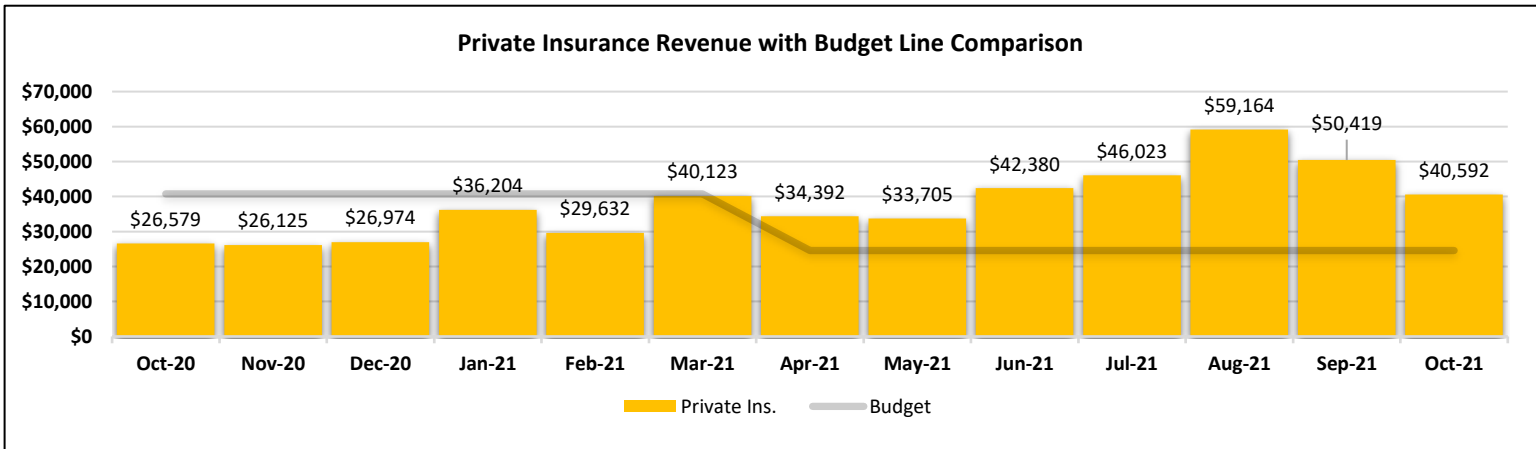
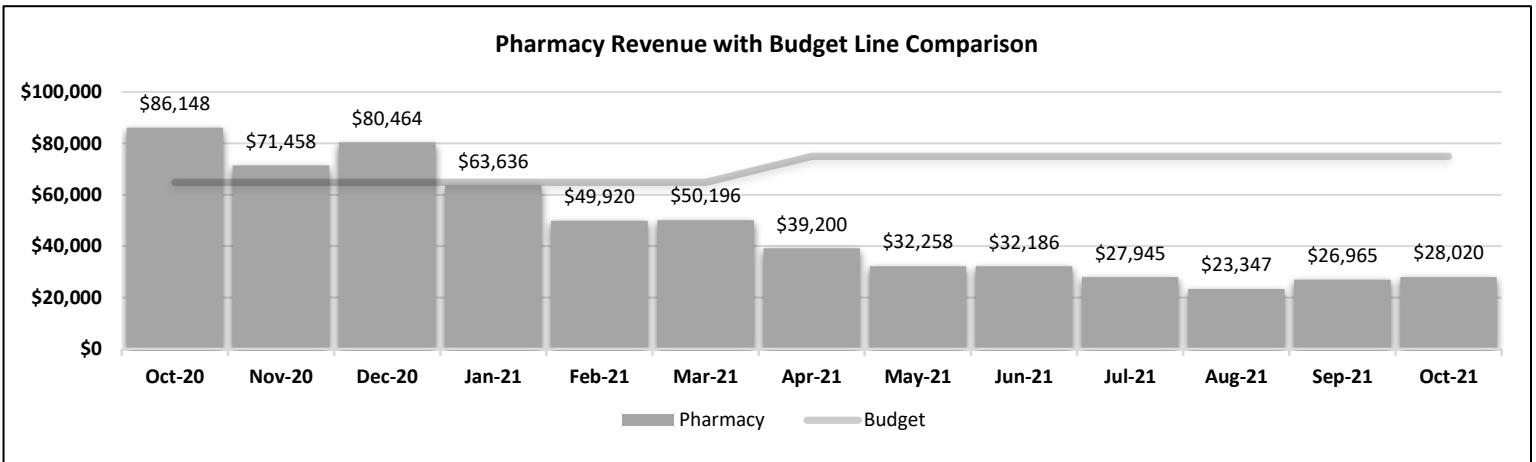
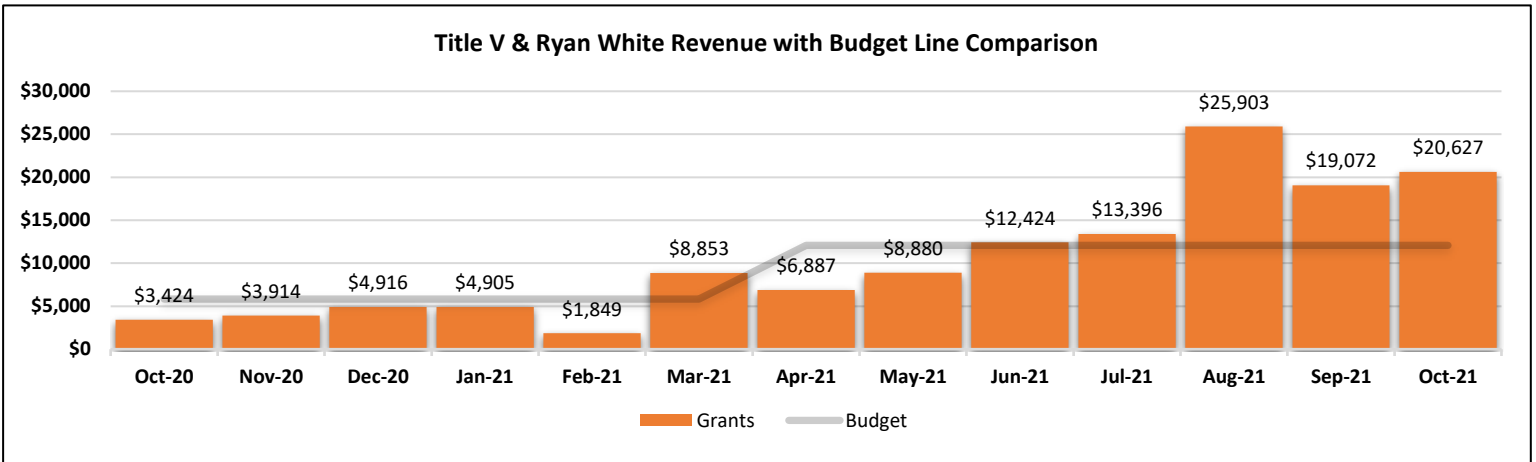
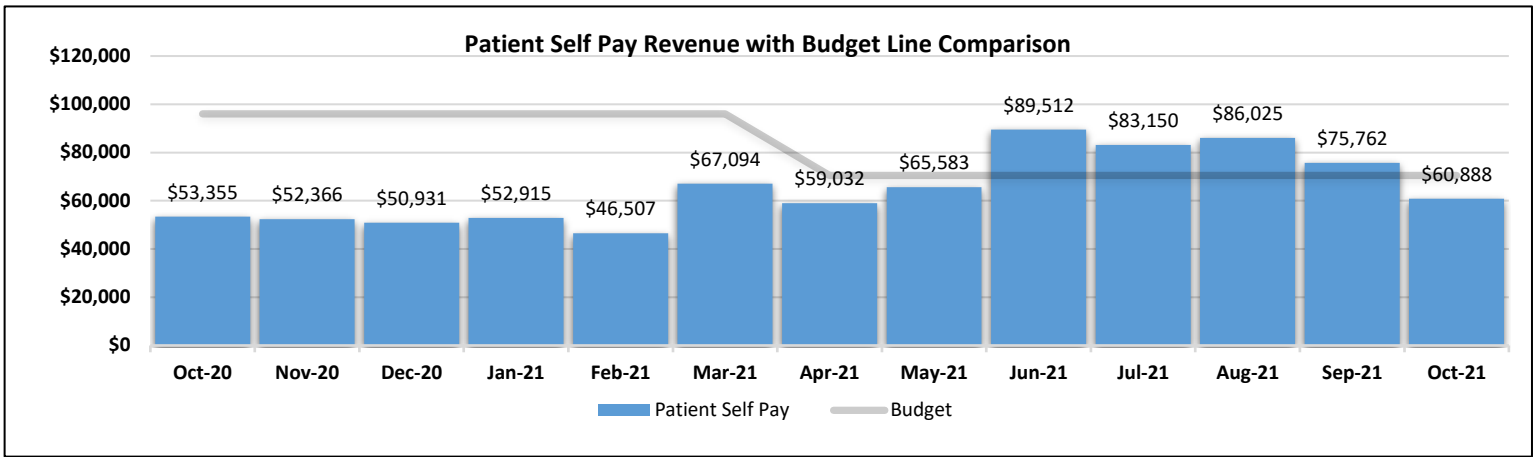


Current Period Patient Revenue with Third Party Payor Contributions Identified

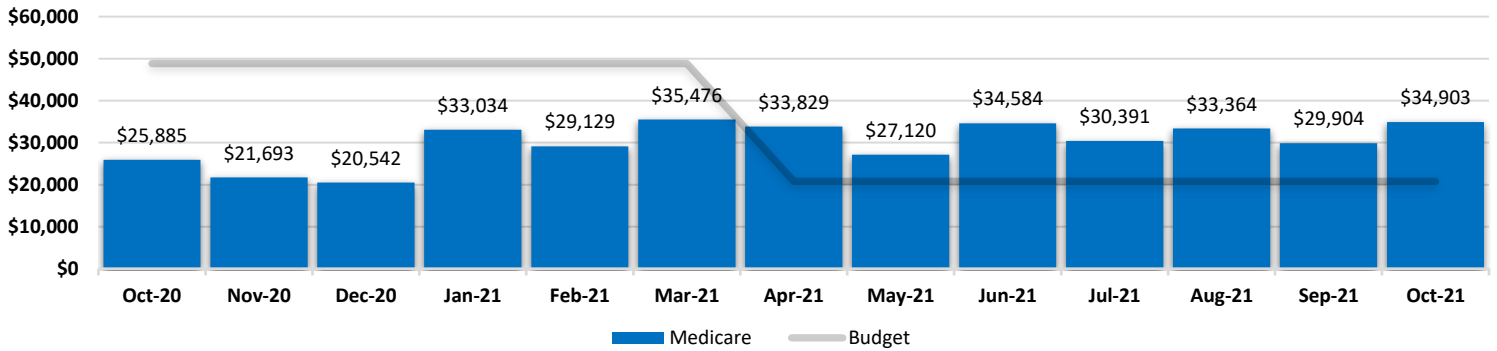


Actual Patient Revenue Rec'd vs Budget with Variance

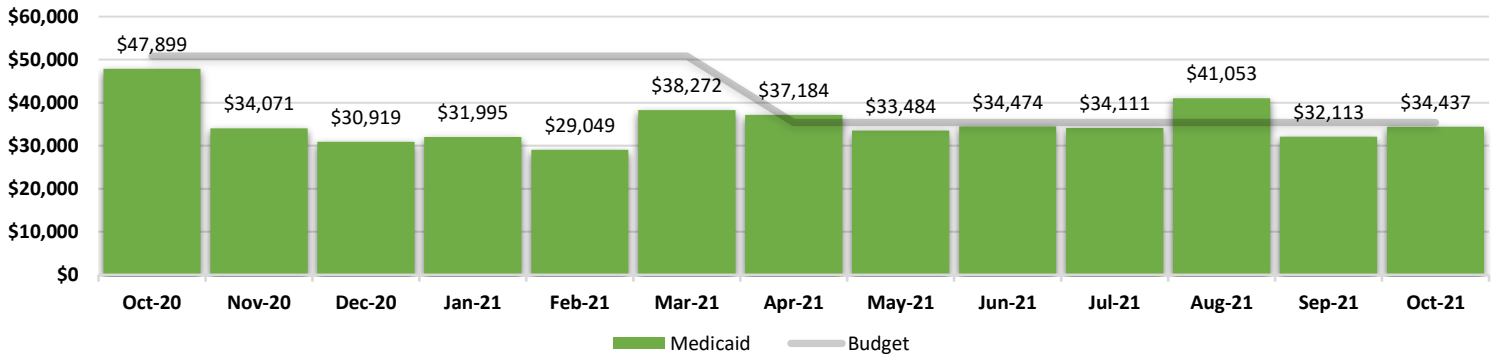




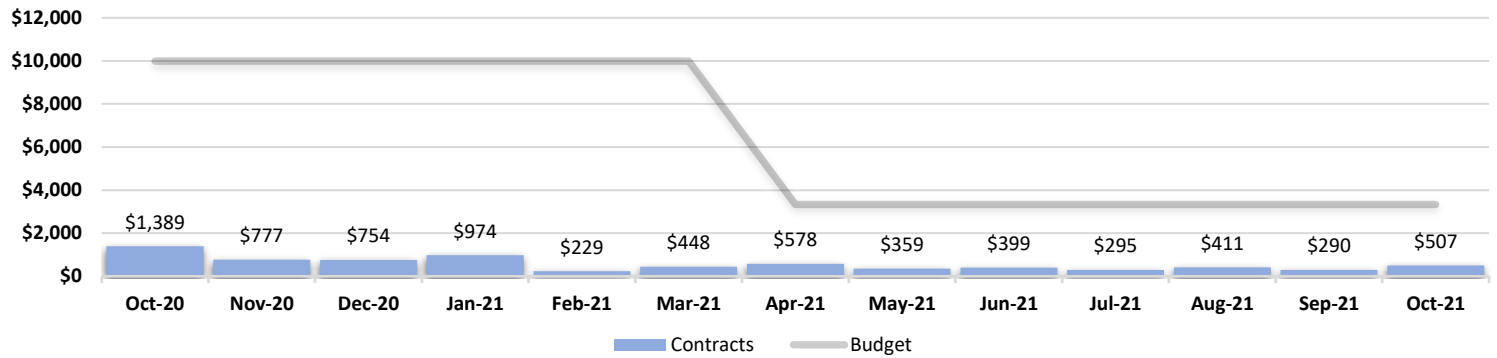
Medicare Revenue with Budget Line Comparison



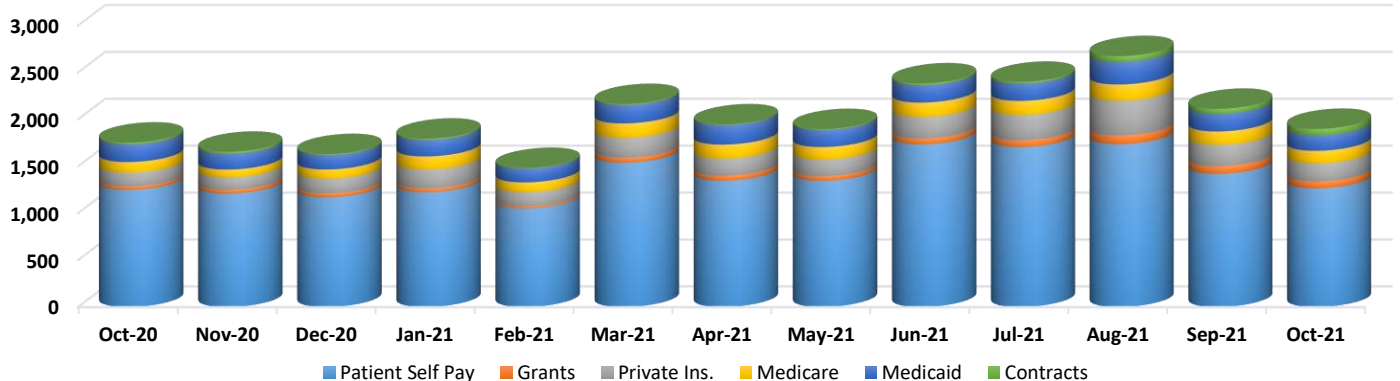
Medicaid Revenue with Budget Line Comparison



Contract Revenue with Budget Line Comparison



Total Number of Patient Visits



Coastal Health & Wellness
Statement of Revenue and Expenses for the Period ending October 31, 2021

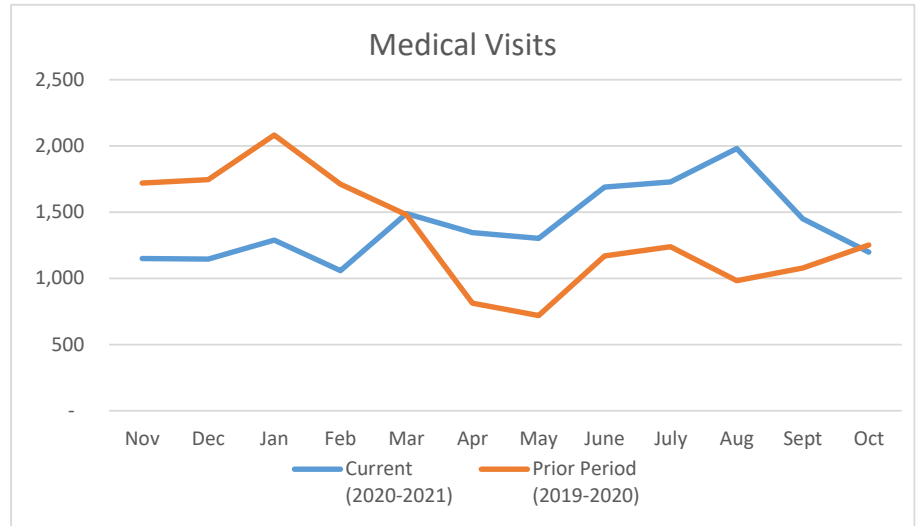
Cost Category	Account Description	Annual Budget	Period Ending 10/31/2021	MTD Budget	MTD Budget Variance	YTD Actual	YTD Budget	YTD Budget Variance
<u>Grouping</u>	<u>Revenue</u>							
HHS	HHS Grant Revenue - HRSA	3,237,400	365,953	269,783	96,169	2,518,081	1,888,483	629,597
	Base Funding	3,237,400	255,794	269,783	(13,990)	1,952,602	1,888,483	64,119
	HHS QI 19	-	-	-	-	-	-	-
	COVID Supplemental	-	-	-	-	-	-	-
	COVID CARES	-	-	-	-	153,395	-	153,395
	COVID ECT	-	1,082	-	1,082	87,531	-	87,531
	HHS QI 20	-	-	-	-	8,425	-	8,425
	Hypertension (HTN)	-	-	-	-	1,589	-	1,589
	COVID ARP	-	109,077	-	109,077	314,539	-	314,539
HHS	HHS Grant Revenue - Other	-	-	-	-	27,275	-	27,275
Patient	Grant Revenue (Title V, Ryan White)	144,977	20,627	12,081	8,545	107,187	84,570	22,617
Patient	Patient Fees	845,950	60,888	70,496	(9,608)	519,953	493,471	26,482
Patient	Private Insurance	294,821	40,592	24,568	16,024	306,675	171,979	134,696
Patient	Pharmacy Revenue - 340b	900,000	28,020	75,000	(46,980)	209,921	525,000	(315,079)
Patient	Medicare	249,596	34,903	20,800	14,103	224,095	145,598	78,497
Patient	Medicaid	424,845	34,437	35,404	(966)	246,856	247,826	(970)
Other	Local Grants & Foundations	16,208	1,351	1,351	0	11,455	9,455	2,000
Other	Medical Record Revenue	15,000	268	1,250	(982)	4,563	8,750	(4,187)
Other	Medicaid Incentive Payments	-	1,415	-	1,415	31,356	-	31,356
County	County Revenue	3,734,667	311,222	311,222	-	2,178,556	2,178,556	-
DSRIP	DSRIP Revenue	790,000	-	65,833	(65,833)	944,085	460,833	483,251
Other	Miscellaneous Revenue	-	-	-	-	416	-	416
Other	Gain on Fixed Asset Disposals	-	-	-	-	656	-	656
Other	Interest Income	70,000	2,351	5,833	(3,482)	15,373	40,833	(25,460)
Patient	CHW Contract Revenue	40,000	507	3,333	(2,826)	2,840	23,333	(20,493)
Other	Local Funds / Other Revenue	5,000	231	417	(185)	2,515	2,917	(401)
	Total Revenue	\$ 10,768,464	\$ 902,765	\$ 897,372	\$ 5,393	\$ 7,351,857	\$ 6,281,604	\$ 1,070,253
	<u>Expenses</u>							
Personnel	Hourly Pay	5,832,411	457,004	486,034	29,030	3,284,263	3,402,240	117,977
Personnel	Supplemental/Merit Compensation	-	-	-	-	5,000	-	(5,000)
Personnel	Provider Incentives	67,000	1,000	5,583	4,583	4,000	39,083	35,083
Personnel	Overtime	42,000	4,109	3,500	(609)	18,846	24,500	5,654
Personnel	Part-Time Hourly Pay	202,460	25,607	16,872	(8,735)	143,662	118,102	(25,560)
Personnel	Comp Pay Premium	-	-	-	-	11	-	(11)
Personnel	FICA Expense	470,018	35,371	39,168	3,797	256,283	274,177	17,895
Personnel	Texas Unemployment Tax (SUTA)	12,759	928	1,063	135	15,602	7,443	(8,159)
Personnel	Life Insurance Expense	14,961	1,301	1,247	(54)	9,776	8,727	(1,048)
Personnel	Long Term Disability Coverage	13,989	994	1,166	172	7,421	8,160	739
Personnel	Employer Paid Health Insurance	494,769	27,778	41,231	13,453	201,341	288,615	87,275
Personnel	Worker's Comp Insurance	18,437	1,325	1,536	212	3,799	10,755	6,956
Personnel	Cobra Expense	-	1,120	-	(1,120)	2,487	-	(2,487)
Personnel	Employer Sponsored Healthcare	79,016	4,902	6,585	1,683	36,953	46,093	9,139
Personnel	Pension/Retirement	138,849	11,010	11,571	560	78,188	80,995	2,807
Contractual	Outside Lab Contract	146,448	17,854	12,204	(5,650)	123,005	85,428	(37,577)
Contractual	Outside X-Ray Contract	18,000	1,200	1,500	300	10,104	10,500	396
Contractual	Misc Contract Services	237,722	15,270	19,810	4,540	190,067	138,671	(51,396)
Personnel	Temporary Staffing	-	1,323	-	(1,323)	40,265	-	(40,265)
Contractual	CHW Billing Contract Services	72,000	6,898	6,000	(898)	49,960	42,000	(7,960)
IGT	IGT Reimbursement	259,989	-	21,666	21,666	302,013	151,660	(150,352)
Contractual	Janitorial Contract	168,780	16,396	14,065	(2,331)	102,513	98,455	(4,058)
Contractual	Pest Control	960	80	80	(0)	561	560	(1)
Contractual	Security	43,176	2,145	3,598	1,453	14,604	25,186	10,582
Supplies	Office Supplies	82,600	7,672	6,883	(789)	60,528	48,183	(12,345)
Supplies	Operating Supplies	228,132	37,427	19,011	(18,416)	204,853	133,077	(71,776)
Supplies	Outside Dental Supplies	40,200	3,080	3,350	270	26,209	23,450	(2,759)
Supplies	Pharmaceutical Supplies	600,000	16,387	50,000	33,613	137,114	350,000	212,886
Supplies	Janitorial Supplies	5,400	2,534	450	(2,084)	3,248	3,150	(98)
Supplies	Printing Supplies	5,580	194	465	271	2,516	3,255	739
Supplies	Uniform Supplies	-	-	-	-	-	-	-

Coastal Health & Wellness
Statement of Revenue and Expenses for the Period ending October 31, 2021

Cost Category	Account Description	Annual Budget	Period Ending 10/31/2021	MTD Budget	MTD Budget Variance	YTD Actual	YTD Budget	YTD Budget Variance
Supplies	Controlled Assets (i.e. computers)	-	5,432	-	(5,432)	13,400	-	(13,400)
Other	Postage	9,000	353	750	397	4,109	5,250	1,141
Other	Telecommunications	64,500	3,941	5,375	1,434	39,563	37,625	(1,938)
Other	Water	372	31	31	1	214	217	4
Other	Electricity	18,000	1,083	1,500	417	9,145	10,500	1,355
Travel	Travel, Local	3,200	38	267	229	581	1,867	1,286
Travel	Travel, Out Of Town	-	489	-	(489)	489	-	(489)
Travel	Training, Local	30,135	-	2,511	2,511	6,301	17,579	11,278
Travel	Training, Out Of Town	-	2,724	-	(2,724)	4,059	-	(4,059)
Other	Rentals	39,240	3,496	3,270	(226)	24,346	22,890	(1,456)
Other	Leases	517,464	43,327	43,122	(205)	301,872	301,854	(18)
Other	Maint/Repair, Equip.	81,844	8,712	6,820	(1,892)	56,880	47,742	(9,137)
Other	Maint/Repair, Bldg.	2,400	3,049	200	(2,849)	8,549	1,400	(7,149)
Other	Maint/Repair, IT Equipment	-	-	-	-	-	-	-
Other	Insurance, Auto/Truck	108	8	9	1	59	63	4
Other	Insurance, General Liability	11,808	865	984	119	6,489	6,888	399
Other	Insurance, Bldg. Contents	18,372	1,171	1,531	360	8,066	10,717	2,651
Other	Settlements	-	-	-	-	-	-	-
Other	IT Equipment	-	-	-	-	-	-	-
Other	Operating Equipment	-	-	-	-	-	-	-
Other	Building Improvements	-	-	-	-	-	-	-
Other	Newspaper Ads/Advertising	23,600	755	1,967	1,211	10,333	13,767	3,434
Other	Subscriptions, Books, Etc.	18,623	295	1,552	1,257	13,504	10,863	(2,641)
Other	Association Dues	34,710	3,066	2,893	(173)	19,959	20,248	289
Other	IT Software / Licenses	259,929	21,445	21,661	215	161,010	151,625	(9,385)
Other	Prof Fees/Licenses/Inspections	1,670	-	139	139	1,114	974	(140)
Other	Professional Services	22,800	20	1,900	1,880	1,374	13,300	11,926
Other	Med/Hazard Waste Disposal	5,400	410	450	40	2,789	3,150	361
Other	Transportation	6,000	202	500	298	3,003	3,500	497
Other	Board Meeting Operations	350	-	29	29	366	204	(162)
Other	Service Charge - Credit Cards	7,200	811	600	(211)	6,885	4,200	(2,685)
Other	Cashier Over/Short	-	-	-	-	1	-	(1)
Bad Debt	Bad Debt Expense	296,083	29,291	24,674	(4,617)	249,232	172,715	(76,517)
Other	Miscellaneous Expense	-	-	-	-	3,278	-	(3,278)
	Total Expenses	\$ 10,768,464	\$ 831,919	\$ 897,372	\$ 65,453	\$ 6,292,160	\$ 6,281,604	\$ (10,556)
	Net Change in Fund Balance	\$ -	\$ 70,846	\$ -	\$ 70,846	\$ 1,059,697	\$ -	\$ 1,059,697

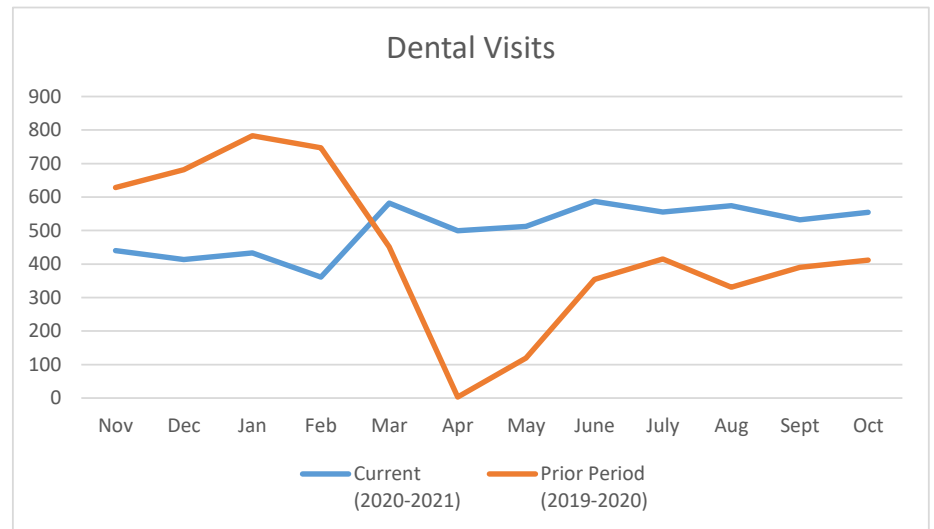
Medical Visits

	<u>Current</u> (2020-2021)	<u>Prior Period</u> (2019-2020)
Nov	1,150	1,719
Dec	1,145	1,745
Jan	1,288	2,082
Feb	1,058	1,710
Mar	1,488	1,480
Apr	1,345	812
May	1,301	719
June	1,689	1,170
July	1,727	1,238
Aug	1,980	981
Sept	1,450	1,077
Oct	1,198	1,251
	<u>16,819</u>	<u>15,984</u>



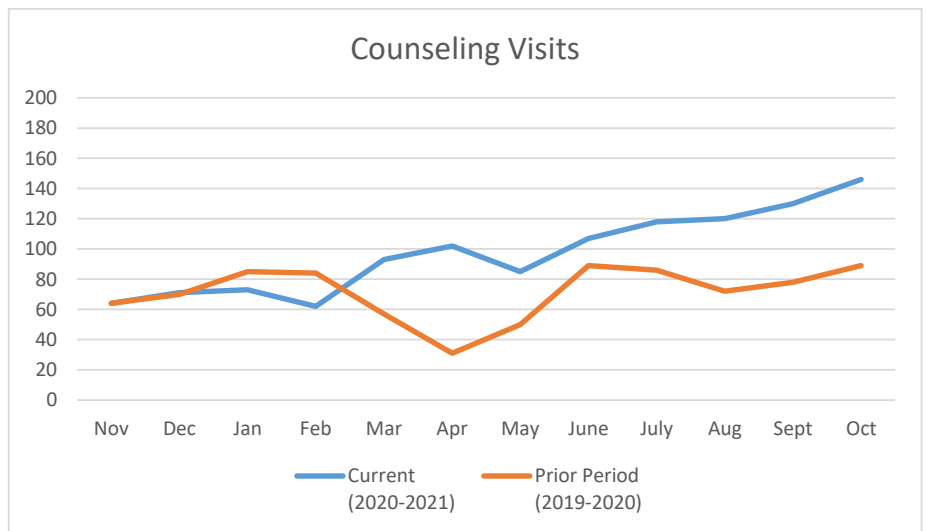
Dental Visits

	<u>Current</u> (2020-2021)	<u>Prior Period</u> (2019-2020)
Nov	440	628
Dec	413	682
Jan	433	783
Feb	361	747
Mar	582	451
Apr	499	3
May	512	119
June	587	354
July	555	415
Aug	574	331
Sept	532	390
Oct	554	412
	<u>6,042</u>	<u>5,315</u>



Counseling Visits

	<u>Current</u> (2020-2021)	<u>Prior Period</u> (2019-2020)
Nov	64	64
Dec	71	70
Jan	73	85
Feb	62	84
Mar	93	57
Apr	102	31
May	85	50
June	107	89
July	118	86
Aug	120	72
Sept	130	78
Oct	146	89
	<u>1171</u>	<u>855</u>



Vists by Financial Class - Actual vs. Budget
As of October 31, 2021 (Grant Year 4/1/2021 -3/31/2022)

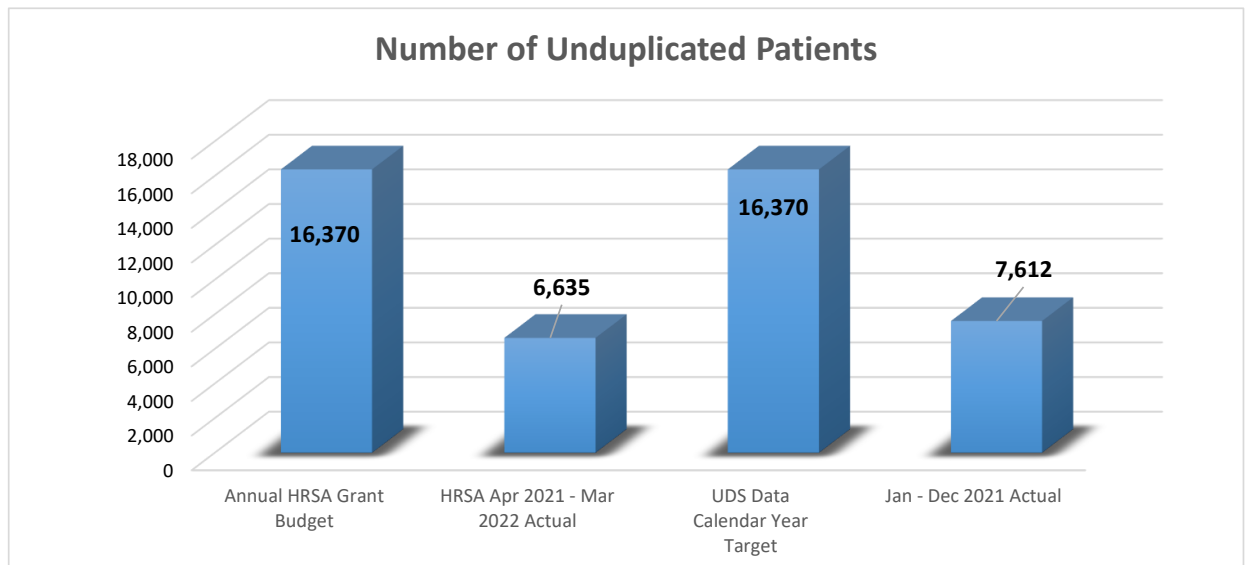
	Annual HRSA			Over/(Under)			Over/(Under)	%
	Grant Budget	MTD Actual	MTD Budget	MTD Budget	YTD Actual	YTD Budget	YTD Budget	Over/ (Under) YTD Budget
Medicaid	3,147	165	262	(97)	1,280	2,623	(1,343)	-51%
Medicare	2,713	136	226	(90)	913	2,261	(1,348)	-60%
Other Public (Title V, Contract, Ryan White)	1,273	142	106	36	596	1,061	(465)	-44%
Private Insurance	2,941	191	245	(54)	1,461	2,451	(990)	-40%
Self Pay	24,170	1,264	2,014	(750)	9,186	20,142	(10,956)	-54%
	34,244	1,898	2,854	(956)	13,436	28,537	(15,101)	-53%

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

	Current Year	Jan-Oct 2020	Jan-Oct 2021	Increase/ (Decrease) Prior	%
Unduplicated Patients	Annual Target	Actual	Actual	Year	of Annual Target
	16,370	7,424	7,612	188	46%

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

	Annual HRSA	Apr-Oct 2020	Apr-Oct 2021	Increase/ (Decrease) Prior	%
Unduplicated Patients	Grant Budget	Actual	Actual	Year	of Annual Target
	16,370	4,999	6,635	1,636	41%



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Governing Board

December 2021

Item#9

**Consider for Approval the Purchase of a New HR Software
Platform Split Between GCHD and CHW in the Amount of 10, 971.45
From Each Fund \$21, 942.90 Total Submitted by Chantelle Smith**

Request for Approval of HR Applicant Tracking System Software with BambooHR

Consider for approval the purchase of an HR Software platform split between GCHD and CHW in the amount of \$10,971.45 from each fund for a total of \$21,942.90.

Throughout the progressive personnel growth for all GCHD entities, the HR department has borne the load of talent acquisition and personnel management without having a critical resource, an HR Applicant Tracking System (ATS). All recruitment related needs and tasks are being performed by hand using MS Word and MS Excel. While these programs have useful features, they are lacking considerably with regard to talent acquisition and personnel maintenance needs. Not having a formal Applicant Tracking System has caused many delays in acquiring key talent in a timely manner. It has also resulted in the loss of highly qualified candidates during the onboarding process due to the perceived relation of our antiquated hiring system to the functionality of the whole organization.

Another major impact we have experienced due to the lack of an ATS is the very high cost of monthly posting fees for outsourced services through Indeed, ZipRecruiter, and other media and professional organizations. For example, for the month of October 2021, we paid over \$4000 just to post positions with Indeed and ZipRecruiter. There were no other services provided, such as applicant record-keeping, preboarding packages and tasks, periodic reporting, and ongoing digitized candidate engagement. From October 2020 to September 2021, we paid \$26,879.63 just for postings, while still having to dedicate 60+ hours a week towards talent acquisition and management. With a designated ATS, the GCHD HR department's recruitment process would be expanded to include:

- Providing a candidate records database
- Digital preboarding paperwork packaging
- Collaborative hiring
- CV/resume screening
- Postings across multiple job boards and professional communities
- Automation of routine tasks
- Virtual onboarding assistance
- Organizational branding
- Enhanced reporting and compliance

The BambooHR ATS platform we have selected will provide us with all of the above listed functions and more at a cost of over \$8900 less than what we would pay annually to Indeed and ZipRecruiter.

We are asking for a timely approval due to urgent need for the effective and efficient functionality of the HR department. In addition, we have secured a quote that includes a negotiated pricing discount of over \$18,000 thru December 10, 2021.



Prepayment Request

FROM
Andy Crane
BambooHR
acrane@bamboohr.com
www.bamboohr.com

PREPARED FOR
Chantelle Smith
Galveston County Health District
csmith@gchd.org

DATE
November 19, 2021

REQUEST NUMBER
REQ-387694

Products

Product	Quantity	Months	List Price	Total Price(USD)
Advantage	355	12	\$ 8.25	\$ 35,145.00
Total List				\$ 35,145.00
LESS: Advantage Volume Discount (44.0 %)				\$ (15,480.84)
LESS: HRIS Prepaid Discount (5.0 %)				\$ (983.21)
Net Software Annual Total				\$ 18,680.95

Services

Service	Quantity	Total Price(USD)
HRIS Implementation	1	\$ 4,349.26
Total List		\$ 4,349.26
LESS: Implementation Executive Discount (25.0 %)		\$ (1,087.32)
Net Services		\$ 3,261.95

*Applicable sales tax may be added

Executive Approved Implementation Savings: \$1,087.32
Savings Valid Through: December 10, 2021

Effective Quoted PEPM: \$4.39

Due at Activation

HRIS Software Annual Total	\$ 18,680.95
Services (One-Time)	\$ 3,261.95
Total Due at Activation*	\$ 21,942.90

Total Cost Per Year After Activation

\$18,680.95

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Governing Board

December 2021

Item#10

**Consider for Approval Coastal Health & Wellness Fund Balance
Reserve as of September 30, 2021 Submitted by Marlene Garcia**

Coastal Health & Wellness
Proposed Annual Board Approval - Fund Balance Reserve
FY 2022

	Board Approved Reserve at 9/30/20	Increase / (Decrease)	Fund Balance Reserve at 9/30/21
IT Expenditures (Equipment, Software & Consultant Services)	\$100,000	\$0	\$100,000
Medical / Dental Equipment additions/replacements	\$125,000	(\$4,847)	\$120,153
Galveston Clinic Renovations	\$900,000	\$0	\$900,000
Texas City Furniture/Fixtures/Remodel	\$10,000	\$0	\$10,000
Employee One-Time Supplemental Payment	\$0	\$0	\$0
Total Operating Reserve	\$4,900,000	\$0	\$4,900,000
Total Board Approved Reserve	\$6,035,000	(\$4,847)	\$6,030,153
Unreserved	\$391,698	\$1,529,759	\$1,921,457
Total Fund Balance	\$6,426,698	\$1,524,912	\$7,951,610

Operating Reserve **\$4,900,000**

Budgeted Expenses ending 3/31/22 **\$10,768,464**

Months of Reserves available **5.5**

COASTAL HEALTH & WELLNESS

Proposed Budget for the fiscal year ending March 31, 2022

Fund Balance

<i>Medical/Dental Additions/Replacements</i>	Total Cost	CHW %
	-	100%

**Purchases could be initiated/completed prior to start of 4/1/22 budget term (shared services)*

**These items were approved in the 2021/2022 Budget for Fund Balance expenditures.*

There are no budgeted Fund Balance expenditures included in the CHW budget for 4/1/2022 - 3/31/2023.

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Governing Board

December 2021

Item#11

**Consider for Approval Coastal Health & Wellness Credit Card and
Refund Policy Submitted by Marlene Garcia**



-Approved 11/1/2018
By: CHW Governing Board
-Effective 11/16/2017

Coastal Health & Wellness Credit and Refund Policy

Purpose

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

Policy

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

Responsibilities

CHW Patient Services/Checkout/Other Business Staff – may provide a patient with a Refund Request form to complete should the patient request one. For patient requested refunds, staff will verbally explain the statement on the Refund Request form which reads: “Please note any account credit will first be applied to balances due which may have occurred for services rendered by Coastal Health & Wellness clinic, with any remaining credit refunded. The refund process may take up to 30 days for completion”. CHW staff will sign the form and turn in the form to the CHW Billing & Collections Specialist in the Business Office. The billing & collections specialist will verify the refund by reviewing the patient’s billing account and gather all supporting documentation. Once completed, it will then be given to the Revenue Cycle Manager for approval.

CHW Business Office – The Billing & Collections Specialist thoroughly reviews potential credits and/or refunds to determine the cause and the appropriate course of action. Staff gathers necessary back up documentation to process patient, insurance and third-party refund requests. No refunds will be given to patients if outstanding balance due is more than the requested refund. Staff will complete a refund request form with supporting documentation and submit to the Revenue Cycle Manager for approval. Once the refund is received back from management with the approval, the staff will then complete a Galveston County Health District Claim form with two copies of the refund documents and send to the account payable staff for processing. The accounting staff will return one copy of refund documents along with a check and at that point the billing & collections specialist will make the appropriate refund adjustment in the patient’s account and add notes for reference.

Outside Billing Agency - thoroughly reviews potential credits and/or refunds to determine the cause and the appropriate course of action. Staff gathers necessary back up documentation to process patient, insurance and third-party refunds and will forward that information to the CHW Business Office if a refund via check or credit card payment is necessary. The business office staff will then complete a refund request form and submit with supporting documentation to the Revenue Cycle Manager for approval.

CHW Revenue Cycle Manager – Upon receiving refund request forms with supporting documentation, the revenue cycle manager will review and sign for approval. He/She will then give

it to the business office staff to prepare the refund for the accounts payable process.

Note: Refer to NextGen Training Manuals

- Revenue Cycle NextGen Training Manual

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Governing Board

December 2021

Item#12

**Consider for Approval Coastal Health & Wellness Charge Capture
Policy Submitted by Marlene Garcia**



-Approved: 11/1/2018
By: CHW Governing Board
-Effective: 11/16/2017

Coastal Health & Wellness Charge Capture Policy

Purpose

This policy applies to all Coastal Health & Wellness (CHW) employees and/or outside billing agency who are responsible for entering clinic charges.

Policy

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

Responsibilities

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

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

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

Providers (Dental & Medical) – in patient's electronic record, complete patient visit documentation, submit procedure code(s) and diagnosis code(s) within 5 days of visit.

Lab - in patient's electronic record, complete and super bill lab and x-ray services provided within 72 hours.

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

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

Note: Refer to NextGen Training Manuals

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

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Governing Board

December 2021

Item#13

**Consider for Approval Coastal Health & Wellness Payment Posting
Policy Submitted by Marlene Garcia**



-Approved: 11/14/2019
By: CHW Governing Board
-Effective: 11/16/2017

Coastal Health & Wellness Payment Posting Policy

Purpose

This policy applies to all Coastal Health & Wellness employees and/or outside billing agency who are responsible for entering clinic payments.

Policy

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

Responsibilities

Contact Center – will take all credit card payment information received during scheduling of appointments on hard copy and turn information in to the Business Office (Billing & Collections Specialist) for payment posting. Payments will be posted by the business office to the patient's account once the encounter had been created. This usually applies to telehealth visits but can be applicable to face-to-face encounters. Payment information is kept in a secured location until posting.

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

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

Business Office - posts all payments received as applicable (e.g., mail payments, budget plan, etc.) in the patient's electronic record, and reconciles posted payments to the daily deposit. Submit backup information on payments received from patient statements and third-party payers via ACH to the outside billing agency to be posted to the patient's account. Business Office staff will keep records of payments received from the Contact Center in date order, and process and post the payments once the encounter is created for the patient. This usually applies to telehealth visits. Once the payment is posted, the credit card information received from the Contact Center is shredded.

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

Note: Refer to NextGen Training Manuals

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

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Governing Board

October 2021

Item#14

**Consider for Approval Coastal Health & Wellness 2021-2022 Risk
Management Plan Submitted by Richard Mosquera**

Risk Management Plan

1. PURPOSE

The purpose of the Coastal Health & Wellness Risk Management Plan (the “Plan”) is to address visitor, third party, volunteer, and employee safety as well as potential business, operational, and property risks. The Risk Management Plan is the primary tool for outlining Coastal Health & Wellness’ (“CHW”) overall risk management procedures.

The focus of the Risk Management Plan is to provide an ongoing, comprehensive, and systematic approach to reducing exposure to risk. Risk management activities include identifying, investigating, analyzing, and evaluating risks, followed by selecting and implementing the most appropriate methods for correcting, reducing and/or eliminating [risksthem](#).

2. GUIDING PRINCIPLES

This Risk Management Plan supports the Coastal Health & Wellness philosophy that patient safety and risk management are everyone’s responsibility. Teamwork and participation among management, providers, volunteers, and staff are essential for an efficient and effective patient safety and risk management plan. The Plan will be implemented through the coordination of multiple organizational functions and the activities of multiple staff members.

Coastal Health & Wellness supports the establishment of a just culture that emphasizes implementing evidence-based best practices, learning from error analysis, and providing constructive feedback rather than blame and punishment. In a just culture, unsafe conditions and hazards are readily and proactively identified, medical or patient care errors are reported and analyzed, mistakes are openly discussed, and suggestions for systemic improvements are welcomed. Individuals are still held accountable for compliance with patient safety and risk management practices. As such, if evaluation and investigation of an error or event reveal reckless behavior or willful violation of policies, disciplinary actions can be taken.

Principles of this Plan provide the foundation for developing key policies and procedures for risk management activities, including but not limited the following:

- Claims and insurance management;
- Complaint resolution;
- Confidentiality and release of information;
- Compliance efforts;
- Safe and secure use of technology;

- Event investigation, root-cause analysis, and follow-up;
- Provider and staff education, competency validation, credentialing and privileging requirements, and background checks;
- Systems for monitoring and tracking referrals (specialty care, hospital and or emergency department admissions) and diagnostic laboratory values and other tests;
- Reporting and management of adverse events and near misses;
- Trend analysis of events, near misses, and claims; and
- Implementing performance improvement strategies to mitigate risk.

2.1 Leadership

The success of the Coastal Health & Wellness Risk Management Plan requires top-level commitment and support. The Governing Board by majority vote authorizes adoption of this Plan.

The Governing Board and CHW executives, including but not limited to the Executive Director, Medical Director, [Chief Operating Officer](#), Dental Director, Chief Nursing Officer and Chief Compliance Officer/Risk Manager are committed to promoting the safety of all patients, visitors, employees, volunteers, and other individuals involved in operations of the organization. The Risk Management Plan is designed to serve as an umbrella policy, in conjunction with the Risk Management Training Plan, aimed at reducing system-related errors and potentially unsafe conditions by implementing continuous improvement strategies to support an organizational culture of safety.

3. PLAN GOALS AND OBJECTIVES

The Risk Management Plan sets forth goals and objectives, which include the following:

- Continuously improving patient safety and minimizing or preventing the occurrence of errors, events, and system breakdowns leading to harm of patients, staff, volunteers, visitors, and others through proactive risk management and patient safety and emergency operations activities.
- Minimizing adverse effects of errors, events, and system breakdowns when they do occur.
- Minimizing losses to the organization by proactively identifying, analyzing, preventing, and controlling potential clinical, business, financial, and operational risks.
- Achieving requirements mandated by accrediting organizations.
- Protecting human and intangible resources (e.g. reputation).

4. SCOPE AND FUNCTIONS OF THE PLAN

The Coastal Health & Wellness Risk Management Plan interfaces with all operational departments and services offered through the clinic, as well as HRSA.

4.1 Functional Interfaces

Functional interfaces with the Risk Management Plan include areas covered under the Coastal Health & Wellness Environment of Care [and Infection Control](#) plans, as well as credentialing and privileging, information technology, event reporting and investigation, performance assessment and improvement,

volunteers, infection control, and administration. All areas work together on risk reduction strategies and methods as defined in this Plan.

4.2 Specific Components

- a) The Risk Management Plan will include the following components: Developing systems for overseeing the reporting of adverse events, near misses, and potentially unsafe conditions.
 - i. Reporting responsibilities may include internal reporting as well as external reporting to regulatory, governmental, or voluntary agencies.
- b) Ensuring the collection and analysis of data to monitor the performance of processes that involve risk or that may result in serious adverse events, near misses, and potentially unsafe conditions; providing feedback to providers and staff; and using [these](#) data to facilitate systems improvements to reduce the probability of occurrence of future related events.
- c) Ensuring compliance with data collection and reporting requirements of governmental, regulatory, and accrediting agencies.
- d) Facilitating and ensuring the implementation of patient safety initiatives that include tracking systems for preventive screenings and diagnostic tests, medication safety systems, and emergency management programs.
- e) Facilitating and ensuring provider and staff participation in educational programs on patient safety and risk management.
- f) Facilitating a culture of safety in the organization that embodies an atmosphere of mutual trust in which all providers and staff members can talk freely about safety problems and potential solutions without fear of retribution. This ordinarily involves performing safety culture surveys and assessments.
- g) Proactively advising the organization on strategies to reduce unsafe situations and improve the overall environmental safety of patients, visitors, staff, and volunteers.
- h) Preventing and minimizing the risk of liability to the health center, and protecting the financial, human, and other tangible and intangible assets of the health center.
- i) Decreasing the likelihood of claims and lawsuits by educating patients and their families about proper health practices. This includes communicating and disclosing errors and events that occur in the course of patient care with a plan to manage any adverse effects or complications.
- j) Investigating and assisting in claim resolution to minimize financial exposure.
- k) Reporting claims and potentially compensable events to the appropriate entity, including the U.S. Department of Health and Human Services Federal Tort Claims Act (“FTCA”) claims (as appropriate) and other insurers in accordance with the requirements of the insurance policy/contract and FTCA requirements.
- l) Supporting quality assessment and improvement programs throughout the organization.
- m) Implementing programs that fulfill regulatory, legal, and accreditation requirements.
- n) Establishing ~~an~~ ongoing [q](#)Quality [a](#)Assurance and [r](#)Risk [m](#)Management [c](#)Committee composed of representatives from key clinical and administrative departments and services.
- o) Monitoring the effectiveness and performance of risk management actions. Performance monitoring data may include the following:

- i. Claims and claim trends;
- ii. Culture of safety surveys;
- iii. Event trending data;
- iv. Ongoing risk assessment information;
- v. Patient's or family's perceptions of how well the organization meets their needs and expectations (i.e. patient satisfaction survey data); and
- vi. Quality performance data.

p) Completing insurance and deeming applications.

q) Developing and monitoring effective handoff processes for continuity of patient care.

5. ADMINISTRATIVE AND COMMITTEE STRUCTURE AND MECHANISMS FOR COORDINATION

The Risk Management Plan is administered through the Quality Assurance Committee (which convenes the first Wednesday of each month) and is led by the CHW Chief Operating Officer, and the Joint Commission Committee (which convenes the third Wednesday of each month)~~Risk Management Committee~~, which is led by the Chief Nursing Officer, with regular input from the Executive Director, Medical Director, Dental Director and by the Chief Compliance Officer/Risk Manager. The Risk Manager, with the assistance of the Risk and Safety Coordinator, reports to the Executive Director and interacts with administration, staff, medical providers, and other professionals in order to meet risk related program goals and objectives, many of which are set forth in the Annual Risk Management Training Plan.

The Risk Manager is responsible for overseeing day-to-day monitoring of risk management activities and for investigating and reporting to the applicable insurance carrier actual or potential clinical, operational, or business claims or lawsuits arising out of the organization, according to requirements specified in the insurance policy or contract. The Risk Manager serves as the primary contact between the organization and other external parties on all matters relative to risk identification, prevention, and control, as well as risk retention and risk transfer. The Risk Manager oversees the reporting of events to external organizations, per regulations and contracts, and communicates analysis and feedback of reported Risk Management information to the organization for action.

6. REPORTING REQUIREMENTS, MONITORING, AND CONTINUOUS IMPROVEMENT

The Quality Assurance and ~~Risk Management~~Joint Commission c~~Committees~~ reviews risk management activities monthly. The Risk Manager reports activities and outcomes (e.g., claims activity, risk and safety assessment results, event report summaries, and trends) to the Governing Board and the Governing Board Quality Assurance and Quality Improvement Committee on a quarterly basis. These reports inform members of the Governing Board of efforts made to identify and reduce risks, reports on the success of these activities, and communicates outstanding issues that require input or support from the Governing Board for action or resolution. Data reporting may include event trends, claims analysis, frequency and severity data, credentialing activity, relevant provider and staff education, and risk management, emergency operation and patient safety activities. In accordance with the organization's bylaws, recommendations from the Quality Assurance and Risk Management c~~Committees~~ that rise to the level

of requiring Board approval are submitted as needed. Goals are developed to remain consistent with established risk management goals ~~and Environment of Care measures~~ as determined by the Quality Assurance and Risk Management ~~c~~Committees and/or the Governing Board.

Documentation is retained in the form of meeting minutes for the applicable body.

7. CONFIDENTIALITY

Any and all documents and records associated with the Risk Management Plan and subjected to legally permissible withholdings shall be privileged and confidential to the extent provided by state and federal law. Confidentiality protections may include attorney/client privilege, attorney work product, Joint Commission survey reports, and peer review protections.

The signatures below represent acceptance of the Risk Management Plan.

Risk Manager Approval: _____

Date: _____

Chief Nursing Officer Approval: _____

Date: _____

Chief Operating Officer Approval: _____

Date: _____

Executive Director Approval: _____

Date: _____

Governing Board Approval: _____

Date: _____

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Governing Board

December 2021

Item#15

**Consider for Approval Re-Privileging Rights for UTMB Resident
Nadine Abraham, MD, Submitted by Dr. Keiser**



Date: November 18, 2021

To: CHW Governing Board

From: Philip Keiser, MD *PK*
Medical Director

Re: Re-Privileging

After review of the standard credentialing documents by a Coastal Health and Wellness Human Resources representative for resident physician Nadine Abraham, MD, who will work at all times under the direct supervision of a Board-Certified faculty physician from UTMB, we are requesting credentialing approval by the Governing Board.

In addition, after review by Medical Director, Philip Keiser, MD, of the privileging documents submitted by Dr. Abraham, we are requesting re-privileging approval by the Governing Board.

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Governing Board

December 2021

Item#16

**Consider for Approval Privileging Rights for John David Walsh, NP
Providing Tele-Psychiatry Services Submitted by Dr. Keiser**



Date: December 9, 2021
To: CHW Governing Board
From: Philip Keiser, MD
Executive Director
Re: Privileging *P.K.*

After review of the standard credentialing documents by a Coastal Health & Wellness Human Resources representative for John David Walsh, NP who is a Nurse Practitioner 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, Philip Keiser, MD of the privileging documents submitted by John David Walsh, we are requesting privileging approval by the Governing Board.

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Governing Board

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Item#17

**Consider for Approval Privileging Rights for Shady Bishai, DDS,
Submitted by Dr. Keiser**



Date: December 9, 2021

To: CHW Governing Board

From: Hanna Lindskog, DDS 
Dental Director

Thru: Philip Keiser, MD 
Executive Director

Re: Privileging

After preparation of the credentialing file, the Coastal Health & Wellness Dental Director Hanna Lindskog, DDS, has reviewed the completed file and recommends that the Governing Board approve privileging as follow:

Shady Bishai, DDS, is a general dentist who will practice full-time at both the Texas City and Galveston Coastal Health & Wellness Dental Clinic. Dr. Bishai graduated from the University of Minnesota School of Dentistry in 2021. Dr. Bishai is requesting general dentistry privileges.

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Governing Board

December 2021

Item#18

**Consider for Approval Default Opt-In Policy for Newly Registering
CHW Patients Submitted by Richard Mosquera**

Patient Authorization for Greater Houston Healthconnect

Coastal Health & Wellness participates in Healthconnect, a non-profit organization that provides a secured electronic network for Healthconnect participants, including doctors' offices, hospitals, labs, pharmacies, radiology centers and payers of health claims such as health insurers to share your protected health information. ("PHI") A list of current Healthconnect participants is available at www.ghhconnect.org. When you join Healthconnect, your doctors can electronically search all Healthconnect participants for your PHI and use it while treating you, which will benefit you so that your treating providers, regardless of location, will have immediate access to any of your relevant medical conditions or procedures – which may be critical in offering you the proper treatment. Healthconnect does not change who gets to see your information; rather, it allows your information to be shared in a new way. All Healthconnect participants must protect your privacy in accordance with state and federal laws

Your treatment and eligibility for benefits will not be affected in any way should you choose not to join Healthconnect.

By signing this authorization, you agree that Healthconnect and its current and future participants may use and disclose your protected health information electronically through Healthconnect **for the limited purposes of treatment and health care operations**. You understand that Healthconnect may connect to other health information exchanges in Texas and across the country that also must protect your privacy in accordance with state and federal laws, and you authorize Healthconnect to share your information with those exchanges for the same limited purposes.

Your health information that may be shared through Healthconnect includes.

- Diagnosis (disease or problem)
- Clinical summaries of treatment and copies of documents in your medical record
- Results of lab tests, Image studies, radiology results and other tests
- Medication (current and in the past)
- Personal information such as name, address, telephone number, gender, ethnicity and age
- Names of providers and dates of services
- Alcohol, drug abuse, mental and behavioral health treatment
- HIV/Acquired Immune Deficiency Syndrome (AIDS) test results and treatment
- Hepatitis B or C test results and treatment
- Genetic test results and treatment
- Genome information, if provided
- Family medical history, if provided

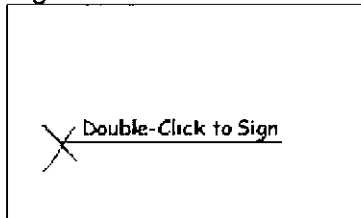
This authorization remains in effect unless and until you revoke it. You can revoke this authorization at any time by giving written notice to any healthcare provider who participates in Healthconnect. Your revocation will be effective within three (3) days. You understand that revoking this authorization does not impact PHI previously shared when your authorization was in effect.

Patient Name:

DOB: <<DOB>>

Signature of Authorized Person:

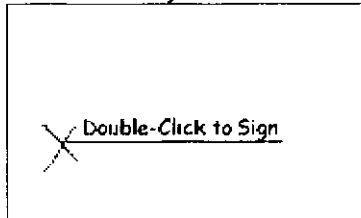
Date:



Name (if Different from Patient):

Relationship to Patient

Initial here if you do NOT want your providers to see your records through Healthconnect:



Governing Board

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Item#19

Consider for Approval Employee Satisfaction Survey by Samantha Robinson/Dr. Southerland

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**Governing Board
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Item#20
Comments from Board Members**

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