

COASTAL HEALTH & WELLNESS

GOVERNING BOARD

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

AGENDA Thursday, May 23, 2024 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 #2ACTION	.Excused Absence(s)
*Item #3ACTION	.Consider for Approval Minutes from April 11, 2024 QA Board Meeting
*Item #4ACTION	.Consider for Approval Minutes from April 25, 2024 Governing Board Meeting
*Item #5ACTION	.Consider for Approval Quarterly Visit and Collection Report Including a Breakdown by Payor Source for Recent New Patients
*Item #6ACTION	.Consider for Approval Coast Health & Wellness Dental Scope of Services Policy
*Item #7ACTION	. Consider for Approval Coastal Health & Wellness Medical Referral Tracking and Care Management Policy
Item #8	 a) Recognizing Ami Cotharn, MSN, RN, for her Dedicated Services to Coastal Health & Wellness b) Recognizing Samantha Robinson, RN for her Dedicated Services to Coastal Health & Wellness Governing Board c) Recognizing Barbara Thompson, MD for her Dedicated Services to Coastal Health & Wellness Governing Board
Item #9ACTION	.Consider for Approval Financial Preliminary Report Submitted by Kenna Pruitt a) March 2024
Item #10ACTION	.Consider for Approval the purchase of NextGen's Automated Document Sharing Submitted by Christina Bates

	onsider for Approval Kendall Campbell, MD, to fill the Ex-Officio sition Representing UTMB
Item #12	pastal Health & Wellness Updates
	a) Organizational Updates Submitted by Executive Director
	b) Operational Updates/Coastal Wave Submitted by Chief
	Operating Officer
	c) Dental Updates Submitted by Dental Director
	d) Medical Updates Submitted by Associate Medical Director
Item #13Co	omments from Board Members

Adjournment

Next Regular Scheduled Meeting: June 27, 2024

Appearances before the Coastal Health & Wellness Governing Board

A speaker whose subject matter as submitted relates to an identifiable item of business on this agenda will be requested by the presiding officer to come to the podium where they will be limited to three minutes (3). A speaker whose subject matter as submitted does not relate to an identifiable item of business on this agenda will be limited to three minutes (3) and will be allowed to speak before the meeting is adjourned. Please arrive prior to the meeting and sign in with Galveston County Health District staff.

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 May 2024 Item#2 Excused Absence(s)

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Coastal Health & Wellness Governing Board Quality Assurance Committee Meeting April 11, 2024

BOARD QA COMMITTEE MEMBERS:

Samantha Robinson-Board Chair (Zoom) Kevin Avery-Consumer Member (Zoom) Sharon Hall (Zoom)

EMPLOYEES PRESENT:

Ami Cotharn (Chief Operations Officer), Dr. Lindskog (Dental Director), Jennifer Koch (Director of Operations), Wendy Jones (Compliance & Risk Management Officer), Anthony Hernandez (Executive Assistant II) and Tikeshia Thompson-Rollins (Executive Assistant III)

(Minutes recorded by Tikeshia Thompson-Rollins)

		es recorded by Tikeshia Thompson-Rollins)
	ITEM	ACTION
Patient	Quarterly Access to Care Report Submitted by Pisa Ring Quarterly Patient Satisfaction Report Submitted by	Ouarterly Access to Care Report • Ami Cotharn reviewed the access to care report for the 1st (January, February, and March) in Pisa's absence. No-show rate is at 24%. Ouarterly Patient Satisfaction Report Ami Cotharn reviewed the patient satisfaction report for the 1st in Pisa's absence. Dr. Hall asked that the following be addressed and brough back to the committee. ➤ What does the word "detractor" mean according to Phreesia? ➤ Can we export the report in a way that all the questions can be viewed? ➤ Are all questions on the survey marked required or can those taking the survey skip some if they choose? ➤ Are detractors considered neutral responses? Call Quality Performance • Ami Cotharn reviewed the report; No Action
Clinica >	I Measures Quarterly Report on UDS Medical Measures in Comparison to Goals Submitted by Jason Borillo	Clinical Measures • Deferred
	ency Management Reports Quarterly Risk Management Report Submitted by Wendy Jones Dental Quarterly Summary Submitted	Quarterly Risk Management Report
Plans ar	nd Policies Coastal Health & Wellness Risk Management Training Plan 2024 Submitted by Wendy Jones	Environment of Care Plans • Wendy presented the Risk Management Training Plan 2024 ∘ Plans reviewed. No Action ∘ Samantha Robinson, suggested giving all trainings at the beginning of the year and giving the staff a year to complete.

Next Meeting: July 11, 2024

Coastal Health & Wellness

Governing Board April 25, 2024

Board Members: Staff:

Christina Bates Dr. Tello Ami Cotharn, Chief Operating Officer Maria Aguirre Elizabeth Williams Chris Garcia, Associate Medical Director Wendy Jones Hanna Lindskog, Dental Director Rev. Jones Judie Olivares William Lewis, Chief Operating Officer Victoria Dougharty Chris Davis Jennifer Koch Flecia Charles **Taylor Silvas** Cynthia Darby Kenna Pruitt

Sergio Cruz Tiffany Carlson Tikeshia Thompson-Rollins
Donnie Van Ackeren John Bearden Anthony Hernandez

Donnie VanAckeren John Bearden A
Clay Bruton Brittany Rivers

Excused Absence: Samantha Robinson, Sharon Hall, Kevin Avery, Dr. Thompson, and Ivelissa Caban

Items#1 Comments from the Public

There were no comments from the public.

Items#2-9 Consent Agenda

A motion was made by Donnie VanAckeren to approve the consent agenda items two through nine. Dr. Tello seconded the motion, and the Board unanimously approved the consent agenda.

Item#10 Consider for Approval Financial Report Submitted by Kenna Pruitt

Kenna Pruitt, Controller, asked the Board to consider for approval the February 2024 financial report. A motion to accept the February 2024 financials as presented was made by Dr. Tello. Clay Burton seconded the motion and the Board unanimously approved.

Item#11 Coastal Health & Wellness Updates

- a) Organizational Updates Submitted by Executive Director
- a) Operational Updates/Coastal Wave Submitted by Chief Operating Officer
- b) Dental Updates Submitted by Dental Director
- c) Medical Updates Submitted by Associate Medical Director

Ami Cotharn, Chief Operating Officer, updated the Board on clinical operations.

March 2023 vs 2024

- New vs. Established Patients (34.4 % Decline)
- Confirmed Appointments (14.25% Decline)
- Resource Utilization (15.57 % Decrease in Available Slots and a 16.36 % Decrease in Booked Slots)
- Charges/Payments/Adjustments/Refunds
- Kept/No-Show Comparison (20.5% Decrease in Kept Appt. Count)
- Copay Collection (14.9 % Increase)
- New Pts. by Financial Class 2023 vs 2024
- Unduplicated Patients (.28% increase)

Brittany Rivers, Director of Community Engagement and Strategic Partnership updated the Board on all outreach events.

- Visit Numbers Based on "FQHC Qual Enc" in NextGen
 - We continue to see walk in patients in pain as we can fit them into our schedule.
 - We started releasing comprehensive exams on the 15th of every month, with December being the first month. The appointments continue to fill quicker each month.
 - o For March, we had a decrease in qualifying encounters of 3.92% compared to March 2023. We had 3 providers who had scheduled and unscheduled leave during the month of at least 4 days each, so this number is not concerning.

Denta	l Visits		
Current	<u>Prior</u> <u>Period</u>	<u>Percentage</u> <u>Change</u>	1,000 900
777	705	10.21%	800
858	807	6.32%	700
828	862	-3.94%	600
703	625	12.48%	500
794	781	1.66%	400
869	763	13.89%	300
873	602	45.02%	200
941	850	10.71%	
760	738	2.98%	100
790	759	4.08%	0
725	724	0.14%	cuery cuery specti porti specy jure july illust wither softer inter inter
646	699	-7.58%	heriales trades there. We buy the line him where the confident of the best feet the
9,564	8,915	7.28%	
	777 858 828 703 794 869 873 941 760 790 725 646	Current Period 777 705 858 807 828 862 703 625 794 781 869 763 873 602 941 850 760 738 790 759 725 724 646 699	Current Prior Period Percentage Change 777 705 10.21% 858 807 6.32% 828 862 -3.94% 703 625 12.48% 794 781 1.66% 869 763 13.89% 873 602 45.02% 941 850 10.71% 760 738 2.98% 790 759 4.08% 725 724 0.14% 646 699 -7.58%

- Current projects, plans, department overview for dental
 - o Dr. Lindskog continues to serve on the COM Hygiene School Advisory Board. She attended the CODA Site Visit on April 10th, and the visit went very well. They are still planning to start Fall 2024 with their first class.
- Provider Education Opportunities
 - All providers continue to select and participate in continuing education of their choice. They also share knowledge from these courses with the other providers during monthly meetings.
- Barriers or Needs (if applicable)
 - o Staffing
 - We are in the process of interviewing applicants for the Dental Office Manager position.

We have a part time dentist that started in March who is going to be working 1-2 Saturdays/month.

Chris Garcia, MD, updated the Board on Medical services in the Coastal Health & Wellness Clinic.

School Based Clinic: Total visits: 42 (+16)

Students: 8 (no change)

Staff: 7 (+2)

Existing CHW: 27 (+14)

In person: 11(-1) Telehealth: 31 (+17)

Doxy/Telehealth visit: 80 (-12)

CHW March clinic visits: Total: 1915 (-349)

Total scheduled: 2559 (-380) No shows: 647 (-28) No show rate: 25% Show rate: 75%.

Total charges for March: \$519,569.15 Year to date charges: \$1,765,961.50

Current Projects: I met with a nonprofit group "Do As I Have Done". They provide professional foot care, new pair of socks and new pair of fitted shoes to uninsured, underinsured, homeless, and veterans at no cost to patient or to us. We will be trying to arrange for them to use our "CHW RV" to park in front of our clinic 1 day a month. Anyone who shows up would be welcome. I am also in discussion with UTMB about possibly partnering and staffing our SUD clinic 2 new medical providers have started and 1 more has accepted a position at CHW.

The meeting was adjourned at 1:01p.m. Secretary/Treasurer Chair Date Date

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<u>Item #11 Comments from Board Members</u> No comments from the Board

Coastal Health & Wellness - Quarterly Visit & Analysis Report for the period ending March 31, 2024

*based on UDS Reporting period (January 1 to December 31) Qualified Encounters

	March	March	%	* YTD	* YTD Average		* YTD Average %		* YTD Pay	or Mix	%
Total Visits by Financial Class	2024	2023	Change	2024	2023	Change	2024	2023	Change		
Self Pay	1,499	1,929	-22%	2,086	1,774	18%	57.0%	61.0%	-4.0%		
Medicare	245	224	9%	325	203	60%	8.9%	7.0%	1.9%		
Medicaid	237	329	-28%	284	309	-8%	7.8%	10.6%	-2.9%		
Contract	102	62	65%	198	77	156%	5.4%	2.7%	2.7%		
Private Insurance	501	535	-6%	632	449	41%	17.3%	15.4%	1.8%		
Title V	103	128	-20%	137	97	42%	3.7%	3.3%	0.4%		
Total	2,687	2,323	16%	3,663	2,908	26%	100.0%	100%	0.0%		

	* YTD To	* YTD Total Visits					
Department	2024	2023	Change				
Medical	8,244	6,214	33%				
Dental	2,645	2,355	12%				
Counseling	99	159	-38%				
Total	10,988	8,728	26%				

Unduplicated	* YTD To	tal Users	%
Patients	2024	2023	Change
Medical	4,104	4,082	1%
Dental	1,266	1,202	5%
Counseling	24	62	-61%
Total	5,394	5,346	1%

^{*}Only counts patients linked to a provider. Not other encounters such as lab and nurse visits.

NextGen / Crystal Reports for the period ending Marc	,	5 5 ,									Days ir	. A /D
jor the period ending ward	111 31, 2024 (1)	0-30	31-60	61-90	91-120	121-150	151-180	181-up	Total	%	Current Period	Last Qtr
Self Pay	\$	5,091.01 \$	52,628.47 \$	30,926.84	\$ 14,332.45 \$	11,943.18	2,386.21	\$ 4,828,611.20	4,945,919.36	50%	5,247	75
Medicare	\$	39,296.39 \$	7,220.19 \$	12,902.10	\$ 8,430.10 \$	14,123.16	20,998.44	\$ 1,243,834.68 \$	1,346,805.06	14%	3,630	87
Medicaid	\$	49,764.98 \$	28,502.45 \$	11,692.19	\$ 18,538.53 \$	7,824.27	37,602.70	\$ 455,873.30 \$	609,798.42	6%	1,530	140
Contract	\$	34,045.61 \$	32,174.09 \$	28,315.66	\$ 30,283.77 \$	27,366.09	21,630.99	\$ 922,986.82 \$	1,096,803.03	11%	3,322	71
Private Insurance	\$	74,099.47 \$	59,541.47 \$	55,480.54	\$ 33,685.03 \$	46,907.75	\$ 46,020.19	\$ 1,386,186.36	1,701,920.81	17%	1,896	127
Title V	\$	9,980.20 \$	21,320.44 \$	16,990.68	\$ 13,265.73 \$	16,718.59	17.06	\$ 114,430.49 \$	192,723.19	2%	1,108	111
Unapplied	\$	(1,227.65) \$	- \$	-	\$ - \$	- :	5 -	\$ - \$	(1,227.65)	0%	(0)	(0)
Totals		\$211,050.01	\$201,387.11 \$	156,308.01	\$ 118,535.61 \$	124,883.04	128,655.59	\$8,951,922.85	9,892,742.22	100%	2,390	612

Previous Quarter Balances	\$168,073	\$168,560	\$216,659	\$174,783	\$154,260	\$117,991	\$372,865	\$1,373,191
% Change	26%	19%	-28%	-32%	-19%	9%	2301%	620%

	March	March	%		* YTD	YTD	%
Charges & Collections	2024	2023	Change		2024	2023	Change
Billed	\$ 869,569.76	\$ 1,049,218.23	-17	%	\$2,924,945.50	\$ 2,901,812.71	1%
Adjusted	\$ (610,328.04)	\$ (617,373.59)	-1	% \$	(2,080,310.22)	\$ (1,874,043.44)	11%
Net Billed	\$ 259,241.72	\$ 431,844.64	-40	% \$	844,635.28	\$ 1,027,769.27	-18%
Collected	\$ 425,412.36	\$394,928.38	8	% \$	1,317,971.00	\$ 1,024,906.01	29%
% Net Charges collected	164%	91%	79	%	156%	100%	56%

		YTD Current Peri		YTD Prio	or Year			
Barrer				(Net Billed) Net			Net Revenue	(Net Billed) Net
Payor	Visits	Payor Mix	Net Revenue per Visit	Revenue	Visits	Payor Mix	per Visit	Revenue
Self Pay	6,259	57%	\$40.66	\$254,513	5,322	61.0%	\$52.74	\$280,669
Medicare	975	9%	\$102.76	\$100,188	608	7.0%	\$266.69	162,147
Medicaid	852	8%	\$126.27	\$107,584	930	10.6%	\$258.17	240,094
Contract	594	5%	\$150.06	\$89,139	232	2.7%	\$254.56	59,057
Private Insurance	1,897	17%	\$127.74	\$242,328	1,346	15.4%	\$180.69	243,215
Title V	411	4%	\$114.28	\$46,968	290	3.3%	\$146.85	42,586
Total	10,988	100%	\$76.51	\$840,720	8,728	100%	\$117.76	\$1,027,769

Item	2024	2023
Self Pay Gross Charges	\$1,472,007	\$1,526,210
Self Pay Collections	\$390,706.00	\$380,420.23
% Gross Self Pay Charges		
Collected	26.5%	24.9%
% Net Self Pay Charges Collected	153.5%	135.5%

New Patients for Q1 2024 (Jan - March)

Jan 2024 (3 months)

Potential New 1,033

Actual New 840 (8.03%)

Established 9,619 (91.97%)

New Potential Realized 81.32%

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Coastal Health & Wellness Dental Clinics Scope of Services Policy

Purpose

This policy applies to all Coastal Health & Wellness patients that require primary oral health services.

Policy

It is the Coastal Health & Wellness policy to provide comprehensive primary oral health services to its patients. Personal oral health care is delivered in the context of family, culture, and community, which includes all but the most specialized oral health needs of the individuals being served. The range of services includes required preventive care and education as well as additional dental services outlined below.

Definitions

Preventive Dental (Required) – Activities include basic dental screenings and recommendations for preventive intervention; oral hygiene instruction and related oral health education (e.g., prevention of oral trauma and oral cancer), oral prophylaxis, as necessary; and topical application of fluorides (e.g., fluoride varnishes) and the prescription of fluorides for systemic use when not available in the water supply.

Risk assessment should occur for all patients at all comprehensive and periodic exam visits. Screening for caries and periodontal disease may be completed using dental x-rays.

Additional Dental Services – Additional dental services are basic services at a general practice level to diagnose and treat disease, injury, or impairment in teeth and associated structures of the oral cavity and include any diagnostic x-rays or imaging.

Services include fillings and single unit crowns; non-surgical endodontics, extractions, periodontal therapies, bridges or dentures.

Specialty Dental Services – Surgical periodontal services including gingivectomy/gingivoplasty, crown lengthening, osseous surgery, etc.

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-Approved: 09/30/2021 By: CHW Governing Board

-Effective: 05/18/2016

Coastal Health & Wellness Medical Referral Tracking and Management Policy

POLICY:

It is the policy of the CHW Clinics to provide medical referrals and referral management follow-up when deemed medically necessary.

PURPOSE:

Our purpose is to assist patients with referrals for a specific medical service and ensure that the patient is referred to the correct specialist for the correct problem.

Referrals: A referral is a written order from a provider to see a specialist, or to receive certain medical services, based on what they feel is necessary for proper patient care. When the provider or policy and procedures indicates that a referral is recommended, the obligation of the health center is to recommend that the patient seek care beyond the capability of the health center. Documentation in the medical record should reflect that a recommendation was made for the patient to seek further care. Depending on the significance of the problem, the provider will determine whether a referral is Essential, Important, or Routine. Referrals may be recommended, and/or facilitated by the health center. The health center will not pressure patients to undergo any consultation or procedure involuntarily or without consent.

Pharmacy Assistance Programs: These programs were created by pharmaceutical manufacturers to provide free or discounted medications for people who are unable to afford them. For CHW patients who are unable to afford certain prescriptions, the referral management department will assist any provider referred patient, or any patient that has been unable to fill their prescription within the last 90 days, in obtaining their prescribed medications given that it is a medication that is PAP eligible. The referral department will print the appropriate application, assist the patient in completing the application, and gather any supporting documentation as required by the pharmaceutical company. The application, prescription(s), and any documentation will be electronically faxed or mailed to the pharmaceutical company. Copies will be kept in a patient file for up to three years. Follow-up calls are only made when the referral department is notified of any discrepancy or delay in the application process. Pharmaceutical processing times vary depending on the type of drug being solicited. The pharmacy assistance program is also known as prescription assistance program or pharmaceutical manufacturer patient assistance program.

Hospital Discharges: A hospital discharge is when a patient has received treatment from a recent hospitalization or from the emergency department and no longer requires inpatient medical care. Through our current partnerships with UTMB and HCA hospitals, CHW receives a weekly list of patients who were recently discharged from inpatient care and possibly require additional follow-up with a community provider. The referral management team contacts these patients from the weekly discharge lists to offer patients follow-up appointments at CHW. These patients may or may not be existing CHW patients. If patient is an existing CHW patient and agrees to follow-up with CHW, they are transferred to the patient appointment line. If the patient needing follow-up is new to CHW, then they are transferred to the eligibility department to schedule an appointment.

In the event that a CHW patient is sent to the ER, clinical staff will contact the patient the following business day to offer a follow-up appointment with their CHW provider.

County Indigent Health Care Program (CIHCP): Pursuant to the Indigent Health Care and Treatment Act (Chapter 61) of the 69th legislature of 1985, "counties, hospital districts, and public hospitals are to provide health care to eligible indigent residents" (HHSC, 2018). CHW complies with the state requirement and enrolls such eligible patients into this special program. When providers determine that these patients require additional care outside of the health facility, the CIHCP care coordinator will refer these patients to specialists that accept CIHCP eligible patients. The CIHCP care coordinator will follow the same policy

and procedures as external and internal referrals and will adhere to the same follow-up procedures when updating, cancelling, or completing CIHCP referrals. The CIHCP care coordinator will also document all patient communications within the communication module in NextGen.

RESPONSIBILITIES:

A. Providers

- 1. Refer patients to specialty care, and/or other care management services regardless of payment or funding source. Providers document specialty type, reason for referral, urgency of referral and pertinent clinical continuity information.
- 2. Review outside specialist reports, and/or case management documentation for other services through the Provider Approval Queue (PAQ) and sign off on all accompanying records received from specialty clinics and providers regarding clinical information and/or outcomes
- 3. Review notifications from the referral management team on all incomplete, closed, and cancelled referrals.
- 4. Submit request to reopen a closed referral that is dated within one year of the original referral date provided that it is for the same service the patient never received nor completed.
 - a. Provider or medical assistant will contact patient to direct them to complete referral process before submitting request to reopen.
 - **b.** Provider or medical assistant will contact patient to explain risks of not completing referral process.

B. Referral Management Staff

- 1. Manage all referral management services including specialty referrals and radiology orders through NextGen once a provider has placed an order or referral.
- 2. Obtain any prior authorization required by a patient's insurance.
- 3. Refer the patient to the appropriate internal or external specialty facility as ordered by provider.
- 4. Inform patient via phone or letter where their referral was sent and provide facility name, contact information, and instruction for patient to follow-up with facility for appointment.
- 5. Follow-up will be attempted to determine if the patient complied with the referral process within 30 days of a patient scheduled appointment if the department has not received clinical notes or any test results.
- 6. An attempt will be made for the referral to be sent to a patient and/or insurance approved facility.
 - a. A referral will be regenerated only when the patient directly requests a certain facility and/or when the insurance company does not approve of the referred facility.
- 7. If it is determined that the patient cannot complete the referral for whatever reason, then the referral will be closed or cancelled, and the provider will be notified.
- 8. Any subsequent duplicate referrals will be cancelled if there is a current open referral for the same service.
- 9. Any documentation received from specialty facilities will be attached to the patient's Electronic Health Record (EHR) for provider review.
- 10. The referral will be marked as complete and closed when the referral loop is effectuated.
- 11. Referral management team will document all patient communications within the communication module in NextGen.



-Approved: 09/30/2021 By: CHW Governing Board -Effective: 05/18/2016

Coastal Health & Wellness

PROCEDURES:

A. External Referral

- 1. All external referrals must be submitted by the ordering provider to the referral management team via NextGen.
 - a. The referral management team will seek provider signature when the referral requires it, i.e., radiology, physical therapy, home health.
 - b. Signed referrals must be scanned into patient's EHR.
- 2. External (routine) referrals are processed within 3 business days or less.
 - a. Essential referrals are processed within 1 business day or less.
 - b. Important referrals are processed within 2 business days or less.
- 3. The external referral team will process all referrals appearing in the NextGen Inbox marked in red.
 - a. OB/Gyn referrals will be reassigned to internal referrals if referral is labeled as "inhouse."
 - b. External referral team will not process dental, in-house OB/Gyn, prenatal, SUD, or behavioral health.
- 4. A referral will be generated, and a call will be made to the patient with the facility name, contact information, and instruction for patient to follow-up with facility to schedule an appointment.
 - a. Patient will be asked to notify CHW of their upcoming specialty appointment.
 - b. If unable to contact patient, a letter with referral information will be sent to the patient address on file.
 - c. A follow-up call will be made at 30 days after referral was generated or mailed out to patient if clinic notes have not been received.
 - i. If patient has not made specialty or radiology appointment, patient will be asked if referral is still needed.
 - ii. If patient denies referral after 30 days, referral will be cancelled, and provider notified via NextGen.
 - iii. Reason for cancellation will be notated in NextGen.
- 5. The referral management team will refer uninsured patients to facilities with the lowest cost when possible.
- 6. All referrals, with the exception of radiology, must be sent to the specialist with the Master IM or clinical notes, and/or with any x-rays, MRI, ultrasounds, CT, labs, and ECG if available.
- 7. All referrals will be electronically faxed to specialists.
- 8. The referral team will mark a referral complete when the patient has attended their specialty/radiology appointment and visit notes/reports are received and attached in NextGen.

B. Internal Referrals

- 1. All internal referrals must be submitted by the ordering provider via NextGen.
- 2. Internal referrals are those services that are provided within CHW, and include dental, OB/Gyn, prenatal, substance use disorder (SUD), and Behavioral Health.
- 3. The internal referral team will process all referrals appearing in the NextGen Inbox marked in red
 - a. Only dental, OB/Gyn, prenatal, SUD, and Behavioral Health will be processed.
- 4. All internal referrals will be processed within 3 business days or less.
 - a. Essential referrals are processed within 1 business day or less.

- b. Important referrals are processed within 2 business days or less.
- 5. A referral is generated, and patients will be contacted to be scheduled an appointment.
 - a. A referral is marked complete when the patient attends their appointment.
 - b. If a patient cannot be reached, a letter will be sent to address on file.
 - c. If a patient cannot be reached or does not respond to mail within 30 days, referral will be closed, and provider notified.
- 6. For SUD referrals, the internal referral team will generate referral and forward to SUD nurse for follow-up.
 - a. SUD nurse schedules and manages the appointments for the SUD program including telemedicine, SUD evaluation, and nurse visit appointments.
 - b. SUD nurse will close referral when patient completes SUD referral process.
- 7. Internal referral team will verify via NextGen if patient completed referral within 30 days.
- 8. Internal referral will be closed and marked complete when patient follows referral process.

C. Additional processes:

- 1. When necessary, referral management team will search for visit summaries, clinic notes, or radiology reports when referral was made to UTMB or HCA.
 - a. UTMB referrals: Referral team will access CareLink to retrieve specialty visit summaries and radiology reports.
 - b. HCA referrals: referral management team will access the HIE to retrieve radiology reports.
 - **c.** For other facilities, referral management team will contact specialty provider directly, and request visit summaries or clinic notes if the patient states that visit was completed, and CHW has not received results or reports.
 - d. Once specialty visit summaries or radiology reports are received, the referral status is changed from "ordered" to "completed" and marked as "results received."
 - e. A copy of any records received is forwarded to the electronic records department to be scanned into patient's chart.

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

Governing Board May 2024 Item#8 Informational

- a) Recognizing Ami Cotharn, MSN, RN, for her Dedicated Services to Coastal Health & Wellness
- b) Recognizing Samantha Robinson, RN for her Dedicated Services to Coastal Health & Wellness Governing Board
- c) Recognizing Barbara Thompson, MD for her Dedicated Services to Coastal Health & Wellness Governing Board

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COASTAL HEALTH & WELLNESS

Governing Board



FINANCIAL SUMMARY

For the Period Ending

March 31, 2024

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

May 15, 2024

CHW - BALANCE SHEET

as of March 31, 2024

ACCETC	Current Month Mar-24	Prior Month Feb-24	Increase (Decrease)	
<u>ASSETS</u>	40 -00 -00	40	400.0=0	
Cash & Cash Equivalents	\$2,786,732	\$2,763,772	\$22,959	
Accounts Receivable	8,033,292	8,613,882	(580,589)	
Allowance For Bad Debt	(1,120,153)	(1,084,655)	(35,498)	
Pre-Paid Expenses	798,434	919,496	(121,062)	
Due To / From	(127,619)	6,461	(134,080)	
Total Assets	\$10,370,686	\$11,218,956	(\$848,270)	
<u>LIABILITIES</u>				
Accounts Payable	\$522,337	\$692,532	(\$170,194)	
Accrued Expenses	981,232	969,650	11,581	
Deferred Revenues	24,642	269,197	(244,556)	
Total Liabilities	\$1,528,210	1,931,379	(\$403,169)	
FUND BALANCE			_	
Fund Balance	\$9,562,785	\$9,562,785	\$0	
Current Change	(720,309)	(275,208)	(445,101)	
Total Fund Balance	\$8,842,476	\$9,287,576	(\$445,101)	
TOTAL LIABILITIES & FUND BALANCE	\$10,370,686	\$11,218,956	(\$848,270)	

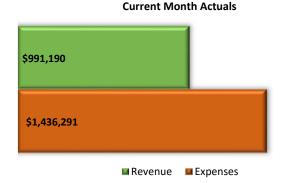




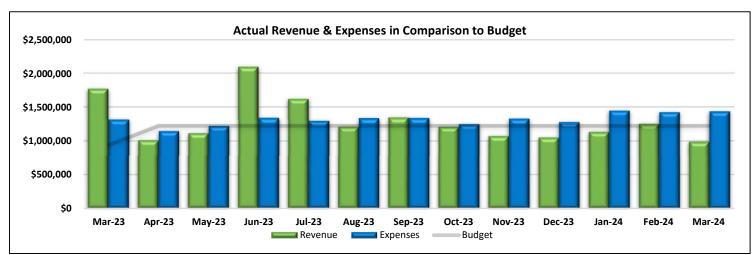
CHW - REVENUE & EXPENSES

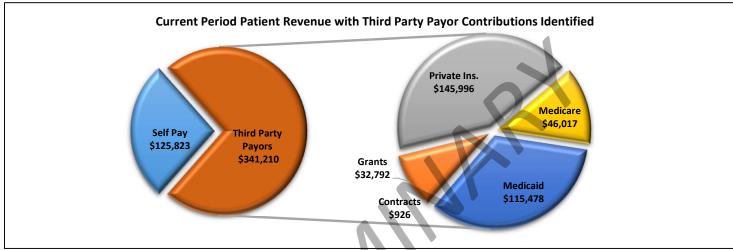
as of March 31, 2024

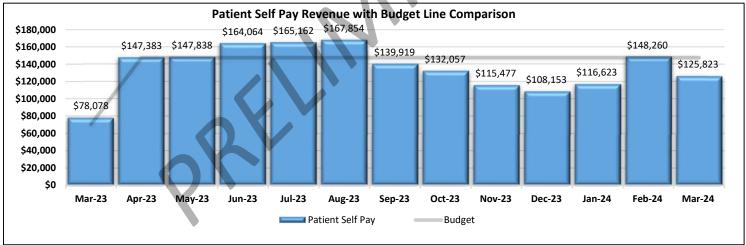
	MTD Actual Mar-24	MTD Budget Mar-24	MTD Budget Variance		YTD Actual thru Mar-24	YTD Budget thru Mar-24	YTD Budget Variance
<u>REVENUE</u>							
County Revenue	\$244,556	\$261,222	(\$16,667)		\$3,134,667	\$3,134,667	\$0
HHS Grant Revenue	173,585	358,564	(184,979)		4,305,057	4,302,764	2,293
Patient Revenue	547,134	592,843	(45,709)		7,399,905	7,114,120	285,785
Other Revenue	25,915	12,833	13,082		291,992	154,000	137,992
Total Revenue	\$991,190	\$1,225,463	(\$234,273)	_	\$15,131,621	\$14,705,551	\$426,070
<u>EXPENSES</u>				_			
Personnel	\$840,409	\$952,944	\$112,535		\$10,360,760	\$11,435,324	\$1,074,564
Contractual	287,378	114,626	(172,752)		1,895,448	1,375,511	(519,937)
Supplies	127,134	117,985	(9,149)		1,483,534	1,415,825	(67,709)
Travel	343	1,433	1,090		22,714	17,200	(5,514)
Equipment/Capital	10,236	0	(10,236)		142,721	0	(142,721)
Bad Debt Expense	35,498	38,318	2,820		516,584	459,816	(56,768)
Other	135,293	136,959	1,666		1,430,168	1,643,505	213,337
Total Expenses	\$1,436,291	\$1,362,265	(\$74,026)		\$15,851,930	\$16,347,181	\$495,251
CHANGE IN NET ASSETS	(\$445,101)	(\$136,803)	(\$308,298)		(\$720,309)	(\$1,641,630)	\$921,321

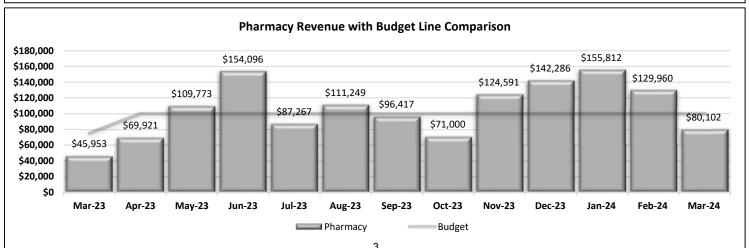


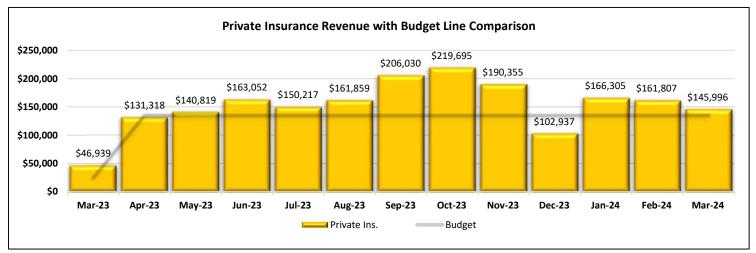


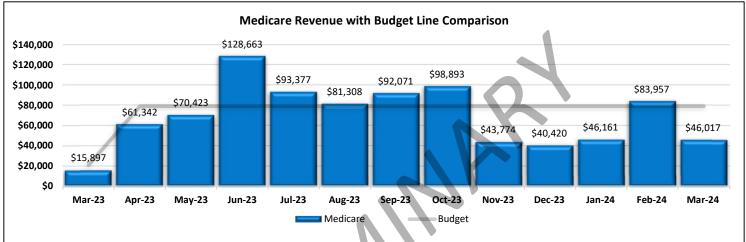


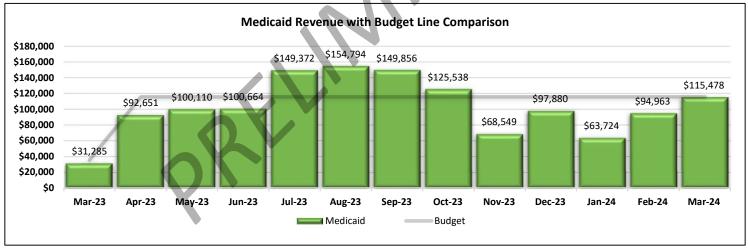


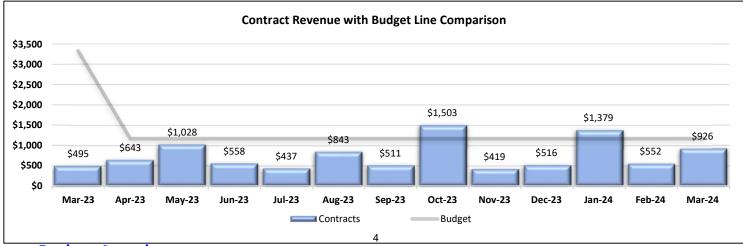












Situation/Request/Ask:

- Purchase or Subscribe to NextGen's Automated Document Sharing (ADS)
- Options
 - o SaaS (Subscription): \$2,145 per month
 - o Purchase w/Monthly support fee: One Time Fee \$34,320 and \$15 per provider per month

Background:

- ADS is a Rule based engine that will automatically add faxes to NextGen's faxing queue.
- Rules can be triggered by the creation (or Provider Sign Off) of a specific document, report, or scanned document
- Rules can be configured to attach additional documents to the fax.
- On average, the Eligibility Services team sends out over 2,500 faxes every month
- Referral Optimization project:
 - o Eliminate paper based workflows
 - o Maximize the use of NGShare
 - Automate fax job creation
 - o Implement OSIS Solutions for Referrals
 - o Transition away from manual faxes, hand written or typed referral forms

Assessment/Rationale:

April 2024 Referrals as of 5/11/2024

Total Referrals	1068		
Outstanding referrals	312 (252 unique patients)		
Average time to process 10 days	10 days		
Unworked referrals from 4/2024	29%		

- ADS is a work smarter utility
 - Reduces the need to add extra staff
 - Aids in the creation of streamlined referral and case management workflows
 - ADS is not strictly a product for referrals, it can be leveraged to automate faxes for other EHR outbound communications.
 - o ROI will be compounded as more outbound communications are automated

Recommendation:

- Purchase ADS below is a 3-year cost breakdown
- Incorporate ADS into the Referral Optimization project

SaaS (Subscription): \$2,145 per month

Year 1: \$ 25,740

• Year 2: \$ 25,740

Year 3: \$ 25,740

3-year total: \$77,220

Purchase w/Monthly support fee: One Time Fee \$34,320 and \$15 per provider per month.

- Year I: \$40,920
- Each subsequent year: \$ 6,600 (this would increase as additional providers are added)
- 3-year total: \$54,120

Kendall M. Campbell, MD

Kendall M. Campbell, MD is Professor and Chair of the Department of Family Medicine at the University of Texas Medical Branch (UTMB), in Galveston, Texas. He is the Sealy Hutchings and Lucille Wright Hutchings Chair in Family Medicine.

Dr. Campbell came to UTMB from the Brody School of Medicine at East Carolina University where he served as a tenured Associate Professor of Family Medicine, Senior Associate Dean for Academic Affairs, and Director of the Research Group for Underrepresented Minorities in Academic Medicine. Previous academic appointments have been at the University of Florida (UF) and Florida State University (FSU). His clinical interests have been for underserved patients for which he has developed medication access initiatives, integrated pharmacy and social services with primary care and led community health education initiatives. While at FSU, he Cofounded and Co-Directed the Center for Underrepresented Minorities in Academic Medicine with to study issues that impact recruitment and retention of faculty underrepresented in medicine.

Dr. Campbell is nationally recognized for his work and has published over 100 peer reviewed manuscripts along with book chapters and National Academy of Medicine publications. He has received honors and awards for his service to the field of medicine including the Martin Luther King, Jr. Distinguished Service Award, the Exemplary Teacher Award, and the 2021 Society of Teachers in Family Medicine (STFM) President's Award. He also completed the AAMC Leadership Education and Development (LEAD) certificate program. Dr. Campbell is a founding director of the STFM Leadership through Scholarship fellowship through which he mentors and provides faculty and leadership development to early career Family Medicine faculty all over the country. He has brought this work to UTMB serving as Co-I on the HRSA Center of Excellence for Professional Advancement and Research grant, providing faculty development in writing skills for early career faculty at UTMB. He is also a member of the Academy of Research Mentors. Dr. Campbell was a 2014-2016 Fellow of the National Academy of Medicine and elected as a member into the National Academy of Medicine as part of the class of 2021.

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Coastal
Health &
Wellness April
2024 Health
Center Update





Providing high quality healthcare to all..

coastalhw.org

April 2023 vs. 2024 New vs. Established Patients (4.7 % increase)



April 2023 vs. 2024 Confirmed Appointments (11% increase)

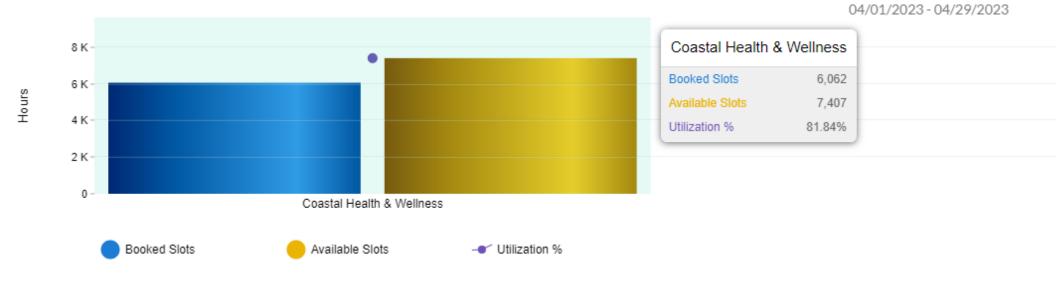


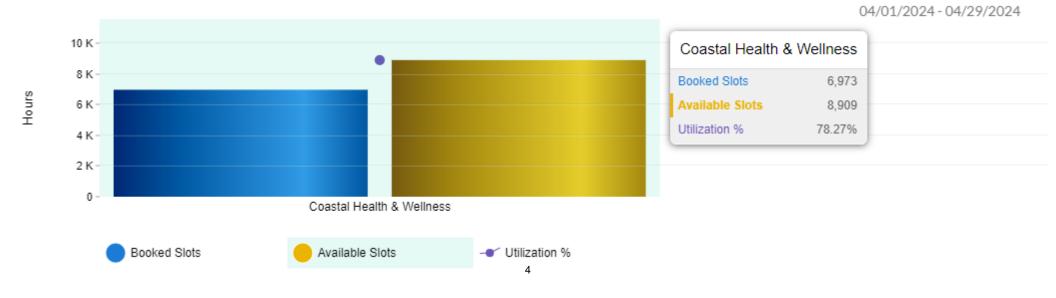


April 2023 vs. 2024 Resource Utilization

 $Resource\ Utilization\ \ \ \ (20.3\%\ increase\ in\ available\ slots\ \ and\ a15\ \%$

increase in booked appointment slots)





April 2023 vs. 2024 Charges/Payments/Adjustments/Refunds

(17.3% increase in charges, 90% increase in payments, 39% increase in adjustments)



April 2023 vs. 2024 Kept/No-Show Comparison (14% increase in kept

appointments, 8% increase in no-shows, 12.7% increase in scheduled appointments)

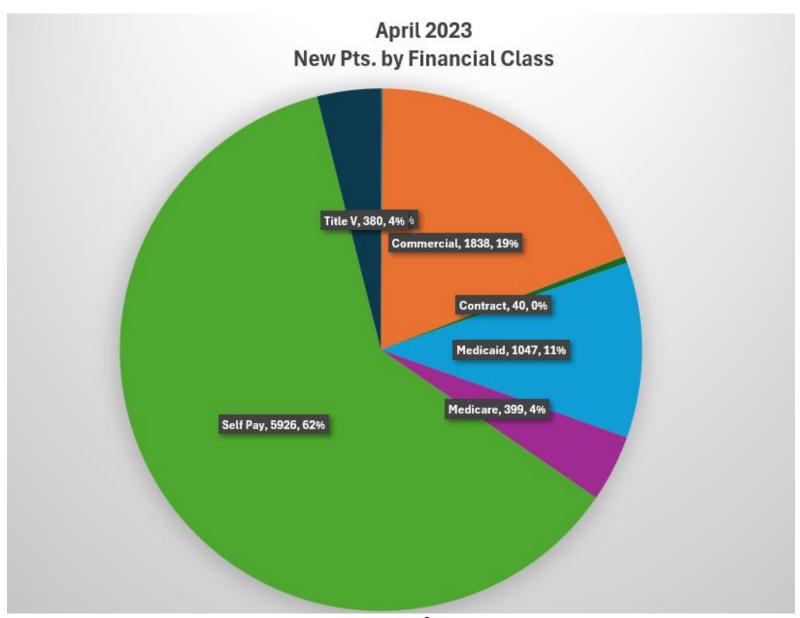


April 2023 vs. 2024 Copay Collection (10% decrease)

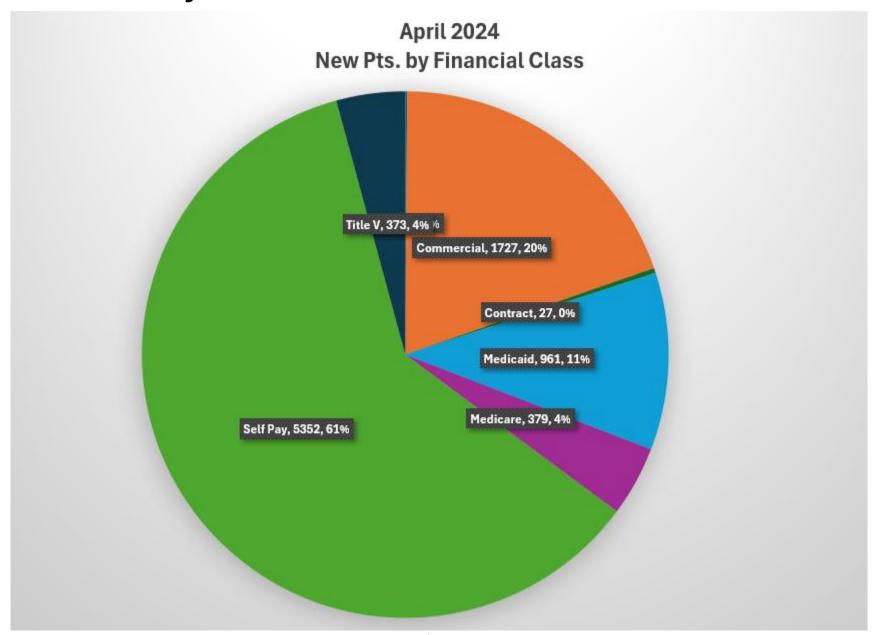




April 2023 vs. 2024 New Pts. by Financial Class

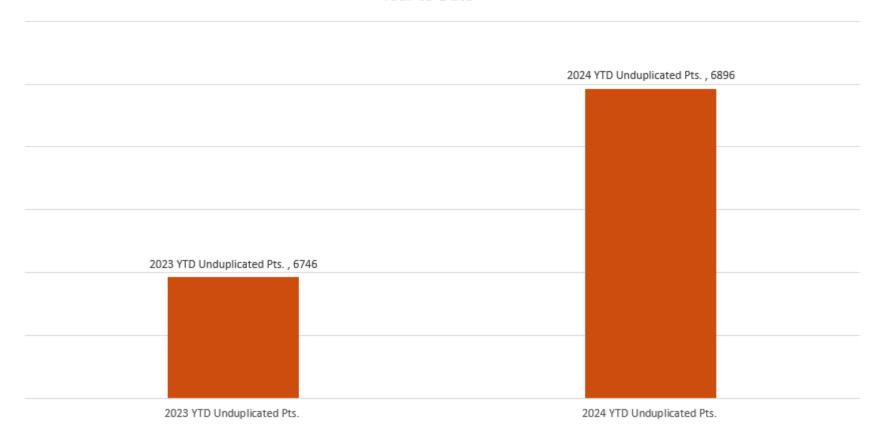


April 2023 vs. 2024 New Pts. by Financial Class



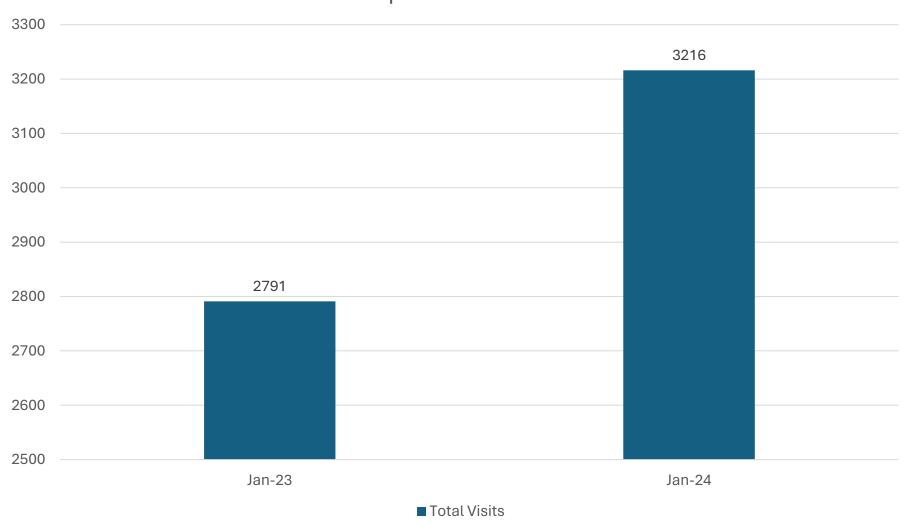
YTD 2023 vs. 2024 Unduplicated Patients* (2.2 % increase)

Unduplicated Patients Year to Date



April 2023 vs. 2024 Visits (15.25% increase)

April Total Visits



See attached report!

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Quarterly Visit & Analysis Report Quarter 1 2024



Strategic
Health Plan
Update
Quarter 1
2024

See attached report!



Community Outreach Events

Provided by Director of Community Engagement



Celebrate!

Coastal's PPS Rate appeal was approved by CMS!!

What does this mean?

- Reimbursement rate for Medicaid appointments was \$174.11 We appealed via the Medicare Cost Report (1st time in CHW history to appeal)
- New Rate was approved for \$275.95



Thank you!!!



- Virtual Provider, "Vippy" for the SBHC is being onboarded!!
- Preparing for CHW's HRSA Operational Site Visit on August 20, 2024.
- We are currently working on our 2024 FTCA application due June 21, 2024.
- EHR Optimization continues. NextGen Patch just occurred success! This brings our system to the most current update.
- Recruitment & Retention Plans in progress.
- Pharmacy in progress!!
- RCM optimization phase IV in process
- Lab Fast Track Lab Services are live!
- Diabetic Retinopathy exam implementation in process!
- Quarterly Strategic Health Plan update is in the works.



coastalhw.org

Community Engagement

Data Collection:

• During this reporting period members of the Health Equity Advisory Council conducted 2 focus groups which covered Mental Health and Financial Literacy. As of July 2023, the staff has been utilizing the (CNA) Community Needs Assessment to gather information on the needs within the different areas of community. In April 2024, 16 surveys were submitted online by community members.

Events:

- Health screenings for April 2024 were conducted at Dickinson Community Center (12 health screenings provided), Bayside Community Center (18 health screenings provided), and Wright Cuney (9 health screenings provided). At these events, the community engagement team also provides information available on upcoming events and services provided by Galveston County Health District (GCHD) & CHW.
- Information on community services, healthy lifestyles and more is shared with local residents at Goodwill stores in League City and Galveston every Thursday of the month (81 individuals engaged for April 2024).
- Community Engagement team members attended and/or hosted 6 health/resource fairs (456 individuals engaged), and 3
 HEAL Classes (167 children present), 2 CET staff judged posters for the UTMB SPPH Public Health Symposium, CET hosted 1
 financial literacy class (10 engaged) on Basic Budgeting, 3 CHW/GCHD presentations were conducted at ADA House (9
 engaged), UTMB School of Nursing (10 students present) and City of La Marque Rotary Club Meeting (18 present), and 4
 community events were attended (TC/LM Young Professionals Networking Project, TC/LM Chamber Wake up Wednesday
 Networking Event, Good Morning Mainland Networking Event, and the LC Chamber National Denim Day Luncheon).
- CET members regularly check the Galveston community refrigerator to make sure it is stocked with various supplies such as masks and face shields and GCHD/CHW information.

April 2024 Outreach

DATE	OUTREACH/MEETING			
04/01/2024 Monday	Health Screenings @ Dickinson Community Center			
04/02/2024 Tuesday	HEAL @ GSM			
04/02/2024 Tuesday	Texas A&M AgriLife Community Futures Forum			
04/03/2024 Wednesday	UTMB SPPH Public Health Symposium			
04/03/2024 Wednesday	HUT Honors			
04/04/2024 Thursday	Goodwill Galveston			
04/04/2024 Thursday	Goodwill LC			
04/04/2024 Thursday	UH Public Health Happy Hour Networking Event			
04/09/2024 Tuesday	TCLM Young Professionals Networking Service Project			
04/09/2024 Tuesday	HEAL @ Hitchcock Head Start			
04/10/2024 Tuesday	HEAL @ Hitchcock Head Start			
04/11/2024 Thursday	AMOCO Financial Literacy Education Class - Basic Budgeting			
04/11/2024 Thursday	Goodwill LC			
04/11/2024 Thursday	BATP Light Up <u>The</u> Night			
04/13/2024 Saturday	Survey's at St. Luke's			
04/16/2024 Tuesday	Children's Services Board Resource Fair			
04/18/2024 Thursday	Health Screenings @ Wayne Johnson			

04/18/2024 Thursday	Goodwill LC		
04/20/2024 Saturday	YMCA Healthy Kids Day		
04/20/2024 Saturday	TOBS Mental Health Focus Group @ Moore Memorial		
04/23/2024 Tuesday	GCHD Bolivar Resource Fair		
04/24/2024 Wednesday	Galveston College Health & Resource Fair		
04/24/2024 Wednesday	ADA House		
04/24/2024 Wednesday	National Denim Day for Sexual Assault Survivor and Victims Awareness Lunch		
04/25/2024 Thursday	Goodwill LC		
04/25/2024 Thursday	Community Resource Fair: National Crime Victims Right Week		
04/26/2024 Friday	Health Screenings at Bayside (Naturefest)		
04/26/2024 Friday	BINGO Health Event		
04/26/2024 Friday	HEAC Financial Literacy Focus Group		
04/27/2024 Saturday	Santa Fe ISD Pre-K/Kinder Registration Fair		
04/30/2024 Tuesday	Resonate Church Senior Event		

Upcoming Events









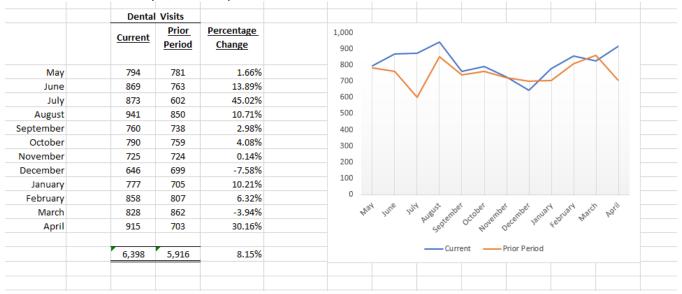






Dental Clinic Board Update 5/23/2024

- Visit Numbers Based on "FQHC Qual Enc" in NextGen
 - We continue to see walk in patients in pain as we can fit them into our schedule.
 - We started releasing comprehensive exams on the 15th of every month, with December being the first month. The appointments continue to fill quicker each month.
 - o For April 2024, we had an increase in qualifying encounters of 30.16% compared to April 2023.
 - We have an 8.15% increase in qualifying encounters comparing May 1, 2023 April 30, 2024 with May 1, 2022 – April 30, 2023.



- Current projects, plans, department overview for dental
 - Dr. Lindskog continues to serve on the COM Hygiene School Advisory Board. They are planning to start Fall 2024 with their first class.
- Provider Education Opportunities
 - All providers continue to select and participate in continuing education of their choice. They also share knowledge from these courses with the other providers during monthly meetings.
- Barriers or Needs (if applicable)
 - Staffing
 - We have a Dental Office Manager scheduled to start on May 30th.

Governing Board May Agenda

School Based Clinic: Total April visits: 46

Students: 2
Staff: 3
Existing CHW: 41
In person: 4
Telehealth: 42

Telehealth/ Doxyme visit: Total April visits: 132

Increase: +53

CHW clinic visits: Total April visits: 2298

Schedule visits: 3097 No Shows: 797 No Show Rate: 25% Show Rate: 75%

Total charges: \$558,985.57

Current Projects:

We have been trained on use of Retinal Cameras, working on integrating with Nextgen, hopefully go live in the next few weeks.

We have been trained on the use of the Virtual Provider for use at the school-based clinic, we are awaiting IT approval to go live, (they are working on integrating with Nextgen as well as cybersecurity with the unit)

We now have 3 new providers that have started, 2 are starting to see patients and 1 is completing his orientation.

We continue working with the Gulf Coast Center on integration.

We are working to expand services in Women's Health



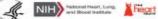
May is High Blood Pressure Education Month

Millions of people have high blood pressure and don't know it. Some of the risk factors for high blood pressure include age, lifestyle habits, and family history. Taking small steps like eating healthy, getting regular physical activity, managing stress, and aiming for a healthy weight can help keep our blood pressure and hearts healthy. Learn more about preventing and managing high blood pressure here.



- What was my blood pressure reading and what do the numbers mean for me?
- How often should I have my blood pressure checked?
- How can I control my blood pressure if it's high?
- Can any medicines that I take affect my blood pressure?







Happy Administrative Professionals Day!

Happy Administrative Professionals Day! On April 24, we celebrated the backbone of our offices - our amazing admins. From keeping things running smoothly to always lending a helping hand, we appreciate all you do. Shout out to Coastal Health & Wellness admin, Anthony Hernandez and Tikeshia Thompson-Rollins - thank you for being rock stars!





Thank you CHW nurses!

Here's to the superheroes in scrubs! We celebrated National Nurses Week May 6-12 with immense gratitude for the incredible care, compassion, and courage our nurses bring to every moment. You're not just healthcare providers; you're guardians of hope, healers of hearts, and beacons of strength. Thank you for everything you do!

Pictured below, L to R:

Debra Howey, RN - Infection Control Nurse Ami Cotharn, RN - Chief Operating Officer Tiffany Carlson, RN - Nursing Director

Rosemary Gonzales, LVN - Licensed Vocational Nurse I - Bilingual

Shawntai Lyons, LVN - LVN II Lead

Jeanette Moody, LVN - SUD & Medication Refill Nurse LVN

Tamara Wallace, LVN - LVN II Lead

Dana Ayers, LVN - Supervisor

Crystal Huesca, LVN - LVN II Lead - Bilingual

Teresa De Jesus Garcia, RN - CHW RN Care Coordinator













NURSES WEEK

OBMX B SCHOORS





Meet Virginia Lyle

Meet Virginia Lyle! Virginia is the Lab and X-ray manager for Coastal Health & Wellness, a Community Health Center under GCHD. She joined us around five years ago and has been working in a lab setting for over twenty years.

Where are you from?

"Almost heaven, West Virginia."

What is your favorite part of your job?

"I love being amongst people. Patient care is my passion."

What is one fun fact about you?

"I supplement my income by playing dominoes and quarter poker when I am not fishing!"

You're granted three wishes. What are they? (And you can't ask for more wishes.)

"I would wish for a healthy future.I would also have to wish the same for my husband as I would want him by my side. My last wish would be a selfish one. I would want a guaranteed long-shot winner of the 2035 Kentucky Derby. I could then invest my retirement funds in the race, and that should be enough to take care of us."

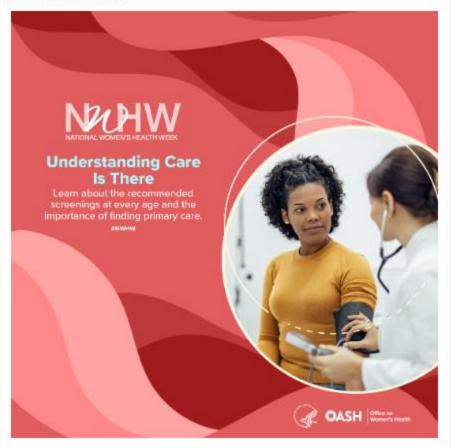
We asked Virginia what is something you would like everyone to know about your job/ department they may not know. She said, "My staff makes our job look easy, but the level of patient care, technique, and processes are complicated and require a great deal of skill. CHW and myself are fortunate to have such a great Team."



Happy National Women's Health Week!

Staying on top of your health means more than just seeing a health care provider when you're sick. Routine care, a healthy diet, physical activity, quality sleep, finding the right primary care provider, and getting ready for health care visits are key steps to keeping yourself in the best health possible.

Prioritize your well-being with routine health screenings. Check out this Health Screenings fact sheet to learn more.



Don't forget medicine, supplies in hurricane kit

Being aware isn't the same as being prepared - and that's especially true during hurricane season, which begins June 1.

Key tips include developing an evacuation plan, assembling your disaster supplies, checking on your insurance coverage, preparing your home, checking on neighbors and completing a written plan to make sure everyone is on the same page.

It's important to be prepared ahead of time during hurricane season. In addition to having basic emergency supplies, people with diabetes should also put together a diabetes care kit. Put all your medical information and supplies in one place so that it's easy to take them with you if you have to evacuate. Learn what you should have in your diabetes care kit.

And, remember to stay informed by local leaders. Learn more from the Galveston County
Office of Emergency Management and at Ready.gov.

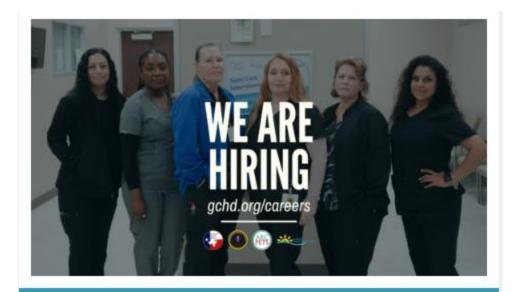
Upcoming Events



Join us on Saturday, June 8th, for a Men's Health Month Celebration at the Wayne Johnson Community Center in La Marque. There will be a free community walk, vendors, and more! Scan the QR codes to register.



Save the Date! Join us for an unforgettable Back-to-School Block Party at Galveston County Health District! Get ready to snag FREE backpacks jam-packed with school goodies, connect with local businesses offering essential resources for kids, and even get those all-important back-to-school immunizations! Plus, exciting raffles await from top entertainment spots across the county! Mark your calendars, and let's kick off the school year!



Telehealth visits offer convenient care

Did you know Coastal Health & Wellness offers Telehealth patient visits to better serve you?

As your trusted Primary Care Medical Home, we strive to do all we can to ensure the health and safety of our patients and providers.

Telehealth visits are an easy, convenient way for you to talk with your provider without having to leave your house or travel to the clinic. It is a secure, internet application that allows you to privately discuss your concerns with your provider.

Learn more about our telehealth visit service or call us at 409.938.2234 if you have any questions.

Stay in touch with Patient Portal

Have you signed up for our patient portal? It's an easy way to get in touch with your Coastal Health & Wellness team.

- · Request and view appointments
- Send a message to your provider and CHW team
- View a summary of your health record and lab results
- · Request prescription refills
- Pay statements

Call us at 409.938.2234 to learn more!

Click here to learn more about CHW services. Click here to learn more about becoming a patient. Click here to meet our CHW providers.

Coastal Health & Wellness Strategic Health Plan Tracker

Priority	Goal	Tasks	Measurement	Measurement Cadence	Spring 2024 Update	Actions/Progress - Closeout of 2022 (January 2023 Update)
11101114	- Cour	765113	Meddarement	measurement educate	Spring 2027 Spatte	nations/110g.css closecut of 2022 familiary 2020 optimely
	5.1 Upgrade CHW technology for	5.1.1 Upgrade HR, payroll, and accounting and finance				INITIATED AND ONGOING, CONVERSION TO SAGE ACCT. AND BAMBOO HR WENT LIVE OCTOBER 1 2022 UKG is being implemented for payroll and HR and parent
Priority 5	care improvements and efficiency.	software.	Software updated (Y/N)	12/31/2025	UKG implementation for payroll/HR 07/23	company SAGE is being implemented for Accounting TBD Oct. 1 (8/22)
					Yes. All services (medical and behavioral health are actively equipped	
					for telehealth visits (Doxy.me) Medicaid is still revising rules for	INITIATED AND ONGOING Reevaluating and rewriting telehealth processes, when
Priority 5		5.1.2 Expand and optimize virtual care.	Virtual care expanded (Y/N)	12/31/2025	teledentistry, so it has not been fully implemented, but we have completed some trial asynchronous dental visits.	patients call for an appointment telehealth is offered in lieu of face to face if applicable (8/22)
Filolity 3		3.1.2 Expand and optimize virtual care.	virtual care expanded (1/14)	12/31/2023	completed some trial asynchronous dental visits.	applicable (6) 22)
						INITIATED AND ONGOING Population health has been completely onboarded and
		5.1.3 Population Health implementation beginning in April		42/24/2025	Yes. Implementation of i2i population health management. Data	implemented into practice as of (8/30). Standardized workflows are being evaluated
Priority 5		2022.	(Y/N) Patient satisfaction surveys are	12/31/2025	paired with CareMessage for patient outreach via texts.	and set to be implemented later this fall (8/30)
			collected and reviewed (Y/N)		Transitioned survey administration from SurveyMonkey to Phreesia.	
		5.1.4 Monitor patient experience based on patient	interventions implemented as		New dashboard for Phreesia survey monitoring presented at April	
Priority 5		satisfaction surveys and develop interventions as needed.	needed (Y/N)	Bi-annual	2024 QAPI.	INITIATED AND ONGOING
					Yes, results are presented month to QAPI and quarterly to GB QAPI. Yes, I don't recall an intervention that was implemented this past	
		5.1.5 Routine audits of newly implemented technology for			year. CHW is ready to assist and improve processes if needed when	INITIATED AND ONGOING Audit conducted by Luz, Dr. Choi, and COO. Redundancies
Priority 5		functionality and potential gaps.	Audits occur (Y/N)	Bi-annual	patients have an unfavorable experience.	found in softwares and service was discontinued with one company. (7/22)
					Nursing Director (Tiffany Carlson) says they have SOPs for day-to-day	
					task and procedures. Have developed standing delegation orders for vaccines and point of care testing.	
					vaccines and point of care testing.	
					Speaking for CHW – HIM (Health Information Management) dept. We	
	5.2 Develop or update processes enhancing communication and	5.2.1 Develop more robust standard operating procedures			have current SOPs for all current functions within this department. SOPs for Dental updated and new SOPscreated including Recall SOP	INITIATED AND ONGOING, STARTED WITH RCM. Credentialing Program created SOPs
Priority 5	work performance.	for all aspects of care.	SOPs are created or revised (Y/N)	Bi-annual	301 3 101 Dental apaated and new 301 sereated including needs 301	and are implemented, OEE Program SOPs were created and are implemented (8/22)
			Feedback is solicited (Y/N), Action is		Staff surveyed/ every 6 months, patients collected daily and	
Priority 5		5.2.2 Regularly solicit and act upon meaningful staff and patient feedback.	taken in response to feedback (Y/N) and documentation of the response	Ri-annual	presented monthly/quarterly. Management reviews feedback and acts accordingly.	INITIATED AND ONGOING DURING IN-SERVICE AND RANDOMIZED
Thomas 5		patient recuback.	and documentation of the response	Di dilliddi	acts accordingly.	INTIATED AND ONGOING DOMING IN SERVICE AND MANDOWIZED
						INITIATED AND ONGOING. Leadership has identified a go-live date of November for
		5.2.3 Conduct annual performance reviews and	Performance reviews and		2023 annual performance evaluations were merit based with	roll out of Performance Reviews with incentives / merit based raises being offered in
Priority 5		improvement plans.	improvement plans conducted (Y/N)	Annual	increases effective 02/01/24.	January 2023.
		5.2.4 Development of SHP dashboard that is updated bi-	Dashboard created and updated			
Priority 5		annually.	(Y/N)	Bi-annual	This dashboard is up to date.	INITIATED AND ONGOING, GOES BEFORE GOVERNING BOARD NEXT, JANUARY 2022
					We keep a daily log sheet of some of the CHW patients admitted and	
		5.3.1 Maximize the current use of NextGen through	Patient referrals and emergency		discharged from UTMB, HCA, and Methodist ED/Hospital and call	
Priority 5	5.3 Leverage existing technologies.			Ongoing	them to schedule a hospital follow up appointment.	In progress
					Bates) 8.17.23. Contracted with OSIS (OSIS is a non-profit technology	with NextGen to improve upon patient follow-up NextGen committee formed
		E 2.3 Maximize the current use of NewtCon by			services organization dedicated to providing expert NextGen®	(Medical Director, Dr. Choi; Physician, Dr. Garcia; Mid-Level Lead, Borillo; COO, Ami; HIM, Luz) Will meet once a month to improve processes of workflows,
		5.3.2 Maximize the current use of NextGen by creating		1	Healthcare technology assistance around the country - exclusively to	mivi, Luz) will meet once a month to improve processes of workflows,

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

Governing Board
May 2024
Item#13
Comments from Board Members