The County of Santa Cruz Integrated Community Health Center Commission MEETING AGENDA

November 1, 2023 @ 4:00pm - 5:00pm

MEETING LOCATION: In-Person - 1430 Freedom Blvd., Suite F, Watsonville, Ca 95076 and 1080 Emeline Ave., Bldg. D, Admin Conference Room, Santa Cruz, CA 95060 will connect through Microsoft Teams Meeting or call in (audio only) <u>+1 916-318-9542, 500021499#</u> United States, Sacramento Phone Conference ID: **500 021 499**#

ORAL COMMUNICATIONS - Any person may address the Commission during its Oral Communications period. Presentations must not exceed three (3) minutes in length, and individuals may speak only once during Oral Communications. All Oral Communications must be directed to an item not listed on today's Agenda and must be within the jurisdiction of the Commission. Commission members will not take actions or respond immediately to any Oral Communications presented but may choose to follow up at a later time, either individually, or on a subsequent Commission Agenda.

- 1. Welcome/Introductions
- 2. Oral Communications
- 3. October 4, 2023, Meeting Minutes Action Required
- 4. Service Area Review Action Required
- 5. Proposed Changes to the Sliding Fee Discount Scale Action Required
- 6. Board Composition and Meeting Times
- 7. Quality Management Update
- 8. Social Justice Medication Shortages
- 9. Financial Update
- 10. CEO/COVID-19 Update

Action Items from Previous Meetings:	Person(s)	Date	Comments
Action Item	Responsible	Completed	

Next meeting: Wednesday, December 6, 2023, 4:00pm - 5:00pm Meeting Location: In-Person - 1430 Freedom Blvd., Suite F, Watsonville, Ca 95076 and 1080 Emeline Ave., Bldg. D, Admin Conference Room, Santa Cruz, CA 95060. Commission will connect through Microsoft Teams Meeting or call in (audio only) United States, Sacramento Phone Conference ID: 500 021 499#

The County of Santa Cruz Integrated Community Health Center Commission

Minute Taker: Mary Olivares

Minutes of the meeting held November 1, 2023.

TELECOMMUNICATION MEETING: Microsoft Teams Meeting - or call-in number +1 916-318-9542 - PIN# 500021499#

Attendance	
Len Finocchio	Co-Chair Officer
Rahn Garcia	Member
Dinah Phillips	Member
Marco Martinez-Galarce	Member
Maximus Grisso	Member
Gidget Martinez	Member
Tammi Rose	Member
Jennifer Phan	County of Santa Cruz
Miku Sodhi	County of Santa Cruz, Asst. Director of HSA
Raquel Ramirez Ruiz	County of Santa Cruz, Sr. Health Services Manager
Julian Wren	County of Santa Cruz, Admin Services Manager
Mary Olivares	County of Santa Cruz, Admin Aide
Meeting Commenced at 4:03 pm and	

Excused/Absent:

Excused: Christina Berberich Absent: Michelle Morton

concluded at 5:15 pm

1. Welcome/Introductions

2. Oral Communications:

Commission Member Gidget Martinez was sworn in by Juliette Burke.

3. October 4, 2023, Meeting Minutes - Action Required

Review of October 4, 2023, Meeting Minutes – Recommended for Approval. Rahn moved to accept minutes as presented. Marco second, Len abstained, and the rest of the members present were all in favor.

4. Service Area Review - Action Required

Jennifer presented on the Annual Service Area Review and the Hazard Vulnerability Analysis (HVA). She stated the goal is to define and review the boundaries of the catchment area to be served, including the identification of the medically underserved population(s). Jennifer reported we are seeing an increase in the number of patients that we are serving at our health center's as well as an increase in the number of patients residing outside of our service area. She stated the service area boundaries continue to conform to relevant political subdivision boundaries. She reported two out of the three health center locations reside directly within an area that has been identified as having medically underserved populations. The 3rd health center (Emeline Health Center) is located just right outside of the medically underserved area in North County but is still accessible via public transit (Santa Cruz Metro). Health Centers are located both in North County & South County, eliminating geographical barriers to health care access for patients. Our service sites continue to be available and accessible to residents of the area appropriately. Jennifer is requesting approval for the following: Approval of new zip code edits on HRSA Form 5B to accurately reflect where most of our health center patients reside and approval for continuation of current service delivery sites & services as well as recommended edits to service delivery sites hours of operations. Rahn moved to approved as recommended. Dinah second, and the rest of the members present were all in favor.

Jennifer also reported HVA stands for "Hazards Vulnerability Analysis". She stated this is a systematic approach to recognize, identify, & rank top hazards that may significantly impact health center operations. Jennifer went through each clinics top three hazards. The Watsonville clinic had Tsunami listed as one of their top three. There was question on this from one of the commissioners as to why this would be a top three item, Jennifer will follow up with Walter. There is no action on this item.

5. Proposed Changes to the Sliding Fee Discount Scale - Action Required

Julian presented on the proposed changed to the sliding fee discount scale. Julian reported the schedule of fees must be based on the reasonable cost of providing the service and must be adjusted periodically to reflect changes in the cost of providing the service. He stated the health center must make and continue to make every reasonable effort to collect appropriate reimbursement for its costs based on the full amount of fees and payments for health center services. The health center must ensure that any fees or payments required by the health center for health care services will be reduce or waived to assure that no patient will be

denied such services due to an individual's inability to pay for services. Julian reviewed the data, benefits, and goals with the commissioners. Julian stated the action needed is approval of the proposed update of the Santa Cruz County Health Center's Sliding Fee Discount Schedule to an all-inclusive flat fee and approval of the proposal to increase the overall fee schedule structure for each Tier. Dinah moved to approved as recommended. Maximus second, and the rest of the members present were all in favor.
At this point of the meeting Rahn moved to add an additional ten minutes to today's commission meeting.
Board Composition and Meeting Times
This item was brought up at our last meeting to see if we wanted to change the date and time of our meeting's. It was suggested that we put this on the top of next month's agenda and send out a quick survey to commissioners on availabilities. Raquel also stated that we need more commissioners for our commission board.
7. Quality Management Update
Raquel reported they were encouraged by the Alliance to apply for funding available through The California Department of Health Care Services (DHCS). Raquel stated the Central California Alliance for Health will review our application first then forward our application to DHCS. Raquel reported the potential amount we could receive is \$2,250,000.00 and this would be used to hire Community Health Workers, Clinical Quality Nurses and a Panel Manager. This is an action item Raquel will bring back. Rahn suggest putting this item to ratify the action to submit the grant so it's a verification on our part.
Raquel also reported on a previous follow up item on Medi-Cal continuous coverage unwinding. She stated starting in April, members with a June renewal date received redetermination paperwork in the mail. Counties will have 14 months to complete their backlog of redeterminations and members will have 90 days to submit paperwork.
8. Social Justice
Delete this item from agenda.
9. Financial Update
Julian reported on revenue and expenditures he stated for the first three months of this fiscal year, the total expenditures vs revenue is \$5.5 million, most of the expenditures is in the salary area. Julian also presented on the grant summary, he stated there is quite a bit of revenue we are getting ready to draw down and this will help reduce the deficit. Julian also reported the two billing staff vacancies are now filled. He increased the frequency in which he is proves expenditure information to the Heath Center Managers so they are informed on the budget status and gave them access to the reports so they can look up the data for themselves. He lastly reported there are two clinician positions in Watsonville that have been filled, two positions at IBH and for the month of October clinics had an increase of 1000 patients.
10. CEO/COVID 19 update
No COVID 19 update today. Please get the word out on Emeline's Medical Director vacancy. Amy wanted Raquel to mention that a card had been sent to Caitlin and Coach. Next meeting: December 6, 2023, 4:00pm - 5:00pm
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☐ Minutes approved		1 1
	(Signature of Board Chair or Co-Chair)	(Date)



Health Centers Division

Quality Management Report

November 2023

Quality Management Committee

- WHC shared a new workflow for childhood developmental screenings
- Central California Alliance for Health (CCAH) Care Based Incentive (CBI)
- Equity and Practice Transformation (EPT) Payment:
 Payment Provider Directed Payment Program
- Ryan White Committee Update

Equity and Practice Transformation(EPT) Provider Directed Payment Program

Funded By: The California Department of Health Care Services (DHCS).

The Central California Alliance for Health will review our application first then forward our application to DHCS.

Due: 10/23/2023

Award Announcement: 12/11/2023

Program Period: 1/1/2024-12/31/2028

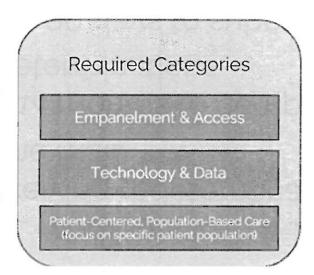
Potential Amount: \$2,250,000

(450,000 p/y)

Proposal: Community Health Workers, Clinical Quality Nurses and Panel

Manager.

Action Item





Action Items:

Continuous Coverage Unwinding

- Starting in April, members with a June renewal date began receiving redetermination paperwork in the mail.
- Counties have 14 months to complete their backlog of redeterminations.
- Members have ~90 days to submit paperwork.

Action Items:

Alliance Response

- Member Outreach Materials
 - DHCS Toolkit
- Alliance Website Updates
- Call Center Phone Tree
 - · Waiting message
- County Partnership
 - Member contact information exchange
- Member Texting Campaign
 - Contract with a text messaging vendor
- Live Outreach
 - Live outreach calls to members at risk of losing Medi-Cal coverage for not completing their redetermination paperwork.
- Monitoring
 - Measurement of impact of Member Engagement/Member Touchpoints
 - Monitoring number of members being disenrolled from Medi-Cal



Have you moved? Did you get Medi-Cal coverage during the pandemic? You will need to update your county office with any changes to your information.

For more information, visit now the alliance health/renew or vie your health of cores



HEALTHY PEOPLE. HEALTHY COMMUNITIES



Action Items:

Impact Monitoring:

June

Category	Santa Cruz	Monterey	Merced	Total
Redetermination	3,264	8,728	8,830	20,822
Disenrolled	1,056	1,368	2,202	4,626

July

Category	Santa Cruz	Monterey	Merced	Total
Redetermination	2,180	8,672	6,596	17,448
Disenrolled	886	2,061	1,951	4,898

August

Category	Santa Cruz	Monterey	Merced	Total
Redetermination	1,631	7,939	6,356	15,926
Disenrolled	678	441	692	1,197

Due to county system issues, not all members disenrolled accurately for August. These numbers will increase over the next 30 days as this issue is fixed.



Integrated Community Health Center Commission Fiscal Report

Dr. Julian Wren, MSW, Ed.D.

REVENUE AND EXPENDITURES BY MONTH

		A)	
3/24 CLINIC (All)(Multi	ple	Items)	
As of 9/30/2023			
CLINIC	\sqrt{k}	Choose Division	
(AII)	*		
(Multiple Items)	-X		
	As of 9/30/2023 CLINIC (All)	As of 9/30/2023 CLINIC	CI.INIC Thoose Division (All)

Actual	٧	Column Labels	*	grave;	
Row Labels	+	1-July	2-August	3-September	Grand Total
-REVENUE		3,670,316	(3,587,635)	(4,035,380)	(3,952,700)
± 15-INTERGOVERNMENTAL REVENUE	S	1,491,799	(668,542)	(912,593)	(89,336)
+ 19-CHARGES FOR SERVICES		1,617,127	(2,640,293)	(2,412,078)	(3,435,244)
± 23-MISC. REVENUES		561,390	(278,800)	(710,709)	(428,120)
EXPENDITURE		1,890,703	4,119,641	3,256,749	9,267,093
* 50-SALARIES AND EMPLOYEE BENEF		1,717,927	2,787,332	2,386,641	6,891,900
± 60-SERVICES AND SUPPLIES		(218,350)	938,357	597,780	1,317,787
• 70-OTHER CHARGES		0		12,101	12,101
80-FIXED ASSETS		0		1,197	1,197
± 90-OTHER FINANCING USES		0			0
 ₱ 95-INTRAFUND TRANSFERS		391,126	393,952	259,030	1,044,108
Grand Total		5,561,018	532,006	(778,631)	5,314,393

YTD Actual Revenue and Expenditures

	County of Santa Cruz (HSA	A)
	FY 23/24 (AII) (AII)(AII)(AI	II)
	As of 9/30/2023	
Division	CLINIC	Choose Division
GLKey	(AII)	*
II. Key & Title	(All)	¥
FiscalMouth	(AII)	46
Object	(AII)	v

Row Labels	Adopted Budget	Adjusted Budget	Actual *
REVENUE	(58,801,253)	(58,801,253)	(3,952,700)
* 15-INTERGOVERNMENTAL REVENUES	(7,638,506)	(7,638,506)	(89,336)
19-CHARGES FOR SERVICES	(50,905,161)	(50,520,875)	(3,435,244)
23-MISC. REVENUES	(257,586)	(641,872)	(428,120)
EXPENDITURE	56,833,410	56,833,410	9,267,093
■ 50-SALARIES AND EMPLOYEE BENEF	35,325,814	35,325,814	6,891,900
± 60-SERVICES AND SUPPLIES	7,409,191	7,409,191	1,317,787
* 70-OTHER CHARGES	4,508,292	4,508,292	12,101
+ 80-FIXED ASSETS	734,388	734,388	1,197
90-OTHER FINANCING USES	97,875	97,875	0
+ 95-INTRAFUND TRANSFERS	8,757,850	8,757,850	1,044,108
Grand Total	(1,967,843)	(1,967,843)	5,314,393

EZ FIN Clinic Revenue Character 15 & 23

As Of = @current-fiscal-year-end; Years = 1; Chart Fields = Department, Division, Character, Object, JLKey; Balances = Adjusted Budget, Year-To-Date Actual; Revenues/Expenditures = R, E

Revenues/Expenditures [RV] and Dept [36] and Division [3610] and Character [15*, 23*]

Run: 2023-10-25 05:08 PM

								FY 20	024	
								Adjusted	Year-To-Date	
	Revenues/Expenditures	Dept	Division	JL Key	JLKey Title	Character	Object	Budget	Actual	
Character: 15 - INTERGOVERNMENTAL REVEN	UES									
	RV	36	3610		FED-MAA/TCM MEDI-CAL ADMIN ACT	15	40935	353,836.00	(484,183.28)	
	RV	36	3610		FED-AIDS C.A.R.E. ACT	15	40980	409,150.00	-	
	RV	36	3610		FED-HEALTH PROGRAMS	15	40996	4,951,571.00		COVID Bridge funding, Street Medicine, Base Gran
	RV	36	3610		FED-MISC GRANTS	15	41095	33.713.00		Harm Reduction Coalition
	RV	36	3610		FED-OTHER	15	41096	1,143,443.00		Medication Assisted Treatment Grant (SORIII)
	RV	36	3610		FED-HUD	15	41106	746,793.00	-	HUD MATCH
	RV	36	3610	H34519	HUD Shelter Plus Care Admin	15	41106	0.00	5,408.36	
	RV	36	3610	H34900	MAT Access Points	15	41095	0.00	6,385.63	
	RV	36	3610	H36300	HUD MATCH OPERATING	15	41106	0.00	20,672.86	
	RV	36	3610	H36301	HUD MATCH LEASING	15	41106	0.00	672,988.15	
	RV	36	3610	H36913	COVID19 HRSA 48289	15	40996	0.00	-	
	RV	36	3610	H36914	COVID19 HRSA 51320	15	40996	0.00	787.56	
	RV	36	3610	H37200	HUD MATCH ADMIN	15	41106	0.00	22,942.30	
	RV	36	3610	H37500	HPHP BASE GRANT	15	40996	0.00	-	
	RV	36	3610	H39908	SOR 2, 3 Brdge Gp & 3 HB&SPOKE	15	41096	0.00	216,064.00	
	RV	36	3610	H39909		15	40980	0.00	194,497.43	
Total 15 – INTERGOVERNMENTAL REVENUES								7,638,506.00	651,021.77	
Character: 23 – MISC. REVENUES										
Character. 23 - Wilde, REVENOES	RV	36	3610			23	42380	0.00	(156.00)	
	RV	36	3610			23	42384	641.872.00	241,500.00	
	RV	36	3610	H39804	ACE-PRACTICE	23	42384	0.00	22,456.56	
	RV	36	3610		CCAH STREET MEDICINE	23	42384	0.00	(181,538.20)	
	RV	36	3610		CCAH-CBI QI	23	42384	0.00	345,857.74	CBI QI
Total 23 – MISC. REVENUES		30	1					641,872.00	428,120.10	
Idda 23 - MISC. NEVENOLS								8,280,378.00	1,079,141.87	

Row Labels	Charge Amount	Payment Amount	Average Payment
January 2021	\$1,504,926.25	(\$2,382,667.86)	
February 2021	\$1,890,893.15	(\$2,147,467.81)	
March 2021	\$1,885,195.37	(\$3,212,316.83)	(\$2,580,817.50)
April 2021	\$2,126,661.72	(\$1,199,527.81)	
May 2021	\$1,894,952.96	(\$5,326,724.51)	
June 2021	\$2,062,905.46	(\$2,351,247.10)	
July 2021	\$1,461,444.16	(\$2,396,302.70)	
August 2021	\$1,633,637.45	(\$3,037,055.22)	
September 2022	\$1,738,347.88	(\$2,637,090.59)	\$ (2,824,657.99)
October 2021	\$1,897,560.37	(\$2,361,252.04)	
November 2021	\$1,530,146.28	(\$2,462,186.89)	
December 2021	\$1,832,304.32	(\$2,585,658.37)	
January 2022	\$1,704,562.55	(\$2,344,979.46)	
February 2022	\$2,011,246.26	(\$2,097,481.19)	
March 2022	\$1,974,143.84	(\$3,238,063.20)	\$ (2,514,936.86)
April 2022	\$1,479,236.49	(\$2,631,063.47)	
May 2022	\$2,155,781.24	(\$3,098,064.04)	
June 2022	\$1,846,565.99	(\$1,860,084.27)	
July 2022	\$1,214,492.59	(\$2,809,330.87)	
August 2022	\$1,752,686.48	(\$2,056,073.13)	
September 2022	\$1,969,938.67	(\$3,135,266.26)	(\$2,598,313.67)
October 2022	\$1,729,630.95	(\$2,184,013.10)	
November 2022	\$1,840,867.21	(\$2,941,670.71)	
December 2022	\$1,955,761.02	(\$2,281,391.86)	
January 2023	\$1,432,312.31	(\$3,090,693.29)	
February 2023	\$2,165,912.41	(\$1,565,907.31)	
March 2023	\$2,051,022.67	(\$3,546,919.19)	\$ (2,601,765.91)
April 2023	\$2,082,977.22	(\$2,021,381.67)	
May 2023	\$3,166,089.64	(\$3,326,081.97)	
June 2023	\$2,547,111.17	(\$1,980,899.10)	
July 2023	\$2,030,878.59	(\$4,022,932.70)	
August 2023	\$2,042,563.69	(\$2,384,232.35)	
September 2023	\$1,862,531.47	(\$2,875,509.41)	\$ (2,768,506.20)
October 2023	\$1,641,003.01	(\$1,516,711.35)	
Grand Total	\$64,116,290.84	(\$89,108,247.63)	

			Grant Sum	mary				
Program Managers T	Revenue or Grant	Budget *	YTD Expenses	Remaining Budget	Grant Revenue Receivec	FY23-24	Ends 💌	Notes
Raquel	ACES-PRACTICE	100,249.66	96,970.53	3,279.13	70,632.40	49,956.33	11/30/2023	Billed on 9/15/23 Q4 Invoice
Raquel	HRSA-Bridge Access	49,219.00	393.78	48,825.22	393.78	393.78	12/31/2024	Drewdown October
Raquel	HRSA-Capital Improvements	672,865.00	19,129.00	653,736.00	19,129.00	-	9/14/2024	Holding off until Raquel receives Approval
Raquel, Jenn	HRSA-Ryan White	409,150.00	342,290.39	66,859.61	342,290 39	106,683.28	12/31/2023	Drewdown October
Danny, Raquel	Hub & Spoke: SOR III	1,296,380.00	648, 192.00	648, 188.00	432,128.00	-	6/30/2024	Sent Invoices in October
Joey, David	HUD-Housing Authority	22,708.00	5,408.36	17,299.64		-	6/30/2024	Sent Invoices in October
Joey, David	HUD-Match	945,315.00	454,608.54	490,706.46	454,608.54	454,608.54	2/28/2024	Disbursed Funds \$450k
Joey, Raquel	CCAH-Street Medicine	806,836.00	620,585.00	186,251.00			3/31/2024	Based on Payment Schedule
Raquel	CCAH-Provider Recruitment SR MHCS	86,857.34		86,857.34			6/30/2024	
Raquel	CCAH-Provider Recruitment MA	65,000.00		65,000.00			6/30/2024	
Joey, Raquel	Harm Reduction	13,650.00	13,650.00	74 C.	-	-	6/30/2024	
Raquel	CBI QI			7/12/11/11/11/11/11/11/11/11/11/11/11/11/	345,857.74	345,857.74	12/31/2023	
	Total	4,468,230.00	2,201,227.60	2,267,002.40	1,665,039.85	957,499.67		

"Life is 10% what happens to us and 90% of how we react to it." —Charles Swindoll

SLIDING FEE DISCOUNT SCALE PROPOSAL

AGENDA

- The Action Needed
- Health Resources Services Agency (HRSA) compliance Rules
- The Goal
- The Benefit of a true flat fee schedule
- Data
- Recommendations

ACTION NEEDED

- Approval of the proposed update of the Santa Cruz County Health Center's Sliding Fee Discount Schedule to an all-inclusive flat fee.
- Approval of the proposal to increase the overall fee schedule structure for each Tier.

HRSA COMPLIANCE

- Policies related to billing and collections that require board approval include those that address the waiving or reducing of amounts owed.
- The health center must establish and implement a schedule of fees for services provided, which must be approved by the governing board.
- The schedule of fees must be based on the reasonable cost of providing the service and must be adjusted periodically to reflect changes in the cost of providing the service.
- The health center must make and continue to make every reasonable effort to collect appropriate reimbursement for its costs on the basis of the full amount of fees and payments for health center services.
- The health center must assure that any fees or payments required by the center for health care services will be reduced or waived to assure that no patient will be denied such services due to an individual's inability to pay for such services.

THE GOALS

- Create a true all-inclusive flat fee sliding fee discount scale.
- Eliminate the percentage calculation for fees related to labs, xrays, and procedures.

THE BENEFITS

- The Office Visit fee will be the only fee a patient will need to pay and all of the other charges for labs, xrays, and procedures will be eliminated for sliding fee scale patients.
- A totally flat sliding fee schedule is easier to understand and apply than a percentage-based fee schedule.
- Patients can quickly determine their fee based on their income and family size without having to calculate percentages.
- A flat fee schedule ensures that patients with similar income and family size pay the same fee for the same service, regardless of the percentage used to calculate the fee.

THE BENEFITS

- A flat fee schedule is more transparent than a percentage-based fee schedule because patients can easily see how their fee is calculated based on their income and family size.
- A flat fee schedule is easier to implement and maintain than a percentage-based fee schedule because it does not require complex calculations or frequent updates.
- A flat fee schedule reduces the administrative burden on health centers because it simplifies the billing and collection process reducing administrative costs.
- Finally, A flat fee schedule can improve patient satisfaction because it is easier to understand and more transparent than a percentage-based fee schedule.

THE DATA

- The change was based on data collected on sliding fee scale charges and payments over the last 2 fiscal years.
- I ascertained the total dollar amount collected for the 2 fiscal years on activities other than primary care and the total number of CPT codes utilized.
- I then divided the amount collected for labs, xrays, and procedures and divided that by the
 number of CPT codes to ascertain a flat dollar amount to increase each tier (by \$9) with the goal
 of getting as close to revenue neutral as we will no longer be collecting for the other activities
 (labs, procedures, and xrays) will be zero.

SANTA CRUZ COUNTY HSA ATP 2023 Sliding Fee Discount Schedule

Instructions

- Using the table below, find your household size down the left column.
 Next, find your annual income range on that same line,
 Last, follow the income range column downward to the point that will tell you whether you might pay a nominal fee or a designated percentage of the charges.

2023 DHHS Poverty Guidelines

A	В	С	D	E	F
Household Size	Less than or equal to	Less than or equal to	Less than or equal to	Less than or equal to	Over 200%
	100%	133%	166%	200%	Unqualified
1	\$14,580	\$16,971	\$24,203	\$29,160	\$29,161 and over
2	\$19,720	\$26,228	\$32,735	\$39,440	\$39,441 and over
3	\$24,860	\$33,064	\$41,268	\$49,720	\$49,721 and over
4	\$30,000	\$39,900	\$49,800	\$60,000	\$60,001 and over
5	\$35,140	\$46,736	\$58,332	\$70,280	\$70,281 and over
6	\$40,280	\$53,572	\$66,865	\$80,560	\$80,561 and over
7	\$45,420	\$60,409	\$75,397	\$90,840	\$90,841 and over
8	\$50,560	\$67,245	\$83,930	\$101,120	\$101,121 and ove
For households over 8,	add \$5,140 for each addit	onal member.			
Dental	\$30	\$50	\$90	\$135	No Discount Full Fee
Office Visit Nominal Fee	\$21	\$34	\$44	\$54	100% of charges

SOURCE: US Department of Health and Human Services, Effective January 19, 2023, https://aspe.hhs.gov/topics/poverty-economic-mobility/poverty-guidelines

WHAT DOES THIS MEAN?

- One payment
- Clarity
- Transparency
- Simplicity of administration
- Revenue neutral for agency
- Cost neutral for patients

RECOMMENDATIONS

• Approve revised flat fee schedule as proposed.

INTEGRATED COMMUNITY HEALTH CENTER COMMISSION ANNUAL SERVICE AREA REVIEW

November 1, 2023

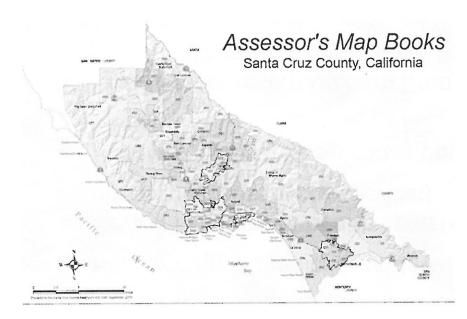
Commission's Annual Service Area Review

- Goal: To define and review the boundaries of the catchment area to be served, including the identification of the medically underserved population(s).
- Who: Commission
- Why: To ensure services provided are available and accessible to residents promptly and appropriately. To maintain compliance with the Health Resources & Services Administration (HRSA).
- When: Occurs once a year

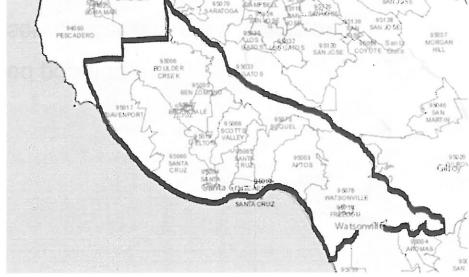
Evaluation Process

- Review and define service area
- Review map of medically underserved populations
- Review locations of health centers, service delivery sites, hours of operations, & services provided
- Review service area zip codes declared on HRSA Form 5B: Service Sites
- Review most recent Uniform Data Systems (UDS) report data (including current health center patients' zip codes)
- Review Analysis & Conclusions

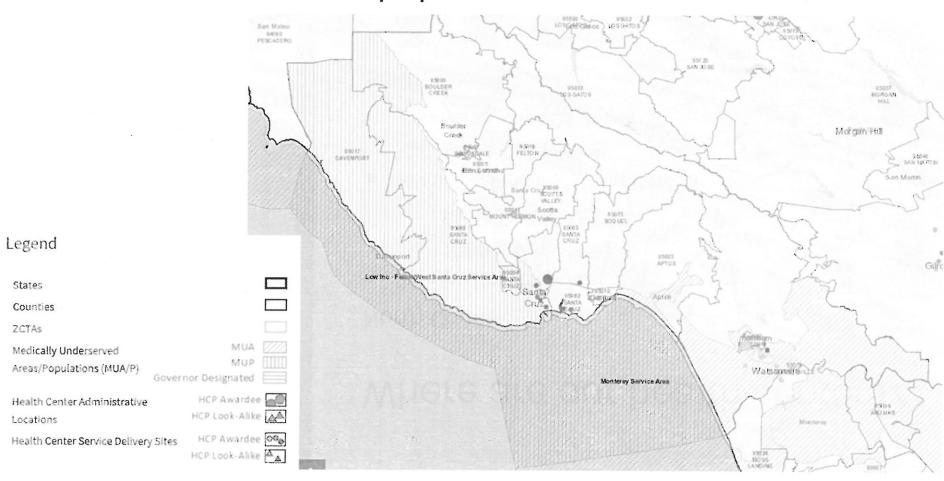
What is our service area?

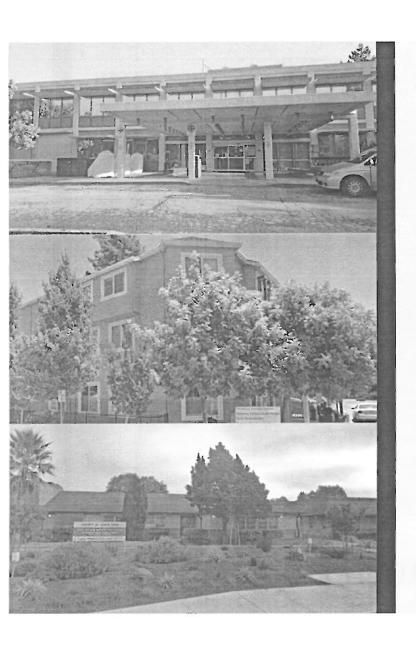


Due to the fact that we are a Public Agency, all of our health centers are committed to serving patients living within Santa Cruz County. Thus, we continue to define our service area by the County's borders. Borders:
San Mateo County (North)
Santa Clara County (East)
San Benito County (South-East)
Monterey County (South)
Pacific Ocean (West)



Where are our medically underserved areas and/or populations?





Where are our health centers?

North County:

- Emeline Health Center
 - 1080 Emeline Bldg. D
 Santa Cruz, Ca 95060
- Homeless Persons' Health Project
 - 115-A Coral Street
 Santa Cruz, Ca 95060

South County

- Watsonville Health Center
 - 1430 Freedom Blvd. Suite C & D,
 Watsonville, Ca 95076

What are all our service delivery sites listed on our Form 5B?

Site Name	Site Address (City, State, Zip, CDistrict)	Site Location Type	Hours of Operation
Homeless Persons Health Project Mobile Unit	115 Coral St, Santa Cruz, CA 95060	Mobile Van	20
JANUS OF SANTA CRUZ	200 7TH AVE, SANTA CRUZ, CA 95062	Permanent	168
Watsonville Health Center - Building D	1430 Freedom Blvd Ste D, Watsonville, CA 95076	Permanent	53.5
Watsonville Homeless Health Center	1430 Freedom Blvd Ste C, Watsonville, CA 95076	Permanent	49
Pioneer Street Clinic	100 Pioneer St, Ste D, Santa Cruz, CA 95060	Permanent	40
Watsonville Health Center-Building F	1430 Freedom Blvd Ste F, Watsonville, CA 95076	Permanent	45
Dientes Community Dental Care - Capitola Road	1500 Capitola Rd, Santa Cruz, CA 95062	Permanent	40
Dientes Community Dental- Beach Flats	302 Riverside Ave, Santa Cruz, CA 95060	Permanent	37.5
DIENTES COMMUNITY DENTAL CLINIC	1830 COMMERCIAL WAY, SANTA CRUZ, CA 95065	Permanent	40
Janus of Santa Cruz	718 Carmel St, Santa Cruz, CA 95062	Permanent	168
NORTH COUNTY MENTAL HEALTH	1400 Emeline Ave Ste 150,277,280, SANTA CRUZ. CA 95060	Permanent	40
Watsonville Health Center - Building A	1430 Freedom Blvd Ste A, Watsonville, CA 95076	Permanent	40
Watsonville Health Center - Building E	1430 Freedom Blvd Ste E, Watsonville, CA 95076	Permanent	40
Dientes Mobile Dental Clinic	1830 COMMERCIAL WAY, SANTA CRUZ, CA 95065	Mobile Van	36
Coral Street Recuperative Care Center	115 Coral St, Santa Cruz, CA 95060	Permanent	35
Watsonville Health Center - Building B	1430 Freedom Blvd Ste B, Watsonville, CA 95076	Permanent	40
Emeline Health Center	1080 EMELINE AVE, SANTA CRUZ, CA 95060	Permanent	40
Homeless Persons' Health Project Coral Street Clinic	115-A Coral St. Santa Cruz, CA 95060	Permanent	38
Emeline Health Center Homeless Persons' Health Project Coral Street Clinic			

Recommended edits to service delivery sites hours of operations

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HRSA required services that we provide

▼ H80CS00048: SANTA CRUZ COUNTY, Santa Cruz, CA

Grant Number: H80CS00048

BHCMIS ID: 090880

Project Period: 11/01/2001 - 01/31/2026

Budget Period: 02/01/2023 - 01/31/2024

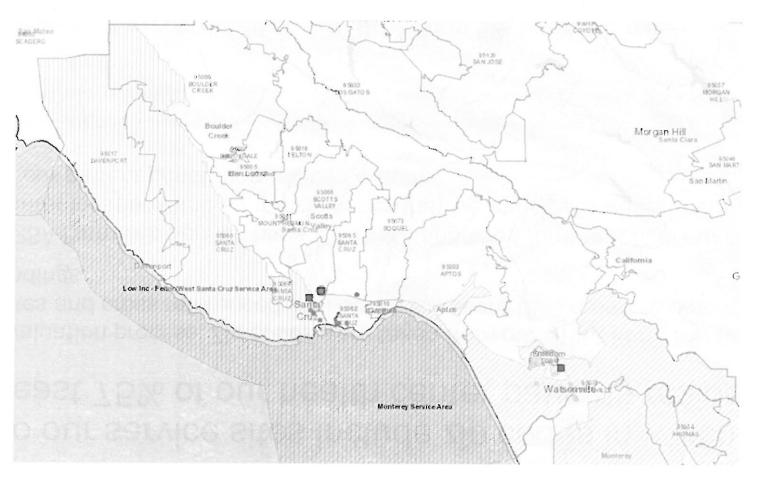
	Service Delivery Methods					
Service Type	Column I. Direct (Health Center Pays)	Column II. Formal Written Contract/Agreement (Health Center Pays)	Column III. Formal Written Referra Arrangement (Health Center DGES NOT pay)			
Seneral Primary Medical Care	×					
Diagnostic Laboratory	x	x	X			
Jagnostic Radiology	×	x				
creenings	×	x	×			
Coverage for Emergencies During and After Hours	×					
foliantary Family Planning	×					
mmunizations	×					
Vell Child Services	×					
Synecological Care	×		x			
Obstetrical Care						
Prenatal Care			X			
Intrapartum Care (Labor & Delivery)			x			
Postpartum Care			x			
reventive Densal		x				
harmaceutical Services	X	X				
CH Required Substance Use Disorder Services	×	x				
ase Management	X					
ligibility Assistance	×					
lealth Education	X					
lutreach	×					
ransportation	X	X				
ranslation	X	×	X			

HRSA additional & specialty services that we provide

		Service Delivery Methods	
Service Type	Column I. Direct (Health Center Pays)	Column II. Formal Written Contract/Agreement (Health Center Pays)	Column III. Formal Written Referral Arrangement (Health Center DOES NOT pay)
Additional Dental Services		X	
Behavioral Health Services			
Mental Health Services	×		
Recuperative Care Program Services	x		
Complementary and Alternative Medicine	×	×	
Additional Enabling/Supportive Services	X		

		Service Delivery Methods				
Service Type	Column I. Direct (Health Center Pays)	Column II. Formal Written Contract/Agreement (Health Center Pays)	Column III. Formal Written Referra Arrangement (Health Center DOES NOT pay)			
Psychiatry	X					
Other - Orthopedics		X				

Do our service sites reach our medically underserved areas and/or populations?



Do our service sites include zip codes in which at least 75% of our health center patients reside?

- Evaluation process: Zip codes were taken from our HRSA Form 5B: Service Sites and cross referenced with our most recent UDS report to determine findings.
- HRSA Form 5B: Service Sites A HRSA approved form that lists our health center locations and all the zip codes that we anticipate where the majority of our patient population will come from.

Service Area Zip Code (Include only those from which the majority of the patient population will come)

Saved Service Area Zip Code(s)

95006, 95018, 95073, 95005, 95010, 95062, 95060, 95003, 95019, 95066, 95076

- Zip codes currently listed on our HRSA Form 5B: Service Sites
 - 95003, 95005, 95006, 95010, 95017, 95018, 95019, 95060, 95062, 95065, 95066, 95073, 95076

2022 UDS Report - Patients by Zip Code

- UDS A standardized reporting system that provides consistent information about health centers such as: socio-demographic characteristics of people served, types of services provided, etc.
- Patient zip codes listed on the 2022 UDS report:

93635, 93901, 93905, 93906, 93907, 93933, 93940, 93955, 95001, 95003, 95004, 95005, 95006, 95007, 95010, 95012, 95017, 95018, 95019, 95020, 95023, 95033, 95039, 95045, 95060, 95061, 95062, 95063, 95064, 95065, 95066, 95067, 95073, 95076, 95077

 Highlighted zip codes reflect zip codes also listed on HRSA Form 5B

ZIP Code (a)	Nene-Uninsured (b)	Medicald/CKIP/Other Public (s)	Redicare (d)	Private (e)	Total Palanta (f)
93635	2	11	ż	3	1
93901	ı	18	3	1	2
93905	10	37	1	1	4
93906	18	56	5	5	71
93907	31	50	9	- 6	9
93932	5	13	3	2	2.
13940	0	7	3	2	1:
13455	9	5	4	2	2
95001	2	21	16	9	31
95003	60	203	74	9	34
95004	10	65	16	2	9.
95005	28	130	55	3	21
95006	24	168	41	3	236
95007		15.	5	0	31
95010	30	107	56	4	21
15012	25	89	10	3	127
95017	5	9	4	0	22
95018	36	134	65	6	24
95019	217	560	140	24	941
15020	3	7	0	1	11
16023	9	12	6	2	21
95033	7	34	9		50
15039	16	51	14	2	6.3
95045	2	7	2	•	12
15060	654	1,349	461	3.0	2,503
15061	15	38	24	4	81
15082	230	576	294	26	1,120
15013	16	45	73	. 2	74
15064	1	17	3	1	22
7506S	34	102	40	1	177
5066	40	167	47	8	252
5067	5	13	7	0	25
5073	56	145	67	7	275
6076	1.654	4,278	865	202	7,019
15077	29	122	27	5	183

All Zip Codes Listed on 2022 UDS Report

Zip Code	# of patients in 2022	Zip Code	# of patients in 2022	Zip Code	# of patients in 2022
93635	18	95007	32	95062	1,128
93901	29	95010	217	95063	74
93905	49	95012	127	95064	22
93906	79	95017	23	95065	177
93907	96	95018	241	95066	252
93933	23	95019	941	95067	25
93940	12	95020	11	95073	275
93955	20	95023	29	95076	7,019
95001	39	95033	50	95077	183
95003	346	95039	83	Other Zip Codes	233
95004	93	95045	12	Unknown	2
95005	216	95060	2,503		
95006	236	95061	81	Total patients	14,996

UDS zip codes currently listed on HRSA Form 5B

Zip Code	# of patients in 2022	Zip Code	# of patients in 2022
95003	346	95060	2,503
95005	216	95062	1128
95006	236	95065	177
95010	217	95066	252
95017	23	95073	275
95018	241	95076	7019
95019	941	-	

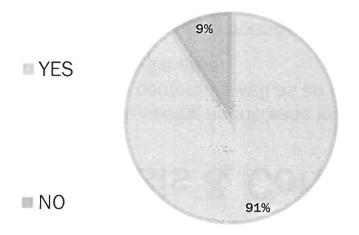
Recommended Edits to HRSA Form 5B Given 2022 UDS Data

Zip Code	# of patients in 2022	Zip Code	# of patients in 2022
95003	346	95060	2,503
95005	216	95062	1128
95006	236	95065	177
95010	217	95066	252
95017	23	95073	275
95018	241	95076	7019
95019	941		

Do our service sites include zip codes in which at least 75% of our health center patients reside?

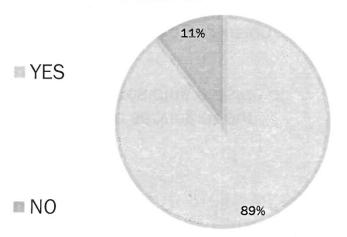
Using Original Form 5B Zip Codes

% OF HEALTH CENTER PATIENTS THAT RESIDE WITHIN ZIP CODES LISTED ON OUR HRSA FORM 5B



<u>Using Updated Form 5B Zip</u> <u>Codes</u>

% OF HEALTH CENTER PATIENTS THAT RESIDE WITHIN ZIP CODES LISTED ON OUR <u>UPDATED</u> HRSA FORM 5B



Analysis & Conclusions

- We are seeing an increase in the number of patients that we are serving at our health centers as well as an increase in the number of patients residing outside of our service area.
- Our service area boundaries continue to conform to relevant political subdivision boundaries. We continue to serve patients within the borders of Santa Cruz County.
- 2 out of the 3 health center locations reside directly within an area that has been identified as having medically underserved populations.
- The 3rd health center (Emeline Health Center) is located just right outside of the medically underserved area in North County but is still accessible via public transit (Santa Cruz Metro).
- Health Centers are located both in North County & South County, eliminating geographical barriers to health care access for patients.
- Our service sites continue to be available and accessible to residents of the area appropriately.

Recommendations for the Commission

- After reviewing the 2022 UDS data and determining our median # of patients to be any zip codes that have 200 or more patients. We recommend the Commission to approve the following edits to HRSA Form 5B:
 - Remove the following zip codes for having patients under the 200 median limit: 95017 (23 patients) & 95065 (177 patients)
- Using our old Form 5B zip codes about 91% of our current patients reside within the zip codes listed on our HRSA Form 5B: Service Sites, reflecting 16% above the HRSA requirement of 75%.
- If the Commission approves the new zip code edits, then it will reflect that about 89% of our current patients reside within the new zip codes listed on our HRSA Form 5B: Service Sites, reflecting 14% above the HRSA requirement of 75%.

Zip Code #	of patients in 20	122 Zip Code	# of patients in 2022
95003	346	95060	2,503
95005	216	95062	1128
95006	236	95065	177
95010	217	95066	252
95017	23	95073	275
95018	241	95076	7019
95019	941		

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Consumption of Commercial Health Commercial	\$430 Frequent Blod Sto C. Wickerstille, CA 99075	Pennanent	48
Punter Street Cons	100 Philheli St. Sw D. Switz Gruz, CA 96060	Permanens	40
manuscratte inwells Contact Building F	1435 Freezon Zinz Sie P. Wesserville, CA \$50%	Permanent	A S
Daniel Community Daniel Care - Cophile Road	1500 Cauting No. Santa Cruz. C4 99367	Perisasent	40
Durine Ceresory Drove Boach Free	SEE Printed to Ave. Care Cour. CA 90080	Remarket	35.6
DENTES COMMUNITY DENTAL CLINIC	1530 COUNTRIES, WAY, SANTA COUR CA 95045	Protected	40
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NORTH COUNTY MENTAL HEALTH	\$400 000 group Are 51g 150 071 280 SANTA CRUZ, CA 95060	Remarket	40
manuscrib Heath Carter - Suiting A	1430 Freedom Blod Silv A. Watsonicke, CA 90075	Permanent	И
Paramine Health Cornel - Bulliong C	1430 Freeport Stort Shir E. Hydrometie, CA 95076	Permanent	40
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Care Street Recuporative Care Corter	115 Corat St. Samle Crist. Cit. 90900	Permanum.	16
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Commission Action Items

- Requesting Commission approval for the following:
 - Approval of new zip code edits on HRSA Form 5B to accurately reflect where the majority of our health center patients reside
 - Approval for continuation of current service delivery sites & services as well as recommended edits to service delivery sites hours of operations