

**County of Solano  
Community Healthcare Board  
Regular Meeting**

March 19, 2025  
12:00 pm – 2:00 pm  
2101 Courage Drive, Fairfield, CA 94533  
Room Location: Multi-Purpose Room

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**AGENDA**

**1) CALL TO ORDER – 12:00 PM**

- a) Welcome
- b) Roll Call
- c) Introductions

**2) APPROVAL OF THE MARCH 19, 2025 AGENDA**

**3) PUBLIC COMMENT**

This is the opportunity for the Public to address the Board on a matter not listed on the Agenda, but it must be within the subject matter jurisdiction of the Board. If you would like to make a comment, please announce your name and the topic you wish to comment and limit comments to three (3) minutes.

**REGULAR CALENDAR**

**4) APPROVAL OF MINUTES**

Approval of the February 19, 2025, draft meeting minutes.

**5) CLINIC OPERATIONS REPORTS**

**Written Report submitted?**

- |   |     |
|---|-----|
| a) Staffing Update – Cynthia Coutee                   | YES |
| b) Credentialing Update – Cherry Violanda             | YES |
| c) HRSA Grants Update(s) – Noelle Soto                | YES |
| d) Grievances/Compliments – Rebecca Cronk             | YES |
| e) H&SS Compliance – Krista McBride                   | YES |
| f) Finance & Revenue Cycle Management – Nina Delmendo | YES |
| g) Referrals – Cynthia Coutee                         | YES |
| h) OCHIN EPIC Update(s) – Dona                        | NO  |
| i) QI Update – Han Yoon                               | NO  |
| j) FHS Clinic Q-Matic Stats – Noelle Soto             | YES |

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**6) CHB FOLLOW-UP TO CLINIC QUALITY AND OPERATIONAL REPORTS**

Review, Follow-up & Action: CHB will provide feedback on reports, request additional information on quality and clinic operations reports & follow up on these requests.

**7) HRSA PROJECT OFFICER REPORT**

- a) Health Center HRSA Project Officer Update – Dona Weissenfels
  - i) Health Center Activities – Internal and External Update
  - ii) Strategic Plan Report Update

**8) BUSINESS GOVERNANCE**

- a) Review and consider approval of the DAX Co-Pilot Policy 500.10 – Dr. Michele Leary
  - i) **ACTION ITEM:** The Board will consider approval of the DAX Co-Pilot Policy

**9) DISCUSSION**

**10) BOARD MEMBER COMMENTS**

**11) CLOSED SESSION**

- a) Project Officer/CEO Evaluation Continuation

**12) ADJOURN: TO THE COMMUNITY HEALTHCARE BOARD MEETING OF:**

DATE: April 16, 2025  
TIME: 12:00 pm – 2:00 pm  
LOCATION: Multi-Purpose Room  
2201 Courage Drive  
Fairfield, CA 94533



**County of Solano**  
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**REGULAR GOVERNING BOARD MEETING MINUTES**

Wednesday, February 19, 2025

In Person Meeting

**Members Present:**

At Roll Call: Michael "Mike" Brown, Ruth Forney, Charla Griffith, Gerald Hase, Deborah Hillman, Seema Mirza, Annabelle Sanchez, Tracee Stacy, Sandra Whaley, and Brandon Wirth.

**Members Absent:** Etta Cooper, Marbeya Ellis, Rovina Jones, Anthony Lofton and Don O' Conner.

**Staff Present:** Cynthia Coutee, Desiree Bodiford, Dona Weissenfels, Dr. Cameron Kaiser, Dr. Bela Matyas, Dr. Michele Leary, Han Yoon, Kelly Welsh, Nina Delmendo, Pierce Leavell, Whitney Hunter, Danielle Seguerre-Seymour, and Katreena Dotson.

**1) Call to Order – 12:10 PM**

- a) Welcome
- b) Roll Call

**2) Approval of the February 19, 2025, Agenda**

Discussion: None.

Motion: To approve the February 19, 2025, Agenda.

Motion by: Tracee Stacy and seconded by Sandra Whaley.

Ayes: Michael "Mike" Brown, Ruth Forney, Charla Griffith, Gerald Hase, Deborah Hillman, Seema Mirza, Annabelle Sanchez, Tracee Stacy, Sandra Whaley, and Brandon Wirth.

Nays: None.

Abstain: None.

Motion Carried.

**3) Public Comment**

- No public comments.

**Regular Calendar**

**4) Approval of Minutes**

Approval of the January 15, 2025, draft Minutes.

Discussion: None.



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Motion: To approve the January 15, 2025, draft Minutes.

Motion by: Deborah Hillman and seconded by Seema Mirza.

Ayes: Michael "Mike" Brown, Gerald Hase, Deborah Hillman, Seema Mirza, Annabelle Sanchez, Tracee Stacy, and Brandon Wirth.

Nays: None.

Abstain: Ruth Forney, Charla Griffith, and Sandra Whaley.

Motion Carried.

**5) Clinic Operations Reports**

Mike Brown reminded the Board Members about the Closed Session, following the regular meeting, to discuss the Project Officer/CEO Evaluation.

- a) **Staffing Update** — Cynthia Coutee (*Please reference the "FHS Staffing Update – February 19, 2025"*)
  - Cynthia reported that Family Health Services (FHS) had a Dental Assistant, Clinic Physician, Chiropractor and two Physician Assistant candidates in background. She mentioned that interviews for Licensed Marriage & Family Therapist, Medical Assistant, Clinic Registered Nurse and Dentist would be held in February. The Clinic Health Services Manager, Senior, and the Office Supervisor were pending interview dates. Cynthia stated that a Dental Assistant and Clinic Physician were starting in February and two Medical Assistants vacated the same month.
- b) **Credentialing Update** — Desiree Bodiford – (*Please reference the "FHS Credentialing, Provider Enrollment and Sanctioning Screening Status Report – February 2025"*)
  - Desiree referred to the FHS Credentialing, Provider Enrollment and Sanctioning Screening Status Report and stated that there were no updates.
  - There were no questions from the Board.
- c) **HRSA Grant Update(s)** — Dona Weissenfels – (*Please reference the "Health Resources and Services Administration (HRSA) Grant Updates – February 19, 2025"*)
  - Dona announced that the 2024 Uniform Data System (UDS) Report was submitted before the February deadline. She explained that it has to be reviewed by Health Resources and Services Administration (HRSA) before it can be certified. Dona added that the UDS data is publicly shared, but the government recently removed the information from online. FHS is still required to submit the report.
- d) **Grievances/Compliments** — Pierce Leavell (*Please reference the "Grievance Reports, April-December 2023, January– December 2024, & January 2025" and "Grievance Category Definitions"*)
  - Pierce reported that eight grievances filed in the Quality of Care and Scheduling categories, attributing it to the transition to OCHIN Epic and scheduling. Mike Brown asked if operations were improving with the Epic. Pierce confirmed that the new system has a registration process that provides information to the providers, prior to seeing the patient, making it more efficient.
  - Mike and Dona inquired about the details of the Quality of Care grievance and what the rating was. Pierce was not able to provide additional information. Dona requested follow-up at the next CHB meeting.
- e) **H&SS Compliance** — (*Please reference the "FHS Compliance Incident Report Tracking, January 1-January 31, 2025"*)



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- Dona stated that Krista McBride was not present to discuss the FHS Incident Report but added that any Board questions would be addressed. Tracee Stacy inquired about the Medication Error/Incorrect Vaccine incident. Dr. Bela Matyas confirmed that it was a documentation error that was corrected before the patient received the prescription. Ruth Forney asked about preventing those errors. Dr. Michele Leary and Dr. Matyas mentioned that one document piggy-backed with another, stating that the solution would be to go through all pages.
  - Brandon Wirth suggested a two-year tracker, to help analyze and identify if there were increase in breaches, the reason(s) and how the clinics are resolving and/or preventing the issue(s). Tracee Stacy acknowledged that it is common and happens at other facilities and hospitals. Dona mentioned that she can request Compliance to track and monitor trends. Dr. Leary added that My Chart would move away from paper documents.
  - Mike inquired about the lost County cellphone. Dr. Matyas confirmed it was the first phone lost for the employee, but several staff members have cell phones and if lost or stolen, they would be locked as soon as it is reported.
- f) **Finance & Revenue Cycle Management** — Nina Delmendo and Whitney Hunter (*Please reference the Operations Report – Finance January 2025: “Solano County Expenditure and Revenue Report FHS – January 2025” and Operations Report – Revenue Cycle Report – January 2025: “Solano County FHS Revenue Cycle Report – Total Encounters – Through January 31, 2025”*)
- Finance Report
- Nina stated that there was a revision to the report that was included in the agenda packet. She handed out the Solano County Expenditure and Revenue Report, as of February 19, 2025. She reported that 58% of the fiscal year had passed and that the Mid-Year Budget was expected to be finalized on March 11th. Nina stated that the Financial Report will be presented to the Board at the next CHB meeting.
  - Tracee Stacy asked about delays in the reimbursement cycle. Nina confirmed that OCHIN bills differently from NextGen and still working on the process and details. She mentioned that Medical Billing Supervisor, Barbra Barbeau has been posting payments in Epic, to the patients’ accounts and the clinics were generating revenue.
- Revenue Cycle Report
- Whitney Hunter reported that there was a substantial increase in encounters. Tracee inquired about the increase and how it will affect the budget. Nina explained that the Working Budget estimates where the clinics should be, and the Mid-Year Budget will show a better projection of the where FHS will be financially.
  - Brandon commended the staff on the improvement with encounters and asked if it was due to hiring more providers or better efficiency with the Epic system. Dona Weissenfels attributed the improvement to schedule utilization, meeting productivity goals, workflows, and better tools to help lower the no-show rates (from 35% to 15%). She stated that it will need to be monitored for the next few months, but is improving as anticipated. Dona praised Cynthia Coutee, Dr. Michele Leary and Pierce Leavell for overseeing and managing the progress.
- g) **Referrals Report** — Cynthia Coutee (*Please reference the “Family Health Services Referrals – Time Period January 2025”*)
- Cynthia reported that in January there were 1264 referrals, including 1060 for Adult, 204 for Pediatric, and 570 specialty referrals. As of February 13, 2025, there were 991 referrals in que, and 2849 referrals deferred. She commented that the month of January was short on staff coverage and medical assistants assigned to referrals needed to assist with direct patient care. Cynthia informed the Board that Saturday, February 22nd was a “referral workday” so that the



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MA's could process referrals without interruptions. She also mentioned that the clinic is working on a project to auto close referrals that are pending consultation notes, reducing manual labor. Cynthia also stated that a new task of processing referrals within the clinics was in progress.

- Mike Brown asked if other clinics utilize Epic for their referral process. Cynthia and Dr. Bela Matyas confirmed that other clinics refer to the same specialists in the County, specifically Northbay, and there is limited capacity. Dona added that Northbay will be transitioning to Epic, so will the connection of systems will provide more efficiency.

h) **OCHIN EPIC Update(s)** — Dona Weissenfels

- Dona reported that FHS completed Epic implementation and has been focusing on sustainability. An OCHIN Auditor visited the clinics and observed workflows. She confirmed that there are still outstanding issues, like work pools, that need to be resolved. Dona stated that the Auditor provided a positive report that will be published late February or early March. She mentioned that the next phase is maintenance and FHS will bring in an Account Manager from Bateman Healthcare. Dona expects that in six-months, to a year, the staff should be more comfortable with Epic's technology and tools.
- Mike inquired about the pressures to maintain and sustain. Dr. Matyas stated that the pressure is internal. Goal to serve the 30,000+ Partnership Healthplan (PHC) patients assigned to FHS. Some patients do not need to be seen, while others may need to be seen multiple times a year. He added that having a balanced budget is a factor, as well. Dr. Matyas included that FHS now has a Quality Team that are focused on improving quality of care and have been making improvements. He reported that previously Vallejo was the only clinic to accept new patients. The other two clinics had re-opened, and the number of patients increased to approximately 33,000.
- Dr. Matyas explained that bringing in other providers, like chiropractors and LMFT's, in March or April will better serve the patient population, as well as provide an opportunity to change FHS' rate. Tracee asked about the process. He stated that the clinics would need to demonstrate the services provided, then ask for a new rate during the next fiscal year; a process that can take eight to nine months but will be retroactive. Dr. Matyas added that it would close a \$4M gap.

i) **QI Update** – Han Yoon – *(Please reference the "Primary Care Provider Quality Improvement Program PCP QIP) Report – Solano County, Health & Social Services, Family Health Services, as of December 31, 2024")*

- Han referred to the PCP QIP Report graphs and stated that the measures and goals are part of a PHC incentive program. He explained that the data from 2024 is compared to 2022 and 2023. QA/QI measures such as Diabetes HbA1c Good Control, Controlling High Blood Pressure, Cervical Cancer Screening, and Breast Cancer Screening are a focus for FHS.
- Tracee Stacy inquired about the diabetes measure versus the lead screening. Dr. Michele Leary and Dr. Bela Matyas clarified that for Childhood Immunizations and Adolescent Immunizations, if one vaccine done is missed, FHS receives no credit for that measure, whereas Blood Lead Screening is one visit.
- Tracee also asked about the Fairfield clinic's progress compared to Vallejo and Vacaville. Han explained that the Fairfield location is the pilot clinic to implement the QA/QI projects before it is introduced to the other clinics. Dr. Matyas stated that the Vallejo clinic has a large volume of patients that it would be difficult to focus on meeting measures.
- Tracee inquired about patient outreach and utilizing the mobile van in the future to visit the homeless and school sites. Dr. Leary and Han mentioned that outreach has improved with text notifications, My Chart, Artera Messenger (AI messaging), etc. Dr. Matyas stated that the mobile



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van is a possible option, but it would take a team of clinical staff to provide the service and would not generate revenue like clinic visits would.

j) **FHS Clinic Q-Matic Stats** — (Please reference the “Clinic Metrics – Queue Management (Q-Matic) Stats – February 19, 2025”)

- Noelle Soto was not present. Dona referenced the Clinic Metrics – Queue Management (Q-Matic) Stats Report.
- There were no questions from the Board.

6) **CHB Follow-up to Clinic Quality and Operational Reports**

Review, Follow-up & Action: CHB will provide feedback on reports, request additional information on quality and clinic operations reports & follow up on these requests.

- Dona Weissenfels acknowledged the Board’s request to monitor and track Compliance Incidents, which will be discussed with Krista McBride.

7) **HRSA Project Officer Report**

a) Health Center HRSA Project Officer Update – Dona Weissenfels

i) Health Center Activities – Internal and External Update

Internal News:

- Dona reiterated that the UDS Report was submitted to HRSA before the deadline and stated that she will share the data with the Board when it becomes available.
- Dona reported that PHC performed audits in Vacaville and Fairfield Pediatric clinics. She praised Cynthia Coutee and Pierce Leavell for leading the reviews. Vacaville’s audit resulted in a Corrective Action Plan (CAP), which was corrected. Dona mentioned that there will be a repeat audit in December 2025. She added that PHC revised the audit requirements prior to the Vacaville clinic audit but assured the Board that the items were met during the Fairfield Peds audit. Another audit will not be required for that location for another three years. Dona announced that Fairfield Adult clinic had their audit at the end of February, which Pierce will lead.
- Dona informed the Board that a “Change is Scope” request was submitted to HRSA to add chiropractic services to the medical clinics, which was approved quickly. She mentioned that FHS is working the Wipfli, a consulting firm that has been assisting with filing the request, addressing and leading operational tasks, as well as identifying Chiropractic Integrative Partners (CIP) as the contractor for services. Dona reported that CIP and Wipfli participated in a site visit at all medical clinics in February. She stated that there were operational and financial discussions with the Fiscal, Credentialing and Admin Teams, as well as PHC. Dona anticipated that services would begin in mid-April. She also stated that two Chiropractors were selected and completed their live scan fingerprinting. Ruth Forney asked who hired the doctors and Dona confirmed that CIP did the preliminary recruitment screening and selection.
- Dona conveyed FHS continues to focus on schedule improvements and productivity, with the intention of serving more patients.

External News:

- Dona announced that with the new government administration, FHS was financially affected. She explained that the clinics are a Federally Qualified Health Center (FQHC) and receives federal funding, but recently the funds were frozen for a short period. She stated that the fiscal portal is now accessible, and funding projects had resumed. Dona added that She and Nina Delmendo are closely monitoring the progress and will drawdown, in the event





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of funding shifts. She also mentioned that with the immigration changes, patients are afraid of going to the clinics, so FHS staff has been responding to them sensitively.

- An unidentified Board Member asked about Immigration and Customs Enforcement (ICE) coming into the clinics. Dona assured the Board that ICE Officers would need to present a warrant and that Emery Cowan is working on protocols to address the matter if it arises. Kelly Welsh confirmed that the County Counsel is currently working with Health & Social Services (H&SS) Department on the protocols. Tracee Stacy suggested to have pre-printed informational cards for patients with concerns. Dr. Bela Matyas requested a sample to provide to the County.
- Brandon Wirth inquired about State funding programs and if Public Health (PH) was affected as well. Dr. Matyas confirmed that State of California agencies have communicated that funding will resume if federal funds cease, until a solution is determined. He also explained that PH programs are also threatened because they are federally funded.

### ii) Strategic Plan Report Update

- Dona stated that Strategic Plan Goal #6, Dental Expansion, would be the last goal to cover. Over the next two months she wishes to recap and modify the Strategic Plan with the Board.
- She confirmed that the first objective of replacing dental operatory chairs at the Fairfield dental site by June 2023 was accomplished in August 2024.
- Dona reported that the objective for Vallejo dental was to add four to six new dental operatories by June 2026, but is still pending due to funding constraints. She added that the clinic experienced an influx of 2,000 patients. Brandon Wirth inquired about the funding source, which Tracee asked about the Board already approving the objective. Dr. Bela Matyas clarified that yes, the Board approved to move forward. And in the current fiscal year, the architect process was to survey the building before the contract could be created, however, there is no update. He confirmed that \$2M were allocated a few years prior, but recently the estimate went to \$10M, which would be covered by the County. Dr. Matyas suggested requesting an update from General Services.

## 8) Business Governance

### a) Review and consider approval of the Quarterly Financial Report – Nina Delmendo

#### i) **ACTION ITEM:** The Board will consider approval of the Quarterly Financial Report.

Discussion: Nina noted that the Quarterly Financial Report was from December 2024 and was first presented to the Board at the January 19, 2025, CHB meeting. There was not a quorum at the last meeting to approve the Action Item.

Motion: To approve the Quarterly Financial Report.

Motion by: Tracee Stacy and Ruth Forney.

Ayes: Michael “Mike” Brown, Ruth Forney, Charla Griffith, Gerald Hase, Deborah Hillman, Seema Mirza, Annabelle Sanchez, Tracee Stacy, Sandra Whaley, and Brandon Wirth.

Nays: None.

Abstain: None.





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Motion Carried.

- b) Review and consider approval of the Sliding Fee Scale Discount Program – Policy 100.03 – Whitney Hunter

i) **ACTION ITEM:** The Board will consider approval the Sliding Fee Scale Discount Program.

Discussion: None.

Motion: To approve the Sliding Fee Scale Discount Program.

Motion by: Brandon Wirth and Deborah Hillman.

Ayes: Michael “Mike” Brown, Ruth Forney, Charla Griffith, Gerald Hase, Deborah Hillman, Seema Mirza, Annabelle Sanchez, Tracee Stacy, Sandra Whaley, and Brandon Wirth.

Nays: None.

Abstain: None.

Motion Carried.

- c) Review and consider approval of the revised 2025 Community Healthcare Board Calendar

i) **ACTION ITEM:** The Board will consider approval of the 2025 CHB Calendar.

Discussion: None.

Motion: To approve the revised 2025 CHB Calendar.

Motion by: Brandon Wirth and Tracee Stacy.

Ayes: Michael “Mike” Brown, Ruth Forney, Charla Griffith, Gerald Hase, Deborah Hillman, Seema Mirza, Annabelle Sanchez, Tracee Stacy, Sandra Whaley, and Brandon Wirth.

Nays: None.

Abstain: None.

Motion Carried.

- d) Review and consider approval of the Quarterly Quality Improvement Report – Han Yoon

i) **ACTION ITEM:** The Board will consider approval of the Quarterly Quality Improvement Report.

Discussion: None.

Motion: To approve the Quarterly Quality Improvement Report.

Motion by: Tracee Stacy and Sandra Whaley.



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Ayes: Michael “Mike” Brown, Ruth Forney, Charla Griffith, Gerald Hase, Deborah Hillman, Seema Mirza, Annabelle Sanchez, Tracee Stacy, Sandra Whaley, and Brandon Wirth.

Nays: None.

Abstain: None.

Motion carried.

**9) Discussion**

- a) Board Members will review and sign the Annual Bylaws, Appendix A, “Conflict of Interest” and “Oath of Confidentiality” forms.
  - i. Mike Brown instructed the Board Members to review and sign both forms.
- b) Brown Act Rules regarding Board Member attendance at monthly meetings.
  - i. Kelly Welsh referred to the Solano County, Office of County Counsel Memo RE: Brown Act Compliance in 2023: Limited Options for Remote Participation, Attachment B “Just Cause”, as well as the Solano County CHB Bylaws, Article VI: Removal.
  - ii. Kelly stated that the memo and Bylaws applies to the Board as it pertains to removal of a Board Member. Tracee Stacy asked if the removal of Board Member Anthony Lofton needs to be added to the CHB Meeting Agenda. Kelly stated that it should be discussed during the CHB Executive Meeting. Mike Brown confirmed that Anthony moved out of the area and his intent was to attend, but no follow-up contact was established. Kelly also mentioned that the Executive Board can accept a verbal resignation but would require sending a letter to the Board Member, acknowledging and accepting their resignation.

**10) Board Member Comments**

- Tracee Stacy announced that she received the 2024 data on suicide and substance deaths. She stated that there were 58 deaths last year. 17 of the deaths were unhoused, overdoses by methamphetamine or fentanyl and 83% did not have Narcan. She emphasized healthcare for the homeless, Narcan distribution and training. Dr. Bela Matyas confirmed two programs do outreach in the community and distribute Narcan but agreed that clinic distribution is needed. Dr. Michele Leary added that FHS receives a small supply but is distributed quickly. She also stated that she would prefer to give it directly to the patient versus instructing them to pick it up at a pharmacy. Mike Brown asked if the City and Sheriffs carry Narcan. Dr. Matyas reported that all first responders carry it.
- Deborah Hillman shared that she was having trouble getting into the patient portal and called the Call Center for help. Medical Assistant Stephanie Azevedo was able to assist and resolve the matter. Deborah praised her kindness, professionalism and respectfulness and wanted the Board to know how satisfied her was with the service provided. Deborah also reported that she can access My Chart.

**11) Adjourn: To the Community Healthcare Board Meeting of:**

**DATE:** March 19, 2025

**TIME:** 12:00 PM — 2:00 PM



**County of Solano**  
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**Location:** Multi-Purpose Room  
2101 Courage Drive  
Fairfield, CA 94533

The Meeting was adjourned at 1:41 PM.

**12) Closed Session**

a) Project Officer/CEO Evaluation Overview/Training.

Handouts in the Agenda Packet:

- CHB February 19, 2025 Meeting Agenda
- CHB January 15, 2025, draft Meeting Minutes
- Clinic Operations Report – FHS Staffing Update – February 19, 2025
- Clinic Operations Report – FHS Credentialing, Provider Enrollment and Sanctioning Screening Status Report – February 2025
- Clinic Operations Report – Health Resources and Services Administration (HRSA) Grant Updates – February 19, 2025
- Clinic Operations Report – Grievance Report: April-December 2023, January-December 2024 and January 2025
- Clinic Operations Report – FHS Compliance Incident Report Tracking, January 1- January 31, 2025
- Clinic Operations Report – Finance January 2025 – Solano County Expenditure and Revenue Report FHS – January 31, 2025
- Clinic Operations Report – Revenue Cycle Report – January 2025 – Solano County Family Health Services Revenue Cycle Report – Total Encounters FY2024/25
- Clinic Operations Report – Family Health Services Referrals – Time Period January 2025
- Clinic Operations Report – Primary Care Provider Quality Improvement Program (PCP QIP) Report, Solano County, Health & Social Services, Family Health Services – As of December 31, 2024
- Clinic Operations Report – Clinic Measures – Queue Management (Q-Matic) Status, February 19, 2025
- Strategic Plan – Goal 6: Dental Expansion
- Quarterly Financial Report – December 2024
- Sliding Fee Scale Discount Program – Policy 100.03
- Family Health Services – Community Healthcare Board 2025 Annual Calendar - Revised Draft
- Bylaws of the County of Solano Community Healthcare Board – Appendix “A” Conflict of Interest
- County of Solano – Oath of Confidentiality
- Solano County – Office of County Counsel – Memo: Brown Act Compliance in 2023: Limited Options for Remote Participation
- Clinic Operations Report – Finance January 2025 – Solano County Expenditure and Revenue Report FHS – January 31, 2025 – REVISED 02/19/2025 (handed out at the meeting)

# **Community Healthcare Board**

## **5) Clinic Operations Reports:**

### **a) Staffing Update**

## Community Health Care Board

### Family Health Services Staffing Update

CHB Meeting Date: March 19, 2025

#### Number of Active Candidates - County

\*Clinic Registered Nurse - 3  
\*Dental Assistant (Registered) - 1  
\*Dentist - 1  
\*Licensed Marriage & Family Therapist (LMFT) - 2  
\*Medical Assistant Physician Assistant - 4

#### Number of Active Candidates - Touro

#### Number of Active Candidates - Locum Tenens

\*Chiropractor - 2

#### Number of Active Candidates - Volunteer

#### Open County Vacancies

Clinic Physician (Board Cert) - 1  
Clinic Physician (Board Cert) **Extra Help** - 1  
Clinic Physician Supervisor - 1 (**Requisition PENDING**)  
Clinic Registered Nurse - 3  
Dental Assistant (Registered) - 1  
Dentist - 1  
Health Education Specialist **Extra Help** - 2  
Health Services Manager, Senior - 1  
Licensed Marriage & Family Therapist - 2 (0.20 FTE)  
Medical Assistant - 6  
Nurse Practitioner/Physician Assistant - 3  
Nurse Practitioner/Physician Assistant **Extra Help** - 1  
Office Supervisor - 1

#### Interviews in Progress

\*Office Supervisor - TBD

#### Expected New Hires + Recently Hired Staff

\*LMFT - Start Date: 03/17/2025  
\*Medical Assistant - Start Date: 03/17/2025

#### Vacancies/Departures

\*Nurse Practitioner - Eff 02/22/2025

# **Community Healthcare Board**

## **5) Clinic Operations Reports:**

### **b) Credentialing Update**



**FHS Credentialing, Provider Enrollment, & Sanction Screening Status Report**  
FHS Community Healthcare Board  
March 2025

**Sanction Screening**

	Sanction Screening Number Screened	Sanction Screening Exclusions Found
TOURO/FHS LOCUMS	18	Report pending
H&SS FHS County Employees	121	Report pending
<b>TOTALS:</b>	139	<b>Report pending</b>

**Credentialing: 5 Re-Credentialing: 6**

	Number of Active Credentialing & Re-Credentialing (classification: #)	Partnership Provider Enrollment Numbers
TOURO	Physician Assistant: 2	Submitted to Partnership: 1 Approved by Partnership: Pending Submission to Partnership:
FHS LOCUM	Chiropractor: 2	Submitted to Partnership: 0 Approved by Partnership: Pending Submission to Partnership: 2
H&SS FHS County Employees & Candidates	LMFT: 1 Physician Assistant: 2 Clinic Physician: 1 Medical Assistant: 3	Submitted to Partnership: 2 Approved by Partnership: 0 Pending Submission to Partnership: 2

**Enrollments, Re-Credentialing, & Re-Validations**

**Partnership – NEW Provider Enrollments Totals**

Pending Submission: 4 (2 Locum Chiropractor, 1 LMFT, 1 County PA)

Submitted: 1

Pending Approval: 2

Approved:

**Partnership – Provider Re-Credentialing Totals**

Pending Submission: 0

Submitted: 0

Pending Approval: 2

Approved:

**Denti-Cal – Provider Revalidations**

None During this Reporting Period

**NPI Program/Site Revalidations**

None During this Reporting Period

**PAVE (Medi-Cal) and PECOS (Medicare)**

Upon Request

# **Community Healthcare Board**

## **5) Clinic Operations Reports:**

### **c) HRSA Grants Update(s)**

**Clinic Operations Report:** Health Resources and Services Administration (HRSA) Grant Updates

- Family Health Services (FHS) 2024 Ryan White Services Report (RSR):
  - Completed Phase 1 (February 3<sup>rd</sup>).
  - Continues to develop for the Phase 2 deadline (March 31<sup>st</sup>).
- FHS submitted the 2024 Uniform Data System (UDS) by the Phase 1 deadline (February 15<sup>th</sup>).
  - On March 10<sup>th</sup>, a HRSA reviewer returned the submission for additional clarification and verification by March 13<sup>th</sup>.
  - If there are no additional questions, FHS' 2024 RSR will be finalized and Phase 2 will close on March 31<sup>st</sup>.

# **Community Healthcare Board**

## **5) Clinic Operations Reports:**

### **d) Grievances/Compliments**

## GRIEVANCE REPORT 2023



## GRIEVANCE REPORT 2024



## GRIEVANCE REPORT 2025



## Grievance Category Definitions

- **Quality of Care**
  - Complaints that allege concerns about substandard care from providers, which may include but are not limited to, misdiagnosis, poor bedside manner, negligent treatment, delay in treatment, under prescribing, and/or inappropriate prescribing.
- **Access to Care/Timeliness**
  - Complaints that allege concerns about the affordability of care, follow-up completed in a timely manner, availability of providers to treat patients, and providers located in relatively close proximity to patients.
  - **Scheduling**
    - Sub-category under Access to Care/Timeliness that deals with complaints associated with the patient's ability to schedule services in a timely manner.
  - **Referrals**
    - Sub-category under Access to Care/Timeliness that deals with complaints associated with the ordering, processing, and follow-up of patient referrals.
- **Safety**
  - Complaints that allege concerns about errors, adverse effects, and preventable injuries to patients associated with their health care.
- **Privacy**
  - Complaints that allege concerns about personal space (physical privacy), personal data (informational privacy), personal choices including cultural and religious affiliations (decisional privacy), and personal relationships with family members and other intimates (associational privacy).
- **Other**
  - Complaints that do not fall into any of the above categories.

## Grievance Severity Rating

Level	Description	Definition	Example
1	<ul style="list-style-type: none"> <li>• No harm</li> <li>• Inconvenience</li> </ul>	<ul style="list-style-type: none"> <li>• The event effected the patient but did not cause physical harm.</li> <li>• Processes appropriate, patient disagreed.</li> </ul>	<ul style="list-style-type: none"> <li>• A pain management contract process with which the patient disagrees.</li> <li>• An employee displayed rudeness to a patient.</li> <li>• Patient experienced long hold time on the phone.</li> </ul>
2	<ul style="list-style-type: none"> <li>• Temporary harm (mild or moderate)</li> </ul>	<ul style="list-style-type: none"> <li>• Caused temporary harm to the patient, resulting in the need for additional treatment.</li> <li>• Caused a delay in time-sensitive care.</li> </ul>	<ul style="list-style-type: none"> <li>• A delay to a patient in getting prescription medications.</li> <li>• A lack of follow-up requested following a procedure.</li> </ul>
3	<ul style="list-style-type: none"> <li>• Significant harm</li> </ul>	<ul style="list-style-type: none"> <li>• Significant harm to the patient occurred, up to and including death.</li> </ul>	<ul style="list-style-type: none"> <li>• A patient received a misdiagnosis.</li> <li>• A patient experienced an unanticipated complication or infection.</li> <li>• A patient's oncology referral was not processed.</li> </ul>



# **Community Healthcare Board**

## **5) Clinic Operations Reports:**

### **e) H&SS Compliance**



## DEPARTMENT OF HEALTH & SOCIAL SERVICES

Administration Division:

Compliance & Quality Assurance

**To:** Solano County Community Healthcare Board  
**From:** Krista McBride, Compliance & QA Analyst  
**Date:** March 6, 2025  
**Subject:** CHB Incident Report Update [February 2025]

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### **Incident Report Update, February 1 – February 28, 2025**

Solano County Health & Social Services Compliance & Quality Assurance Unit manages the department's incident reporting program; including a hotline number (707) 784-3198 and an online portal <https://solanocounty.cqs.symplr.com/Portal> for the submission of incidents.

### **2 Incidents reported in February 2025:**

- 01 Safety, Client – *Quality of Care***  
False information input to electronic health record
- 01 Security – *Unauthorized Physical Access***  
Patient accessed restricted area of clinic

From February 1 through February 28, two (2) incident reports were received through the incident reporting program. These two (2) incidents were referred to the Medical Services leadership team for review, follow up, training opportunities or process improvement. During February 2025, the two (2) reports received were for incidents. There were zero (0) privacy, security or breach reports in February 2025.

Contact: Krista McBride, Compliance & QA Analyst, Health & Social Services Department  
(707) 784-8722 and [ksmcbride@solanocounty.gov](mailto:ksmcbride@solanocounty.gov)

# **Community Healthcare Board**

## **5) Clinic Operations Reports:**

### **f) Finance & Revenue Cycle Management**

OPERATIONS REPORT - FINANCE  
FEBRUARY 2025

### **Family Health Services – Fund 902, BU 7580**

The Midyear projection reflects decreases of \$3,444,670 in revenues and in expenditures when compared to the Working Budget, resulting in no change in Net County Cost of \$4,708,209; however, an increase in 1991 Public Health Realignment of \$6,590,212 is required to balance the revenue deficit.

Significant factors contributing to the projected net decrease of \$3,444,670 in revenues include:

- \$10,085,185 net decrease in Charges for Services due to:
  - ♦ \$11,091,632 decrease in Medi-Cal services (Federally Qualified Health Center (FQHC) patient-related revenues) resulting from lower than projected patient encounters.
  - ♦ \$350,396 increase in Medicare services.
  - ♦ \$175,235 increase in private pay for services.
- \$6,590,212 increase in 1991 Public Health Realignment for a total FY2024/25 total of \$9,590,703 to fund the structural deficit. This is approximately 42% of the projected 1991 Public Health Realignment receipts for FY2024/25.
- \$492,864 in operating transfer in ARPA to support the implementation of the new electronic health record system, OCHIN EPIC.

Significant factors contributing to the projected net decrease of \$3,444,670 in expenditures include:

- \$4,389,544 decrease in Salaries and Employee Benefits.
- \$279,593 decrease in Services and Supplies primarily due to:
  - ♦ \$367,456 decrease in contracted services for the Public Health data reporting contract
  - ♦ \$263,408 decrease in medical/dental services, equipment, and controlled assets.
  - ♦ \$260,316 increase in Department of Technology (DoIT) time study charges and costs related to maintain the legacy system during the transition period.
- \$1,325,874 increase in Other Charges which primarily reflects a \$1,313,468 increase in contracted services for locum tenens (temporary assignment providers)
- \$32,408 increase in Fixed Assets for medical storage refrigerators.

#### ***For recommended action:***

ATR to recognize \$492,864 in unanticipated American Rescue Plan Act – State and Local Fiscal Recovery Funds (ARPA-SLFRF) funds for the OCHIN EPIC platform electronic medical record project approved by the Board of Supervisors on September 27, 2022. (4/5 vote required)

ATR for \$572,500 from salaries and benefits to contracted direct services due to increase in contracted direct services. (4/5 vote required)

Extend 1.0 FTE Limited-Term Planning Analyst through June 30, 2026. This position provides high-level data analysis for the Quality Assurance Team funded with 1991 Public Health Realignment.

### Pending Issues:

Patient-related revenues are generated when an encounter occurs. An encounter is defined as an interaction between a patient and a healthcare provider for the purpose of providing healthcare service or assessing the health status of a patient.

The three most significant factors impacting budgeted billable encounters include: 1) fewer appointments during the implementation of OCHIN EPIC; 2) current providers not achieving the targeted 14 encounters per 8-hour day as projected at Working Budget; and 3) provider vacancies.

The FY2024/25 encounter target is a minimum of 14 billable encounters per 8-hour day for each provider. To achieve this, the clinics are currently reviewing the patient appointment scheduling process in order to maximize appointment scheduling and provider productivity.

The Medi-Cal encounter rates vary by clinic location or site while the Medicare rate is the same for all clinics. These rates are adjusted annually based on the Medicare Economic Index (MEI). The annual adjustments in rates, effective October 1st of every year, are minimal at best and do not cover annual increases for cost-of-living, overhead and operating costs. Below is a summary of the current rate structure, by clinic location.

Family Health Services Clinics	Location	Medi-Cal	Medicare
Fairfield Adult Primary Clinic	2201 Courage, Fairfield	\$266.25	\$186.85
Fairfield Pediatrics and Dental	2101 Courage, Fairfield	\$313.14	\$186.85
Vallejo Primary Care and Dental	365 Tuolumne, Vallejo	\$373.70	\$186.85
Vacaville Primary Care and Dental	1119 E. Monte Vista, Vacaville	\$332.24	\$186.85
Primary Care Van	Mobile	\$266.25	\$186.85
Dental Van	Mobile	\$313.14	
<i>Note: Medicare does not cover dental</i>			

The clinics are currently undergoing a process to submit for encounter rate adjustments at each location through a Change in Scope of Service Request (CSOSR) process. The outcome of this effort is estimated to be complete in Spring 2026 with any rate adjustments retroactive to July 1, 2025. This effort is not anticipated to fully eliminate the structural deficit and productivity (daily encounters) will also need to increase.



**SOLANO COUNTY  
EXPENDITURE AND REVENUE REPORT  
FAMILY HEALTH SERVICES  
FEBRUARY 2025**

CATEGORY DESCRIPTION	FY2024/25 WORKING BUDGET	FY2024/25 MID YEAR BUDGET	FY2024/25 YTD ACTUALS THROUGH FEB 2025	Actuals as a % of MY Budget	
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EXPENDITURES	Notations
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**Salaries & Benefits**

Salaries - Regular	16,306,079	12,378,802	7,494,845	61%	
Salaries - Extra Help	17,000	53,540	23,313	44%	
Salaries - OT/Callback/Standby	69,874	120,622	84,022	70%	
Staffing costs from other divisions (net amount)	133,070	126,160	46,133	37%	
Benefits	10,561,338	7,067,056	4,550,928	64%	
Accrued Leave CTO Payoff	20,000	115,448	115,545	100%	
Salary Savings	(2,789,326)	-	-	#DIV/0!	
<b>Salaries &amp; Benefits Total</b>	<b>24,318,035</b>	<b>19,861,628</b>	<b>12,314,785</b>	<b>62.00%</b>	

**Services & Supplies**

Office Expense and Supplies	172,363	75,058	53,189	71%	Drinking water, household expenses, and trash services.
Communications	138,331	149,715	93,527	62%	
Insurance	1,000,703	1,000,703	415,809	42%	Budget includes cost of Liability Insurance and Malpractice Insurance. >These charges will originate from another County Department. >Medical Malpractice will post at year end and are expected to be budgeted amount.
Equipment - Purchases, Leases & Maintenance	73,780	45,927	32,945	72%	Q-Matic. BioRad. Caltronics. Steris.Life Technologies. Smile Business. Multi Function Devices Copiers/Printers.
Mileage, Fuel and Fleet	45,503	37,800	22,272	59%	Monthly charges for vehicles assigned to County Departments; personal mileage.

**SOLANO COUNTY  
EXPENDITURE AND REVENUE REPORT  
FAMILY HEALTH SERVICES  
FEBRUARY 2025**

CATEGORY DESCRIPTION	FY2024/25 WORKING BUDGET	FY2024/25 MID YEAR BUDGET	FY2024/25 YTD ACTUALS THROUGH FEB 2025	Actuals as a % of MY Budget	
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EXPENDITURES	Notations
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**Services & Supplies (continued)**

Buildings - Maintenance, Improvements, Rent & Utilities	258,458	187,018	125,063	67%	PG&E & water services.
Drugs, Pharmaceuticals, Medical and Dental Supplies	623,605	598,145	323,139	54%	Henry Schein. McKesson. TheraCom.
Controlled Assets & Computer Related Items	151,940	91,954	94,698	103%	Budget is primarily refresh computers and equipment funded with Capital Grant carryover funding.
Medical/Dental Services	207,600	117,667	36,292	31%	JP's Dental Lab, Quest Lab Services, Solano Diagnostics, and Solano Public Health Lab charges.
Contracted and Other Professional Services	1,019,565	676,755	200,333	30%	Budget includes the following contracts: >Allied Security >Simi Group >Waystar/Trizetto (electronic claims management) >Forvis (Medicare Cost Report) >Stericycle (medical waste disposal) >Gebbs (Medical Coding Consultant) >Factor Consultants >UHC Solutions (Recruitment services)
DoIT	2,152,500	2,397,403	996,946	42%	
Software & Maintenance or Support	690,031	954,932	654,304	69%	Budget includes the following: >Next Gen >OCHIN >Orchard Software
Professional Licenses & Memberships	27,871	7,881	9,342	119%	
Education, Training, In-State Travel, Out of State Travel	25,290	1,873	1,873	100%	
Other	69,758	34,929	22,485	64%	>Uniform allowance >Fees & Permits (credit card processing, licensing and storage) >Livescans
<b>Services &amp; Supplies Total</b>	<b>6,657,298</b>	<b>6,377,760</b>	<b>3,082,217</b>	<b>48%</b>	

**SOLANO COUNTY  
EXPENDITURE AND REVENUE REPORT  
FAMILY HEALTH SERVICES  
FEBRUARY 2025**

CATEGORY DESCRIPTION	FY2024/25 WORKING BUDGET	FY2024/25 MID YEAR BUDGET	FY2024/25 YTD ACTUALS THROUGH FEB 2025	Actuals as a % of MY Budget	
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EXPENDITURES	Notations
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**Other Charges**

Interfund Services - Professional	712,944	712,944	296,203	42%	County related charges for Sheriff services, building and grounds maintenance and custodial services.
Interfund Services - Accounting & Audit	-	-	-	#DIV/0!	
Interfund Services - Other	64,285	92,005	48,462	53%	Maintenance materials, small projects and labor.
Contributions - Non County Agencies	15,000	-	-	#DIV/0!	Training for community health board members (originally NACHC CHI Expo conference attendance)
<b>Other Charges Total</b>	<b>792,229</b>	<b>804,949</b>	<b>344,665</b>	<b>43%</b>	

**Contracts/Client Support**

Contracted Direct Services	1,492,000	2,805,468	1,308,915	47%	Budget includes the following contracts: >Barton & Associates (locum services) >Children's Choice (dental services) >Touro University (providers)
Client Support	22,700	23,398	14,798	63%	Client support transportation costs.
<b>Contracts/Client Support Total</b>	<b>1,514,700</b>	<b>2,828,866</b>	<b>1,323,712</b>	<b>47%</b>	

**Equipment**

Equipment	49,604	82,012	44,604	54%	
<b>Equipment Total</b>	<b>49,604</b>	<b>82,012</b>	<b>44,604</b>	<b>54%</b>	

**Administration Costs**

H&SS Administration	2,957,878	2,889,859	1,512,244	52%	
Countywide Administration	1,312,262	1,312,262	1,312,262	100%	
<b>Administration Costs Total</b>	<b>4,270,140</b>	<b>4,202,121</b>	<b>2,824,506</b>	<b>67%</b>	

<b>TOTAL EXPENDITURES</b>	<b>37,602,006</b>	<b>34,157,336</b>	<b>19,934,489</b>	<b>58%</b>	
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**SOLANO COUNTY  
EXPENDITURE AND REVENUE REPORT  
FAMILY HEALTH SERVICES  
FEBRUARY 2025**

CATEGORY DESCRIPTION	FY2024/25 WORKING BUDGET	FY2024/25 MID YEAR BUDGET	FY2024/25 YTD ACTUALS THROUGH FEB 2025	Actuals as a % of MY Budget	
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REVENUES	Notations
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**Payer Revenues**

Payer Revenues	23,355,466	13,270,281	11,557,398	87%	Revenues from Medi-Cal, Partnership Capitation, Medicare and Private Pay (estimated payback not reflected)
<b>Payer Revenues Total</b>	<b>23,355,466</b>	<b>13,270,281</b>	<b>11,557,398</b>	<b>87%</b>	

**Federal/State Revenues**

1991 Realignment (Underinsured/Uninsured/PH Services)	1,386,906	1,386,906	693,453	50%	
Federal Direct - COVID (one time funding)	100,405	131,949	54,481	41%	Rollover for HRSA Capital Grant funds
Federal Grants	2,047,990	2,051,890	475,818	23.19%	Budget includes: >CHC Base grant >RWC
Federal Other	56,608	40,472	40,472	100%	\$1M Congressional earmark
American Rescue Plan Act (ARPA)	1,276,497	1,769,361	-	0%	ARPA funding for OCHIN EHR conversion
Other Revenue	1,617,600	1,155,731	160,278	13.87%	Budget primarily includes QIP revenues, but also includes patient care payment recoveries.
<b>Program Revenues Total</b>	<b>6,486,006</b>	<b>6,536,309</b>	<b>1,424,502</b>	<b>22%</b>	

<b>TOTAL PAYER AND PROGRAM REVENUES</b>	<b>29,841,472</b>	<b>19,806,590</b>	<b>12,981,900</b>	<b>65.5%</b>	
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TOTAL EXPENDITURES vs TOTAL REVENUES					Notations
<b>TOTAL EXPENDITURES</b>	37,602,006	34,157,336	19,934,489	58%	Includes \$51,834 of expenditures from FY2023/24, but paid in FY2024/25.
<b>TOTAL REVENUES</b>	29,841,472	19,806,590	12,981,900	66%	
<b>DEFICIT (SURPLUS)</b>	<b>7,760,534</b>	<b>14,350,746</b>	<b>6,952,589</b>	<b>48%</b>	
County General Fund	4,708,209	4,708,209	2,354,105		
<b>DEFICIT (SURPLUS) after CGF**</b>	<b>3,052,325</b>	<b>9,642,537</b>	<b>4,598,485</b>		

*\*\*Deficit to be funded with 1991 Realignment and/or County General Fund*

# REVENUE CYCLE REPORT

## FEBRUARY 2025

**SOLANO COUNTY  
FAMILY HEALTH SERVICES  
REVENUE CYCLE REPORT  
TOTAL ENCOUNTERS\*  
Through February 28, 2025**

	Annual Target	Monthly Target	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	TOTAL	YTD Target Feb 2025 8 mths	Over (Shorfall)
<b>MEDICAL</b>																	
County Providers	46,688	3,774	1,915	1,736	1,085	1,239	1,328	1,628	2,131	1,820					12,882	30,017	(17,135)
Touro	4,364	364	383	319	208	213	230	226	225	208					2,012	2,912	(900)
Locum	1,453	230	446	433	378	430	461	387	500	380					3,415	1,991	1,424
TOTAL MEDICAL	52,505	4,368	2,744	2,488	1,671	1,882	2,019	2,241	2,856	2,408	-	-	-	-	18,309	34,920	(16,611)
TOTAL MENTAL HEALTH	3,640	121	84	80	57	38	27	30	54	36					406	968	(562)
TOTAL DENTAL	19,900	1,547	1,321	1,223	1,035	910	916	1,140	1,297	1,124					8,966	12,491	(3,525)
	76,045	6,036	4,149	3,791	2,763	2,830	2,962	3,411	4,207	3,568	-	-	-	-	27,681	48,379	(20,698)

\* Open encounters not included. Targets based on Adopted Budget.

**DEFINITIONS**

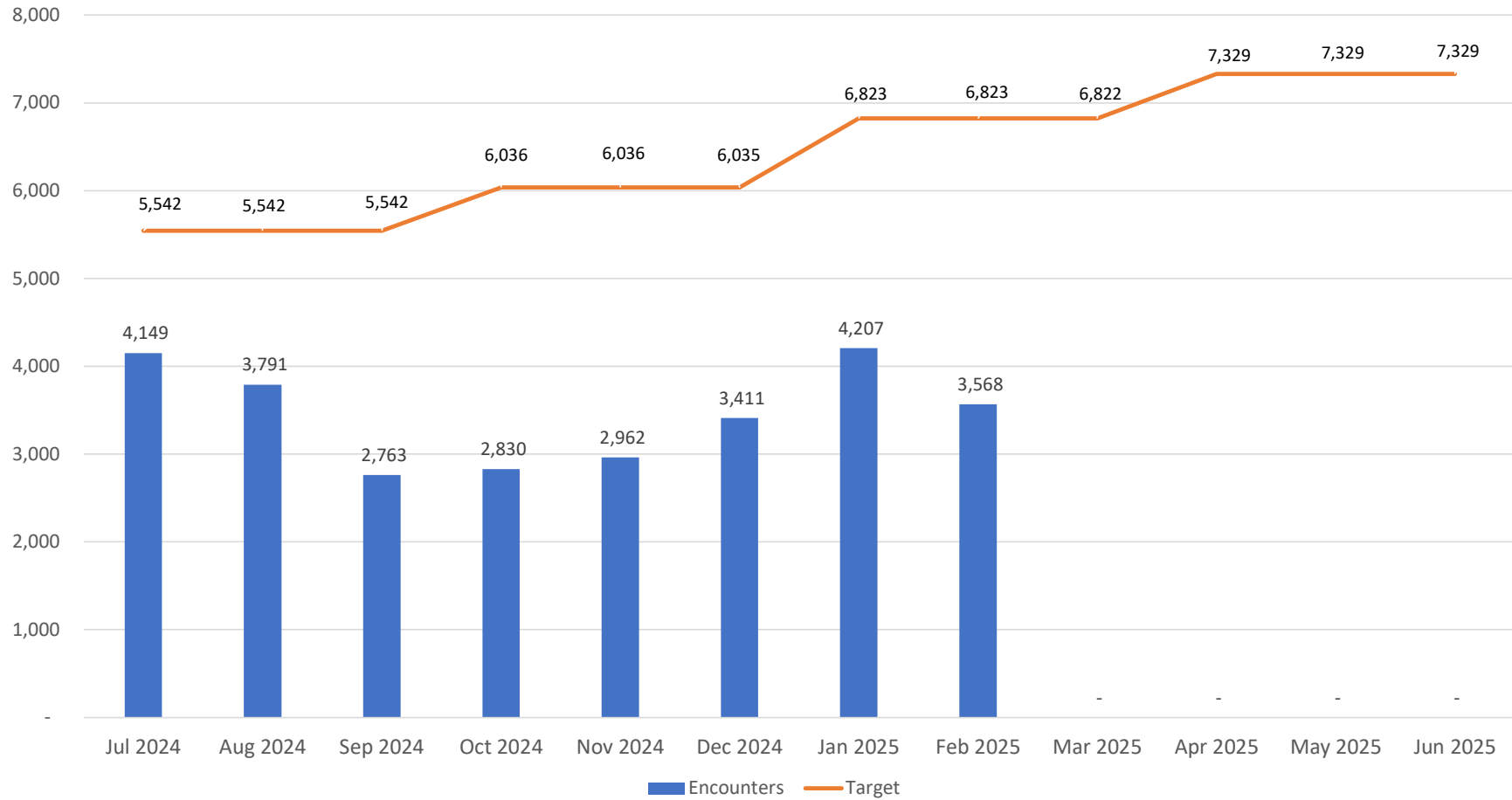
**ENCOUNTER** *An interaction between a patient and a healthcare provider for the purpose of providing healthcare services or assessing the health status of a patient*

**BILLABLE ENCOUNTER**

1. Healthcare provider
  - > Physician
  - > Physician Assistant
  - > Nurse Practitioner
  - > Dentist
  - > Licensed Clinical Social Worker
2. Must take place in the "4 walls" of the FQHC
3. Medically necessary
4. Billing limited to one visit per day with certain exceptions



Solano County Health and Social Services  
Family Health Services  
Total Qualified Encounters  
(Medical, Dental, Mental Health)  
FY2024/25



# Community Healthcare Board

## 5) Clinic Operations Reports:

### g) Referrals



## Time Period February 2025

**Referrals 1044**

**Adult-846    Pediatrics-198**

Adult Specialty Referrals	Ordered	Peds Specialty Referrals	Ordered
Dermatology	52	Allergy Clinic	12
Gastroenterology	90	Dermatology	19
Ophthalmology	140	ENT (Ear, Nose, Throat)	24
Orthopedics	52	Nutrition	22
Physical Therapy	79	Optometry	10
<b>Total to Specialties: 500</b>			

The above report reflects the total number of referrals for the month of January.

The total number of referrals in the Workque as of March 11<sup>th</sup> were **1,180 referrals** with **3840** referrals deferred pending specialist consultation notes. Currently we are processing **30** days out.

We continue to work on processing referrals, as quickly as possible. Due to our 2 holidays along with days where there were staff shortages, referrals some days only had a minimum of 1-3 people processing referrals. However, on February 22, we had an overtime workgroup, where the team was able to complete 233, referrals.

We are still in the testing phase of the automation process for Gastro and Ophthalmology referrals to auto close, still working out the logistics.

I have currently identified a couple of referral team members to work on the workflow process for internal referrals. We hope to have this process worked out soon.

Despite the ongoing challenges we continue to work towards processing referrals within 10 days to meet our Partnership metric.

Respectfully Submitted,

*Cynthia Coutee*

Cynthia Coutee, Clinic Manager-Vacaville

# Community Healthcare Board

## 5) Clinic Operations Reports:

h) OCHIN EPIC Update(s)

**\*NO REPORT\***

# Community Healthcare Board

## 5) Clinic Operations Reports:

i) Quality Improvement Update

**\*NO REPORT\***

# **Community Healthcare Board**

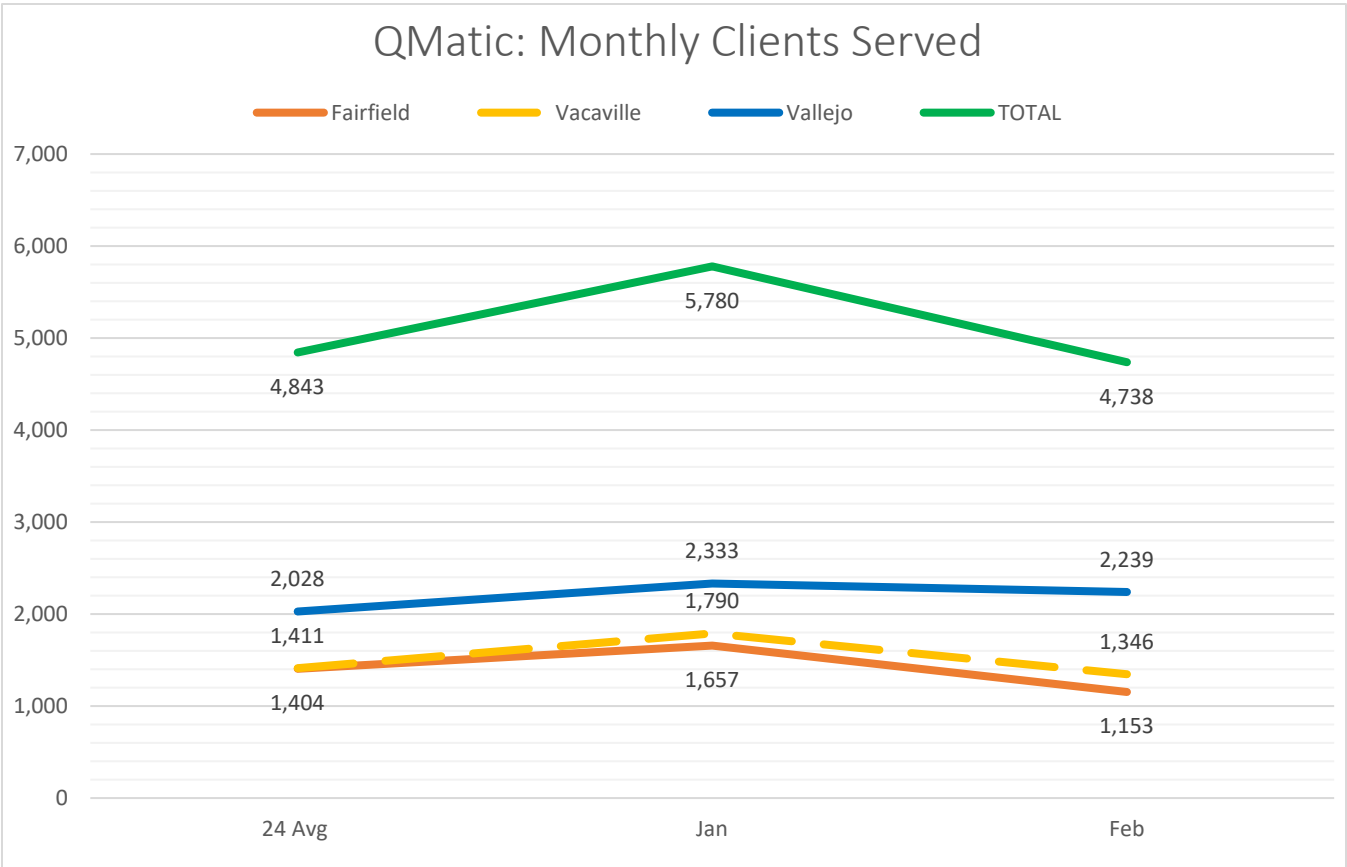
## **5) Clinic Operations Reports:**

### **j) FHS Clinic Q-Matic Stats**

Clinic Operations Report: Clinic Metrics

Queue Management (Q-Matic) Stats

Clinic Site	Clients Served		
	2024 Average	Jan	Feb
Fairfield			
Lab	93	101	60
Medical (Adult)	1,311	1,556	1,093
Subtotal	1,404	1,657	1,153
Vacaville			
Dental	589	723	579
Medical (Adult & Peds)	822	1,067	767
Subtotal	1,411	1,790	1,346
Vallejo			
Dental & Medical (Adult & Peds)	1,935	2,223	2,100
Lab	93	110	139
Subtotal	2,028	2,333	2,239
TOTAL	4,843	5,780	4,738







## Family Health Services

# DAX CoPilot Policy

Policy Number 500.10

Effective Date	03/19/2025
Frequency of Review	Yearly
Last Reviewed	
Last Updated	02/19/2025
Author	Michele Leary, D.O.
Responsible Department	H&SS FHS

### PURPOSE:

Guidance for Family Health Services providers using DAX CoPilot to ensure medical records are complete, accurate, and authenticated by the responsible practitioner.

### DEFINITIONS:

**Acceptable Use Policy (AUP):** is a set of rules that outline how a service or technology can be used responsibly and safely by users.

**Artificial Intelligence (AI):** the theory and development of computer systems able to perform tasks that normally require human intelligence, such as visual perception, speech recognition, decision-making, and translation between languages.

**DAX CoPilot (Dax):** is a tool by Nuance Solutions, the makers of Dragon dictation, which helps automate repetitive, time-consuming tasks using AI with a goal on increasing efficiency and productivity of the user.

**Electronic Medical Record (EMR):** a digitized version of a patient's chart. It contains the patient's history of conditions, medical tests and treatments. A medical EHR also reduces paper waste and delays by making the patient's information available instantly and securely to an authorized user.

**Epic Haiku:** is an application for approved mobile devices and is used for accessing DAX CoPilot. The application is managed by Epic Systems Corporation. Compliance with HIPAA, and end-to-end encryption is maintained by Epic. Accessing this application requires multifactorial authentication to prevent unauthorized access and maintain accuracy.

**Health Insurance Portability and Accountability Act of 1996 (HIPAA):** establishes federal standards protecting sensitive health information from disclosure without patient's consent. The US Department of Health and Human Services issued the HIPAA Privacy Rule to implement HIPAA requirements. The HIPAA Security Rule protects specific information covered by the Privacy Rule.

**Provider:** A Physician, Nurse Practitioner or Physician Assistant or other licensed health care professional who is directly involved in patient care and documenting medical notes in the Electronic Medical Record.





## Family Health Services

# DAX CoPilot Policy

**Policy Number 500.10**

### **POLICY:**

The use of DAX CoPilot must adhere to the Family Health Services Acceptable Use Policy (AUP), which establishes the foundational security, compliance, and governance requirements for all technology systems. No provisions in this policy shall supersede or conflict with the AUP. This policy is subordinate to and must comply with Solano County's Acceptable Use Policy. When using DAX CoPilot, Health and Social Services Family Health Services shall ensure patient consent, abide by HIPAA and all regulatory statutes and laws. The use of AI in medical documentation must adhere to the HIPAA, including the Security Rule (45 CFR Part 160 and Subparts A and C of Part 164), which mandates safeguards to ensure the confidentiality, integrity, and availability of electronic protected health information (ePHI). Under the California Medical Information Act (CMIA) [Cal. Civ. Code §§ 56-56.37], following HIPAA and the aforementioned Acceptable Use Policy must be adhered to in order to protect patient data from unauthorized access, disclosure, or misuse.

### **PROCEDURE:**

1. In using DAX CoPilot medical providers, in accordance with 42 CFR § 482.24(c), must ensure the medical record is complete, accurate, and authenticated by the responsible provider.
  - a. Providers must review, verify, and approve AI-generated content to ensure it meets these standards.
2. To ensure quality of care and documentation standards. AI-assisted documentation shall not compromise the quality of care.
  - a. All medical records must accurately reflect the care provided.
  - b. Periodic review for accuracy and quality assurance by Supervising Physician or proxy will be conducted with the same frequency as current peer reviews which is quarterly with a subset of patient records being reviewed proportionate to the full time equivalent a provider's employment. This review will include a review of compliance to policy, accuracy and potential security risks.
  - c. Final approval and sign off of DAX CoPilot generated notes is the sole responsibility of the provider who conducted the patient interview.
3. Patient Consent and Transparency:
  - a. For each patient interaction utilizing Dax CoPilot, the patient will be informed and consent to its use.
  - b. Consent will include disclosure that the dictation tool uses AI to aid with documentation as outlined in 42 CFR § 482.13(b), which ensures patients' rights to privacy and informed consent.
  - c. Consent may be verbal or in writing either way consent will be documented in each chart note which was generated or partially generated by DAX CoPilot.



## Family Health Services

# DAX CoPilot Policy

**Policy Number 500.10**

4. Use of DAX CoPilot will be initiated from a compatible device which meets guidelines put forth by OCHIN Epic and Nuance. These devices will be organization-managed, secured, and encrypted devices. Personal devices are not permitted unless they meet IT security standards which includes additional security measures being installed on each device.

This is a regulatory policy. Knowledge of a violation or potential violation of this policy must be reported directly to the compliance and quality assurance program, Symplr which can be found: [https://solanocounty.sharepoint.com/sites/hss\\_collab/admin/compliancelink/default.aspx](https://solanocounty.sharepoint.com/sites/hss_collab/admin/compliancelink/default.aspx). The potential violation will be evaluated by the county compliance process. Failure to report violation or potential violation of this policy may result in progressive discipline in accordance with union and county policy.

<b>REFERENCED POLICIES</b>		<b>Solano County's Acceptable Use Policy:</b> <a href="#">Acceptable Use Policy – Failure Technical Documentation Standard Template V1.docx</a>  <b>Solano County's HIPAA Policies and Procedures:</b> <a href="#">County of Solano HIPAA Security Rule Policies and Procedures.pdf</a>
<b>REFERENCED FORMS</b>		N/A
<b>REFERENCES</b>		<b>42 CFR § 482.13(b)</b> <a href="https://www.ecfr.gov/current/title-42/chapter-IV/subchapter-G/part-482/subpart-B/section-482.13">https://www.ecfr.gov/current/title-42/chapter-IV/subchapter-G/part-482/subpart-B/section-482.13</a>  <b>The Security Rule</b> <a href="https://www.hhs.gov/hipaa/for-professionals/security/index.html">https://www.hhs.gov/hipaa/for-professionals/security/index.html</a>  <b>CA Civ Code Section 56.37</b> <a href="https://california.public.law/codes/ca_civ_code_section_56.37">https://california.public.law/codes/ca_civ_code_section_56.37</a>



Family Health Services

## DAX CoPilot Policy

Policy Number 500.10

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Chair – Community Healthcare Board

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Date

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Vice-Chair – Community Healthcare Board

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Date