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

June 11, 2025 @ 1:00pm - 2:00pm

MEETING LOCATION: In-Person – 150 Westridge, Suite 101, Watsonville, Ca 95076 and 1080 Emeline Ave., Bldg. D, Admin Conference Room, Santa Cruz, CA 95060, 40 Eileen Street, Watsonville CA 95076, will connect through Microsoft Teams Meeting or call in (audio only) <u>+1 831-454-2222,191727602#</u> United States, Salinas Phone Conference ID: **191 727 602#**

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. May 7, 2025, Meeting Minutes Action Required
- 4. Motion to Rescind
- 5. Quality Management Update
- 6. PPS Rate Presentation
- 7. CEO Update

Action Items from Previous Meetings: Action Item	Person(s) Responsible	Date Completed	Comments
Proposition 35 passed. Report back next couple of months what does that mean on revenues that will be coming into the clinic system.	Julian		

Next meeting: Wednesday, July 2, 2025, 1:00pm - 2:00pm Meeting Location: In-Person - 150 Westridge, Suite 101, 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) +1 831-454-2222,191727602# United States, Salinas Phone Conference ID: 191 727 602#

The County of Santa Cruz Integrated Community Health Center Commission

Minute Taker: Mary Olivares

Minutes of the meeting held June 11, 2025

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

Attendance		
Len Finocchio	Executive Board - Co-Chair	
Rahn Garcia	Member	
Dinah Phillips	Member	
Marco Martinez-Galarce	Member	
Michelle Morton	Member	
Nicole Pfeil	Member	~~
Amy Peeler	County of Santa Cruz, Chief of Clinics	
Raquel Ruiz	County of Santa Cruz, Senior Health Services Manager	
Julian Wren	County of Santa Cruz, Admin Services Manager	
Mary Olivares	County of Santa Cruz, Admin Aide	

Meeting Commenced at 1:00 pm and concluded at 2:00 pm

Excused/Absent:

Excused: Christina Berberich Absent: Maximus Grisso

1. Welcome/Introductions

Introductions were done at this time, commissioners welcomed new member Nicole Pfeil.

- 2. Oral Communications:
- 3. May 7, 2025, Meeting Minutes Action Required

Review of May 7, 2025, Meeting Minutes – Recommended for approval. Rahn motioned to accept minutes as presented. Michelle second, and the rest of the members present were all in favor.

4. Motion to Rescind

This item was tabled for next month.

Quality Management Update

Raquel reported that the Quality Management Committee met, and the Emeline Clinic reported on their cervical cancer screening quality improvement project. She reported on the outreach process, and they are utilizing a Medical Assistant in making phone calls to schedule patients. Raquel also reported that for July's meeting she will be bringing the Quality Management Plan Review for approval.

Raquel reported on Peer Review & Risk Management Committee, she reported they are preparing for June 18th all provider meeting. At this meeting providers will be working on themed chart reviews which include Diabetes and Obesity. She reported they are also working on the chronic pain management policy.

6. PPS Rate Presentation

Julian gave an overview on PPS (Prospective Payment System). Julian reported instead of billing for each individual service like in traditional fee-for-service, FQHCs receive a fixed payment for each patient visit. He reported it does not matter if the patient needs just a quick checkup or multiple services the payment is the same. This system gives health centers a more predictable income. There are three main factors that determine an FQHC's payment rate, what costs can be included, how many patients are seen, and the productivity standards that Medicaid expects providers to meet. Julian presented on revenue and expenses. He reported 15% comes from grants, 8% comes from state and local grants, and 77% from clinic revenue. He reported on expenses and stated 71% goes to salaries and benefits, 10% interfund transfers, .20% fixed assets, 19% services and supplies and .10% rents and leases.

7. CEO Update

Raquel reported on behalf of Amy. Raquel reported that the Sustainability Committee will be having a Retreat in August to focus on the following areas: 1. Prioritizing critical services and operations resulting in an Operational Plan for core services 2. Operational efficiency to improved productivity and 3. Long term fiscal stability, explore revenue enhancement strategies for Health Centers with a balanced budget. Lastly, Raquel reported the County Executive Office recommended restorations on the

following: Laboratory services – 90-day extension, and the restoration of cut position- 1.0 FTE Vacant Sr MHCSI, and 0.75 FTE Locums Tenens Psychiatrists.								
Next meeting: July 2, 202!	5, 1:00pm - 2:00pm							
CA 95060. Commission wi States, Salinas Phone Con	eeting Location: In- Person- 150 Westridge Drive, Suite 101, Watsonville, Ca 95076 and 1080 Emeline Ave., Bldg. Clinic. Cruz, a 95060. Commission will connect through Microsoft Teams Meeting or call in (audio only) <u>+1 831-454-2222,191727602#</u> United ates, Salinas Phone Conference ID: 191 727 602#							
☐ Minutes approved			<u></u>					
	(Signature of Board Chair or Co-Chai	r)	(Date)					





Health Centers Division

Quality Management Report

June 2025

Quality Management Committee

- Emeline Quality Improvement Project-
 - Cervical Cancer Screening Outreach Process utilizing a Medical Assistant
 - Feedback on the new Quality Improvement Taskforce Meeting structure
- Quality Management Plan Review
 - Will bring to the Commission in July for approval

Peer Review & Risk Management Committee

- Preparation for June 18th all provider meeting.
 Themed Chart Review
 - Diabetes
 - Overweight
- Chronic Pain Management Policy

CEO Update-Sustainability Committee

Retreat in August to focus on the following areas:

- 1. Prioritizing critical services and operations resulting in an Operational Plan for core services
- 2. Operational efficiency to improved productivity
- Long term fiscal stability, explore revenue enhancement strategies for Health Centers with a balanced budget

CEO Update

County Executive Office Restorations Recommended

Recommended Restoration	Amount
Laboratory services 90-day extension	\$380,816
MHCAN peer support and drop-in services	\$477,939
Gemma House (Community Corrections Partnership approved up to \$150k in one-time AB 109 funding)	\$0
CAB syringe litter cleanup contract	\$40,000
Freedom Campus Health Center behavioral health services	
- 1.0 FTE vacant Sr. Mental Health Client Specialist I	\$146,535
- 0.75 FTE Locum Tenens Psychiatrists	\$347,818
Total	\$1,393,108

Questions?

Thank You





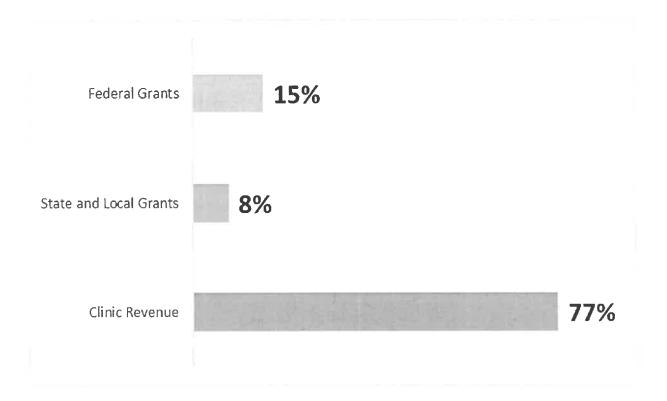


Health Centers Division

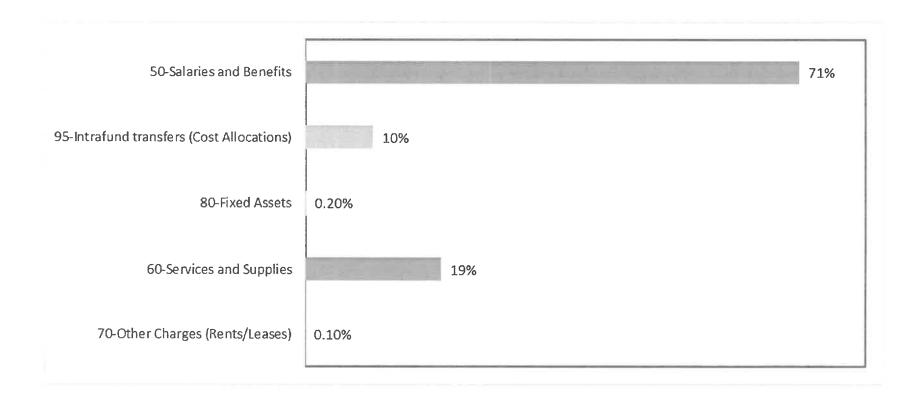
Health Centers All Staff Presentation 6-4-25

30,000-foot View of our Budget

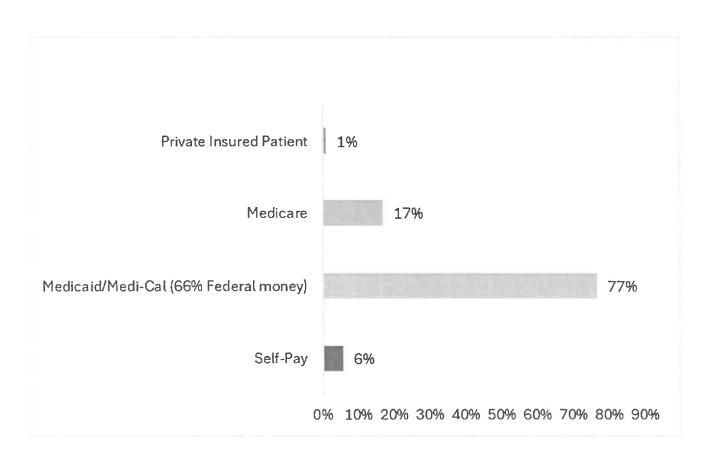
Where does our money come from (revenue)?



Where does our money go (expenses)?



Percentage of Charges for Services by Payor Source?



Understanding FQHC PPS Rate Setting \$423.30

What is PPS?

- Prospective Payment System
- A fixed payment method for patient visits at FQHCs
- Pays a set rate per patient visit regardless of services provided
- Designed to provide stable, predictable funding

Component 1: Allowable Costs

What Counts

- Clinical staff salaries (Physicians, PA/NP, Nurses, Acupuncturists etc.)
- Medical supplies and equipment
- Facility costs (rent, utilities, maintenance) Administrative expenses
- Other approved operating expenses

What doesn't count?

- Costs deemed unnecessary or excessive
- Certain non-medical expenses

Component 2: Total Visits

- The actual number of billable patient encounters
- Includes face-to-face visits with qualifying providers
- Must meet specific documentation requirements
- Each encounter generates one PPS payment

Component 3: Minimum Productivity Standards

Medicare/Medicaid expects each full-time provider to complete:

 Physicians, Nurse Practitioners/Physician Assistants/Certified Nurse Midwifes: ave 3,150 completed appointments per year

Why this matters: These standards set the minimum denominator in your rate calculation

How Productivity Standards Affect our Rate

Example Scenario:

- Your FQHC has 5 full-time physicians
- Minimum expected visits: $5 \times 4,200 = 21,000$ visits
- But your actual visits: 18,000

Result: Medicare uses 21,000 visits in your rate calculation—not your actual 18,000

The Impact on PPS Rate

If minimum standards weren't applied:

 $$5,000,000 \div 18,000 \text{ visits} = 277.78 per visit

With minimum standards applied

 $$5,000,000 \div 21,000 \text{ visits} = 238.10 per visit

The productivity standards prevent artificially high rates

The PPS Rate Formula

- The actual number of billable patient encounters
- Includes face-to-face visits with qualifying providers
- Must meet specific documentation requirements
- Each encounter generates one PPS payment

PPS Rate = Total Allowable Costs ÷ MAX(Actual Visits, Minimum Expected Visits)

Key Takeaways

- PPS provides a fixed payment per visit regardless of services provided
- Productivity standards create an efficiency incentive
- The system rewards centers that meet or exceed visit expectations
- The system punishes centers that do not meet or exceed visit expectations
- Understanding these components helps optimize our FQHC's financial sustainability

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Thank You



