

BOARD OF DIRECTORS CONFIDENTIAL MINUTES ZOOM MEETING



Community Health Services, Inc.
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DATE: April 27 2023

PRESENT: Randy P. McKenney, Carlos Rosario, Nettie Roberts, Robert Michalik and Tiffany Pak

STAFF: Greg Stanton, Dianna Kulmacz and Susan Hirth

ABSENT: Judith Burchell, Raicheen Blanks, Rebecca Addai, and Lillard Lewis

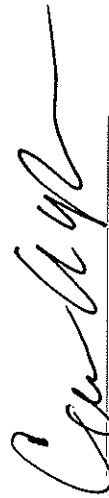
| TOPIC | DISCUSSION | ACTION |
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| A. CALL TO ORDER <i>Randy McKenney</i> | <ul style="list-style-type: none"> • | <ul style="list-style-type: none"> • Mr. McKenney called the meeting to order at 6:14 p.m. |
| B. Consent Agenda Items 1) <i>Approval of Executive Committee, 2023, Minutes</i> 2) <i>Chief Executive Officer's Report</i> | <ul style="list-style-type: none"> • Executive Committee Minutes – March 30, 2023 • CEO Report – April 27, 2023 | <ul style="list-style-type: none"> • MOTION by Mr. McKenney seconded by Mr. Rosario and approved by unanimous vote of the Board to remove the Executive Committee minutes from the Consent Agenda to be ratified by the Board. • MOTION by Mr. McKenney seconded by Mr. Michalik and approved by unanimous vote of the Board to approve the decisions of the Executive Committee on March 30, 2023. • MOTION by Mr. Michalik seconded by Ms. Pak and approved by unanimous vote of the Board to approve the Consent Agenda. |
| C. COMMITTEE REPORTS | | |
| 1) Finance Committee <i>(Ms. Blanks)</i> | <ul style="list-style-type: none"> • Ms. Kulmacz presented the highlights of the March 2023 financial statements: | <ul style="list-style-type: none"> • MOTION by Mr. Michalik seconded by Ms. Pak and approved by |

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| <p>a) March 2023 Financial Statements</p> | <ul style="list-style-type: none"> - Cash on hand = \$7,156,210 in cash, which is an increase of \$350k from February. The increase in cash is due to the final drawdowns of the large COVID related grant and higher than usual pharmacy and patient related payments. - Cash on hands days – 123 days as of March 31, 2023; 3 days more than the prior month. - Net Patient Fee Revenue totaled \$1,062,378 which is (2%) lower than budget and 4% higher than the same month last year. Patient visits are (5%) lower than budget for the month and 4% higher compared to the same month last year. - The average net patient fee per visit was \$133.53; \$6.60 higher than February. 2023 is beginning with a 2% higher total of self-pay patients with a corresponding decrease in commercial payers. - Total Operating Revenue for the month of March = \$1,978,314 and is higher than budget by 6% as well as 9% higher compared to the same month in the prior year. Patient revenue was (\$20k) lower than budget for the month, grant revenue was over budget for the month by 81k and pharmacy revenue was ahead budget by \$56k. - Total Operating Expense for the month of March was \$1,805,647 which was over budget by \$79k. - CHS generated an operating surplus for the month of March of 172,666 compared to a projected surplus of \$134,321. YTD CHS is running a surplus of \$143,793 versus a budgeted surplus of \$343,018. | <p>unanimous vote of the Board to accept the March 2023 Financial Statements.</p> |
| <p>b) Sliding Fee Policy</p> | <ul style="list-style-type: none"> • Ms. Kulmacz reviewed the Sliding Fee Policy. No suggested policy changes at this time. | <ul style="list-style-type: none"> • MOTION by Mr. Michalik seconded by Ms. Roberts and approved by unanimous vote of the Board to accept the Slide Utilization review. • MOTION by Mr. Michalik seconded by Ms. Roberts and approved by unanimous vote of the Board to accept the Sliding Fee Policy. |
| <p>c) Telework Policy (Developed During</p> | <ul style="list-style-type: none"> • Ms. Kulmacz reviewed the Telework Policy (Developed During COVID). | <ul style="list-style-type: none"> • MOTION by Ms. Pak seconded by Mr. Michalik and approved by |

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| COVID-19) | | unanimous vote of the Board to accept the Telework Policy (Developed During COVID-19). |
| d) Telehealth Policy and Procedure (Developed During COVID-19) | <ul style="list-style-type: none"> • Ms. Kulmacz reviewed the Telehealth Policy and Procedure (Developed During COVID-19). No suggested changes. | <ul style="list-style-type: none"> • MOTION by Ms. Pak seconded by Ms. Addai and approved by unanimous vote of the Board to accept the Telehealth Policy and Procedure (Developed During COVID-19). |
| e) CHS, Inc. Safety Management Plan Annual Review 2022 | <ul style="list-style-type: none"> • Ms. Kulmacz provided a review of the CHS, Inc. Safety Management Plan Annual Review 2022. | <ul style="list-style-type: none"> • MOTION by Mr. Michalik seconded by Ms. Pak and approved by unanimous vote of the Board to accept the CHS, Inc. Safety Management Plan Annual Review 2022. |
| 2) Quality, Safety & Risk Management Committee (Carlos Rosario) a) Acting CMO Credentialing Report | <ul style="list-style-type: none"> • Ms. Hirth reported the following on behalf of Dr. Orett Brown: <ul style="list-style-type: none"> - Credentialing <ul style="list-style-type: none"> ➢ Anne Howley, RN, Quality ➢ RE-Credentialing ➢ Dr. Sherman Tucker, DPM, Adult Medicine, Podiatry ➢ Dr. Elke Webb, Staff Physician, Pediatrics/Adolescent ➢ Letrice Perry, MSW, LCSW, Assistant Clinical Director, Behavioral Health | <ul style="list-style-type: none"> • Informational. |
| b) The Infection Control 2022 Annual Report and 2023 Workplan | <ul style="list-style-type: none"> • Ms. Hirth reviewed the Infection Control 2022 Annual Report and 2023 Workplan. | <ul style="list-style-type: none"> • MOTION by Mr. Rosario seconded by Mr. Michalik and approved by unanimous vote of the Board to accept the Infection Control 2022 Annual Report and 2023 Workplan. |
| c) 2022 Medication Management Plan Annual Review | <ul style="list-style-type: none"> • Ms. Hirth reviewed the 2022 Medication Management Plan Annual Review. | <ul style="list-style-type: none"> • MOTION by Mr. Michalik seconded by Ms. Pak and approved by unanimous vote of the Board to accept the 2022 Medication Management Plan Annual Review. |
| d) QAPIC Minutes | <ul style="list-style-type: none"> • March 17, 2023 | <ul style="list-style-type: none"> • Informational. |

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| 3) Executive Committee (Randy McKenney) | <ul style="list-style-type: none"> • Did not meet. | <ul style="list-style-type: none"> • Informational. |
| 4) Standing Committees a) Fund Development (Randy McKenney) | <ul style="list-style-type: none"> • Did not meet. | <ul style="list-style-type: none"> • Informational. |
| b) Governance Committee (Judith Burchell) | <ul style="list-style-type: none"> • Did not meet. | <ul style="list-style-type: none"> • Informational. |
| c) Strategic Planning (Randy McKenney) | <ul style="list-style-type: none"> • Did not meet. | <ul style="list-style-type: none"> • Informational. |
| d) Advocacy (Robert Michalik) | <ul style="list-style-type: none"> • Did not meet. | <ul style="list-style-type: none"> • Informational. |
| e) Compliance (Executive Committee) | <ul style="list-style-type: none"> • Did not meet. | <ul style="list-style-type: none"> • Informational. |
| D. Chair's Report 1) HRSA Forms 5a, b, c | <ul style="list-style-type: none"> • Mr. Stanton provided background and addressed changes for each form individually. <ul style="list-style-type: none"> – 5a – Scope of Service – Acknowledge OB-GYN limited services provided while recruitment in progress. – 5b - Total hours of operations <ul style="list-style-type: none"> ➢ Windsor – 40 hours to 43 hours ➢ Hartford – 49 hours to 46 hours | <ul style="list-style-type: none"> • MOTION by Mr. Rosario seconded by Ms. Roberts and approved by unanimous vote of the board to accept HRSA Forms 5a. • MOTION by Mr. Michalik seconded by Ms. Pak and approved by unanimous vote of the board to accept the proposed change in the hours of operation in Windsor and Hartford in HRSA Forms 5b. • MOTION by Mr. Rosario seconded by Ms. Pak and approved by unanimous vote of the board to accept the HRSA Forms 5c without change. |
| 2) Compliance Committee Program Annual Review 2022 | <ul style="list-style-type: none"> • Mr. Stanton provided an overview of activities of the Compliance Committee for 2022. | <ul style="list-style-type: none"> • MOTION by Mr. Michalik seconded by Ms. Pak and approved by unanimous vote of the Board to accept the Compliance Committee Program Annual Review 2022. |

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| 3) Compliance Committee Work Plan 2023 | <ul style="list-style-type: none"> Mr. Stanton reviewed the Compliance Committee Work Plan 2023. | <ul style="list-style-type: none"> MOTION by Mr. Michalik seconded by Mr. Rosario and approved by unanimous vote of the Board to accept the Compliance Committee Work Plan 2023. |
| E. Other | <ul style="list-style-type: none"> Mr. Stanton shared that a sister health center was cited by the Department of Public Health because their Governing Board did not appoint a medical or dental director on an annual basis. Mr. Stanton felt this did not apply to FQHCs but as a precaution, he recommended passing a resolution that demonstrates our intent to comply with this resolution requirement without changing the bylaws. Mr. Stanton read the proposed wording. | <ul style="list-style-type: none"> MOTION by Mr. McKenney seconded by Ms. Pak and approved by unanimous vote of the Board to accept the proposed resolution of CHS' intent to comply with the Public Health Code. |
| F. DATE/TIME OF NEXT MEETING | <ul style="list-style-type: none"> Thursday May 25, 2023 | <ul style="list-style-type: none"> Informational. |
| G. ADJOURNMENT | | <ul style="list-style-type: none"> MOTION by Mr. Michalik seconded by Mr. Rosario and approved by unanimous vote of the Executive Committee to adjourn the meeting at 7:14 p.m. |


Secretary, Board of Directors

6/7/23
Date