



MORONGO BASIN HEALTHCARE DISTRICT

Morongo Basin Health Care District
Community Health Center
GOVERNING BOARD MEETING
MINUTES of Thursday, December 5, 2024, at 4:45 p.m.

This meeting convened on the District's campus at 6530 La Contenta Road, Suite 400, Yucca Valley, CA 92284. The meeting was also accessible by Microsoft Teams remote platform.

Mission Statement: *To improve the health and wellness of the communities we serve.*

Vision Statement: *A healthy Morongo Basin.*

Core Values: *Commitment, Collaboration, Accountability, Dignity, Integrity, and Equity*

PRESENT:

- Cody Briggs (*present*)
- Pat Cooper (*present*)
- Mary Dunn (*present*)
- Marc Greenhouse (*present*)
- Bryan Goldfarb (*remote*)
- Nicola Keller (*present*)
- Eric Menendez (*present*)
- Jackie Todd (*present*)
- Lisa Ryan (*present*)

STAFF:

- Cindy Schmall, CEO (*present*)
- Jill Goodwin, Clinical Svcs. Manager (*present*)
- Beverly Krushat, CHC Board Clerk (*present*)
- Janeen Duff, Program Dev. Liaison (*present*)
- Tricia Gehrling, Chief Patient Experience/ Compliance Officer (*present*)

CALL TO ORDER – Board meeting was called to order by Nicola Keller at 4:45 p.m.

ROLL CALL - Beverly Krushat conducted roll call and confirmed there is a quorum.

OBSERVANCES –

Cody Briggs led the pledge of allegiance.

Mary Dunn read the Mission and Vision statements.

PUBLIC COMMENTS – None

APPROVAL OF MEETING AGENDA -

Motion 24-54: MSC (Briggs/Greenhouse) 9/0/0 motion carried to approve the Agenda as published.

APPROVAL OF CHC CONSENT AGENDA –

- November 7, 2024, Meeting Minutes

Motion 24-55: MSC (Menendez/Todd) 9/0/0 motion carried to approve the Consent Agenda.

RATIFY DISTRICT BOARD APPOINTMENTS TO GOVERNING BOARD - Cindy Schmall, CEO

This item was tabled until the next Board meeting on January 9, 2024.

ELECTION OF BOARD OFFICERS— *Karen Graley, MBHD Board Clerk*

Ms. Graley explained the term of office effective with the January 2025 regular CHC meeting.

Chairperson Nicola Keller opened nominations for Chairperson 2025 of the Board; Cindy Schmall, CEO nominated Jackie Todd for Chairperson; Ms. Todd did not accept the nomination. CEO Schmall then nominated Marc Greenhouse for Chairperson; Cody Briggs seconded; there were no further nominations for Chairperson.

Motion 24-57: CEO Schmall motioned to appoint Marc Greenhouse as Chairperson; Cody Briggs seconded; motion was passed by unanimous vote.

Ms. Graley then opened the floor to nominations for Vice Chairperson.

CEO Schmall nominated Nicola Keller as Vice Chairperson; Ms. Keller accepted the nomination; there were no further nominations for Vice Chairperson.

Motion 24-58: CEO Schmall motioned to appoint Nicola Keller as Vice Chairperson; motion passed by a unanimous vote.

Ms. Graley opened the floor to nominations for Secretary.

CEO Schmall nominated Jackie Todd for Secretary; Ms. Todd did not accept the nomination; Cody Briggs stated that he would be able to fulfill the role; there were no further nominations for Secretary.

Motion 24-59: By a unanimous vote Cody Briggs was appointed as Secretary.

Ms. Graley opened the floor for nominations for Treasurer.

CEO Schmall explained what the Treasurer's job is and asked Eric Menendez if he was interested; Eric Menendez accepted the role; there were no further nominations.

24-60: By a unanimous vote Eric Menendez was appointed as Treasurer.

APPROVE ANNUAL BUSINESS CALENDAR – *Cindy Schmall, CEO*

CEO Schmall explained that the annual business calendar identifies all the items we need to achieve in the next year and when we need to achieve them.

24-61: MSC (Menendez/Briggs) 9/0/0 to approve the annual business calendar.

RE-APPOINTMENT OF BOARD MEMBER – *Cindy Schmall, CEO*

CEO Schmall informed everyone that the discussion centers around the re-appointment of Bryan Goldfarb to the CHC Board of Directors. A Board member must attend at least 75% of the Board meetings, which means you may not miss more than three (3) meetings all year. Unfortunately, Mr. Goldfarb has missed many more than just three (3) meetings. The Brown Act stipulates that a board member must attend, in person, at least 10 of the 12 meetings, and only miss two (2) while being remote. However, our by-laws state you can miss three (3). Mr. Goldfarb has made us aware that he is currently working out of area and cannot attend in person. CEO Schmall stated that her recommendation at this time, even though he has been a valuable member of this Board and we very much value his participation, that we not re-appoint Mr. Goldfarb. However, when Mr. Goldfarb is able and more local to attend the meetings (per HRSA and the Brown Act) we would be happy to have him back.

CEO Schmall asked Mr. Goldfarb his thoughts and if he would be able to commit. Mr. Goldfarb stated that his schedule is in flux right now and wouldn't be able to let the board know until a month or two down the road. He also stated that had he not had so many technical and communication issues he would have made more meetings remotely.

COMMENTS:

Pat Cooper stated that Mr. Goldfarb doesn't have specific dates right now and in order to comply with HRSA and the Brown Act rules, we would need this information. She recommended to not re-appoint at this time but when he has his schedule sorted out, we would be happy to have him back.

Nicola Kellar informed the members that HRSA and our By-Laws are very strict as far as what we can and can't do. Unfortunately, there is documentation that Mr. Goldfarb has not been able to attend the majority of the meetings this year and is therefore ineligible to be reappointed.

Eric Menendez and Jackie Todd stipulated that the board should wait until Mr. Goldfarb is able to attend meetings.

Motion 24-62: MSC (Menendez/Todd) 8/0/0 to deny the re-appointment of Mr. Goldfarb until his location and circumstances change.

POLICY NUMBER: CHC-FS-216 REFUSAL TO PAY – Debbie Anderson, CFO

CFO Anderson explained that the substance of this policy is not changing, we are attempting to explain it more in layman's terms. She then proceeded to explain the changes within the policy w/changes to update the years.

Motion 24-63: MSC (Briggs/Todd) 8/0/0 to approve Policy Number: CHC-FS-216 Refusal to Pay.

FINANCIAL REPORT – Debbie Anderson, CFO

OVERVIEW

The clinic financials for the month of October show a loss of \$(19,990) and year to date shows a loss of \$(366,811). (See Table 1 & 2)

The ARP capital income was booked and so clinics shows a small loss of \$(19,990). This brings the year to date loss to \$(366,811). In comparison, the year to date budget is \$(893,358), so clinic also are doing better than budgeted.

Visits year to date are coming in at 12.843. Chart A shows this is the best year to date we've had since FY 19-20.

CLINIC CHANGE IN NET POSITION

Table 1 Clinics October 2024

Clinics	Actual Mth	Budget Mth	Over/(Under)	% of Budget
Patient services (net)	699,772	692,507	7,265	1.05%
Grant Revenue	279,452	127,742	151,710	118.76%
340B Revenue	15,515	33,375	(17,860)	-53.51%
Capitation Fees	173,674	166,695	6,979	4.19%
Records & Interest	100	146	(46)	-31.21%
Cost Report Adjustments	(141,667)	(141,667)	(0)	-0.00%
Quality	38,105	43,217	(5,112)	-11.83%
	1,064,951	922,015	142,936	15.50%
Salaries - Clinic	481,327	576,212	94,885	16.47%
Fringe - Clinic	110,028	119,340	9,312	7.80%
Phys Fees - Clinic	135,030	114,894	(20,136)	-17.53%
Purchases Services - Clinic	70,711	65,201	(5,510)	-8.45%
IT, Network & Phones - Clinic	4,020	17,393	13,373	76.89%
Supplies - Clinic	82,695	32,856	(49,839)	-151.69%
Supplies - 340B	17,581	21,832	4,250	19.47%
R&M - Clinic	12,837	4,786	(8,051)	-168.22%
Leases/Rentals - Clinic	149	377	229	60.60%
Utilities - Clinic	4,788	5,128	340	6.62%
Ins - Clinic	144	152	9	5.66%
Other - Clinic	12,219	7,508	(4,711)	-62.75%
Depreciation	16,658	14,590	(2,068)	-14.18%
	948,188	980,268	32,081	3.27%
Operating Income/(Loss) before Allocation	116,764	(58,253)	175,017	300.44%
Allocation of Overhead for Health Centers	(136,753)	(207,338)	70,585	34.04%
Change in Net Position	(19,990)	(265,591)	245,601	92.47%

Grant revenue variance due to bookings for the ARP equipment grant. The 340B revenue variance is due to pharmaceutical drug restrictions placed on FQHC's by the drug companies. Salaries & fringe variances are due positions budgeted not filled, so savings took place. The physician fees are over due to increases in visits being done by BH, Peds, and Chiro. Supplies for the clinic is over due to equipment being bought for the ARP capital grant. This was not budgeted since we were unsure if HRSA was going to approve the change from the modular building to equipment. Since there was less expenses than budgeted in administration, the allocation of overhead expenses is not as much as budgeted.

Table 2 Clinics Year to Date

Clinics	Actual YTD	Budget YTD	Over/(Under)	% of Budget
Patient services (net)	2,595,130	2,619,483	(24,353)	-0.93%
Grant Revenue	702,230	567,400	134,831	23.76%
340B Revenue	96,563	126,244	(29,681)	-23.51%
Capitation Fees	689,267	666,780	22,488	3.37%
Records & Interest	551	553	(2)	-0.43%
Cost Report Adjustments	(566,667)	(566,667)	0	0.00%
Quality	136,990	172,867	(35,876)	-20.75%
	3,654,065	3,586,660	67,405	1.88%
Salaries - Clinic	1,759,094	2,136,786	377,692	17.68%
Fringe - Clinic	369,725	448,505	78,780	17.57%
Phys Fees - Clinic	507,300	434,598	(72,702)	-16.73%
Purchases Services - Clinic	246,227	259,923	13,696	5.27%
IT, Network & Phones - Clinic	85,716	69,570	(16,145)	-23.21%
Supplies - Clinic	197,305	124,283	(73,022)	-58.76%
Supplies - 340B	65,502	84,068	18,566	22.08%
R&M - Clinic	29,481	18,703	(10,777)	-57.62%
Leases/Rentals - Clinic	981	1,509	528	34.99%
Utilities - Clinic	34,709	29,691	(5,018)	-16.90%
Ins - Clinic	575	609	34	5.66%
Other - Clinic	84,364	29,135	(55,229)	-189.56%
Depreciation	66,073	58,359	(7,715)	-13.22%
	3,447,052	3,695,739	248,687	6.73%
Operating Income/(Loss) before Allocation	207,013	(109,079)	316,092	289.78%
Allocation of Overhead for Health Centers	(573,824)	(784,279)	210,455	26.83%
Change in Net Position	(366,811)	(893,358)	526,547	58.94%

Quality payments are not as high due to complexities of timing, bundled scores, improvement from the previous year, and other factors. IT for the clinic is over due to equipment being bought for the ARP capital grant. The other variance is due to recruitment fees paid for the new Split Rock doctor.

Chart A – Visits History Chart

Month	FY 18-19	FY 19-20	FY 20-21	FY 21-22	FY 22-23	FY 23-24	FY 24-25
Jul	3,055	3,283	3,091	2,877	2,670	2,758	3,054
Aug	3,886	3,587	3,016	3,425	3,315	3,195	2,992
Sep	3,140	3,501	3,069	3,134	3,256	2,593	3,049
Oct	3,562	3,892	3,267	3,282	3,071	3,026	3,748
Nov	3,249	3,353	2,632	3,116	2,936	2,974	
Dec	2,898	3,304	2,984	2,705	2,881	2,613	
Jan	3,698	4,011	2,926	2,925	3,001	3,258	
Feb	3,198	3,763	3,192	3,068	2,882	2,998	
Mar	3,515	2,927	3,521	3,332	3,331	3,057	
Apr	3,660	2,066	3,461	3,094	2,896	3,026	
May	3,662	2,200	3,043	3,239	3,247	3,160	
Jun	3,344	2,786	3,086	3,218	2,939	2,679	
Total	40,867	38,673	37,288	37,415	36,425	35,337	12,843
Total July - Oct	13,643	14,263	12,443	12,718	12,312	11,572	12,843

Motion 24-64: MSC (Menendez/Todd) 8/0/0 motion carried to accept and file the October 2024 financial report.

REPORTING

QUALITY REPORT – Tricia Gehrlein, CPE/CO

2024 UDS Measures Q3

eClinicalWorks has updated the UDS Reports and the attached numbers are an accurate reflection of performance by quarter. One report, Ischemic Vascular Disease (tracking patients with a diagnosis who are prescribed aspirin or another anti-platelet) is not accurately reflecting the patient population who were prescribed aspirin. Angie Villaluz continues to adjust the settings for this report, and it will be accurate for Q4.

The only significant change from the outcomes previously reported is for Tobacco Screening. Prior to 2024, the HRSA requirement was that all medical patients 18 years of age and older be screened for tobacco use and, when necessary, appropriate intervention be given. For 2024, this measure changed from 18 years of age and older to 12 years of age and older.

The reporting for previous quarters did not reflect patients 12 years of age and older, it was only reporting 18 years of age and older; the report has been updated to reflect the correct patient age. The correction, combined with the need for increased adult provider documentation, caused a decrease in our compliance rate by approximately 10% per quarter. As we were unaware the report was not appropriately capturing age range, we were unaware that the pediatricians were not capturing this data. This oversight has been rectified and we anticipate an improvement for quarter 4 reporting. Further, the adult providers will be reminded of the need to document both the screening and intervention for those that are positive for tobacco use.

UDS Reporting to HRSA

HRSA is now requiring that specific annual reporting data be sent electronically, directly from our electronic health record to their reporting system. This is a change from previous years, where we would manually enter data in their system.

For 2024 (which is reported by February 15, 2025) patient demographic data and two UDS Measures must be sent directly from our electronic health record. Angie Villaluz has been working diligently with our electronic health record provider, eClinicalWorks, to ensure that we have data integrity. Preliminary testing of the required patient demographic data currently shows no inconsistencies or errors. We continue to ensure that all of the UDS measures are accurate and testing is ongoing.

CEO REPORT – Cindy Schmall, CEO

- Health Management and Education Clinic is going live on December 9th.
- Best of Morongo Basin - we were voted #1 Best Dr's. Office
- Chiro has moved into their new space
- Integration of blended services has begun within the clinics
- We hired three (3) new MA's in November

OPERATIONS

- Adults 2.0 remodel is complete and the area is available for use.
- 300 remodel has restarted and expect completion by end of year.
- Split Rock clogged toilet has been fixed in Peds along with the exterior lights on the dental building.
- MMU is set and functioning well.
- Split Rock Modular flooring choices have been turned in and requoted. Septic is due to start on December 16th and electrical work is ongoing.

TRANSPORTATION

- Our two (2) mini vans are wrapped and back in service.
- MDU remodel will be completed this week and will be in service on Tuesday, December 10th.
- We are exploring the purchase of two (2) new vehicles.

HRSA VISIT REVIEW EDUCATION – Tricia Gehrlein, CPE/CO

CPE/CO Gehrlein educated the Board members on the HRSA visit that will be coming up in March.

CALENDAR REVIEW – Cindy Schmall, CEO

CEO Schmall reviewed the December 2024 and January 2025 calendars with the Board members. Noting the change for the Employee Holiday Luncheon from December 13th to December 19th. An additional note that the CHC Board meeting for January will be on January 9th due to the New Years holiday.

BOARD MEMBER COMMENTS -

Lisa Ryan – Apologized for being late as she is coming from Palm Springs.

Eric Menendez – Informed the members that he was working with 29 Palms and Yucca Valley on the homeless issue.

ADJOURNMENT

Meeting adjourned at 5:58 p.m.


Cody Briggs, Secretary of the Board

Minutes recorded by Beverly Krushat, CHC Board Clerk