



**South Central Family Health Center**  
Board of Directors Meeting Minutes

February 28, 2017

**PRESENT:** Fernando Almodovar, Jan Brittain, Dr. Tumani Leatherwood, Rosie Rios, Martha Munoz

Amir Johnson, Adrian De Vargas, Elmer Roldan, Jaime Moreno (via conference call)

**STAFF:** Richard Veloz, Paul Ramos, Dr. Keith Fukuyama, Dr. Brendan Mull, Dr. Jose Perez,

Genevieve Filmardirossian, Dr. Ryan Huang, David Roman

**ABSENT:** Karen Minikes, Erica Hernandez, Tia Strozier, Meryl Humphrey

**GUEST:** Rene Licon, RSL Associates

AGENDA ITEMS	DISCUSSION ITEMS	ACTION ITEMS
MEETING CALLED TO ORDER	The meeting was called to order at 6:30 pm	
ROLL CALL	Roll was called, there was a quorum present.	
PRESENTATION Rene Licon   RSL Associates		
403 (B) Retirement Plan	<p>Richard introduced Rene Licon, Certified Financial Planner with RSL Associates. Rene stated RSL Associates understands that professionals and business owners face unique challenges as they prepare for retirement. They can help take the mystery out of preparing for today and tomorrow. Whether you are investing for retirement, college savings or estate planning, their personalized service focuses on your needs, wants, financial goals and objectives.</p> <p>Their professionals have years of experience in financial services. They can help you address your needs of today and for many years to come. Rene will be available to come to SCFHC on a monthly basis to meet with employees personally regarding their investments and retirement plan. There was some lengthy discussion.</p>	
Charters	<p>The Board reviewed the following Resolutions and Charters:</p> <ul style="list-style-type: none"> <li>• Resolution Committee Charter</li> <li>• Retirement Committee Charter</li> <li>• Investment Committee Charter</li> </ul>	

	<p>Fernando stated, by the next meeting, we will come up with who will be on the committees and the Finance Committee will review the Charters further. He thanked Rene for his presentation</p>	
<p><b>ADMINISTRATIVE UPDATE</b> Richard Veloz</p>		
<p>HRSA Health Center Program On-site Review Final Report</p>	<p>Richard stated, we finally received our final report from the on-site HRSA review conducted at our center on December 6-8, 2016. There were 4 areas out of the 19 HRSA requirements that we did not meet. However, they were not that significant considering that the average number of clinics not meeting the requirements are between 6 and 8. Richard highlighted the list below which includes the 4 requirements "Not Met."</p> <ol style="list-style-type: none"> <li>1. Needs Assessment-Met</li> <li>2. Required and Additional Services-Met</li> <li>3. Staffing Requirement-Met</li> <li>4. Accessible Hours of Operation/Locations -Met</li> <li>5. After Hours Coverage-Met</li> <li>6. Hospital Admitting Privileges and Continuum of Care-Met</li> <li>7. <u>Sliding Fee Discounts -Not Met</u></li> <li>8. Quality Improvement/Assurance Plan-Met</li> <li>9. Key Management Staff -Met</li> <li>10. Contractual/Affiliation Agreements -Met</li> <li>11. Collaborative Relationships- Met</li> <li>12. Financial Management and Control Policies-Met</li> <li>13. <u>Billing and Collections -Not Met</u></li> <li>14. Budget -Met</li> <li>15. Program Data Reporting Systems -Met</li> <li>16. <u>Scope of Project -Not Met</u></li> <li>17. Board Authority -Met</li> <li>18. <u>Board Composition- Not Met</u></li> <li>19. Conflict of Interest Policy- Met</li> </ol>	

	<p>In regards to the Board of Directors not meeting the requirement on number 18-Board Composition, this was what they said:</p> <p>“The SCFHC Board of Directors consists of 14 members who are in agreement with their bylaws that allow for the size of the board to be between nine and 21 members. The size of the board is appropriate for the complexity of the organization and the diversity of the community served. <i>At present count, seven of the 14 members of the board are served by the health center and have been seen within the past 24 months (50 percent). This does not meet the requirement of having 51 percent consumer board members.</i>”</p> <p>If Not Met – Steps/Actions Recommended for Compliance:</p> <p>SCFHC must take the necessary steps to achieve compliance with Program Requirement #18 to have a board composed of at least 51 percent consumers of the health center. The board is aware of this issue and is working as a group to recruit members who are consumers. They have, in fact, recruited a consumer member whom they intend to bring in at their December meeting. They are using brochures and placing posters in the sites to recruit potential patients to the board. <i>They may also consider working to encourage existing non-consumer members of the board to use services of the health center.</i></p> <p>Richard stated, since the site visit, the Board Composition is now in compliance with a minimum 51% Consumer Board requirement.</p>	<p>Alexis to provide an updated Board Roster to David to send to HRSA.</p>
<p>Community Clinic Associating of L.A. County (CCALAC) financial Strength Seminar and Dinner</p>	<p>On February 9<sup>th</sup> &amp; 10<sup>th</sup>, Paul Ramos and Richard attended a very special workshop to review best practices in the area of finance for community clinics. Richard stated it was well attended and some of the things they learned they will be applying to our clinic. In addition, Richard thanked our Board Member, Dr. Leatherwood who was able to attend the day long February 9<sup>th</sup> seminar and along with Richard the dinner held that evening. This was especially enjoyable as most of the dinner invites were Board Members from other clinics who were able to share their issues and concerns with each other as well as to the presenters.</p>	
<p>Strategic Plan Update</p>	<p>On February 17<sup>th</sup>, in preparation to present to the Board of Directors, senior staff met with our consultant Maura Harrington to review and analyze the data gathered from the previous meetings with the Board and staff. Richard stated we plan to meet at least one other time so that we can present the results to the Board of Directors for review and prioritization prior to finalizing our strategic plan.</p>	

<p>California Primary Care Strategic Planning Retreat</p>	<p>On February 23<sup>rd</sup> &amp; 24<sup>th</sup>, as a Board Member of our statewide clinic association Richard participated in this statewide clinic strategic planning retreat. This year there were many issues related to the financial viability of CHC's under the Trump Administration especially around concerns if the Affordable Care Act is repealed. Richard is also a Board Member of the associations California Health Advocates (501 c 3), and participated in that discussion as well.</p> <p>It was a productive meeting with the final four goals being:</p> <ul style="list-style-type: none"> <li>(1) A Leader for Health Access and Coverage</li> <li>(2) Transform the Health Care System</li> <li>(3) Develop a Robust CHC Workforce, and to</li> <li>(4) Demonstrate the value of Community Health Centers.</li> </ul> <p>In all four of the goals advocacy is involved to demonstrate the value of our centers by involving all of our health centers in written and advocacy campaigns.</p>	
<p>Congresswoman Lucille Roybal-Allard and Judy Chu Town Hall Meeting</p>	<p>After receiving a last-minute call from Lucille Roybal-Allard's office requesting patients and staff, our staff participated in a town hall meeting aimed at hearing testimony from constituents and others regarding the consequences of a repeal of the Affordable Care Act (ACA). Richard thanked David Roman and Deborah Nevarez from our staff that even though it was a last-minute call, were able to attend representing SCFHC. In addition, Richard thanked our Board Member Rosie Rios for her passionate testimony at the town hall, and to Board Member Martha Munoz who was able to attend and provide support as well.</p>	
<p>Clinic Expansion Update</p>	<p>The new <b>Vernon Medical Building</b> is scheduled to open in May, 2017. David Roman is working with putting together an agenda for a possible grand opening in June 2017. Please see Genevieve's report on the work we are doing on a Marketing Plan to begin before our opening, <b>The Jefferson Wellness Center</b> Expansion which will include expanding our clinic and dental operations, <b>The Elizabeth Learning Center</b> dental expansion, the dental expansion adjacent to our main clinic, which should be ready for opening by late March, early April 2017, and the new <b>Vision Care Optometry</b> clinic opening in August-September 2017.</p> <p>In addition, we have been approached by the Maya Angelou LAUSD school about developing a school based clinic at their site. At this time unless additional funding is</p>	

	available we can only continue to work with them on an as needed basis. Elmer stated he may offer some assistance with this endeavor.	
Provider Recruitment	Richard acknowledged the excellent work that Dr. Perez has done as our Interim Chief Medical Officer. He has maintained our clinical program structure with minimal disruption, kept productivity at projected levels, and maintained the overall integrity and morale of our clinical staff at high levels. In addition, Richard thanked Dr. Perez and Dr. Mull as they work together to address the need for an incentive program for all of our clinical staff. This team approach has been helped by a grant program called SNAP, whose aim is to incorporate both front and back office with providers as part of a team incentive. Richard encourage this work not only to develop better care coordination for our patients but to retain the excellent staff we have and to encourage future recruiting efforts.	
Los Angeles County Moves to Protect ACA Coverage Gains	On Tuesday, the Board of Supervisors unanimously approved a motion directing county staff to "develop options of how health insurance coverage could be maintained and/or extended" within the county and the state in case the Affordable Care Act (ACA) is repealed. CCALAC was present to provide a supportive testimony. There are no specific details now, but Dr. Mitch Katz said he wants to focus on controlling the cost of consumers' premiums and explore the model of a public option.	
Immigrants Fearful of Enrolling Medi-Cal, Asking to Dis-enroll	Government officials, immigration attorneys and health care advocates are reporting same fear and concerns that some CCALAC members are observing. Some California residents are canceling their Medi-Cal coverage or declining to enroll in the first place, citing fears of a crackdown on immigrants under the new administration. The people asking to drop coverage include those who are in the country legally but are concerned about jeopardizing family members who lack legal status. Others fear they will be penalized in the future for using public benefits such as Medi-Cal.	
On January 25, Trump signed a pair of executive orders on immigration enforcement	Signaling the administration's intent to pursue an expansion of immigration enforcement and deportations, and to build a physical wall on southern border. Under the new guidelines, any immigrant who is convicted, charged or suspected of a crime is considered a priority for removal. This is a significant change from the policy under the Obama administration, which focused enforcement activities on serious criminals, recent border crossers and terrorism suspects. The new guidelines allow for potentially very broad interpretation. Under the new rules, agents could seek to deport people in the country illegally who were convicted of any crime--no matter how minor--and could prioritize people who have just been charged with a crime, not convicted, or people who have committed an act for which they could be charged. The memos specify that any	

	<p>person who has "abused any program related to receipt of public benefits" and anyone an immigration officer deems a risk to public safety or national security could be marked as a priority for deportation.</p> <p>The DHS memos explicitly state that the Deferred Action for Childhood Arrivals (DACA) Program currently remains in effect. The future of DACA is not addressed in the new guidelines. The President continues to say that the program is a difficult one for him and that he needs more time.</p> <p>Immigrant advocates say the guidelines could prioritize up to 8 million people for deportation. Under the broadest interpretation, all of the approximately 11 million undocumented residents in the United States could be considered a priority for deportation since they technically could face charges for entering the country illegally. Administration officials insist that the memos simply outline priorities for who should be deported, and that the guidelines are not intended as a mass deportation effort. Congress will need to appropriate funding for hiring new agents and judges and building a wall and new detention facilities.</p> <p>At SCFHC staff has reported that they are seeing heightened anxiety among patients. To address these issues, we are having an Immigration Rights group address our All Staff meeting on the rights of immigrants and our rights as community health centers. In addition, we have information brochures that are distributed to staff and patients regarding information for Clinics in the Event of an ICE Raid and Information for Patients in Preparation of an ICE Raid.</p>	
<p>The 2017 CCALAC Annual Health Care Symposium, and the NACHC 2017 Policy &amp; Issues Forum</p>	<p>Richard, Genevieve, Paul, Dr. Perez, Dr. Noya and Dr. Brendan Mull will be attending CCALAC's Health Care Symposium on Friday, March 3<sup>rd</sup> in Huntington Beach. This is a one-day event featuring a keynote presentation and breakout sessions highlighting best practices in health care delivery and clinical practices.</p> <p>In addition, Richard, Paul, Genevieve &amp; Jan will be attending the NACHC Policy and Issues Forum in D.C on March 28-31. Health care issues will be at the forefront of the new administration's agenda. The focus at both the CCALAC Symposium and the Policies &amp; Issues forum will be to preserve Medicaid and the unique role of health centers, as well as ensure strong funding to enhance health center capacity. At the P&amp;I we will also have a chance to meet with HRSA administrators and our Program Officer Phillip Jordon.</p>	

<b>HUMAN RESOURCES UPDATE</b> Included in Packet		
New Hires	<ol style="list-style-type: none"> <li>1. Patient Services Representative</li> <li>2. Registered Nurse (RN)</li> <li>3. Maintenance Supervisor</li> <li>4. Development Assistant</li> </ol>	
Resignations	<ol style="list-style-type: none"> <li>1. Referral Specialist</li> <li>2. Licensed Vocational Nurse (LVN)</li> </ol>	
Leaves	<ol style="list-style-type: none"> <li>1. Family Nurse Practitioner</li> <li>2. Operator</li> <li>3. Medical Assistant</li> <li>4. Medical Administrative Assistant</li> </ol>	
Openings	<ol style="list-style-type: none"> <li>1. Chief Medical Officer</li> <li>2. Physician (2)</li> <li>3. Family Nurse Practitioner (2)</li> <li>4. Physician Assistant (2)</li> <li>5. Directors of Nursing</li> <li>6. Dental Director</li> <li>7. Dentist (3)</li> </ol>	
Proposed Addendum Section 6: Federal, State & Other Employee Benefits	<p>Human Resource is recommending that the current Advance Notice and Medical Certification policy be revised. See below:</p> <p>6.1 Advance Notice and Medical Certification</p> <p>Current policy reads: "Accrued sick leave is required to be used during FMLA/CFRA leave for the employee's own serious health condition. Vacation and other accrued time (other than sick leave) are required to be used for any family/medical leave-qualifying event."</p> <p>It was proposed that the policy be revised to: Accrued sick leave is required to be used during FMLA/CFRA leave for the employee's own serious health condition. Vacation and other accrued time (other than sick leave) are required to be used for any family/medical leave-qualifying event. In extenuating circumstances, an exception may be made for the requirement of the use of vacation time for any family/medical leave-qualifying event,</p>	

	<p>other than the employee's own serious health condition, on a case-by-case basis, and will be determined by HR and/or the CEO.</p> <p>Example: An employee who has exhausted all of their vacation time, or elects to use sick time instead of vacation time, if their child, parent, parent-in-law, grandparent, grandchild, sibling, spouse, or domestic partner is hospitalized in a critical care unit or similar circumstances, in which the employee's presence is required for emotional support (rather than "actual" care).</p>	
<p><b>DEVELOPMENT REPORT</b> David Roman</p>		
<p>Grants Received in February</p>	<p>David stated no new grants were received in February 2017, however, we received an e-mail from Marilyn Kempster, Project Manager for the California Colon Cancer Control Project of the California Department of Public Health regarding funding for our project:</p> <p><i>"I have good news. We finally received the official approval from CDC for the funds to move forward in our partnership. Our team here is now working as quickly as possible to move the contract through CDPH channels.</i></p> <p><i>There has been a lot of transition within our counterpart team at CDC which led to this process taking longer than expected. We really appreciate your patience.</i></p> <p><i>I will continue to keep you posted on the progress of the contract."</i></p> <p>When received, that contract will be worth \$502,000 over four years to SCFHC.</p>	
<p>Grants Submitted or in Progress</p>	<p>SCFHC submitted two competitive grant requests to the LA Care Foundation (Oral Health in Cudahy) and the Karl Kirchgessner Foundation (Vision Care for Diabetics). A third request, submitted on our behalf by the LA Trust, will support the purchase of dental chairs at Jefferson High School by the Ahmanson Foundation, if funded. Together, they represent \$300,000 in potential new funding to SCFHC.</p> <p>We received notice that Kaiser Permanente-West LA has opened a new funding cycle for their competitive grants. David is seeking recommendations on areas of need at SCFHC in alignment with Kaiser's most recent Community Health Needs Assessment (2017-2019): 1. Access to Care, 2. Economic Security, 3. Mental and Behavioral Health, 4. Obesity/HEAL/Diabetes.</p>	



Grants Declined	None	
Government Relations Update	SCFHC participated in Congresswomen Lucille Roybal-Allard and Judy Chu's advocacy efforts in February to support and defend the Affordable Care Act (ACA) at a Town Hall in Monterrey Park, CA. Our Board members Marta Muñoz and Rosie Rios were in attendance, with Rosie providing testimony on the tragic effects that eliminating the ACA would have on our patients and the community at large.	
<b>OPERATIONS UPDATE</b> Genevieve Filmardirossian		
Marketing & Outreach	Genevieve stated she is currently revising the Marketing Plan for the two upcoming projects. The estimate completion dates for the new Vernon Medical Building and the Central Avenue dental expansion is May 2017. The operational date for both facilities will be May 30, 2017. The Marketing Plan will include Outreach and In-reach and Social Media for the main site, the new Vernon building and the Central Avenue dental expansion. At the next Board Meeting, Genevieve will provide the revised 2017 Marketing and Outreach Plan.	
Wellness Center @ Jefferson High School	Within the next couple of weeks, Genevieve will be meeting with the Design Manager working on the Jefferson High School Modernization, including the Wellness Center to review a proposed layout of the new Wellness Center. In the meeting, we will be finalizing plans for the project. The anticipated schedule for completion is the second quarter of 2022. Generally speaking, they will be in design through the end of this year. Then, it will take about a year for all the regulatory agencies to review and approve the project – that gets them to end of 2018. Construction would start in 2019 and take 3-4 years (these are ballpark projections).	
Wellness Center & Elizabeth Learning Center	We are currently working on the expansion of Dental Services at the WCELC. The LA Trust for Children's Health requested \$75,000 on our behalf to pay for two dental chairs. Our architect created a layout for the new dental department. The space dedicated for dental is ample enough to put up to four (4) dental chairs, thus there will be room to build capacity as we outgrow the utilization of the first two (2) chairs.	
Maya Angelou High School	Maya Angelou High School in South Los Angeles: In January 2015, SCFHC expressed interest in operating a school-based clinic at this school. The school administrators were very supportive. We thought it might be helpful to see if the LA Trust for Children's Health could help support this effort in navigating through how LAUSD funding/support for a new health center. There was further discussion.	

	<p>Since we will be opening 3 new sites: Vernon Building, Dental on Central Avenue and Optometry on Central Avenue in the near future, and LAUSD has no funds for this new endeavor. It was decided that SCFHC's Development Department in conjunction with LA Trust look for new funding opportunities for the Wellness Center at Maya Angelou High School. The CFO will be preparing a budget for the Startup cost for this new Wellness Center.</p>	
<p><b>MEDICAL ADMINISTRATION</b> Dr. Jose Perez</p>		
<p>Provider Meetings</p>	<p>Dr. Perez stated, in response to the County's My Health LA Corrective Action Plan, we had trainings on the following Preventive services: Cholesterol Screening, Breast Cancer Screening and Influenza vaccination by Dr. Perez and Diabetic Retinal screenings and Cervical Cancer Screening by Dr. Brendan Mull. We need to complete several other trainings in the following weeks.</p>	
<p>Providers</p>	<p>Have interviews scheduled in the following weeks to fill out the open provider positions.</p> <p>We had one nurse leave us in the month of February but we are in the process of hiring a replacement. We are still looking for two additional LVN's.</p> <p>Once the new Vernon Medical building has been finalized, two medical teams that currently provide services at the old site will be moving to their stations: Dr. Noya's and Dr. Alexander's team.</p> <p>The plan is to hire new providers and create new teams at the old site to increase the number of providers and thus, access to our patients. We plan to have a new midlevel provider by the end of May to begin reconstituting the teams that left. Dr. Perez's plan is to have three new mid-levels up and seeing patients by December 2017.</p>	
<p>Credentialing</p>	<p>We are in the process of finalizing the hiring of Ms. Josephine Borromeo NP. She has passed her initial screen and recommend that the board extends temporary privileges. The Credentialing Policy and Procedures has been revised and modified and recommended to be done by the My Health L.A. auditors. The revised Policy and Procedure has been discussed with Dr. Leatherwood and Dr. Perez will be recommending the board to approve.</p>	
<p>Quality Improvement</p>	<p>SCFHC participated in the quarterly Quality indicator data exchange with CCALAC. In colon cancer screening we are at 43%, better than the average at CCALAC but much less</p>	

	<p>than where we want to be. We recently got a grant that will help us improve our colon cancer rates.</p> <p>In <u>breast cancer screening</u>, we are at 81%. We are exceeding the Medicaid and Commercial best and matching the lofty Healthy People 2020 benchmark.</p> <p>In <u>cervical cancer screening</u>, we are at 52 %, close to the average at CCALAC but below what rates have been in the past.</p> <p>In <u>chlamydia screenings</u>, we are at 69 %, matching the commercial rate and much better than the National Medicaid and the CCALAC average.</p> <p>There are areas of improvements and I am taking a look at several strategies to continue to improve these clinical indicators.</p>	
Radiology   Mammography	<p>We had a site visit and we were asked to change two items in our Mammography Consumer Complaint Policies &amp; Procedures. The changes are minor; have already been changed and implemented; have been discussed with Dr. Leatherwood; and we recommend the board approves the new Policy &amp; Procedure.</p>	
Pharmacy	<p><u>Prescription Statistics</u></p> <ul style="list-style-type: none"> <li>- January total: 2,914 prescriptions (Dec: 2,258)</li> <li>- Of those 2,914 prescriptions 90% of them were new prescriptions and 10% of them were refills</li> </ul> <p><u>Operations:</u></p> <ul style="list-style-type: none"> <li>- Donation of Vaseline came in from Direct Relief. Value: \$3,890</li> <li>- Taxonomy codes for NPI number have been corrected.</li> </ul> <p>A request for an NCPDP (National Council for Prescription Drug Programs) number has been submitted. This is needed before submitting a request for a Medi-Cal license for the pharmacy.</p>	

<b>DENTAL REPORT</b> Dr. Ryan Huang		
Human Resources	<p><b>Dental Staffing Update</b></p> <ul style="list-style-type: none"> <li>• Dr. Ryan Huang has been hired as Dental Director of as February 1, 2017.</li> <li>• Dr. Enrique Melgoza (40%FTE) has given notice that he will be resigning from SCFHC as of 3/11/2017.</li> </ul> <p><b>Open Dental Positions:</b></p> <ul style="list-style-type: none"> <li>• Dentist – Full Time</li> <li>• RDA/DA- Full Time</li> <li>• Dental Front Office Coordinator- Full Time</li> </ul> <p><b>Positions with candidates in pending HR screening process:</b></p> <ul style="list-style-type: none"> <li>• Dental Assistant – Full Time</li> <li>• Dental PSR- Full Time</li> </ul>	
Dental Productivity	<p><b>Total Encounters for Dental Department:</b></p> <ul style="list-style-type: none"> <li>• January 2017: 728 (January 2016: 690)</li> <li>• Utilization was at 95% of goal.</li> <li>• Year to date encounters as of January 31, 2017: 728</li> </ul> <p><b>Jefferson Wellness Center Encounters:</b></p> <ul style="list-style-type: none"> <li>• January 2017: 227</li> <li>• <b>Average Patients per day: 11.4</b></li> <li>• Average patients were below goal of 13/provider.</li> <li>• Utilization was at 87.3% of goal.</li> </ul> <p><b>Huntington Park Center Encounters:</b></p> <ul style="list-style-type: none"> <li>• January 2017: 501</li> <li>• <b>Average Patients per day: 12.8/provider.</b></li> <li>• Average patients were slightly below goal of 13/provider.</li> <li>• Utilization was at 98.8% of goal.</li> </ul>	

	<p><b>Improvements necessary to increase monthly utilization:</b></p> <ul style="list-style-type: none"> <li>• Increasing frequency of confirmation calls to patients.</li> <li>• Increasing focus on customer service to maintain current patients and increase referrals from existing patients.</li> <li>• Increasing back office/outreach staff to achieve optimal productivity.</li> </ul> <p><b>Unduplicated users</b> (Calculated as unduplicated users of the department in the past 12 months)</p> <ul style="list-style-type: none"> <li>• December 2016: 2544 (HP: 1443 JHS: 1101)</li> <li>• January 2017: 2577 (HP: 1476 JHS: 1101)</li> </ul>	
Dental Department Notes	<p><b>HRSA HIIP</b></p> <ul style="list-style-type: none"> <li>• Construction is ongoing for the new dental clinic at 4415 S. Central.</li> </ul> <p><b>Staffing Shortage</b></p> <ul style="list-style-type: none"> <li>• Due to unexpected turnover of front and back office staff and dentists in the last six months, the Huntington Park and Jefferson Wellness Center sites have been operating under-capacity.</li> <li>• The dental department is working with Human Resources to identify qualified candidates to fill the positions so that the dental clinics will run under optimal conditions and increase utilization rates.</li> </ul>	
<p><b>FINANCE UPDATE</b> Paul Ramos</p>		
Finance Committee	<p>The Finance Committee met and reviewed the following documents:</p> <ol style="list-style-type: none"> <li>1. Statement of Revenue &amp; Expenses for January 31, 2017</li> <li>2. Balance Sheet as of January 31, 2017</li> <li>3. Statement of Revenue &amp; Expenses by Sites</li> <li>4. Budgeted Statement of Revenue and Expenses</li> <li>5. Productivity Report</li> <li>6. Actual Visits by sites (graph)</li> <li>7. Personnel Cost by Department</li> <li>8. Expenditure Report by Month</li> <li>9. Accounts Receivable Aging and Detail</li> <li>10. Accounts Payable Aging and Detail</li> <li>11. Cash Receipts and Disbursement Report</li> <li>12. Payer Mix</li> </ol>	

Revenue	<p>Total Revenue: January 2017 - \$1,428,605 January 2016 - \$1,286,429</p> <p>Revenue increased by 11% on a year-to-date-basis compared to the previous year. Total MHLA charges for the month of January 2017 at \$187,035.</p>	
Expenses	<p>Total Expenses: January 2017 - \$1,438,897 January 2016 - \$1,301,139</p> <p>Expenses increased by 10% on a year-to-date basis over the prior year. For the month of January 2017, there was a deficit of \$10,292. Contractual services increased in per diem physicians and radiology and is reflected in the expenditures report. On a year-to-date basis, there is a deficit of \$10,292 compared to a deficit of \$14,710 during the same period last year.</p>	
Assets & Liabilities	Total cash and investment balance as of January 31, 2017 was \$2,027,680. Total Net Assets as of January 31, 2017 was \$7,702,704.	
Productivity	During January 2017, there were 6,934 visits compared to a projected 6,658 or 4% over budget. Total visits for the year has a variance of 470 or 7% over compared to last year.	
Budget	Total adjusted revenue for the year is \$182,802 under budget or 12%; patient revenue net is \$86,295 or 9% under budget. Total expenses for the year is \$178,828 under budget or 11%.	
Cash Flow	For the month, there was a deficit of \$236,000 (cash receipts minus cash disbursements). Year-to-date, there was a deficit of \$236,000.	
Auditors	Paul stated our financial audit will be conducted by Gilbert Vasquez & Associates, April 17 <sup>th</sup> – April 28 <sup>th</sup> .	
<b>ACTION ITEMS</b>		
Board Resolution for Committee Charter for 403 B Plan	This item was tabled until the Finance Committee has a chance to review and assign members to this new committee.	
Approval of the Board Resolution for California Department of Public Health	Resolution for South Central Family Health Center to submit an Application for Licensing and Certification of the Cudahy Family Health Center, 7910 Atlantic Avenue, Suite M, Cudahy 90201 to the California Department of Health Services. Alexis stated this document has to be included with the application she is working on for licensing and	<b>MOTION</b> by Dr. Leatherwood that we approve the Resolution for staff to submit an application for clinic

	certification of the Cudahy clinic and it will be mailed to the CA Department of Health Services.	licensing to the CA Department of Health Services. Second by Jan. The motion was passed unanimously.
Approval of the CY 2017 Federal Poverty Guidelines – Sliding-Fee-Scale	Paul stated the 2017 Federal Poverty Guidelines by Family Size and Monthly Income – Sliding-Fee-Scale has been revised and includes a definition of a “nominal fee” for self-pay patients. The Finance Committee is recommending that it be approved.	<b>MOTION</b> by Jan to approve the revised Sliding-Fee-Scale. Second by Dr. Leatherwood. The motion was passed unanimously.
Approval to use SCFHC’s Line of Credit to purchase Furniture & Equipment for the new Vernon Building up to \$250,000	Paul stated the Finance Committee discussed using a portion of the line of credit to purchase furniture and equipment for the new Vernon Building – up to \$250,000 and is recommending that the board approve.	<b>MOTION</b> by Martha that we approve the use of the credit line to purchase furniture and equipment for the Vernon Building. Second by Elmer. The motion passed unanimously.
Approval of the Human Resources Addendum on Advance Notice & Medical Certification (Sick Time)	There was some lengthy discussion regarding revising the Addendum for Advance Notice & Medical Certification. It was agreed that the revised policy provided by Human Resources be approved.	<b>MOTION</b> by Jan that the board approve the revised addendum/policy for Advance Notice & Medical Certification effective February 1, 2017. Second by Rosie Rios. The motion passed unanimously.
Approval of the new Policy for Mammography Consumer Complaint Guidelines	Dr. Perez stated the Medical Committee reviewed the new Policy for Mammography Consumer Complaint Guidelines and is recommending that the Board approve.	<b>MOTION</b> by Dr. Leatherwood that we approve the new policy for Mammography Consumer Complaint. Second by Rosie Rios.

		The motion passed unanimously.
Approval of Temporary Privileging for Josephine Dorrromeo, NP	Dr. Perez stated the Medical Committee reviewed the temporary privileging for Josephine Dorrromeo, NP and is recommending that the Board approve.	MOTION by Dr. Leatherwood that we approve the temporary privileging for Josephine Dorrromeo, NP. Second by Amir. The motion passed unanimously.
Approval of Board Minutes for January 2017	The Board reviewed the Board of Director Meeting minutes for January 2017 and is recommending that they be approved.	MOTION by Amir that we approve and accept the January 2017 Board Meeting Minutes. Second by Dr. Leatherwood. The motion passed unanimously.
<b>CHAIRS REPORT</b> Fernando Almodovar		
March Board Meeting	Fernando stated the next Board Meeting will be held on March 21, 2017 – since staff will be attending the NACHC conference in Washington, D.C.	
HRSA Site Visit Report	Fernando is happy to report that our Board is now in compliance with the required 51% consumer members. He encouraged both Board and Staff to recruit more members to the Board.	
Policy Information Notice from HRSA (PIN) 2014-01 Governance Section	Alexis provided the Board of Directors with a copy of the PIN from HRSA – Governance Section. Fernando encouraged the Board to read.	
Grand Opening of new Vernon Medical Building	David stated the Development Committee discussed that the Grand Opening event for the new Vernon Medical Building will be held on June 8 <sup>th</sup> or June 15 <sup>th</sup> .	
Gala	David stated the Development Committee discussed having a Gala the 3 <sup>rd</sup> Quarter of 2017. The date is still to be determined. David stated we will be hiring an Event Coordinator to assist us.	
Adjourn	There being no further business, the meeting was adjourned.	

Minutes prepared by: Alexis Menzies

Approved by: \_\_\_\_\_