

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

May 21, 2025
12:00 pm – 2:00 pm
2101 Courage Drive, Fairfield, CA 94533
Room Location: Multi-Purpose Room

AGENDA

1) CALL TO ORDER – 12:00 PM

- a) Welcome
- b) Roll Call

2) APPROVAL OF THE MAY 21, 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 April 16, 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 | NO |
| d) Grievances/Compliments – Pierce Leavell | 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 Weissenfels | YES |
| i) QI Update – Dona Weissenfels | YES |
| 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.
- a) Request educational session on the budgeting and financial process for the clinics
- 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 FY25/26 Budget Proposal – Nina Delmendo
 - i) **ACTION ITEM:** The Board will consider approval of the FY25/26 Budget Proposal
 - b) Review and consider approval of the Monthly Quality Improvement Report
 - i) **ACTION ITEM:** The Board will consider approval of the Monthly Quality Improvement Report
- 9) DISCUSSION**
- a) CEO Evaluation
 - b) Strategic Planning Session
- 10) BOARD MEMBER COMMENTS**
- 11) ADJOURN: TO THE COMMUNITY HEALTHCARE BOARD MEETING OF:**
- DATE: June 18, 2025
 - TIME: 12:00 pm – 2:00 pm
 - LOCATION: Multi-Purpose Room
2201 Courage Drive
Fairfield, CA 94533



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REGULAR GOVERNING BOARD MEETING MINUTES

Wednesday, April 16, 2025
In Person Meeting

Members Present:

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

Members Absent: Rovina Jones, Anthony Lofton, Don O' Conner, and Sandra Whaley.

Staff Present: Cherry Violanda, Cynthia Coutee, Dona Weissenfels, Dr. Cameron Kaiser, Dr. Michele Leary, Emery Cowan, Han Yoon, Kelly Welsh, Krista McBride, Nina Delmendo, Noelle Soto, Pierce Leavell, Whitney Hunter, Danielle Seguerre-Seymour, and Katreena Dotson.

1) Call to Order – 12:08 PM

- a) Welcome
- b) Roll Call

2) Approval of the April 16, 2025, Agenda

Discussion: None.

Motion: To approve the April 16, 2025, Agenda.

Motion by: Brandon Wirth and seconded by Deborah Hillman.

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

Nays: None.

Abstain: None.

Motion Carried.

3) Public Comment

- No public comments.

Regular Calendar

4) Approval of Minutes

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

Discussion: Annabelle Sanchez mentioned that her comment on page 4 of the March 19, 2025 CHB Meeting Minutes was incorrect. Under the OCHIN EPIC Update(s) Report, she asked if



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patient scheduling was generating appointments, however, the Minutes stated, “generating revenue”. Tracee Stacy requested clarification for what Annabelle was asking during the March 19th CHB Meeting, asking if her intent was to inquire about Epic generating more capacity to see more patients. Tracee added that it is not a system capacity issue, but that the human capacity was a barrier to seeing more patients. Dona Weissenfels stated that both were contributing factors. Brandon Wirth asked if the Minutes were created using the recording. Danielle Seguerre-Seymour confirmed that the recordings are used to draft the Meeting Minutes, but individual statements are not written verbatim. He then asked if the wording could be corrected using actual verbal recording. Danielle explained that the recordings are transcribed, but do not pick up word-for-word. Kelly Welsh commented that the Meeting Minutes can be corrected if conversations were misheard by the Clerk. Mike Brown asked Danielle to confirm Annabelle’s intent in the March 19, 2025 Meeting Minutes. Danielle summarized that Annabelle was inquiring about the capacity to generate more appointments, not revenue. Annabelle agreed and added that the transition to Epic was to improve the scheduling.

Motion: To approve the April 19, 2024, draft meeting minutes.

Motion by: Marbeya Ellis and seconded by Annabelle Sanchez.

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

Nays: None.

Abstain: None.

Motion Carried.

5) Clinic Operations Reports

a) **Staffing Update** — Danielle Seguerre-Seymour (*Please reference the “FHS Staffing Update – April 16, 2025”*)

- Danielle Seguerre-Seymour reported that two Registered Nurses (RN) were close to finishing their background and the Dental Assistant’s background was completed, start date to be determined. She mentioned that a Physician Assistant started earlier that month, while four Medical Assistants were starting on April 28th for Chiropractic, Call Center and direct patient care. Danielle stated that two part-time Licensed Marriage & Family Therapists (LMFTs) were working between Family Health Services (FHS) and Behavioral Health (BH); two Chiropractors started services in the clinics; as well as a Nutritionist from Public Health (PH) who would be working in FHS soon. Lastly, Danielle reported that the Health Service Clinic Manager, Senior (HSCM Sr.) interviews were still ongoing and two Nurse Practitioners and three Physician Assistants candidates from UHC Solutions were in the early hiring stages. Dr. Michele Leary added that interviews and tours were taking place and offers were extended. Dona Weissenfels informed that Board that two PH employees were assisting the front office in the Fairfield Adult



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Clinic with registration. She also mentioned that there were four (4) top HSCM Sr. candidates that would be interviewed in May, then a selection will be made.

- b) **Credentialing Update** – Cherry Violanda (*Please reference the “FHS Credentialing, Provider Enrollment and Sanctioning Screening Status Report – April 2025”*)
- Cherry stated that 141 candidates and employees were screened for the month of April. She acknowledged that March’s report was pending Sanction Screening Exclusions. She reported that no exclusions were found.
 - Mike Brown asked what kind of problems the Credentialing Team experiences when interviewing individuals. Cherry confirmed that the screening does not include interviewing the candidates/employees, rather collecting and reviewing documentation required for credentialing and re-credentialing. She added that a spreadsheet is utilized to track the progress, since there is no formal system in place.
- c) **HRSA Grant Update(s)** – (*Please reference the “Health Resources and Services Administration (HRSA) Grant Updates – April 16, 2025”*)
- The HRSA Grant Updates Report stated that Phase 1 and 2 for the 2024 Ryan White Services Report (RSR) was completed. Data summary would be presented to the Board when the RSR is accepted by HRSA.
 - The 2024 Uniform Data System (UDS) Phase 1 and 2 were also completed and will be presented when it is accepted by HRSA. Nina Delmendo had nothing more to report.
- d) **Grievances/Compliments** – Pierce Leavell (*Please reference the “Grievance Reports, April-December 2023; January– December 2024 and January-March 2025” and “Grievance Category Definitions”*)
- Pierce informed the Board that 3 grievances were filed in March.
 - There were no questions from the Board.
- e) **H&SS Compliance** – Krista McBride (*“Department of Health & Social Services-Administration Division: Compliance & Quality Assurance-CHB Incident Report Update-March 2025”*)
- Krista mentioned that one incident was reported by Medical Services, under the Safety/Workforce category, citing possible Tuberculosis (TB) exposure. She added that the matter was referred to the FHS Leadership Team and had since been resolved.
 - Brandon Wirth commented that he was unaware that possible TB exposure is a reportable incident. Dr. Cameron Kaiser stated that reporting possible exposure for compliance purposes, would be considered unusual. Tracee Stacy inquired about regular TB testing. Dr. Kaiser confirmed that employees are required to test for TB, while patients are not tested preventively. Tracee asked about the risk of exposure while waiting for the results of another. Dr. Kaiser stated that there are two forms of TB: Active Tuberculosis, that can spread, and Latent Tuberculosis is an early form where bacteria is present but not contagious, so testing is determined by who is involved. Brandon and Tracee clarified that as external agencies, they are not asking for the incident details, but want to have a better understanding and follow protocol. Dr. Kaiser reported that Solano County is considered slightly above average in the State last year, having 20 to 30 active cases.
- f) **Finance & Revenue Cycle Management** – Whitney Hunter (*Please reference the Operations Report – Finance March 2025: “Solano County Expenditure and Revenue Report FHS – March 2025” and “Solano County FHS Revenue Cycle Report – Total Encounters – Through March 31, 2025”*)



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Finance Report

- Tracee Stacy asked if the increase in the “Professional Licenses & Memberships” category was due to hiring or related to Epic. Nina Delmendo explained that the Working Budget started with close to \$28,000, but during the Mid-Year Budget review, fiscal projected a lower amount, so actuals resulted in appropriations.

Revenue Cycle Report

- Whitney Hunter reported that the increase in encounters was due to better efficiency in OCHIN Epic. Overall, she stated that encounters improved more recently versus pre-Epic, adding that the locums were also a contributing factor.
- Brandon Wirth praised FHS for being busy and increasing the encounters. Tracee inquired about reimbursements and how it is affecting Epic. Nina could not attest to issues with cash flow but explained that FHS receives capitation payments from Partnership Healthplan (PHC), payer revenues, as well as Medi-Cal reimbursements. Tracee asked about next years proposed budget and Nina explained that the budget was not finalized but expects to present it in May or June.
- Tracee also mentioned holding a special CHB meeting to review and ask questions about the budget. Nina acknowledged the request and would be willing to have a separate meeting for the Board and stated that holding it last Fall was not viable due to the Epic transition. She also informed them that the County wants to work with FHS to meet the needs and create a realistic budget but is cautious due to the state of the economy and the unknowns of the federal funding. Ruth Forney stated that budget workshops were held in the past to allow the Board to review the information and have a better understanding of the financial aspect. As a newer Board Member, Marbeya Ellis commented that she was unaware of the Board’s role and influence with the process. Kelly Welsh referenced the Co-Applicant Agreement and the outlined duties between the County and Board. She encouraged the Board Members to ask questions during the scheduled CHB Meetings. Tracee clarified that she is requesting to meet and be educated on their roles for the future, not to change what is current. Mike Brown agreed to the separate meeting and inquired about upcoming Fall. Nina reminded the Board that the presented budgets include expenses like staffing, services and supplies are based on the needs of the clinic. While some factors are out of the County’s control, is typically straightforward and if the Board requests additional funding for the clinic, it will be considered.
- Emery Cowan acknowledged and addressed the Board Members comments and concerns regarding the budget. She suggested allocating time during the May 16, 2025 CHB Meeting, to discuss further, so there are no surprises when the budget is presented in June.
- Brandon referred to The Bylaws of the County of Solano Community Healthcare Board, Article 2: Responsibilities, bullet point 4 “Monitoring the financial Status of the health center, including reviewing financial status reports and results of the annual audit, and recommending that appropriate follow actions are taken”, as well as The FQHC Co-Applicant Agreement, Page 2, D: Approval of the Annual Budgets and Audits “The BOARD shall approve the Health Center’s annual operating and capital budget and audits, subject to the limitations herein”. He explained that the Board has a right to be involved in the process, to have a voice and document a process during the phases of the budget and before it is presented to the Board of Supervisors. Kelly referenced Page 7, 3.1: “Budget Development and Approval”, explaining that the Board has the authority to approve the annual operating and capital budgets, but within the parameters of what the County is providing them, in the budget. Tracee asked what happens if the Board does not approve the budget. Kelly stated that there would be a Dispute Resolution. Tracee and Brandon emphasized that the Board wants a voice and to be able to work with the County on a



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process of determining financial priorities through discussion. Nina confirmed that Dona communicates Board priorities and goals to fiscal and are those priorities are considered. She also stated that the budget process moves quickly, so it is best to hold a budget workshop in the Fall.

- Ruth mentioned that there have been a few new Board Members that have not participated in a budget workshop, but stated that when the workshop was held, it was not widely attended by Board Members. Nina advised the Board that fiscal methodologies and updates will be shared at the May 16, 2025 Meeting.
- g) **Referrals Report** — Cynthia Coutee (*Please reference the “Family Health Services Referrals – Time Period March 2025”*)
- Cynthia reported that 1,260 referrals were submitted in March, that included 1045 for Adult, 215 for Pediatric, as well as 606 specialty referrals. As of April 8th, there were 1,191 referrals in que and 4,561 referral pending Consultation Notes. Cynthia added that referrals are being processed 22 days out and 587 referrals were completed over three Saturdays, with three referral workgroups. She mentioned that one referral Medical Assistant returned from maternity leave and is contributing to the referral processing efforts.
 - There were no questions from the Board.
- h) **OCHIN EPIC Update(s)** — Dona Weissenfels
- Dona reported that she attended the OCHIN Member Learning Forum, a three-day virtual conference. The community of OCHIN Users attending the event discussed how AI is improving the industry. She explained that OCHIN negotiated Dax Co-Pilot (medical AI transcribing and recording) and lowered the licensing price by half. Dona explained that the pricing will be more affordable and will lower FHS budget costs.
 - Dona mentioned that the clinics will be implementing Dax Co-Pilot soon but tested the software and noted that it drastically made visits more efficient, resulting in provider satisfaction and staff retention. She also stated that the current app and desktop management system, Citrix, will soon transition to another platform, with the assistance of DoIT.
 - Dona informed the Board that FHS is currently in the maintenance phase of OCHIN Epic, while still learning about the system. She explained that providers have inboxes that hold a vast amount of patient information such as labs, referrals, consult notes and external data. There is a disadvantage of managing the boxes, but Epic will be utilizing AI tools to help with time management.
 - Annabelle Sanchez asked if the Epic system was helping with the clinic measures. Dona confirmed that Dr. Michele Leary is heading a project in Epic to flag a patient’s record if a screening is due, so that MA’s do not have to dig for the information. She added that the metrics and scores will be captured in the system.
- i) **QI Update** – Han Yoon (*Please reference the “2025 Modified QIP”*)
- Han reminded the Board that FHS was placed on a Corrective Action Plan (CAP) by PHC as a result from the low 2024 quality scores. He referred to the graphs in the “2025 Modified QIP” report that focused on the four PHC-assigned measures: Cervical Cancer Screening, Breast Cancer Screening, Well Child (6x 15 Months), and Annual Well Child Visits (3-17), and stated that the data was as of April 1st.
 - Tracee Stacy asked for clarification on the report graphs. Han explained that each measure has a graph with a Target Line, Achieved Line and Target with No-Shows Line, as well as the actuals from January to March. Han stated that the numbers/goal changes every month, as PHC adds



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and/or removes patients. Deborah Hillman asked if 730 represented the number of patients, which Katreena Dotson confirmed, but followed up by stating that the number was over a three-year period, not over a month's time.

- Annabelle Sanchez requested for the report to show a denominator with the numerator. Dona Weissenfels reminded that Board that the goals change each month, but Han would provide the adjustment. Tracee asked if the goals were created after the meeting with PHC on March 19, 2025. Han and Dona Weissenfels confirmed, adding that the numbers to meet are the same, but narrowed it to the four measures referenced in the report. Dona mentioned that PHC has been supportive and had provided resources to help meet the goals.
- Han reported that patient scheduling had been double, and triple booked to account for the high no-show rate. The QA/QI Team was also reviewing records of scheduled patients, for other screening opportunities. Dona explained that since the Breast Cancer Screening measure requires FHS to refer its patients to Northbay, Sutter and Alinea Mobile for their mammograms, promotion and communication by FHS is important. Han informed that board that Alinea will be providing services in Fairfield on June 2nd and in Vacaville on June 6th. He will also be looking into Sutter for the mobile services.
- Mike Brown asked about tracking patient appointments and attendance. Dona stated that the Referral Team is responsible for following up and closing the loop, while it is the QA/QI Team's job to make sure patients are attending their appointments. Deborah Hillman asked if assigning an employee to follow up for the screenings would help the process. Dona reported that she created "Project Champion" roles within the QA/QI Team, and each employee is solely responsible for one of the measures, strategizing and overseeing the progress. Ruth Forney asked if Epic's technology helps with patient outreach. Dona stated that the Patient Portal is in place for communication, however, only 17% of patients are enrolled. She added that FHS is utilizing Artera for automated calling with appointment reminders, updates and outstanding screening reminders. Dona reported that Katreena Dotson also assists with patient outreach and scheduling.
- Annabelle asked how the appointment is counted towards the measure. Han explained that the patient must attend the appointment (creating an encounter) for it to count towards the goal.
- Tracee inquired about how PHC calculates the goal and if the measure is obtainable. Dona confirmed that the measures are determined by The National Committee for Quality Assurance (NCQA).
- Han reported on the well child visits measure and Dr. Leary explained that it is a hard measure to meet because kids who are on Medi-Cal do not always stay with one doctor during their 13-month period. She stated that the best chances to be successful is to begin care when they are newborns.
- Mike inquired about the immunization measure and Tracee asked about the consequences if the goal is not met. Dona and Dr. Leary clarified that immunizations are still a QA/QI initiative but was not part of the currently alternative QIP program. Dona added that PHC can end FHS' contract as a result of not meeting the measures.
- Han reviewed the adolescence measure and initially reported that there were 7,500+ patients with 739 patients added to the metrics but clarified that 4,300 was the patient denominator. Charla Griffith asked if FHS has the capacity to meet the goal. Dona informed the Board that FHS will be diligent and take initiatives by implementing Saturday Clinic for the next few months and partnering with Public Health but will likely not meet the goal. Marbeya Ellis mentioned that as a school district employee, she attested that families are facing barriers and challenges of getting



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appointments for students and offered to collaborate with FHS to close the gap. Annabelle asked if those children are being referred to other County outreach programs in PH. Marbeya confirmed that the school district resource center partners with PH, but families who are unhoused tend to miss their appointments. She stated that it is more efficient to offer a multitude of services at the resource center. Tracee inquired about PHC assigning the more difficult measures. Dona reported that there is a formula that PHC uses to calculate the measures and goals. She could not provide additional information but mentioned that it's part of FHS' contact and the expectation is a 15% improvement rate requirement.

- j) **FHS Clinic Q-Matic Stats** — Noelle Soto – (Please reference the “Clinic Metrics – Queue Management (Q-Matic) Stats – April 16, 2025”)
- Noelle Soto referred to 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 asked if the revised format of the H&SS Compliance report meet the Board's requirements. Brandon Wirth agreed that the report was adequate.

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 announced that PHC was wrapping up with clinic and medical records audits, most recently in Fairfield. She acknowledged Pierce for leading the staff in prepping the Pediatric and Adult clinics for the site visits. She explained that since the transition from NextGen to Epic occurred in 2024, PHC will be reviewing both systems' records.
- Dona recapped her participation in the OCHIN Epic conference, expressing the positive impact the AI component will be in Epic.
- Dona reported that the Vacaville Chamber of Commerce has a community leadership program and invited her and Cynthia Coutee to attend, for a second year. They discussed FHS as a Federally Qualified Health Center (FQHC), the patient population they serve and the role that the clinics have in Solano County. Dona mentioned that 15 other members were from Kaiser.
- Dona also announced that Mallory from Facktor Health has joined FHS through the end of June 2025 to assist with patient scheduling. Since her arrival, schedules have improved and are at 1.7 visits per hour. Dona expects to see scheduling improvements at all sites and thanked Dr. Michele Leary and her Team.
- Dona informed the Board that four (4) Health Services Clinic Manager Senior candidates would be meeting with Chief Deputy Health Officer, Dr. Bela Matyas, and Deputy Health Officer, Dr. Cameron Kaiser on May 8th and hopes to have a candidate selected at that time. She praised Cynthia for acting as interim HSCM Senior, while overseeing the Vacaville Clinic. Dona also reported that Patricia Zuniga's position request has not been approved but will be reclassified as an Office Assistant III position.



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- Dona added that the last priority was assembling the Quality Team and focus on the PHC-assigned measures.
- Dona mentioned that the Strategic Plan has been continuously discussed, providing status updates and requesting revisions, as needed. She reported that goals established by the Board are advocated and brought to the County. Dona requested that a separate meeting be held to review and refresh the Strategic Plan, ensuring that the Board Members are part of the process.
- Annabelle Sanchez inquired about the triggering event and asked if a utilization percentage is required. Nina Delmendo confirmed that it was, explaining that there are productivity standards by provider level, determined by the California Department of Health Care Services (DHCS). She did clarify that Chiropractors and LMFT's are not subject to the standards, while physicians, physician assistants and nurse practitioners are, but it is included in the calculations.

External News:

- Dona informed that Board that FHS is working on a budget resolution, while staying current on federal funding updates and information regarding Medi-Cal cuts. She stated that FHS has internal strategies like adding chiropractic and LMFT services in the clinics, as well as pursuing a rate change through HRSA. Dona stated that Fiscal will be completing the 1000+ page application and will work with Wipfli to facilitate and submit this Fall. FHS should have an update by Spring of 2026. She also mentioned the Alternative Payment Method (APM) is still an option but coincides with having a rate change. Tracee Stacy asked if the rate change would be retroactive. Nina confirmed that once the application is approved, it will be effective from the application submission date.

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: None.

Motion: To accept and the approve the Quarterly Financial Report.

Motion by: Tracee Stacy and seconded by Ruth Forney.

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

Nays: None.

Abstain: None.

Motion carried.



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b) Review and consider approval of the Monthly Quality Improvement Report – Han Yoon

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

Discussion: None.

Motion: To accept and the approve the Monthly Quality Improvement Report.

Motion by: Ruth Forney and seconded by Brandon Wirth.

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

Nays: None.

Abstain: None.

Motion carried.

c) CHB Executive Committee update – Board Membership Bylaws review

Discussion: Mike Brown referred to Article IV: Members of the Bylaws. He mentioned that the article review was to address Board Members who have missed several meetings. Tracee clarified that the Board would discuss what steps to take to remove Anthony Lofton as a Board Member. She announced that she ran into him and inquired about remaining on the Board but did not get a confirmed response. Ruth Forney mentioned that she had not seen Etta Cooper in the last few meetings and Don O’Conner had also missed meetings. She asked if anyone has attempted contact with Don. Etta explained that she had been communicating with Danielle Seguerre-Seymour. Danielle confirmed communication with Don, stating that, due to his health, he can no longer sit through the CHB meetings. Ruth announced that the Board is required to be 51% Patient Board Members. Mike informed the Board that a letter will be drafted and sent out to Anthony and Don’s last known address. Deborah asked how many Board Members need to be patients. Danielle confirmed that Etta Cooper, Charla Griffith, Gerald Hase, Deborah Hillman, Rovina Jones, Seema Mirza, Anthony Lofton, and Don O’ Conner are classified as Consumer Members. Brandon Wirth stated that it will need to be added to next meeting’s agenda as an Action Item.

9) Discussion

- a) Collection of completed Project Officer/CEO evaluations
 - Mike Brown reminded the Board to submit their completed evaluations.
- b) CHB Self-Assessment Form review
 - Mike reminded the Board to submit their completed forms.
- c) Board Training Webinar Purchase update – Dona Weissenfels



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- Dona reported that the deadline for purchasing had already passed but will provide an update in a couple of months.
- d) NACHC Conference – Chicago, IL
 - Tracee Stacy informed Ruth Forney that there is no funding available to expense the trip. Nina Delmendo asked when the conference was, and Dona confirmed that it would be held in August. Nina stated that it would be under the 25/26 budget.

10) Board Member Comments

- Etta Cooper apologized for her absence, explaining that she was displaced and living in her car but reported that she recently found housing. Mike Brown asked if she used County resources to find her apartment. Etta confirmed that a friend informed her of a new apartment complex.
- Tracee Stacy referenced the flyer that was provided at the meeting, announcing that the Generations of Strength event would be held on May 14, 2025 and encouraged people to attend. Etta mentioned the Hope event in Fairfield.
- Mike informed the Board that a patient could not get help at Sutter and Kaiser, so the Vallejo FHS clinic was recommended. Deborah Hillman praised the FHS clinics. Annabelle added that she will continue to advocate for the clinics and be involved in the process.

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

DATE: May 21, 2025
TIME: 12:00 PM — 2:00 PM
Location: Multi-Purpose Room
2101 Courage Drive
Fairfield, CA 94533

The Meeting was adjourned at 2:05 PM.



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Handouts in the Agenda Packet:

- CHB April 16, 2025 Meeting Agenda
- CHB March 19, 2025, draft meeting minutes
- Clinic Operations Report – FHS Staffing Update – April 16, 2025
- Clinic Operations Report – FHS Credentialing, Provider Enrollment and Sanctioning Screening Status Report – April 2025
- Clinic Operations Report – Health Resources and Services Administration (HRSA) Grant Updates – April 16, 2025
- Clinic Operations Report – Grievance Reports, April-December 2023, January–December 2024 & January-March 2025
- Clinic Operations Report – Grievance Category Definitions
- Clinic Operations Report – Department of Health & Social Services-Administration Division: Compliance & Quality Assurance-CHB Incident Report Update-March 2025
- Clinic Operations Report – Finance March 2025 – Solano County Expenditure and Revenue Report FHS
- Clinic Operations Report – Revenue Cycle Report – March 2025 – Solano County Family Health Services Revenue Cycle Report – Total Encounters Through March 31, 2025
- Clinic Operations Report – Family Health Services Referrals – Time Period March 2025
- Clinic Operations Report – 2025 Modified QIP
- Clinic Operations Report – Clinic Metrics – Queue Management (Q-Matic) Stats – April 16, 2025
- Flyer – Generations of Strength – Embracing BIPOC Diversity in Mental Health Summit

Community Healthcare Board

5) Clinic Operations Reports:

a) Staffing Update

Community Health Care Board

Family Health Services Staffing Update

CHB Meeting Date: May 21, 2025

Number of Active Candidates - County
*Clinic Physician (Board Certified) - 1 *Clinic Registered Nurse - 1 *Nurse Practitioner - 2 *Physician Assistant - 6

Number of Active Candidates - Touro
*Physician Assistant

Number of Active Candidates - Contractor
*Quest Phlebotomist - 1

Number of Active Candidates - Volunteer
No Active Candidates

Open County Vacancies
Clinic Physician (Board Cert) - 1 Clinic Physician (Board Cert) Extra Help - 1 Clinic Physician Supervisor - 1 Clinic Registered Nurse - 2 Dentist - 2 Health Education Specialist Extra Help - 2 Health Services Manager, Senior - 1 Medical Assistant - 2 Mental Health Clinician - 1 Nurse Practitioner/Physician Assistant - 3 Nurse Practitioner/Physician Assistant Extra Help - 1 Office Assistant II Extra Help - 3 Office Supervisor - 1

Interviews in Progress
Health Services Clinic Manager, Senior - May 8, 2025 Dentist - May 14, 2025 Office Supervisor - May 27, 2025 Medical Assistant - TBD Clinic Registered Nurse - TBD

Expected New Hires + Recently Hired Staff
Clinic Registered Nurse - Start Date: 05/27/2025 Dental Assistant (Reg) - Start Date: 05/12/2025 Nutritionist - Start Date: 05/12/2025

Vacancies/Departures
H&SS Planning Analyst - Eff 04/24/2025 Health Education Specialist - Eff 05/07/2025

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5) Clinic Operations Reports:

b) Credentialing Update

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

Sanction Screening

April	Sanction Screening Number Screened	Sanction Screening Exclusions Found
TOURO/FHS LOCUMS	21	0
H&SS FHS County Employees	122	0
TOTALS:	143	0

Credentialing: 8 Re-Credentialing: 4

April	Number of Active Credentialing & Re-Credentialing (classification: #)	Partnership Provider Enrollment Numbers
TOURO	0	Submitted to Partnership: Approved by Partnership: Pending Submission to Partnership:
FHS LOCUM	Nurse Practitioner: 1	Submitted to Partnership: 1 Approved by Partnership: 2 Pending Submission to Partnership: 0
H&SS FHS County Employees & Candidates	Clinic Registered Nurse: 2 Registered Dental Assistant: 1 Medical Assistant: 4 Lactation Educator & Counselor: 1 Nurse Practitioner – 1 Physician Assistant - 1 Clinic Physician - 1	Submitted to Partnership: 0 Approved by Partnership: 0 Pending Submission to Partnership: 2

Enrollments, Re-Credentialing, & Re-Validations

Partnership – NEW Provider Enrollments Totals

Pending Submission: 2 (NP & PA - County)

Submitted: 1

Pending Approval: 7

Approved: 2

Partnership – Provider Re-Credentialing Totals

Pending Submission: 0

Submitted: 0

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)

NO REPORT

Community Healthcare Board

5) Clinic Operations Reports:

d) Grievances/Compliments

GRIEVANCE REPORT 2023

- Quality of Care
- Referrals
- Privacy
- Access to Care
- Safety
- Scheduling
- Other



GRIEVANCE REPORT 2024

- Quality of Care
- Referrals
- Privacy
- Access to Care
- Safety
- Scheduling
- Other



GRIEVANCE REPORT 2025

- Quality of Care
- Referrals
- Privacy
- Access to Care
- Safety
- Scheduling
- Other



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

Community Healthcare Board

5) Clinic Operations Reports:

e) H&SS Compliance



To: Solano County Community Healthcare Board
From: Krista McBride, Compliance & QA Analyst
Date: May 7, 2025
Subject: CHB Incident Report Update [April 2025]

Incident Report Update April 1 – April 30, 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 incident reports.

0 Incident reported in April 2025:

From April 1 through April 30, zero (0) incident reports were received through the incident reporting program. These incident reports would be referred for review, follow up, training opportunities or process improvement. During April 2025, there were zero (0) reports received for incidents. There were zero (0) privacy, security or breach reports.

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

Community Healthcare Board

5) Clinic Operations Reports:

f) Finance & Revenue Cycle Management

OPERATIONS REPORT - FINANCE

APRIL 2025

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

CATEGORY DESCRIPTION	FY2024/25 WORKING BUDGET	FY2024/25 MID YEAR BUDGET	FY2024/25 YTD ACTUALS THROUGH APR 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	9,303,683	75%	
Salaries - Extra Help	17,000	53,540	32,850	61%	
Salaries - OT/Callback/Standby	69,874	120,622	121,483	101%	
Staffing costs from other divisions (net amount)	133,070	126,160	73,936	59%	
Benefits	10,561,338	7,067,056	5,737,581	81%	
Accrued Leave CTO Payoff	20,000	115,448	119,005	103%	
Salary Savings	(2,789,326)	-	-	#DIV/0!	
Salaries & Benefits Total	24,318,035	19,861,628	15,388,537	77.48%	

Services & Supplies

Office Expense and Supplies	172,363	75,058	65,919	88%	Drinking water, household expenses, and trash services.
Communications	138,331	149,715	119,731	80%	
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	37,620	82%	Q-Matic. BioRad. Caltronics. Steris.Life Technologies. Smile Business. Multi Function Devices Copiers/Printers.
Mileage, Fuel and Fleet	45,503	37,800	28,998	77%	Monthly charges for vehicles assigned to County Departments; personal mileage.

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

CATEGORY DESCRIPTION	FY2024/25 WORKING BUDGET	FY2024/25 MID YEAR BUDGET	FY2024/25 YTD ACTUALS THROUGH APR 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	150,188	80%	PG&E & water services.
Drugs, Pharmaceuticals, Medical and Dental Supplies	623,605	598,145	486,229	81%	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	76,874	65%	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	268,196	40%	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	1,695,054	71%	
Software & Maintenance or Support	690,031	954,932	713,912	75%	Budget includes the following: >Next Gen >OCHIN >Orchard Software
Professional Licenses & Memberships	27,871	7,881	10,826	137%	
Education, Training, In-State Travel, Out of State Travel	25,290	1,873	1,873	100%	
Other	69,758	34,929	32,467	93%	>Uniform allowance >Fees & Permits (credit card processing, licensing and storage) >Livescans
Services & Supplies Total	6,657,298	6,377,760	4,198,394	66%	

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

CATEGORY DESCRIPTION	FY2024/25 WORKING BUDGET	FY2024/25 MID YEAR BUDGET	FY2024/25 YTD ACTUALS THROUGH APR 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	403,170	57%	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	57,522	63%	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)
Other Charges Total	792,229	804,949	460,691	57%	

Contracts/Client Support

Contracted Direct Services	1,492,000	2,805,468	1,550,184	55%	Budget includes the following contracts: >Barton & Associates (locum services) >Children's Choice (dental services) >Touro University (providers) >Chiropractic Integrative Partners
Client Support	22,700	23,398	17,417	74%	Client support transportation costs.
Contracts/Client Support Total	1,514,700	2,828,866	1,567,600	55%	

Equipment

Equipment	49,604	82,012	44,604	54%	
Equipment Total	49,604	82,012	44,604	54%	

Administration Costs

H&SS Administration	2,957,878	2,889,859	1,993,965	69%	
Countywide Administration	1,312,262	1,312,262	1,312,262	100%	
Administration Costs Total	4,270,140	4,202,121	3,306,227	79%	

TOTAL EXPENDITURES	37,602,006	34,157,336	24,966,053	73%	
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**SOLANO COUNTY
EXPENDITURE AND REVENUE REPORT
FAMILY HEALTH SERVICES
APRIL 2025**

CATEGORY DESCRIPTION	FY2024/25 WORKING BUDGET	FY2024/25 MID YEAR BUDGET	FY2024/25 YTD ACTUALS THROUGH APR 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	15,175,155	114%	Revenues from Medi-Cal, Partnership Capitation, Medicare and Private Pay <i>(Estimated payback not reflected - Final analysis is pending and will reduce total payer revenues)</i>
Payer Revenues Total	23,355,466	13,270,281	15,175,155	114%	

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	57,887	44%	Rollover for HRSA Capital Grant funds
Federal Grants	2,047,990	2,051,890	567,814	27.67%	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	463,033	40.06%	Budget primarily includes QIP revenues, but also includes patient care payment recoveries; QIP payment received in March
Program Revenues Total	6,486,006	6,536,309	1,822,659	28%	

TOTAL PAYER AND PROGRAM REVENUES	29,841,472	19,806,590	16,997,815	85.8%	
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TOTAL EXPENDITURES vs TOTAL REVENUES	Notations
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TOTAL EXPENDITURES	37,602,006	34,157,336	24,966,053	73%	Includes \$51,834 of expenditures from FY2023/24, but paid in FY2024/25.
TOTAL REVENUES	29,841,472	19,806,590	16,997,815	86%	
DEFICIT (SURPLUS)	7,760,534	14,350,746	7,968,238	56%	
County General Fund	4,708,209	4,708,209	3,531,157		
DEFICIT (SURPLUS) after CGF**	3,052,325	9,642,537	4,437,081		

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

CATEGORY DESCRIPTION	FY2024/25 WORKING BUDGET	FY2024/25 MID YEAR BUDGET	FY2024/25 YTD ACTUALS THROUGH APR 2025	Actuals as a % of MY Budget	
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***Deficit to be funded with 1991 Realignment and/or
County General Fund*

REVENUE CYCLE REPORT

APRIL 2025

**SOLANO COUNTY
FAMILY HEALTH SERVICES
REVENUE CYCLE REPORT
TOTAL ENCOUNTERS*
Through April 30, 2025**

	Annual Target	Monthly Target	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	TOTAL	YTD Target Apr 2025 10 mths	Over (Shorfall)
MEDICAL																	
County Providers	46,688	3,774	1,915	1,736	1,085	1,239	1,328	1,628	2,131	1,820	1,990	2,395			17,267	39,540	(22,273)
Touro	4,364	364	383	319	208	213	230	226	225	208	254	242			2,508	3,638	(1,130)
Locum	1,453	230	446	433	378	430	461	387	500	380	694	688			4,797	1,991	2,806
TOTAL MEDICAL	52,505	4,368	2,744	2,488	1,671	1,882	2,019	2,241	2,856	2,408	2,938	3,325	-	-	24,572	45,169	(20,597)
TOTAL MENTAL HEALTH	3,640	121	84	80	57	38	27	30	54	36	59	55			520	1,210	(690)
TOTAL DENTAL	19,900	1,547	1,321	1,223	1,035	910	916	1,140	1,297	1,124	1,241	1,326			11,533	16,151	(4,618)
TOTAL CHIROPRACTIC	-	-	-	-	-	-	-	-	-	-	-	100			100	-	100
	76,045	6,036	4,149	3,791	2,763	2,830	2,962	3,411	4,207	3,568	4,238	4,806	-	-	36,725	62,530	(25,805)

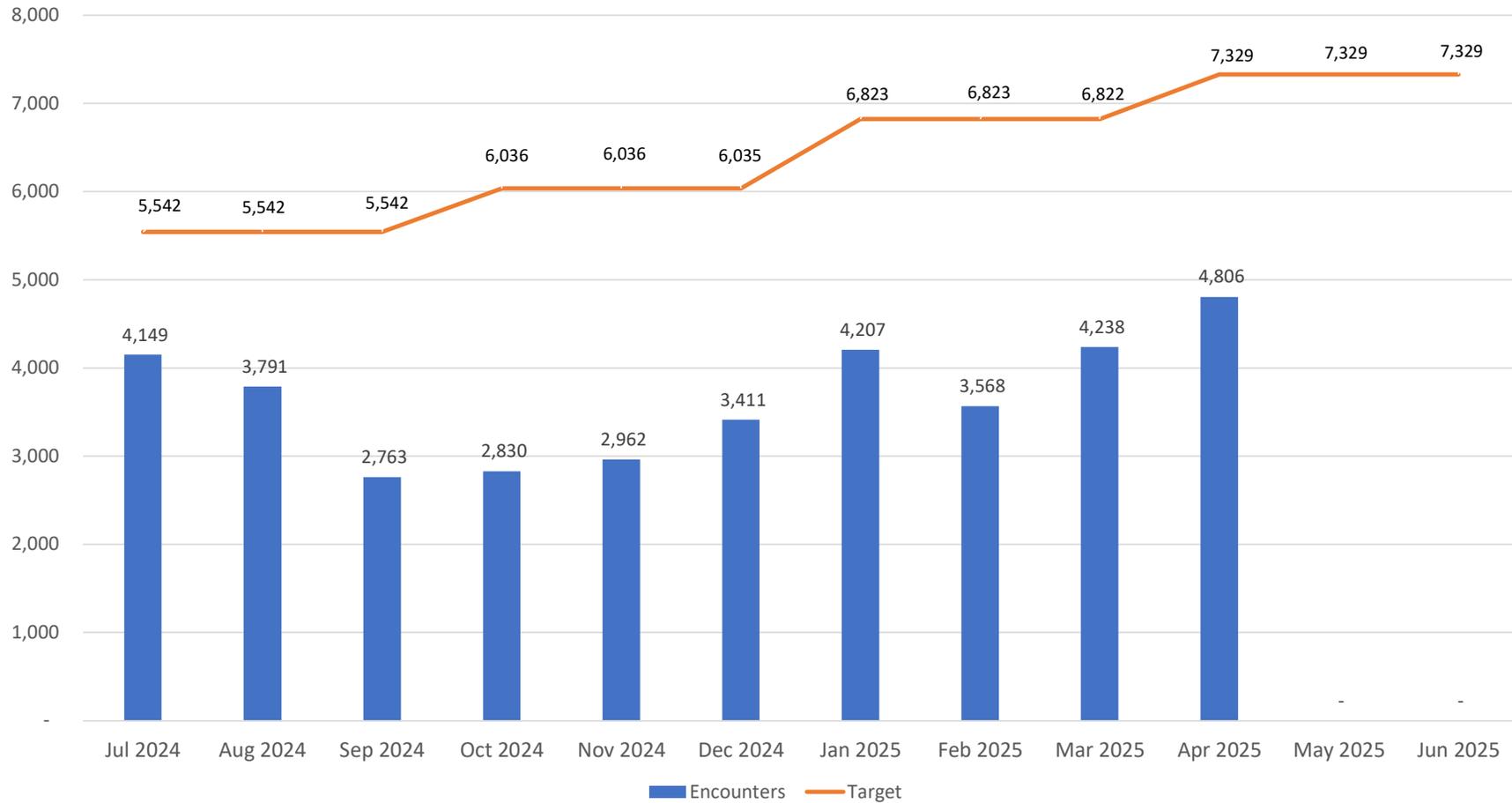
* Open encounters not included. Targets based on Adopted Budget.

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 April 2025

Referrals

Adult-1080 Pediatrics-254

Adult Specialty Referrals	Ordered	Peds Specialty Referrals	Ordered
Dermatology	83	Allergy Clinic	21
Gastroenterology	105	Dermatology	33
Gynecology	59	ENT (Ear, Nose, Throat)	13
Ophthalmology	162	Nutrition	26
Physical Therapy	77	Ophthalmology	27
Total to Specialties: 606			

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

The total number of new referrals in the Workque as of May 12th were **1,229 referrals**. Currently we are processing **over 1 month** out.

We continue to work on processing referrals, as quickly as possible. This month we have many referral team members out on paid time off, so we only worked a couple weekends during those time we processed 234 referrals over 2 Saturdays.

The referral team continues to work hard in meeting the demands. As always, our goal is to continue working 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)

DoIT & OCHIN Epic Update, May 2025

Presented: Dona Weissenfels

1. New MOU signed by FHS & DoIT outlining services and working relationship (May 2025 – May 2026)
2. Citrix will be sunset and we will switch over to Local Hyperspace (Pending)

DoIT recently met with OCHIN to go over the transition process and discuss potential risk factors. Our IT team is currently testing the process internally to ensure everything runs smoothly.

DoIT is prepared to take on this task and want to stay fully involved throughout the entire transition to understand all aspects of the change. DoIT will work closely with OCHIN and continuing our testing across different installation scenarios—including single-user setups, multi-user workstations, and kiosk environments.

3. Email transition to .gov project is to ensure a seamless transition of staff email addresses and logon IDs (referred to in technical terms as User Principal Names or UPNs) from the current domain, @solanocounty.com, to the updated and standardized domain, @solanocounty.gov.

The objective of this project is to enhance the county's branding, improve email security, and align with federal and state guidelines for government organizations. This transition will also help reduce confusion, ensure consistent communication with external partners, and support ongoing modernization efforts. (Ongoing transition)

Community Healthcare Board

5) Clinic Operations Reports:

i) Quality Improvement Update

Measure	QIP_Score	Numerator	Denominator	25th Threshold %	25th (Target/Achieved)	50th Threshold %	50th (Target/Achieved)	75th Threshold %	75th (Target/Achieved)	90th Threshold %	90th (Target/Achieved)
Child and Adolescent Well Care 2025	15.69 %	447	2849	NA	NA	NA	NA	58.07%	1655/447	64.74%	1845/447
Cervical Cancer Screening 2025	32.61 %	15	46	NA	NA	NA	NA	61.56%	29/15	67.46%	32/15
Well Child First 15 Months 2025	15.17 %	22	145	NA	NA	NA	NA	64.99%	95/22	69.67%	102/22



April 25, 2025

Solano County Family Health Services
Dona Weissenfels
2201 Courage Dr.
Fairfield, CA 94533

Dear Solano County Family Health Services,

In a review of provider organization's ability to address Partnership HealthPlan's access expectations, Partnership has found that the Solano County Family Health Services sites in Vallejo and Vacaville have not made necessary improvements to increase access and quality for pediatric members. These two locations have demonstrated very low rates of well-child visits, and notably in the last 12 months there have been several member grievances related to pediatric appointment availability. In addition, members are having difficulty when calling to make appointments; several have reported through Partnership's grievance process that they are not able to reach SCFHS staff via phone, and therefore not able to make an appointment for care in a timely manner.

Partnership leadership including Regional Medical Director, Chief Medical Officer, Chief Health Services Officer, Regional Director, and Quality Director, have engaged FHS leadership and staff to assist with quality improvement activities to help increase access. Despite these efforts, many pediatric members have not been able to seek care in a timely manner.

At this time, Partnership has made the decision to place Solano County Family Health Services on a network management Corrective Action Plan (CAP), for SCFHS Vacaville and Vallejo sites. As a result, SCFHS will not be open to new pediatric patient assignment. Partnership will stop auto-assigning members ages 0-18 years starting on June 1, 2025. Opening SCFHS Vacaville and Vallejo site for new patients and auto-assignment will be considered after Dec 2025 if notable improvement is found in access as measured by:

- The development of a measurable action plan that details how SCFHS intends to meet the timely access standards
- Demonstrate an increase appointment access for pediatric patients before December 31, 2025
- Reduce grievances related to access to a rate commensurate with local providers
- Partnership's secret shopper survey results showing adequate access meeting network standards.

This letter is an official notice of Partnership's request for corrective action. Partnership's detailed findings and supportive authorities are further detailed in the enclosed corrective action plan (CAP) form, which should be used when responding to the CAP. We appreciate the continued dialogue with SCFHS to improve outcomes and access for our members. Should you have any questions regarding this issue, please contact me at (707) 863-4235. Thank you for your attention to this matter.

Respectfully,

A handwritten signature in cursive script that reads "Mary Kerlin".

Mary Kerlin
Senior Director of Provider Relations
Phone: (707) 863-4235
Email: mkerlin@partnershiphp.org



Corrective Action Plan (CAP) Form

Issue Date:

Issued to: Solano County Family Health Services

Functional Area: Access to care

Review Period: April 1, 2024-March 31, 2025

CATEGORY: Grievances			
CITATION(s): Contract by and Between Partnership HealthPlan of California (Partnership) and Solano County Family Health Services (SCFHS) provision 2.1.6 and Partnership policy MPNET100			
DEFICIENCY NUMBER: 1	PROVIDER RESPONSES Response and Action(s) taken. Include dates completed/anticipated.	PARTNERSHIP REVIEW (Approved/Not Approved) Include final comments or request(s) and the date of each new entry.	Result OPEN / Closed
<p>FINDINGS: 04/25/2025: Through monitoring member grievances, Partnership has identified that Solano County Family Health Services (SCFHS) is an outlier as it relates to the number of grieving members. For the period April 1, 2024-March 31, 2025, Partnership received 171 formal member grievances against SCFHS. Comparatively, Partnership received approximately 42% more grievances against SCFHS than grievances against the three other Federally Qualified Health Centers (FQHC) in Solano County for the same period. Partnership shared our concerns regarding the high rate of grievances with SCFHS during a September 2024 joint leadership initiative meeting, which unfortunately, has not resulted in any marked decrease in grievances.</p> <p>Notably, 112 or 65% of the complaints received regarding SCFHS were concerning access to care.</p> <p>Per the contract by and between Partnership and SCFHS, provision 2.1.6, SCFHS is required to comply with availability and hours of service requirements consistent with Partnership’s policies and provider manual. Partnership’s policy MPNET100 sets forth the standard that non-urgent primary care and</p>	<p><u>MM/DD/YYYY:</u></p> <p><u>Supplemental Document(s) Submitted:</u></p>	<p><u>MM/DD/YYYY: Approved/Not Approved –</u> <i><Paste chosen standard result language from the CAP Form Standardized Audit Results Key></i></p>	



Corrective Action Plan (CAP) Form

Issue Date:

Issued to: Solano County Family Health Services

Functional Area: Access to care

Review Period: April 1, 2024-March 31, 2025

<p>prenatal appointments be available within 10 business days of the request and requires newborn appointments be available within 48 hours of the request. As reported through member grievances, SCFHS is failing to fulfill this obligation.</p>			
<p>PRELIMINARY CAP(s): <i>Submit the following to demonstrate compliance with the above cited requirement:</i> By Friday, May 23, 2025:</p> <ul style="list-style-type: none"> ▪ Provide a root cause analysis to identify the fundamental contributory factors for the failure to meet access to care standards ▪ Develop a time constrained and measurable action plan, those details how SCFHS intends to meet the timely access standards and as a result, reduce member grievances ▪ As of December 31, 2025, the volume of grievances related to access will be commensurate with local providers 			

CATEGORY: Availability of clinic staff

CITATION(s): Contract by and Between Partnership HealthPlan of California (Partnership) and Solano County Family Health Services (SCFHS) provision 2.1.6 and Partnership policy MPNET100

<p>DEFICIENCY NUMBER: 2</p>	<p>PROVIDER RESPONSES <i>Response and Action(s) taken.</i> <i>Include dates completed/anticipated.</i></p>	<p>PARTNERSHIP REVIEW (Approved/Not Approved) Include final comments or request(s) and the date of each new entry.</p>	<p>Result OPEN / Closed</p>
<p>FINDINGS: 04/25/2025: SCFHS has consistently failed to fulfill obligations related to office hours and telephone access standards. During the period October 16, 2024 – April 24, 2025, SCFHS has deviated from or</p>	<p>MM/DD/YYYY: Supplemental Document(s) Submitted:</p>	<p>MM/DD/YYYY: Approved/Not Approved – <i><Paste chosen standard result language from the CAP Form Standardized Audit Results Key></i></p>	



Corrective Action Plan (CAP) Form

Issue Date:

Issued to: Solano County Family Health Services

Functional Area: Access to care

Review Period: April 1, 2024-March 31, 2025

<p>completely failed to uphold obligations for operating the clinic during published business hours and/or fulfilling telephone access standards. Per the contract by and between Partnership and SCFHS, provision 2.1.6, SCFHS is required to comply with availability and hours of service requirements consistent with Partnership’s policies and provider manual. Partnership’s policy MPNET100 sets forth the standard that hours of operation must be adequate and convenient for members to schedule appointments. Specifically, the office should answer the phone within 5 rings, the hold time should not exceed 5 minutes, and messages left during regular business hours should be responded to within 30 minutes. As evidenced through documented secret shopper calls, SCHFS hold times were upwards of one hour or routed to an answering service unable to schedule member appointments. These findings are also reflected in the aforementioned member grievance data.</p>			
<p>PRELIMINARY CAP(s): <i>Submit the following to demonstrate compliance with the above cited requirement:</i> By Friday, May 23, 2025:</p> <ul style="list-style-type: none"> ▪ Provide a root cause analysis to identify the fundamental contributory factors for the failure to meet access to care standards ▪ Develop a time constrained and measurable action plan that details how SCFHS intends to meet the timely access standards and increase access for patients, and as a result, reduce member grievances and ensure the clinic meets telephone access requirements. 			



Corrective Action Plan (CAP) Form

Issue Date:

Issued to: Solano County Family Health Services

Functional Area: Access to care

Review Period: April 1, 2024-March 31, 2025

<ul style="list-style-type: none">By December 31, 2025, Secret Shopper surveys will show that the practice meets the standards per Partnership's policy MPNET100			
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Responsible Party

Provider/Group Name:

Name:

Title:

Electronic Signature:

Partnership Health Plan of California

Review and Approved by:

Name:

Title:

Electronic Signature:

Community Healthcare Board

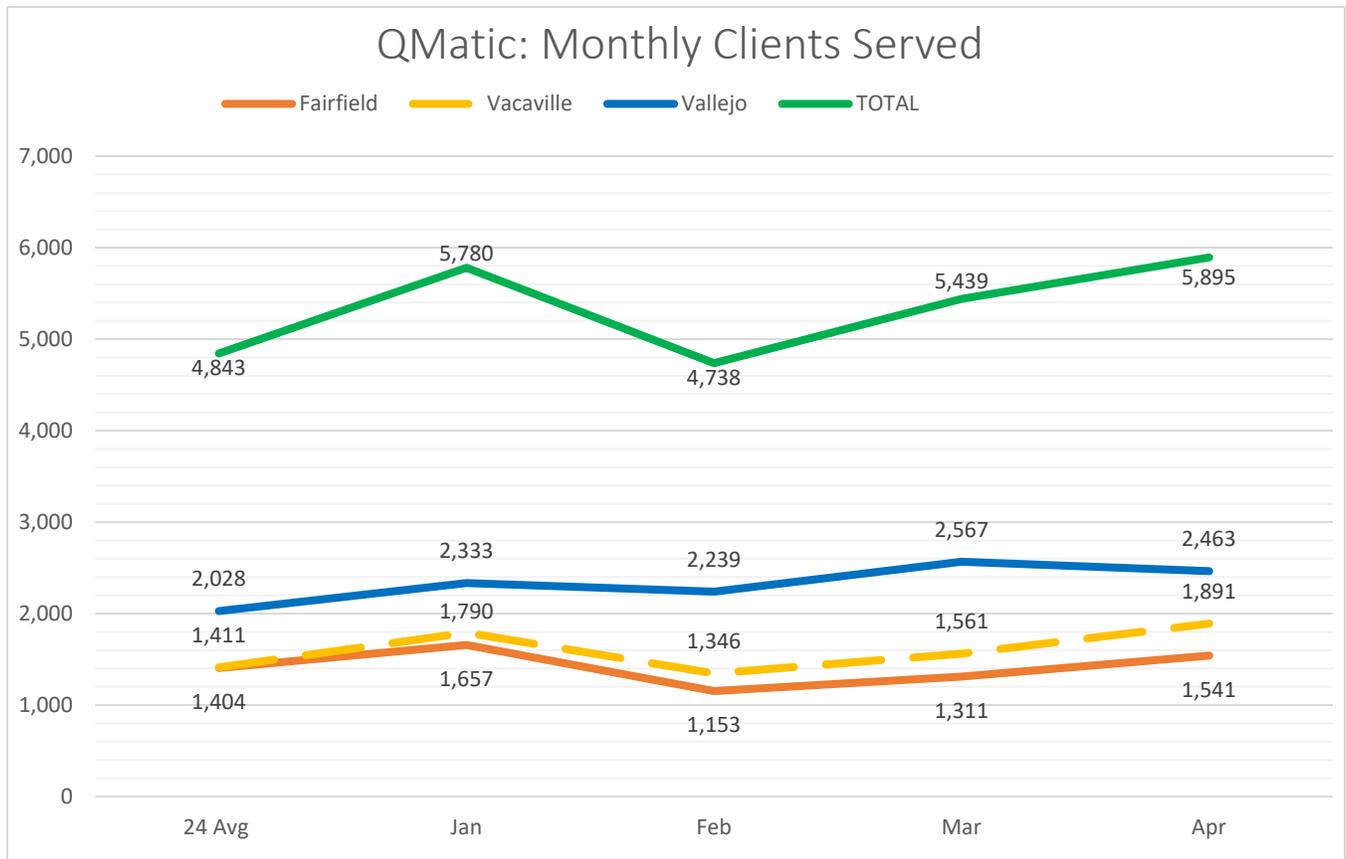
5) Clinic Operations Reports:

j) FHS Clinic Q-Matic Stats

Clinic Operations Report: Clinic Metrics

Queue Management (Q-Matic) Stats

Clinic Site	Clients Served				
	2024 Average	Jan	Feb	Mar	Apr
Fairfield					
Lab	93	101	60	43	28
Medical (Adult)	1,311	1,556	1,093	1,268	1,513
Subtotal	1,404	1,657	1,153	1,311	1,541
Vacaville					
Dental	589	723	579	703	669
Medical (Adult & Peds)	822	1,067	767	858	1,222
Subtotal	1,411	1,790	1,346	1,561	1,891
Vallejo					
Dental & Medical (Adult & Peds)	1,935	2,223	2,100	2,400	2,317
Lab	93	110	139	167	146
Subtotal	2,028	2,333	2,239	2,567	2,463
TOTAL	4,843	5,780	4,738	5,439	5,895



**SOLANO COUNTY
2025-26
REQUESTED BUDGET
FAMILY HEALTH SERVICES**

CATEGORY DESCRIPTION	FY2024/25 ADOPTED BUDGET	FY2025/26 REQUESTED BUDGET	VARIANCE	
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EXPENDITURES	Notations
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Salaries & Benefits

Salaries - Regular	16,306,079	16,446,159	140,080	
Salaries - Extra Help	17,000	69,116	52,116	The increase in costs are due to additional positions budgeted for FY2025. Adopted Budget included one (1) Medical Records Tech Sr. position and Requested budget includes two (2) Medical Record Tech Sr positions and a Physician to support TB Control.
Salaries - OT/Callback/Standby	69,874	114,655	44,781	The increase in overtime includes a placeholder to provide support to C efforts to maximize quality measures.
Staffing costs from other divisions (net amount)	133,070	157,110	24,040	
Benefits	10,561,338	10,718,556	157,218	
Accrued Leave CTO Payoff	20,000	30,000	10,000	
Salary Savings	(2,789,326)	(5,083,678)	(2,294,352)	The increase in salary savings is due to savings for hard to fill positions.
Salaries & Benefits Total	24,318,035	22,451,918	(1,866,117)	

Services & Supplies

Office Expense and Supplies	165,133	135,563	(29,570)	
Communications	138,331	118,877	(19,454)	
Insurance	1,000,703	1,666,347	665,644	The increase in costs is for both liability and malpractice insurances.
Equipment - Purchases, Leases & Maintenance	73,780	50,917	(22,863)	
Mileage, Fuel and Fleet	45,503	50,167	4,664	

**SOLANO COUNTY
2025-26
REQUESTED BUDGET
FAMILY HEALTH SERVICES**

CATEGORY DESCRIPTION	FY2024/25 ADOPTED BUDGET	FY2025/26 REQUESTED BUDGET	VARIANCE	
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EXPENDITURES	Notations
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Services & Supplies (continued)

Buildings - Maintenance, Improvements, Rent & Utilities	258,458	198,947	(59,511)	The decrease in costs are primarily due to the decrease in utilities costs to the clinics.
Drugs, Pharmaceuticals, Medical and Dental Supplies	623,605	654,763	31,158	
Controlled Assets & Computer Related Items	151,940	129,781	(22,159)	
Medical/Dental Services	207,600	202,571	(5,029)	
Contracted and Other Professional Services	1,019,565	480,657	(538,908)	The decrease in contracted services is due to savings in several contracts with * below: \$209,382 Allied Security Services \$100,000* Simi Group \$ 1,500* Waystar (Clearing House used with NextGen) \$ 15,000 Forvis (Consultant-Medicare Cost Report) \$110,975* UHC Solutions (recruitment services) \$ 20,184 Stericycle \$ 23,616* GeBBs (coding consultant) \$480,657 Total
DoIT	2,152,500	2,457,687	305,187	The increase in costs are due to estimated DoIT staff support and network
Software & Maintenance or Support	690,031	700,254	10,223	
Professional Licenses & Memberships	27,871	9,491	(18,380)	
Education, Training, In-State Travel, Out of State Travel	25,290	12,527	(12,763)	
Other	69,758	39,337	(30,421)	
Services & Supplies Total	6,650,068	6,907,886	257,818	

**SOLANO COUNTY
2025-26
REQUESTED BUDGET
FAMILY HEALTH SERVICES**

CATEGORY DESCRIPTION	FY2024/25 ADOPTED BUDGET	FY2025/26 REQUESTED BUDGET	VARIANCE	
EXPENDITURES				Notations
Other Charges				
Interfund Services - Professional	712,944	628,571	(84,373)	Overall decrease in cost for services provided by the Sheriff, building m groundskeeping, and custodial.
Interfund Services - Accounting & Audit	-	-	-	
Interfund Services - Other	64,285	68,117	3,832	
Contributions - Non County Agencies	15,000	5,000	(10,000)	
Other Charges Total	792,229	701,688	(90,541)	
Contracts/Client Support				
Contracted Direct Services	1,492,000	3,314,306	1,822,306	The increase is primarily due to the Barton & Associates contract for loc and the addition of Chiropractic Integrative Partners. \$1,704,306 Barton & Associates (Locum) \$ 818,000 Touro University \$ 752,000 Chiropractic Integrative Partners \$ 40,000 Children's Choice Dental \$3,314,306 TOTAL
Client Support	22,700	23,610	910	
Contracts/Client Support Total	1,514,700	3,337,916	1,823,216	
Equipment				
Equipment	5,000	-	(5,000)	
Equipment Total	5,000	-	(5,000)	
Administration Costs				
H&SS Administration	2,957,878	2,994,595	36,717	
Countywide Administration	1,312,262	1,432,021	119,759	
Administration Costs Total	4,270,140	4,426,616	156,476	
TOTAL EXPENDITURES	37,550,172	37,826,024	275,852	

**SOLANO COUNTY
2025-26
REQUESTED BUDGET
FAMILY HEALTH SERVICES**

CATEGORY DESCRIPTION	FY2024/25 ADOPTED BUDGET	FY2025/26 REQUESTED BUDGET	VARIANCE	
REVENUES				Notations
Payer Revenues				
Payer Revenues	23,355,466	21,178,445	(2,177,021)	Provider revenue targets for the 1st quarter are based average encounter FY2023/24; targets for 2nd-4th quarters are based on 14 encounters per day; new providers' targets gradually increase during onboarding from 1st three months, 75% in the next three months and 100% after six months
Payer Revenues Total	23,355,466	21,178,445	(2,177,021)	
Federal/State Revenues				
1991 Realignment (Underinsured/Uninsured/PH Services)	1,386,906	1,296,310	(90,596)	
Federal Direct - COVID (one time funding)	100,405	-	(100,405)	The decrease is due to the HRSA Capital Grant funding which is expected to be expended in FY2024/25.
Federal Grants	2,047,990	2,047,990	-	
Federal Other	56,608	-	(56,608)	The decrease is due to the one-time \$1M Garamendi Congressional Emergency funding fully expended in FY2024/25.
American Rescue Plan Act (ARPA)	1,276,497	-	(1,276,497)	The decrease is due to one-time ARPA funding for the OCHIN EPIC EHR implementation project fully expended in FY2024/25.
Other Revenue	1,617,600	1,446,966	(170,634)	The decrease is due to decrease in projected QIP revenues and QIP Extension revenues \$1,400,000 QIP Revenue \$ 32,610 Bad Debt Recovery \$ 12,456 PHP Prop 56 Revenues \$ 1,900 Photo copies \$1,446,966 TOTAL
Program Revenues Total	6,486,006	4,791,266	(1,694,740)	
TOTAL PAYER AND PROGRAM REVENUES	29,841,472	25,969,711	(3,871,761)	

**SOLANO COUNTY
2025-26
REQUESTED BUDGET
FAMILY HEALTH SERVICES**

CATEGORY DESCRIPTION	FY2024/25 ADOPTED BUDGET	FY2025/26 REQUESTED BUDGET	VARIANCE	
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TOTAL EXPENDITURES vs TOTAL REVENUES				Notations
TOTAL EXPENDITURES	37,550,172	37,826,024	275,852	
TOTAL REVENUES	29,841,472	25,969,711	(3,871,761)	
DEFICIT (SURPLUS)	7,708,700	11,856,313	4,147,613	
County General Fund	4,708,209	2,500,000	(2,208,209)	
DEFICIT (SURPLUS) after CGF**	3,000,491	9,356,313	6,355,822	

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

Measure	QIP_Score	Numerator	Denominator	25th Threshold %	25th (Target/Achieved)	50th Threshold %	50th (Target/Achieved)	75th Threshold %	75th (Target/Achieved)	90th Threshold %	90th (Target/Achieved)
Child and Adolescent Well Care 2025	15.69 %	447	2849	NA	NA	NA	NA	58.07%	1655/447	64.74%	1845/447
Cervical Cancer Screening 2025	32.61 %	15	46	NA	NA	NA	NA	61.56%	29/15	67.46%	32/15
Well Child First 15 Months 2025	15.17 %	22	145	NA	NA	NA	NA	64.99%	95/22	69.67%	102/22