



COASTAL HEALTH & WELLNESS

GOVERNING BOARD

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

AGENDA

Thursday, October 31, 2019 – 12:00 PM

CONSENT AGENDA: ALL ITEMS MARKED WITH A SINGLE ASTERICK (*) ARE PART OF THE CONSENT AGENDA AND REQUIRE NO DELIBERATION BY THE GOVERNING BOARD. ANY BOARD MEMBER MAY REMOVE AN ITEM FROM THIS AGENDA TO BE CONSIDERED SEPARATELY.

PROCEED TO BOTTOM OF THIS DOCUMENT FOR APPEARANCE & EXECUTIVE SESSION GUIDELINES

In accordance with the provisions of the Americans with Disabilities Act (ADA), persons in need of a special accommodation in order to participate in this proceeding should, within two (2) days prior to the proceeding, request necessary accommodations by contacting CHW’s Executive Assistant at 409-949-3406, or via email at trollins@gchd.org.

ANY MEMBERS NEEDING TO BE REACHED DURING THE MEETING MAY BE CONTACTED AT 409-938-2288
REGULARLY SCHEDULED MEETING

Meeting Called to Order

- *Item #1**ACTION**..... Agenda
- *Item #2**ACTION**..... Excused Absence(s)
- *Item #3**ACTION**..... Consider for Approval Minutes from September 26, 2019 Governing Board Meeting
- *Item #4**ACTION**..... Consider for Approval Minutes from October 17, 2019 Governing Board Quality Assurance Committee Meeting
- *Item #5**ACTION**..... Consider for Approval Quarterly Investment Report
- *Item #6 Informational Items
Policies Approved by the United Board of Health as Authorized Under the Shared Services Agreement:
 - a) Mother Friendly Worksite Policy
- Item #7 Executive Report
- Item #8**ACTION** Consider for Approval Preliminary September 2019 Financial Report
- Item #9**ACTION** Consider for Approval Quarterly Visit and Analysis Report Including Breakdown of New Patients by Payor Source
- Item #10**ACTION** Consider for Approval Quarterly Access to Care Report
- Item #11**ACTION** Consider for Approval Quarterly Patient Satisfaction Survey Report
- Item #12**ACTION**..... Consider for Approval Risk Management Plan
- Item #13**ACTION**..... Consider for Approval Quarterly Compliance and Risk Management Report

- Item #14**ACTION** Consider for Approval Coastal Health & Wellness Budget Period Progress Report (BPR) Non-Competing Continuation (NCC) for Submittal to HRSA
- Item #15**ACTION**..... Consider for Approval Patient No Show Policy (*New Policy*)
- Item #16**ACTION**..... Consider for Approval Re-Privileging Rights for Emily Bailey, MSW, LCSW
- Item #17**ACTION**..... Consider for Approval Privileging Rights for the following UTMB Residents:
 - a) Zuleica Santiago Delgado, MD
- Item #18**ACTION** Consider for Approval the Appointment of Flecia Charles to Complete The Unexpired Term of the Vacant Consumer Representative on the Coastal Health & Wellness Governing Board with a Term Expiring June 2020
- Item #19 Update on Next Steps Regarding Refresh of the Galveston Clinic

Adjournment

Tentative Next Meeting: November 14, 2019

Appearances before the Coastal Health & Wellness Governing Board

The Coastal Health & Wellness Governing Board meetings are conducted under the provisions of the Texas Open Meetings Act, and members of the public that wish to address the Board about an item presented on the agenda shall be offered three minutes to do so. The Board cordially requests that individuals desiring to make a such a statement notify the Board of their intention by writing their name on the sign-in sheet located at the Boardroom’s main entrance.

A citizen desiring to make comment to the Board regarding an item not listed on the agenda shall submit a written request to the Executive Director by noon on the Thursday immediately preceding the Thursday of the Board meeting. A statement of the nature of the matter to be considered shall accompany the request. The Executive Director shall include the requested appearance on the agenda, and the person shall be heard if he or she appears.

Executive Sessions

When listed, an Executive Session may be held by the Governing Board in accordance with the Texas Open Meetings Act. An Executive Session is authorized under the Open Meetings Act pursuant to one or more the following exceptions: Tex. Gov’t Code §§ 551.071 (consultation with attorney), 551.072 (deliberation regarding real property), 551.073 (deliberation regarding a prospective gift or donation), 551.074 (personnel matters), 551.0745 (personnel matters affecting Coastal Health & Wellness advisory body), 551.076 (deliberation regarding security devices or security audits), and/or 551.087 (deliberations regarding economic development negotiations). The Presiding Officer of the Governing Board shall announce the basis for the Executive Session prior to recessing into Executive Session. The Governing Board may only enter into Executive Session if such action is specifically noted on the posted agenda.



COASTAL HEALTH & WELLNESS

GOVERNING BOARD

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

**Governing Board
October 2019
Item #2
Excused Absence(s)**

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COASTAL HEALTH & WELLNESS

GOVERNING BOARD

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

Governing Board

October 2019

Item #3

Consider for Approval Minutes from September 26, 2019

Governing Board Meeting

**Coastal Health & Wellness
Governing Board
September 26, 2019**

Board Members

Present:

David Delac
Milton Howard, DDS
Jay Holland
Victoria Dougharty
Virginia Valentino
Aaron Akins
Elizabeth Williams
Dorothy Goodman
Samantha Robinson
Barbara Thompson, MD

Staff:

Kathy Barroso, Executive Director
Hanna Lindskog, DDS
Cheryl Golla
Mary Orange
Michelle Peacock
Kristina Garcia
Tiffany Carlson
Ashley Tompkins
Debra Howey

Cynthia Ripsin, MD
Eileen Dawley
Andrea Cortinas
Richard Mosquera
Amanda Wolff
Kenna Pruitt
Paula Compton
Tyler Tipton
Andy Mann
Tikeshia Thompson Rollins

Excused Absence: Miroslava Bustamante

Items 1-6 Consent Agenda

A motion was made by Virginia Valentino to approve the consent agenda items one through six. Dr. Howard seconded the motion and the Board unanimously approved the consent agenda.

Item #7 EXECUTIVE SESSION

Executive Session: Texas Government Code Section 551.071, Consultation with Attorney: The Governing Board will enter into an executive session as permitted under the Texas Open Meetings Act, Chapter 551 of the Texas Government Code, pursuant to Section 551.071 of the Government Code to seek the advice of its attorney about pending or contemplated litigation, a settlement offer, or on a matter in which the duty of the attorney to the Board under the Texas Disciplinary Rules of Professional Conduct of the State Bar of Texas clearly conflicts with the Open Meetings Act relating to each of the following items:

- a) A pending EEOC matter.

Item #8 Reconvene Regular Open Meeting

The Open meeting was reconvened at 12:28p.m.

Item #9 Possible Action from Executive Session

No Action

Item #10 Recognition of David Delac for his Dedicated Service to the Coastal Health & Wellness Governing Board from 2016-2019

Dr. Howard presented David Delac with a plaque for his dedicated service to the Coastal Health & Wellness Governing Board from 2016-2019.

Item #11 Executive Report

Kathy Barroso, Executive Director, presented the September 2019 Executive Report to the Board.

Item #12 Consider for Approval August 2019 Financial Report

Mary Orange, Business Office Manager, presented the August 2019 financial report to the Board. A motion to accept the financial report as presented was made by Jay Holland. Virginia Valentino seconded the motion and the Board unanimously approved.

Item #13 Consider for Approval Budget for Additional Funding Received from HRSA in the Amount of \$110,000 to Continue the Substance Use Disorder-Mental Health (SUD-MH) Program

Mary Orange, Business Office Manager, asked the Board to consider for approval the budget for additional funding received from HRSA in the amount of 110,000 to continue the SUD-MH program. A motion to accept the budget as presented was made by Virginia Valentino and seconded by Victoria Dougharty. The Board unanimously approved the motion.

Item #14 Consider for Approval Budget for Additional Funding Received through the Direct Relief Recovery and Resiliency Community Health Fund in the Amount of \$146,140

Mary Orange, Business Office Manager, asked the Board to consider for approval the budget for additional funding received through the Direct Relief recovery and resiliency community health fund in the amount on \$146,140. A motion to accept the budget as presented was made by Aaron Akins and seconded by Victoria Dougharty. The Board unanimously approved the motion.

Item #15 Consider for Approval Purchase of M11 Sterilizer for the Texas City Dental Clinic in the Amount of \$5,655

Mary Orange, Business Office Manager, asked the Board to consider for approval the purchase of a M11 Sterilizer for the Texas City Dental Clinic in the amount of \$5,655. Dr. Howard requested that the Governing Board revisit the maximum amount the CEO can approve without having to have the approval of the Board. Kathy informed the Board that the \$5,000 limit is stated in the Governing Board Bylaws which will need to be revised and brought to the Board for approval. A motion to accept the budget as presented was made by Aaron Akins and seconded by Victoria Dougharty. The Board unanimously approved the motion.

Item #16 Consider for Approval the Coastal Health & Wellness After Hours Coverage Policy

Kathy Barroso, Executive Director, asked the Board to consider for approval the Coastal Health & Wellness After Hours Coverage Policy. A motion to accept the policy as presented was made by Victoria Dougharty and seconded by Virginia Valentino. The Board unanimously approved the motion.

Item #17 Consider for Approval the Coastal Health & Wellness Medication Management Policy

Tiffany Carlson, Nursing Director, asked the Board to Consider for approval the Coastal Health & Wellness Medication Management Policy. Samantha Robinson requested that Tiffany remove the reference to sample medications if in fact Coastal Health and Wellness does not issue sample medications. A motion to accept the policy with the change of removing sample medications was made by Virginia Valentino and seconded by Dorothy Goodman. The Board unanimously approved the motion.

Item #18 Consider for Approval Privileging Rights for Tokunbo Ibidapo-Obe, MD, UTMB Contractor

Dr. Ripsin, Medical Director, asked the Board to consider for approval privileging rights for Tokunbo Ibidapo-Obe, MD. A motion to accept privileging rights for UTMB Contractor Dr. Tokunbo Ibidapo-Obe was made by Dr. Howard and seconded by Aaron Akins. The Board unanimously approved the motion

Item #19 Consider for Approval Privileging Rights for the following UTMB Residents:

Dr. Ripsin, Medical Director, asked the Board to consider for approval privileging rights for UTMB resident Daniela Rojas, MD.

A motion to accept privileging rights for Dr. Rojas was made by Victoria Dougharty and seconded by Aaron Akins. The board unanimously approval the motion.

Item #18 Consider for Approval the Election of Governing Board Representatives to Serve in the Following Positions through September 30, 2020:

Due to notice of the recent Board Chair vacancy, David Delac asked the Board to consider for approval the election of Governing Board representatives to serve in the following positions.

- a. Governing Board Chair
- b. Governing Board Vice Chair
- c. Governing Board Secretary/Treasurer

David Delac requested a motion for Board Chair. Dr. Howard made a motion to nominate Samantha Robinson, BSN, as Board Chair by acclamation. Jay Holland seconded the motion and the Board unanimously approved.

David Delac requested a motion for Vice Chair. Dorothy Goodman made a motion to nominate Dr. Howard as Vice Chair. Virginia Valentino seconded the motion and the Board unanimously approved.

David Delac requested a motion for Board Secretary/Treasurer. Dr. Howard made a motion to nominate Virginia Valentino as Secretary/Treasurer. Dorothy Goodman seconded the motion and the Board unanimously approved.

Adjournment

A motion to adjourn was made by Dr. Howard and seconded by Victoria Dougharty. The Board adjourned at 12:06 p.m.

Chair

Secretary/Treasurer

Date

Date

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COASTAL HEALTH & WELLNESS

GOVERNING BOARD

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

Governing Board

October 2019

Item #4

**Consider for Approval Minutes from October 17, 2019 Governing
Board Quality Assurance Committee Meeting**

**Coastal Health & Wellness
Governing Board
Quality Assurance Committee
Meeting
October 17, 2019**

BOARD QA COMMITTEE MEMBERS PRESENT:

Milton Howard, DDS – Vice Chair

BOARD QA COMMITTEE MEMBERS ABSENT:

Samantha Robinson, BSN – Chair

EMPLOYEES PRESENT:

Kathy Barroso (Executive Director), Eileen Dawley (Chief Nursing Officer), Cynthia Ripsin (Medical Director), Hanna Lindskog (Dental Director), Richard Mosquera (Chief Compliance Officer), Jason Borillo (Lead Midlevel), Debra Howey (Infection Control Nurse), Tiffany Carlson (Nursing Director), Virginia Lyle (Lab & X-Ray Supervisor), Andrea Cortinas (Chief Financial Officer), Pisa Ring (Patient Information Manager) & Anthony Hernandez (Executive Assistant II)

(Minutes recorded by Anthony Hernandez)

ITEM	ACTION
<p>Patient Access / Satisfaction Reports</p> <p>a) Quarterly Access to Care Report</p> <p>b) Quarterly Patient Satisfaction Report</p>	<p><u>Quarterly Access to Care Report</u></p> <ul style="list-style-type: none"> • Quarterly Access to Care report was reviewed. No show rates were improved in comparison to last quarter except for counseling visits in Texas City and medical and dental hygienist visits in Galveston. Utilization rates were higher in all areas except for dental hygienist visits in Galveston. <p><u>Quarterly Patient Satisfaction Report</u></p> <ul style="list-style-type: none"> • The results of the July to September Patient Satisfaction Survey were presented and discussed. In comparison to last quarter, the overall weighted average score increased from 4.54 to 4.75.
<p>Clinical Measures</p> <p>a) Quarterly Report on UDS Medical Measures in Comparison to Goals</p> <p>b) Update on UDS Dental Sealant Measure</p> <p>c) Update on Medical Quality Review Measures</p>	<p><u>Quarterly Report on UDS Medical Measures in Comparison to Goals</u></p> <ul style="list-style-type: none"> • Kathy Barroso reviewed the quarterly progress report of UDS measures in comparison to 2020 goals. • Will continue to monitor and provide updates to the Committee quarterly. <p><u>Update on UDS Dental Sealant Measure</u></p> <ul style="list-style-type: none"> • Dr. Lindskog informed the QA Board Committee that the UDS Sealant measure improved from 22.22% to 55.55% <p><u>Update on Medical Quality Review Measures</u></p> <ul style="list-style-type: none"> • Dr. Ripsin reviewed the Medical Quality review Measures and Peer to Peer education plan.

<p>Quality Assurance/Risk Management/ Emergency Management Reports</p> <p>a) Quarterly Risk Management Report (July to September)</p> <p>b) Infection Control / Environment Safety Audit Report</p>	<p><u>Quarterly Risk Management Report (July to September)</u></p> <ul style="list-style-type: none"> Quarterly Risk Management report was presented and reviewed in comparison to current goals. <p><u>Infection Control / Environment Safety Audit Report</u></p> <ul style="list-style-type: none"> A summary of the Infection Control/Environment Safety Audit report was reviewed.
<p>c) Draft Risk Management Assessment</p> <p>d) Culture of Safety/Leadership Feedback</p> <p>e) Dental Water Quality Reports and Assessment</p> <p>f) Emergency Management Report</p>	<p><u>Draft Risk Management Assessment</u></p> <ul style="list-style-type: none"> Risk Management Assessment was reviewed; Goals will be presented to the Governing Board after receiving feedback from management staff. <p><u>Culture of Safety/Leadership Feedback</u></p> <ul style="list-style-type: none"> Eileen Dawley reviewed the responses from the Leadership team related to Culture of Safety. Another culture of safety survey will be repeated and distributed to the entire staff in early 2020 in order to gauge progress. <p><u>Dental Water Quality Reports and Assessment</u></p> <ul style="list-style-type: none"> Dr. Lindskog informed the QA Board Committee that the Dental chair #3 in Galveston was taken out of services due to water results. Will continue to test water and use Adec ICX tablets for daily water maintenance. <p><u>Emergency Management Report</u></p> <ul style="list-style-type: none"> Rocky reviewed the Emergency Management Report and gave an update on trainings and drills that had occurred during the quarter.
<p>Plans and Policies</p> <p>a) Risk Management Plan</p> <p>b) Draft No-Show Policy</p>	<p><u>Risk Management Plan</u></p> <ul style="list-style-type: none"> Risk Management Plan was reviewed. Plan will be presented at the October Governing Board meeting for approval. <p><u>Draft No-Show Policy</u></p> <ul style="list-style-type: none"> No-Show Policy was reviewed and discussed. Policy will be presented at the Governing Board meeting for approval.
<p>Other Updates</p> <p>a) Process Improvement Changes Related to the Lab</p> <p>b) Next Steps Regarding Refresh of the Galveston Clinic</p>	<p><u>Process Improvement Changes Related to the Lab</u></p> <ul style="list-style-type: none"> Virginia Lyle, Lab & X-Ray Supervisor gave an overview of recent lab process improvements. <p><u>Next Steps Regarding Refresh of the Galveston Clinic</u></p> <ul style="list-style-type: none"> Fleet and Facilities Coordinator will be meeting with the Housing Authority to complete action plan and gather more information
<p>Open Discussion</p>	<ul style="list-style-type: none"> No additional comments

Next Meeting: January 16, 2020

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COASTAL HEALTH & WELLNESS

GOVERNING BOARD

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

Governing Board

October 2019

Item #5

Consider for Approval Quarterly Investment Report

**Coastal Health & Wellness
Investment Report
For the period ending September 30, 2019**

Coastal Health & Wellness	Money Market Account		
	July	August	September
Beginning Balance	\$1,349,254	\$1,172,544	\$1,555,871
Deposits	347,000	647,000	75,000
Withdrawals	(525,000)	(265,000)	(535,000)
Interest Earned	1,291	1,327	1,468
Ending Balance	\$1,172,544	\$1,555,871	\$1,097,339
Current Annual Yield	1.41%	1.41%	1.41%
Previous Quarter Yield (4/2019 - 6/2019)	1.41%	1.41%	1.41%

Tex Pool Investments			
	July	August	September
	\$3,598,395	\$3,605,692	\$3,612,342
	0	0	0
	0	0	0
	7,297	6,650	6,424
	\$3,605,692	\$3,612,342	\$3,618,765
	2.39%	2.17%	2.16%
	2.43%	2.40%	2.38%

FY19 Summary	Interest Earned	Avg Balance	Yield
October 1, 2018 to December 31, 2018	\$22,372	\$4,793,734	0.43%
January 1, 2019 to March 31, 2019	\$23,901	\$4,730,067	0.47%
April 1, 2019 to June 30, 2019	\$25,207	\$4,784,295	0.47%
July 1, 2019 to September 30, 2019	\$24,456	\$4,764,862	0.46%
YTD Totals	\$95,936	\$4,768,239	1.84%

Coastal Health & Wellness	Q1	Q2	Q3	Q4	YTD Comparison
Interest Yield Year to Year Comparison	Oct 1-Dec 31	Jan 1-Mar 31	Apr 1-June 30	Jul 1-Sept 30	Total as of 9/30
FY2016	0.13%	0.12%	0.12%	0.13%	0.50%
FY2017	0.13%	0.12%	0.12%	0.13%	0.50%
FY2018	0.14%	0.20%	0.30%	0.38%	1.02%
FY2019 (Current year)	0.43%	0.47%	0.47%	0.46%	1.84%

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COASTAL HEALTH & WELLNESS

GOVERNING BOARD

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

Governing Board

October 2019

Item #6

**Policies Approved by the United Board of Health as Authorized Under
the Shared Services Agreement:**

a) Mother Friendly Worksite Policy

Mother Friendly Worksite Policy

-Approved
UBOH 09/25/2019
-Effective 09/27/2012

Audience

This policy applies to all actively breastfeeding Galveston County Health District, Galveston Area Ambulance Authority, Coastal Health & Wellness (collectively “the District”) employees.

Policy

The District recognizes that breast milk is the recommended and normal food for healthy growth and development of infants and young children. The District promotes and supports breastfeeding and the expression of breast milk by employees who are breastfeeding when they return to work.

Management staff of the District shall work with breastfeeding employees to determine mutually agreeable hours or work, assignments and breaks which support breastfeeding practices for one year after the child’s birth.

The District has a designated Mother Friendly Worksite area that is in accordance to the Texas Statutes-Section. 165.003. Business Designation as “Mother-Friendly”.

Employees that utilize the Mother Friendly Worksite area should contact Human Resources.

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COASTAL HEALTH & WELLNESS

GOVERNING BOARD

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

**Governing Board
October 2019
Item #7
Executive Report**



COASTAL HEALTH & WELLNESS

GOVERNING BOARD

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

Governing Board

October 2019

Item #8

Consider for Approval Preliminary September 2019

Financial Report

COASTAL HEALTH & WELLNESS

Governing Board



FINANCIAL SUMMARY

For the Period Ending September 30, 2019

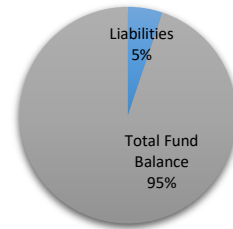
October 31, 2019

GCHD Board Room | 9850-A Emmett F. Lowry Expy. | Texas City, TX 77591

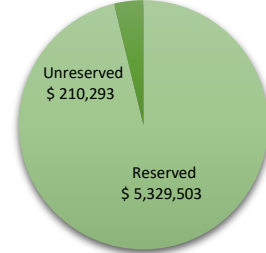
CHW - BALANCE SHEET as of September 30, 2019

	Current Month Sep-19	Prior Month Aug-19	Increase (Decrease)
ASSETS			
Cash & Cash Equivalents	\$4,885,634	\$5,263,592	(\$377,958)
Accounts Receivable	1,696,737	1,813,880	(117,143)
Allowance For Bad Debt	(914,866)	(1,300,244)	385,378
Pre-Paid Expenses	88,976	98,498	(9,522)
Due To / From	332,184	(39,867)	372,050
Total Assets	\$6,088,664	\$5,835,860	\$252,805
LIABILITIES			
Accounts Payable	\$61,902	\$62,497	(\$596)
Accrued Salaries	244,023	224,112	19,911
Deferred Revenues	7,409	9,455	(2,045)
Total Liabilities	\$313,334	\$296,064	\$17,270
FUND BALANCE			
Fund Balance	\$5,813,682	\$5,813,682	\$0
Current Change	(38,352)	(273,887)	235,535
Total Fund Balance	\$5,775,330	\$5,539,796	\$235,535
TOTAL LIABILITIES & FUND BALANCE	\$6,088,664	\$5,835,860	\$252,805

Current Period Assets



Total Fund Balance

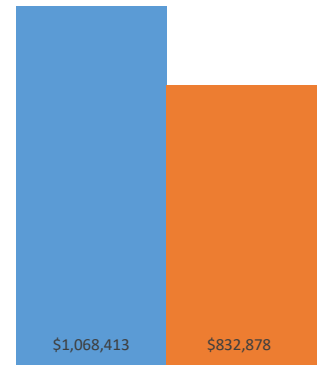


CHW - REVENUE & EXPENSES as of September 30, 2019

	Actual Sep-19	Budgeted Sep-19	PTD Budget Variance	YTD Budget Variance
REVENUE				
County Revenue	\$324,071	\$324,070	\$1	\$5
DSRIP Revenue	0	79,167	(79,167)	(475,000)
HHS Grant Revenue	310,668	260,617	50,051	183,216
Patient Revenue	418,573	368,553	50,020	(575,168)
Other Revenue	15,101	23,635	(8,534)	(57,708)
Total Revenue	\$1,068,413	\$1,056,042	\$12,371	(\$924,657)
EXPENSES				
Personnel	\$567,052	\$680,896	\$113,844	\$485,156
Contractual	61,072	85,808	24,735	151,892
IGT Reimbursement	0	37,500	37,500	225,000
Supplies	76,877	121,986	45,109	125,530
Travel	3,882	2,519	(1,363)	(4,913)
Bad Debt Expense	40,304	35,045	(5,259)	(42,983)
Other	83,690	92,289	8,599	(120,382)
Total Expenses	\$832,878	\$1,056,042	\$223,164	\$819,300
CHANGE IN NET ASSETS	\$235,535	\$0	\$235,535	(\$105,357)

Current Month Revenue & Expenses Actual

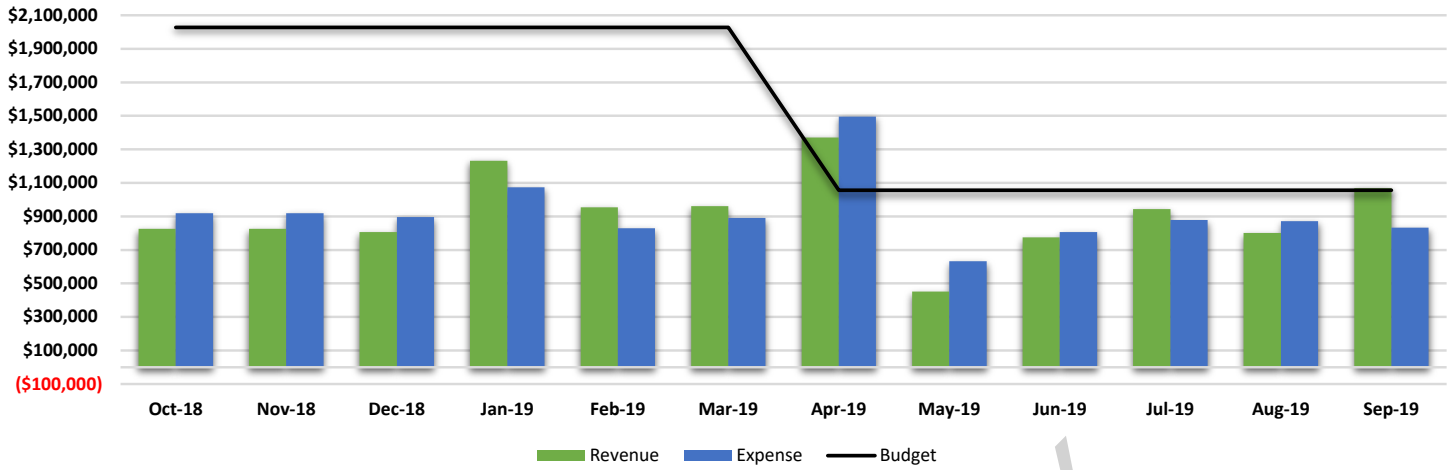
■ Revenue ■ Expenses



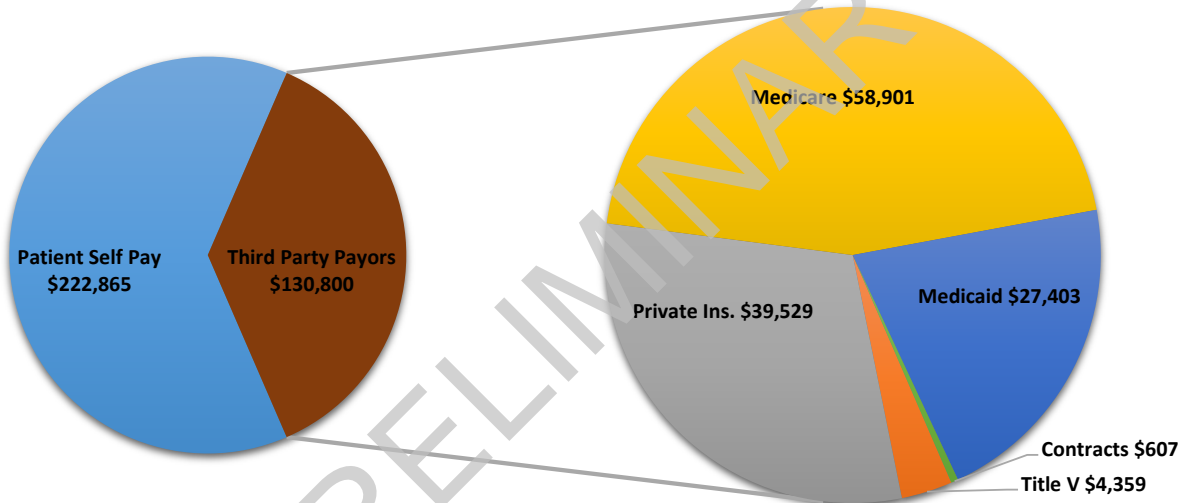
HIGHLIGHTS

- MTD increase in Fund Balance of \$235,535 and YTD decrease of (\$38,352).
- MTD revenues were overbudget by \$12,371. Patient revenues are higher due to year end recording of anticipated AR for all payor classes.
- MTD expenses were \$223,164 underbudget. Travel was slightly overbudget, but was offset by savings in Personnel, Contractual, Supplies and Other. Bad debt expense is overbudget for the month. Accrual is based on % of Self-Pay Charges less Adjustments.
- Total Fund balance is \$5,775,330 as of 9/30/19.

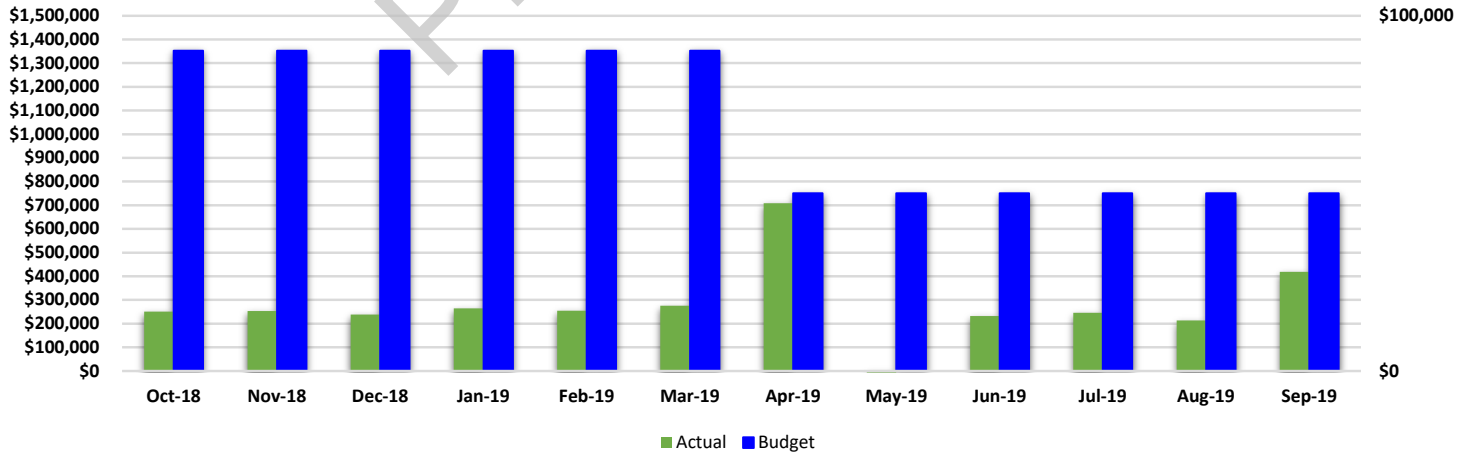
Actual Revenue & Expenses in Comparison to Budget

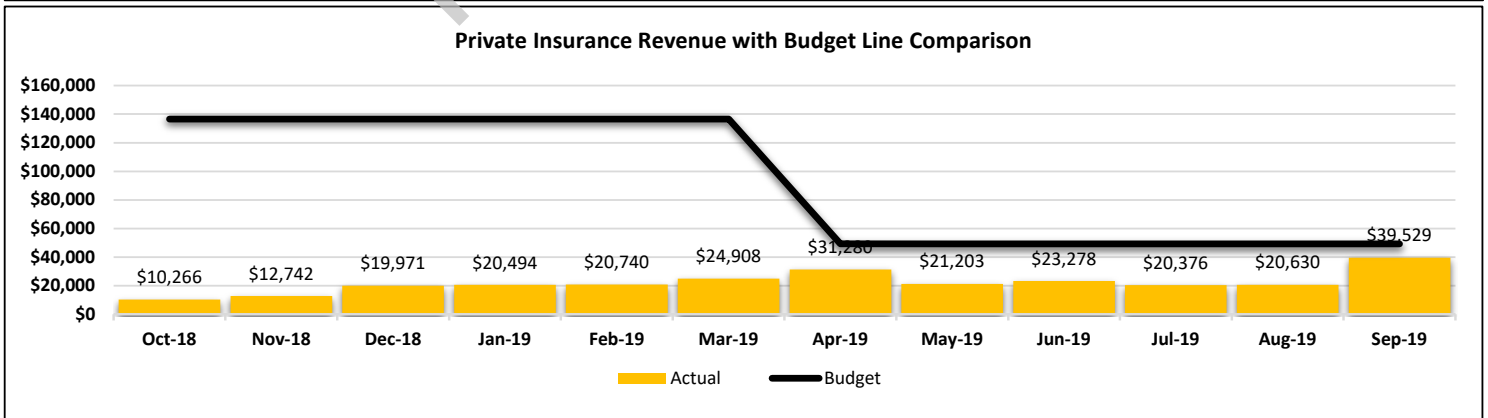
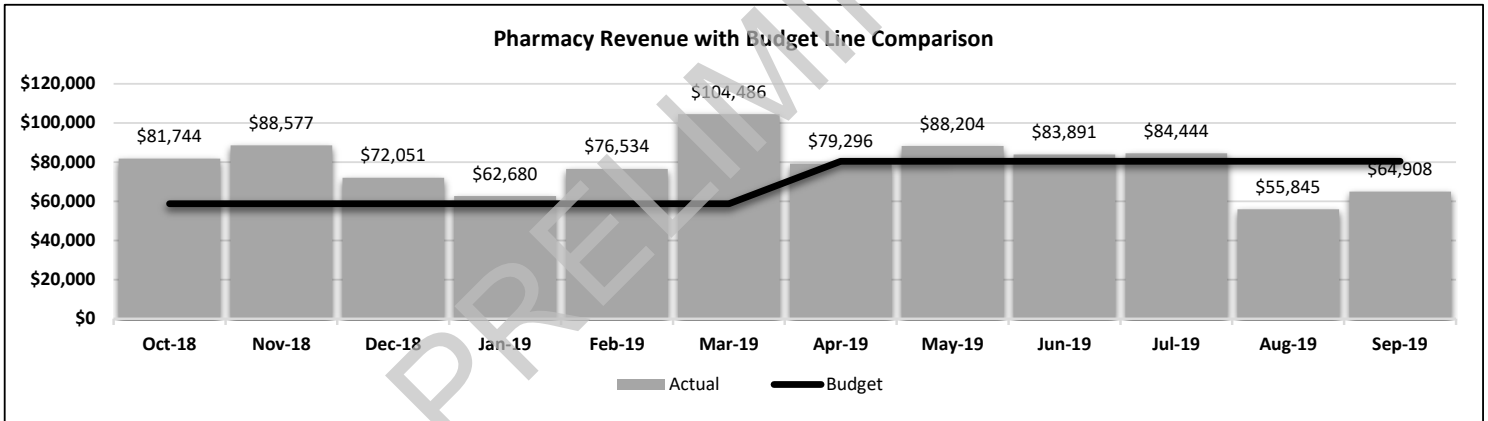
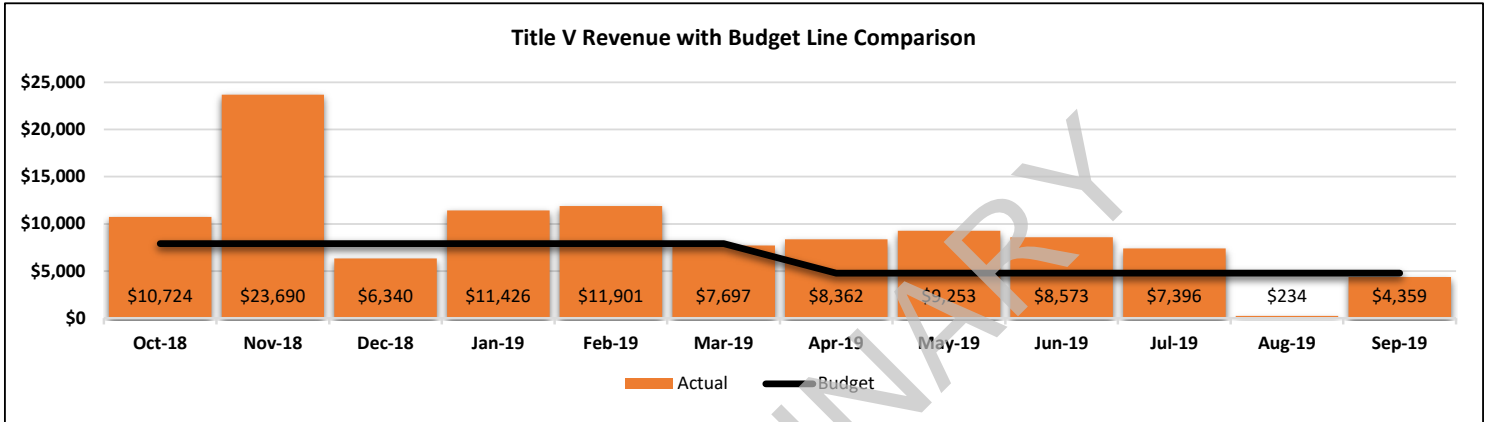
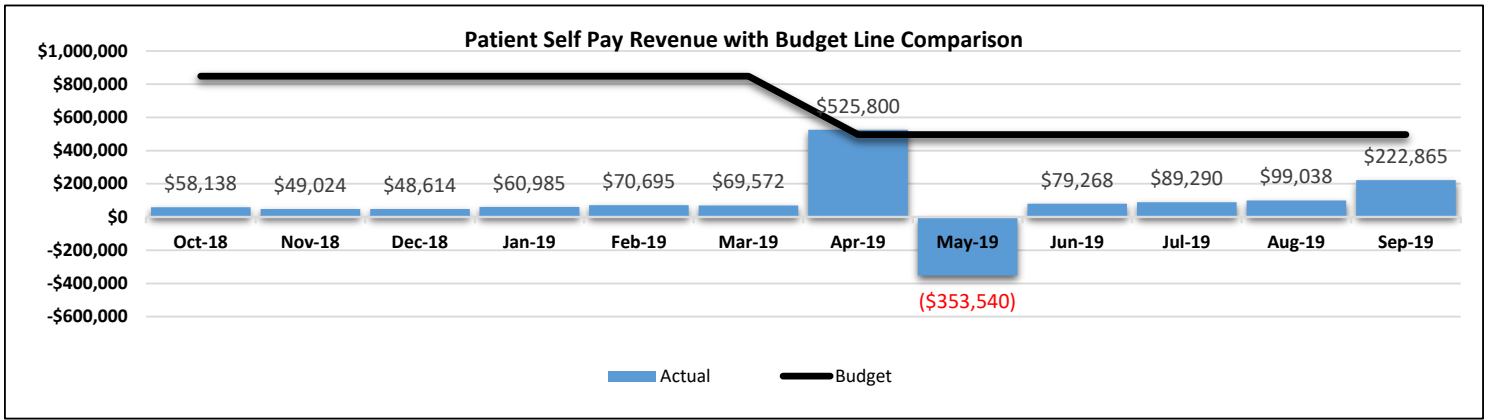


Current Period Patient Revenue with Third Party Payor Contributions Identified

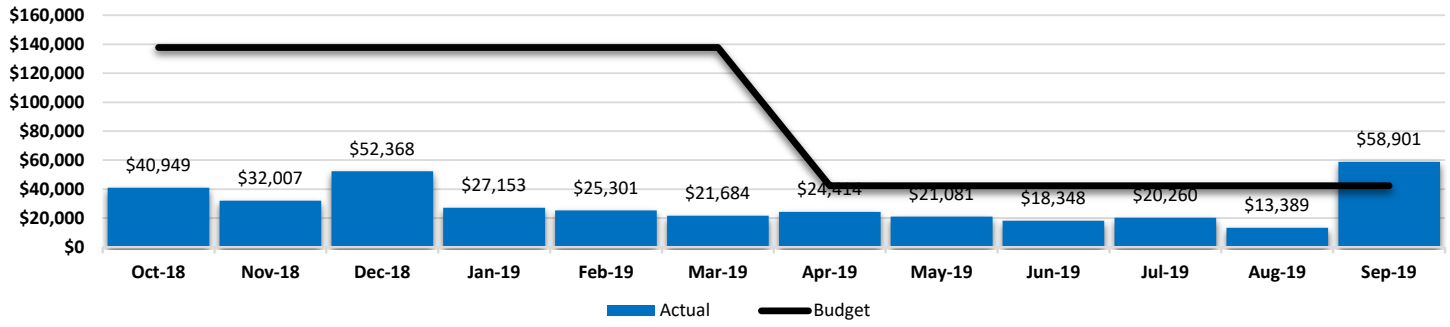


Actual Patient Revenue Rec'd vs Budget

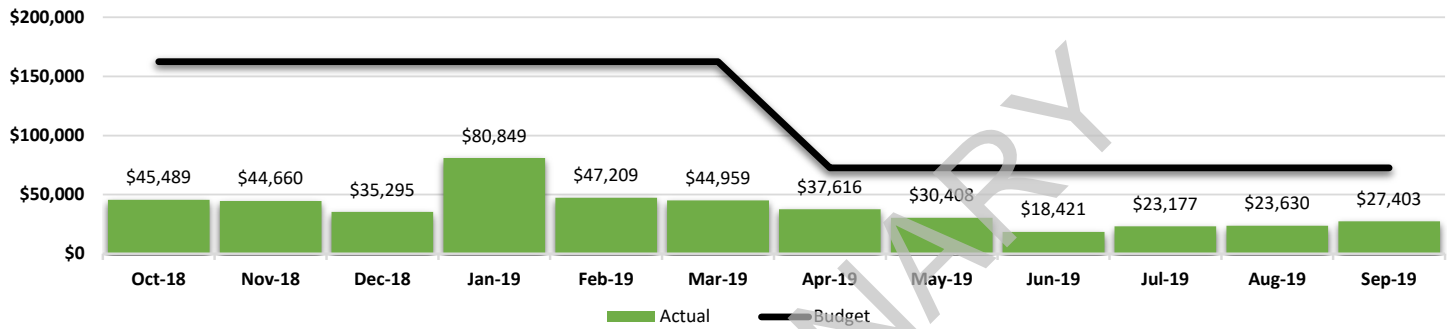




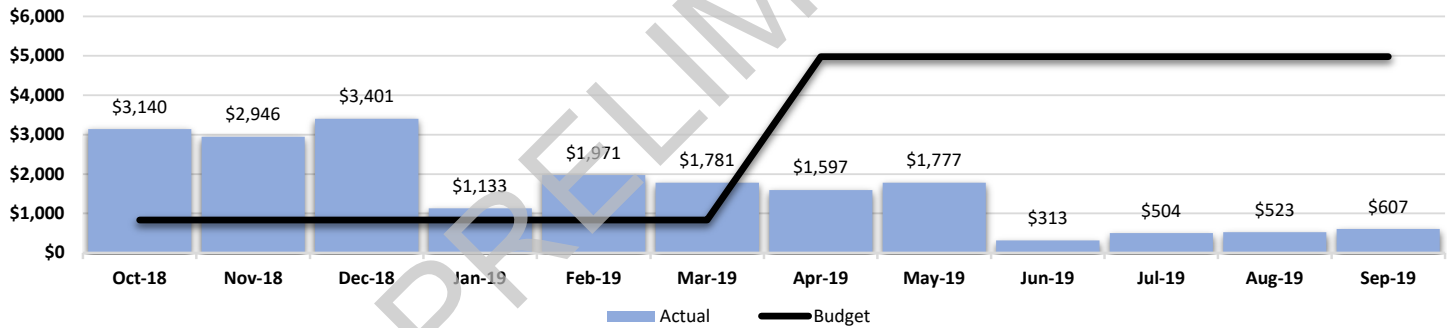
Medicare Revenue with Budget Line Comparison



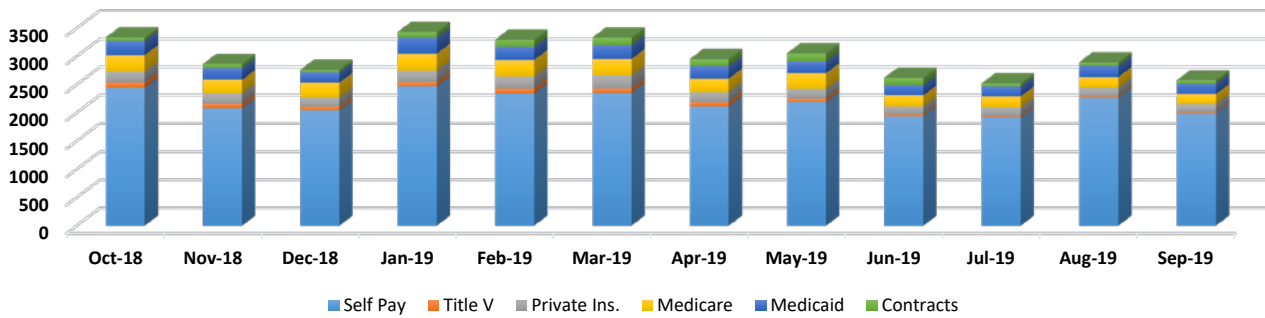
Medicaid Revenue with Budget Line Comparison



Contract Revenue with Budget Line Comparison



Total Number of Patient Visits



Coastal Health & Wellness								
Statement of Revenue and Expenses for the Period ending Sep 30, 2019								
		Period Ending	MTD	MTD Budget	YTD	YTD	YTD Budget	Annual
	Description	9/30/2019	Budget	Variance	Actual	Budget	Variance	Budget
Grouping	REVENUE							
HRSA	HHS GRANT REVENUE - Federal	\$310,668	\$260,617	\$50,051	\$1,746,916	\$1,563,700	\$183,216	\$3,127,400
Patient Rev	GRANT REVENUE - Title V	\$4,359	\$4,780	(\$420)	\$38,177	\$28,678	\$9,500	\$57,355
Patient Rev	PATIENT FEES	\$222,865	\$114,102	\$108,763	\$662,720	\$684,613	(\$21,892)	\$1,369,225
Patient Rev	PRIVATE INSURANCE	\$39,529	\$49,289	(\$9,760)	\$156,297	\$295,736	(\$139,439)	\$591,472
Patient Rev	PHARMACY REVENUE - 340b	\$64,908	\$80,417	(\$15,509)	\$456,588	\$482,500	(\$25,912)	\$965,000
Patient Rev	MEDICARE	\$58,901	\$42,380	\$16,521	\$156,393	\$254,279	(\$97,886)	\$508,558
Patient Rev	MEDICAID	\$27,403	\$72,608	(\$45,205)	\$160,654	\$435,648	(\$274,994)	\$871,296
Other Rev	LOCAL GRANTS & FOUNDATIONS	\$2,045	\$1,351	\$695	\$8,799	\$8,104	\$695	\$16,208
Other Rev	MEDICAL RECORD REVENUE	\$1,286	\$1,354	(\$69)	\$10,170	\$8,125	\$2,045	\$16,250
Other Rev	MEDICAID INCENTIVE PAYMENTS	\$0	\$0	\$0	\$3,070	\$0	\$3,070	\$0
County	COUNTY REVENUE	\$324,071	\$324,070	\$1	\$1,944,427	\$1,944,423	\$5	\$3,888,845
DSRIP	DSRIP REVENUE	\$0	\$79,167	(\$79,167)	\$0	\$475,000	(\$475,000)	\$950,000
Other Rev	MISCELLANEOUS REVENUE	\$234	\$0	\$234	\$3,059	\$0	\$3,059	\$0
Other Rev	OTHER REVENUE - SALE OF FIXED ASSET	\$2,107	\$0	\$2,107	\$3,875	\$0	\$3,875	\$0
Other Rev	INTEREST INCOME	\$8,159	\$5,750	\$2,409	\$51,615	\$34,500	\$17,115	\$69,000
Patient Rev	CONTRACT REVENUE	\$607	\$4,978	(\$4,371)	\$5,321	\$29,867	(\$24,545)	\$59,733
Other Rev	LOCAL FUNDS / OTHER REVENUE	\$1,270	\$0	\$1,270	\$3,513	\$0	\$3,513	\$0
Other Rev	CONVENIENCE FEE	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Other Rev	Fund Balance	\$0	\$0	\$0	\$84,562	\$84,562	\$0	\$182,160
	Total Revenue	\$1,068,413	\$1,040,862	\$27,551	\$5,496,156	\$6,329,733	(\$833,577)	\$12,672,502
	EXPENSES							
Personnel	SALARIES	\$472,131	\$526,677	\$54,546	\$2,930,731	\$3,160,062	\$229,331	\$6,320,124
Personnel	SALARIES, Merit Compensation	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Personnel	SALARIES, PROVIDER INCENTIVES	\$0	\$4,400	\$4,400	\$3,652	\$26,400	\$22,748	\$52,800
Personnel	SALARIES, supplemental	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Personnel	SALARIES, O/T	\$3,436	\$5,000	\$1,564	\$15,788	\$30,000	\$14,212	\$60,000
Personnel	SALARIES, PART-TIME	\$9,683	\$36,141	\$26,458	\$68,410	\$216,847	\$148,437	\$433,694
Personnel	Comp Pay	\$0	\$0	\$0	\$189	\$0	(\$189)	\$0
Personnel	FICA EXPENSE	\$33,427	\$43,775	\$10,348	\$219,723	\$262,648	\$42,925	\$525,296
Personnel	TEXAS UNEMPLOYMENT TAX	\$19	\$1,215	\$1,196	(\$446)	\$7,292	\$7,738	\$14,584
Personnel	LIFE INSURANCE	\$1,463	\$1,380	(\$83)	\$8,666	\$8,279	(\$387)	\$16,558
Personnel	LONG TERM DISABILITY INSURANCE	\$1,065	\$1,284	\$219	\$6,282	\$7,706	\$1,424	\$15,411
Personnel	GROUP HOSPITALIZATION INSURANC	\$33,056	\$46,032	\$12,976	\$33,056	\$276,192	\$243,136	\$552,383
Personnel	WORKER'S COMP INSURANCE	(\$3,835)	\$2,861	\$6,697	\$2,294	\$17,167	\$14,873	\$34,333
Personnel	EMPLOYER SPONSORED HEALTHCARE	\$6,892	\$0	(\$6,892)	\$207,671	\$0	(\$207,671)	\$0
Personnel	HRA EXPENSE	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Personnel	PENSION / RETIREMENT	\$10,235	\$12,131	\$1,846	\$64,001	\$72,786	\$8,785	\$145,572
Contractua	OUTSIDE LAB CONTRACT	\$14,800	\$30,475	\$15,675	\$106,125	\$182,850	\$76,725	\$365,700
Contractua	OUTSIDE X-RAY CONTRACT	\$1,884	\$4,428	\$2,544	\$12,048	\$26,565	\$14,517	\$53,130
Contractua	MISCELLANEOUS CONTRACT SERVICES	\$22,864	\$23,990	\$1,126	\$107,775	\$143,937	\$36,162	\$287,874
Personnel	TEMPORARY STAFFING	(\$570)	\$0	\$570	\$40,206	\$0	(\$40,206)	\$0
Contractua	CHW CONTRACT BILLING SERVICE	\$7,297	\$9,000	\$1,703	\$39,591	\$54,000	\$14,409	\$108,000
IGT	IGT REIMBURSEMENT	\$0	\$37,500	\$37,500	\$0	\$225,000	\$225,000	\$450,000
Contractua	JANITORIAL CONTRACT	\$13,682	\$13,926	\$244	\$82,331	\$83,555	\$1,223	\$167,109
Contractua	PEST CONTROL	\$80	\$80	(\$0)	\$481	\$480	(\$1)	\$960
Contractua	SECURITY	\$465	\$3,910	\$3,445	\$14,603	\$23,460	\$8,857	\$46,920
Supplies	OFFICE SUPPLIES	\$4,136	\$5,115	\$978	\$155,832	\$30,688	(\$125,144)	\$61,376
Supplies	OPERATING SUPPLIES	\$34,492	\$24,032	(\$10,461)	\$196,665	\$144,191	(\$52,474)	\$288,382
Supplies	OUTSIDE DENTAL SUPPLIES	\$2,815	\$2,000	(\$815)	\$19,860	\$12,000	(\$7,860)	\$24,000
Supplies	PHARMACEUTICAL SUPPLIES	\$35,413	\$89,889	\$54,476	\$230,464	\$539,334	\$308,870	\$1,078,668
Supplies	JANITORIAL SUPPLIES	\$0	\$333	\$333	\$0	\$2,000	\$2,000	\$4,000
Supplies	PRINTING SUPPLIES	\$20	\$200	\$180	\$2,366	\$1,200	(\$1,166)	\$2,400
Supplies	UNIFORMS	\$0	\$417	\$417	\$1,198	\$2,500	\$1,303	\$5,000
Other	POSTAGE	\$1,575	\$667	(\$908)	\$5,328	\$4,000	(\$1,328)	\$8,000
Other	TELEPHONE	\$2,690	\$4,066	\$1,375	\$19,401	\$24,395	\$4,994	\$48,790
Other	WATER	\$31	\$31	\$1	\$183	\$188	\$5	\$375
Other	ELECTRICITY	\$1,464	\$2,083	\$619	\$8,745	\$12,500	\$3,755	\$25,000
Travel	TRAVEL, LOCAL	\$369	\$383	\$14	\$2,351	\$2,300	(\$51)	\$4,600
Travel	TRAVEL, OUT OF TOWN	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Travel	LOCAL TRAINING	\$967	\$417	(\$550)	\$5,590	\$2,500	(\$3,090)	\$5,000
Travel	TRAINING, OUT OF TOWN	\$2,546	\$1,719	(\$827)	\$12,083	\$10,312	(\$1,771)	\$20,624
Other	RENTALS	\$3,253	\$3,290	\$37	\$19,007	\$19,740	\$733	\$39,480
Other	LEASES	\$43,121	\$43,702	\$581	\$258,724	\$262,212	\$3,488	\$524,424
Other	MAINTENANCE / REPAIR, EQUIP.	\$9,378	\$6,977	(\$2,401)	\$42,967	\$41,860	(\$1,107)	\$83,720
Other	MAINTENANCE / REPAIR, AUTO	\$0	\$42	\$42	\$0	\$250	\$250	\$500
Other	FUEL	\$0	\$42	\$42	\$0	\$250	\$250	\$500
Other	MAINTENANCE / REPAIR, BLDG.	\$325	\$417	\$92	\$2,575	\$2,500	(\$75)	\$5,000
Other	MAINT/REPAIR, IT Equip.	\$0	\$1,273	\$1,273	\$3,168	\$7,638	\$4,469	\$15,275
Other	MAINTENANCE / Preventative, AUTO	\$0	\$42	\$42	\$0	\$250	\$250	\$500
Other	INSURANCE, AUTO/Truck	\$200	\$208	\$8	\$1,199	\$1,250	\$51	\$2,500
Other	INSURANCE, GENERAL LIABILITY	\$1,026	\$1,029	\$3	\$6,158	\$6,175	\$17	\$12,350
Other	INSURANCE, BLDG. CONTENTS	\$1,451	\$1,633	\$181	\$8,708	\$9,798	\$1,089	\$19,595
Other	Settlements	\$0	\$0	\$0	\$87,500	\$0	(\$87,500)	\$0

Coastal Health & Wellness

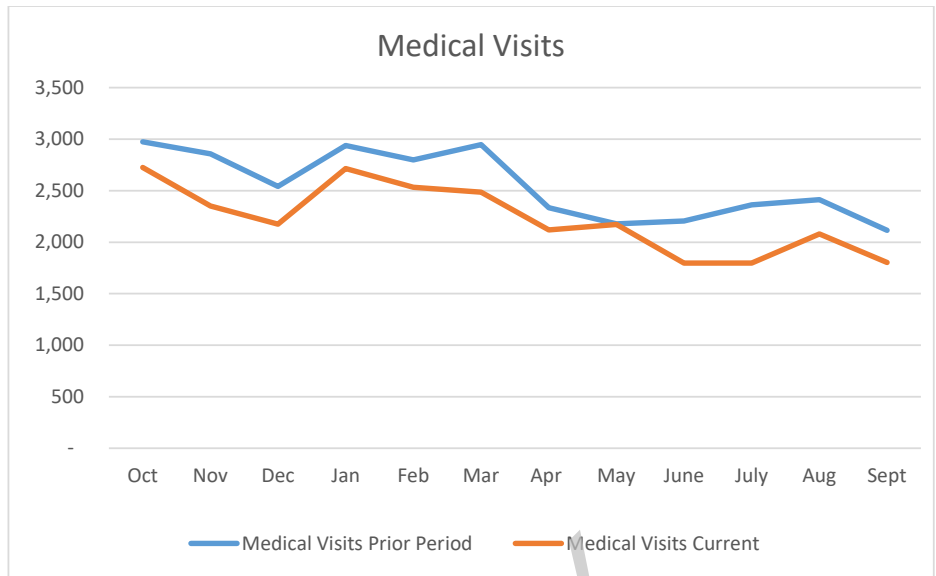
Statement of Revenue and Expenses for the Period ending Sep 30, 2019

		Period Ending	MTD	MTD Budget	YTD	YTD	YTD Budget	Annual
	Description	9/30/2019	Budget	Variance	Actual	Budget	Variance	Budget
Other	COMPUTER EQUIPMENT	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Other	OPERATING EQUIPMENT	\$0	\$0	\$0	\$18,500	\$0	(\$18,500)	\$0
Other	BUILDING IMPROVEMENTS	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Other	NEWSPAPER ADS	\$458	\$1,500	\$1,042	\$5,795	\$9,000	\$3,205	\$18,000
Other	SUBSCRIPTIONS, BOOKS, ETC	\$484	\$125	(\$359)	\$634	\$750	\$116	\$1,500
Other	ASSOCIATION DUES	\$2,667	\$2,883	\$216	\$16,000	\$17,296	\$1,296	\$34,592
Other	IT SOFTWARE, LICENSES, INTANGIBLES	\$12,350	\$18,355	\$6,005	\$137,269	\$110,133	(\$27,137)	\$220,265
Other	PROF FEES/LICENSE/INSPECTIONS	\$25	\$203	\$178	\$717	\$1,215	\$498	\$2,430
Other	PROFESSIONAL SERVICES	\$1,242	\$1,875	\$633	\$17,157	\$11,250	(\$5,907)	\$22,500
Other	MED/HAZARD WASTE DISPOSAL	\$569	\$483	(\$85)	\$3,270	\$2,900	(\$370)	\$5,800
Other	TRANSPORTATION CONTRACT	\$546	\$650	\$104	\$2,743	\$3,900	\$1,157	\$7,800
Other	BOARD MEETING OPERATIONS	\$85	\$29	(\$56)	\$2,057	\$175	(\$1,882)	\$350
Other	SERVICE CHG - CREDIT CARDS	\$751	\$685	(\$66)	\$4,358	\$4,110	(\$248)	\$8,220
Other	CASHIER OVER / SHORT	\$0	\$0	\$0	\$5	\$0	(\$5)	\$0
Other	LATE CHARGES	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Other	BAD DEBT EXPENSE	\$40,304	\$35,045	(\$5,259)	\$253,251	\$210,269	(\$42,983)	\$420,537
Other	MISCELLANEOUS EXPENSE	\$0	\$0	\$0	\$1,946	\$0	(\$1,946)	\$0
	Total Expenses	\$832,878	\$1,056,042	\$223,164	\$5,516,951	\$6,336,251	\$819,300	\$12,672,502
	Net Change in Fund Balance	\$235,535	(\$15,180)	\$250,715	(\$20,795)	(\$6,518)	(\$14,277)	(\$0)
					Expenses Fund Bal. Reserve	(\$84,562)		
						(\$105,357)		

PRELIMINARY

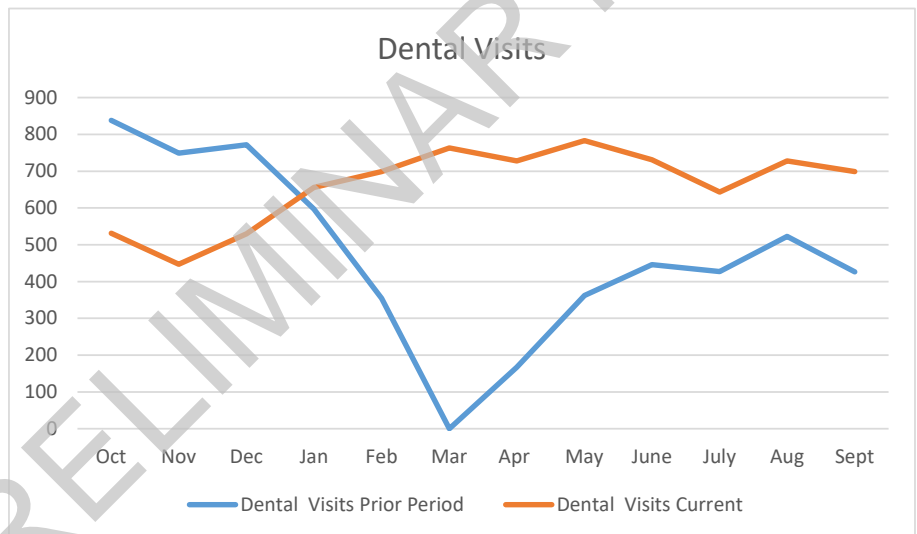
Medical Visits

	<u>Prior Period</u>	<u>Current</u>
Oct	2,974	2,725
Nov	2,857	2,351
Dec	2,542	2,175
Jan	2,939	2,714
Feb	2,798	2,534
Mar	2,946	2,484
Apr	2,334	2,119
May	2,177	2,171
June	2,205	1,797
July	2,363	1,798
Aug	2,413	2,081
Sept	2,115	1,804
	<u>28,548</u>	<u>26,753</u>



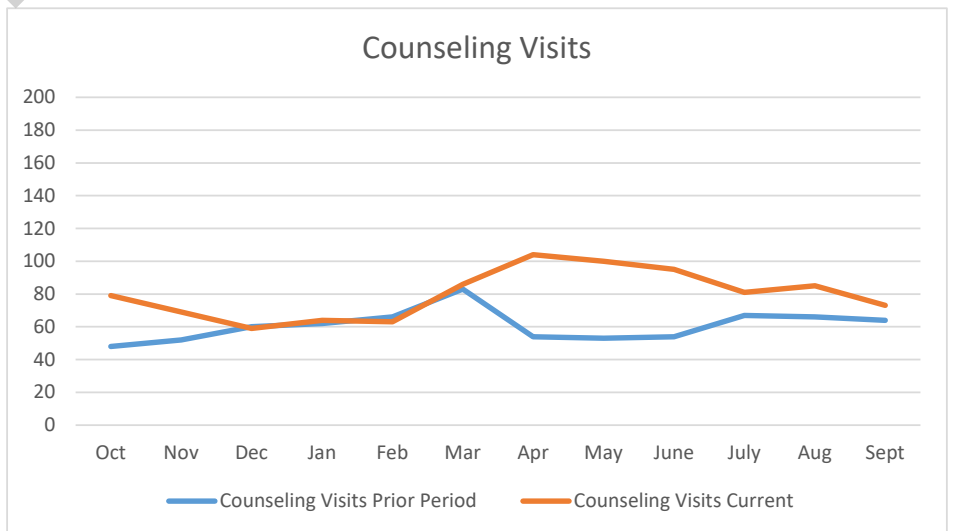
Dental Visits

	<u>Prior Period</u>	<u>Current</u>
Oct	838	531
Nov	749	447
Dec	772	530
Jan	597	656
Feb	354	699
Mar	0	763
Apr	167	728
May	362	783
June	446	731
July	427	643
Aug	523	728
Sept	426	699
	<u>5,235</u>	<u>7,938</u>



Counseling Visits

	<u>Prior Period</u>	<u>Current</u>
Oct	48	79
Nov	52	69
Dec	60	59
Jan	62	64
Feb	66	63
Mar	83	86
Apr	54	104
May	53	100
June	54	95
July	67	81
Aug	66	85
Sept	64	73
	<u>665</u>	<u>958</u>



Vists by Financial Class - Actual vs. Budget
As of September 30, 2019 (Grant Year 4/1/19-3/31/20)

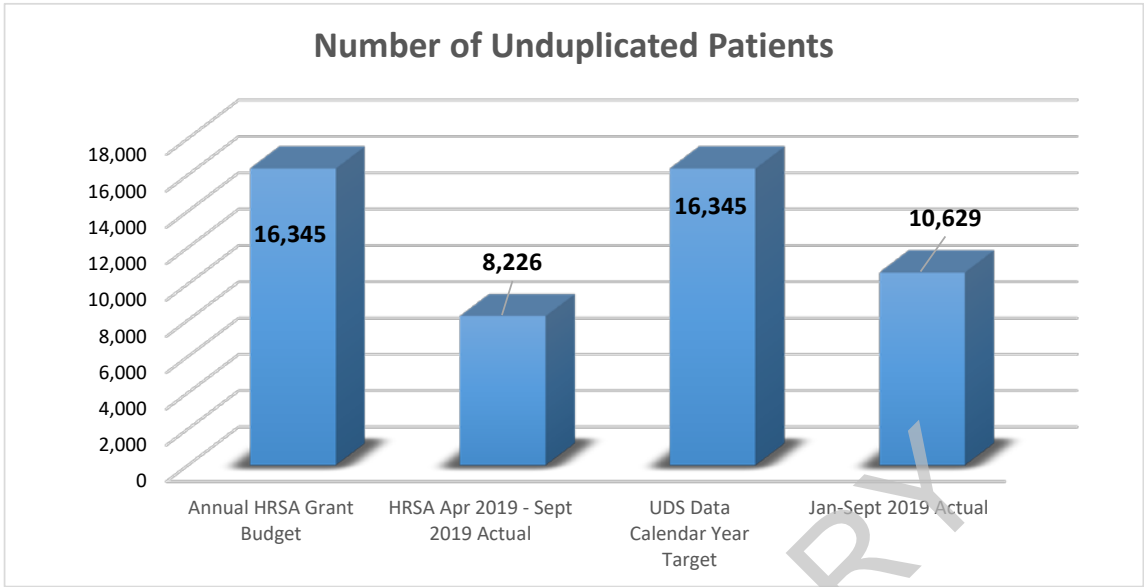
	Annual HRSA		Over/(Under)		YTD Actual	YTD Budget	Over/(Under) YTD Budget	% Over/ (Under) YTD Budget
	Grant Budget	MTD Actual	MTD Budget	MTD Budget				
Medicaid	5,442	188	454	(266)	1,193	2,721	(1,528)	-56%
Medicare	3,640	178	303	(125)	1,289	1,820	(531)	-29%
Other Public (Title V, Contract)	1,728	75	144	(69)	530	864	(334)	-39%
Private Insurance	4,718	146	393	(247)	962	2,359	(1,397)	-59%
Self Pay	31,361	1,989	2,613	(624)	12,699	15,681	(2,982)	-19%
	46,889	2,576	3,907	(1,331)	16,673	23,445	(6,772)	-29%

Unduplicated Patients - Current vs. Prior Year
UDS Data Calendar Year
January through December

	Current Year Annual Target	Jan-Sept 2018 Actual	Jan-Sept 2019 Actual	Increase/ (Decrease) Prior Year	% of Annual Target

Unduplicated Patients - Current vs. Prior Year
HRSA Grant Year
April through March

	Annual HRSA Grant Budget	Apr 2018 - Sept 2018 Actual	Apr 2019 - Sept 2019 Actual	Increase/ (Decrease) Prior Year	% of Annual Target



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PRELIMINARY



COASTAL HEALTH & WELLNESS

GOVERNING BOARD

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

Governing Board

October 2019

Item #9

**Consider for Approval Quarterly Visit and Analysis Report Including
Breakdown of New Patients by Payor Source**

**Coastal Health & Wellness - Quarterly Visit & Analysis Report
for the period ending September 30, 2019**

**based on UDS Reporting period (January 1 to December 31)*

Total Visits by Financial Class	September 2019	September 2018	% Change	* YTD Average		% Change	* YTD Payor Mix		% Change
				2019	2018		2019	2018	
Self Pay	1,989	1,940	3%	2,231	2,061	8%	75.1%	70.8%	4%
Medicare	178	255	-30%	242	296	-18%	8.1%	10.2%	-2%
Medicaid	188	178	6%	221	241	-8%	7.4%	8.3%	-1%
Contract	56	41	37%	72	58	26%	2.4%	2.0%	0%
Private Insurance	146	130	12%	181	196	-8%	6.1%	6.7%	-1%
Title V	19	64	-70%	24	60	-60%	0.8%	2.1%	-1%
Total	2,576	2,608	-1%	2,970	2,911	2%	100%	100%	0%

Department	* YTD Total Visits		% Change
	2019	2018	
Medical	19,555	22,325	-12%
Dental	6,431	3,304	95%
Counseling	748	569	31%
Total	26,734	26,198	2%

Unduplicated Visits	* YTD Total Users		% Change
	2019	2018	
Medical	8,337	9,444	-12%
Dental	2,159	1,281	69%
Counseling	133	100	33%
Total	10,629	10,825	-2%

NextGen / Crystal Reports - Summary Aging by Financial Class for the period ending September 30, 2019 (based on encounter date)										Goal is 45-75 days	
										Days in A/R	
	0-30	31-60	61-90	91-120	121-150	151-180	181-up	Total	%	Current Period	Last Qtr
Self Pay	\$19,947	\$56,719	\$59,137	\$51,927	\$54,999	\$54,958	\$570,428	\$868,115	78%	287	295
Medicare	15,890	16,638	4,615	3,863	2,329	3,410	21,748	\$68,493	6%	57	61
Medicaid	12,088	18,203	7,884	7,831	5,387	4,199	(15,891)	\$39,700	4%	34	23
Contract	1,599	7,178	8,226	4,619	2,760	6,437	112,958	\$143,776	13%	336	265
Private Insurance	10,234	22,878	7,145	6,958	3,985	1,608	8,513	\$61,322	6%	68	64
Title V	919	1,846	3,529	2,381	-	(7)	795	\$9,462	1%	113	179
Unapplied	(78,842)							(78,842)	-7%	-----	-----
Totals	(78,842)	\$123,462	\$90,535	\$77,578	\$69,461	\$70,606	\$698,551	\$1,112,027	100%	149	148

Previous Quarter Balances	(78,842)	\$123,462	\$90,535	\$77,578	\$69,461	\$70,606	\$698,551	\$1,112,027	100%	149	148
% Change	-46%	11%	-12%	-14%	-28%	-30%	3%	-3%			

Charges & Collections	September 2019	September 2018	% Change	* YTD 2019	YTD 2018	% Change
Billed	\$737,737	\$649,699	14%	\$7,369,332	\$6,430,945	14.59%
Adjusted	(540,934)	(461,855)	17%	(5,533,695)	(4,621,482)	19.74%
Net Billed	\$196,803	\$187,844	5%	\$1,835,637	\$1,809,463	1.45%
Collected	\$139,003	\$115,479	20%	\$1,515,360	\$1,227,450	23%
% Net Charges collected	71%	61%	15%	83%	68%	22%

Payor	YTD Current Period				YTD Prior Year			
	Visits	Payor Mix	Net Revenue per Visit	(Net Billed) Net Revenue	Visits	Payor Mix	Net Revenue per Visit	(Net Billed) Net Revenue
Self Pay	23,211	73.5%	\$35.20	\$817,006	21,701	70.9%	\$31.23	\$677,671
Medicare	2,491	7.9%	\$129.90	323,589	3,001	9.8%	\$145.90	437,855
Medicaid	2,314	7.3%	\$135.40	313,322	2,432	8.0%	\$136.77	332,632
Contract	1,400	4.4%	\$82.60	115,636	734	2.4%	\$96.38	70,741
Private Insurance	1,953	6.2%	\$124.70	243,547	2,103	6.9%	\$115.93	243,792
Title V	222	0.7%	\$101.52	22,536	620	2.0%	\$75.44	46,772
Total	31,591	100%	\$58.11	\$1,835,637	30,591	100%	\$59.15	\$1,809,463

Item	2019	2018
Self Pay - Gross Charges	\$5,095,322	\$4,185,901
Self Pay - Collections	\$725,073	\$485,158
% Gross Self Pay Charges Collected	14.2%	11.6%
% Net Self Pay Charges Collected	88.7%	71.6%

Coastal Health & Wellness
New Patients By Financial Class
From 1/1/2019 to 9/30/19

Summary	Current Period		Prior Period 2018	
	New Patients	Current %	New Patients	%
Self Pay	2,123	78.7%	1,904	77.1%
Medicaid	193	7.2%	137	5.5%
Medicare	80	3.0%	108	4.4%
Private Insurance	186	6.9%	223	9.0%
Title V	62	2.3%	42	1.7%
Contracts	52	1.9%	57	2.3%
Total	2,696	100.0%	2,471	100.0%

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COASTAL HEALTH & WELLNESS

GOVERNING BOARD

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

Governing Board

October 2019

Item #10

**Consider for Approval Quarterly Access to
Care Report**

**Coastal Health & Wellness – Access to Care Report
July, August, September 2019 (3rd Quarter)**

Goals: Utilization % = 90% (minus Counseling); No Show % = 20%

	Available Appts	# Appts Scheduled	% Utilization	# Appts Kept	% Appts Kept	# No Shows	% No Shows
Medical	4,458	4,478	100.5%	3,468	77%	1,010	23%
Dental	2,099	2023	96%	1,501	74%	522	26%
Dental Hygienist	370	350	95%	291	83%	59	17%
Counseling	826	388(534)	65%*	256	66%	132	34%
Galveston	Available Appts	# Appts Scheduled	% Utilization	# Appts Kept	% Appts Kept	# No Shows	% No Shows
Medical	1,864	1,822	98%	1,331	73%	491	27%
Dental	591	550(561)	95%*	400	73%	150	28%
Dental Hygienist	84	76	90%	65	86%	11	14%
Counseling	416	109(161)	39%*	78	72%	31	28%

*Appointment slots / Available Appointments

April, May, June 2019 (2nd Quarter)

	Available Appts	# Appts Scheduled	% Utilization	# Appts Kept	% Appts Kept	# No Shows	% No Shows
Medical	6,165	5,874	95%	4,415	75%	1,459	25%
Dental	2,617	2,432	93%	1,781	73%	651	27%
Dental Hygienist	350	327	93%	273	83%	54	17%
Counseling	901	415	46%	302	73%	113	27%
Galveston	Available Appts	# Appts Scheduled	% Utilization	# Appts Kept	% Appts Kept	# No Shows	% No Shows
Medical	2,486	2,251	91%	1,685	75%	565	25%
Dental	430	400	93%	290	73%	110	28%
Dental Hygienist	96	92	96%	81	88%	11	12%
Counseling	430	114	27%	71	62%	43	38%

Change in Comparison to Prior Quarter

	Available Appointments		Utilization Rate		No Show Rate	
	Texas City	Galveston	Texas City	Galveston	Texas City	Galveston
Medical	(1,707)	(622)	5%	7%	-2%	2%
Dental	(518)	161	3%	2%	-1%	0%
Dental Hygienist	20	(12)	2%	-6%	0%	2%
Counseling	(75)	(14)	19%	12%	7%	-10%

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COASTAL HEALTH & WELLNESS

GOVERNING BOARD

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

Governing Board

October 2019

Item #11

**Consider for Approval Quarterly Patient
Satisfaction Survey Report**

Patient Satisfaction Survey Responses
July 1 - September 30, 2019

Total Responses	605	
Galveston	272	45%
Texas City	333	55%

Type of Visit		
Medical	465	77%
Dental	112	19%
Counseling	28	5%

Appointment Time Based on Need	Very Poor	Poor	Average	Good	Excellent	Weighted Avg
Medical	0.9%	1.2%	5.5%	17.2%	75.2%	4.65
Dental	1.0%	1.0%	4.8%	15.4%	77.9%	4.68
Counseling	0.0%	0.0%	7.7%	15.4%	76.9%	4.69

The Appointment Check-in Process	Very Poor	Poor	Average	Good	Excellent	Weighted Avg
Medical	0.0%	0.5%	3.7%	16.6%	79.3%	4.75
Dental	0.0%	1.0%	1.0%	15.4%	82.7%	4.8
Counseling	0.0%	3.9%	3.9%	15.4%	76.9%	4.65

The Staff on Being Friendly & Helpful	Very Poor	Poor	Average	Good	Excellent	Weighted Avg
Medical	0.7%	0.7%	3.0%	10.6%	85.1%	4.79
Dental	0.0%	1.9%	2.9%	9.6%	85.6%	4.79
Counseling	0.0%	0.0%	3.9%	15.4%	80.8%	4.77

How Well Did Staff Explain Things to You So You Could Understand	Very Poor	Poor	Average	Good	Excellent	Weighted Avg
Medical	1.4%	0.2%	3.5%	12.6%	82.3%	4.74
Dental	0.0%	1.0%	5.8%	9.6%	83.7%	4.76
Counseling	0.0%	0.0%	0.0%	19.2%	80.8%	4.81

The Quality of Care you Received Today	Very Poor	Poor	Average	Good	Excellent	Weighted Avg
Medical	1.8%	2.1%	2.1%	13.1%	80.9%	4.69
Dental	1.0%	2.9%	3.9%	8.7%	83.7%	4.71
Counseling	0.0%	0.0%	0.0%	11.5%	88.5%	4.88

The Clinic on Being Clean & Sanitary	Very Poor	Poor	Average	Good	Excellent	Weighted Avg
Medical	0.2%	0.5%	3.7%	14.0%	81.6%	4.76
Dental	0.0%	0.0%	1.0%	10.6%	88.5%	4.88
Counseling	0.0%	0.0%	0.0%	15.4%	84.6%	4.85

What is the Likelihood that you Would Recommend Coastal Health & Wellness to a Friend or Family Member	Very Poor	Poor	Average	Good	Excellent	Weighted Avg
Medical	1.4%	1.2%	3.2%	12.4%	81.8%	4.72
Dental	1.0%	0.0%	4.8%	9.6%	84.6%	4.77
Counseling	0.0%	0.0%	7.7%	15.4%	76.9%	4.69

Average All Categories - Current Quarter	0%	1%	3%	13%	82%	4.75
Average All Categories - Previous Quarter	3.0%	1.0%	4.0%	20.0%	71%	4.54

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COASTAL HEALTH & WELLNESS

GOVERNING BOARD

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

Governing Board

October 2019

Item #12

Consider for Approval Risk Management Plan



Effective: XX/XX/XXXX

Last Approved: XX/XX/XXXX

Expires: XX/XX/XXXX

Risk Management Plan

1. PURPOSE

The purpose of the Coastal Health & Wellness Risk Management Plan (the “Plan”) is to address visitor, third party, volunteer, and employee safety as well as potential business, operational, and property risks. The Risk Management Plan is the primary tool for outlining Coastal Health & Wellness’ (“CHW”) overall risk management procedures.

The focus of the Risk Management Plan is to provide an ongoing, comprehensive, and systematic approach to reducing exposure to risk. Risk management activities include identifying, investigating, analyzing, and evaluating risks, followed by selecting and implementing the most appropriate methods for correcting, reducing and/or eliminating them.

2. GUIDING PRINCIPLES

This Risk Management Plan supports the Coastal Health & Wellness philosophy that patient safety and risk management are everyone’s responsibility. Teamwork and participation among management, providers, volunteers, and staff are essential for an efficient and effective patient safety and risk management plan. The Plan will be implemented through the coordination of multiple organizational functions and the activities of multiple staff members.

Coastal Health & Wellness supports the establishment of a just culture that emphasizes implementing evidence-based best practices, learning from error analysis, and providing constructive feedback rather than blame and punishment. In a just culture, unsafe conditions and hazards are readily and proactively identified, medical or patient care errors are reported and analyzed, mistakes are openly discussed, and suggestions for systemic improvements are welcomed. Individuals are still held accountable for compliance with patient safety and risk management practices. As such, if evaluation and investigation of an error or event reveal reckless behavior or willful violation of policies, disciplinary actions can be taken.

Principles of this Plan provide the foundation for developing key policies and procedures for risk management activities, including but not limited the following:

- Claims and insurance management;
- Complaint resolution;
- Confidentiality and release of information;
- Compliance efforts;

- Safe and secure use of technology;
- Event investigation, root-cause analysis, and follow-up;
- Provider and staff education, competency validation, credentialing and privileging requirements, and background checks;
- Systems for monitoring and tracking referrals (specialty care, hospital and or emergency department admissions) and diagnostic laboratory values and other tests;
- Reporting and management of adverse events and near misses;
- Trend analysis of events, near misses, and claims; and
- Implementing performance improvement strategies to mitigate risk.

2.1 Leadership

The success of the Coastal Health & Wellness Risk Management Plan requires top-level commitment and support. The Governing Board by majority vote authorizes adoption of this Plan.

The Governing Board and CHW executives, including but not limited to the Executive Director, Medical Director, Dental Director, Chief Nursing Officer and Chief Compliance Officer are committed to promoting the safety of all patients, visitors, employees, volunteers, and other individuals involved in operations of the organization. The Risk Management Plan is designed to serve as an umbrella policy, in conjunction with the Risk Management Training Plan, aimed at reducing system-related errors and potentially unsafe conditions by implementing continuous improvement strategies to support an organizational culture of safety.

3. PLAN GOALS AND OBJECTIVES

The Risk Management Plan sets forth goals and objectives, which include the following:

- Continuously improving patient safety and minimizing or preventing the occurrence of errors, events, and system breakdowns leading to harm of patients, staff, volunteers, visitors, and others through proactive risk management and patient safety and emergency operations activities.
- Minimizing adverse effects of errors, events, and system breakdowns when they do occur.
- Minimizing losses to the organization by proactively identifying, analyzing, preventing, and controlling potential clinical, business, financial, and operational risks.
- Achieving requirements required by accrediting organizations.
- Protecting human and intangible resources (e.g. reputation).

4. SCOPE AND FUNCTIONS OF THE PLAN

The Coastal Health & Wellness Risk Management Plan interfaces with all operational departments and services offered through the clinic, as well as HRSA.

4.1 Functional Interfaces

Functional interfaces with the Risk Management Plan include areas covered under the Coastal Health & Wellness Environment of Care plans, as well as credentialing and privileging, information technology,

event reporting and investigation, performance assessment and improvement, volunteers, infection control, and administration. All areas work together on risk reduction strategies and methods as defined in this Plan.

4.2 Specific Components

- a) The Risk Management Plan will include the following components: Developing systems for overseeing the reporting of adverse events, near misses, and potentially unsafe conditions.
 - i. Reporting responsibilities may include internal reporting as well as external reporting to regulatory, governmental, or voluntary agencies.
- b) Ensuring the collection and analysis of data to monitor the performance of processes that involve risk or that may result in serious adverse events, near misses, and potentially unsafe conditions; providing feedback to providers and staff; and using this data to facilitate systems improvements to reduce the probability of occurrence of future related events.
- c) Ensuring compliance with data collection and reporting requirements of governmental, regulatory, and accrediting agencies.
- d) Facilitating and ensuring the implementation of patient safety initiatives that include tracking systems for preventive screenings and diagnostic tests, medication safety systems, and emergency management programs.
- e) Facilitating and ensuring provider and staff participation in educational programs on patient safety and risk management.
- f) Facilitating a culture of safety in the organization that embodies an atmosphere of mutual trust in which all providers and staff members can talk freely about safety problems and potential solutions without fear of retribution. This ordinarily involves performing safety culture surveys and assessments.
- g) Proactively advising the organization on strategies to reduce unsafe situations and improve the overall environmental safety of patients, visitors, staff, and volunteers.
- h) Preventing and minimizing the risk of liability to the health center, and protecting the financial, human, and other tangible and intangible assets of the health center.
- i) Decreasing the likelihood of claims and lawsuits by educating patients and their families about proper health practices. This includes communicating and disclosing errors and events that occur in the course of patient care with a plan to manage any adverse effects or complications.
- j) Investigating and assisting in claim resolution to minimize financial exposure.
- k) Reporting claims and potentially compensable events to the appropriate entity, including the U.S. Department of Health and Human Services Federal Tort Claims Act (“FTCA”) claims (as appropriate) and other insurers in accordance with the requirements of the insurance policy/contract and FTCA requirements.
- l) Supporting quality assessment and improvement programs throughout the organization.
- m) Implementing programs that fulfill regulatory, legal, and accreditation requirements.
- n) Establishing an ongoing Quality Assurance and Risk Management Committee composed of representatives from key clinical and administrative departments and services.
- o) Monitoring the effectiveness and performance of risk management actions. Performance monitoring data may include the following:

- i. Claims and claim trends;
 - ii. Culture of safety surveys;
 - iii. Event trending data;
 - iv. Ongoing risk assessment information;
 - v. Patient's or family's perceptions of how well the organization meets their needs and expectations (i.e. patient satisfaction survey data); and
 - vi. Quality performance data.
- p) Completing insurance and deeming applications.
- q) Developing and monitoring effective handoff processes for continuity of patient care.

5. ADMINISTRATIVE AND COMMITTEE STRUCTURE AND MECHANISMS FOR COORDINATION

The Risk Management Plan is administered through the Quality Assurance and Risk Management Committee, which is led by the Executive Director and the Chief Nursing Officer, and by the Chief Compliance Officer who acts as the Risk Manager. The Risk Manager reports to the Executive Director and interacts with administration, staff, medical providers, and other professionals in order to meet program goals and objectives.

The Risk Manager is responsible for overseeing day-to-day monitoring of risk management activities and for investigating and reporting to the applicable insurance carrier actual or potential clinical, operational, or business claims or lawsuits arising out of the organization, according to requirements specified in the insurance policy or contract. The Risk Manager serves as the primary contact between the organization and other external parties on all matters relative to risk identification, prevention, and control, as well as risk retention and risk transfer. The Risk Manager oversees the reporting of events to external organizations, per regulations and contracts, and communicates analysis and feedback of reported Risk Management information to the organization for action.

6. REPORTING REQUIREMENTS, MONITORING, AND CONTINUOUS IMPROVEMENT

The Quality Assurance and Risk Management Committee reviews risk management activities monthly. The Risk Manager reports activities and outcomes (e.g., claims activity, risk and safety assessment results, event report summaries, and trends) to the Governing Board and the Governing Board Quality Assurance Committee on a quarterly basis. These reports inform members of the Governing Board of efforts made to identify and reduce risks, reports on the success of these activities, and communicates outstanding issues that require input or support from the Governing Board for action or resolution. Data reporting may include event trends, claims analysis, frequency and severity data, credentialing activity, relevant provider and staff education, and risk management, emergency operation and patient safety activities. In accordance with the organization's bylaws, recommendations from the Quality Assurance

and Risk Management Committee that rise to the level of requiring Board approval are submitted as needed. Goals are developed to remain consistent with established risk management goals and Environment of Care measures as determined by the Quality Assurance and Risk Management Committee and/or the Governing Board.

Documentation is retained in the form of meeting minutes for the applicable body.

7. CONFIDENTIALITY

Any and all documents and records associated with the Risk Management Plan and subjected to legally permissible withholdings shall be privileged and confidential to the extent provided by state and federal law. Confidentiality protections may include attorney/client privilege, attorney work product, Joint Commission survey reports, and peer review protections.

The signatures below represent acceptance of the Risk Management Plan.

Risk Manager Approval: _____

Date: _____

Executive Director Approval: _____

Date: _____

Medical Director Approval: _____ - _____

Date: _____

Governing Board Approval: _____

Date: _____

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COASTAL HEALTH & WELLNESS

GOVERNING BOARD

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

Governing Board

October 2019

Item #13

**Consider for Approval Quarterly Compliance and
Risk Management Report**

Coastal Health & Wellness Governing Board
Quarter 2, FY20 – Compliance Report & Risk Management Goal Tracking

Internal Audits		
<i>DEPARTMENT- DATE CONDUCTED</i>	<i>TYPE OF AUDIT & FINDINGS</i>	<i>ACTION TAKEN</i>
Patient Services Director - July 1, 2019 – September 30, 2019	Financial Screening Audit: <ul style="list-style-type: none"> • Financial screening audits were performed by randomly pulling ten applications monthly to establish the accuracy and completeness of said applications. • An inclusive application requires the CHW Patient Service Specialists to ensure the accurate completion of nine different fields within each application, all of which are reviewed during the audit. • Amongst the 30 applications reviewed, which collectively encompass 270 individual fields, there was one cited error – yielding a 99% rate of accuracy. 	<ul style="list-style-type: none"> • Continue operating under current protocol.
Patient Services Director - July 1, 2019 – September 30, 2019	Title V Audit: <ul style="list-style-type: none"> • Due to funding restrictions, the Title V program wasn't accessible to patients in July and August of 2019. Title V funds again became available in September. • 35 Title V applications were audited for the month of September, which collectively included 350 individual fields. • Among the 350 fields, there were 7 erroneous findings, yielding a 98% rate of accuracy. 	<ul style="list-style-type: none"> • All seven errors were attributable to NextGen inputting mistakes. • Staff was reminded to remain cautious during data entry processes as it pertains to Title V applications (and other important patient criteria).

Coastal Health & Wellness Governing Board
Quarter 2, FY20 – Compliance Report & Risk Management Goal Tracking

<p>Nursing Director/ Business Office Manager - July 1, 2019 – September 30, 2019</p>	<p>340B Medication Audit:</p> <ul style="list-style-type: none"> • The Nursing Director and Business Office Manager jointly performed a 340B medication audit to determine the comprehensiveness of charting 340B ordered meds, which requires documentation reflecting consistency in medication logs, NextGen and billing activities. • Of the 20 charts analyzed (ten at each of the two sites), no errors were identified, yielding a 100% compliance rate. 	<ul style="list-style-type: none"> • Continue operating under current protocol.
<p>HIPAA Breach Reports</p>		
<p><i>DEPARTMENT – DATE OCCURRED</i></p>	<p><i>SUMMARY</i></p>	<p><i>FOLLOW-UP</i></p>
<p>Patient Services October 4, 2019</p>	<ul style="list-style-type: none"> • A patient services representative inadvertently provided an appointment reminder printout to the incorrect patient. The incorrect patient presented to the clinic at the time and date indicated on the reminder, at which time it was discovered the reminder had been intended for another patient. 	<ul style="list-style-type: none"> • The staff member was issued a formal verbal warning and counseled about the matter by the Patient Services Director, and all members of the Patient Services staff were reminded to always double-check documentation containing PHI before handing it to patients. • Per 45 C.F.R. § 164.408, a breach notification detailing the disclosure was submitted to the Secretary of Health & Human Services.

Coastal Health & Wellness Governing Board
Quarter 2, FY20 – Compliance Report & Risk Management Goal Tracking

No External Audits Performed		
Incident Reports		
<i>DEPARTMENT – DATE OCCURRED</i>	<i>SUMMARY</i>	<i>FOLLOW-UP</i>
Dental (ICC)– July 18, 2019	<p>A provider notified a patient that, due to a prescription the patient was currently taking, the patient’s tooth could not be extracted until the patient first received a medical evaluation. The patient’s mother become extremely upset and started cursing and taking pictures of staff with her phone. Staff did not have the CHW emergency phone protocol at the front desk and thus couldn’t call a code, and ICC security failed to respond despite being radioed. Fortunately, the patient and his mother departed the clinic shortly thereafter.</p> <ul style="list-style-type: none"> • Preventable Incident 	<ul style="list-style-type: none"> • The emergency protocol is now being kept at the front desk. • The lieutenant charged with oversight of the officers stationed at the Island Community Center was notified of the on-duty officer’s failure to respond to the call, and the lieutenant issued a memo to all officers stationed at that post to ensure they keep the Coastal provided radio on and tuned into the designated frequency.
Dental (ICC) - August 26, 2019	<p>The air conditioning in the dental area malfunctioned overnight, causing the humidity in the storage area and sterilization room to eclipse maximum permissible temperatures. Additionally, the refrigerator was found to have exceeded the allowable temperature. Per the Infection Control Nurse, all instruments were resterilized, new spore tests were performed, and the flowable composite stored in the refrigerator was discarded.</p> <ul style="list-style-type: none"> • Non-Preventable Incident 	<ul style="list-style-type: none"> • Dental drafted contingency plans to specify how to address such matters should they occur in the future, and these plans were approved by the Quality Assurance and Risk Management Committee on Wednesday, October 2, 2019.

Coastal Health & Wellness Governing Board
Quarter 2, FY20 – Compliance Report & Risk Management Goal Tracking

<p>Dental (MCA) – September 5, 2019</p>	<p>During Dental’s monthly inspection, it was discovered that three ammonia ampules were missing. Although the box’s security tag was still intact, it was loose enough for the box to have been slightly opened and medications to be removed. The ampules were replaced, and a new security tag was tightly affixed to the box.</p> <ul style="list-style-type: none"> • Preventable Incident 	<ul style="list-style-type: none"> • After each month’s inspection, the dental assistant performing the medication box audit must now fasten the security tag tight enough so the box cannot be opened without first breaking the tag. • At the end of each business day, the medication box will be stored in a cabinet in the medication room instead of remaining on the countertop, where it previously was always kept.
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Warning and Termination Letters	
REASON	TYPE OF LETTER
Debt Collection Policy	Suspensions: 220; Reinstatements: 164
Behavioral Letters Issued	Terminations: 0; Warnings: 2

NOTE: Various issues were discussed in peer review.

Incidents involving quality of care issues, In accordance with Section 161 et seq., Health and Safety Code, are reviewed such that proceedings and records of the quality program and committee reviews are privileged and confidential.

Annual Risk Management Report: July - September 2019

July 2019- June 2020

Objective	Goal	2018-2019 Total	2019-2020 Goal	Q1 (07/19-09/19)	Q2 (10/19-12/19)	Q3 (01/20-03/20)	Q4 (04/20-06/20)	Total
Customer Service and Patient Satisfaction								
Promote positive patient service experience with all staff with a particular emphasis on treating patients in a courteous manner	Reduce grievances by 20% from the previous year	25	20	10 Total 7 Medical 1 Dental 1 Security 1 Billing				
Offer optimal care for all patients throughout the entirety of their visit	Increase weighted results of patient satisfaction survey to 4.8	4.6	4.8	4.75				
Promote patient appointment confirmations	Reduce the cumulative patient no-show rate to 20%	28.60%	20%	24.60%				
Ensure staff always wears their Coastal Health & Wellness issued identification cards in a readily visible manner	Biennial audits should yield at least 95% of identification cards being worn appropriately	100%	95%	Audit to Occur Q2 and Q4				
Minimize preventable maintenance related injuries for all staff, patients and visitors	Incur zero preventable injuries at all CHW locations	5	0	0				

KEY

COLOR KEY

Off Targeted Measures; Needs Improvement	Trending in Proper Direction; Still Needs Focus	Compliant with Goals
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Annual Risk Management Report: July - September 2019

July 2019- June 2020

Objective	Goal	2018-2019 Total	2019-2020 Goal	Q1 (07/19-09/19)	Q2 (10/19-12/19)	Q3 (01/20-03/20)	Q4 (04/20-06/20)	Total
Staff Trainings								
Train staff on appropriate responses for different emergency scenarios	Facilitate at least three non-required emergency preparedness drills during the year	NA	3	No drills facilitated				
Ensure all staff is trained on SDS material pertinent to his/her work area and responsibilities	Ensure documented training rate of 100% within 30 days from hire	NA	100%	100%				
Guarantee all staff is trained on equipment critical to his/her job performance	Ensure documented training rate of 100% within 30 days from hire	NA	100%	100%				
All staff is trained on how to respond to hazards	Documentation exhibiting 100% of staff received Hazardous Response Training exists	NA	100%	Training Occurred October 2019				
Train staff regarding detection of and follow-up actions for suspected human trafficking victims	Provide training to 100% of employees about how to report suspected human trafficking	100%	100%	Scheduled for June 2020				
Staff receives safety and incident report training	Documentation exhibiting 95% of staff received Risk Management and Safety Training	NA	95%	100%				
Continue to promote staff knowledge of hand-hygiene practices and policies	Increase cumulative hand-hygiene audit score to 90%	76%	90%	97%				

Annual Risk Management Report: July - September 2019

July 2019- June 2020

Objective	Goal	2018-2019 Total	2019-2020 Goal	Q1 (07/19-09/19)	Q2 (10/19-12/19)	Q3 (01/20-03/20)	Q4 (04/20-06/20)	Total
Maintenance and Reporting								
Protect patients and staff by ensuring incidents and adverse events are promptly reported	95% of incident reports should be made within two business days of the incident's occurrence	NA	95%	100%				
Protect staff and patients by promptly reporting issues requiring landlord attention	Report 100% of building and/or maintenance related issues to applicable landlord within 24 business hours of discovery	100%	100%	100%				
Maintain staff and patient safety by keeping equipment properly tested and maintained	95% of equipment (100% of critical equipment) documented in Equipment Inventory Log be inspected and calibrated in accordance with manufacturer's recommendations	100%	95%	100%				
Minimize obstruction to fire exit doors	Achieve a cumulative score for non-obstructed doors of at least 95%	NA	95%	100%				
Maintain at least 18" between storage and top of sprinkler heads	Achieve a cumulative score of at least 90% when auditing sprinkler head ceiling clearance	NA	90%	100%				
Access to fire extinguishers shall remain clear and unobstructed	Achieve a cumulative score for non-obstructed pathways to fire extinguishers of at least 95%	NA	95%	100%				
Maintain SDS binders with all applicable material	Biennial audits should yield at least a 90% percentage of accuracy	NA	90%	95%				

Annual Risk Management Report: July - September 2019 July 2019- June 2020								
Objective	Goal	2018-2019 Total	2019-2020 Goal	Q1 (07/19-09/19)	Q2 (10/19-12/19)	Q3 (01/20-03/20)	Q4 (04/20-06/20)	Total
Suits, Claims and Potentially Compensable Incidents								
Take all necessary precautions to ensure an environment optimally conducive to patient safety	Incur no malpractice or risk management related suits or claims	117	0	0				
Retain open communication and promote timely reporting of adverse events	Ensure potentially compensable incidents are reported and deliberated upon by executive management within 72 business hours following their occurrence	NA	NA	0 incidents				
Notes								

EOC Projects Commenced During Q1 (07/19 - 09/19)

1. The Risk and Safety Coordinator worked with departmental managers to ensure annual calibrations were carried out, as specified in the Equipment Management Plan.
 - a. All equipment requiring inspection was labeled.
 - i. The Fleet and Facilities Coordinator inspected all electric equipment for wire integrity.
 - ii. Cal-Tech, a certified third-party vendor, inspected all equipment requiring calibration verification.
 - b. The Equipment Inventory Log was updated to include:
 - i. Most recent inspection dates;
 - ii. Equipment no longer in-use that remained on the list; and
 - iii. Equipment recently added.
 - c. Per the Equipment Assessment Plan, all new equipment was scored and logged.

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COASTAL HEALTH & WELLNESS

GOVERNING BOARD

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

Governing Board

October 2019

Item #14

**Consider for Approval Coastal Health & Wellness
Budget Period Progress Report (BPR) Non-Competing Continuation
(NCC) for Submittal to HRSA**



COASTAL HEALTH & WELLNESS

GOVERNING BOARD

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

Governing Board

October 2019

Item #15

Consider for Approval Patient

No Show Policy (*New Policy*)

TO: CHW Nextgen Users

FROM:

DATE:

SUBJECT: No Show Process

The purpose of this process is to maximize open access to care for patients by reducing No-Shows, arriving to late appointments, and late cancellations.

It is the policy of Coastal Health & Wellness to inform patients the importance of keeping their scheduled appointments and the expectation of notifying the center of any cancellation or rescheduling within the allotted timeframe. Failure to comply with this policy may result in appointment limitations and/or restrictions.

PATIENT SERVICES:

It is the responsibility of Patient Services staff:

- To review the No Show Policy with each patient at either check-in or during financial screening
- Obtain signatures on the No Show Agreement from patients and save to the patient chart

SCHEDULERS:

It is the responsibility of the scheduling staff:

- Explain to the patient the automated appointment system and the expectations of the patient as explained on the No Show patient flyer
- Explain the expectations of patients to arrive 20 minutes prior to the appointment time or 1-hour, if the patient must be financially screened
- If a patient is found to have 2 consecutive No Shows:
 - Schedulers must explain the consequences of 3 consecutive No Shows
 - The patient will only be allowed to schedule appointments on the same day, if and only if, a cancellation is available.
 - A letter, "No Show Patient Letter", is completed by the scheduler and sent to the patient by mail.



NO SHOW POLICY

PURPOSE:

To maximize open access to care for patients by reducing No-Shows, arriving late to appointments, and late cancellations.

POLICY:

It is the policy of Coastal Health & Wellness (CHW) to inform patients the importance of keeping their scheduled appointments and the expectation of notifying the center of any cancellation or rescheduling within the allotted timeframe. Failure to comply with this policy may result in appointment limitations and/or restrictions.

PROCEDURE:

1. Each patient will receive and sign the *No Show Agreement?* at the time of registration or Checking In
2. CHW's automated system will send a reminder **48** business hours prior, to remind patients of their scheduled appointments. Patients will be required to confirm their appointments by using the automated system protocol. Appointments **NOT** confirmed within **24** hours may be canceled and replaced with another patient in need of the appointment.
3. The patient must notify CHW **24** hours in advance if they are unable to attend their scheduled appointment and notify CHW of any changes in the preferred contact method.
4. Patients will be required to arrive 20 minutes prior to the appointment time or 1-hour prior, if the patient must be financially screened. If a patient is late to their appointment, they may be asked to reschedule.
5. A notice will be sent to the patient if a patient fails to keep **2** consecutive scheduled appointments. Failure to keep **3** consecutive scheduled appointments, the patient will only be allowed to schedule appointments on the same day, if and only if, a cancellation is available.
6. This policy will be enforced uniformly and consistently by all staff and administration of Coastal Health & Wellness.



No-Show Policy Agreement

At Coastal Health & Wellness (CHW) we highly value our patients and the importance of providing quality accessible care. For that reason, it is important that you keep scheduled appointments and/or inform CHW of any changes in a timely manner. Please understand that a No-Show appointment or late cancellation prevents CHW from providing care to additional patients who may need an appointment. Please understand that our policy states patients that fail to keep **3 consecutive scheduled appointments** will not be able to pre-schedule future appointments

Our Policy Requires:

- Appointments must be rescheduled within **24** hours prior to scheduled appointment.

Initials

- Appointments must be canceled within **24** hours prior to the scheduled appointment.

Initials

Coastal Health & Wellness thanks you for your understanding and cooperation to continue to provide quality care to all our patients.

I understand and agree to abide by this No-Show Policy.

Patient or Parent/Guardian Signature

Date



Notice

No-Show Policy

Coastal Health & Wellness (CHW) has an official No-Show Policy that will go into effect **January 1, 2020**. CHW will provide all patients with a copy of the No-Show Policy which will be outlined in the *Patient and Centers Rights and Responsibilities*.

CHW will implement the following changes.

- 1. The automated system will send a reminder (via your preferred method of contact), 48 business hours prior to your appointment. It is important for you to confirm your appointment using the automated system protocol.**
 - a. Please notify CHW of any changes in the preferred method of contact.**
 - **Via-Voice – you must press “1”**
 - **Via-Text – you can confirm by texting “C”**
 - **Via -Email – you can select “confirm”**
 - **Opt-out (patient responsible to call and confirm appointment)**
- 2. Please notify CHW 24 hours in advance if you will be unable to attend your scheduled appointment.**
- 3. Patients are required to arrive 20 minutes prior to the appointment time or 1-hour prior, if the patient must be financially screened. If a patient is late to their appointment, they may be asked to reschedule**

If you have any questions feel free to ask any CHW staff or via email:
coastalcontact@gchd.org



Date:

Dear:

We value you as a patient and thank you for choosing Coastal Health & Wellness as your healthcare provider. You recently No-Showed for your appointment on,_____. Our records indicate that you have failed to keep 2 consecutive scheduled appointments. Please understand that our policy states patients that fail to keep (3) consecutive scheduled appointments will only be allowed to schedule appointments on the same day, if and only if, a cancellation is available. Under special circumstances or urgent matters, the patient will have to speak with the Patient Information Manager. If you have any questions, please contact our office at 409-938-2234.

Coastal Health & Wellness Staff,

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COASTAL HEALTH & WELLNESS

GOVERNING BOARD

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

Governing Board

October 2019

Item #16

**Consider for Approval Re-Privileging Rights for
Emily Bailey, MSW, LCSW**



COASTAL HEALTH & WELLNESS

GOVERNING BOARD

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

Governing Board

October 2019

Item #17

**Consider for Approval Privileging Rights for
the following UTMB Residents:**

- a) Zuleica Santiago Delgado, MD



COASTAL HEALTH & WELLNESS

GOVERNING BOARD

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

Governing Board

October 2019

Item #18

**Consider for Approval the Appointment of Flecia Charles to Complete
The Unexpired Term of the Vacant Consumer Representative on the
Coastal Health & Wellness Governing Board with a Term Expiring
June 2020**

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COASTAL HEALTH & WELLNESS

GOVERNING BOARD

9850-A.106 Boardroom Emmett F. Lowry Expressway, Texas City

Governing Board

October 2019

Item #19

**Update on Next Steps Regarding Refresh of
the Galveston Clinic**

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