Partnership Health Center
Board of Directors' Monthly Meeting

PHC Pre-Meeting Session 11:40a.m. – Risk Assessment Q4 Results and Plan with Staci Finley

AGENDA
October 25, 2024   12:00 P.M. – 1:30 P.M.
WEINBERG CONFERENCE ROOMS | 401 Railroad St. W, Missoula

Virtual: <u>Click here to join the meeting</u> | **Meeting ID = 281 930 063 75 | Passcode: jGkWKf**
Or call in (audio only) <u>+1 312-702-0492,,407787355#</u> | Phone Conference ID: 407 787 355#

A Board quorum is currently six members, with a majority of patient Board members (P/M). We value your time and try to keep the meeting length to a minimum. We need a quorum to conduct business immediately upon Call to Order. When calling in, please mute your phone to prevent background noise from carrying through. **If you need to leave before the meeting adjourns, please notify attendees at the time you vacate.**

I.	Call to Order	12:00
II.	Acknowledgement of Land Stewards – stated below[1]	12:01
III.	Public Comments regarding Agenda and Non-Agenda Items	12:05
IV.	Referrals/Comments from Board Members	12:10

- Board Member Conflict of Interest Disclosures*
- **Board Officers: Nomination and Election**

V.	Committee updates	12:25

- Executive/Finance Committee (EFC)
- Personnel Committee opening – Annie Green has joined
- AdHoc Committee addition – John Crawford has joined

VI.	Topics requiring Motions/Discussion	12:35

- Financial Policy Review*
  - Purchasing and Accounts Payable Policy

VII.	**Chief Executive Officer (CEO) Presentation:** *(Motion proposed to accept presentations)*	1:10

- Leadership Reports/Info*

VIII.	**Chief Financial Officer (CFO) Report*** *(Motion proposed to approve report)*	
IX.	**Consent Agenda:** *(Motion requested to approve/acknowledge items as presented)*	1:25

- **Other Reports/Info**
  - Fully Executed Contracts*
- **Board of Directors' – Full and Committee Minutes/Reports**
  - Board of Directors' 09/27/24 Meeting Minutes *Approval**
  - Executive/Finance Committee 09/18/24 Minutes Review*
  - AdHoc Committee 09/12/2024 Minutes Review*
  - Quality and Corporate Compliance Committee 10/17/24 Minutes Review*

X.	**Next Board Meeting date: November 22, 2024**	
XI.	**Adjournment** *(Motion requested to adjourn meeting)*	1:30

[1]*Partnership Health Center respectfully acknowledges that we occupy the traditional homelands of the Séliš, Qĺispé, and Ktunaxa-Ksanka nations. We also recognize that these lands are a site of trade, medicine gathering, healing, and travel for other Native tribes in the area and is still home for many Indigenous people. We honor these people – past, present, and future, along with the many other Indigenous peoples who inhabited, continue to inhabit, hold sacred, and steward these lands.*

We acknowledge that the health care system has played a role in the oppression of Indigenous peoples. We commit to ongoing learning about the impact of colonization on the health and wellbeing of Indigenous peoples, and we commit to meaningful action that reverses health disparities.

(*) Enclosed in Packet

Consent agenda: The items listed under the consent agenda (information items) are considered to be routine matters and will be approved by a single motion of the Board without separate discussion. If separate discussion is desired, that item will be removed from the consent agenda and placed on the regular business agenda for discussion.

Action items (outside of Consent Agenda) are in blue

Board packet copies available to the Public upon request and/or posted within public meeting announcement.
Email to request packets: walkerb@phc.missoula.mt.us

2024 Monthly Board Meeting Dates:

January	*01/12/2024*
February	*02/09/2024*
March	*03/08/2024*
April	*04/12/2024*
May	*05/10/2024*
June	*06/14/2024*
July	*07/12/2024*
August	*08/09/2024*
September	*09/13/2024*
October	*10/25/2024*
November	*11/22/2024*
December	*12/20/2024*

BOARD MEMBERS PRESENT FOR 2024 MONTHLY

Member Name	JAN	FEB	MAR	APR	MAY	JUNE	JULY	AUG	SEPT	OCT	NOV	DEC	# Attended
Jeanna Miller (Ex-Officio)									Ab				0 of 1
John Crawford*	X	X	Ab-Exc	X	X	X	X	X	X				8 of 9
Suzette Baker*				X	X	Ab-Exc	X	X	Ab-Exc				4 of 6
Jilayne Dunn	X	X	X	X	X	Ab-Exc	X	X	Ab-Exc				7 of 9
Annie Green*	X	X	X	X	X	X	X	X	X				9 of 9
Patty Kero*	X	X	X	X	X	X	Ab-Exc	X	X				8 of 9
Joe Melvin*	X	X	X	X	X	X	X	X	Ab-Exc				8 of 9
Krissy Petersen													0 of 0
Jay Raines*			X	X	X	X	Ab-Exc	X	X				6 of 7
Dave Strohmaier	X	Ab-Exc	X	X	X	Ab-Exc	Ab-Exc	X	X				6 of 9
Mark Thane	Ab-Exc	X	X	X	Ab-Exc	X	Ab-Exc	Ab-Exc	Ab-Exc				4 of 9
Kathleen Walters*	X	X	X	X	X	X	X	X	X				9 of 9
Nathalie Wolfram*	X	X	X	X	Ab-Exc	X	X	Ab-Exc	X				7 of 9

X = Virtual Attendance
* = P/M

Board Members: 12
Ex-Officio: 1
Quorum: 6, majority Patient Board Members (P/M)

PREVIOUS BOARD MEMBERS PRESENT FOR 2024 MONTHLY

Member Name	JAN	FEB	MAR	APR	MAY	JUNE	JULY	AUG	SEPT	OCT	NOV	DEC	# Attended
Sara Heinemen (Ex-Officio)				X	Ab-Exc	X	Ab	Ab					2 of 5
Karen Myers	X	Ab-Exc	X	Ab-Exc	X								3 of 5
Jeff Weist*	X	X	X	X	Ab-Exc	Ab-Exc	Ab-Exc						4 of 7

PHC PARTNERSHIP HEALTH CENTER

BOARD OF DIRECTORS Conflict of Interest Disclosures

BOARD MEMBER OWNERSHIP	LIST OF BOARD MEMBERSHIP | EMPLOYMENT
Suzette Baker (P/M)	**Employer:** 1 Dash, COO **Board Membership:** Seeley Swan Hospital District
John Crawford (P/M)	**Board Membership:** All Nations Health Center
Jilayne Dunn (NP/M)	**Employer:** City of Missoula
Annie Green (P/M)	**Employer:** University of Montana
Patty Kero (P/M)	**Potential Conflict:** University of Montana affiliation
Joe Melvin (P/M)	
Krissy Petersen (NP/M)	**Employer:** Providence St. Patrick Hospital
Jay Raines (P/M)	
David Strohmaier (NP/M)	**Employer:** Missoula County (Commissioner) **Board Memberships:** Big Sky Passenger Rail Authority, City-County Health Board, Local Emergency Mgt Planning Committee, Transportation Policy Coordinating Committee, Urban Growth Commission, NACo Arts and Culture Commission, MACo Board, Lolo National Forest Resource Advisory Council; Other boards as assigned
Mark Thane (NP/M)	Service in the Montana State Legislature Appointment to ARPA Oversight Committee **Board Memberships:** Community Medical Center
Kathleen Walters (P/M)	**Employer:** Montana Realty Network
Jeff Weist (P/M)	**Employer:** Missoula County Public Schools
Nathalie Wolfram (P/M)	**Employer:** University of Montana

P/M = Patient Board Member | NP/M = Non Patient Board Member   updated 9/24/24

PHC
PARTNERSHIP
HEALTH CENTER

FINANCIAL REPORT
DRAFT

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Monthly Finance Overview

September Year to Date 2024

YTD (Year to date) Financial Position:

	Actual YTD	Budget	Variance	Variance %
REVENUE				
Total Operating Revenue	8,432,444	8,745,976	(313,531)	-3.6%
Total Non-Operating Revenue	2,542,742	2,833,569	(290,826)	-10.3%
TOTAL REVENUE	10,975,187	11,579,544	(604,358)	-5.2%
EXPENSE				
Personnel	7,001,315	7,144,460	(143,145)	-2.0%
Supplies	3,652,996	3,854,201	(201,205)	-5.2%
Purchased Services	1,122,007	1,310,094	(188,086)	-14.4%
Depreciation	187,686	187,686	-	0.0%
TOTAL EXPENSES	11,776,319	12,308,755	(532,436)	-4.3%
NET INCOME/(LOSS)	(801,133)	(729,211)	(71,922)	9.9%
Net Margin	-7.3%	-6.3%		

Operating Margin:

Operating Margin	July	Aug.	Sept.	Oct.	Nov.	Dec.	Jan.	Feb.	March	April	May	June
Month FY 25	-5.8%	-15.4%	-3.2%									
Fiscal Year To Date 2025	-5.8%	-10.6%	-7.3%									
Fiscal Year 2025 Budget	-6.3%	-6.3%	-6.3%	-6.3%	-6.3%	-6.3%	-6.3%	-6.3%	-6.3%	-6.3%	-6.3%	-6.3%
Month FY24	-4.7%	-4.0%	-7.6%	-5.5%	-9.3%	-11.0%	-16.4%	8.9%	-12.5%	3.7%	-6.2%	-34.0%
Fiscal Year To Date 2024	-4.7%	-4.9%	-5.4%	-4.3%	-5.5%	-7.4%	-9.0%	-5.9%	-6.6%	-5.9%	-6.5%	-8.6%

Cost Per Encounter:

Cost Per Encounter

Medicaid APM Rate for 2024: $342.10

	FY 24 Q4	July YTD	August YTD	Sept. YTD	Budget YTD
Medical	373	454	424.15	412.73	360.14
Dental	331	323	341.89	333.20	322.14
Behavioral Health	398	546	494.75	484.84	383.08
School Based Health	463	3,828	3,028.92	1,143.29	369.92
Total Clinical	370	450	432.50	417.61	356.65
Pharmacy	125	126	133.26	129.73	123.71

Calculations include overhead allocation.
All expenses are included, including depreciation.

Other: notes regarding expense variances-

Month to Date:

Clothing Allowance:

Issued at the beginning of the year, one-time payment for fiscal year

Computer:

Much of the computer expenses will be spent as we get closer to EPIC go-live

Vaccine:

Dependent on timing of County approving PHC journal entry request.

Dental Provider Services:

Support Ryan White B and C programs.

Provider Services:

Support Ryan White B and C programs. Invoice payment posting of Residency Invoice pending County approval.

Continuing Education:

Not all contracts have been fully executed by Missoula County, CE payout for providers will occur once fully executed.

Year to Date:

Clothing Allowance:

Issued at the beginning of the year, one-time payment for fiscal year

Computer:

Much of the computer expenses will be spent as we get closer to EPIC go-live

Prescription Drugs:

Inventory stock was utilized during the month, resulting in higher cost of goods sold recognition. Transfer of vaccine expense from pharmaceutical line to vaccine line is dependent of timing of County approval of PHC journal entry request.

Vaccine:

Dependent on timing of County approving PHC journal entry request.

Dental Provider Services:

Support Ryan White B and C programs.

Provider Services:

Support Ryan White B and C programs. Invoice payment posting of Residency Invoice pending County approval.

Key Talking Points
Sep-24

Key Utilization

Total Encounters Month to Date (MTD) are 6,286 with a Budget of 6,940.
Year to Date (YTD) total is 18,032 and the Budget is 22,209 for a % variance of -18.8.
The prior YTD total was 17,373.   Year to Date and Prior Year ratio 103.8%.

Total Medical Encounters MTD are 3,680 with a Budget of 4,109.
YTD total is 10,910 and the Budget is 13,150 for a % variance of -17.
The prior YTD total was 10,773.   Year to Date and Prior Year ratio 101.3%.

Total Behavioral Health Encounters MTD are 841 with a Budget of 1,056.
YTD Total is 2,416 and the Budget is 3,381 for a % variance of -28.5.
The prior YTD total was 2,821   Year to Date and Prior Year ratio 85.6%.

Total School Based Behavioral Health Encounters MTD are 247 with a Budget of 301.
YTD Total is 326 and the Budget is 962 for a % variance of -66.1.
The prior YTD total was 97   Year to Date and Prior Year ratio 336.1%.

Total Dental Encounters MTD are 1,418 with a Budget of 1,353.
YTD Total is 4,079 and the Budget is 4,329 for a % variance of -5.8.
The prior YTD total was 3,331   Year to Date and Prior Year ratio 122.5%.

Pharmacy Prescriptions Filled MTD are 10,561 with a Budget of 10,142.
YTD Total is 32,728 and the Budget is 32,456 for a % variance of 0.8.
The prior YTD total was 29,594   Year to Date and Prior Year ratio 110.6%.

Balance Sheet

Consolidated Days Cash on Hand is 209.1 days calculating available cash and investments of $26.07m.
Operating cash is $23.37m for 187.5 days, and the capital fund is $2.69m for 21.6 days.
* the formula is based on all calendar days, not just business days.

Days in Clinical Accounts Receivable are 66, and the current receivable balance is $3,159,303.
Clinical AR is presented gross and does not include an adjustment for assessment of collectability.
Days in Pharmacy Accounts Receivable are 14, and the current receivable balance is 991,543
Pharmacy AR is presented net of an allowance for uncollectible patient accounts.

Revenue and Expense

Fee Revenue for the month totaled $2.74m with a Budget of $2.92m for a % variance of -6%.

YTD Fee Revenue is $8.43m with a Budget of $8.75m for a % variance of -3.6%.
The prior YTD revenue was $7.98m for a % variance of 5.7%.

 Total Revenue for the month is $3.61m with a Budget of $3.86m for a % variance of -6.5%.

YTD Total Revenue is $10.98m with a Budget of $11.58m for a % variance of -5.2%.

Expenses for the month totaled $3.72m with a Budget of $4.1m for a % variance of -9.2%.
YTD expenses are $11.78m with a Budget of $12.31m for a % variance of -4.3%.
The prior YTD expenses are $10.83m for a variance of 8.7%.

Net Income for the month is $-114,974 with a Budget of $-243,070 for a % variance of -52.7%.
YTD Net Income is $-801,133 with a Budget of $-729,211 for a % variance of 9.9%.
Capital Reserve Interest revenue posted for the month is $14,167

Sep. 30, 2024 Actual	Budget	Daily Avg	Var	Var %		Sep. 30, 2024 Actual	Budget	Var	Var %	Budget 12 Mo Total	Sep. 30, 2023 Prior Year	% Change
					VOLUME INDICATORS							
		20										
1,880	1,982	99	(102)	-5.1%	Creamery Medical	5,479	6,341	(862)	-13.6%	24,671	5,179	5.8%
999	1,247	62	(248)	-19.9%	Creamery Residency Medical	3,030	3,989	(959)	-24.0%	15,519	3,422	-11.5%
12	15	1	(3)	-18.8%	Creamery Residency BH	43	47	(4)		184	49	-12.2%
1,059	994	50	65	6.6%	Creamery Dental	3,113	3,180	(67)	-2.1%	12,371	2,796	11.3%
49	0	0	49		Creamery IBH	219	-	219		-	326	-32.8%
724	939	47	(215)	-17.7%	Alder BH	1,981	3,004	(804)	-26.8%	11,689	2,204	-10.1%
242	283	14	(41)	-14.4%	Seeley Lake Medical	833	904	(71)	-7.9%	3,519	719	15.9%
190	181	9	9	5.1%	Seeley Lake Dental	529	579	(50)	-8.6%	2,251	496	6.7%
0	0	0	(0)		Seeley Lake BH	0	0	(0)		0	0	
153	162	8	(9)	-5.3%	POV Medical	427	517	(90)	-17.4%	2,011	289	47.8%
16	0	0	16	19919900.0%	POV BH	46	0	46	17896775.0%	0	17	170.6%
201	162	8	39	24.4%	Lowell Clinic Medical	625	517	108	20.9%	2,011	639	-2.2%
128	125	6	3	2.2%	Lowell Clinic Dental	390	401	(11)	-2.7%	1,560	15	2500.0%
13	0	0	13	16184900.0%	Lowell Clinic BH	83	0	83	32292087.5%	0	142	-41.5%
28	134	7	(106)	-79.2%	Watershed Medical	37	430	(393)	-91.4%	1,672	0	
5	103	5	(98)		Watershed BH	6	329	(323)	0.0%	1,280	0	
31	50	3	(19)	-38.1%	School Based - CS Porter BH	44	160	(116)	-72.6%	624	0	
46	50	3	(4)	-8.2%	School Based - Franklin BH	68	160	(92)	-57.6%	624	0	
47	50	3	(3)	-6.2%	School Based - Hawthorne BH	47	160	(113)	-70.7%	624	0	
32	50	3	(18)	-36.1%	School Based - Lowell BH	32	160	(128)	-80.0%	624	0	
12	50	3	(38)	-76.1%	School Based - Russell BH	12	160	(148)	-92.5%	624	0	
79	50	3	29	57.7%	School Based - Willard BH	123	160	(37)	-23.3%	624	97	26.8%
10,561	10,142	507	419	4.1%	Pharmacy Prescriptions	32,728	32,456	272	0.8%	126,274	29,594	10.6%
100	121	6	(21)	-17.4%	Clinical Pharmacy	301	387	(86)	-22.3%	1,507	351	-14.2%
177	141	7	36	25.3%	Missoula Food Bank Medical	479	452	27	5.9%	1,759	525	-8.8%
41	53	3	(12)	-22.7%	Missoula Food Bank Dental	47	170	(123)	-72.3%	660	24	95.8%
22	0	0	22	27389900.0%	Missoula Food Bank BH	38	0	38	14784275.0%	0	83	-54.2%
3,680	4,109	205	(429)	-10.4%	Medical	10,910	13,150	(2,240)	-17.0%	51,162	10,773	1.3%
841	1,056	53	(215)	-20.4%	BH	2,416	3,381	(965)	-28.5%	12,969	2,821	-14.4%
247	301	15	(54)	-17.8%	School Based BH	326	962	(636)	-66.1%	2,495	97	236.1%
1,418	1,353	68	65	4.8%	Dental	4,079	4,329	(250)	-5.8%	16,842	3,331	22.5%
100	121	6	(21)	-17.4%	Clinical Pharmacy	301	387	(86)	-22.3%	1,507	351	-14.2%
6,286	6,940	347	(654)	-9.4%	Total Encounters	18,032	22,209	(4,177)	-18.8%	84,975	17,373	3.8%
10,561	10,142	507	419	4.1%	Pharmacy Prescriptions	32,728	32,456	272	0.8%	126,274	29,594	10.6%
20					Work Days	64						
					Avg Encounters By Day							
184.0	205.5				Medical	170.5	205.5				171.0	
42.1	52.8				BH	37.8	52.8				44.8	
12.4	15.0				School Based BH	5.1	15.0				1.5	
70.9	67.6				Dental	63.7	67.6				52.9	
5.0	6.1				Clinical Pharmacy	4.7	6.1				5.6	
314.3	347.0				Total Encounters	281.8	347.0				275.8	
528	507				Pharmacy Prescriptions	511	507				470	
					Creamery Medical % of Creamery Medical Visits	64%						
					Creamery Residency % Creamery Medical Visits	36%						

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Key Indicators   1 of 3

10/15/2024
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Prescription Mix	Current Month 9/30/2024	Prior Year Month 9/30/2023	Change
Medicaid	29.2%	32.3%	-3.1%
Medicare			
Self Pay	19.7%	23.8%	-4.1%
Medicare/Medicaid			
Private Pay	51.1%	43.9%	7.2%
Total Prescriptions	100.0%	100.0%	0.0%

Encounter Mix	Current Month 9/30/2024	Prior Year Month 9/30/2023	Change		Jul 24 - Sept 24	Jul 23 - Sept 23
Medicaid	32.7%	38.7%	-6.0%		32.4%	39.3%
Medicare	19.5%	20.0%	-0.5%		19.4%	19.1%
Self Pay	21.0%	17.3%	3.8%		20.6%	16.7%
Medicare/Medicaid	1.1%	0.5%	0.5%		0.9%	0.5%
Private Pay	25.6%	23.5%	2.1%		26.6%	24.5%
Total Encounters	100%	100%	0.0%		100%	100.0 %

Productivity	9/1/2024-9/14/2024 Pay Period 19	8/18/2024-8/31/2024 Pay Period 18	8/4/2024-8/17/2024 Pay Period 17
Total Hours	22,942	22,712	22,200
Total FTEs	286.77	283.90	277.50
Productive Hours	18,072	19,530	19,191
Productive FTEs	225.9	244.1	239.9
RATIO Productive to Total Hours	78.8%	86.0%	86.4%
Total Encounters	2,683	2,762	2,774
Encounter Per Staffed FTE	9.36	9.73	10.00

			9/30/2024	Budget	Year to Date	Year to Date Budget
		Operating Margin w/internal granting	-3.2%	-6.3%	-7.3%	-6.3%

2019 Capital Link Industry Benchmark	Strategic Plan				Insurance Balance	Patient Balance
60	< = 60	Clinical AR Days and Gross Balance	66 $ 3,159,303		$ 1,641,603	$ 1,517,700
		Pharmacy AR, Net Collectible Value	14 991,543		$ 953,741	$ 37,802
		Days Cash on Hand	Current Month		Prior Month	Change
45	> = 120	Operating Cash	187.5 23,374,221	206.8	25,673,878	(2,299,657)
		Capital Fund	21.6 2,694,205	22.1	2,739,536	(45,331)
		Total Cash	209.1 26,068,427	228.9	28,413,414	(2,344,988)

*County posting issue: did not post a payroll run in August, true cash balance is lower

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Key Indicators

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10/15/2024

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Service Line Margin YTD September 2024

	Medical	Dental	BH	Pharmacy	School Based
■ Net Income (loss)	76,281	(117,429)	(17,229)	943,075	(27,661)
■ Budget Net Income (Loss)	133,202	(143,684)	599,419	121,905	(87,921)

Other Unit Margin YTD Sept. 2024

	Community	Support
■ Net Income (loss)	(59,109)	(1,599,061)
■ Budget Net Income (Loss)	112,209	(1,464,341)

Total YTD Sept 2024 by Payor Rev

1,406,580
Health Center Grant
10.42%
10.42%

639,427
Patient
4.74%

2,703,137
Other Rev 20.02%

3,770,652
Medicaid
27.92%

961,600
Other Grants 7.12%

390,149
Medicare
2.89%

88,057
Value Based Care
0.65%

3,544,159
Private Insurance
26.25%

■ Patient   ■ Medicaid   ■ Medicare
■ Private Insurance   ■ Value Based Care   ■ Other Grants
■ Other Rev   ■ Health Center Grant

Clinic, Pharmacy, & Other Rev YTD Sept 2024

1,406,580
Health Center Grant
10.42%

2,703,137
Other Rev
20.02%

961,600
Other Grants
7.12%

3,711,277
Clinical
27.48%

4,721,167
Pharmacy
34.96%

■ Clinical   ■ Pharmacy   ■ Other Grants   ■ Other Rev   ■ Health Center Grant

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Revenue Mix

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10/15/2024
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Partnership Health Center
Draft Statement of Revenues, Expenses, and Other Changes in Assets
Period Ending September 30, 2024

Fiscal Year 2025 Month					Fiscal Year 2025 Year To Date				2024 YTD Comparison
Total Accrual 30-Sep-24	MTD Budget	ACCRUAL Variance	ACCRUAL Variance%		Total ACCRUAL 30-Sep-24	YTD Budget	ACCRUAL Variance	ACCRUAL Variance%	Prior YTD Accrual 30-Sep-23
				OPERATING REVENUE					
				GROSS CHARGES					
				Clinical					
243,286				Patient	652,473				501,665
425,313				Medicaid	1,249,625				1,323,649
217,318				Medicare	610,391				572,173
457,427				Private Insurance	1,429,034				1,205,860
1,343,343				Total Clinical	3,941,523				3,603,347
				Pharmacy					
155,551				Patient					
493,097				Medicaid					
-				Medicare					
975,046				Private Insurance					
1,623,695				Total Pharmacy	-				
2,967,038				**Total Gross Charges**	3,941,523				3,603,347
				REVENUE ADJUSTMENTS					
				Explicit Price Concessions (Contractual Adj., SFS Discount, DIR Fees)					
				Clinical					
72,684				Patient	210,786				57,018
(303,748)				Medicaid	(862,699)				(1,032,010)
78,245				Medicare	220,242				186,061
227,421				Private Insurance	709,605				600,167
				Refunds					
				Pharmacy					
				Patient					
66,374				Medicaid					
				Medicare					
3,544				Private Insurance					
				Refunds					
144,520				Total Explicit Price Concessions	277,935				(188,764)
				Implicit Price Concessions (PHC Cares, courtesy adj, collections)					
				Clinical					
19,036				Patient	40,368				14,911
				Medicaid					
				Medicare					
				Private Insurance					
				Pharmacy					
22,294				Patient					
				Medicaid					
				Medicare					
				Private Insurance					
41,330				Total Implicit Price Concessions	40,368				14,911
185,850				**Total Adjustments**	318,303				(173,853)
				NET REVENUE					
				Clinical					
128,297	35,578	92,719	260.6%	Patient	401,318	106,734	294,584	276.0%	429,737
748,823	948,270	(199,448)	-21.0%	Medicaid	2,112,323	2,844,811	(732,488)	-25.7%	2,355,659
140,589	162,190	(21,602)	-13.3%	Medicare	390,149	486,571	(96,422)	-19.8%	386,113
231,997	318,351	(86,354)	-27.1%	Private Insurance	719,429	955,054	(235,624)	-24.7%	605,693
36,872	48,333	(11,461)	-23.7%	Value Based Care	88,057	145,000	(56,943)	-39.3%	144,182
1,286,578	1,512,723	(226,145)	-14.9%	Total Clinical Revenue	3,711,277	4,538,170	(826,892)	-18.2%	3,921,382
				Pharmacy					
66,883	75,389	(8,507)	-11.3%	Patient	238,108	226,168	11,941	5.3%	208,964
493,097	548,564	(55,467)	-10.1%	Medicaid	1,658,329	1,645,692	12,637	0.8%	1,558,810
-	-	-		Medicare	-	-	-		-
893,783	778,649	115,134	14.8%	Private Insurance	2,824,730	2,335,946	488,783	20.9%	2,291,724
1,453,762	1,402,602	51,160	3.6%	Total Pharmacy	4,721,167	4,207,806	513,361	12.2%	4,059,498
2,740,340	2,915,325	(174,985)	-6.0%	**Total Operating Revenue**	8,432,444	8,745,976	(313,531)	-3.6%	7,980,881

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PARTNERSHIP HEALTH CENTER
DRAFT STATEMENT OF NET POSITION
As of September 30, 2024

	9/30/2024
ASSETS	
Current Assets:	
Cash & Cash Equivalents	26,068,427
Clinical Accounts Receivable, gross	3,159,303
Allowance for Uncollectible Clinical	
Clinical Accounts Receivable, net	
Pharmacy Accounts Receivable, gross	1,004,144
Allowance for Uncollectible Pharmacy	(12,601)
Pharmacy Accounts Receivable, net	991,543
Other Receivables	
340B Inventory	282,476
Medicaid Inventory	681,828
Inventory (Pharmacy)	964,304
Prepaid Expenses	
Total Current Assets	31,183,577
Capital Assets:	
Nondepreciable Capital Assets	617,414
Depreciable Capital Assets, Net of Accumulated Depreciation	11,169,526
Right-of-use subscription asset, net of accumulated amortization	
Right-of-use lease asset, net of accumulated amortization	852,133
TOTAL ASSETS	43,822,651
DEFERRED OUTFLOWS OF RESOURCES	
Deferred Pension Expense	3,921,757
Deferred Postemployment Benefits Expense	533,269
Total Deferred Outflows of Resources	4,455,026
LIABILITIES	
Current Liabilities:	
Accounts & Warrants Payable	
Accrued Payroll	181,211
Notes Payable	
Accrued Interest	
Compensated Absences	1,618,576
Current portion of subscription liability	
Current Portion of Long-Term Debt	140,000
Current Portion of Lease Liability	172,025
Total Current Liabilities	2,111,812
Long-Term Liabilities:	
Long-Term Debt, Net of Current Portion	1,010,000
Long-Term subscription liability	
Long-Term Lease Liability, Net of Current Portion	670,109
Postemployment Benefits	1,574,528
Net Pension Liability	18,431,297
Total Long-Term Liabilities	21,685,934
TOTAL LIABILITIES	23,797,746
DEFERRED INFLOWS OF RESOURCES	
Deferred Pension Expense	1,349,340
Deferred Postemployment Benefits Expense	533,269
Total Deferred Inflows of Resources	1,882,609
NET POSITION	
Net Investment in Capital Assets	
Restricted	
Unrestricted	
TOTAL NET POSITION	22,597,322

*DRAFT Statement, Total Net Position is not complete

Pension and OPEB amounts are based on 6/30/2023 Actuarial assumptions for Fiscal Year 2023.

Capital assets and depreciation are reported at 6/30/2023 values.

Missoula County unable to provide Compensated Absences monthly. Reported at 6/30/2023 value.

Does not include GASB 96 SPITA pronouncement

PARTNERSHIP HEALTH CENTER
DRAFT STATEMENT OF REVENUES, EXPENSES, AND CHANGES IN NET POSITION
For the Month Ended September 2024

	ACTUAL MTD	MTD BUDGET	ACTUAL YTD	YTD BUDGET	2025 Annual BUDGET	Accrual AUDITED 2023	Accrual AUDITED 2022
OPERATING REVENUE							
Charges for Services	2,740,340	2,915,325	8,432,444	8,745,976	34,983,902	33,717,396	31,060,515
Operating Revenue	2,740,340	2,915,325	8,432,444	8,745,976	34,983,902	33,717,396	31,060,515
On-Behalf Revenue-Pensions						571,772	1,154,677
Total Operating Revenue	2,740,340	2,915,325	8,432,444	8,745,976	34,983,902	34,289,168	32,215,192
OPERATING EXPENSES							
Personnel	2,304,202	2,379,362	6,987,607	7,138,085	28,552,341	27,242,968	23,020,764
Other Operating Expenses- Clothing	229	2,125	13,708	6,375	25,500		
Other Operating Expenses- Supplies	1,085,044	1,284,734	3,652,996	3,854,201	15,416,804		
Other Operating Expenses- Purchased Services	271,540	374,136	934,322	1,122,408	4,489,633		
Other Operating Expenses						17,695,462	15,615,712
Depreciation	62,562	62,562	187,686	187,686	750,742	596,004	648,113
Operating Expenses	3,723,576	4,102,918	11,776,319	12,308,755	49,235,020	45,534,434	39,284,589
Uncompensated Absences						1,618,576	1,547,995
Pension Expense						2,766,606	1,626,775
OPEB Expense						81,943	113,811
Total Operating Expenses	3,723,576	4,102,918	11,776,319	12,308,755	49,235,020	45,534,434	39,284,589
Operating Loss	(983,236)	(1,187,593)	(3,343,875)	(3,562,780)	(14,251,118)	(11,245,266)	(7,069,397)
NON-OPERATING REVENUE (EXPENSE)							
Intergovernmental Revenue	631,153	520,616	1,927,616	1,561,849	6,247,397	10,206,566	9,717,122
Private/Local Grants and Donations	216,593	127,730	575,920	383,189	1,532,754	279,018	471,287
Miscellaneous Revenue	6,349	288,677	25,039	866,031	3,464,123	173,199	239,147
Investment Earnings	14,167	7,500	14,167	22,500	90,000	84,574	8,418
Interest Expense	(7,417)	(7,417)	(22,250)	(22,250)	(89,000)	(45,813)	(51,438)
Loss on Disposal of Assets						(343,452)	
Total Non-Operating Revenue (Expense)	868,262	944,523	2,542,742	2,833,569	11,334,274	10,354,092	10,384,536
Change in Net Position	(114,974)	(243,070)	(801,133)	(729,211)	(2,916,844)	(891,174)	3,315,139
Net Position, Beginning of Year			26,387,715	26,387,715	26,387,715	27,278,889	23,963,750
Net Position, End of Period			25,586,582	25,658,504	23,470,871	26,387,715	27,278,889

Total Budgeted Non-Operating Revenue: $11,334,274
Total Unsecured, budgeted Grant Revenue: $1,729,189, 15.26%

Non-Operating Revenue: Grants applied for, unsecured in the budget	Expected to hear by:	Budgetary impact	
● Award short by $99,320 CAF | $34,320 funded, $133,640 budgeted	Undersecured	(99,320)	
● $374,819 SAMHSA System of Care (primarily subcontracted)	10/1/2024	awarded, determining PHC benefit vs. pass through amount	
● $350,000 Otto Bremer	Not awarded	(350,000)	
● $36,000 UDS Plus	Oversecured	2,802	
● $167,050 HRSA BH Expansion	Oversecured	432,950	$600,000 awarded period: 9/1/24-8/31/2025
● $546,000 OMH - Trinity	Not awarded	(546,000)	Not awarded
● $150,000 DPHHS County & Tribal Matching	Undersecured	(52,503)	Awarded $97,497
		Total	**(612,071)**

Non-Operating Revenue: Grants applied for, unsecured not in the budget	Expected to hear by:	Budgetary impact
● $500,000 HRSA Expanded Hours, Dec '24-Nov'26 Submitted	Unclear	
● $650,000 annually HRSA New Acces Point, June.'25-May '26	Unclear	
● $375,000 annually SAMHSA Strategic Prevention, 5 yrs	Unclear	
● $231,494 Crisis Diversion July'24-June'27 Submitted	Unclear	Covers 2 FTE existing, remaining is pass through expenses

Lean Process Improvements:
● Sept. '24, Kaizen event Clinical team model

Operational Changes:

● Aug. '24 | Pharmacy Software upgrade, expected more efficient operations
● Sept. '24 | Billing: engage PioneerRx for payment recon.
● Sept. '24-ongoing | Billing: Insurance Discovery service, expected revenue recapture
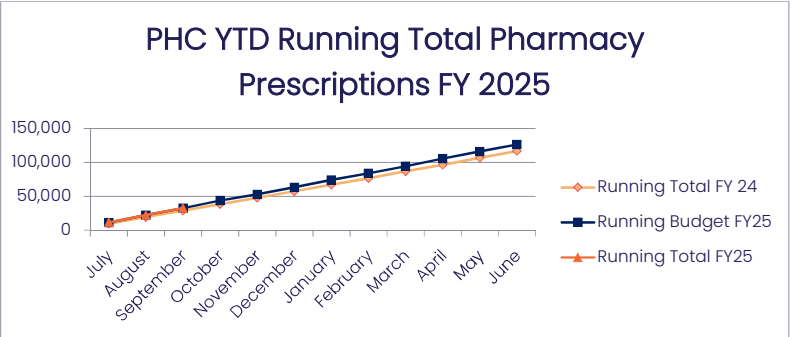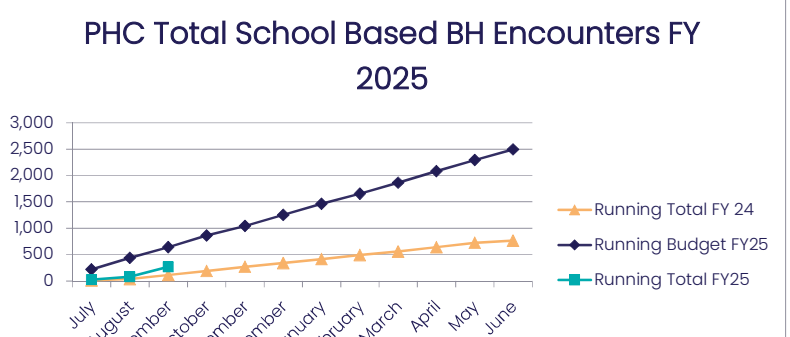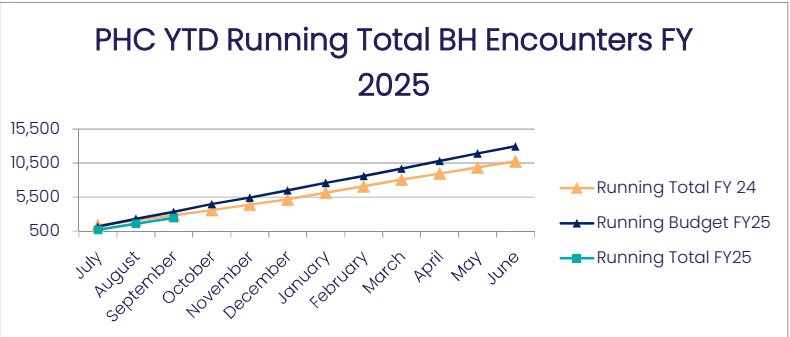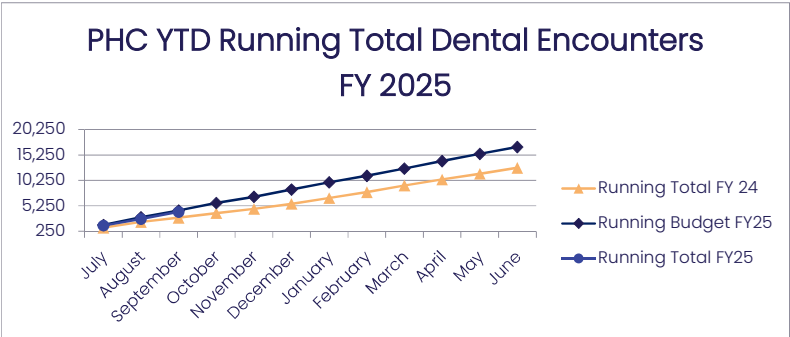● Oct. '24 | Pharmacy Buying Group & PSAO, expected $400,000 cost savings over 1 yr

Fiscal Year 2025 Month				
Total	**MTD**	**ACCRUAL**	**ACCRUAL**	
Accrual	**Budget**	**Variance**	**Variance%**	
30-Sep-24				
				OPERATING REVENUE
				NET REVENUE
				Clinical
128,297	35,578	92,719	260.6%	Patient
748,823	948,270	(199,448)	-21.0%	Medicaid
140,589	162,190	(21,602)	-13.3%	Medicare
231,997	318,351	(86,354)	-27.1%	Private Insurance
36,872	48,333	(11,461)	-23.7%	Value Based Care
1,286,578	1,512,723	(226,145)	-14.9%	Total Clinical Revenue
				Pharmacy
66,883	75,389	(8,507)	-11.3%	Patient
493,097	548,564	(55,467)	-10.1%	Medicaid
-	-	-		Medicare
893,783	778,649	115,134	14.8%	Private Insurance
1,453,762	1,402,602	51,160	3.6%	Total Pharmacy
2,740,340	**2,915,325**	**(174,985)**	**-6.0%**	**Total Operating Revenue**
				NON-OPERATING REVENUE
486,874	443,692	43,182	9.7%	Federal (Direct)
133,461	57,231	76,230	133.2%	Federal Pass-Through
63,540	65,903	(2,363)	-3.6%	State (Direct)
5,000	11,137	(6,137)	-55.1%	State Pass-Through
-	25,000	(25,000)	-100.0%	Contributions & Donations
56,256	-	56,256		Private Foundation/Organization
496	282,824	(282,327)	-99.8%	Other
68,522	-	68,522		Coronavirus Relief Funds
14,167	7,500	6,667	88.9%	Interest Income
5,853	5,853	(0)	0.0%	Rental Income (Residency (Qtrly))
34,092	45,383	(11,291)	-24.9%	Residency Program (Qtrly)
868,262	**944,523**	**(76,261)**	**-8.1%**	**Total Grants, Donations and Other Support**
3,608,602	**3,859,848**	**(251,246)**	**-6.5%**	**TOTAL REVENUE**
				OPERATING EXPENSES
				PERSONNEL
1,722,120	1,774,074	(51,954)	-2.9%	Salaries, Wages
2,384	2,458	(74)	-3.0%	EAP
579,698	602,830	(23,132)	-3.8%	Benefits
2,304,202	2,379,362	(75,160)	-3.2%	Salaries, Wages & Benefits
229	2,125	(1,896)	-89.2%	Clothing Allowance
1,085,044	1,284,734	(199,690)	-15.5%	**SUPPLIES**
528	2,667	(2,139)	-80.2%	Pharmacy
12,492	9,312	3,180	34.1%	Office
40,287	117,630	(77,344)	-65.8%	Computer
22,878	26,528	(3,651)	-13.8%	Clinic
1,921	3,746	(1,825)	-48.7%	Janitorial
2,666	9,829	(7,163)	-72.9%	Equipment - Non-Capital
21,205	19,030	2,175	11.4%	Dental Supplies/Lab
983,068	1,029,093	(46,025)	-4.5%	Prescription Drugs
-	66,898	(66,898)	-100.0%	Vaccines
334,101	436,698	(102,597)	-23.5%	**PURCHASED SERVICES**
10,909	10,695	214	2.0%	Postage
316	2,121	(1,805)	-85.1%	Printing/Litho
3,167	4,235	(1,068)	-25.2%	Transportation - Patient
3,533	11,190	(7,657)	-68.4%	Outreach
292	2,093	(1,801)	-86.0%	Books/Resource/Subscription
-	3,623	(3,623)	-100.0%	Dues & Memberships
-	-	-		Transcription
-	521	(521)	-100.0%	Recruitment
2,308	14,361	(12,053)	-83.9%	Utilities
1,534	1,773	(239)	-13.5%	Garbage Collection
14,634	15,369	(735)	-4.8%	Phone
683	1,708	(1,025)	-60.0%	Dental Provider Services
36,406	52,508	(16,102)	-30.7%	Provider Services
-	3,750	(3,750)	-100.0%	Audit Fees
335	5,232	(4,897)	-93.6%	Legal Services/Accounting
133,717	129,852	3,865	3.0%	Contracted Services
20,983	21,941	(958)	-4.4%	Equipment Repair & Maintenance
389	1,150	(760)	-66.1%	Mileage - Personal Vehicle
1,657	2,058	(401)	-19.5%	Meals/Lodging/Incidentals
-	18,290	(18,290)	-100.0%	Continuing Education
7,546	14,868	(7,322)	-49.2%	Training/Tuition/Registration Fees
230	20,575	(20,345)	-98.9%	Lab Services
-	3,224	(3,224)	-100.0%	Waste Disposal
7,067	22,862	(15,795)	-69.1%	Rent
14,873	-	14,873		Amortization of Right of Use Lease
3,349	-	3,349		Subscription Lease
194	2,719	(2,525)	-92.9%	Professional Licenses & Dues
7,417	7,417	-	0.0%	Interest
-	-	-		Paying Agent Fee
62,562	62,562	-	0.0%	**Depreciation**
3,723,576	**4,102,918**	**(379,342)**	**-9.2%**	**TOTAL OPERATING EXPENSES**

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Total Accrual 30-Sep-24	MTD Budget	ACCRUAL Variance	ACCRUAL Variance%	
Fiscal Year 2025 Month				
(114,974)	(243,070)	128,097	-52.7%	**NET INCOME (LOSS)**
				DEBT SERVICE
11,667	11,667	-	0.0%	Principal
7,417	7,417	-	0.0%	Interest
-	-	-		Paying Agent Fee
				OTHER
-	-	-		Transfers
24,368	-	24,368		Capital Building and Constructions
51,532	-	51,532		Capital Equipment
3,748,581	4,052,023	(303,443)	-7.5%	**CASH PRESENTATION EXPENSES**
(139,978)	(192,175)	52,197	-27.2%	**CASH PRESENTATION NET INCOME**

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Partnership Health Center
Draft Statement of Revenues, Expenses, and Other Changes in Assets
Period Ending September 30, 2024

	Fiscal Year 2025 Year To Date				2024 YTD Comparison
	Total ACCRUAL 30-Sep-24	YTD Budget	ACCRUAL Variance	ACCRUAL Variance%	Prior YTD Accrual 30-Sep-23
OPERATING REVENUE					
NET REVENUE					
Clinical					
Patient	401,318	106,734	294,584	276.0%	429,737
Medicaid	2,112,323	2,844,811	(732,488)	-25.7%	2,355,659
Medicare	390,149	486,571	(96,422)	-19.8%	386,113
Private Insurance	719,429	955,054	(235,624)	-24.7%	605,693
Value Based Care	88,057	145,000	(56,943)	-39.3%	144,182
Total Clinical Revenue	3,711,277	4,538,170	(826,892)	-18.2%	3,921,382
Pharmacy					
Patient	238,108	226,168	11,941	5.3%	208,964
Medicaid	1,658,329	1,645,692	12,637	0.8%	1,558,810
Medicare	-	-	-		-
Private Insurance	2,824,730	2,335,946	488,783	20.9%	2,291,724
Total Pharmacy	4,721,167	4,207,806	513,361	12.2%	4,059,498
Total Operating Revenue	**8,432,444**	**8,745,976**	**(313,531)**	**-3.6%**	**7,980,881**
NON-OPERATING REVENUE					
Federal (Direct)	1,406,580	1,331,075	75,505	5.7%	1,347,095
Federal Pass-Through	288,419	171,694	116,725	68.0%	347,107
State (Direct)	203,784	197,710	6,074	3.1%	41,340
State Pass-Through	40,000	33,410	6,590	19.7%	129,531
Contributions & Donations	-	75,000	(75,000)	-100.0%	1,807
Private Foundation/Organization	56,256	-	56,256		37,500
Other	13,328	848,471	(835,142)	-98.4%	27,726
Coronavirus Relief Funds	429,398	-	429,398		202,387
Interest Income	14,167	22,500	(8,333)	-37.0%	22,628
Rental Income (Residency (Qtrly))	11,711	17,560	(5,849)	-33.3%	17,564
Residency Program (Qtrly)	79,099	136,150	(57,051)	-41.9%	122,188
Total Grants, Donations and Other Support	**2,542,742**	**2,833,569**	**(290,826)**	**-10.3%**	**2,296,873**
TOTAL REVENUE	**10,975,187**	**11,579,544**	**(604,358)**	**-5.2%**	**10,277,754**
OPERATING EXPENSES					
PERSONNEL					
Salaries, Wages	5,212,667	5,322,221	(109,554)	-2.1%	4,796,268
EAP	6,429	7,373	(944)	-12.8%	5,845
Benefits	1,768,511	1,808,491	(39,980)	-2.2%	1,609,890
Salaries, Wages & Benefits	6,987,607	7,138,085	(150,478)	-2.1%	6,412,003
Clothing Allowance	13,708	6,375	7,333	115.0%	15,000
SUPPLIES	3,652,996	3,854,201	(201,205)	-5.2%	3,325,835
Pharmacy	6,972	8,000	(1,028)	-12.8%	4,689
Office	24,122	27,936	(3,814)	-13.7%	15,634
Computer	144,927	352,891	(207,964)	-58.9%	161,874
Clinic	53,771	79,585	(25,814)	-32.4%	69,966
Janitorial	8,328	11,238	(2,910)	-25.9%	5,946
Equipment - Non-Capital	37,122	29,487	7,635	25.9%	1,140
Dental Supplies/Lab	46,555	57,090	(10,536)	-18.5%	35,523
Prescription Drugs	3,222,599	3,087,279	135,320	4.4%	2,930,807
Vaccines	108,601	200,695	(92,094)	-45.9%	100,256
PURCHASED SERVICES	1,122,007	1,310,094	(188,086)	-14.4%	1,076,513
Postage	31,067	32,086	(1,019)	-3.2%	20,407
Printing/Litho	2,670	6,364	(3,694)	-58.0%	3,353
Transportation - Patient	11,227	12,705	(1,479)	-11.6%	14,121
Outreach	16,841	33,571	(16,730)	-49.8%	12,870
Books/Resource/Subscription	2,212	6,279	(4,067)	-64.8%	1,889
Dues & Memberships	676	10,870	(10,194)	-93.8%	973
Transcription	-	-	-		-
Recruitment	-	1,563	(1,563)	-100.0%	59
Utilities	31,366	43,084	(11,718)	-27.2%	36,313
Garbage Collection	4,926	5,319	(393)	-7.4%	4,462
Phone	36,196	46,107	(9,911)	-21.5%	42,859
Dental Provider Services	2,777	5,125	(2,348)	-45.8%	1,519
Provider Services	82,824	157,524	(74,700)	-47.4%	136,571
Audit Fees	-	11,250	(11,250)	-100.0%	-
Legal Services/Accounting	16,290	15,697	593	3.8%	11,641
Contracted Services	419,852	389,557	30,295	7.8%	404,274
Equipment Repair & Maintenance	46,427	65,822	(19,394)	-29.5%	46,434
Mileage - Personal Vehicle	3,216	3,449	(233)	-6.8%	1,958
Meals/Lodging/Incidentals	5,847	6,175	(328)	-5.3%	2,667
Continuing Education	2,727	54,869	(52,142)	-95.0%	5,336
Training/Tuition/Registration Fees	19,817	44,605	(24,788)	-55.6%	9,365
Lab Services	53,245	61,726	(8,481)	-13.7%	53,685
Waste Disposal	3,953	9,672	(5,719)	-59.1%	7,192
Rent	52,747	68,585	(15,838)	-23.1%	48,348
Amortization of Right of Use Lease	44,619	-	44,619		-
Subscription Lease	19,057	-	19,057		-
Professional Licenses & Dues	1,494	8,157	(6,663)	-81.7%	1,779
Interest	22,250	22,250	-	0.0%	22,628
Paying Agent Fee	-	-	-		-
Depreciation	187,686	187,686	-	0.0%	185,809
TOTAL OPERATING EXPENSES	**11,776,319**	**12,308,755**	**(532,436)**	**-4.3%**	**10,829,350**
NET INCOME (LOSS)	**(801,133)**	**(729,211)**	**(71,922)**	**9.9%**	**(551,596)**
DEBT SERVICE					
Principal	35,000	35,000	-	0.0%	33,750

	Fiscal Year 2025 Year To Date				2024 YTD Comparison
	Total ACCRUAL 30-Sep-24	YTD Budget	ACCRUAL Variance	ACCRUAL Variance%	Prior YTD Accrual 30-Sep-23
Interest	22,250	22,250	-	0.0%	22,628
Paying Agent Fee	-	-	-		-
OTHER					
Transfers	-	-	-		-
Capital Building and Constructions	28,512	-	28,512		-
Capital Equipment	54,851	-	54,851		53,770
CASH PRESENTATION EXPENSES	11,706,996	12,156,070	(449,074)	-3.7%	10,731,062
CASH PRESENTATION NET INCOME	(731,809)	(576,525)	(155,284)	26.9%	(453,307)

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PHC YTD Running Total Medical Encounters FY 2025

Legend:
- Running Total FY 24
- Running Budget FY25
- Running Total FY25

PHC YTD Running Total Dental Encounters FY 2025

Legend:
- Running Total FY 24
- Running Budget FY25
- Running Total FY25

PHC YTD Running Total BH Encounters FY 2025

Legend:
- Running Total FY 24
- Running Budget FY25
- Running Total FY25

PHC Total School Based BH Encounters FY 2025

Legend:
- Running Total FY 24
- Running Budget FY25
- Running Total FY25

PHC YTD Running Total Pharmacy Prescriptions FY 2025

Legend:
- Running Total FY 24
- Running Budget FY25
- Running Total FY25

Cash Comparison - Operating and Capital Accounts

	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	March	April	May	June
FY25	27,075,793	28,413,414	26,068,427									
FY 24	29,374,346	29,655,524	29,748,865	29,616,069	29,571,965	30,140,000	27,898,360	28,667,531	28,073,462	28,302,966	28,449,232	27,342,850
FY23	27,886,561	27,212,271	28,404,091	27,591,212	28,040,127	28,279,762	27,653,162	27,528,264	28,941,518	28,882,373	29,107,308	29,485,042
FY 22	22,735,227	21,905,116	23,132,695	25,353,719	26,261,958	26,008,429	26,289,298	26,033,636	26,459,975	28,037,165	27,628,992	28,490,161
FY 21	19,430,591	20,003,731	21,098,059	21,653,732	22,158,072	22,214,606	22,485,130	23,298,065	24,115,207	24,320,941	24,299,174	25,621,503
FY 20	11,676,785	11,404,483	11,795,854	12,016,626	12,253,310	12,588,087	12,162,207	12,602,731	14,332,403	15,757,532	19,701,351	19,718,991

Operating	Other/Reserves	Total Current Month	Prior Month	Change
23,374,221	2,694,205	26,068,427	28,413,414	(2,344,988)

* Cash balances are influenced by the timing of the county posting.

PHC PARTNERSHIP HEALTH CENTER

Fiscal Year 2025 Capital Report

September 2024	Dept	Grant Funded	Cost	Budget	Totals	Timeline
Creamery Building	Facility	Chiller replacement	22,621	541,650		
C8E Funded Renovation of Alder Building	Facility	Architecture fees, chiller work	40,714	-		
Freighthouse E.W. paint, carpet, improvements	Facility	Tenant Improvement Dollars		57,780		As Needed
Solar	Facility			100,000		
Dividing Wall in Weinberg	Facility			30,000		
Creamery Exam Room patch + paint	Facility			20,000		
Lowell Clinic - Remodel PSR Area to accommodate 2 PSRs	Facility			7,814		
Creamery Main Floor Remodel	Facility			800,000		
Exterior PHC Sign facing Orange Street	Facility			30,000		
Exterior PHC Sign at Trinity	Facility			30,000		
Facilities			63,335		1,617,244	
Twelve O'Clock Cabinets to Rooms 7 & 8	PHC Dental		(6,966)	35,000		
Replace aging xray head @ Creamery	PHC Dental			5,000		
Midmark Steam Sterilizer M11 to replace aging equipment Cream	PHC Dental			7,000		
Pano (2-D, external BW feature only) Lowell	PHC Dental			25,000		
Dental			(6,966)		72,000	
Badge System Upgrade	IT			78,000		June 2024
Conference Room Technology	IT			-		
Electronic check in kiosks	IT			-		
Information Technology			-		78,000	
Exam tables	Medical			160,000		
Exam room blinds	Medical			23,000		
EKG Machine	Medical			30,000		
Electronic Vaccine Reader integrated into EHR	Medical			20,000		
Interpreter services, change in contract	Medical			20,000		
Vehicle - Mobile Van Match	Medical		20,000	20,000		
Laboratory Shelves	Medical		6,994			
Medical			26,994		273,000	
Finance Software	Administration		300,000			
					300,000	
Capital Payments Year to Date			**83,362**		2,340,244	

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September 2024

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PRINCIPLES OF PRACTICE

**Purchasing and Accounts Payable
(Approved by Board)**

```
Title:          PURCHASING AND ACCOUNTS PAYABLE
Section:        Financial Management
Effective date: 07/2001
Last reviewed:  09/2024
Next revision:  09/2026
Status:         Approved by Board
Reference:      N/A
Lead author:    CFO
```

PURPOSE

Outline basic accounts payable procedures and timelines for Partnership Health Center (PHC).

POLICY/PROCEDURES

Prior to engaging in purchasing action, budget availability must be verified by the department manager or designee. It is the responsibility of managers to insure the purchasing action is within budget parameters prior to purchasing. A Purchase Request form must be completed for all anticipated purchases above $50.00. The person who gives final approval for the purchase is determined by the amount of the purchase:

- Purchasing Agent or designee: May approve purchases up to $1,500 when ordering clinic-wide supplies if within budget. Ordering department specific supplies requires approval of Department Manager or designee.

- Department Manager (Excluding IT, Facilities, Medical & Dental Clinics) or designee: May approve purchases up to $2,500 if within budget.

- Chief Operations Officer, IT, Facilities, Medical & Dental Clinic Department Managers or designees: May approve purchases up to $4,000 if within budget.

- Controller or Assistant Chief Financial Officer: Approves all purchases between Department Manager maximum limits and $10,000 in addition to approval from Department Manager or designee.

- Chief Financial Officer (Controller or Assistant Chief Financial Officer when CFO is unavailable): Approves all purchases between $10,001 and $30,000 in addition to approval from Department Manager or designee. The Chief Financial Officer or designee may approve monthly invoices for annual contracts such as IT Software, the Family Medicine Residency of Western Montana, and Service Contracts that exceed $30,000 per month.

- Chief Executive Officer: Approves all purchases between $30,001 and $100,000 in addition to approval from Department Manager or designee. The Chief Executive Officer may sign for Vaccine purchases that exceed $100,000 as well as pass through grant invoices that are associated with approved grants.

- Board of Directors: Must approve all purchases over $100,000 in addition to approval from Executive Director. Accounts payable will maintain a list of assigned designees and will update annually.

- If a department head or designee is unavailable then the approval moves to the next level. Larger purchases should not be broken down into several smaller purchase orders to avoid Senior Management or Board approval. A purchase request exceeding the department's budget requires an additional signature. All exceptions to the purchase order process must be approved with the Chief Financial Officer prior to initiating the purchasing process.

Procedure:

A Purchase Request form is completed and an authorized signer approves and dates the form. Depending on the purchase amount a second signature may be required. The form is then sent to accounts payable where a staff member will assign a purchase order number.

Once approved and assigned a purchase order number the order can be placed. The purchase order number must be included with the order as the vendor should reference it on the invoice.

As purchases arrive a designated staff person will sign for the purchase and verify receiving the goods by comparing the packing slip to the purchase order and to actual items received. The packing slip should be initialed, dated and notations made if items received differ from the packing slip and purchase order.

The Purchasing Agent or departmental designee will then match each packing slip and purchase order with invoices received. The review process includes checking the amount and quantity billed with what was ordered and received. The approver must sign and date invoice or correspond with accounts payable staff via email that invoice is approved for payment. Invoice, purchase request form, original order form and packing slips should then be sent to Accounts Payable. Once this process is completed, the invoice will be prepared for payment.

Tolerance rules for invoice overages (invoice amount higher than P.O. amount):

Within tolerance level invoices will be processed without question. This applies to 1) invoices with overage of 10% or less of the total P.O. amount up to a total overage of $100 or 2) reasonable shipping and handling charges. Outside of tolerance level requires authorization from approver to pay. This applies to 1) invoices with overage over 10% of the total P.O. amount or 2) within 10% but exceeding total overage of $100.

PHC credit cards will be kept in the possession of the Chief Executive Officer, Chief Financial Officer, Chief Medical Officer, Purchasing Agent, approved Department Managers and accounts payable department. Credit cards may be used by staff members when a purchase request form has been completed and approved. Sign out of the card is required. At the time of purchase the transaction will be reported on the Credit Card Transaction Log. All receipts and corresponding paperwork will be sent to Accounts Payable upon initial purchase and receipt of items.

PHC must follow the accounts payable schedule and auditing process as defined by Missoula County. The purchase requisition process takes place in Missoula County's accounting system and is completed by the PHC finance department for each invoice to be paid. Attached electronically to each purchase requisition is a scanned copy of the original invoice and packing slip. In addition, a copy of the scanned documentation is saved on the PHC USERS drive for future reference. Original documentation is given to the PHC Controller or designee for signature authorization to pay. Once signed by the PHC Controller or designee, he or she approves the purchase requisitions electronically for payment by the county finance department. The claim as entered into the Missoula

County computer system is verified and audited by the Missoula County auditor. The Missoula County Board of County Commissioners reviews claims and authorizes the preparation of warrants.

CEO and Leadership Report

October
Partnership Health Center Board Meeting

STRATEGIC DIRECTION TIMELINE continued.... 2024-2025

February
- DRAFT SOs to BOD
- SLT Goal refine
- ELT KPI refine
- Begin budget education & planning:
  - Staffing
  - Capital
  - Education and training
  - Encounters

March
- Staffing planning
- Encounter planning
- KPIs finalized
- Training education planning
- Diversity and Equity Division
- EHR presentation to board

April
- Capital final
- DRAFT budget
- Trinity clinic
- Actuarial report Understanding independence (health and retirement actuarial report). Delayed
- County Budget Submission Due 4/15

May
- SLT action planning with dept. teams
- Trinity clinic Implementation
- Leadership Budget Review
- Union Negotiations
- HCN Contract Review/Sign delayed - legal

June
- Dept. action planning and measures
- Trinity clinic Implementation
- Continue Lean process improvement implement
- Strategic Space Planning

July
- Trinity clinic official start – move in, lease negotiations
- FY 25 budget revisions work
- Lean "Daily Dashboards"
- Strategic Space Planning
- Financial Software Impl.
- Audit prep begins
- Medicaid work with partners

Aug
- Continue aligning strategy with goals, measures, action/work plans
- Trinity Opening Events
- EPIC pre-planning kick-off 8/13
- Audit prep continued
- 15 LDM Boards Created! Daily Huddles occuring

Sept
- Continue aligning strategy with goals, measures, action/work plans
- EPIC and Workday implementation continue.
- Audit prep continued
- Kaizen event – clinic team roles
- Team Design/Re-design
- Watershed open

Oct
- Continue aligning strategy with goals, measures, action/work plans
- EPIC and Workday implementation continue.
- Audit prep continued
- Combined Leadership training engagement

Nov
- Continue aligning strategy with goals, measures, action/work plans
- EPIC and Workday implementation continue.
- Audit prep continued
- All-staff focus on DEI training engagement results

Dec
- Continue aligning strategy with goals, measures, action/work plans
- EPIC and Workday implementation continue.
- Audit prep continued
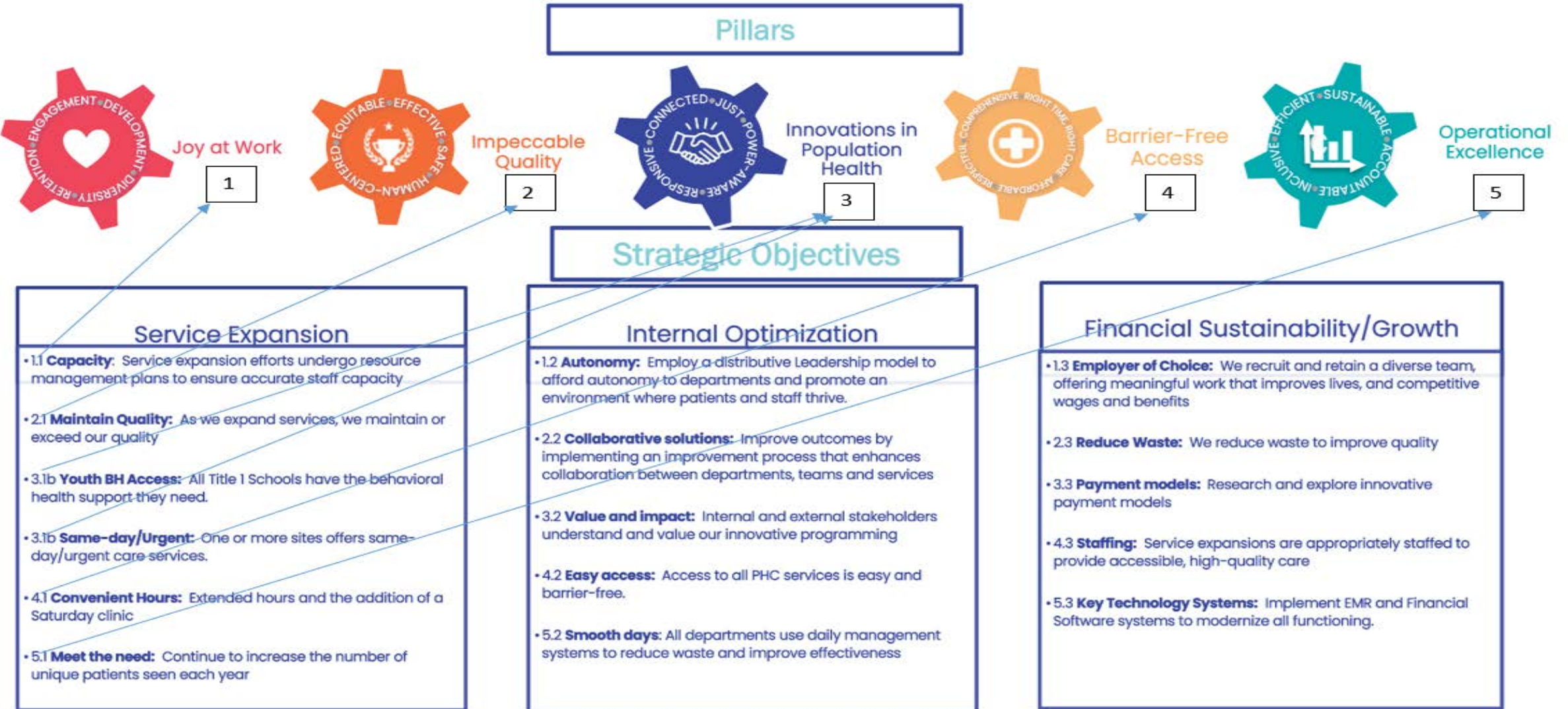
2024

PHC PARTNERSHIP HEALTH CENTER

Vision: Healthy People, Strong Communities

Mission: To promote optimal health and well-being for all through comprehensive, patient-focused, accessible and equitable care.

Values: Equity. Respect. Compassion. Community. Service Excellence

Pillars

Joy at Work — **1**

Impeccable Quality — **2**

Innovations in Population Health — **3**

Barrier-Free Access — **4**

Operational Excellence — **5**

Strategic Objectives

Service Expansion

- **1.1 Capacity:** Service expansion efforts undergo resource management plans to ensure accurate staff capacity

- **2.1 Maintain Quality:** As we expand services, we maintain or exceed our quality

- **3.1b Youth BH Access:** All Title 1 Schools have the behavioral health support they need.

- **3.1b Same-day/Urgent:** One or more sites offers same-day/urgent care services.

- **4.1 Convenient Hours:** Extended hours and the addition of a Saturday clinic

- **5.1 Meet the need:** Continue to increase the number of unique patients seen each year

Internal Optimization

- **1.2 Autonomy:** Employ a distributive Leadership model to afford autonomy to departments and promote an environment where patients and staff thrive.

- **2.2 Collaborative solutions:** Improve outcomes by implementing an improvement process that enhances collaboration between departments, teams and services

- **3.2 Value and impact:** Internal and external stakeholders understand and value our innovative programming

- **4.2 Easy access:** Access to all PHC services is easy and barrier-free.

- **5.2 Smooth days:** All departments use daily management systems to reduce waste and improve effectiveness

Financial Sustainability/Growth

- **1.3 Employer of Choice:** We recruit and retain a diverse team, offering meaningful work that improves lives, and competitive wages and benefits

- **2.3 Reduce Waste:** We reduce waste to improve quality

- **3.3 Payment models:** Research and explore innovative payment models

- **4.3 Staffing:** Service expansions are appropriately staffed to provide accessible, high-quality care

- **5.3 Key Technology Systems:** Implement EMR and Financial Software systems to modernize all functioning.

Three Year Action Plan for Sustainability

Think Strategically, Uprgrade Systems, Improve Processes, Ensure Financial Sustainability, Maintain Quality, Ensure Mission

FY2025

Goal – reduce deficit by $500K

- System Optimization = Improve efficiency, access, pt. experience
- Balance workforce, invest in development, involve staff
- Financial software/systems to improve reporting, timeliness
- Break Even Analysis and Budget Control
- Pursue additional $7m aligned grants
- 10 year space plan
- Lead community Medicaid education efforts to ensure in-tact

FY2026

Goal – reduce deficit by $500k

- EHR and Financial Software "go live" in March – impacts by July
- Realize Lean Efficiency, Quality, and Pt. Experience Gains
- Pursue Innovative Payment Models
- Determine plans for November 2026 330 Grant
- Continue staffing control

FY 2027

Goal – reduce deficit by $500k

- Solidify our stability baseline – strong footing
- Monitor success, adjust where needed guided by KPIs
- Pursue smart growth
- Continue to refine new systems

Event and Impact

- Increase savings due to COVID $ by $7m not including operating DCOH

- COVID $ stopped.

- CEO Transition

- Projected loss of reserves of $1.5 m in FY24 budget for staffing, systems investment

- Medicaid Redetermination

- FY 2025 Budget loss of $3.5m projected

- Projected use of reserves over 3 years

Action-Response

- Increase savings/reserves. Increase to 120 DCOH

  Increased staff/Salary expense

- Had not used COVID$ during pandemic.

  Did not reduce staff expense. Increased expense structure

- Assessment - Re-organization -

  Strategic plan included Financial Sustainability.

- Board approved investment of reserves of $1.5m per year

- Resulted in a loss of $1.5m. Added inflationary expense.

  If all things remain constant, hope to recup $800k

- Optimization has begun

  Monitoring for efficiency gains, increased encounters over next 12-18 months

- Manage and monitor optimization efforts monthly, course correct during FY 2026 budget season

PHC PARTNERSHIP HEALTH CENTER

Systems Optimization 2024 (FY2025)
Enhance Patient Experience, Quality, Financial Sustainability, Smooth Days for Staff

December 2024
Continue Team Optimization
Monitor Staffing Levels
Quality and Financial Measure
Continue Workday Integration with County

January-April 2025
Team Optimization, Role Clarity
Continue EPIC/HCN Install
18 month Financial Contingency Planning

November 2024
Continue Team Optimization
Continue EPIC/HCN Install
Continue Workday Integration with County

October 2024
Continue Lean Daily Management
Team/Process Transformation
Program Budget Break-Even Analysis
EPIC Implementation
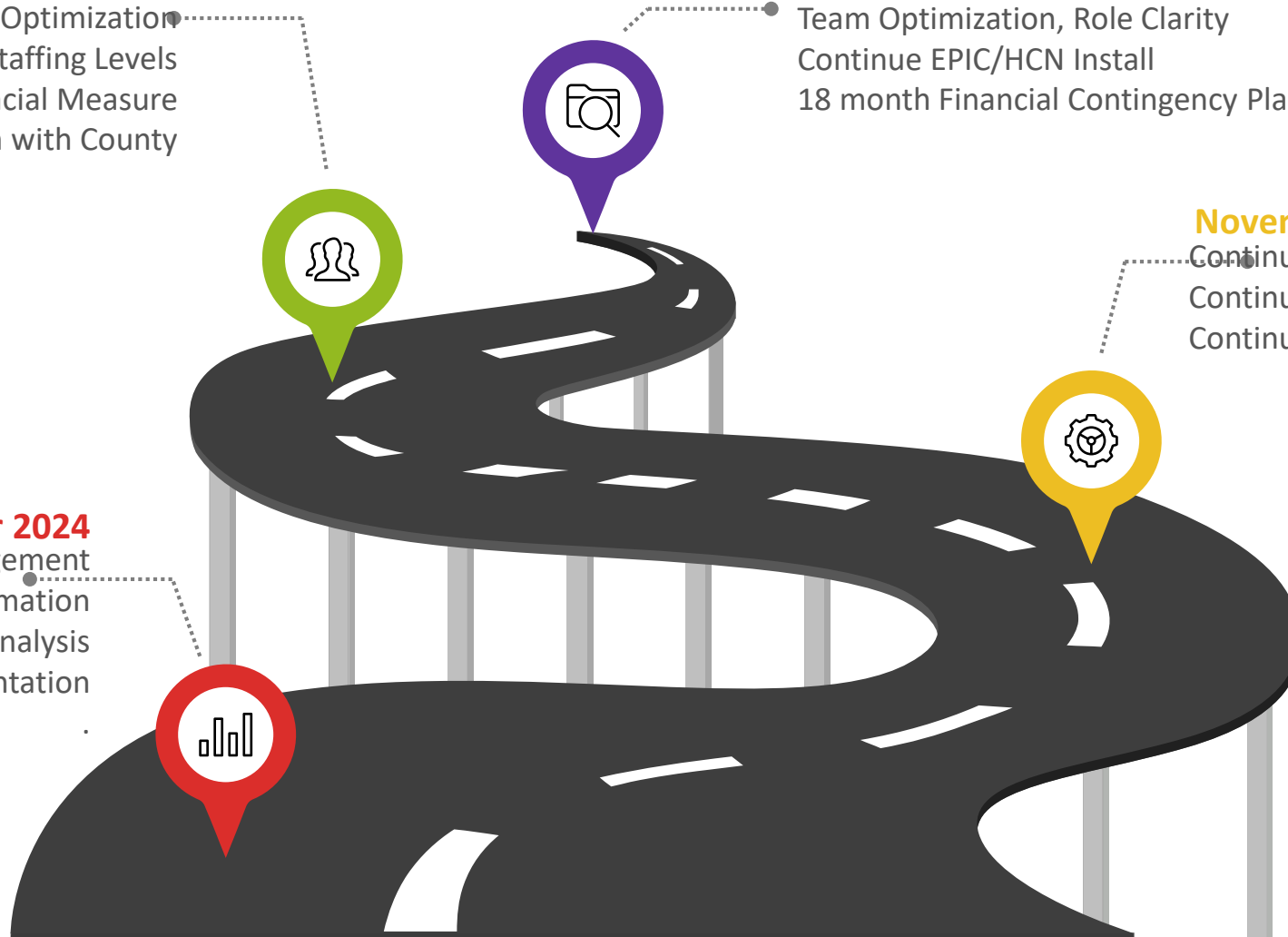
Systems Optimization 2025 (FY25/26)
Enhance Patient Experience, Quality, Financial Sustainability, Smooth Days for Staff

April - July 2025

HCN Go Live

Monitor Gains of Team Refinement and EPIC
Monitor staffing needs and position control
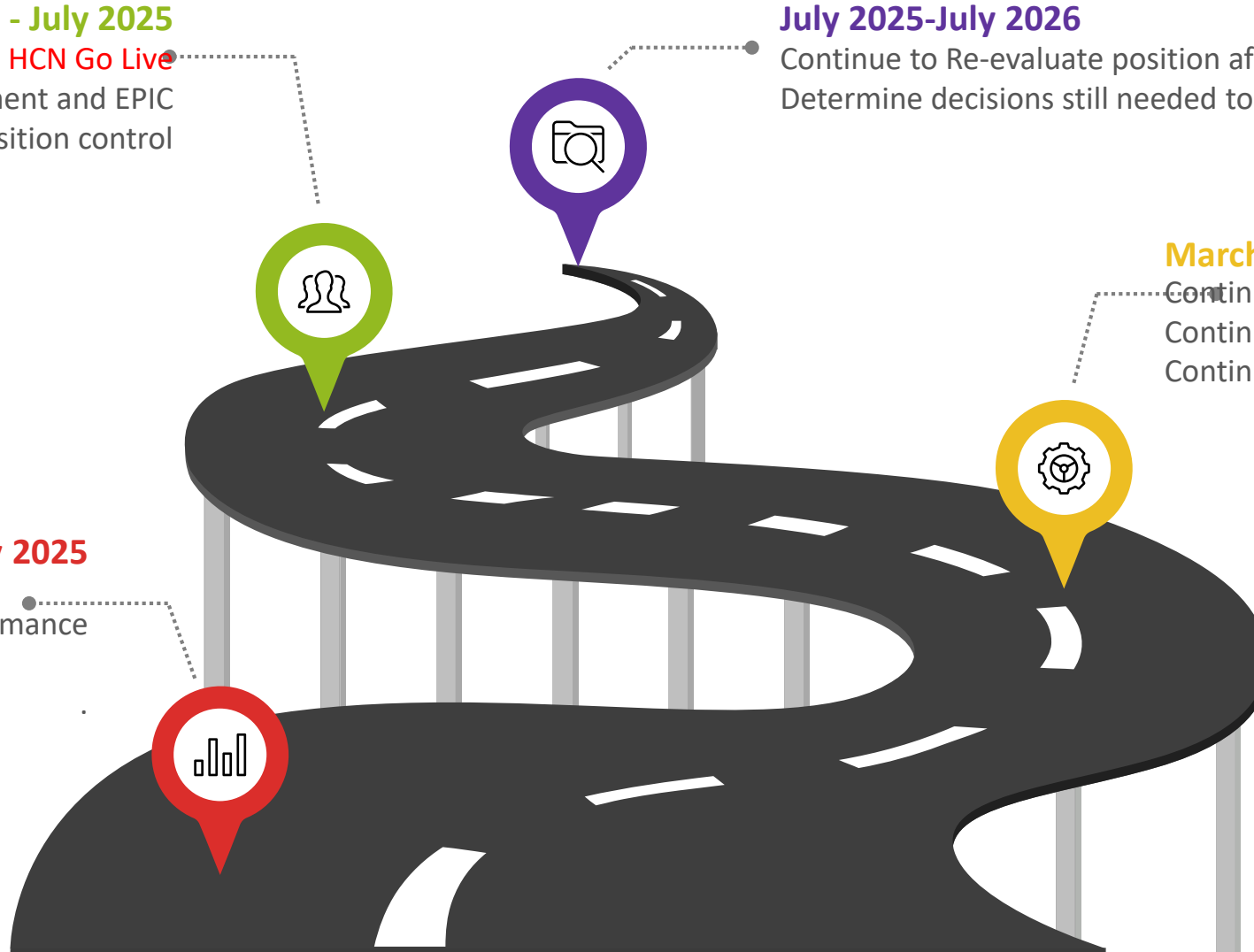
July 2025-July 2026

Continue to Re-evaluate position after systems changes
Determine decisions still needed toward balanced budget

March 2025

Continue Team Optimization
Continue EPIC/HCN Install
Continue Workday Integration with County

February 2025

Monitor encounter performance

Chief Financial Officer Report

September 2024

September

Medical Encounters
YTD total is 10,910 and the Budget is 13,150 for a % variance of -17.
Behavioral Health Encounters
YTD Total is 2,416 and the Budget is 3,381 for a % variance of -28.5.
School Based Encounters
YTD Total is 326 and the Budget is 962 for a % variance of -66.1.
Dental Encounters
YTD Total is 4,079 and the Budget is 4,329 for a % variance of -5.8.
Pharmacy Prescriptions
YTD Total is 32,728 and the Budget is 32,456 for a % variance of 0.8.

Consolidated Days Cash on Hand is 209.1 days calculating available cash and investments of $26.07m.
Days in Clinical Accounts Receivable are 66, and the current receivable balance is $3,159,303. Clinical AR is presented gross and does not include an adjustment for assessment of collectability.
Days in Pharmacy Accounts Receivable are 14, and the current receivable balance is 991,543
Pharmacy AR is presented net of an allowance for uncollectible patient accounts.

YTD Fee Revenue is $8.43m with a Budget of $8.75m for a % variance of -3.6%.
YTD Total Revenue is $10.98m with a Budget of $11.58m for a % variance of -5.2%.

YTD expenses are $11.78m with a Budget of $12.31m for a % variance of -4.3%.

YTD Net Income is $-801,133 with a Budget of $-729,211 for a % variance of 9.9%.

PHC
PARTNERSHIP
HEALTH CENTER

Patient Service
Volumes, Reporting Month

Medical

3,680
Target: 4,109

89.6%

Dental

1,418
Target: 1,353

104.8%

School Based Behavioral Health

247
Target: 301

82.2%

Behavioral Health

841
Target: 1,056

79.6%

Pharmacy

10,561
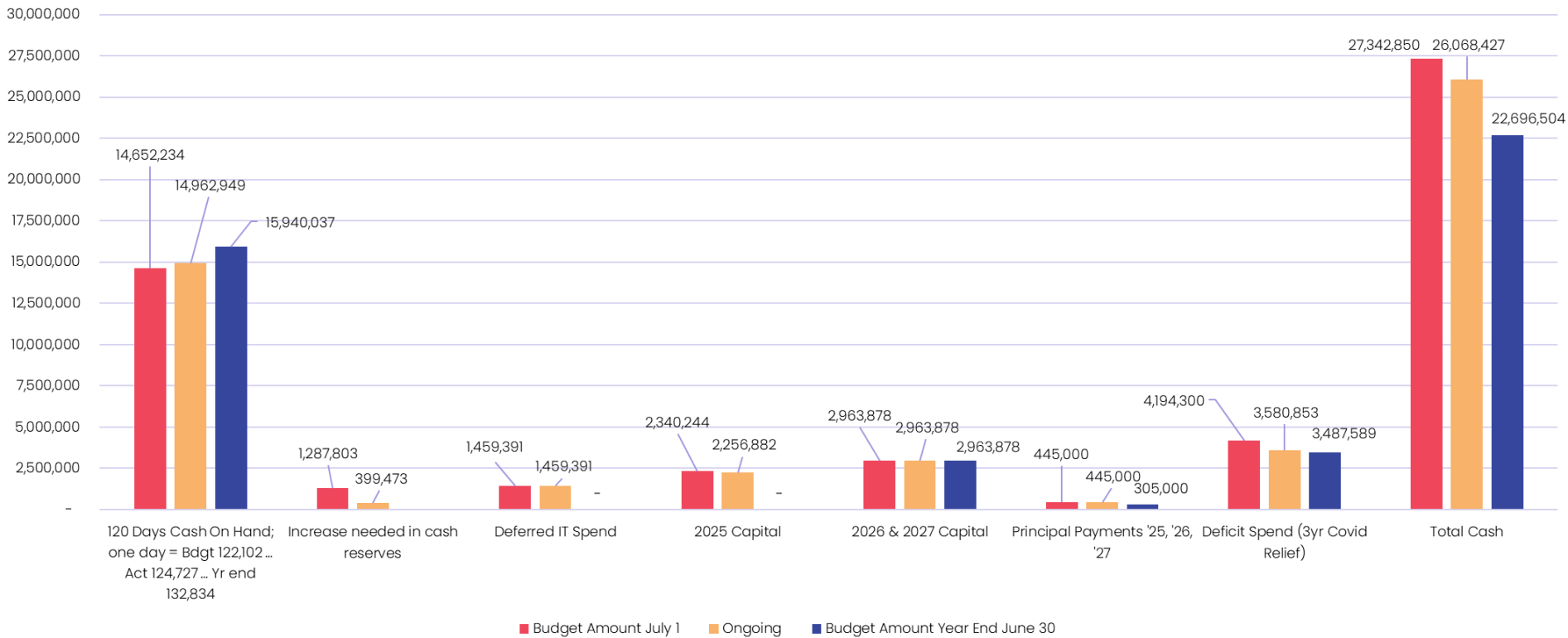Target: 10,142

104.1%

Cash

Draft Cash Report September 2024

PARTNERSHIP HEALTH CENTER
DRAFT STATEMENT OF REVENUES, EXPENSES, AND CHANGES IN NET POSITION
For the Month Ended September 2024

	ACTUAL MTD	MTD BUDGET	ACTUAL YTD	YTD BUDGET	2025 Annual BUDGET	Accrual AUDITED 2023	Accrual AUDITED 2022
OPERATING REVENUE							
Charges for Services	2,740,340	2,915,325	8,432,444	8,745,976	34,983,902	33,717,396	31,060,515
Operating Revenue	2,740,340	2,915,325	8,432,444	8,745,976	34,983,902	33,717,396	31,060,515
On-Behalf Revenue-Pensions						571,772	1,154,677
Total Operating Revenue	2,740,340	2,915,325	8,432,444	8,745,976	34,983,902	34,289,168	32,215,192
OPERATING EXPENSES							
Personnel	2,304,202	2,379,362	6,987,607	7,138,085	28,552,341	27,242,968	23,020,764
Other Operating Expenses- Clothing	229	2,125	13,708	6,375	25,500		
Other Operating Expenses- Supplies	1,085,044	1,284,734	3,652,996	3,854,201	15,416,804		
Other Operating Expenses- Purchased Services	271,540	374,136	934,322	1,122,408	4,489,633		
Other Operating Expenses						17,695,462	15,615,712
Depreciation	62,562	62,562	187,686	187,686	750,742	596,004	648,113
Operating Expenses	3,723,576	4,102,918	11,776,319	12,308,755	49,235,020	45,534,434	39,284,589
Uncompensated Absences						1,618,576	1,547,995
Pension Expense						2,766,606	1,626,775
OPEB Expense						81,943	113,811
Total Operating Expenses	3,723,576	4,102,918	11,776,319	12,308,755	49,235,020	45,534,434	39,284,589
Operating Loss	(983,236)	(1,187,593)	(3,343,875)	(3,562,780)	(14,251,118)	(11,245,266)	(7,069,397)

PARTNERSHIP HEALTH CENTER
DRAFT STATEMENT OF REVENUES, EXPENSES, AND CHANGES IN NET POSITION
For the Month Ended September 2024

	ACTUAL MTD	MTD BUDGET	ACTUAL YTD	YTD BUDGET	2025 Annual BUDGET	Accrual AUDITED 2023	Accrual AUDITED 2022
NON-OPERATING REVENUE (EXPENSE)							
Intergovernmental Revenue	631,153	520,616	1,927,616	1,561,849	6,247,397	10,206,566	9,717,122
Private/Local Grants and Donations	216,593	127,730	575,920	383,189	1,532,754	279,018	471,287
Miscellaneous Revenue	6,349	288,677	25,039	866,031	3,464,123	173,199	239,147
Investment Earnings	14,167	7,500	14,167	22,500	90,000	84,574	8,418
Interest Expense	(7,417)	(7,417)	(22,250)	(22,250)	(89,000)	(45,813)	(51,438)
Loss on Disposal of Assets						(343,452)	
Total Non-Operating Revenue (Expense)	868,262	944,523	2,542,742	2,833,569	11,334,274	10,354,092	10,384,536
Change in Net Position	(114,974)	(243,070)	(801,133)	(729,211)	(2,916,844)	(891,174)	3,315,139
Net Position, Beginning of Year			26,387,715	26,387,715	26,387,715	27,278,889	23,963,750
Net Position, End of Period			25,586,582	25,658,504	23,470,871	26,387,715	27,278,889

Fiscal Impact of Grants, Lean, Operational Changes

Total Budgeted Non-Operating Revenue: $11,334,274
Total Unsecured, budgeted Grant Revenue: $1,729,189, 15.26%

Non-Operating Revenue: Grants applied for, unsecured in the budget	Expected to hear by:	Budgetary impact	
● Award short by $99,320 CAF | $34,320 funded, $133,640 budgeted	Undersecured	(99,320)	
● $374,819 SAMHSA System of Care (primarily subcontracted)	10/1/2024	awarded, determining PHC benefit vs. pass through amount	
● $350,000 Otto Bremer	Not awarded	(350,000)	
● $36,000 UDS Plus	Oversecured	2,802	
● $167,050 HRSA BH Expansion	Oversecured	432,950	$600,000 awarded period: 9/1/24-8/31/2025
● $546,000 OMH - Trinity	Not awarded	(546,000)	Not awarded
● $150,000 DPHHS County & Tribal Matching	Undersecured	(52,503)	Awarded $97,497
	Total	**(612,071)**	

Non-Operating Revenue: Grants applied for, unsecured not in the budget	Expected to hear by:	Budgetary impact
● $500,000 HRSA Expanded Hours, Dec '24-Nov'26 Submitted	Unclear	
●$650,000 annually HRSA New Acces Point, June.'25-May '26	Unclear	
● $375,000 annually SAMHSA Strategic Prevention, 5 yrs	Unclear	
● $231,494 Crisis Diversion July'24-June'27 Submitted	Unclear	Covers 2 FTE existing, remaining is pass through expenses

Lean Process Improvements:
● Sept. '24, Kaizen event Clinical team model

Operational Changes:

● Aug. '24 | Pharmacy Software upgrade, expected more efficient operations
● Sept. '24 | Billing: engage PioneerRx for payment recon.
● Sept. '24-ongoing | Billing: Insurance Discovery service, expected revenue recapture
●   Oct. '24 | Pharmacy Buying Group & PSAO, expected $400,000 cost savings over 1 yr

September Capital Purchases

Description	Cost
September – Chiller work Creamery, Alder Architecture fees, chiller work Alder, vehicle	$75,899
August – Chiller work Creamery, Alder Architecture fees, chiller work Alder, dental equipment credit, laboratory shelves Creamery	$4,605
July – Pump for Creamery	$2,858
Total	$83,362

Drill Down Measure
Unique Patients

Unique Patients: 10/2/23 to 9/30/24

OE

**This is a close estimate of Unique Patients. Exact Unique Patient Numbers as reportable for UDS qualifying encounters can and should be found in Azara/DRVS.

14,293 (13)	5,690 (106)	2,192 (20)	17,888 (110)
Medical	Dental	BH	Total

OE = Operational Excellence

PHC PARTNERSHIP HEALTH CENTER
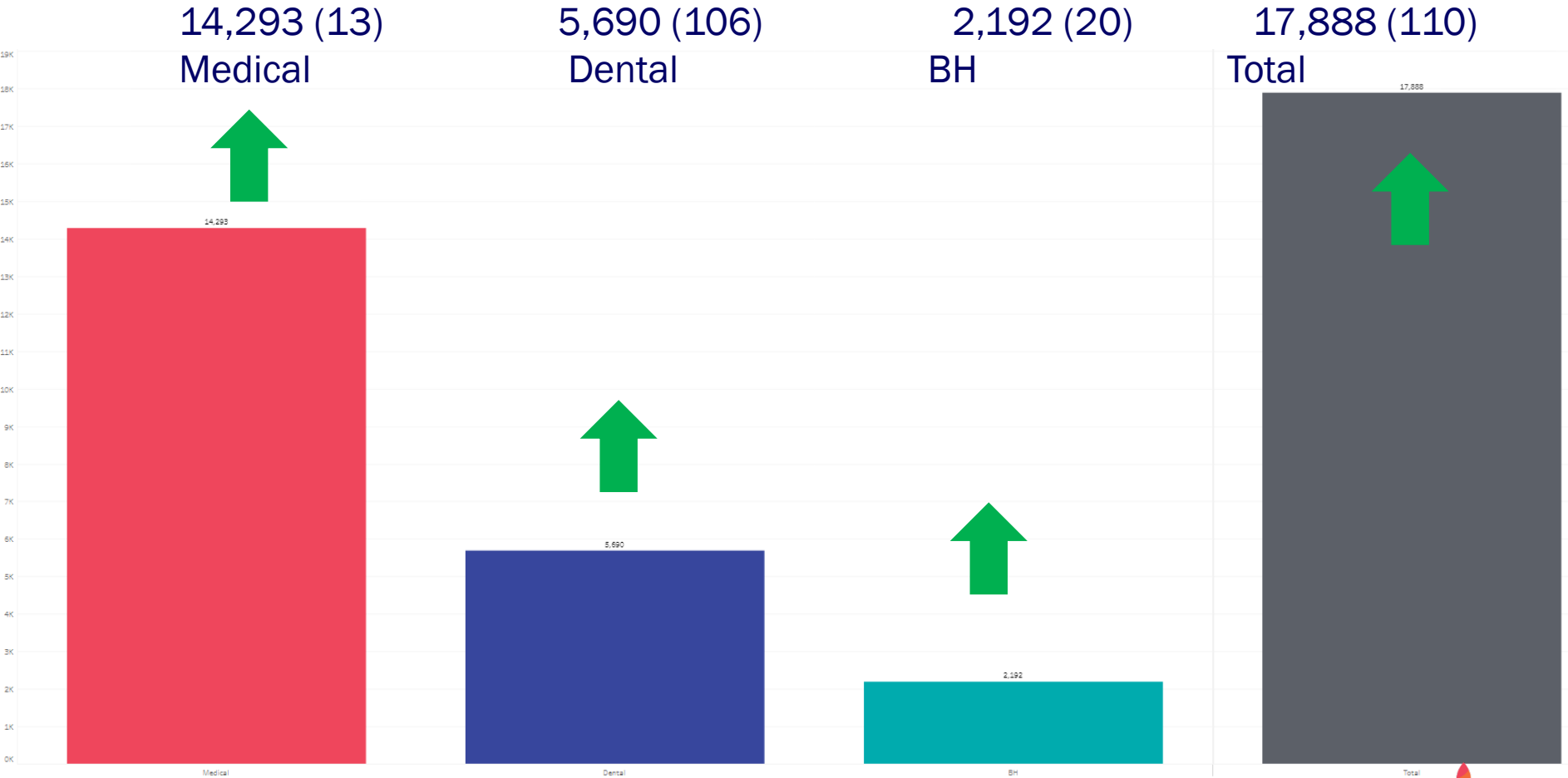
Drill Down Measure
Cost Per Encounter
Medicaid APM Rate for 2024: $342.10

	FY 24 Q4	July YTD	August YTD	Sept. YTD	Budget YTD
Medical	373	454	424.15	412.73	360.14
Dental	331	323	341.89	333.20	322.14
Behavioral Health	398	546	494.75	484.84	383.08
School Based Health	463	3,828	3,028.92	1,143.29	369.92
Total Clinical	370	450	432.50	417.61	356.65
Pharmacy	125	126	133.26	129.73	123.71

Calculations include overhead allocation.
All expenses are included, including depreciation.

Drill Down Measure
Operating Margin

net income / total revenue

	Actual FY24	Actual FY25	Budget FY25
July:	-4.7%	-5.8%	-6.3%
August:	-4.0%	-15.4%	-6.3%
September:	-7.6%	-3.2%	-6.3%
October:	-5.5%		-6.3%
November:	-9.3%		-6.3%
December:	-11.0%		-6.3%
January:	-16.4%		-6.3%
February:	8.9%		-6.3%
March:	-12.5%		-6.3%
April:	3.7%		-6.3%
May:	-6.2%		-6.3%
June:	-34.0%		-6.3%
Year To Date:	-8.6%	-7.3%	-6.3%

Excluding information added during the financial audit:
        On-Behalf Revenue-Pensions
        Uncompensated Absences
        Pension Expense
        OPEB Expense

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Graphical Operating Margin

	July	Aug.	Sept.	Oct.	Nov.	Dec.	Jan.	Feb.	March	April	May	June
Month FY 25	-5.8%	-15.4%	-3.2%									
Fiscal Year To Date 2025	-5.8%	-10.6%	-7.3%									
Fiscal Year 2025 Budget	-6.3%	-6.3%	-6.3%	-6.3%	-6.3%	-6.3%	-6.3%	-6.3%	-6.3%	-6.3%	-6.3%	-6.3%
Month FY24	-4.7%	-4.0%	-7.6%	-5.5%	-9.3%	-11.0%	-16.4%	8.9%	-12.5%	3.7%	-6.2%	-34.0%
Fiscal Year To Date 2024	-4.7%	-4.9%	-5.4%	-4.3%	-5.5%	-7.4%	-9.0%	-5.9%	-6.6%	-5.9%	-6.5%	-8.6%

Bryan Chalmers
Chief Financial Officer
Partnership Health Center
Direct: (406) 258-4445 | Main: (406) 258-4789

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Integrated Services Clinical Programs

CMO Report

CMO-Updates

- **Quality and Compliance:** Ongoing system reviews to improve patient care and address Medicaid redetermination impacts; focus on maintaining access despite financial pressures.

- **Strategic Service Adjustments:** Evaluating service line sustainability amid reimbursement challenges, aiming to strengthen essential offerings and explore innovative care models.

- **Collaborative Provider Engagement:** Continued coordination with providers ensuring smooth communication and alignment with organizational goals.

Operations
COO Report

MEDICAL   PHARMACY   INNOVATIONS   BEHAVIORAL   DENTAL

Patients with Qualifying Encounters ⓘ
MEASURE

PERIOD
TY October 2024 ⌄

RENDERING PROVIDERS
All Rendering Provid... ⌄

📊 MEASURE ANALYZER

17,814 ↑418
Numerator

18,119

TY 10/23 ⌄
2027 Unique ... ⌄

◎ 21,000 ◉ 19,199

TY 10/24   GROUP BY None ⌄

18,000
17,900
17,800
17,700
17,600
17,500
17,400
17,300
       '23   '23   '24   '24   '24   '24
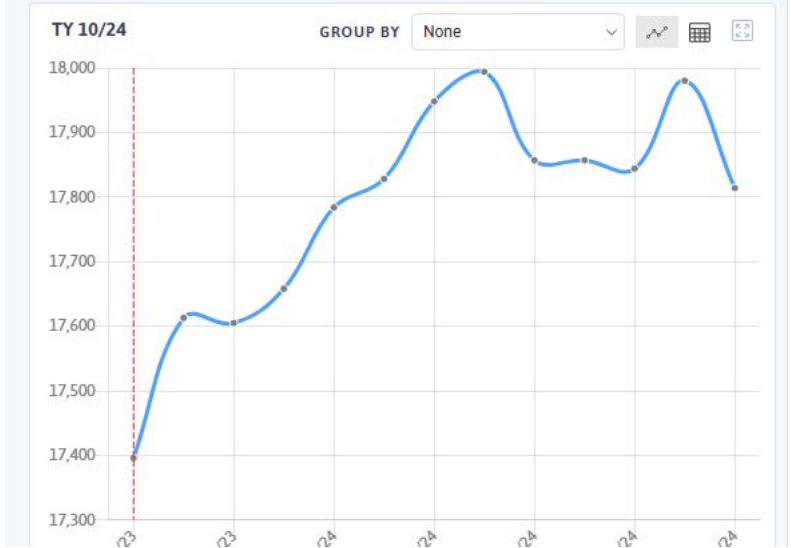
Medicare Annual Well Visit ⓘ
MEASURE

PERIOD
TY October 2024 ⌄

RENDERING PROVIDERS
All Rendering Provid... ⌄

PLANS
Medicare MSSP ACO ⌄ ⊗

📊 MEASURE ANALYZER

382 / **1,556**
0 Exclusion(s)
1,174 Gaps   **396** To Target

24.55%
↑ 3.36%
TY 10/23 ⌄

MSSP MTPCA 202... ⌄
◎ 50% ◉ 20%

SELECTED		24.55%
Center Avg		16.2%
Network Avg		18.8%
Best Center		46.0%

TY 10/24   GROUP BY None ⌄

100%
90%
80%
70%
60%
50%
40%
30%
20%
10%
0%
   TY 10/23 TY 12/23 TY 2/24 TY 4/24 TY 6/24 TY 8/24 TY 10/24
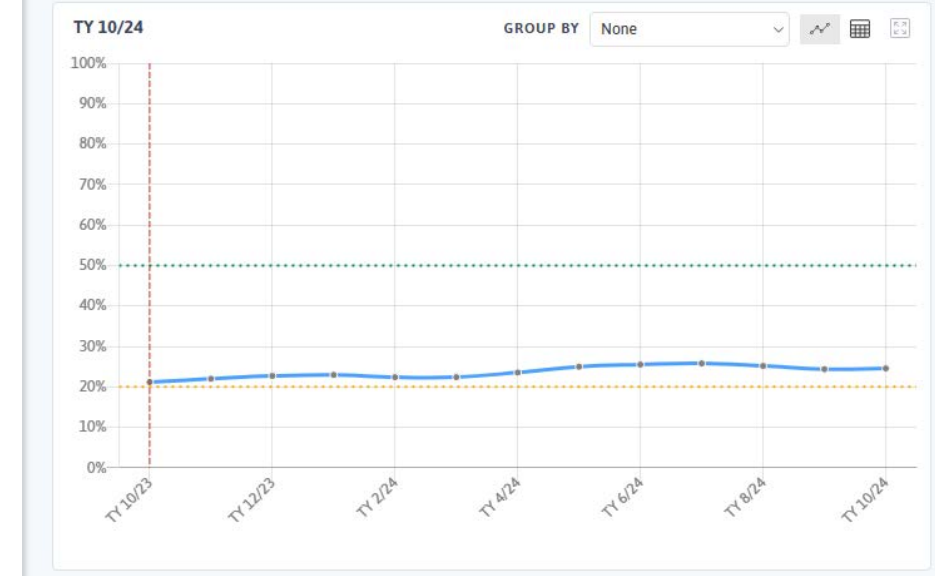
TY September 2024 UDS

PERIOD
TY September 2024 ⌄

RENDERING PROVIDERS
All Rendering Provid... ⌄

BASELINE PERIOD
TY December 2023 ⌄

+ Add Filt

▦ REPORT   ⊕ CARE GAPS

GROUPING No Grouping ⌄   TARGETS ▢ Primary ▢ Secondary ▢ Not Met   REPORT FORMAT

MEASURE	RESULT	CHANGE	TARGET	NUMERATOR	DENOMINATOR
ⓘ Childhood Immunization Status (CMS 117v12)	31.3%	+ 5.9% ▲	38.1%	40	128
ⓘ Child Weight Assessment / Counseling for Nutrition / Physical Activity (CMS 155v12)	57.4%	+ 8.0% ▲	68.7%	1,005	1,750
ⓘ BMI Screening and Follow-Up 18+ Years (CMS 69v12)	40.9%	- 1.0% ▼	64.3%	5,095	12,463
ⓘ Depression Remission at Twelve Months (CMS 159v12)	2.4%	- 0.4% ▼	4.3%	21	869
ⓘ Screening for Depression and Follow-Up Plan (CMS 2v13)	83.1%	- 1.0% ▼	89.9%	9,982	12,016
ⓘ Tobacco Use: Screening and Cessation (CMS 138v12)	84.9%	- 0.1% ▼	93.0%	7,847	9,248
ⓘ Colorectal Cancer Screening (CMS 130v12)	38.5%	- 3.5% ▼	55.4%	1,989	5,172
ⓘ Cervical Cancer Screening (CMS 124v12)	44.3%	- 4.6% ▼	59.7%	1,769	3,997
ⓘ Breast Cancer Screening Ages 50-74 (CMS 125v12)	41.4%	- 2.4% ▼	44.4%	858	2,073
ⓘ Hypertension Controlling High Blood Pressure (CMS165v12)	61.6%	+ 0.7% ▲	70.3%	1,872	3,039
ⓘ Statin Therapy for the Prevention and Treatment of Cardiovascular Disease (CMS 347v7)	74.2%	- 0.1% ▼	81.6%	1,541	2,076
ⓘ Diabetes A1c > 9 or Untested (CMS 122v12)	28.7%	+ 1.9% ▲	23.9%	345	1,201
ⓘ IVD Aspirin Use (CMS 164v7)	81.9%	- 1.9% ▼	92.0%	349	426
ⓘ HIV Screening (CMS 349v6)	27.5%	+ 0.1% ▲	30.4%	2,733	9,936
ⓘ HIV and Pregnant	0.0%	0.0%	Not Set	0	153
ⓘ HIV Linkage to Care	75.0%	0.0%	100.0%	3	4

Lean Daily Management (LDM) Boards

Sample of Metrics being discussed daily by Medical Staff

- Chaos/Calm: On a scale of 1-5, how did yesterday feel?
- Provider Continuity: Patients are seen by their PCP/Anchor provider
- Appointment Time: Provider in room no more than 1/3 way into visit
- Pre-visit work completed: 100%
- Unused appts: No unfilled appts at end of day
- Accurate Medication Reconciliations
- Bean (asynchronous care communication) manageable
- Root cause of open referrals >30 days

Sample of Metrics being discussed by other PHC staff:

- # Eligibility information completed
- Credentialing of required staff completed w/in 90 days.
- Process all locked claims within 2 days
- Billing extension <5% dropped call rate
- All Job postings meet 1-10 milestones outlined by HR.
- # of emergent Help Desk requests without tickets <15 for team
- Staff not interrupted by Tech issues <5x/day
- All Refugee New Patient appointments completed within 30 days of arrival

Benefits seen at LDM Boards

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- Staff not interrupted by Tech issues <5x/day
- All Refugee New Patient appointments completed within 30 days of arrival
- 90% of Facility preventative maintenance is completed weekly

Lean Kaizen Project
Medical Care Team Design

– Right sizing our Medical Team Staff

– Re-design and implement prior to EHR Implementation

– Better communication; smaller Teams; improved follow up outside of visits; increased visibility of connection of patients to their Team; decrease patients being lost between leaving their appointments and scheduling at the front desk

Infrastructure CIO Report

Electronic Health Record

Wave 6 Kick Off Meeting Occurred on 8/28

Data Collection has completed awaiting review

Workgroup Meetings starting soon

Jaclyn Kincaid : Project Manager with multiple
EHR transition experience has started work

EpicMove
Reaching New Heights
ROADMAP

Epic STOPS

Project Initiation Phase
1. Epic Orientation
2. Data Collection
3. Project Kick-Off

Project Readiness Phase
4. Workgroup Committees
5. Data Conversion and Validation
6. Technical Dress Rehearsal (TDR)
7. Training and Application Readiness

Go-Live and Support Phase
8. Appointment Conversion
9. GO-LIVE!
10. Post Go-Live Support

Wave 6

Health Choice Network
A Family of Health Centers

Epic

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5 Data Conversion and Validation
Perform data validation to ensure the integrity of your data is ready for Go-Live
11/18/24 to 3/7/25

4/12/25 to 4/25/25
Post Go-Live Support
Continued support for a seamless and successful implementation

4 Workgroup Committees
Attend information-rich sessions to prepare you on Epic workflows and required components for Go-Live readiness
10/28/24 to 3/11/23

6 Technical Dress Rehearsal (TDR)
Perform extensive testing for all technical components and login access to ensure a smooth technical implementation
1/6/25 to 3/7/25

10

3 Project Kick-Off
Review project timelines, identify project leads, review implementation methodologies, and review critical project milestones
10/9/24

7 Training and Application Readiness
Conduct training for all Providers and Users, review workflows and data reconciliation
12/16/24 to 4/11/25

9 GO-LIVE!
You're LIVE! Celebrate the success!
4/12/25

2 Data Collection
Perform a data collection effort to identify your existing systems, interfaces and integrations, workflows, contracts, and required information to complete the project scope
8/28/24 to 10/8/24

8 Appointment Conversion
Pre-Go-Live event to prepare your scheduling to make appointments for the upcoming Go-Live
3/29/25 to 3/30/25

1 Epic Orientation
Meet your HCN Epic Teams and participate in a review of the overall project implementation methodology and next steps for Kick-Off
8/28/24

IT Services

- Prototype for cleaning-up and improving document management/storage has begun

- Sysaid Helpdesk software launched

- Prototype of data storage/visualization platforms tested

Facilities

- C8E grant project changes and budget have been approved by HRSA! New projects include:
    – Alder roof & RTU replaced.
    – Alder main floor remodel: adding break area, group room, observational therapy rooms, opening up front desk, new flooring throughout, and handicap buttons on doors exiting the clinic, Design completed by end of October
- Putting Lowell front desk remodel out for bid, looking for a contractor
- Closed off pass throughs next to horseshoe/front desk, still need finish work.
- Seeking Estimate for Creamery Sign
- Removing dead trees in front of Alder Building
- Creamery heating loop repairs and maintenance to improve temperature controls and improve lifespan of equipmnent
- Exam room painting updates will be ongoing through the Fall

Business Development

Business Cases

- Lab

- Radiology

- Pharmacy Expansion

- Hours of Operation

Innovations – FUSE and BHP

WHAT IS FUSE?

- FUSE is a proven model developed by the Corporation of Supportive Housing (CSH) that identifies individuals frequently accessing hospitals, jails, shelters and provides the intervention of permanent supportive housing.

- Supportive Housing significantly reduces utilization and leads to better health outcomes for the identified individuals.
  - Housing retention rates of more than 85%

- Housing First is an approach centered on the belief that stable housing is the cornerstone for pursing health and social service goals.

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WHY WE FOCUS ON FUSE

- Supportive housing reduces:
  - substance misuse by 72%
  - arrests by 50-90%
  - emergency department usage by 50-89%."
- DPHHS and CSH partnered to complete two reports that identified:
  - The state could save at least $445,788 annually after reimbursing supportive housing providers for their services.
  - This represents a 45% reduction in Medicaid costs for individuals who are chronically homeless and who have costs in the top 10% of Medicaid costs in Montana.

Montana Health Care Foundation

WHY WE FOCUS ON FUSE

- Permanent Supportive Housing coupled with a Housing First approach promotes health equity.
- The housing system typically rewards those that are savvy enough or have less barriers (i.e.: SDMI, chronic conditions, SUD, engaged in care).
  - By focusing on FUSE we can purposefully engage with those that continue to seek crisis services with limited ability to follow through on community/maintenance care.
- Reduces burnout for direct care staff.

CRITERIA FOR MISSOULA

Updated to be 15 emergency department visits OR 6 incarcerations in the past year.

~~10 Emergency Department visits in the past year~~

AND

Experiencing homelessness

AND INTERSECTS WITH 2 OF THE 6 SYSTEMS IN WHICH DATA IS COLLECTED:

Missoula County Detention Facility

Community Medical Center

St. Patrick's Hospital

Homelessness Management Information System

Missoula Police Department

Poverello Center's Homeless Outreach Team

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FUSE and BHP

9 months pre housing	# ED	# inpatient days	9 months post	# ED	# inpatient days
12/12/2022	17	0	6/12/2024	3	0
12/13/2022	20	41	6/13/2024	1	7
12/19/2022	9	8	6/19/2024	3	2
12/19/2022	7	6	6/19/2024	1	0

Diversity
Equity
Inclusion

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Human Resources

Attrition YTD

9.7%

31/319

Hiring YTD

14.7%

+47 staff

Recruitment

17 posted positions

November 2024 Awareness Topics

- American Indian/Alaska Native Heritage Month
- International Day of Radiology– November 8
- Veterans Day – November 11
- Transgender Day of Remembrance – November 20

Recent Fully Executed Contracts

Contractor	Contract Type	Purpose	Term	Date Approved
Ries Law Group	PSA	MLP coordination	8/1/24-7/31/25	9/2024
Missoula County	PSA	CAP Fund	7/1/24-6/30/25	9/2024
Paragon	MSA	Microsoft licensing	9/19/24-varies	9/2024
Missoula County	PSA	Mt Cancer Control Program	7/1/24-6/30/25	9/2024
Pureview	PSA	RW	5/1/24-4/30/25	9/2024
University of MT PA Program	AA	PA Program, PA students	10/1/24-10/1/25	10/2024
Richard Dealy, APRN	EA	1.0 FTE (40 hours/week)	7/1/24-6/30/25	10/2025
Jesse Charles, MD	EA	1.0 FTE (40 hours/week)	7/1/24-6/30/25	10/2025

ACRONYM	DEFINITION
AA	Affiliation Agreement
BAA	Business Associates Agreement
EA	Employment Agreement
EFT	Electronic Funds Transfer
FUA	Facility Use Agreement
ICA	Independent Contractor Agreement
MOU	Memorandum of Understanding
PSA	Professional Service Agreement
MSA	Master Services Agreement
SOW	Statement of Work

PARTNERSHIP HEALTH CENTER (PHC)
BOARD OF DIRECTORS MINUTES
September 27, 2024

P/M PRESENT:

Kathleen Walters (P/M) *Chair*
John Crawford (P/M) *Vice-Chair*
Annie Green (P/M)
Jay Raines (P/M)
Patty Kero (P/M)
Nathalie Wolfram (P/M)

ABSENT:

Mark Thane (NP/M) – **Excused**
Jilayne Dunn (NP/M) – **Excused**
Suzette Baker (P/M) – **Excused**
Joe Melvin (P/M) - **Excused**
Jeanna Miller (Ex-Officio)

OTHER:

Esther Tuttle – Potential Board Member
Krissy Petersen – Potential Board Member

RECORDING SECRETARY:

Brianne Walker, Executive Assistant Supervisor
Dorothy Moran, Executive Assistant

NP/M PRESENT:

Dave Strohmaier (NP/M)

STAFF:

Lara Salazar, Chief Executive Officer (CEO)
Bryan Chalmers, Chief Financial Officer (CFO)
Dr. James Quirk, Chief Medical Officer (CMO)
Jody Faircloth, Chief Infrastructure Officer (CIO)
Marge Baack, Chief Operations Officer (COO)
Skye McGinty, Chief Diversity and Equity Officer (CDEO)
Rebecca Goe, Chief of Innovations (CINNO)
Jen Gregory, Director of Employee Relations
Jaime Dixon, Assistant Chief Financial Officer
Eric Halverson, Communications Director
Mara Caball
Staci Finley
Cris Fleming
Sarah Potts, Behavioral Health Director
Jazmin Nelson, DDS

(Purple = virtual)

1

ISSUE	DISCUSSION	ACTION
EDUCATION SESSION	Cindy Stergar with MPCA presented on Board Member basics including oath of trust, duty of care, duty of loyalty, duty of obedience (committed to the mission and purpose) and fiscal oversight to annual budget, sliding fee and audit. Board governance – requirements laid out from the Bureau of Primary Health Care. PHC is one of the largest FQHC's in the state and one of the few that has a teaching component. Review of trends in Montana FQHC's in the last 10 years; challenges include financial, workforce and information systems/data. The workforce drives everything in healthcare. Financial and workforce challenges are requiring health centers to look at other options including acquisitions/mergers, reduced hours and partnerships with other centers and hospitals. History of co-applicant process reviewed. Health centers have lost 6-10% in Medicaid revenue. Everything in healthcare is going to depend on the data obtained from Electronic Health Records. Mergers and acquisitions are happening because the cost is so high for an EHR.	
CALL TO ORDER	The meeting was called to order by Kathleen Walters, Board Chair at 12:21 PM.	
LAND STEWARDS	**Acknowledgement:** *Partnership Health Center respectfully acknowledges that we occupy the traditional homelands of the Séliš, Qĺispé, and Ktunaxa-Ksanka nations. We also recognize that these lands are a site of trade, medicine gathering, healing, and travel for other Native tribes in the area and is still home for many Indigenous people. We honor these people – past, present, and future, along with the many other Indigenous peoples who inhabited, continue to inhabit, hold sacred, and steward these lands. We acknowledge that the health care system has played a role in the oppression of Indigenous peoples. We commit to ongoing learning about the impact of*	

PUBLIC COMMENTS	*colonization on the health and wellbeing of Indigenous peoples, and we commit to meaningful action that reverses health disparities.*	
REFERRALS/ COMMENTS FROM THE BOARD	No public comments were brought forth. • Jay Raines asked if there is a detoxification center or drug rehabilitation center in Montana, specifically in Missoula, and if not, should PHC be providing this. There are multiple facilities across the state including MCDC in Butte, St Patrick Hospital and Rimrock. It can be difficult to get in but it is available. Lara Salazar advised that PHC would look to partners who are better suited to provide that level of care. • Kathleen Walters introduced Esther Tuttle, a potential Board member. • Strategic plan review – Lara Salazar advised that strategic planning is typically in January with the group historically meeting for one full day to refine the current strategic plan. Looking for clarification on how the Board would like to schedule for this year. Dave Strohmaier reported more than half a day is a large commitment. Kathleen Walters asked if it could be done in three quarters of a day. Will plan for a four hour meeting and the Executive Team will meet to identify gaps with a report back to the Board if additional time is needed. • Board meetings scheduled for November 29, 2024 and December 27, 2024 moved to November 22, 2024 and December 20, 2024 respectively due to holidays.	
TOPICS REQUIRING MOTIONS / DISCUSSION *Board Member Election* *Policies*	Motion to elect Krissy Petersen to the PHC Board.	*It was moved, seconded (John Crawford, Jay Raines) to elect Krissy Petersen as a member of the PHC Board of Directors. The vote was unanimous.
	<u>Purchasing and Accounts Payable</u> – Changes reviewed including: PHC Controller's last day is September 30, 2024. Jaime Dixon added as signer where the Controller is	* It was moved, seconded (Annie Green, Patty Kero)

3

	referenced. When expected invoices and large pre-approved grant pass through dollars come in, CEO is allowed to sign. Unexpected invoices will still go before the Board. **Conducting Federal Audit** – Title change reviewed	to approve the financial policies with changes. The vote was unanimous.
NAP Grant Summary	**Subrecipient Monitoring** – no changes **Vasectomy Fee and Alternate Sliding Fee Schedule** – no changes New Access Point (NAP) Grant Summary. Rebecca Goe reported that the new site can be mobile or permanently fixed; however the plan is to use the grant opportunity to apply for a mobile clinic partnering with Skaggs College of Health. Nathalie Wolfram clarified if it's the Skaggs School of Pharmacy or the College of Health. Skaggs School of Pharmacy is correct. The School has pledged up to $200k to support the cost of the van which gives PHC flexibility with staffing. The plan is to utilize current staff with the possibility of an additional staff member who will drive and other duties and a satellite Medical Assistant. Currently, there is a mobile team using a PHC vehicle but this would allow for people to be seen inside a van with privacy; there is no privacy in the current set up. There is an opportunity to provide better mobile care and to connect patients back to PHC main services. Grant is due next week. • Kathleen Walters asked what the likelihood is that PHC would get the grant. Unclear, it is generally competitive and there are 70 other sites across the country applying that have a high needs score. Missoula is not necessarily categorized as high needs but PHC has unique contributions to the grant that can be offered. • Annie Green inquired if the mobile unit presents liability issues. Yes it can but researching insurance and other cost issues. • John Crawford asked if it was a billable service. Yes it is.	*It was moved, seconded (John Crawford, Annie Green) to submit an application for the NAP Grant. The vote was unanimous.
CONFLICT OF INTEREST COMMITTEE UPDATES *Executive/Finance*	Board Member Conflict of Interest Disclosures: listings included in packet and based upon annual submissions.	

CEO REPORT	**Executive/Finance Committee (EFC):** The group met for an in-depth review of the financial report. All Board members are invited to listen in each month. No additional updates- minutes of meetings included within this packet for review.	
COO Report	**CEO/Leadership Update:** All Board members received a copy of the CEO Report in the packet for review. • Strategic plan – displayed and reviewed • Strategic Objectives – reviewed • Budget process – Executive team is doing an intensive budget review of satellite sites and still working on recommendations to the Board if changes will be coming to satellites. Also addressing cost centers and programs later in October. This will also be presented to the Board. • Access – 17k unique patients and 71k visits. o Annie Green asked if those numbers implicate PHC doing well. Yes, these are reflective of the seasonal changes. As Watershed ramps up and School Based increased, these numbers should continue to expand. • Watershed is now open. A panel of speakers was invited to the grand opening. • Out of the Darkness Walk – suicide awareness event headed up by Skye McGinty and Jen Gregory. • Behavioral Health – awarded $600k for expansion. Marge Baack reported the following update for operations: • Unique patients reviewed – displayed as a trailing year so beginning August 2023 and ending August 30, 2024. • Medicare Wellness Visits being tracked daily; goal of 50%. • UDS (Uniform Data System) work – displayed as a trailing year. Continuing to monitor quality.	*It was moved, seconded (John Crawford, Joe Melvin) to approve FY2025 Revised Budget. The vote was unanimous.

CIO Report	o Nathalie Wolfram commented on a personal level, there has been an increase in more reminder calls to schedule well child checks and immunizations which has been helpful. • LDM (Lean Daily Management) Boards – Kaizen even led by Cassandra Griffith, Performance Excellence Facilitator. LDM is the daily, front line work with multiple teams meeting daily to discuss metrics and barriers or victories.	
CINNO Report	Joseph Faircloth reported the following update for infrastructure: • PHC had its first meetings with HCN (Health Choice Network) and data collection projects are being worked on. Currently in the third tier of data collection which is a heavier lift – having to coordinate with different departments to obtain information. Roadmap to Epic displayed and reviewed. • Document management being relocated; researching a signing platform that will integrate with SharePoint. • Antivirus program changed. • Facilities projects – reviewed. Lara Salazar commented that the remodel funding is being pulled over from unused Covid funds. • Business cases – working on collecting data and guiding that conversation. Potentially relocating pharmacy to offer better exposure.	
CDEO Report	Rebecca Goe reported the following update for innovations: • SOC (Systems of Care) Grant awarded and to be managed out of PHC for the first year. Can only be awarded to Counties or State Governments for approximately $1 million per year for four years to help improve systems of care for children and their families who have or at risk of social emotional disturbance. Skye McGinty reported the following update for diversity and equity unit: • Working with Communications department around Indigenous Peoples' Day and World Mental Health Day.	

CFO REPORT	• Watershed is now open. The Navigation Center itself is still closed until fully staffed. • Cultural Humility and Refugee Health Training was conducted with approximately 40 participants. Trainings will happen quarterly with Transvisible Montana scheduling in November or December. All Board members received the Chief Financial Officer's Report in the Board packet for review. Bryan Chalmers gave a summary of the report: • Year to date is fairly light with summertime business including the residency changeover in July and August and School Based staff being off for the summer months. • Cash report – displayed and reviewed. • Operating loss – budgeted at $2.3 million, actual $2.34 million. • Change in net position – budgeted at $486k, actual $769k. If residency and school based changes were not part of this, actual would be closer to budgeted. • Fiscal impact – displayed and reviewed. • Unique patients – decreased but still at 17,778. • Cost per encounter - $356 budgeted and actual is $432. • Operating margin – displayed and reviewed 　　○ Dave Strohmaier inquired about the actual loss of -15%. Brian Chalmers advised that is because of the change in net position being budgeted at $486k and actual $769k mostly due to seasonal changes with residency and school based. If those changes are factored back in, the actual is closer to the budgeted amount. Dave Strohmaier stated if it's seasonal, the difference between August 2024 and August 2025 shouldn't fluctuate too much. Bryan Chalmers advised finance will compare but sometimes due to different expenses and/or labor costs.	*It was moved, seconded (John Crawford, Jay Raines) and carried to accept the CEO and CFO updates as reported. The vote was unanimous.

CONSENT AGENDA **NEXT MEETING** **ADJOURNMENT** *Indicates motions made and accepted.	Annie Green stated that a new fiscal year started in July and inquired about financials for July. Bryan Chalmers advised July was reviewed in Executive Finance and is included in the packet but combined July and August to look at year to date. **Consent Agenda:** The Board members have agreed to use a consent agenda. Time is saved by voting on these items as a unit. Approval is requested for the following: 1. *Acknowledgement of Fully Executed Contracts as presented.* 2. *Approval of Board of Directors Meeting Minutes of 07/12/24 as presented.* 3. *Acknowledgement of Executive/Finance Committee Meeting Minutes of 07/03/24 as presented.* 4. *Acknowledgement of the Quality Improvement Committee (QIC) Meeting Minutes of 07/09/24 as presented.* The next monthly Board meeting will be held on Friday, September 27, 2024. The meeting adjourned at 1:36 PM. Respectfully submitted, _____ _____ Jilayne Dunn, PHC Board Secretary Brianne Walker, Recording Secretary	*It was moved, seconded (John Crawford, Dave Strohmaier) and carried to approve the Consent Agenda items as amended. The vote was unanimous. *It was moved, seconded (John Crawford, Annie Green) and carried to adjourn the meeting. The vote was unanimous.

[1] Family Medicine Residency of Western Montana

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PARTNERSHIP HEALTH CENTER (PHC)
EXECUTIVE/FINANCE COMMITTEE (EFC) MEETING MINUTES
September 18, 2024

</p>

PRESENT:
John Crawford, Vice Chair
Jil Dunn, Secretary
Joe Melvin, Treasurer

STAFF:
Bryan Chalmers, Chief Financial Officer (CFO)
Marge Baack, Chief Operations Officer (COO)
Jaime Dixon, Assistant Chief Financial Officer
Rebecca Goe, Chief Innovations Officer (CINNO)
Joseph Faircloth, Chief Infrastructure Officer (CIO)
Skye McGinty, Chief Diversity and Equity Officer

Brianne Walker, Recording Secretary
Dorothy Moran, Executive Assistant

*Virtual

ISSUE	DISCUSSION	ACTION
CALL TO ORDER PUBLIC COMMENTS MINUTES CFO REPORT	The meeting was called to order by John Crawford, Vice Chair, at 10:36 a.m. John Crawford called for public comments: None heard. All Committee members received a copy of the July 31, 2024 Executive/Finance Committee Meeting Minutes for review. Bryan Chalmers distributed the July and August financial statement to all committee members (see attached) and reported the following: • The audit should be completed by October, however, due to the relationship with Missoula County, it may be November or December before it is finalized. • Wendy Calvert, Controller has given notice, her last day will be September 30, 2024 which makes finance short by about 40 hours. The plan is to fill that role with current staff. Two accounting specialists have been promoted to accountants which will help with workload.	*It was moved, seconded (John Crawford/Joe Melvin) & carried to approve the EFC Meeting Minutes of July 31, 2024 as presented. The vote was unanimous.

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- Jaime Dixon has been the point person for multiple software installs including County ERP (Enterprise Resource Planning), HRIS (Human Resources Information System), Epic and Pioneer Rx.

August financials: total revenue loss is approximately $450k.

- Net loss: budgeted at $486k, actual $769k. Reviewed encounters with medical team and figured $150k was due to the residency transition in July and August. Anticipate that to be recovered by end of fiscal year. School based behavioral health was approximately $130 loss with summer months.
- Operating margin: -10.6% for August, fiscal year at -3% and prior year was a 4% loss.
- Cost per encounter: $342 from Medicaid
- Volume indicators: Capital Link market study received; not fully reviewed but will be a deciding force. Indicators are out there saying PHC can grow but that will come down to research and further studies. Residency down 25%, medical down 17% but within 1.3% from prior years. Behavioral health was off by 13.9% and school based increased significantly from prior year. Dental increased from prior year but decreased per budget. Clinical Pharmacy was light. Rebecca Goe reported that school based should be increasing in the next month or two with summer hours ending and bringing on additional schools.
- Average encounters per day: Reviewed
- Encounter mix: Reviewed.
  - Jilayne Dunn asked what the budget was for productive hours and what was actual. July and August includes a lot of vacations and residency turnover; there was also a provider that was not replaced until fall. Some facilities absorb those visits, others lose the visits. PHC plan is to absorb the visits as our providers have the capacity.
- Operating margin with internal grants: Reviewed
  - Jilayne Dunn inquired if grants are paid when the project is completed or prior. Federal 330 is smooth in that the expenditure is made and the draw down comes days later. There are other grants that are still outstanding from May for example.
- Service line: Budgeted positive for medical, behavioral health and pharmacy. Budgeted a loss for dental and school based. Will be keeping a close eye on this as pharmacy is approximately 37% of PHC business.
- Balance sheet: Cash and cash equivalents reviewed keeping in mind that the County does not post in a timely fashion. Assets reviewed.

- Net pension: $18.4 million; will receive updated number as audit continues.
- Net position: reviewed; ideally would be increasing instead of decreasing.
  - Jilayne Dunn clarified if PHC is still on track for a three year net loss from personnel standpoint and implementation of LEAN Six Sigma. No, will review later in notes.

Year to date:
- Operating revenue: Pharmacy tracking with encounters but up 16% in revenue; most likely due to software install. Scripts are increasing and payor mix continues to change but is stabilizing. Pioneer has offered additional data that give a better understanding of financials. Marge Baack reported the staff are happy with the transition and patients are noticing better efficiencies as well.
  - Jilayne Dunn inquired if this will be monitored closely to ensure the increase will continue. Jaime Dixon advised that it could be due to changes in the payor mix and will continue to watch insurance receivables which takes approximately 14 days. Change of supplier scheduled for October 11th and expected to save $500k. Pharmacy will be switching to McKesson with a three year contract; also using McKesson on the clinical side.
- Total operating revenue: -6%
- Salaries: Reviewed and monitoring closely
- Supplies: Reviewed
- Purchased services: will likely decrease with termination of some contracted services
- Total operating expenses: -2.1%

Cash Report:
- Deficit spend: Reviewed – budgeted at $4.1 million, actual was $5.5 million and $3.4 million budgeted by end of fiscal year. The loss is likely due to EMR transition and loss of encounters planned for that. FY2024, FY2026 and FY2027 reviewed; all showing a loss.
  - John Crawford asked what the plan is after the three years. Jilayne Dunn asked when the Board needs to step in. Bryan Chalmers advised there are multiple variables in play – loss of $2 million in Covid relief dollars, loss of $1 million from Medicaid redetermination. The traditional response is to balance the budget. Year One was a planning year, with Medicaid an unexpected outcome. Year Two is an implementation year with changes in efficiencies. Marge Baack reported that operationally, PHC has made changes to evaluate open positions and if they are

	absolutely necessary. LEAN has helped clarify roles and how the current positions are being utilized.	
POLICIES	Purchasing and Accounts Payable: • Reviewed • Dollar amount for completing purchase request form increased to $50 from $25. • Where Controller is referenced, included Assistant Chief Financial Officer for signing • Chief Financial Offer to receive monthly invoice approval for annual contracts • Executive Director updated to Chief Executive Officer • CEO may sign for vaccine purchases that exceed $100k, as well as pass through grant invoices • Accounts Payable to maintain a list of assigned designees and update annually Conducting the Federal Audit: • Executive Director updated to Chief Executive Officer Subrecipient Monitoring & Vasectomy Fee and Alternate Sliding Fee Schedule: • No changes	
NEXT BOARD AGENDA	The draft agenda for the Friday, September 27, 2024, Board Meeting was reviewed. • Addition of NAP Grant approval added to Board agenda.	*It was moved, seconded (Jil Dunn/Joe Melvin) & carried to approve the September Board Meeting Agenda. The vote was unanimous.
NEXT MEETING	The next Executive/Finance Committee meeting will be October 16, 2024.	
ADJOURNMENT	The meeting was adjourned at 11:55 a.m. Respectfully submitted,	
* Indicates motions made and accepted.	_____ _____ Jilayne Dunn, Board Secretary Brianne Walker, Recording Secretary	

PARTNERSHIP HEALTH CENTER (PHC)
AD HOC MEETING MINUTES
September 12, 2024

PRESENT: Kathleen Walters, John Crawford, Annie Green, Nathalie Wolfram   **STAFF:**   Lara Salazar, Jamie Dixon, Bryan Chalmers, Jody Faircloth, Dorothy Moran

Other: Justin Cole

Dorothy Moran, Recording Secretary

ISSUE	DISCUSSION	ACTION
CALLED TO ORDER	The meeting was called to order at 2:00 PM.	
PUBLIC COMMENTS	No Public comments were heard	
DISCUSSION	Discussion commenced at 2:05 PM via closed session regarding the following: • Legal document review pertaining to Health Center operations	
NEXT MEETING	Next meeting date: None scheduled at this time.	
ADJOURNMENT	The meeting was adjourned at 3:20PM	

Quality & Corporate Compliance Committee Meeting

10/17/24, 10:00 – 11:00am, Virtually via Teams

Facilitator: Jil Dunn   **Note-taker: Ben Laber**   **Timekeeper: Ben Laber**

Participant list: Jil Dunn, Staci Finley, Holly Blaylock, Ben Laber, James Quirk, John Crawford, Marge Baack, Lara Salazar, Jaclyn Kinkaid, Cassandra Griffith

Purpose

- To keep board members informed of current and upcoming Quality and Compliance issues and projects.

Desired Outcomes

- By the end of this meeting we will have a better understanding of
- how recent pharmacy and financial audit are going
- what quality projects are currently under way

Content (What)	Process (How)	Who (Roles)	Time (When)
CHECK IN	The meeting began at 10:00	Jil	10:00

07/18/24 MEETING MINUTES	• No changes to last quarter's minutes. • Bryan motioned to approve, Holly seconded, motion passed.	Jil	10:01
NO CURRENT FTCA CLAIMS	• No current FTCA claims		10:02
PHARMACY AUDITS	• Raina not in attendance. Pharmacy audits from this quarter will be reviewed at the next meeting.		10:02
340B SELF-AUDITS RESULTS	• Brent not in attendance. 340B self-audits from this quarter will be reviewed at the next meeting.		10:02
FINANCE AUDITS	• So far in 2024 we have had only 449 errors on our Sliding Fee Scale adjustments, which is a rate of only 5.3%. These error are mostly created automatically by our system and we have workflows that catch and correct them that are working well. • We are all caught up on setting slides. We were 1600 behind last year. We are now setting them as they come in. • The Sliding Fee Scales we have pulled for the upcoming audit have all been accurate so far. • Medicaid wants us to pay back telehealth visits claims, even though they are the ones that pushed us to do them. They are allowing us to rebill those visits as regular BH visits so we should get a lot of that money back. Holly will keep us updated.	Holly	10:02
QUALITY ASSURANCE	• We have been trying to get staff immunization records up to date. In spring they got locked somehow and we have not been able to access them. • Marge, HR, the credentialing team, and Danielle Trenk have met and have be working to get everyone's records. We have a deadline of December and a goal of November 5th to get all the records we need. • House Bill 702 bars us from requiring immunizations and makes it so if an employee refuses to get immunized or share immunization records we cannot force them. This can make it	Staci	10:10

	difficult or even impossible to be in compliance with federal requirements. • Staci Finley is leaving PHC. This will be her last QCCC meeting. • Cass will give us and update on Lean project in January.		
ADJOURNMENT	The meeting adjourned at 10:25	Jil	10:25

Next Meeting 1/16/25

PARTNERSHIP HEALTH CENTER BOARD OF DIRECTORS
As of 08/02/2024

Name/Title	Email	Phone	Joined	Officer
Baker, Suzette*	Suzettessmc@gmail.com	970-759-0388	April 2024	N/A
Crawford, John* **Vice-Chairman**	jcblackfeet@msn.com	406-552-8218	Feb. 2016	Vice-Chair as of 10/2023
Dunn, Jilayne **Secretary**	jdunn@ci.missoula.mt.us	406-552-6157	(Appointed) Dec. 2013	Secretary as of 10/2021
Green, Annie*	annie.green@gmail.com	406-240-0239	Mar. 2021	N/A
Kero, Patty*	pmcpherson20@gmail.com	406-529-5335	Nov. 2021	N/A
Melvin, Joe* **Treasurer**	jmelvinmt@gmail.com	406-207-8107	Jan. 2019	Treasurer as of 10/2021
Petersen, Krissy	Kristin.petersen@providence.org		Sept. 2024	N/A
Raines, Jay*	mrjayraines@gmail.co,	406-274-1493	Jan. 2024	N/A
Strohmaier, David	dstrohmaier@missoulacounty.us	406-258-4877 C= 529-5580	(Appointed) Jul. 2019	N/A
Thane, Mark	mt59801@gmail.com	406-552-3957	Oct. 2019	N/A
Walters, Kathleen* **Chairwoman**	kathleen@montanarealtynetwork.com	406-880-8818	Jul. 2013	Chair as of 10/2023
Wolfram, Nathalie*	nathalie.wolfram@gmail.com	406-370-7731	Oct. 2018	N/A

* = Patient Member (P/M)

GUESTS/ EX-OFFICIO REPRESENTATIVES

Miller, Jeanna Missoula County Health Department	301 W. Alder Missoula, MT 59802 Ph: 258-4996 Fax: 523-4781	jmiller@missoulacounty.us

Address: 401 Railroad Street W., Missoula, MT 59802 | partnershiphealthcenter.org
Phone: (406) 258-4789 | Fax: (406) 258-4732 | Email: partnership@phc.missoula.mt.us
Healthy People, Strong Communities

Board Education Topics

Date Presented	Topic
01/12/24	Strategic Planning
02/09/24	Uniform Data Systems (UDS) Results
03/08/24	Board Involvement with Strategic Planning
04/12/24	Risk and Safety Report Review
5/10/24	DEI overview with Skye
6/14/24	Budget Discussion/Phases – Finance Dept and Pharmacy - 2 SLT members who have goals formulated for their department to discuss
7/12/24	HCN with Farren Hurwitz and Tim Weldon
8/9/24	Budget Discussion/Phases – Communications Dept with Eric Halverson
9/27/24	Cindy Stergar with MPCA – 330 requirements and Board Governance
10/25/24	
	Open – Board of Directors Discussion
	Key Performance Indicators (KPIs)
	PHC Values Work – Communications Dept
	330e HRSA Grant Refresher
	340B Prescriptions – Pharmacy Dept
	Co-Applicant Agreement Review
	Med Trainer
	PERS education
	HCN overview

PARTNERSHIP HEALTH CENTER, INC.
BOARD OF DIRECTORS' COMMITTEE MEMBERSHIP LIST

-2024-

EXECUTIVE/FINANCE COMMITTEE (EFC)

Kathleen Walters, Chair
John Crawford
Jilayne Dunn
Joe Melvin
Staff: Lara Salazar, CEO
Bryan Chalmers, CFO
Meets monthly

QUALITY AND CORPORATE COMPLIANCE COMMITTEE (QCCC)

Jilayne Dunn, Chair
John Crawford
Staff: Marge Baack, COO
Staci Finley, Quality Assurance Mgr
Bryan Chalmers, CFO
Meets quarterly

BYLAWS COMMITTEE

Joe Melvin, Chair
Patty Kero
Kathleen Walters
Staff: Lara Salazar, CEO
Meets as needed

PERSONNEL COMMITTEE

Nathalie Wolfram, Chair
John Crawford
Kathleen Walters
Meets as needed

AD HOC COMMITTEE

Annie Green, Chair
Kathleen Walters
Nathalie Wolfram
Staff: Lara Salazar, CEO
Bryan Chalmers, CFO
Jody Faircloth, Director of Infrastructure
Meets as needed

Partnership Health Center Board of Directors Annual Work Plan

	2024											
	Q1			Q2			Q3			Q4		
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Chapter 2: Health Center Program Oversight												
Review adherence to HRSA requirements							■					
Chapter 3: Needs Assessment												
Review and approve the Service Area based on UDS data				■								
Review and approve applicable needs assessments every three years					As needed							
Chapter 4: Required and Additional Services												
Review and approve Scope of Services - 5A review											■	
Review and approve any new or additional services					As needed							
Chapter 5: Clinical Staffing												
Board is notified of credentialling and privileging decisions					As needed							
Board considers accessibility, availability, continuity, and demographics					As needed							
Chapter 6: Accessible Locations and Hours of Operation												
Review and approve hours and locations											■	
Chapter 9: Sliding Fee Discount Program												
Finance committee reviews updated SFDS, presents to full board for approval			■									
Patient survey data on SFDP is shared with Board					■							
Chapter 10: Quality Improvement/Assurance & Chapter 18: Program Monitoring and Reporting Systems												
Review and approve QI Plan every three years				As needed (last done April 2022)								
Review and approve clinical policies annually								■				
CMO presents clinical performance data		■			■			■		■		■
CFO presents bimonthly financial performance data	■		■		■		■		■		■	■
Division Director strategic reports	■	■	■	■	■	■	■	■	■	■	■	■
Chapter 11: Key Management Staff												
CEO performance evaluation		6 month check in			process check				start	complete		
Chapter 12: Contracts and Subawards												
Board approves contracts and agreements that relate to scope of services											■	
Coordinating committee meets 2x/year - Co-applicant agreement	Includes MCCHD director, PHC ED, board member - from PHC and MCCHD, CAO, and a county commissioner											
Chapter 13: Conflict of Interest												
Board members and key exec staff sign annual conflict of interest form	■											
Board conflicts are disclosed to the board	■	■	■	■	■	■	■	■	■	■	■	■
Chapter 15: Financial Management and Accounting Systems												
Board approves financial policies annually					■							
Finance committee reviews annual audit, presents to full board for approval					■							
Finance committee reviews annual IRS 990 submission, presents for approval					■							
Chapter 16: Billing and Collections												
Reviews updated sliding fee schedule & policy, presented for approval as needed											■	
Chapter 17: Budget												
Finance committee reviews annual budget submission to HRSA, presents for approval												■
Finance committee reviews annual operating budget, presents for approval						■						
Chapter 19: Board Authority												
Board meets monthly	■	■	■	■	■	■	■	■	■	■	■	■
Board approves grant applications					As needed							
Recurrent grant applications												
Governance committee reviews and updates By-laws, presenting for approval					As needed							
Board participates in annual strategic thinking process										■		
Board monitors progress on strategic objectives	■	■	■	■	■	■	■	■	■	■	■	■
Board completes self-evaluation annually						■						

Task													
Board engages in education													
Governance committee develops board leadership, presents officer slate for vote										Nominate	Vote		
Board adopts a three-year plan for financial management and capital expenditures	As needed												
Chapter 20: Board Composition													
Governance committee assesses board composition, recruits to fill needs	As needed												
Poll Board Members for Officer nominations during Sept. meeting													
Confirms no current staff or immediate clinic family members	Ongoing and annually												
Chapter 21: Federal Tort Claims Act (FTCA) Deeming Requirements													
Board approves Credentialing & Privileging Policy at least every three years	As needed												
Reviews and approves annual risk management plan													
FTCA Inservice													

Partnership Health Center Board of Directors Annual Work Plan

Partnership Health Center Board of Directors Annual Work Plan	2024											
	Q1			Q2			Q3			Q4		
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