Parkland

HOMES
Agenda

Agenda for the ***Board of Managers HOMES*** meeting of the Dallas County Hospital District is scheduled for ***Wednesday, February 22, 2023, at 12:30 PM*** at 5200 Harry Hines Blvd (WISH Building) Dallas, TX 75235, Conference Room 02-175. (If assistance is needed in locating the room, please see the Administration receptionist on the 4th floor, 04-131.) A quorum will be physically present at the location of the meeting. Videoconferencing access is also possible via Webex. That application is available at https://www.webex.com/downloads.html. Teleconferencing access is possible by calling +1-415-655-0001. Both virtual access forms require inputting (meeting number: 2620 974 8244; meeting password: 1234) to join the meeting. The ***Board of Managers HOMES*** reserves the right to exercise discretion and may convene in Executive Session as permitted by Texas Government Code §§551.071 (consultation with attorney), 551.072 (deliberations regarding real estate), 551.074 (personnel matters), 551.076 (deliberations regarding security devices or security audits), 551.078 and/or 551.0785 (deliberations by medical committee or by governmental body that administers a public insurance, health or retirement plan regarding individuals' medical or psychiatric records), 551.085 (deliberation by governing board of certain providers of health care services), 551.087 (deliberation regarding economic development negotiations), 551.088 (deliberation regarding test item); Texas Government Code §418.183 (deliberation of information under §§418.175 – 418.182 for purposes of disaster management or disaster planning); Texas Health & Safety Code §161.032 (medical committee or medical peer review committee records, information or reports; and/or medical committee or medical peer review committee proceedings under Tex. Health & Safety Code Chapter 161 and/or Tex. Occ. Code Chapters 151 and 160); and/or as otherwise authorized by law on any item listed below. The ***Board of Managers HOMES*** may consider any of the agenda items in open or executive session and may continue the meeting as necessary to accomplish the business at the time and place designated by the Chair to reconvene.

		PAGE	TIME (MIN)	PRESENTER(S)
I.	**Declare a Quorum Present/Call to Order/Mission Statement** ***Advance Wellness | Relieve Suffering | Develop and Educate***			Chair
	I CARE **I**ntegrity **C**ompassion and Collaboration **A**ccountability **R**espect **E**quity			
	Public Comments Regarding Agenda Items *See public comment registration information and rules at* *https://www.parklandhospital.com/board-of-managers*			
II.	**Consent Agenda**		1	
A.	Approve Minutes 2023-01-25 HOMES	2		Chair
B.	Approve Minutes 2023-02-13 HOMES Advisory Board	6		
III.	**Reports Requiring Deliberation(s) or Approval(s)**			
A.	Operations Update	13	3	Kyla Rankin
B.	Management and Finance Update	14	3	
C.	Governance Update	15	3	
D.	Quality Improvement and Assurance Report	16		
E.	HRSA Compliance Manual Requirements: The Big 20	24	3	
F.	HRSA Compliance Manual Requirements: Chapter 9: Sliding Fee Discount Program	28	3	
G.	Approve Federally Qualified Health Center (FQHC) Sliding Fee Discount Program	29	3	
H.	Community Collaborations-Housing Forward	45	3	
I.	State of Homeless Address	46	3	
IV.	**Action Items**			
A.	Board May Take Action on Any Agenda Item(s) Above			Chair
V.	**Adjourn**			
A.	Closing Remarks			
B.	Call to Adjourn			

Parkland

Approve Minutes 2023-01-25 HOMES

Parkland

MINUTES

Dallas County Hospital District Board of Managers

HOMES
January 25, 2023

Minutes of the Board of Managers HOMES meeting of the Dallas County Hospital District, held Wednesday, January 25, 2023, scheduled for 12:30 p.m. in the WISH Building Conference Room (02-175) at Parkland Health and via WebEx. These minutes do not constitute a certified agenda from the meeting.

I. Attendance and Call to Order

Chair Marjorie Petty, JD, noted that a quorum was physically present and called the meeting to order at 12:30 p.m.

Board Member attendees included: Chair Marjorie Petty, JD; Eric G. Bing, MD, PhD; Todd Furniss, JD; Reina Gonzalez, JD; Ramon Miguez, PE; Elizabeth Palacios, MD; Lisa Sutter; and Jeff Tillotson, JD.

Board members Farida Minner, RN; Don O'Bannon, Esq; and John Proctor were not present.

Staff Present (via Webex and in-person) included:

Andrew Devine, Associate General Counsel
Donna Richardson, EVP & Chief Nursing Executive (in-person)
Edmundo Castañeda, EVP & Chief Operating Officer (in-person)
Felicia Miller, EVP & Chief Talent Officer (in-person)
Fred Cerise, President & Chief Executive Officer (in-person)
Kellee Boardingham, Executive Assistant (in-person)
Kyla Rankin, HOMES Project Director (in-person)
Melanie Roberts, SVP Chief Compliance & Ethics Officer
Pam Bryant, SVP Chief Supply Chain Officer
Rick Humphrey, EVP & Chief Financial Officer (in-person)
Roberto de la Cruz, EVP & Chief Clinical Officer (in-person)
Saul Cordero, VP & Chief Governance Officer (in-person)
Steven Roth, EVP & Chief Legal Officer (in-person)
Vic Summers, SVP & Chief Audit Officer

II. Mission Statement

Chair began the meeting by stating the mission statement:
Advance Wellness | Relieve Suffering | Develop and Educate

III. Public Comments Regarding Agenda Items

No members of the public registered for comments regarding the agenda items.

IV. Conflicts of Interest

After review of the agenda, the Chair noted zero conflicts of interest for Board Members present.

V. Consent Agenda

A. Approve Minutes 2022-12-14 HOMES

Ramon Miguez, PE, motioned for the approval of the Consent Agenda. Todd Furniss, JD, seconded the motion. The motion passed unanimously.

VI. Reports Requiring Deliberation(s) or Approval(s)

The Board received information for the following updates presented by Kyla Rankin, HOMES Project Director.

A. Operations Update

Kyla Rankin reported on HOMES' open positions. There is currently one open position, a Peer Navigator. A nurse recently accepted an open position as well. Next, Kyla reported that HOMES has decided to make some operational changes to the Deflection Center. The Deflection Center will not be staffed on Parkland holidays and daily hours will decrease from 12 hour shifts to 10 hour shifts due to patient volumes. Kyla stated that she will continue to work with the Deflection Center leadership at Homeward Bound and if staffing needs change, HOMES remains open to adjusting accordingly.

The Board asked questions and received further information related to the change in Deflection Center hours.

B. Management and Finance Update

HOMES ended 2022 at 8,177 unduplicated patients, approximately 84% of its goal of 9,665. HOMES saw 7,219 patients in 2021. This is an approximate 13% increase from 2021.

C. Governance Update

The next HOMES Advisory Board meeting is February 13th, 2023, at Noon. A hybrid attendance option (in-person and remote) will remain in place.

D. HRSA Compliance Manual Requirements: The Big 20

Kyla Rankin reviewed The Big 20 manual.

E. HRSA Compliance Manual Requirements - Chapter 15: Financial Management and Control Policies

Kyla Rankin reviewed Chapter 15: Financial Management and Control Policies. She reported on the HRSA requirements and how HOMES demonstrates compliance with the HRSA requirements. She referenced the policy that was approved in 2022 and will again be approved in February 2025, following the three-year approval cycle.

F. Approve HOMES Deflection Center Policy & Procedure Update

Kyla Rankin presented an update to the Deflection Center Policy for approval. Guidelines were added for abnormal vitals, when to contact the provider, and required action by the nurse.

Jeff Tillotson, JD, motioned for the approval of the Deflection Center Policy. Todd Furniss, JD, seconded the motion. The motion passed unanimously.

G. HRSA Update: UDS Reporting
Kyla Rankin reported the deadline for reporting data to HRSA is February 15th. HOMES is currently collecting the data for submission. HRSA will review the HOMES submission in February and March, the final approval is typically in April 2023.

H. HRSA Update: Expanding COVID19 Funding
HRSA awarded HOMES $112,000, this is a one-time funding award to increase outreach and education, community engagement, and coordinated partner events for COVID-19 vaccines. The funds will be used for personnel, supplies, fuel for the sprinter van, and bus passes for fixed-site outreach events. Kyla also informed the Board that the required updates to Form 5B and Form 5C, that correlate with this expansion, also need to be completed.

Ramon Miguez, PE, motioned for the approval of the Expanding COVID-19 Vaccination Funding. Todd Furniss, JD, seconded the motion. The motion passed unanimously.

I. Housing Forward Point in Time Count
The Point in Time Count is January 26th and multiple Parkland team members are signed up to participate in the count.

The Board asked questions and received further information related to the Point in Time Count.

J. Holiday Sock Drive: Sock it to 2022
Kyla Rankin reported on the Sock it to 2022 sock drive. The deadline to donate is January 31st and socks will be taken for distribution at the Point in Time Count.

VII. Adjourn

With no further business to discuss, Chair Marjorie Petty, JD, adjourned the meeting at 12:45 p.m.

SO RECORDED:

Marjorie D. Petty, JD Chair	Steve Roth, JD, MPH Assistant Secretary

Parkland

Approve Minutes 2023-02-13 HOMES Advisory Board

HOMES ADVISORY BOARD
MEETING MINUTES

Date: 2/13/2023 **Time:** 1200 **Location:** Moody Outpatient Center

Facilitator: Sara Galvez

Attendees							
x	Kyla Rankin	x	Benita Grant	x	Farida Minner	x	Wanda Wonzer
x	Sara Galvez		Margie Roberts	x	Michael Gilot		Dennis Thomas
x	Dolores Diaz	x	W.R. Cunningham		Pink Elke		Queen Jeffery
x	Donna Persaud		Marjorie Petty		Trudy Hernandez	x	Forrest Stovall
Guests							

	Agenda Item/ Presenter	Discussion	Action items
	Approval of October Minutes	-Motion to approve minutes. Approved by Wanda, seconded by Dolores.	
	Staffing	- 1 open position. 1 FTE peer navigator. The preference is to hire someone with lived experience in mental health and or substance abuse.	
	Operations	- Inclement Weather impacted operations. Jan 31-Feb 2. All of Population Health was closed. - Virtual visits were offered for MAT patients. - Estimated about 300 medical and 80 dental visits were unable to be completed due to weather - Mobile Dental Unit is currently operating 1 day a week. HOMES plan is to expand services to 3 days a week; possible barriers to expansion are staffing retention - Jubilee Dental Clinic opened January 2023. HOMES lead dentist help set up location and dental staff is supporting until the Jubilee team is fully acclimated. - Epic WISDOM Launched December 2023. This platform allows for easier documentation. All feedback has been positive since go live. - Outreach updates o HOMES participated in Feast of Sharing and Operation Care. o 18 flu outreaches from October to December; over 500 flu vaccines administered. o HOMES Dental team participated in the 22nd Binational at Mountain View College. 44 pediatric dental screenings completed. o HIV outreach team participated in World Aids Day, where HIV POC screening and Flu shots were administered. This was done in collaboration with Prism and Oak Lawn Library. - Homeward Bound-Dallas Deflection volume remains lower than expected. Dallas Deflection will be closed on Parkland Holidays. Homeward Bound-Primary Care-HOMES has reduced the primary care hours from two full days to two half days. HOMES Leadership will continue to work with Homeward Bound leadership and if volume increases reassess the staffing needs.	

Parkland

HOMES ADVISORY BOARD MEETING MINUTES

Date: 2/13/2023 **Time:** 1200 **Location:** Moody Outpatient Center

Facilitator: Sara Galvez

		- HOMES moved to a temporary shed space to house the MMUs at Butler Street and plan to move into our permanent space during 2023. - Vehicle updates: Currently, we have five mobile units in operation. One MMU has been in the shop since September 2022 after an accident. This delay in repairs is attributed to supply chain. - HOMES has received our sprinter unit. It has been used for an HIV and COVID outreach. All staff are eligible to drive this unit with a valid driver's license (CDL not required). A HOMES, MPA wrote a manual for the sprinter. All staff will have to be checked off by Frank Gonzales, HOMES Supervisor, to drive the sprinter. - Safety – HOMES had an officer come and assess our fixed site clinics and mobile medical units. HOMES leadership is aware of potential/unique safety concerns for staff. Example-Nexus, a car was pulled over by Dallas police and there was a person at gunpoint in parking lot. The HOMES team was not harmed but certainly they were startled by watching this event. Sara and Frank met with Nexus to see if there were optional parking arrangements for the MMU. HOMES leadership shared the alternative parking options, we shared this information with our frontline staff, and it was decided this event was rare and the frontline team wanted to stay in the current parking location.	
	Finance & Budget	- Our unduplicated number for 2022 was 8716. We were short on our goal of 9,675. We started the year strong, however we know with the clinic closures due to inclement weather will affect our productivity.	
	Quality	- COPC Metric Balance Score Cards: We did well. We had three safety posts (mislabeled documents, patient identification error and Nexus incident). We also had a couple of incidents where patients have tried to reach out to staff through social media. - We have been trying to give every patient a patient satisfaction survey but do not receive many in return. We are now going to do patient satisfaction surveys quarterly. We also shared some Kudos from our patient satisfaction surveys. Mr. Gilot shared that in the time he has been working at 24 Hour Club he has never heard a bad complaint about HOMES.	
	HRSA Update	- UDS annual report is due February 15th. Once everything has been submitted the reviewer will look at it and they have until April to ask questions. Mr. Cunningham asked if all the questions were about data to which Kyla answered yes. - HRSA gave HOMES Expanding COVID Vaccination funding (ECV). This is a one-time $112,000 award over a six-month period. This money will be spent by May 2023 on staff, supplies, fuel and bus passes for outreach events. The events will occur at fixed	

Parkland

HOMES ADVISORY BOARD MEETING MINUTES

Date: 2/13/2023 **Time:** 1200 **Location:** Moody Outpatient Center

Facilitator: Sara Galvez

		sites and on the sprinter. We can collaborate with existing and new partners. We will have to make updates to form 5B and 5C. Mr. Cunningham asked what is form 5B and 5C and Kyla shared this information. He suggested we do outreaches at our current sites and sites we don't normally visit. We informed Mr. Cunningham, this is the plan and if any of the Board members have suggested sites, please let us know. The primary goal for these outreaches is to give COVID vaccines. Currently, we have done 5 outreaches (44 COVID vaccine and 4 flu vaccines). We have nine additional events scheduled. Kyla explained that employees who work outreach events will be paid from the cost center associated with ECV. Kyla works with Grants management to ensure we remain within the approved HRSA budget. Mr. Cunningham states he just doesn't see a problem on spending this money. Kyla states it is not a problem, but it is the timing.	
	UBC and Employee Engagement	- HOMES Unit Based Council (UBC) has started a few initiatives in HOMES. UBC started Employee of the Quarter (EOQ) where employees are encouraged to nominate their peers. The first EOQ winner was Michelle Ukairo, LVN and second winner was Dr. Tenzin Tsewang. We have shared all nominations and comments with staff. UBC started sending out links to nominate employees for other hospital-based awards. - This year UBC will also recognize every discipline. For example, this month they will recognize our drivers with "Miles for Smiles". Mr. Gilot asked if Adam and Renee will also be recognized because they really do a good job. Dolores told Mr. Gilot that he can always email any of us with any type of feedback. Ms. Wonzer asked what staff will receive for Employee of the Quarter and we informed her that we give the winners a gift card and other miscellaneous treats. - UBC also lead our annual sock drive which this year turned into a larger event with nursing leadership. The goal was 10,000 socks and goal was met with 10,800 pairs of socks. Parkland leadership joined in to make this goal possible. We had Facebook live events where we could share with Parkland employees how we were doing with the goal. - HOMES leadership also engaged with staff in October by giving employees "Boo bags". We shared some pictures of our staff with their Boo bags. One of the employees was Logan and Mr. Gilot said, "Logan is awesome!". In December, we had our first holiday party since COVID which consisted of games, caroling and a bake-off. - In January, HOMES staff and other Population Health staff participated in the Dallas County, Point in Time (PIT) count. This is an annual event to help assess the state of homeless. The results are typically provided during the State of Homeless address in March 2023.	

Parkland

HOMES ADVISORY BOARD
MEETING MINUTES

Date: 2/13/2023 **Time:** 1200 **Location:** Moody Outpatient Center

Facilitator: Sara Galvez

	Miscellaneous	- Dallas and Collin counties received $22.8 million U.S. Department of Housing and Urban Development award to address unsheltered homelessness. Housing Forward will be partnering with Dallas County. Hopefully this will help us to know where we can identify and serve additional unduplicated patients.	
	Advisory Board Membership	- Kyla reminded the Board that she is attempting to increase participation of the advisory board. Kyla asked Mr. Gilot from 24 Hour Club to tell us about himself. Day to day he provides support to drug addicts and alcoholics. He also supports the 20 programs that teach life skills. Mr. Gilot has been present, as a guest in HOMES advisory board meetings most of 2022. Kyla told board members that she contacted members to see if they would like to continue serving on the board and we did identify one person who is no longer able to serve. Kyla asked the board members to consider Mr. Gilot as a new member. Mr. Cunningham motioned that we approve Mr. Gilot as a member and Ms. Wonzer second that.	
	Looking Ahead	- This year looking ahead ○ Implement the collection of Social Determinants of Health data ○ Compile and submit HOMES competitive grant year ○ Expecting a new mobile medical unit in May/June 2023.	
	Next Meeting	Next meeting will be on April 10, 2023.	

The minutes, records and improvement activities operate under HB 4495b and the Texas Health & Safety Code, Sec. 161.031 & 161.032 affording protection from disclosure or discovery. Records of these committees are not public and are not subject to court subpoena. Records may be made available to persons who have a right to review the records and who are required to keep the information confidential.

Parkland

Homeless Outreach Medical Services Program Monthly Update Report – February 2023

Kyla Rankin, Project Director

Agenda

- Operational Updates
  - Operations
  - Management and Finance
- Governance
- Quality Improvement/Assurance
- The Big 20
- Community Collaborations

Operational Updates

- Staffing
  - Accepted
  - 1.0 FTE RN
  - Posted:
  - 1.0 FTE Peer Navigator
- Inclement Weather
- ECV outreach events

Management & Finances – January

Unduplicated	GY to Date	Annual Goal	% to Goal	% Year Complete
Patients	1339	9675	13%	.08%

FY	Month				Year to Date			
Metrics	Actual	Budget	Variance	% Var	Actual	Budget	Variance	% Var
Visits	3294	2124	1170	55.1%	13,452	9503	3949	41.6%
Expenses	$666,265	$592,706	($73,559)	-12.4	$2,457,057	$2,419,983	($37,074)	-1.5%
Charges	$2,084,520	$1,826,267	$258,252	14.1%	$8,638,191	$8,171,403	$466,788	5.7%
Revenue	$44,914				$225,155			
Commercial	$189				$3411			
Medicaid	$33,965				$161,150			
Medicare	$10,760				$60,593			
FTE	59.85				58.70			
FTE - OT	.55	.63	.09	13.9%	.86	1.37	.51	37%

- HRSA recommendation is claims billed in less than 30 days.
- HRSA grant year: January 1, 2023 to December 31, 2023

Governance

- Approval of HOMES Advisory Board meeting minutes February 13, 2023
- Next Meeting: April 10, 2023

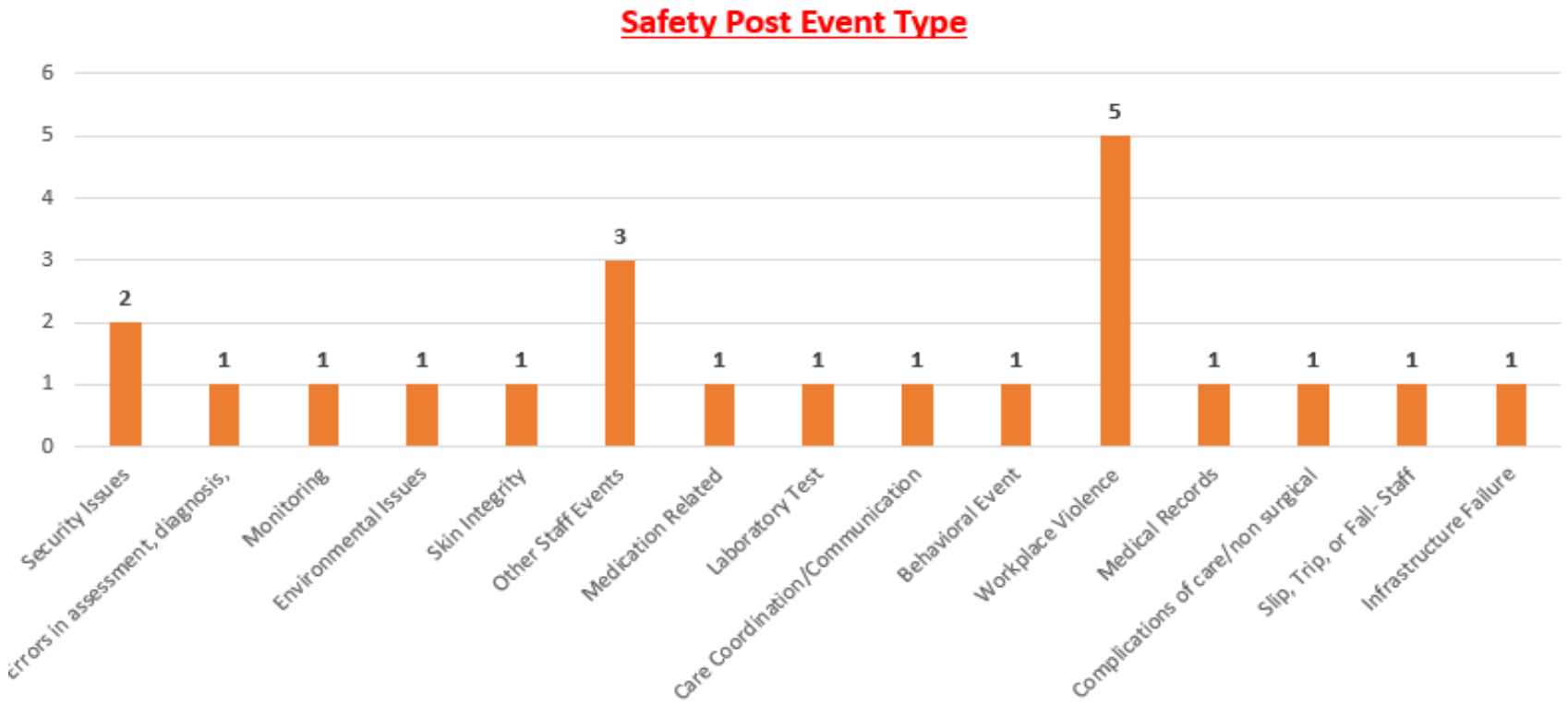
Quality Improvement / Assurance

2022 QA/QI: 4th Quarter YTD

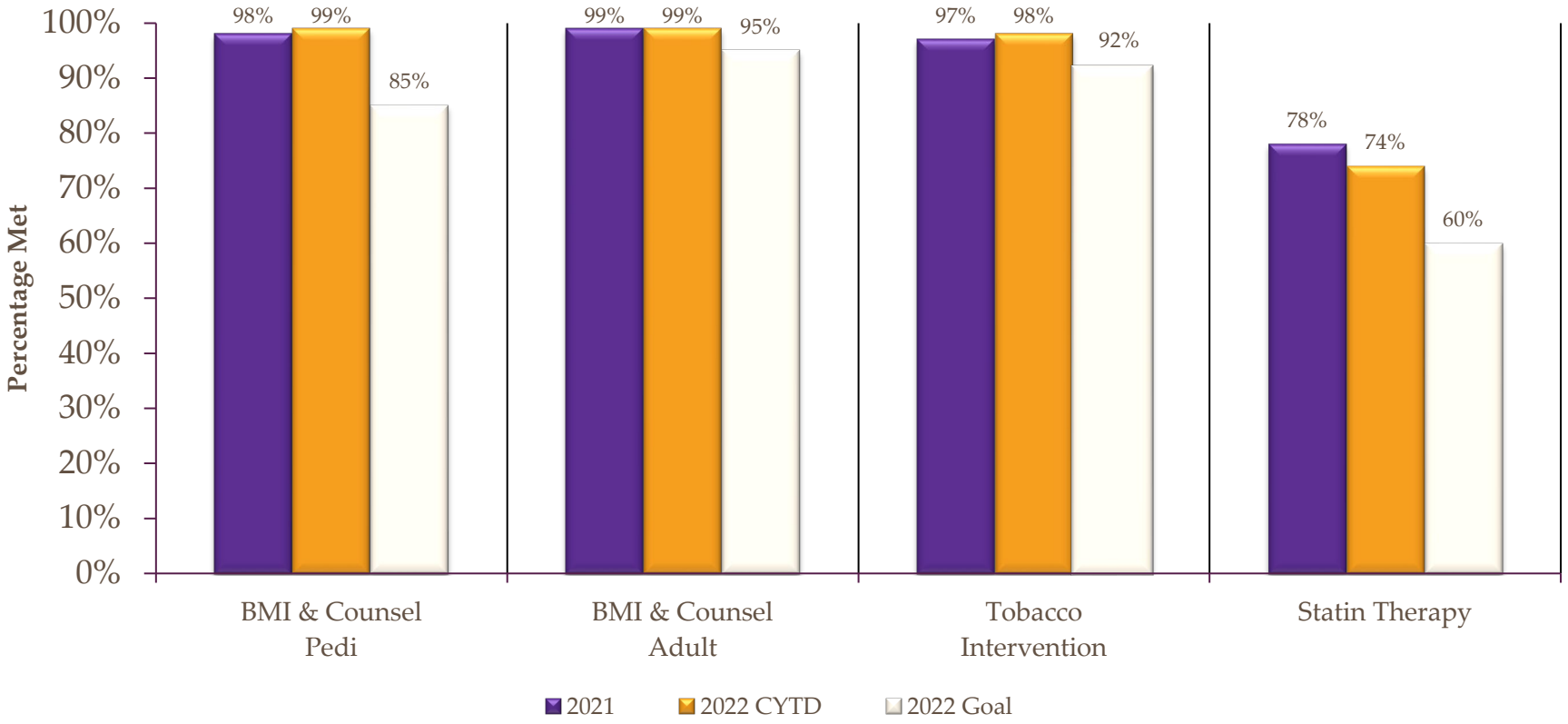
COPC Metric Balance Score Cards Patient Care & Safety Audits

Measures	October 2022	November 2022	December 2022	Goal
Staff Safety Post	4	11	6	Information Only
Complaints	0	0	0	Information Only
Grievances	0	0	0	Information Only
2 Pt ID Error	100%	100%	100%	100.0%
Specimen Labeling	100%	100%	100%	100.0%
Hand Hygiene	100%	100%	100%	100.0%
Medication Reconciliation	98%	95%	93%	90.0%
Environment of Care	94.1%	92%	98%	90%
Patient Messages (1-5-7)	**95.5%**	**96.4**	**96.2**	90.0%

Safety Post by Event type October- December 2022

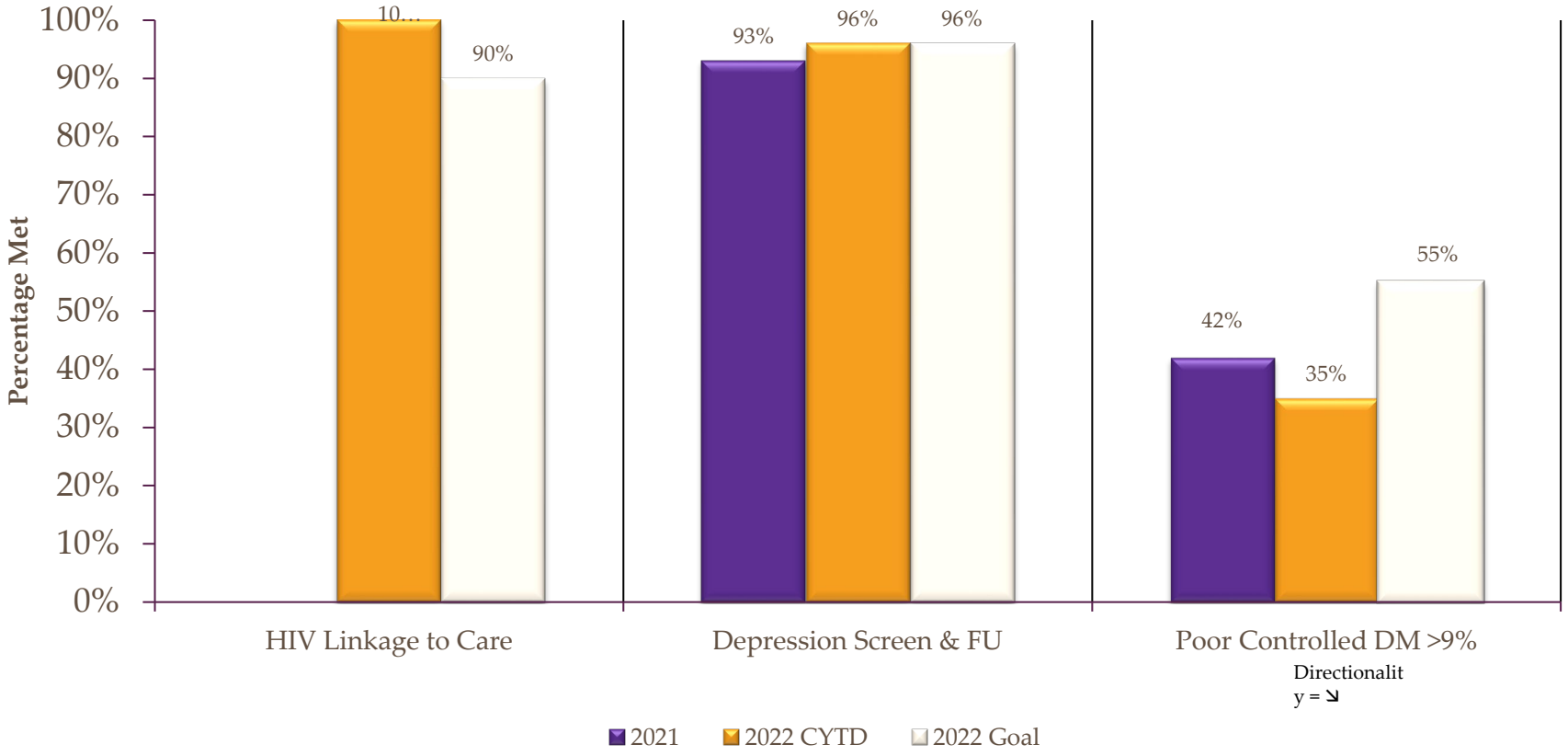


HRSA Quality Measures at or above Goal 1 of 2
YTD – December 31, 2022



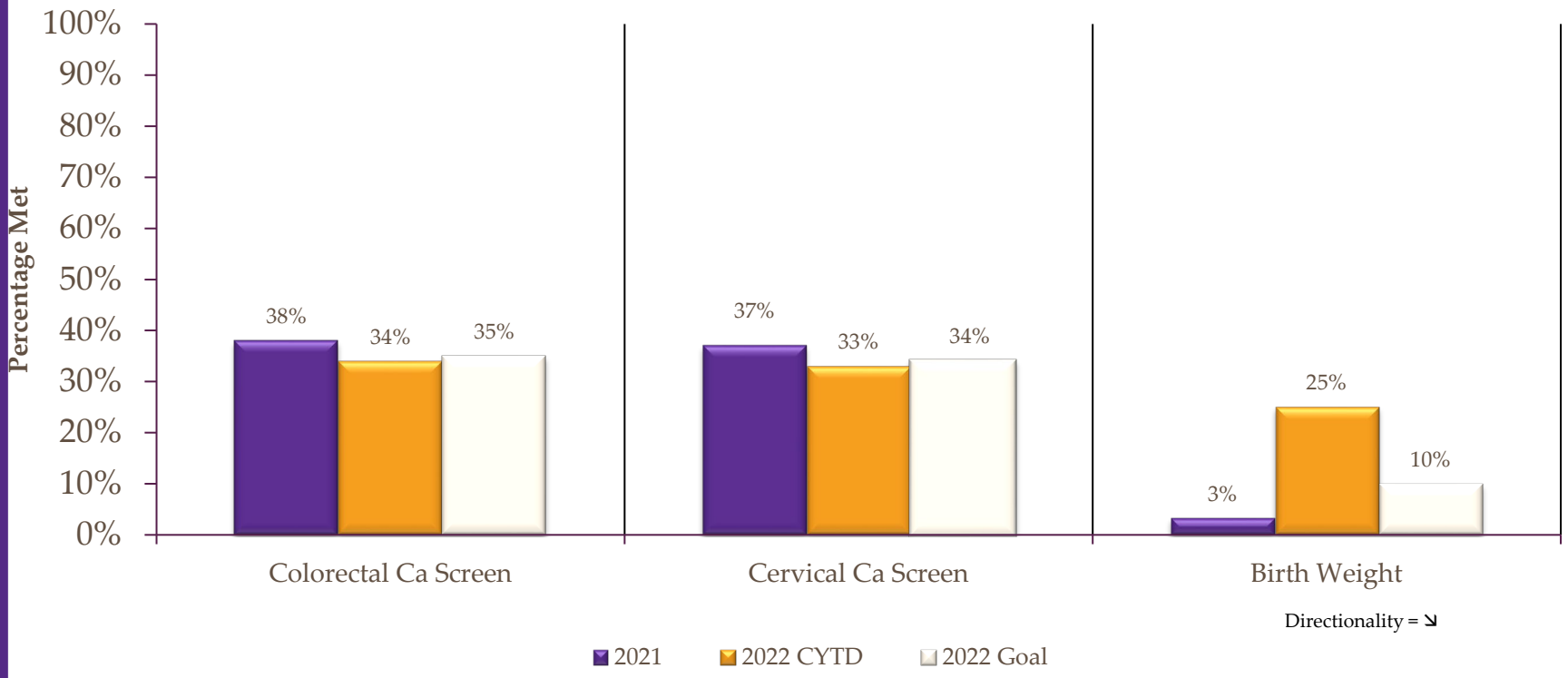
Parkland | *Care. Compassion. Community.*

HRSA Quality Measures at or above Goal 2 of 2
YTD – December 31, 2022



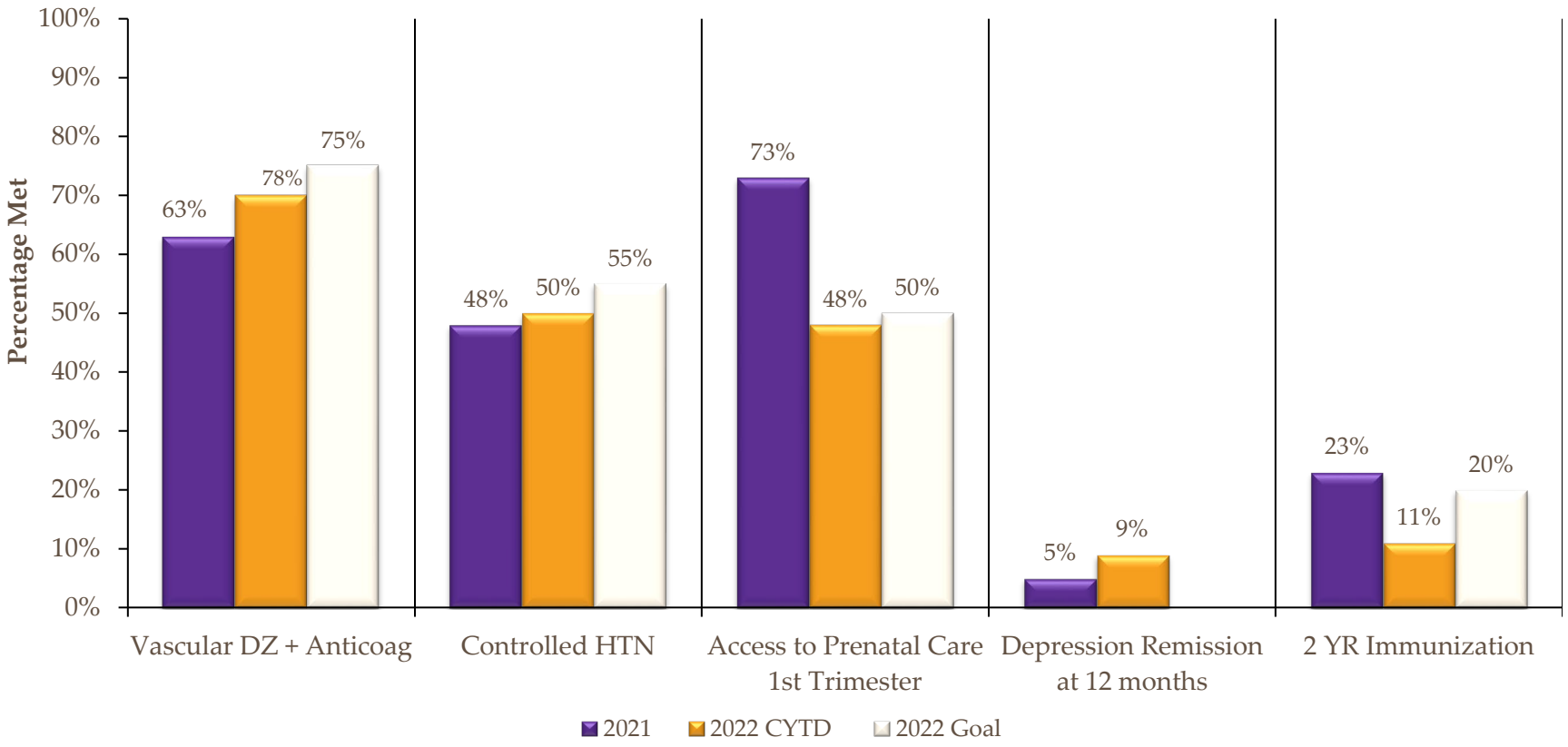
Parkland | *Care. Compassion. Community.*

HRSA Quality Measures Needing Improvement 1 of 2
YTD – December 31, 2022



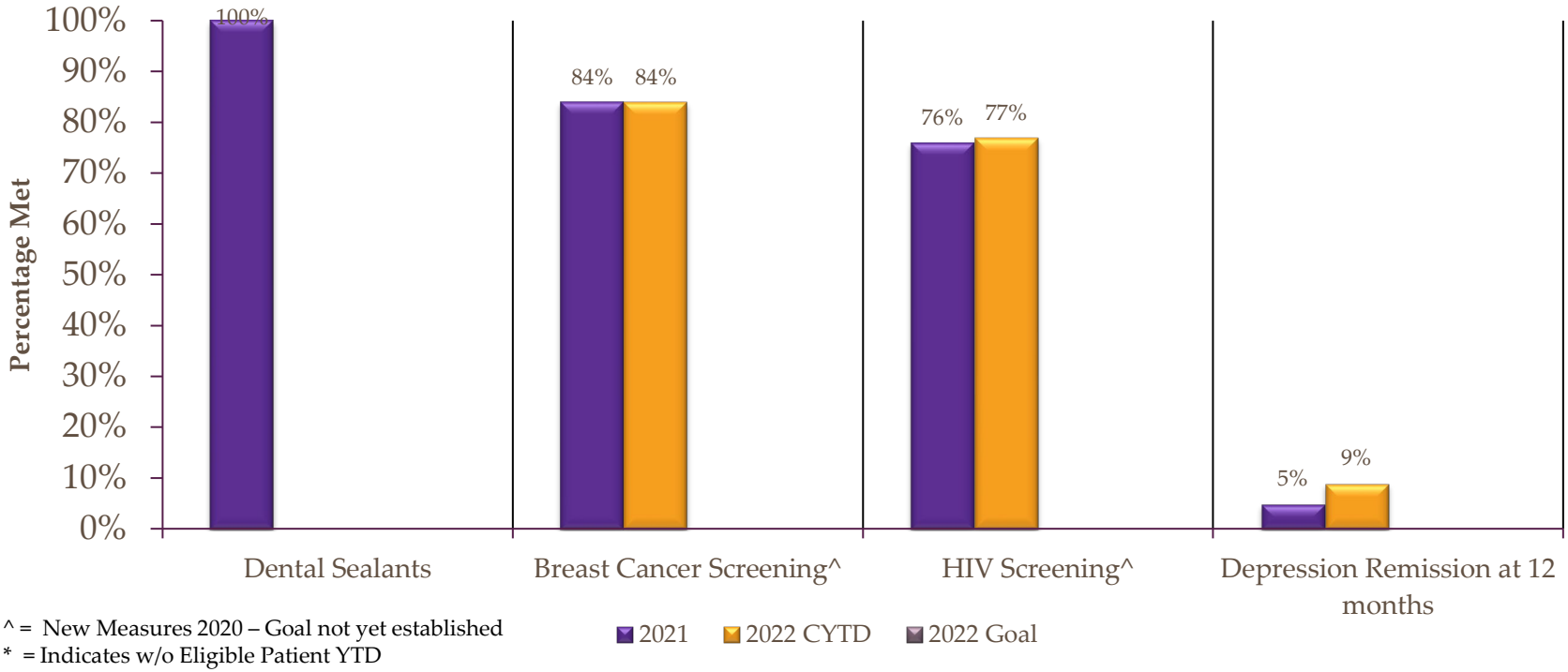
Parkland | *Care. Compassion. Community.*

HRSA Quality Measures Needing Improvement 2 of 2
YTD – December 31, 2022



Parkland | *Care. Compassion. Community.*

HRSA Quality Measures/ YOY Improvement
YTD – December 31, 2022



^ = New Measures 2020 – Goal not yet established
* = Indicates w/o Eligible Patient YTD

Dental Sealants: No Qualifying Patients YTD

HIV Screening: Percentage of patients aged 15-65 at the start of the measurement period who were between 15-65 years old when tested for HIV

The Big 20

The HRSA Compliance Manual has 21 chapters which cover 19 requirements in the four (4) areas:

1. Need
2. Services
3. Management & Finance
4. Governance
5. Annual training was added as a 20th requirement

HRSA Health Center Program Compliance Requirements Summary for Board of Managers

HRSA Requirement	Description	Board Month
1. Needs Assessment (Ch. 3)	Demonstrates and documents the needs of its target population, updating its service area, when appropriate. Community Needs Assessment	September Every 3 years (2019)
2. Required & Additional Services (Ch. 4)	Provides all required primary, preventive, enabling health services and additional health services as appropriate and necessary, either directly or through established written arrangements and referrals.	August
3. Staffing (Ch. 5)	Maintains a core staff as necessary to carry out all required health services either directly or through arrangements and referrals. Staff must be appropriately licensed, credentialed, and privileged.	August
4. Accessible Hours of Operation / Locations (Ch. 6)	Provides services at times and locations that assure accessibility and meet the needs of the population.	August
5. Coverage for Medical Emergencies During & After Hours (Ch. 7)	Provides professional coverage for medical emergencies during regularly scheduled hours and when the center is closed.	March
6. Hospital Admitting Privileges & Continuum of Care (Ch. 8)	Physicians have admitting privileges at one or more referral hospitals, or other such arrangement to ensure continuity of care. In cases where hospital arrangements (including admitting privileges and membership) are not possible, health center must firmly establish arrangements for hospitalization, discharge planning, and patient tracking.	August and update as needed

HRSA Health Center Program Compliance Requirements Summary for Board of Managers

7. Sliding Fee Discounts (Ch. 9)	A system is in place to determine eligibility for patient discounts adjusted on the basis of the patient's ability to pay. • This system must provide a full discount to individuals and families with annual incomes at or below 100% of the Federal poverty guidelines (only nominal fees may be charged) and for those with incomes between 100% and 200% of poverty, fees must be charged in accordance with a sliding discount policy based on family size and income. • No discounts may be provided to patients with incomes over 200 % of the Federal poverty guidelines. • No patient will be denied health care services due to an individual's inability to pay for such services by the health center, assuring that any fees or payments required by the center for such services will be reduced or waived.	Annually to align with Federal Poverty Guidelines
8. Quality Improvement/ Assurance Plan (Ch. 10)	A Quality Improvement/Quality Assurance (QI/QA) program is in place which includes clinical services and management, and confidentiality of patient records. The QI/QA program must include: • A clinical director whose focus of responsibility is to support the quality improvement/assurance program and the provision of high-quality patient care; • periodic assessment of the appropriateness of the utilization of services, quality of services provided or proposed to be provided to individuals served by the health center; assessments shall: – be conducted by physicians or by other licensed health professionals under the supervision of physicians; – be based on the systematic collection and evaluation of patient records; and – identify and document the necessity for change in the provision of services by the health center where indicated.	Quarterly Metric Review: February or approval of annual UDS report August November December QAPI Policy: October
9. Key Management Staff (Ch. 11)	Maintains a fully staffed team as appropriate for the size and needs of the center. Prior approval by HRSA of a change in the Project Director/Executive Director/CEO position is required.	September and update as needed
10. Contractual/Affiliation Agreements (Ch. 12)	Exercises appropriate oversight and authority over all contracted services, including assuring that any subrecipient(s) meets Health Center program requirements.	October and ongoing
11. Collaborative Relationships (Ch. 14)	Makes effort to establish and maintain collaborative relationships with other health care providers, and health centers, in the service area of the center. The health center secures letter(s) of support from existing health centers in the service area or provides an explanation for why such letter(s) of support cannot be obtained.	March and ongoing
12. Financial Management and Control Policies (Ch. 15)	Maintains accounting and internal control systems appropriate to the size and complexity of the organization reflecting Generally Accepted Accounting Principles (GAAP) and separates functions appropriate to organizational size to safeguard assets and maintain financial stability. An annual independent financial audit is performed in accordance with Federal audit requirements, including submission of a corrective action plan addressing all findings, questioned costs, reportable conditions, and material weaknesses cited in the Audit Report.	July

HRSA Health Center Program Compliance Requirements Summary for Board of Managers

13. Billing and Collections (Ch. 16)	Systems in place to maximize collections and reimbursement for its costs in providing health services, including written billing, credit and collection policies and procedures.	November
14. Budget (Ch. 17)	Develops a budget that reflects the costs of operations, expenses, and revenues necessary to accomplish the service delivery plan, including the number of patients to be served.	HRSA approval
15. Program Monitoring & Data Reporting Systems (Ch. 18)	Have systems in place to accurately collect and organize data for program reporting and support management decision making.	March
16. Scope of Project	Maintains its funded scope of project (sites, services, service area, target population, and providers); including any increases based on recent grant awards.	Award notification & update as needed
17. Board Authority (Ch. 19)	Governing board maintains appropriate authority to oversee the operations of the center, including: • holding monthly meetings; • approval of the health center grant application and budget; • selection/dismissal and performance evaluation of the health center CEO; • selection of services to be provided and the health center hours of operations; • measure and evaluate the organization's progress in meeting its annual and long-term programmatic and financial goals and develop future plans for the organization by engaging in strategic planning, ongoing review of the organization's mission and bylaws, evaluating patient satisfaction, and monitoring organizational assets and performance; and establish policies for the health center.	December
18. Board Composition (Ch. 20)	Governing board is composed of individuals, a majority of whom are being served by the center and, this majority as a group represents the individuals being served by the center in terms of demographic factors such as race, ethnicity, and sex. Specifically: • Governing board has at least 9 but no more than 25 members, as appropriate for the complexity of the organization. • The remaining non-consumer members of the board shall be representative of the community in which the center's service area is located and shall be selected for their expertise in community affairs, local government, finance and banking, legal affairs, trade unions, and other commercial and industrial concerns, or social service agencies within the community. • No more than one half (50%) of the non-consumer board members may derive more than 10% of their annual income from the health care industry.	December
19. Conflict of Interest Policy (Ch. 13)	Bylaws or written corporate board approved policy include provisions that prohibit conflict of interest by board members, employees, consultants and those who furnish goods or services to the health center. No board member shall be an employee of the health center or an immediate family member of an employee. The Chief Executive may serve only as a non-voting ex-officio member of the board.	December
20. Annual Board Training	Annual training of governing board. New governing board members will be trained during board orientation.	December

For additional information on these requirements, please review:

- Health Center Program Statute: Section 330 of the Public Health Service Act (42 U.S.C. §254b)
- Program Regulations: 42 CFR Part 51c and 42 CFR Parts 56.201-56.604
- Grants Regulations: 45 CFR Part 74

HRSA Health Center Program Compliance Requirements – Chapter 9 Sliding Fee Discount Program

Demonstrating Compliance

- HOMES has a Sliding Fee Discount Program
- No patient denied services due to inability to pay
- Applies to all required and additional HOMES services
- Policy includes:
  - Definition of income and family
  - Assessment of all patients based only on income and family size
  - Sliding fee discount schedule
  - Includes the most recent FPG (2023)
  - Policy is evaluated annually

HRSA Health Center Program Compliance Requirements – Chapter 9 Sliding Fee Discount Program

- Approval: FQHC Sliding Fee Discount Program

Federally Qualified Health Center (FQHC) Sliding Fee Discount Program		Published: XX/XX/XXXX~~02/25/2~~
Patient Financial Services		Page 1 of 8

PURPOSE:

To establish a Sliding Fee Discount Program (SFDP) for HOMES patients who are determined to be at or below 200% of the Federal Poverty Guidelines as published annually by the U.S. Department of Health Human Services. No patient will be denied services due to an individual's inability to pay.

SCOPE:

All Parkland Health ("Parkland") Federally Qualified Health Center (FQHC) Homeless Outreach Medical Services (HOMES) service locations which include only those populations who are considered homeless under section 330(h) of the Public Health Service Act. The population served includes individuals:

- Who lack housing (without regard to whether the individual is a member of a family);
- Whose primary residence during the night is a supervised public or private facility that provides temporary living accommodations;
- Who reside in transitional housing;
- Who reside in permanent supportive housing or other housing programs that are targeted to homeless populations; and/or
- Who are children and youth at risk of homelessness, homeless veterans, and veterans at risk of homelessness.

PROCEDURE:

1. The Sliding Fee Discount Scale (SFDS) is available to all patients who initiate services with HOMES program. Depending on household size and household income, patients are assigned a discount tier.

2. Parkland will evaluate, at least once every three years, its SFDP by:

   A. Collecting utilization data that allows it to assess the rate at which patients within each of its discount pay classes, as well as those at or below 100% of Federal Poverty Guidelines (FPG), are accessing the HOMES program.;

   B. Utilizing this and, if applicable, other data (for example, results of patient satisfaction surveys or focus groups, surveys of patients at various income levels) to evaluate the effectiveness of its sliding fee discount program in reducing financial barriers to care; and

   C. Identifying and implementing changes as needed.

3. The recipient's ability or inability to pay does not affect eligibility and does not impact the provision of care. Parkland does not discriminate in the provision of services to individuals based on their inability to pay, race, color, sex, national origin, disability, religion or sexual orientation.

4. Discount pay classes are defined as Tiers and are based on current year FPG guidelines as shown below.

Parkland

Federally Qualified Health Center (FQHC) Sliding Fee Discount Program		Published: ~~2/25/2022~~XX/XX/XX
Patient Financial Services		Page 3 of 8

	PARKLAND HEALTH --HOMES PROGRAM--SLIDING SCALE DISCOUNT															
	FLAT FEE AMOUNT--TIER 1				FLAT FEE AMOUNT--TIER 2				FLAT FEE AMOUNT---TIER 3				FLAT FEE AMOUNT--TIER 4			
	$0				$5				$10				$15			
FAMILY SIZE	PHHS Assistance Tier 1 (100%)				PHHS Assistance Tier 2 (125%)				PHHS Assistance Tier 3 (150%)				PHHS Assistance Tier 4 (200%)			
	Min incom	Max Income	FPG		Min income	Max Income	FPG		Min income	Max Income	FPG		Min income	Max Income	FPG	
1	0	$ 1,215	0%	100%	$1,215.12	$1,518.75	100.01%	125%	$1,518.87	$2,278.31	125.01%	150%	$1,822.62	$2,430.00	150.01%	200%
2	0	$ 1,643	0%	100%	$1,643.16	$2,053.75	100.01%	125%	$2,053.91	$3,080.87	125.01%	150%	$2,464.66	$3,286.00	150.01%	200%
3	0	$ 2,072	0%	100%	$2,072.21	$2,590.00	100.01%	125%	$2,590.21	$3,885.31	125.01%	150%	$3,108.21	$4,144.00	150.01%	200%
4	0	$ 2,500	0%	100%	$2,500.25	$3,125.00	100.01%	125%	$3,125.25	$4,687.88	125.01%	150%	$3,750.25	$5,000.00	150.01%	200%
5	0	$ 2,928	0%	100%	$2,928.29	$3,660.00	100.01%	125%	$3,660.29	$5,490.44	125.01%	150%	$4,392.29	$5,856.00	150.01%	200%
6	0	$ 3,357	0%	100%	$3,357.34	$4,196.25	100.01%	125%	$4,196.59	$6,294.88	125.01%	150%	$5,035.84	$6,714.00	150.01%	200%
7	0	$ 3,785	0%	100%	$3,785.38	$4,731.25	100.01%	125%	$4,731.63	$7,097.44	125.01%	150%	$5,677.88	$7,570.00	150.01%	200%
8	0	$ 4,213	0%	100%	$4,213.42	$5,266.25	100.01%	125%	$5,266.67	$7,900.01	125.01%	150%	$6,319.92	$8,426.00	150.01%	200%
9	0	$ 4,642	0%	100%	$4,642.46	$5,802.50	100.01%	125%	$5,802.96	$8,704.45	125.01%	150%	$6,963.46	$9,284.00	150.01%	200%
10	0	$ 5,070	0%	100%	$5,070.51	$6,337.50	100.01%	125%	$6,338.01	$9,507.01	125.01%	150%	$7,605.51	$10,140.00	150.01%	200%
11	0	$ 5,498	0%	100%	$5,498.55	$6,872.50	100.01%	125%	$6,873.05	$10,309.57	125.01%	150%	$8,247.55	$10,996.00	150.01%	200%
12	0	$ 5,927	0%	100%	$5,927.59	$7,408.75	100.01%	125%	$7,409.34	$11,114.01	125.01%	150%	$8,891.09	$11,854.00	150.01%	200%
13	0	$ 6,355	0%	100%	$6,355.64	$7,943.75	100.01%	125%	$7,944.39	$11,916.58	125.01%	150%	$9,533.14	$12,710.00	150.01%	200%
14	0	$ 6,783	0%	100%	$6,783.68	$8,478.75	100.01%	125%	$8,479.43	$12,719.14	125.01%	150%	$10,175.18	$13,566.00	150.01%	200%
15	0	$ 7,211	0%	100%	$7,211.72	$9,013.75	100.01%	125%	$9,014.47	$13,521.71	125.01%	150%	$10,817.22	$14,422.00	150.01%	200%
Patient responsibility for Tier 1 = $0, Tier 2 = $5, Tier 3 = $10, Tier 4 = $15																
NOTE*	Poverty Levels based on 2023 Federal Poverty Guidelines issued 1/19/2023.															
	Income figures represent gross monthly income.															
	This sliding scale applies only to patients of the Parkland Health HOMES PROGRAM.															

A. A full discount is provided for individuals and families with annual incomes at or below 100 percent of the current FPG. No nominal charge will be applied.

B. Partial discounts are provided for individuals and families with incomes above 100 percent of the current FPG and at or below 200 percent of the current FPG. The discounts are adjusted based on gradation in income levels and include 3 discount pay classes. HOMES offers a flat fee for Tiers 2 to 4, regardless of services provided at the visit. Due to safety and risk concerns, collections are waived in the field.

C. No discounts are provided to individuals and families with annual incomes above 200 percent of the current FPG.

5. Eligibility Criteria

A. Eligibility is self-declared at the homeless service sites and applicants must attest to homelessness by completing the HOMES Initial Evaluation form at each visit.
B. Coverage: Applicants will be assigned Tier 1 when there is no reported income.

1) Homeless Applicants

2) Applicants who state they are homeless, and

3) Have no fixed residence

4) Living in transitional housing

5) Living in an emergency shelter

6) Living in a place not meant for habitation

B. Homeless applicants who do not have proof of Dallas County residency must be able to explain the following during the interview.

1) Living arrangements

2) Reason for no proof of residency

6. Eligibility Screening

A. Patients will be screened according to the Parkland Financial Assistance (PFA) program criteria, with the exception of residency and asset testing.

1) Patients will be required to attest at the point of service for each visit stating that they are homeless and provide information relative to any other insurance coverage and the sources of any income

2) Coverage information will be obtained to identify other sources of funding.

3) The SFDS tiers are assigned a flat fee discount and are updated each year using federal poverty guidelines.

4) Once approved, patients are eligible from the date of application approval for up to six months with no retroactive coverage.

5) Status may be updated if the household size or household income changes.

B. At a minimum, a new application must be completed every six months in order to qualify for the Sliding Fee Discount Program.

7. Patients we have identified with the propensity to pay upon validation may be subject to actions taken to align with our self-pay collections policy.

8. Account Validation

A. Clinic staff is responsible for on-site screening for existing coverage, verification of coverage and updating of the patient accounting system with applicant's eligibility information at the next HOMES administrative business cycle.

B. Patients will be screened for third-party funding and Parkland will bill insurance for medical visit charges.

C. Patients with insurance plans that are contracted with Parkland will not be eligible for the Sliding Fee Discount Program and will be responsible for any co-payment, co- insurance or deductible amounts deemed payable by their insurance carrier.

D. For in-scope services provided via contracts (Form 5A: Services Provided, Column II, Formal Written Contract/Agreement,) HOMES ensures that fees for such services are discounted at or greater than as would be received if Parkland Health & Hospital System were to provide the services.

9. The HOMES Sliding Fee Discount Program is reviewed and approved no less than annually by the HOMES Board of Managers to align with the US Department of Health and Human Services Poverty Guidelines.

EQUIPMENT:

Parkland

Federally Qualified Health Center (FQHC) Sliding Fee Discount Program		Published: ~~02/25/22~~XX/XX/XXX
Patient Financial Services		Page 6 of 8

N/A

DEFINITIONS:

Household Size: A household or family size for PFA eligibility purposes is defined as a person living alone or two or more persons living together where legal responsibility for support exists.

Income: Income is defined as earnings over a given period of time used to support an individual/household unit based on a set of criteria of inclusions and exclusions. Income is distinguished from assets, as assets are a fixed economic resource while income is comprised of earnings.

Group household:

- Married couples including same sex marriage, both legal marriage and common law marriage
- One or both legal parent(s) and their legal children under age 19, including unborn children
- A managing conservator (person designated by a court to have daily responsibility for a child) and a minor child and the conservator's spouse and other legal minor children, if any
- Both Medicaid -ineligible parents of Medicaid-eligible children
- Students between the ages of 18-26, dependent on parental/guardian support and living with parent(s)

One-person household:

- A person age 18 or older living alone
- An adult living with others who are not legally responsible for the adult's support

- A minor child living alone or with others who are not legally responsible for the child's support
- An inmate in a county jail
- A Medicaid-ineligible spouse
- A Medicaid-ineligible parent whose spouse and/or minor children are Medicaid- eligible

REFERENCES:

Health Resources & Services Administration, Health Center Program Compliance Manual; https://bphc.hrsa.gov/programrequirements/compliancemanual

The US Department of Health and Human Services Poverty Guidelines; https://aspe.hhs.gov/poverty-guidelines

Federally Qualified Health Center (FQHC) Sliding Fee Discount Program		Published: XX/XX/XXXX
Patient Financial Services		Page 1 of 8

PURPOSE:

To establish a Sliding Fee Discount Program (SFDP) for HOMES patients who are determined to be at or below 200% of the Federal Poverty Guidelines as published annually by the U.S. Department of Health Human Services. No patient will be denied services due to an individual's inability to pay.

SCOPE:

All Parkland Health ("Parkland") Federally Qualified Health Center (FQHC) Homeless Outreach Medical Services (HOMES) service locations which include only those populations who are considered homeless under section 330(h) of the Public Health Service Act. The population served includes individuals:

- Who lack housing (without regard to whether the individual is a member of a family);
- Whose primary residence during the night is a supervised public or private facility that provides temporary living accommodations;
- Who reside in transitional housing;
- Who reside in permanent supportive housing or other housing programs that are targeted to homeless populations; and/or
- Who are children and youth at risk of homelessness, homeless veterans, and veterans at risk of homelessness.

PROCEDURE:

1. The Sliding Fee Discount Scale (SFDS) is available to all patients who initiate services with HOMES program. Depending on household size and household income, patients are assigned a discount tier.

2. Parkland will evaluate, at least once every three years, its SFDP by:

   A. Collecting utilization data that allows it to assess the rate at which patients within each of its discount pay classes, as well as those at or below 100% of Federal Poverty Guidelines (FPG), are accessing the HOMES program.;

   B. Utilizing this and, if applicable, other data (for example, results of patient satisfaction surveys or focus groups, surveys of patients at various income levels) to evaluate the effectiveness of its sliding fee discount program in reducing financial barriers to care; and

   C. Identifying and implementing changes as needed.

3. The recipient's ability or inability to pay does not affect eligibility and does not impact the provision of care. Parkland does not discriminate in the provision of services to individuals based on their inability to pay, race, color, sex, national origin, disability, religion or sexual orientation.

4. Discount pay classes are defined as Tiers and are based on current year FPG guidelines as shown below.

Parkland

Federally Qualified Health Center (FQHC) Sliding Fee Discount Program		Published: XX/XX/XXXX
Patient Financial Services		Page 3 of 8

PARKLAND HEALTH --HOMES PROGRAM--SLIDING SCALE DISCOUNT																
	FLAT FEE AMOUNT--TIER 1				FLAT FEE AMOUNT--TIER 2				FLAT FEE AMOUNT---TIER 3				FLAT FEE AMOUNT--TIER 4			
	$0				$5				$10				$15			
FAMILY SIZE	PHHS Assistance Tier 1 (100%)				PHHS Assistance Tier 2 (125%)				PHHS Assistance Tier 3 (150%)				PHHS Assistance Tier 4 (200%)			
	Min incom	Max Income	FPG		Min income	Max Income	FPG		Min income	Max Income	FPG		Min income	Max Income	FPG	
1	0	$ 1,215	0%	100%	$1,215.12	$1,518.75	100.01%	125%	$1,518.87	$2,278.31	125.01%	150%	$1,822.62	$2,430.00	150.01%	200%
2	0	$ 1,643	0%	100%	$1,643.16	$2,053.75	100.01%	125%	$2,053.91	$3,080.87	125.01%	150%	$2,464.66	$3,286.00	150.01%	200%
3	0	$ 2,072	0%	100%	$2,072.21	$2,590.00	100.01%	125%	$2,590.21	$3,885.31	125.01%	150%	$3,108.21	$4,144.00	150.01%	200%
4	0	$ 2,500	0%	100%	$2,500.25	$3,125.00	100.01%	125%	$3,125.25	$4,687.88	125.01%	150%	$3,750.25	$5,000.00	150.01%	200%
5	0	$ 2,928	0%	100%	$2,928.29	$3,660.00	100.01%	125%	$3,660.29	$5,490.44	125.01%	150%	$4,392.29	$5,856.00	150.01%	200%
6	0	$ 3,357	0%	100%	$3,357.34	$4,196.25	100.01%	125%	$4,196.59	$6,294.88	125.01%	150%	$5,035.84	$6,714.00	150.01%	200%
7	0	$ 3,785	0%	100%	$3,785.38	$4,731.25	100.01%	125%	$4,731.63	$7,097.44	125.01%	150%	$5,677.88	$7,570.00	150.01%	200%
8	0	$ 4,213	0%	100%	$4,213.42	$5,266.25	100.01%	125%	$5,266.67	$7,900.01	125.01%	150%	$6,319.92	$8,426.00	150.01%	200%
9	0	$ 4,642	0%	100%	$4,642.46	$5,802.50	100.01%	125%	$5,802.96	$8,704.45	125.01%	150%	$6,963.46	$9,284.00	150.01%	200%
10	0	$ 5,070	0%	100%	$5,070.51	$6,337.50	100.01%	125%	$6,338.01	$9,507.01	125.01%	150%	$7,605.51	$10,140.00	150.01%	200%
11	0	$ 5,498	0%	100%	$5,498.55	$6,872.50	100.01%	125%	$6,873.05	$10,309.57	125.01%	150%	$8,247.55	$10,996.00	150.01%	200%
12	0	$ 5,927	0%	100%	$5,927.59	$7,408.75	100.01%	125%	$7,409.34	$11,114.01	125.01%	150%	$8,891.09	$11,854.00	150.01%	200%
13	0	$ 6,355	0%	100%	$6,355.64	$7,943.75	100.01%	125%	$7,944.39	$11,916.58	125.01%	150%	$9,533.14	$12,710.00	150.01%	200%
14	0	$ 6,783	0%	100%	$6,783.68	$8,478.75	100.01%	125%	$8,479.43	$12,719.14	125.01%	150%	$10,175.18	$13,566.00	150.01%	200%
15	0	$ 7,211	0%	100%	$7,211.72	$9,013.75	100.01%	125%	$9,014.47	$13,521.71	125.01%	150%	$10,817.22	$14,422.00	150.01%	200%
Patient responsibility for Tier 1 = $0, Tier 2 = $5, Tier 3 = $10, Tier 4 = $15																
NOTE*	Poverty Levels based on 2023 Federal Poverty Guidelines issued 1/19/2023.															
	Income figures represent gross monthly income.															
	This sliding scale applies only to patients of the Parkland Health HOMES PROGRAM.															

A. A full discount is provided for individuals and families with annual incomes at or below 100 percent of the current FPG. No nominal charge will be applied.

B. Partial discounts are provided for individuals and families with incomes above 100 percent of the current FPG and at or below 200 percent of the current FPG. The discounts are adjusted based on gradation in income levels and include 3 discount pay classes. HOMES offers a flat fee for Tiers 2 to 4, regardless of services provided at the visit. Due to safety and risk concerns, collections are waived in the field.

C. No discounts are provided to individuals and families with annual incomes above 200 percent of the current FPG.

5. Eligibility Criteria

A. Eligibility is self-declared at the homeless service sites and applicants must attest to homelessness by completing the HOMES Initial Evaluation form at each visit.
B. Coverage: Applicants will be assigned Tier 1 when there is no reported income.

1) Homeless Applicants

2) Applicants who state they are homeless, and

3) Have no fixed residence

4) Living in transitional housing

5) Living in an emergency shelter

6) Living in a place not meant for habitation

B. Homeless applicants who do not have proof of Dallas County residency must be able to explain the following during the interview.

1) Living arrangements

2) Reason for no proof of residency

6. Eligibility Screening

A. Patients will be screened according to the Parkland Financial Assistance (PFA) program criteria, with the exception of residency and asset testing.

1) Patients will be required to attest at the point of service for each visit stating that they are homeless and provide information relative to any other insurance coverage and the sources of any income

2) Coverage information will be obtained to identify other sources of funding.

3) The SFDS tiers are assigned a flat fee discount and are updated each year using federal poverty guidelines.

4) Once approved, patients are eligible from the date of application approval for up to six months with no retroactive coverage.

5) Status may be updated if the household size or household income changes.

B. At a minimum, a new application must be completed every six months in order to qualify for the Sliding Fee Discount Program.

7. Patients we have identified with the propensity to pay upon validation may be subject to actions taken to align with our self-pay collections policy.

8. Account Validation

A. Clinic staff is responsible for on-site screening for existing coverage, verification of coverage and updating of the patient accounting system with applicant's eligibility information at the next HOMES administrative business cycle.

B. Patients will be screened for third-party funding and Parkland will bill insurance for medical visit charges.

C. Patients with insurance plans that are contracted with Parkland will not be eligible for the Sliding Fee Discount Program and will be responsible for any co-payment, co- insurance or deductible amounts deemed payable by their insurance carrier.

D. For in-scope services provided via contracts (Form 5A: Services Provided, Column II, Formal Written Contract/Agreement,) HOMES ensures that fees for such services are discounted at or greater than as would be received if Parkland Health & Hospital System were to provide the services.

9. The HOMES Sliding Fee Discount Program is reviewed and approved no less than annually by the HOMES Board of Managers to align with the US Department of Health and Human Services Poverty Guidelines.

EQUIPMENT:

Federally Qualified Health Center (FQHC) Sliding Fee Discount Program		Published: XX/XX/XXXX
Patient Financial Services		Page 6 of 8

N/A

DEFINITIONS:

Household Size: A household or family size for PFA eligibility purposes is defined as a person living alone or two or more persons living together where legal responsibility for support exists.

Income: Income is defined as earnings over a given period of time used to support an individual/household unit based on a set of criteria of inclusions and exclusions. Income is distinguished from assets, as assets are a fixed economic resource while income is comprised of earnings.

Group household:

- Married couples including same sex marriage, both legal marriage and common law marriage
- One or both legal parent(s) and their legal children under age 19, including unborn children
- A managing conservator (person designated by a court to have daily responsibility for a child) and a minor child and the conservator's spouse and other legal minor children, if any
- Both Medicaid -ineligible parents of Medicaid-eligible children
- Students between the ages of 18-26, dependent on parental/guardian support and living with parent(s)

One-person household:

- A person age 18 or older living alone
- An adult living with others who are not legally responsible for the adult's support

- A minor child living alone or with others who are not legally responsible for the child's support
- An inmate in a county jail
- A Medicaid-ineligible spouse
- A Medicaid-ineligible parent whose spouse and/or minor children are Medicaid- eligible

REFERENCES:

Health Resources & Services Administration, Health Center Program Compliance Manual; https://bphc.hrsa.gov/programrequirements/compliancemanual

The US Department of Health and Human Services Poverty Guidelines; https://aspe.hhs.gov/poverty-guidelines

HRSA Update

- UDS Reporting
  - Annual report submitted February 15th
  - HRSA review and corrections: February to March
  - annual report April 2023

Community Collaborations

DALLAS AND COLLIN COUNTIES RECEIVES $22.8 MILLION U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT AWARD TO ADDRESS UNSHELTERED HOMELESSNESS

HOUSING FORWARD
SOLVING HOMELESSNESS TOGETHER

- Coordinated encampment outreach
- Expand diversion efforts
- Increase availability of Permanent Supportive Housing
- Partnerships with Dallas Housing Authority, Dallas County, NTBHA, and Parkland

State of Homeless Address

- HOMES and Population Health staff participated in the 2023 PIT count

Save the Date

2023 State Of Homeless Address

Thursday, April 13, 2023

Questions?