H.C.F RESOLUTION NO. 2017- 2022 -03-06

STATE OF TEXAS

COUNTY OF COLLIN

HEALTH CARE FOUNDATION
MEETING MINUTES
FEBRUARY 13, 2017

On Monday, February 13, 2017, the Collin County Health Care Foundation Board of Trustees met in Regular Session in the Commissioners' Courtroom, Jack Hatchell Collin County Administration Building, 4th Floor, 2300 Bloomdale Road, City of McKinney, Texas, with the following members present, and participating, to wit:

President Keith Self
Trustee Susan Fletcher, Precinct 1
Trustee Cheryl Williams, Precinct 2
Trustee Chris Hill, Precinct 3
Trustee Duncan Webb, Precinct 4

1. President Self called to order the meeting of the **Collin County Health Care Foundation** at 1:31 p.m. and recessed the meeting at 1:55 p.m. The meeting was reconvened at 4:09 p.m. and adjourned at 4:09 p.m.

FYI NOTIFICATION

1. AI-42707 Budget amendment in the amount of $41,280 to establish the budget for the first six (6) months of the FY 2017 Shoap RN Program, Auditor.

2. Consent agenda to approve: President Self asked for comments on the consent agenda. Hearing no comments, a motion was made to approve the consent agenda. (Time: 4:09 p.m.)

Motion by: Trustee Cheryl Williams
Second by: Trustee Chris Hill
Vote: 5 – 0 Passed

a. AI-42674 Disbursements for the period ending February 7, 2017, Auditor.
H.C.F RESOLUTION NO. 2017-2008-02-13

b. AI-42718 FY 2017 Health Care Advisory Board funding recommendations to various non-profit organizations, Health Care.
H.C.F RESOLUTION NO. 2017-2009-02-13

c. AI-42721 Filing of the January 23, 2017, Minutes, County Clerk.
H.C.F RESOLUTION NO. 2017-2010-02-13

GENERAL DISCUSSION

3. AI-42678 Project Access Annual Presentation and Financial Reports, Health Care.

Joshua James, M.D., came forward to present the annual update of PACC (Project Access Collin County). PACC is a network of doctors, hospitals and ancillary services who come together to provide healthcare for the population of Collin County who would otherwise not receive healthcare. It allows patients a home base for healthcare with a primary care physician. From the primary care physician patients can branch out to different subspecialists, hospital facilities and/or ancillary services if needed. In Collin County there are 150,000 uninsured individuals. Without PACC the timeliness, thoroughness and level of care for those individuals would be much less than what PACC is able to provide and would cost more.

There were 229 new patients enrolled in FY2016 which was a product of improved coordination in healthcare by PACC staff and the increased number of physician and ancillary partners. The total cumulative new PACC patients served by year for FY2016 were 939 patients. There were 32 indigent patients referred from Collin County in FY2016.

It is possible to be removed from the program. Dr. James said patients are removed from the program for one of two reasons: 1) they gain access to health care insurance or their financial status changes; or 2) they are noncompliant or because of drug seeking issues. If a patient continues to refuse to take their medications or meet their follow-ups PACC will not continue to spend taxpayer dollars or use physician and ancillary resources on patients not willing to comply with what is expected as a patient. Dr. James said PACC does not drop County referred patients from the program.

The number of physician volunteers has grown from 70 in FY2011 to 164 in FY2016. The ability for physicians to see patients in their own offices has made the most impact in the increased number of volunteers. This saves money overall because PACC does not have to provide a facility or supplies for the physician volunteers to see patients. There are eight Collin County hospitals participating in the program. Of the eight, six are financially participating and referring patients. The two that are not financially participating are not referring patients but still provide their facilities and services to PACC.

In FY2016 PACC implemented a new software program to facilitate, document and coordinate all patient care referrals and medical procedures which has increased efficiency. PACC was able to hold a Casino Night fundraiser with the help of a title sponsor which brought in over $20,000 in donations. The title sponsor has committed to sponsoring the fundraiser every year. It is expected that the 2017 fundraiser will bring in twice as much as in 2016. Also, PACC staff has developed a new website for the program providing better visibility to patients.

Dr. James reviewed patient care values for FY2016. Estimated value of service was $883,895.97. This number is skewed due to only 60% of physicians, hospitals and ancillary partners reporting explanation of benefits. The actual number would be closer to $1.3 million if 100% reported explanation of benefits. Pharmacy assistance secured was $355,823.08 and medication purchased was $89,478. The total value of care was $1,329,197.28 for FY2016 or $1,829,197.28 if all partners reported in. The total does not include unquantifiable benefits such as navigation, support, health education, et cetera.

Trustee Webb supports the program but was concerned with the County putting $485,000 into PACC when over the last two years PACC has shown net income of $375,000. He questioned if the County should continue to put in $485,000 when $185,000 is going to the bottom line each year. Dr. James said the profit is being preserved in the event of a large increase of services or to keep the program going for a few years in the instance a hospital partner pulls out. Jennifer Koi Bolton, Executive Director, said it is the decision of the PACC Board to carry over the funds.

Trustee Williams said PACC is a crucial program we have worked hard to get implemented in order to save tax dollars. If the program were to die we would go back to having to cover all indigent healthcare costs across the County which will be growing as the County grows. PACC has been a very effective tool in getting people to stay out of emergency rooms and the County not having to absorb those costs. It would take a more in-depth study to determine what kind of costs the County would have been faced with if the indigent population had not been involved with PACC. Trustee Webb said he supports the program but would like to look at the possibility of reducing the funding amount. Trustee Fletcher supports the program and agreed with Trustee Webb on reducing the funding so taxpayer dollars are not just sitting in the bank when they could be used elsewhere for the benefit of the taxpayers.

Candy Blair, Health Care Services, said the $485,000 is an intergovernmental transfer so the program receives match money. The full $485,000 is not spent which is a good benefit for the program. 500 patient slots are bought with the $485,000 which is planning for future growth and shows there is room to absorb those patients as the County grows. PACC is also responsible for any bill a patient gets from a hospital, for example, who agreed to write-off the bill but at the last minute chose not to do so. Therefore, some operating capital is necessary. President Self referred to the 150,000 uninsured individuals in Collin County and asked what the normal translation to indigent is. Ms. Koi Bolton did not have that number but would get the numbers for the Board.

President Self asked if there has been any added coordination with PACC and LifePath. Ms. Koi Bolton said patients are referred in both directions. President Self would like to know the number of patients that go out of PACC and into LifePath. He said because PACC partners with LifePath he believes the County will have the most airtight system for its indigent citizens. President Self asked Dr. James to include concept in the planning and operations of PACC. It was also suggested the next annual PACC update be presented together with LifePath.

Trustee Hill asked Ms. Koi Bolton to submit a balance sheet for the financials PACC has submitted and to provide a balance sheet when submitting financials in the future. He also asked for a copy of the most recent IRS Form 990.

Trustee Fletcher thanked PACC for the work they do. She said the indigent population that benefits from the program is receiving much better care than they were previously receiving.

Dr. James added if the financial concern brought forward by Trustee Webb becomes an issue, it is something that could be adjusted year to year. (Time: 1:55 p.m.)

NO ACTION TAKEN

EXECUTIVE SESSION

The Board did not recess into Executive Session. There being no further business of the Board, President Self adjourned the meeting at 4:09 p.m.

Keith Self, President

ATTEST:

Chris Hill, Trustee/Secretary