



COMTREA BOARD OF DIRECTORS MEETING MINUTES Monday, October 10, 2022

Chairperson/President/Facilitator: Jerry Rogers, Chairperson

Attendees: Kim Harvey-Manus; Beth McDaniel (Board Secretary); Jenelle Behnen; Jane Sullivan; Christine Eoff; Cliff Lane ; Kathryn Ellis (Board Vice Chair); Tammy Fulbright; Heather Green; and Staci Frank

Not in Attendance: Martha Maxwell; Tony Rich; John Lamping (Board Treasurer)

Staff in Attendance: Amy Rhodes (CFO); Katie Harman (VP, HR); Katy Murray (VP Corporate Compliance/QM); Patty Vanek (VP, Clinical Quality); Kim Elbl (VP Capital Campaign and Fundraising); Dr. Harvin (Psych Director); Lisa Rothweiler (COO); Megan Vitale (VP, BH Youth); Tony Sokolic (VP, Youth BH) Amy Phillips (VP, Adult BH), Katy Murray Cindy Vessell (VP of Community Services) Dr. Cook (Dir of Oral Health) Andrea Cuneio; and Dr. Stevenson (Director of Primary Care); and Makenzie Beckham

Not in Attendance: Susan M. Curfman, MA (President & CEO); Monica Johnson (Director of Nursing);

1. Meeting Open

The October 10, 2022 Board Meeting was called to order at 7:36am by Jerry Rogers. There was a quorum of members present and the board met via zoom.

2. Approval of Agenda

The October 10, 2022 agenda was amended to add a closed session and a policy review.

Recommendations: "I, Kathy Ellis move that we approve the October 10, 2022 Agenda as amended." Tammy Fulbright seconded the motion. The motion carried.

3. Closed Session – Legal

The Board went into Closed Session at 7:42 am to discuss legal. The board returned to Open Session at 7:52 am. In closed session the board was informed about the current legal situation.

4. Approval of Minutes

a. September 12, 2022

The September 12, 2022 board meeting minutes were reviewed with no revisions requested.



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Recommendations: “I, Kathy Ellis, move that we approve September 12, 2022 Board Meeting Minutes as presented.” Beth McDaniel seconded the motion. The motion carried.

5. Mission Statement

Jerry Rogers asked for Beth McDaniel to read the mission statement. Beth read the mission statement, “To lead in providing quality, comprehensive healthcare that is affordable and accessible, and to support the dedicated professionals who make caring for the individuals we serve their number one priority.”

6. Program Highlight – Mary’s House of Hope – Transitional Housing

Kim Elbl spoke about the Mary’s House of Hope Transitional Housing. Mary’s House of Hope is a transitional housing facility that has four apartment style housing units where residents of A Safe Place can transition to and can live for up to 2 years. Residents at MHOH will continue to receive counseling and therapy sessions all while working on a goal driven plan towards becoming independent and empowered to sustain themselves and their families so they can live a healthy life free of violence. At this time 3 of the 4 units are occupied with families. The residence of MHOH are involved in community functions at A Safe Place and have taken part in forming relationships with mentoring the residents at A Safe Place.

Cindy Vessel spoke about the application process. Cindy stated that employees speaks with the residence of a Safe Place and if the residence is interested that a packet that they fill out. In this packet they explain why they would be a good fit for Mary’s House of Hope. After they fill out the packet it is turned in to Cindy and then goes to a 3 person panel. There is a cost for living at MHOH but COMTREA is able to get some funding to assist with cost. This housing is also income based. Jerry asked Cindy to speak about why Mary’s House of Hope is so successful. Cindy stated Mary’s House of Hope is a great way to transition from living at A Safe Place to living on their own with their own resources. Cindy spoke how residence learn how to budget, to find daycare, and any other basic living needs before they are totally transitioned out on their own.

Kim spoke about sustainability. Circle of Hope - Your gift to the Circle of Hope program supports operational costs for Mary's House of Hope and living expenses for families. These homes will continue to give hope far into



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the future. As each woman moves on to her own house, empowered and able to sustain herself and her family, the unit will be refreshed for another survivor looking to secure their independence. Legacy of Hope Society - We believe each woman and child residing at Mary's House of Hope deserves the opportunity to build their own legacy. Lives are changed at Mary's House of Hope through the support of community partners. With your monetary support, you become part of building a legacy of hope across lifetimes, together. Please consider a legacy gift that will grow and benefit survivors of domestic violence far beyond a lifetime.

Lisa Rothweiler stated there is a new Logo and Kim Elbl went on to explain the new logo.

Jerry asked the Board if they have any questions about Mary's House of Hope. The board did not have any questions.

7. Financial Review

Amy Rhodes reviewed the monthly financial report, Cash on hand \$4,044,037.33, with Total Cash unrestricted cash at \$3,670,058.36 and accounts receivable of \$5,244,573.61. Jerry asked where we were with on cash reserved and how many days of reserve there are. Amy reported we are at 60 days and we really need to be at 90 days. Amy reported hopefully we are moving back to the right direction after work in the last month with patient visits/encounters. We did have an increase in visits in the month of August. Comtrea's Income Statement for August is a profit of \$349,356 not including MHOH construction and YTD loss of \$535,610.



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KEY INCOME STATEMENT INDICATORS

TREND ACT TO BUD COMPARISON	August				YTD			
	% Rev of BUD	% Labor BUD	% Exp BUD	% Inc BUD	% Rev of BUD	% Labor BUD	% Exp BUD	% Inc BUD
All Sites	105.56%	80.30%	95.90%	601.75%	95.44%	86.55%	106.74%	(466.02%)
Behavioral Health Services	92.05%	78.77%	92.70%	90.34%	81.83%	82.63%	94.53%	48.92%
Psychiatry	103.96%	84.73%	87.14%	585.97%	97.47%	72.86%	76.22%	368.80%
Medical Health Services	83.57%	84.15%	84.70%	72.85%	83.00%	92.87%	99.85%	(77.16%)
Oral Health Services	102.31%	73.57%	77.30%	323.77%	96.65%	83.62%	85.86%	226.49%
Community Services	108.48%	71.94%	76.72%	120.61%	101.14%	76.25%	84.31%	13.28%
Administration	76.59%	101.16%	109.72%	112.42%	178.34%	105.96%	160.68%	159.24%

Key Balance Sheet Indicators

	Current	Prior Year	Change
Current Ratio (Cash Ratio)	4.41	6.29	(1.89)
<i>Ability to pay short-term obligations. The greater the number the better.</i>			
Days in Account Receivable	136.65	111.69	24.96
Dept. of Mental Health	50.48	57.11	(6.63)
Medicaid/MC+	133.73	110.77	22.96
Medicare	78.88	188.84	(109.96)
Insurance	251.74	276.15	(24.42)
Self - Pay	148.16	234.84	(86.68)
<i>An increase in this ratio would indicate a potential billing problem - Goal is 45 days</i>			
Percentage of AR over 120 days	47%		
<i>Goal is less than 15%</i>			
Percent of Cash to AR	44.4%	60.0%	-16%
<i>An decrease in this percentage would indicate a potential billing problem</i>			
Days in Account Payable	15.14	16.44	(1.30)
<i>An increase in this ratio would indicate we may have cash flow issues - Goal is less than 30 days</i>			
Days in Cash	59.05	129.41	(70.35)
<i>Goal is 60-90 days</i>			
Total Debt to Equity Ratio	0.03	0.03	(0.01)
<i>Goal is to be less than .50</i>			

Increase from prior month of 5.97 days
 Increase from prior month of 23.21 days
 Decrease from prior month of 9.67 days (State Billing issue on MCO billing)
 Decrease from prior month of 20.28 days
 Decrease from prior month of 35.70 days
 Increase from prior month of 3.07 days

Remained the same

Increase from prior month of 8.01 - No Taxes received & Medicaid Cost Report

Jerry asked if anyone had any questions or explanations. Amy Rhodes stated that if any Board members have any questions at any time please reach out to her at any time

Recommendations: “I, Kathy Ellis, move that the Board the Financials for August 2022 as presented.” Beth Harvey-Manus seconded the motion. The motion carried.

8. CEO’s Report

a. Financial Focus Update

Lisa reported on Finance focus. Every department’s reports on MORS. This is status quo each department has requirements that they report on. Lisa stated that there was a lot of provider turn over so Septembers were not as good as August.

b. Covid Impact Update

The county is in the Yellow and we are following the COMTREA Safety plan. We follow all OSHA and County regulations. Mask are optional unless you are in a clinical area.

c. State Associations/Advocacy Updates/Community Involvement



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We have been operating as a hybrid. With this we will begin office sharing. Level 1 day treatment there is a manager hired and she has been doing a lot of community advertng. PSR will be coming back on site more starting December 1st. Jerry asked what percentage of our staff is working at home. Lisa reported with BH it's about 50%. Dental is 100% on site. Primary Care is 17% working remote. Psy is at 63%.

We signed to be a part of a DRIVES test polite thru Primary care. Comtrea did receive a Platinum Award for Primary Care.

d. Division and Department Updates

These were sent out in the Leadership Report. Dental has ordered the new mobile dental unit. The mobile unit is being finalized and the last few pieces are being picked out.

i. Behavioral Health and Psychiatry

2 new providers have been hiring.

- ii. Primary Care
- iii. Oral Health

e. HRSA

i. Notifications of Awards

- 1. FTCA deemed status

We did get the FTCA which is the malpractice and this is so very good.

ii. PR Monthly Review

- 1. Board Composition

We are 100% compliant with this.

iii. Current % of Board Consumers

64% Board Consumers. Jerry reported about how important it is that our Board members are consumers of COMTREA. Makenzie informed all board members that if they need help setting up an appointment to please reach out to her and she can help in setting up appointments.

iv. Construction Grant



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The Building and Grounds Committee has selected a company to do the work for the High Ridge new build. We would now like to start negotiating the cost. The Building and Grounds Committee would like ArchImages to complete the needed work. When the Northwest Campus is complete Primary Care and PSY/BH services will become more integrated being in the same building. All 3 service lines will be available for patients when MAP rotates to this location. Jerry asked if there was any questions with the contract and the build. Jerry reported that the Board will have to make a motion for Lisa Rothweiler to start the negotiations with ArchImages and have the contract signed.

Recommendations: “I, Cliff Lane, move for Lisa Rothweiler to negotiate with ArchImages and a contract and cost.” Heather Green seconded the motion. The motion carried.

f. Monthly Grant Update

We did not receive the SAMSHA Grant.

g. Volunteers

Location	JULY	AUG	SEPT	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	TOTAL HOURS
A Safe Place	6	6	4										16
CAC	0	0	0										0
Employees	0	0	0										0
Board Members	53	42	41										136
Adult and C&Y Div.	0	0	0										0
Job Shadowing	0	0	10										10
TOTAL Hours:	59	48	55										162

9. Action Items (Anything that requires a vote)



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a. Leadership Council Reports (Month of September)

This was emailed to the Board

Recommendations: “I, Kim Harvey-Manus, move that the Board approve the September 2022 Leadership Council Report.” Heather Green seconded the motion. The motion carried

b. Unbudgeted Dentist Position

A new part time dentist is being requested. This dentist will help out with the current need for dentist and to also cover the maturity leave by one of the other dentist.

Recommendations: “I, Kathy Ellis, move that the Board approve the Unbudgeted Dentist Position that is part time.” Beth McDaniel seconded the motion. The motion carried

c. Credentialing & Privileging Report

Kathy Ellis reviewed the credential and privileging report. There were 9 initial and 17 reappointments for the month.

Jerry Rogers asked Kathy Ellis why we do re-credential employees. Kathy stated that when their licenses are renewed we are required to re-credential staff.

Recommendations: “I, Kathy Ellis, move that the Board approve the September 2022 Credentialing and Privileging report as presented.” Cliff Lane seconded the motion. The motion carried.

d. Quarterly Risk Management Approval

Christian Hayes has created a medication training guide. This assist with making sure all the correct medications are prescribed. Critical Incident reported on 9/6/22 was needle stick. Individuals who were involved were aware of uncapped instrument and education completed. Reported and discussed at 9/22/22 Risk Management Meeting

Recommendations: “I, Tammy Fulbright, move that the Board approve the Quarterly Risk Management report as presented.” Heather Green and Cliff Lane seconded the motion. The motion carried.

e. QIQA Monthly Report



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Tony Sokolic reported on the Behavioral Health Focus. Dr. Harvin stated that work flow with the MAs have been changed and now we have 4 eyes now instead of 2 looking at our clinical measures. Patty Vanek spoke about the COMTREA Advisory Focus group. This last quarter there were 18 adults who participated in this focus group. Dr. Harvin stated that a complaint has been in the past that refills have not been ordered. However Dr. Harvin stated that she is able to track this thru escribe what stage the refill is in. If the prescription was received by the pharmacy and if this was filled. Dr. Harvin feels that this will assist in knowing if the refill was sent, received by the pharmacy, fill and then picked up. Jerry asked how many patients are using the patient portal. Patty stated that the number of patients using Athena is growing. Primary Care is telling all patients to check the portal for a lot of their patient needs. Andrea Cuneio stated we will be able to figure out the numbers by the end of the year for Behavioral Health Patient portal use. Andrea went on to say that we have signed a contract for dental to have an online portal we are just waiting for Dentrix to get back in touch with us. Patty spoke of the UDS table and we are remaining the same as before.

UDS Tables 3B – Diversity and UDS Table 4 Zip Code Language, Gender Identity, Race and Ethnicity

Report ran utilizing COMTREA Internal Reporting for monitoring purposes and does not indicate final UDS reporting results

				Top 20 Zip Codes (Broken Down by Payer) for the Greatest Population Served as of Ty August 2022					
Total Patients	Year 2020	Year 2021	TY Aug 2022	ZIP	NONE UNINSURED	MEDICAID OTHER PUBLIC	MEDICARE	PRIVATE	TOTAL
Language other than English	12539	12395	11925	63010	158	811	49	247	1,265
Patients by Gender Identity	Year 2020	Year 2021	TY Aug 2022	63051	140	575	67	243	1,025
Male	4873	4860	4742	63028	187	536	80	221	1,024
Female	6564	6577	6428	63020	159	497	94	219	969
Transgender Male/Female to Male	16	13	17	63026	138	587	45	175	945
Transgender Female/Male to Female	8	11	7	63049	126	494	70	219	909
Other	20	25	32	63052	118	554	38	156	866
Chose not to disclose	796	781	554	63050	158	397	24	179	758
Unknown	262	128	145	63070	66	292	23	81	462
Race									
Year 2020	Year 2021	TY Aug 2022							
Asian	118	130	137	63016	63	247	27	116	453
Native Hawaiian	11	12	10	63129	33	225	6	36	300
Other Pacific Islander	7	4	4	63012	42	165	21	64	292
American Indian/Alaska Native	83	78	80	63023	30	166	20	63	279
Black/African American	317	320	304	63125	38	177	4	18	237
White	11178	10999	10603	63019	32	106	21	60	219
More the one race	282	339	326	63123	19	99	3	30	151
Unreported	519	481	429	63048	14	63	5	29	111
Ethnicity									
Year 2020	Year 2021	TY Aug 2022							
Non Hispanic	11173	10898	10271	63128	12	75	2	12	101
Hispanic or Latina	362	362	367						
Unknown	1004	1135	1182						

Recommendations: “I, Kim Harvey-Manus, move that the Board accept the July 2022 QIQA report as presented. Beth McDaniel seconded the motion. The motion carried



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f. Policy for Maintaining Required Qualifications -Unpaid Suspension

Katie Harman spoke about the policy to have employees face an unpaid suspension if they do not complete required qualifications such as CPR, BLS, Fit test, and any other required items by COMTREA. Katie stated that this policy will put more responsibility on employees to complete required trainings that are required by the agency. Katie went on to say that employees and their supervisors received emails way in advance before requirements are needed. Katie spoke of the importance of the required certifications and licenses as these are looked at by both CARF and HRSA look at.

Recommendations: “I, Kathy Ellis, move to approve the Policy for Maintaining Required Qualifications and Unpaid Suspension.” Beth McDaniel seconded the motion. The motion carried.

10. Discussion Items (Informational; no action taken)

a. Subcommittees of the Board

i. Building and Grounds

238 we are hopeful we should have plans soon to review.

ii. Fundraising & Capital Campaign

Kim Elbl reported spoke of the upcoming fundraising events.

Upcoming Fundraisers			
Capital Campaign Newsletter/YEA	October 2022	Mailing	MHOH - Operations
CWHF Gift Card Raffle*	Oct. 24 – Nov. 11 2022	Internal	Co-Worker Help Fund Committee
CAC YEA	November 2022	Mailing	CAC
Tunes and Trivia	November 19, 2022	Villa Antonia Winery	MHOH - Operations
Tree-Mendous Christmas Fest	November 26, 2022	Comtrea Festus Conference Room	A Safe Place
Shop & Sip Boutique Fundraiser	Dec. 5-10, 2022	Serenity K Boutique	A Safe Place
Designer Handbag Bingo	March 18, 2023	Villa Antonia Winery	MHOH
Tropical Paradise Gala	April 22, 2023	Corpus Christi Center, Imperial MO	A Safe Place
Be A Voice Gala	April 29, 2023	John B. Busch Brewery, Washington	CAC Union
CAC Comedy Show	Sept 16 or 23/Oct. 2023	Dew Drop Inn	CAC - Farmington

iii. MHOH Committee

