

# CAROLINA HEALTH CENTERS

## Risk Management Committee

April 16, 2024

### MINUTES

MEMBERS PRESENT (V), ABSENT EXCUSED (A), SICK (S):

√	Kim Anderson, Financial Analyst	√	Brooke Holloway, Chief Development and Corporate Compliance Officer
√	Derek Bannister, Family Medicine Practice Manager	√	Jessica Jacobs, Director of Behavioral Health
√	Steven Bradberry, System Administrator	√	Nikki Richard, Director of Clinical Support Services
√	Jessica Brock, Pediatric Practice Manager	√	Amy Satterwhite, Pharmacy Operations Manager
√	Erika Dorn, Pediatric Practice Clinical Coordinator	√	Locke Simons, Chief Medical Officer, chair
√	Joe Eiland, Facilities Manager	√	Natasha Johnson, Interim Director of Quality and Population Health
√	Lisa Gilmer, Revenue Cycle Manager		

- I. The meeting was called to order by Simons at 8:30am.
- II. Minutes from February 20, 2024 meeting approved by motion from Jacobs and seconded by Satterwhite.
- III. **Incident report review/summarization with noted trends or issues since last meeting:** Verbal review of incident report items. No worrisome trends, no action items needed.
- IV. **Current state assessment**
  1. Periodic and regular risk management assessment –
    - a. One for 2024. Last assessment done 2/20/2024.
    - b. Continue to monitor for need for edits to process and reporting.
  2. Annual report – Presented to board in July and to the QI Committee in August.
  3. Setting and tracking progress regarding annual risk management goals –  
Risk Management Goals –
    - (1) **Fully established RM plan** - Done
    - (2) **RM training plan** – Done and implemented. Have adding OB training requirement.
    - (3) **Annual staff training completion rate greater than 95% by end of year** –Completion rate for the last 12 months was 92.82% and YTD is 83.63%. No Exempt statuses but allow for training time.
    - (4) **Risk Management Assessments** – current
  4. Annual risk management training plan – Still need trainings for specific groups – ECRI recommendation for FTCA. FTCA requiring OB training for basically all employees – course imported into HS. Need to update for 2024.
- V. **Old business**
  1. E&M coding. Billing department staff now performing regular audits for compliance, reporting to providers and copying CMO for review. Billing department doing Lunch and Learn sessions with sites – most all sites and providers are interested. Plan is to visit every site. Will pursue basic Coding 101 sessions with each site to lay basics of coding. External audit completed but results not shared yet – will try to summarize results and share.
  2. Vaccine issues. Workflow issues caused some, or most, of these problems. Still with issues – counts are never correct, sometimes wrong vaccine dispensed. Very time-consuming process. Accuvax failed again at TCC and we lost about 70 vaccines from the event. Did we ever receive any reimbursement from TruMed?
  3. Timely encounter closure. CMS recommends 24-48 hours. New contract term and new bonus calculation item in place. Dashboard for providers to show their progress. A couple of strategies to be implemented to help the few offenders.
- VI. **New business**
- VII. **Risk Management Assessment** – Tool opened and reviewed with comments and edits added.

**Action items/information:**

**Next RMC meeting: June 18, 2024 – 8:30am**

The meeting was adjourned at 9:27am.

Locke E. Simons, MD  
Chief Medical Officer