

Minutes

Point Roberts Public Hospital District

Wednesday August 10, 2022

Call to Order:

The meeting was called to order at 7:00 p.m. by Stephen Falk, Commissioner (via Zoom)

Attending:

Commissioners: Stephen Falk, Sara Oggel, Noel Newbolt
Superintendent: Barbara Wayland
Financial Advisor: Paulette Ladner
Recording Secretary: Farrah Carsten

Introduction of Guests:

Dr. Sean Bozorgzadeh, Virginia Lester, Patrick Grubb – APB

Public Comment: None

Approval of Prior Minutes:

Approval of minutes from previous PRPHD Regular Meeting (July 13, 2022)

Motion: To approve minutes as presented. **Motion carried.**

Financial Report:

Financial Report:

Paulette Ladner presented the financial report. Current month payables \$16,669.01. Payroll is \$3,119.00.

There are 2 items to note: Barbara Wayland reimbursement for annual subscription (Office 365) = \$99 and Whatcom County Admin Services for Q2 payroll services = \$180

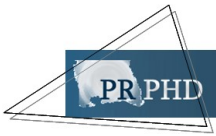
Bills presented for approval as follows:

Bills paid:

08/31/22 – SuperTrack Urgent Care PLLC = \$16,000
07/31/22 – Point Roberts Bookkeeping = \$224
08/01/22 – Bellingham Business Machine = \$37.70
08/01/22 – Whidbey Telecom = \$14.28
08/01/22 – Whatcom County FD #5 = \$114.03
08/07/22 - Barbara Wayland reimbursement = \$99
06/28/22 - Whatcom Co. Admin Svc (Q2 payroll) = \$180

Payroll as follows:

Heather Dixon – Cleaner = \$224
Barb Wayland – Superintendent = \$2,001
Farrah Carsten – Secretary = \$552
Sara Oggel – Commissioner = \$114
Stephen Falk – Commissioner = \$114
Noel Newbolt – Commissioner = \$114



Motion: To approve warrants and payroll for prior months' expenditures as presented. **Motion carried.**

Clinic Medical Director Update:



POINT ROBERTS CLINIC NUMBERS FOR JULY 2022

DATE	OV	LABS	PT/NR	TELEMED	PHYS EXAM	SKIN CLINIC	B12 & FLU SHOTS	TOTAL
5	6	5					2	13
7	11			3			1	16
11		2		2		7		11
12	7		2	1			1	11
14	12			1				13
18	5	6						11
19	13	3	1				1	18
21	10			2			1	13
25	5	2	1	3				11
26	7	4		1				12
28	12			2			1	15
TOTAL	91	22	4	14	0	7	7	145

2022

	OV	LABS	PT/NR	TELEMED	PHYS EXAM	SKIN CLINIC	B12 & FLU SHOTS	TOTAL
January	48	25	8	20	2	7	12	122
February	72	23	7	10	7	1	3	123
March	101	14	5	11	9	9	2	152
April	65	25		12	2	7	4	115
May	105	18	3	15	4	9	2	157
June	97	20	1	19	3	4	0	144

2021

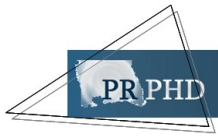
	OV	LABS	PT/NR	TELEMED	PHYS EXAM	SKIN CLINIC	B12 & FLU SHOTS	TOTAL
January	78	11	7	2	3	7		108
February	28	11	6		3	4		52
March	83	11	5	4	7	11		121
April	68	10	5	3	1	10		97
May	98	28	6	2	6	8		151
June	105	13	10		9	14		151
July	92	12	3		1	9		117
August	113	23	6	14	1	9		166
September	82	21	6	14				123
October	82	21	11	14		6		134
November	71	16	8	25		4	58	172
December	45	2	10	15	3	6	38	119

Total of 145 clinic visits for July which is higher than last year and higher than last month. Of those 145, there were 2 home visits for some of the patients that are in hospice care and cannot come into the clinic.

Dr. Bozorgzadeh applied on behalf of Point Roberts to receive Paxlovid and the portal is now live. Twenty treatment courses are on the way this week and more can be ordered. Everyone that receives treatment will be entered into the Department of Health portal. This is good news for Point Roberts in addition to the free antibiotic program. The clinic was able to offer 2 patients a full course of antibiotics for treatment and they were happy they didn't have to drive to a pharmacy for medication and that it was provided for free.

The pack is for 5 days of treatment. There are 3 tablets to take in the morning and 3 tablets in the evening for 5 days. Paxlovid comes in 2 doses. One is for patients with normal renal function and the other is for patients with reduced renal function.

Dr. Bozorgzadeh shared more information in regards to Paxlovid. It is an antiviral medication made up of 2 different medications in the same packet. Nirmatrelvir acts as an orally active 3C-like protease inhibitor, in other words it prevents the virus from making particles it needs to replicate and attach itself to the host. The other one which is ritonavir, prevents the liver from clearing the medication out of your system.



Anyone who is 12 years old and over 88 pounds is able to take this medication. There are guidelines in regards to renal function. Your kidneys filter your blood by removing waste and extra water to make urine. The estimate glomerular filtration rate (eGFR) shows how well the kidneys are filtering. No dosage adjustment is needed in patients with normal eGFR (≥ 60 to < 90 mL/min). In patients with mild or minimal renal impairment eGFR (≥ 30 to < 60 mL/min), the dosage of Paxlovid is lowered. Paxlovid is not recommended in patients with severe renal impairment (eGFR < 30 mL/min).

There are certain types of medications that can cause serious or life-threatening side effects if taken with Paxlovid. For example, cholesterol medications such as simvastatin, lovastatin, certain heart and epilepsy medications should not be taken with Paxlovid. Paxlovid cannot be dose adjusted but there may be times when the doctor will advise to stop taking a certain medication in order to start treatment with Paxlovid.

Dr. Bozorgzadeh wanted to bring this to everyone's attention because even though this is being provided by the government for free, it requires an office visit and full evaluation before Paxlovid can be prescribed. You must also have had a positive COVID-19 test result and be at high risk for developing severe COVID-19. That means you must either have certain underlying conditions (including cancer, diabetes, obesity, or others) or be 65 or older.

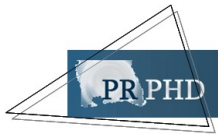
Dr. Bozorgzadeh doesn't want to give the impression to the public that just because it's available through the government program, that it will be prescribed to everyone that has done their own self-assessment. Paxlovid has not been studied with pregnancy and lactation, there is no experience using the drug in these populations. Keep in mind this is an emergency release and has not been tested.

Anyone who calls the clinic will be given an appointment (telemedicine), an evaluation will be completed. If the patient is a candidate, the logistics of receiving the medication will be taken care of by the clinic.

For more information:

<https://www.yalemedicine.org/news/13-things-to-know-paxlovid-covid-19>

<https://www.drugs.com/dosage/paxlovid.html>



The billing service that SuperTrack uses is Evans Medical Billing, which is locally owned by Karen Evans, a retired nurse. Karen has been working with Dr. Bozorgzadeh and Dr. Lary for 10 years. SuperTrack doesn't send medical bills to collections per their policy, that's their part in helping the community. There are some idiosyncrasies in insurance company billing requirements and because there are so many, it's very difficult to stay up to date and comply with all of them. Karen and her team try to inspect bills as they go out however 1 or 2 may fall through the cracks, the approach is to find it and fix it. One issue is that SuperTrack is categorized or labelled as an urgent care facility at both the Bellingham and Point Roberts locations. Primary care is only offered at the Point Roberts location. The pricing scheme is the same for urgent and for primary care. If the facility code isn't changed, some insurance companies will charge the patient a higher deductible for an urgent care visit. Because there are a higher number of primary care patients being seen at the clinic, Karen and her team have changed the facility billing code to primary care by default for the Point Roberts clinic. The goal is to minimize billing problems for patients going forward. Patients should call the clinic directly with details if any issues arise so it can be resolved.

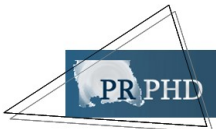
Stephen asked if there was a way that Karen could search against the records to look for the coding issues historically. According to Dr. Bozorgzadeh, Karen will be generating some type of report to see if there are any outstanding discrepancies on past billing. He also said if it is a repetitive pattern they would allocate the resources, the time and the money to investigate. It's a major effort to go back 2 or 3 years to look for only one case that was coded incorrectly.

In general, if the clinic is allocated as an urgent care facility and every patient that walks in is a primary care patient, the code will need to be manually changed every time versus allocating the clinic to being primary care and changing the code manually to an urgent care visit when needed.

Dr. Bozorgzadeh suggested to the commission that they could invite Karen Evans to a meeting to answer any questions regarding the billing and coding issues.

Superintendent's Report:

- Barbara needed to separate phone lines at her residence. The hospital district has just a voicemail instead of a phone line which is more cost efficient. In the time she has had the phone line, she has received approximately 6 messages total (the district phone line was there for legality reasons). The number (5040) has not changed.
- The SAO will be contacted for which of the statute wording for the records request policy must be included.
- Barbara had John Beals complete updates for the district computer since it was running very slow.



Other:

SuperTrack Contract Renewal: Dr. Bozorgzadeh would like to amend the agreement to a 2-year term. In Bellingham there are multiple practitioners within a 1-year contract. The 2-year agreement will cover SuperTrack when they need to be at the Point Roberts location. The current contract cycles are out of sync and it makes it difficult to recruit the right candidates especially when all of the doctors are at the Point Roberts location 3 days a week and they need coverage at the Bellingham location. The contract was initially for 2 years.

Stephen stated he prefers the current arrangement of the 1-year even though the district has no intention of doing anything other than the renewal term. It allows flexibility on both sides should there be a need to terminate. It keeps both parties on their toes.

Barbara noted that the contract states either party has to give notice of termination within 6 months. If the 2-year window is in June, the district can't cancel in July. Does anything state you have to give the cancellation on a specific date? If it was something egregious, the district would give notice ASAP.

Stephen responded that although he didn't read in depth in regards to this part of the contract, he had hoped either side can terminate immediately. For example, if the district stopped paying or if SuperTrack stopped providing medicine. He did appreciate Dr. Bozorgzadeh's point that practical reasons could clutter up employment contracts. Stephen then asked for comments from the other commissioners.

Noel stated her view is if it isn't broke, don't fix it. Keep it status quo.

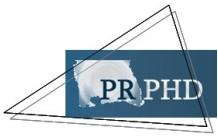
Sara responded that she sees both sides and that it would leave people who are employed in a compromised position. but she would rather defer to the next meeting to discuss this further.

Stephen stated that further discussion could be had at the meeting.

Website update: Farrah requested Barbara's photo to be sent to her in order to update her bio.

Next Regular Meeting: Wednesday September 14th, 2022 @ 7:00 pm via ZOOM

Meeting adjourned: 8:04 p.m.



Minutes approved verbally at the following month's ZOOM meeting

Stephen Falk

Sara Oggel

Noel Newbolt

Farrah Carsten