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COUNTY OF SANTA FE  
STATE OF NEW MEXICO } ss  
I HEREBY CERTIFY THAT THIS INSTRUMENT WAS FILED  
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PAGE 424-420 OF THE RECORDS OF  
SANTA FE COUNTY

**SANTA FE COUNTY**

REBECCA BUSTAMANTE  
COUNTY CLERK, SANTA FE COUNTY, N.M.

**JOINT MEETING OF THE**

DEPUTY

**BOARD OF COUNTY COMMISSIONERS AND**

**THE HEALTH PLANNING AND POLICY COMMISSION**

2489412

November 21, 2002

This special joint meeting of the Santa Fe Board of County Commissioners and the Health Policy and Planning Commission was called to order at approximately 3:20 p.m. by Commission Vice Chairman Jack Sullivan, in the Santa Fe County Commission Chambers, Santa Fe, New Mexico.

Roll was called establishing the presence of a quorum in both bodies as follows:

**Commission Members Present:**

Commissioner Paul Duran, Chairman  
Commissioner Paul Campos  
Commissioner Jack Sullivan  
Commissioner José Varela López

**Commission Members Absent:**

Commissioner Marcos Trujillo

**HPPC Members Present:**

Jaime Estremera-Fitzgerald, Chair  
Fred Sandoval, Vice Chair  
Kevin Henson  
Rebecca Frenkel  
Robert Taaffe  
Dr. Arturo Gonzales [late arrival]  
Dr. Mario Pacheco  
Larry Martinez  
Ron Hale  
Allan Wheeler  
Donna Lockridge  
Jack White

**HPPC Members Absent:**

Brad Hill  
Dr. Cleve Pardu  
Valery Henderson

Commenting he had to leave the meeting early Chairman Duran asked Commissioner Sullivan to chair the meeting, Commissioner Sullivan welcomed Commissioner-elect Harry Montoya to the proceedings.

# AMENDED AGENDA

SANTA FE BOARD OF COUNTY COMMISSIONERS (BCC)  
SANTA FE COUNTY HEALTH POLICY AND PLANNING COMMISSION (HPPC)  
SPECIAL JOINT MEETING  
SANTA FE COUNTY COURTHOUSE, 2nd FLOOR  
BOARD OF COUNTY COMMISSION CHAMBERS  
NOVEMBER 21, 2002  
3:00-6:00PM

2489413

- 1) Roll Call
- 2) Approval of Agenda:
- 3) Old Business:
  - A) Review of the Business Plan for the Purchase of a Mobile Medical Van and allocating funding from the Memorandum of Agreement between St. Vincent's and Santa Fe County. (SF County Staff)
- 4) New Business:
  - A) Review Recommendations and Request Direction on Negotiations for Entering into FY-2004 Memorandum of Agreement between Santa Fe County and St. Vincent Hospital. (HPPC Commissioners/Staff)
    - 1) Staff Review of Recommendations to Date.
    - 2) Discussion and Direction to Staff from BCC.
  - B) Review of Memorandum of Agreement, Fourth Amendment Section VI General Provisions, Paragraph 10, St. Vincent's Accounting Report. (St. Vincent Staff)
- 6) Public Comment:
- 7) Announcements: (Information)
- 8) Adjournment:

**APPROVAL OF THE AGENDA**

2489414

County Manager Estevan Lopez noted that the agenda was listed as an amended agenda due to language changes and there were no additional changes.

Commissioner Duran moved to approve the agenda and his motion was seconded by Commissioner Campos. The motion passed unanimously.

**OLD BUSINESS**

**Review of the business plan for the purchase of a mobile medical van and allocating funding from the memorandum of agreement between St. Vincent's and Santa Fe County**

County Health Director Steve Shepherd stated that over the past months a team has been working with a contractor to develop a business plan for the medical van, which will be a partnership between Santa Fe County's Health Division, the Fire Department and St. Vincent Hospital. Services will be provided with an independent provider and the County will ultimately own the vehicle. It will be stored and maintained by the Fire Department. He welcomed the participation of the Fire Department since it will assist in emergency preparedness and disasters. This will make some reimbursements possible.

The van services will be principally for screening, testing and referral, rather than health care per se. Indigent funding will be available if needed.

Dr. Mario Pacheco noted that the Promotoras will be used in the screening and referrals. Primary care will come from existing clinics which will avoid liability issues. The van will be more like a traveling health fair and will help with Medicaid enrollment.

Commissioner Sullivan asked if the van would have a cardiac defibrillator. Dr. Pacheco said these are present at many facilities and reiterated the intention was not to provide primary care. Mr. Shepherd added that when the van is used for disaster preparedness and multi-casualty incidents, equipment will be available.

Referring to the more remote areas of the county, Commissioner Duran asked if diagnoses could be made in the van. Dr. Pacheco indicated that to avoid the van being the principal and permanent provider to people in the county, services would be in the nature of referrals. "Clinical work will always win out over the prevention work."

Dr. Arturo Gonzales said the RFP determines the nature of the service. Referrals should be made to a clinic that can provide continuity of care.

Rebecca Frenkel gave examples of liability accruing from incorrect diagnoses, but pointed out that immunization is an important component, given that less the 50 percent of two-year olds have had all their shots. She said the van can provide education on early care,

particularly pre-natal.

2489415

A discussion ensued about AIDS screening. Commissioner Sullivan noted that there is now a test that can be done in 20 minutes. Donna Lockridge pointed out that pre- and post-test counseling is essential with AIDS screening. Many people are lost in follow-up or do not understand Medicaid eligibility. She said diagnosis is a medico-legal concept.

Dr. Pacheco noted that with pregnancy testing, negative results can be a springboard to education.

Ron Hale stated that the New Mexico Department of Health has an outreach van for HIV.

Mr. Shepherd pointed out that the proposed budget did not include operation. This will be worked out after the RFPs are in, and at that point the van will come before the Commission again. He solicited comments from the Commission. Kevin Henson will check out the van.

Tony Flores from the Project Management Division noted that the budgeting was approved and earmarked in October. The appropriation of \$152,000 expires June, 30, 2003 so there is a critical time factor.

Mr. Henson indicated that due to its role in disaster preparedness, \$20,000 to \$36,000 in funding could come to New Mexico from the Homeland Security program. Reimbursement funding is contingent on the willingness to share the van with other agencies.

Indicating his support for the business plan, Fred Sandoval cited the outreach model and noted it addresses the goal of access. He pointed out the need for alcohol, drug and depression screening. Agreements should be established so that agencies or clinics will be prepared for referrals. The plans should be detailed.

Jaime Estremera-Fitzgerald agreed with Mr. Sandoval and stated he was pleased with the cooperation between the hospital and the County.

Mr. Hale noted no specific mention was made of the elderly, who are often unable to access health care due to transportation problems.

Mr. Lopez said this item was put on the agenda for information and so that the feedback could be incorporated into the business plan. He said the memorandum of agreement and final agreement will be brought forward on December 10<sup>th</sup>.

[Commissioner Duran left the meeting at this point.]

**NEW BUSINESS**

2489416

**Review recommendation and request direction on negotiations for entering into FY 2004 memorandum of agreement between Santa Fe County and St. Vincent Hospital: Staff review of recommendations to date and discussion and direction to staff from BCC**

Mr. Estremera-Fitzgerald stated this is a major step and the HPPC is pleased with the input from everyone. He thanked the Commissioners and the staff.

Mr. Shepherd listed the recommendations that have been brought forward:

- All MOA projects need to have outcome-based evaluation. This was agreed to by everyone.
- St. Vincent Hospital should hire a dedicated staff member to support MOA and related activities. The hospital believes they are going to satisfy this requirement through staff reorganization.
- The BCC should appoint two staff or community members to the SVH Board of Trustees. The hospital has concerns about conflicts of interest but they are open to discussing this issue. Commissioner Sullivan said the situation would be similar to St. Vincent making recommendations to the County on who sits on the HPPC. He understood there were vacancies on the board and recognized the ultimate decision was the hospital's. Dr. Gary Buff said the primary concern about conflict of interest was having a County staff member or Commissioner on the board. However as just stated by Commissioner Sullivan, he felt there would be a positive response.
- Regarding expenditures in FY04, a detailed breakdown was provided in the packet. HPPC and County staff support increases to existing expenditures. The Progress Review Committee (PRC) advocates reallocation of expenditures to meet internal needs first. SVH does not want the increase to exceed the overall increase in Sole Community Provider funds.
- A method should be found to reimburse specialist and trauma physicians who provide services and follow-up appointments to indigent patients. All parties agreed to this and County staff suggests using Project Access which is a non-profit organization. Mr. Shepherd noted there are federal restrictions on those payments. Ms. Frenkel noted that demands on indigent funds are on the rise and the subcommittee plans to issue a report in March or April to set standards, such as Medicare plus 50 percent. She encouraged the use of Sole Community Provider (SCP) funds. Dr. Gonzales stated with greater prevention and screening better continuity of care can be established. Commissioner Sullivan said he would like to see data on how much of this service is provided and suggested recognizing the physicians publicly. Mr. Shepherd pointed out there is reimbursement for life-threatening problems. He was reluctant to place an additional 200 vendors on the list. Mr. Estremera-Fitzgerald noted that the number of uninsured was growing. Dr. Buff acknowledged there

are legal constraints, namely the Stark Law, but there may be a way of paying claims through a separate fund.

- Consolidate a number of programs into one. The HPPC does not agree with this recommendation preferring to keep the line items separate. County staff believes some variation of this could work. Commissioner Sullivan advocated increasing accountability while Mr. Shepherd said this could simplify accounting and increase flexibility.
- Mention “A Call to Action” as an integral part of the decision making process for the MOA. All parties agree to this recommendation.

Commissioner Sullivan asked if the concern remained regarding losing Sole Community Provider status, or if legislation has eliminated that concern. Dr. Buff said the legislature has made it possible for other hospitals to exist within 35 miles. The status won't be lost automatically if there is a competing hospital but the feds review the question every two years. It is still possible to lose the Medicare portion, which amounts to approximately \$700,000. Mr. Martinez said it is always possible to lose the SCP funds.

Mr. Estremera-Fitzgerald noted that federal regulations are subject to change, but the New Mexico congressional delegation and the state are committed to maintaining SCP status. Mr. Shepherd said the loss would be a “huge disaster.”

**Review of Memorandum of Agreement, Fourth Amendment, Section VI General Provisions, Paragraph 10, St. Vincent's Accounting Report**

Dr. Buff referred to the memo in the packet which includes a proposed format for the reports. He solicited feedback and said an independent auditor will verify the numbers coming out of the patient care system. He pointed out that one check is written to the County for their expenditures. The MOA programs are tracked monthly. The third and fourth categories chart the uncompensated patient care from county and non-county residents. Additionally, uncompensated care is broken down by department.

Dr. Buff stressed that the uncompensated care is delineated by cost of care rather than the charges. In response to a question from Ms. Frenkel, Dr. Buff said this does not include indigent funds. He noted that approved claims could be included but the numbers will never match anything.

Commissioner Sullivan asked if the claims were reviewed under the County's criteria. Mr. Shepherd said they were; those claims that don't qualify under the Indigent Fund are still tracked. He did not know if there were federal criteria for Sole Community Providers.

Bonnie White, from St. Vincent's Decision Support stated “uninsured” includes anyone without insurance—those that qualify for the indigent program, charity care and self-payers. The amounts here are net of any reimbursement received. She stressed every attempt is made to

Mr. Taaffe asked if the numbers included adjustments. Ms. White said anyone with a payer source is not included in that number.

Dr. Buff indicated that the claims system was a "relic" and irrelevant to today's needs. He emphasized that it creates confusion. Mr. Estremera-Fitzgerald said there are progressive counties with MOA agreements that are coming to see the claims system as too costly. He said NACo was concerned about this.

Commissioner Sullivan doubted that accountability could be achieved through seven line items. Dr. Buff said the goal is to find a reporting system that the County is comfortable with. He noted that the hospital is audited annually.

Ms. Frenkel said there are in effect two Sole Community Provider funds, the usual and the supplemental. Dr. Buff said the figures include both kinds.

Saying he understood the claims process was cumbersome, Dr. Gonzales asked if were possible to get data on the uncompensated community care as well as the patient care. Dr. Buff said that requirement would have to be included in the contracts of the various providers and could not be done immediately. Dr. Gonzales asked how outcomes could be measured and Dr. Buff said that has not yet been discussed.

Commissioner Sullivan said it is important to distinguish between statistical information and accounting information.

Mr. Sandoval said there are many ways of contracting money out and it is important to find a good system. "The amount of care provided is always going to outdistance the amount of money paid in."

County Finance Director Katherine Miller stated that she recently met with the Chief Financial Officer of St. Vincent's. She pointed out that the Sole Community Provider funding is about \$13.5 million, of which \$3.3 million is MOA-related. The entire Sole Community is not under contract. Uninsured care claims are made up of all costs including overhead and indirect costs. She brought up the question of why more patients are not qualifying for indigent funding.

Referring to the breakdown showing costs for county residents and non-county residents, Mr. Taaffe noted that the cost per patient was greater for out of county residents. Dr. Buff explained that this was due to patients coming into Santa Fe County for more serious conditions and longer stays.

Returning to the issue of uncompensated care, Dr. Buff stated St. Vincent's provides \$3.1 million more in care and services to the region than what is received in SCP funds. He said this is included in the report since they are required to track "community contribution and

benefit." The intent is for SCP funds to pay for that but they do not cover all the needs. Thus that has to come out of their operations budget.

Commissioner Sullivan noted that the \$46,000 listed as uncompensated was actually compensated fairly well. Dr. Buff said initially they are not compensated but eventually at least partial payments are made. He said this reflects standard industry language.

Ms. White and Ms. Miller explained some of the accounting intricacies in the charts.

Mr. Estremera-Fitzgerald pointed out that that Santa Fe County was a model in the state and the benefits that the County is receiving due to the partnership are considerable. He recognized that the costs may require tweaking. He also noted that the change of administration may free up some funding.

Commissioner Sullivan said strong ties with the hospital are essential and lead to more federal funding since federal agencies appreciate strong oversight.

#### ANNOUNCEMENTS

Mr. Shepherd said a special HPPC meeting will be held on December 5<sup>th</sup> and it is incumbent on staff, St. Vincent's and the committee to come up with solid recommendations to bring to the BCC on December 10<sup>th</sup>. He requested permission from the Commission to look at the claims process for SCP in terms of the legalities and to give a report on that.

Commissioner Sullivan asked for a more detailed worksheet prior to examining the claims process, with an eye to determining which categories are not being covered.

CHDD Director Robert Anaya opined that the claims process was outdated and asked that the resources of the HPPC be used immediately to come up with a more refined spreadsheet.

Commissioner Sullivan said the direction should be to get better accountability for the costs that don't show up under the claims process and to get an MOA signed.

Dr. Gonzales said he was impressed with Ms. Miller's suggestion on working together to find where the dollars are going.

Mr. Estremera-Fitzgerald indicated the Commissioners are essential in getting the MOA approved before December 12<sup>th</sup>.

Commissioner Sullivan reminded the participants that names for the St. Vincent board were being sought and asked for their recommendations.

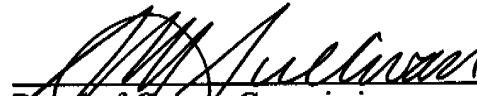


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**ADJOURNMENT**

Commission Sullivan declared this meeting adjourned at approximately 6:10 p.m.

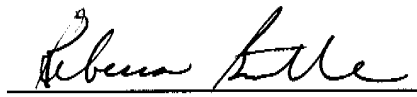
Approved by:

  
Board of County Commissioners  
Jack Sullivan, Vice Chairman

Respectfully submitted:

  
Debbie Doyle, Wordswork

ATTEST TO:

  
REBECCA BUSTAMANTE  
SANTA FE COUNTY CLERK

