

# Meeting Notes

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**Attendance:** Becky Secore, Jeanne Edevold Larson and Wendy Potraz

**Project Consultant/Facilitator:** Ashli Bowen

Big Fork is combined with the hospital. Population 446 – only CHC (and clinic) in a 40 mile radius  
Dental is independent but on site

Scenic River has 5 medical sites and a preventive dental clinic in Cook and Floodwood  
Cook site is with the Cook Hospital  
They use Telemental (University of Duluth) at 3 of their access point

Reviewed their EMR system – GE Centricity for medical and Dentrax for dental (dental and medical databases are separate – common platforms)  
GE doesn't provide patient portal – Intuit, Kryptic – portals  
Linklogic holds the documents  
Unified database – system-wide  
Helps with Quality Improvement – extract data for reporting (MN common Goals, organizational goals and site goals – provider can see collective outcomes for their patients)  
They use Dragon Medical for voice recognition for transcribing records  
Hospital helps with coding  
Provides a protocol assessment for the patients  
Patient instructions/recommendations can be printed out along with a visit summary  
Electronic RX or print  
Care alerts  
Flags on desktop

Behavioral health is done on a referral process. Provider may dictate a letter to the mental health care provider documenting the patient's last appointment

Hospital does lab work and sends it to their EMR

They are in just implementing a care coordination system and hired a care coordinator (Northeastern MN test project). Patient Navigator – LPN – doesn't get reimbursed – some health insurances may allow for reimbursement  
Offer gas vouchers to patients who have transportation issues.

24/7 requirement is difficult

They have patient huddles to discuss patient if needed, use resource manuals and referral coordinator.

Patient mix – 26% uninsured, 23% Medicaid, 22% Medicare and 29% commercial insurance

Section 330 Federal Grant makes up about 21% of the overall budget

While the system as a whole can only get \$650,000 of the Section 330 funding, there are many other funding opportunities for FQHCs.

Isn't keen on the Health Care Home model because of the appropriation – doesn't pay for itself.

Providers also work at the hospital – contract

Big Fork - Medical Director (.2 admin) also provides direct care