



# Cherokee Nation Tribal Council Health Committee Report

Claremore Indian Hospital

Month/Year of the report: October 2019

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## Accomplishments:

- **Staffing:** Announcements still out for General Surgeon and a midwife.
- **Visits:** Outpatient visits for October down 9.5% over the same period the previous year.
- **Revenues:** Revenues for FY2020 decreased 14.0% over the same period the previous year.

## Future Plans / New Initiatives:

- New Services:
  - Orthopedic patients continue to be sent to Tulsa at The Orthopedic Center.
  - Flu room open 8am - 4pm Monday through Friday

## Workload:

	<u>Actual numbers/month</u>		<u>CN</u>
Outpatient visits down	9.5%	25,376	13,753/ (6972 patients)
Dental visits down	13.6%	887	531
Admissions up	8.5%	77	43
Newborns	0.0%	27	18
New charts		463	
Reactivated Charts		62	

These statistics are compared to FY2019 statistics for the same time period. (October)  
Occupancy rate for October 2019: 19.0%

### **Third Party Collections:**

#### October collections

Medicare:	\$ 697,496.61
Medicaid:	974,760.56
Private Insurance:	891,897.30
V.A.	<u>5,230.12</u>
	\$ 2,569,384.59

Year-to-date collections for FY 2020: \$ 2,569,930.97

Amount billed for October 2019: \$ 6.6 million

Collections are down compared to FY2019 collections for same time period. \$ 418,456.51

Percentage of account receivables pending for claims > 120+ days: 7%

### **PRC Activities:**

#### October cases

		<u>CN Patients</u>
Funded:	375 cases: \$ 1,230,850.00	173
Denials:	428 cases: \$ 757,683.00	165
Deferred:	505 cases: \$ 510,146.00	227
CIH clinics:	18	
Ortho	20	

Files to Committee 1346



# Health Committee Report

December 2019



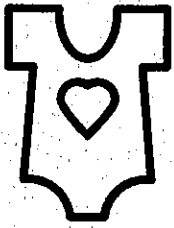
## Highlights

The Community Flu Clinic provided 2,522 flu vaccinations to members of our community with support from Nursing, Facilities Management, Pharmacy, Patient Access Management, Housekeeping, Food Services, and Health IT.

*"The only time I had to have a rapid response was last Friday. I had no idea this was provided. The doctor was very professional, concerned, calming, and assured me he could get my blood pressure down. I am so thankful we have the clinic."*

-Patient compliment regarding care provided at  
Wilma P. Mankiller Health Center

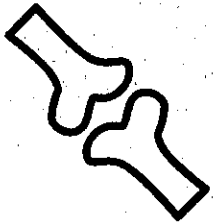
# Health Committee Report



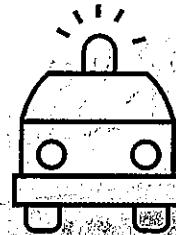
79 babies were delivered at Hastings Hospital during October



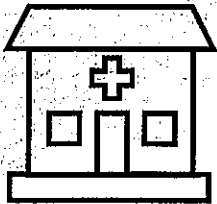
A total of 6,671 have participated in the WINGS races for 2019



436 surgical procedures performed at Hastings Hospital



637 clients were served by the CN-EMS program



5,916 patients were seen at the ED/Urgent Care the Hastings Hospital



148 Cherokee women were served by the Breast & Cervical Cancer screening program



339 work orders were completed for October

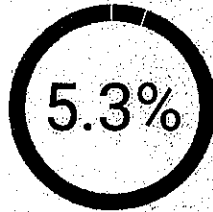


986 patients have received Dietary Services this year.

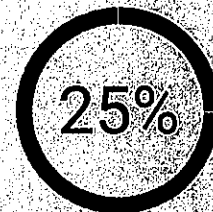
# Health Committee Report

## Provider Recruitment

CNHS Provider  
Vacancy Rate



IHS Provider  
Vacancy Rate  
Benchmark



## Contract Health

Projected annual  
expense

64.5 Million

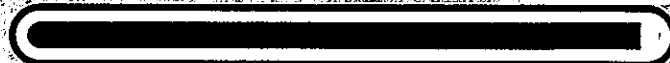
Projected balance  
at year end

-8.2 Million

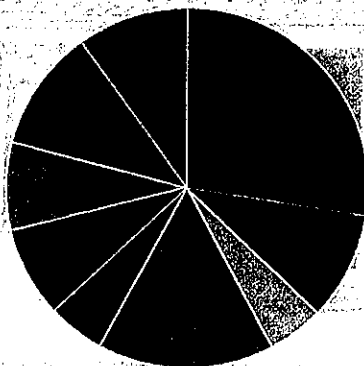
0 10 20 30 40 50 60 70

97%

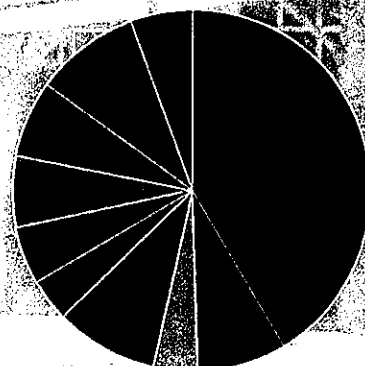
## Referral Approval Rate



### Monthly Visits by Location



### YTD CHS Spend by Location

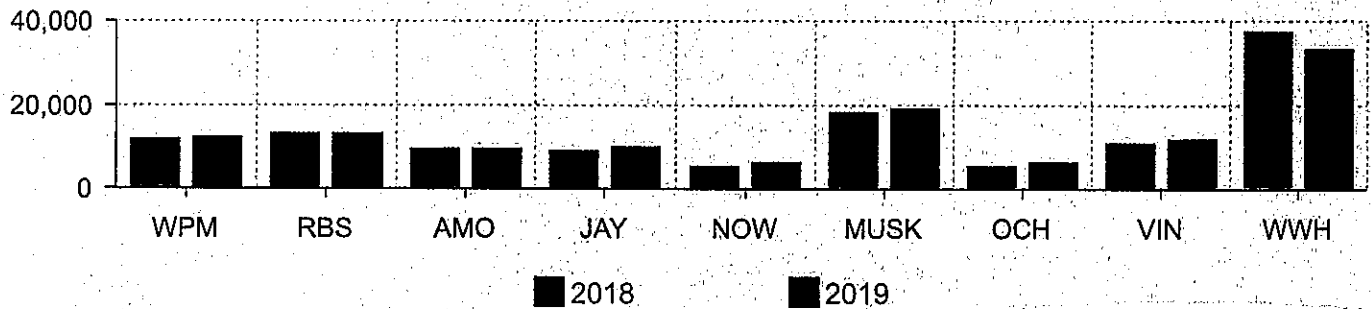


● WWH	27.4%	● VIN	9.6%
● OCH	5.1%	● TRHC	15.8%
● NOW	5.1%	● JAY	8.1%
● AMO	7.9%	● RBS	10.9%
● WPM	10.0%		

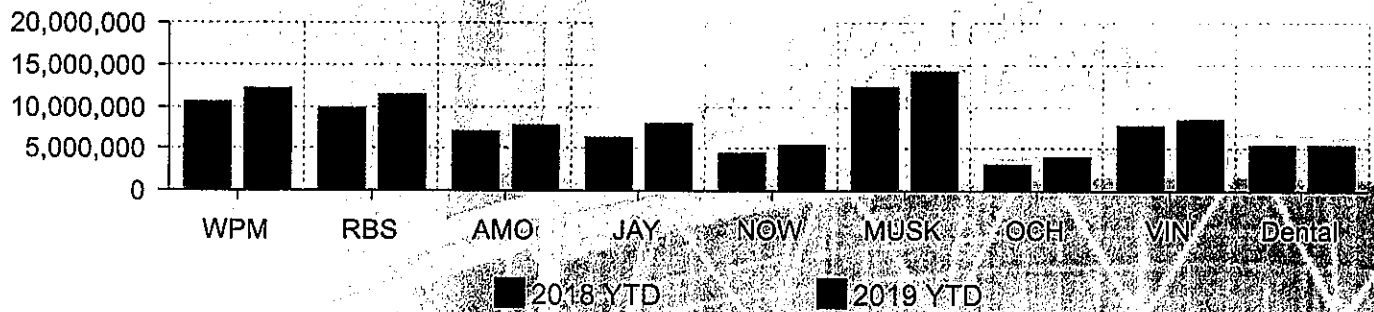
● WWH	41.4%	● VIN	8.0%
● OCH	4.0%	● TRHC	9.2%
● NOW	3.9%	● JAY	5.1%
● AMO	6.4%	● RBS	6.9%
● WPM	9.4%	● CIH	5.6%

# Patient Visits and Revenue

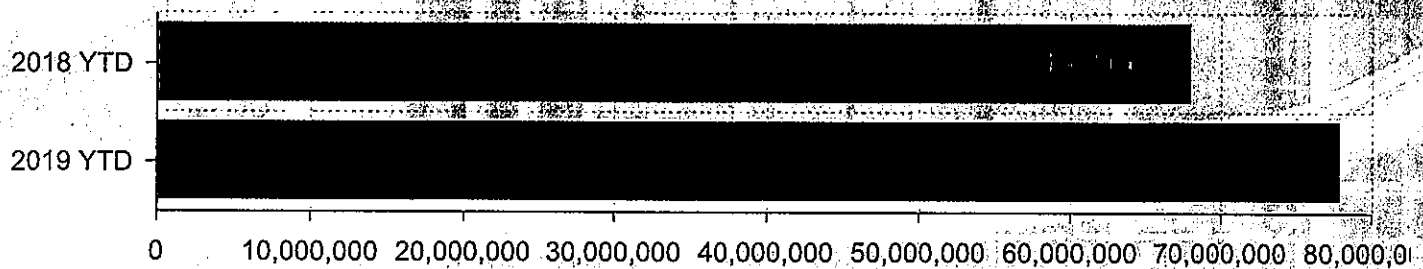
**Ambulatory Care Visits: Monthly**



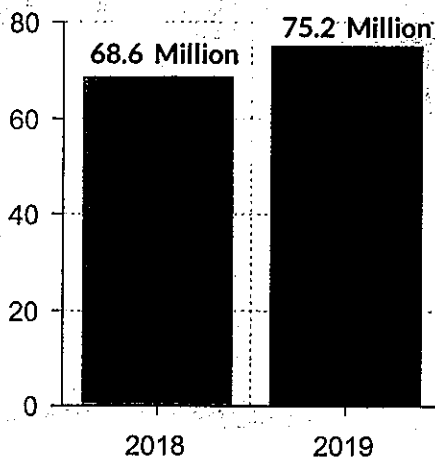
**Ambulatory Care 3rd Party Revenue: Year to Date**



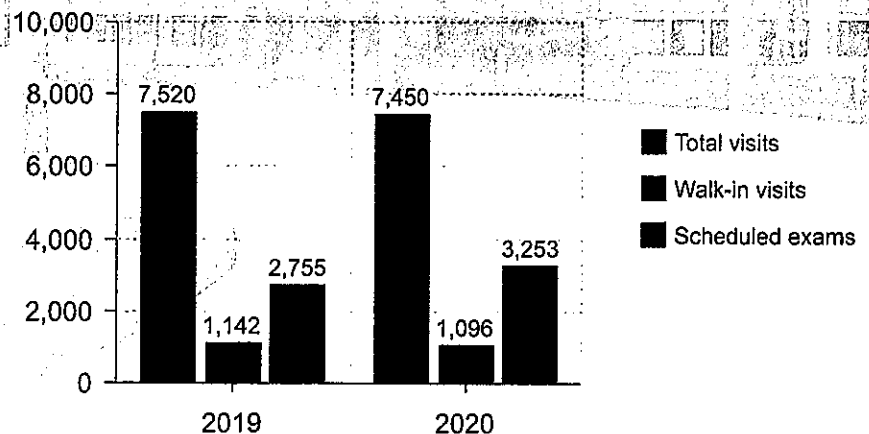
**Health Center and Dental Combined Revenue: Year to Date**



**WWH 3rd Party Revenue Year to Date**

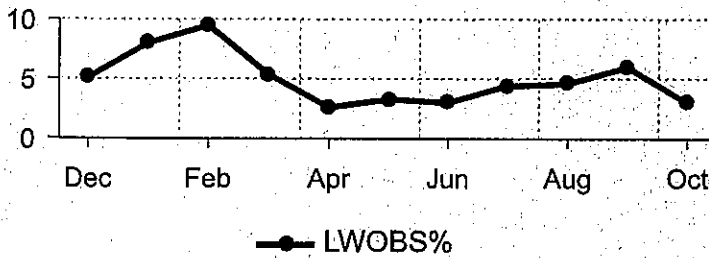


**Dental Services: Monthly**

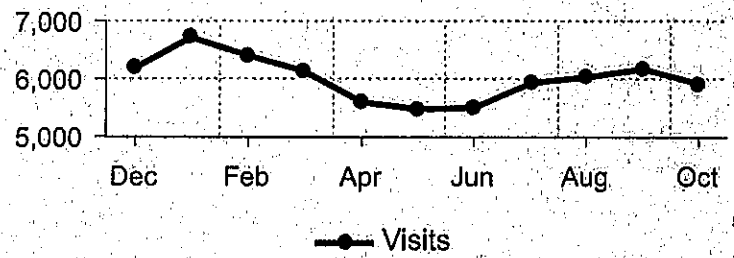


# Health Committee Service Summary

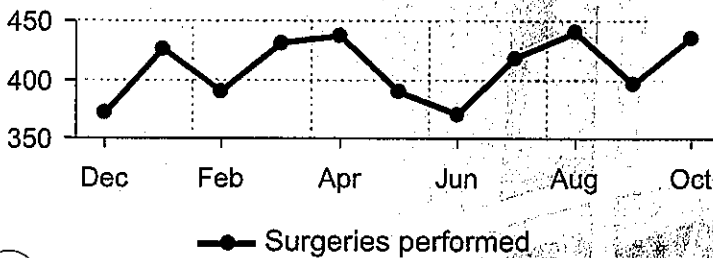
**ED/UC Left without being seen**



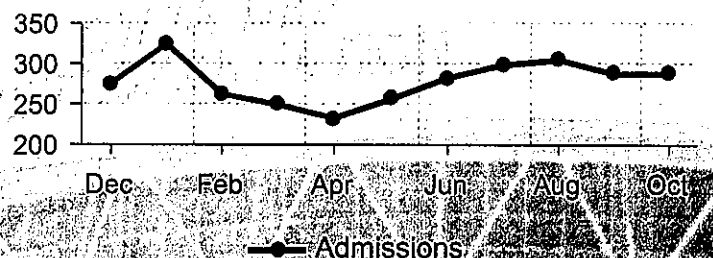
**ED/UC service delivered**



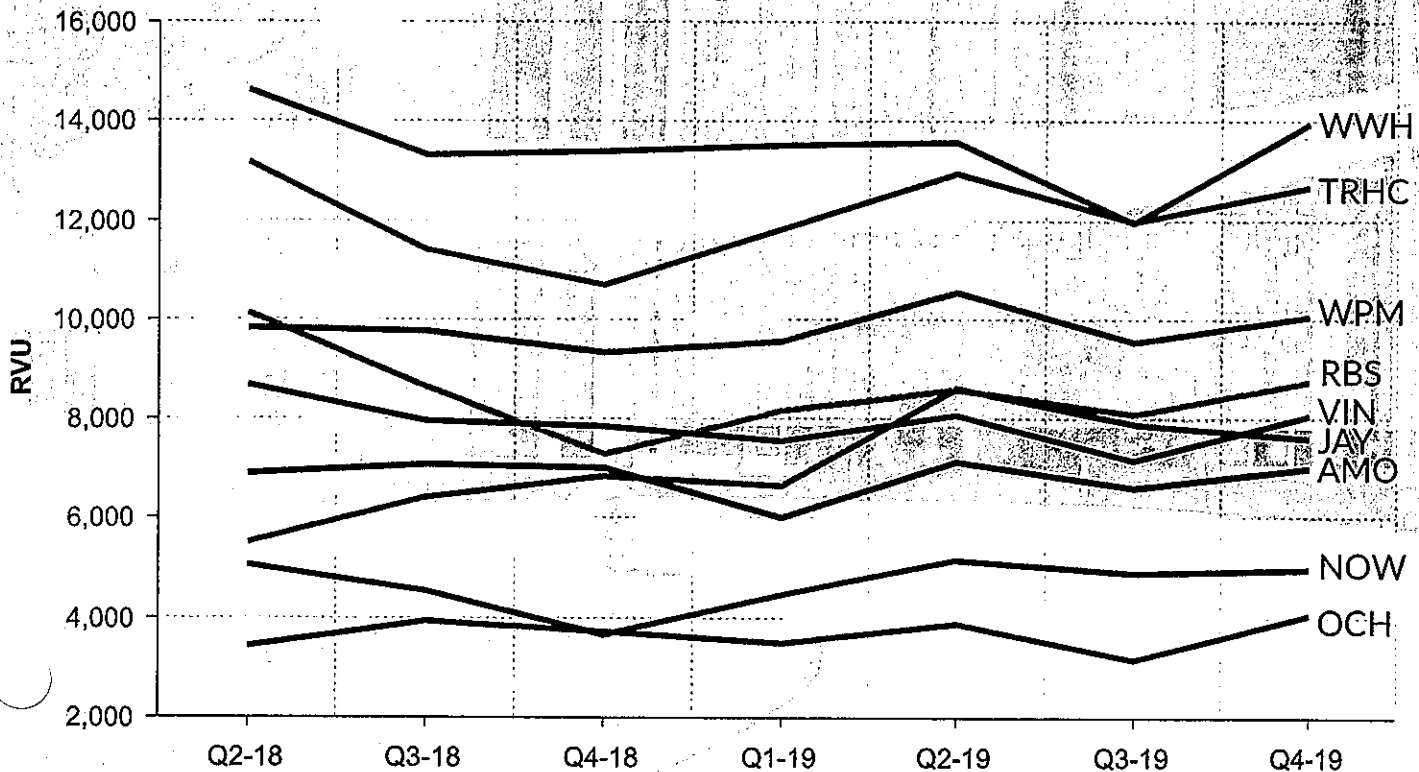
**WWH General Surgery**



**WWH Inpatient Care**

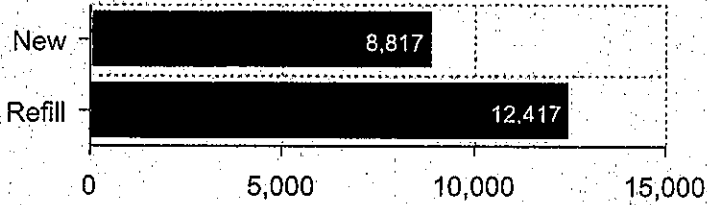


**Service Delivered by Quarter**

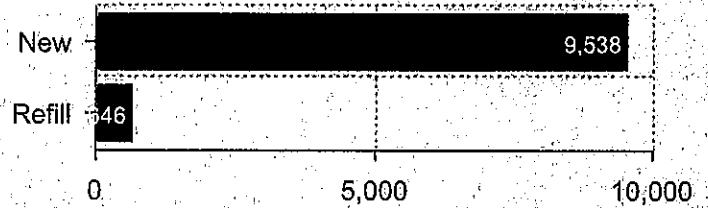


# Prescriptions Filled by Site

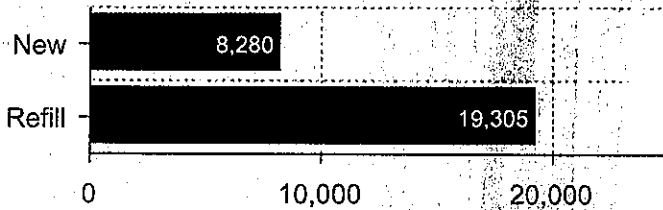
**WWH Main**



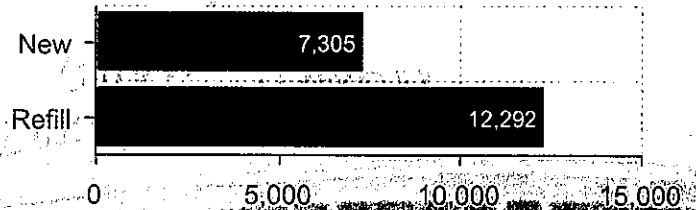
**WWH ED/UC**



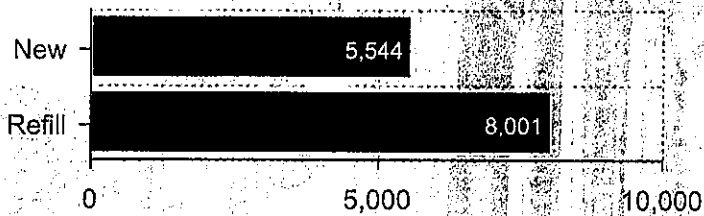
**Muskogee**



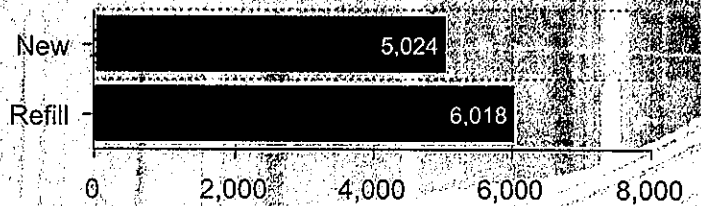
**Sallisaw**



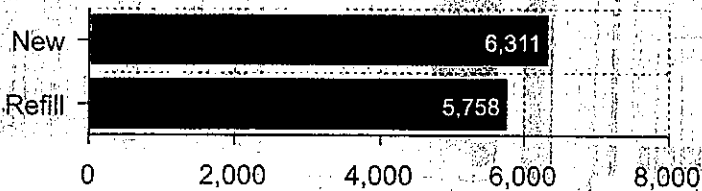
**Vinita**



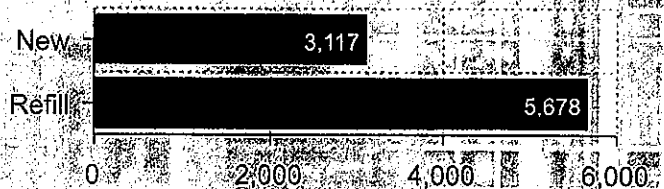
**Salina**



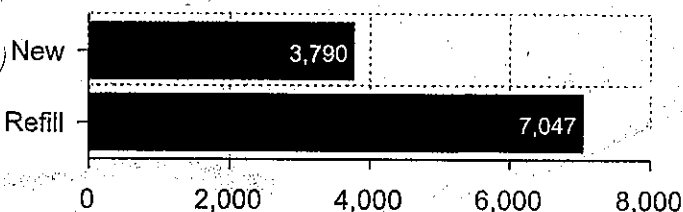
**Jay**



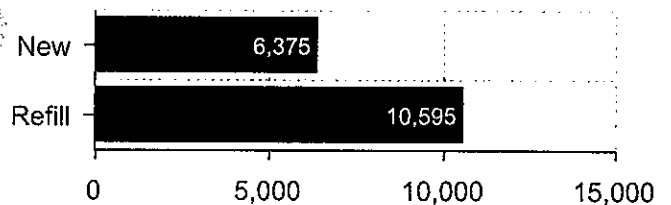
**Ochelata**



**Nowata**



**Stilwell**







Cherokee Nation Home Health Services, Inc.

Home Health

Hospice

Outreach

Home Health:

Census as of 11/30/2019-229

Native Americans served 09/01/2019-11/30/2019-211

Hospice:

Census as of 11/30/2019-23

Native Americans served 09/01/2019-11/30/2019-29

Outreach:

Census as of 5/23/2019-756

Total All employees: 172 (56 fulltime; 116 part-time)

Native American: 103

Cherokee: 86

*Merry Christmas and Happy New Year!*



# Cherokee Elder Care

*a community PACE program*

1387 W 4th Street  
Tahlequah OK 74464  
<http://eldercare.cherokee.org>

Phone: 918-453-5554  
Fax: 918-431-4112  
[eldercare@cherokee.org](mailto:eldercare@cherokee.org)

December 3, 2019

TO: Councilwoman Mary Baker Shaw, Chairman of Health Committee,  
and all Members of the Health Committee.

FROM: Cherokee Nation Comprehensive Care Agency, d.b.a. Cherokee Elder  
Care.

SUBJECT: October 31, 2019 stats, and a brief summary of Cherokee Elder Care and  
the services it provides its participants.

Cherokee Nation Comprehensive Care Agency was established by Legislative Act 3-04, within the Executive Branch of the Cherokee Nation; the Act was signed by The Cherokee Nation Tribal Council on February 17, 2004.

Cherokee Health Partners, LLC was the first entity to be established under the umbrella of Cherokee Nation Comprehensive Care Agency. Cherokee Elder Care became active prior to the ground breaking for the site of Cherokee Elder Care in August of 2006. Cherokee Health Partners, LLC was moved under Cherokee Nation Health, in late 2014, to better serve the community as a whole.

Cherokee Nation Comprehensive Care Agency d.b.a. Cherokee Elder Care entered into a 3-Way Agreement with The Centers for Medicare and Medicaid Services (CMS) and The Oklahoma Health Care Authority (OHCA) in 2007, which by regulation, Cherokee Nation Comprehensive Care Agency, d.b.a. Cherokee Elder Care became a Program for All-Inclusive Care of the Elderly (PACE) through that agreement under the guidelines of Medicare Advantage and Title XIX, the Social Security Act.

Because of this 3-Way Agreement, Cherokee Elder Care (CEC) receives payments from both CMS and OHCA for the needs of the participants in their care; by the signing of the agreement, CEC must adhere to the regulation of both governmental entities.

CEC functions as an HMO, using the combined funds from both agencies, CMS and OHCA, to care for the Participants needs. CEC participants pay no co-pays for any Medications or outside specialty services. CEC receives no funding from The Cherokee Nation.

CEC has its own set of policies; CEC uses CMS, OHCA and The Cherokee Nation's regulations to guide the creation of all polices. CEC has its own 401K plan, life insurance, Long Term Disability, and vision insurances for its employees. CEC shares

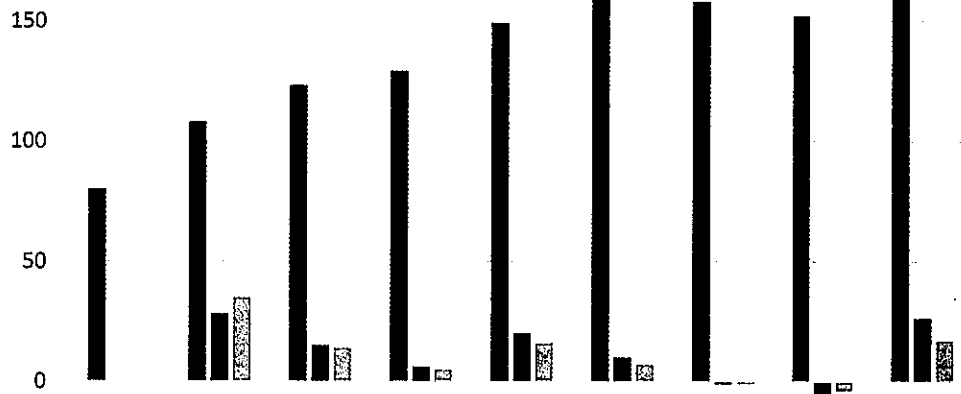
a MOA with Cherokee Nation, CNB, LLC, The Housing Authority of the Cherokee Nation and Cherokee Nation Industries, Inc. The MOA was signed by all entities in 2008, it provided all of these entities the ability to share with its employees the Med/Dental/STD sliding scale premiums set by Cherokee Nation. Since Cherokee Nation is self-funded and has BC/BS as its underwriter, CEC as well as the other entities named, receive from Cherokee Nation HR, a listing of claims, medications, admin fees and etc. that must be reimbursed for the monthly usage by its employees. CEC also has its own payroll system and Federal Tax ID concerning all payroll functions.

CEC reports to Cherokee Nation Tribal Council monthly through the Cherokee Nation Finance Department; providing monthly financials, as well as Annual Audit report completed by an external audit firm. In addition, TERO vendor reports, and employee numbers are sent monthly to the Commerce Department of the Cherokee Nation.

CEC census had reach 180 in July, the census dropped in the following months by a very small margin to 178 in September to complete the fiscal year. Census rebounded to 180 by October, and ending the calendar year in December with an increase to 185, the highest census to date. The breakdown in census for December 2019 is 95 Native Americans 49%, 90 Caucasians 47%, 2 African Americans 1.5%, 1 Hispanic.1% and 2 Multi-cultural 1.5%.

In October there were 66 total employees that serve CEC participants. Of the 66, 39 or 58% are Cherokee citizens; 5 or 8% are other tribal members; and 22 or 33% are Non-Native American.

200  
Increase -Decrease in FY Census



	FY11	FY12	FY13	FY14	FY15	FY16	FY17	FY18	FY19
■ FYE Total Enrollment	80	108	123	129	149	159	158	152	178
■ Increase - Decrease in Enrollment (+/-)	0	28	15	6	20	10	(1)	(6)	26
□ Percent of Change (+/-)	0	35	14	5	16	7	(1)	(4)	17

CEC follows the Cherokee Nation Fiscal Year. The above chart represents FY11 thru FY19. CEC has shown a steady increase since FY11 ending with 80 participants, through FY19 ending with 178. The chart above shows percent and number of increase annually from the preceding fiscal year. On a calendar year basis, CEC has shown an increase from 161 Participants December of 2018 to 185 in December of 2019, a 15% increase during the calendar year 2019.

In May of 2018 due to deaths and disenrollment's of various reasons, CEC's census dipped to 139 an all-time low. With the absorption of duties by some and putting more people out in our communities telling the story of CEC, the entire team has worked together to bring enrollment to an all-time high of 180 in the current month of October reporting, and a total of 185 on December 1, 2019.

CEC cannot enroll anyone that is not living in their home, but, during the course of their enrollment if the participant can no longer live safely in their home environment and their level of care deems nursing home placement, it is funded as a normal service of CEC. CEC as of October 31, 2019 had 15 participants in LTC, with 1 additional participants in a skilled bed within a nursing home, but still under CEC care, and 14 participants in an Assist Living environment under CEC care.

The FY19 ended with a small loss of (\$133K); October started the new fiscal year with a \$163K gain. Our population is still aging and frail; as a reminder, the fall and winter months are here, which always brings on more hospitalizations and acute care

as the norm. Hospital and skilled stays are common, but this fiscal year CEC has experienced a larger number of the population in need of acute care. Cost of acute care increased by \$684K from the prior fiscal year. CEC cost drivers are In-patient, LTC, Skilled beds, Medications and payroll.

Please contact Thelma Pittman, CFO, at (918) 207-4936 to answer any questions; or Connie Davis, Interim Program Director at (918) 453-5554.

Respectfully submitted to the Health Committee of the Council of the Cherokee Nation.