

HEALTH CENTER BOARD MEMBER

IS IT RIGHT FOR YOU?



Written By:

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Health Center Board Member

Are you considering a position as a community health center board member? This is a question you may have been asked. Let this document be a resource for you in making that decision.

Whether you're in a rural area of Michigan or in the inner city of Los Angeles the health centers are charged with the same mission. To provide quality health care to all regardless of their ability to pay. Even though we have the similar mission we may go about it in a different way to reach the desired outcome. There's a saying within the health center movement that when you've seen one health center you've seen one health center. That's due to this variation in location and needs of the communities.

This resource will answer some the questions you may have about the role you are contemplating. Let's roll up our sleeves and dig into the information.

What is a community health center?

Community health centers are commonly referred to as CHCs. They are community-based group physician practices that are owned and operated by the community. Let me explain this. The organizations are nonprofit organizations with a community board of directors. What makes health centers different from similar practices? It the board of directors, not only are they volunteer members of the community, by Federal Statute the board is required to have a minimum if 51% of the board members must be patients of the health center. Making this model patient driven in regards the services provided.

Another requirement of the board of the directors is the makeup of the board must mimic the demographics of the patients of the center. We are also required to have backgrounds that are needed to grow and fulfill the mission of the health center.

CHCs in the earlier days were focused on the medical care. Over time the services provided have been expanded. Adding services such as, dental, optical, behavioral health, specialty services and much more. They have become Patient Centered Medical Homes for their patients.

As stated in the mission, health centers are required to provide care to all regardless of their ability to pay. They accept commercial health plans, Medicaid and Medicare. There is a patient population that cannot afford to pay and in the Federal Statute we must offer a sliding fee program. This allows those that qualify to pay reduced cost on the services and visits at the health center.

Health centers are unique in several ways. We through statute are paid a PPS rate, (Prospective Payment System). This is to assist, increasing the payments to health centers for providing care to the Medicaid recipients. Health centers are also paid a Federal Grant to help offset the cost of providing care to the uninsured and sliding fee eligible patients.

Often referred to as “Safety Net Providers” health centers are in areas designated as Health professions shortage areas. These are rural and urban. Being in the shortage areas they help to reduce health disparities, increase access to care and increase the health of the communities.

The value centers bring in addition to the health benefits is they may then be largest employer in the community they are located. They are economic engines in these communities. This is a basic description of what a health center is. They didn’t just come on to the scene. They have been around for a good number of years.

Where did community health centers come from?

A young doctor studying in South Africa and seeing the health disparities and the needs of the community, and the models that were tried to solve them before giving up. Finally, the funders decided to give the community the funds to create a health delivery model and this was the birth of community health centers. This was in the early 1960s and the young Doctor was Jack Geiger.

Dr. Geiger brought this back and along with Dr. Count Gibson helped to introduce this model in the United States. They took their research and plan to a young Senator from Boston, Ted Kennedy. They convinced the Senator to help launch this and they were able to get a demonstration project approved with two locations. Inner City Boston and Mound Bayou, Mississippi. That was in 1965.

Through the demonstration project Geiger and Gibson were able to show how this model is successful in providing access to health care and reducing health disparities. The number of health centers began to increase along with the support of model in a bi-partisan fashion. President Johnson included the health centers as part of his “War on Poverty”, President George W. Bush called for the doubling the number of health centers and this was accomplished. President Obama in the Affordable Care Act (ACA) included funding to strengthen the infrastructure and the growth. Today in 2019 there are over 1400 health center organization across the United States and its possessions with over 7000 delivery sites serving over 29 million patients.

The board is the basis for the model. As mentioned prior the health centers were created by Federal Statute. One of the many requirements is the board of directors. The board is an oversight and policy directed board. The bottom line with the board is they are responsible for the success or lack thereof. They have the ultimate responsibility. As I like to say, “The buck stops with the board.”

The Oversight agency of community health centers is the Bureau of Primary Health Care which is a division of the Health Resource Services Agency under the Health and Human Services Secretary. They have published in conjunction with the Federal State a set of requirements that board must obey to maintain compliance. These requirements are detailed description covering many areas of the operation, governance, financial, quality and services.

The governance responsibilities describe what authority the board has and what they must do to be compliant. The board does not get involved in the day to day operation. They hire a CEO for that purpose, and they intern fill all the staffing needs of the organization. The CEO is the person who reports to the board on the activity of the organization. The board along with the CEO and other key staff create a strategic plan. The board also approves policies for the organization. The pieces are then given to the CEO to implement with his staff. Although the board is ultimately responsible for the organization, they hold the CEO accountable to the extent allowed.

In the oversight role the board they must be aware of the financial position of the organization. Being a non-profit does not mean they don’t make a profit it is what they do with the profits. Non-profits role any profit made back into the organization. Without a profit there is no mission. Many financial documents are reviewed on a monthly basis.

In addition to financial oversight, they must also monitor quality of the care provided to patients. The productivity of the providers is a very important to monitor. There are many areas that is monitored and reported to the board.

The board in order to meet its charge uses various committees. Oversight can be broken up by committees and then reported to the board. Only the whole board can act. Individual committees or board members have no authority other than the executive committee.

The program requirements are clear as to what we must do as a board. We MUST meet monthly. This can be done electronically. Minutes must be kept that should allow the reader to determine what transpired at the meeting. These minutes are then approved at the next meeting.

Let's talk a bit more about the financial oversight. There should be someone on the board with a financial background. The financials are all encounter driven (patient visits). The encounters are looked at in total number, by payer mix and by provider to name a couple.

The Federal Grant we receive to offset the uninsured and sliding fee patient encounters must be accounted for. The board needs to be aware how the grant dollars are being spent. There are reports that must be submitted to the Government showing this.

Understanding what is expected of the board we can then break it down to the next step.

What are the expectations of an individual board member?

Each health center may have their own unique expectations for their board members. There are some common ones we will look at.

No board can operate without a quorum. Attendance is a critical expectation of every board. Not just for the board meeting but also committee meetings. In addition to attendance your input and questions help the board make decisions on the action required.

Be prepared for the meetings by reading the board material prior to the board meeting. You should be receiving your packet ahead of the meeting and knowing what is going to take place and preparation for it is a must.

As board members we must be committed to the mission of the center. If you don't believe and nor committed you shouldn't be on the board, you would not be at your best. When I was asked to join our health center board, I attended a meeting to see if it was a fit for me and I for it. What I discovered was I fell in love with the mission of the center and the passion of the people around the table fulfilling that mission. That was over 32 years ago.

The board members have various backgrounds in finance, business, marketing, legal, HR health care and others. Utilizing this wisdom to help the organization is what makes us so strong. If your background is finance, you need to be on the finance committee to bring your expertise to work. When it comes to committees if you would like to learn a area ask to be on that committee.

Due to the size of most boards nearly everyone wears multiple hats or sit on multiple committees. Understanding that board members are volunteers and have jobs, you should commit to serve on at least one committee.

Seek to learn more to deepen your knowledge in the health center world. There are many learning opportunities available to board members. Some are webinar based, learn at your pace while others are conferences at either the State Primary Care Association level or the National Association level. Attend these as your schedule and the centers budget allows. Not only will you learn during the workshops but from the other board members that attend these functions.

A very important expectation is be a brand ambassador and advocate. In order to be effective at this you need to understand your health center operation and the value it brings. Then you tell your story to everyone. State Legislators, Congressman various funders. Advocates come together to make a blitz on the State Capitol and in Washington DC to talk about the issues we face. Our Association staff and CEOs do a great job advocating on our behalf. However, they are often seen as trying to protect their job. When we as volunteer patient board members tell our story and back up the staff, we have the purest intentions in mind. This send a good message to those we tell.

What qualities are you looking for in a board member?

- Passion for the mission and dedicated to fulfilling the mission is probably one of the top qualities we look for.
- Right behind Passion is commitment.
A commitment to:
 - Make attendance a priority.
 - Improve the health of the community.
 - Make a difference in people's lives.
 - Continue to educate yourself on the issues we face.
- Be able to listen, ask questions and debate the positions on issues and propose ideas.
- Ability to leverage resources and build support for the center.
- Are you a visionary? Able to help identify the needs of the community.
- Not have a conflict of interest including: No relation to an employee of the center or a spouse, child, parent brother or sister by blood or marriage or adoption of an employee of the health center.

Why should I consider being a health center board member?

Volunteering is incredibly rewarding. If you have a passion for helping others and improving your community a health center board is an excellent role for you.

To fulfill the role of a board member can be time consuming. The actual time involved varies by center and the role you fill. A board officer will require some additional time. Always ask what the time commitment is. Then does your schedule and life allow you to participate at that level. My recommendation to you is talk it over with your family or significant other. If you can commit to attending as required, you may want to postpone joining until you can commit.

Over my 32 years on the board I have had my heart filled with joy looking back to see how the center has grown, services offered and the number of patients we serve. I once had an office partner that couldn't understand why I volunteered so much for the center. When I explained to him that when I sit in the waiting room and know that the person sitting next to me no matter their background or ability to pay will receive the same quality of care that I will with a Blue Cross card. That's why I love being part of the board.

While I do recommend a health center board position to people it's not for everyone. Take time to see if you are a fit for the board and the board is a fit for you. My ask for you as you consider a position is to look deep inside yourself to make sure you can commit to the work needed to fill your role on the board.

About the author:

David is a leader in the health center community. His message is designed to help board members understand their roles and responsibilities and strengthen their knowledge to support the health center and CEO. An in-demand speaker and consultant who have helped many health center boards increase their awareness of the demands required of them by HRSA. Sharing his 30 years of experience as a health center board member he provides real life examples demonstrating the application of the rules.

His commitment has led him to become the Chair of his health center board for over 20 years. He became the first health center board member to serve as President of Michigan Primary Care Association (MPCA) serving 2 terms. He served as a member of the NACHC board and serves on NACHC committees. He is a regular speaker at the MPCA annual board member training. David served as chair of the MPCA health center board member committee and a member of MPCA Executive Committee for numerous years.

David has been recognized many times by both NACHC and MPCA for his tireless commitment to health centers. In addition to his work in the health center community he is an international bestselling author with multiple books to his name.

Keynote speaker and board trainer. Here are some of the topics he presents on.

Board/CEO Relationship

Board Recruiting and Retention

Advocacy

Board Roles and Responsibilities (including Program Requirements)

The Secrets to Managing a High Performing Health Center

Questions or for additional information David can be reached at David@DBrownCompany.com.

WHAT ARE WE LOOKING FOR IN A BOARD MEMBER?

WHAT QUALITIES DO WE WANT IN A BOARD MEMBER?

ABILITY TO:

- Listen, analyze, think clearly and creatively, work well with individual people and a group.

WILLINGNESS TO:

- Prepare for and attend board and committee meetings, ask the right questions, take responsibility and follow through on a given assignment, contribute personal and financial resources, open--doors in the community, evaluate oneself.

WILLINGNESS TO DEVELOP CERTAIN SKILLS IF NOT ALREADY POSSESSED, SUCH AS:

- Cultivating and soliciting funds
- Cultivating and recruiting board members and other volunteers.
- Reading and understanding financial statements.
- Learn more about program areas of the center

POSSESS:

- Honesty
- Sensitivity to and tolerance of differing views.
- A friendly, responsive and patient approach
- Community – building skills
- Personal integrity
- A developed sense of values
- Concern for the center
- Sense of humor

Duties and Responsibilities of Individual Board Members

- As a board member, be fully committed and dedicated to the mission and pledge to carry out this mission. Understand my duties and responsibilities.
- To put the interest of the health center above my personal or other business interest
- To maintain the confidentiality of board information
- To attend board meetings regularly and participate actively
- To serve on at least one committee
- To review information and data provided to the board and make informed decisions
- To exercise reasonable business judgment in the conduct of board business
- To participate actively in board issues by critiquing reports and providing innovative resolutions to problems
- To assure that the needs and interest of the community are represented in plans and decisions regarding services to be offered by the health center
- Actively promote the Center and encourage and support staff
 - Be fiscally responsible, with other board members, for this organization. I will know what our budget is and take an active part in reviewing, approving, and monitoring the budget
 - Know legal responsibilities for this organization and those of my fellow board members. Be responsible to know and oversee the implementation of policies and programs
 - Accept the bylaws and operating principals and understand that I am morally responsible for the health and wellbeing of the organization
- Engage in advocacy for the organization in whatever means are best suited for me. These may include individual solicitation, undertaking special events, writing mail appeals and the like. Make a good faith agreement to do the best advocacy as I can.

Required Knowledge and Skills of Individual Board Members

- Understanding of the concept and operation of a health center
- Ability to read and understand financial statements
- Ability to work with others on the board and in a community setting
- Training and/or experience in one or more of the following areas is desirable:

Management	Health care delivery
Community affairs	Personnel management
Marketing/public relations	Financial management
Employee relations	Law

Prospective Board Member Information Sheet

Name:

Professional title:

Organization:

Address:

City, State, Zip:

Telephone: Day:

Evening:

E-mail:

Are you a patient of Family Medical Center: Yes: No:

Special skills

Other (explain in other info)

Education

Trade school

Professional background

Other (explain in other info)

Other affiliations:

Other board service:

Other information:

What do you perceive as the role of the health center board?

What are the goals and objectives to you serving on a health center board?

How would you deal with a situation if you had a personal interest in a matter versus serving the ethical standards of the health center?

The board meets the 4th Thursday of each month, will you be able to attend these meetings? Yes No