

Carolina Health Centers, Inc.
Quality Improvement Committee Meeting
8/26/25
Minutes

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| TEAMS MEETING |
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Members Present:

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| x | Locke Simons, CMO, Chair | | Jason Dahlberg MD, DSS (P) |
| x | Natasha Johnson, DQPH, Co-Chair | | Christine Gray, MD-Chief of Peds (P) |
| x | Jessica Strutton RN, EHR CS | | Sarah Rudder, FNP, CFFP |
| x | Nikki Richard, RN, DOCS | x | Lisa Gilmer, Revenue Cycle Mgr.(P) |
| x | Derek Bannister, Operations of FM | x | Pam Battle, Lab Coordinator (P) |
| x | Jessica Brock, Operations of Peds | | Nicole Calhoun, RN Case Manager |
| x | Parker Edison MD 2025 | x | Jeralynn Mills, PSR Coord, VFP |
| x | Sirena McCowan, CMA | x | Shulundia Moore, PSR Coord, LC4 2023 |
| x | Amanda Salter, RN, PFHC | | Amairani Correa (QI) |
| | Jessica Jacobs, MA, DOBH (P) | | Rosario Marquez, PSR, SFP |
| x | NaToya Leverette, Pop Health Spec (QI) | x | Ally Hale, MMS, PA-C 2023 |
| x | Lisa Warren, RT(r), CMA, RSFP | x | Mary Cooper, LPN (QI) |
| x | Jessica Moore 2024 | x | Morgan Bowen 2024 |
| | Noelle Lowe 2024 | x | Kesha Houston (QI) |
| x | Valerie Moore 2024 | x | Ana Jaramillo (QI) |
| | Brandi Beard 2024 | x | Sarah Dorn (QI) |
| x | Denecka Agnew (QI) | | Emily Olmstead (QI) |
| x | Daniel Lapp MD 2024 | x | Christy Irons NP, 2024 |
| | Lance Braye MD 2024 DIR FP (P) | x | Ashley Smith, 2024 |
| x | Latitia Jones | ? | April Hunt 2024 SFP (Going to TCC 3/3/2025) |
| x | Bonnie Lee Peds Clinical Director | | Miriam Ferguson COO |
| x | Chris Clem CFO | x | Kayla Kulhanek |

QI Committee Strategic Planning

CHC’s Quality Improvement Plan (QIP) is a comprehensive program used to assess clinical quality and risk issues on a continuous basis. The goal of the QIP is to objectively and systematically monitor and evaluate the health center’s service performance, as well as potential risks incurred in the implementation of all services. This includes resolving problems, addressing deficiencies, and improving clinical care.

- 1) The meeting was called to order by: Natasha Johnson 12:21
- 2) Approval of Minutes: Valerie and Mary
- 3) Role was taken and is reflected above.

Topics Discussed

Date: August 26, 2025

Facilitator: Natasha Johnson

Time Called to Order: 12:21 PM

Administrative Updates

- June meeting minutes were shared and approved by Valerie Moore and Mary Cooper.
- April Hunt will be removed from future committee lists.
- Attendance was taken; Miriam Ferguson joined briefly but left early and was not counted present.
- Reminder to present slides in full presentation mode during meetings.

Quality Metrics Review

- Most metrics are improving except 2-year-old vaccines, due to missing flu shots.
- Coordination with pediatric providers and insurance lists is underway to identify patients who may meet vaccine measures.
- New pediatric measures will be reported separately moving forward.
- Clarification from Locke Simons: W30 0–14 months = 6 well-child visits by 15 months; W30 15–30 months = 2 additional visits from 15 to 30 months.

Clinical Practice Guidance: URI & AOM Coding

- Providers should not code both URI and acute otitis media (AOM) in the same visit.
- Use the most specific diagnosis to avoid quality flags and potential insurance denials.
- Avoid adding symptom codes when already implied by the primary diagnosis.
- Do not prescribe antibiotics for URI alone.

Visit Trends

- Family Medicine and Pediatrics visits increased from June to July.
- Behavioral Health visits slightly decreased; possible reasons include seasonal trends or appointment cancellations.
- Pediatric visit increase likely reflects back-to-school well visits.

- Two new nurse practitioners started in August; a returning physician will join in November.

BMI, Nutrition, and Exercise Counseling

- Rates are improving but still inconsistent.
- BPA flags are appearing during ADHD visits when counseling is missing.
- Providers encouraged to document counseling annually.

Well-Child Checks

- Down by 325 compared to last year.
- Template changes were made to balance provider schedules.
- Staffing and availability likely contributed to the decline.

Current QI Projects

- Annual Wellness Visits (AWVs): Significant growth noted, with 2,543 visits in August 2025 alone.
- Diabetic Eye Exams: Volume increased last fall with Five Star; now running one clinic per week.
- Transitional Care Management (TCM): 87 codes billed this year; billing holds follow-up visits in a work queue.
- Roster Cleanup: Patients not seen in 3+ years reassigned to SA121; PCP should be updated during re-establishment.
- Referral Closures: Lisa Marie at Ridge Spring assisting; Nikki Richard to follow up.
- Coding QI Project: Combo code cheat sheet to be distributed; centralized review of problem lists planned.
- Saluda Care Coordinator Pilot: Early success with increased visits and workflow improvements.

Problem Areas & Reminders

- SDOH Screenings: Company-wide screenings down 19%; Village up 49%, Lakelands Family Practice down 45%.
- Physical Activity Positivity Rate: Highest across company; outreach initiatives underway.
- Blood Pressure Rechecks: Compliance issues noted; reminder magnets distributed to prompt rechecks.

Additional Discussion & Action Items

- Pediatric Representation: Christy to engage more pediatric providers and bring ideas within two months.
- Unsigned PCP Notes: Serena raised concerns; Dr. Simons approved persistent follow-up and escalation if needed.
- Email reminder to providers about timely note signing to be sent.

Open Floor for Input

- Morgan raised concerns about medication reconciliation.
- Natasha encouraged attendees to suggest quality improvement topics.

Next Steps

- Monitor pediatric vaccine metrics and coordinate with providers.
- Begin location-based KPI reporting.
- Expand AWW and diabetic eye exam clinics.
- Explore solutions for medication reconciliation tracking.
- Reinforce correct visit type selection for TCM billing.
- Launch combo coding support and distribute cheat sheet.
- Monitor SDOH screenings and blood pressure rechecks.
- Collect and implement outreach ideas for physical activity.

- The next meeting 10/28/2025

Meeting adjourned

Natasha Johnson

Natasha Johnson
Director of Quality and Population Health