

Time: 5:00 pm – 6:30 pm

Location: WebEx

Voting Members Present: D. Lafreniere MD, R. Fuller MD, G. Kuchel MD, S. Levine MD, P. Luthra MD, I. Moss MD, S. Scippa MD

Non-Voting Members Present: A. Horbatuck, A. Keilty

Clinical Council Subcommittee Present: T. Agresta MD, S. Allen MD, E. Ballesteros MD, M. Brewer MD, P. Coll MD, J. Greenfield MD, P. Kerr MD, B. Liang MD, D. McFadden MD, E. Mortensen MD, D. Stanley MD, L. Wolansky MD

Guests: D. Hayes, C. Ryan, G. Sznaj, L. Wall

Dr. Lafreniere called the meeting to order at 5:00 pm.

- The minutes for the January 24, 2023 meeting were reviewed and approved as written.
- Coding and Documentation
Dr. Liang commented that there is an RFP out to consulting companies that could help with coding and documentation. This would include E/M reviews, inpatient reviews, and surgical coding. Dr. Brewer and Dr. Bulsara are heading a task force. Others who might be able to help can be recommended to join.
- Faculty Requests
 - Department of Obstetrics and Gynecology
Division of General ObGyn
Assistant Professor/On-Call Generalist
Replacement – 0.95 Clinical FTE UMG
Approved
 - Department of Obstetrics and Gynecology
Division of OB Hospitalist
Assistant Professor/ObGyn Hospitalist
Replacement – 0.50 Clinical FTE UMG
Approved
 - Department of Emergency Medicine #1
Division of Emergency Medicine
Assistant Professor/Clinical
New – 0.95 Clinical FTE JDH
Discussion only
 - Department of Emergency Medicine #2
Division of Emergency Medicine
Assistant Professor/Clinical
New – 0.95 Clinical FTE JDH
Discussion only

- Department of Medicine #1
Division of General Medicine
Assistant Professor/Hospitalist/Nocturnist
New – 0.30 Clinical FTE UMG
Approved
- Department of Medicine #2
Division of General Medicine
Assistant Professor/Hospitalist/Nocturnist
New – 0.30 Clinical FTE UMG
Approved
- Department of Medicine
Division of General Medicine
Assistant Professor/Hospitalist
Replacement – 0.30 Clinical FTE UMG
Approved
- Department of Medicine
Division of Internal Medicine
Assistant Professor/Primary Care
Replacement – 0.95 Clinical FTE UMG
Approved
- Department of Medicine
Division of General Medicine
Assistant Professor/Primary Care
Replacement – 0.95 Clinical FTE UMG
Approved
- Department of Surgery
Division of General Surgery
Assistant Professor/Surgery
Replacement – 0.95 Clinical FTE UMG
Approved
- Department of Surgery
Division of Cardiothoracic
Assistant Professor/Clinical
New – 0.19 Clinical FTE UMG
Approved
- Financial Update

Per Mr. Sznaj, overall UConn Health has a profit of \$46 million compared to a budgeted profit of \$16 million. UMG is 9% ahead of budget for the month, driven by patient revenue which is almost 10% ahead of budget. Medicaid for FY 2019 thru FY 2022 was the #1 payer when compared to volume. FY 2023 Managed Medicare became our highest volume payer @ 24% of our activity, previously it was 22%. In total, Medicare was 40% of the revenue. Growth in Managed Medicare was mainly due to Dermatology (Mohs), IMA (Year 1 & 2 providers), Neurosurgery and Orthopedics. 39% of activity in FY 2023 to date was for patients 65 and older, an increase from the previous two years when it was 37%. RVU's for January 2023 topped 130,000 which is only the second month going back to FY 2019. The only other month to top 130,000 RVU's was March 2022. RVU's are 7% ahead of budget for the month. Expenses are ahead of budget due to new providers who had not been budgeted.

- Ambulatory Scorecard

Dr. Lafreniere reminded attendees about scorecards. Every quarter two departments will present their progress during Clinical Council. Orthopedics and ENT will be sharing their progress during the March meeting.

- Cheers

Ms. Horbatuck commented that lots of work is being done to determine which metrics to monitor and baselines to target. Epic experts are looking at time spent on basket orders and notes and will suggest remedies.

- No Show and Late Patients

Ensure all understand the difference between a patient who cancels late and a no-show who simply does not show up.

- Updates

Starting in March virtual scribes will be an option. This less expensive option has gone through compliance and legal.

A nutritionist has been hired and is available for consults.

Press Ganey Infusion has fixed the issue that, when a patient saw two providers within 90 days, only one survey was received. Now response has almost tripled.

Warning and Dismissal Letters

Warning letters need to be sent in advance of any possible dismissals. Inappropriate behavior needs to be addressed quickly and patients should be made aware of their rights as well as their responsibilities. Police are available to speak with staff about ways to de-escalate situations. Adding badge access to additional areas is also a possibility.

Ms. Horbatuck also updated attendees on various moves that will be taking place.

The meeting was adjourned 5:56 pm.

Respectfully Submitted,
Laurie W. Wall, Executive Assistant