



# *White Cloud Health Center, LLC*

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## **WCHC BOARD MEETING AGENDA**

**February 6, 2025**

**5:10pm - 7:25pm**

[meet.google.com/kzi-bqfe-rme](https://meet.google.com/kzi-bqfe-rme) OR 1-559-854-1458 (PIN: 254296369)

**Attendees:** Tim Rhodd, Tony Fee, Paul Austin, Cyndee McNeal, Chasity Davis, David Weaver, Brigitte Robidoux, Missty Slater

The meeting was called to order 5:10pm.

**1) Meeting minutes review**

none

**2) Strategic Planning Proposal- Sandra Kwak**

Sandra joined to present on the strategic planning proposal. 10Power helped support a grant on energy development for ITKN. She is excited to help support the clinic on financing strategies, community engagement, and strategic planning. They find financing for projects using: tax credits, layering with new market tax credits, philanthropists and private capital/funders. They have successfully been able to stack federal, state, and private grants like this in the past. Community Engagement is one of their primary strategies. They haven't worked in long term care development but reports that renewable energy and real estate development can be similar and there are similar stages as far as development and capital stacks. They also bring together experts from various industries for a roundtable of advisors and bring in folks with direct experience. The Board would like to give Bobbie and the rest of the team more time to look over the proposal.

**3) PRC Committee and process**

The PRC Committee meetings involve all providers on site that day. Bobbie is the PRC Appointee for the meeting as well as someone from PRC. They de-identify referrals and

providers assign medical priority ranking. Referrals are approved based upon the assigned medical priorities and funding availability. Eligibility requirements include: a) they must live in service area, b) they must be Native American, c) they must have their chart updated (like you must have a CDIB on file or proof of descendancy and proof of residency), and d) and you must notify the clinic within the designated timeframes.

Patients have the opportunity to submit a written appeal and that committee is totally different than the PRC committee. They also may need to apply for alternate resources- i.e. if Medicaid is free to you or a free employer plan then you have to take that before PRC is used. We can create a brochure that helps our patients navigate PRC processes with outside providers to prevent other providers from not billing correctly. We could also have presentations at general council meetings if that would be helpful.

#### **4) Dental Changes**

Dr. Kuhnert tendered resignation with a plan to work through February, however to ensure a professional working environment and positive patient care environment we have elected to let her go before the last day.

#### **5) Food as medicine [standing agenda item]**

We are midway through the second round of refills. The farm is making efforts to secure additional produce. David, Alex, and Paul are working on the AMA app- for instance sharing information for the new type of radishes in the box. This has also led to an uptick in engagement on the app. Wild rice will arrive tomorrow and 2 pallets of fresh produce will arrive from California Tribe. Salmon is limited so they are coming up with prices and volumes. Seven deer, 4 beef cattle, and 2 bison are scheduled to be processed.

#### **6) Compliance Updates [standing agenda item]**

##### **a. Policies for review**

Brigette moved to approve the Medical Staff Bylaws, CLIA Waived Lab Policy, and Building Security policies. David seconded. Motion passed 4 in favor, 0 opposed, and Tim Rhodd abstained.

##### **b. Compliance Committee members**

Compliance Committee – Brenda, Bobbie, Chasity, Paul, Jacque, Jill, and Chelsea are the compliance committee members, and they will meet monthly. The role of committee is to make sure follow up is given to the patient or the issue reporter, and then the Board will get a report on the number of instances and resolutions.

**7) Construction update [standing agenda item]**

None. Tony will take the lead getting someone to check out the COVID house.

**8) Eye Glass Updates [standing agenda item]**

The program was supposed to launch on 2/5 but the ice prevented that. The eyeglass area is set up already and looks lovely. People outside the service area will want service once this gets out. We could look into VSP for tribal members outside the service area the way PBPN does.

**9) Wellness Center Updates [standing agenda item]**

none

**10) COVID House use planning [standing agenda item]**

none

**11) Long term care facility (LTCF) [standing agenda item]**

Bobbie and Paul visited with Ron Ross at NAHM. There is a USDA loan that could be considered for the LTCF that has longer term lower interest rate. If we went to 1051 lease program it will reduce the money we get from USDA. Ron Ross's group does have experience in getting LTCFs up and going in Nebraska so they could do it for us. The Board will move forward with planning initiatives to get a shovel ready project, but due to the shifting federal funding landscape we will not cut any big checks for construction. Tim moved to approve the NAHM contract for signature with amendments. Bridgette seconded. Motion passed 4-0 with one abstention.

**12) Other business**

- a. <https://www.indigenouspact.com/consultancy> we have reviewed the website and we will keep them in mind for the future.
- b. Jake will join the next meeting for financial updates and we can ask him about our investment portfolio based upon the current everchanging federal funding climate. Tim moved to move forward with this investment portfolio. Bridgette seconded. We will talk to Jake about if we want longer term ladder or shorter-term ladder and await for final decision when Jakes talks to us. Tim rescinded his motion.

Misty moved to adjourn. Bridgette seconded. Motion passed 5-0. Meeting adjourned at 7:25.