



community health  
center board  
Multnomah County

**Public Meeting Agenda**  
**February 9, 2026**  
**6:00 - 8:00 PM**  
**Via Zoom**

**Health Center Purpose:** *Bringing services to individuals, families, and communities that improve health and wellness while advancing health equity and eliminating health disparities.*

**CHCB Board:**

**Brenda Chambers (she/her)** – Chair

**Darrell Wade (he/him)** – Vice Chair

**Monique Johnson (she/her)** – Secretary

**Brandi Velasquez (she/her/ella)** – Treasurer

**Dani Slyman (she/her)** – Board Member

**Elise Schumock (she/her)** – Board Member

**Yalila Alcaraz (she/her/ella)** – Board Member

**John Schlosser (he/him/they/ them)** – Board Member

**Patrick Thomas (he/him/they/ them)** – Board Member

**Christine Palermo (she/her)** – Board Member

**Anirudh Padmala (he/him)** – Interim Executive Director (Ex Officio)

**Absence:** *Brandi Velasquez (Excused)*

- Meetings are open to the public
- Guests are welcome to observe/listen

- There is no public comment period
- All guests will be muted upon entering the Zoom

*Please email questions/comments to **the CHCB Liaison at CHCB.Liaison@multco.us.***

*Responses will be addressed within 48 hours after the meeting.*

<b>Time</b>	<b>Topic/Presenter</b>	<b>Process/Desired Outcome</b>
<b>6:00 - 6:10</b> (10 min)	<p><b>Call to Order / Welcome</b> <i>Brenda Chambers, CHCB Chair</i></p> <ul style="list-style-type: none"> <li>• The meeting was called to order at 6:06 PM.</li> <li>• Dani Slyman arrived at 6:07 PM.</li> <li>• Darrell Wade arrived at 6:08 PM.</li> <li>• All board members were present, except for Brandi Velasquez with an excused absence.</li> <li>• There was a quorum.</li> </ul>	
<b>6:10 - 6:15</b> (5 min)	<p><b>Minutes Review - VOTE REQUIRED</b></p> <ul style="list-style-type: none"> <li>• January 12th , 2026</li> </ul> <p><i>Brenda Chambers, CHCB Chair</i></p> <p><b>Edits/ Comments:</b></p> <ul style="list-style-type: none"> <li>• Board Member Patrick commented to the Board Chair and would like to add to the discussion for the board to take priority on making pharmacy expansion a capacity to serve a higher percentage of clientele as new business for us in the coming month.</li> </ul>	<p>Board reviews and votes</p> <p><b>Motion to approve:</b> Patrick Thomas</p> <p><b>Second:</b> Christine Palermo</p> <p>Yays: 9 Nays: 0</p>



	<ul style="list-style-type: none"> <li>○ The Interim Executive Director Anirudh stated that he would make a commitment to have a check in with Board Member Patrick and Board Chair, Brenda Chambers with the Pharmacy Director, Michelle Corder as a follow up to this question.</li> </ul>	<p>Abstain:0  <b>Decision:</b>  <b>Approved</b>  All board members approved.</p>
<p><b>6:15 - 6:20</b>  (10 min)</p>	<p><b>Policy Review - VOTE REQUIRED</b></p> <ul style="list-style-type: none"> <li>● <b>Client Dismissal from Health Center Services Policy</b></li> <li>● <b>Primary Care Provider Assignment and Selection Policy</b></li> </ul> <p><i>Debbie Powers, Interim Health center Chief Operations Officer</i></p> <p><b>Highlights:</b> Primary Care Provider Assignment and Selection Policy</p> <ul style="list-style-type: none"> <li>● Purpose of the Policy describes how our health centers assign, change or remove PCPs for new and established patients, prioritizing equity and patient choice.</li> <li>● This is required by Oregon’s Patient Centered Primary Care Home program and the Joint Commission.</li> <li>● There are no changes to this policy at this time.</li> <li>● No updates to highlights at this time.</li> <li>● No required implementation or training is required at this time.</li> </ul> <p><b>Highlights: Client Dismissal from Health Center Services Policy</b></p> <ul style="list-style-type: none"> <li>● The purpose of this policy provides guidelines to help ensure a consistent and equitable process for client dismissal from Health Center Services.</li> <li>● This is required by the Joint Commission.</li> <li>● There are currently no substantive changes.</li> <li>● There is an update to highlights which is corrected “Incident Review Committee” to "Interdisciplinary Review Committee.”</li> <li>● There are no changes to implementation or training.</li> </ul> <p><b>Comments/ Questions:</b></p> <ul style="list-style-type: none"> <li>● Board member Patrick asked about client dismissals and specifically clients who are on the spectrum of Autism or have significant cognitive disorders. Patrick asked Compliance Officer Brieshon if this is being addressed in order to best serve these patients. <ul style="list-style-type: none"> <li>○ Compliance Officer, Brieshon stated that is one of the reasons why the interdisciplinary review committee was formed to begin with. Not specifically for that group but for all patients.</li> <li>○ Compliance Officer, Brieshon stated that the focus on level of care these patients need and where they can get care more appropriately. She also stated that patients are transitioned in a way that is going to work the best for their needs.</li> </ul> </li> </ul>	<p><b>Policy:</b> Client Dismissal from Health Center Services Policy.  Board reviews  <b>Motion to approve:</b>  Patrick Thomas  <b>Second:</b> John Schlosser  Yays: 9  Nays: 0  Abstain:0  <b>Decision:</b>  <b>Approved</b>  All board members approved.</p> <p><b>Policy:</b> Primary Care Provider Assignment and Selection Policy.  Board reviews  <b>Motion to approve:</b>  Christine Palermo  <b>Second:</b> Monique Johnson  Yays: 9  Nays: 0  Abstain:0  <b>Decision:</b>  <b>Approved</b>  All board members approved.</p>



	<ul style="list-style-type: none"> <li>Board Member Dani commented in response to Board Member Patrick's question. She asked if Patrick knows of people who are in our current process and has failed them.</li> <li>Board Member Patrick, replied to Dani and stated that he has not seen this in our system, but has seen it in other health care delivery systems.</li> </ul>	
<b>6:20 -6:30</b> (10 min)	<p><b>Executive Officer Elections: - VOTE REQUIRED</b></p> <ul style="list-style-type: none"> <li><b>(2) Member-at-Large Positions</b>  <i>Brenda Chambers, CHCB Chair</i></li> </ul> <p><b>Highlights:</b></p> <ul style="list-style-type: none"> <li>Dani Slyman has self nominated herself for one vacant role for Member-at-Large.</li> <li>Dani has been on the Community Health Center Board since October 2024.</li> <li>Dani has previously served as Member-at-Large for the Community Health Center Board.</li> <li>Dani hopes to center the voices of the community and clients/patients as a Member-at-Large serving on the Executive Committee.</li> </ul>	Board receives update <b>Motion to approve:</b> Dani Slyman <b>Second:</b> Patrick Thomas Yays: 9 Nays: 0 Abstain:0 <b>Decision:</b> <b>Approved</b> All board members approved.
<b>6:30-6:45</b> (15 min)	<b>Break</b>	



6:45-6:55

(10 min)

**Monthly Financial Report**

*Hasan Bader, Finance Manager*

Board receives update

**Highlights:**

- Revenue YTD is 48% percent of the target budget. This equates to \$104,548, 503 YTD accruals.
- Expenditures YTD is 45% of the target budget. This equates to \$97,192,429 YTD accruals.
- We are currently \$73,000,000 million in the Black.

**Revenue:**

- Primary Care 330 grant
  - There was a delay in posting revenue for December since the grant follows a calendar year vs fiscal year. The grant has not been closed yet for 2025. This will be posted in January for the committee to review.
- Quality & Incentives Payments
  - In the month of December we received checks in the amount of \$3,380,797.
  - Incentives are not consistent every month.
  - The budget is 58% of the budget target rate.
- Strategic Oral Health Investment
  - This is a new funding stream for the health center out of Care Oregon.
  - \$600,000 has been collected so far which is also 58% of the current budget.
- Health Center Fees
  - This is the largest collection of the revenue.
  - We are currently at 49% of the budget target rate for 6 months.
- Self-Pay Client Fees
  - In December we collected \$29,400. This is on target.

**Expenses**

- This is the largest category for personnel expenses.
- In the month of December we spent 10.2 million dollars on expenses.
- This is 45% of the target budget. The goal is to be close to 50% or less.
- Personnel expenses also include contractors for the health center.
- Contracts are a little more than 54% of the target budget.

**Materials and Services:**

- For the month of December we spent 3.4 million dollars.



- For the year, we are at 47 million which is right on target.
- This means that we have 50% of savings.
- For the month of December, we were about 1.5 million dollars in the Black.
- For the YTD we are at 7.3 million in the Black.

**Health Center Fees:**

- We collected 13.5 million in December, and this is our usual average.
- For self pay we collected \$29,400 for the year.

**Internal Services:**

- Indirect expenses for the year is 15.67% of revenue. Next year this will change.
- In the month of December we collected 1.57 million which is 44.4% of the budget so far.
- For data processing we are at 42%.

**Budget Modification:**

- We started the budget with \$217,234,000.
- During the year there were four budget modifications.
- One of the budget modifications was to reclassify some positions.
- The other budget modifications were lost grant funding with the Afghan Refugee program and the budget was reduced due to this change.
- The other budget modifications were the addition of three positions to the budget that were not included in the budget when the budget was submitted.
- Our total current budget is \$217,300,000.

**CHC Dashboard:**

- Average billable visits per year:
  - There was a dip in student patients seen in the months of July and August when school is not in session.
  - In December we had 75 average billable visits.
  - Dental visits have averaged to 258 billable visits per day.
  - In December primary care visits averaged to 675 visits per day.
- Uninsured Visits Per Quarter
  - FY 26 target uninsured visits were 9.4% for Primary Care.
  - FY26 target uninsured visits for dental was 2.5%.
  - FY25, the uninsured percentage budget was 12%.

**Payer Mix for Primary Care:**

- In December, most of our visits originate from Care Oregon which is about 69%.
- We have 8% of Trillium assignment.
- Commercial and self-pay is about 3-5%.



	<p><b>Number of OHP Clients Assigned by CCO</b></p> <ul style="list-style-type: none"> <li>• We are doing well with Care Oregon and Trillium clients.</li> <li>• For the month of December there were 64,500 clients assigned.</li> <li>• For the month of December, there were 48,000 patients seen through Care Oregon.</li> <li>• For the month of December, there were 16,500 patients seen through Trillium.</li> </ul> <p><b>CCO Assigned Patients Engagement</b></p> <ul style="list-style-type: none"> <li>• 48,000 clients assigned through Coordinated Care Oregon.</li> <li>• 16,500 clients assigned through Trillium.</li> <li>• We typically see clients about 4.3 times within a 12 month span.</li> <li>• Engagement rate for Care Oregon is 56%.</li> <li>• Engagement rate for Trillium is 18%.</li> <li>• We typically see clients about 3.4 times in a 12 month span.</li> </ul>	
<p><b>6:55-7:05</b> (15 min)</p>	<p><b>Executive Director Strategic Updates</b> <i>Anirudh Padmala, Interim Executive Director</i></p> <ul style="list-style-type: none"> <li>• <b>FY 27 Budget:</b> The Health Center has submitted our proposed Fiscal Year 2207 budget to the Health Department. The budget proposal includes new staffing investments in Primary Care while maintaining the Dental, Integrated Behavioral Health, and Pharmacy programs and reduction in central administrative programs.</li> <li>• <b>Joint Commission’s Gold Seal of Approval for Laboratory and Point of Care Testing:</b> Multnomah County Community Health Center has earned The Joint Commission’s Gold Seal of Approval for Laboratory and Point- of-Care Testing. The Gold Seal is a national benchmark for healthcare quality. This renewal joins our existing Gold Seal certifications for Primary Care Medical Homes and Ambulatory Care, placing our Health Center alongside recipients such as Mayo Clinic, Johns Hopkins, and Stanford Health Care.</li> <li>• <b>2026 Geiger Gibson Program Emerging Leader Award:</b> Aaron Baeza, Access and Engagement Manager of our Health Center, was selected as one of the recipients of the national Geiger Gibson Emerging Leader Award and he will be receiving this award on February 9th, 2026 at the 2026 Policy and Issues Conference.</li> </ul> <p><b>Comments/ Questions:</b></p> <ul style="list-style-type: none"> <li>• Dental Director Azma stated that the dental clinic will be closed on Monday until the dentist vacancy at Billi Odegaard Clinic.</li> <li>• The general dentist started January 27th, 2026.</li> </ul>	<p>Board receives update</p>



	<ul style="list-style-type: none"> <li>• There are plans to re-open on Monday's starting on March 9th, 2026.</li> <li>• Michelle Koder, Pharmacy Director stated the areas of health centered that have shared lobbies with other programs, like primary care, dental, and so we're really coming at this from a trauma informed manner about privacy.</li> </ul>	
<b>7:05-7:40</b> (35 min)	<p><b>Closed Session:</b></p> <p><i>Per ORS 192.660(2), the following topics could be discussed:</i></p> <ul style="list-style-type: none"> <li>• <i>(d) To conduct deliberations with persons you have designated to carry on labor negotiations.</i></li> <li>• <i>(i) To review and evaluate the performance of an officer, employee or staff member if the person does not request an open meeting. This reason for execution session may not be used to do a general evaluation of an agency goal, objective or operation or any directive to personnel concerning those subjects. ORS 192.660(2)(i) and 192.660(8).</i></li> </ul>	Board Discusses
<b>7:40</b>	<b>Meeting Adjourns</b>	Thank you for your participation

Signed: \_\_\_\_\_ Monique Johnson /s/ \_\_\_\_\_ Date: \_\_\_\_\_

Monique Johnson, Secretary

Signed: \_\_\_\_\_ Brenda Chambers /s/ \_\_\_\_\_ Date: \_\_\_\_\_

Brenda Chambers, Board Chair

Scribe: // Email: //Mavis Sanchez-Scholes, mavis.sanchezscholes@multco.us