

**Date: July 16, 2025**

**Attendees: Rodney Koenig, Michael Mesisca, Christine Paley, Tiffany Mendoza, Vivian Acevedo, Katie Alexander, Rebecca Rimka, Matthew Keane, Meagan Ponciano, Rosilyn Kattiyaman, Kurt Harris, Brenda Villarreal, James Bailey, Kelly Medina, Alexis Martinez, Frank Nguyen, Himelda Churchill, Jocelyn Le, Krista St Onge, Lawrence Gates, Chance Thepmontrynep, Paul Rogers, Bushra Hasan, Karla Montes, Lauren Campos**

**Location: Ring Central**

<i>Topic</i>	<i>Discussion</i>
<b>Central</b>	<p>Christine</p> <ul style="list-style-type: none"><li>● Provider team is doing a good job with compliance training</li><li>● There is a 50th annual partnership meeting in Florida on September 25-26<ul style="list-style-type: none"><li>○ A lot of great CME</li><li>○ Day 0 is always great new provider experience</li><li>○ Mesisca and Lawrence will be attending</li></ul></li><li>● There will be some advanced provider changes they are excited for. They are interviewing for a new director to add to the team.</li><li>● Always a pleasure to work with the site leads</li></ul>
<b>Concerns</b>	<p>Mesisca</p> <ul style="list-style-type: none"><li>● Big Beautiful Bill: It is still too early to know what the total fiscal impact will be</li><li>● He will be attending a presentation next week held by IEHP and their CEO and will keep everyone updated.<ul style="list-style-type: none"><li>○ Frank: Is this an open meeting?<ul style="list-style-type: none"><li>■ Mesisca: Typically membership based, but might have this meeting be more open</li></ul></li></ul></li><li>● The estimated number projected in the media of the total amount of people that will lose medi-cal assumes nobody will go through the application process</li><li>● It has impacted volume in the medical center and the express cares, but volume is coming</li></ul>

	<p>back in the last week or two</p> <ul style="list-style-type: none"> <li>● He has met with the billing company and Vituity is keeping a close eye. He has reached out to Dr. Anderson to see if they could get a regional meeting with the contracts team at Vituity</li> </ul>
<b>Banning</b>	<p>Vivian</p> <ul style="list-style-type: none"> <li>● Banning clinic will open August 4th, 2025, Monday through Friday</li> <li>● Matt, Kurt, Megan, and Krista will be there the first couple of weeks due to experience and to ensure that the clinic flows</li> <li>● Clinic is fully staffed with MA and LVN, but are unsure of how much training and experience they have</li> <li>● Thanking everyone for flexibility in moving sites</li> <li>● Due to expansion of clinics and clinic hours, ensure that providers are constantly checking shiftadmin to see they are going to the correct site and the right time</li> </ul>
<b>Lake Elsinore</b>	<p>Vivian</p> <ul style="list-style-type: none"> <li>● Double coverage at Riverside and Lake Elsinore <ul style="list-style-type: none"> <li>○ If it is a slow day, go through in baskets and add phone visits. If it is still slow, one of the providers should go home. Rodney is paying attention to time cards.</li> </ul> </li> <li>● Dr. Khan and Dr. Huanguo will be handling controlled substances at Lake Elsinore for Dr. Hao's previous patients <ul style="list-style-type: none"> <li>○ If patients are going in for a medication refill, we only want to be handing out 10 to 15 tablets. We do not want to be giving 30 to 60 day supplies of controlled substances.</li> <li>○ We do not want to increase dosages of controlled substances.</li> <li>○ We want to make sure they have a follow up appointment with primary care.</li> <li>○ If a provider has any questions or is not comfortable with any refills, reach out to an attending and chart that it was discussed and reasoning for refusal</li> </ul> </li> </ul> <p>Katie</p> <ul style="list-style-type: none"> <li>● Volume has been a little low with PCP appointments getting scheduled <ul style="list-style-type: none"> <li>○ Working with PIC and the manager</li> <li>○ Volume should increase in the following weeks as there will be 18 slots opening up for scheduling including hospital discharge follow ups</li> </ul> </li> <li>● Epic message Katie Monday, Wednesday, and Friday with any questions or concerns</li> </ul>

<p><b>Palm Springs</b></p>	<p>Matt</p> <ul style="list-style-type: none"> <li>● PS clinic is short on staffing <ul style="list-style-type: none"> <li>○ They are short on MA at the end of the week</li> <li>○ They will be short on LVN (Rachel) at the end of week starting next week as they will be transferring to Banning Express Care clinic</li> </ul> </li> <li>● EPIC allows providers to sign video visits without a diagnosis, so ensure that there is one inputted before saving and signing note</li> <li>● For educational purposes, it will be helpful to start including pictures of lacerations and abscesses before they are opened or closed. It will be helpful for the following provider to have an idea of what it looked like at follow up visits. Only a pre picture is necessary.</li> </ul>
<p><b>Riverside</b></p>	<p>Jocelyn</p> <ul style="list-style-type: none"> <li>● A new MA is actively being trained. MA will be working on weekdays from the mornings to 5pm</li> <li>● Providers and staff will start to see more construction workers and surveyors for prospective construction. No estimated date or time at the moment.</li> <li>● Has spoken to nursing staff regarding flow and they are requesting: <ul style="list-style-type: none"> <li>○ If the cubbies are loaded with patient charts, pick up a few at a time, so patients are not waiting a long time</li> <li>○ When patients are being discharged or there are pending orders, it would be helpful to write down what the patient needs (Ex. Toradol, then discharge)</li> <li>○ Frank: The flow may not be the best right now due to the ongoing construction. Has noticed the staff is split and the baskets are placed in an awkward spot.</li> </ul> </li> <li>● For 911 calls, provide nursing staff with a brief description as to why the patient needs to go to the hospital, and let the staff know where the provider can be found for any questions and confusion <ul style="list-style-type: none"> <li>○ Rodney: Providers must hand off and give reports to medics for 911 calls. It is not a nursing responsibility.</li> </ul> </li> </ul>
<p><b>MSC</b></p>	<p>Tiffany</p> <ul style="list-style-type: none"> <li>● There is a new clinic manager named Mariana <ul style="list-style-type: none"> <li>○ If there are any problems, let Tiffany and Rodney know they can bring it up to her unless it is about flow</li> </ul> </li> </ul>

- She might come by and do check ins
- There are new faces being trained around Express Care for the last couple of weeks. There are 3 new MAs and a new LVN.
- Lake Elsinore staff that have been helping MSC out will be transitioning out
- There have been video visits added to the MSC schedule. MSC does not do video visits due to volume. If you see them, offload them to a clinic that is less busy such as Lake Elsinore
  - Katie will be doing video visits on Mondays, Wednesdays, and Fridays at Lake Elsinore clinic
- Mariana is working on getting all of the providers access to all floors past 9pm so they can transfer patients to the ER
- There are new staff that have been getting introduced via Whatsapp Group
  - Paul Rogers, Alexis Martinez, and Chance Thepmontryn-hep
- If you see that the staff is not pending care gaps, let Tiffany know as she has been working with the clinic
  - Rather than ordering shotgun testing, they are supposed to be ordering just what the patient needs. Providers need to be checking those before signing off on them.
- Imaging will transition into an online binder that Katie will be managing. It should go live this week.

Kurt

- Yesterday as he was working, he noticed when he clocked the saved favorite for Hepatitis B screening, the service antibodies are no longer an option. Only core antibodies and surface antigen are available.
  - The only one he could find is Hepatitis BS antibody qualitated and it is only to quest or an external lab. There is no triple screening right now with RUHS
  - MSC clinic will not draw labs in clinic
  - Matt: Can the lab order be switched when the Hep B care gap is selected?
    - Tiffany: MSC uses a separate lab set, which pulls the triple screening and orders each test individually. She will reach out to Dr. Gandhi to see if it just a glitch in the Epic system as a result of new updates
    - Matt: He can reach out to his quality nurse at Palm Springs clinic to reach out to Epic if the specific problem is found
- What is the guideline and policy when transporting patients from Express Care to the ER?

	<p>The nurses have stated even with more minor cases, they have to take the patient through the ambulance bay instead of triage.</p> <ul style="list-style-type: none"> <li>○ Rodney: The patients must be taken through the ambulance bay so that Lisa and the staff have more control and patients are not ignored. The nurses in the ER can elect to take them to triage after.</li> <li>● Do providers have to call over for every patient being sent to the ER and have the doctors pre arrive them? <ul style="list-style-type: none"> <li>○ Rodney: Yes, every patient should be called over. This ensures that if there are any mistakes, they know exactly who did what or what they did not do and they could be educated.</li> <li>○ Mesisca: This allows there to be communication across, as some patients are poor historians and stuff can be missed. If it is not consistent on the ER side, let him know</li> </ul> </li> <li>● Has noticed that the ER orders a broader STI panel that results in patients coming into Express Care regarding results. Can more clinical reasoning be provided as to why testing was ordered? <ul style="list-style-type: none"> <li>○ Mesisca: PCR labs are less expensive and provide more information. Dr. Despujos elected for a broader panel due to the reflection of the fact that our demographic has a higher rate of positive results on panel</li> <li>○ Kurt: Does someone follow up with patients regarding results? Pharmacy should follow up, but Mesisca will check on that.</li> <li>○ Rodney: He can talk offline with Mesisca to try and find a work flow where patients can be scheduled if they need management and education for results.</li> </ul> </li> </ul>
<p><b>General Comments</b></p>	<p>Rodney</p> <ul style="list-style-type: none"> <li>● Make sure you are checking BPAs under plan. You have to scroll down and click on it to see obesity and all other BPAs that are hidden. Do not forget to look at them so that the team is compliant with BPAs <ul style="list-style-type: none"> <li>○ Email Tiffany or Rodney if you are unsure on what you need to be looking for</li> </ul> </li> <li>● Send all video visits to Lake Elsinore Monday through Friday. Nursing staff should be able to switch visits</li> <li>● The Whatsapp communication should only be used for general questions, patient questions, shift trades, and call offs. This will ensure that everyone is checking the chat regularly. Oftentimes Vituity email is ignored as they receive so many emails and he wants to ensure</li> </ul>

this is not the case with the provider whatsapp.

- Vivian: For any shift trades, put in the request through ShiftAdmin or message her directly to make sure she does not miss any requests
- They will update the RUHS education form for any PEARLS and education
  - Mesisca: Go to <https://www.ruem.org/>. Click on "express care". Password is "ruem18"
  - Mesisca: If there are operational questions, we want to make sure that is captured so that workflow is further clarified. When the question is asked in the Whatsapp, it gets lost in the thread and there are no changes moving forward as it is not memorialized. If it is a system wide change or clarity, we need a service agreement.

Vivian

- The team is 100% on compliance, which is awesome

Rodney

- Vituity compliance is different from RUHS compliance and Moodle and all need to be completed
- Mesisca: The RUHS compliance and Moodle will be due by the end of August
  - The expectation is that providers are constantly checking both their RUHealth email and Vituity email. Sometimes there is critical information about chart completion or subpoenas and he does not want to have to track anyone down.
  - For the RUHS compliance trainings, there are pre quizzes that are open book. If you pass the pre-quiz, you do not have to take the whole quiz.
  - Katie: Vivian sent out a study guide that was incredibly helpful with completing quizzes

Chance

- Does she have an email with RUH and Vituity? She was unable to log into medical interpreter call as she did not know her RUH email and needed the nursing staff to do it
- Everyone has both emails and she should reach out to Tiffany and Vivian
- Tiffany: Chance's onboarding was different as she works in Loma Linda

Mesisca

- Does everyone have access to their RUH email?
  - The new hires do not
  - Lawrence learned he did not have access, but is already working with Tiffany

	<ul style="list-style-type: none"> <li>● Kurt: If logged into Epic, you could click on outlook and it will take you to the email</li> <li>● Everyone should have remote access to RUH email and Epic</li> </ul> <p>Frank</p> <ul style="list-style-type: none"> <li>● The provider computer rooms at Corona, Neighbourhood, and Lake Elsinore do not have access to the internet. He likes to be able to access information from the internet and does not like doing so on his phone while in the room.</li> <li>● Lawrence: He likes pulling up pictures to better explain things</li> <li>● Katie: If you open up IEHP consult portal, it opens up internet explorer</li> <li>● Rebecca: If you open up the weather buttons, it opens up internet explorer</li> <li>● Rodney: He will reach out to the clinic manager regarding lack of internet</li> </ul> <p>Mesisca</p> <ul style="list-style-type: none"> <li>● Some providers apologize when relaying calls and it is not necessary to do so. The physicians know that the providers are seeing multiple patients, and only a small number reaches them when necessary.</li> <li>● The express cares are already lightening the load of the ER and it is okay to send patients to the ER when necessary</li> <li>● He has received good feedback on ED 2 experience. Multiple nurses and leadership team have expressed what a great job Kurt has done training</li> </ul>
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Meeting called to order: 8:00a; Meeting adjourned 8:54a