

**ANNUAL REPORT OF ACTIVITIES  
OF  
FEATHER RIVER TRIBAL HEALTH, INC.  
FOR CORPORATE YEAR  
OCTOBER 1, 2022 – SEPTEMBER 30, 2023**

For the purposes of this report, up-to-date information has been provided as much as possible, even though this report is for the corporate year October 1, 2022, through September 30, 2023.

Feather River Tribal Health, Inc. is a consortium of three federally recognized local Tribes that strive to promote the health and wellness of the Native people and communities throughout our region. The mission is to elevate the health status of the American Indian people in our service area and all people in our communities to the highest level possible through a comprehensive system of preventative and therapeutic services. We have adopted the values:

R	e	s	p	e	c	t	M	e	a	n	i	n	g	f	u	l	
E	x	c	e	l	l	e	A	c	c	e	s	s	i	b	l	e	
L	i	f	e	s	t	y	T	r	i	b	a	l					
A	c	c	o	u	n	t	a	b	i	l	i	t	y				
T	r	a	d	i	t	i	o	n	a	l							
I	n	n	o	v	a	t	E	f	f	i	c	i	e	n	t		
O	p	p	o	r	t	u	n	i	t	i	e	s					
N	u	r	t	u	r	i	n	g									
S	e	r	v	i	c	e	R	e	s	p	o	n	s	i	b	i	l
H	o	l	i	s	t	i	c										
I	n	t	e	g	r	a	t	e	d								
P	r	o	f	e	s	s	i	o	n	a	l						
S	e	a	m	l	e	s	s										

**CORPORATION STATUS**

The corporation continues to operate as a non-profit agency in good standing. No amendments have been made to the bylaws during the corporate year.

The current officers of the corporation are:

Chairperson:	Glenda Nelson, Enterprise Rancheria, Tribal Chair
Vice Chairperson:	Francis Steele, Jr., Berry Creek Rancheria, Tribal Chair
Secretary:	Angus Gilbert, Mooretown Rancheria
Treasurer:	Jessie Griffin, Berry Creek Rancheria

Other Board Members of the corporation are:

Berry Creek Rancheria:	Travis Brown Francis Steele III, Alternate
Mooretown Rancheria:	Benjamin Clark, Tribal Chair Guy Taylor Barbara Bird, Alternate
Enterprise Rancheria:	Donna Rodriguez Cindy Smith Crystal Gilbert, Alternate

The following corporation standing committees are:

**Executive Committee:**

Chair:	Glenda Nelson
Vice Chair:	Francis Steele, Jr.
Secretary:	Angus Gilbert
Treasurer:	Jessie Griffin

**Bylaws & Policy Committee:**

Chair:	Glenda Nelson
Berry Creek Rancheria	Francis Steele, Jr.
Mooretown Rancheria	Benjamin Clark
Enterprise Rancheria	Glenda Nelson

**Personnel & Grievance Committee:**

Chair	Glenda Nelson
Berry Creek Rancheria	Francis Steele, Jr.
Mooretown Rancheria	Benjamin Clark
Enterprise Rancheria	Glenda Nelson

**Finance Committee:**

Chair	Glenda Nelson
Berry Creek Rancheria	Travis Brown
Mooretown Rancheria	Guy Taylor
Enterprise Rancheria	Cindy Smith

**Audit Committee:**

Pursuant to the Non-Profit Integrity Act of 2004, the Board of Directors has established an Audit Committee comprised of:

Berry Creek Rancheria:	Francis Steele, Jr.
Mooretown Rancheria:	Benjamin Clark
Enterprise Rancheria:	Glenda Nelson

**California Indian Manpower Consortium (CIMC)**

Delegate: Angus Gilbert, Mooretown Rancheria  
Alternate: Travis Brown, Berry Creek Rancheria

**California Rural Indian Health Board (CRIHB)**

Delegate: Guy Taylor, Mooretown Rancheria  
Delegate: Jessie Griffin, Berry Creek Rancheria  
Alternate: Glenda Nelson, Enterprise Rancheria

**FINANCIAL STATUS**

A report of the financial status of the organization is filed annually, as required by law, with all federal and state agencies. There were no findings or recommendations for audit year 2022-2023 by the auditors.

Approximately 42% of the agency's \$23.1 million budget comes from IHS and grant funding; 58% comes from third party billing, interest income, and miscellaneous reimbursement. In fiscal year 21/22, numerous grants were received from outside agencies to assist the agency in its response to COVID. These one-time funding sources have been utilized to expand services and offset losses that occurred during the pandemic. Most of them have been fully expended. For fiscal year 22/23 there was a decrease in grant monies received.

**SERVICES**

FRTH operates three (3) facilities. The main facility is located in Oroville. A satellite facility is operated in Yuba City. In June 2019, FRTH opened the Wellness Center located in Oroville. Tele-conferencing is used between the Oroville and Yuba City facilities, which allows the two facilities to be connected via video conferencing.

Current services offered by FRTH include:

**Medical** services providing primary care and family practice with sub-specialties including:

- Pediatrics
- Women's Health
- Medication Assisted Treatment
- Neurology
- Acupuncture
- Rheumatology
- Diabetic Health Education
- Nutrition Education
- Childhood Immunizations
- Physical Therapy
- Endocrinology

- Tele-Psychiatry
- Podiatry
- Wound Care
- Hepatitis C Treatment
- Tele-Nutrition
- Tele-Health
- Chiropractic services

### **Pharmacy**

FRTH has an in-house pharmacy to serve PRC patients and direct Native American patients in an effort to control the rising costs of PRC and medications. The agency offers pharmacy services to all Native patients with or without an insurance resource. In addition to our onsite pharmacist, a contracted pharmacist service is used to ensure coverage and access to services.

**Dental** services focus on a comprehensive public health-oriented dental program serving adults and children in the community. FRTH does not have an onsite dental lab. Services include:

- Emergency services
- Diagnostic services including examination & treatment planning; radiographs, oral cancer screening; consultations and referrals.
- Periodontal services
- Oral dental services including simple extractions and referrals for complicated procedures.
- Preventative services including dental health education, oral hygiene instruction, self-applied fluorides, and sealant program.
- Restorative services including routine fillings and crown build-ups.
- Endodontic services (root canals)
- Prosthetics including full dentures, removable partial dentures, stayplates, and fixed crown and bridges.
- Oral conscious sedation for patients that qualify.

**Wellness/Outreach** services promoting health and wellness through health screening activities and health education and assisting clients with unmet health and social needs. These programs include:

- Community Health Representatives who perform home visits
- Car Safety and Booster Seat Program
- In-Home Safety assessment
- Senior Nutrition Program – put on hold during the pandemic.
- Fire prevention activities
- Injury prevention program
- Parenting Classes
- Public Health Nurse/Case Management
- Immunization Program
- Community Disaster Preparedness program

- Hospital Discharge Planning liaison
- Transportation services for patients in the Substance Use Treatment Program.
- Participation in Inter-Tribal Task Force meetings between numerous local community agencies and groups
- Assisting patients to sign up for Medicare B and Medicare Part D

**Patient Services** focuses on the needs of our patients in accessing services offered by FRTH as well as in our community including:

- Patient Registration/Indian Verification
- Assisting patients in identifying resources and access to services
- Patient assistance with completing forms and signing up for resources.
- Quality Improvement throughout the agency
- Peer Reviews, Patient and Staff Satisfaction Surveys annually

**Health Information and Purchased/Referred Care** (previously Contract Health Service) focuses on:

- PRC/CHS Program – which includes payment of invoices for PRC covered benefits.
- Referrals for medical, dental, and behavioral services
- Access to patient records

**Behavioral Health Services** focus on the numerous needs of the community including:

- Psychiatric services for assessment, therapy, and drug management
- Drug and alcohol counseling for adults and children, including preventative activities and aftercare.
- Treatment for children who are emotionally, physically, and sexually abused, or come from homes where domestic violence has occurred.
- Individual, family and group counseling – adults, children, and adolescents
- Play therapy for young children.
- Co-ed recovery group for individuals with alcohol and substance abuse issues
- Assistance with placement into residential drug and alcohol treatment programs – children and adult
- Anger management classes for men and women (not those who are court-mandated)
- Case management including referrals to other agencies/providers, home visits, court advocacy and school advocacy.
- Family advocacy
- Domestic Violence victim services
- Smoking cessation counseling services

## **FUNDING SOURCES**

The agency has continued to work to retain the funding for current grants. Focus continues to be on ensuring that services provided are paid for through grants or fee-for-

service. During the COVID Pandemic, FRTH received numerous one-time grant awards from a variety of sources to address the impact the pandemic had on our communities and impact to our healthcare.

There was a substantial increase in the number of grants awarded to FRTH because of COVID. Many of these grants have been fully expended, but some are still being utilized. Grants currently active and those now closed to the agency include:

**Indian Health Service (IHS)** – This federal grant awarded by the Department of Health and Human Services provides approximately 42% of funding for FRTH. It is used to provide health care services to Native Americans residing in the designated service area of Butte, Yuba and Sutter counties (excluding the cities of Chico and Durham).

**Substance Abuse Prevention, Treatment & Aftercare (SAPTA)**

A grant received from the Department of Health & Human Services (HHS) to reduce the prevalence of substance abuse and decrease the overall use of addictive and illicit substances among AI/AN population.

**CDC/CRIHB**

FRTH received a subcontract award from California Rural Indian Health Board to assist us with updating our Emergency Operations Plan (EOP) to include the pandemic response. This was a one-time award that was in addition to FRTH's operating budget.

**Tribal Opioid Response Grant (TOR)**

This grant addresses the opioid crisis in Tribal communities by increasing access to culturally appropriate and evidence-based treatment including medication-assisted treatment (MAT) to reduce unmet treatment need and opioid overdose related deaths.

**Special Diabetes Program for Indians (SDPI) Grant** – This is a federal grant provided by the Department of Health and Human Services through Indian Health Service and provides about 3% of the funding for FRTH. The purpose of this grant is to assist in the treatment, control and/or monitoring of diabetic services of Native American patients receiving treatment at FRTH facilities. FRTH applied for and was awarded the competitive grant through 12/31/2020. It has been renewed for 3 years.

**Department of Social Services (DSS)**

This program offers a grant through the State of CA to provide direct counseling services to Native American families that are eligible for Temporary Aid to Needy Families (TANF). It provides less than 1% of the funding for FRTH.

**Health Care Services for Indian Health Program (HCSIHP)**

Grant awarded through the Department of Health Care Services. The grant is to expand the health care deliver capacity through recruitment and retention of the primary care staff to improve health outcomes and reduce health disparities by helping ensure American Indians have access to quality, culturally appropriate care.

### **Grants Closed in 22/23**

#### **Adverse Childhood Experience (ACE)**

DHCS program that aims to increase use of Adverse Childhood Experience ACE screening for the Yuba City facility. - **CLOSED**

#### **Center for Disease Control (CDC)**

FRTH was awarded a grant through CDC to help purchase personal protective (PPE) supplies and equipment that we could use for patient care. This included testing equipment and supplies for COVID, emergency operation tents, and emergency generators just to name a few. This one-time grant award was in addition to FRTH's operating budget. - **CLOSED**

#### **First Nations Development Institute (FNDI)**

This program is to be used for general operating support in response to COVID-19. – **CLOSED**

**Health & Human Services (HHS)** – With the arrival of COVID-19, FRTH has received federal funding to help offset the cost of operations during the pandemic. These are one-time funds that must be spent within a set period and can only be used for specific activities related to fighting the pandemic. These funds were not included in the FY 22/21 budget. - **CLOSED**

#### **Peer Knowledge Exchange Program (KAI)**

FRTH is a sub-contractor to a grant awarded by the CA Learning Community. This grant is to facilitate Tribal peer-to-peer information sharing focused on tribal MAT for opioid use disorder and or stimulant treatment program development. – **CLOSED**

#### **Trauma-informed ACEs Screening & Intervention Evaluation (TASIE Project)**

FRTH is a sub-contractor to this HRSA grant. This program aims to increase use of Adverse Childhood Experience (ACE) screening, promote assessment of risk of toxic stress, and increase provider competency of CE's Aware tools and resources among the Medi-Cal provider community. - **CLOSED**

### **THIRD PARTY BILLING**

We are providers for the managed care plans – Anthem Blue Cross and California Health & Wellness which have now not in our service area as of January 1, 2024. FRTH does provide services for the managed care plan – Partnership, which has replaced Anthem Blue Cross and California Health and Wellness as of January 1, 2024. FRTH is also a provider for Medicare and other 3<sup>rd</sup> party insurances. Billing these resources helps to provide the agency with additional revenue sources. Approximately 43% of FRTH's operating budget comes from third party billing in FY 22/23.

## **ACTIVITIES FOR 2022/2023**

### **Purchased/Referred Care (PRC) (formerly Contract Health Service - CHS)**

Purchased/Referred Care (PRC) workshops are held annually to review the spending limits and policies. The most recent workshop was held in July 2022. The goal for the PRC program is to insure consistency and easy access to care, timely payment of invoices and statements, and patient education on the use of benefits and resources. Information about PRC is available upon request or on the FRTH website – [www.frth.org](http://www.frth.org).

### **Accreditation**

FRTH is accredited through the Accreditation Association for Ambulatory Health Care (AAAHC). FRTH has been accredited with AAAHC since 2003. FRTH was surveyed in April 2021 for re-accreditation and received a full 3-year accreditation. Current accreditation with AAAHC is now through 4/2024. Our AAAHC renewal survey was done earlier this month on the 7<sup>th</sup> and 8<sup>th</sup> of March.

### **Quality Improvement/Risk Management**

Each of the departments is responsible for participating in quality improvement activities. The Quality Improvement Committee meets at least monthly and addresses a variety of concerns related to the provision of health care, safety, corporate compliance, and policies and procedures of the agency. They are also responsible for the oversight of accreditation preparation. This group also oversees risk management of the agency.

### **Payment Methods**

Patients that must pay for services have a variety of means available to pay. FRTH has the ability to accept debit and credit cards as a means of payment as well as accepting cash and checks for services. Non-Native patients are required to have a payment source to be eligible for services. The sliding fee scale is also offered to eligible individuals.

### **Policies & Procedures**

On an annual basis, the Board reviews the policies and procedures of each department to ensure that they are up-to-date and accurate. The most recent annual review occurred in **December 2022**

### **Diabetes Accreditation**

In January 2006, the diabetes program at FRTH was accredited through the Integrated Diabetes Education Recognition Program (IDERP). FRTH became the first California Indian program to receive such accreditation. FRTH has current accreditation through December 5, 2024.

### **GPRA/HEDIS**

The **Government Performance Results Act** (GPRA) requires FRTH to report on health indicators set by the federal government to measure performance. Additionally, with the implementation of managed care for Medi-Cal, FRTH must now also report on measurements set by the managed care organizations through a program called HEDIS.



Meeting HEDIS measurements can result in additional payment by managed care to FRTH.

#### **NextGen/Electronic Health Records**

FRTH utilizes an electronic health record system (EHR) called NextGen. The system is used for retention of patient information as well as reporting and documentation to various external federal and state agencies. A new software update for NextGen occurred in the Spring/Summer of 2023 to ensure it is kept current. FRTH will be implementing a quarterly workshop in the next FY as well as implementation of the new Patient Portal.

#### **Restructure/Succession Planning**

FRTH takes continuous steps to realign operations of the agency to ensure economic stability and cost efficiency. Planning for the eventual retirement of key personnel is also addressed. FRTH recently had a change at the Chief Executive Officer position, and restructuring of some key personnel in leadership.

### **ANNUAL ACTIVITIES**

#### **Patient Satisfaction Survey**

FRTH performs a patient satisfaction survey each year. Because of the pandemic, a patient satisfaction survey was not done in 2022. The survey is usually conducted annually in April.

#### **Staff Satisfaction Survey**

FRTH performs a staff satisfaction survey each year. The most recent survey was done in 2023. The results of the staff satisfaction survey were presented to the Board for their review.

#### **Health Fairs/Newsletters**

Because of the pandemic, no health fairs have been held. Staff worked hard to reach out to patients utilizing a variety of systems to keep them informed. A monthly report is available on the agency's website – [www.frth.org](http://www.frth.org) – for a summary of the monthly Board meetings.

#### **Training**

Throughout the fiscal year, the Board of Directors and staff have received training on a variety of topics from a variety of resources including: Indian Health Service, Indian Self Determination, State of California, National Indian Health Board, Butte County, Tribal Net, Tribal Self Governance, California Rural Indian Health Board, and AAAHC. In 2024 FRTH will have all staff trained in a 10-hour OSHA course to receive a certification they have been trained in OSHA standards.

#### **Community Access to Meeting Space**

FRTH provides free meeting space to community programs, agencies, and support groups. The Wellness Center has added access to space. The Wellness conference room can seat 200 people. We also have the auditorium in the main Oroville facility.

### **Strategic Plan**

Strategic planning meetings are held annually to ensure that the agency is making long-term plans for the operations of the agency. The purpose of this plan is to provide direction and guidance to the agency to move the agency forward in addressing issues that impact operations and the healthcare environment under which it operates. It also helps to identify the types of services that programs may want to plan for in the future. The plan is reviewed annually and updated. The most recent 5-year strategic plan was updated and reviewed in July 2023. The Board of Directors receives a monthly report on the status of implementation of the current year's issues to monitor progress.

Areas reviewed and discussed included:

- Expansion of the Health Promotion/Disease Prevention Grant
- Metal Building expansion for IT and Facilities
- Remodel of the old auditorium for Billing Dept
- New Pharmacy to include a drive-through.
- Expansion specialty services – both in-house and contracted.
- Additional equipment for Facilities to better meet agency needs.
- Adult and children – dental care
- Medi-Cal services – continue to adjust to managed care.
- Monitoring ongoing changes to healthcare environment
- Case Management
- Mental health accessibility
- Contract Support Costs
- IT Strategic Plan and updating technology
- Succession planning
- Impact of legislation on healthcare operations
- Spending of COVID grant money, to support the future of the agency.
- Updating old and outdated equipment

### **Medicare Part D**

FIRTH continues to work with patients on the renewal and/or review of Medicare Part D plans that impact patients to ensure they have access to medications. Open enrollment usually runs mid-November through mid- December of each year. Reimbursement from Medicare Part D helps FIRTH to be able to cover the cost of medications to our Native American patients.

### **Specialty Services**

FIRTH continues to provide specialty on-site services through contracts with specialists for neurology, endocrinology, acupuncture, women's health, psychiatry, rheumatology, podiatry, medication assisted treatment, physical therapy, and chiropractic services. FIRTH continues to look at ways to expand the services we provide and ways to continue to meet the growing needs of the community.

### **Tribal Consultation**

The Board of Directors actively participates in meetings with the State of California, IHS, and HHS to develop a tribal consultation policy that requires consultation with tribal

leaders on a variety of issues. Issues addressed by the Board have included the definition of Indian, contract support costs, and distribution of COVID funding.

### **Annual Budget**

The annual budget workshop is held in September annually to develop the budget for the new fiscal year. The budget for fiscal year 2022/2023 was set at \$23,081,611. The agency did post a profit for 2022/2023, which is listed in the annual financial report. The operating budget for 2023/2024 is set at \$25,582,797.

### **No Surprise Act**

In 2022, FRTH implemented the mandated No Surprise Act to ensure transparency of patient billing.

### **Emergency Plan**

FRTH's emergency plan has been put to the test numerous times in recent years. We continue to work on revisions of the agency's disaster response plan in response to lessons learned. FRTH continues to work on the development of networks of Native American health care facilities to assist each other in case of an emergency.

FRTH was able to obtain 2 emergency tents and a toy hauler that allow for set up at remote locations. Generators and equipment to outfit the tents and toy hauler have also been obtained.

FRTH entered into an agreement with Butte County as a "closed pod" where treatment and medicines will be provided to FRTH staff so that staff will be able to continue to treat and meet the needs of the patients and community in the event of an emergency.

### **Newsletters/Social Media**

FRTH provides monthly updates to the community to keep the community informed about the activities of FRTH. The information is posted in each of the sponsoring Tribe's newsletters. The monthly Board update reports are posted on the website at [www.frth.org](http://www.frth.org).

FRTH updated its website a couple years ago. The upgraded platform provides more information to the community about services and operations of the agency. Videos showcasing services offered by FRTH were also added to the website.

FRTH developed a cultural competency training program for staff that was implemented in 2022 for all current and new staff.

FRTH is looking to increase its presence on social media to provide updates to patients and the community on events at the clinic and as a source of information.

### **Partnerships**

FRTH partners with Tribal Health programs throughout the state to share best practices and training opportunities. Staff also continue to serve on collaborative committees. Attendance at meetings has been virtual and in person this year due to the pandemic ending. FRTH has always participated in the Inter-Tribal Task Force and the Butte

County Health Collaborative, which includes meetings with local hospitals and agencies throughout Butte County working together to coordinate services for the community. FRTH also participates in the Sac Valley Medshare organization that is developing a health information exchange for Butte County.

Throughout the year, FRTH works with other Native American healthcare programs to offer training and assistance on a variety of topics.

#### **GOALS/OBJECTIVES FOR 2023/2024**

The Board of Directors and staff have been able to identify and address critical areas and issues of the organization through the development of the facilities master plan and strategic business plan. Issues that the Board will be working to address in the new fiscal year include:

##### **Leadership Development**

This year, FRTH put the Department Heads through a Leadership Development training hosted by Dale Carnegie Training. This training was instrumental in the development of the leadership team, and will be the catalyst for the development in an internal leadership training for the future leaders of FRTH.

##### **Property Development**

Construction projects that are already underway in 2024 are:

- Completion of a new metal building to house Facilities and IT
- Remodel and relocation of our in-house Pharmacy that will allow for drive-thru pick up of medications is nearing completion.
- Completion of our Billing Department in the old main building auditorium which allowed us to expand Patient Services with the remodel of the new pharmacy area.
- Completion of the remodel of the parking lot circle for added beautification as part of the city requirements.

##### **Special Projects:**

- Continue monitoring of productivity of providers, departments and monitor staffing levels.
- Development of tribal consultation policies with state and federal agencies.
- Continue to implement/monitor the 5-year business and technology plans
- Accountability of Board/Staff/FRTH
- Budget/Fiscal stability
- Continue development of emergency response network with other Native American healthcare programs
- Continue succession planning in preparing for retirement of long-term staff.
- Continue to monitor/update fee schedules to ensure competitiveness.
- Maintain a schedule of infrastructure improvements and replace aging equipment.
- Ensure grant requirements are met for the special grants received due to the pandemic.

- Continue to meet the needs of the community during a pandemic or natural disaster.
- Replace aged IT network infrastructure.
- Update electronic health records system.
- Replacement of aging equipment
- Continue to work on premium sponsorship for specialty programs for 3 sponsoring Tribes.
- Work on special projects to ensure the sustainability of programs and maintain the continuity of services provided to patients.
- Replacement of waiting room furniture
- Update technology