

As of 4/2/17.... (GJK understanding of answers.)

1. Is there any other MOU or Procedural documents between CCH and BHSD other than the MOU signed 5/28/2008 and reauthorized 2/2/2016? **No.**
2. Is there any remuneration at all between the CCH and BHSD? (rent, utilities, services in kind) **No.**
3. What is the process to determine which services or procedures are provided in order to meet the stated vision of the clinic, and how is the School Board involved? ("to support a healthier school environment helping to decrease absenteeism and increase academic performance.")
There is no "menu" of services. Whatever a client requests CCH will attempt to provide.
4. Have the services provided at the clinic changed since the original MOU of 5/28/2008 ? **There is no "menu" of services. Whatever a client requests CCH will attempt to provide.**
5. Is the clinic mandated by federal or state regulation to provide particular services? Has this changed since the original MOU of 5/28/2008 ? **There is no "menu" of services. Whatever a client requests CCH will attempt to provide.**
6. Is there any document provided to the School Board and/or parents that details or lists the specific procedures that may be provided under the MOU service categories:
 - a. Primary Care
 - b. Evaluation and treatment of non-urgent, acute and chronic problems
 - c. Screening
 - d. Age appropriate reproductive health education and medical services
 - e. Preventative health care
 - f. Mental Health
 - g. Health promotion, prevention, and wellness activities
 - h. Referral to addictions counseling for students with alcohol or drug Issues **There is no "menu" of services. Whatever a client requests CCH will attempt to provide. There are no invasive services on site as there is no crash cart. Most clients are behavioral health. Medical is likely to be referred off site.**
7. What is the procedure to verify that a minor coming into the clinic has parental authorization to be there? (I.e., that an opt-out form was not filed by their parent with the school) **Oregon law is age 14 can consent to Behavioral Health, age 15 consent to medical. CCH views federal Title X to override state law, if a child comes in the door they believe they do not have the right to refuse service. Therefore, there is no process to verify if a child's parent has filed an "opt-out" form with the school.**
8. Does annual parental notification offering the ability to "opt-out" of access to the clinic include the list of service categories and specific procedures available at the clinic? **There is no "menu" of services. Whatever a client requests CCH will attempt to provide.**
9. How is parental notification documented? Is there confirmation of receipt of notification? **CCH will encourage clients to involve their parents, but will honor requests to not involve parents. Parental notification of the availability of the clinic is a school function. There is no process to verify if a child's parent has filed an "opt-out" form with the school.**
10. What is the process for determining when a parent should be contacted? **CCH will encourage clients to involve their parents, but will honor requests to not involve parents. Parental notification of the availability of the clinic is a school function. There is no process to verify if a child's parent has filed an "opt-out" form with the school.**

11. What is the procedure to verify that a client at the clinic is authorized to be on school grounds either during school hours or after school hours? **All clients are students registered in a Brookings or Harbor school. (May include private schools.)**
12. What statistical reporting is provided to the School Board on student and non-student usage at the clinic? **None. Some reports are available on State website.**
13. How are patient outcomes tracked and what reporting of patient outcome statistics is provided to the School Board? (i.e., how are quality and success measured) **Tracking is internal to CCH. No patient outcome reports are available publicly or to the School Board.**
14. Are there any differences in the way that procedures are provided at the on-campus clinic versus CCH's other (off-campus) clinics in Brookings? Particularly with respect to patient follow-up, access to prior medical records, coordination with primary care physicians, per procedure billing rates, invoice processing or reimbursements? **CCH has been credentialed with 14 plans. Rates are what are allowable per each plan. Most appointments are scheduled rather than walk in. Prescriptions are managed through the patient primary care. There is a small fridge on site for immunizations that need to be refrigerated. No invasive procedures.**
15. Are there multiple rate structures for identical procedures at the clinic? If so, how is it determined which rate structure applies to a client? What is the relationship between rates? (For example, what is the cost of service "XYZ" under each available rate structure?) **CCH has been credentialed with 14 plans. Rates are what are allowable per each plan. If a patient is not insured, CCH will attempt to sign them up for a plan, possibly Medicaid or the Oregon plan.**
16. Are there any differences in the way employees are cleared or authorized (i.e., background checks) for working at the BHHS clinic versus other CCH clinics? **No. It's the same.**
17. What is the process for determining what is displayed on the literature racks in the clinic? **It is all either provided by the State or approved by the State.**
18. Is the School Board or Superintendent involved in or notified of the literature selection process? **No.**
19. Is there any literature (not patient notifications) that CCH is required by state or federal regulation to provide in the clinic? **Need to get back on that.**
20. Asked by Jim during meeting: As we don't see the brochure "Rational Enquirer" as having a neutral point of view, is there a process for allowing literature with a competing point of view to be added to the literature rack? **Need to get back on that.**