



Ventura County Community Health Center (CHC) Board Meeting Minutes

John Fankhauser, MD
Ventura County HCA,
Interim Director

Meeting Minutes
February 26, 2026
12:30 - 2:00 PM

CHC BOARD MEMBERS:

RALPH REYES, District 3
Chair

2240 E Gonzales Rd,
Suite 200
Oxnard, CA 93036

LORETTA DENERING DrPH, MS,
District 2
Vice Chair

Vikram Kumar, MD
Ventura County Ambulatory Care
Chief Executive Officer
CHC Executive Director

ESPY GONZALEZ, District 2
Secretary

Marth Ann Knutson
County of Ventura
Assistant County Counsel

JAMES MASON, District 5
Treasurer

RENEE HIGGINS, MD, District 3

Chaya Turrow
Ventura County Ambulatory Care
CHC Co-Applicant Board Clerk

ROGER ROBINSON, District 2

RENA SEPULVEDA, District 1

Call to Order:

Loretta Denering called the meeting to order at 12:29 PM.

1. Roll Call

Ralph Reyes	Absent
Loretta Denering, DrPH, MS	Present
Espy Gonzalez	Present
James Mason	Absent
Renee Higgins, MD	Present
Roger Robinson	Absent
Rena Sepulveda	Absent

Quorum was not present; therefore we cannot move forward with voting actions.

2. Ventura County Staff Present

Vikram Kumar, MD, HCA – Ambulatory Care
Martha Knutson – County Counsel
Allison Blaze, MD, HCA – Ambulatory Care

Lizeth Barretto, HCA – Ambulatory Care
Octavius Gonzaga, HCA – Ambulatory Care
Jason Cavender, HCA – Ambulatory Care
Cynthia Fenton, HCA – Ambulatory Care
Grissel Marquez, HCA – Ambulatory Care
Dee Pupa, HCA – Health Care Plan
Amy Peake – Supervisor ___ Office

Public Present

Hannah Bartels
Roberto ___

3. Public Comments - None

Action Items:

4. Approval of CHC Board Meeting Agenda for February 26, 2026

We did not have quorum; therefore, this agenda was not approved.

5. Approval of CHC Minutes for January 22, 2026

We did not have quorum; therefore, the minutes for January 22, 2026 were not approved. The January minutes will be put on the March 26, 2026 agenda for approval.

6. Review and Approve 2026 Federal Poverty Level Guidelines and Discount Schedule

Lizeth Barretto shared the 2026 Federal Poverty Level Guidelines and Discount Schedule. There was not a change to the SFDP Discount Schedule from the previous year, and the Federal Poverty Level Guidelines have been updated based on the 2026 numbers provided by the Federal Government.

Since there was no quorum, the report will be added to the March agenda for approval.

7. Review and Approve 2026 Hours of Operation

Dr. Blaze and Lizeth Barretto shared the updated Hours of Operation. Many of the updates were focused on updating the opening or closing hours from half an hour or a full hour. John Flynn shows the hours that it will have, pending the opening of the site. Santa Paula Hospital Clinic is currently operating intermittently and will change in April to only being open on Wednesdays and Thursdays.

Board Vice Chair Denering asked if these hours usually go through Labor for approval? Dr. Blaze said no, but we give them a 21-day notice.

Ms. Barretto also said that some sites are at 40 hours per week are moving to 'intermittent'. We already did this with the Health Care for the Homeless program and are looking to do the same with Las Posas.

Since there is no quorum, the approval of the 2026 Hours of Operation cannot happen. The approval will move to the March 26, 2026 meeting.

Presentation Items:

8. Behavioral Health Presentation

Grissel Marquez shared updates from the CPSP (Comprehensive Perinatal Services Program) that has been implemented throughout Ambulatory Care. The program offers perinatal and postpartum counseling and nutrition appointments once during each trimester, then one or two postpartum, in addition to an orientation and initial assessment.

Ms. Marquez said that the team has been working on workflows for perinatal care. There was previously no set standard of operations. The new workflows identify the needs of the clinic and how they integrate the services already provided. They coach and support peers, provide billing and documentation training, consultations, ongoing monthly trainings to PHW, compliance and oversight of program, and implement staff development. The team also retrains perinatal health workers. They are also collaborating with Gold Coast Health Plan.

All CPHWs report to clinic leadership and have a regional manager to report to with procedures. There are two leads that meet with CPHWs one-on-one to provide trainings and consultations.

We are just beginning to make the changes with the Call Center and clinic collaboration. Beginning patient education and establishing rapport with patients and learning how to complete intake forms. MediCal patients will be enrolled in the CPSP program with consent.

Ms. Barretto said that this is a great service for patients and the only unlicensed service that is billable in an FQ setting. We were previously missing billable encounters. Non-MediCal patients can still receive services but will not be billed.

Dr. Kumar shared that, additionally, our clinics and service lines have fantastic women's health programs, and this is an important piece. Ms. Marquez mentioned that the team is also focusing on the birth equity programs.

Board Member Higgins asked how many visits are expected? Ms. Marquez said it varies, especially since some patients will only do the initial assessment and not all sessions. Dr. Blaze said that every clinic is different with volume, so it is hard to get an accurate count. The team is working on developing a dashboard for billing, which will give a more accurate visit count.

Ms. Marquez also said that the team has a CPSW who is working on lactation consultation and all but one CPSW is bilingual, with Mixteco interpreters being available within the clinics.

Discussion Items:

9. Review of the 2025 Annual Activity Report

Ms. Turrow shared the 2025 Annual Activity Report. Updates included updating the Organizational Chart to include Dr. Kumar, changing the population numbers (all stayed pretty similar to 2023), adjusting the UDS numbers, and moving some of the Top 5 Diagnoses around. The 2024-25 Activity Highlights included adding in an overview of the Strategic Plan, AI Scribe Program, Well-Child Passport, and Process Improvement Strategies. Additionally, there is a detailed run-down of the FTCA Deeming Process and a callout for VCCHC receiving the Bronze Health Center Quality Leader CQHR Badge from HRSA.

10. Continued Business
a. UDS Review

Ms. Turrow shared just a couple slides regarding the UDS submission that was submitted on February 13th. Overall, there was a slight decrease in patients from 2024 to 2025, but an increase in homeless individuals. In-person vs virtual patients, sex at birth, and insurance type all stayed about the same percentages from 2024 to 2025. Some highlights included an increase in Breast Cancer Screenings, Cervical Cancer Screenings, Colorectal Cancer Screenings, Weight Assessment and Counseling visits, Tobacco Use Screening and Cessation Intervention, and Childhood Lead Test Screening.

Board Secretary Gonzalez asked where we ask patients about their homeless status. Dr. Kumar said that we tend to under-report insecurities and we don't have a good mechanism for this. There are opportunities for us to improve. It is a balance between too much data but not breaching privacy.

Ms. Turrow said that the team is still anticipating the final review questions from HRSA and the quality and data team will provide a full report at the May meeting.

11. Ambulatory Care Chief Executive Officer Update

Compliance – Dr. Kumar shared that Rhondi Shannon, our new Compliance Officer, is auditing telehealth documentation and processes for the previous year. Telehealth rules have tightened since the pandemic, so improvements are expected and will be reported to the Board.

Strategic Plan – The Leadership Team has put a focus on Process Improvement across access, finance, quality, and patient/provider experience.

Access Priorities:

- Streamlining call center and outreach processes
- Reducing no-shows and do better filling open appointment slots
- Improving referral turnaround times

Fiscal Priorities:

- Reducing chart completion delays that affect billing
- Improving cash collection for co-pays, self-pay, etc.
- Analyzing service lines for sustainability

Quality Priorities:

- Maintaining strong performance in both QIP and QIPP

We are strengthening our contracts' performance management and the expectations for each contract. We are planning the first formal staff experience survey to understand staff wellness.

Access: Process Improvement Initiatives

This will include the Call Center, Schedule Utilization, Urgent Care, and Referral

Management. Each priority area will have a dedicated improvement team with frontline staff, leaders, providers, and executive sponsors. For example, Dr. Cho is sponsoring the Call Center Improvement Initiative.

Access and Volume Trends - The overall system visits increased from 2024 to 2025.

Primary Care saw a slight decline but was stable considering there was a loss of assigned lives, the countywide MediCal shrinkage, ending our Dignity Health contract, and there being fewer PCPs due to resignations.

Specialty Care saw modest growth. Urgent Care saw an 8.8% decline in 2025. This was worsened during the immigration enforcement period. There are ongoing discussions about opening an Urgent Care in Santa Paula.

Managing Change – Dr. Kumar shared that the Medi-Cal enrollment continues to drop monthly. Ambulatory Care lost almost 5,000 assigned lives from 2024 to 2025. Declining assigned lives may impact encounter volume and ultimately quality payments. A work group is focused on communications, logistics, and data to mitigate this.

Managing Staff – There is still a hiring freeze throughout the county; even backfilling resigned positions requires multiple layers of approval. The priority is maintained for patient-facing roles. We have a few provider retirements anticipated for mid-year, so recruitment for these positions has already begun.

12. **Board Comments** - None

13. **Staff Comments** - None

14. **Adjournment – 1:34pm**

Audio files of the CHC Co-Applicant Board meetings are available by contacting the CHC Co-Applicant Board Clerk at chcboardclerk@ventura.org

Minutes submitted by: Chaya Turrow, CHC Board Clerk

**Next Meeting: Thursday, March 26, 2026
2240 E Gonzalez Rd, Suite 200, Oxnard, CA 93036**