

## Legislation Details (With Text)

<b>File #:</b>	21-0967	<b>Version:</b>	1	<b>Name:</b>	Patient Survey Results
<b>Type:</b>	GC Agenda Item	<b>Status:</b>		<b>Status:</b>	GC Discussion Items
<b>File created:</b>	6/21/2021	<b>In control:</b>		<b>In control:</b>	Lake County Community Health Center Governing Council
<b>On agenda:</b>		<b>Final action:</b>		<b>Final action:</b>	7/13/2021
<b>Title:</b>	Patient Survey Results - Riley				
<b>Sponsors:</b>					
<b>Indexes:</b>					
<b>Code sections:</b>					
<b>Attachments:</b>	1. Patient Survey Results 5.25.21				

Date	Ver.	Action By	Action	Result
------	------	-----------	--------	--------

### Patient Survey Results - Riley

Attached are the results of a random phone survey done by the Patient Accounts team as a follow up to validate our sliding fee process and nominal fee levels, and in preparation for the upcoming HRSA site visit.

None, for information only.