



C. L. Brumback

Primary Care Clinics

Health Care District Palm Beach County

BOARD OF DIRECTORS

January 24, 2024

12:30 P.M.

Meeting Location

1515 N. Flagler Drive, Suite 101

West Palm Beach, FL 33401

If a person decides to appeal any decision made by the board, with respect to any matter at such meeting or hearing, he will need a record of the proceedings, and that, for such purpose, he may need to ensure that a verbatim record of the proceedings made, which record includes the testimony and evidence upon which the appeal is to be based.



**BOARD OF DIRECTORS MEETING
AGENDA
January 24, 2024
1515 N. Flagler Drive, Suite 101
West Palm Beach, FL 33401**

Remote Participation Link: <https://zoom.us/j/5507895592?pwd=REZ4TWtYUXowQWNpWTBaVXRzZ1dDQT09>

Telephone Dial-in Access: (646) 558-8656 / Meeting ID: 550 789 5592 / Password: 94650

- 1. Call to Order – Melissa Tascone, Chair**
 - A. Roll Call
 - B. Affirmation of Mission: To provide compassionate, comprehensive health services to all Palm Beach County residents, through collaboration and partnership, in a culturally sensitive environment.
- 2. Agenda Approval**
 - A. Additions/Deletions/Substitutions
 - B. Motion to Approve Agenda
- 3. Awards, Introductions and Presentations**
 - A. Health Resources & Services Administration (HRSA)
(HRSA)
- 4. Disclosure of Voting Conflict**
- 5. Public Comment**
- 6. Meeting Minutes**
 - A. **MOTION TO APPROVE:**
Board Meeting Minutes of December 13, 2023 [Pages 1-7]
- 7. Consent Agenda – Motion to Approve Consent Agenda Items**
 - A. **ADMINISTRATION**
 - 7A-1 **RECEIVE AND FILE:**
January 2024 Internet Posting of District Public Meeting
<https://www.hcdpbc.org/resources/public-meetings>

**C. L. Brumback Primary Care Clinics
Board of Directors Meeting
Agenda
January 24, 2024**

7A-2 **RECEIVE AND FILE:**
Attendance Tracking [Page 8]

7A-3 **RECEIVE AND FILE:**
HRSA Digest
(Jesenia Montalvo) [Pages 9-15]

B. FINANCE

7B-1 **MOTION TO APPROVE:**
District Clinic Holdings, Inc. Financial Report November 2023
(Jessica Cafarelli) [Pages 16-33]

8. Regular Agenda

A. ADMINISTRATION

8A-1 **MOTION TO APPROVE:**
Compliance with HRSA Monthly Meeting Requirement
(Candice Abbott) [Pages 34-35]

8A-2 **MOTION TO APPROVE:**
Nomination of New Clinic Board Member
(Candice Abbott) [Pages 36-37]

B. EXECUTIVE

9B-1 **RECEIVE AND FILE:**
Executive Director Informational Update
(Candice Abbott) [Pages 38-39]

C. CREDENTIALING

8C-1 **MOTION TO APPROVE:**
Licensed Independent Practitioner Credentialing and Privileging
(Dr. Charmaine Chibar) [Pages 40-42]

D. QUALITY

8D-1 **MOTION TO APPROVE:**
Quality Report
(Dr. Charmaine Chibar) [Pages 43-81]

**C. L. Brumback Primary Care Clinics
Board of Directors Meeting
Agenda
January 24, 2024**

E. OPERATIONS

8E-1 **MOTION TO APPROVE:**
Operations Report- December 2023
(Marisol Miranda) [Pages 82-89]

8F-1 **Staff Recommends a MOTION TO APPROVE:**
Patient Relations Report- December 2023 (Q4)
(Alexa Goodwin) [Pages 90-92]

9. Candice Abbott, Executive Director of FQHC Services Comments

10. Board Member Comments

11. Establishment of Upcoming Meetings

February 28, 2024 (HCD Board Room)

12:30 p.m. Board of Directors

March 27, 2024 (HCD Board Room)

12:30 p.m. Board of Directors

April 24, 2024 (HCD Board Room)

12:30 p.m. Board of Directors

May 22, 2024 (HCD Board Room)

12:30 p.m. Board of Directors

June 26, 2024 (HCD Board Room)

12:30 p.m. Board of Directors

July 24, 2024 (HCD Board Room)

12:30 p.m. Board of Directors

August 28, 2024 (HCD Board Room)

12:30 p.m. Board of Directors

September 25, 2024 (HCD Board Room)

12:30 p.m. Board of Directors

**C. L. Brumback Primary Care Clinics
Board of Directors Meeting
Agenda
January 24, 2024**

October 23, 2024 (HCD Board Room)

12:30 p.m. Board of Directors

November 20, 2024 (HCD Board Room)

12:30 p.m. Board of Directors

December 18, 2024 (HCD Board Room)

12:30 p.m. Board of Directors

12. **Motion to Adjourn Public Meeting Immediately following the Conclusion of the Closed Meeting**

13. **Closed Meeting: [Under Separate Cover]
Closed Pursuant to Florida Statute Ch. 766.101 and 768.28**

**District Clinic Holdings, Inc.
d.b.a. C.L. Brumback Primary Care Clinics
Board of Directors Meeting
Summary Minutes
12/13/2023**

Present: Melissa Tascone - Chair; Mike Smith- Vice-Chair; Joseph Gibbons – Secretary; Julia Bullard; Boris Seymore; Tammy Jackson-Moore (ZOOM)
Absent: Alcolya St. Juste
Excused: William Johnson - Treasurer; Robert Glass
Staff: Darcy Davis (ZOOM); Dr. Belma Andric; Bernabe Icaza; Candice Abbott; Jessica Cafarelli; Dr. Charmaine Chibar; Alexa Goodwin; Marisol Miranda; Robin Kish; Macson Florvil; Heather Bokor; Maria Chamberlin; Andrea Steele (ZOOM); Angela Santos; Shauniel Brown; Alyssa Tartar; John Van Arnam (ZOOM); Gina Kenyon; Monica Georgelis; David Speciale;

Minutes Transcribed By: Gina Kenyon

The meeting is scheduled for 12:30pm.
Meeting Began at 12:37pm.

AGENDA ITEM	DISCUSSION	ACTION
1. Call to Order 1A. Roll Call 1B. Affirmation of Mission	Ms. Tascone called the meeting to order. Roll call was taken and a quorum was established. Ms. Tascone read the affirmation of mission.	The meeting was called to order at 12:37 p.m.
2. Agenda Approval 2A. Additions/Deletions/ Substitutions 2B. Motion to Approve Agenda Items	None.	VOTE TAKEN: Mr. Joseph Gibbons made a motion to approve the agenda. Mr. Mike Smith duly seconded the motion. A vote was called and the motion passed unanimously.

3. Awards, Introductions & Presentations	Ms. Abbott gave a short presentation about our CLB Primary Care Clinics Annual Meeting. There was also a slide show of pictures.	No action necessary.
4. Disclosure of Voting Conflict	None.	No action necessary.
5. Public Comment	None.	No action necessary.
6. Meeting Minutes A. Staff Recommends a MOTION TO APPROVE: Board meeting minutes of November 28, 2023	There were no changes or comments to the minutes dated November 28, 2023.	VOTE TAKEN: As presented, Mr. Joe Gibbons made a motion to approve the Board meeting minutes from November 28, 2023. Mr. Mike Smith duly seconded the motion. A vote was called, and the motion passed unanimously.
7. Consent Agenda – Motion to Approve Consent Agenda Items		VOTE TAKEN: Mr. Joseph Gibbons motioned to approve the Consent Agenda. Mr. Mike Smith duly seconded the motion. A vote was called, and the motion passed unanimously.
A. ADMINISTRATION		
7A-1. Receive & File: November 28, 2023 Internet Posting of District Public Meeting	The meeting notice was posted.	Received & Filed. No further action is necessary.
7A-2. Receive & File: Attendance tracking	Attendance tracking was updated.	Received & Filed. No further action is necessary.

7A-3. Receive & File: HRSA Digest	Per the request of the clinic Board, the latest HRSA Digest was provided.	Received & Filed. No further action is necessary.
7A-4. Receive & File: Compliance, Privacy & Ethics Annual Board Education	This item presents annual education on Compliance, Privacy & Ethics for the Health Care District of Palm Beach County (“HCD”).	Received & Filed. No further action is necessary.
7A-5. Motion To Approve: Policy Updates	This item presents the Hearing, Speech & Sight Policy, Limited English Proficiency (LEP) Policy, Peer Review Policy and After Hours Policy.	Motion approved unanimously.
B. FINANCE		
7B-1. Motion To Approve: DCH, Inc. Financial Report October 2023	This agenda item recommends the Board approve the October 2023 Financials which were provided in the Board packet.	Motion approved unanimously.
8. REGULAR AGENDA		
A. ADMINISTRATION:		
8A-1. Staff Recommends a Motion to Approve: Change in Scope of Services for Form 5A Required Services	<p>Ms. Candice Abbott presented the CLB PCC request to remove the following services from HRSA Form 5A Column II Scope of Services.</p> <ul style="list-style-type: none"> • Screenings • Gynecological Care • Prenatal Care • Intrapartum Care (Labor & Delivery) • Postpartum Care <p>Please recognize that we will still be performing all of these services. Column II is just representation of services that the clinics do not pay for within the HRSA scope. It is just really a formality to remove it from that column as recognized by HRSA. We will continue referring to the FDOH for screenings, gynecological care and we actually also have an understanding for any of our high risk pregnancies. We have an MOU to an OB Hospitalist Group for that intrapartum care on an as needed basis.</p>	VOTE TAKEN: Mr. Joseph Gibbons motioned to approve the Change in Scope of Services for Form 5A Required Services & Mr. Mike Smith duly seconded the motion. The motion passed unanimously.
8A-2. Staff Recommends a Motion to Approve: Patient Satisfaction Survey	Ms. Alexa Goodwin presented the 2023 Patient Satisfaction Survey Report.	VOTE TAKEN: Mr. Joseph Gibbons motioned to approve the PSS & Ms. Julia Bullard duly seconded the motion. The motion passed unanimously.

8A-3. Staff Recommends a Motion to Approve: Local Prevailing Rates – FACHC Fee Schedule Analysis	<p>Ms. Candice Abbott presented the FACHC Fee Schedule for local prevailing rates. Every year, our local prevailing rates policy advises that we have to basically compare all of our charges to how we compare to other like entities, so we compare ourselves to other FQHCs. We ask the FACHC to take our charge master and compare ourselves to other FQHCs to see how we compare. How we set our prices, is we compare ourselves around 1.5 times the Medicare fee schedule.</p>	VOTE TAKEN: Mr. Mike Smith motioned to approve the Local Prevailing Rates – FACHC Fee Schedule Analysis & Mr. Joseph Gibbons duly seconded the motion. The motion passed unanimously.
B. EXECUTIVE		
8B-1 RECEIVE AND FILE: Executive Director Informational Update	None.	No action necessary.
C. CREDENTIALING		
8C-1 Staff Recommends a MOTION TO APPROVE: Licensed Independent Practitioner Credentialing and Privileging.	None.	No action necessary.
D. QUALITY		
8D-1. Staff Recommends a MOTION TO APPROVE: Quality Reports	<p>This agenda item presents the updated Quality Improvement & Quality Updates:</p> <ul style="list-style-type: none"> • Quality Council Meeting Minutes – December 2023 • UDS Report – YTD • Provider Productivity – November 2023 <p>Dr. Chibar presented the above topics and reviewed the UDS Report Dashboard.</p>	VOTE TAKEN: Mr. Joseph Gibbons made a motion to approve the Quality Reports as presented. Ms. Julia Bullard duly seconded the motion. A vote was called, and the motion passed unanimously.
E. OPERATIONS		

**8E-1. Staff
Recommends a
MOTION TO APPROVE:**
Operations Reports
November 2023

In November, the Health Centers had a total of 11,723 patient visits across clinics, which is down 13% from prior month. Of those, 8,490 were unique patients, also down 8% from prior month. Patients new to our health centers account for 23% of our total unique count. 37% of patients were from adult Primary Care, down 1% from last month, 23% from Dental, also down 1% from last month, 14% of patients were Pediatric, up 1% from last month. In November, Lantana had the highest volume of patients, followed by West Palm Beach, then Mangonia. This is consistent with last month's volumes.

Our payer mix for November remains consistent with previous months with 53% uninsured, 41% insured with a managed care plan and 5% insured by Medicaid.

60% of patients report as female and 40% male; 49% reported as white and 44% reported as Black or African American. The remaining 7% reported their race as Asian, multi-racial or other. 39% of patients report as Hispanic and 59% as non-Hispanic. And our largest age group continues to be those between the ages of 30-39 years old, representing 17% of total patients.

In November, 31% or 2,711 unique patients across all health centers reported as being homeless. The Lewis Center, St. Ann's and our Mangonia Center had the highest percentage of homeless patients ranging from 62%-92%. The center with the lowest reported homeless population was Belle Glade with 16% of total patients reporting homelessness.

Agricultural Workers averaged 4.5% between all of the Health Centers in November with a total of 385 patients. This has been a consistent figure as shown by the year to date total of 4.6% of the total patient population reported as agricultural. Belle Glade continues to be the health center that has the largest concentration with 30% of patients reporting to be Agricultural workers.

The language distribution by health center shows that English is the primary spoken language for most clinics, except for in Lantana where Spanish and Creole speaking patients more than double English-speaking patients. Delray has a growing population of Creole-speaking patients at 32%, which is up 2%

VOTE TAKEN: Mr. Joseph Gibbons made a motion to approve the Operations Reports- November 2023 as presented. Mr. Mike Smith duly seconded the motion. A vote was called, and the motion passed unanimously.

	<p>over last month. Boca continues to lead the rest of the centers with a population of Portuguese speaking patients at 12%. Other languages reported for November included French, Vietnamese, Bengali, Castilian and Russian.</p>	
9. Executive Director of FQHC Services Comments	<p>Ms. Candice Abbott stated that she just received a message that the HRSA OSV pre-site call is scheduled for 9:00am on Thursday, December 14th.</p>	No action necessary.
10. Board Member Comments	<p>None.</p>	No action necessary.
11. Establishment of Upcoming Meetings	<p><u>January 24, 2024 (HCD Board Room)</u> 12:30 p.m. Board of Directors</p> <p><u>February 28, 2024 (HCD Board Room)</u> 12:30 p.m. Board of Directors</p> <p><u>March 27, 2024 (HCD Board Room)</u> 12:30 p.m. Board of Directors</p> <p><u>April 24, 2024 (HCD Board Room)</u> 12:30 p.m. Board of Directors</p> <p><u>May 22, 2024 (HCD Board Room)</u> 12:30 p.m. Board of Directors</p> <p><u>June 26, 2024 (HCD Board Room)</u> 12:30 p.m. Board of Directors</p> <p><u>July 24, 2024 (HCD Board Room)</u> 12:30 p.m. Board of Directors</p> <p><u>August 28, 2024 (HCD Board Room)</u> 12:30 p.m. Board of Directors</p>	No action necessary.

	<p><u>September 25, 2024 (HCD Board Room)</u> 12:30 p.m. Board of Directors</p> <p><u>October 23, 2024 (HCD Board Room)</u> 12:30 p.m. Board of Directors</p> <p><u>November 20, 2024 (HCD Board Room)</u> 12:30 p.m. Board of Directors</p> <p><u>December 18, 2024 (HCD Board Room)</u> 12:30 p.m. Board of Directors</p>	
<p>12. Motion to Adjourn</p>	<p>Ms. Tascone motioned to adjourn the public meeting immediately following the Closed Meeting at 1:08 pm.</p>	<p>VOTE TAKEN: Mr. Joseph Gibbons made a motion to adjourn. Mr. Mike Smith duly seconded the motion. A vote was called, and the motion passed unanimously.</p>

Minutes Reviewed by: _____
Signature
Date

**C. L. Brumback Primary Care Clinics
Board of Directors**

Attendance Tracking

	01/25/23	02/22/23	03/29/23	04/27/23	05/24/23	06/28/23	07/26/23	08/23/23	09/26/23	10/25/23	10/31/23	11/28/23	12/13/23
Mike Smith	X	X	X	X	X	X	N/A	X	X	X	X	X	X
Melissa Tascone	X	X	X	X	X	X	N/A	X	X	E	X	X	X
Julia Bullard	X	X	X	E	X	X	N/A	A	E	X	X	X	X
Joseph Gibbons	X	X	X	X	X	X	N/A	X	X	E	X	E	X
John Casey Mullen	X	---	---	---	---	---	---	---	---	---	---	---	---
James Elder	A	---	---	---	---	---	---	---	---	---	---	---	---
Irene Figueroa	A	---	---	---	---	---	---	---	---	---	---	---	---
Tammy Jackson-Moore	E	A	E	E	E	A	N/A	E	E	E	X (ZOOM)	E	X (ZOOM)
Robert Glass	X (ZOOM)	X	X	X	A	X	N/A	X	X	X	X	X	E
William Johnson	X	X	X	X	X	X	N/A	X	X	X	X	X	E
Boris Seymore	----	X	A	A	X	A	N/A	A	A	A	A	X (ZOOM)	X
Alcolya St. Juste	----	A	X	X	X	X (ZOOM)	N/A	X	X	E	X	E	A
Quorum Established	Q	Q	Q	Q	Q	Q	No	Q	Q	No	Q	Q	Q

X= Present
C= Cancel
E= Excused
A= Absent
Q= Quorum

**CL BRUMBACK PRIMARY CARE CLINICS
BOARD OF DIRECTORS
JANUARY 24, 2024**

1. Description: HRSA Digest

2. Summary:

Per the request of the Clinic Board, we will include the latest HRSA Digest updates as available.

3. Substantive Analysis:

The November HRSA Digest highlighted Cervical Health Awareness Month, COVID-19 Response Program Enrollment Deadline, ECV, and Bridge Funding Reporting Requirements.

4. Fiscal Analysis & Economic Impact Statement:

	Current FY Amounts	Total Amounts (Current + Future)	Budget
Capital Requirements	N/A		Yes <input type="checkbox"/> No <input type="checkbox"/>
Net Operating Impact	N/A		Yes <input type="checkbox"/> No <input type="checkbox"/>

*Non-budgeted expenditures in excess of \$250,000 require Finance and Audit Committee review and Board approval.

Reviewed for financial accuracy and compliance with purchasing procedure:

DocuSigned by:

 CA6A21FF2E00812 Jessica Cafarelli
 Interim VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

N/A

 Committee Name

N/A

 Date

**CL BRUMBACK PRIMARY CARE CLINICS
BOARD OF DIRECTORS
JANUARY 24, 2024**

6. Recommendation:

Staff recommends the Board Receive and File the HRSA Digest.

Approved for Legal sufficiency:

DocuSigned by:
Bernabe Icaza

0CF6F7DB670643B Bernabe Icaza
SVP & General Counsel

DocuSigned by:
Jesenia Montalvo

D31F5A902D3B440 Jesenia Montalvo
Manager, Regulatory & Accreditation

DocuSigned by:
Candice Abbott

F637D209DB52427 Candice Abbott
SVP & Chief Operating Officer
Executive Director of FQHC Services

Cervical Health Awareness Month, COVID-19 Response Program Enrollment Deadline

Subscribe to updates from HRSA

HRSA sent this bulletin at 01/09/2024 10:16 AM EST

Email Address e.g. name@e

Share Bulletin



January 9, 2024



Cervical Health Awareness Month

This month offers a chance to focus on the critical role primary care plays in cervical health. According to Uniform Data System (UDS) data, health centers screened 54% of their female patients ages 23-64 for cervical cancer in 2022. More than 228,000 patients were diagnosed with abnormal cervical findings.



Join HRSA and the U.S. Department of Veterans Affairs for a webinar. Speakers will share innovations in cervical cancer prevention and screening. You'll also hear how Accelerating Cancer Screening (AxCS) awardees are increasing equitable access to cancer screening and referrals.

Accelerating Innovative Cervical Cancer Care

Thursday, January 25
1:00-2:00 p.m. ET
[Registration page](#)

HRSA and the Federal Cervical Cancer Collaborative partnered to develop resources for safety-net settings of care. Learn about their partnership and access a provider toolkit on [HRSA's website](#).

Office Hours and Deadline to Enroll in HRSA's COVID-19 Response Programs

Last week we announced that Friday, January 26, is the deadline to enroll in our remaining COVID-19 Response Programs to receive free testing supplies and therapeutics. See [the bulletin](#) if you missed it.

Join TODAY's Office Hours session to learn more:

1:00-2:00 p.m. ET
[Registration page](#)



After registering, you will receive an email with instructions on joining. Office Hours are open to all HRSA-supported health centers. If you can't attend, you can access the recording in the [Health Center Program Community](#).



Jump To: [Behavioral Health](#) | [HIV](#) | [Hypertension](#) | [Workforce](#) | [Telehealth](#) | [Additional Resources](#) | [Training Calendar](#)

HRSA-funded [National Training and Technical Assistance Partners \(NTTAPs\)](#) host or developed many of these events and resources. For more from the NTTAPs, visit the [Health Center Resource Clearinghouse](#).

What's New

DUE THURSDAY: ECV and Bridge Funding Reporting Requirement – Health Center COVID-19 Survey

Health centers using Expanding COVID-19 Vaccination (ECV) funds and HRSA COVID-19 Bridge funds are required to complete the monthly Health Center COVID-19 Survey. The January 5 survey is due by 11:59 p.m. *your local time* on Thursday, January 11. Please **ONLY** report **December** data in this survey.

If your health center received a project period extension for using ECV funds, you are expected to continue reporting via the survey until your extension concludes.



H80s: The survey email that you received on Friday, January 5, contained an error: The first link went to the look-alike survey (you would not have been able to select your H80 grant number). The survey link at the *end* of that email was fine. We sent a corrected email yesterday.

Our [COVID-19 Data Collection Survey Tool User Guide](#) can help you. If you still have questions, use the [BPHC Contact Form](#) (*COVID-19 > COVID-19 Surveys*).

FY 2024 HCCN NCC Progress Report Instructions Released

HRSA released the fiscal year (FY) 2024 Health Center Controlled Networks (HCCN) Non-Competing Continuation (NCC) progress report instructions yesterday. You must submit your progress report, and it must be approved by HRSA, to receive funding for the FY 2024 budget period of August 1, 2024, through July 30, 2025.

Progress report submissions are due in [HRSA's Electronic Handbooks \(EHBs\)](#) by 5:00 p.m. ET on Thursday, March 7.

Visit the [HCCN technical assistance \(TA\) webpage](#) for the instructions, the TA presentation, and additional resources. Submit questions to the HCCN Response Team via the [BPHC Contact Form](#) (*Non-competing Continuation (NCC) Progress Reports (e.g., BPR) > Health Center Controlled Network*).

FY 2024 NTTAP NCC Submission Due Date Extended to Friday, February 9

We extended the deadline for FY 2024 NTTAP NCC progress reports to **5:00 p.m. ET on Friday, February 9**. You must submit your progress report, and it must be approved by HRSA, to receive funding for the FY 2024 budget period of July 1, 2024, through June 30, 2025.

Visit the [NTTAP TA webpage](#) for TA resources or submit questions to the NTTAP Response Team via the [BPHC Contact Form](#) (*Non-competing Continuation (NCC) Progress Reports (e.g., BPR) > National Training and Technical Assistance Partner*).

UDS Office Hours to Help You Meet February 15 Deadline

We want to make sure you can submit your complete 2023 UDS report by Thursday, February 15.

Join one or both of our office hours for help preparing your health center's submission. Connect with experts to get answers, tips, personalized guidance, and assistance troubleshooting.

These sessions will focus on standard UDS reporting — *not* on UDS patient-level submissions (UDS+). Submit your questions on standard reporting during your registration. Submit questions about UDS+ via the [BPHC Contact Form](#) (*UDS Modernization > Patient-level Submission (UDS+)*).

Thursday, January 18
2:00-3:00 p.m. ET
[Registration page](#)

Wednesday, February 7
2:00-3:00 p.m. ET
[Registration page](#)

TA resources are available on the [UDS Training and TA website](#).

Health Center Loan Guarantee Program for Capital Projects

For help financing your health center's current or future infrastructure needs, consider applying for the Health Center Loan Guarantee Program (LGP). The program can reduce your costs by guaranteeing up to 80% of the financing needed for capital projects, including construction, expansion, alteration/renovation, and modernization. You may apply at any time, and there is no limit to the loan size you may request.

Training Calendar



Visit our [online calendar](#) for details on these and all scheduled events.

Through January 16

COVID-19 Response Program Office Hours

Tuesday, January 9
1:00-2:00 p.m. ET
[Registration page](#)

Using Patient-Centered Medical Homes to Improve Asthma Outcomes

Hosted by Renaye James
Healthcare Advisors
Wednesday, January 10
1:00-2:00 p.m. ET
[Registration page](#)

Using Self-Measured Blood Pressure Monitoring to Improve Maternal Health Equity and Reduce Maternal Mortality

Co-hosted by NACHC* with the American Medical Association
Thursday, January 11
1:00-1:45 p.m. ET
[Registration page](#)
****1.0 CME credit available****
*NACHC's funding is through a cooperative agreement with Million Hearts, which CDC and CMS fund.

HITEQ Highlights: Crossing the Chasm of Innovation – One FQHC's Journey to Operationalize its Telehealth Strategy

Hosted by the Health Information Technology, Evaluation, and Quality (HITEQ) Center
Thursday, January 11
1:00-2:00 p.m. ET
[Registration page](#)

MLP in Action: Using MLP to Understand and Address the Health-Harming Effects of Climate Change

Hosted by the National Center for Medical-Legal Partnership (NCMLP)
Thursday, January 11
1:00-2:00 p.m. ET
[Registration page](#)

HP-ET Programs for Staff Retention Case Study

Thursday, January 11
3:00-4:00 p.m. ET
[Registration page](#)

HRSA Grants 101 Virtual Workshop (in Spanish with live interpretation in English)

Tuesday, January 16,
through Thursday, January 18
Noon-4:30 p.m. ET
[Registration page](#)

Upcoming

Impact of HIV and Sexually Transmitted Infections (STIs) on Migratory and Seasonal Agricultural Workers (MSAWs) – Part 1: HIV in MSAW Communities

Hosted by the National Center for Farmworker Health
Wednesday, January 17
2:00-3:00 p.m. ET
[Registration page](#)

any time, and there is no limit to the loan size you may request.

View a [list](#) of health centers with active and completed loan guarantees (mapped below). Visit the [LGP webpage](#) to learn more, including how to apply.

Capital Link will host an overview of the program on Tuesday, February 6. The registration link is in the [sidebar](#).



Complete List of Health Professional Shortage Area Designations

HRSA published a [Federal Register Notice](#) announcing the complete list of Health Professional Shortage Area (HPSA) designations. It reflects the updated list of designated HPSAs and withdraws all HPSAs in a "proposed for withdrawal" status as of Saturday, December 2, 2023. See a [bulletin](#) for more.

Expanded Medicare Part D Low-Income Subsidy Has Begun

CMS' [Low-Income Subsidy \(LIS\) Program](#) (also known as Extra Help) provides premium and cost-sharing assistance for low-income Medicare beneficiaries enrolled in Medicare Part D. The way this program operates changed with the new year. See [our December 26 issue](#) for details.

The Commonwealth Fund 2023-2024 National Survey of FQHCs

We encourage you to participate in The Commonwealth Fund's (CWF) survey of FQHCs! CWF will share results with us and the National Association of Community Health Centers (NACHC). They will also share publications and reports with relevant federal and congressional policymakers, particularly results related to funding and other policy issues.

Social Science Research Solutions is conducting the survey on CWF's behalf. They sent packets by FedEx in October and November. These contained instructions, the survey, and a check for \$125 to thank your health center for participating.

The deadline to complete the survey is Wednesday, February 28. Questions? Contact Hope Wilson at CWF by phone (800-633-1986, Ext. 4325) or [email](#).

Behavioral Health

Effective Behavioral Health Strategies for Primary Care Settings

This Community of Practice (CoP) offers practice-focused sessions on skills and techniques for health center settings. Topics include patient-centered care planning, enhanced cultural relevance in clinical practice, and motivational interviewing, brief consultation, and strategies for supporting behavioral activation. Visit the [registration page](#) for details, including session dates and times. ****1.0 CE available for each session****

Changes in Federal Regulation Regarding Medical Providers Prescribing Buprenorphine

Our webinar will review the latest updates in DATA Waiver and DEA training prerequisites for prescribing medications for opioid use disorder (MOUD), such as buprenorphine.

Thursday, January 18
1:00-1:30 p.m. ET
[Registration page](#)
****0.5 CE available****

HRSA Funding Opportunity: Behavioral Health Integration Evidence-Based Telehealth Network Program

This HRSA [funding opportunity](#) promotes the integration of behavioral health services into primary care settings using telehealth technology. Join the TA webinar to learn more.

Wednesday, January 17
3:30-4:30 p.m. ET
[Join the day of the session](#)

Changes in Federal Regulation Regarding Medical Providers Prescribing Buprenorphine

Thursday, January 18
1:00-1:30 p.m. ET
[Registration page](#)
****0.5 CE available****

UDS Reporting Office Hour 1

Thursday, January 18
2:00-3:00 p.m. ET
[Registration page](#)

PCHP Awardees FY 2020 Updates and Live Q&A

Thursday, January 18
2:00-3:00 p.m. ET
[Registration page](#)

Today with Macrae: Health Center Program Updates

Tuesday, January 23
3:00-4:00 p.m. ET
[Join the day of the session](#)
Join by phone: 833-568-8864
Webinar ID: 161 594 2198

Health Center Emergency Preparedness for Survivors of IPV + Exploitation: Multidisciplinary Collaborations to Address Legal Needs

(in English with live interpretation in ASL and Spanish)
Hosted by Health Partners on IPV + Exploitation and NCMLP
Tuesday, January 23
3:00-4:00 p.m. ET
[Registration page](#)

Impact of HIV and STIs on MSAWs – Part 2: STIs in MSAW Communities

Hosted by the National Center for Farmworker Health
Wednesday, January 24
2:00-3:00 p.m. ET
[Registration page](#)

Accelerating Innovative Cervical Cancer Care

Co-hosted with the U.S. Department of Veterans Affairs
Thursday, January 25
1:00-2:00 p.m. ET
[Registration page](#)

HITEQ Highlights: PrEP Process Mapping Team Toolkit

Hosted by the HITEQ Center
Tuesday, January 30
2:00-3:00 p.m. ET
[Registration page](#)

The Intersection of Age and Health Equity

Hosted by the National Center for Equitable Care for Elders
Wednesday, January 31
1:00-2:00 p.m. ET
[Registration page](#)

Fostering Leaders that Support Well-being and Retention

Thursday, February 1
2:00-3:00 p.m. ET
[Registration page](#)

HRSA's Loan Guarantee Program: An Overview

Hosted by Capital Link
Tuesday, February 6
2:00-3:00 p.m. ET
[Registration page](#)

UDS Reporting Office Hour 2

Wednesday, February 7
2:00-3:00 p.m. ET
[Registration page](#)

Webinars are hosted by HRSA



unless otherwise noted.

Progress Reporting Webinar for FY 2020 PCHP Recipients' Use of Additional FY 2023 PCHP Funding

This TA webinar — with live Q&A — is for health center recipients of FY 2020 Primary Care HIV Prevention (PCHP) funding to discuss required progress reporting on their use of additional FY 2023 PCHP funding.

Thursday, January 18
2:00-3:00 p.m. ET
[Registration page](#)

Visit the [PCHP TA webpage](#) for award recipient information and other resources. We also released [new training and TA resources](#) addressing the top HIV prevention TA areas requested by health centers.

Hypertension

Controlling Hypertension Learning Collaborative: The Four Most Impactful Strategies

NACHC offers a chance to learn about the strategies that high-performing health centers have used to improve patients' blood pressure control. You'll learn the Practical, Robust, Implementation and Sustainability Model (PRISM). Visit the [registration page](#) for details.

Workforce

Workforce Well-being TA

We created these webinars in response to the results of HRSA's Workforce Well-being Survey.

- **Health Professionals Education and Training Programs for Staff Retention Case Study**

This is an interactive case study on retaining staff by building a health professions education and training (HP-ET) program. Presenters from Aviva Health (a HRSA-funded health center in Oregon) will discuss their medical assistant training program and how they examined its gaps and created a new program to address their needs.

Thursday, January 11
3:00-4:00 p.m. ET
[Registration page](#)

- **Fostering Leaders that Support Well-being and Retention**

We'll discuss the driving factors that make great leaders and ways these leaders can build and grow a culture of well-being at a health center.

Thursday, February 1
2:00-3:00 p.m. ET
[Registration page](#)

Reminder: THIS Friday, January 12, is the deadline to apply for [three CoPs](#) we're launching to address outcomes and drivers from the survey.

NTTAP Learning Collaboratives

Visit the registration pages for dates, times, and more information:

- **Improving Patient Safety in Health Centers Using Technology-Driven PDSA Methods**

Learn the Plan-Do-Study-Act (PDSA) methodology for four topic areas. You'll establish aims and SMART goals for patient safety measures. Speakers will provide examples, recommend the composition of PDSA teams, and share how to use technology in this work. Visit the [application page](#) to apply by Monday, February 5. Renaye James Healthcare Advisors hosts this opportunity.

- **Evaluating Patient Experience to Promote Health Equity**

The National Nurse-led Care Consortium invites you to focus on patient experience and its role in advancing health equity. You'll test their patient experience assessment tool. It aligns with HRSA's Advancing Health Center Excellence framework. It also provides health centers with an objective means of assessing how they consider patient experience in their policies, operating hours, and communications, as well as in how they address technology disparities. [Registration page](#).

- **Controlling Hypertension: The Four Most Impactful Strategies**

[See the announcement above](#).

- **2024 Community Housing Asset Mapping**

The Corporation for Supportive Housing invites you to a series of virtual sessions and peer discussions. You'll learn from one

another and experts) how to address challenges in accessing housing resources for homeless and at-risk patients. Topics include local housing resources, systems that support those with housing needs, and how to create partnerships to address needs. [Application page.](#)

Health Centers: Participate in a Workforce Study

HRSA's Bureau of Health Workforce funds the George Washington University's Health Workforce Research Center on Emerging Health Workforce Topics. Researchers want to interview health center staff for insights on burnout, moral injury, and retention. (Yes, they have seen our workforce well-being survey results.) Their goal is to identify areas for investment, further research, or policy change. If your health center would like to volunteer, contact [Candice Chen](#).

Telehealth

HRSA Funding Opportunity: Behavioral Health Integration Evidence Based Telehealth Network Program

[See the announcement above.](#)

Additional Resources

Suicide Prevention and Risk Assessment Strategies for LGBTQ+ Communities

The stunningly disproportionate rate of self-induced deaths among LGBTQ+ individuals is an ongoing emergency. Health center providers serve sexual and gender minority people every day, but adequate preparation for supporting these populations is rarely offered in professional training. [This publication](#) highlights some of the pressures that lead sexual and gender minority people to suicide, what factors elevate or lower self-harm risk, and interventions to help LGBTQ+ people build resilience in a hostile world.



In case you missed it:
[Visit the Primary Health Care Digest archive.](#)

Do you forward the Digest to others?
Encourage them to [subscribe](#).



[Sign up for eNews](#)

[More HRSA email updates / Unsubscribe](#) | [Help Health Resources and Services Administration](#)

5600 Fishers Lane | Rockville, MD 20857

Powered by



[Privacy Policy](#) | [Cookie Statement](#) | [Help](#)

**CL BRUMBACK PRIMARY CARE CLINICS
BOARD OF DIRECTORS
January 24, 2024**

1. Description: District Clinic Holdings, Inc. Financial Report November 2023

2. Summary:

The November 2023 financial statements for the District Clinic Holdings, Inc. are presented for Board review.

3. Substantive Analysis:

Management has provided the income statements and key statistical information for District Clinic Holdings, Inc. Additional Management discussion and analysis is incorporated into the financial statement presentation.

4. Fiscal Analysis & Economic Impact Statement:

	Current FY Amounts	Total Amounts (Current + Future)	Budget
Capital Requirements	N/A		Yes <input type="checkbox"/> No <input type="checkbox"/>
Net Operating Impact	N/A		Yes <input type="checkbox"/> No <input type="checkbox"/>

*Non-budgeted expenditures in excess of \$250,000 require Finance and Audit Committee review and Board approval.

Reviewed for financial accuracy and compliance with purchasing procedure:

DocuSigned by:

 CA6A21FF2109413a.Cafarelli
 Interim VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

N/A

 Committee Name

N/A

 Date

**CL BRUMBACK PRIMARY CARE CLINICS
BOARD OF DIRECTORS
January 24, 2024**

6. Recommendation:

Staff recommends the Board approve the November 2023 District Clinic Holdings, Inc. financial statements.

Approved for Legal sufficiency:

DocuSigned by:
Bernabe Icaza
0CF6F7DB670643 Bernabe Icaza
SVP & General Counsel

DocuSigned by:
Jessica Cafarelli
CA6A21FF2E09481 Jessica Cafarelli
Interim VP & Chief Financial Officer

DocuSigned by:
Candice Abbott
F637D209DB52627 Candice Abbott
SVP & Chief Operating Officer



MEMO

To: Finance Committee
From: Jessica Cafarelli
Interim VP, Chief Financial Officer
Date: January 24, 2024

Subject: Management Discussion and Analysis as of November 2023 C.L. Brumback Primary Care Clinic Financial Statements.

The November financial statements represent the financial performance through the second month of the 2024 fiscal year for the C.L. Brumback Primary Care Clinics. On the Comparative Statement of Net Position, cash increased \$715k as a result of normal operations. Due from Other Governments increased \$860k as a result of grant recognition.

On the Statement of Revenues and Expenses, net patient revenue YTD was favorable to budget by \$762k or 50.5% primarily due to increased patient visits. Increased patient visits also contributed to Gross patient revenue YTD being favorable to budget by \$716k. Total YTD revenues were favorable to budget by \$420k or 13.7%. Operational expenses before depreciation were favorable to budget by \$1.6M due to expense timing and staffing vacancies. Positive variances YTD were in salaries, wages, and benefits of \$1.1M, purchased services of \$191k, medical supplies \$130k, other supplies of \$75k, and other expense of \$69k. Total YTD net margin was a loss of (\$3.2M) compared to the budgeted loss of (\$5.9M) resulting in a favorable variance of \$2.7M or (45.9%).

Net patient revenue YTD for the Medical clinics was unfavorable to budget by \$(86k). The Medical clinics YTD gross patient revenue was favorable to budget by \$570k due to increased patient volumes. The Medical clinics total YTD revenue was unfavorable to budget by (\$370k) primarily due to a timing difference in grant revenue recognition. Total operating expenses of \$4.4M were favorable to budget of \$5.7M by \$1.4M or 23.6%. The positive variance is mostly due to salaries, wages, and benefits of \$880k, purchased services of \$187k, medical supplies of \$122k, and other expense \$60k. Expense timing and staffing vacancies are driving these favorable YTD variances. Total YTD net margin was favorable to budget by \$1.6M or (32.2%).

Net patient revenue YTD for the Dental clinics was favorable to budget by \$808k. The Dental clinics total YTD gross patient revenue was favorable to budget by \$114k. Total YTD operating expenses of \$929k were favorable to budget by \$210k, staffing vacancies primarily accounted for this favorable variance. Total YTD net margin was favorable to budget by \$1.1M or (111.4%).

District Clinic Holdings, Inc.
Comparative Statement of Net Position

	<u>November 30, 2023</u>	<u>October 31, 2023</u>	<u>Increase (Decrease)</u>
Assets			
Cash and Cash Equivalents	\$ 18,394,761	\$ 17,679,313	\$ 715,448
Accounts Receivable, net	2,193,865	2,043,421	150,443
Due From Other Governments	3,460,676	2,600,372	860,305
Other Current Assets	272,447	270,955	1,493
Net Investment in Capital Assets	3,583,300	3,614,192	(30,892)
Right Of Use Assets	2,798,692	2,798,692	0
Total Assets	<u>\$ 30,703,741</u>	<u>\$ 29,006,945</u>	<u>\$ 1,696,796</u>
Liabilities			
Accounts Payable	437,591	447,376	(9,785)
Deferred Revenue-	510	1,340	(830)
Accrued Interest	13,621	13,621	0
Other Current Liabilities	2,403,016	2,585,169	(182,153)
Lease Liability	2,552,061	2,552,061	0
Non-Current Liabilities	1,079,156	1,229,847	(150,691)
Total Liabilities	<u>6,485,956</u>	<u>6,829,414</u>	<u>(343,458)</u>
Deferred Inflows of Resources			
Deferred Inflows	<u>\$ 30,757</u>	<u>\$ 30,757</u>	<u>\$ 0</u>
Net Position			
Net Investment in Capital Assets	3,583,300	3,614,192	(30,892)
Unrestricted	20,603,728	18,532,581	2,071,147
Total Net Position	<u>24,187,029</u>	<u>22,146,774</u>	<u>2,040,255</u>
Total Liabilities, Deferred Inflows of Resources and Net Position	<u>\$ 30,703,741</u>	<u>\$ 29,006,945</u>	<u>\$ 1,696,796</u>

Note: Amounts may not foot due to rounding.

Primary Care Clinics Statement of Revenues and Expenses
For The Second Month Ended November 30, 2023

Current Month							Fiscal Year To Date							
Actual	Budget	Variance	%	Prior Year	Variance	%		Actual	Budget	Variance	%	Prior Year	Variance	%
\$ 2,531,499	\$ 2,511,811	\$ 19,688	0.8%	\$ 2,173,673	\$ 357,826	16.5%	Gross Patient Revenue	\$ 5,740,029	\$ 5,023,623	\$ 716,406	14.3%	\$ 4,595,638	\$ 1,144,391	24.9%
940,971	805,259	135,712	16.9%	616,457	324,514	52.6%	Contractual Allowance	2,000,397	1,610,519	389,879	24.2%	1,559,009	441,388	28.3%
893,302	1,052,501	(159,198)	(15.1%)	818,987	74,316	9.1%	Charity Care	2,081,645	2,105,001	(23,356)	(1.1%)	1,899,759	181,886	9.6%
204,443	224,074	(19,631)	(8.8%)	353,288	(148,845)	(42.1%)	Bad Debt	529,817	448,148	81,669	18.2%	403,018	126,799	31.5%
2,038,717	2,081,834	(43,117)	(2.1%)	1,788,732	249,985	14.0%	Total Contractuals and Bad Debt	4,611,859	4,163,667	448,192	10.8%	3,861,786	750,074	19.4%
575,505	324,247	251,258	77.5%	474,943	100,562	21.2%	Other Patient Revenue	1,142,189	648,494	493,695	76.1%	949,886	192,304	20.2%
1,068,287	754,225	314,063	41.6%	859,885	208,403	24.2%	Net Patient Service Revenue	2,270,359	1,508,449	761,909	50.5%	1,683,737	586,621	34.8%
42.20%	30.03%			39.56%			Collection %	39.55%	30.03%			36.64%		
658,694	766,917	(108,223)	(14.1%)	951,673	(292,979)	(30.8%)	Grants	1,208,816	1,533,834	(325,018)	(21.2%)	1,783,331	(574,515)	(32.2%)
-	-	-	-	-	-	-	Interest Earnings	1,943	-	1,943	-	-	1,943	-
-	-	-	-	51,355	(51,355)	-	Other Financial Assistance	-	-	-	-	63,832	(63,832)	-
2,526	11,204	(8,678)	(77.5%)	29,490	(26,964)	(91.4%)	Other Revenue	3,962	22,408	(18,446)	(82.3%)	30,113	(26,151)	(86.8%)
\$ 1,729,507	\$ 1,532,346	\$ 197,161	12.9%	\$ 1,892,402	\$ (162,895)	(8.6%)	Total Revenues	\$ 3,485,080	\$ 3,064,691	\$ 420,388	13.7%	\$ 3,561,013	\$ (75,934)	(2.1%)
							Direct Operating Expenses:							
1,512,292	2,103,159	590,867	28.1%	1,402,443	(109,848)	(7.8%)	Salaries and Wages	3,384,601	4,276,324	891,723	20.9%	3,116,294	(268,307)	(8.6%)
444,080	536,705	92,625	17.3%	405,732	(38,348)	(9.5%)	Benefits	915,797	1,081,141	165,344	15.3%	833,558	(82,239)	(9.9%)
39,841	117,137	77,296	66.0%	60,480	20,639	34.1%	Purchased Services	43,621	234,274	190,653	81.4%	74,244	30,623	41.2%
71,763	116,203	44,441	38.2%	230,443	158,681	68.9%	Medical Supplies	102,849	232,407	129,558	55.7%	266,316	163,467	61.4%
9,819	45,513	35,694	78.4%	6,147	(3,672)	(59.7%)	Other Supplies	15,677	91,026	75,349	82.8%	18,531	2,853	15.4%
102,323	68,151	(34,172)	(50.1%)	60,482	(41,840)	(69.2%)	Medical Services	140,072	136,302	(3,770)	(2.8%)	116,063	(24,009)	(20.7%)
46,702	57,362	10,660	18.6%	49,341	2,639	5.3%	Drugs	120,884	114,724	(6,160)	(5.4%)	86,816	(34,068)	(39.2%)
44,761	58,246	13,485	23.2%	11,441	(33,320)	(291.2%)	Repairs and Maintenance	79,064	116,492	37,428	32.1%	22,167	(56,896)	(256.7%)
129,886	153,520	23,634	15.4%	87,434	(42,452)	(48.6%)	Lease and Rental	321,796	307,039	(14,756)	(4.8%)	194,930	(126,866)	(65.1%)
13,231	14,618	1,387	9.5%	8,881	(4,350)	(49.0%)	Utilities	18,789	29,236	10,447	35.7%	17,319	(1,469)	(8.5%)
78,069	116,459	38,390	33.0%	74,228	(3,841)	(5.2%)	Other Expense	164,334	232,918	68,584	29.4%	189,717	25,384	13.4%
-	10,005	10,005	-	-	-	-	Interest Expense	-	20,050	20,050	-	-	-	-
4,947	6,528	1,580	24.2%	4,622	(325)	(7.0%)	Insurance	9,895	13,055	3,160	24.2%	10,776	881	8.2%
2,497,713	3,403,606	905,892	26.6%	2,401,675	(96,038)	(4.0%)	Total Operating Expenses	5,317,378	6,884,988	1,567,610	22.8%	4,946,731	(370,647)	(7.5%)
\$ (768,206)	\$ (1,871,260)	\$ 1,103,054	(58.9%)	\$ (509,273)	\$ (258,933)	50.8%	Net Performance before Depreciation & Overhead Allocations	\$ (1,832,298)	\$ (3,820,297)	\$ 1,987,998	(52.0%)	\$ (1,385,718)	\$ (446,580)	32.2%
30,892	73,871	42,979	58.2%	25,462	(5,431)	(21.3%)	Depreciation	61,784	147,742	85,958	58.2%	50,923	(10,861)	(21.3%)
							Overhead Allocations:							
10,550	16,443	5,893	35.8%	7,282	(3,268)	(44.9%)	Risk Management	22,058	32,886	10,828	32.9%	18,974	(3,084)	(16.3%)
75,330	103,522	28,192	27.2%	103,816	28,486	27.4%	Revenue Cycle	156,377	207,044	50,667	24.5%	167,187	10,810	6.5%
3,044	3,182	138	4.3%	1,796	(1,248)	(69.5%)	Internal Audit	6,632	6,364	(268)	(4.2%)	4,423	(2,209)	(49.9%)
25,091	28,133	3,042	10.8%	31,492	6,401	20.3%	Home Office Facilities	51,540	56,266	4,726	8.4%	62,313	10,773	17.3%
18,787	14,511	(4,276)	(29.5%)	48,941	30,154	61.6%	Administration	21,070	29,022	7,952	27.4%	95,048	73,978	77.8%
68,007	99,173	31,166	31.4%	96,165	28,158	29.3%	Human Resources	153,599	198,346	44,747	22.6%	172,270	18,671	10.8%
24,447	38,033	13,586	35.7%	12,867	(11,580)	(90.0%)	Legal	46,841	76,066	29,225	38.4%	16,211	(30,630)	(188.9%)
3,542	4,523	981	21.7%	2,926	(616)	(21.1%)	Records	7,176	9,046	1,870	20.7%	7,132	(44)	(0.6%)
11,822	8,915	(2,907)	(32.6%)	6,648	(5,174)	(77.8%)	Compliance	25,489	17,830	(7,659)	(43.0%)	12,995	(12,494)	(96.1%)
48,371	58,201	9,830	16.9%	44,142	(4,229)	(9.6%)	IT Operations	90,558	116,402	25,844	22.2%	79,800	(10,758)	(13.5%)
16,335	19,491	3,156	16.2%	21,768	5,433	25.0%	IT Security	27,776	38,982	11,206	28.7%	31,673	3,897	12.3%
34,793	39,351	4,558	11.6%	19,591	(15,202)	(77.6%)	Finance	68,995	78,702	9,707	12.3%	43,823	(25,172)	(57.4%)
15,236	20,025	4,789	23.9%	9,413	(5,823)	(61.9%)	Corporate Communications	33,439	40,050	6,611	16.5%	19,834	(13,605)	(68.6%)
18,081	19,300	1,219	6.3%	10,976	(7,105)	(64.7%)	Information Technology	42,871	38,600	(4,271)	(11.1%)	21,810	(21,061)	(96.6%)

Primary Care Clinics Statement of Revenues and Expenses
For The Second Month Ended November 30, 2023

Current Month							Fiscal Year To Date							
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%	
65,852	242,579	176,727	72.9%	278,939	213,087	76.4%	IT Applications	177,308	485,158	307,850	63.5%	360,575	183,267	50.8%
30,484	45,852	15,368	33.5%	28,022	(2,462)	(8.8%)	IT Service Center	72,287	91,704	19,417	21.2%	54,021	(18,266)	(33.8%)
10,449	20,701	10,252	49.5%	12,194	1,745	14.3%	Performance Excellence	34,582	41,402	6,820	16.5%	18,785	(15,797)	(84.1%)
11,415	13,780	2,365	17.2%	7,268	(4,147)	(57.1%)	Corporate Quality	24,668	27,560	2,892	10.5%	15,702	(8,966)	(57.1%)
33,123	55,383	22,260	40.2%	39,146	6,023	15.4%	Security Services	73,178	110,766	37,588	33.9%	78,270	5,092	6.5%
16,737	21,357	4,620	21.6%	5,354	(11,383)	(212.6%)	Supply Chain	37,403	42,714	5,311	12.4%	11,607	(25,796)	(222.2%)
11,912	12,286	374	3.0%	19,826	7,914	39.9%	HIM Department	25,468	24,572	(896)	(3.6%)	28,177	2,709	9.6%
18,592	20,831	2,239	10.7%	13,076	(5,516)	(42.2%)	Coding	43,919	41,662	(2,257)	(5.4%)	34,421	(9,498)	(27.6%)
2,445	2,394	(51)	(2.1%)	1,671	(774)	(46.3%)	Reimbursement	4,353	4,788	435	9.1%	4,153	(200)	(4.8%)
2,386	29,523	27,138	91.9%	-	(2,386)	-	Clinical Labor Pool	4,630	59,047	54,416	92.2%	-	(4,630)	-
10,043	22,557	12,513	55.5%	-	(10,043)	-	District Nursing Admin	30,385	45,113	14,728	32.6%	-	(30,385)	-
6,420	10,674	4,254	39.9%	-	(6,420)	-	District Operations Admin	18,366	21,347	2,981	14.0%	-	(18,366)	-
4,266	4,779	512	10.7%	-	(4,266)	-	Mail Room	8,159	9,557	1,398	14.6%	-	(8,159)	-
597,561	975,498	377,937	38.7%	823,319	225,758	27.4%	Total Overhead Allocations-	1,309,129	1,950,997	641,868	32.9%	1,359,204	50,075	3.7%
3,126,166	4,452,975	1,326,808	29.8%	3,250,455	124,289	3.8%	Total Expenses	6,688,291	8,983,726	2,295,435	25.6%	6,356,858	(331,433)	(5.2%)
\$ (1,396,660)	\$ (2,920,629)	\$ 1,523,970	(52.2%)	\$ (1,358,053)	\$ (38,606)	2.8%	Net Margin	\$ (3,203,211)	\$ (5,919,035)	\$ 2,715,824	(45.9%)	\$ (2,795,845)	\$ (407,366)	14.6%
-	-	-	-	-	-	-	Capital	-	-	-	-	36,782	36,782	-
-	252,458	(252,458)	-	-	-	-	Capital Contributions.	204,850	504,916	(300,066)	(59.4%)	-	204,850	-
-	-	-	-	-	-	-	Transfer In/(Out)	-	\$ 9,250,000	\$ (9,250,000)	-	-	-	-

venues and Expenses by Month

	Oct-23	Nov-23	Year to Date
Gross Patient Revenue	\$ 3,208,530	\$ 2,531,499	\$ 5,740,029
Contractual Allowance	1,059,426	940,971	2,000,397
Charity Care	1,188,343	893,302	2,081,645
Bad Debt	325,374	204,443	529,817
Total Contractuals and Bad Debt	2,573,143	2,038,717	4,611,859
Other Patient Revenue	566,684	575,505	1,142,189
Net Patient Service Revenue	1,202,071	1,068,287	2,270,359
Collection %	37.46%	42.20%	39.55%
Non-Operating Revenues			
Grants	550,122	658,694	1,208,816
Interest Earnings	1,943	-	1,943
Other Revenue	1,437	2,526	3,962
Total Other Revenues	\$ 553,502	\$ 661,220	\$ 1,214,721
Total Non-Operating Revenues	\$ 1,755,573	\$ 1,729,507	\$ 3,485,080
Direct Operating Expenses:			
Salaries and Wages	1,872,309	1,512,292	3,384,601
Benefits	471,718	444,080	915,797
Purchased Services	3,780	39,841	43,621
Medical Supplies	31,086	71,763	102,849
Other Supplies	5,859	9,819	15,677
Medical Services	37,749	102,323	140,072
Drugs	74,182	46,702	120,884
Repairs and Maintenance	34,302	44,761	79,064

venues and Expenses by Month

	Oct-23	Nov-23	Year to Date
Lease and Rental	191,910	129,886	321,796
Utilities	5,558	13,231	18,789
Other Expense	86,265	78,069	164,334
Insurance	4,947	4,947	9,895
Total Operating Expenses	2,819,665	2,497,713	5,317,378
Net Performance before Depreciation & Overhead Allocations	\$ (1,064,092)	\$ (768,206)	\$ (1,832,298)
Depreciation	30,892	30,892	61,784
<i>Overhead Allocations:</i>			
Risk Management	11,508	10,550	22,058
Revenue Cycle	81,046	75,330	156,377
Internal Audit	3,588	3,044	6,632
Home Office Facilities	26,450	25,091	51,540
Administration	2,283	18,787	21,070
Human Resources	85,592	68,007	153,599
Legal	22,394	24,447	46,841
Records	3,633	3,542	7,176
Compliance	13,667	11,822	25,489
IT Operations	42,187	48,371	90,558
IT Security	11,440	16,335	27,776
Finance	34,202	34,793	68,995
Corporate Communications	18,203	15,236	33,439
Information Technology	24,790	18,081	42,871
IT Applications	111,456	65,852	177,308

venues and Expenses by Month

	Oct-23	Nov-23	Year to Date
IT Service Center	41,803	30,484	72,287
Performance Excellence	24,133	10,449	34,582
Corporate Quality	13,253	11,415	24,668
Security Services	40,055	33,123	73,178
Supply Chain	20,666	16,737	37,403
HIM Department	13,556	11,912	25,468
Coding	25,327	18,592	43,919
Reimbursement	1,908	2,445	4,353
Clinical Labor Pool	2,245	2,386	4,630
District Nursing Admin	20,342	10,043	30,385
District Operations Admin	11,946	6,420	18,366
Mail Room	3,893	4,266	8,159
Total Overhead Allocations	711,568	597,561	1,309,129
Total Expenses	3,562,125	3,126,166	6,688,291
Net Margin	\$ (1,806,552)	\$ (1,396,660)	\$ (3,203,211)
Capital Contributions.	204,850	-	204,850

	Clinic Administration	Belle Glade Medical Clinic	Delray Medical Clinic	Lantana Medical Clinic	Mangonia Park Medical Clinic	West Palm Beach Medical Clinic	Jupiter Medical Clinic	Lake Worth Medical Clinic	Lewis Center Medical Clinic	West Boca Medical Clinic	St Ann Place Medical Clinic	Mobile Warrior	Mobile Van Scout	Mobile Van Hero	Atlantis Medical Clinic	Port Medical Clinic	Total
Gross Patient Revenue	\$ 647	\$ 387,463	\$ 328,990	\$ 1,067,757	\$ 172,932	\$ 808,855	\$ 221,475	\$ 524,562	\$ 18,014	\$ 140,918	\$ 6,944	\$ 10,754	\$ 2,162	\$ 21,666	-	\$ 37,411	\$ 3,750,549
Contractual Allowance	1,037,699	98,637	60,334	122,994	30,200	141,008	53,623	129,735	3,398	42,013	209	(617)	922	5,587	-	(60)	1,725,663
Charity Care	25,810	104,960	112,401	359,165	35,442	273,931	92,030	213,120	2,813	44,481	1,117	8,776	285	2,272	-	27,638	1,304,240
Bad Debt	160	23,521	35,963	73,533	55,034	51,934	17,332	43,311	2,669	4,283	2,039	234	29	2,677	-	774	313,492
Total Contractual Allowances and Bad Debt	1,063,569	227,118	208,697	555,692	120,676	465,873	162,985	386,166	8,880	90,777	3,365	8,393	1,236	10,536	-	28,332	3,343,395
Other Patient Revenue	-	74,869	49,727	168,904	29,644	148,447	50,850	122,053	11,233	54,305	1,816	6,351	-	3,661	7,018	-	728,897
Net Patient Revenue	(1,063,021)	235,234	170,020	680,969	81,899	490,429	109,340	260,449	20,367	104,446	5,395	8,711	926	14,792	7,018	9,079	1,136,051
Collection %	(164.193,42%)	60.71%	51.68%	63.78%	47.36%	60.63%	49.37%	49.65%	113.06%	74.12%	77.69%	81.01%	42.81%	68.27%	-	24.27%	30.29%
Grants	156,064	84,000	83,285	152,876	109,405	145,292	57,224	121,173	559	50,243	8,908	10,819	-	10,129	-	-	989,977
Interest Earnings	1,943	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1,943
Other Revenue	2,045	967	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3,012
Total Other Revenues	160,052	84,967	83,285	152,876	109,405	145,292	57,224	121,173	559	50,243	8,908	10,819	-	10,129	-	-	994,932
Total Revenues	\$ (902,969)	\$ 320,201	\$ 253,305	\$ 833,845	\$ 191,304	\$ 635,721	\$ 166,564	\$ 381,622	\$ 20,926	\$ 154,689	\$ 14,303	\$ 19,530	\$ 926	\$ 24,921	\$ 7,018	\$ 9,079	\$ 2,130,983
<i>Direct Operational Expenses:</i>																	
Salaries and Wages	565,929	184,714	212,411	454,621	262,352	406,355	151,631	321,699	3,283	123,198	26,049	31,897	-	28,699	-	-	2,773,438
Benefits	167,711	51,367	58,445	118,623	84,480	85,442	37,633	85,063	251	27,448	8,948	11,227	-	8,381	-	-	745,039
Purchased Services	17,764	1,407	3,194	29	3,278	2,277	3,406	199	433	3,614	-	-	-	-	-	-	35,601
Medical Supplies	-	3,327	5,032	10,762	15,956	11,341	872	7,807	805	1,869	76	512	-	583	-	-	59,942
Other Supplies	342	837	3,034	1,803	820	(365)	2,235	1,216	100	354	39	1,814	220	(55)	-	-	12,505
Medical Services	-	17,118	6,235	23,261	5,149	23,632	21,856	37,664	168	4,925	45	-	-	-	-	-	140,672
Drugs	-	7,689	49,086	23,518	18,468	22,123	-	-	-	-	-	-	-	-	-	-	120,884
Repairs and Maintenance	50,151	1,437	2,776	1,243	1,750	2,463	1,380	2,137	1,003	1,431	305	305	5,261	305	-	-	71,947
Lease and Rental	-	14,987	62,657	27,917	18,668	25,149	22,440	44,400	40	41,670	(10)	10	5	20	-	-	258,152
Utilities	-	4,304	521	195	835	195	3,000	1,155	148	621	125	-	-	-	2,665	-	13,763
Other Expense	28,016	28,067	9,762	8,004	5,747	20,055	8,935	31,990	1,292	3,914	1,489	273	46	366	-	-	147,955
Insurance	-	1,066	520	1,345	134	1,134	299	798	86	231	-	1,409	1,359	1,425	-	-	9,804
Total Operating Expenses	829,912	316,321	413,673	671,319	417,737	599,810	253,686	534,167	7,610	209,474	37,666	47,448	6,891	39,724	2,665	-	4,388,102
Net Performance before Depreciation & Overhead Allocations	(1,732,881)	3,880	(160,367)	162,526	(226,433)	35,911	(87,122)	(152,545)	13,316	(54,785)	(23,363)	(27,917)	(5,966)	(14,803)	4,353	9,079	(2,257,119)
Depreciation	868	15,359	5,626	2,177	3,669	3,245	259	706	-	1,413	-	-	2,314	13,921	-	-	49,557
<i>Overhead Allocations:</i>																	
Risk Management	18,405	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	18,405
Revenue Cycle	116,226	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	116,226
Internal Audit	5,533	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5,533
Home Office Facilities	40,262	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	40,262
Administration	17,580	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	17,580
Human Resources	126,330	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	126,330
Legal	39,094	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	39,094
Records	5,987	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5,987
Compliance	21,268	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	21,268
IT Operations	75,561	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	75,561
IT Security	23,176	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	23,176
Finance	57,569	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	57,569
Corporate Communications	27,901	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	27,901
Information Technology	35,771	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	35,771
IT Applications	147,944	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	147,944
IT Service Center	60,316	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	60,316
Performance Excellence	28,855	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	28,855
Corporate Quality	20,582	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	20,582
Security Services	48,785	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	48,785
Supply Chain	31,209	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	31,209
HIM Department	21,250	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	21,250
Coding	36,646	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	36,646
Reimbursement	3,632	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3,632
Clinical Labor Pool	3,864	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3,864
District Nursing Admin	25,353	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	25,353
District Operations Admin	15,324	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	15,324
Mail Room	6,808	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	6,808
Total Overhead Allocations	1,061,222	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1,061,222
Total Expenses	1,892,003	331,680	419,299	673,496	421,406	603,056	253,945	534,873	7,610	210,887	37,666	47,448	9,205	53,645	2,665	-	5,498,882
Net Margin	\$ (2,794,972)	\$ (11,479)	\$ (185,993)	\$ 160,349	\$ (230,102)	\$ 32,666	\$ (87,381)	\$ (153,251)	\$ 13,316	\$ (56,198)	\$ (23,363)	\$ (27,917)	\$ (8,280)	\$ (28,724)	\$ 4,353	\$ 9,079	\$ (3,367,898)
Capital	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Transfer In/(Out)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-

Primary Care Medical Statement of Revenues and Expenses
For The Second Month Ended November 30, 2023

Current Month							Fiscal Year To Date							
Actual	Budget	Variance	%	Prior Year	Variance	%		Actual	Budget	Variance	%	Prior Year	Variance	%
\$ 1,607,120	\$ 1,590,063	\$ 17,057	1.1%	\$ 1,404,963	\$ 202,157	14.4%	Gross Patient Revenue	\$ 3,750,549	\$ 3,180,126	\$ 570,423	17.9%	\$ 2,904,379	\$ 846,170	29.1%
913,318	454,997	458,321	100.7%	340,448	572,869	168.3%	Contractual Allowance	1,725,663	909,994	815,669	89.6%	927,894	797,769	86.0%
532,214	611,044	(78,830)	(12.9%)	438,125	94,089	21.5%	Charity Care	1,304,240	1,222,088	82,152	6.7%	1,044,779	259,462	24.8%
107,319	150,678	(43,359)	(28.8%)	325,759	(218,440)	(67.1%)	Bad Debt	313,492	301,356	12,136	4.0%	354,057	(40,565)	(11.5%)
1,552,851	1,216,719	336,132	27.6%	1,104,332	448,519	40.6%	Total Contractuals and Bad Debt	3,343,395	2,433,438	909,957	37.4%	2,326,730	1,016,666	43.7%
367,453	237,758	129,695	54.5%	334,637	32,816	9.8%	Other Patient Revenue	728,897	475,516	253,381	53.3%	669,274	59,623	8.9%
421,723	611,102	(189,379)	(31.0%)	635,268	(213,545)	(33.6%)	Net Patient Service Revenue	1,136,051	1,222,204	(86,153)	(7.0%)	1,246,923	(110,872)	(8.9%)
26.24%	38.43%			45.22%			Collection %	30.29%	38.43%			42.93%		
540,569	628,521	(87,952)	(14.0%)	791,321	(250,752)	(31.7%)	Grants	989,977	1,257,042	(267,065)	(21.2%)	1,495,217	(505,240)	(33.8%)
-	-	-	-	-	-	-	Interest Earnings	1,943	-	1,943	-	-	1,943	-
-	-	-	-	50,549	(50,549)	-	Other Financial Assistance	-	-	-	-	63,026	(63,026)	-
2,051	11,025	(8,974)	(81.4%)	29,490	(27,439)	(93.0%)	Other Revenue	3,012	22,050	(19,038)	(86.3%)	30,123	(27,111)	(90.0%)
\$ 964,342	\$ 1,250,648	\$ (286,306)	(22.9%)	\$ 1,506,628	\$ (542,286)	(36.0%)	Total Revenues	\$ 2,130,983	\$ 2,501,296	\$ (370,313)	(14.8%)	\$ 2,835,289	\$ (704,306)	(24.8%)
							Direct Operating Expenses:							
1,248,676	1,729,860	481,184	27.8%	1,176,551	(72,125)	(6.1%)	Salaries and Wages	2,773,438	3,517,296	743,858	21.1%	2,601,505	(171,933)	(6.6%)
363,505	437,373	73,868	16.9%	340,004	(23,501)	(6.9%)	Benefits	745,039	881,108	136,069	15.4%	696,869	(48,170)	(6.9%)
32,112	111,219	79,107	71.1%	59,534	27,421	46.1%	Purchased Services	35,601	222,438	186,837	84.0%	72,202	36,601	50.7%
42,450	90,537	48,087	53.1%	211,447	168,997	79.9%	Medical Supplies	58,942	181,075	122,132	67.4%	231,611	172,668	74.6%
7,102	37,540	30,438	81.1%	5,843	(1,259)	(21.5%)	Other Supplies	12,505	75,080	62,575	83.3%	17,865	5,361	30.0%
102,323	68,151	(34,172)	(50.1%)	60,482	(41,840)	(69.2%)	Medical Services	140,072	136,302	(3,770)	(2.8%)	116,063	(24,009)	(20.7%)
46,702	57,154	10,452	18.3%	49,341	2,639	5.3%	Drugs	120,884	114,308	(6,576)	(5.8%)	86,816	(34,068)	(39.2%)
40,831	55,755	14,924	26.8%	7,320	(33,511)	(457.8%)	Repairs and Maintenance	71,947	111,510	39,563	35.5%	16,021	(55,926)	(349.1%)
102,217	120,629	18,413	15.3%	64,792	(37,425)	(57.8%)	Lease and Rental	258,152	241,259	(16,893)	(7.0%)	149,725	(108,427)	(72.4%)
9,028	11,959	2,931	24.5%	7,100	(1,929)	(27.2%)	Utilities	13,763	23,918	10,155	42.5%	13,756	(7)	(0.1%)
68,728	104,091	35,363	34.0%	74,282	5,555	7.5%	Other Expense	147,955	208,182	60,227	28.9%	183,878	35,923	19.5%
-	10,005	10,005	-	-	-	-	Interest Expense	-	20,050	20,050	-	-	-	-
4,902	6,479	1,577	24.3%	4,545	(357)	(7.9%)	Insurance	9,804	12,958	3,154	24.3%	10,622	818	7.7%
2,068,576	2,840,752	772,176	27.2%	2,061,241	(7,336)	(0.4%)	Total Operating Expenses	4,388,102	5,745,484	1,357,382	23.6%	4,196,933	(191,169)	(4.6%)
\$ (1,104,234)	\$ (1,590,104)	\$ 485,870	(30.6%)	\$ (554,613)	\$ (549,621)	99.1%	Net Performance before Depreciation & Overhead Allocations	\$ (2,257,119)	\$ (3,244,188)	\$ 987,069	(30.4%)	\$ (1,361,644)	\$ (895,474)	65.8%
24,779	69,165	44,386	64.2%	18,017	(6,761)	(37.5%)	Depreciation	49,557	138,330	88,773	64.2%	36,035	(13,523)	(37.5%)
							Overhead Allocations:							
8,803	13,720	4,917	35.8%	6,147	(2,656)	(43.2%)	Risk Management	18,405	27,440	9,035	32.9%	16,017	(2,388)	(14.9%)
55,989	76,942	20,953	27.2%	85,829	29,840	34.8%	Revenue Cycle	116,226	153,884	37,658	24.5%	138,221	21,995	15.9%
2,540	2,655	115	4.3%	1,516	(1,024)	(67.5%)	Internal Audit	5,533	5,310	(223)	(4.2%)	3,734	(1,799)	(48.2%)
19,600	21,977	2,377	10.8%	27,540	7,940	28.8%	Home Office Facilities	40,262	43,954	3,692	8.4%	54,493	14,231	26.1%
15,676	12,108	(3,568)	(29.5%)	41,316	25,640	62.1%	Administration	17,580	24,216	6,636	27.4%	80,239	62,659	78.1%
55,933	81,566	25,633	31.4%	82,129	26,196	31.9%	Human Resources	126,330	163,132	36,802	22.6%	147,126	20,796	14.1%
20,398	31,734	11,336	35.7%	10,862	(9,536)	(87.8%)	Legal	39,084	63,468	24,384	38.4%	13,685	(25,399)	(185.8%)
2,956	3,774	818	21.7%	2,470	(486)	(19.7%)	Records	5,987	7,548	1,561	20.7%	6,021	34	0.6%
9,864	7,439	(2,425)	(32.6%)	5,612	(4,252)	(75.8%)	Compliance	21,268	14,878	(6,390)	(42.9%)	10,970	(10,298)	(93.9%)
40,360	48,562	8,202	16.9%	37,264	(3,096)	(8.3%)	IT Operations	75,561	97,124	21,563	22.2%	67,366	(8,195)	(12.2%)
13,630	16,263	2,633	16.2%	18,376	4,746	25.8%	IT Security	23,176	32,526	9,350	28.7%	26,738	3,562	13.3%
29,031	32,834	3,803	11.6%	16,539	(12,492)	(75.5%)	Finance	57,569	65,668	8,099	12.3%	36,996	(20,573)	(55.6%)
12,713	16,709	3,996	23.9%	7,946	(4,767)	(60.0%)	Corporate Communications	27,901	33,418	5,517	16.5%	16,743	(11,158)	(66.6%)
15,087	16,104	1,017	6.3%	9,266	(5,821)	(62.8%)	Information Technology	35,771	32,208	(3,563)	(11.1%)	18,412	(17,359)	(94.3%)

Current Month							Fiscal Year To Date							
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%	
54,947	202,405	147,458	72.9%	235,479	180,532	76.7%	IT Applications	147,944	404,810	256,866	63.5%	304,396	156,452	51.4%
25,435	38,258	12,823	33.5%	23,656	(1,779)	(7.5%)	IT Service Center	60,316	76,516	16,200	21.2%	45,604	(14,712)	(32.3%)
8,718	17,273	8,555	49.5%	10,294	1,576	15.3%	Performance Excellence	28,855	34,546	5,691	16.5%	15,858	(12,997)	(82.0%)
9,524	11,498	1,974	17.2%	6,136	(3,388)	(55.2%)	Corporate Quality	20,582	22,996	2,414	10.5%	13,256	(7,326)	(55.3%)
22,082	36,922	14,840	40.2%	32,311	10,229	31.7%	Security Services	48,785	73,844	25,059	33.9%	64,604	15,819	24.5%
13,965	17,820	3,855	21.6%	4,520	(9,445)	(209.0%)	Supply Chain	31,209	35,640	4,431	12.4%	9,799	(21,410)	(218.5%)
9,939	10,251	312	3.0%	16,737	6,798	40.6%	HIM Department	21,250	20,502	(748)	(3.6%)	23,787	2,537	10.7%
15,513	17,381	1,868	10.7%	11,039	(4,474)	(40.5%)	Coding	36,646	34,762	(1,884)	(5.4%)	29,058	(7,588)	(26.1%)
2,040	1,998	(42)	(2.1%)	1,411	(629)	(44.6%)	Reimbursement	3,632	3,996	364	9.1%	3,506	(126)	(3.6%)
1,990	24,634	22,644	91.9%	-	(1,990)	-	Clinical Labor Pool	3,864	49,268	45,404	92.2%	-	(3,864)	-
8,380	18,821	10,441	55.5%	-	(8,380)	-	District Nursing Admin	25,353	37,642	12,289	32.6%	-	(25,353)	-
5,356	8,906	3,550	39.9%	-	(5,356)	-	District Operations Admin	15,324	17,812	2,488	14.0%	-	(15,324)	-
3,560	3,987	428	10.7%	-	(3,560)	-	Mail Room	6,808	7,974	1,167	14.6%	-	(6,808)	-
484,031	792,541	308,510	38.9%	694,395	210,364	30.3%	Total Overhead Allocations-	1,061,222	1,585,082	523,860	33.0%	1,146,629	85,407	7.4%
2,577,386	3,702,458	1,125,072	30.4%	2,773,653	196,267	7.1%	Total Expenses	5,498,882	7,468,896	1,970,015	26.4%	5,379,597	(119,285)	(2.2%)
\$ (1,613,044)	\$ (2,451,810)	\$ 838,766	(34.2%)	\$ (1,267,025)	\$ (346,019)	27.3%	Net Margin	\$ (3,367,898)	\$ (4,967,601)	\$ 1,599,702	(32.2%)	\$ (2,544,308)	\$ (823,590)	32.4%
-	-	-	-	-	-	-	Capital	-	-	-	-	23,881	23,881	-
-	198,183	(198,183)	-	-	-	-	Capital Contributions.	153,638	396,366	(242,729)	(61.2%)	-	153,638	-
-	-	-	-	-	-	-	Transfer In/(Out)	-	\$ 7,750,000	\$ (7,750,000)	-	-	-	-

	Dental Clinic Administration	Belle Glade Dental Clinic	Delray Dental Clinic	Lantana Dental Clinic	West Palm Beach Dental Clinic	Atlantis Dental Clinic	Port Dental Clinic	Total
Gross Patient Revenue	-	\$ 307,671	\$ 300,263	\$ 503,570	\$ 641,046	-	\$ 12,693	\$ 1,765,243
Contractual Allowance	-	51,181	17,195	42,667	96,498	-	-	207,540
Charity Care	-	104,330	133,047	197,005	281,678	-	12,805	728,864
Bad Debt	-	16,677	38,919	55,277	47,404	-	(660)	157,616
Total Contractual Allowances and Bad Debt	-	172,187	189,160	294,948	425,580	-	12,145	1,094,020
Other Patient Revenue	-	72,131	79,040	110,530	146,893	-	-	408,594
Net Patient Revenue	-	207,615	190,143	319,152	362,359	-	548	1,079,817
Collection %	-	67.48%	63.33%	63.38%	56.53%	-	4.32%	61.17%
Grants	21,724	25,031	32,740	57,942	81,402	-	-	218,839
Other Revenue	950	-	-	-	-	-	-	950
Total Other Revenues	22,674	25,031	32,740	57,942	81,402	-	-	219,789
Total Revenues	\$ 22,674	\$ 232,646	\$ 222,883	\$ 377,094	\$ 443,761	-	\$ 548	\$ 1,299,606
<i>Direct Operational Expenses:</i>								
Salaries and Wages	87,350	66,115	53,808	149,280	254,610	-	-	611,162
Benefits	25,898	22,667	16,817	43,603	61,774	-	-	170,759
Purchased Services	-	2,903	1,440	3,484	193	-	-	8,021
Medical Supplies	-	6,822	8,421	11,267	17,397	-	-	43,907
Other Supplies	75	144	1,514	1,170	270	-	-	3,173
Repairs and Maintenance	-	461	1,186	3,019	2,450	-	-	7,117
Lease and Rental	-	5,844	24,995	11,106	21,698	-	-	63,643
Utilities	-	1,719	251	195	195	2,665	-	5,025
Other Expense	2,108	1,347	3,182	6,020	3,721	-	-	16,379
Insurance	-	91	-	-	-	-	-	91
Total Operating Expenses	115,430	108,114	111,614	229,144	362,309	2,665	-	929,276
Net Performance before Depreciation & Overhead Allocations	(92,756)	124,532	111,268	147,950	81,453	(2,665)	548	370,330
Depreciation	-	2,427	3,713	1,067	5,021	-	-	12,227
<i>Overhead Allocations:</i>								
Risk Management	3,653	-	-	-	-	-	-	3,653
Revenue Cycle	40,151	-	-	-	-	-	-	40,151
Internal Audit	1,098	-	-	-	-	-	-	1,098
Home Office Facilities	11,278	-	-	-	-	-	-	11,278
Administration	3,489	-	-	-	-	-	-	3,489
Human Resources	27,269	-	-	-	-	-	-	27,269
Legal	7,757	-	-	-	-	-	-	7,757
Records	1,188	-	-	-	-	-	-	1,188
Compliance	4,221	-	-	-	-	-	-	4,221
IT Operations	14,997	-	-	-	-	-	-	14,997
IT Security	4,600	-	-	-	-	-	-	4,600
Finance	11,426	-	-	-	-	-	-	11,426
Corporate Communications	5,538	-	-	-	-	-	-	5,538
Information Technology	7,100	-	-	-	-	-	-	7,100
IT Applications	29,364	-	-	-	-	-	-	29,364
IT Service Center	11,972	-	-	-	-	-	-	11,972
Performance Excellence	5,727	-	-	-	-	-	-	5,727
Corporate Quality	4,085	-	-	-	-	-	-	4,085
Security Services	24,393	-	-	-	-	-	-	24,393
Supply Chain	6,194	-	-	-	-	-	-	6,194
HIM Department	4,218	-	-	-	-	-	-	4,218
Coding	7,273	-	-	-	-	-	-	7,273
Reimbursement	721	-	-	-	-	-	-	721
Clinical Labor Pool	767	-	-	-	-	-	-	767
District Nursing Admin	5,032	-	-	-	-	-	-	5,032
District Operations Admin	3,042	-	-	-	-	-	-	3,042
Mail Room	1,351	-	-	-	-	-	-	1,351
Total Overhead Allocations	247,907	-	-	-	-	-	-	247,907
Total Expenses	363,337	110,541	115,327	230,210	367,329	2,665	-	1,189,409
Net Margin	\$ (340,663)	\$ 122,105	\$ 107,556	\$ 146,884	\$ 76,432	\$ (2,665)	\$ 548	\$ 110,197
Capital	-	-	-	-	-	-	-	-
Transfer In/(Out)	-	-	28	-	-	-	-	-

Primary Care Dental Statement of Revenues and Expenses
For The Second Month Ended November 30, 2023

Current Month							Fiscal Year To Date							
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%	
\$ 817,396	\$ 825,815	\$ (8,419)	(1.0%)	\$ 701,086	\$ 116,311	16.6%	Gross Patient Revenue	\$ 1,765,243	\$ 1,651,630	\$ 113,613	6.9%	\$ 1,524,593	\$ 240,649	15.8%
22,693	304,151	(281,458)	(92.5%)	248,870	(226,178)	(90.9%)	Contractual Allowance	207,540	608,302	(400,762)	(65.9%)	555,370	(347,829)	(62.8%)
338,142	422,827	(84,685)	(20.0%)	368,633	(30,491)	(8.3%)	Charity Care	728,864	845,654	(116,790)	(13.8%)	824,874	(96,010)	(11.6%)
73,760	49,180	24,580	50.0%	32,149	41,612	129.4%	Bad Debt	157,616	98,360	59,256	60.2%	33,382	124,234	372.2%
434,596	776,158	(341,562)	(44.0%)	649,652	(215,057)	(33.1%)	Total Contractuals and Bad Debt	1,094,020	1,552,316	(458,296)	(29.5%)	1,413,625	(319,605)	(22.6%)
205,703	86,072	119,631	139.0%	137,064	68,639	50.1%	Other Patient Revenue	408,594	172,145	236,450	137.4%	274,128	134,466	49.1%
588,503	135,729	452,774	333.6%	188,497	400,006	212.2%	Net Patient Service Revenue	1,079,817	271,459	808,358	297.8%	385,096	694,721	180.4%
72.00%	16.44%			26.89%			Collection %	61.17%	16.44%		25.26%			
118,125	138,396	(20,271)	(14.6%)	160,352	(42,227)	(26.3%)	Grants	218,839	276,792	(57,953)	(20.9%)	288,114	(69,275)	(24.0%)
-	-	-	-	806	(806)	-	Other Financial Assistance	-	-	-	-	806	(806)	-
475	179	296	165.4%	-	475	-	Other Revenue	950	358	592	165.4%	(9)	959	(10,655.6%)
\$ 707,103	\$ 274,304	\$ 432,799	157.8%	\$ 349,655	\$ 357,448	102.2%	Total Revenues	\$ 1,299,606	\$ 548,609	\$ 750,997	136.9%	\$ 674,006	\$ 625,600	92.8%
Direct Operating Expenses:														
263,616	373,299	109,683	29.4%	225,893	(37,723)	(16.7%)	Salaries and Wages	611,162	759,027	147,865	19.5%	514,788	(96,374)	(18.7%)
80,575	99,332	18,758	18.9%	65,727	(14,848)	(22.6%)	Benefits	170,759	200,033	29,275	14.6%	136,689	(34,069)	(24.9%)
7,729	5,918	(1,811)	(30.6%)	946	(6,782)	(716.9%)	Purchased Services	8,021	11,836	3,815	32.2%	2,043	(5,978)	(292.6%)
29,312	25,666	(3,646)	(14.2%)	18,996	(10,316)	(54.3%)	Medical Supplies	43,907	51,332	7,425	14.5%	34,705	(9,202)	(26.5%)
2,717	7,973	5,256	65.9%	304	(2,412)	(793.4%)	Other Supplies	3,173	15,946	12,773	80.1%	665	(2,508)	(377.1%)
-	208	208	-	-	-	-	Drugs	-	416	416	-	-	-	-
3,930	2,491	(1,439)	(57.8%)	4,121	191	4.6%	Repairs and Maintenance	7,117	4,982	(2,135)	(42.9%)	6,146	(971)	(15.8%)
27,669	32,890	5,221	15.9%	22,642	(5,027)	(22.2%)	Lease and Rental	63,643	65,780	2,137	3.2%	45,205	(18,439)	(40.8%)
4,203	2,659	(1,544)	(58.1%)	1,782	(2,421)	(135.9%)	Utilities	5,025	5,318	293	5.5%	3,563	(1,462)	(41.0%)
9,341	12,368	3,027	24.5%	(54)	(9,395)	17,398.1%	Other Expense	16,379	24,736	8,357	33.8%	5,840	(10,539)	(180.5%)
45	49	3	6.1%	77	32	41.6%	Insurance	91	97	6	6.2%	154	64	41.6%
429,137	562,853	133,717	23.8%	340,434	(88,702)	(26.1%)	Total Operating Expenses	929,276	1,139,504	210,228	18.4%	749,798	(179,478)	(23.9%)
\$ 277,967	\$ (288,549)	\$ 566,516	(196.3%)	\$ 9,221	\$ 268,746	2,914.5%	Net Performance before Depreciation & Overhead Allocations	\$ 370,330	\$ (590,895)	\$ 961,225	(162.7%)	\$ (75,792)	\$ 446,122	(588.6%)
6,113	4,706	(1,407)	(29.9%)	7,444	1,331	17.9%	Depreciation	12,227	9,412	(2,815)	(29.9%)	14,888	2,661	17.9%
Overhead Allocations:														
1,747	2,723	976	35.8%	1,135	(612)	(53.9%)	Risk Management	3,653	5,446	1,793	32.9%	2,957	(696)	(23.5%)
19,342	26,580	7,238	27.2%	17,987	(1,355)	(7.5%)	Revenue Cycle	40,151	53,160	13,009	24.5%	28,966	(11,185)	(38.6%)
504	527	23	4.4%	280	(224)	(80.0%)	Internal Audit	1,098	1,054	(44)	(4.2%)	689	(409)	(59.4%)
5,490	6,156	666	10.8%	3,952	(1,538)	(38.9%)	Home Office Facilities	11,278	12,312	1,034	8.4%	7,820	(3,458)	(44.2%)
3,111	2,403	(708)	(29.5%)	7,625	4,514	59.2%	Administration	3,489	4,806	1,317	27.4%	14,809	11,320	76.4%
12,074	17,607	5,533	31.4%	14,036	1,962	14.0%	Human Resources	27,269	35,214	7,945	22.6%	25,144	(2,125)	(8.5%)
4,049	6,299	2,250	35.7%	2,005	(2,044)	(101.9%)	Legal	7,757	12,598	4,841	38.4%	2,526	(5,231)	(207.1%)
587	749	162	21.6%	456	(131)	(28.7%)	Records	1,188	1,498	310	20.7%	1,111	(77)	(6.9%)
1,958	1,476	(482)	(32.7%)	1,036	(922)	(89.0%)	Compliance	4,221	2,952	(1,269)	(43.0%)	2,025	(2,196)	(108.4%)
8,011	9,639	1,628	16.9%	6,878	(1,133)	(16.5%)	IT Operations	14,997	19,278	4,281	22.2%	12,434	(2,563)	(20.6%)
2,705	3,228	523	16.2%	3,392	687	20.3%	IT Security	4,600	6,456	1,856	28.7%	4,935	335	6.8%
5,762	6,517	755	11.6%	3,052	(2,710)	(88.8%)	Finance	11,426	13,034	1,608	12.3%	6,827	(4,599)	(67.4%)
2,523	3,316	793	23.9%	1,467	(1,056)	(72.0%)	Corporate Communications	5,538	6,632	1,094	16.5%	3,091	(2,447)	(79.2%)
2,994	3,196	202	6.3%	1,710	(1,284)	(75.1%)	Information Technology	7,100	6,392	(708)	(11.1%)	3,398	(3,702)	(108.9%)
10,906	40,174	29,268	72.9%	43,460	32,554	74.9%	IT Applications	29,364	80,348	50,984	63.5%	56,179	26,815	47.7%
5,048	7,594	2,546	33.5%	4,366	(682)	(15.6%)	IT Service Center	11,972	15,188	3,216	21.2%	8,417	(3,555)	(42.2%)
1,730	3,428	1,698	49.5%	1,900	170	8.9%	Performance Excellence	5,727	6,856	1,129	16.5%	2,927	(2,800)	(95.7%)

Primary Care Dental Statement of Revenues and Expenses
 For The Second Month Ended November 30, 2023

Current Month							Fiscal Year To Date						
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%
1,890	2,282	392	17.2%	1,132	(758)	(67.0%)	4,085	4,564	479	10.5%	2,446	(1,639)	(67.0%)
11,041	18,461	7,420	40.2%	6,835	(4,206)	(61.5%)	24,393	36,922	12,529	33.9%	13,666	(10,727)	(78.5%)
2,772	3,537	765	21.6%	834	(1,938)	(232.4%)	6,194	7,074	880	12.4%	1,808	(4,386)	(242.6%)
1,973	2,035	62	3.0%	3,089	1,116	36.1%	4,218	4,070	(148)	(3.6%)	4,390	172	3.9%
3,079	3,450	371	10.8%	2,037	(1,042)	(51.2%)	7,273	6,900	(373)	(5.4%)	5,363	(1,910)	(35.6%)
405	396	(9)	(2.3%)	260	(145)	(55.8%)	721	792	71	9.0%	647	(74)	(11.4%)
395	4,889	4,494	91.9%	-	(395)	-	767	9,779	9,012	92.2%	-	(767)	-
1,663	3,736	2,072	55.5%	-	(1,663)	-	5,032	7,471	2,439	32.6%	-	(5,032)	-
1,063	1,768	705	39.9%	-	(1,063)	-	3,042	3,535	494	14.0%	-	(3,042)	-
707	791	85	10.7%	-	(707)	-	1,351	1,583	232	14.7%	-	(1,351)	-
113,530	182,957	69,427	37.9%	128,924	15,394	11.9%	247,907	365,914	118,008	32.3%	212,575	(35,332)	(16.6%)
548,780	750,516	201,736	26.9%	476,802	(71,978)	(15.1%)	1,189,409	1,514,830	325,421	21.5%	977,261	(212,148)	(21.7%)
\$ 158,323	\$ (476,212)	\$ 634,535	(133.2%)	\$ (127,147)	\$ 285,471	(224.5%)	\$ 110,197	\$ (966,221)	\$ 1,076,418	(111.4%)	\$ (303,255)	\$ 413,452	(136.3%)
-	-	-	-	-	-	-	-	-	-	-	12,901	12,901	-
-	54,275	(54,275)	-	-	-	-	51,213	108,550	(57,338)	(52.8%)	-	51,213	-
-	-	-	-	-	-	-	-	\$ 1,500,000	\$ (1,500,000)	-	-	-	-

d Expenses by Location (YTD)

	Belle Glade Behavioral Health	St Ann Place Behavioral Health	Delray Behavioral Health	Lantana Behavioral Health	Mangonia Park Behavioral Health	West Palm Beach Behavioral Health	Lewis Center Behavioral Health	Total
Gross Patient Revenue	-	-	\$31,273	\$6,012	\$177,104	\$9,849	-	\$224,237
Contractual Allowance	-	-	5,930	597	60,229	588	(151)	67,194
Charity Care	-	-	6,642	1,509	37,477	2,803	111	48,541
Bad Debt	1	(9)	2,618	318	54,428	736	617	58,709
Total Contractual Allowances and Bad Debt	1	(9)	15,190	2,425	152,134	4,127	577	174,444
Other Patient Revenue	-	-	-	-	4,697	-	-	4,697
Net Patient Revenue	(1)	9	16,082	3,587	29,667	5,722	(577)	54,490
Collection %	-	-	51.43%	59.67%	16.75%	58.10%	-	24.30%
Ad Valorem Taxes	-	-	-	-	-	-	-	-
Intergovernmental Revenue	-	-	-	-	-	-	-	-
Grants	-	-	-	-	-	-	-	-
Interest Earnings	-	-	-	-	-	-	-	-
Unrealized Gain/(Loss) On Investments	-	-	-	-	-	-	-	-
Other Financial Assistance	-	-	-	-	-	-	-	-
Other Revenue	-	-	-	-	-	-	-	-
Total Other Revenues	-	-	-	-	-	-	-	-
Total Revenues	\$ (1)	\$ 9	\$ 16,082	\$ 3,587	\$ 29,667	\$ 5,722	\$ (577)	\$ 54,490
<i>Direct Operational Expenses:</i>								
Total Operating Expenses	-	-	-	-	-	-	-	-
Net Performance before Depreciation & Overhead Allocations	(1)	9	16,082	3,587	29,667	5,722	(577)	54,490
Depreciation	-	-	-	-	-	-	-	-
<i>Overhead Allocations:</i>								
Total Overhead Allocations	-	-	-	-	-	-	-	-
Total Expenses	-	-	-	-	-	-	-	-
Net Margin	\$ (1)	\$ 9	\$ 16,082	\$ 3,587	\$ 29,667	\$ 5,722	\$ (577)	\$ 54,490
Capital	-	-	-	-	-	-	-	-
General Fund Support/Transfer In	-	-	-	-	-	-	-	-

Primary Care Behavioral Health Statement of Revenues and Expenses
 For The Second Month Ended November 30, 2023

Current Month							Fiscal Year To Date							
Actual	Budget	Variance	%	Prior Year	Variance	%		Actual	Budget	Variance	%	Prior Year	Variance	%
\$ 106,982	\$ 95,933	\$ 11,049	11.5%	\$ 67,625	\$ 39,358	58.2%	Gross Patient Revenue	\$ 224,237	\$ 191,867	\$ 32,370	16.9%	\$ 166,666	\$ 57,571	34.5%
4,961	46,111	(41,151)	(89.2%)	27,138	(22,178)	(81.7%)	Contractual Allowance	67,194	92,223	(25,029)	(27.1%)	75,745	(8,552)	(11.3%)
22,946	18,630	4,316	23.2%	12,229	10,717	87.6%	Charity Care	48,541	37,259	11,282	30.3%	30,107	18,435	61.2%
23,363	24,216	(853)	(3.5%)	(4,620)	27,983	(605.7%)	Bad Debt	58,709	48,432	10,277	21.2%	15,579	43,130	276.8%
51,270	88,957	(37,687)	(42.4%)	34,747	16,523	47.6%	Total Contractuals and Bad Debt	174,444	177,913	(3,469)	(1.9%)	121,431	53,013	43.7%
2,349	417	1,932	463.3%	3,242	(893)	(27.5%)	Other Patient Revenue	4,697	833	3,864	463.9%	6,483	(1,786)	(27.5%)
58,061	7,393	50,668	685.4%	36,119	21,942	60.7%	Net Patient Service Revenue	54,490	14,787	39,704	268.5%	51,718	2,772	5.4%
54.27%	7.71%			53.41%			Collection %	24.30%	7.71%			31.03%		
\$ 58,061	\$ 7,393	\$ 50,668	685.4%	\$ 36,119	\$ 21,942	60.7%	Total Revenues	\$ 54,490	\$ 14,787	\$ 39,704	268.5%	\$ 51,718	\$ 2,772	5.4%
							Direct Operating Expenses:							
-	-	-	-	-	-	-	Total Operating Expenses	-	-	-	-	-	-	-
\$ 58,061	\$ 7,393	\$ 50,668	685.4%	\$ 36,119	\$ 21,942	60.7%	Net Performance before Depreciation & Overhead Allocations	\$ 54,490	\$ 14,787	\$ 39,704	268.5%	\$ 51,718	\$ 2,772	5.4%
-	-	-	-	-	-	-	Total Expenses	-	-	-	-	-	-	-
\$ 58,061	\$ 7,393	\$ 50,668	685.4%	\$ 36,119	\$ 21,942	60.7%	Net Margin	\$ 54,490	\$ 14,787	\$ 39,704	268.5%	\$ 51,718	\$ 2,772	5.4%



District Clinic Holdings, Inc.

Clinic Visits - Adults and Pediatrics	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Current Year	Current YTD	%Var to	Prior Year
													Total	Budget	Budget	Total
West Palm Beach	1,749	1,462											3,211	2,513	27.8%	2,513
Delray	728	760											1,488	-	#DIV/0!	1,311
Lantana	1,894	1,716											3,610	3,396	6.3%	3,396
Belle Glade & Women's Health Care	821	756											1,577	1,489	5.9%	1,489
Lewis Center	22	44											66	48	37.5%	24
Lake Worth & Women's Health Care	1,205	1,023											2,228	2,290	(2.7%)	2,290
Jupiter & Women's Health Care	599	555											1,154	875	31.9%	875
West Boca & Women's Health Care	388	324											712	614	16.0%	614
St Ann Place	15	11											26	30	(13.3%)	-
Clb Mob 1 Warrior	30	18											48	-	#DIV/0!	-
Clb Mob 2 Scout	-	-											-	-	#DIV/0!	-
Clb Mob 3 Hero	5	32											37	77	(51.9%)	77
Portable Medical	88	33											121	54	124.1%	-
Mangonia Park	623	625											1,248	1,712	(27.1%)	1,712
Total Clinic Visits	8,167	7,359	-	-	-	-	-	-	-	-	-	-	15,526	13,098	18.5%	14,301
Dental Visits																
West Palm Beach Dental	1,292	985											2,277	1,925	18.3%	8,431
Delray Dental	533	481											1,014	956	6.1%	956
Lantana Dental	921	718											1,639	1,298	26.3%	1,298
Belle Glade Dental	543	462											1,005	639	57.3%	639
Portable Dental	15	16											31	27	14.8%	27
Total Dental Visits	3,304	2,662	-	-	-	-	-	-	-	-	-	-	5,966	4,845	23.1%	11,351
Total Medical and Dental Visits	11,471	10,021	-	-	-	-	-	-	-	-	-	-	21,492	17,943	19.8%	25,652
Mental Health Counselors (non-billable)																
West Palm Beach BH	96	156											252	281	(10.3%)	281
Delray BH	436	394											830	284	192.3%	284
Lantana BH	144	180											324	211	53.6%	211
Belle Glade BH	-	-											-	-	#DIV/0!	206
Mangonia Park BH	1,110	798											1,908	1,628	17.2%	1,628
Lewis Center BH	-	-											-	-	#DIV/0!	-
Lake Worth BH	143	131											274	311	(11.9%)	311
Jupiter BH	-	-											-	-	#DIV/0!	-
St Ann Place BH	82	65											147	185	(20.5%)	-
West Boca BH	33	17											50	70	(28.6%)	-
Mobile Van	-	-											-	-	#DIV/0!	-
Total Mental Health Screenings	2,044	1,741	-	-	-	-	-	-	-	-	-	-	3,785	2,970	27.4%	2,921
GRAND TOTAL	13,515	11,762	-	-	-	-	-	-	-	-	-	-	25,277	20,913		28,573

**CL BRUMBACK PRIMARY CARE CLINICS
BOARD OF DIRECTORS
JANUARY 24, 2024**

1. Description: Compliance with HRSA Monthly Meeting Requirement

2. Summary:

This agenda item is to function as a commitment to this Board’s commitment to remain in compliance with this requirement.

3. Substantive Analysis:

Per Chapter 19 of the HRSA Compliance Manual, it is required that the health center Board hold *monthly meetings where a quorum is present to ensure the board has the ability to exercise its required authorities and functions.*

This Board is affirming their commitment to compliance with the HRSA monthly board meeting requirement.

4. Fiscal Analysis & Economic Impact Statement:

	Current FY Amounts	Total Amounts (Current + Future)	Budget
Capital Requirements	N/A		Yes <input type="checkbox"/> No <input type="checkbox"/>
Net Operating Impact	N/A		Yes <input type="checkbox"/> No <input type="checkbox"/>

*Non-budgeted expenditures in excess of \$250,000 require Finance and Audit Committee review and Board approval.

Reviewed for financial accuracy and compliance with purchasing procedure:

DocuSigned by:

 CA6A21FF279341a-Cafarelli
 Interim VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

N/A

 Committee Name

N/A


 Date


**CL BRUMBACK PRIMARY CARE CLINICS
BOARD OF DIRECTORS
JANUARY 24, 2024**

6. Recommendation:

Staff recommends the Board approve this agenda item as an attestation to its commitment to meeting monthly.

Approved for Legal sufficiency:

DocuSigned by:

0CF6F7DB6706484
Bernabe Icaza
SVP & General Counsel

DocuSigned by:

F637D209DB52427
Candice Abbott
SVP & Chief Operating Officer
Executive Director of FQHC Services

**CL BRUMBACK PRIMARY CARE CLINICS
BOARD OF DIRECTORS
JANUARY 24, 2024**

1. Description: Nomination of New Clinic Board Member

2. Summary:

This agenda item recommends the appointment of Crystal Gonzalez to the Clinic Board.

3. Substantive Analysis:

Ms. Crystal Gonzalez has submitted an application for consideration for appointment to the District Clinic Holdings, Inc. Board of Directors.

A copy of Ms. Crystal Gonzalez’ application is on file.

4. Fiscal Analysis & Economic Impact Statement:

	Current FY Amounts	Total Amounts (Current + Future)	Budget
Capital Requirements	N/A		Yes <input type="checkbox"/> No <input type="checkbox"/>
Net Operating Impact	N/A		Yes <input type="checkbox"/> No <input type="checkbox"/>

*Non-budgeted expenditures in excess of \$250,000 require Finance and Audit Committee review and Board approval.

Reviewed for financial accuracy and compliance with purchasing procedure:

DocuSigned by:

 CA6A21FF2E90481a Cafarelli
 Interim VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

Nominating Committee

 Committee Name

01/24/2024


 Date


**CL BRUMBACK PRIMARY CARE CLINICS
BOARD OF DIRECTORS
JANUARY 24, 2024**

6. Recommendation:

Nominating Membership Committee recommends the Board approve the appointment of Ms. Crystal Gonzalez to the District Clinic Holdings, Inc. Board.

Approved for Legal sufficiency:

DocuSigned by:

0CF6F7DB6706433 Bernabe Icaza
SVP & General Counsel

DocuSigned by:

F637D209DB52427 Candice Abbott
SVP & Chief Operating Officer
Executive Director of FQHC Services

**DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
January 24, 2024**

1. Description: Executive Director Informational Update

2. Summary:

- Family Medicine Residents begin Psychiatric rotation

3. Substantive Analysis:

Our family residents will begin their psychiatric rotation at the end of this month, under the supervision of Dr. Courtney Phillips, VP of Behavioral Health. Alternating Wednesday's we will provide psychiatric services in Belle Glade and Behavioral Health/Substance Use Disorder services in Mangonia.

4. Fiscal Analysis & Economic Impact Statement:

	Current FY Amounts	Total Amounts (Current + Future)	Budget
Capital Requirements	N/A		Yes <input type="checkbox"/> No <input type="checkbox"/>
Net Operating Impact	N/A		Yes <input type="checkbox"/> No <input type="checkbox"/>

*Non-budgeted expenditures in excess of \$250,000 require Finance and Audit Committee review and Board approval.

Reviewed for financial accuracy and compliance with purchasing procedure:

DocuSigned by:

 CA0A21FF2E00481ca Cafarelli
 Interim VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

N/A

 Committee Name

N/A

 Date Approved

DISTRICT CLINIC HOLDINGS, INC.
BOARD OF DIRECTORS
January 24, 2024


6. Recommendation:

Staff recommends the Board Receive and File the Executive Director Informational Update.

Approved for Legal sufficiency:

DocuSigned by:

0CF6F7DB6B524E Icaza
SVP & General Counsel

DocuSigned by:

F637D2090B5247E Abbott
SVP & Chief Operating Officer
Executive Director of FQHC Services

**CL BRUMBACK PRIMARY CARE CLINICS
BOARD OF DIRECTORS
January 24, 2024**

1. Description: Licensed Independent Practitioner Credentialing and Privileging

2. Summary:

The agenda item represents the licensed independent practitioners recommended for credentialing and privileging by the FQHC Medical Director.

3. Substantive Analysis:

The LIPs listed below satisfactorily completed the credentialing and privileges process and met the standards set forth within the approved Credentialing and Privileging Policy. The credentialing and privileging process ensures that all health center practitioners meet specific criteria and standards of professional qualifications. This criterion includes, but is not limited to:

- Current licensure, registration or certification
- Relevant education, training and experience
- Current clinical competence
- Health fitness, or ability to perform the requested privileges
- Malpractice history (NPDB query)
- Immunization and PPD status; and
- Life support training (BLS)

Last Name	First Name	Degree	Specialty	Credentialing
Phillips	Courtney	MD	Psychiatry	Initial Credentialing
Caple	Zaneshia	LMHC	Licensed Mental Health Counselor	Initial Credentialing
Weidner	JD	LMHC	Licensed Mental Health Counselor	Initial Credentialing

Primary source and secondary source verifications were performed for credentialing and privileging elements in accordance with state, federal and HRSA requirements. A Nationally accredited Credentials Verification Organization (CVO) was utilized to verify the elements requiring primary source verification.

The C.L. Brumback Primary Care Clinics utilized internal Credentialing staff and the FQHC medical Director to support the credentialing and privileging process.

**CL BRUMBACK PRIMARY CARE CLINICS
BOARD OF DIRECTORS
January 24, 2024**

Courtney Phillips, MD joined the West Palm Beach Clinic in 2024 specializing in Psychiatry. She attended Wayne State University School of Medicine and also completed her residency at University of Michigan Health System. Dr. Phillips is certified in Psychiatry by the American Board of Psychiatry and Neurology. She has been in practice for eight years.

Zaneshia Caple, LMHC joined the Belle Glade Clinic in 2024 as a Licensed Mental Health Counselor. She attended Nova Southeastern University and is a Certified Master’s Level Addiction Professional by the Florida Certification Board. Ms. Caple has been in practice for eleven years.

JD Weidner, LMHC joined the West Palm Beach Clinic in 2024 as a Licensed Mental Health Counselor. He attended Nova Southeastern University and is certified as a National Certified Counselor by the National Board for Certified Counselors, Inc. Mr. Weidner has been in practice for sixteen years.

4. Fiscal Analysis & Economic Impact Statement:

	Current FY Amounts	Total Amounts (Current + Future)	Budget
Capital Requirements	N/A		Yes <input type="checkbox"/> No <input type="checkbox"/>
Net Operating Impact	N/A		Yes <input type="checkbox"/> No <input type="checkbox"/>

*Non-budgeted expenditures in excess of \$250,000 require Finance and Audit Committee review and Board approval.

Reviewed for financial accuracy and compliance with purchasing procedure:

DocuSigned by:

 CA8A21FF2E0380 Jessica Cafarelli
 Interim VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

N/A

 Committee Name

N/A

 Date

**CL BRUMBACK PRIMARY CARE CLINICS
BOARD OF DIRECTORS
January 24, 2024**

6. Recommendation:

Staff recommends the Board approve the Initial Credentialing and privileging of Courtney Phillips, MD, Psychiatry.

Staff recommends the Board approve the Initial Credentialing and privileging of Zaneshia Caple, LMHC, Licensed Mental Health Counselor.

Staff recommends the Board approve the Initial Credentialing and privileging of JD Weidner, LMHC, Licensed Mental Health Counselor.

Approved for Legal sufficiency:

DocuSigned by:
Bernabe Icaza

0CF6F7DB6706B Bernabe Icaza
SVP & General Counsel

DocuSigned by:
Charmaine Chibar

2349071A9734495 Dr. Charmaine Chibar
FQHC Medical Director

DocuSigned by:
Candice Abbott

F637D209DB52427 Candice Abbott
SVP & Chief Operating Officer
Executive Director of FQHC Services

**CL BRUMBACK PRIMARY CARE CLINICS
BOARD OF DIRECTORS
JANUARY 24, 2024**

1. Description: Quality Report

2. Summary:

This agenda item presents the updated Quality Improvement & Quality Updates:

- Quality Council Meeting Minutes – January 2024
- UDS Report – December 2023
- Provider Productivity Report – December 2023

3. Substantive Analysis:

PATIENT SAFETY & ADVERSE EVENTS

Patient safety and risk, including adverse events, peer review and chart review are brought to the board “under separate cover” on a quarterly basis.

PATIENT SATISFACTION AND GRIEVANCES

Patient relations to be presented as separate agenda item.

QUALITY ASSURANCE & IMPROVEMENT

Colorectal Cancer Screening Initiative: In November, as part of our continued colorectal cancer screening efforts, we coordinated with health center providers and Exact Sciences Laboratories to create Cologuard bulk orders for 599 insured patients that were identified as being due for their colorectal cancer screening. On December 4th, 515 Cologuard kits were shipped out to patients. Since then, 98 kits have been received by Exact Sciences laboratory with 53 valid results, 7(13.2%) of which were positive (see Bulk Order Report).

UTILIZATION OF HEALTH CENTER SERVICES

Individual monthly provider productivity stratified by clinic.

4. Fiscal Analysis & Economic Impact Statement:

	Current FY Amounts	Total Amounts (Current + Future)	Budget
Capital Requirements	N/A		Yes <input type="checkbox"/> No <input type="checkbox"/>
Net Operating Impact	N/A		Yes <input type="checkbox"/> No <input type="checkbox"/>

*Non-budgeted expenditures in excess of \$250,000 require Finance and Audit Committee review and Board approval.

Reviewed for financial accuracy and compliance with purchasing procedure:

DocuSigned by:

 CA6A21FF2E06481ca Cafarelli
 Interim VP & Chief Financial Officer

**CL BRUMBACK PRIMARY CARE CLINICS
BOARD OF DIRECTORS
JANUARY 24, 2024**

5. Reviewed/Approved by Committee:

N/A

Committee Name

N/A

Date

6. Recommendation:

Staff recommends the Board approve the updated Quality Report.

Approved for Legal sufficiency:

DocuSigned by:
Bernabe Icaza

0CF6F7DB6706B Bernabe Icaza
SVP & General Counsel

DocuSigned by:
Charmaine Chibar

2349071A973483 Charmaine Chibar
FQHC Medical Director

DocuSigned by:
Candice Abbott

F637D209DB52427C Candice Abbott
SVP & Chief Operating Officer
Executive Director of FQHC Services



Quality Council Meeting Minutes

Date: January 10, 2023

Time: 1:30-4:00pm

Attendees: Steven Sadiku – Director of Corporate Quality; Maria Chamberlin – Assistant Director of Nursing; Shauniel Brown – Senior Risk Manager; Carolina Foksinski- Operations Process Manager; Erik Lalani – Dental Operations Manager; Alexa Goodwin – Patient Relations Manager; Dr. Sandra Warren – Associate Medical Director; Dr. Charmaine Chibar – FQHC Medical Director; Angela Santos – Director of Ops; Dr. Josh Adametz – Dental Director; Jessica Ramirez; Marisol Miranda – Director of Clinic Operations; Ivonne Cohen – Business Intelligence Developer; Miriam Meza – Patient Access Coordinator, Valena Gibric – Medical Director District Cares; Courtney Phillips – Director of Behavioral Health; Lisa Hogans – Director of Nursing; Nancy Gonzalez – Dental Program Director; Irene Garcia; Nancy Gonzalez;

Excused: Candice Abbot – SVP & Chief Operating Officer; Belma Andric – SVP & Chief Medical Officer; Dr. Ana Ferwerda – Director of Clinic EHR Optimization & Women’s Health

Minutes by: Christine Ferguson – Executive Assistant

<u>AGENDA ITEM</u>	<u>DISCUSSION / RECOMMENDATIONS</u>	<u>ACTION ITEMS (AI)</u>	<u>RESPONSIBLE PARTY</u>	<u>DATE</u>
PATIENT SAFETY & ADVERSE EVENTS				
OCCURRENCES	<p><i>Per Compliance, discussion surrounding not recording meetings.</i></p> <p>Report Summary The December 2023 Risk Management Tableau dashboard was presented. Volumes were provided for the following clinic areas and types: total reported events, incidents, and good catches. Trends were also presented by volume of reported entries and clinic location. The Risk Report Summary and graphical data were reviewed with the Committee for October 2023. Reports included the risk severity - volume and category/type for incidents and near misses entered in HCD’s safety event reporting system. Risk mitigation strategies were also shared with the Committee.</p>			



([December 2023](#) Risk Report Summary presented with graphs.)

UTILIZATION

OPERATIONS

Productivity

Productivity December 2023					
Service Line	Target		Seen		% of Goal
	In Person	Tele	In Person	Tele	
Adult Care	5,794		4,454		77%
Pediatrics	1,659		1,590		96%
Primary Residents	663		620		94%
Women's Health	687		569		83%
Behavioral Health	647		584		90%
Behavioral Health - Psych	373		212		57%
Psych Residents	660		470		71%
Substance Use	423		561		133%
Dental	2,018		1,920		95%
Dental Hygiene	868		787		91%

(Clinic productivity report with graphs were presented.)

Walk-ins

Medical

- Scheduled: 7,285
- Walk-Ins: 1,775

Dental:

- Scheduled: 2,244
- Walk-Ins: 463



	<p><u>No Show Rates</u> No Show rate was 21% which is consistent with previous month. Year to date no show rate is 22%, between medical and dental, of which 1% is from telehealth visits.</p> <p>(Report with graph presented.)</p>			
	<p><u>Doximity Dialer Usage -November 2023</u></p> <p>Users</p> <ul style="list-style-type: none"> • 51 registered users (98.1% registration rate) <ul style="list-style-type: none"> ○ 17 active users (7 MD/DOs, 6 NP, PA, 4 Care Team <p>Calls</p> <ul style="list-style-type: none"> • 196 total calls <ul style="list-style-type: none"> ○ 122 voice calls <ul style="list-style-type: none"> ▪ 115 successful calls (94.3%) success rate ▪ 5 call escalated to video ○ 74 video calls <ul style="list-style-type: none"> ▪ 52 successful calls (70.3%) success rate ○ 1 secure text <p><u>Doximity Dialer Usage -December 2023</u></p> <p>Users</p> <ul style="list-style-type: none"> • 51 registered users (98.1% registration rate) <ul style="list-style-type: none"> ○ 18 active users (7 MD/DOs, 7 NP, PA, 4 Care Team 			



	<p>Calls</p> <ul style="list-style-type: none"> • 164 total calls <ul style="list-style-type: none"> ○ 92 voice calls <ul style="list-style-type: none"> ▪ 90 successful calls (97.8%) success rate ○ 72 video calls <ul style="list-style-type: none"> ▪ 58 successful calls (80.6%) success rate ○ 0 secure text <p>(Report with breakdown by specialty and user)</p>			
PATIENT RELATIONS				
<p>GRIEVANCES, COMPLAINTS & COMPLIMENTS</p>	<p><u>Patient Relations Dashboard – November & December 2023</u></p> <p>For November 2023, there were a total of 9 Patient Relations Occurrences that occurred between 5 Clinics and Clinic Administration. Of the 9 occurrences, there was 3 Grievances and 6 Complaints. The top 3 categories were Care & Treatment, Finance, Communication, Referral Related and Physician Related issues. The top subcategory was Billing Issues (refusal to pay or request for write off) with 2 occurrences. There was also a total of 14 patient compliments and 1 employee to employee compliment received across 6 Clinics and Clinic Administration. Breakdown of each clinic presented.</p> <p>For December 2023, there were a total of 4 Patient Relations Occurrences that occurred between 3 Clinics. Of the 4 occurrences, there was 1 Grievance and 3</p>			



	<p>Complaints. The top 3 categories were Communication, Environmental and Care & Treatment. There was no top subcategory, as each had 1 occurrence. There was also a total of 23 patient compliments and 2 employee to employee compliments received across 5 Clinics and Clinic Administration. Breakdown of each clinic presented. <i>(Patient Relations Report & Patient Relations Dashboard with Graphs presented.)</i></p>			
<p>SURVEY RESULTS</p>	<p><u>Patient Satisfaction Survey – December 2023</u> For December 2023 there were 727 Patient Satisfaction Surveys completed out of a total of 12,178 patient visits. This is a 6% return rate out of the total survey delivered for the month. West Palm Primary had the highest return rate (89/1,623). The top 5 and lowest 5 scored-questions were presented for each area.</p> <p>“Best Questions” for in person visits – December 2023:</p> <ul style="list-style-type: none"> • Quality of your medical care – 93% • Things explained in a way you could understand – 92% • Instructions given regarding medication/follow-up care - 91% • Care and concern of our nurses/medical assistants – 91% • Friendliness of the receptionist upon your arrival – 91% <p>“Worst Questions” for in person visits – December 2023:</p> <ul style="list-style-type: none"> • Your ability to contact us after hours - 11% (decrease from last month) 			



	<ul style="list-style-type: none"> • Being informed about any delays during this visit – 9% (decrease from last month) • Overall comfort – 10% • Each member of my care team identified themselves and their role in my care – 9% • Helpfulness of the staff who assisted you with billing or insurance questions – 8% <p>Of the surveys received for December, 42% of patients perceived wait time between 6 to 15 minutes, 36% of responses were from patients that this was their first visit to the practice, 23% was between 1 and 3 years and 22% was less than 6 months, 73% of surveys completed were by females and most patients preferred to be seen on Monday, Tuesday and Wednesday mornings. 86% of responses in December were promoters, 9% of responses were neutrals and 5% of responses were detractors. This is a steady increase in promoters since January 2022. Top promoters, detractors, and patient comments presented by clinic and service line. (Patient Satisfaction Survey PowerPoint presented.)</p>			
<p>OUTBOUND CALL CAMPAIGNS</p>	<p><u>Afterhours Report – Dec 2023</u> In Dec 2023, the Clinic Service Center returned 170 after hours calls. This was a 61% decrease from the previous month. We saw our highest volume in Medical related/ Appt request calls with 75% of the calls returned. Our WPB Location remains at our highest volume clinics 26% of calls for Dec 23.</p> <p><u>Outreach Call Campaigns</u></p>			



	<p>The call center assisted the care coordination team with a Humana Medicaid Call Campaign in Dec 23. The list was received from the payer and included all patients assigned to our clinics that have either not been seen in 6 months OR have not established with one of our providers. The focus of this campaign was to assist the clinics in filling our lower volume clinics.</p> <p>The list included 603 unique Humana Medicaid patients. The CSC team successfully schedule 242 Appts or 40% of the patients on the list.</p> <p>In addition to the outbound call campaign, the clinic service center assisted with rescheduling appts for upcoming dates due to providers outages. The CSC successfully rescheduled a total of 60 unique patients to other dates/times.</p> <p><i>(Outbound Campaign PowerPoint presented.)</i></p>			
<p>NEXT THIRD AVAILABLE</p>	<p><u>Primary Care</u></p> <p>Belle Glade – 14 days out Mobile school buses – 1 days out Delray – 23 days out Jupiter – 2 day out Lake Worth – 18 days out Lantana – 35 days out Lewis – 1 days out Mangonia – 2 days out WPB – 18 days out</p>	<p>Dental will be presented next month, Erik is working on these numbers.</p>	<p>Erik</p>	



	<p><u>Womens Health</u> Belle Glade – 10 days out Jupiter- 7 days out LW – 3 days out</p> <p><u>BH</u> Delray – 3 days out LW – 3 days out Lantana – 0 days out Mangonia – 3 days out WPB – 4 days out</p>			
QUALITY				
QUALITY				
MEDICAL	<p><u>Controlled Diabetes based on A1c less than 9% December, 2023</u> Yearly goal 67%</p> <p>The diabetes measure data for December, 2023 shows that our patients are currently controlled at (3045)74 % while (1047) 25% are uncontrolled (of 3982 diabetic patients total) and (127) 3% of patients need data. Our HRSA goal is to have 67% of patients with controlled diabetes. (Diabetes dashboard presented.)</p>			



	<p><u>Colorectal Cancer Screening - December 2023</u> Yearly goal 82%</p> <p>Satisfied: 4729 (45%) No met: 5680 (55%) (Report with graph presented.)</p>			
	<p>Among patients with the colorectal cancer screening that do not meet having the screening completed (, the screening was ordered in 57% of the patients and 43% of the patient did not have and order for colorectal cancer screening.</p> <p>The highest percentage of colorectal cancer screening was for patients in the Boca Clinic with 64% and Lantana Clinic with 54%.</p> <p>Looking only to Fit test ordered through the year, our highest return percentages were at Boca Clinic (58%), Lantana Clinic (49%), and Belle Glade Clinic (45%). (Report with graph presented.)</p>			
	<p><u>Breast Cancer Screening – December, 2023</u> Yearly goal 60%</p> <p>Satisfied screenings – 2477 (58%) Unsatisfied Screenings – 1772 (42%)</p> <ul style="list-style-type: none"> • Not Met with order – 1319 (75%) • Not Met (Patient Missed) – 443 (25%) <p>The clinics with the highest percentage of screening in 2023 were Belle Glade with 78%, Lantana 66% and Boca clinic 65%</p> <p>The clinic with the lowest percentage of patients with completion of breast cancer screening in 2023 was West Palm Beach with 50%. (Report with graph presented.)</p>			



	<p><u>HPV</u> Second dose in both females and males for 9-10y and 11-12y has improved, especially when compared to Meningococcal & TDAP.</p> <p>(Report with graph presented.)</p>			
	<p><u>Cervical Cancer Screening - December, 2023</u> Yearly goal 65%</p> <p>Satisfied: 7302 (61%) No satisfied : 4699 (39%)</p> <p>The clinics with the highest number of patients with cervical cancer screening completed were Lake Worth Clinic (77%), Boca Clinic 76% and Lantana 71%.</p> <p>Among the large clinics, West Palm Beach Clinic has the lowest percentage of patients with cervical cancer screening completed (42%) and the largest percentage of patients missed</p> <p>(Report with graph presented.)</p> <p><u>HIV Screening – December, 2023</u> Yearly goal 37%</p> <p>Satisfied: 12394 (53%) No satisfied : 10838 (47%)</p> <p><u>Controlling High Blood Pressure – December 2023</u> Yearly goal 80% Satisfied: 4784 (71%) No satisfied : 1996 (29%)</p>			



	<p>Medical Quality Site Visits</p> <p><u>Quarter 4 Clinical QSV</u></p> <table border="1"> <tr><td>Belle Glade</td><td>97%</td></tr> <tr><td>Delray</td><td>97%</td></tr> <tr><td>Jupiter</td><td>97%</td></tr> <tr><td>Lake Worth</td><td>97%</td></tr> <tr><td>Lantana</td><td>95%</td></tr> <tr><td>Lewis Center</td><td>93%</td></tr> <tr><td>Mangonia</td><td>94%</td></tr> <tr><td>Mobile-Hero</td><td>81%</td></tr> <tr><td>St.Anns</td><td>67%</td></tr> <tr><td>W.Boca Raton</td><td>95%</td></tr> <tr><td>West Palm Beach</td><td>87%</td></tr> </table> <p><u>Quarter 4 Non-Clinical QSV</u></p> <table border="1"> <tr><td>Belle Glade</td><td>97%</td></tr> <tr><td>Delray</td><td>83%</td></tr> <tr><td>Jupiter</td><td>97%</td></tr> <tr><td>Lake Worth</td><td>98%</td></tr> <tr><td>Lantana</td><td>97%</td></tr> <tr><td>Lewis Center</td><td>95%</td></tr> <tr><td>Mangonia</td><td>95%</td></tr> <tr><td>Mobile-Hero</td><td>95%</td></tr> <tr><td>St.Anns</td><td>97%</td></tr> <tr><td>W.Boca Raton</td><td>93%</td></tr> <tr><td>West Palm Beach</td><td>96%</td></tr> </table>	Belle Glade	97%	Delray	97%	Jupiter	97%	Lake Worth	97%	Lantana	95%	Lewis Center	93%	Mangonia	94%	Mobile-Hero	81%	St.Anns	67%	W.Boca Raton	95%	West Palm Beach	87%	Belle Glade	97%	Delray	83%	Jupiter	97%	Lake Worth	98%	Lantana	97%	Lewis Center	95%	Mangonia	95%	Mobile-Hero	95%	St.Anns	97%	W.Boca Raton	93%	West Palm Beach	96%			
Belle Glade	97%																																															
Delray	97%																																															
Jupiter	97%																																															
Lake Worth	97%																																															
Lantana	95%																																															
Lewis Center	93%																																															
Mangonia	94%																																															
Mobile-Hero	81%																																															
St.Anns	67%																																															
W.Boca Raton	95%																																															
West Palm Beach	87%																																															
Belle Glade	97%																																															
Delray	83%																																															
Jupiter	97%																																															
Lake Worth	98%																																															
Lantana	97%																																															
Lewis Center	95%																																															
Mangonia	95%																																															
Mobile-Hero	95%																																															
St.Anns	97%																																															
W.Boca Raton	93%																																															
West Palm Beach	96%																																															
<p>Dental</p>	<p><u>Dental Sealants</u></p> <p>YTD 2023: 96% (625; n=651)</p> <p>December 2023: 96% (130; n= 136)</p>																																															



	<p><u>Limited Exams</u></p> <p>December 2023: 318</p> <ul style="list-style-type: none"> -Same Day Extractions: 138 (43%, n=318) -Antibiotics Given: Patients without a future extraction appointment type 95 (30%, n=318) -Ext. not needed(non-emergent): 64 (20%, n=318) -Returns (Follow-Up): Patients with a future extraction appointment type 21 (7%, n=318) -Returned within 21 days for ext.: 14 (67%, n=21) 			
	<p><u>MDI/WHO</u></p> <p>December 2023</p> <p><u>Total Well Visit Pediatric Patients: 171</u></p> <ul style="list-style-type: none"> - Excluded from MDI KPI 75 (44%; n=171) - Eligible MDI 96 (56%; n=171) <p><u>Total Pediatrician KPI Patients (Pts who do not have a dental home): 96</u></p> <ul style="list-style-type: none"> - No MDI 70 (73% n=96) - MDI 26 (27% n=96) <p><u>Total of patients who had MDI visit: 26</u></p> <ul style="list-style-type: none"> - Declined WHO 16 (62% n=26) - Interested in WHO 10 (38% n=26) <p><u>Total Dentist KPI Patients (Pts. Interested in WHO): 10</u></p> <ul style="list-style-type: none"> - WHO not seen by Dentists 1 (10%; n=10) - WHO seen by Dentists 9 (90%; n=10) 			



Dental Clinic Audit Summary Dental Clinic Audit – December 2023												
	<table border="1" style="width: 100%;"> <tr> <td>Belle Glade</td> <td style="text-align: center;">98%</td> </tr> <tr> <td>Delray</td> <td style="text-align: center;">94%</td> </tr> <tr> <td>Lantana</td> <td style="text-align: center;">94%</td> </tr> <tr> <td>West Palm Beach</td> <td style="text-align: center;">97%</td> </tr> </table>	Belle Glade	98%	Delray	94%	Lantana	94%	West Palm Beach	97%			
Belle Glade	98%											
Delray	94%											
Lantana	94%											
West Palm Beach	97%											
Behavioral Health	<p><u>PHQ9 – December 2023</u></p> <p>Total encounters with PHQ9: 5,200 12.09% positive rate</p> <p>Unique patients with positive PHQ9= 374/7.19%</p> <p>(Report with graph presented.)</p>											
	<p><u>Depression Remission December 2023</u></p> <p>Yearly goal 14%</p> <p>41% achieving depression remission (295 patients) 0% increase from the previous month.</p> <p>Lantana Clinic achieved the highest percentage of patient with depression remission at 49%.</p> <p>(Report with graph presented.)</p>											
WOMENS HEALTH	<p><u>Early Entry into Prenatal Care Jan-Dec 2023</u></p> <p>Early Entry into care into the First Trimester is 53%, an improvement from last year's 45.4%. Total population of 344 prenatal patients</p>											



	<p><u>Low Birth Weight Jan-Dec 2023</u> Babies born with a birth weight below normal (under 2,500 grams) 9% --<1500 grams: 1% --1500—2499 grams: 8 % 2022 National average 8.43% Total deliveries/birth weight= 149</p>			
<p>NURSING</p>	<p><u>Higher Level of Care</u> Higher Level of Care November 2023 94 ER referrals/ 90 patients were sent to the ER in November. The breakdown of the referrals is:</p> <ul style="list-style-type: none"> • WH- 12 (13 %) • Peds- 19 (20%) • Adult- 58 (62%) (this combines urgent care and emergency medicine referrals) • Life Trans to LMC- 0 • Adult Crisis- 5 (5%) • Peds Crisis- 0 <p>There were 4 patients with multiple orders in November.</p> <p>PEDS REFERRALS- highest producer was Dr. Clarke 15 (16%)</p>			



	<p>ADULT REFERRALS- highest producers this month were Dr. Zhang in Jupiter 7 (7%) Top diagnosis: Bronchiolitis PEDS (4)</p> <p>Two patient's with 2 referrals were requested to be reviewed by Medical Director.</p> <p>Higher Level of Care December 2023 78 ER referrals/ 75 patients were sent to the ER in December. The breakdown of the referrals is:</p> <ul style="list-style-type: none"> • WH- 16 (21 %) • Peds- 11 (14%) • Adult- 47 (60%) (this combines urgent care and emergency medicine referrals) • Life Trans to LMC- 1 (1%) • Adult Crisis- 3 (4 %) • Peds Crisis- 0 <p>There were 3 patients with multiple orders in December.</p> <p>PEDS REFERRALS- highest producer was Dr. Clarke with 8 (36%)</p>			
--	--	--	--	--



	<p>Top diagnosis: Unspecified psychosis not due to a substance or known physiological condition ADULT CRISIS STABILIZATION (2) Localized swelling left lower extremity ADULT (2)</p>			
<p>PEER REVIEW</p>	<p>Adult Medical – Q3 75 charts were peer reviewed. 72 were evaluated as “within standard of care” and 3 were evaluated as, “Provider Self-identified Remediation”. There were three duplicate encounters that were excluded</p> <p>Dentist Peer Review – Q3 40 charts were peer reviewed. 35 were evaluated as “within standard of care”, 4 were evaluated as “ Provider Self-identified Remediation” and 0 were evaluated as “Provider Education Required”, 1 were evaluated as “Inappropriate Care”</p> <p>Hygenist Peer Review – Q3 35 charts were peer reviewed. 24 were evaluated as “within standard of care”, 5 were evaluated as “Provider Self-identified Remediation” and 6 were evaluated as “Provider Education Required”, 00 were evaluated as “Inappropriate Care”</p>			



QUALITY METRICS				
UDS YTD 2023				
Of the <u>16</u> UDS Measures: 9 Exceeded the HRSA Goal and 7 were short of the HRSA Goal (<i>Clinic Score/HRSA Goal / Healthy People Goal</i>)				
Medical UDS Report	Adult Weight screening and follow-up: (90% / 90%)			
	Breast Cancer Screening: (<u>58</u> %/60%)			
	Cervical Cancer Screening: (<u>61</u> %/65%)			
	Childhood immunization: (<u>41</u> %/ 60%)			
	Colorectal Cancer Screening: (<u>45</u> % / 82%)			
	Coronary Artery Disease CAD: (<u>84</u> % / 81%)			
	Dental Sealants: (<u>96</u> % / 75%)			
	Depression Remission: (<u>41</u> % / 14%)			
	Diabetes: (<u>73</u> % / 67%)			
	HIV Screening: (<u>53</u> % / 32%)			
	Hypertension: (<u>71</u> % / 80%)			
	Ischemic Vascular Disease (IVD): (<u>77</u> % / 86%)			
	Depression screening: (<u>95</u> % / 83%)			
	Depression screening (Homeless): (<u>92</u> % / 83%)			
	Tobacco use screening & cessation: (<u>96</u> % / 93%)			
Weight assessment, Children & Adolescent: (93% /90%)				
Meeting Adjourned: 3:30pm				



Bulk Order Report

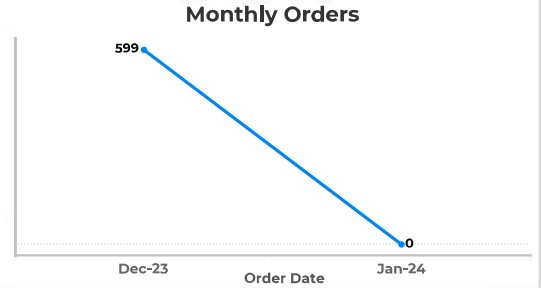
Health Care District of the Palm Beaches



Filters Settings Report Timeframe: Rolling 12 Mont. to Today All figures are for Bulk Orders unless otherwise noted

Summary

Orders	Shipments	Kits Received	Valid Results	Positive
599	515	98	53	13.2%



Performance

14-Day Shipment Rate	60-Day Kit Return Rate	60-Day Adherence Rate	60-Day Completion Rate
86.0%			

Monthly 60-Day Adherence Rate



Details

[Chart Settings](#)

Current Order Status

Kit Shipped to Patient	407
Cancelled: Duplicate	86
Valid Result	53
Exact Sciences Processing Order	25
Kit Received for Testing	15
Shipment Hold: Frequency	9
Other Reason	3

Order Placed: ■ 1-30 days ago ■ 31-60 days ago

Definitions

- 14 Day Shipment Rate:** % of orders that were shipped within 14 days
- Kit Return Rate:** % of Kits returned non-empty
- Completion Rate:** % of Orders that successfully resulted
- Adherence Rate:** % of Shipments that successfully resulted

Screening Populations

Screening Populations	Orders
New 50+	505
New 45-49	79
Rescreen	15

PRODUCTIVITY REPORT DECEMBER 2023

ALL PROVIDERS

AS 12/31/2023 Based on Completed Appointments

<50% >=50% and <80% >=80% and <100% >=100%

ADULT CARE						
Provider	Daily Target	Days Worked	Target for the Month	% Monthly Target Achieved		Daily Average
			Total	Total	Total	
ALFONSO PUENTES, RAMIRO, MD	18	14.5	261	201	77%	13.9
CASTIGLIA, SARAH, MD	18 / 8 Hr. Mide & LW High	18.0	279	161	58%	8.9
DABU, DARNEL, MD	28 when no precepting	3.5	26	23	88%	6.6
DORCE-MEDIARD, JENNIFER, MD	18	0.5	9	6	67%	12.0
FERNANDEZ SANCHEZ, MARCO, NP	20	19.0	380	286	75%	15.1
FIDLER, LISA, APRN	16	16.0	256	161	63%	10.1
FLOREZ, GLORIA MATILDE, MD	18	12.5	225	212	94%	17.0
JEAN-JACQUES, FERNIQUE, NP	16	16.0	256	242	95%	15.1
KOOPMAN, REBECCA SUE, PA	20	14.5	290	180	62%	12.4
LAM, MINH DAI, NP	16	14.5	232	270	116%	18.6
LANGLEY, TAMARA, NP	16	18.5	296	183	62%	9.9
LARA SUAREZ, MARIA, NP	16	15.0	240	119	50%	7.9
MILLIEN, ELEONORE, APRN	8	13.0	104	67	64%	5.2
NAVARRO, ELSY, NP	16	15.5	248	230	93%	14.8
NOUKELAK, GERMAINE, MD	18	16.0	288	282	98%	17.6
PEREZ, DANIEL JESUS, MD	28 when no precepting	4.0	39	29	74%	7.3
PHILISTIN, KETELY, NP	16	15.0	240	192	80%	12.0
PIERRE LOUIS, JOANN, NP	16	15.0	240	198	83%	13.2
TAHERI, NERGESS, DO	28 when no precepting	4.0	40	37	93%	9.3
TUCKER, CHELSEA, PA	16	18.5	296	172	58%	9.3
TUSSEY, CLAUDIA, MD	18	18.0	324	274	85%	15.2
ST. VIL, CARLINE, NP	16	15.5	248	216	87%	13.9
STANEK, EWELENA, PA	16	18.0	288	249	86%	13.8
REGAN, PATRICK, DO	New Provider	3.0	7	7	100%	2.3
WARREN, SANDRA, MD	18	9.5	171	147	86%	15.5
WILMOT, ALTHEA, NP	18 / 6 Mide, St Ann, crew	17.5	160	111	69%	6.3
ZHANG, MICHAEL, MD	18	19.5	351	199	57%	10.2
ADULT CARE TOTALS		364.5	5,794	4,454	77%	

RESIDENCY PROGRAM						
PGV-1	5	20.5	103	118	115%	5.8
PGV-2	11	21.0	231	206	89%	9.8
PGV-3	14	24.5	330	296	90%	12.1
RESIDENTS TOTAL		66.0	663	620	94%	

PEDIATRIC CARE						
CLARKE-AARON, NOELLA, MD	20	14.5	290	256	88%	17.7
DESSALINES, DUCLOS, MD	20	15.5	310	306	99%	19.7
HERNANDEZ GARCIA, JOSE, MD	20	9.0	119	113	95%	12.6
NORMIL-SMITH, SHERLOUNE, MD	20	14.5	290	263	91%	18.1
LAZARO RIVERA, NANCY, MD	20	14.0	280	295	105%	21.1
MARZOUCA, KISHA F., MD	20	18.5	370	357	96%	19.3
PEDIATRIC CARE TOTALS		86	1,659	1,590	96%	

WOMEN'S HEALTH CARE						
FERWERDA, ANA, MD	28 when no precepting	5.5	79	71	90%	12.9
FINLEY, NICOLE, NP	16	19.0	304	254	84%	13.4
PROPHETE, JOYCE, MD	28 when no precepting	19.5	304	244	80%	12.5
WOMEN'S HEALTH CARE TOTALS		44	687	569	83%	

BEHAVIORAL HEALTH INTEGRATION						
CALDERON, NYLSA, LMHC	10	16.5	165	138	84%	8.4
HIRSCH, KAREN, LCSW	8	11.0	88	75	85%	6.8
BROWN, JEREMY, LCSW	10	17.5	175	144	82%	8.2
HART, SHAKIYLA, LCSW	New Provider	16.5	99	113	114%	6.8
JONES, KIARA, LCSW	10	12.0	120	114	95%	9.5
BH INTEGRATION TOTALS		73.5	647	584	90%	

BEHAVIORAL HEALTH PSYCHIATRY						
DEMNER, ADAM, MD	12	1.0	1	1	100%	1.0
BURROWES, SHARON, NP	12	12.5	150	120	80%	9.6
PETER, AMANDA, NP	12	18.5	222	91	41%	4.9
BEHAVIORAL HEALTH PSYCHIATRY		32	373	212	57%	

RESIDENT PSYCHIATRY						
MENESEE, STEPHEN, MD	12	7.0	84	73	87%	10.4
BEAMAN, DAVID, MD	12	6.5	78	32	41%	4.9
DHALIWAL, AMAREEN, MD	12	7.5	90	76	84%	10.1
HOGUE, KRISTIAN, MD	12	6.5	78	31	40%	4.8
MAXWELL, CHRISTIAN, MD	12	8.5	102	88	86%	10.4
NGUYEN, ANH-VU, MD	12	4.0	48	38	79%	9.5
SANCHEZ, GRETEL, MD	12	7.0	84	53	63%	7.6
TORRES, MICHAEL, MD	12	8.0	96	79	82%	9.9
RESIDENTS PSYCHIATRY TOTAL		55.0	660.0	470.0	71%	

BEHAVIORAL HEALTH ADDICTION						
MILETA, SNIEZANA, LMHC	10	19.0	190	294	155%	15.5
LARRAD LAMOTE DE GRIGNON, MARIA, LCSW	10	12.5	125	66	53%	5.3
MITCHELL, ANGELA DENISE, LCSW	8	13.5	108	201	186%	14.9
BH ADDICTION TOTALS		45	423	561	133%	

DENTAL						
ABREU, MARIANA, DDS	16	18.5	296	280	95%	15.1
BERNARD, ANA, DDS	New Provider	10.0	93	93	100%	9.3
ADAMETZ, JOSHUA, DMD	16	10.0	160	184	115%	18.4
ALWEHAIB, ARWA, DDS	16	14.5	229	239	104%	16.5
BOWEN, BEVERLY, DMD	16	14.5	232	211	91%	14.6
SEMINARIO, ADA, DDS	16	14.5	232	201	87%	13.9
SORIANO, MICHAEL, DMD	16	18.0	288	310	108%	17.2
WILLIAMS, RICHARD, DMD	16	15.5	248	190	77%	12.3
ZANGENEH, YASMINE, DMD	16	15.0	240	212	88%	14.3
DENTAL TOTALS		130.5	2,018	1,920	95%	

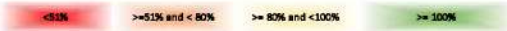
DENTAL HYGIENE						
MOZER NASCIMENTO, ARIANNE MILENA	8	18.5	148	144	97%	7.8
GONZALEZ, NANCY	8	3.0	14	14	100%	4.7
DUCHARME, RHONDA	8 / 16 MDI	11.0	156	146	94%	13.3
HARDCASTLE, CORINA	8	13.0	101	93	92%	7.2
PEOLA, LEYDA	8	19.5	156	138	88%	7.1
MASON, SHERRY	8	19.0	148	142	96%	7.5
PETERSEN, PATRICE	8 / 16 MDI	11.0	145	110	76%	10.0
DENTAL HYGIENE TOTALS		95.0	868	787	91%	

GRAND TOTAL		991.5	13,792	11,767	85%	
--------------------	--	--------------	---------------	---------------	------------	--

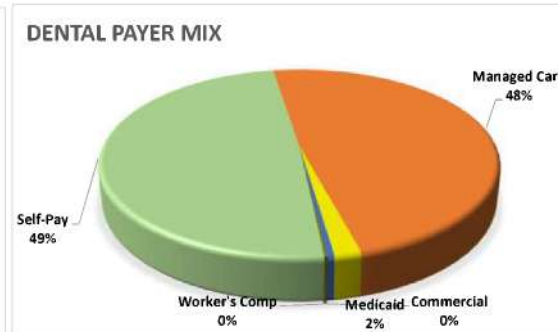
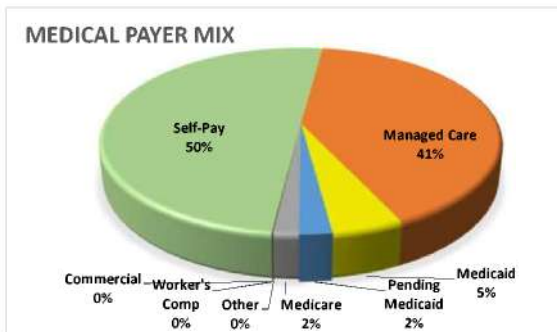
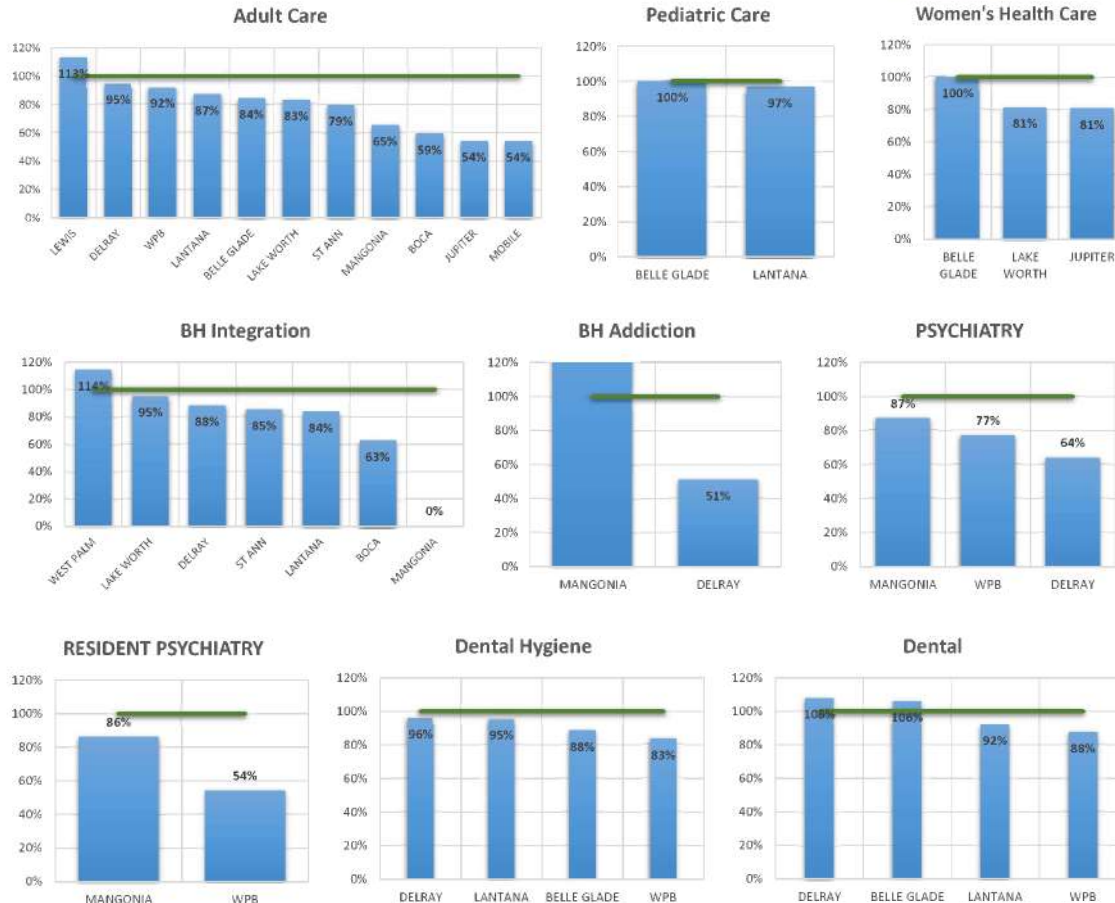
PRODUCTIVITY REPORT DECEMBER 2023

ALL CLINICS

AS 12/31/2023 Based on Completed Appointments



Category	Target for the Month			Total for the Month Seen			% Monthly Target Achieved
	AS 12/31/2023	AM	PM	Total	AM	PM	
ADULT CARE	3,050	2,744	5,794	2,726	1,728	4,454	77%
PEDIATRIC CARE	860	799	1,659	969	621	1,590	96%
WOMEN'S HEALTH CARE	374	313	687	389	180	569	83%
BH INTEGRATION	339	308	647	314	270	584	90%
BH ADDICTION	216	207	423	354	207	561	133%
DENTAL HEALTH	1,055	963	2,018	1,272	648	1,920	95%
DENTAL HYGIENE	443	425	868	381	406	787	91%
BH PSYCHIATRY	199	174	373	150	62	212	57%
RESIDENCY PSYCHIATRY	342	318	660	313	157	470	71%
RESIDENCY PROGRAM	370	294	663	402	218	620	94%
Grand Total	7,248	6,545	13,792	7,270	4,497	11,767	85%



ADULT CARE	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23
ALFONSO PUENTES, RAMIRO, MD	85%	102%	85%	87%	85%	89%	84%	83%	78%	76%	83%	77%
	225/264	90/88	261/308	321/369	300/351	265/297	303/360	344/414	233/297	274/360	217/261	201/261
CASTIGLIA, SARAH, MD	46%	47%	65%	61%			54%	49%	63%	57%	64%	58%
	144/316	153/325	226/350	203/333			184/342	196/396	211/333	226/396	185/288	161/279
DABU, DARNEL, MD	80%	71%	94%	83%	87%	100%	88%	100%	83%	97%	80%	88%
	29/36	21/29	30/32	33/40	21/24	10/10	35/40	29/29	15/18	28/29	28/35	23/26
DORCE-MEDARD, JENNIFER, MD		78%	94%	75%	67%	92%	74%	74%	74%	74%		67%
		7/9	17/18	18/24	6/9	24/26	225/306	225/306	225/306	225/306		6/9
FERNANDEZ SANCHEZ, MARCO, NP	100%	94%	98%	79%	77%	72%	71%	93%	101%	79%	82%	75%
	143/143	241/257	229/234	286/360	347/450	286/400	270/380	448/480	395/390	339/430	286/350	286/380
FIDLER, LISA, APRN	100%	100%	69%	50%	64%	74%	47%	44%	59%	61%	76%	63%
	15/15	135/135	214/309	168/278	229/300	265/300	141/248	187/423	187/315	198/326	231/304	161/256
FLOREZ, GLORIA MATILDE, MD	86%	87%	86%	79%	89%	110%	88%	89%	84%	80%	83%	94%
	265/308	252/289	310/359	262/333	321/360	407/369	260/297	232/261	264/315	266/333	208/252	212/225
JEAN-JACQUES, FERNIQUE, NP	95%	95%	90%	85%	86%	98%	105%	103%	93%	117%	92%	95%
	286/302	244/257	314/349	237/234	332/323	291/248	332/316	349/338	254/272	291/248	258/280	242/256
KOOPMAN, REBECCA SUE, PA	123%	103%	108%	80%	83%	88%	83%	81%	85%	74%	75%	62%
	391/318	296/287	375/347	271/340	371/440	388/440	299/360	350/430	341/400	283/380	233/310	180/290
LAM, MINH DAI, NP	108%	107%	104%	92%	101%	108%	102%	101%	103%	116%	117%	116%
	154/143	267/250	260/250	348/317	283/233	302/233	295/241	328/324	372/360	363/312	271/232	270/232
LANGLEY, TAMARA, NP	89%	69%	73%	68%	74%	65%	67%	60%	56%	59%	55%	62%
	236/264	151/219	247/339	177/218	239/270	245/315	210/263	199/333	177/315	183/312	153/280	183/296
LARA SUAREZ, MARIA, NP	88%	75%	75%	72%	77%	59%	65%	58%	53%	58%	57%	50%
	189/166	215/287	250/332	246/286	202/218	214/300	239/308	142/243	189/360	195/336	170/296	119/240
NAVARRO, ELSY, NP	90%	99%	91%	83%	83%	83%	81%	83%	77%	85%	90%	93%
	204/227	263/266	304/335	270/271	305/308	210/211	270/278	194/234	269/351	212/248	209/232	230/248
NOUKELAK, GERMAINE, MD	77%	92%	84%	75%	84%	107%	104%	105%	104%	94%	96%	98%
	252/325	306/334	311/368	278/369	342/405	375/351	328/315	311/297	376/360	362/387	311/324	282/288
MILLIEN, ELEONORE, APRN										66%	49%	64%
										109/164	69/140	67/104
PEREZ, DANIEL JESUS, MD	78%	80%	79%	83%	86%	95%	91%	77%	94%	69%	92%	74%
	34/43	26/33	34/43	45/54	50/58	42/44	31/34	23/30	29/31	27/39	57/62	29/39
PHILISTIN, KETELY, NP	85%	77%	84%	70%	73%	72%	76%	75%	70%	83%	81%	80%
	276/325	232/302	254/302	260/309	294/338	278/323	172/188	291/387	252/360	278/336	246/304	192/240
PIERRE LOUIS, JOANN, NP	83%	91%	90%	72%	75%	74%	79%	73%	64%	80%	80%	83%
	272/225	200/219	271/302	214/249	276/308	259/293	213/226	250/342	203/315	250/312	210/264	198/240
TUCKER, CHELSEA, PA					93%		97%	93%	81%	65%	61%	58%
					35/38		64/66	160/172	136/168	129/197	175/288	172/296
TUSSEY, CLAUDIA, MD										100%	80%	85%
										62/62	266/333	274/324

ADULT CARE	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23
ST. VIL, CARLINE, NP	82%	85%	82%	71%	78%	91%	75%	78%	96%	99%	88%	87%
	190/233	187/219	247/302	211/248	253/270	221/204	217/240	183/234	338/351	300/304	203/232	216/248
STANEK, EWELINA, PA	80%	72%	75%	65%	70%	70%	72%	76%	72%	78%	84%	86%
	230/287	120/167	181/240	176/226	269/323	260/308	267/308	299/396	219/306	275/352	195/232	249/288
TAHERI, NERGESS, DO	100%	97%	100%	96%	100%	100%	92%	95%	114%	87%	92%	93%
	31/31	33/34	32/32	53/55	50/50	50/50	34/37	61/64	56/49	68/78	44/48	37/40
WARREN, SANDRA, MD	72%	78%	82%	71%	70%	80%	84%	75%	74%	82%	82%	86%
	100/138	147/189	190/232	140/198	133/189	166/207	196/234	168/225	133/180	155/189	126/153	147/171
WILMOT, ALTHEA, NP	49%	56%	39%	71%	69%	79%	81%	86%	63%	61%	85%	69%
	75/154	125/222	107/273	77/108	149/195	85/99	107/126	176/204	95/150	90/147	92/108	111/160
ZHANG, MICHAEL, MD										46%	56%	57%
										165/360	185/333	199/351
RESIDENTS	82%	96%	83%	67%	68%	82%	82%	89%	95%	87%	90%	94%
	665/811	658/687	692/833	508/759	650/951	630/773	612/746	681/761	642/678	638/735	547/607	620/663
PEDIATRIC CARE	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23
CLARKE-AARON, NOELLA, MD	107%	101%	109%	87%	81%	82%	88%	78%	79%	88%	87%	88%
	290/272	303/299	382/350	322/370	244/300	345/420	229/260	328/420	278/350	238/270	322/370	256/290
CHIBAR, CHARMAINE, MD					53%	100%						
					16/30	10/10						
DESSALINES, DUCLOS, MD	104%	110%	117%	92%	97%	104%	95%	90%	86%	97%	93%	99%
	276/265	291/265	311/265	249/270	348/360	354/340	267/280	358/400	302/350	300/310	252/270	306/310
HERNANDEZ GARCIA, JOSE, MD										75%	81%	95%
										222/297	129/159	113/119
LAZARO RIVERA, NANCY, MD	113%	109%	128%	104%	106%	105%	106%	100%	92%	101%	103%	105%
	308/272	309/282	339/265	323/310	444/420	377/360	255/240	380/380	358/390	416/410	360/350	295/280
MARZOUCA, KISHA F., MD	116%	105%	109%	91%	83%	82%	88%	79%	85%	86%	89%	96%
	346/299	333/316	419/384	353/390	348/420	212/260	193/220	365/460	316/370	354/410	312/350	357/370
NORMIL-SMITH, SHERLOUNE, MD	110%	104%	122%	98%	99%	101%	100%	88%	84%	81%	92%	91%
	310/282	311/299	353/289	372/380	357/360	182/180	341/340	370/420	295/350	234/290	267/290	263/290
WOMEN'S HEALTH CARE	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23
FERWERDA, ANA, MD	82%	67%	89%	78%	53%			62%	72%	77%	84%	90%
	136/166	107/159	214/239	151/193	19/36			110/177	121/168	134/175	132/157	71/79
FINLEY, NICOLE, NP	88%	94%	95%	76%	81%	87%	85%	78%	83%	80%	84%	84%
	246/279	257/273	193/204	239/263	278/285	329/315	292/285	296/378	283/342	236/296	202/240	254/304
PROPHETE, JOYCE, MD	70%	76%	82%	71%	72%	75%	81%	67%	67%	64%	73%	80%
	224/321	180/235	240/294	244/342	285/396	249/330	223/275	229/344	174/258	226/355	207/284	244/304

BEHAVIORAL HEALTH INTEGRATION	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23
CALDERON, NYLSA, LMHC	95%	103%	100%	96%	91%	84%	88%	86%	90%	87%	83%	84%
	158/166	140/136	205/206	159/165	127/140	160/190	159/180	190/220	103/115	143/165	121/145	138/165
JONES, KIARA, LCSW	111%	112%	111%	105%	104%	100%	98%	101%	97%	107%	94%	95%
	187/169	182/162	228/206	184/175	197/190	200/200	192/195	167/165	150/155	188/175	123/131	114/120
SILVER, DAWN, PhD				100%	92%	79%	95%	95%	77%	72%		
				87/87	202/220	166/210	124/130	180/190	151/195	36/50		
BROWN, JEREMY, LCSW	100%	103%	94%	92%	93%	87%	97%	92%	79%	87%	79%	82%
	40/40	170/165	213/226	180/195	204/220	179/205	175/180	202/220	154/195	188/215	99/125	144/175
BURROWES, SHARON, NP	46%	51%	58%	58%	56%	61%	69%	68%	62%	58%	66%	80%
	89/192	114/223	158/271	104/180	148/264	142/234	150/216	146/216	138/222	143/246	139/210	120/150
HIRSCH, KAREN, LCSW	92%	107%	101%	104%	102%	97%	91%	92%	90%	79%	98%	85%
	44/48	58/54	98/97	109/105	86/84	116/120	87/96	94/102	86/96	82/104	65/66	75/88
LARRAD LAMOTE DE GRIGNON, MARIA, LCSW					76%	81%	78%	63%	78%	53%	64%	53%
					81/107	170/210	156/200	145/230	145/185	115/215	115/180	66/125
MILETA, SNJEZANA, LMHC	128%	117%	115%	139%	95%		130%	81%	93%	101%	162%	155%
	246/192	211/180	253/220	195/140	95/100		104/80	114/140	172/185	218/215	292/180	294/190
MITCHELL, ANGELA DENISE, LCSW	106%	117%	119%	96%	87%	93%	109%	75%	104%	116%	145%	186%
	190/180	202/172	204/172	89/93	182/210	186/200	163/150	142/190	125/120	191/164	209/144	201/108
PETER, AMANDA, NP	64%	50%	73%	76%	72%	70%	42%	43%	58%	69%	48%	41%
	151/235	105/211	171/235	179/234	172/240	163/234	86/204	107/246	128/222	170/246	96/198	91/222
REXACH, CLAUDIA, LMHC	139%	123%	110%	122%	104%	123%	99%	90%	83%	104%		
	223/160	199/162	232/210	237/195	207/200	221/180	158/160	208/230	146/175	161/155		
RESIDENT PSYCHIATRY	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23
MENEFFEE, STEPHEN, MD							100%	84%	81%	67%	69%	87%
							33/33	67/80	68/84	64/96	50/72	73/84
BEAMAN, DAVID, MD							100%	52%	27%	53%	55%	41%
							35/35	32/61	21/78	41/78	33/60	32/78
DHALIWAL, AMAREEN, MD							104%	92%	72%	74%	107%	84%
							29/28	59/64	56/78	49/66	58/54	76/90
HOGUE, KRISTIAN, MD							100%	56%	30%	47%	55%	40%
							19/19	40/72	29/96	28/60	36/66	31/78
MAXWELL, CHRISTIAN, MD							100%	92%	83%	104%	83%	86%
							33/33	25/23	50/60	56/54	55/66	88/102
NGUYEN, ANH-VU, MD							100%	50%	33%	60%	79%	79%
							36/36	31/62	24/72	29/48	38/48	38/48
SANCHEZ, GRETTEL, MD							100%	29%	33%	59%	55%	63%
							23/23	17/58	28/84	57/96	46/84	53/84
TORRES, MICHAEL, MD							100%	87%	72%	69%	88%	82%
							23/23	72/83	39/54	83/120	84/96	79/96

DENTAL	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23
ABREU, MARIANA, DDS	71%	75%	80%	91%	98%	101%	105%	87%	96%	96%	91%	95%
	233/330	205/274	303/379	285/312	313/320	355/352	377/360	195/224	284/296	338/351	261/288	280/296
ADAMETZ, JOSHUA, DMD									86%	100%	108%	115%
									100/116	99/99	95/88	184/160
ALWEHAIB, ARWA, DDS	86%	115%	119%	114%	118%	114%	121%	126%	122%	114%	111%	104%
	270/314	334/290	430/362	373/328	395/336	310/273	348/288	468/371	342/280	392/344	275/247	239/229
BOWEN, BEVERLY, DMD	81%	81%	77%	86%	83%	96%	92%	96%	86%	97%	91%	91%
	253/314	240/298	243/314	261/304	264/320	262/272	266/288	339/352	200/232	310/321	255/280	211/232
SEMINARIO, ADA, DDS	84%	98%	104%	87%	91%	94%	95%	98%	95%	81%	88%	87%
	262/314	277/282	259/250	180/208	276/304	286/304	228/240	88/90	235/248	280/344	247/280	201/232
SOFIANOS, MICHAEL, DMD	91%	97%	88%	113%	96%	104%	101%	104%	110%	111%	107%	108%
	275/251	296/306	247/282	343/304	293/304	309/296	308/304	359/344	325/296	356/320	326/304	310/288
WILLIAMS, RICHARD, DMD	84%	84%	94%	83%	91%	85%	89%	84%	83%	83%	83%	77%
	269/322	249/298	265/282	233/280	262/288	285/336	272/304	309/368	245/296	245/296	233/280	190/248
ZANGENEH, YASMINE, DMD			91%	95%	83%	92%	91%	94%	87%	82%	86%	88%
			219/240	281/296	238/288	294/320	219/240	317/336	243/280	282/344	254/296	212/240
HARDCASTLE, CORINA	96%	102%	91%	93%	95%	96%	102%		90%	94%	99%	92%
	143/149	127/125	150/165	138/148	144/152	107/112	122/120		112/124	146/156	139/140	93/101
MASON, SHERRY		97%	95%	90%	88%	92%	89%	83%	81%	88%	88%	96%
		137/141	165/173	119/132	147/168	140/152	143/160	133/160	88/108	144/164	130/148	142/148
MOZER NASCIMENTO, ARIANNE	96%	95%	106%	106%	96%	109%	98%	95%	103%	99%	98%	97%
	151/157	142/149	191/181	165/156	138/144	165/152	141/144	168/176	123/120	154/156	106/108	144/148
FEOLA, LEYDA			92%	99%	92%	99%	91%	96%	97%	90%	91%	88%
			159/173	154/156	154/168	158/160	146/160	176/184	105/108	154/172	113/124	138/156
DUCHARME, RHONDA	99%	98%	96%	100%	95%	99%	90%	88%	90%	91%	91%	94%
	237/240	293/298	256/266	264/264	311/328	316/320	218/241	275/312	206/228	196/216	102/112	146/156
PETERSEN, PATRICE	102%	97%	96%	96%	92%	95%	82%	106%	102%	104%	94%	76%
	286/281	210/218	309/322	299/312	202/220	230/242	183/224	136/128	245/240	208/200	83/88	110/145

SATURDAY

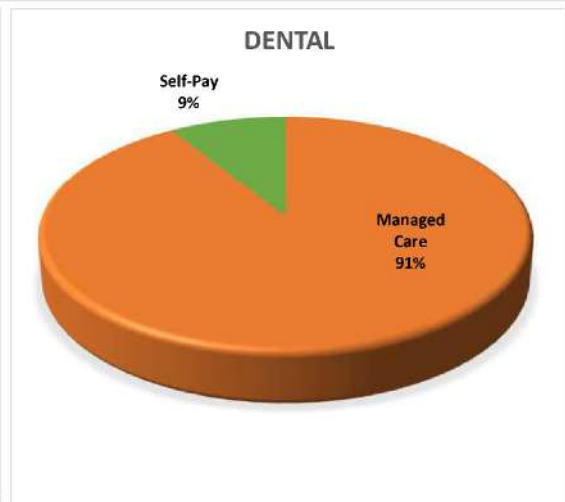
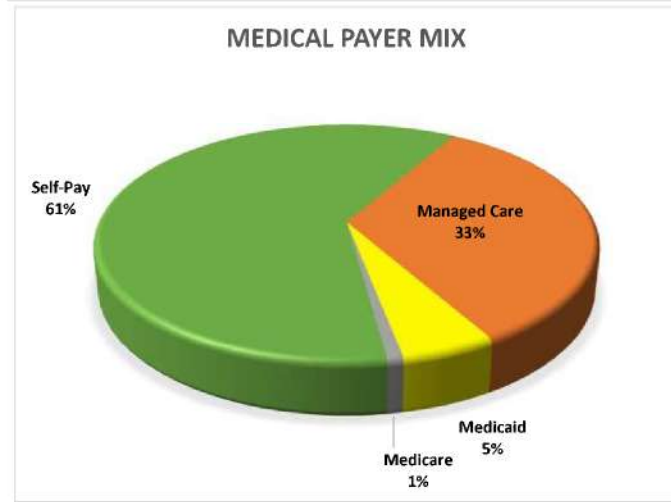
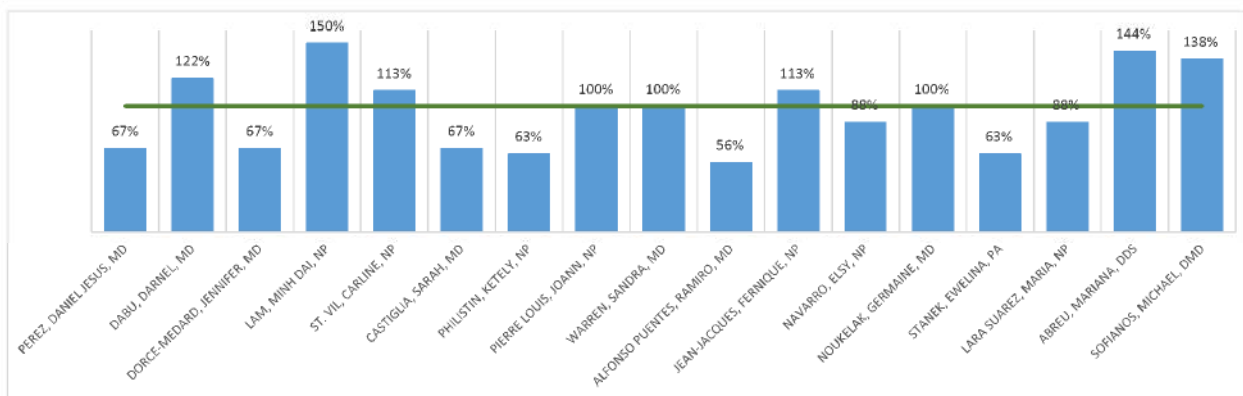
PRODUCTIVITY REPORT DECEMBER 2023

AS 12/31/2023 Based on Completed Appointments

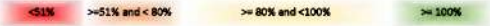


ADULT CARE						
Provider	Daily Target (1/2 Day)	# Saturdays Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
BELLE GLADE						
PEREZ, DANIEL JESUS, MD	9	1	9	6	67%	6.0
DABU, DARNEL, MD	9	1	9	11	122%	11.0
DORCE-MEDARD, JENNIFER, MD	9	1	9	6	67%	6.0
DELRAY						
LAM, MINH DAI, NP	8	1	8	12	150%	12.0
ST. VIL, CARLINE, NP	8	1	8	9	113%	9.0
CASTIGLIA, SARAH, MD	9	1	9	6	67%	6.0
LAKE WORTH						
PHILISTIN, KETELY, NP	8	1	8	5	63%	5.0
PIERRE LOUIS, JOANN, NP	8	1	8	8	100%	8.0
WARREN, SANDRA, MD	9	1	9	9	100%	9.0
LANTANA						
ALFONSO PUENTES, RAMIRO, MD	9	1	9	5	56%	5.0
JEAN-JACQUES, FERNIQUE, NP	8	1	8	9	113%	9.0
NAVARRO, ELSY, NP	8	1	8	7	88%	7.0
WEST PALM BEACH						
NOUKELAK, GERMAINE, MD	9	1	9	9	100%	9.0
STANEK, EWELINA, PA	8	1	8	5	63%	5.0
LARA SUAREZ, MARIA, NP	8	1	8	7	88%	7.0
ADULT CARE TOTALS			127	114	90%	

BELLE GLADE DENTAL						
ABREU, MARIANA, DDS	8	2	16	23	144%	11.5
WEST PALM BEACH DENTAL						
SOFIANOS, MICHAEL, DMD	8	1	8	11	138%	11.0
DENTAL TOTALS			24	34	142%	
GRAND TOTAL			151	148	98%	



BELLE GLADE
PRODUCTIVITY REPORT DECEMBER 2023
 AS 12/31/2023 Based on Completed Appointments



ADULT CARE						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
TAHERI, NERGESS, DO	18 when no precepting	4.0	40	37	93%	9.3
DABU, DARNEL, MD	18 when no precepting	3.5	26	23	88%	6.6
PEREZ, DANIEL JESUS, MD	18 when no precepting	4.0	39	29	74%	7.3
DORCE-MEDARD, JENNIFER, MD	18 when no precepting	0.5	9	6	67%	12.0
REGAN, PATRICK, DO	18	3.0	7	7	100%	2.3
ADULT CARE TOTALS		15.0	121	102	84%	

RESIDENCY PROGRAM						
PGY-1	6	20.5	103	118	115%	5.8
PGY-2	10	2.1	231	206	89%	9.8
PGY-3	14	24.5	330	296	90%	12.1
RESIDENTS TOTALS		66	663	620	94%	

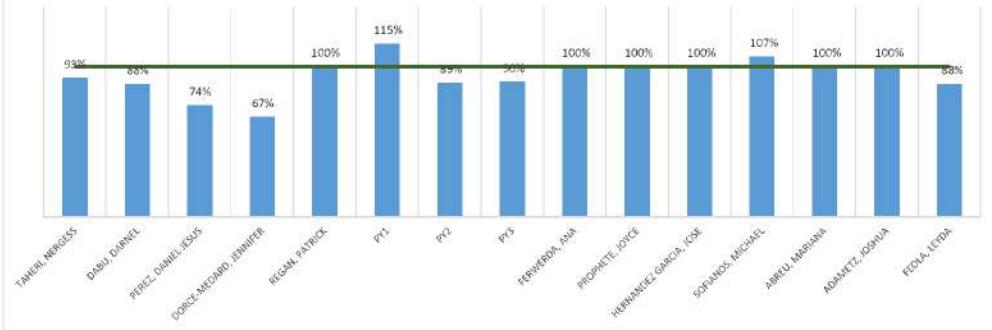
WOMEN'S HEALTH CARE						
FERWERDA, ANA, MD	18 when no precepting	2.0	16	16	100%	8.0
PROPHETE, JOYCE, MD	18 when no precepting	5.0	43	43	100%	8.6
WOMEN'S HEALTH CARE TOTALS		7.0	59	59	100%	

PEDIATRIC CARE						
HERNANDEZ GARCIA, JOSE, MD	20 when no precepting	3.0	11	11	100%	3.7
PEDIATRIC CARE TOTALS		3.0	11	11	100%	

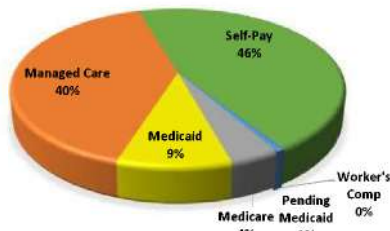
DENTAL						
SOFIANOS, MICHAEL, DMD	16	17.5	280	299	107%	17.1
ABREU, MARIANA, DDS	16	0.5	8	8	100%	16.0
ADAMETZ, JOSHUA, DMD	16	2.0	32	32	100%	16.0
DENTAL TOTALS		20.0	320	339	106%	

DENTAL HYGIENE						
DUCHARME, RHONDA	8	19.5	156	138	88%	7.1
DENTAL HYGIENE TOTALS		19.5	156	138	88%	

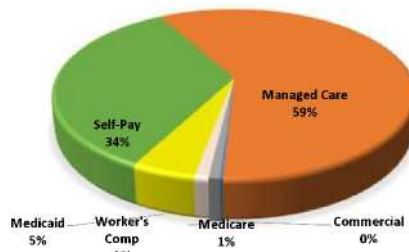
GRAND TOTAL						
		130.5	1,330	1,269	95%	



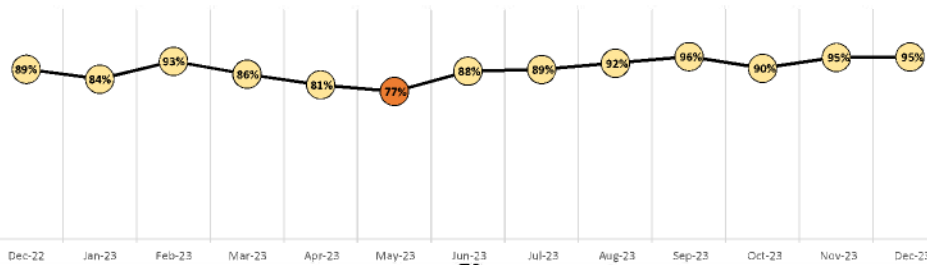
MEDICAL PAYER MIX



DENTAL PAYER MIX



Belle Glade Productivity Over a Year



BOCA

PRODUCTIVITY REPORT DECEMBER 2023

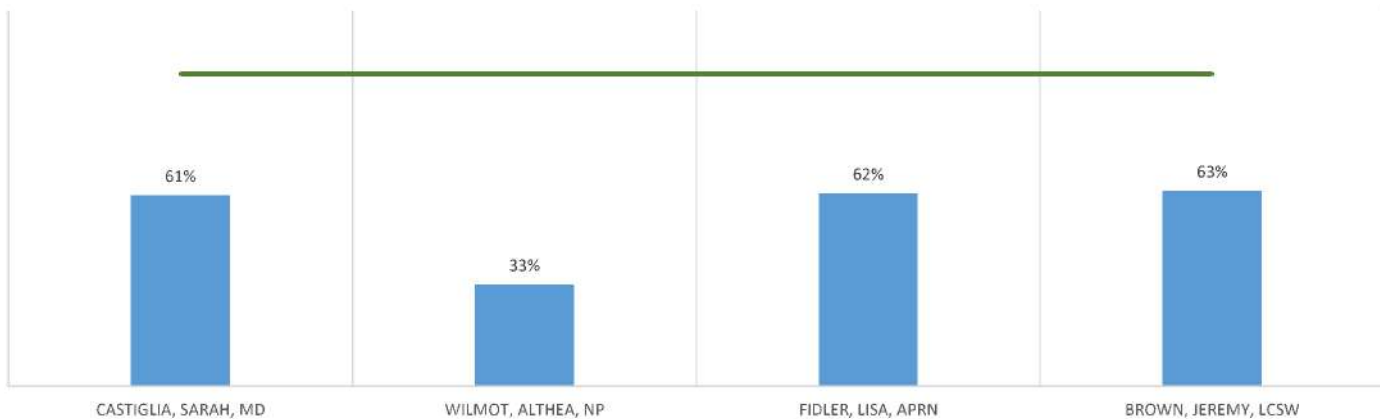
AS 12/31/2023 Based on Completed Appointments



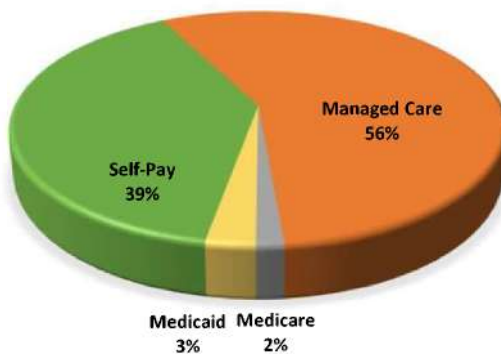
ADULT CARE						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
CASTIGLIA, SARAH, MD	18	13.0	234	143	61%	11.0
WILMOT, ALTHEA, NP	16	2.5	40	13	33%	5.2
FIDLER, LISA, APRN	16	15.0	240	148	62%	9.9
ADULT CARE TOTALS		30.5	514	304	59%	

BEHAVIORAL HEALTH INTEGRATION						
BROWN, JEREMY, LCSW	10	4.0	40	25	63%	6.3
BH INTEGRATION TOTALS		4.0	40	25	63%	

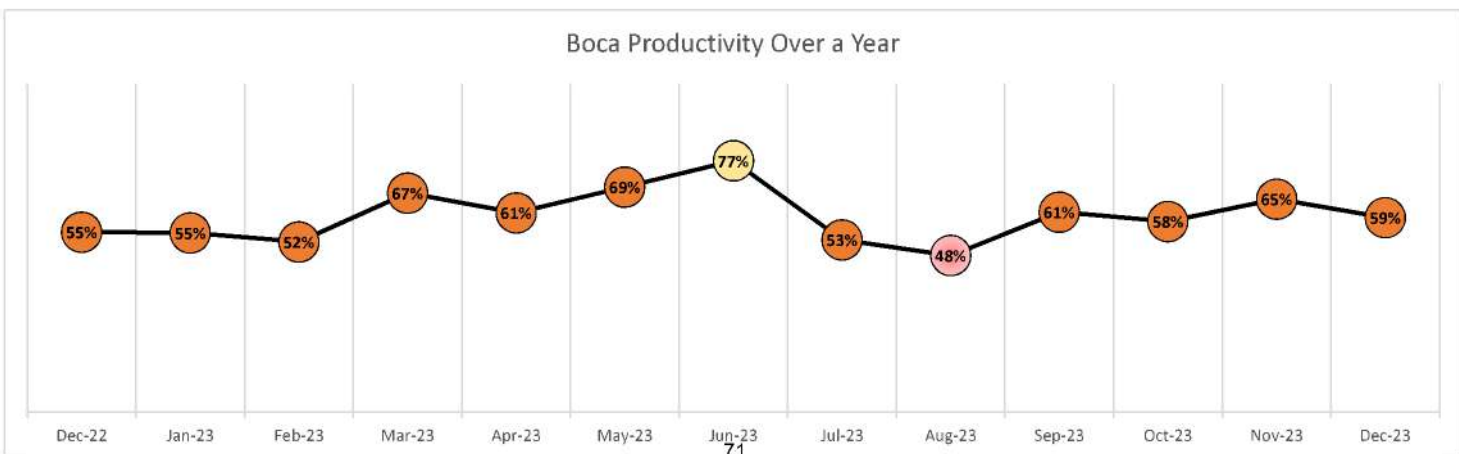
GRAND TOTAL		34.5	554	329	59%	
--------------------	--	-------------	------------	------------	------------	--



MEDICAL PAYER MIX



Boca Productivity Over a Year



DELRAY

PRODUCTIVITY REPORT DECEMBER 2023

AS 12/31/2023 Based on Completed Appointments



ADULT CARE						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
LAM, MINH DAI, NP	16	14.5	232	270	116%	18.6
ST. VIL, CARLINE, NP	16	15.5	248	216	87%	13.9
CASTIGLIA, SARAH, MD	18	0.5	9	6	67%	12.0
TUSSEY, CLAUDIA, MD	18	16.0	288	243	84%	15.2
ADULT CARE TOTALS		46.5	777	735	95%	

BEHAVIORAL HEALTH INTEGRATION						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
BROWN, JEREMY, LCSW	10	13.5	135	119	88%	8.8
BH INTEGRATION TOTALS		13.5	135	119	88%	

BEHAVIORAL HEALTH ADDICTION						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
LARRAD LAMOTE DE GRIGNON, MARIA, LCSW	10	12.5	125	66	53%	5.3
MITCHELL, ANGELA DENISE, LCSW	8	2.0	16	6	38%	3.0
BH ADDICTION TOTALS		14.5	141	72	51%	

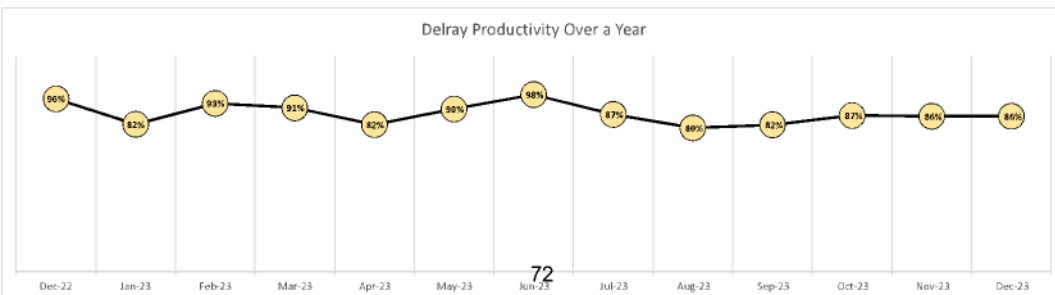
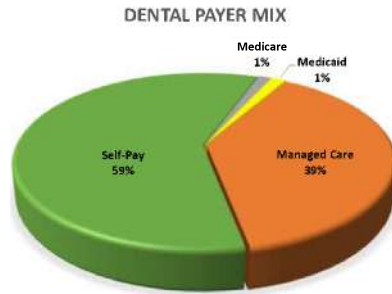
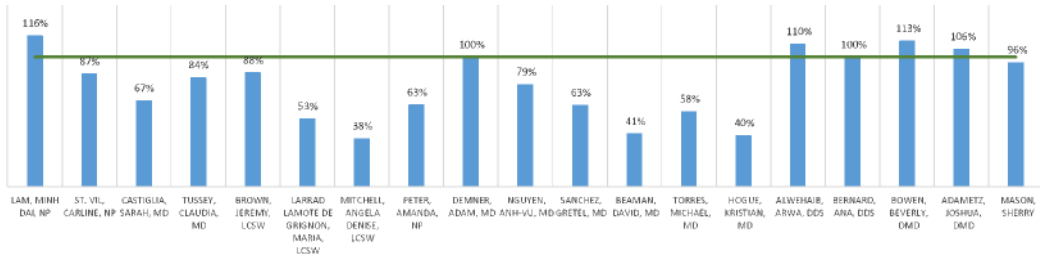
BEHAVIORAL HEALTH PSYCHIATRY						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
PETER, AMANDA, NP	12	5.0	60	38	63%	7.6
DEMNER, ADAM, MD	12	1.0	1	1	100%	1.0
BEHAVIORAL HEALTH PSYCHIATRY TOTALS		6.0	61	39	64%	

RESIDENT PSYCHIATRY						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
NGUYEN, ANH-VU, MD	12	4.0	48	38	79%	9.5
SANCHEZ, GRETEL, MD	12	7.0	84	53	63%	7.6
BEAMAN, DAVID, MD	12	6.5	78	32	41%	4.9
TORRES, MICHAEL, MD	12	1.0	12	7	58%	7.0
HOGUE, KRISTIAN, MD	12	6.5	78	31	40%	4.8
RESIDENT PSYCHIATRY TOTAL		25.0	300	161	54%	

DENTAL						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
ALWEHAIB, ARWA, DDS	16	12.5	197	217	110%	17.4
BERNARD, ANA, DDS	<i>New Provider</i>	10	93	93	100%	9.3
BOWEN, BEVERLY, DMD	16	4	64	72	113%	18.0
ADAMETZ, JOSHUA, DMD	16	1	16	17	106%	17.0
DENTAL TOTALS		27.5	370	399	108%	

DENTAL HYGIENE						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
MASON, SHERRY	8	19	148	142	96%	7.5
DENTAL HYGIENE TOTALS		19	148	142	96%	

GRAND TOTAL						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
GRAND TOTAL		152	1932	1667	86%	



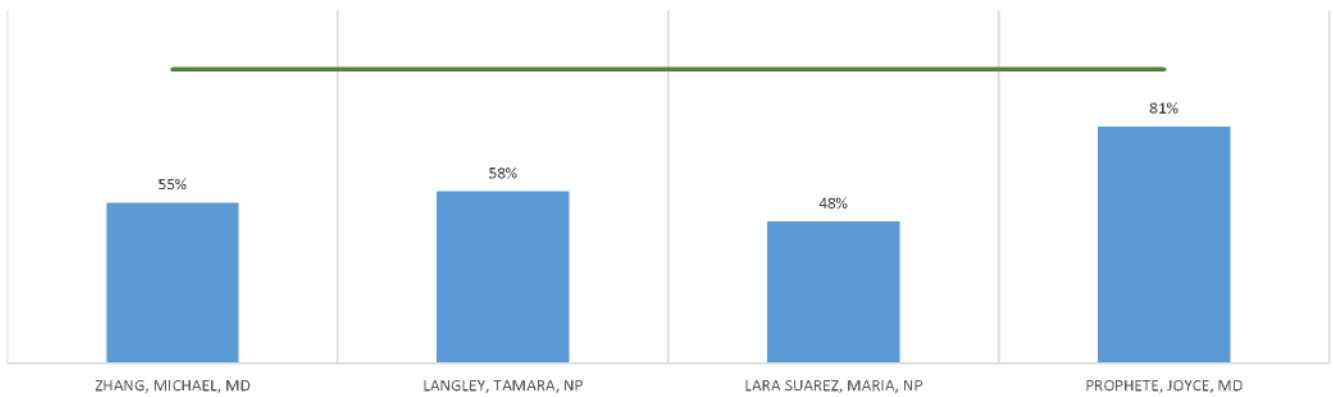
JUPITER



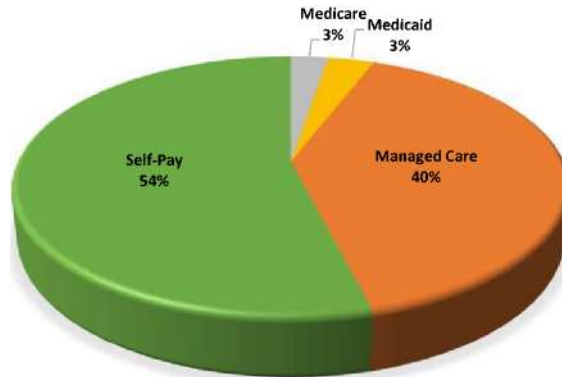
PRODUCTIVITY REPORT DECEMBER 2023

AS 12/31/2023 Based on Completed Appointments

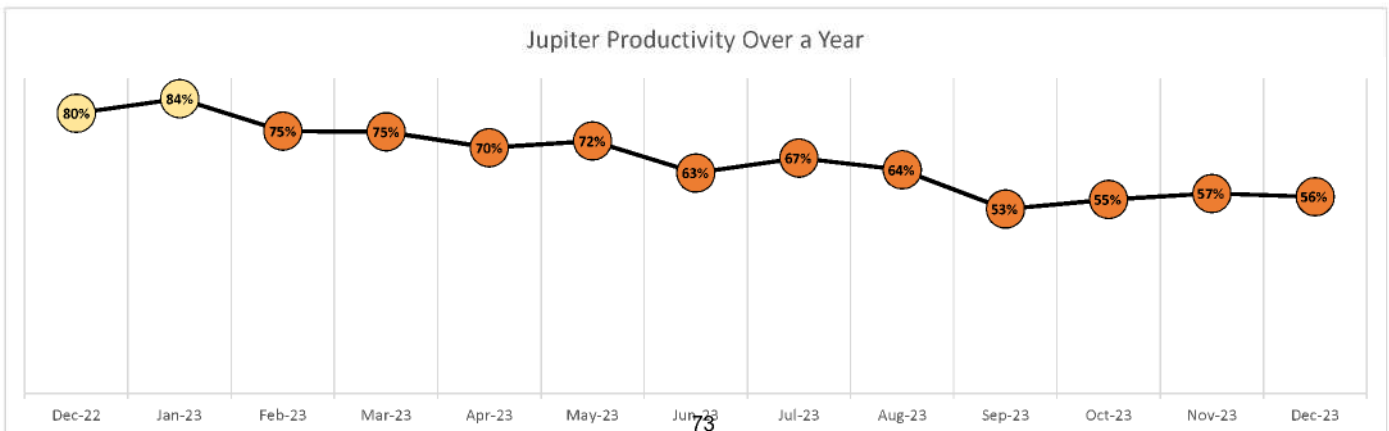
ADULT CARE						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
ZHANG, MICHAEL, MD	18	18.5	333	182	55%	9.8
LANGLEY, TAMARA, NP	16	15.5	248	145	58%	9.4
LARA SUAREZ, MARIA, NP	16	14.5	232	112	48%	7.7
ADULT CARE TOTALS		48.5	813	439	54%	
WOMENS HEALTH CARE						
PROPHETE, JOYCE, MD	18	4.0	72	58	81%	14.5
WOMENS HEALTH CARE TOTALS		4	72	58	81%	
GRAND TOTAL		52.5	885	497	56%	



MEDICAL PAYER MIX



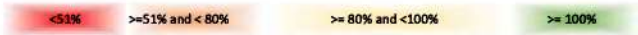
Jupiter Productivity Over a Year



LAKE WORTH

PRODUCTIVITY REPORT DECEMBER 2023

AS 12/31/2023 Based on Completed Appointments

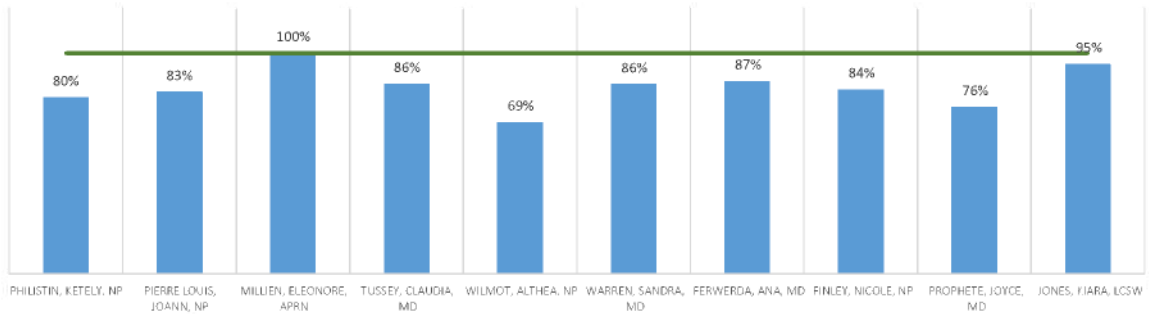


ADULT CARE						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
PHILISTIN, KETELY, NP	16	15.0	240	192	80%	12.8
PIERRE LOUIS, JOANN, NP	16	15.0	240	198	83%	13.2
MILLIEN, ELEONORE, APRN	8	4.0	32	32	100%	8.0
TUSSEY, CLAUDIA, MD	18	2.0	36	31	86%	15.5
WILMOT, ALTHEA, NP	16	1.0	16	11	69%	11.0
WARREN, SANDRA, MD	18	9.5	171	147	86%	15.5
ADULT CARE TOTALS		46.5	735	611	83%	

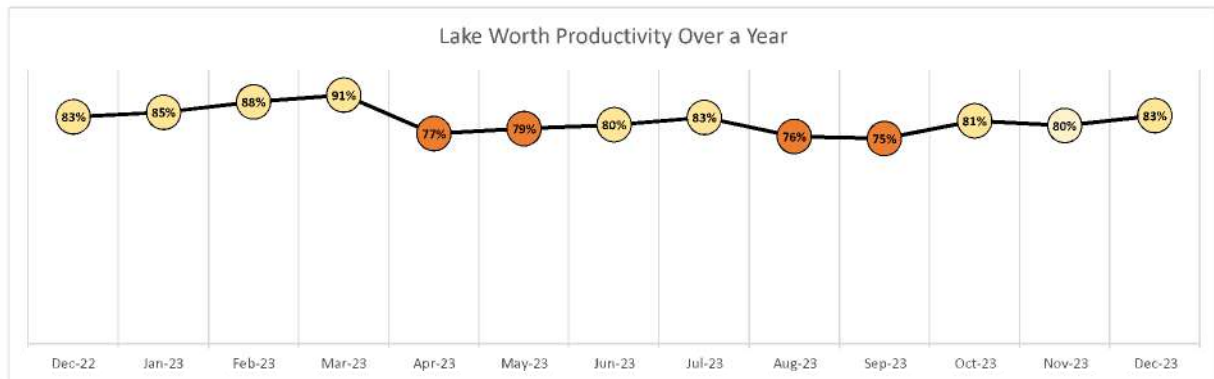
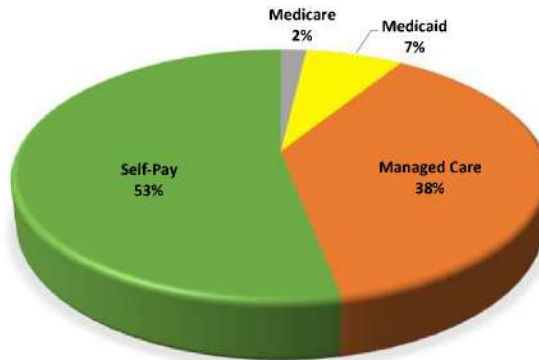
WOMEN'S HEALTH CARE						
FERWERDA, ANA, MD	18	3.5	63	55	87%	15.7
FINLEY, NICOLE, NP	16	19	304	254	84%	13.4
PROPHETE, JOYCE, MD	18	10.5	189	143	76%	13.6
WOMEN'S HEALTH CARE TOTALS		33	556	452	81%	

BEHAVIORAL HEALTH INTEGRATION						
JONES, KIARA, LCSW	10	12	120	114	95%	9.5
BH INTEGRATION TOTALS		12	120	114	95%	

GRAND TOTAL		91.5	1,411	1,177	83%	
--------------------	--	-------------	--------------	--------------	------------	--



MEDICAL PAYER MIX



LANTANA
PRODUCTIVITY REPORT DECEMBER 2023
 AS 12/31/2023 Based on Completed Appointments



ADULT CARE						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
ALFONSO PUNTES, RAMIRO, MD	18	14.5	261	201	77%	13.9
JEAN-JACQUES, FERNIQUE, NP	16	16.0	256	242	95%	15.1
LANGLEY, TAMARA, NP	16	3.0	48	38	79%	12.7
NAVARRO, ELSY, NP	16	15.5	248	230	93%	14.8
WILMOT, ALTHEA, NP	16	1.0	16	9	56%	9.0
ZHANG, MICHAEL, MD	18	1.0	18	17	94%	17.0
ADULT CARE TOTALS		51.0	847	737	87%	

PEDIATRIC CARE						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
DESSALINES, DUCLOS, MD	20	15.5	310	306	99%	19.7
LAZARO RIVERA, NANCY, MD	20	14	280	295	105%	21.1
NORMIL-SMITH, SHERLOUNE, MD	20	14.5	290	263	91%	18.1
HERNANDEZ GARCIA, JOSE, MD	20	4	72	57	79%	14.3
PEDIATRIC CARE TOTALS		48	952	921	97%	

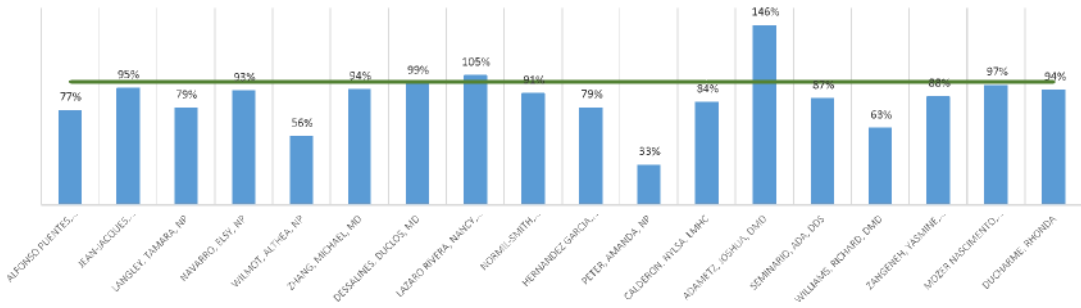
BEHAVIORAL HEALTH PSYCHIATRY						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
PETER, AMANDA, NP	12	13.5	162	53	33%	3.9
BEHAVIORAL HEALTH PSYCHIATRY TOTALS		13.5	162	53	33%	

BEHAVIORAL HEALTH INTEGRATION						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
CALDERON, NYLSA, LMHC	10	16.5	165	138	84%	8.4
BH INTEGRATION TOTALS		16.5	165	138	84%	

DENTAL						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
ADAMETZ, JOSHUA, DMD	16	3.0	48	70	146%	23.3
SEMINARIO, ADA, DDS	16	14.5	232	201	87%	13.9
WILLIAMS, RICHARD, DMD	16	1.0	16	10	63%	10.0
ZANGENEH, YASMINE, DMD	16	15.0	240	212	88%	14.1
DENTAL TOTALS		33.5	536	493	92%	

DENTAL HYGIENE						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
MOZER NASCIMENTO, ARIANNE MILENA	8	18.5	148	144	97%	7.8
DUCHARME, RHONDA	16	11.0	156	146	94%	13.3
DENTAL HYGIENE TOTALS		29.5	304	290	95%	

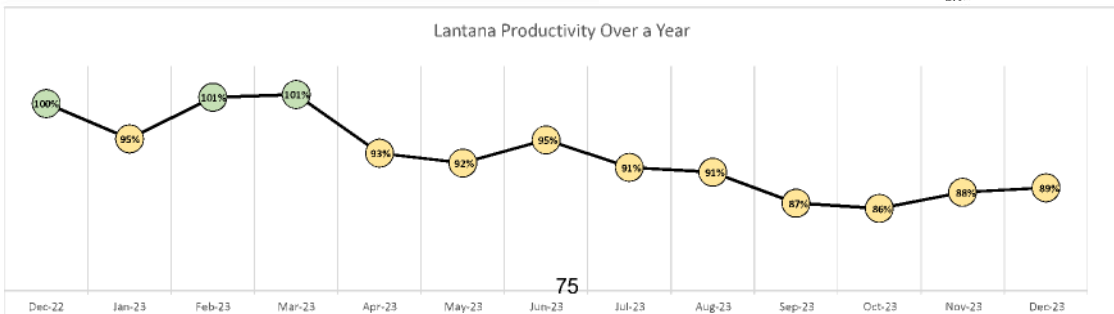
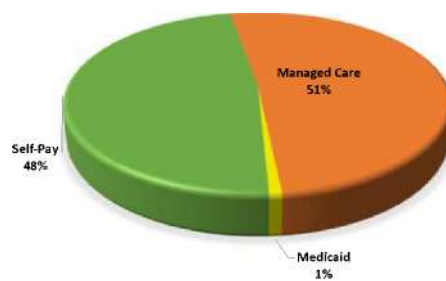
GRAND TOTAL						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
GRAND TOTAL		192	2966	2632	89%	



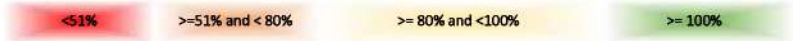
MEDICAL PAYER MIX



DENTAL PAYER MIX



LEWIS



PRODUCTIVITY REPORT DECEMBER 2023

AS 12/31/2023 Based on Completed Appointments

ADULT CARE						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
WILMOT, ALTHEA, NP	6	4.0	24	27	113%	6.8
ADULT CARE TOTALS			24	27	113%	

BEHAVIORAL HEALTH INTEGRATION						
BH INTEGRATION TOTALS		0	0	0		

BEHAVIORAL HEALTH ADDICTION						
BH ADDICTION TOTALS						

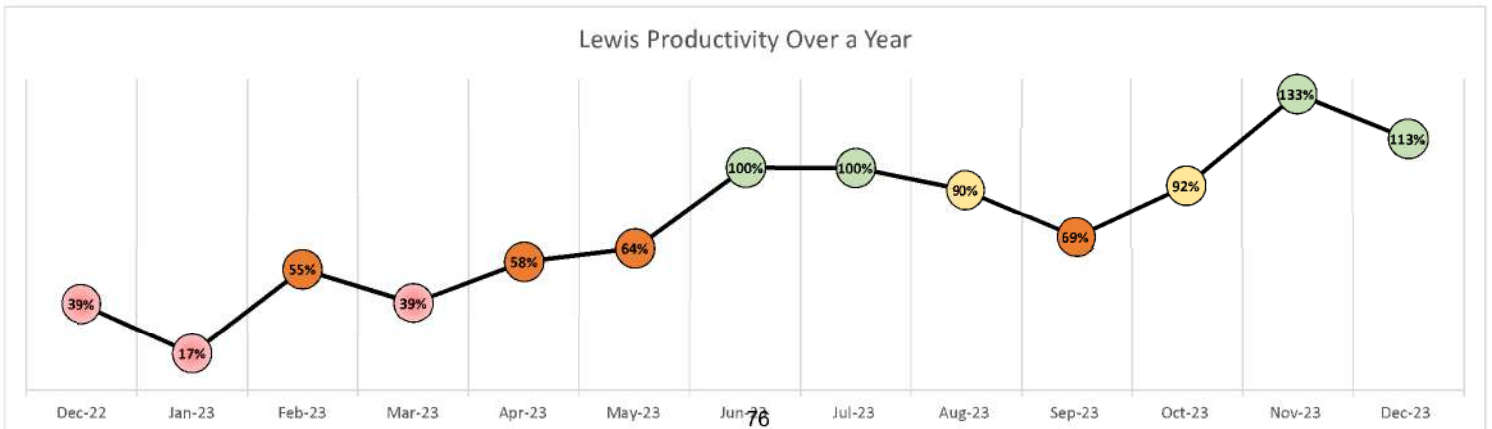
GRAND TOTAL		0	24	27	113%	
--------------------	--	----------	-----------	-----------	-------------	--



MEDICAL PAYER MIX



Lewis Productivity Over a Year



MANGONIA

PRODUCTIVITY REPORT DECEMBER 2023

AS 12/31/2023 Based on Completed Appointments



ADULT CARE						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
KOOPMAN, REBECCA SUE, PA	20	14.5	290	180	62%	12.4
FERNANDEZ SANCHEZ, MARCO, NP	20	19.0	380	286	75%	15.1
TUCKER, CHELSEA, PA	16	16.5	263	143	54%	8.7
ADULT CARE TOTALS		50.0	933	609	65%	

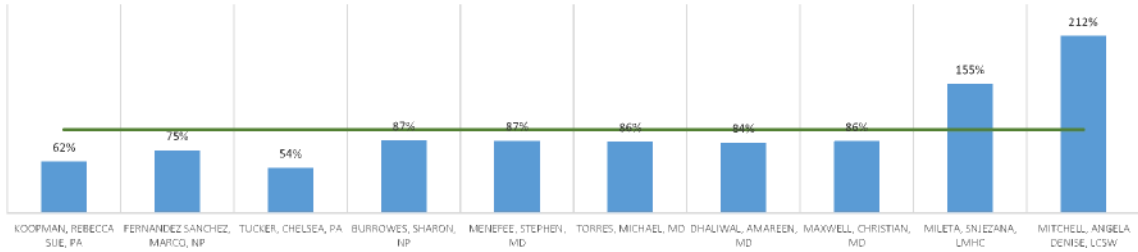
BEHAVIORAL HEALTH PSYCHIATRY						
BURROWES, SHARON, NP	12	4.0	47	41	87%	10.3
BEHAVIORAL HEALTH PSYCHIATRY TOTALS		4.0	47	41	87%	

RESIDENT PSYCHIATRY						
MENEFEE, STEPHEN, MD	12	7.0	84	73	87%	10.4
TORRES, MICHAEL, MD	12	7.0	84	72	86%	10.3
DHALIWAL, AMAREEN, MD	12	7.5	90	76	84%	10.1
MAXWELL, CHRISTIAN, MD	12	8.5	102	88	86%	10.4
RESIDENT PSYCHIATRY TOTAL		30.0	360	309	86%	

BEHAVIORAL HEALTH INTEGRATION						
BH INTEGRATION TOTALS		0.0	0	0		

BEHAVIORAL HEALTH ADDICTION						
MILETA, SNJEZANA, LMHC	10	19.0	190	294	155%	15.5
MITCHELL, ANGELA DENISE, LCSW	8	11.5	92	195	212%	17.0
BH ADDICTION TOTALS		30.5	282	489	173%	

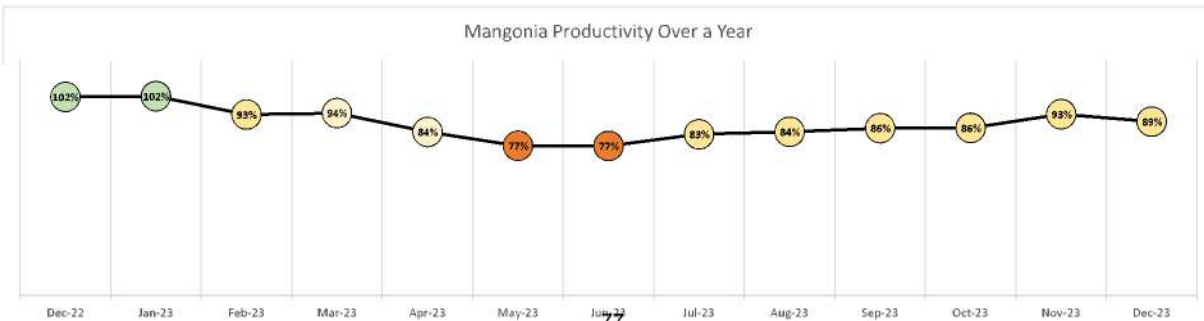
GRAND TOTAL						
		114.5	1,622	1,448	89%	



MEDICAL PAYER MIX



Mangonia Productivity Over a Year



MOBILE, PORT CLIN, JFK MIDDLE & LAKE WORTH HIGH



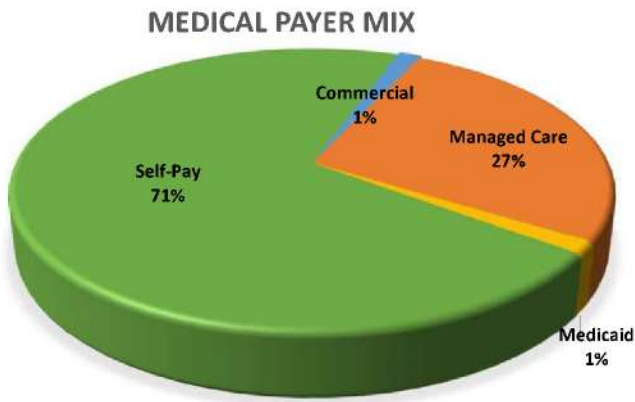
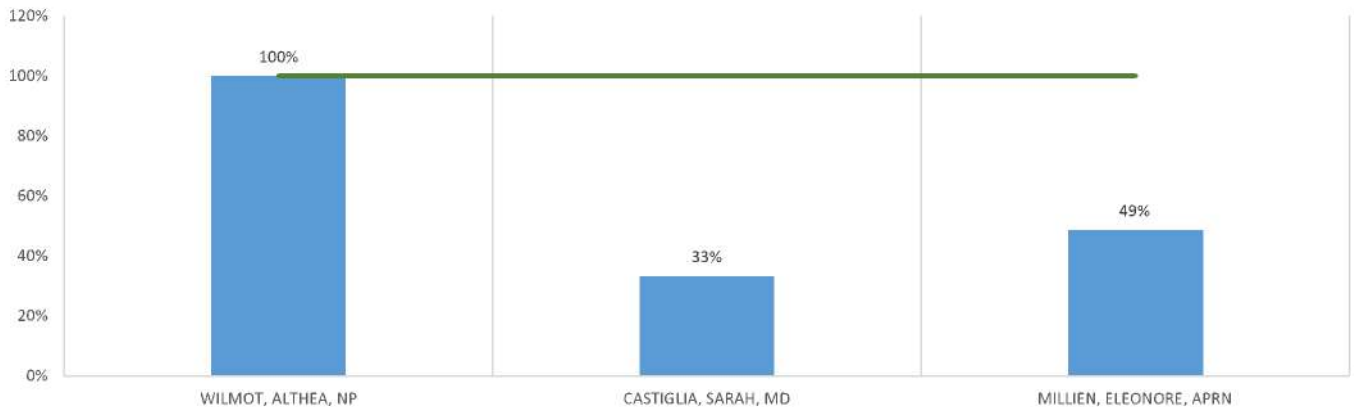
PRODUCTIVITY REPORT DECEMBER 2023

AS 12/31/2023 Based on Completed Appointments

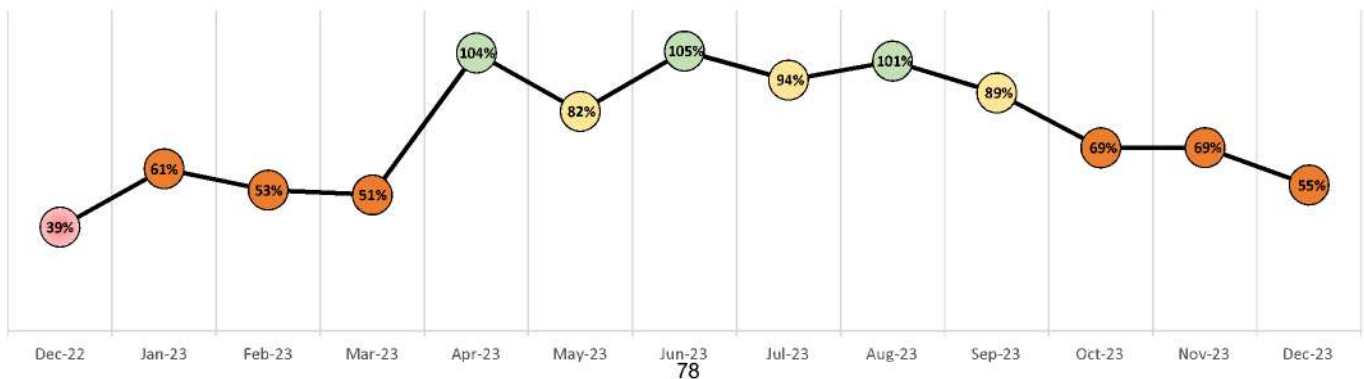
ADULT CARE						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
WILMOT, ALTHEA, NP	6	4.0	24	24	100%	6.0
CASTIGLIA, SARAH, MD	8	4.5	36	12	33%	2.7
MILLIEN, ELEONORE, APRN	8	9.0	72	35	49%	3.9
ADULT CARE TOTALS		18	132	71	54%	

DENTAL						
ALWEHAIB, ARWA, DDS	6	1.0	16	10	63%	10.0
DENTAL TOTALS		1.0	16	10	63%	

GRAND TOTAL		19	148	81	55%	
--------------------	--	-----------	------------	-----------	------------	--



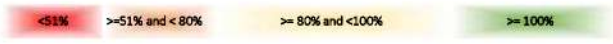
Mobile Productivity Over a Year



St ANN

PRODUCTIVITY REPORT DECEMBER 2023

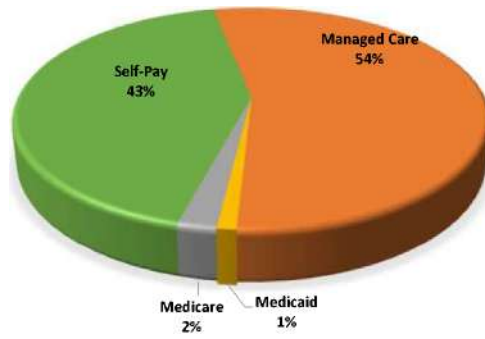
AS 12/31/2023 Based on Completed Appointments



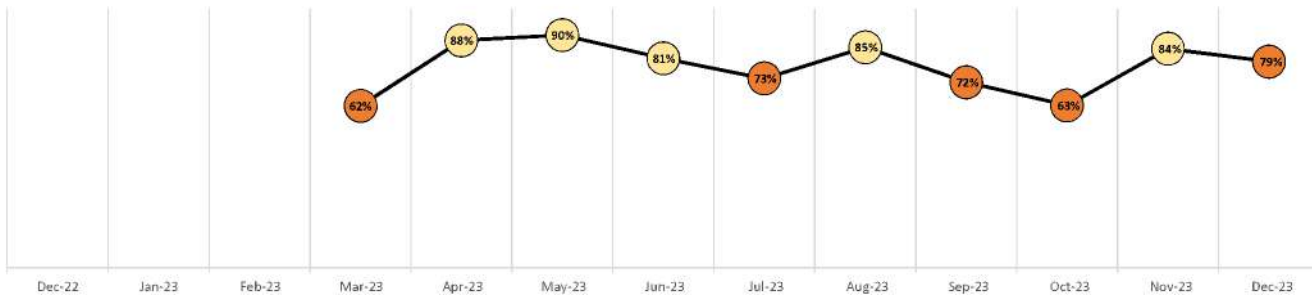
ADULT CARE						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
WILMOT, ALTHEA, NP	6	4.0	24	14	58%	3.5
ADULT CARE TOTALS		4.0	24	14	58%	
BEHAVIORAL HEALTH INTEGRATION						
HIRSCH, KAREN, LCSW	8	11.0	88	75	85%	6.8
BH INTEGRATION TOTALS		11.0	88	75	85%	
BEHAVIORAL HEALTH PSYCHIATRY						
BH PSYCHIATRY TOTALS		0.0	0	0		
GRAND TOTAL		15.0	112.0	89.0	79%	



MEDICAL PAYER MIX



St Ann Productivity Over a Year



WEST PALM BEACH

PRODUCTIVITY REPORT DECEMBER 2023

AS 12/31/2023 Based on Completed Appointments



ADULT CARE						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
NOUKELAK, GERMAINE, MD	18	16.0	288	282	98%	17.6
FLOREZ, GLORIA MATILDE, MD	18	12.5	225	212	94%	17.0
STANEK, EWELINA, PA	16	18.0	288	249	86%	13.8
LARA SUAREZ, MARIA, NP	16	0.5	8	7	88%	14.0
TUCKER, CHELSEA, PA	16	2.0	33	29	88%	14.5
WILMOT, ALTHEA, NP	16	1.0	16	13	81%	13.0
FIDLER, LISA, APRN	16	1.0	16	13	81%	13.0
ADULT CARE TOTALS		51	874	805	92%	

PEDIATRIC CARE						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
CLARKE-AARON, NOELLA, MD	20	14.5	290	256	88%	17.7
MARZOUCA, KISHA F., MD	20	18.5	370	357	96%	19.3
HERNANDEZ GARCIA, JOSE, MD	20	2	36	45	125%	22.5
PEDIATRIC CARE TOTALS		35	696	658	95%	

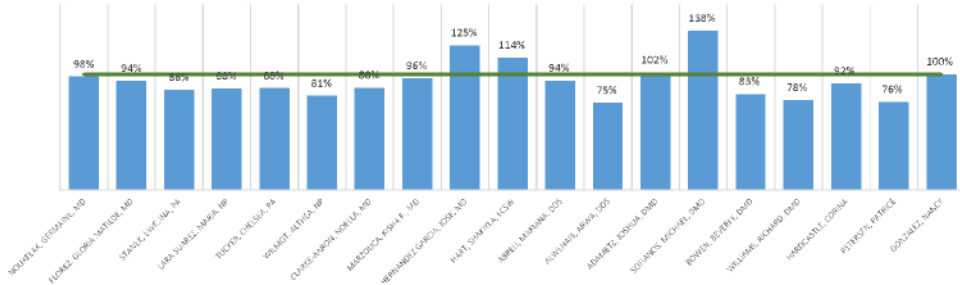
BEHAVIORAL HEALTH PSYCHIATRY						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
BURROWES, SHARON, NP	12	8.5	103	79	77%	9.3
BEHAVIORAL HEALTH PSYCHIATRY TOTALS		8.5	103	79	77%	

BEHAVIORAL HEALTH INTEGRATION						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
HART, SHAKIYLA, LCSW	10	16.5	99	113	114%	6.8
BH INTEGRATION TOTALS		16.5	99	113	114%	

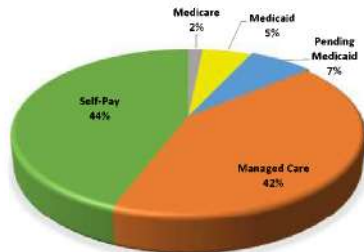
DENTAL						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
ABREU, MARIANA, DDS	16	18.0	288	272	94%	15.1
ALWEHAIB, ARWA, DDS	16	1.0	16	12	75%	12.0
ADAMETZ, JOSHUA, DMD	16	4.0	64	65	102%	16.3
SOFIANOS, MICHAEL, DMD	16	0.5	8	11	138%	22.0
BOWEN, BEVERLY, DMD	16	10.5	168	139	83%	13.2
WILLIAMS, RICHARD, DMD	16	14.5	232	180	78%	12.4
DENTAL TOTALS		48.5	776	679	88%	

DENTAL HYGIENE						
Provider	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
HARDCASTLE, CORINA	8	13.0	101	93	92%	7.2
PETERSEN, PATRICE	8 / 16 MDI	11.0	145	110	76%	10.0
GONZALEZ, NANCY	8	3.0	14	14	100%	4.7
DENTAL HYGIENE TOTALS		27.0	260	217	83%	

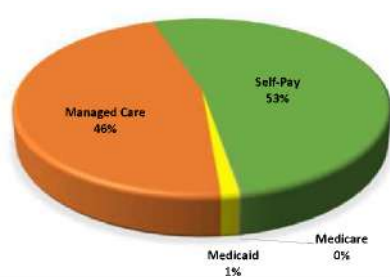
GRAND TOTAL						
	Daily Target	Days Worked	Target for the Month	Total for the Month Seen	% Monthly Target Achieved	Daily Average
GRAND TOTAL		187	2808	2551	91%	



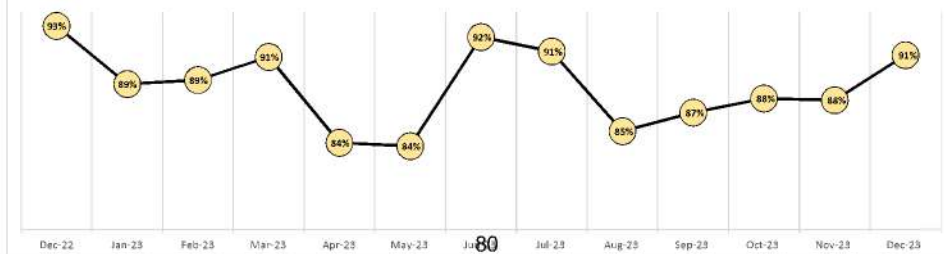
MEDICAL PAYER MIX



DENTAL PAYER MIX



West Palm Beach Productivity Over a Year





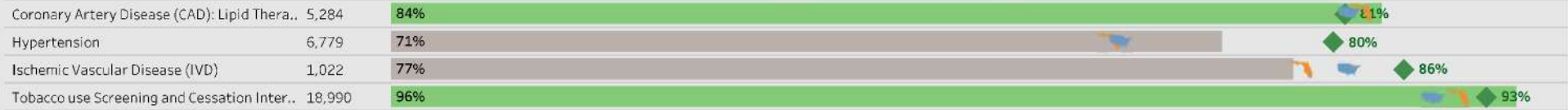
UDS PROVIDER LEVEL QUALITY MEASURES 2023 NATIONAL QUALITY LEADER METRICS

Load Date
1/15/2024

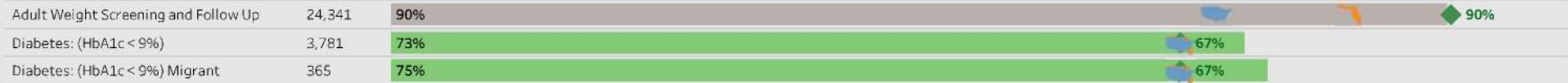
Filters

HEART HEALTH

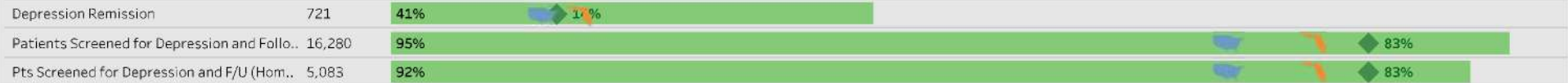
Universe



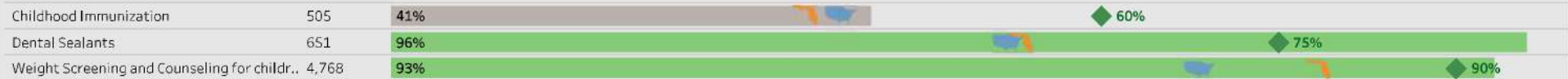
DIABETES



BEHAVIORAL HEALTH



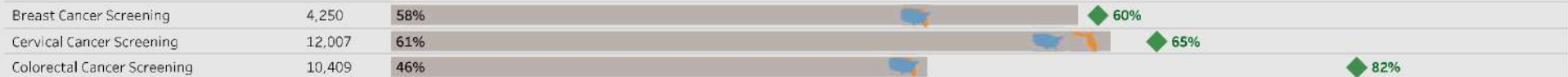
CHILDHOOD MEASURES



HIV PREVENTION AND CARE



CANCER PREVENTION



**CL BRUMBACK PRIMARY CARE CLINICS
BOARD OF DIRECTORS
January 24, 2024**

1. Description: Operations Report – December 2023

2. Summary:

This agenda item provides the following operations report for December 2023

- Health Center Productivity, Payor Mix, Demographics, No Show and Walk-In Dashboard

3. Substantive Analysis:

In December, the Health Centers had a total of 8,289 unique patients. This is a 2% decrease over previous month. Our unique new patients totaled was 1,962 which was 23.6% of overall unique patients. In provider visits the Health Centers had a total of 11,742 visits. This was consistent with previous month and 7% higher than December 2022. 37% of patients were from adults Primary Care which is a 1% decrease, 23% from Dental which was consistent with previous month and 14% from Pediatrics which was also consistent with previous month. In December the Lantana Primary Care Health Center had the highest volume with 1,839 visits followed by the West Palm Beach Primary Health Center with 1,654 visits.

Our payer mix for December reflected 54% uninsured which is a 2% increase over previous month. 39% of patients were Managed Care which was a 2% decrease over previous month. 5% was Medicaid which was consistent with previous month.

60% of patients continue to report as female. 50% of patients reported as White which was a 1% increase over previous month and 43% Black or African American. This was a 1% decrease over previous month. Consistent to previous month, 39% of patients reported as Hispanic. Our largest age group continue to be those between the ages of 30-39 years old with 18% of total patients.

In December our Homeless population averaged 33.4% with a total of 2,844 homeless patients between all Health Centers.

Agricultural Worker averaged 5.3% between all Health Centers in December with a total of 441 patients.

The no show rate in December between all service lines and health centers was 20% which is a 1% decrease. By service line, Dental is lower at 17%; Primary Care 21%; Women's Health 23% and the highest being Behavioral Health at 29%. Consistently only 1% of no shows are from Telehealth.

**CL BRUMBACK PRIMARY CARE CLINICS
BOARD OF DIRECTORS
January 24, 2024**

The average new patient no show rate remains 19% year to date and established patient no show rate is 22%.

Women’s Health and Behavioral Health departments show a higher percent of new patient no shows. For established patients, the highest no-show rates consistently are those from Mangonia Behavioral Health, Mobile Clinics West Palm Beach, Lake Worth and Lantana Primary Care departments.

Walk-in visits year to date remain consistent at 19% in medical and 15% in dental. We provided a total of 27,640 walk-in visits in 2023. In December the West Palm Beach Medical and Dental Health Center saw the highest number of walk-ins with a total of 591 walk-in visits.

4. Fiscal Analysis & Economic Impact Statement:

	Current FY Amounts	Total Amounts (Current + Future)	Budget
Capital Requirements	N/A		Yes <input type="checkbox"/> No <input type="checkbox"/>
Net Operating Impact	N/A		Yes <input type="checkbox"/> No <input type="checkbox"/>

*Non-budgeted expenditures in excess of \$250,000 require Finance and Audit Committee review and Board approval.

Reviewed for financial accuracy and compliance with purchasing procedure:

DocuSigned by:

 CA6A21FF2E09 Jessica Cafarelli
 Interim VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

N/A

 Committee Name

N/A

 Date

**CL BRUMBACK PRIMARY CARE CLINICS
BOARD OF DIRECTORS
January 24, 2024**

6. Recommendation:

Staff recommends the Board approve the Operations report for December 2023


Approved for Legal sufficiency:

DocuSigned by:

0CF6F7DB670643 Bernabe Icaza
SVP & General Counsel

DocuSigned by:

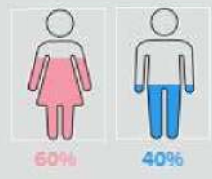
A0CB9739E3DF45 Marisol Miranda
Director of Clinic Operations

DocuSigned by:

F637D209DB4248 Candice Abbott
SVP & Chief Operating Officer
Executive Director of FQHC Services

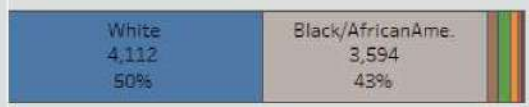
Patient Visits 8,289
New Patients 1,962

Monthly Productivity December 2023

DEMOGRAPHICS



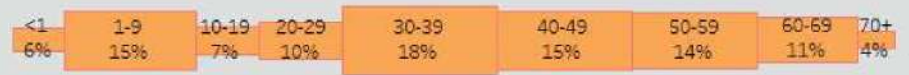
RACE



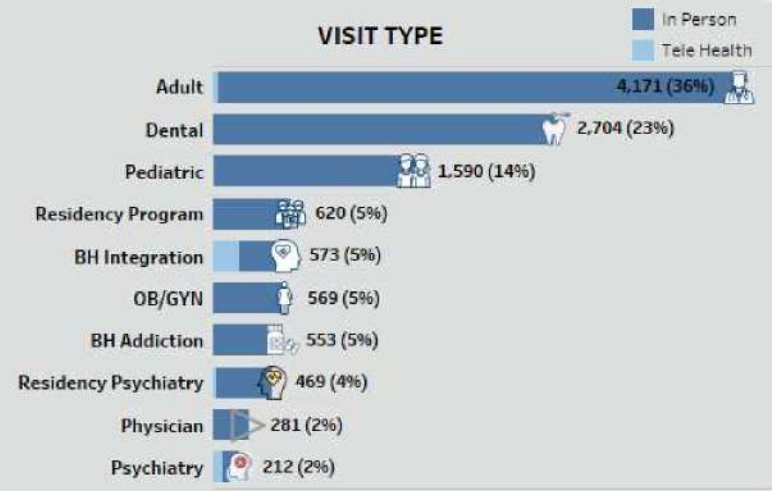
ETHNICITY



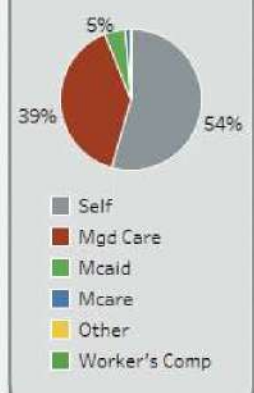
AGE GROUP



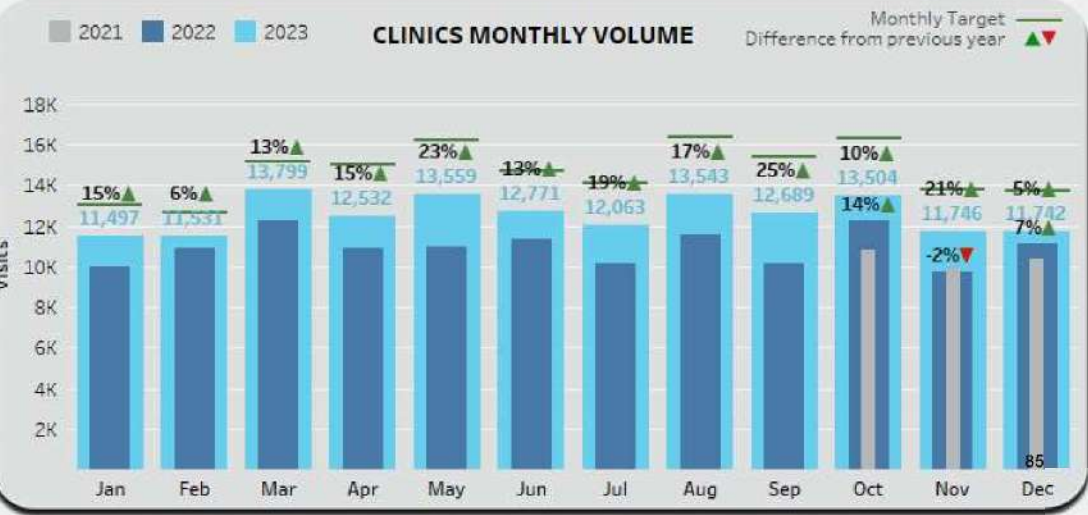
VISIT TYPE



PAYOR MIX



CLINICS MONTHLY VOLUME



VOLUME BY CLINIC

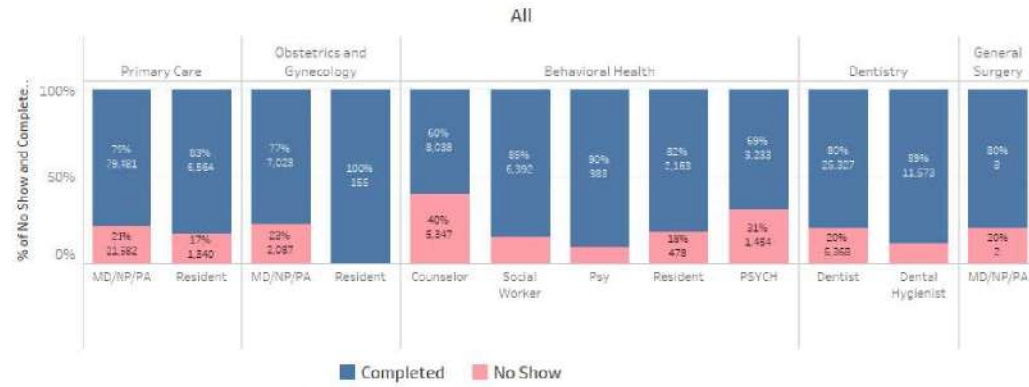
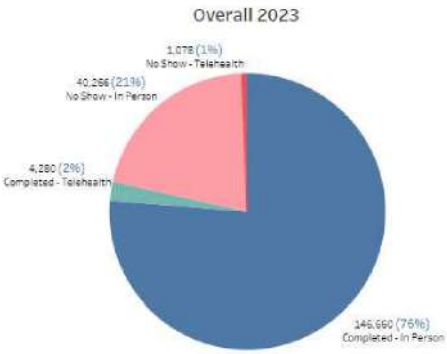




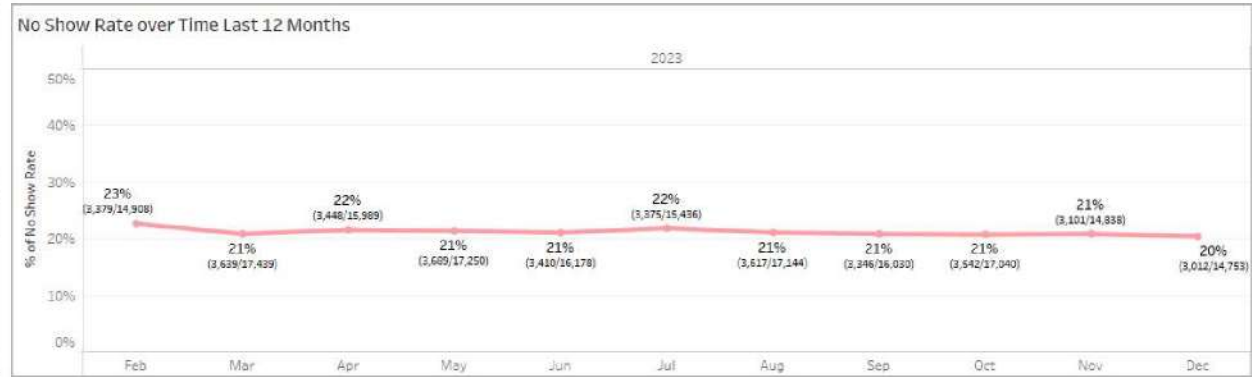
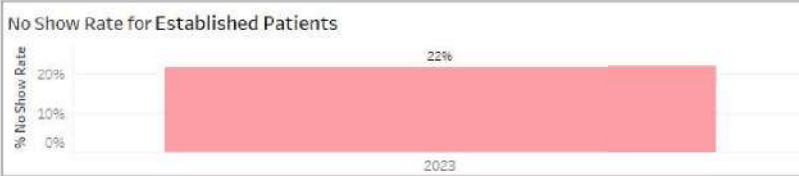
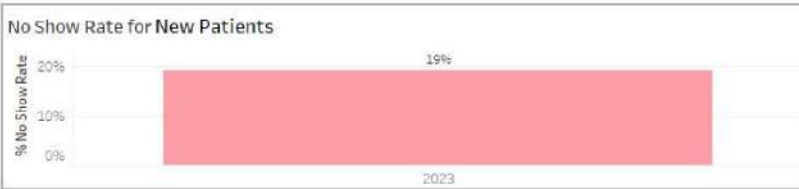
No Show vs Completed Appointments Overall

Adult Care, Pediatric Care, Women's Health, Dental, BH Integration and BH Addiction (including resource schedules, excluding nurses)

Clinic
All
Year 2023
Provider
All



Specialty	No Show	Total	%
Primary Care			21%
Obstetrics and Gynecology			23%
Behavioral Health			29%
Dentistry			17%
General Surgery			20%

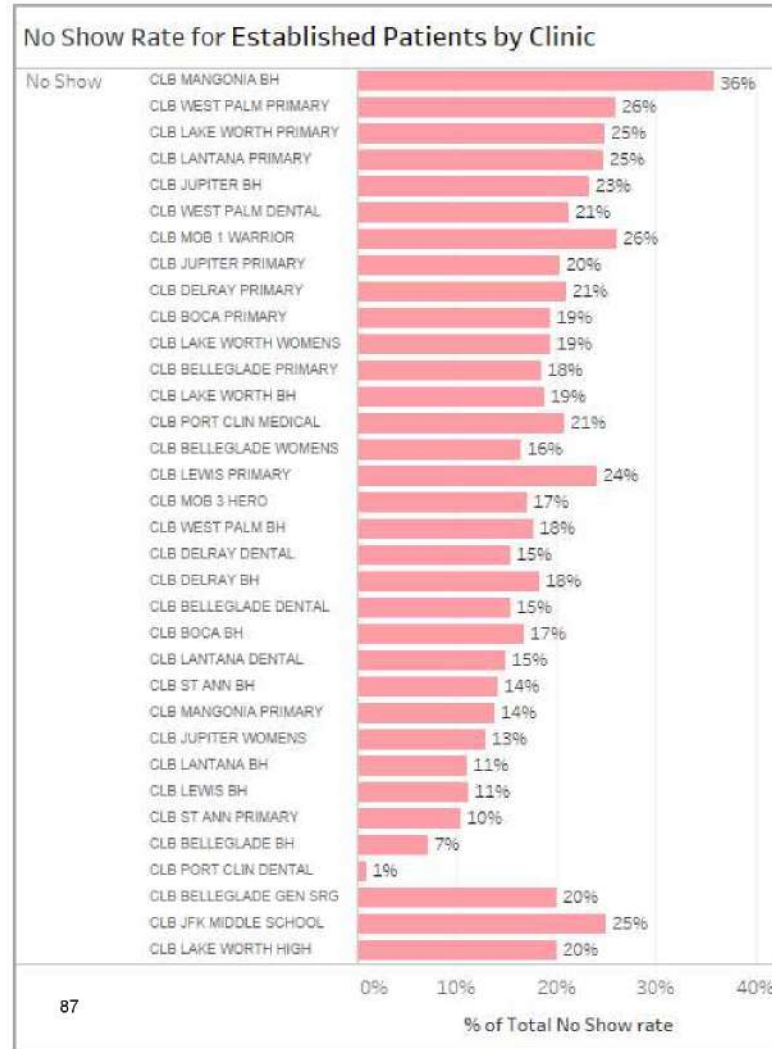
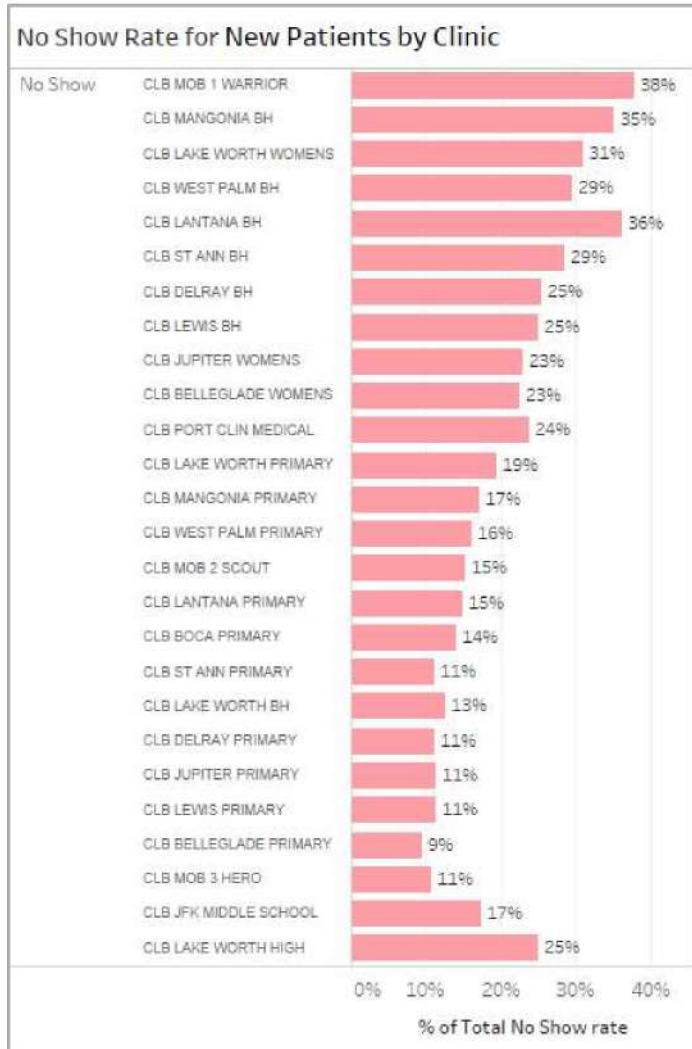


No Show vs Completed Appointments by Clinic

Adult Care, Pediatric Care, Women's Health, Dental, BH Integration and BH Addiction (including resource schedules, excluding nurses)

Year
2023

Provider
All

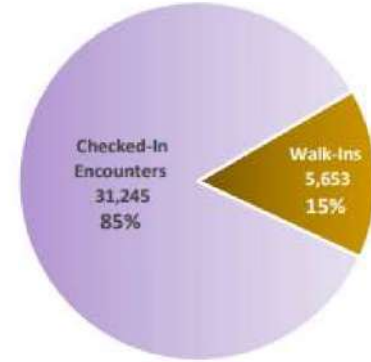


Number and percentage of Walk-Ins seen during YTD 2023 at C. L. Brumback Primary Care Clinics

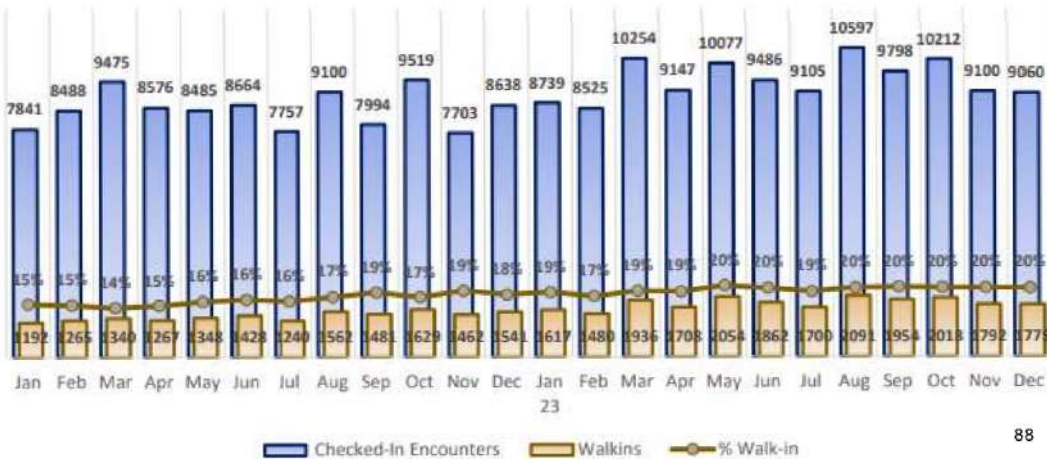
Walk-ins Adult Medical, Pediatric, Women's Health, BH / SA
2023



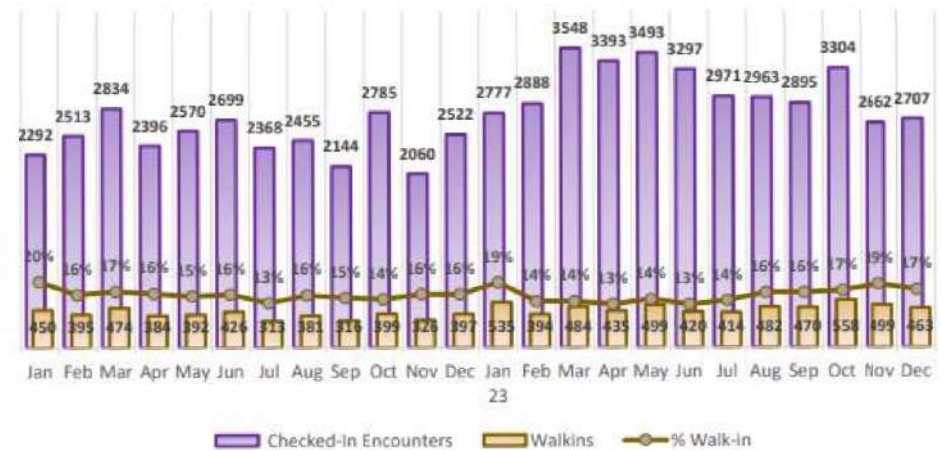
Walk-ins Dental
2023



Walk-ins Adult Medical, Pediatric, Women's Health, BH / SA by Clinic
2022- 2023

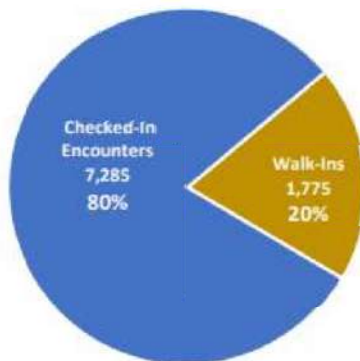


Walk-ins Dental
2022 - 2023



Number and percentage of walk-Ins seen in December 2023 at C. L. Brumback Primary Care Clinics

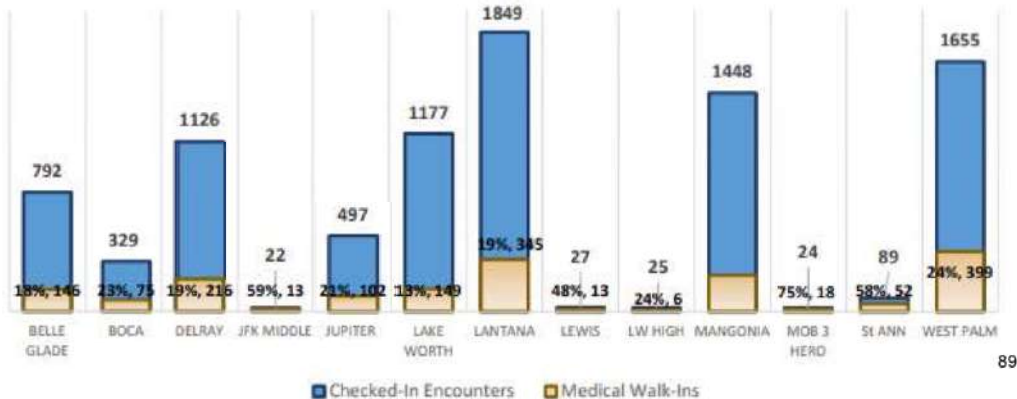
Walk-ins Adult Medical, Pediatric, Women's Health, BH / SA
Dec 2023



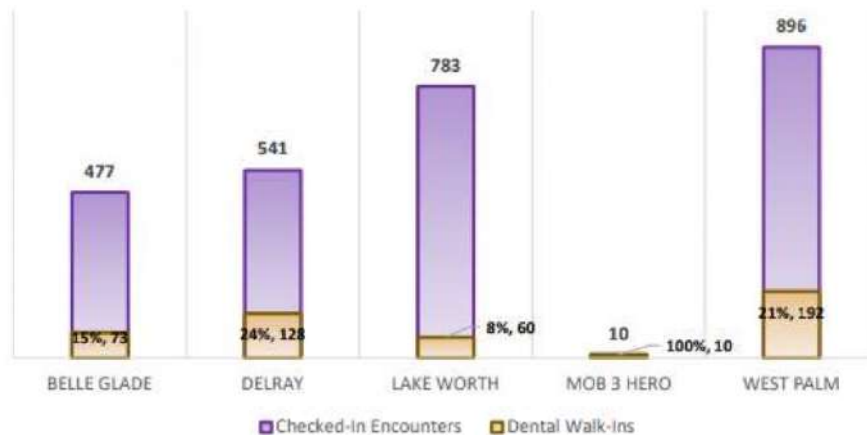
Walk-ins Dental
Dec 2023



Walk-ins Adult Medical, Pediatric, Women's Health, BH / SA by
Clinic
Dec 2023



Walk-ins Dental by Clinic
Dec 2023



**CL BRUMBACK PRIMARY CARE CLINICS
BOARD OF DIRECTORS
JANUARY 24, 2024**

1. Description: Patient Relations Dashboard Report

2. Summary:

This agenda item provides the following:

Quarterly Patient Relations Dashboard Q4 2023

3. Substantive Analysis:

For Quarter 4 2023, there were a total of 20 Patient Relations Occurrences that occurred between 6 Clinics and Clinic Administration. This was a decrease from the previous quarter where we had 33 Complaints and Grievances. Of the 20 occurrences, there were 7 Grievances and 13 Complaints. The top 3 categories were Care & Treatment, Communication and Finance Related issues. The top subcategory was Competency of Staff with 3 occurrences.

There was also a total of 81 Compliments received across 7 Clinics and Clinic Administration. Of the 81 Compliments, 78 were patient compliments and 3 were employee-to-employee “Thumbs-Up” compliments.

4. Fiscal Analysis & Economic Impact Statement:

	Current FY Amounts	Total Amounts (Current + Future)	Budget
Capital Requirements	N/A		Yes <input type="checkbox"/> No <input type="checkbox"/>
Net Operating Impact	N/A		Yes <input type="checkbox"/> No <input type="checkbox"/>

*Non-budgeted expenditures in excess of \$250,000 require Finance and Audit Committee review and Board approval.

Reviewed for financial accuracy and compliance with purchasing procedure:

DocuSigned by:

 CABA21FF2E0383 Jessica Cafarelli
 Interim VP & Chief Financial Officer

5. Reviewed/Approved by Committee:

N/A

 Committee Name

N/A

 Date

**CL BRUMBACK PRIMARY CARE CLINICS
BOARD OF DIRECTORS
JANUARY 24, 2024**

6. Recommendation:

Staff recommends the Board approve the Quarterly Patient Relations Dashboard for Q4 2023.

Approved for Legal sufficiency:

DocuSigned by:
Bernabe Icaza
Bernabe Icaza
SVP & General Counsel

DocuSigned by:
Alexa Goodwin
Alexa Goodwin
Manager, Patient Experience & Relations

DocuSigned by:
Cardice Abbott
Cardice Abbott
SVP & Chief Operating Officer



Patient Relations (Grievances, Complaints & Compliments) C.L. Brumback Primary Care Clinics



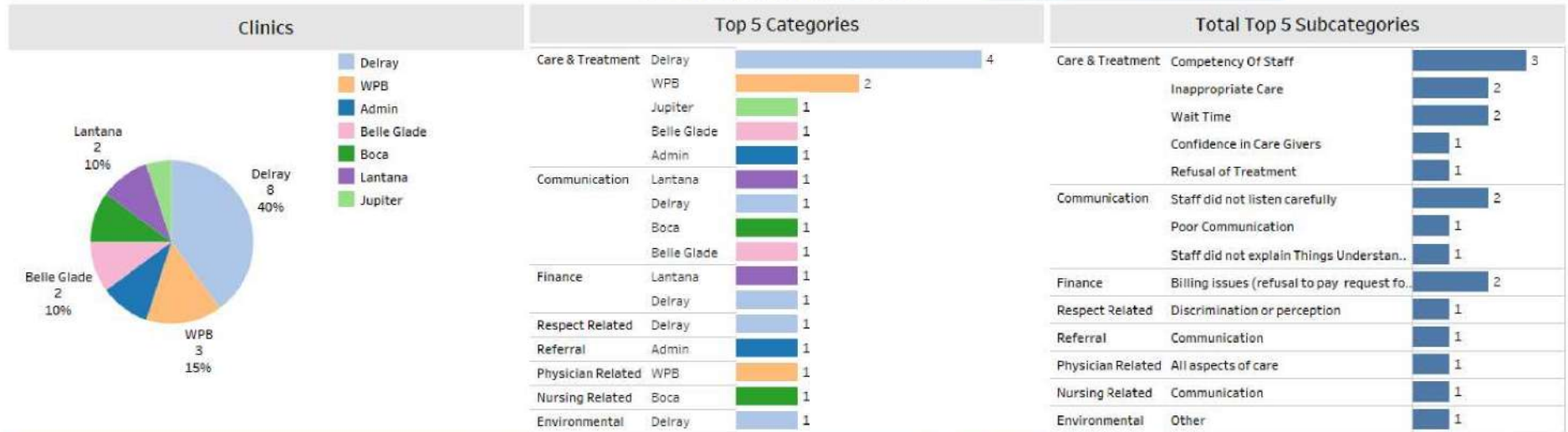
Start Date
10/1/2023

End Date
12/31/2023

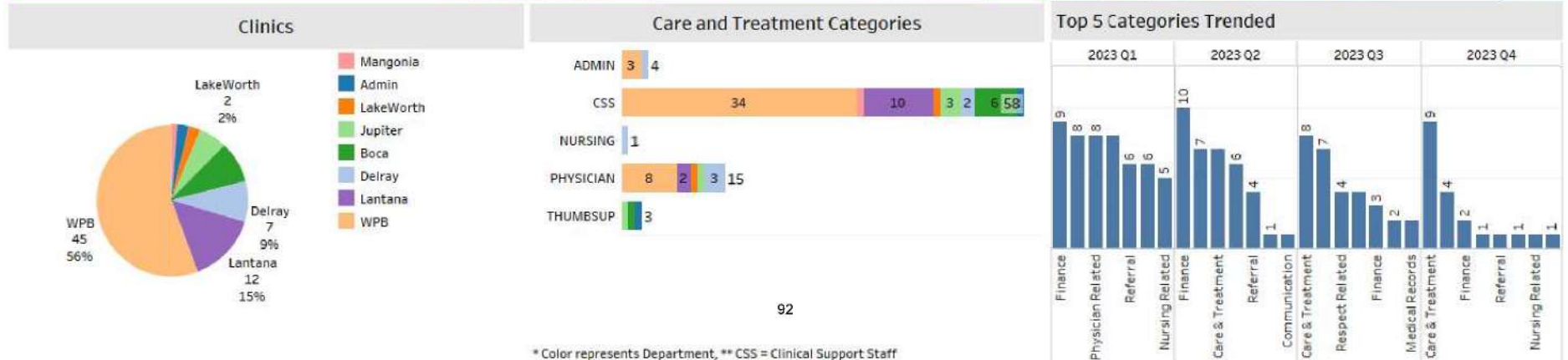
Top Categories
5

2023 Q4

Dept Desc All Provider All **Total Complaints and Grievances 20** Late Entries: 3 Clinic All



Total Compliments 81 Late Entries: 0 **Complaints/Grievances Prev 4 Quarters 89**



92

* Color represents Department, ** CSS = Clinical Support Staff