



**FINANCE AND AUDIT COMMITTEE**  
**January 29, 2019**  
**12:00 PM**

**Meeting Location**  
**Health Care District Administrative Office**  
**1515 N. Flagler Drive, Suite 101**  
**West Palm Beach, FL 33401**

*If a person decides to appeal any decision made by the board or committee, with respect to any matter considered 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 proceeding is made, which record includes the testimony and evidence upon which the appeal is to be based.*



**FINANCE and AUDIT COMMITTEE MEETING  
AGENDA**

**January 29, 2019 12:00 P.M.  
Health Care District Board Room  
1515 N. Flagler Drive, Suite 101  
West Palm Beach, FL 33401**

**1. Call to Order – Chair**

- A. Roll Call
- B. Affirmation of Mission: The mission of the Health Care District of Palm Beach County is to be the health care safety net for Palm Beach County. Our vision is meeting changes in health care to keep our community healthy.

**2. Agenda Approval**

- A. Additions/Deletions/Substitutions
- B. Motion to Approve Agenda

**3. Awards, Introductions and Presentations**

- A. Health Care District of Palm Beach County Quarterly Investment Review and Economic Update (1Q Ending 12/31/2018) – John Grady, Public Trust Advisors
- B. RSM Audit Update – Carlos Hernandez, RSM US LLP

**4. Disclosure of Voting Conflict**

**5. Public Comment**

**6. Meeting Minutes**

- A. **Staff Recommends a MOTION TO APPROVE:**  
Finance and Audit Committee Meeting Minutes of September 25, 2018. [Pages 1-6]
- B. **Staff Recommends a MOTION TO APPROVE:**  
Finance and Audit Committee Meeting Minutes of November 27, 2018. [Pages 7-11]

**7. Consent Agenda – Motion to Approve Consent Agenda Items**

**A. ADMINISTRATION**

- 7A-1. **RECEIVE AND FILE:**  
January 2019 Internet Posting of District Public Meeting.  
<http://www.hcdpbc.org> – Resources – Public Meetings
- 7A-2. **RECEIVE AND FILE:**  
Finance and Audit Committee Attendance. [12]

## 8. Regular Agenda

### A. ADMINISTRATION

- 8A-1. **RECEIVE AND FILE:**  
Health Care District Financial Statements – December 2018.  
(Dawn Richards) [13-67]
- 8A-2. **Staff Recommends a MOTION TO APPROVE:**  
District Cares Changes  
(Thomas Cleare) [68-69]
- 8A-3. **Staff Recommends a MOTION TO APPROVE:**  
Belle Glade Primary Care Clinic Construction  
(Dawn Richards) [70-71]
- 8A-4. **Staff Recommends a MOTION TO APPROVE:**  
340B Discount Program Report  
(Harry Kimball) [72-81]
- 8A-5. **Staff Recommends a MOTION TO APPROVE:**  
Patient Access Audit  
(Harry Kimball) [82-91]
- 8A-6. **Staff Recommends a MOTION TO APPROVE:**  
Audit Plan 2018/2019 Status Update  
(Harry Kimball) [92-97]
- 8A-7. **Staff Recommends a MOTION TO APPROVE:**  
FY 2019/2020 Audit Plan and Risk Assessment  
(Harry Kimball) [98-120]

## 9. Comments

- A. CEO Comments
- B. CFO Comments
- C. Committee Member Comments

#### **10. Establishment of Upcoming Meetings**

<b>Date:</b>	<b>Time:</b>
January 29, 2019	12:00 P.M.
March 26, 2019	12:00 P.M.
May 28, 2019	12:00 P.M. – Annual Meeting (Officer Elections)
July 30, 2019	12:00 P.M. – Joint meeting with the Health Care District Board (Location TBD)
September 24, 2019	12:00 P.M.
November 26, 2019	12:00 P.M.

Unless otherwise noted, these meetings will take place in the Health Care District Board Room at 1515 N. Flagler Drive, Suite 101, West Palm Beach.

#### **11. Motion to Adjourn**



**FINANCE AND AUDIT COMMITTEE MEETING  
SUMMARY MINUTES**

**September 25, 2018, 12:00 p.m.  
1515 N. Flagler Drive, Suite 101  
West Palm Beach, FL 33401**

**1. Call to Order – Chair**

Brian Lohmann called the meeting to order.

**A. Roll Call**

Health Care District Finance and Audit Committee members present included: Brian Lohmann, Chair; Nancy Banner, Vice Chair; Joe Bergeron; Michael Burke; Leslie Daniels; Joan Roude; Edward Sabin and Michael Smith.

Staff present included: Darcy Davis, Chief Executive Officer; Dawn Richards, VP & Chief Financial Officer; Dr. Belma Andric, Chief Medical Officer; Dr. Tom Cleare, VP of Strategy; Karen Harris, VP of Field Operations; Ellen Pentland, Chief Compliance Officer; Cindy Yarbrough, Chief Information Officer; Steven Hurwitz, VP of Human Resources and Communications; Valerie Shahriari, General Counsel and Stephanie Dardanella, Administrator of Lakeside Medical Center.

Others present included: John Grady, Public Trust Advisors; Harry Torres, CHAN Healthcare; and Harry Kimball, CHAN Healthcare

Recording/Transcribing Secretary: Tanya McCain

- B. Affirmation of Mission:** This mission of the Health Care District of Palm Beach County is to be the health care safety net for Palm Beach County. Our vision is meeting changes in health care to keep our community healthy.

**2. Agenda Approval**

**A. Additions/Deletions/Substitutions**

It was requested that agenda item 7A-4 (Auditor General Final Response) be moved from the Consent Agenda to the Regular Agenda as item 8A-8.

**B. Motion to Approve Agenda**

**CONCLUSION/ACTION:** Chair Lohmann made a motion to approve the agenda as amended. The motion was duly seconded by Mr. Sabin. There being no opposition, the motion passed unanimously.

**3. Awards, Introductions and Presentations**

**A. Investment review and Economic Update (3Q Ending 6/30/2018) – John Grady, Public Trust Advisors**

Mr. Grady presented the quarterly investment report for the period ending June 30, 2018.

**4. Disclosure of Voting Conflict**

None

**5. Public Comment**

None

**6. Meeting Minutes**

**A. Staff Recommends a MOTION TO APPROVE:**

Finance and Audit Committee Meeting Minutes of May 22, 2018.

**CONCLUSION/ACTION:** Ms. Banner made a motion to approve the Finance and Audit Committee Meeting Minutes of May 22, 2018 as presented. The motion was duly seconded by Mr. Smith. There being no opposition, the motion passed unanimously.

**B. RECEIVE AND FILE:**

Health Care District Board and Finance and Audit Committee Joint Meeting Minutes of July 24, 2018.

**7. Consent Agenda – Motion to Approve Consent Agenda Items**

**CONCLUSION/ACTION:** Ms. Roude made a motion to approve the Consent Agenda items. The motion was duly seconded by Mr. Burke. There being no opposition, the motion passed unanimously.

**A. ADMINISTRATION**

**7A-1. RECEIVE AND FILE:**

September 2018 Internet Posting of District Public Meeting.  
<http://www.hcdpbc.org> - Resources- Public Meetings

**7A-2. RECEIVE AND FILE:**

Finance and Audit Committee Attendance

**7A-3. RECEIVE AND FILE:**

RSM Renewal of Audit Arrangement Letter

**7A-4. MOVED TO REGULAR AGENDA AS ITEM 8A-8**

**7A-5. RECEIVE AND FILE:**

2019 Budget – Version 2

## 8. Regular Agenda

### A. ADMINISTRATION

#### 8A-1. Health Care District Financial Statements – August 2018.

Ms. Richards reviewed the information provided in the Management Discussion and Analysis and responded to questions.

**CONCLUSION/ACTION:** Received and filed.

#### 8A-2. Purchasing Policy Revisions

Ms. Richards identified the revised sections of the proposed Policy and responded to questions.

**CONCLUSION/ACTION:** Ms. Roude made a motion to forward the Purchasing Policy Revisions to the Board for approval. The motion was duly seconded by Mr. Burke. There being no opposition, the motion passed unanimously.

#### 8A-3. Fund Balance Policy Revisions

Ms. Richards identified the revised sections of the proposed Policy and responded to questions.

**CONCLUSION/ACTION:** Mr. Edward Sabin made a motion to forward the Fund Balance Policy Revisions to the Board for approval. The motion was duly seconded by Ms. Joan Roude. There being no opposition, the motion passed unanimously.

#### 8A-4. Meaningful Use Audit Report

Mr. Kimball discussed the results of the Meaningful Use Audit and responded to questions.

**CONCLUSION/ACTION:** Ms. Roude made a motion to forward the Meaningful Use Audit Report to the Board for approval. The motion was duly seconded by Ms. Banner. There being no opposition, the motion passed unanimously.

#### 8A-5. AR Allowance Audit Report

Mr. Kimball discussed the results of the Accounts Receivable Reserves Audit and responded to questions.

**CONCLUSION/ACTION:** Mr. Smith made a motion to forward the AR Allowance Audit Report to the Board for approval. The motion was duly seconded by Ms. Roude. There being no opposition, the motion passed unanimously.

8A-6. **Gift Shop Audit Report**

Mr. Kimball discussed the results of the Gift Shop Audit Report and responded to questions.

**CONCLUSION/ACTION:** Mr. Bergeron made a motion to forward the Gift Shop Audit Report to the Board for approval. The motion was duly seconded by Ms. Banner. There being no opposition, the motion passed unanimously.

8A-7. **FY2018 Audit Plan Status Update**

Mr. Kimball reported on the status of proposed audits for all entities of the District. The FY 2018 Audit Plan Status Update includes 12 audits.

**CONCLUSION/ACTION:** Mr. Burke made a motion to forward the FY2018 Audit Plan Status Update to the Board for approval. The motion was duly seconded by Ms. Roude. There being no opposition, the motion passed unanimously.

8A-8. **Auditor General Final Response**

Ms. Richards reported on the status and outcome of the 2016 investigation by the Auditor General.

**CONCLUSION/ACTION:** Chair Lohmann made a motion to forward the Auditor General Final Response to the Board for approval. The motion was duly seconded by Mr. Sabin. There being no opposition, the motion passed unanimously.

9. **Comments**

A. **CEO Comments**

None.

B. **CFO Comments**

None.

C. **Committee Member Comments**

None.

**10. Establishment of Upcoming Meetings**

<b>Date:</b>	<b>Time:</b>
November 27, 2018	12:00 P.M.

Unless otherwise noted, these meetings will take place in the Health Care District Board Room at 1515 N. Flagler Drive, West Palm Beach, Florida.

**11. Motion to Adjourn**

There being no further business, the meeting was adjourned.

\_\_\_\_\_  
**Brian Lohmann, Finance Committee Chairman**

\_\_\_\_\_  
**Date**

**HEALTH CARE DISTRICT  
OF PALM BEACH COUNTY  
FINANCE and AUDIT COMMITTEE**

**Attendance Tracking**

	02/27/18	03/27/18	05/22/18	07/24/18	09/25/18	11/27/18
Brian Lohmann	✓		✓	✓	✓	
Nancy Banner	✓	✓		✓	✓	
Joseph Bergeron	✓	✓	✓	✓	✓	
Mike Burke	✓		✓	✓	✓	
Les Daniels	✓	✓		✓	✓	
Joan Roude	✓	✓		✓	✓	
Edward Sabin	✓	✓	✓	✓	✓	
Michael Smith	✓		✓	✓	✓	





**FINANCE AND AUDIT COMMITTEE MEETING  
SUMMARY MINUTES**

**November 27, 2018, 12:00 p.m.  
1515 N. Flagler Drive, Suite 101  
West Palm Beach, FL 33401**

**1. Call to Order – Chair**

Brian Lohmann called the meeting to order.

**A. Roll Call**

Health Care District Finance and Audit Committee members present included: Brian Lohmann, Chair; Nancy Banner, Vice Chair; Joe Bergeron; Michael Burke; Leslie Daniels; Edward Sabin and Michael Smith.

Staff present included: Darcy Davis, Chief Executive Officer; Dawn Richards, VP & Chief Financial Officer; Dr. Belma Andric, Chief Medical Officer; Dr. Tom Cleare, VP of Strategy; Karen Harris, VP of Field Operations; Ellen Pentland, Chief Compliance Officer; Cindy Yarbrough, Chief Information Officer; Steven Hurwitz, VP of Human Resources and Communications; Mina Bayik, Director of Finance; Robin Kish, Director of Communications; Lisa Sulger, Manager of Records; and Stephanie Dardanella, Administrator of Lakeside Medical Center

Others present included: John Grady, Public Trust Advisors; Harry Torres, Crowe Healthcare; Harry Kimball, Crowe Healthcare; and Scott Gerard, Crowe Healthcare

Recording/Transcribing Secretary: Tanya McCain

- B. Affirmation of Mission:** This mission of the Health Care District of Palm Beach County is to be the health care safety net for Palm Beach County. Our vision is meeting changes in health care to keep our community healthy.

**2. Agenda Approval**

**A. Additions/Deletions/Substitutions**

None.

**B. Motion to Approve Agenda**

**CONCLUSION/ACTION:** Ms. Banner made a motion to approve the agenda as presented. The motion was duly seconded by Mr. Smith. There being no opposition, the motion passed unanimously.

**3. Awards, Introductions and Presentations**

**A. Recognition of Michael Smith, Finance and Audit Committee**

Chair Lohmann read the following statement in recognition of Michael Smith's tenure on the Finance and Audit Committee. He began by noting that the Health Care District has been the County's healthcare safety net and responsible steward of tax-payer dollars. For the past 8 years, Michael Smith has dedicated his time and expertise to guiding the Health Care District's Finance Committee to doing just that. I am proud to have served along-side Michael as our healthcare system has expanded access to care through its many diverse programs. This year, as we mark the Health Care District's 30<sup>th</sup> anniversary, we also recognize Michael for his ideas, leadership and commitment to this public agency's fiduciary health and financial oversight. During his 2 terms on the Finance Committee, the Health Care District has served a growing number of residents while reducing property taxes.

Michael, your tenure was highlighted by many other noteworthy accomplishments. These achievements include the launch of Lakeside Medical Center's Family Medicine Residency Program as well as the District's operation of the CL Brumbach Primary Care Clinics, which served 45, 400 adult and pediatric patients during the last fiscal year. Other milestones include: launching the Medication Assisted Treatment Program to address the county's opioid epidemic; rolling out the Mobile Health Clinic to serve the homeless; working on the Helicopter Replacement Project; expanding pharmacy services; implementing the 340B Program and reducing costs for prescriptions; providing dental, behavioral health and women's health services and so many more. Chair Lohmann thanked him for his time, insight and sound judgement on the Committee. Chairman Lohmann asked Mr. Smith to join him and the other Committee members for a group photo and to present him with a memento of his service on the Finance and Audit Committee.

Mr. Smith stated that it has been a pleasure to serve and that he enjoyed it and learned a lot about the Health Care District. Mr. Smith concluded by offering his services if he is needed for anything in the future.

**B. Investment review and Economic Update (4Q Ending 9/30/2018) – John Grady, Public Trust Advisors**

Mr. Grady presented the quarterly investment report for the period ending September 30, 2018.

**4. Disclosure of Voting Conflict**

None.

**5. Public Comment**

Don Chester, Healthy Mothers – Healthy Babies

**6. Consent Agenda – Motion to Approve Consent Agenda Items**

**CONCLUSION/ACTION:** Mr. Daniels made a motion to approve the Consent Agenda items. The motion was duly seconded by Mr. Sabin. There being no opposition, the motion passed unanimously.



**A. ADMINISTRATION**

- 6A-1. **RECEIVE AND FILE:**  
November 2018 Internet Posting of District Public Meeting.  
<http://www.hcdpbc.org> - Resources- Public Meetings
- 6A-2. **RECEIVE AND FILE:**  
Finance and Audit Committee Attendance
- 6A-3. **RECEIVE AND FILE:**  
Insurance Schedule 2018 – 2019
- 6A-4. **Staff Recommends a MOTION TO APPROVE:**  
Fiscal Year 2016 Budget Savings

**7. Regular Agenda**

**A. ADMINISTRATION**

**7A-1. Health Care District Financial Statements – September 2018.**

Ms. Richards reviewed the information provided in the Management Discussion and Analysis and responded to questions.

**CONCLUSION/ACTION:** Received and filed.

**7A-2. Health Care District Financial Statements – October 2018.**

Ms. Richards reviewed the information provided in the Management Discussion and Analysis and responded to questions.

**CONCLUSION/ACTION:** Received and filed.

**7A-3. Fiscal Year 2018 Lakeside Medical Center Budget Amendment**

Ms. Mina Bayik presented the 2018 fiscal year-end budget amendment for Lakeside Medical Center to the Committee for review.

**CONCLUSION/ACTION:** Mr. Bergeron made a motion to forward the Fiscal Year 2018 Lakeside Medical Center Budget Amendment to the Board for approval. The motion was duly seconded by Mr. Daniels. There being no opposition, the motion passed unanimously.

**7A-4. FY 2018 Audit Plan Status Update**

Mr. Kimball reported on the status of the proposed for all entities of the District. The FY 2018 Audit Plan Status update includes 12 audits.

**CONCLUSION/ACTION:** Mr. Sabin made a motion to forward the FY 2018 Audit Plan Status Update to the Board for approval. The motion was duly seconded by Mr. Smith. There being no opposition, the motion passed unanimously.

**7A-5. Medical Device Security Assessment Report**

Mr. Gerard reviewed the biomedical device risk assessment and responded to questions.

**CONCLUSION/ACTION:** Mr. Daniels made a motion to forward the Medical Device Security Assessment Report to the Board for approval. The motion was duly seconded by Mr. Bergeron. There being no opposition, the motion passed unanimously.

**7A-6. Sponsored Programs Award Recommendations**

Mr. Cleare outlined the award recommendations from the Sponsored Programs Funding Request Selection Committee and responded to questions.

**CONCLUSION/ACTION:** Mr. Smith made a motion to forward the Sponsored Programs Award Recommendations to the Board for approval. The motion was duly seconded by Mr. Sabin. There being no opposition, the motion passed unanimously.

**7A-7. Department of Health Subsidy**

Mr. Cleare reviewed the Department of Health Subsidy and responded to questions.

**CONCLUSION/ACTION:**

Mr. Bergeron made a motion to forward the Department of Health Subsidy to the Board for approval. The motion was duly seconded by Mr. Smith. There being no opposition, the motion passed unanimously.

**7A-8. Reimbursement for DOH Services in Excess of Contract Minimum**

Mr. Cleare reviewed the request for Reimbursement for DOH Services in Excess of Contract Minimum and responded to questions.

**CONCLUSION/ACTION:** Mr. Burke made a motion to forward the Reimbursement for DOH Services in Excess of Contract Minimum to the Board for approval. The motion was duly seconded by Mr. Daniels. There being no opposition, the motion passed unanimously.

**8. Comments**

**A. CEO Comments**

None.

B. CFO Comments

None.

C. Committee Member Comments

None.

**9. Establishment of Upcoming Meetings**

**January 29, 2019**

- 12:00 P.M., Health Care District Finance and Audit Committee Meeting

**March 26, 2019**

- 12:00 P.M., Health Care District Finance and Audit Committee Meeting

**May 28, 2019 - Annual Meeting (Officer Elections)**

- 12:00 P.M., Health Care District Board Finance and Audit Committee Meeting

**July 30, 2019 (Location TBD)**

- 12:00 P.M., Joint Meeting with the Health Care District Board

**September 24, 2019**

- 12:00 P.M., Health Care District Board Finance and Audit Committee Meeting

**November 26, 2019**

- 12:00 P.M., Health Care District Finance and Audit Committee Meeting

Unless otherwise noted, these meetings will take place in the Health Care District Board Room at 1515 N. Flagler Drive, West Palm Beach, Florida.

**11. Motion to Adjourn**

There being no further business, the meeting was adjourned.

\_\_\_\_\_  
Brian Lohmann, Finance Committee Chairman

\_\_\_\_\_  
Date

**HEALTH CARE DISTRICT  
OF PALM BEACH COUNTY  
FINANCE and AUDIT COMMITTEE**

**Attendance Tracking**

	02/27/18	03/27/18	05/22/18	07/24/18	09/25/18	11/27/18
Brian Lohmann	✓		✓	✓	✓	✓
Nancy Banner	✓	✓		✓	✓	✓
Joseph Bergeron	✓	✓	✓	✓	✓	✓
Mike Burke	✓		✓	✓	✓	✓
Les Daniels	✓	✓		✓	✓	✓
Joan Roude	✓	✓		✓	✓	
Edward Sabin	✓	✓	✓	✓	✓	✓
Michael Smith	✓		✓	✓	✓	✓

**HEALTH CARE DISTRICT  
FINANCE AND AUDIT COMMITTEE  
January 29, 2019**

**1. Description: Health Care District Financial Statements**

**2. Summary:**

The December 2018 financial statements for the Health Care District are presented for Health Care District Board & Finance and Audit Committee review.

**3. Substantive Analysis:**

Management has provided the income statements and key statistical information for the Health Care District. Additional management discussion and analysis is incorporated into the financial statement presentation.

**4. Fiscal Analysis & Economic Impact Statement:**

	Amount	Budget
Capital Requirements	N/A	Yes <input type="checkbox"/> No <input type="checkbox"/>
Annual Net Revenue	N/A	Yes <input type="checkbox"/> No <input type="checkbox"/>
Annual Expenditures	N/A	Yes <input type="checkbox"/> No <input type="checkbox"/>

Reviewed for financial accuracy and compliance with purchasing procedure:

  
Dawn Richards  
VP & Chief Financial Officer

**5. Reviewed/Approved by Committee:**

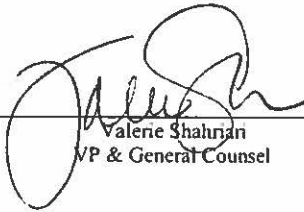
N/A  
\_\_\_\_\_  
Committee Name

\_\_\_\_\_  
Date Approved

**6. Recommendation:**

Staff recommends the Health Care District Board & Finance and Audit Committee receive and file the December 2018 Health Care District financial statements.

**HEALTH CARE DISTRICT  
FINANCE AND AUDIT COMMITTEE  
January 29, 2019**



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Valerie Shahinian  
VP & General Counsel



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Dawn Richards  
VP & Chief Financial Officer



# **Health Care District of Palm Beach County**

**FINANCIAL STATEMENT**

**December 2018**

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## MEMO

To: Finance Committee

From: Dawn L. Richards, Chief Financial Officer

Date: January 9, 2019

Subject: Management Discussion and Analysis of December 2018 Health Care District Financial Statements

The December statements represent the financial performance for the three months of the 2019 fiscal year for the Health Care District. Included below are explanations of volume, revenue and expense variances.

### Net Margin by Fund

	Actual	Budget	Variance	Prior Year	Prior Year Variance
General Fund	\$ 80,538,619	\$ 80,054,647	\$ 483,973	\$ 7,469,097	\$ 73,069,522
Healey Center	(384,572)	(691,786)	307,214	(647,235)	262,663
Lakeside Medical Center	(6,439,970)	(6,447,563)	7,593	(5,038,924)	(1,401,046)
Healthy Palm Beaches	4,236	1,946	2,290	49,294	(45,058)
Primary Care Clinics	(2,514,646)	(2,842,250)	327,604	(1,113,168)	(1,401,478)

### Net Performance

- Net margin combined for all funds YTD December of \$68.5M was above budget of \$67.3M by \$1.2M or 1.8% and above prior year of (\$2.0M). Year over year positive net margin variance was a result of change in revenue recognition methodology for ad valorem taxes.
- Total combined revenues YTD of \$127.3M were below budget of \$129.2M by \$1.9M or 1.5% and above prior year of \$53.5M by \$73.8M or 137.8%. This variance was caused by the change in ad valorem taxes of \$71.8M.



- Operating expenses YTD of \$57.8M were below budget of \$60.8M by \$3.0M or 4.9% and above prior year of \$54.4M by \$3.3M or 6.1%. Significant positive expense variance to budget included sponsored program (\$766k), purchased services (\$679k), salaries and wages (\$630k), benefits (\$423k), other expense (\$311k), drugs (\$288k), other supplies (\$265k), and repairs and maintenance (\$229k). Notable negative variances were contracted physician expense (\$493k), and medical services (\$343k).

## Volume Analysis

### General Fund (Trauma, Aeromedical, Managed Care, Pharmacy, School Health, Sponsored Programs)

- New Trauma patients of 1,179 is below budget of 1,197 by 18 or 1.5% and above prior year of 1,117 by 62 or 5.6%.
- Aeromedical transports of 141 is below budget of 165 by 24 or 14.5% and below prior year of 173 by 32 or 18.5%.
- Managed Care District Cares visits to medical clinics of 6,021 were below prior year of 8,458 by 2,437 or 28.8%.
- Managed Care Uninsured visits to medical clinics of 8,534 were above prior year of 6,128 by 2,406 or 39.3%.
- Managed Care District Cares dental visits of 1,160 were below prior year of 2,365 by 1,205 or 51.0%.
- Managed Care Uninsured dental visits of 3,244 were below prior year of 3,483 by 239 or 6.9%.
- Managed Care current year membership in District Cares of 8,929 is below prior year of 9,924 by 995 or 10.0%.
- Total prescriptions filled at in-house pharmacies of 65,439 were below prior year of 71,960 by 6,521 or 9.1%.
- Retail pharmacy prescriptions of 526 were below prior year of 713 by 187 or 26.2%.
- Pharmacy average cost per script for December was \$4.16, compared to \$4.07 in 2018, \$7.52 in 2017.

### Healey Center

- YTD census of 119, was slightly below prior year of 120 by 1 or 1.0% and above budget of 118 by 1 or 1.0%
- YTD admissions of 31 were below prior year of 32 by 1 or 3.1%.
- Resident patient days of 10,932 were below prior year of 11,001 by 69 or 1.0% and above budget of 10,856 by 76 or 1.0%.

### Lakeside Medical Center

- Adjusted patient days (APD) YTD of 4,186 were below budget of 4,570 by 384 or 8.39% and below prior year of 4,569 by 383 or 8.37%.
- Adjusted admissions YTD of 1,392 were above budget of 1,371 by 21 or 1.53% and above prior year of 1,351 by 40 or 2.97%.

- Average length of stay (excluding newborns) for the hospital YTD of 3.55 was below budget of 3.91 by 9.31% and below prior year of 4.20 by 15.59%.
- Medicare case mix index of 1.60 was above prior year of 1.25. Overall case mix index of 1.05 was below prior year of 1.09.
- Emergency room admissions YTD of 348 were above budget of 318 by 30 or 9.43% and above prior year of 318 by 30 or 9.43%.
- Emergency room visits YTD of 6,036 were above budget of 5,888 by 148 or 2.51% and above prior year of 5,888 by 148 or 2.51%.
- Outpatient visits YTD of 1,548 were below budget of 2,110 by 562 or 26.64% and below prior year of 2,100 also by 562 or 26.64%.

#### Primary Care Clinics

- Total medical clinic visits in all adult and pediatric clinics of 24,510 were below budget of 25,035 by 525 or 2.1% and below prior year of 24,601 by 91 or 0.4%.
- Total dental visits of 6,513 were below budget of 7,945 by 1,432 or 18.0% and below prior year of 8,297 by 1,784 or 21.5%.
- Suboxone clinic visits of 872 were above budget of 824 by 48 or 5.8% and above prior year of 684 by 188 or 27.5%.
- Mobile van visits of 544 were above budget of 520 by 24 or 4.6%.

#### **Revenue Analysis**

##### General Fund

- Total revenue in the General Fund YTD of \$109.5M was below budget of \$111.1M by \$1.6M or 1.5% and above prior year of \$36.0M by \$73.6M or 205.1%. Negative revenue variances are in ad valorem taxes (\$2.7M), patient revenue (\$133k), and grants (\$32k). Negative ad valorem taxes of (\$2.7M) was primarily a result of less county residents taking advantage of tax discount resulting in less ad valorem tax revenue. Aeromed YTD net patient revenue of \$667k was below budget of \$800k by \$133k or 16.6% due to increased bad debt in self pay as well as reduced volume. Pharmacy Ryan White grant of \$24k was below budget of \$56k by \$32k or 56.7% and above prior year of \$20k by \$5k or 23.0%.

##### Healey Center

- Gross revenue of \$3.29M was in line with budget with a slight variance of \$6k or 0.2% and below prior year of \$3.3M by \$34k or 1.0%.
- Net patient revenue of \$2.5M was over budget of \$2.4M by \$83k or 3.5% and above prior year of \$2.2M by \$314k or 14.4%.
- Charity care was over budget by \$75k or 9.1%.



- Collection percentage of 75.85% exceeded budget of 73.18% due to an increase in Medicaid per diem rate.

#### Lakeside Medical Center

- Lakeside Medical Center YTD gross patient revenue of \$33.0M was above budget of \$32.6M by \$384k or 1.2% and above prior year of \$32.1M by \$956k or 3.0%. Although Adjusted Patient Days (APD) were down by 383 YTD resulting in a \$2.7M negative volume variance, the gross revenue per Adjusted Patient Day was higher than budgeted, creating a positive rate variance of \$3.1M.
- Net patient revenue YTD of \$6.9M was below budget of \$7.1M by \$244k or 3.4% and above prior year of \$6.4M by \$492k or 7.7%. The major factor affecting net revenue was charity care in December, which exceeded budget by \$216k.

#### Primary Care Clinics

- Medical Clinic gross patient revenue YTD of \$4.5M was below budget of \$4.6M by \$75k or 1.6% and above prior year of \$4.3M by \$220k or 5.1%.
- Medical Clinic net patient revenue YTD of \$1.9M was above budget of \$1.7M by \$194k or 11.2% and below prior year of \$2.3M by \$409k or 17.5%.
- Medical Clinic net patient revenue per visit YTD was \$78.6 compared to budget of \$69.2 and prior year of \$95.0.
- Dental Clinic gross patient revenue of \$926k was below budget of \$1.0M by \$77k or 7.7% and below prior year of \$973k by \$47k or 4.9%.
- Dental Clinic net patient revenue of \$564k was below budget of \$551 by \$13k or 2.3% and below prior year of \$957k by \$393k or 41.1%.
- Dental Clinic net patient revenue per visit was \$86.6 compared to budget of \$84.6 and prior year of \$115.4.
- Grant revenue of \$1.9M was below budget of \$2.3M by \$393k or 17.4% and above prior year of \$1.8M by \$109k or 6.2%. This is due to the delayed relocation of the Belle Glade clinic to Lakeside Medical Center, the clinics were unable to recognize HRSA grant funding for construction at the site.
- Other revenue of \$38k is below budget of \$47k by \$9k or 19.4% due to less than anticipated EHR incentive.

## **Expenses Analysis**

### General Fund

- Total YTD operating expenses of \$31.6M were below budget of \$34.2M by \$2.6M or 7.5% and above prior year of \$30.8M by \$739k or 2.4%. Notable favorable variances includes sponsored programs (\$766k), purchased services (\$663k), salaries and wages (\$389k), other expense (\$245k), repairs and maintenance (\$237k), drugs (\$212), and benefits (\$210k). Sponsored programs grant will be funded starting January 2019. Salaries and wages as well as benefits are positive to budget due to unfilled budgeted positions. Purchased services as well as repair maintenance will realize savings until system upgrades are implemented later in the fiscal year.

### Healey Center

- Total operating expenses YTD of \$4.5M were above budget of \$4.6M by \$74k or 1.6% and above prior year of \$4.3M by \$179k or 4.1%. Notable favorable variances are in repairs and maintenance (\$22k), benefits (\$16k) and purchased services (\$14k). Notable unfavorable variance in other supplies (\$7k) due to the timing of purchase for patient supplies.

### Lakeside Medical Center

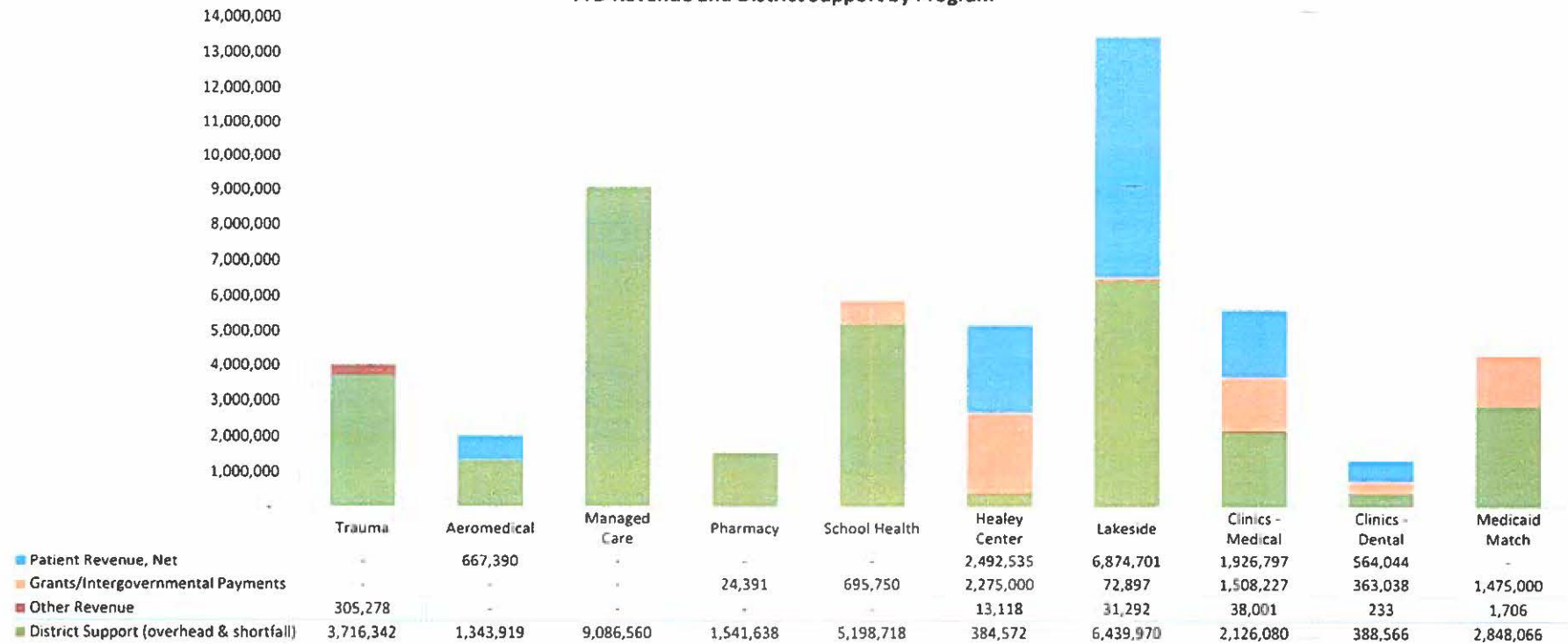
- Lakeside operating expenses YTD of \$11.5M were below budget of \$11.4M by \$53k or .5% and above prior year of \$9.7M by \$1.8M or 19.0%. Significant favorable variances are salaries and wages (\$220k), benefits (\$63k), utilities (\$58k), drugs (\$51k), and other supplies (\$49k). An unfavorable variance of \$496k in contracted physician expense is due to continuing Locums Tenens services.

### Primary Care Clinics

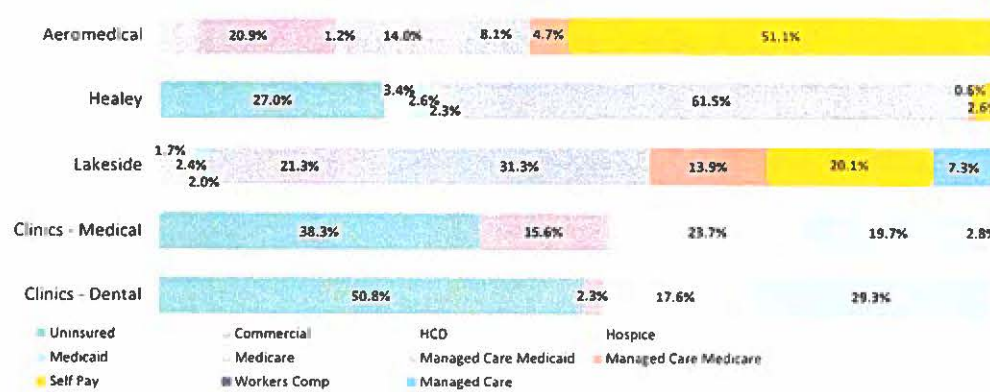
- Medical Clinic operating expenses of \$4.8M were below budget of \$5.1M by \$202k or 4.0% and above prior year \$4.3M by \$410k or 9.4%. Notable favorable variances are in benefits (\$118k), other supplies (\$47k), and other expense (\$41k).
- Dental Clinic operating expenses of \$1.1M were below budget of \$1.2M by \$83k or 7.0% and above prior year of \$1.0M by \$64k or 6.2%. Most of this positive variance relates to medical supplies (\$25k), other supplies (\$16k), benefits (\$15k), and purchased services (\$11k).

## Program Dashboard - YTD December 2018

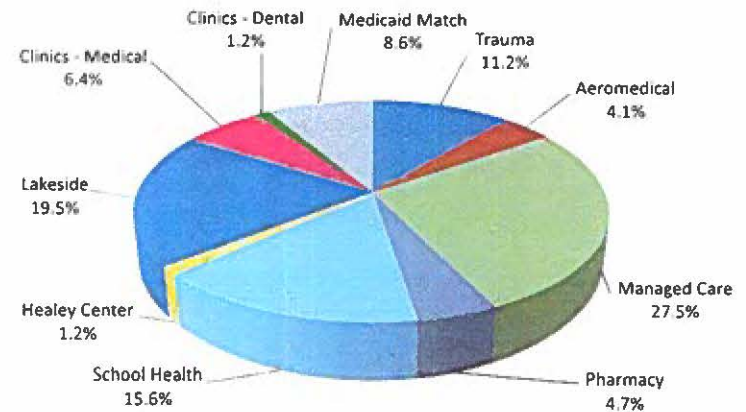
YTD Revenue and District Support by Program



YTD Payor Mix by Volume

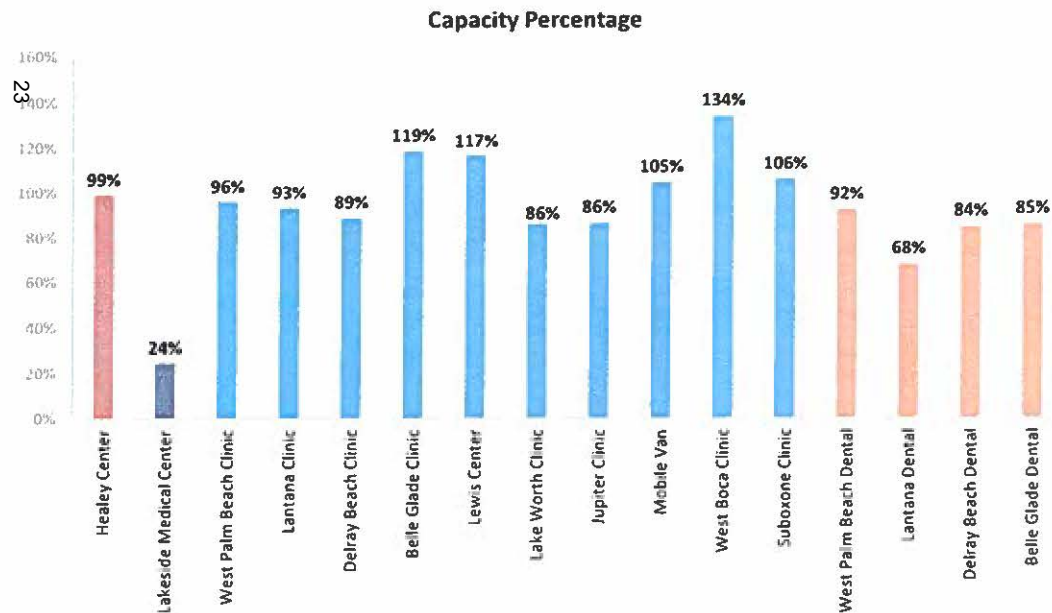
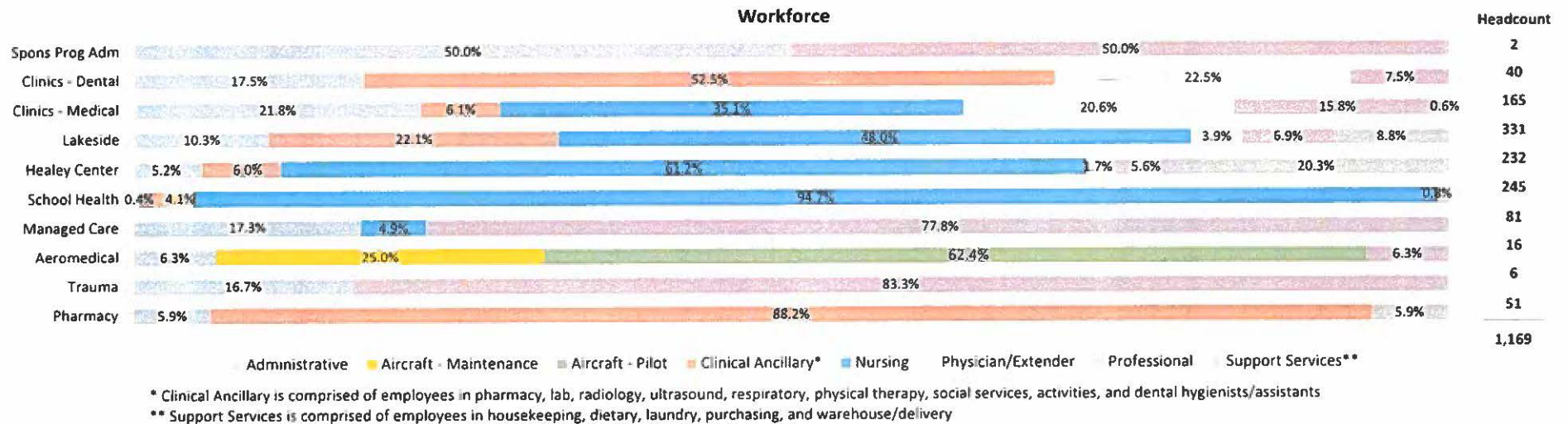


District Support (overhead and shortfall)

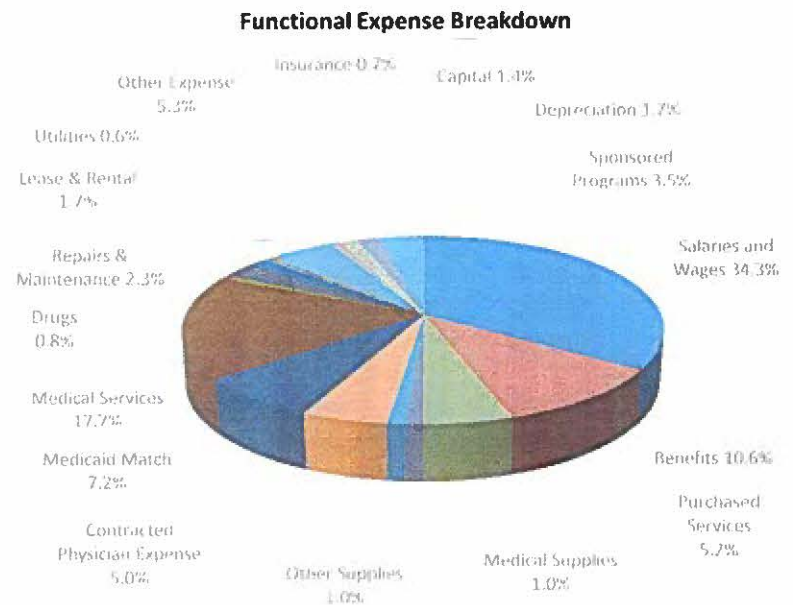




# Program Dashboard - YTD December 2018



Healey Center and Lakeside Medical Center capacity percentages reflect the year-to-date average daily census. Primary Care and Dental Clinic capacity percentages represent the number of completed visits compared to the budgeted number of visits at each location.



# Revenues & Expenses - Combined All Funds (Functional)

FOR THE THIRD MONTH ENDED DECEMBER 31, 2018

Current Month									
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance
\$ 83,120,459	\$ 88,957,133	\$ (5,836,664)	(6.6%)	\$ 11,072,500	\$ 72,047,959	650.7%	\$ 105,029,529	\$ 107,776,303	\$ (2,746,774)
4,618,821	4,091,029	527,792	12.9%	4,275,061	343,760	8.0%	12,525,467	12,613,253	(87,786)
1,481,917	1,481,917	-	0.0%	1,481,917	-	0.0%	4,445,750	4,445,750	(0)
720,011	773,007	(52,996)	(6.9%)	653,801	66,111	10.1%	1,968,554	2,320,827	(352,273)
297,541	223,338	74,203	33.2%	305,442	(7,900)	(2.6%)	856,232	670,015	186,217
641,266	(86,815)	728,081	(838.7%)	(166,674)	807,940	14.0%	746,971	(260,444)	1,007,415
1,256,166	1,198,650	57,516	4.8%	1,101,929	154,236	14.0%	1,753,520	1,652,542	100,979
\$ 92,136,181	\$ 96,638,249	\$ (4,502,068)	(4.7%)	\$ 18,723,975	\$ 73,412,206	392.1%	\$ 127,326,024	\$ 129,218,245	\$ (1,892,221)
Expenditures:									
6,641,819	6,972,810	(330,992)	4.7%	6,099,878	(541,941)	(8.9%)	20,443,707	21,073,638	(629,931)
1,919,451	2,231,287	(311,836)	14.0%	2,072,164	152,714	7.4%	6,313,432	6,736,701	(423,268)
1,007,794	1,276,098	(268,305)	21.0%	817,520	(190,274)	(23.3%)	3,093,040	3,772,297	(679,257)
234,933	186,322	48,610	(26.1%)	219,161	(15,771)	(7.2%)	584,246	571,827	12,419
272,515	294,023	(21,508)	7.3%	312,575	40,061	12.8%	621,299	886,019	(264,720)
1,198,192	666,645	(531,546)	(79.7%)	567,753	(630,439)	(111.0%)	2,972,227	2,478,862	(493,365)
1,441,591	1,441,591	-	0.0%	1,415,952	(25,639)	(1.8%)	4,324,772	4,324,772	-
3,424,730	3,410,080	14,650	(0.4%)	3,662,654	237,924	6.5%	10,570,763	10,227,948	(342,814)
133,565	242,736	(109,170)	45.0%	283,818	150,253	52.9%	449,181	737,652	(288,471)
550,067	524,037	(26,030)	(5.0%)	353,126	(196,941)	(55.8%)	1,368,977	1,597,541	(228,564)
348,280	361,248	(12,968)	3.6%	298,413	(49,868)	(16.7%)	992,046	1,083,745	(91,699)
127,804	152,642	(24,838)	16.3%	120,476	(7,328)	(6.1%)	363,185	413,975	(50,791)
2,046,271	2,202,560	(256,290)	11.1%	2,049,927	3,657	0.2%	3,164,732	3,475,695	(310,963)
131,719	162,773	(31,054)	19.1%	139,517	7,798	5.6%	409,744	490,028	(80,285)
705,594	960,833	(255,239)	26.6%	460,291	(245,303)	(53.3%)	2,116,782	2,882,500	(765,718)
20,184,322	21,185,685	(1,001,363)	4.7%	18,873,226	(1,311,096)	(6.9%)	57,788,131	60,753,200	(2,965,069)
\$ 71,951,859	\$ 75,452,564	\$ (3,500,705)	(4.6%)	\$ (149,251)	\$ 72,101,110	(48,308.7%)	\$ 69,537,892	\$ 68,465,045	\$ 1,072,847
330,134	384,559	(54,424)	14.2%	365,852	35,718	9.8%	1,034,402	1,155,108	(120,706)
20,514,456	21,570,244	(1,055,787)	4.9%	19,239,078	(1,275,378)	(6.6%)	58,822,533	61,908,307	(3,085,774)
\$ 71,621,725	\$ 75,068,005	\$ (3,446,281)	(4.6%)	\$ (515,103)	\$ 72,136,828	(14,004.4%)	\$ 68,503,491	\$ 67,309,938	\$ 1,193,553
856,336	1,661,386	(805,051)	48.5%	315,556	(540,779)	(171.4%)	857,030	4,984,159	(4,127,129)
\$ 70,765,389	\$ 73,406,619	\$ (2,641,230)	(3.6%)	\$ (830,659)	\$ 71,596,048	(8,619.2%)	\$ 67,646,460	\$ 62,325,778	\$ 5,320,682
RESERVES ADDED (USED)									
\$ 70,765,389	\$ 73,406,619	\$ (2,641,230)	(3.6%)	\$ (830,659)	\$ 71,596,048	(8,619.2%)	\$ 67,646,460	\$ 62,325,778	\$ 5,320,682
856,336	1,661,386	(805,051)	48.5%	315,556	(540,779)	(171.4%)	857,030	4,984,159	(4,127,129)
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330,134	384,559	(54,424)	14.2%	365,852	35,718	9.8%	1,034,402	1,155,108	(120,706)
20,514,456	21,570,244	(1,055,787)	4.9%	19,239,078	(1,275,378)	(6.6%)	58,822,533	61,908,307	(3,085,774)
\$ 71,621,725	\$ 75,068,005	\$ (3,446,281)	(4.6%)	\$ (515,103)	\$ 72,136,828	(14,004.4%)	\$ 68,503,491	\$ 67,309,938	\$ 1,193,553
856,336	1,661,386	(805,051)	48.5%	315,556	(540,779)	(171.4%)	857,030	4,984,159	(4,127,129)
\$ 70,765,389	\$ 73,406,619	\$ (2,641,230)	(3.6%)	\$ (830,659)	\$ 71,596,048	(8,619.2%)	\$ 67,646,460	\$ 62,325,778	\$ 5,320,682

Note: Excludes Interfund Transfers



## Revenues and Expenses by Fund YTD

FOR THE THIRD MONTH ENDED DECEMBER 31, 2018

	General Fund	Healey Center	Lakeside Medical	Healthy Palm Beaches	Primary Care Clinics	Medicaid Match	Capital Funds	Total
<b>Revenues:</b>								
Ad Valorem Taxes	\$ 105,029,529	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 105,029,529
Premiums	-	-	-	-	-	-	-	-
Patient Revenue, Net	667,390	2,492,535	6,874,701	-	2,490,841	-	-	12,525,467
Intergovernmental Revenue	695,750	2,275,000	-	-	-	1,475,000	-	4,445,750
Grants	24,391	-	72,897	-	1,871,266	-	-	1,968,554
Interest Earnings	663,062	-	-	-	-	-	-	663,062
Unrealized Gain/(Loss)-Investments	746,971	-	-	-	-	-	-	746,971
Other Revenue	1,699,500	13,118	31,292	14,952	38,234	1,706	140,101	1,938,903
<b>Total Revenues</b>	<b>\$ 109,526,593</b>	<b>\$ 4,780,653</b>	<b>\$ 6,978,891</b>	<b>\$ 14,952</b>	<b>\$ 4,400,340</b>	<b>\$ 1,476,706</b>	<b>\$ 140,101</b>	<b>\$ 127,318,236</b>
<b>Expenditures:</b>								
Salaries and Wages	9,198,237	2,640,795	4,709,779	-	3,894,897	-	-	20,443,707
Benefits	3,060,121	996,039	1,280,701	-	976,571	-	-	6,313,432
Purchased Services	1,861,362	199,823	841,494	5,950	184,412	-	-	3,093,040
Medical Supplies	47,808	125,879	326,854	-	83,706	-	-	584,246
Other Supplies	150,399	208,962	221,170	-	40,767	-	-	621,299
Contracted Physician Expense	87,500	3,414	2,881,313	-	-	-	-	2,972,227
Medicaid Match	-	-	-	-	-	4,324,772	-	4,324,772
Medical Services	10,480,708	12,788	-	(225)	77,492	-	-	10,570,763
Drugs	62,547	86,975	178,442	-	121,217	-	-	449,181
Repairs & Maintenance	746,344	76,893	447,153	-	98,587	-	-	1,368,977
Lease & Rental	479,123	4,936	189,696	-	318,291	-	-	992,046
Utilities	33,343	104,776	208,626	-	16,439	-	-	363,185
Other Expense	2,902,684	40,316	180,000	2,101	39,632	-	-	3,164,732
Insurance	355,975	14,320	29,794	2,890	6,764	-	-	409,744
Sponsored Programs	2,116,782	-	-	-	-	-	-	2,116,782
<b>Total Operational Expenditures</b>	<b>31,582,933</b>	<b>4,515,916</b>	<b>11,495,021</b>	<b>10,716</b>	<b>5,858,775</b>	<b>4,324,772</b>	<b>-</b>	<b>57,788,131</b>
<b>Net Performance before Depreciation &amp; Overhead Allocations</b>	<b>\$ 77,943,660</b>	<b>\$ 264,737</b>	<b>\$ (4,516,130)</b>	<b>\$ 4,236</b>	<b>\$ (1,458,434)</b>	<b>\$ (2,848,066)</b>	<b>\$ 140,101</b>	<b>\$ 69,530,104</b>
<b>Budget</b>	<b>\$ 76,993,668</b>	<b>\$ 107,533</b>	<b>\$ (4,214,988)</b>	<b>\$ 1,946</b>	<b>\$ (1,640,272)</b>	<b>\$ (2,848,529)</b>	<b>\$ 65,687</b>	<b>\$ 68,465,045</b>
<b>Prior Year: Net Performance before Depreciation &amp; Overhead Allocations</b>	<b>\$ 5,053,204</b>	<b>\$ 124,223</b>	<b>\$ (3,194,928)</b>	<b>\$ 49,294</b>	<b>\$ (214,997)</b>	<b>\$ (2,771,563)</b>	<b>\$ 62,973</b>	<b>\$ (891,795)</b>

# Combined Governmental Funds Statement of Net Position

As of December 31, 2018

	General Fund December 2018	General Fund November 2018	Medicaid Match December 2018	Medicaid Match November 2018	Capital Projects December 2018	Capital Projects November 2018	Governmental Funds December 2018	Governmental Funds November 2018
<b>Assets</b>								
Cash and Cash Equivalents	\$ 79,545,119	\$ 8,663,014	\$ 117,376	\$ 384,042	\$ 22,517,622	\$ 23,351,286	\$ 102,180,116	\$ 32,398,342
Restricted Cash	-	-	-	-	-	-	-	-
Investments	136,962,946	136,002,759	-	-	-	-	136,962,946	136,002,759
Notes Receivable	-	-	-	-	-	-	-	-
Accounts Receivable, net	1,276,043	1,187,684	-	-	-	-	1,276,043	1,187,684
Due From Other Funds	-	-	-	-	-	-	-	-
Due From Other Governments	25,373,123	109,160,363	491,667	225,000	-	-	25,864,790	109,385,363
Inventory	163,539	163,539	-	-	-	-	163,539	163,539
Other Current Assets	2,794,887	2,614,508	-	-	-	-	2,794,887	2,614,508
<b>Total Assets</b>	<b>\$ 246,115,656</b>	<b>\$ 257,791,867</b>	<b>\$ 609,042</b>	<b>\$ 609,042</b>	<b>\$ 22,517,622</b>	<b>\$ 23,351,286</b>	<b>\$ 269,242,321</b>	<b>\$ 281,752,195</b>
<b>Liabilities</b>								
Accounts Payable	5,401,313	4,734,708	-	-	-	41,365	5,401,313	4,776,073
Medical Benefits Payable	3,573,000	3,458,500	-	-	-	-	3,573,000	3,458,500
Due To Other Funds	-	-	-	-	-	-	-	-
Due To Other Governments	-	-	-	-	-	-	-	-
Deferred Revenue	27,581,971	110,934,346	-	-	-	-	27,581,971	110,934,346
Other Current Liabilities	4,184,162	5,096,138	-	-	-	-	4,184,162	5,096,138
Noncurrent Liabilities	394,551	394,551	-	-	-	-	394,551	394,551
<b>Total Liabilities</b>	<b>41,134,997</b>	<b>124,618,243</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>41,365</b>	<b>41,134,997</b>	<b>124,659,608</b>
<b>Fund Balances</b>								
Nonspendable	2,915,544	2,877,739	-	-	-	-	2,915,544	2,877,739
Assigned to Subsequent Year's Budget	36,700,000	36,700,000	-	-	-	-	36,700,000	36,700,000
Assigned to Capital Projects	-	-	-	-	25,129,755	25,129,755	25,129,755	25,129,755
Assigned to Medicaid Match	-	-	491,667	491,667	-	-	491,667	491,667
Unassigned	96,040,120	95,932,546	117,376	117,376	438,532	438,532	96,596,027	96,488,453
Beginning Fund Balance	135,595,455	135,709,955	609,042	609,042	23,248,133	23,248,133	159,452,630	159,567,130
Revenue Over/(Under) Expenditures	69,385,204	(2,536,332)	-	-	(730,510)	61,788	68,654,694	(2,474,544)
Ending Fund Balance	204,980,659	133,173,624	609,042	609,042	22,517,622	23,309,920	228,107,324	157,092,586
<b>Total Liabilities and Fund Balances</b>	<b>\$ 246,115,656</b>	<b>\$ 257,791,867</b>	<b>\$ 609,042</b>	<b>\$ 609,042</b>	<b>\$ 22,517,622</b>	<b>\$ 23,351,285</b>	<b>\$ 269,242,320</b>	<b>\$ 281,752,193</b>

^ Excludes Interfund Transfers

# Combined Business-Type Funds Statement of Net Position

As of December 31, 2018

	Healey Center December 2018	Healey Center November 2018	Healthy Palm Beaches December 2018	Healthy Palm Beaches November 2018	Lakeside Medical Center December 2018	Lakeside Medical Center November 2018	Primary Care Clinics December 2018	Primary Care Clinics November 2018	Business-Type Funds December 2018	Business-Type Funds November 2018
<b>Assets</b>										
Cash and Cash Equivalents	\$ 1,181,363	\$ 912,415	\$ 1,423,453	\$ 1,419,750	\$ 4,710,298	\$ 4,602,384	\$ 658,577	\$ 1,168,442	\$ 7,973,690	\$ 8,102,992
Restricted Cash	8,855	8,855	1,500,000	1,500,000	-	-	-	-	1,508,855	1,508,855
Accounts Receivable, net	930,986	871,711	-	-	3,051,013	2,850,382	1,253,874	1,077,211	5,235,873	4,799,304
Due From Other Funds	-	-	-	-	-	-	-	-	-	-
Due From Other Governments	758,333	1,025,000	-	-	518,211	585,715	1,845,151	1,178,476	3,121,695	2,789,192
Inventory	-	-	-	-	736,634	760,010	-	-	736,634	760,010
Other Current Assets	47,549	63,424	47,969	47,975	288,580	329,934	181,609	234,924	565,708	676,257
Net Investment in Capital Assets	17,885,197	17,940,003	-	-	38,130,608	38,354,028	642,903	648,061	56,658,708	56,942,092
<b>Total Assets</b>	<b>\$ 20,812,283</b>	<b>\$ 20,821,408</b>	<b>\$ 2,971,422</b>	<b>\$ 2,967,726</b>	<b>\$ 47,435,345</b>	<b>\$ 47,482,453</b>	<b>\$ 4,582,114</b>	<b>\$ 4,307,115</b>	<b>\$ 75,801,164</b>	<b>\$ 75,578,702</b>
<b>Deferred Outflows of Resources</b>										
Deferred Outflows Related to Pensions	\$ 114,863	\$ 114,863	-	-	-	-	-	-	\$ 114,863	\$ 114,863
<b>Liabilities</b>										
Accounts Payable	239,544	229,767	5,950	5,950	2,195,676	1,907,889	437,224	435,523	2,878,394	2,579,130
Medical Benefits Payable	-	-	-	-	-	-	-	-	-	-
Due to Other Funds	-	-	-	-	-	-	-	-	-	-
Due to Other Governments	29,545	29,730	-	-	2,317,805	2,317,805	-	-	2,347,350	2,347,535
Deferred Revenue	-	-	-	-	16,225	16,225	81,055	94,570	97,280	110,795
Other Current Liabilities	280,703	272,158	3,471	3,471	1,233,808	1,042,550	685,646	523,678	2,203,628	1,841,858
Noncurrent Liabilities	1,237,335	1,161,431	-	-	2,121,061	1,917,955	749,580	728,163	4,107,977	3,807,549
<b>Total Liabilities</b>	<b>\$ 1,787,127</b>	<b>\$ 1,693,086</b>	<b>\$ 9,421</b>	<b>\$ 9,421</b>	<b>\$ 7,884,575</b>	<b>\$ 7,202,424</b>	<b>\$ 1,953,505</b>	<b>\$ 1,781,935</b>	<b>\$ 11,634,629</b>	<b>\$ 10,686,867</b>
<b>Deferred Inflows of Resources</b>										
Deferred Inflows	\$ 115,064	\$ 113,432	-	-	2,357	-	612	-	\$ 118,033	\$ 113,432
<b>Net Position</b>										
Net Investment in Capital Assets	17,885,197	17,940,003	-	-	38,130,608	38,354,028	642,903	648,061	56,658,708	56,942,092
Restricted	8,855	8,855	1,500,000	1,500,000	-	-	-	-	1,508,855	1,508,855
Unrestricted	1,130,903	1,180,895	1,462,001	1,458,305	1,417,805	1,926,001	1,985,093	1,877,118	5,995,802	6,442,319
<b>Total Net Position</b>	<b>19,024,955</b>	<b>19,129,753</b>	<b>2,962,001</b>	<b>2,958,305</b>	<b>39,548,413</b>	<b>40,280,029</b>	<b>2,627,997</b>	<b>2,525,180</b>	<b>64,163,365</b>	<b>64,893,266</b>
<b>Total Net Position</b>	<b>\$ 20,927,146</b>	<b>\$ 20,936,271</b>	<b>\$ 2,971,422</b>	<b>\$ 2,967,726</b>	<b>\$ 47,435,345.17</b>	<b>\$ 47,482,453</b>	<b>\$ 4,582,113.92</b>	<b>\$ 4,307,115</b>	<b>\$ 75,916,027</b>	<b>\$ 75,693,565</b>

# **SUPPLEMENTAL INFORMATION**

## **GENERAL FUND**

# General Fund Revenue & Expenditures

FOR THE THIRD MONTH ENDED DECEMBER 31, 2018

Current Month								Fiscal Year To Date							
Actual	Budget	Variance	%	Prior Year	Variance	%		Actual	Budget	Variance	%	Prior Year	Variance	%	
\$ 83,120,459	\$ 88,957,123	\$ (5,836,664)	(6.6%)	\$ 11,072,500	\$ 72,047,959	650.7%	Ad Valorem Taxes	\$ 105,029,529	\$ 107,776,303	\$ (2,746,774)	(2.5%)	\$ 33,217,500	\$ 71,812,029	216.2%	
-	-	-	0.0%	-	-	0.0%	Premiums	-	-	-	0.0%	-	-	0.0%	
356,622	247,472	109,149	44.1%	(69,950)	426,572	(609.8%)	Patient Revenue, Net	667,390	800,645	(133,256)	(16.6%)	642,637	24,752	3.9%	
231,917	231,917	-	0.0%	231,917	-	0.0%	Intergovernmental Revenue	695,750	695,750	(0)	(0.0%)	695,750	(0)	(0.0%)	
11,753	18,185	(6,432)	(35.4%)	6,294	5,459	86.7%	Grants	24,391	56,361	(31,970)	(56.7%)	19,827	4,564	23.0%	
190,989	196,900	(5,911)	(3.0%)	269,743	(78,754)	(29.2%)	Interest Earnings	663,062	590,700	72,362	12.3%	564,513	98,548	17.5%	
641,266	(86,815)	728,081	(838.7%)	(166,674)	807,940	(484.7%)	Unrealized Gain/(Loss)-Investments	746,971	(260,444)	1,007,415	(386.8%)	(636,859)	1,383,830	(217.3%)	
1,224,894	1,143,957	80,937	7.1%	988,658	236,235	23.9%	Other Revenue	1,699,500	1,488,462	211,038	14.2%	1,393,558	305,942	22.0%	
<b>\$ 85,777,900</b>	<b>\$ 90,708,739</b>	<b>\$ (4,930,839)</b>	<b>(5.4%)</b>	<b>\$ 12,332,488</b>	<b>\$ 73,445,412</b>	<b>595.5%</b>	<b>Total Revenues</b>	<b>\$ 109,526,593</b>	<b>\$ 111,147,777</b>	<b>\$ (1,621,184)</b>	<b>(1.5%)</b>	<b>\$ 35,896,926</b>	<b>\$ 73,629,666</b>	<b>205.1%</b>	
<b>Expenditures:</b>															
2,983,671	3,158,137	174,466	5.5%	2,646,364	(337,307)	(12.7%)	Salaries and Wages	9,198,237	9,587,731	389,495	4.1%	8,793,257	(404,979)	(4.6%)	
904,269	1,081,198	176,929	16.4%	1,028,818	124,550	12.1%	Benefits	3,060,121	3,270,159	210,038	6.4%	2,960,035	(100,086)	(3.4%)	
566,029	841,607	275,577	32.7%	456,268	(109,761)	(24.1%)	Purchased Services	1,861,362	2,524,820	663,458	26.3%	1,260,251	(601,111)	(47.7%)	
39,275	7,517	(31,758)	(422.5%)	3,385	(35,890)	(1,060.2%)	Medical Supplies	47,808	22,550	(25,258)	(112.0%)	7,356	(40,452)	(549.9%)	
84,704	103,664	18,960	18.3%	172,844	88,140	51.0%	Other Supplies	150,399	310,992	160,593	51.6%	265,142	114,743	43.3%	
29,167	29,167	0	0.0%	29,167	-	0.0%	Contracted Physician Expense	87,500	87,500	0	0.0%	87,500	-	0.0%	
3,401,981	3,348,921	(53,060)	(1.6%)	3,658,337	256,356	7.0%	Medical Services	10,480,708	10,046,762	(433,945)	(4.3%)	10,907,123	426,415	3.9%	
18,181	91,542	73,361	80.1%	127,274	109,093	85.7%	Drugs	62,547	274,626	212,080	77.2%	264,273	201,727	76.3%	
291,127	327,889	36,762	11.2%	264,256	(26,871)	(10.2%)	Repairs & Maintenance	746,344	983,668	237,324	24.1%	664,788	(81,557)	(12.3%)	
177,188	186,299	9,112	4.9%	151,780	(25,408)	(16.7%)	Lease & Rental	479,123	558,898	79,775	14.3%	549,894	70,771	12.9%	
9,852	8,613	(1,239)	(14.4%)	5,384	(4,469)	(83.0%)	Utilities	33,343	25,839	(7,504)	(29.0%)	17,372	(15,972)	(91.9%)	
1,935,661	2,126,589	190,927	9.0%	2,064,953	129,291	6.3%	Other Expense	2,902,684	3,147,701	245,017	7.8%	2,925,214	22,530	0.8%	
112,469	143,454	30,985	21.6%	121,411	8,942	7.4%	Insurance	355,975	430,361	74,385	17.3%	374,310	18,335	4.9%	
705,594	960,833	255,239	26.6%	460,291	(245,303)	(53.3%)	Sponsored Programs	2,116,782	2,882,500	765,718	26.6%	1,767,208	(349,574)	(19.8%)	
11,259,166	12,415,429	1,156,262	9.3%	11,190,531	(68,635)	(0.6%)	Total Operational Expenditures	31,582,933	34,154,108	2,571,176	7.5%	30,843,722	(739,211)	(2.4%)	
<b>Net Performance before Overhead</b>															
74,518,733	78,293,310	(3,774,576)	(4.8%)	1,141,956	73,376,777	6,425.5%	Allocations	77,943,660	76,993,668	949,992	1.2%	5,053,204	72,890,456	1,442.5%	
(893,893)	(1,018,405)	124,512	(12.2%)	(785,587)	108,307	(13.8%)	Overhead Allocations	(2,594,959)	(3,060,979)	466,019	(15.2%)	(2,415,893)	179,067	(7.4%)	
<b>10,365,273</b>	<b>11,397,023</b>	<b>1,031,750</b>	<b>9.1%</b>	<b>10,404,945</b>	<b>39,672</b>	<b>0.4%</b>	<b>Total Expenses</b>	<b>28,987,973</b>	<b>31,093,130</b>	<b>2,105,157</b>	<b>6.8%</b>	<b>28,427,829</b>	<b>(560,144)</b>	<b>(2.0%)</b>	
<b>\$ 75,412,627</b>	<b>\$ 79,311,715</b>	<b>\$ (3,899,089)</b>	<b>(4.9%)</b>	<b>\$ 1,927,543</b>	<b>\$ 73,485,084</b>	<b>3,812.4%</b>	<b>Net Margin</b>	<b>\$ 80,538,619</b>	<b>\$ 80,054,647</b>	<b>\$ 483,973</b>	<b>0.6%</b>	<b>\$ 7,469,097</b>	<b>\$ 73,069,522</b>	<b>978.3%</b>	
-	-	-	0.0%	-	-	0.0%	Capital	-	-	-	0.0%	-	-	0.0%	
<b>\$ (3,491,091)</b>	<b>\$ (4,332,010)</b>	<b>\$ 840,919</b>	<b>(19.4%)</b>	<b>\$ (923,609)</b>	<b>\$ (2,567,482)</b>	<b>278.0%</b>	<b>General Fund Support/Transfer In(Out)</b>	<b>\$ (11,153,416)</b>	<b>\$ (12,996,029)</b>	<b>\$ 1,842,613</b>	<b>(14.2%)</b>	<b>\$ (2,771,563)</b>	<b>\$ (8,381,853)</b>	<b>302.4%</b>	

# Trauma Statement of Revenues and Expenditures

FOR THE THIRD MONTH ENDED DECEMBER 31, 2018

Current Month				Prior Year			
Actual	Budget	Variance	%	Actual	Budget	Variance	%
\$ 155,222	\$ 32,000	\$ 123,222	385.1%	\$ 92,804	\$ 92,804	\$ -	0.0%
155,222	32,000	123,222	385.1%	92,804	92,804	-	0.0%
Total Revenue				Total Revenue			
67.3%	67.3%	0.0%	0.0%	67.3%	67.3%	0.0%	0.0%
Direct Operational Expenses:				Direct Operational Expenses:			
39,859	41,015	1,156	2.8%	38,723	41,351	2,628	6.3%
11,694	13,036	1,342	10.3%	12,847	13,153	306	2.3%
1,164,575	1,183,338	18,763	1.6%	1,321,555	1,369,950	48,395	3.5%
15	42	27	64.2%	53	99	46	86.9%
29,167	29,167	0	0.0%	29,167	29,167	0	0.0%
792	792	-	0.0%	708	708	-	0.0%
-	-	-	0.0%	-	-	-	0.0%
80,653	100,745	20,092	19.9%	96,969	16,316	16,878	16.8%
1,327,181	1,368,993	41,812	3.1%	1,500,513	173,332	173,332	11.6%
Total Operational Expenses				Total Operational Expenses			
(1,171,959)	(1,336,993)	165,034	(12.3%)	(1,407,710)	235,751	(16.7%)	(16.7%)
Net Performance before Overhead				Net Performance before Overhead			
228	352	124	35.1%	375	147	228	39.2%
-	-	-	0.0%	-	-	-	0.0%
142	154	12	7.9%	(142)	0.0%	142	0.0%
2,696	3,472	776	22.4%	5,386	8,082	2,696	66.6%
889	850	39	4.6%	730	730	0	0.0%
585	850	265	30.1%	144	19,999	19,855	19.8%
224	352	128	36.4%	143	39,091	38,948	39.0%
168	234	66	28.2%	109	54,000	53,891	54.0%
100	324	224	69.2%	82	45,100	44,918	45.1%
33	40	6	15.4%	32	106	74	10.6%
626	339	287	35.1%	617	2,202	1,585	24.0%
231	364	133	36.6%	202	13,900	13,698	13.9%
2,693	2,758	65	2.4%	2,222	21,200	18,978	21.2%
-	-	-	0.0%	66	100,000	99,934	100.0%
60	75	16	20.7%	38	57,800	57,762	57.8%
8,650	10,627	1,977	18.6%	5,161	13,811	8,650	37.4%
Total Overhead Allocations				Total Overhead Allocations			
1,335,831	1,379,620	43,789	3.2%	1,514,325	178,494	11.8%	11.8%
(1,180,609)	(1,347,620)	167,011	(12.4%)	(1,421,521)	240,912	(16.9%)	(16.9%)
Net Margin				Net Margin			
\$ (3,716,342)	\$ (4,048,606)	\$ 332,264	(8.2%)	\$ (3,716,342)	\$ (4,048,606)	\$ 332,264	(8.2%)

Fiscal Year To Date				Prior Year			
Actual	Budget	Variance	%	Actual	Budget	Variance	%
\$ 305,278	\$ 96,000	\$ 209,278	218.0%	\$ 92,804	\$ 92,804	\$ -	0.0%
305,278	96,000	209,278	218.0%	92,804	92,804	-	0.0%
Total Revenue				Total Revenue			
67.3%	67.3%	0.0%	0.0%	67.3%	67.3%	0.0%	0.0%
Direct Operational Expenses:				Direct Operational Expenses:			
123,421	127,143	3,722	2.9%	120,371	120,371	0	0.0%
38,138	39,854	1,716	4.3%	39,603	39,603	0	0.0%
3,493,890	3,550,013	56,122	1.6%	3,955,725	461,835	61,835	13.3%
99	125	26	20.7%	60	60	0	0.0%
87,500	87,500	0	0.0%	87,500	87,500	0	0.0%
2,375	2,375	-	0.0%	2,125	2,125	-	0.0%
4,072	3,479	(593)	(17.0%)	1,669	304,232	302,563	18.5%
246,247	302,235	55,988	18.5%	304,232	304,232	0	0.0%
3,995,742	4,112,724	116,982	2.8%	4,511,285	515,543	57,028	11.4%
Total Operational Expenses				Total Operational Expenses			
(3,690,464)	(4,016,724)	326,260	(8.8%)	(4,418,481)	728,017	(16.5%)	(16.5%)
Net Performance before Overhead				Net Performance before Overhead			
931	1,055	124	11.8%	823	823	0	0.0%
425	461	36	7.9%	0	0	0	0.0%
8,258	10,415	2,158	20.7%	24,328	16,070	8,258	66.1%
1,999	2,668	669	3.4%	2,120	1,21	999	5.7%
2,547	2,550	3	0.1%	1,796	(751)	2,547	(41.8%)
732	1,057	325	30.7%	726	(6)	732	(0.9%)
527	701	174	24.8%	357	(170)	527	(47.6%)
459	971	512	52.8%	503	44	459	8.8%
6,833	8,273	1,440	17.4%	7,903	1,070	6,833	13.5%
586	1,091	505	46.3%	573	(13)	586	(2.3%)
2,202	2,896	694	24.0%	1,949	(254)	2,202	(13.0%)
106	119	13	10.6%	111	5	106	4.4%
31,882	31,882	0	0.0%	41,641	15,763	25,878	37.9%
4,144,606	4,144,606	0	0.0%	4,144,606	531,305	3,613,301	11.7%
\$ (3,716,342)	\$ (4,048,606)	\$ 332,264	(8.2%)	\$ (3,716,342)	\$ (4,048,606)	\$ 332,264	(8.2%)
Net Margin				Net Margin			
(3,716,342)	(4,048,606)	332,264	(8.2%)	(3,716,342)	(4,048,606)	332,264	(8.2%)

# Aeromedical Statement of Revenues and Expenditures

FOR THE THIRD MONTH ENDED DECEMBER 31, 2018

Current Month							Fiscal Year To Date						
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%
\$ 1,140,291	\$ 1,030,884	\$ 109,407	10.6%	\$ 1,014,080	\$ 126,212	12.4%	\$ 2,941,434	\$ 3,335,214	\$ (393,780)	(11.8%)	\$ 3,446,253	\$ (504,819)	(14.6%)
724,889	473,329	(251,560)	(53.1%)	591,052	(133,837)	(22.6%)	1,497,826	1,531,359	33,533	2.2%	1,660,390	162,565	9.8%
95,885	245,373	149,488	60.9%	368,307	272,422	74.0%	132,685	793,854	661,169	83.3%	1,107,621	974,936	88.0%
(37,106)	64,710	101,816	157.3%	124,670	161,776	129.8%	643,534	209,356	(434,178)	(207.4%)	35,605	(607,929)	(1,707.4%)
783,669	783,412	(257)	(0.0%)	1,084,030	300,361	27.7%	2,274,044	2,534,569	260,525	10.3%	2,803,616	529,571	18.9%
356,622	247,472	109,149	44.1%	(69,950)	426,572	(609.8%)	667,390	800,645	(133,256)	(16.6%)	642,637	24,752	3.9%
31.27%	24.01%			-6.90%			22.69%	24.01%			18.65%		
16	-	16	0.0%	0	15	8,126.3%	16	-	16	0.0%	87	(72)	(82.1%)
356,638	247,473	109,165	44.1%	(69,950)	426,588	(609.8%)	667,405	800,646	(133,240)	(16.6%)	642,724	24,681	3.8%
Total Revenues							Total Revenues						
Direct Operational Expenses:							Direct Operational Expenses:						
148,053	170,337	22,284	13.1%	148,463	409	0.3%	473,816	525,806	51,989	9.9%	486,321	12,505	2.6%
43,647	57,039	13,392	23.5%	51,241	7,594	14.8%	154,465	174,707	20,242	11.6%	159,918	5,453	3.4%
236,803	242,642	5,840	2.4%	204,191	(32,612)	(16.0%)	780,255	727,927	(52,328)	(7.2%)	594,555	(185,700)	(31.2%)
140	1,517	1,377	90.8%	2,951	2,811	95.3%	4,372	4,550	179	3.9%	5,271	899	17.1%
10,416	12,833	2,417	18.8%	8,076	(2,340)	(29.0%)	31,106	38,500	7,394	19.2%	29,417	(1,690)	(5.7%)
74,475	72,194	(2,281)	(3.2%)	95,323	20,847	21.9%	184,110	216,583	32,473	15.0%	234,669	50,559	21.5%
4,222	4,909	687	14.0%	4,177	(44)	(1.1%)	14,589	14,727	139	0.9%	13,674	(914)	(6.7%)
5,090	5,100	10	0.2%	5,090	-	0.0%	15,270	15,300	30	0.2%	15,270	-	0.0%
19,935	23,088	3,154	13.7%	21,705	1,770	8.2%	67,996	75,315	7,319	9.7%	65,792	(2,205)	(3.4%)
(598)	6,597	7,195	109.1%	6,867	7,465	108.7%	13,418	19,790	6,372	32.2%	15,307	1,889	12.3%
542,184	596,257	54,074	9.1%	548,084	5,900	1.1%	1,739,398	1,813,205	73,808	4.1%	1,620,195	(119,203)	(7.4%)
Total Operational Expenses							Total Operational Expenses						
Net Performance before Overhead							Net Performance before Overhead						
(185,546)	(348,785)	163,239	(46.8%)	(618,034)	432,488	(70.0%)	(1,071,992)	(1,012,560)	(59,433)	5.9%	(977,470)	(94,522)	9.7%
Overhead Allocations:							Overhead Allocations:						
2,362	3,929	1,567	39.9%	3,694	1,331	36.0%	9,643	11,576	1,933	16.7%	8,109	(1,534)	(18.9%)
43,445	34,364	(9,081)	(26.4%)	6,928	(36,516)	(527.1%)	108,150	101,251	(6,899)	(6.8%)	26,219	(81,932)	(312.5%)
1,467	1,717	250	14.6%	-	(1,467)	0.0%	4,400	5,059	659	13.0%	1	(4,399)	(311,980.9%)
6,063	7,701	1,638	21.3%	7,193	1,130	15.7%	20,702	22,692	1,990	8.8%	20,894	193	0.9%
2,611	2,766	156	5.6%	2,382	(228)	(9.6%)	7,684	8,151	466	5.7%	5,417	(2,267)	(41.8%)
2,319	3,935	1,616	41.1%	3,616	1,297	35.9%	7,582	11,594	4,012	34.6%	7,151	(431)	(6.0%)
1,738	2,609	871	33.4%	1,074	(664)	(61.9%)	5,454	7,688	2,234	29.1%	3,516	(1,938)	(55.1%)
1,033	3,614	2,581	71.4%	1,789	756	42.3%	4,749	10,649	5,899	55.4%	4,953	204	4.1%
346	441	95	21.6%	315	(31)	(9.9%)	1,097	1,301	204	15.6%	1,092	(5)	(0.4%)
6,483	10,783	4,299	39.9%	6,078	(405)	(6.7%)	22,804	31,770	8,966	28.2%	19,201	(3,603)	(18.8%)
2,388	4,063	1,675	41.2%	1,995	(393)	(19.7%)	6,067	11,971	5,903	49.3%	5,643	(424)	(7.5%)
27,883	30,803	2,919	9.5%	21,894	(5,989)	(27.4%)	70,756	90,758	20,002	22.0%	77,876	7,120	9.1%
616	838	222	26.5%	372	(244)	(65.7%)	2,836	2,470	(367)	(14.8%)	2,557	(279)	(10.9%)
98,754	107,564	8,810	8.2%	57,979	(40,775)	(70.3%)	271,926	316,928	45,002	14.2%	184,540	(87,387)	(47.4%)
640,938	703,821	62,883	8.9%	606,063	(34,875)	(5.8%)	2,011,324	2,130,133	118,809	5.6%	1,804,735	(206,589)	(11.4%)
Total Overhead Allocations							Total Overhead Allocations						
Total Expenses							Total Expenses						
\$ (284,300)	\$ (456,348)	\$ 172,048	(37.7%)	\$ (676,013)	\$ 391,713	(57.9%)	\$ (1,343,919)	\$ (1,329,488)	\$ (14,431)	1.1%	\$ (1,162,010)	\$ (181,909)	15.7%
Net Margin							Net Margin						



# Managed Care Statement of Revenues and Expenditures

FOR THE THIRD MONTH ENDED DECEMBER 31, 2018

Current Month													
Actual	Budget	Variance	%	Prior Year	Variance	%							
\$	\$	\$		\$	\$								
			0.0%			0.0%	Patient Revenue						
			0.0%			0.0%	Total Revenue						
							<i>Direct Operational Expenses:</i>						
364,213	370,319	6,105	1.6%	361,591	(2,622)	(0.7%)	Salaries and Wages						
122,422	135,456	13,034	9.6%	134,879	12,457	9.2%	Benefits						
16,672	190,574	173,902	91.3%	16,242	(430)	(2.6%)	Purchased Services						
2,237,406	2,165,583	(71,822)	(3.3%)	2,336,812	99,406	4.3%	Medical Services						
2,457	3,456	1,000	28.9%	5,510	3,054	55.4%	Other Supplies						
-	-	-	0.0%	-	-	0.0%	Drugs						
23,712	31,264	7,552	24.2%	24,382	670	2.7%	Repairs & Maintenance						
8,833	14,894	6,061	40.7%	14,160	5,327	37.6%	Lease & Rental						
510	525	15	2.9%	591	81	13.7%	Utilities						
(71,809)	14,639	86,448	590.5%	5,558	77,367	1,392.0%	Other Expense						
			0.0%			0.0%	Insurance						
2,704,416	2,926,711	222,295	7.6%	2,899,725	195,309	6.7%	Total Operational Expenses						
							<i>Net Performance before Overhead</i>						
(2,704,416)	(2,926,711)	222,295	(7.6%)	(2,899,725)	195,309	(6.7%)	Allocations						
							<i>Overhead Allocations:</i>						
3,067	4,728	1,662	35.1%	4,107	1,040	25.3%	Risk Mgt						
-	-	-	0.0%	-	-	0.0%	Rev Cycle						
1,904	2,066	162	7.9%	(1,904)		0.0%	Internal Audit						
19,920	25,654	5,734	22.4%	65,368	45,448	69.5%	Palm Springs Facility						
7,870	9,268	1,398	15.1%	7,992	122	1.5%	Administration						
12,405	12,185	(219)	(1.8%)	11,715	(690)	(5.9%)	Human Resources						
3,010	4,735	1,725	36.4%	4,017	1,008	25.1%	Legal						
2,256	3,140	884	28.2%	1,193	(1,063)	(89.1%)	Records						
1,341	4,349	3,009	69.2%	1,988	647	32.6%	Compliance						
450	531	82	15.4%	350	(100)	(28.5%)	Planning/Research						
8,415	12,976	4,560	35.1%	6,753	(1,663)	(24.6%)	Finance						
3,100	4,889	1,789	36.6%	2,216	(884)	(39.9%)	Public Relations						
36,194	37,068	874	2.4%	24,326	(11,868)	(48.8%)	Information Technology						
-	-	-	0.0%	722	722	100.0%	Budget & Decision Support						
800	1,009	209	20.7%	413	(387)	(93.6%)	Corporate Quality						
100,730	122,598	21,869	17.8%	131,159	30,429	23.2%	Total Overhead Allocations						
2,805,146	3,049,309	244,164	8.0%	3,030,884	225,738	7.4%	Total Expenses						
\$ (2,805,146)	\$ (3,049,309)	\$ 244,164	(8.0%)	\$ (3,030,884)	\$ 225,738	(7.4%)	Net Margin						

Fiscal Year To Date													
Actual	Budget	Variance	%	Prior Year	Variance	%							
\$	\$	\$		\$	\$								
			0.0%			0.0%	Patient Revenue						
			0.0%			0.0%	Total Revenue						
							<i>Direct Operational Expenses:</i>						
1,162,521	1,147,915	(14,606)	(1.3%)	1,145,230	(17,291)	(1.5%)	Salaries and Wages						
400,678	412,946	12,269	3.0%	413,481	12,804	3.1%	Benefits						
109,030	571,722	462,692	80.9%	52,352	(56,677)	(108.3%)	Purchased Services						
6,986,818	6,496,750	(490,068)	(7.5%)	6,951,398	(35,420)	(0.5%)	Medical Services						
6,443	10,369	3,926	37.9%	5,017	(1,426)	(28.4%)	Other Supplies						
-	-	-	0.0%	-	-	0.0%	Drugs						
76,952	93,793	16,841	18.0%	62,597	(14,356)	(22.9%)	Repairs & Maintenance						
26,300	44,682	18,382	41.1%	42,480	16,180	38.1%	Lease & Rental						
2,487	1,575	(912)	(57.9%)	1,620	(868)	(53.6%)	Utilities						
15,188	43,916	28,728	65.4%	47,168	31,980	67.8%	Other Expense						
-	-	-	0.0%	-	-	0.0%	Insurance						
8,786,416	8,823,669	37,253	0.4%	8,721,343	(65,073)	(0.7%)	Total Operational Expenses						
							<i>Net Performance before Overhead</i>						
(8,786,416)	(8,823,669)	37,253	(0.4%)	(8,721,343)	(65,073)	(0.7%)	Allocations						
							<i>Overhead Allocations:</i>						
12,517	14,184	1,667	11.8%	9,012	(3,505)	(38.9%)	Risk Mgt						
-	-	-	0.0%	-	-	0.0%	Rev Cycle						
5,712	6,199	487	7.9%	2	(5,710)	(363,712.1%)	Internal Audit						
61,018	76,962	15,944	20.7%	196,760	135,742	69.0%	Palm Springs Facility						
26,872	27,804	932	3.4%	23,215	(3,657)	(15.8%)	Administration						
36,512	36,556	45	0.1%	26,638	(9,873)	(37.1%)	Human Resources						
9,841	14,205	4,364	30.7%	7,945	(1,897)	(23.9%)	Legal						
7,080	9,420	2,340	24.8%	3,906	(3,174)	(81.2%)	Records						
6,165	13,048	6,883	52.8%	5,503	(662)	(12.0%)	Compliance						
1,424	1,594	170	10.6%	1,214	(211)	(17.3%)	Planning/Research						
29,601	38,927	9,326	24.0%	21,334	(8,267)	(38.8%)	Finance						
7,876	14,667	6,792	46.3%	6,270	(1,606)	(25.6%)	Public Relations						
91,844	111,203	19,359	17.4%	86,525	(5,320)	(6.1%)	Information Technology						
-	-	-	0.0%	2,121	2,121	100.0%	Budget & Decision Support						
3,682	3,026	(656)	(21.7%)	2,841	(841)	(29.6%)	Corporate Quality						
300,144	367,795	67,652	18.4%	393,286	93,143	23.7%	Total Overhead Allocations						
9,086,560	9,191,464	104,904	1.1%	9,114,629	28,069	0.3%	Total Expenses						
\$ (9,086,560)	\$ (9,191,464)	\$ 104,904	(1.1%)	\$ (9,114,629)	\$ 28,069	(0.3%)	Net Margin						



# Pharmacy Services Statement of Revenues and Expenditures

FOR THE THIRD MONTH ENDED DECEMBER 31, 2018

Current Month													
Actual	Budget	Variance	%	Prior Year	Variance	%							
\$ -	-	\$ -	0.0%	-	\$ -	0.0%	Patient Revenue						
-	-	-	0.0%	-	-	0.0%	Other Revenue						
11,753	18,185	(6,432)	(35.4%)	6,294	5,459	86.7%	Grants						
<b>11,753</b>	<b>18,185</b>	<b>(6,432)</b>	<b>(35.4%)</b>	<b>6,294</b>	<b>5,459</b>	<b>86.7%</b>	<b>Total Revenues</b>						
<i>Direct Operational Expenses:</i>													
280,921	294,907	13,986	4.7%	268,280	(12,641)	(4.7%)	Salaries and Wages						
81,364	90,025	8,661	9.6%	81,088	(276)	(0.3%)	Benefits						
7,677	13,135	5,458	41.6%	15,117	7,440	49.2%	Purchased Services						
-	-	-	0.0%	-	-	0.0%	Medical Services						
3,680	16,077	12,396	77.1%	3,965	285	7.2%	Other Supplies						
-	-	-	0.0%	-	-	0.0%	Preventive Services						
18,181	91,542	73,361	80.1%	127,274	109,093	85.7%	Drugs						
22,252	43,230	20,978	48.5%	44,662	22,410	50.2%	Repairs & Maintenance						
13,412	17,773	4,362	24.5%	12,305	(1,107)	(9.0%)	Lease & Rental						
725	800	75	9.4%	616	(109)	(17.8%)	Utilities						
579	2,883	2,303	79.9%	1,844	1,265	68.6%	Other Expense						
1,825	1,912	87	4.5%	1,277	(547)	(42.9%)	Insurance						
<b>430,616</b>	<b>572,284</b>	<b>141,668</b>	<b>24.8%</b>	<b>556,428</b>	<b>125,812</b>	<b>22.6%</b>	<b>Total Operational Expenses</b>						
<i>Net Performance before Overhead</i>													
<b>(418,863)</b>	<b>(554,099)</b>	<b>135,236</b>	<b>(24.4%)</b>	<b>(550,134)</b>	<b>131,271</b>	<b>(23.9%)</b>	<b>Allocations</b>						
<i>Overhead Allocations:</i>													
2,268	3,496	1,229	35.1%	4,719	2,451	51.9%	Risk Mgt						
3,156	2,315	(842)	(36.4%)	263	(2,894)	(1,102.1%)	Rev Cycle						
1,408	1,528	120	7.9%	-	(1,408)	0.0%	Internal Audit						
5,820	6,853	1,034	15.1%	9,183	3,364	36.6%	Administration						
7,140	7,014	(126)	(1.8%)	6,318	(822)	(13.0%)	Human Resources						
2,226	3,502	1,276	36.4%	4,616	2,391	51.8%	Legal						
1,668	2,322	654	28.2%	1,371	(297)	(21.7%)	Records						
991	3,216	2,225	69.2%	2,284	1,293	56.6%	Compliance						
332	393	60	15.4%	402	70	17.3%	Planning/Research						
6,223	9,595	3,372	35.1%	7,759	1,536	19.8%	Finance						
2,292	3,615	1,323	36.6%	2,547	254	10.0%	Public Relations						
26,765	27,411	646	2.4%	27,953	1,188	4.3%	Information Technology						
-	-	-	0.0%	829	829	100.0%	Budget & Decision Support						
591	746	155	20.7%	475	(117)	(24.6%)	Corporate Quality						
77	146	69	47.3%	33	(44)	(134.9%)	Managed Care Contract						
<b>60,958</b>	<b>72,153</b>	<b>11,195</b>	<b>15.5%</b>	<b>68,752</b>	<b>7,794</b>	<b>11.3%</b>	<b>Total Overhead Allocations</b>						
<b>491,574</b>	<b>644,437</b>	<b>152,863</b>	<b>23.7%</b>	<b>625,180</b>	<b>133,606</b>	<b>21.4%</b>	<b>Total Expenses</b>						
<b>\$ (479,821)</b>	<b>\$ (626,252)</b>	<b>\$ 146,431</b>	<b>(23.4%)</b>	<b>\$ (618,886)</b>	<b>\$ 139,065</b>	<b>(22.5%)</b>	<b>Net Margin</b>						

Fiscal Year To Date													
Actual	Budget	Variance	%	Prior Year	Variance	%							
\$ -	-	\$ -	0.0%	\$ -	\$ -	0.0%	Patient Revenue						
-	-	-	0.0%	-	-	0.0%	Other Revenue						
24,391	56,361	(31,970)	(56.7%)	19,827	4,564	23.0%	Grants						
<b>24,391</b>	<b>56,361</b>	<b>(31,970)</b>	<b>(56.7%)</b>	<b>19,827</b>	<b>4,564</b>	<b>23.0%</b>	<b>Total Revenues</b>						
<i>Direct Operational Expenses:</i>													
895,007	914,184	19,177	2.1%	876,865	(18,142)	(2.1%)	Salaries and Wages						
272,875	274,821	1,945	0.7%	255,838	(17,038)	(6.7%)	Benefits						
27,330	39,406	12,076	30.6%	32,241	4,911	15.2%	Purchased Services						
-	-	-	0.0%	-	-	0.0%	Medical Services						
14,699	48,230	33,531	69.5%	21,348	6,649	31.1%	Other Supplies						
-	-	-	0.0%	-	-	0.0%	Preventive Services						
62,547	274,626	212,080	77.2%	264,273	201,727	76.3%	Drugs						
64,451	129,689	65,238	50.3%	90,750	26,299	29.0%	Repairs & Maintenance						
40,235	53,319	13,085	24.5%	36,914	(3,321)	(9.0%)	Lease & Rental						
2,207	2,400	194	8.1%	2,078	(129)	(6.2%)	Utilities						
2,214	8,648	6,433	74.4%	3,492	1,278	36.6%	Other Expense						
5,496	5,735	240	4.2%	3,863	(1,633)	(42.3%)	Insurance						
<b>1,387,061</b>	<b>1,751,058</b>	<b>363,997</b>	<b>20.8%</b>	<b>1,587,663</b>	<b>200,602</b>	<b>12.6%</b>	<b>Total Operational Expenses</b>						
<b>(1,362,670)</b>	<b>(1,694,697)</b>	<b>332,028</b>	<b>(19.6%)</b>	<b>(1,563,272)</b>	<b>205,166</b>	<b>(13.1%)</b>	<b>Allocations</b>						
<i>Overhead Allocations:</i>													
9,256	10,489	1,233	11.8%	10,356	1,100	10.6%	Risk Mgt						
7,858	6,944	(914)	(13.2%)	994	(6,864)	(690.8%)	Rev Cycle						
4,224	4,584	360	7.9%	2	(4,222)	(234,556.7%)	Internal Audit						
19,871	20,560	689	3.4%	26,676	6,805	25.5%	Administration						
21,015	21,041	26	0.1%	14,367	(6,649)	(46.3%)	Human Resources						
7,278	10,505	3,227	30.7%	9,129	1,852	20.3%	Legal						
5,235	5,966	1,731	24.8%	4,489	(747)	(16.6%)	Records						
4,559	9,648	5,090	52.8%	6,324	1,765	27.9%	Compliance						
1,053	1,179	125	10.6%	1,395	341	24.5%	Planning/Research						
21,889	28,786	6,896	24.0%	24,514	2,625	10.7%	Finance						
5,824	10,846	5,022	46.3%	7,205	1,381	19.2%	Public Relations						
67,917	82,233	14,316	17.4%	99,425	31,507	31.7%	Information Technology						
-	-	-	0.0%	2,437	2,437	100.0%	Budget & Decision Support						
2,722	2,238	(485)	(21.7%)	3,264	542	16.6%	Corporate Quality						
266	439	173	39.4%	102	(164)	(160.9%)	Managed Care Contract						
<b>178,969</b>	<b>216,458</b>	<b>37,489</b>	<b>17.3%</b>	<b>210,678</b>	<b>31,710</b>	<b>15.1%</b>	<b>Total Overhead Allocations</b>						
<b>1,566,030</b>	<b>1,967,516</b>	<b>401,487</b>	<b>20.4%</b>	<b>1,798,341</b>	<b>232,312</b>	<b>12.9%</b>	<b>Total Expenses</b>						
<b>\$ (1,541,638)</b>	<b>\$ (1,911,155)</b>	<b>\$ 369,517</b>	<b>(19.3%)</b>	<b>\$ (1,778,514)</b>	<b>\$ 236,875</b>	<b>(13.3%)</b>	<b>Net Margin</b>						

# School Health Statement of Revenues and Expenditures

FOR THE THIRD MONTH ENDED DECEMBER 31, 2018

Current Month							
Actual	Budget	Variance	%	Prior Year	Variance	%	
\$ 231,917	\$ 231,917	\$ -	0.0%	\$ 231,917	\$ -	0.0%	Palm Beach County School District
231,917	231,917	-	0.0%	231,917	-	0.0%	Total Revenue
Direct Operational Expenses:							
1,307,080	1,331,981	24,901	1.9%	1,022,939	(284,140)	(27.8%)	Salaries and Wages
409,579	475,175	65,596	13.8%	485,017	75,438	15.6%	Benefits
-	-	-	0.0%	-	-	0.0%	Purchased Services
39,135	6,000	(33,135)	(552.2%)	434	(38,701)	(8,921.2%)	Medical Supplies
1,463	583	(880)	(150.9%)	9	(1,455)	(16,661.9%)	Other Supplies
11,646	9,542	(2,105)	(22.1%)	6,625	(5,021)	(75.8%)	Repairs & Maintenance
-	-	-	0.0%	-	-	0.0%	Utilities
393	1,929	1,536	79.6%	-	(393)	0.0%	Other Expense
-	-	-	0.0%	-	-	0.0%	Insurance
1,769,296	1,825,211	55,914	3.1%	1,515,024	(254,272)	(16.8%)	Total Operational Expenses
(1,537,379)	(1,593,294)	55,914	(3.5%)	(1,283,107)	(254,272)	19.8%	Net Performance before Overhead
Overhead Allocations:							
6,008	9,264	3,255	35.1%	9,720	3,711	38.2%	Risk Mgt
-	-	-	0.0%	-	-	0.0%	Rev Cycle
3,730	4,048	318	7.9%	-	(3,730)	0.0%	Internal Audit
6,256	8,057	1,801	22.4%	15,248	8,992	59.0%	Palm Springs Facility
15,420	18,159	2,739	15.1%	18,916	3,496	18.5%	Administration
34,575	33,963	(611)	(1.8%)	30,893	(3,682)	(11.9%)	Human Resources
5,897	9,277	3,380	36.4%	9,509	3,611	38.0%	Legal
4,420	6,152	1,732	28.2%	2,824	(1,597)	(56.5%)	Records
2,627	8,521	5,895	69.2%	4,705	2,078	44.2%	Compliance
881	1,041	160	15.4%	828	(52)	(6.3%)	Planning/Research
16,488	25,423	8,935	35.1%	15,983	(506)	(3.2%)	Finance
6,073	9,579	3,506	36.6%	5,245	(828)	(15.8%)	Public Relations
70,915	72,627	1,713	2.4%	57,577	(13,338)	(23.2%)	Information Technology
-	-	-	0.0%	1,708	1,708	100.0%	Budget & Decision Support
1,567	1,976	409	20.7%	978	(589)	(60.3%)	Corporate Quality
174,858	208,090	33,232	16.0%	174,132	(726)	(0.4%)	Total Overhead Allocations
1,944,154	2,033,300	89,146	4.4%	1,689,156	(254,998)	(15.1%)	Total Expenses
\$ (1,712,237)	\$ (1,801,384)	\$ 89,146	(4.9%)	\$ (1,457,239)	\$ (254,998)	17.5%	Net Margin

Fiscal Year To Date							
Actual	Budget	Variance	%	Prior Year	Variance	%	
\$ 695,750	\$ 695,750	\$ (0)	(0.0%)	\$ 695,750	\$ (0)	(0.0%)	
695,750	695,750	(0)	(0.0%)	695,750	(0)	(0.0%)	
Direct Operational Expenses:							
3,900,669	3,942,443	41,774	1.1%	3,588,017	(312,652)	(8.7%)	Salaries and Wages
1,392,016	1,425,526	33,510	2.4%	1,362,815	(29,201)	(2.1%)	Benefits
-	-	-	0.0%	-	-	0.0%	Purchased Services
43,436	18,000	(25,436)	(141.3%)	2,085	(41,351)	(1,983.6%)	Medical Supplies
4,872	1,750	(3,122)	(178.4%)	729	(4,142)	(567.9%)	Other Supplies
34,939	28,625	(6,314)	(22.1%)	20,078	(14,861)	(74.0%)	Repairs & Maintenance
-	-	-	0.0%	-	-	0.0%	Utilities
624	5,787	5,163	89.2%	1,143	519	45.4%	Other Expense
-	-	-	0.0%	-	-	0.0%	Insurance
5,376,556	5,422,131	45,576	0.8%	4,974,867	(401,689)	(8.1%)	Total Operational Expenses
(4,680,806)	(4,726,381)	45,576	(1.0%)	(4,279,117)	(401,689)	9.4%	Net Performance before Overhead
Overhead Allocations:							
24,525	27,791	3,267	11.8%	21,331	(3,194)	(15.0%)	Risk Mgt
-	-	-	0.0%	-	-	0.0%	Rev Cycle
11,191	12,145	954	7.9%	4	(11,188)	(301,552.0%)	Internal Audit
19,164	24,171	5,007	20.7%	45,896	26,733	58.2%	Palm Springs Facility
52,650	54,476	1,826	3.4%	54,947	2,297	4.2%	Administration
101,766	101,890	125	0.1%	70,248	(31,518)	(44.9%)	Human Resources
19,282	27,832	8,550	30.7%	18,804	(478)	(2.5%)	Legal
13,872	18,457	4,585	24.8%	9,246	(4,626)	(50.0%)	Records
12,079	25,564	13,485	52.8%	13,026	947	7.3%	Compliance
2,791	3,123	332	10.6%	2,873	82	2.9%	Planning/Research
57,997	76,270	18,273	24.0%	50,495	(7,503)	(14.9%)	Finance
15,431	28,738	13,307	46.3%	14,841	(590)	(4.0%)	Public Relations
179,951	217,882	37,930	17.4%	204,794	24,843	12.1%	Information Technology
-	-	-	0.0%	5,021	5,021	100.0%	Budget & Decision Support
7,213	5,929	(1,285)	(21.7%)	6,724	(489)	(7.3%)	Corporate Quality
517,913	624,269	106,356	17.0%	518,248	335	0.1%	Total Overhead Allocations
5,894,468	6,046,400	151,932	2.5%	5,493,115	(401,354)	(7.3%)	Total Expenses
\$ (5,198,718)	\$ (5,350,650)	\$ 151,932	(2.8%)	\$ (4,797,365)	\$ (401,354)	8.4%	Net Margin

## Sponsored Programs

FOR THE THIRD MONTH ENDED DECEMBER 31, 2018

Current Month							Fiscal Year To Date						
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%
<i>Sponsored Programs:</i>													
705,594	791,667	86,073	10.9%	500,000	(205,594)	(41.1%)	2,116,782	2,375,000	258,218	10.9%	1,500,000	(616,782)	(41.1%)
-	166,667	166,667	100.0%	(42,209)	(42,209)	100.0%	-	500,000	500,000	100.0%	259,708	259,708	100.0%
-	-	-	0.0%	-	-	0.0%	-	-	-	0.0%	-	-	0.0%
-	2,500	2,500	100.0%	2,500	2,500	100.0%	-	7,500	7,500	100.0%	7,500	7,500	100.0%
705,594	960,833	255,239	26.6%	460,291	(245,303)	(53.3%)	2,116,782	2,882,500	765,718	26.6%	1,767,208	(349,574)	(19.8%)
<i>Direct Operational Expenses:</i>													
12,755	12,851	96	0.7%	12,383	(371)	(3.0%)	40,263	39,837	(426)	(1.1%)	40,763	500	1.2%
4,971	5,401	430	8.0%	5,376	405	7.5%	16,372	16,500	128	0.8%	16,599	227	1.4%
110	83	(27)	(32.1%)	-	(110)	0.0%	110	250	140	56.0%	-	(110)	0.0%
-	-	-	0.0%	-	-	0.0%	-	-	-	0.0%	-	-	0.0%
-	521	521	100.0%	51	51	100.0%	-	1,563	1,563	100.0%	141	141	100.0%
17,836	18,856	1,020	5.7%	17,810	(26)	(0.1%)	56,745	58,149	1,404	2.5%	57,502	758	1.3%
\$ 723,430	\$ 979,689	\$ 256,260	26.2%	\$ 478,101	\$ (245,329)	(51.3%)	\$ 2,173,527	\$ 2,940,649	\$ 767,122	26.1%	\$ 1,824,710	\$ (348,817)	(19.1%)
Total Expenses													

## General Fund Statement of Revenues and Expenditures by Month

	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Year to Date
<b>Revenues:</b>													
Ad Valorem Taxes	\$ -	\$ 21,909,070	\$ 83,120,459	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 105,029,529
Premiums													
Patient Revenue, Net	130,636	180,131	356,622	-	-	-	-	-	-	-	-	-	667,390
Intergovernmental Revenue	231,917	231,917	231,917	-	-	-	-	-	-	-	-	-	695,750
Grants	7,820	4,818	11,753	-	-	-	-	-	-	-	-	-	24,391
Interest Earnings	233,692	238,380	190,989	-	-	-	-	-	-	-	-	-	663,062
Unrealized Gain/(Loss)-Investments	(49,482)	155,186	641,766	-	-	-	-	-	-	-	-	-	746,971
Other Revenue	1,210	473,396	1,224,894	-	-	-	-	-	-	-	-	-	1,699,500
<b>Total Revenues</b>	<b>\$ 555,794</b>	<b>\$ 23,192,899</b>	<b>\$ 85,777,900</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 109,526,593</b>
<b>Expenditures:</b>													
Salaries and Wages	3,298,698	2,915,868	2,983,671	-	-	-	-	-	-	-	-	-	9,198,237
Benefits	1,055,344	1,100,508	904,269	-	-	-	-	-	-	-	-	-	3,060,121
Purchased Services	494,856	800,476	566,029	-	-	-	-	-	-	-	-	-	1,861,362
Medical Supplies	4,323	4,210	39,275	-	-	-	-	-	-	-	-	-	47,808
Other Supplies	25,159	40,536	84,704	-	-	-	-	-	-	-	-	-	150,399
Contracted Physician Expense	29,167	29,167	29,167	-	-	-	-	-	-	-	-	-	87,500
Medical Services	3,748,086	3,330,642	3,401,981	-	-	-	-	-	-	-	-	-	10,480,708
Drugs	14,087	30,279	18,181	-	-	-	-	-	-	-	-	-	62,547
Repairs & Maintenance	233,625	221,593	291,127	-	-	-	-	-	-	-	-	-	746,344
Lease & Rental	132,692	169,243	177,188	-	-	-	-	-	-	-	-	-	479,123
Utilities	11,427	12,065	9,852	-	-	-	-	-	-	-	-	-	33,343
Other Expense	316,602	650,421	1,935,661	-	-	-	-	-	-	-	-	-	2,902,684
Insurance	120,673	122,833	112,469	-	-	-	-	-	-	-	-	-	355,975
Sponsored Programs	705,594	705,594	705,594	-	-	-	-	-	-	-	-	-	2,116,782
<b>Total Operational Expenditures</b>	<b>10,190,832</b>	<b>10,133,434</b>	<b>11,259,166</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>31,582,933</b>
<b>Net Performance before Overhead Allocations</b>	<b>\$ (9,634,538)</b>	<b>\$ 13,059,465</b>	<b>\$ 74,518,733</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 77,943,660</b>
<b>Overhead Allocations</b>	<b>(822,184)</b>	<b>(878,882)</b>	<b>(893,893)</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>(2,594,959)</b>
<b>Total Expenses</b>	<b>9,368,148</b>	<b>9,254,553</b>	<b>10,365,273</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>28,987,973</b>
<b>Net Margin</b>	<b>\$ (8,812,354)</b>	<b>\$ 13,938,347</b>	<b>\$ 75,412,627</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 80,538,619</b>
<b>Capital</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>General Fund Support/ Transfer In (Out)</b>	<b>\$ (3,291,581)</b>	<b>\$ (4,370,744)</b>	<b>\$ (3,491,091)</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ (11,153,416)</b>

## General Fund Program Statistics

	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Current Year Total	Prior Year Total
<b>Aeromedical</b>														
Patients Transported - Actual	46	40	55	-	-	-	-	-	-	-	-	-	141	173
Patients Transported - Budget	51	63	51	-	-	-	-	-	-	-	-	-	165	165
Variance	(5)	(23)	4	-	-	-	-	-	-	-	-	-	(24)	8
Actual Hours Available for Service	1,070	1,080	1,113	-	-	-	-	-	-	-	-	-	3,263	3,276
Service Hours Utilized	74.0	54.0	79.0	-	-	-	-	-	-	-	-	-	207.0	221.0
Utilization %	6.9%	5.0%	7.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	6.3%	6.7%
# of Flights - Training/Public Education	8	5	7	-	-	-	-	-	-	-	-	-	20	37
# of Flights - Maintenance	9	11	15	-	-	-	-	-	-	-	-	-	35	21
<b>Trauma</b>														
New Trauma Patients - Actual	359	399	421	-	-	-	-	-	-	-	-	-	1,179	1,117
New Trauma Patients - Budget	399	399	399	-	-	-	-	-	-	-	-	-	1,197	1,032
Variance	(40)	-	22	-	-	-	-	-	-	-	-	-	(18)	85
<b>School Health</b>														
Medical Events	48,567	32,649	28,460	-	-	-	-	-	-	-	-	-	109,676	112,262
Screenings	29,329	19,811	18,958	-	-	-	-	-	-	-	-	-	68,098	48,270
Total Events- Actual	77,896	52,460	47,418	-	-	-	-	-	-	-	-	-	177,774	160,532
Total Events- Budget	66,612	50,206	43,714	-	-	-	-	-	-	-	-	-	160,532	160,105
<b>Managed Care</b>														
District Care Visits to Primary Clinic - Medical	1,857	2,043	2,121	-	-	-	-	-	-	-	-	-	6,021	8,458
District Care Visits to Primary Clinic - Dental	441	381	338	-	-	-	-	-	-	-	-	-	1,160	2,365
Uninsured Visits to Primary Clinic - Medical	3,649	2,420	2,465	-	-	-	-	-	-	-	-	-	8,534	6,128
Uninsured Visits to Primary Clinic - Dental	1,381	990	873	-	-	-	-	-	-	-	-	-	3,244	3,483
Membership- Current Year	9,446	9,195	8,929	-	-	-	-	-	-	-	-	-	-	-
Membership- Prior Year	9,946	10,060	9,924	-	-	-	-	-	-	-	-	-	-	-
<b>Pharmacy</b>														
Total Prescriptions Filled at In-House Pharmacies	24,348	20,947	20,144	-	-	-	-	-	-	-	-	-	65,439	71,960
Total Prescriptions Filled at Retail Pharmacies	159	120	247	-	-	-	-	-	-	-	-	-	526	713
Total Prescriptions Filled Inhouse/Retail- Actual	24,507	21,067	20,391	-	-	-	-	-	-	-	-	-	65,965	72,673
Total Prescriptions Filled- Budget	26,876	24,372	24,016	-	-	-	-	-	-	-	-	-	75,264	78,898



# **SUPPLEMENTAL INFORMATION**

## **HEALEY CENTER**

# Healey Center Statement of Revenues and Expenses

FOR THE THIRD MONTH ENDED DECEMBER 31, 2018

Current Month							
Actual	Budget	Variance	%	Prior Year	Variance	%	
\$ 1,105,771	\$ 1,109,297	\$ (3,526)	(0.3%)	\$ 1,119,134	\$ (13,363)	(1.2%)	Gross Patient Revenue
(28,997)	16,554	45,551	275.2%	141,760	170,757	120.5%	Contractual Allowances
332,510	278,634	(53,876)	(19.3%)	225,515	(106,995)	(47.4%)	Charity Care
(22,945)	2,236	25,181	1,126.2%	6,975	29,921	428.9%	Bad Debt
280,568	297,424	16,856	5.7%	374,251	93,683	25.0%	Total Contractuals and Bad Debt
825,203	811,873	13,330	1.6%	744,884	80,320	10.8%	Net Patient Revenue
74.63%	73.19%			66.56%			Collection %
758,333	758,333	-	0.0%	758,333	-	0.0%	PBC Interlocal
5,377	4,468	909	20.3%	2,480	2,897	116.8%	Other revenue
763,710	762,801	909	0.1%	760,814	2,897	0.4%	Total Other Revenues
1,588,914	1,574,674	14,239	0.9%	1,505,697	83,216	5.5%	Total Revenues
Direct Operational Expenses							
820,044	891,894	71,850	8.1%	823,867	3,824	0.5%	Salaries and Wages
305,299	339,058	33,759	10.0%	321,317	16,018	5.0%	Benefits
67,963	71,143	3,179	4.5%	67,257	(706)	(1.1%)	Purchased Services
30,303	45,500	15,197	33.4%	40,058	9,755	24.4%	Medical Supplies
63,200	67,232	4,031	6.0%	67,120	3,919	5.8%	Other Supplies
1,172	2,088	916	43.9%	1,718	545	31.7%	Contracted Physician Expense
3,830	3,750	(80)	(2.1%)	-	(3,830)	0.0%	Medical Services
27,357	30,667	3,310	10.8%	44,082	16,725	37.9%	Drugs
30,243	32,957	2,714	8.2%	8,383	(21,860)	(260.8%)	Repairs & Maintenance
1,169	2,849	1,680	59.0%	1,335	166	12.4%	Lease & Rental
40,401	34,256	(6,144)	(17.9%)	33,396	(7,005)	(21.0%)	Utilities
16,616	15,260	(1,355)	(8.9%)	16,239	(377)	(2.3%)	Other Expense
4,620	4,601	(20)	(0.4%)	4,256	(364)	(8.6%)	Insurance
1,412,217	1,541,255	129,037	8.4%	1,429,027	16,810	1.2%	Total Operational Expenses
176,696	33,420	143,276	428.7%	76,670	100,026	130.5%	Overhead Allocations
54,806	70,087	15,281	21.8%	61,082	6,276	10.3%	Depreciation
Overhead Allocations:							
5,960	9,189	3,229	35.1%	10,099	4,139	41.0%	Risk Mgt
-	-	-	0.0%	24,887	24,887	100.0%	Rev Cycle
3,700	4,016	315	7.9%	-	(3,700)	0.0%	Internal Audit
15,296	18,013	2,717	15.1%	19,655	4,359	22.2%	Administration
32,188	31,618	(569)	(1.8%)	29,214	(2,973)	(10.2%)	Human Resources
5,850	9,203	3,353	36.4%	9,880	4,030	40.8%	Legal
4,385	6,103	1,718	28.2%	2,934	(1,451)	(49.4%)	Records
2,606	8,453	5,847	69.2%	4,889	2,283	46.7%	Compliance
874	1,033	159	15.4%	861	(13)	(1.5%)	Planning/Research
16,356	25,219	8,863	35.1%	16,607	251	1.5%	Finance
6,025	9,502	3,478	36.6%	5,450	(574)	(10.5%)	Public Relations
70,345	72,044	1,699	2.4%	59,825	(10,519)	(17.6%)	Information Technology
-	-	-	0.0%	1,775	1,775	100.0%	Budget & Decision Support
1,554	1,960	406	20.7%	1,016	(539)	(53.0%)	Corporate Quality
-	-	-	0.0%	3,116	3,116	100.0%	Managed Care Contract
165,137	196,353	31,216	15.9%	190,208	25,071	13.2%	Total Overhead Allocations
1,632,161	1,807,694	175,534	9.7%	1,680,318	48,157	2.9%	Total Expenses
(43,247)	(233,020)	189,773	(81.4%)	(174,621)	131,374	(75.2%)	Net Margin
\$ -	\$ 154,167	\$ (154,167)	(100.0%)	\$ -	\$ -	0.0%	General Fund Support/Transfer In

Fiscal Year To Date							
Actual	Budget	Variance	%	Prior Year	Variance	%	
\$ 3,286,062	\$ 3,292,107	\$ (6,045)	(0.2%)	\$ 3,320,485	\$ (34,423)	(1.0%)	Gross Patient Revenue
(63,627)	49,325	112,952	229.0%	333,202	396,830	119.1%	Contractual Allowances
902,180	826,859	(75,321)	(9.1%)	781,858	(120,323)	(15.4%)	Charity Care
(45,027)	6,708	51,735	771.2%	27,219	72,246	265.4%	Bad Debt
793,526	882,892	89,366	10.1%	1,142,279	348,753	30.5%	Total Contractuals and Bad Debt
2,492,535	2,409,215	83,320	3.5%	2,178,206	314,329	14.4%	Net Patient Revenue
75.85%	73.18%			65.60%			Collection %
2,275,000	2,275,000	-	0.0%	2,275,000	-	0.0%	PBC Interlocal
13,118	13,404	(286)	(2.1%)	7,549	5,569	73.8%	Other revenue
2,288,118	2,288,404	(286)	(0.0%)	2,282,549	5,569	0.2%	Total Other Revenues
4,780,653	4,697,619	83,034	1.8%	4,460,755	319,898	7.2%	Total Revenues
Direct Operational Expenses							
2,640,795	2,646,931	6,136	0.2%	2,526,039	(114,756)	(4.5%)	Salaries and Wages
996,039	1,012,247	16,208	1.6%	955,115	(40,924)	(4.3%)	Benefits
199,823	213,428	13,604	6.4%	187,565	(12,259)	(6.5%)	Purchased Services
125,879	136,500	10,621	7.8%	135,384	9,506	7.0%	Medical Supplies
208,962	201,695	(7,267)	(3.6%)	191,186	(17,776)	(9.3%)	Other Supplies
3,414	6,264	2,851	45.5%	4,844	1,430	29.5%	Contracted Physician Expense
12,788	11,250	(1,538)	(13.7%)	-	(12,788)	0.0%	Medical Services
86,975	92,000	5,025	5.5%	99,371	12,396	12.5%	Drugs
76,893	98,872	21,980	22.2%	76,811	(82)	(0.1%)	Repairs & Maintenance
4,936	8,547	3,611	42.2%	7,935	2,998	37.8%	Lease & Rental
104,776	102,768	(2,008)	(2.0%)	101,004	(3,772)	(3.7%)	Utilities
40,316	45,781	5,465	11.9%	37,856	(2,460)	(6.5%)	Other Expense
14,320	13,802	(517)	(3.7%)	13,424	(896)	(6.7%)	Insurance
4,515,916	4,590,086	74,170	1.6%	4,336,532	(179,383)	(4.1%)	Total Operational Expenses
264,737	107,533	157,204	146.2%	124,223	140,515	113.1%	Overhead Allocations
160,777	210,260	49,483	23.5%	183,362	22,585	12.3%	Depreciation
24,328	27,568	3,240	11.8%	22,164	(2,164)	(9.8%)	Risk Mgt
-	-	-	0.0%	94,180	94,180	100.0%	Rev Cycle
11,101	12,047	946	7.9%	4	(11,097)	(287,499.7%)	Internal Audit
52,227	54,038	1,811	3.4%	57,093	4,866	8.5%	Administration
94,739	94,855	116	0.1%	66,431	(28,308)	(42.6%)	Human Resources
19,128	27,609	8,481	30.7%	19,539	411	2.1%	Legal
13,760	18,309	4,549	24.8%	9,607	(4,154)	(43.2%)	Records
11,982	25,359	13,377	52.8%	13,534	1,552	11.5%	Compliance
2,768	3,098	330	10.6%	2,985	217	7.3%	Planning/Research
57,531	75,657	18,126	24.0%	52,467	(5,064)	(9.7%)	Finance
15,307	28,507	13,200	46.3%	15,421	114	0.7%	Public Relations
178,505	216,131	37,626	17.4%	212,793	34,287	16.1%	Information Technology
-	-	-	0.0%	5,217	5,217	100.0%	Budget & Decision Support
7,155	5,881	(1,274)	(21.7%)	6,987	(169)	(2.4%)	Corporate Quality
-	-	-	0.0%	9,675	9,675	100.0%	Managed Care Contract
488,532	589,059	100,527	17.1%	588,095	99,563	16.9%	Total Overhead Allocations
5,165,225	5,389,405	224,180	4.2%	5,107,989	(57,236)	(1.1%)	Total Expenses
(384,572)	(691,786)	307,214	(44.4%)	(647,235)	262,663	(40.6%)	Net Margin
\$ 253,284	\$ 462,500	\$ (209,216)	(45.2%)	\$ -	\$ 253,284	0.0%	General Fund Support/Transfer In



# Healey Center Statement of Revenues and Expenses by Month

	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Year to Date
Gross Patient Revenue	\$ 1,116,480	\$ 1,063,810	\$ 1,105,771	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 3,286,062
Contractual Allowances	(10,387)	(24,243)	(18,992)	-	-	-	-	-	-	-	-	-	(63,622)
Charity Care	255,960	313,710	332,510	-	-	-	-	-	-	-	-	-	902,180
Bad Debt	(9,091)	(12,041)	(22,045)	-	-	-	-	-	-	-	-	-	(43,027)
Total Contractuals and Bad Debt	236,483	276,475	289,568	-	-	-	-	-	-	-	-	-	793,526
Net Patient Revenue	879,997	783,355	825,203	-	-	-	-	-	-	-	-	-	2,692,535
Collections %	78.82%	74.01%	74.63%	-	-	-	-	-	-	-	-	-	75.85%
PCC Intelectal	758,333	758,333	758,333	-	-	-	-	-	-	-	-	-	2,275,000
Other revenue	4,321	3,420	5,377	-	-	-	-	-	-	-	-	-	13,118
Total Other Revenues	762,655	761,753	763,710	-	-	-	-	-	-	-	-	-	2,288,118
Total Revenues	1,642,652	1,569,088	1,588,914	-	-	-	-	-	-	-	-	-	4,780,653
Direct Operational Expenses:	896,239	924,513	820,044	-	-	-	-	-	-	-	-	-	2,640,795
Salaries and Wages	336,118	354,622	305,299	-	-	-	-	-	-	-	-	-	996,039
Benefits	63,482	68,378	67,963	-	-	-	-	-	-	-	-	-	199,827
Purchased Services	43,666	51,909	30,303	-	-	-	-	-	-	-	-	-	125,879
Medical Supplies	70,505	75,257	63,200	-	-	-	-	-	-	-	-	-	208,962
Contracted Physician Expense	1,158	1,084	1,172	-	-	-	-	-	-	-	-	-	3,414
Medical Services	4,623	4,335	3,830	-	-	-	-	-	-	-	-	-	12,788
Drugs	29,943	29,675	27,357	-	-	-	-	-	-	-	-	-	86,975
Repairs & Maintenance	15,238	31,412	30,243	-	-	-	-	-	-	-	-	-	76,893
Lease & Rental	1,169	2,599	1,169	-	-	-	-	-	-	-	-	-	4,936
Utilities	31,551	32,824	40,401	-	-	-	-	-	-	-	-	-	104,776
Other Expense	10,709	12,991	16,616	-	-	-	-	-	-	-	-	-	40,316
Insurance	5,079	4,620	4,620	-	-	-	-	-	-	-	-	-	14,320
Total Operational Expenses	1,509,479	1,594,719	1,412,217	-	-	-	-	-	-	-	-	-	4,515,916
Net Performance Before Depreciation &	133,172	(45,131)	176,696	-	-	-	-	-	-	-	-	-	264,737
Overhead Allocations	52,986	52,986	54,806	-	-	-	-	-	-	-	-	-	160,777
Depreciation	6,723	11,644	5,960	-	-	-	-	-	-	-	-	-	24,328
Risk Mgt	3,700	3,700	3,700	-	-	-	-	-	-	-	-	-	11,101
Internal Audit	18,050	18,881	15,296	-	-	-	-	-	-	-	-	-	52,227
Human Resources	30,916	31,615	32,188	-	-	-	-	-	-	-	-	-	94,739
Legal	4,675	8,603	5,850	-	-	-	-	-	-	-	-	-	19,128
Records	4,717	4,663	4,385	-	-	-	-	-	-	-	-	-	13,760
Compliance	4,174	5,202	2,006	-	-	-	-	-	-	-	-	-	11,987
Planning/Research	968	926	874	-	-	-	-	-	-	-	-	-	2,768
Finance	17,415	23,761	16,356	-	-	-	-	-	-	-	-	-	57,531
Public Relations	4,682	4,600	6,025	-	-	-	-	-	-	-	-	-	15,307
Information Technology	58,094	50,067	70,345	-	-	-	-	-	-	-	-	-	178,505
Budget & Decision Support	2,881	2,720	1,554	-	-	-	-	-	-	-	-	-	7,155
Corporate Quality	-	-	-	-	-	-	-	-	-	-	-	-	-
Managed Care Contract	-	-	-	-	-	-	-	-	-	-	-	-	-
Total Overhead Allocations	156,991	166,404	165,137	-	-	-	-	-	-	-	-	-	488,537
Total Expenses	1,719,456	1,813,608	1,632,161	-	-	-	-	-	-	-	-	-	5,165,225
Transfer out to Medicaid Match/ General Fund	-	-	-	-	-	-	-	-	-	-	-	-	-
Net Margin	(76,804)	(264,520)	(43,247)	-	-	-	-	-	-	-	-	-	(384,572)
General Fund Support/ Transfer In	\$ 23,818	\$ 229,466	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 253,284

Census	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Current Year Total	Prior Year Total
Admissions	10	9	12								-	-	31	32
Discharges	11	13	8								-	-	32	34
Average Daily Census	119	118	119	-	-	-	-	-	-	-	-	-	119	120
Budget Census	118	118	118	118	118	118	118	118	118	118	118	118	118	118
Occupancy % (120 licensed beds)	99%	98%	99%	0%	0%	0%	0%	0%	0%	0%	0%	0%	99%	100%
<b>Days By Payor Source:</b>														
Medicaid	109	78	62										249	7,514
Managed Care Medicaid	2,259	2,201	2,330										6,790	-
Medicare	115	90	52										257	83
Private Pay	97	90	93										280	340
Hospice	124	120	145										389	268
Charity	990	961	1,016										2,967	2,796
<b>Total Resident Days</b>	<b>3,694</b>	<b>3,540</b>	<b>3,698</b>	-	-	-	-	-	-	-	-	-	<b>10,932</b>	<b>11,001</b>

**SUPPLEMENTAL INFORMATION**

**LAKESIDE MEDICAL CENTER**

# Lakeside Medical Center Statement of Revenues and Expenses

FOR THE THIRD MONTH ENDED DECEMBER 31, 2018

Current Month								Fiscal Year To Date							
Actual	Budget	Variance	%	Prior Year	Variance	%		Actual	Budget	Variance	%	Prior Year	Variance	%	
\$ 4,395,962	\$ 4,633,716	\$ (237,754)	(5.1%)	\$ 4,610,381	\$ (214,419)	(4.7%)	Inpatient Revenue	\$ 12,366,207	\$ 14,624,366	\$ (2,258,159)	(15.4%)	\$ 13,780,122	\$ (1,413,915)	(10.3%)	
6,542,374	5,656,626	885,748	15.7%	5,950,079	592,295	10.0%	Outpatient Revenue	20,666,665	17,852,751	2,813,914	15.8%	18,095,300	2,571,365	14.2%	
-	57,619	(57,619)	(100.0%)	75,350	(75,350)	(100.0%)	Physician Clinic	1,126	172,856	(171,731)	(99.3%)	203,049	(201,924)	(99.4%)	
10,938,336	10,347,961	590,375	5.7%	10,635,810	302,526	2.8%	Gross Patient Revenue	33,033,998	32,649,972	384,025	1.2%	32,078,471	955,527	3.0%	
6,886,241	6,834,951	(51,290)	(0.8%)	7,437,189	550,947	7.4%	Contractual Allowances	22,558,123	21,571,634	(986,489)	(4.6%)	22,218,128	(339,996)	(1.5%)	
418,757	202,300	(216,457)	(107.0%)	82,586	(336,171)	(407.1%)	Charity Care	899,069	638,475	(260,594)	(40.8%)	786,322	(112,747)	(14.3%)	
1,124,976	1,149,046	24,070	2.1%	1,187,370	62,394	5.3%	Bad Debt	3,092,293	3,626,478	534,184	14.7%	3,351,928	259,635	7.7%	
-	38,427	38,427	100.0%	52,435	52,435	100.0%	Physician Contractuals	662	115,282	(114,620)	99.4%	106,017	105,355	99.4%	
\$ 8,429,974	\$ 8,224,724	\$ (205,250)	(2.5%)	\$ 8,759,580	\$ 329,606	3.8%	Total Contractuals and Bad Debt	\$ 26,550,147	\$ 25,951,868	\$ (598,279)	(2.3%)	\$ 26,462,395	\$ (87,753)	(0.3%)	
130,284	140,377	(10,093)	(7.2%)	693,394	(563,110)	-81%	Other Patient Revenue	390,851	421,132	(30,281)	(7.2%)	766,994	(376,144)	-49%	
2,638,646	2,263,614	375,032	16.6%	2,569,624	69,022	2.7%	Net Patient Revenue	6,874,701	7,119,235	(244,534)	(3.4%)	6,383,071	491,630	7.7%	
24.12%	21.87%			24.16%			Collection %	20.81%	21.80%			19.90%			
18,224	-	18,224	0.0%	36,752	(18,528)	(50.4%)	Grant Funds	72,897	-	72,897	0.0%	73,192	(295)	(0.4%)	
16,134	35,935	(19,800)	(55.1%)	1,480	14,655	990.5%	Other Revenue	31,292	107,804	(76,512)	(71.0%)	10,934	20,359	186.2%	
34,359	35,935	(1,576)	(4.4%)	38,232	(3,873)	(10.1%)	Total Other Revenues	104,190	107,804	(3,614)	(3.4%)	84,126	20,064	23.8%	
2,673,004	2,299,549	373,456	16.2%	2,607,856	65,149	2.5%	Total Revenues	6,978,891	7,227,039	(248,149)	(3.4%)	6,467,197	511,694	7.9%	
Direct Operational Expenses:															
1,521,075	1,661,163	140,088	8.4%	1,473,626	(47,449)	(3.2%)	Salaries and Wages	4,709,779	4,929,904	220,125	4.5%	4,656,819	(52,959)	(1.1%)	
395,002	452,911	57,909	12.8%	415,899	20,898	5.0%	Benefits	1,280,701	1,344,122	63,420	4.7%	1,251,958	(28,743)	(2.3%)	
323,031	299,444	(23,587)	(7.9%)	238,326	(84,705)	(35.5%)	Purchased Services	841,494	835,631	(5,863)	(0.7%)	714,123	(127,370)	(17.8%)	
150,782	92,629	(58,153)	(62.8%)	133,847	(16,934)	(12.7%)	Medical Supplies	326,854	292,343	(34,511)	(11.8%)	235,197	(91,657)	(39.0%)	
121,939	87,215	(34,724)	(39.8%)	67,168	(54,771)	(81.5%)	Other Supplies	221,170	270,135	48,965	18.1%	154,302	(66,867)	(43.3%)	
1,167,852	635,391	(532,462)	(83.8%)	536,869	(630,984)	(117.5%)	Contracted Physician Expense	2,881,313	2,385,098	(496,215)	(20.8%)	1,657,144	(1,224,169)	(73.9%)	
51,899	72,704	20,805	28.6%	63,641	11,742	18.5%	Drugs	178,442	229,460	51,017	22.2%	179,473	1,031	0.6%	
196,547	157,024	(39,523)	(25.2%)	21,746	(174,800)	(803.8%)	Repairs & Maintenance	447,153	471,072	23,919	5.1%	319,569	(127,584)	(39.9%)	
65,398	62,234	(3,164)	(5.1%)	55,148	(10,251)	(18.6%)	Lease & Rental	189,696	186,702	(2,994)	(1.6%)	139,220	(50,476)	(36.3%)	
72,238	103,522	31,283	30.2%	73,461	1,223	1.7%	Utilities	208,626	266,615	57,989	21.8%	213,214	4,588	2.2%	
68,441	126,394	57,953	45.9%	(755)	(69,196)	9,160.5%	Other Expense	180,000	194,233	14,233	7.3%	101,506	(78,493)	(77.3%)	
11,496	12,239	742	6.1%	12,982	1,486	11.4%	Insurance	29,794	36,716	6,921	18.9%	39,600	9,805	24.8%	
4,145,700	3,762,868	(382,832)	(10.2%)	3,091,958	(1,053,742)	(34.1%)	Total Operational Expenses	11,495,021	11,442,028	(52,993)	(0.5%)	9,662,125	(1,832,896)	(19.0%)	
Net Performance before Depreciation															
(1,472,695)	(1,463,320)	(9,376)	0.6%	(484,102)	(988,593)	204.2%	& Overhead Allocations	(4,516,130)	(4,214,988)	(301,142)	7.1%	(3,194,928)	(1,321,202)	41.4%	

# Lakeside Medical Center Statement of Revenues and Expenses

FOR THE THIRD MONTH ENDED DECEMBER 31, 2018

Current Month							Fiscal Year To Date						
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%
270,170	294,088	23,918	8.1%	287,778	17,608	6.1%	833,954	882,263	48,310	5.5%	863,393	29,440	3.4%
Depreciation							Depreciation						
Overhead Allocations:							Overhead Allocations:						
14,116	21,765	7,648	35.1%	20,986	6,870	32.7%	57,620	65,294	7,675	11.8%	46,055	(11,565)	(25.1%)
-	-	-	0.0%	-	-	0.0%	-	-	-	0.0%	-	-	0.0%
8,764	9,511	747	7.9%	-	(8,764)	0.0%	26,293	28,534	2,241	7.9%	8	(26,285)	(328,154.7%)
36,228	42,663	6,434	15.1%	40,841	4,613	11.3%	123,699	127,988	4,289	3.4%	118,635	(5,064)	(4.3%)
41,667	40,930	(737)	(1.8%)	37,086	(4,582)	(12.4%)	122,641	122,791	150	0.1%	84,330	(38,311)	(45.4%)
13,855	21,797	7,942	36.4%	20,530	6,675	32.5%	45,303	65,391	20,088	30.7%	40,600	(4,703)	(11.6%)
10,385	14,455	4,070	28.2%	6,097	(4,288)	(70.3%)	32,591	43,364	10,773	24.8%	19,962	(12,629)	(63.3%)
6,171	20,020	13,849	69.2%	10,158	3,987	39.3%	28,378	60,061	31,683	52.8%	28,123	(255)	(0.9%)
2,069	2,446	376	15.4%	1,788	(281)	(15.7%)	6,556	7,337	781	10.6%	6,202	(354)	(5.7%)
38,738	59,730	20,992	35.1%	34,508	(4,230)	(12.3%)	136,261	179,191	42,930	24.0%	109,022	(27,239)	(25.0%)
14,269	22,506	8,237	36.6%	11,325	(2,944)	(26.0%)	36,254	67,518	31,264	46.3%	32,043	(4,212)	(13.1%)
166,609	170,633	4,024	2.4%	124,312	(42,297)	(34.0%)	422,784	511,899	89,115	17.4%	442,166	19,382	4.4%
-	-	-	0.0%	3,687	3,687	100.0%	-	-	-	0.0%	10,840	10,840	100.0%
3,681	4,643	962	20.7%	2,111	(1,571)	(74.4%)	16,947	13,930	(3,018)	(21.7%)	14,518	(2,430)	(16.7%)
10,022	19,005	8,983	47.3%	9,051	(971)	(10.7%)	34,559	57,014	22,455	39.4%	28,100	(6,459)	(23.0%)
366,576	450,104	83,528	18.6%	322,480	(44,096)	(13.7%)	1,089,886	1,350,311	260,425	19.3%	980,603	(109,283)	(11.1%)
Total Overhead Allocations							Total Overhead Allocations						
4,782,446	4,507,060	(275,386)	(6.1%)	3,702,216	(1,080,230)	(29.2%)	13,418,861	13,674,602	255,742	1.9%	11,506,121	(1,912,740)	(16.6%)
Total Expenses							Total Expenses						
\$ (2,109,441)	\$ (2,207,511)	\$ 98,070	(4.4%)	\$ (1,094,360)	\$ (1,015,081)	92.8%	\$ (6,439,970)	\$ (6,447,563)	\$ 7,593	(0.1%)	\$ (5,038,924)	\$ (1,401,046)	27.8%
Net Margin							Net Margin						
\$ 1,611,915	\$ 1,625,000	\$ (13,085)	(0.8%)	\$ -	\$ 1,611,915	0.0%	\$ 5,399,206	\$ 4,875,000	\$ 524,206	10.8%	\$ -	\$ 5,399,206	0.0%
General Fund Support/ Transfer in							General Fund Support/ Transfer in						

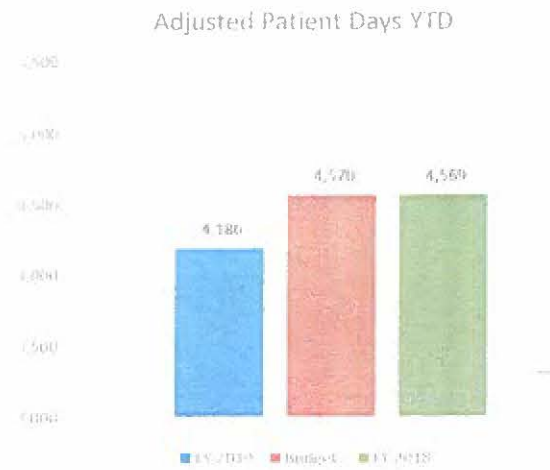
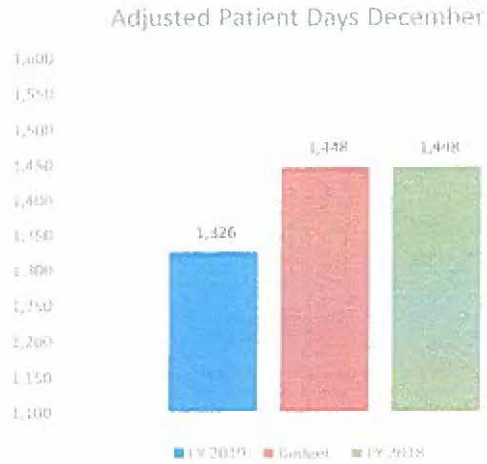
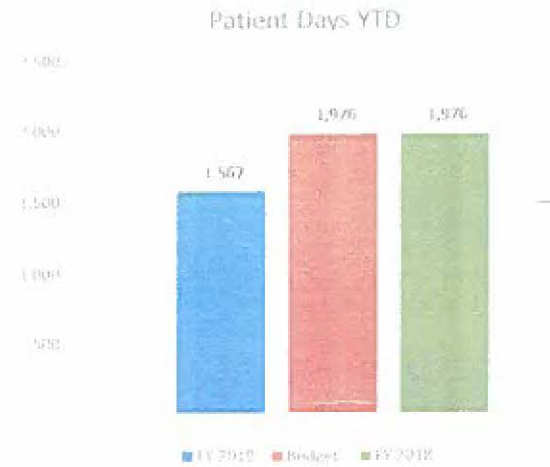
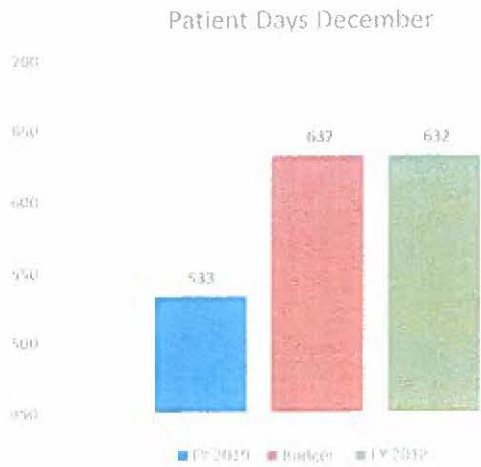
## Lakeside Medical Center Statement of Revenues and Expenses by Month

	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Year to Date
Inpatient Revenue	\$ 3,927,107	\$ 4,043,138	\$ 4,395,962	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 12,366,207
Outpatient Revenue	7,369,477	6,754,814	6,542,374	-	-	-	-	-	-	-	-	-	20,666,665
Physician Clinic	615	510	-	-	-	-	-	-	-	-	-	-	1,126
<b>Gross Patient Revenue</b>	<b>11,297,199</b>	<b>10,798,462</b>	<b>10,938,336</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>33,033,998</b>
Contractual Allowances	7,481,597	8,190,285	6,886,241	-	-	-	-	-	-	-	-	-	22,558,123
Charity Care	232,522	247,790	418,757	-	-	-	-	-	-	-	-	-	899,069
Bad Debt	1,241,914	725,404	1,124,976	-	-	-	-	-	-	-	-	-	3,092,293
Physician Contractuals	3,637	(2,975)	-	-	-	-	-	-	-	-	-	-	662
<b>Total Contractuals and Bad Debt</b>	<b>\$ 8,959,670</b>	<b>\$ 9,160,503</b>	<b>\$ 8,429,974</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>26,550,147</b>
<b>Other Patient Revenue</b>	<b>130,283.42</b>	<b>130,283.42</b>	<b>130,283.92</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>390,850.76</b>
<b>Net Patient Revenue</b>	<b>2,467,813</b>	<b>1,768,242</b>	<b>2,638,646</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>6,874,701</b>
Collection %	21.84%	16.37%	24.12%	-	-	-	-	-	-	-	-	-	20.81%
Grant Funds	-	58,673	18,224	-	-	-	-	-	-	-	-	-	72,897
Other Revenue	7,425	7,733	16,134	-	-	-	-	-	-	-	-	-	31,292
<b>Total Other Revenues</b>	<b>7,425</b>	<b>62,406</b>	<b>34,359</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>104,190</b>
<b>Total Revenues</b>	<b>2,475,238</b>	<b>1,830,648</b>	<b>2,673,004</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>6,978,891</b>
<b>Direct Operational Expenses:</b>													
Salaries and Wages	1,604,655	1,584,048	1,521,075	-	-	-	-	-	-	-	-	-	4,709,779
Benefits	446,177	439,522	395,002	-	-	-	-	-	-	-	-	-	1,280,701
Purchased Services	129,360	389,103	323,031	-	-	-	-	-	-	-	-	-	841,494
Medical Supplies	111,576	64,495	150,782	-	-	-	-	-	-	-	-	-	326,854
Other Supplies	51,377	47,854	121,939	-	-	-	-	-	-	-	-	-	221,170
Contracted Physician Expense	585,248	1,128,212	1,167,852	-	-	-	-	-	-	-	-	-	2,881,313
Drugs	87,498	39,046	51,899	-	-	-	-	-	-	-	-	-	178,442
Repairs & Maintenance	152,041	98,566	196,547	-	-	-	-	-	-	-	-	-	447,153
Lease & Rental	72,590	51,707	65,398	-	-	-	-	-	-	-	-	-	189,696
Utilities	12,394	123,994	72,238	-	-	-	-	-	-	-	-	-	208,626
Other Expense	52,007	59,552	68,441	-	-	-	-	-	-	-	-	-	180,000
Insurance	12,637	5,661	11,496	-	-	-	-	-	-	-	-	-	29,794
<b>Total Operational Expenses</b>	<b>3,317,559</b>	<b>4,031,762</b>	<b>4,145,700</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>11,495,021</b>
<b>Net Performance before Depreciation &amp; Overhead Allocations</b>	<b>(842,321)</b>	<b>(2,201,114)</b>	<b>(1,472,695)</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>(4,516,130)</b>
Depreciation	281,892	281,892	270,170	-	-	-	-	-	-	-	-	-	833,954
<b>Overhead Allocations:</b>													
Risk Mgt	15,924	27,580	14,116	-	-	-	-	-	-	-	-	-	57,620
Rev Cycle	-	-	-	-	-	-	-	-	-	-	-	-	-
Internal Audit	8,764	8,764	8,764	-	-	-	-	-	-	-	-	-	26,293
Administration	42,751	44,720	36,228	-	-	-	-	-	-	-	-	-	123,699
Human Resources	40,021	40,952	41,667	-	-	-	-	-	-	-	-	-	122,641
Legal	11,073	20,375	13,855	-	-	-	-	-	-	-	-	-	45,303
Records	11,161	11,045	10,385	-	-	-	-	-	-	-	-	-	32,591
Compliance	9,887	12,321	6,171	-	-	-	-	-	-	-	-	-	28,378
Planning/Research	2,293	2,194	2,069	-	-	-	-	-	-	-	-	-	6,556
Finance	41,247	56,276	38,738	-	-	-	-	-	-	-	-	-	136,261
Public Relations	11,089	10,896	14,269	-	-	-	-	-	-	-	-	-	36,254
Information Technology	137,594	118,581	166,609	-	-	-	-	-	-	-	-	-	422,784
Budget & Decision Support	-	-	-	-	-	-	-	-	-	-	-	-	-
Corporate Quality	6,823	6,443	3,681	-	-	-	-	-	-	-	-	-	16,947
Managed Care Contract	11,284	13,253	10,022	-	-	-	-	-	-	-	-	-	34,559
<b>Total Overhead Allocations</b>	<b>349,911</b>	<b>373,400</b>	<b>366,576</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>1,089,886</b>
<b>Total Expenses</b>	<b>3,949,362</b>	<b>4,687,053</b>	<b>4,782,446</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>13,410,861</b>
<b>Net Margin</b>	<b>\$ (1,474,124)</b>	<b>\$ (2,856,405)</b>	<b>\$ (2,109,441)</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ (6,439,970)</b>
General Fund Support/ Transfer In	\$ 1,192,232	\$ 2,595,059	\$ 1,611,915	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 5,399,206

Admissions	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Current Year Total	YTD Budget	% Var to Budget	Prior YTD Total
Newborn	28	20	18	13	28	-	-	-	-	-	-	-	78	112	-30.4%	114
Pediatrics	20	130	152	-	-	-	-	-	-	-	-	-	51	440	-21.8%	61
Adult	111	159	170	193	-	-	-	-	-	-	-	-	522	617	-15.4%	408
Adjusted Admissions	457	454	480	-	-	-	-	-	-	-	-	-	1,392	1,371	1.5%	1,351
Patient Days																
Med Surg 2nd and 3rd Floor (14 beds)	88	94	75	-	-	-	-	-	-	-	-	-	257	360	-28.7%	388
Pediatrics (12 beds)	56	79	54	-	-	-	-	-	-	-	-	-	189	243	-22.2%	243
Telemedicine (22 beds)	190	243	275	-	-	-	-	-	-	-	-	-	708	846	-16.3%	818
ICU (6 beds)	73	73	49	-	-	-	-	-	-	-	-	-	195	234	-16.7%	234
Obstetrics (16 beds)	72	66	80	-	-	-	-	-	-	-	-	-	218	293	-25.6%	293
Total (70 beds)	479	555	533	-	-	-	-	-	-	-	-	-	1,567	1,976	-20.7%	1,976
Adjusted Acute Patient Days	1,378	1,482	1,326	-	-	-	-	-	-	-	-	-	4,186	4,570	-8.4%	4,569
Other Key Inpatient Statistics																
Occupancy Percentage	22%	26%	25%	-	-	-	-	-	-	-	-	-	24%	31%	-20.7%	31%
Average Daily Census (excl. newborns)	18.5	17.2	17.2	-	-	-	-	-	-	-	-	-	17.0	21.5	-20.5%	21.5
Average Length of Stay (excl. newborns)	17.7	20.3	19.6	-	-	-	-	-	-	-	-	-	19.2	24.3	-21.0%	24.3
Average Length of Stay (incl. newborns)	3.66	3.75	3.23	-	-	-	-	-	-	-	-	-	3.55	3.91	-9.3%	4.20
Average Length of Stay (incl. newborns)	3.45	3.58	3.15	-	-	-	-	-	-	-	-	-	3.39	3.82	-8.3%	3.82
Case Mix Index- Medicare	1.7578	1.6108	1.6108	-	-	-	-	-	-	-	-	-	1.6035	N/A	-	1.2458
Case Mix Index- Medicaid	0.7119	1.3270	0.5277	-	-	-	-	-	-	-	-	-	0.8653	N/A	-	0.9992
Case Mix Index- All Payers	0.9851	1.1229	1.0046	-	-	-	-	-	-	-	-	-	1.0477	N/A	-	1.0865
Emergency Room and Outpatients	127	108	113	-	-	-	-	-	-	-	-	-	348	318	9.4%	318
ER Visits	2,103	1,950	1,983	-	-	-	-	-	-	-	-	-	6,036	5,888	2.5%	5,888
Outpatient Visits	585	546	417	-	-	-	-	-	-	-	-	-	1,548	2,110	-26.6%	2,110
ER and Outpatient Visits	2,688	2,496	2,400	-	-	-	-	-	-	-	-	-	7,584	6,310	20.2%	7,820
Observation Patient Stays	196	163	175	-	-	-	-	-	-	-	-	-	534	422	26.5%	422
Surgery and Other Procedures																
Inpatient Surgeries	38	34	45	-	-	-	-	-	-	-	-	-	118	125	-5.6%	125
Endoscopies	6	4	5	-	-	-	-	-	-	-	-	-	15	47	-68.1%	47
Radiology Procedures	2,423	2,377	2,313	-	-	-	-	-	-	-	-	-	7,113	6,365	11.8%	6,364
Lab Charges	15,226	14,356	15,018	-	-	-	-	-	-	-	-	-	44,600	41,308	8.0%	41,308
Staffing																
Paid FTE per Adjusted Occupied Bed	293.02	286.55	284.62	-	-	-	-	-	-	-	-	-	288.10	288.87	-0.3%	284.06
Operational Performance																
Gross Revenue Per Adj Pat Day	8,199	7,285	8,248	-	-	-	-	-	-	-	-	-	7,911	7,145	10.7%	7,032
Net Revenue Per Adj Pat Day	1,791	1,193	1,990	-	-	-	-	-	-	-	-	-	1,658	1,558	6.4%	1,407
Salaries & Benefits as % of Net Pat Revenue	86%	114%	73%	-	-	-	-	-	-	-	-	-	88%	1,377	-0.3%	1,296
Labor Cost per Adj Pat Day	1,538	1,365	1,445	-	-	-	-	-	-	-	-	-	1,449	1,377	5.2%	1,296
Total Expense Per Adj Pat Day	2,457	2,734	3,126	-	-	-	-	-	-	-	-	-	2,772	2,511	10.4%	2,126

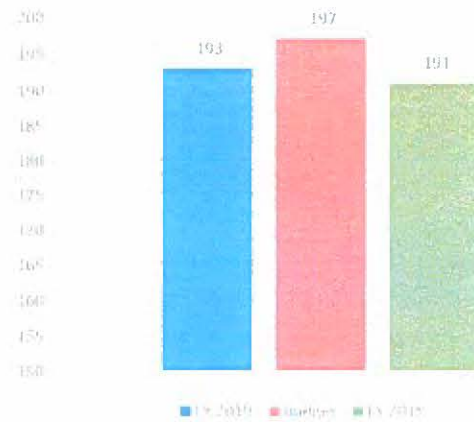


## LAKESIDE MEDICAL CENTER Inpatient

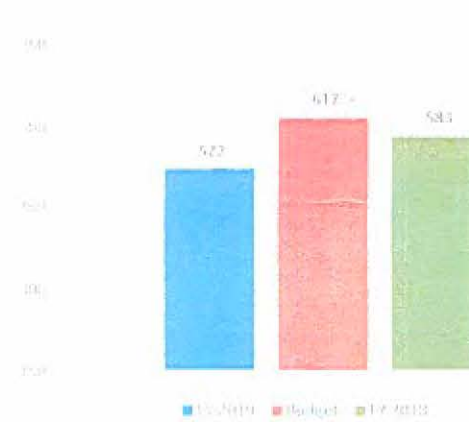


## LAKESIDE MEDICAL CENTER Inpatient

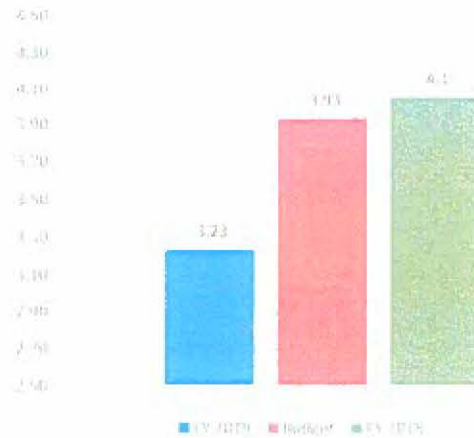
Admissions December



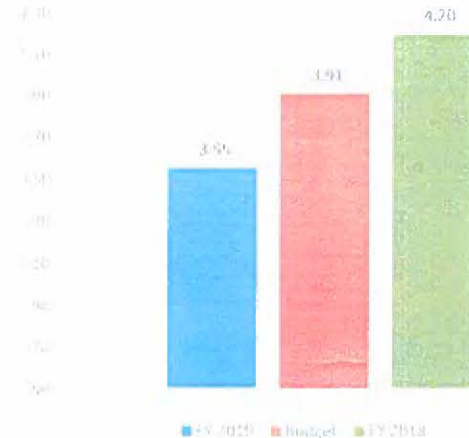
Admissions YTD



Average Length of Stay December



Average Length of Stay YTD

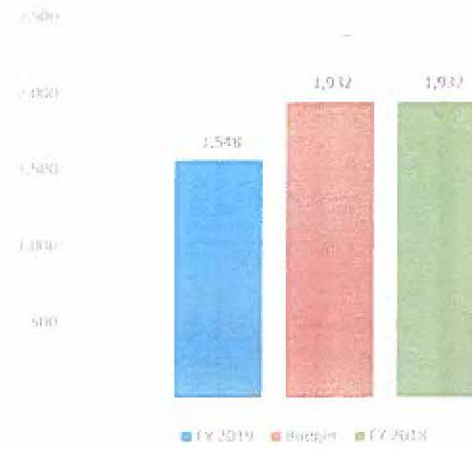


## LAKESIDE MEDICAL CENTER Outpatient

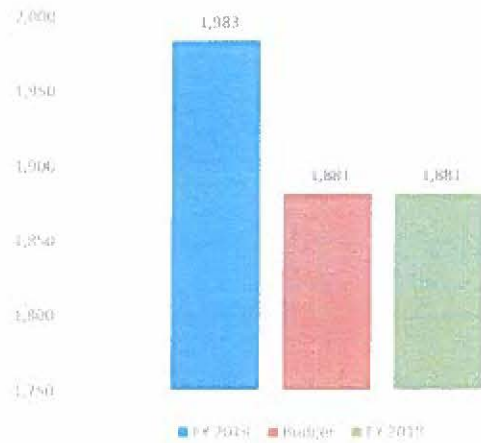
Outpatient Visits December



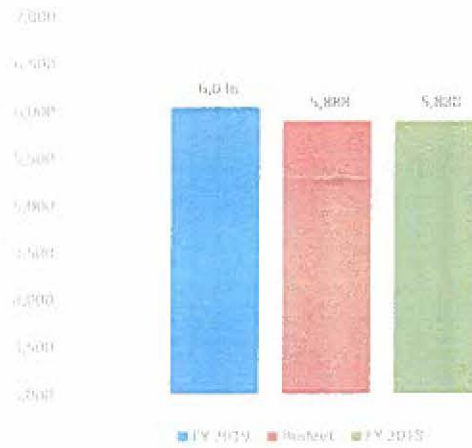
Outpatient Visits YTD



ER Visits December

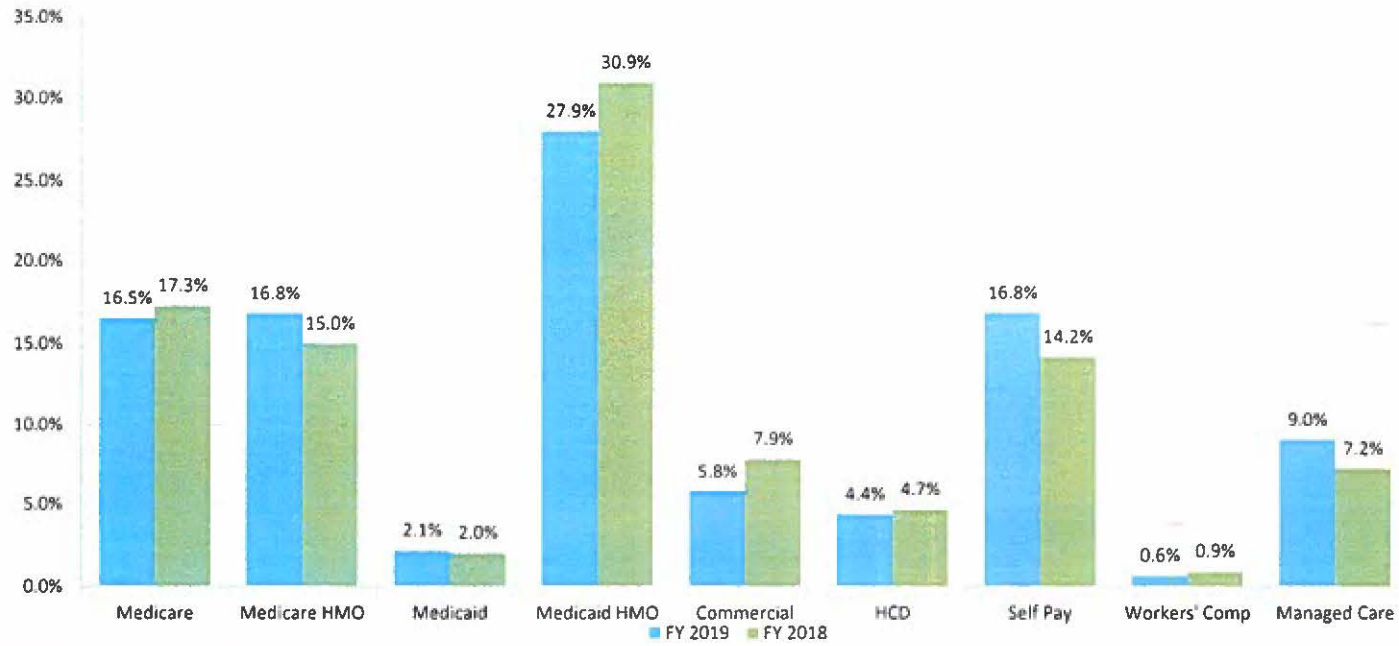


ER Visits YTD



## LAKESIDE MEDICAL CENTER Revenue

Payor Mix YTD





Health Care District  
PALM BEACH COUNTY

# **SUPPLEMENTAL INFORMATION**

## **HEALTHY PALM BEACHES**

FOR THE THIRD MONTH ENDED DECEMBER 31, 2018

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# **SUPPLEMENTAL INFORMATION**

## **PRIMARY CARE CLINICS**

# Primary Care Clinics Statement of Revenues and Expenses

FOR THE THIRD MONTH ENDED DECEMBER 31, 2018

Current Month								Fiscal Year To Date							
Actual	Budget	Variance	%	Prior Year	Variance	%		Actual	Budget	Variance	%	Prior Year	Variance	%	
2,006,898	1,888,776	118,122	6.3%	1,726,128	280,770	16.3%	Gross Patient Revenue	5,445,259	5,597,662	(152,403)	(2.7%)	5,272,768	172,491	3.3%	
955,352	452,798	(502,554)	(111.0%)	337,720	(617,632)	(182.9%)	Contractual Allowances	2,109,040	1,347,212	(761,828)	(56.5%)	1,184,455	(924,585)	(78.1%)	
411,855	719,664	307,809	42.8%	167,151	(244,704)	(146.4%)	Charity Care	1,304,575	2,129,235	824,660	38.7%	225,214	(1,079,361)	(479.3%)	
187,946	185,584	(2,362)	(1.3%)	190,754	2,807	1.5%	Bad Debt	533,590	549,078	15,488	2.8%	569,642	36,052	6.3%	
1,555,153	1,358,046	(197,107)	(14.5%)	695,625	(859,528)	(123.6%)	Total Contractuals and Bad Debts	3,947,205	4,025,525	78,320	1.9%	1,979,311	(1,967,894)	(99.4%)	
346,606	237,340	109,266	46.0%	-	346,606	0.0%	Other Patient Revenue	992,787	712,020	280,767	39.4%	-	992,787	0.0%	
798,350	768,070	30,280	3.9%	1,030,503	(232,153)	(22.5%)	Net Patient Revenue	2,490,841	2,284,157	206,684	9.0%	3,293,457	(802,616)	(24.4%)	
39.78%	40.66%			59.70%			Collection %	45.74%	40.81%			62.46%			
690,034	754,822	(64,788)	(8.6%)	610,755	79,279	13.0%	Grant Funds	1,871,266	2,264,466	(393,200)	(17.4%)	1,762,178	109,087	6.2%	
24,768	15,821	8,947	56.5%	109,616	(84,848)	(77.4%)	Other Revenue	38,234	47,463	(9,229)	(19.4%)	114,336	(76,102)	(66.6%)	
714,802	770,643	(55,841)	(7.2%)	720,371	(5,569)	(0.8%)	Total Other Revenues	1,909,499	2,311,929	(402,430)	(17.4%)	1,876,514	32,985	1.8%	
1,513,151	1,538,713	(25,562)	(1.7%)	1,750,874	(237,723)	(13.6%)	Total Revenues	4,400,340	4,596,086	(195,746)	(4.3%)	5,169,972	(769,631)	(14.9%)	
Direct Operational Expenses:															
1,317,029	1,261,616	(55,413)	(4.4%)	1,156,021	(161,008)	(13.9%)	Salaries and Wages	3,894,897	3,909,072	14,176	0.4%	3,520,684	(374,213)	(10.6%)	
314,881	358,121	43,240	12.1%	306,130	(8,752)	(2.9%)	Benefits	976,571	1,110,173	133,602	12.0%	916,208	(60,363)	(6.6%)	
50,770	63,886	13,116	20.5%	55,668	4,898	8.8%	Purchased Services	184,412	195,421	11,009	5.6%	123,727	(60,685)	(49.0%)	
14,573	40,677	26,104	64.2%	41,871	27,298	65.2%	Medical Supplies	83,706	120,434	36,728	30.5%	101,160	17,453	17.3%	
2,672	35,912	33,240	92.6%	5,444	2,772	50.9%	Other Supplies	40,767	103,196	62,429	60.5%	18,574	(22,194)	(119.5%)	
-	-	-	0.0%	-	-	0.0%	Contracted Physician Expense	-	-	-	0.0%	15,355	15,355	100.0%	
19,144	57,409	38,265	66.7%	-	(19,144)	0.0%	Medical Services	77,492	169,936	92,444	54.4%	-	(77,492)	0.0%	
36,129	47,823	11,694	24.5%	48,821	12,692	26.0%	Drugs	121,217	141,566	20,349	14.4%	148,021	26,803	18.1%	
32,150	6,166	(25,984)	(421.4%)	58,740	26,590	45.3%	Repairs & Maintenance	98,587	43,929	(54,658)	(124.4%)	137,038	38,451	28.1%	
104,526	109,866	5,340	4.9%	90,150	(14,375)	(15.9%)	Lease & Rental	318,291	329,598	11,307	3.4%	310,652	(7,639)	(2.5%)	
5,313	6,251	938	15.0%	8,236	2,923	35.5%	Utilities	16,439	18,753	2,314	12.3%	18,802	2,363	12.6%	
24,682	34,310	9,628	28.1%	9,617	(15,064)	(156.6%)	Other Expense	39,632	86,873	47,242	54.4%	69,778	30,146	43.2%	
2,170	2,469	299	12.1%	1,416	(753)	(53.2%)	Insurance	6,764	7,407	643	8.7%	4,972	(1,793)	(36.1%)	
1,924,039	2,024,506	100,467	5.0%	1,782,114	(141,924)	(8.0%)	Total Operational Expenses	5,858,775	6,236,358	377,584	6.1%	5,384,969	(473,806)	(8.8%)	
Net Performance before Depreciation & Overhead Allocations															
(410,887)	(485,793)	74,906	(15.4%)	(31,240)	(379,647)	1,215.3%		(1,458,434)	(1,640,272)	181,838	(11.1%)	(214,997)	(1,243,437)	578.3%	

Primary Care Clinics Statement of Revenues and Expenses

FOR THE THIRD MONTH ENDED DECEMBER 31, 2018

Current Month				Prior Year			
Actual	Budget	Variance	%	Prior Year	Variance	%	
5,158	20,384	15,226	74.7%	16,992	11,834	69.6%	Depreciation
Overhead Allocations:							
8,246	12,715	4,469	35.1%	13,641	5,395	39.5%	Risk Mgt
124,187	91,067	(33,120)	(36.4%)	34,355	(89,832)	(261.5%)	Rev Cycle
5,120	5,559	439	7.9%	-	(5,120)	0.0%	Internal Audit
16,141	20,787	4,646	22.4%	20,813	4,672	22.4%	Palm Springs Facility
21,164	24,923	3,759	15.1%	26,547	5,384	20.3%	Administration
34,863	34,245	(618)	(1.8%)	33,802	(1,061)	(3.1%)	Human Resources
6,094	12,733	4,639	36.4%	13,345	5,251	39.3%	Legal
6,067	8,444	2,377	28.2%	3,963	(2,104)	(53.1%)	Records
3,605	11,698	8,093	69.2%	6,603	2,998	45.4%	Compliance
1,209	1,428	219	15.3%	1,163	(46)	(4.0%)	Planning/Research
22,630	34,893	12,263	35.1%	32,431	(199)	(0.9%)	Finance
8,336	13,149	4,813	36.6%	7,362	(974)	(13.2%)	Public Relations
97,329	99,679	2,350	2.4%	80,805	(16,525)	(20.4%)	Information Technology
-	-	-	0.0%	2,397	2,397	100.0%	Budget & Decision Support
2,150	2,714	564	26.8%	1,372	(779)	(56.7%)	Corporate Quality
3,039	5,764	2,725	47.3%	4,302	1,263	29.4%	Managed Care Contract
362,180	379,798	17,618	4.6%	272,899	(89,282)	(32.7%)	Total Overhead Allocations
2,291,377	2,424,688	133,311	5.5%	2,072,005	(219,373)	(10.6%)	Total Expenses
\$ (778,226)	\$ (885,975)	\$ 107,749	(12.2%)	\$ (321,131)	\$ (457,095)	142.3%	Net Margin
(13,581)	203,615	217,196	106.7%	(10,221)	3,360	(32.9%)	Capital
\$ 930,086	\$ 1,087,500	\$ 157,414	14.5%	\$ -	\$ (930,086)	0.0%	General Fund Support/ Transfer In

Fiscal Year To Date				Prior Year			
Actual	Budget	Variance	%	Prior Year	Variance	%	
39,671	62,584	22,913	36.6%	50,976	11,305	22.2%	
33,660	38,145	4,485	11.8%	29,930	(3,730)	(12.5%)	
309,150	273,201	(35,949)	(13.2%)	130,010	(179,140)	(137.8%)	
15,360	16,677	1,317	7.9%	5	(15,355)	(293,589.1%)	
49,442	62,361	12,919	20.7%	62,646	13,204	21.1%	
72,262	74,769	2,507	3.4%	77,115	4,853	6.3%	
102,615	102,735	120	0.1%	76,863	(25,751)	(33.5%)	
26,465	38,199	11,734	30.7%	26,391	(74)	(0.3%)	
19,039	25,332	6,293	24.8%	12,975	(6,063)	(46.7%)	
16,578	35,094	18,516	52.8%	18,280	1,702	9.3%	
3,830	4,284	454	10.6%	4,032	202	5.0%	
79,601	104,679	25,078	24.0%	70,866	(8,735)	(12.3%)	
21,179	39,447	18,268	46.3%	20,828	(351)	(1.7%)	
246,981	299,037	52,056	17.4%	287,415	40,434	14.1%	
10,479	17,292	6,813	39.4%	13,355	2,876	21.5%	
9,900	8,142	(1,758)	(21.6%)	9,437	(463)	(4.9%)	
-	-	-	0.0%	7,046	7,046	100.0%	
1,016,541	1,139,394	122,853	10.8%	847,195	(169,346)	(20.0%)	
6,914,987	7,438,336	523,349	7.0%	6,283,140	(631,847)	(10.1%)	
\$ (2,514,646)	\$ (2,842,250)	\$ 327,604	(11.5%)	\$ (1,113,168)	\$ (1,401,478)	125.9%	
(13,581)	610,845	624,426	102.2%	-	13,581	0.0%	
\$ 2,627,860	\$ 3,262,500	\$ 634,640	19.5%	\$ -	\$ (2,627,860)	0.0%	

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[illegible]

FOR THE THIRD MONTH ENDED DECEMBER 31, 2018

	Clinic Administration	West Palm Beach Clinic	Lantana Clinic	Delray Clinic	Belle Glade Clinic	Jerome Golden Center	Lewis Center	Rams Clinic	Lake Worth Clinic	Jupiter Clinic	West Boca Clinic	Suboxone Clinic	Mobile Van	Total
Gross Patient Revenue	-	795,766	906,523	682,183	477,819	-	208,294	-	694,518	230,051	436,788	-	87,389	4,519,332
Contractual Allowances	-	355,538	321,311	330,751	238,983	(5,021)	106,488	158	243,833	73,829	171,019	-	26,770	1,863,659
Charity Care	-	162,995	215,666	96,085	61,884	-	40,111	-	159,823	38,010	90,973	-	15,287	880,834
Bad Debt	-	89,669	140,760	83,978	74,621	(2,670)	42,457	(92)	37,681	7,019	24,443	-	21,670	519,537
Total Contractual Allowances and Bad Debt	-	608,203	677,738	510,814	375,488	(7,690)	189,056	66	441,336	118,859	286,434	-	63,727	3,264,030
Other Patient Revenue	-	142,874	107,479	135,309	93,950	-	18,677	-	104,277	28,517	32,313	-	8,100	671,495
Net Patient Revenue	-	330,438	336,265	306,678	196,281	7,690	37,915	(66)	357,459	139,708	182,667	-	31,762	1,926,797
Collection %	0.00%	41.52%	37.09%	44.96%	41.08%	0.00%	18.20%	0.00%	51.47%	60.73%	41.82%	0.00%	36.35%	42.63%
Grant Funds	204,770	223,283	216,998	196,653	125,986	-	55,189	-	246,724	71,043	107,197	51,586	8,798	1,508,227
Other Revenue	6,705	4,257	1,062	1,690	3,461	-	148	-	3,516	2,812	842	13,506	4	38,001
Total Other Revenues	211,475	227,541	218,060	198,343	129,447	-	55,337	-	250,240	73,855	108,038	65,092	8,802	1,546,228
Total Revenues	211,475	557,978	554,324	505,021	325,728	7,690	93,252	(66)	607,699	213,563	290,705	65,092	40,564	3,473,025
Direct Operational Expenses:														
Salaries and Wages	434,096	479,349	472,150	400,812	266,540	-	116,204	-	491,180	149,870	221,348	80,906	61,574	3,174,028
Benefits	76,876	110,106	120,550	115,441	68,181	-	25,689	-	134,490	39,122	52,617	18,975	20,208	782,253
Purchased Services	8,935	20,771	20,737	15,294	15,989	-	2,419	-	27,596	20,957	18,707	284	4,851	156,540
Medical Supplies	-	4,347	15,661	3,785	3,587	-	1,677	-	6,711	746	2,324	-	-	38,838
Other Supplies	9,715	595	8,881	(714)	702	-	57	-	1,162	421	574	-	1,865	23,259
Contracted Physician Expense	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Medical Services	-	13,398	16,378	-	14,554	-	1,602	-	15,601	2,650	13,309	-	-	77,492
Drugs	-	26,563	46,502	23,827	10,508	-	916	-	6,727	4,608	952	-	0	120,603
Repairs & Maintenance	-	15,220	15,157	15,864	8,955	-	2,528	-	15,759	5,906	8,505	900	1,063	89,856
Lease & Rental	-	34,355	20,030	25,945	41,761	5,013	636	-	57,685	19,327	28,562	-	-	233,314
Utilities	-	272	986	272	5,877	-	544	-	2,630	1,692	1,353	-	-	13,625
Other Expense	26,424	1,228	811	1,336	1,057	-	1,447	-	553	345	2,518	-	108	35,828
Insurance	-	1,271	1,069	864	316	90	-	-	200	169	193	-	2,387	6,559
Total Operational Expenses	556,046	707,474	738,913	602,726	438,028	5,103	153,720	-	760,293	245,812	350,961	101,065	82,057	4,752,196
Net Performance before Depreciation & Overhead Allocations	(344,571)	(149,496)	(184,588)	(97,705)	(112,300)	2,588	(60,468)	(66)	(152,594)	(32,248)	(60,256)	(35,973)	(51,493)	(1,279,172)
Depreciation	2,231	1,330	1,143	449	627	107	322	14	1,815	1,281	1,199	-	18,750	29,268
Overhead Allocations:														
Risk Mgt	3,450	3,709	3,706	3,275	2,105	-	779	-	4,323	1,481	2,222	1,387	624	27,060
Rev Cycle	-	38,502	38,470	33,998	21,846	-	8,083	-	44,873	15,374	23,062	14,397	6,481	245,086
Internal Audit	1,574	1,693	1,691	1,495	960	-	355	-	1,973	676	1,014	633	285	12,348
Palm Springs Facility	43,986	-	-	-	-	-	-	-	-	-	-	-	-	43,986
Administration	7,406	7,963	7,956	7,031	4,518	-	1,672	-	9,280	3,180	4,770	2,977	1,340	58,094
Human Resources	6,368	13,161	12,355	11,038	6,368	-	2,123	-	12,142	4,670	8,067	4,246	1,698	82,236
Legal	2,712	2,916	2,914	2,575	1,655	-	612	-	3,399	1,164	1,747	1,090	491	21,276
Records	1,951	2,098	2,096	1,852	1,190	-	440	-	2,445	838	1,257	784	353	15,306
Compliance	1,699	1,827	1,825	1,613	1,037	-	384	-	2,129	729	1,094	683	308	13,328
Planning/Research	393	422	422	373	239	-	89	-	492	169	253	158	71	3,079
Finance	8,158	8,771	8,764	7,745	4,977	-	1,841	-	10,223	3,502	5,254	3,280	1,477	63,993
Public Relations	2,171	2,334	2,332	2,061	1,324	-	490	-	2,720	932	1,398	873	393	17,025
Information Technology	25,314	27,216	27,193	24,032	15,442	-	5,714	-	31,719	10,867	16,302	10,177	4,581	198,556
Budget & Decision Support	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Corporate Quality	1,015	1,091	1,090	963	619	-	229	-	1,271	436	653	408	184	7,959
Managed Care Contract	-	1,305	1,304	1,152	740	-	274	-	1,521	521	782	488	220	8,307
Total Overhead Allocations	106,197	113,007	112,119	99,203	63,021	-	23,085	-	128,511	44,538	67,873	41,580	18,506	817,641
Total Expenses	664,475	821,811	852,175	702,378	501,676	5,209	177,127	14	890,618	291,631	420,032	142,645	129,312	5,599,105
Net Margin	\$ (453,000)	\$ (263,833)	\$ (297,850)	\$ (197,357)	\$ (175,948)	\$ 2,481	\$ (83,875)	\$ (80)	\$ (282,919)	\$ (78,068)	\$ (129,327)	\$ (77,554)	\$ (88,748)	\$ (2,126,080)
Capital	-	-	-	-	-	-	-	-	-	-	-	-	-	-
General Fund Support/ Transfer In	\$ 2,627,860	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2,627,860



**Primary Care Clinics- Medical Statement of Revenue and Expenses**  
**FOR THE THIRD MONTH ENDED DECEMBER 31, 2018**

Current Month							Fiscal Year To Date						
Actual	Budget	Variance	%	Prior Year	Variance	%	Actual	Budget	Variance	%	Prior Year	Variance	%
1,748,762	1,549,791	198,971	12.8%	1,425,915	322,847	22.6%	4,519,332	4,594,725	(75,393)	(1.6%)	4,299,396	219,936	5.1%
869,005	382,027	(486,978)	(127.5%)	358,242	(510,763)	(142.6%)	1,863,659	1,137,824	(725,835)	(63.8%)	1,250,348	(613,311)	(49.1%)
300,323	562,116	261,793	46.6%	152,762	(147,561)	(96.6%)	880,834	1,663,107	782,273	47.0%	184,965	(695,869)	(376.2%)
189,154	170,751	(18,403)	(10.8%)	178,568	(10,586)	(5.9%)	519,537	505,193	(14,344)	(2.8%)	527,945	8,408	1.6%
1,358,482	1,114,894	(243,588)	(21.8%)	689,572	(668,910)	(97.0%)	3,264,030	3,306,124	42,094	1.3%	1,963,258	(1,300,772)	(66.3%)
232,242	148,099	84,143	56.8%	-	232,242	0.0%	671,495	444,297	227,198	51.1%	-	671,495	0.0%
622,522	582,996	39,526	6.8%	736,343	(113,822)	(15.5%)	1,926,797	1,732,898	193,899	11.2%	2,336,138	(409,342)	(17.5%)
35.60%	37.62%			51.64%			42.63%	37.71%			54.34%		
552,339	560,993	(8,654)	(1.5%)	510,864	41,476	8.1%	1,508,227	1,682,979	(174,752)	(10.4%)	1,467,793	40,434	2.8%
24,768	12,988	11,780	90.7%	109,616	(84,848)	(77.4%)	38,001	38,964	(963)	(2.5%)	114,336	(76,335)	(66.8%)
577,107	573,981	3,126	0.5%	620,480	(43,373)	(7.0%)	1,546,228	1,721,943	(175,715)	(10.2%)	1,582,130	(35,901)	(2.3%)
1,199,629	1,156,977	42,652	3.7%	1,356,823	(157,194)	(11.6%)	3,473,025	3,454,841	18,184	0.5%	3,918,268	(445,243)	(11.4%)
Direct Operational Expenses:													
1,083,982	1,028,755	(55,227)	(5.4%)	952,590	(131,392)	(13.8%)	3,174,028	3,187,545	13,517	0.4%	2,849,092	(324,936)	(11.4%)
254,861	290,477	35,616	12.3%	247,009	(7,851)	(3.2%)	782,253	900,478	118,225	13.1%	729,336	(52,917)	(7.3%)
41,480	52,229	10,749	20.6%	44,608	3,128	7.0%	156,540	156,456	(84)	(0.1%)	99,594	(56,946)	(57.2%)
6,682	17,067	10,385	60.8%	19,732	13,051	66.1%	38,838	50,523	11,685	23.1%	47,195	8,357	17.7%
8,573	24,177	15,604	64.5%	6,223	(2,351)	(37.8%)	23,259	69,975	46,716	66.8%	16,873	(6,386)	(37.8%)
-	-	-	0.0%	-	-	0.0%	-	-	-	0.0%	15,355	15,355	100.0%
19,144	57,409	-	0.0%	-	(19,144)	0.0%	77,492	169,936	-	0.0%	-	(77,492)	0.0%
36,054	46,175	10,121	21.9%	47,187	11,133	23.6%	120,603	136,684	16,081	11.8%	143,816	23,213	16.1%
28,281	4,409	(23,872)	(541.4%)	53,581	25,300	47.2%	89,856	27,872	(61,984)	(222.4%)	121,208	31,352	25.9%
74,267	82,422	8,155	9.9%	72,929	(1,338)	(1.8%)	233,314	247,266	13,952	5.6%	239,669	6,354	2.7%
4,340	5,503	1,163	21.1%	7,209	2,869	39.8%	13,625	16,509	2,884	17.5%	16,447	2,822	17.2%
20,454	31,285	10,831	34.6%	8,280	(12,174)	(147.0%)	35,828	76,653	40,825	53.3%	59,259	23,431	39.5%
2,105	2,410	305	12.7%	1,331	(774)	(58.2%)	6,559	7,230	671	9.3%	4,671	(1,889)	(40.4%)
1,580,223	1,642,318	23,831	1.5%	1,460,678	(119,545)	(8.2%)	4,752,196	5,047,127	202,486	4.0%	4,342,515	(409,681)	(9.4%)
Net Performance before Depreciation													
(380,594)	(485,341)	66,482	(13.7%)	(103,855)	(276,739)	266.5%	(1,279,172)	(1,592,286)	220,670	(13.9%)	(424,247)	(854,924)	201.5%
& Overhead Allocations													

Primary Care Clinics - Medical Statement of Revenue and Expenses

FOR THE THIRD MONTH ENDED DECEMBER 31, 2018

	Actual	Budget	Variance	%	Prior Year	Variance	%
Overhead Allocations:							
Risk Mgt	6,630	10,221	3,591	35.1%	10,702	4,072	38.1%
Rev Cycle	98,452	72,195	(26,257)	(36.4%)	26,627	(71,825)	(269.7%)
Internal Audit	4,116	4,469	353	7.9%	-	(4,116)	0.0%
Palm Springs Facility	14,360	18,493	4,133	22.4%	17,816	3,456	19.4%
Administration	27,940	20,036	3,022	15.1%	20,827	3,812	18.3%
Human Resources	6,507	10,236	3,729	36.4%	10,469	3,962	37.8%
Legal	2,898	9,404	6,506	69.2%	5,180	2,282	44.1%
Records	4,877	6,789	1,912	28.2%	3,109	(1,768)	(56.9%)
Compliance	972	1,148	176	15.3%	912	(60)	(6.6%)
Planning/Research	18,193	28,051	9,858	35.1%	17,597	(596)	(3.4%)
Finance	6,701	10,572	3,871	36.6%	5,775	(926)	(16.0%)
Public Relations	78,246	80,135	1,889	2.4%	63,392	(14,854)	(23.4%)
Information Technology	1,729	2,181	452	20.7%	1,076	(653)	(60.6%)
Budget & Decision Support	2,409	4,569	2,160	47.3%	3,334	925	27.7%
Managed Care Contract	291,044	305,943	14,899	4.9%	214,206	(76,838)	(35.9%)
Total Overhead Allocations	1,881,166	1,954,333	73,167	3.7%	1,679,401	(201,765)	(12.0%)
Total Expenses	111.3%	115,819	(14.5%)	3.7%	(322,578)	(358,959)	111.3%
Net Margin	0.0%	75,000	75,000	100.0%	-	-	0.0%
Capital	930,086	1,087,500	157,414	14.5%	-	(930,086)	0.0%
General Fund Support/ Transfer In							

# Primary Care Clinics- Dental Statement of Revenues and Expenses by Location

FOR THE THIRD MONTH ENDED DECEMBER 31, 2018

	Dental Clinic Administration	West Palm Beach Dental Clinic	Lantana Dental Clinic	Delray Dental Clinic	Belle Glade Dental Clinic	Lake Worth Dental Clinic	West Boca Dental Clinic	Total
<b>Gross Patient Revenue</b>	-	329,594	246,574	236,150	113,611	-	-	925,928
Contractual Allowances	-	91,011	57,465	63,935	32,969	-	-	245,380
Charity Care	-	132,747	125,297	121,353	44,346	-	-	423,742
Bad Debt	-	(360)	6,965	3,916	3,532	-	-	14,053
Total Contractual Allowances and Bad Debt	-	223,398	189,727	189,203	80,846	-	-	683,175
Other Patient Revenue	-	108,375	72,634	76,430	63,852	-	-	321,292
<b>Net Patient Revenue</b>	-	214,571	129,480	123,377	96,617	-	-	564,044
Collection %	-	65.10%	52.51%	52.25%	85.04%	0.00%	0.00%	60.92%
Grant Funds	34,900	117,001	85,623	86,056	39,458	-	-	363,038
Other Revenue	-	-	-	-	233	-	-	233
<b>Total Other Revenues</b>	34,900	117,001	85,623	86,056	39,691	-	-	363,271
<b>Total Revenues</b>	34,900	331,572	215,102	209,433	136,307	-	-	927,316
<b>Direct Operational Expenses:</b>								
Salaries and Wages	71,599	232,037	173,495	164,807	78,937	-	-	720,868
Benefits	12,507	68,287	42,702	48,505	22,276	-	-	194,318
Purchased Services	-	6,235	5,222	5,144	11,271	-	-	27,872
Medical Supplies	-	14,909	12,829	11,503	5,628	-	-	44,868
Other Supplies	-	10,064	1,810	5,264	371	-	-	17,509
Contracted Physician Expense	-	-	-	-	-	-	-	-
Medical Services	-	-	-	-	-	-	-	-
Drugs	-	39	300	35	240	-	-	614
Repairs & Maintenance	-	2,167	2,453	2,036	2,074	-	-	8,731
Lease & Rental	-	30,224	18,308	17,556	18,888	-	-	84,977
Utilities	-	428	1,142	478	816	-	-	2,814
Other Expense	1,217	1,645	2,217	(1,783)	512	-	-	3,804
Insurance	-	-	-	-	205	-	-	205
<b>Total Operational Expenses</b>	85,408	366,036	260,477	253,490	141,168	-	-	1,106,578
<b>Net Performance before Depreciation &amp; Overhead Allocations</b>	(50,508)	(34,463)	(45,375)	(44,056)	(4,860)	-	-	(179,262)
Depreciation	-	3,779	1,633	2,554	2,437	-	-	10,403
<b>Overhead Allocations:</b>								
Risk Mgt	428	2,077	1,823	1,408	863	-	-	6,600
Rev Cycle	-	21,561	18,928	14,619	8,957	-	-	64,065
Internal Audit	195	948	832	643	394	-	-	3,012
Palm Springs Facility	5,457	-	-	-	-	-	-	5,457
Administration	919	4,459	3,915	3,023	1,852	-	-	14,168
Human Resources	849	6,368	5,944	4,670	2,547	-	-	20,379
Legal	336	1,633	1,434	1,107	678	-	-	5,189
Records	242	1,175	1,031	797	488	-	-	3,733
Compliance	211	1,023	898	694	425	-	-	3,250
Planning/Research	49	236	207	160	98	-	-	751
Finance	1,012	4,912	4,312	3,330	2,041	-	-	15,607
Public Relations	269	1,307	1,147	886	543	-	-	4,153
Information Technology	3,140	15,241	13,379	10,333	6,331	-	-	48,425
Budget & Decision Support	-	-	-	-	-	-	-	-
Corporate Quality	126	611	536	414	254	-	-	1,941
Managed Care Contract	-	731	642	496	304	-	-	2,172
<b>Total Overhead Allocations</b>	13,233	62,283	55,029	42,580	25,775	-	-	198,901
<b>Total Expenses</b>	98,641	432,098	317,139	298,624	169,380	-	-	1,315,882
<b>Net Margin</b>	\$ (63,741)	\$ (100,526)	\$ (102,036)	\$ (89,190)	\$ (33,072)	\$ -	\$ -	\$ (388,566)
<b>Capital</b>	-	-	-	-	(13,581)	-	-	(13,581)
<b>General Fund Support/ Transfer In</b>	-	-	-	-	-	-	-	\$ -

# Primary Care Clinics- Dental Statement of Revenues and Expenses

FOR THE THIRD MONTH ENDED DECEMBER 31, 2018

Current Month							Fiscal Year To Date							
Actual	Budget	Variance	%	Prior Year	Variance	%		Actual	Budget	Variance	%	Prior Year	Variance	%
258,136	338,985	(80,850)	(23.9%)	300,213	(42,077)	(14.0%)	Gross Patient Revenue	925,928	1,002,937	(77,010)	(7.7%)	973,372	(47,445)	(4.9%)
86,347	70,771	(15,576)	(22.0%)	(20,522)	(106,869)	520.8%	Contractual Allowances	245,380	209,388	(35,992)	(17.2%)	(65,893)	(311,273)	472.4%
111,533	157,548	46,016	29.2%	14,390	(97,143)	(675.1%)	Charity Care	423,742	466,128	42,386	9.1%	40,249	(383,492)	(952.8%)
(1,208)	14,833	16,041	108.1%	12,185	13,393	109.9%	Bad Debt	14,053	43,885	29,832	68.0%	41,697	27,644	66.3%
196,671	243,152	46,481	19.1%	6,053	(190,618)	(3,149.0%)	Total Contractuals and Bad Debts	683,175	719,401	36,226	5.0%	16,053	(667,122)	(4,155.7%)
114,364	89,241	25,123	28.2%	-	114,364	0.0%	Other Operating Revenue	321,292	267,723	53,569	20.0%	-	321,292	0.0%
175,828	185,074	(9,246)	(5.0%)	294,160	(118,332)	(40.2%)	Net Patient Revenue	564,044	551,259	12,785	2.3%	957,319	(393,275)	(41.1%)
68.11%	54.60%			97.98%			Collection %	60.92%	54.96%		98.35%			
137,695	193,829	(56,134)	(29.0%)	99,891	37,803	37.8%	Grant Funds	363,038	581,487	(218,449)	(37.6%)	294,385	68,653	23.3%
-	2,833	(2,833)	(100.0%)	-	-	0.0%	Other Revenue	233	8,499	(8,266)	(97.3%)	-	233	0.0%
137,695	196,662	(58,967)	(30.0%)	99,891	37,803	37.8%	Total Other Revenues	363,271	589,986	(226,715)	(38.4%)	294,385	68,886	23.4%
313,523	381,736	(68,213)	(17.9%)	394,051	(80,528)	(20.4%)	Total Revenues	927,316	1,141,245	(213,929)	(18.7%)	1,251,704	(324,388)	(25.9%)
Direct Operational Expenses														
233,047	232,861	(186)	(0.1%)	203,431	(29,616)	(14.6%)	Salaries and Wages	720,868	721,527	659	0.1%	671,592	(49,276)	(7.3%)
60,021	67,644	7,624	11.3%	59,120	(900)	(1.5%)	Benefits	194,318	209,695	15,377	7.3%	186,871	(7,446)	(4.0%)
9,290	11,657	2,367	20.3%	11,060	1,769	16.0%	Purchased Services	27,872	38,965	11,093	28.5%	24,133	(3,739)	(15.5%)
7,891	23,610	15,719	66.6%	22,138	14,247	64.4%	Medical Supplies	44,868	69,911	25,043	35.8%	53,964	9,096	16.9%
(5,902)	11,735	17,637	150.3%	(778)	5,123	(658.1%)	Other Supplies	17,509	33,221	15,712	47.3%	1,701	(15,808)	(929.5%)
-	-	-	0.0%	-	-	0.0%	Contracted Physician Expense	-	-	-	0.0%	-	-	0.0%
-	-	-	0.0%	-	-	0.0%	Medical Services	-	-	-	0.0%	-	-	0.0%
74	1,648	1,574	95.5%	1,634	1,560	95.5%	Drugs	614	4,882	4,268	87.4%	4,204	3,590	85.4%
3,870	1,757	(2,113)	(120.3%)	5,159	1,289	25.0%	Repairs & Maintenance	8,731	16,057	7,326	45.6%	15,830	7,099	44.8%
30,259	27,444	(2,815)	(10.3%)	17,221	(13,038)	(75.7%)	Lease & Rental	84,977	82,332	(2,645)	(3.2%)	70,984	(13,993)	(19.7%)
973	748	(225)	(30.1%)	1,027	54	5.2%	Utilities	2,814	2,244	(570)	(25.4%)	2,355	(459)	(19.5%)
4,227	3,025	(1,202)	(39.8%)	1,338	(2,890)	(216.0%)	Other Expense	3,804	10,220	6,416	62.8%	10,519	6,715	63.8%
85	59	(6)	(10.0%)	86	21	24.4%	Insurance	205	177	(28)	(15.7%)	301	96	32.0%
343,816	382,188	38,372	10.0%	321,436	(22,380)	(7.0%)	Total Operational Expenses	1,106,578	1,189,231	82,653	7.0%	1,042,454	(64,124)	(6.2%)
Net Performance before														
(30,293)	(452)	(29,841)	6,602.1%	72,615	(102,908)	(141.7%)	Depreciation & Overhead Allocations	(179,262)	(47,986)	(131,276)	273.6%	209,250	(388,512)	(185.7%)

# Primary Care Clinics- Dental Statement of Revenues and Expenses

FOR THE THIRD MONTH ENDED DECEMBER 31, 2018

Current Month							
Actual	Budget	Variance	%	Prior Year	Variance	%	
(4,741)	14,312	19,053	133.1%	12,475	17,216	138.0%	Depreciation
Overhead Allocations							
1,617	2,494	877	35.2%	2,939	1,323	45.0%	Risk Mgt
25,735	18,872	(6,863)	(36.4%)	7,728	(18,007)	(233.0%)	Rev Cycle
1,004	1,090	86	7.9%	-	(1,004)	0.0%	Internal Audit
1,781	2,294	513	22.3%	2,997	1,215	40.6%	Palm Springs Facility
4,150	4,887	737	15.1%	5,721	1,571	27.5%	Administration
6,924	6,801	(123)	(1.8%)	8,293	1,369	16.5%	Human Resources
1,587	2,497	910	36.4%	2,876	1,289	44.8%	Legal
1,189	1,655	466	28.1%	854	(336)	(39.3%)	Records
707	2,294	1,587	69.2%	1,423	716	50.3%	Compliance
237	280	43	15.3%	251	13	5.4%	Planning/Research
4,437	6,842	2,405	35.2%	4,834	396	8.2%	Finance
1,634	2,577	943	36.6%	1,586	(48)	(3.0%)	Public Relations
19,083	19,544	461	2.4%	17,412	(1,671)	(9.6%)	Information Technology
-	-	-	0.0%	517	517	100.0%	Budget & Decision Support
422	533	111	20.9%	296	(126)	(42.6%)	Corporate Quality
630	1,195	565	47.3%	968	338	34.9%	Managed Care Contract
71,137	73,855	2,718	3.7%	58,693	(12,444)	(21.2%)	Total Overhead Allocations
410,211	470,355	60,144	12.8%	392,604	(17,608)	(4.5%)	Total Expenses
\$ (96,689)	\$ (88,619)	\$ (8,070)	9.1%	\$ 1,448	\$ (98,136)	(6,779.5%)	Net Margin
(13,581)	128,615	142,196	110.6%	(10,221)	3,360	(32.9%)	Capital
\$ -	\$ -	\$ -	0.0%	\$ -	\$ -	0.0%	General Fund Support/ Transfer In

Fiscal Year To Date							
Actual	Budget	Variance	%	Prior Year	Variance	%	
10,403	44,368	33,965	76.6%	37,424	27,021	72.2%	
6,600	7,482	882	11.8%	6,451	(149)	(2.3%)	
64,065	56,616	(7,449)	(13.2%)	29,245	(34,819)	(119.1%)	
3,012	3,270	258	7.9%	1	(3,010)	(266,414.2%)	
5,457	6,882	1,425	20.7%	9,020	3,563	39.5%	
14,168	14,661	493	3.4%	16,617	2,449	14.7%	
20,379	20,403	24	0.1%	18,857	(1,521)	(8.1%)	
5,189	7,491	2,302	30.7%	5,687	498	8.8%	
3,733	4,965	1,232	24.8%	2,796	(937)	(33.5%)	
3,250	6,882	3,632	52.8%	3,939	689	17.5%	
751	840	89	10.6%	869	118	13.6%	
15,607	20,526	4,919	24.0%	15,271	(337)	(2.2%)	
4,153	7,731	3,578	46.3%	4,488	336	7.5%	
48,425	58,632	10,207	17.4%	61,934	13,509	21.8%	
-	-	-	0.0%	1,518	1,518	100.0%	
1,941	1,599	(342)	(21.4%)	2,034	92	4.5%	
2,172	3,585	1,414	39.4%	3,004	833	27.7%	
198,901	221,565	22,664	10.2%	181,731	(17,169)	(9.4%)	
1,315,882	1,455,164	139,282	9.6%	1,261,609	(54,273)	(4.3%)	
\$ (388,566)	\$ (313,919)	\$ (74,647)	23.8%	\$ (9,905)	\$ (378,661)	3,822.8%	
(13,581)	385,845	399,426	103.5%	-	13,581	0.0%	
\$ -	\$ -	\$ -	0.0%	\$ -	\$ -	0.0%	

	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Current Year Total	Current YTD Budget	%Var to Budget	Prior Year Total
<b>Clinic Visits - Adults and Pediatrics</b>																
West Palm Beach	1,661	1,289	1,312										4,262	4,444	(4.1%)	4,759
Delray	1,355	1,162	1,134										3,651	4,124	(11.5%)	4,386
Lantana	1,411	1,309	1,261										3,981	4,279	(7.0%)	3,874
Belle Glade	1,030	790	839										2,659	2,243	18.5%	2,545
Jerome Golden Center	-	-	-										-	-	0.0%	746
Lewis Center	267	233	229										729	624	16.8%	571
Lake Worth & Women's Health Care	1,608	1,153	1,104										3,865	4,495	(14.0%)	4,468
Jupiter Clinic	421	457	418										1,296	1,502	(13.7%)	1,370
West Boca & Women's Health Care	1,009	861	781										2,651	1,980	33.9%	1,198
Mobile Van	239	186	119										544	520	4.6%	-
Suboxone	361	289	222										872	824	5.8%	684
<b>Total Clinic Visits</b>	<b>9,362</b>	<b>7,729</b>	<b>7,419</b>	-	-	-	-	-	-	-	-	-	<b>24,510</b>	<b>25,035</b>	<b>(2.1%)</b>	<b>24,601</b>
<b>Dental Visits</b>																
West Palm Beach	918	722	704										2,344	2,545	(7.9%)	2,827
Lantana	653	508	468										1,629	2,406	(32.3%)	2,243
Delray	676	522	446										1,644	1,946	(15.5%)	2,124
Belle Glade	406	260	230										896	1,048	(14.5%)	1,103
Lake Worth	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
West Boca	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0.0%	-
<b>Total Dental Visits</b>	<b>2,653</b>	<b>2,012</b>	<b>1,848</b>	-	-	-	-	-	-	-	-	-	<b>6,513</b>	<b>7,945</b>	<b>(18.0%)</b>	<b>8,297</b>
<b>Total Medical and Dental Visits</b>	<b>12,015</b>	<b>9,741</b>	<b>9,267</b>	-	-	-	-	-	-	-	-	-	<b>31,023</b>	<b>32,980</b>	<b>(5.9%)</b>	<b>32,898</b>
<b>Mental Health Counselors (non-volunteer)</b>																
West Palm Beach	124	100	103										327	239	36.8%	204
Delray	137	118	102										357	236	51.3%	273
Lantana	467	414	368										1,249	658	89.8%	510
Belle Glade	17	21	22										60	41	46.3%	45
Lewis Center	268	219	192										679	270	151.5%	184
Lake Worth	173	99	73										345	356	(3.1%)	282
Jupiter	-	-	-										-	82	(100.0%)	68
West Boca	-	-	-										-	56	(100.0%)	44
Mobile Van	-	-	-										-	-	-	-
<b>Total Mental Health Screenings</b>	<b>1,186</b>	<b>971</b>	<b>860</b>	-	-	-	-	-	-	-	-	-	<b>3,017</b>	<b>1,938</b>	<b>55.7%</b>	<b>1,610</b>



# **SUPPLEMENTAL INFORMATION**

## **MEDICAID MATCH FUND**

FOR THE THIRD MONTH ENDED DECEMBER 31, 2018

	Actual	Budget	Variance	%	Prior Year	Variance	%
\$	491,667	\$	491,667	0.0%	\$	491,667	0.0%
	834	414	420	101.3%	677	157	23.2%
	492,501	492,081	420	0.1%	492,344	157	0.0%
0.0% Salaries and Wages	-	-	-	0.0%	-	-	0.0%
0.0% Benefits	-	-	-	0.0%	-	-	0.0%
0.0% Purchased Services	-	-	-	0.0%	-	-	0.0%
0.0% Medical Supplies	-	-	-	0.0%	-	-	0.0%
0.0% Other Supplies	-	-	-	0.0%	-	-	0.0%
0.0% Contracted Physician Expense	-	-	-	0.0%	-	-	0.0%
0.0% Medical Services	-	-	-	0.0%	-	-	0.0%
0.0% Drugs	-	-	-	0.0%	-	-	0.0%
0.0% Repairs & Maintenance	-	-	-	0.0%	-	-	0.0%
0.0% Lease & Rental	-	-	-	0.0%	-	-	0.0%
0.0% Utilities	-	-	-	0.0%	-	-	0.0%
0.0% Other Expense	-	-	-	0.0%	-	-	0.0%
0.0% Insurance	-	-	-	0.0%	-	-	0.0%
1,441,591	1,441,591	-	-	0.0%	1,415,952	(25,638)	(1.8%)
Net Performance before Overhead	(949,090)	(949,510)	420	(0.0%)	(923,609)	(25,481)	2.8%
Overhead Allocations:							
0.0% Risk Mgt	-	-	-	0.0%	-	-	0.0%
0.0% Rev Cycle	-	-	-	0.0%	-	-	0.0%
0.0% Internal Audit	-	-	-	0.0%	-	-	0.0%
0.0% Legislative Affairs	-	-	-	0.0%	-	-	0.0%
0.0% Administrative	-	-	-	0.0%	-	-	0.0%
0.0% Human Resources	-	-	-	0.0%	-	-	0.0%
0.0% Legal	-	-	-	0.0%	-	-	0.0%
0.0% Records	-	-	-	0.0%	-	-	0.0%
0.0% Compliance	-	-	-	0.0%	-	-	0.0%
0.0% Finance	-	-	-	0.0%	-	-	0.0%
0.0% Communications	-	-	-	0.0%	-	-	0.0%
0.0% Information Technology	-	-	-	0.0%	-	-	0.0%
Total Overhead Allocations	-	-	-	0.0%	-	-	0.0%
1,441,591	1,441,591	-	-	0.0%	1,415,952	(25,638)	(1.8%)
Total Expenses	(949,090)	(949,510)	420	(0.0%)	(923,609)	(25,481)	2.8%
Net Margin	949,090	949,510	(420)	(0.0%)	923,609	25,481	2.8%
2.8% General Fund Support	949,090	949,510	(420)	(0.0%)	923,609	25,481	2.8%
2.8% Total Transfers In	949,090	949,510	(420)	(0.0%)	923,609	25,481	2.8%

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**HEALTH CARE DISTRICT  
FINANCE AND AUDIT COMMITTEE  
January 29, 2019**

**1. Item Description: District Cares Changes**

**2. Summary:**

This agenda item presents the Board with an update on the changes to District Cares.

**3. Substantive Analysis:**

During the July 2018 Strategic Planning Meeting, the Board received an update on early details of the District Cares new outsourced behavioral health benefit. Additionally, upcoming changes planned for District Cares were presented. The changes, both benefit and administrative, came as a result of lengthy internal and external reviews of the program. Opportunities were also identified to leverage partnerships that would add expertise and access to new decision-support data analytics while avoiding the cost of a new claims administration system. The approved FY2019 budget included \$3,000,000 for behavioral health and \$1,800,000 for professional fees for new system administration support.

Behavioral Health

The District is working with Community Care Plan, a taxing district owned third party administrator in Broward County for our behavioral health benefit. Community Care Plan will administer the District Cares behavioral health benefit including claims payment, authorization processing, and reporting. The new benefit will include unlimited outpatient services, primarily at the CL Brumback Primary Care Clinics, as well as inpatient psychiatric, addiction stabilization, and other behavioral health services at the JFK and JFK North hospitals. CL Brumback's Medically Assisted Treatment clinic is also being re-located to the JFK North Campus to help bring together a continuum of care in a centralized location.

Benefits and Membership

Staff has been reviewing and assessing all aspects of District Cares. Benefit and membership changes are in the process of being implemented. New benefit and membership changes strive to cover more Palm Beach County residents in need of the District's services while balancing the District's financial risk. Benefit limitation and additional authorization requirements will help to control utilization and better manage the care of our patients. Once fully implemented, the Clinic providers will control all specialist referrals maximizing their ability to manage patients.

Membership criteria has been updated so that anyone who has lived in Palm Beach County for at least 6 months (or declares the intent to stay), has income below 100% of the Federal Poverty level, and who is a current patient of the CL Brumback

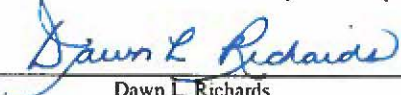
**HEALTH CARE DISTRICT  
FINANCE AND AUDIT COMMITTEE  
January 29, 2019**

Primary Care Clinics, will be able to receive District Cares benefits. The reduced documentation requirements focusing on any patient who lives in Palm Beach County along with the income criteria that fills the gap between qualifying for Medicaid and qualifying for subsidies on the exchange, will enable the District to cover more Palm Beach County residents and enable the Clinics to better care for more of their low-income patients with access to specialist care.

**4. Fiscal Analysis & Economic Impact Statement:**

	Amount	Budget
Capital Requirements	N/A	Yes <input type="checkbox"/> No <input type="checkbox"/>
Annual Net Revenue	N/A	Yes <input type="checkbox"/> No <input type="checkbox"/>
Annual Expenditures	\$4,800,000	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

Reviewed for financial accuracy and compliance with purchasing procedure:

  
Dawn L. Richards  
VP & Chief Financial Officer

**5. Reviewed/Approved by Committee or Subsidiary Board:**

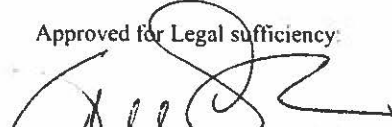
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Committee or Board

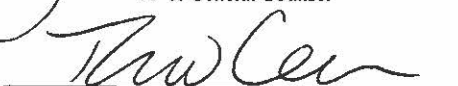
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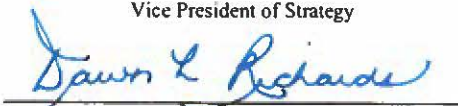
**6. Recommendation:**

Staff recommends that the Finance and Audit Committee review the information provided in this agenda item and forward to the Board for approval.

Approved for Legal sufficiency:

  
Valerie Shahriri  
VP & General Counsel

  
Thomas Cleare  
Vice President of Strategy

  
Dawn L. Richards  
VP & Chief Financial Officer

**HEALTH CARE DISTRICT  
FINANCE AND AUDIT COMMITTEE  
January 29, 2019**

**1. Description: Belle Glade Primary Care Clinic Construction**

**2. Summary:**

The agenda item presents the budget overage of the Belle Glade Primary Care and Dental Clinic construction project.

**3. Substantive Analysis:**


The Primary Care Clinic budgeted \$1,079,900 to complete the construction project for the relocation of its Belle Glade medical and dental clinics to the Lakeside Medical Center facility. The Guaranteed Maximum Price presented by the General Contractor is \$1,380,865.24 exceeding the budgeted amount by \$300,965.24. This includes a \$100,000 contingency, which may not be utilized. HRSA funding for this project will be up to 88% of \$1,000,000 or \$880,000.

Project GMP	\$1,380,865
Project Budget	\$1,079,900
HRSA Share of Budgeted Cost (88% up to \$1,000,000)	\$880,000
HCD Share of Budgeted Cost (12% of \$1,000,000)	\$199,900
Budget Overage	\$300,965

**4. Fiscal Analysis & Economic Impact Statement:**

	Amount	Budget
Capital Requirements	\$300,965.24	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Annual Net Revenue	N/A	Yes <input type="checkbox"/> No <input type="checkbox"/>
Annual Expenditures	N/A	Yes <input type="checkbox"/> No <input type="checkbox"/>

Reviewed for financial accuracy and compliance with purchasing procedure:

  
Dawn L. Richards  
VP & Chief Financial Officer

**5. Reviewed/Approved by Committee or Subsidiary Board:**

Finance and Audit Committee

Committee or Board

70

Date Reviewed

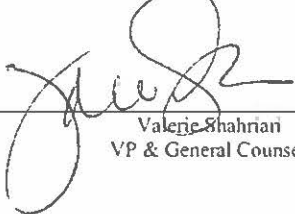


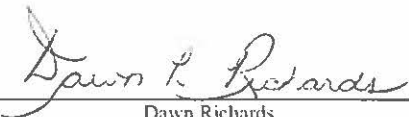
**HEALTH CARE DISTRICT  
FINANCE AND AUDIT COMMITTEE  
January 29, 2019**

**6. Recommendation:**

Staff recommends that the Finance and Audit Committee review the Belle Glade Primary Care Clinic Construction project and forward to the Board for approval.

Approved for Legal sufficiency:

  
\_\_\_\_\_  
Valerie Shahrian  
VP & General Counsel

  
\_\_\_\_\_  
Dawn Richards  
VP & Chief Financial Officer

**HEALTH CARE DISTRICT  
FINANCE AND AUDIT COMMITTEE  
January 29, 2019**

**1. Item Description: 340B Discount Program Report**

**2. Summary:**

Provide the 340B Discount Program Project report for committee review and approval.

**3. Substantive Analysis:**

Crowe Healthcare Risk Consulting (Crowe) completed the 340B Discount Program project, which resulted in five findings; three moderate risk and two low risk. Management responded with an action plan for each issue. The report is included in the Finance and Audit Committee package.

**4. Fiscal Analysis & Economic Impact Statement:**

	Amount	Budget
Capital Requirements	N/A	Yes <input type="checkbox"/> No <input type="checkbox"/>
Annual Net Revenue	N/A	Yes <input type="checkbox"/> No <input type="checkbox"/>
Annual Expenditures	N/A	Yes <input type="checkbox"/> No <input type="checkbox"/>

Reviewed for financial accuracy and compliance with purchasing procedure:

  
Dawn L. Richards  
VP & Chief Financial Officer

**5. Reviewed/Approved by Committee or Subsidiary Board:**

Finance and Audit Committee

\_\_\_\_\_  
Committee or Board

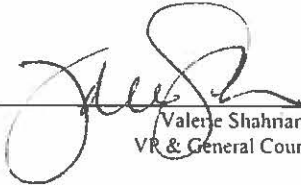
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Date Reviewed

**HEALTH CARE DISTRICT  
FINANCE AND AUDIT COMMITTEE  
January 29, 2019**

**6. Recommendation:**

Staff recommends the Finance and Audit Committee review the 340B Discount Program report and forward to the Board for approval.

Approved for Legal sufficiency:

  
\_\_\_\_\_  
Valerie Shahnari  
VP & General Counsel

  
\_\_\_\_\_  
Dawn L. Richards  
VP & Chief Financial Officer

# 340B Discount Program Project - Health Care District of Palm Beach County (HCDPBC)

Date: October 24, 2018

Location: Health Care District of Palm Beach County



## OBJECTIVES

- Test whether established controls related to the Health Resources and Services Administration's (HRSA) 340B guidelines and regulations were functioning as Management intended.
- Test processes in place to comply with HRSA's 340B guidelines and regulations.

## SCOPE

A sampling approach (similar to what we've experienced during recent HRSA/The Bizzell Group audits) was utilized to test 340B qualified prescriptions for expected compliance elements. Policies and Procedures, internal operations and monitoring strategy were also tested.

**Location:** HCDPBC Pharmacy

**Time Period:** 2/1/2018 - 7/31/2018

**Sample Selected:** Selections were made from the population of 340B qualified prescriptions within the audit period above.

**Scope Exclusions:** Duplicate Transaction Testing

## CONCLUSION

The audit identified a diversion risk due to missing referral documentation that shows HCDPBC maintains a responsibility of care for referred patients and drug dispensations not appropriately documented in the medical record.

Other issues relating to policy enhancements, internal auditing procedures, and dental electronic medical record (EMR) access were identified.

Management is committed to addressing all identified issues in a timely manner.

## SUMMARY OF ISSUE RISKS

High Risk - 0

Moderate Risk - 3

Low Risk - 2

# 340B Discount Program Project - Health Care District of Palm Beach County (HCDPBC)

Date: October 24, 2018

Location: Health Care District of Palm Beach County



## ISSUE 1: Diversion Risk – Incomplete Referral Documentation

### WHAT IS CAUSING THE ISSUE?

Policies and Procedures: Documentation does not exist for referral prescriptions.

### WHAT IS EXPECTED?

Per the HCDPBC 340B Policy, in order to qualify for 340B, prescriptions written by referred providers must include "a referral on file in the EMR with supporting documentation returned from the specialist, such as an office visit summary or other appropriate medical records."

### WHAT ARE THE FINDINGS?

Crowe identified 2 of 50 prescriptions that were written by a referred provider, but required documentation to support the referral was not included within the EMR. Therefore, it could not be determined that HCDPBC maintained responsibility of care.

## ISSUE RISK

Moderate Risk

### WHAT BUSINESS OBJECTIVES ARE AT RISK?

Maintain and monitor compliance with 340B program requirements.

### WHAT ACTIONS WILL MANAGEMENT TAKE?

Management will follow the referral procedures as documented within the 340B policy and procedure.

Complete  
Hyla Fritsch - Director of Pharmacy



# 340B Discount Program Project - Health Care District of Palm Beach County (HCDPBC)

Date: October 24, 2018

Location: Health Care District of Palm Beach County



## ISSUE 2: Incomplete Documentation

### WHAT IS CAUSING THE ISSUE?

Training: Prescriptions written are not always documented within the EMR.

### WHAT IS EXPECTED?

The covered entity must maintain appropriate documentation to confirm 340B-qualified prescriptions meet all eligibility requirements.

### WHAT ARE THE FINDINGS?

Crowe identified 2 of 50 prescriptions that were not documented in the EMR. The locations where the prescriptions were written were confirmed to be eligible facilities, but a lack of support within the EMR brings about increased risk of non-compliance with 340B requirements.

## ISSUE RISK

Moderate Risk

### WHAT BUSINESS OBJECTIVES ARE AT RISK?

Maintain and monitor compliance with 340B program requirements.

### WHAT ACTIONS WILL MANAGEMENT TAKE?

- |   |   |
|---|---|
| • Management will provide training for providers regarding documentation requirements when writing prescriptions. | Complete<br>Hyla Fritsch - Director of Pharmacy   |
| • Management will work with Legal/Compliance to determine if any adjustments should be made.                      | 12/31/2018<br>Hyla Fritsch - Director of Pharmacy |



# 340B Discount Program Project - Health Care District of Palm Beach County (HCDPBC)

Date: October 24, 2018

Location: Health Care District of Palm Beach County



## ISSUE 3: Lack of Monitoring Documentation

### WHAT IS CAUSING THE ISSUE?

Reporting: Documentation to support 340B self-monitoring activities is not retained.

### WHAT IS EXPECTED?

Covered entities must ensure program integrity and maintain accurate records documenting compliance with all 340B Program requirements. A robust monitoring program is essential to achieving this objective.

### WHAT ARE THE FINDINGS?

Crowe noted that while monthly audits are performed, supporting documentation to evidence the self-audit process and any subsequent issue resolutions is not retained.

## ISSUE RISK

Moderate Risk

### WHAT BUSINESS OBJECTIVES ARE AT RISK?

Maintain and monitor compliance with 340B program requirements.

### WHAT ACTIONS WILL MANAGEMENT TAKE?

Audit results will be documented and reported. 12/31/2018  
Hyla Fritsch - Director of Pharmacy

# 340B Discount Program Project - Health Care District of Palm Beach County (HCDPBC)

Date: October 24, 2018

Location: Health Care District of Palm Beach County



## ISSUE 4: Policy Enhancements Opportunities

### WHAT IS CAUSING THE ISSUE?

Policies and Procedures: Formal written direction to align organization behavior with objectives was missing or inadequate.

### WHAT IS EXPECTED?

Covered entity 340B policies include all program components that align with HRSA's expectations and are presented in a consistent, organized manner.

### WHAT ARE THE FINDINGS?

Health Care District of Palm Beach County's policy was unclear or excluded key program details that HRSA expects to be present. Areas noted for enhancement include:

- Site eligibility
- Specifics of independent audit process

## ISSUE RISK

Low Risk

### WHAT BUSINESS OBJECTIVES ARE AT RISK?

Maintain and monitor compliance with 340B program requirements.

### WHAT ACTIONS WILL MANAGEMENT TAKE?

Management will update policy with enhancements noted in order to convey accurate operations of the 340B program.

12/31/2018  
Hyla Fritsch - Director of Pharmacy

# 340B Discount Program Project - Health Care District of Palm Beach County (HCDPBC)

Date: October 24, 2018

Location: Health Care District of Palm Beach County



## ISSUE 5: Lack of Dental EMR Access

### WHAT IS CAUSING THE ISSUE?

Technology Alignment: Dental clinic utilizes a separate EMR for documenting visits and procedures. The pharmacies do not have access to this EMR.

### WHAT IS EXPECTED?

The covered entity is able to provide support that 340B-qualified prescriptions meet all eligibility requirements.

### WHAT ARE THE FINDINGS?

79 Crowe identified 1 of 50 prescriptions that pharmacy was not able to provide support showing eligibility requirements were met due to a lack of dental EMR access.

## ISSUE RISK

Low Risk

### WHAT BUSINESS OBJECTIVES ARE AT RISK?

Maintain and monitor compliance with 340B program requirements.

### WHAT ACTIONS WILL MANAGEMENT TAKE?

Management will work with dental providers to gain access to their EMRs so patient health care records can be obtained. 12/31/2018  
Hyla Fritsch - Director of Pharmacy



# 340B Discount Program Project - Health Care District of Palm Beach County (HCDPBC)

Date: October 24, 2018

Location: Health Care District of Palm Beach County



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## CONTEXT

The 340B Drug Pricing Program is a federal program created to permit covered entities to stretch scarce Federal resources as far as possible, reaching more eligible patients and providing more comprehensive services. The program requires drug manufacturers to provide outpatient drugs to eligible health care centers, clinics, and hospitals (termed "covered entities") at a reduced price.

HRSA has increased its scrutiny over covered entity compliance with 340B regulations since the start of periodic audits in 2012. This has resulted in an increase in the number of covered entity audits performed, and corresponding audit findings. In 2016, HRSA outsourced their audit fieldwork to The Bizzell Group. The Bizzell Group appears to consist of more seasoned pharmacy professionals with prior experience in 340B program management and oversight resulting in a more sophisticated audit approach. Failure to comply with 340B requirements may result in sanctions, including repayments to pharmaceutical manufacturers or even removal from the program entirely.

Due to increased scrutiny and the potential financial impact, HCDPBC has contracted with Crowe to perform an independent audit.

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## OTHER OBSERVATIONS

1. Negative Inventory Balances - Excel inventory reports used to accumulate dispensations and reorder 340B drugs show negative balances when accumulation is available for 340B purchasing, which could be perceived that overpurchasing has occurred. Management noted that as of December 3, 2018, they will no longer be filling non-340B prescriptions in-house so negative balances will not appear on the spreadsheet subsequent to the December 3rd date.

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## ISSUE RISK DEFINITIONS

In determining whether the issue risk was High, Moderate or Low, Crowe Healthcare Risk Consulting LLC considered a variety of factors, including the following, as applicable: significance of potential financial losses; risks to achieving business objectives; potential impact on care delivery quality; the potential for reputational damage; regulatory impact; and the potential for compromised data integrity. This list is not all-inclusive.

# 340B Discount Program Project - Health Care District of Palm Beach County (HCDPBC)

Date: October 24, 2018

340B Discount Program Project - Health Care District of Palm Beach County



## REPORT ACCEPTANCE

<u>Darcy Davis</u>	<u>12-31-18</u>
Darcy Davis, Chief Executive Officer	Date
<u>Dawn L. Richards</u>	<u>12-27-18</u>
Dawn Richards, VP & Chief Financial Officer	Date

## COPIES

Val Shahriari, VP & General Counsel  
Ellen Pentland, Chief Compliance Officer  
Belma Andric, MD, VP & CMO  
Hyla Fritsch, Director of Pharmacy  
Terry Megiveron, Director of Practice Operations, Primary Care Clinics  
Kristine Morales, Assistant Director of Pharmacy

## AUDITORS

Chris Wasik, Healthcare Risk Audit Director  
Rich Costello, Healthcare Risk Manager

This audit was conducted in accordance with the *International Standards for the Professional Practice of Internal Auditing*. This report and the information contained herein (the "Report") is intended solely for the use of the authorized employees of the client named herein for the purposes set forth herein. The Report is strictly confidential and shall under no circumstances be disclosed to any other party without the prior written consent of Crowe Healthcare Risk Consulting LLC ("Crowe").

Except for the permitted use of the Report by the authorized employees of the client named herein, Crowe hereby disclaims any and all responsibility and liability for the Report and the use thereof. No third party may rely on the Report or the information contained therein for any purpose, and Crowe makes no representation to any third party as to the accuracy, sufficiency or propriety of the information contained in the Report. Further, Crowe disclaims any obligation to update the Report.

**HEALTH CARE DISTRICT  
FINANCE AND AUDIT COMMITTEE  
January 29, 2019**

**1. Item Description: Patient Access Audit**

**2. Summary:**

Provide the Patient Access (front-end) Audit report for Finance and Audit Committee review and approval.


**3. Substantive Analysis:**

Crowe Healthcare Risk Consulting completed the Patient Access (front-end) Audit report, which resulted in 4 findings, 1 moderate risk and 3 low risk. Management responded with an action plan for each issue. The report is included in the Finance and Audit Committee package.

**4. Fiscal Analysis & Economic Impact Statement:**

	Amount	Budget	
Capital Requirements	N/A	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Annual Net Revenue	N/A	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Annual Expenditures	N/A	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Reviewed for financial accuracy and compliance with purchasing procedure:

  
Dawn L. Richards  
VP & Chief Financial Officer

**5. Reviewed/Approved by Committee or Subsidiary Board:**

Finance and Audit Committee

\_\_\_\_\_  
Committee or Board

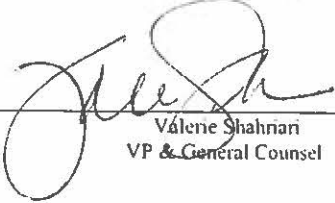
\_\_\_\_\_  
Date Reviewed

**HEALTH CARE DISTRICT  
FINANCE AND AUDIT COMMITTEE  
January 29, 2019**

**6. Recommendation:**

Staff recommends the Finance and Audit Committee review the Patient Access Audit report and forward to the Board for approval.

Approved for Legal sufficiency:

  
\_\_\_\_\_  
Valene Shahnari  
VP & General Counsel

  
\_\_\_\_\_  
Dawn L. Richards  
VP & Chief Financial Officer



# Patient Access-Front End Processes and Controls



Date: December 07, 2018

Location: Health Care District of Palm Beach County

## OBJECTIVES

- Validated formal, written procedures existed to clearly guide staff in performing their required functions for Patient Access and tested whether controls were operating as management intended
- Tested whether controls to comply with Federal/State regulations surrounding the securing and retention of regulatory mandated forms were functioning as Management intended
- Assessed procedures to identify, monitor, record and correct registration errors. Tested whether Key Performance Indicators were established and reported to benchmark against industry standards
- Assessed procedures and control activities related to variations and changes in payer plans
- Tested whether processes were in place to maximize collection of the patient's financial responsibility at the point of service and assessed procedures to determine correct payment amount
- Assessed procedures in place to monitor and evaluate the effectiveness of external vendors which support Patient Access functions

## CONCLUSION

Although control activities over the patient access and registration functions such as scheduling, registration and insurance verification appear adequate, the District is exposed to potential regulatory risks if excluded provider screening is not performed on outside physicians who submit referral orders for their patients at LMC. Also, the District can enhance controls over patient access objectives, such as required documents and signatures collected through the registration functions by conducting performance audits, monitoring and developing a registration checklist at the Clinics and Healey.

Finally, management can make sure patient access services from external vendors are effective and in line with organizational goals and objectives by implementing and monitoring performance metrics over the Qualified Medicare Beneficiary services at LMC.

## SCOPE

Patient Access processes and controls over scheduling, registration and insurance verification at the Lakeside Medical Center (LMC), CL Brumback Primary Care Clinics (Medical and Dental), Healey Rehabilitation Center, Aeromedical and the Trauma Agency System.

**Location:** Lakeside Medical Center (LMC), CL Brumback Primary Care Clinics (Medical and Dental), Healey Rehabilitation Center, Aeromedical and the Trauma Agency System

**Time Period:** As of October 1, 2017

# Patient Access-Front End Processes and Controls



Date: December 07, 2018

Location: Health Care District of Palm Beach County

**Scope Exclusions:** Crowe limited the scope of work at the Trauma Agency System to assessing established procedures in place over the Patient Access Insurance Verification process, to avoid duplicating the work of an external consultant. Management recently contracted with a healthcare consultant to perform an analytical review and provide recommendations for improvement at the Trauma Agency System.

## SUMMARY OF ISSUE RISKS



# Patient Access-Front End Processes and Controls



Date: December 07, 2018

Location: Health Care District of Palm Beach County

## ISSUE 1: LMC Patient Scheduling-Sanction Screening for Referring Physicians Not Performed Timely

### WHAT IS CAUSING THE ISSUE?

Procedures: The District lacks a procedure addressing sanction screening of new referring physicians.

### WHAT IS EXPECTED?

The Department of Health and Human Services Office of Inspector General (OIG) mandates that sanction screening be performed on all individuals employed or contracted with to furnish items and/or services (directly or indirectly) that are payable by Federal health care programs. An excluded person may not provide services that are payable by Federal health care programs, regardless of whether the person is an employee, a contractor or a volunteer, or has any other relationship with the health care provider.

Health care providers who receive payments under Federal health care programs may employ or contract with excluded persons, so long as any of the items or services provided are wholly unrelated to Federal healthcare programs. OIG guidance indicates that excluded provider screening should include referring physicians who provide orders or prescribe services which are billed by a hospital to a Federal health care program. Therefore, it is considered best practice to screen referring physicians who order services that are included in any claims or costs submitted for payment by a Federally financed health care program.

### WHAT ARE THE FINDINGS?

The District's Compliance Department conducts sanction screening on referring physicians annually, as part of their Annual Compliance Screening procedures, but the District did not establish procedures for excluded provider screening of physicians added to the LMC accounting system between the annual screenings.

## ISSUE RISK

Moderate Risk

### WHAT BUSINESS OBJECTIVES ARE AT RISK?

Conduct operations in compliance with Federal/State regulations surrounding OIG, HIPAA, MSP, ABN, IMM and NPP

### WHAT ACTIONS WILL MANAGEMENT TAKE?

Management implemented procedures to perform sanction screening for all non-affiliated physicians currently in HMS that did not have a screening completed.

Complete  
Tabatha McCallister - Manager of Admitting

Ellen Pentland - Chief Compliance & Privacy Officer

New referring physicians are screened by the Patient Access department at the point of service, prior to providing service and added to an Excel file. The Manager of Admitting submits the list annually to the Compliance Department to include in the District's Annual Compliance Screening process.



# Patient Access-Front End Processes and Controls



Date: December 07, 2018

Location: Health Care District of Palm Beach County

## ISSUE 2: The Clinics and Healey Lack A Quality Assurance Process to Improve Patient Access Activities

### WHAT IS CAUSING THE ISSUE?

Procedures: No procedures exist to monitor overall effectiveness of patient access/registration processes.

### WHAT IS EXPECTED?

Procedures exist to monitor the accuracy and effectiveness of registration processes. It is a best practice for Skilled Nursing Facilities (SNF) to audit all resident accounts to ensure all required admissions paperwork was obtained and signed by the resident and/or family.

### WHAT ARE THE FINDINGS?

There were no procedures in place at the Clinics to monitor and manage the effectiveness and accuracy of front-end patient access activities. There were no quality performance audits performed or process monitoring procedures to ensure the registration of patients is aligned with organizational objectives and regulatory requirements.

A Quality Assurance Performance Improvement audit over the Admission Agreement provided to residents was performed annually at Healey for all admissions, but this audit did not include evidence of the significant processes, key forms and documents reviewed.

Crowe noted a quality assurance process was maintained at LMC. Procedures in place allowed LMC to review, identify and correct registration errors and report on various key performance indicators (KPI's) around patient access goals.

## ISSUE RISK

Low Risk

### WHAT BUSINESS OBJECTIVES ARE AT RISK?

- Metrics, KPI's and management reports are accurate and achieve objectives and goals
- Conduct operations in compliance with Federal/State regulations surrounding OIG, HIPAA, MSP, ABN, IMM and NPP

### WHAT ACTIONS WILL MANAGEMENT TAKE?

- Management hired a full-time equivalent in late December to support the front office operations for the Clinics. Management will implement procedures to monitor the quality and effectiveness of front-end patient access activities, to include key patient registration components needed to assure that necessary information, forms and signatures for each encounter are captured. 02/28/2019 Terry Megiveron - Director, Practice Operations Marcia Young - Director Revenue Cycle Management
- Management will develop a checklist to include in the Quality Assurance Improvement audit. The checklist will assure that all critical admission processes were performed and that key forms and documents in the resident file were reviewed, signed and properly stored. The audit will be conducted every six months. 03/29/2019 Shelly-Ann Lau - Administrator Healey Center

# Patient Access-Front End Processes and Controls



Date: December 07, 2018

Location: Health Care District of Palm Beach County

## ISSUE 3: Vendor Contract Lacks Performance Metrics

### WHAT IS CAUSING THE ISSUE?

Procedures: Management did not implement solutions to monitor effectiveness of Qualified Medicare Beneficiary (QMB) certification services.

### WHAT IS EXPECTED?

Monitor and manage service agreements with external vendors in a manner that promotes acceptable, timely performance in accordance with contract terms. Services provided under the agreement should include measurable performance standards that address organizational goals and objectives.

### WHAT ARE THE FINDINGS?

LMC contracted with an outside service provider to assist Medicare patients with no secondary coverage with completing an application for the QMB program. LMC pays \$150 for every approved application referred for QMB certification services. The service provider sends LMC a listing of approved patients under the program. Crowe noted the agreement does not include performance metrics which would allow LMC to assess the effectiveness of the services provided under this agreement.

## ISSUE RISK

Low Risk

### WHAT BUSINESS OBJECTIVES ARE AT RISK?

Metrics, KPI's and management reports are accurate and achieve objectives and goals

### WHAT ACTIONS WILL MANAGEMENT TAKE?

The service agreement was effective 06/30/2019  
October 2018. The medical services provided to patients who are qualified are not billable and LMC can only benefit from the patient's eligibility if they return for future service. Management will need sufficient data to analyze and develop appropriate goals and benchmarks.

Tabatha McCallister - Manager of Admitting

Once sufficient historical data is established management will analyze how many patients have been qualified on a monthly basis and how many have returned for medical service and implement relevant KPI's/ metrics to assess the overall benefit and effectiveness of the QMB certification program. The established metrics will be reviewed quarterly.



# Patient Access-Front End Processes and Controls



Date: December 07, 2018

Location: Health Care District of Palm Beach County

## ISSUE 4: No Monitoring of Point of Service Collections at Clinics

### WHAT IS CAUSING THE ISSUE?

Procedures: No procedures in place to monitor performance of patient liability collections at point of service

### WHAT IS EXPECTED?

The Athena system provides the capability to report collection rates at time of service for each clinic. Reporting and procedures implemented to monitor and manage collection of patient responsibility helps maximize collections at the point of service.

### WHAT ARE THE FINDINGS?

Procedures to monitor and maximize collections of patient responsibility at the point of service were not in place for the Clinics. Although federal healthcare rules prevent a Federally Qualified Health Center, such as the Primary Care Clinics, from denying service for inability to pay, there is no process to enhance collection when the patient liability portion is determined at the point of service.

## ISSUE RISK

Low Risk

### WHAT BUSINESS OBJECTIVES ARE AT RISK?

Conduct pre-registration activities to maximize collections through verification of insurance and collection of co-pays, deductibles, deposits and prior account balances

### WHAT ACTIONS WILL MANAGEMENT TAKE?

Some services offered by the Clinics, such as adult immunizations, are optional and require payment prior to the service being provided.

Management will develop appropriate reporting tools from Athena and implement procedures to monitor collection activities and evaluate the performance of each clinic collection representative and compare actual collections to expected collections at the point of service.

Additionally, management will review current procedures around collection activities at the point of service and implement enhancements to the process. Improvements will be made around the collection scripting provided to front-end personnel and reports that communicate staff performance at the point of service, in conjunction with practice managers, collection representatives and front-line coordinators.

03/31/2019  
Terry Megiveron - Director,  
Practice Operations

# Patient Access-Front End Processes and Controls



Date: December 07, 2018

Location: Health Care District of Palm Beach County

---

## CONTEXT

Effective controls over the patient access process is a top risk to healthcare providers. Registration errors and ineffective front-end processes around patient access can slow claim processing/payment and create time consuming re-work for staff. Proper monitoring, continuous improvement and effective controls over scheduling, registration and insurance verification prevent issues in billing and collections, patient and physician satisfaction and access to care. This audit was performed in response to concerns noted with patient registration such as not collecting correct information, verifying and obtaining authorization.

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## ISSUE RISK DEFINITIONS

In determining whether the issue risk was High, Moderate or Low, Crowe Healthcare Risk Consulting LLC considered a variety of factors, including the following, as applicable: significance of potential financial losses; risks to achieving business objectives; potential impact on care delivery quality; the potential for reputational damage; regulatory impact; and the potential for compromised data integrity. This list is not all-inclusive.



# Patient Access-Front End Processes and Controls



Date: December 07, 2018

Location: Health Care District of Palm Beach County

## REPORT ACCEPTANCE

*Darcy Davis*

Darcy Davis, Chief Executive Officer

Date

*Dawn L. Richards*

*1-22-19*

Dawn Richards, VP & Chief Financial Officer

Date

## COPIES

Val Shahriari, VP & General Counsel

Ellen Pentland, Chief Compliance & Privacy Officer

Karen Harris, Vice President of Field Operations

Marcia Young, Director Revenue Cycle Management

Stephanie Dardanella, Hospital Administrator

Tabatha McCallister, Manager of Admitting

Terry Megiveron, Director, Practice Operations

Shelly-Ann Lau, Administrator Healey Center

## AUDITORS

Harry Torres, Healthcare Risk Audit Senior Manager

This audit was conducted in accordance with the *International Standards for the Professional Practice of Internal Auditing*. This report and the information contained herein (the "Report") is intended solely for the use of the authorized employees of the client named herein for the purposes set forth herein. The Report is strictly confidential and shall under no circumstances be disclosed to any other party without the prior written consent of Crowe Healthcare Risk Consulting LLC ("Crowe").

Except for the permitted use of the Report by the authorized employees of the client named herein, Crowe hereby disclaims any and all responsibility and liability for the Report and the use thereof. No third party may rely on the Report or the information contained therein for any purpose, and Crowe makes no representation to any third party as to the accuracy, sufficiency or propriety of the information contained in the Report. Further, Crowe disclaims any obligation to update the Report.

**HEALTH CARE DISTRICT  
FINANCE AND AUDIT COMMITTEE  
January 29, 2019**

**1. Description: Audit Plan 2018/2019 Status Update**

**2. Summary:**

Provide a status update of the FY 2018/2019 Audit Plan and Follow-up of Management Action Plan items for completed audits.

**3. Substantive Analysis:**

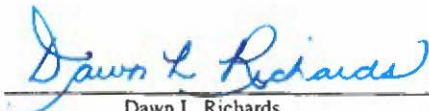
Since the 11/27/18 Committee meeting, 2 audits have been completed. The FY 2018/2019 Audit Plan includes 12 audits. Crowe has completed 7 audits. There are 4 audits in the reporting phase, and 1 in field work.

Internal controls are strengthened when action plans for issues are implemented. Crowe discusses all issues with process owners during the course of each project. Management is responsible for formulating corresponding action plans to correct identified internal control deficiencies. Crowe validates resolution of issues by testing completion of action plans with Management on a monthly basis through our follow-up process. It is Management's responsibility to continue to maintain the controls necessary to mitigate risk. Additionally, Crowe reports the status of outstanding issues to Management, bimonthly.

**4. Fiscal Analysis & Economic Impact Statement:**

	Amount	Budget
Capital Requirements	N/A	Yes <input type="checkbox"/> No <input type="checkbox"/>
Annual Net Revenue	N/A	Yes <input type="checkbox"/> No <input type="checkbox"/>
Annual Expenditures	N/A	Yes <input type="checkbox"/> No <input type="checkbox"/>

Reviewed for financial accuracy and compliance with purchasing procedure:

  
Dawn L. Richards  
VP & Chief Financial Officer

**HEALTH CARE DISTRICT  
FINANCE AND AUDIT COMMITTEE  
January 29, 2019**

**5. Reviewed/Approved by Committee or Subsidiary Board:**

Finance and Audit Committee

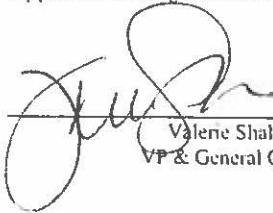
Committee or Board

Date Reviewed

**6. Recommendation:**

Staff recommends the Finance and Audit Committee review the Audit Plan 2018/2019 Status Update and forward to the Board for approval.

Approved for Legal sufficiency:

  
Valerie Shahrian  
VP & General Counsel

  
Dawn L. Richards  
VP & Chief Financial Officer



Health Care District of Palm Beach County  
Internal Audit - Audit Plan 2018-2019

	Entity	Category	Quarter	Proposed Audit	Scope	Status	Source	Issues by Impact Level			Audit Overview
								High	Medium	Low	
1	LMC	Operations	2	Gift Shop	FULL AUDIT	Complete	LMC Leadership	0	1	4	Assess operations of gift shop and relationship to LMC, including contracts, controls, donations.
2	Health Care District	IT	2	System Access Management	FULL AUDIT	Complete	Protiviti Risk Assessment, Crowe Horwath Top 20, RSM 2014, 2015, 2016	2	1	1	Without strong access management controls, operating systems and business and clinical applications may not be protected from unauthorized access or theft. Users should have access only to the information they need to perform their job functions, and access for users who have been terminated or transferred must be removed on a timely basis. Weak system access management controls may also affect the integrity of information generated from a system and the system may be vulnerable to loss or failure due to external or internal manipulation.
3	LMC, Healey, Clinics, Aeromed	RCM	2	Accounts Receivable Reserves	FULL AUDIT	Complete	RSM 2014, 2015	0	6	0	Controls over accounts receivables should be in place to account for patient and insurance receivables, contractual allowances, charity deductions and bad debt.
4	LMC, Clinics, Healey, Aeromedical, Trauma	RCM	3	Patient Access	FULL AUDIT	Complete	Protiviti Risk Assessment, Crowe Horwath Top 20	0	1	3	Effective controls over scheduling, registration and insurance verification prevent issues in billing and collections, patient and physician satisfaction and access to care.
5	Pharmacy, LMC	Clinical	3	340B Discount Program	PROJECT	Complete	Crowe Horwath Top 20, Senior Leadership	0	3	2	Savings and revenue from this program can significantly impact the bottom line. Having operations in place to validate compliance requires consistent attention. Risk is increased as the program is expanded to additional locations.
6	Clinics	Operations	3	Meaningful Use	PROJECT	Complete	CMS, Crowe Horwath Top 20	0	3	0	CMS has contracted with third parties to conduct MU audits of suspicious and random providers. Audits may be pre or post payment and have been field or desk audits. They can occur anytime in the six year period following attestation. Providers have been given as little as two weeks to respond. If found to be ineligible, payments will be recouped. Fraudulent attestations are subject to sanctions.
7	LMC, Clinics, Healey	IT	4	Medical Device Security	PROJECT	Complete	Protiviti Risk Assessment, Crowe Horwath Top 20	1	5	1	Assessment of patient devices that store patient information and procedures related to the management of these devices and the protection of PHI.
8	LMC, Clinics, Healey, Aeromedical, Pharmacy	RCM	4	Revenue Charge Capture	FULL AUDIT	Reporting	Protiviti Risk Assessment, Crowe Horwath Top 20				Charge capture procedures need to support revenue recognition goals. Challenges may exist despite EHRs and ICD10. Concerns are accuracy and timeliness.
9	Health Care District	Operations	4	Third Party Vendor Management	FULL AUDIT	Reporting	Protiviti Risk Assessment, Crowe Horwath Top 20				Healthcare systems continue to embrace the use of third party providers for a variety of crucial operational, clinical and technological functions, often with the objective of cost savings or efficiency gains. However, the use of third parties to provide core services is not without risk. Some of those risks include: failure to meet performance requirements as outlined in the contract, failure to meet financial terms in accordance with contract provisions, billing for services not provided and potential compliance risks.
10	Pharmacy, Primary Care Clinics, LMC, Healey	Clinical	Q12019	Medication Management and Drug Diversion	FULL AUDIT	Reporting	Protiviti Risk Assessment, Crowe Horwath Top 20, OIG				Inadequate controls on medication management and controlled substances can have significant financial, compliance, patient care and reputational impacts. Pharmacists and care providers have a shared responsibility to help ensure the right patient, right medication, right dosage and right route in order to provide safe and effective care. Controls over ordering, dispensing, administering drugs, maintaining inventory and monitoring diversion are required to avoid patient care issues and compliance violations.
11	LMC, Clinics, Healey, Aeromedical	RCM	Q12019	Credit Balances	FULL AUDIT	Field work	Protiviti Risk Assessment				Credit balances occur due to limitations in billing systems, errors in cash posting, incorrect insurance information, duplicate cash entries, incorrect coordination of benefits. Medicaid payment integrity reviews under RAC include credit balance audits. Federal and state law governs the timeliness of refunds due to patients.
12	Health Care District	Finance	Q12019	PTO	PROJECT	Reporting	Senior Leadership				Consistency of PTO practices coordinated with contracted terms per employment agreements.
								3	20	11	

Time Table By Calender Quarter

Crowe Resource	Q2	Q3	Q4	Q12019
IT	(2) System Access management	(6) Meaningful Use	(7) Medical Device Security	
Harry Torres	(3) Accounts Recievable Reserves (1) Special Project: Gift Shop	(4) Patient Access	(9) Third party Vendor Management (8) Revenue Charge Capture	(11) Credit Balances (12) PTO
Pharmacy/ 340b specialist		(5) 340b Discount Program		(10)Med mgmt & Drug Diversion



**Health Care District of Palm Beach County**  
**Internal Audit - Management Action Plan Status**

**OPEN ACTION PLANS**

AUDIT NAME	ISSUE NAME	ACTION PLAN NAME	ACTION PLAN SUMMARY	DUE DATE	REVISED DUE DATE	ACTION PLAN OWNERS	FOLLOW-UP COMMENTS
AR Allowance	Gaps Exist in the Written Procedures Over Allowance Calculations	Procedures Are Currently Being Updated	Management will update written procedures. Each business unit operates differently and provides distinct services. Written procedures will be consistent across business units where possible, but will reflect the operating environment of each entity.	11/30/2018	2/28/2019	Dawn Richards	
AR Allowance	Aeromed Allowance Estimate Not Based On Sufficient Data	Revise Aeromed Allowance Calculation	Management is currently revising existing procedures and will look to include the necessary components and provisions related to the allowance process, where appropriate. The Aeromed department converted its patient accounting system in April 2018 from TriTech to Golden Hour. Due to system limitations in the old system, Management was unable to obtain sufficient data which includes substantial patient volume to estimate an adequate allowance percentage. Management will recalculate the reserve factor utilizing sufficient data covering at least six months of patient service activity in the Golden Hour system once this historical data is available and will review allowance percentages every six months following the initial calculation.	4/30/2019		Marcia Young	
Gift Shop	Business Liability Insurance for Gift Shop Could Not Be Confirmed	Business Insurance Coverage	Discussion was held with key Auxiliary personnel. They are aware that the gift shop and its personnel are not covered under the District's insurance policy. The District will be providing the Auxiliary Management Team with a sub-lease agreement that will contain standard insurance provisions.	10/31/2018	2/28/2019	Stephanie Dardanello	
Gift Shop	The Medical Center Lacks a Formal Contract/Lease Agreement and Policies With the Auxiliary	Provide Formal Lease Agreement	Key Auxiliary personnel have asked for a proposed lease agreement. The sub-lease agreement will be presented to the Auxiliary and finalized accordingly.	10/31/2018	2/28/2019	Stephanie Dardanello	
Gift Shop	Auxiliary May Not Be In Compliance with IRS Reporting Requirements	Auxiliary Consulting with Professionals	Discussion held with key Auxiliary personnel. They understand the findings and are currently in discussions with an Accountant to file the necessary returns and comply with IRS regulations and federal laws.	12/31/2018	2/28/2019	Stephanie Dardanello	
Medical Device Security Assessment	Medical Device Roles and Responsibilities Not Formalized	Assess Medical Device threats, risks, and controls	The Director of Operations will update the existing Medical Equipment Management plan to include roles and responsibilities from all departments that touch medical devices including IT, Clinical Engineering, Procurement, and Clinical Departments.	3/29/2019		Dennis Dzurovski	
Medical Device Security Assessment	IT Risk Assessment did not Include Medical Devices	Establish Medical Device Governance Committee	IT Management will direct with the external vendor who completes the FY2019 IT Risk Assessment to include medical device threats, risks, and controls.	11/30/2019		Cindy Yarbrough	
Medical Device Security Assessment	Medical Devices are Not on a Separate Network Segment	Provide Quarterly Reporting	IT Management has contracted with CDW Government, Inc. to transform the HCDPBC network from a legacy flat design to a segmented design. The project will include a separate segment to place medical devices.	3/31/2020		Cindy Yarbrough	
Medical Device Security Assessment	Medical Device Inventory Adjustments are Not Reported to HCDPBC Management	Update Existing Medical Equipment Management Plan	HCDPBC management will request Crothall Healthcare to provide quarterly medical device inventory adjustments.	3/29/2019		Dennis Dzurovski	
Medical Device Security Assessment	Security-Related Medical Device Attributes Are Not Maintained	Establish Medical Device Network Segment	IT Management will define security-related medical device attributes to track and maintain on a centralized inventory of connected medical devices through input from IT security review forms and a complete review and documentation of existing connected medical devices.	10/31/2019		Cindy Yarbrough	
Medical Device Security Assessment	IT and Clinical Engineering Do Not Have Oversight Over Biomedical Device Purchases	Track Medical Device Security-Related Attributes	HCDPBC management will require all connected medical device purchases to be analyzed and approved by the IT Department. This control will be formalized through a policy/procedure update.	3/29/2019		Dennis Dzurovski	
340B Discount Program	Policies and Procedures: Formal written direction to align organization behavior with objectives was missing or inadequate.	Maintain and monitor compliance with 340B program requirements.	Management will update policy with enhancements noted in order to convey accurate operations of the 340B program.	12/31/2018	2/28/2018	Hyla Fritsch	

**Health Care District of Palm Beach County**  
**Internal Audit - Management Action Plan Status**

**ACTION PLANS COMPLETED SINCE THE LAST AUDIT COMMITTEE MEETING ON 11/29/18:**

Audit Name	Issue Name	Action Plan Name	Action Plan Summary	Due Date	Revised Due Date	Action Plan Owners	Follow-up Comments
AR Allowance	Lack of Support for Reasonableness of Allowance Factors Calculated for the Clinics and Aeromed	Reasonableness Assessed Every 6 Months for Clinics and Aeromed	<p>The six month period used to estimate the allowance considers all payments received during that time period which relate to charges in that period. About 65% of patient service charges are incurred under the Trauma Care program or Self-Pay, which are adjusted at 100% and 90%, respectively. Medicaid/ Managed Care charges make up about 20% of remaining charges and are collected within 45 days.</p> <p>Management intends to recalculate the allowance percentage every 6 months for Clinics and Aeromed. To assess reasonableness of the established rates, a lookback will compare the recalculated percentages with prior rates for the Clinics and Aeromed.</p>	11/30/2018		Jesenia Bruno	Complete
Meaningful Use	Lakeside Medical Center (EH) Stage 1 Supporting Attestation Details Were Missing	Obtain and Maintain EH Stage 1 missing information	Management will obtain and maintain audit ready details for every EH Stage 1 component identified on the summary attestation page including core, menu and clinical quality measure of MU submitted attestations and store it on a share drive so that it is available to all key stakeholders.	12/15/2018		Janet Moreland	Complete
Meaningful Use	MU Audit Defense Plan Did Not Exist	Produce EH MU Audit Defense Plan	Management will produce a MU Audit Defense Plan for the Hospital (EH) to include key components such as defense response team members, response road map, dedicated and monitored contact notification email address and location of MU attestation supporting evidence.	12/15/2018		Janet Moreland	Complete
Meaningful Use	Clinics (EP) Modified Stage 2 Supporting Attestation Details Not Maintained	Produce and Maintain EP Modified Stage 2 Attestation Details	Management will produce and maintain audit ready details as needed for EP Modified Stage 2 Core and Clinical Quality Measure identified on summary attestation page of submitted attestation and store it on a share drive so that it is available to all key stakeholders.	12/15/2018		Terry Megiveron	Complete
Meaningful Use	MU Audit Defense Plan Did Not Exist	Produce EP MU Audit Defense Plan	Management will produce a MU Audit Defense Plan for the Clinics (EP) to include key components such as defense response team members, response road map, dedicated and monitored contact notification email address and location of MU attestation supporting evidence.	12/15/2018		Terry Megiveron	Complete
Medical Device Security Assessment	Medical Device Governance Not Established	Involve IT and Clinical Engineering Departments in Medical Device Procurement	HCDPBC management will establish a cross functional biomedical device governance committee that includes representatives from IT, Clinical Engineering, Supply Chain, and Hospital Administration that will meet regularly to define policy, procedures, and make key decisions related to biomedical device risk.	1/1/2019		Dennis Dzurovski	Complete
Diversion Risk – Incomplete Referral Documentation 340B Discount Program	Policies and Procedures: Documentation does not exist for referral prescriptions.	Maintain and monitor compliance with 340B program requirements.	Management will follow the referral procedures as documented within the 340B policy and procedure.	12/31/2018		Hyla Fritsch	Complete
	Training: Prescriptions written are not always documented within the EMR.	Maintain and monitor compliance with 340B program requirements.	Management will provide training for providers regarding documentation requirements when writing prescriptions.	12/31/2018		Hyla Fritsch	Complete
			Management will work with Legal/Compliance to determine if any adjustments should be made.	12/31/2018		Hyla Fritsch	Complete
340B Discount Program	Reporting: Documentation to support 340B self-monitoring activities is not retained.	Maintain and monitor compliance with 340B program requirements.	Audit results will be documented and reported.	12/31/2018		Hyla Fritsch	Complete
340B Discount Program	Technology Alignment: Dental clinic utilizes a separate EMR for documenting visits and procedures. The pharmacies do not have access to this EMR.	Maintain and monitor compliance with 340B program requirements.	Management will work with dental providers to gain access to their EMRs so patient health care records can be obtained.	12/31/2018		Hyla Fritsch	Complete



**HEALTH CARE DISTRICT  
FINANCE AND AUDIT COMMITTEE  
January 29, 2019**

**1. Description: FY 2019/2020 Audit Plan and Risk Assessment**

**2. Summary:**

Provide the FY 2019/2020 Audit Plan and Risk Assessment.

**3. Substantive Analysis:**

Crowe Healthcare Risk Consulting's (Crowe) approach to performing risk assessments and developing the proposed Audit Plan is a robust and multidisciplinary process, involving collaboration with multiple levels of management. This process requires in-depth consideration of risks facing the organization, as well as the most efficient and effective use of resources. In developing the Proposed Audit Plan, Crowe considers known risks, along with Management's strategic objectives, to focus the Audit Plan on areas most relevant to the organization. Crowe and Management have discussed risks facing the organization and recommend the FY 2019 Audit Plan for approval.

Crowe and Management acknowledge it is not feasible for Internal Audit to identify and audit every risk for a multitude of reasons. These include, but are not limited to, risk areas under review by others, processes already under improvement initiatives, on-going restructurings and risks not deemed as significant as others at the initial development of the Audit Plan. Crowe recognizes the dynamic and evolutionary nature of the Healthcare District and the healthcare industry. As a result, Crowe and Management will continually assess changes in the environment and emerging risks, recommending adjustments to the Audit Plan throughout the year, as necessary, with a total of 8 audits and 4 projects in FY 2019/2020.

**4. Fiscal Analysis & Economic Impact Statement:**

	<b>Amount</b>	<b>Budget</b>
Capital Requirements	N/A	Yes <input type="checkbox"/> No <input type="checkbox"/>
Annual Net Revenue	N/A	Yes <input type="checkbox"/> No <input type="checkbox"/>
Annual Expenditures	N/A	Yes <input type="checkbox"/> No <input type="checkbox"/>

Reviewed for financial accuracy and compliance with purchasing procedure:

  
Dawn L. Richards  
VP & Chief Financial Officer

**HEALTH CARE DISTRICT  
FINANCE AND AUDIT COMMITTEE  
January 29, 2019**

**5. Reviewed/Approved by Committee or Subsidiary Board:**

Finance and Audit Committee

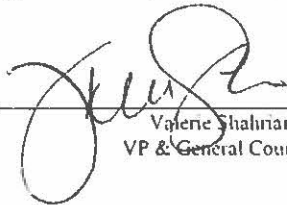
Committee or Board

Date Reviewed

**6. Recommendation:**

Staff recommends the Finance and Audit Committee review the FY 2019/2020 Audit Plan and Risk Assessment and forward to the Board for approval.

Approved for Legal sufficiency:



Valerie Shahinian  
VP & General Counsel



Dawn L. Richards  
VP & Chief Financial Officer

Entity	Category	Quarter	Proposed Audit	Scope	Source	Audit Overview
1 Aeromedical	Finance & Revenue Cycle	2	Billing and Collections	FULL AUDIT	Crowe Risk Assessment	Given that processes and systems in place are manual, and services have been recently contracted to a third party vendor, an external assessment can address control gaps that might exist and consideration of leading practices provided.
2 District	Finance & Revenue Cycle	2	Procurement Controls	FULL AUDIT	Crowe Risk Assessment	Adequate control activities around vendor set-up, purchase authorizations and accounts payable can prevent financial issues for the District.
3 Clinics	Operations	2	Construction Build Out	FULL AUDIT	Crowe Risk Assessment	Construction projects can create risks of overpayments and delays. The primary care build out at LMC has experienced changes to scope and opportunities to enhance processes can help the District achieve organizational objectives.
4 Clinics	Finance & Revenue Cycle	3	Billing and Collections	FULL AUDIT	Crowe Risk Assessment	Given that processes and systems in place are manual, and services have been recently contracted to a third party vendor, control gaps might exist which could be addressed through an external review and consideration of leading practices.
5 Clinics	Operations	3	Mobile Van Operations and Processes	FULL AUDIT	Crowe Risk Assessment	Adequate control activities are important to facilitate the eligibility, patient setup, data collection activities and downstream processes. Risks to consider around this operation and ensure overall effectiveness of the program include proper storage of medication, vehicle downtime parking and security.
6 District	Human Resources	3	Employee Classification	PROJECT	Crowe Risk Assessment	Adequate processes related to employees vs. contractors classification can prevent penalties and fines. Also, appropriate oversight of contractors can mitigate other risks for the District.
7 Aeromedical, LMC, Clinics	Finance & Revenue Cycle	4	Denials Management	FULL AUDIT	Crowe Risk Assessment	To prevent negative financial impacts to the organization, adequate control activities over denials management should be in place. These controls and processes can also mitigate compliance issues and perpetual billing and collecting issues.
8 Clinics	Clinical	4	Quality Improvement	FULL AUDIT	Crowe Risk Assessment	Adequate control activities over the collection and aggregation of data from the individual clinics for reporting and performance improvement process can mitigate risks to deficient quality reporting. Quality metrics used can be compared to leading practices and potential gaps identified.
9 District	Compliance	4	Compliance Effectiveness Assessment	PROJECT	Crowe Risk Assessment	A compliance program assessment has not been conducted by an independent source in several years. A compliance program assessment would assess the effectiveness of the appropriate compliance program and consideration of the 7 elements of an



10	Clinics	Finance & Revenue Cycle	Q1 2020	Medicaid Wrap Process	PROJECT	Senior Leadership	Given the complexities of the Medicaid Wrap filing, completeness of the data set being incorrect could subject the District to incorrect filing and receipts.
11	LMC	Operations	Q1 2020	Drug Diversion	FULL AUDIT	Crowe Risk Assessment	Appropriate controls over medication management and controlled substances can mitigate significant financial, compliance, patient care, and reputational impacts. Controls over ordering, dispensing, administering drugs, maintaining inventory and monitoring diversion are required to avoid patient care issues and compliance violations.
12	Clinics	Clinical	Q1 2020	Payer Quality Incentive Bonuses	PROJECT	Senior Leadership	Payer quality reporting controls should support incentive bonuses received are accurate and represents the full amount allowable.

Time Table By Calender Quarter

Crowe Resource	Q2	Q3	Q4	Q1 2020
Certified Construction Auditor (CCA)	(1) Construction Build Out			
Harry Torres	(2) Billing and Collections (Aeromed) (3) Procurement Controls	(4) Billing and Collections (Clinics) (5) Mobile Van Operations (6) Employee Classification	(7) Denials Management	(10) Medicaid Wrap Process
Clinical Specialist			(8) Clinical Quality	
Pharmacy Specialist				(11) Drug Diversion
Compliance Specialist			(9) Compliance Effectiveness Assessment	(12) Payer Quality Incentive Bonuses





Smart decisions. Lasting value.™

# Healthcare District of Palm Beach County

FY 2019/ 2020

Risk Assessment

For Finance and Audit Committee

Preliminary Discussion {Draft}

January 2019

# Contents

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- Risk Assessment Approach
- Risk Ranking Example
- Healthcare District Interviews and Team
- Key Strategies of Healthcare District and Risk Indicators
- Top Risks by category (Compliance, Financial, Operational, Information Technology)
- Proposed Audit Plan
- Observations

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# Risk Assessment Approach

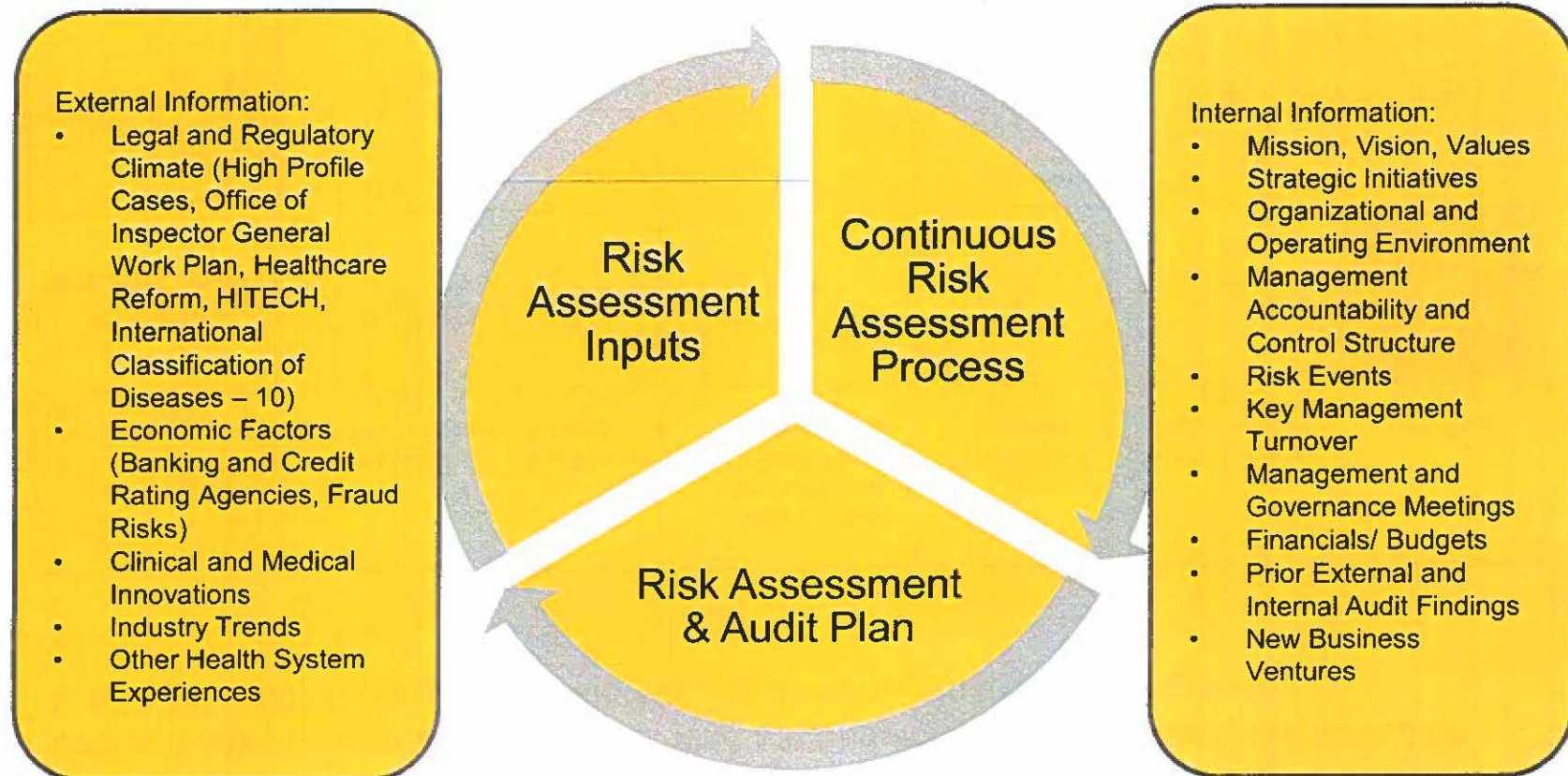
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- From November through mid December 2018, Crowe Healthcare Risk Consulting (Crowe) compiled and assessed risk areas for reporting to Executive Management and Governance and to highlight key risk areas to potentially include in an Internal Audit Work Plan. The process included gaining an understanding of:
  - Key strategic objectives
  - Environmental and/or emerging industry trends
  - Organization and operating environment
  - Management accountability (control environment)
  - Legal and regulatory climate
- To achieve the above, Crowe:
  - Assigned a multi-disciplined specialist team.
  - Obtained District documents, including strategic plan, annual compliance work plan, prior year risk assessment, financial statements, among other key documents.
  - Interviewed key Executives and the Audit and Compliance Committee Chair.



# Risk Assessment Framework

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# Risk Ranking Example

Crowe's risk assessment and risk ranking methodology evaluates each risk based on five factors with scoring at specific weights as shown in the following example:

	Strategic or Business Impact (30%)	Business Environment Complexity (15%)	Mgt. Control Environment, Historical Performance (25%)	Prior Audits, Reviews (15%)	Governance and Mgt. Concern (15%)	Weighted Average
Physician Arrangements	4	5	4	5	5	4.45
Cybersecurity	5	5	4	2	3	4.0

# The District Interview Summary

- Brian Lohmann, Chairman Finance and Audit Committee
- Darcy Davis, Chief Executive Officer
- Val Shahriari, VP & General Counsel
- Dawn Richards, VP & Chief Financial Officer
- Ellen Pentland, Chief Compliance & Privacy Officer
- Cindy Yarborough, Chief Information Officer
- Dr. Daniel Padron, Chief Medical Officer LMC
- Dr. Belma Andric, VP & Chief Medical Officer
- Thomas Cleare, VP of Strategy
- Steven Hurwitz, Vice President of HR and Communications
- Karen Harris, Vice President of Field Operations
- Shelly Ann Lau, Administrator Healey Center
- Stephanie Dardenello, Hospital Administrator
- Dr. Noel Stewart, FQHC Medical Director
- Kenneth Schepke, Aeromed Medical Director
- Hyla Frisch, Director, Pharmacy
- Marcia Young, Director, Revenue Cycle Management
- Eileen Perry, Director, Utilization Management
- Mina Bayik, Director, Finance
- Terry Megiveron, Director, Practice Operations
- Janet Moreland, Director of Nursing
- Bruce Sample, Radiology Manager
- Dennis Dzurovski, Director of Facilities
- Gerry Pagano, Director, Aviation Operations
- Jesenia Bruno, Director, Accounting
- Lisa Sulger, Public Records Manager
- Manuel Diaz, HIM Manager
- Victoria Pruitt, Director, Corporate Risk Management
- Tabatha McCallister, Manager of Admitting
- Kenneth Healey, Finance Manager
- Robert Forchin, Manager, Accounting & Purchasing
- Dawn Michelle Wainz, Business Office Manager
- Carlos Hernandez, RSM Partner
- C. Bert Bennett, Draffin & Tucker Partner

# Crowe Risk Assessment Team

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- Scott Gerard, CPA, Senior Vice-President
- Harry Kimball, CPA, Vice-President
- Harry Torres, CPA, Senior Manager
- Kelly Smith, CPA, Director, Clinical
- Charlene Stinnet, RN, Senior Manager, Clinical
- Delena Howard, CPC, COC, CCS, CSS-P Director, Compliance
- Chris Wasik, CIA, CFE, Director, 340B & Pharmacy
- Joe Miko, CIA, CISA, Senior Manager, IT
- Rosanna Coppola, CPA, Manager



# Strategic Imperatives of the District

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As part of the risk assessment, Crowe reviewed the strategic plan of the organization. Each interview consisted of time spent discussing risk relative to the strategic plan, and each risk is aligned with factors that could prevent the organization from achieving its objectives.

The District four strategic focus areas:

- Find our “True North” – Determining our direction in the community is driven by our role as the health care safety net
- Stay in our lane – Focus on the services offered and let others deliver what we cannot or do not provide
- Safe riding, hard racing – Save taxpayer dollars
- Quality and value is remembered long after price is forgotten – Be cost effective and resourceful to accomplish the mission

# Healthcare Industry and District Specific Risk Indicators

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- Pace of organizational changes
- Continued confidence in direction of management and culture
- Focus on core operations – increased concentration in quality, with an openness to exploring new ways of delivering services to the community
- Shift in population health strategies
- Regulatory enforcement initiatives (e.g. OIG Work Plan)
- Significant investment in new technology (now and continuing)
- Considerations on reimbursement and uncertainty in environment

***Effective systems of internal controls help  
mitigate operational, financial, compliance and information  
technology risks***



# Fiscal Year 2019/ 2020 Proposed Audit Plan

	Entity	Category	Quarter	Proposed Audit	Scope	Risk To Be Addressed by Audit/ Project
1	Aeromedical	Finance & Revenue Cycle	2	Billing and Collections	FULL AUDIT	Given that processes and systems in place are manual, and services have been recently contracted to a third party vendor, an external assessment can address control gaps that might exist and consideration of leading practices provided.
2	District	Finance & Revenue Cycle	2	Procurement Controls	FULL AUDIT	Adequate control activities around vendor set-up, purchase authorizations and accounts payable can prevent financial issues for the District.
3	Clinics	Operations	2	Construction Build Out	FULL AUDIT	Construction projects can create risks of overpayments and delays. The primary care build out at LMC has experienced changes to scope and opportunities to enhance processes can help the District achieve organizational objectives.
4	Clinics	Finance & Revenue Cycle	3	Billing and Collections	FULL AUDIT	Given that processes and systems in place are manual, and services have been recently contracted to a third party vendor, control gaps might exist which could be addressed through an external review and consideration of leading practices.
5	Clinics	Operations	3	Mobile Van Operations and Processes	FULL AUDIT	Adequate control activities are important to facilitate the eligibility, patient setup, data collection activities and downstream processes. Risks to consider around this operation and ensure overall effectiveness of the program include proper storage of medication, vehicle downtime parking and security.
6	District	Human Resources	3	Employee Classification	PROJECT	Adequate processes related to employees vs. contractors classification can prevent penalties and fines. Also, appropriate oversight of contractors can mitigate other risks for the District.

# Fiscal Year 2019/ 2020 Proposed Audit Plan

Entity	Category	Quarter	Proposed Audit	Scope	Risk To Be Addressed by Audit/ Project
7	Areomedical, LMC, Clinics	Finance & Revenue Cycle	Denials Management	FULL AUDIT	To prevent negative financial impacts to the organization, adequate control activities over denials management should be in place. These controls and processes can also mitigate compliance issues and perpetual billing and collecting issues.
8	Clinics	Clinical	Quality Improvement	FULL AUDIT	Adequate control activities over the collection and aggregation of data from the individual clinics for reporting and performance improvement process can mitigate risks to deficient quality reporting. Quality metrics used can be compared to leading practices and potential gaps identified.
9	District	Compliance	Compliance Effectiveness Assessment	PROJECT	A compliance program assessment has not been conducted by an independent source in several years. A compliance program assessment would assess the effectiveness of the compliance program across the organization in consideration of the 7 elements of an appropriate compliance program and consideration of the federal sentencing guidelines.
10	Clinics	Finance & Revenue Cycle	Medicaid Wrap Process	PROJECT	Given the complexities of the Medicaid Wrap filing, completeness of the data set being incorrect could subject the District to incorrect filing and receipts.
11	LMC	Operations	Drug Diversion	FULL AUDIT	Appropriate controls over medication management and controlled substances can mitigate significant financial, compliance, patient care, and reputational impacts. Controls over ordering, dispensing, administering drugs, maintaining inventory and monitoring diversion are required to avoid patient care issues and compliance violations.
12	Clinics	Clinical	Payer Quality Incentive Bonuses	PROJECT	Payer quality reporting controls should support incentive bonuses received are accurate and represents the full amount allowable.



# Top Risks – Finance & Revenue Cycle

Risk Area	Rationale
Revenue Cycle -- Billing and Collections (On plan)	<ul style="list-style-type: none"> <li>Given that processes and systems in place are manual, there could be control gaps which could be addressed through an external review and consideration of leading practices.</li> <li>Gross Accounts Receivable monitoring could be enhanced to better trouble shoot issues.</li> </ul>
Charity Care and Appropriate Classification	<ul style="list-style-type: none"> <li>Appropriate classification of uncompensated care is an important component of cost reporting, which has downstream impacts. The reporting accuracy starts with appropriate classification of status at the front end.</li> </ul>
Denials Management / Expected Reimbursement (On plan)	<ul style="list-style-type: none"> <li>Denial rates are not high but increasing.</li> <li>Lack of visibility if denial related write-offs are charged to contractual adjustments.</li> <li>Denials Management processes represent a high risk across the healthcare industry.</li> <li>Enhanced controls and processes can have positive financial impact.</li> </ul>
Medicaid Wrap (On plan)	<ul style="list-style-type: none"> <li>Medicaid premium assistance programs require filing of a complex data set, inclusive of capitated payments received, total fee for service payments received, other payments, total Medicaid visits, Medicaid members seen and assigned.</li> <li>Errors in Payments and other pertinent data collected for the Medicaid Wrap program could cause incorrect or inappropriate calculations and/or filing for the Medicaid Wrap incentive.</li> </ul>
Billing/ Collections with Palm Beach County Department of Health	<ul style="list-style-type: none"> <li>Given complexities in the specific transactions between the Healthcare District and the county Department of Health, an independent assessment of the billing and collections might be warranted to ensure appropriate controls are established and functioning as Management intends.</li> </ul>
Procurement controls (On plan)	<ul style="list-style-type: none"> <li>Control activities around vendor set-up that are designed properly and working effectively mitigate risks related to purchase authorizations and accounts payable which prevent financial issues for the District.</li> <li>IA performed vendor management / contract audit in prior audit plan.</li> </ul>
District Care – Medical claims processing	<ul style="list-style-type: none"> <li>Fairly manual process.</li> <li>Claims management process over District Cares is currently being restructured</li> <li>While claims will be managed, it will be critical to have appropriate oversight of the medical claims process.</li> </ul>

# Top Risks – Operational

Risk Area	Rationale
Revenue Charge Capture – Med/Surg, Emergency, Central Supply, Clinical Lab, CT Scan, Primary Care, Aeromed	<ul style="list-style-type: none"> <li>• Areas of improvement exist in some of the high dollar, high complexity charge capture areas.</li> <li>• Charge capture procedures need to support revenue recognition goals.</li> <li>• Challenges may exist despite EHRs and ICD 10. Concerns are accuracy and timeliness.</li> <li>• Audit should incorporate data analytics and continue from the FY 18 controls assessment.</li> </ul>
Pharmacy – Drug Diversion (On plan)	<ul style="list-style-type: none"> <li>• LMC is undergoing a pharmacy controls enhancement process.</li> <li>• Given diversion risks and a new control environment, an independent review can assess its effectiveness and provide additional leading practices to impede potential diversions.</li> </ul>
340B Compliance	<ul style="list-style-type: none"> <li>• Regulation within the 340B process are complex and changing.</li> <li>• Education of regulations can be provided to 340B steering committee to enhance productivity of ongoing meetings.</li> <li>• Annual external audit is expected from HRSA.</li> <li>• Audit from Crowe 340B could qualify for annual HRSA audit, as well as allow professionals to provide additional education.</li> </ul>
Human Resources – New employee set up and HR specific roles	<ul style="list-style-type: none"> <li>• Proper controls around role restrictions prevent unauthorized HR approvals, such as pay status, new hires.</li> <li>• Properly designed controls can mitigate risks related to creating employees.</li> <li>• Control activities around key HR processes should include proper segregation of duties.</li> </ul>
Facilities Management – Construction Build Out (On plan)	<ul style="list-style-type: none"> <li>• Appropriate procedures supports good maintenance practices over the facilities management function</li> <li>• Construction projects can create risks of overpayments and delays. With scope changes experienced to the new build out at LMC for a primary care clinic, a facilities management audit can enhance the overall effectiveness of the construction function for the District.</li> </ul>
Mobile Van Operations Process (On plan)	<ul style="list-style-type: none"> <li>• As operations progress, it is critical to monitor appropriateness and ensure patient safety and quality is maintained and patient data is captured accurately.</li> </ul>
Healy – Patient leave	<ul style="list-style-type: none"> <li>• Risk that patients are not appropriately signed out and in when leaving the facility.</li> </ul>



# Top Risks – Information Technology

Risk Area	Rationale
Cybersecurity	<ul style="list-style-type: none"> <li>One of the highest risk areas industry wide and executives express concern.</li> <li>Organization continuously adapts its software and IT needs to increase its security control effectiveness</li> <li>Multiple system interface and physical locations complicates the security landscape</li> <li>Currently working with consultant on cybersecurity matters for FY 19.</li> </ul>
Biomedical Device Management and Security	<ul style="list-style-type: none"> <li>High-risk industry wide related to patient safety, HIPAA privacy and network security.</li> <li>Device Management coordinates directly with IT leadership and the new Medical Device Committee</li> <li>The District has implemented network segmentation efforts.</li> <li>Continued review for leading practices and appropriate controls.</li> </ul>
Mobile Device Usage	<ul style="list-style-type: none"> <li>Unauthorized mobile device, and other non approved electronic tools used for clinical purposes creates security and privacy exposures.</li> </ul>
Unencrypted ePHI Transmission	<ul style="list-style-type: none"> <li>Unencrypted ePHI transmission stored in shared network files creates exposure of security and privacy breaches if an external network intrusion were to intercept an internal transmission of data.</li> <li>Control activities should prevent the unauthorized access of ePHI that is stored on shared drives.</li> </ul>
End User Education	<ul style="list-style-type: none"> <li>Lack of end user education on IT Security related to use and associated risks of internal network share drives.</li> <li>Document retention policies should address the storage of stale data by users. Controls around scalability can prevent increases in business documents and stored data over time from becoming unmanageable.</li> </ul>
Wi-Fi Hotspots	<ul style="list-style-type: none"> <li>Wi-Fi hotspots pose potential risk for users to gain access.</li> </ul>
IT Third Party Vendor Contract	<ul style="list-style-type: none"> <li>Oversight of IT Third Party Vendor contractual terms and conditions may require further monitoring for contractual SLA compliance and HDCPB IT policies and procedures.</li> </ul>
Role Based Provisioning	<ul style="list-style-type: none"> <li>Effective control activities and procedures for role-based provisioning &amp; de-provisioning of user access to applications and networks prevent unauthorized access to sensitive data and can mitigate fines and reputational damage to the organization. Provisioning of a formal User Access Management software is in progress.</li> </ul>
IT Generated Reports	<ul style="list-style-type: none"> <li>Procedures in place should ensure that IT generated revenue reports are complete and accurate to support management reliance on reports.</li> </ul>



# Top Risks - Compliance

Risk Area	Rationale
Compliance Effectiveness Assessment (On plan)	<ul style="list-style-type: none"> <li>A compliance program assessment has not been conducted by an independent source in several years.</li> <li>A compliance program assessment would assess the effectiveness of the compliance program across the organization in consideration of the 7 elements of an appropriate compliance program and consideration of the federal sentencing guidelines.</li> <li>Recommendations for enhancement and leading practices would be provided as a result of this project.</li> </ul>
Coding Compliance – Inpatient/ ER/ Category 2	<ul style="list-style-type: none"> <li>When coding monitoring procedures are reduced, related risks increase.</li> <li>Higher risk around the billing specialty procedures (properly coded and billed and completely captured).</li> </ul>
Physician Compensation and Medical Directorships	<ul style="list-style-type: none"> <li>Manual time sheets utilized at the hospital for certain physician and/or medical director time reporting, can increase the risk of paying a physician who has not submitted a timesheet.</li> <li>Providing payment to a physician without a log is a compliance violation and a high risk across the healthcare industry.</li> <li>Stark Law risks related to compliance and accounting for Medical Directorships and Physician Recruiting agreements.</li> </ul>
Physician FMV	<ul style="list-style-type: none"> <li>Physician contracts and compensation should be at appropriate levels. Inability to maintain the agreement and monitor relationships to FMV can result in penalties and fines from regulators.</li> <li>The District has various arrangements and utilizes mostly contracted physicians.</li> <li>The District Legal Counsel and Compliance are involved with ongoing reviews.</li> </ul>
Patient documentation - Outpatient & clinics	<ul style="list-style-type: none"> <li>Documentation of patient information can at times be filed within incorrect patient chart when scanned.</li> <li>Patient information and documentation inaccurately filed affects the reliability of the data included in the patient file.</li> </ul>
Employee classification (On plan)	<ul style="list-style-type: none"> <li>Classification between employees vs. contractors, that is not aligned with regulatory rules/requirements can result in penalties and fines.</li> </ul>

# Top Risks - Clinical

Risk Area	Rationale
Quality Measures - LMC	<ul style="list-style-type: none"> <li>Performance Improvement (PI) process in general has not been assessed by IA. Good foundational controls are important in the individual processes around infection, readmission, LOS, etc.</li> <li>Audit would look at how PI priorities and goals are determined, how quality issues are analyzed for root cause, tracking and monitoring of performance, how accountability for corrective action is assigned and enforced, etc. From there, more specific audits could be performed (either this cycle or future years) around key quality measures where the District might be underperforming.</li> </ul>
Quality Improvement – Clinics (On plan)	<ul style="list-style-type: none"> <li>Clinic operations and quality functions that are not fully centralized and/or standardize can result in process gaps and risk quality improvement objectives.</li> <li>An audit in this area would look at process to collect and aggregate data from the individual clinics for reporting and PI purposes. The concerns surround the process, rather than around specific care delivery problems.</li> </ul>
Instrument Sterilization	<ul style="list-style-type: none"> <li>High risk industry wide</li> <li>Independent audit would assess the level of infection prevention surveillance.</li> <li>Such areas to include in scope could be GI, Radiology, Cardiopulmonary, Dental, etc.</li> </ul>
New Contract Physician procedures	<ul style="list-style-type: none"> <li>High turnover of LMC physicians recently due to change in culture, non-renewal of contracts, etc.</li> <li>Currently have locum tenens in surgery, anesthesiology, radiology; brand new hospitalists.</li> </ul>
Workplace violence	<ul style="list-style-type: none"> <li>Incidents broadly in the workplace have been on the rise.</li> <li>Risk to employee, visitor and patient safety exists given the overall increase in incidents.</li> </ul>
Discharge procedures	<ul style="list-style-type: none"> <li>Adequate assessment procedures can mitigate risks around premature discharge and/or inadequate support following discharge.</li> <li>Procedures should be in place to support efforts that reduce readmission scores.</li> <li>Quality of discharge practices and follow up/programs can impact patient safety.</li> </ul>
Payer Quality Incentive Bonuses (On plan)	<ul style="list-style-type: none"> <li>Payer reporting controls should support incentive bonuses received are accurate and represents the full amount allowable.</li> </ul>

# Observations

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As a result of our interviews, we have made the following observations which represent potential areas of improvement or leading practices based on our experiences in the healthcare industry.

- LMC – no abduction bands for newborns was raised as a result of our interviews. While matching identification tags are placed on newborn and mother, there are no bands to trigger alarms if a newborn was inappropriately taken. A mitigating factor are locked doors, which have to be released by a security guard, and a “code pink” security alert exists which would lock down the Hospital in an event.
- The District should consider incorporating the annual strategic plan into the District’s Operational Budget process, which will assist in communicating strategy to key levels of management in the organization.
- Crowe did not observe a denials management committee. Committee would review pervasive denials issues and formulate systemic corrective plans. A mitigating committee exists, a Utilization Review Committee. It should be considered if this is fully performing the functions of a denials management committee.



# Next Steps

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- Obtain approval for the proposed internal audit plan by the District Leadership
  - Obtain approval for the proposed internal audit plan by Finance & Audit Committee.
  - Share approved Internal Audit Plan with Leadership and Management after Finance & Audit Committee approval.
  - Communicate internal audits with process level Management and Executives over each of the areas selected for 2019/20 internal audit coverage.
  - Confirm timing of internal audit projects approved for 2019/20.
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# Questions?

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